



# ACCELERATORS FOR HADRON THERAPY

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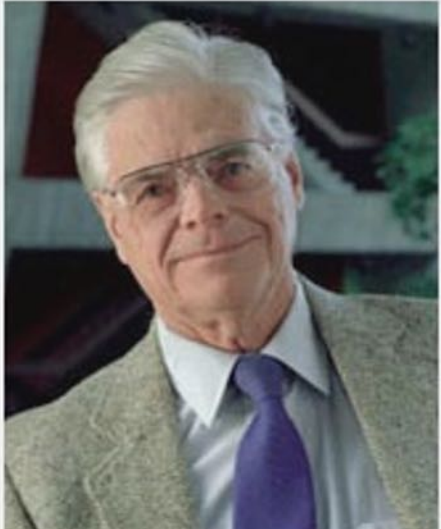
UGO AMALDI – TERA FOUNDATION



This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 101008548

## *The Berkeley times*

# *The first steps with charged hadrons at the Berkeley laboratory*



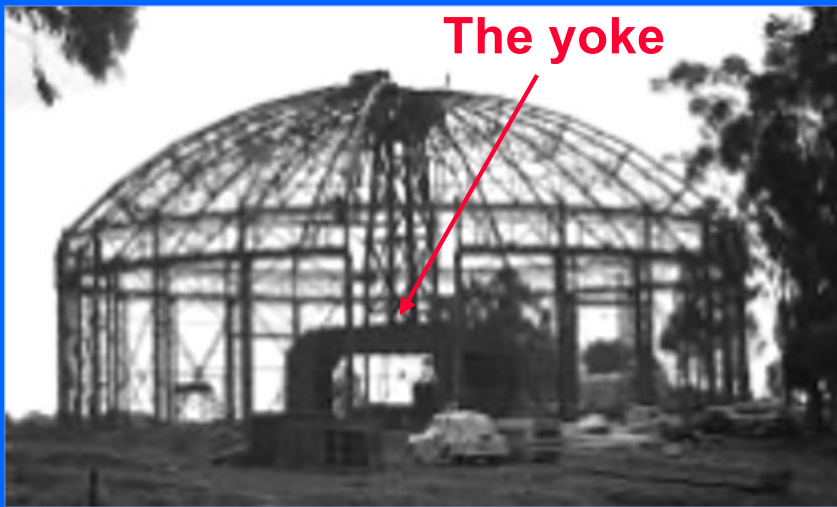
Founder and first director of Fermilab

In 1946 Robert Rathbun Wilson wrote that (\*):

- Protons can be used clinically to spare normal tissues
- Modulator wheels can spread narrow Bragg peak
- **Helium and Carbon ions can also be used**

(\*). Wilson, R.R. (1946), "Radiological use of fast protons, *Radiology* 47, 487.

## The 184-inch cyclotron - 1946



**Cornelius Tobias**  
**1918-2000**

At the Berkeley Laboratory

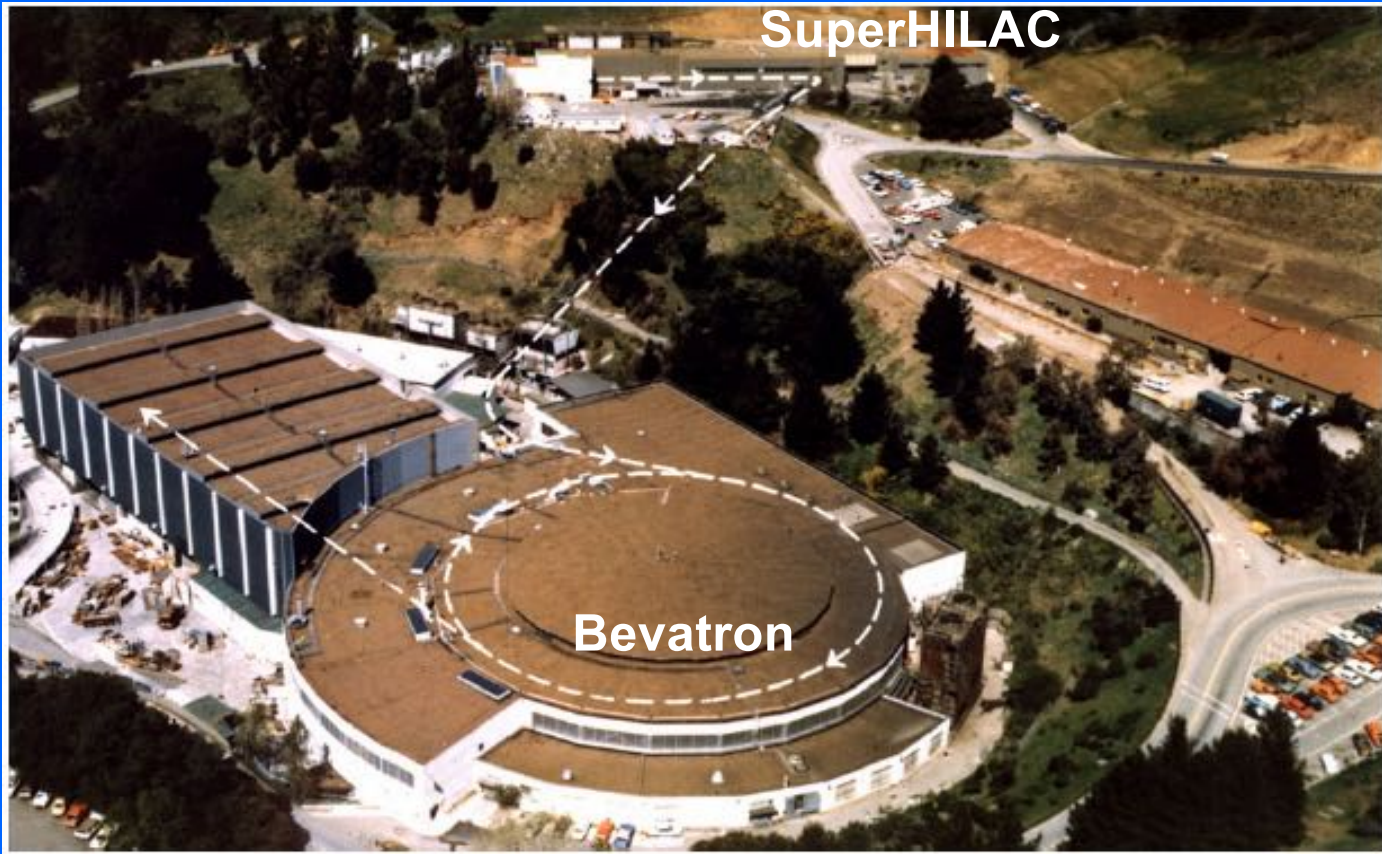
First treatment of pituitary glands: 1954

Treatment of pituitary tumors: 1956

1000 patients treated with protons by the end of the program 1974

**THIS COURSE: Start of Biophysics in Hadron Therapy and LBL**  
**Speaker: Eleanor Blakely (LBL)**





# Bevalac - 1974

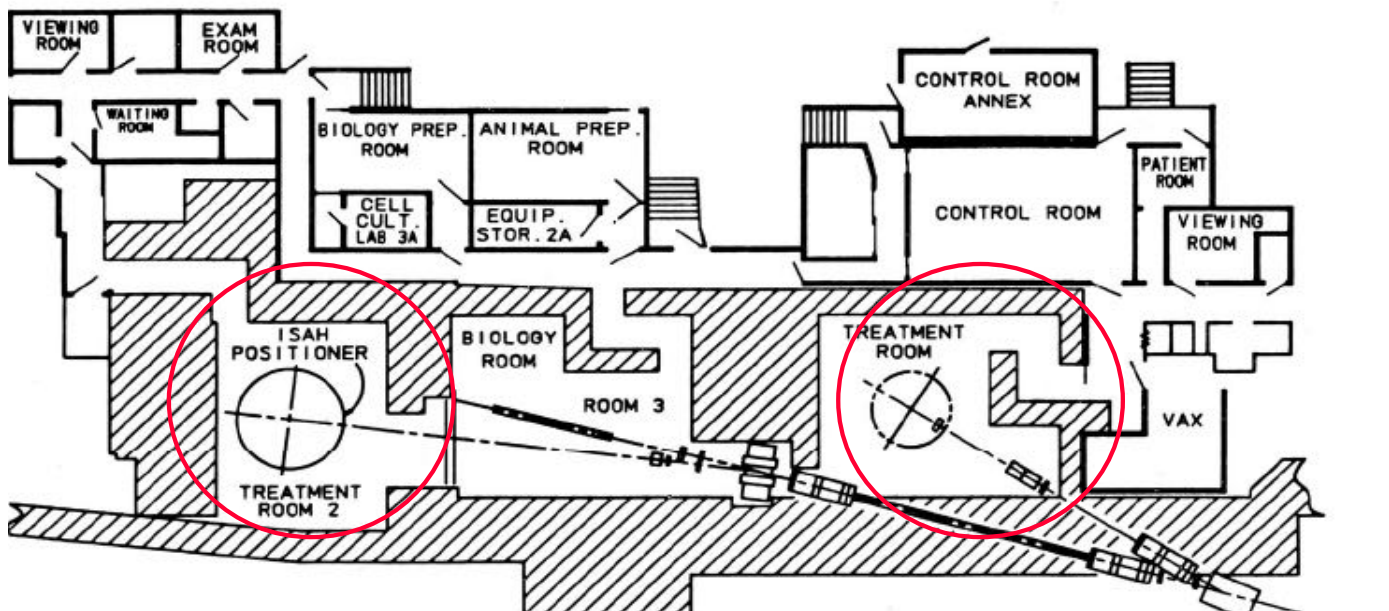
Helium: 2000 patients

Neon: 500 patients

1992

Clinical treatments ended with the closure of the Bevatron

At Berkeley more than 2,500 patients had been treated



## *The pioneering years*

1957



The modified synchrocyclotron

## Uppsala – protontherapy

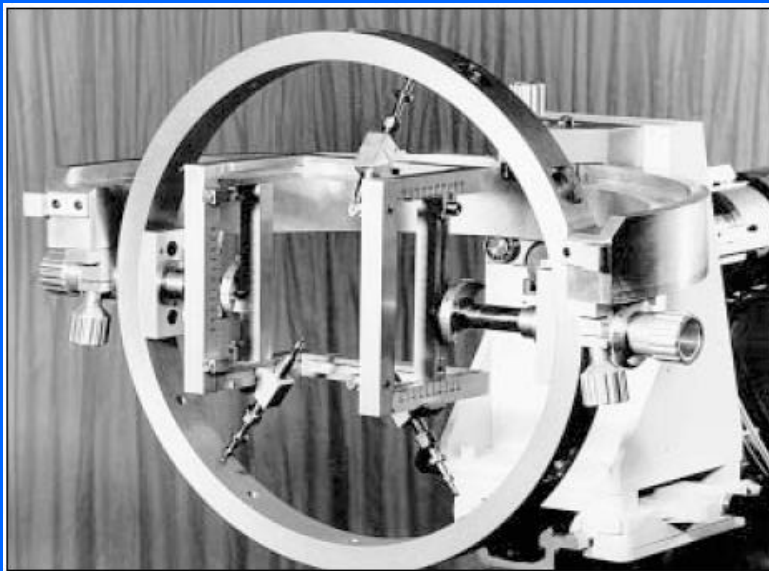
Börje Larsson

Doctoral dissertation - 1962



(1931-1998)

“On the Application of a 185 MeV Proton Beam to Experimental Cancer Therapy and Neurosurgery: a Biophysical Study”



Alignment system



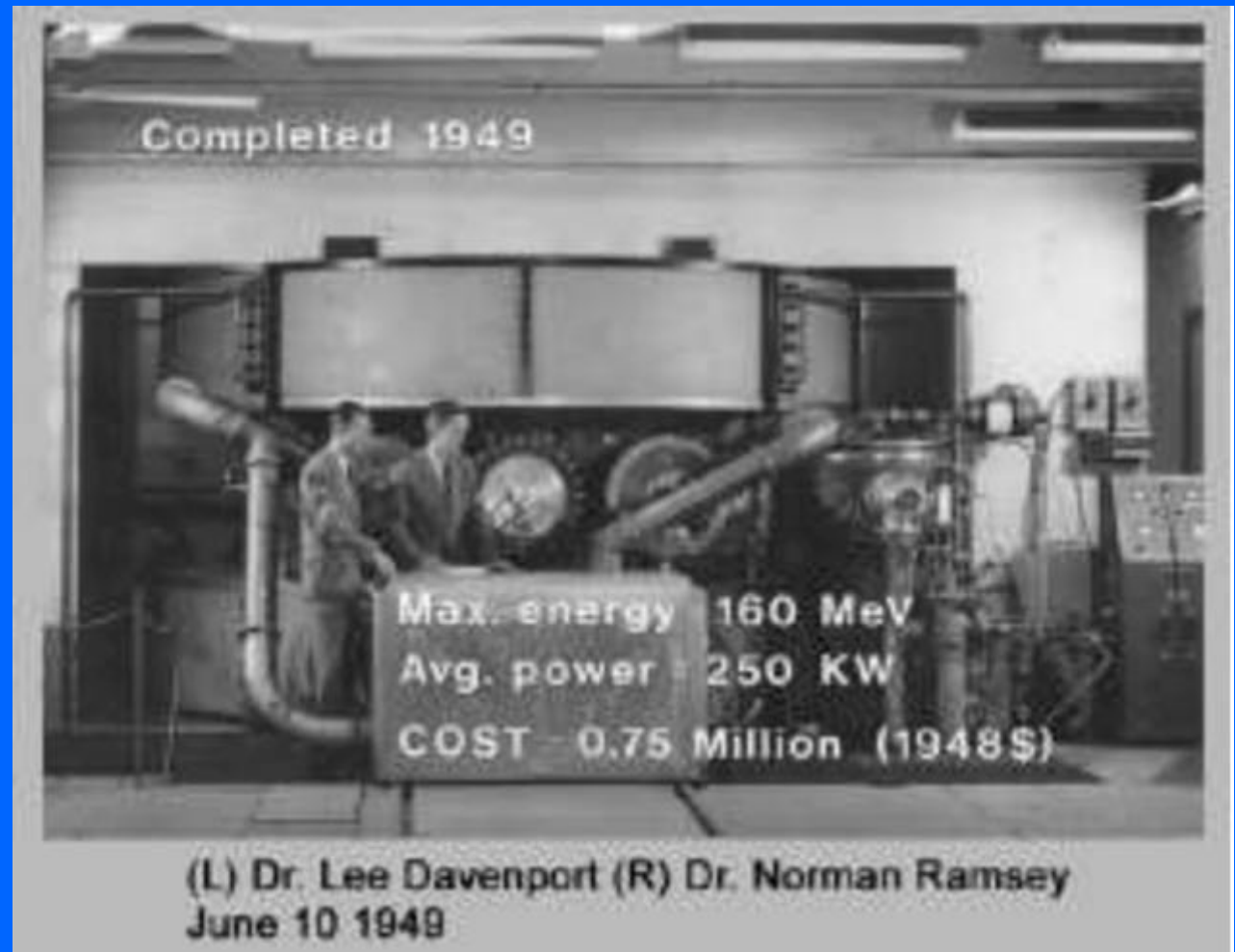
## ***30 years of pioneering proton therapy in physics labs***

<b>Lawrence Berkeley Laboratory</b>	<b>USA</b>	<b>1954</b>
<b>Uppsala</b>	<b>Sweden</b>	<b>1957</b>
<b>Harvard Cyclotron Laboratory (*)</b>	<b>USA</b>	<b>1961</b>
<b>Dubna</b>	<b>Russia</b>	<b>1967</b>
<b>Moscow</b>	<b>Russia</b>	<b>1969</b>
<b>St. Petersburg</b>	<b>Russia</b>	<b>1975</b>
<b>Chiba</b>	<b>Japan</b>	<b>1979</b>
<b>Tsukuba</b>	<b>Japan</b>	<b>1983</b>
<b>Paul Scherrer Institute</b>	<b>Switzerland</b>	<b>1984</b>

1945 ‘

## *The Harvard 160 MeV cyclotron*

Bob' Wilson - a Lawrence student –  
became Associate professor at Harvard  
and designed a new 160 MeV cyclotron



## ***The three programs at the Harvard cyclotron (9116 pts)***

### **Neurosurgery for intracranial lesions (AVMs)**

**(3,687 patients)**

***Neurosurgery Dept. of MGH***

**Raymond N. Kijilberg, Bernard Kliman**

### **Eye tumors**

**(2,979 patients)**

***Massachusetts Eye and Ear Hospital.***

**Ian Constable, Evangelos Gragoudas**

### **Larger tumors**

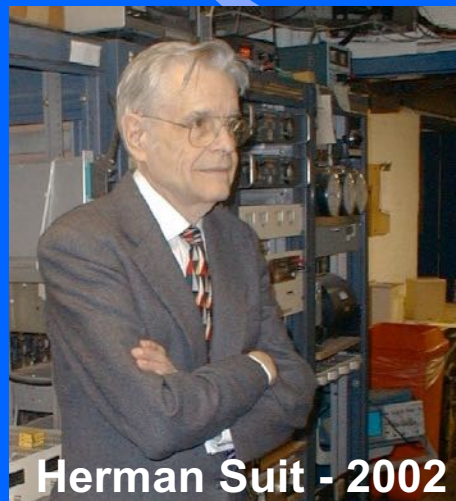
**(2,449 patients)**

***Radiation Medicine Dept of MGH***

**Herman Suit, Michael Goitein,  
Joel Tepper, Lynn Verhey**



**Raymond Kijilberg**

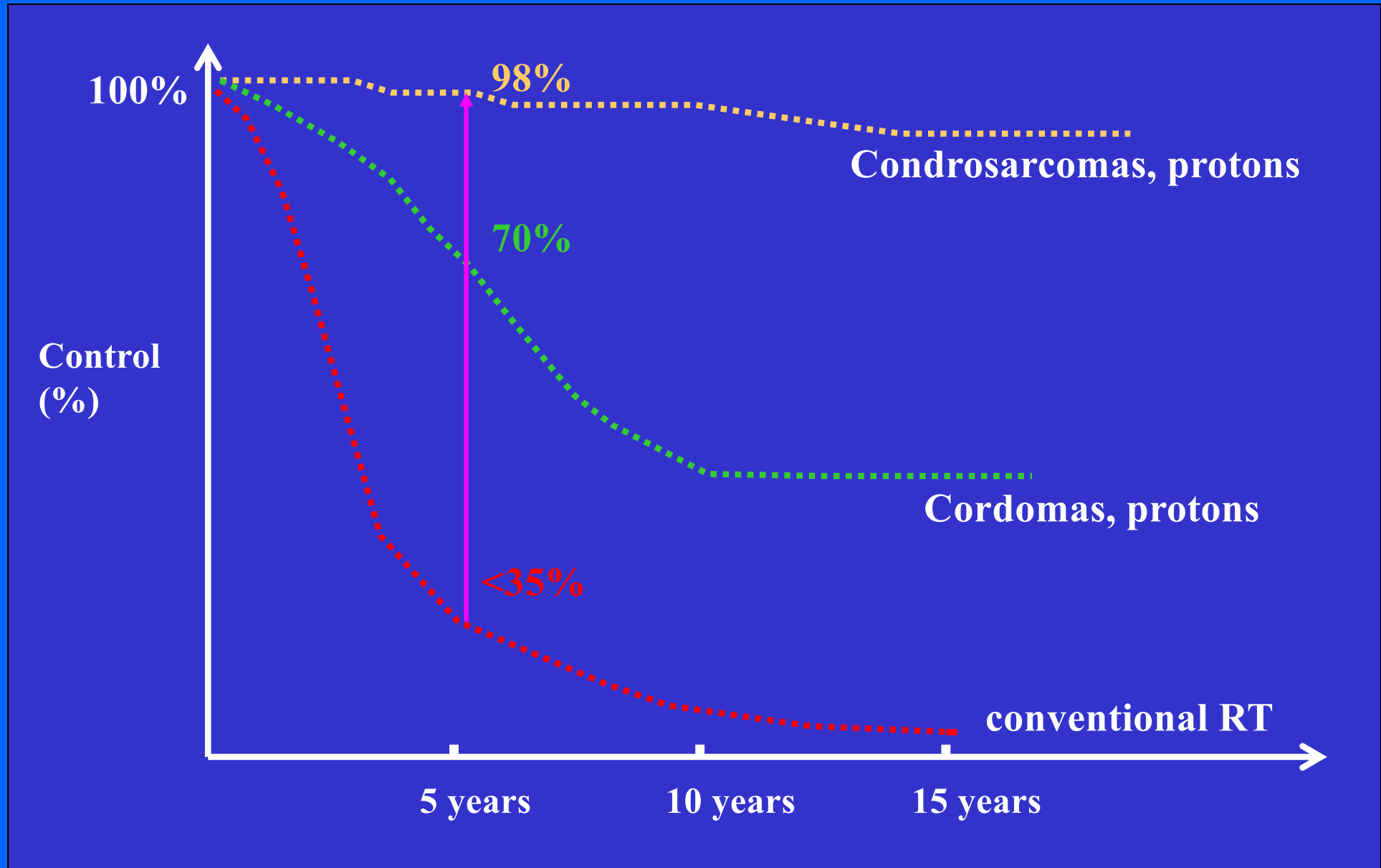


**Herman Suit - 2002**

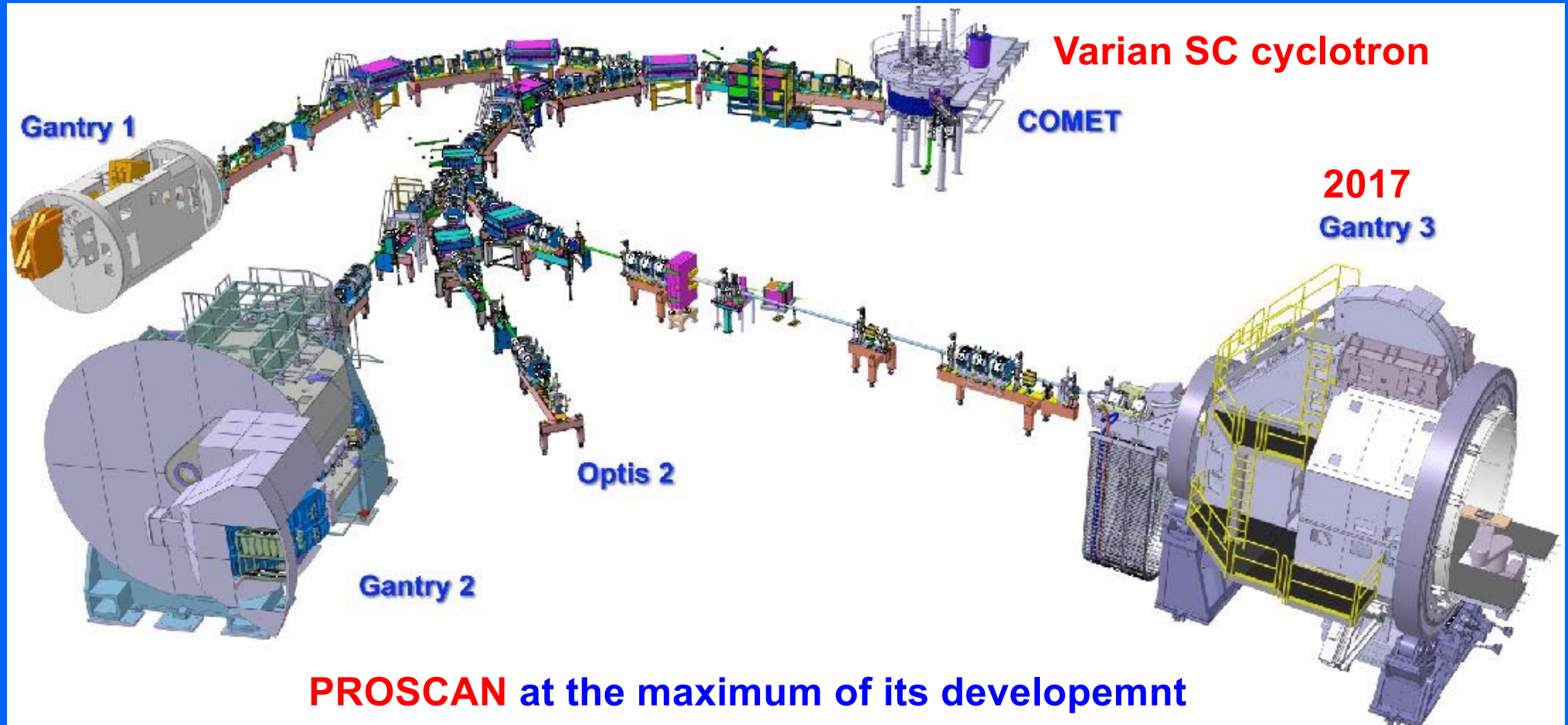


**Michael Goitein**

# First important results obtained at MGH-Harvard



# Protontherapy has been developed at PSI for 30 years



Medical physicists: Eros Pedroni  
Tony Lomax

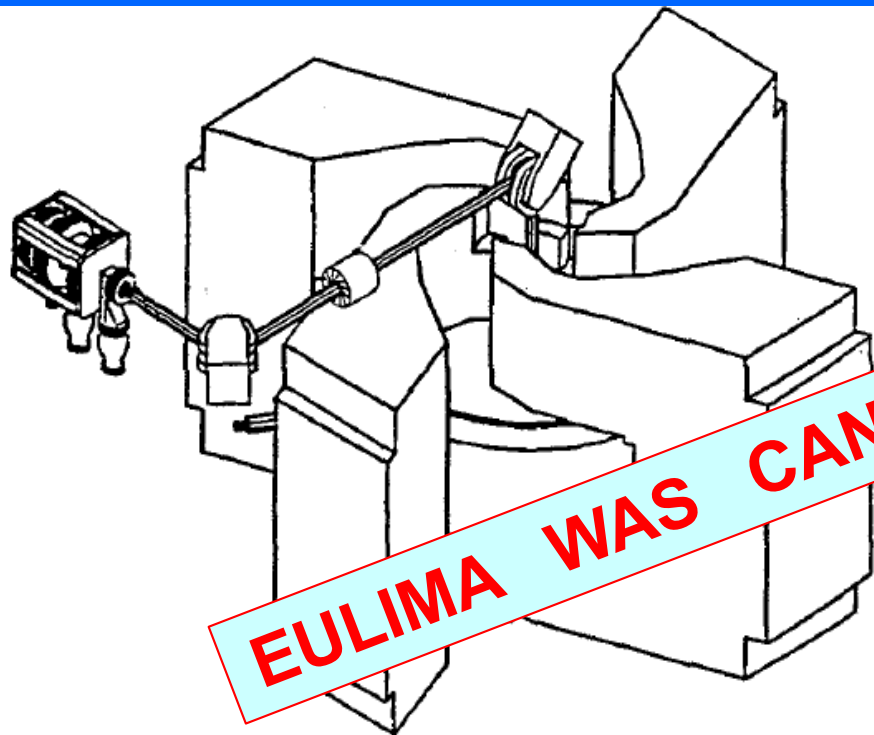




1988

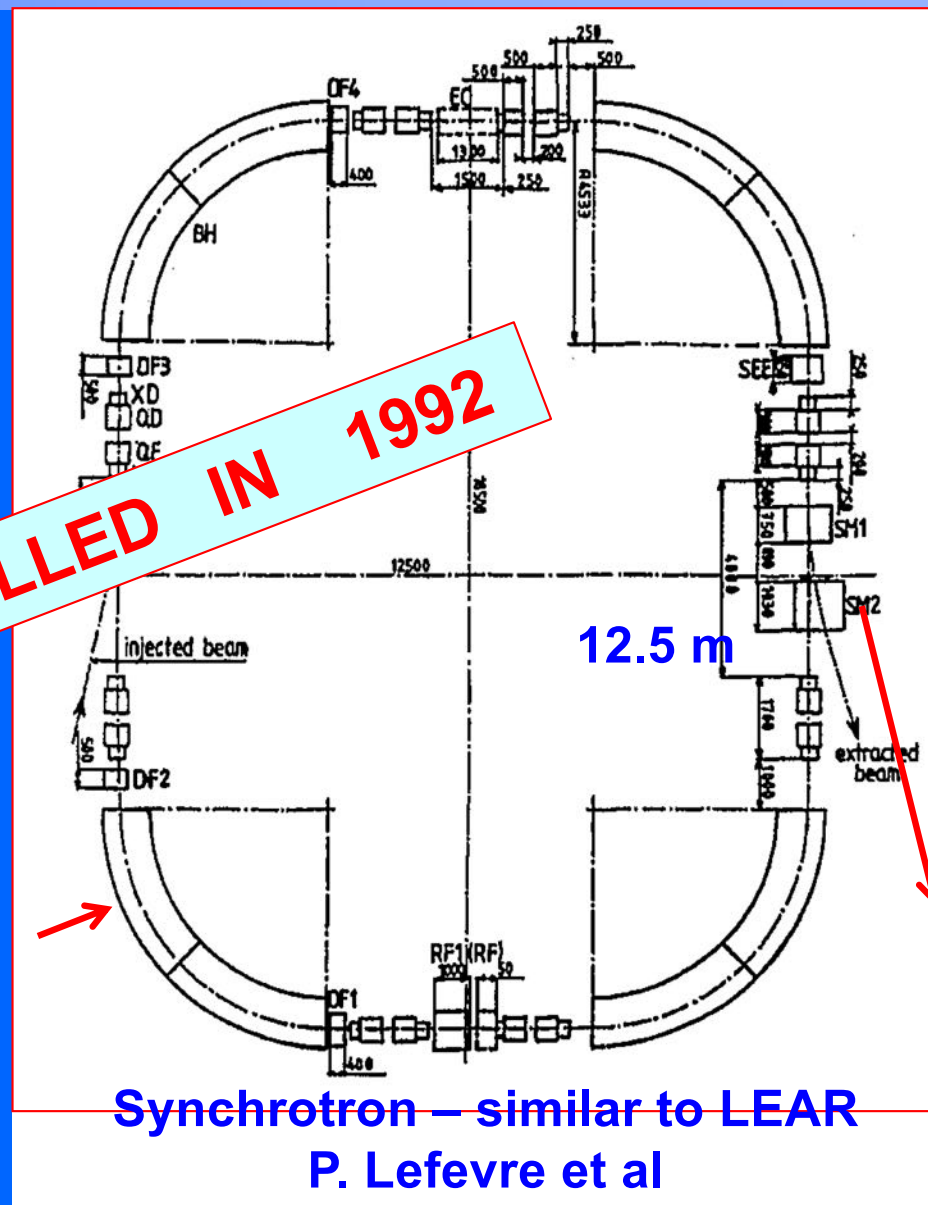
# Pierre Mandrillon, Pierre Lefèvre et al : EULIMA enter CERN

European Light Ion  
Medical Accelerator



superconducting cyclotron  
P. Mandrillon e al

**EULIMA WAS CANCELLED IN 1992**



Synchrotron – similar to LEAR  
P. Lefevre et al

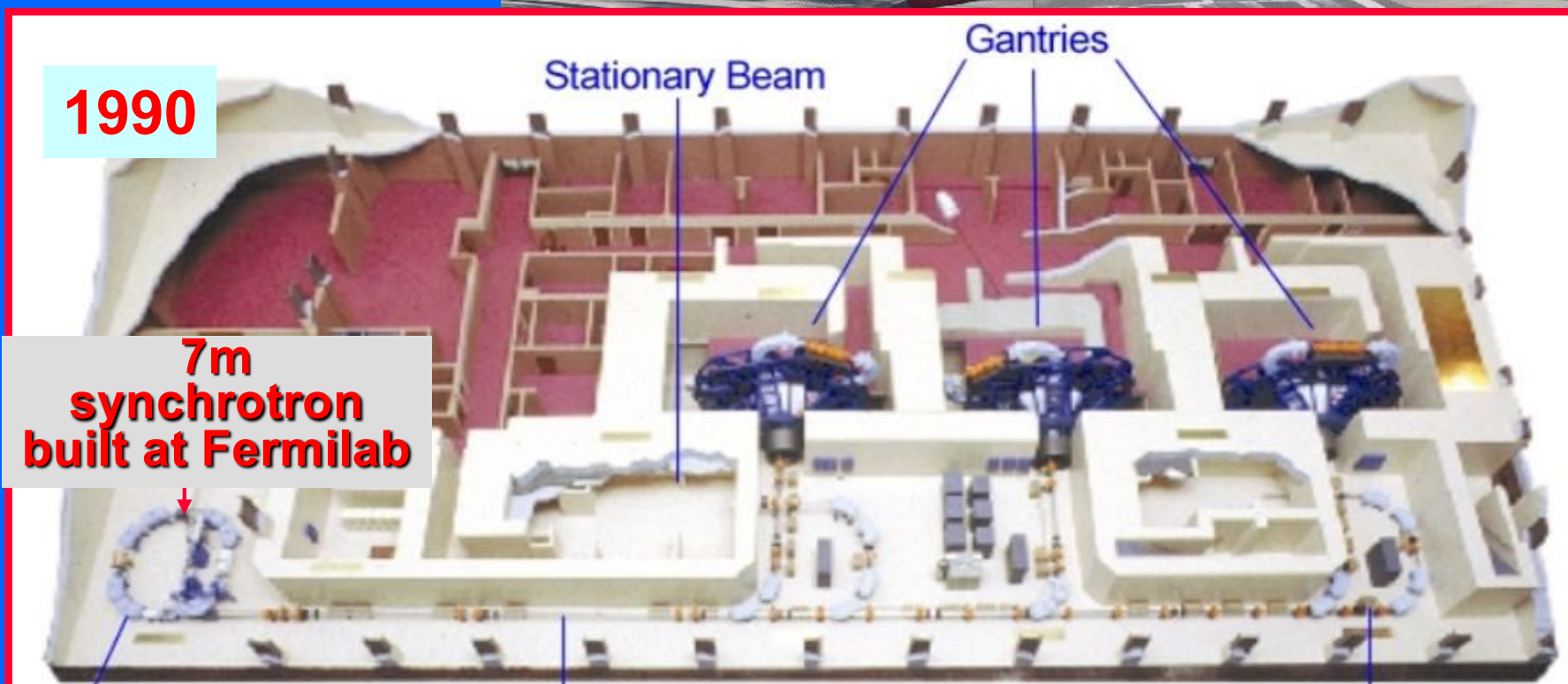
# First hospital centre: Loma Linda University Medical Center



- Dr. James Slater MD



First patient: 1992





## 1992-1994: the turning years

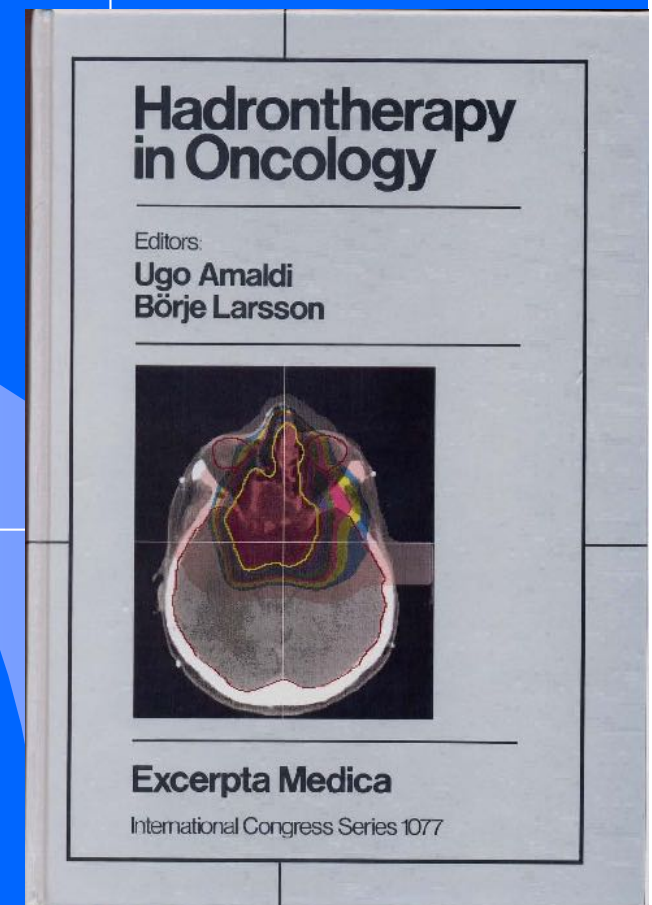
1992: Loma Linda treats first patient with protons

1993: MGH selects IBA for first commercial p-centre

1993: At GSI the 'pilot project' is approved

1994: HIMAC treats the first patient with C ions

1993 Como, Italy  
*First International  
Symposium on  
Hadrontherapy*



# The GSI 'pilot project' (1997-2008)

500 patients treated with carbon ions



Gerhard Kraft



J. Debus



GSI -  
Darmstadt



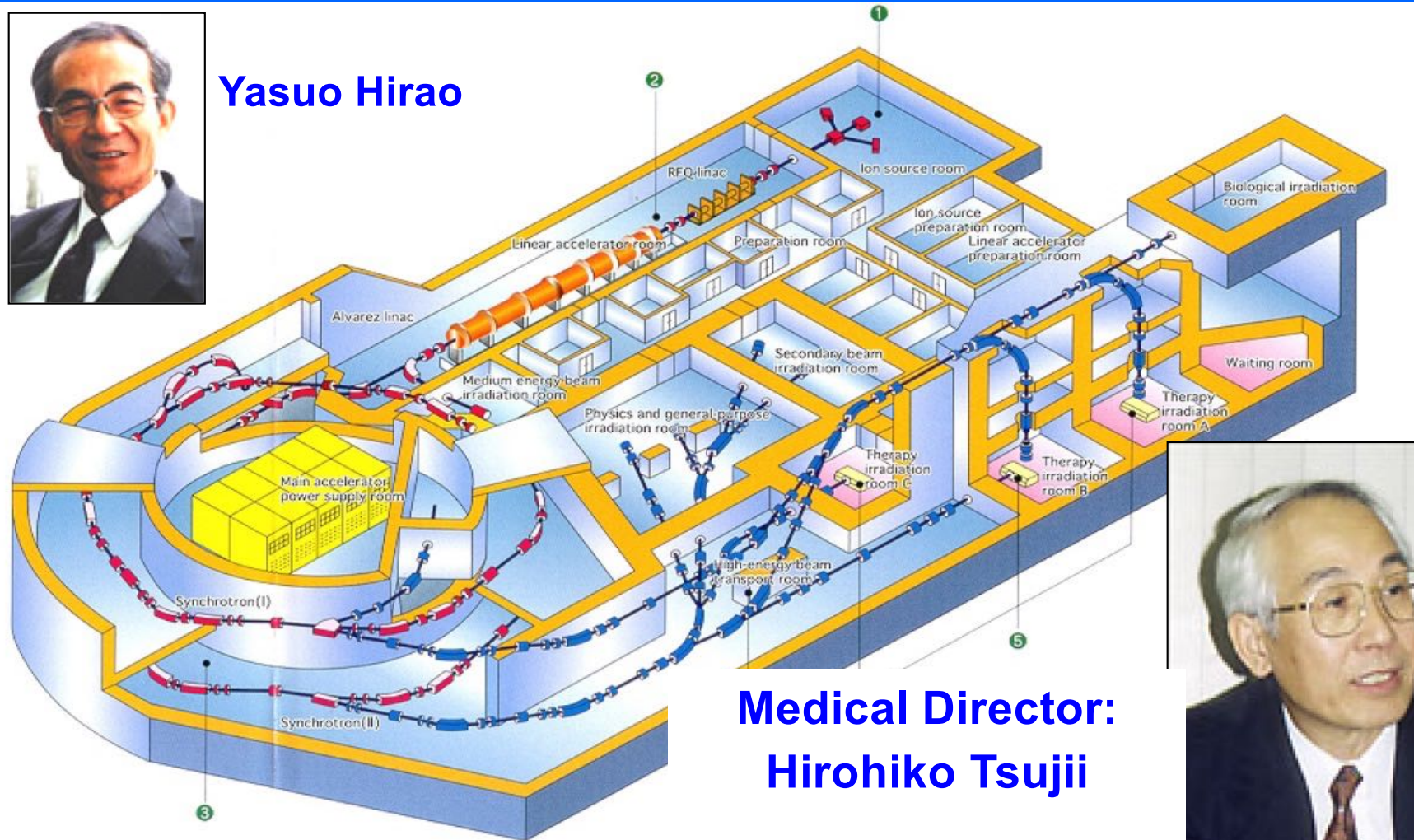


# Heavy Ion Medical Accelerator at Chiba first patient in 1994

QST hospital  
of the National Institute for Quantum Science and Technologies



Yasuo Hirao



Medical Director:  
Hirohiko Tsujii

***Current challenges for proton therapy accelerators:***

***A. Compactness***

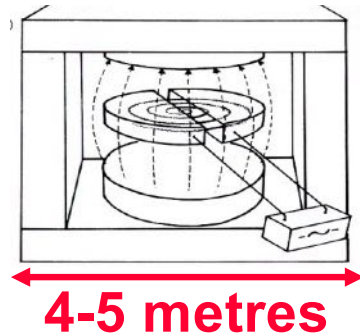
***B. FLASH radiotherapy***

***(C. Multi-ion treatments)***

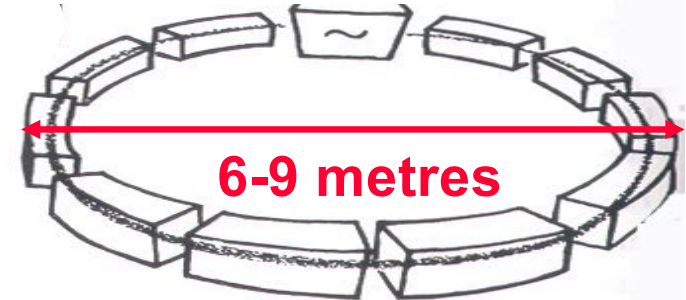
# The accelerators used today in hadrotherapy are “circular”

Therapy with protons (200-250 MeV)

**CYCLOTRONS (\*) (Normal or SC)**



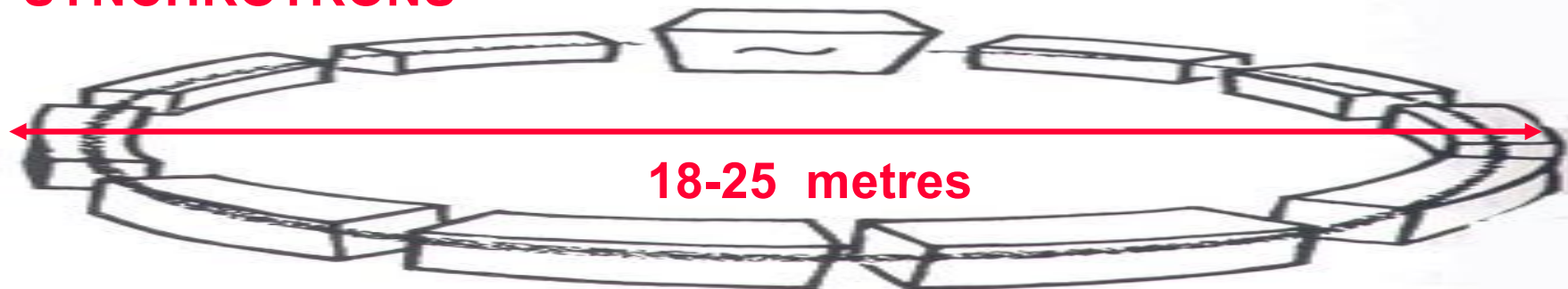
**SYNCHROTRONS**



(\*) recently synchrocyclotrons

Therapy with carbon ions (4800 MeV = 400 MeV/u)

**SYNCHROTRONS**

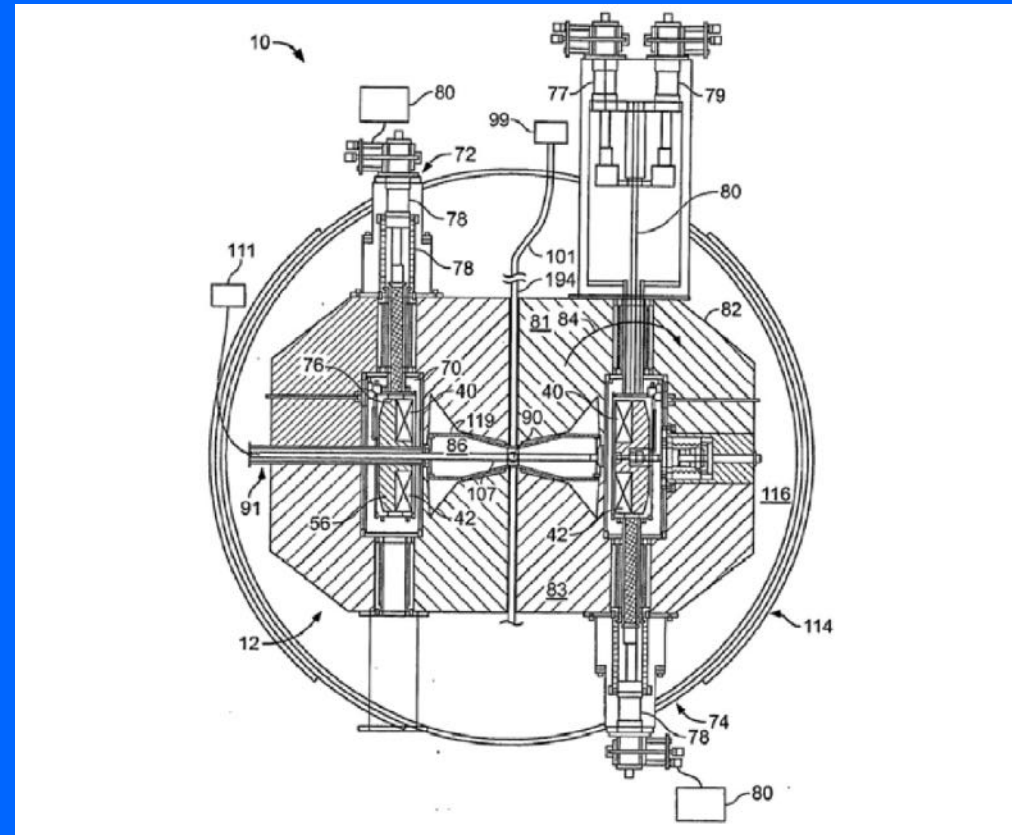




# At the beginning: multi-room facilities: IBA market leader

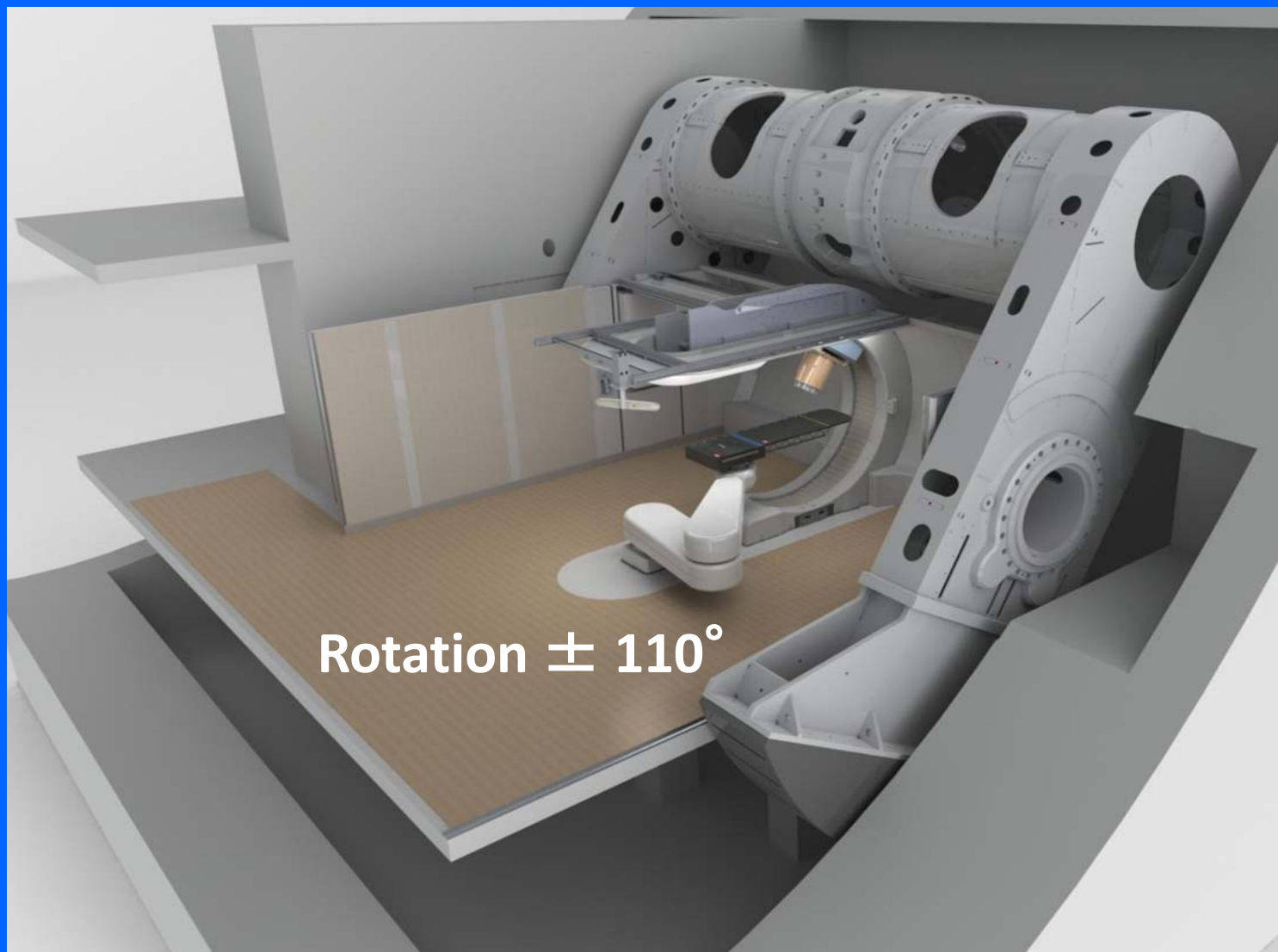


**ROOM-TEMPERATURE CYCLOTRON**



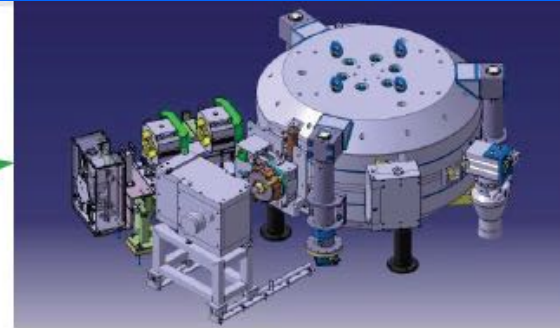
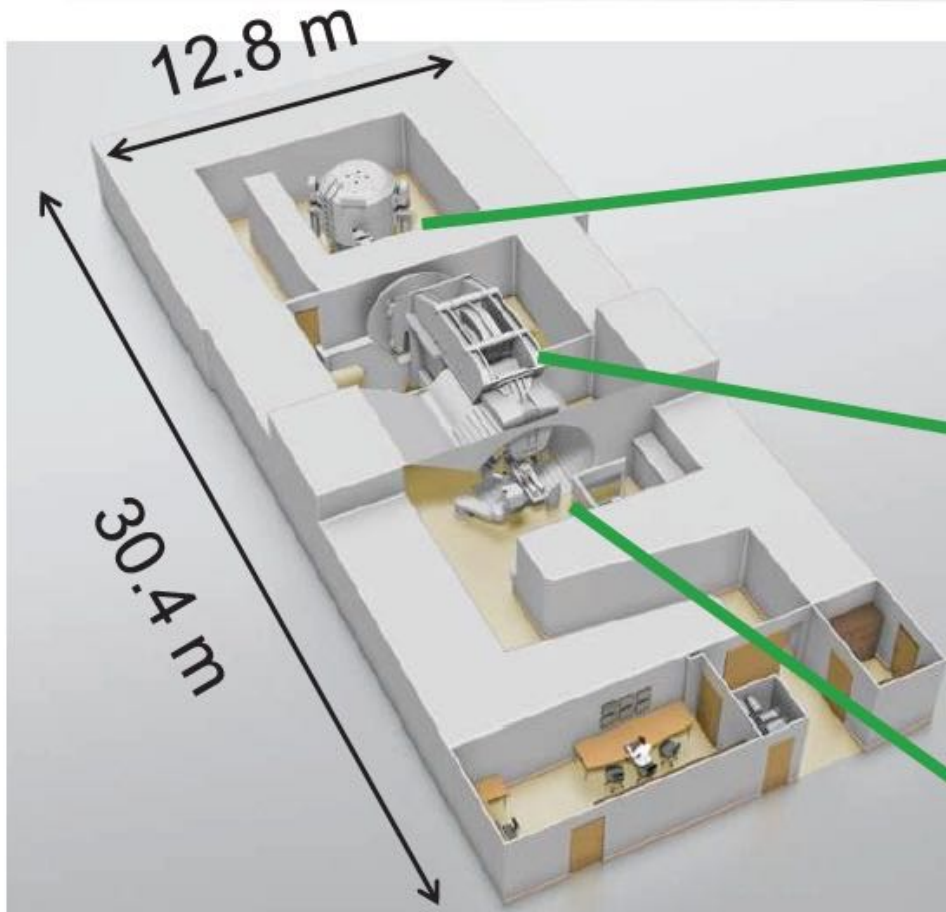
**9 tesla superconducting  
synchrocyclotron**



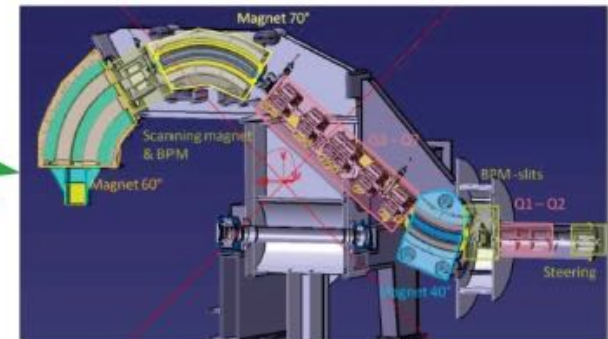


Rotation  $\pm 110^\circ$

Superconducting. SC



Synchrocyclotron with superconducting coil: S2C2



New Compact Gantry for pencil beam scanning



Patient treatment room



### 3. Single room facility by SUMITOMO (Japan)

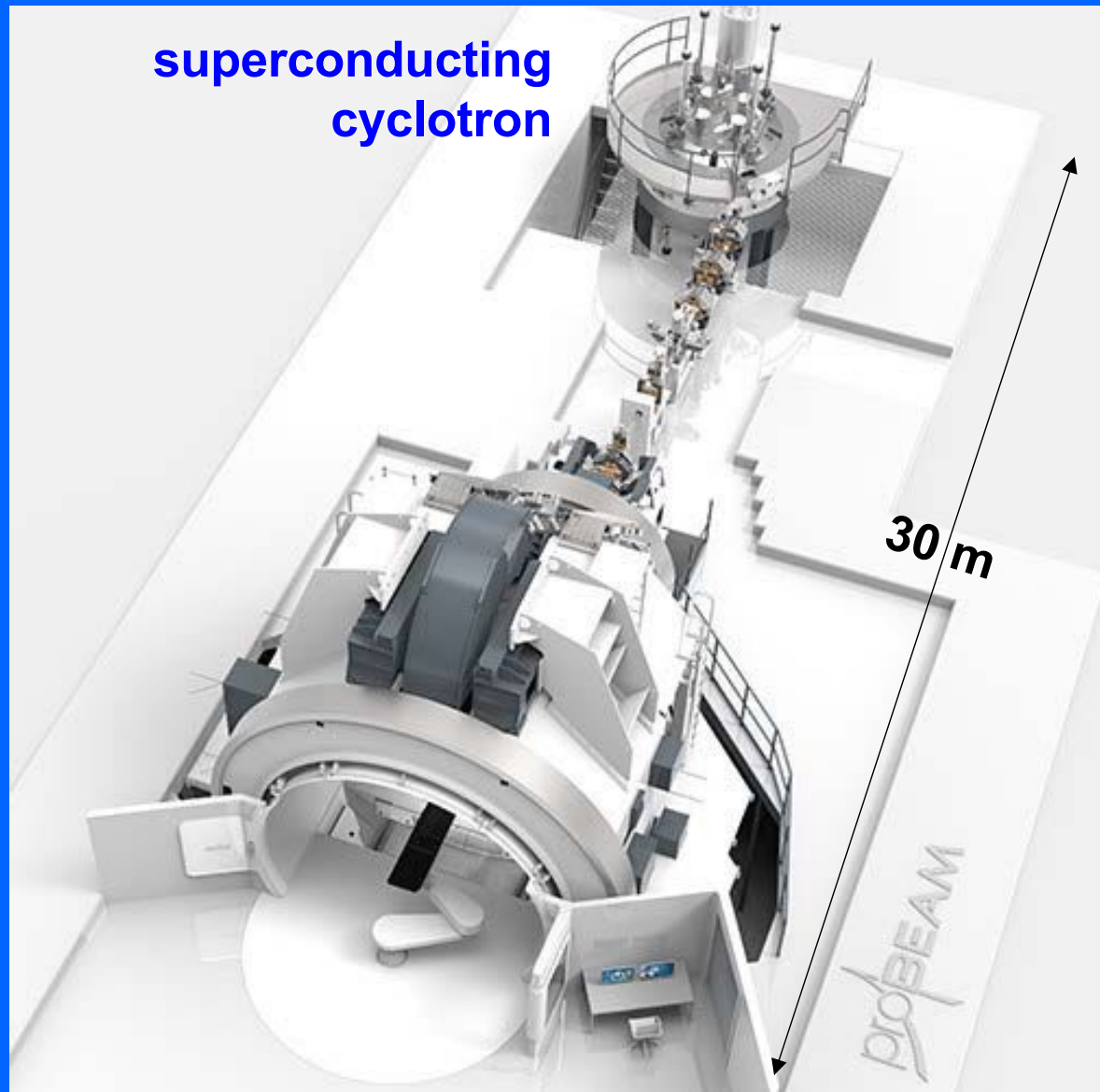
Corkscrew  
gantry

Footprint:  
16m x 20 m

‘Corkscrew’ gantry



# 4. Single room facility by Varian: ProBeam





## 5. *Single-room facility by Hitachi*



Room temperature  
synchrotron

Field: 30 cm x 40 cm

**Radiance 330:  
Room temperature  
synchrotron  
at MGH**



**Mounted with a  
compact gantry in two  
standard vaults for  
photon radiotherapy**



***Proton therapy: **B.** the challenge of FLASH therapy  
(typically: 200 ms instead than 200 s delivery time)***

## *Time structure of the therapy beams*

**CYCLOTRONS:** Beam always present with 50-100 MHz RF structure

**SYNCHROCYCLOTRONS:** Pulsed beam every 0.1 ms (1000 Hz)  
with 50-100 MHz structure

**SYNCHROTRONS:** Pulsed beam every 2-5 seconds (0.2- 0,5 Hz) with or  
without RF structure ; no beam for about 1 second

**LINACS:** Pulsed beam every 5 ms for afor 2-5 microseconds every 5 ms  
(200

# ***FLASH therapy requires 100-1000 higher dose rates***

**CYCLOTRONS:** Beam always present with 50-100 MHz RF structure

**EASY**

**SYNCHROCYCLOTRONS:** Pulsed beam every 0.1 ms (1000 Hz)  
with 50-100 MHz structure

**MEDIUM**

**SYNCHROTRONS:** Pulsed beam every 2-5 seconds (0.2- 0,5 Hz) with or  
without RF structure ; no beam for about 1 second

**DIFFICULT**

**LINACS:** Pulsed beam every 5 ms for afor 2-5 microseconds every 5 ms  
(200

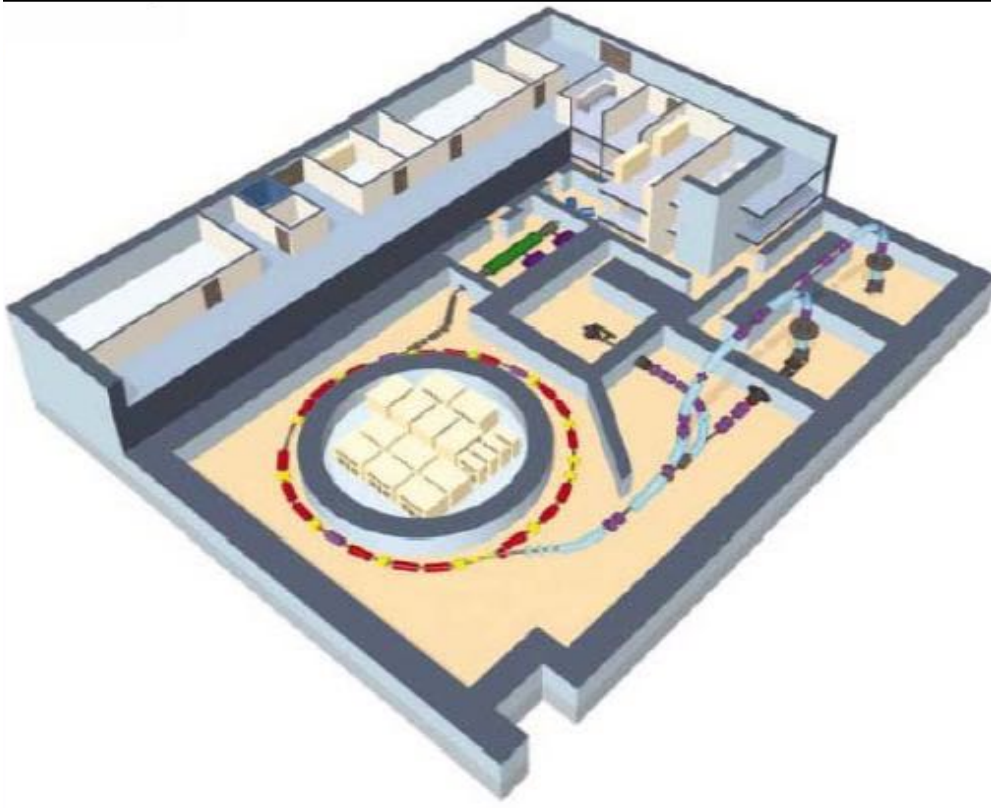
**MEDIUM**

# *Status of light ion therapy centres in Japan and Europe*

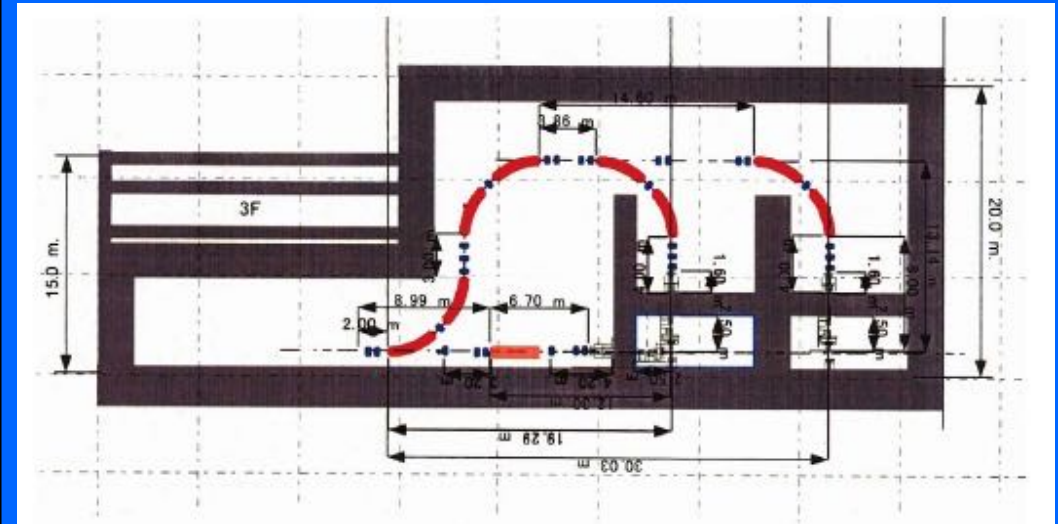


## *In Japan six carbon ion facilities*

Leader: Nat. Inst. for Quantum Sciences and Technologies



Construction: Mitsubishi

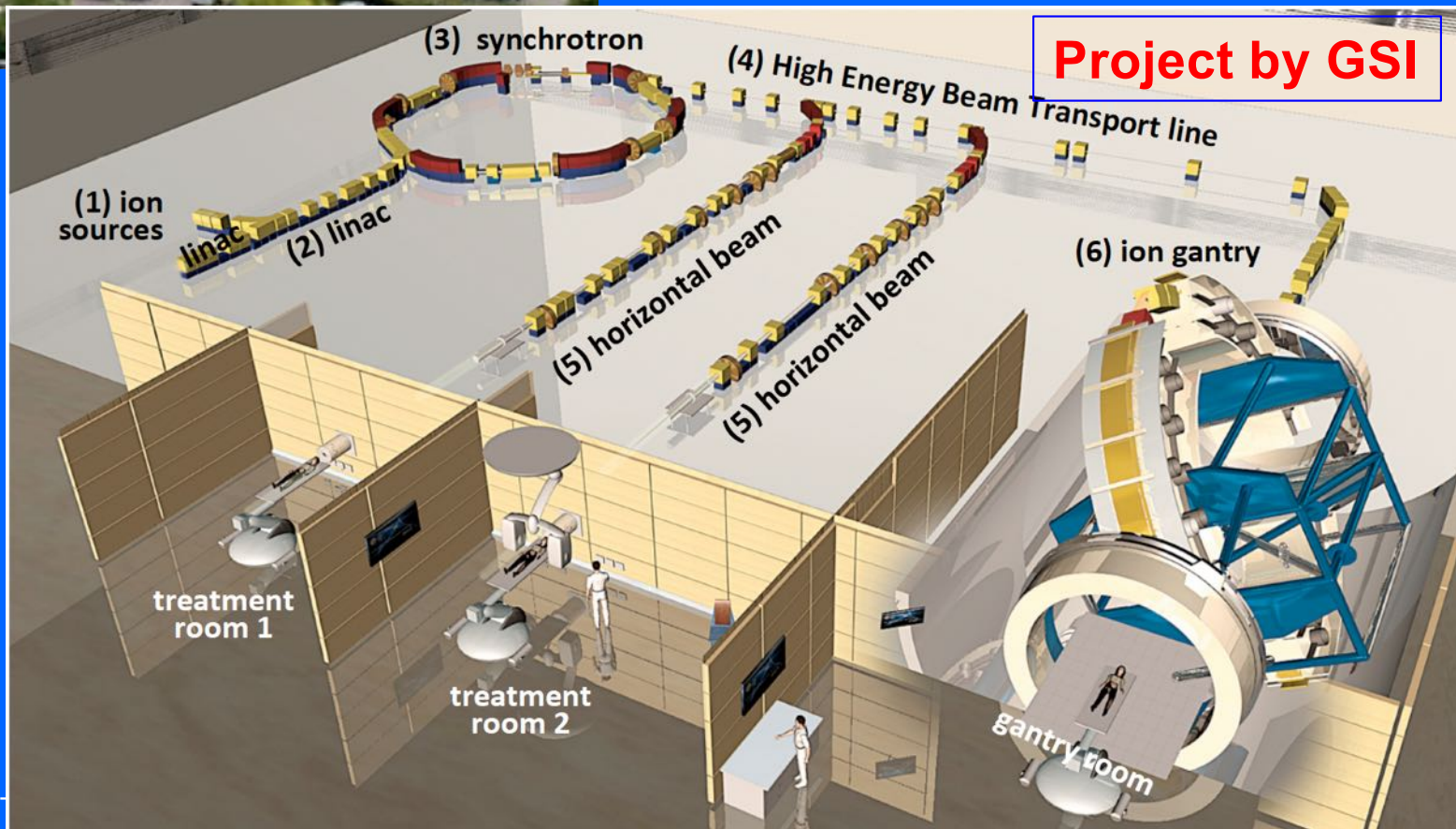


**STRICT COLLABORATIONS  
WITH COMPANIES MITSUBISHI,  
HITACHI, TOSHIBA**

- ❑ Heavy ion radiotherapy is under operation at **Gunma** University
- ❑ Heavy Ion Medical Center, **Hyogo** Ion Beam Medical Center
- ❑ **Kyushu** International Heavy Ion therapy Center
- ❑ Ion Beam Therapy Center, **Kanagawa** Cancer Center, Osaka
- ❑ Heavy Ion Therapy Center, **Saga**

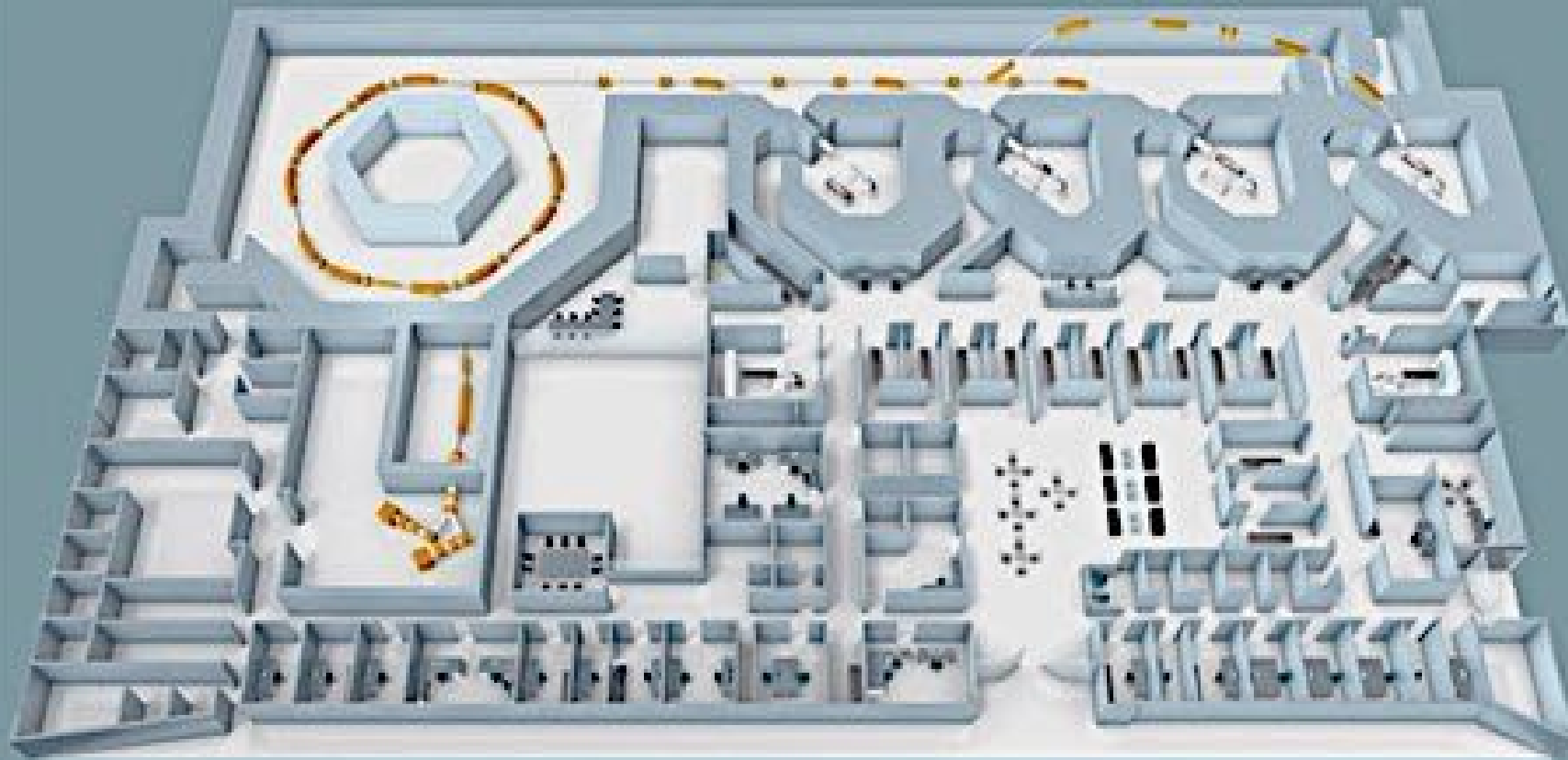
# HIT at Heidelberg University Hospital

Medical Director: Jürgen Debus  
Technical director: Thomas Haberer



# MIT-Marburg carbon ion and proton dual center

Built by Siemens Medical

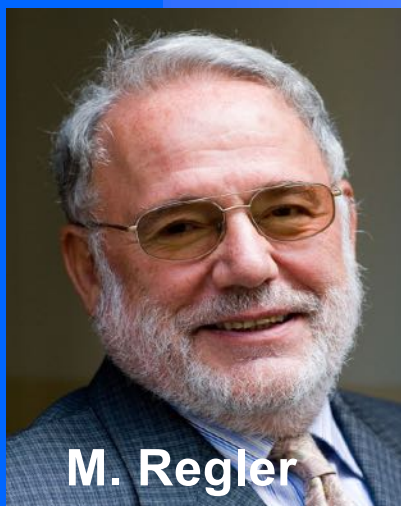


**THIS COURSE: Marburg Facility**  
Speaker: Kilian Baumann



1995

*In 1995 UA – P. Bryant – M. Regler convinced CERN to start Proton Ion Medical Machine Study, PIMMS*



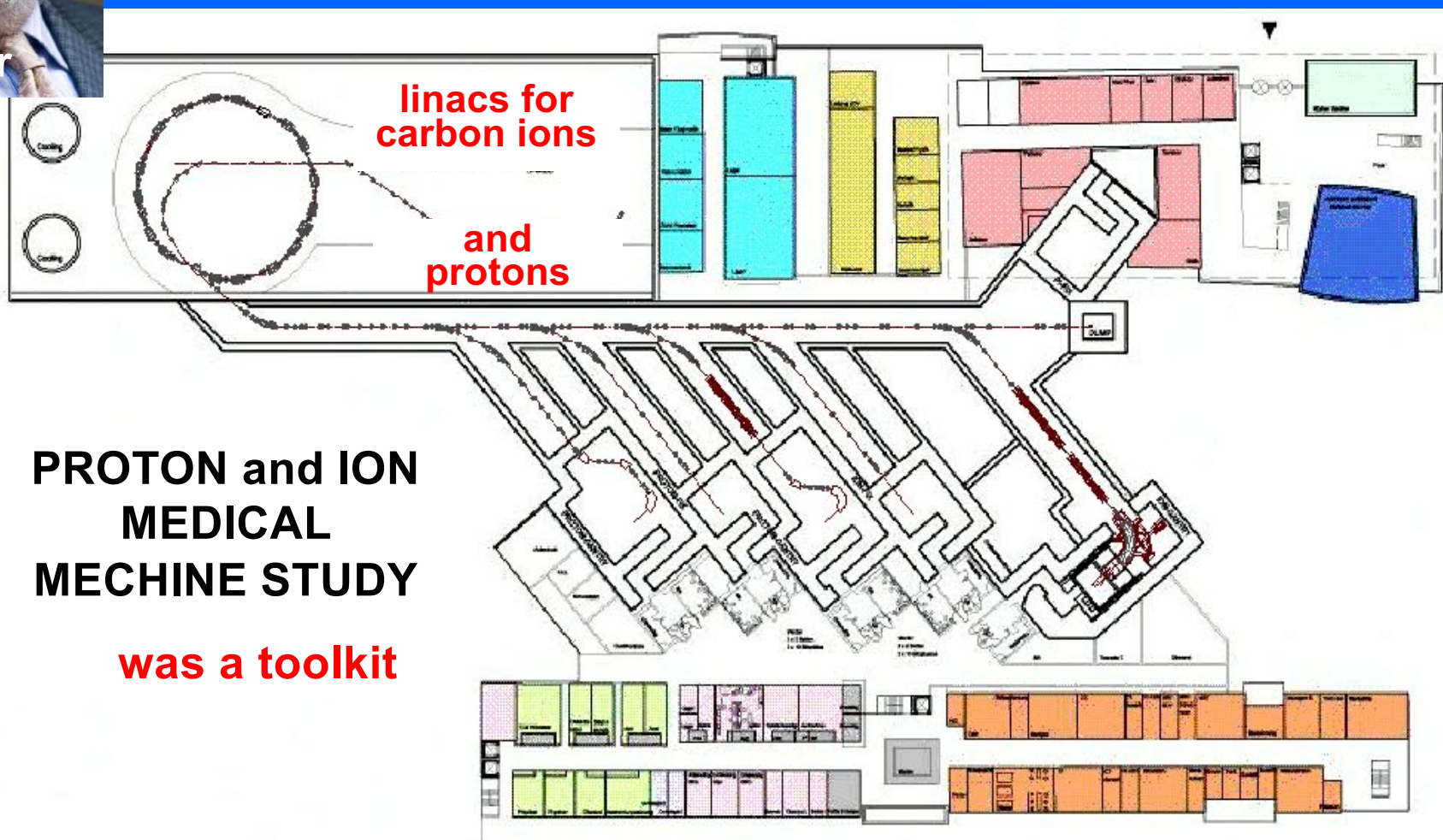
M. Regler

PL: Phil Bryant

-

PAC chair: Giorgio Brianti

Contributors: **CERN -TERA Foundation - MedAustron**

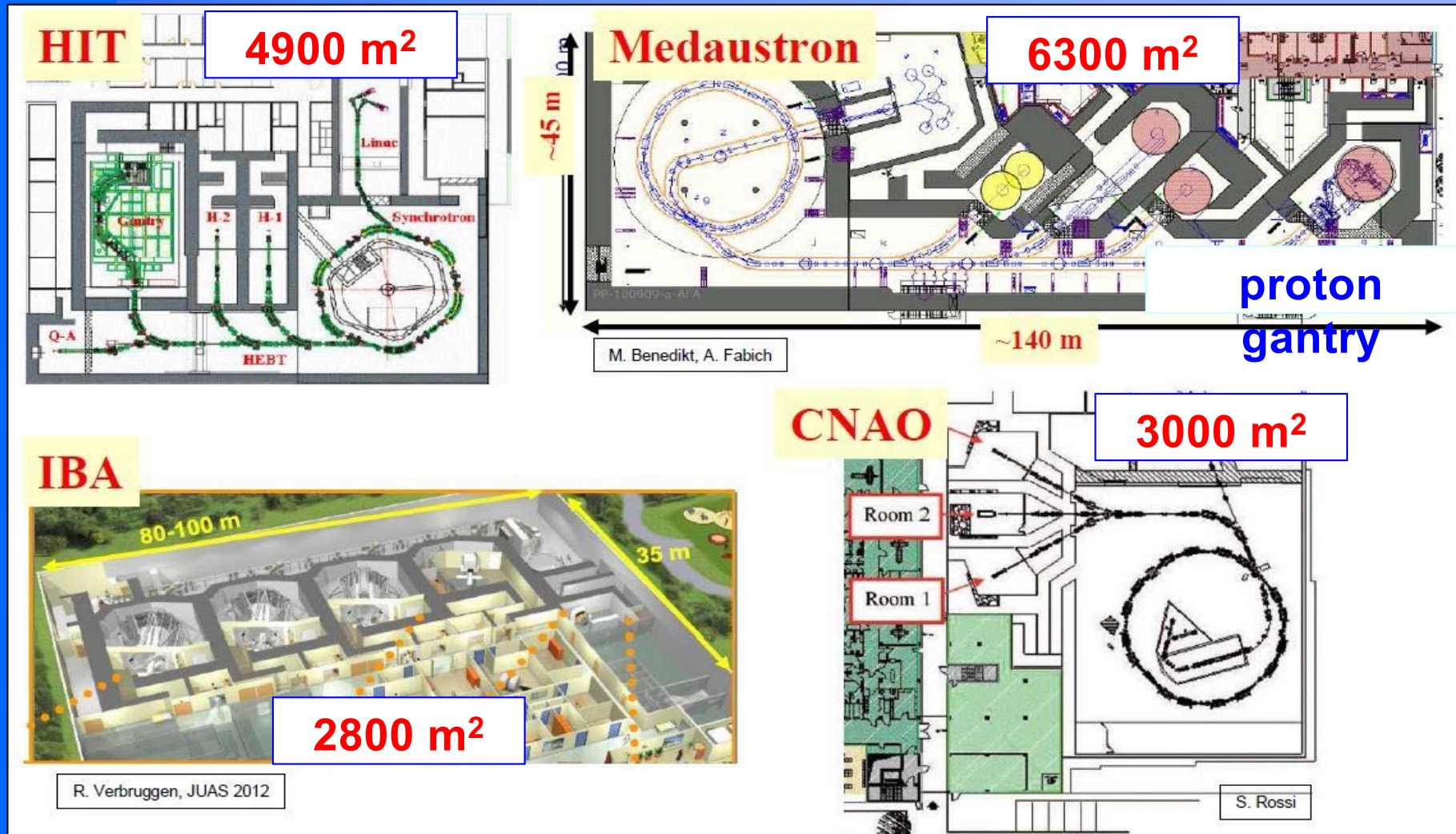


**PROTON and ION  
MEDICAL  
MACHINE STUDY**

**was a toolkit**



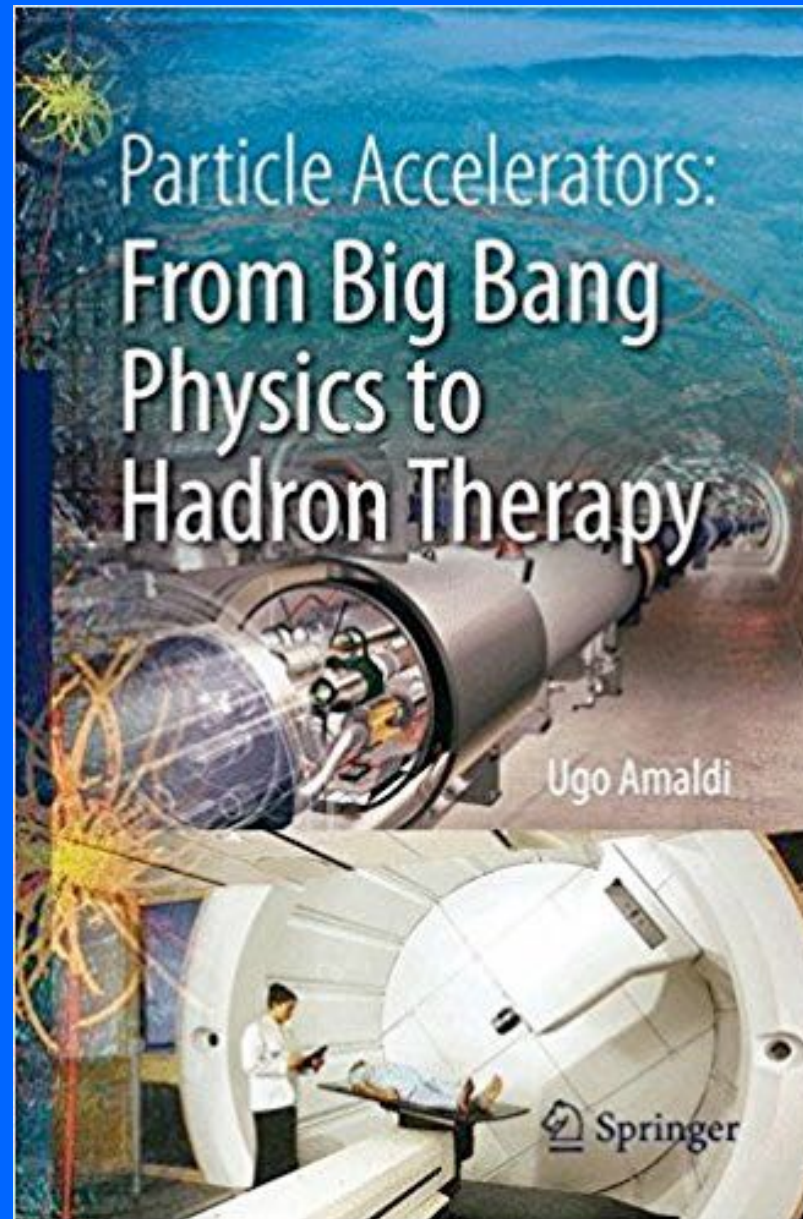
# From PIMMS: CNAO and MedAustron



Thomas Haberer: comparison of four facilities

**THIS COURSE:** Introduction to MedAustron facility  
**Speaker:** Dr Thomas Schreiner (MedAustron)

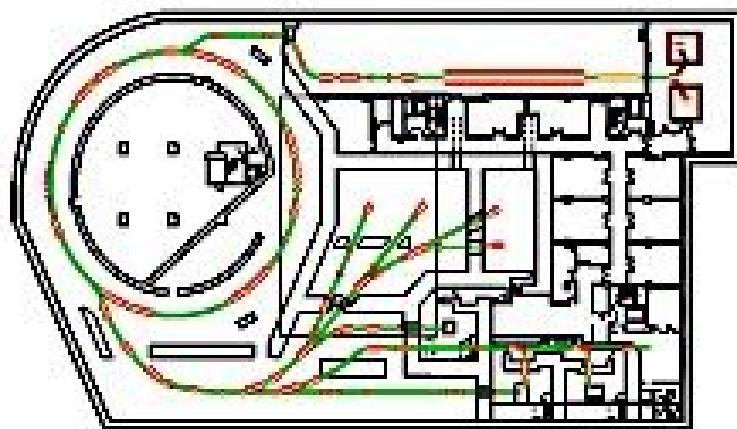
***To know more about the history of hadron therapy***



***Current challenges of light ion therapy***  
***A. Compactnes: superconducting magnets, as for p***  
***B. FLASH Radiotherapy***  
***(C. Multi-ion treatments)***

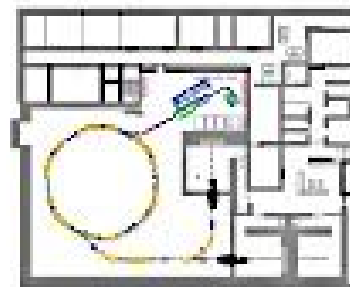
# The Quantum Scalpel Project of QST

The 1st generation

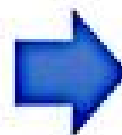


NIRS in 1994  
120×65m

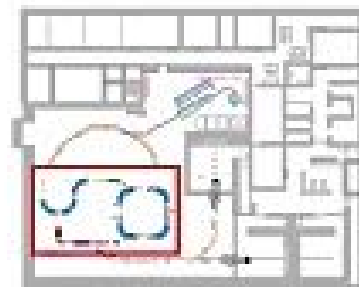
The 2nd & 3rd generation



Gunma Univ. in 2010  
60×50m(1/3)



The 4th generation

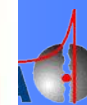
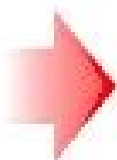


smaller  
25×14m(approximately 1/20)

The 5th generation



smaller and smaller  
10×20m(approximately 1/40)

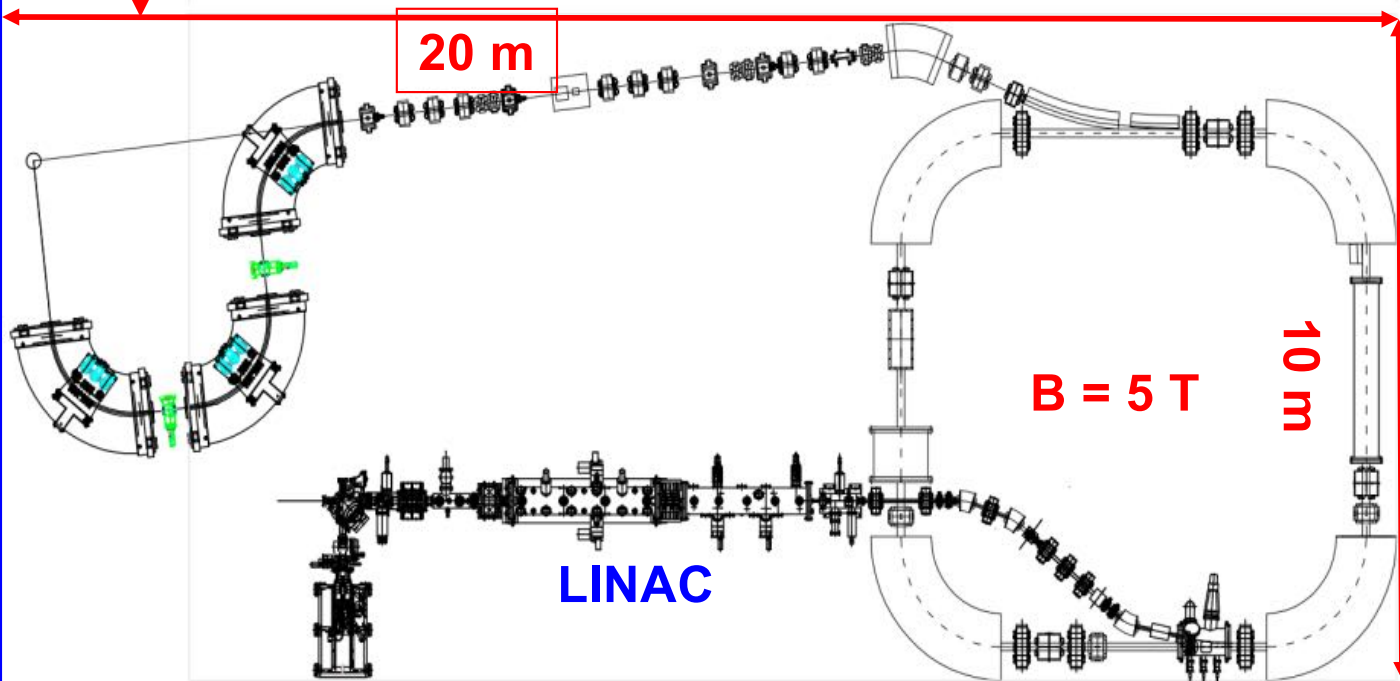
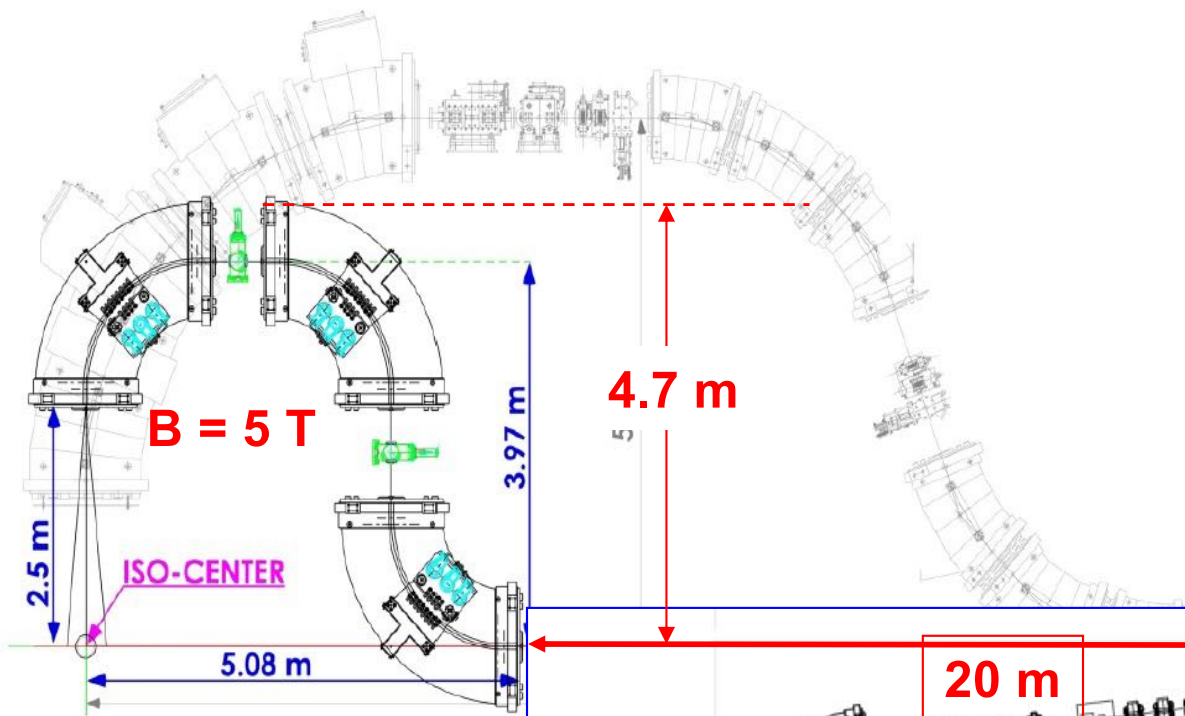




# The Quantum Scalpel project

4<sup>th</sup> generation heavy-ion therapy machine

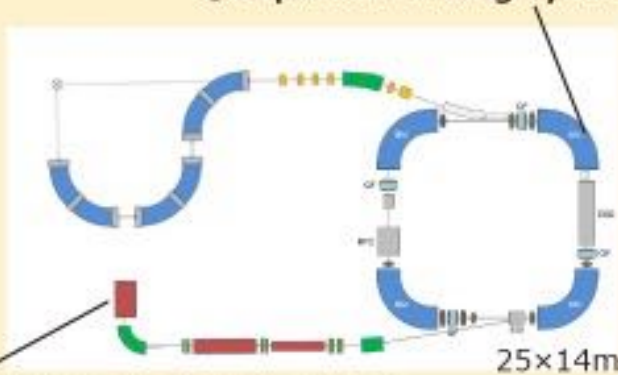
Ongoing



Worldwide !  
Whenever,  
Wherever, Whoever

### The 4th generation

① Superconducting synchrotron



② Multi-ion irradiation system

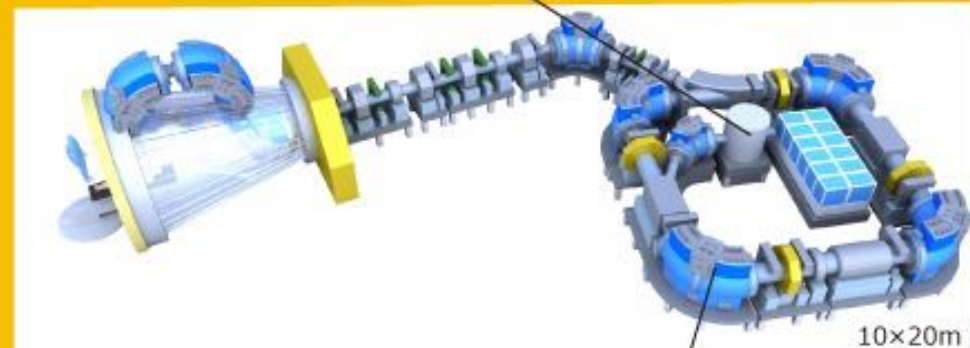
Upgrading  
from  
the 4th generation

### The 5th generation

② Multi-ion irradiation system

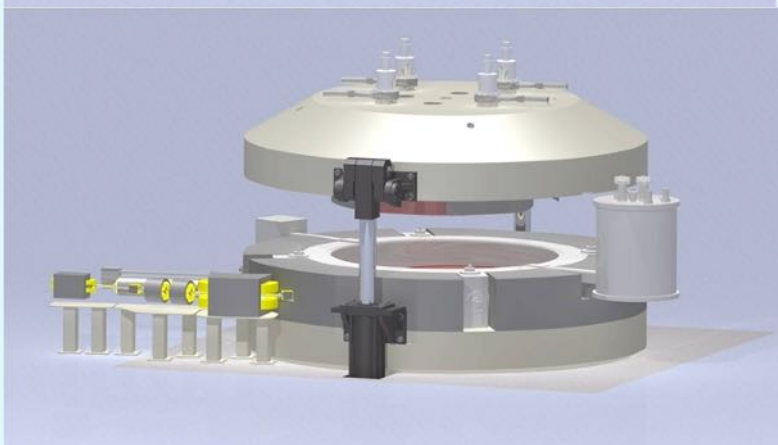
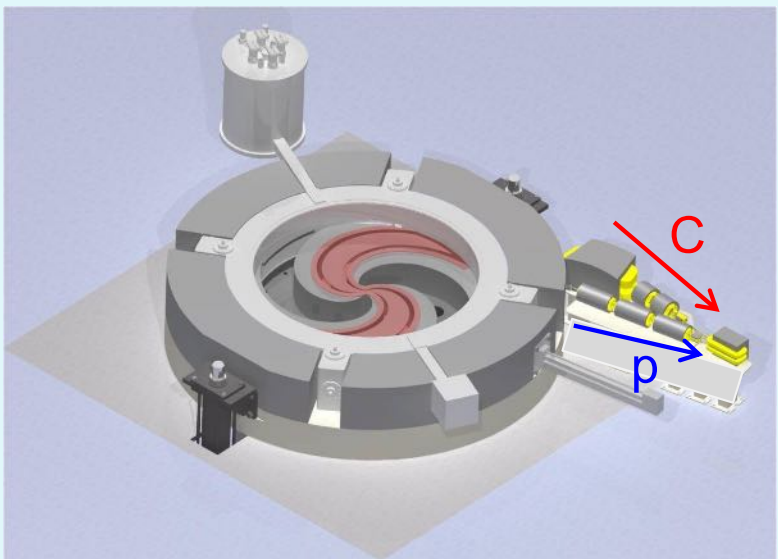
+

③ Injector with laser acceleration technology

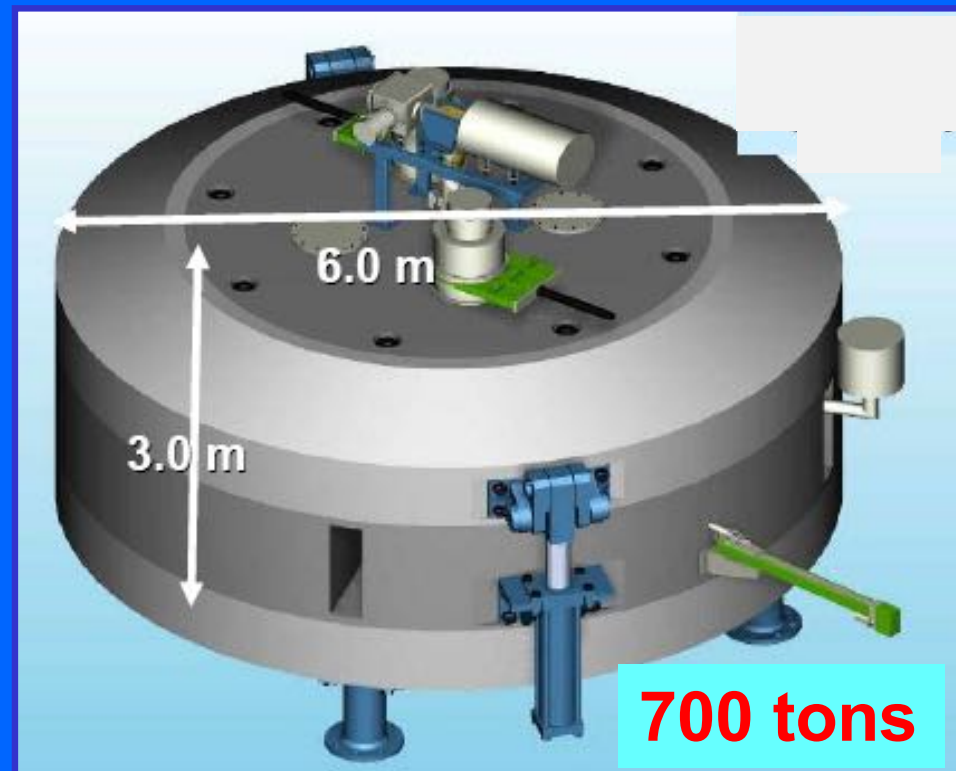


① Superconducting synchrotron

***In Europe: IBA Superconducting cyclotron for carbon ions, helium ions and protons***

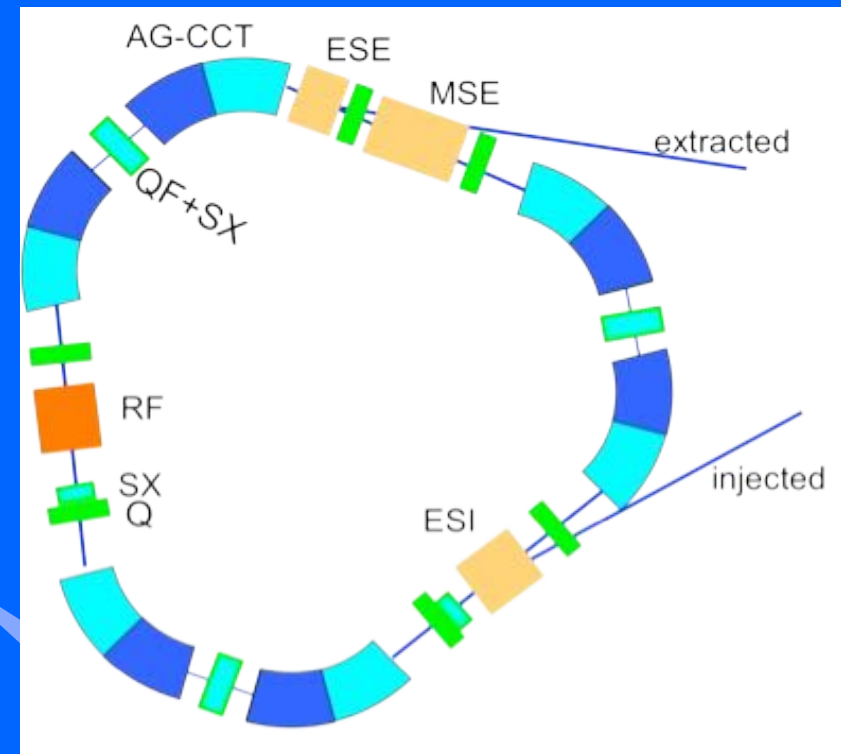
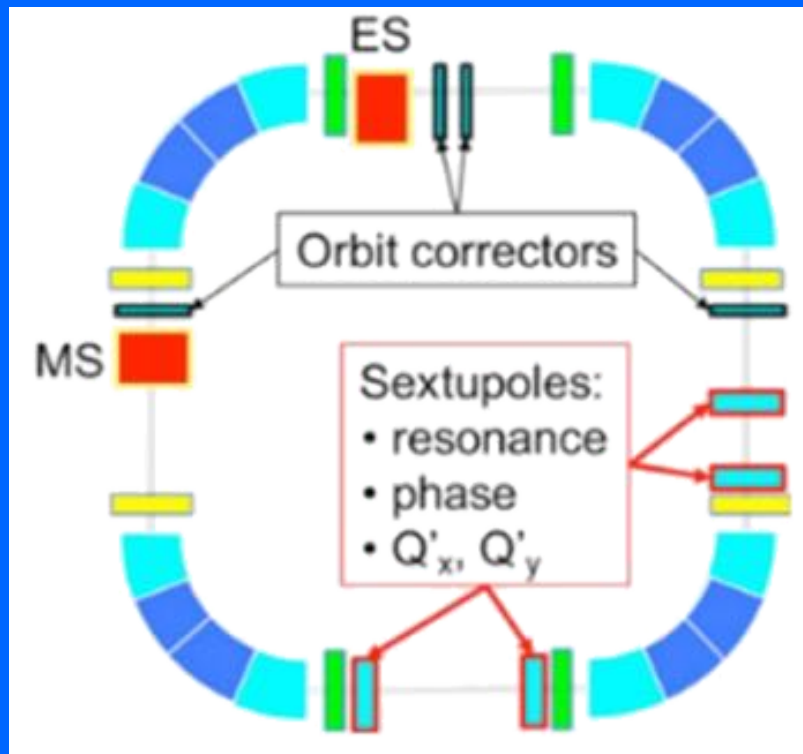


IBA C400 Cyclotron :  
400MeV/u carbon , 265 MeV p  
( $B_c = 4.5 \text{ T}$ )



**ARCHADE project in  
Caen, France**

# *In Europe: NIMMS (M. Vretenar) at the centre of many new developments, in particular SEEIIST*



## Two layouts of superconducting ion synchrotrons + superconducting gantries

**THIS COURSE: NIMMS-SEEIIST Design**

**Speakers:** Elena Benedetto (SEEIIST Association (CH))

Mariusz Sapinski (Paul Scherrer Institute (CH))

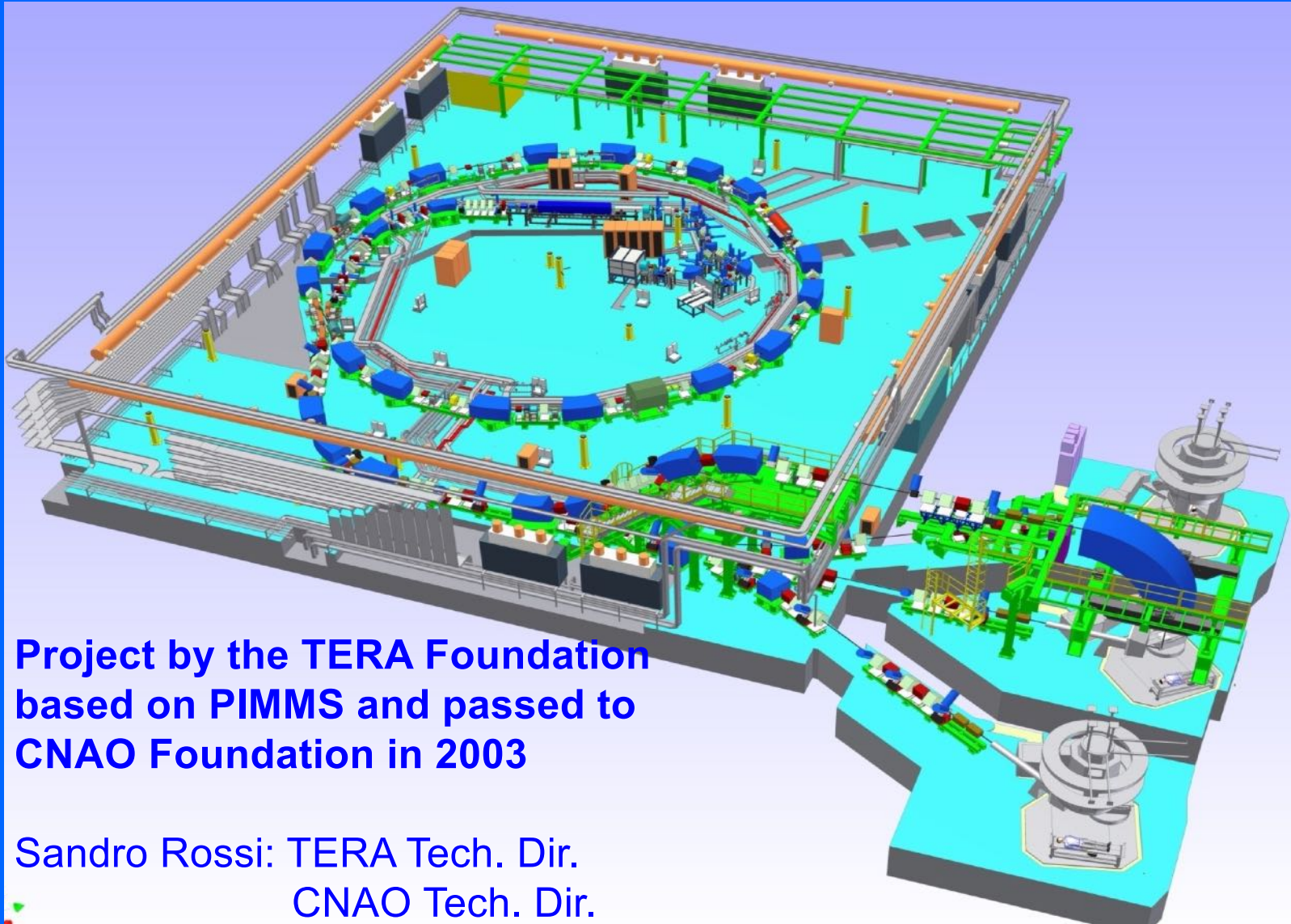


***The three offsprings of TERA Founndation  
(born in Novara on September 15,1992)***

***The three offsprings of TERA Founndation  
(created in Novara on September 15,1992)***

**Symposiun for the 30 years of TERA  
CERN Council Chamber  
15 September 2022**

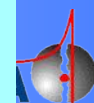
# 1. Present layout of CNAO (Pavia)



**Project by the TERA Foundation  
based on PIMMS and passed to  
CNAO Foundation in 2003**

Sandro Rossi: TERA Tech. Dir.  
CNAO Tech. Dir.

**THIS COURSE: CNAO virtual visit - physics-biology**  
**Speakers: Dr Angelica Facchetti (CNAO),  
Dr Marco Pullia (CNAO)**

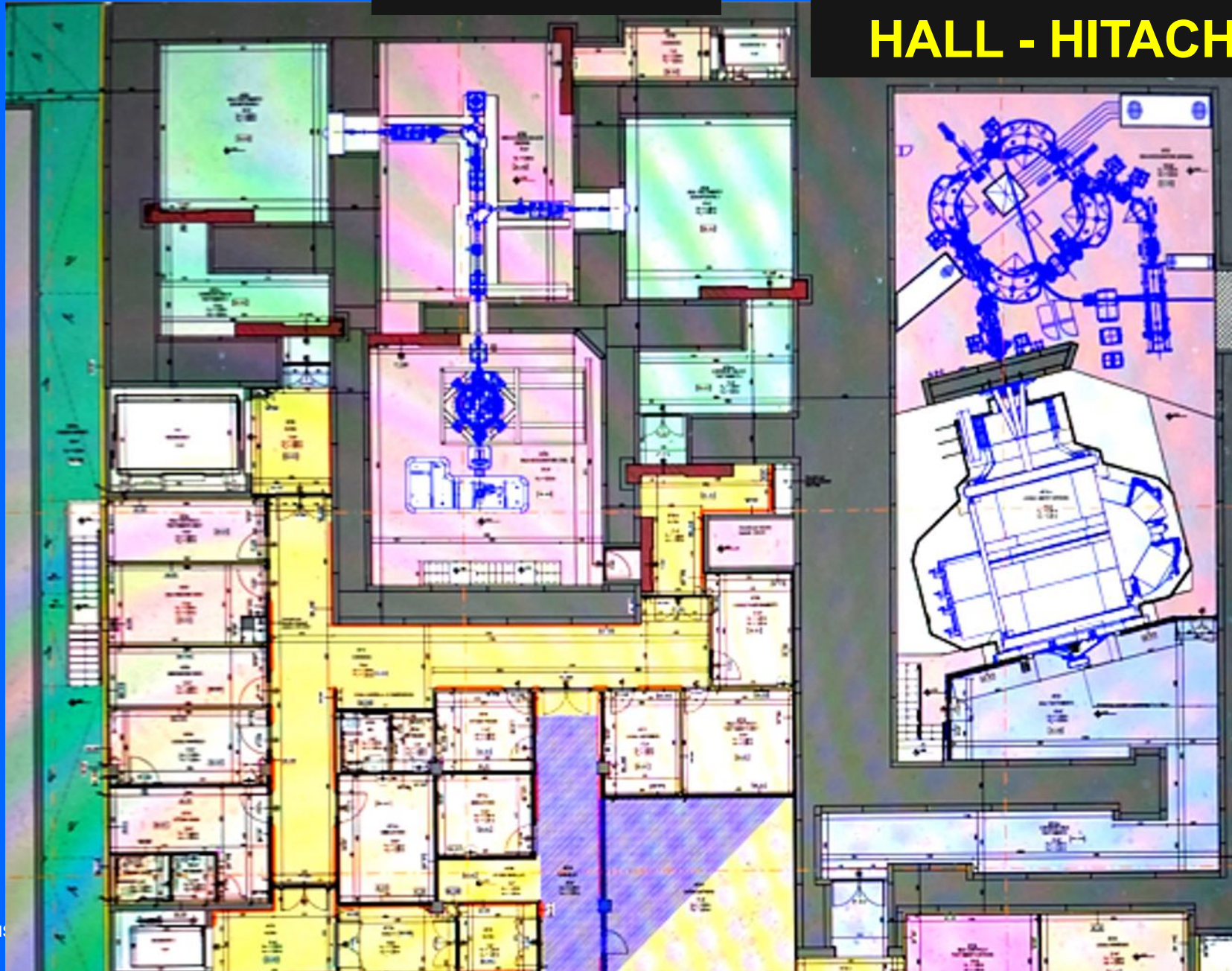




*Extension program of CNAO*

**2 BNCT halls**

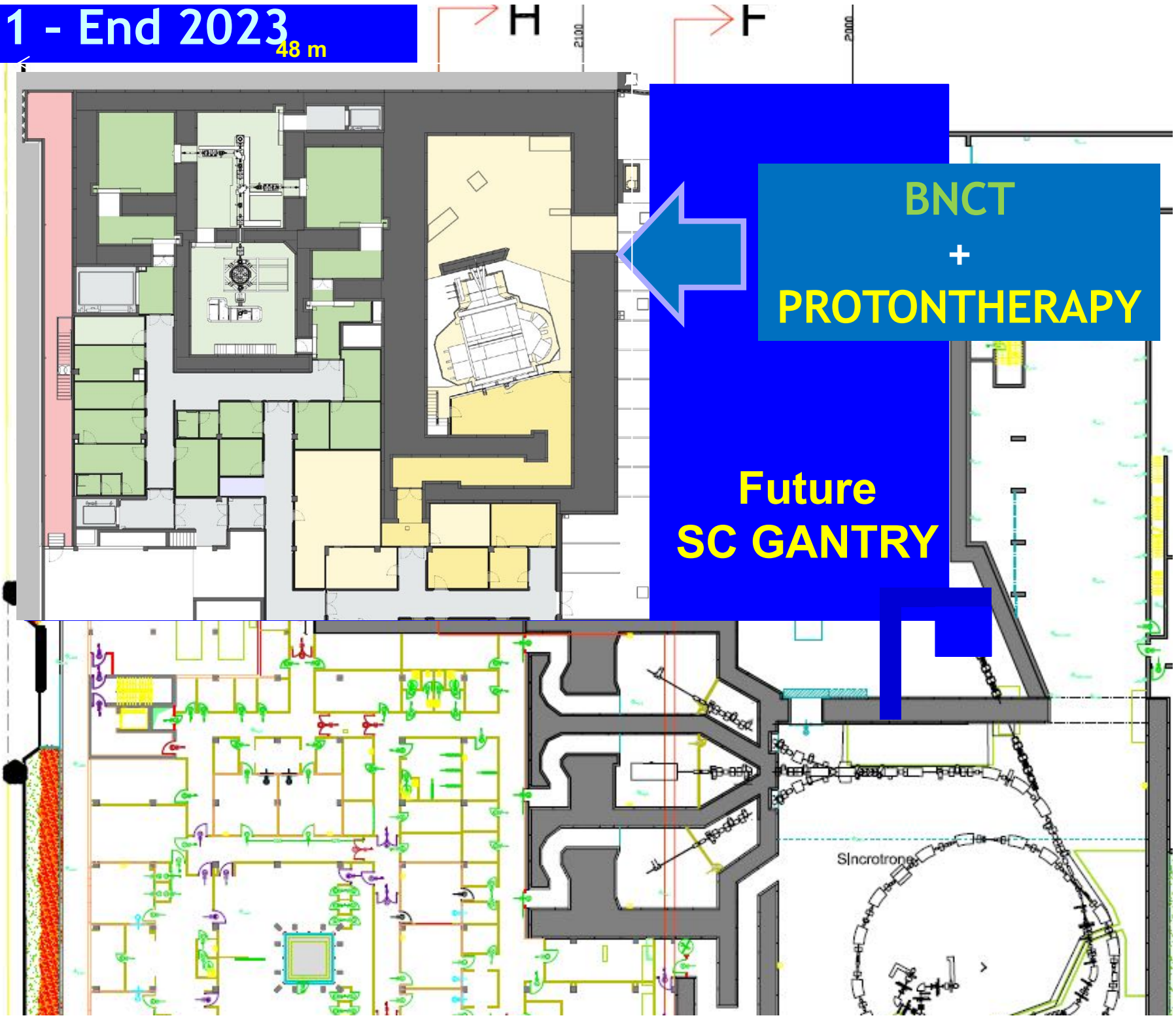
**PROTON THERAPY  
HALL - HITACHI**



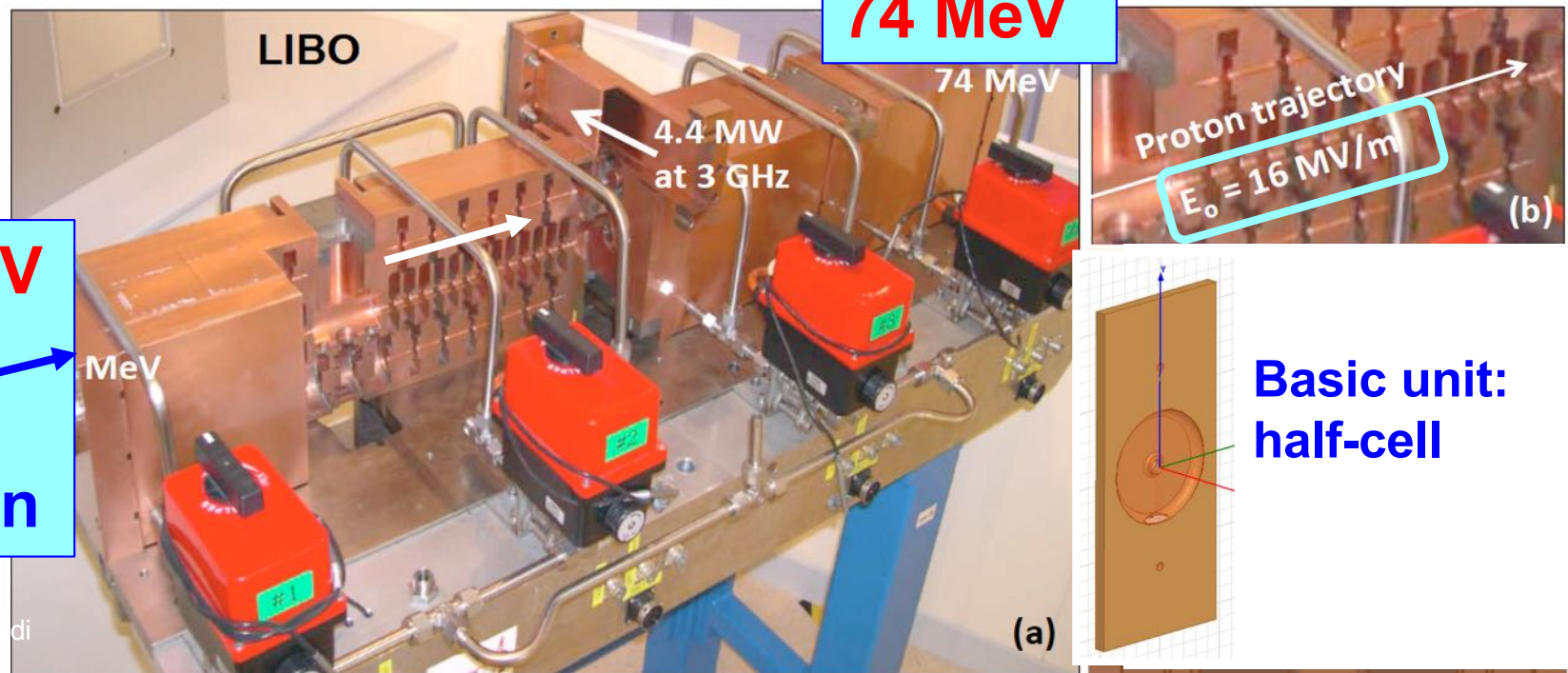
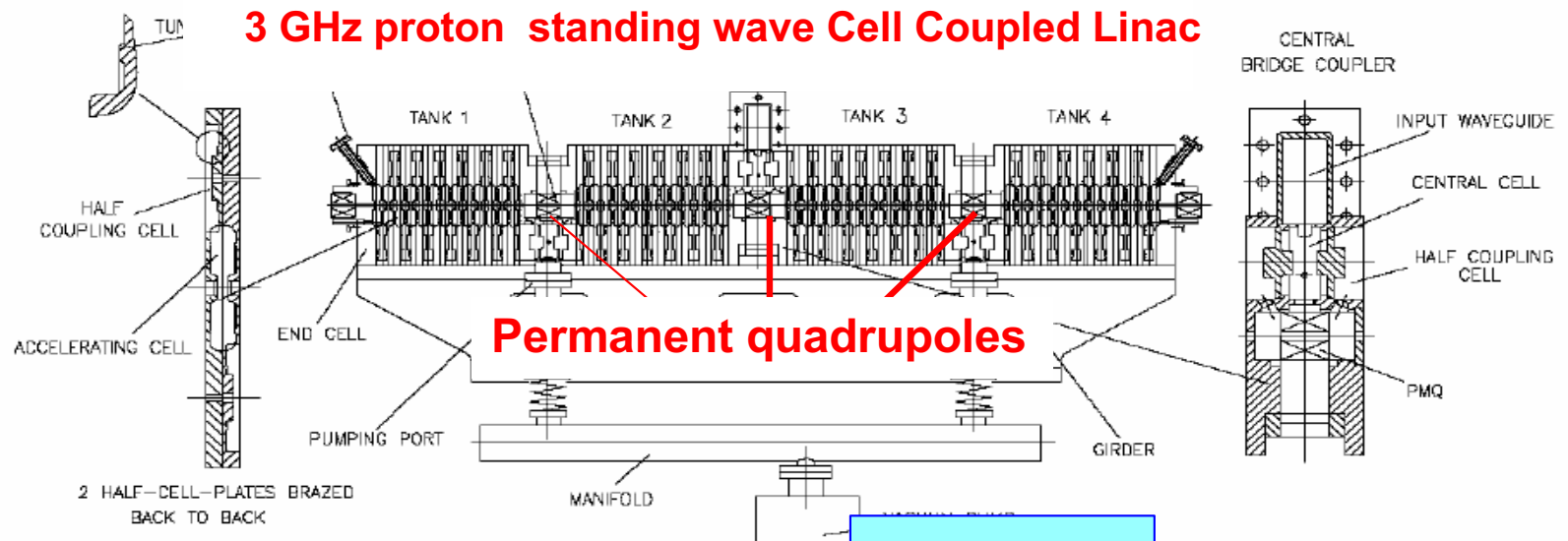


# Level -1 - End 2023

48 m



# LIBO=Scientific prototype built and beam tested by TERA-CERN-INFN – The first “cyc-linac”

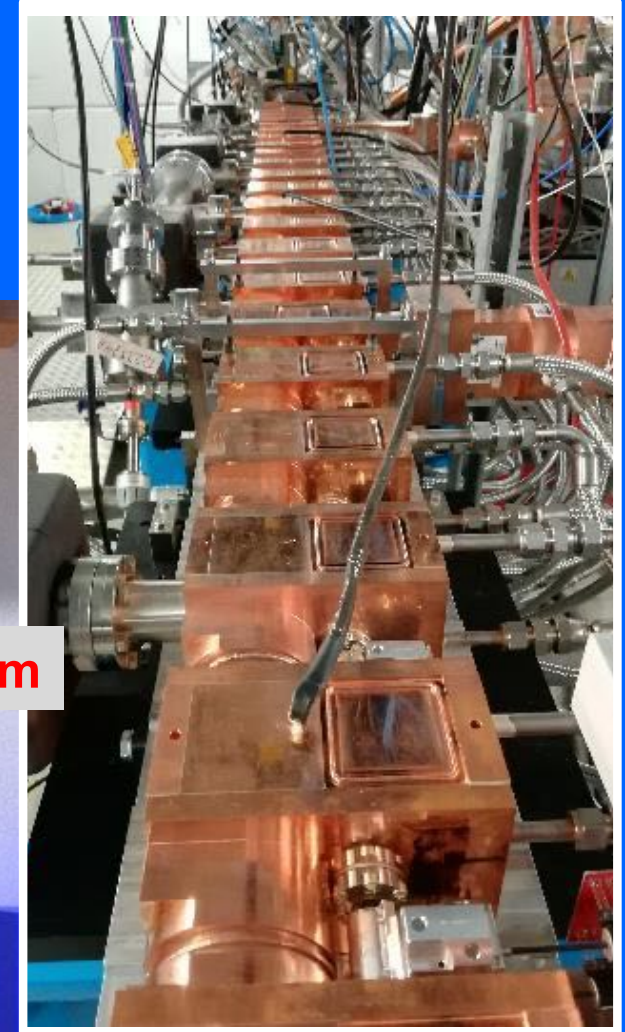


**62 MeV**  
**Catania**  
**SC cyclotron**



# ADAM start-up created in 2008 and bought by AVO in 2013

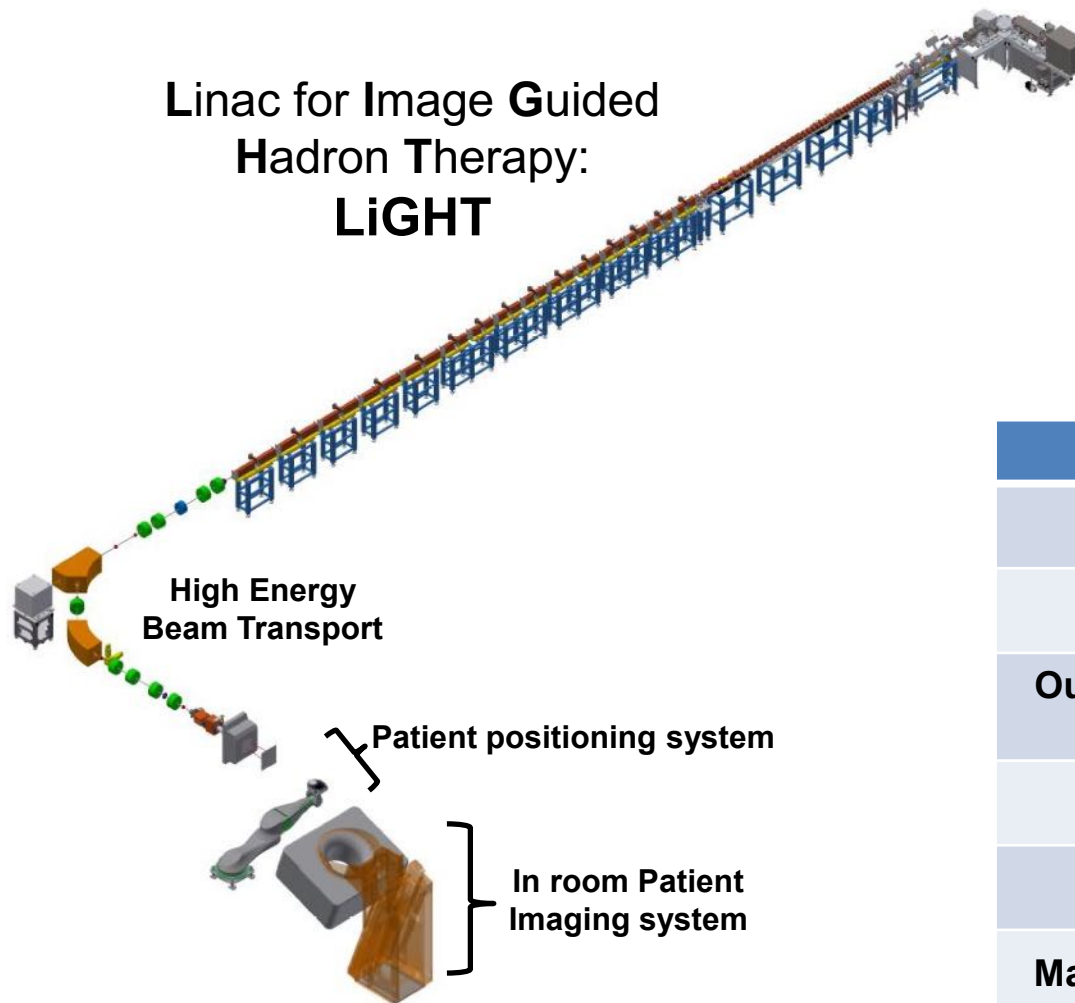
In a CERN bunker AVO-ADAM has accelerated protons to 52 MeV



Integration:	Source	RFQ	SCDTL1	SCDTL 2	SCDTL3	SCDTL4	CCL1-2
B. energy:	40 keV	5 MeV	7.5 MeV	16 MeV	26.5 MeV	37.5 MeV	52 MeV

# ADAM start-up created in 2008 and bought by AVO in 2013

## Linac for Image Guided Hadron Therapy: **LIGHT**



Parameter	Value	Unit
Length	~25	m
Max. Energy	230	MeV
Output Peak Current (at the end)	0.3 - 40	$\mu\text{A}$
Pulse Length	0.5-2	$\mu\text{s}$
RF Frequency	2997.92	MHz
Max. Repetition Rate	200	Hz

**THIS COURSE: ADAM and LIGHT**  
**Speaker: Alberto Degiovanni (ADAM)**



### ***3. EBA-Med: start-up for proton therapy of cardiac arrhythmias***

EBA-Med develops **Cardio-kit** to enable non-invasive heart motion ultrasound imaging and real-time synchronization of the proton therapeutic beam produced by commercial proton therapy systems.

### 3. *EBA-Med: start-up for proton therapy of cardiac arrhythmias*

EBA-Med develops **Cardio-kit** to enable non-invasive heart motion ultrasound imaging and real-time synchronization of the proton therapeutic beam produced by commercial proton therapy systems.



**External Beam Ablation will substitute the invasive catheter ablation technique**

**THIS COURSE: External Beam Ablation Medical Devices**  
**Speaker: Adriano Garonna (EBAMed)**



# CNAO at Pavia

**PHYSICS IS BEAUTIFUL AND USEFUL**

**Physik ist schön und nützlich**

**La physique est belle et utile**

**La fisica è bella e utile**





This material was prepared and presented within the HITRIplus **Specialised Course on Heavy Ion Therapy Research**, and it is intended for personal educational purposes to help students; people interested in using any of the material for any other purposes (such as other lectures, courses etc.) are requested to please contact the authors  
Ugo Amaldi – [ugo.amaldi@cern.ch](mailto:ugo.amaldi@cern.ch)