



# The PIMMS2 Study at CERN

Maurizio Vretenar, CERN



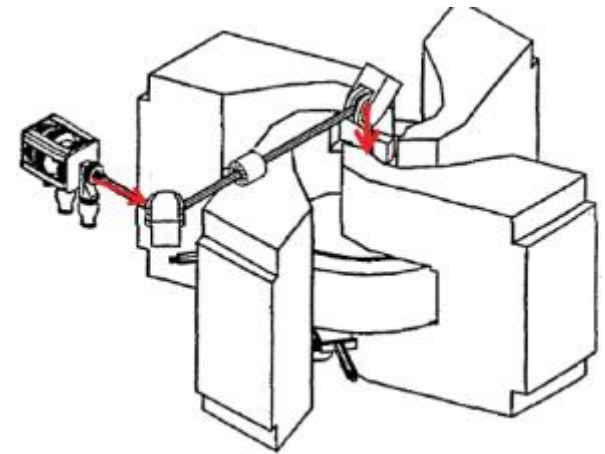
photo credit: CERN,  
Discover magazine

ENLIGHT Meeting, London, 27 June 2018

# Medical accelerators at CERN



- CERN has accumulated a huge competence in **particle accelerators** and has an old tradition of being a **meeting place** where people from different countries and laboratories collaborate freely.
- Since the early 80's, CERN scientists have contributed to projects to adapt CERN technologies to the development of medical accelerators.
- Similar organization: a **study group at CERN** that develops **designs and prototypes** for facilities built outside of CERN:
  - **Medicyc** 1982-1990 and **Eulima** 1985-1989 → Cyclotrons at Centre Lacassagne, Nice.
  - **LIBO** (Linac Booster) 1998-2001 → LIGHT linac being built by ADAM/AVO.
  - **PIMMS** (Proton Ion Medical Machine Study) 1996-2000 → CNAO and MedAustron proton&ion synchrotrons.
- The concentration of resources on **LHC construction** from **2002** has interrupted this long tradition.
- 16 years later, there is interest from CERN and some support from the management to restart a **medical accelerator activity**.
- But where should we go? Particle therapy has made an **enormous progress** in the last 20 years and the situation is very different from the initial pioneering years.

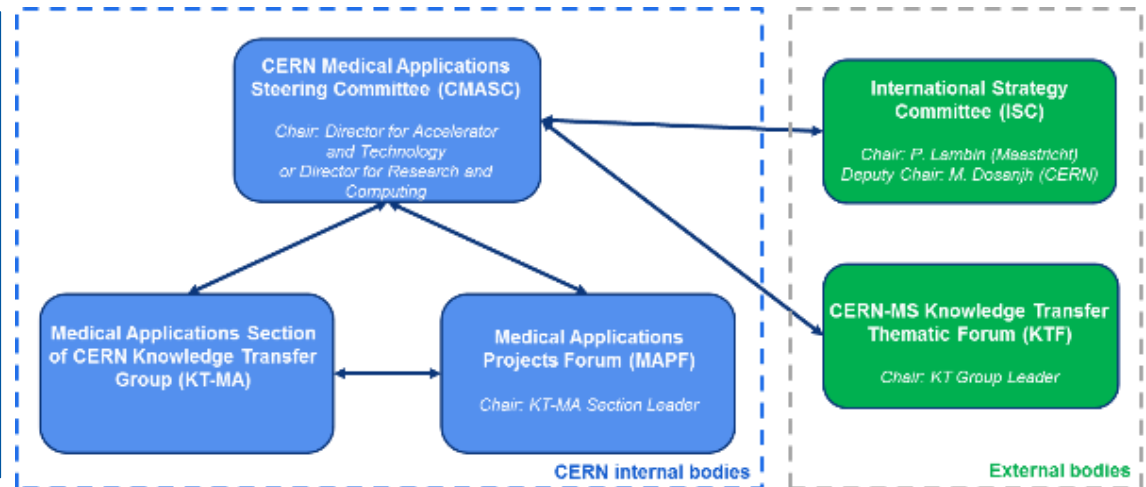


# New CERN Medical Applications

- The limits to the CERN engagement are defined in a Medical Strategy document approved by Council in **March 2017**.
- While CERN core mission is particle physics, maximising the **societal impact** of its research is an integral part of this mission. The goal is knowledge transfer (to society), not the development of a specific instruments or projects.
- A (limited) personnel and material budget is foreseen as seed funding for **collaborative R&D projects** (receiving additional support from EU or other sources), using **technologies and infrastructures that are uniquely available at CERN**.
- The selected projects must not **overlap** with activities in Member States or be in **competition** with industry, and must be driven by the requirements of the **medical research community**.

## Funding and Organisational Structure

Medical accelerator programmes:  
~ 0.1% of the CERN budget (Material and Personnel), administered and controlled by 5 Committees.



# Background: PIMMS(1) and BioLEIR

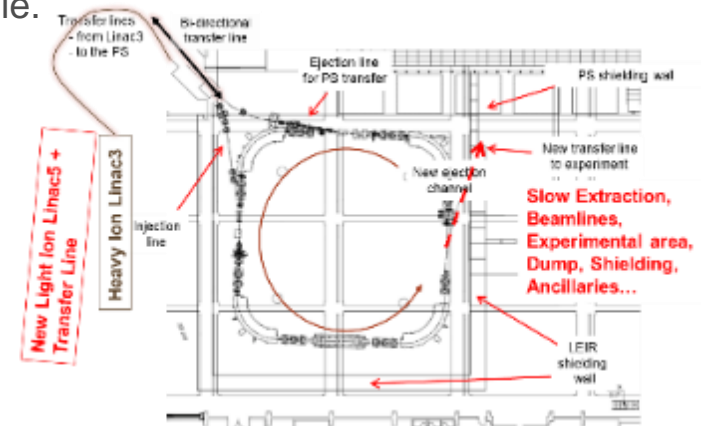
## PIMMS = Proton-Ion Medical Machine Study

- Started in 1996 as a **study group** at CERN (CERN, TERA Foundation, Med-Austron, initial collaboration with GSI).
- Goal: design of a **cancer therapy synchrotron**, development of the main technical components of the facility.
- In 2000 resulted in the publication of a **Technical Design Report**, with a CD-ROM of data and technical drawings.
- The PIMMS study was the basis for the construction of **CNAO** (Pavia, Italy) and **MedAustron** (Wiener Neustadt, Austria).



## BioLEIR

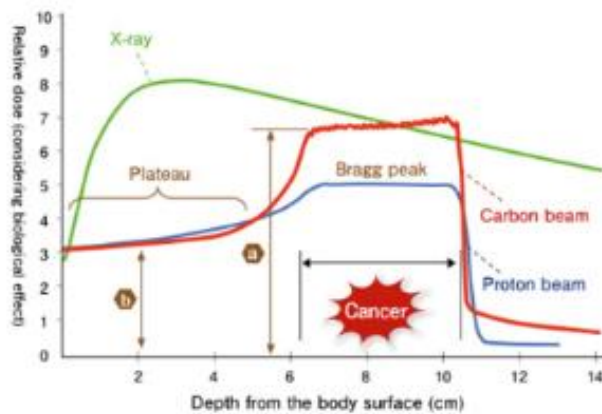
- Proposal to add **light ions** to the CERN ion accumulator ring LEIR to provide beams for **biomedical research** when not operating for LHC.
- Goal: compare different ions (RBE, cancer effectiveness, H, He, Li, Be, B, C, N, O), measure particle range, ballistics, fragmentation. **No tests on animals or patient treatment.**
- **Strong support** from the biomedical community.
- Working group, **Feasibility Study** published in 2017, estimate 29 MCHF + 119 FTE.
- Project **stopped** because funding not available (nor from CERN, nor from external international sources) to start in time with CERN long-term schedule.



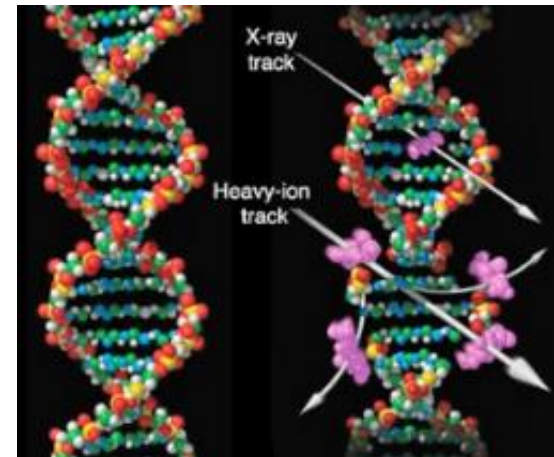
# How could CERN contribute

A quick overview of the situation in 2018:

- **Proton therapy** is rapidly progressing, thanks to the commercial availability of turn-key facilities. Research is oriented towards delivery systems and optimizing treatment; nobody questions the accelerator and we should not interfere with commercial companies.
- Instead, there is clear indication that **ion therapy has a strong potential** (higher RBE, effective with radio-resistant tumours) but to make it accessible to a larger fraction of the population some action is needed along three axis:
  - Collect more data from **biomedical research with different types of ions** (*the BioLEIR line, extended to tests on animals and possibly clinical trials*).
  - Try to reduce size and cost of the facility, using some **new accelerator design** (*for carbon or lighter ions?*).
  - Further optimise the delivery system, including the **gantry**.



27/6/2018



# A common objective

The conclusion of our investigation is that to further advance ion therapy, we should aim for:

- A multiple-ion research and therapy facility – *built in Europe, possibly with support from the European Commission.*
- Based on innovative accelerator technologies - *to become the test bench for a new standardised treatment facility.*
- Structured as a multi-national centre, addressing the entire European and worldwide community – *no European country can afford building this facility alone.*

In this programme, CERN can:

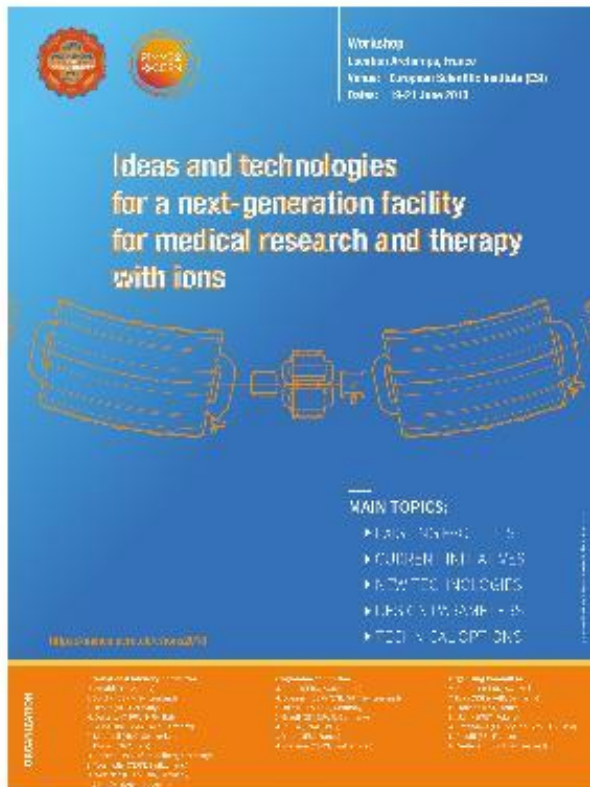
1. within a PIMMS2 initiative, contribute to identifying and developing new accelerator technologies
2. offer a multinational environment to grow the multi-national collaboration.



# The Archamps Workshop

“Ideas and technologies for a next generation facility for medical research and therapy with ions”, ESI Archamps (France, Geneva area), June 19-21.

Co-organized by CERN, ESI, GSI - 63 participants



## Objectives:

1. Highlight the **potential of ion therapy** for cancer.
2. Share the **current experience**: advantages and disadvantages of present implementations, ideas for future facilities, directions for improvement.
3. Explore the **options for the design** for a next generation medical research and therapy facility with ions in Europe, identify and motivate a **community** that could contribute.
4. Identify **basic parameters**, a set of technical options, and outline a possible basic R&D programme.





# Key outcomes

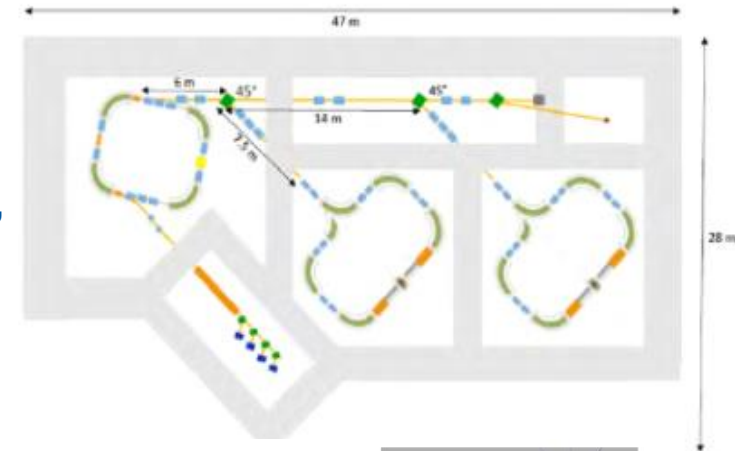
## Take away words:

- Small and cheap
- Fast delivery
- Real time imaging
- Low consumption
- Higher intensity
- Possibly with MRI
- “Start from the patient”

## Two technical options

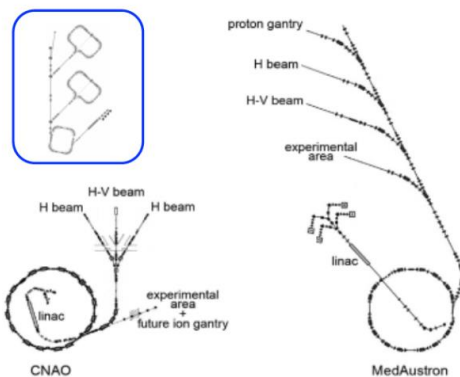
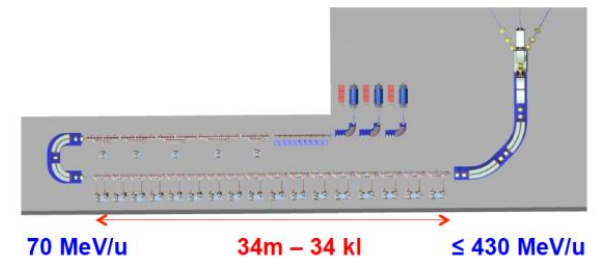
### Superconducting synchrotron

Four 90deg canted cosine theta magnets,  $B_{max}$  3.5T, ring 27m, gantry  $r=5.3m$



### Linear accelerator

Folded linac, 34m length, high rep. frequency and intensity, low emittance



Both options require development!

SC synchrotron compared to CNAO and MedAustron

# Development Options

**The main avenue:** from Health to RI

Submit in a proposal for a **Design study** to be supported by the EC (Research Infrastructures) for the **design of a next-generation ion research (and therapy) facility**.

Deadline: December 2019, duration 2-3 years.  
EC contribution 3 M€, partners' matching funds ~3 M€ (total 6 M€).

~10 beneficiaries, 10-20 collaborating partners



Basic concepts for a  
**SOUTH-EAST EUROPE  
INTERNATIONAL INSTITUTE FOR  
SUSTAINABLE TECHNOLOGIES  
(SEEIIST)**



January 15, 2018

## Coordination with the SEEIIST

The design Study must be coordinated with the SEEIIST (South East Europe International Institute for Sustainable technologies) that is seeking EU support for the construction of a medical accelerator centre in the SE Europe.

Depending on the time scale, SEEIIST can be a first user of the new facility design.

# Thank you for your attention

maurizio.vretenar@cern.ch

