# Applications of Geant4 in Proton Radiotherapy at the University of Texas M.D. Anderson Cancer Center



Jerimy C. Polf
Assistant Professor
Department of Radiation Physics
U.T. M.D. Anderson Cancer Center
Houston TX, USA

#### **Uses of Monte Carlo**

- Clinical Uses in Radiation Oncology
  - X-ray radiotherapy
  - Proton beam radiotherapy
- Research Activities
  - Proton radiotherapy
- Current "challenges" for Geant4

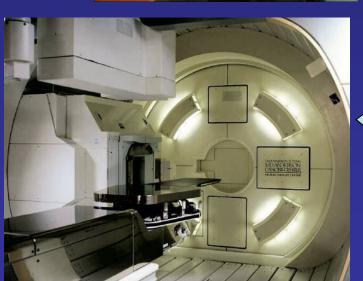
# Clinical Workflow of Radiotherapy

CT images imported to Treatment Planning System (TPS)

All parameters for dose delivery determined by TPS





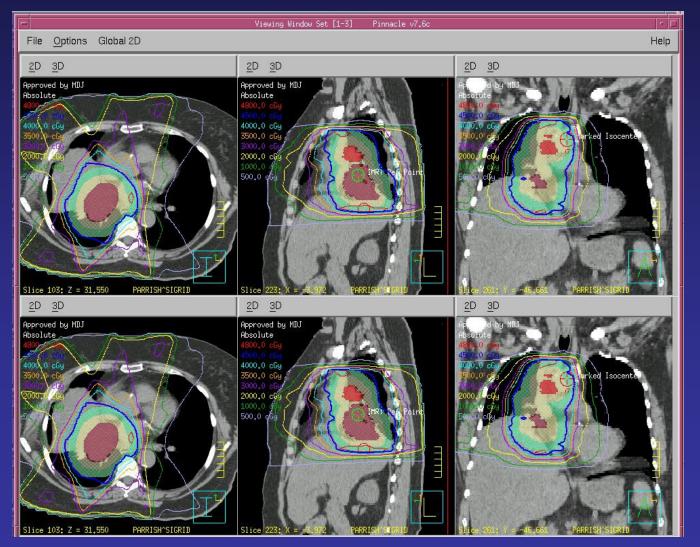




All parameters sent to proton delivery system for patient treatment.

# Applications of Monte Carlo in Radiotherapy

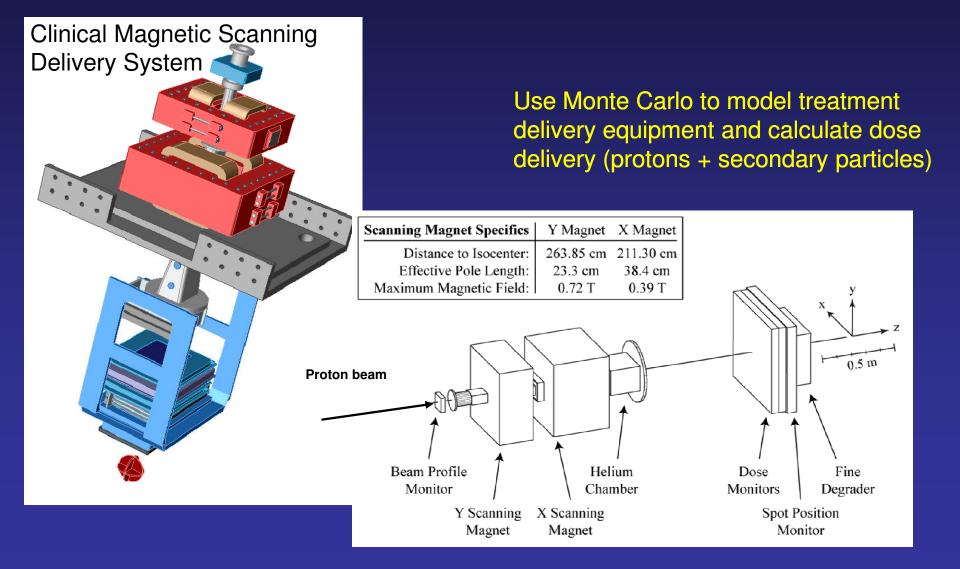
#### X-Ray Therapy



Treatment Planning System

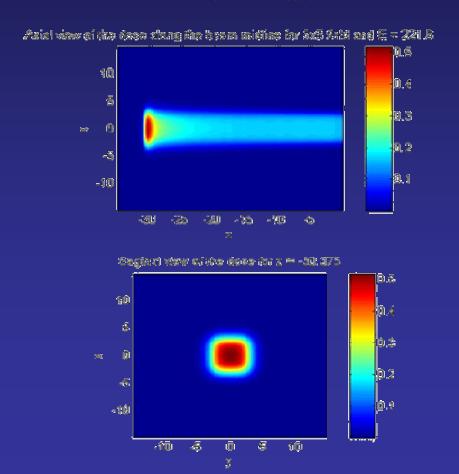
Monte Carlo

#### Applications of Monte Carlo in Proton Therapy

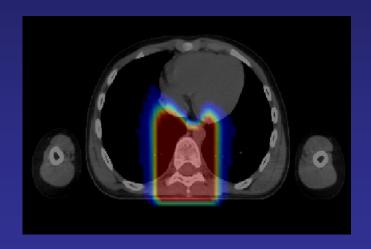


### Applications of Monte Carlo in Radiotherapy

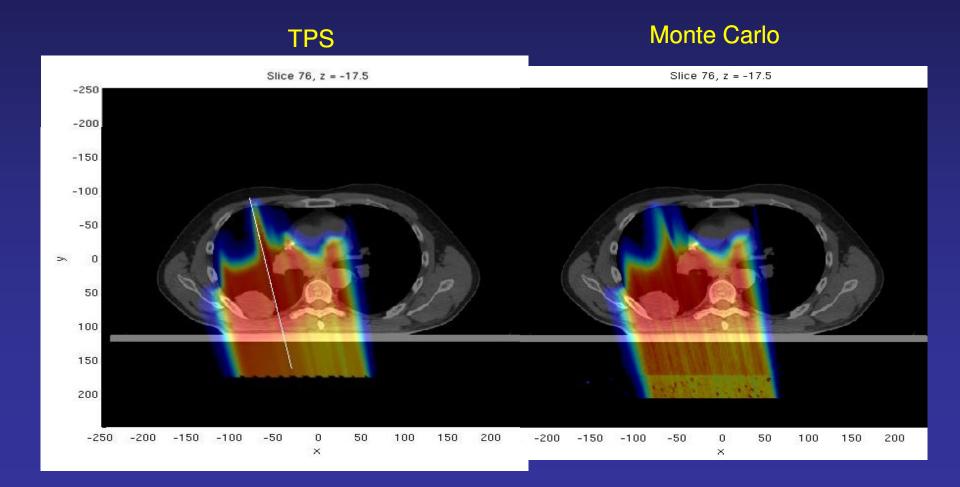
# Simple Calculations of Dose in water



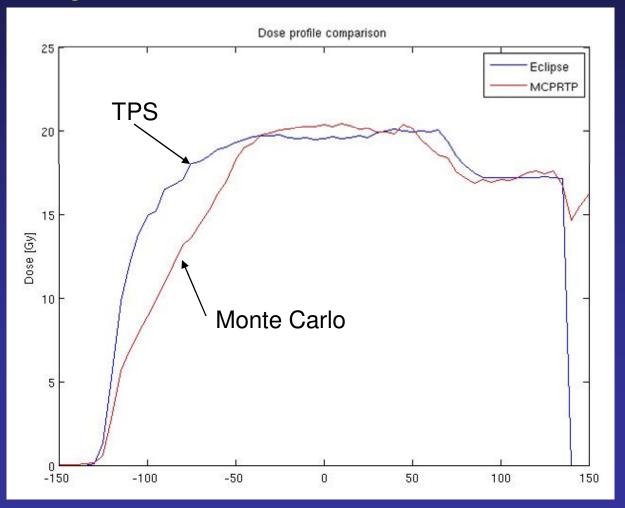
# Clinical calculations of dose in patient



 Use Monte Carlo (Geant4 and MCNPX) to verify proton dose distribution calculated using TPS

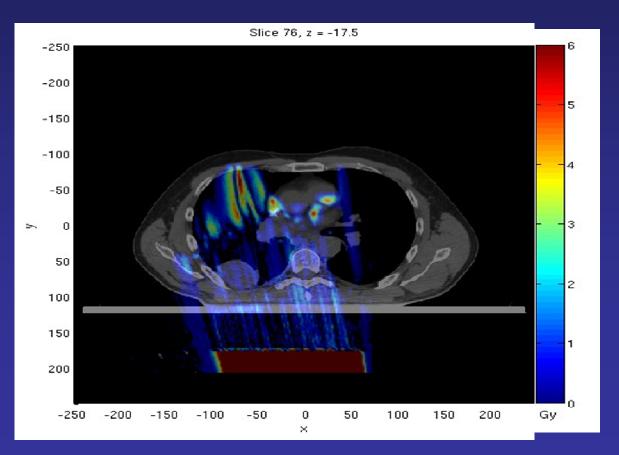


 Use Monte Carlo (Geant4 and MCNPX) to verify proton dose distribution calculated using TPS

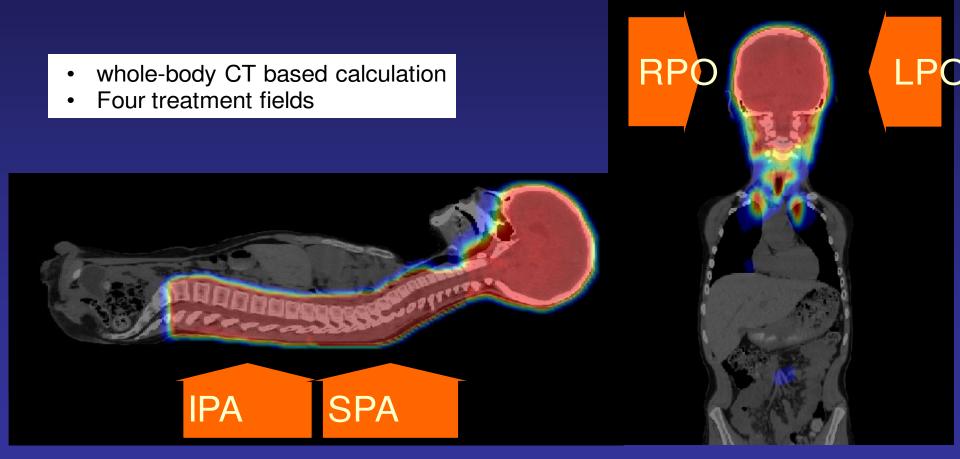


 Use Monte Carlo (Geant4 and MCNPX) to verify proton dose distribution calculated using TPS

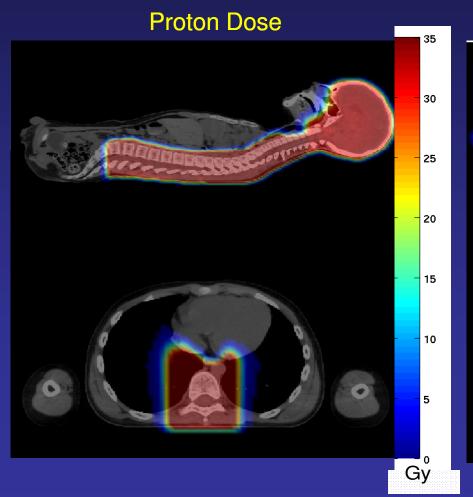
Dose difference = TPS - Monte Carlo

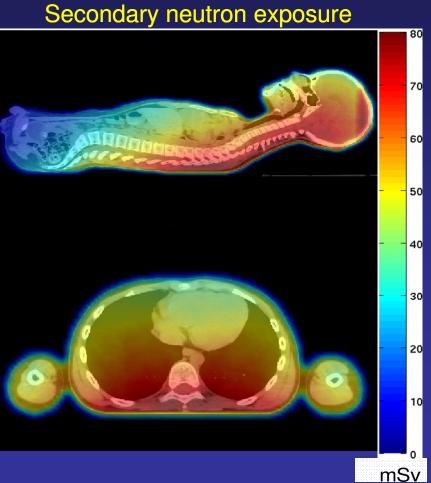


Calculation of secondary neutron exposure for Pediatric treatments



Calculation of secondary neutron exposure for Pediatric treatments



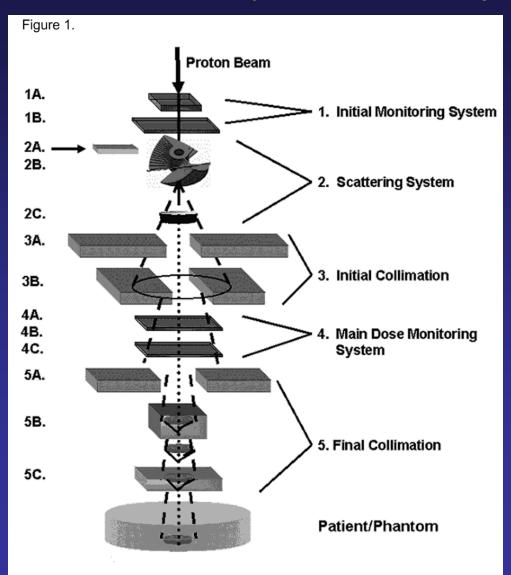


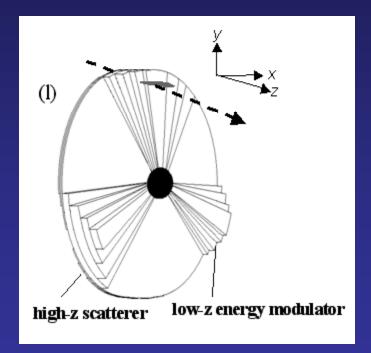
### Research applications at MDA

- Treatment System Design
- Development of verification methods
- New techniques for beam delivery

#### Research: Treatment Nozzle Design

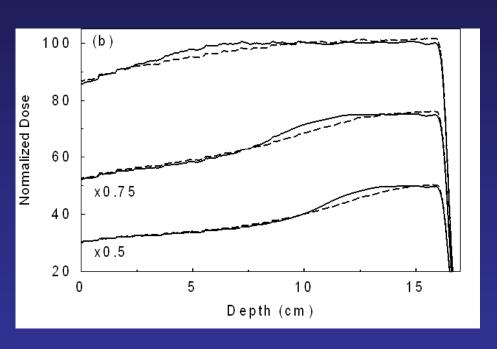
#### Improvements to existing treatment nozzles



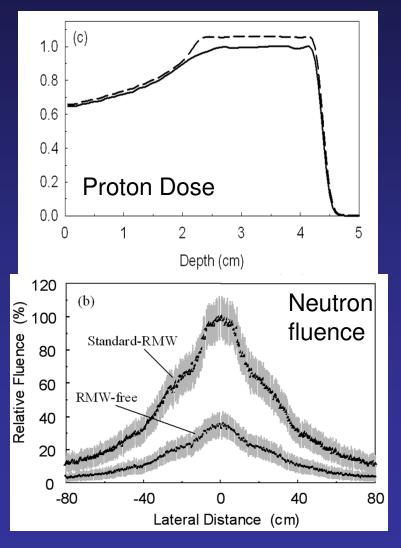


#### Research: Treatment Nozzle Design

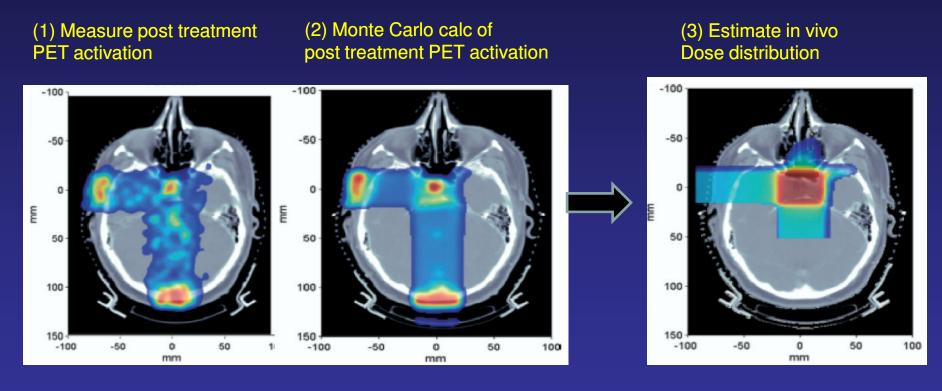
#### If initial beam size changes?



#### If we Remove RMW?

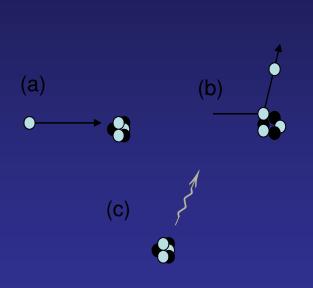


In-vivo Dose verification with Post treatment PET imaging



Parodi K *et al.* (2007) *Med. Phys.* 2007a;34:419-435. Parodi K *et al.* (2007) *Int. J. Radiat. Oncol. Biol. Phys.* 68 920-934.

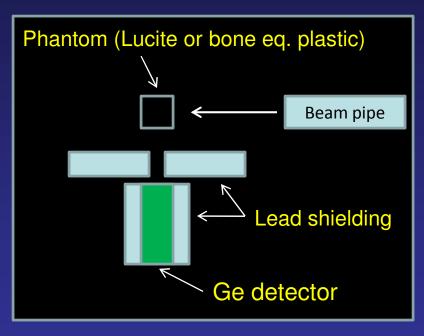
In-vivo Dose verification with Prompt Gamma ray Imaging

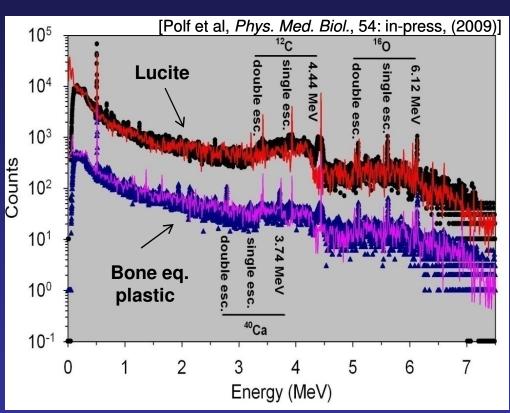


- Measure Prompt Gamma Ray Emission
  - Inelastic scattering [A(p, p' γ)A]
  - i.e. "real-time" signal
  - each element emits characteristic gamma-rays with different energies
  - gamma rays only emitted where dose is deposited

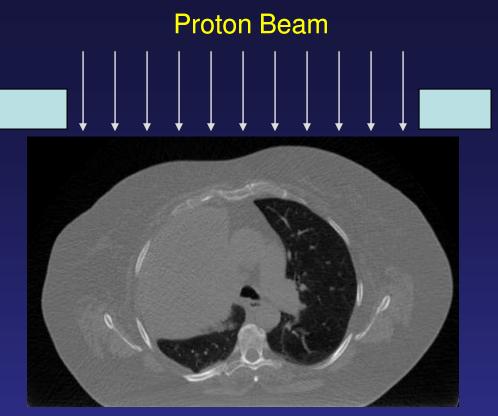
Hypothesis: By properly measuring prompt gamma ray emission, we can images dose deposited and of elemental concentration and composition of irradiated tissues.

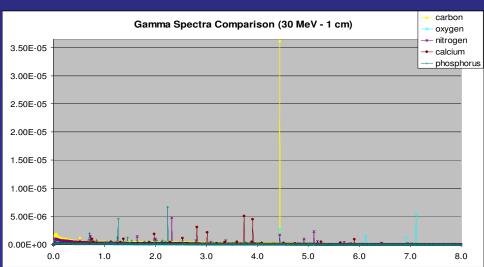
In-vivo Dose verification with Prompt Gamma ray Imaging

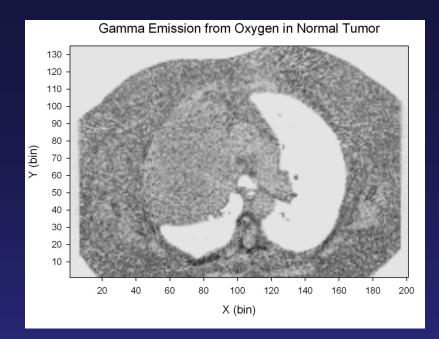


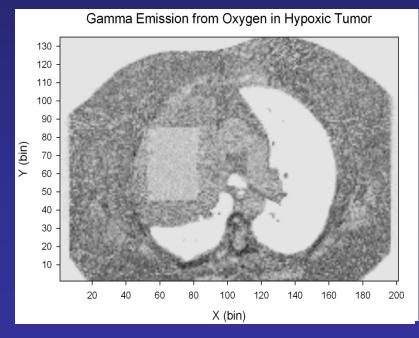


- Measurements (symbols)
- Geant4 Monte Carlo calculations (lines)
- tally energy dep. from Photo-electric, Compton, Pair Production in detector





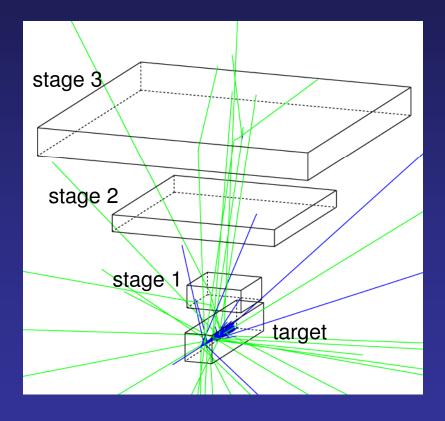




Prompt gamma imaging studies: Compton Camera Design

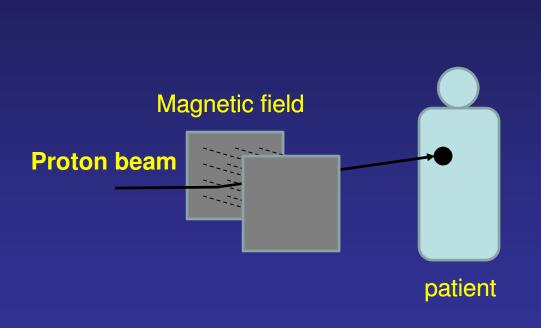
Design studies to optimize efficiency:

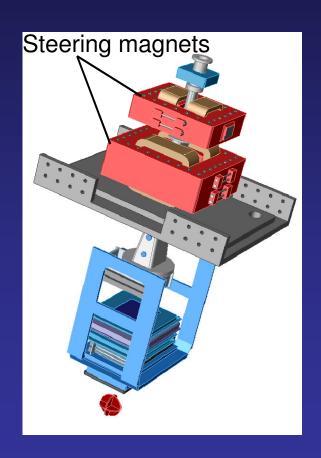
- triple scatters/proton
- Compton scattering
- detector material
- detector shape



#### Research: New Treatment Techniques

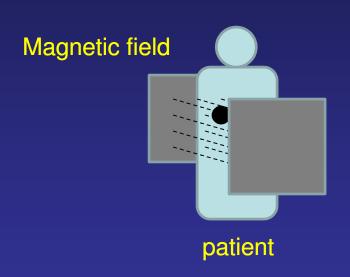
Feasibility studies of in-vivo magnetic steering

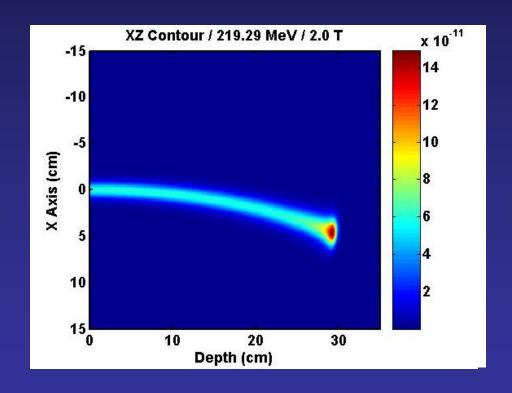




#### Research: New Treatment Techniques

Feasibility studies of in-vivo magnetic steering





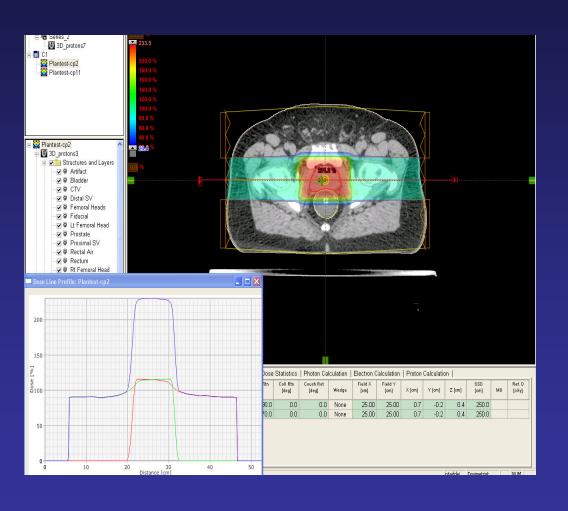
# Challenges and Limitations of Monte Carlo in Radiation Oncology

#### Clinical Issues

- Calculations in patient CT data

#### Research issues

- Disagreement with measured data
- modeling of nuclear processes



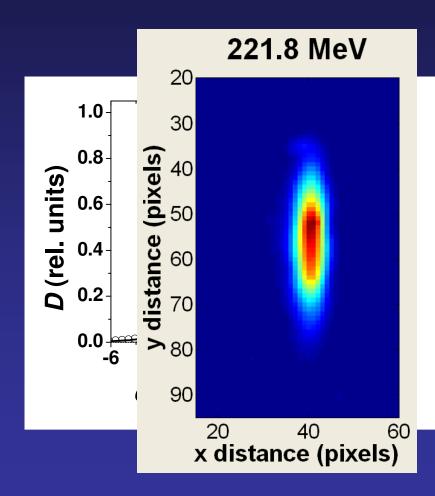
#### Clinical TPS:

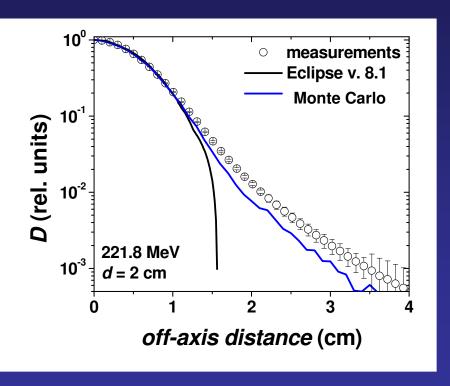
- calculate patient dose < 1 min
- uses Analytical calculation algorithms

Why not Monte Carlo?

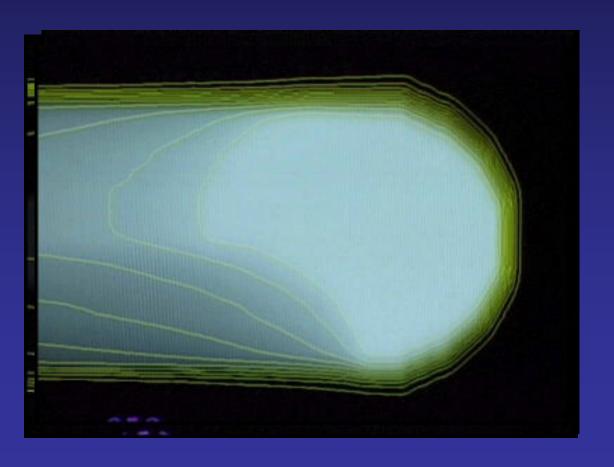
- -MC calcs too slow in CT data
- greater than 5 hrs to calculate a full patient treatment plan!!

Magnetic Beam Scanning: Dose calculation accuracy



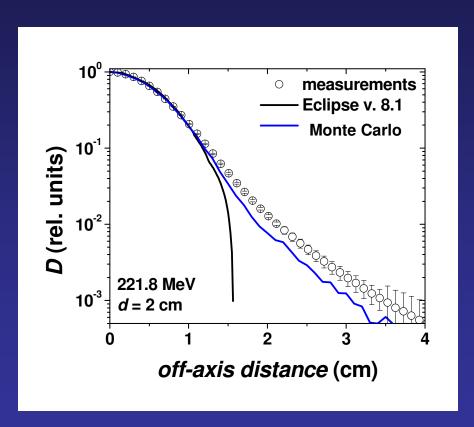


Magnetic Beam Scanning: Dose calculation accuracy



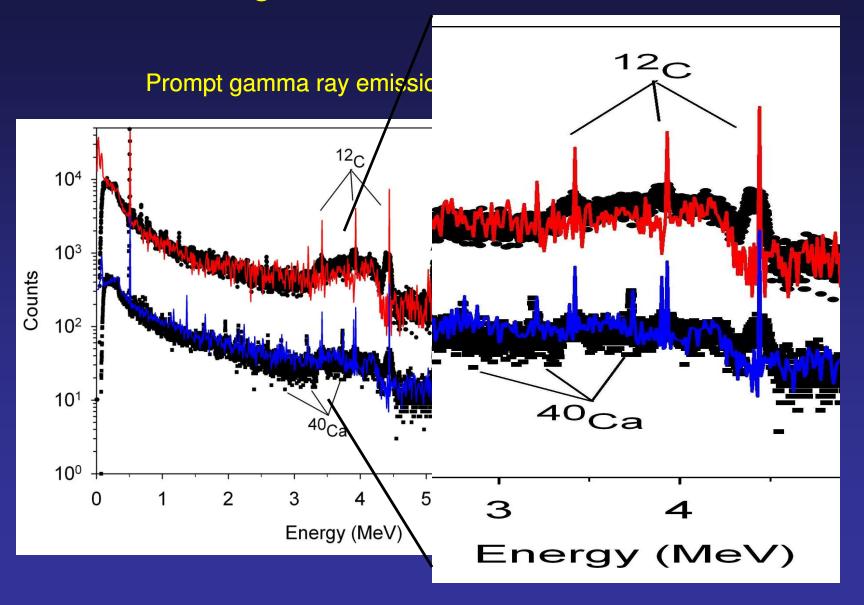
A full set, with a homogenous dose conformed distally <u>and</u> proximally

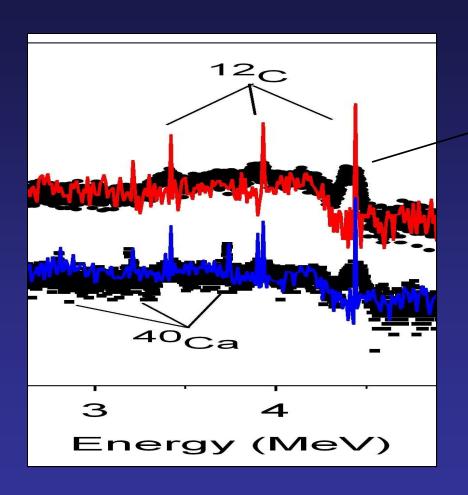
Pedroni, PSI



1 spot: Difference < 0.1 percent

10,000 spots: Difference > 5 percent





Nuclear Doppler Broadening
Of the 4.44 Mev <sup>12</sup>C peak.

- Excellent modeling of Doppler Broadening for low energy x-rays

 However, no modeling for Nuclear Broadening

# Conclusions on Monte Carl in Proton Therapy

- Geant4 is integral part in Clinical activities
  - treatment planning and verification
- Integral in research activities
  - equipment design
  - new treatment techniques
- Still some challenges
  - calculations in CT datasets
  - proton-nuclear interaction models?

#### Thank You!

Questions?