

Travelling abroad

If you travel abroad, find out what health services are available at your chosen destination. Consider how easy it would be to get medical help, bearing in mind any language barriers. If in doubt, seek your doctor's or epilepsy specialist nurse's advice before travelling abroad.

Taking anti-epileptic drugs with you

Always take extra medication in case of an unexpected delay. Bear in mind that if you lose or run out of your anti-epileptic drugs, you may not get the same kind or brand of your medication. In addition, most travel insurance will not cover you for the loss of medication.

Carry enough of your anti-epileptic drugs in your hand luggage to last for the duration of your trip and keep them in their original containers. It can be useful to also carry a supply of essential medication in both hand and hold luggage.

Current airline security means that liquid medication can usually only be taken in bottles of no more than 100mls per item in hand luggage. The total number of items you can take must fit in a sealable 1 litre bag and the bag must be able to close. If you want to carry larger quantities, you must take a prescription with you. If the label on the medicine has your name, address and GP on it this will be accepted as your prescription. If your medicine does not have this information on it, ensure that you take a copy of your prescription with you.

Medical identification and medical records

It can help to have an ID-style card or other medical identification bracelet on you that tells people you have epilepsy and what to do in case of emergency. We can send you a free ID card and details on where to buy medical ID jewellery.

European Health Insurance Card

The European Health Insurance Card (EHIC) entitles you to reduced-cost or free emergency medical treatment while you stay in a European Economic Area (EEA) country or Switzerland. The medical treatment has to be unplanned, ie the result of sudden illness or an accident.

This card only covers medical treatment which is provided by the country you are travelling to. You should be treated on the same basis as someone who is insured and lives in that country. This means you may not get all the things which you would normally expect from the NHS and sometimes you have to pay towards certain treatments. You may be able to recover some of these extra costs when you are back in the UK.

This card does not cover the cost of lost or stolen property, mountain rescue, or cost of repatriation. For more information on this card and how to apply for one, go to www.ehic.org.uk.

Travel insurance

Travel insurance can be expensive or difficult to obtain if your seizures are not well controlled or if you are still awaiting diagnosis. It is always worth shopping around for quotes. Insurance companies will assess the risk and will base their premiums on a number of factors including how well your seizures are controlled, how long you have had epilepsy and whether you have recently been hospitalised for your epilepsy.

To make it easier for you, Epilepsy Scotland have teamed up with with [Medical Travel Compared](#) - a travel insurance comparison site which brings over 18 travel insurance companies that specialise in pre-existing medical conditions together on one independent site.

Our dedicated page <http://medicaltravelcompared.co.uk/campaigns/1/epilepsy-scotland-001/> makes it easy for you to find a good deal. For every policy sold via our page/phone number the company will make a donation to us.

Flying

Flying itself is not known to trigger seizures. However, it is important to be aware of other factors that could affect you. These include missing sleep, skipping meals or becoming dehydrated. Carry snacks with you and make sure you drink plenty of water during the flight. Avoid drinking caffeine and alcohol, as these make you dehydrated more quickly. Get as much sleep as possible on the plane.

Jet lag is a common problem, particularly if you fly across a number of time zones. Your body clock gets confused and this can result in being tired and irritable. Being tired can also trigger seizures for some people.

Other possible seizure triggers

High temperatures or humid conditions can also sometimes make seizures more likely. Staying hydrated and staying indoors when temperatures are at their highest can prevent seizures.

Vomiting and diarrhoea can sometimes trigger a seizure because you may not have a sufficient level of your drugs in your system. Being sick can also cause dehydration, low blood sugar and poor sleep, which can be seizure triggers. Rehydration sachets, available from a chemist, can help you get over the effects of vomiting and diarrhoea quicker. If you cannot take your medication for a while, it is important to stay in a safe place and have someone with you in case you have a seizure.

Taking your medication at the right time

If you are travelling to a different time zone, speak to your doctor or epilepsy specialist nurse about the best time to take your medication. If you need to take your medication at the same UK time every day, it helps to carry two watches. Set one to local time and keep the other at UK time. You can then use the watch set at UK time as a reminder to take your medication. This ensures that you take it at the time your body is used to.

If you fly across a number of time zones or stay at your travel destination for a longer period, a doctor will often advise to gradually adjust the time for taking your medication before leaving and when returning consistent with local times.

Obtaining anti-epileptic drugs outside the UK

Short stay: If you run out of your medication or lose it, contact a local doctor, pharmacist or hospital. It helps to know the exact name (generic and brand name) of your anti-epileptic drugs. If you have a prescription this will be accepted within countries of the European Union; however, you may not get exactly the same kind of drug.

If you have problems obtaining replacement or additional medication from local health services, contact your GP in the UK for further advice.

Long stay: NHS regulations state that no more than three months' supply of any medication should be prescribed at any one time. So if your trip is for longer than three months your GP will not be able to give you enough medication or provide an NHS prescription.

Before you go, you can find out if your anti-epileptic drug is available in the country you are visiting, from:

- your GP
- the drug company helpline that makes your anti-epileptic drugs
- a drug import/export organisation such as John Bell & Croyden (0207 935 5555) or IDIS (01932 824 100 www.idispharma.com)

If your AED is available in the country you are visiting you should get a private prescription from a doctor in that country. There will be a charge for this. Take a copy of your usual prescription or a note from your GP to give to the doctor abroad.

If your AED is not available in the country you are visiting you will need to find out if that country is allowed to import it. If it does you can ask a UK GP to write a private prescription and send it to John Bell & Croyden, details above. This company will then send the AED to a

doctor in the country you are visiting for you to pick up. You will also need to pay for the doctor abroad to write a prescription privately. You must organise this **before** you leave the UK.

If the country does not have your AED available and cannot import it you will need to consider changing your AED, the length of your stay, or your destination. You must speak to your doctor before you make any changes to your medication.

You will also need to consider that you may not get the same brand name of your medication while abroad. The same medication made by a different company can be slightly different. Your usual medication manufactured by the same company but in a different country can also be slightly different. These small differences can sometimes affect seizure control in some people.

Driving abroad

If you intend to drive abroad, make sure you check out the country's driving regulations. Some countries have stricter regulations for people with epilepsy than the UK.