



# Imaging of prompt gamma emissions during proton cancer therapy for geometric and dosimetric verification

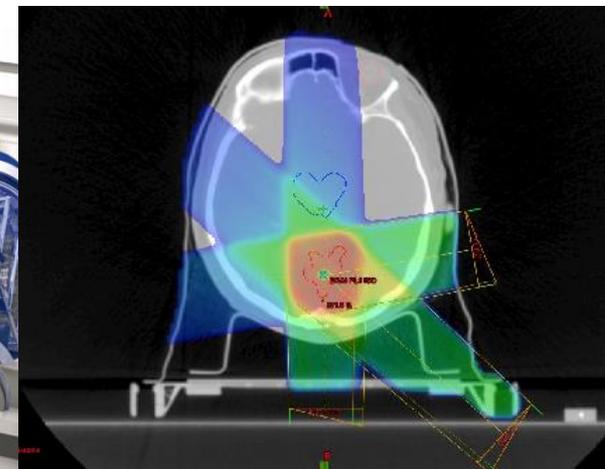
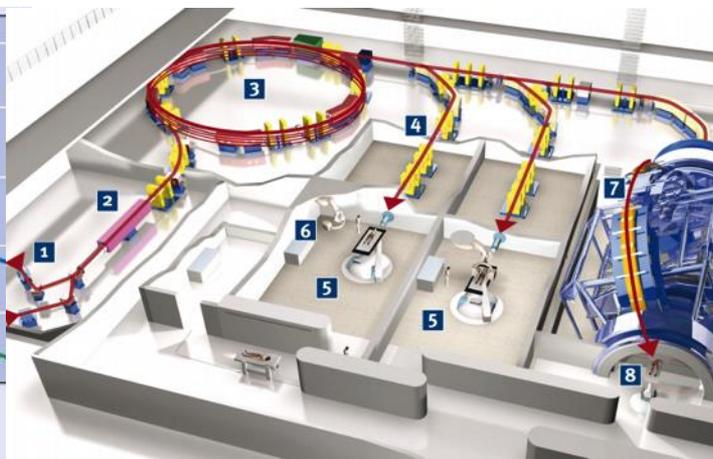
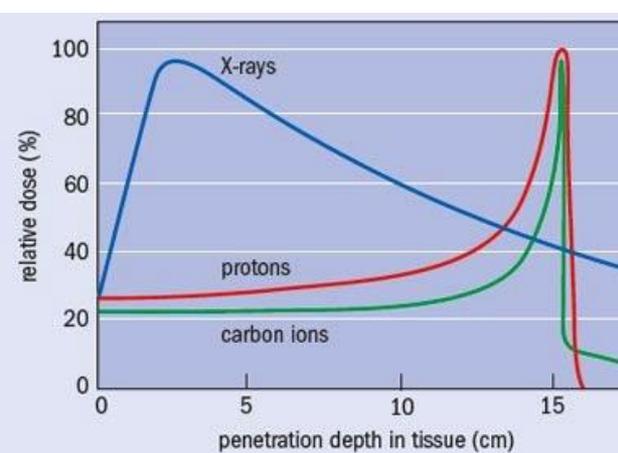
**Nuclear Physics Group, Dept of Physics, University of Liverpool;  
Medical Physics Department, University College London;  
Physics Department, The Clatterbridge Cancer Centre;  
National Centre for Eye Proton Therapy, The Clatterbridge Cancer Centre**



**Dr Benjamin Le Crom**  
**[Benjamin.Le-Crom@liverpool.ac.uk](mailto:Benjamin.Le-Crom@liverpool.ac.uk)**

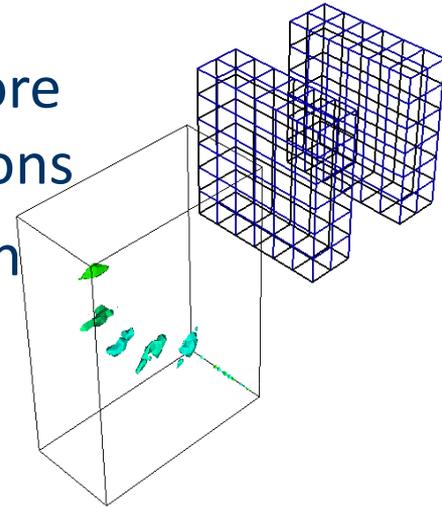
# Proton Beam Therapy

- Benefits over other radiotherapy techniques
- The treatment is particularly suitable for complex childhood cancers, increasing success rates and reducing side effects
- Used to treat brain cancers and head and neck cancers.
- The UK is in the process of building two new high-energy proton therapy centres in London (UCLH) and Manchester (Christie) - in addition to existing Clatterbridge facility.

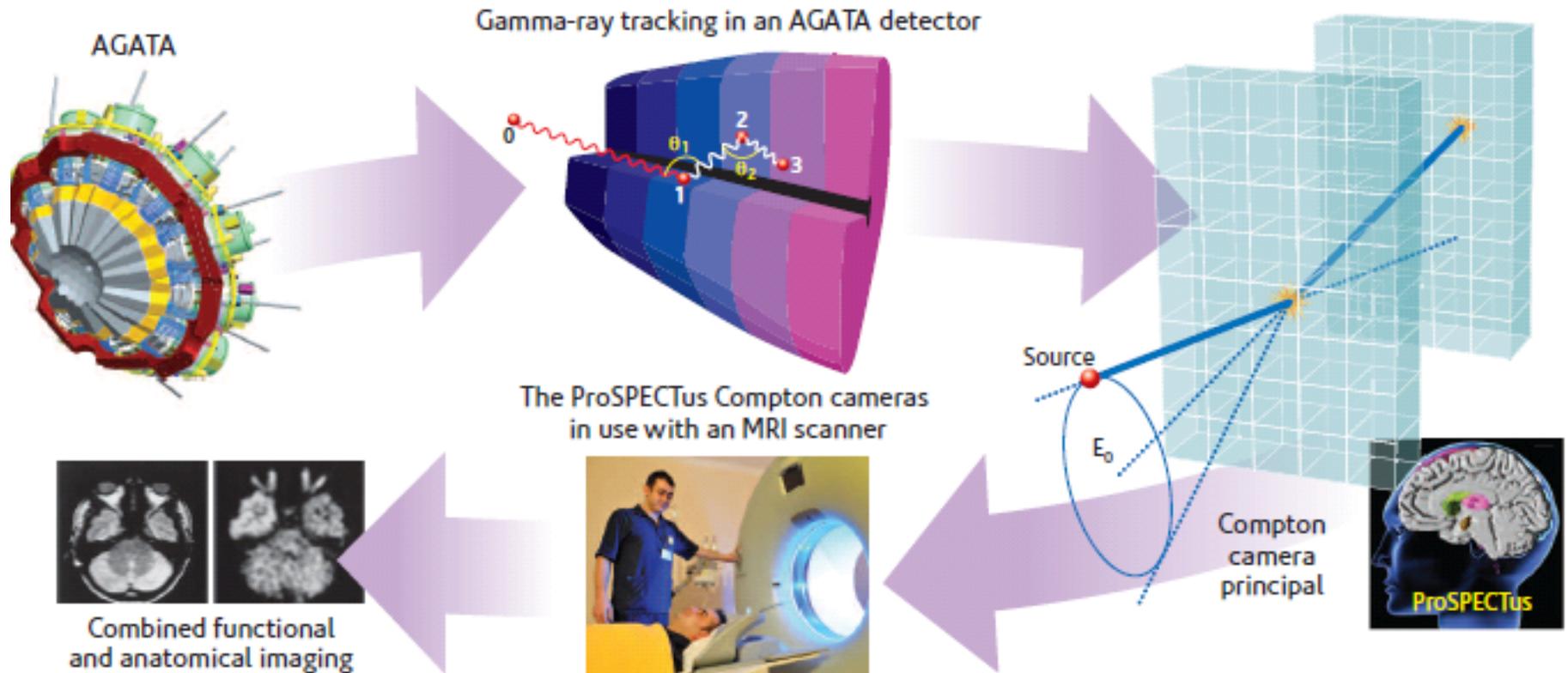


# What is new?

- Verification of radiation delivery is significantly more challenging for protons than for high-energy photons
- Real-time verification via prompt gamma detection
  - Utilise existing ProSPECTus Compton Imager with 3<sup>rd</sup> detector element
  - Position resolution 2-3mm
  - Sensitivity factor 10 larger
- Imaging allows for verification of the intended proton treatment delivery:
  - In terms of geometrical placement of beams (range verification)
  - Ideally the more challenging ultimate aim of deriving and hence verifying both (3D) beam placement and delivered radiation dose

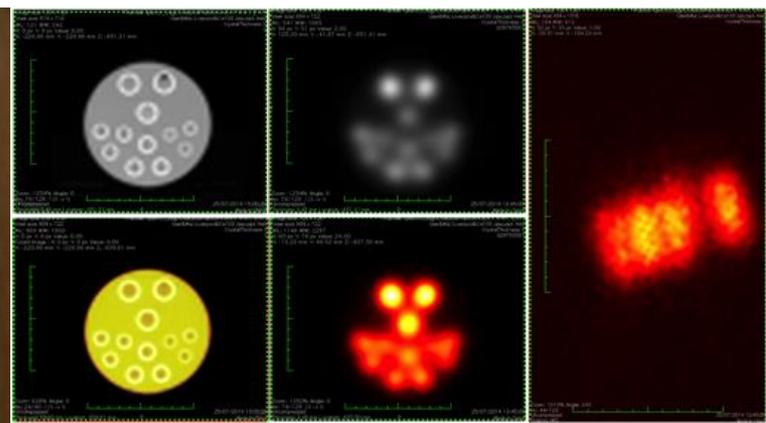
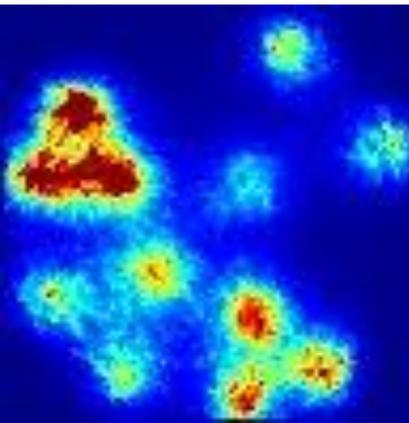


# From AGATA to ProSPECTus



# ProSPECTus: Next generation SPECT

- Detector head sensitivity maximised for  $^{99m}\text{Tc}$  141 keV gamma rays (also works at higher energies e.g.  $^{131}\text{I}$  364keV).
- Sensitivity is a factor of 10 improvement over LEHR collimated SPECT detector heads.
- Multi-isotope imaging in single acquisition
- Wide energy range with one system
- 2 semiconductor detectors housed in 1 cryostat
- MRI-compatible

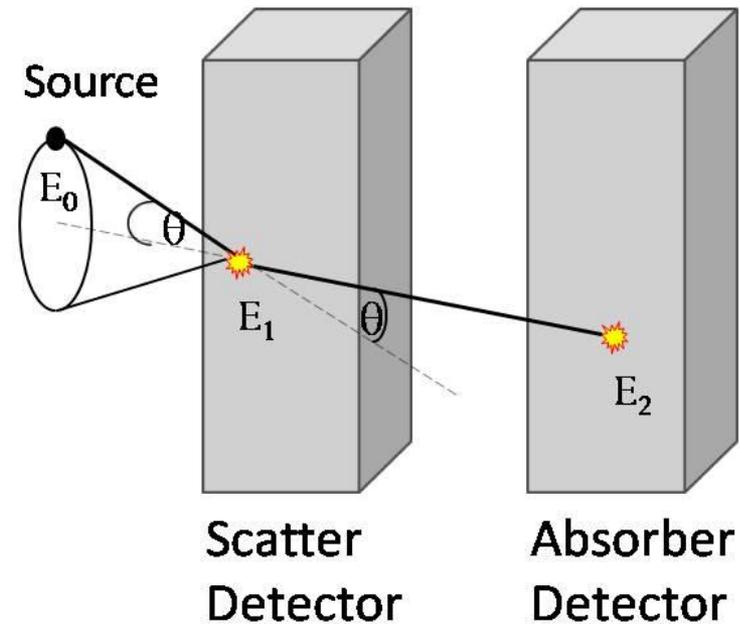
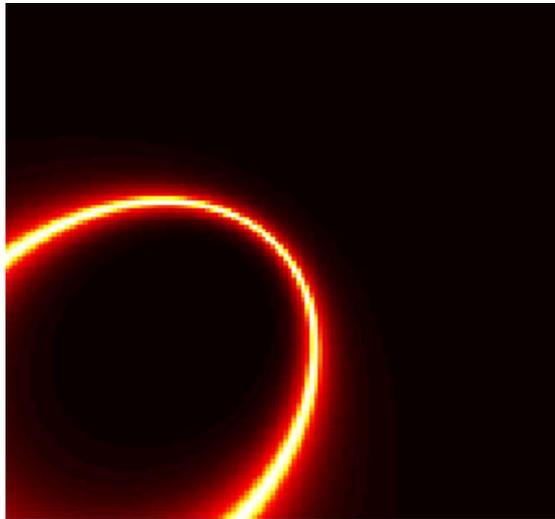


# Reconstruction code

- Reconstruction code (Dr. D.Judson, University of Liverpool)

$$\cos(\theta) = 1 - m_e c^2 \left( \frac{1}{E_2} - \frac{1}{E_1 + E_2} \right)$$

from presentation L. Harkness  
ProSPECTus



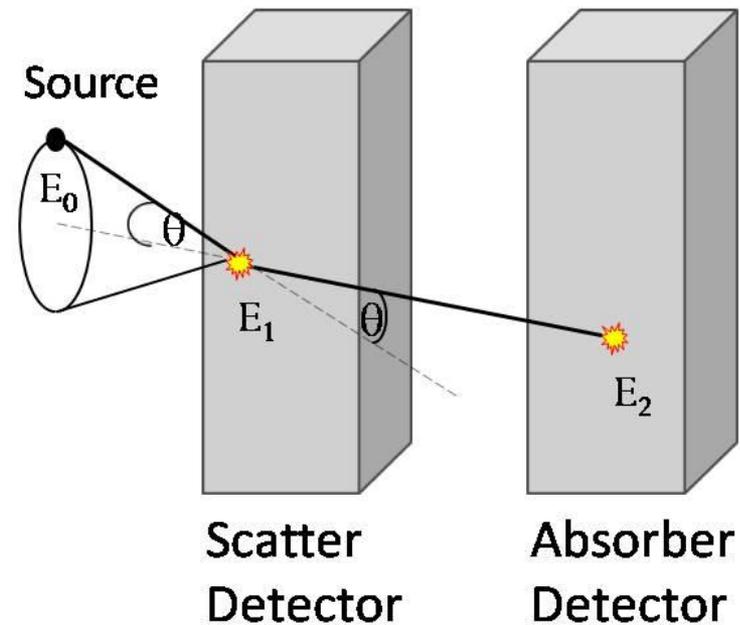
From Uni. Liverpool  
Nuclear physics website



# Reconstruction code

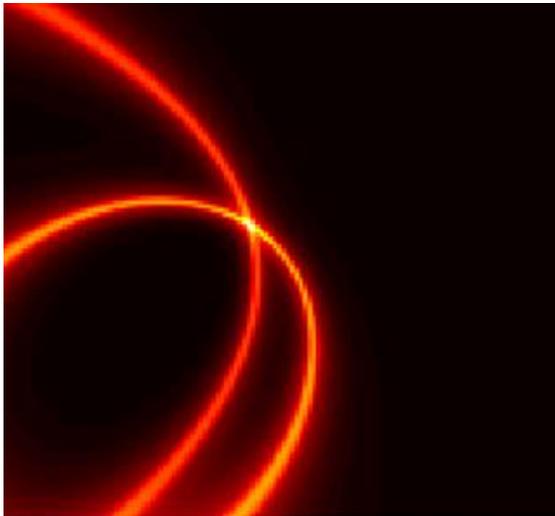
- Reconstruction code (Dr. D.Judson, University of Liverpool)

$$\cos(\theta) = 1 - m_e c^2 \left( \frac{1}{E_2} - \frac{1}{E_1 + E_2} \right)$$



From Uni. Liverpool  
Nuclear physics website

from presentation L. Harkness  
ProSPECTus

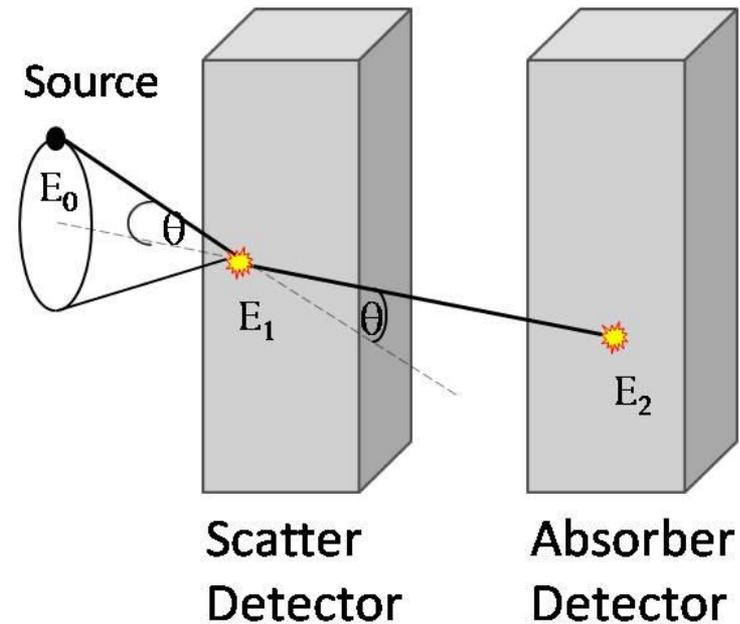
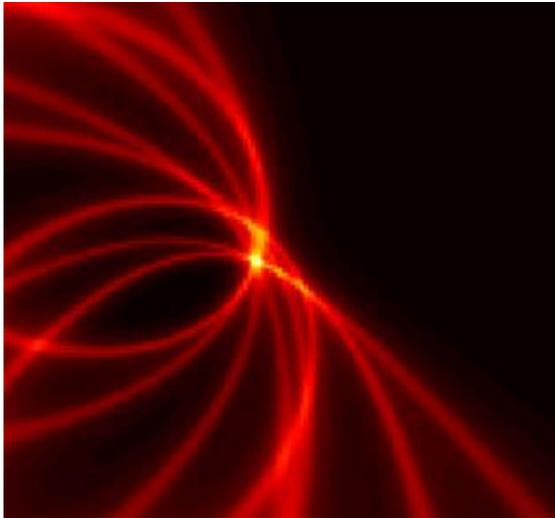


# Reconstruction code

- Reconstruction code (Dr. D.Judson, University of Liverpool)

$$\cos(\theta) = 1 - m_e c^2 \left( \frac{1}{E_2} - \frac{1}{E_1 + E_2} \right)$$

from presentation L. Harkness  
ProSPECTus

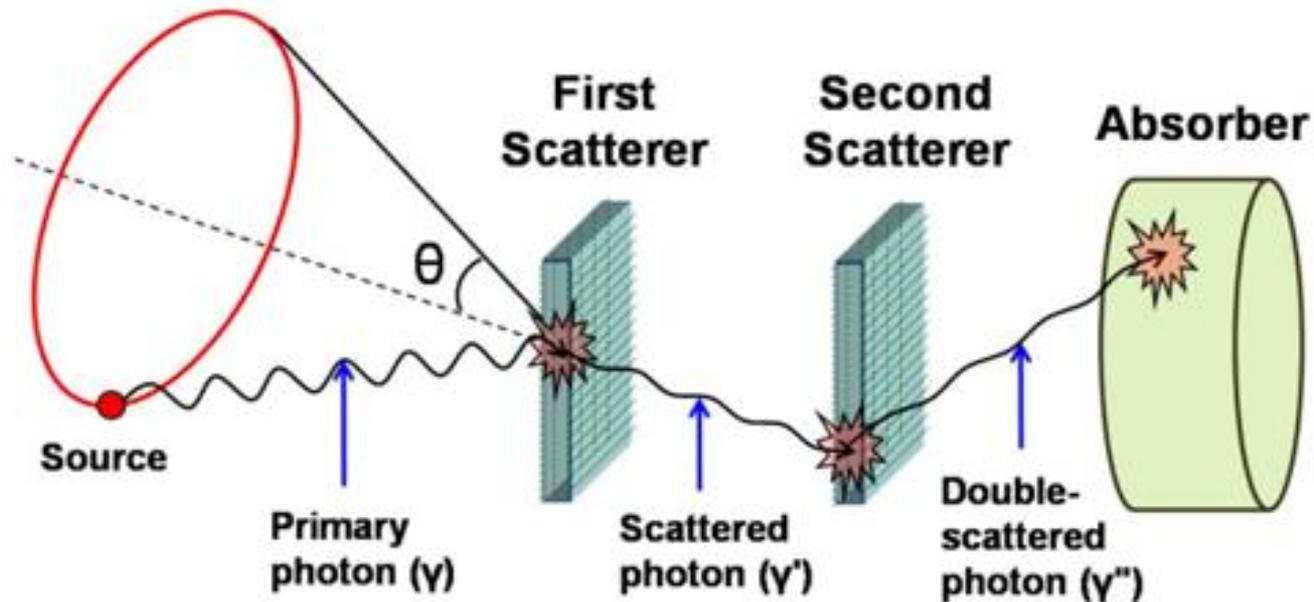


From Uni. Liverpool  
Nuclear physics website



# Triple Compton imaging

Prompt Gammas Energies: 2.2 MeV, 4.4 MeV



**Increased efficiency for high-energy gamma rays**

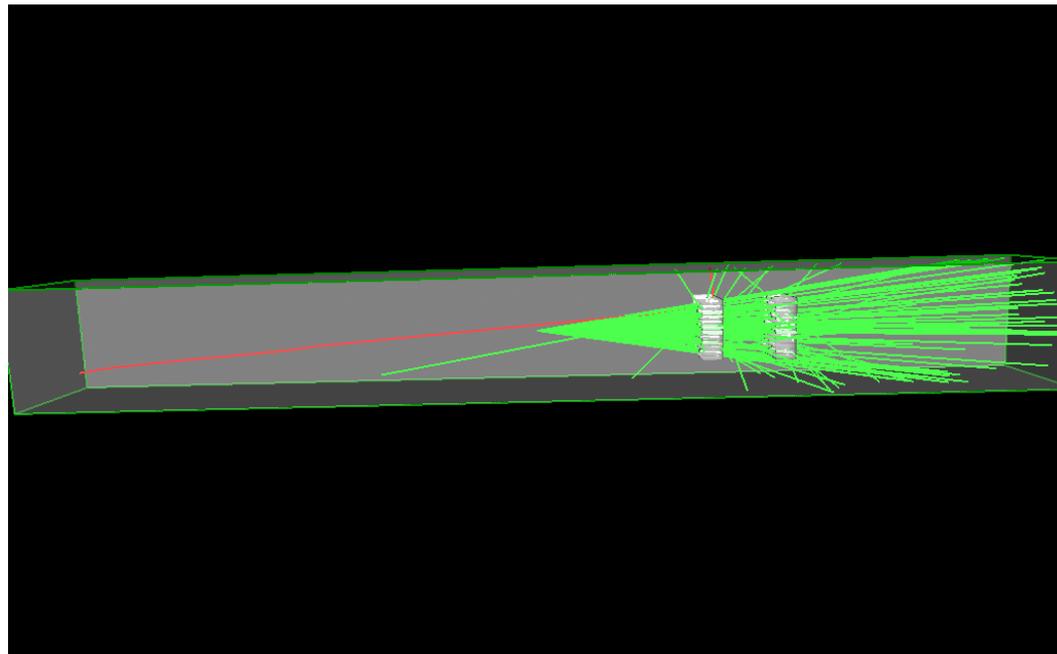
# Simulation using GAMOS

## Geant4-based Architecture for Medicine-Oriented Simulations

*P. Arce et al. NIM A 735(2014)304-313*

*L.J. Harkness et al. NIM A 671(2012)29-39 (Compton Camera part)*

2 HPGe  
60x60x20 mm<sup>3</sup>  
12X – 12Y  
5mm strips



# Simulation using GAMOS

## Geant4-based Architecture for Medicine-Oriented Simulations

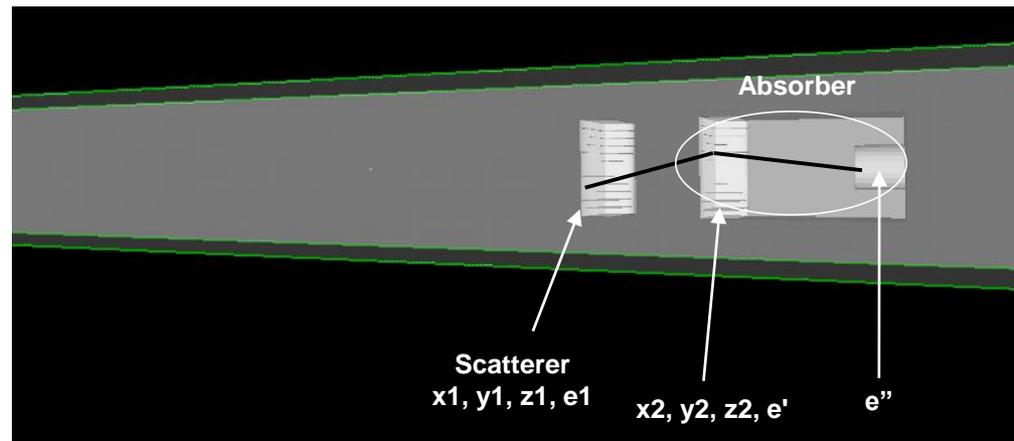
*P. Arce et al. NIM A 735(2014)304-313*

*L.J. Harkness et al. NIM A 671(2012)29-39 (Compton Camera part)*

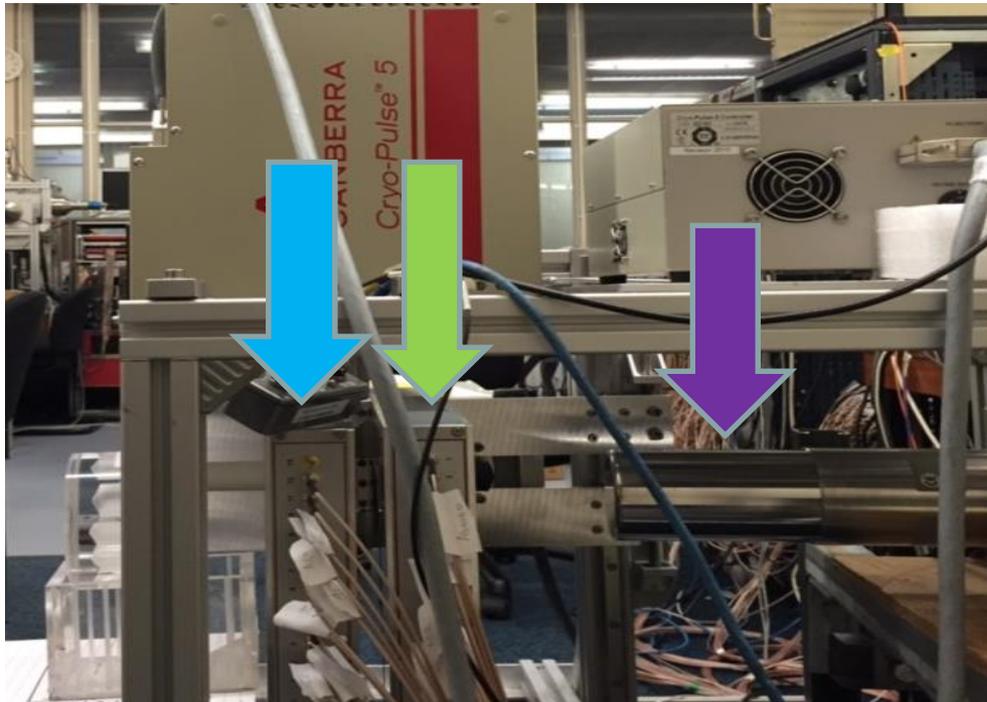
2 HPGe  
60x60x20 mm<sup>3</sup>  
12X – 12Y  
5mm strips

Ge  
Cylinder

Separation 70mm



# Triple Compton imaging



- **Three tier Compton system:**
  - i) **First layer** scatter detector is Si(Li) detector
  - ii) **Second layer** absorber detector is HpGe detector
  - iii) **Third layer** Coaxial germanium detector
- **A full triple layer Canberra Compton Camera**

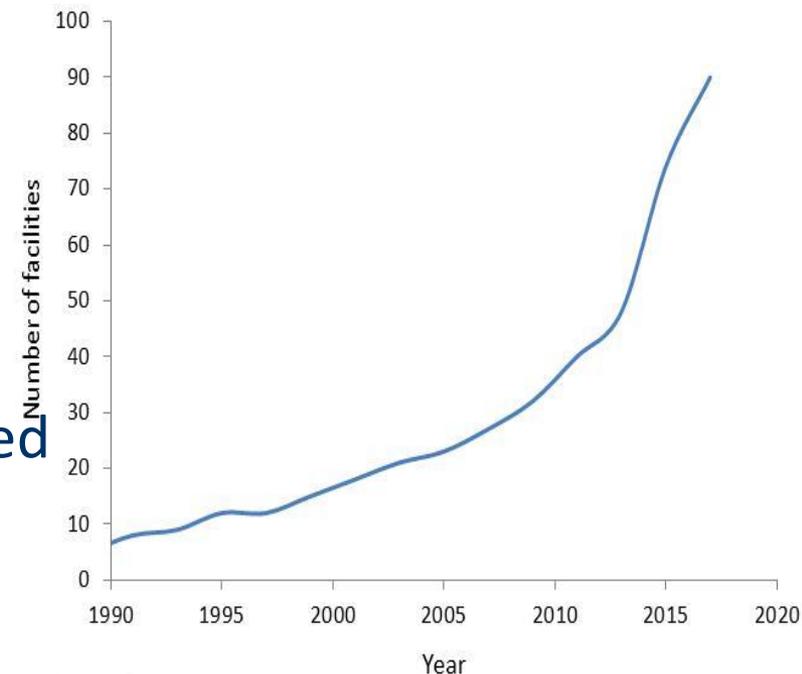


# The implication

- Outcome will be a proof-of-concept demonstration of real time geometric and dosimetric verification of treatment delivery.
- The project will provide a specification for a system that can be taken forward to market.
- Clinical trials follow a successful demonstration of the system.
- The proposal offers excellent potential for economic impact, but also societal impact through the delivery of better healthcare provision
- Metrology for molecular radiation therapy JRP

# What is the need?

- Increasing number of facilities world-wide, including the two new UK centres, a trend which is expected to increase as the cost of proton therapy reduces.
- Reliable and accurate methods for proton treatment verification are urgently required.
- Evidence-based knowledge of the radiation dose required and delivered to a patient during treatment



- EU COUNCIL DIRECTIVE 2013/59/EURATOM
- “For all medical exposure of patients for radiotherapeutic purposes, exposures of target volumes shall be individually planned and their delivery appropriately verified “ – 6 February 2018 timescale





## **Imaging of prompt gamma emissions during proton cancer therapy for geometric and dosimetric verification**

- **Proof-of-concept demonstration of real time geometric and dosimetric verification of treatment delivery**
- **Offers economic & societal impact through the delivery of better healthcare provision**
- **Large and growing market size**
- **Addresses EU Council Directive 2013/59/EURATOM**
  
- **Simulation tools for geometry optimisation**
- **Compton camera system available in the laboratory**

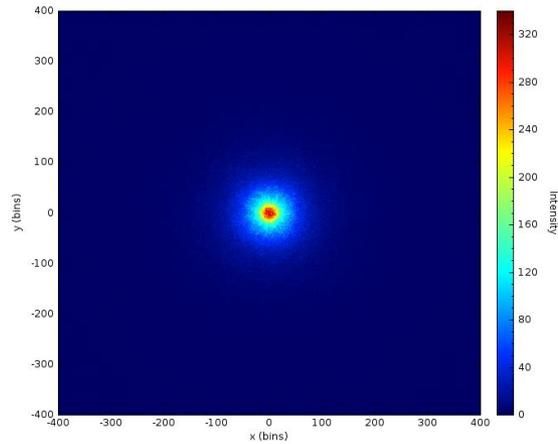
**Nuclear Physics Group, Dept of Physics, University of Liverpool;  
Medical Physics Department, University College London;  
Physics Department, The Clatterbridge Cancer Centre;  
National Centre for Eye Proton Therapy, The Clatterbridge Cancer Centre**

**Thank you for your attention**

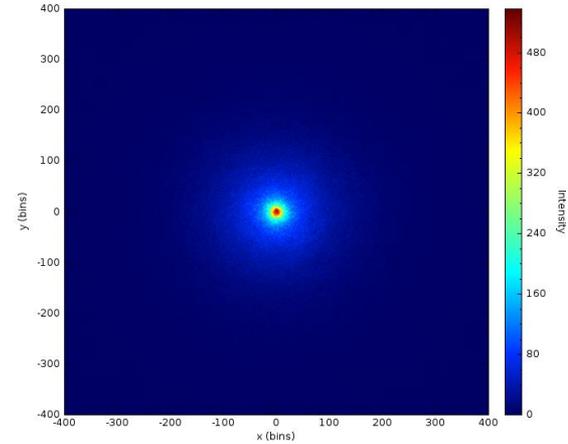


# 2 Layers or 3 Layers ?

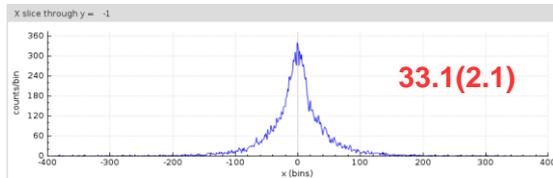
2 HPGe (60x60x20 mm<sup>3</sup>)  
Scatterer + Absorber



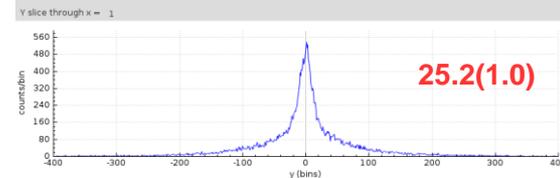
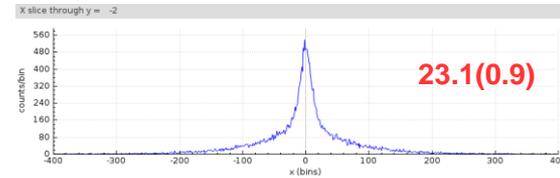
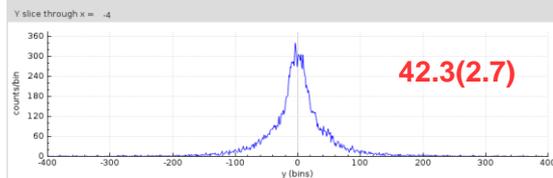
3 HPGe (60x60x20 mm<sup>3</sup>)  
Scatterer + 2 Absorbers



FWHM x  
(mm)



FWHM y  
(mm)



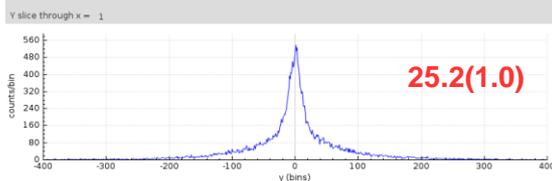
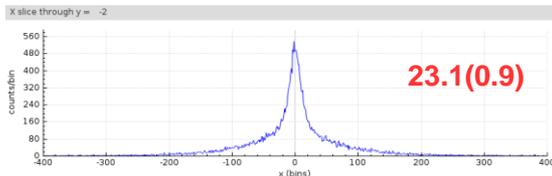
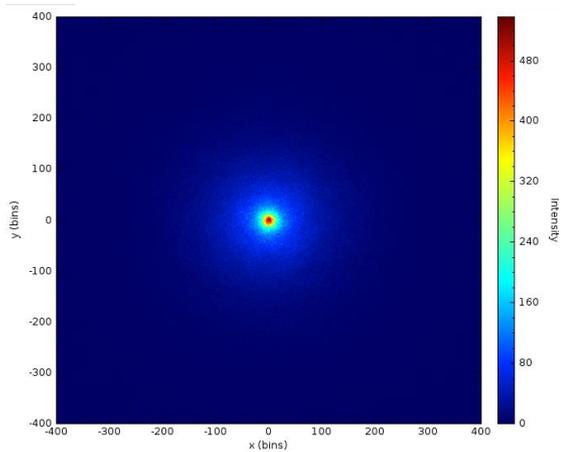
We need to use three layers



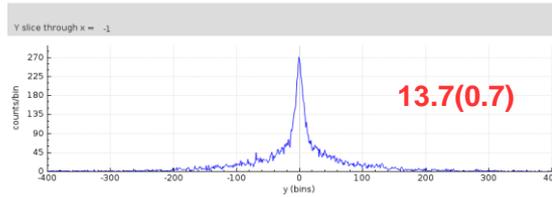
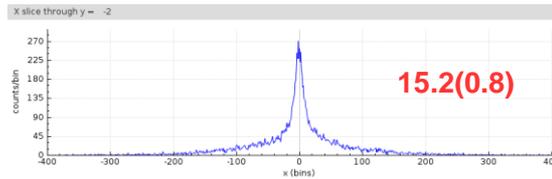
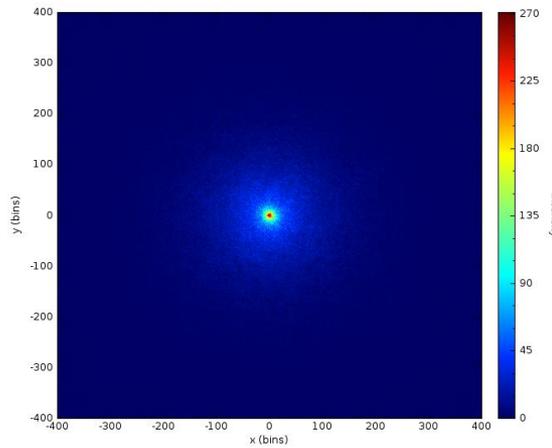
# Importance of Pulse Shape Analysis

- Without Pulse Shape Analysis: Precision  $5 \times 5 \times 20 \text{ mm}^3$
- Use of Pulse Shape Analysis for better precision  
*R.J. Cooper et al. NIM A 573(2007) 72-75* → *Perfect situation: Precision  $1 \times 1 \times 1 \text{ mm}^3$*

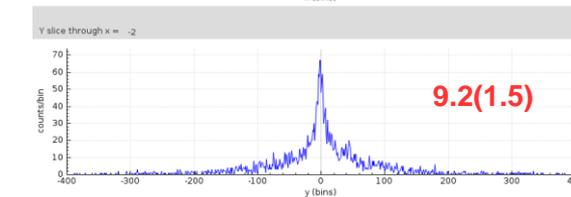
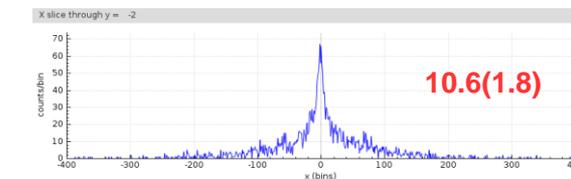
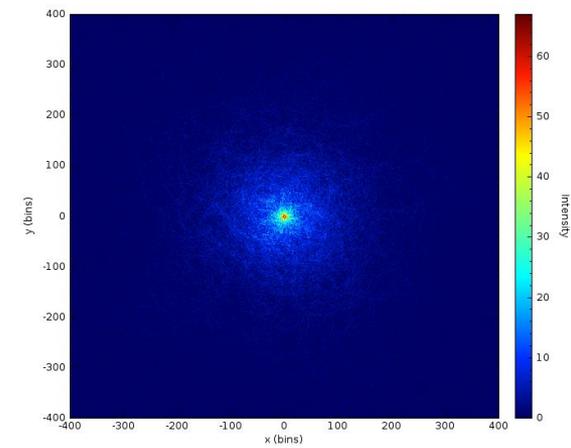
3 HPGe  
(precision  $5 \times 5 \times 20 \text{ mm}^3$ )



3 HPGe  
(precision  $2.5 \times 2.5 \times 10 \text{ mm}^3$ )



3 HPGe  
(precision  $1.25 \times 1.25 \times 5 \text{ mm}^3$ )



It takes a lot of times and we loss statistics

