Dealing with illness abroad

- If you suffer from sickness or diarrhoea, insulin or tablets should never be stopped even if solid foods cannot be tolerated.
- Carbohydrate intake should be maintained in the form of regular sugary drinks.
- Monitor your blood glucose levels frequently.
- Urine should be tested for ketonuria.
- If sickness or diarrhoea persists, seek medical advice.

Driving on holiday

If you are planning to drive while on holiday, ensure your licence is valid for the duration of the trip and that you are covered by your insurance policy for driving, especially when abroad.

Driving in the UK

You need to tell the DVLA about your diabetes, depending on how it is treated and the licence you have (UK Standards - www.gov.uk/diabetes-driving). Failure to disclose a medical condition that affects your driving to the DVLA (and your insurance company) may result in you being fined/prosecuted if you are involved in an accident as a result.

Condition	Informing DVLA
Diabetes treated by Sulphonylureas or Glinide tablets (or both) Car or motorcycle licence Bus, coach or lorry licence	Do not need to tell DVLA Must tell DVLA
Diabetes treated by any other tablets or non-insulin injections Car or motorcycle licence Bus, coach or lorry licence	Do not need to tell DVLA Must tell DVLA
Diabetes treated by insulin Car or motorcycle licence Bus, coach or lorry licence	Must tell DVLA Must tell DVLA
<i>Diabetes treated by diet</i> Car or motorcycle licence Bus, coach or lorry licence	Do not need to tell DVLA Do not need to tell DVLA

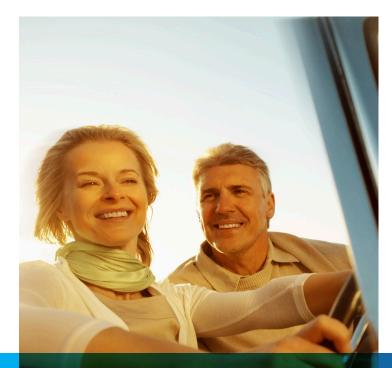
The DVLA will want to check that you are fit to be driving and may contact your healthcare team to get an assessment of your suitability to drive.

You should not drive if you have:

- difficulty recognising the early signs of hypoglycaemia (abnormally low blood glucose level); check your blood glucose within two hours before getting behind the wheel and every two hours whilst driving. Do not drive if your blood glucose level is less than 5mmol/L. If you have a hypo whilst driving, stop your vehicle as soon as possible, switch off the engine, remove the keys from the ignition and move from the driver's seat. Take some fast-acting carbohydrate (such as glucose tablets or sweets) and some form of longer-acting carbohydrate. Do not start driving until 45 minutes after your blood glucose has returned to normal because your response rates will be slower.
- problems with your eyesight, which are not corrected with glasses
- numbness or weakness in your limbs
- been drinking alcohol.

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Diabetes & Travel, Driving

People with both Type 1 and Type 2 diabetes holiday all over the world, their condition certainly being no barrier.

If you plan ahead and seek advice wherever necessary, you should be able to minimise any potential problems and have an enjoyable and safe trip. How you prepare for a trip will depend where you are going and what you are doing, i.e. if you are going on an active adventure you need to work out what influence extra exercise will have on your blood glucose levels.



Your diet while away from home

If you generally follow a healthy, balanced diet there is no harm in experimenting with different foods whilst on holiday by making some higher fat/sugar choices from the local menu. You should let your holiday destination know in advance if there are certain foods you want. If you are traveling alone, you may like to let staff know in case you are taken unwell during your stay.

Things to check before you go and equipment to take

- Get the necessary vaccinations.
- Allow two weeks to buy your travel insurance. Do not just buy according to price; check the cover for emergency transport home and recovery of charges for replacement of insulin/ equipment. Also read the small print. Be honest and declare all medical conditions. It is recommended that all members of your holiday party travel under the same policy.
- Plan to take twice the quantity of medical supplies (insulin, syringes or pens, needles or tablets, blood glucose monitoring supplies and a spare battery for your meter) you would normally use for your diabetes. If travelling with someone else, split the amount between each passenger's hand luggage in case one of the bags is lost.
- Ensure you have the new European Health Insurance Card (EHIC) if you are travelling to a European Union member country for easy healthcare access in that country.
- A basic first aid box.
- A list of all current medication.

Air travel and insulin

Diabetics can still take insulin with them onto an aircraft despite new security restrictions. If you are traveling you should bring a letter from your doctor explaining your need to carry syringes/injection devices and insulin for presentation to airline staff. If you encounter any problems, ask to speak to a more senior member of staff. Some GPs charge you for writing such a letter. Therefore if you travel frequently, it would be a good idea to ask your doctor to phrase the letter so that it can be used again. Additionally a Diabetes UK Insulin user's identity card (available from www.diabetes.org.uk) or engraved jewelry may help you verify your need to carry syringes and medication.

Airlines do bring in restrictions in emergency situations about what items can be brought onto their aircraft in hand luggage. Insulin manufacturers have always advised to avoid storing insulin in baggage which goes into the hold as travelling at altitude may freeze the baggage and damage insulin. Once on board some airlines, cabin crew may request that your medication be handed over for storage during the flight. For this reason you should put the insulin and syringes/needles in a separate carrier bag/hand luggage.

Long haul

If travelling for many hours, specific advice regarding adjustments to insulin regimes/medicine timings across the different time zones can be obtained from your diabetes care specialist. Be prepared for transport delays.

Travel to areas of high altitude can cause insulin to expand and contract, resulting in air pockets within the cartridge or pen. You may need to do a few "air shots" to make sure that there are no air bubbles present when you inject, or alternatively use a syringe and needle.

Airline catering

People with diabetes need to eat regularly to help control their blood glucose levels. Special 'diabetic' meals are not necessary on board planes as they are often low in carbohydrate. Thus it is recommended that diabetics select meals from the standard airline menu items and that:

- Bread or fruit or biscuits are available between meals on flights over three hours (you should carry extra carbohydrate in the form of sandwiches, fruit, cereal bars etc. in your hand luggage if required, especially for long haul flights).
- Low-calorie/diet beverages are freely available.

Using insulin abroad

Insulins used in the UK and many other countries are of strength U-100. In some countries insulin may come as U-40 or U-80 strengths; these insulins are not interchangeable and appropriate syringes are required.

Insulin may be absorbed faster in warmer climates. Regular glucose monitoring is important to allow for safe adjustments in dose. High altitude and humidity can sometimes affect meters and test strips - you should be aware of false readings.

Blood glucose conversions

In some countries, including the USA and many EU countries, blood glucose is measured in milligrams per 100 millilitres (expressed as mg %) and not in millimoles per litre (mmol/l), as it is in the UK.

Keeping insulin cool

Firstly check if you are going to a very hot country or on a long, hot car journey as you will need to keep your insulin cool and protected. Insulin can withstand short trips when not refrigerated but it is the exposure to direct sunlight and extremes of heat that can deactivate it. Below is a list of bags, wallets, fridges and travel friendly accessories that will allow you to keep your insulin cool on the move:

- Medicool: PenPlus range
- Frio Wallets and Carry Cases
- MediFridge
- Chillerz Packs, Polar Gear and Generic Cool Packs.

Foot care whilst travelling

- Travel with comfortable, well-fitting shoes in case your feet swell.
- Do not walk barefoot, particularly on hot sand.
- Keep checking your feet every evening and morning. If you develop a blister stay out of the sea, cover it with a plaster and keep it clean.

