

July 28, 2023

The Honorable Maria Cantwell (D-WA)  
Chair  
U.S. Senate Commerce, Science and  
Transportation Committee  
254 Russell Senate Building  
Washington, D.C. 20510

The Honorable Ted Cruz (R-TX)  
Ranking Member  
U.S. Senate Commerce, Science and  
Transportation Committee  
512 Dirksen Senate Office Building  
Washington, D.C. 20510

The Honorable Sam Graves (R-MO-06)  
Chair  
U.S. House of Representatives  
Transportation and Infrastructure  
Committee  
2165 Rayburn House Office Building  
Washington, D.C. 20515

The Honorable Rick Larsen (D-WA-02)  
Ranking Member  
U.S. House of Representatives  
Transportation and Infrastructure  
Committee  
2165 Rayburn House Office Building  
Washington, D.C. 20515

Dear Chair Cantwell, Chair Graves, Ranking Member Cruz, and Ranking Member Larsen:

We are writing today to request that you include language in the upcoming reauthorization of the Federal Aviation Administration (FAA) that requires the agency to update the contents of airline emergency medical kits (EMKs) on a regular basis. The undersigned organizations believe all individuals on insulin should have access to glucagon rescue therapies in the event of severe hypoglycemia. Due to the suddenness and unpredictability of hypoglycemic episodes, airlines must ensure that EMKs are equipped to respond to passengers with diabetes when in crisis. The current airline EMK requirement of injectable dextrose may neither be sufficient nor feasible to treat a passenger experiencing severe hypoglycemia.

Severe hypoglycemia occurs when an individual with diabetes has a severely low blood sugar impairing their ability to self-treat the episode. This is often accompanied by mental changes such as impaired cognition, impaired decision making, altered personality and potentially seizures or coma. Severe hypoglycemia affects over 200,000 Americans per year. For those using insulin pumps, drops in air pressure during the initial phase of their flight may result in unintended extra insulin dosage leading to hypoglycemia in the first two hours of a flight.<sup>1,2</sup> As such, glucagon administration rapidly counteracts the actions of insulin and increases blood glucose levels, stabilizing the individual's blood sugars.

---

<sup>1</sup>Medical Air Service Worldwide: What diabetic patients should know before flying.<https://www.medical-air-service.com/blog/what-diabetic-patients-should-know-before-flying-8366.html#:~:text=Blood%20sugar%20levels%20and%20diabetes,the%20amount%20of%20food%20provided>.

<sup>2</sup> King, B. R., Goss, P. W., Paterson, M. A., Crock, P. A., & Anderson, D. G. (2011). Changes in altitude cause unintended insulin delivery from insulin pumps. *Diabetes Care*, 34(9), 1932–1933. <https://doi.org/10.2337/dc11-0139>.

While patients on insulin are encouraged to carry glucagon rescue therapies with them, many patients forget these therapies at home. In emergency situations, ready-to-use glucagon can make a huge difference. In a time-sensitive emergency, ready-to-use glucagon auto-injectors or nasal inhalants can be used to quickly administer glucagon to passengers experiencing severe hypoglycemia -- potentially preventing long-term sequelae from the hypoglycemia event.

With regular review of airline EMKs, the FAA can keep pace with technological developments and improved therapies to best address in-flight medical emergencies, including severe hypoglycemia. We thank you for your dedication to improving passenger safety as you work to include language in the FAA reauthorization legislation that requires the FAA to regularly update airline emergency medical kits.

Sincerely,

