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**Testimony before the Senate Committee on Veterans' Affairs**

**IN RE: "Fulfilling the Promise to Women Veterans"**

**April 21, 2015**

Chairman Isakson, Chairman Blumenthal, Members of the Committee on Veterans' Affairs,

It is a distinct honor to appear before you today as a military retiree and a female combat veteran.

As a woman veteran, I have a personal stake in seeing that the unique issues we face are addressed, and addressed properly, so that future service women do not face the same obstacles. And while there are many concerns to tackle, I would like to take this opportunity to concentrate on one of the obstacles that has proved most difficult in my own life - access to and the quality of care at the VA.

As a patient at the VA, I have received some of the best care, from some of the best doctors, however that experience is tempered by the fact that I have also received some of the worst care not only by doctors and care providers but by the system itself.

For years I complained to my doctors at the VA of numerous symptoms that were summarily dismissed; I was told I was too young to have any issues, I was told the basic blood work came back normal, and the ultimate betrayal, I was told I was not really being honest. These symptoms worsened and worsened, until finally I was forced to pursue medical advice out of the VA on my own.

Once my bloodwork and MRIs proved positive for Cushing's disease and the brain tumor that caused it, the VA started to take me seriously, it's hard to argue when you're staring at an MRI with a big white mass in the middle of someone's head. But the years of suffering both physically, mentally and emotionally that I had to endure in order to get someone to listen is not something I would wish on anyone, and something that should not be happening to any veteran.

The road to recovery for Cushing's patients is not easy, there are countless tests and months of observation and then the inevitable brain surgery. There are the frequent visits to Endocrinology, neurology, the ENT, the list is long. But what complicates this, is that at the VA you may never see the same doctor twice. So not only do you have to repeat your story to every specialist under the sun, you have to repeat it to a revolving door of white coats who are hearing it for the first time. Or even worse, the specialist you may need to see may have left and it may be months before a new one is found and you can get an appointment. I know this because I have lived it.

While I was stationed in NYC, I had to travel to three separate VA facilities in three separate boroughs because no one facility had all the specialists I needed. For allergy treatment alone I

had to travel from Brooklyn to the Bronx, sit through what could easily be over an hour in traffic and \$30 in tolls, for a fifteen minute appointment.

Coordination of care is essential in any system that aims to treat the whole person, and at the VA the system is counterproductive to enabling this process. Prior to my brain surgery, which the VA only did on the second Tuesday of every month, my surgery date was cancelled three separate times. So three separate times I prepped, I had family come down and take off work as I could not be left alone for the first few days of recovery, and three separate times I was told another case was more important or that they could not get all the required doctors in the same room together, or that the doctors did not have a chance to review my case yet. They would have cancelled the fourth date also had I and my family not called the patient advocate and voiced our complaints.

After brain surgery there were other nightmares. There was the MRI in which the attendant, rushing because I was the last patient before she could leave for the day, did not remove the metal nodes from my body, and too weak to squeeze the panic button, because my arm was sewn to a stabilizer in order to keep the pic line in, I could do nothing but weep silently while the metal burned welts into my skin. There was the resident doctor who had not researched my disease before morning rounds and not knowing the main symptom of Cushing's is weight gain said he could not tell if I was presenting because I was so heavy. It's hard to have faith in a system when you have read more on your condition than the doctors who are supposed to be treating you.

Navigating the VA can be daunting, and even more so as a female veteran. The women's clinic is often well segregated from the rest of the facility. Often times you have to traverse to the basement of the hospital next to the lab to find it, and once you get there it is obvious that it is an afterthought. Perception is part of the issue. For women veterans to feel like they belong, they need to know that their care is just as important as their male counterparts. They need to trust their care providers and they need to know that their care is a priority.

In the past few years, I have seen with my own eyes the VA's renewed commitment to women's health, and while I am heartened to see these changes, I know that more needs to be done. Female veterans need quality health care now and they need to be confident in that care so they are not afraid to access it.

I thank you for your time this afternoon and the opportunity to appear before the committee. I thank you for allowing me to share my story but remind you that my story is not unique, there are countless women veterans that have endured far worse than me, and it is for them that I am here today.