



Accelerator Science and Particle Therapy

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partrec

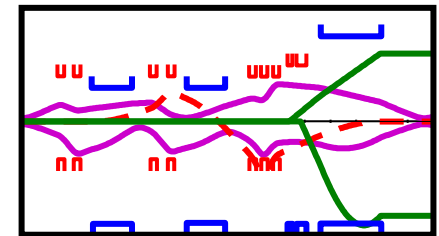
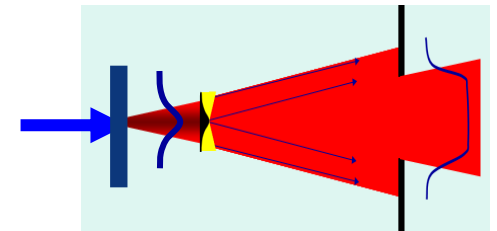
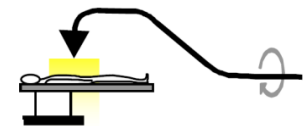
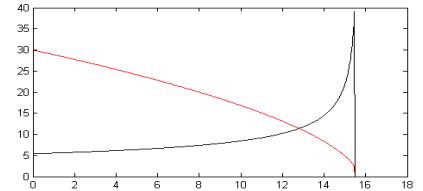


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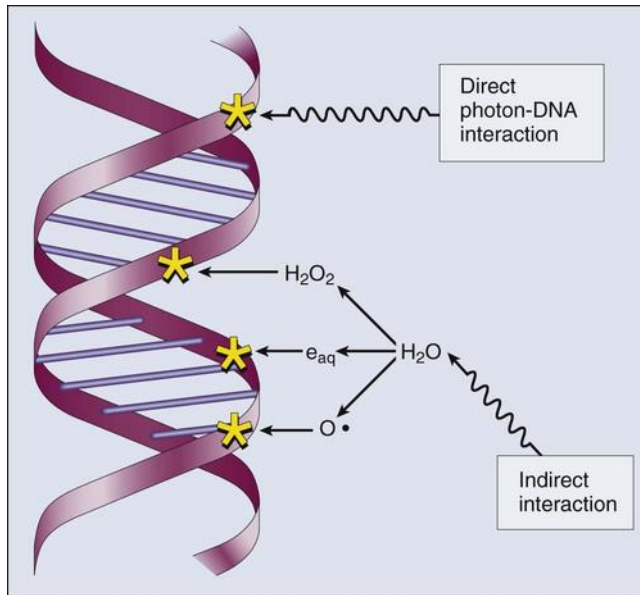
Content

- Introduction: Hadron therapy
- Accelerators and gantries
- Dose delivery techniques
- Beam optics properties



Introduction: Hadron therapy

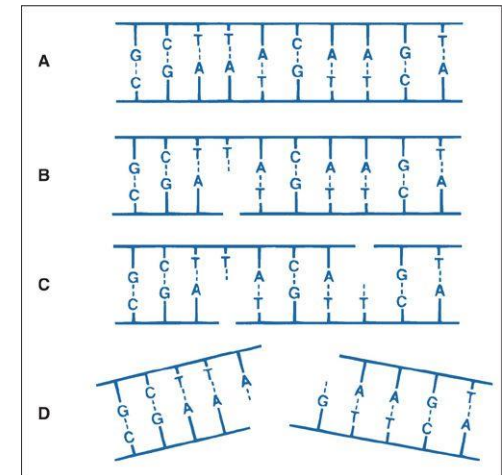
Dose and mechanism of action



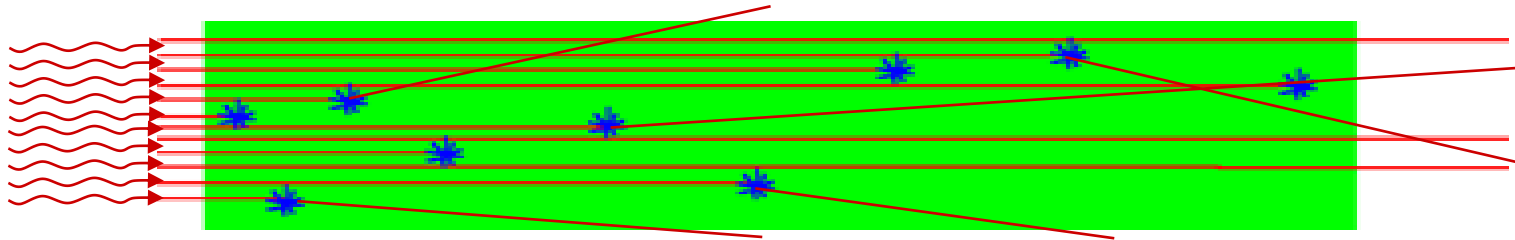
- Direct and indirect interaction
- Single DNA strand breaks are usually reparable
- Double DNA strand breaks are usually irreparable

Dose is measured in gray

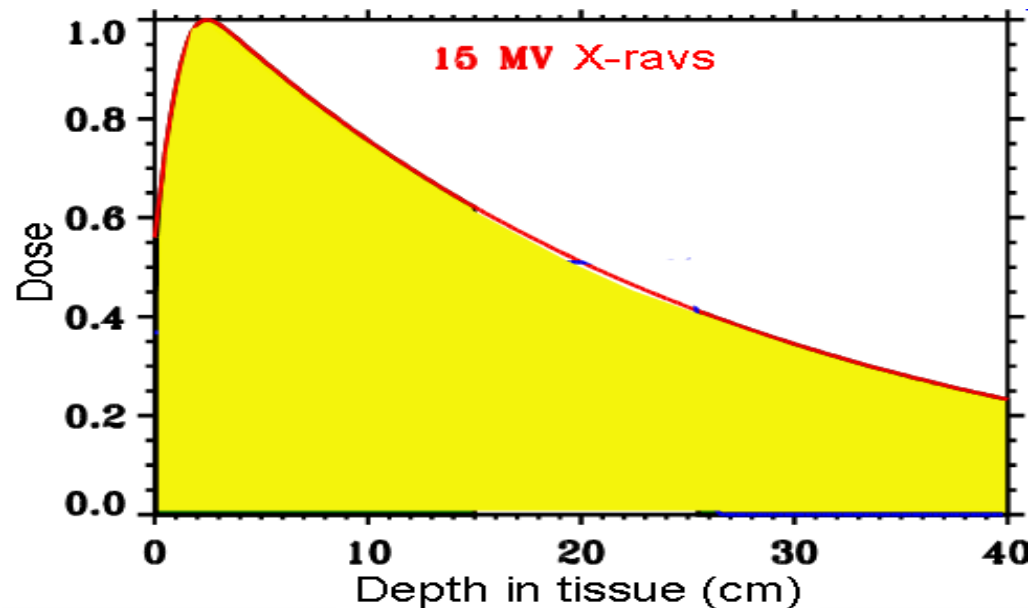
$$1 \text{ Gy} = 1 \frac{\text{J}}{\text{kg}} = 1 \frac{\text{m}^2}{\text{s}^2}$$



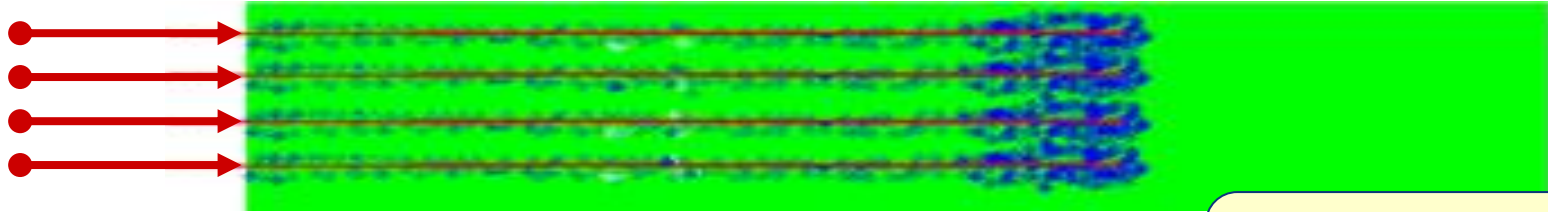
Photon (X-ray) dose



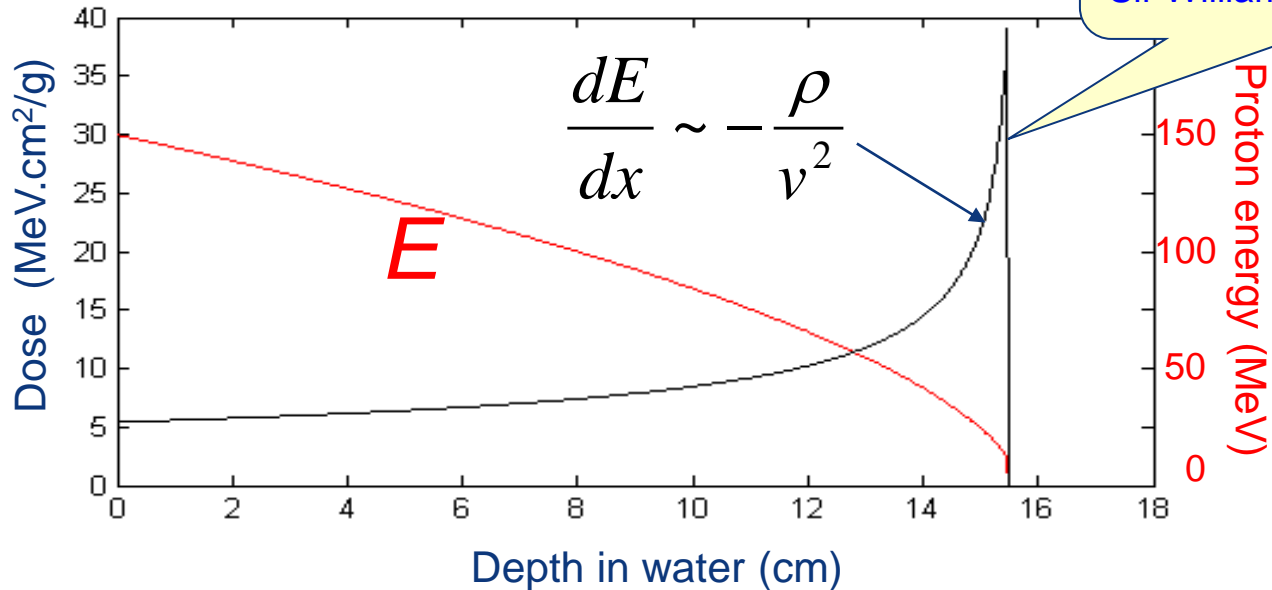
X-rays **scatter** and are **absorbed** → energy deposition in “dots”



Proton depth-dose curve



Protons **slow down**

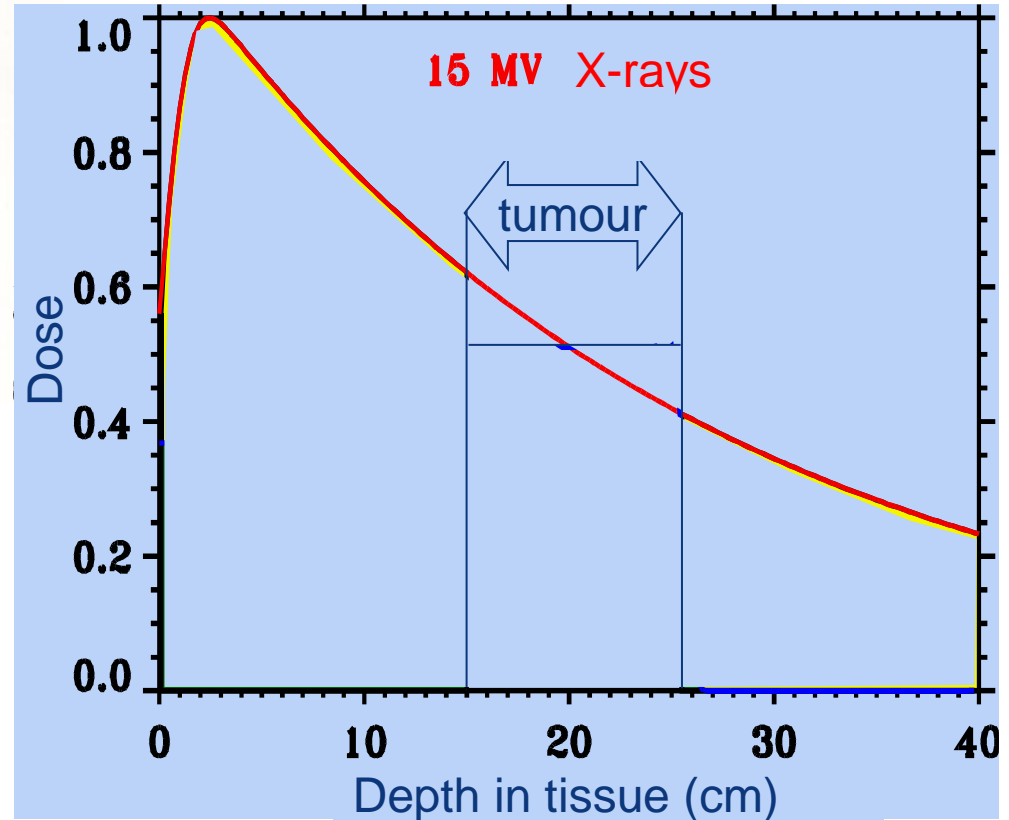
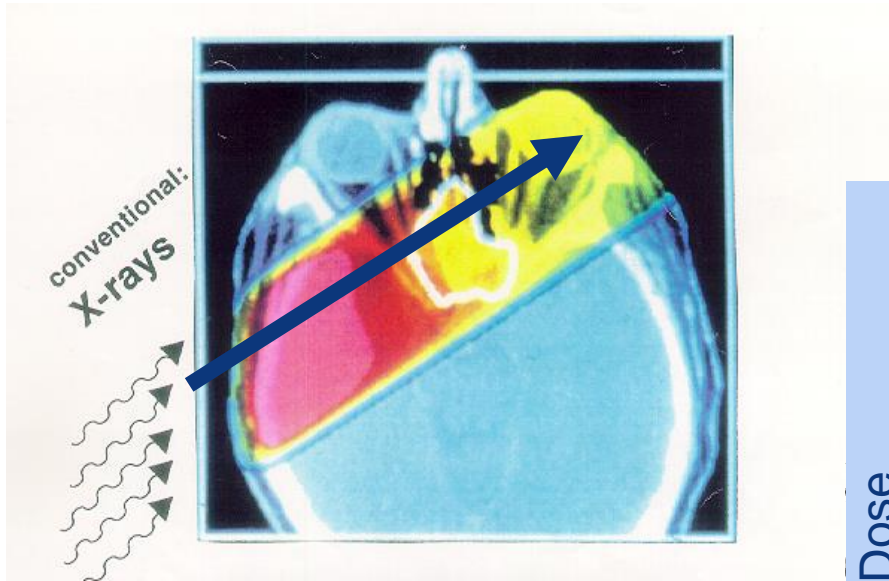


“Bragg peak”
(named after
Sir William Henry Bragg)

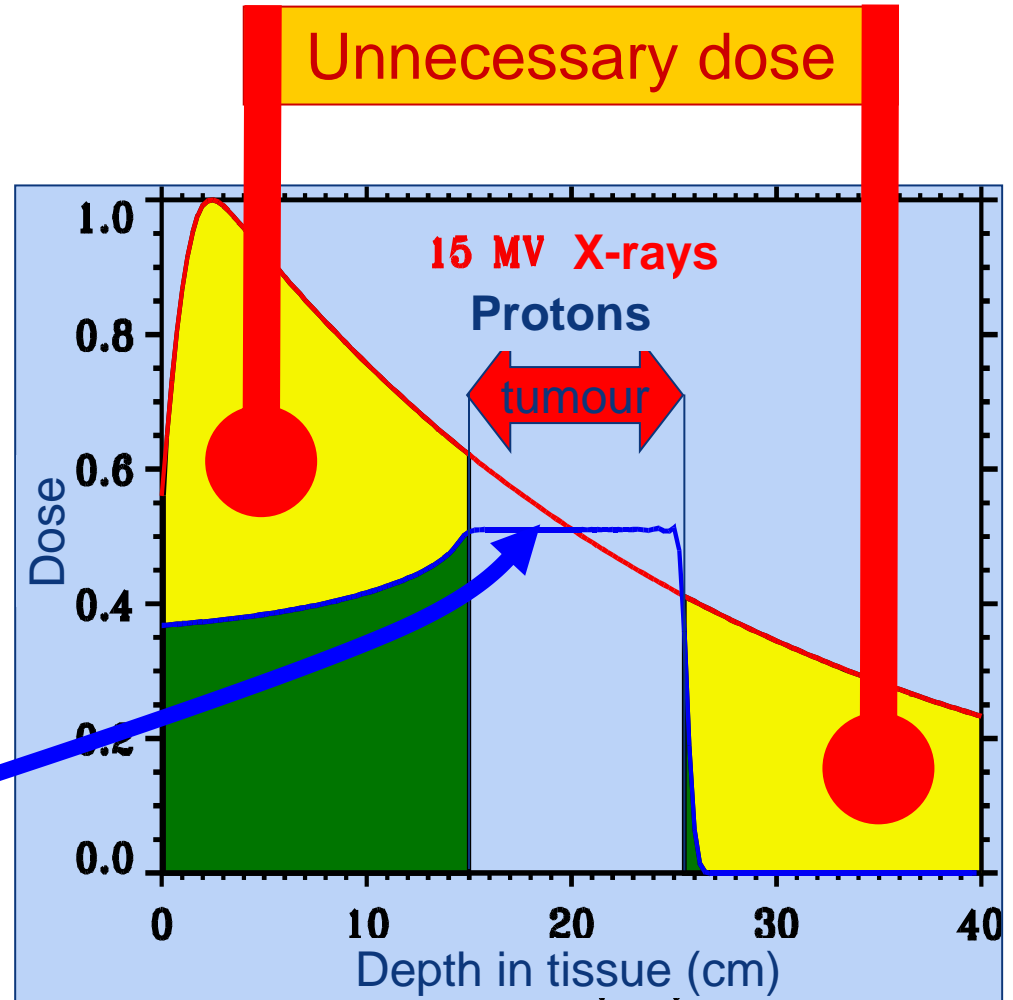
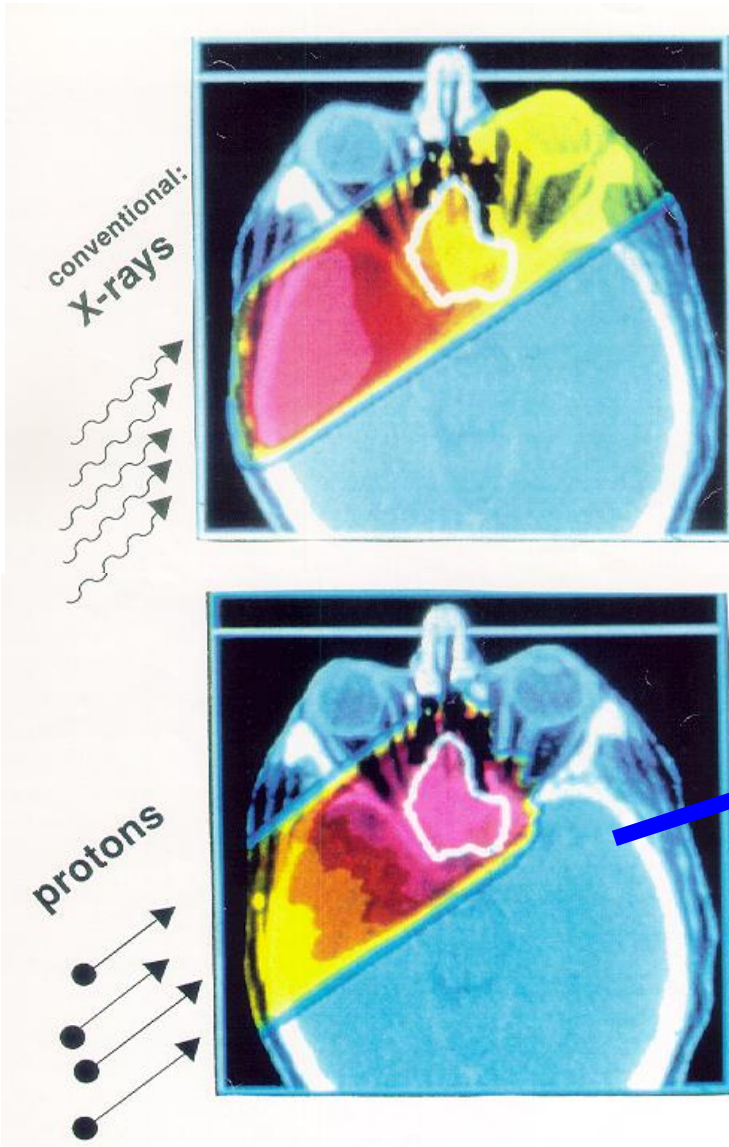
→ Energy → Penetration depth **Range in water (cm) $\approx E^{1.77}$ (in MeV) / 450**

Range scales with 1/density: $1/\rho$

X-rays vs. Protons

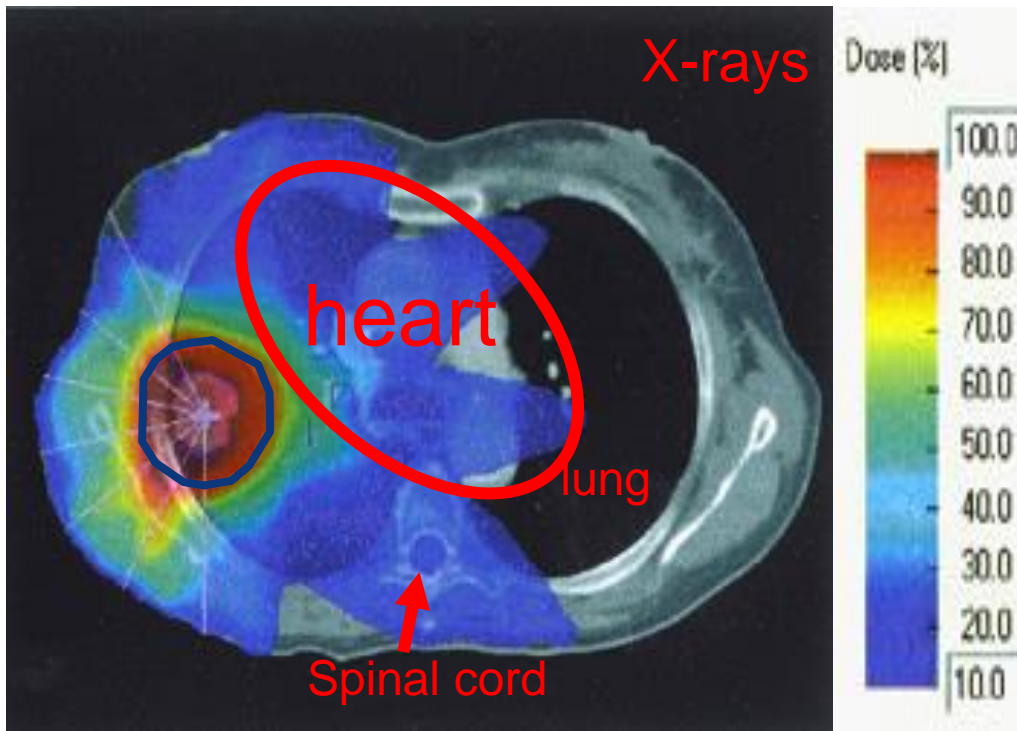


X-rays vs. Protons

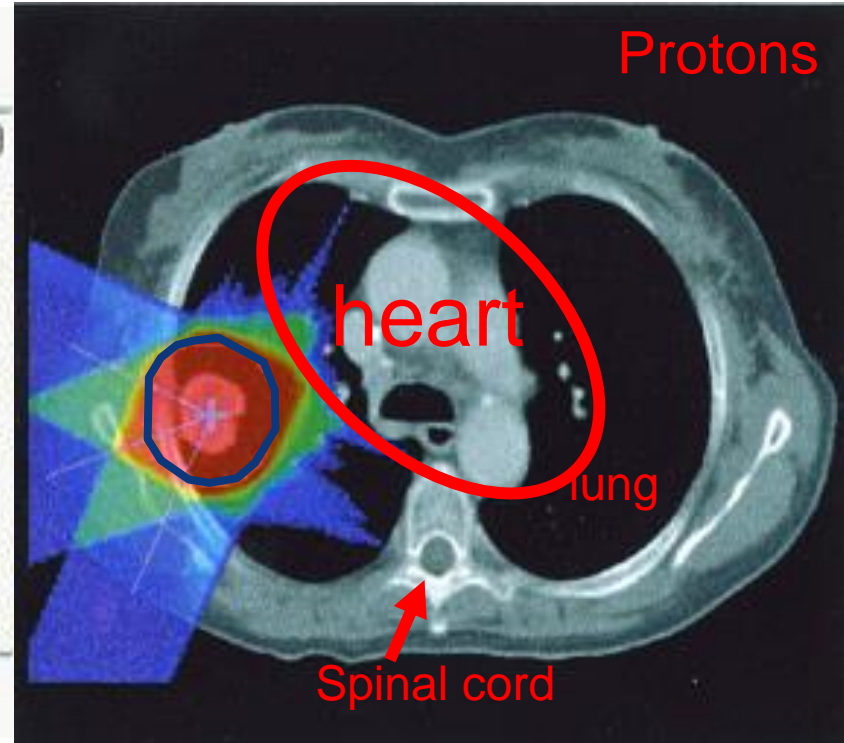


X-rays vs. Protons

X-ray beams (IMRT)
from 7 directions

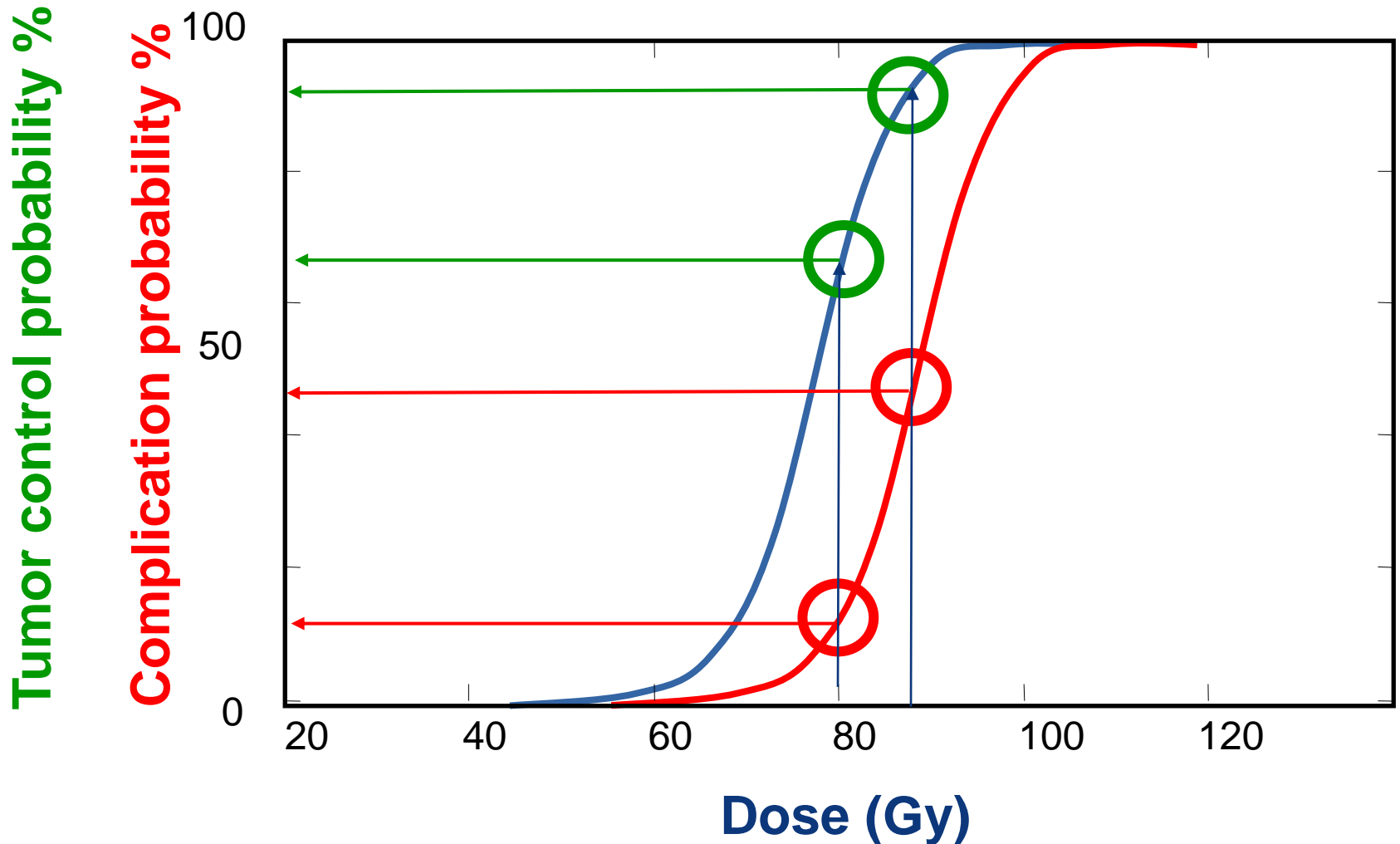


Proton beams
from 3 directions

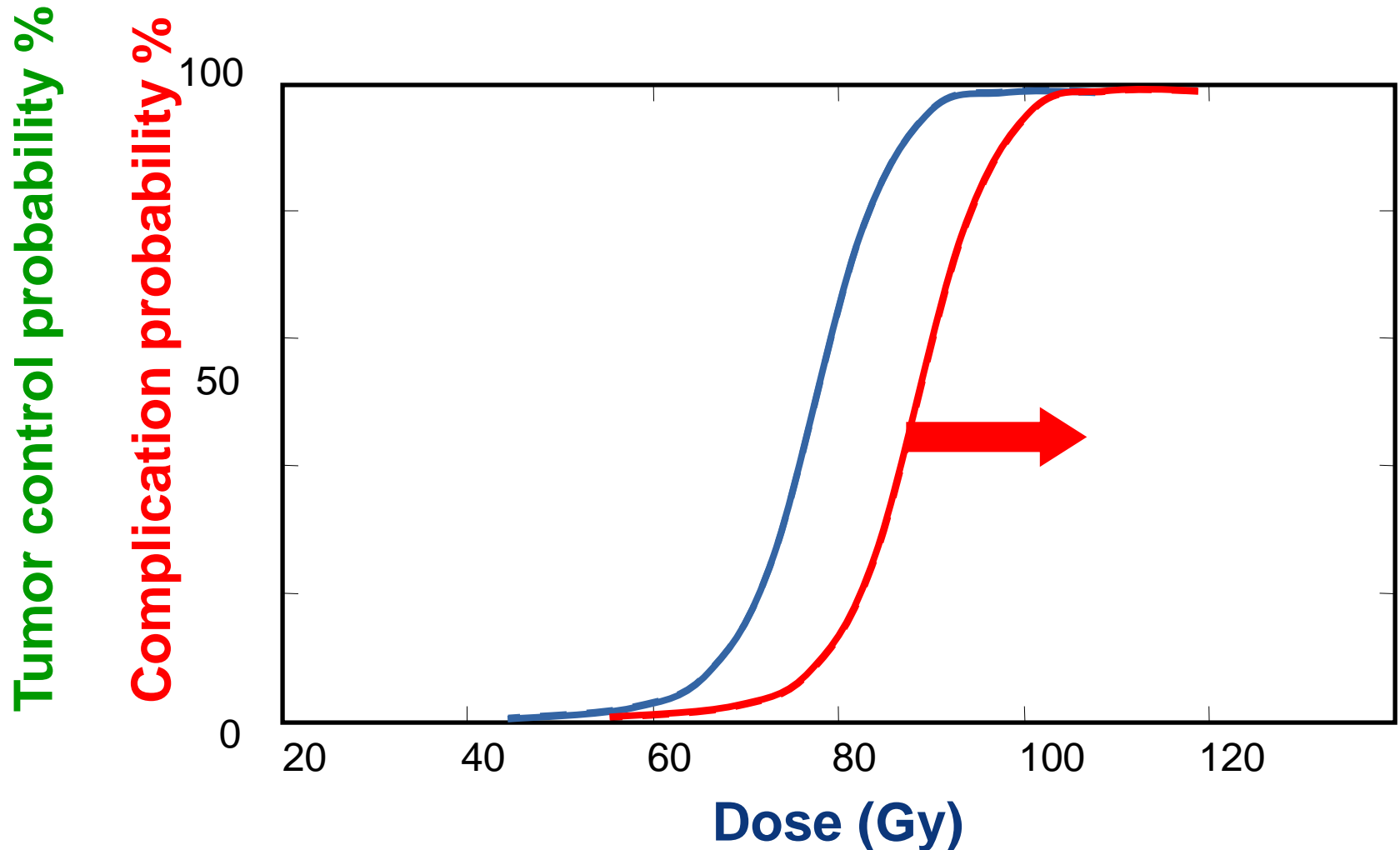


pictures: MedAustron

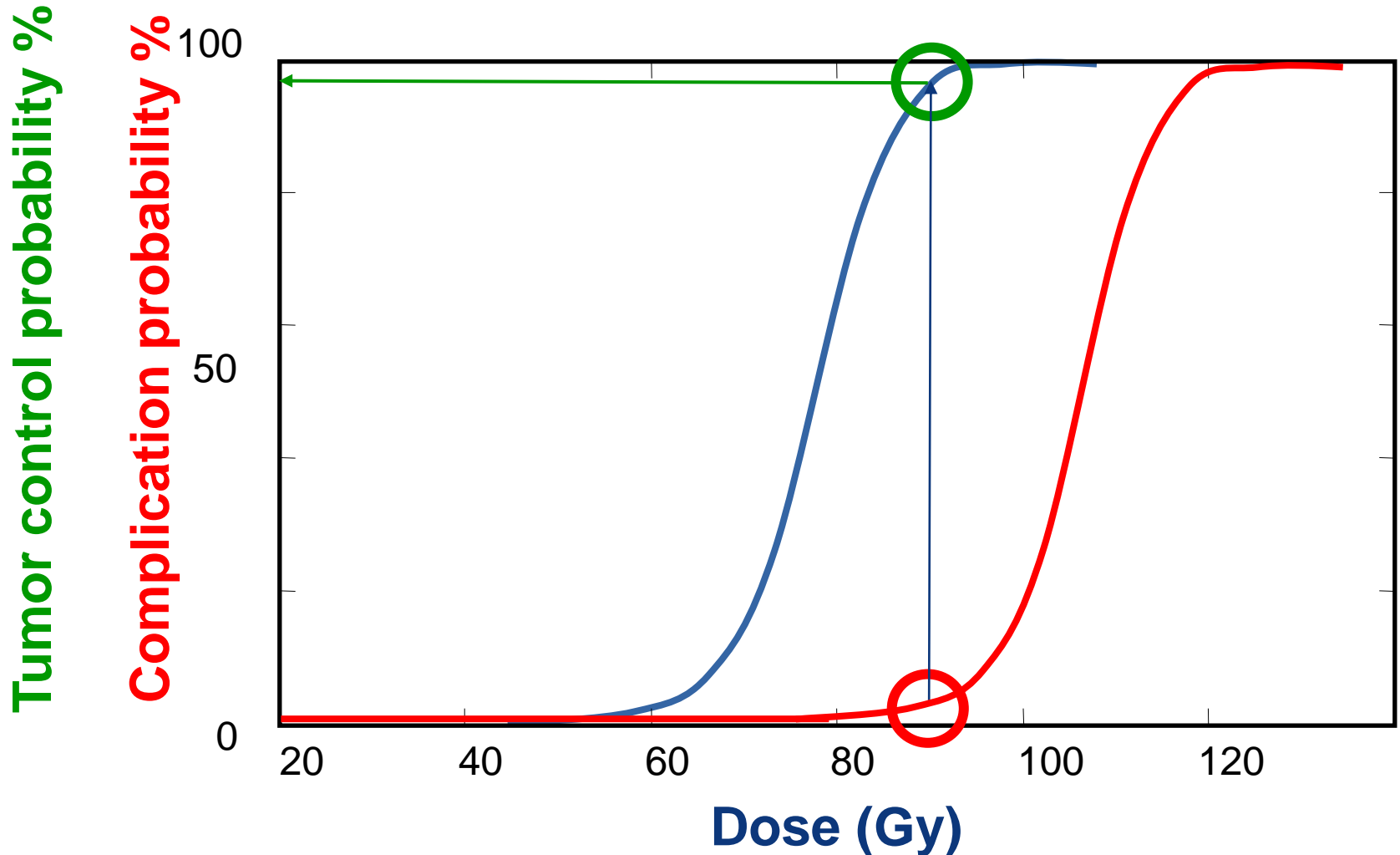
Therapeutic Window



Protons irradiate less normal tissue



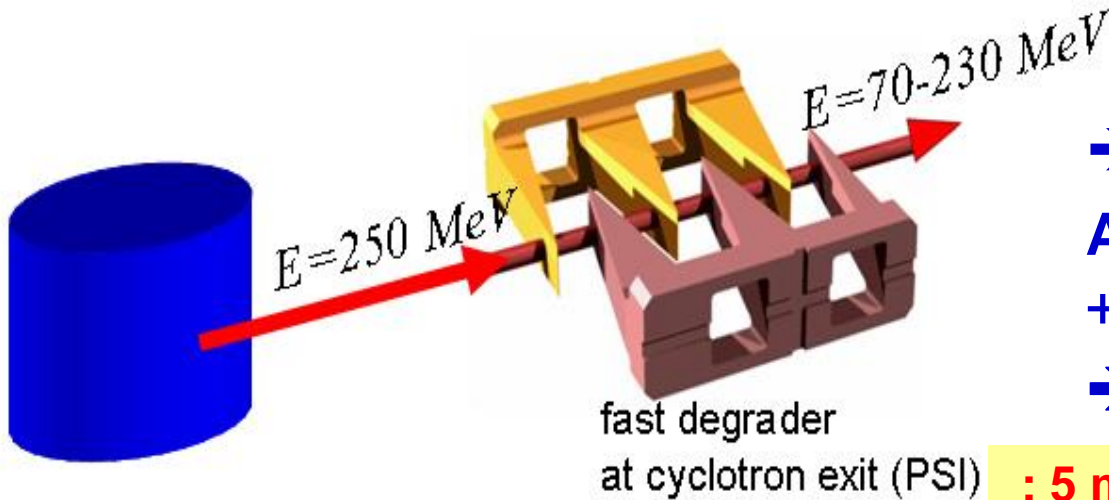
Therapeutic Window



Accelerators and gantries

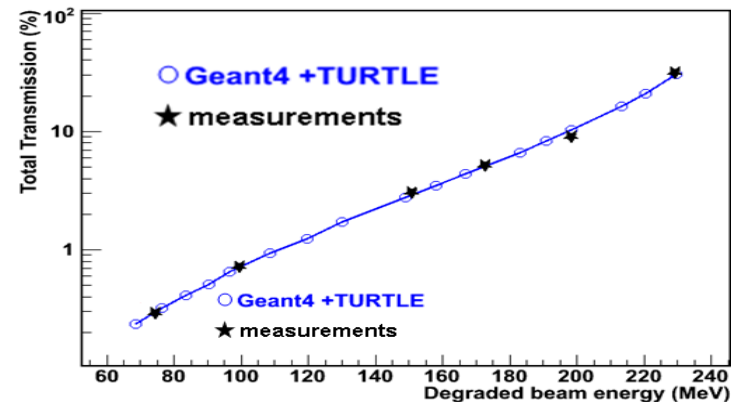
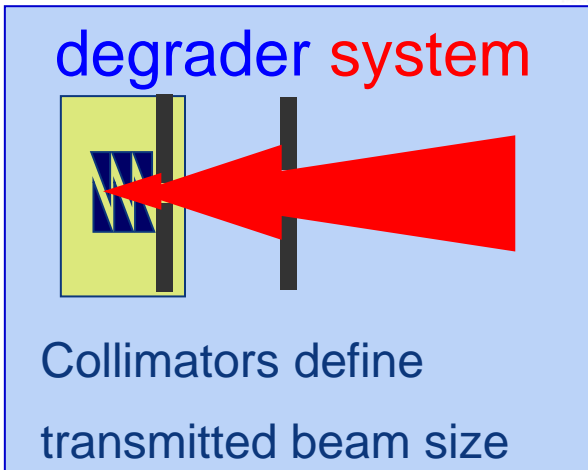
Cyclotron driven facilities

Cyclotron has fixed energy => slow down (degrade) to desired energy



- Sets range
- And, if fast enough
+ fast magnets:
- also energy modulation

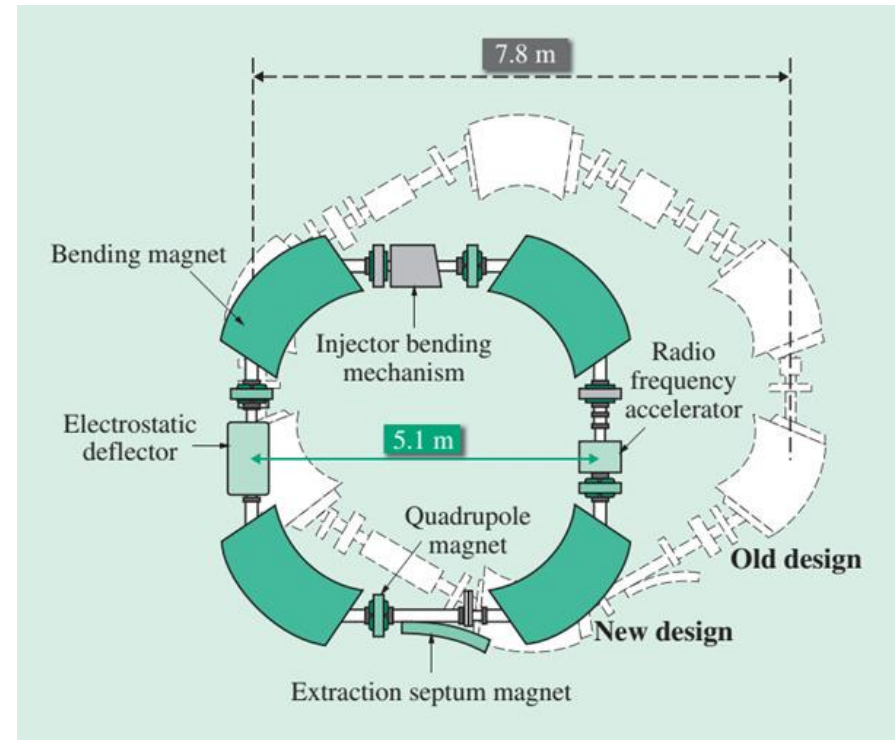
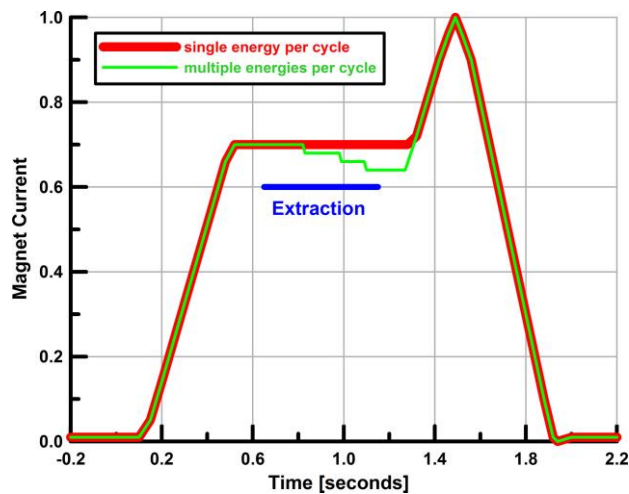
: 5 mm Δ Range in 50 ms



Van Goethem et al.,
Phys. Med. Biol. 54
(2009)5831

Synchrotrons

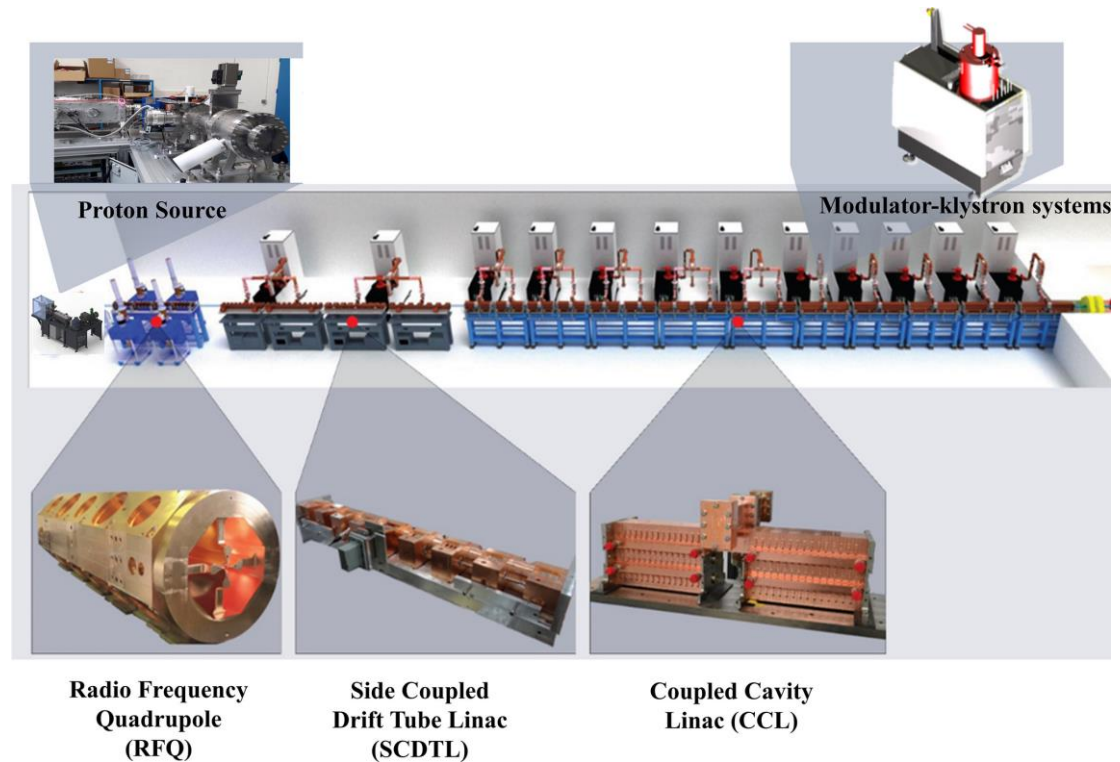
- Asymmetric emittance
 - Cause: Extraction in one plane
- Single turn vs multi-turn extraction



Sources: Hitachi, Loma Linda University Medical Center

Linacs

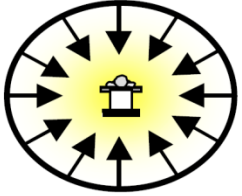
- Fast energy switching (milliseconds)
- Very low beam emittance (~ 1 mm mrad)
- Lower average current than cyclotrons



Source: AVO/ADAM SA

Gantry types and topologies

Patient Isocentric



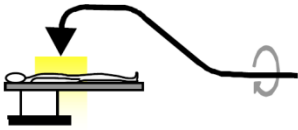
- ❑ Patient is positioned centrally (isocentre) and is not moved, providing direct and uncomplicated access at any time
- ❑ Beam delivery system rotates around the patient

Patient Eccentric

- ❑ Patient is moved on a circular path around the central axis of the gantry
- ❑ Separate access systems necessary

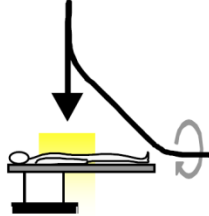
Conventional Gantry

- ❑ Very long structure (>12 m)
- ❑ Between 180° and 270° bending of which 135° - 180° are mounted eccentrically



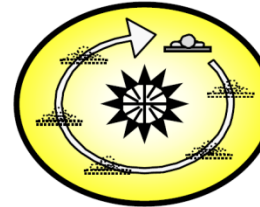
Corkscrew-Gantry

- ❑ Comparatively short
- ❑ 360° bending, of which the last 270° are mounted eccentrically



“Riesenrad-Gantry”

- ❑ Patient eccentric, ion beam central
- ❑ Only one 90° bending magnet, which is mounted on the axis



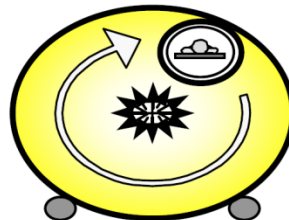
Patient & beam eccentric

- ❑ Patient and magnets rotate around the central axis
- ❑ Smallest possible diameter of gantry



Wheel-Gantry

- ❑ Outside bearings
- ❑ Extreme stiff and light wheel-structure possible
- ❑ Patient enclosure is not structural, allowing for a full 360° rotation

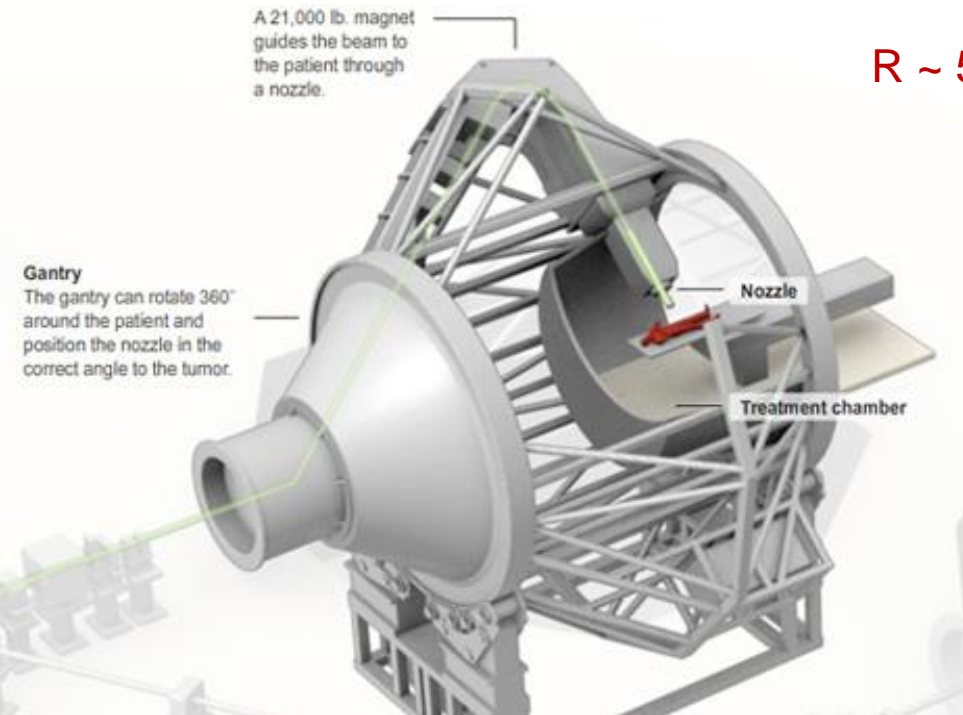


Cabin-Gantry

- ❑ Supported on a central axis
- ❑ Patient enclosure is structural (“cabin”), allowing only for ~180° rotation
- ❑ Compact size possible (only half a wheel)



Conical gantry - Commercial standard layout



R ~ 5m

Beam scanning downstream of the last bend

Munich

IBA
Sumitomo
Hitachi
Mitsubishi
Varian



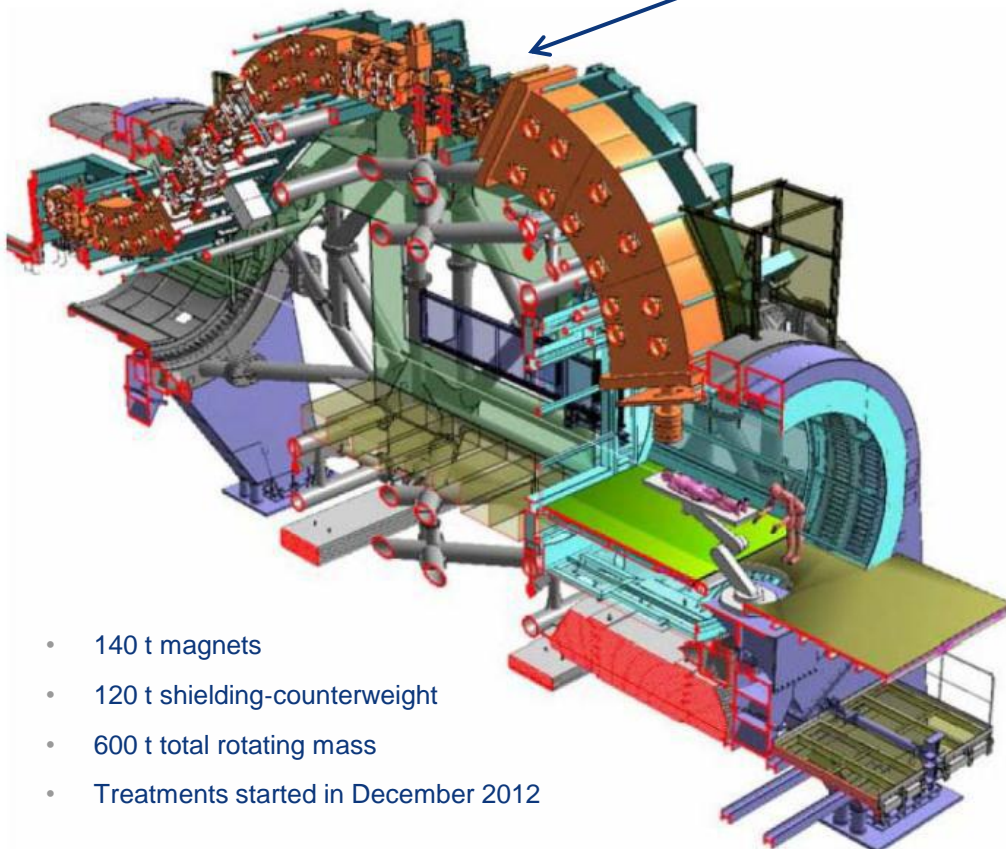
- 135° bending magnet
 - Shorter length - but larger radius
 - Cylindrical treatment cell
- Initially only for passive scattering
- Lately also for scanning

First commercial scanning-gantry of Varian in Munich

First gantry for heavy ion therapy at HIT

- Heidelberger Ionenstrahl-Therapiezentrum HIT
 - 360° gantry
 - Length L=25 m, Diameter \varnothing =13 m
 - Parallel scanning, 200 mm x 200 mm

Scanner magnets



- 140 t magnets
- 120 t shielding-counterweight
- 600 t total rotating mass
- Treatments started in December 2012



Small cyclotron on a gantry

H. Blosser, NSCL (~1990):
cyclotron for **neutron therapy**;
30 MeV protons, mounted on a gantry
Used in Harper Hospital, Detroit

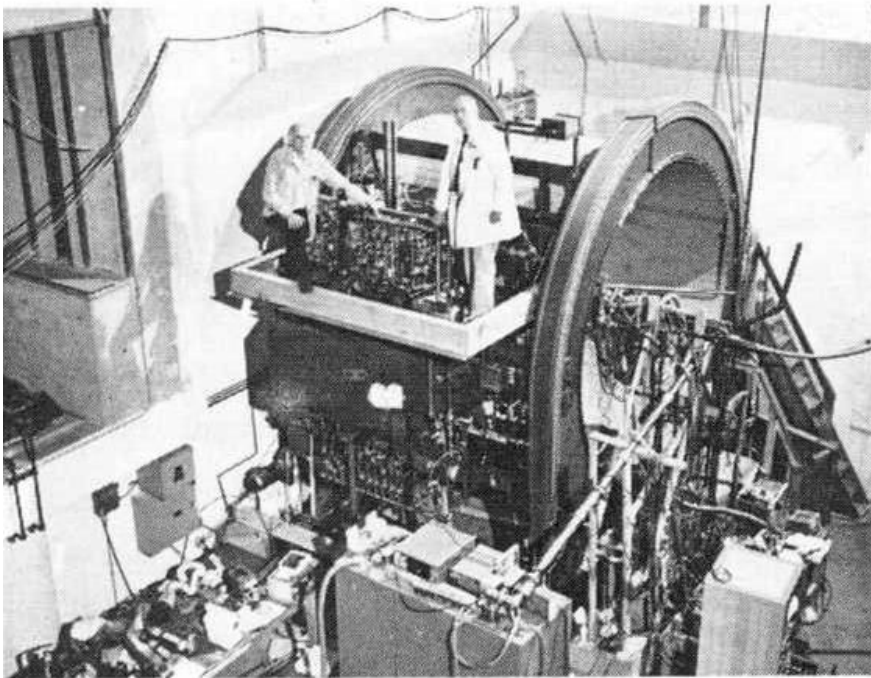
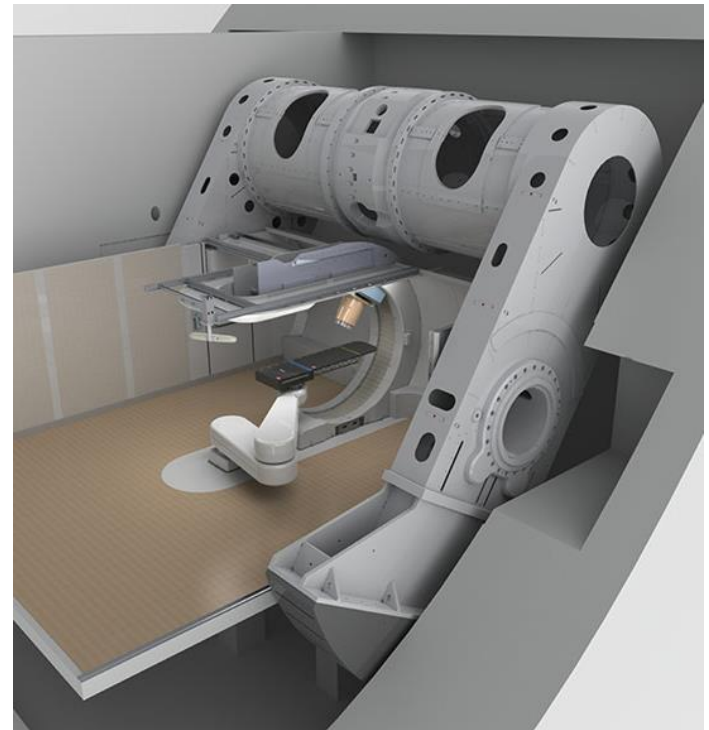


Fig. 2 Photo of the superconducting medical cyclotron on its gantry. Dr. William Powers and



For proton therapy
70-230 MeV
Treating patients since 2013

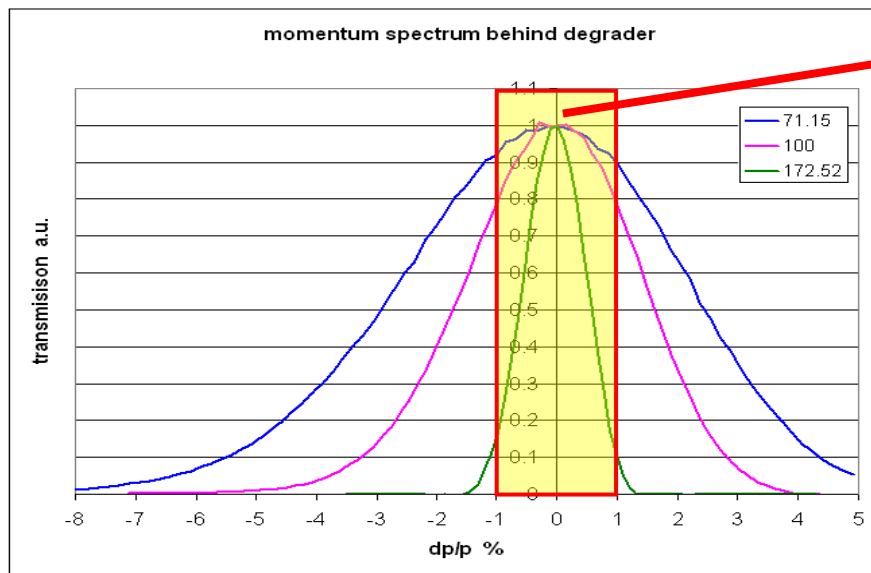
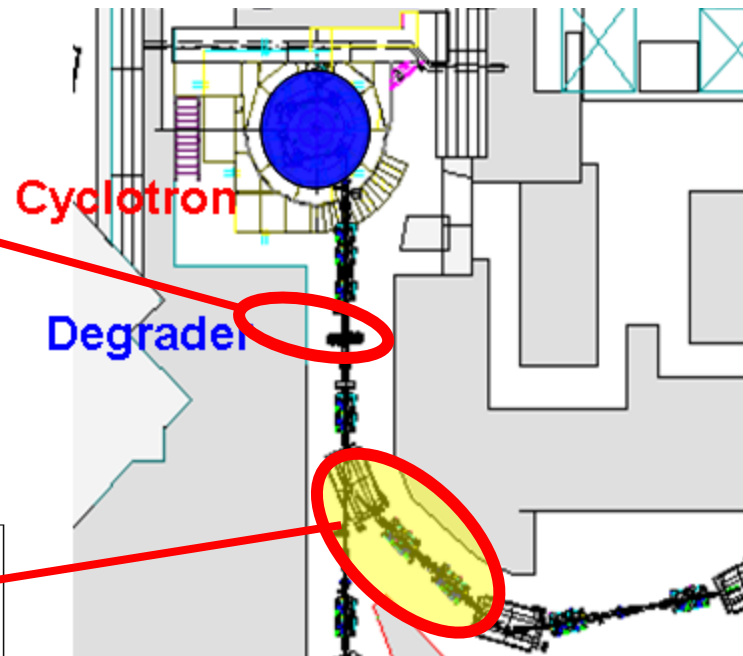


Dose delivery techniques

Energy selection system



multi-wedge degrader
235-67 MeV



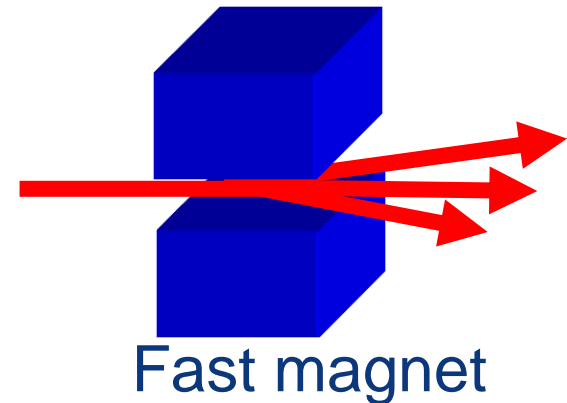
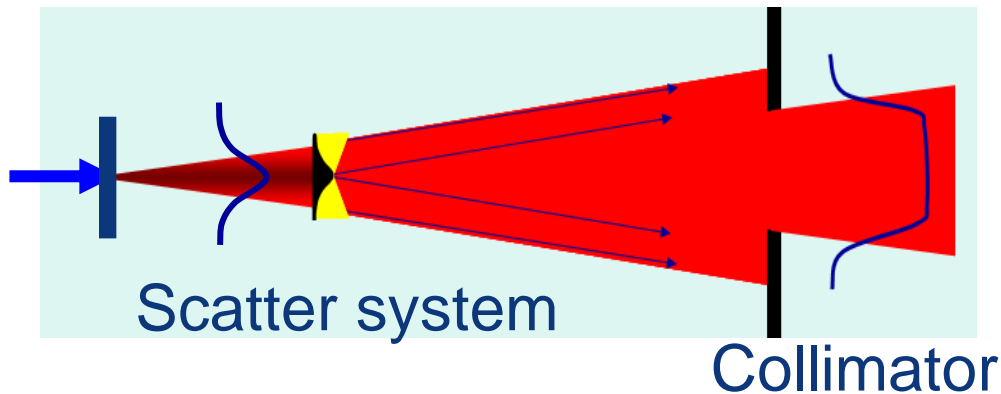
Beam analysis:
energy selection
 $dp/p < \pm 1\%$

Dose delivery techniques: Width

transversal spread:

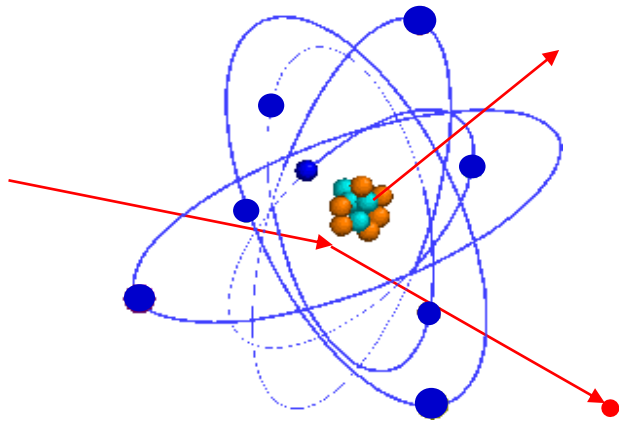
scattering

scanning

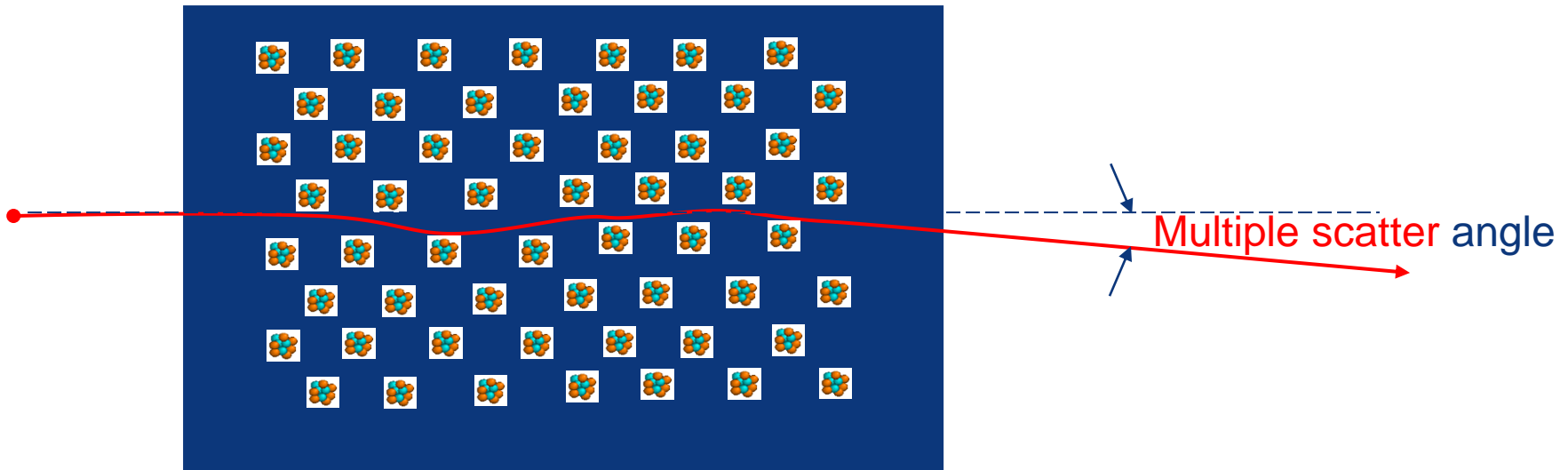


Scattering

Nuclear Coulomb scattering

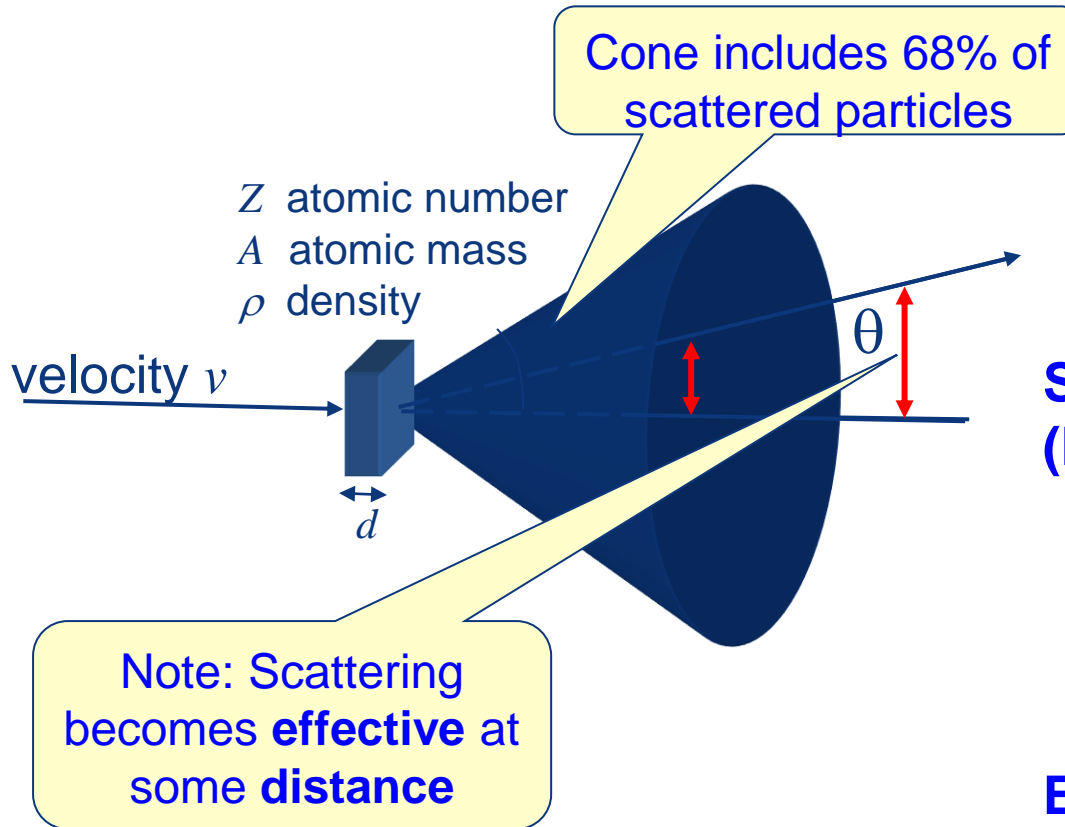


- Nucleus is several times heavier as a proton
- Almost no energy loss („elastic“)
- Much larger deflection than from electrons



Scattering

Multiple Scattering



$$\theta \sim \frac{\sqrt{d}}{v^2} \left(\frac{Z}{\sqrt{A}} \right)$$

Scattering: from nuclei.
(Moliere formula)

$$\Delta E \sim d \frac{\rho}{v^2} \left(\frac{Z}{A} \right)$$

Energy loss: slow down by electrons.
(Bethe-Bloch formula)

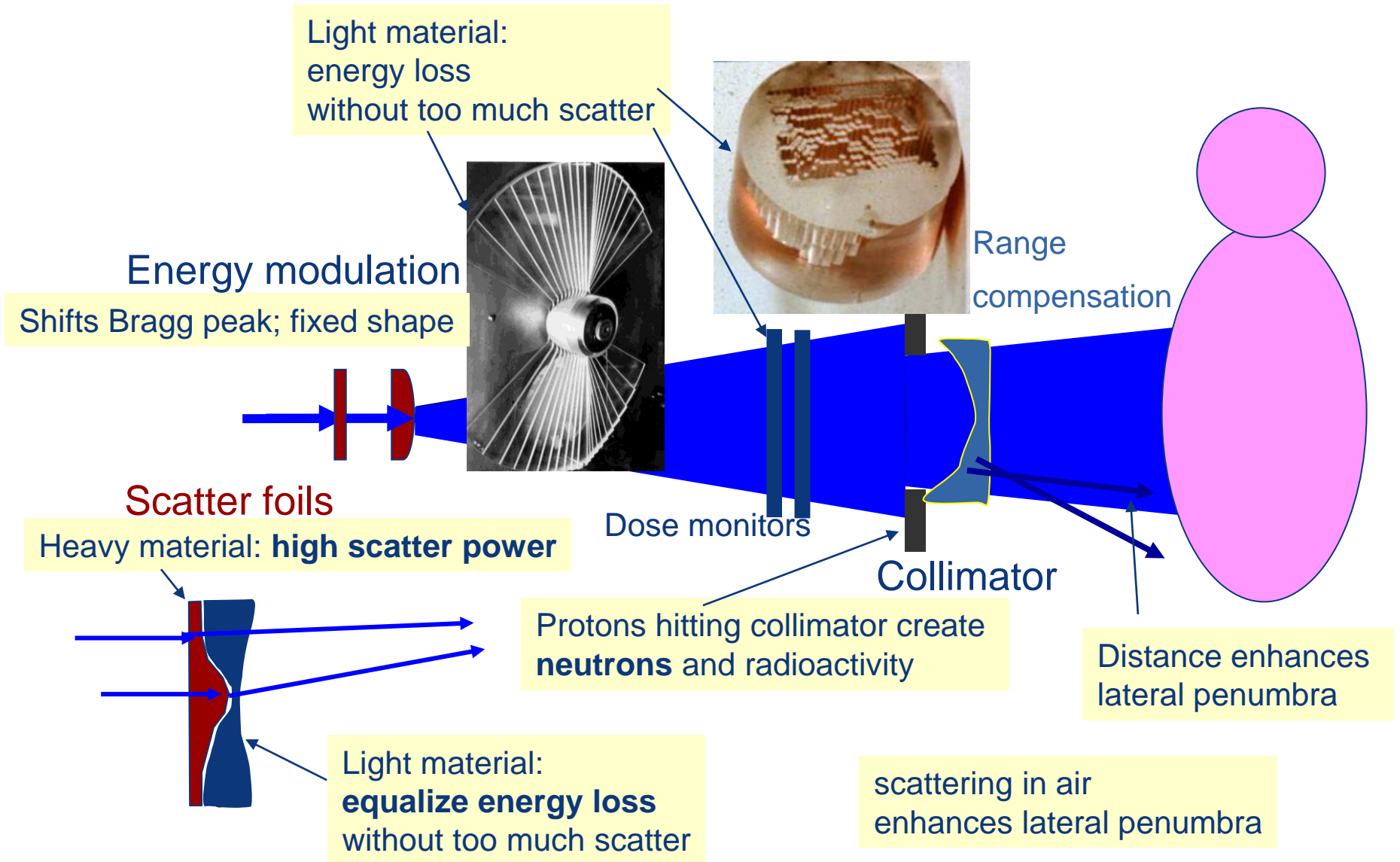
Scattering

	Energy loss	Scattering
(Z ; A)	$\frac{dE}{dx} \sim \frac{Z}{A}$	$\theta \sim \frac{Z}{\sqrt{A}}$
Water (8 ; 16)	0.5	2
Tungsten (74 ; 184):	0.4	5.4

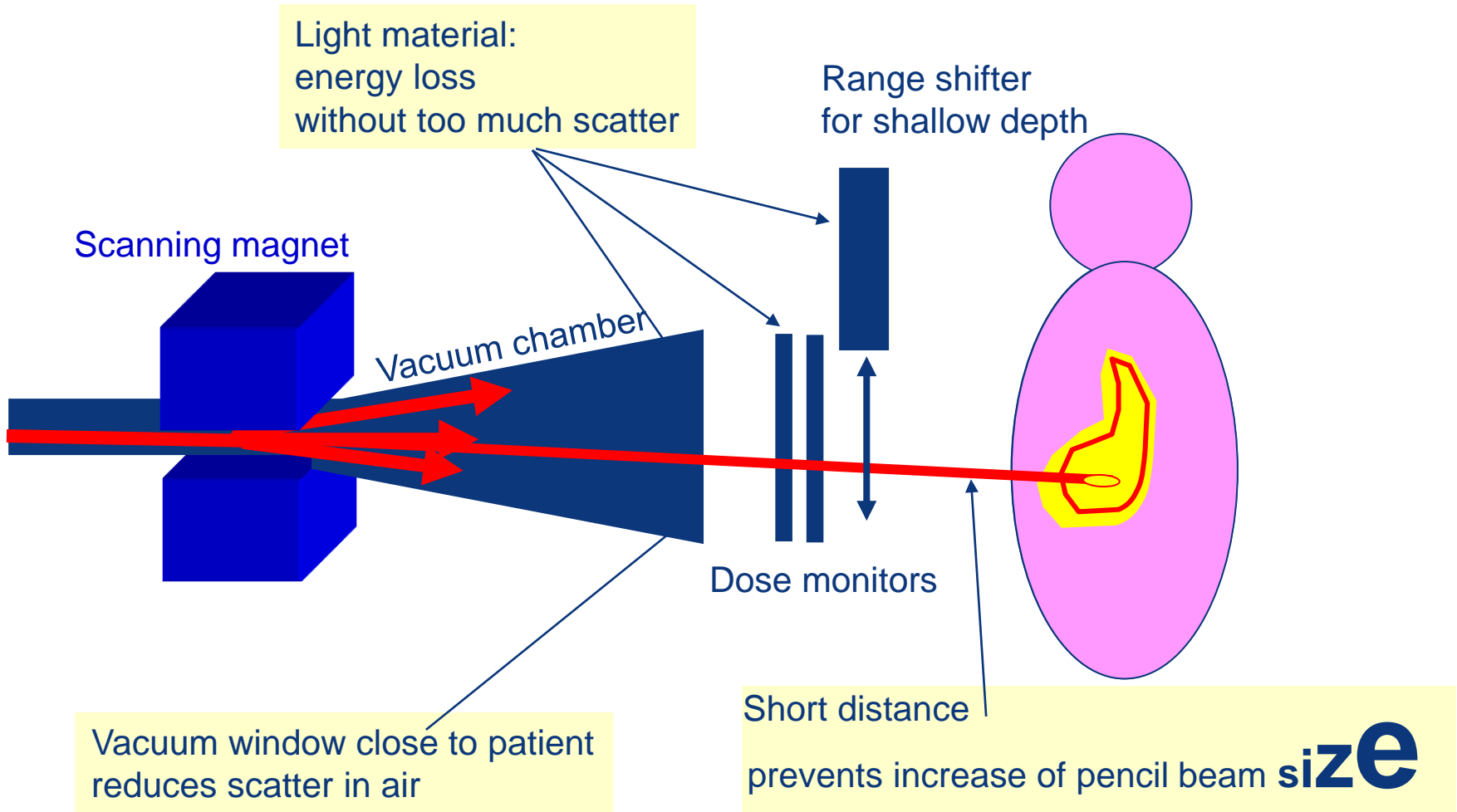
=> More scatter at heavy materials

	250 MeV p:	<u>1 cm H₂O</u>	1 mm W
Energy loss:	$\Delta E =$	4 MeV	4 MeV
Scattering angle:	$\theta =$	5 mrad	16 mrad

Nozzle for a scattered beam



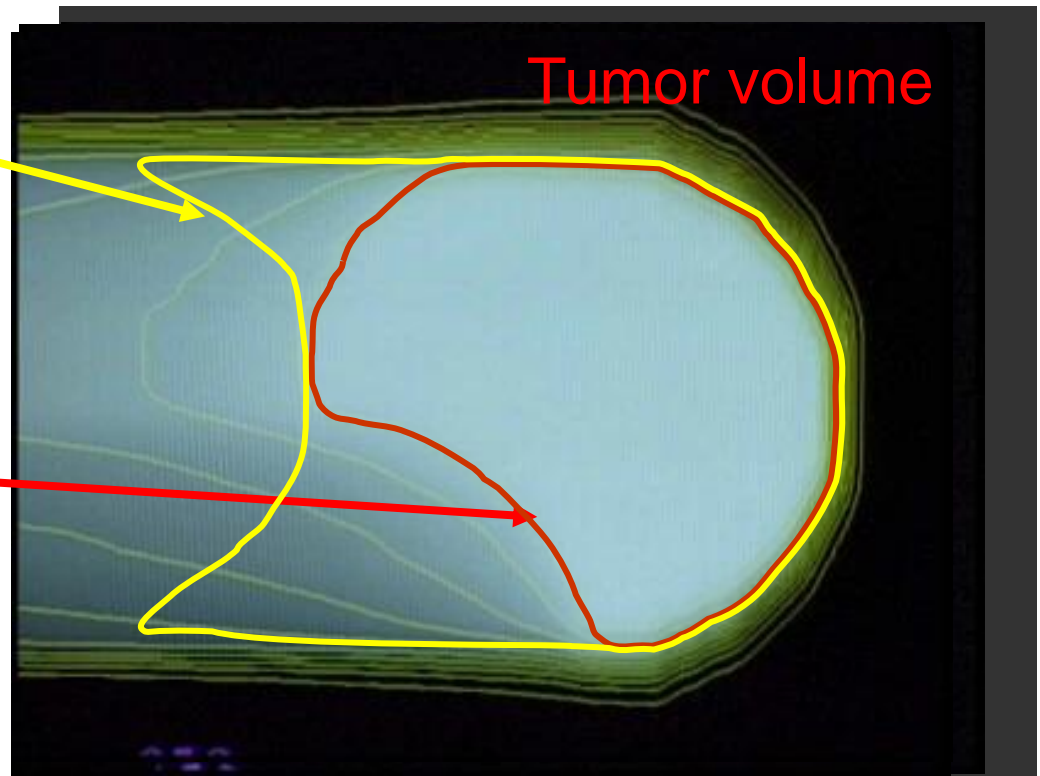
Nozzle for a scanning beam



Scanning: best dose distribution

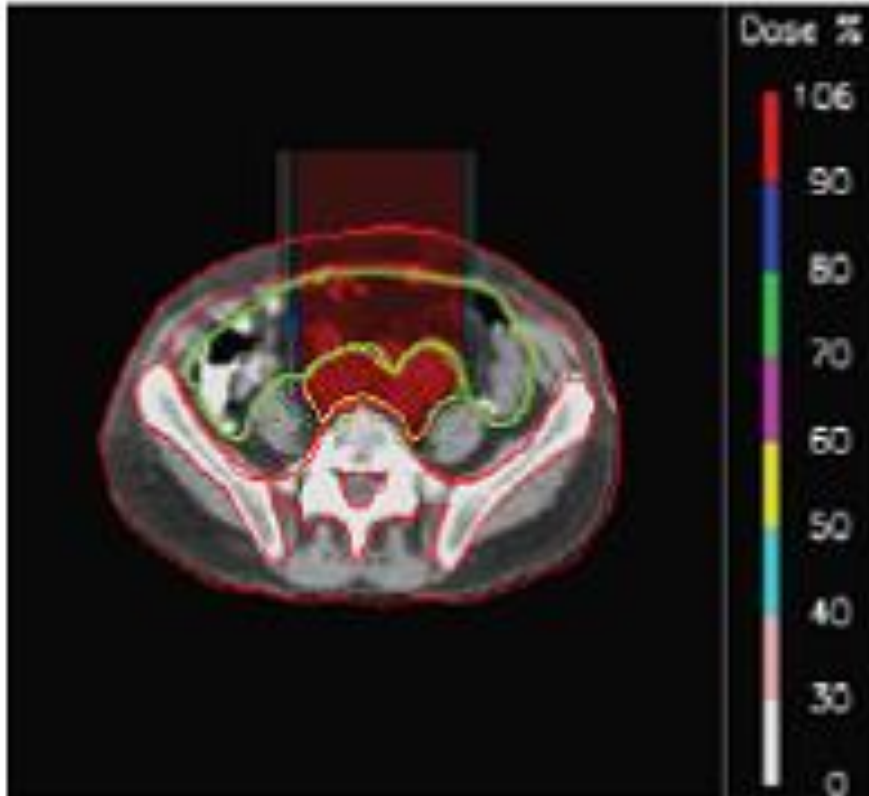
Dose distribution of scattered beam:

Pencil-beam scanning:
behind & in front of tumor
optimal

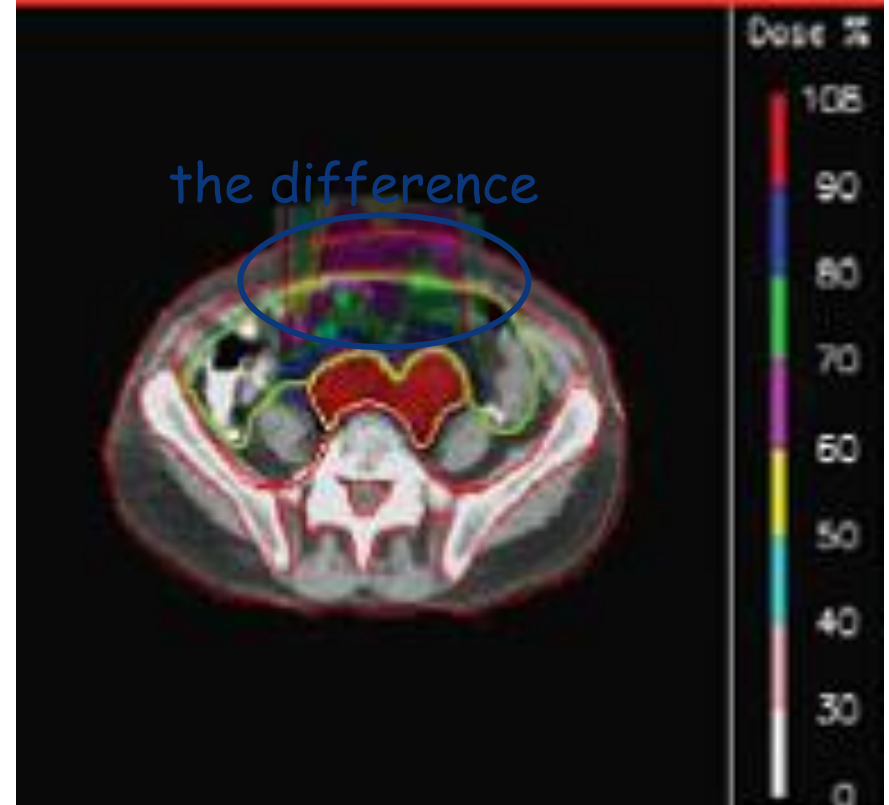


Scatter – IMPT

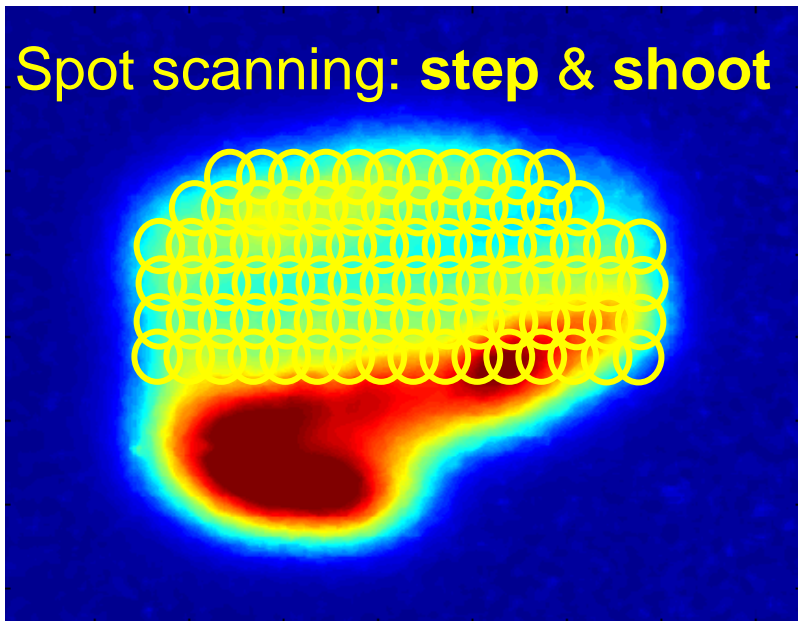
Scattered beam



Scanned beam with IMPT



Spot scanning

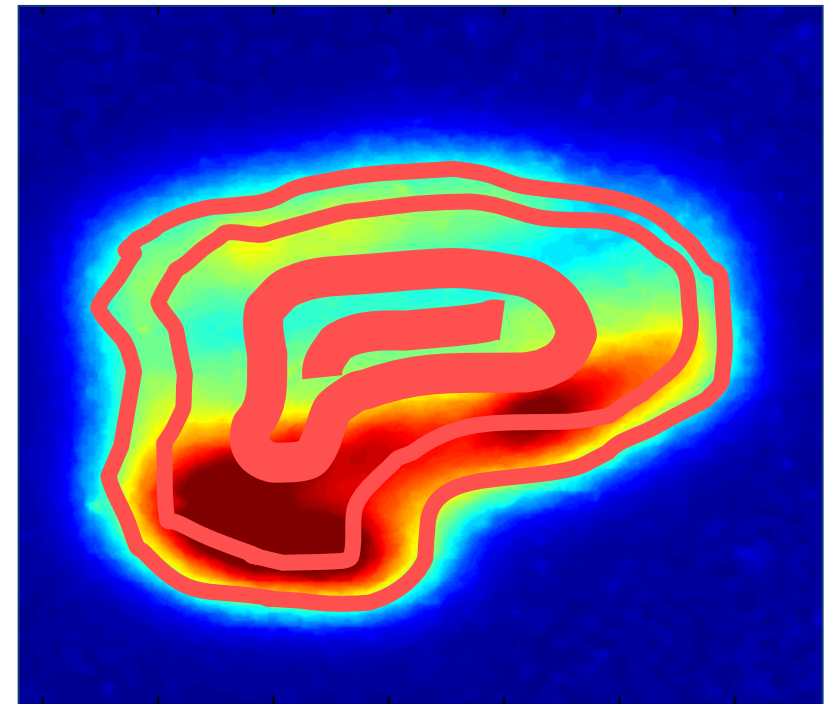
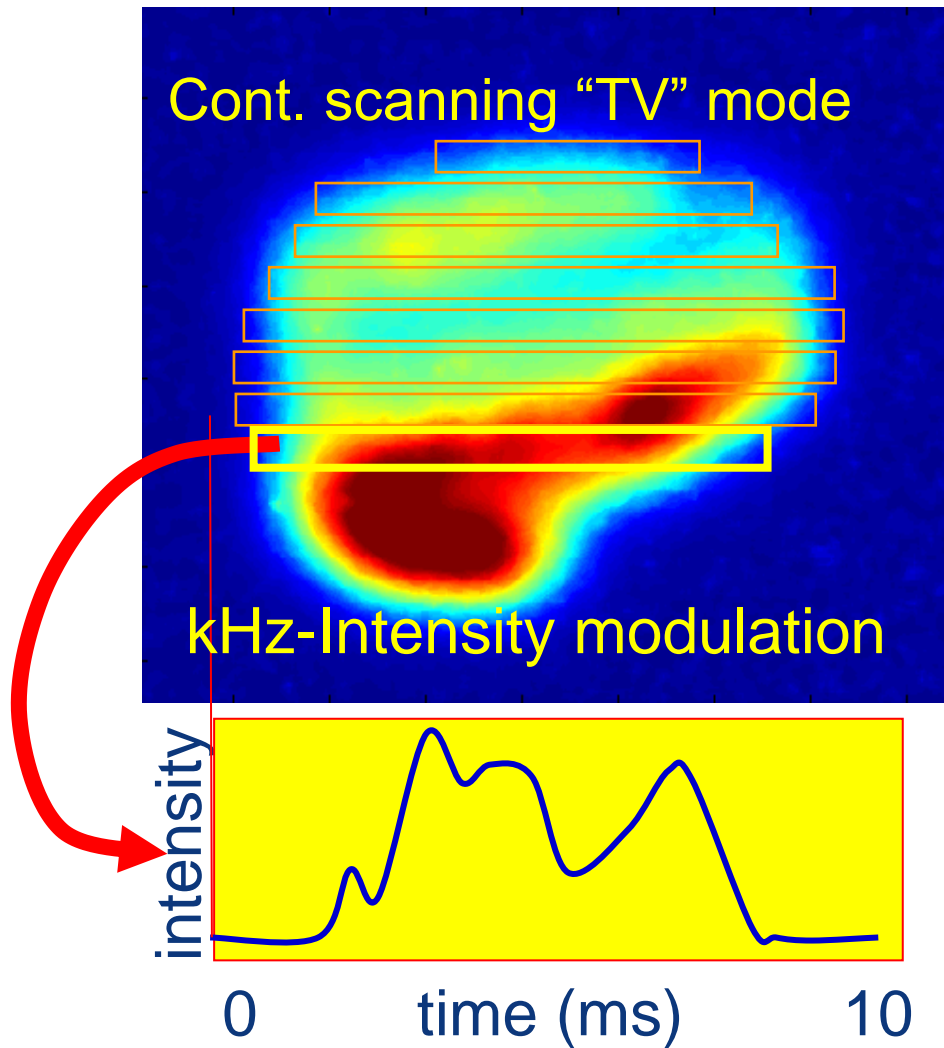


Beam size 7 mm FWHM
5 mm steps

10'000 spots/liter (21 x 21 x 21)
Dose painted only once

~1 Gy / liter / minute

Fast pencil beam scanning in 3D



7 s for a 1 liter volume.
Target **repainting**:
15-30 scans / 2 min.

Upstream versus downstream scanning

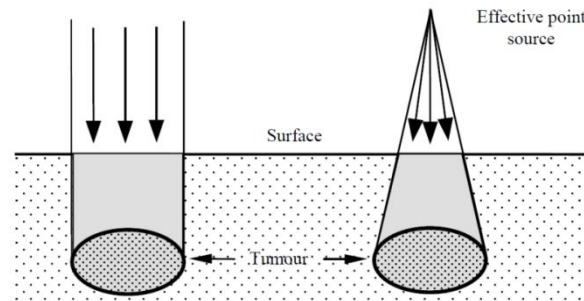
- **Upstream scanning**

- Parallel beam
- Infinite source-to-axis distance (SAD)
- Reduced skin dose
- Large aperture last bend
 - Heavier
 - Higher costs (magnet, mechanical support)

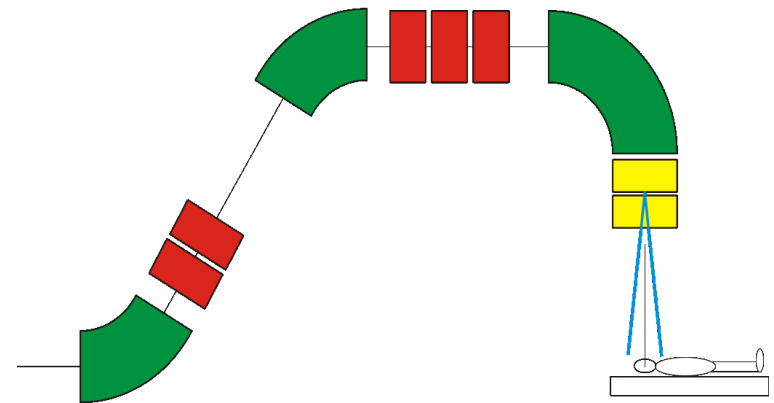
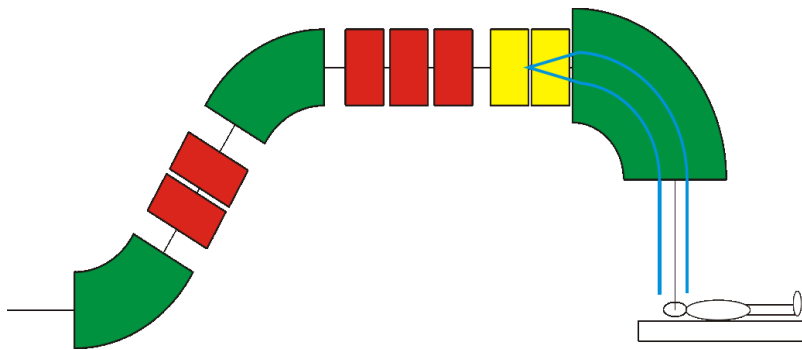
- Easy to implement movable nozzle to reduce air gap (monitors, passive elements)

- **Downstream scanning**

- Divergent beam
- Finite source-to-axis distance (SAD)
- Larger skin dose
- Large fields possible with large SAD (increase diameter)
- Larger diameter → larger room (costs)

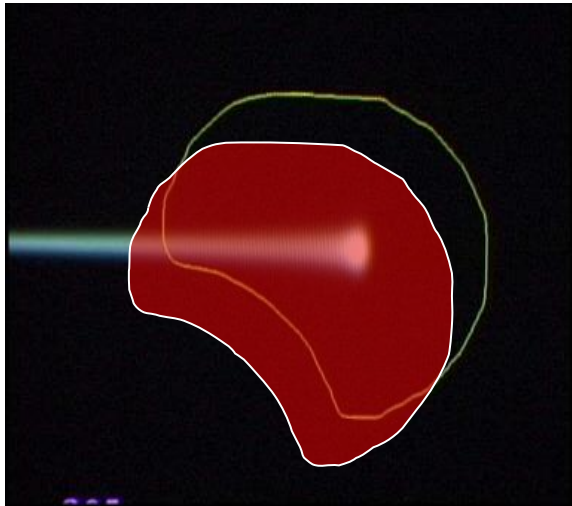


Also possible: Combination of
1 sweeper upstream
1 sweeper downstream



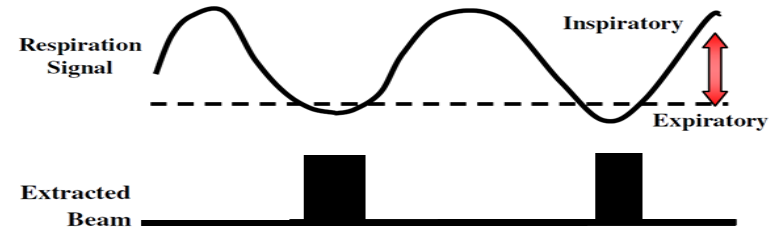
Organ / tumor motion

Organ motion

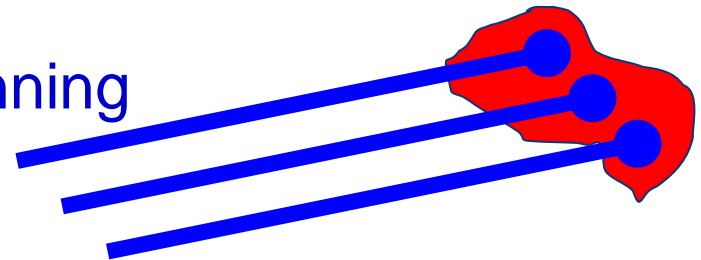


Possible solutions:

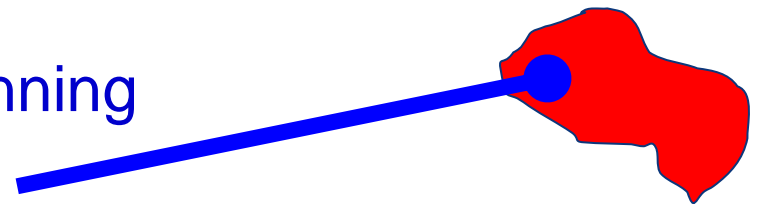
- Gating



- Adaptive scanning
(tumor tracking)

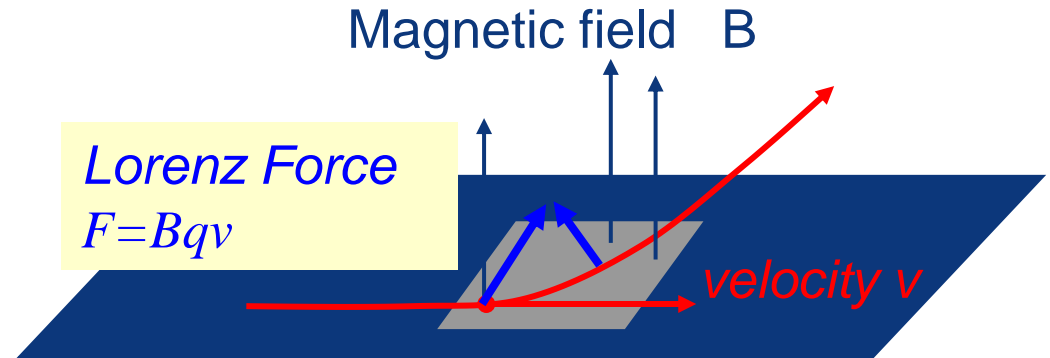
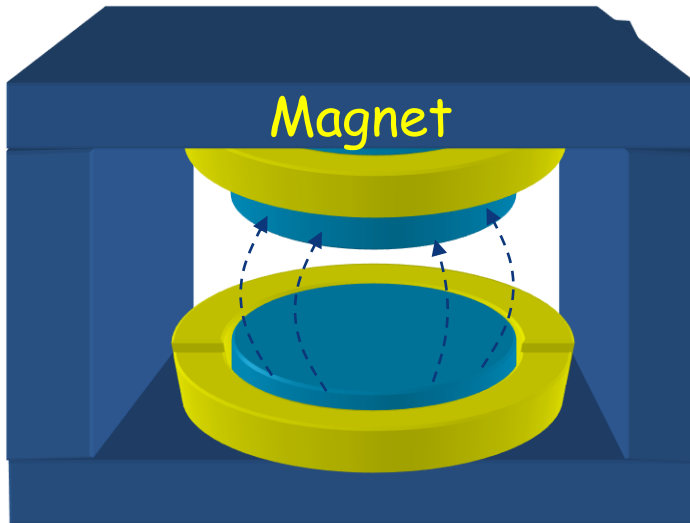


- Fast rescanning



Beam optics properties

Magnetic fields



Lorentz force = “centripetal force” mv^2/ρ
 \Rightarrow track = circular orbit with radius ρ

energy E and charge q

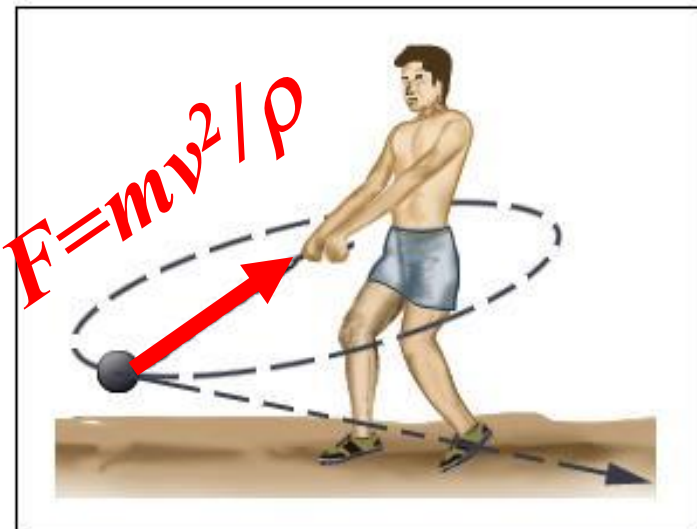
determine magnetic rigidity $B\rho$:

magnet strength B to bend with radius ρ

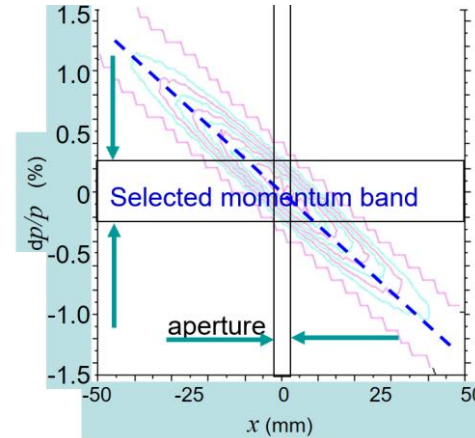
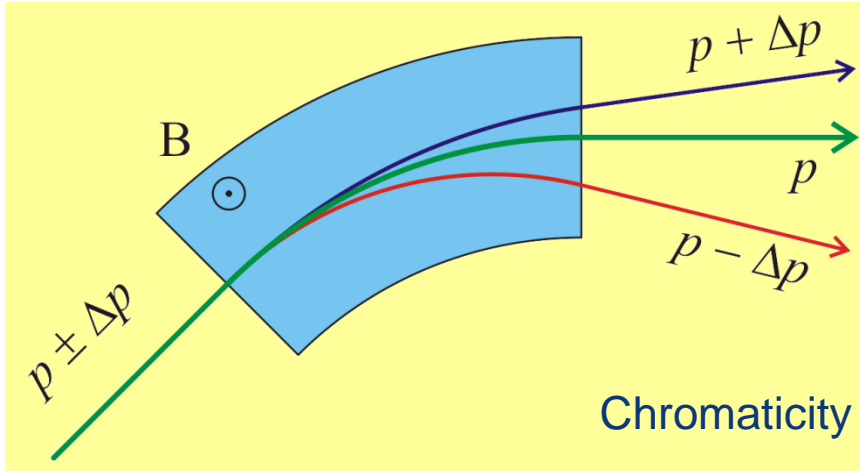
$$B\rho \text{ [in Tm]} = p/e = 3.3356 p \text{ [in GeV]}$$

$$250 \text{ MeV } p: \quad B\rho = 2.4 \text{ Tm}$$

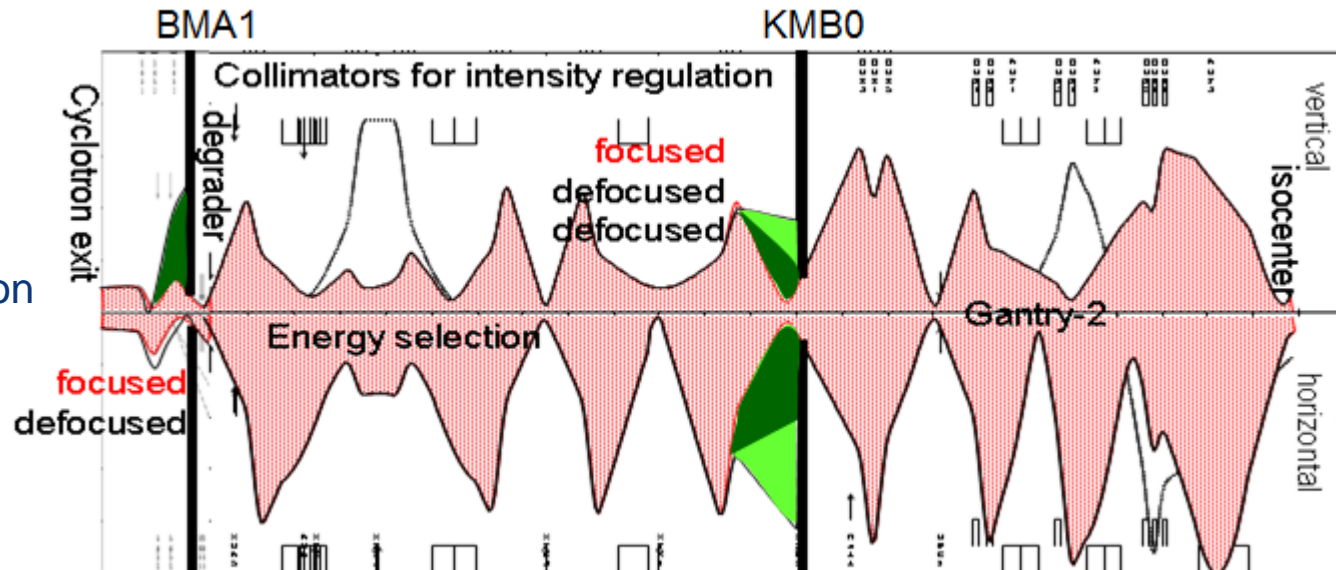
$$450 \text{ MeV/nucl } C^{6+}: \quad B\rho = 6.8 \text{ Tm}$$



Chromaticity and dispersion suppression



- Horizontal axis: z-position
- Vertical axis
 - above zero: $2\sigma_y$
 - below zero: $2\sigma_x$



Optimal gantry beam line design

Coupling point

- Rotational symmetrical phase space
- Fixed collimator

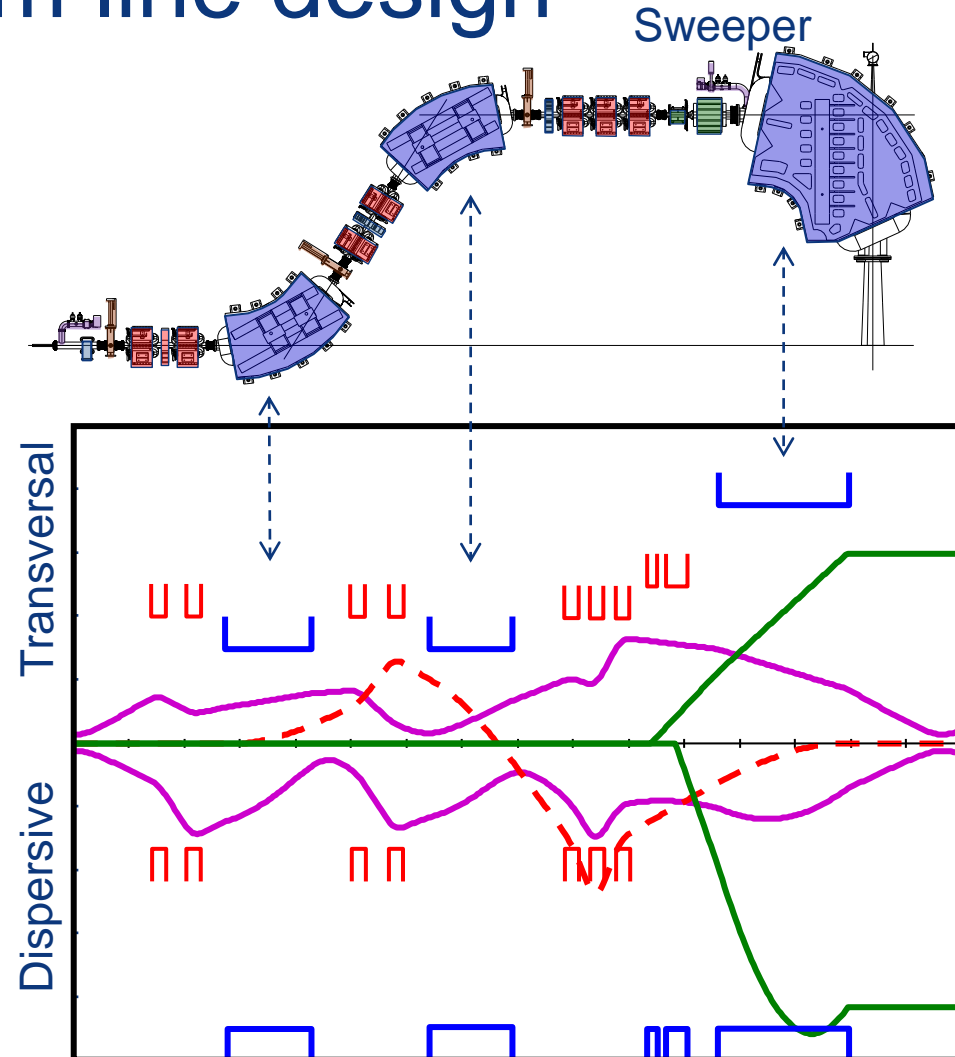
Beam optics

- Imaging from coupling point to iso-center
($R_{12} = R_{34} = 0$)
- Achromatic beam optics
($R_{16} = R_{36} = 0$)
- Point-to-parallel setting from scanning magnets to iso-center
($R_{22} = R_{44} = 0$)

Purple: Beam envelopes trough Gantry 2

Green: Action of the sweepers

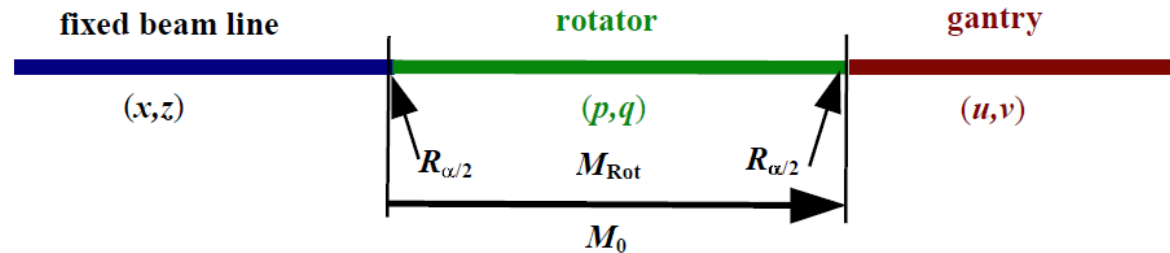
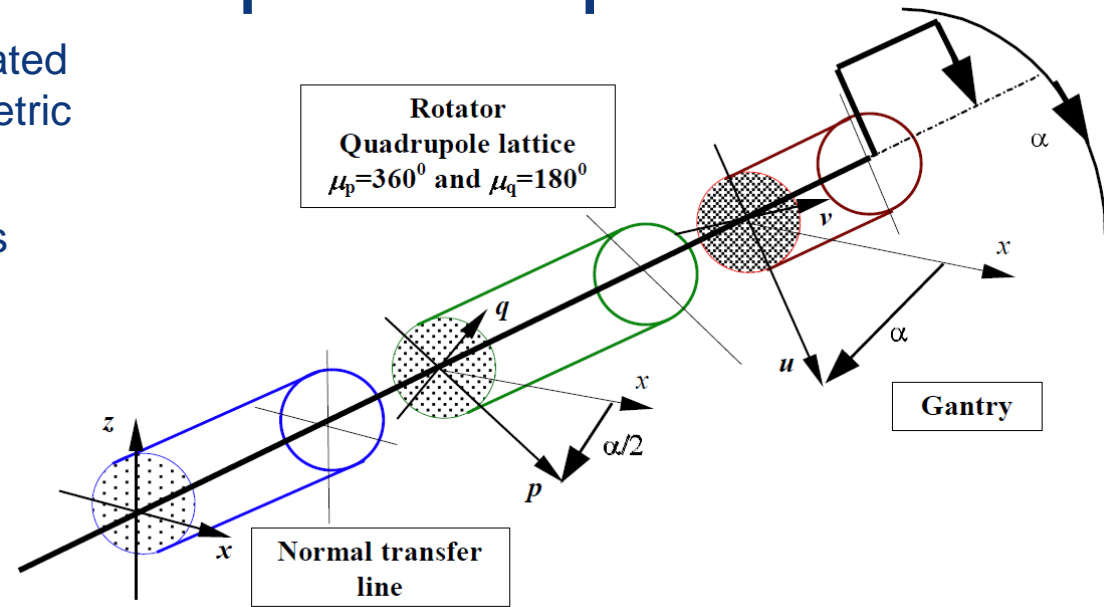
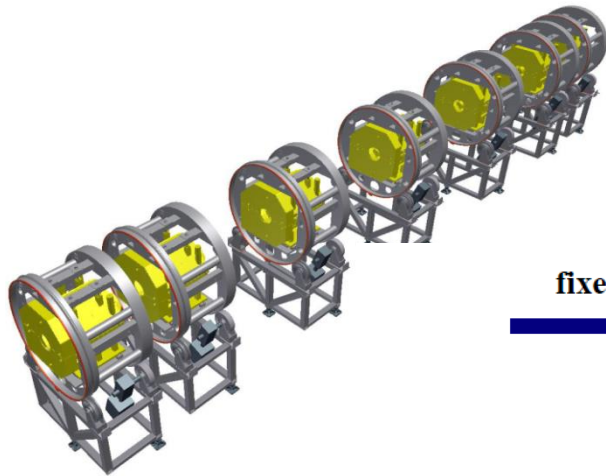
Red: Dispersion trajectory for a 1% momentum band



Matching asymmetric phase-space

A rotator is needed to match optics to rotated Gantry if beam phase space is not symmetric (Synchrotron)

Example of $\alpha/2$ rotator with 7 quadrupoles

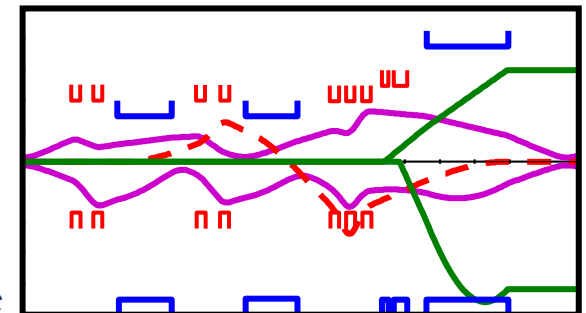
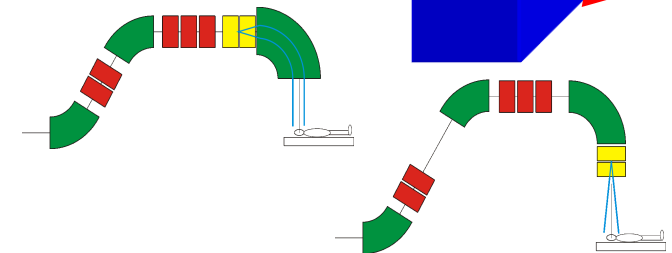
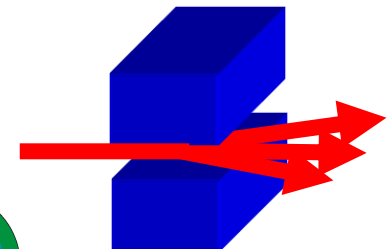
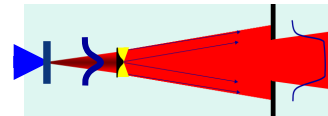
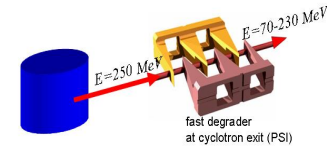
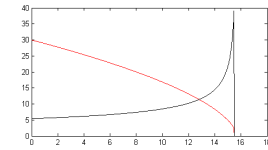


$$M_0 = \begin{pmatrix} \cos \frac{\alpha}{2} & 0 & \sin \frac{\alpha}{2} & 0 \\ 0 & \cos \frac{\alpha}{2} & 0 & \sin \frac{\alpha}{2} \\ -\sin \frac{\alpha}{2} & 0 & \cos \frac{\alpha}{2} & 0 \\ 0 & -\sin \frac{\alpha}{2} & 0 & \cos \frac{\alpha}{2} \end{pmatrix} \begin{pmatrix} 1 & 0 & 0 & 0 \\ 0 & 1 & 0 & 0 \\ 0 & 0 & -1 & 0 \\ 0 & 0 & 0 & -1 \end{pmatrix} \begin{pmatrix} \cos \frac{\alpha}{2} & 0 & \sin \frac{\alpha}{2} & 0 \\ 0 & \cos \frac{\alpha}{2} & 0 & \sin \frac{\alpha}{2} \\ -\sin \frac{\alpha}{2} & 0 & \cos \frac{\alpha}{2} & 0 \\ 0 & -\sin \frac{\alpha}{2} & 0 & \cos \frac{\alpha}{2} \end{pmatrix} = \begin{pmatrix} 1 & 0 & 0 & 0 \\ 0 & 1 & 0 & 0 \\ 0 & 0 & -1 & 0 \\ 0 & 0 & 0 & -1 \end{pmatrix}$$

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Summary

- Proton therapy makes use of the Bragg peak
- In most facilities the beam is accelerated in a cyclotron and the energy is reduced by a degrader
- The target can be
 - irradiated by a scattered beam or
 - scanned by a pencil beam with sweeper magnets
 - Upstream or
 - Downstream of the final bend
- Necessary properties of the gantry beam optics:
 - Rotational symmetrical phase space at coupling point and iso-center
 - Imaging between coupling point and iso-center
 - Achromaticity



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