



Webinar: Biology to Prevention Award

**CRUK-CCS
co-funding
opportunity**

Tuesday 28 October 2025

**Sara Castro (CRUK), Anbu Paramasivam
(CRUK)**

Judy Bray (CCS)

**About Cancer
Research UK & its
Prevention
Research Strategy**

We're the largest charitable funder of cancer research in the world



In 2023/24, our total research spend was

£400m

across a wide range of research focuses



We support more than

4,000

researchers, doctors and nurses

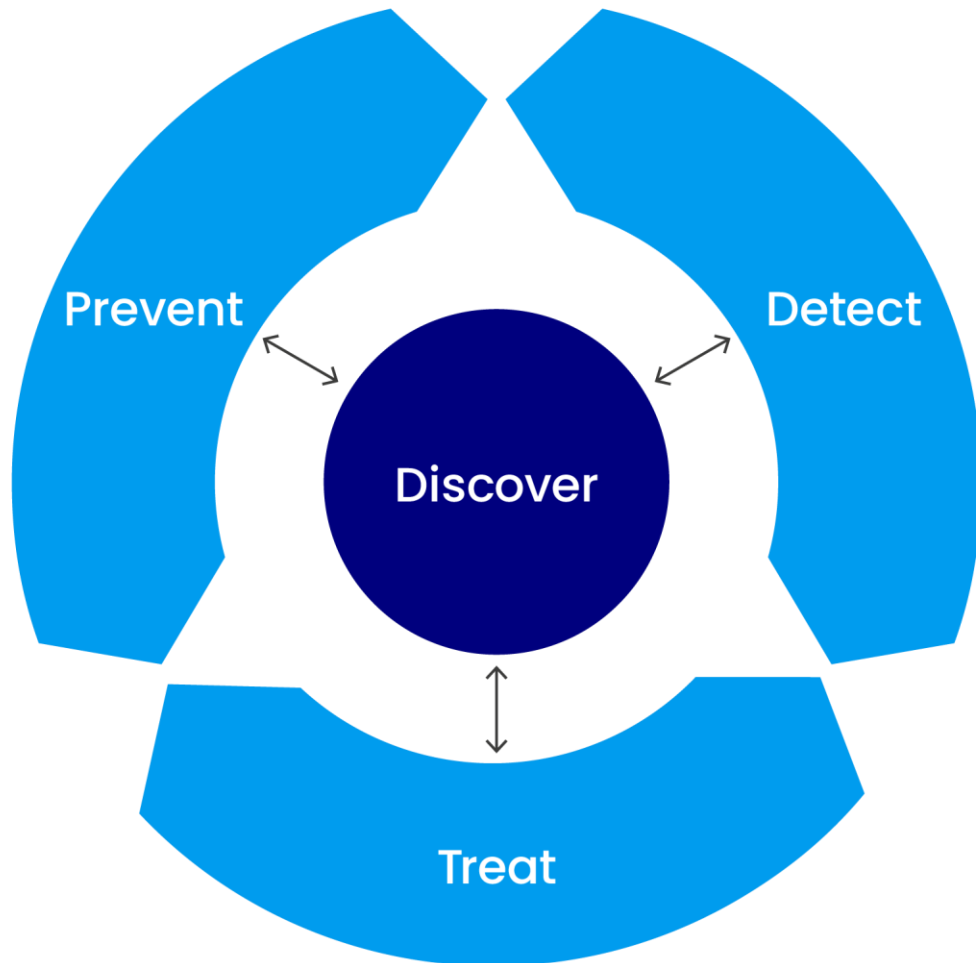


Since the early 1980s, we have taken

170

new drugs into early clinical trials

Our research strategy has discovery research and excellence at its heart



Discover: We will understand the mechanisms of how cancer develops and progresses to unlock new and better ways to prevent, detect and treat it



Prevent: We will use biological insights to inform a new wave of preventive interventions that decrease cancer incidence equitably across society



Detect: We will detect cancer at the earliest point of intervention by understanding the underlying biology of cancers and the transition from health to early disease



Treat: We will use biological discoveries about the mechanisms of how cancer evolves to inform clinical studies

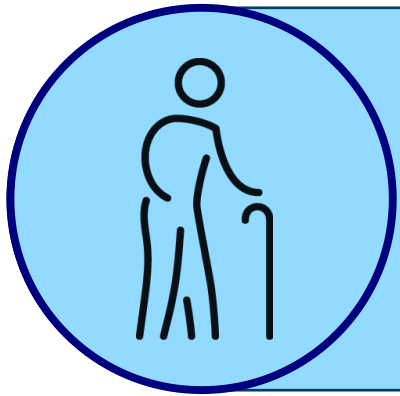
Prevention Research Strategic Themes

To address these challenges, we will focus on five strategic themes



Priority Research Areas

We have identified five priority research areas where action is needed most & where opportunity is greatest



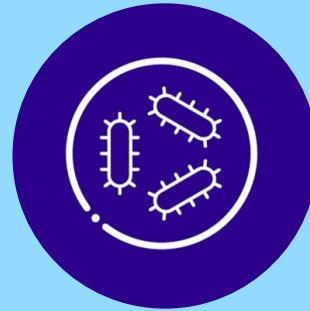
Ageing



Tobacco
and vaping



Obesity, metabolism,
diet and physical
activity



Infection, immunity,
inflammation and
the microbiome



Accumulation
of somatic
mutations

**About the
Canadian Cancer
Society**



Canadian
Cancer
Society

Société
canadienne
du cancer

Who we are – Canada's first charity, founded in 1938





Canadian Cancer Society
Société canadienne du cancer

CCS Mission Goals



1. Research

To fund a deliberate portfolio of scientifically excellent, high performance research that improves cancer outcomes and addresses greatest opportunities for progress, while providing recognition to CCS, leveraging partnerships and meeting donor interests.

Since the 1940's CCS has invested more than \$2 billion in cancer research



2. Advocacy

To lead change in the most pressing areas of cancer policy including prevention, access, affordability and support by engaging communities, communicating clearly and being a trusted partner for institutions and governments.

Over the past five years, CCS has successfully driven more than 100 policy wins



3. Information & Support

To provide the highest quality cancer information for all people in Canada, promote cancer prevention, and provide targeted support in a sustainable cost structure to help people with cancer, their families and caregivers cope.

Since 2017, CCS has helped more than 55M people by providing credible information and support



Canadian Cancer Society
Société canadienne du cancer

CCS Research

CCS has been funding research
for more than **75 years**

SINCE 1947:



Largest cancer charity in Canada, our investment in cancer research totals over **\$2.1B** to date



CCS invests more than **\$40M** annually in research that **spans all cancers, across all types of research**, and in any step of the care pathway – from prevention to palliation and end-of-life. We leverage these funds through numerous external cross-sector partnerships.



Research funding mechanisms have evolved over time – but we've always used an expert review process to ensure only the best research is funded



Today, scientific experts, people with lived experience and end-users weigh in on the merit, applicability and relevance of each proposal



Canadian Cancer Society
Société canadienne du cancer

Prevention: The Long and Winding Road to Tobacco Control

The last 25 years....

2010 Canada first country to
ban all flavours in cigarettes

2005 Newfoundland is first
in world to ban smoking in
restaurants and bars

2000 Canada first country
to require picture warning
on tobacco packages

2000 CCS established
Smokers Help Line in Ontario

2001 Saskatchewan second jurisdiction
in the world to ban visible tobacco displays

2021 – CCS launches Canada-first
Centre for Cancer Prevention and Support

2013 CCS launches Propel Centre
for Population Health Impact





Examples of Canadian Prevention Resources

Canadian Cancer Trials Group (CCTG)

academic cooperative oncology group

600+ trials in 40+ countries

38+ years experience in 205+ drug trials

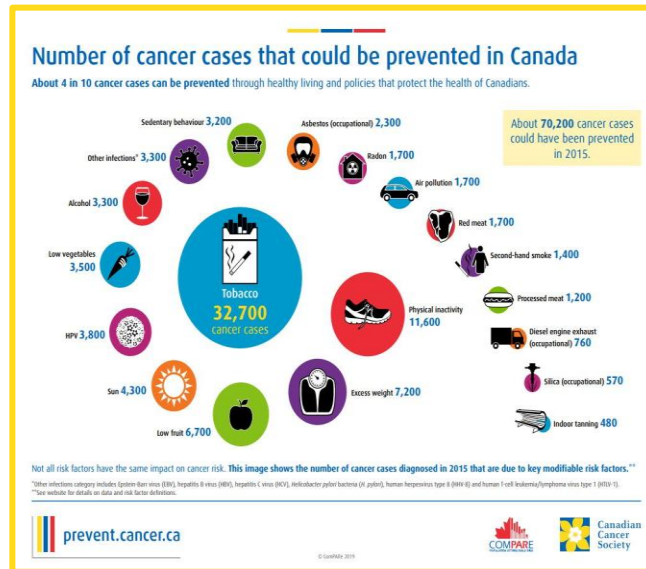
300,000+ samples from 120+ trials

2100+ investigators at 85+ sites

CCS has invested over \$158M in CCTG since 1980

ComPARE Study

Launched in 2015 To examine the risk of cancers due to 20 modifiable factors.



Shown about 70,200 cancer cases could have been prevented in 2015 by changes in risk exposure.

Nikon Centre of Excellence for In Vivo Imaging

Established to visualize and probe the tumour microenvironment and track immune cells in real time.

Includes sophisticated confocal and super-resolution microscopes to study dynamic, live cell and tissue processes in vivo.

Shows interactions between tumour immune responses and different immunotherapies, including cellular therapies

CHARM Consortium



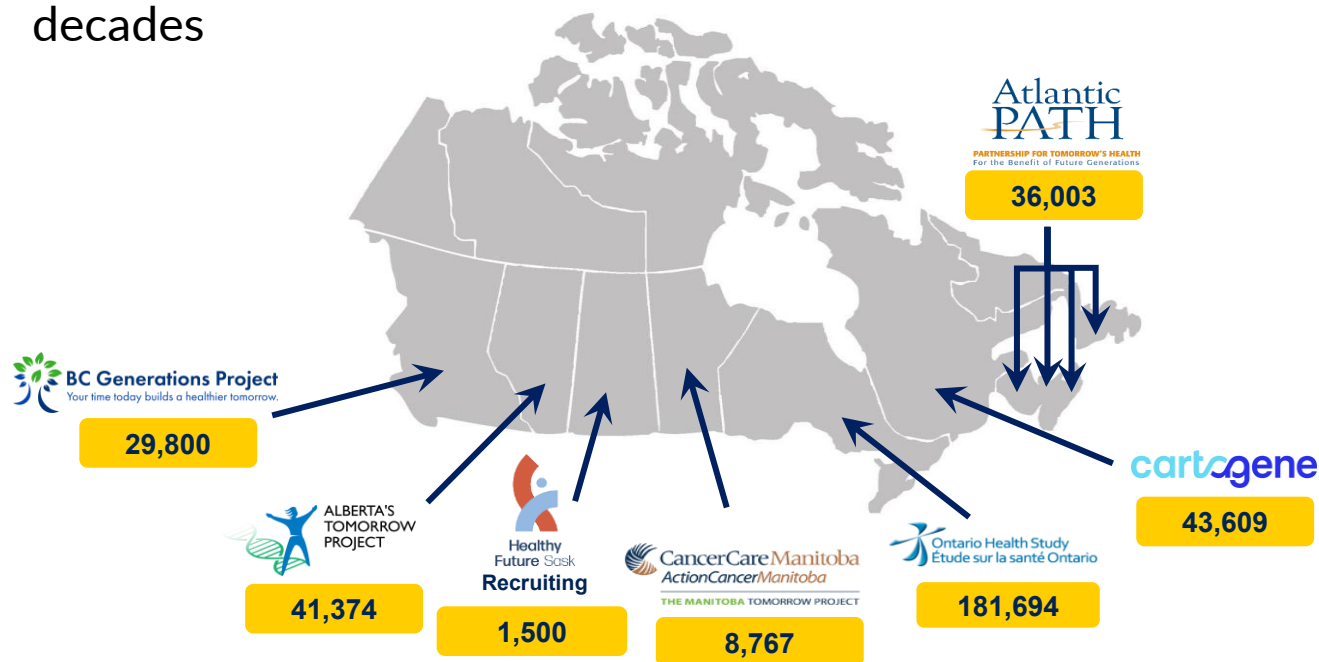
Consortium is comprised of researchers and hereditary cancer specialists from across Canada.

Goal is to develop blood tests to predict cancer development in carriers using circulating DNA and cfDNA.

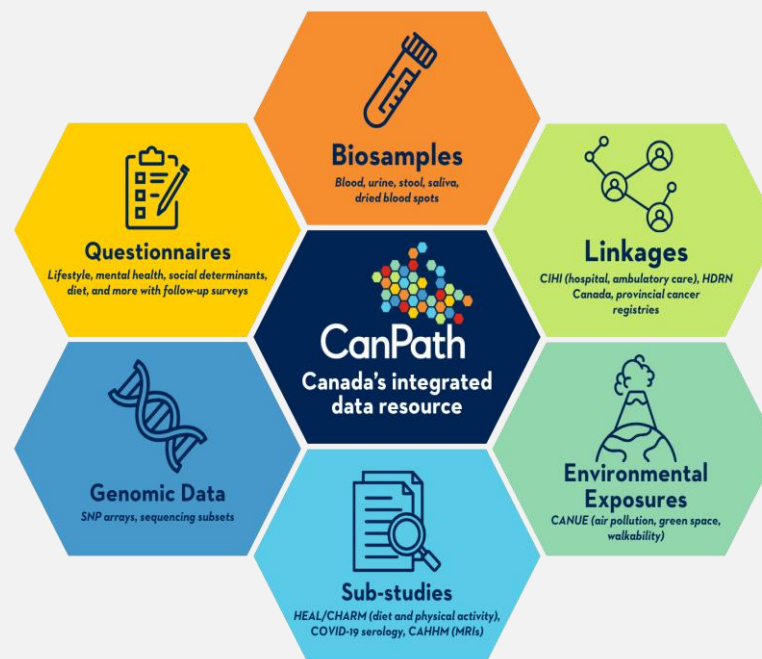


Leveraging CanPath's data to foster collaborative research and enhance public health outcomes

CanPath is following the health of over 330,000 adult Canadians for decades



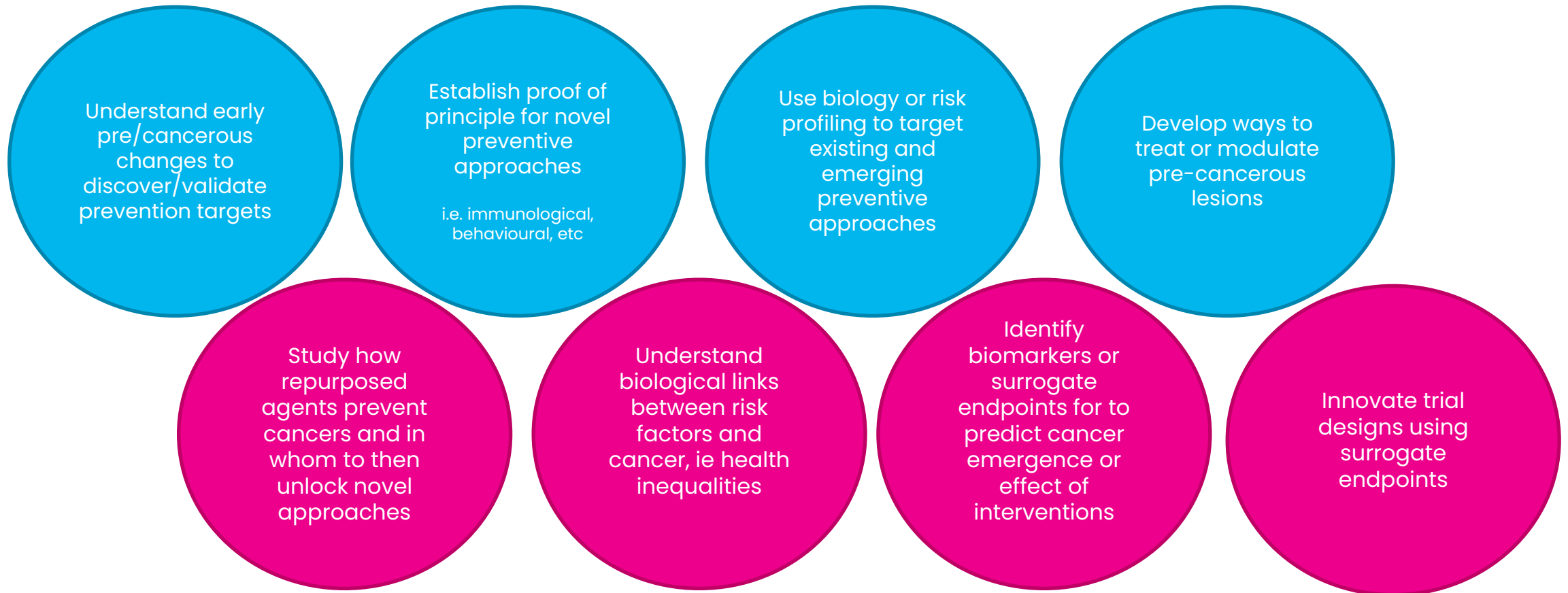
From baseline data and biosamples to vast data linkages - **CanPath is a uniquely comprehensive platform for prevention research**



Biology to Prevention Award

What is suitable for this scheme?

The Biology to Prevention Awards support translational research that utilises our increasing understanding of the biological mechanisms underlying cancer aetiology, genesis, promotion and risk, in order to translate towards precision prevention interventions.



What is not in remit for this scheme?

- Research lacking a clear, direct prevention research focus and a defined trajectory toward impacting cancer risk or incidence.
- Pure mechanistic discovery research with no clear relevance to cancer prevention.
- Research focused on preventing cancer progression, recurrence or treatment side effects.
- Purely associative epidemiological or behavioural research lacking biological or mechanistic insights.
- Late-stage intervention trials.

Who/What would be eligible?

Proposals are expected to be true and, where possible, equal, intellectual partnerships co-led by at least one UK and one Canada-based co-applicant.

Each applicant should bring complementary yet distinct expertise to enable a multidisciplinary approach to address critical research questions in **mechanistically driven** cancer prevention research.

Applicants are expected to clearly articulate the stepwise line of sight to the patient/public benefit of the proposed work.

We will welcome:

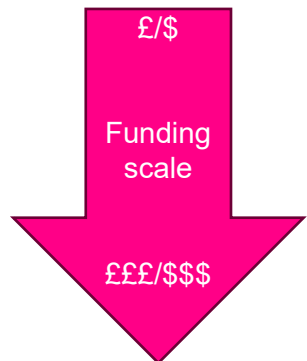
- Research from **discovery to preclinical development**, including early clinical experimentation, intended to lead towards clinical trials of preventive intervention.
- The development of new (and supporting ongoing) collaborative partnerships with a truly cross-disciplinary innovative proposal.
- Collaborations between existing cancer prevention researchers (including population, behavioural and implementation researchers) and other new entrants to the cancer prevention field.

What is funded?

You can apply for between £100k–600k for UK direct research costs and up to CAD\$1m for Canada-based research costs

Funding lasts up to five years and can be used to fund postdoctoral researchers and technical staff, with associated running costs. Refer to the **guidance document** and relevant linked **funding policies** to ensure costs are admissible.

We welcome projects at various stages (new & exploratory and established research ideas):



- New collaborations or pilot studies with minimal preliminary data but strong conceptual rationale (high-risk, high-reward) ~ **up to £200k/CAD\$376k over 1-2 years**
- longer-term projects with robust preliminary data eligible for **up to ~£1.2m/CAD\$2.1m equivalent over three to five years**; funding amount and duration will depend on the scientific need and extent of preliminary data



Dr David Church & Professor Simon Leedham

University of Oxford

19

LYNCHVAX – A PRECISION PREVENTION VACCINATION STRATEGY FOR LYNCH SYNDROME

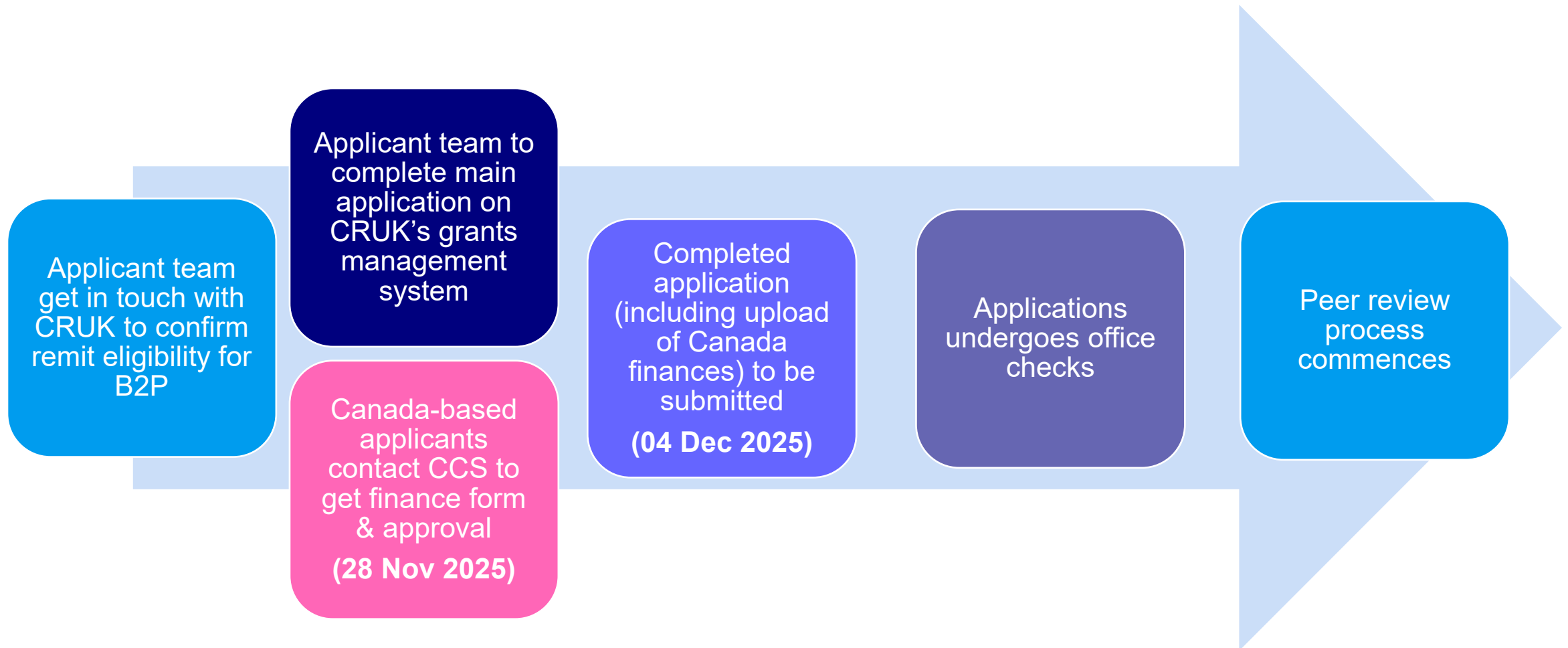
(CRUK funded – May 24)

Objective: To develop a preventive vaccine for individuals with Lynch syndrome, a genetic condition that significantly increases the risk of various cancers, including bowel, womb, and ovarian cancers.

- **Targeting Early Cancer Cells:** The team are analysing precancerous cells from Lynch syndrome patients to identify immune system targets.
- **Vaccine Development:** The goal is to create a vaccine that trains the immune system to recognise and eliminate these early cancerous cells before they develop into full-blown cancer.
- **Patient Involvement:** Individuals with Lynch syndrome are actively involved in the research process, providing insights and feedback.
- **Significance:** If successful, LynchVax could offer a preventive strategy for those at high genetic risk, potentially reducing the incidence of several cancer types associated with Lynch syndrome.

Application and review process

Application process



What is required as part of the application?

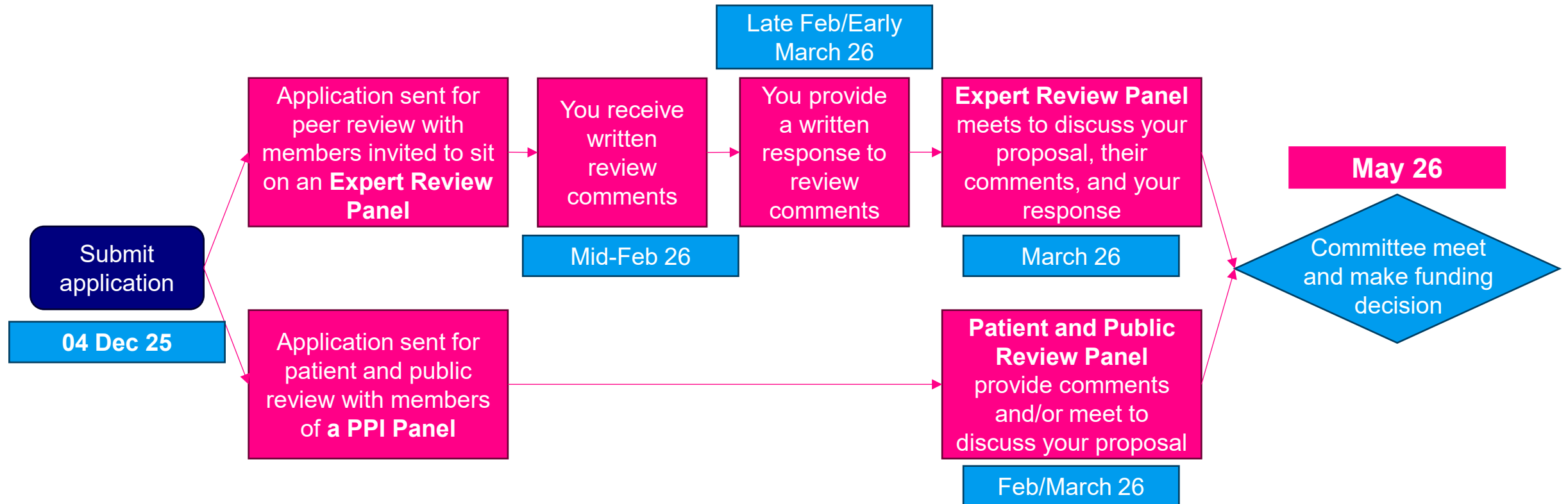
Applications for co-funding must be submitted by a UK-based co-lead applicant on the CRUK grants management system, Flexi-Grant

Applications involve a series of text fields and document uploads, including:

- Research abstract and lay summary (aimed at an audience with a reading age of less than 13 years old)
- Cancer Prevention Relevance statement (step-wise line of sight of the proposed work)
- Research proposal upload (2,500 words)
- Patient and Public Involvement plan
- 'Justification appendix' upload, including a statistical analysis plan
- Letters of support
- Data sharing plan
- Costs (UK costs completed in Flexi-Grant by your institution, CCS-approved Canada costs uploaded from CCS)

How are applications reviewed?

Applications are considered twice a year by the CRUK Prevention and Population Research Committee, assisted by our Panels



PREVENTION AND POPULATION RESEARCH COMMITTEE STRUCTURE



Chair:
Professor Sir John
Burn
(University of
Newcastle)

Prevention and Population Research Committee

Vice-Chair:
Professor Karen
Brown
(University of
Leicester)



Expert Review Panel:
Prevention and Population
Mechanistic Insights,
Immunology and Translational
Research

Chair: Professor Amanda Cross
(Imperial College London)

Vice Chair: Dr Eva Szabo

Patient and Public Review Panel

Co-Chairs: Ally Boyle
& Lisa Townsend

What are the assessment criteria?

- **Scientific excellence**
 - All applications must have a strong scientific rationale to support the proposed research.
- **Cancer prevention relevance**
 - Is the project likely to advance the fundamental understanding of, or improve, how cancer might be prevented, or its risk reduced?
- **Excellent team and collaborative environment**
 - What is being leveraged through this partnership? Is it an intellectual collaboration between the UK & US lead applicants?
 - Suitability and feasibility of the applicants to carry out the proposed research with access to the resources and facilities required for the successful fulfilment of the Award.
- **Resources requested**
 - The costs requested in an application should be reasonably justified in line with the experimental plans and, where possible, demonstrate value for money.
- **Track record**
 - The lead applicants and team members should have an excellent track record and potential to produce outstanding results.

The Committee will review this recommendation and assess how your proposal fits into an overall portfolio and addresses the CRUK-CCS mutual priorities areas

What makes a successful application?

Applicants are expected to clearly demonstrate:

- **Innovation and novelty** of the concept to cancer prevention or risk reduction, as well as the collaborative research team
- **Clear consideration of the expected next steps** beyond the end of the currently proposed project (to encourage longer-term thinking and line of sight to health impact i.e. a translational mentality)

Not every award needs to have immediate impact on cancer prevention but must clearly articulate the line of sight from the proposed work, through subsequent follow-on research, to eventual impact on cancer risk or incidence.

All applications will receive feedback from the committee.

How do I apply?

This is a multi-round co-funding scheme, with upcoming deadlines on 04 December 2025 and in mid-June 2026.

UK and Canada co-PIs must take the following steps:

- 1. Contact the CRUK office with a short summary of your research plan.** We will arrange a call to discuss your proposal. After a remit discussion, you will then be given a link to start an application on our grant management system, Flexi-Grant.
- 2. At this point, the Canada based co-PI must contact the Canada office** to receive a costing template and get approval on the admissible costs in line with CCS funding policies.
- 3. UK-based co-PI must complete and submit the application on Flexi-Grant**, including uploading the CCS costing template.

Applications for co-funding must include a complete CCS costing form, in order to be considered eligible for funding.

CRUK office: pprc@cancer.org.uk

CCS office: research@cancer.ca

THE
**CANCER
PREVENTION
RESEARCH**
CONFERENCE

SAVE THE DATE
ATLANTA • GA
JUNE 3 – 5, 2026



Any questions?

For any questions, please reach out to:

CRUK

pprc@cancer.org.uk

CCS

research@cancer.ca



Canadian
Cancer
Society