

# **Jornadas do LIP 2012**

**Reassessment of structural shielding  
design and material characterization  
in radiology installations**

# Participants

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# Current shielding guidelines

Are based in international recommendations:

→ The NCRP Rep. 49 (1976) is still used in many countries since its adopted as legally binding methodology (DL180/2002);

**Workloads and transmission curves are outdated!**

# Current shielding guidelines

The Decree-Law 180/2002 establishes the Portuguese framework for shielding design of radiological installations:

- HVLs are only provided down to 50 kV;
- Lower operating potentials are obtained by pure exponential extrapolation;
- Thickness equivalence between materials is outdated;
- Workloads need to be revised.

# Current shielding guidelines

The NCRP Rep. 147 (2004) revises and updates the shielding design methodology of X-ray imaging installations, including:

- New transmission curves based on the Archer and Simpkin model and data;
- Revised workloads;
- Specificity of new equipments.

# Mammography installations

**Mammography is performed at low potentials: 25 – 35 kV.**

The shielding requirements can be ambiguous

(NCRP Rep. 147, pag. 13):

**“Permanent mammography installations may not require protection other than that provided by typical gypsum wallboard construction. [...] Although the walls of mammography facility may not require lead shielding, a qualified expert shall be consulted...”**

# Mammography installations

In same cases, designers and regulators can be confronted with different shielding requirements that have significant cost differences.

# Goals of the project

- Map stray radiation dose rates in radiology installations (including a phantom of the patient);
- Evaluate absorption and scattering effects of the patient on unshielded dose rates;
- Support these measurements with generalized MC calculations;
- Revise shielding calculations with new design parameters;
- Assess properties of shielding materials produced by national industries.



# Mammography measurements

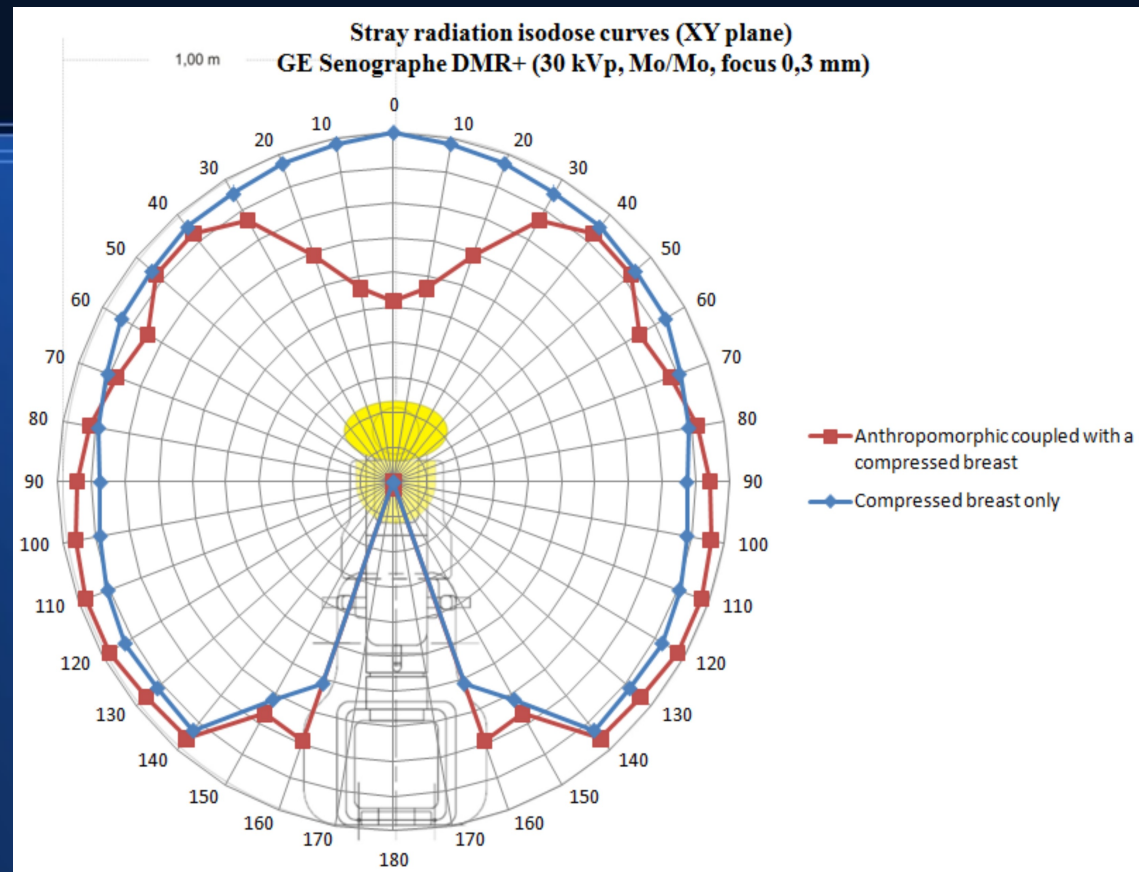


- Equipment: *GE SENOGRAPHE DMR+*;
- Phantom: Anthropomorphic coupled with a compressed breast (5 cm thickness);
- Detection system: *Unifors Xi Survey detector* (solid state sensor) + *Base Unit*.

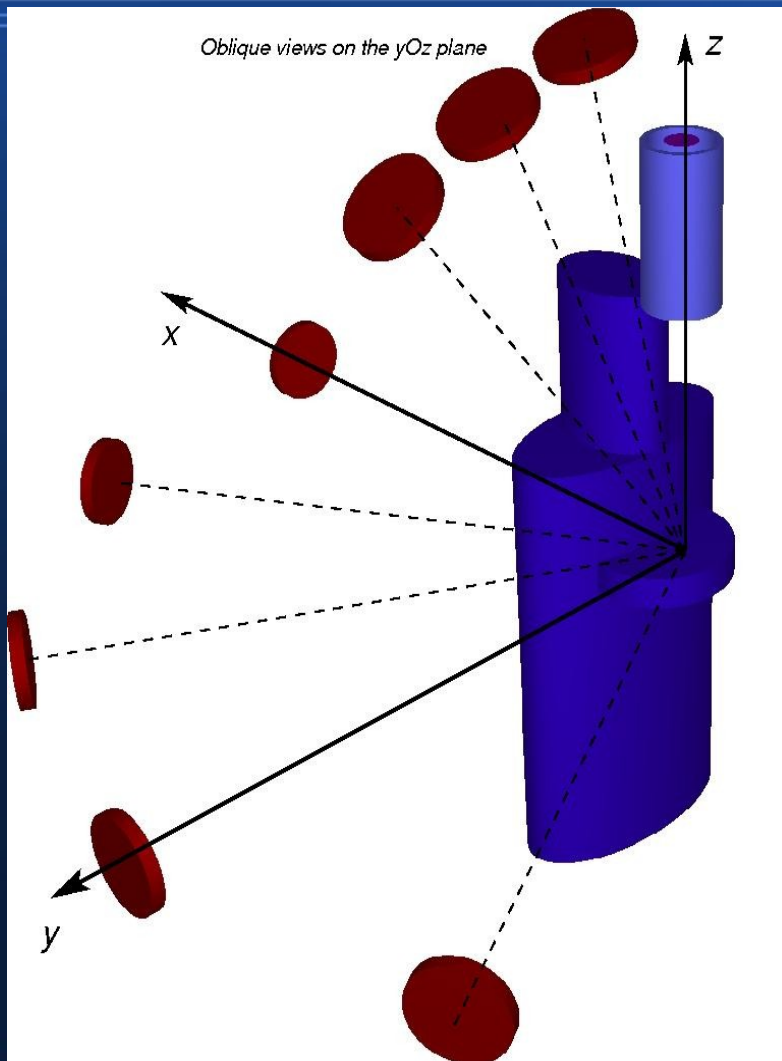
# Results

→ Between  $20^\circ$  and  $0^\circ$ , absorption by the phantom coupled accounts for more than 50 % reduction relative to the compressed breast only configuration;

→ Between  $80^\circ$  and  $140^\circ$  there is an increase in dose rates due to scattering effects on the anthropomorphic phantom.

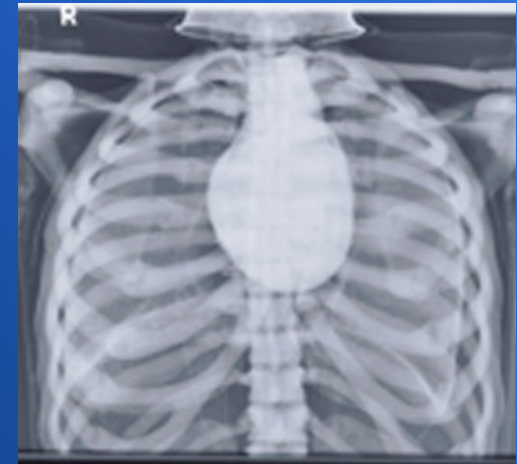
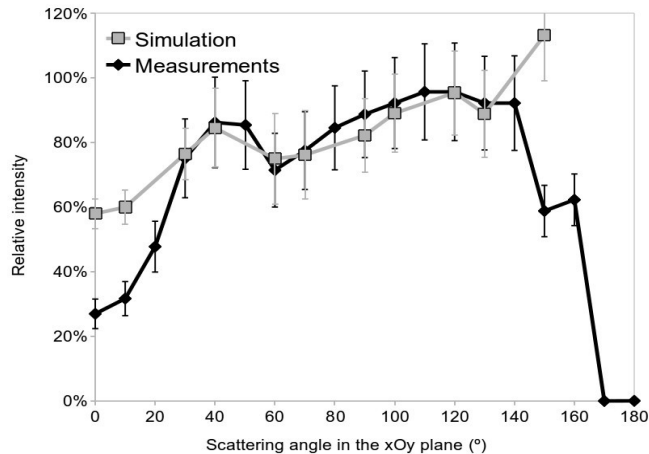


# MC simulations



- Code: PENELOPE (2011);
- X-ray source: IPEM database;
- Cut-offs: 1 keV;
- Primaries:  $10^9$  photons;
- Speed: >1000 photons/second;
- Computing: LIP Farm.

# MC simulations



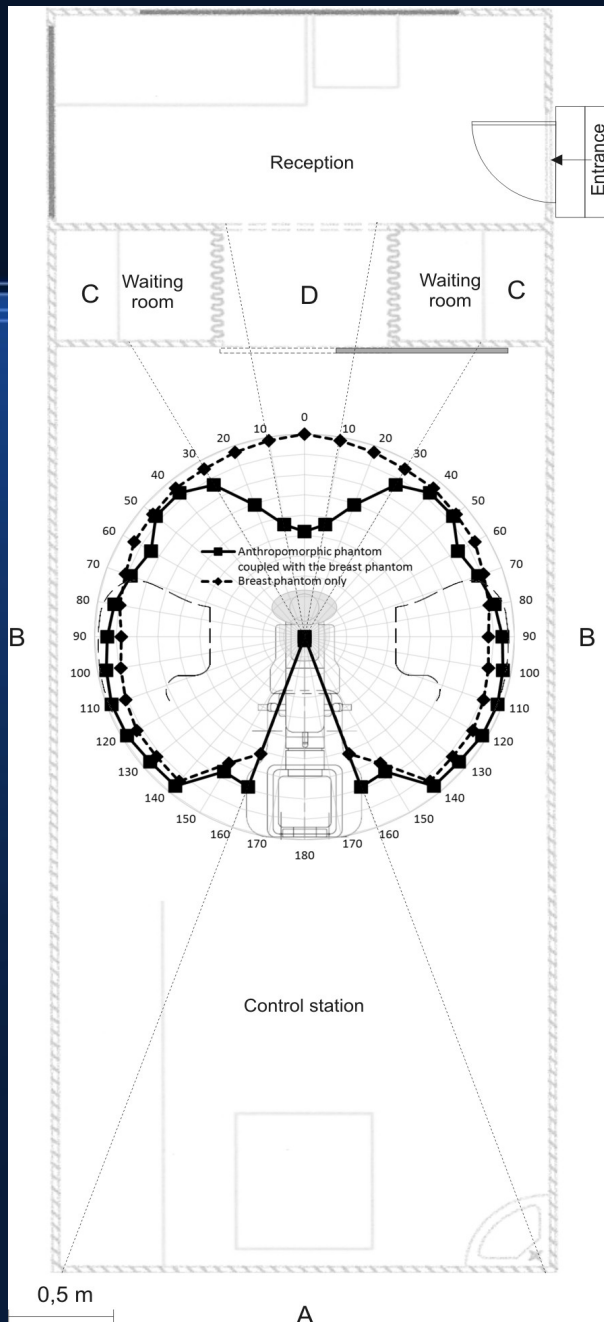
Not included!

Agreement with measurements, except for 0°:

- Overestimation of stray radiation (no shielding of the tube included) and/or;
- Sub-estimation of absorption by internal organs.



# Mobile installations



Non-profit organizations use mammography units mounted in caravans for free breast-screenings of the population. The shielding of these caravans implies significant extra costs

# Mobile installations

NCRP Rep. 147 (2004) methodology;

Material: wood.

|  | Wall (A)   | Wall (B)    | Wall (C)   | Wall (D)    |
|--|------------|-------------|------------|-------------|
| <b>x (mm)<br/>without “patient<br/>absorption”</b> | <b>0.0</b> | <b>25.4</b> | <b>4.1</b> | <b>52.5</b> |
| <b>x (mm)<br/>with “patient<br/>absorption”</b>    | <b>0.0</b> | <b>25.4</b> | <b>0.0</b> | <b>26.6</b> |

*Rad. Prot. Dosim*, submitted (2012).

# Material characterization

Collaboration with a small Portuguese company of building materials.

Wants to develop materials for radiological protection.

Need to know:

→ Mass-attenuation coefficients;

→ HVLs and lead equivalence.

## FICHA TÉCNICA

### SEPOR® BARITA

Reboco de protecção radiológica. Substituto de placas de chumbo em áreas de radiação ionizante.

#### PRODUTO

Argamassa à base de sulfato de bário, inertes seleccionados, ligantes hidráulicos e aditivos.

#### APLICAÇÃO

Argamassa de revestimento interior de paredes para protecção radiológica em salas de radiologia, radioterapia, consultórios dentários, bem como todos os ambientes onde se exige o isolamento de radiações.

#### SUPORTES

Suportes convencionais de tijolo, bloco de betão ou betão. Os suportes devem ser salpicados com argamassa de chapisco (SEPOR M2) antes de aplicar SEPOR BARITA.

#### MODO DE EMPREGO

- 1- A superfície (paredes verticais ou tectos) onde vai ser aplicado o reboco baritado deve ser chapiscada para permitir criar pontos de aderência e após chapisco este deve secar pelo menos um dia.
- 2- A Argamassa SEPOR BARITA é uma argamassa pré-doseada, pronta a aplicar, bastando apenas adicionara quantidade de água indicada (cerca de 18%).
- 3- Consultar no projecto de radioprotecção as espessuras correctas a aplicar em cada parede. É fundamental o cumprimento das espessuras correctas indicadas no projecto.
- 4- Para espessuras até 2,5 cm a aplicação é feita numa única camada. Para espessuras superiores a outra camada só é aplicada quando a anterior estiver suficientemente firme.



Reboco Radiológico  
Protecção Radiológica

± 25Kg

#### CARACTERÍSTICAS DO PRODUTO

|   |   |
|---|---|
| Reacção ao fogo:                              | A1  |
| Resistência à compressão:                     | CS III                                    |
| Densidade da Pasta:                           | 2,2Kg/dm                                  |
| Consumo teórico:                              | 21 kg/m <sup>2</sup> /cm                  |
| Coef. Atenuação Mássico (g/cm <sup>2</sup> ): | 1,6 ± 11%<br>(fonte com feixe de 120 kVp) |

Mixture with BaSO<sub>4</sub>

# Material characterization

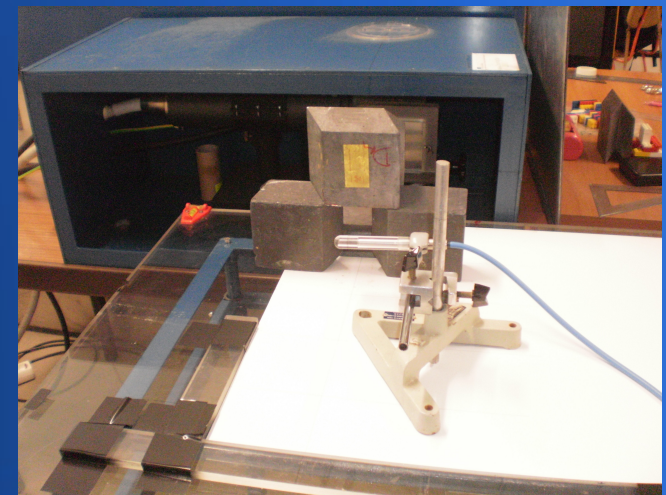
Cs-137 source (662 keV);

X-ray installation (20-100 kV)

**Major issue:**

➤ Minimize scattering effects.

Master thesis (Sónia Dias)



| $(\mu/\rho)_{\text{sepor}} \text{ (cm}^2\text{/g)}$ | $(\mu/\rho)_{\text{NIST}} \text{ (cm}^2\text{/g)}$ |
|---|--|
| $(7.293 \pm 0.583) \times 10^{-2}$                  | $7.747 \times 10^{-2}$                             |



# Future work

- Extend measurements and MC simulations to dental and veterinary radiological installations;
- Address the influence of field inhomogeneities;
- Improve MC simulations including a more realistic geometry;
- Optimize composition of building materials



***Thank you!***