# Evaluation of A Digital Tracking Calorimeter for In-Situ Range Verification during Particle Therapy

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# Particle Therapy

- Cancer is one of the leading causes of death
- Tumors can be treated with photons or ions (protons, carbon, ...)



Particle therapy can be done by passive scattering or pencil beam scanning



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- Treatment planning provides expected locations for the Bragg peak of individual spots
- Many things can go wrong
  - Movement through breathing and other organ activity
  - Patient anatomy changes between imaging and treatment
  - Patient alignment on the treatment table

#### Range verification

- $\bullet\,$  Goal: Predict Bragg peak location with  $\leq 1\,\text{mm}$  error
- How do we know the Bragg peak is at the expected location?
  - $\rightarrow$  Positron emission tomography (PET), e.g. Parodi *et al.*, 2000 [3]
  - $\rightarrow\,$  Prompt gamma (PG) detection, e.g. Kurosawa et al., 2012 [4]
  - ightarrow Charged secondary particles?

# Range Verification

- Heavier ions (e.g. carbon) produce fast secondary ions
  - ightarrow Range verification with charged particles in carbon therapy: Gwosch et al., 2013 [5]
- Range verification with charged secondaries has not been done in proton therapy
- Protons only produce neutral secondaries leaving the patient
- Neutral particles interact with matter in the detector ightarrow tertiary charged particles



# Digital Tracking Calorimeter

- Conventional CT is done with photons
  - Uncertainties when using an x-ray CT for particle treatment planning
  - $\rightarrow\,$  Imaging with protons: proton CT (pCT)

- Bergen pCT collaboration is developing a digital tracking calorimeter (DTC) for pCT [6]
- 2 tracker layers
- 41 detector-absorber layers (calorimeter)
- Per layer: 108 ALPIDE [7] chips (monolithic active pixel sensor)



- **①** Can the DTC be used for range verification during particle therapy?
- **2** How accurate is range verification with the DTC for carbon ions?
- **③** Is readout yield sufficient for proton range verification within 1 mm?

- Simulate treatment with protons & carbon
- DTC is modeled in GATE Monte Carlo simulation
- Phantom: water cuboid, thickness: 160 200 mm
- $3.11 \cdot 10^7$  protons per simulation
- $3.11 \cdot 10^5$  carbon ions per simulation
- Beam energies are set to medically relevant values
  - Protons: 60.13 150.35 MeV in 3 mm range intervals (43 energies from matRad [8])
  - Carbon: 115.23 279.97 MeV/u in 2 mm range intervals (61 energies from matRad [8])
- ightarrow 213 proton samples, 305 carbon samples



Protons at 69.4 MeV, 160 mm water

## Machine Learning Models

- 29 base features:
  - Water phantom thickness
  - Total number of active pixels
  - Total number of pixel clusters (hits)
  - Aggregate properties of cluster sizes
  - Different fits of aggregate properties over detector layer
- Features with ground truth range from matRad used with models:
  - Linear regression (OLS)
  - Automatic relevance determination (ARD)
  - Kernel regression
  - Gaussian process (GP)
  - Deep neural network (DNN)
- For Kernel regression, GP, and DNN, the feature set is reduced to different subsets

	Linear	ARD	Kernel	GP	DNN
Protons	0.71 mm	0.76 mm	0.29 mm	0.28 mm	0.54 mm
Carbon	0.58 mm	0.61 mm	0.25 mm	0.24 mm	0.43 mm

- Carbon works better than protons despite 100 times fewer primaries
- GP performs best in both cases
- Sub-mm error even for protons

- The detector has shown potential for range verification
- $\bullet \ \ldots \ but \ it \ is \ optimized \ for \ pCT \ through \ Monte \ Carlo \ simulations$
- Extremely low yield requires too many simulations to do the same for range verification
- $\rightarrow$  Differentiated MC simulation (GATE/Geant4)
- Then we can optimize some properties
  - Existence and thickness of converter materials
  - Replace empirical with analytical models to predict range
  - Improved uncertainty quantification

The Bergen pCT collaboration's DTC is the first detector shown to be capable of in-situ range verification through charged particles in proton therapy

What's next?

- More realistic data (pediatric head simulation)
- Replace manual feature engineering with graph neural network of raw data
- As soon as differentiated physics simulation is available: detector design optimization

# The Bergen pCT Collaboration and SIVERT Research Training Group

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- Helse Bergen, Norway
- Western Norway University of Applied Science, Bergen, Norway
- Wigner Research Center for Physics, Budapest, Hungary
- DKFZ, Heidelberg, Germany
- Saint Petersburg State University, Saint Petersburg, Russia
- Utrecht University, Netherlands

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DTC for Proton Therapy Range Verification

29 base features:

- Water phantom thickness
- Total number of active pixels
- Total number of pixel clusters (hits)
- Number of clusters over threshold (5, 20 pixels)
- Mean and standard deviation of cluster sizes
- Linear and cubic fit for active pixels over layer
- Linear and cubic fit for hits over layer
- Linear and cubic fit for deposited energy over layer
- Exponential fit and its mean squared residuals for active pixels over layer

## Gaussian Process

- Features: Phantom thickness, clusters, mean cluster size, linear fit for pixels over layer
- Kernel: const  $* \mathsf{RBF} + \mathsf{const} * \mathsf{RBF}$
- MAE: 0.33



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## Deep Neural Network

- Features: Fits for clusters over layer and energy deposition over layer are removed
- Fully-connected network with 2 hidden layers (256 and 128 units, sigmoid, 5% dropout)
- MC dropout raises MAE to  $> 1 \, \text{mm}$



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