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VA responding to growing number of female veterans

By Bill Zlatos

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Tina Howell lies on a padded vinyl examination table for a routine pregnancy checkup at the VA Pittsburgh Healthcare System in Oakland.

"Everything seems to be great," nurse practitioner Margie Muldoon says.

Howell, 31, of Latrobe is taking advantage of the VA's recently opened Women's Health Center in its Oakland hospital. An Army veteran with a medical discharge for five herniated discs, she can get her pregnancy exam and, if she wants, consult a specialist for her back problem in the same building.

It's part of a nationwide push by the VA to make its hospitals more friendly to women, because the number of female veterans is growing fast.

This comes as the agency counters criticism for troubling incidents at its hospitals nationwide. About 13,000 veterans during the past two years were warned to have their blood tested for potentially fatal infections because of improper hygiene practices at five VA hospitals in Ohio, Florida, Missouri and Tennessee. The VA mistakenly told more than 1,200 veterans nationwide that they suffer from a fatal neurological disease.

And the Government Accountability Office two years ago chided the agency's disregard of female patients -- particularly the lack of privacy in some facilities and some doctors' unfamiliarity with women's needs. The VA is training doctors specifically to address women's care.

In April, the VA opened the \$1.6 million women's center in Pittsburgh. In Butler and Mercer counties, the agency hired primary-care providers for women, and the VA in Butler appointed liaisons to handle women's health issues at outpatient clinics.

Between 2000 and 2036, the VA projects the number of female veterans will rise from 1.6 million to more than 2.1 million. It expects the number of male veterans to decrease from 25.1 million to more than 11.9 million, as the number of living World War II and Korean War veterans diminishes.

In Western Pennsylvania, the VA reports, the proportion of women among veterans is soaring from 4.4 percent in 2000 to an estimated 11.6 percent in 2030.

Dr. JoAnne Suffoletto, a staff physician for the Women's Health Center in Pittsburgh, said the fastest-growing group of female veterans is women of reproductive age who served in the 1990-91 Gulf War and the conflicts in Iraq and Afghanistan.

VA officials hope the center encourages more female veterans to seek medical care through the agency.

"Women in particular always felt if they didn't suffer a serious injury as a result of their service, they can't come to the VA," said Deborah Mitchell, female

veterans program manager. "In fact, the VA offers five years of totally free care" covering most medical conditions for combat veterans serving since Nov. 11, 1998. Other veterans can get medical care from the VA if they have service-related disabilities.

The VA designed the women's center as a one-stop shop for physicals, pap smears, mammograms or consultations with specialists.

"It takes less time out of their life to get everything done," Mitchell said.

Howell began going to the VA after her 2003 discharge from the Army and she has noticed the changes.

"From 2003 to now, it's almost night and day," she said. "I still felt I was in the military with all the guys, another number, and now it seems more patient-centered care."

Female veterans cite as frequent problems low back pain from driving on unpaved roads, foot problems from ill-fitting boots, post-traumatic stress disorder and subsequent abuse of drugs and alcohol, she said. VA officials say one of the most common problems is military sexual trauma.

Nationally, the VA reports, about one in five women say they experienced sexual trauma during their military service, compared with one in 100 men. The GAO found 284 sexual assaults were reported at VA facilities around the country from January 2007 to July 2010.

Valerie K. Cortazzo of Penn Hills said she is a victim of military sexual trauma. She has a 60 percent disability from a head injury she suffered in a car accident while in the Navy in Panama. She is trying to get her disability coverage increased because of post-traumatic stress, which she said is related to a rape and an attempted rape by civilians and a sexual relationship with her military supervisor.

She said her medical care from the VA is good, but she had difficulty getting more benefits for post-traumatic stress.

Patty Kopa, a spokeswoman for the regional Veterans Benefits Association, said the VA's under secretary for benefits in June directed staff members who handle military sexual trauma claims to get sensitivity training. The VA staff in Pittsburgh received that training on Aug. 8.

Anne Manly, 54, of Morningside goes to the VA in Oakland for a shoulder injury. She said she likes her caregivers so much that she might make the VA her main medical provider.

A retired Air Force colonel, she served as chief nurse at a trauma hospital in Iraq. She tearfully recalls the makeshift services during which medics and nurses wheeled wounded warriors on gurneys to say good-bye to flag-draped coffins of dead comrades. Some were teenagers.

"They wanted to be with their buddy one more time," she said.

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