HIGH ALTITUDE TREKKING

The following information has been compiled by an experienced tour doctor who has completed many high altitude treks. The information is intended as a guide. There may be other conditions that may be affected by treks at altitude.

Trekking at altitude takes us to challenging, remote, mountainous environments with little oxygen in the air. Our bodies adapt with physiological changes. This process is called acclimatization. Not everyone is able to adapt well. Our genes play a role in this and so does our health prior to the trek. Here are notes for those who may have existing medical conditions before the trek. Your GP may want to read these notes when signing your form.

HIGH BLOOD PRESSURE AND HEART DISEASE
High blood pressure that is controlled with medication does not prevent someone traveling to altitude. However, those with hypertension or a degree of heart disease are more susceptible to the effects of suddenly exercising in low oxygen conditions at altitude. In order to maximize your chances of a healthy and successful trek, YOU MUST UNDERTAKE A RIGOROUS TRAINING PROGRAM before the trek.
Those with blood pressure that is not controlled, current angina symptoms, irregular heartbeats (arrhythmias), heart failure or coronary artery disease are not suitable for this trek. If you have any questions, pass them to the medical officer for the trek.

ASTHMA
Altitude is not believed to exacerbate asthma. Therefore, if it is well controlled, asthma does not prevent someone traveling to altitude. Asthmatics should continue their regular medications and carry them with them throughout the trek.
However, if you have asthma symptoms frequently, use your reliever inhaler (such as salbutamol) more than 4 times a day, have used a nebuliser in the past year or required a hospital admission in the past 2 years, this may mean your asthma is not well controlled.
Those with poor asthma control are not suitable for this trek.

LUNG DISEASE
People with COPD (chronic obstructive airways disease) or cystic fibrosis will be susceptible to the low oxygen levels and hard work of exercise at altitude. They are not suitable for this trek.

DIABETES
Diabetes should not prevent travel to altitude. However, diabetics will need to pay extra attention to their diabetes care while they are trekking. Given the remote conditions, different food and possibility of traveler’s diarrhea + vomiting, diabetics need to make sure they keep their food intake as close to their normal routine as possible. Exercise in low oxygen can change the pH of the blood, and those on Motorman may be particularly susceptible to this. Diabetics should bring extra supplies of snack and their medications. Those with home blood testing equipment should bring this with extra sensor strips and batteries.

OVERWEIGHT
Weight does not prevent someone from traveling to altitude but it can make the exercise at altitude even more strenuous. Overweight patients are encouraged to undertake a weight loss program and a rigorous training program before the trek.
EPILEPSY
Low oxygen conditions can make epileptic patients more susceptible to have a fit, even if they are well controlled and have not had a fit for some time. This is also true for people who only have nighttime fits. In addition, the effects of strenuous exercise, a different diet and foreign climes (heat, traveler’s diarrhea) can also make epileptics more susceptible to have a fit. Epileptics who wish to go on this trek will have their application reviewed by the medical officer.

SLEEPING TABLETS
Due to the effects of low oxygen and the body’s ways of coping, sleeping tablets are not allowed at altitude. If you are on sleeping tablets, you are advised to liaise with your doctor about stopping them. Those who think they will not be able to manage without sleeping tablets are not suitable for this trek.

ALCOHOL
Alcohol interferes with the body’s way of coping with the low oxygen conditions at altitude. If you think you cannot manage without alcohol you are not suitable for this trek.

THYROID DISEASE
Thyroid disease should not prevent travel to altitude. If you are on thyroid medication, you should have a blood test within 3 months before the trek to make sure you are on the right dose of medication.

JOINT PROBLEMS or RECENT INJURY
Altitude does not pose an additional challenge. However, you must be fit enough to deal with the mountainous conditions on this trek.

BLOOD DISORDERS
Some blood disorders worsen in the conditions of cold and low oxygen. In addition, those at high risk of blood clots are not suitable for this trek. This includes people with sickle cell trait, sickle cell disease, blood clotting disorders, cryoglobulinaemia, Raynaud’s disease and others. If you have a blood disorder or have had a DVT in the past, the medical officer for the trip will review your application.

MENTAL HEALTH
Having had mental health issues does not prevent traveling to altitude. People should remember that they will be undertaking long days of strenuous exercise far from home, living in group conditions, following a set schedule – but may have also to deal with unforeseen events along the way. You should feel able to cope in this environment to be a suitable candidate for this trek.

SLEEP APNEA
Those who have been diagnosed with sleep apnea are very susceptible to the low oxygen environment of altitude and are not suitable for this trek.

OTHER CONDITIONS
This list is not exhaustive. This information is intended as a guide. There may be other conditions that may be affected by treks at altitude.