

TRAVELING WITH DIABETES

Although many people enjoy traveling, people with diabetes may fear or avoid it. Diabetics must make special travel arrangements that the non-diabetic person doesn't have to. However, advanced planning can help minimize complications and prevent emergencies that may occur while away from home.

One of the most important things to do is see your health care provider before your trip, preferably 4-6 weeks before. This will allow them to assess your diabetes control, let them give you instructions about managing your diabetes while abroad, and give guidelines about common problems that can arise on travel. It is a good idea to bring your travel companion to the visit. You also may want to meet with a Diabetes Educator or Nutritionist to go over food choices you will make on your trip.

Traveling with insulin isn't hard, but there are things you should remember. A vial of insulin will last 30 days at room temperature. If you are traveling to an area with a hot climate, you should check to see if your room has a refrigerator or air conditioning. If you run out or break a vial, you can always get more. However, different countries may not carry the same kind of insulin you use. Many places have U-40 or U-80 insulin, which is a different concentration than the U-100 used in the U.S. You can use these insulins, but you must get syringes to match. Take the same number of units as you usually do. Always carry a letter from your provider stating you have diabetes and you use insulin and syringes. It is also a good idea to have a written prescription for your medications and supplies.

Generally no adjustments in medications are needed if you are traveling north and south or crossing less than 6 time zones. If you are going more than 6 time zones, this can disrupt meal and medication schedules. You will need to check your blood sugars more often. If you take oral medications, maintain dosing schedule according to the local time. It may be safer to run your sugars a little on the high side.

If you take insulin, keep your watch on your local (home) time until the first morning at your new destination. If going east, you will lose several hours when you arrive, so you may need less insulin than usual. Take your usual AM dose when you leave. Take your usual PM dose at the usual (home) time. Then next AM (new local time), take 2/3rds of the usual AM dose. Check sugar 10 hours later. If greater than 240, take remaining 1/3 with usual PM dose. If less than 240, just take usual PM dose.

If going west, take AM dose. Wait 10-12 hours and take PM dose with a meal or snack. After 6 hours, check your sugar. If >240, take 1/3 of the AM dose. If less than 240, don't take any insulin. On first AM (new local time), take usual AM dose.

Some general information:

Bring enough extra medication for at least 1 week.

Always wear a medical alert identification stating you have diabetes.

Carry your medications and supplies in carry-on luggage.

Pack vials of insulin carefully. Wrap them in socks or soft clothes.

If going by car, don't put insulin in the trunk or on the dashboard.

Carry snacks or glucose tabs wherever you go.

Inspect your feet often, especially if you are doing a lot of walking.

Stay well hydrated.

Learn key phrases in the local language like: "I have diabetes", "I need sugar", and "I need a doctor".

Check to see if there are any military bases nearby where you can be treated.

The ADA web site at WWW.diabetes.org is a great resource and has more information on traveling.