Computational Challenges in Image Reconstruction for Proton Computed Tomography

CERN School of Computing on IT Services

Ferney-Voltaire, France

04-08 11 2024



biro.gabor@wigner.hun-ren.hu

Zsófia Jólesz Bence Dudás Gergely Gábor Barnaföldi Gábor Papp



Hadron therapy

- Cancer treatment: surgery, chemotherapy, <u>radiotherapy</u>, immunotherapy
- Key advantage of ions: Bragg peak
- Effective eradication of all tumor cells ↔ avoid injury to healthy tissue





Layout figure of HIT Centre (Heidelberg)

- Challenge(s): Stopping power of tissue in front of the tumor has to be known
- Current practice: Hounsfield units (X-ray attenuation in tissue) → energy loss of protons
 - The conversion is not accurate! (uncertainty: ~7%) 2

Proton Computed Tomography



- Bergen pCT Collaboration
- The detector system is based on the ALPIDE chip (ALICE ITS), using planes of Monolithic Active Pixel Sensors (MAPS)
- Digital tracking calorimeter with 41+2 sensor+absorber layer
- 1024 × 512 pixel (29µm²) per layer, resulting in ~5µm track position resolution
 - ~10² tracks per readout frame
- **The challenge**: processing ~10⁷ primaries per projection (2D) within **minutes**



Front. Phys. 8 (2020), 460



Proton Computed Tomography





• **The challenge**: processing ~10⁷ primaries per projection (2D) within **minutes**



4



5



Determination of the Most Likely Path (on a ~512³ grid) (nuclear interactions; inelastic collisions; multiple Coulomb scattering)







8

Summary

Hadron therapy is an effective cancer treatment mode

Proton computed tomography is aimed for precise dose planning

Bergen pCT Collaboration: detector design based on ALPIDE chips (ALICE)

Track reconstruction with deep neural networks

Iterative, GPU-accelerated image reconstruction

Preliminary results:

- 1% RSP accuracy
- 1.4 lp/cm
- ~10 minutes

arXiv:2212.00126 arXiv:2411.<...> Thank you for your attention!



