



Traveling with Medication

Product of the Research & Information Support Center (RISC)

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Summary

In packing for a trip overseas of any duration, some travelers must consider how to handle health conditions that require medication. While most over-the-counter medication can be taken across national boundaries, some cannot. Most prescription drugs, particularly habit-forming and narcotics, require additional consideration.

Commonly prescribed medications in the United States could be unlicensed or controlled substances in other countries. Failing to follow specific guidance may result in confiscation, which could impact medical treatment, or stiff penalties, including imprisonment on charges for drug trafficking, with no available recourse from the U.S. government. Countries have different rules and regulations about the types of medicine allowed to be brought into the country and the maximum amount the traveler can bring. Please be sure to check Travel.state.gov before you start your trip.

Case Studies

On February 20, 2015, a U.S. citizen was [arrested](#) and incarcerated in Nagoya, Japan, for shipping a three-month supply of prescription Adderall from South Korea to Japan. Adderall, an amphetamine, is illegal in Japan, as is Ritalin; both are stimulants used widely in the U.S. to counteract ADHD. The citizen also ran afoul for repackaging her prescription from the original container, in an alleged attempt to maintain privacy and avoid stigmatization from her disorder. She was [released](#) after 18 days and heavy U.S. legislative- and diplomatic-level lobbying. For information on bringing medication into Japan, please visit [the Japanese Consulate in Seattle](#) or [the U.S. Embassy in Tokyo](#). Many countries require a license prior to arrival.

The [UAE](#) has strict narcotics laws that have landed many travelers in [prison](#): “Up to three months’ supply of a prescription item can be brought into the country by a visitor and 12 months’ supply by a resident if they can produce a doctor’s letter or a copy of the original prescription. Narcotic items can only be brought into the UAE in exceptional cases with prior permission from the director of medicine and pharmacy control...Visitors should contact the Ministry of Health drug control department to check whether their medication is on the controlled list, and needs prior permission for importation.”

Having as little as three grams of [morphine](#) in Singapore is sufficient for a death sentence. Similarly, drug offense convictions result in the death penalty in [Turkey](#), [Egypt](#), [Malaysia](#), [Indonesia](#), and [Thailand](#). Malaysia, Singapore, Iran, and Saudi Arabia can impose judicially-[sanctioned](#) caning, flogging, lashing, or whipping for drug offenses.

Notably, often Catholic-majority countries have conservative laws regarding oral contraceptives and devices, making them either illegal or very difficult to procure. Some countries will allow a three-month supply of oral contraception; others allow six months. In less-developed countries, access to such medications may be more difficult.

Also, traveling with an epi-Pen, which gives a dose of epinephrine (an adrenaline hormone), to counteract a severe allergic reaction may also be [problematic](#). An OSAC staff member had difficulty in Paris finding a pharmacy that would fill an epi-Pen prescription and had to special order one to arrive at her next

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international destination. Careful consideration should be taken for groups of travelers who maintain a [collective](#) first aid kit that includes an epi-Pen not prescribed to one individual, particularly if an administrator has not been trained to use the device. Ideally, only those to whom the device has been prescribed should self-administer in case of an emergency; otherwise local laws may interpret use as unlawful.

On average, though, penalties for a drug offense include lengthy prison terms (including death or life sentences) in local jails, heavy fines, and deportation.

Many international regulations for controlled drugs can be found through the [International Narcotics Control Board website](#). Further, [Annex II](#) and [Annex III](#) list narcotic and psychotropic drugs that generally would require a traveler to provide a certificate of need. If the country is not listed on this resource, the traveler should contact the country's embassy in U.S.

Pre-Departure Guidance

Travelers should not assume that medications approved in the U.S. are approved in another country. At least two months before departure, the traveler should consult with the treating physician about specific medications and obtain a list of [comparable](#), generic names, including their dosage and composition, in case there is a need for a refill if the medication is licensed.

Travelers should clarify whether their insurance plan will cover the cost of doctor's visit(s) and medication prescribed and/or filled overseas. The traveler may need supplemental insurance coverage prior to departure.

Travelers should plan to travel with "requisite medical documentation," which includes a letter (translated into the host language and certified if appropriate) from the prescribing doctor with his/her contact information/credentials, the diagnosis, the treatment, and the medication regimen, including need for needles/syringes. The name on the prescription, container, and traveler's passport must match.

If medications contain narcotics, some countries will require an application to the local Narcotics Control Division for permission prior to entry. Some countries consider amphetamines illegal; if the traveler's local U.S. doctor cannot make a switch before departure, the traveler will need to request permission in advanced from the local country food and drug administration.

When planning to bring medications – especially in any sizable volume, if allowed by the country, and when they are psychotropics -- overseas, it is advisable to notify the RSO or medical officer at the closest U.S. embassy or consulate ahead of time so that the appropriate parties are aware should there be an issue upon arrival at Customs.

For travelers with [chronic illness](#) or with [compromised immune systems](#), the CDC advises travelers to discuss travel plans with the treating physician and consider if the condition is sufficiently stable, if the traveler is sufficiently fit for travel, and if the destination has adequate medical resources to handle an emergency.

Keep documentation of any valid prescriptions or doctor's notes, as they are required for all medication upon re-entering the U.S.

Packing and Transport

Medications should be packed in original containers with the traveler's name on it (different medications cannot be combined in one container to save space), in a clear bag in a carry-on bag since checked baggage is occasionally lost or delayed.

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Third parties should not carry prescription medications designated for another person, particularly if the medication contains controlled substances (i.e. a parent resupplying meds during an abroad program). Medications should not be mailed. The U.S. Postal Services restricts mailing medications, and the local customs authorities may stop the package. Both means of acquiring medication refills can be considered drug trafficking.

Travelers should not travel with more than personal-use quantities. Generally, this means no more than a 90-day supply (in some countries 30 days), provided the U.S. doctor can prescribe the whole amount and the insurance carrier will approve the quantity.

In-Country Guidance

When traveling abroad, travelers are [subject to the laws of the country of destination](#). Ignorance -- willful or otherwise -- to local laws about medication legalities is insufficient when it comes to criminal charges, and violating local laws has serious repercussions.

Although travelers should always travel with an original prescription from their U.S. treating physician, many pharmacies in other countries will only fill prescriptions written in that country. Many local pharmacies will not dispense drugs without a prescription from a doctor licensed to practice in the country. If the traveler needs a refill while abroad, a local doctor must be seen to get a similar prescription that a local pharmacy will fill. It will be critical to have a letter from a U.S. doctor during this appointment explaining the diagnosis, treatment, and medication regimen. In some cases, the local physician will need to confirm the traveler's diagnosis before issuing a prescription. Travelers should be leery of counterfeit medication in some countries.

Some medicines need to be kept at room temperature (below 25°C) or refrigerated. If traveling to a warm, humid country, the traveler should get advice from a pharmacist or doctor about storing the medicine.

In cases of severe allergy or anaphylaxis, the traveler should wear a medical identification bracelet or necklace and carry a note from their U.S. physician. When possible, notify airline attendants of the condition to help avoid allergy triggers. The [Food Allergy & Anaphylaxis Alliance](#) can offer additional guidance for international travel.

For Further Information

The Department of State Consular Affairs maintains the "[Your Health Abroad](#)" website with various guidance and considerations for medical emergencies.

Travelers may call TSA Cares, a help line to assist travelers with medical conditions, toll free at 1-855-787-2227. TSA Cares help line are Monday through Friday 8 a.m. – 11 p.m. Eastern Time and weekends and holidays 9 a.m. – 8 p.m. Eastern Time. Calls should be placed at least 72 hours before travel.

The U.S. Centers for Disease Control and Prevention (CDC) also offers [guidance](#) for traveling with medication.

For additional information on health and pandemics, please contact OSAC's [Health and Disease Analyst](#). For country-specific concerns, please reach out to the appropriate regional analyst.

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