LIFESTYLE

t·r·e·n·d™ DIABETES

DIABETES AND TRAVEL

WHY IS THIS LEAFLET FOR YOU?

Having diabetes should not stop you from travelling and enjoying your holiday. This leaflet will give you essential information on:

- Getting ready to travel
- Managing your journey
- Insulin and travelling across time zones
- While you are away
- Useful contacts for more information

GETTING READY TO TRAVEL

- **Travel insurance:** always declare diabetes as a pre-existing condition and list all your medications.
- **Take a copy of your repeat prescription** with you, especially if you are taking injections for your diabetes. ask a member of your diabetes specialist team or GP practice for a letter stating you will need to carry needles, insulin, monitoring equipment and treatment for hypoglycaemia in your hand luggage.
- **If you take insulin, pack more than you would normally need for the period you are away**, as your insulin may degrade quicker when in warmer climates and your insulin requirements may alter.
- **Ensure you pack your glucose-testing meter, finger-pricking device and lancets, testing strips and sensors (if you use them)** (and ketones if you have type 1 diabetes) **and needles** if you are using injection therapy. **A spare glucose meter** is useful in case of loss or malfunction.
- **Consider purchasing a cool bag** for insulin and injectable therapy if you are going to somewhere hot, especially if you will be carrying insulin with you during the day. **Consider** how you will safely dispose of your used sharps
- **For prolonged stays** it may be useful to arrange shipping of equipment to where you are staying. If back packing or travelling within a country consider contacting the local British Embassy.
- **Find out some useful diabetes phrases** in the language of your destination in case of emergencies or download a translation app.
- **It is not necessary** to request a special diabetes meal while travelling. If you present to customer services with evidence of your diabetes - they will provide a hidden disabilities lanyard which alerts security staff that you have a condition (diabetes) and this can make the clearing processes a little less stressful.
- **As the UK has now left the EU** the rules regarding travel will also have changed. You can use the **Brexit checker www.gov.uk/brexit** to see if there are things you need to check or change before you travel.
- **When traveling to the EU** UK residents still have access to healthcare with use of European Health Insurance Card (EHIC) and Global Health Insurance Card's (GHIC). However, it is strongly advised that you get travel insurance as not all countries give the same level of cover as the NHS and certainly don't cover things like emergency repatriation (if you need to come home).

MANAGING YOUR JOURNEY

If you inject insulin or other injectable therapy:

- Place it in a transparent plastic bag with any needles or syringes you are carrying in your hand-luggage and show it to airport security staff. Keep your repeat prescription or letter from your diabetes team or GP available in case you need to authenticate why you are carrying these items.
- Carry insulin and injectable therapy in your hand-luggage, as they may get frozen in the hold of the aeroplane which causes the medication to be ineffective.
- If you are travelling with someone else, share your medication and equipment with them in case your hand luggage is lost or stolen.

If you are taking treatment that can cause hypos:

- Carry fast and slow acting glucose with you at all times.
- You can take glucose tablets / jelly babies through customs as long as they are in the original packaging. Carry starchy snacks too (e.g. plain biscuits) in case of delays on your journey where you are unable to obtain a meal.
- If you are travelling alone, consider informing the air stewards that you have diabetes if you are taking a treatment that can cause hypos.

Long-haul flights may mean you will need to adjust the timing of your insulin injections:

- If the time difference is **less than 4 hours** from UK time, just inject at your usual times when you are travelling and during your holiday.
- If the time difference is **greater than 4 hours**, you will need to consider how to manage your insulin injection times. Travelling from **east to west** results in a longer day, so your insulin levels can drop too low and your blood glucose levels will rise. Travelling from **west to east** results in a shorter day, so your insulin injections could be too close together resulting in hypos. See the table on the next page for some more specific advice, but also discuss your journey plan with your diabetes specialist nurse or practice nurse.

TRAVELLING ACROSS TIME ZONES WITH INSULIN

Insulin regimen	Travelling east to west (longer day)	Travelling west to east (shorter day)
Once-daily long-acting insulin	**Keep your watch at UK time while travelling** and give at your usual UK time. Once you arrive at your destination, move to your usual injection time (e.g. bedtime)	
		You may need to give a smaller dose on the first day, as your previous dose may still be active
Twice daily mixed insulin	Take your normal morning and evening doses while travelling, and then take half your evening dose with a meal when you arrive	Take your normal morning and evening doses while travelling
Long-acting insulin once or twice daily plus rapid/ short-acting insulin with meals	Inject rapid/short-acting insulin with any meal that contains carbohydrate, no matter what time of day or night If you take once-daily long-acting insulin, keep your watch at UK time and give it at your usual time until you arrive at your destination	
	Move to a convenient time, but if this is **longer than** 24 hours since your last injection, you may need to give a small dose of short-acting insulin to control blood glucose levels	Move to a convenient time, but if this is **shorter than** 24 hours since your last injection, you may need to give a smaller dose of short-acting insulin with your last meal to avoid hypos
	If you inject long-acting insulin twice a day, keep injection times roughly 12 hours apart while travelling.	

If you are on **insulin pump therapy**, travel between different time zones becomes much easier. you should wait until you land in the country you are visiting and then change the settings in your insulin pump to the local time. this will ensure your settings remain inkeeping with your insulin requirements at different times of the day.

Consider switching your pump to flight mode during take off, flight and landing.

WHILE YOU ARE AWAY

- **Keep monitoring** as you may be eating different foods and have different levels of activity so your diabetes control may change. You may need to adjust your insulin if your blood glucose levels are much higher or lower than usual.
- **Be aware that alcohol can increase your risk of hypos if you drink and take insulin or certain diabetes tablets.** Alcohol and increased physical activity (e.g. drinking and dancing) are particular risks for hypos.
- **Always wear swim-shoes or sandals even when swimming in the sea.** Cuts and open areas on feet can quickly become infected and cause high blood glucose levels. Walking barefoot on hot sand or tiles can also cause blisters.
- **Be aware that insulin may be absorbed more quickly in hot weather.**
- **Remember to inspect your feet daily.** People who have nerve damage to their feet may not be aware of any injury.

If you become unwell, your blood glucose levels are likely to rise.

- Monitor your glucose at least 4 hourly (and ketones if you have type 1 diabetes)
- Rest and drink at least 100 mL of sugar-free fluids each hour.
- If you are unable to eat meals, replace these with easily digested foods such as ice-cream, smoothies or juices.
- If you take insulin, you will need to increase your doses if your blood glucose levels are higher than usual (especially if you have type 1 diabetes and have a significant amount of ketones in the blood or urine).

Discuss how you can manage days when you are unwell with your diabetes specialist nurse or practice nurse.

- In some countries, blood glucose is measured in mg/dL (not mmol/L as in the UK). The mg/dL figure is much higher than the equivalent mmol/L and may lead you to make the wrong decision about your diabetes treatment if you think the figure is mmol/L. You can convert:

  mg/dL to mmol/L by dividing by 18
  mmol/L to mg/dL by multiplying by 18

- **If you use an insulin pump:** prior to travelling contact your diabetes specialist nurse or insulin pump helpline for advice about travelling with your pump. They will be able to advise you regarding pump protection particularly when going through body scanners or x ray equipment. Always inform staff that you wear an insulin pump when passing through security. Make sure you pack insulin pen devices and needles in your hand luggage, along with your quick-acting and long-acting insulin in your hand-baggage in case of pump failure while you are on holiday. Often if you contact travel companies in advance they will increase hand luggage allowance.

USEFUL CONTACTS:

- Diabetes UK provides information on all aspects of living with diabetes including travel and driving: www.diabetes.org.uk
  Diabetes UK: 0345 123 2399
- You can use Diabetes Travel to plan the changes you need to make to the times of your insulin injections when travelling across time zones: www.diabetestravel.org
- The Medical Shop sells cool packs for insulin called Frio packs: www.medicalshop.co.uk and www.friouk.com

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