Travel and Diabetes

Ready, set, go... Travelling with a child who has diabetes takes extra planning. Following are some tips to help you have a successful trip.

Ready—Planning Ahead:

1. Obtain proof of prescription or pharmacy labels for your supplies. These will help if you have any problems with security at the airport.
2. Contact a county travel clinic to see if any immunizations are recommended and/or required for the country you are travelling to.
3. Consider purchasing travel insurance and/or be aware of your health insurance coverage for out of country travel.
4. Have a medic-alert bracelet or necklace.
5. If going to a foreign country, know how to tell someone in their language that you have diabetes and know how to ask for sugar or juice. However, you should carry fast acting carbohydrates with you at all times.

Set—Packing:

Check with your airline about any new security regulations that may be in effect. Pack diabetes supplies in carry-on luggage, and if possible keep a separate supply in a companion’s bag, in case yours is lost or stolen. Make sure your insulin is cushioned and not exposed to heat (over 86° F) or cold temperatures (below 36° F). Pack an insulated container if necessary to avoid temperature extremes. Remember, carry your bag with diabetes supplies onto the plane with you. Here’s what to pack:

1. Two blood glucose meters, with extra batteries, packed in separate bags.
2. Enough insulin (double the amount that you think you will need), syringes, lancets, and test strips to last the entire trip.
3. For pump users, enough pump supplies for the entire trip, extra batteries, and supplies of long-acting insulin (Lantus) and rapid-acting insulin (Humalog or Novolog) and syringes for use in case of pump malfunction or battery failure. You may also want to obtain a back-up loaner pump from your pump company.
4. Pump users should carry a written list of the pump settings in case you need to switch to injections.
5. Ketone test strips (urine ketostix) or Precision Extra blood ketone sticks to use with the Precision Extra meter.
6. Prescription medicines (including a glucagon emergency kit), for diabetes and other medical conditions.
7. Sugary carbohydrate sources, such as glucose tablets, gels, or candy to treat hypoglycemia.
8. Starchy carbohydrate sources, such as breakfast bars, cheese crackers, granola bars, and trail mix to serve as snacks when meals are missed or delayed.
9. Medications for vomiting and diarrhea.
10. A first aid kit, including pain relievers, antibiotic and antifungal creams, bandages, sterile gauze, and adhesive tape.

Go—Diabetes Management During Air Travel and Time Zone Adjustment Strategies: (Note: Insulin injections versus pumps)

1. Adjusting insulin injections while crossing time zones.
   a. Adjustments to insulin doses are unnecessary if patients are crossing fewer than four time zones.
   b. Leave your watch unadjusted during flight so that you continue to correspond to the time at your point of departure. Dose for meals and snacks with Humalog or Novolog as you normally would. Take your Lantus dose at your usual time the day before you travel. Your next dose of Lantus should be approximately 24 hours later. You will run out of insulin and may develop ketones if you wait longer than 24 hours to take your Lantus. If you do arrive to your destination at an inconvenient time to take your Lantus and you want to wait until the time of day you normally take Lantus you can give Humalog/Novolog every 3-4 hours for food and to correct high blood sugar until you give your Lantus dose.

   Example: San Francisco to Paris---You arrive in Paris at 11am and suppose it has been 24 hours since your last Lantus dose, but you want to wait until bedtime to take your Lantus. To avoid ketones, you can take Humalog/Novolog to cover your food intake and correct for high blood sugar every 3-4 hours (12 noon, 3 pm, 6 pm and 9 pm), then take Lantus at bedtime and stay on this Lantus schedule until you come home.

2. Adjusting insulin for those who use insulin pumps. When getting on the plane, set the clock in the pump to the new time zone.
   a. Basal rate: Enter one flat basal rate per hour (if there are different basal rates). It should not be the maximum or the minimum, but somewhere in between—approximately 2/3 of the maximum.
   b. Bolus settings: Even out the bolus settings, if they are different. Do not use the maximum or the minimum, but somewhere in between—approximately 2/3 of the maximum.
   c. After you’ve been in your new location for 48 hours, change your pump back to your normal basal rates and bolus settings.

Frequent blood sugar checks are a must!