Other points to remember when travelling by air:

- Advanced planning is essential - Ask your doctor for a letter to take in your hand luggage with details of your condition and medication.

- Arrange necessary vaccinations and ask your doctor if an emergency supply of antibiotics and/or prednisolone are required.

- Take your inhalers and other prescription medications in your carry-on bag. A common problem is that people pack their inhalers in the luggage that goes into the hold.

- If you get breathless when walking, make sure you have help at airports. Distances to departure gates can be long. Assistance can be arranged before you travel.

- When you are in the aeroplane, try to move about every hour or so and exercise your legs. Sitting for too long can lead to blood clots in the legs.

- Drink plenty of water and non-alcoholic drinks during the flight.

- If you travel often by air and have specific medical needs, the airline may issue you with a Frequent Traveller’s Medical Card. This should make arrangements before each journey easier.

- If in doubt about travelling, check with your doctor.

Lung diseases affected by air travel

LUNG DISEASES WHICH CAN AFFECT AIR TRAVEL
Any lung disease, including COPD (chronic obstructive pulmonary disease) or Emphysema, Asthma, Lung fibrosis, Cystic fibrosis, Obstructive sleep apnoea syndrome, Pneumothorax, Previous DVT (blood clots in the veins), Lung cancer, Co-existing heart and lung disease. Those who have had infectious TB must not travel by air until shown to be non infectious. Contacts of SARS (Severe Acute Respiratory Syndrome) or those from an area recently affected by SARS must be screened before travel.

A small number of people with these lung diseases may have difficulties travelling by air. This is because of the reduced air pressure in aircraft cabins.

This leaflet is a 2011 update of that originally prepared by Dr Liesl M Osman for the British Thoracic Society Air Travel Working Party ©2004.
Frequently asked questions

- Why does the lower pressure in aircraft cabins affect people with lung disease?

Air pressure in an aircraft is lower than air pressure at ground level. Being in an aircraft cabin is like being at 6000 to 8000 feet on a mountain. At high altitudes blood oxygen levels fall and some people may feel a little breathless. In most people this has no health effect however if you already have low blood oxygen levels because of your lung condition, the extra dip that happens while you are in the plane can cause increased breathlessness and discomfort.

- How do I know if I might have difficulty travelling by air?

If you can walk 50 metres on the level without needing oxygen, at a steady pace, without feeling breathless or needing to stop, you are not likely to be troubled by the reduced pressure in aircraft cabins. If you cannot do this, you will need to talk to your doctor about whether you should travel by air. You may need to have some breathing tests. These will show if a fall in your blood oxygen level is likely to be a problem to you while travelling.

- Can I use oxygen to help me when travelling by air?

If tests show that your usual blood oxygen levels are so low that air travel may be problematic, you may still be able to travel by air if oxygen is provided for you.

Airlines can arrange extra oxygen, but remember that most will make an extra charge for providing it. Different airlines have different charges. Arrangements for oxygen should be made by your travel agent, usually when booking your ticket, but at least one month before your trip.

Aeroplanes carry emergency supplies of oxygen but not enough for several hours - do not rely on this as your source of oxygen and make your own arrangements.

You need permission from the airline to use oxygen or any electrical equipment you need for your treatment on board the aircraft. Equipment must be battery driven and you will not be allowed to use it during take off or landing. Using an inhaler with a spacer is just as effective as a nebuliser.

- Does the length of the flight make a difference?

Longer flights may carry health risks for anyone, because of the effects of sitting for long periods. There is no evidence of extra risk for people with lung disease, except for those with lung cancer, who are more prone to DVT (clots in the veins). Your doctor may recommend you wear flight hosiery and/or take anticoagulant medication if you are at increased risk.

- What happens if I get a chest infection while on holiday?

Any chest infection should be completely treated before you fly home. You should have medical approval before flying home.

- Am I covered by medical insurance for any delays or difficulties due to my chest condition while on my trip?

You may not be. Check your travel insurance policy. Make sure you are fully covered for any medical costs that arise in connection with your lung condition. It is important that your travel medical insurance includes the cost of return by air ambulance if you were to become too ill to return on a commercial flight. Some policies exclude costs from “pre existing” health conditions. Many policies will not cover you for costs from your lung condition unless you have a written note from your doctor that he or she feels you are fit to fly.