WHY IS THIS LEAFLET FOR YOU?

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 your practice nurse or diabetes specialist nurse for a letter stating you may need to carry needles in your hand-luggage.
- **If you take insulin**, pack more than you would normally need for the period you are away, as you may need to alter your dose while away.
- **Pack your glucose-testing meter, finger-pricking device and lancets, testing strips for glucose** (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.
- **Find out some useful diabetes phrases** in the language of your destination in case of emergencies.
- **It is not necessary** to request a special diabetes meal while travelling.
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 specialist nurse or practice nurse 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 glucose with you at all times. Glucose tablets or jelly babies are ideal as fluid treatments may be taken from you as you go through airport security. 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

<table>
<thead>
<tr>
<th>Insulin regimen</th>
<th>Travelling east to west (longer day)</th>
<th>Travelling west to east (shorter day)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Once-daily long-acting insulin</td>
<td><strong>Keep your watch at UK time while travelling</strong> and give at your usual UK time. Once you arrive at your destination, move to your usual injection time (e.g. bedtime)</td>
<td>You may need to give a smaller dose on the first day, as your previous dose may still be active</td>
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<tr>
<td>Twice daily mixed insulin</td>
<td>Take your normal morning and evening doses while travelling, and then take half your evening dose with a meal when you arrive</td>
<td>Take your normal morning and evening doses while travelling</td>
</tr>
<tr>
<td>Long-acting insulin once or twice daily plus short-acting insulin with meals</td>
<td>Inject 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.</td>
<td>Move to a convenient time, but if this is <strong>longer than</strong> 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 <strong>shorter than</strong> 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.</td>
</tr>
<tr>
<td></td>
<td>If you inject long-acting insulin twice a day, keep injection times roughly 12 hours apart while travelling.</td>
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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. People who have nerve damage to their feet may not be aware of any injury.

Be aware that insulin may be absorbed more quickly in hot weather.

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.

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 to manage days when you are unwell with your diabetes specialist nurse or practice nurse. You can download a leaflet about diabetes and illness from the TREND-UK website overleaf.

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: contact your diabetes specialist nurse or insulin pump helpline for advice about travelling with your pump, especially for going through body scanners in airport security departments and crossing time zones. Always inform staff that you wear an insulin pump when passing through security. Make sure you pack insulin pen devices and needles in your luggage, with quick-acting and long-acting insulin in your hand-baggage in case of pump failure while you are on holiday.
USEFUL CONTACTS:

1. Diabetes UK provides information on all aspects of living with diabetes including travel and driving: www.diabetes.org.uk
   Diabetes UK: ☎ 0345 123 2399

2. 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

3. The Medical Shop sells cool packs for insulin called Frio packs: www.medicalshop.co.uk and www.friouk.com

4. TREND-UK has downloadable leaflets about hypoglycaemia and managing illness: www.trend-uk.org

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