



# **RECENT RESULTS ON THE BETA DECAY OF 152TB AND ITS RELEVANCE IN THERANOSTICS**

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# Motivation

When performing simulation codes and therapy planners, it is essential to calculate the dose administered to the patient and its spatial distribution, both in diagnosis using **PET** or **SPECT** cameras and in treatment (brachytherapy and theranostics). The beta decay of radioisotopes of use or potential use in medicine must be well studied and the  $I_{\beta}(E)$  must be accurate and reliable.



Contribution to "Diamond Jubilee of RCA"

Alan L. Nichols\*

Status of the decay data for medical radionuclides: existing and potential diagnostic y emitters, diagnostic  $\beta^+$  emitters and therapeutic radioisotopes

https://doi.org/10.1515/ract-2022-0004 Received January 6, 2022; accepted April 10, 2022; published online May 18, 2022

adequate quantification of the required decay data (i.e., dose calculations include half-lives, energies and emission probabilities of  $\alpha$ ,  $\beta^+$ , various electron particles, y and X-rays, Nichols, A. L. Radiochimica Acta, 110(6-9), 609-644.(2022).



# **Isotope of interest**

 $^{152}Tb$  is a promising candidate to be used for PET imaging based on the emission of  $\beta^+$ -particles Thera/peutic + diag/nostic --->Theranostic pair



β+: 20.3% EC: 79.7%

Extremely extensive and complex decay scheme.

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## $^{161}Tb$ $^{152}Tb$



# What do we want to measure?

- It is important to determine accurately the beta intensity distribution  $I_{\beta}(E)$ .
- The total  $EC/\beta^+$  ratio. (Especially relevant for PET isotopes)
- The ratio between energy per decay in the form of  $\gamma$ -rays and the energy per decay in the form of  $\beta$  particles. (Relevant for all isotopes used in nuclear medicine)

Very often the only information available about the beta intensity has been measured with high resolution (HR) gamma detectors.

# Why don't we just measure it with Ge detectors (e.g. IDS)?



# **Pandemonium Effect**



IFIC 150



# The experimental technique **Total Absorption Spectroscopy (Ideal**

## case)

An ideal TAS is a detector with an ideal 100% efficiency (An Electromagnetic calorimeter), registers the total deposited energy in each individual event from any gamma or beta decay. Therefore, decay's information can be extracted from the total sum spectrum.



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Development of TAS analysis techniques: Taín et al., NIM A571 (2007)

Ν

# Lucrecia Detector



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• Nal(TI) Crystal Scintillator. • Diameter 38 cm x length 38 cm. • Hole is used for isotope implantation and the installation of ancillary detectors.

## **Ancillary Detectors**

• Plastic beta detector • HPGe telescope (Coaxial and planar)

B Rubio et al 2017 J. Phys. G: Nucl. Part. Phys. 44 084004

The same simples were brought to ILL(Grenoble) and mesaured at the FIPPS Ge Array







# **PRELIMINARY** ANALYSIS







## Sum Spectrum = Simulation + Background + Pile-up







**Preliminary Analysis** 





When everything in the gamma spectrum is well understood then is time for the unfolding algorithm (EM)

> Distribution of probability of the beta intensity





# RESULTS





# Results $^{152}Tb$

Section	Energy (keV)	ENSDF β Feeding (%)	TAS Solution β Feeding (%)	%) 600 %
1	0 - 399	37.7	22.24	8 30
2	400 - 799	7.20	6.68	
3	800 - 1199	13.87	14.17	20
4	1200 - 1599	4.69	4.01	20
5	1600 – 1999	12.93	11.16	
6	2000 - 2399	7.50	8.50	15
7	2400 - 2799	9.87	13.52	10
8	2800 - 3199	5.81	12.64	
9	3200 - 3599	0.00	6.56	5
10	3600 - 3990	0.49	0.52	l c

Finally, with the **new feeding** obtained by the unfolding algorithm, we can recalculate a new gamma spectrum and compare it with the **TAS** data.





# Results $^{152}Tb$





## Results $^{152}Tb$ **Simulation Dose**



•	10	concentric	spheres	of water	
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• Source 152Tb

**Simulation ENSDF Feeding Simulation new Feeding TAS solution** 

Layer	S value	S value	Difference (%)
1	$(Gy/Bq^{-1}S^{-1})$	$\frac{(GY/BQ^{-1}S^{-1})}{9.610}$	17.55
1	ð.1/C-12	2.010-12	17,55
2	1.03e-13	1.30e-13	-26,63
3	3.72e-14	4.73e-14	-27,22
4	1.87e-14	2.36e-14	-26,15
5	1.09e-14	1.39e-14	-26,91
6	7.07e-15	8.98e-15	-27,13
7	4.85e-15	6.14e-15	-26,69
8	3.41e-15	4.35e-15	-27,61
9	2.47e-15	3.18e-15	-28,78
10	1.79e-15	2.32e-15	-29,03

S Value (Gy/nEvents) 20 15 S Value (Gy/nEvents)









# Results $^{152}Tb$

# **Simulation Dose**

## **Simulation ENSDF Feeding Simulation new Feeding TAS solution**

mm	S value	S value	Difference (%)
	$(Gy/Bq^{-1}s^{-1})$	$(Gy/Bq^{-1}s^{-1})$	
1	1.90e-08	1.58e-08	16.85
2	5.11e-10	3.75e-10	26.73
3	1.11e-10	8.36e-11	24.88
4	4.12e-11	3.11e-11	24.48
5	1.82e-11	1.39e-11	23.63
6	8.90e-12	6.92e-12	22.34
7	4.61e-12	3.75e-12	18.58
8	2.52e-12	2.20e-12	12.71
9	1.44e-12	1.40e-12	3.20
10	8.95e-13	9.51e-13	-6.25
11	6.12e-13	7.05e-13	-15.27
12	4.57e-13	5.62e-13	-22.99
13	3.68e-13	4.65e-13	-26.43
14	3.10e-13	3.94e-13	-27.19
15	2.66e-13	3.39e-13	-27.51

- Water sphere • Radio 15 mm
- Source 152Tb





- Number of positrons per decay: ENDSF = 0.20
- TAS = 0.14

# Summary

Medium mass and heavy nuclei: one never knows whether there is Pandemonium...We need to measure them!! Especially cases with particular sensitivity for structure/astro, reactor or medicine.

In order to calculate the correct dosage, it is fundamental to know the deficiencies in the nuclear data, more specifically the distribution of probability of the beta intensity

We observed the presence of the pandemonium effect in 152Tb. In the simulation made with the data reported by the ENSDF there are discrepancies in the intensity in energies between 2 MeV and the Q value.

The deconvolution algorithm corrected these deficiencies, adjusting feeding at low energy levels and close to the Q\_value, getting a better fit with the experimental data. These corrections show significant changes in the dose simulation, underscoring the importance of adjusting nuclear data for applications such as dosimetry.







## TO THE AUDIENCE AND TO THE **ISOLDE CREW WHO HAVE ORGANIZED THIS EVENT**

Proposal to the ISOLDE and Neutron Time-of-Flight Committee

## Off-line TAS measurements of the long-lived nuclei <sup>152,155</sup>Tb and <sup>76,77</sup>Br for their relevance in medicine and neutrino physics

Sep - 27, 2022

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# **Extra Slides**





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## **Total Absorption Spectroscopy (Ideal** case)









## **Total Absorption Spectroscopy (Ideal** case)



So, with a total absorption spectrometer we do not see the individual gamma rays emitted in the decay, we see the sum of the energy of the gamma cascades that follows the beta decay.







Larger fraction of level meissed by the HPGe detectors. Considerably large pandemonium. Parallel measurement with FIPPS at ILL (Grenoble) <sup>15</sup>Tb is a good isotope for PET imaging, theranostic pair of <sup>14</sup><sub>9</sub>Tb, <sup>16</sup><sub>1</sub>Tb used for therapy, e.g. labeled PSMA-617 (prostate) or DOTATOC (neuroendocrine)



150 92



$$d_i = \sum_{j=0}^{j_{max}} R_{ij}(B) f_j + C_i$$

**di** is the content of bin **i** in the measured TAGS spectrum **Rij** is the response matrix of the TAGS setup and represents the probability that a decay that feeds level *j* in the level scheme of the daughter nucleus gives a count in bin *i* of the TAGS spectrum and **f** is the  $\beta$  feeding to the level **j** 

## **Expectation Maximisation Algorithm (EM)**

$$f_j^{(s+1)} = \frac{1}{\sum_{i=1}^n R_{ij}} \sum_{i=1}^n \frac{R_{ij} f_j^{(s)} d_i}{\sum_{k=1}^m R_{ik} f_k^{(s)}}, \quad j =$$

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1, ..., *m* 















137

root [5	5] Checks	Solutio	n()			
Energy	level:	0	feeding:	0.00	54119	8
Energy	level:	1360	feeding	: 3	.5473	3e-05
Energy	level:	4120	feeding	: 9	9.899	1
Energy	level:	4200	feeding	: 0	.00349	9092
Energy	level:	5200	feeding	: 0	.0687	819
Energy	level:	5240	feeding	: 0	.00888	8182
Energy	level:	5280	feeding	: 0	.0026	2065
Епегду	level:	5320	feeding	: 0	.00124	4902
Епегду	level:	5360	feeding	: 0	.00124	4219
Energy	level:	5400	feeding	: 0	.00234	4428
Energy	level:	5440	feeding	: 0	.0068	6428

RF 010 5460

## - RF\_001 \* 0.00541198

RF\_035 \* 3.54733e-05

· RF\_104 \* 99.89.91

RF\_106 \* 0.00349092

RF\_131 \* 0.068789

6000







## Results $^{152}Tb$ **Simulation Dose**

- Water sphere
- Radio 150 mm
- Source 152Tb





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Beta+: 14,14 %





- **D** : absorbed dose to target in Gy (J/kg)



# **Isotopes of interest**

Potentially useful non-standard  $\beta^+$  emitters.



Complex and well defined decay scheme. 4γ rays unplaced



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76 <b>Dy</b> 2.38 h 600 keV		
	1 <b>52<i>T b</i></b> 17.5 h 3990 keV	
		152 <b>Gd</b> STABLE

Extremely extensive and complex decay scheme. 248y rays unplaced



# **Theracnostics pairs**

# thera/peutic + diag/nostic --->theranostic pair



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## SPECT + microdosimetry

## Radiotherapy + microdosimetry



# The isotopes of interest

152Tb is used in medicine within radiolabelled molecules for PET and SPECT imaging or as theranostic pairs for treatment.

These isotope, among others, have been identified by Nichols [NIC22] as needing for a TAGS measurement

<sup>152</sup> Tb use with <sup>161</sup> Tb as theranostic pair	17.5(1) h	< (7.0 × 10 <sup>-7</sup> )% α 100% EC/β <sup>+</sup> : 20.3(15)% β <sup>+</sup> 79.7(15)% EC	95 to 100EC/β <sup>+</sup> , 387γ + 248γ unplaced <i>E</i> <sup>end point</sup> : 2037, 2353, 2624, 2968 keV E <sub>γ</sub> : 271.09, 344.279, 586.27 keV	Mos grou seco (2.3) sign and inter 3140 deco rays doul plac date
		E Worksh	an and lleare m	oot

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st significant EC/ $\beta^+$  decay directly to the and  $(25\% (8.0\% \beta^+))$ , first  $(12.7\% (5.9\% \beta^+))$ , ond (6.85% (1.20%  $\beta^+$ )) and fourth (8.06%) 0%  $\beta^+$ )) excited states of <sup>152</sup>Gd, along with ificant depopulation by 271.09, 344.279-586.27-keV y rays and over 380 lowernsity y emissions from 117.25 to 0.20 keV – *extremely extensive and complex* ay scheme that includes as many as  $387 \gamma$ of which the placement of only seven are in bt, while a further 248 y rays remain uned (113.5 to 3621.7 keV); suitable candifor TAGS

# **High resolution (HR) technique.**



The efficiency drops as we look to higher energies, which means that it has a bias to  $\gamma$ -rays at high energy.

> Hardy et al., Physics letters B 71. (1977) Pandemonium

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## The spectrum can suffer from the Pandemonium effect.



