

Female veterans' gynecologic needs

By **Cherissa Jackson**, Chief Medical Executive, AMVETS

Women make up 16%¹ of enlisted members of the US military and 18% of the officer corps. The increasing number of women serving in the military raises new challenges for civilian clinicians to treat medical conditions common among female veterans.

We spoke to Cherissa Jackson, Chief Medical Executive of the AMVETS HEA Program and advocate for women veterans, who herself completed four tours in Iraq and Afghanistan. She shares her experience to help shed light on common women's health concerns that develop during and after active duty.



Unique health concerns of female veterans during and after active duty

After completing their service, retired military personnel become eligible for medical care through the Department of Veterans Affairs Healthcare System (VA). The VA has traditionally served a male population, so many women veterans turn to other healthcare providers outside the VA system.

Women who have served in the military have higher instances of certain health conditions compared to the general population, therefore clinicians should be familiar with these specific challenges.

Women in active duty do not seek diagnosis and treatment as often while in deployment.

Prior to deployment, the military is careful to ensure that women in active duty are receiving all their necessary annual well-woman screenings. The military requires that servicemen and women are 'deployment ready' at all times. Therefore, preventative medicine and screening is prioritized.

As part of cervical cancer screening, women receive both Pap and HPV screening. The regimented nature of military life means that most women serving are fully up-to-date with all of their wellness screenings.

During deployment, a very different picture is found. Although women have received all of their check-ups, once deployed I found women's health issues would often take a back seat to the "mission." With so many critical medical situations occurring, many women feel that their health needs are insignificant.

Research has shown that servicewomen's **perceptions of the health care**² available during deployment prevent them from receiving diagnosis and treatment of gynecological infections and diseases. This leads to servicewomen being at greater risk for developing certain gynecological issues post-deployment.



Unique health risks among females on active duty

The physical and mental demands of serving in active duty cause women to develop unique reproductive health risks³ including infertility, vaginitis, stress urinary incontinence, pelvic organ prolapse, sexually transmitted illness, and increased risk of hysterectomy.

Postponed urination and intentional fluid restriction can cause urinary tract infections. In the military, there are many more UTIs than the general public because women are so busy in the uniform and some combat situations simply do not allow for bathroom breaks.

Women often develop kidney issues from holding their urine. Many female veterans develop chronic urogenital problems, particularly among those who suffer from comorbid mental health conditions. Limited access to bathrooms in deployment environments also leads to poor vaginal hygiene and increased incidences of vaginitis.

Female veterans have a high risk of PTSD which cause health complications

Exposure to violence occurs often among women in the military and has substantial implications on health⁴. Female veterans have a higher likelihood developing of PTSD as a result of experiencing combat violence and from military sexual trauma.

Many of our military personnel who serve on the front lines return home with Post-traumatic Stress Disorder (PTSD). Having PTSD puts you at a higher risk of developing other psychiatric conditions, like depression and anxiety, as well as a higher likelihood of physical health issues. Common health issues that result from PTSD in women veterans include obesity, irritable bowel syndrome, fibromyalgia, chronic pelvic pain, polycystic ovary disease, asthma, cervical cancer, and stroke.

Sadly, women veterans tend to have an increased rate of hysterectomy before menopause due to a history of sexual assault and PTSD. Of female veterans who undergo a hysterectomy, the average age is 35, much younger than the civilian sector.

Women in the military suffer from twice the rate of overactive bladder compared to the general population likely as a result of sexual trauma, PTSD, and depression. Women veterans are also more likely to smoke, which comes with associated health risks such as increased chances of lung, breast and cervical cancer.

Although many women veterans suffer from PTSD⁵, the condition still remains largely underdiagnosed. Studies show that a diagnosis of a mental health condition (such as PTSD) was associated with lower rates of cancer screening⁶ for female veterans after active duty which could put them at risk of developing the disease without treatment.

Did you know...?

In response to the rising number of female veterans, the VA has implemented a system of Designated Women's Health Providers (DWHPs⁷) at many of its centers with clinicians trained to meet the needs of women. Thanks to this new system, there has been an increase in numbers of cervical and breast cancer screening among those using the DWHP service.

Facing the challenges of screenings and treating female veterans

Besides a clinical understanding of common healthcare concerns among women veterans, there are a number of psychosocial issues that are important to remember.

Women veterans are accustomed to receiving regular notifications to attend checkups and screening. They are likely to respond well, possibly even 'on auto-pilot,' to any notifications as a result of their military background. On the other hand, if they might not be aware of the recommended screening protocols and when they should return for the next round of screening without a notification. Make sure that any veterans you treat have a clear understanding of what is expected of them and when to take the next steps.

It is important that women veterans are aware they can access the medical services provided by the VA. Even if your patient would prefer to remain in a non-military setting for their healthcare, there are counseling and other auxiliary services that might not be available to them otherwise when can prove to be very beneficial.

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