



School on Medical Accelerators

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Ion sources for medical accelerators

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Main purpose

Ion sources are widely use in an amazing number of applications, not only for accelerators but also for chemical analysis, lights, flat screens, space thrusters etc...

They can be few mm^3 small up to m^3 in fusion machines !

Today this lecture focusses on the ion sources used for particle medical accelerators

The medical applications of ion accelerators are classified into two categories: treatment and diagnosis.

Overview

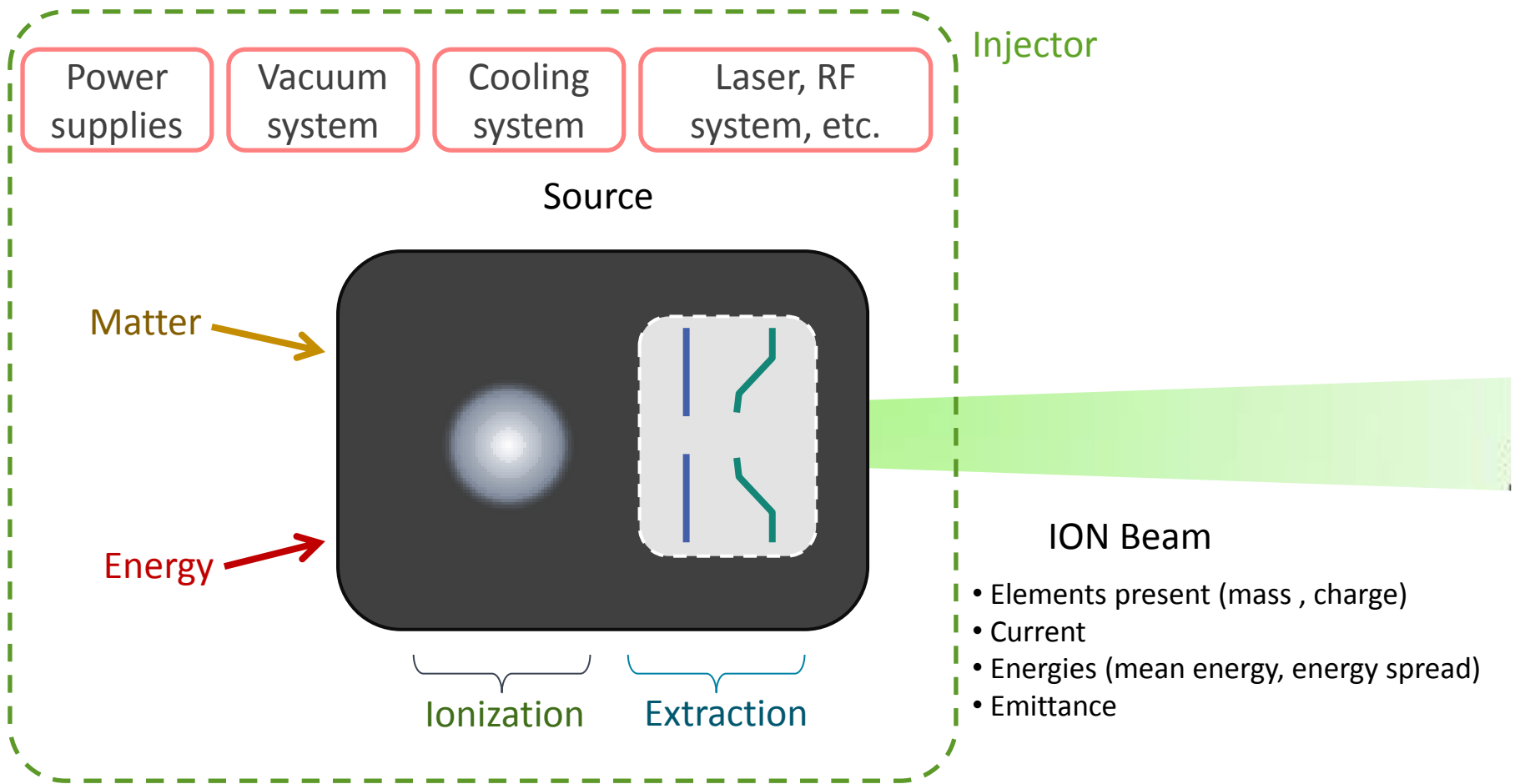
- ☑ Ion Source Requirements
- ☑ Ionization process, plasma, motion & confinement basics
- ☑ **Review of Ion Sources for medical accelerators**
 - Proton radiotherapy IS
 - Heavy Ion radiotherapy IS
 - IS Developments for future radiotherapy
 - Boron Neutron Capture Therapy IS
 - Radioisotope production
- ☑ Conclusion

Overview

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 - Radioisotope production
 - Particle therapy IS injector in-site examples
- ☑ Conclusion

- Ion Source definition
- Involved technologies
- What are the first questions ?
- Parameters

Ion Source definition

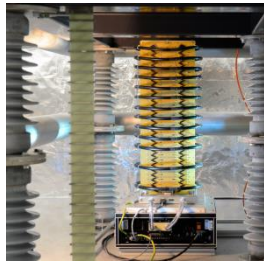


Involved technologies

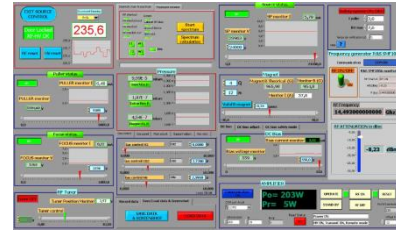
Power supplies



Laser, RF system, HV etc.



C&C system and software



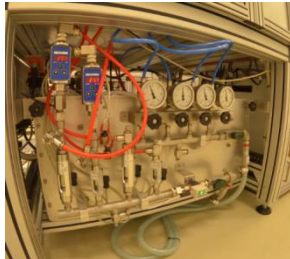
Beam diagnostics



Interlock & safety systems



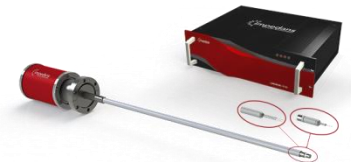
Cooling system



Vacuum system



Plasma diagnostics



What are the first questions ?

Particle type:

Choose the element of interest and the way to bring it as “neutral” in the IS (gas, evaporation, sputtering, gas mixing)

Do I need proton? H^+ , ${}_2H^+$, ${}_3H^+$ or isotope like Deuterium or Tritium

Do I need carbon? C^+ , C^{2+} , C^{n+} or CO^+ ... or isotope like ^{11}C ... or isotopologue like $^{11}C^{18}O^+$

Do I need a range of different elements ? What is the switching cycle frequency and speed ?

Is another element can do the job ? He^+ instead of H^+ ?

Parameters

Intensity:

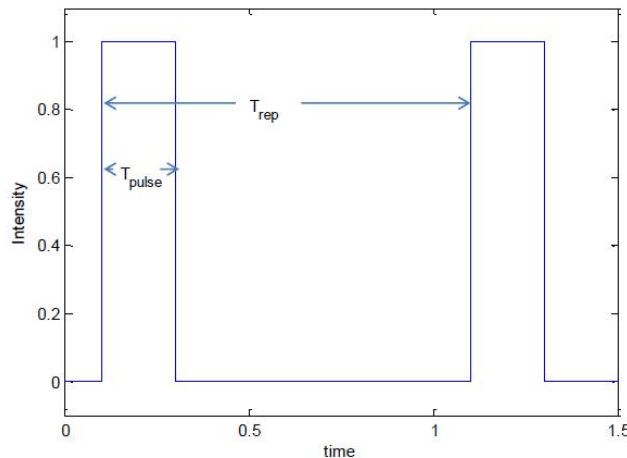
Beam current extracted from the IS:

$$I_{electric_current} = \frac{qeN_{ions}}{t}$$

In case of multiplate charge state:

$$I_{particle_current} = \frac{eN_{ions}}{t} = \frac{I_{electrical_current}}{q}$$

In case of pulsed beam the current is to be given with its time structure



$$\text{Repetition Rate} = \frac{1}{T_{rep}}$$

$$\text{Pulse length} = T_{pulse}$$

$$\text{Duty factor} = \frac{T_{pulse}}{T_{rep}}$$

Parameters

Intensity order of magnitude (examples):

Carbon therapy: around $200\mu\text{Ae}$ of C^{4+} and $800\mu\text{A}$ of ${}^3\text{H}^+$

Proton therapy: from 10 to several $100\mu\text{Ae}$ of H^+ or H^- cw or pulsed

BNCT: many mA of H^+ or H^-

Isotope production: as large as possible depending on target reliability

Parameters

Energy:

Total energy after extraction ?

$$E_{total} = qeV$$

Energy per nucleon ?

$$E/nucleon = qeV / A$$

Energy spread ?

$$\Delta E$$

Extraction voltage ?

$$E_{extraction} = V \text{ (kV)}$$

Parameters

Energy:

High beam energy advantages:

- Space charge effect reduced – higher beam current
- Energy spread ratio reduced ($\Delta E/E$)
- Geometrical emittance reduced
- High velocity makes it easier to inject into downstream accelerator (RFQ, DTL ...)

High beam energy disadvantages:

- technical complexity to work with very high HV
- sparks with their consequences on equipments
- high energy together with higher beam power to manage for beam diagnostics

Parameters

Emittance :

Need to produce a beam with an emittance lower than the accelerator acceptance

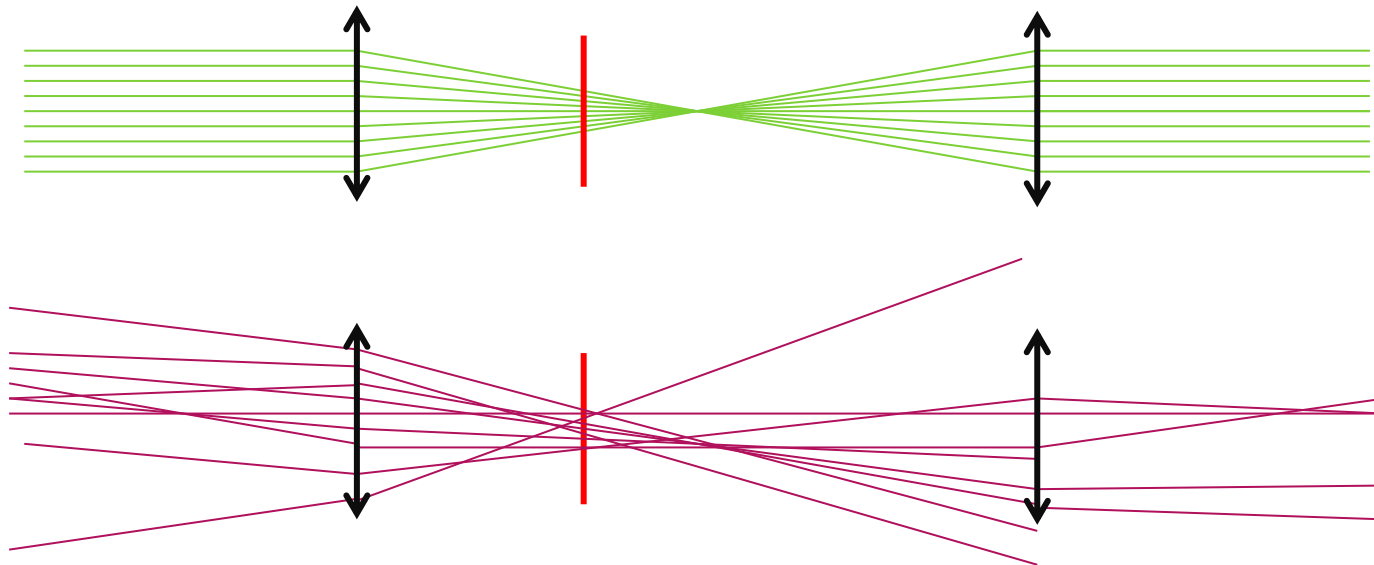
But what is emittance ?

Parameters

Emittance :

How to define a beam quality (independently of the position of measurement)?

Will the beam be transported (without significant losses) in the rest of the beam line?



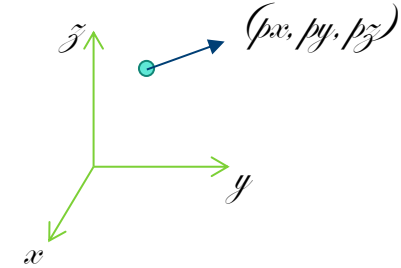
- It is not possible to define the quality of the beam with just its profile.
- Its is not possible to define the acceptance of a beam line with just an input profile.

Parameters

Emittance :

Each particles of a beam can be define by 6 parameters :

$$(x, y, z, px, py, pz)$$



In most cases the beam are continuous, with the longitudinal direction along the z axis.

Total beam

One transverse slice of the beam

If no coupling between the (x, x') and (y, y')

6D



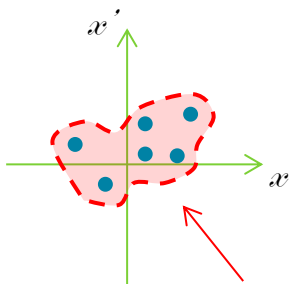
4D



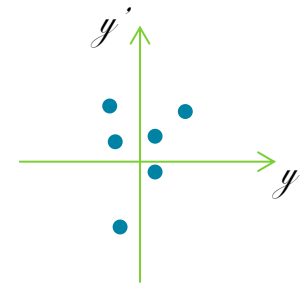
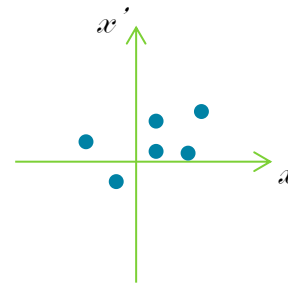
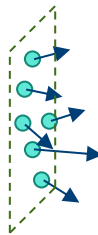
2 x 2D

(x, x')

(y, y')



Emittance $x-x' = \text{Area}$

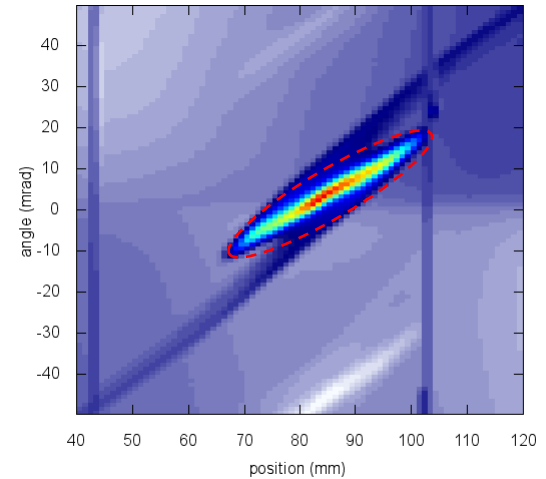
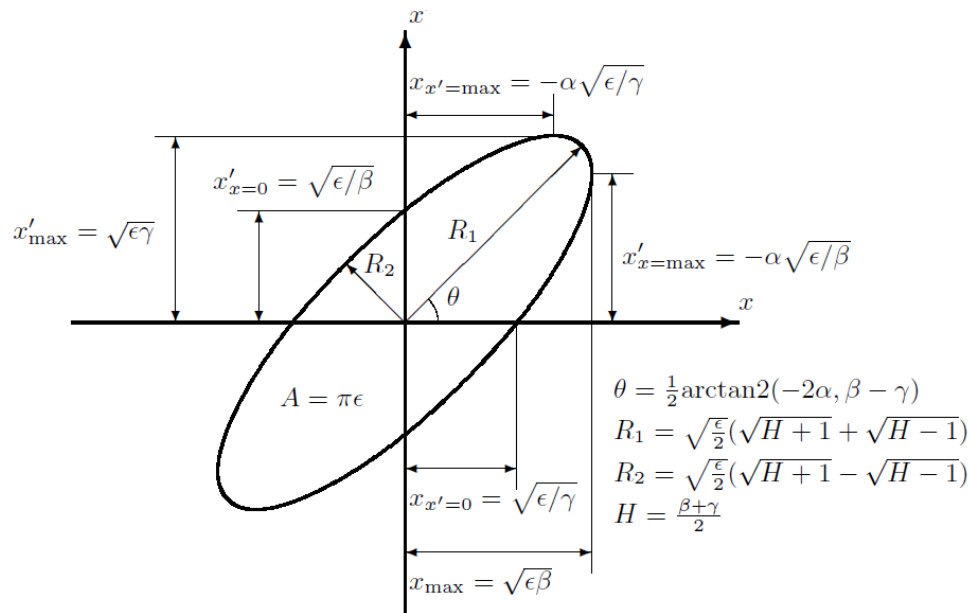


Parameters

Emittance :

- The beam emittance can be “easily” approximate by an ellipse.
- An ellipse is a simple shape, easy to parameter :

$$\gamma x^2 + 2\alpha x x' + \beta x'^2 = \epsilon \quad \text{Twiss parameters : } \alpha, \beta, \gamma$$



$$\mathcal{E}_{total, geometric} = \frac{Area}{\pi}$$

Parameters

Emittance : which definition ? What unit ?

$$\varepsilon_{normalised} = \beta\gamma\varepsilon_{geometric}$$

The normalized emittance conserved with acceleration

$$\varepsilon_{rms} = \varepsilon_{\sigma}$$

Produces an ellipse that extends to +/- 1 σ

$$\varepsilon_{4rms} = 4\varepsilon_{rms} = \varepsilon_{2\sigma}$$

... another definition !

$$\varepsilon_{th} = r_{out} \sqrt{\frac{2E_{th,ion}}{3m_0c^2}}$$

For plasma sources the ion T° and the source exit aperture give the minimum emittance

Emittance UNIT : **mm.mrad** (but often expressed in π .mm.mrad !)

Parameters

- Space charge and Child-Langmuir limits
- Space charge compensation
- Brightness = intensity per emittance
- IS Efficiency : from atom to ion
- Beam purity: contaminant level
 - material choices
 - gas mixing
 - sputtering

$$J_{CL} = \frac{4}{9} \varepsilon_0 \sqrt{\frac{2qe}{m}} \cdot \frac{U_d^{3/2}}{d^2}$$

$$B_b = \frac{I_b}{\pi^2 \varepsilon_x \varepsilon_y}$$

$$\eta = \frac{N_{ions}}{N_{atoms}}$$

$$\kappa = \frac{N_{ions}}{N_{beam}}$$

Parameters

- Operating pressure: from 10^{-10} mbar to 1 mbar !
 - recombination or stripping losses
 - breakdowns in extraction system and accelerating fields

- Stability
 - from +/- 1% up to +/- 2,5 % around the beam intensity
 - feed back loop required ?
 - run IS at medium performance

Parameters

- Operating scheme & reliability

- Uptime / Availability: key element for medical application
- Mean Time Between Failures (MTBF)
- Mean Time To Repair (MTTR)
- Maintenance plan
- Number of spare parts and complexity : as low as possible
- Number of IS on the same injector

- Space

- constraints on the available space for the IS influence the design
- internal sources in cyclotrons
- compactness of the accelerator injector vault

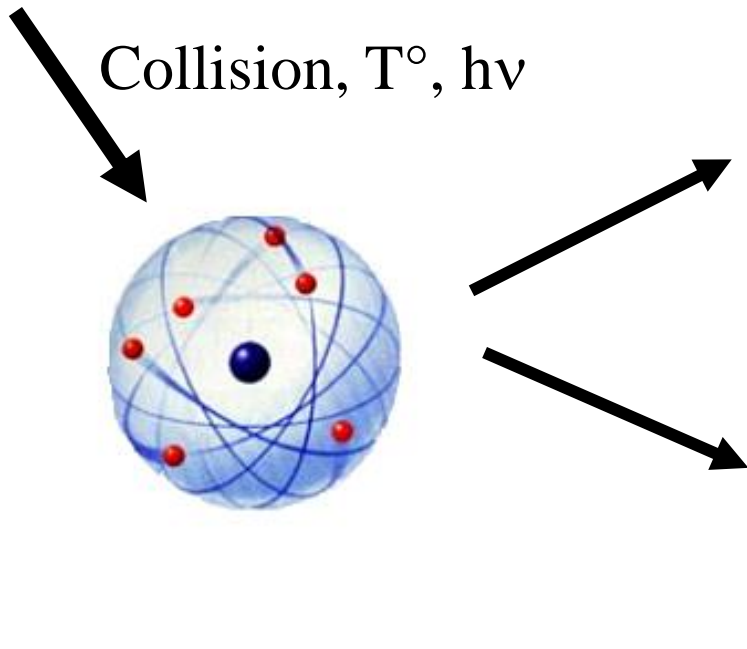
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- Positive – Negative Ions
- Classification of Ion Sources
- Electron impact ionization
- Plasma basics
- Motion of charged particles
- Confinement of charges particles

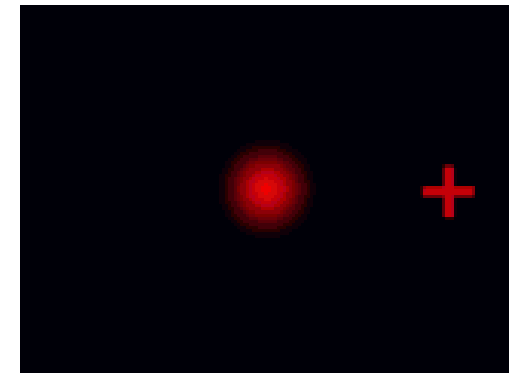
Positive – Negative Ions

Ionizing one atom is modifying its number of electrons by...
...perturbing the electron cloud



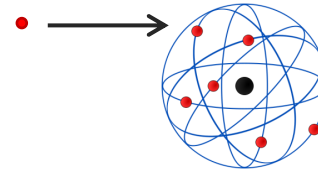
Negative ionization

Positive ionization

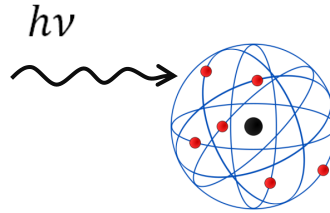


Positive – Negative Ions

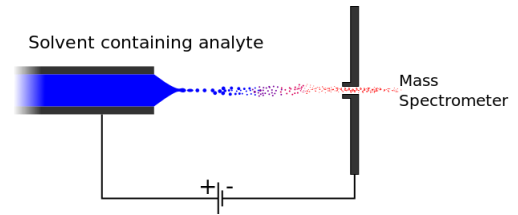
- Electron impact ionization



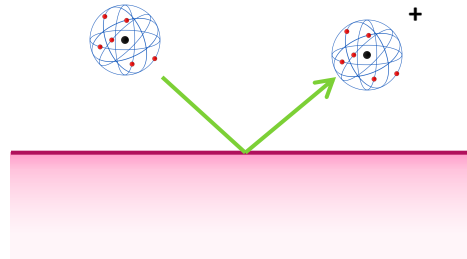
- Photoionization



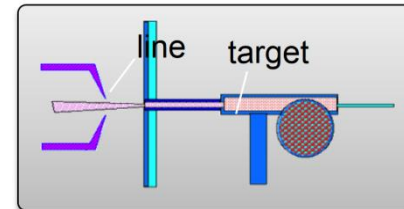
- Field ionization



- Hot surface



- Thermal ionization

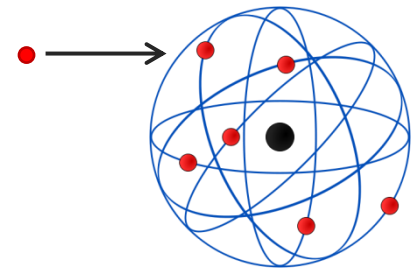


Classification of Ion Sources

Electron Impact ionization	DC discharge	Arc	Duoplasmatron PIG FFBIAD Cathode Kaufman Nier Freeman Magnetron etc...
	RF discharge	RF	Helicon Thonemann
		μ-wave	ECRIS
	Without discharge	e- beam photon	EBIS LIS
Without electron impact ionization	Surface ionization		SIS
	Field ionization		LIS Electrospray
	Charge Exchange		Stripping
	Thermo-ionization		Thermospray

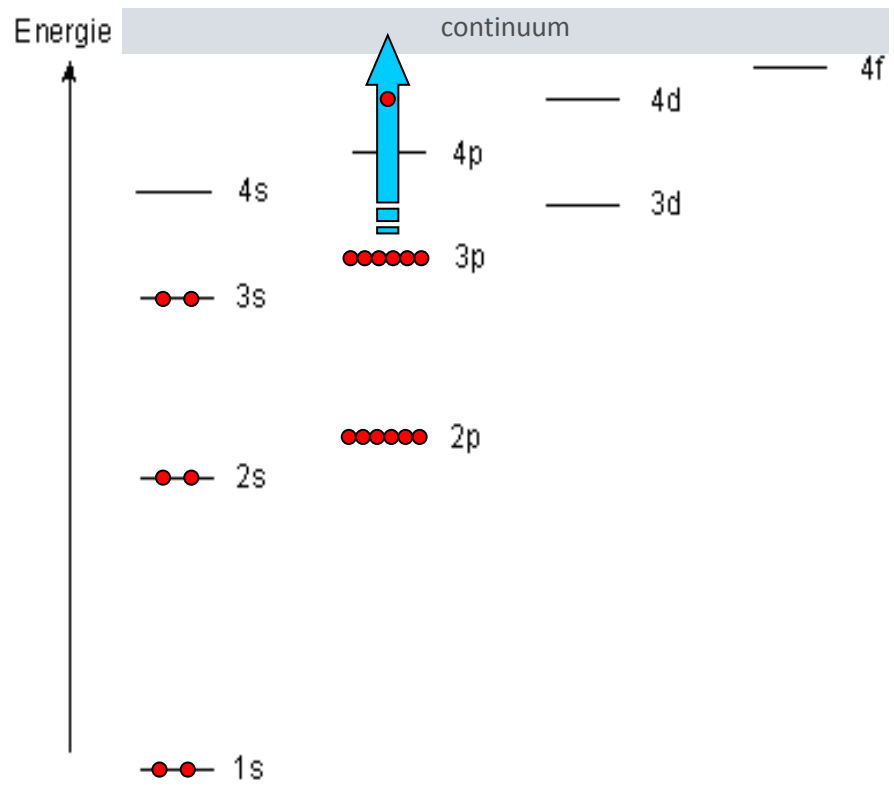
➤ IS for medical accelerators are mostly based on the **Electron impact ionization**

Electron impact Ionization Potential

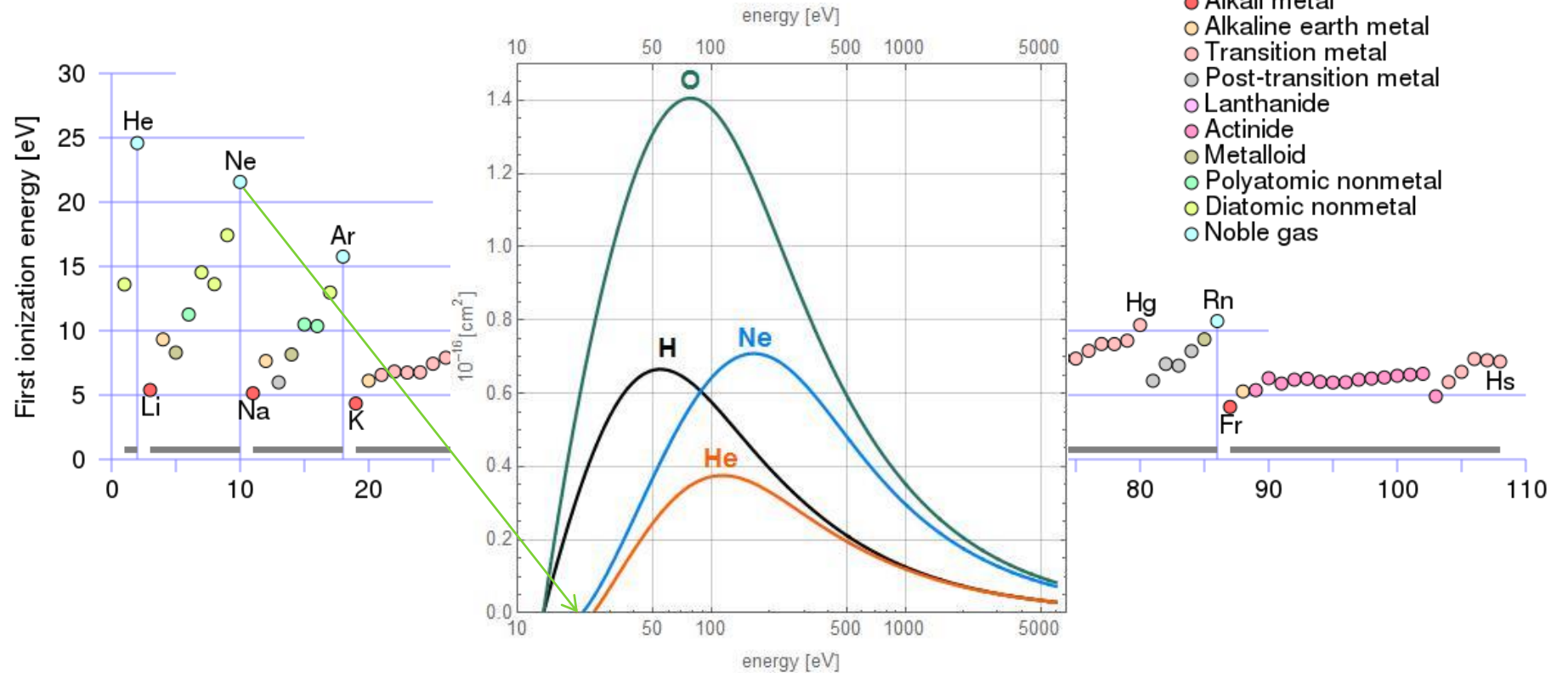
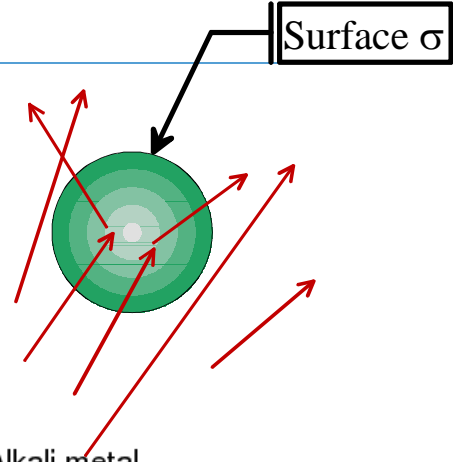


Example for argon: $^{40}\text{Ar}^{18}$

e ⁻	eV	couches
1	16	3p ⁶ M
2	32	
3	49	
4	65	
5	81	
6	98	
7	133	3s ²
8	152	
9	396	2p ⁶ L
10	469	
11	541	
12	614	
13	689	
14	762	
15	873	2s ²
16	939	
17	3947	1s ² K
18	4264	



Electron impact Ionization Potential & cross section



Source : Wikicommons

Electron impact Ionization Potential & cross section

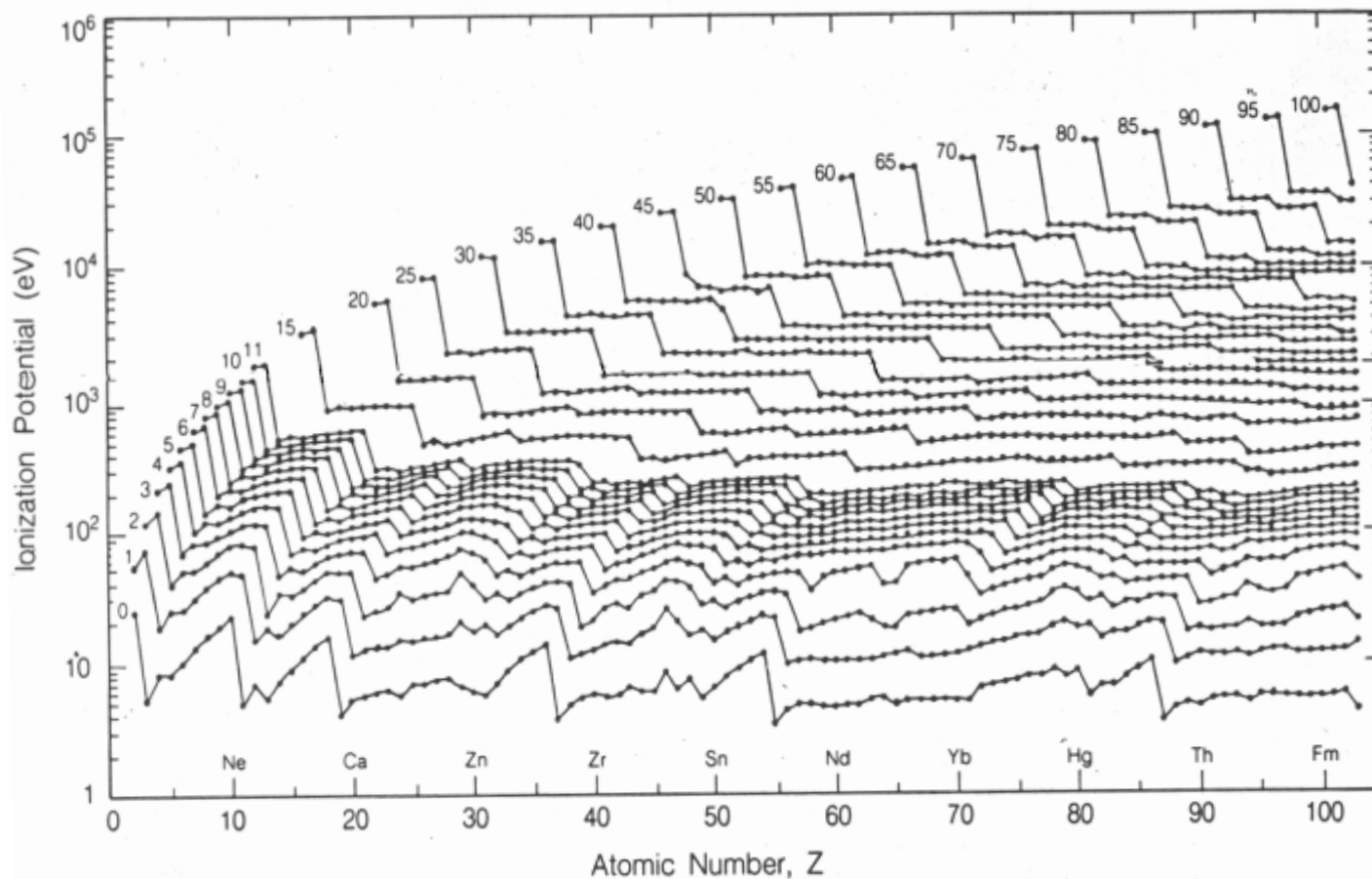
Reaction	$\sigma_{200\text{eV}} \text{ (cm}^2\text{)}$
$e^- + \text{He} \Rightarrow \text{He}^+ + 2e^-$	$3,2 \cdot 10^{-17}$
$e^- + \text{He}^+ \Rightarrow \text{He}^{2+} + 2e^-$	$4,6 \cdot 10^{-18}$
$e^- + \text{He} \Rightarrow \text{He}^{2+} + 3e^-$	$1,4 \cdot 10^{-19}$

↪ Step by step ionization to get multi-charged ions

Source : Wikicommons

Electron impact

Ionization potentials of the atom can be very high !



Carlson et al., [http://dx.doi.org/10.1016/S0092-640X\(70\)80005-5](http://dx.doi.org/10.1016/S0092-640X(70)80005-5)

Electron impact

Electron Affinity (EA) for negative Ions

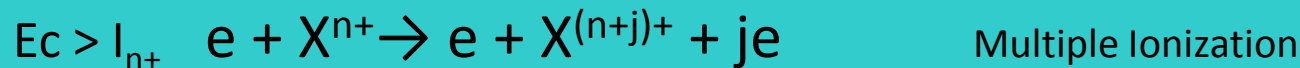
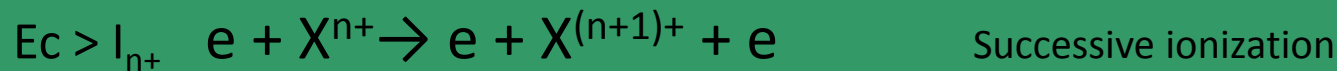
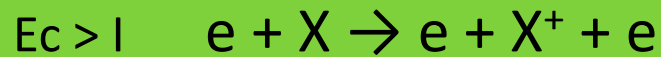
Definition of EA: energy given off when neutral atom in gas phase gains extra electron to form *negatively charged ion*

Electron affinities and ionization energies of elements

Group I A	Ionization potential (eV) - Electron affinity (eV)						VIII A
1 H 13.59 0.75	II A	III A	IV A	V A	VI A	VII A	2 He 24.58 0.078
3 Li 3.39 0.62	4 Be 9.32 < 0	5 B 8.30 0.28	6 C 11.26 1.26	7 N 14.54 ≤ 0	8 O 13.61 1.46	9 F 17.42 3.39	10 Ne 21.56 < 0
11 Na 5.14 0.54	12 Mg 7.64 < 0	13 Al 5.98 0.46	14 Si 8.15 1.38	15 P 10.55 0.74	16 S 10.36 2.07	17 Cl 13.01 3.61	18 Ar 15.76 < 0
19 K 4.34 0.50	20 Ca 6.11 ≈ 0	31 Ga 6.00 0.3	32 Ge 7.88 1.2	33 As 9.81 0.80	34 Se 9.75 2.02	35 Br 11.84 3.36	36 Kr 14.00 < 0
37 Rb 4.18 0.48	38 Sr 5.69 < 0	49 In 5.78 0.3	50 Sn 7.34 1.25	51 Sb 8.64 1.05	52 Te 9.01 1.97	53 I 10.45 3.06	54 Xe 12.13 < 0
55 Cs 3.89 0.47	56 Ba 5.21 < 0	81 Tl 6.11 0.3	82 Pb 7.41 1.1	83 Bi 7.29 1.1	84 Po 8.43 1.9	85 At 9.5 2.8	86 Rn 10.74 < 0

Electron impact: ion production

The Kinetic energy of one electron E_c must be larger than the ionization potential of the atom I .

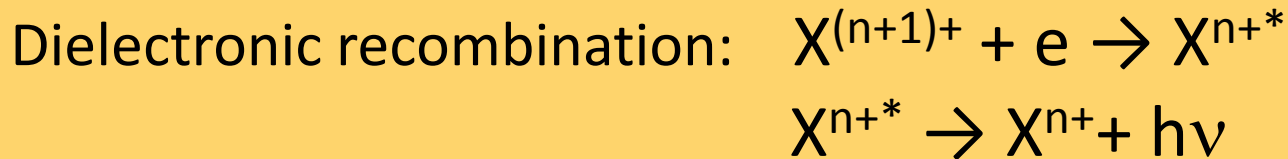


N_e monokinetic electrons travelling a L path in a gas will product N^+ ions as below:

$$N^+ = \sigma N_0 N_e L$$

N_0 is the density of neutral particles

Electron impact but ion destruction ...



$$\frac{\partial n_i}{\partial t} = \underbrace{\sum_{j=j_{\min}}^{i-1} n_e n_j \langle \sigma_{j \rightarrow i}^{EI} v_e \rangle + n_0 n_{i+1} \langle \sigma_{i+1 \rightarrow i}^{CE} v_{i+1} \rangle}_{\text{creation}} - \underbrace{n_0 n_i \langle \sigma_{i \rightarrow i-1}^{CE} v_i \rangle - \sum_{j=i+1}^{j_{\max}} n_e n_j \langle \sigma_{i \rightarrow j}^{EI} v_e \rangle}_{\text{destruction}} - \underbrace{\frac{n_i}{\tau_i}}_{\text{Losses (ion extraction, wall...)}}$$

n : density
 S : cross section of a process
 τ_i : confinement time
 n_i / τ_i : current intensity (=losses)

Plasma Basics

Plasma is a quasi-neutral ionized gas

$$\mathbf{n}^+ = \sum \mathbf{n}_i \mathbf{q}_i = \mathbf{n}_e$$

Composition = (Ions + e⁻ + Atoms + Molecules)

Ionization ratio

$$\alpha = \frac{\mathbf{n}^+}{\mathbf{n}^+ + \mathbf{n}_0}$$

- Low $10^{-9} < \alpha < 10^{-4}$
- High $10^{-4} < \alpha < 1$

Plasma parameters:

- n^+ : positive ion density
- n_e : electron density
- n_0 : neutral density
- T_i : ion temperature
- T_e : electron temperature
- τ_e : e⁻ confinement time
- Φ : plasma potential

Typical ECR parameters	n_e cm ³	E_e keV	Φ V	T_i eV	τ_e ms
Order Of magnitude	10^{10} à 10^{12}	5 à 50	few V to few tens	< 1	0,5 à 5

$$V_p = \frac{kT_{e,cold}}{2e} \left(5.67 - \ln \left(\frac{q_{eff}}{A} \right) \right)$$

Estimation formula for ECR, Bibinov et al.

Plasma Basics

- Typical total length scale L has to exceed the shielding length of the plasma: Debye Length

$$L \gg \lambda_{De} = \sqrt{\frac{\epsilon_0 k T_e}{e^2 n_e}}$$

the collective interactions are dominated by bulk plasma rather than boundary effects

- Number of particles inside the Debye sphere must be sufficient

$$n_e \lambda_D^3 \gg 1.$$

collective interactions dominate over binary interactions at the mean interparticle separation distance

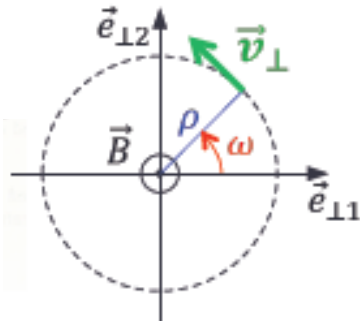
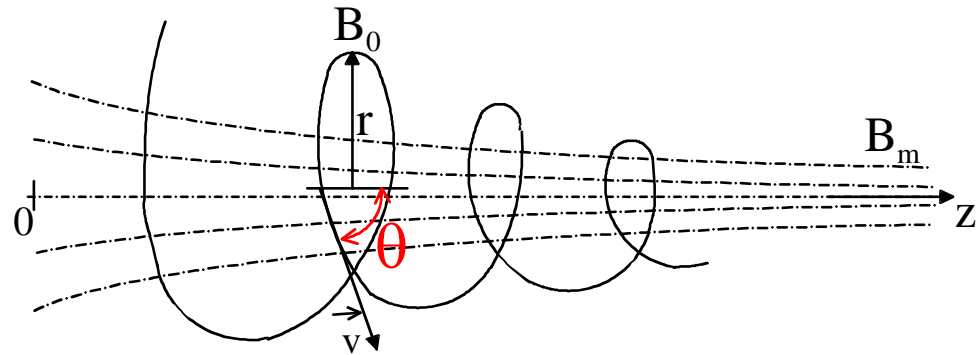
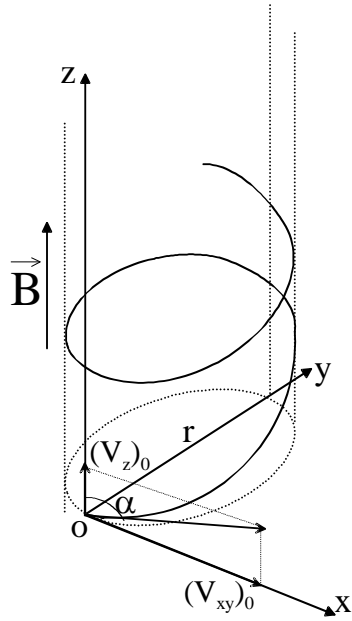
- Frequency of collective plasma (electron) oscillations must be higher than the collision frequency of electrons and neutrals

$$f_{pe} = \frac{\omega_{pe}}{2\pi} = \frac{1}{2\pi} \sqrt{\frac{n_e e^2}{\epsilon_0 m_e}} > \nu_{en}$$

Motion of charged particles

Elementary motion of charged particle in static magnetic and electric field

Motion with B



$\omega = \frac{qB}{m}$ is the cyclotronic frequency

ρ is the Larmor radius

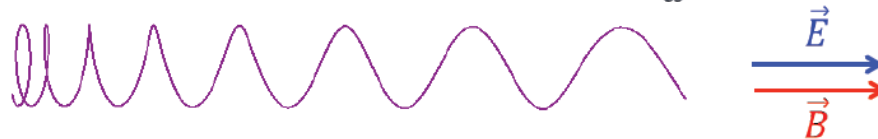
Motion of charged particles

Elementary motion of charged particle in static magnetic and electric field

Motion with $B \parallel E$

- $m \frac{d\vec{v}}{dt} = q\vec{v} \times \vec{B} + \vec{E} \rightarrow \begin{cases} m \frac{d\vec{v}_\perp}{dt} = q\vec{v}_\perp \times \vec{B} \\ m \frac{d\vec{v}_\parallel}{dt} = q\vec{E} \end{cases} \rightarrow \begin{cases} \text{rotation with } v_\perp = \rho\omega \\ v_\parallel = \frac{qEt}{m} \end{cases}$

- \rightarrow helix with radius ρ , angular frequency ω , variable pitch $p = \frac{2\pi v_\parallel(t)}{\omega}$

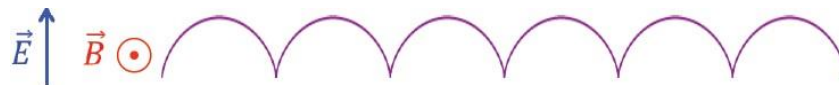


Motion with $B \perp E$

- $m \frac{d\vec{v}}{dt} = q\vec{v} \times \vec{B} + \vec{E} \rightarrow \vec{v} = \frac{E}{B} (\cos \omega t. \vec{e}_{\perp 1} + \sin \omega t. \vec{e}_{\perp 2}) - \frac{E}{B} \cdot \vec{e}_{\perp 1}$

- with $\vec{e}_{\perp 1} = \frac{\vec{E} \times \vec{B}}{EB}$ and $\vec{e}_{\perp 2} = \frac{\vec{E}}{E}$

$E \times B$ azimuthal drift



Confinement of charged particles

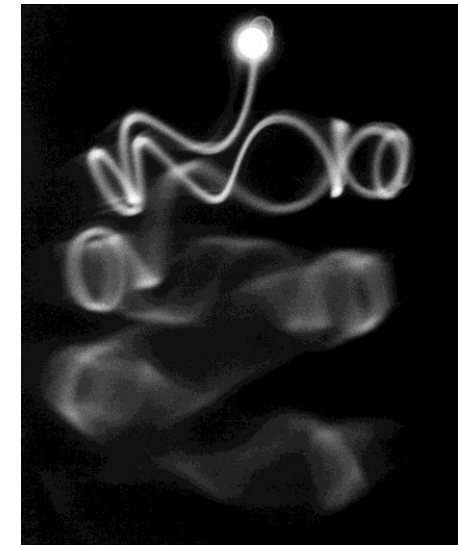
The magnetic mirror

$$E_c = E_{\perp} + E_{\parallel} = \frac{1}{2} m_e (v_{\perp} + v_{\parallel})^2$$

$$\mu = \frac{E_{\perp}}{B}$$



CONSERVATION



REFLEXION

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Proton and Carbon Ions

- Boron Neutron Capture Therapy IS

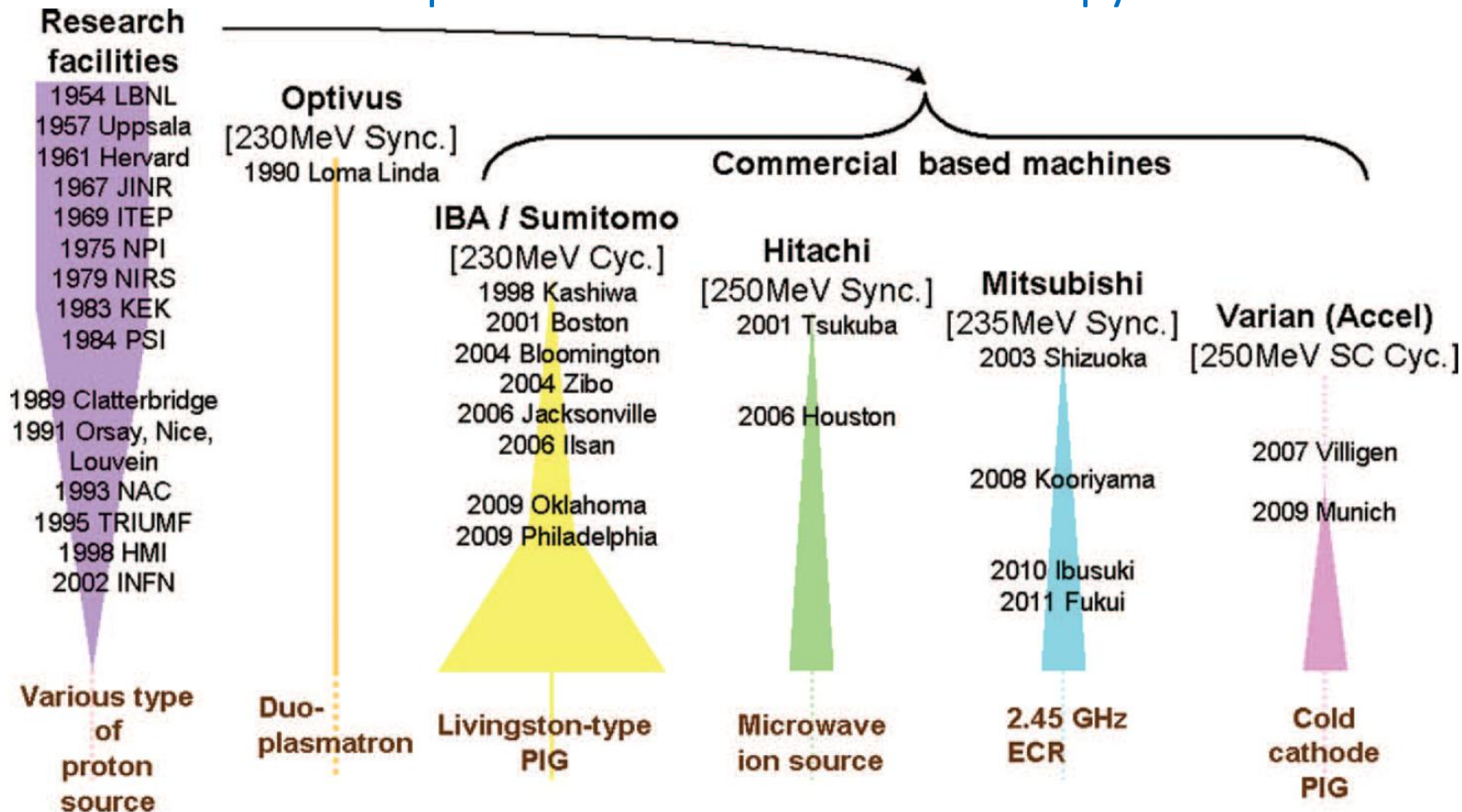
Protons

- Radioisotope production

Different ion species

Proton radiotherapy IS

Development and trend in radiotherapy



M. Muramatsu and A. Kitagawa, RSI 83, 02B909 (2012)

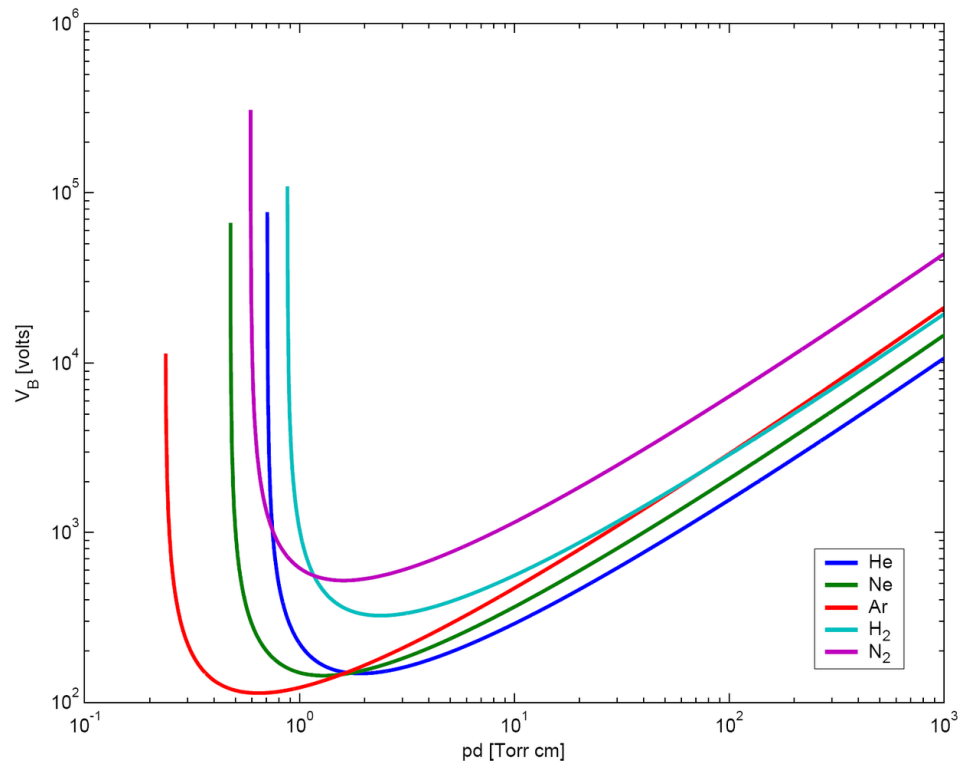
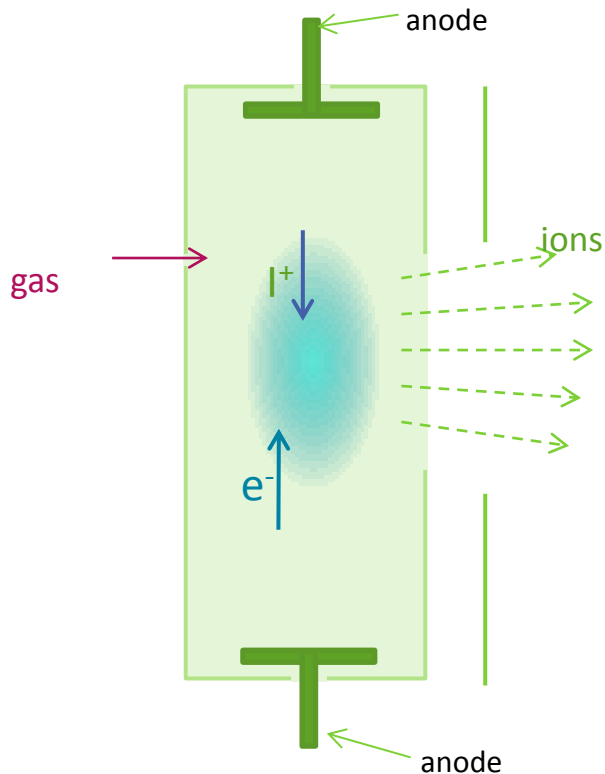
Proton radiotherapy IS

Development and trend in radiotherapy since 2011

- about 30 new proton therapy facilities over the world
- new (improvement of) accelerators ... new manufacturers:
 - S2C2 superconducting accelerator at IBA
 - compact 330MeV synchrotron at PROTOM
 - Gantry mounted accelerator at MEVION
 - compact LINAC at AVO-ADAM

Proton radiotherapy IS

DC Discharge



- Simple principle: breakdown of the gas using the Paschen law
- Many # configurations

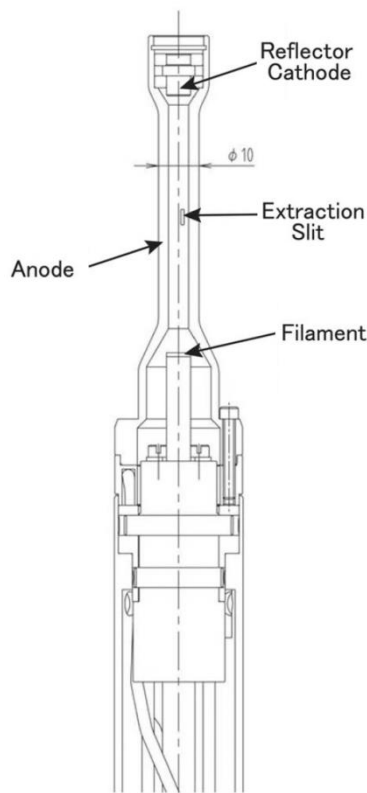
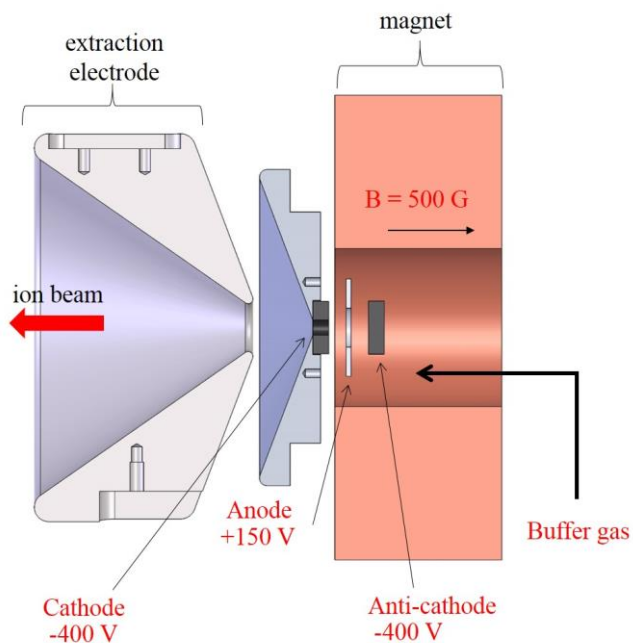
$$V_{\text{claquage}} = \frac{Bpd}{C + \ln(pd)}$$

Source : wikipedia

Proton radiotherapy IS

Penning Ionization Gauge (PIG)

Ion Beam Applications (IBA) &
Sumitomo Heavy Industry (SHI)
for the 235 MeV cyclotron



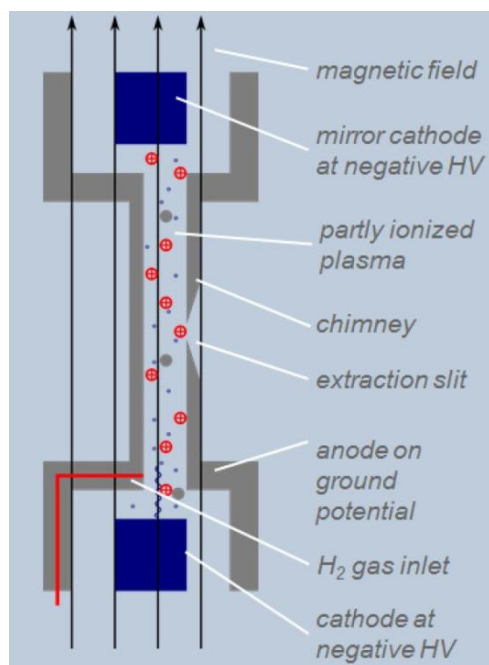
Type: Livongstone-type internal PIG
Arc voltage: 140 V
Arc current: 500mA
Max. beam current: $10 \mu\text{A}$, H^+
Life time Ta filament: 5 to 7 days
Gas flow: 1 to 2 sccm

P. Cailliau et al., Proc. Of Cyclotrons2016, Zurich
<http://jacow.org/cyclotrons2016/papers/tup02.pdf>, 2017
M. Muramatsu and A. Kitagawa, RSI 83, 02B909 (2012)

Proton radiotherapy IS

Penning Ionization Gauge (PIG)

VARIAN's 250 MeV cyclotron



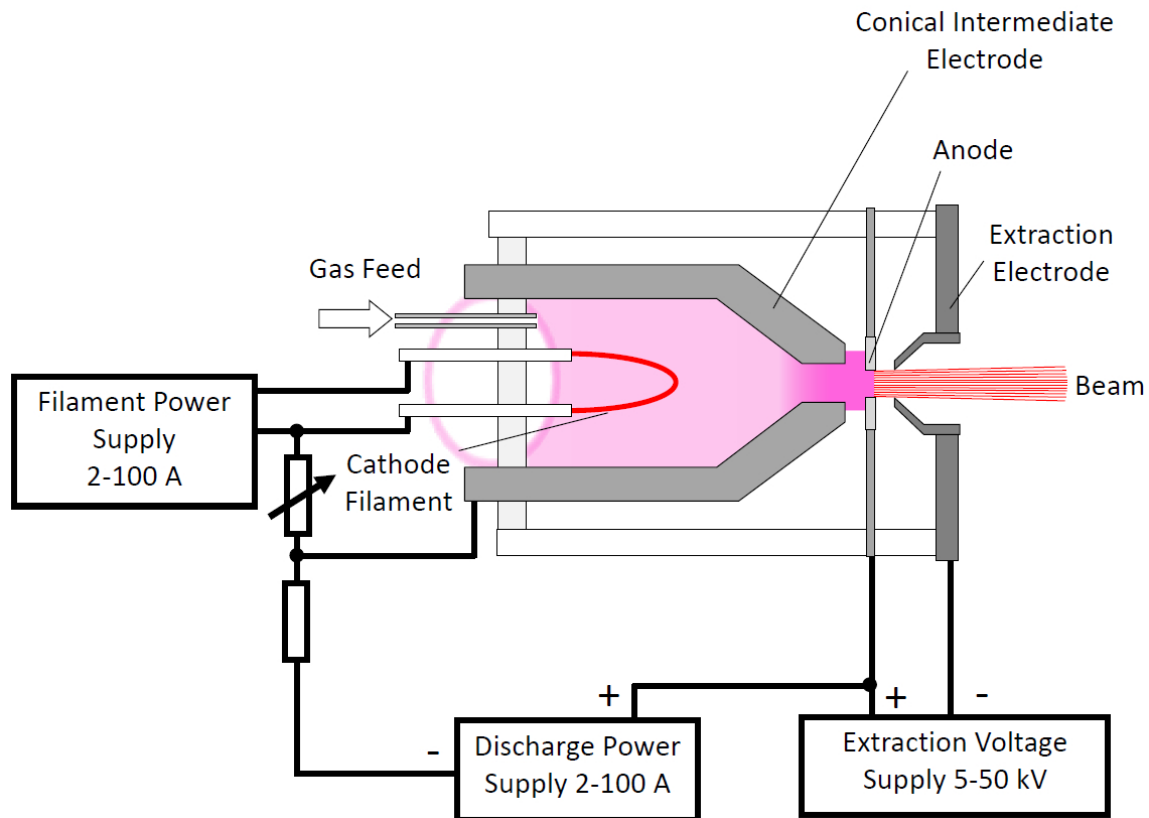
Type: Cold cathode PIG
Cathode voltage: -1 to -1,8kV
Discharge current: 300mA
Max. beam current: few 100 μ A, H⁺
Gas flow: few sccm

S. Busold et al., Proc. Of Cyclotrons2016, Zurich
<http://jacow.org/cyclotrons2016/papers/thp06.pdf>, 2017

Proton radiotherapy IS

DUOPLASMATRON FOR PROTONS

Original design of the Plasmatron by Manfred Von Ardenne (late 1940s)

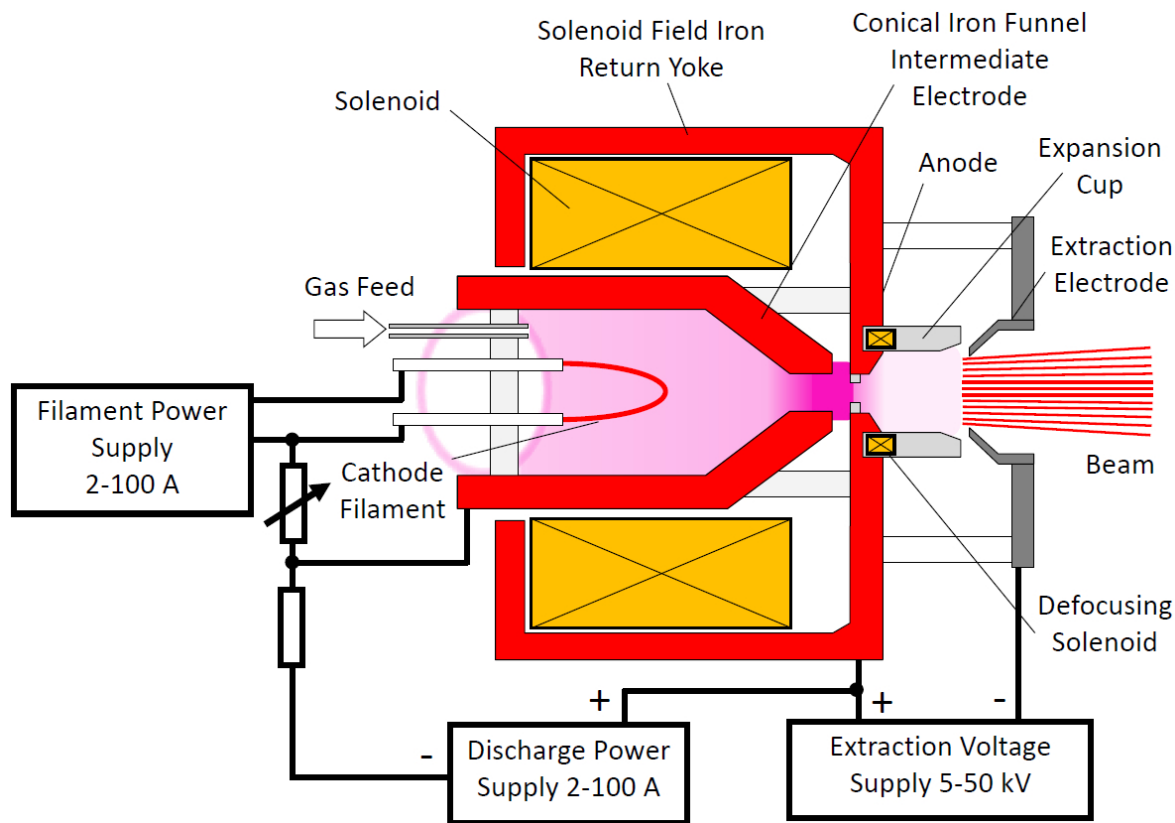


Dan Faircloth, CAS 2011, Bilbao, [arXiv:1302.3745](https://arxiv.org/abs/1302.3745), 2013

Proton radiotherapy IS

DUOPLASMATRON FOR PROTONS

Duoplasmatron design improves the Plasmatron with magnetic field
Manfred Von Ardenne (late 1956s)

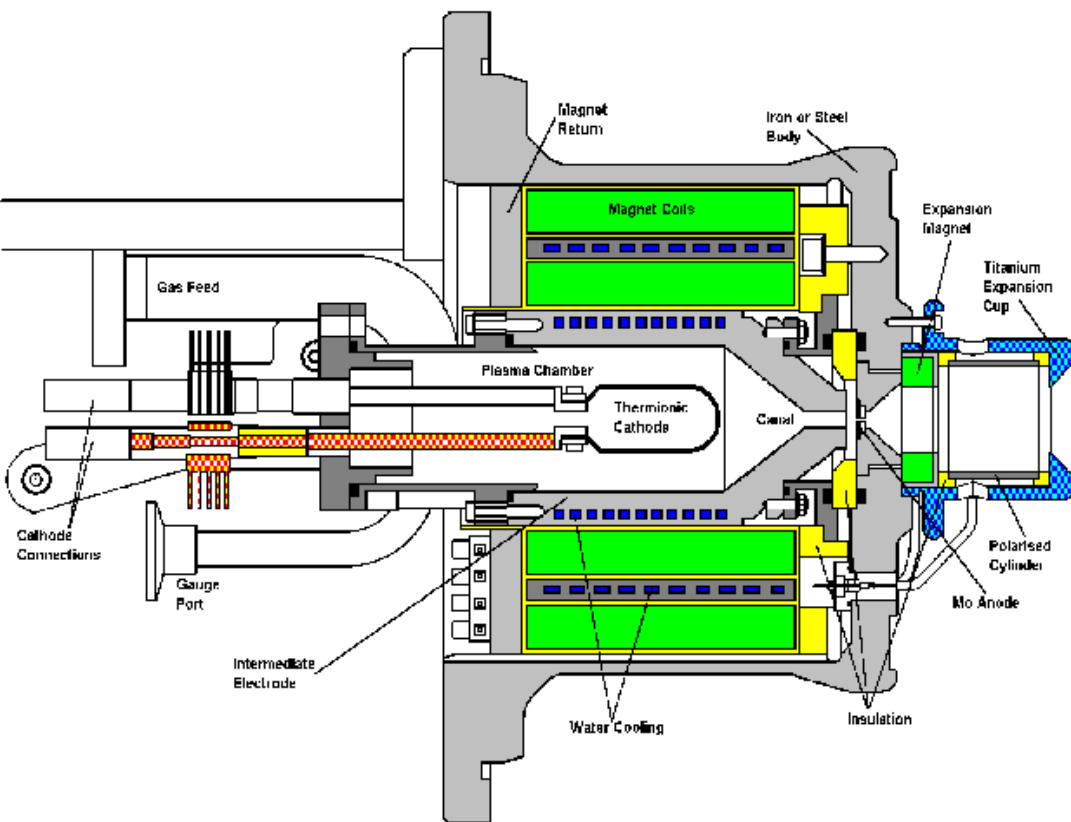


Dan Faircloth, CAS 2011, Bilbao, [arXiv:1302.3745](https://arxiv.org/abs/1302.3745), 2013

Proton radiotherapy IS

DUOPLASMATRON FOR PROTONS

OPTIVUS 230 MeV synchrotron



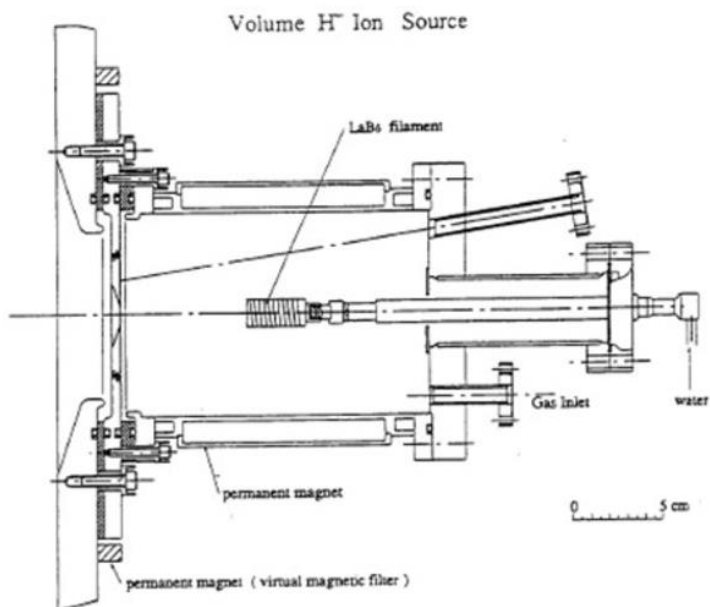
Type: Duoplasmatron
Arc voltage: 100 V
Extraction: up to 50kV
Max. beam pos. current: several mA, H⁺
Max. beam neg. current: few 10 μ A, H⁻
Off axis extraction for neg. operation
Life time > 1000 h

Dan Faircloth, CAS 2011, Bilbao, [arXiv:1302.3745](https://arxiv.org/abs/1302.3745), 2013

Proton radiotherapy IS

Volume H⁻ multicusp IS

TRIMPH Type DC Volume-Cusp H⁻ IS



A filament driven plasma is confined by a multicusp field



Type: Multicusp
Arc voltage: 200 V
Filament supply: 400 A, 10V
Extraction: up to 30kV
Max. beam neg. current: 5 mA, H⁻
Life time > 5200 h

Source: JPARC KEK Design.

Source : <http://www.d-pace.com>

Proton radiotherapy IS

RF Discharge IS

Frequency range 0.1 – 30 MHz

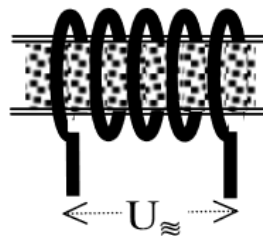
Power range 50 – 800 kW

Capacitive
coupling



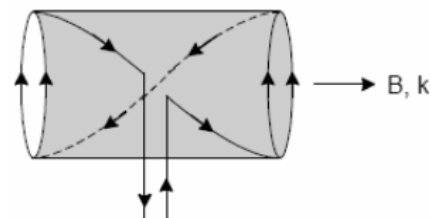
$f = 1 - 30$ MHz
 $P = 0.05 - 0.1$ kW

Inductive
coupling



$f = 0.1 - 13.5$ MHz
 $P = 0.1 - 100$ kW

Wave
Coupling (Helicon)



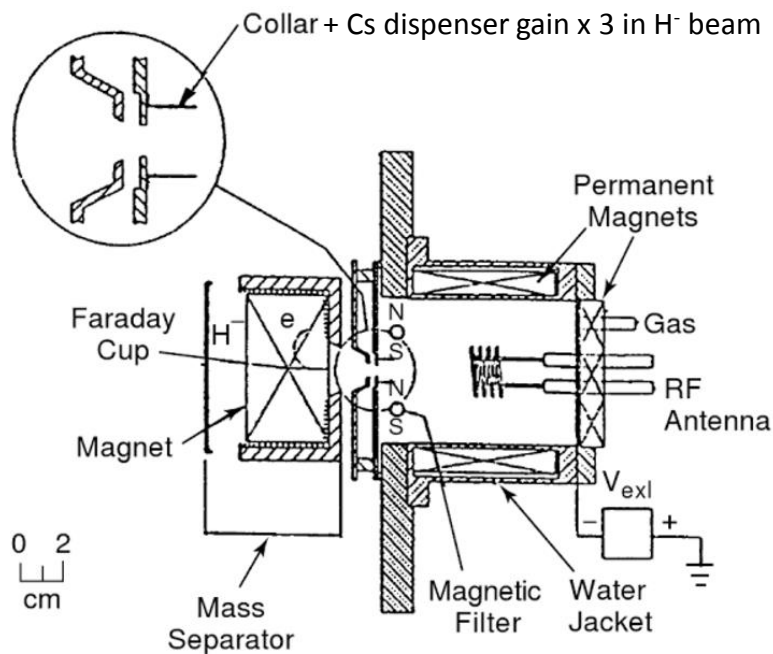
$f = 2 - 13.5$ MHz
 $P = 0.1 - 1$ kW

source: Kraus 2012

Proton radiotherapy IS

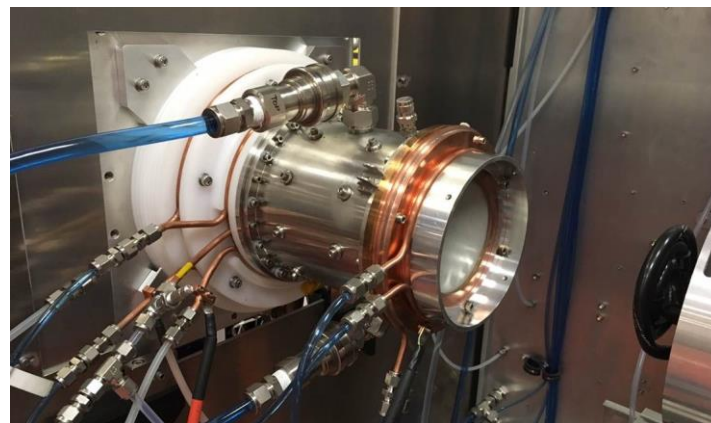
RF Discharge IS

LBLN RF driven multicusp volume source



35kV, > 35mA 100 μ s at 10Hz

TRIMPH & Jyväskylä RF Volume Cusp source



Type: RF Multicusp

No filament

Extraction: up to 30kV

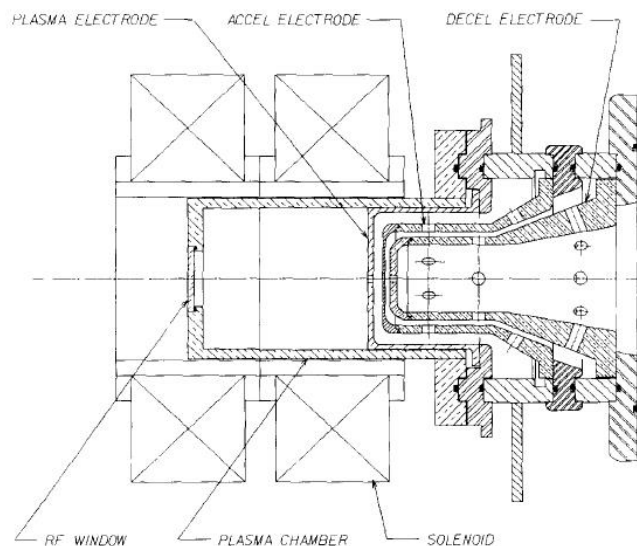
Max. beam neg. current: 7,5 mA, H^-

Life time > 1 year

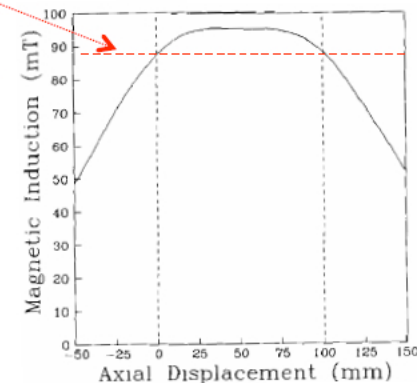
Proton radiotherapy IS

Microwave Discharge IS

Taylor type 2,45GHz ECR ion source



- Still a reference in the field
- $f=2.45$ GHz / 2 kW ECR frequency
 - BECR=0.087 T (easy to do)
 - Monomode cavity
- 2 open ECR surface
 - Purely axial field
 - NO MAGNETIC CONFINEMENT
- One single electron pass through ECR
 - $T_e \sim 1-20$ eV
 - $\Lambda_{0 \rightarrow 1+} \sim 7$ cm
- 1+ Ion Source
- Very high intensity: ~ 25 mA of H⁺
 - $\varnothing 4$ mm hole only
 - « High » pressure $P \sim 10^{-5}$ mbar
- Proton Fraction: H⁺ $\sim 90\%$
- H₂⁺ & H₃⁺ $\sim 10\%$
- Low emittance $\sim 0.07 \pi \cdot \text{mm} \cdot \text{mrad}$ 1σ RMS norm.



Source: NIM PR A309 (1991) 37-42

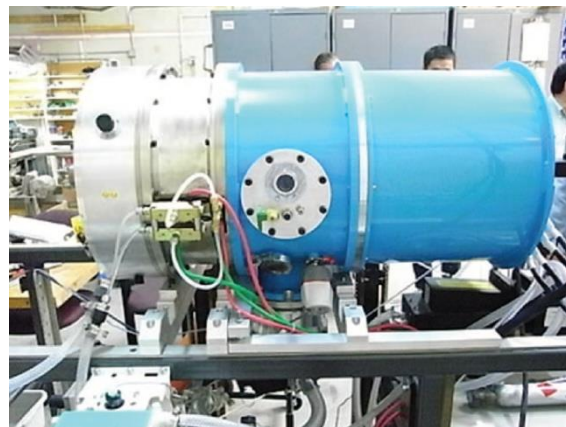
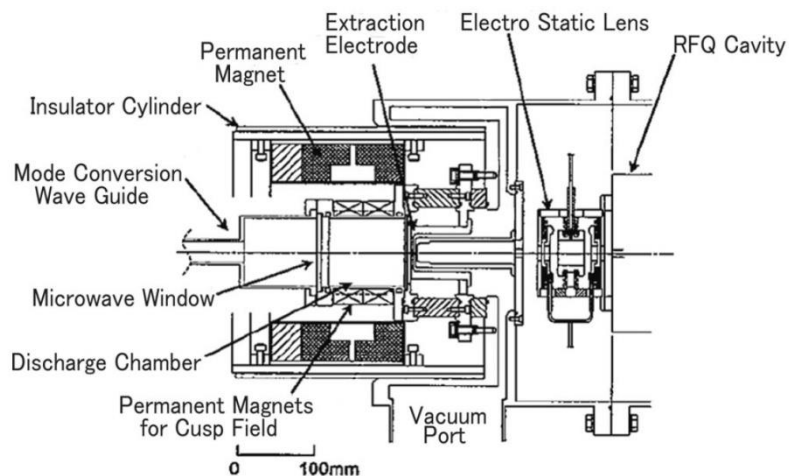
Source: T. Thuillier, CAS, Senec, 2012

Proton radiotherapy IS

Microwave Discharge IS

HITACHI & AccSys
250 MeV synchrotron

mitsubishi electric Co. (MELCO)
250 MeV synchrotron



Type: ECR discharge IS
Frequency: 2,45GHz
Max. current: 30mA DC, H⁺

Type: ECR discharge IS
Frequency: 2,45GHz
Max. current: 25mA DC, H⁺

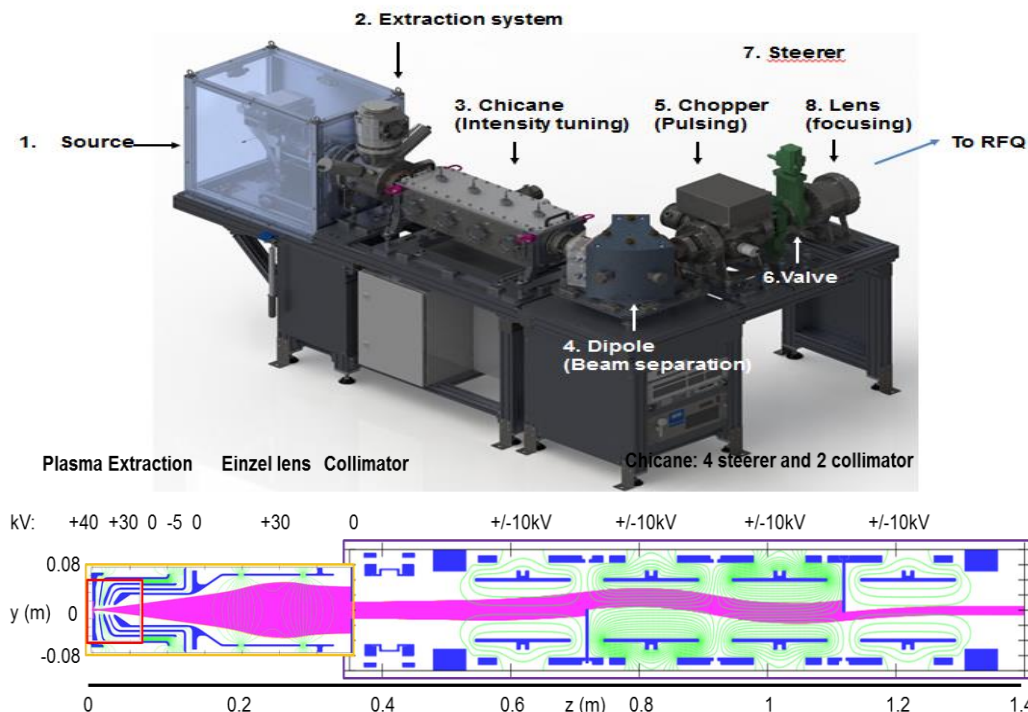
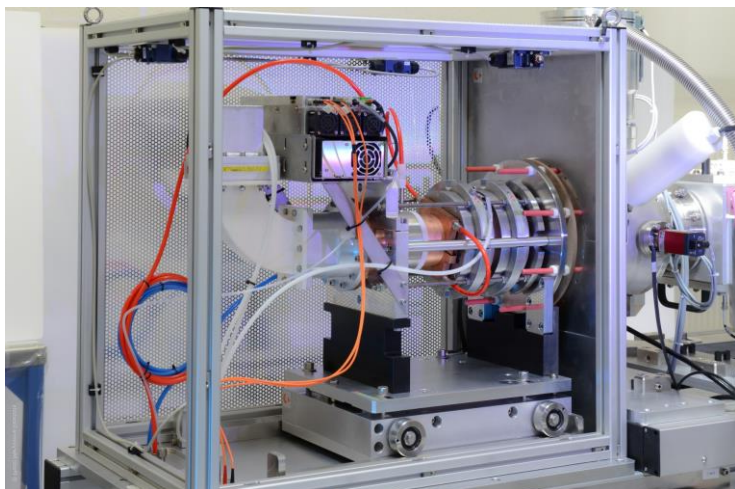
M. Muramatsu and A. Kitagawa, RSI 83, 02B909 (2012)

Proton radiotherapy IS

Microwave Discharge IS

Advanced Oncotherapy (AVO) /ADAM – LIGHT 230 MeV LINAC

Monogan M1000 from PANTECHNIK



Type: ECRIS
Extraction: 40kV
Frequency: 2,45GHz
Max. current: 1mA DC @80W RF, H⁺

With chicane + chopper:
Current from 1 to 300μAe variation
at 200Hz
Beam pulses from 5 to 20μs
PID controlled

Heavy Ion radiotherapy IS

Heavy Ion radiotherapy facilities (mostly) accelerate carbon ions

Final energy is up to 430MeV/u with several 10^8 or 10^9 pps

Only ECR ion sources can supply C^{x+} ion for this requirement

➤ First let's describe shortly ECR IS principle

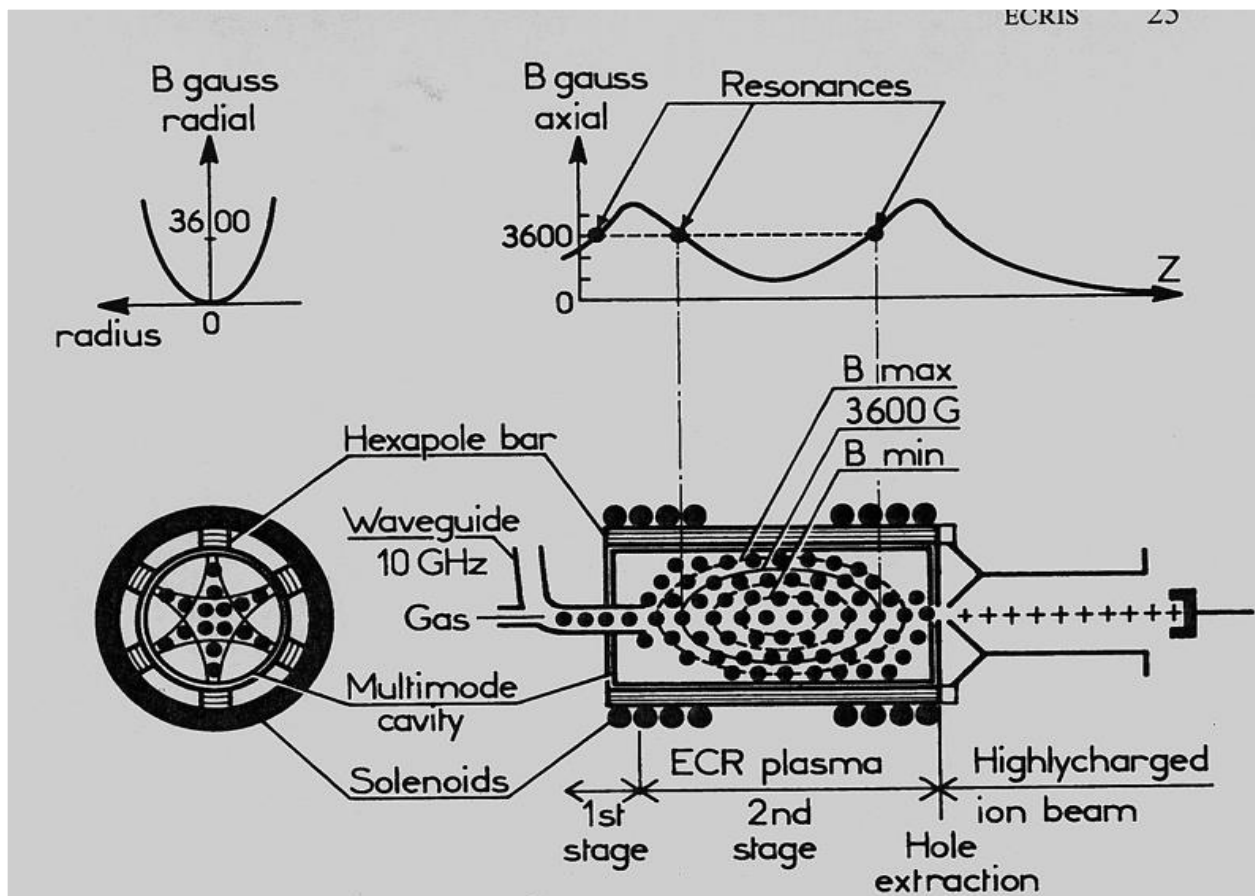
Heavy Ion radiotherapy IS

ECR basics

The first ECR Ion Source, named SUPERMAFIOS, was invented at CEA Grenoble by R. Geller team (France)



R. Geller

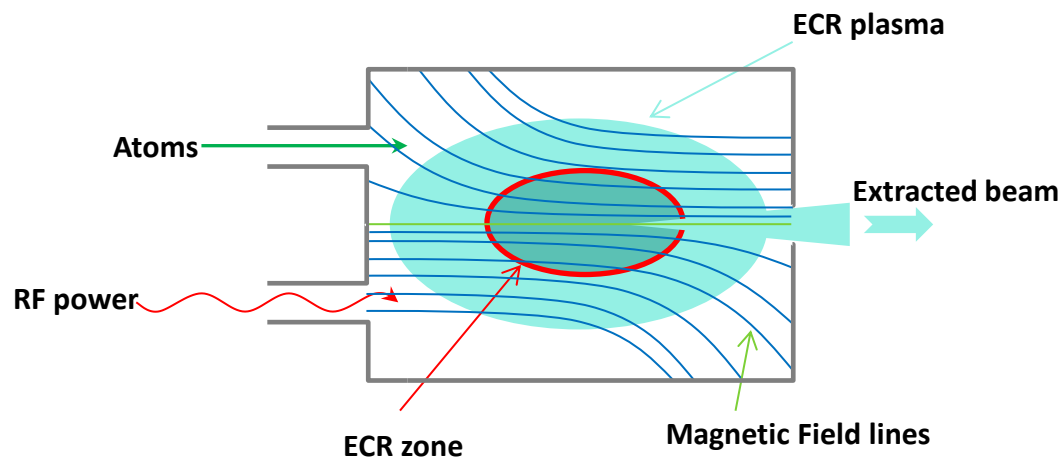


See: R. Geller, Ann. Rev. Nucl. Part. Science 40 (1990) 15.

Heavy Ion radiotherapy IS

ECR basics

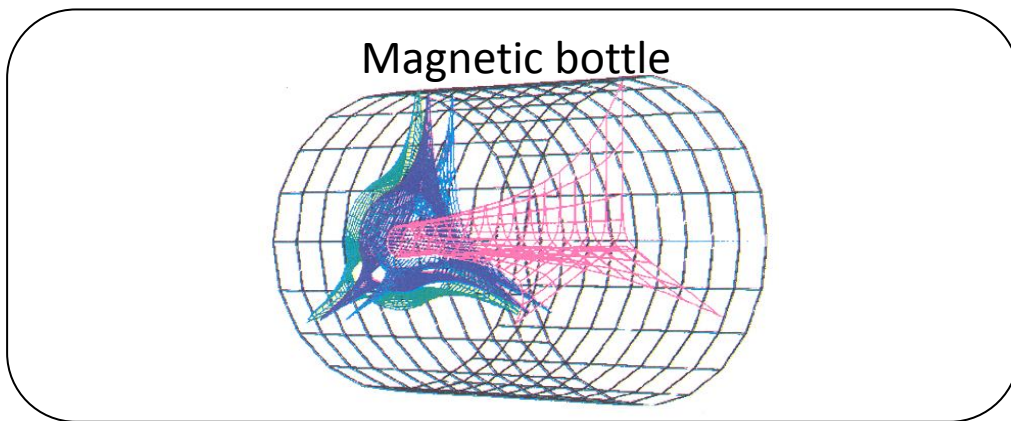
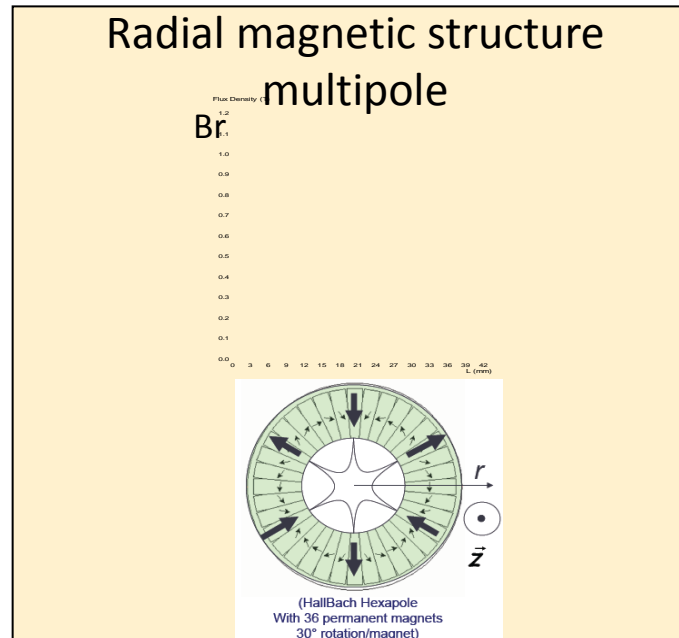
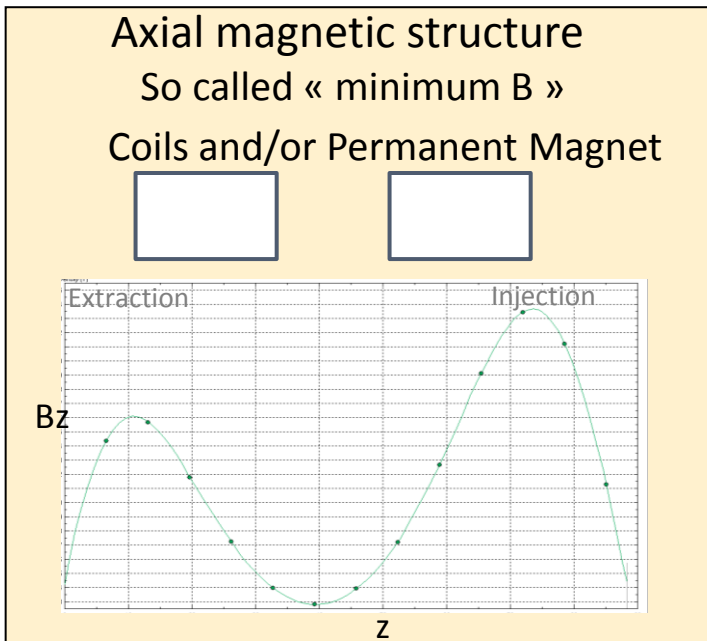
- A secondary vacuum level to allow multicharged ion production
- A RF injection into the cavity (multimode)
- A sophisticated magnetic field for
 - Transfer RF power to the electrons using the ECR mechanism
 - ensure the confinement of hot electrons that ionize the atoms
 - ensure the confinement of the ions long enough to get multiple ionizations
 - ensure the stability of the plasma
- An atom injection system to sustain the plasma density
- An extraction system to accelerate the ions from the plasma



Heavy Ion radiotherapy IS

ECR basics

MAGNETIC CONFINEMENT



Heavy Ion radiotherapy IS

ECR basics

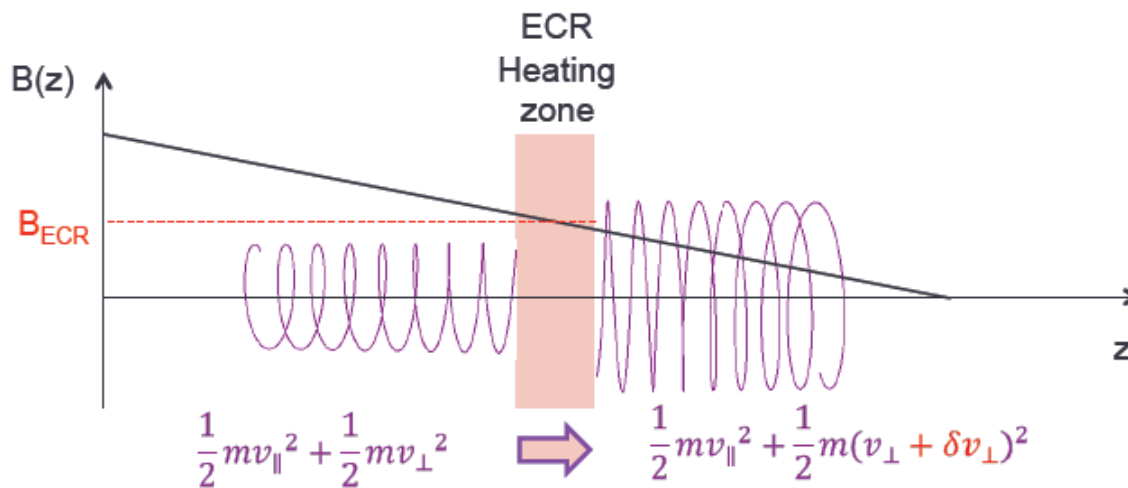
Electron heating

Electron frequency

$$f = \frac{q_e B}{2\pi m_e}$$

Resonance condition

$$B_{\text{res}} = \frac{2\pi m_e}{q_e} f_{HF}$$



Field/frequency matching:
0,036 Tesla / GHz

$$B_{\text{min}} < B_{\text{res}} < B_{\text{max}}$$

Heavy Ion radiotherapy IS

ECR basics

Plasma oscillation & Cut-Off density

As a response to perturbation, the plasma shows a natural oscillation frequency:

$$\omega_p = \sqrt{\frac{n_e e^2}{m_e \epsilon_0}}$$

Dispersion relation of an EM wave in a plasma:

$$\omega^2 = \omega_p^2 + k^2 c^2$$

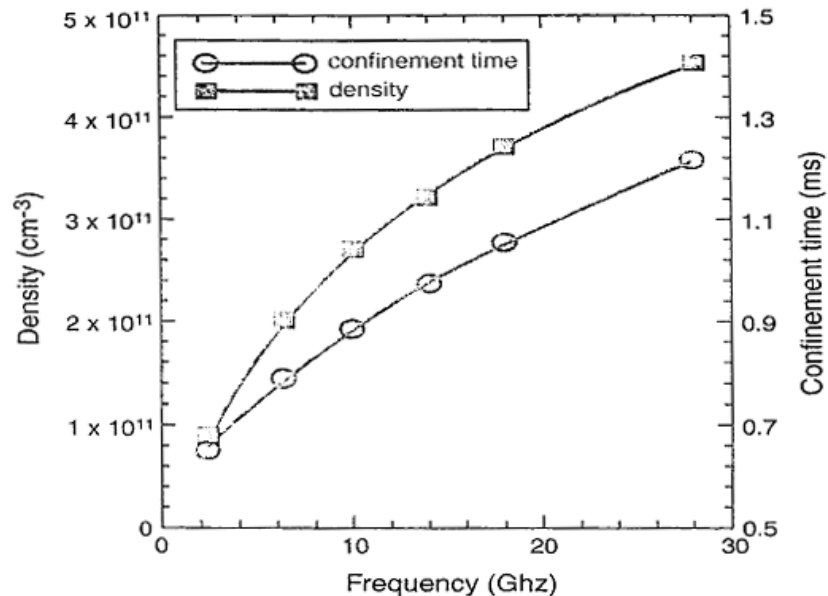
The wave propagates if :

$$\omega > \omega_p$$

ECR CUT-OFF FREQUENCY:
$$\omega > \omega_p \Rightarrow n_e < \frac{m_e \epsilon_0 \omega^2}{e^2}$$

Critical Density:

$$n_c = \frac{4\pi^2 \epsilon_0 m_e}{e^2} f_{HF}^2$$



Heavy Ion radiotherapy IS

ECR basics

ECR Scaling laws (R. Geller, 1987)

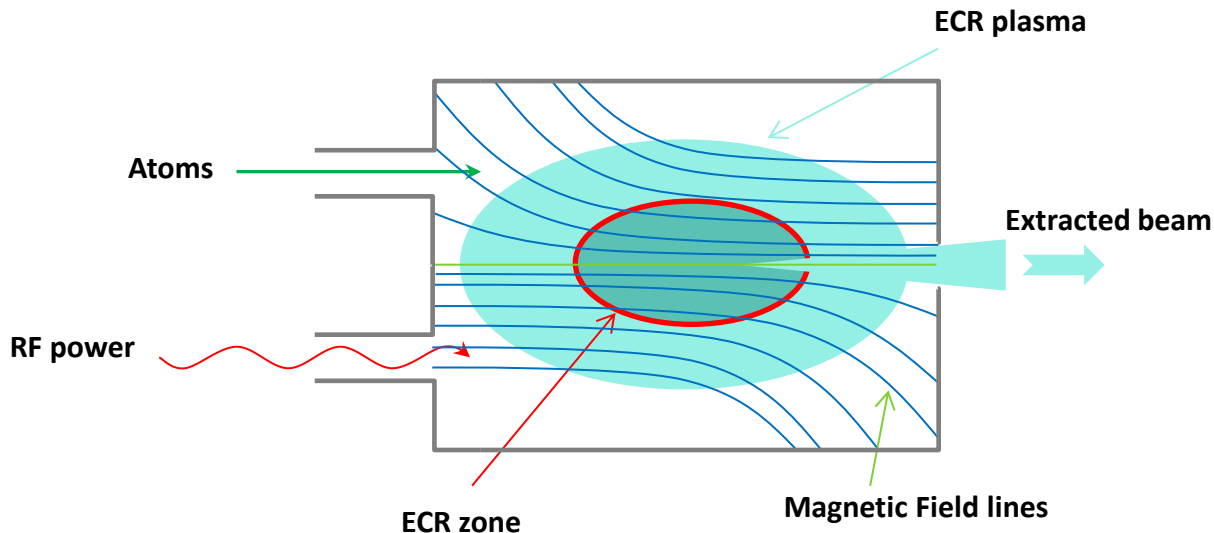
- The higher the **frequency**, the higher the **beam current**
- The higher the **RF power**, the higher the **beam current**
- Plasma density $n \sim f_{\text{ECR}}^2$
- Beam current $I \sim n \sim f_{\text{ECR}}^2$
- But the **higher** the ECR magnetic **field** required
- ECR magnetic field $B_{\text{ECR}} = \frac{f_{\text{ECR}}[\text{GHz}]}{28} \text{ Tesla}$ (or 0,036 T / GHz)

f_{ECR} [GHz]	λ_{ECR} [cm]	n_e [cm ⁻³]	$\Lambda_{0 \rightarrow 1+}$ [cm]	$T_{0 \rightarrow 1+}$ [μs]	B_{ECR} [T]
2.45	~12	7.4×10^{10}	~7	~10	0.09
14	~2	2.5×10^{12}	0.2	3	0.5
28	~1	~ 10^{13}	0.05	0.7	1
60	~0.5	4.4×10^{13}	0.01	0.17	2

Heavy Ion radiotherapy IS

ECR basics

Ion beam Dynamics and formation



Atomic effusion* probability depends on:

- geometry of the chamber
- temperature of the atoms
- mass of the atoms

Ionic effusion* probability depends on:

- geometry of the magnetic field
- elastical collisions
- distribution of the plasma potential

Sticking probability depends on:

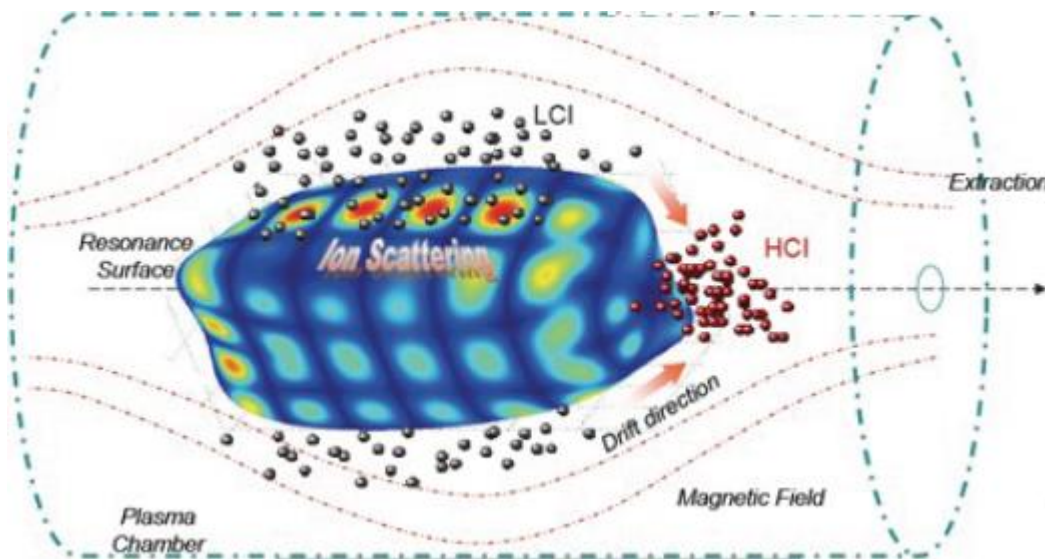
- plasma feature
- element to ionise
- trajectory

* effusion: particle motion inside the vacuum chamber

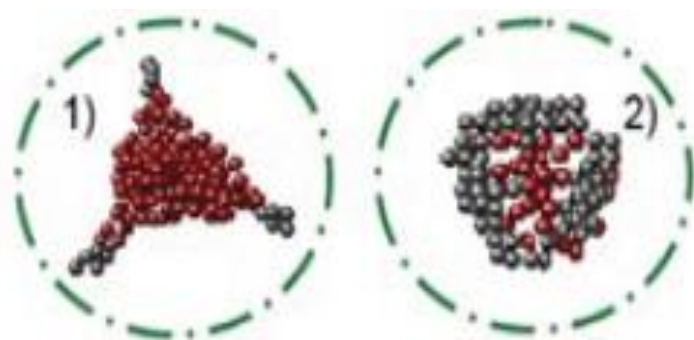
Heavy Ion radiotherapy IS

ECR basics

Ion beam Dynamics and formation



Perturbations of the **Primary Plasma Potential (PPP)**, due to the **electric field patterns**, strongly influence the **beam formation**.

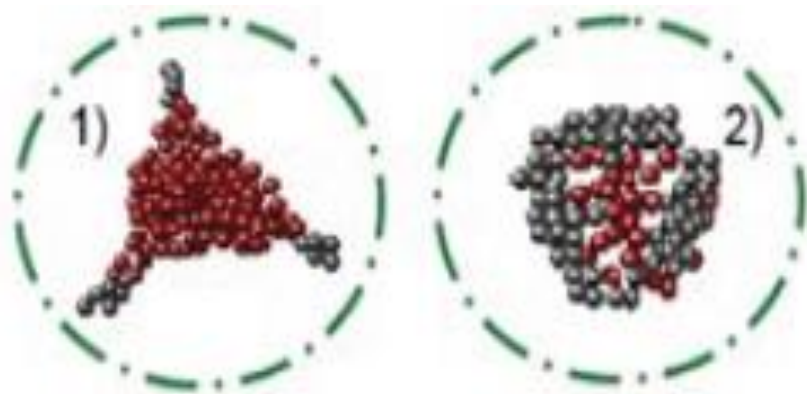


Distribution depends of the E field patterns inside the plasma

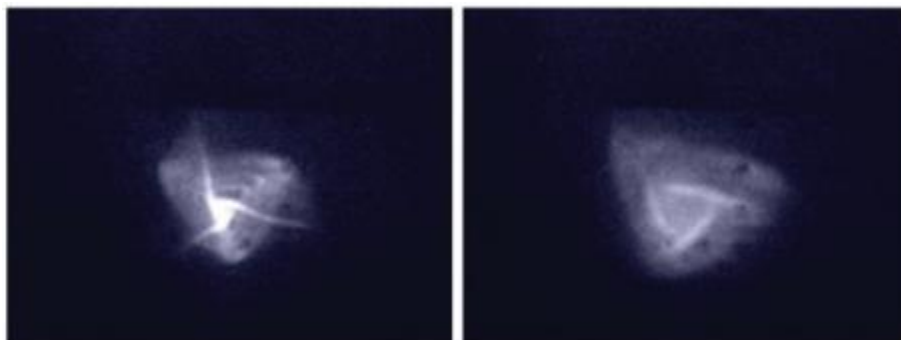
Heavy Ion radiotherapy IS

ECR basics

Ion beam Dynamics and formation



- 1) **Optimal Source performances:**
Highly Charged ions concentrated in the center of the extracted beam
- 2) **Bad Source performances:** ion scattering injects lowly charged ions in the loss cone. The beam periphery is populated by LCI

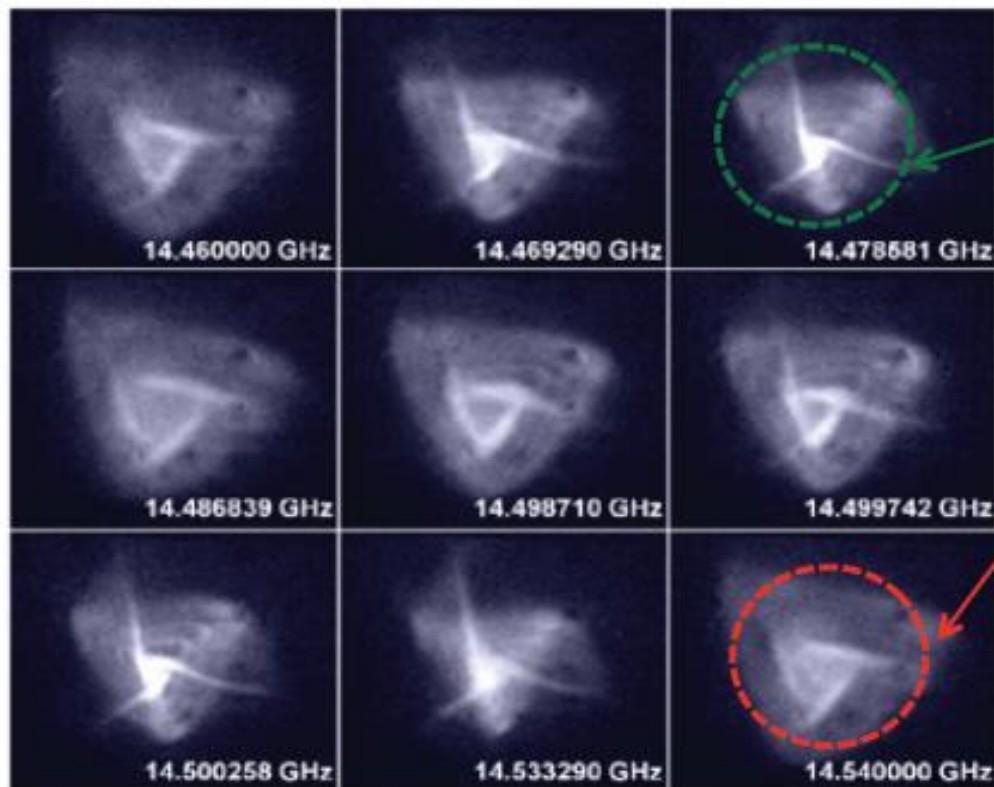


Also **Ion Dynamics** may take advantage from **Frequency Tuning**

Heavy Ion radiotherapy IS

ECR basics

Ion beam Dynamics and formation



Well focused and high brightness beam

Broadened, low brightness beam



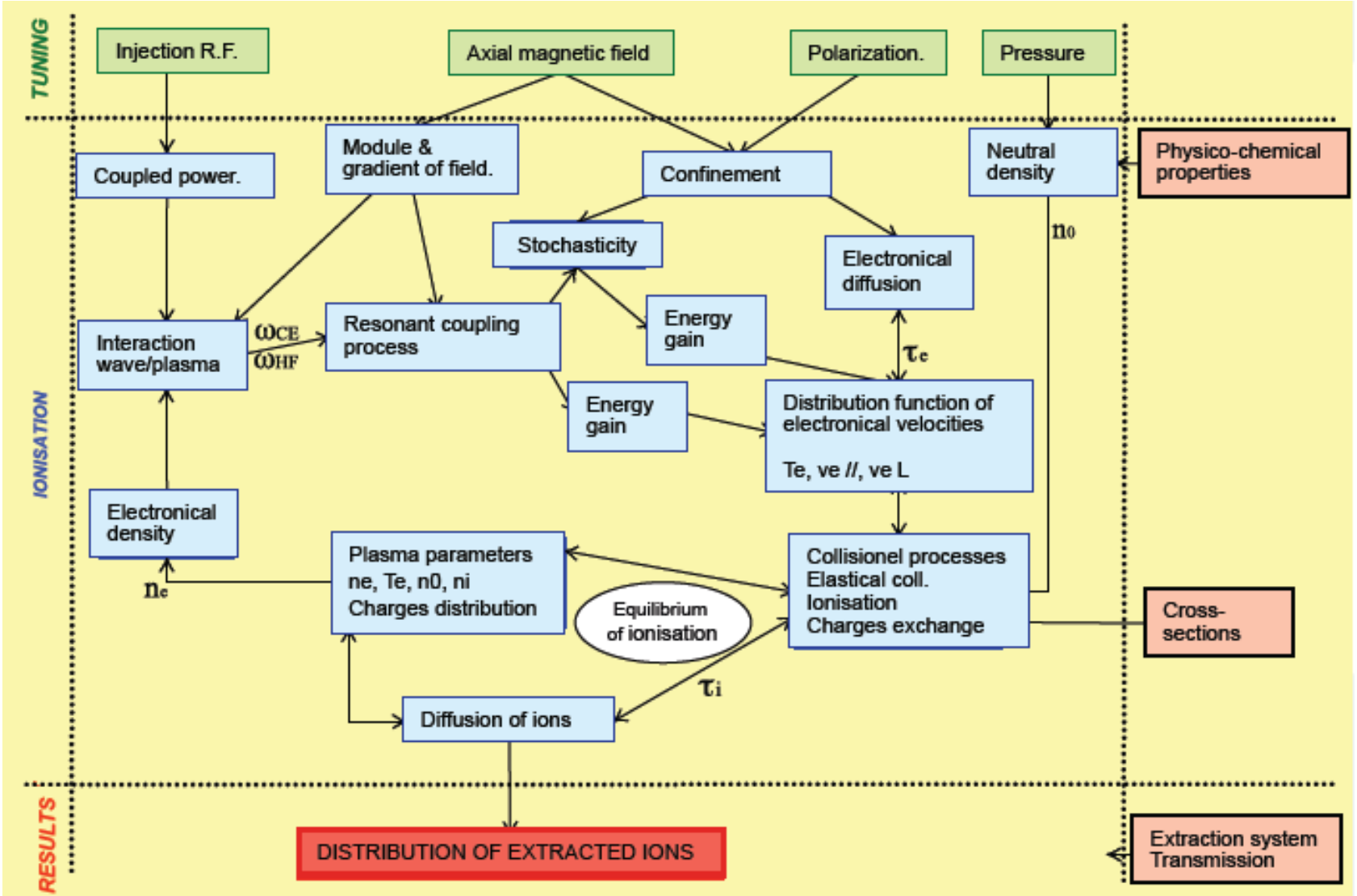
The Frequency Tuning strongly affects also the beam shape and brightness

VT1 viewer (around 25 cm far from the extraction electrode)

L. Celona, G. Clavola, F. Consoli, S. Gammino, F. Maimone, D. Mascali, P. Spaätke, K. Tinschert, R. Lang, J. Mäder, J. Roßbach, S. Barbarino, R.S. Catalano, *Rev. Sci. Instrum.*, 79, 023305 (2008).

Heavy Ion radiotherapy IS ECR basics

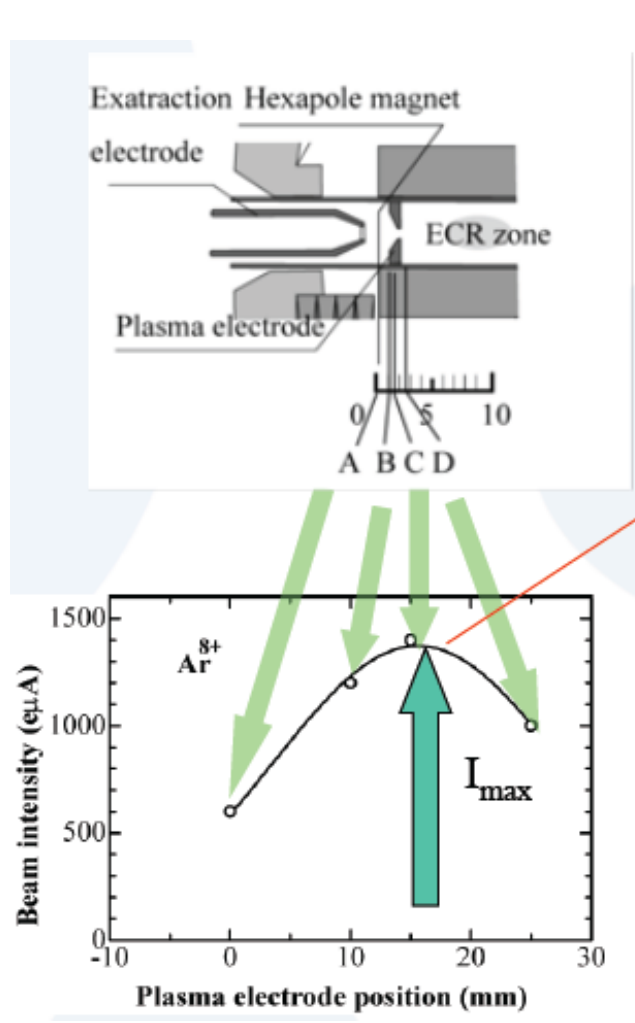
Interdependency of parameters



Heavy Ion radiotherapy IS

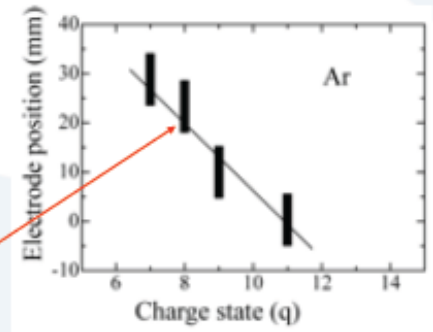
ECR basics

Parameters of improvement of an ECRIS : **Plasma electrode location**

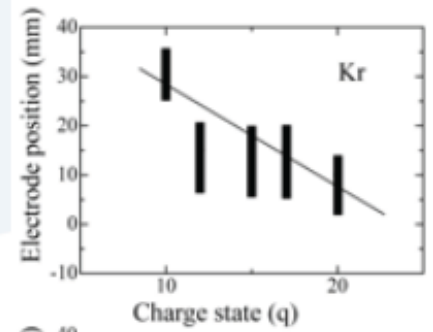


Optimum position

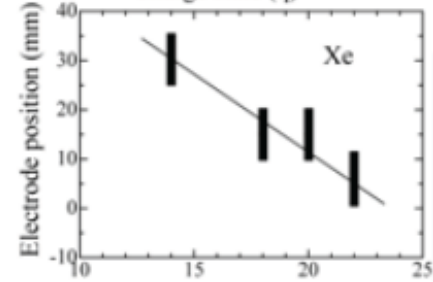
Ar



Kr



Xe

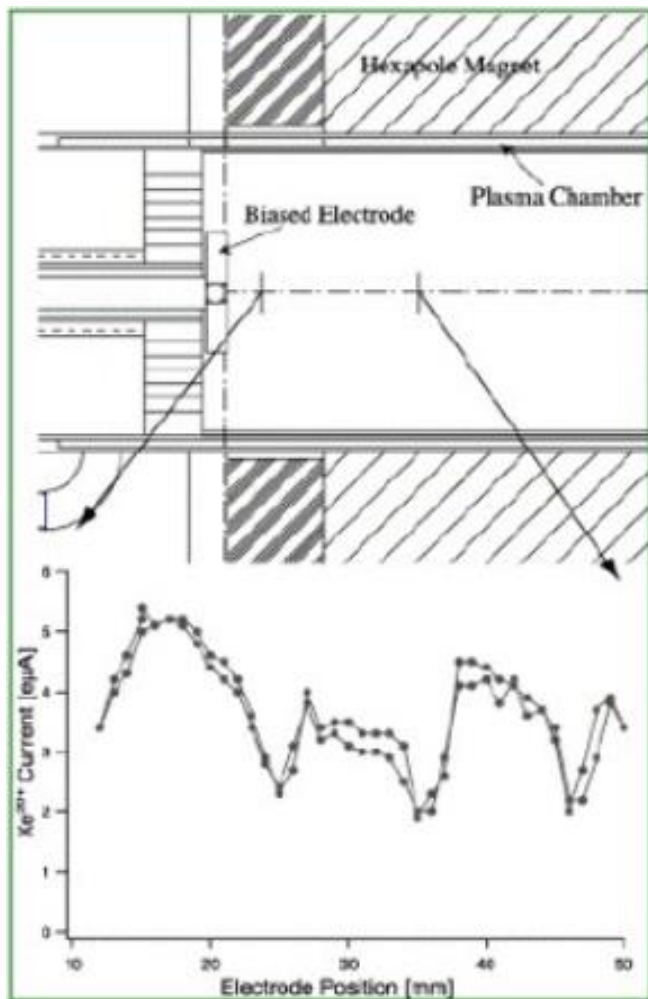


N. Nakagawa

Heavy Ion radiotherapy IS

ECR basics

➤ Parameters of improvement of ECRIS : DC biased disk/tube effect



➤ The beam intensity is strongly dependent on the position of the DC biased disk

➤ Better to have an adjustable length of the plasma chamber to be able to change the matching conditions between the plasma and the microwaves

↪ Current gain by 2 to 10



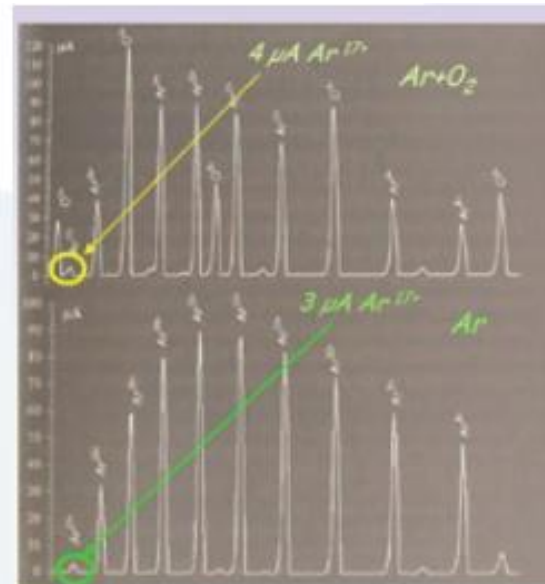
Heavy Ion radiotherapy IS

ECR basics

Parameters of improvement of ECRIS : Gas mixing effect

Gas mixing technique (1983)

- experimental technique to increase the output of multi-charged ions
- Addition of a lighter gas than the gas (or metal) of interest :
Example: I (Arq^+) more intense with O than with Kr
- Cooling effect on heavy ions by collision ion/ion
- Diminution of the plasma potential



↪ Current gain by 1 to 5

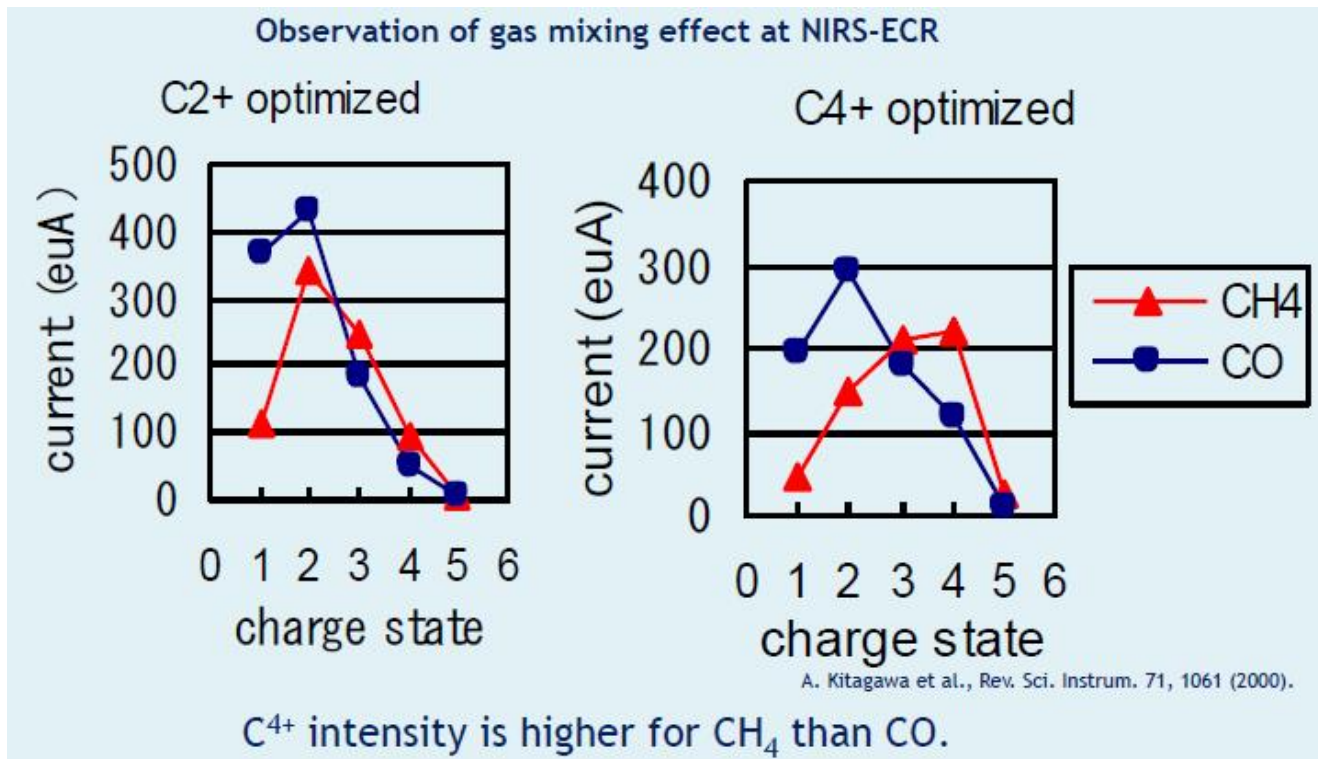
Pb1: I (Arq^+ , Krq^+ , Xeq^+) are more intense with ¹⁸O than with ¹⁶O.

⇒ The gas mixing is still not well understood

Heavy Ion radiotherapy IS

ECR basics

➤ Parameters of improvement of ECRIS : Gas mixing effect

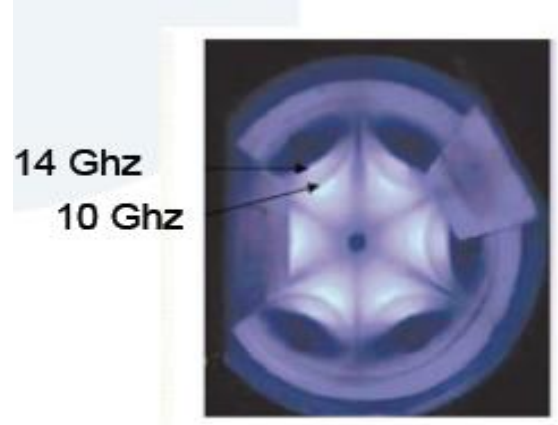
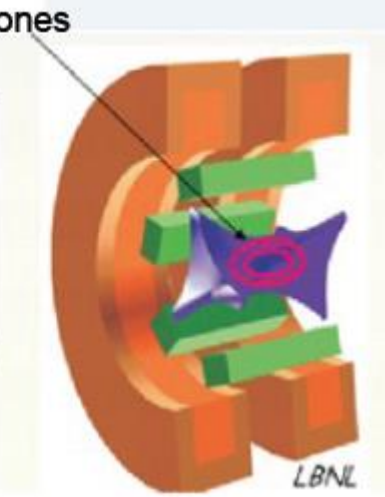
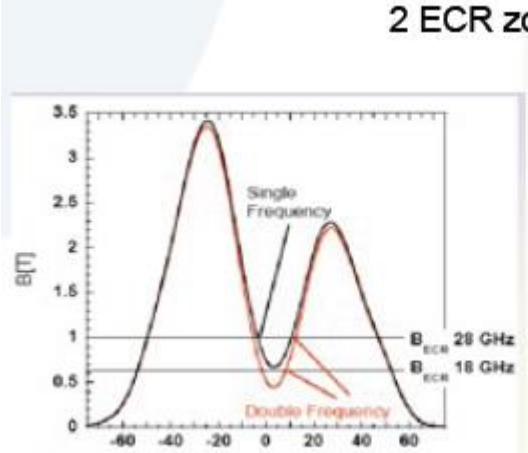
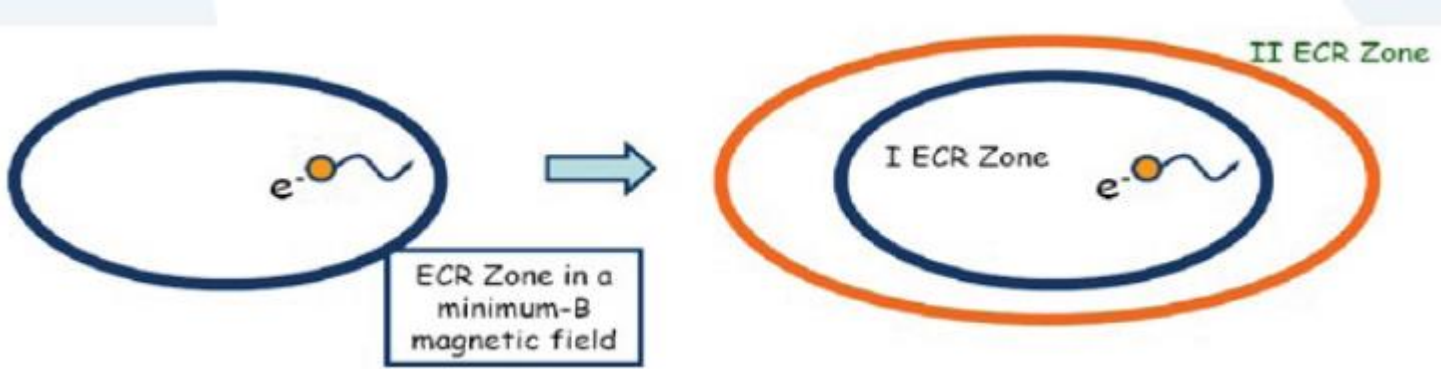


- CH₄ for higher beam intensity
- CO₂ + He enhance carbon recycling to the wall and gives high stability

Heavy Ion radiotherapy IS

ECR basics

➡ Parameters of improvement of ECRIS: RF double frequency injection

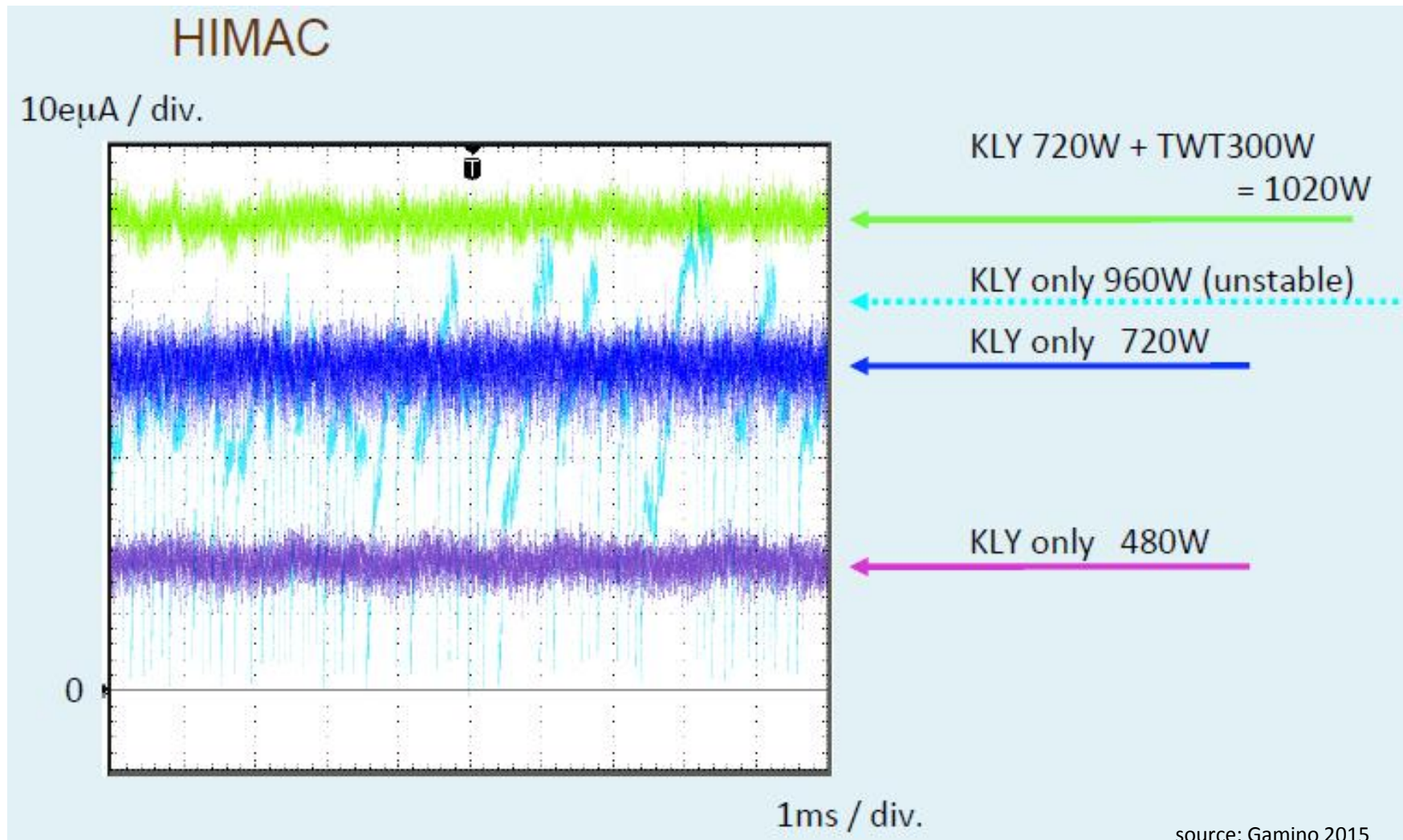


➡ Current gain by 1 to 2 for a constant total RF power

Heavy Ion radiotherapy IS

ECR basics

Parameters of improvement of ECRIS: RF double frequency injection



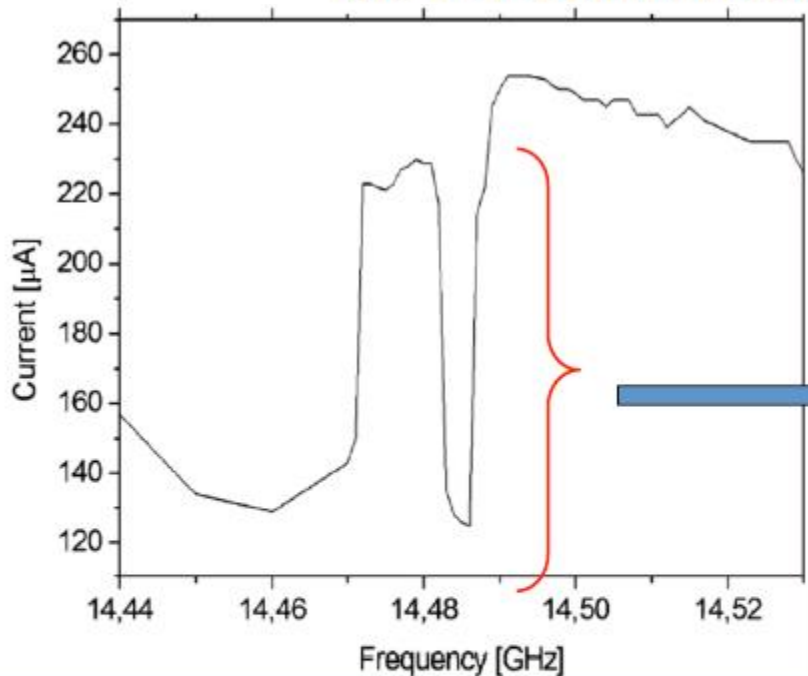
source: Gamino 2015

Heavy Ion radiotherapy IS

ECR basics

➤ Parameters of improvement of ECRIS: RF frequency fine tuning

Evidence of Frequency Tuning Effect (FTE) on the SUPERNANOGAN source



Trend of the analyzed C⁴⁺ current versus the RF frequency.

The extracted current is doubled after a frequency shift of 5 MHz

Transmission of a cyclotron or a RFQ changes significantly when the frequency of the source is slightly changed.

source: Gamino 2015

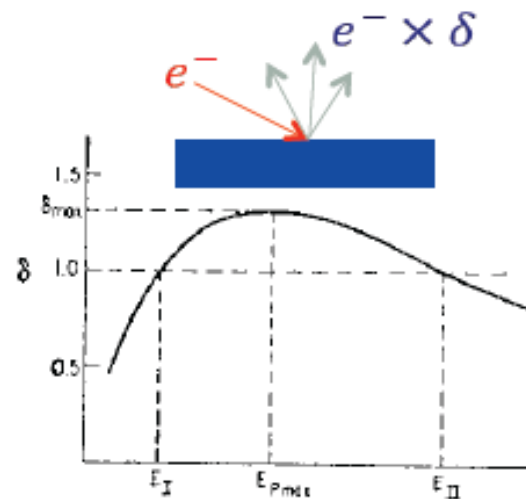
Heavy Ion radiotherapy IS

ECR basics

➤ Parameters of improvement of ECRIS: Plasma chamber wall interactions

Secondary Electron Emission

- Impinging electrons to the wall generate secondary electrons flux that are accelerated toward the plasma
- Excellent feedback effect on plasma density
- The Yield Strongly depends on material



Secondary electron Yield δ vs primary electron energy

Source J. Arianer, IPNO

Material	Al	C (soot)	Cu	SiO ₂	Al ₂ O ₃	MgO
δ	1.0 – 1.2	0.45	1.3	2.1 - 4	2 - 9	3 – 15
$E_{\delta_{max}}$ [eV]	300	500	600	400	-	400 - 1500

Heavy Ion radiotherapy IS

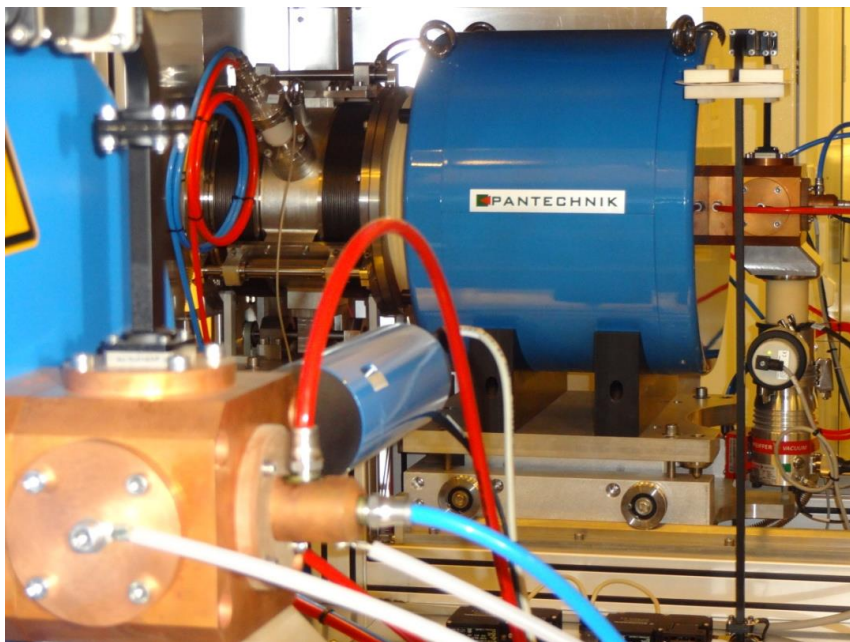
➤ The latest operational facilities are using full compact permanent magnet ECRIS

Source	SUPERNANOCHAN	Kei series
Manufacturer	PANTECHNIK	NIRS – MELCO
TYPE	ECR	ECR
Ion	Carbon	Carbon
Charge	4+	4+
Required intensity	Low	High
Extraction Voltage	24kV	30kV
Purpose	Wide Use	C ⁴⁺ production
Frequency	14.25-14.75 GHz	9.75-10.25 GHz
Operation	CW or pulsed mode	Pulsed mode
Gas	Carbon oxide (+He)	Hydrocarbon

➤ LECR3 Hybrid ECRIS from IMP produces C⁴⁺ beam for the Heavy Ion Research Facility in Lanzhou (HIRFL) Facility

Heavy Ion radiotherapy IS

SUPERNANOGAN



**Heidelberg, CNAO, Marburg,
Kiel, Shanghai, MedAustron,
Kiramis**

ECRIS	All NdFeB permanent magnets
Frequency	14.25-14.75 GHz (~250 W)
Mode	CW or pulsed (10Hz – 5ms)
Ions	C^{4+} ... and $_3H^+$, He^{2+} , O^{6+} , Ar^{x+}
Extraction voltage	24kV to 30kV
Emittance	$< 0.3 \pi \cdot mm \cdot mrad$ for 200 μA C^{4+}
Stability	$< +/-2,5\%$ in intensity
Uptime	$> 98\%$ (measured at HIT)
Maintenance	Parts replacement once a year

Heavy Ion radiotherapy IS

Kei2 KeiGM

Kei series



HIMAC, Gunma U., Saga, iRock

ECRIS	All NdFeB permanent magnets
Frequency	9.75-10.25 GHz (~300 W)
Mode	pulsed
Ions	C ⁴⁺ ... and He ²⁺ , O ⁶⁺ , Ar ⁸⁺
Extraction voltage	30kV – 40kV
Emittance	< 0.3 π .mm.mrad for 300 μ A C ⁴⁺
Stability	< +/-2,5% in intensity
Uptime	-
Maintenance	Parts replacement once a year

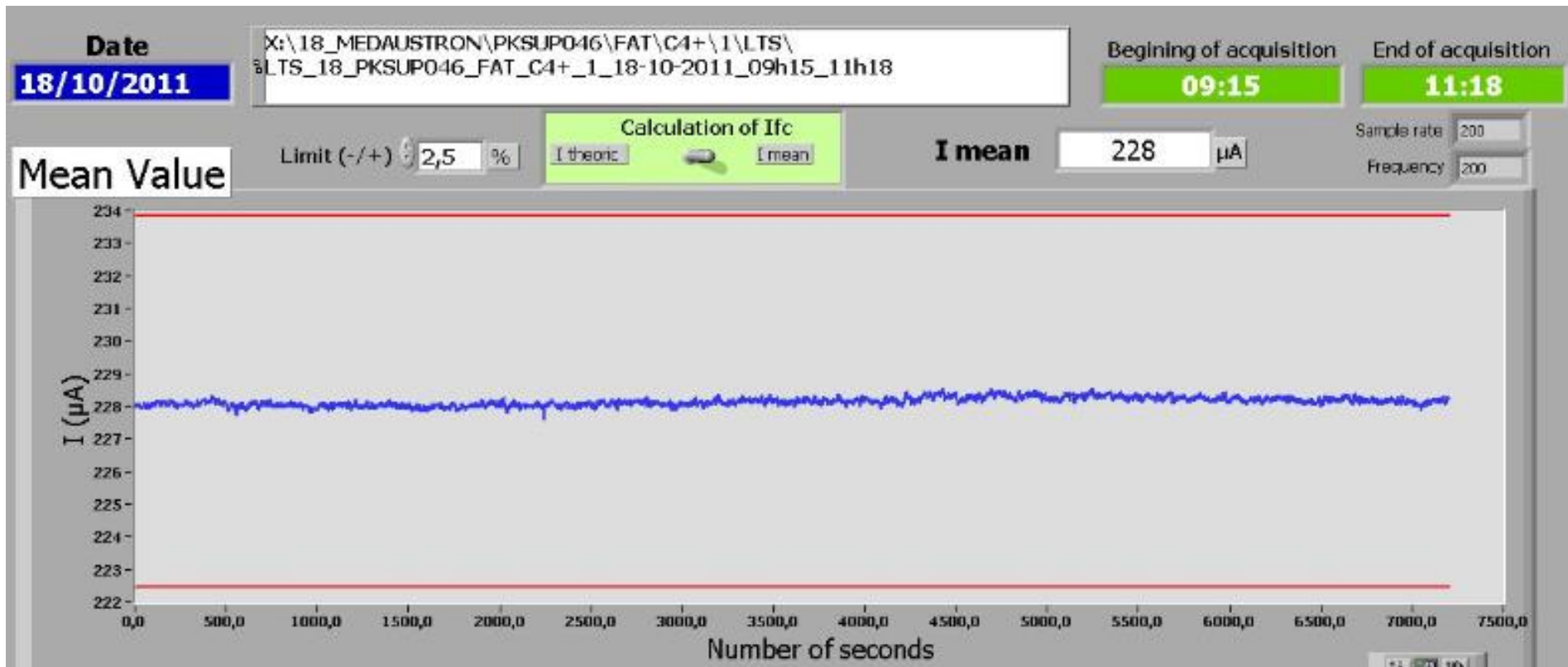
Heavy Ion radiotherapy IS SUPERNANOGAN: control panel

The screenshot displays the SUPERNANOGAN control panel with several key sections:

- Interlocks state:** A vertical list of green status indicators for components like IP low, IP high, EP, TP6256 error, LP, Ground system, CASEMATE, RF, HV, Screen, GND stick, HV door, T1 DC bias temp, T2 Plasma chamber temp, T3 Puller temp, T4 Focus temp, W1 DC bias flow, W2 Plasma chamber flow, W3 Puller flow, W4 Focus flow, and W5 general flow. It also includes buttons for HV RESET and RF RESET, and a GATE VALVE control with GLV OPENED and GLV CLOSE indicators.
- FARADAY CUP (μA):** Shows a large red digital readout of 230.38 and a corresponding waveform graph.
- HIGH VOLTAGE POWER SUPPLIES:** Contains sub-sections for HV SOURCE (with HV SOURCE ON buttons and current/potential read/write values), HV DC BIAS (with HV DC bias ON buttons and current/potential read/write values), HV FOCUS (with HV FOCUS ON buttons and current/potential read/write values), and HV PULLER (with HV PULLER ON buttons and current/potential read/write values). Each sub-section includes a waveform graph and a horizontal slider.
- PRESSURE MONITOR:** Displays Injection Pressure (1.06E-4 mBar), Extraction Pressure (1.28E-7 mBar), and Line Pressure (1.71E-7 mBar) with their respective waveforms and control buttons (EP, LP).
- GAS INJECTION SYSTEM:** Shows Mass Flow controllers for MFC Main1 (31.02%), MFC Main2 (0.00%), and MFC Support (22.60%) with vertical gauges and slope indicators.
- DIPOLE MAGNET:** Displays Dipole Magnet potential read (0.2 V), Dipole Magnet Current read (38.1 I), and measured in gauss (960.297). It includes a spectrum graph and a correction in gauss control.
- RF SYSTEM:** Features an RF AMPLIFIER section with STANDBY, RESET, TRANSMIT, CLEAR RF INHIBIT, and ENABLE RF INHIBIT buttons, along with Forward and Reverse power (W) controls and a Power meter (0 W). It also shows an RF GENERATOR section with RF OUTPUT ON and RF generator ON/OFF buttons, and RF generator write Attenuation (dBm) and frequency (Hz) controls.
- Other elements:** Includes a Path to Log folder, a SAVE DATA & SCREENSHOT button, and various start/stop buttons for FDAQ and LTS.

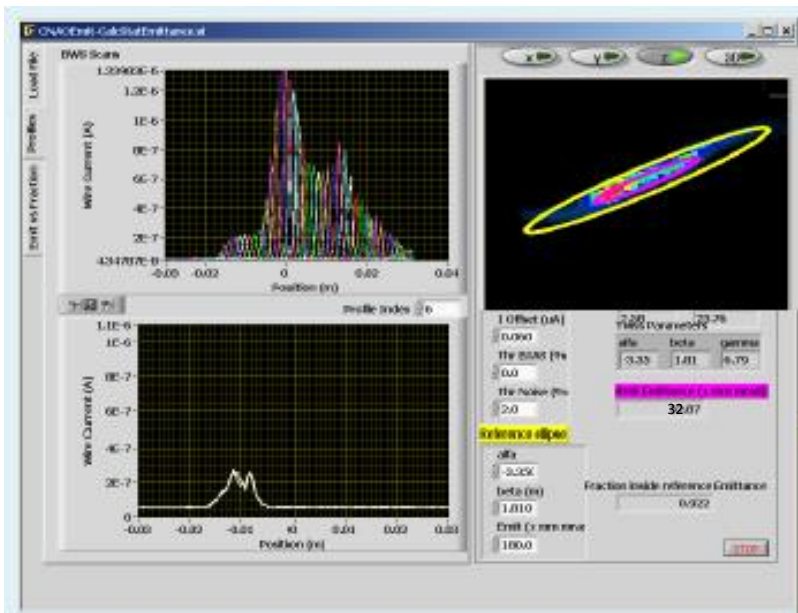
Heavy Ion radiotherapy IS

SUPERNANOAGAN: C⁴⁺ stability over 2 hours



Heavy Ion radiotherapy IS

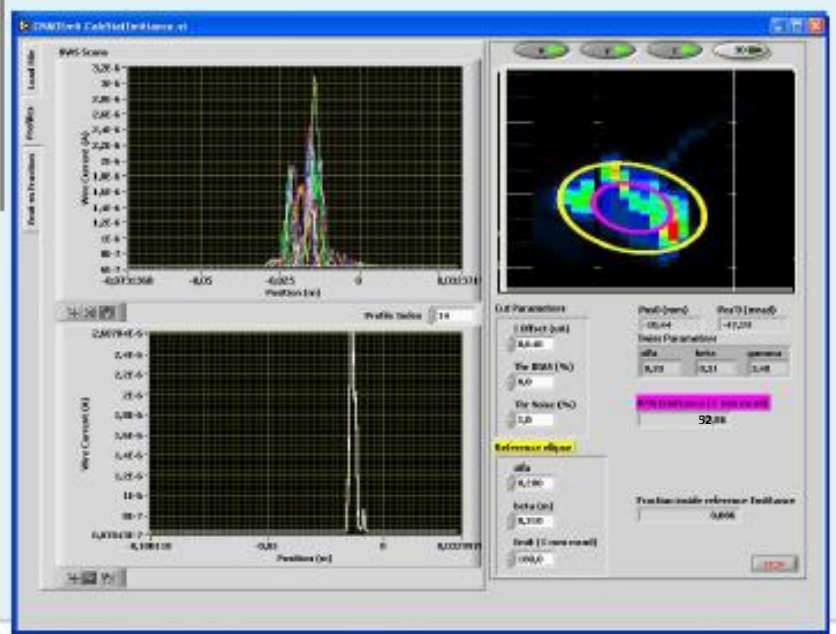
SUPERNANOGAN: emittance at CNAO



H₃⁺, 1.4mA
(design = 800 μA)

Emittance measured
after spectrometer

C⁴⁺, 250 μA
(design = 200 μA)



IS Developments for future radiotherapy

- Still further possible development to improve ECRIS:
 - fight against carbon deposition: material, gas mixing, pulsed operation
 - shorten the switch time from 2 beams without multiple IS (cost reduction)
 - RF injection improvement
 - Automatic feedback loop for long term operation
- Higher yields in C^{6+} for future cyclotron (C400 IBA, others ?)
 - 18GHz operation ... but require high magnetic field
 - Hybrid superconducting ECRIS are good candidates: PKISIS or Aisha
... or other IS based on electron impact without discharge
 - EBIS
 - Laser Ion Source (LIS) developed by JAEA/NIRS/Kyoto University

18GHz ECRIS for future radiotherapy: PKISIS



ECR ion source with "He-free" 4 K Superconducting coils (axial field) + High performance Permanent Magnets (radial field)

Magnetic field:

- B injection variable < 2.1 T
- B extraction variable < 1.5 T
- B minimum variable $0.4 < B < 0.6$ T
- B radial at chamber wall = 1.32 T

Radio Frequency:

- $f = 18$ GHz
- Available RF power = 2.5 kW

Mechanical dimensions

- Plasma chamber diameter = 82 mm
- Plasma chamber Length = 450 mm
- Yoke diameter = 680 mm
- Yoke length = 730 mm
- Weight = 1,500 kg

Insulation

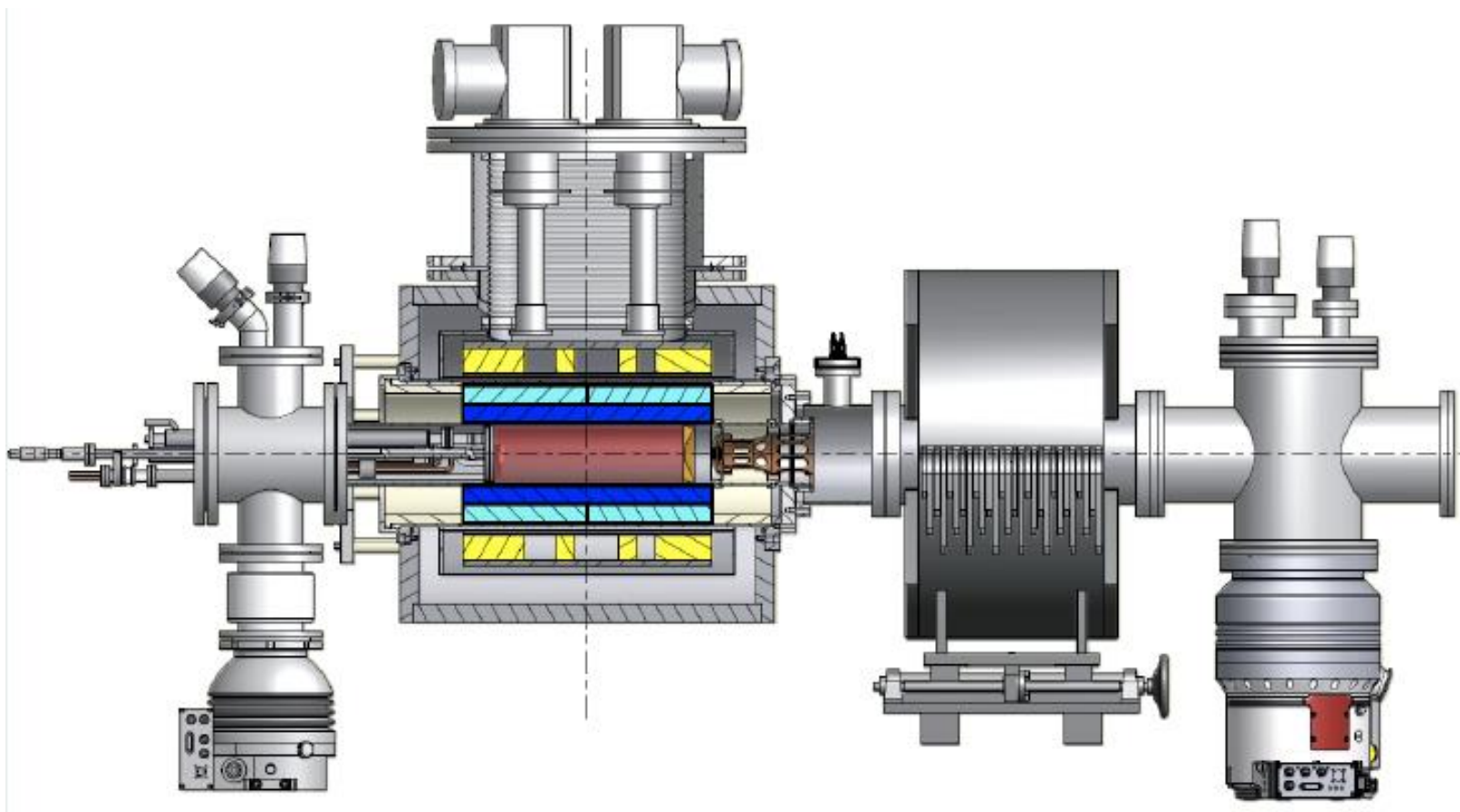
- $V_{max} = 30$ kV

Cryogenics

- (4.2-45) K Pulsed Tube cryo-cooler
- $P = (1 - 40)$ W
- He free

Ion	Intensity (μ A – electrical)
^4He (2+)	2,400
^{13}C (4+)	>500
^{13}C (6+)	50
^{14}N (5+)	>1,000
^{16}O (6+)	1,500
^{16}O (7+)	230
^{40}Ar (12+)	200
^{40}Ar (14+)	100
^{84}Kr (17+)	100
^{129}Xe (26+)	100
^{181}Ta (26+)	20
^{181}Ta (30+)	13
^{181}Ta (32+)	6
^{209}Bi (29+)	35
^{209}Bi (31+)	25
^{209}Bi (33+)	15

18GHz ECRIS for future radiotherapy: Aisha (CNAO / LNS)

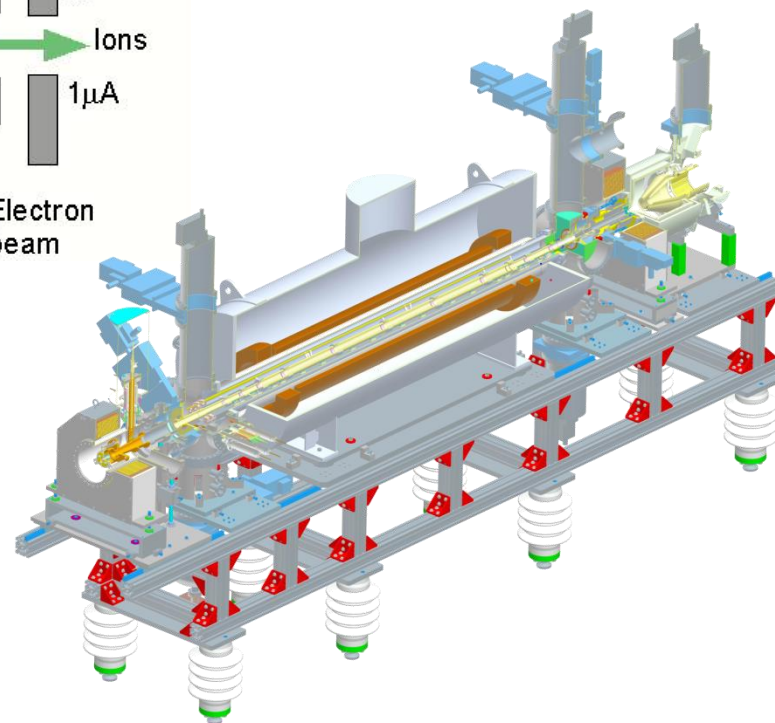
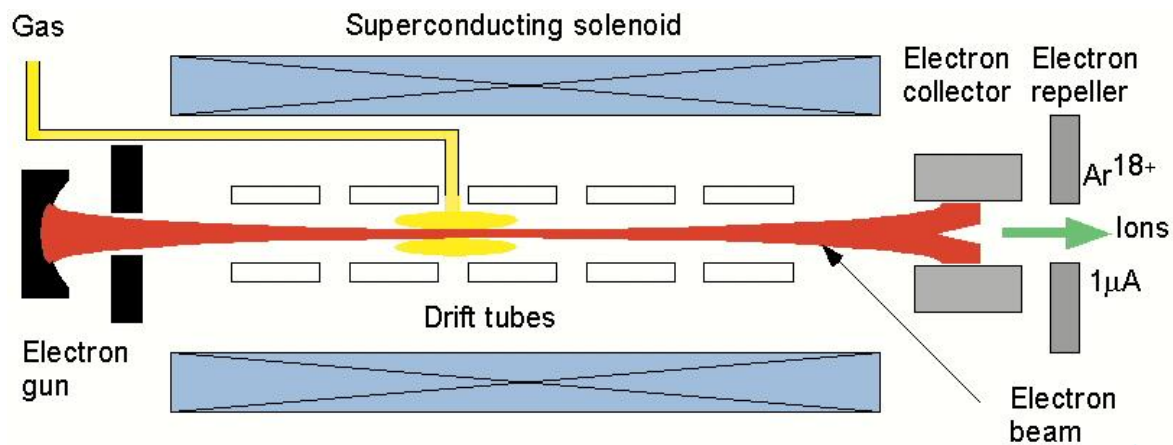


➤ Results to be announced at ICIS 2017 conference in October at Geneva

Source: Gamino, CAS, Wien 2015

IS Developments : EBIS

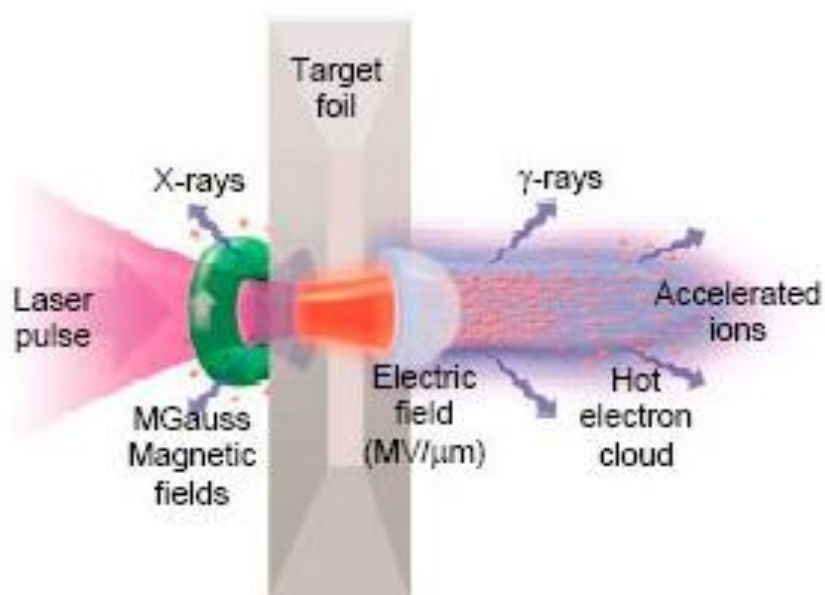
Electron beam ion source (EBIS) :



- Used for production of highly charged ion
- Low current
- Dedicated for laboratory uses
- Can be used for charge breeding
- Working pressure $< 10^{-9}$ mbar

Source : BNL, Liljeby 2003

IS Developments : LIS



➤ See Dr Koji Noda yesterday's talk for NIRS HIMAC

Boron Neutron Capture Therapy Ion Source

- BNCT efficiency has been proven using neutrons from nuclear reactors
- Accelerators could advantageously replace reactors !
- BNCT accelerators need proton / deuteron beam to convert them into neutrons
.... But very high beam current to get at least $1 \cdot 10^9$ particle/cm²/s

TABLE II. Examples of proposed accelerator-based BNCT facilities.

Neutron source	Accelerated energy [MeV]	Beam current [mA]	Heat load [W]	Group
${}^7\text{Li}(p,n){}^7\text{Be}$	1.9–2.5	20	38–50	LBL, OSU, MIT, UOB
${}^2\text{H}(d,n){}^3\text{He}$	0.4	5000	200	LBL, PU
${}^3\text{H}(d,n){}^4\text{He}$	0.12	1000	120	LBL, PU
Ta(p,xn)	50	0.3	15	Tohoku U.
Be(p,xn)	30	2.0	60	Kyoto U.

M. Muramatsu and A. Kitagawa, RSI 83, 02B909 (2012)

Boron Neutron Capture Therapy Ion Source

Microwave Discharge IS

➤ IBA Dynamitron using a 2,45GHz Ion Source

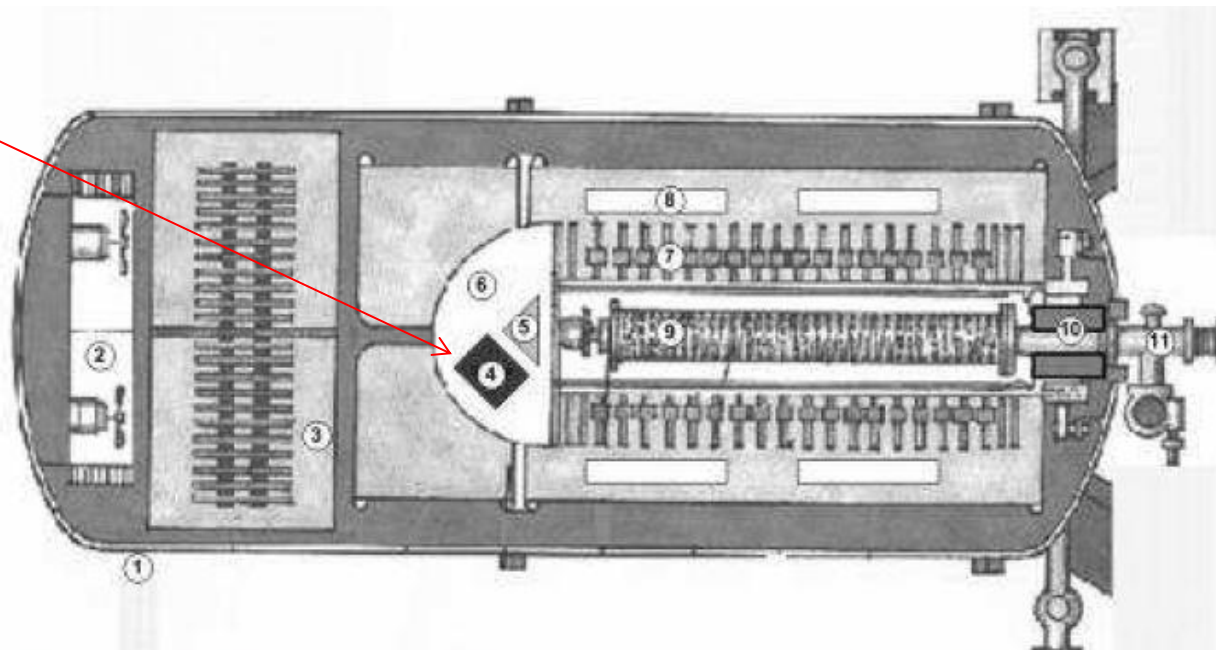
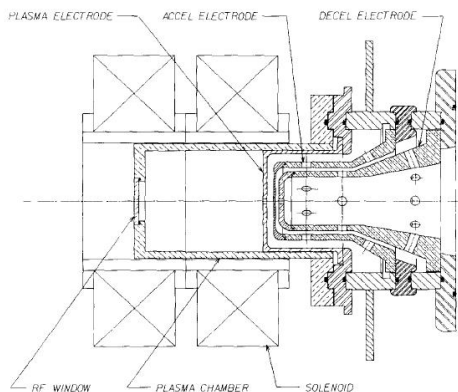


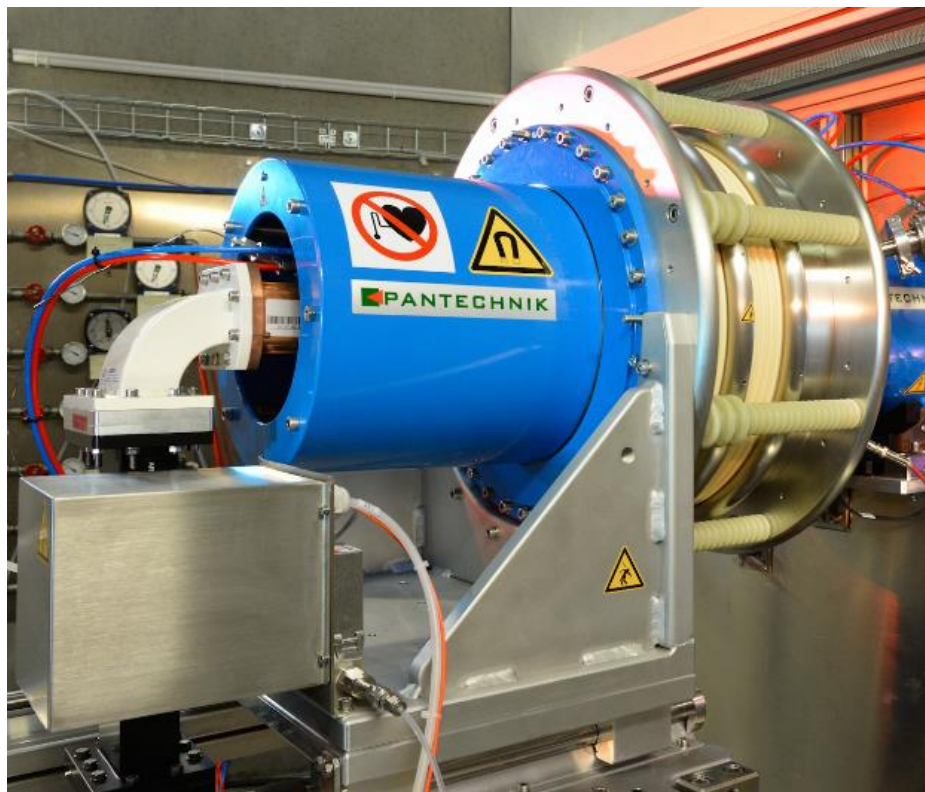
Figure 2: Layout of the dynamitron. The ECR source and selection magnet are pictured as a dark square and grey triangle, respectively.

E. Forton et al., DOI: 10.1016/j.apradiso.2009.03.099 · Source: PubMed

Boron Neutron Capture Therapy Ion Source

Microwave Discharge IS: SILHI from PANTECHNIK / CEA licensed

➤ could be a good candidate !



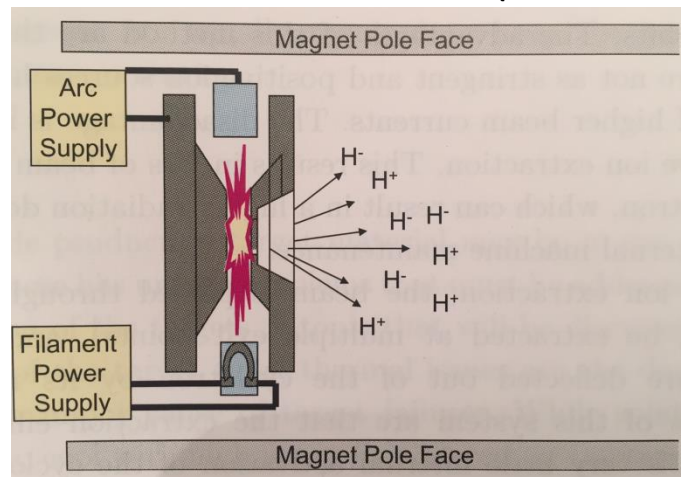
ECRIS	NdFeB permanent magnets
Frequency	2,45 Ghz
Mode	CW or pulsed
Ions	H ⁺ , D ⁺
Extraction voltage	60 kV to 100kV
Current	40 to 100 mA
Emittance	< 0.2 π .mm.mrad

Radioisotope Production

- Cyclotrons are historically utilized for radioisotope production
- Many manufacturers, for more than 700 cyclotrons in operation in the world - 2010

Manufacturer	Location
GE Healthcare	Sweden
Siemens Healthcare	USA
Ion Beam Applications SA	Belgium
Advanced Cyclotron Systems Inc.	Canada
Best Cyclotron Systems, Inc.	Canada
Sumitomo Heavy Industries, Ltd.	Japan
Samyong Unitech Co., Ltd.	Korea
NPKLUTS	Russia

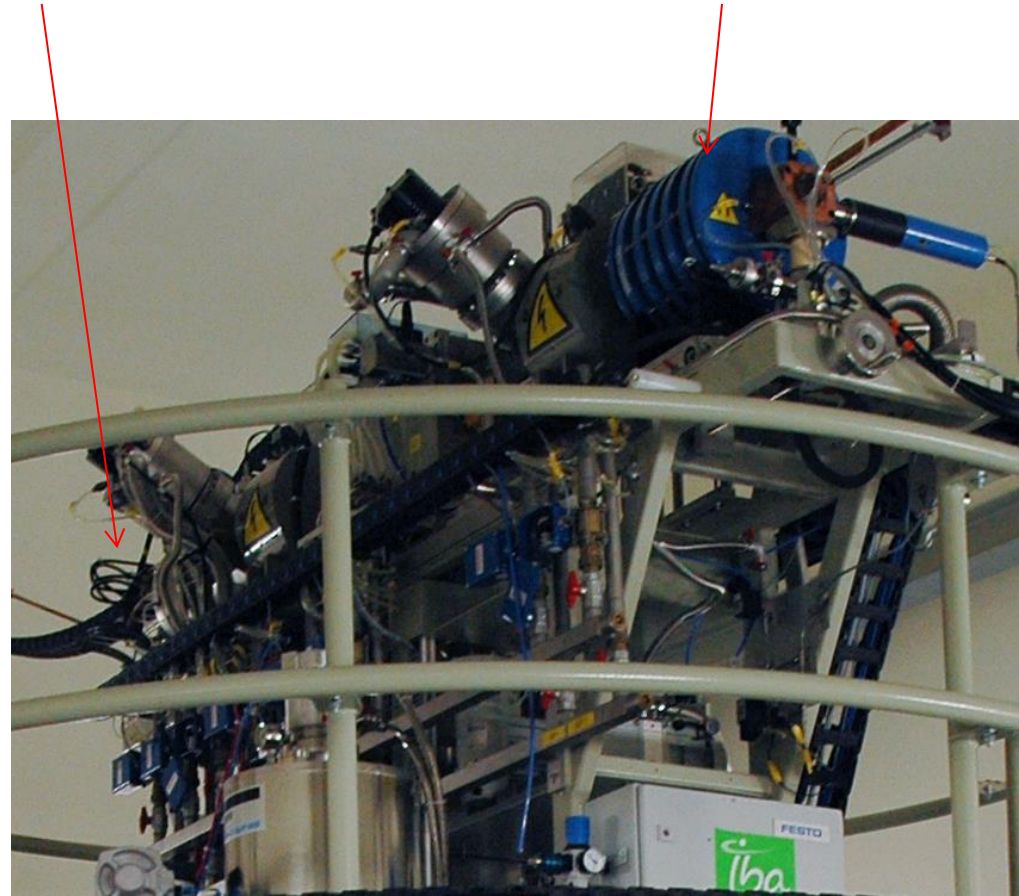
- mostly they use internal hot / cold cathode IS (similar than for proton therapy)



R. W. & M.E. Hamm,
Industrial accelerators and their applications ,
ISBN 978-981-4307-04-8

Radioisotope Production

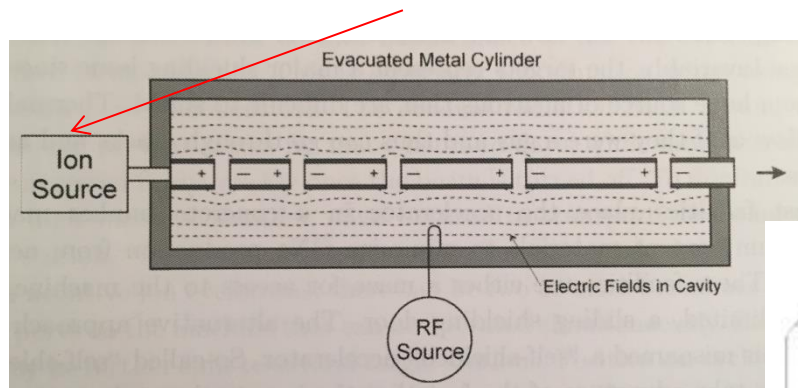
- external IS is also possible with cyclotrons using axial inflector
- C70 IBA for Arronax (France) is fed by one H^- multicusp source and one SUPERNANOGAN for $^4He^{2+}$ beam injection



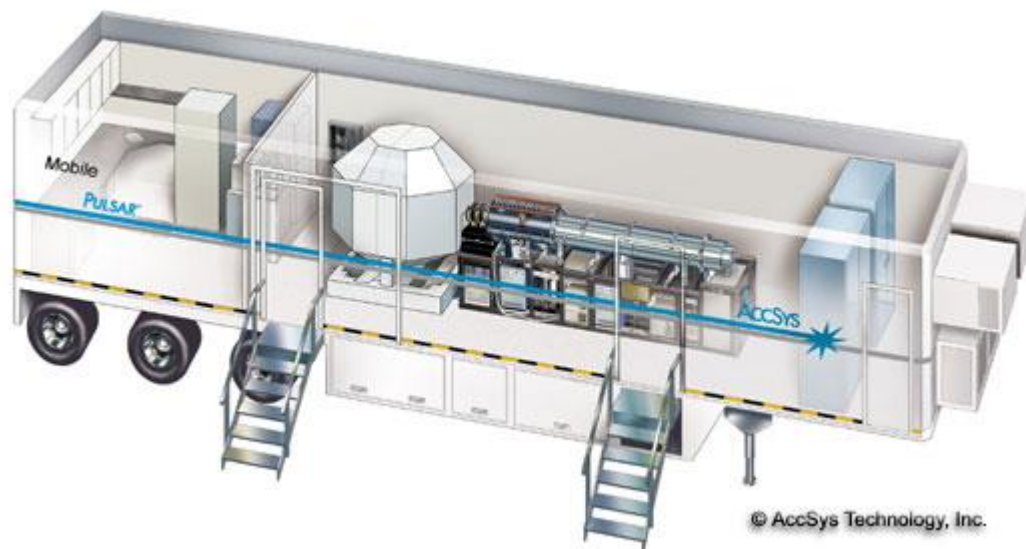
https://fr.wikipedia.org/wiki/Cyclotron_ARRONAX

Radioisotope Production

- LINAC are also commercially available (mainly AccSys Technology, Inc. USA)
- They can use any discharge source already described for high current



- Isotopes can eventually be produced and distributed close by the hospital



R. W. & M.E. Hamm,
Industrial accelerators and their applications ,
ISBN 978-981-4307-04-8

Ideal ion source for radioisotope production must have:

- beam current as large as possible, depending on the limits on target reliability
- an emittance $<$ accelerator acceptance
- a good stability
- be user friendly
- a high MTBF and short MTTR
- low maintenance
- a moderate installation and maintenance cost

Overview

- ☑ Ion Source Requirements
- ☑ Ionization process, plasma, motion & confinement basics
- ☑ **Review of Ion Sources for medical accelerators**
 - Proton radiotherapy IS
 - Heavy Ion radiotherapy IS
 - IS Developments for future radiotherapy
 - Boron Neutron Capture Therapy IS
 - Radioisotope production
- ☑ **Conclusion**

CONCLUSION

- Ion Source development is a never ending story
... hope you are not lost in this jungle !!
- Ion Therapy, BNCT and radioisotope techniques still need improvements which start with the ion source in terms of robustness, simplicity of maintenance and operation
- High current ion source will make possible the production of radioisotopes for immunoradiotherapy
- It is a good mix of engineering, physics, passion to SAVE LIFES !

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- *Industrial accelerators and their applications*, R. W. & M.E. Hamm, R&M Technical Enterprises, ISBN 978-981-4307-04-8
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