

Dosimetry for proton beam cancer therapy at NPL

Ana Lourenço

University of Cambridge, February 2023



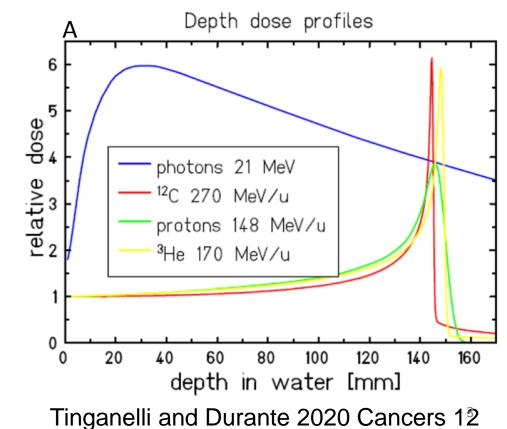
NPL – National Physical Laboratory

- UK's National Measurement Institute (equivalent to NIST in the USA)
- Develop and apply the most accurate measurement standards
- Primary standard sufficiently accurate used to calibrate secondary measurement standards
- Define standard quantities
- Radiotherapy absorbed radiation dose
- Dedicated programs on the development of standards and protocols for radiotherapy



Rationale for radiotherapy

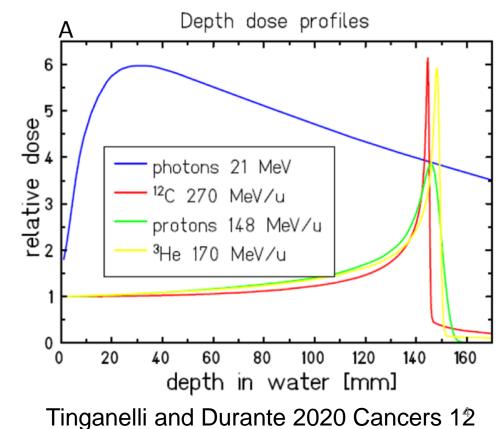
- About 350000 new cancer cases are diagnosed every year in the UK
- Radiotherapy is the most cost-effective treatment for cancer and 50% of people diagnosed have radiotherapy
- It can be delivered in various modalities
 - Photons
 - Electrons
 - Protons
 - Carbon-ion
 - Helium
 - ...



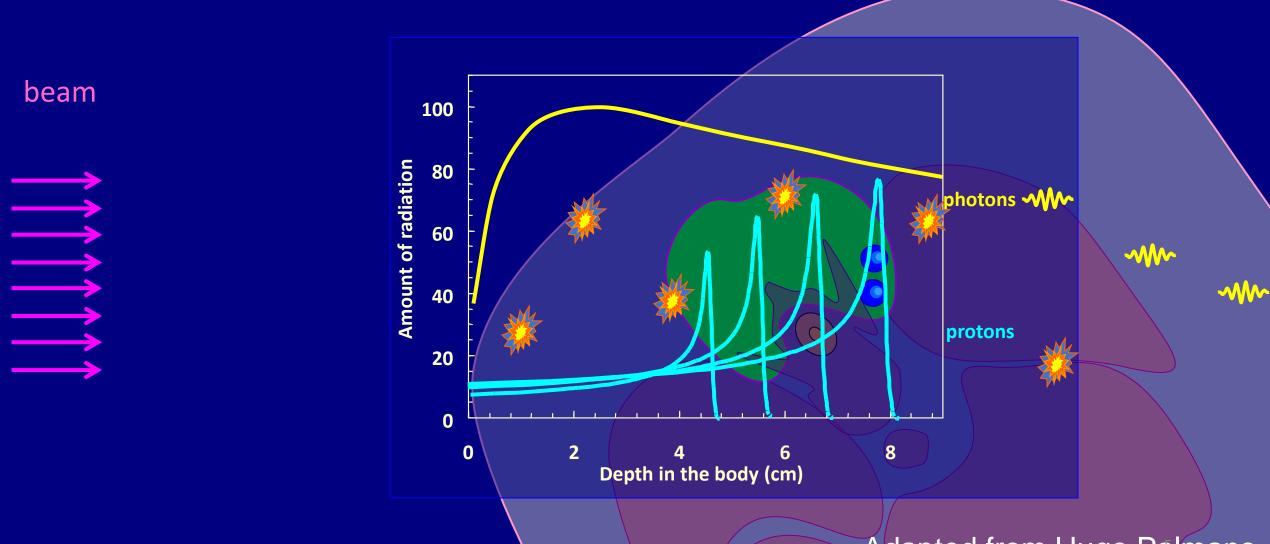
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Radiotherapy: photons vs protons

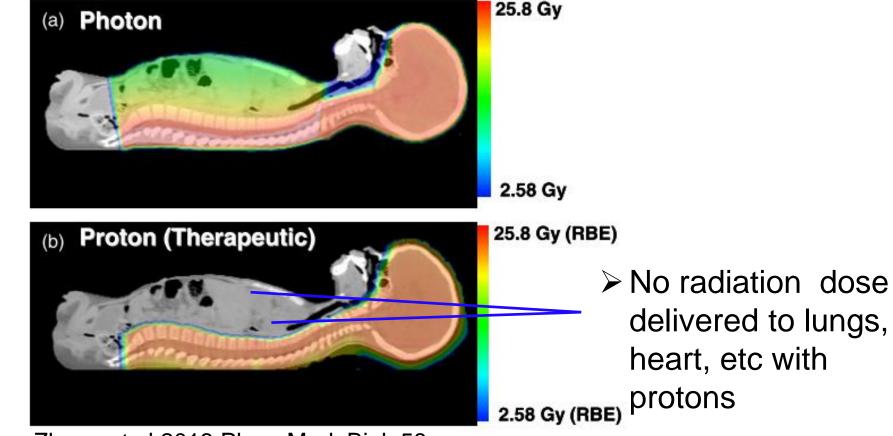


Adapted from Hugo Palmans

A clinical example

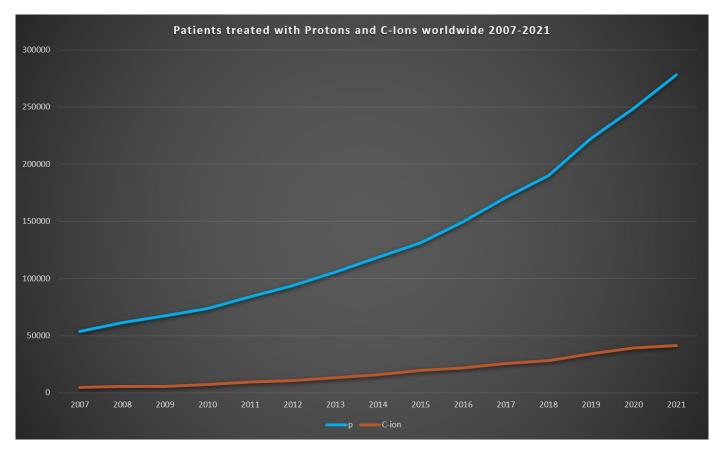
Craniospinal radiation dose distribution for a pediatric medulloblastoma patient

Colour shows the radiation dose maps, where radiation dose is deposited



Zhang et al 2013 Phys. Med. Biol. 58

Rationale for Proton Beam Therapy



Per end of 2021 280000 patients have been treated worldwide with proton therapy

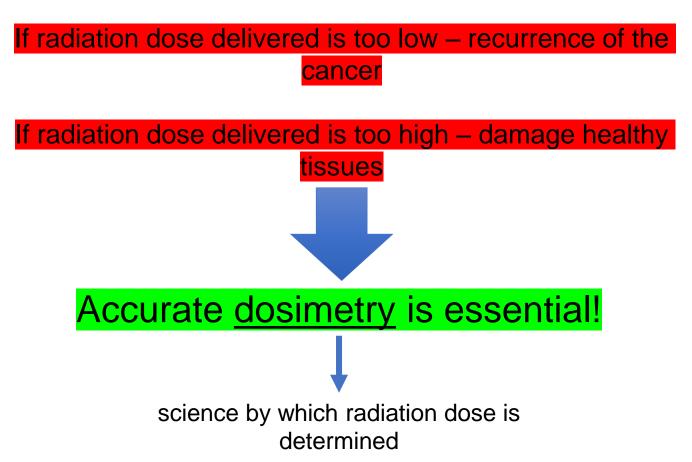
 UK government invested £250M in 2 NHS state-of-the-art proton therapy clinics

Worldwide:

- 122 facilities in operation
- 88 facilities under construction
- 65 facilities in planning stage

Why consistency and accurate knowledge of radiation dose are important?

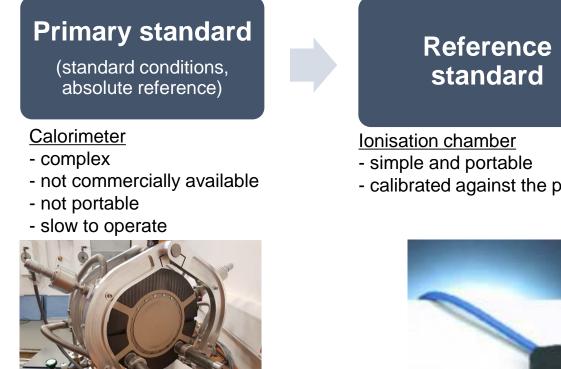
The success of radiotherapy depends on delivering the correct radiation dose to the patient



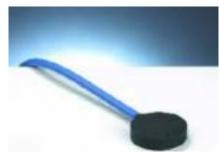
- ICRU Report 24, IAEA TRS-398: Radiation dose delivered to the patient should be within 5% of the prescribed radiation dose value (k=1)
 - Reference dosimetry uncertainty: 1% (k=1)

Dosimetry chain

- Aim of NPL Radiotherapy Programme: to support the safe and optimised application of • radiotherapy modalities
- **Primary standard** sufficiently accurate used to calibrate secondary measurement standards
- Radiotherapy absorbed radiation dose ٠



- calibrated against the primary standard

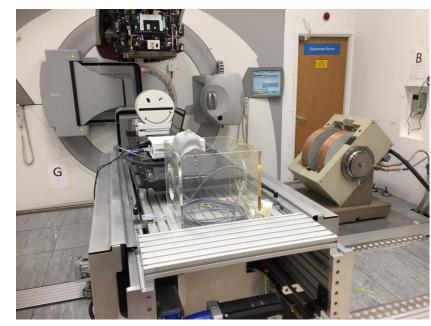


- > There is no dedicated primary standard for dosimetry directly in proton therapy beams
- Uncertainty in radiation dose at least 2 times larger than the recommended uncertainty



- No proton beam at NPL
 - Calorimeters are complex and difficult to operate
 - > On-site LINACs (medical linear accelerator)
 - Controlled environment









- No proton beam at NPL
- Established research collaboration with Clatterbridge Cancer Centre

Visit and meeting at Clatterbridge 6/11/02

Present: Andrzej Kacperek (AK), Russel Thomas (RAST), Frank Verhaegen (FV), Hugo Palmans (HP)

13:30 Delicious lunch at 400 years old pub

ACTION:

14:30 Visit to workshop and proton treatment room

Inventory of equipment available at Clatterbridge:

- Milling-machine: accuracy 0.005mm, working area 400 mm x 280 mm
 - Plastics, graphite, aluminium, brass,....
 - We could have phantom inserts, etc. made there at no cost for NPL. For parts that need construction, provide drawing + parts that have to be inserted such as ion chamber.
- Computer dedicated to research (we could install MCNPX here!)
- FV will send AK procedure to obtain MCNPX from NEA database

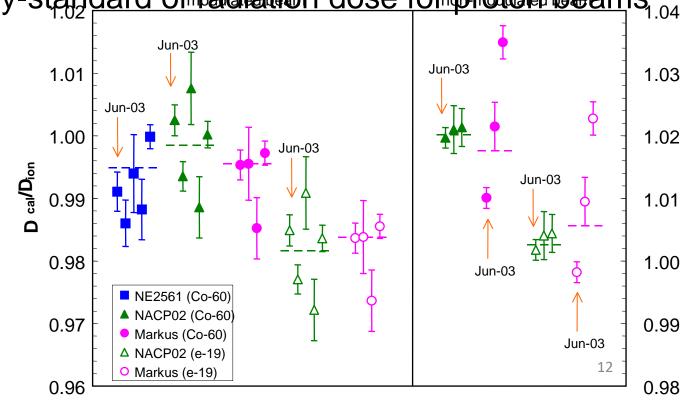
Aim of the original project was to explore the variation of the current recommendations of dosimetry protocols and the feasibility of building a primary standard to routinely operate in the clinical department



- No proton beam at NPL
- Established research collaboration with Clatterbridge Cancer Centre
- Built a small-body portable graphite calorimeter for clinical proton beams
- Built the 1st calorimeter as a primary-standard of madiation dose for proton beams, 1.04





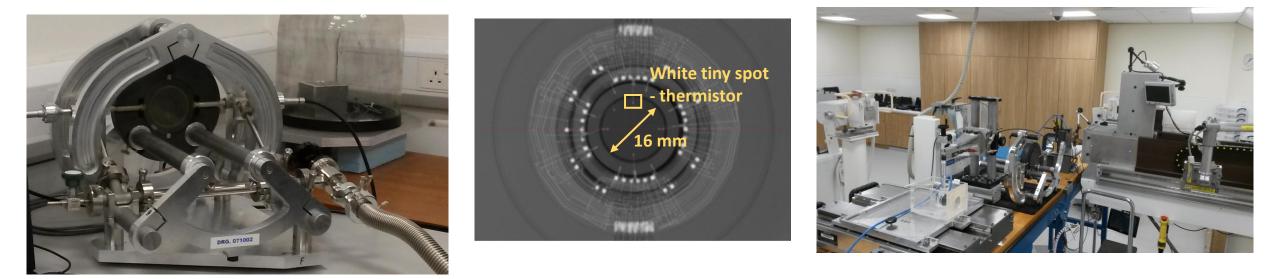




World's 1st primary-standard calorimeter for protons

 $D = c.\Delta T$

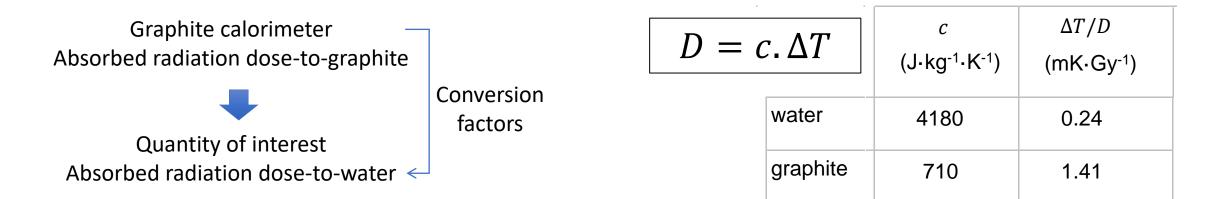
- Graphite calorimeter
- 4 thermistors 0.4 mm diameter \rightarrow typical fraction of treatment 2 Gy, 0.002 Kelvin
- To deliver an uncertainty on reference dosimetry for protons of less than 1% (k=1)



$$D_{\rm W} = \left[\left(m_{\rm core,eff} c_{\rm g} k_{\rm c} \Delta T_{\rm core} - \int \Delta P_{\rm core} dt - \sum_{i} \int h_{\rm core,i} (T_i - T_{\rm core}) - a_j P_j dt \right) / m_{\rm core, eff} \right] \cdot k_{\rm imp} k_{\rm gap} k_{\rm z,cal} k_{\rm d,cal} k_{\rm an,cal} s_{\rm w,g} k_{\rm fl}$$
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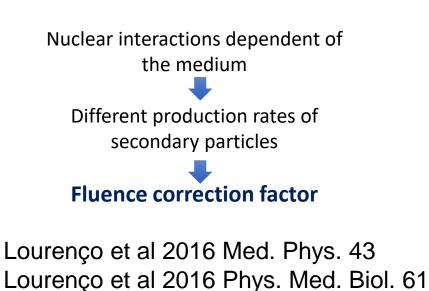


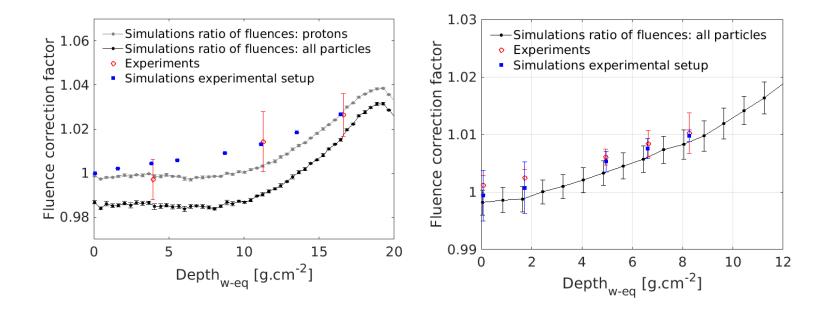
- No proton beam at NPL
- Established research collaboration with Clatterbridge Cancer Centre
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- Established the necessary correction/conversion factors





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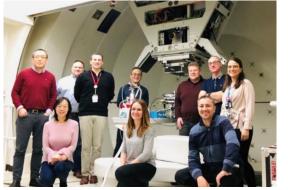








Manchester, UK



Cincinnati, USA

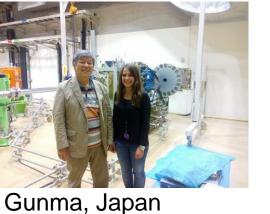




Clatterbridge, UK



Trento, Italy







Orsay, France

- The new procedure based on the NPL calorimeter provides a reduction in uncertainty by a factor of two on the radiation dose for the population - 1st ever Code of Practice for proton beams based directly on a primary standard
- Ensuring optimal tumour control and improved accuracy, and <u>establish consistent standards</u> that underpin the development of clinical trials



Dosimetry Audits – existing guidelines based on lonisation Chambers

- Evaluate the quality of the practice of radiotherapy at a cancer centre
- Reference dosimetry audit service for proton therapy beams
- Requirement for quality assurance of proton therapy centres to start treatments



NPL and clinical scientists in the 1st proton therapy centre in Denmark and in Spain



Development of end-to-end dosimetry audits

- Evaluate the quality of practice of the full treatment
- > Phantoms are plastic materials that simulate the patient geometry and composition
- New phantom: PRuDeNCE PRoton heaD and NeCk Evaluation
- Clinical facilities treat the phantom in a similar manner as they would treat a real patient. The phantom includes internal detectors, such as ionisation chambers, alanine pellets and radiochromic film, for the measurement of radiation dose and its distribution within the phantom
- Pilot audit performed at the two NHS high-energy proton facilities
- > These measurements provide validation of the patient workflow methods and are a requirement for clinical trials









Cook et al (in review)

NPL supports the clinical translation of new radiotherapy modalities

- Short pulses of ultra-high radiation dose rate radiation (>40 Gy/s), known as FLASH radiotherapy (RT), can significantly spare normal tissues during radiotherapy treatment
- Paradigm shift in radiotherapy:
 - Conventional radiation dose rate: 6 weeks
 - FLASH radiation dose rate: less than a week
- Considerable reduction in post-treatment complications and reduce the cost of proton beam radiotherapy
- Pioneering measurements at the Cincinnati Children's Hospital (one of the top paediatric hospitals in the United States)

www.nature.com/scientificreports

scientific reports

Check for update

OPEN Absolute dosimetry for FLASH proton pencil beam scanning radiotherapy

Ana Lourenço^{1,2²²}, Anna Subiel¹, Nigel Lee¹, Sam Flynn^{1,3}, John Cotterill¹, David Shipley¹, Francesco Romano⁴, Joe Speth^{5,6}, Eunsin Lee^{5,6}, Yongbin Zhang^{5,6}, Zhiyan Xiao^{5,6}, Anthony Mascia^{5,6}, Richard A. Amos², Hugo Palmans^{1,7} & Russell Thomas^{1,8}

A paradiam shift is accurring in clinical angology exploiting the recent discovery that short pulses









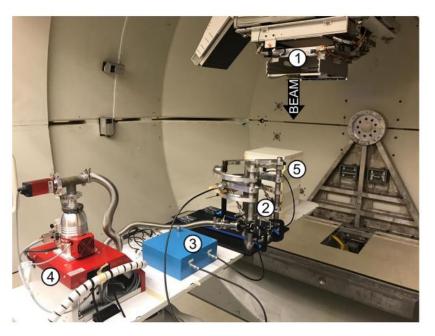
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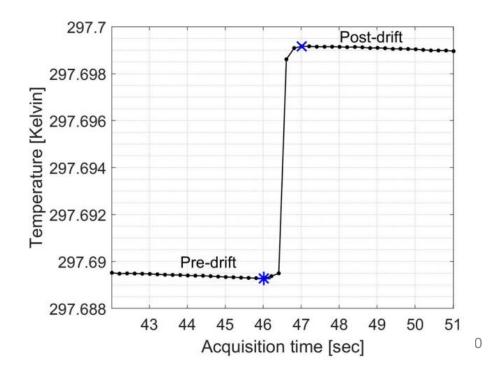




- First ever calorimetry measurements
- Established the correction factors required for absolute dosimetry of FLASH proton beam radiotherapy
- Underpinned the FDA approval and provided the hospital with confidence to commence clinical implementation of this novel technology
- Ongoing collaboration with Institut Curie proton mini-beams



Lourenço et al 2023 Nature Sci. Rep. 13 2054



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