**Guidelines for Recreational Diving with Diabetes - Summary Form**

### Selection and Surveillance

- **Age:** ≥18 years (≥16 years if in special training program)
- **Delay diving after start/change in medication**
  - 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**
- **HbA1c ≤9% no more than one month prior to initial assessment and at each annual review**
  - 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**
  - in consultation with an expert in diving medicine, as required
- **Evaluation for silent ischemia for candidates >40 years of age**
  - 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**

### Scope of Diving

- **Diving should be planned to avoid**
  - 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**
### Glucose Management on the Day of Diving

- 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
  - complete a minimum of three pre-dive BG tests to evaluate trends
    - 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
  - < 150 mg·dL⁻¹ (8.3 mmol·L⁻¹)
  - > 300 mg·dL⁻¹ (16.7 mmol·L⁻¹)
- Rescue medications
  - 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)

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You can order the full *Diabetes and Recreational Diving: Guidelines for the Future* workshop proceedings by contacting DAN Americas, product code 401-7200.