From (Particle) Physics to Medical Applications

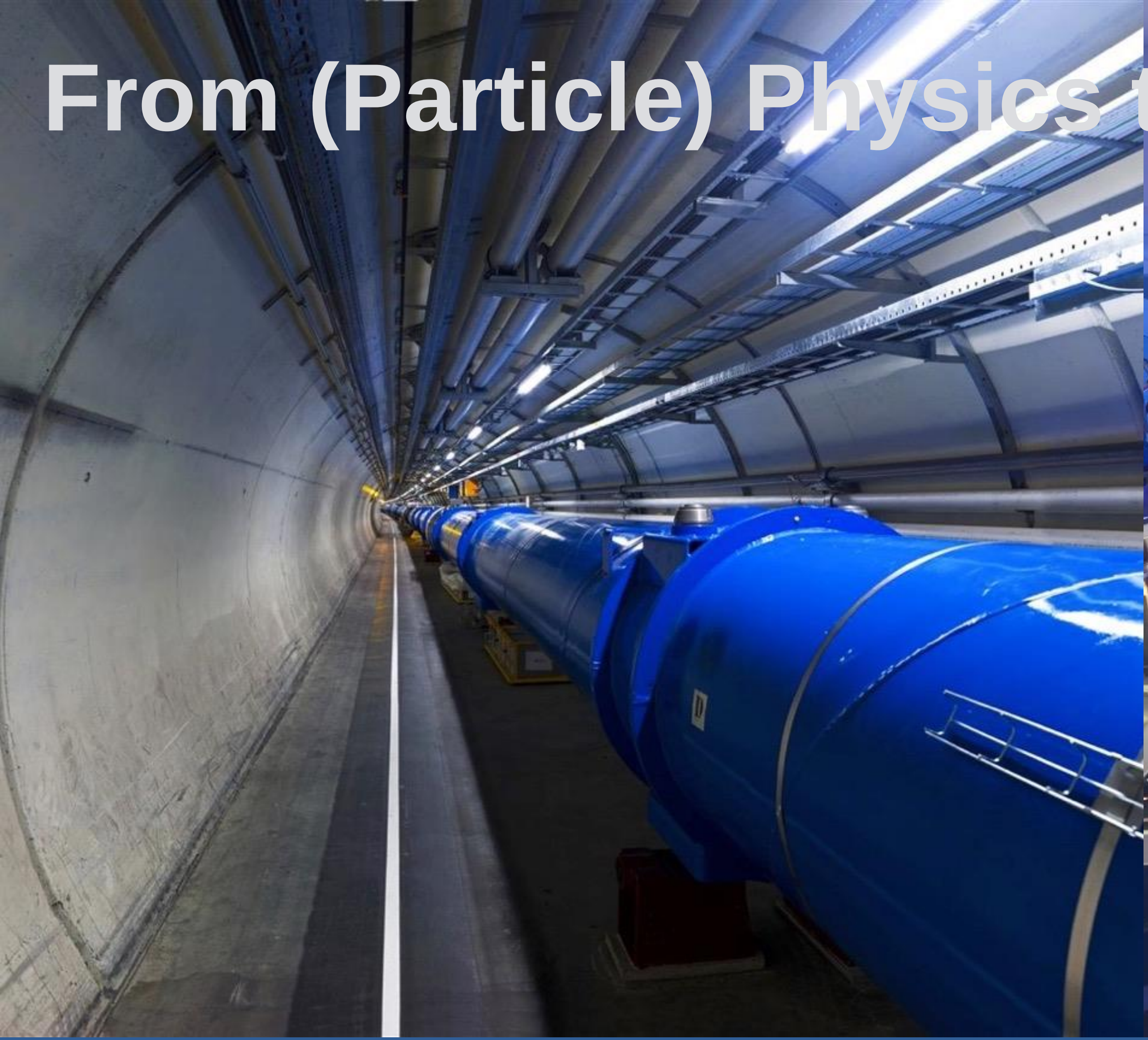


Photo: CNAO treatment room

Manuela Cirilli
Medical Applications Adviser
CERN Knowledge Transfer group

CERN Knowledge Transfer
Accelerating Innovation

Disclaimer(s) & Acknowledgments

Of course, I had to select the material to be included.
And of course, Physics ≠ HEP (but a lot of HEP here, and a lot of CERN examples).

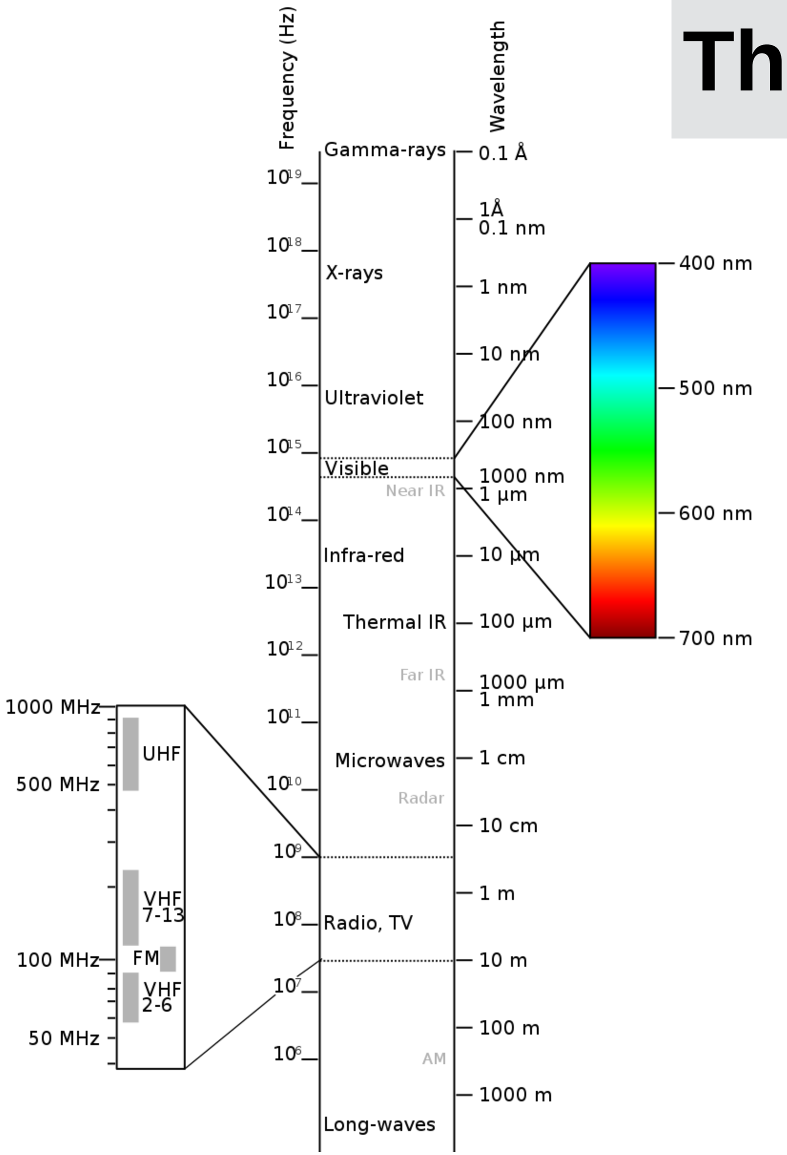
The CERN medical applications-related projects presented in this talk are realized by the CERN scientists and engineers: without their skills, ingenuity, and dedication, there would be no knowledge to transfer! Some names are acknowledged on the respective slides, but there are many more.

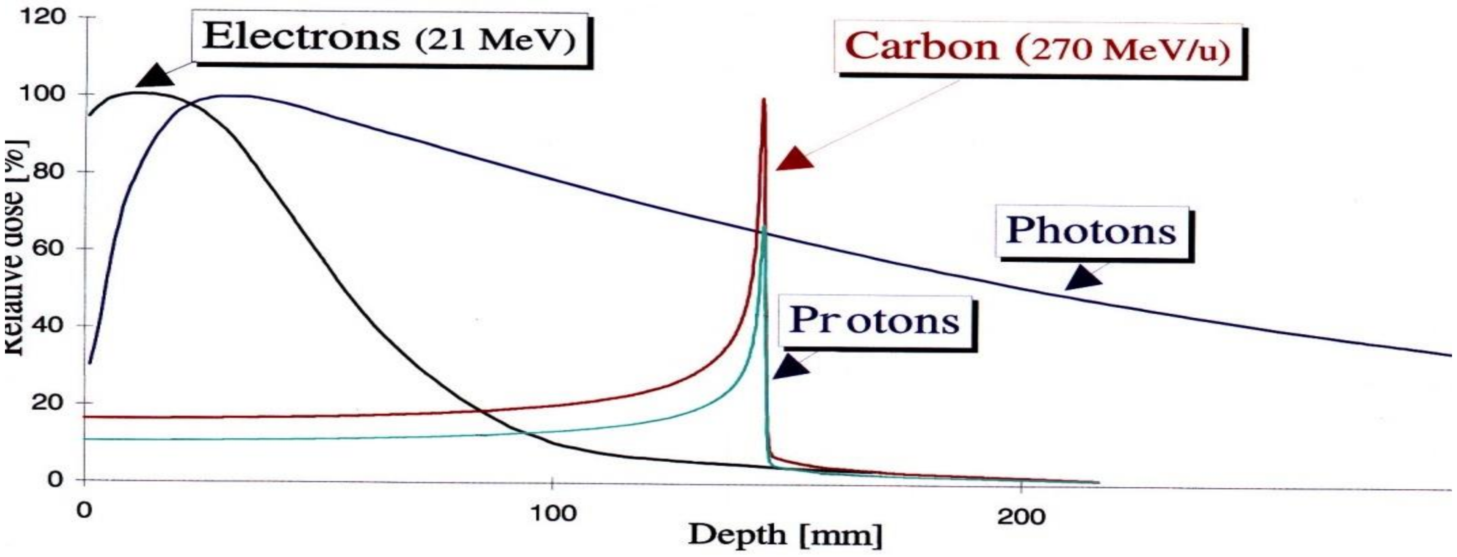
The KT group and myself are privileged to have the opportunity to support these projects in a tailored way, and to help bridge the gap between CERN technologies and society.

Many thanks to all the colleagues from CERN, CNAO, CHUV, GSI, MedAustron, INFN, TERA who have shared their material and wisdom with me; thanks to Ugo Amaldi and Manjit Dosanjh, from whom I first learned about hadron therapy.

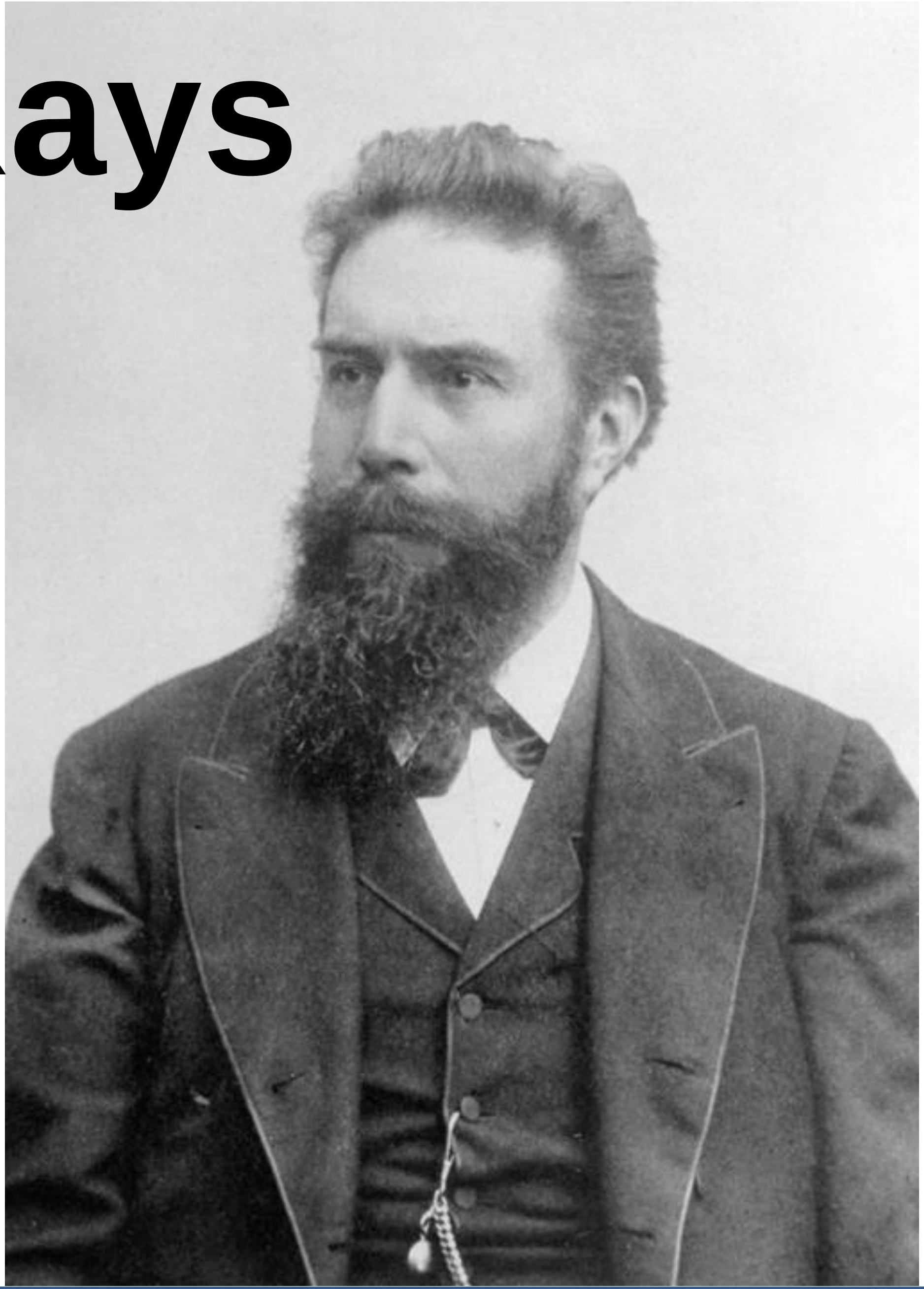
I am neither a doctor, nor a medical physicist, nor a technical expert in most of the technologies I present, so let's see how many of your questions I'm able to answer! ☺

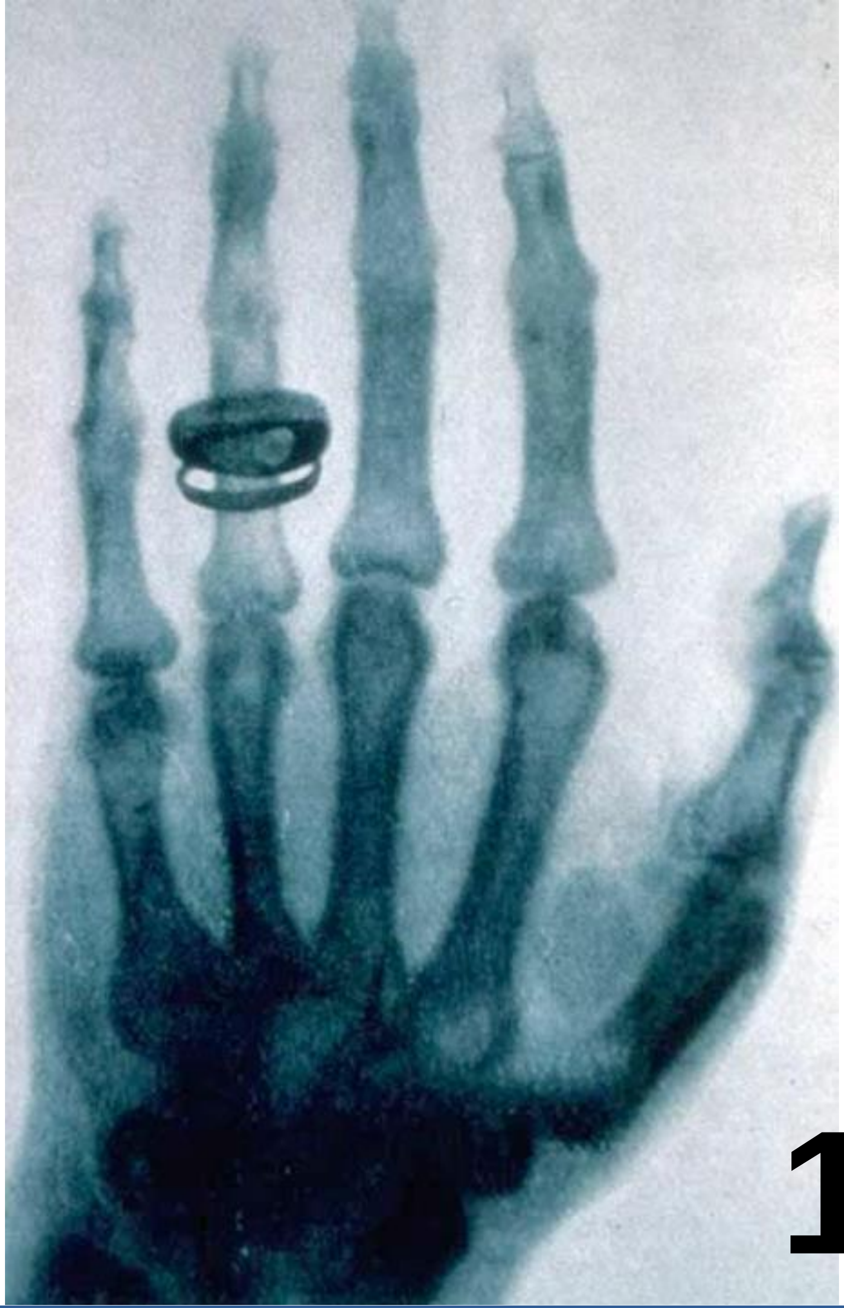
The physics itself



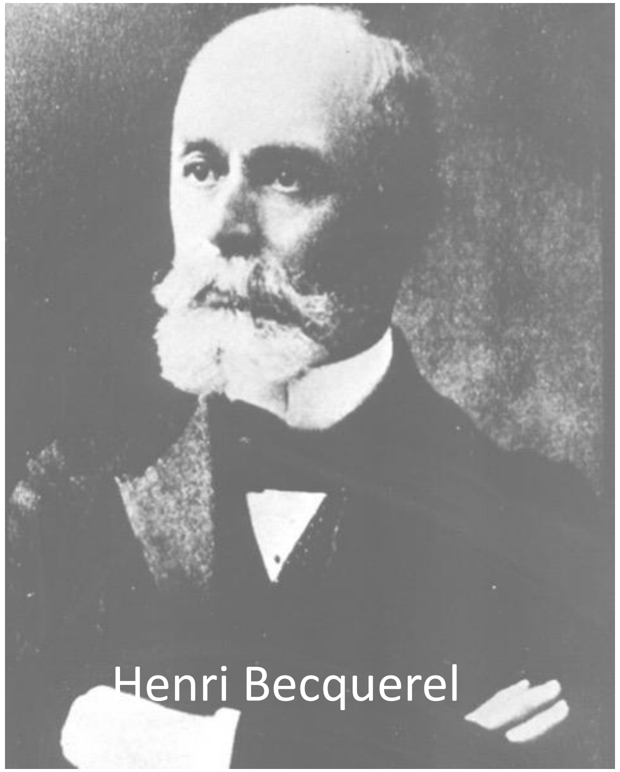


X-Rays





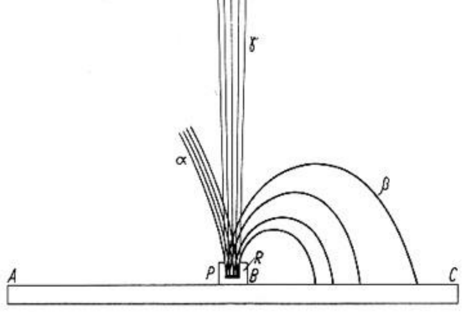
1895



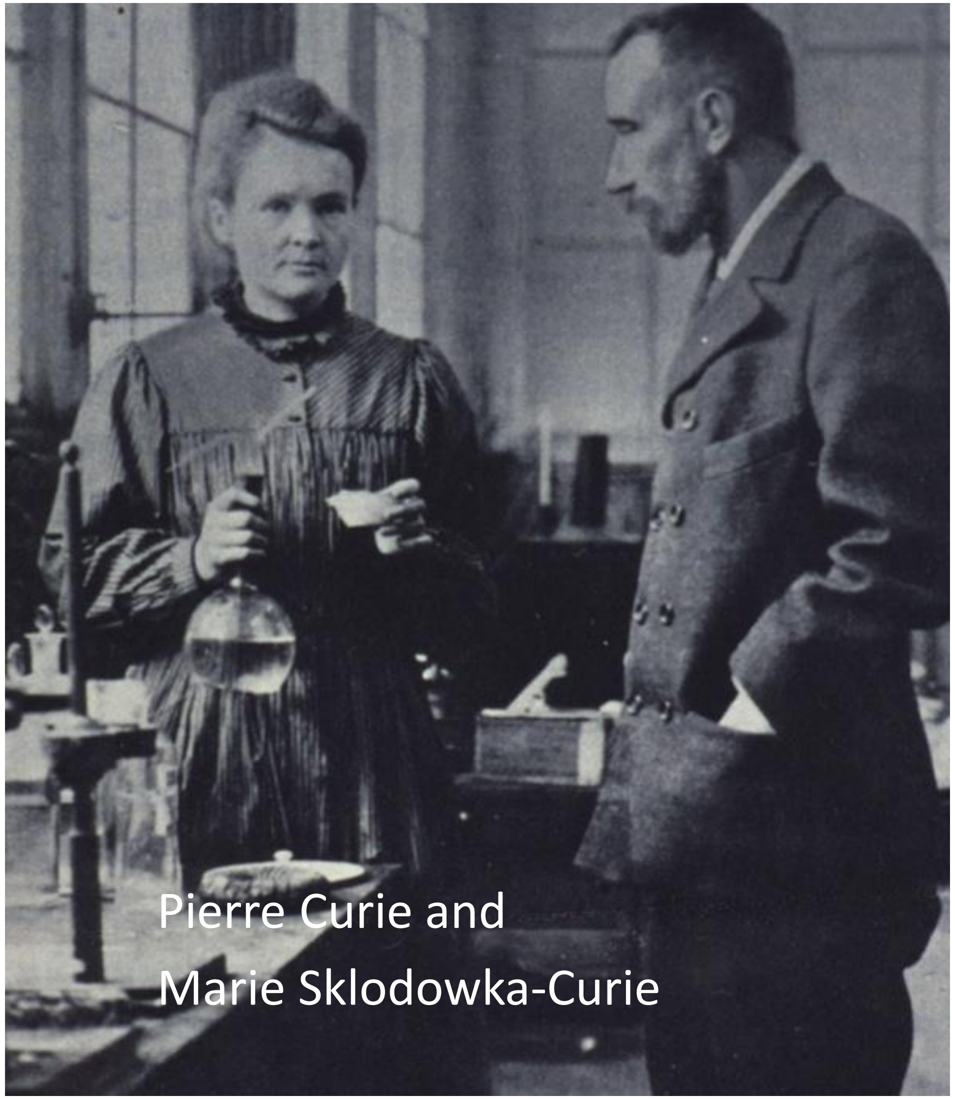
Henri Becquerel

1896: accidental discovery of natural radioactivity

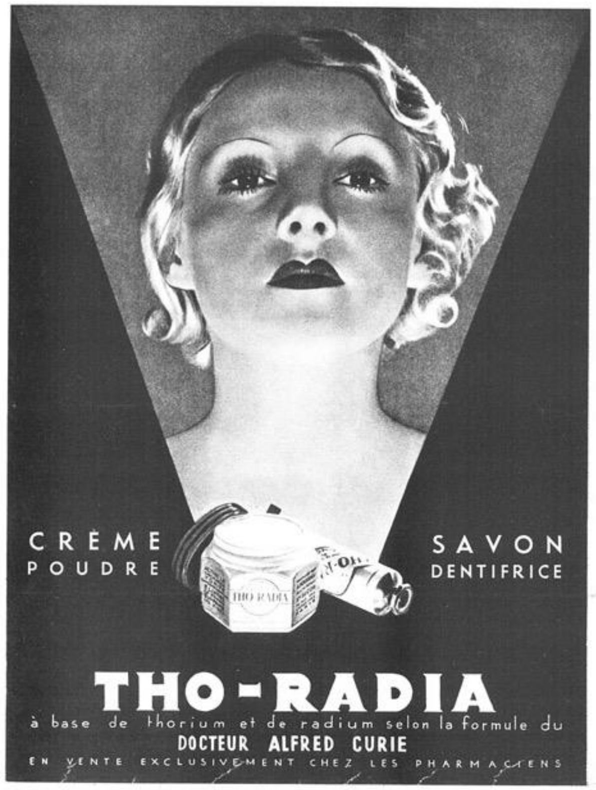
Mme. Curie thesis – 1904
α, β, γ in magnetic field



1898: by studying the strange uranium rays, they soon discovered polonium, thorium, radium



Pierre Curie and
Marie Sklodowka-Curie



Par Cinémagazine, 14 février 1935 — https://gallica.bnf.fr/ark:/12148/bpt6k2000628h, CC BY-SA 4.0, https://commons.wikimedia.org/w/index.php?curid=97956453


12 New York Tribune November 10, 1918

Radium and Beauty

HERE are the first toilet preparations to embody Actual Radium, an astonishing new force for betterment, applied as an aid to Beauty. Learn how the amazing Energy of Radium has proved a boon to the human skin. Learn what Radium actually means to Beauty and how its power is employed in "Radior" Preparations. Study our $5,000 guarantee. Then turn to "Radior" Toilet Requisites. When you have used, enjoyed and tested them you will adopt them as your own first aid to Beauty.

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Write Today for This Vitally Interesting Booklet

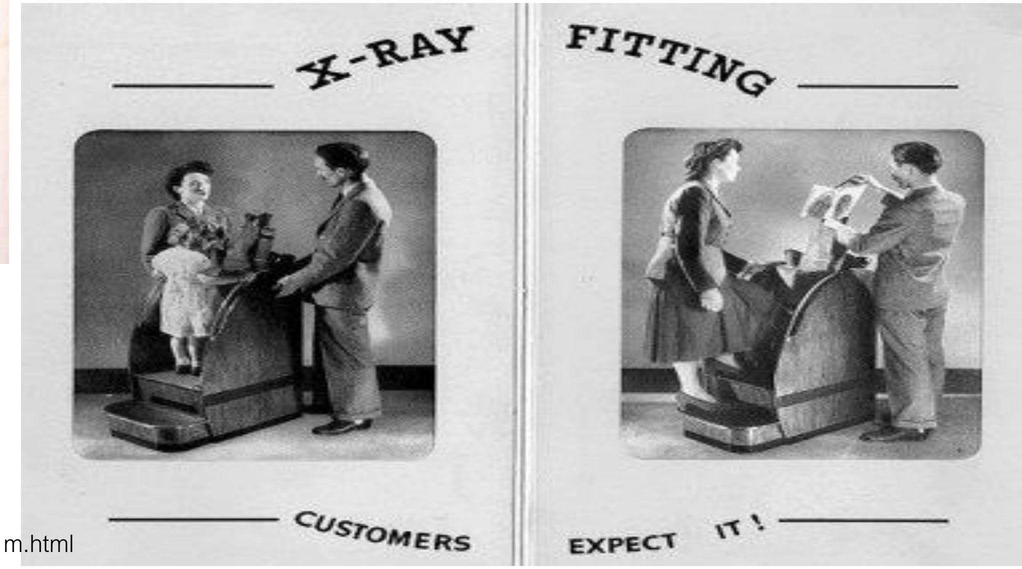
Radior Toilet Requisites

RADIOR TOILET REQUISITES OBTAINABLE AT Leading Department Stores of New York, Brooklyn and Newark and Liggett's Drug Stores

Radior Co., Ltd., of London
235 Fifth Avenue, New York

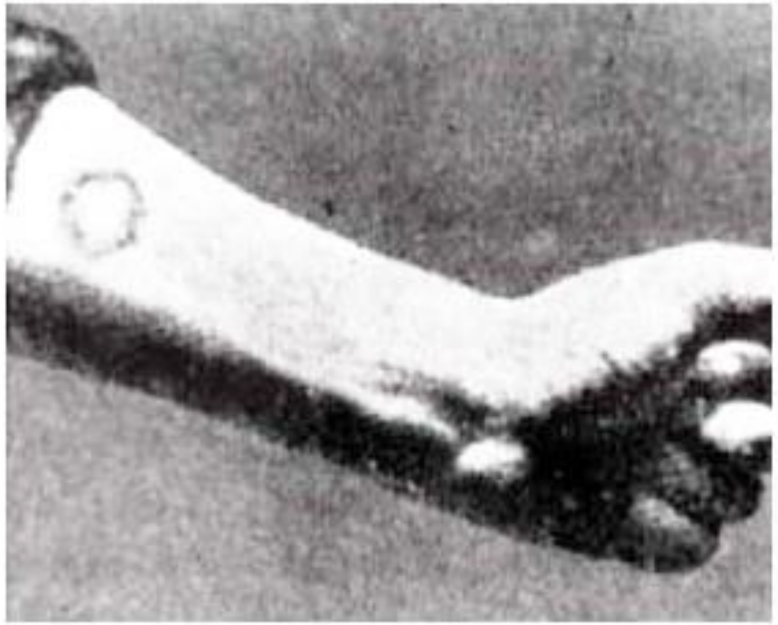
Par Radior cosmetics — sitead New York Tribune Magazine, page 12, Domaine public, https://commons.wikimedia.org/w/index.php?curid=35047170

Par Sam LaRussa from United States of America — Radithor, CC BY-SA 2.0, https://commons.wikimedia.org/w/index.php?curid=57841049



https://www.smh.com.au/national/nsw/from-the-archives-1956-ban-urged-of-x-ray-machines-at-shoe-shops-20210318-p57c1m.html

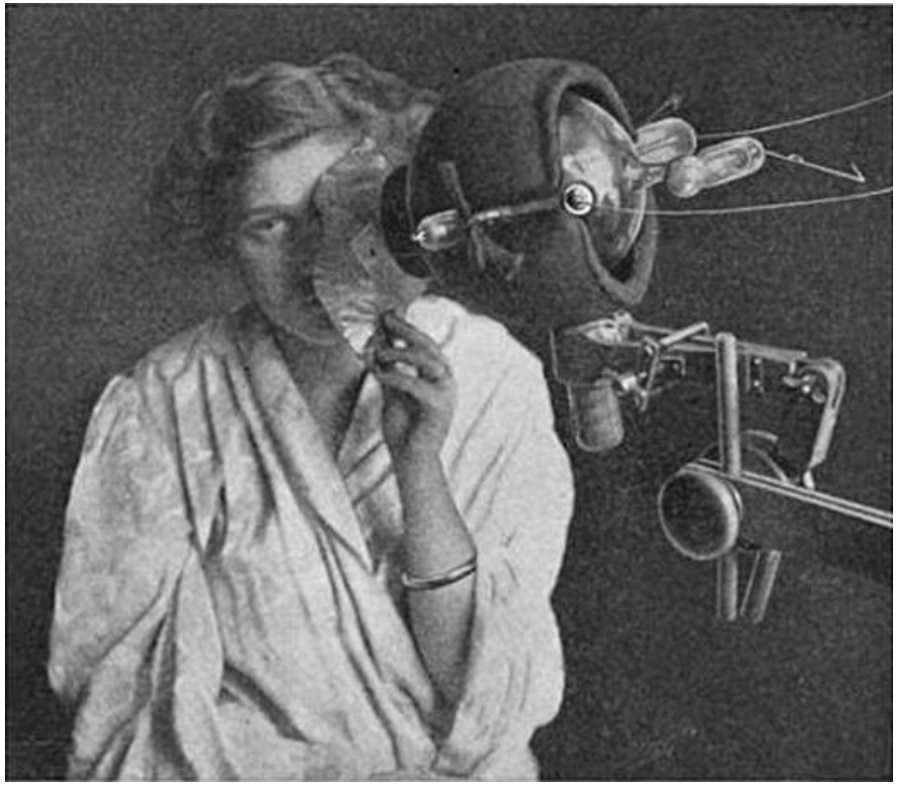
Friedrich Giesel
1852-1927



Burning of Pierre Curie's arm

Pierre Curie
1859-1906

Photo of Pierre Curie’s arm, burned by radium salt applied for 10 hours. In 1900, the German dentist Walkhoff noted that radium rays act energetically on the skin in a manner analogous to that of X-rays. This observation was confirmed a few weeks later by the German chemist F. Giesel, with whom Pierre and Marie maintained regular correspondence.



X-ray apparatus used for treatment of epithelioma of the face, 1915.

Small tubes containing radium salts are strapped to a woman's face to treat what was either lupus or rodent ulcer, 1905.

The Nobel Prize in Physics 1944

Photo from the Nobel Foundation archive.

Isidor Isaac Rabi

Prize share: 1/1

The Nobel Prize in Physics 1944 was awarded to Isidor Isaac Rabi "for his resonance method for recording the magnetic properties of atomic nuclei."

The Nobel Prize in Physics 1952

Photo from the Nobel Foundation archive.

Felix Bloch

Prize share: 1/2

Photo from the Nobel Foundation archive.

Edward Mills Purcell

Prize share: 1/2

The Nobel Prize in Physics 1952 was awarded jointly to Felix Bloch and Edward Mills Purcell "for their development of new methods for nuclear magnetic precision measurements and discoveries in connection therewith."

The Nobel Prize in Physiology or Medicine 2003

Photo from the Nobel Foundation archive.

Paul C. Lauterbur

Prize share: 1/2

Photo from the Nobel Foundation archive.

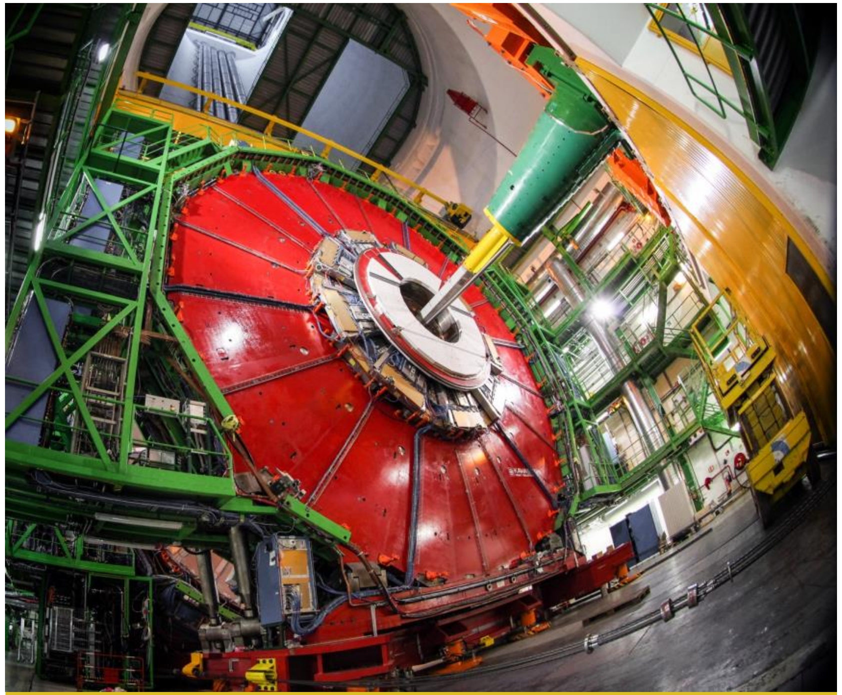
Sir Peter Mansfield

Prize share: 1/2

The Nobel Prize in Physiology or Medicine 2003 was awarded jointly to Paul C. Lauterbur and Sir Peter Mansfield "for their discoveries concerning magnetic resonance imaging."

The technologies

ACCELERATORS



DETECTORS

COMPUTING

sound reproduction
data management
testing satellite components
astronauts' radiation exposure
understanding turbulence
food sterilization
medical implants
homeland security
finding oil, gas, water
geological dating
scientific linux
curing of epoxies and plastics
medical imaging
x-ray diffractometry
spacecraft shielding
radiology
medical equipment sterilization
medical radioisotopes
non-destructive testing
nuclear waste transmutation
ion implantation
shrink wrap
radiotherapy
rad-hard electronics
PET
terrestrial reproduction of space radiation
simulations
industry 4.0
digital data preservation
optimised irrigation systems
drug development
safety
open hardware
WWW
powering complex biological simulations
industrial control systems
power transmission
analysis of satellite data
treatment planning systems
volcano tomography
space applications
sealing food packages
autonomous vehicles
isotope production
smoke detectors
hadron therapy
cultural heritage
MRI
cleaner air and water
ink curing
cargo screening
computer chips manufacturing
studying the retina
medical dosimetry
material science


Accelerators for America's Future
ENERGY
Particle physics – it matters
A forward look at UK research into the building blocks of the Universe and its impact on society
In partnership with
Science & Technology Facilities Council
Accelerating science and innovation
Societal benefits of European research in particle physics
Tools, Techniques, and Technology Connections of Particle Physics
Task force chairs:
Marcel Demarteau
Argonne National Laboratory
Katie Yurkewicz
Fermi National Accelerator Laboratory
U.S. DEPARTMENT OF ENERGY
Office of Science
Accelerators and Beams
TOOLS OF DISCOVERY AND INNOVATION
4th Edition
Published by the Division of Physics of Beams of the American Physical Society
APPLICATIONS OF PARTICLE ACCELERATORS IN EUROPE
EuCARD²
Accelerators for Society
Particle accelerators are being applied throughout society. Originally developed for fundamental research, today they are used for a range of applications, from healthcare to manufacturing silicon chips to reducing pollution.
TIARA
From Physics to Daily Life
Applications in Informatics, Energy, and Environment
Edited by Beatrice Bressan
WILEY Blackwell

Over **70 companies and institutes produce accelerators for industrial applications**; these organizations sell more than **1,100 industrial systems per year** — almost twice the number produced for research or medical therapy — at a **market value of $2.2B**.

Over **$1B** of this amount is generated by the sales of accelerators for **ion implantation** into materials — primarily semiconductor devices — whose worldwide value of production is about $300B.

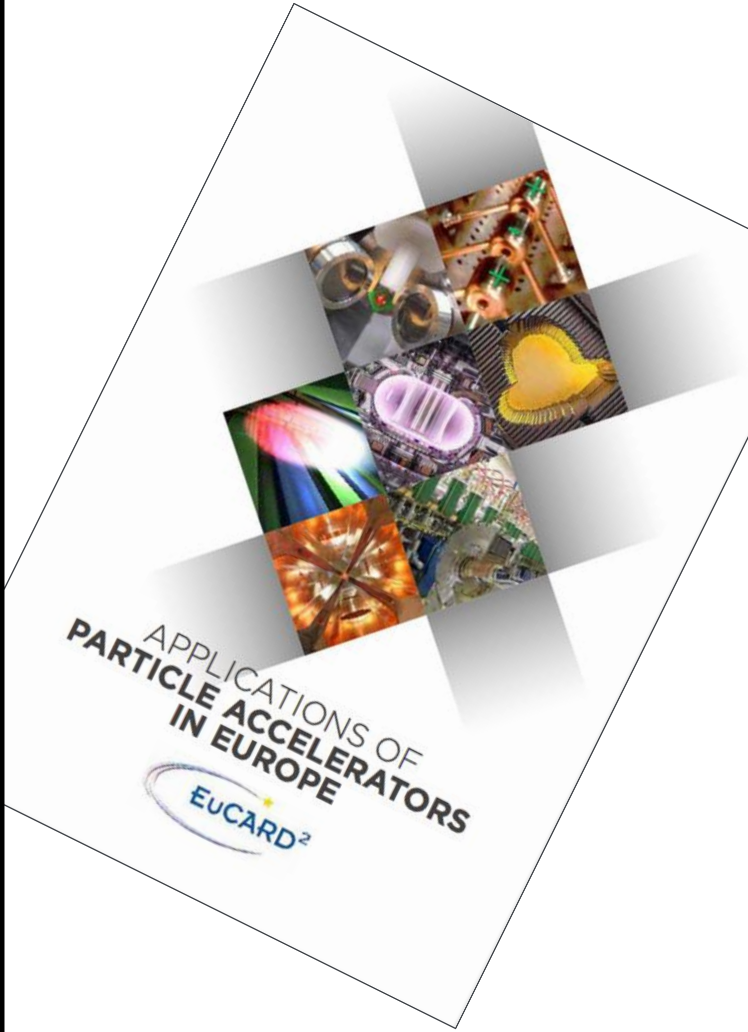
Hamm,R.andHamm,M.(2012).Industrial accelerators and their applications. World Scientific Publishing Co.

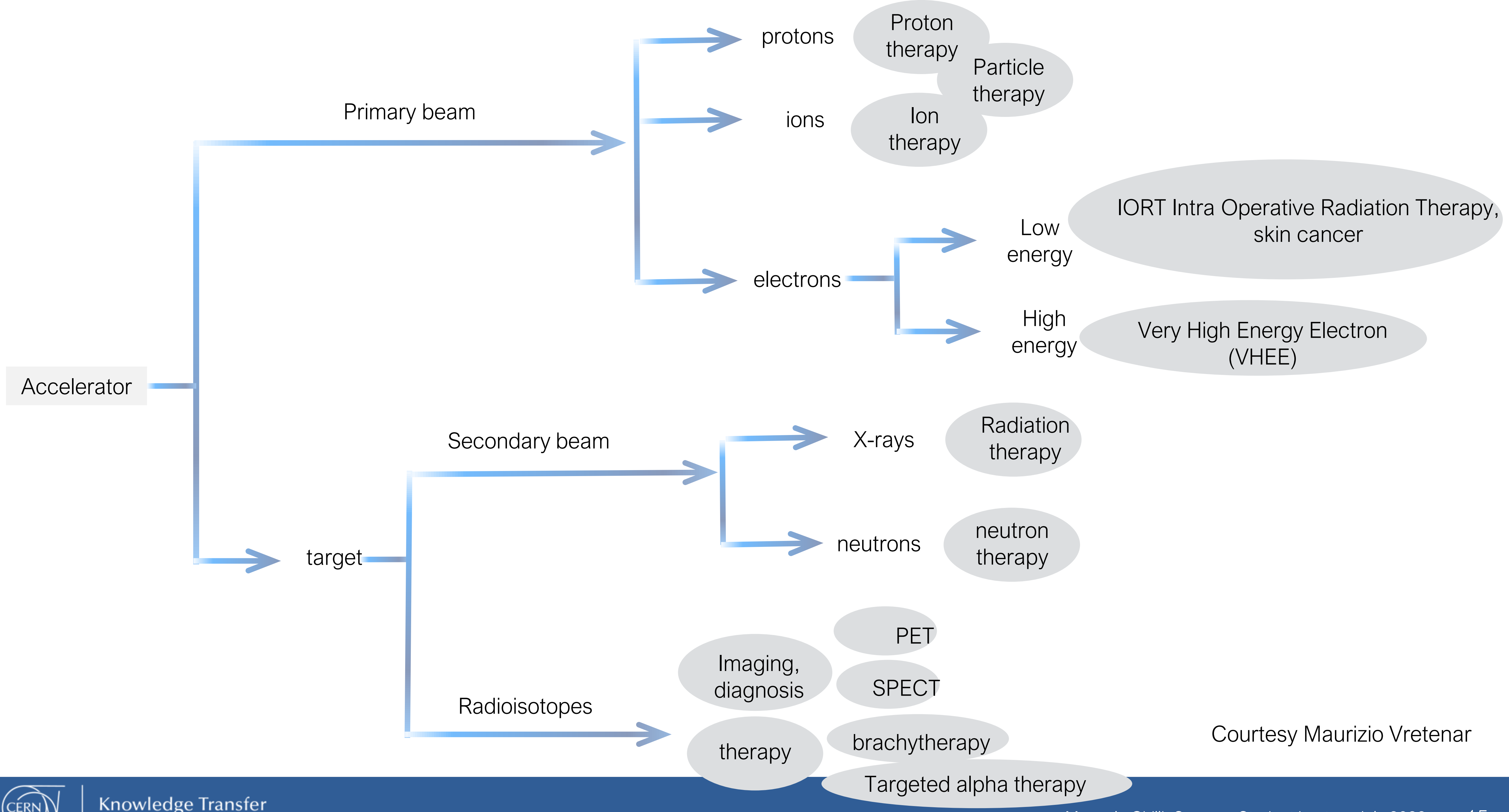
As of 2014 there were **42,200** accelerators worldwide:
27,000 (64%) in industry,
14,000 (33%) for medical purposes
1,200 (3%) for basic research.

These figures exclude electron microscopes and x–ray tubes, and the security and defense industries.

Chernyaev, A. P. and Varzar, S. M. (2014). Particle accelerators in modern world. Physics of Atomic Nuclei, 77(10):1203–1215.

Area	Application	Beam	Accelerator	Beam energy/MeV	Beam current/mA	Number
Medical	Cancer therapy	e	linac	4-20	10^{-2}	>14000
		p	cyclotron, synchrotron	250	10^{-6}	60
		C	synchrotron	4800	10^{-7}	10
	Radioisotope production	p	cyclotron	8-100	1	1600
Industrial	Ion implantation	B, As, P	electrostatic	< 1	2	>11000
	Ion beam analysis	p, He	electrostatic	<5	10^{-4}	300
	Material processing	e	electrostatic, linac, Rhodatron	≤10	150	7500
	Sterilisation	e	electrostatic, linac, Rhodatron	≤10	10	3000
Security	X-ray screening of cargo	e	linac	4-10	?	100?
	Hydrodynamic testing	e	linear induction	10-20	1000	5
Synchrotron light sources	Biology, medicine, materials science	e	synchrotron, linac	500-10000		70
Neutron scattering	Materials science	p	cyclotron, synchrotron, linac	600-1000	2	4
Energy – fusion	Neutral ion beam heating	d	electrostatic	1	50	10
	Heavy ion inertial fusion	Pb, Cs	Induction linac	8	1000	Under development
	Materials studies	d	linac	40	125	Under development
Energy – fission	Waste burner	p	linac	600-1000	10	Under development
	Thorium fuel amplifier	p	linac	600-1000	10	Under development
Energy – bio-fuel	Bio-fuel production	e	electrostatic	5	10	Under development
Environmental	Water treatment	e	electrostatic	5	10	5
	Flue gas treatment	e	electrostatic	0.7	50	Under development





Courtesy Maurizio Vretenar

Radiotherapy

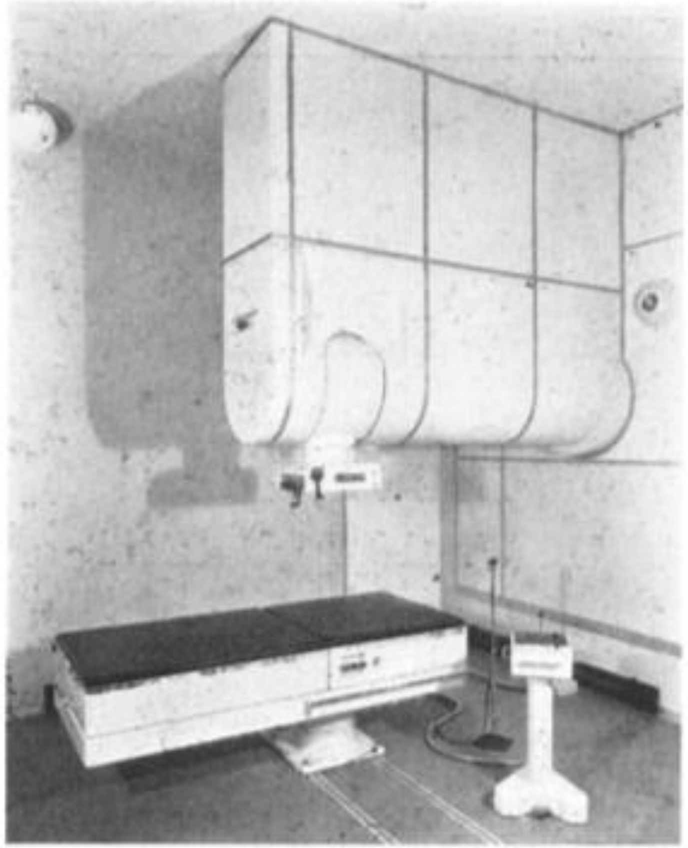
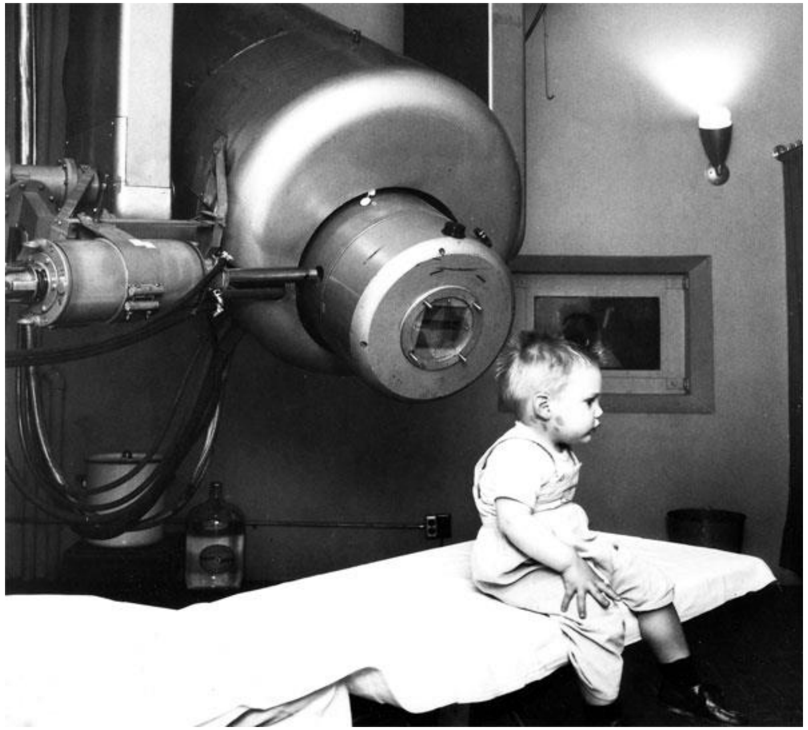


Fig. 1. The 8 MeV linear accelerator (Metropolitan-Vickers) at Hammersmith Hospital with the angle of the roentgen head adjusted to give a beam directed vertically downwards.

1953



1956: The first patient to receive radiation therapy from the medical linear accelerator at Stanford was a 2-year-old boy.

P. Howard-Flanders (1954) The Development of the Linear Accelerator as a Clinical Instrument, Acta Radiologica, 41:sup116, 649-655, DOI: 10.3109/00016925409177244

Approx. date of introduction	Model and location	Manufacturer	Beam energy and modality
1953	Hammersmith Hospital, London	Metropolitan-Vickers	8 MV X-rays
1954	St. Bartholomew's Hospital, London	Mullard	15 MeV X-rays and electrons
1954	Christie Hospital, Manchester	Metropolitan-Vickers AEI	4 MV X-ray
1954	Newcastle	Mullard	4 MV X-ray
1955	Stanford	Stanford	5 MV X-ray
1955	Argonne Cancer Hospital, Chicago	Stanford, HVE and Argonne	5–50 M electr
1955	Michael Reese Hospital, Chicago	Stanford. M. Reese and Helene Curtis	45 MeV electr
1962	Newcastle	Vickers Research	4 MV X-ray
1962	Clinac 6	Varian	6 MV X-ray
1965	Mevatron 8	Applied Radiation	6–8 MV X-rays 3–10 MeV electrons
1965	SL-75	Mullard	6–8 MV X-rays 8–10 MeV electrons

Table 1 (*cont.*)

Approx. date of introduction	Model and location	Manufacturer	Beam energy and modality
1967	Sagittaire, Paris	CSF	16 MV X-rays 12–32 MeV electrons
1968	Clinac 4	Varian	4 MV X-rays
1969	Mevatron VI & XII	Applied Radiation	6 or 8 MV X-rays 3–11 MeV electrons
1969	LMR-13	Toshiba	8 and 10 MV X-rays 8–13 MeV electrons
1970	Therapi 4	SHM	4 MV X-rays
1970	Clinac 35 Hiroshima	Varian	8 and 25 MV X-rays 7–28 MeV

C J Karzmark and N C Pering 1973 *Phys. Med. Biol.* **18** 321

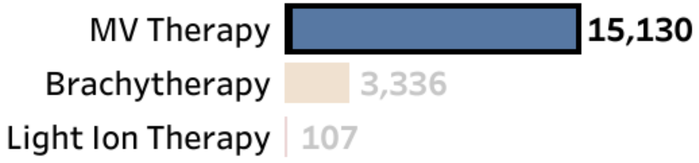
Status of Radiation Therapy Equipment

156 Countries

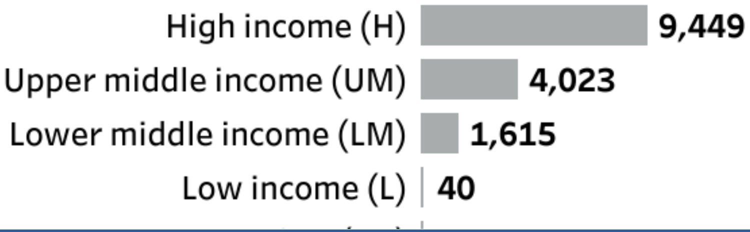
7687 RT Centres

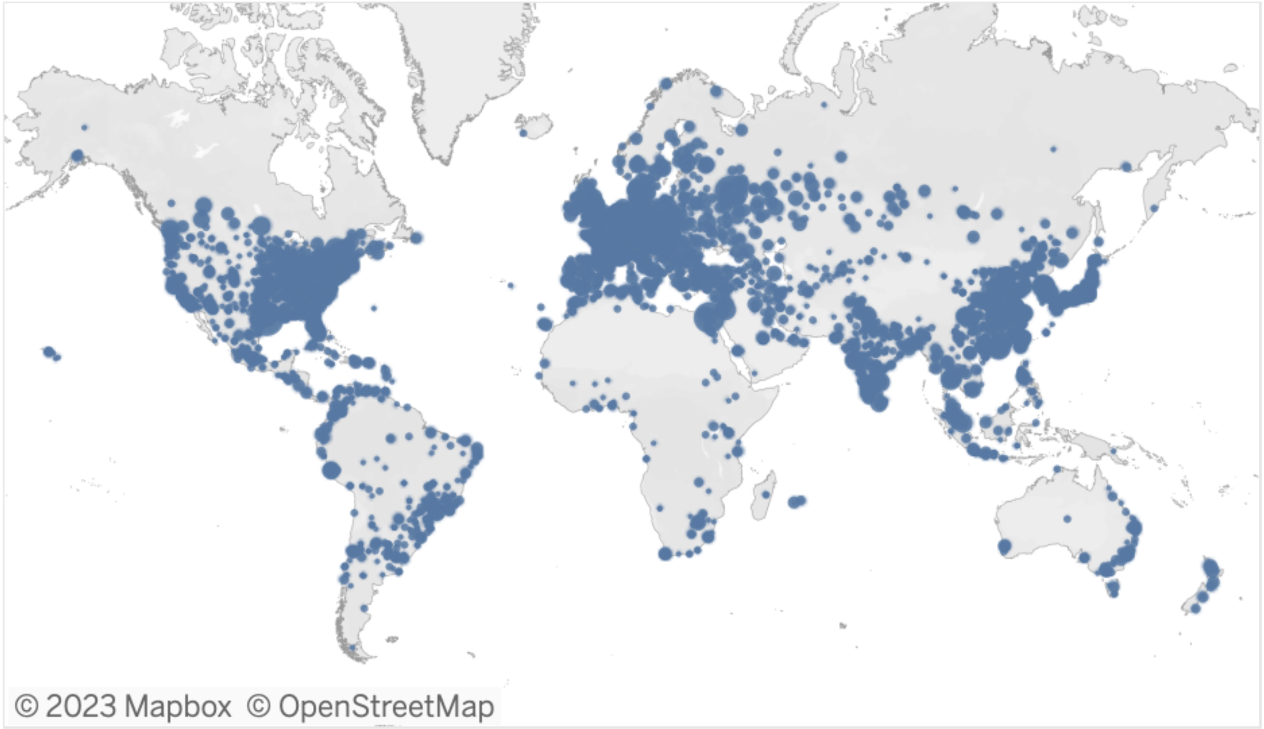
15130 MV Therapy

Equipment type
(Updated on : 09/03/2023 13:55:27)



Equipment per income groups
(Updated on : 09/03/2023 13:55:27)





IAEA DIRAC Directory of RAdiotherapy Centres

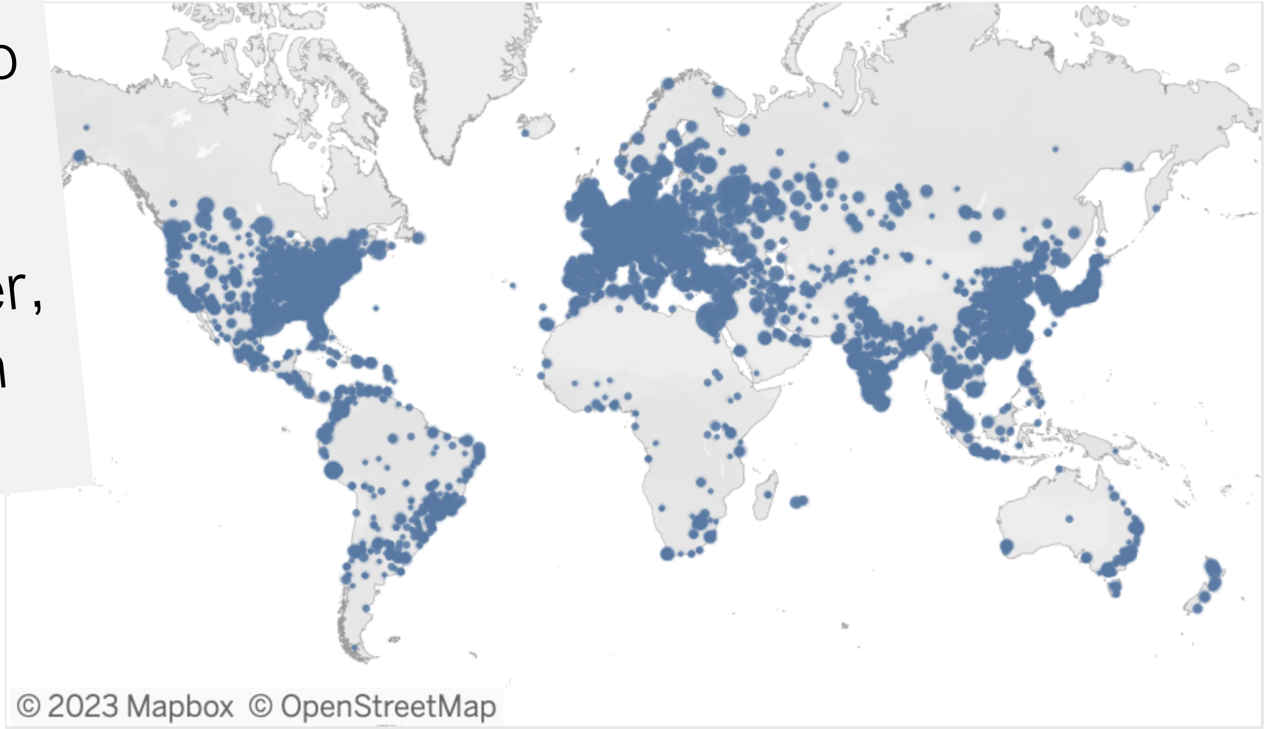
Status of Radiation Therapy Equipment

156 Countries

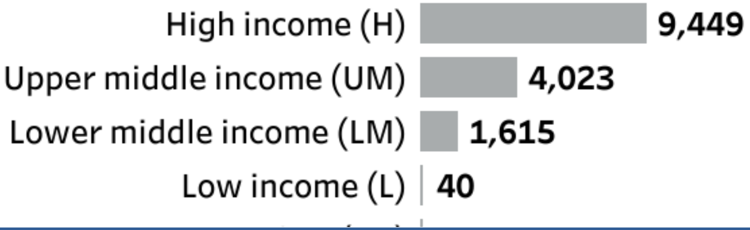
7687 RT Centres

15130 MV Therapy

STELLA (Smart Technologies to Extend Lives with a Linear Accelerator) formed to address the lack of radiotherapy in challenging environments.
Supported by ICEC, UK STFC, Lancaster, Oxford, Daresbury lab, CERN, users in LMICs

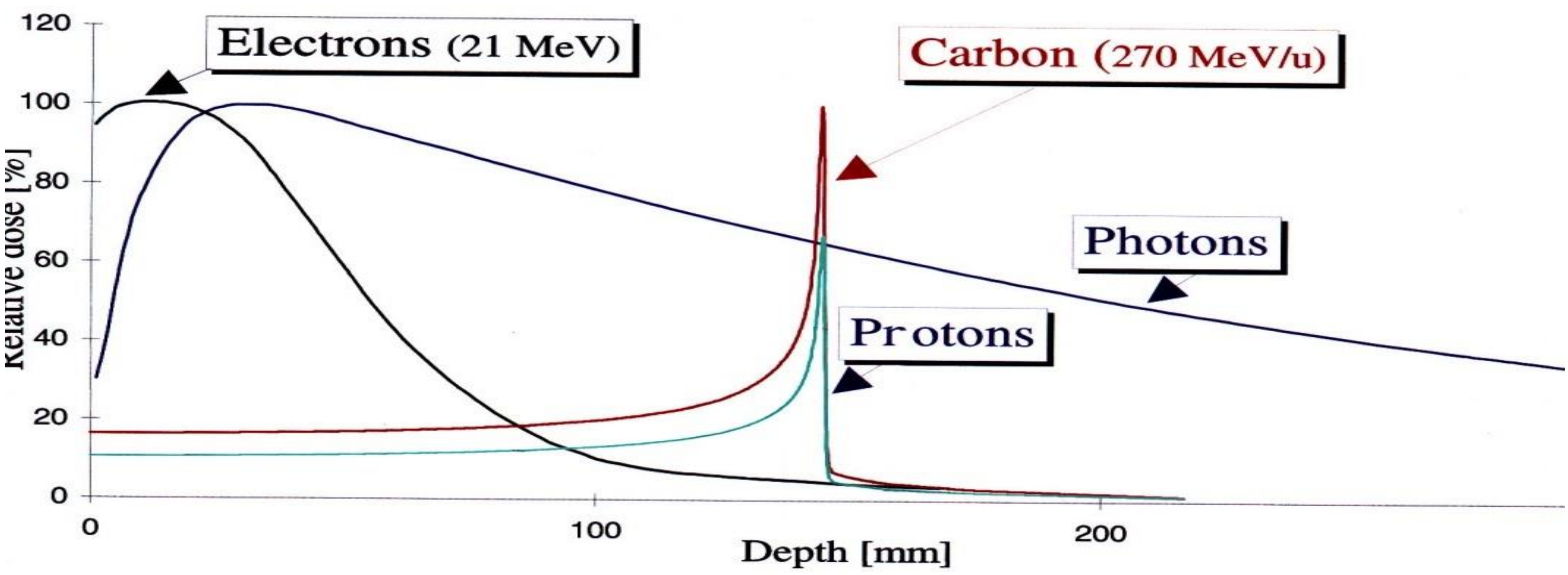


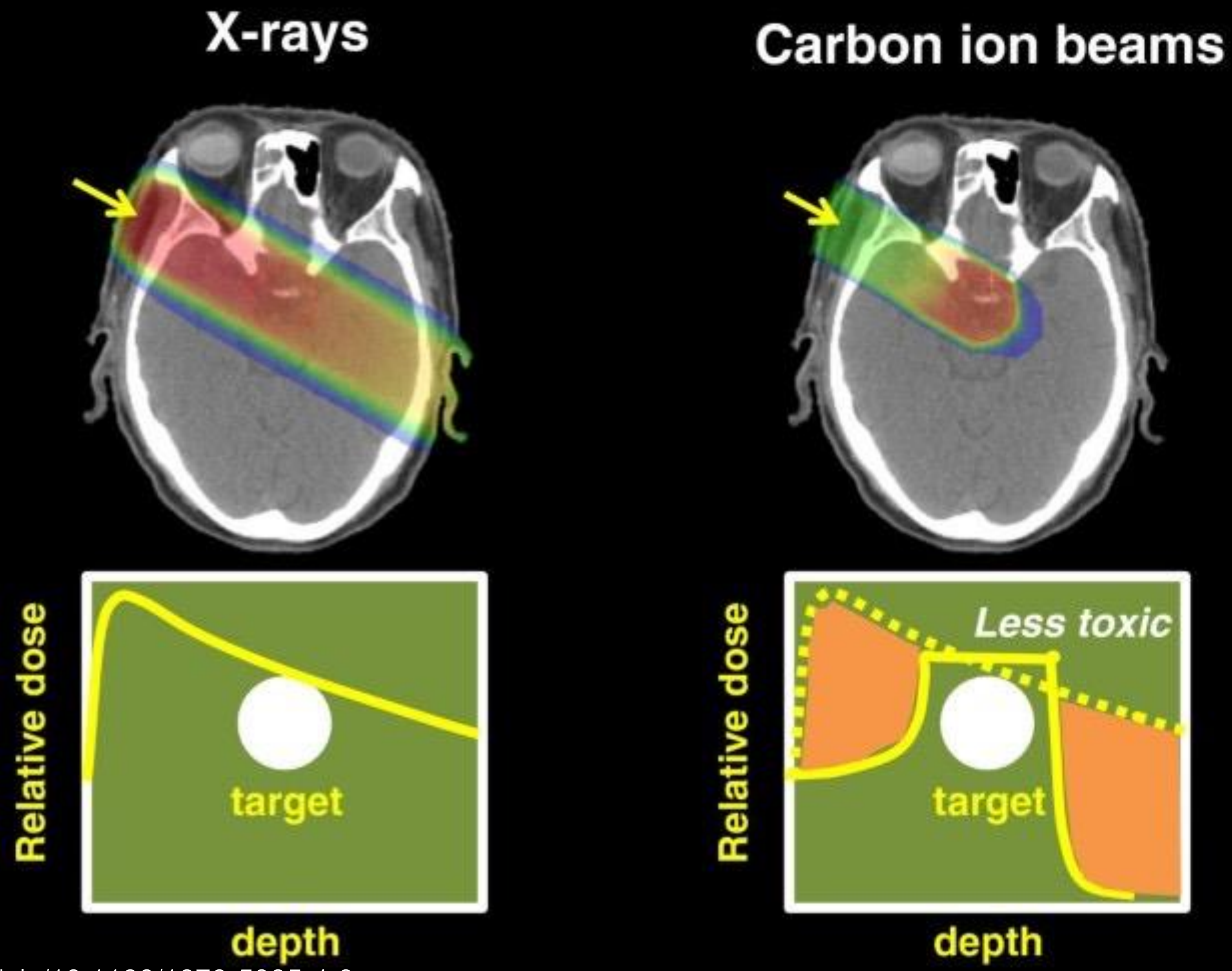
Equipment per income groups
(Updated on : 09/03/2023 13:55:27)



IAEA DIRAC Directory of RAdiotherapy Centres

Protons, ions: hadron therapy, particle therapy, (light, heavy) ion therapy

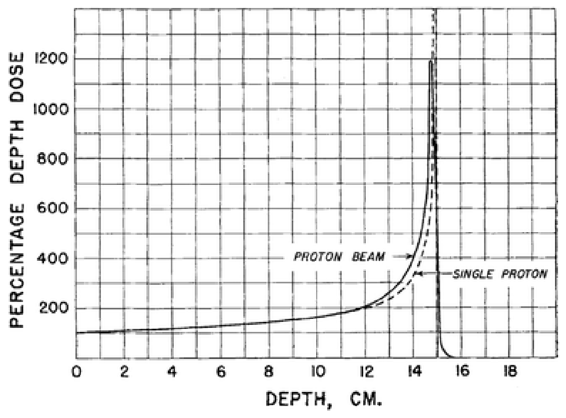


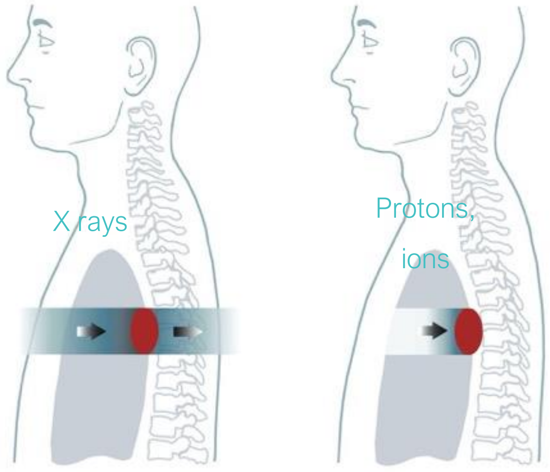


https://link.springer.com/article/10.1186/1878-5085-4-9


X-RAY THERAPY
TREATMENT EXPLAINED
1:17 / 2:44

Berkeley
1931 Invention of cyclotron (Ernest Lawrence)
1946 RR Wilson published his seminal paper on particle therapy
1952 First biological investigation with accelerated nuclei (C Tobias and JH Lawrence)
1954 First therapeutic exposure of humans to protons and alphas (Tobias and JH Lawrence)
1975 Clinical trials with accelerated light ions at LBL (Castro)





Gustav Werner Institute and Theodor Svedberg Laboratory
1949 Synchrocyclotron at the Gustav Werner Institute (Uppsala)
1950s Pre-therapeutic physical experiments with high energy protons (B. Larsson)
1957 First patient treated with proton beam

π^- beam therapy

1935 Yukawa theory on pi meson

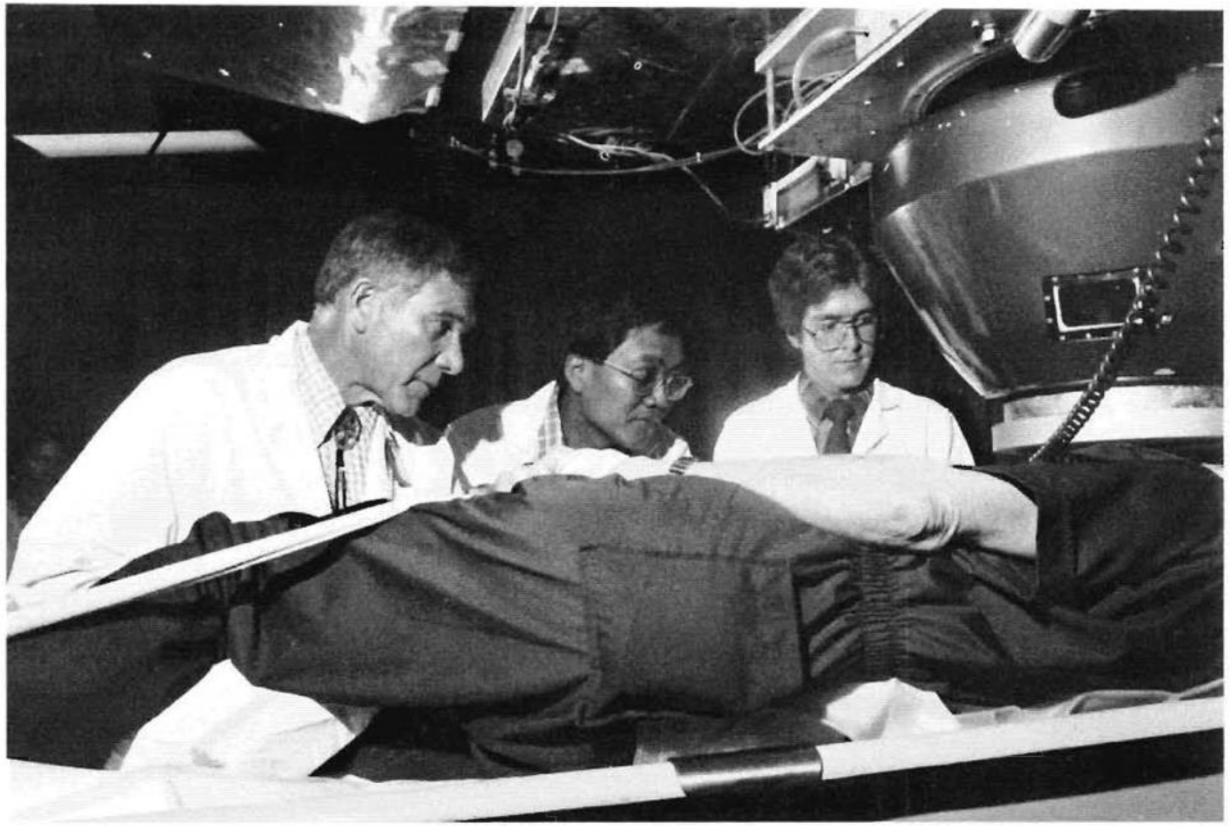
1947 Discovery of pions

1951 Possibility of using negative pions for cancer therapy (Tobias and Richman)

1961 Clinical use of π^- advocated (Fowler and Perkins, Nature 1961)

'70-'80s Clinical trials of negative pions at LAMPF, TRIUMF, PSI and Stanford

William T. Chu
EO Lawrence Berkeley National Laboratory
PTCOG From 1985 to Present and Future

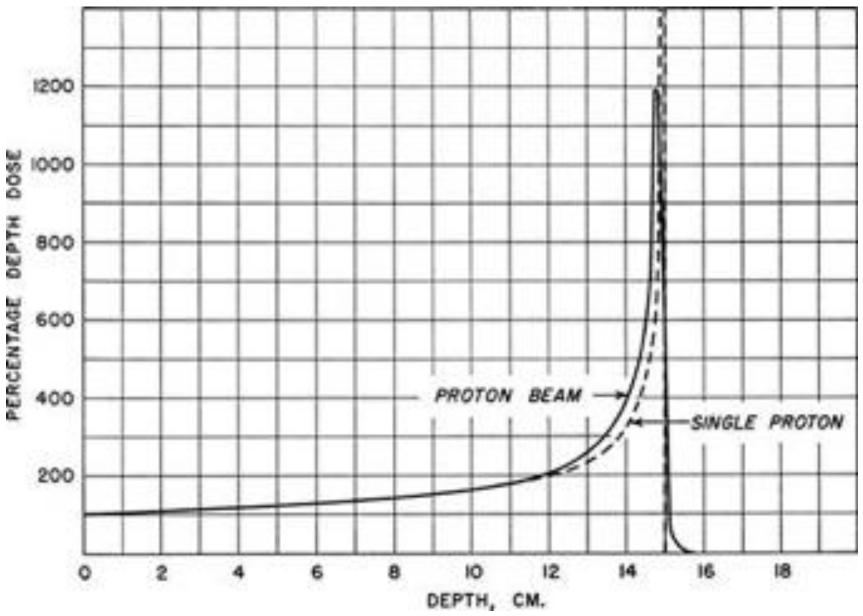


In a pilot experimental program at LAMPF's Biomedical Facility, about 250 patients were treated with negative pions for a variety of advanced deep-seated tumors. Compared to conventional x-ray therapy, pion therapy is expected to provide improved dose localization and biological effectiveness. Shown positioning a patient under the pion radiotherapy beam are (left to right) Dr. Morton Kligerman, former Director of the University of New Mexico's Cancer Research and Treatment Center, a visiting radiotherapist from Japan, and Dr. Steven Bush, formerly of the University of New Mexico. The hardware at the upper right includes a beam collimator, a dose monitor, and a device for changing the penetration depth of the pions.

LAMPF: a dream and a gamble

From physics labs…

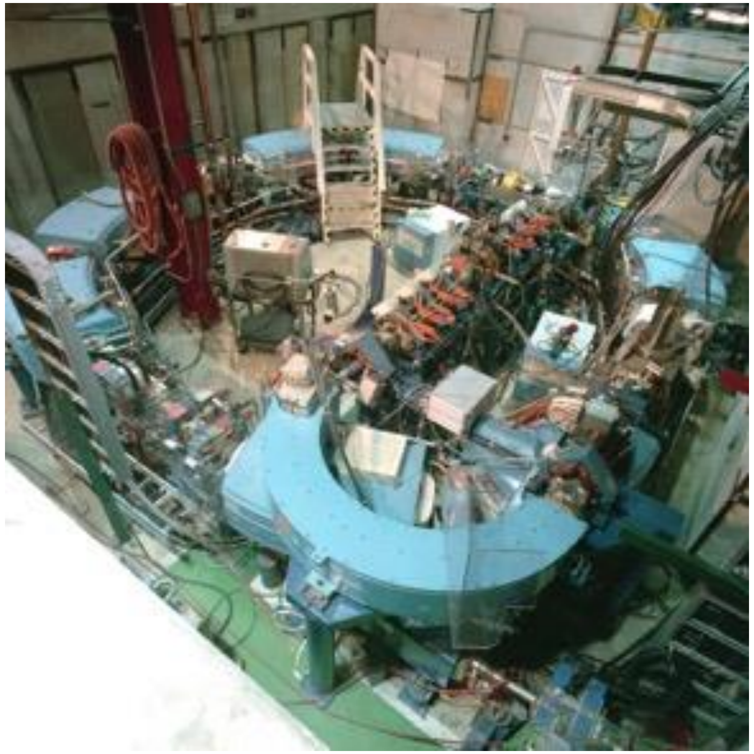
1932 - E. Lawrence
First cyclotron



1946 – proton therapy
proposed by R. Wilson

1954 – Berkeley treats
the first patient

…to clinics



1989
Clatterbridge UK

1990
Loma Linda USA

1994
HIMAC Japan

How to make it better

Image-Guided Radiation Therapy

Intensity-modulated radiation therapy

MRI-guided radiation therapy

Dynamic arc delivery techniques

…

Pioneers in scanned beam delivery

Building Gantry 1 back in the 1990s
(Photo: Paul Scherrer Institute)

1998
Pilot project at GSI
Germany and proposal for HIT facility

Status of Radiation Therapy Equipment

20 Countries

104 RT Centres

107 Light Ion Therapy

Equipment type
(Updated on : 09/03/2023 13:55:27)

MV Therapy 15,130

Brachytherapy 3,336

Light Ion Therapy 107

Equipment per income groups
(Updated on : 09/03/2023 13:55:27)

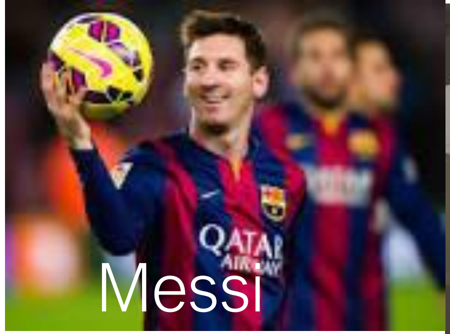
High income (H) 96

Upper middle income (UM) 10

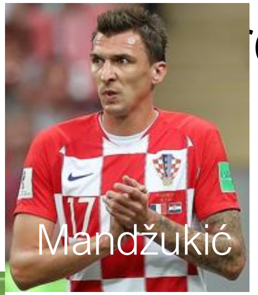
Lower middle income (LM) 1

IAEA DIRAC Directory of RAdiotherapy Centres

200



Multi heavy ions
(protons +
carbon ions)



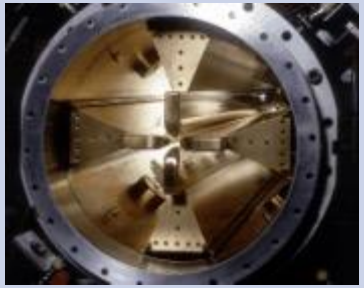
oton multi-room

2

on single-
room

Courtesy
(I'll never thank him enough!)
Marco Durante (GSI)
JENAS 2019
https://indico.ijclab.in2p3.fr/event/5418/timetable/#20191016.detailed

Protons: the LINAC way

1990 RFQ2 200 MHz 0.5 MeV /m Weight :1200kg/m Ext. diametre : ~45 cm	2007 LINAC4 RFQ 352 MHz 1MeV/m Weight : 400kg/m Ext. diametre : 29 cm	2014 HF RFQ 750MHz 2.5MeV/m Weight : 100 kg/m Ext. diametre : 13 cm
		

Compact High-Frequency Radio Frequency Quadrupole (RFQ)

M. Vretenar, A. Dallocchio, V. A. Dimov, M. Garlasché, A. Grudiev, A. M. Lombardi, S. Mathot, E. Montesinos, M. Timmins, “A Compact High-Frequency RFQ for Medical Applications”, in Proc. LINAC2014, Geneva, Switzerland, September 2014

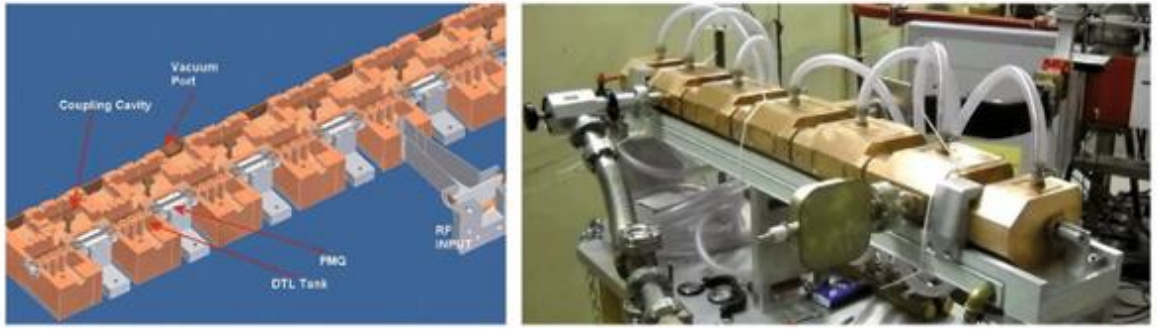
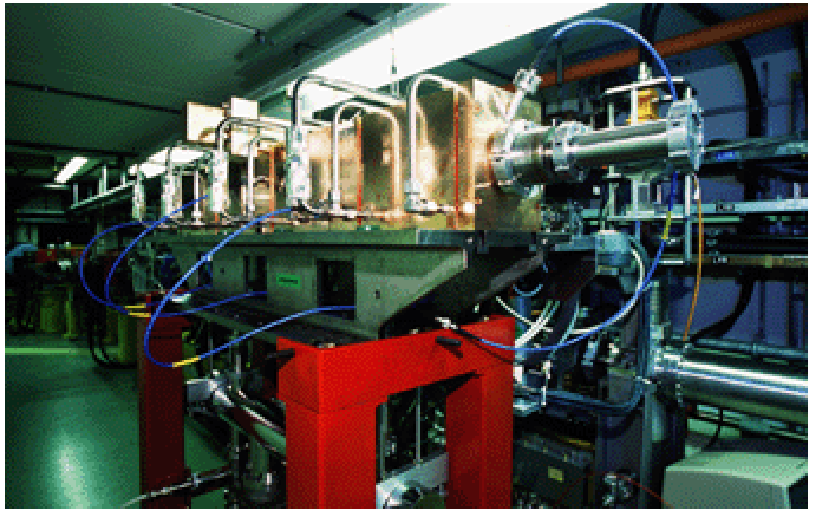


Fig. 4. TOP-IMPLART SCDTL structure: (left) schematic (right) 18–24 MeV booster built for the SPARKLE Company.

TOP IMPLART

C. Ronsivalle, M. Carpanese, C. Marino, G. Messina, L. Picardi, S. Sandri, E. Basile, B. Caccia, D.M. Castelluccio, E. Cisbani, S. Frullani, F. Ghio, V. Macellari, M. Benassi, M. D’Andrea, L. Strigari, The TOP-IMPLART project, Eur. Phys. J. Plus 126: 68 (2011) 1–15, http://dx.doi.org/10.1140/epjp/i2011-11068-x.



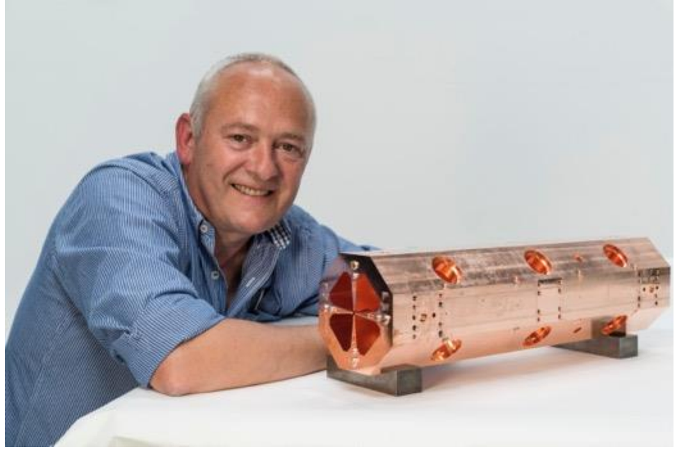
LInac BOoster (LIBO)

U. Amaldi et al., “LIBO-a linac booster for protontherapy: construction and test of a prototype,” Nucl. Instrum. Meth- ods Phys. Res. A, vol. 521, pp. 512-529, 2004.

Toward clinical proton therapy LINACs

The RFQ accelerating structure entirely manufactured by AVO (under CERN licence)
Nominal energy for the full system reached in Sep 2022

ADVANCED ONCOTHERAPY
ADAM an ADVANCED ONCOTHERAPY company
LiGHT Linac for Image Guided Hadron Therapy



CERN proton therapy RFQ (5 MeV / 2m)

TOP IMPLART under development and construction by ENEA in collaboration with the Italian Institute of Health (ISS) and the Oncological Hospital Regina Elena-IFO.

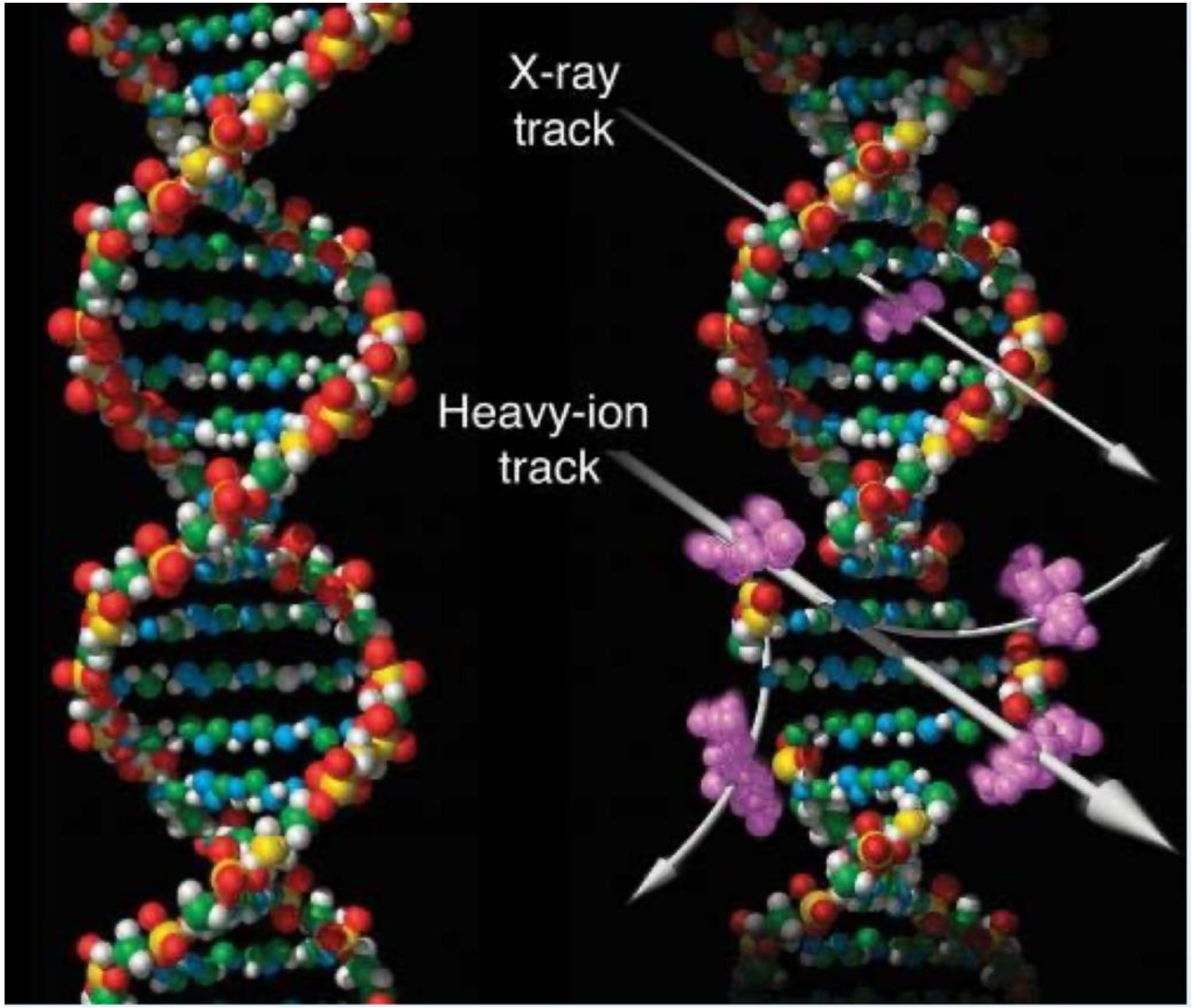
Status in March 2021*: running at 55.5 MeV

* https://www.accelerators.enea.it/TopImplartStatus&Schedules/index.htm

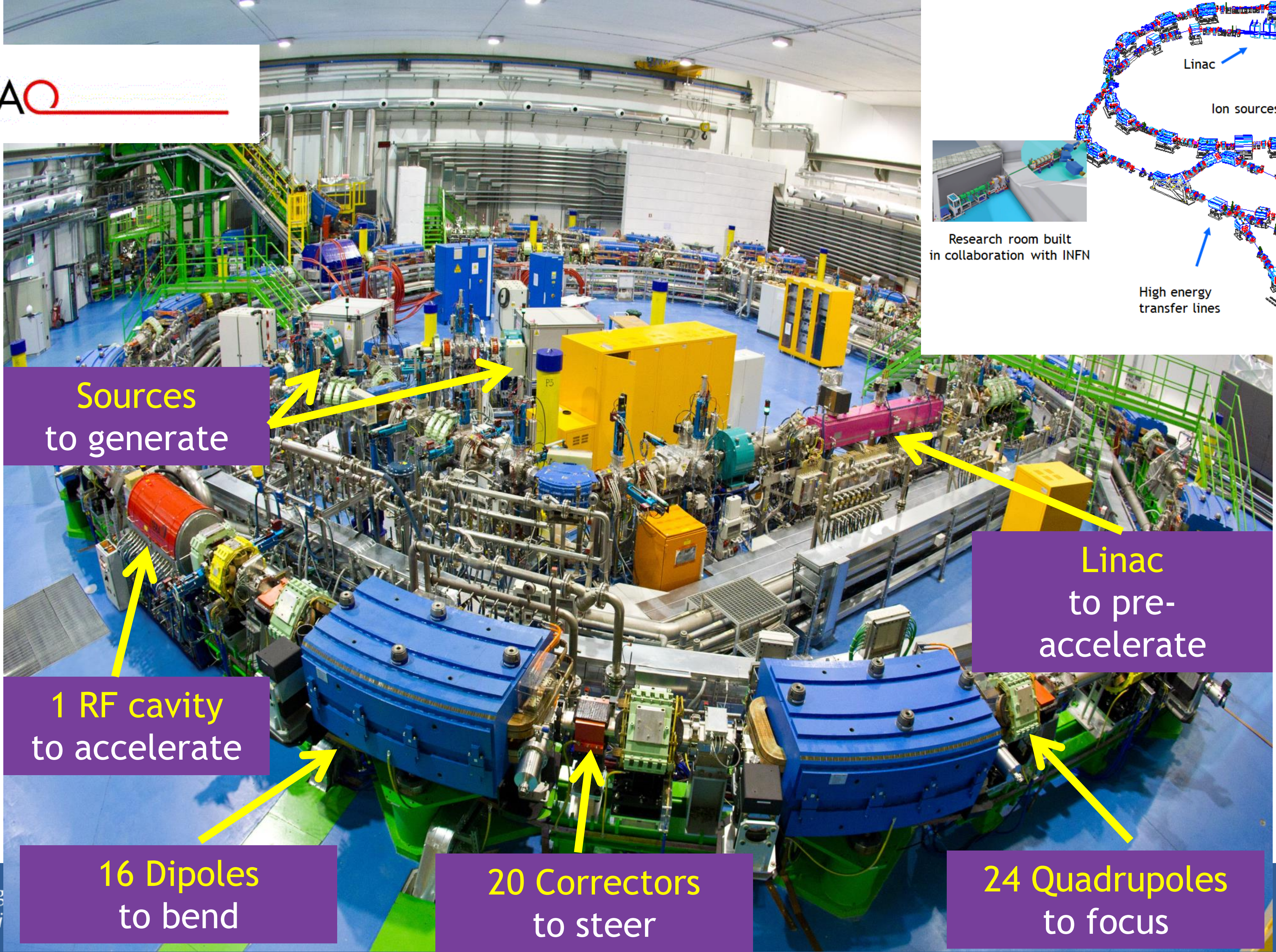
LinearBeam PROTONS FOR LIFE

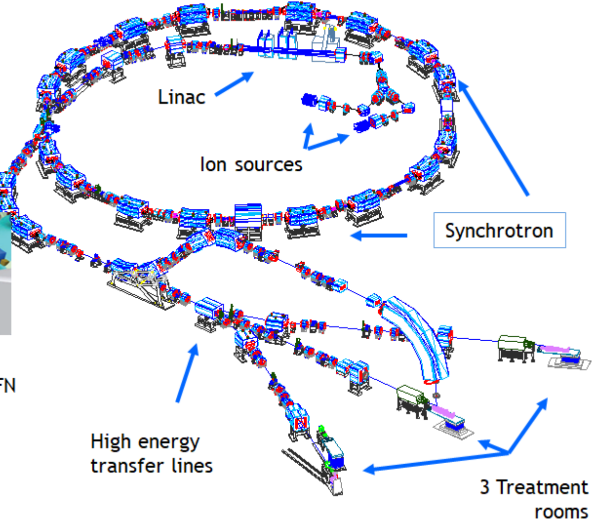
ERHA (Enhanced Radiotherapy with Hadrons) is the innovative proton therapy system being developed by LinearBeam for the treatment of tumors.
Collaboration with (among others) ENEA, INFN.

Carbon ions



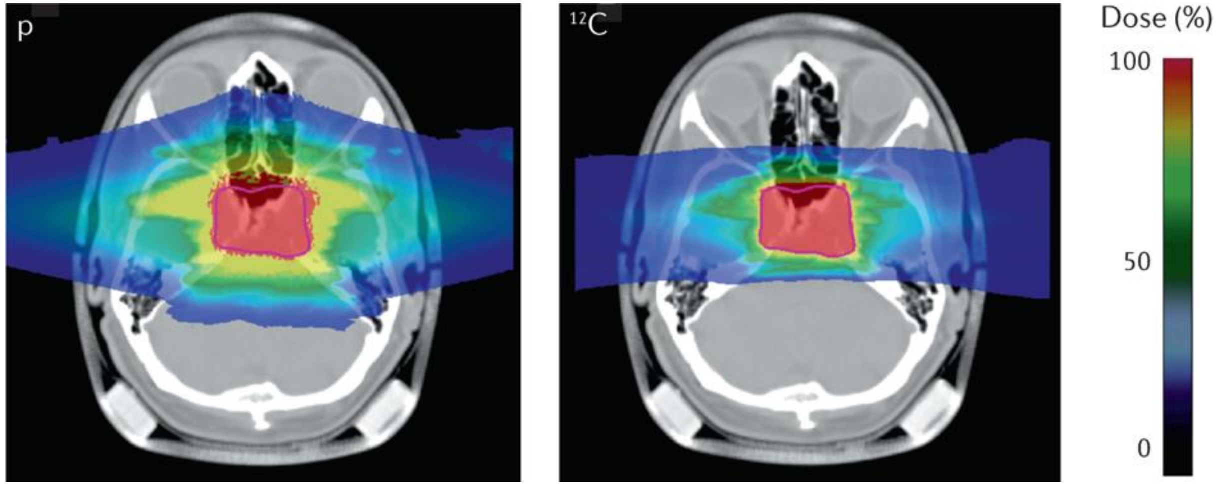
fondazione CNAO





From pioneering rasterscanning & carbon ion pilot project @ GSI

440 patiens
1998-2008

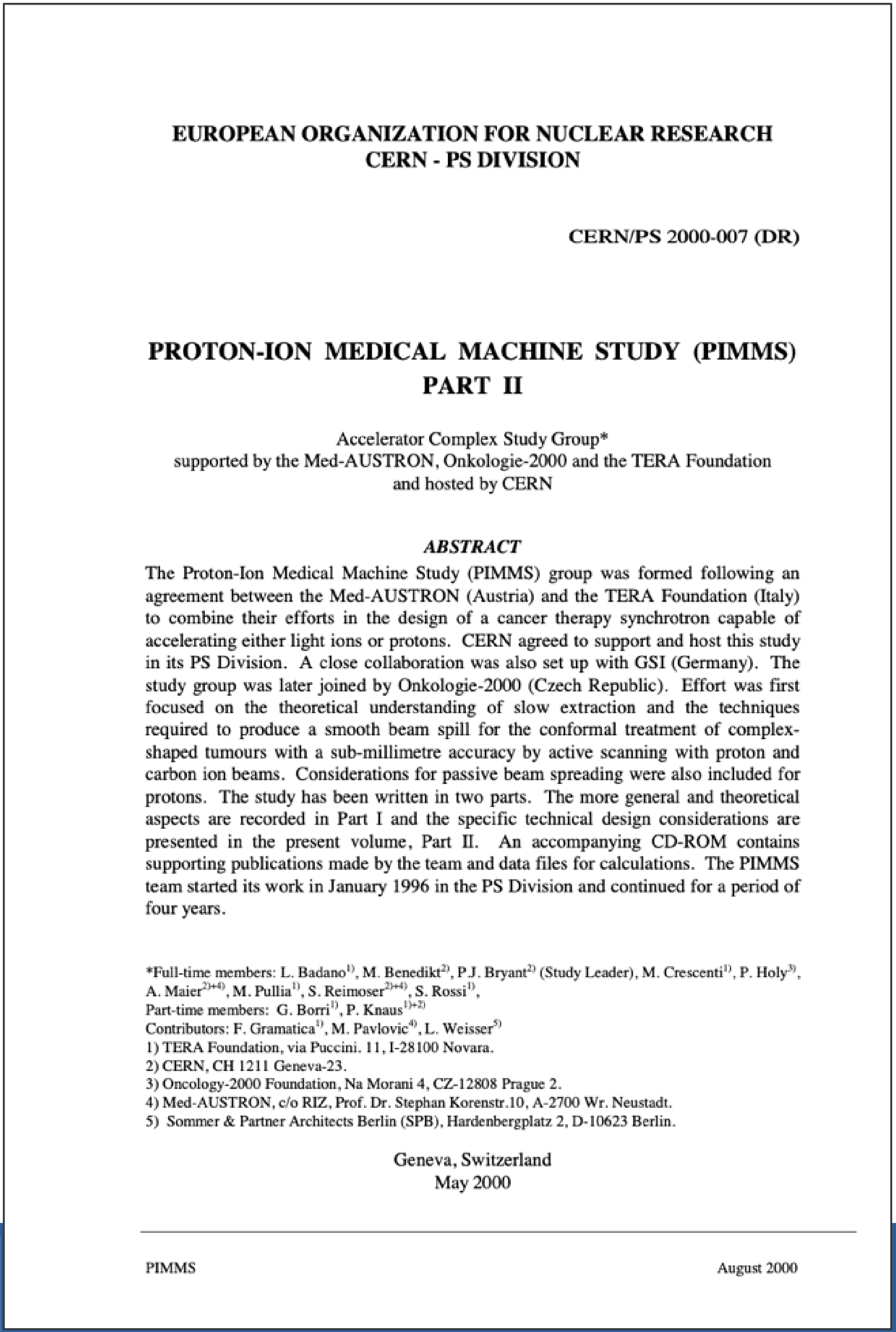


The image shows an optimized plan with two opposite fields for a chordoma patient using protons (left) or 12C ions (right).

Since 2009*:
2841 patients with p
3793 patients with C-ion

* Until Dec 2020, source ptcog.ch

From PIMMS @ CERN



EUROPEAN ORGANIZATION FOR NUCLEAR RESEARCH
CERN - PS DIVISION

CERN/PS 2000-007 (DR)

PROTON-ION MEDICAL MACHINE STUDY (PIMMS) PART II

Accelerator Complex Study Group*
supported by the Med-AUSTRON, Onkologie-2000 and the TERA Foundation
and hosted by CERN

ABSTRACT

The Proton-Ion Medical Machine Study (PIMMS) group was formed following an agreement between the Med-AUSTRON (Austria) and the TERA Foundation (Italy) to combine their efforts in the design of a cancer therapy synchrotron capable of accelerating either light ions or protons. CERN agreed to support and host this study in its PS Division. A close collaboration was also set up with GSI (Germany). The study group was later joined by Onkologie-2000 (Czech Republic). Effort was first focused on the theoretical understanding of slow extraction and the techniques required to produce a smooth beam spill for the conformal treatment of complex-shaped tumours with a sub-millimetre accuracy by active scanning with proton and carbon ion beams. Considerations for passive beam spreading were also included for protons. The study has been written in two parts. The more general and theoretical aspects are recorded in Part I and the specific technical design considerations are presented in the present volume, Part II. An accompanying CD-ROM contains supporting publications made by the team and data files for calculations. The PIMMS team started its work in January 1996 in the PS Division and continued for a period of four years.

*Full-time members: L. Badano[1)], M. Benedikt[2)], P.J. Bryant[2)] (Study Leader), M. Crescenti[1)], P. Holy[3)], A. Maier[2)+4)], M. Pullia[1)], S. Reimoser[2)+4)], S. Rossi[1)],
Part-time members: G. Borri[1)], P. Knaus[1)+2)]
Contributors: F. Gramatica[1)], M. Pavlovic[4)], L. Weisser[5)]
1) TERA Foundation, via Puccini. 11, I-28100 Novara.
2) CERN, CH 1211 Geneva-23.
3) Oncology-2000 Foundation, Na Morani 4, CZ-12808 Prague 2.
4) Med-AUSTRON, c/o RIZ, Prof. Dr. Stephan Korenstr.10, A-2700 Wr. Neustadt.
5) Sommer & Partner Architects Berlin (SPB), Hardenbergplatz 2, D-10623 Berlin.

Geneva, Switzerland
May 2000

Patient treatment at MedAustron

Since 2016:
1174 Patients
30600 Single Fractions

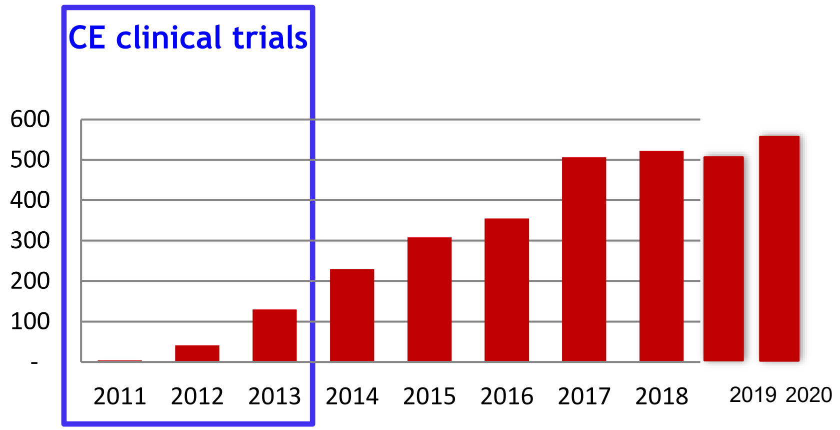
MedAustron

CNS	28%
Head & Neck	20%
Pediatrics	15%
Re-Irradiation	15%
Sarcoma	9%
Skull Base	7%
Prostate	3%
Gastrointestinal (upper)	2%
Gastrointestinal (lower)	<1%
Gynecological Tumors	<1%
Urogenital Tumors	<1%
Breast/Mamma-Ca	<1%

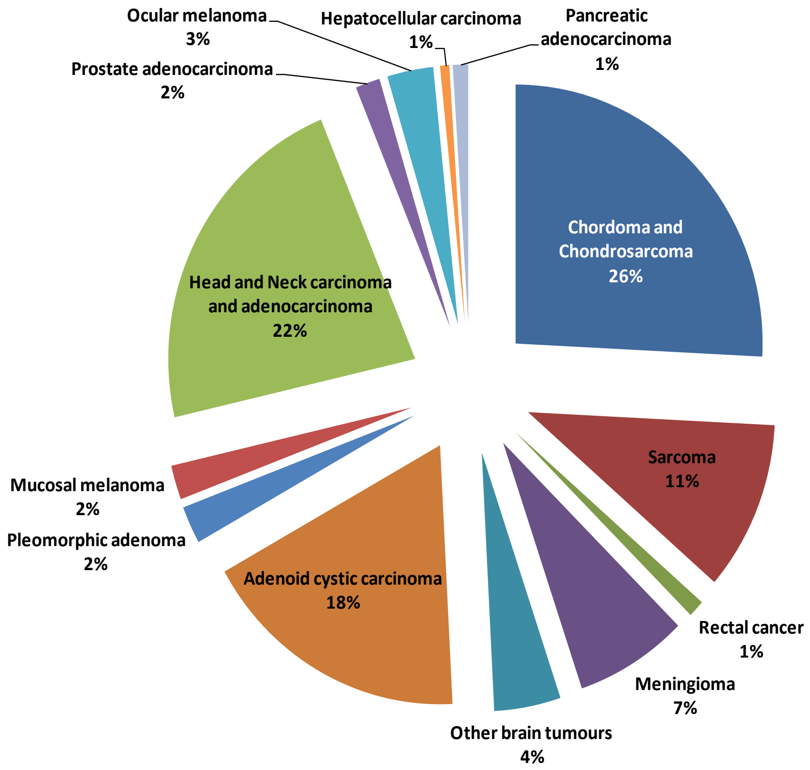
Values October 2021 • values rounded

Patient treatment at CNAO

Since 2011:
3700 Patients
55% C-ions
45% Protons



Patients per year



fondazione CNAO

fondazione CNAO

Non oncological application: ventricular arrhythmia (Collaboration with San Matteo Hospital, Pavia) Published: European Journal of Heart Failure

SCIENTIFIC REPORTS

OPEN

Feasibility Study on Cardiac Arrhythmia Ablation Using High-Energy Heavy Ion Beams

Received: 08 August 2016
Accepted: 09 November 2016
Published: 20 December 2016

H. Immo Lehmann[1,*], Christian Graeff[2,*], Palma Simoniello[2], Anna Constantinescu[2], Mitsuru Takami[1], Patrick Lugenbiel[3], Daniel Richter[2,4], Anna Eichhorn[2], Matthias Prall[2], Robert Kaderka[2], Fine Fiedler[5], Stephan Helmbrecht[5], Claudia Fournier[2], Nadine Erbeldinger[2], Ann-Kathrin Rahm[3], Rasmus Rivinius[3], Dierk Thomas[3], Hugo A. Katus[3], Susan B. Johnson[2], Kay D. Parker[2], Jürgen Debus[6], Samuel J. Asirvatham[1], Christoph Bert[2,4], Marco Durante[2,7] & Douglas L. Packer[1]

› Eur J Heart Fail. 2020 Nov 12. doi: 10.1002/ejhf.2056. Online ahead of print.

The First-in-Man Case of Non-invasive Proton Radiotherapy to Treat Refractory Ventricular Tachycardia in Advanced Heart Failure

Veronica Dusi [1 2], Viviana Vitolo [3], Laura Frigerio [1 4], Rossana Totaro [1 4], Adele Valentini [5], Amelia Barcellini [3], Alfredo Mirandola [3], Giovanni Battista Perego [6], Michela Coccia [2], Alessandra Greco [4], Stefano Ghio [4], Francesca Valvo [3], Gaetano Maria De Ferrari [7], Massimiliano Gnecchi [1 2], Luigi Oltrona Visconti [4], Roberto Rordorf [1 4]

Affiliations + expand

PMID: 33179329 DOI: 10.1002/ejhf.2056

Challenges for next-generation particle-therapy machines

Cost-effective technologies

Reduced footprint

New treatment regimes (e.g. FLASH, microbeams) and fractionation schedules

Multi-ions

Radiobiology research integrated in the facility

Many challenges in common with those for future particle physics facilities. Various initiatives starting/on-going.

KT Seminars

The CERN Next Ion Medical Machine Study: towards a new generation of accelerators for cancer therapy

by Maurizio Vretenar (CERN)

Monday 19 Oct 2020, 14:00 → 16:30 Europe/Z

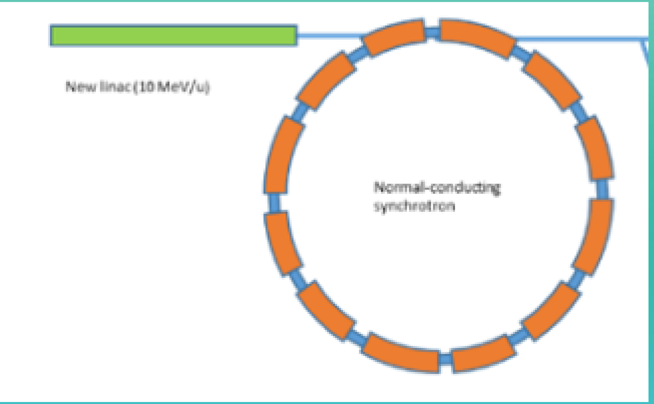
https://indico.cern.ch/event/956260/

Three alternative accelerator designs

Improved synchrotron (warm)

Equipped with several innovative features: multi-turn injection for higher beam intensity, new injector at higher gradient and energy, multiple extraction schemes, multi-ion.

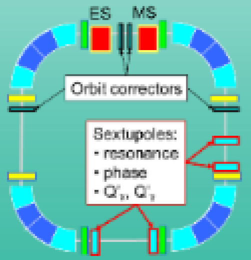
Circumference ~ 75 m



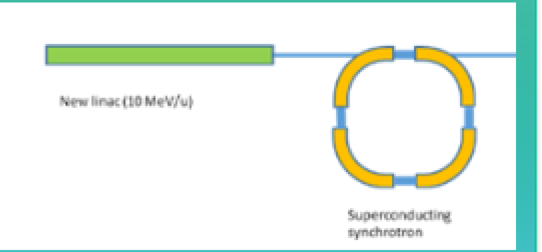
Improved synchrotron (superconducting)

Equipped with the same innovative features as warm, but additionally 90^0 superconducting magnets.

Circumference ~ 27 m



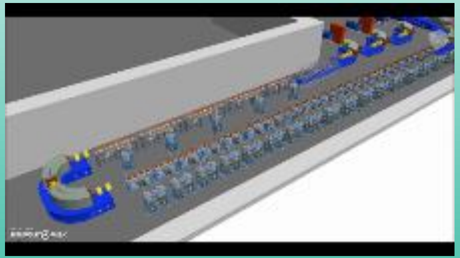
Courtesy: TERA

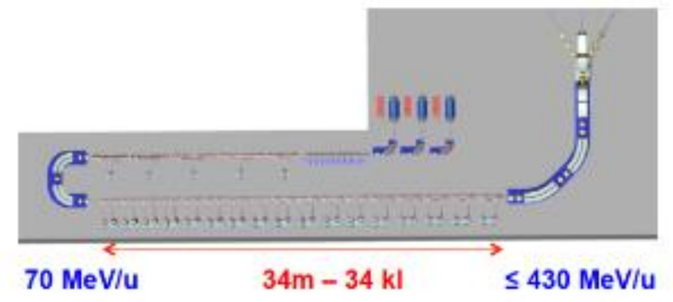


Linear accelerator

Linear sequence of accelerating cells, high pulse frequency.

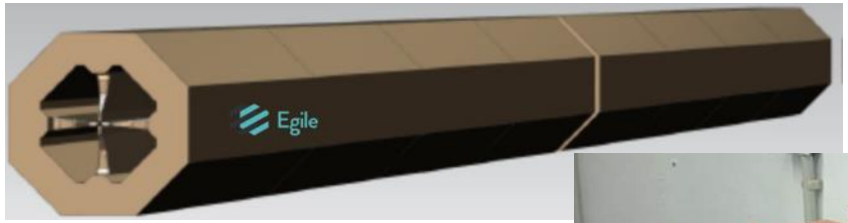
Length ~ 53 m

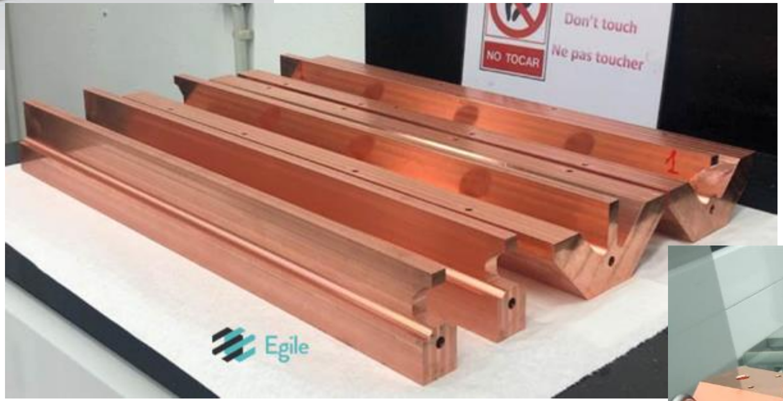


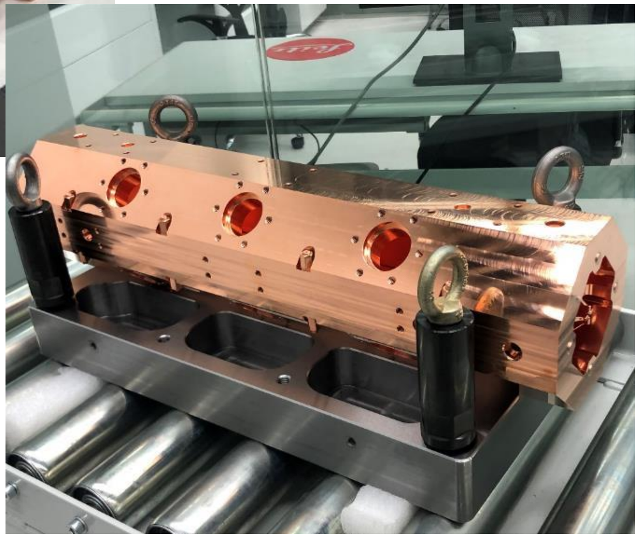


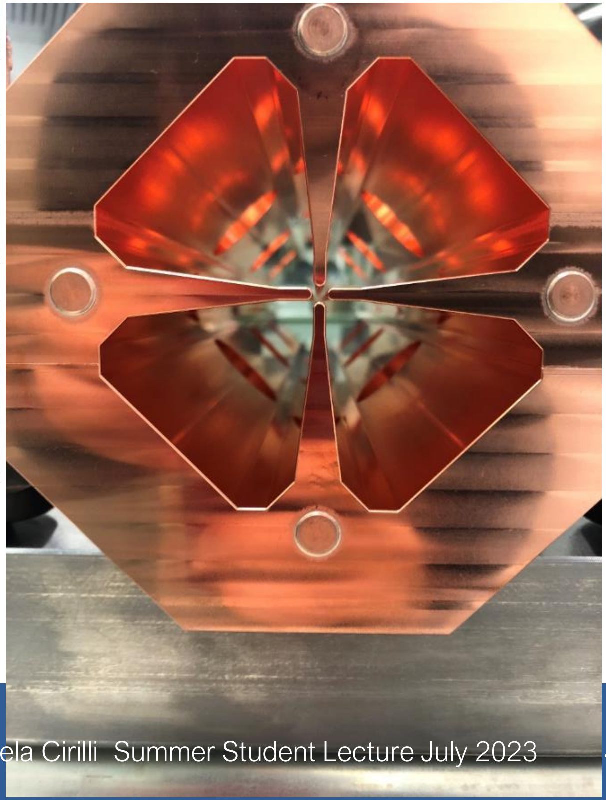
Other options considered as less interesting because of cost and/or required R&D: RC synchrotron, FFAG, SC cyclotron, PWFA

The RFQ for C^{6+} LINAC option









Collaboration CERN-CIEMAT-CDTI-Spanish industry

2.0 m long

750 MHz

Will deliver Carbon (or Helium) at 5 MeV (total energy)

Designed at CERN built in Spanish Industry

R&D on gantries

GaToroid: A Novel Concept for a Superconducting Compact and Lightweight Gantry for Hadron Therapy

Collaboration CNAO-INFN-CERN-MedAustron

Developing enabling technologies for a next-generation compact and lightweight rotating gantry

FLASH therapy – a growing clinical interest

NATURE May 23, 1959 Vol. 183

Modification of the Oxygen Effect when Bacteria are given Large Pulses of Radiation

D. L. Dewey
J. W. Boag

Research Unit in Radiobiology,
British Empire Cancer Campaign,
Mount Vernon Hospital,
Northwood.

> Sci Transl Med. 2014 Jul 16;6(245):245ra93. doi: 10.1126/scitranslmed.3008973.

Ultrahigh dose-rate FLASH irradiation increases the differential response between normal and tumor tissue in mice

Vincent Favaudon [1], Laura Caplier [2], Virginie Monceau [3], Frédéric Pouzoulet [4], Mano Sayarath [4], Charles Fouillade [4], Marie-France Poupon [4], Isabel Brito [5], Philippe Hupé [6], Jean Bourhis [7], Janet Hall [4], Jean-Jacques Fontaine [2], Marie-Catherine Vozenin [8]

Affiliations + expand

PMID: 25031268 DOI: 10.1126/scitranslmed.3008973

In vitro studies suggested that sub-millisecond pulses of radiation elicit less genomic instability than continuous, protracted irradiation at the same total dose. To determine the potential of ultrahigh dose-rate irradiation in radiotherapy, we investigated lung fibrogenesis in C57BL/6J mice exposed either to short pulses (≤ 500 ms) of radiation delivered at ultrahigh dose rate (≥ 40 Gy/s, FLASH) or to conventional dose-rate irradiation (≤ 0.03 Gy/s, CONV) in single doses. The growth of human HBCx-12A and HEp-2 tumor xenografts in nude mice and syngeneic TC-1 Luc(+) orthotopic lung tumors in C57BL/6J mice was monitored under similar radiation conditions. CONV (15 Gy) triggered lung fibrosis associated with activation of the TGF-β (transforming growth factor-β) cascade, whereas no complications developed after doses of FLASH below 20 Gy for more than 36 weeks after irradiation. FLASH irradiation also spared normal smooth muscle and epithelial cells from acute radiation-induced apoptosis, which could be reinduced by administration of systemic TNF-α (tumor necrosis factor-α) before irradiation. In contrast, FLASH was as efficient as CONV in the repression of tumor growth. Together, these results suggest that FLASH radiotherapy might allow complete eradication of lung tumors and reduce the occurrence and severity of early and late complications affecting normal tissue.

FLASH therapy – a growing clinical interest

Vozenin et al
Clin Cancer Res
2018

Contents lists available at ScienceDirect
Radiotherapy and Oncology
journal homepage: www.thegreenjournal.com
ELSEVIER

Original Article

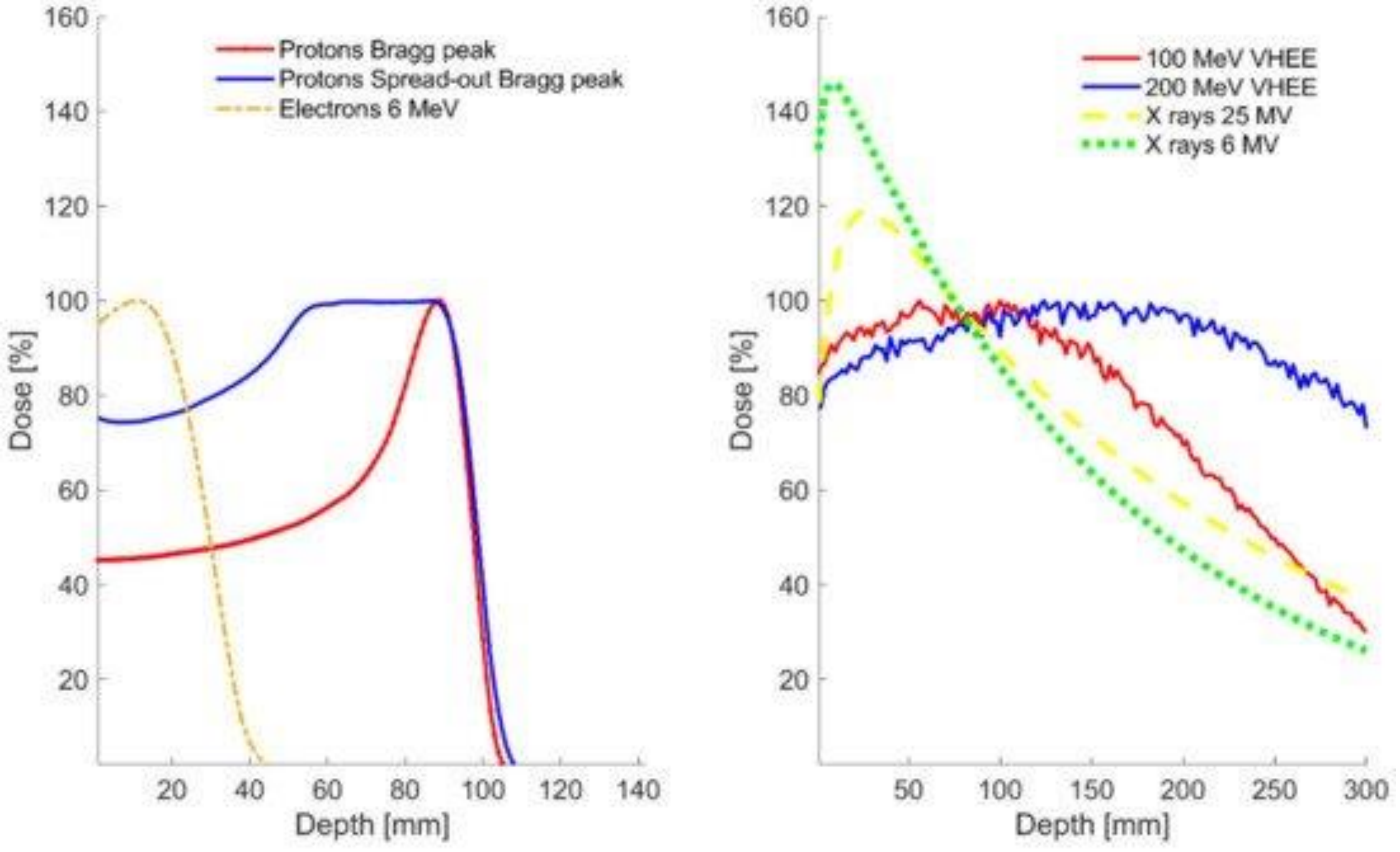
Treatment of a first patient with FLASH-radiotherapy

Jean Bourhis [a,b,*], Wendy Jeanneret Sozzi [a], Patrik Gonçalves Jorge [a,b,c], Olivier Gaide [d], Claude Bailat [c], Fréderic Duclos [a], David Patin [a], Mahmut Ozsahin [a], François Bochud [c], Jean-François Germond [c], Raphaël Moeckli [c,1], Marie-Catherine Vozenin [a,b,1]

[a] Department of Radiation Oncology, Lausanne University Hospital and University of Lausanne; [b] Radiation Oncology Laboratory, Department of Radiation Oncology, Lausanne University Hospital and University of Lausanne; [c] Institute of Radiation Physics, Lausanne University Hospital and University of Lausanne; and [d] Department of Dermatology, Lausanne University Hospital and University of Lausanne, Switzerland

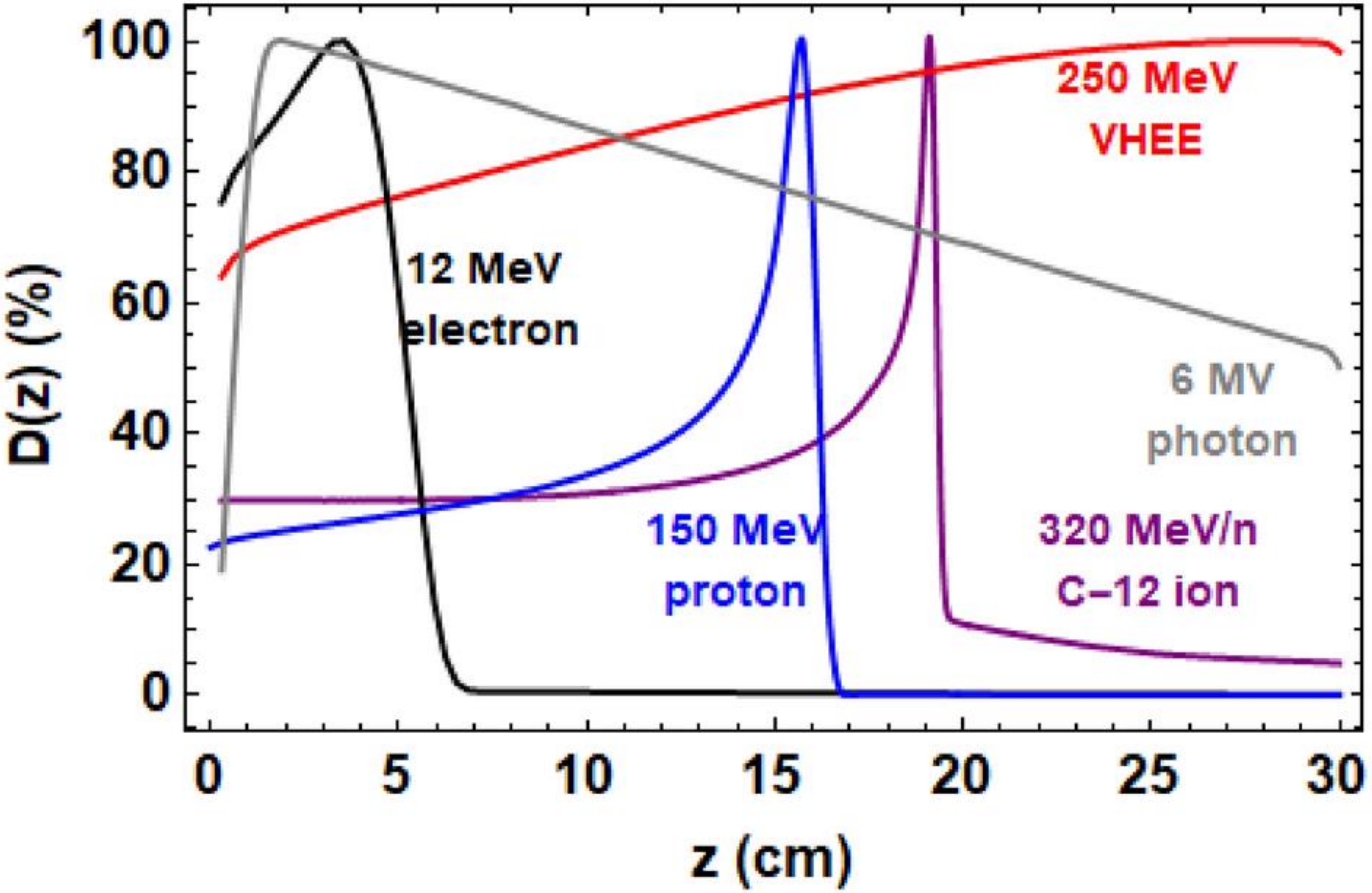
Fig. 1. Temporal evolution of the treated lesion: (a) before treatment; the limits of th PTV are delineated in black; (b) at 3 weeks, at the peak of skin reactions (grade 1 epithelitis NCI-CTCAE v 5.0); (c) at 5 months.

First human patient – skin cancer treated with 10 MeV-range electrons



(a) (b)

https://www.mdpi.com/2072-6694/13/19/4942/htm



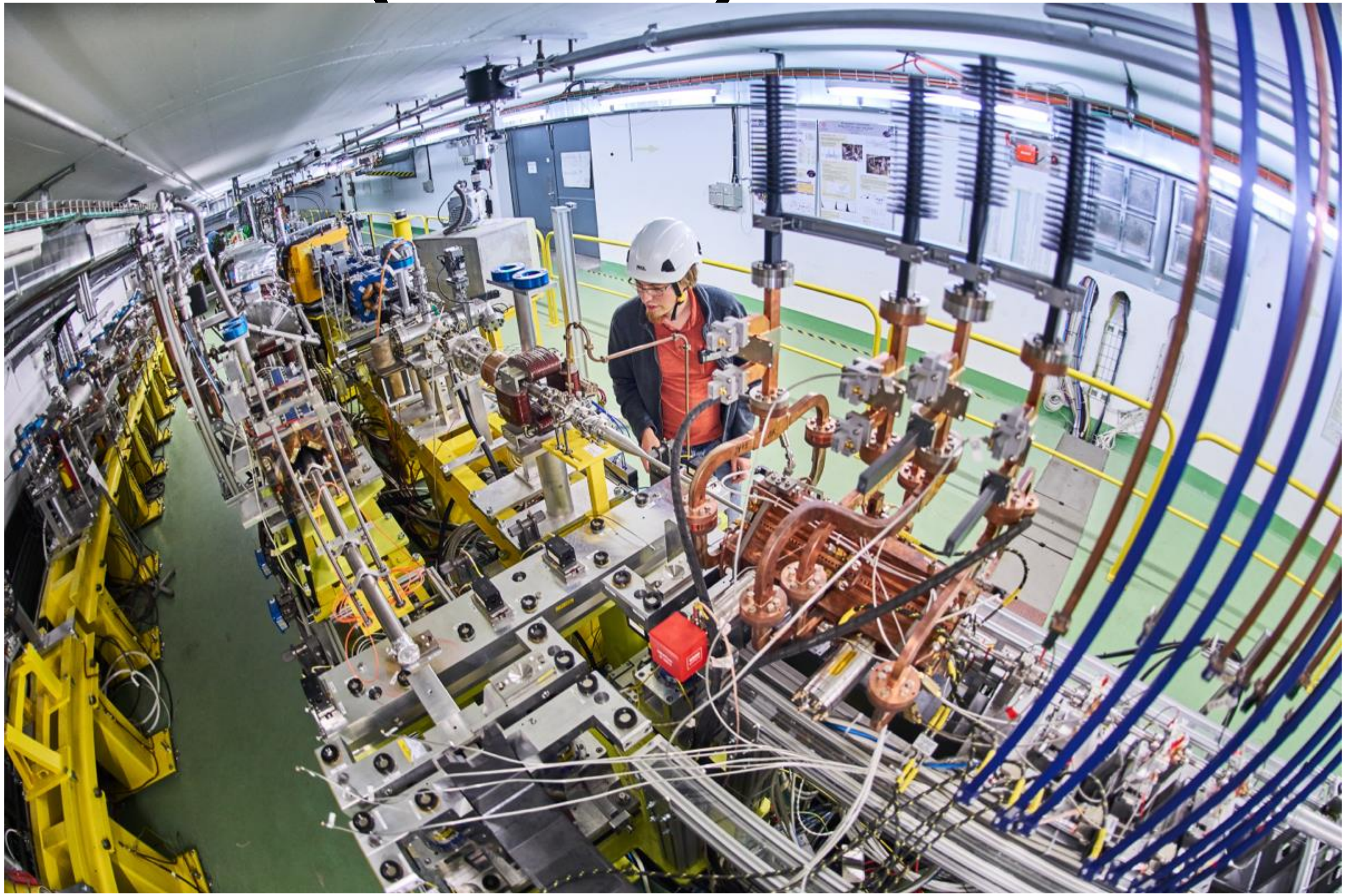
TOPAS-based Monte Carlo simulations of the integrated normalised dose deposited in the plane parallel to the direction of an incident Gaussian beam (σ=4mm). All beams are in the absence of focusing

https://www.nature.com/articles/s41598-021-93276-8#Fig1

The CERN Linear Electron Accelerator for Research (CLEAR)

clear

CLEAR is a versatile 200 MeV electron linac + a 20m experimental beamline, operated at CERN as a multi-purpose user facility.



VHEE activities in CLEAR

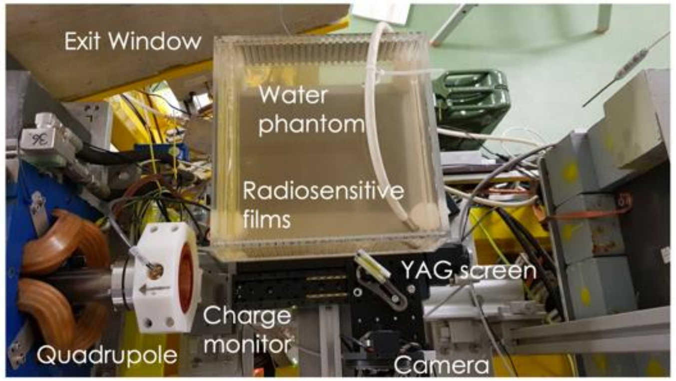
clear

Calibration of operational medical dosimeters – nonlinear effects with high-dose short pulses

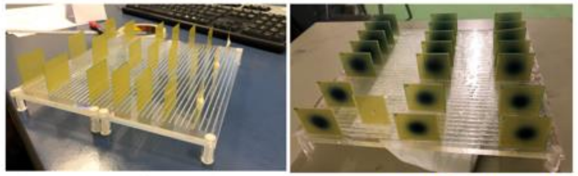
Verification of FLASH effect using biological dosimeters

Experimental verification of dose deposition profiles in water phantoms

Demonstration of “Bragg-like peak” deposition with focused beams



Strathclyde and Manchester



Films set-up for profile depth dose, CHUV Lausanne *(M.C. Vozenin, C. Bailat, R. Moeckli et al.)*

Calorimeter and ROOS chamber, Nat. Phys. Lab. UK *(A. Subiel et al.)*

Advance Markus chambers and SRS Array, Oldenburg University and PTW *(B. Poppe, D. Poppinga et al.)*

A. Lagdza, R. Jones et al., Influence of heterogeneous media on Very High Energy Electron (VHEE) dose penetration and a Monte Carlo-based comparison with existing radiotherapy modalities, Nuclear Inst. and Meth. in Physics Research, B, 482 (2020) 70-81.

M. McManus, A. Subiel et al., The challenge of ionisation chamber dosimetry in ultra-short pulsed high dose-rate Very High Energy Electron beams, Nature Scientific Reports (2020) 10-9089.

Small, K.L., Henthorn, et al., Evaluating very high energy electron RBE from nanodosimetric pBR322 plasmid DNA damage, Nature Sci. Rep. 11, 3341 (2021).

D. Poppinga et al., VHEE beam dosimetry at CERN Linear Electron Accelerator for Research under ultra-high dose rate conditions, 2021 Biomed. Phys. Eng. Express 7 015012.

Kokurewicz, K., Brunetti, E., Curcio, A. et al. An experimental study of focused very high energy electron beams for radiotherapy, Nature Commun. Phys. 4, 33 (2021).

Table 1. Main parameters for the VHEE sources cited in this document.

Beam Parameters	CLEAR	SPARC	NLCTA
Energy (MeV)	50–220	170	50–120
Bunch charge (pC/shot)	150	60	30
Bunch length rms (ps)	0.1–10	0.87	1
Repetition rate (Hz)	0.8–10	0.1–10	0.1–10
Beam size at water phantom surface (σ mm)	1.2	3.4	2

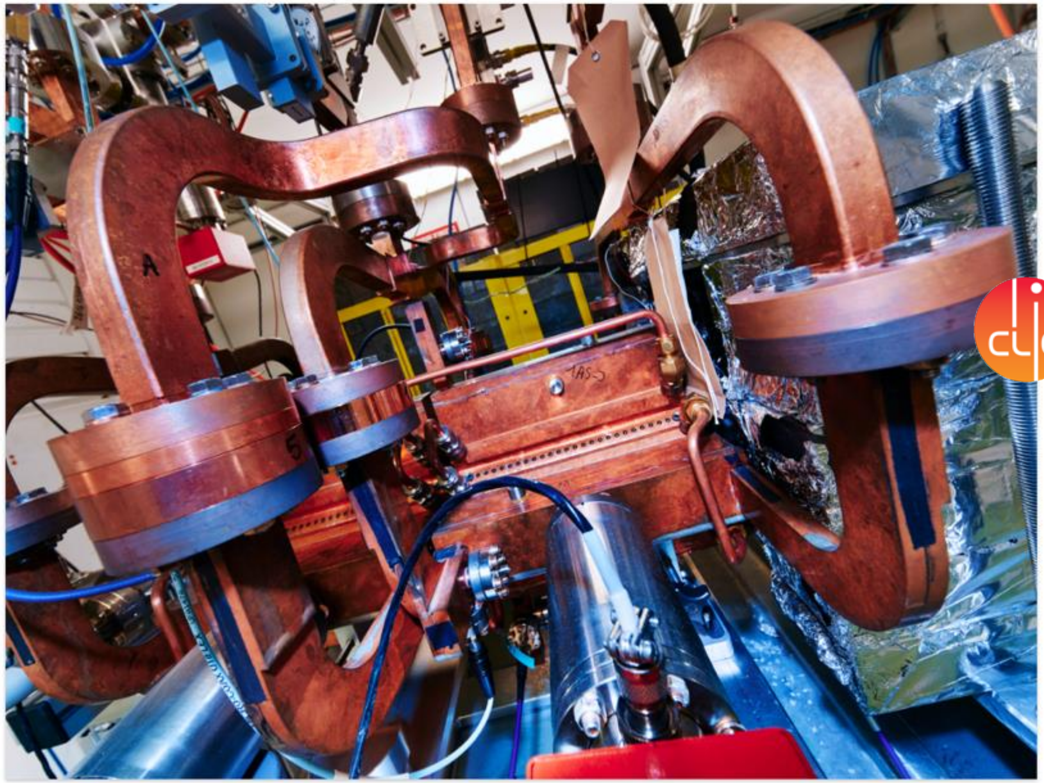
Table 2. List of facilities or accelerators under development for VHEE production.

Beam Parameters	PHASER	CLARA	PITZ	Argonne	Tsinghua University
Energy (MeV)	100–200	50 (−250)	20 (−250)	6–63	45 (−350)
Bunch charge (pC/shot)	-	20–100	0.1–5000	$100–10^5$	200
Bunch length rms (ps)	3.10^5	0.3–5	30	0.3	<2
Repetition rate (Hz)	10	10 (−100)	10	0.5–10	5–50

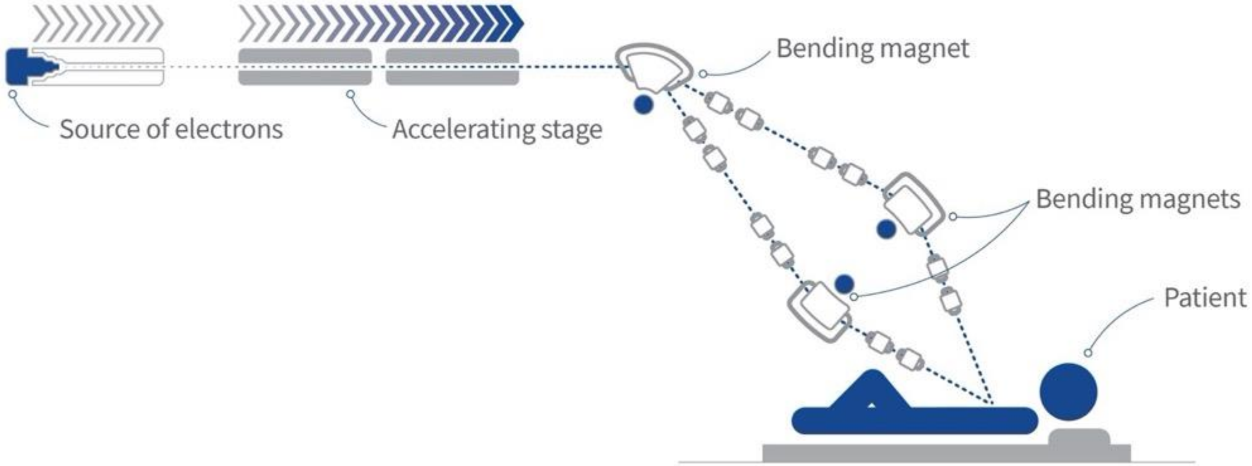
https://www.mdpi.com/2072-6694/13/19/4942/htm

FLASH VHEE therapy

CLIC technology for a FLASH VHEE facility designed by CERN in collaboration with CHUV that will be realized by THERYQ



Close-up of the Compact Linear Collider prototype, on which the electron FLASH design is based (Image: CERN)



An intense beam of electrons is produced in a photoinjector, accelerated to around 100 MeV and then is expanded, shaped and guided to the patient.

The design of this facility is the result of an intense dialogue between groups at CHUV and CERN.

Jean Bourhis from CHUV:
"The clinical need that we have really converges with the technological answer that CERN has."

The remarkable connection between CLIC technology and FLASH electron therapy

Very intense electron beams

CLIC – to provide brightness needed for delicate physics experiments

FLASH – to provide dose fast for biological FLASH effect

Very precisely controlled electron beams

CLIC – to reduce the power consumption of the facility

FLASH – to provide reliable treatment in a clinical setting

High accelerating gradient (that is high beam energy gain per length)

CLIC – fit facility in Lac Leman region and limit cost

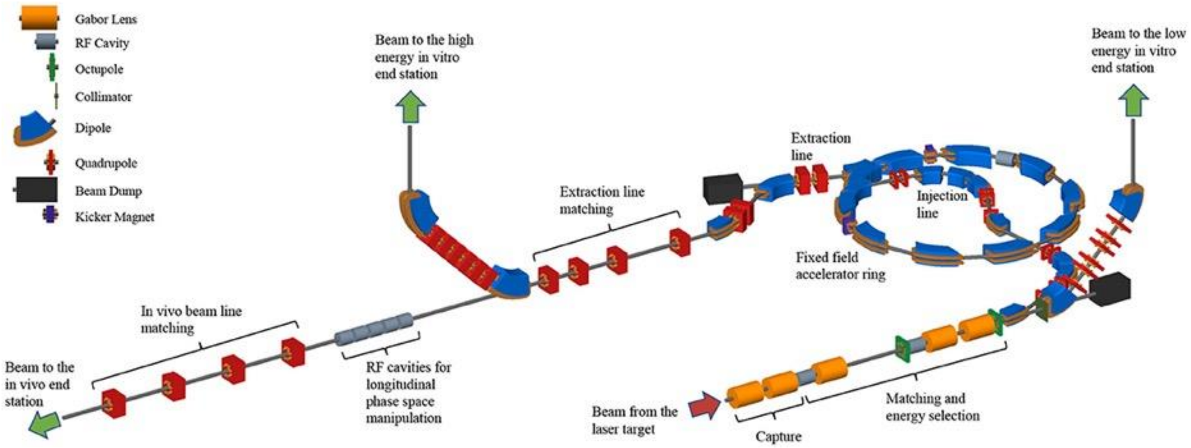
FLASH – fit facility on typical hospital campuses and limit cost of treatment

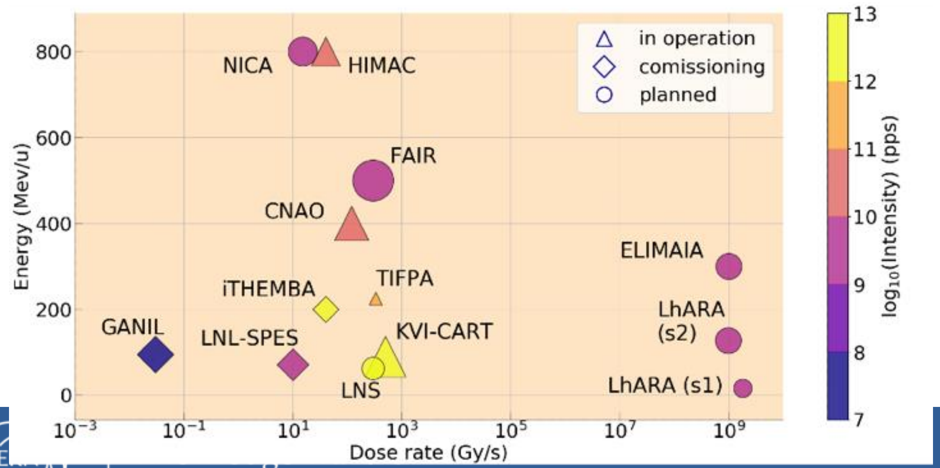
CERN KT Seminar on April 26th, 2021
https://indico.cern.ch/event/975980/

Look even further

LhARA

Laser-hybrid Accelerator for Radiobiological Applications

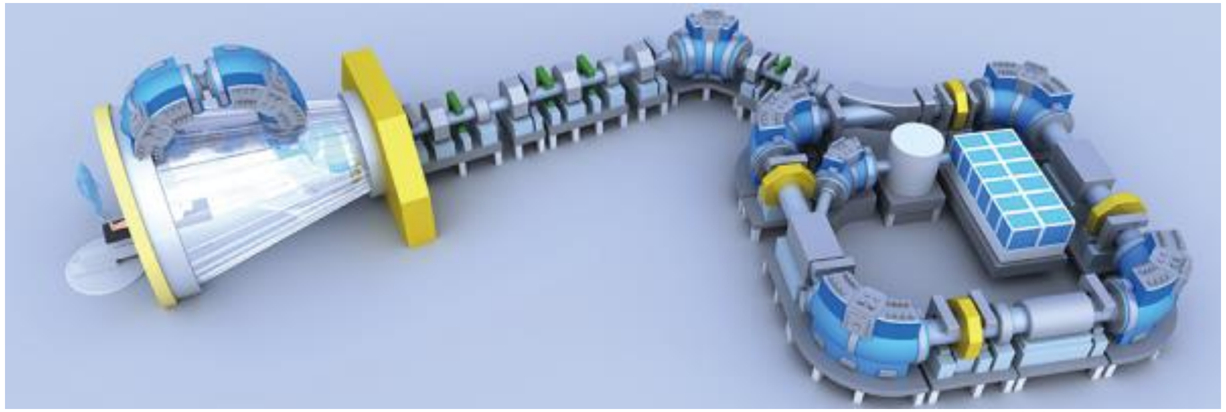




Credit: LhARA Consortium

Quantum Scalpel

Creation of Harmonious Diversity
QST National Institutes for Quantum Science and Technology



5th generation facility:

Superconducting synchrotron

Multi-ion irradiation system

Injector with laser acceleration technology

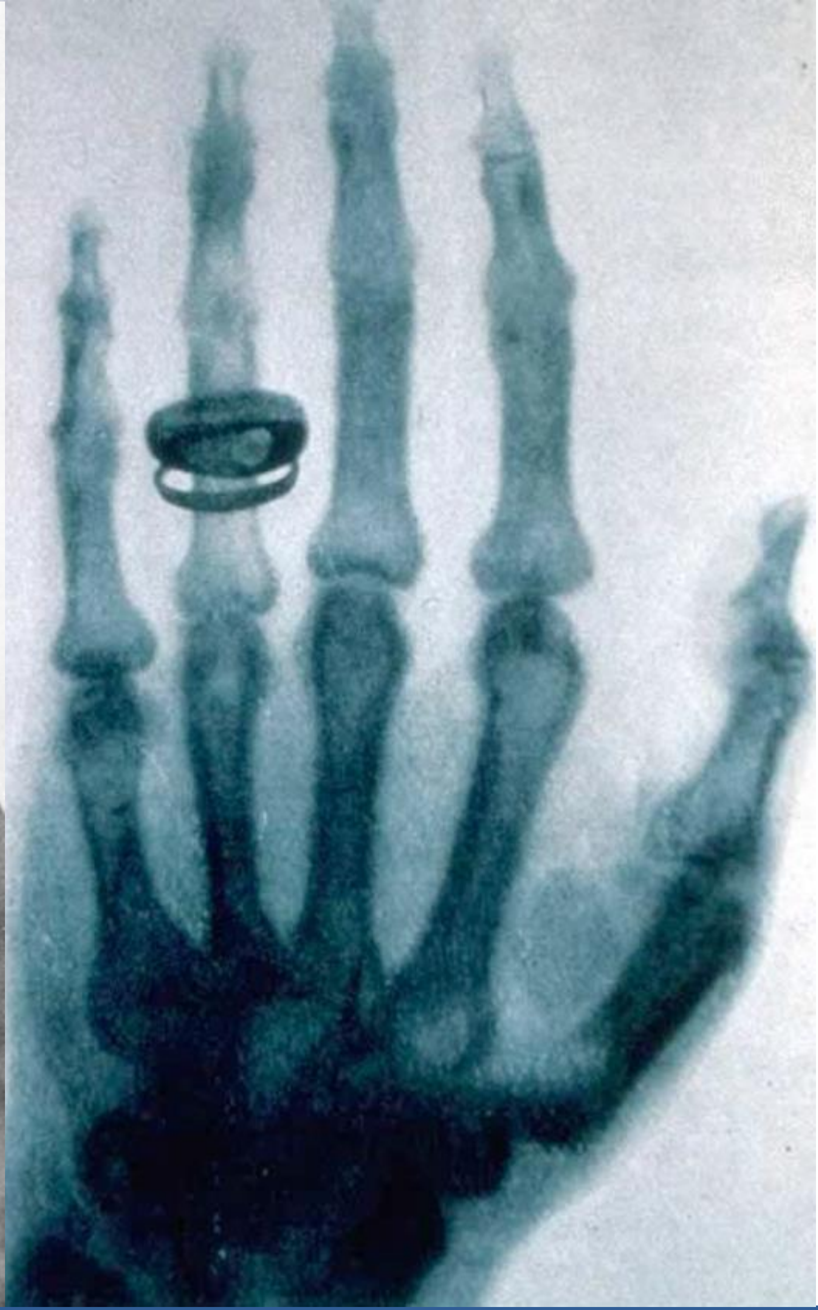
Rotating gantry with HTS magnets

Microsurgery system

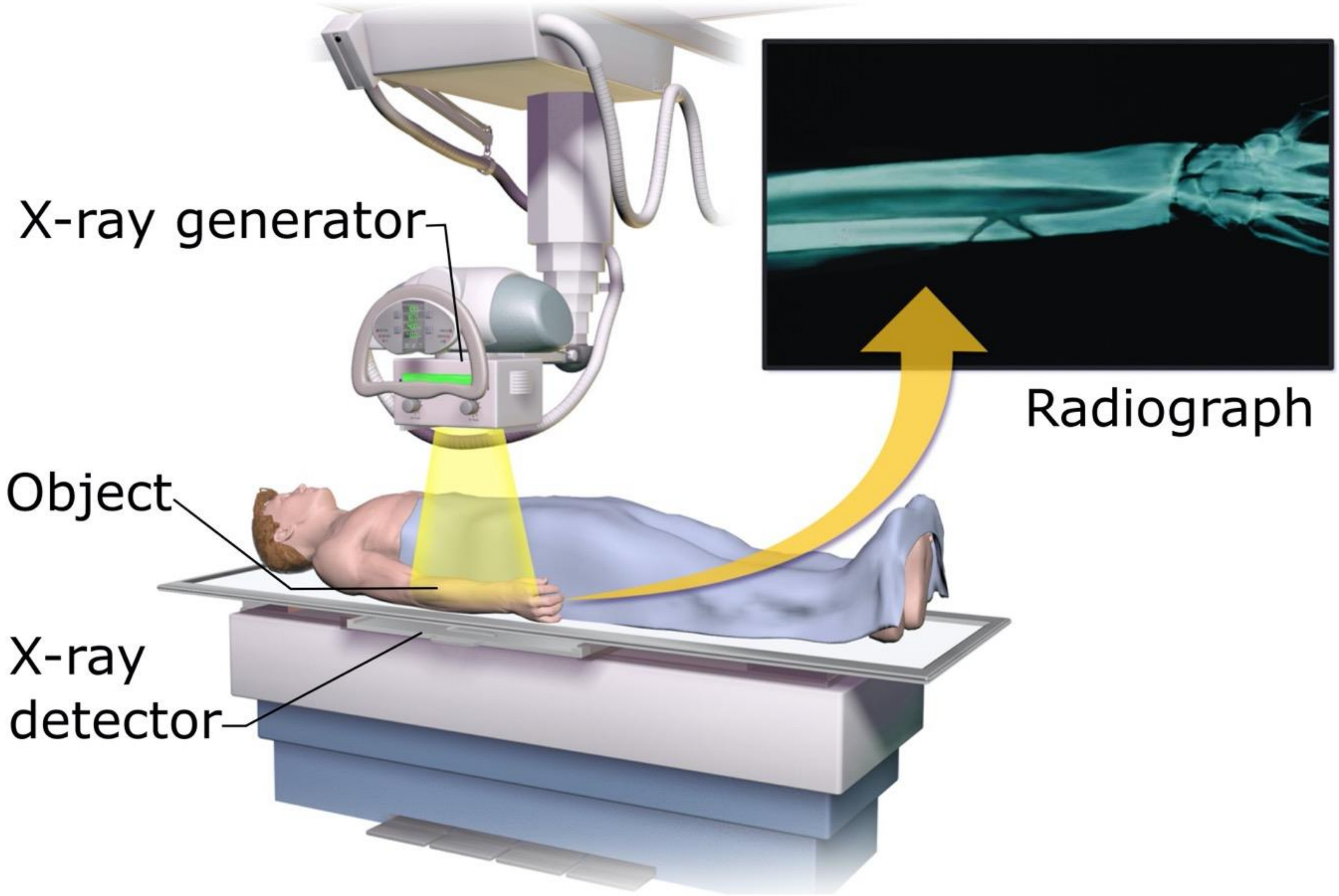
End part I

Photo: CNAO treatment room

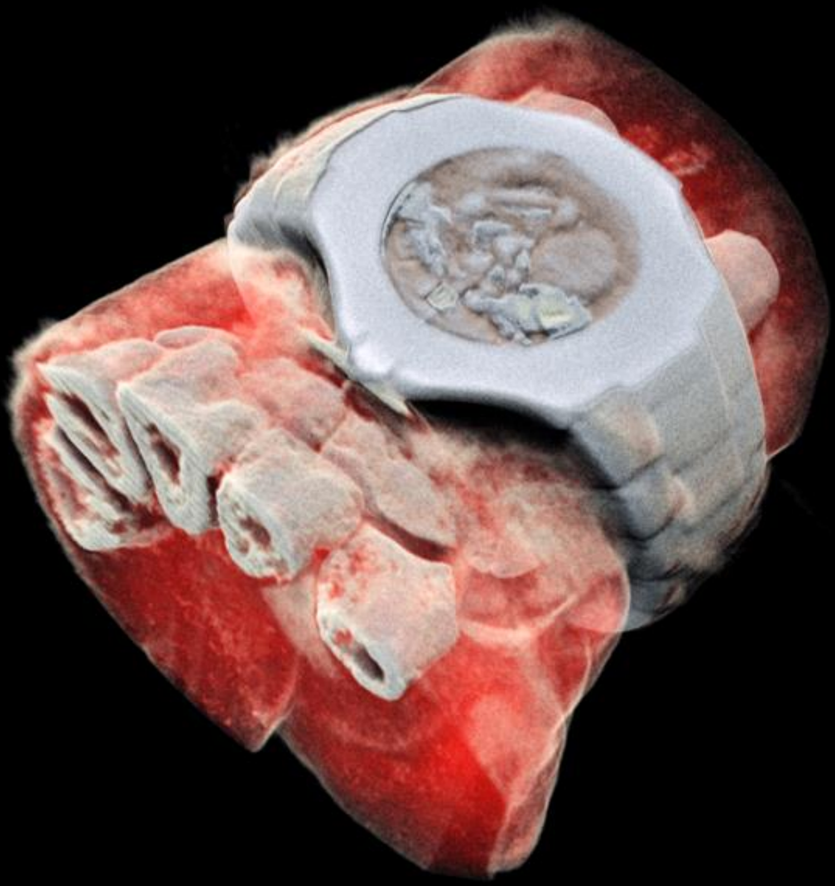
X RAYS



Projectional radiography



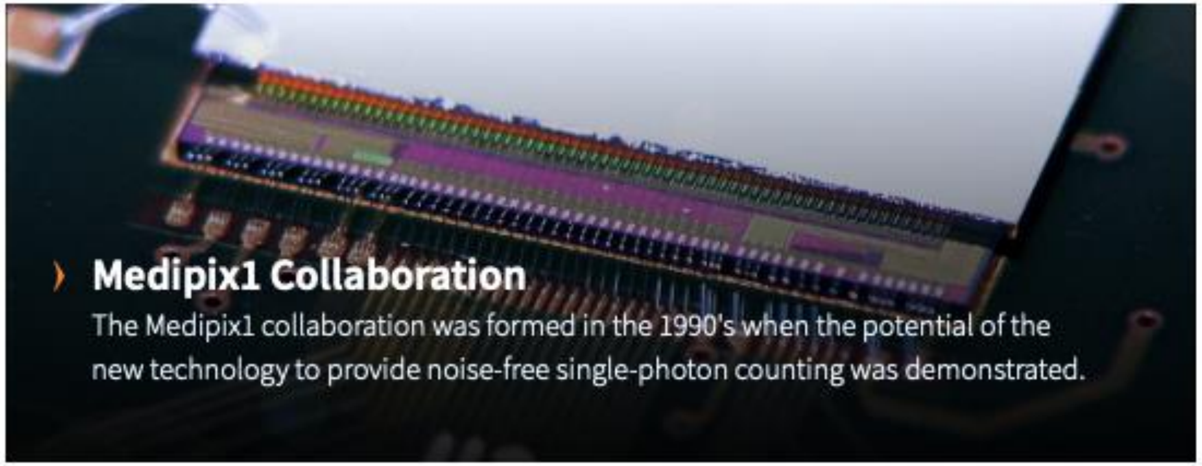
Fast forward to 2018

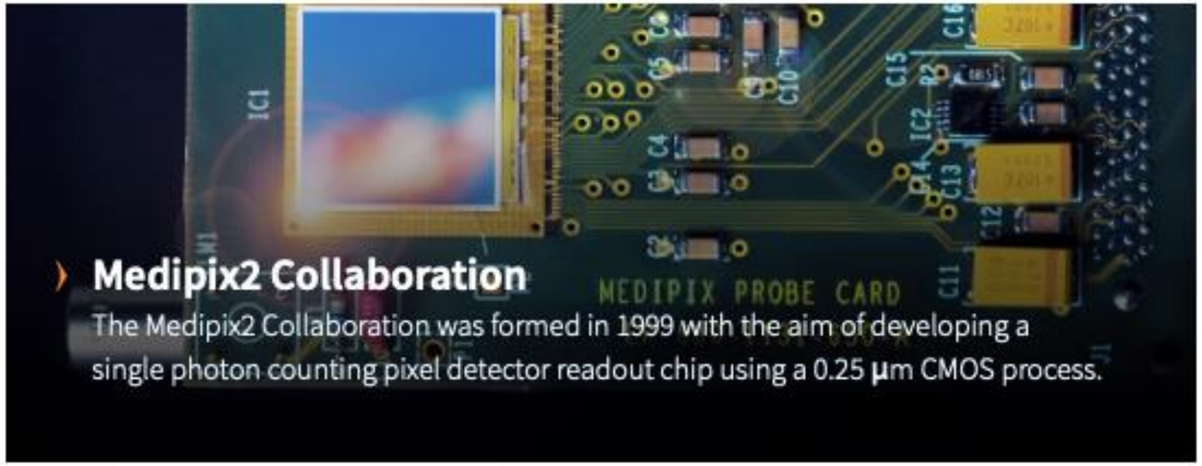


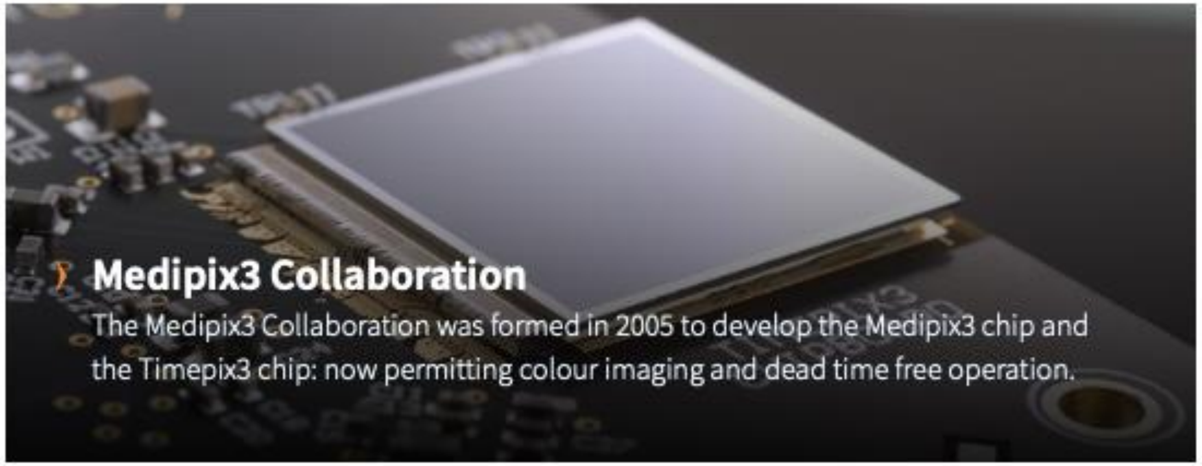
First 3D colour X-ray of human extremities using the Medipix3 technology developed at CERN

Medipix

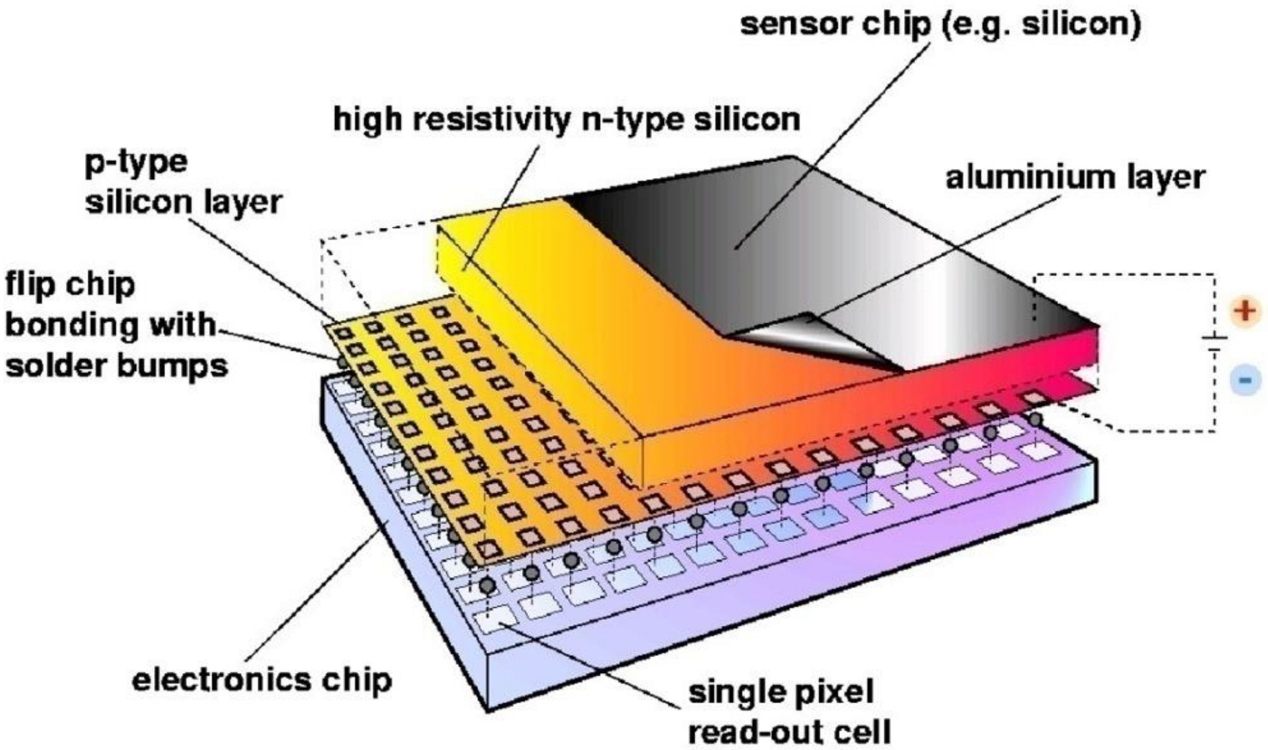
A family of pixel detector read-out chips for particle imaging and detection developed by the Medipix Collaborations

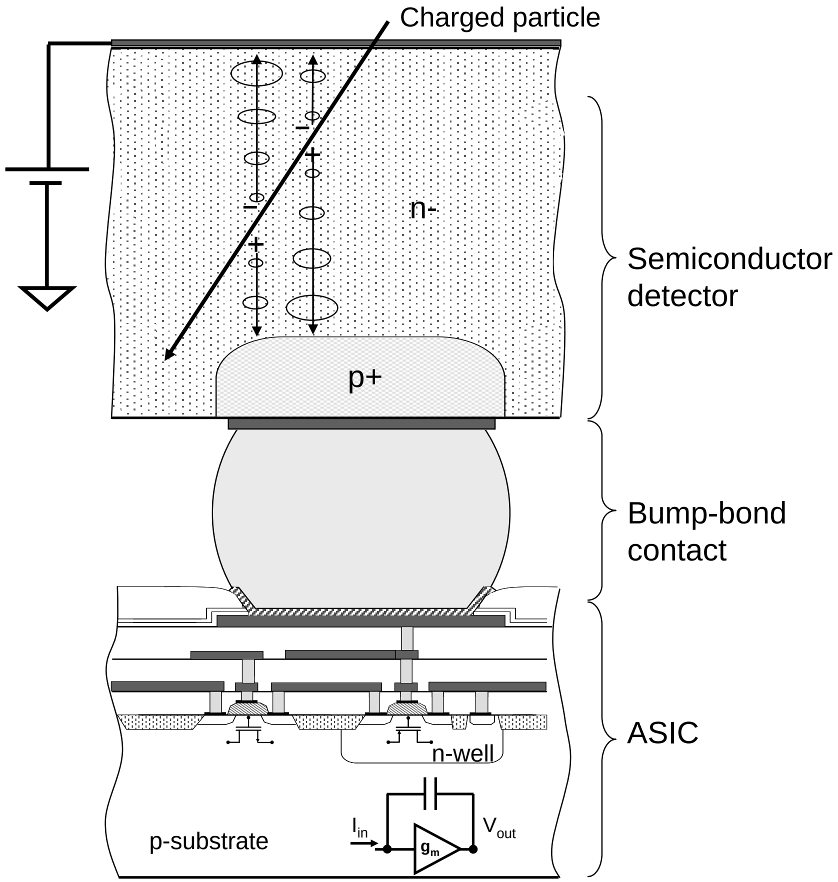






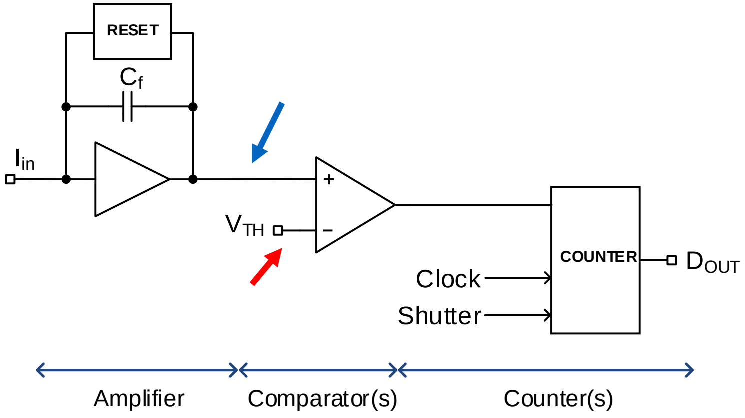
Hybrid Silicon Pixel Detectors

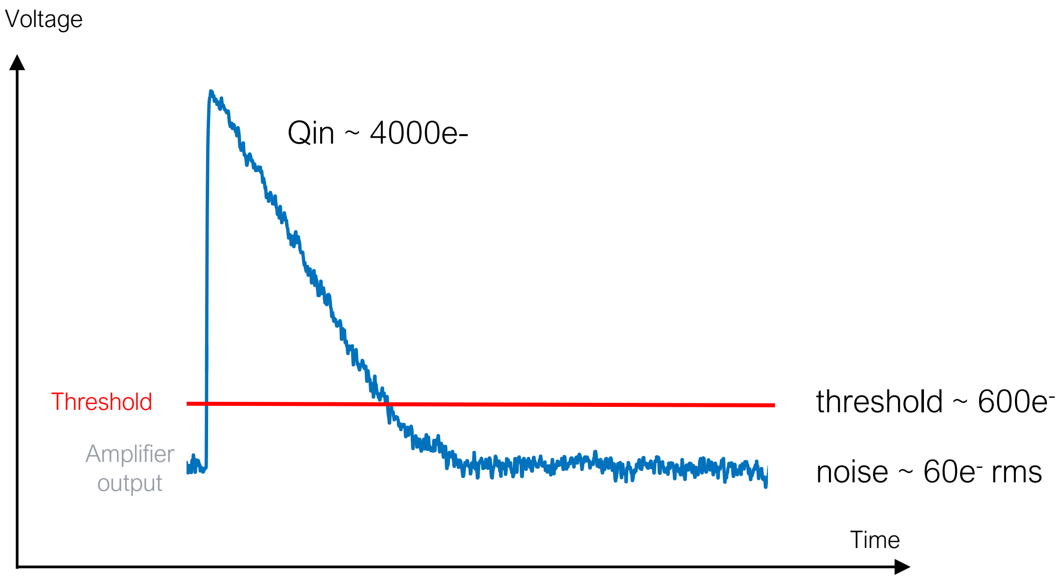


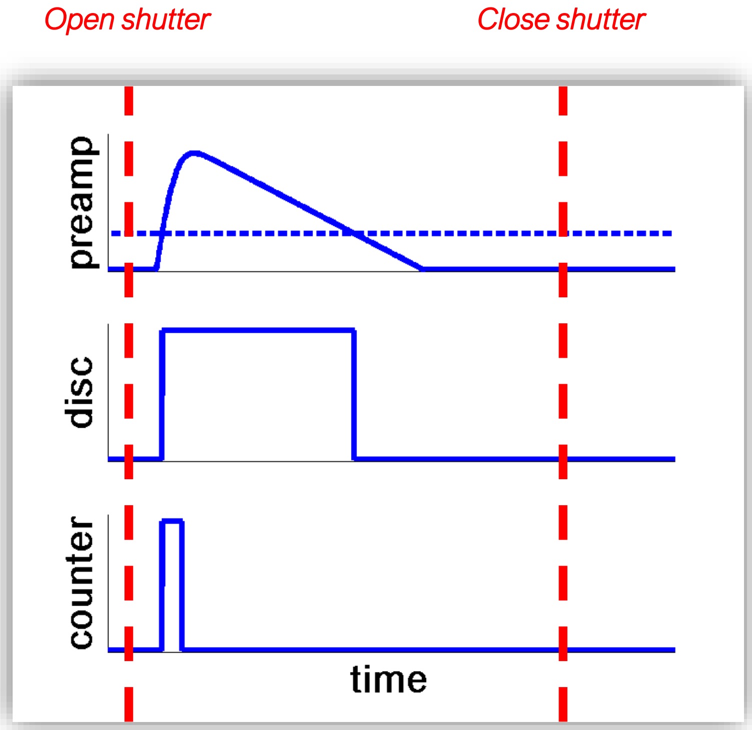


Noise-hit free particle detection
Standard CMOS can be used allowing on-pixel signal processing
Sensor material can be changed (Si, GaAs, CdTe..)

Hybrid Silicon Pixel Detectors: counting electronics

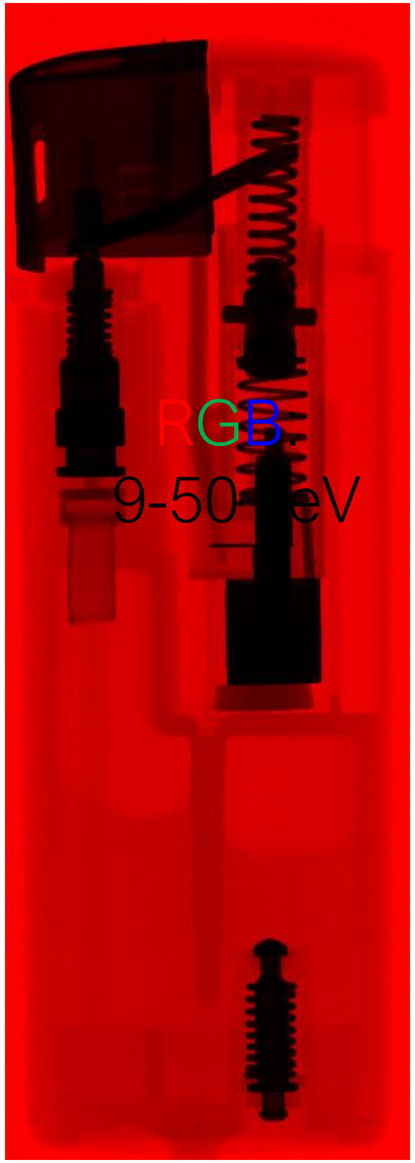


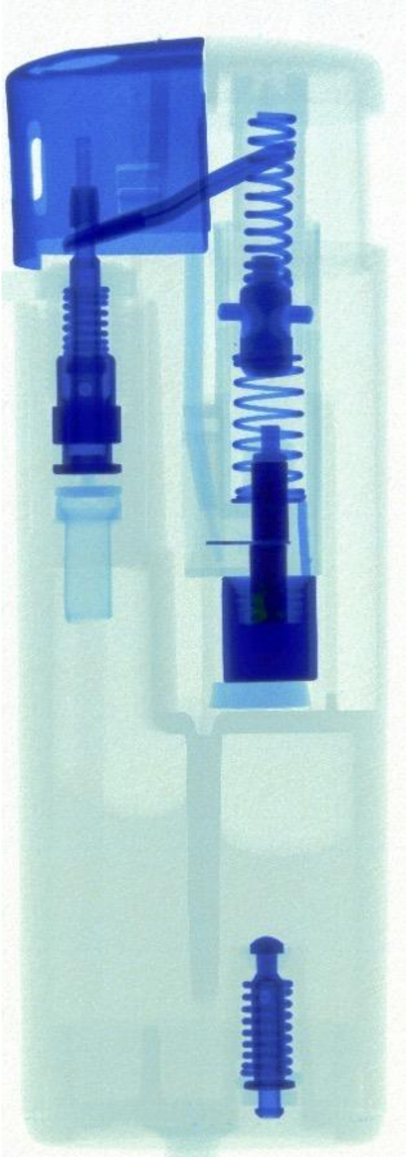


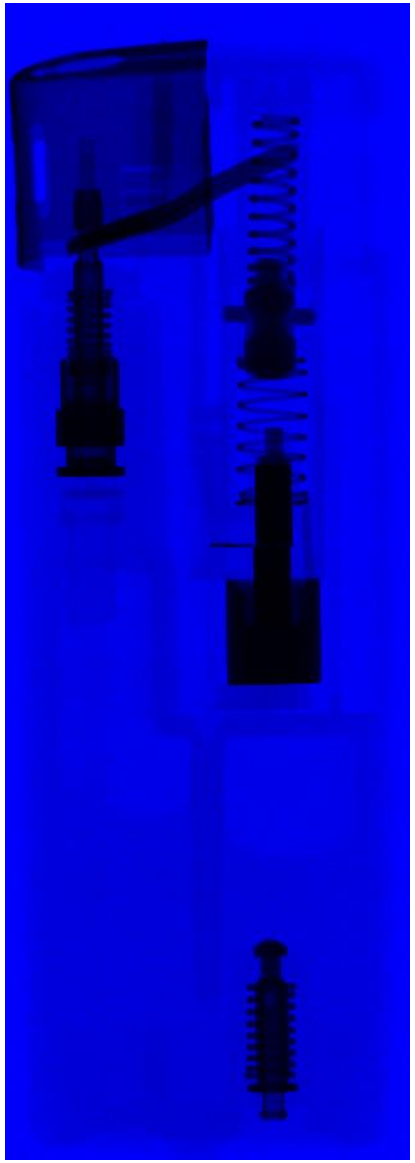


→ Noise hit free imaging

Colour x-ray of a lighter



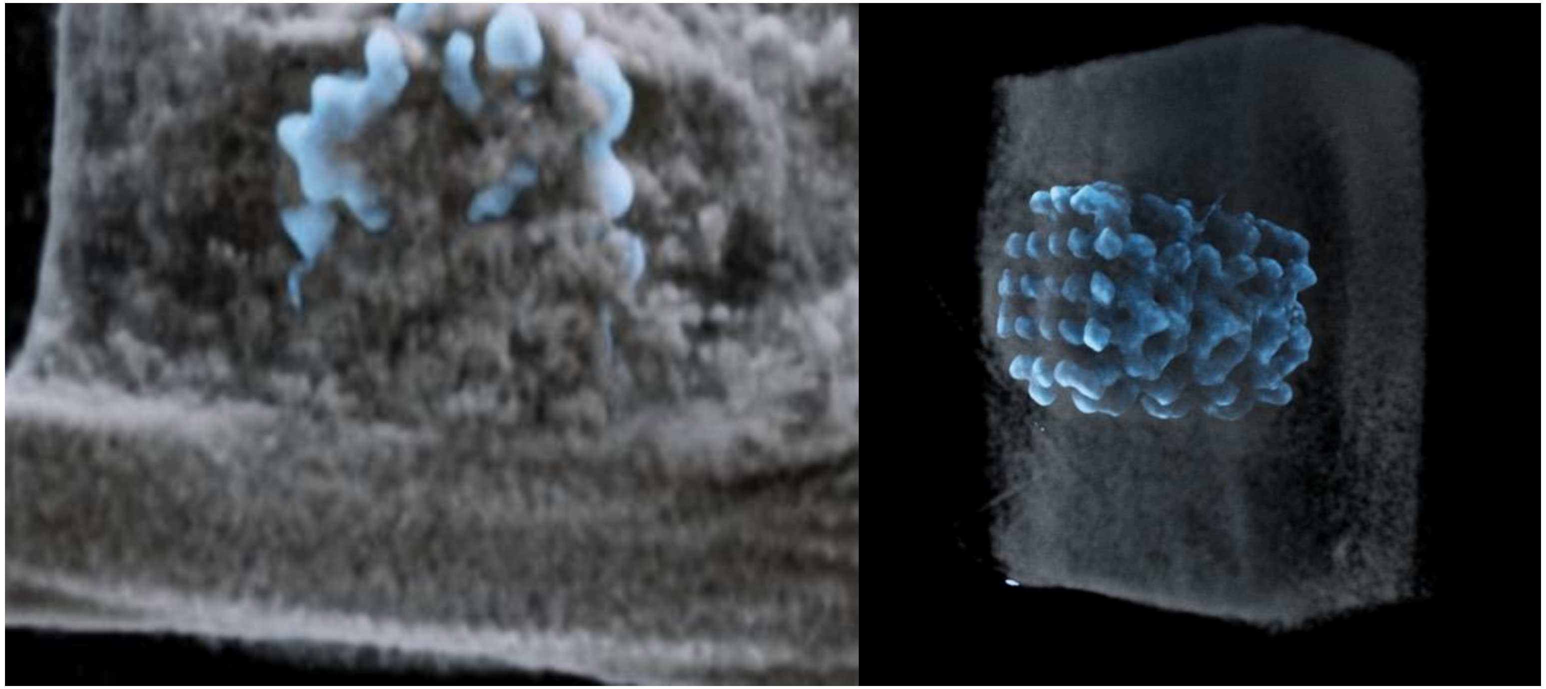




S. Procz et al.

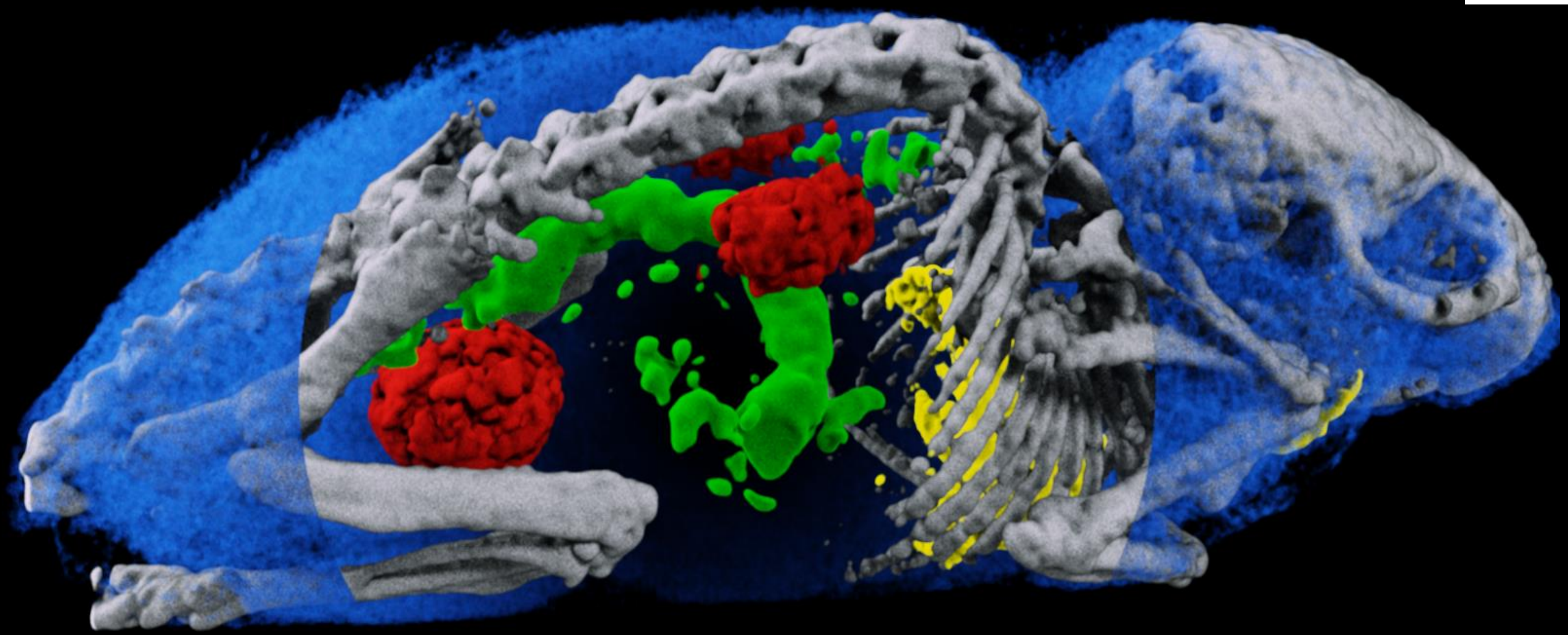
Spectral imaging of Joints

Titanium implant in sheep bone



Enables better understanding of
- process of bone ingrowth
- bone / implant interface

Spectroscopic information permits material separation



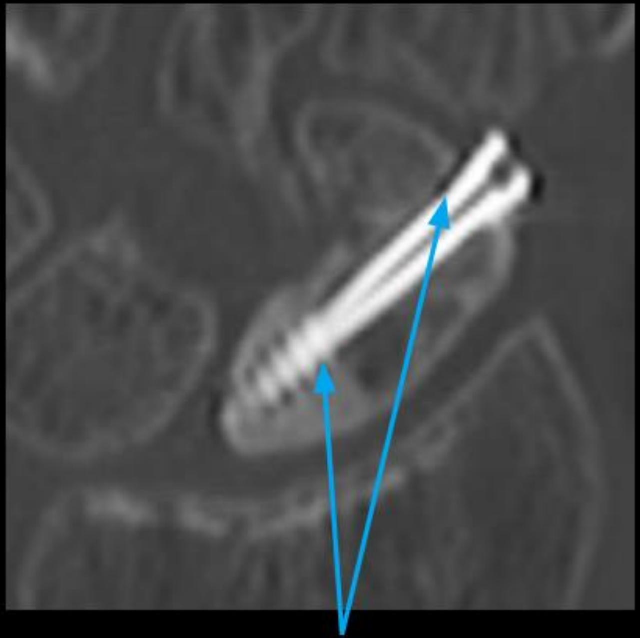
The water has been partly cut away to reveal the bone, gold, gadolinium and iodine

Images presented and the European Congress of Radiology, Vienna, March 2017.

CT versus MARS

Metal artefact

Standard CT



Metal artifact hides the bone-metal interface

Scaphoid screw

MARS

The bone-metal interface is visualised enabling assessment of peri-implant infection and osteolysis

MARS SPCCT Imaging technology is in concept development for human use. It is not a product and is not cleared or approved by the US FDA or any other regulator for commercial availability outside of New Zealand

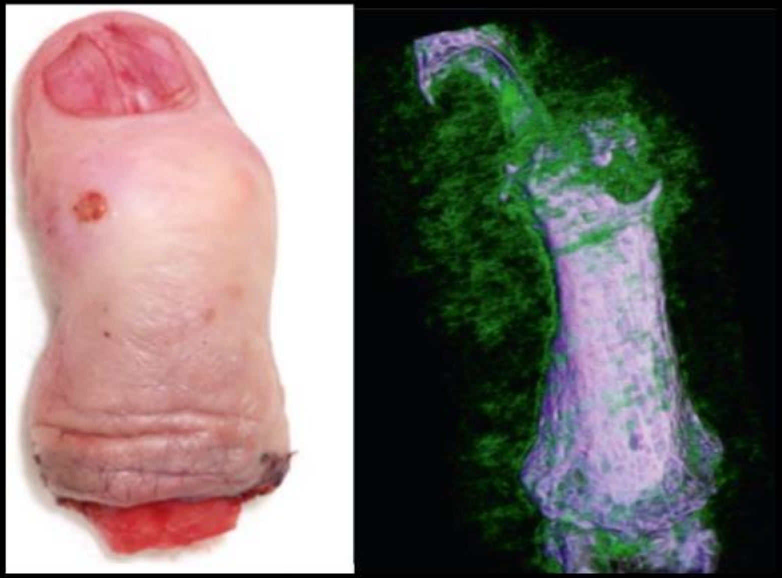
mars

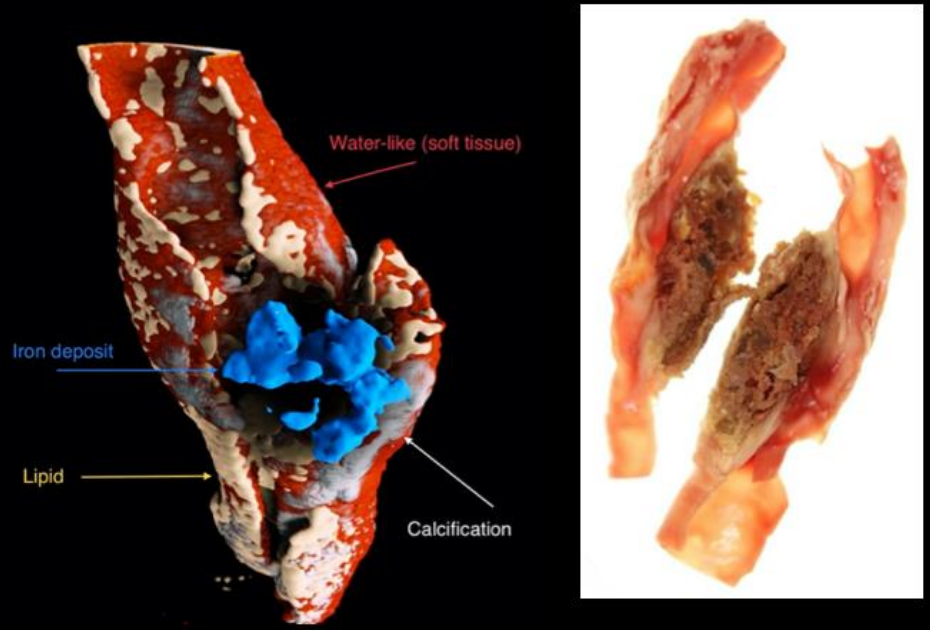
Slide courtesy of Anthony Butler, University of Canterbury

Presented at 6th Workshop on Medical Applications of Spectroscopic X-ray Detectors, 29 Aug 2022, CERN

Molecular versus MARS

MARS - intrinsic information





Gout crystal characterisation
(Collab with CHUV)

Carotid plaque with quantitative measurements of fat, water, calcium, and iron

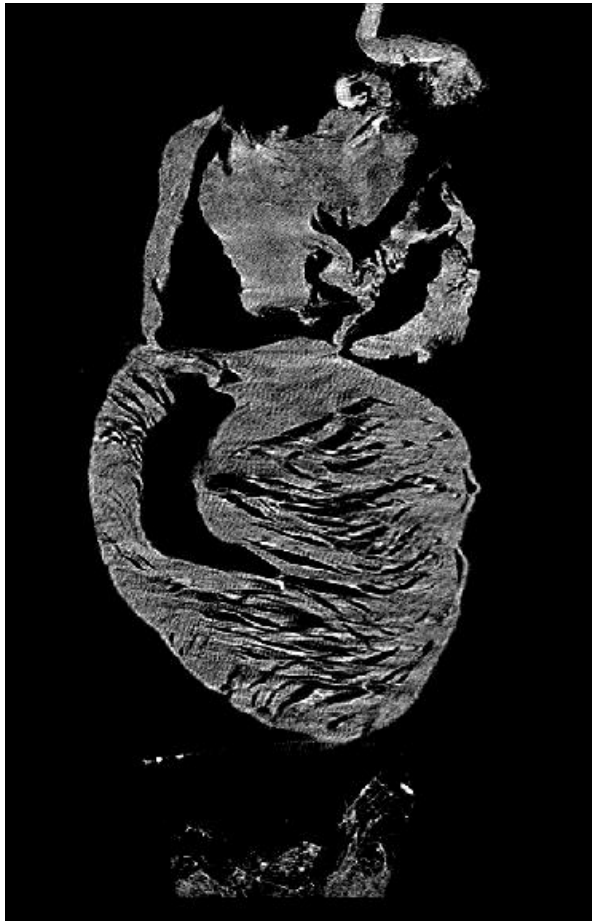
MARS SPCCT Imaging technology is in concept development for human use. It is not a product and is not cleared or approved by the US FDA or any other regulator for commercial availability outside of New Zealand

mars

Slide courtesy of Anthony Butler, University of Canterbury

Presented at 6th Workshop on Medical Applications of Spectroscopic X-ray Detectors, 29 Aug 2022, CERN

mars

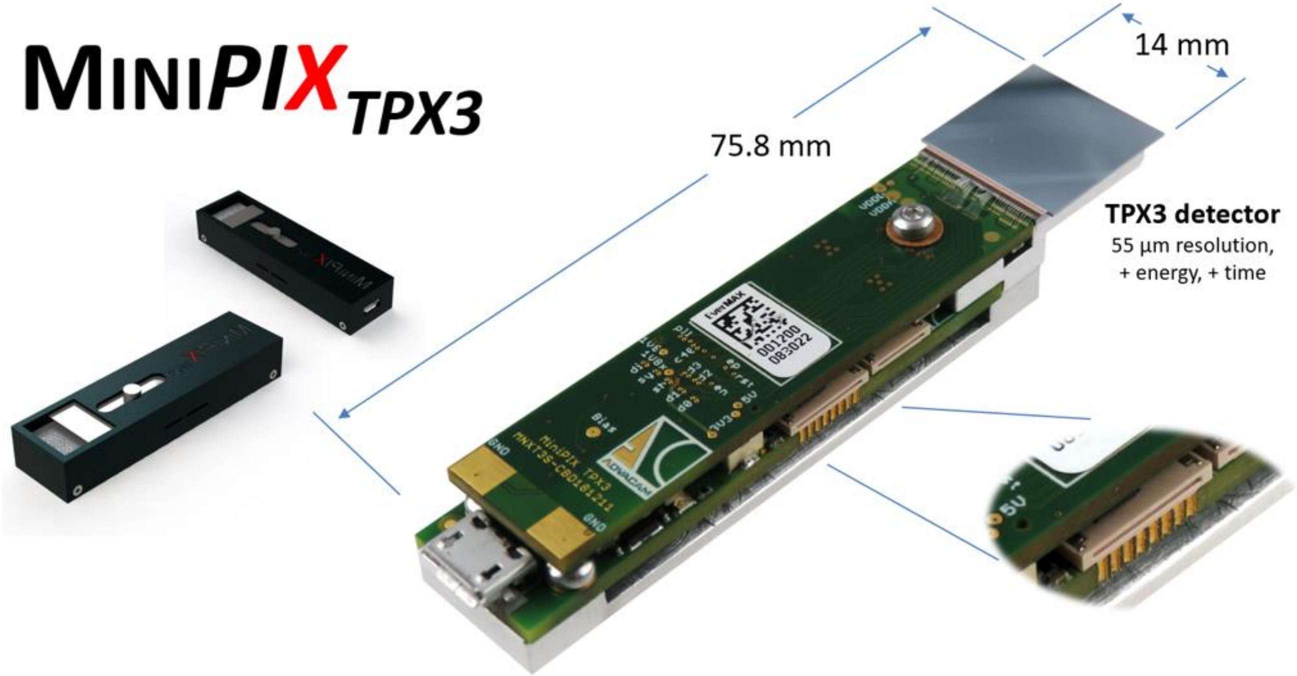


Ethanol-preserved mouse heart scanned using the WidePIX$_{10x5}$ detector
60 kVp tungsten spectrum
720 projections, 5 seconds per projection (one hours total)
Spatial resolution ca. 7 μm
Reconstructed using Volex, visualized using CTVox and Amide software

MiniPIX TPX3

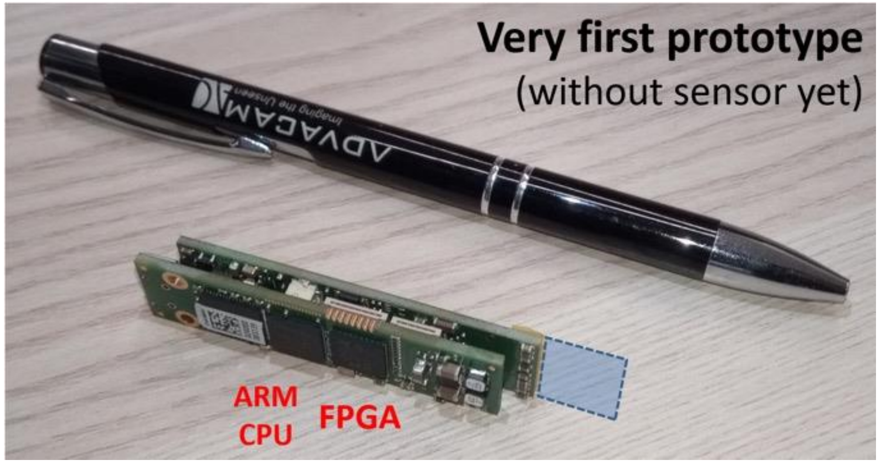
Miniaturized spectral camera supporting Si and CdTe sensors

MINIPIX TPX3

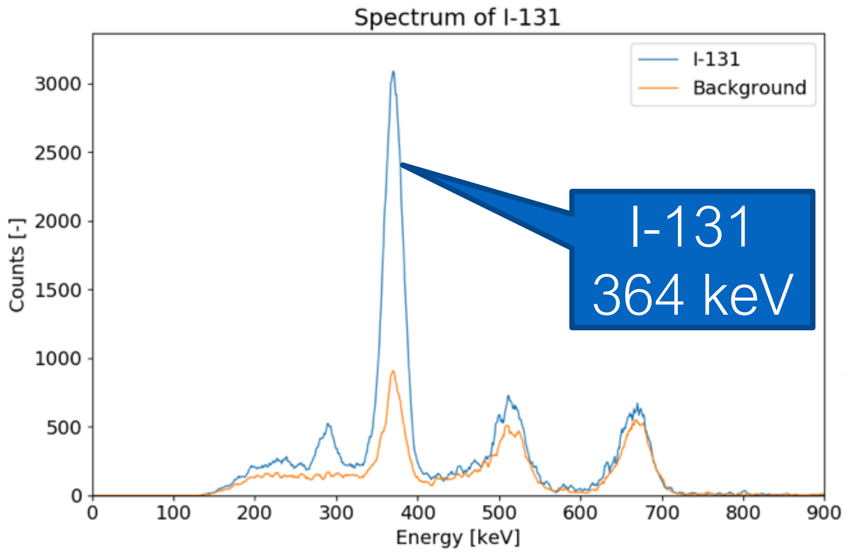


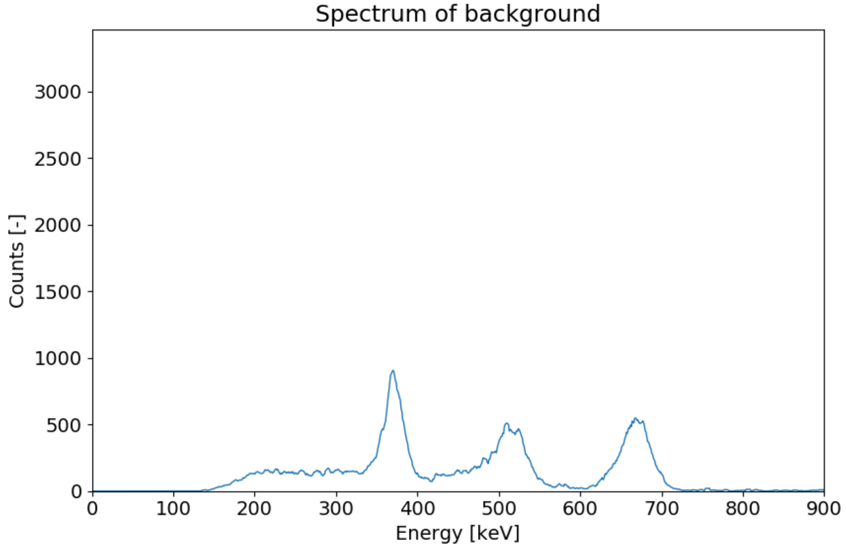
ADVACAM
Imaging the Unseen

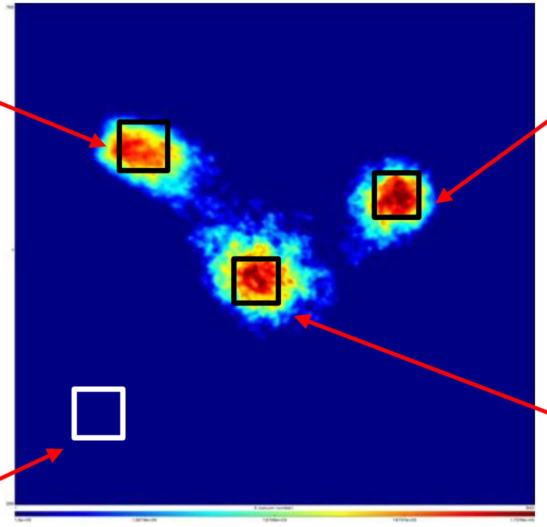
It's really small...

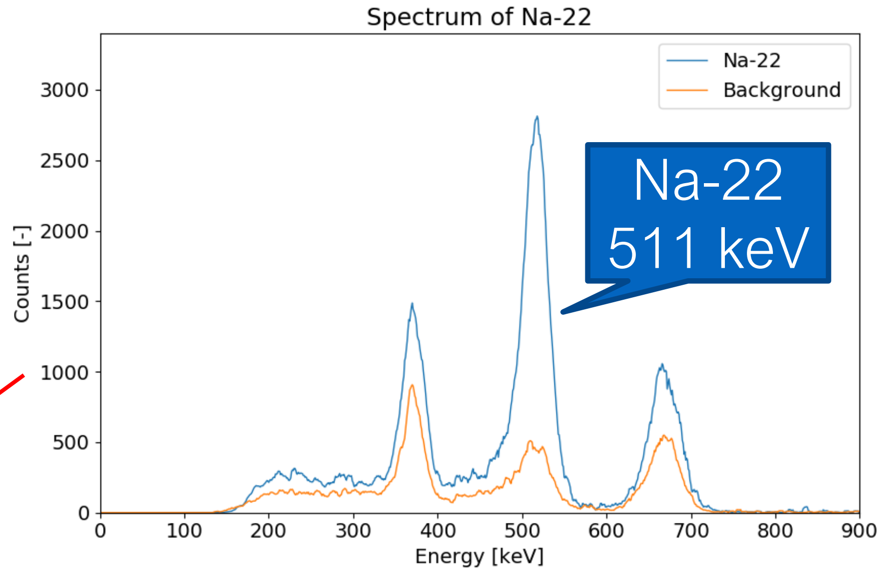


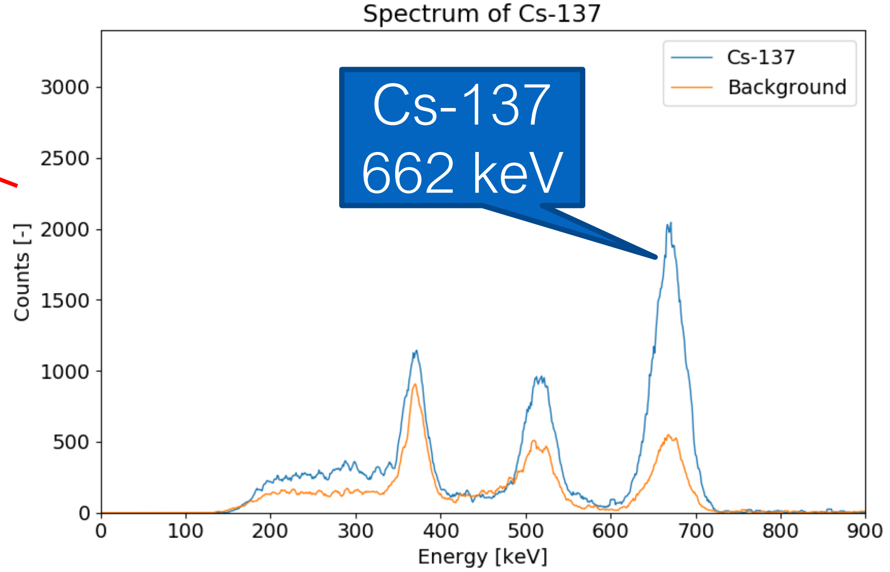
Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources





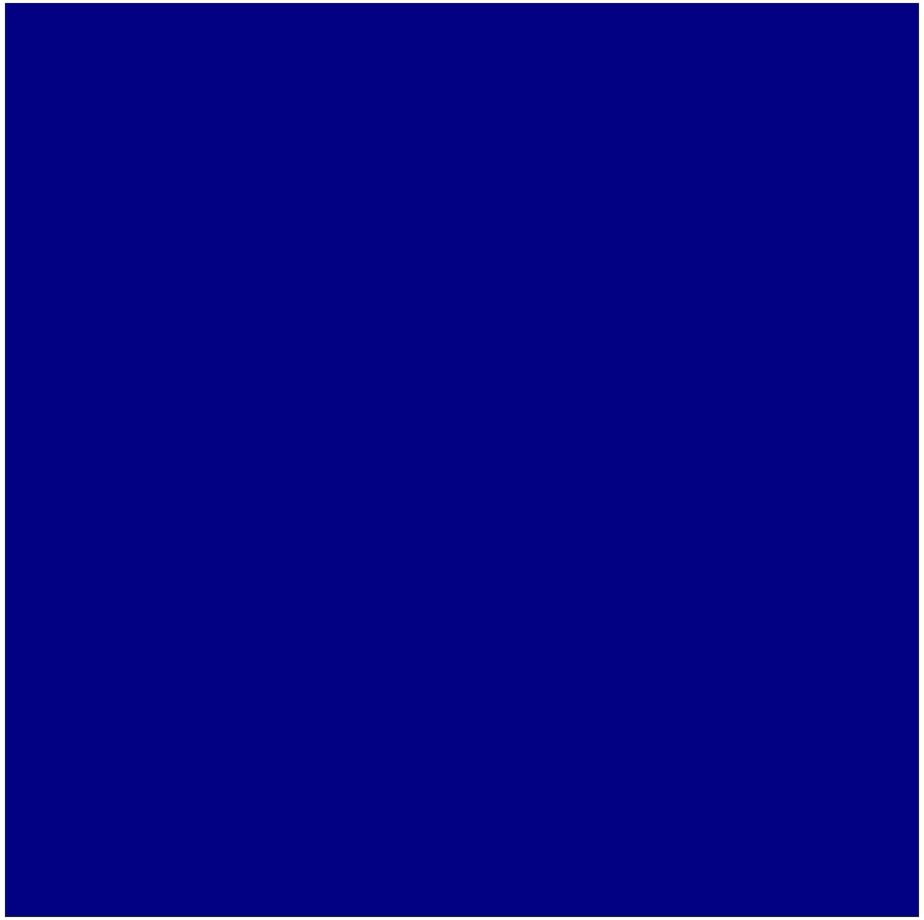


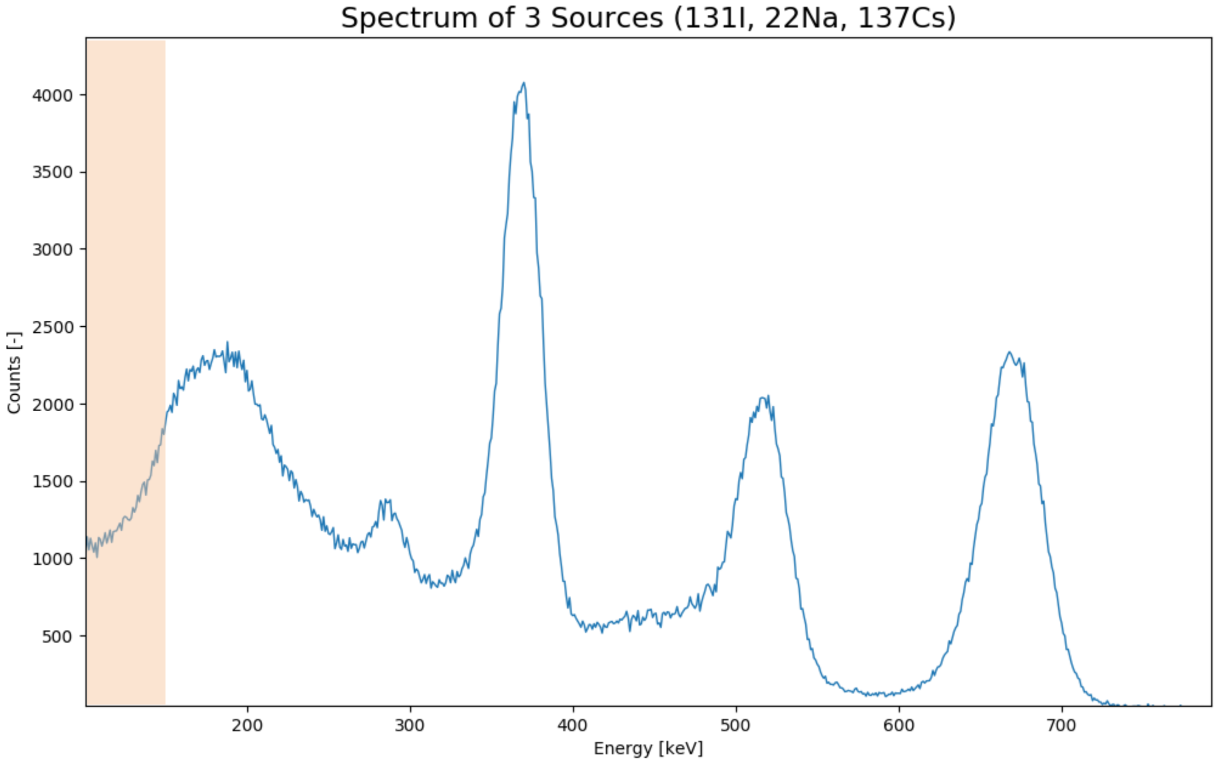




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

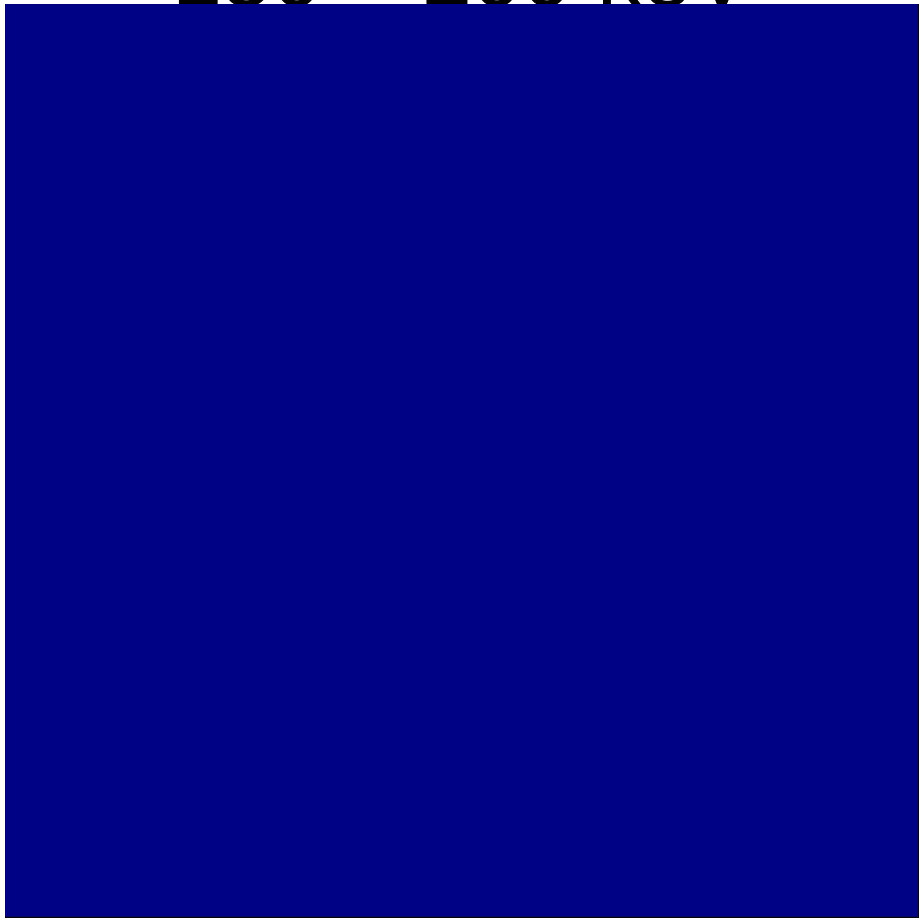
100 – 150 keV

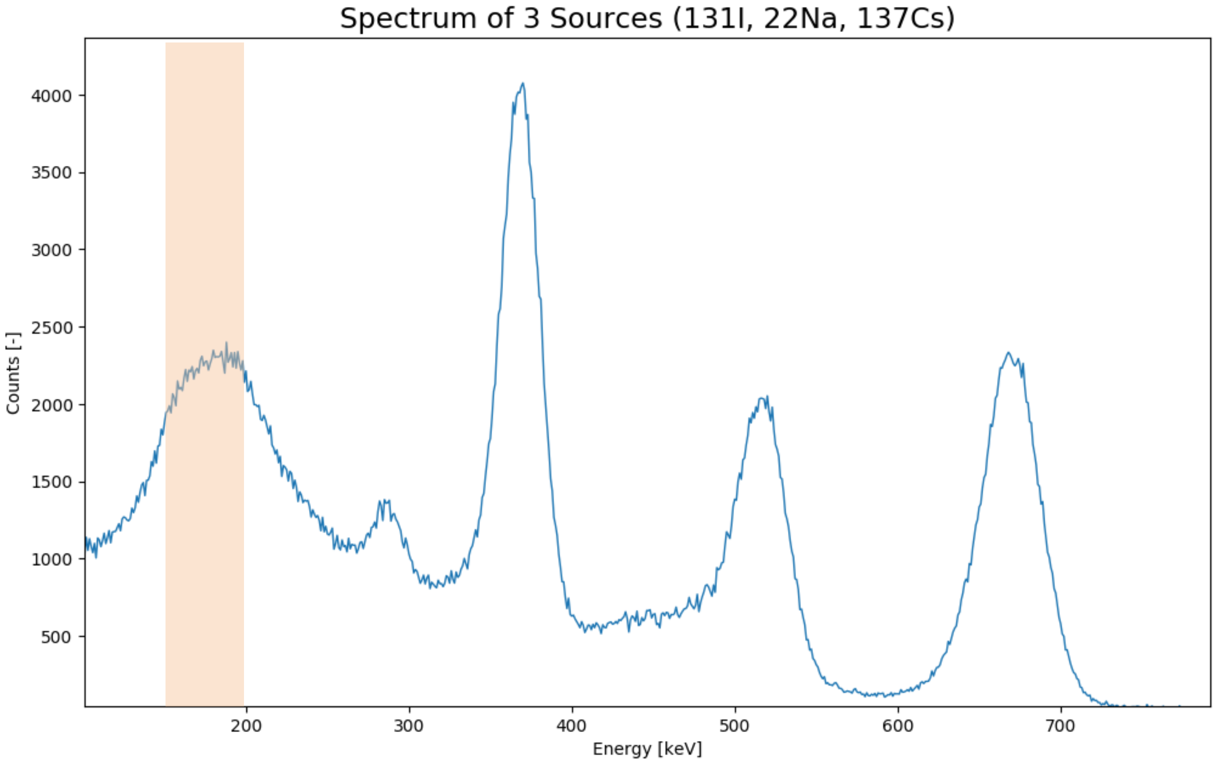




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

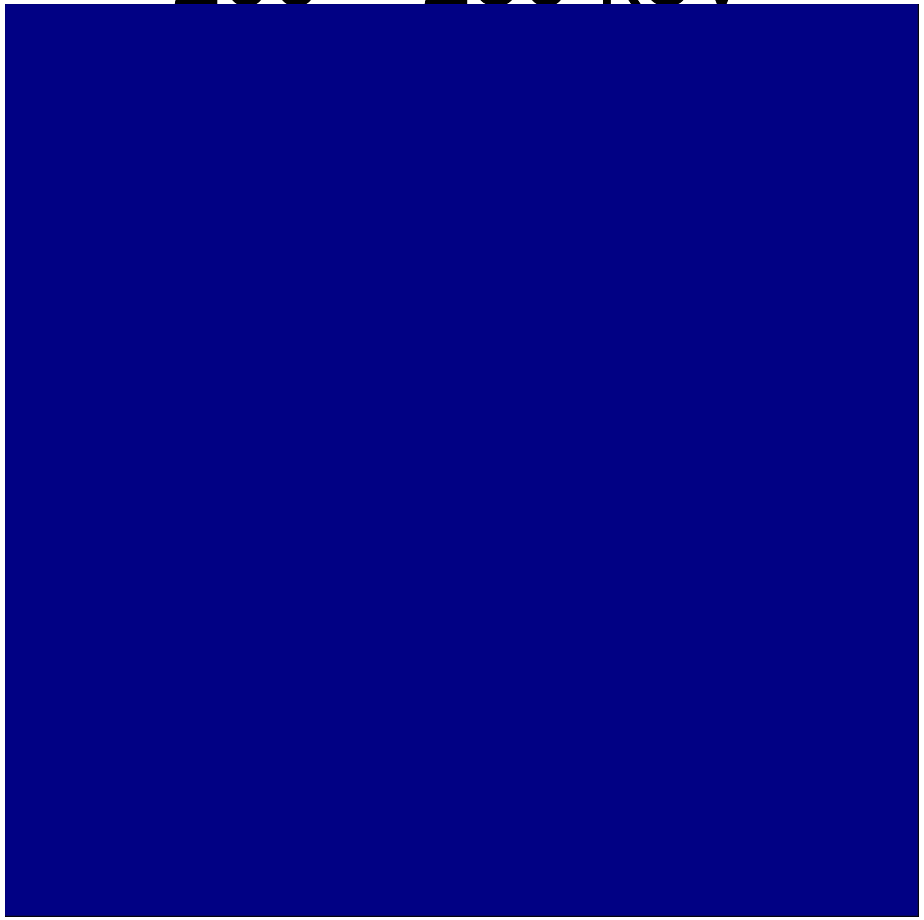
150 – 200 keV

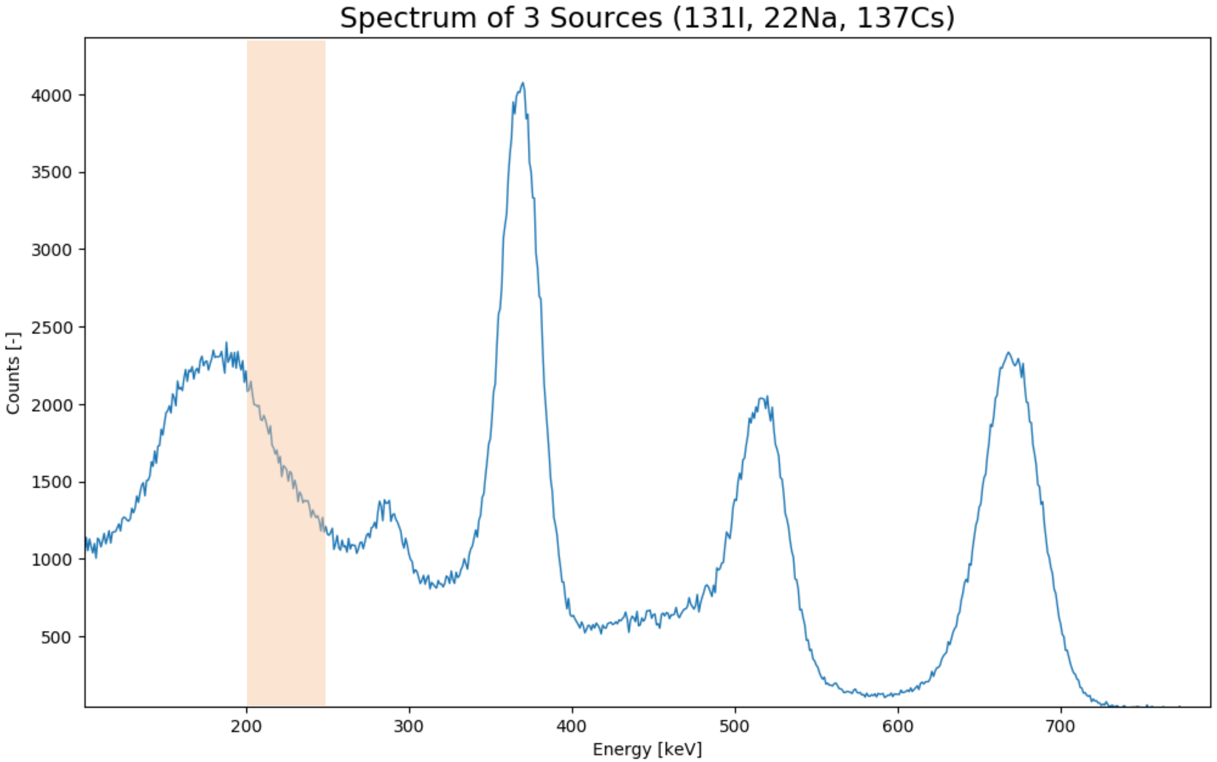




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

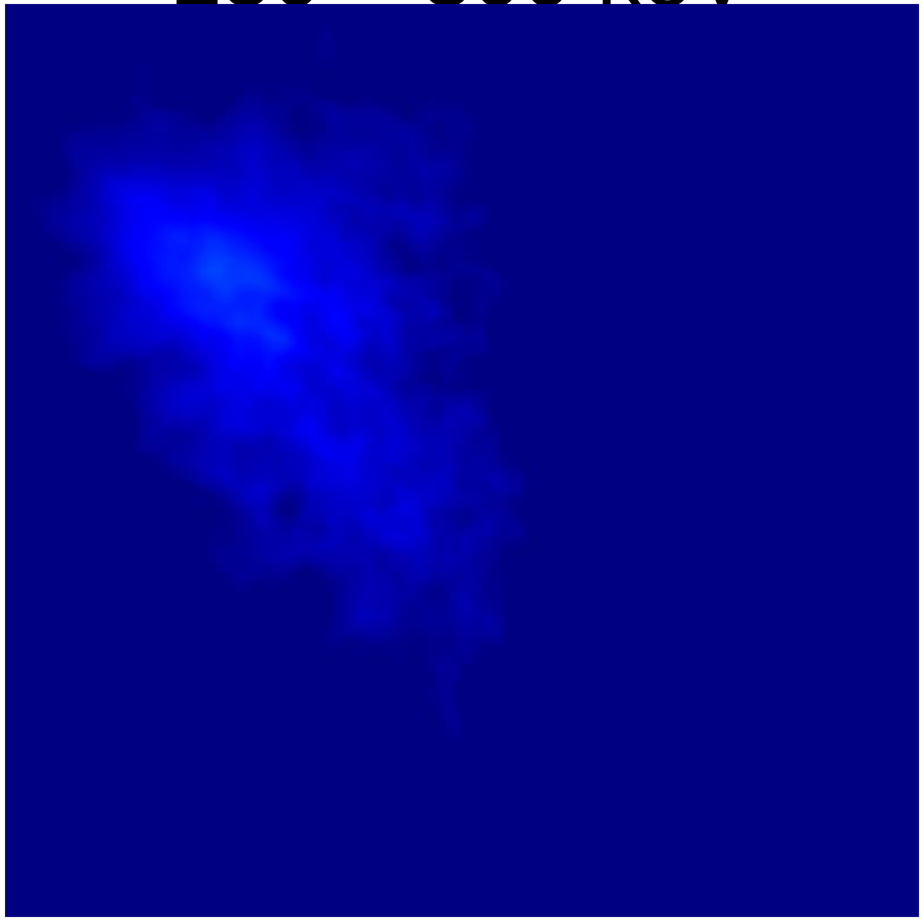
200 – 250 keV

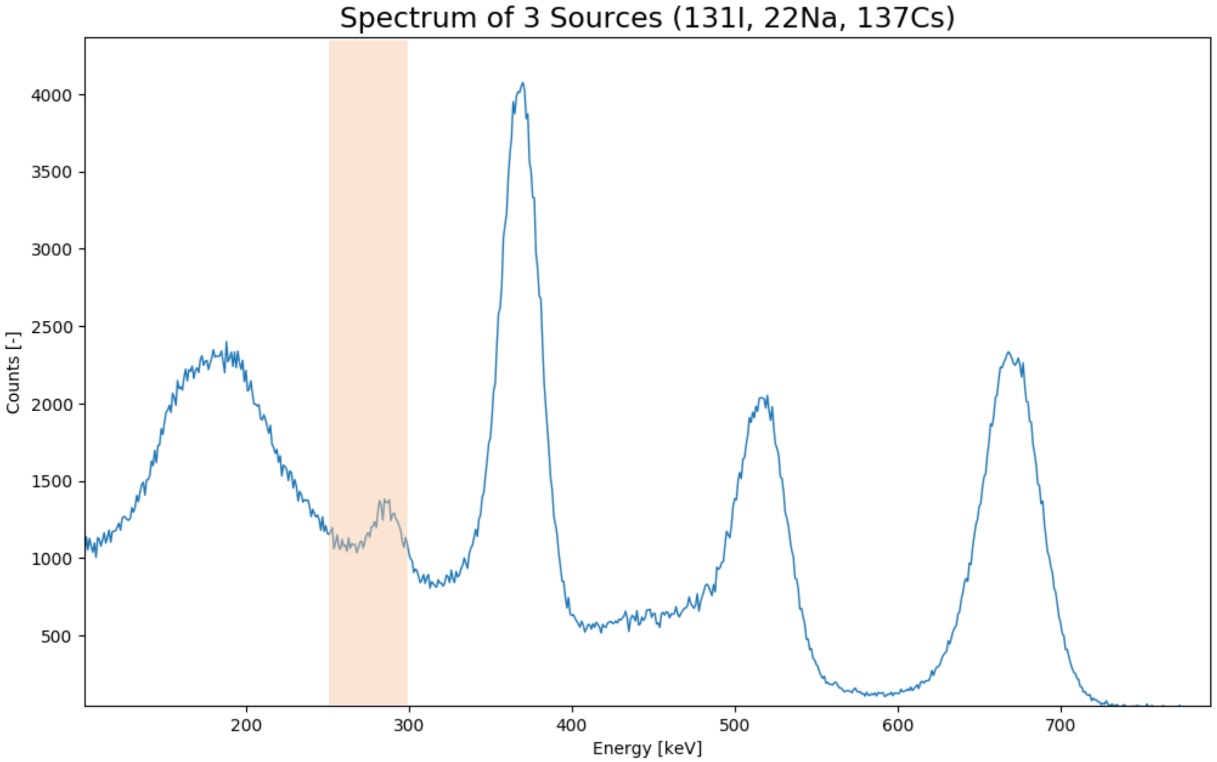




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

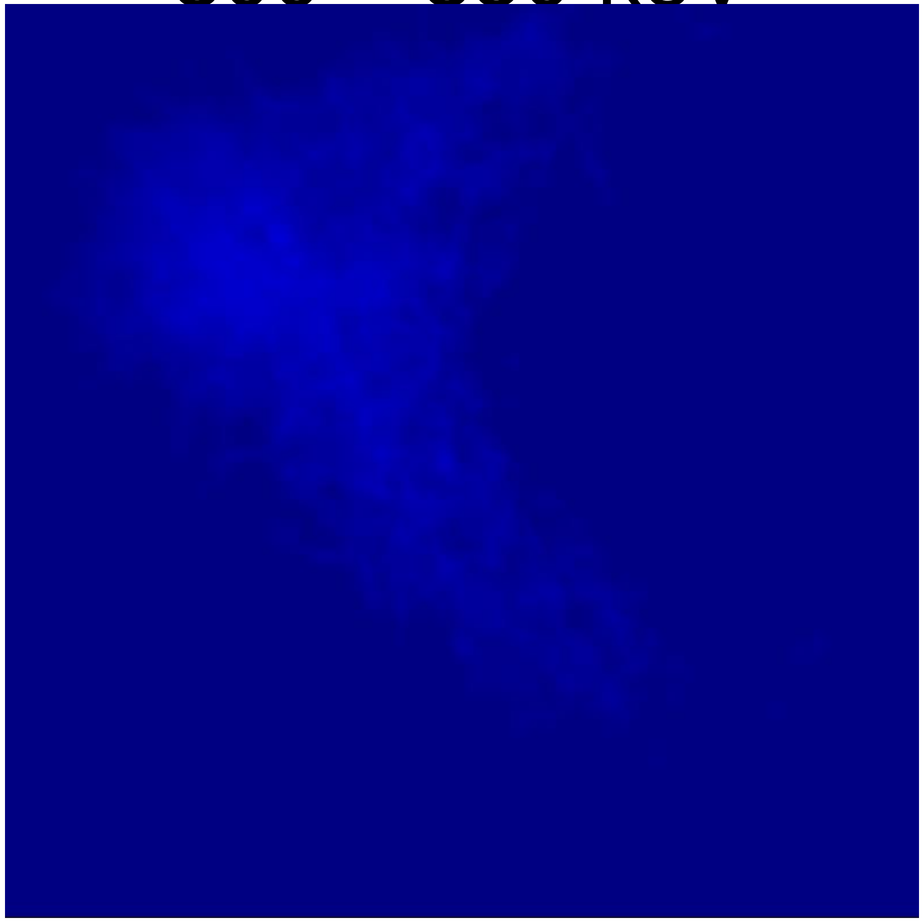
250 – 300 keV

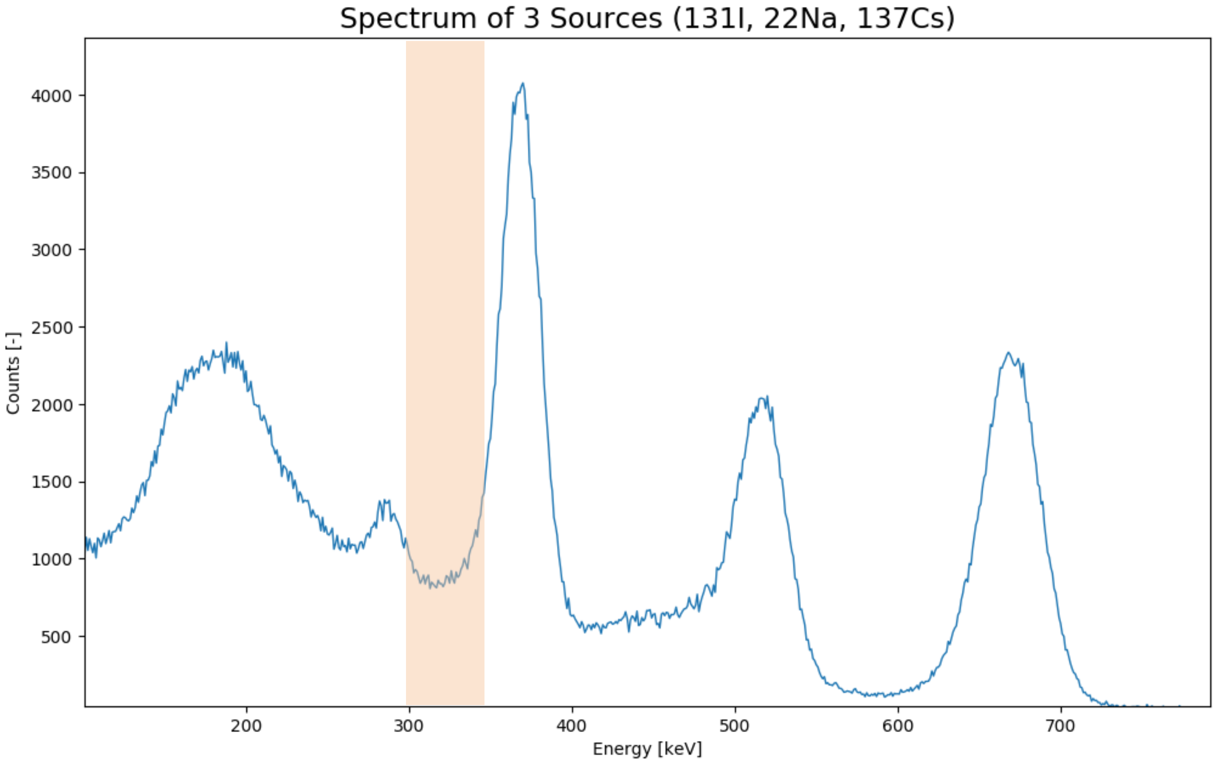




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

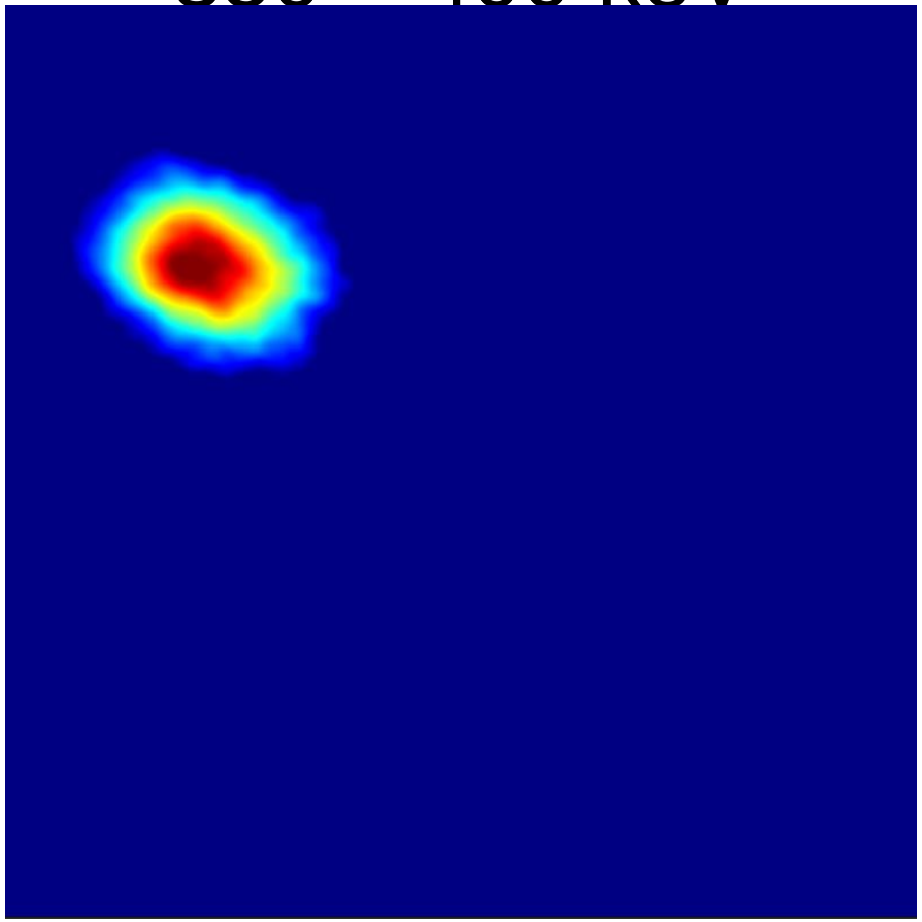
300 – 350 keV

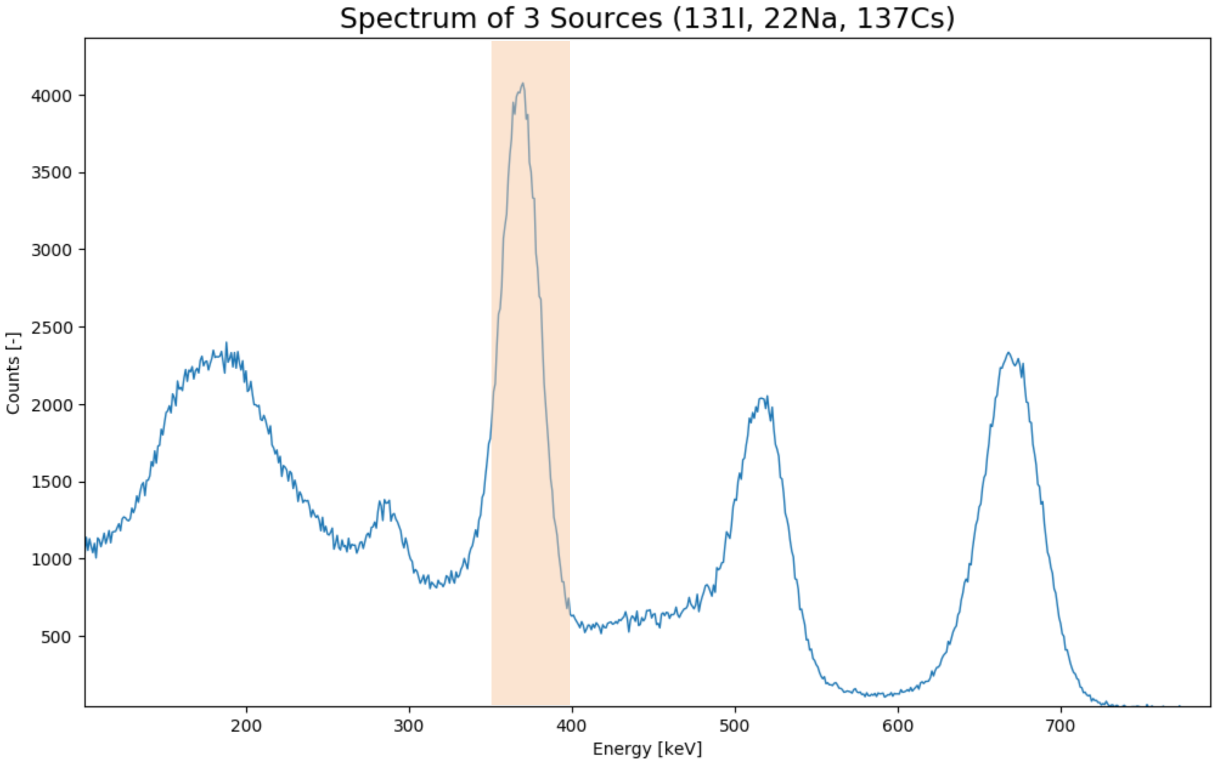




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

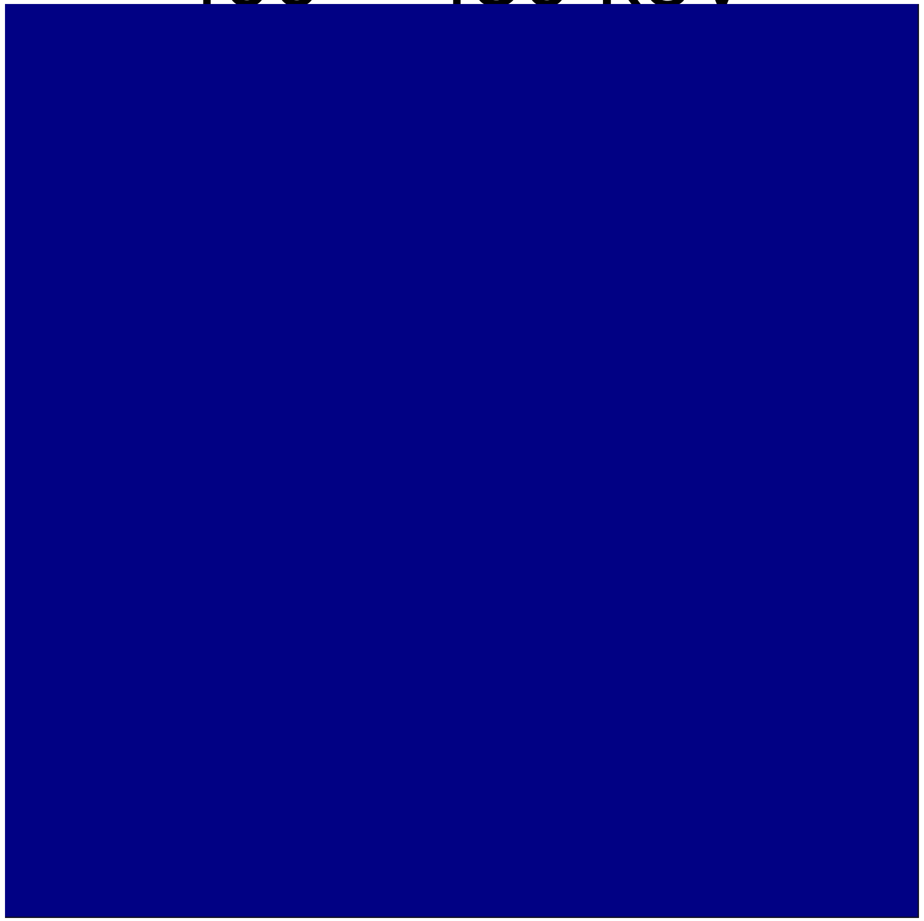
350 – 400 keV

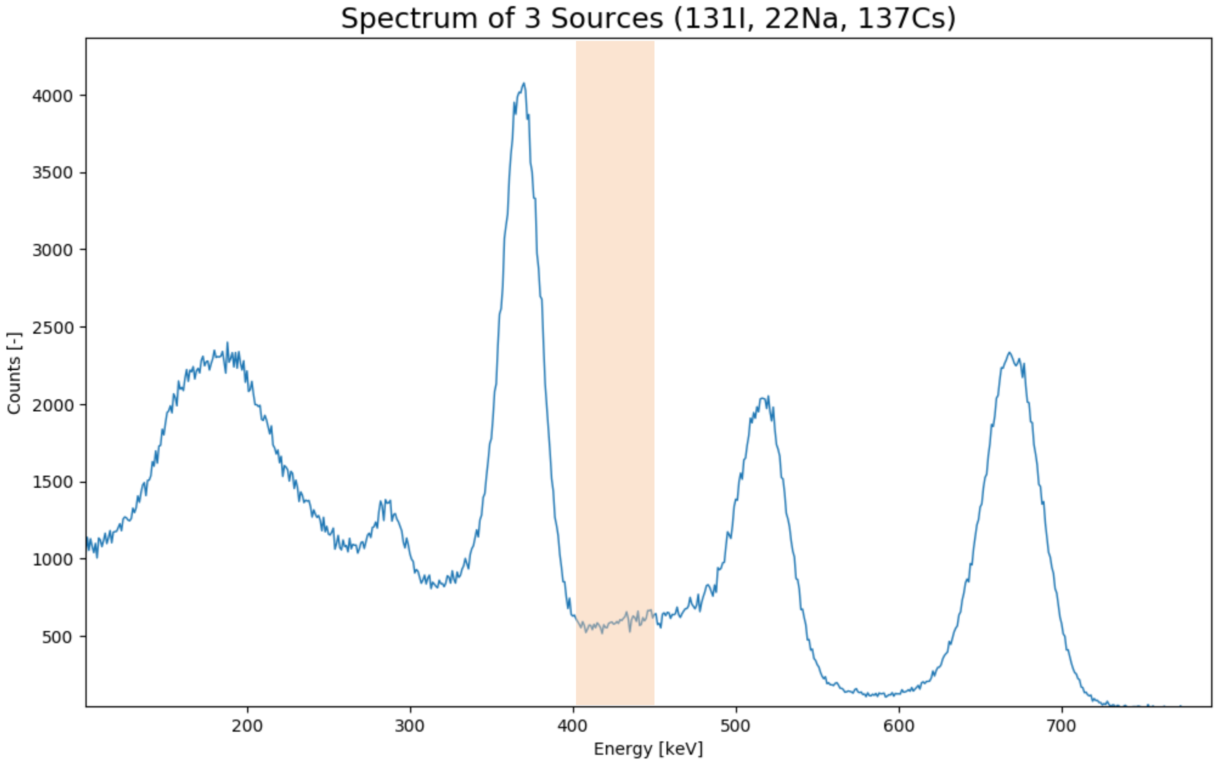




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

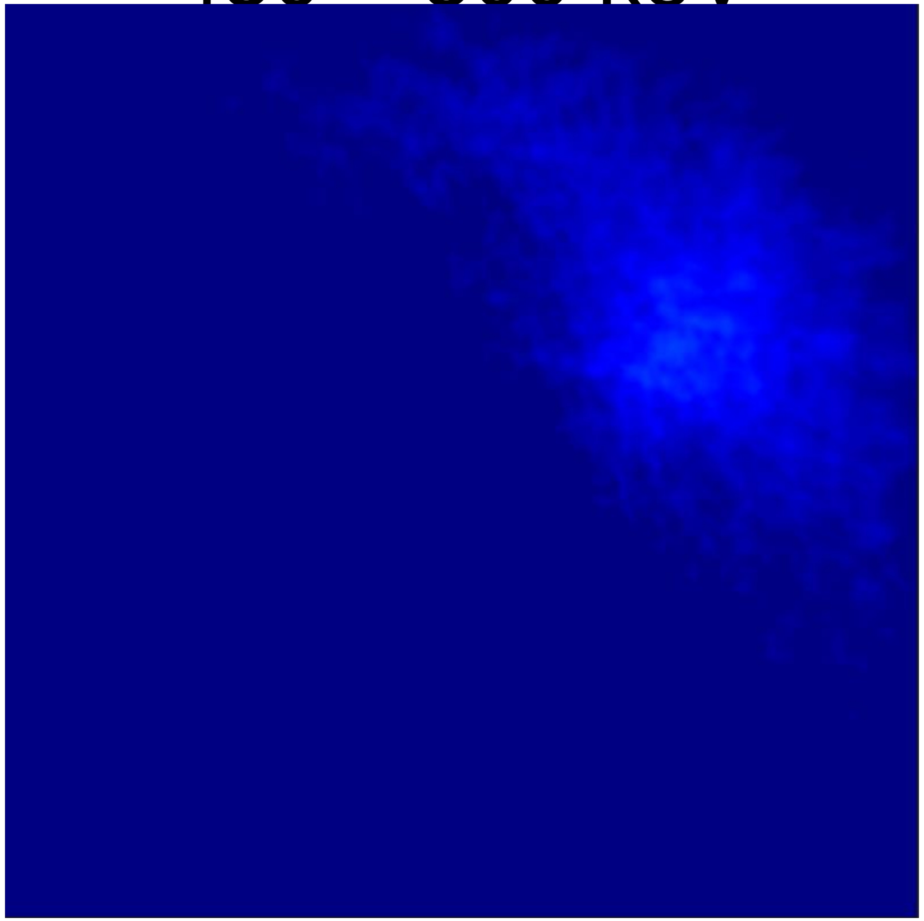
400 – 450 keV

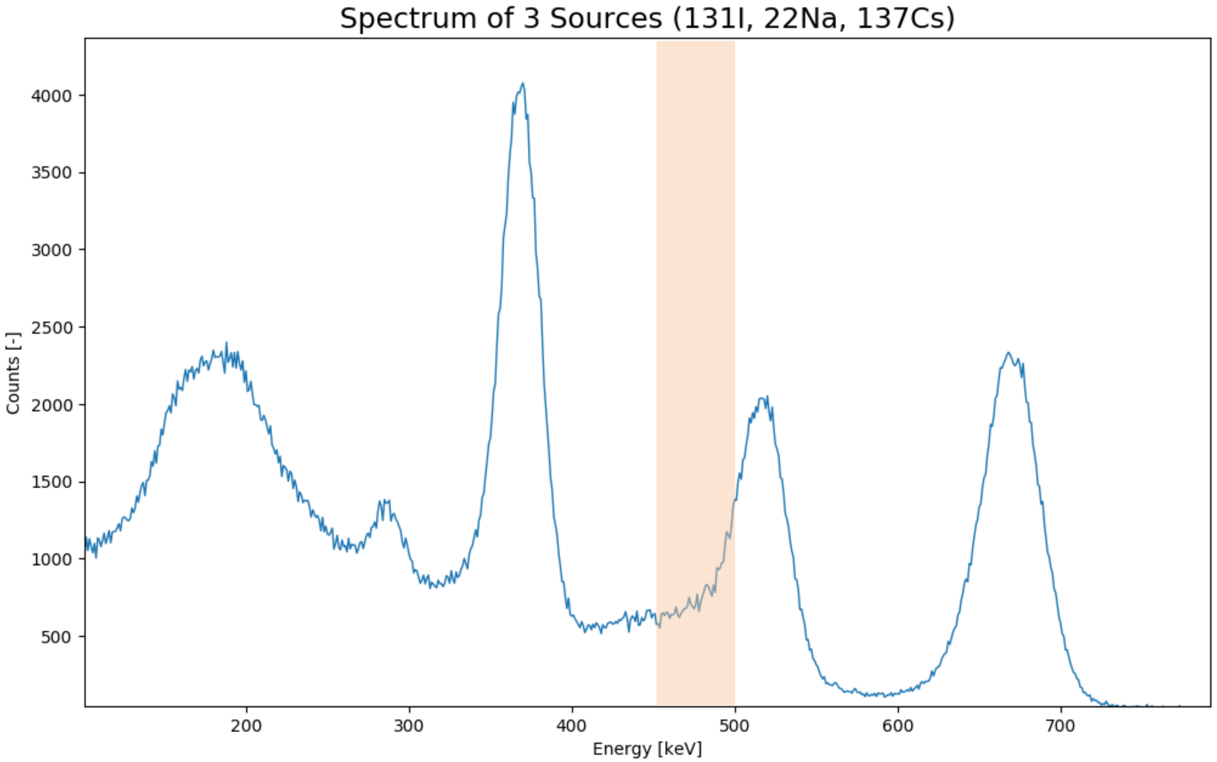




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

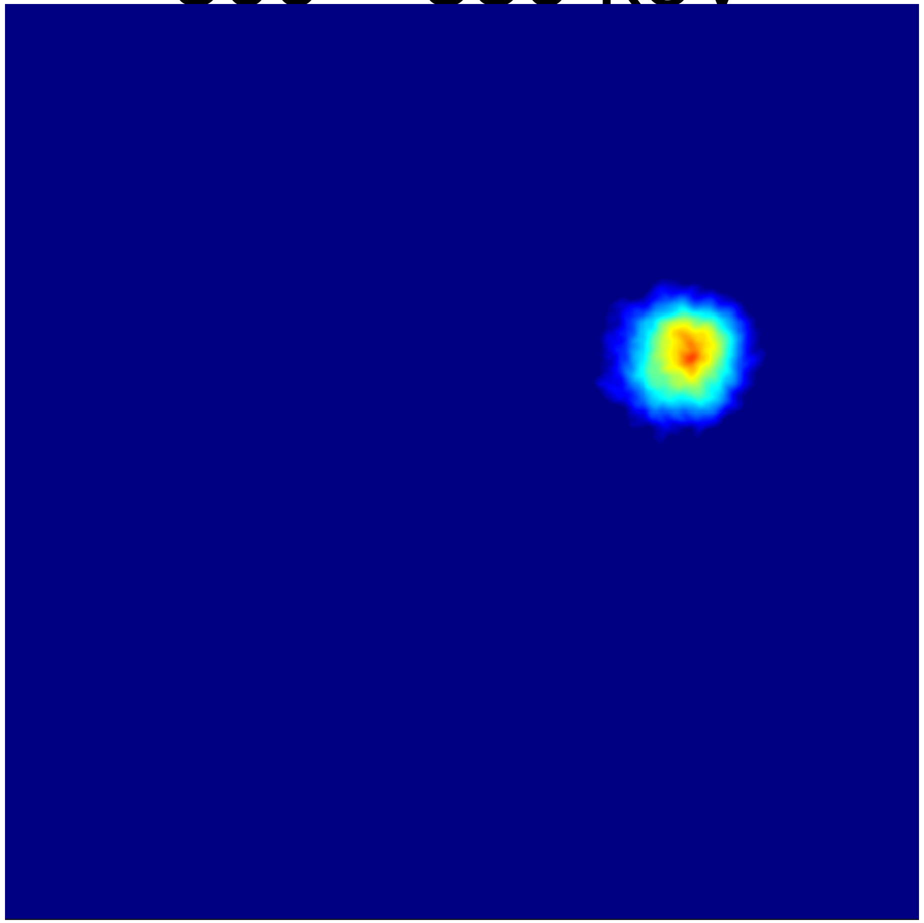
450 – 500 keV

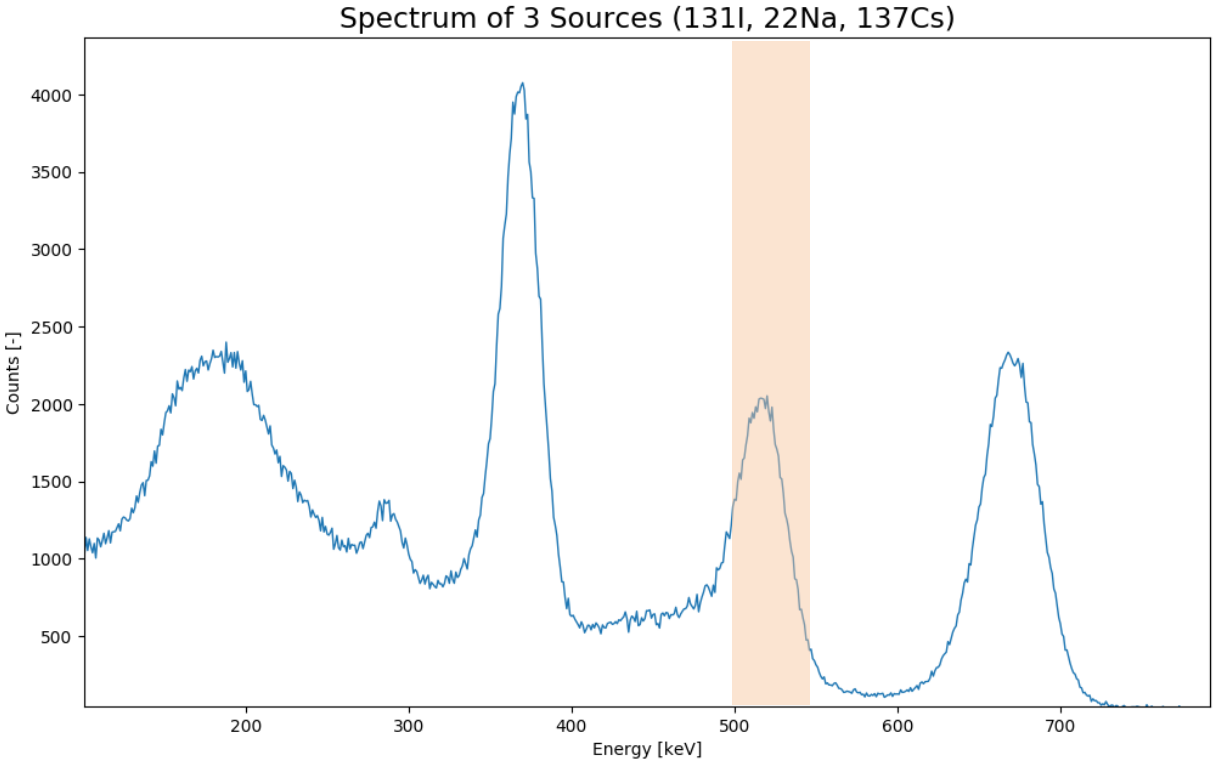




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

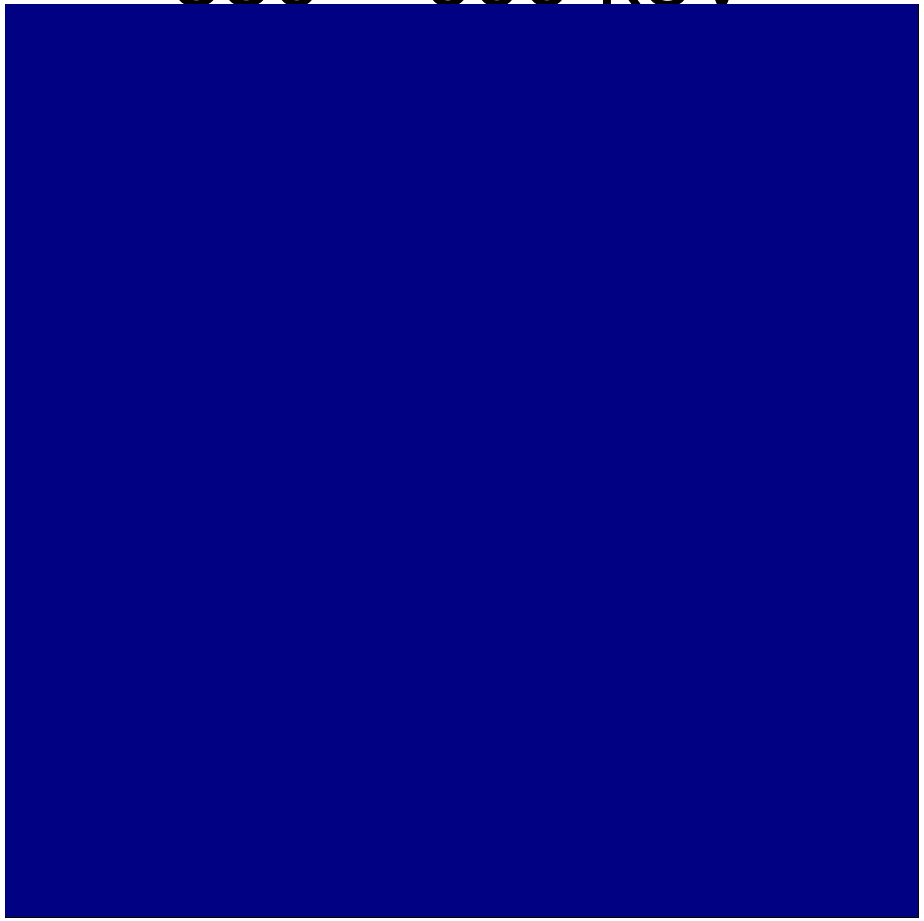
500 – 550 keV

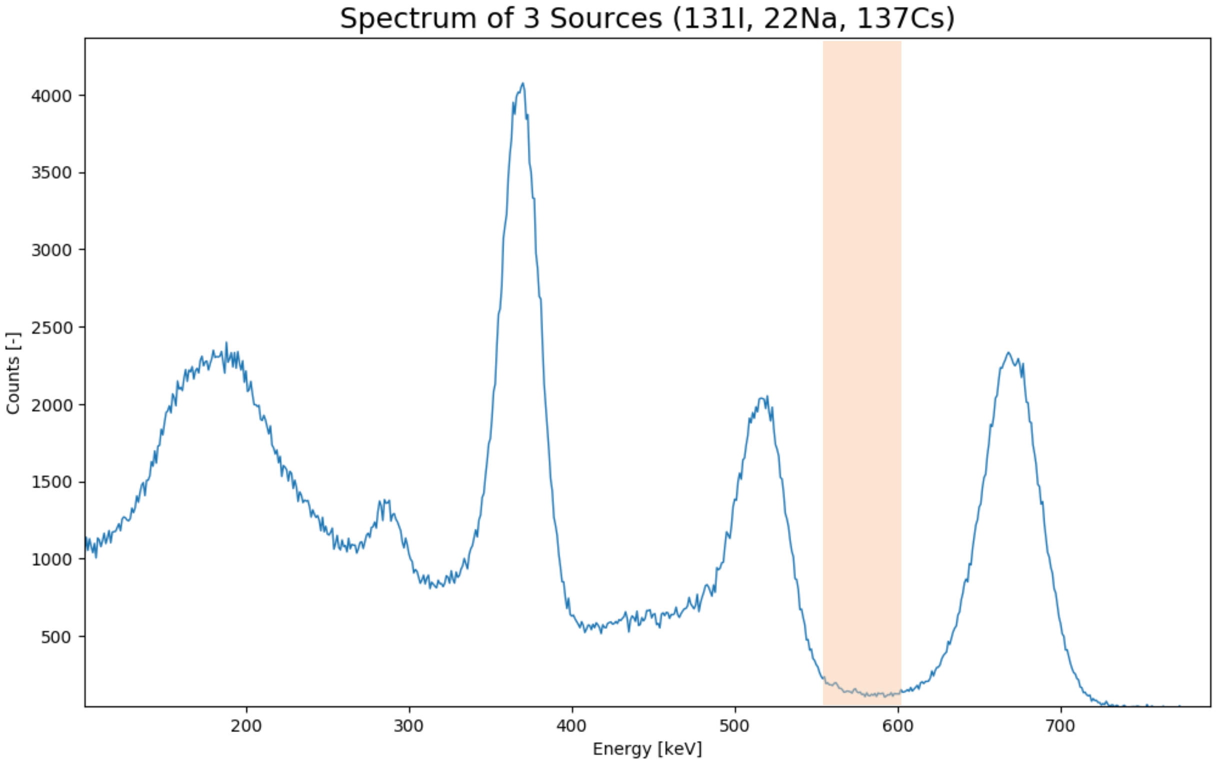




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

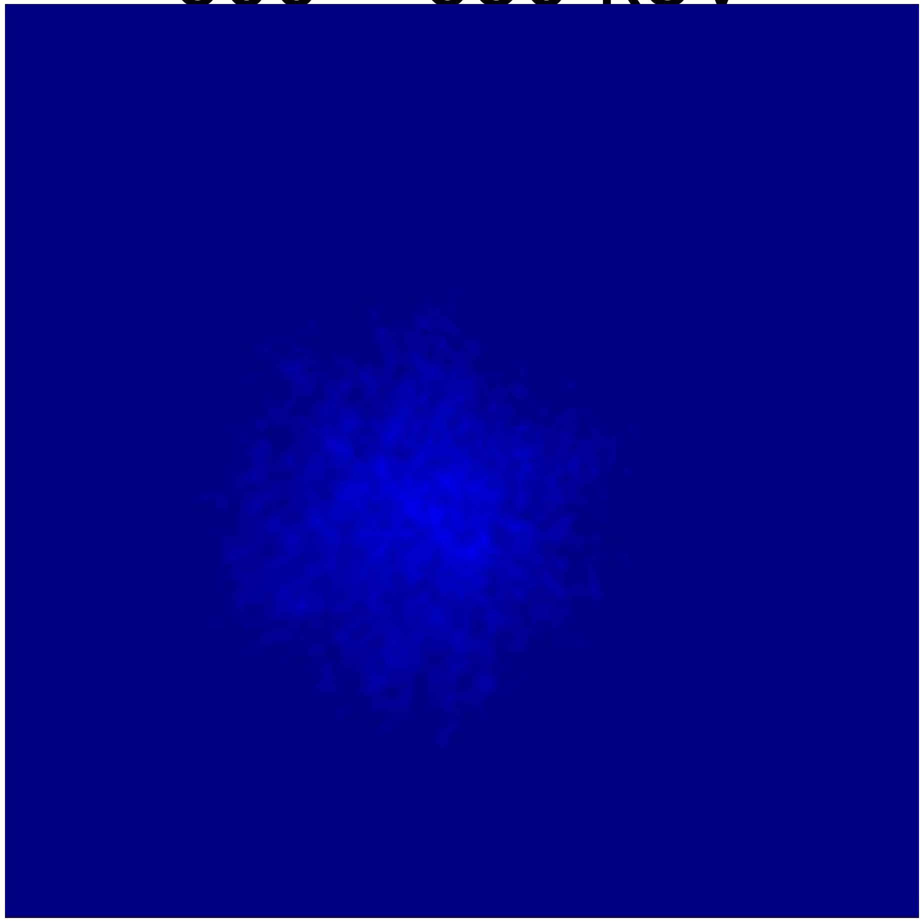
550 – 600 keV

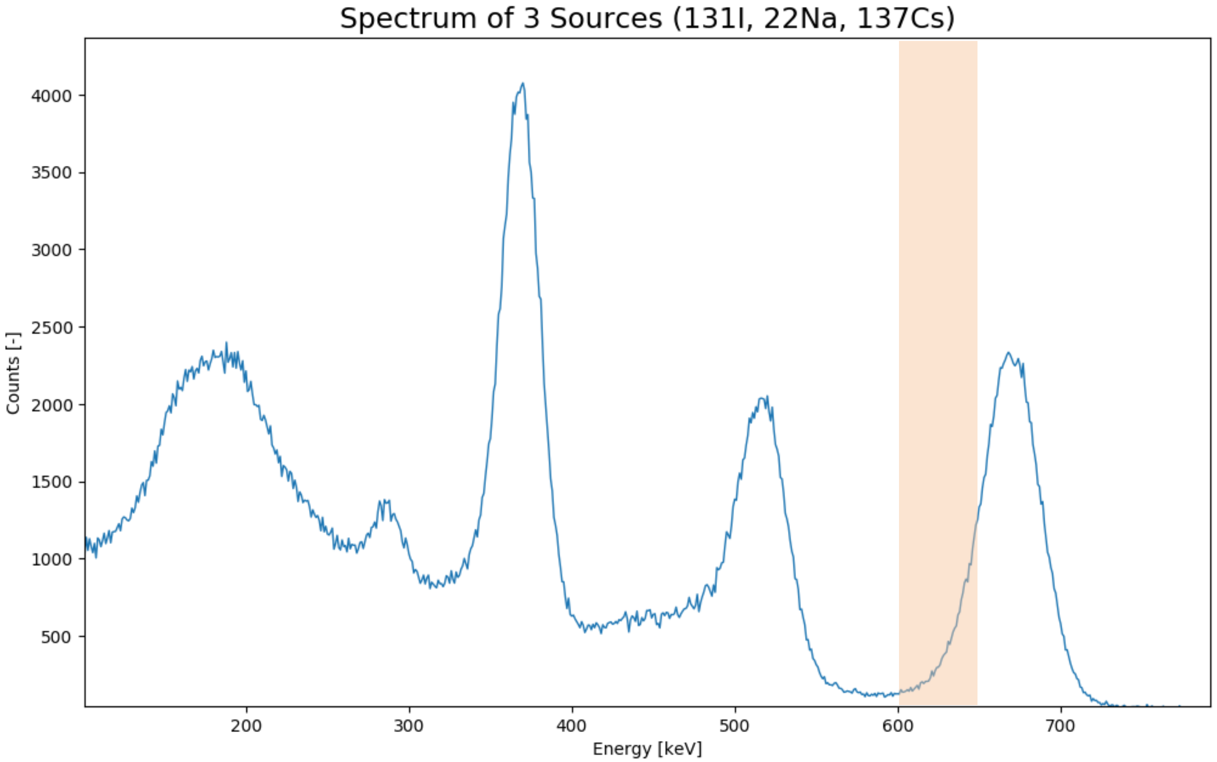




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

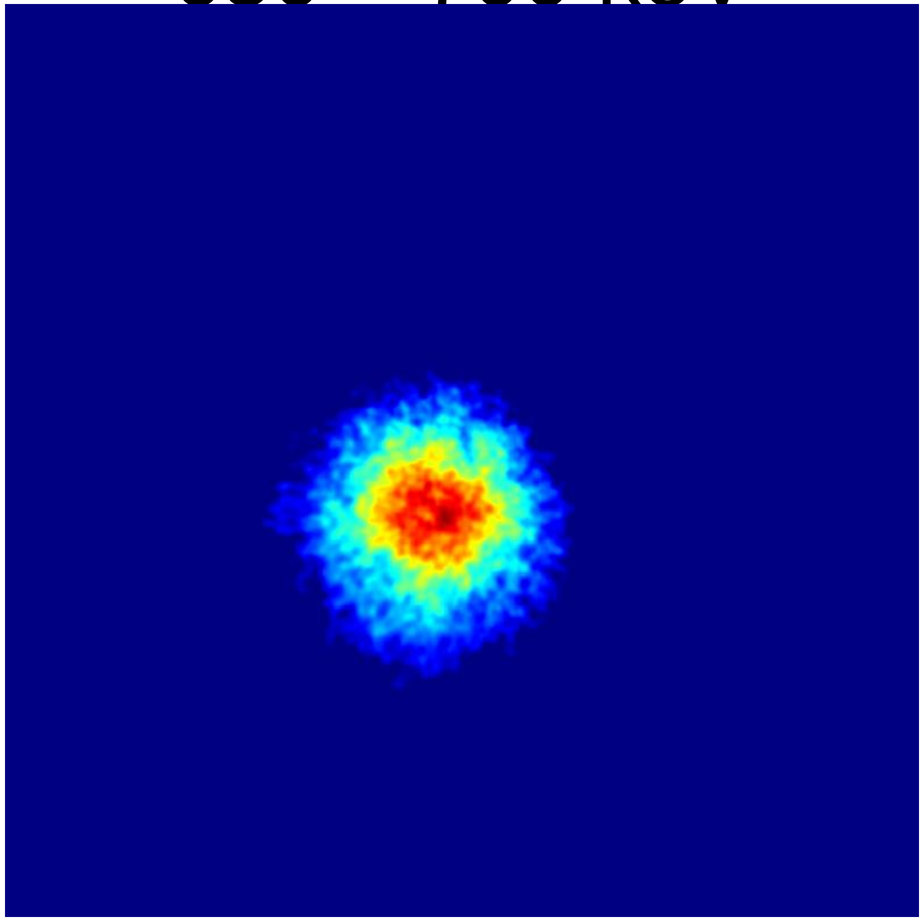
600 – 650 keV

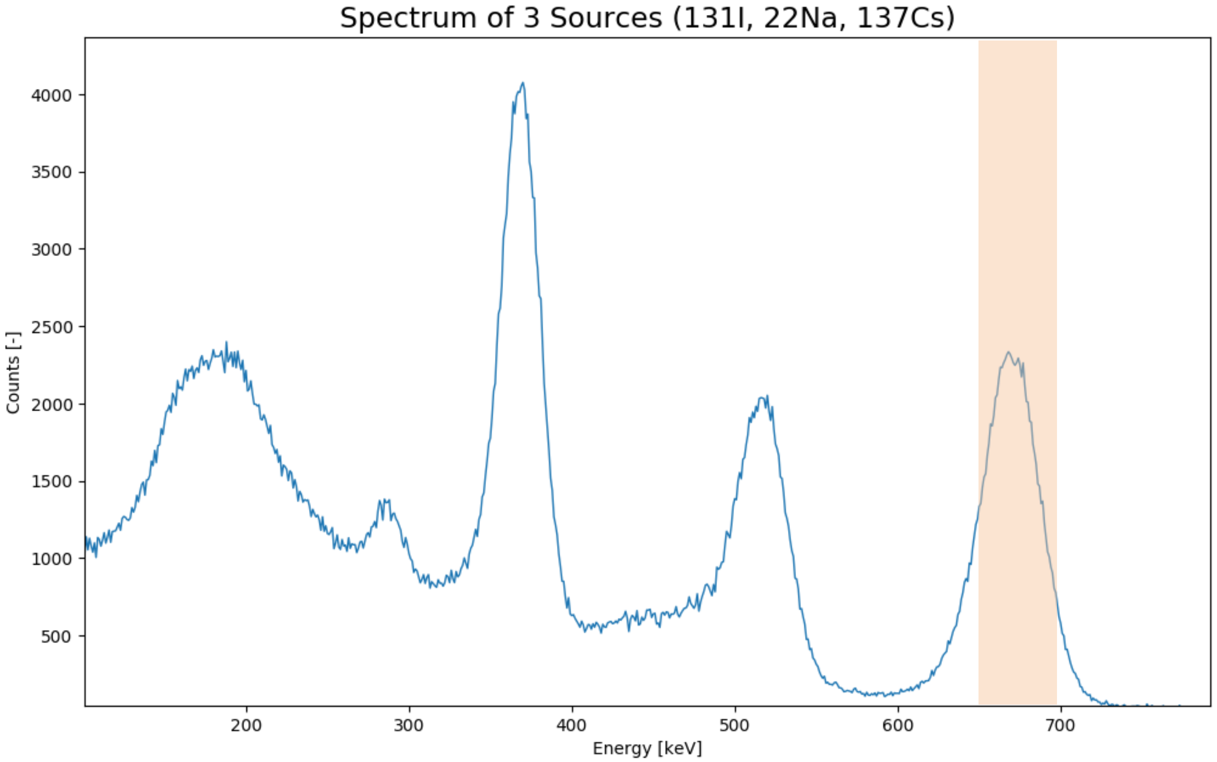




Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

650 – 700 keV

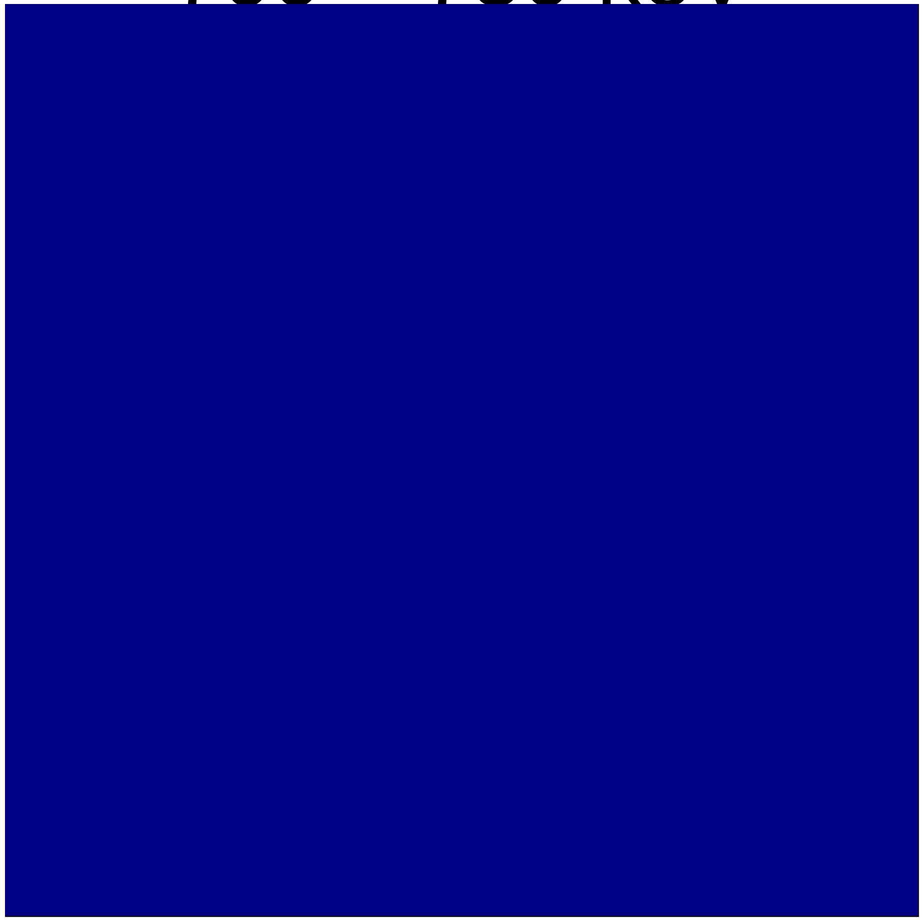


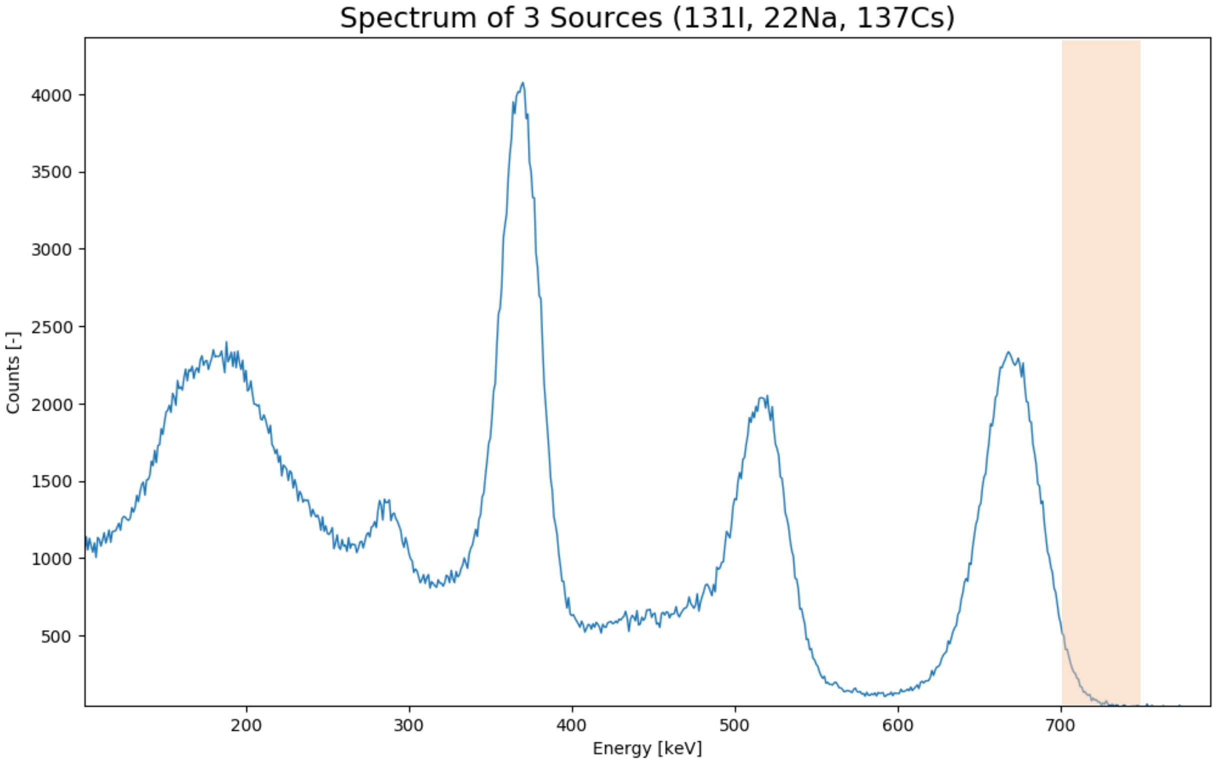


Slide courtesy of D. Turecek, ADVACAM s.r.o.

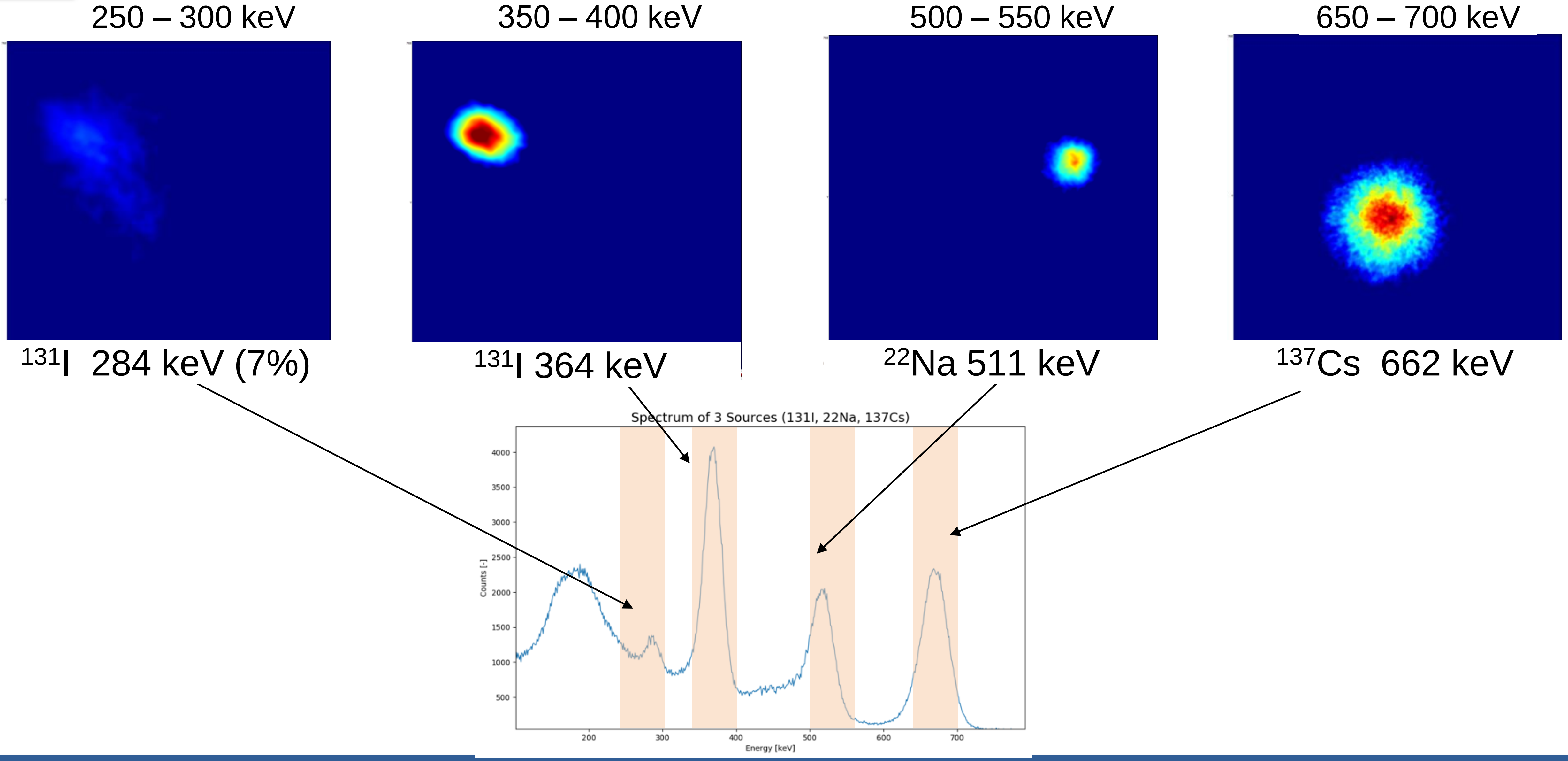
Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources

700 – 750 keV





Single Layer Compton Camera with MiniPIX TPX3 – Multiple Gamma Sources



Gamma camera applications: Thyroid diagnostic

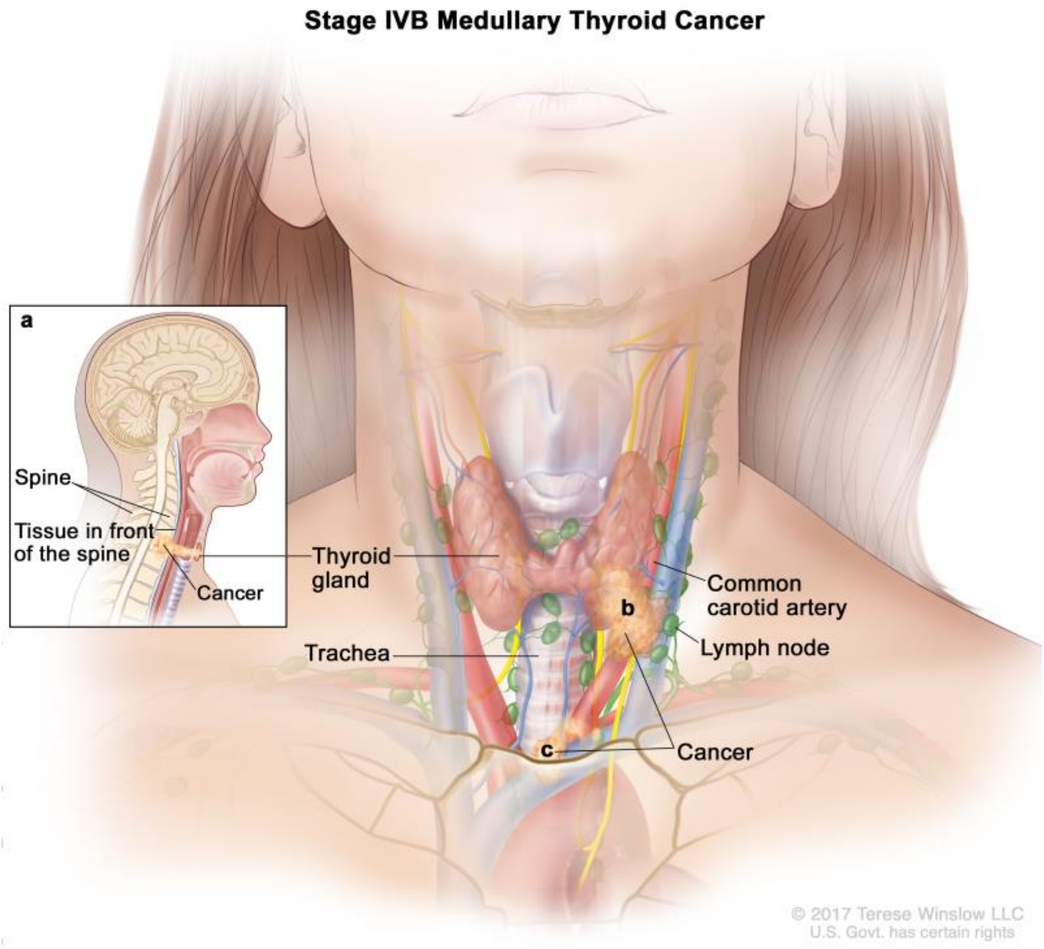
Thyroid cancer diagnostics and treatment monitoring:

The second most frequent cancer for women (after breast cancer)

Current imaging methods offer resolution of about 12 mm in 2D

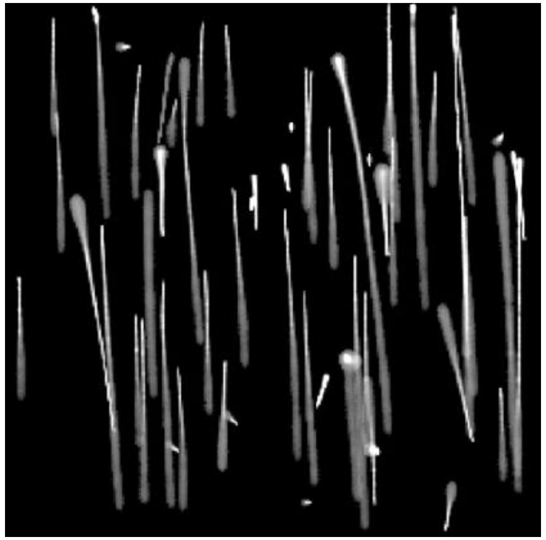
This technology allows

- 5 times better resolution and 3D (2.5 mm)
- 4 times lower dose



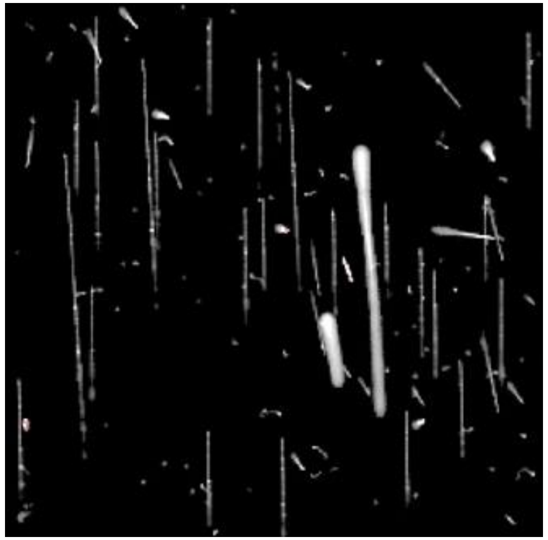
In-line images of a hadron therapy beam

Protons 48 MeV



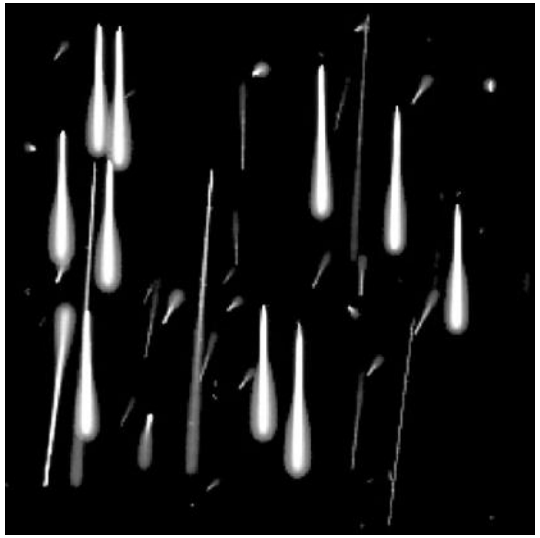
Only protons and their scattering, no secondaries.

Protons 221 MeV



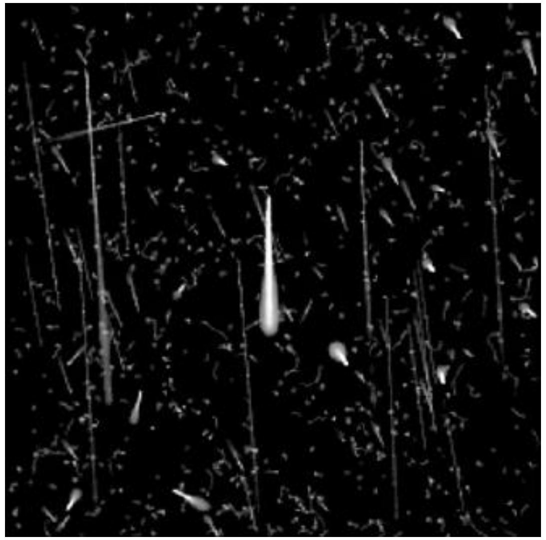
Many secondaries, (delta electrons fragments).

Carbons 89 MeV/u



Carbons and protons and their scattering, no secondaries.

Carbons 430 MeV/u



Carbons and many secondaries.

Timepix chip combined with Si detector

NASA astronaut Megan McArthur in the International Space Station - along with the HERA detector (Image: NASA)

TimePIX 3 photon fluence measurement in hospital theatres

Reference person: 1.76 m

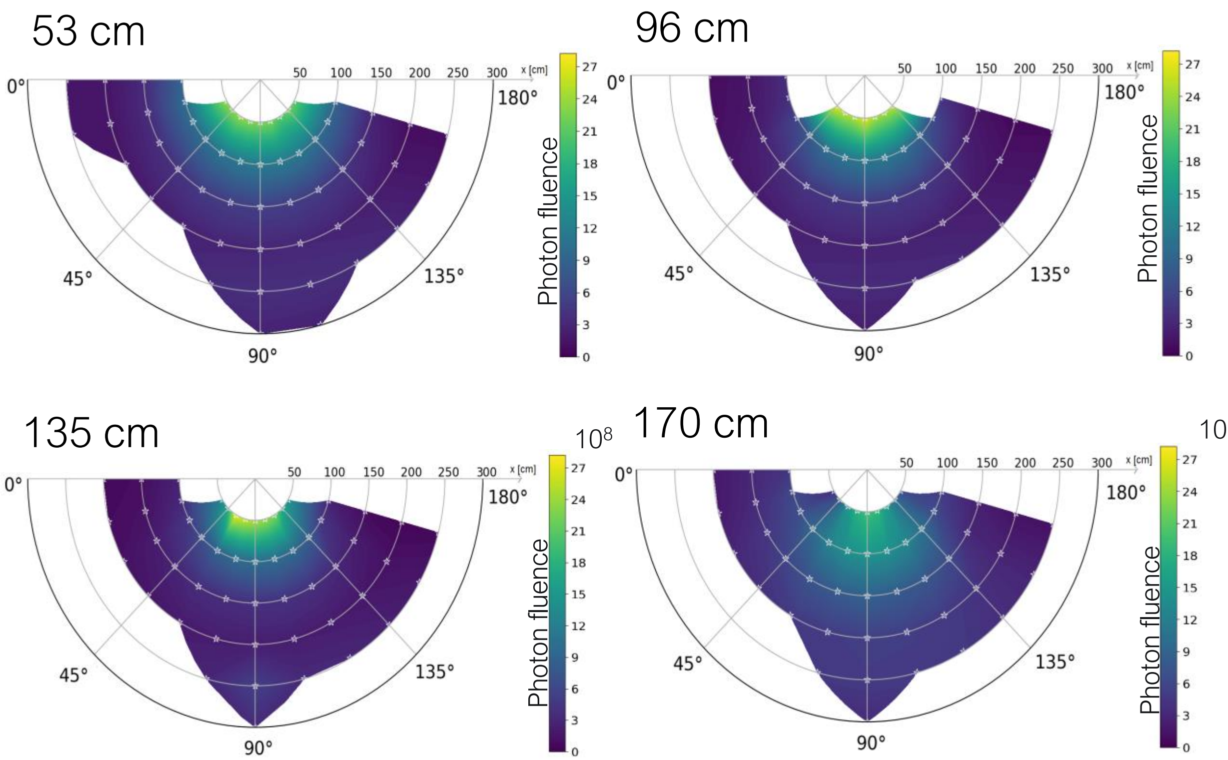
Eye lens - 170 cm

Chest - 135 cm

Belt - 96 cm

Knee - 53 cm

Courtesy of M. Nowak

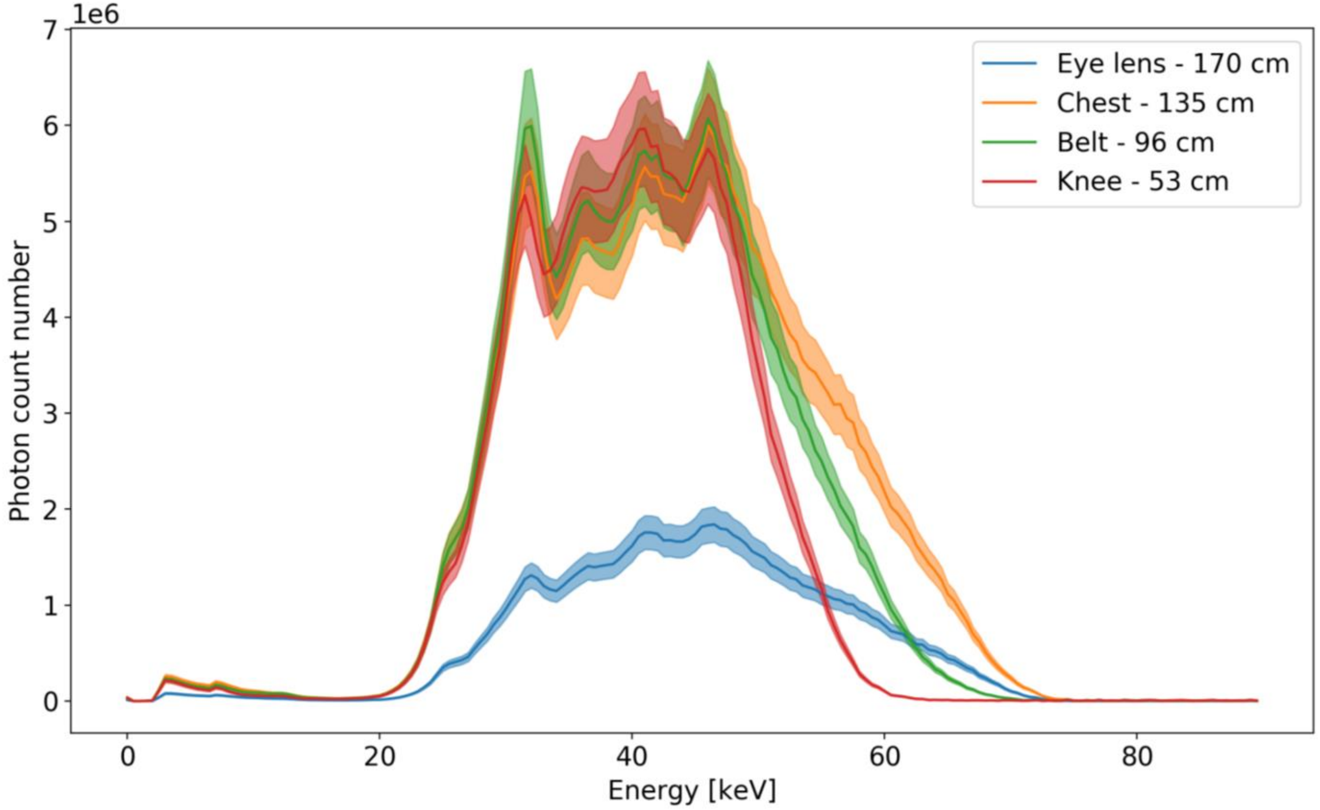


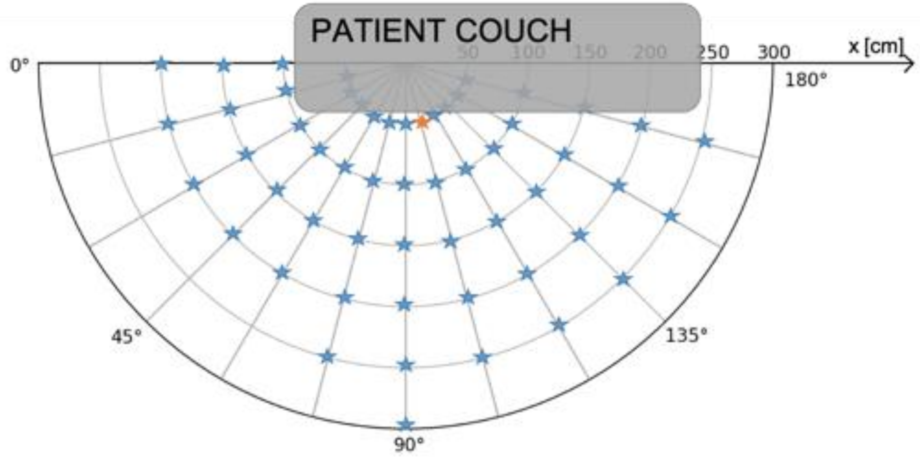
Colour maps of the photon fluence measured with a Timepix III in an hospital theatre at four horizontal eights.

Pierre Carbonez (CERN)
Marie Nowak CERN PhD. Student 2017-2020

TimePIX 3 photon fluence measurement in hospital theatres

Energy spectra for each height for a given person

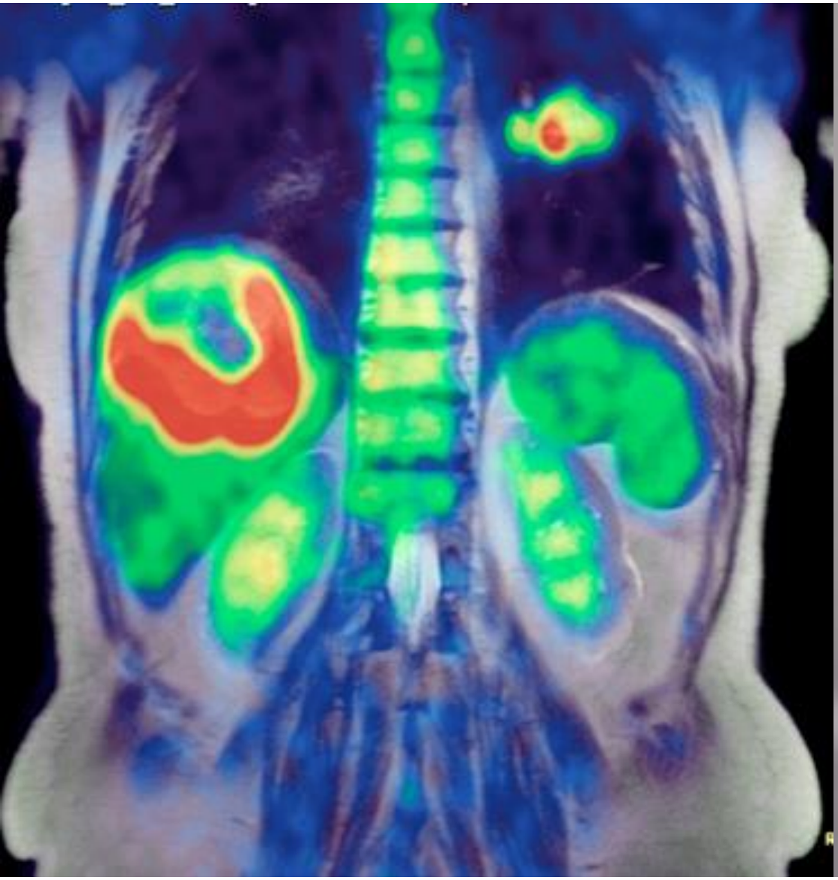




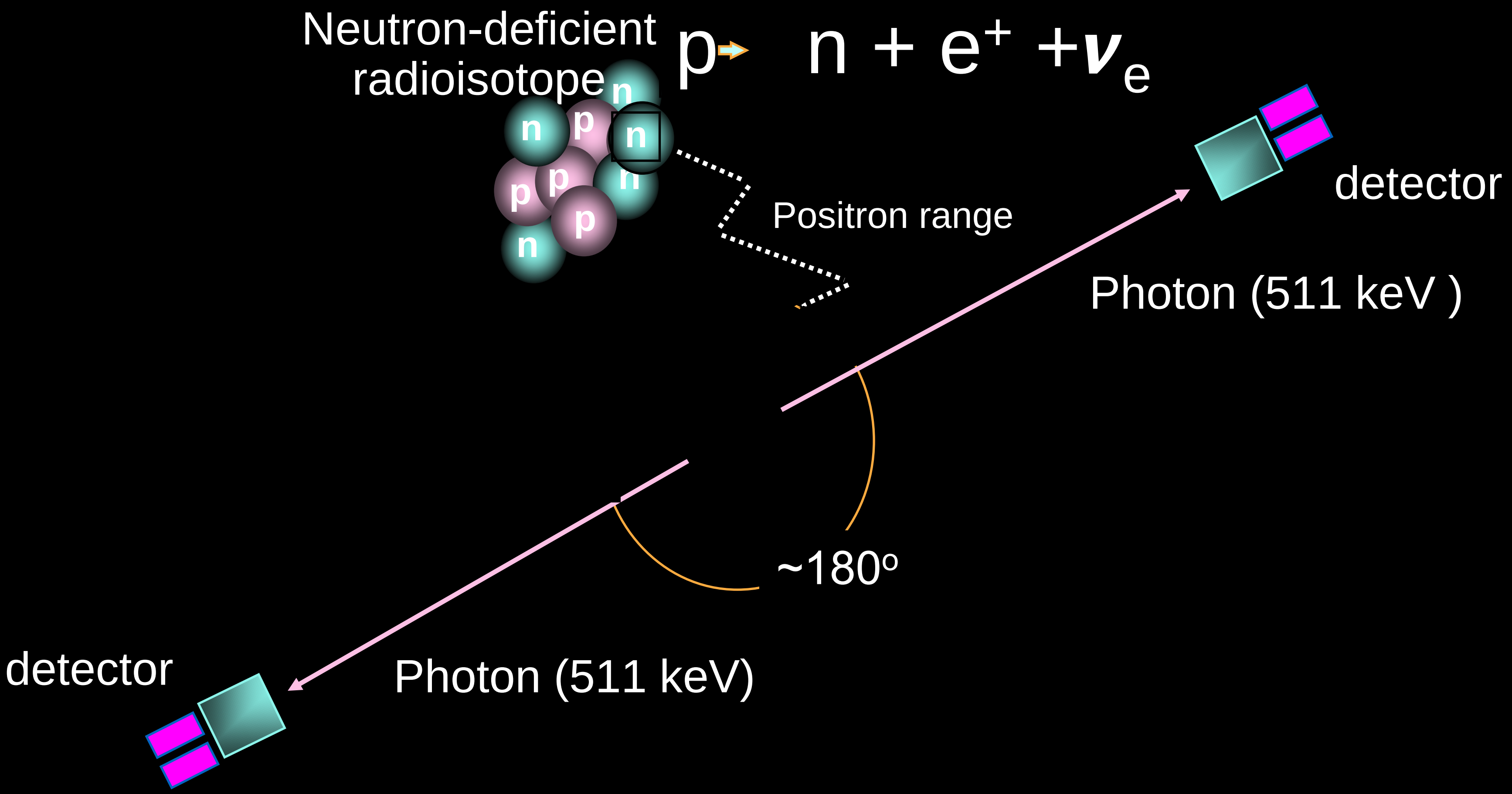
Courtesy of M. Nowak

➡ Shift in energy from head to toes = non homogenous exposure

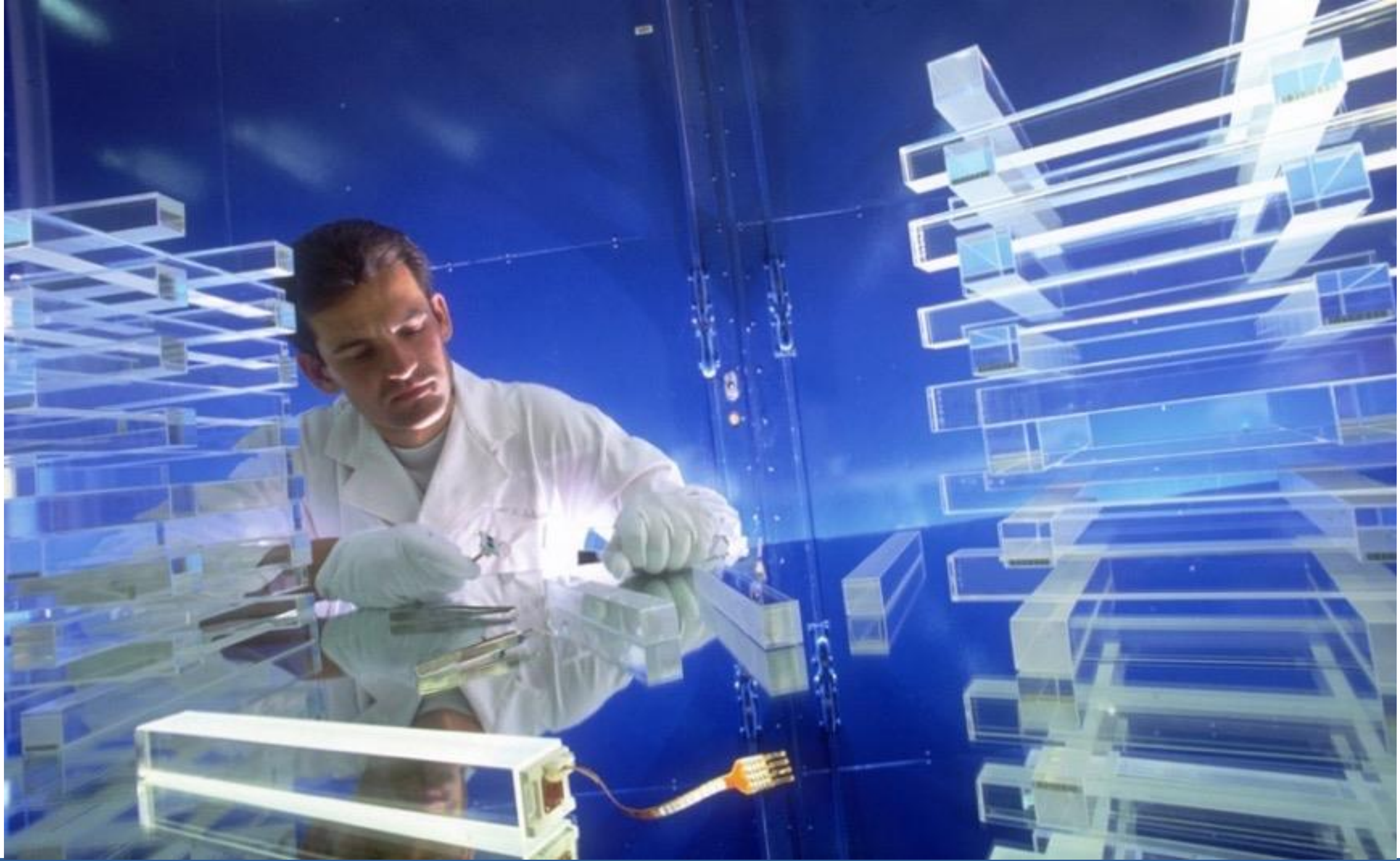
PET

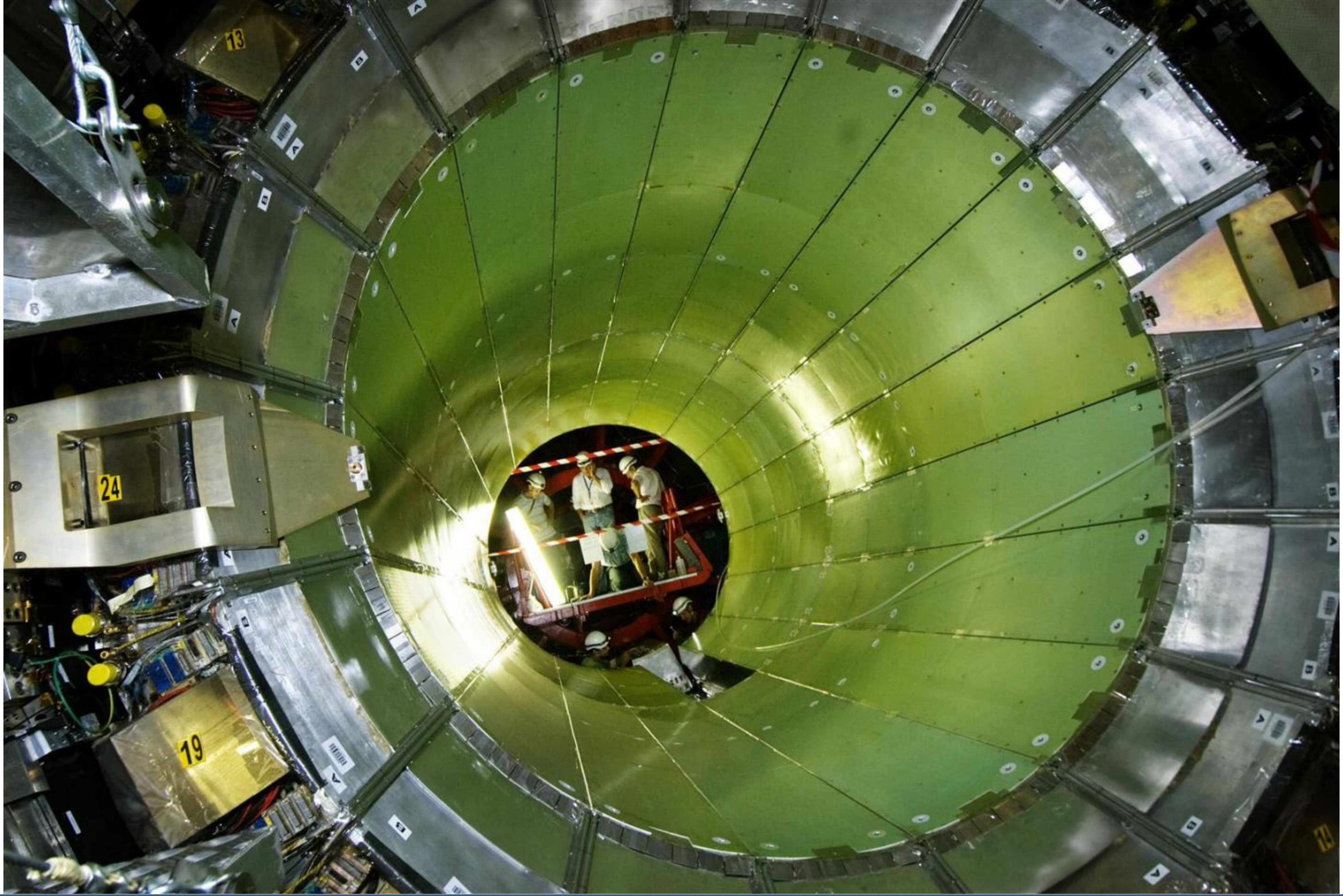


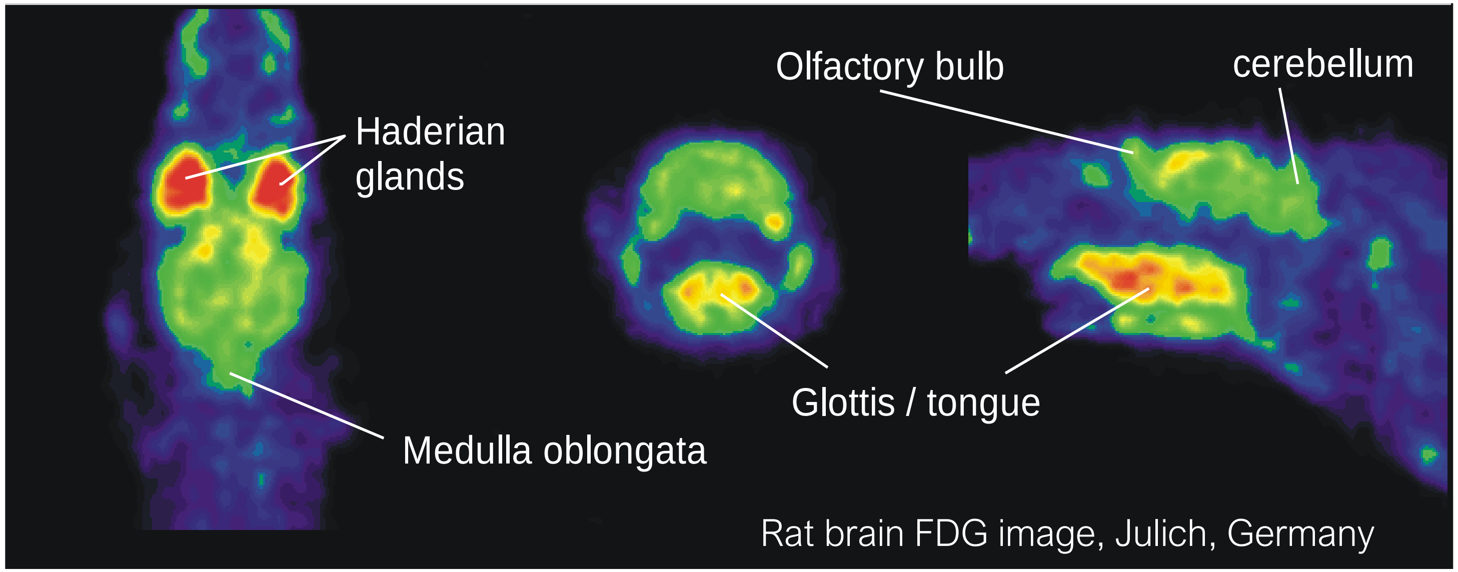
Positron Emission Tomography



https://www.facebook.com/watch/?v=18454476357039

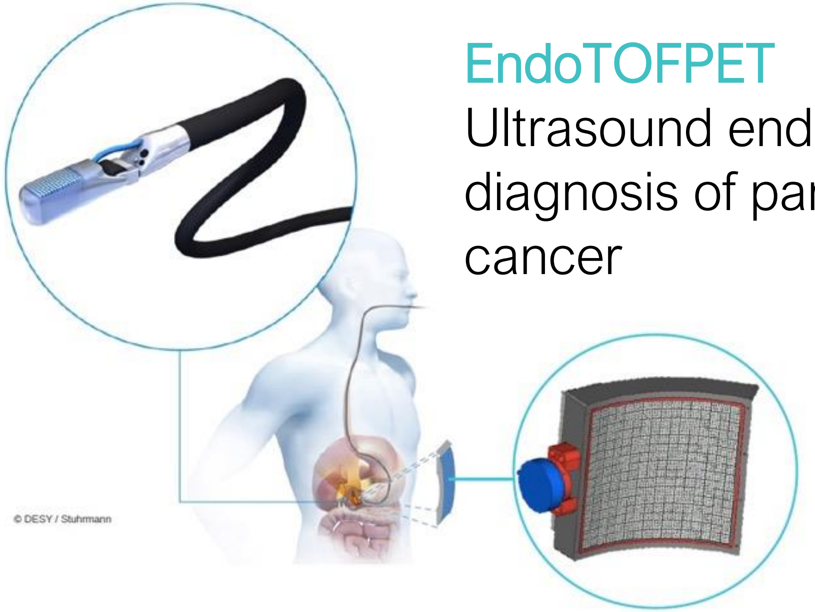



13
24
19

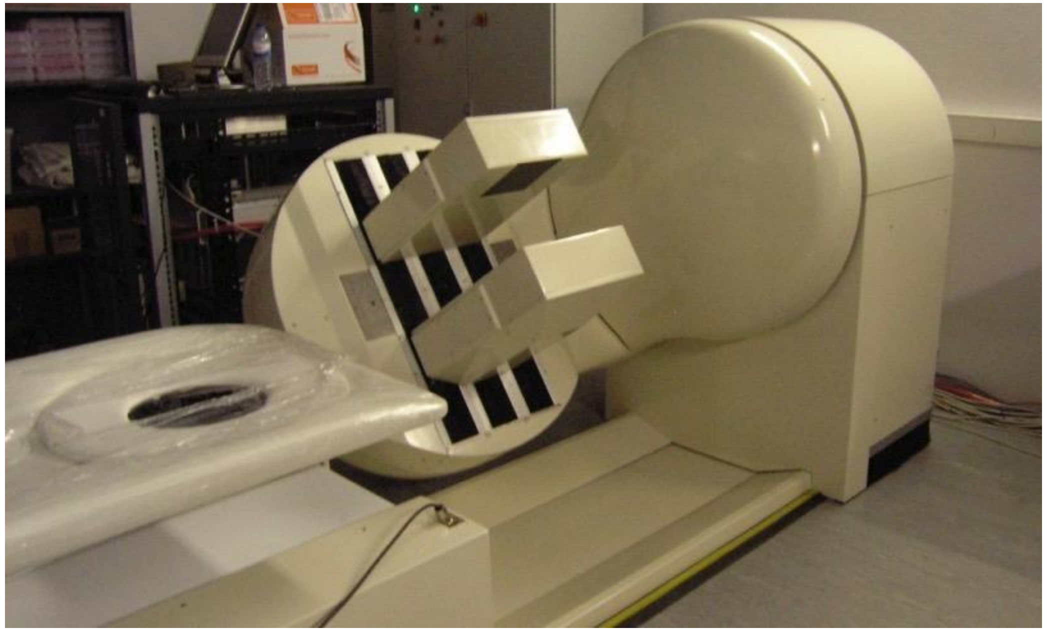


Rat brain FDG image, Julich, Germany

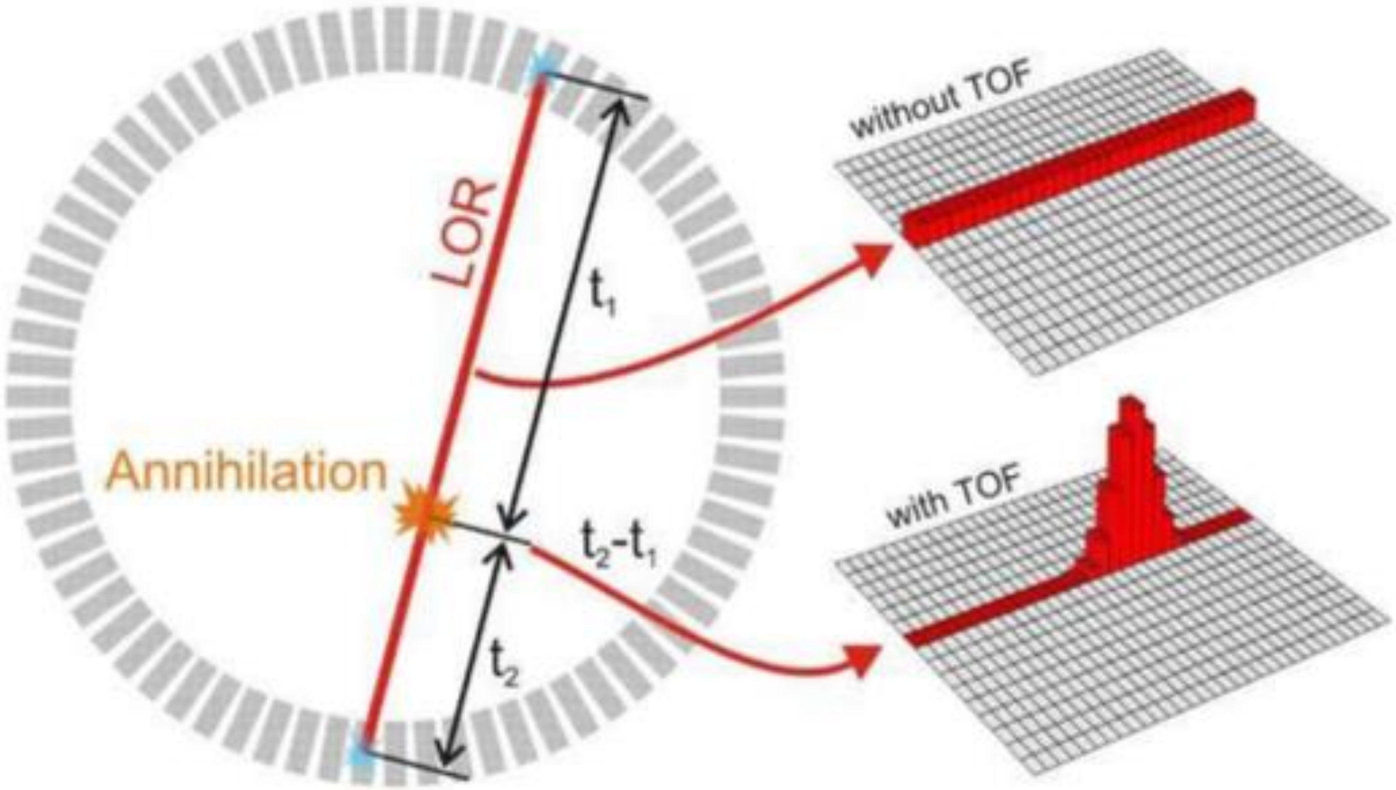
ClearPET
PET for small anymals



EndoTOFPET
Ultrasound endoscopic PET for diagnosis of pancreas & prostate cancer



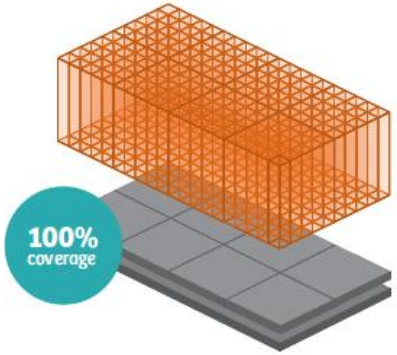
ClearPEM
Dedicated scanner for breast imaging


LOR
Annihilation
t_1
t_2-t_1
t_2
without TOF
with TOF

Current status commercial TOF-PET

TOF PET SIEMENS: BIOGRAPH VISION

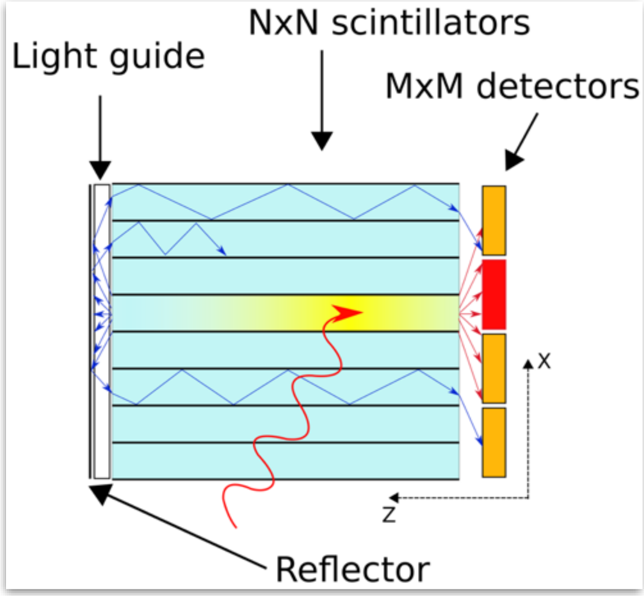
3.2mm section crystals
CTR 215ps

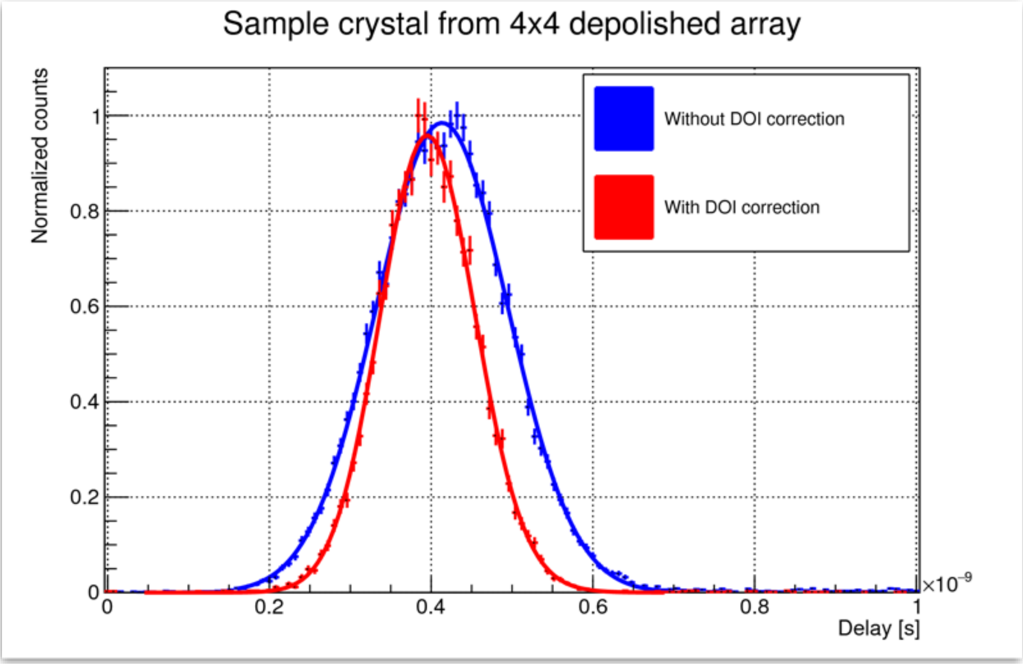


Webpage SIEMENS:
https://static.healthcare.siemens.com/siemens_hwem-hwem_ssxa_websites-context-root/wcm/idc/groups/public/@global/@imaging/@molecular/documents/download/mda4/mzmy/~edisp/biograph_vision_technical_flyer-05440720.pdf

See presentation KT/EP seminar 6 September 2021 from Maurizio Conti

In the CERN Crystal Clear group: <160 ps with DOI



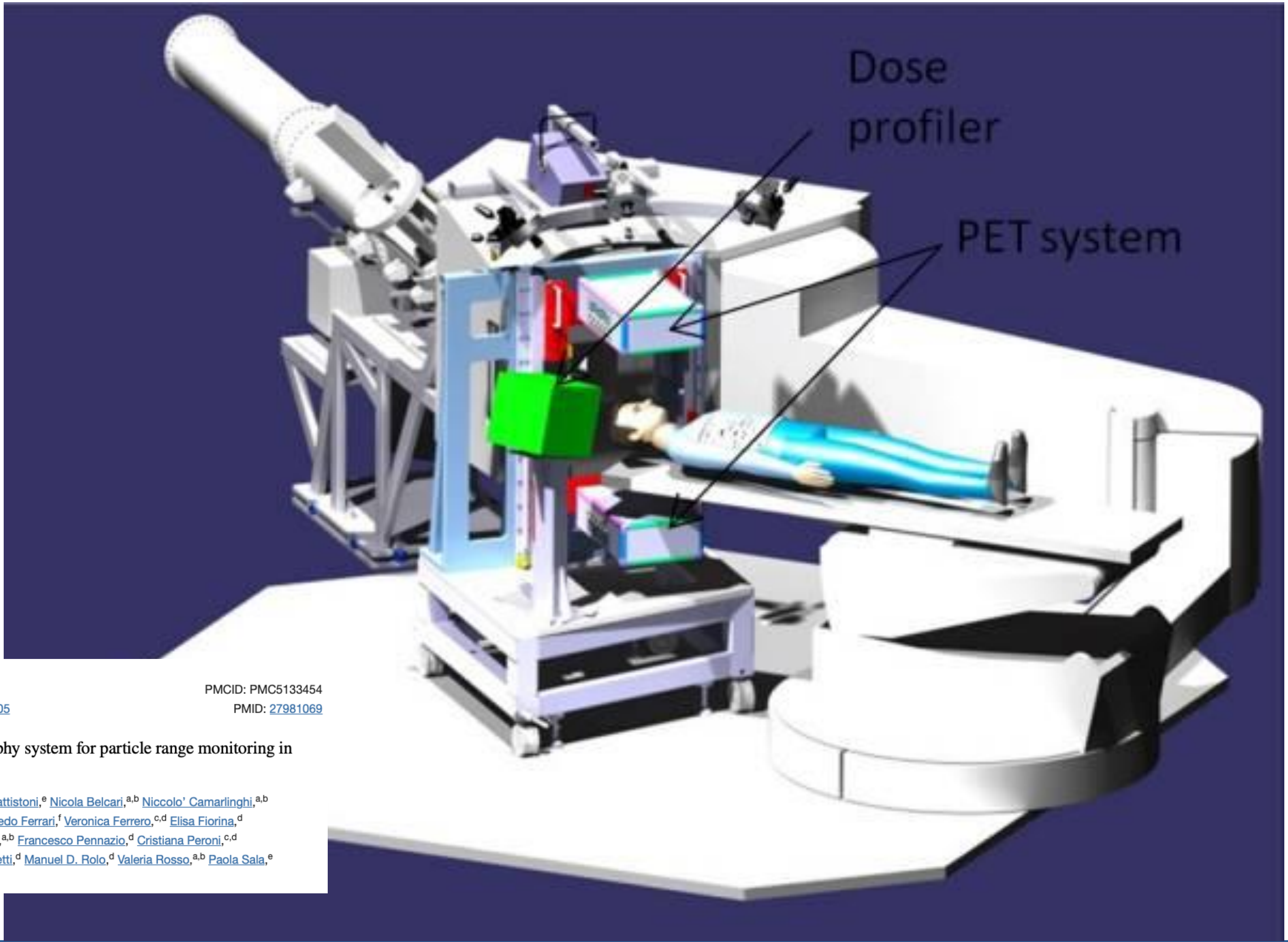


Type of array	Crystals dim. [mm^3]	DOI resolution FWHM [mm]	En. Res. FWHM @ 511 keV [%]	CTR FWHM [ps], central pixels	
				No correction	*With DOI correction*
DOI	3.1 x 3.1 x 15	3.0 ± 0.1	8.9 ± 0.2	234 ± 2	157 ± 2

DOI information extracted without degradation of timing properties

M. Pizzichemi et al, Phys. Med. Biol. 61 (2016) 4679


PET DETECTOR
ENVISION



J Med Imaging (Bellingham). 2017 Jan; 4(1): 011005.
Published online 2016 Dec 2. doi: 10.1117/1.JMI.4.1.011005

PMCID: PMC5133454
PMID: 27981069

INSIDE in-beam positron emission tomography system for particle range monitoring in hadrontherapy

Maria Giuseppina Bisogni,[a,b,*] Andrea Attili,[c,d] Giuseppe Battistoni,[e] Nicola Belcari,[a,b] Niccolo' Camarlinghi,[a,b] Piergiorgio Cerello,[d] Silvia Coli,[d] Alberto Del Guerra,[a,b] Alfredo Ferrari,[f] Veronica Ferrero,[c,d] Elisa Fiorina,[d] Giuseppe Giraudo,[d] Eleftheria Kostara,[b] Matteo Morrocchi,[a,b] Francesco Pennazio,[d] Cristiana Peroni,[c,d] Maria Antonietta Piliero,[a,b] Giovanni Pirrone,[a,b] Angelo Rivetti,[d] Manuel D. Rolo,[d] Valeria Rosso,[a,b] Paola Sala,[e] Giancarlo Sportelli,[a,b] and Richard Wheadon[d]

Radioisotopes

nature International weekly journal of science

Home | News & Comment | Research | Careers & Jobs | Current Issue | Archive | Audio & Video | Fo

Archive > Volume 504 > Issue 7479 > News Feature > Article

NATURE | NEWS FEATURE

Radioisotopes: The medical testing crisis

With a serious shortage of medical isotopes looming, innovative companies are exploring ways to make them without nuclear reactors.

Richard Van Noorden

11 December 2013

PDF | Rights & Permissions

Radioisotopes & Nuclear Medicine

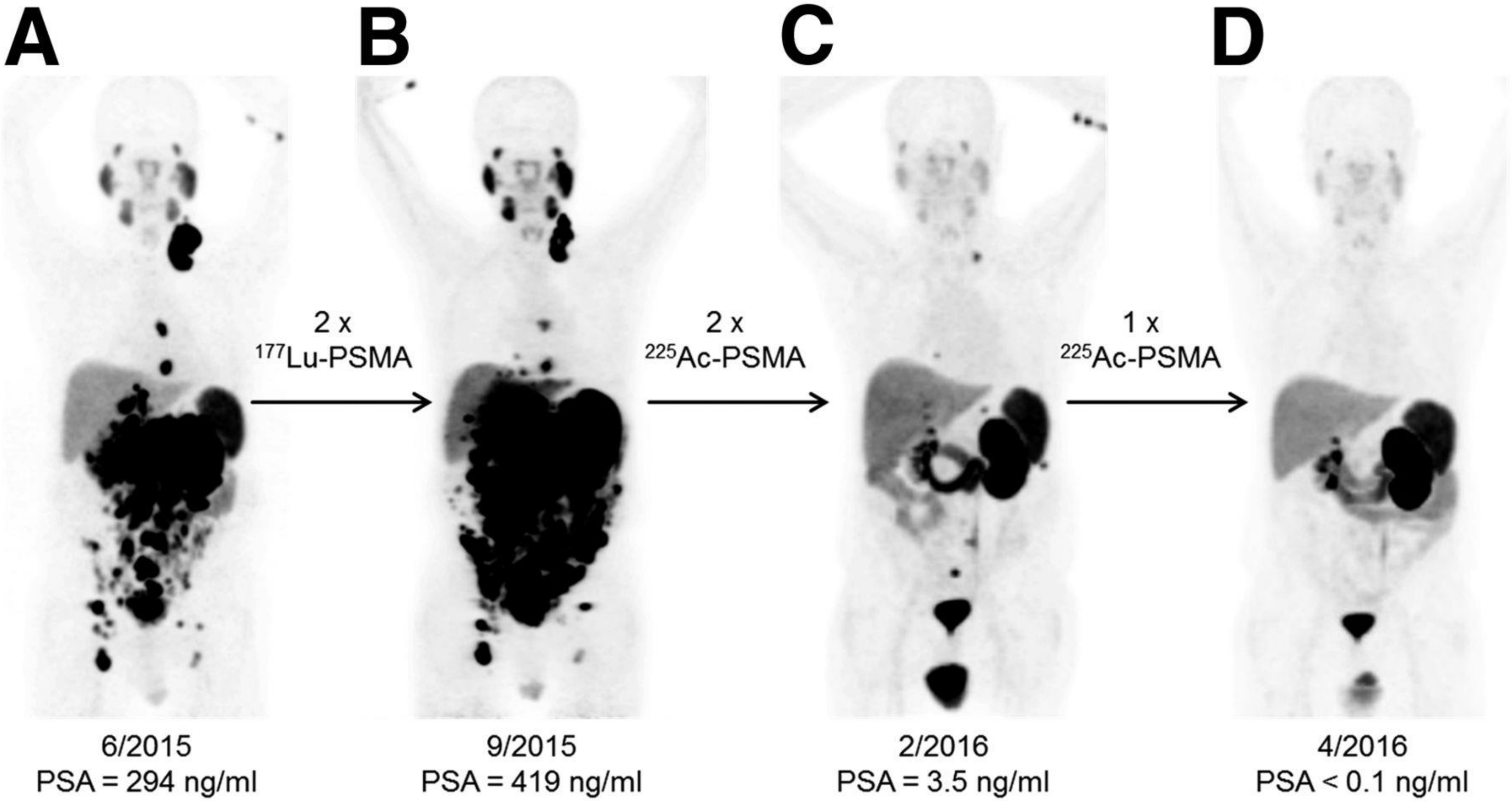
Classification of isotopes for Medicine:

1. Established isotopes → Industrial suppliers
^{99m}Tc, ^{18}F, ^{123,125,131}I, ^{111}In, ^{90}Y

2. Emerging isotopes → Small innovative suppliers
^{68}Ga, ^{82}Rb, ^{89}Zr, ^{177}Lu, ^{188}Re

3. R&D isotopes → Research labs
^{44,47}Sc, ^{64,67}Cu, ^{134}Ce, ^{140}Nd, $^{149, 152, 155, 161}$Tb, ^{166}Ho, ^{195m}Pt, ^{211}At, $^{212, 213}$Bi, ^{223}Ra, ^{225}Ac,…

Courtesy U. Koester

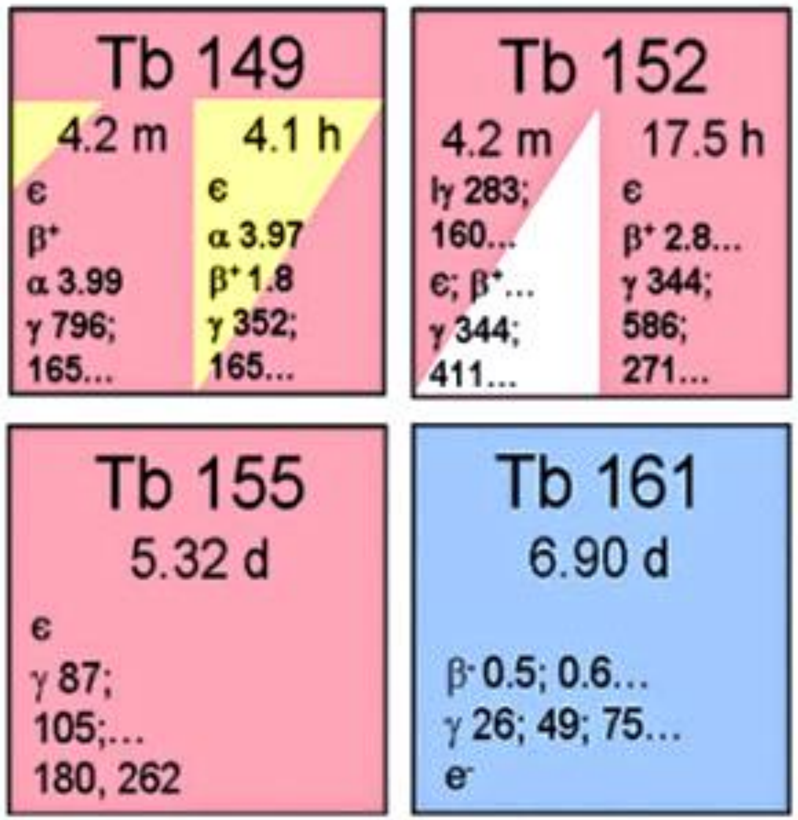


68Ga-PSMA-11 PET/CT scans of patient B. In comparison to initial tumor spread (A), restaging after 2 cycles of β-emitting 177Lu-PSMA-617 presented progression (B).

Clemens Kratochwil et al. J Nucl Med 2016;57:1941-1944

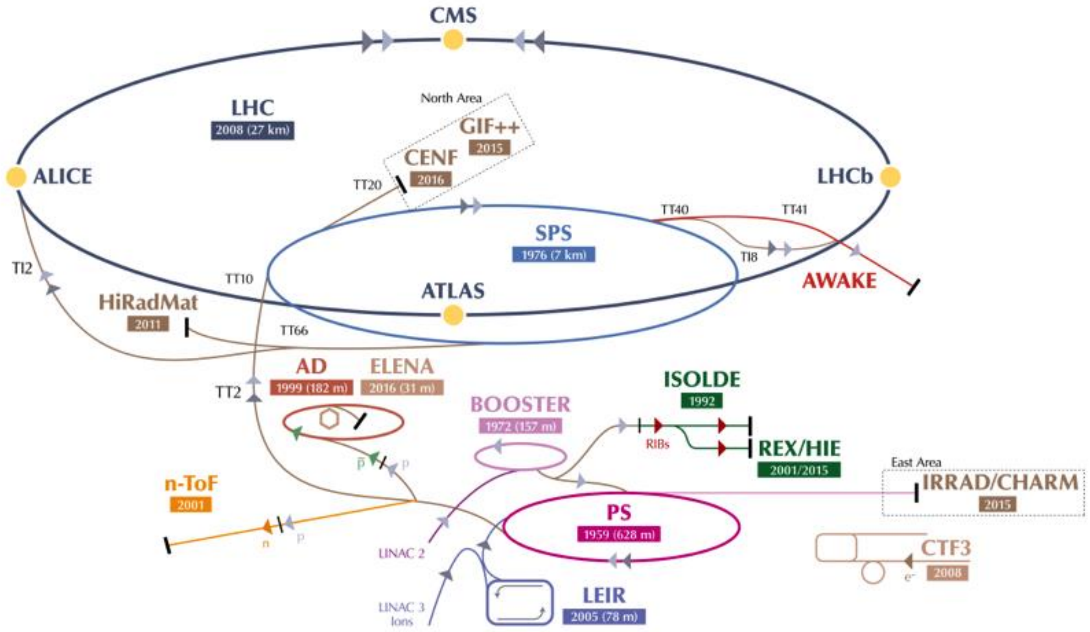
JNM The Journal of NUCLEAR MEDICINE

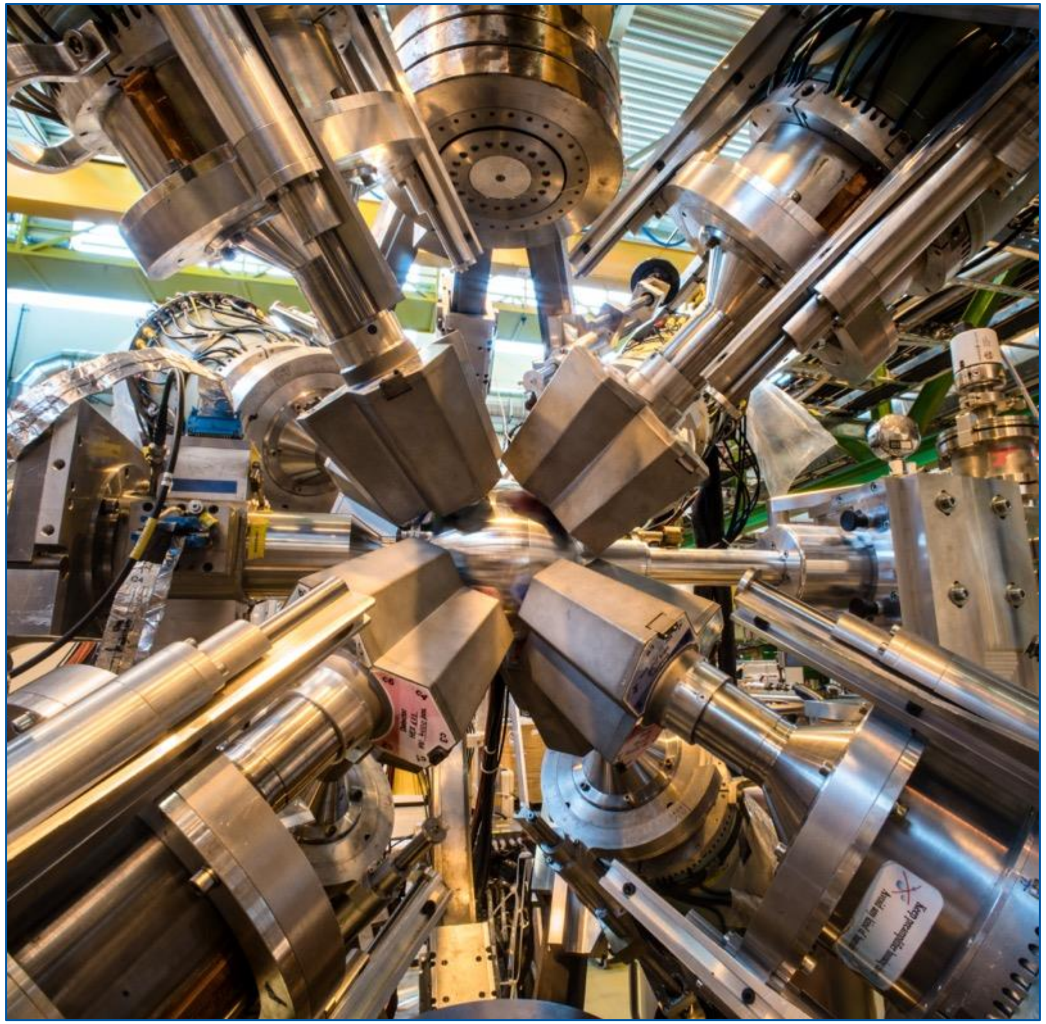
Theranostics



A Unique Matched Quadruplet of Terbium Radioisotopes for PET and SPECT and for α- and β⁻-Radionuclide Therapy: An In Vivo Proof-of-Concept Study with a New Receptor-Targeted Folate Derivative
Cristina Müller, Konstantin Zhernosekov, Ulli Köster, Karl Johnston, Holger Dorrer, Alexander Hohn, Nico T. van der Walt, Andreas Türler and Roger Schibli
Journal of Nuclear Medicine December 2012, 53 (12) 1951-1959; DOI: https://doi.org/10.2967/jnumed.112.107540

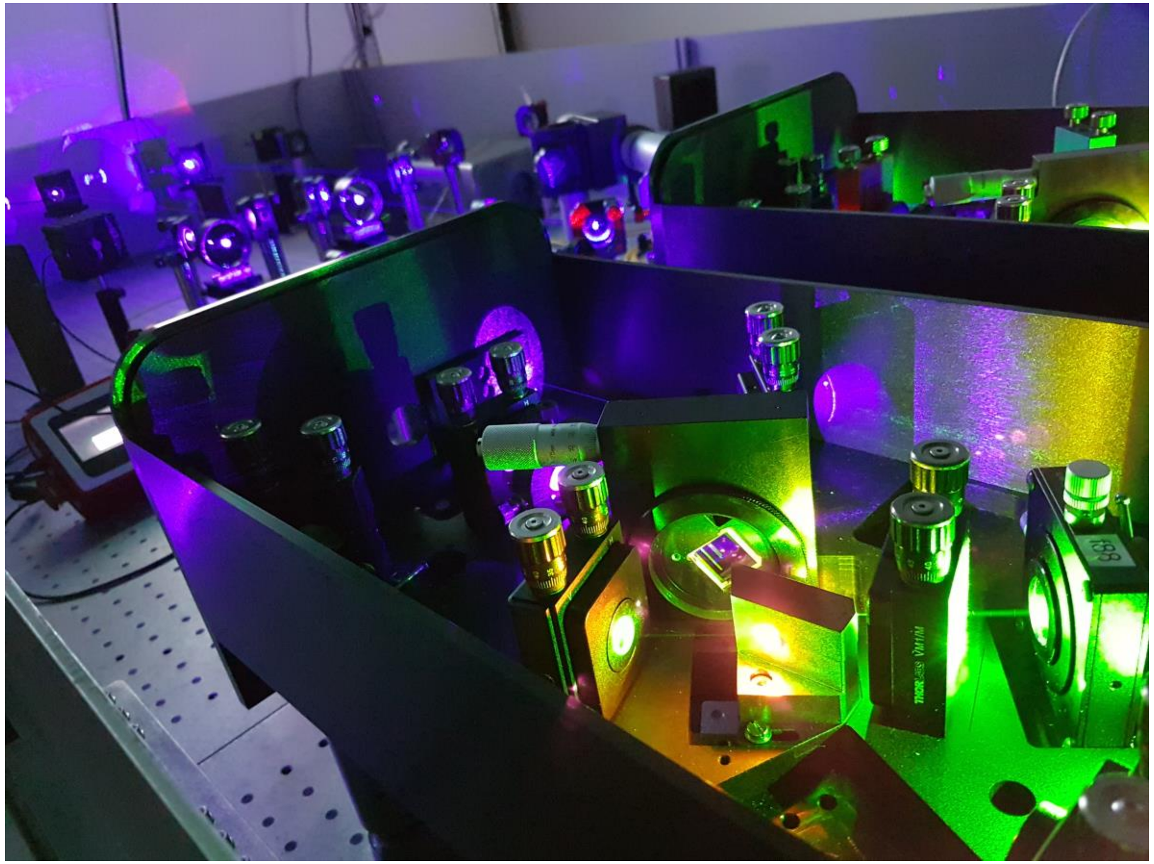
ISOLDE has been running @CERN for > 50 years





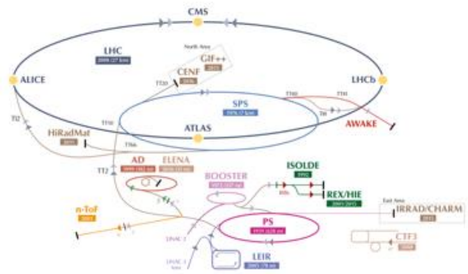
CERN-MEDICIS

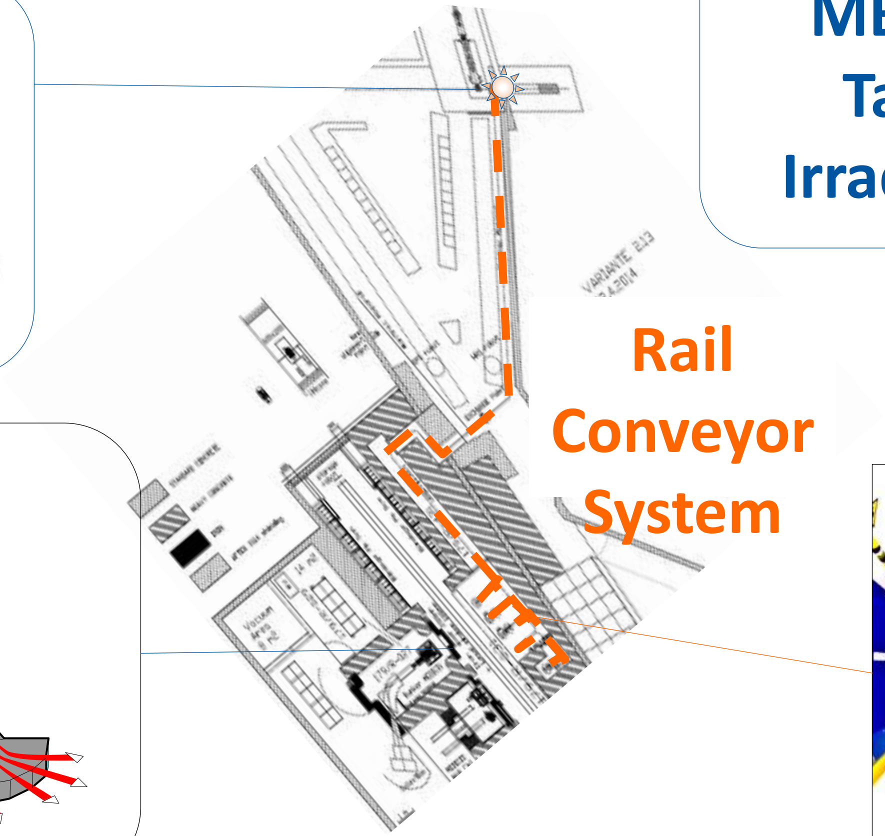
Non-conventional isotopes collected by mass separation for new medical applications



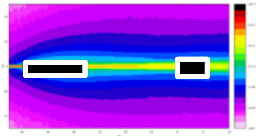
Principle of isotope production

CERN protons



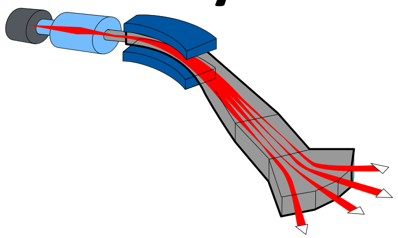


MEDICIS Target Irradiation



Rail Conveyor System

MEDICIS Laboratory



Cicone *et al. EJNMMI Research* (2019) 9:53
https://doi.org/10.1186/s13550-019-0524-7

EJNMMI Research

ORIGINAL RESEARCH **Open Access**

Internal radiation dosimetry of a ^{152}Tb-labeled antibody in tumor-bearing mice

Check for updates

Francesco Cicone[1*], Silvano Gnesin[2], Thibaut Denoël[1], Thierry Stora[3], Nicholas P. van der Meulen[4,5], Cristina Müller[4], Christiaan Vermeulen[4], Martina Benešová[4], Ulli Köster[6], Karl Johnston[3], Ernesto Amato[7], Lucrezia Auditore[7], George Coukos[8], Michael Stabin[9], Niklaus Schaefer[1], David Viertl[1] and John O. Prior[1]

RN from CERN-ISOLDE & CERN-MEDICIS
Conjoint work between CERN-ILL-PSI-CHUV

LOGIN / REGISTER

Research Topic

MEDICIS-Promed: Advances in Radioactive Ion Beams for Nuclear Medicine

Topical issue in Frontiers in Medicine
>20 manuscripts being submitted
(ca 10 with MEDICIS results)

SCIENTIFIC REPORTS

OPEN

Chemical Purification of Terbium-155 from Pseudo-Isobaric Impurities in a Mass Separated Source Produced at CERN

Received: 24 April 2019
Accepted: 11 July 2019
Published online: 26 July 2019

Ben Webster[1,2], Peter Ivanov[1], Ben Russell[1], Sean Collins[1], Thierry Stora[3], Joao Pedro Ramos[3,4], Ulli Köster[5], Andrew Paul Robinson[1,6,7] & David Read[1,2]

RN from CERN-ISOLDE & CERN-MEDICIS
Conjoint work between CERN-NPL-ILL-University of Manchester

Radiation-detected Nuclear Magnetic Resonance

Development of a new medical diagnostic modality

NMR is versatile and powerful but not sensitive due to:

- Small degree of spin polarization
- Inefficient detection

Our combined paths to increase sensitivity => radiation-detected NMR:

- (Hyper)polarisation of spins
- Detection of asymmetry in decay radiation

Radiation-detected Nuclear Magnetic Resonance

Development of a new medical diagnostic modality

NMR is versatile and powerful but not sensitive due to:

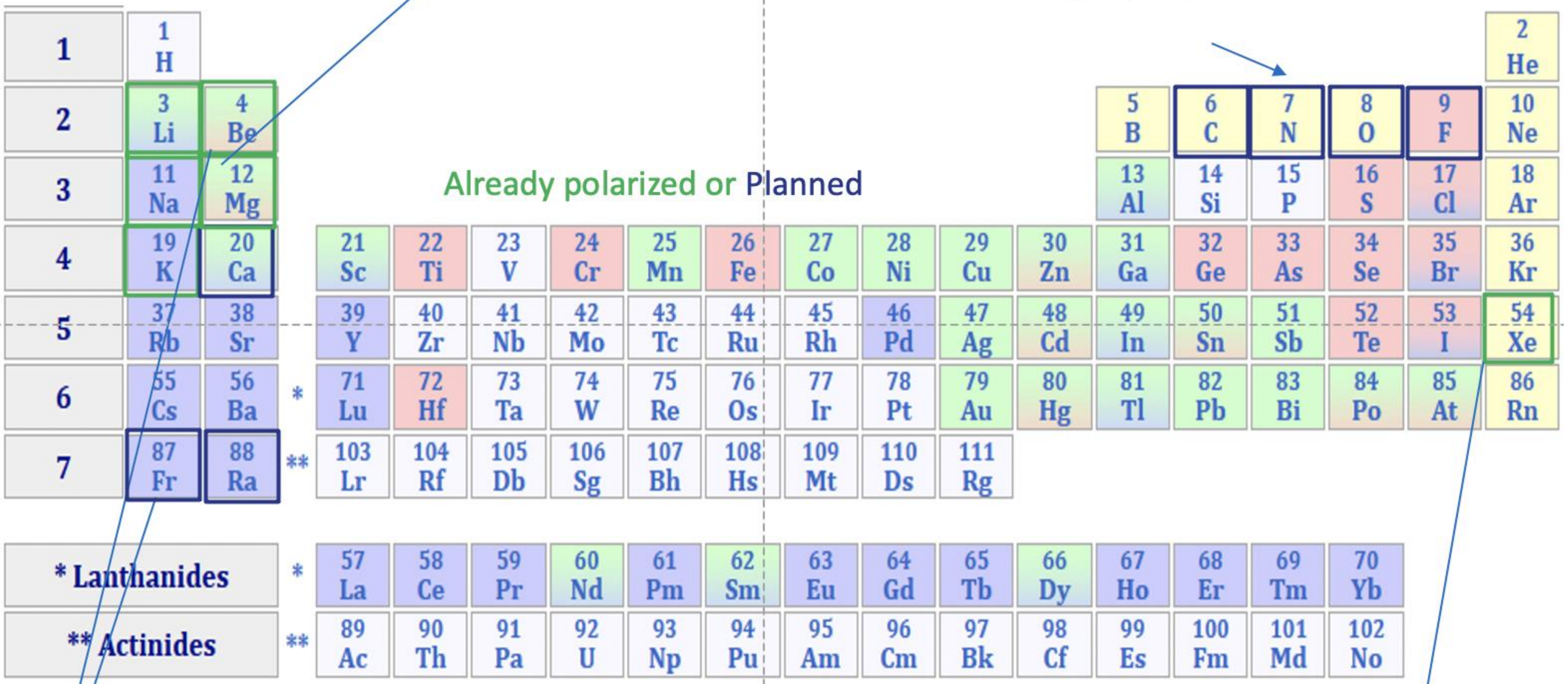
- Small degree of spin polarization
- Inefficient detection

Our combined paths to increase sensitivity => radiation-detected NMR:

Up to 10 orders of magnitude more sensitive than conventional NMR/MRI;
& Up to 5 orders of magnitude more sensitive than hyperpolarised NMR/MRI

β-NMR, betaDropNMR:
ERC Starting Grant
ERC Proof of Concept application

RD-ZULF-NMR (with Mainz):
Patent applications filed
CERN MA project, 2022-



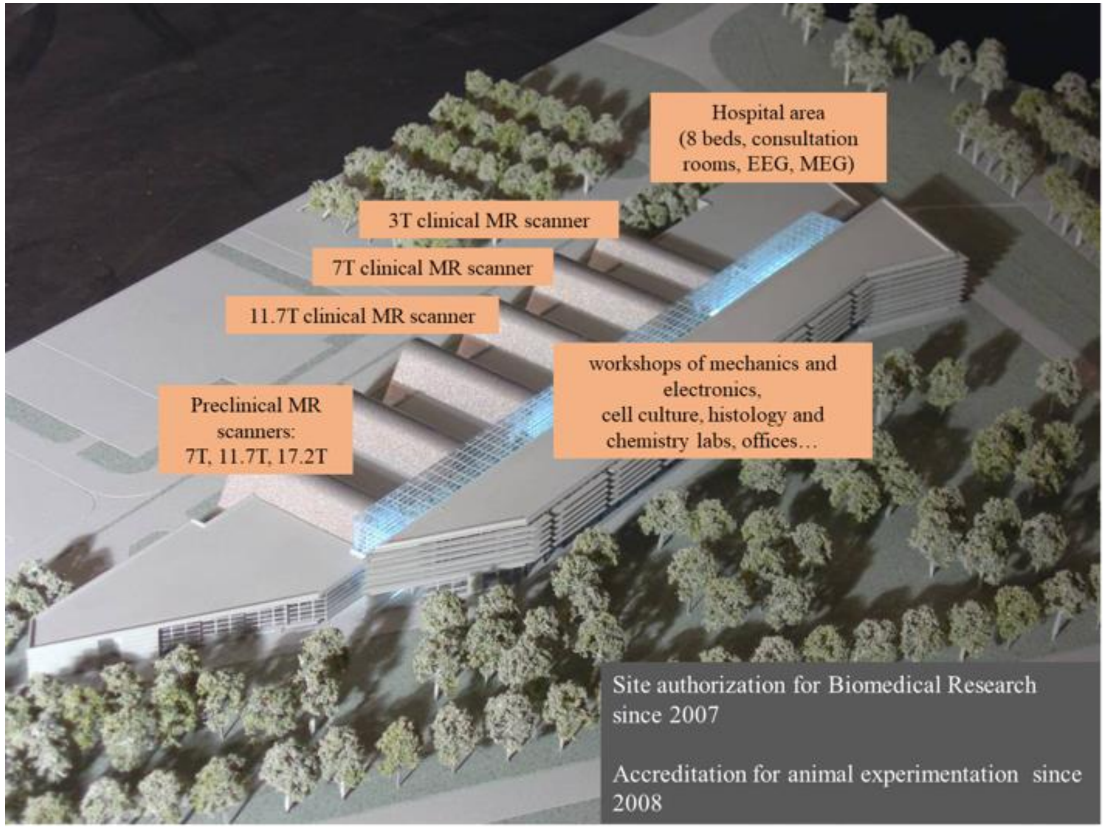
β-NMR, PreSOBEN:
ERC Consolidator Grant

γ-MRI (with Geneva, Madrid, Leuven, Strasbourg, Maastricht):
CERN MA project, 2017-2021
EU FET-Open project, 2022-

6

The ISEULT whole body 11.7 T MRI magnet

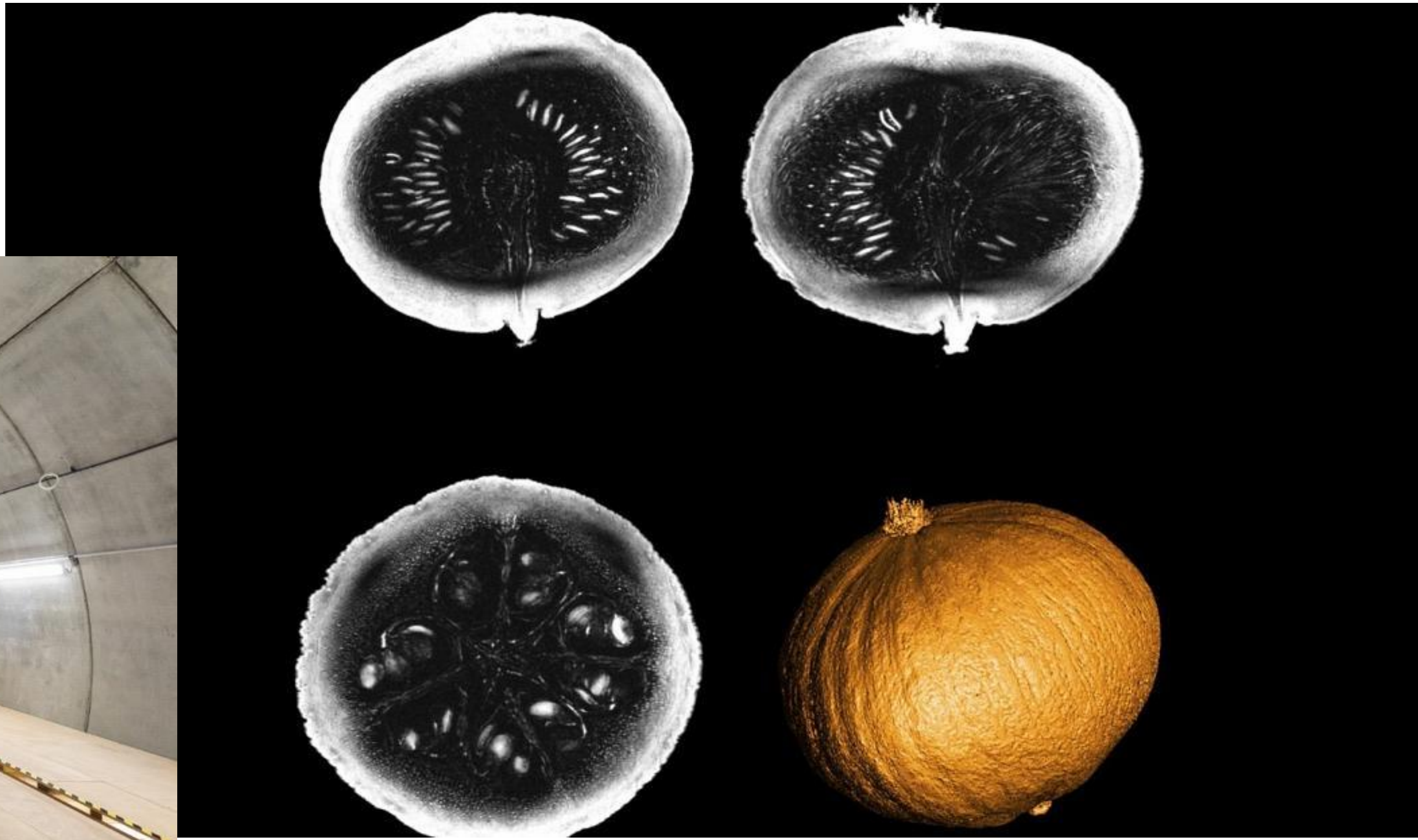
NEUROSPIN: a unique concept in neuroscience research



The ISEULT whole body 11.7 T MRI magnet

The ISEULT magnet - a French-German initiative

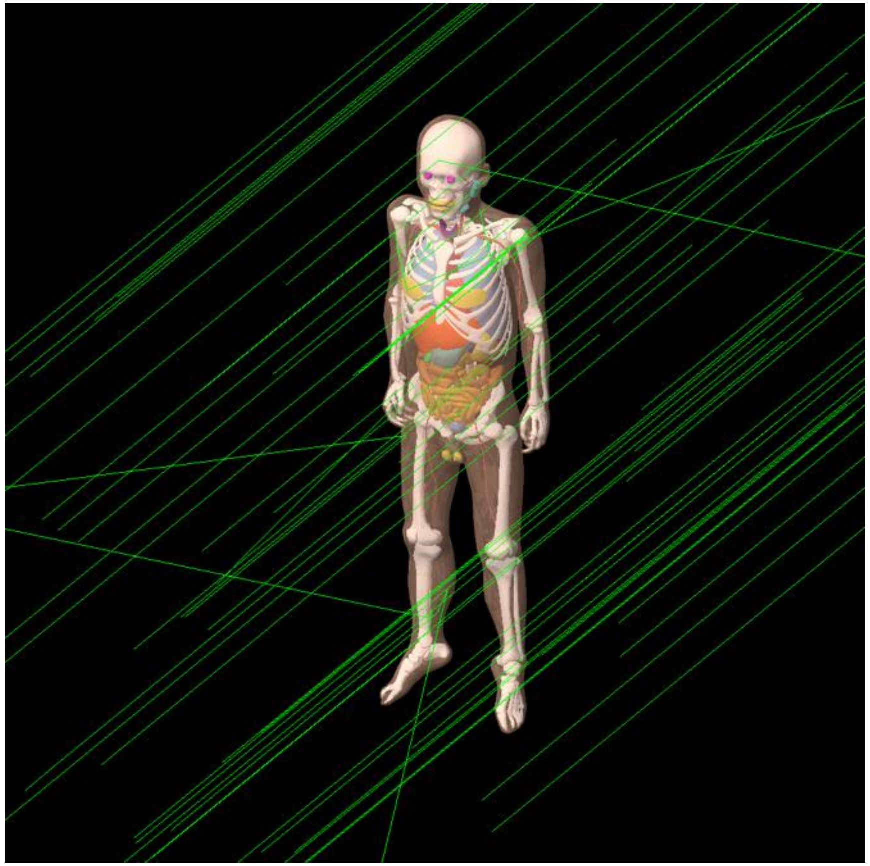
Full field of 11.72 teslas achieved on July 18, 2019



First images released Oct. 7, 2021

Digital Technologies

Human phantoms



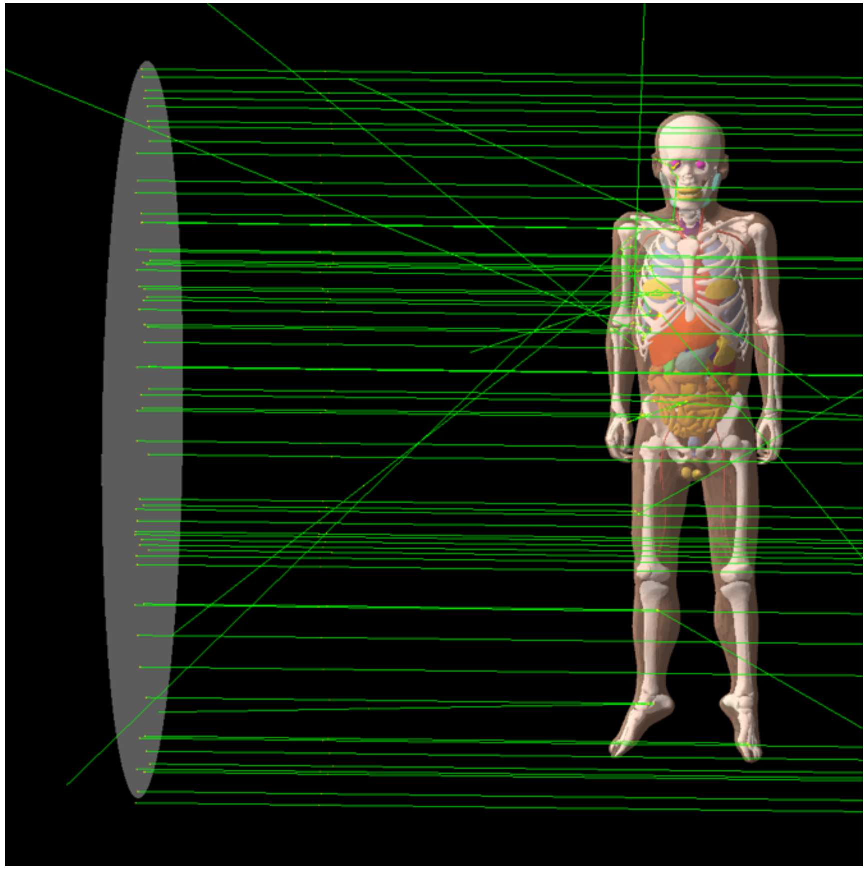
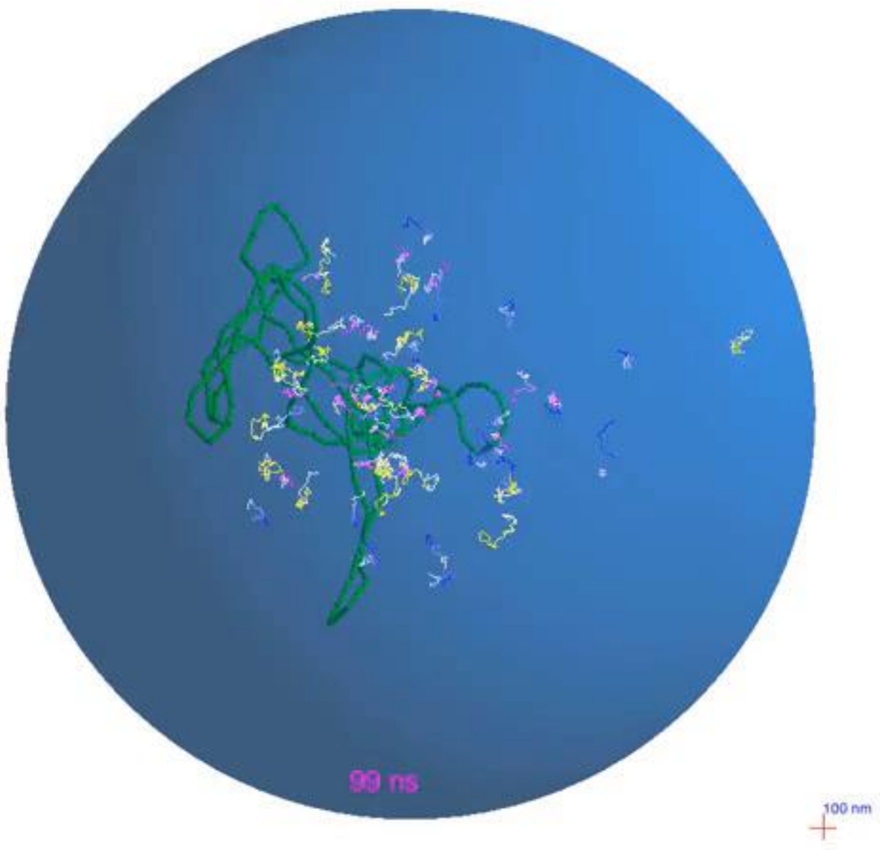


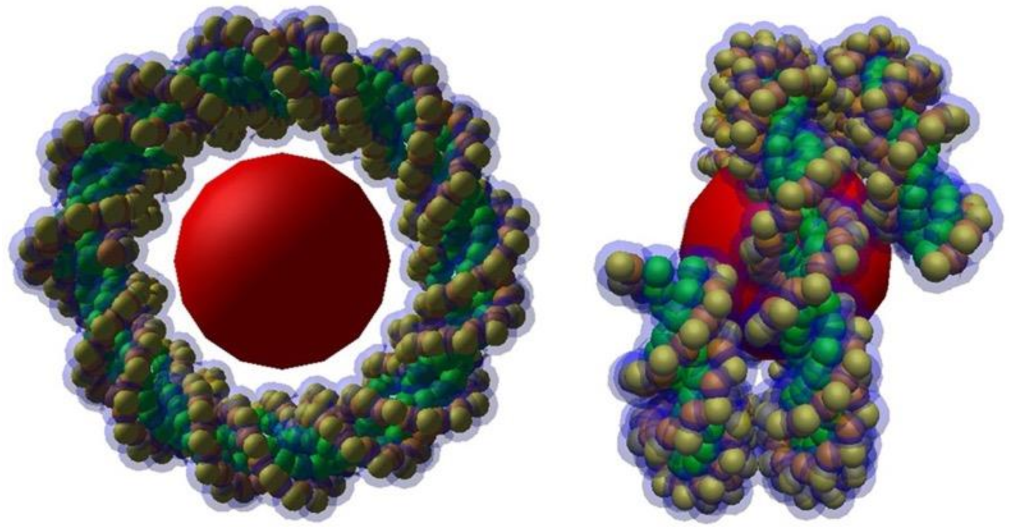
Image of Polygon-Surface Reference Korean Male Phantom (PSRK-Man), implemented in Geant4. Courtesy of C.-H. Kim & C. Choi, Hanyang Univ.

Geant4-DNA applications

Simulation using Geant4-DNA of irradiation of a pBR322 plasmid, including radiolysis



- movie courtesy of V. Stepan (NPI-ASCR/CENBG/CNRS/IN2P3/ESA



Model of nucleosome created using DnaFabric*, imported into Geant4 to model irradiation, repair mechanisms.

* S. Meylan et al, Comp. Phys. Comm. 204 (2016) p159

Tools for specific applications

based on Geant4

Tools provide specific capabilities for creating setups and measuring

create setup, steer simulation via 'text commands'

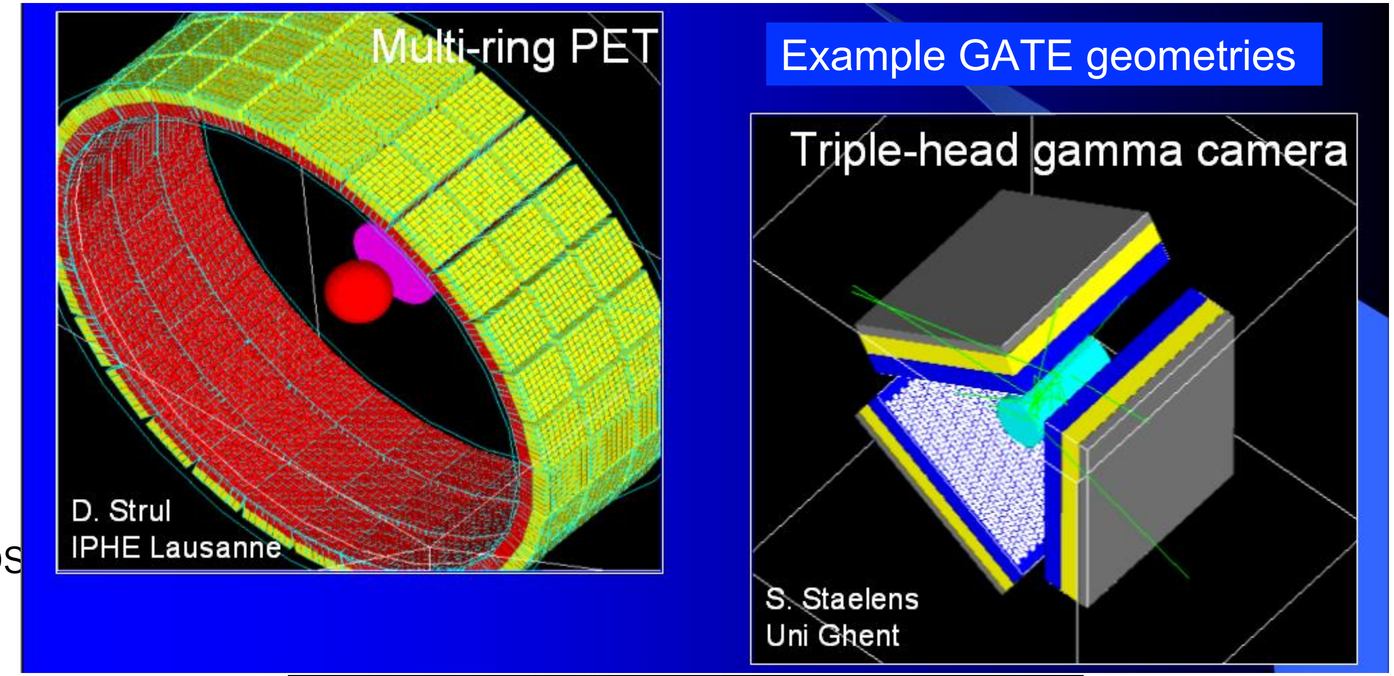
output adapted for application-area

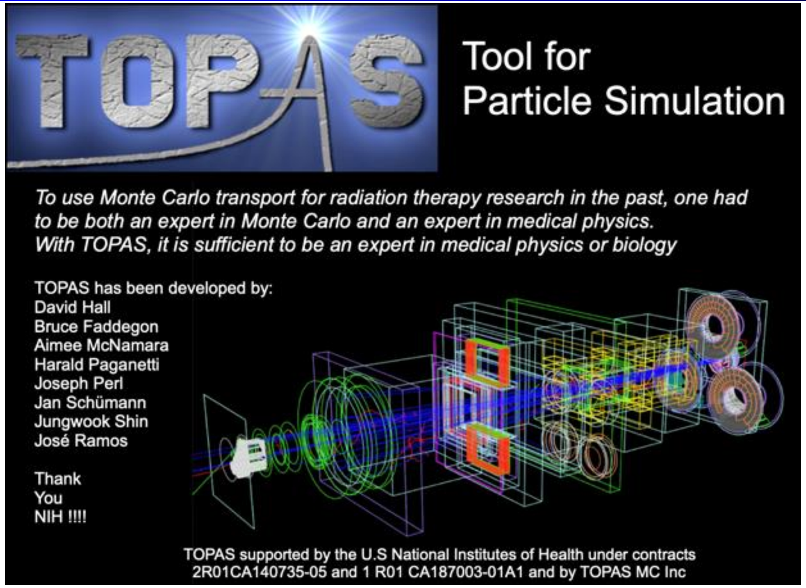
GATE (FR, DE, GR, PL, AT) - PET/SPECT,

TOPAS (US) - protontherapy

GAMOS (ES) - for nuclear medicine applications

Developed by external parties - using capabilities of G4 toolkit

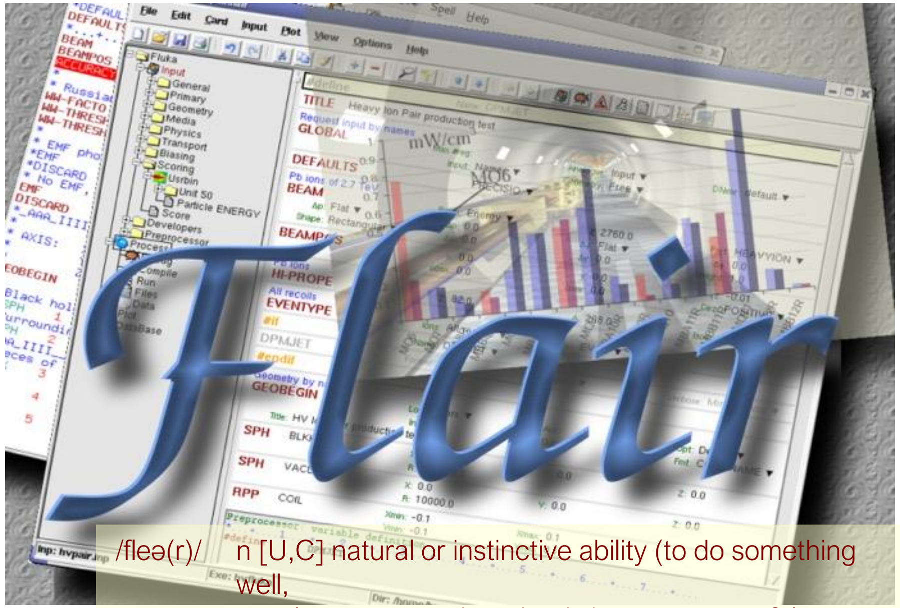




Flair – fluka advanced interface

FLUKA

FLUKA.CERN



/fleə(r)/ n [U,C] natural or instinctive ability (to do something well,
to select or recognize what is best, more useful, etc.
[*Oxford Advanced Dictionary of Current English*]

is more than a graphical Interface

→ is a complete integrated working environment for FLUKA

Greatly enhanced productivity
→ users focus on their problem rather than on technicalities

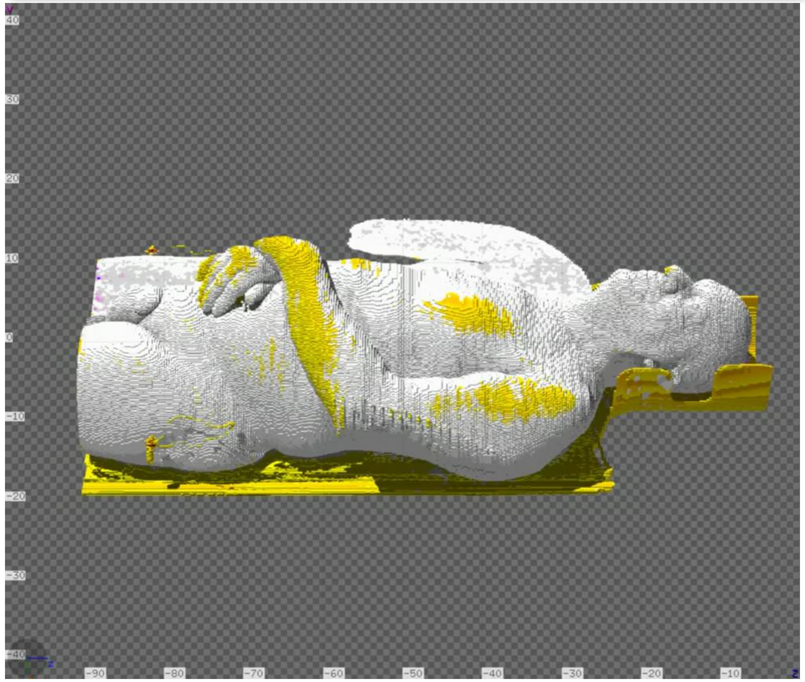
Improvements for medical simulations

Process **DICOM standard files** for radiotherapy purposes

Provides easy-to use tool for **treatment plan re-simulation** and quantitative comparison

- Enables precise description of patient model and beam delivery system

In this presentation: a selection of results obtained by the CERN group



FLUKA.CERN

3D spatial dose distribution simulated with FLUKA

Importing the RT DOSE with the activity mapping of ^{68}Ga

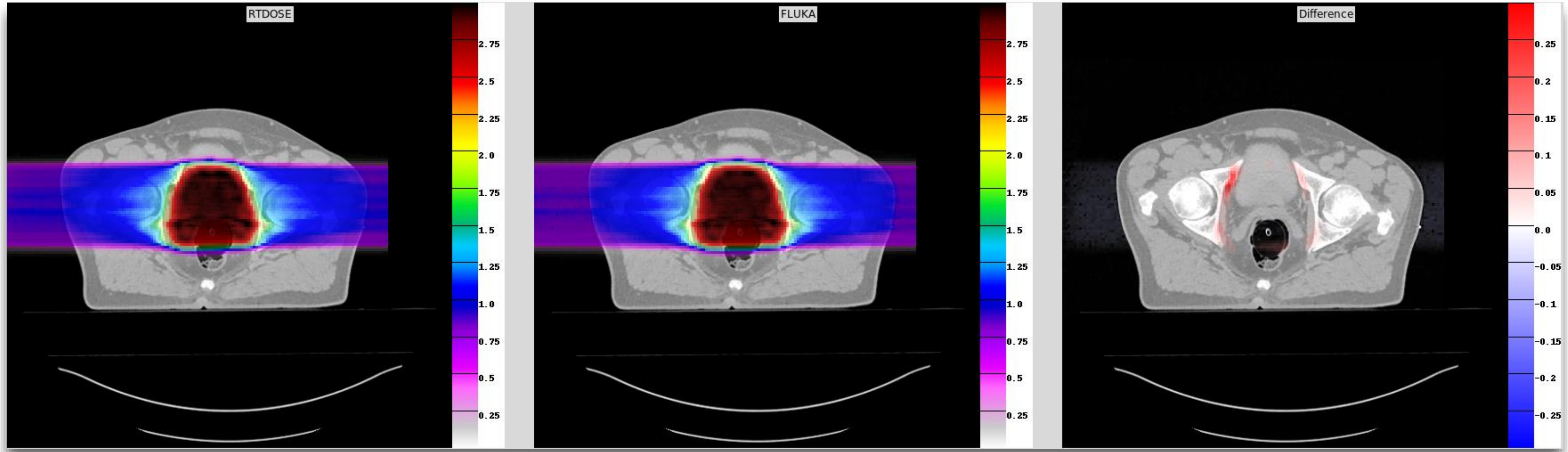
Simulation of the ^{68}Ga decays

Very fast setup time
less than a few minutes with a few clicks from the user

Run FLUKA simulations with no programming skills or file editing requirements!

Sensitivity studies of Monte Carlo TP recalculations

FLUKA.CERN



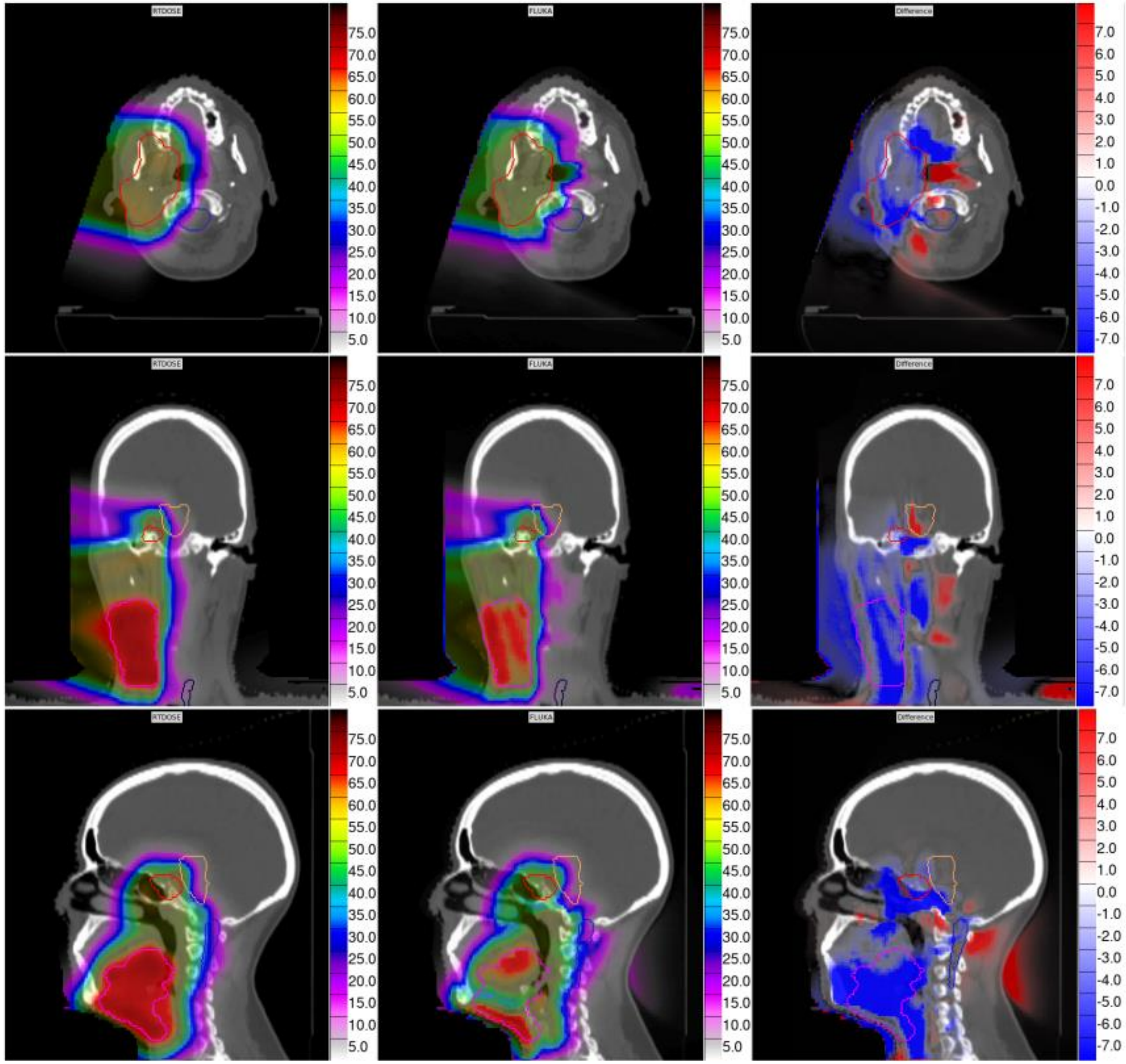
Proton prostate patient case (MedAustron)
W.Kozlowska PhD

Calibration of HU to density
HU to tissue conversion methods
Size of the scoring grid
Ionization potentials of tissue materials
Accuracy of primary beam description
...

One of the **major contributing factor to radiation therapy accidents** related to the TPS is the **lack of independent calculations** for beam intensities

IAEA Human Health Report No.7 Vienna (2013)

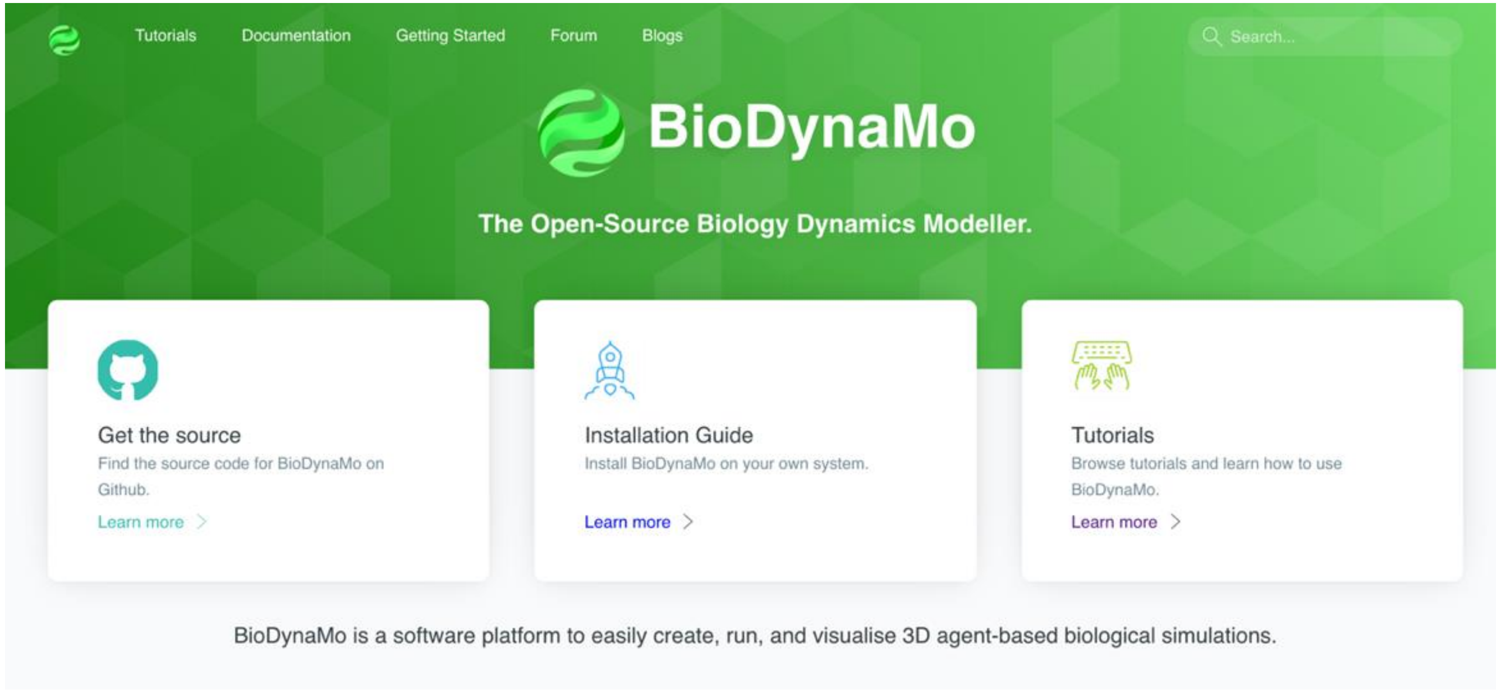
Head and Neck case



FLUKA.CERN

Head and Neck case (CNAO)
W.Kozlowska PhD

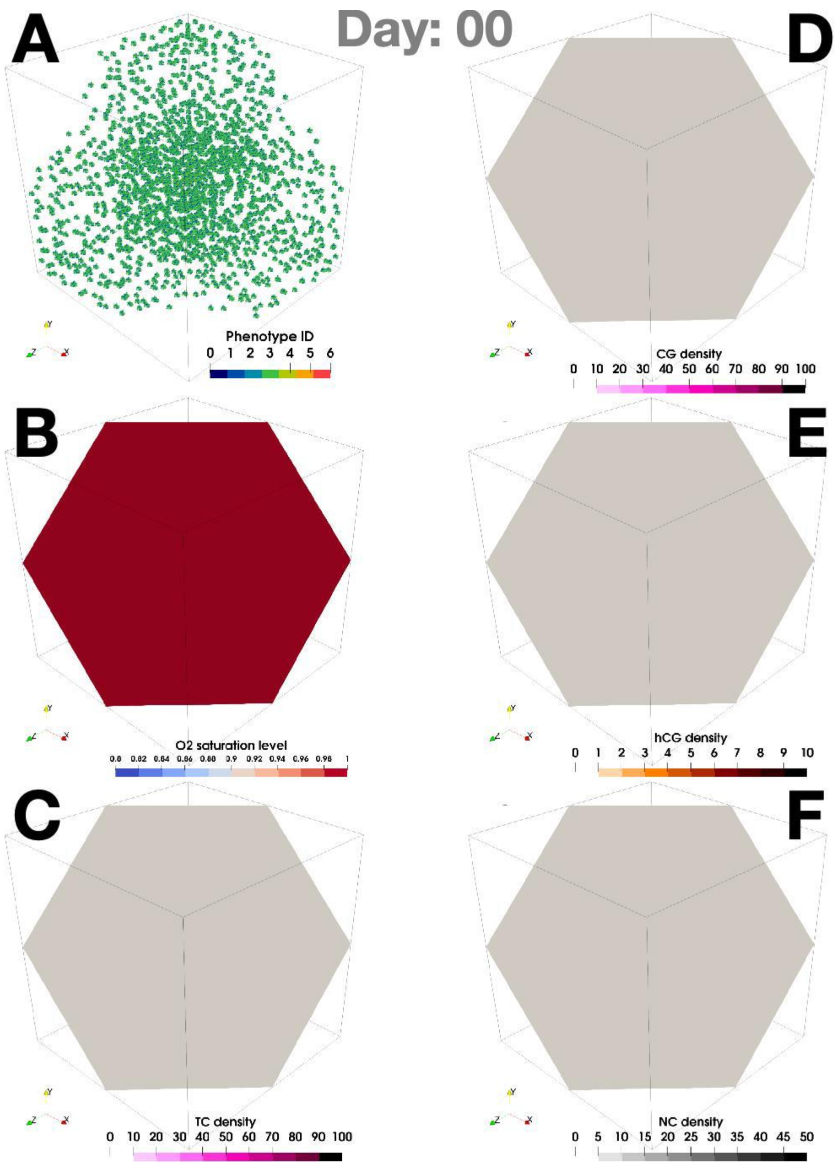
BioDynaMo: An open-source software framework



An open-source software platform to easily create, run, and visualise 3D agent-based simulations, built up around CERN-developed technologies

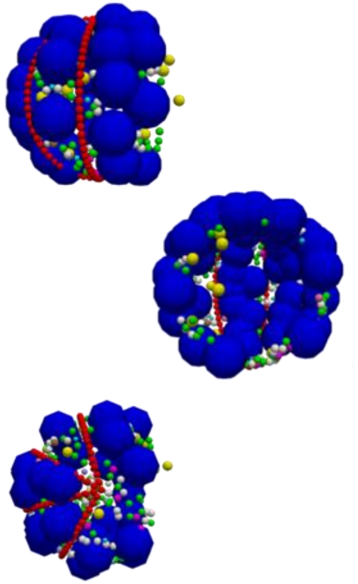
www.biodynamo.org

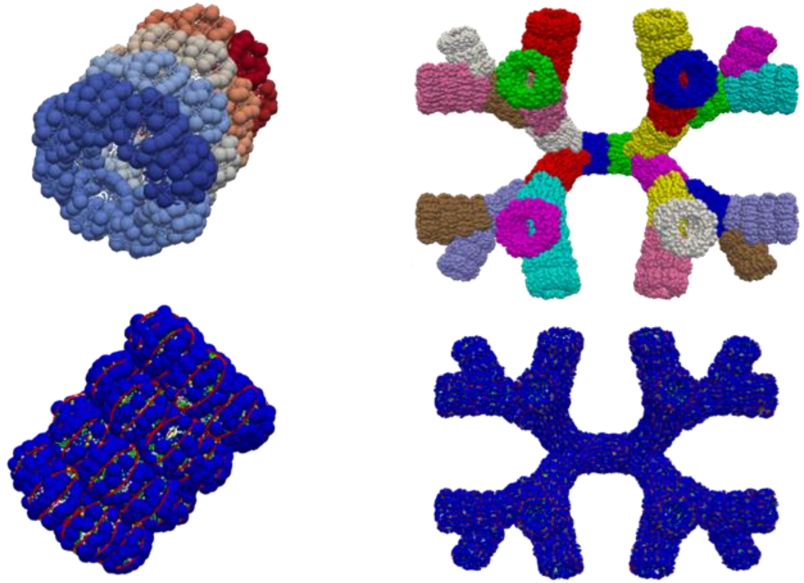
Newcastle University
CERN
University of Cyprus
GSI
Scimpulse foundation
UNIVERSITÉ DE GENÈVE
UNIVERSITY OF SURREY
Statistics Netherlands
ImmunoBrain Checkpoint



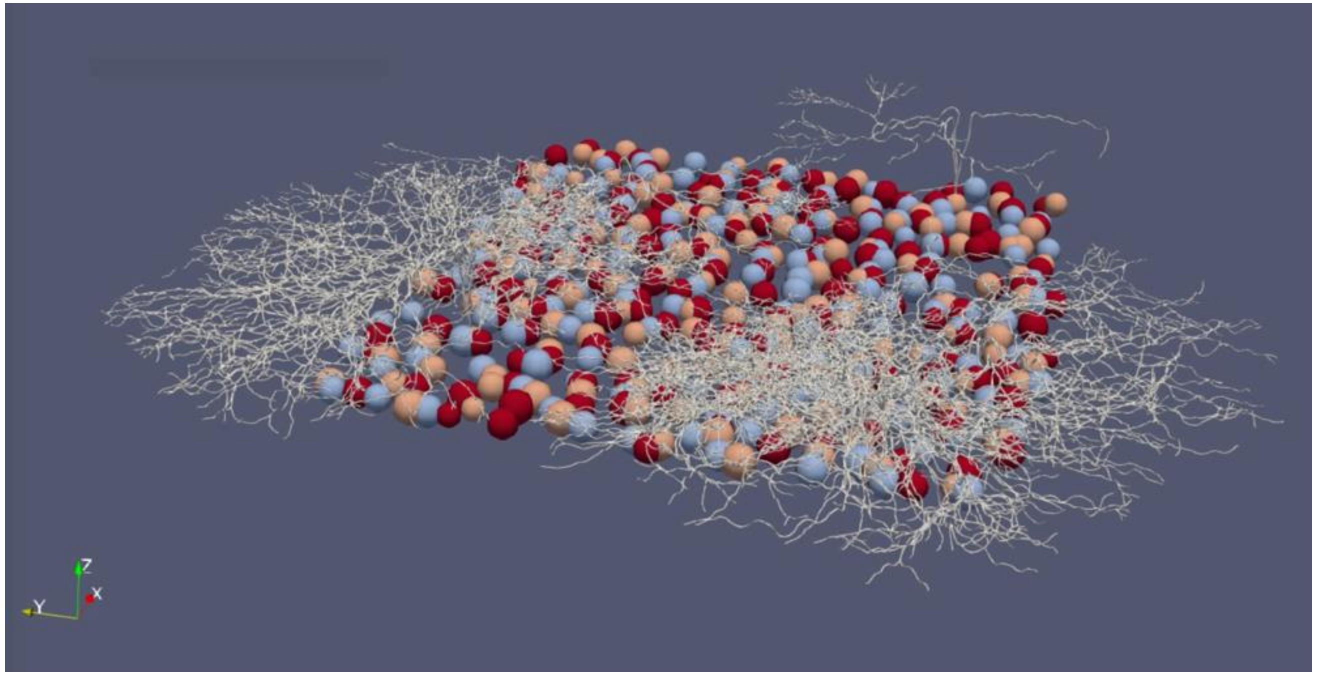
From De Montigny et al., Methods, 2020

BioDynaMo
Biology Dynamics Modeller

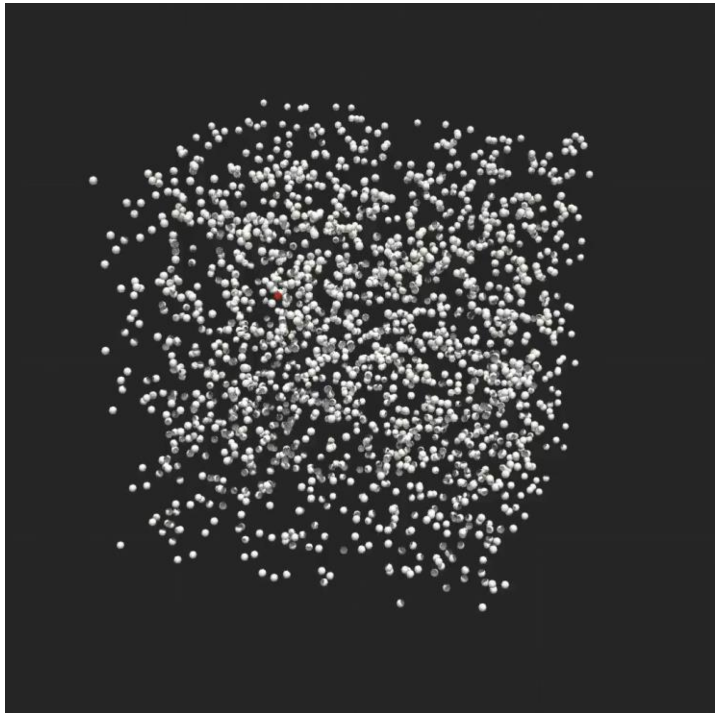




Courtesy Nicolo Cogno, TU Darmstadt (Germany)



Courtesy Jean de Montigny and Roman Bauer



CAiMIRA
CERN Airborne Model for Indoor Risk Assessment

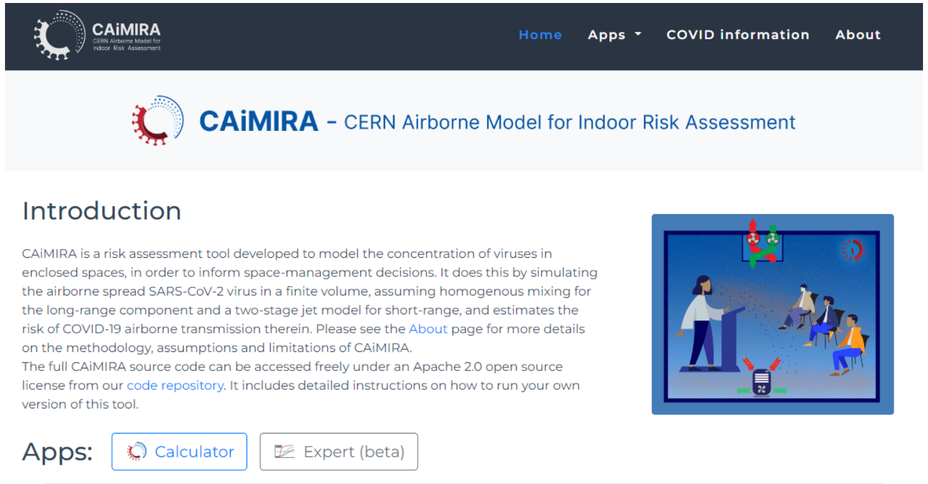
What is CAiMIRA ?

- A model for estimating the risk of secondary on-site transmission, via the airborne route, of respiratory pathogens in indoor settings, using different compensatory measures (masks, ventilation, filtration, vaccination, occupancy, etc.

Results tailored for your room

Multidisciplinary model

Web app cern.ch/cara



Research articles

Modelling airborne transmission of SARS-CoV-2 using CARA: risk assessment for enclosed spaces

Andre Henriques, Nicolas Mounet, Luis Aleixo, Philip Elson, James Devine, Gabriella Azzopardi, Marco Andreini, Markus Rognlien, Nicola Tarocco and Julian Tang

Published: 11 February 2022 https://doi.org/10.1098/rsfs.2021.0076

Extension to the medical field of AI tools for

functional and dependency analysis of complex critical infrastructure

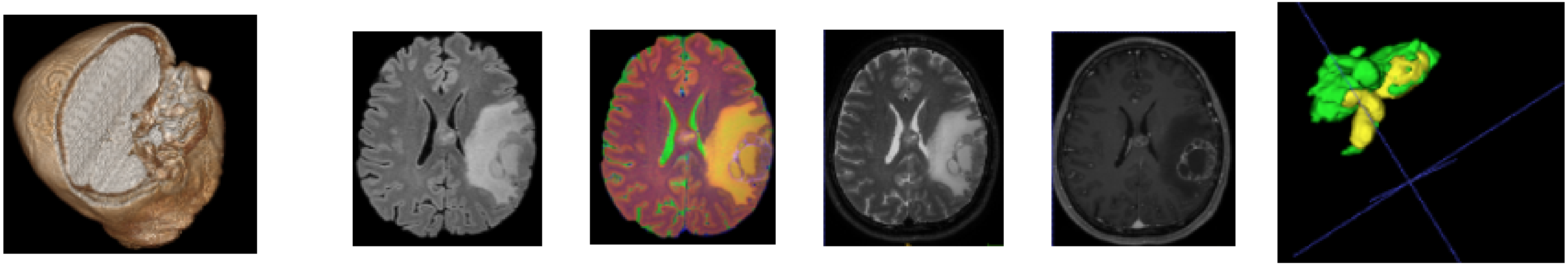
digital imaging for radiography autonomous defects detection

Background work:

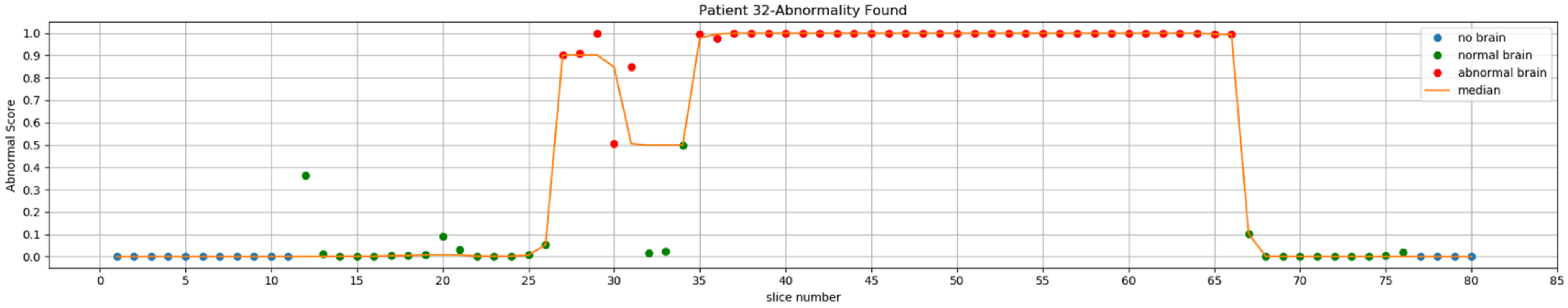
the CASO platform: AI-assisted diagnosis and predictive maintenance for critical infrastructures operation

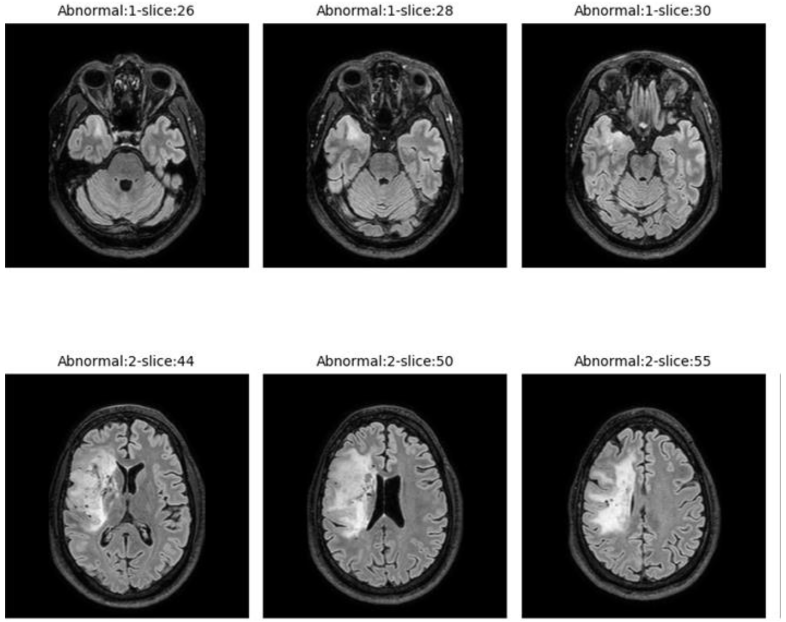
the CAFEIN platform: AI-assisted X-ray image analysis for quality control of LHC welds

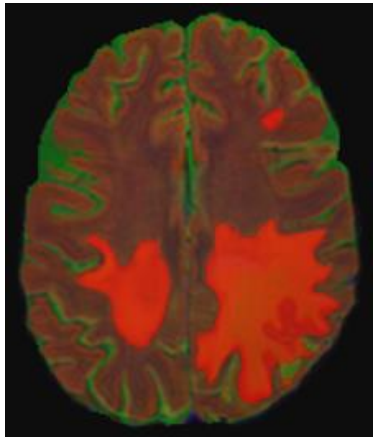
- **Field of application:**
  - Semi-automated analysis and modelling of medical data and images
  - Diagnosis and treatments based on multiple features and data beyond human perception
  - Federated learning and distributed computing to ensure privacy for a wide and safe international collaboration as well as access to diagnostic models in remote areas
- **Competing technologies:**
  - No other technologies ready to use in the field, tailored to clinical needs and privacy preserving
- **Medical application:**
  - Brain pathologies detection, analysis and segmentation based on CNN applied to MRI images

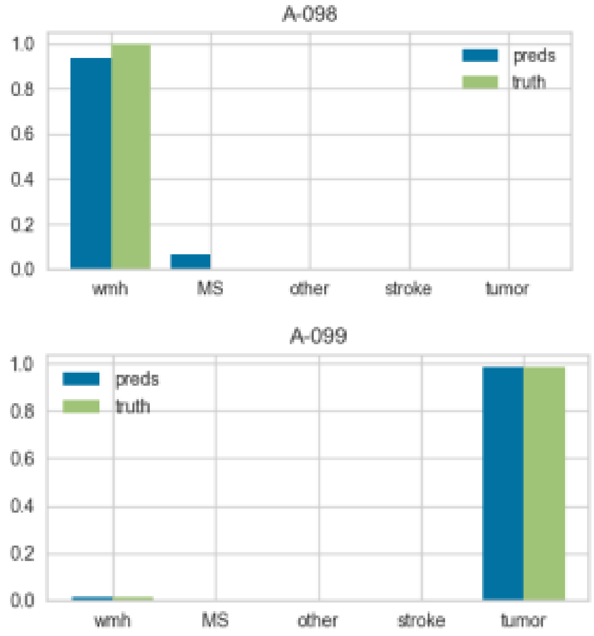


Final Output- Screening Tool









MARCHESE: Remote Monitoring of Health Parameters

Background: response time of a rescue team of CERN Fire Brigade could take up to 22 minutes in the LHC tunnel.

The research is oriented towards the development of robotic solutions: workers' detection and health contactless monitoring during emergencies situations is important to support in search and rescue scenarios.

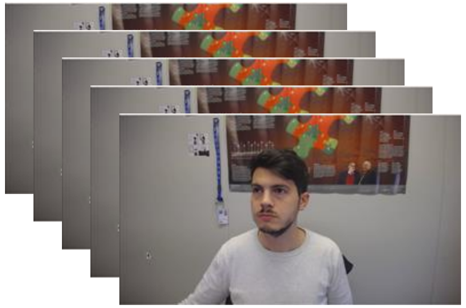
PHOTOPLETHYSMOGRAPHY

- Optical technique used to detect volumetric changes in the blood in the peripheral circulation.
- Blood volume changes in microvascular tissue (i.e. at cheeks and forehead level)

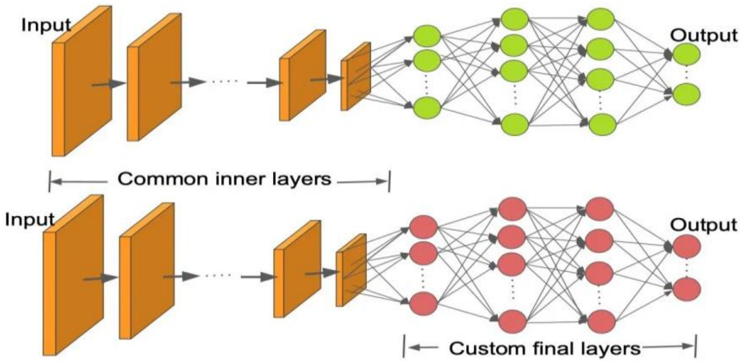
Remote PPG: Video pre-processing

30 FPS

30 images/second
Logitech 1080p FULL HD
GPU NVIDIA GTX 1080p



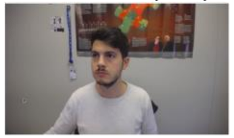
NEURAL NETWORK



SEPARATION of SKIN PIXELS from NO-SKIN PIXELS

BINARY IMAGE

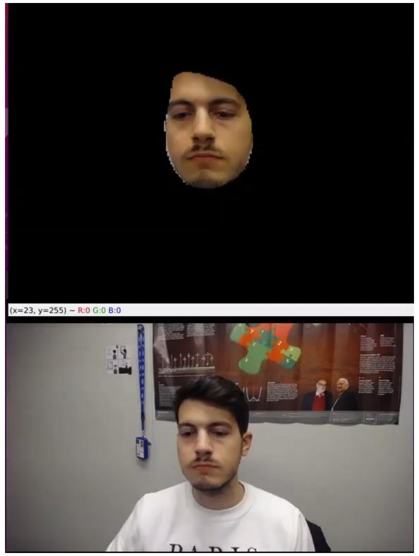
HSV IMAGE (RGB)



MASK

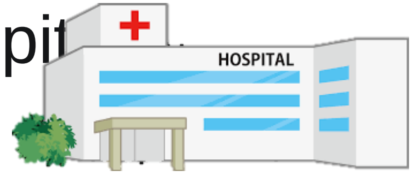
$$\begin{pmatrix} 0&0&0&0&0&0&0\\ 0&0&0&\mathbf{1}&\mathbf{1}&0&0\\ 0&0&\mathbf{1}&\mathbf{1}&\mathbf{1}&\mathbf{1}&0\\ 0&0&\mathbf{1}&\mathbf{1}&\mathbf{1}&\mathbf{1}&0\\ 0&0&\mathbf{1}&\mathbf{1}&\mathbf{1}&0&0\\ 0&0&0&\mathbf{1}&0&0&0\\ 0&0&0&0&0&0&0 \end{pmatrix} \times \begin{pmatrix} 35&7&68&92&88&123&8\\ 97&2&48&\mathbf{92}&\mathbf{44}&113&1\\ 3&28&\mathbf{25}&\mathbf{49}&\mathbf{28}&\mathbf{89}&123\\ 15&28&\mathbf{68}&\mathbf{92}&\mathbf{88}&\mathbf{23}&68\\ 35&77&\mathbf{18}&\mathbf{91}&\mathbf{18}&43&12\\ 38&19&64&\mathbf{12}&87&13&84\\ 49&28&76&92&48&123&5 \end{pmatrix} = \begin{pmatrix} 0&0&0&0&0&0&0\\ 0&0&0&\mathbf{92}&\mathbf{44}&0&0\\ 0&0&\mathbf{25}&\mathbf{49}&\mathbf{28}&\mathbf{89}&0\\ 0&0&\mathbf{68}&\mathbf{92}&\mathbf{88}&\mathbf{23}&0\\ 0&0&\mathbf{18}&\mathbf{91}&\mathbf{18}&0&0\\ 0&0&0&\mathbf{12}&0&0&0\\ 0&0&0&0&0&0&0 \end{pmatrix}$$

REAL TIME



Medical Applications

In contact with Medical Staff in the Hospit

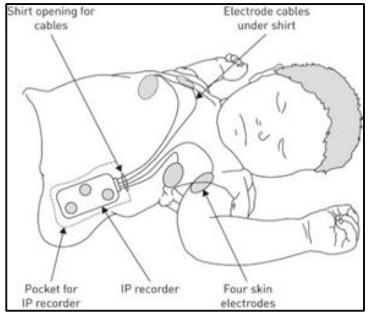


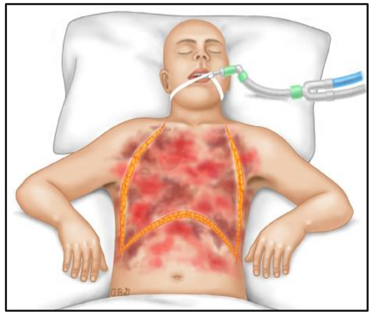
➡ **Understand which are the needs of the real scenario**

➡ **Develop technologies useful**

NEWBORN and PATIENTS WITH BURNS

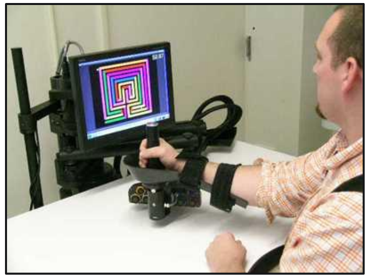
- Fragile skin
- No abrasions and damage of epidermis
- Continuous and constant monitoring





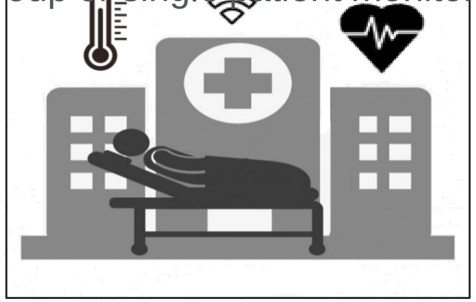
ASSISTIVE ROBOTIC REHABILITATION

- adjust the exercise level (increase or decrease) according to the patient's physiological response
- Exploit residual patient capabilities (assistance-as-needed)

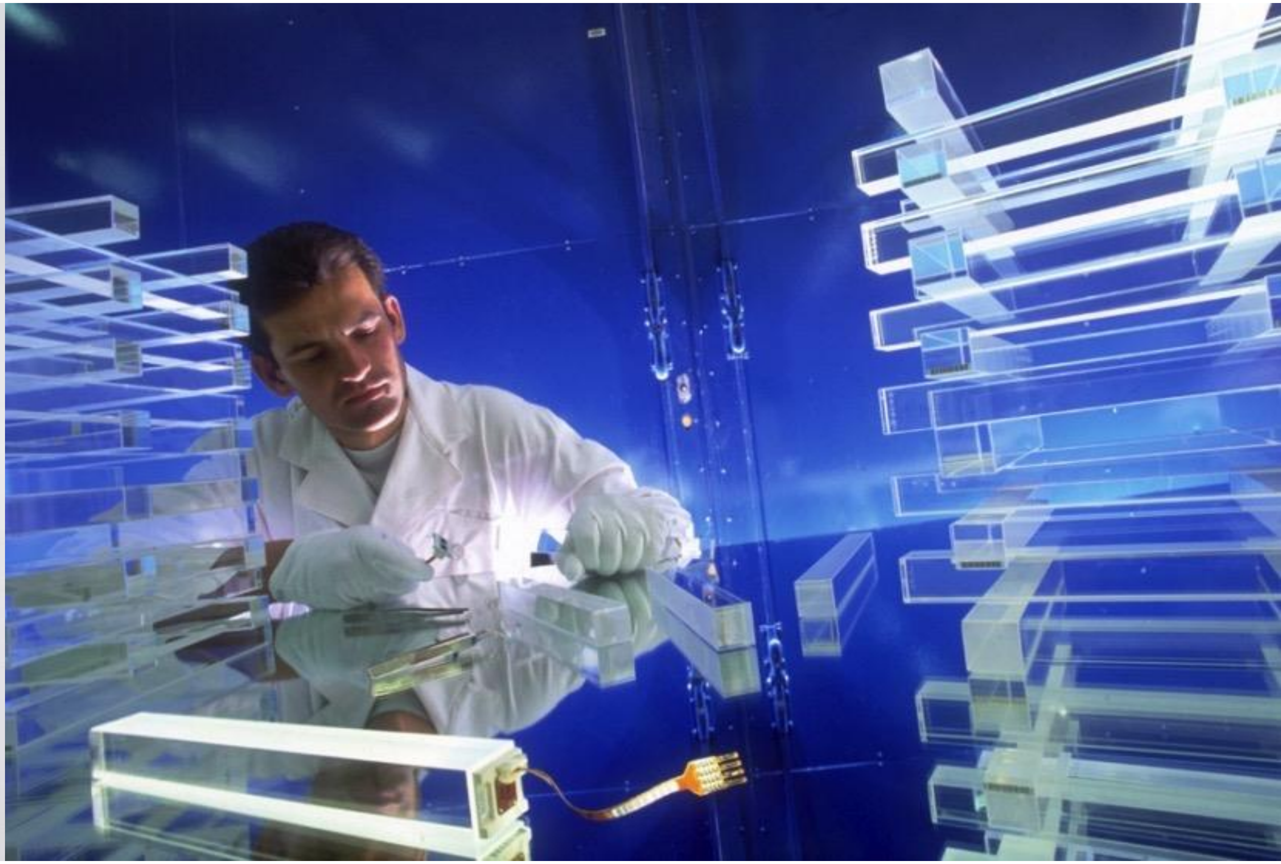


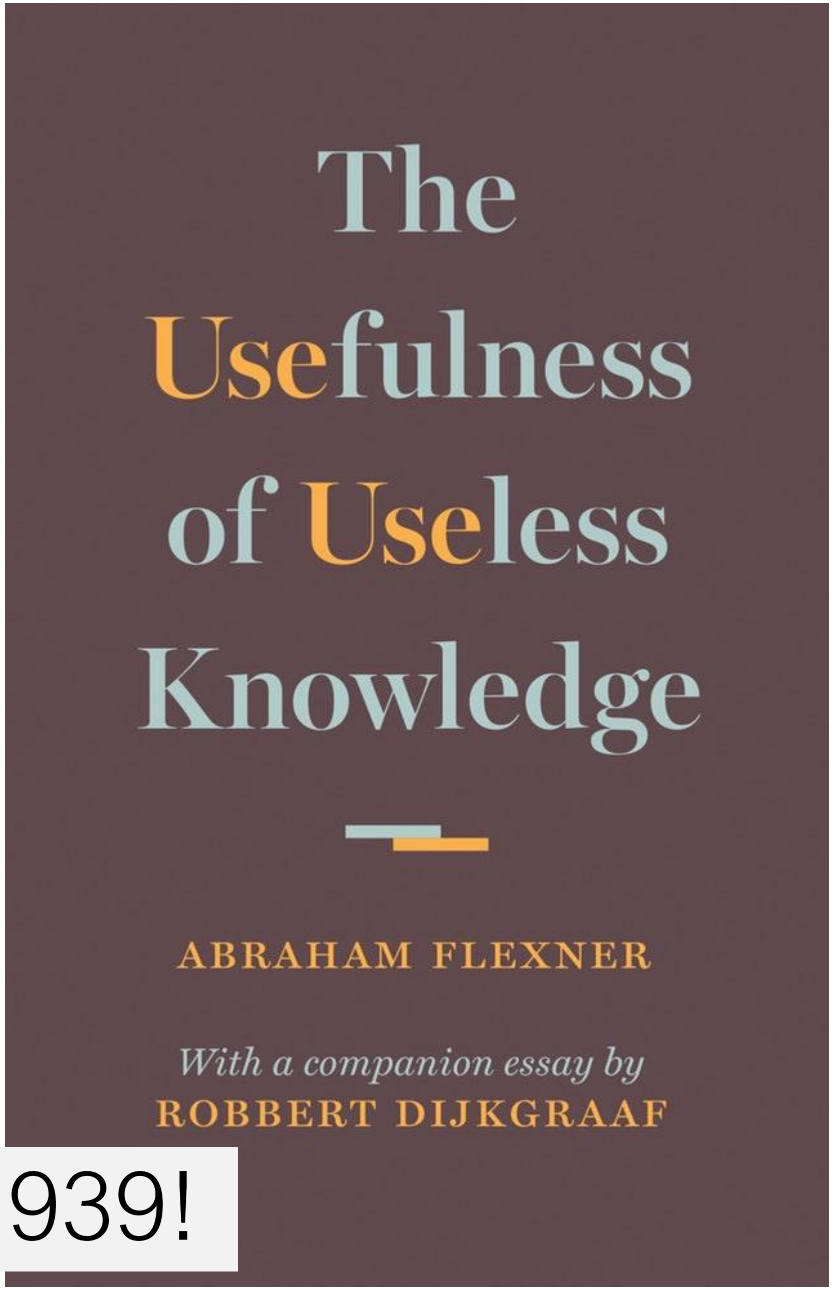
SMART HOSPITAL ROOM

- Hospital room for remote monitoring
  - Avoid medical staff infections
- Hospitalization more comfortable for patients
- Group or single patient monitoring



From HEP to society: a long and winding road…

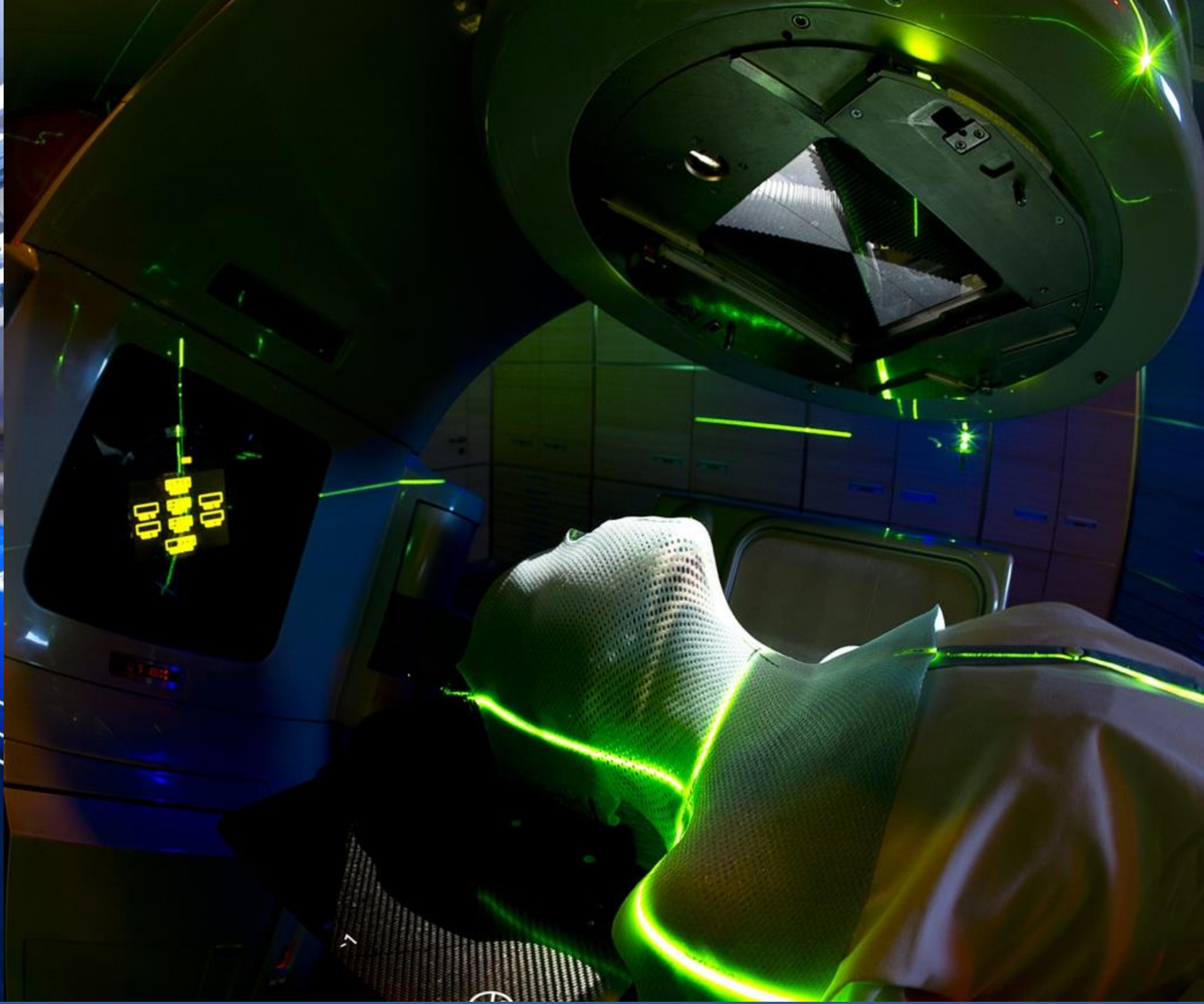




1939!

In the end, utility resulted, but it was never a criterion to which his (*Faraday's, ndr*) ceaseless experimentation could be subjected.

I am not for a moment suggesting that everything that goes on in laboratories will ultimately turn to some unexpected practical use or that an ultimate practical use is its actual justification.



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