

Traveling with Cancer

Going on a trip during cancer treatment can be a welcome break, but it also may require some forward planning.

Like all travel with a medical condition, you will want to have a letter from your doctor detailing your treatment as well as appropriate prescriptions and medications available.

- If you have an implanted port or under-the-skin pump, carry an identification card for the device, or ask your doctor for a letter describing the type, purpose, and location of the device (on letterhead and signed by the physician). Show this information to personnel when passing through security metal detectors.
- If you have a tissue expander (such as is used in breast reconstruction), it may contain a magnet, which helps your surgeon find the valve to add saline. Again, you will require an ID card or letter from your surgeon.
- If you need to carry injectable medicine, have a letter from your doctor (stating the reason for the medicine and medical devices). Separate these items from your other baggage and toiletries so they can easily be screened.
- If you have a low immunity due to leukaemia, lymphoma, or because of recent cancer treatment (such as removal of your spleen), you may need to take a supply of antibiotics with you.¹

Some people with cancer may be advised not to travel by air under particular circumstances, as oxygen levels and air pressures change at high altitudes.

You may be advised not to fly if you:

- are breathless;
- are anemic (have a low number of red blood cells);
- are at risk of developing an increased pressure or swelling in the brain (cerebral oedema) due to a brain tumor;

- have recently had surgery or a medical procedure, as this can introduce gas into the body that may expand to cause pain and stretch your wound; air travel should be avoided for 10 days after any surgery;
- have recently had surgery to your chest; air travel should be avoided for 3-4 weeks after chest surgery; after chest surgery, you should have a chest x-ray to make sure that your lungs are fully expanded before flying;
- have recently had surgery to your brain; or
- have problems with your ears or sinuses, where pressure changes may make symptoms worse.²



“Some people with cancer have a higher risk of developing blood clots (thromboses or DVTs) than other people. There are a few reasons for this. One is that people with cancer often have slightly higher numbers of platelets in their blood. Platelets are cells that help the blood to clot. People with cancer may also have slightly higher amounts of clotting factors. Clotting factors are proteins that are produced naturally in the body and work with the platelets to form blood clots and prevent bleeding. People with cancer also sometimes have lower levels of natural blood thinning proteins (anticoagulant) in their blood, especially if the cancer is affecting their liver.”²

- The risk of developing a blood clot is higher in particular types of cancer. Some types of lung,

stomach, or bowel cancer produce a substance called mucin, which can raise the risk of clots. People with cancers of the pancreas, ovary, lining of the womb, and acute myeloid leukaemia (AML), have a slightly raised risk.

- Sometimes, cancer treatments can increase the risk of blood clots. Some examples of this are certain types of hormonal therapy for cancer, such as tamoxifen for breast cancer and stilboestrol for prostate cancer.²

For more on air pressure and blood circulation, see the June [issue](#) of *HealthHints* in our series on Health Tips for Travelers.

Sources:

1. Stephan, P. (2007) Breast cancer: Airline travel during chemotherapy [on-line]. Retrieved February 21, 2008. From http://breastcancer.about.com/od/lifeduringtreatment/qt/metal_detec.htm.
2. Cancerbackup (2006). Travel and medical conditions [on-line]. Retrieved April 4, 2008. From <http://www.cancerbackup.org.uk/Resourcessupport/Practicalissues/Travel/Medicalconditions>.