Recipient Institution	**Project Title** Summary	**Grant** Duration

Hugh W. Davies
University of British Columbia

$200,000
2025-2027

Understanding the risks of working with cancer drugs

Problem: Drugs that treat cancer can be toxic to healthy cells. Residues of these drugs sometimes contaminate the environments where they are prepared or used. Healthcare workers may come into repeated contact with these residues without meaning to, which may have implications for their health, especially as contact may occur over periods of many years.

Solution: Dr Hugh Davies and his colleagues will test a novel method to measure how much contact healthcare workers have with cancer drugs. They'll also look at different levels of exposure in different types of workplaces to better understand health risks in different occupations and settings.

Impact: Studying what happens when healthcare workers work with cancer drugs will help us understand the risks they face. This could lead to better ways to check for exposure and improve safety at work.

Summary: Drugs that treat cancer can be toxic to healthy cells. Although they are handled very carefully, these drugs sometimes contaminate the environments where they are prepared or used. This means that healthcare workers may be exposed to these drugs, which may cause cancer or affect their health negatively in other ways. Dr Hugh Davies and his team are studying how cancer drugs affect healthcare workers, so they can better understand the risks and help make workplaces safer.

Nathan DeBono
Ontario Health

$195,877
2025-2027

Lung cancer prevention and screening for at-risk construction workers

Problem: People who work in building repair or renovation are often exposed to asbestos, which can cause lung cancer. Right now, although some workers in Ontario are notified of the need for a medical exam when they reach 2,000 hours of asbestos exposure, not much is known about whether these workers are checked for lung cancer, which means some people may be missing out on screening that would benefit them.

Solution: Dr Nathan DeBono and his colleagues will use database information to study how many workers exposed to asbestos are screened for lung cancer, how often those who smoke get help from counsellors to quit and how their health and medical care compare with the health of construction workers who aren't known to have worked with asbestos.

Impact: This research could show where we're missing the mark in preventing and finding lung cancer caused by work. Learning more about which workers use lung cancer prevention services – and how often – could help improve those services, leading to fewer cancers and earlier, life-saving detection.

Summary: Many construction workers are in contact with asbestos, but although medical exams are recommended for some workers with the most contact, not much is known about how they access lung cancer screening and other cancer prevention services. Dr Nathan DeBono and his colleagues will study who uses these services and how their health compares with the health of construction workers who are not known to work with asbestos. They hope to find ways of improving cancer prevention and screening so fewer people get cancer and those who do can catch it earlier and have a better chance of surviving.

Paul Demers
Ontario Health

$198,036
2025-2027

Painting a clearer picture of work-related lung cancer in Canada

Problem: Asbestos and other cancer-causing substances at work are an important and preventable cause of lung cancer, that is under-recognized. In 2012, a CCS-funded research project found that there are over 4,000 work-related lung cancer cases in Canada each year. But that was 13 years ago and we need updated statistics to better understand the problem, raise awareness, and improve prevention.

Solution: Dr Paul Demers and his team are estimating how many lung cancer cases in Canada in 2026 will be linked to work. They'll generate detailed statistics to support prevention efforts and will also look at how much these cancers might cost workers, the healthcare system, and society.

Impact: The results will help efforts to prevent work-related lung cancer in Canada. Updated data will raise awareness, improve safety for people exposed to cancer-causing chemicals and support changes to laws and regulations that reduce exposure and prevent cancer.

Summary: Estimates from 2012 linked 4,000 lung cancer cases each year in Canada to harmful chemicals at work — but those numbers are out of date. Dr Paul Demers and his team will update the data for 2026 and provide new details about the cancers and their costs. This information could help raise awareness and improve safety to prevent thousands of work-related cancers.

Cheryl Peters
University of British Columbia

$199,980
2025-2027

Estimating the rates and costs of work-related skin cancers

Problem: Skin cancer is one of the most common cancers in Canada, with thousands of cases diagnosed each year. The main cause of skin cancer is ultraviolet radiation exposure from the sun. This is a problem for people who work outdoors with little support to reduce their sun exposure. Outdoor workers are three times as likely to develop a type of skin cancer called keratinocyte carcinoma as indoor workers. Very few provinces track this type of skin cancer – and those that do only record the first diagnosis.

Solution: Dr Cheryl Peters and her team are working on a better way to count these skin cancers using electronic medical records in B.C. and Alberta. They'll estimate how many cases in 2026 are likely to be caused by workplace sun exposure and calculate how much these cancers might cost healthcare systems and the people who are diagnosed.

Impact: Learning more about work-related skin cancer in Canada could lead to better ways to track cases across the country. This would help find ways to reduce sun exposure in outdoor workplaces, protecting workers and preventing cancers.

Summary: Outdoor workers are about three times as likely to develop a type of skin cancer called keratinocyte carcinoma as indoor workers, but few provinces track these cancers. Dr Cheryl Peters and her team will use existing data and medical records to estimate the rates and costs of work-related skin cancers. They hope this information will guide national efforts to reduce sun exposure and develop actions to protect outdoor workers and prevent future cases.

Thank You.

Thank you to our valued partners for being a source of hope for people living with cancer and their loved ones. Nothing big gets solved by one person or one organization. To take on cancer, it takes all of us. It takes a society.

Special thank you to:

Canadian Federation of Nurses Unions
Canadian Labour Congress
Canadian Union of Public Employees
International Union of Operating Engineers
Labourers International Union of North America
National Union of Public and General Employees
NL Teachers Association
UNIFOR
Union of Taxation Employees - Public Service Alliance of Canada
United Food and Commercial Workers Union
United Steelworkers District 6
WorkSafe BC
WorkSafe Saskatchewan
WSIB Ontario
Workers Safety and Compensation Board Yukon