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To promote excellency in patient care and innovative proton treatment

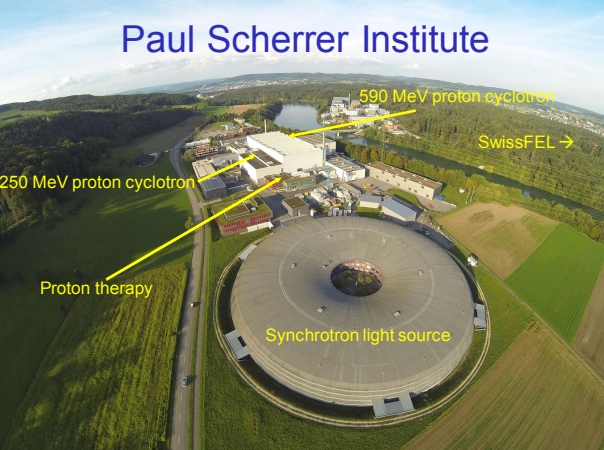
Therapy Control and Patient Safety
Martin Grossmann
 Centre for Proton Therapy, Paul Scherrer Institute, Villigen, Switzerland

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Overview

- Protontherapy @ PSI
- Controls and Safety
 - Concept
 - Implementation
- Patient Safety System

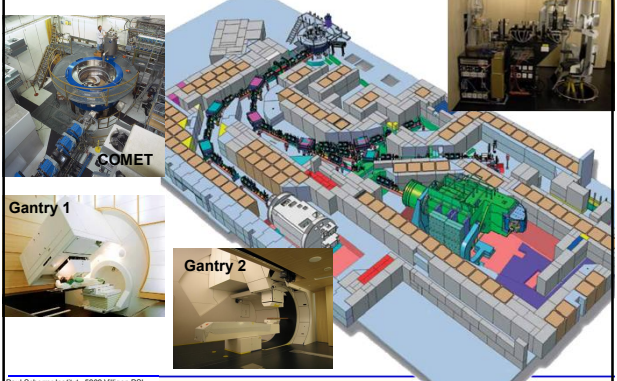
Paul Scherrer Institute



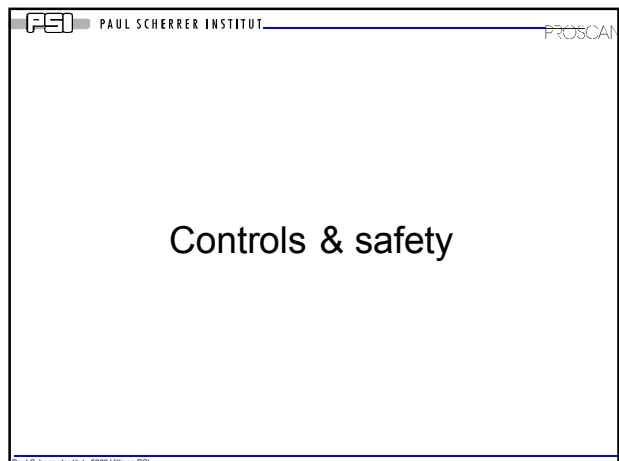
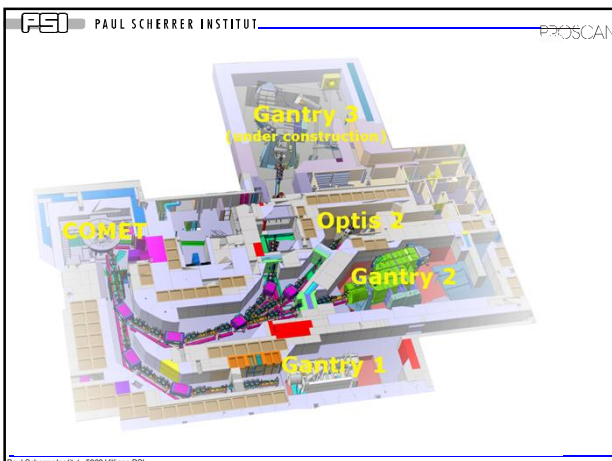
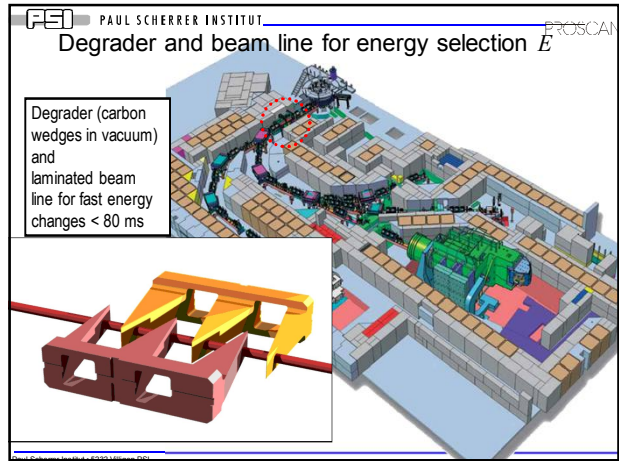
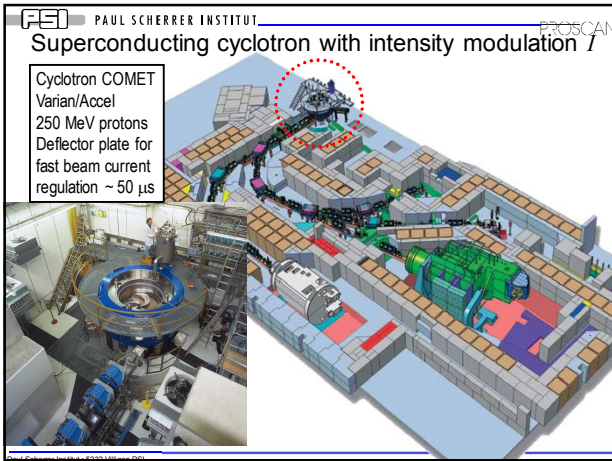
590 MeV proton cyclotron
 SwissFEL →
 250 MeV proton cyclotron
 Proton therapy
 Synchrotron light source

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PROScan facility at PSI



OPTIS2
 COMET
 Gantry 1
 Gantry 2



PSI's concept for patient safety



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<p>Summary</p> <p>The general focus of this document is a safety assessment of the proton radiation hazards to a patient due to the proton therapy, and to ensure that the treatment is correctly delivered in the Gantry 2 area of the Center for Proton Therapy at the Paul Scherrer Institute.</p> <p>This report on safety measures, comprising one of several safety aspects as covered by the "Gantry 2 Sicherheitsbericht", follows the structure and principles of risk reduction as used in the reports of Gantry 1 and OPT1/2.</p> <p>Based on this report, with the realization of the measures, and with the quality assurance program in place, we consider the treatment with protons in the Gantry 2 area to be both safe and efficient.</p>		

- Definition of safety goals
- Description of technical/operational measures

#1: NO RADIATION ACCIDENT

- No serious overdose should be delivered to the patient
- Serious: >5% of total prescribed dose (60 Gy), i.e. 3 Gy

#2: NO ERROR IN THE DELIVERED DOSE

- No incorrect dose should be delivered
- Prevent errors (hot/cold spots) in dose distribution of >2% of planned field dose

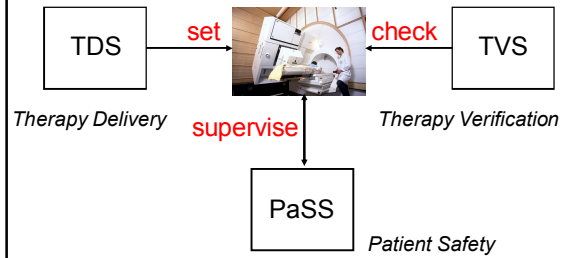
#3: NO ERROR IN DOSE POSITION

- The dose must be applied at the correct position
- Prevent errors in a single spot delivery > ± 1mm in lateral direction and depth

#4: DELIVERED DOSE AND POSITION MUST BE KNOWN AT ALL TIMES

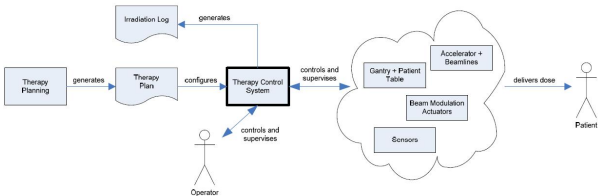
- If treatment is interrupted, the dose and position already applied must be known in order to allow correct continuation after interruption

Controls & Safety Concept



The Therapy Control System's Task

- The TCS
 - Controls the dose delivery
 - Is configured with the Therapy Plan generated by the Therapy Planning System
 - Controls and supervises the facility equipment to deliver the dose to the patient according to the plan
 - Generates a log of what it finally did with the patient



The Need for Speed...

- Minimize dead time between spots
 - PSI spot scanning: increase of dead-time by only 1 ms increases the total irradiation time by about 5 %...
- In safety relevant control system design, the speed requirement is normally put behind safety...

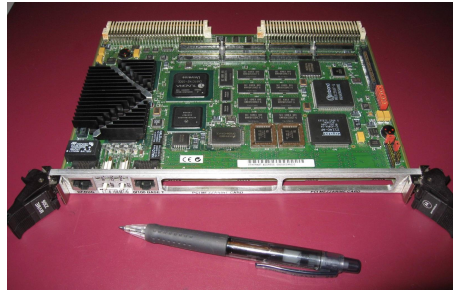
BUT

... A perfectly safe but slow scanning control system will be as useless as an unsafe fast one!

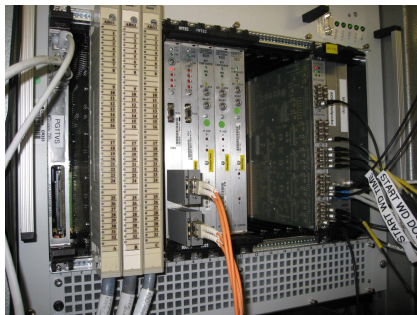
The Need for Speed...

- Our choices for the control systems:
 - The irradiation is controlled by embedded VME systems with Motorola PPC running the VxWorks RTOS
 - Subsystem communication with digital IOs, fast serial links (over optical fibres), reflective memories. Ethernet only when time does not matter
 - Time critical functions directly implemented in custom FPGA or DSP based subsystems
 - Linux PCs as operator workstations

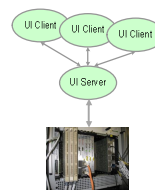
The Need for Speed... embedded VME Single Board Computer



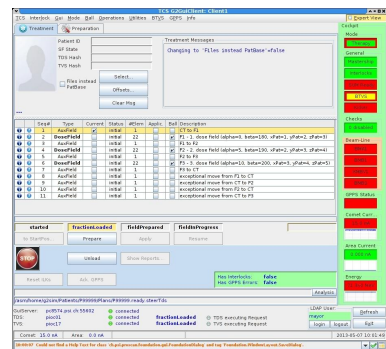
The Need for Speed... VME crate (TVS) with connections to sensors, actuators, ...



Graphical User Interface



- client – server application
- implemented in Java

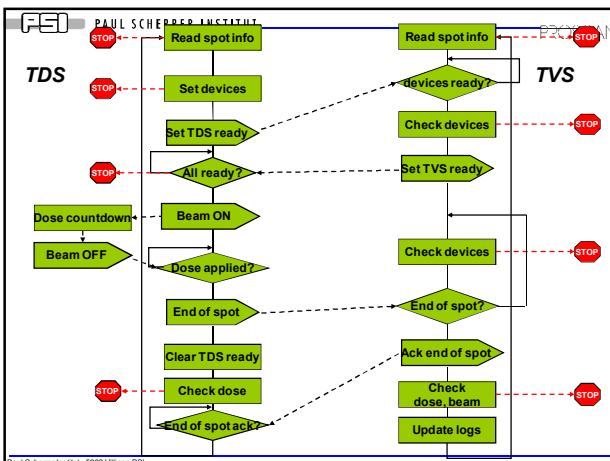




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Spot Scanning Control Loop

- TDS & TVS walk through therapy plan:
 - TDS sets devices, TVS checks devices
 - when all devices ready: beam on!
 - spot termination by dose counter firmware
 - check correct application after each spot
 - write logs
 - proceed to next spot



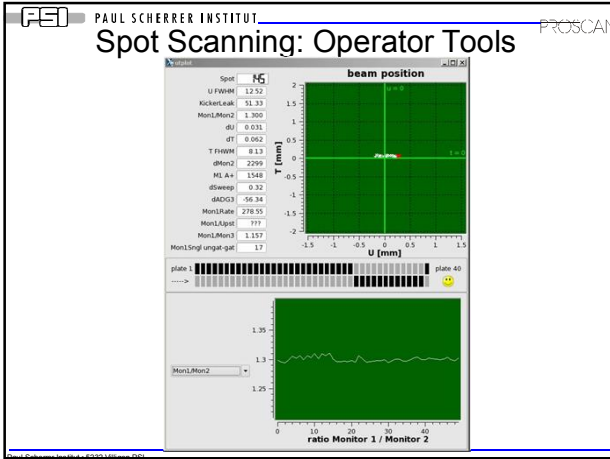
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Spot Scanning: Operator Tools

Spot 2035 / P08464_CT0_T0_F0_D45.SCO / WED JAN 07 14:21:18 2009

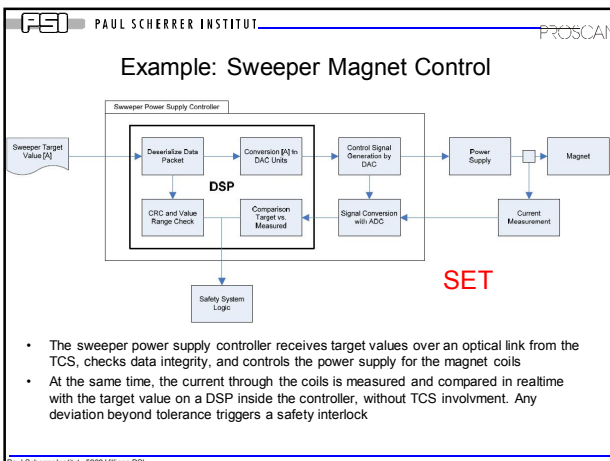
Check ID	Time [ddMM]	SQL	TOL	Reference	Result
SYNC	0.000	2	outer ready		OK
Stopper	0.000	2035	2035	500	-27 -3.1%
ADCS	0.000	8971	6867	348	-4 -1.1%
RangeShifter	0.000	24	24	0	OK
X	0.002	-41497	-41500	1000	3 0.1%
Y	0.002	112425	112420	1000	74 0.7%
Z	0.002	662852	662789	1000	237.24 24.1%
A	0.002	-89894	-89890	500	16 3.1%
B	0.002	93	0	500	89.18 18.0%
HW Spotter	0.002	2035	2035	0	OK
SYNC	0.004	5	TVS ready		OK
SYNC	0.004	4	beam is on		OK
SYNC	0.004	6	clear spot flag (allowed 5 frames)		OK
HW Spotter	0.004	2035	2035	0	OK
Stopper	0.004	2035	2035	500	-24 -4.8%
ADCS	0.004	8971	6867	348	-4 -1.1%
RangeShifter	0.004	24	24	0	OK
X	0.004	-41497	-41500	1000	3 0.1%
Y	0.004	112425	112420	1000	74 0.7%
Z	0.004	662852	662789	1000	237.24 24.1%
A	0.004	-89894	-89890	500	16 3.1%
B	0.004	93	0	500	89.18 18.0%
SYNC	0.004	5	beam is off		OK
SYNC	0.004	8	end of spot from TVS		OK
Ratio MMD	0.004	372	393	0	-21.36 5%
Weight 3	0.004	-620	-495	0	24.27 5%
U.Center	0.006	-12249	-12718	1000	470 31.1%
U.DoseM	0.006	10204	10204	0	100 0%
U.Dose	0.006	2000	22863	183	-2.1%
T.Center	0.006	-3931	-3931	1000	100 0%
TPVHM	0.006	7833	8804	400	-26.124 6%
T.Dose	0.006	1818	21272	24	-11.1%
WD.Dose	0.006	34544	34550	2455	-8 0.1%
WD.Time	0.006	398	398	398	-3 -1%
SYNC	0.006	7	start DoseDataLog		OK
SYNC	0.006	8	end DoseDataLog		OK

peering into the control loop ...



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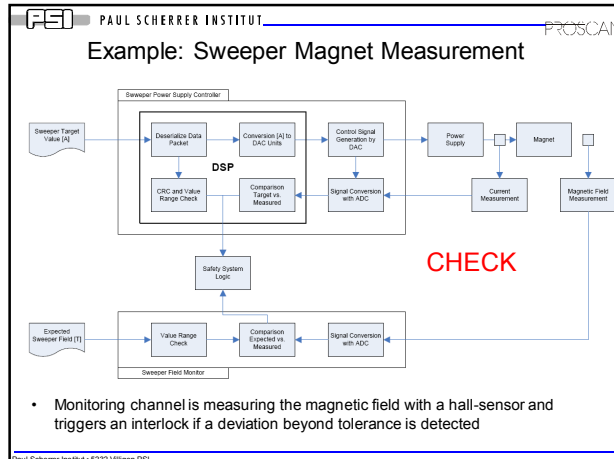
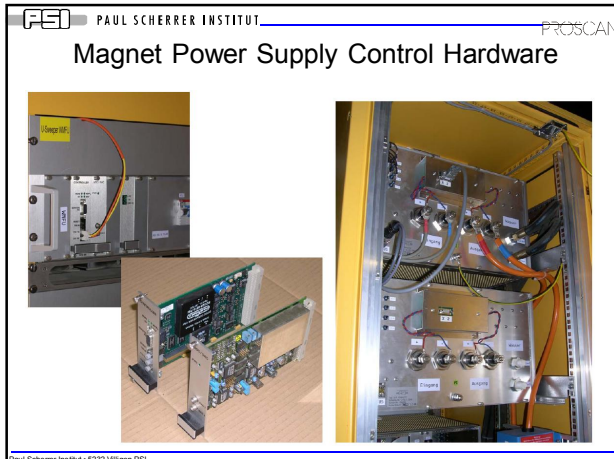
Safe Setting – Redundant Checking – Independent Supervision



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Magnet Power Supply Control Hardware

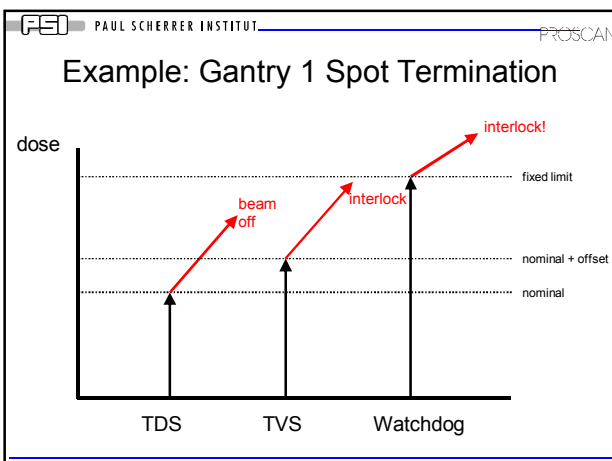
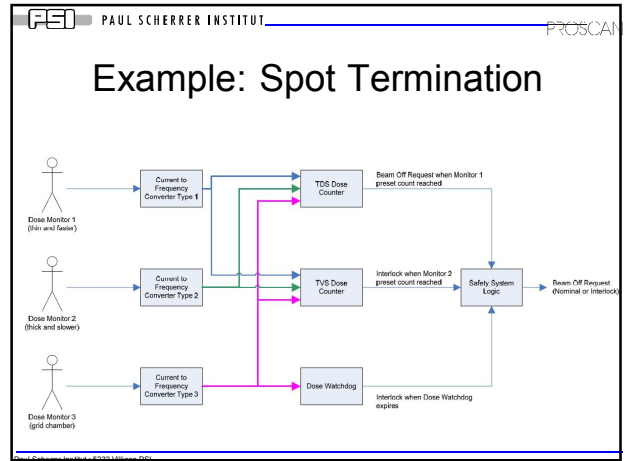
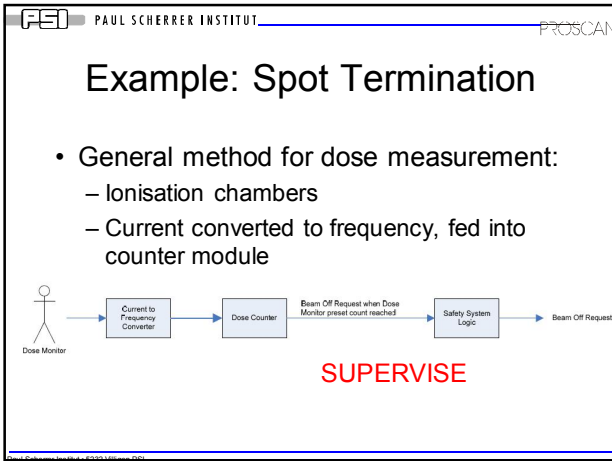
- VME board with 4 Industry-Pack Slots and onboard DSP
- Industry-Packs with FPGA implementing communication interface to power supply
- VME transition module with optical transceivers for data transmission to power supply
- Digitally controlled power-supplies (developped by PSI)



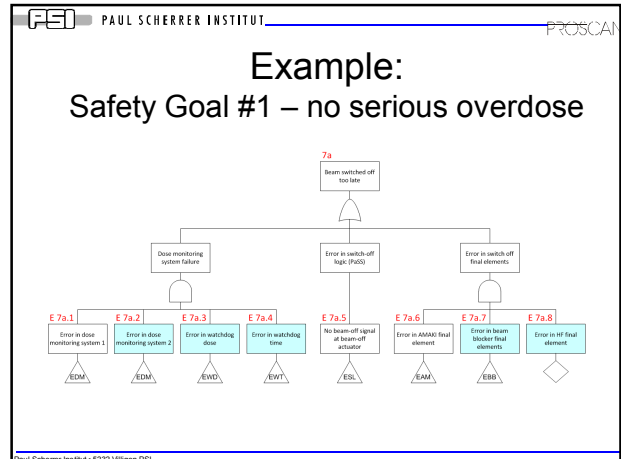
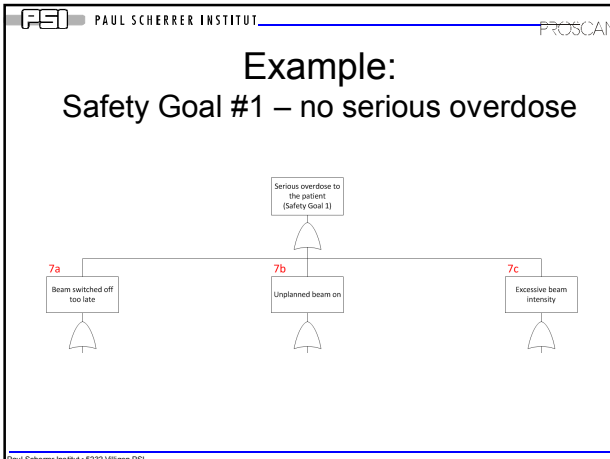
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Actuation and Monitoring: Implementation

Control Function	TDS Actuation Channel	TVS Monitoring Channel
Beam Position	Sweeper Magnet controlled by DSP based subsystem. Continuous monitoring of power supply setting and state	Hall sensor measuring sweeper magnetic field monitored by TVS. Ionisation strip chamber measuring beam position at exit of nozzle. Monitored by TVS
Beam Tune	Degrader and beamline control through Machine Control System (MCS). MCS implements full actuator supervision	Degrader position and bending magnet hall sensor data continuously monitored by DSP based subsystem
Range Modulation	Control of range-shifter with DSP based subsystem. State of single plates measured with optical sensors supervised continuously	Redundant optical sensors for each single plate. Monitored by TVS
Patient Position	Patient table and Gantry rotation through the Gantry and Patient Positioning System (GPPS). GPPS implements full actuator supervision as well as collision protection	Absolute position encoders and end-switches monitored by TVS



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- ## Formal Risk Analysis
- Fault Trees:
 - Start from safety goals
 - Imagine what can go wrong
 - Define measure to reduce associated risks
 - Come up with redundant ways to detect failures and avoid consequences
 - Technical and Operational Measures (TM, OM)
 - Estimate risk before and after applying the measures
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- ### Example: Safety Goal #1 – no serious overdose
- E 7a.1** Error in Dose Monitoring System 1
 - TM 7a.1.1** A beam *switch-off* is activated upon saturation of the Monitor.
 - TM 7a.1.2** The high-voltage supply to the Monitor is continuously monitored.
 - TM 7a.1.3** The monitor units are transmitted together with a heartbeat signal.
 - TM 7a.1.4** The dose is measured by two independent monitoring systems, connected to TDS and TVS, respectively.
 - TM 7a.1.5** In case a failure of the front-end electronics is detected, an interlock is generated.
 - OM 7a.1.1** The gain and offset of the front-end electronics of the Monitor is checked daily.

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Risk Categorization

Severity

Index	Severity	
1	Negligible:	little or no effect
2	Minor:	minor injury (benefit > harm)
3	Marginal:	moderate injury (benefit insecure)
4	Critical:	serious injury (harm > benefit)
5	Catastrophic:	death(s) or multiple serious injuries

Occurrence

Index	Occurrence		
1	Incredible:	< once in 100 years	< 1 / 1'800'000 fields
2	Improbable:	once in 10 years	1 / 180'000 fields
3	Remote:	once per year	1 / 18'000 fields
4	Occasional:	once per month	1 / 1'500 fields
5	Probable:	once per week	1 / 350 fields
6	Frequent:	once per day	1 / 70 fields

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Risk Categorization

		Severity				
		1 Negligible	1 Minor	3 Marginal	4 Critical	5 Catastrophic
Occurrence	6 Frequent	C	C	C	C	C
	5 Probable	B	C	C	C	C
	4 Occasional	A	B	C	C	C
	3 Remote	A	B	B	C	C
	2 Improbable	A	A	B	B	C
	1 Incredible	A	A	A	B	B

Risk Index	Acceptance Criteria
A	Acceptable without additional actions.
B	Acceptable. Risk reduction required if practicable with a reasonable effort (ALARP ¹⁵).
C	Unacceptable. Corrective actions must be taken.

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Risk Evaluation

E 7a.1 Error in Dose Monitoring System 1

The Dose Monitoring System 1 regularly terminates the spots with the beam *switch-off* control function. Any error in this system could result in the beam not being switched-off as intended at the end of the spot. The measures described in the following sections, are in place to detect errors in the Dose Monitoring System 1 and to ensure that, following an error, a safe state is regained.

Risk eval:	Before measures	Sev _{BP}	Occ _{BP}	Rl _{BP}	After measures	Sev _P	Occ _P	Rl _P
		3	5	C		2	1	A

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Patient Safety System PaSS



- Elements of (any) safety system:

sensors	—	logic	—	switch-off
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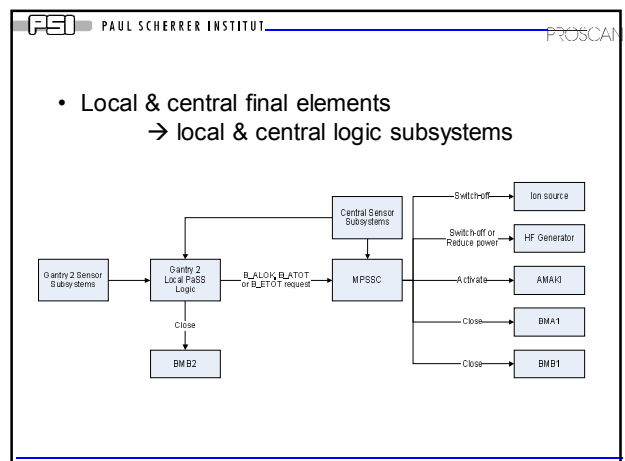
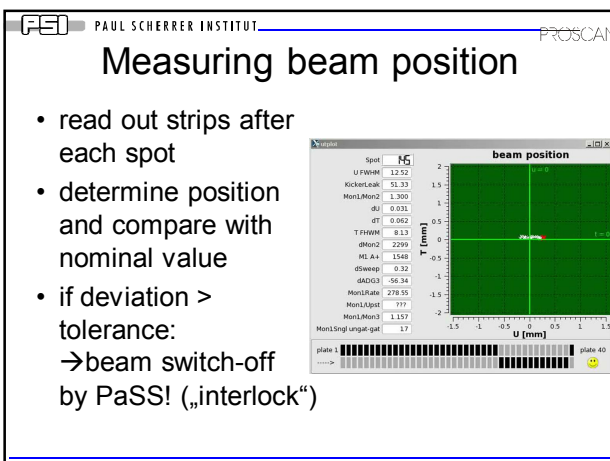
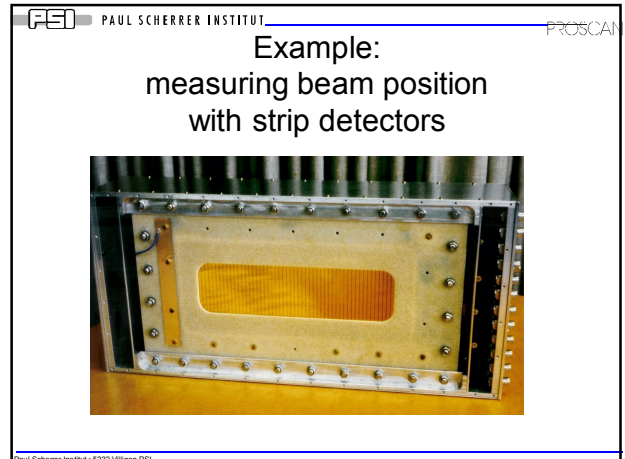
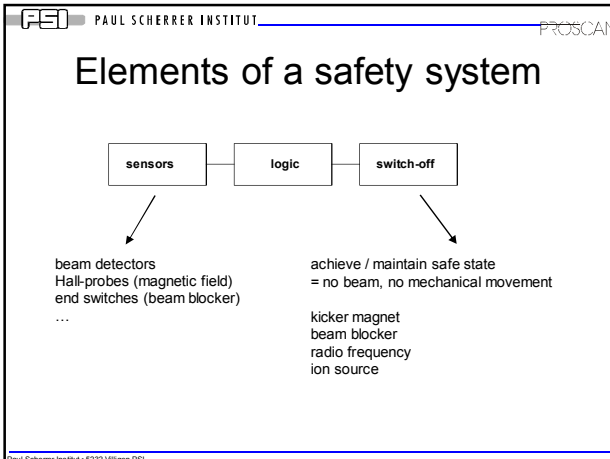
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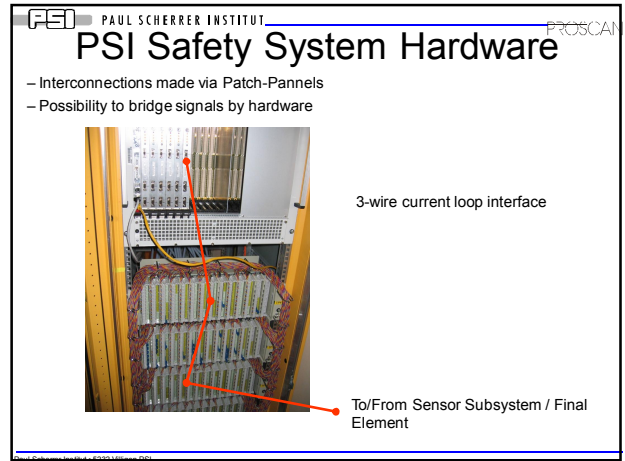
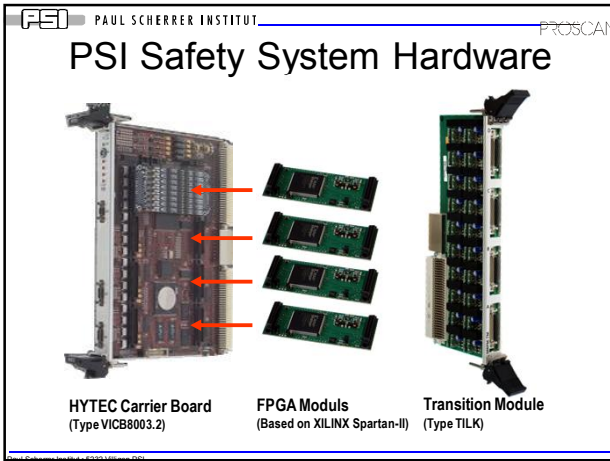
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Elements of a safety system

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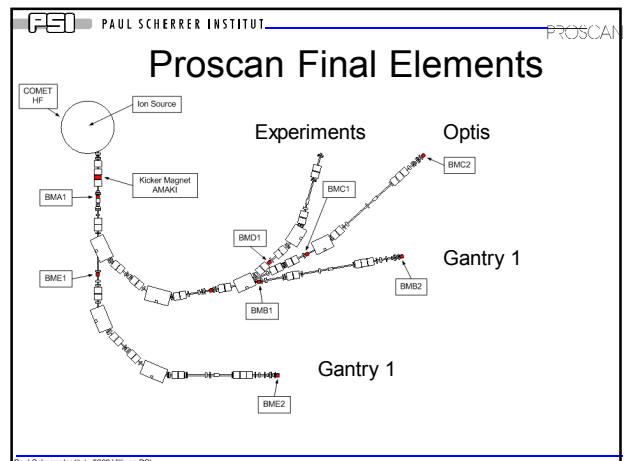




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How do we switch off the beam?

(«Final Elements»)



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Kicker magnet

- Magnet deflects beam out of axis
- Switch-off in $< 300 \mu\text{s}$

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High Frequency Generator

- 2 Levels:
- Reduce power to 20%
- De-energize completely
- Switch-off in $< 400 \mu\text{s}$

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Ion source

- De-energize ion source
- Switch-off in $< 20 \text{ms}$

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Fast Mechanical Stoppers

- copper block 5 cm length
- moved by pressured air & mechanical spring
- Switch-off in $< 100 \text{ms}$

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Slow Mechanical Stoppers

- Graphite blocks up to 25 cm
- moved by pressured air & gravity
- Switch-off in < 1 s

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3 Interlock-Levels

Final Element	Control Function	Safety Function		PaSS Components
BMB2		ALOK		local PaSS
AMAK1	beam off	ALOK	escalates	
BMB1			ATOT	MPSSC
BMA1				
HF reduced			escalates	
HF off			ETOT	E_OR
IQ off				

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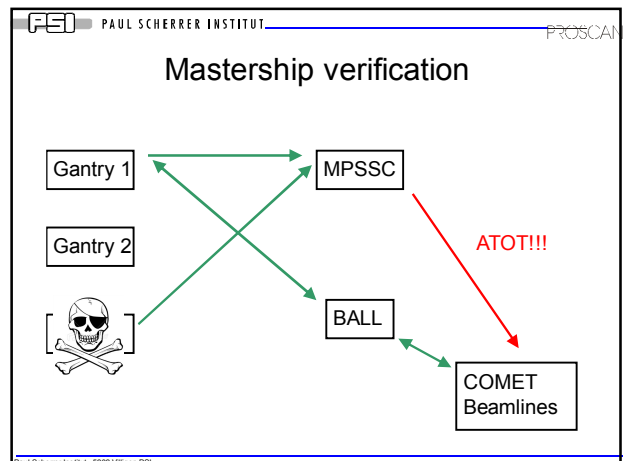
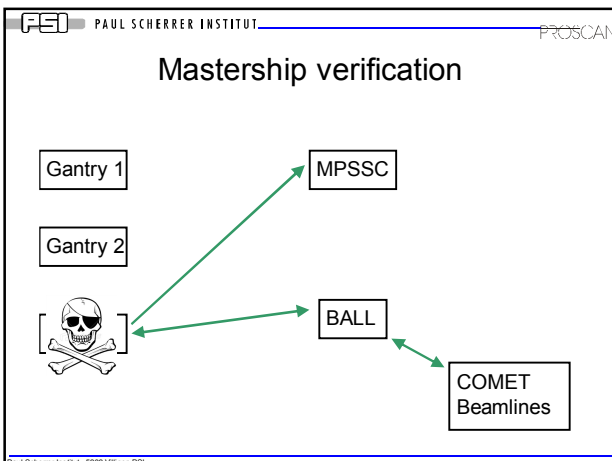
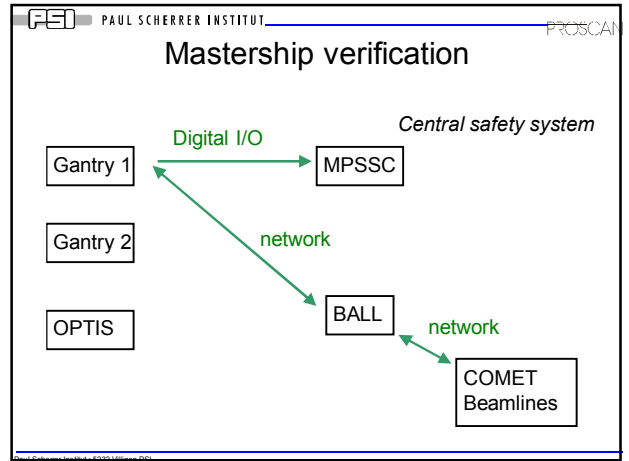
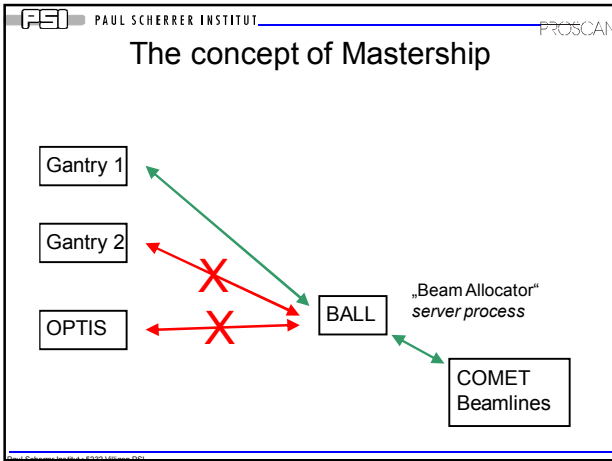
Recovery of failing beam switch off

Paragraph in this report	Failure of final element	Recovered by	Reaction time till next fastest final element reacts	Extra dose delivered using regular settings (60 Gy total dose; 6 Gy/s dose rate)		Extra dose delivered using hypofractionation (10 Gy total dose; 6 Gy/s dose rate)		Extra dose delivered if beam current excursion by factor 10 (100 → 1'000 nA)
			ms	Gy	% of total dose (60 Gy)	% of total dose (10 Gy)	% of total dose (60 Gy)	
10.4.1.1	AMAK1	HF reduced	0.70	0.0042	0.007	0.042	0.07	
10.4.1.2	AMAK1	HF off	0.98	0.006	0.01	0.06	0.1	
10.4.1.3	AMAK1 + HF reduced + HF off	BMB2	60	0.36	0.6	3.6	6.0	
10.4.1.4	AMAK1 + HF reduced + HF off + BMB2	BMB1, BMA1	1'000	6.0	10	60	100	

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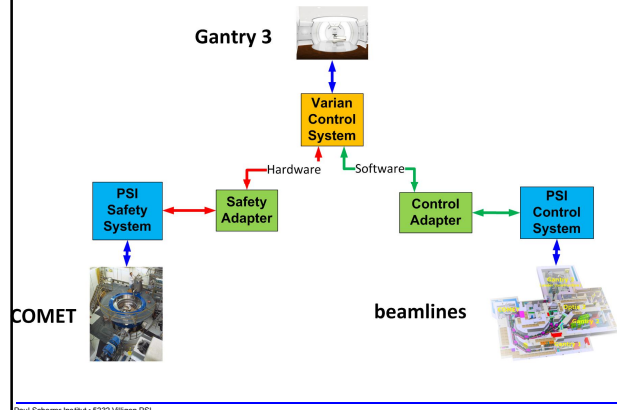
The concept of Mastership

- Control over central components (degrader, kicker magnet, ...) granted to 1 treatment area alone

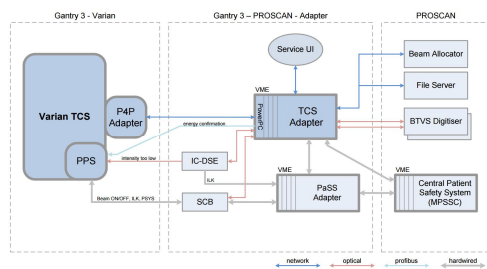


Integration of Gantry 3

- Commercial Gantry including Control System
- Still needs access to central elements
 - Setting beam energy & intensity
→ accelerator & beamline control
 - Beam on/off control → Kicker magnet
 - Interlocks → final elements
- Definition & Implementation of Interfaces
 - Software (network) and Hardware

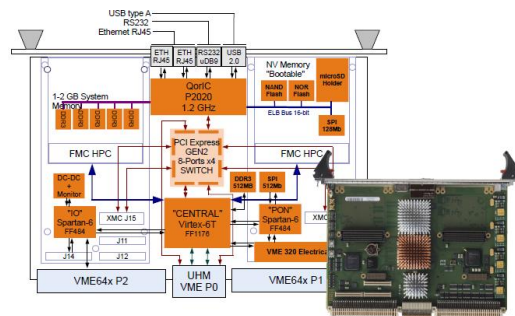


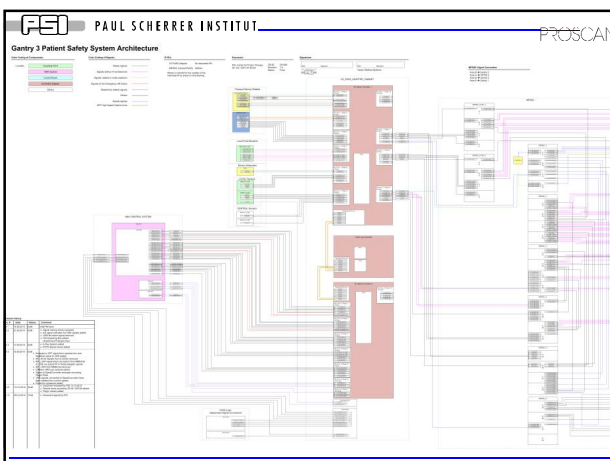
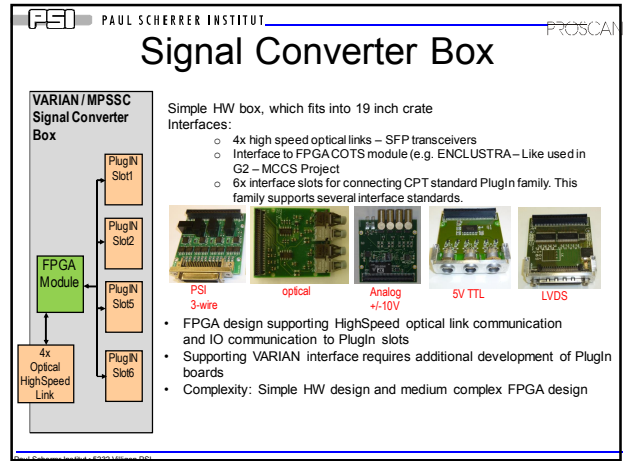
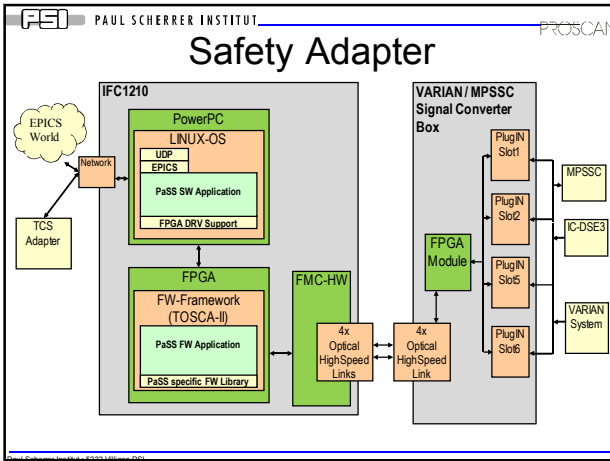
Control Adapter



Safety Adapter

- HW based on IFC1210 (www.ioxos.ch)





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If you think
proton therapy controls
is complicated...