



Canadian
Cancer
Society



CANCER
RESEARCH
UK

Biology to Prevention Award (BtP-26) Grant Recipients

Please note that the grant amounts listed below represent only the CCS-funded portion.

Michael Pollak

Jewish General Hospital – Montreal, QC

Karen Brown

University of Leicester – UK

\$864,000

2026-2028



Studying existing drugs that may help prevent cancer

Problem: Obesity is associated with an increased risk of many different cancers. Although weight-loss surgery can reduce this risk, it is not the right choice for every person with obesity. Incretin-mimetic drugs, currently used to treat obesity and type 2 diabetes, may also help reduce cancer risk, but more research is needed to understand how they work and who can benefit most from them.

Solution: Dr Michael Pollak, Dr Karen Brown and their teams in Canada and the UK will test tirzepatide, an incretin-mimetic drug, in lab models of breast cancer. They hope to find out whether it can help prevent certain types of breast cancer and whether it works even in the absence of obesity. The researchers will also conduct a study of tirzepatide in people who are having surgery to treat or prevent breast cancer.

Impact: The results of these studies will shed new light on whether tirzepatide and other incretin-mimetic drugs may be able to help prevent breast and other cancers. They will also help identify the people who are most likely to benefit from treatment and guide future clinical trials of these drugs.



Stephanie Xie
Princess Margaret Cancer Centre – Toronto, ON
Philip Awadalla
University of Oxford – UK

\$1,000,000
2026-2029



New clonal hematopoiesis treatments to reduce cancer risk

Problem: Clonal hematopoiesis is a blood condition that raises the risk of cancer and other health issues. It is more common in older people and those with obesity or type 2 diabetes. Drugs called GLP-1 receptor agonists are widely used to treat diabetes and obesity. They may also reduce inflammation and cancer risk, but more studies are needed to confirm whether and how this works.

Solution: Dr Stephanie Xie, Dr Philip Awadalla and their colleagues in Canada and the UK will test semaglutide, a GLP-1 receptor agonist, in lab models to see how it affects clonal hematopoiesis. They will also examine data from large health studies to see whether people taking these drugs have lower rates of clonal hematopoiesis or cancer. Finally, they will track people with clonal hematopoiesis who start treatment with these drugs to see how the drugs affect their condition.

Impact: The researchers plan to create a blood test that can identify people likely to benefit from GLP-1 receptor agonist treatment for cancer prevention. Their work could also lead to new guidelines and a new way to reduce the risk of cancer and other health issues.