Integration of Magnetic Resonance Imaging and Proton Therapy

Aswin Hoffmann, MSc PhD

Medical Physicist¹ / Research Group Leader MR-Therapy²

¹Department of Radiotherapy, University Hospital Carl Gustav Carus, Dresden ²Medical Radiation Physics Section, Institute of Radiation Oncology – OncoRay, Helmholtz-Centre Dresden-Rossendorf, Dresden





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Universitätsklinikum Carl Gustav Carus



OncoRay





OncoRay structure











Centre for Innovation Competence supported by:

- Fechnical University Dresden
- > Helmholtz-Center Dresden-Rossendorf
- > University Hospital Carl Gustav Carus



OncoRay is situated on the Medical Campus and belongs to the Medical Faculty / University Hospital

Department of Radiotherapy

Director

Prof. Dr. med. Mechthild Krause

Personell

- 8 ROs (Strahlentherapeuten)
- 10 MPEs (*Medizinphysikexperte*)
- 16 MTAs (*medizin-technische Assistent*)
- 25 KS (Krankenschwester)

Radiation treatments per year

- 2400 oncological indications
- 500 benign indications



Expertise focus

- I rectal cancer
- I head and neck cancer
- I lung cancer



Photon therapy using high-energy X-rays





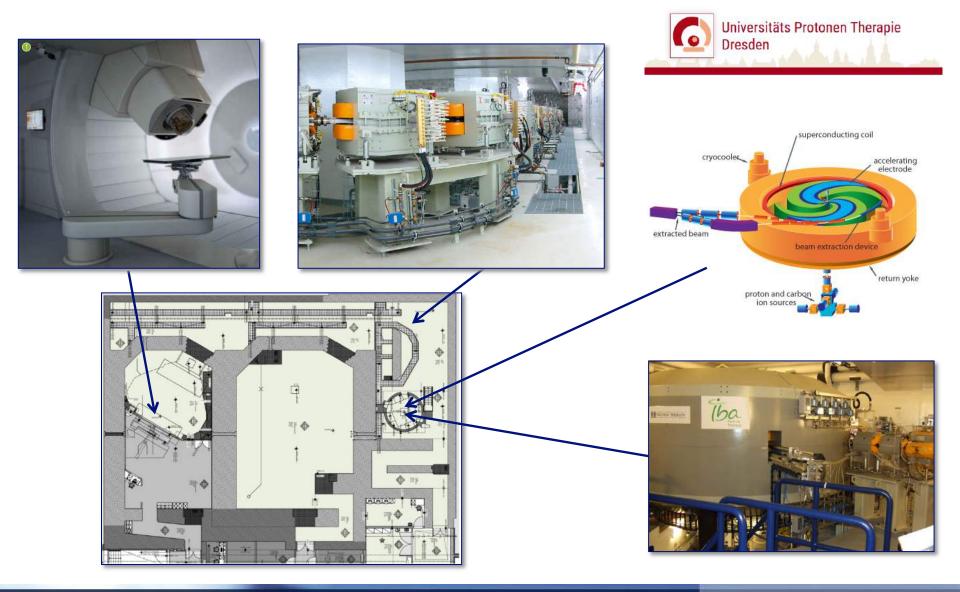
Particle therapy using high-energy protons



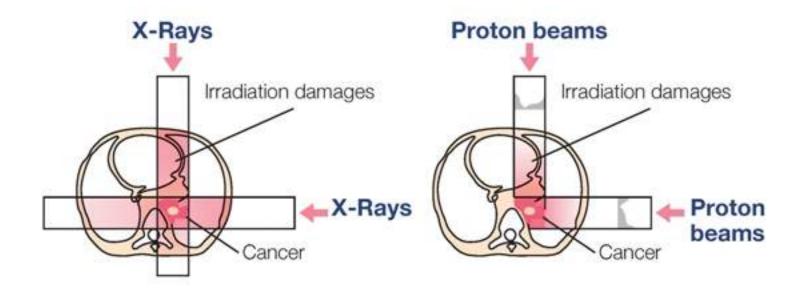


University Proton Therapy Dresden





X-ray therapy vs. Proton therapy





Proton beam <u>stops</u> inside the patient \rightarrow **improved** normal tissue sparing

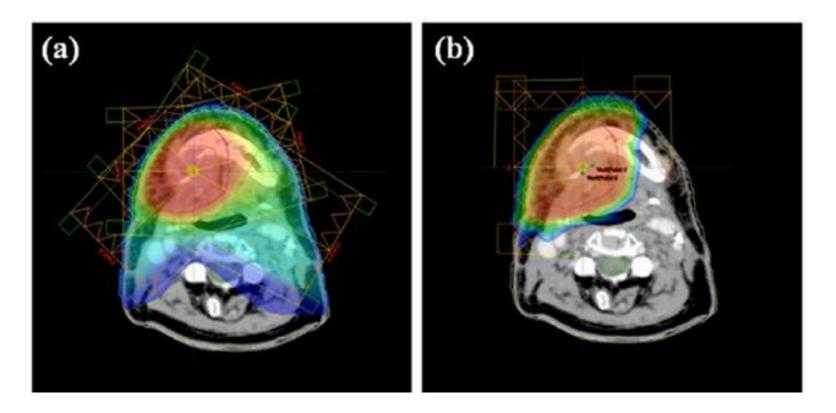


Density changes in beam path → **range** (penetration depth) **uncertainty**

Treatment planning: dose distributions



Head and neck tumour



X-ray therapy

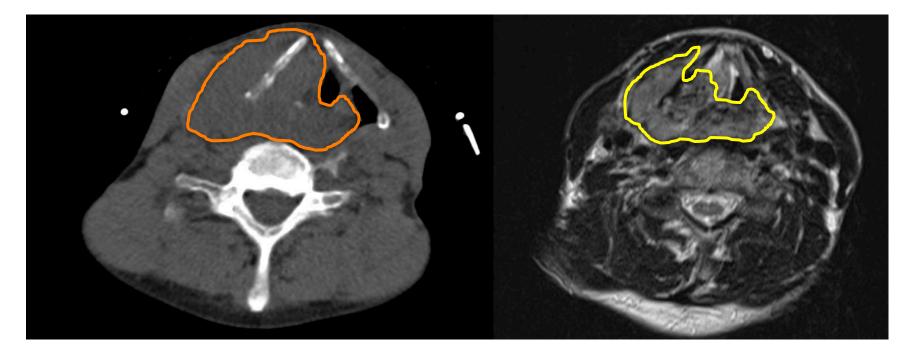
Proton therapy

Image-guided target volume definition



Head and neck tumour

T4N1M0 laryngeal carcinoma



Computed Tomography (CT)

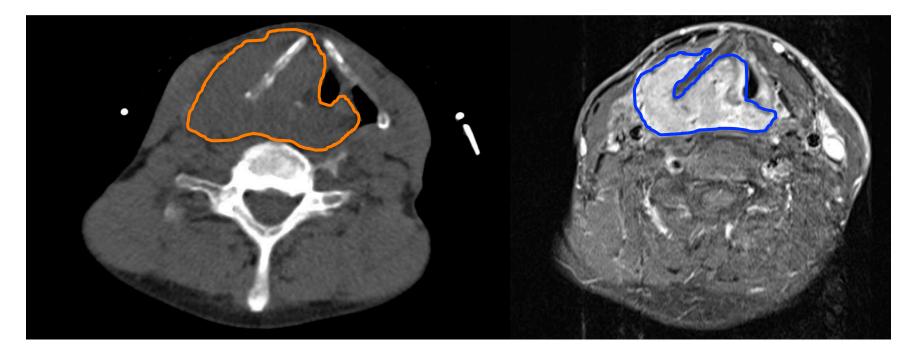
Magnetic Resonance Imaging (MRI)

Image-guided target volume definition



Head and neck tumour

T4N1M0 laryngeal carcinoma

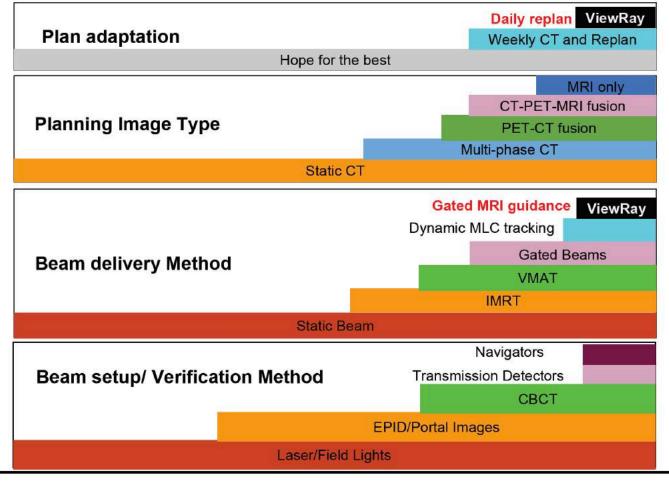


Computed Tomography (CT)

Magnetic Resonance Imaging (MRI)

Technical developments in radiotherapy





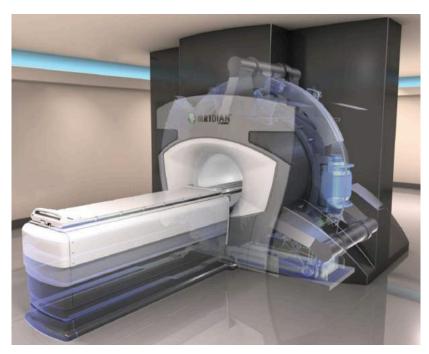
1990 - 1992 - 1994 - 1996 - 1998 - 2000 - 2002 - 2004 - 2006 - 2008 - 2010 - 2012 - 2014 - 2016 year

Courtesy: dr. Brad Oborn (Univ. Wollongong)

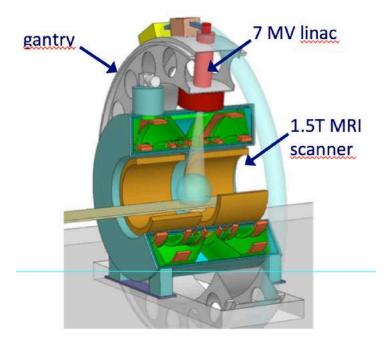
Real-time MRI-guided radiotherapy



MRIdian (ViewRay Inc.)



Integrated MRI-Linac

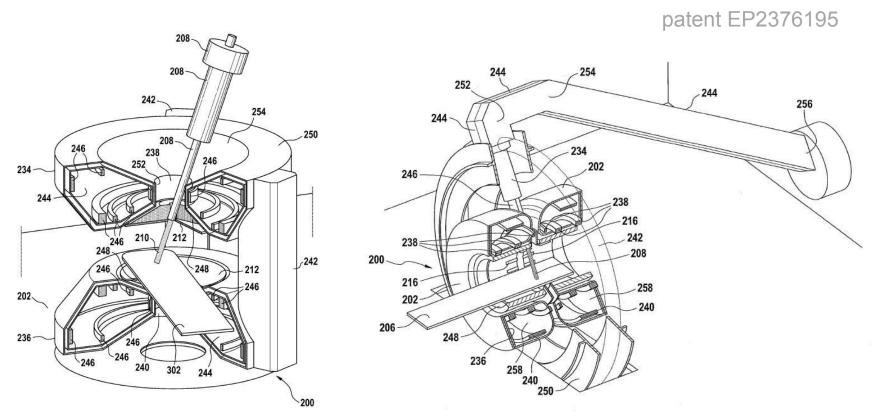


Elekta/Philips (Utrecht group)

- gantry with ⁶⁰Co source heads
- split bore 0.35 T magnet

Vision: treat what you see, track what you treat

MRI scanner at beam isocenter



Open MRI scanner

Split-bore MRI scanner





1. Image-guidance in proton therapy lags behind IGXT

- 2D X-ray imaging (throughout available)
- in-room CT (only available in some centers)
- on-board CBCT (recently released product)

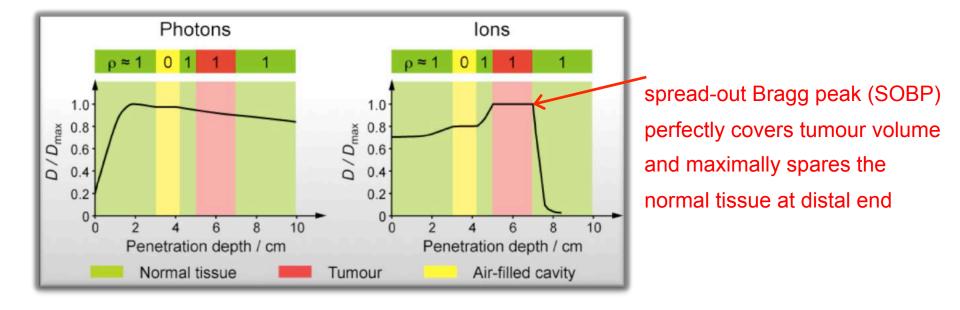
X-ray based systems:

- limited intra-fractional imaging capabilities
- limited soft-tissue contrast





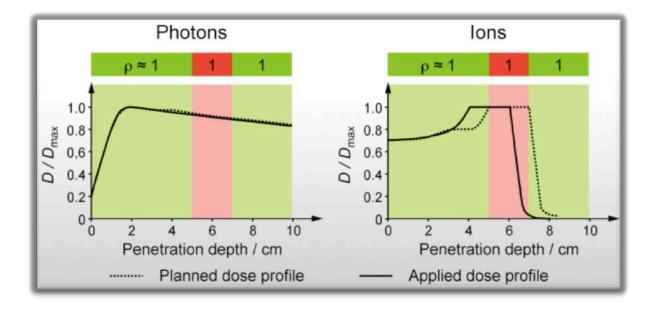
- 2. Protons are more sensitive to anatomical variations than photons
 - material composition in beam path determines Bragg peak location



• What happens if the air-filled cavity ($\rho \approx 0$) is replaced by normal tissue ($\rho \approx 1$)?



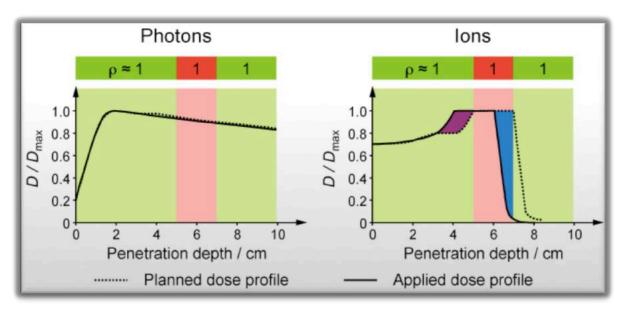
- 2. Protons are more sensitive to anatomical variations than photons
 - material composition in beam path determines Bragg peak location



- **Protons**: SOBP will shift stream upwards
- **Photons**: hardly any dosimetric effect between planned and applied dose



- 2. Protons are more sensitive to anatomical variations than photons
 - material composition in beam path determines Bragg peak location



changed ion range will cause

- overdose in normal tissue
- underdose in tumour

Because of these uncertainties, relatively large margins are still needed

Currently the dosimetric benefit of proton therapy is <u>**not**</u> fully exploited !!

Motivation for MRI

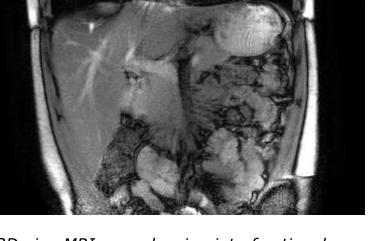
MRI offers

- ✓ Fast real-time imaging
- ✓ Superior soft tissue contrast
- ✓ Freedom from radiation dose

Challenge

Integration of MRI and PT for on-line image-guidance faces the challenge of their **mutual interaction**

2D-cine MRI scan showing intrafractional motion in the abdomen





Technical challenges in MRiPT



Vision: integrate MR scanner at beam isocenter

- MR image degradation from gantry
- MR image degradation during irradiation
- Radiation harness of magnet
- Beam interaction with RF antenna
- Planning on MR images
- Range detection
- Dosimetry in the presence of a magnetic field
- Beam deflection due to magnetic field of MR scanner

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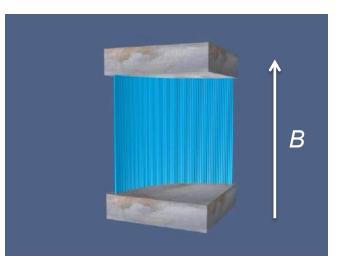
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Challenges in MRiPT

Why are moving protons deflected in a magnetic field?

- protons are charged particles
- charged particles experience the Lorentz force in a magnetic field





Deflected beams have to be taken into account for treatment planning!



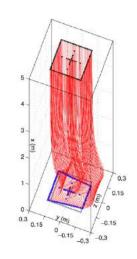
Developments in MRiPT

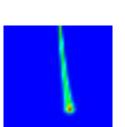
Beam deflection simulation studies:

- 2008 Dose to phantom in uniform B₁ field Raaymakers *et al.*, Phys. Med. Biol. 53(20), 2008 Wolf & Bortfeld, Phys. Med. Biol. 57(17), 2012
- **2014 Dose to patient in uniform** *B*_⊥ **field** Moteabbed *et al.*, Med. Phys. 41(11), 2014 Hartman *et al.*, Phys. Med. Biol. 60(11), 2015
- 2015 Dosimetric effects of MRI fringe field Oborn *et al.*, Med. Phys. 42(5), 2015

Experimental proof-of-principle:

 2016 First "in magnet" film dosimetry in slab phantom Hoffmann et al., OncoRay (Dresden)









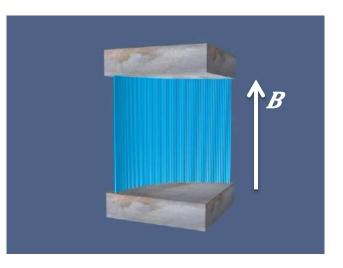


- 1. Develop fast and accurate **beam trajectory** prediction model
 - use to design experimental setup with real magnet and phantom
 - facilitate non-uniform *B* fields and inhomogeneous media
 - compare with existing analytical and numerical methods
- 2. Develop a Monte Carlo model for **full dose** simulations
 - quantify magnetic field induced dose distortions
 - estimate **demagnetization** and **radioactivation** effects
- 3. Realize measurement setup for "*in magnet*" experiments
 - show dosimetric proof-of-principle with proton pencil beams



1. Moving proton is **deflected in magnetic field** through Lorentz force

$$\vec{F} = m \frac{\mathrm{d}\vec{v}}{\mathrm{d}t} = q(\vec{v} \times \vec{B})$$

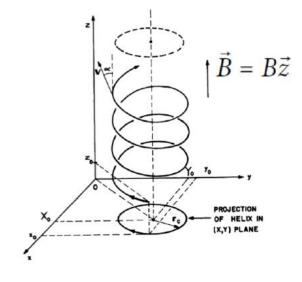


- 2. Protons **loose energy** while interacting with matter
 - protons have a **finite range** (Bragg-Kleeman rule): $R_0 = \alpha E_0^p$ least-square fit based on ICRU 49:

 $p = 1.75, \alpha = 2.43 \times 10^{-3} \text{ cm/MeV}^{p} \text{ for } E_{0} \le 250 \text{ MeV}$ (Bortfeld, 1997)



In vacuo: orbit of charged particle is spiral trajectory parallel to B field



Gyroradius can be expressed in terms of kinetic energy

$$r = \frac{\sin\theta}{qBc} \left[(E_k + m_o c^2)^2 - (m_o c^2)^2 \right]^{\frac{1}{2}}$$

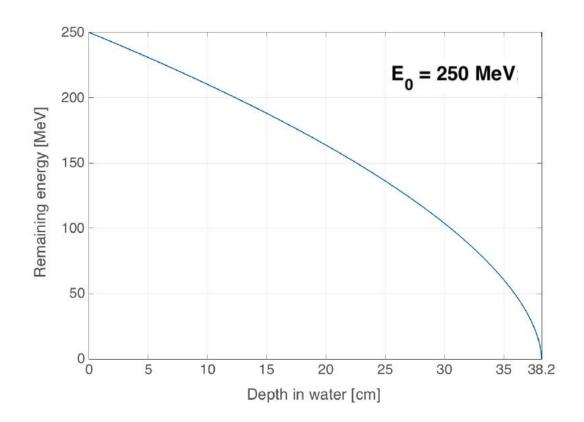
- *m*_o rest mass of proton
- c speed of light
- heta angle between velocity vector \vec{v}

and magnetic field vector $ec{B}$

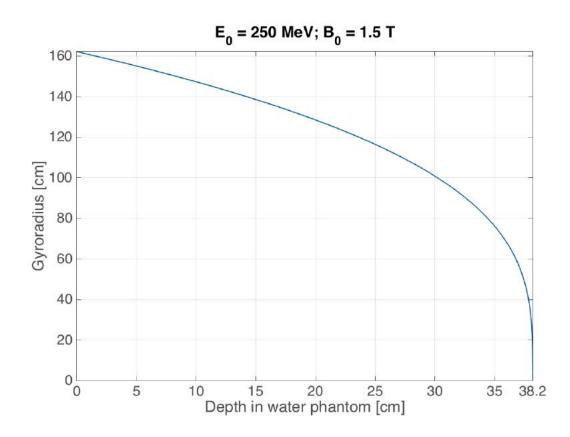


CSDA: **remaining energy** of proton as function of depth *s* in water:

 $E(s) = \alpha^{-1/p} (R_0 - s)^{1/p}$



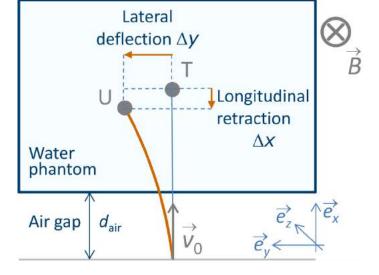
Subsitute **remaining energy** formula into the **gyroradius** formula to obtain the **gyroradius as function of depth**



- Iterative reconstruction of proton beam trajectory in water
- Discretization in steps of constant energy
- Radius of gyration depends on energy:

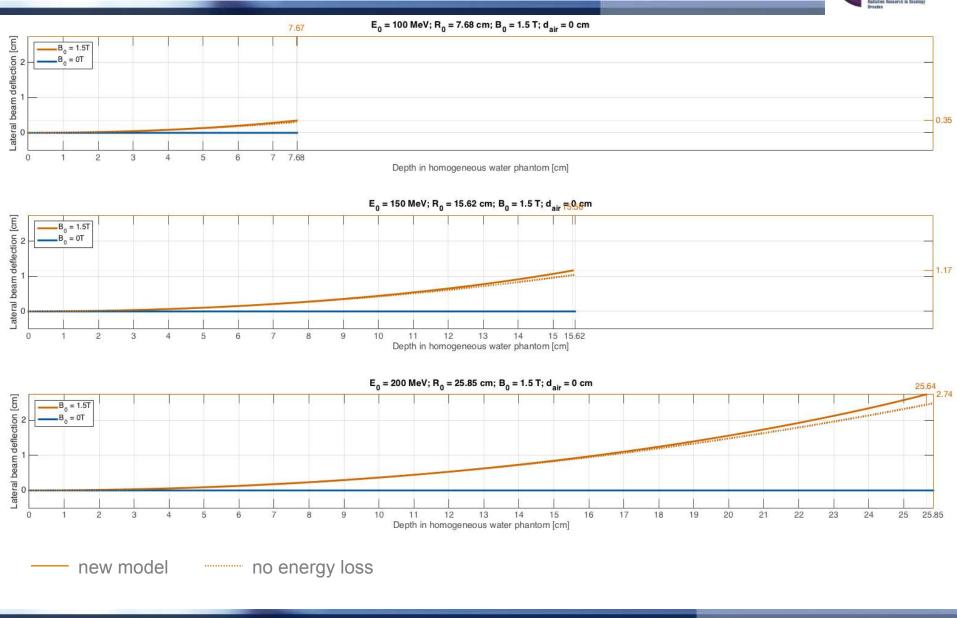
$$r_{i} = \frac{mv_{i}}{eB_{0}} = \frac{\sqrt{2mE_{i}(1 + \frac{E_{i}}{2mc^{2}})}}{eB_{0}}$$

e: proton charge, m: rest mass, v: velocity, B₀: magn. flux density, E: energy, c: lightspeed



T = intended Bragg peak spot U = actual Bragg peak spot

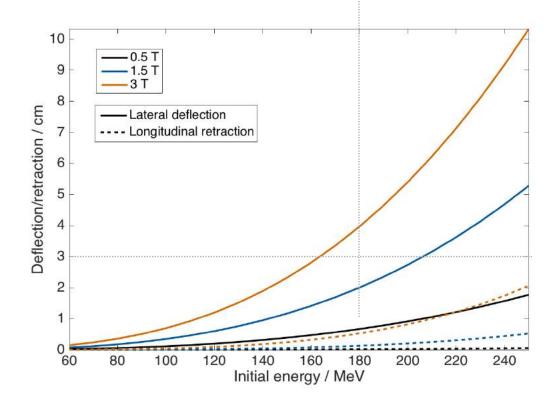




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Beam trajectory prediction: in water





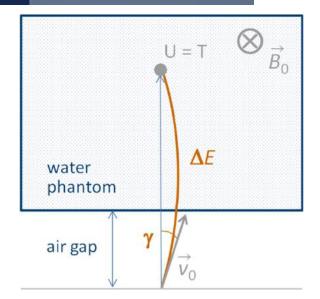
- Lateral deflection depends on B and E₀ (proportional to 3rd power)
- Lateral deflection dominates over **longitudinal retraction**
- **Relativistic corrections** are small, but non-negligible at higher E_0

Can the deflection be corrected for?

- Altered entrance angle γ corrects for lateral deflection
- Altered initial energy ΔE corrects for longitudinal retraction

 Numerical optimization minimizes distance to intended Bragg peak position





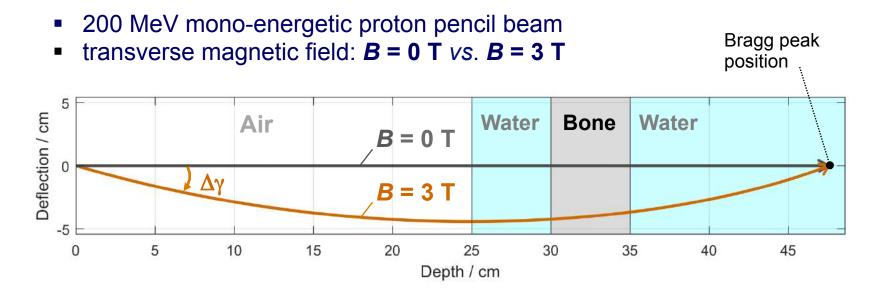
B_0/T	$E_0/{\rm MeV}$	$\Delta E/{ m MeV}$	$\gamma/^{\circ}$
0.5	60	0.054	3.55
	150	0.068	3.25
	250	0.123	3.97
1.5	60	0.500	10.67
	150	0.618	9.77
	250	1.122	11.98
3	60	2.034	21.46
	150	2.525	19.71
	250	4.730	24.37



How about heterogeneous media?



Fast beam trajectory prediction in heterogeneous media



Optimized beam correction parameters

- **angle** adjustment: $\Delta \gamma = 20.1 \text{ deg}$
- energy adjustment (due to increased pathlength): $\Delta E_0 = +3.23 \text{ MeV}$



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Prediction and compensation of magnetic beam deflection in MR-integrated proton therapy: a method optimized regarding accuracy, versatility and speed

Sonja M Schellhammer¹ and Aswin L Hoffmann^{1,2}

¹ Helmholtz-Zentrum Dresden-Rossendorf, Institute of Radiooncology, Händelallee 26, 01309 Dresden, Germany

² Department of Radiotherapy and Radiooncology, University Hospital Carl Gustav Carus at the Technische Universität Dresden, Dresden, Germany

Beam trajectory prediction



Limitations of our current model:

- 1. range straggling effect due to proton scattering and nuclear reactions has been neglected
- 2. energy dispersion has not been included
- 3. no **realistic magnetic field** considered so far
- 4. no **experimental validation** performed so far

Experimental validation at UPTD





- isochronous cyclotron (IBA)
- beam energy: 70–230 MeV
- passive scattering + active scanning
- first patient treated: 2014

- 15×20 m² experimental room
- static beam line
- intelligent beam switching system

Experimental room

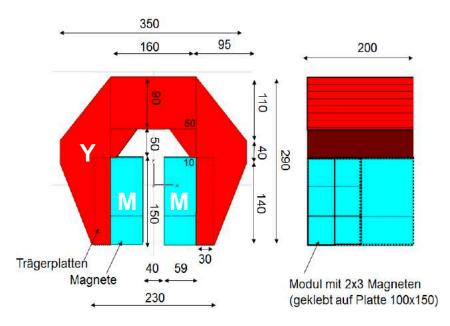


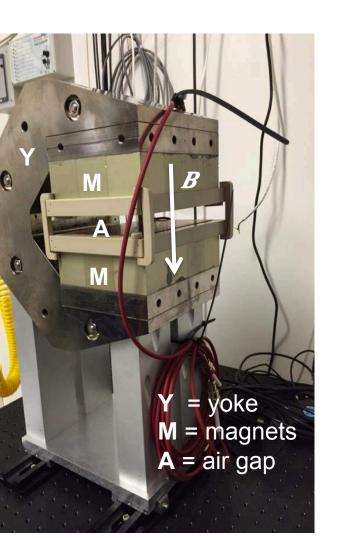


Experimental validation

Permanent Nd₂Fe₁₄B dipole magnet

- 0.95 T
- 15 × 20 cm² field >0.5 T
- transverse magnetic field
- yoke: steel grade 1008
- magnets: NdFeB grade 764 TP







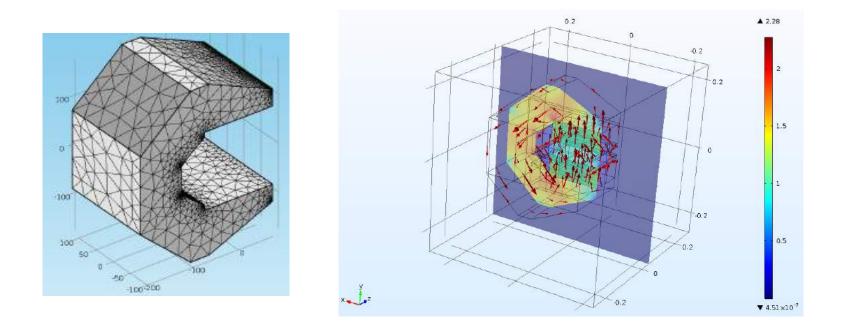
Magnetic field modelling



FEM simulations (COMSOL Multiphysics®)

- define **geometry** and **material properties** (μ_r , HB curves for iron, ...)
- solve stationary Maxwell equation on a mesh under boundary conditions

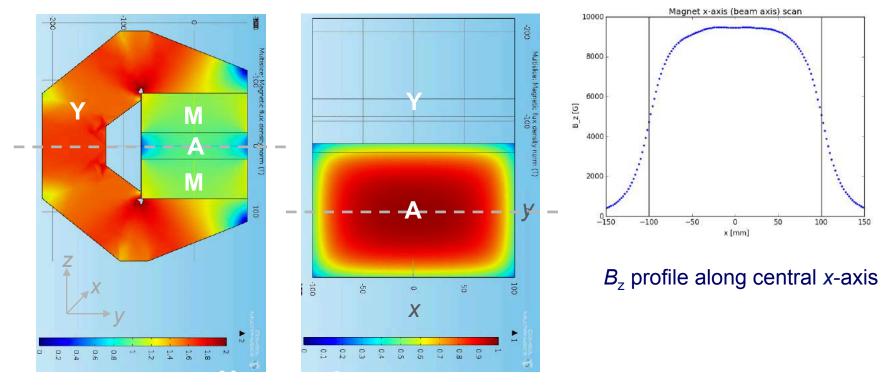
$$\vec{\nabla} \times \vec{H} = 0$$
 where $\vec{B} = \mu_r \mu_0 \vec{H} + \vec{B}_r$ and $\vec{B} = \vec{\nabla} \times \vec{A}$ $B_r = 1.37 \text{ T} (\text{Nd}_2\text{Fe}_{14}\text{B})$



Magnetic field modelling



Result: 3D map of magnetic flux density



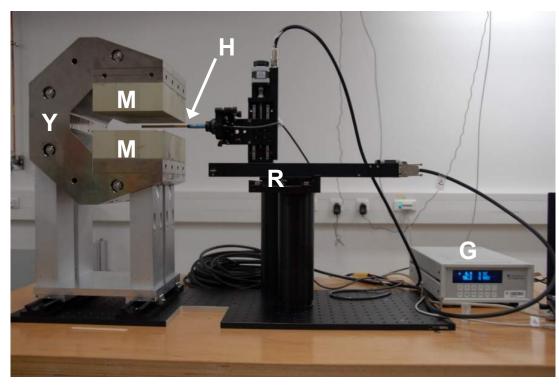
sagittal view

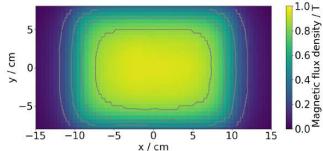
transversal view through center of air gap

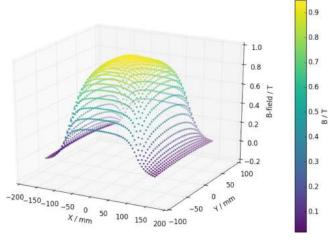
Magnetic field measurements



Automated magnetometry







Y = yokeM = magnets

- **H** = Hall probe
- **G** = Gauss meter
- **R** = 3D robotic positioner

$B_{\rm z}$ component

Magnetic modelling and measurements



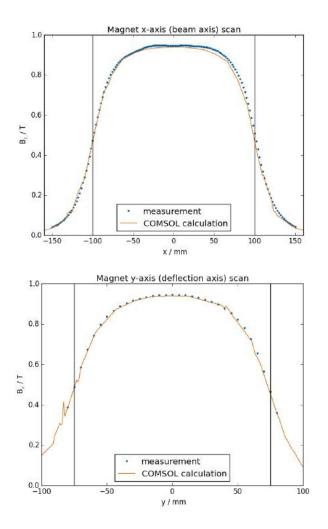
Comparison of FEM simulations and magnetometry

B_z on central x axis

- Max difference:
 - 40 mT (4%) in high gradient region
 - 23 mT (2.4%) in plateau region

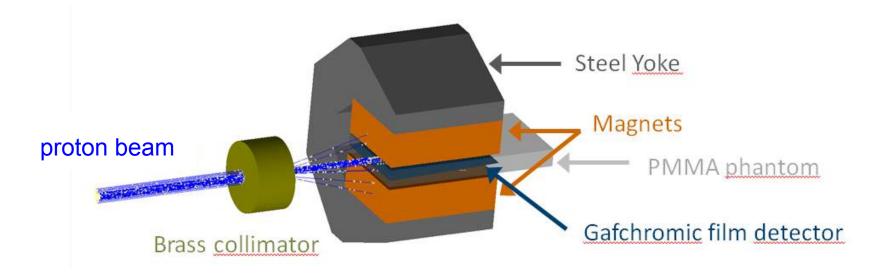
B_z on central y axis

- Max difference:
 - 19 mT (2%) in high gradient region
 - 2 mT (0.2%) in plateau region



Monte Carlo simulation (Geant4)





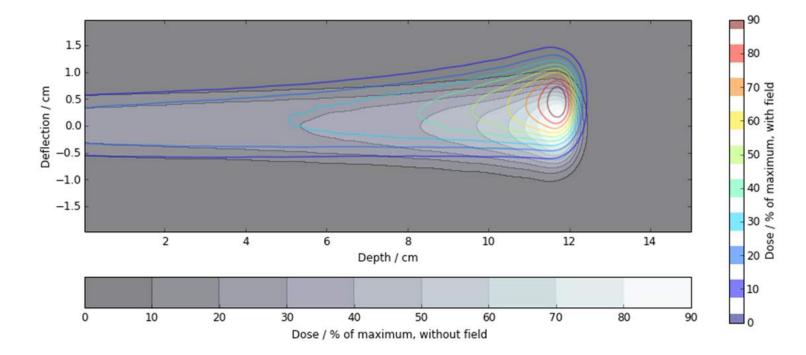
- **Beam** : $E_0 = 70-180$ MeV, $\sigma_r = 4$ mm, d = 170 cm
- **Collimator** : \emptyset = 5, 10 mm, r_{out} = 9 cm, I = 6.6 cm, d = 20 cm, brass
- Phantom : 30 × 15 × 3 cm³
- Film

- : 20 cm × 15 cm × 28 µm, tilted by 1° Gafchromic® EBT3 material = polyester + LiPAD
- **Magnets** : magnetic field extension: $50 \times 50 \times 50$ cm³

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Results of MC simulation

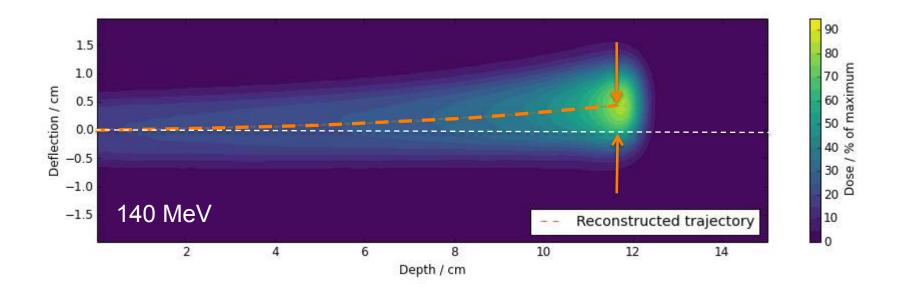
- poly-energetic 140 MeV proton pencil beam ($\sigma_{\rm E}$ = 1 MeV)
- Ø10 mm collimated beam
- with and without magnetic field





Results of MC simulations

Reconstruction of central beam path by Gaussian fit of lateral profile



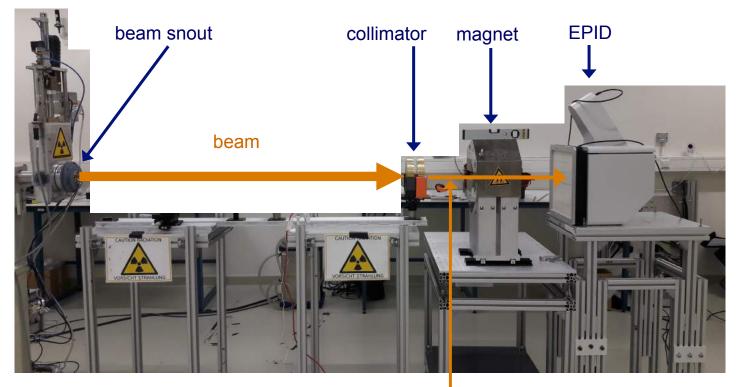
- Lateral beam deflection at Bragg peak: 5 mm
- **Conclusion**: these effects should be measurable with EBT3 film dosimetry



Transmission experiment

Measurement setup

Purpose: measure in-plane and out-of-plane beam deflection





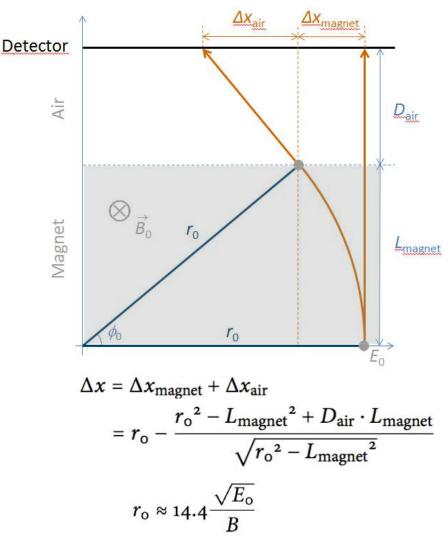
collimators Ø5 mm, Ø10 mm

pencil beam





In-plane beam deflection



	Lateral beam deflection / mm		
	predicted	measured	difference
E ₀ / MeV			
	D _{air} = 24 cm		
70	55.2	56.0	0.8
90	48.6	49.0	0.4
110	43.8	44.0	0.2
120	42.0	42.0	0.0
140	38.8	38.5	-0.3
160	36.3	36.0	-0.3
180	34.2	34.0	-0.2
200	32.4	32.0	-0.4
210	31.6	31.0	-0.6
225	30.5	30.0	-0.5

0.4 RMSE

Out-of-plane beam deflection

- measured: <0.5 mm</p>
- main component of *B* field is perpendicular to beam direction

Measurement setup



Proton beam

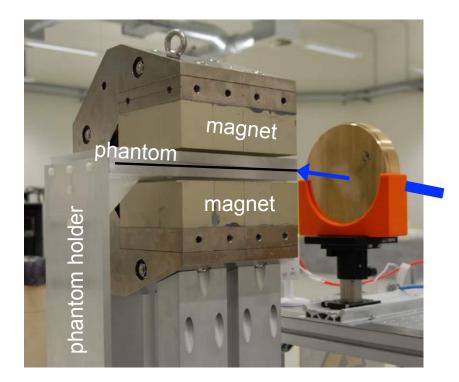
- Brass collimators with circular voids (Ø10 mm)
- Pencil beams (blue arrow in figure)
- Energy: 80, 100, ..., 180 MeV

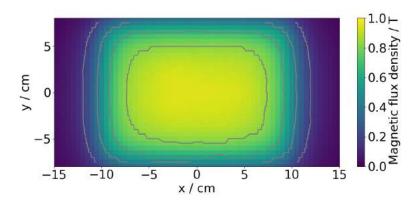
Tissue equivalent phantom

- 2 horizontal PMMA slabs
- placed between magnet poles
- 2D dose measurement with Gafchromic EBT3 film placed in central plane (1° inclination)

Magnetic field

- C-shaped 0.95 T permanent Nd₂Fe₁₄B dipole magnet (20 × 15 cm²)
- 3D Hall probe magnetometry used to map out the main and fringe field

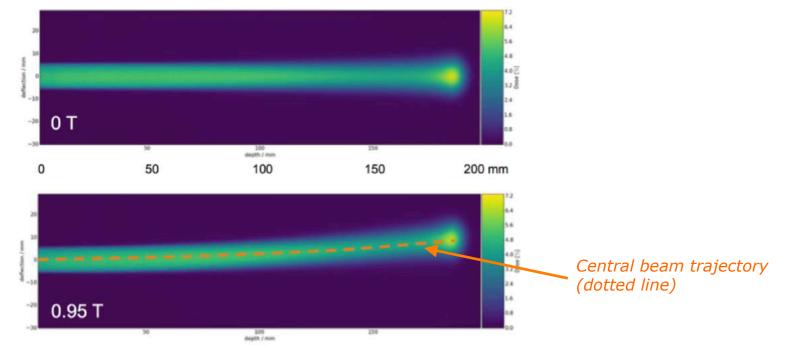




Irradiation experiment



- All irradiations were conducted with and without magnetic field
- Data without magnetic field serve as intrinsic reference
- **Depth-dose curves** reconstructed by radial integration of dose distributions
- Central **beam trajectory** estimated from fitting lateral profile with Gaussian

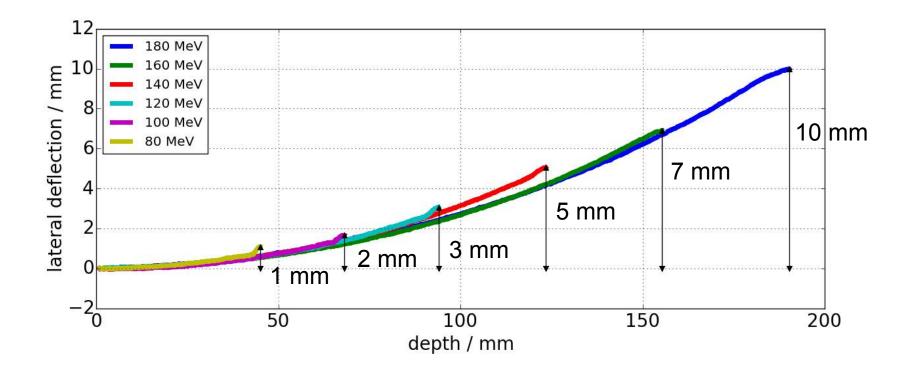


Planar dose distributions of 180 MeV proton pencil beam in PMMA with and without magnetic field

Film dosimetry results



Measured proton pencil beam trajectories in magnetic field



Lateral beam deflection ranges from 1–10 mm for energies of 80–180 MeV





- 1. FEM model accurately predicts the 3D magnetic field of our magnet measurement setup
- 2. Monte Carlo model
 - *B* field induced dose distortions are significant and measurable
 - deflected beam trajectory with high accuracy and precision
 - beam deflection can be compensated for during treatment planning
- 3. "In magnet " experiment
 - a "*nortolcyc*" was created with our 0.95 T magnet
 - **first dosimetric proof-of-principle** with proton pencil beams
- 4. Detailed **comparison of simulations and measurements** is work in progress

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