

# A versatile treatment planning system for microbeam radiation therapy

## Validation and biological dosimetry

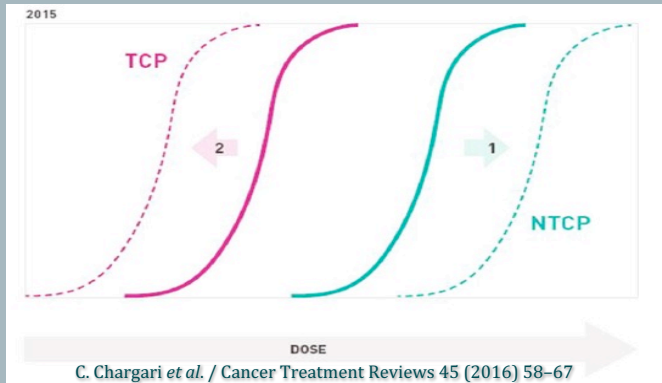
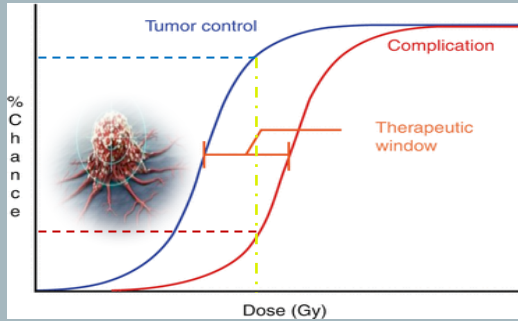
Presented by:  
Sarvenaz KESHMIRI

Director:  
Jean François ADAM

Co-Director:  
Raphaël SERDUC

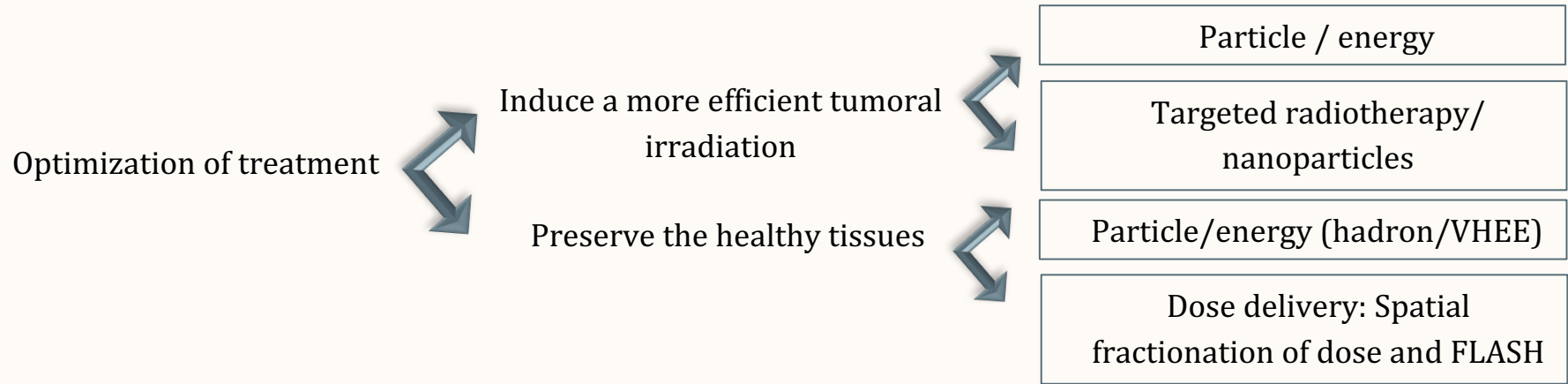


Holthusen (1936): probability of tumor control and of developing normal tissue complications after radiotherapy



C. Chargari *et al.* / Cancer Treatment Reviews 45 (2016) 58–67

- Aim: Increasing tumor control
- Quest for possible ways of improving the therapeutic index
- Optimization of **therapeutic window**



Optimization of treatment



Induce a more efficient tumoral irradiation



Preserve the healthy tissues

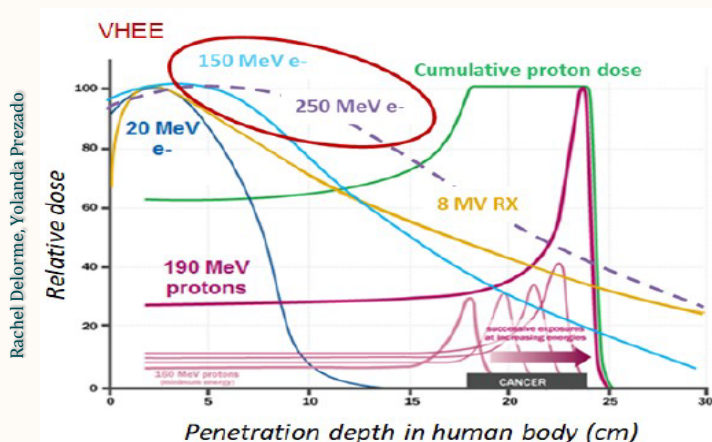


Particle/ energy

Targeted radiotherapy/  
nanoparticles

Particle/energy (hadron/VHEE)

Dose delivery: Spatial  
fractionation of dose and FLASH



Optimization of treatment



Induce a more efficient tumoral irradiation



Preserve the healthy tissues

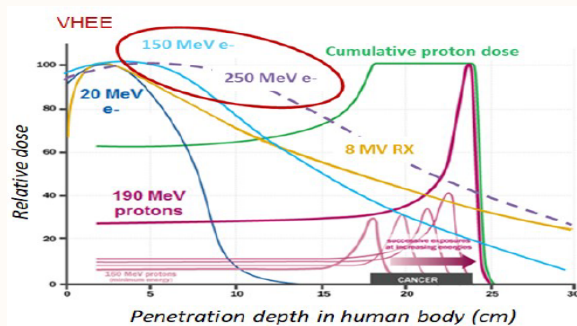


Particle / energy

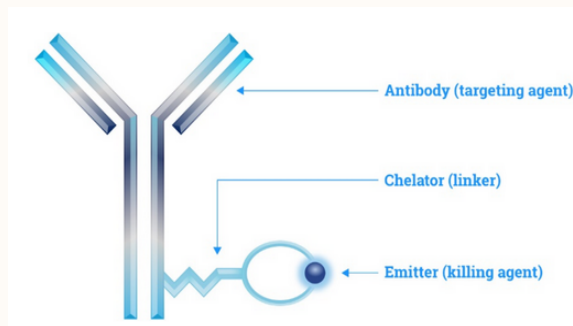
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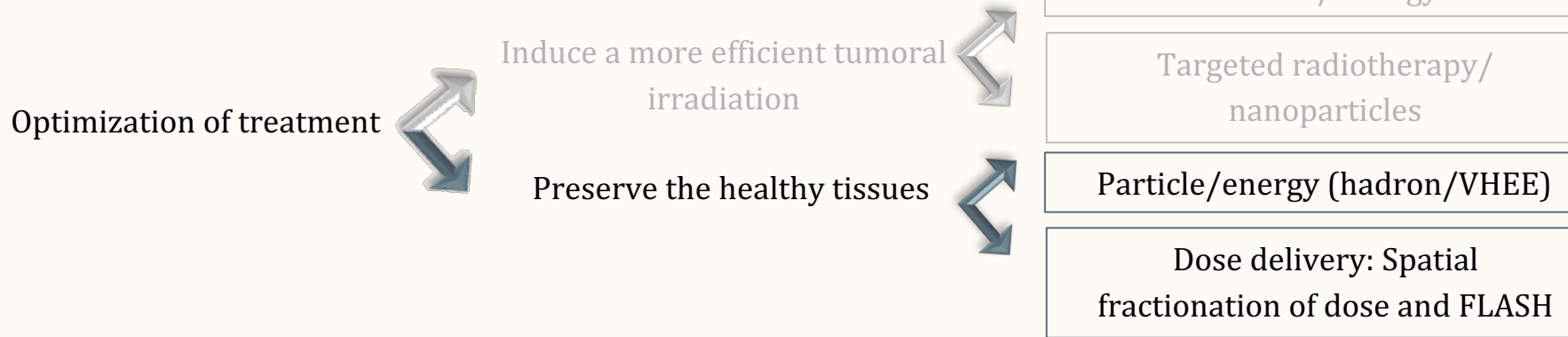
Rachel Delorme, Yolanda Prezado



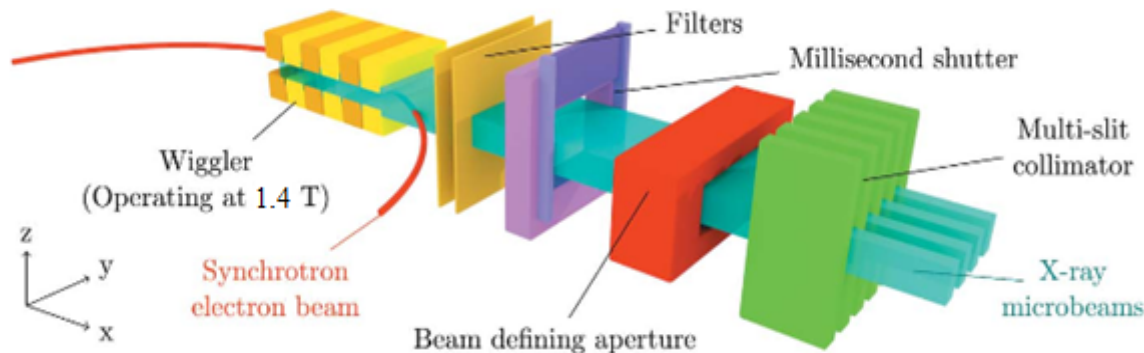
<https://www.actiniumpharma.com>

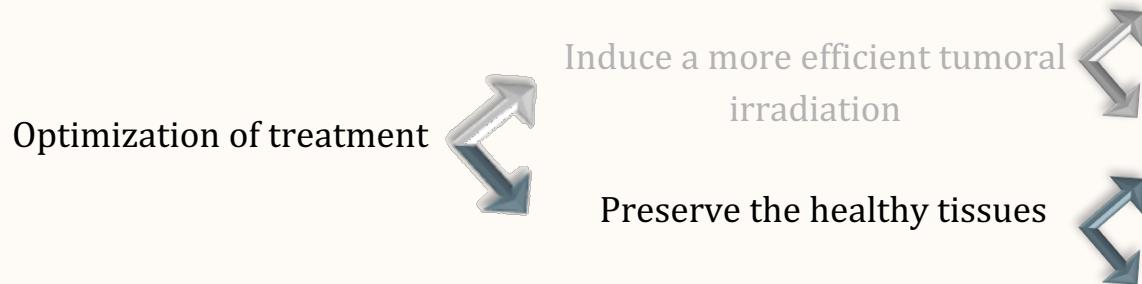


S. Pandeti *et al.*; RSC Advances, 2017



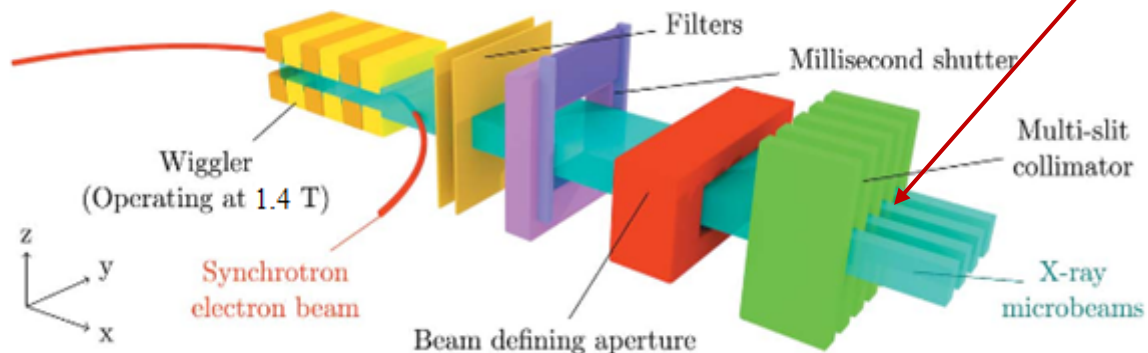
J. Archer et al.; ISR, 2018.

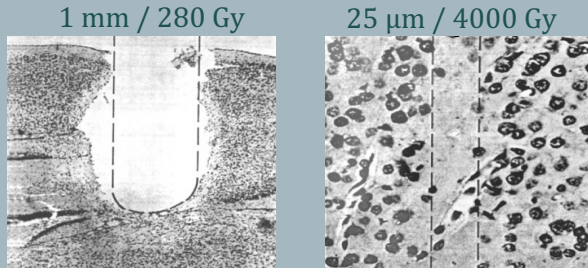




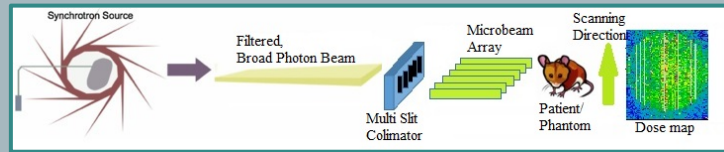
- Particle/ energy
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- Dose delivery: Spatial  
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J. Archer *et al.*, JSR, 2018.





Zeman *et al*, Radiat Res 15, 496, 1961  
Curtis, H. J., Radiat. Res., Suppl. 7, 1967



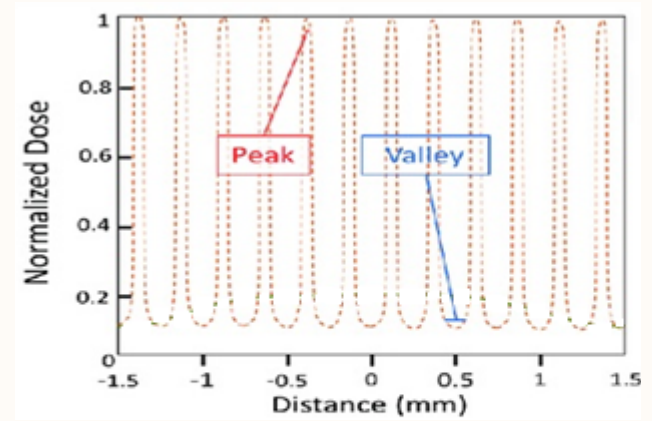
Anderson *et al*, Phys Med Biol, 2012.

- Spatial fractionation as a technique to induce **dose-volume effect**.
- **Microbeam Radiation Therapy (MRT)** is based on dose-volume effect.
- First observation in 1909 by *Alban Köhler*.
- MRT combines **spatial fractionation with FLASH effect**.



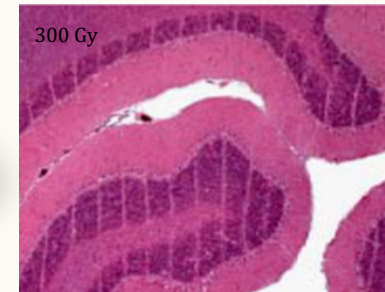
- X-ray beams of  $50\ \mu\text{m}$  (Peaks)
- Separation of  $400\ \mu\text{m}$  (Valleys)
- Peak to valley dose ratio (PVDR) determines the biological response.

PVDR  $\nearrow$  Tolerance of normal tissue  $\nearrow$  Therapeutic index  $\nearrow$



S. Bazyar, PhD thesis, Chapel Hill, 2018.

- Radiotoxic dose is confined to narrow microbeam passage area.  $\rightarrow$

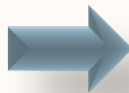


Cervelet piglet (15 months after ir.)

Low divergence

High dose rate

Steep penumbra

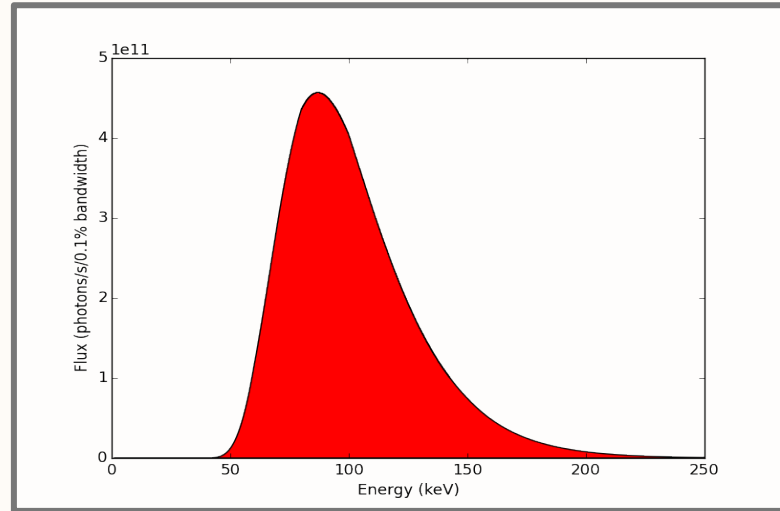
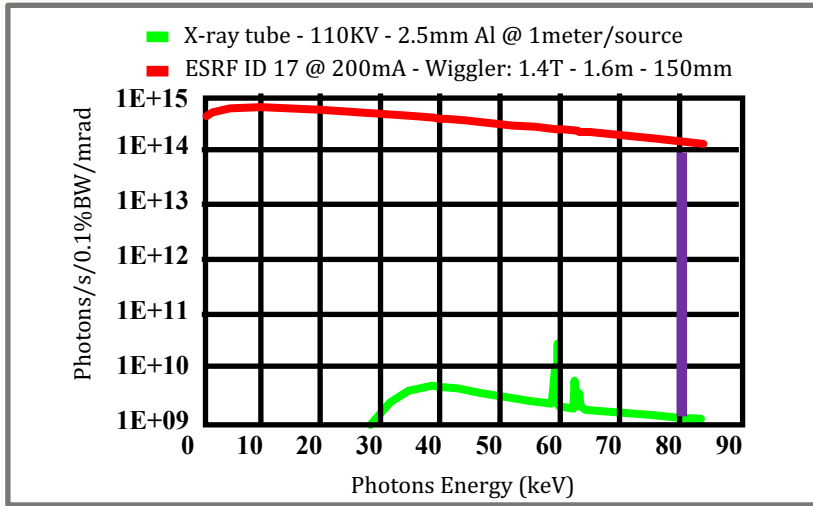


As an ideal irradiation source:

3<sup>th</sup> generation of synchrotron  
Like **ESRF**, Grenoble, France



Energy spectrum ID17 (ESRF)



15  $kGy \cdot s^{-1}$  in synchrotron



To avoid smearing out microbeams attributable to the organ motion

- Challenges in MRT

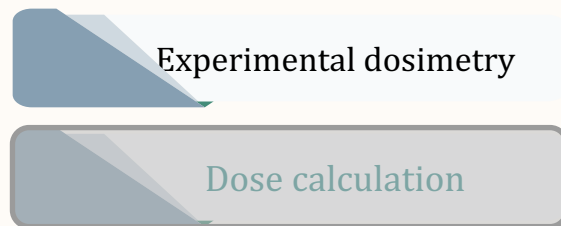


Experimental dosimetry



Dose calculation

- Challenges in MRT

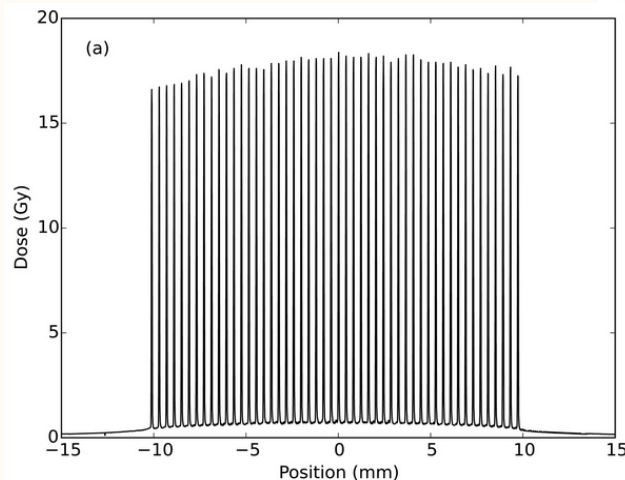


- High dose rate  $15 \text{ kGy} \cdot \text{s}^{-1}$
- Micrometric resolution
- Dynamic dose range from 1 Gy to 1000 Gy
- Water equivalency of dosimeter

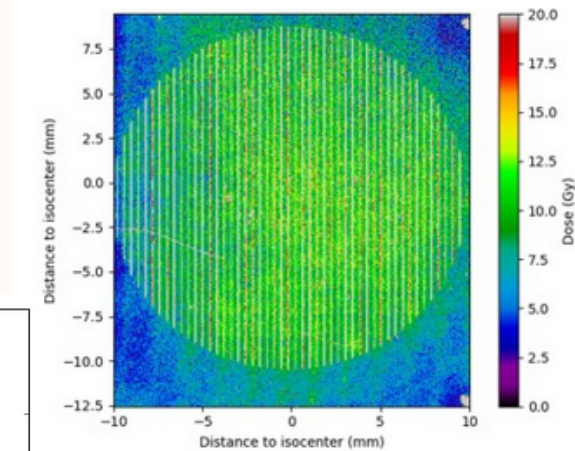
## Potential dosimeters for MRT:

- Proportional counters TEPC
- Solid state MOSFET
- Fluorescent nuclear track detector (FNTD)
- Thermoluminescent Dosimeter (TLD)
- Silicon strip detector
- Doped optical fibers
- MRI gel dosimeters
- Diamond detector
- Gafchromic films

MicroDiamond 60019

J. Livingstone *et al.*, Med. Phys, 2016.

Gafchromic (HD-V2)

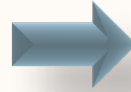
A. Ocádiz *et al.* Physica Medica; 2019.

- Challenges in MRT

Experimental dosimetry

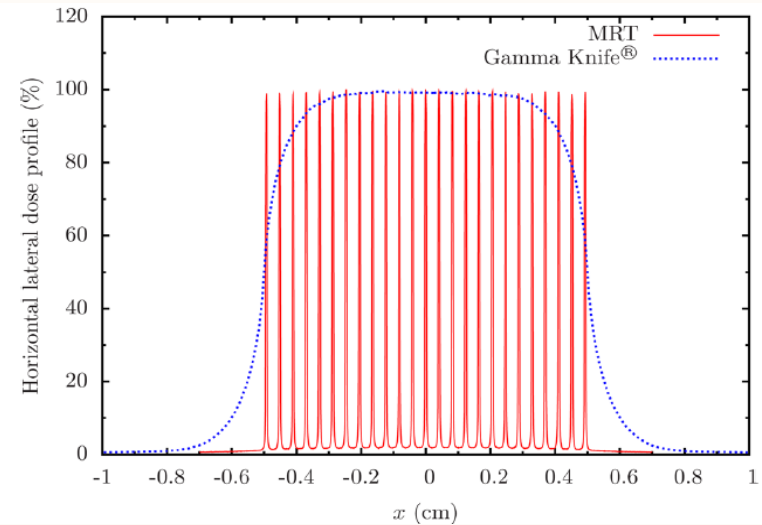
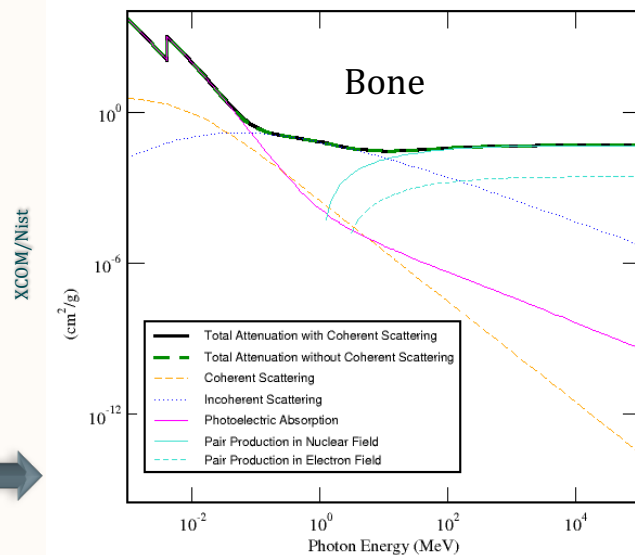
Dose calculation

Dose calculation in MRT is  
different from conventional RT



Energy spectrum

Spatial dose distribution  
pattern



I. Martinze-Rovira, et al. Med. Phys. 2012.

- At kV energies, **photoelectric effect** induces a strong **atomic number dependence**.



Three dose calculation  
algorithms in MRT



Three dose calculation  
algorithms in MRT

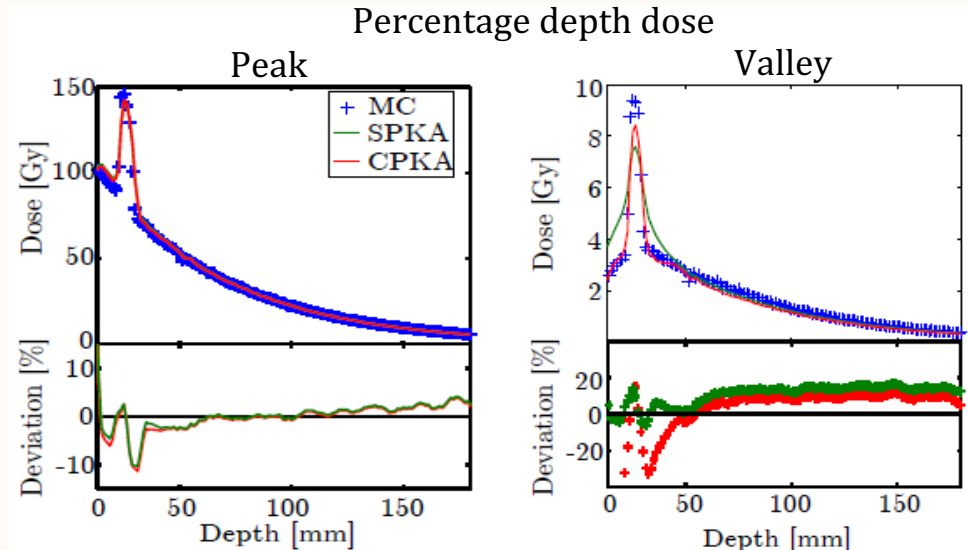
Convolution/superposition

Monte Carlo

Hybrid

Convolution of **TERMA** and **analytical dose kernel**:

- Uncertainty in **heterogeneities**.
- Lack of consideration the **photon polarization**.



Three dose calculation  
algorithms in MRT

Convolution/superposition

Monte Carlo

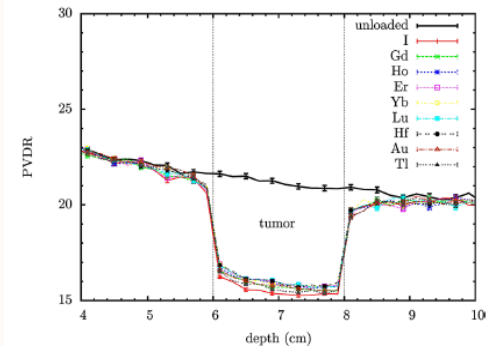
Hybrid

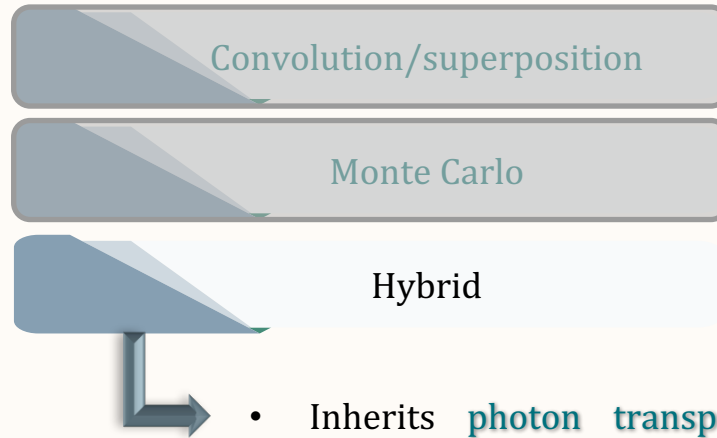
- Time consuming
- Micrometric grid
- Consideration of photon polarization



The only option to reproduce correctly the propagation of scattered orthovoltage photons on a heterogeneous geometry

PVDR calculated by PENELOPE



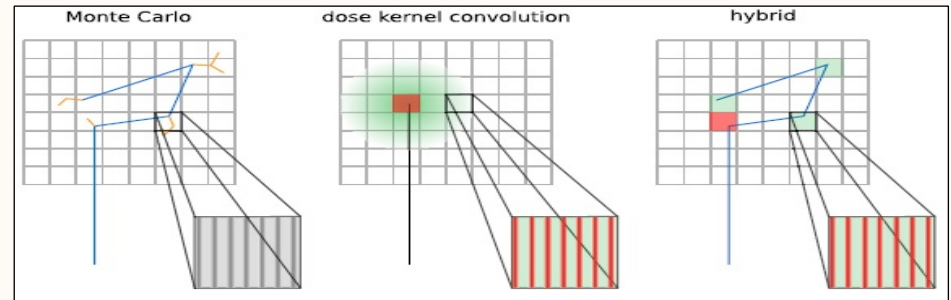
Three dose calculation  
algorithms in MRT

- Inherits **photon transport** from MC and **electron transport convolution based method**.

Based on several approximations with:

**Advantage: Rapidity**

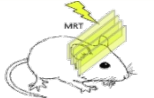
**Disadvantage: Potential uncertainty**

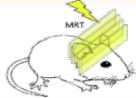


M.Donzelli, *et al*; Phys Med Biol. 2018.

## Experimental validation of hybrid algorithm using EBT-3 and HD-V2 Gafchromic films

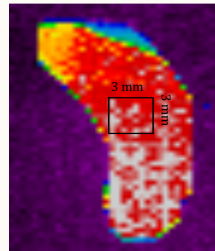
MRT 373 Gy

	Relative difference
Peak (2cm)	-33.46%
Peak (7cm)	-5.78%

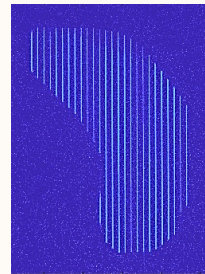
	Relative difference
Valley (2cm)	19.05%
Valley (7cm)	45.78%



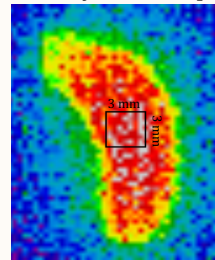
Peak dose map



Peaks & valleys



Valley dose map



## Potential explanations



### Hybrid algorithm uncertainties

- Polarized Livermore as physics list
- Field shape complexity
- Energy spectrum
- No scattering in collimator



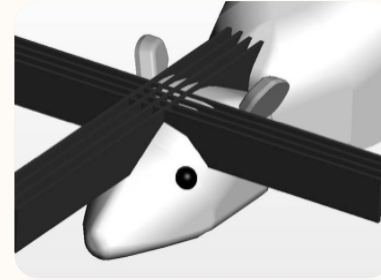
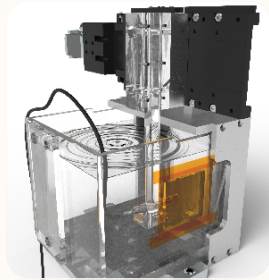
### Film dosimetry uncertainties

- Statistical noise
- Film inhomogeneities
- Calibration uncertainties

Developing a new hybrid calculation engine for MRT which is able to consider:

- Beam and beam modifier properties, photon polarization and irradiation geometries.
- Dose metrics adapted to MRT and biological equivalent doses.

Benchmarking and validation the TPS using in-vitro and in vivo trials.



**Thank you for  
your attention**

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