



# Proton Minibeam Radiotherapy:

## Dose distribution and cell survival

Matthias Sammer, Christoph Greubel, Stefanie Girst,  
Judith Reindl, Christian Siebenwirth, Günther Dollinger

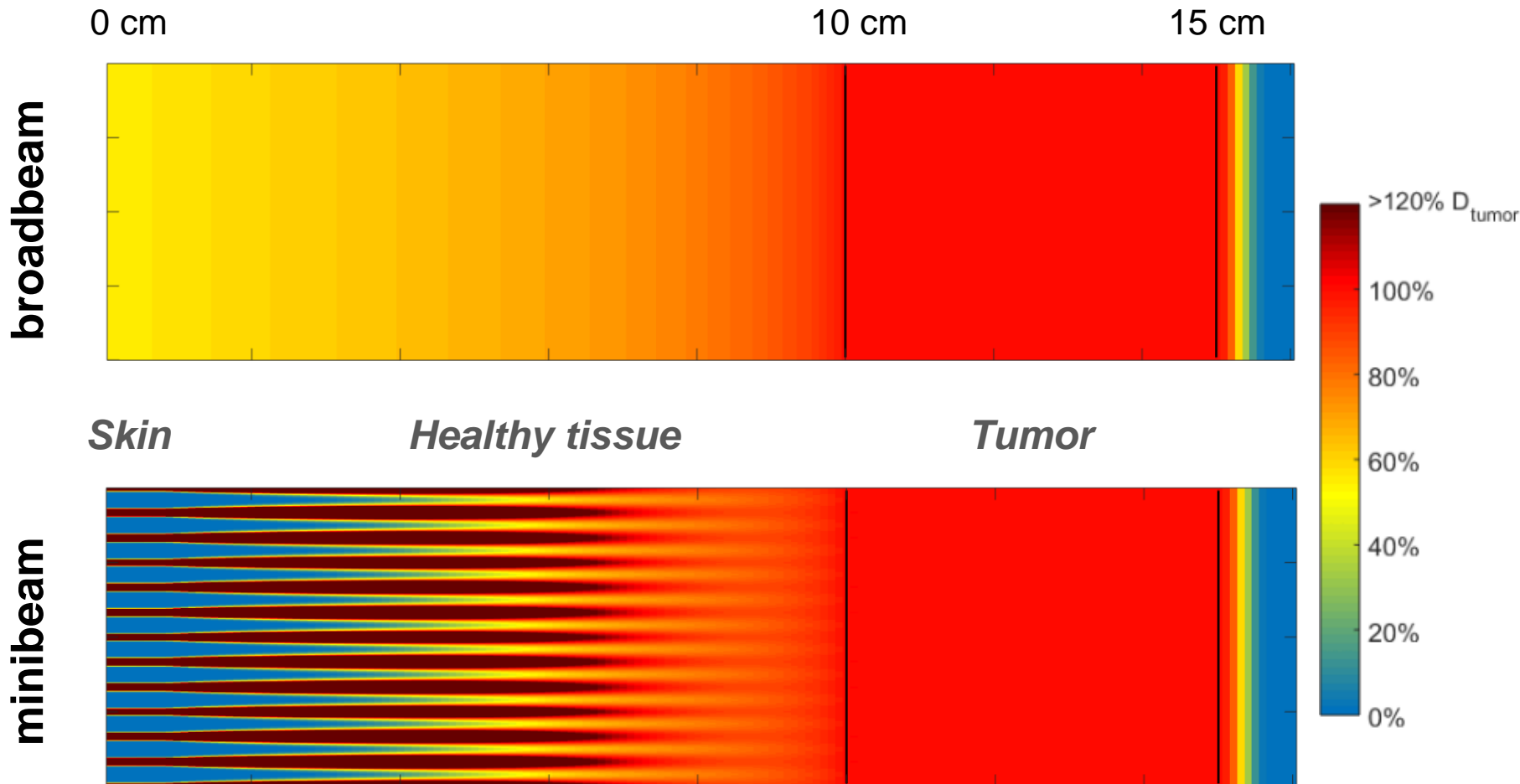
**UniBw München**

Thomas Schmid, Jan Wilkens, Olga Zlobinskaya,  
Dietrich Walsh, Katarina Ilicic

**Klinikum rechts der Isar, München**



# Concept of proton minibeam

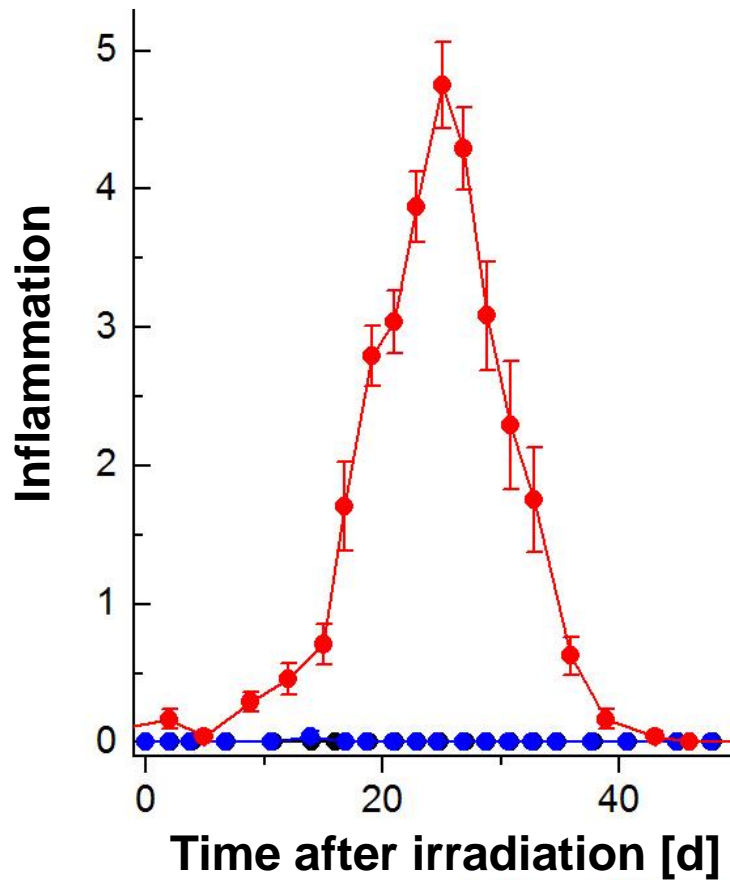


➤ Tissue sparing, reduced side effects

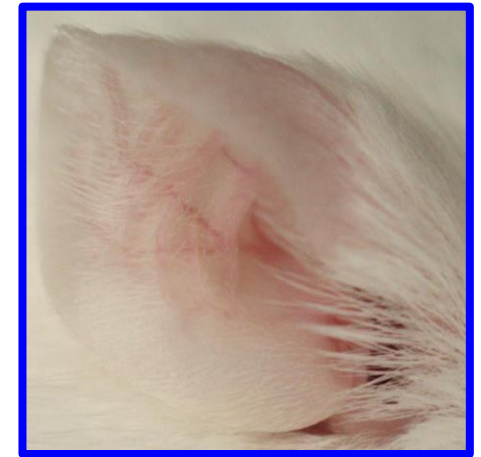
➤ normal tumor control

# Proton minibeam: tissue sparing

60 Gy average dose



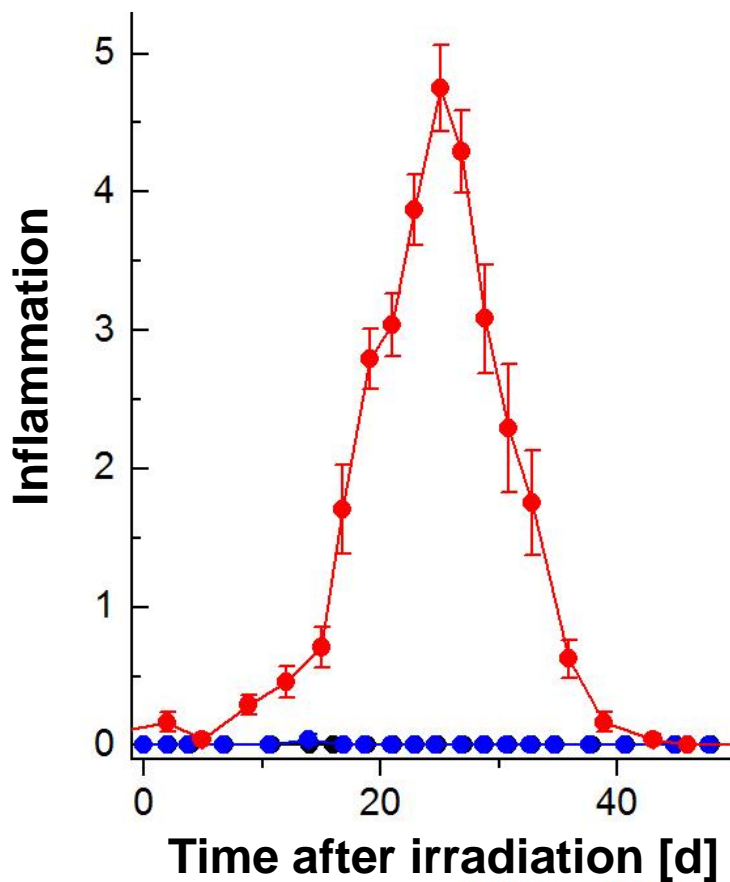
- broadbeam
- minibeam



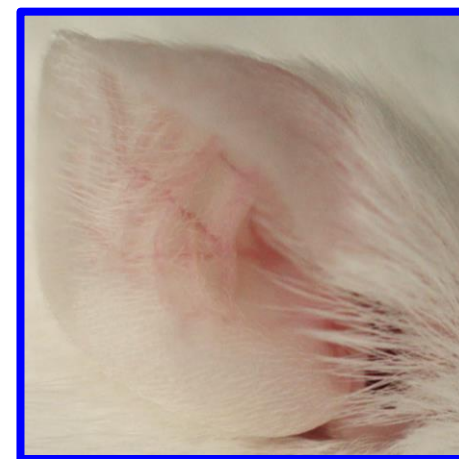
Day 25

# Proton minibeam: tissue sparing

60 Gy average dose



- broadbeam
- minibeam

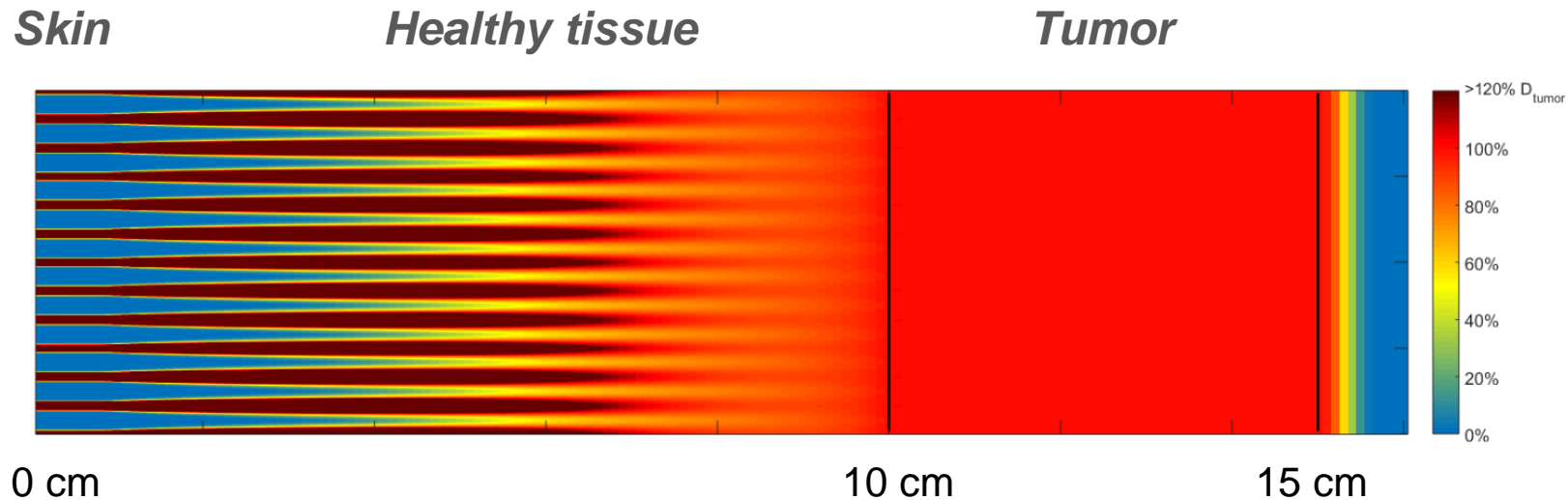


Day 25

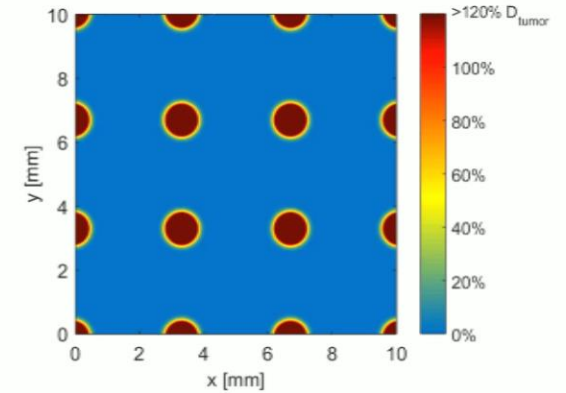
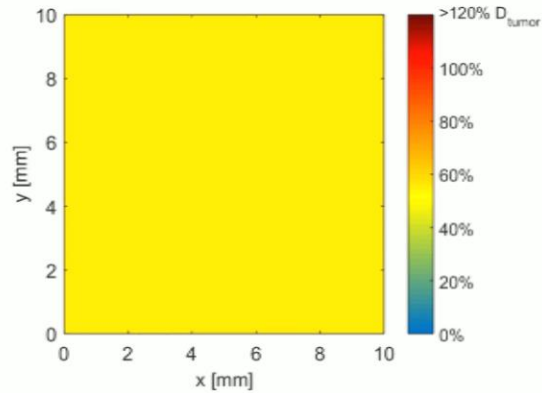
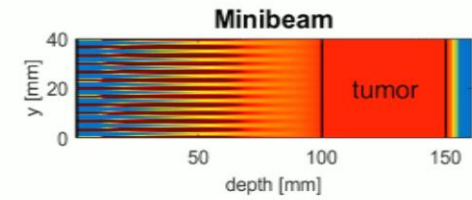
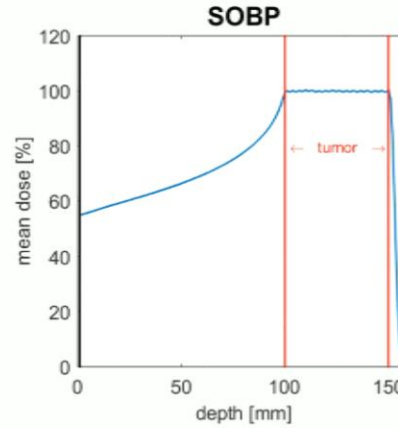
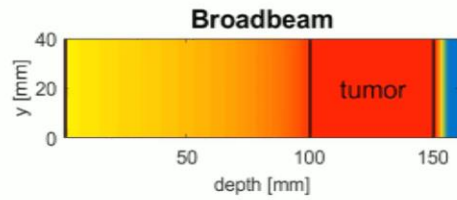
**For more details see Poster #79!**

# Broadbeam vs. minibeam

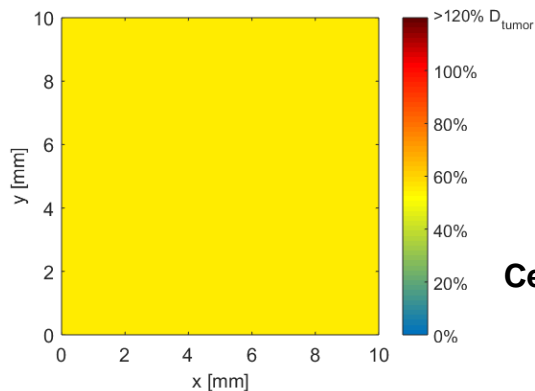
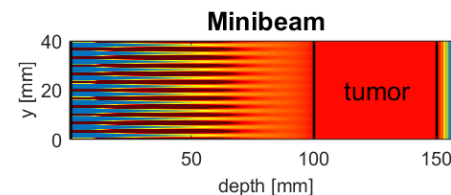
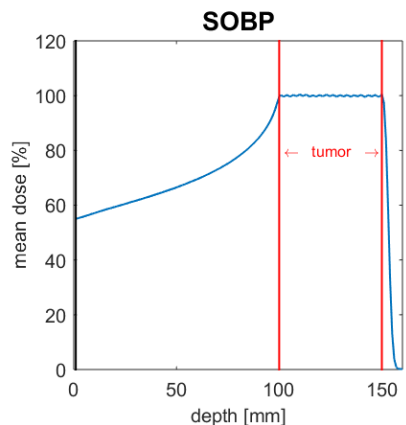
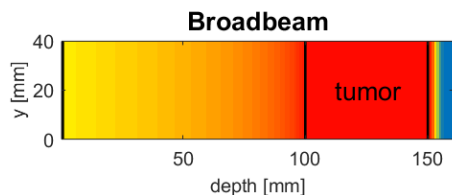
- 3D dose distribution
- Cell survival



# Dose distribution

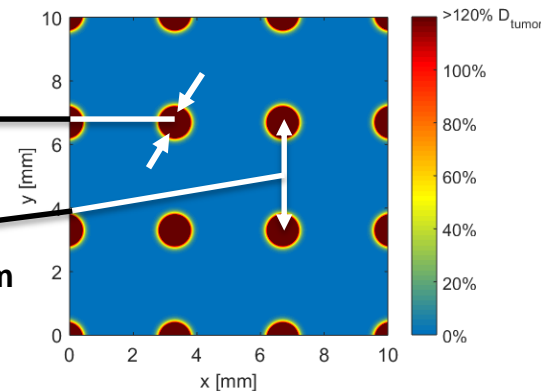


# Dose distribution (0 cm)



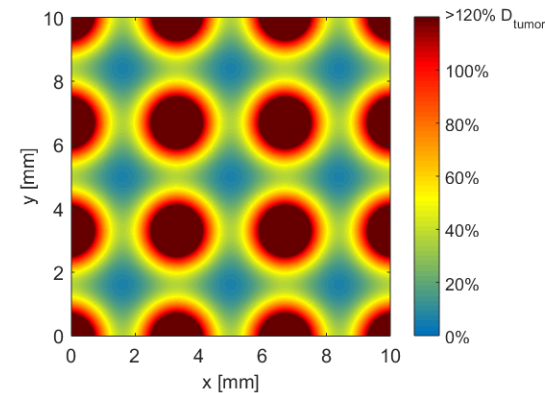
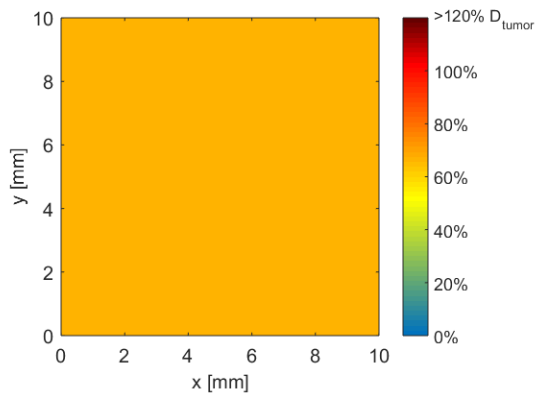
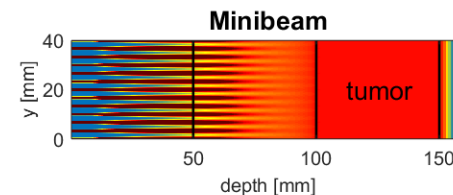
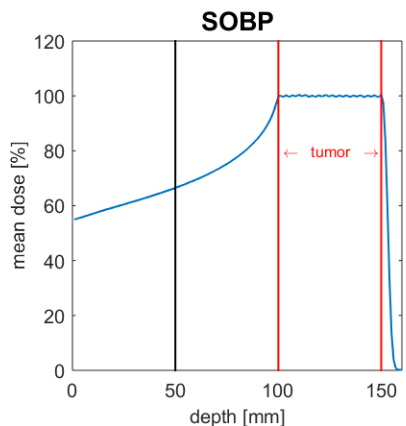
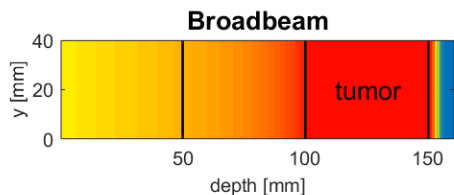
**Initial beamsize:  
~ 0.5 mm FWHM**

**Center-to-center distance: ~3.4 mm**



**85 % of area receive  $\leq 1\%$  of tumor dose**

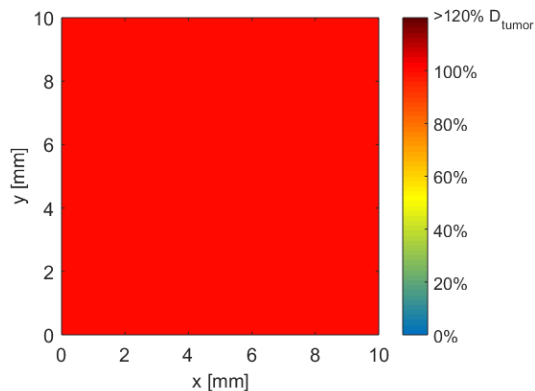
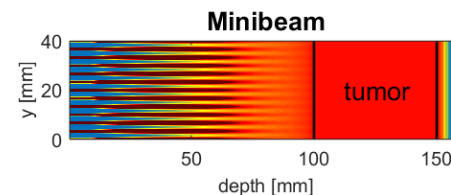
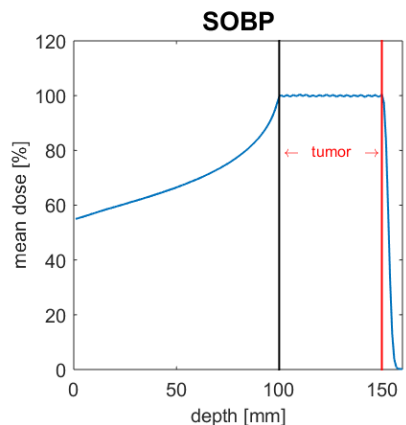
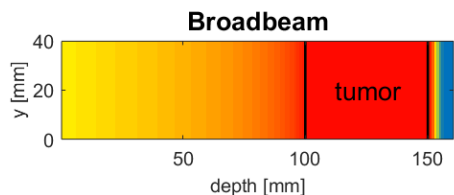
# Dose distribution (5 cm)



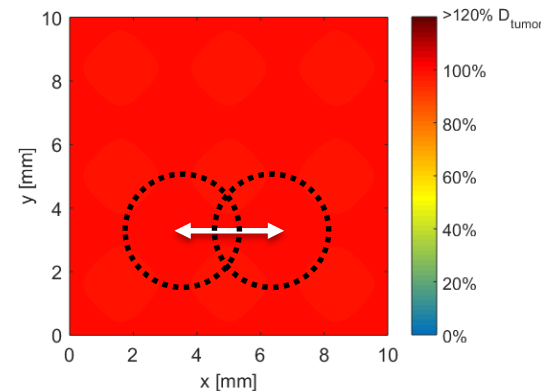
**Beamsizes increases due to small angle scatter!**



# Dose distribution (10cm)



**Homogeneity!!**



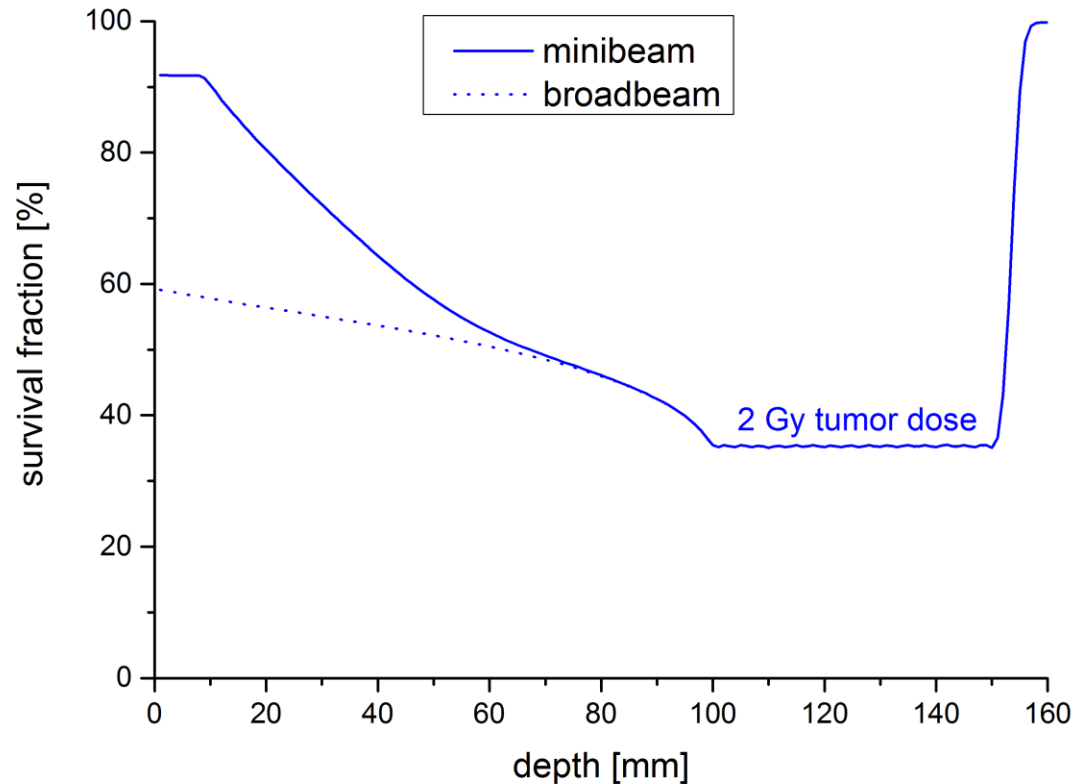
$$0.965 \leq \frac{D}{D_{tumor}} \leq 1.045^*$$



$$\frac{\text{beamsize (in } \sigma)}{\text{beamdistance } d} = 0.5$$

\*including the 1% SOBP uncertainty

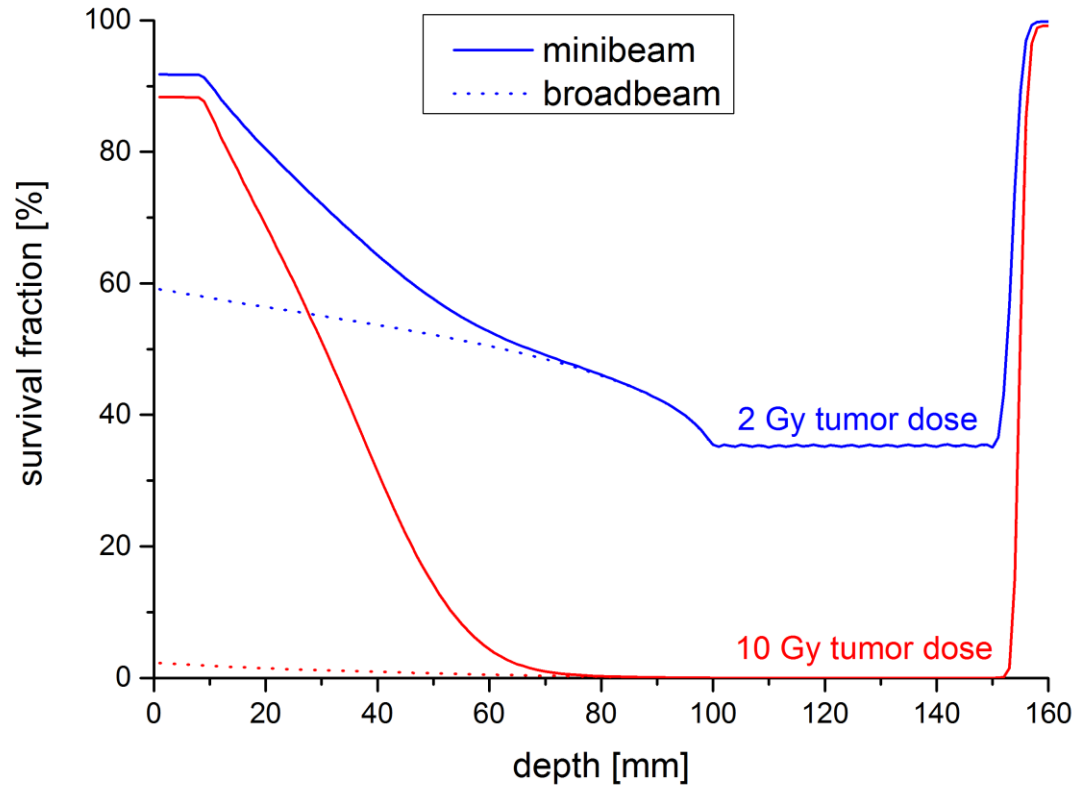
# Cell survival\*



**Minibeams:**  
**Entrance → more cell survival**  
**Tumor → same cell killing**

\*calculated with the LQ model ( $\alpha = 0.425$ ;  $\beta = 0.048$  from PIDE: <http://www.gsi.de/bio-pide>)

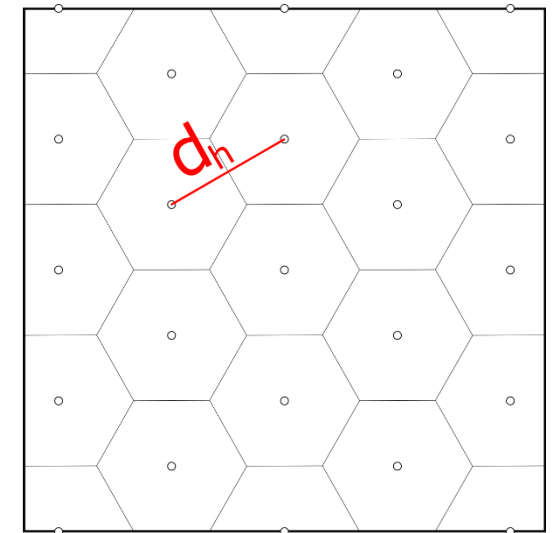
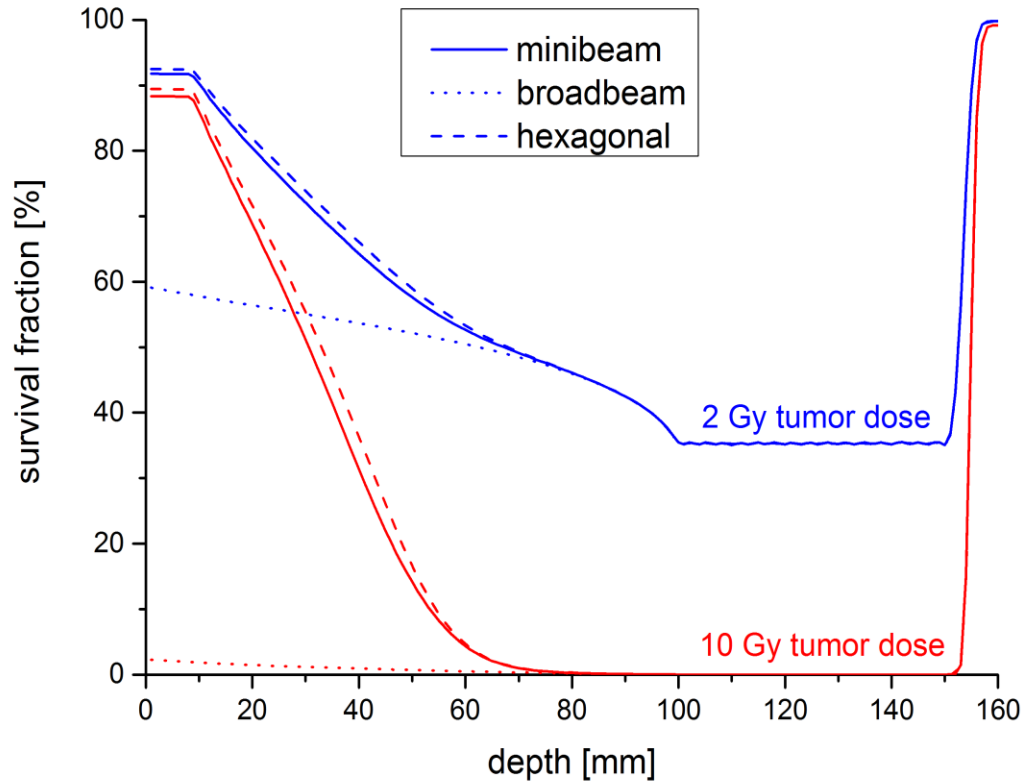
# Cell survival\*



**Minibeams:**  
**Entrance → more cell survival**  
**Tumor → same cell killing**

\*calculated with the LQ model ( $\alpha = 0.425$ ;  $\beta = 0.048$  from PIDE: <http://www.gsi.de/bio-pide>)

# Hexagonal beam alignment



**Hexagonal minibeam alignment:  
→ Increase beam distance by a factor of 1.144**

# Summary and Outlook

- **Proton minibeam: spatial fractionation → sparing  
homogeneous tumor dose → control**
- **Fractionation? → Hypofractionation?**
- **Tissue sparing in dependency of depth? → Experiments**
- **Technical feasibility?**

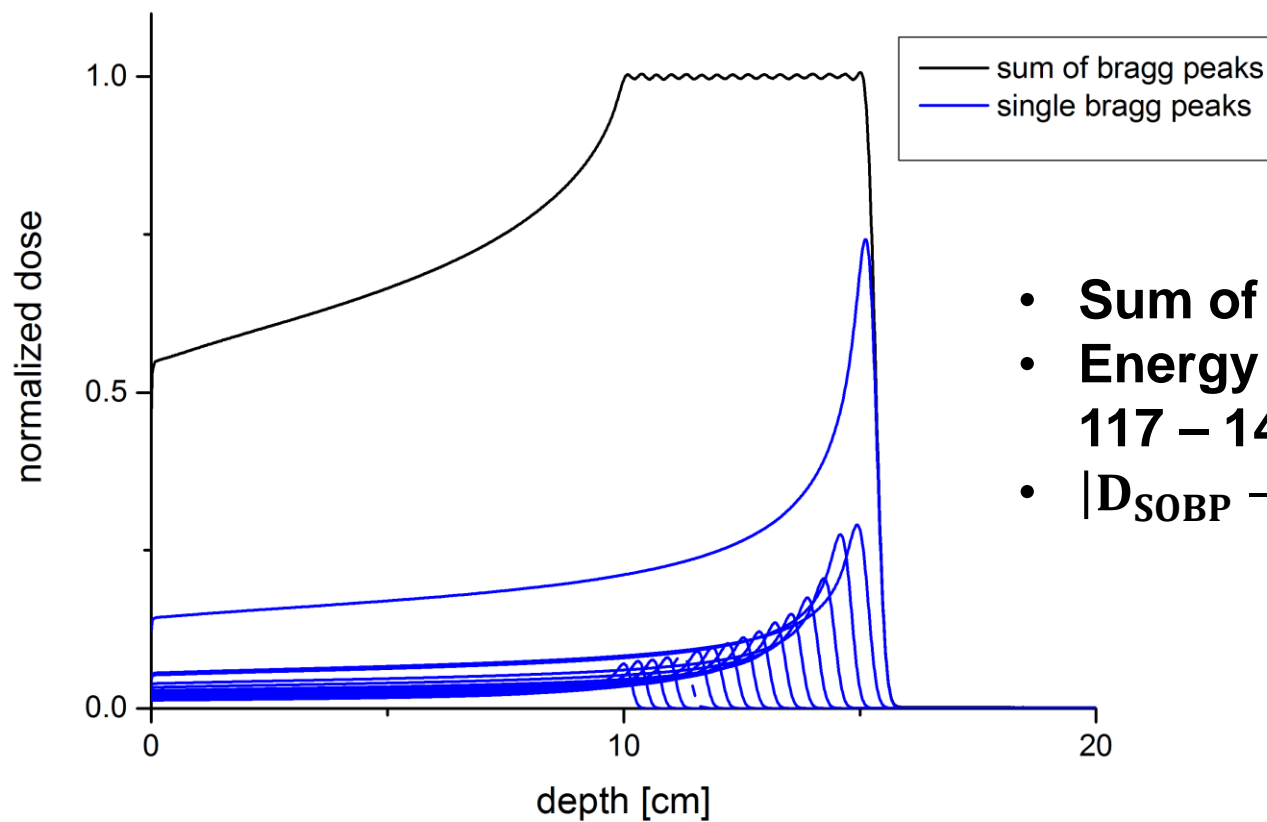
# Summary and Outlook

- **Proton minibeam: spatial fractionation → sparing  
homogeneous tumor dose → control**
- **Fractionation? → Hypofractionation?**
- **Tissue sparing in dependency of depth? → Experiments**
- **Technical feasibility?**

**Thank you for your attention!**



# Spread Out Bragg Peak

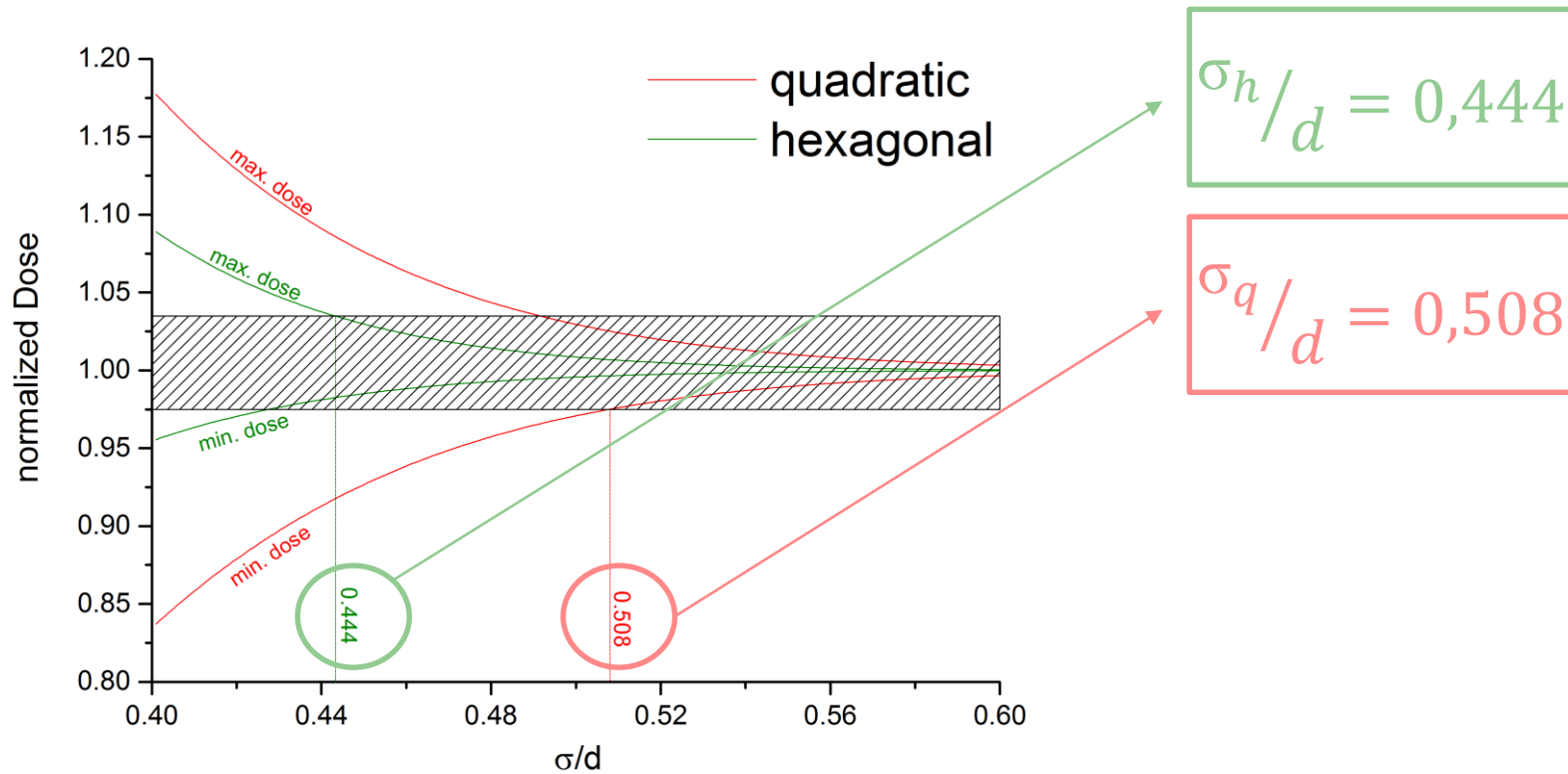


- **Sum of 17 Bragg peaks**
- **Energy range:  
117 – 148 MeV**
- $|D_{\text{SOBP}} - D_{\text{tumor}}| < 1\%$



# Constraint on homogeneity

$$0,975 \leq \frac{D}{D_{\text{tumor}}} \leq 1,035$$



# Determination of the distance $d$

- Beam alignment needs to fulfill the  $\sigma/d$  constraint of homogeneity at 10 cm depth
- Protons with maximum energy (148 MeV) scatter the least  
 → key  $\sigma$

So:  $\sigma = \sqrt{\sigma_0^2 + \sigma_{auf_{148}}^2}$  and  $\sigma/d_q = 0,508$  bzw.  
 $\sigma/d_h = 0,444$

→  $d_q = 3,415$  mm

→  $d_h = 3,905$  mm = 1,144  $d_q$