

Flying and travel after surgery

Most people travel again happily after upper-limb surgery, and a recent operation is rarely a reason to cancel a trip outright. But surgery does change a few things, and a long journey – especially a long-haul flight – deserves a little planning. The points below are the ones worth thinking through before you book or set off. If any of them apply to you, the safest move is simply to **check with us first**.

Clots on long journeys

Sitting still for hours on a long flight, train or car trip slightly raises the risk of a clot forming in the deep veins of the leg – what’s called a **deep vein thrombosis**, or DVT. Recent surgery raises that risk too, so the two together are worth taking seriously, particularly on flights longer than about four hours.

The good news is that the things that lower the risk are simple, and they’re the same things that make any long journey more comfortable:

- **Move regularly.** Get up and walk the aisle every hour or two if you can, and on a car journey, stop and stretch your legs.
- **Work your calves while seated.** Pump your ankles up and down, and circle your feet, several times an hour. This is the calf muscle’s job – to push blood back up the leg – and it matters most when you can’t get up.
- **Stay well hydrated**, and **go easy on alcohol** and caffeine, both of which dry you out.
- Some people are advised to wear **compression flight socks** – ask us whether that applies to you.

We have a separate page on **preventing clots at home** after surgery that goes into the warning signs of a DVT and what to do about them – it’s worth a read before you travel, since the same advice applies on the move.

Swelling, altitude and your cast

The cabin of an aircraft is pressurised to roughly the equivalent of a mountain altitude, not sea level. At that lower pressure, tissues tend to swell a little – and a hand or arm that’s already healing can swell more than usual. If you’re in a **cast**, that swelling has nowhere to go, and the cast can start to feel **tighter** during the flight.

This matters most with a **brand-new cast**. A fresh, full (unsplit) plaster applied in the days before you fly may need to be **split along its length** first, so it can open slightly and accommodate the swelling – most airlines expect this for a recently applied cast, and it’s a sensible precaution regardless. **Don’t assume your cast is ready to fly in – check with the team before you travel**, and we’ll split it or advise you if needed.

Whether or not you’re in a cast, **keep the arm elevated** during the journey – resting it up on the tray table or a folded jacket, or in a sling – so fluid drains back rather than pooling in the hand. And know the warning signs of a cast that’s become too tight (increasing pain, numbness, pins and needles, or fingers that turn pale, cold or blue) – these are covered on our cast-care page, and they need attention straight away, not at the end of the flight.

How soon is it safe to fly?

This is the question to ask us directly, because the honest answer is *it depends* – on the operation you’ve had, whether you had a general anaesthetic, how you’re healing, and how long and how far you’re travelling.

As a general guide, the **first days to weeks** after an operation or a general anaesthetic are when caution matters most, and longer flights warrant longer waits than short hops. For bigger procedures, surgeons and airlines often suggest avoiding **long-haul travel for a few weeks either side of surgery**. But these are minimums and broad rules of thumb – your situation may be quite different in either direction.

So if you’re planning to fly **soon after surgery**, or you’re booking a **long-haul trip**, please get clearance from us *before* you commit to dates. It’s a quick conversation, and far easier to have before the tickets are booked than after.

Airport security and your hardware

If your operation involved **metal** – a plate, screws, wires or a small implant – you may wonder about airport scanners. In practice, the small hardware used in most **hand and upper-limb** surgery is **rarely** large enough to set off security scanners (large metal joint replacements are a different story). You **don’t usually need an “implant card” or a doctor’s letter**, and one isn’t required to fly.

That said, if you’d like the reassurance, you can ask us for a brief note or carry your implant details, and if a scanner does flag, simply tell the security officer you’ve had surgery – they deal with this routinely and will guide you through.

The practical things

A few odds and ends that make travel after surgery smoother:

- **Plan for luggage you can’t lift.** You won’t be able to carry, lift or drag bags with the operated arm, so pack light, use bags with wheels, and arrange help – porters, travelling companions, or assistance booked through the airline.

- **Protect the arm in crowds.** A sling not only supports the arm but signals to people around you to give it room in a busy terminal or cabin.
- **Tell your travel insurer.** This is the one not to skip: **declare your recent surgery – and any implants or planned procedures – to your travel insurance provider.** An undeclared recent operation can leave you uncovered for anything related to it, which is exactly when you'd want the cover. A quick call or online declaration sorts it out.
- **Carry your medication** (and any pain relief) in your hand luggage, with a copy of your prescription for longer trips.

Check with us before you travel or fly

None of this is meant to put you off a trip – most people travel after surgery without any trouble at all. But a few situations are genuinely worth a quick word with us **before you go**:

- you're planning to **fly soon after your operation** or a general anaesthetic
- you have a **long-haul flight** or a long journey ahead
- you're in a **fresh or full cast**, or you're not sure whether it needs splitting before you fly
- you've had a clot before, or you have other reasons to be at higher risk

A short conversation lets us tailor the advice to your operation and your trip – when it's safe to fly, whether your cast needs attention, and anything specific to your recovery. When in doubt, ring the rooms before you book.