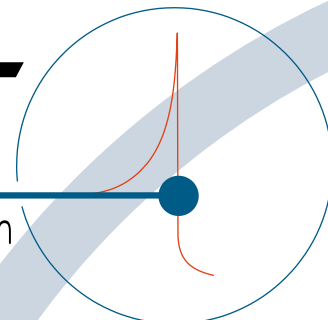




# HIT

Heidelberg Ionenstrahl-Therapie Centrum



UniversitätsKlinikum Heidelberg

# Proton and helium beams: the present and the future of light ion beam therapy

Dr. Andrea Mairani

Group Leader

**Biophysics in Particle Therapy**

Heidelberg Ion Beam Therapy Center HIT

Department of Radiation Oncology, University Clinic Heidelberg

Centro Nazionale Adroterapia Oncologica CNAO

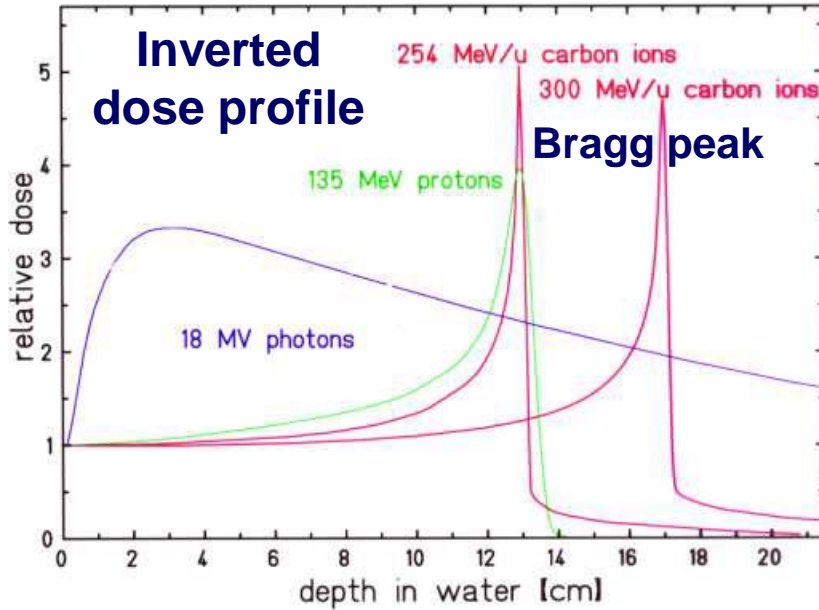
03/05/2018 Dresden



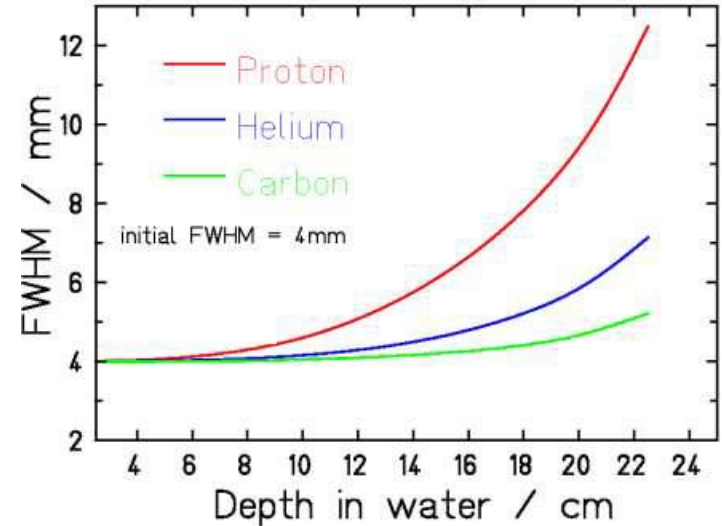
# Rationale for proton and ion beam therapy



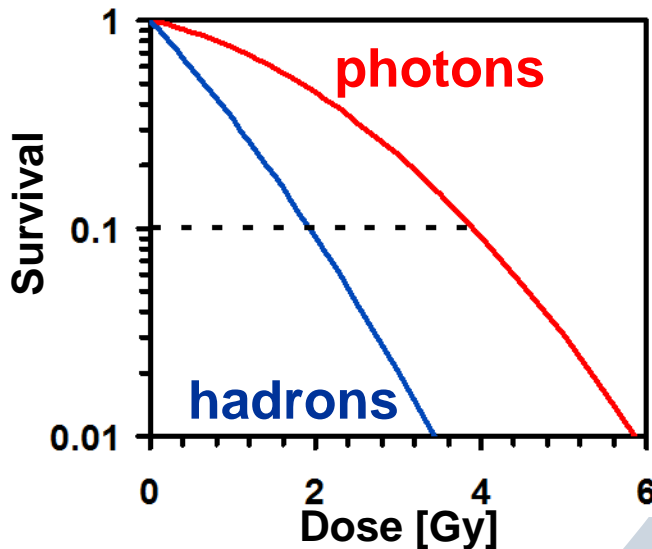
Physics



Lateral scattering



Biology



RBE (relative biological effectiveness):

$$RBE = D_{\text{photon}} / D_{\text{hadron}}$$

for the same biological effect

The RBE depends on:

- particle type (p, <sup>12</sup>C, ...), LET / local energy spectrum, dose
- tissue type, biological endpoint

In clinic: p RBE = 1.1  
<sup>12</sup>C RBE models



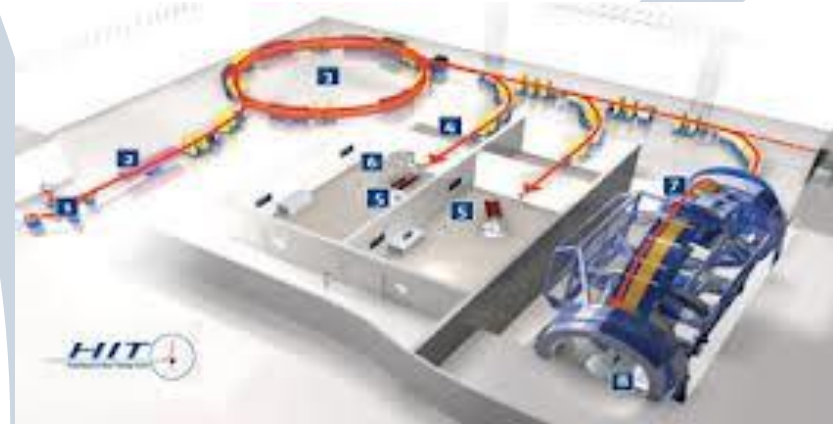
# How do we bring particle beams to clinics?



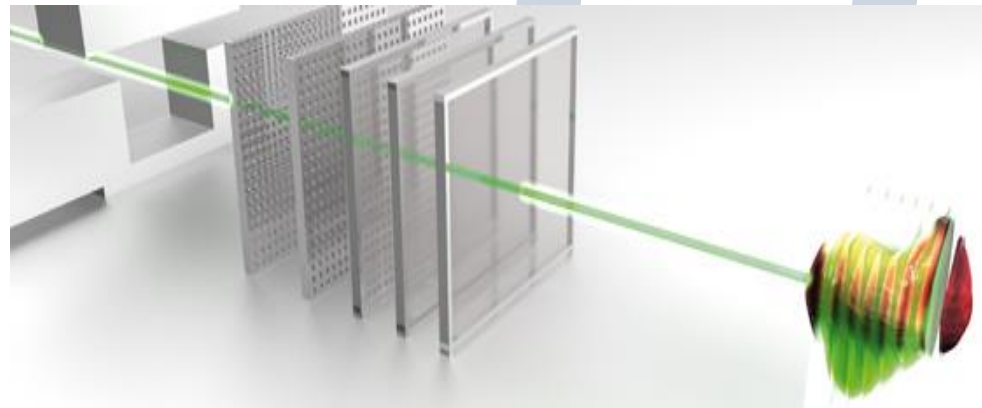
# Heidelberg Ion Beam Therapy Center (HIT)

**Synchrotron-based facility<sup>1</sup>**  
**Active beam scanning delivery<sup>2</sup>**

**<sup>1</sup>H and <sup>12</sup>C beams in clinics**  
**<sup>4</sup>He and <sup>16</sup>O beams for research**



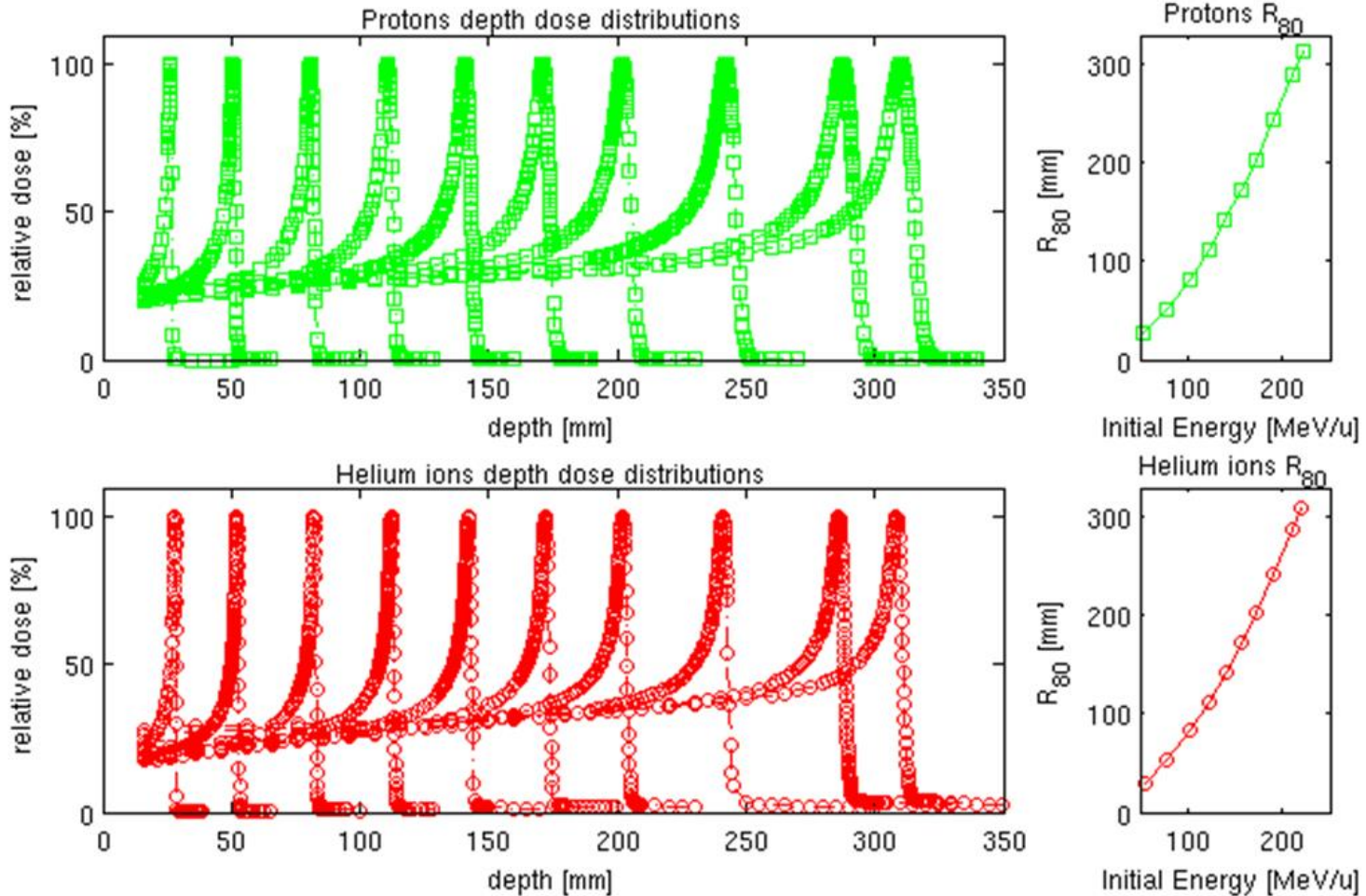
**Active Beam Scanning delivery with Synchrotron**



**Key: accurate dosimetric characterization of the pencil beams**



# Depth-dose distributions at HIT

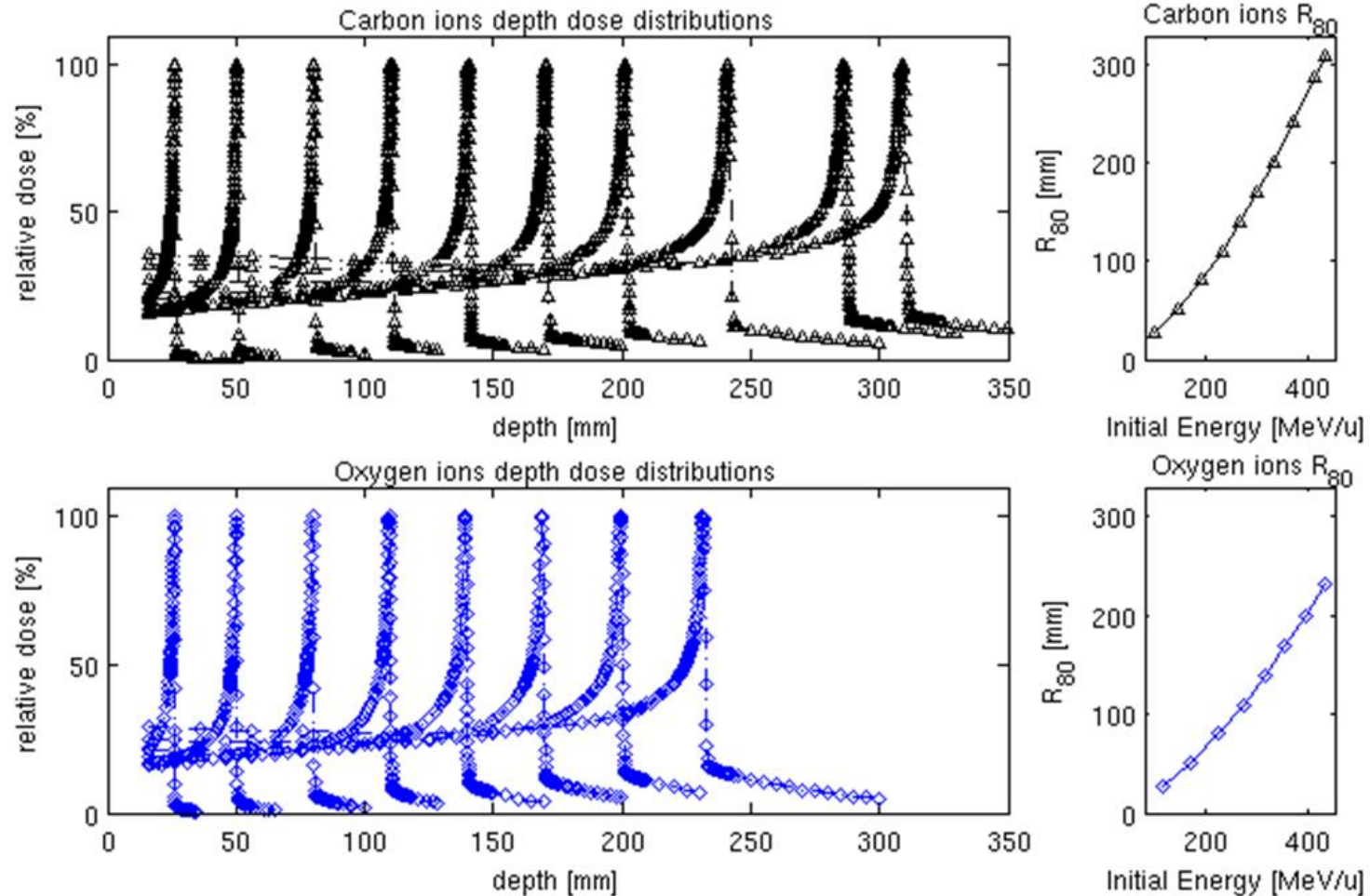


Depth dose distributions results for protons, helium, carbon and oxygen ions, respectively, from the top to the bottom panels. In the left panels the *dds* of the ions in water, in the right panels, the dependence of  $R_{80}$  as a function of the ion energy.

**T Tessonier , A. Mairani, et al Physics in Medicine Biology, 2016, 62(10):3958-3982**



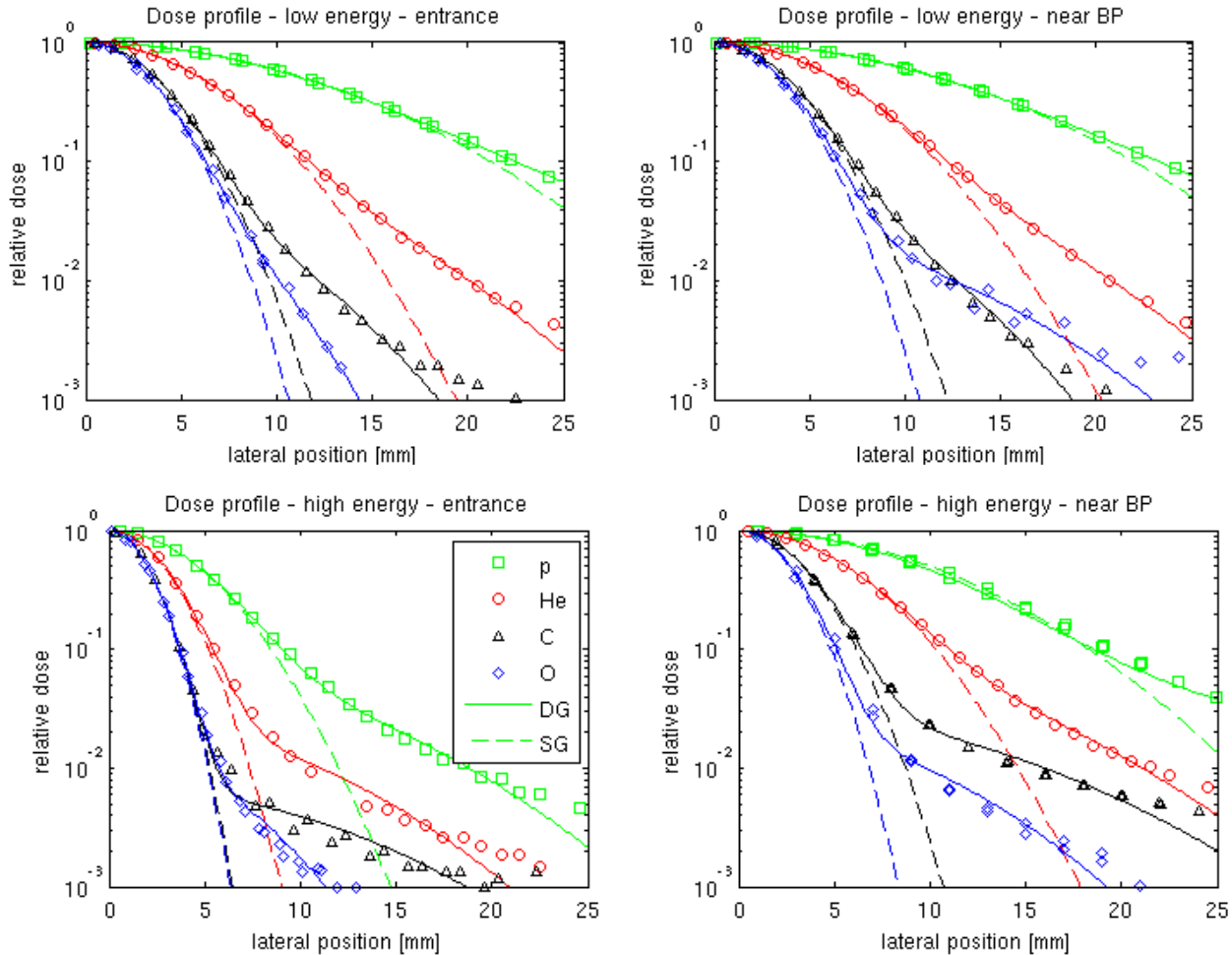
# Depth-dose distributions at HIT



Depth dose distributions results for protons, helium, carbon and oxygen ions, respectively, from the top to the bottom panels. In the left panels the *ddd*s of the ions in water, in the right panels, the dependence of  $R_{80}$  as a function of the ion energy.



# Lateral dose distributions in water at HIT



Lateral dose distribution: Protons are represented with squares, helium ions with circles, carbon ions with triangles and oxygen ions with diamonds. In solid line, the double Gaussian (DG) fits are shown, and in dashed line the simple Gaussian (SG) fits.



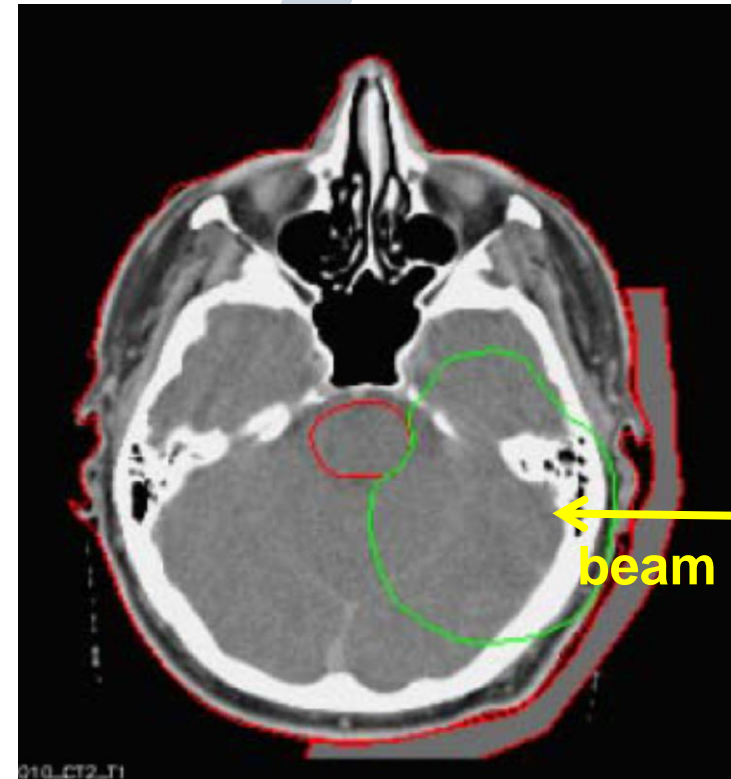


# Treatment planning system (TPS)

- Acquisition of imaging data (CT, MRI)
- Delineation of regions of interest
- Selection of proton/ion beam directions
- Design of each beam
- Optimization of the plan

main input for dose calculation:

**dosimetric description of the  
interaction of the beam in water**



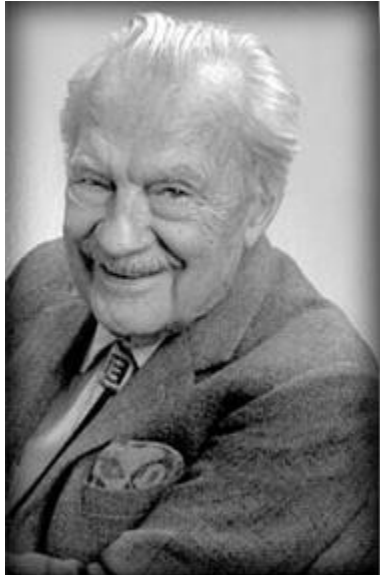


# Advanced calculation approaches



# The Monte Carlo (MC) method

Invented by John von Neumann, Stanislaw Ulam and Nicholas Metropolis (who gave it its name), and independently by Enrico Fermi



[http://en.wikipedia.org/wiki/Nicholas\\_Metropolis#/media/File:Nicholas\\_Metropolis\\_cropped.PNG](http://en.wikipedia.org/wiki/Nicholas_Metropolis#/media/File:Nicholas_Metropolis_cropped.PNG)

**N. Metropolis**



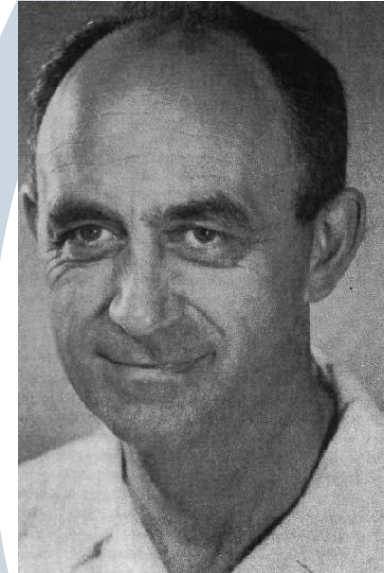
[http://www.atomicarchive.com/History/hbomb/images/ulam\\_stanislaw\\_s.jpg](http://www.atomicarchive.com/History/hbomb/images/ulam_stanislaw_s.jpg)

**S. Ulam**



<http://upload.wikimedia.org/wikipedia/commons/5/5e/JohnvonNeumann-LosAlamos.gif>

**J. von Neumann**

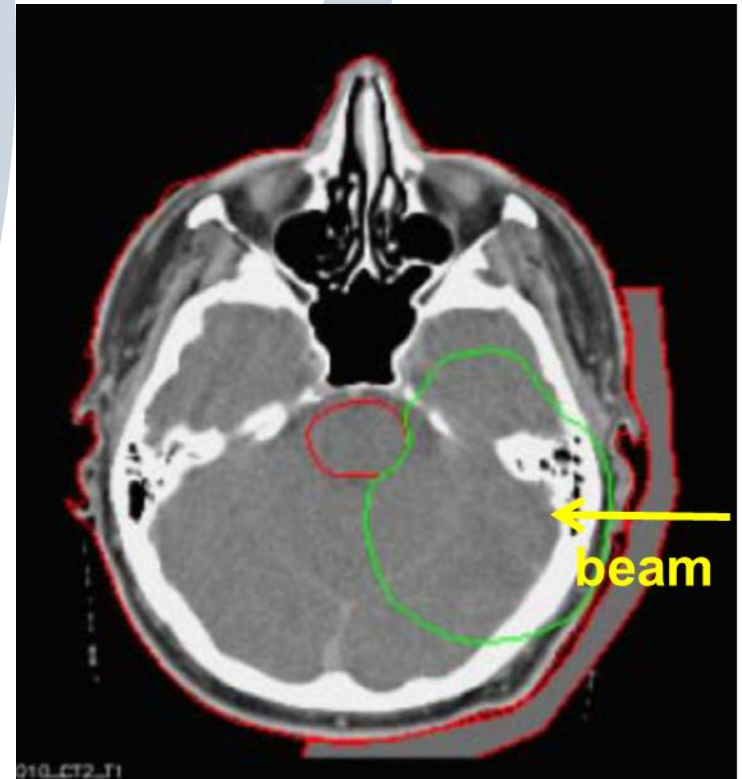


<http://stepforcongress.blogspot.de/2011/01/enrico-fermi-immigrant-of-day.html>

**E. Fermi**

# Advantages/disadvantages of MC simulations for particle therapy

- + Detailed description of particle transport and interactions
- + Patients density and elemental composition in account
- + Flexibility
- Long computational time
- Programming skills needed
- Dedicated hardware





**...back to clinics**

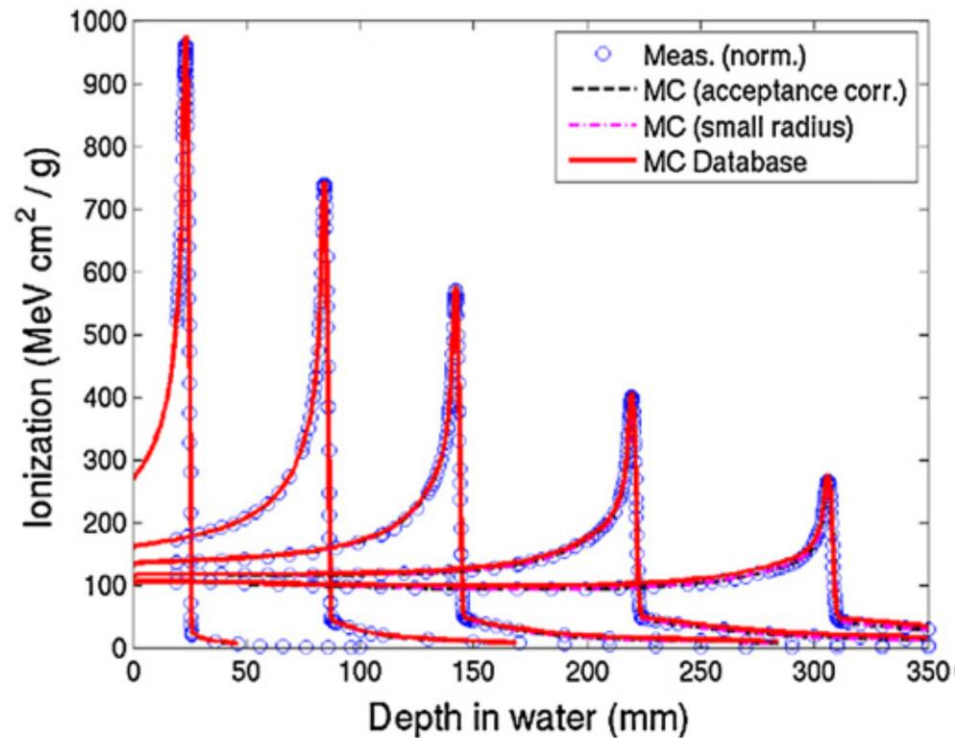
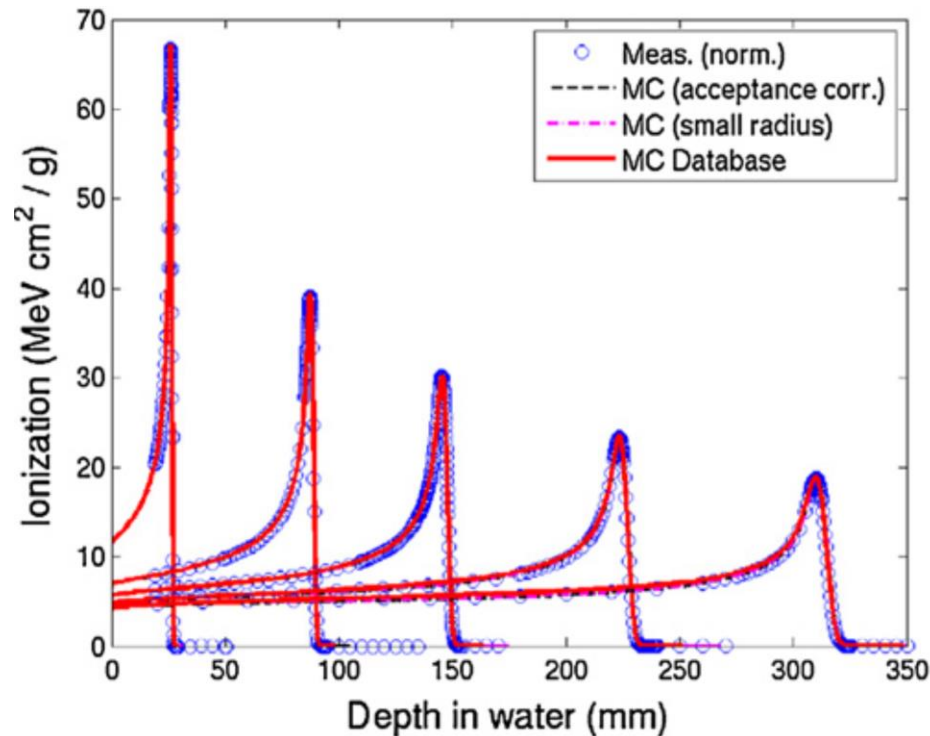


# Input dosimetric data for clinical treatment planning

Depth-dose distributions for p (left panel) and carbon ions (right panel)

p

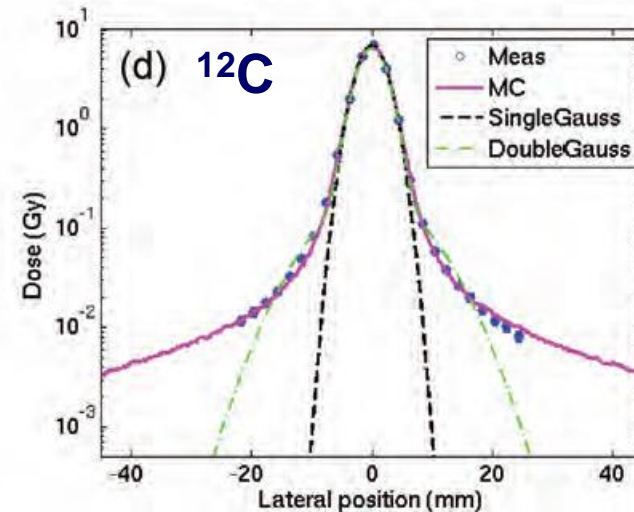
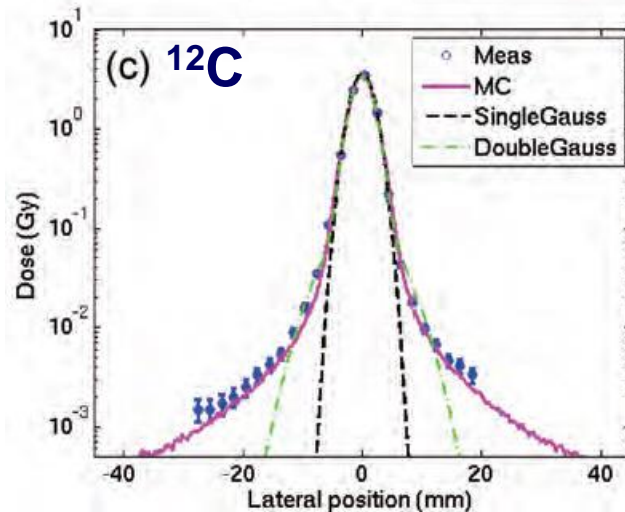
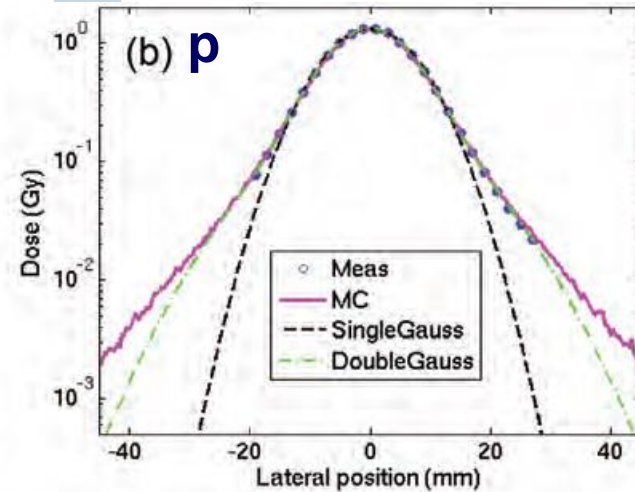
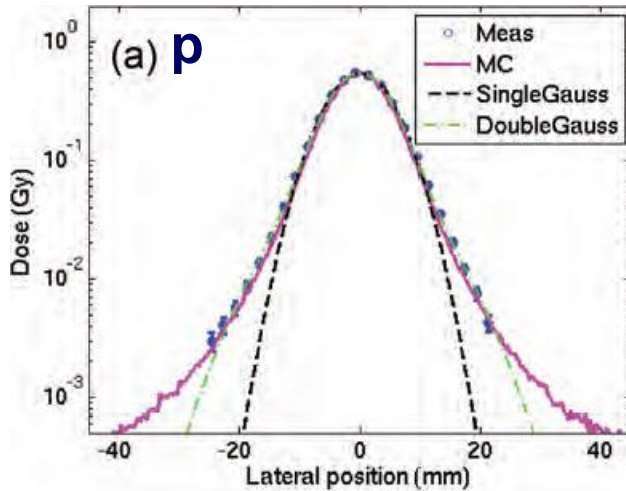
$^{12}\text{C}$





# Input dosimetric data for clinical treatment planning

Lateral dose distributions for p (upper panels) and carbon ions (lower panels)

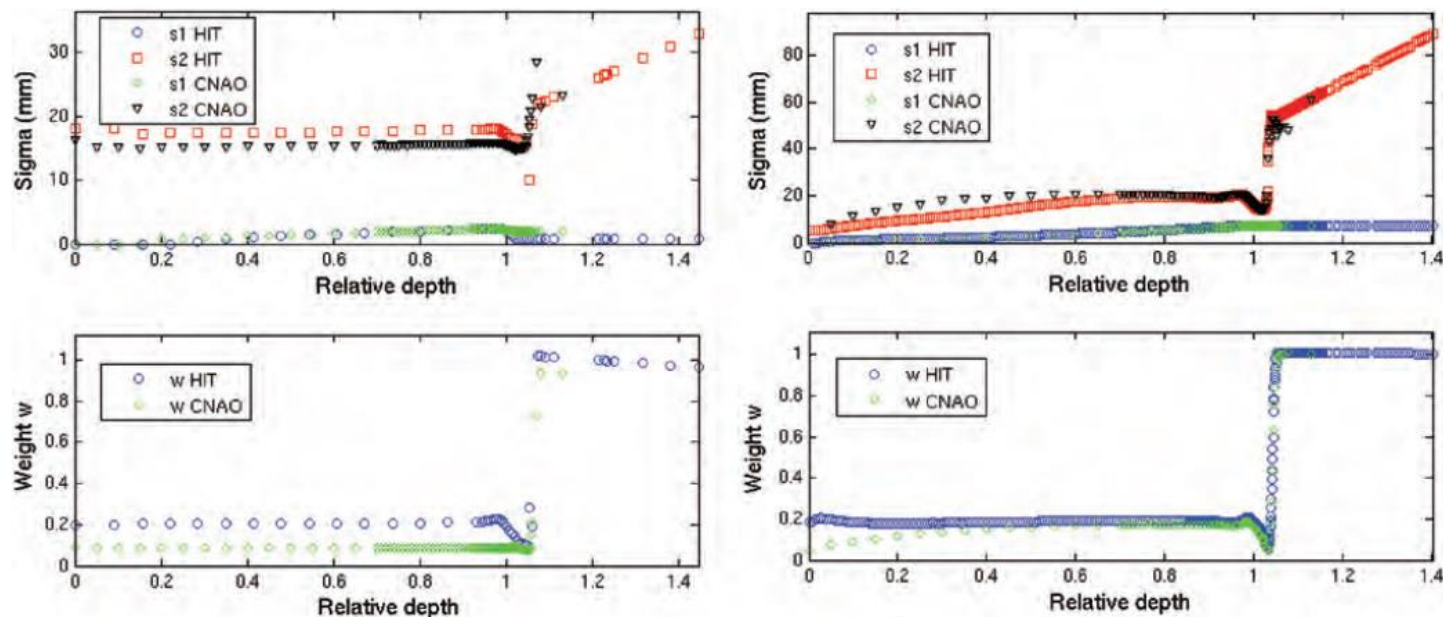


Entrance channel

Bragg peak region



# Input dosimetric data for clinical treatment planning: proton database HIT vs CNAO



**Fig. 6.** Comparison of the HIT basic data input in both the HIT and CNAO TPS, with respect to the parameters deduced using the same fitting procedure described in this work, however applied to FLUKA MC simulations of lateral beam broadening in water using a detailed modelling of the CNAO beamline for proton beams [11]. Two similar energies of approximately 60 MeV/u (left) and 221 MeV/u (right) were considered. While the sigma parameters match fairly well, some discrepancies are observed in the weight factor  $w$  directly related to the broad Gaussian component, especially for low-energy proton beams. This is likely ascribed to less large-angle scattering material in the CNAO beamline.





# Current clinical applications of MC

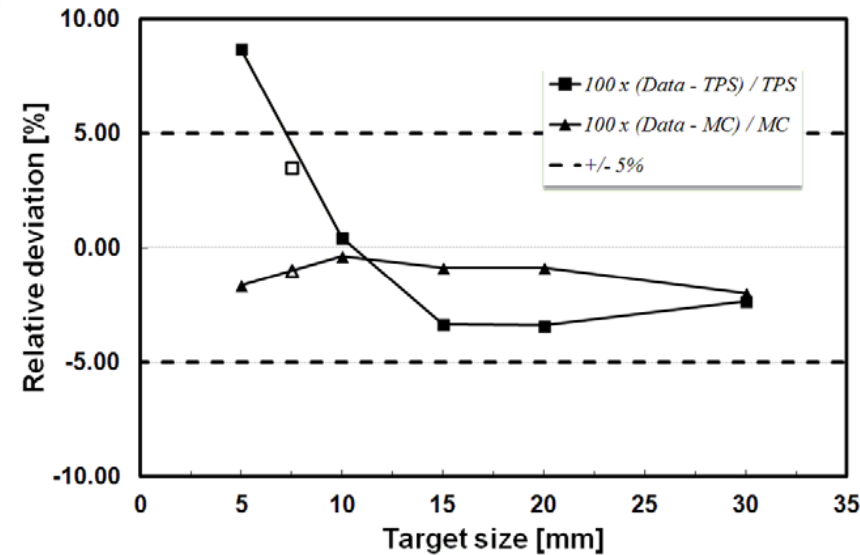
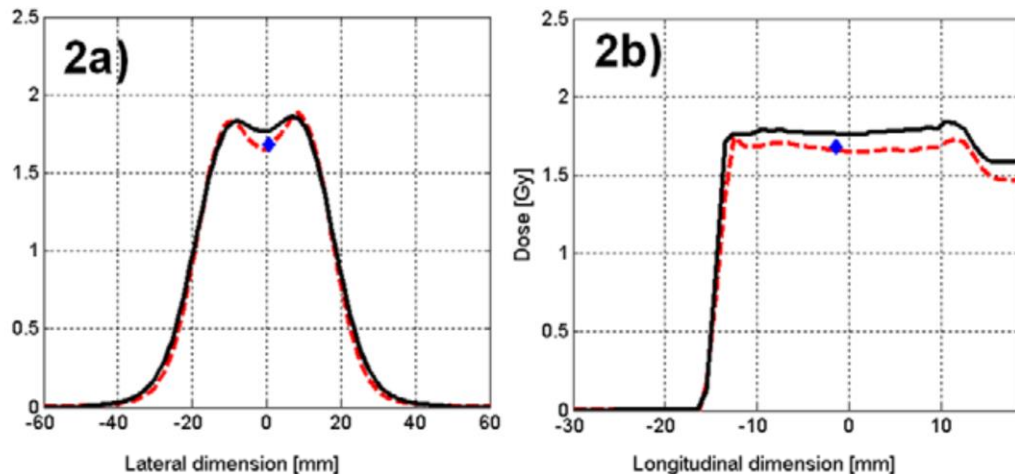
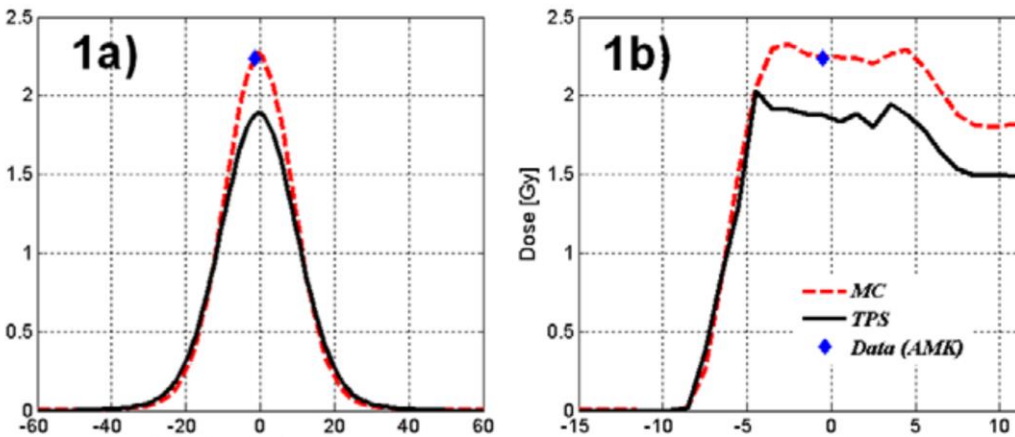


# Dosimetric comparisons

## Proton extended fields in water: MC vs TPS vs experimental data

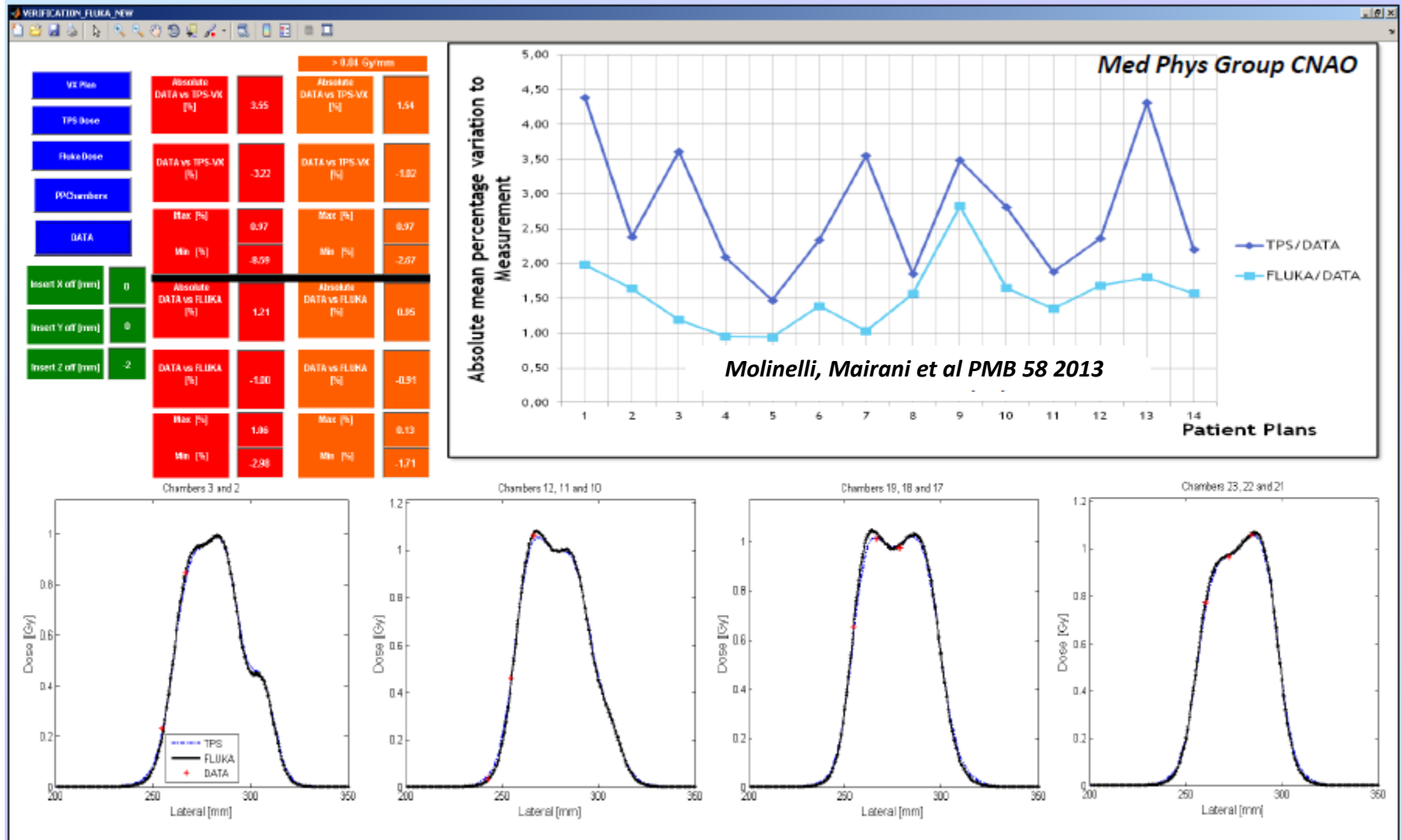
- 1) 5 mm side cube at 5 mm depth
- 2) 20 mm side cube at 30 mm depth

### Dosimetric accuracy as a function of the target size





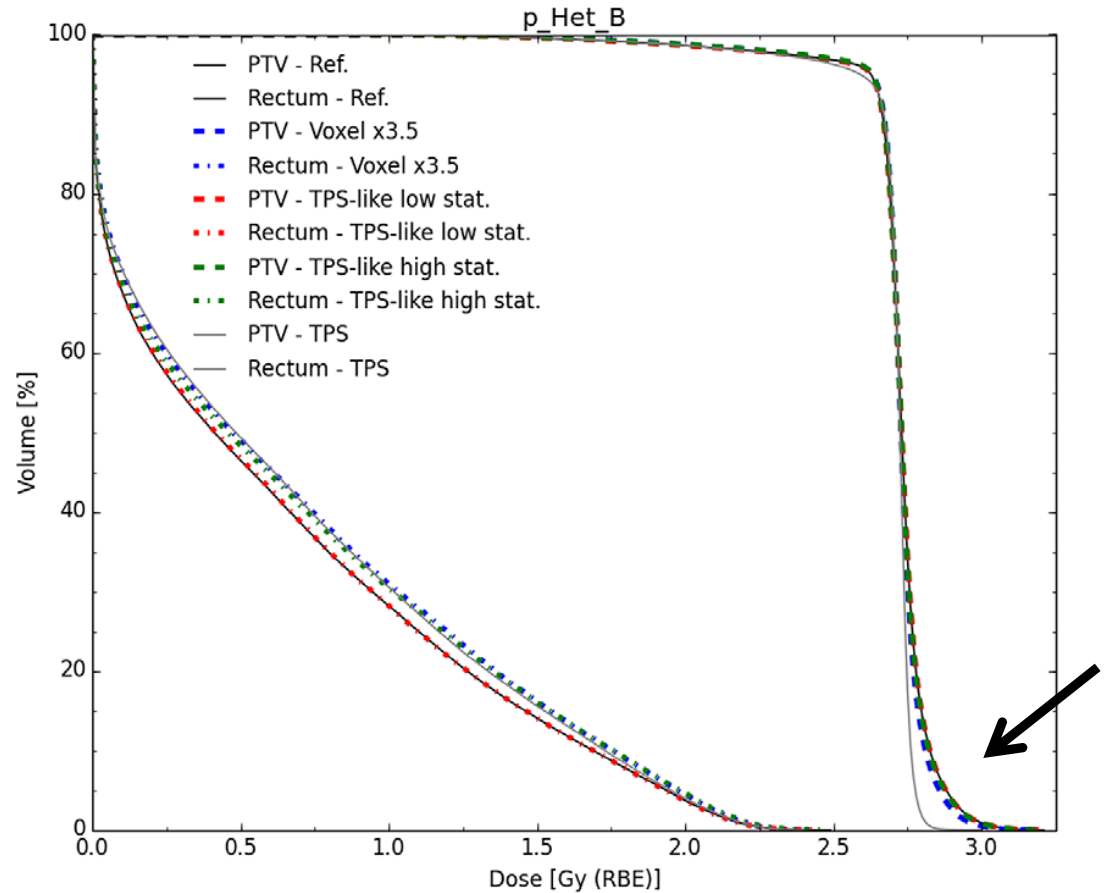
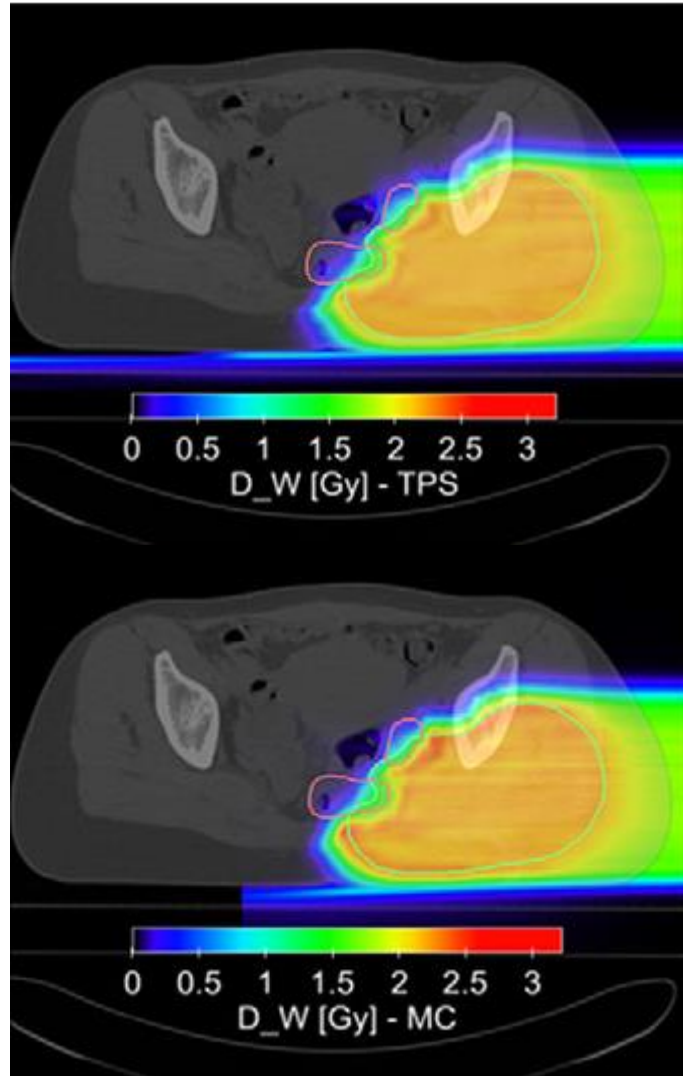
# Patient Plan Verification





# Re-calculations of patient dose distributions

## Deep-seated sacral tumor irradiated with p

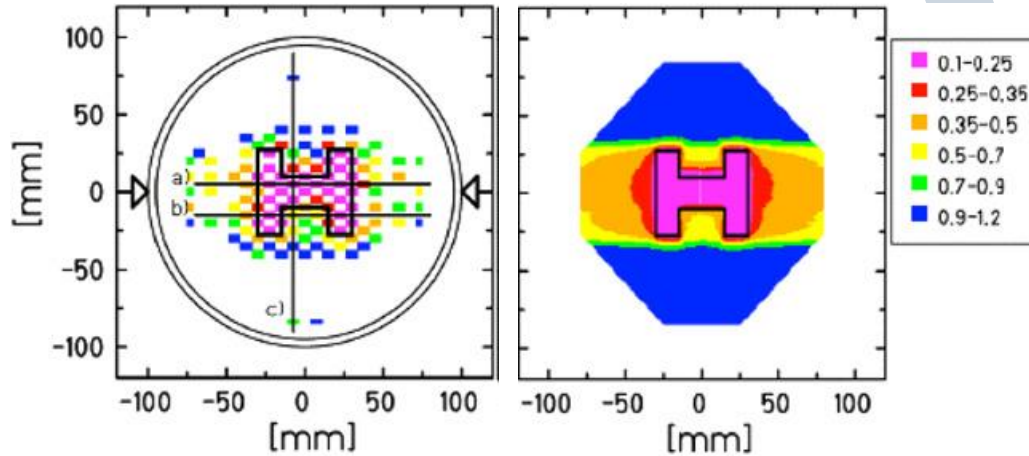




# Biological calculations in carbon ion therapy

*in vitro* data

predictions

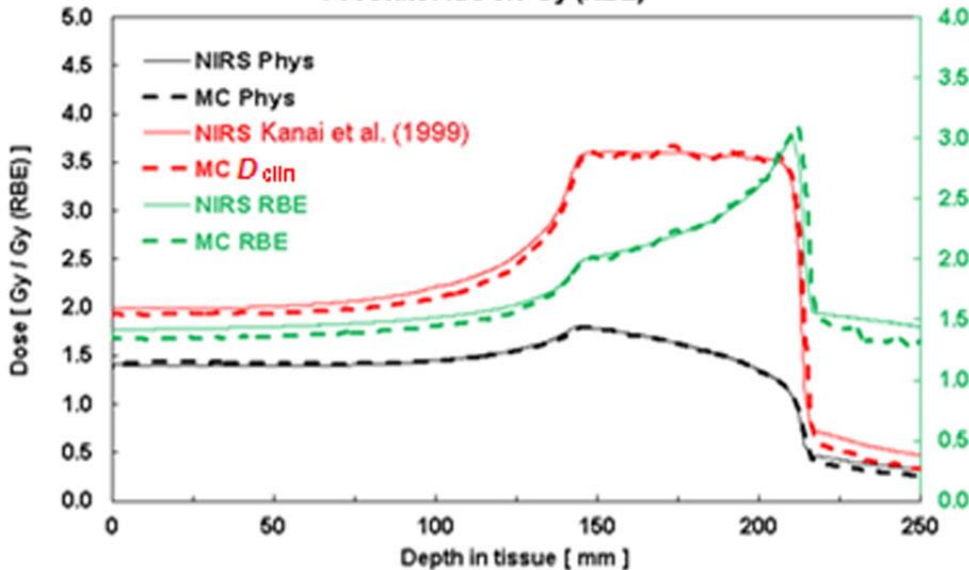


A. Mairani, et al *Physics in Medicine and Biology* 2010, 55, 4273–4289

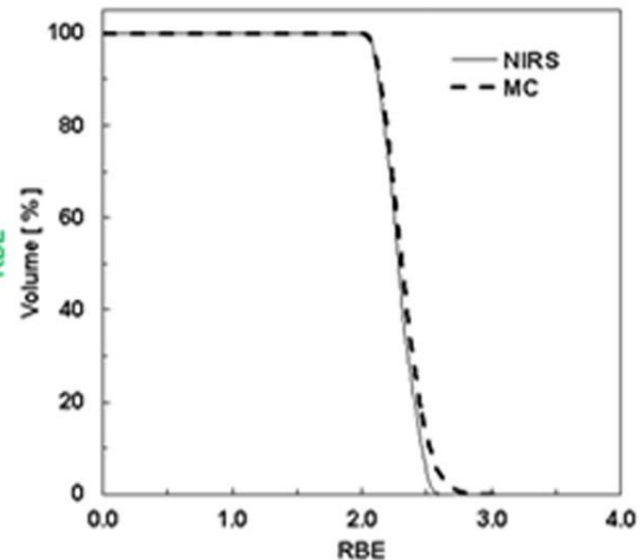
MC + LEM model

MC + NIRS approach

Prostate AdC 3.6 Gy (RBE)



Prostate AdC 3.6 Gy (RBE)

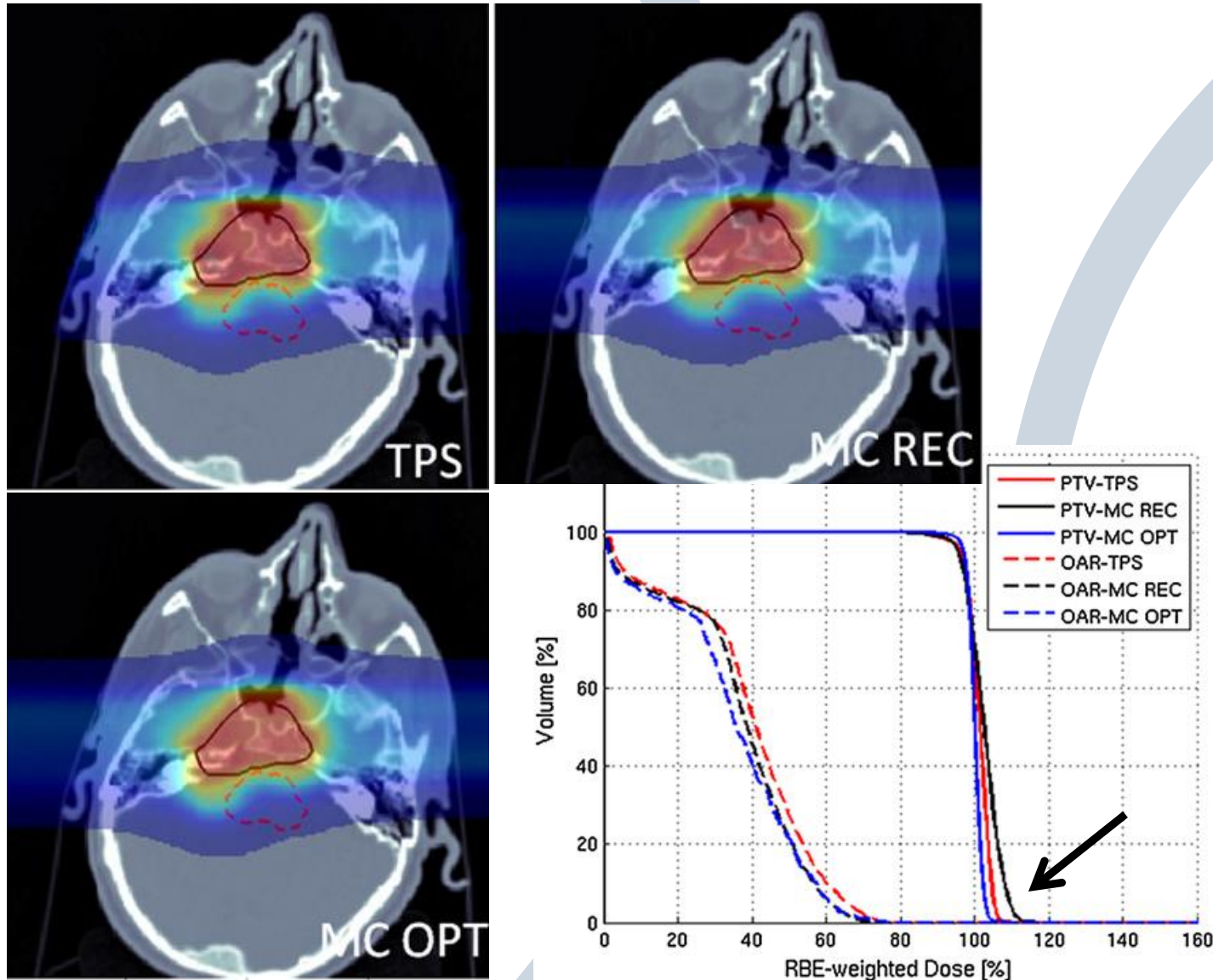




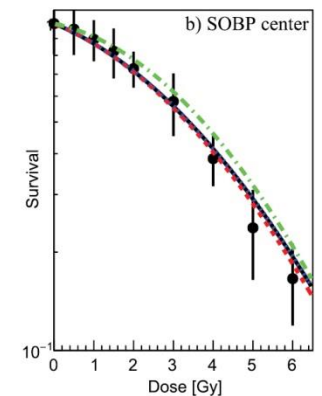
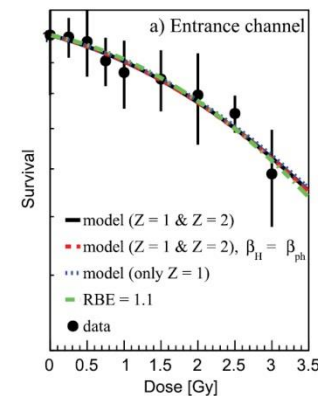
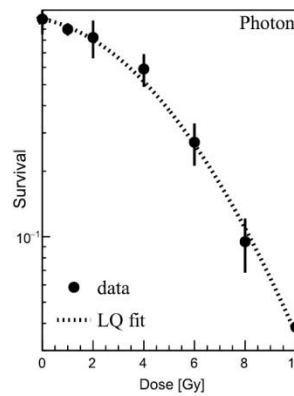
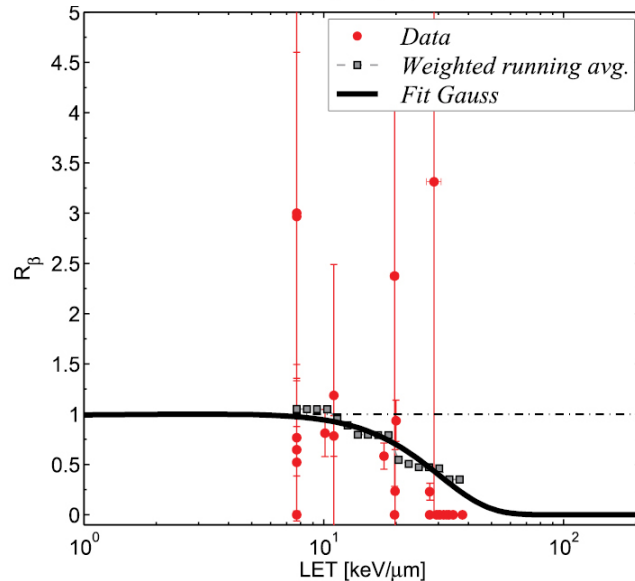
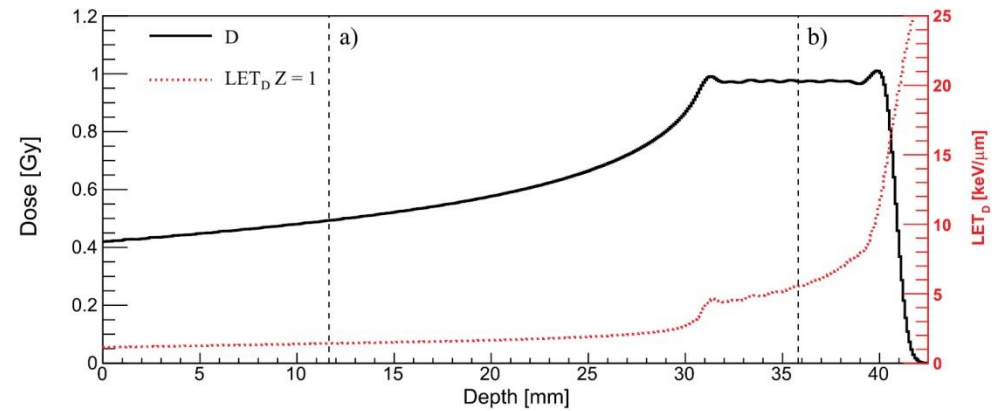
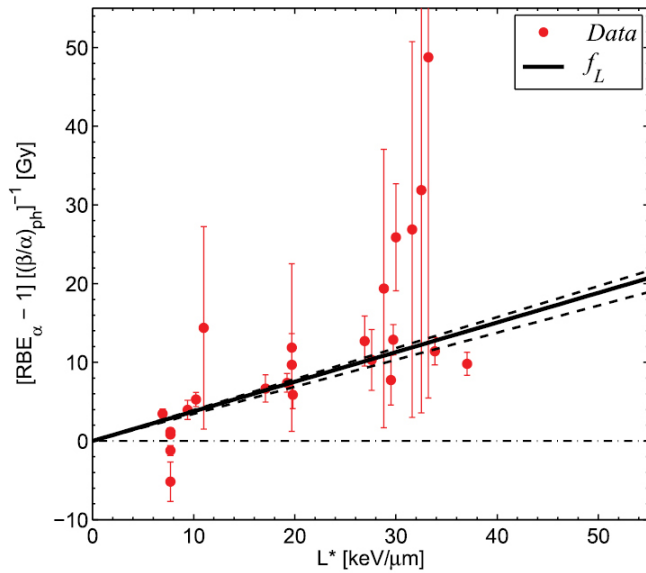
# **Future clinical applications: overcoming TPS limitations**



# Monte Carlo-based Treatment Planning Tool



# Beyond the TPS: variable RBE in proton therapy



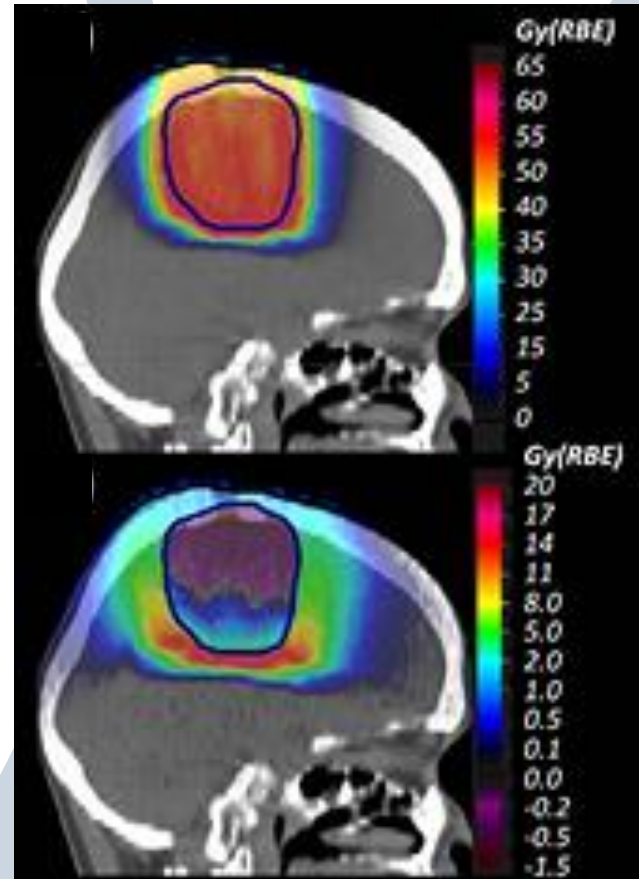
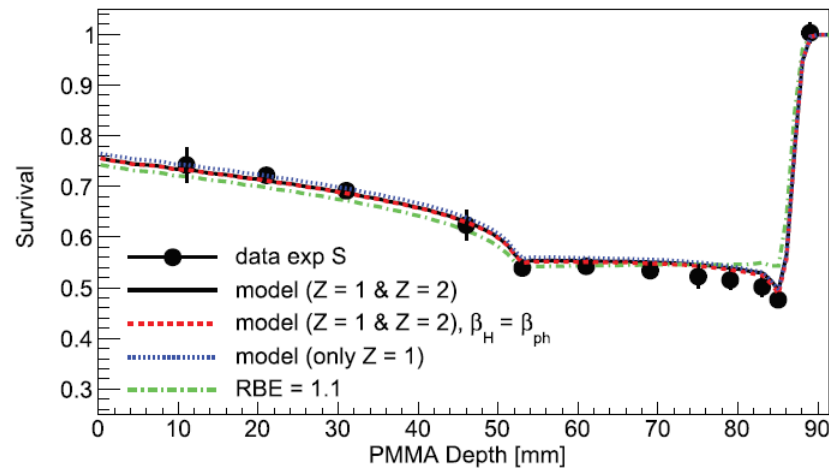
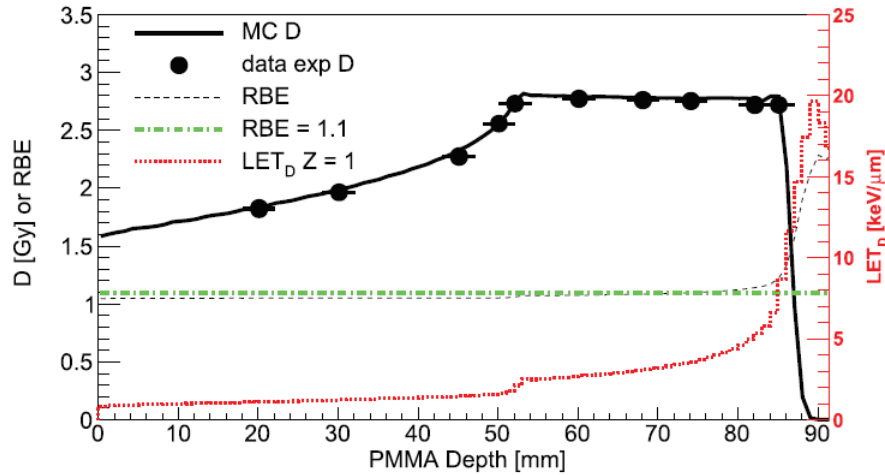




# Beyond the TPS: variable RBE in proton therapy

## Dosimetric and *in vitro* cell stack experiment: model vs data

## Calculation of patient plans with variable RBE (varRBE) models

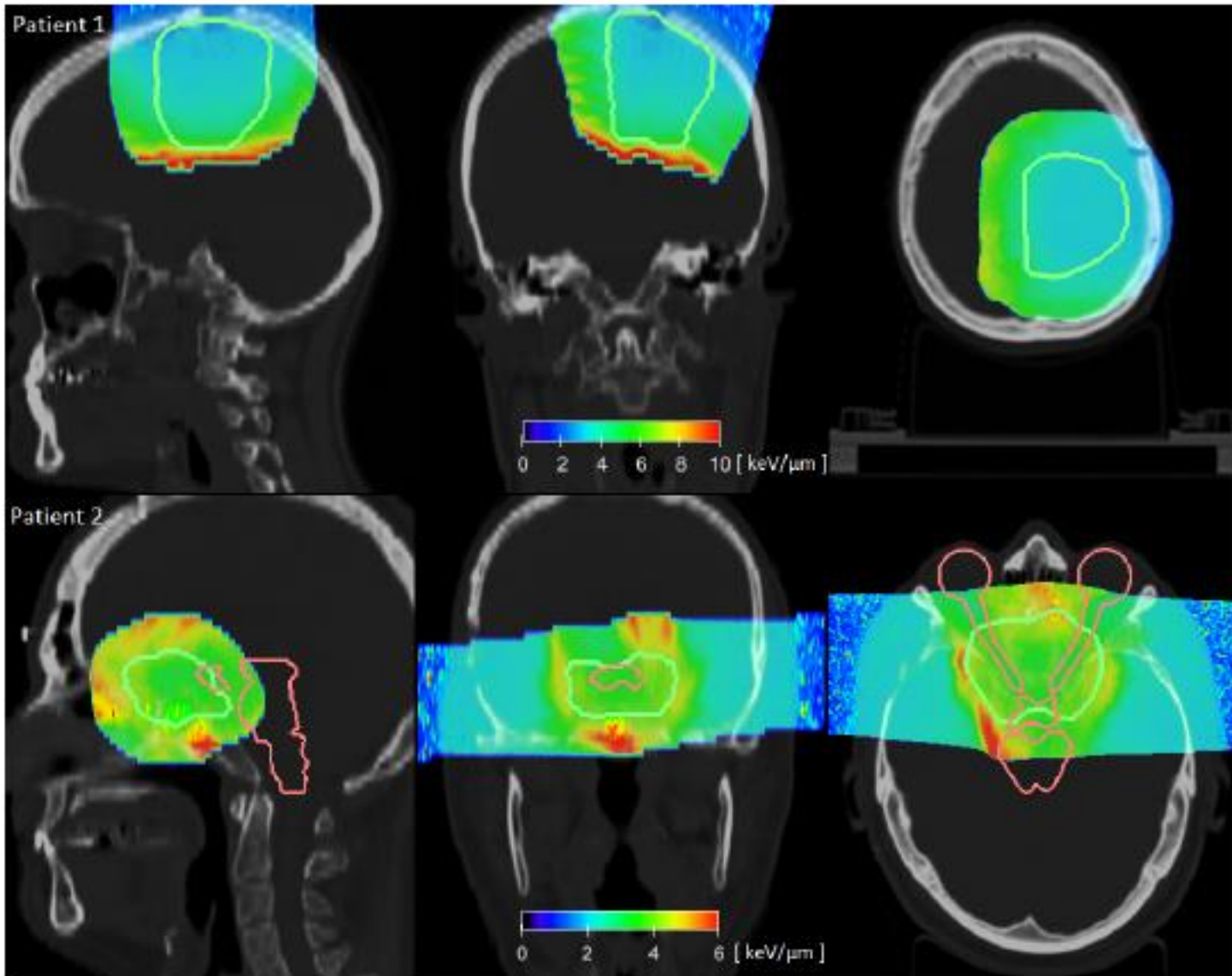


$D_{\text{varRBE}}$   
assuming  
varRBE

Dose  
difference:

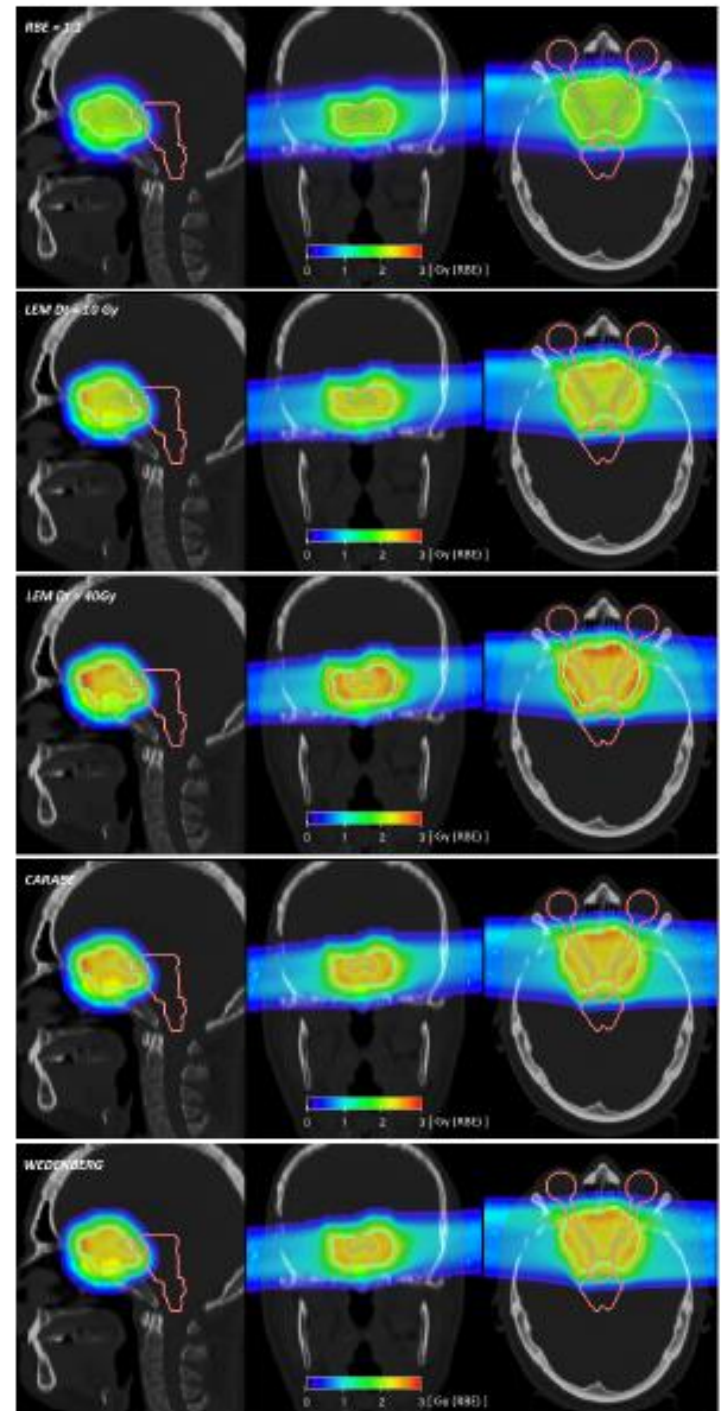
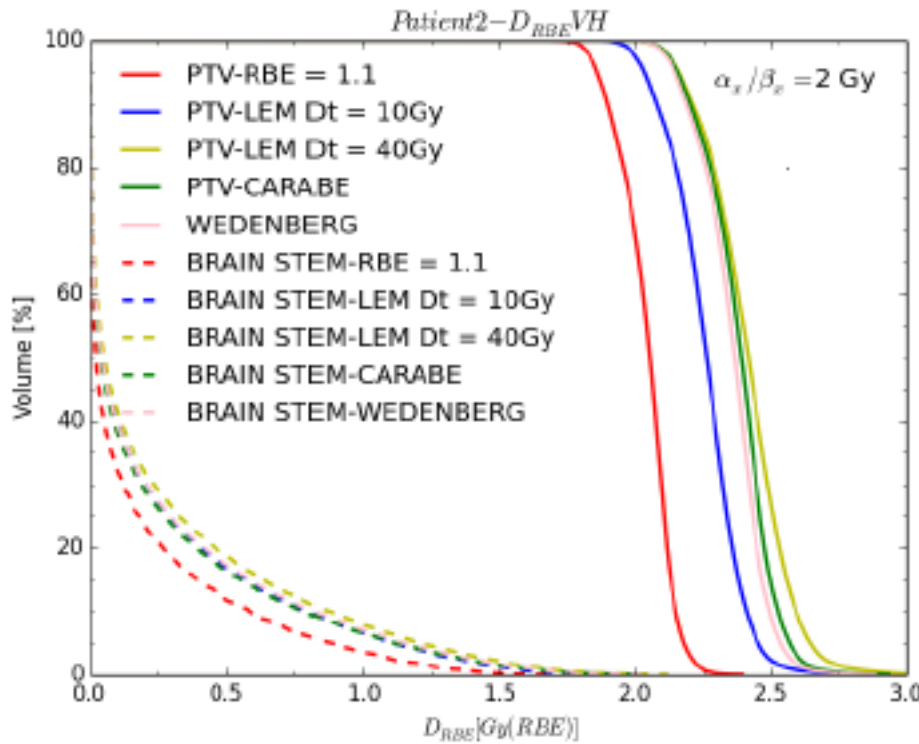
$D_{\text{varRBE}}$   
-  
 $D_{\text{RBE=1.1}}$

# Beyond RBE 1.1 in proton therapy: LET distributions in clinical-like scenario





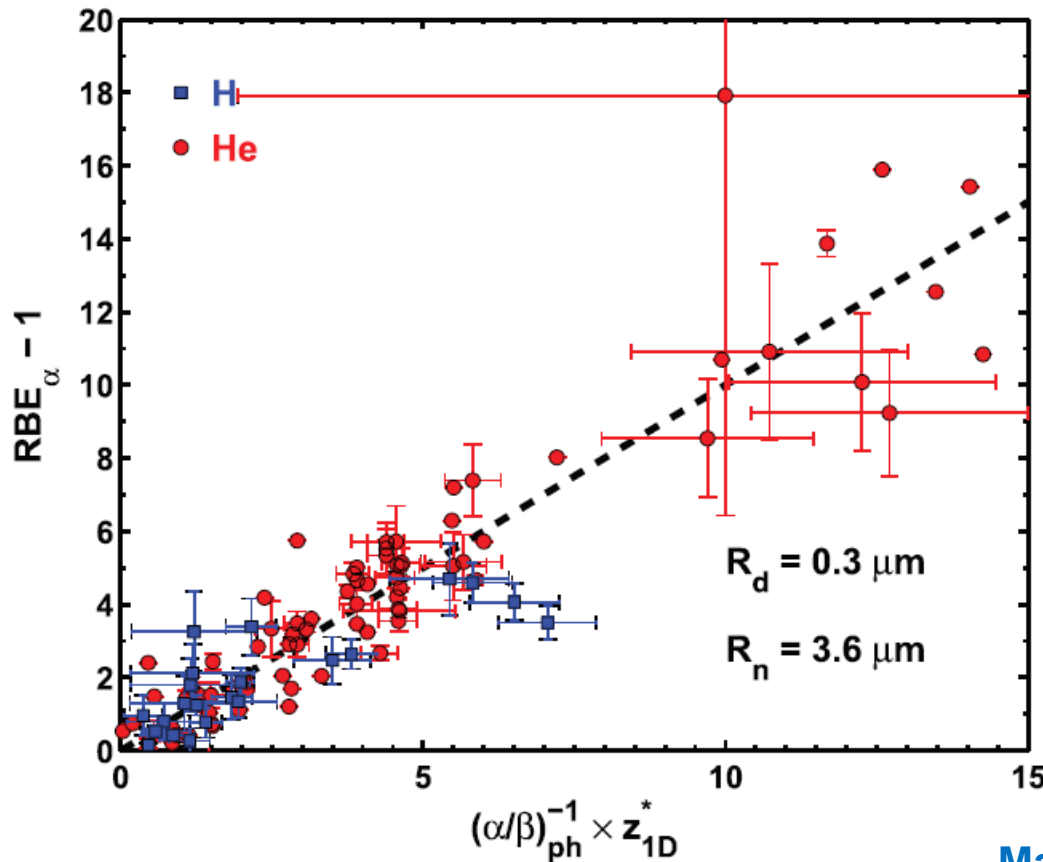
# $D_{RBE}$ distributions in clinical-like scenario with $(\alpha/\beta)_{ph} = 2 \text{ Gy}$



G. Giovannini, ... A. Mairani, K. Parodi  
Radiation Oncology (2016) 11:68



# Beyond the TPS: variable RBE in proton ( and He) therapy tuning MKM input parameters



$$RBE_{\alpha} \equiv \frac{\alpha_{ion}}{\alpha_{ph}} = 1 + \left( \frac{\alpha}{\beta} \right)_{ph}^{-1} \cdot z_{1D}^*$$

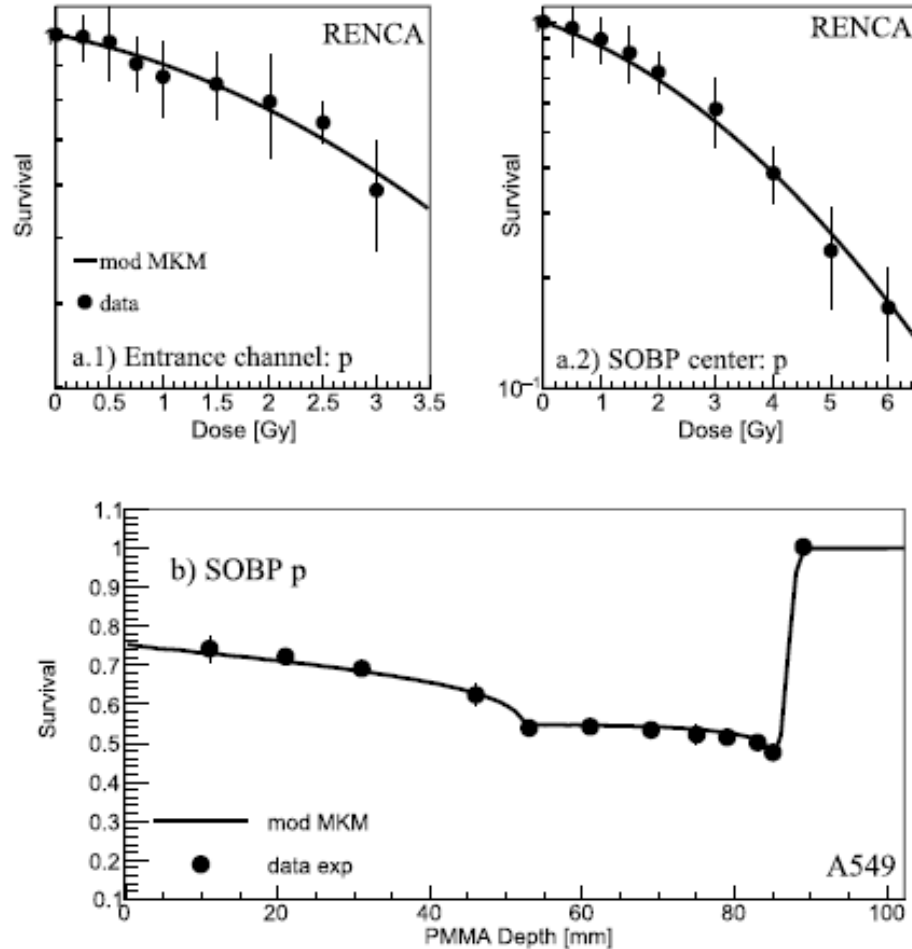
$$R_{\beta} \equiv \frac{\beta_{ion}}{\beta_{ph}} = 1.$$

Mairani et al PMB (2017) 62: N244

**Figure 1.** Experimental  $RBE_{\alpha} - 1$  (points with error bars) as a function of  $z_{1D}^* \cdot (\alpha/\beta)_{ph}^{-1} \cdot z_{1D}^*$  values have been calculated using the best fit parameters  $R_d = 0.3 \mu m$  and  $R_n = 3.6 \mu m$ . The slope of the dashed line graphically displays a 1:1 dependence.



# Beyond the TPS: variable RBE in proton ( and He) therapy tuning MKM input parameters





# Novel ions at HIT:

## $^4\text{He}$ ion beams

# Dosimetric comparisons

**$^4\text{He}$  as a good candidate** for further particle therapy

**improvements :**

- Favorable physical characteristics
- Smaller lateral scattering than p , Fall-off distal / lateral
- Very low tail-to-peak ratio compared to  $^{12}\text{C}$  or  $^{16}\text{O}$

• Comparisons **MC-FLUKA<sup>6,7,8</sup> / dosimetric measurements**

→ **Beam Modelling (DDD + Lateral profile + SOBP)**



<sup>6</sup> Böhlen *et al.* (2014)

<sup>7</sup> Ferrari *et al.* (2005)

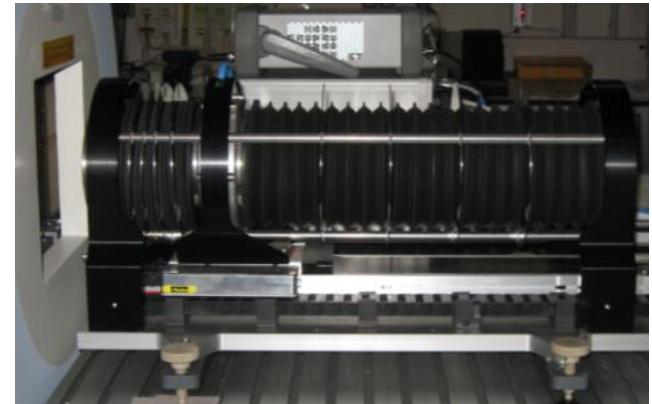
<sup>8</sup> Battistoni *et al.* (2016)

# MC - Beam Modelling

## Depth Dose Distribution

### Measurements

- **10 energies** (56.44-220.51 MeV/u, ~2.5-31 cm)
- **PeakFinder** (PTW) water column
- Delivery of a quasi-**monoenergetic** pencil-like beam in the central axis
- Step size in the peak region ~ 50 $\mu$ m
- w/wo Ripple Filter (**RiFi**)



PeakFinder Water column

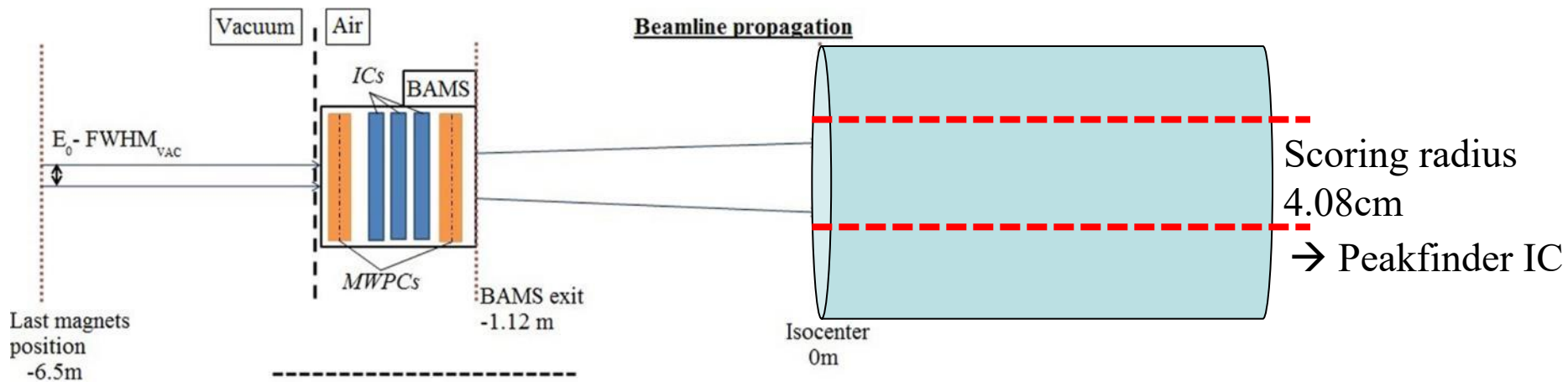


# MC - Beam Modelling

## Depth Dose Distribution

### Simulations

- **Detailed model** of the HIT beamline<sup>9</sup>
- Binning of 25 $\mu$ m (radius=4.08cm) - + WATER
- 10<sup>6</sup> primary histories



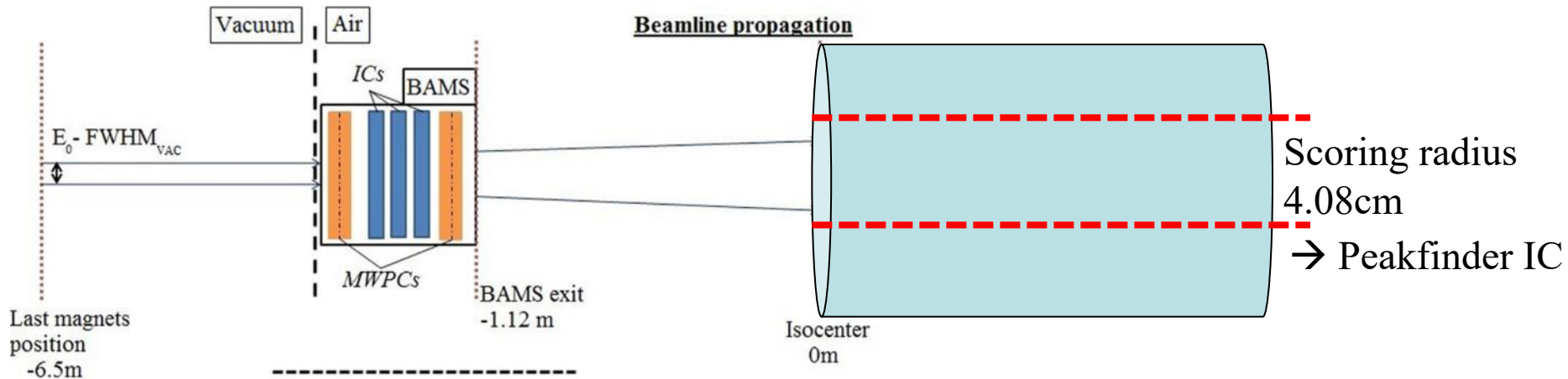
- **Density ?**
- **Ionization Potential ?**
- **Momentum spread ?**

# MC - Beam Modelling

## Depth Dose Distribution

### Simulations

- **Detailed model** of the HIT beamline<sup>9</sup>
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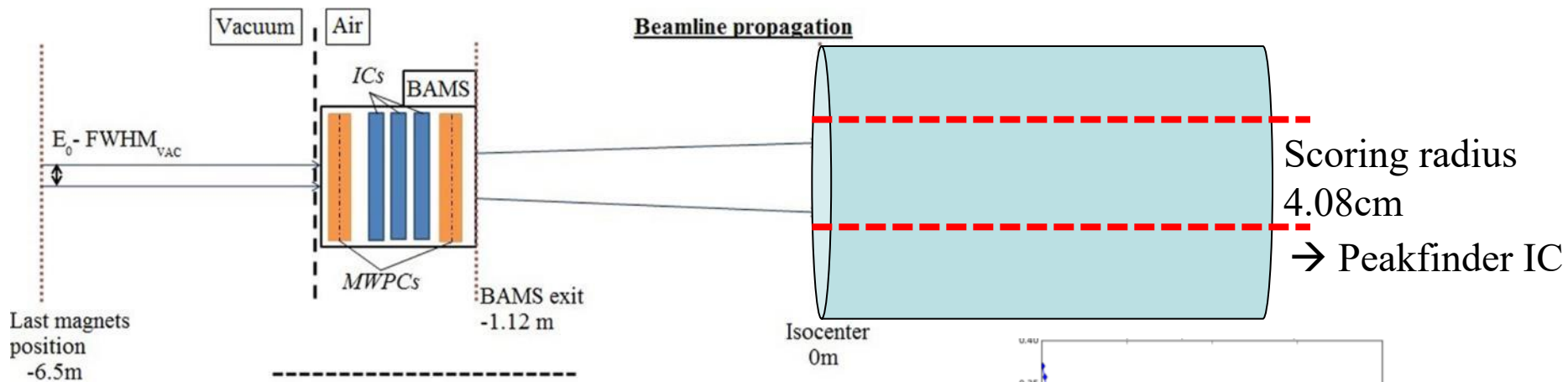
- **Density ?** → 0.998 g.cm<sup>-3</sup> (Exp. Conditions)
- **Ionization Potential ?** → Trial and errors : Range comparisons
- **Momentum spread ?** → Trial and errors : Bragg Curve similitude ( $\chi^2$  red.)

# MC - Beam Modelling

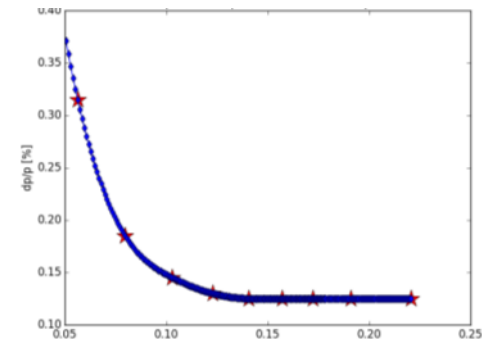
## Depth Dose Distribution

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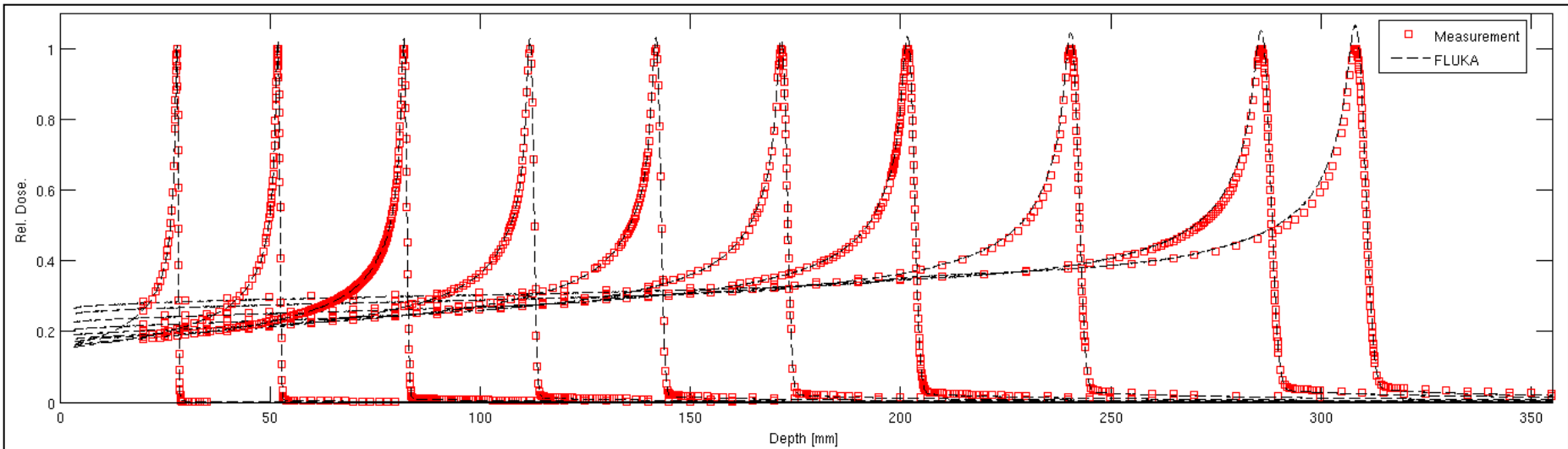
- **Density ?**  $\rightarrow 0.998 \text{ g.cm}^{-3}$
- **Ionization Potential ?**  $\rightarrow 76.8 \text{ eV}$
- **Momentum spread ?**  $\rightarrow dp/p=f(E)$



# MC - Beam Modelling

## Depth Dose Distribution

### Results



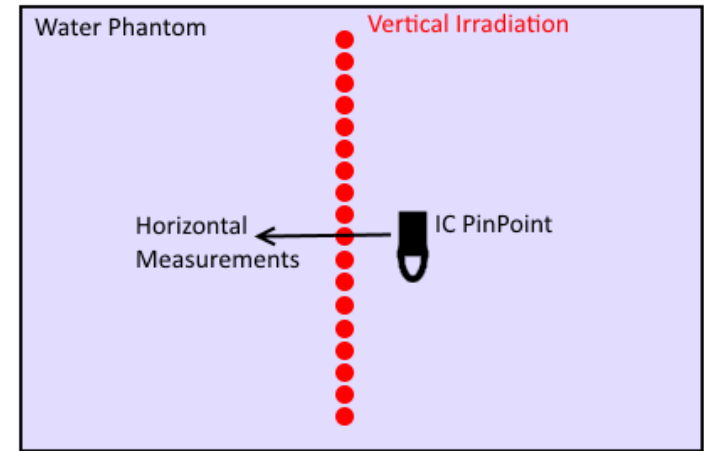
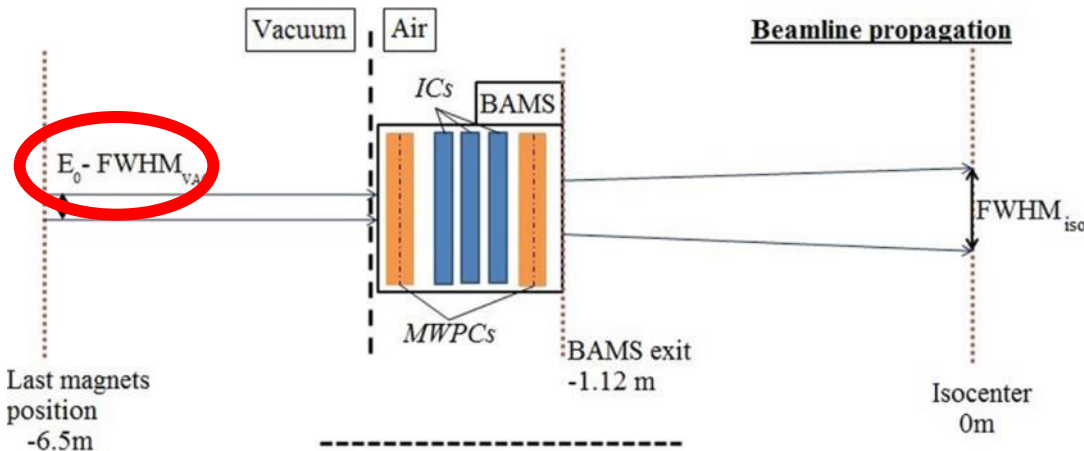
- Overall **good agreement** between simulations and measurements (w/wo RiFi)
- Range differences **< 0.10 mm**
- Dose differences **from 0.5 to 6%** in the high dose region
- Small differences in the tail
- Average dose-weighted dose-difference **from 0.4 to 2.5%**
  - **Good results** of the **FLUKA** models
  - Room for **improvements** (production of secondaries ?)

# MC - Beam Modelling

## Lateral Dose Distributions

### Measurements

- 3 energies
- After Vacuum Gaussian size assessment ...



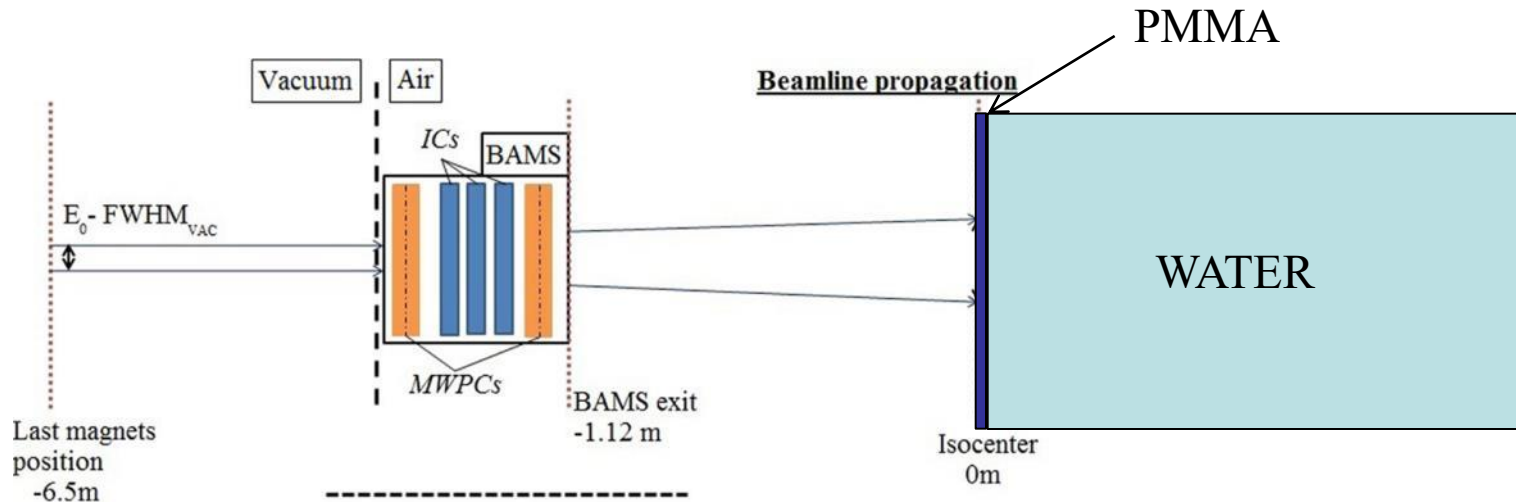
*Measurements of vertically scanned line*

# MC - Beam Modelling

## Lateral Dose Distributions

### Simulations

- **Detailed model** of the **HIT beamline** -  $200 \times 10^6$  primary histories
- and **water** - ICs sensitive volume
- Binning  $1 \times 1 \times 1 \text{ mm}^3$



### Analysis

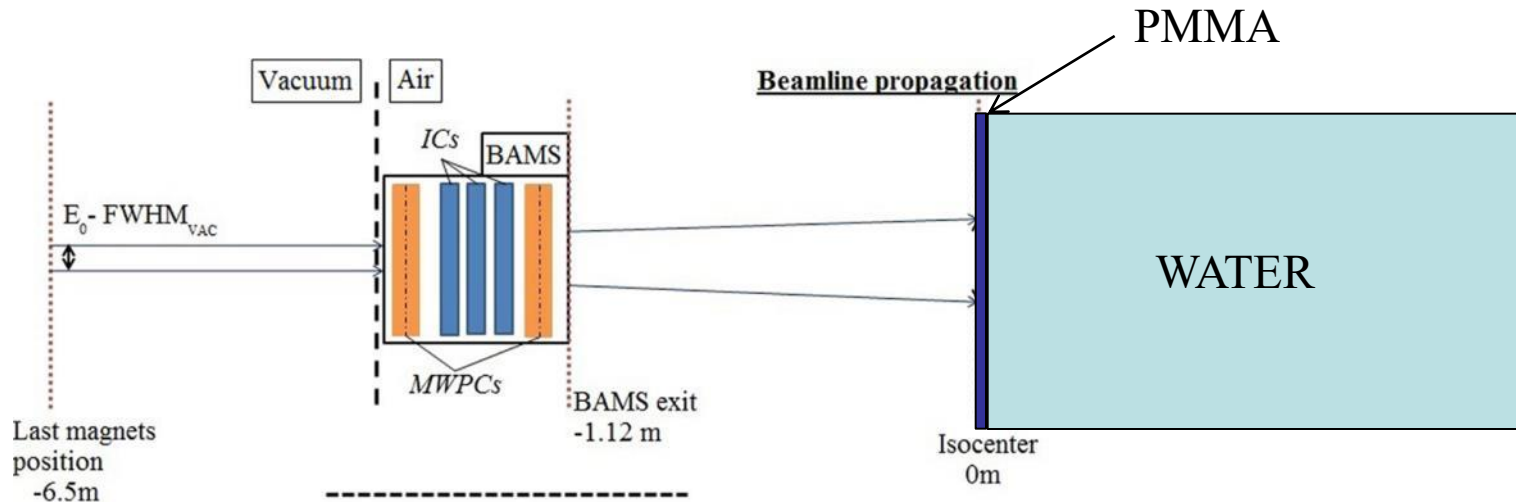
- Simple Gaussian parametrization along depth
- Triple Gaussian parametrization along depth (ROOT – Minuit Package)

# MC - Beam Modelling

## Lateral Dose Distributions

### Simulations

- **Detailed model** of the **HIT beamline** -  $200 \times 10^6$  primary histories
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### Analysis

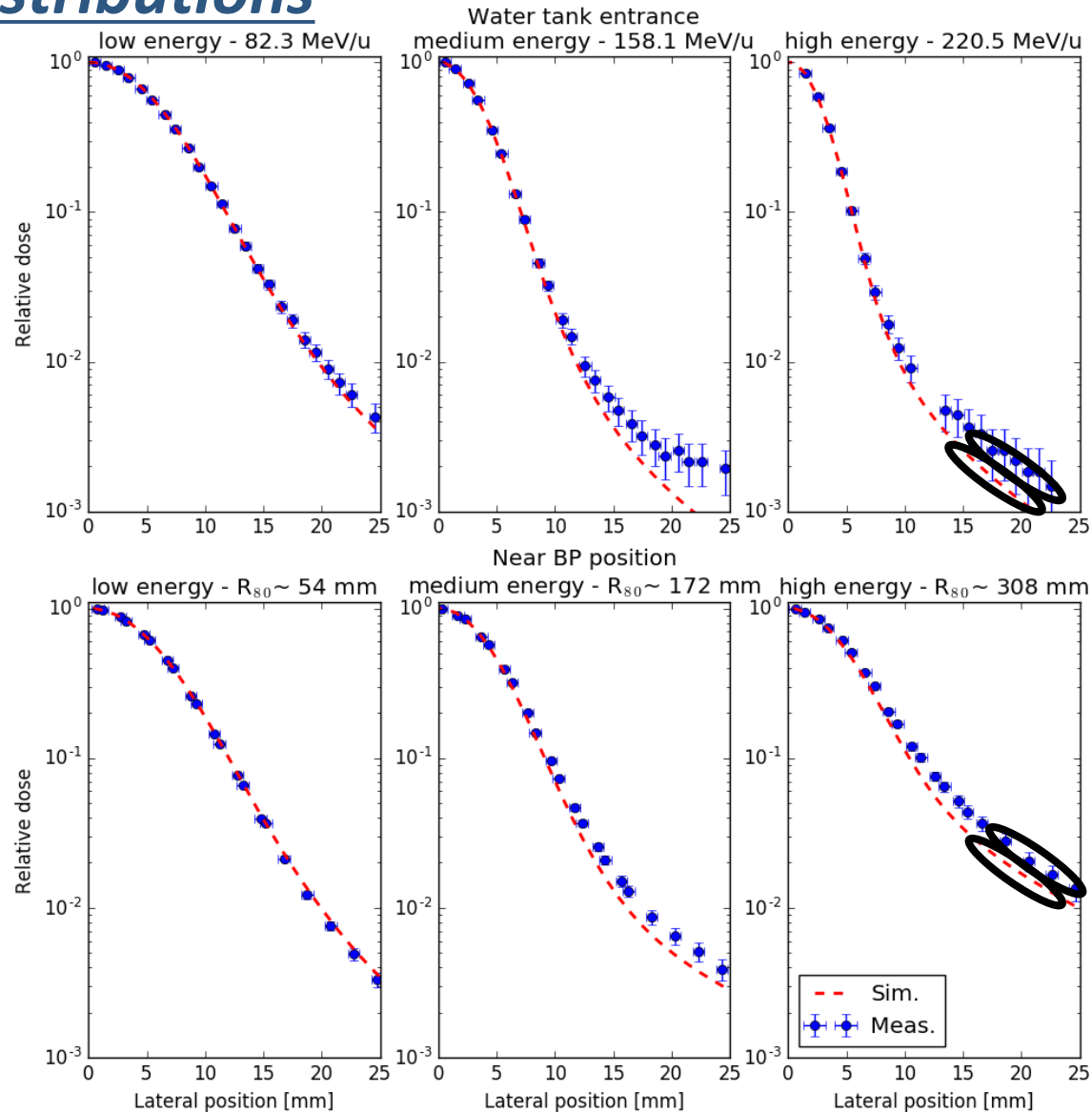
- Simple Gaussian parametrization along depth  $\rightarrow$  **FWHM evolution**
  - Triple Gaussian parametrization along depth  $\rightarrow$  **Dose contributions**
- (ROOT – Minuit Package)

# MC - Beam Modelling

## Lateral Dose Distributions

### Results

→ Good agreements  
 But differences for  
 - High energies  
 - Large depth/Lat.  
 position

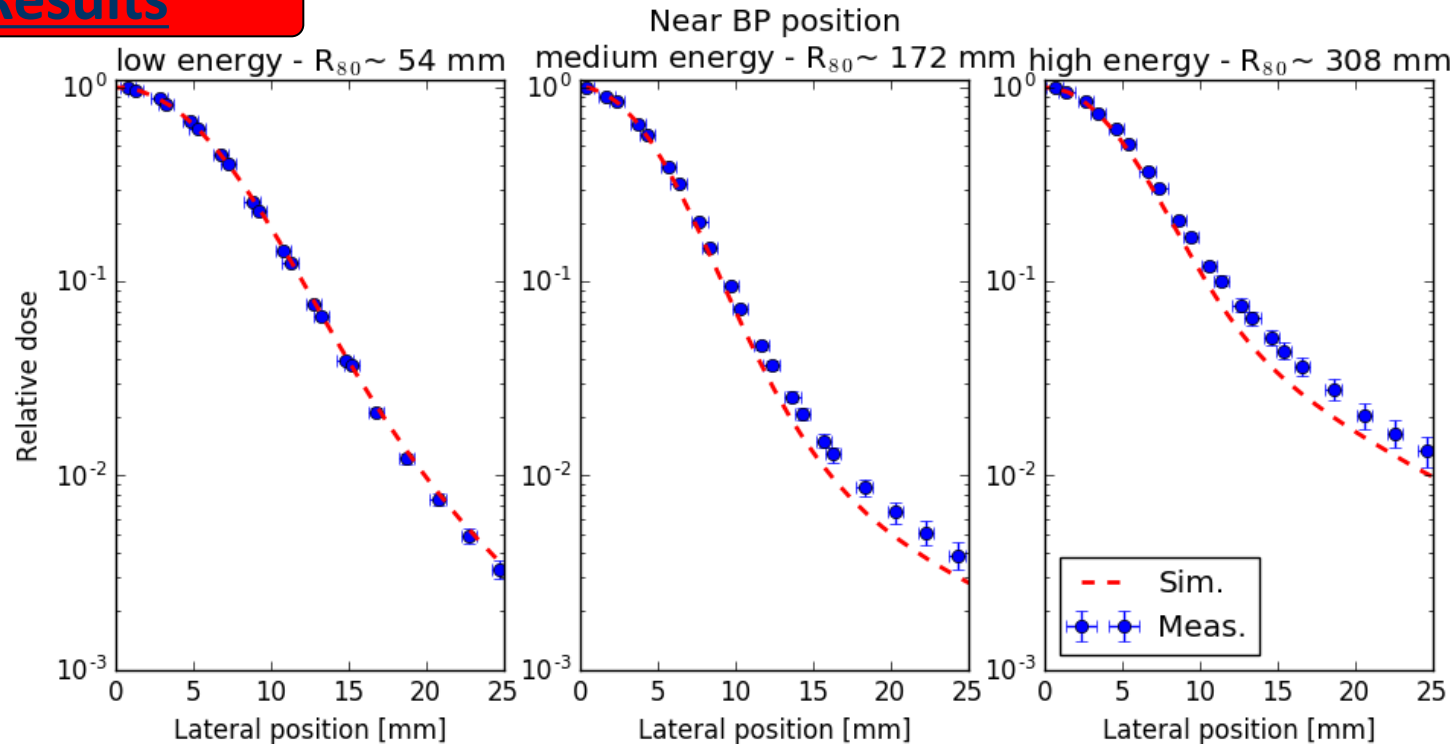




# MC - Beam Modelling

## Lateral Dose Distributions

### Results



- FWHM differences **< 0.5 mm** at the entrance and near Bragg peak region
- **Differences in the halo** for high energies at large depth

→ **Good results** of the **FLUKA** models

→ **Underestimation** of secondary particles ? Large angles ?

# MCTP Platform

## Physical Validation

## Simulations

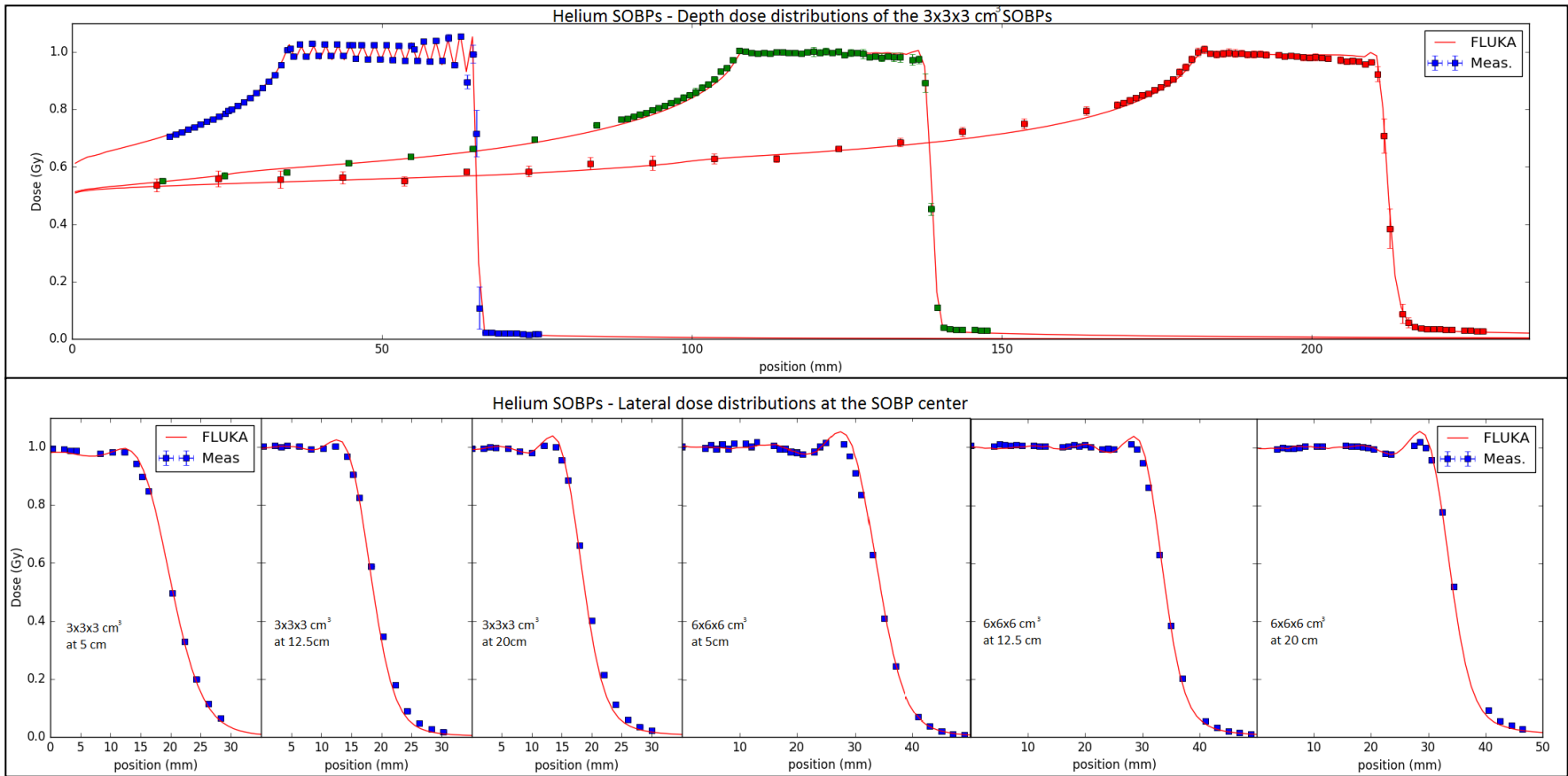
- **Optimization** with **FLUKA-MCTP**<sup>11</sup>
- SOBP **size**: **3x3x3** and **6x6x6** cm<sup>3</sup>
- **Position** (center) of SOBPs: **5, 12.5 and 20 cm**
- **Dose** planned : 1Gy (physical optimization)
- **Re-calculation** with : 1x1x1mm<sup>3</sup> bins / 150x10<sup>6</sup> primaries

## Measurements

- **Measurements** in the water tank
- Acquisition of **depth-dose** distributions (step size 1 mm)
- Acquisition of **lateral dose** distributions (step size 2 mm)

# MCTP Platform: He

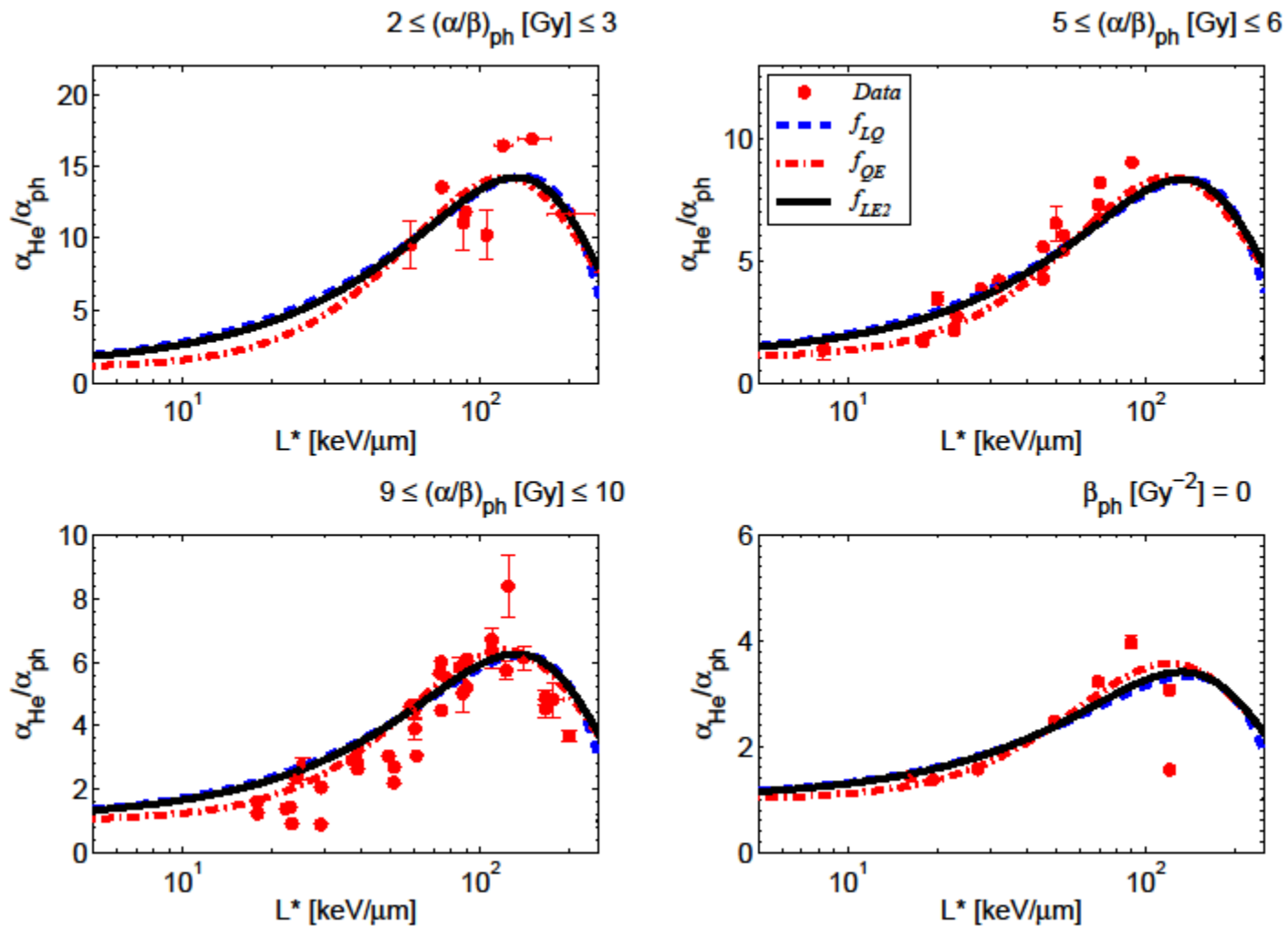
## Results



- Overall good agreement
- Range difference < 0.5 mm
- Global dose deviation < 2.5 %
- Mean dose deviation in SOBP region < 1%
- Consistent results

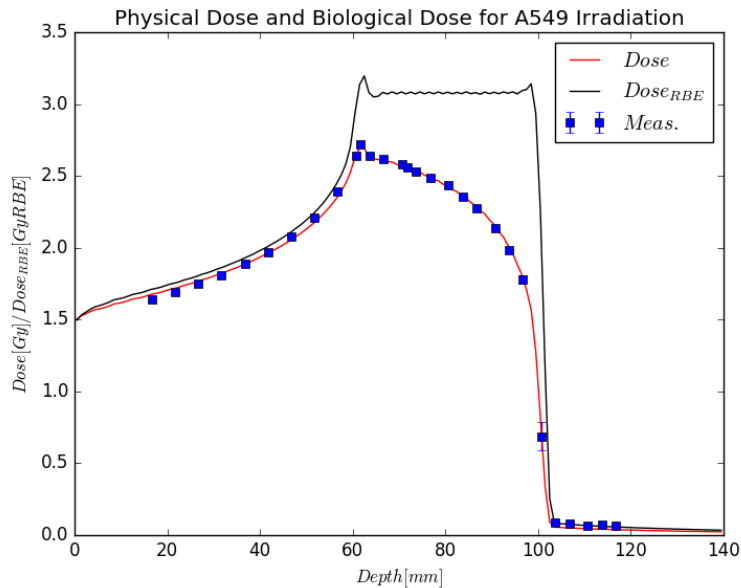
→ Satisfying results from MC models, the optimizer and beam monitor calibration

# He RBE model development

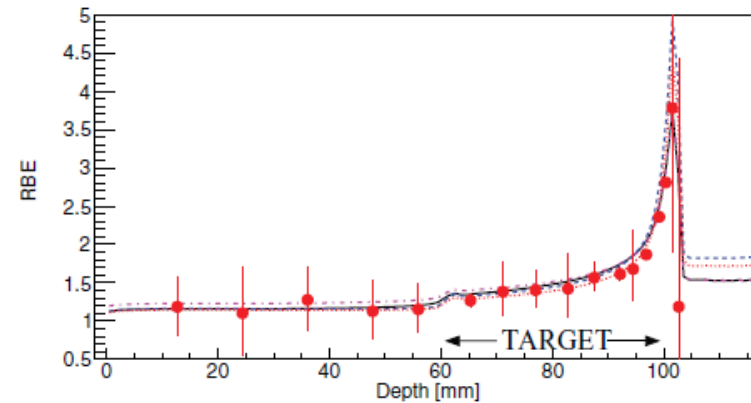
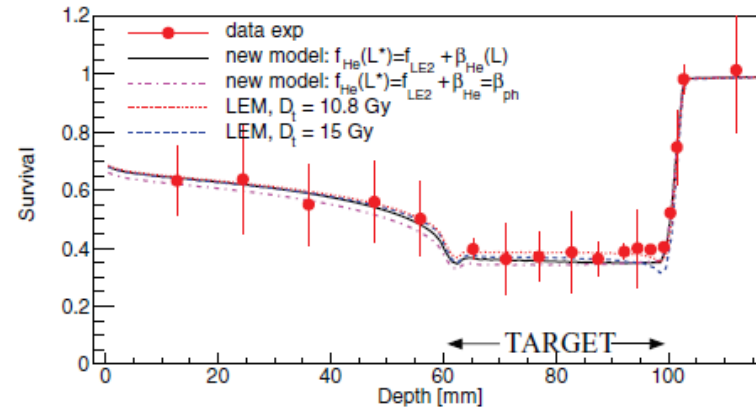


Mairani et al 2016 PMB 61 888, Mairani et al 2016 PMB 61 4283

# RBE model validation



- 1 – Bio. Optimized SOBP
- 2 – Measurements verifications
- 3 – Cell Survival (A549) + RBE

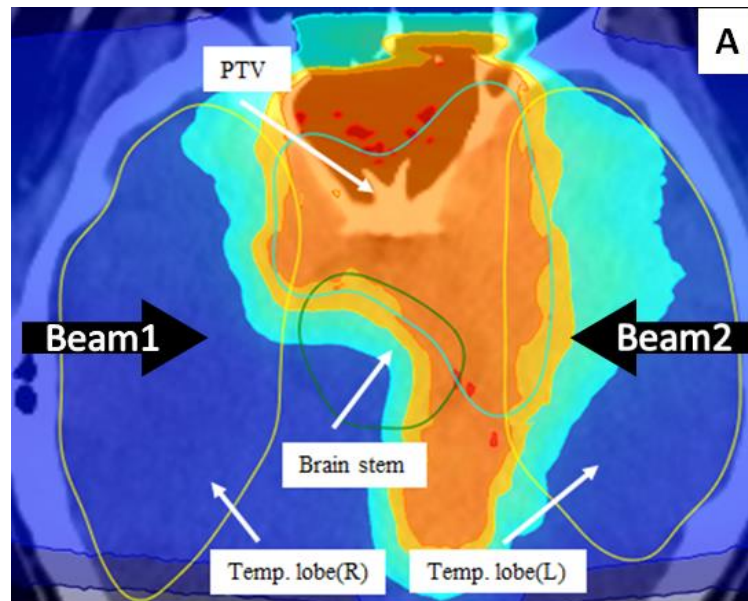


→ Validated in-house model for He (5%) and H (2%)

# Plan Comparisons

## Methods

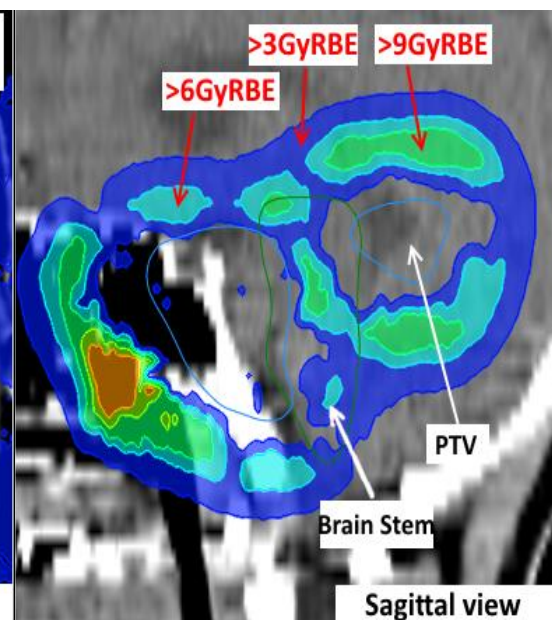
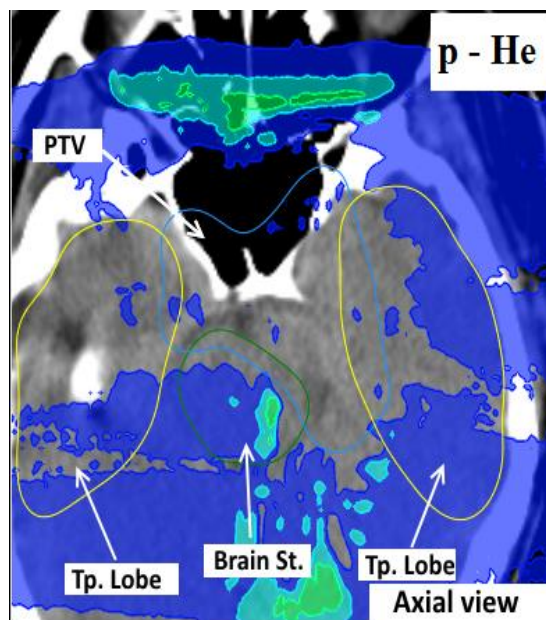
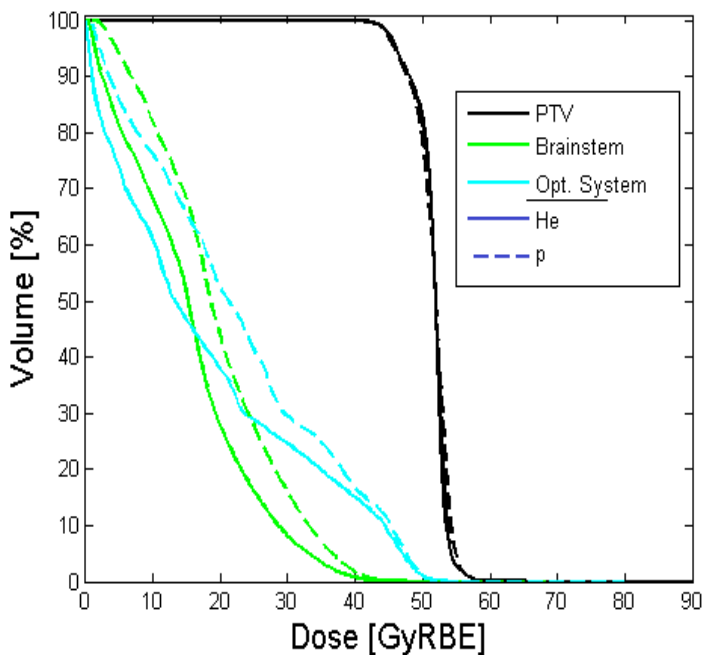
- Meningiomas treated with proton (4 patients)
- **Re-optimization** with **FLUKA–MCTP** for **helium ions AND protons**
- **Dose** in PTV 1.8 GyRBE
  
- Tissue types CNS  $\alpha/\beta = 2$  Gy , PTV  $\alpha/\beta = 3.7$  Gy
- **Protons** without RiFi, **variable RBE** (calculated “online”)
- **Helium ions** with RiFi, **variable RBE** (calculated “online”)
- Comparisons : DVH for **PTV** and **OAR**



# Plan Comparisons

**Results**

Patient DVH

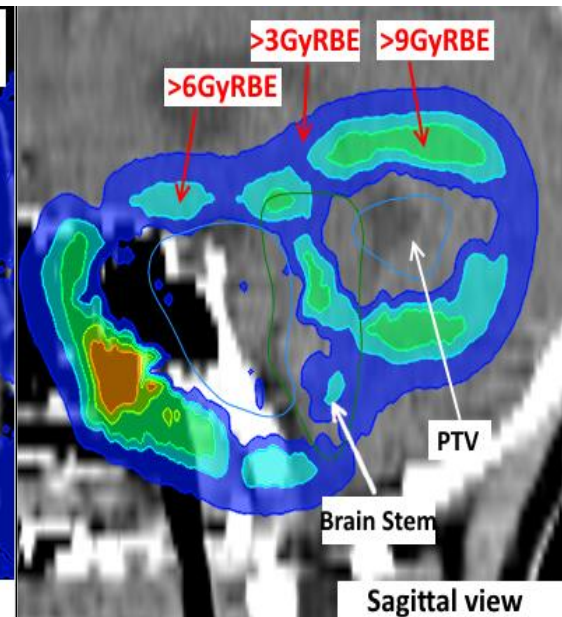
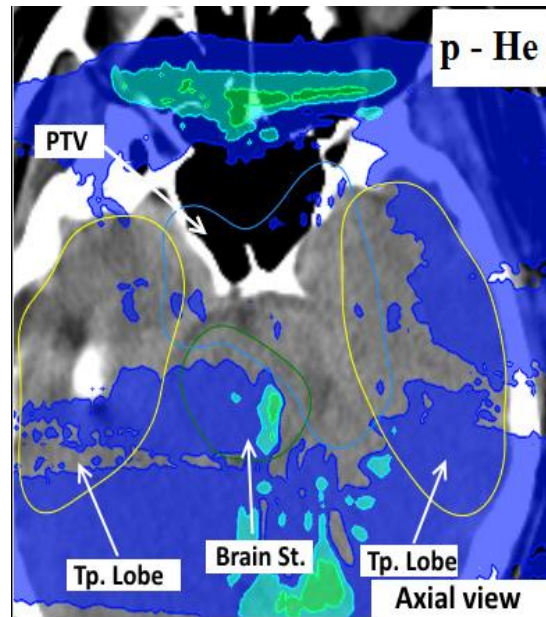
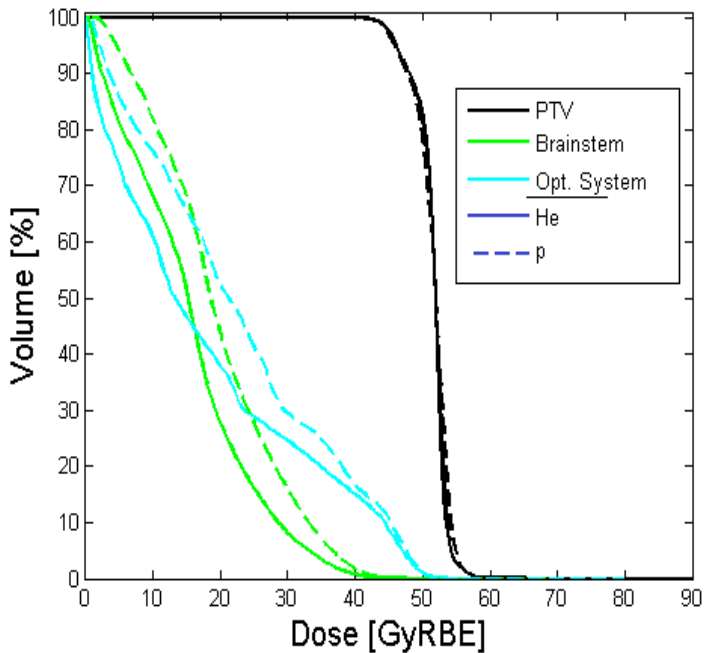


Comparable **PTV** coverage  
**Better** sparing of OAR with He  
**Less dose** to normal tissues

# Plan Comparisons

**Results**

Patient DVH



**Higher benefits** for large depth (lateral/distal fall-off)

→ **Promising results** from plan comparison between He and protons





**Thank you  
for  
Your Attention!**