



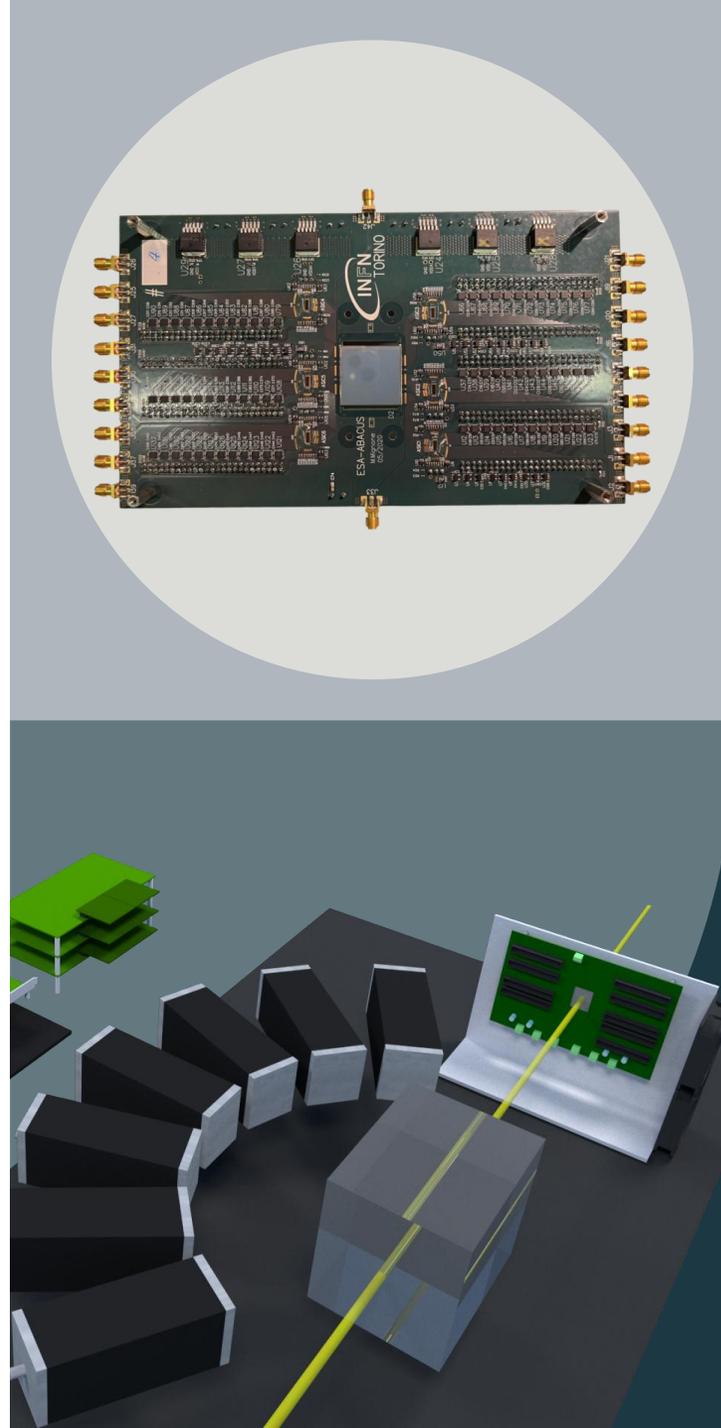
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Update on beam monitors and range verification systems

V. Ferrero - Università degli Studi di Torino e INFN Sezione di Torino

CNAO - IN2P3 meeting 5th March 2026 ...*follow-up of the October 2023 meeting*



NOVEL BEAM MONITORS

TREATMENT VERIFICATION SYSTEMS

NEW CHALLENGES IN PARTICLE THERAPY:

- Advanced treatment modalities (multiple rescanning, image-guided treatment)
- Fast pencil beam scanning
- Hypofractionation
- New accelerators

ADAPTIVE THERAPY



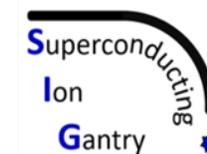
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Istituto Nazionale di Fisica Nucleare



**RESEARCH ACTIVITIES FOR
PARTICLE THERAPY IN THE
MEDICAL PHYSICS GROUP AT
UNITO AND INFN-TO:**



NOVEL BEAM MONITORS

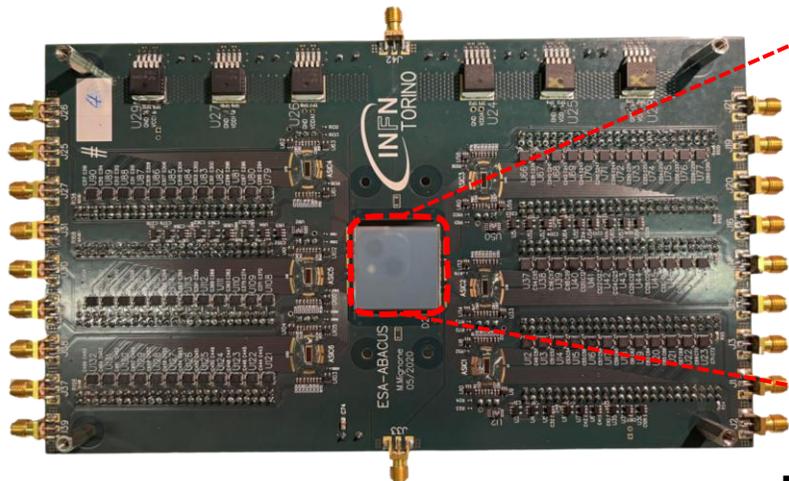
❑ PROTONS (60-230 MeV):

- Low Gain Avalanche Detectors (LGAD) segmented in strips
- Thickness → 50 μm
- Internal gain → 10

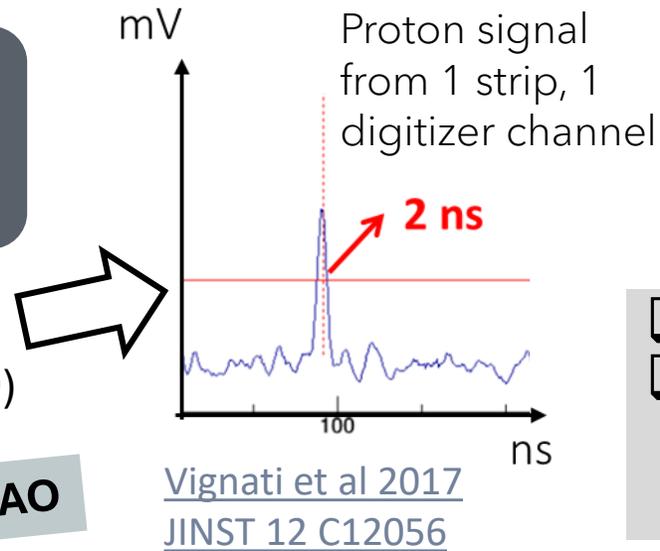
Tests @CNAO

❑ CARBON IONS (115-400 MeV/u)

- Strip segmented n-on-p diode sensors
- Thickness → 60 μm



Readout: ESA-ABACUS board (110 nm CMOS technology)



Sensitivity → single particle

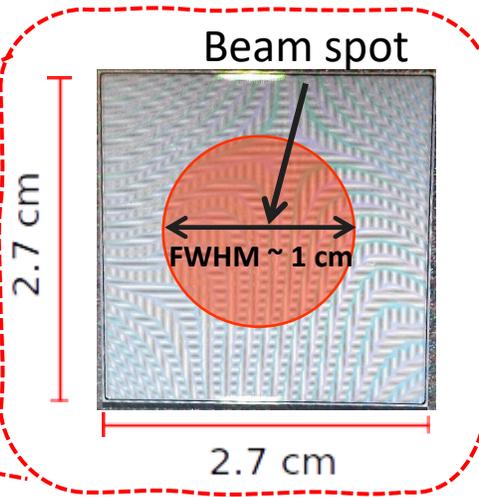
Collection times → ~1 ns

Time resolution → 30 ps

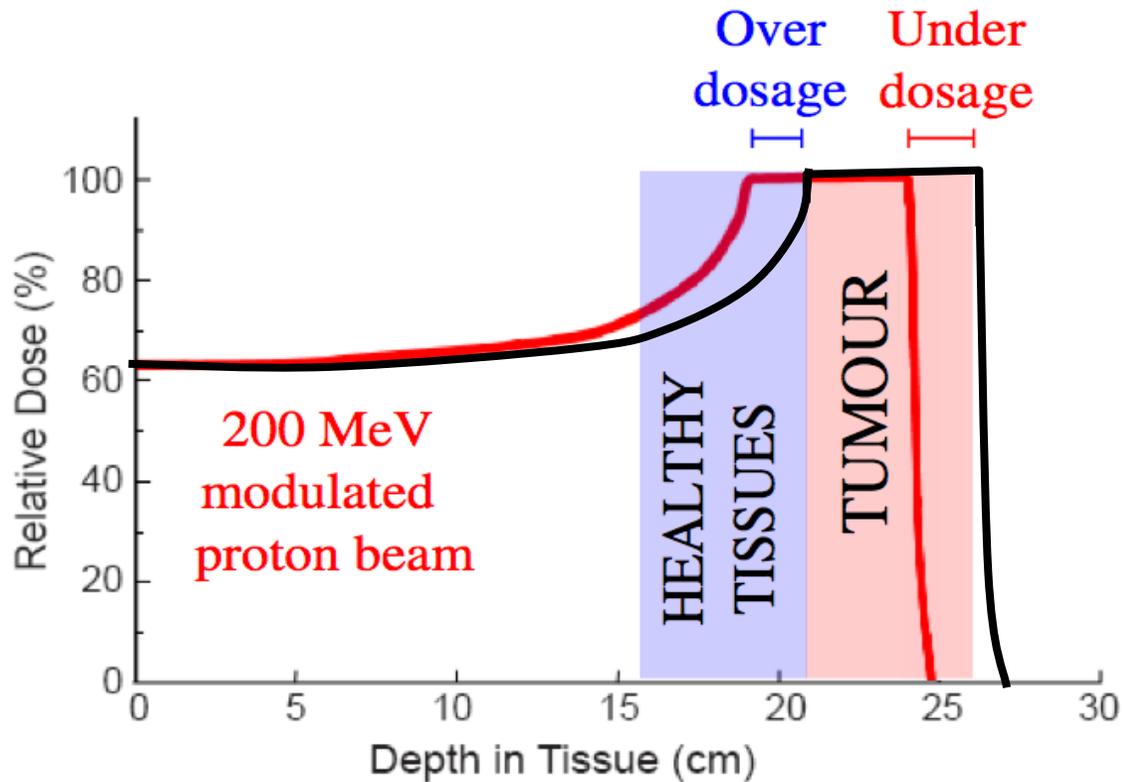
- ❑ Single particle discrimination
- ❑ Different beam fluence rates:
 - Protons (10^9 protons/s)
 - Carbon ions (5×10^7 ions/s)

MAIN CHALLENGES:

- ❑ Signal pile-up
 - fast sensors & segmentation
 - fast readout electronics
- ❑ Readout complexity
 - number of channels
 - dead time
 - data throughput
- ❑ Limited size



TREATMENT VERIFICATION SYSTEMS



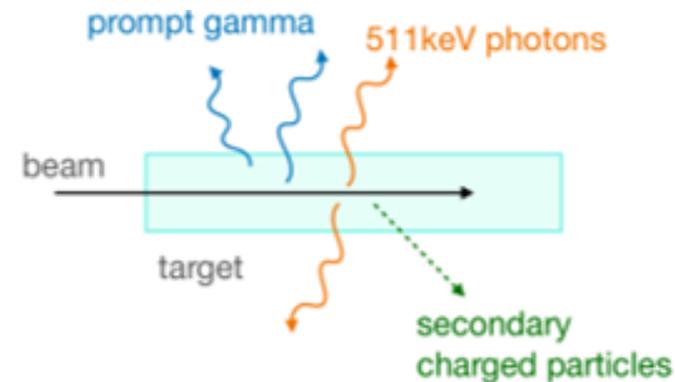
Zhu X, Fakhri GE. *Theranostics*. 2013;3(10):731-740.

Charge particle therapy → very sensitive to any source of deviation with respect to the treatment planning

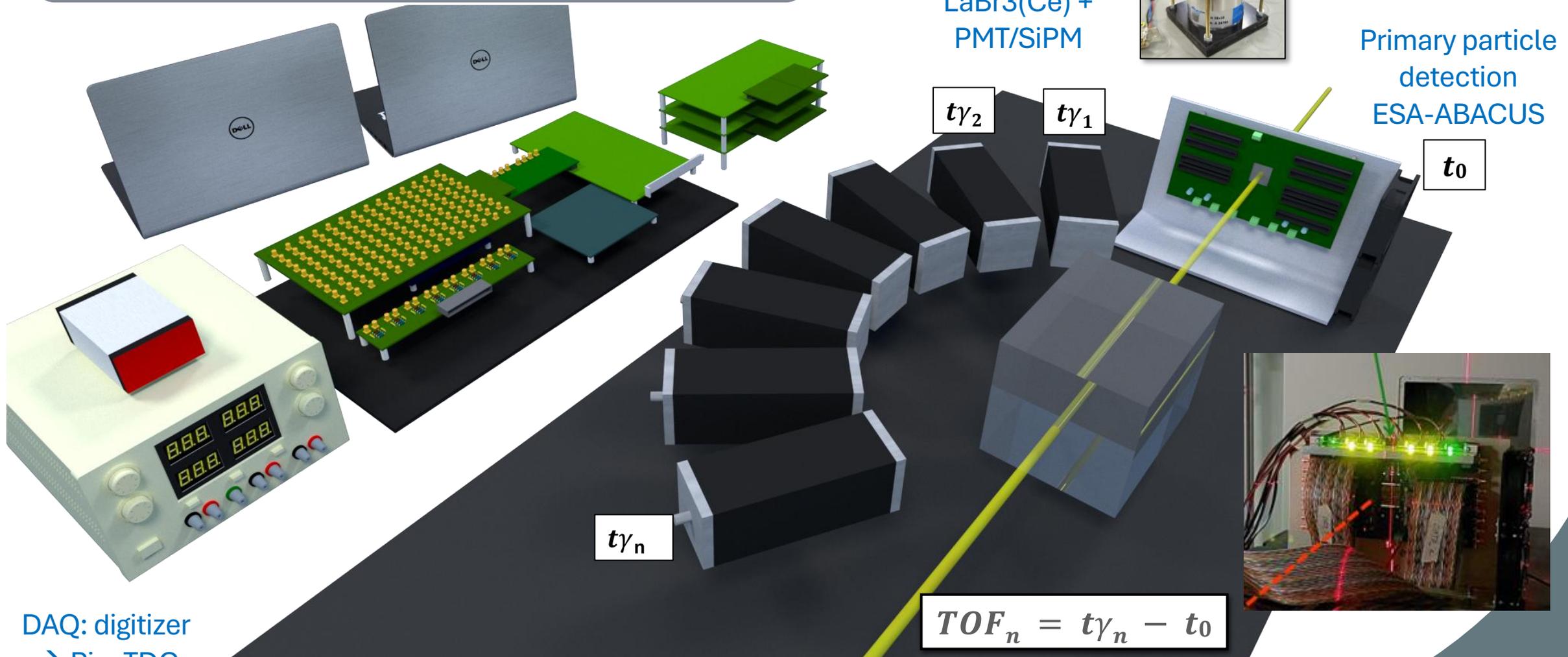
- patient mispositioning
- organ motion
- anatomic changes
- tumor shrinking
- weight loss
- cavity filling

Range uncertainty estimation for robust treatment plans 2.5-3% + 1-3 mm

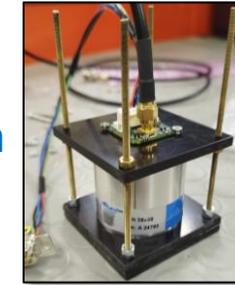
Treatment verification systems → towards adaptive treatment planning



TREATMENT VERIFICATION SYSTEMS

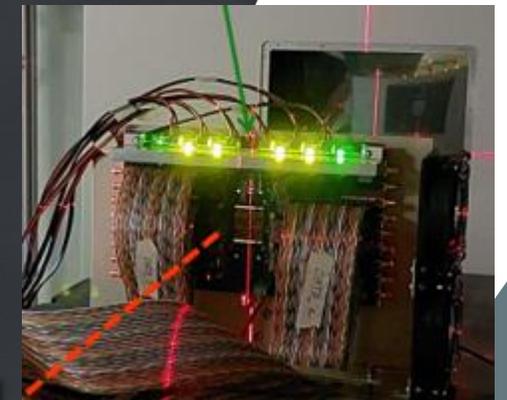


Secondary
particle detection
LaBr3(Ce) +
PMT/SiPM



Primary particle
detection
ESA-ABACUS

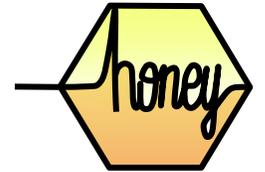
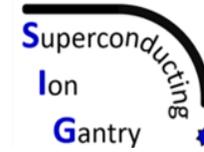
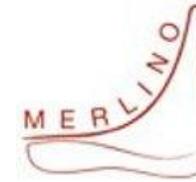
t_0



DAQ: digitizer
→ PicoTDC

$$TOF_n = t\gamma_n - t_0$$

TREATMENT VERIFICATION SYSTEMS



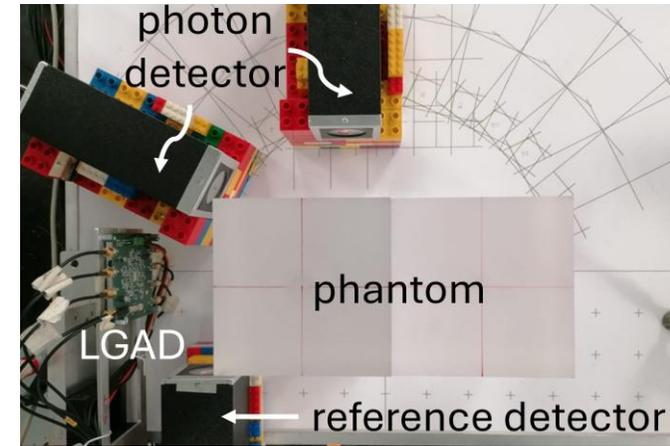
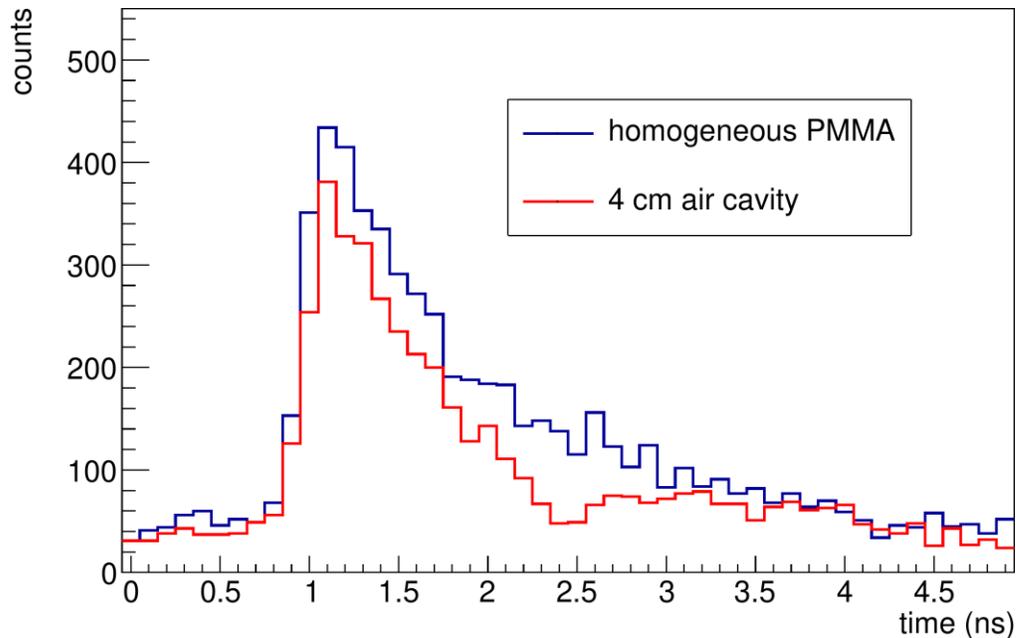
PGT measurement to:

- Assess the range (p and ^{12}C)

Measurements at

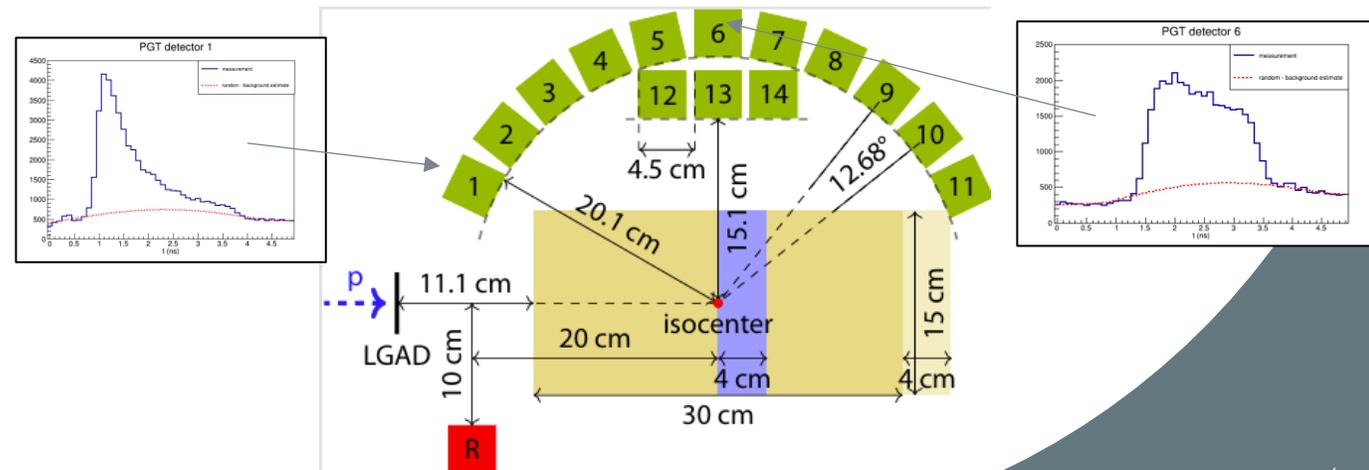


Protons, 227 MeV, $4 \cdot 10^7$ pps avg rate on homogeneous PMMA and on a 4-cm airgap PMMA



LaBr₃:Ce + PMT
DAQ: digitizer

Measurements at different detector positions

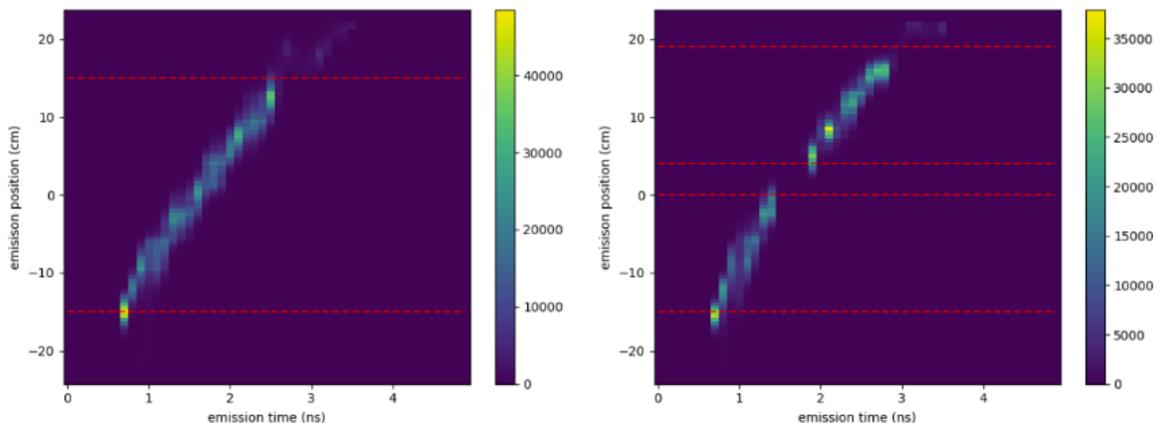


TREATMENT VERIFICATION SYSTEMS

PGT measurement to:

- Assess the range (p and ^{12}C)
- Evaluate the stopping power (p)

227 MeV protons, $4 \cdot 10^7$ pps avg rate, on homogeneous PMMA (left) and on a 4-cm airgap PMMA (right)



Can we use it to measure different target's SP (metrological measure)?

Measurements at

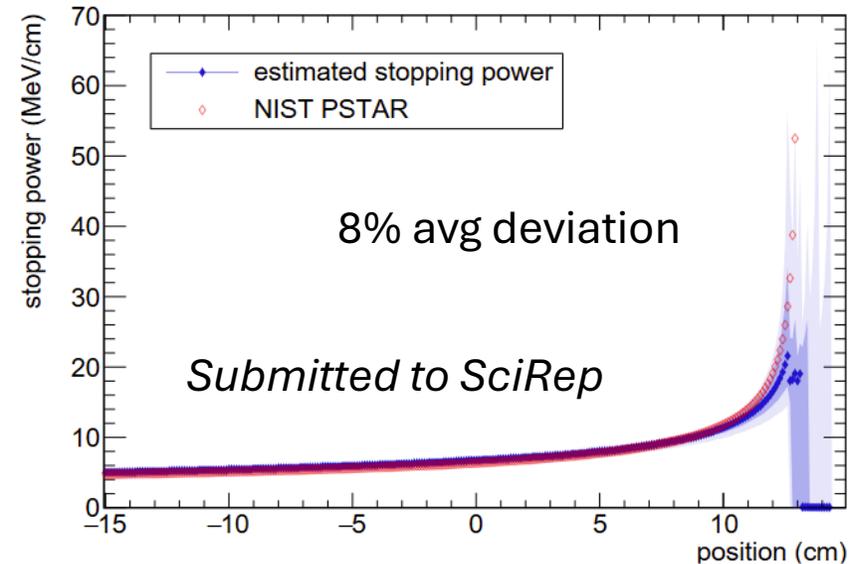


$$m_{jp}^{k+1} = \frac{m_{jp}^k}{S_{jp}} \sum_i \sum_d \frac{n^{*id}}{\sum_l \sum_t f_{idlt} m_{lt}^k} f_{idjp}$$

m_{jp}^{k+1} : prompt photon
 S_{jp} : sensitivity
 n^{*id} : data
 f_{idjp} : SM
 p: time bin (emission)
 j: space bin (emission)
 i: time bin (detection)
 d: detector

Spatiotemporal Emission Reconstruction (SER-PGT): an MLEM-based solution to reconstruct the particle range (Pennazio et al. PMB 2022)

Space and time: we have the particle motion!
(Ferrero et al. Front in Phys 2022)



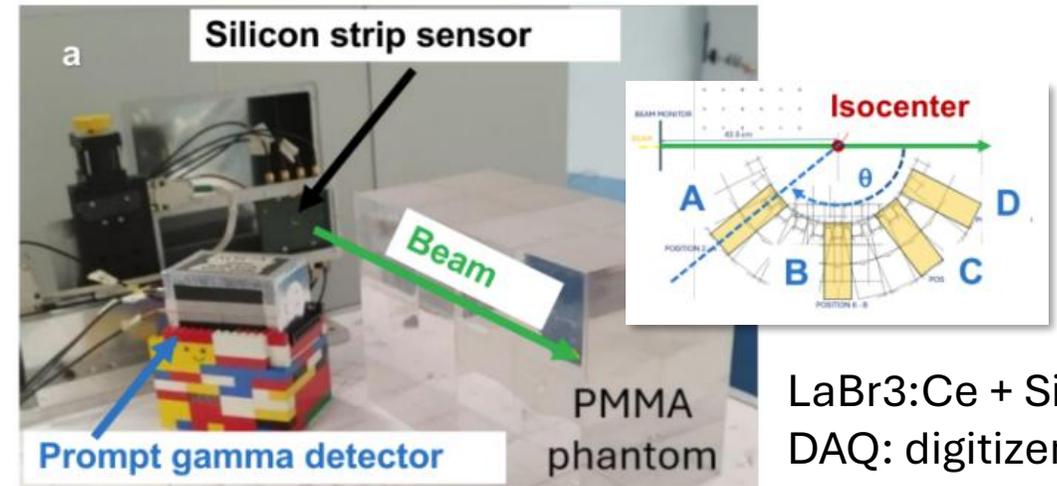
Work with M. Rafecas, Luebeck (Germany)

TREATMENT VERIFICATION SYSTEMS

PGT measurement to:

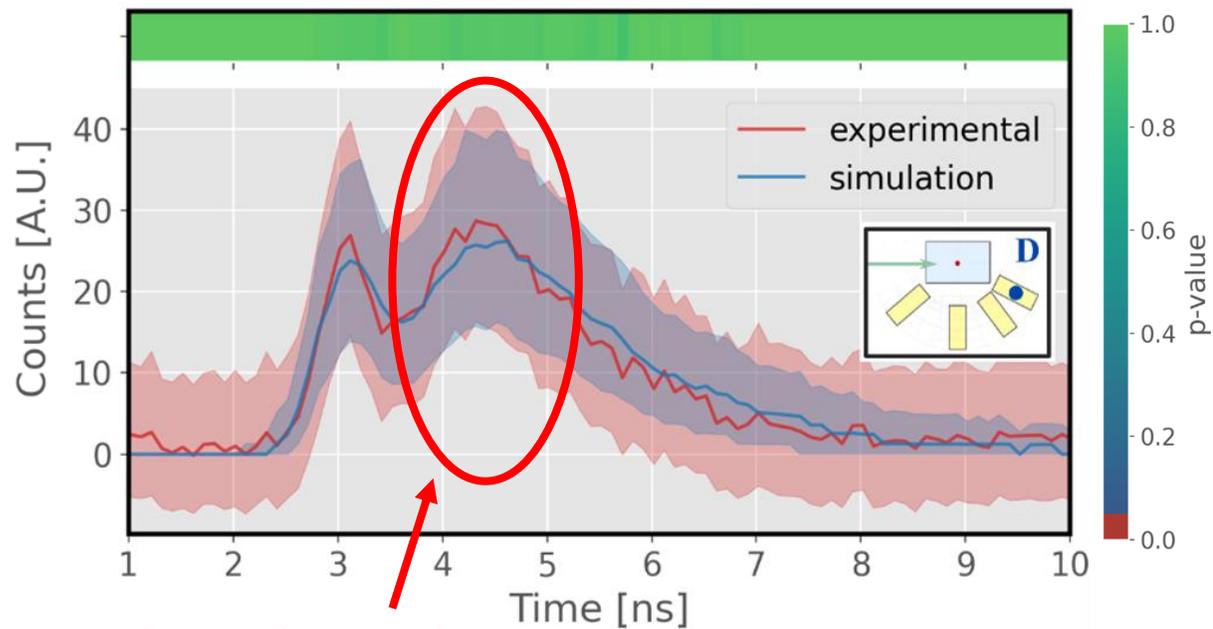
- Assess the range (p and ^{12}C)

Measurements at



LaBr3:Ce + SiPM
DAQ: digitizer

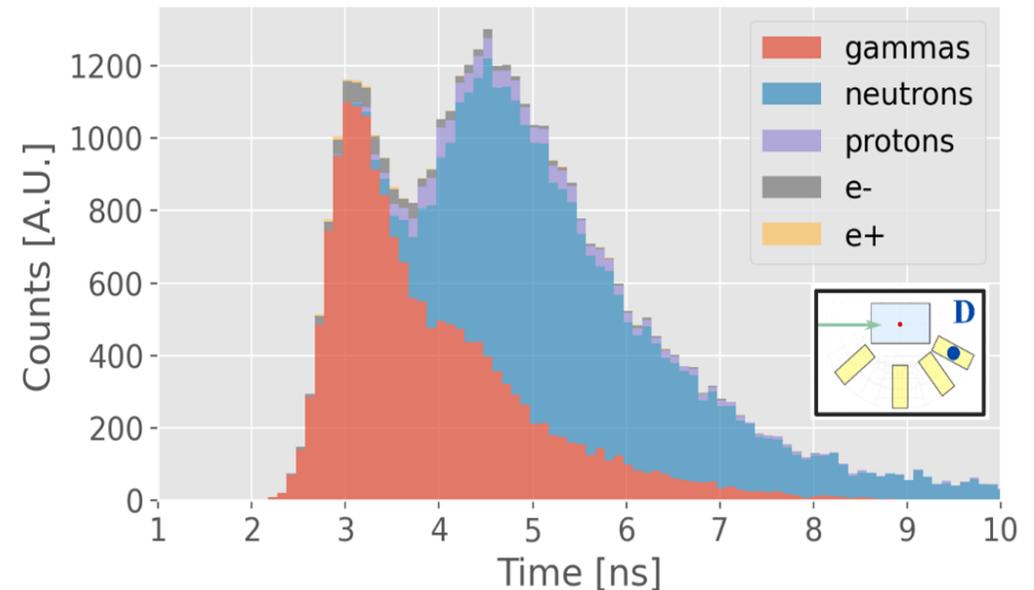
Carbon ions, 166 MeV/u, $5 \cdot 10^6$ pps avg rate on PMMA



What is this peak?

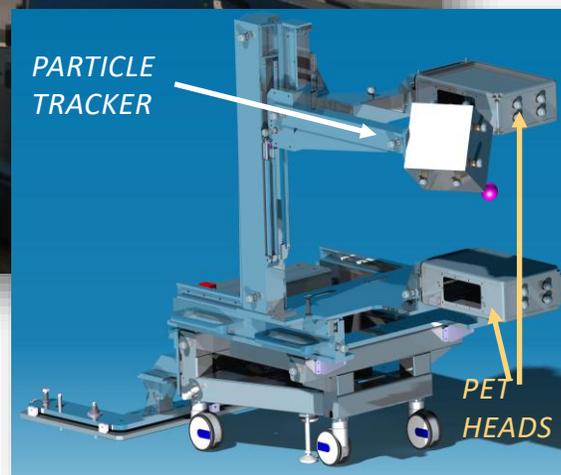
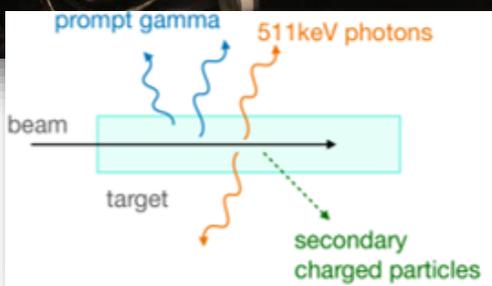
Bootstrapping of exp data (2000 datasets)
Shaded region: 95% confidence intervals

Geant4 simulation of particle contribution



Work by Iram B., submitted to PMB

TREATMENT VERIFICATION SYSTEMS



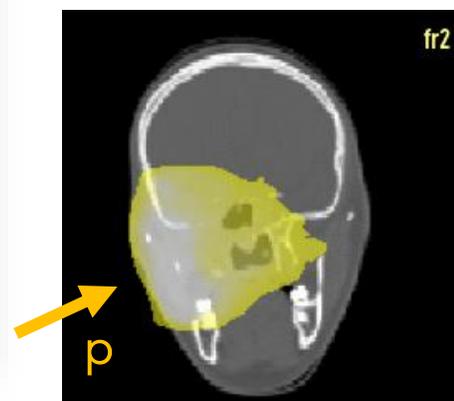
INSIDE - INnovative Solutions for In-beam Dosimetry in hadrontherapy

- **Bimodal system** (PET detector + particle tracker)
- **Integrated** in the treatment room

Observational clinical trial

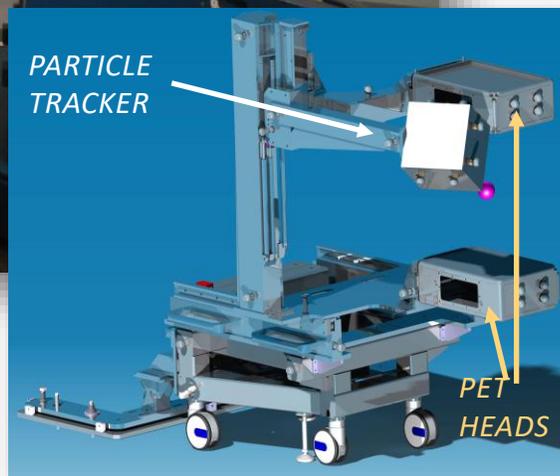
40 patients:

- **Phase I:** 20 patients (10 p + 10 ^{12}C) enrolled between 2019 July and 2020 February
- **Phase II:** 20 patients (4 p + 3 ^{12}C), *ongoing*



Adenoid cystic carcinoma, protons (35 fractions)

TREATMENT VERIFICATION SYSTEMS



Pathology:

ACC: adenoid cystic carcinoma (p or C)

Adenocarcinoma (p or C)

Bone sarcoma (p or C)

Clivus chondrosarcoma (p or C)

Clivus chordoma (p or C)

ITAC: intestinal type adenocarcinoma (p or C)

Meningioma (p)

MMM: malignant mucosal melanoma (p or C)

Mucoepidermoid carcinoma (p or C)

Nasopharyngeal carcinoma (p)

SCC: squamous cell carcinoma (p or C)

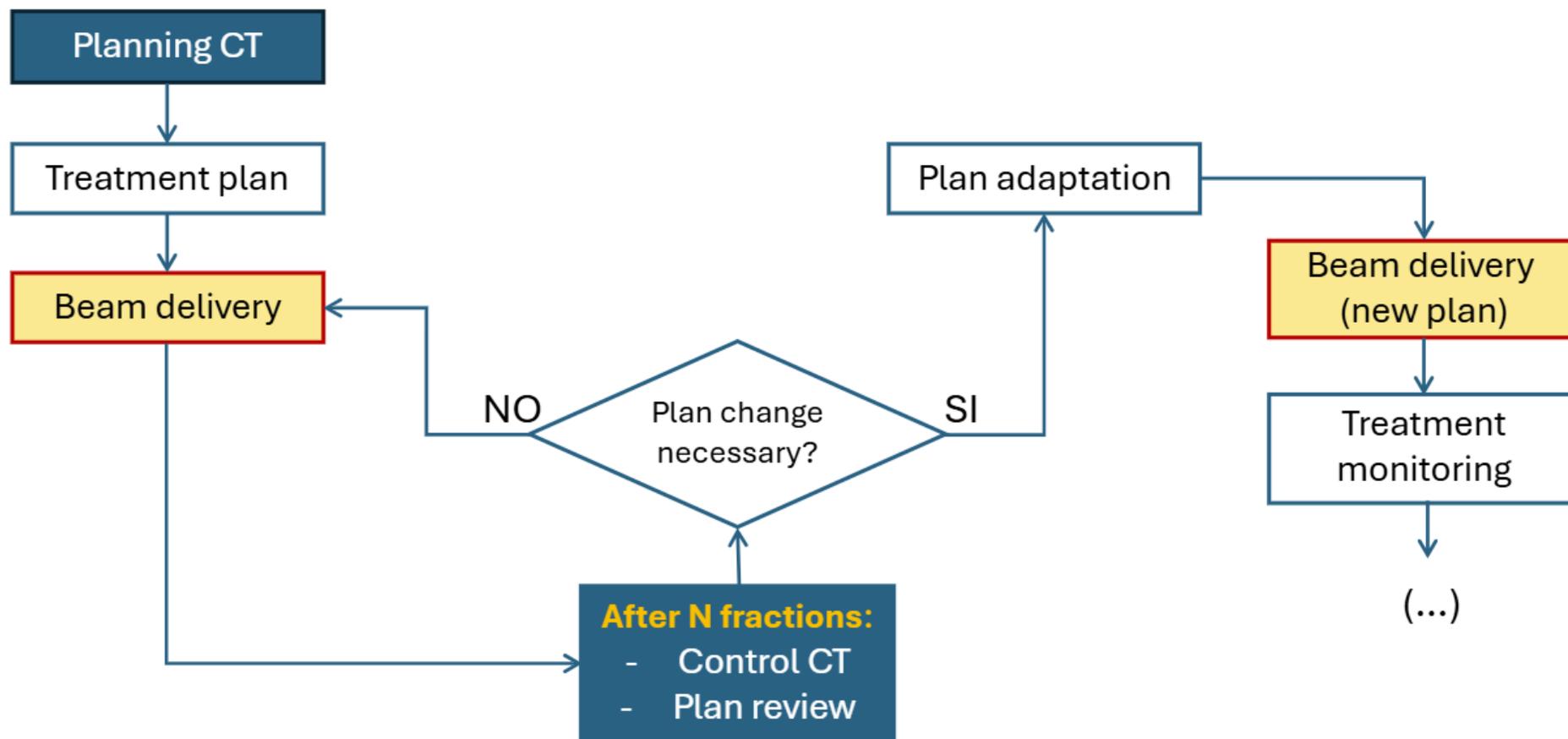
SNEC: sinonasal neuroendocrine carcinoma (p or C)

SNUC: sinonasal undifferentiated carcinoma (p or C)

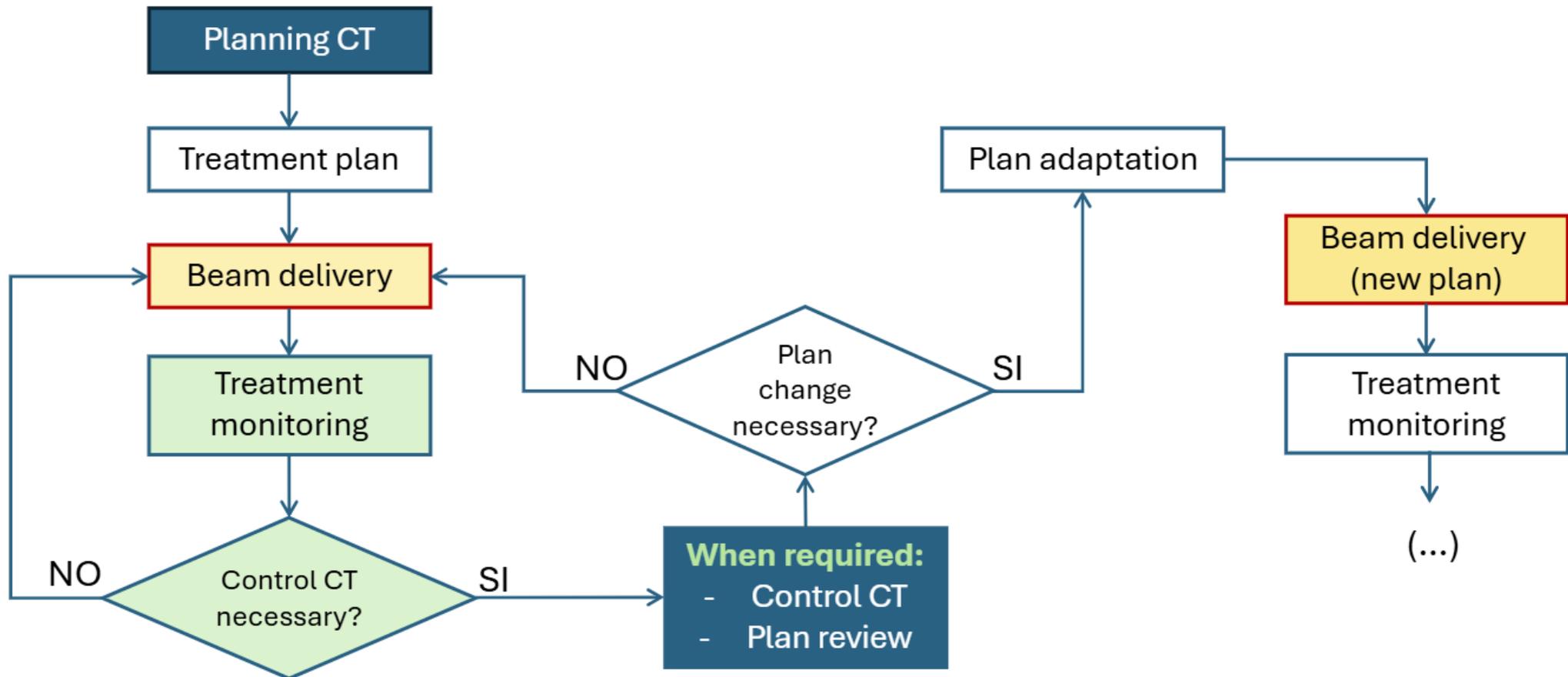
Soft tissue sarcoma (p or C)

estensioneuroblastoma

TREATMENT VERIFICATION SYSTEMS



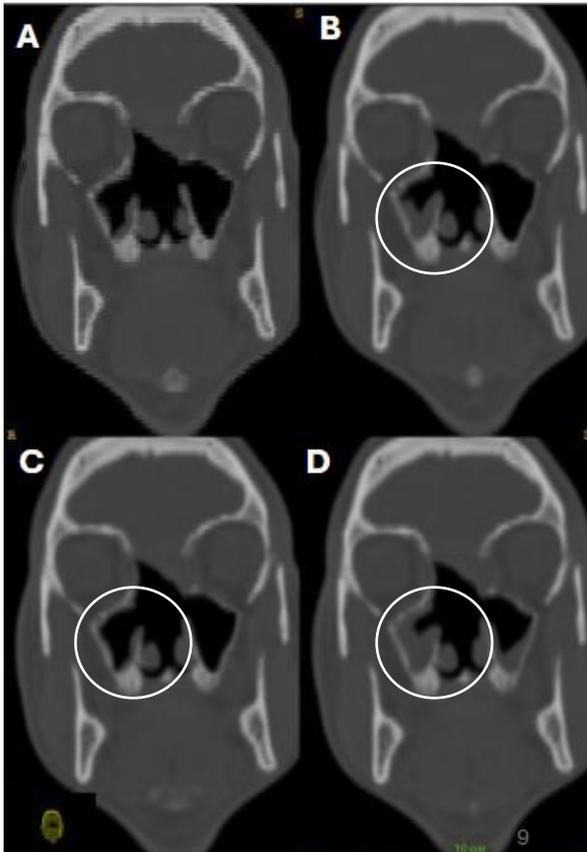
TREATMENT VERIFICATION SYSTEMS



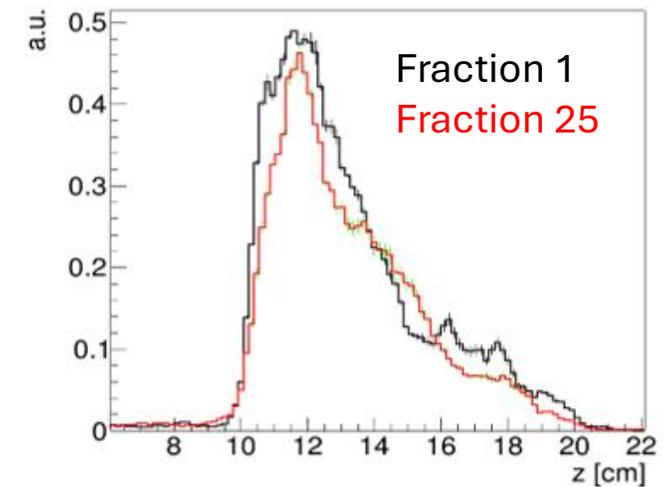
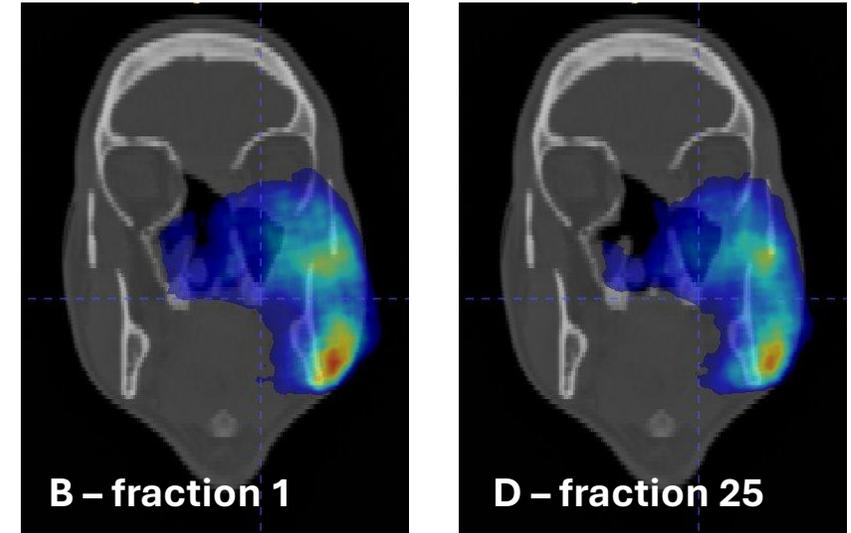
TREATMENT VERIFICATION SYSTEMS

011P - estensionuroblastoma

35 fractions - 5 days/week - prescribed dose = 70 GyE



- A. PLANNING CT, 12/11/2025. Right cavity slightly filled, left cavity empty.
- B. TREATMENT START: CONTROL CT, 26/11/2025. Moderate filling of right cavity.
- C. Fraction 15: CONTROL CT, 18/12/2024. Emptying of right cavity (similar to planning CT).
- D. Fraction 25: CONTROL CT, 03/01/2025. Severe filling of left and right cavities.



Outline

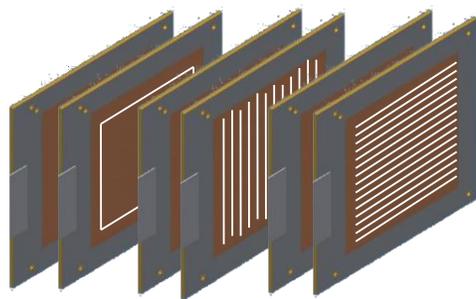
Short-term perspectives for beam monitors and range verification systems:

- Up to 6x6 cm² Si-based beam monitors with single particle sensitivity for commissioning of fixed beams and research setups
- Optimization of highly performing DAQ interfaced with both systems
- Investigation of innovative algorithms for image reconstruction

Long-term perspectives for beam monitors and range verification systems:

- Larger Si-based beam monitors
- Clinical use of range verification systems

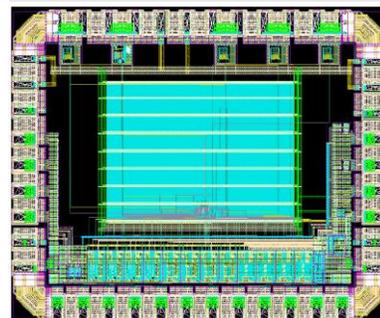
In the meantime... *new front-end readout to boost performances of existing ionization chambers*



Gas-based detector
(ionization chambers,
MWPC, ...)



NEW TERA ASIC
CMOS 65 nm



| | |
|------------------------------------|-------------------|
| Technology | CMOS 65 nm |
| N. of channels | 64 |
| F _{MAX} Curr-To-Freq conv | > 160 MHz |
| Minimum Q _C | ~ 10 fC (1 count) |
| Interface | SLVS |
| Transmission protocol | Serial |
| System clock | 200 MHz |
| Clock I→f internal | Yes |

First TERA in 65 nm expected at the end of 2026



Gruppo di Fisica Medica
UNITO e INFN TO

