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Diabetes and Travel

Having Type 1 or Type 2 diabetes usually isn't a barrier to any worldwide travel, but it is important to make the right preparations to minimize any potential problems.

Before travelling

You should arrange an appointment with your doctor, hospital consultant or diabetic nurse to review control of your diabetes and discuss your self-treatment plan in view of your overseas trip. This should involve a schedule for monitoring your diabetes and to set strategies for changing your insulin dosage. It is important to consider flights across time zones and how to adjust your treatment regime accordingly.

You may wish to carry some diabetes identification (a medic alert bracelet or pendant, or diabetic ID card) and carry a letter from your doctor. Both

should say you have diabetes and the medication you need for treatment, and the equipment you might be carrying.

Plan ahead to obtain adequate supplies of insulin or other medication and equipment such as needles, lancets, test strips etc. to cover the whole duration of your trip, plus extra in case of delays, loss or theft or increase in dose.

Check that there are good local health facilities in the event of an emergency. Our clinicians are able to help provide this information by calling the Anvil Assistance line. If you are travelling with colleagues it is best to discuss your condition and emergency plan with them.

If you are unable to take full medication supplies due to the length of your trip, plan how you will obtain continued supplies. Find out if your current insulin preparation is available at your destination, or if you will have visitors that are able to bring further supplies (in accordance with individual country regulations – see also our 'Carrying Medications Internationally' factsheet). If not, you may need to consider changing to a different insulin preparation that will be available locally, which should be done a few months before departure.

Review your travel vaccines in plenty of time before you leave (ideally 4-6 weeks prior to departure).

If travelling to a malarious area, be very strict about taking malaria prophylaxis and avoiding mosquito bites, as malaria can upset diabetic control. Also talk to your doctor about taking standby medication for travelers' diarrhea, and anti-sickness tablets as vomiting can affect your control.

Take a first aid kit to quickly treat minor injuries. Ensure that your health insurance covers preexisting medical conditions including diabetes.

During travel

Ensure you keep all your insulin in your hand luggage, as it will freeze in the airplane's storage. Keep some other supplies in a different part of your luggage in case of loss or theft.

Always carry a form of sugar e.g. dextrose tablets, in case of hypos. Running your blood glucose a bit high for a few days is unlikely to cause harm, but hypos are much more serious and need immediate action. Ensure you are eating regularly during the flight and avoid drinking alcohol on an empty stomach.

If you have an insulin pump or continuous glucose monitor (CGM) or Freestyle Libre, you should contact your airline before travelling. Some airlines require you to fill in additional paperwork when travelling with any medical equipment and if this is not done, in some cases you may not be able to board the flight. Insulin pumps and CGMs sometimes use a wireless signal that might interfere with aircraft communication and navigation systems. There may also be an impact of changes in the cabin air pressure on insulin delivery which needs consideration. You should also not put an insulin pump or CGM through whole-body scanners or x-ray machines at the airport as x-ray waves can cause your pump or CGM to stop working properly. Airports also use x-ray machines on any luggage you check into the airplane hold as well as hand luggage. If you use a Freestyle Libre, you can go through the X-ray machine, but it's advisable to notify airport security staff when you do so.

Regarding meals on the plane, many experienced diabetics and Diabetes UK recommend choosing items from the regular menu rather than requesting a diabetic meal. The latter can be too low in carbohydrate. On long flights, you may need snacks in between meals and before sleep. Try to carry carbohydrate foods such as biscuits and cereal bars. Be prepared for stopovers, re-routing and cancellations. If you use insulin, monitor your blood sugars regularly and be prepared to make changes to your dosage.

At your destination

Consider how you will store your insulin at the appropriate temperature. Insulin needs to be kept refrigerated until opened, when it can usually be stored at room temperature. The product information may be based on the room temperature of your home country, which may differ substantially from the room temperature at your destination. Insulin must never be allowed

to freeze. You will need to think carefully about how you will keep your insulin cool for the entire journey, as heat can damage your insulin and stop it from working. Frio® wallets will keep insulin between 18-26°C for 45 hours. They can then be reactivated to keep the insulin cool for subsequent periods. Frio® wallets can be bought in some pharmacies or online. Remember once insulin has been removed from the fridge (2-8°C), it must be used within a month.

Ensure you take special care of your feet, with prompt treatment of any fungal or other infection. Keep your toenails short and wear-in new shoes before travelling in them. Inspect your feet regularly, as even small ulcers on the foot can represent a serious risk in those with diabetes.

If you become unwell during your trip, you will probably need more insulin then normal, particularly with fever and diarrhea. Monitor your blood sugar more frequently and contact the Anvil Assistance line for advice and help arranging a medical review.

Take measures to prevent food poisoning and traveler's diarrhea. Avoid street food and ensure food is piping hot before eating, without being left standing or reheated. If there is a concern about the safety of local tap water, stick to bottles or sterilized water. Also avoid ice in drinks, salads that may have been washed in tap water and fruit that you can't peel.

Take extra precautions to prevent and treat dehydration caused by diarrhea, heat, or exercise. Drink plenty of fluids, particularly when in hot climates.

Because insulin is often absorbed more quickly when it's hot you may be at slightly greater risk of getting hypos as a result. As well as taking dextrose out with you, consider carrying glucagon or Hypostop gel and make sure someone you're with knows how to use these.

Take care to avoid sunburn, especially to feet and legs.

In cold weather, insulin is absorbed more slowly at first, but can be absorbed suddenly when you warm up later in the day. This may cause a hypo. Hypos are more dangerous in cold conditions because they interfere with your body's attempts to stay warm and increase the risk of hypothermia. It is important to be aware of this and guard against hypos with careful monitoring.

Local food and drink may be very different to what you are used to. In many countries drinks such as tea have large amounts of pre-added sugar.

Always call the Everbridge Assistance line if help is required with medications or any medical issues during travel.

References

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This factsheet has been developed for educational purposes and is correct at the time of production. It is not designed as a replacement for professional medical advice. Please consult your medical professional for any concerns or queries regarding Inflammatory Bowel Disease whilst traveling.





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