Chapter 25

Vacations and Camp

VACATIONS

Diabetes should not interfere with vacations, which are a normal part of life. Some extra “planning ahead” should help prevent problems related to the diabetes.

Planning may include:

✔ a clinic visit two weeks before leaving
✔ sharing with the healthcare team if your travel will be overseas

The information should include:

✔ both departure and arrival times - going and returning
✔ the number of hours traveling
✔ a review of sick-day management and the need to have a way to check for ketones
✔ buying Kaopectate and Imodium AD if going to areas where the risk for diarrhea is high
✔ taking along your doctor’s/nurse’s phone numbers
✔ preparing for the new security measures (see below)

SECURITY MEASURES

The new security measures since 9/11/01 for flying in the U.S. are as follows:

1. Passengers may board with syringes or insulin pumps only if they can show a vial of insulin with a professional pre-printed label which clearly shows the medication. No exceptions will be made. Since the prescription label is on the outside of the box of the vial of insulin, the FAA recommends that passengers come with their vial of insulin in its original labeled box.
2. For passengers who have diabetes and must test their blood sugar levels but who do not need insulin, bringing their lancets is all right as long as the lancets are capped. The lancets must be with the glucose meter that has the manufacturer’s name on the meter (e.g., One Touch meters say “One Touch”, Accucheck meters say “Accucheck”, etc.).

3. People who are traveling with a glucagon kit should keep it in its original pre-printed labeled container.

4. Travel letters were not accepted for a few years, but they are now again being advised (see letter in this Chapter).

There have been no problems with taking insulin or other diabetes supplies (including meters and insulin pumps) through X-ray security. Remember to take extra batteries for meters and insulin pumps.

**FOOD**

*Concerns regarding food should include:*

✔ Meals will probably not be served on time
✔ Have a good supply of snacks (e.g., cheese or peanut butter crackers)
✔ Have sources of sugar always available (glucose tablets, fruit roll-ups or whatever works best)

**EXERCISE**

*Concerns regarding exercise include:*

✔ If traveling in a car, plan regular stops to get some exercise
✔ When traveling in a car, **MORE** insulin will probably be needed due to less physical activity
✔ On active days (e.g., at beach or at Disney World) **LESS** insulin will probably be needed (THINK AHEAD)
✔ The best way to know the effects of increased or less activity is to do more frequent blood sugar checks

**INSULIN**

*A few points to remember:*

✔ Pack enough insulin to last the entire trip. Supplies may not be available at your vacation area.
✔ If going on a plane, carry **insulin, glucose strips and glucagon** on board (if put in checked luggage they can freeze and spoil or be lost if luggage doesn’t arrive).
✔ If going by car, keep all three items listed above in plastic bags in a cooler (so they do not get too hot and spoil).
✔ If using an insulin pump, see the list of supplies to take in the Q and A section in the back of Chapter 26.

Make a **check list** ahead of time of things to take. Double check this list at the last minute. If using an insulin pump, take Lantus insulin and syringes in case the pump breaks down and you need to return to shots. If going overseas, some companies will provide a second pump to take along. It is helpful to know the dosages you were on before starting the pump. Remember you can always take the pump insulin (Humalog/NovoLog/Apidra) every three to four hours until you can get other insulins.

Some “**Generic Reminders**” are:

✔ **ALWAYS** carry a form of sugar with you to treat reactions.
✔ Have enough snacks available in case meals are not served on time.
✔ Always wear a diabetes identification tag.
✔ Get the name of a doctor in your vacation area so you can call him/her if necessary. Take your own doctor’s and nurse’s phone number, too. He/she knows your case best, and it may be comforting to make a long distance phone call when help is needed.
✔ Visit your doctor **two weeks** before you leave so you have time to work out any problems. Remember to take his/her list of suggestions with you.
If you expect to be **more active** on the vacation (hiking, camping, skiing, etc.), you may need to reduce the insulin dose. Discuss this with your doctor or nurse.

For **international travel**, remember to check far enough ahead of time to see if you need special immunizations. State health departments can usually give this information.

If **international travel** is planned, it is wise to carry a letter from the doctor explaining why insulin syringes and other supplies are being taken through customs. As stated earlier, it is necessary to have prescription labels on the insulin and any other supplies to be carried on board. Check to see if your health insurance covers you in other countries, or if you need supplemental insurance.

The most important advice is to **HAVE FUN!**

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**CAMP**

*Children with diabetes are very dependent on their parents for:*

- blood sugar tests
- injections
- proper nutrition
- help with preventing and treating potentially dangerous low blood sugars

These are in addition to their non-diabetic needs. The diabetes care for their child can become one of the main functions in life for a parent. As a result, children with diabetes may become too dependent on their parents.

**Advantages of Attending Camp**

- Diabetes camp often offers the first chance to alter these dependent relationships.
- Most diabetes camps have doctors and nurses at the camp so the parents can feel their children will be safe.
- Camp food is monitored and amounts calculated by a dietitian. This helps to have the correct content and amounts available for the increased activity.
- Adequate snacks are routinely available and provided.
- It is often a major help for children to meet other friends who take shots and do tests just like they do.
- It is also a chance for a child to realize that he/she is not the only person in the world who has diabetes.
- Children who are old enough and who do not give their own shots or do their own blood sugar levels may try doing these tasks at camp.
- The children also understand that with proper planning, they can do the same hiking, overnights and other activities that other children do.
- Older teens with diabetes may serve as junior counselors and find that they must take good care of themselves in order to set a good example for younger campers.

It is important for parents not to be upset if they receive the “typical” camp letter from their child asking the parents to come and get them immediately. This type of letter is not unusual and should not cause concern. Most campers are having a wonderful time. If you are overly concerned, call the camp coordinator for support. Whatever you do, don’t upset the child by trying to call them at camp, and don’t suddenly appear at camp ready to take the child home.
Most diabetes camps also have some educational programs. *These may be:*

✔ “rap-sessions”
✔ problem-solving sessions
✔ games to help learning (e.g., carb-counting “guesstimates”)

The major goal of the camp, however, should be to have fun and to make new friends. It is not unusual for pen pals to develop who can’t wait until the next summer at camp when they can meet again.

Scholarship programs are offered at most diabetes camps. If finances are a problem, a request for financial help should be made. Sometimes children can earn part of their own expenses.

After having been at a diabetes camp, the child may decide to try other camps. When this happens, the parents will need to:

✔ discuss insulin dose changes with their diabetes care provider
✔ be in touch with the nurse at the other camp
✔ provide all of the needed diabetes supplies for the period at camp
✔ give telephone numbers for emergencies
✔ work out an emergency treatment plan as in the school chapter (Chapter 23)
✔ work out a way to have the blood sugars faxed to the family or healthcare provider

Attending a diabetes camp or another camp is often the first step toward independence for the child with diabetes. Encouraging camp attendance can result in a healthy parent-child relationship.

Updated camp information for camps throughout the world can be found at: [www.childrenwithdiabetes.com/camps](http://www.childrenwithdiabetes.com/camps)

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*Date: ___________________________*
*Re: ___________________________*
*DOB: ___________________________*

*To Whom It May Concern:*

_________________________ is a patient at the ___________________________________.
_________________________ has type 1 diabetes and requires daily insulin injections to remain healthy.

To manage diabetes ____________________ must carry medical supplies, including insulin, syringes, test strips, lancets, a glucose meter, glucagon emergency kit, as well as an emergency food supply and water.

Please call ____________________ should any emergencies arise.

*Sincerely,*

_________________________________
*Physician*
Questions and Answers from NewsNotes

Q Should my child go to diabetes camp?
A We are often asked this question. The lower age limit for the Colorado camp is eight years, although not all eight-year-olds are mature enough to be away from home. Some camps (Texas) take children at even younger ages. This question was directed to me specifically as it relates to a 10-year-old and I replied without hesitation, “Yes, your child should go to camp.”

Camp offers many benefits:

✔ fun (our major emphasis!)
✔ getting to know and live in a cabin with other children the same age who also have diabetes
✔ a great help for children to learn that they are not the only persons their age in the world with diabetes
✔ ten others in the cabin also have to take shots and do blood sugars
✔ the first chance to break the interdependencies (child on parents and parents on child) which can develop when diabetes is diagnosed at a young age
✔ a good time for parents to also have a break!

Q Our family is going on a two-week vacation this summer. Are there any special concerns regarding the insulin and supplies?
A The means of travel and the type of vacation are important. If you are traveling by plane:

✔ Make sure the insulin is carried with you and not in the luggage. Freezing or pressure changes in the baggage compartments may change the insulin, blood test strips and glucagon. If your luggage is lost, all of your supplies would be as well.
✔ You will need a pharmacy label on the insulin (and any other supplies needed) you will be carrying on board.
✔ Have two vials of each insulin in case one is broken (many foreign countries do not have all of the insulin types [particularly Lantus]).
✔ Do not forget that meals on airplanes are never served on time, so extra snacks are essential.
✔ If time changes during travel to foreign countries are known, sharing these with your nurse or physician is important so the insulin dose can be adjusted.

For long trips in a car:

✔ Tips for avoiding high blood sugars, which result in frequent urination:
  ● stopping for regular exercise at two-hour intervals
  ● eating less
  ● taking extra Humalog/NovoLog/Apidra and/or Regular insulin
✔ Remember that insulin does lose activity at temperatures above 90°. Insulin, glucagon and blood sugar test strips must always be kept in the thermos or cooler with ice. The strips should be brought to room temperature before use.
✔ Do not forget to take your ketone testing strips and a card with your doctor’s phone number(s).

It is often better to call your doctor long-distance when you have questions than to get advice from someone who may be unfamiliar with your diabetes. Routines are often broken during vacations. Sleeping late or eating snacks or meals late can result in insulin reactions. Be aware of possible inconsistencies and try to prevent problems. Thinking ahead can help prevent problems and result in more fun!
Q We are going to the East Coast on vacation this summer. Will times for giving shots need to be adjusted?

A No. A change of one or two hours does not usually make a difference; simply adjust to their time zone.

This is not the case when traveling to Europe, the Far East or even Hawaii. When greater time changes happen, call your diabetes care provider with the:

✔ time of leaving home and/or the U.S.
✔ number of hours you will be traveling
✔ time of planned arrival (a.m. or p.m.)
✔ scheduled meals on planes
✔ same information for your return trip

Your diabetes care provider can then help you with the insulin adjustments.

Q Our son is about to go hiking in a very hot part of the U.S. Is there any way to keep his insulin, blood sugar strips and glucagon cool so they don’t spoil?

A You can order the Frio Kit at www.medicool.com. Hopefully all will fit in their larger pack.

Swimming is good and fun.