

New challenges for biologically adapted ion beam treatment planning: single and multi-ion approaches

Emanuele Scifoni, Michael Krämer,
Walter Tinganelli, Wilma Kraft-Weyrather, Andreas Maier
Ryochi Hirayama, Yoshiya Furusawa and Marco Durante

*Biophysics Department, GSI, Darmstadt
IOL, NIRS, Chiba*

Outline

Introduction

Hypoxia, Particle Therapy
and related treatment planning (“painting”) strategies

TRiP98OER : “Killing Painting”

OER modeling

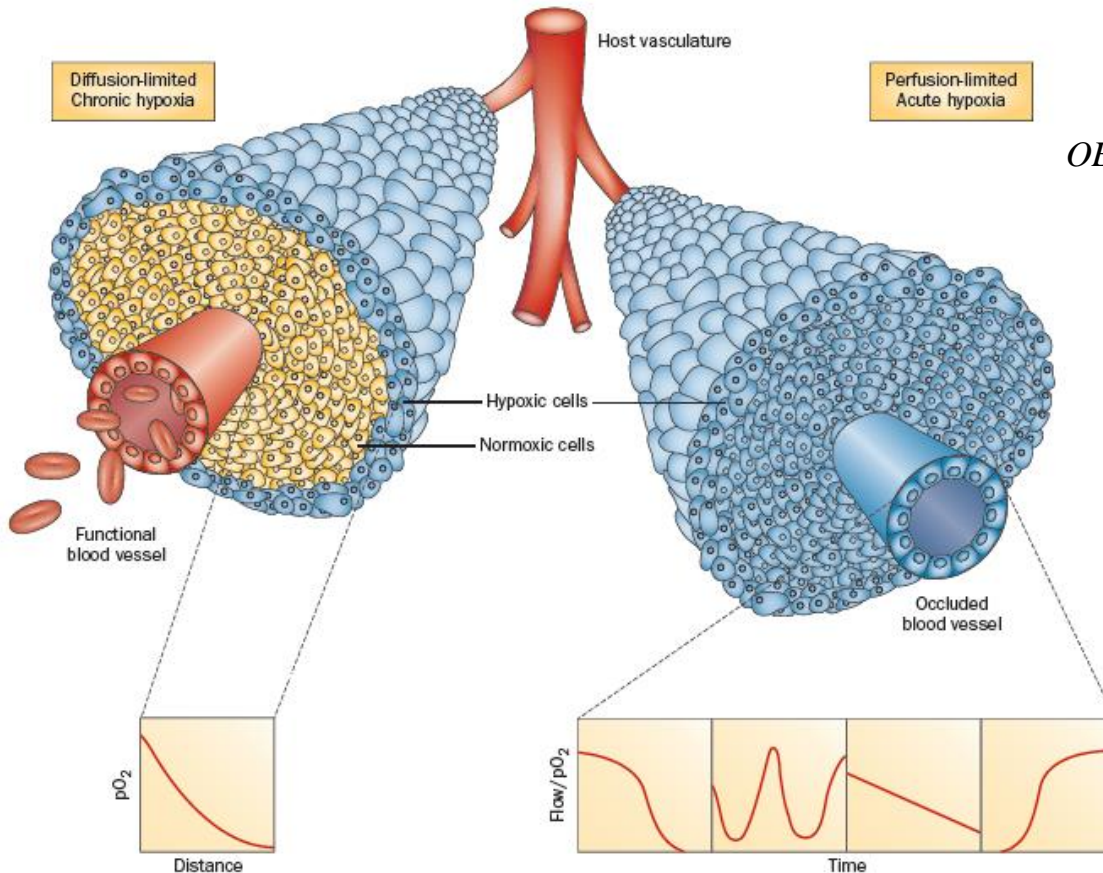
TP implementation

Experimental verification

Alternative Ion species and perspectives

Summary & outlook

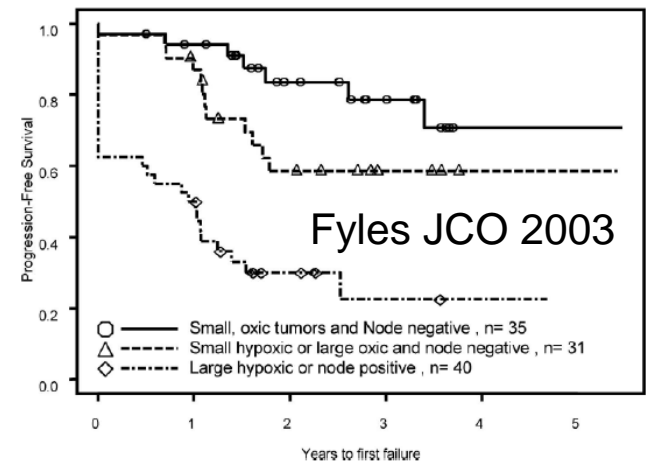
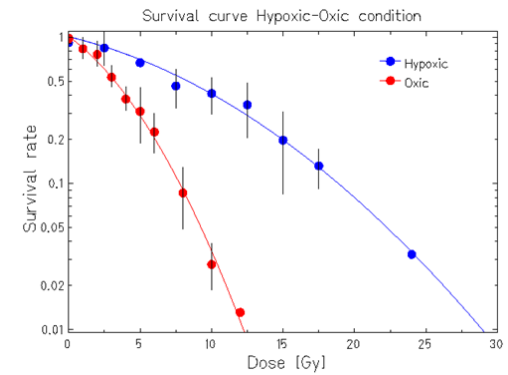
Contrasting Hypoxia



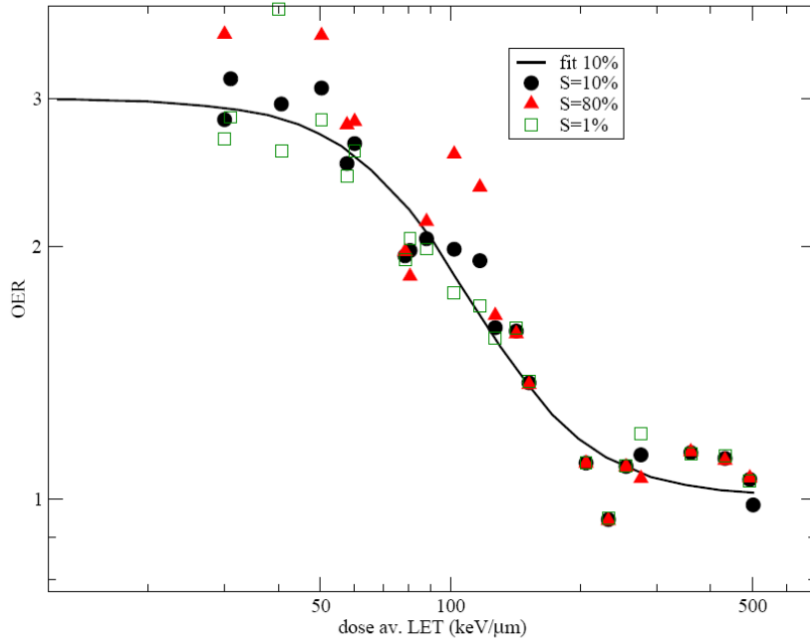
Horsman et al *Nat. Rev. Clin. Oncol.* (2012)

Oxygen Enhancement Ratio

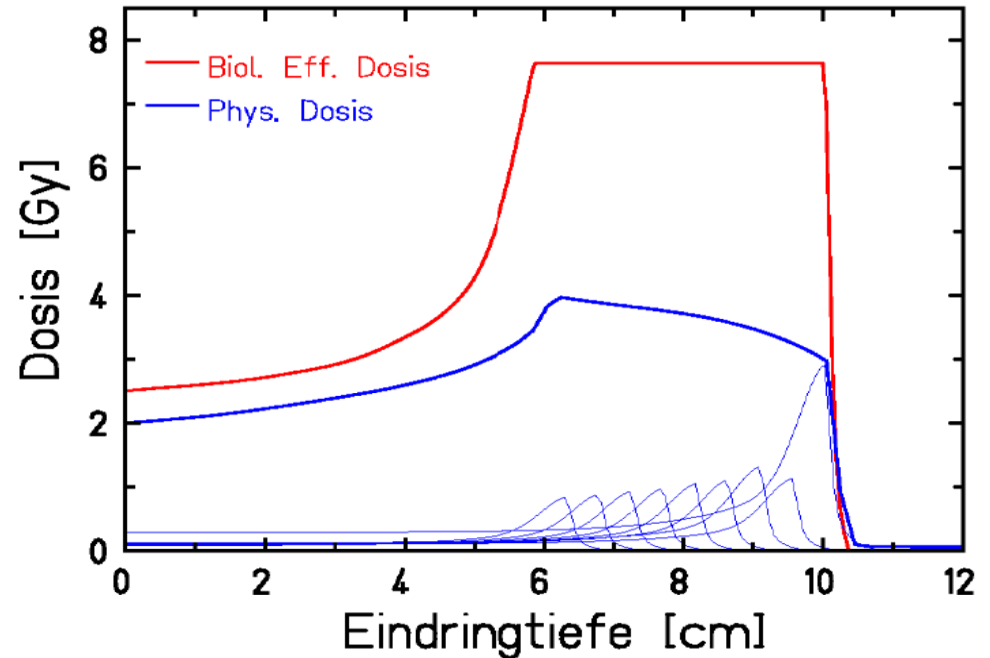
$$OER = \frac{D_{hypoxic}}{D_{normoxic}} \Big|_{\text{same effect}} ; OER(p) = \frac{D(p)}{D_{normoxic}} \Big|_{\text{same effect}}$$



Is this problem solved for high LET radiation?



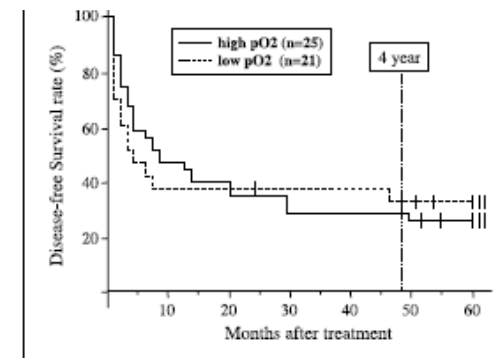
Furusawa et al., Radiat. Res. 2000



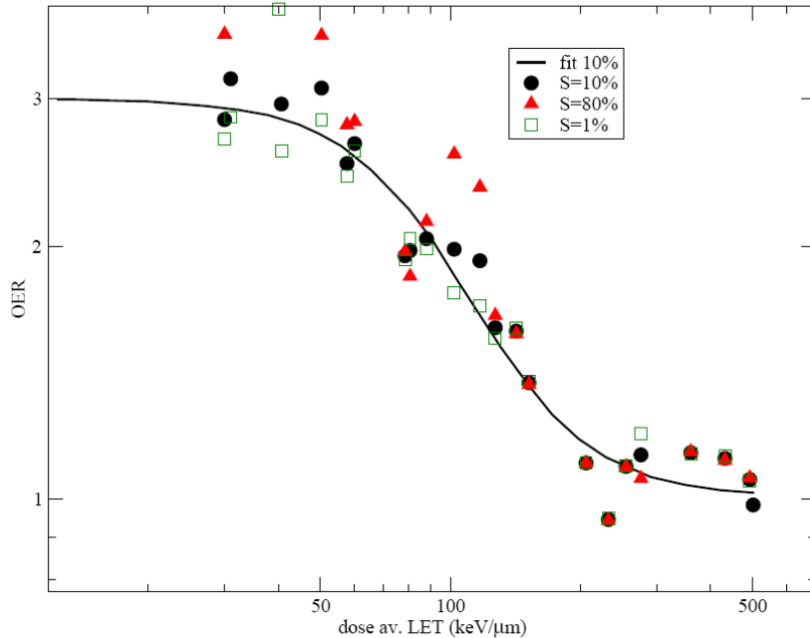
Carbon Beam Therapy Overcomes the Radiation Resistance of Uterine Cervical Cancer Originating from Hypoxia

Takashi Nakano, Yoshiyuki Suzuki, Tatsuya Ohno, et al.

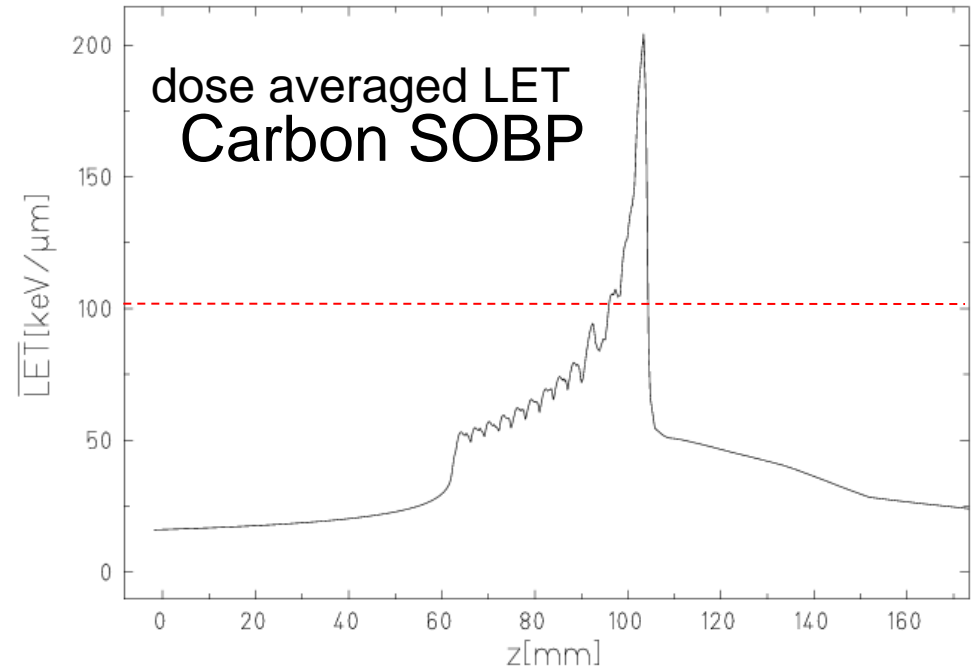
Clin Cancer Res 2006;12:2185-2190. Published online April 11, 2006.



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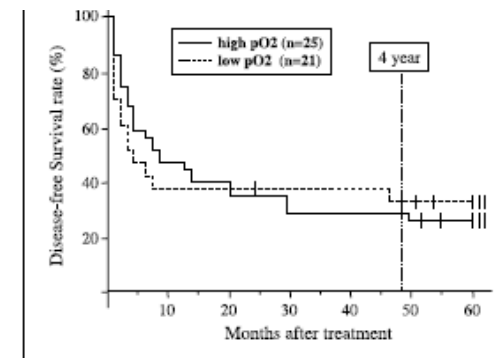
Furusawa et al., Radiat. Res. 2000



Carbon Beam Therapy Overcomes the Radiation Resistance of Uterine Cervical Cancer Originating from Hypoxia

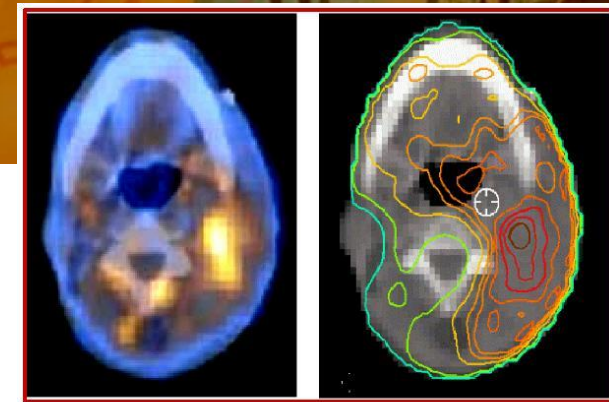
Takashi Nakano, Yoshiyuki Suzuki, Tatsuya Ohno, et al.

Clin Cancer Res 2006;12:2185-2190. Published online April 11, 2006.



Painting Strategies

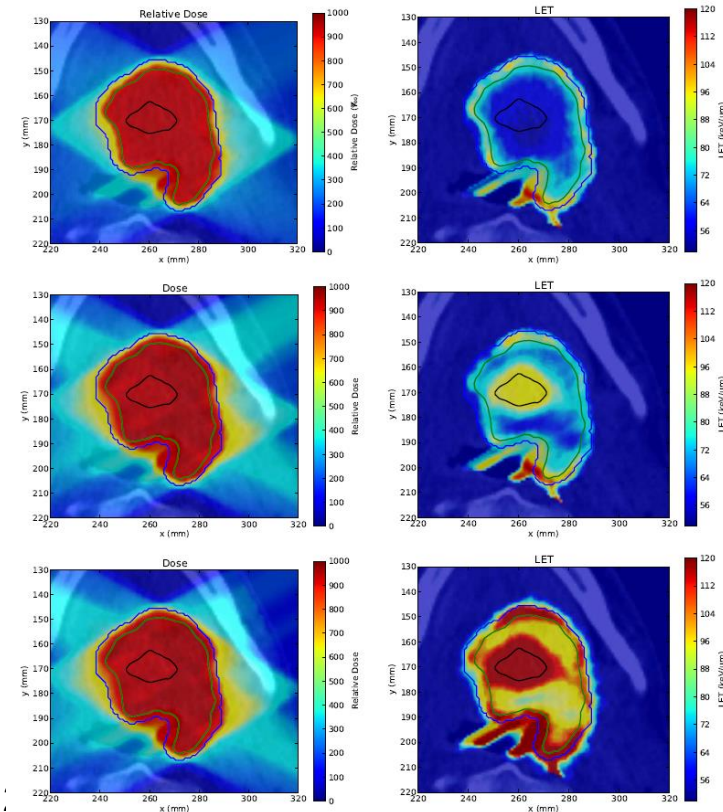
- Dose painting by contours
 - Boost dose in defined iso-uptake contours
- Dose painting by numbers
 - voxel-based prescription function
- LET painting
 - Redistribution of LET, to be maximized in the target volume also using dose ramps



Friso PET + CT

Hypoxia Dose Painting

Thorwarth et al.2010

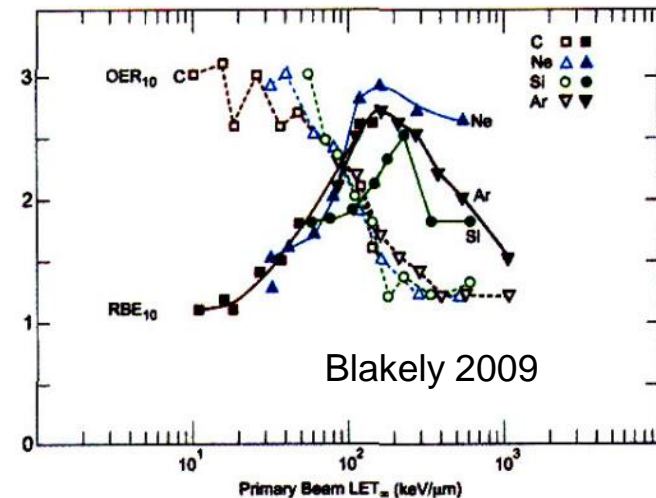


see N. Bassler talk on Thu

Bassler, et al. Acta Oncol 2013

“Killing” painting

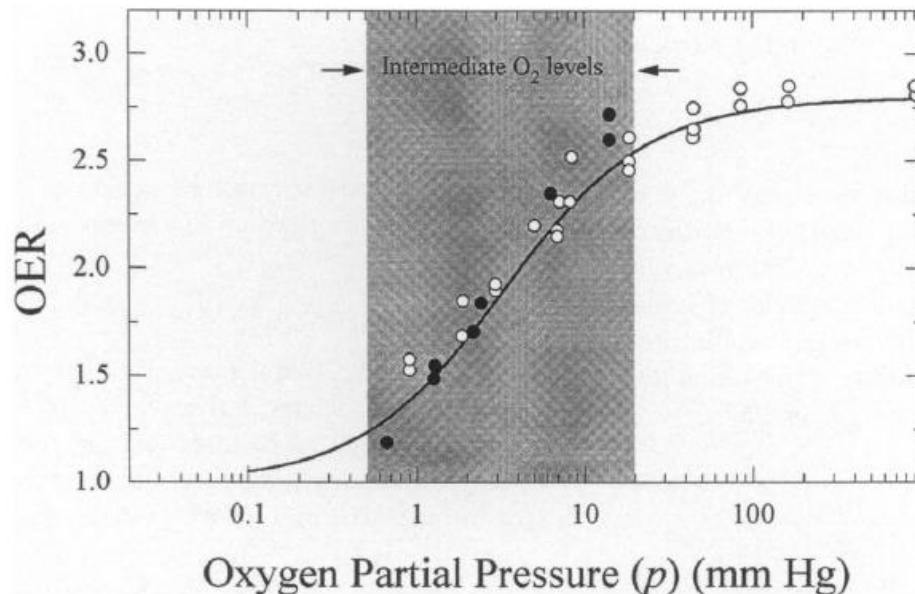
- Restoring a prescribed survival level in the target volume, independently on the oxygenation level of different regions
- Taking fully into account the potential of ion beam active scanning dose delivery
- Close connection of RBE and OER
 - Maximum slope in the same LET range
- LET and pO_2 dependence at the same time



Oxygenation level (X-rays only)

Cells at Intermediate Oxygen Levels Can Be More Important Than the “Hypoxic Fraction” in Determining Tumor Response to Fractionated Radiotherapy

Bradly G. Wouters and J. Martin Brown



Radiat. Res. 1997

Alper formula

$$\frac{S_{10\%}(pO_2)}{S_{10\%}^{N_2}} = \frac{m \cdot pO_2 + K}{pO_2 + K}$$

Alper and Howard-Flanders, *Nature* 1956

m = maximum relative sensitivity

K = ratio of the rate constants for chemical repair and oxygen fixation

OER(pO_2 , LET) model for adaptive particle treatment planning

Scifoni et al., *Phys. Med. Biol.* 2013

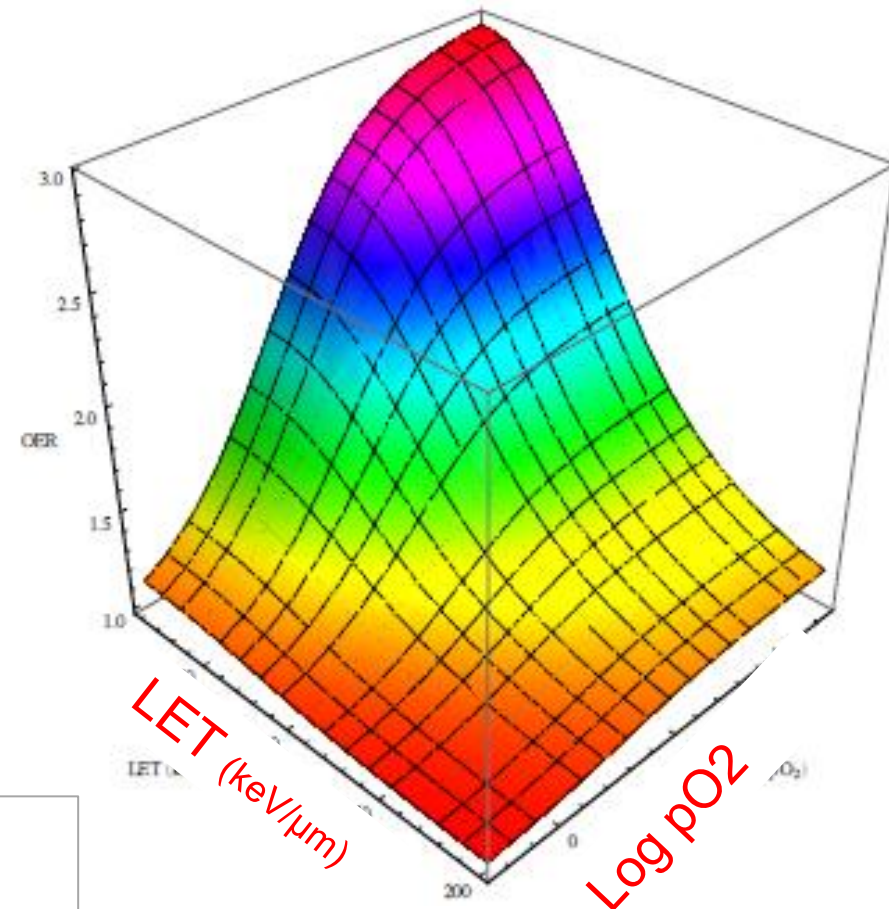
$$OER(pO_2, \overline{LET}) = \frac{b(Ma + \overline{LET}^\alpha) / (\overline{LET}^\alpha + a) + pO_2}{b + pO_2}$$

$$D_{\text{bio}}^i(\vec{N}) = \sqrt{\frac{\alpha_i \cdot \vec{c}_i^T \cdot \vec{N} + \beta_i \cdot (\vec{c}_i^T \cdot \vec{N})^2}{\beta_x} + \left(\frac{\alpha_x}{2\beta_x}\right)^2} - \frac{\alpha_x}{2\beta_x} ;$$

Krämer & Scholz, *Phys. Med. Biol.* 2006

$$\alpha'_i(\overline{L}_i, p_i) = \alpha_i / OER(\overline{L}_i, p_i)$$

$$\sqrt{\beta'_i(\overline{L}_i, p_i)} = \sqrt{\beta_i} / OER(\overline{L}_i, p_i)$$



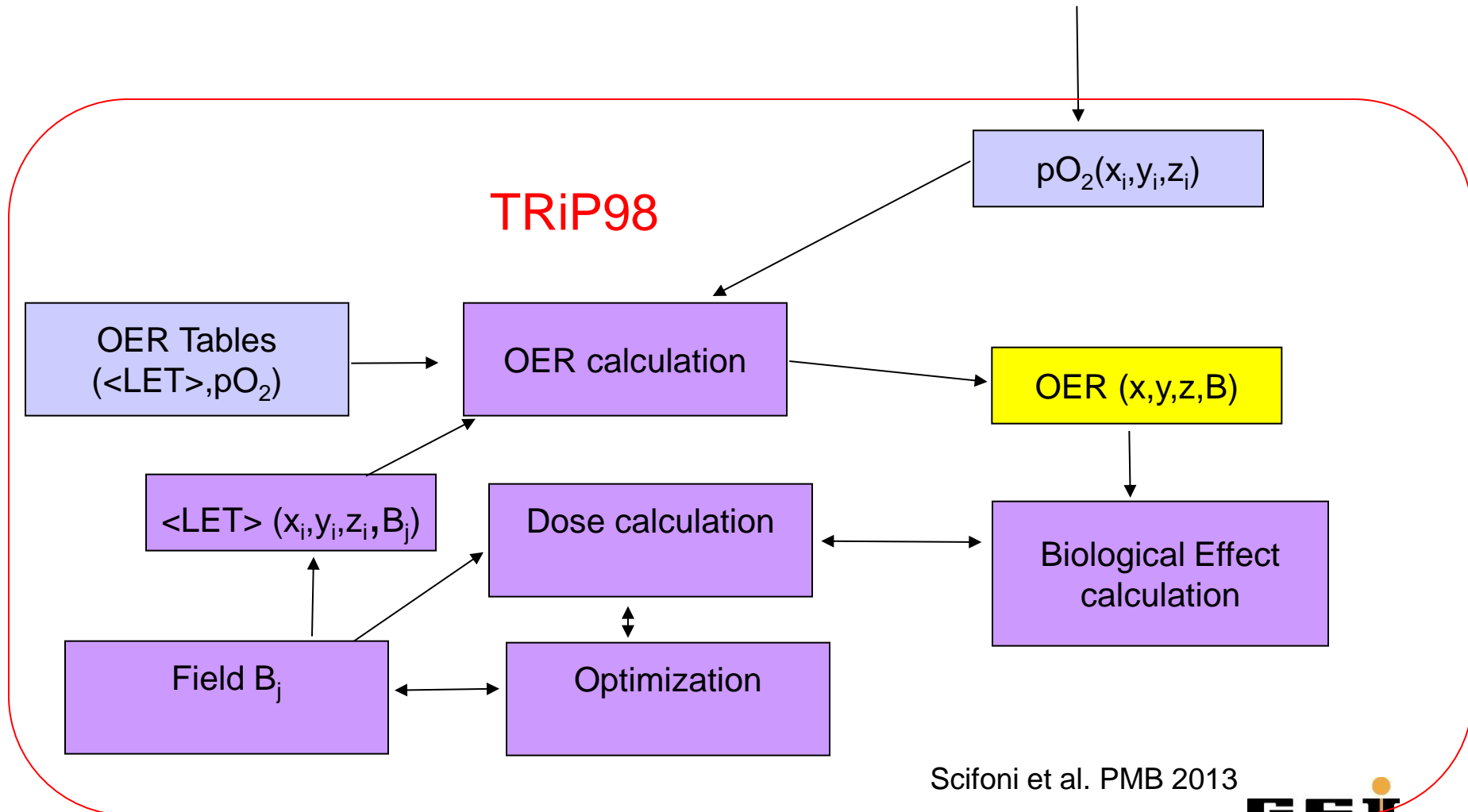
Validation Measurements

OER vs. LET for different pO₂ values

@GSI-NIRS International Open Laboratory

Tinganelli, et al. in prep.

TRiP98-OER



Scifoni et al. PMB 2013

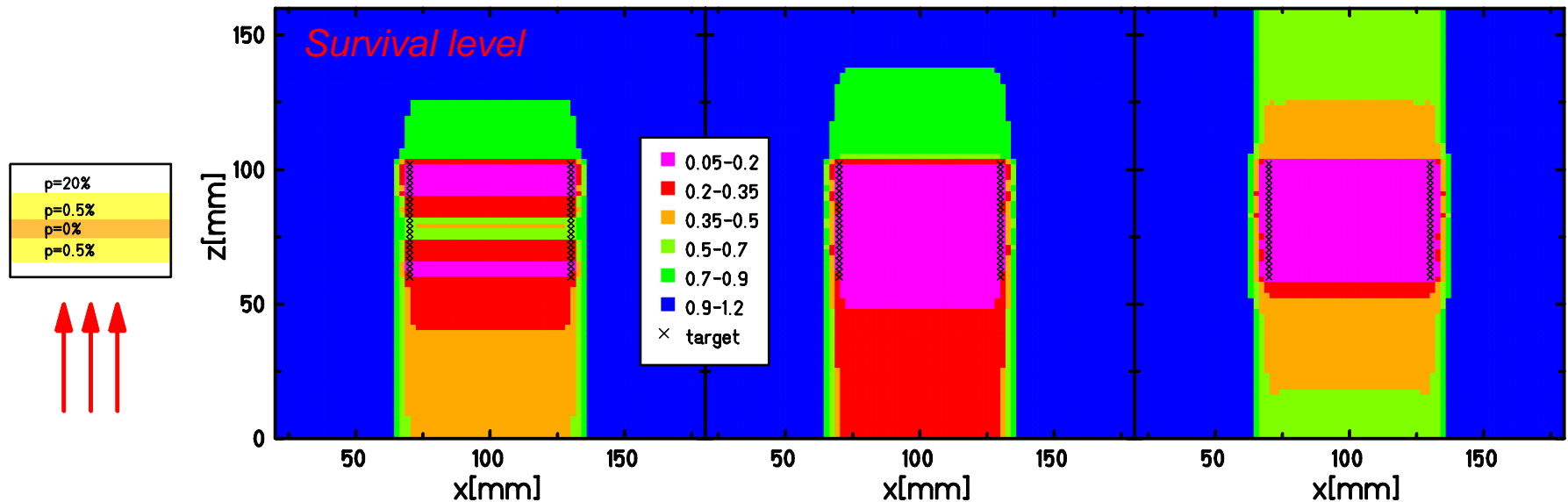


Optimized plans with dose compensation

• normoxic plan

• OER-optimized, 1Field

• OER-optimized, 2 fields
Multiple Field Optimization



Optimization “decides” contribution of different fields according to hypoxia distribution

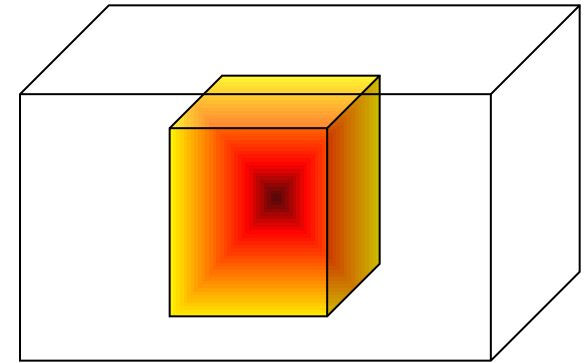
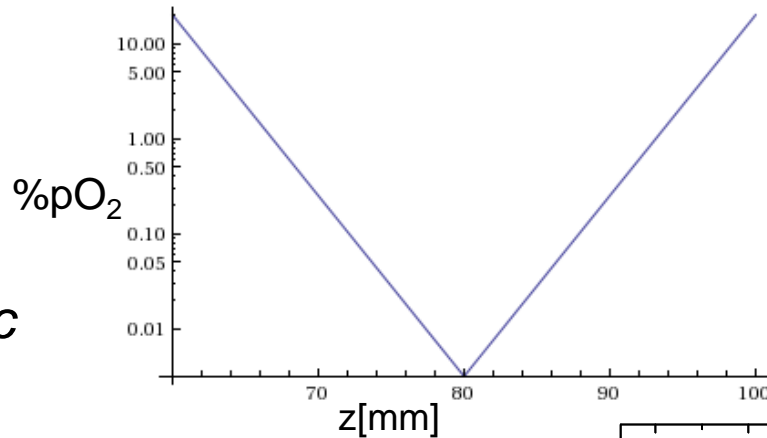
Scifoni et al. PMB 2013

•10.02.14

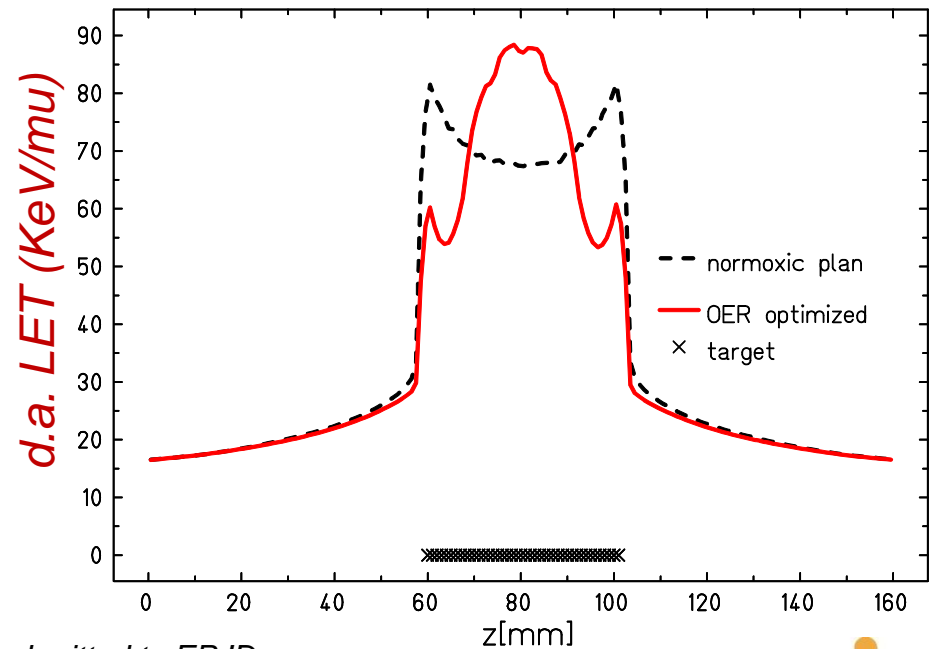
•E. Scifoni - ICTR-PHE 2014

Realistic pO₂ distributions

Smooth pO₂ gradient from a central anoxic core



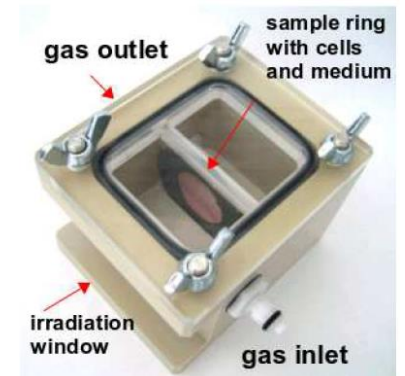
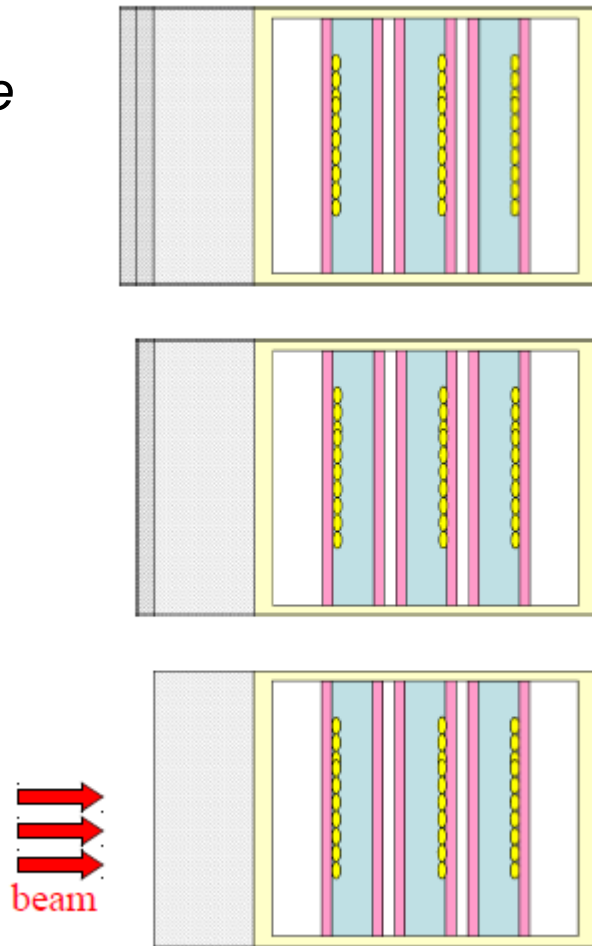
LET distribution automatically adjusted from the optimization through the "hypoxic gradients" to the oxygen distribution



Krämer, Scifoni, Schmitz, Sokol, Durante, *submitted to EPJD*

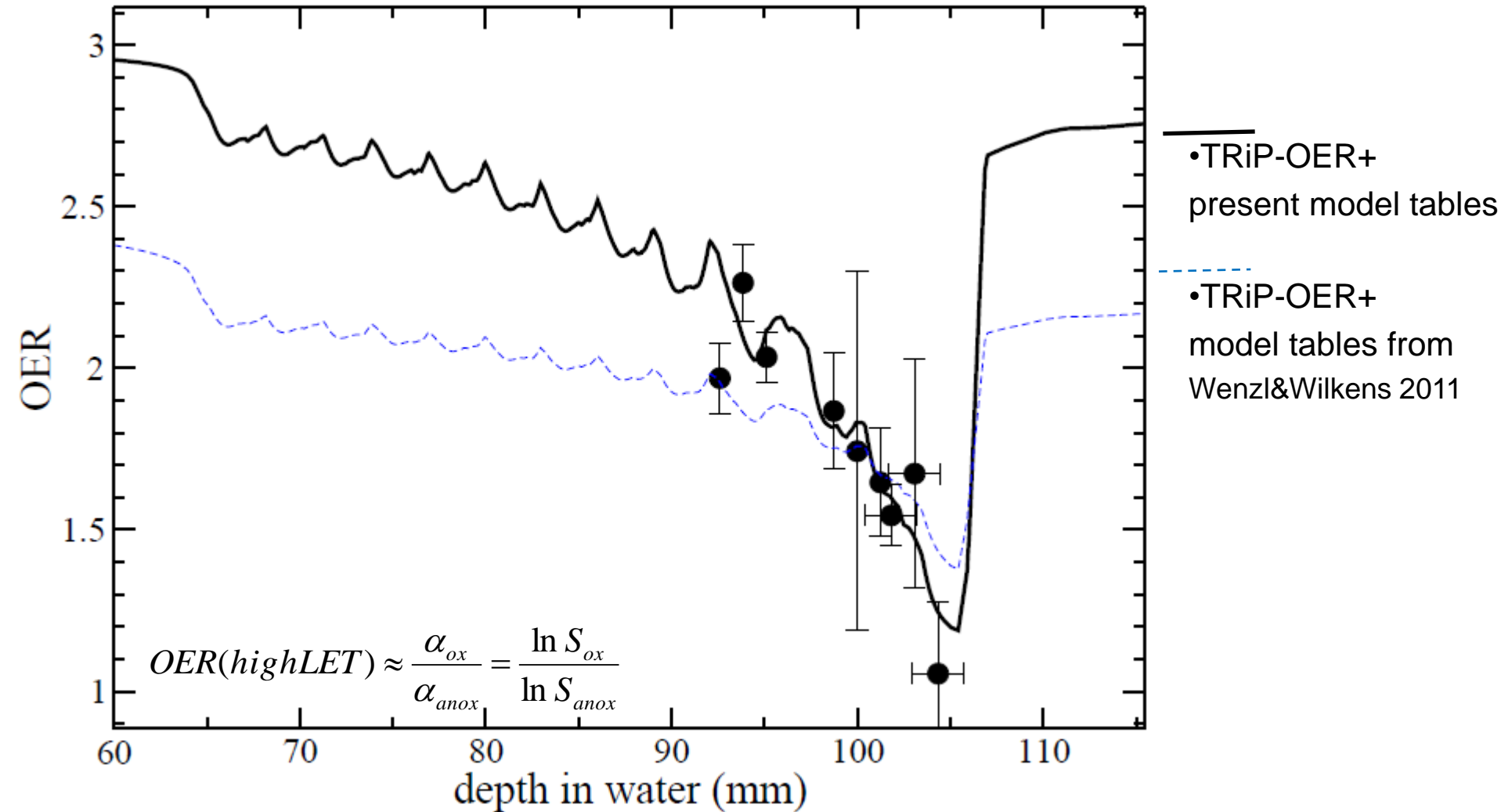
Experimental verification

- *Densely sampling the last cm, zooming on the region of maximum LET effect*



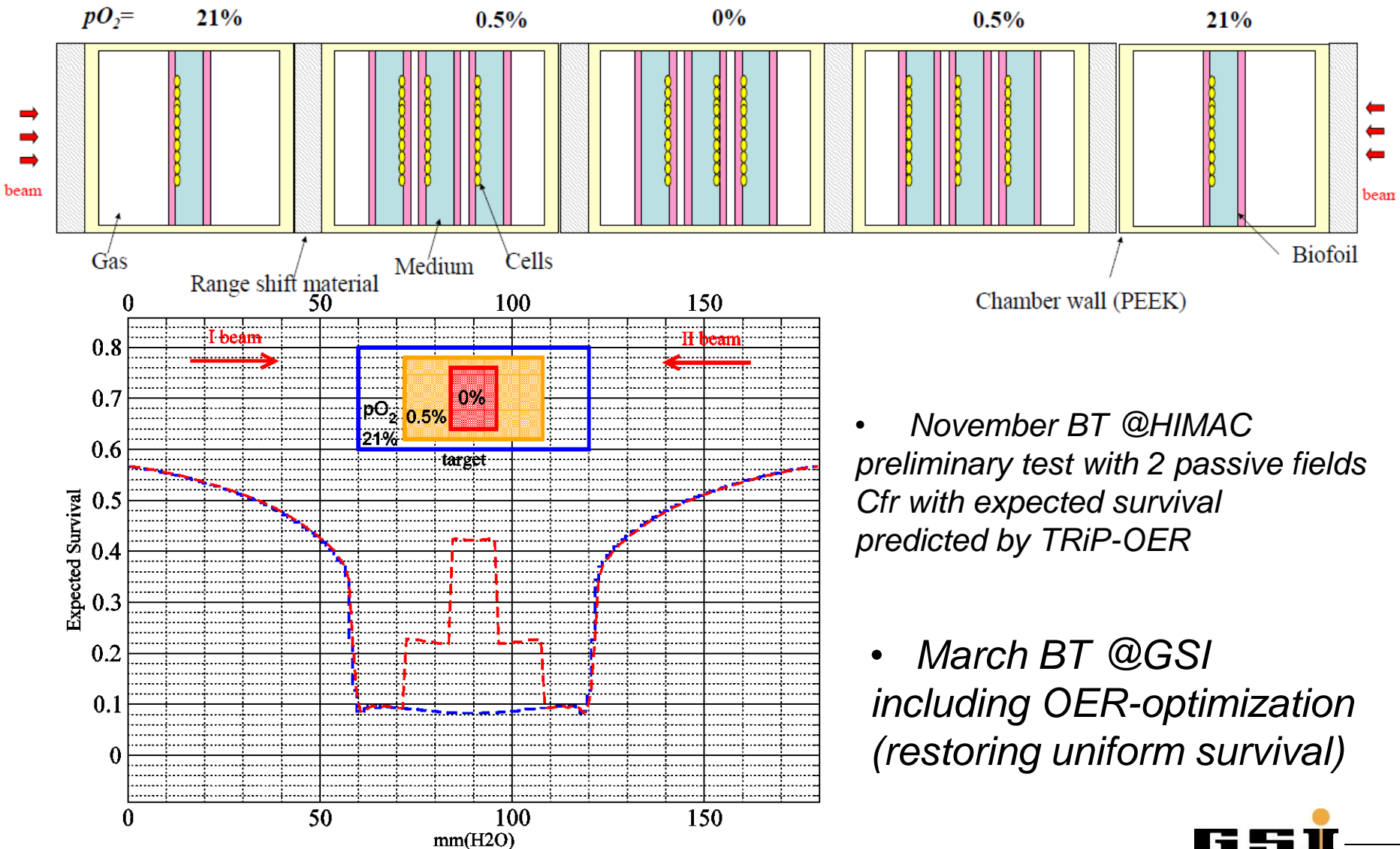
- 1) $p=0$
- 2) Normoxic

OER(z), experimental



Extended target irradiation

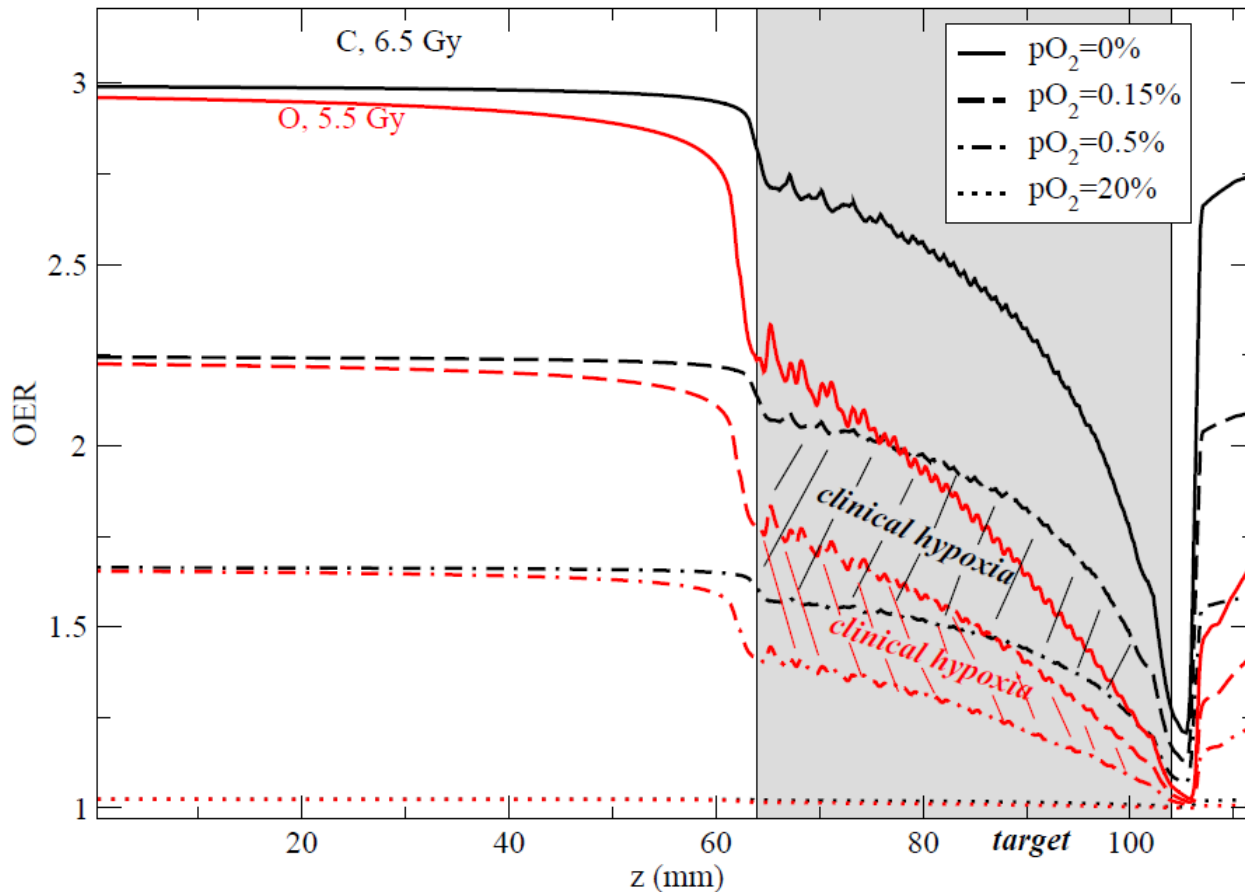
- validation of TRiP-OER, 2 Fields, 3 different O_2



- November BT @HIMAC preliminary test with 2 passive fields Cfr with expected survival predicted by TRiP-OER

- March BT @GSI including OER-optimization (restoring uniform survival)

Using different ions: Oxygen vs Carbon beam

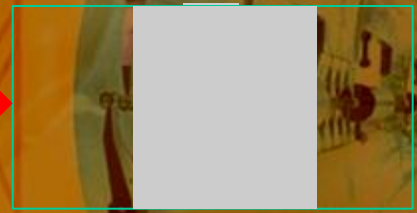


- C, O, p and soon He available @HIT
- Joining OER driven and Multiion modality in next TRiP release

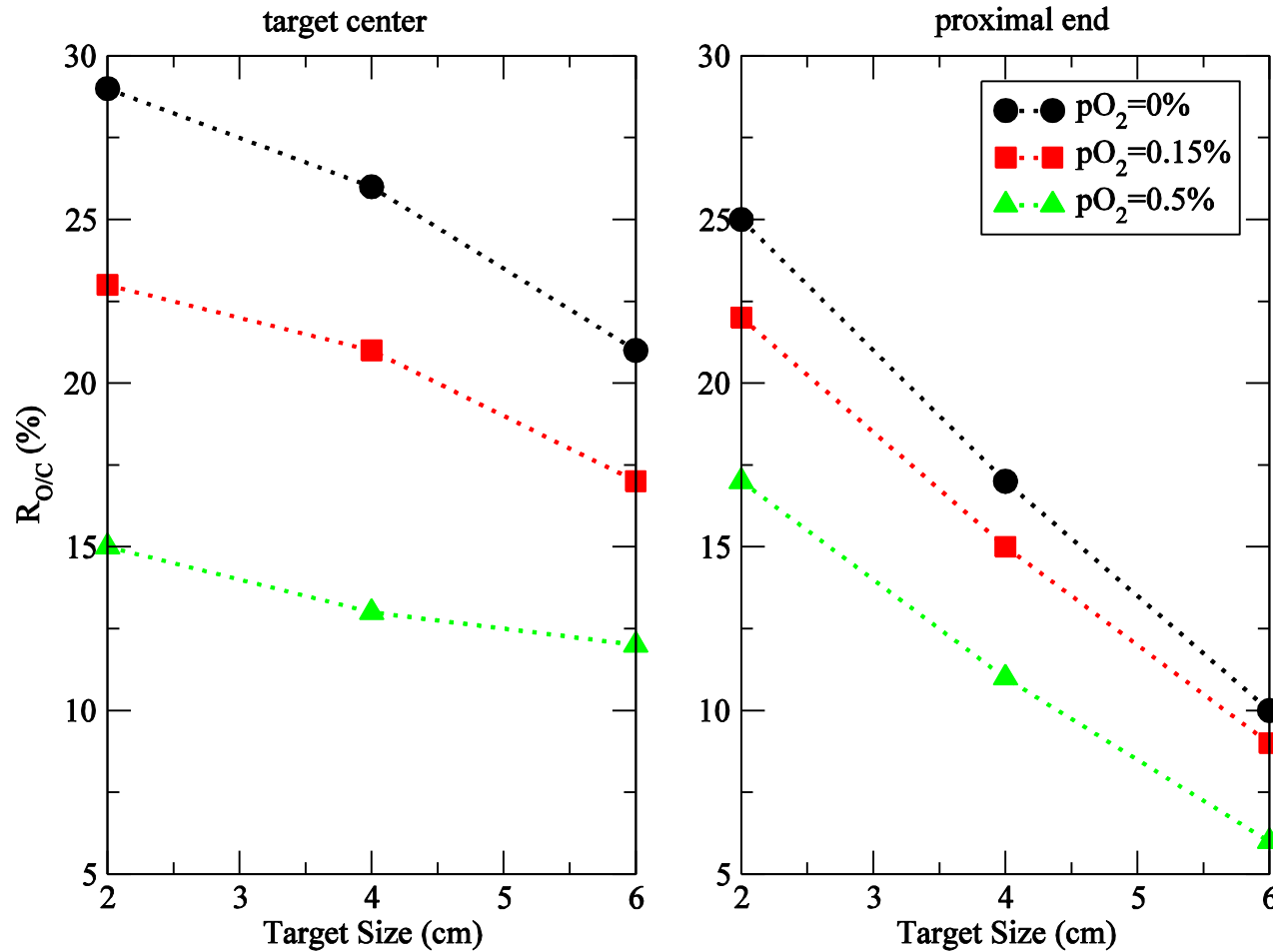
Krämer, Scifoni, Waelzlein, Durante JPCS 2012

Scifoni et al PMB 2013

O vs C for different tumor sizes



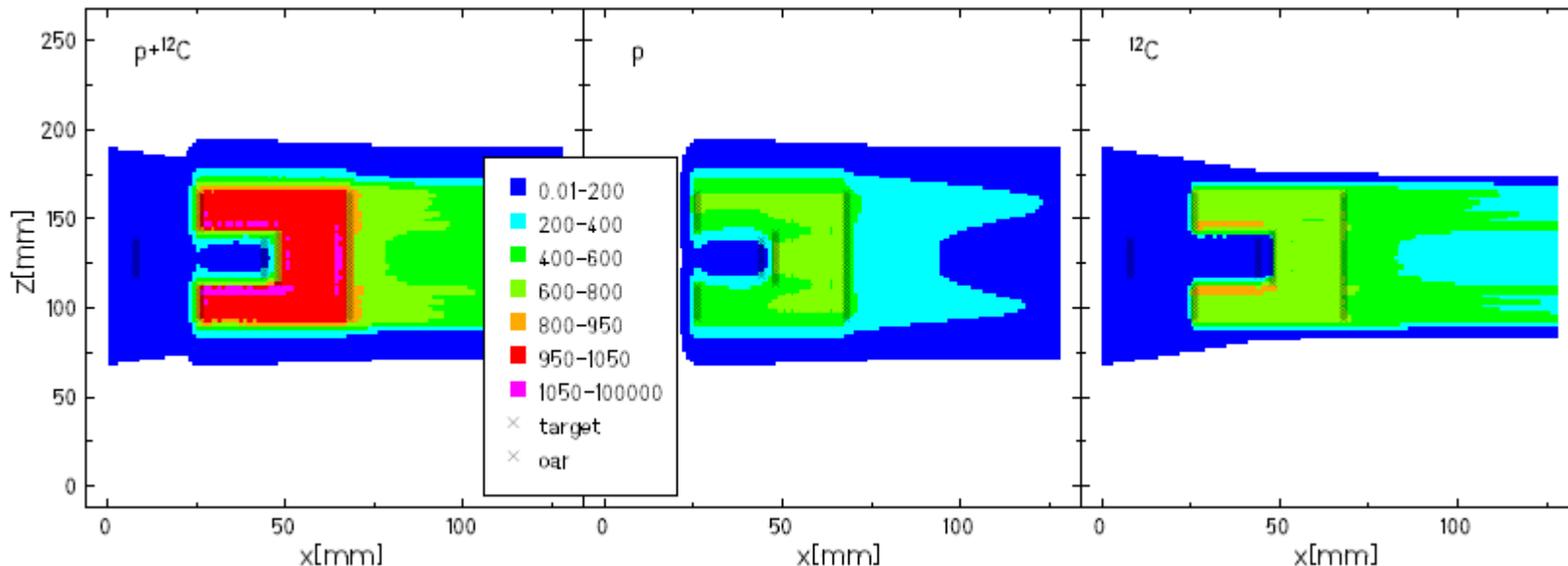
Relative OER reduction $R_{O/C} = (OER_C - OER_O)/OER_C$



Multi-ion treatment planning

- **TRiP version for a biologically optimised multi-ion treatment plan**
- TPS enhanced to handle more than one ion beam modality at once (e.g. $^{12}\text{C}+^{16}\text{O}$, $\text{p}+^{12}\text{C}$)

OAR dose constraint prefers ^{12}C over ^1H at the edges



Krämer, Scifoni, Schmitz, Sokol, Durante, *submitted to EPJD*

Summary

- Intratumor Heterogeneity (hypoxia) can be tackled from particle therapy
- First TPS for particles implemented to account for OER and to optimize on iso-survival differently oxygenated areas: *Killing optimization*
- LET redistribution and dose compensation intrinsic by the multiple field optimization
- Carbon Ion beams can be optimized for hypoxic tumors – moderate effect
- Use of larger LET ions (^{16}O) quantitatively assessed and encouraged for boosts or multimodal plans
- Experimental biological dosimetry on extended target irradiation returns agreement with TRiP98 OER predictions

WIP / Outlook

- Tests with clinical PET data (coll. with Aarhus)
- OER optimized + multi-ion
- Acute/Chronic hypoxia distinction
- Experimental verification of dose compensation and refined optimization approaches, also for O and mixed beam
- Impact of fractionation and reoxygenation (especially for SBRT and HDSF regimes)
- Application to other types of intratumour heterogeneity

Thanks to

- Michael Kraemer, Walter Tinganelli, Marco Durante

and to

- W. Kraft-Weyrather, A. Maier, M. Horcicka, T. Friedrich, M. Scholz (GSI)
- Y. Furusawa, R. Hirayama, M. Ozaki (NIRS)
- N. Bassler, J. Petersen, J. Toftegaard (Aarhus)

And...



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