# REAL-TIME 3D DOSE IMAGING AND SOURCE LOCALIZATION IN BRACHYTHERAPY

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The ORIGIN project is an initiative of the Photonics Public Private Partnership (www.photonics21.org), and has received funding from the European Union's Horizon 2020 Research and Innovation Programme under Grant Agreement n° 871324 optical fibre dose imaging for adaptive brachytherapy

# **ONCOLOGICAL BRACHYTHERAPY**

- Radiotherapy is the use of ionizing radiation for treatment. It is delivered into external beam radiotherapy using accelerators, or internal, using sources, known as brachytherapy (BT).
- Brachytherapy is a form of radiation therapy where a sealed radiation source is placed inside or next to the cancer area. The source placement is vital to ensure radiation to the tumor, while ensuring minimum exposure to nearby critical organs.

### prostate cancer



gynecological cancer



 Brachytherapy is divided into Low Dose Rate (LDR) and High Dose Rate (HDR).

	Source	Activity	Implantation	<ey></ey>	Abs. Length
LDR	125	15 MBq	Permanent	35 keV	3 cm
HDR	<sup>192</sup> lr	~100 GBq	Temporary	380 keV	10 cm



# THE ORIGIN PROJECT

## **Optical Fibre Dose Imaging for Adaptive Brachytherapy**

ORIGIN aims to deliver more effective, photonics-enabled, brachytherapy for cancer treatment through advanced **real-time radiation dose imaging** and source localisation. This will be achieved by the development of a new **optical fibre-based sensor** system to support diagnostics-driven therapy through enhanced adaptive brachytherapy.





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	LDR - BT	HDR - BT	
Sensitivity to Dose	up to 3 cm	up to 10 cm	
Spatial Resolution	3 mm @ 3 cm	1 mm @ 5 cm	
Dose Rate Range	1 mGy/s up to 15 Gy/s		
Statistical Precision	5% in 0.5 s	5% in 0.1 s	

At least 16 dosimeters are need to localize the source.



# THE ORIGIN PROJECT: DOSIMETER SYSTEM

The project's goal will be achieved by developing a **16 optical fiber**-based system with **scintillating light detected by SiPM** to reconstruct the dose map.



Scintillator	Gadox (LDR)	YVO (HDR)	
τ <b>[μs]</b> *	500	500	
$\lambda_{\max}$ [nm]	545	600 - 650	
LY [ph/MeV]*	7.1 · 10 <sup>4</sup>	4.8 · 10 <sup>4</sup>	
Transmittance*	10.2 %	4.2 %	

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# SINGLE CHANNEL MEASUREMENTS

- From single channel measurement was possible to extract all the specification of the project.
- The results prove that the single fibre dosimeter system complies with the specifications for both the HDR-BT and LDR-BT.
- The data follow the Treatment Planning System (TPS)



# THE 16 CHANNEL READOUT SYSTEM

### 64-channel SiPM readout board (CAEN\* FERS) equipped with 2 WEEROC CITIROC1A ASICs\*\*

- ✓ Single p.e. counting capability
- ✓ Maximum counting rate: 20 MHz
- ✓ 1 HV power supply (20 100V) with temperature compensation
- ✓ Ethernet, usb2 and optical link interface for readout (up to 6.25 Gbit/s)





\*https://www.caen.it/products/a5202/



\*\*https://www.weeroc.com/products/sipm-read-out/citiroc-1a

# LABORATORY-QUALIFICATION

- An automatic procedure is used to estimate the V<sub>BreakDown</sub> (V<sub>BD</sub>) for all SiPMs.
- V <sub>BIAS</sub> adjustment allows to equalize the ∆pp and to operate all SiPMs at the same PDE (V <sub>BIAS</sub> = V<sub>BD</sub> + 7 V).
- Staircases acquired at V <sub>BIAS</sub> to select 0.5 p.e. and 1.5 p.e. threshold.







# LABORATORY-QUALIFICATION

Measurements with X-ray cabinet to evaluated the uncertainties:

- Fiber positioning: 0.8%
- Fiber connection: 0.1%
- Geometrical acceptance: 10 % -

1 fiber

Fiber Non-Uniformity: 16 % (pre-production) 1.2 % (new production)













# **EQUALIZATION MEASUREMENT**

- Water-phantom with circular geometry
- All fibres at the same distance from the source
- Measured counting rate normalised at mean value
- Run to check equalization procedure; systematics variation less than 1%



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z = 10 cm

# **CLINICAL MEASUREMENTS**

16-channel system, with dosimeters placed around a <sup>192</sup>Ir radioactive at the Queen's University Hospital (Belfast, Ireland).



# **CLINICAL MEASUREMENT RESULTS**

The source is moved from a 10 cm distance on the z axis down to z = 0 cm and the corresponding counting rate as a function of distance was measured.





# **CLINICAL MEASUREMENT RESULTS**

(r = 4 cm, r = 2.5 cm, r = 1.5 cm): **One Fiber** (r = 2.5 cm): (**r = 4 cm**, **r = 2.5 cm**, **r =1.5 cm**): pile-up corrected - DCR subtracted pile-up corrected pile-up corrected - DCR subtracted **After Equalization** 13 ×10<sup>5</sup> ×10<sup>6</sup> data1 r = 4 cm12 r = 2.5 cm Fitted Curve 3.5 3.5 r = 1.5 cm 11 Measured dose [Hz] Measured dose [Hz] Measured dose [Hz]  $f(x) = a / x^b + c$  $b = 1.935 \pm 0.06$ Trend  $\propto 1/r^2$ Last 3 points excluded γ Att. Coeff. at 300 keV in water  $\sim 6 \text{ cm}$ 5 0.5 0.5 3 0 0 2 10 12 2 10 12 2 0 0 Distance source - dosimenter [cm] Distance source - dosimenter [cm] Distance source - dosimenter [cm]

**Tree Fibres:** 

The sensors are capable of monitoring the radiation dose at

distances compatible with brachytherapy.



Data has to be compared with TPS.



12

r = 4 cm

r = 2.5 cm

r = 1.5 cm

10

Tree Fibres:

# SOURCE LOCALIZATION

- Source localization has been implemented using triangulation algorithm. Initial results looks promising.
- A quantitative assessment was not completed yet.



# OUTLOOK

- The laboratory characterization shows that the uncertainties of the system are less than 1%.
- The clinical HDR characterization of the ORIGIN dosimeter shows the expected trends. The data has to be compared with TPS.
- 3D-printed semi-anatomical phantom prototypes were developed to provide be used in the evaluation of the dosimetry system.
- will be integration of the ORIGIN dosimeter prototype in a clinical systems started.







RIGIN

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