

Guidelines for Recreational Diving with Diabetes - Summary Form¹

<p>Selection and Surveillance</p> <ul style="list-style-type: none"> • Age ≥ 18 years (≥ 16 years if in special training program) • Delay diving after start/change in medication <ul style="list-style-type: none"> - 3 months with oral hypoglycemic agents (OHA) - 1 year after initiation of insulin therapy • No episodes of hypoglycemia or hyperglycemia requiring intervention from a third party for at least one year • No history of hypoglycemia unawareness • $HbA_{1c} \leq 9\%$ no more than one month prior to initial assessment and at each annual review <ul style="list-style-type: none"> - values $>9\%$ indicate the need for further evaluation and possible modification of therapy • No significant secondary complications from diabetes • Physician/Diabetologist should carry out annual review and determine that diver has good understanding of disease and effect of exercise <ul style="list-style-type: none"> - in consultation with an expert in diving medicine, as required • Evaluation for silent ischemia for candidates >40 years of age <ul style="list-style-type: none"> - after initial evaluation, periodic surveillance for silent ischemia can be in accordance with accepted local/national guidelines for the evaluation of diabetics • Candidate documents intent to follow protocol for divers with diabetes and to cease diving and seek medical review for any adverse events during diving possibly related to diabetes
<p>Scope of Diving</p> <ul style="list-style-type: none"> • Diving should be planned to avoid <ul style="list-style-type: none"> - depths >100 fsw (30 msw) - durations >60 minutes - compulsory decompression stops - overhead environments (e.g., cave, wreck penetration) - situations that may exacerbate hypoglycemia (e.g., prolonged cold and arduous dives) • Dive buddy/leader informed of diver's condition and steps to follow in case of problem • Dive buddy should not have diabetes
<p>Glucose Management on the Day of Diving</p> <ul style="list-style-type: none"> • General self-assessment of fitness to dive • Blood glucose (BG) ≥ 150 mg·dL⁻¹ (8.3 mmol·L⁻¹), stable or rising, before entering the water <ul style="list-style-type: none"> - complete a minimum of three pre-dive BG tests to evaluate trends <ul style="list-style-type: none"> ▪ 60 minutes, 30 minutes and immediately prior to diving - alterations in dosage of OHA or insulin on evening prior or day of diving may help • Delay dive if BG <ul style="list-style-type: none"> - <150 mg·dL⁻¹ (8.3 mmol·L⁻¹) - >300 mg·dL⁻¹ (16.7 mmol·L⁻¹) • Rescue medications <ul style="list-style-type: none"> - carry readily accessible oral glucose during all dives - have parenteral glucagon available at the surface • If hypoglycemia noticed underwater, the diver should surface (with buddy), establish positive buoyancy, ingest glucose and leave the water • Check blood sugar frequently for 12-15 hours after diving • Ensure adequate hydration on days of diving • Log all dives (include BG test results and all information pertinent to diabetes management)

¹ For full text see: Pollock NW, Ugucioni DM, Dear GdeL, eds. Diabetes and recreational diving: guidelines for the future. Proceedings of the UHMS/DAN 2005 June 19 Workshop. Durham, NC: Divers Alert Network; 2005.