Travel Guide for People with Diabetes









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Our goal is to provide you with the practical knowledge you need to confidently leave home and explore the world, despite certain restrictions imposed by your diabetes. This travel guide covers what you need to do before and during your trip to ensure that it is as enjoyable as possible.

Before planning a trip, you need to be absolutely sure that you are healthy enough to go and your diabetes is very well controlled because travel can affect your blood sugar control. Be sure to consult your doctor before you plan your trip.

Once you and your doctor have determined that you are healthy enough to travel, use this travel guide to organize your trip and avoid potential problems.

What to do before you leave

Gather information

Learn as much as possible about the countries you intend to visit by consulting the following websites:

World Health Organization

www.who.int

This website is an excellent resource for learning about the health and disease situation in the countries you plan to visit, including recommended and obligatory vaccinations.

Public Health Agency of Canada

www.phac-aspc.gc.ca/tmp-pmv/travel/clinic e.html

This website provides a list of the travel medicine clinics in every province where you can get your vaccinations.

International Diabetes Federation www.idf.org

Here you will find contact information for the IDF-member associations in the countries you plan to visit.

Diabetes Québec

www.diabete.qc.ca

This site provides a wealth of information about all aspects of diabetes. Don't wait until the day before you leave to visit this site!

Call the InfoDiabetes hotline (1-800-361-3504, extension 233) to discuss any concerns you have with a healthcare professional.

Consult these other experts and resources

- See your family doctor or your endocrinologist four (4) to six (6) weeks before you leave to:
 - Review all important points to ensure that you feel confident enough to leave, especially if your trip is a long one;
 - Adjust your medication schedule or insulin protocol to match the change in time zones (if applicable);
 - Review the protocol in case you become ill;
 - Review the steps you will take if you become hypoglycemic;
 - Get a copy of your last glycated hemoglobin (A1C) test, which proves that your condition is stable. This document could prove very useful;
 - Obtain an official letter in English and French (and, if possible, in the languages of the different countries being visited) that contains the following information:
 - The fact that you are diabetic;
 - A list of all the medication you take to treat your diabetes;
 - That you must carry: needles, diabetes pills, insulin, a kit to measure your blood glucose, several snacks;
 - · Your physician's contact details.

In light of the heightened security measures at airports, keep this letter with your passport. It could help you avoid problems and searches at customs! In case of loss, be sure to keep a photocopy of this letter in a separate location in your luggage.

(An example of this letter can be downloaded from the Diabetes Québec website at www.diabete.qc.ca)

- Go to a travel medicine clinic for all the obligatory vaccinations for the
 countries you plan to visit. Don't forget: even if no vaccinations are required,
 you would be wise to get the vaccinations recommended by the clinic. The
 clinic will also explain how you can prevent contracting certain infections
 prevalent in the regions you intend to visit;
- Visit your pharmacist in order to check on the availability of your insulin, as well as its brand name, in the countries you plan to visit. (You can also consult the tables of insulin brand names included in this travel guide.) To help you assemble your personal first aid kit, your pharmacist will advise you about drugs that could affect your blood sugar. Also, ask your pharmacist to print out a list of all your medication;
- Consult your dietitian-nutritionist, who will help you adapt your food
 plan to the typical dishes of the countries you will visit. She will also
 determine with you how you should adjust your diet based on your medical
 condition;
- See your dentist if your last appointment was more than a year ago, for preventive reasons;
- Call your insurance company to check your policy's coverage and reimbursement procedures. If you buy special travel insurance, you might need to present the results of your last glycated hemoglobin (A1C) test to show how well your diabetes is being controlled;
- Call your airline company if you want to arrange for a special meal
 (diabetic, low-cholesterol and low-fat, low-salt, etc.) However, you don't
 have to order a special diabetic meal since such meals are often too low in
 carbohydrates. A regular meal can do just fine as long as it matches your
 meal plan. If you decide to ask for a special meal, you will need to order it
 several days in advance (the time can vary from company to company) or
 when you make your reservation. You also need to find out when the meals
 will be served on the plane.

As part of their cost-cutting measures, many airlines have stopped offering complimentary meals on their flights. It is important to know this in advance. If your airline is not serving meals, be sure to bring along food containing carbohydrates (e.g.: crackers, cereal bars, dried fruits, etc.) and protein (nuts, cheese, etc.).

Bring your medication and supplies

Experts recommend that you bring one and a half to twice the expected quantity of medication and supplies (pills, insulin, syringes, alcohol swabs, lancets, test strips and quick absorption sugar sources). If you use a pen injector, you should bring an extra pen injector or syringes (and be sure you know how to use them!) in case your regular pen injector breaks. You will need a letter from your doctor authorizing you to carry syringes.

Keep your medication in its original package, with the pharmacist's label and your name clearly legible. All other supplies (e.g.: lancets) should also be in their original packaging. Blood glucose meters and pens must bear the manufacturer's name

Don't forget your Glucagon Emergency Kit (if applicable). Be sure to explain to the people travelling with you (travel companion, tourist guide if travelling on your own) what exactly they need to do in case of emergency. Check the product's expiration date BEFORE you leave!

In your hand luggage, carry a sufficient quantity of needles, alcohol swabs and lancets, as well as ALL your insulin and test strips, because checked luggage can be subject to extreme temperatures. Consequently, you will have everything on hand in the event that your checked baggage is lost.

You should also bring a second blood glucose meter to leave at your hotel. If your monitor should break, you will have a replacement that displays the same measurement units. The measurement units used in monitors from other countries can differ from ours (mg/dL instead of mmol/L). In the even that you are forced to use a blood glucose meter that measures in mg/dL, you can convert the results into mmol/L by dividing by 18.

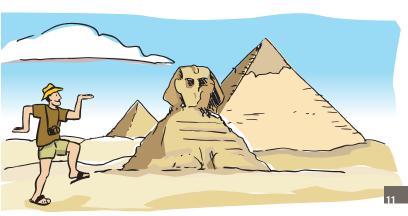
Conversion formula:

 $mg/dL \div 18 = mmol/L$

(e.g.: $100 \text{ mg/dL} \div 18 = 5.6 \text{ mmol/L}$)

Don't forget to bring extra batteries for your blood glucose meter!

If you wear an insulin pump, be sure to bring enough supplies (needles, tubing, etc.), extra batteries for the pump, as well as extra insulin. Also bring syringes for injecting your insulin in case the pump or batteries malfunction. You must also get a doctor's letter stating that you wear an insulin pump and authorizing you to carry syringes.



What you should bring on your trip

When you travel to warm climes

Insulin

To keep your insulin cartridges or vials below 25°C, carry them in a small lunch box with a commercial cold pack (e.g.: Ice-Pak®). An added bonus: you'll be able to keep your lunch cold at the same time! In the evening, be sure that you have access to a freezer for your ice pack and a refrigerator to keep your stock of insulin cool.

You could also use a thermos or an insulated insulin carrying case. Check these websites for more information about insulated cases and other products specifically designed for travel:

www.diabetesandtravel.com/protectall.html

www.childrenwithdiabetes.com/d_06_800.htm

Protect your insulin from direct contact with ice or ice pack because it could freeze and lose its effectiveness. One technique is to put a facecloth between your insulin and cold pack.

Never expose your insulin to the sun! Don't leave it in your glove compartment or in the trunk of your car!

Only carry with you the insulin that you are currently using. It keeps for one (1) month at room temperature and must be discarded at the end of this period. Store any additional insulin in the hotel's refrigerator.

If you use a pen injector, do not refrigerate it!

Blood glucose monitoring supplies

A blood glucose meter can generally stay at room temperature (most equipment functions well between 5° and 40°C). For your test strips, read their storage instructions and make sure not to expose them to temperature extremes.

Other supplies

For all other supplies (glucagon, pills, eye drops, etc.), make sure to follow the manufacturer's recommendations.

Don't forget your sunblock, insect repellent and sunhat!

When you travel to cold climes

Insulin

A lunch box or insulated carrying case isn't necessary in cold climates, but make sure you carry your insulin close to your body, in the inside pockets of your coat if possible, so that it isn't exposed to extreme cold. Insulin must never be frozen. If it does freeze, throw it out.

Blood glucose monitoring supplies

Pay attention to the temperature range stipulated on your blood glucose meter. Carefully read the instructions for storing your test strips so that you don't inadvertently expose them to overly cold temperatures.

Other supplies

For all other supplies (glucagon, pills, eye drops, etc.), make sure to follow the manufacturer's recommendations.

Don't forget your sunblock. Even if it is cold outside, snow is a powerful sun reflector and you could end up badly sunburned without protection.

Trip checklist

No matter where you travel, you can use this handy checklist (that you can photocopy) to make sure that you bring everything you need:	
☐ This small travel guide. It could prove invaluable if you need to buy insulin or diabetes pills at a foreign drug store;	
 A bracelet, necklace medallion or identity card indicating that you are diabetic. It could save your life! 	
☐ Insulin pen injectors and cartridges, or vials and syringes, needles, medication and other supplies. Don't forget to bring an extra pen or syringes;	
☐ A needle cutter (if applicable) and a secure container for storing used syringes and lancets;	
 A blood glucose meter, blood glucose logbook, reactive test strips and other monitoring supplies; 	r
Emergency medication in case of hypoglycemia (e.g.: glucagon) and rapidly absorbed sources of sugar. Don't forget: when you're travelling, you tend to walk more than normal!	
☐ Urine ketone test strips;	
$\ \square$ A bottle of antibacterial gel for disinfecting your hands if needed;	
 Dried fruits, nuts and cereal bars. These foods are practical when you need an emergency snack between meals, in the evening or when a meal is delayed. They are not bulky and store easily; 	
☐ A bottle of water to avoid dehydration;	

An official doctor's letter in English and French (and/or in the language(s) of the countries you plan to visit);
Your original vaccination booklet (some countries require the original) or a photocopy of it;
A photocopy of your passport. Don't forget to also leave a photocopy of your passport at home;
The telephone numbers of the Canadian embassies or consulates in the countries you plan to visit;
The result of your last glycated hemoglobin (A1C) test;
Your travel insurance documents;
Your personalized meal plan designed by a dietitian, very useful especially if you have trouble memorizing it;
Your Pocket Guide to Dining Out, a booklet available from Diabetes Québec
Phrase book for countries being visited;
Your personal first aid kit: anti-nausea pills, diarrhea medicine (e.g.: Imodium®, Gastrolyte®), antibiotics (for diarrhea, skin infections, other types of infections), pills for pain (analgesics) and fever (acetaminophen and ibuprofen), antifungals (including cream to treat vaginal yeast infections for women travellers), antibiotic cream or gel, hypoallergenic bandages, compresses and adhesive tape. Check with your pharmacist about drugs that could affect your blood sugar;
A list of all the medication (generic and brand names) that you take, including prescribed and over-the-counter drugs, and any natural remedies.

At the airport

The detection equipment at security will not damage your insulin or your blood glucose meter. However, if your carry-on luggage is exposed to repeated x-rays or for longer than normal amounts of time, your insulin's effectiveness could be adversely affected. When in doubt, explain to the security agent that you would prefer a manual inspection. As always, check that your insulin looks fine before injecting it.

If you wear an insulin pump

When you arrive at pre-boarding security, advise the agent that you are wearing an insulin pump and that it is better not to take it off for inspection. If you are uncomfortable passing through the metal detection booth with your pump, ask the agent for a visual inspection. Always carry your insulin with you to prove that the pump is really being used to treat your diabetes.

If you start to feel symptoms of hypoglycemia

Do not hesitate to tell the pre-boarding security agent that you are starting to feel hypoglycemic. Let the agent know if you need medical assistance.



During your trip

Walking

You will probably walk more on your travels than you normally do. Consequently, you may have to reduce your insulin dosage. That is why you should measure your blood glucose more often to ensure proper glycemic control. Remember: physical activity can affect your blood glucose for 12 to 16 hours afterward.

Your feet

Avoid travelling with new shoes because they can cause blisters or wounds. Also, never walk in bare feet. Examine your feet every evening to check for blisters, cuts or wounds. It is advisable to bring an extra pair of shoes. Don't hesitate to see a doctor if you suspect a foot infection.

Preventing infections

To minimize your chances of contracting water-borne or food-borne diseases, such as hepatitis A, travelers' diarrhea or typhoid fever, avoid:

- Contact with people affected by these kinds of illnesses;
- Swimming in contaminated water;
- Travelling outside the regular, well-travelled tourist routes;
- Eating foods with a high risk of contamination (e.g.: seafood, unpasteurized milk products, unwashed fruits and vegetables or those washed in contaminated water, foods that haven't been cooked thoroughly, etc.);
- Eating food from street or beach vendors;
- Ice cubes in drinks unless you are absolutely sure that they were made with purified water.

To protect yourself from sexually transmitted diseases, such as hepatitis B or AIDS, avoid:

- All non-essential medical or dental treatment while abroad;
- All direct contact with another person's blood;
- Any activity that results in or could cause skin perforation (tattooing, body piercing, etc.);
- All unprotected sexual activity.

Used needles and lancets

Carry a hermetically sealed container for storing all your used needles and lancets. Never throw them into a waste basket or garbage can! If possible, give this container to a pharmacist, who can safely dispose of the contents.

Alcohol

Due to the dry air and prolonged inactivity during flight, it is often easy to become dehydrated, which could lead to edema (swelling). Since alcohol causes dehydration, you should limit your consumption of alcohol while flying. Why not wait to toast your arrival instead? Also limit your consumption of caffeine on the plane. Water, fruit juice diluted with mineral water, tomato juice or diet soft drinks are better choices.

Avoid drinking alcohol on an empty stomach because of the higher risk of becoming hypoglycemic. That's why the recommended way to drink alcohol is with meals. Watch out for juice-based alcoholic drinks because they are very sweet as well as high in calories! Moderation should be your watchword, at home and abroad.

What to do if you become ill

When you get an infection, your body secretes more hormones to fight it, which increases the production of glucose in your body, thus raising your blood sugar level. When there isn't enough insulin to metabolize this sugar, your body uses your fat stores to produce energy. This causes a significant amount of ketones (by-products) to accumulate in the body, leading to diabetic ketoacidosis (DKA), a serious complication of diabetes.

If your blood glucose before eating is 14 mmol/L and you are experiencing unusual symptoms such as abdominal pain, excessive fatigue, nausea/vomiting or intense thirst, you should check for ketones in your blood (the *Precision Xtra*® blood glucose meter does this) or urine (using *Ketostix*® or *Chemstrip Ug/K*® test strips). If your ketone level is elevated, call a doctor or have someone to get you to an hospital immediately.

To prevent diabetic ketoacidosis (DKA), follow these recommendations:

- Follow your meal plan closely. If you lose your appetite, eat just
 the carbohydrates in your meal plan. If you are unable to eat solid
 food, take your carbohydrates in liquid form (see below "Rehydration
 formulas");
- Monitor your blood glucose more frequently when you are ill;
- Continue to take your medication as prescribed, except if you are vomiting often and cannot eat or drink. In that case, follow your doctor's recommendations for taking your insulin or diabetes pills;
- Drink lots of water and avoid sweetened drinks.

Rehydration formulas

Should you become dehydrated, here is a rehydration formula that will quickly get you back on your feet:

2 cups (500 mL) purified drinking water (preferably boiled)
 2 cups (500 mL) of orange juice (with no added sugar)
 1 teaspoon (5 mL) table salt

Another option is to bring *Gastrolyte®* sachets with you for diluting in purified drinking water. These sachets are practical and easy to carry.



Tips about insulin

Concentrations

The concentration of insulin in Canada is 100 U/mL and syringes are graduated to match (U-100). In some countries, however, the concentration of insulin can differ, although this is becoming less common. Some countries use insulin at concentrations of 40 U/mL and/or 80 U/mL. You will find the concentration clearly marked on the insulin vials by the codes U-100 (100 U/mL), U-40 (40 U/mL) or U-80 (80 U/mL).

It is important to use a syringe that matches the insulin concentration. Don't hesitate to consult a local pharmacist about this.

Air pressure

Airplane passenger cabins are pressurized. If you have to inject yourself with an insulin syringe during a flight, it is suggested that you pull out the piston first and then insert the needle into the insulin vial. This balances the pressure. Then remove the needle from the vial and reinsert the piston back into the syringe. Withdraw and inject your insulin as usual.

Once you are back on the ground, repeat the same steps previously mentioned, in order to re-equilibrate pressures between the vial and the atmosphere.

Changing time zones

During the flight, do not adjust your watch (or the time on your insulin pump, if wearing one). Instead, wait until you arrive at your destination before switching to local time. This will help you remember when to inject your next insulin dose during the flight.

No change to your insulin dosing is required under the following conditions:

- If the time difference is three hours or less (east/west);
- When your trip is north/south (with no change in time zone).

However, during long trips (east/west) when several time zones are crossed (and the time difference is more than three hours), it is important to plan your meals and adjust your dosage and/or insulin schedule to take this into account.

Multiple daily injection therapy

Inject your rapid-acting insulin with each meal eaten on the plane until you arrive at your destination. Delay your injection of intermediate- or long-acting insulin until your first night in your destination country. Depending on the time difference and when you travel, you could miss a night's injection of intermediate- or long-acting insulin if you are flying overnight.

Once you arrive at your destination, switch your watch to local time and continue to inject your intermediate- or long-acting insulin at the same dosage and time as usual.

Twice-daily injection therapy

Consult your doctor for the best way to adjust your injections.

If you wear an insulin pump

During the flight, continue to deliver your normal basal and bolus insulin. Once you arrive, switch the time on your pump to local time.

Remember: it's better to maintain a slightly higher blood glucose level while travelling than to risk becoming hypoglycemic because your control is too strict!

Commercial brand names of insulin around the world

Below, in table form, are some of the brand names of insulin available in other countries. Note that insulin is sold under more than one brand name around the world. Remember: the availability of these insulins might have changed between the publication of this booklet and your trip. To avoid unpleasant surprises, check that these insulins are available in the countries you plan to visit. (Better yet, bring all the insulin you need for your trip with you).

	Eli Lilly insulins
Brand name in Canada	Brand name in different countries
Humalog® (lispro)	Humalog® : China, Spain, United States, France, Great Britain, Greece, Italy, Japan, Mexico, Russia, Thailand
Humulin® R	Humulin® R : China, United States, Italy, Japan (Humacart® R), Mexico, Czech Republic, Thailand
Humulin® N	Humulin® N : United States, Japan (Humacart® N), Mexico, Czech Republic, Thailand Humulin® I : Great Britain, Italy Humulin® NPH : China, Greece, Russia Humulina® NPH : Spain Umulina® NPH : France
Humulin® 30/70	Humulin® 30/70 : Italy, Mexico, Thailand Humulin® 3/7 : Japan Humulin® 70/30* : China, United States Humulin® M3 : Great Britain, Greece, Czech Republic, Russia Humulina® 30/70 : Spain Umuline® Profil 30 : France

^{*} Humulin 70/30 corresponds to 70% NPH insulin and 30% Regular insulin

	Novo Nordisk insulins
Brand name in Canada	Brand name in different countries
NovoRapid® (aspart)	NovoRapid®: China, France, Great Britain, Italy, Japan, Czech Republic, Russia, Thailand NovoLog®: United States
Novolin [®] ge Toronto	Actrapid® : Spain, France, Great Britain, Italy, Czech Republic, Russia, Thailand Novolin® R: United States, Japan, Mexico
Novolin® ge NPH	Insulatard®: Spain, France, Great Britain, Czech Republic, Thailand Novolin® N: United States, China, Japan, Mexico Protaphane® HM: Italy, Russia
Novolin® ge 40/60; 50/50	Mixtard® HM 40; 50 : Spain, United States, France, Great Britain, Japan, Czech Republic, Russia
NovoMix® 30	NovoMix® 30: China, United States, Great Britain, European Community
Levemir®(détémir)	Levemir®: Spain, United States, France, Great Britain, Russia

	sanofi-aventis insulins		
Brand name in Canada	Brand name in different countries		
Apidra® (glulisine)	Apidra®: China, United States, European Community		
Lantus® (glargine)	Lantus®: China, United States, Great Britain		

Notice : Some insulins are available in cartridges (a pen injector is required) or in vials (a syringe is requested) only.

Tips for people taking diabetes pills

If you take diabetes pills that do not increase insulin secretion (i.e., biguanides, alpha-glucosidase inhibitor, thiazolidinediones), continue to take your medication as prescribed since it doesn't cause hypoglycemia when taken alone.

Medication that increases insulin secretion (sulfonylureas, meglitinides) can be short acting or long acting. The short-acting medications (meglitinides) must be taken before every meal. The long-acting medications (sulfonylureas, except tolbu-



Diabetes pills

Medication	Class	Canadian commercial name
Biguanides	Metformin Metformin (extended-release)	Glucophage [®] Glumetza ^{MC}
Alpha-glucosidase inhibitor	Acarbose	Glucobay®
Meglitinides	Nateglinide Repaglinide	Starlix [®] GlucoNorm [®]
	Chlorpropamide	_
Sulfonylureas	Gliclazide	Diamicron®
	Gliclazide (extended-release)	Diamicron® MR
	Glimepiride	Amaryl®
	Glyburide	Diabeta®, Euglucon®
	Tolbutamide	_
Thiazolidinediones	Pioglitazone Rosiglitazone	Actos [®] Avandia [®]
DPP-4 Inhibitor	Sitagliptin Saxagliptin	Januvia® Onglyza®
GLP-1 Inhibitor	Liraglutide	Victoza®
Thiazolidinedione + Biguanide	Rosiglitazone + Metformin	Avandamet®
Thiazolidinedione + Sulfonylurea	Rosiglitazone + Glimepiride	Avandaryl®
DPP-4 Inhibitor + Biguanide	Sitagliptin + Metformin	Janumet [®]

Before you leave

Altitude during flight causes the gas inside your body's cavities to expand. That is why, one or two days prior to your flight, you should not ingest foods or drinks that cause stomach cramps or bloating. Ask your dietitian for a list of foods that cause intestinal gas. Avoid them and spare yourself — and your neighbours — a lot of discomfort!

In-flight meal service

Wait until your meal arrives before injecting your insulin. Meal service can be interrupted or delayed, which could cause you to become hypoglycemic if you already had your injection. As soon your meal tray is in front of you, adjust your insulin dose to match the portion sizes. To be on the safe side, always carry a few sources of protein (nuts, cheese, etc.) and carbohydrates (crackers, cereal bars, dried fruits, etc.).

Eating in restaurants

- Always keep your meal plan in mind, and be sure to stick to it!
- Plan your menu in advance, if possible, to avoid over-indulging. This is
 particularly important at "all you can eat" buffets, especially if you have
 trouble resisting tasting everything on the table. Use a small plate to help
 control your portion sizes, as long as you don't go back for seconds!
- If you can't resist your favourite dessert, try sharing it with your companion
 – then go for a walk!
- Don't hesitate to ask how the food is prepared; this can help you make safer choices.

- Opt for individually cooked foods (e.g.: meat brochettes, vegetables, rice) over combination dishes (e.g.: pâtés, stews, chicken-fried rice). This will help you stick to your meal plan more easily.
- Wait to be served before injecting your insulin.

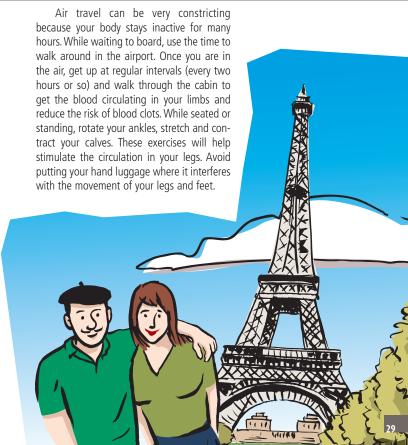
Delayed meals

When you travel, it is often difficult to eat at regular mealtimes. If you take diabetes pills that cause insulin secretion (i.e., meglitinides and sulfonylureas, except tolbutamide) and/or insulin, here are a few tips if you eat later than normal.

- approximately one hour later: at your normal mealtime, eat a snack containing about 15 g of carbohydrates (e.g.: 4 crackers or 1 fruit) then remove this amount of carbohydrates when you have your meal later on;
- **two to three hours later:** at your normal mealtime, eat the equivalent of 15 to 30 g of carbohydrates and a source of protein (e.g.: 4 crackers + 30 g of cheese; 4 dry cookies + 250 mL of milk), then remove this amount of carbohydrates from the meal eaten later on.

Take your diabetes pills or insulin with the late meal. These measures will help you prevent hypoglycemia.

Exercise prior to boarding and during your flight



If you drive

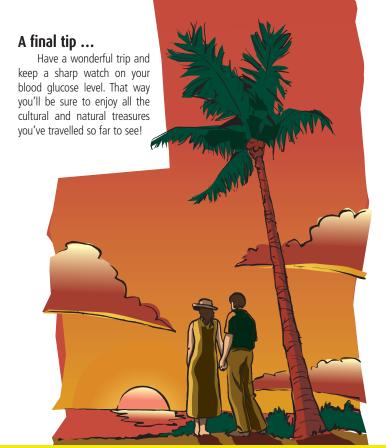
- Don't drive if your blood glucose is less than 4 mmol/L and don't get back behind the wheel for 45 to 60 minutes after your blood glucose level returns to normal. Then, have a snack every two hours. Eat a snack if your blood glucose is between 4 mmol/L and 5 mmol/L before taking the wheel.
- You should stop every two hours to stretch your legs and every four hours to measure your blood glucose.
- At the slightest sign of hypoglycemia, stop and treat yourself as quickly as possible. To avoid such an event, keep non-perishable foods in the car (fruit juice, cereal bars, dried fruits, nuts and individually wrapped snacks like Handi-Snacks®, etc.).
- Be prepared for long traffic jams, possibility of broken-down car and deserts!



Here are a few phrases that could come in handy on your travels. A word of advice: speak to people first in their native tongue before switching to English or French. Locals will be more inclined to help you!

Some useful phrases

	French	Spanish	German	Italian	Greek
Good Morning!	Bonjour!	¡Buenos días!	Guten Morgen!	Buongiorno!	Kalimera!
Ë	Allô!	¡Hola!	Hallo!	Ciao!	Yia sas!
Excuse me	Excusez-moi	Perdón	Bitte	Scusi	Sighnomi
Please	S'il vous plaît	Por favor	Bitte	Per piacere/per favore	Parakalo
Thank you	Merci	Gracias	Danke	Grazie	Efcharisto
l am diabetic	Je suis diabétique	Yo soy diabético Ich bin (a) Diabeti	lch bin Diabetiker	Sono diabetico (a)	Eho zacharo- dhiaviti
Please give me sugar or orange juice	S'il vous plait, donnez-moi du sucre ou du jus d'orange	Por favor, dame azúcar o un jugo de naranja	Bitte, geben Sie mir Zuker oder ein Orangensaft	Per favore, mi dia dello zucchero o un succo di narancia	Se parakalo, dhose me zahari ee portokaladha
Where could I find a doctor?	Où y a-t-il un médecin?	¿Adónde hay un medico?	Wo gibt es einen Arzt?	C'è un medico?	Se parakalo, pou boro na vro ena yiatro?
Do you speak French (or English)?	Parlez-vous français (ou anglais)?	¿Habla francés (o ingles)?	Sprechen Sie französisch (o englisch)?	Parla francese (o inglese)?	Milate gallika (o anglika)?



Bon voyage!

Notes		

Notes			

Notes	

