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Unseen and overlooked: barriers to oncologic and reconstructive breast surgery for homeless women in the Czech Republic

J. Bartkova[1], A. G. Iyer[2], R. Ogawa[3]

[1] Department of Burns and Plastic Surgery, Institution Shared with the University Hospital Brno, Faculty of Medicine, Masaryk University, Brno, Czech Republic
[2] First Faculty of Medicine, Charles University, Prague, Czech Republic
[3] Department of Plastic, Reconstructive and Aesthetic Surgery, Nippon Medical School, Tokyo, Japan

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Dear Editor,

Breast cancer remains one of the most prevalent malignancies among women, and timely access to screening, surgical treatment, and reconstruction is crucial for improving survival and quality of life [1]. However, social exclusion and unstable living conditions significantly reduce the likelihood of early diagnosis and appropriate management. Homeless women represent a highly vulnerable population, yet their participation in cancer prevention and treatment programs remains largely undocumented in the Czech Republic.

In the Czech Republic, the incidence of breast cancer has increased in the last 15 years, rising from 122 to 138 cases per 100,000 women, which is approximately 7,700 new cases annually, more than 10% of which occur in women under 44 years of age [2]. According to a 2023 Balkan Insight report, the estimated number of homeless women in the Czech Republic ranges between 5,000 and 16,000 [3]. Although many women in the general population undergo mammography screening, there is no data on the participation of marginalized groups such as homeless women. Moreover, the existence of breast cancer screening programs in shelters or via outreach is not confirmed. Some non-governmental organizations carry out small health activities employing mobile or community programs. Still, there is no evidence that these organizations are constantly providing breast cancer screening to those at risk, like homeless women.

Even though breast reconstruction after mastectomy is covered by public insurance, many hospitals in the Czech Republic still face financial limits that delay access to both immediate and delayed oncoplastic surgery [2]. Also, logistical barriers such as the absence of a fixed address, which complicates registration with general practitioners, receipt of screening invitations, and continuity of medical records, as well as unpaid or missing health insurance contributions that limit access to non-urgent care, remain one of the main reasons why homeless women are excluded from healthcare. Furthermore, in the Czech Republic, there is currently no consistent or systematic monitoring of cancer-induced homelessness, a phenomenon reflecting the social and financial instability that can follow a cancer diagnosis and lead to loss of housing [4].

For women without stable housing, barriers appear at every stage of the care pathway from screening and timely mastectomy to adjuvant oncologic treatment and eventual reconstruction. Delays at any of these points worsen prognosis and long-term quality of life. The lack of coordination between oncologic and reconstructive services further deepens inequality in outcomes. Addressing these disparities requires national policies that guarantee early diagnosis, surgical treatment, and reconstructive options as integral parts of breast cancer management rather than privileges limited by social or economic status. The Czech Republic now faces its own challenge to ensure that life-saving care becomes a true starting point for all women, including those without a home.

Breast reconstruction is not merely a cosmetic procedure but an essential component of recovery and psychological well-being. Restoring the body after cancer surgery directly impacts a woman's confidence, social reintegration, and overall quality of life, benefits that should be equally accessible to every patient, regardless of her socioeconomic or housing situation.

Integrating breast cancer screening and reconstructive options into community and outreach health programs, supported by collaboration between hospitals, public health authorities, and non-governmental organizations, could bridge this critical gap. By linking prevention, oncologic therapy, and reconstruction into one continuous process, the Czech healthcare system can move toward genuine equity where survival and recovery are achievable for every woman, regardless of housing or social conditions.

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References

1. Menon G., Alkabban FM., Ferguson T. Breast cancer. *Treasure Island (FL): StatPearls Publishing* 2024.
2. Ventruba T., Ješeta M., Minář L., et al. Czech women's point of views on immediate breast reconstruction after mastectomy due to BRCA gene mutation or breast cancer. *Healthcare (Basel)*. 2023, 11(12): 1755.
3. Eisenchteter J. Homeless in Czechia: falling through the cracks. 2023 [online]. Available from: https://balkaninsight.com/2023/11/16/homeless-in-czechia-falling-through-the-cracks/.
4. Festa K., Hirsch AE., Cassidy MR., et al. Breast cancer treatment delays at an urban safety net hospital among women experiencing homelessness. *J Community Health*. 2020, 45(3): 452–457.

Júlia Bartková, MD, MBA, MPH
Department of Burns and Plastic Surgery
Faculty of Medicine, Masaryk University
and University Hospital Brno
Jihlavská 20
625 00 Brno
Czech Republic
jul.bartkova@gmail.com

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