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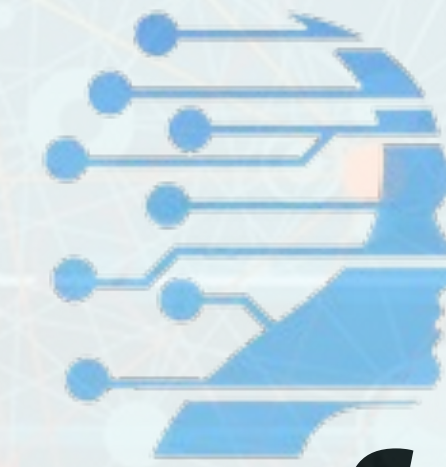
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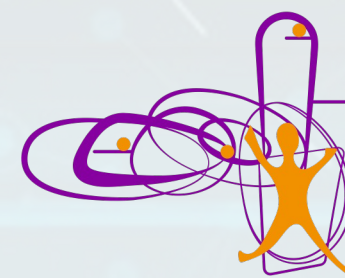
REGAS

Computing@CSN5: applications
and innovations at INFN

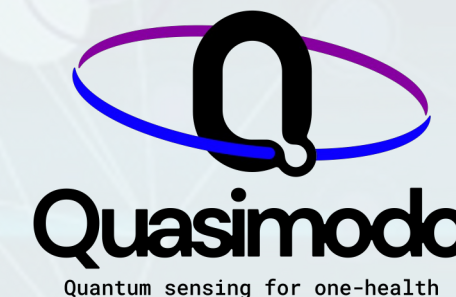


Imaging algorithms for in-vivo BNCT dosimetry

[D. Ramos Lopez](#), N. Ferrara, A. Didonna, G. Pugliese, G. Iaselli



DIPARTIMENTO
INTERATENEIO
DI FISICA



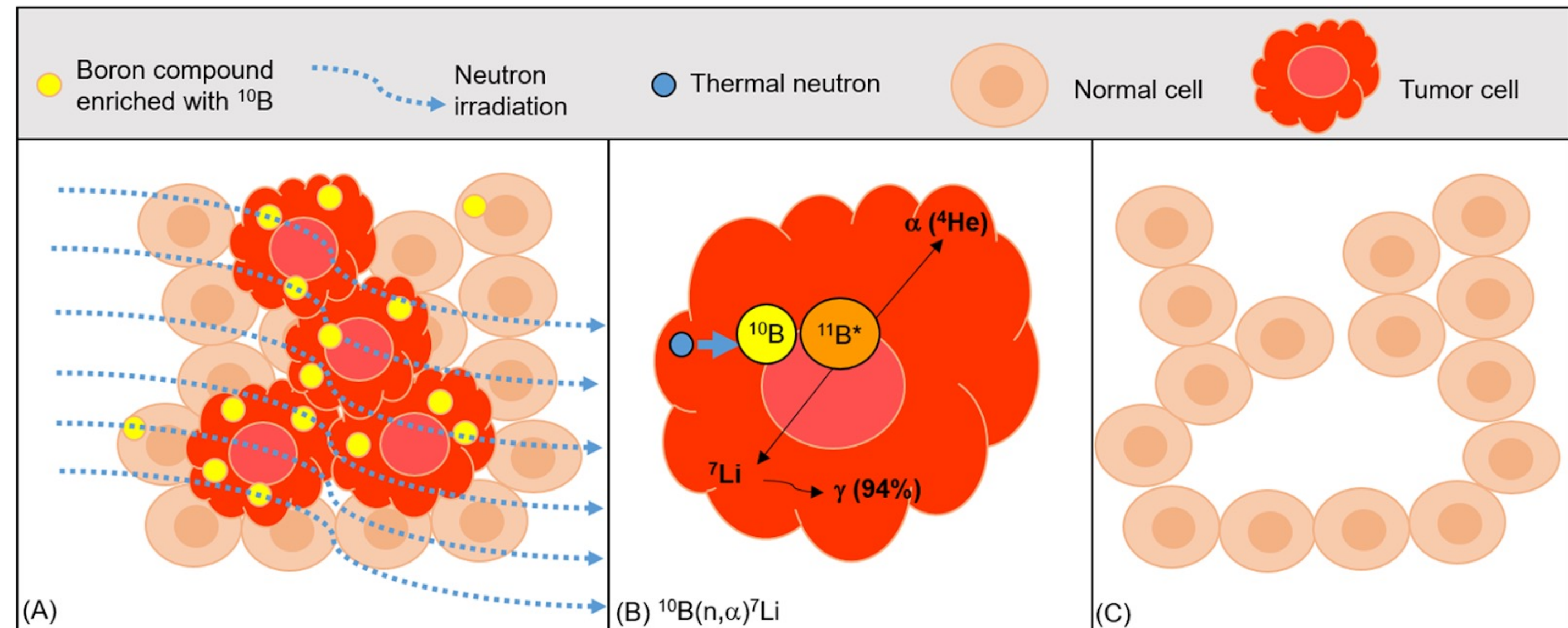
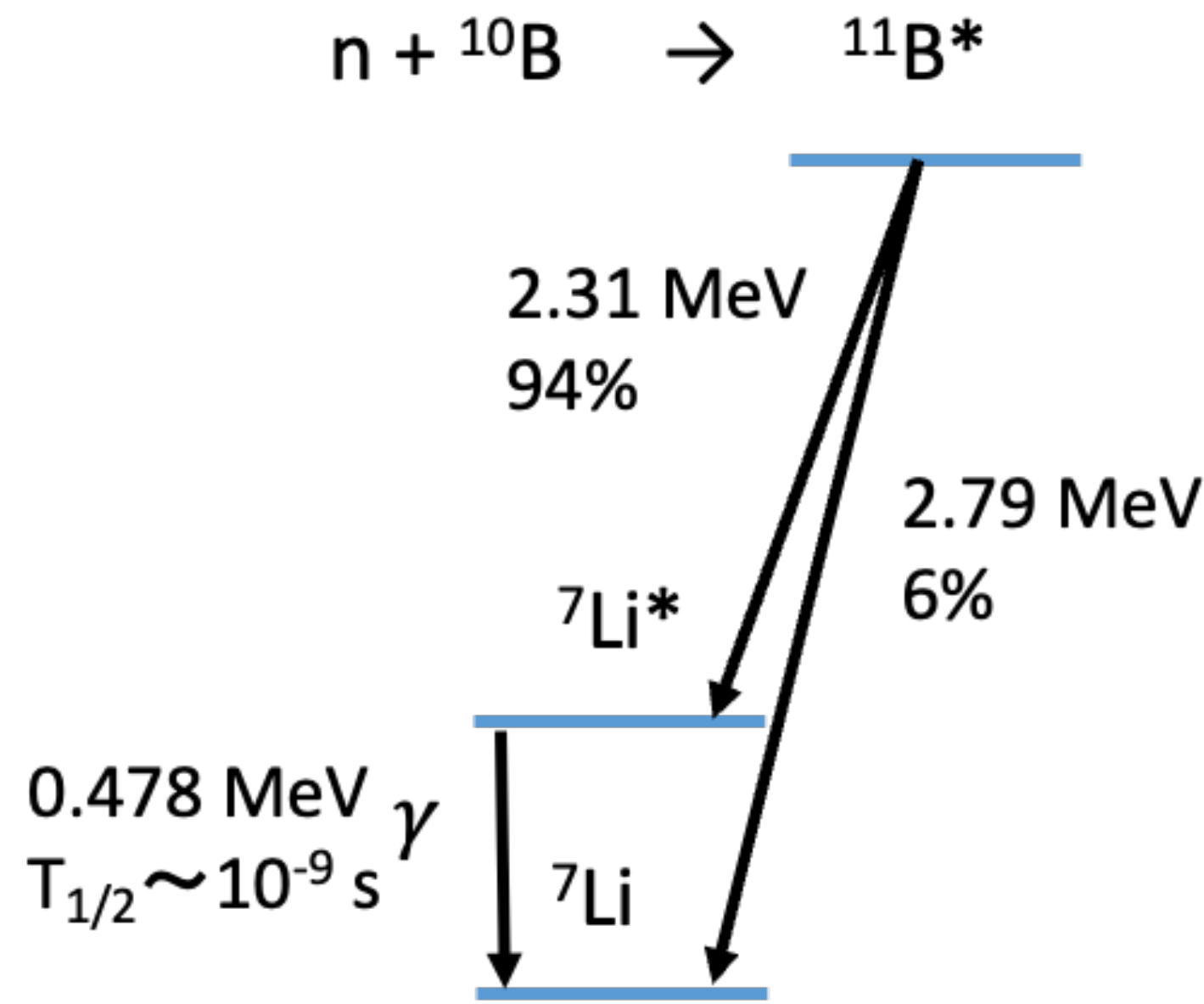
Outline



- State of art of BNCT
- **Part1:** Dose monitoring by Single Photon Emission Computational Tomography (SPECT)
 - SPECT project
 - Simulation and reconstruction algorithm development
- **Part2:** Dose monitoring by Compton imaging
 - Compton imaging principles
 - Simulations and classical tomography with iteratives algorithms
 - Novel approach by Deep Learning (DL) models
- Summary and future

Boron neutron capture therapy

Boron Neutron Capture Therapy (BNCT) is an innovative hadrontherapy with high selectivity over cancer tissue based on the neutron capture reaction $^{10}\text{B}(n, \alpha)^7\text{Li}$



	Energy (MeV)	Range (μm)
α	1.47-178	9-11
^7Li	0.84-101	4-5
γ	0.48	

- Dose distribution: $dD(x,y,z) \approx n^{10}\text{B}(x,y,z) \Phi(x,y,z) dV$
- Reaction products range $<$ cell dimensions ($\approx 10 \mu\text{m}$) \rightarrow **high selectivity**
- Tumor-to-healthy boron concentration ratio (T/N) $> 3^*$.
- Treatment duration $\approx 30-90$ min

*Skwierawska, D. et. al. Clinical Viability of Boron Neutron Capture Therapy for Personalized Radiation Treatment. Cancers 2022, 14, 2865.

Dosimetry on BNCT



- Main nuclear interactions that contribute to the BNCT total dose delivery:

$D_{\text{total}} =$

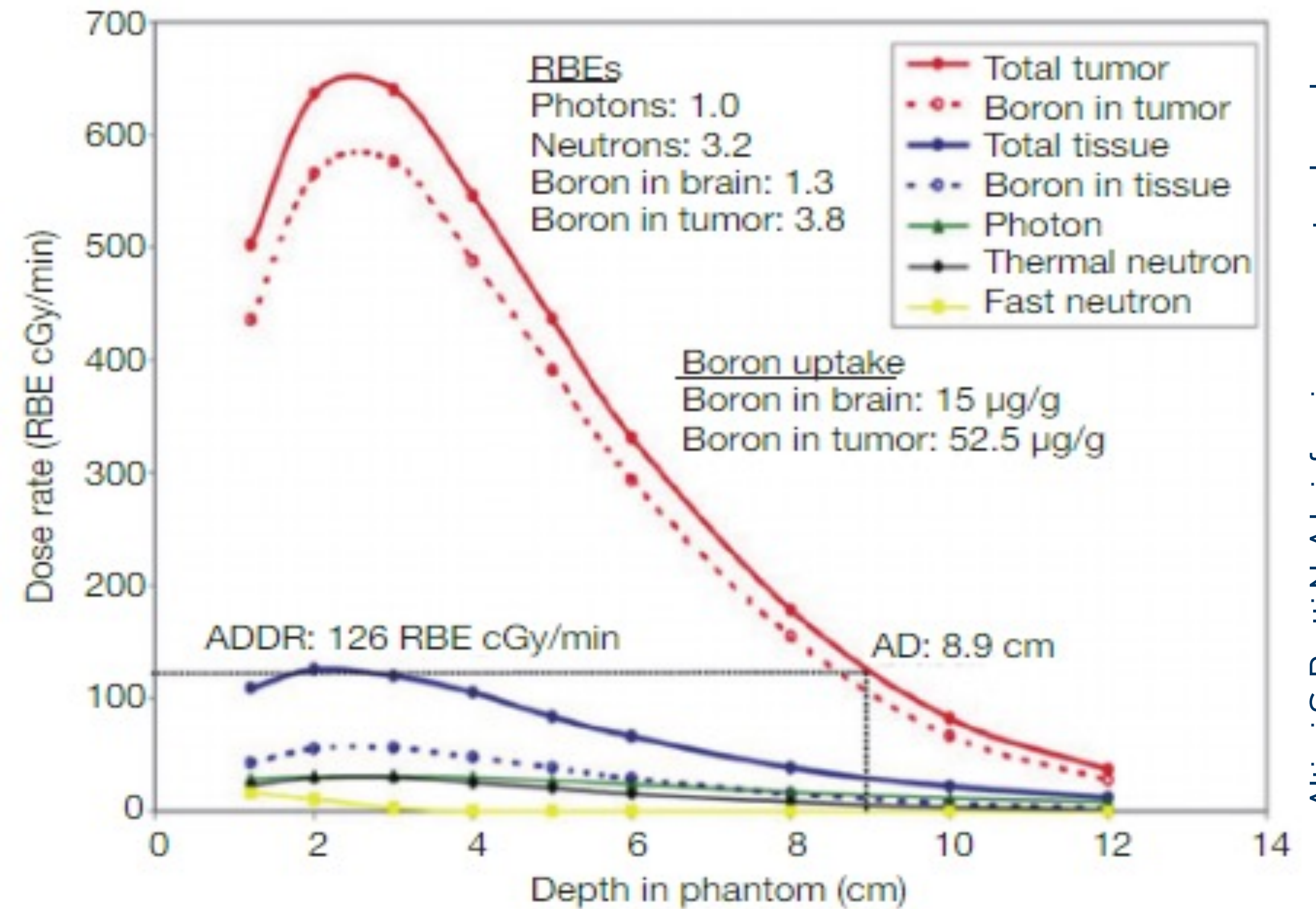
D_B Therapeutic dose from $^{10}\text{B}(n,\alpha)^7\text{Li}$ ($\sigma=3837 \text{ b}$)

+ D_p From $^{14}\text{N}(n,p)^{14}\text{C}$ reactions ($E_p=630 \text{ keV}$, $\sigma=1.9 \text{ b}$) due to thermal neutron

+ D_n Due to epithermal and fast neutron elastic scattering daily with H nuclei

+ D_γ From $^1\text{H}(n,\gamma)^2\text{H}$ ($E=2.2 \text{ MeV}$, $\sigma=0.33 \text{ b}$) & reactor background

→ Therapeutic boron dose as main dose contributor.



Altieri S, Protti N. A brief review on reactor-based neutron sources for boron neutron capture therapy. Ther Radiol Oncol 2018;2:47.

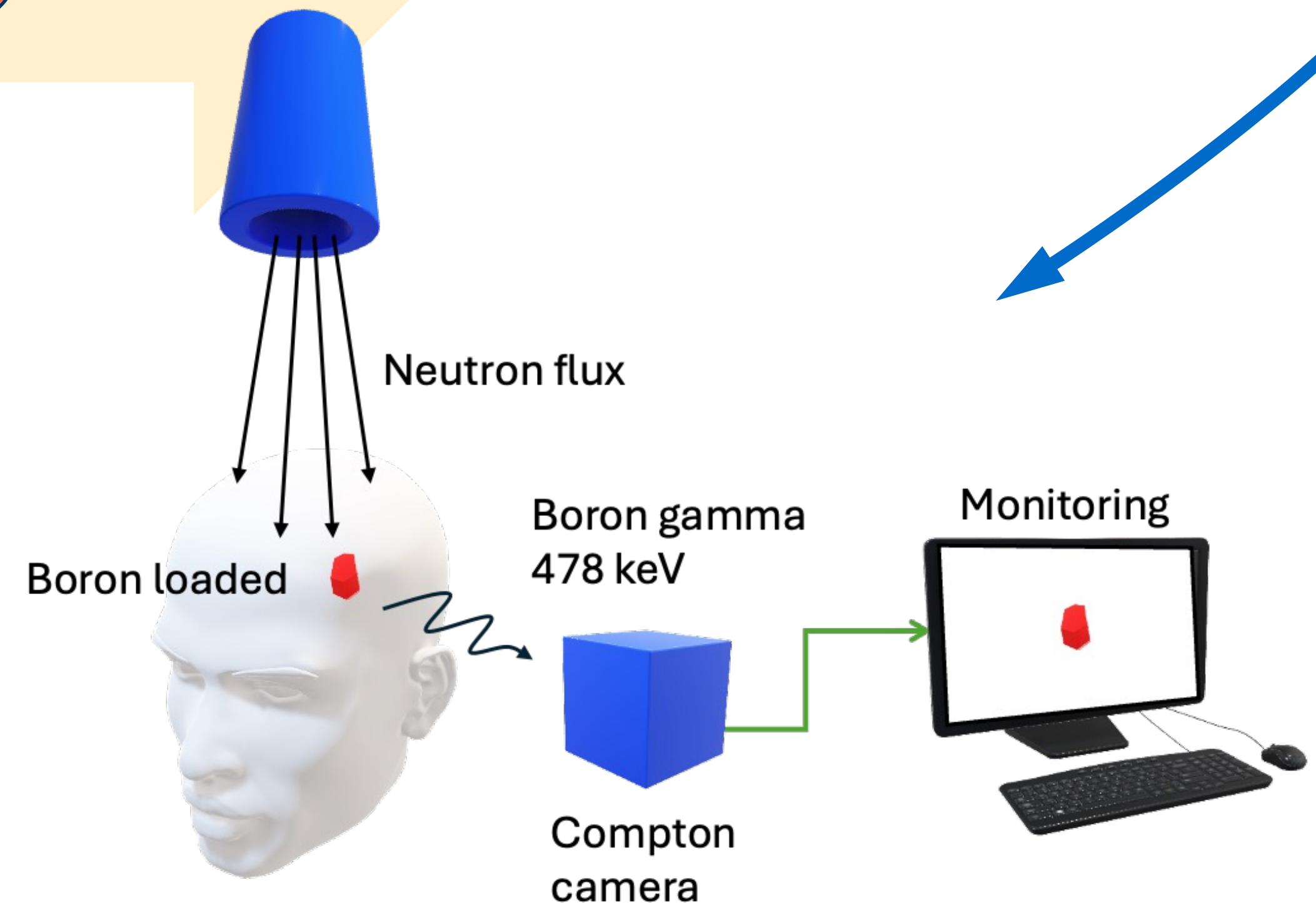
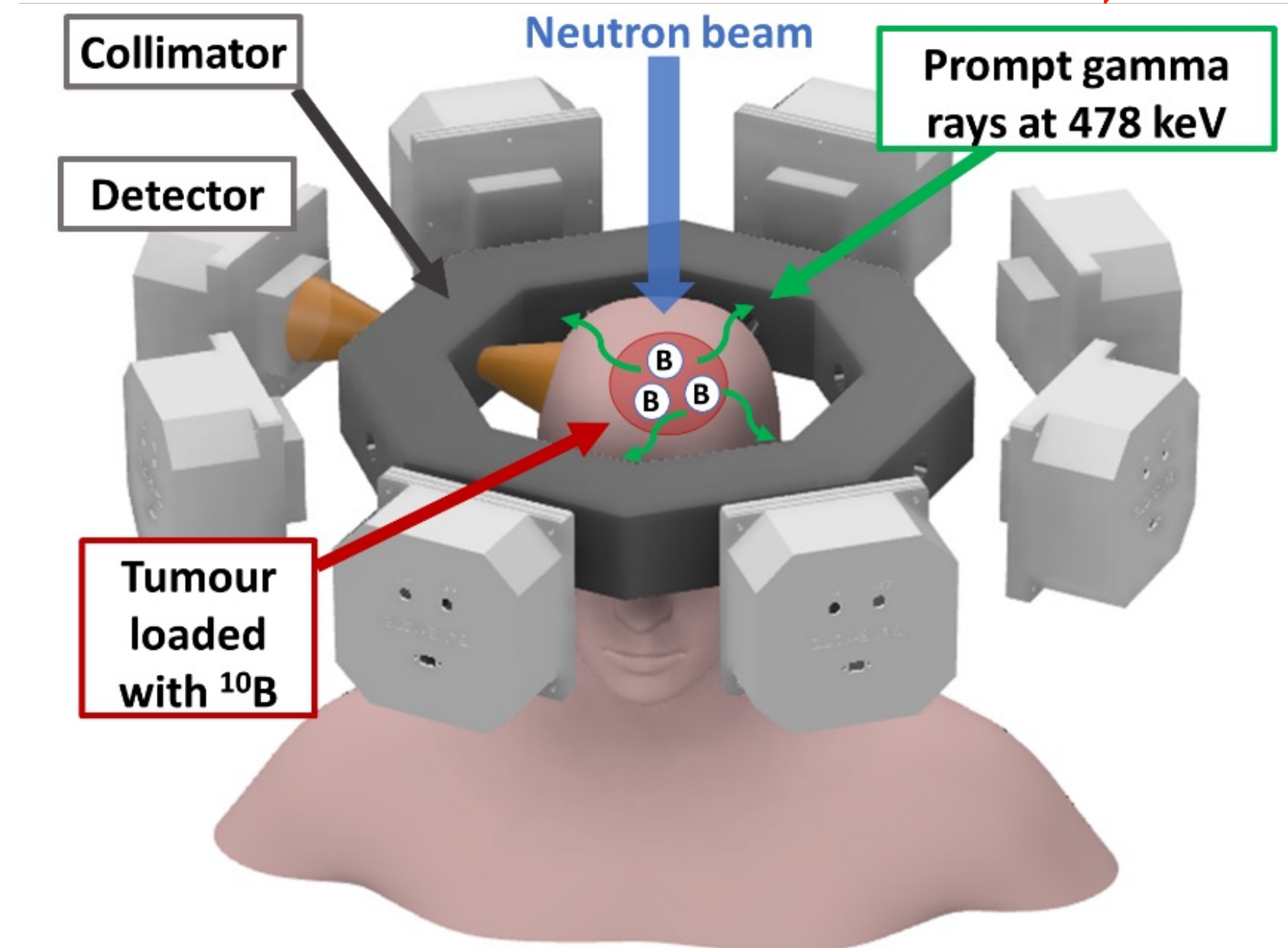
Dosimetry on BNCT

Nowadays dose estimation in BNCT:

- by blood test before, meanwhile and after irradiation, and
- Monte Carlo simulations to estimate all dose delivery contributes and neutron capture rates

Proposal:

Development of an **on-line boron dose estimation algorithm** by using **Compton imaging** and/or **Single Photon Emission Computational Tomography (SPECT)**





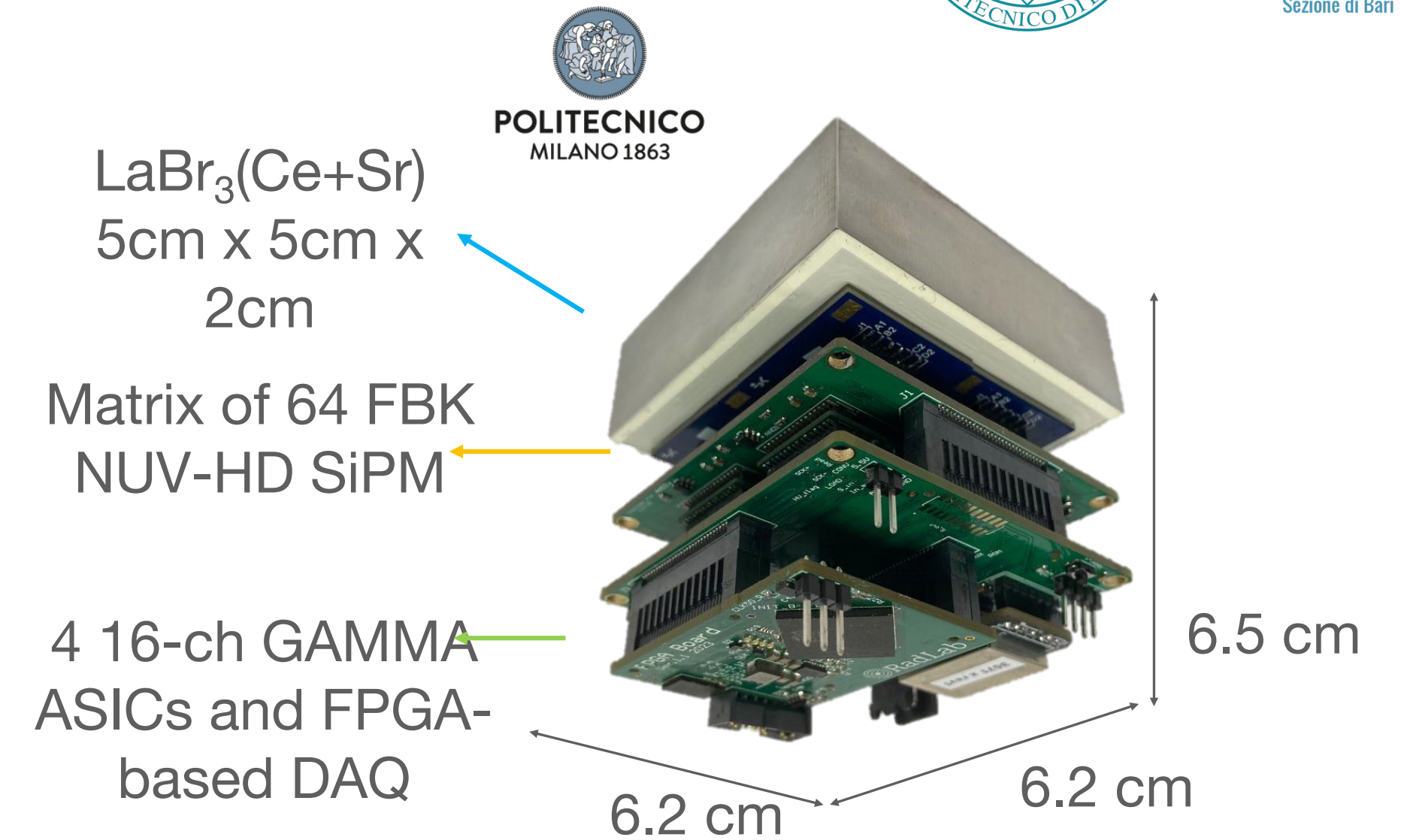
Dose monitoring by SPECT

SPECT system



System based on BeNEdiCTE (Boron Neutron CapTurE) detector: Gamma ray detection module based on a **LaBr₃(Ce+Sr) scintillator crystal** readout by **Silicon Photomultipliers** and compact electronics with **ASICs and FPGA**.

- Founded by **INFN CSN5**
- “**SPOC: SPect for Online boron dose verification in bnCt**” and **PRIN-2024 PNRR***
- Bari unit → Development of BNCT-SPECT dedicated tomography reconstruction



Geant4
simulation

Implementation
of classic
tomography
methods (OSEM)

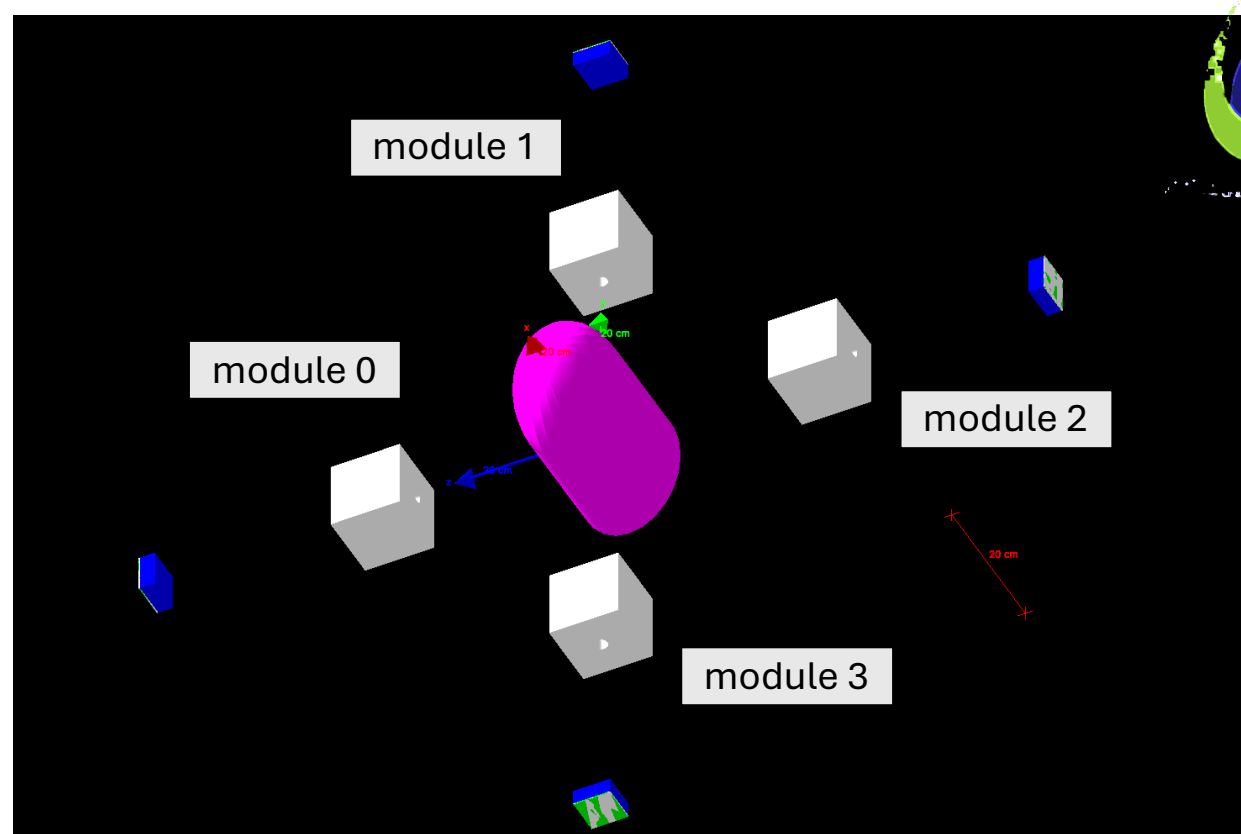
Model validation
with simulated
and experimental
data

Tomography
improvement by
Deep Learning
tools

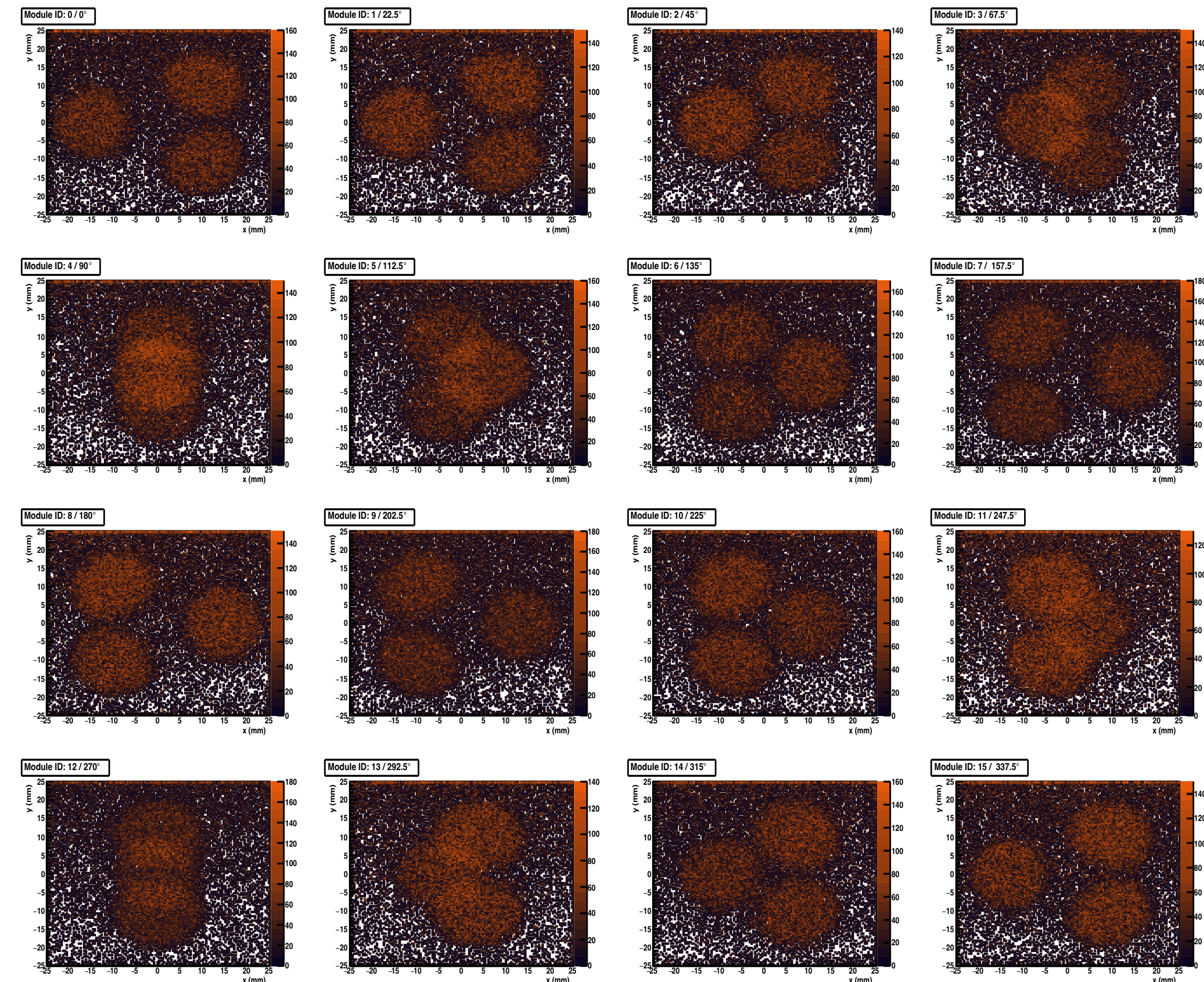
Monte Carlo simulations



- Monte Carlo simulation performed in ideal conditions (no background from facility) for first data availability
- Pure irradiated boron gamma source
- Layout based on experimental setup at Nagoya




Polimi pinhole collimator: Pb
 Scintillator crystal: LaBr_3 ($5 \times 5 \times 2 \text{ cm}^3$)
 SiPM: 8×8 array ($5 \times 5 \times 0.2 \text{ cm}^3$)
 Human head: G4_TISSUE_SOFT_ICRP
 1 modules \rightarrow 4 modules \rightarrow 16 modules



Detector projections: 3 spheres 2.5 mm radius, centered 15 mm apart from the center in the same plane

Tomography reconstruction



Based on PyTomography libraries with the  iterative method: **Ordered Subset Expectation Maximum(OSEM)** on GPU-accelerated

$$\lambda(\text{new})_j = \frac{\lambda(\text{old})_j}{\sum_{D_n} \sum_{D_m} \sum_{i \in S_L} C_{ij(nm)}} \times \sum_{D_n} \sum_{D_m} \sum_{i \in S_L} C_{ij(nm)} \left(\frac{Y_{i(nm)}}{\sum_K C_{ik(nm)} \lambda(\text{old})_k} \right),$$

where λ = image variable, C_{ij} = system matrix, Y_i = Count number of photon, D_n = GPU domain length (horizontal thread number), and D_m = GPU domain length (vertical thread number).

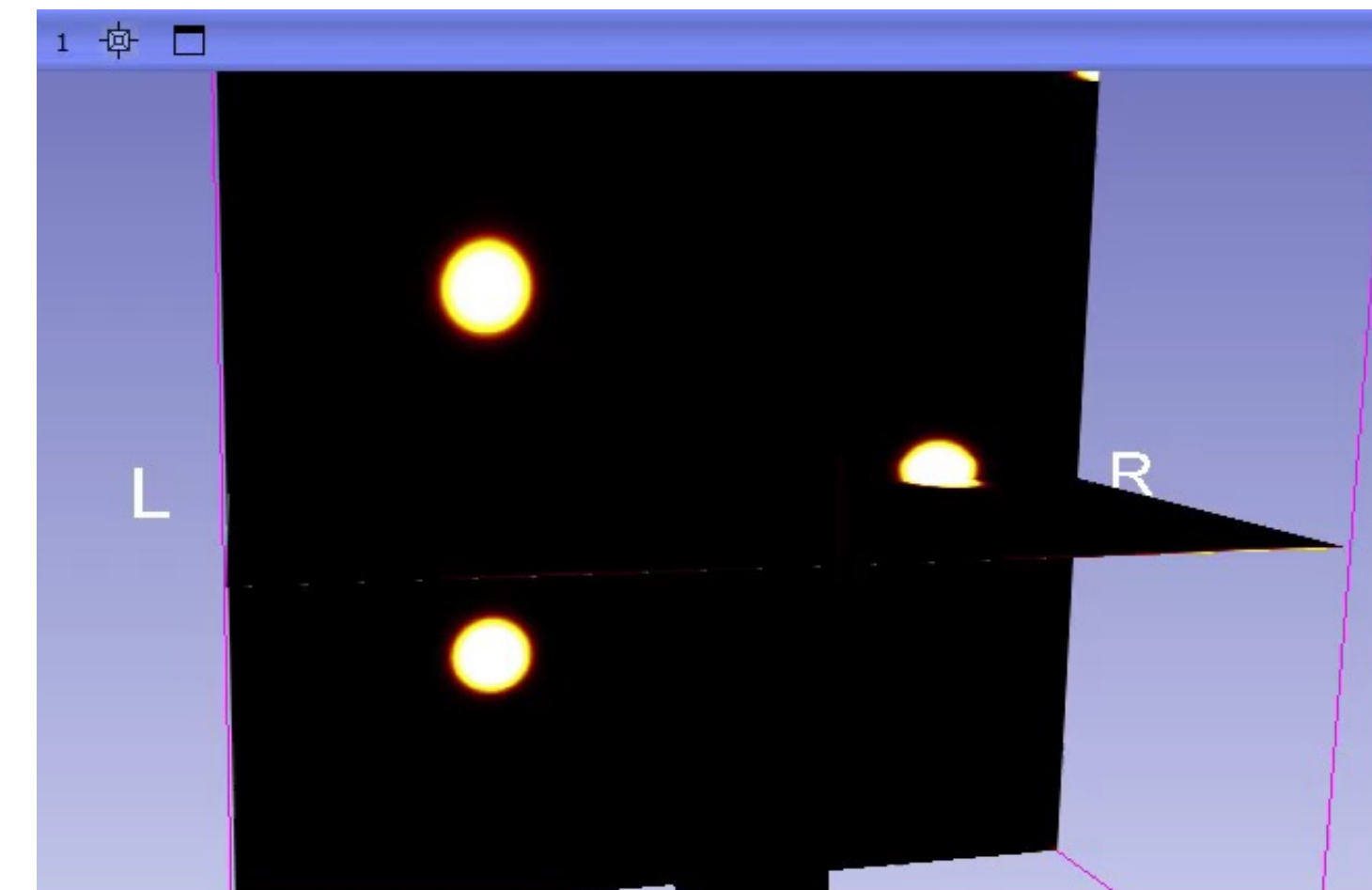
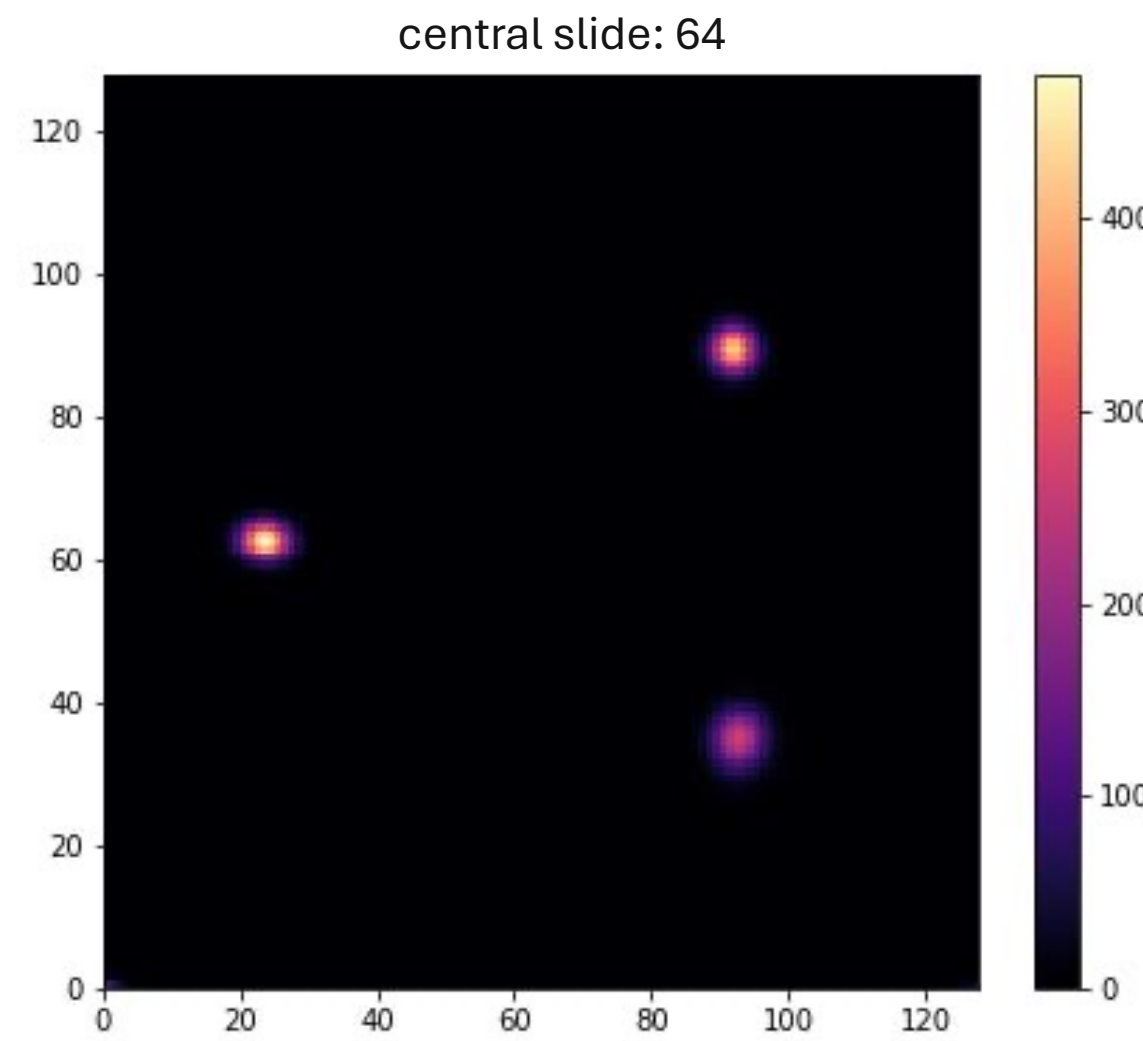
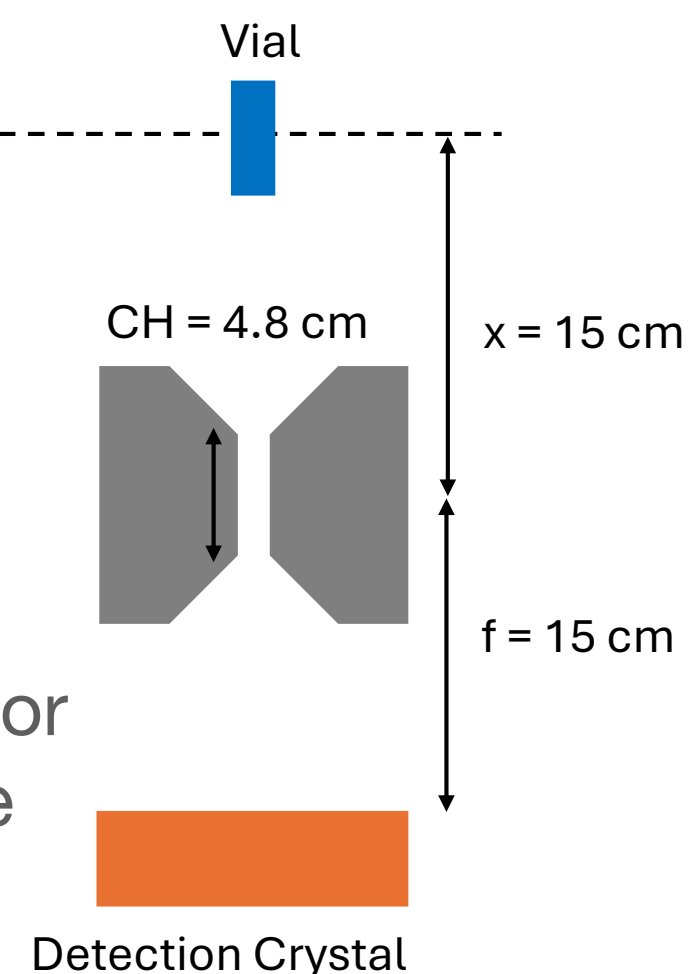
Preliminary tomography

- iterations: 50, subsets: 3
- Pixel side: 0.39 mm
- Spheres reconstructed with ~ 2.5 mm radius in agreement with simulated configuration

Collimator resolution function

$$R_{coll} = \left(\frac{x}{f}\right) \sqrt{R_d^2 + \left(\frac{f+x}{x + \frac{CH}{2}}\right)^2 * d_e^2}$$

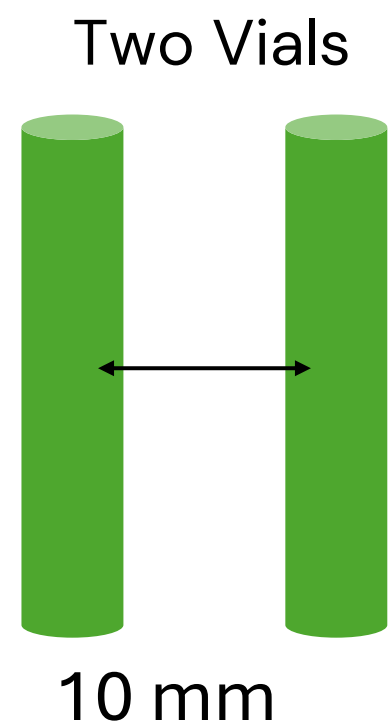
$R_d = 3.0$ mm, intrinsic resolution
 $f = 15$ cm, distance collimator-detector
 $x = 15$ cm, distance collimator-source
 $d_e = 5$ mm, pinhole diameter
 $CH = 48.04$ mm, channel length



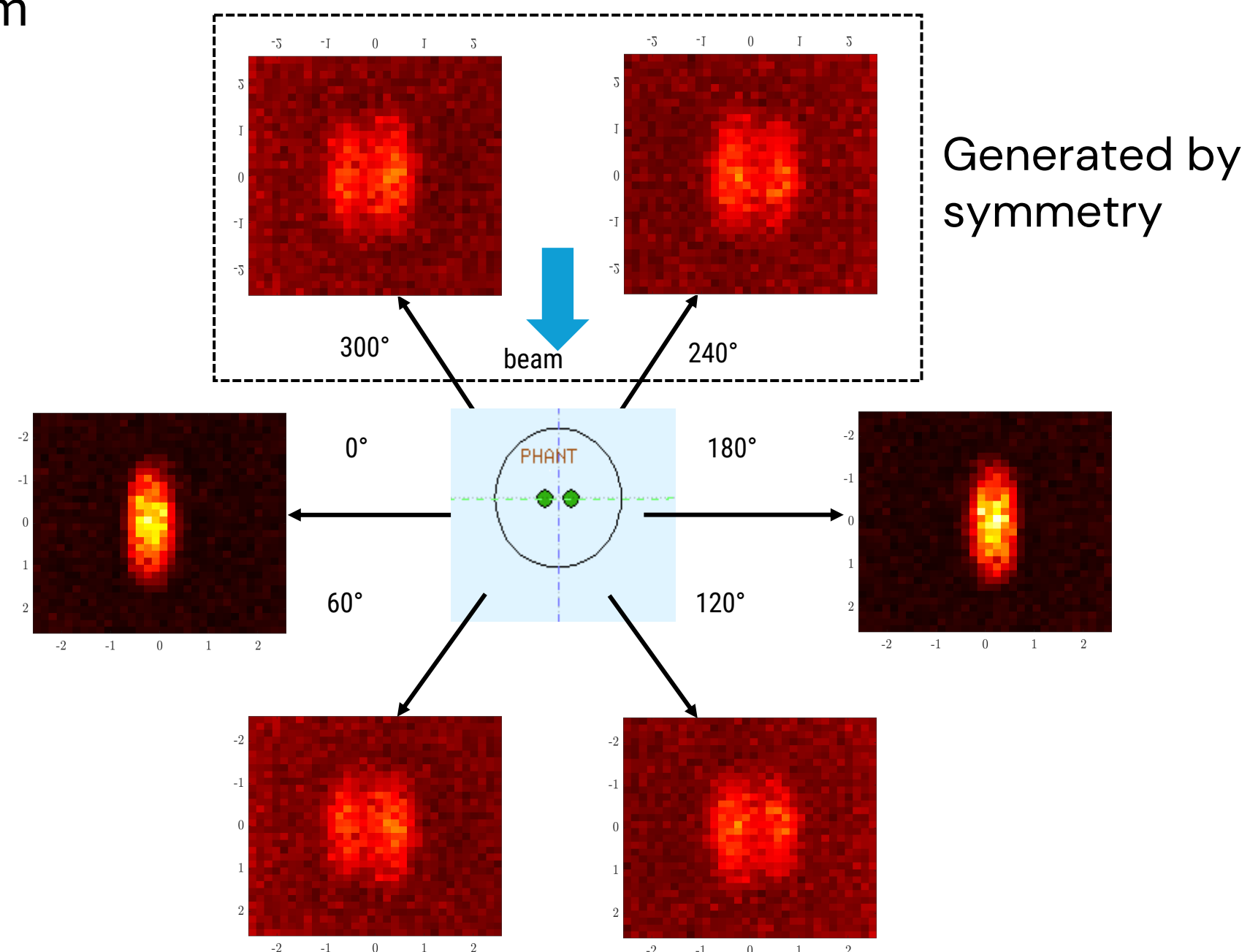
Tomography reconstruction

Algo. validation with Vials Tomography reconstruction

Simulated Polimi dataset describing a more realistic treatment conditions adapted to LENA set-up

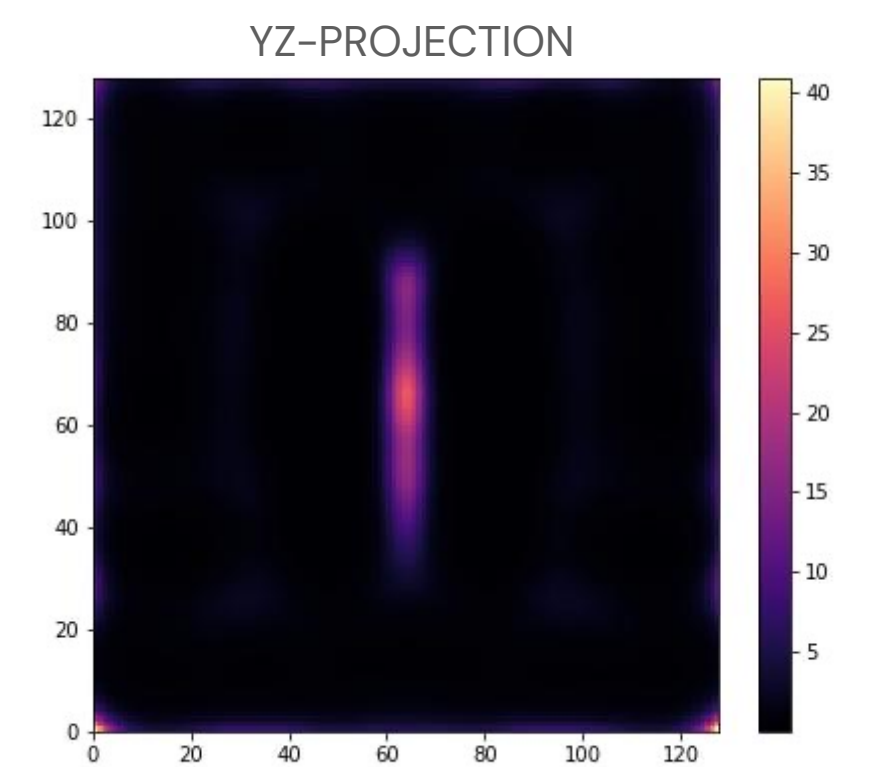
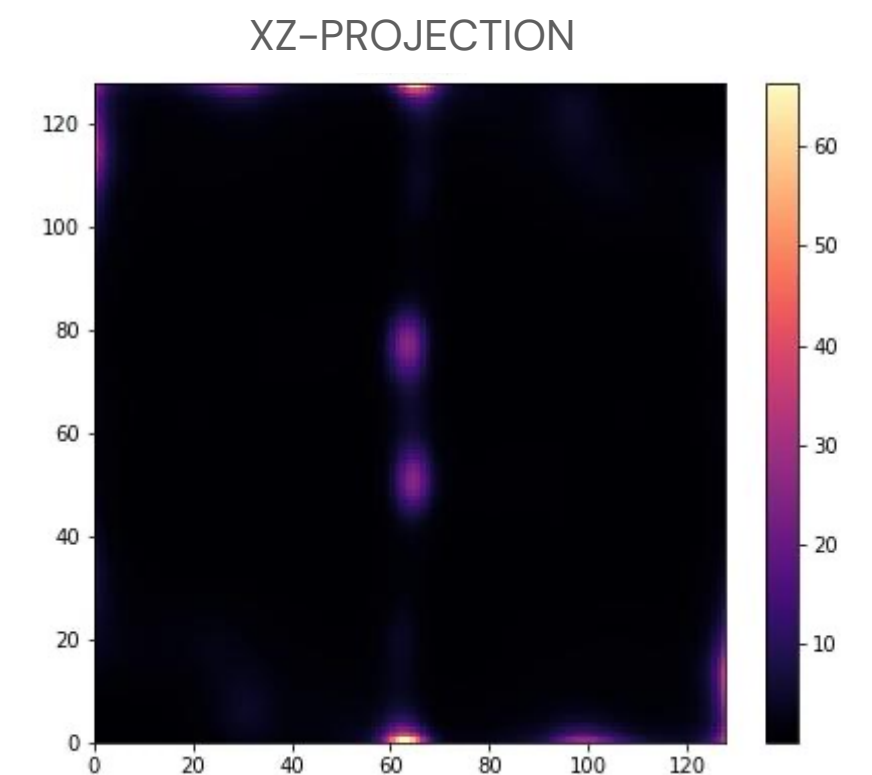
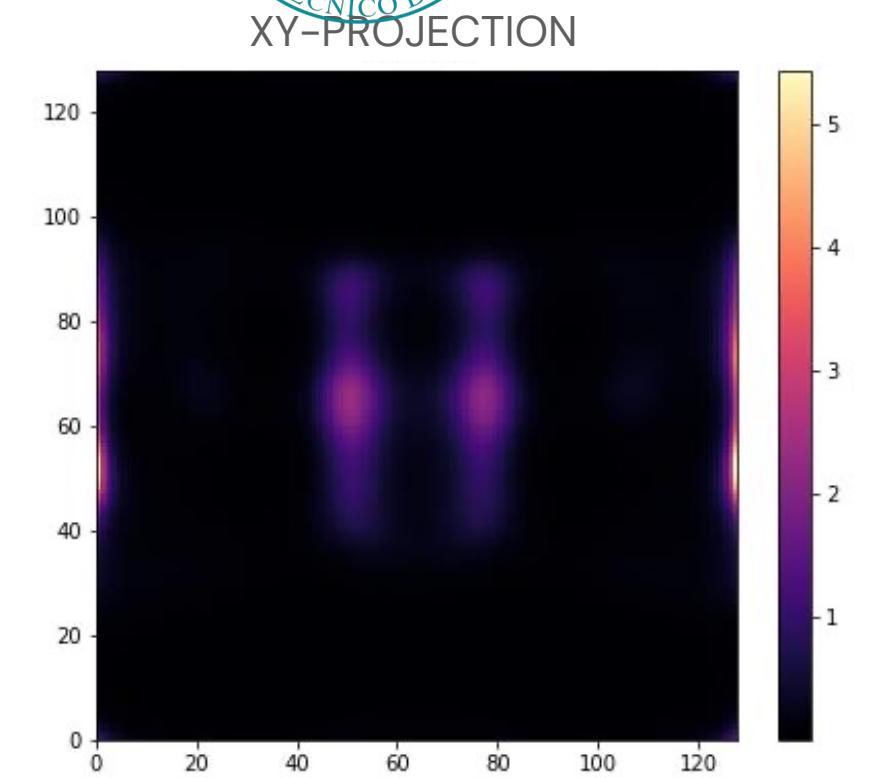
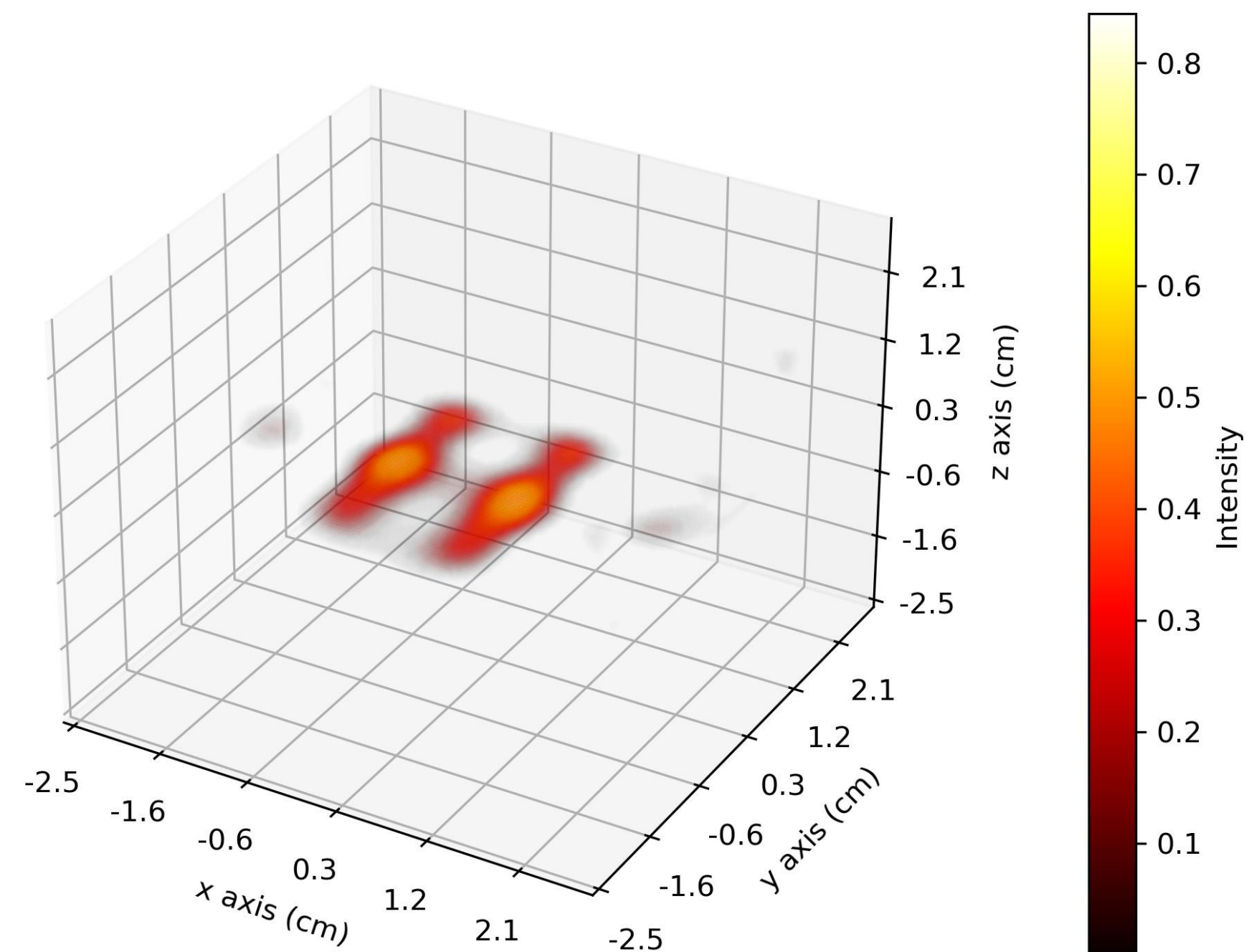


- 6 projections (Polimi dataset "ideal")
- Difference angle: 60°
- Last resolution function
- Energy range 465–490 keV
- Ideal projections



Reconstruction

- iterations: 100, subsets: 3 by OSEM **pytomography**
- Pixel side: 0.32 mm
- Vials reconstructed with ~ 10 mm distance





Dose monitoring by Compton imaging

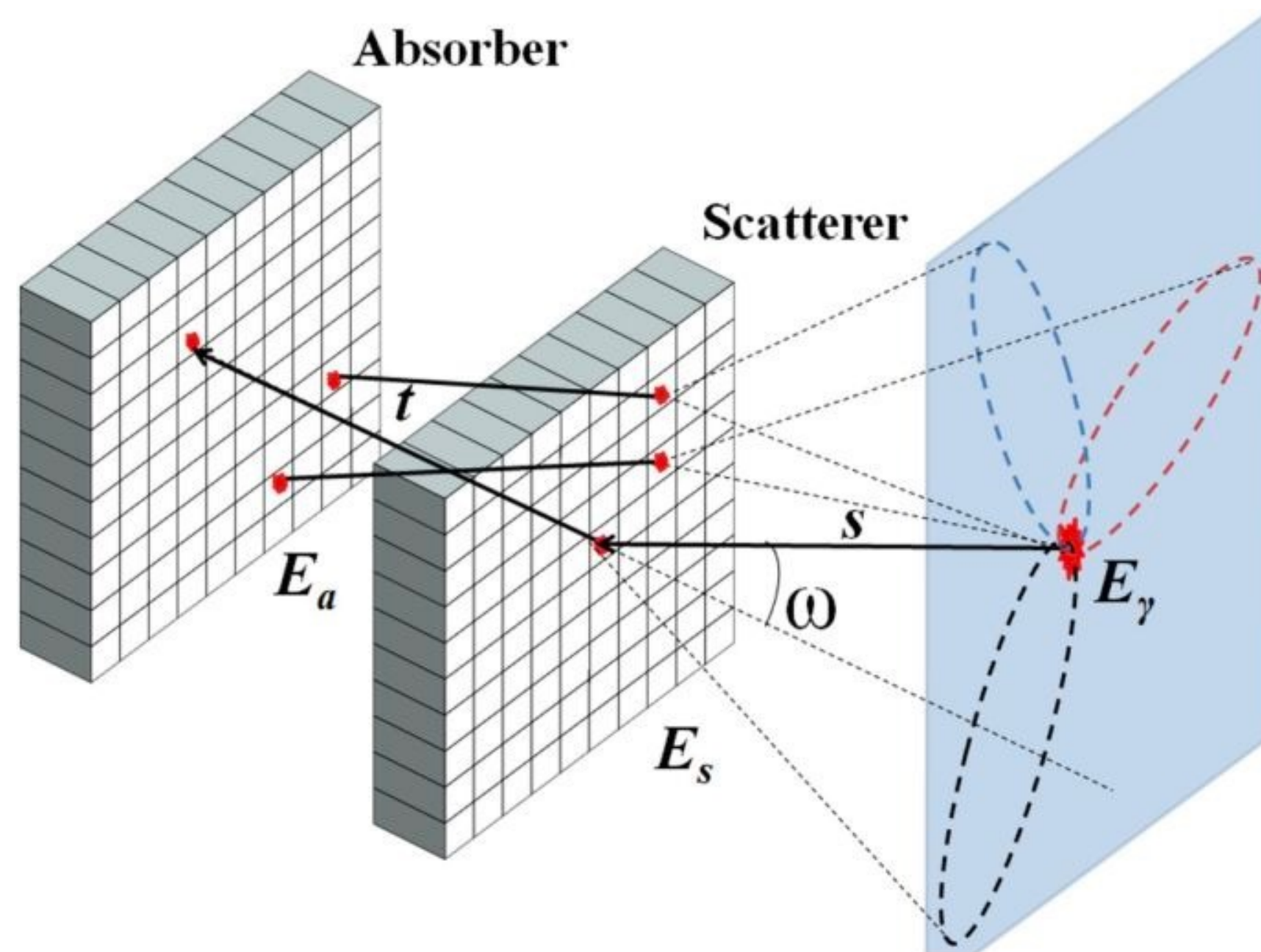
Compton imaging principles

- **Principle**

$$\cos(\theta) = 1 - m_e c^2 \left(\frac{1}{E_a} - \frac{1}{E_\gamma} \right)$$

where $E_\gamma = E_s + E_a$

→ Compton event: the position of the source is confined in the Compton cone and found by overlapping them

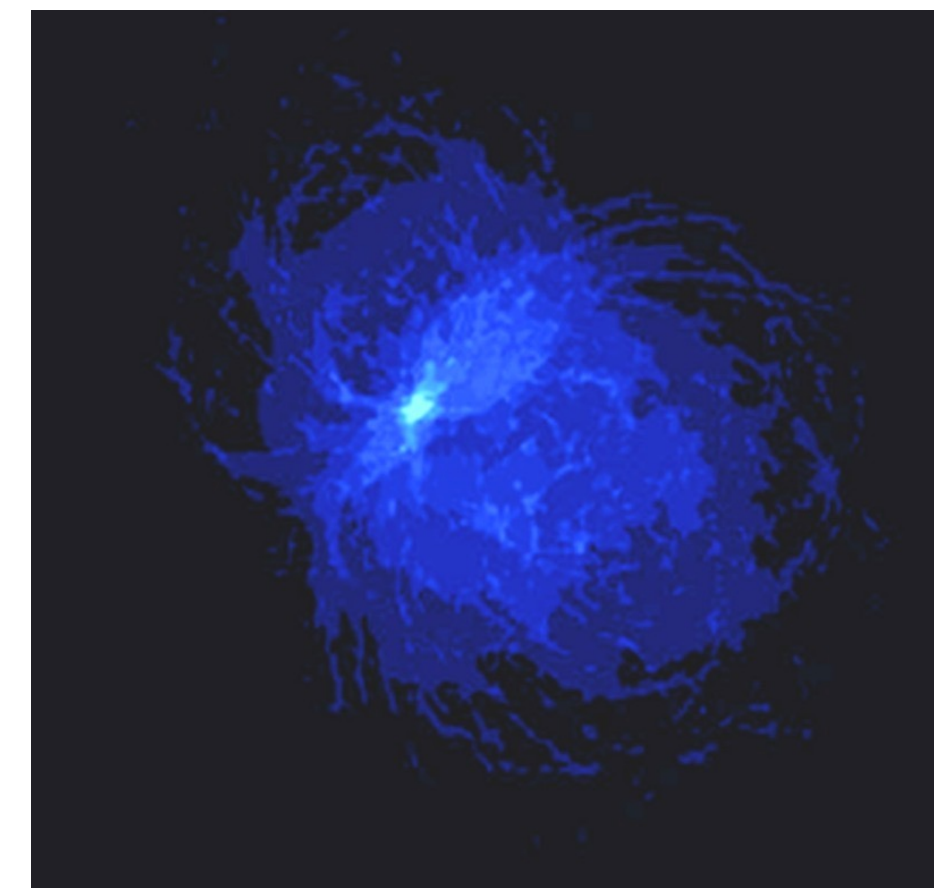


- **Single stage Compton imaging or “True events”**

good events don't include multiscattering Compton

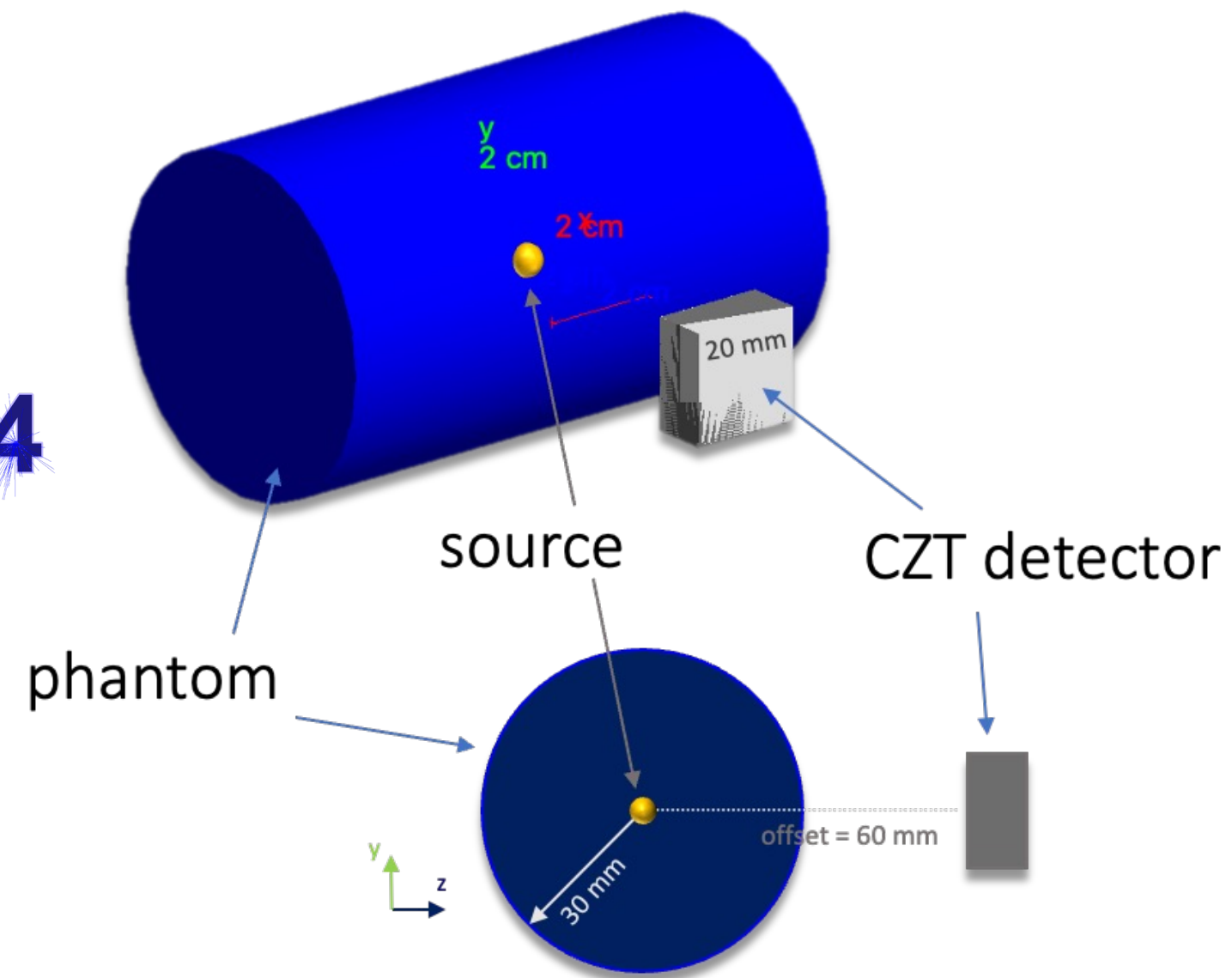
- **Main advantages: 1) Reconstruction noise-resolution 2) Detection sensitivity gain of the order of 30 – 600 with respect to mechanically collimated systems**

- **Complex reconstruction by classical algorithms, high computational cost**

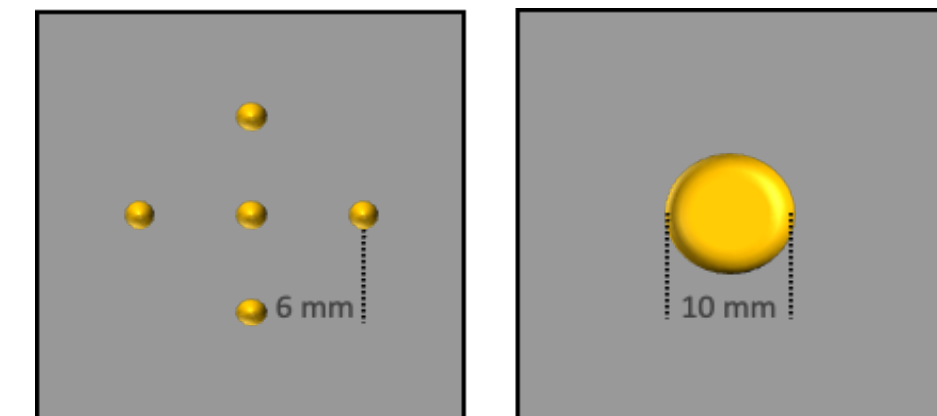


Backward projection example

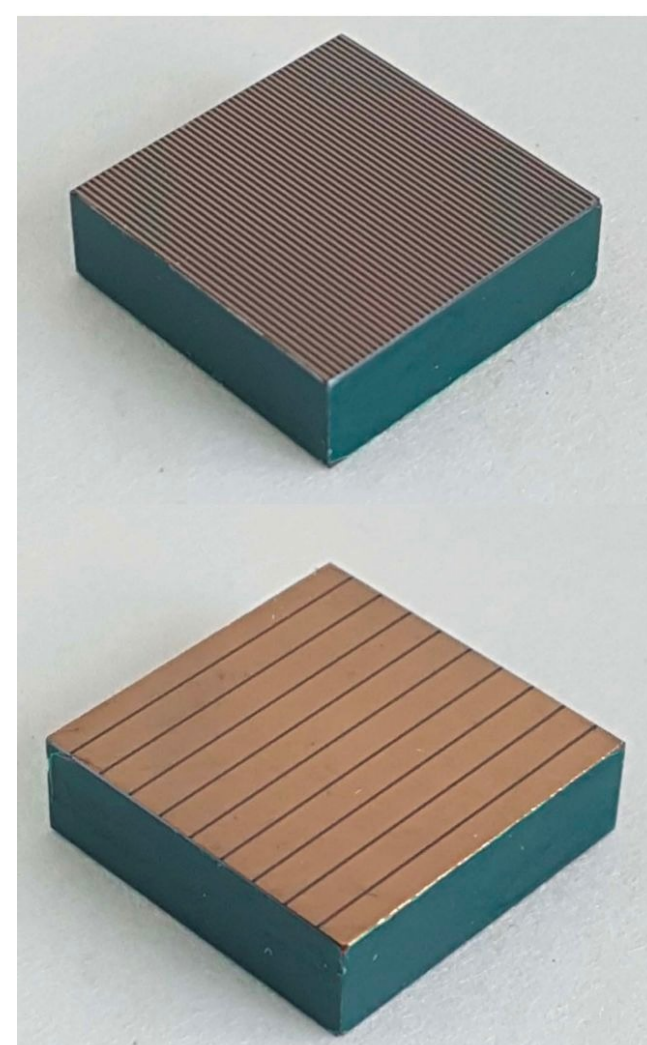
Preliminary simulation set-up



- Detector: CZT crystal stack (5 mm thickness each), 60 mm from the source
- Phantom material: Air, soft tissue
- Simulated sources: 5-points like and spheric 478 keV gamma distributions

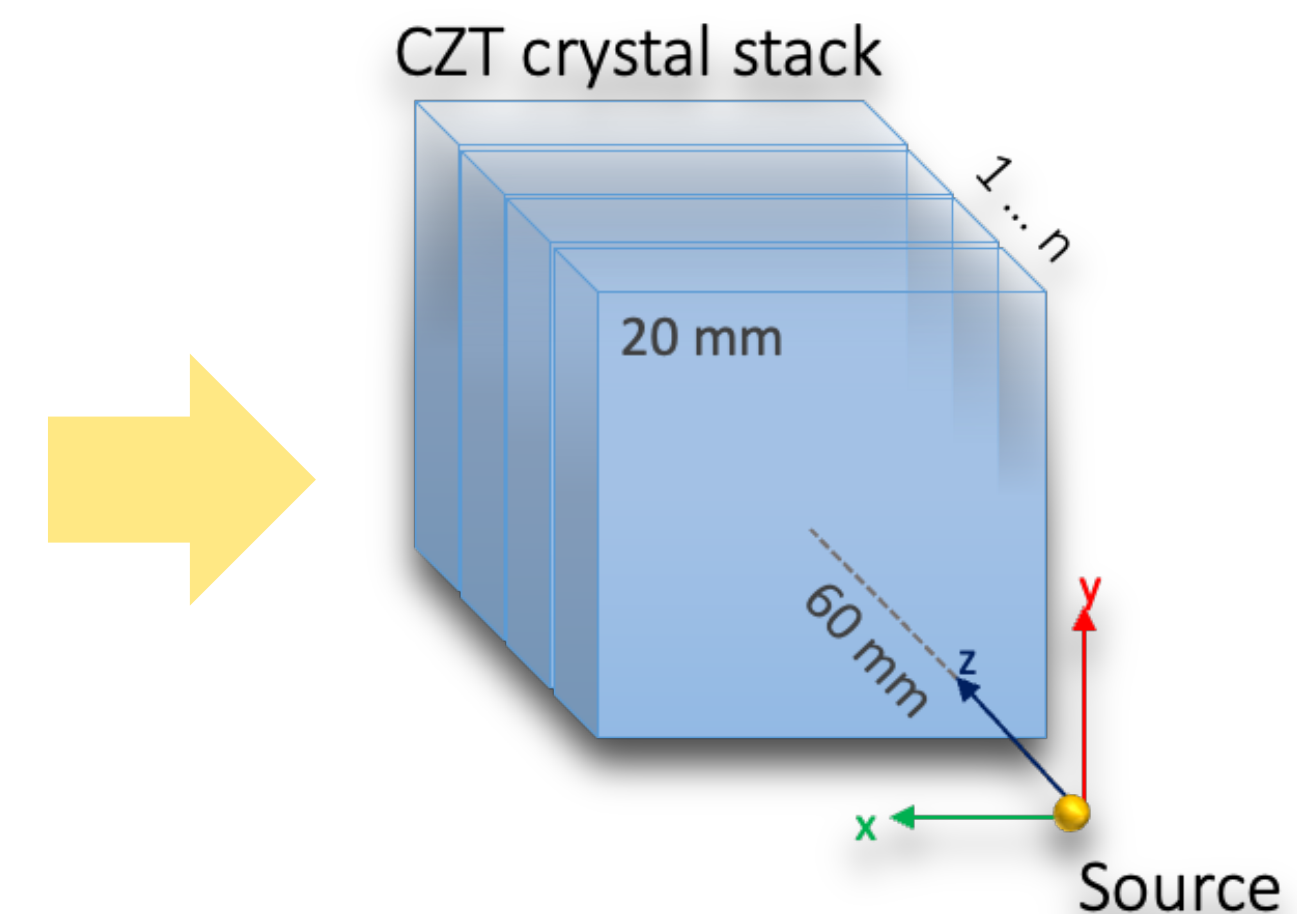
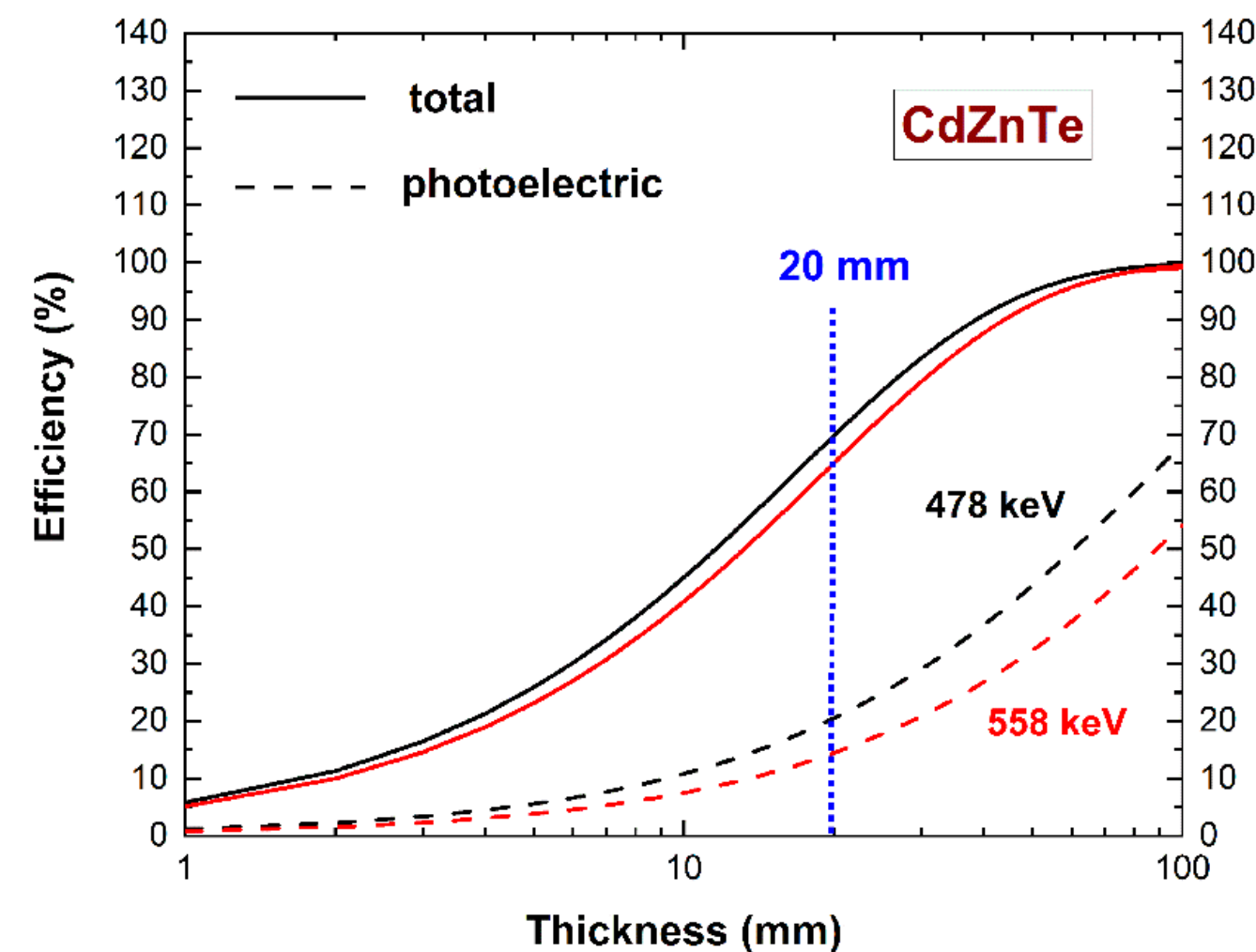


- Tomography FOV: cube 120 mm side centered with source and covering the entire phantom.



Detector simulated inspired in **CZT sensor by Due2Lab**

- Room-temperature gamma-ray spectroscopic
- Sub-millimetre spatial resolution and excellent energy resolution (around 1% FWHM at 661.7 keV)

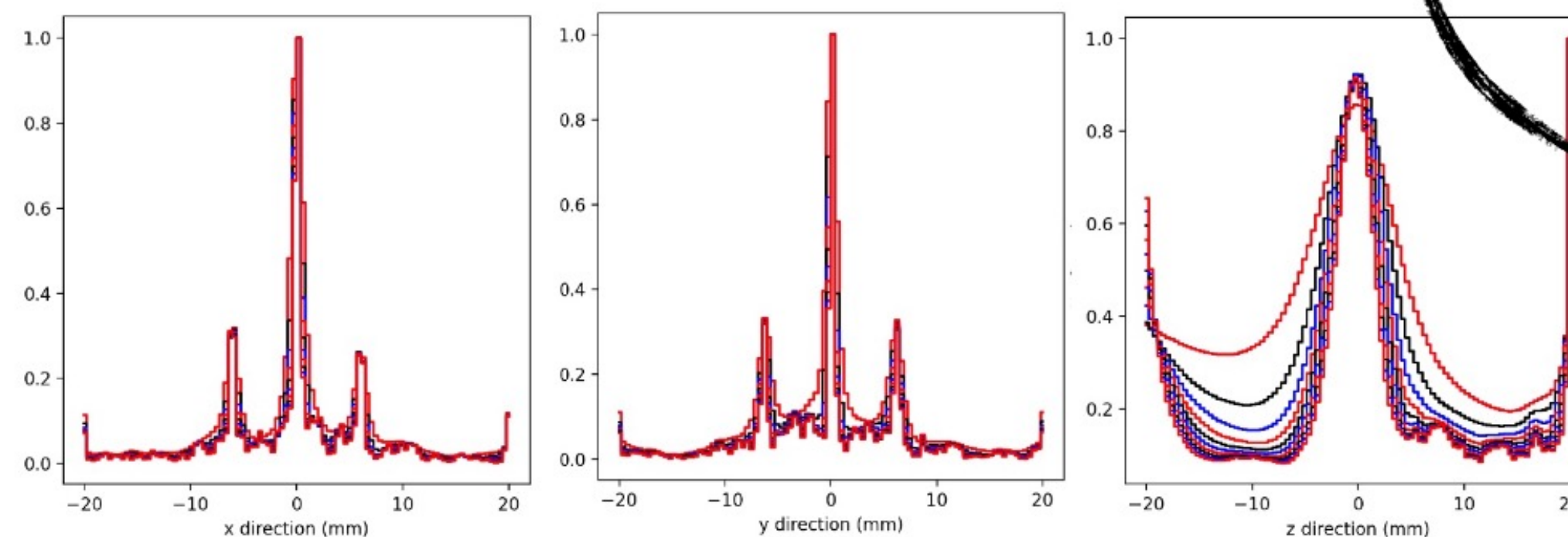
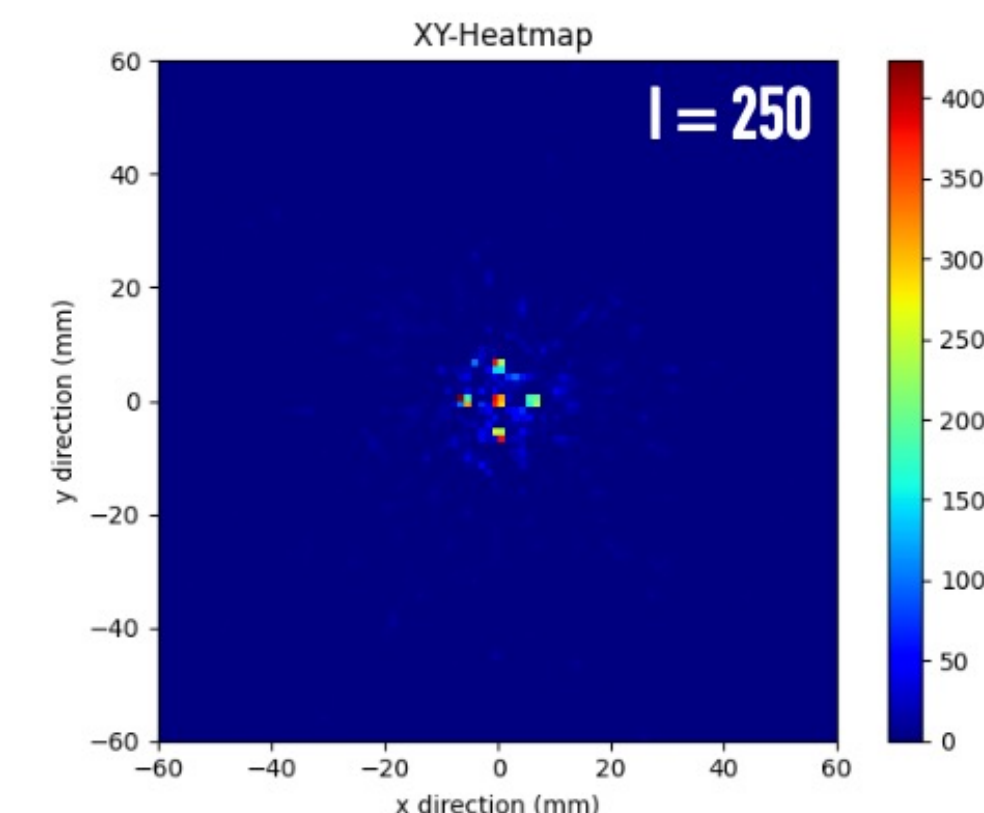
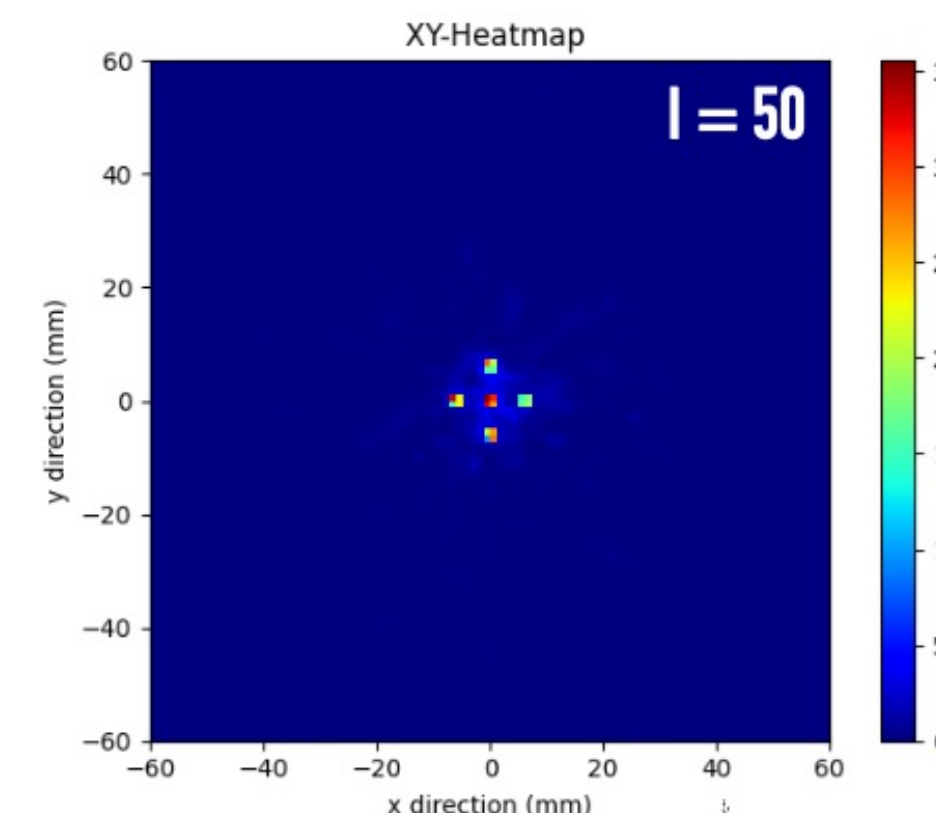
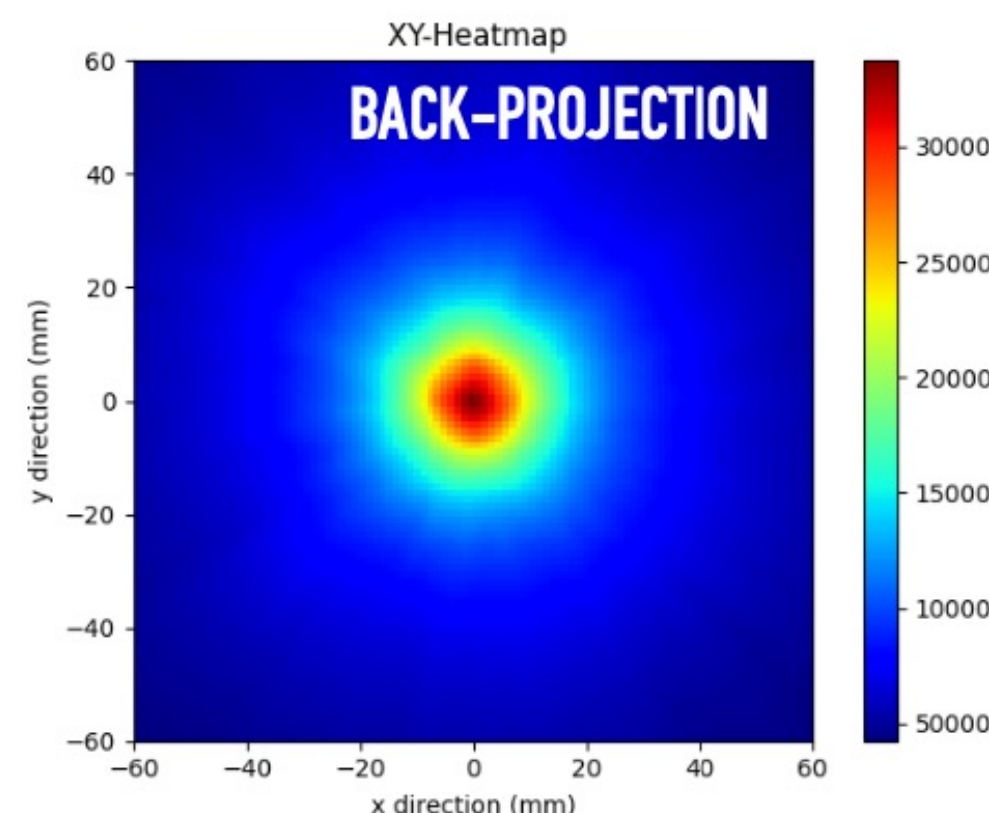


MLEM reconstruction method validation

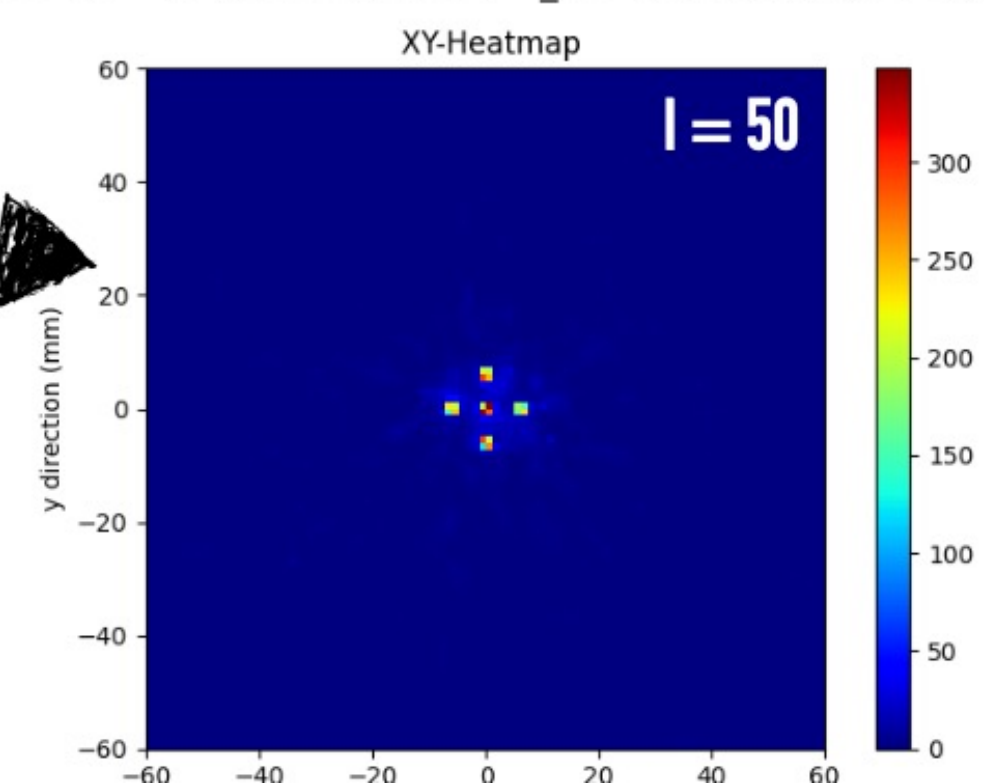


On Air phantom

Maximum Likelihood Expectation Maximisation (MLEM) → Iterative method to reconstruct the most probable source distribution



On Tissue phantom



$$\lambda_j^n = \frac{\lambda_j^{n-1}}{s_j} \sum_{i=1}^N \frac{t_{ij}}{\sum_k t_{ik} \lambda_k^{n-1}}$$

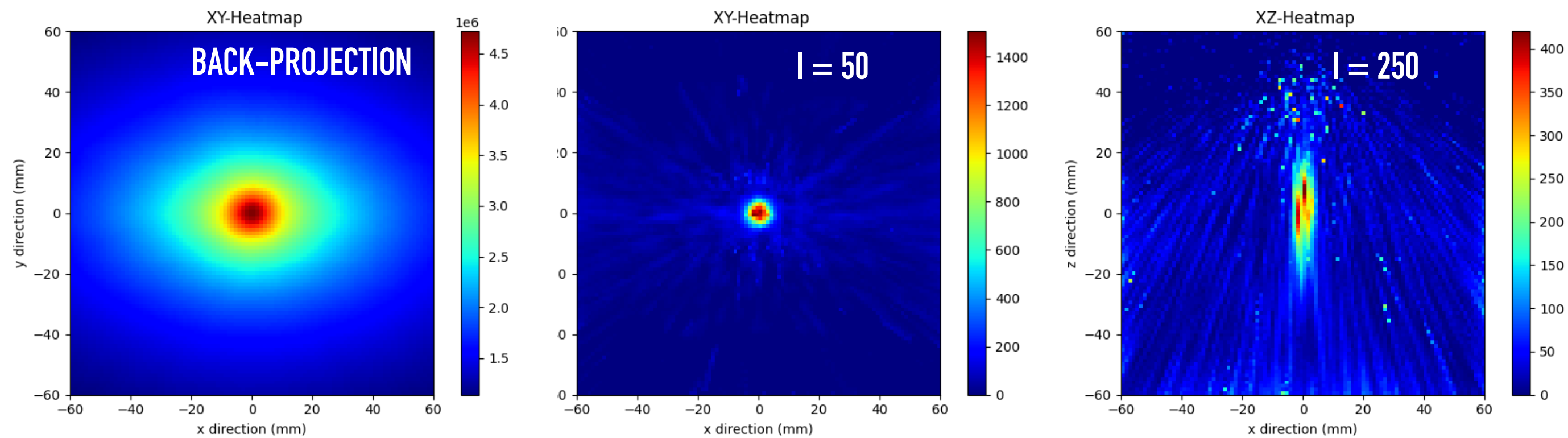
- λ_j^n = calculated amplitude of pixel j at the n th iteration
- s_j = sensitivity, i.e. the probability that a gamma ray originating from pixel j is detected anywhere
- t_{ij} = imaging response matrix, i.e. the transition probabilities generated by the measured events (first estimation: based on back-projection, λ_0)

- Good resolution in x and y profiles, slightly worse in z direction (stretching effect)
- No image interference when phantom is added

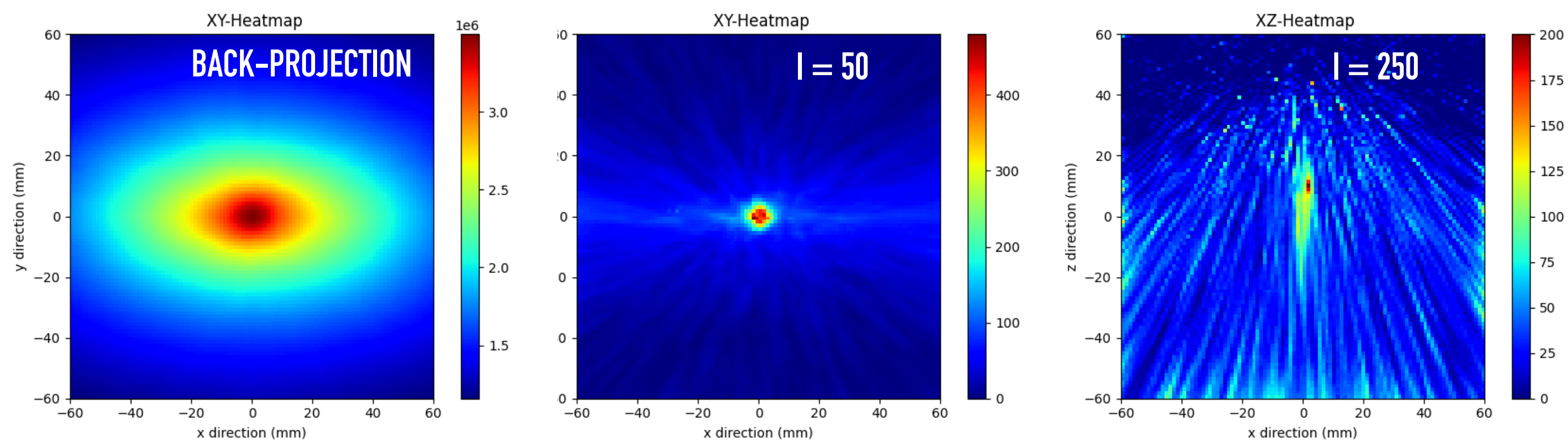
Tumor-to-healthy 2D boron ratio study



On Tissue phantom, $T/N = 5.0$



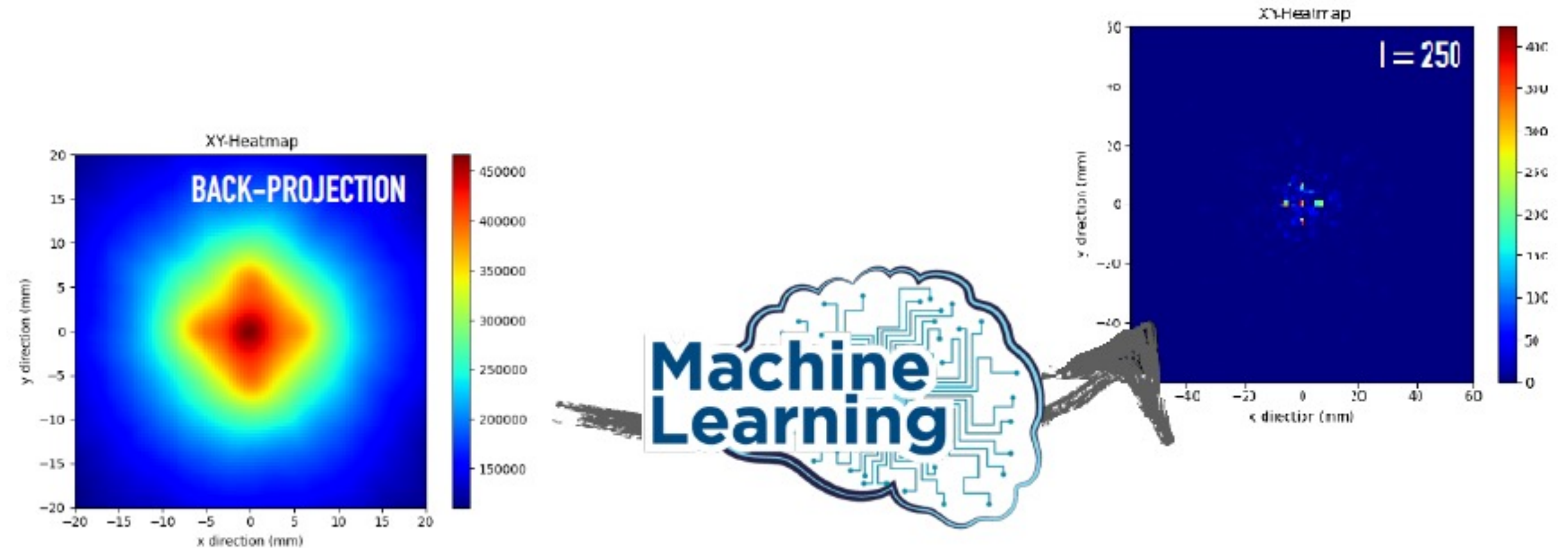
On Tissue phantom, $T/N = 2.0$



- Spheric source in more realistic conditions
- Two different ratios: **ideal case ($T/N = 5$)** and **($T/N = 2$) extreme case** (clinical values are $T/N > 3$)
- Both distributions resolute.
→ More iterations needed to solve the image in z (≈ 250)

Iteration methods and novel approach

- **Limitation for online dose measurements:** MLEM works only post-irradiation, computational times $\approx 24-36$ min
- New approach to go from the back-projection image to the tomography dose by using **Deep Learning**



Training **Deep Learning** model with back-projection and tomography labels sets to make **tomography reconstruction**

Improve **MC simulations** and built a **more suitable database**

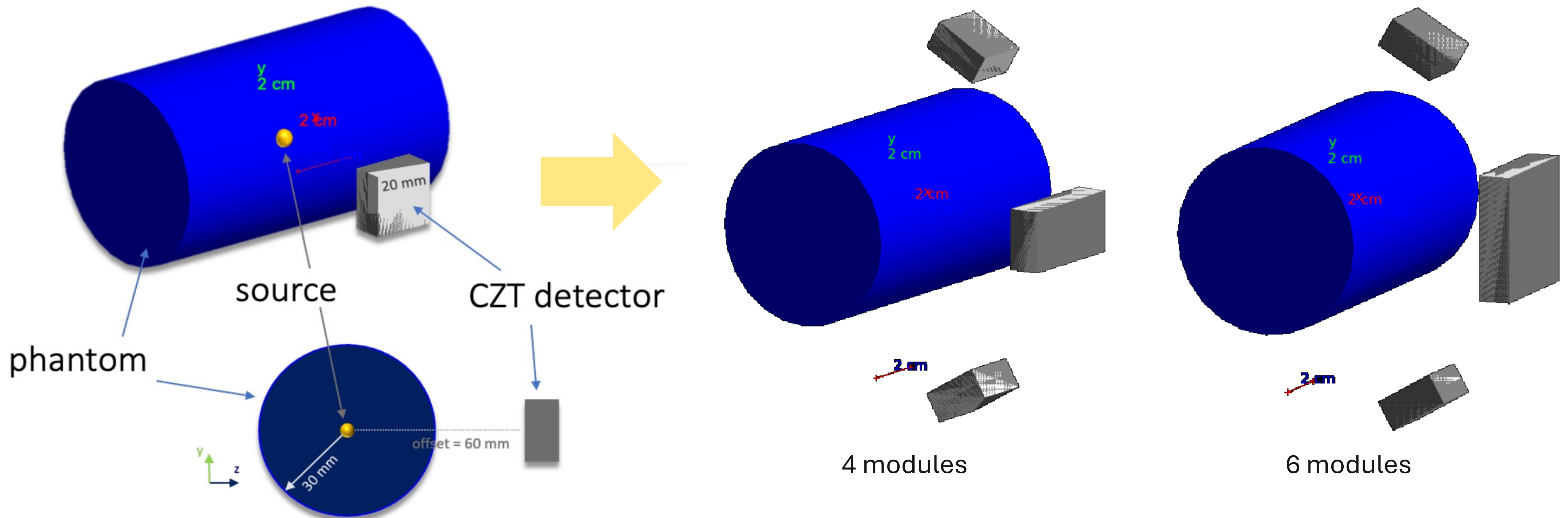


No availability of Compton images databases within BNCT

Improved simulations

3 new configurations to improve the 3D imaging reconstruction (**reduce stretching long z-axis**):

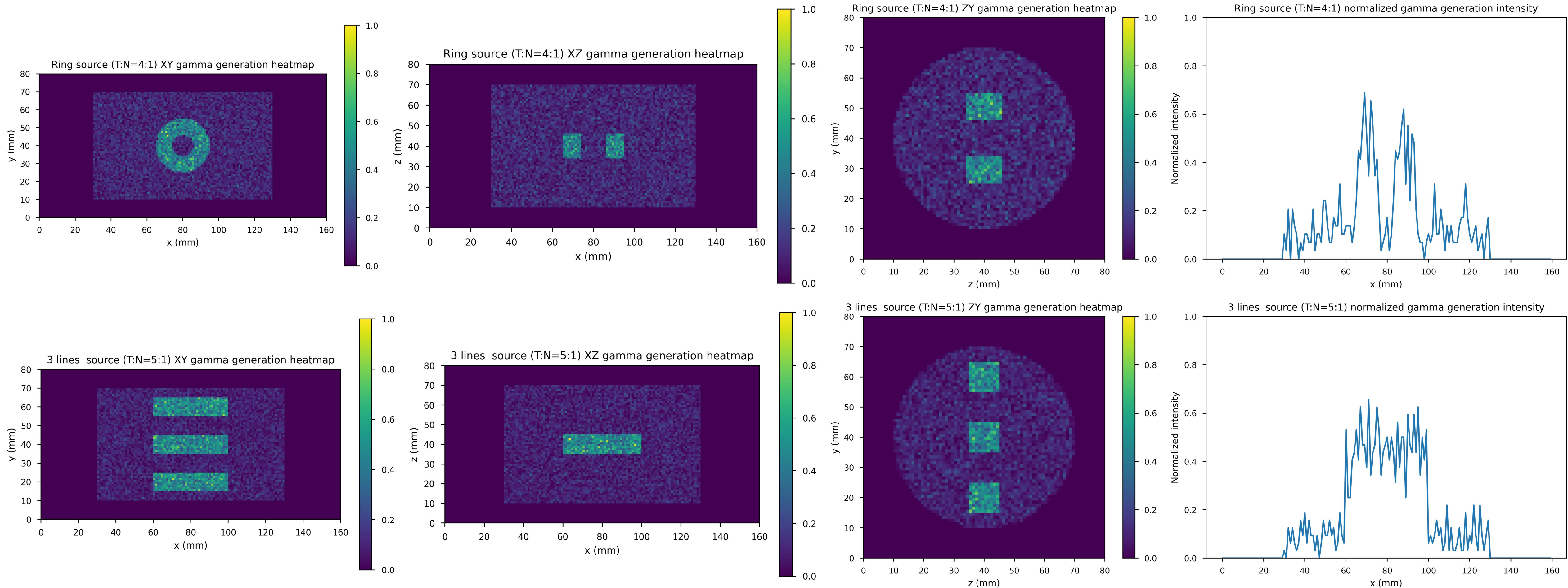
- single module placed at a distance of 60 mm from cylinder axis,
- four modules (2 frontal and 2 at $\pm 60^\circ$),
- six modules (4 frontal and 2 at $\pm 60^\circ$)



Improved simulations



20 different tumor region shapes to obtain a suitable quantity of data for the training phase of deep neural network algorithms



U-Net model variants



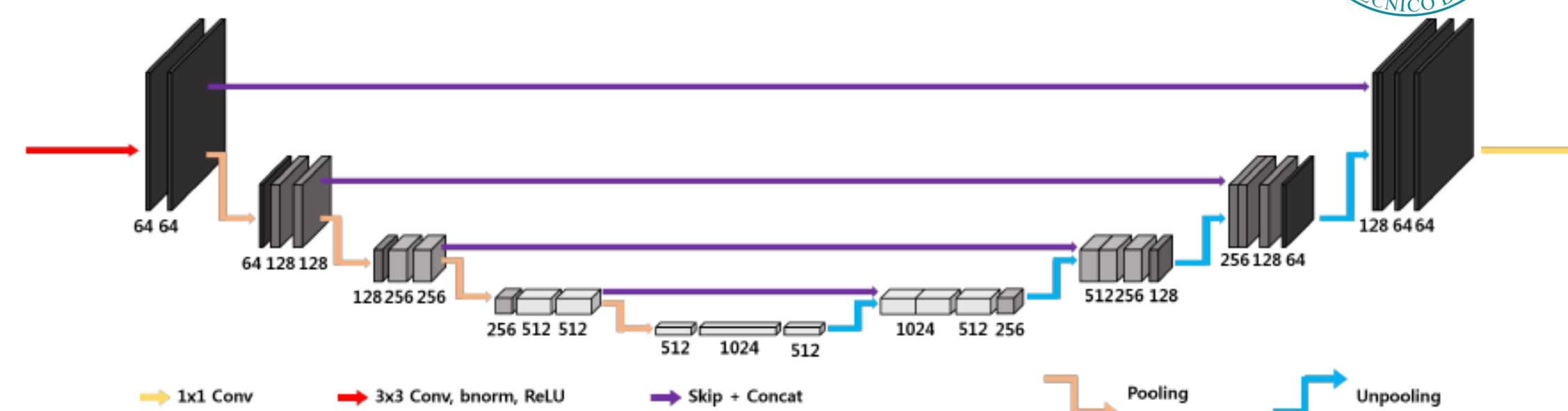
- U-Net and improved versions used for image denoising*:

(a) classical U-Net

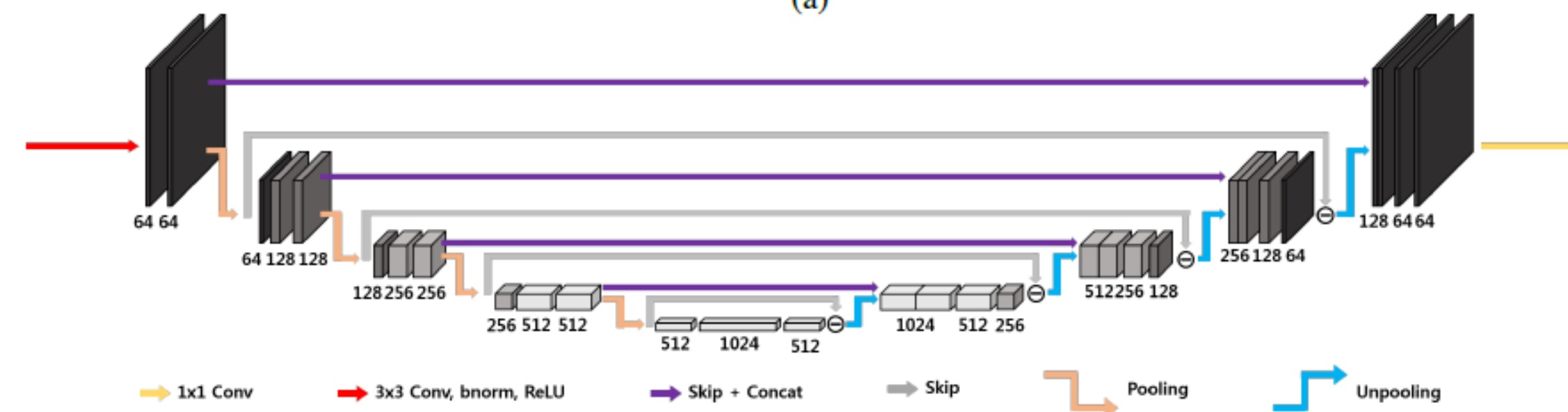
(b) dual frame U-Net

(c) tight frame U-Net with Haar filter bank

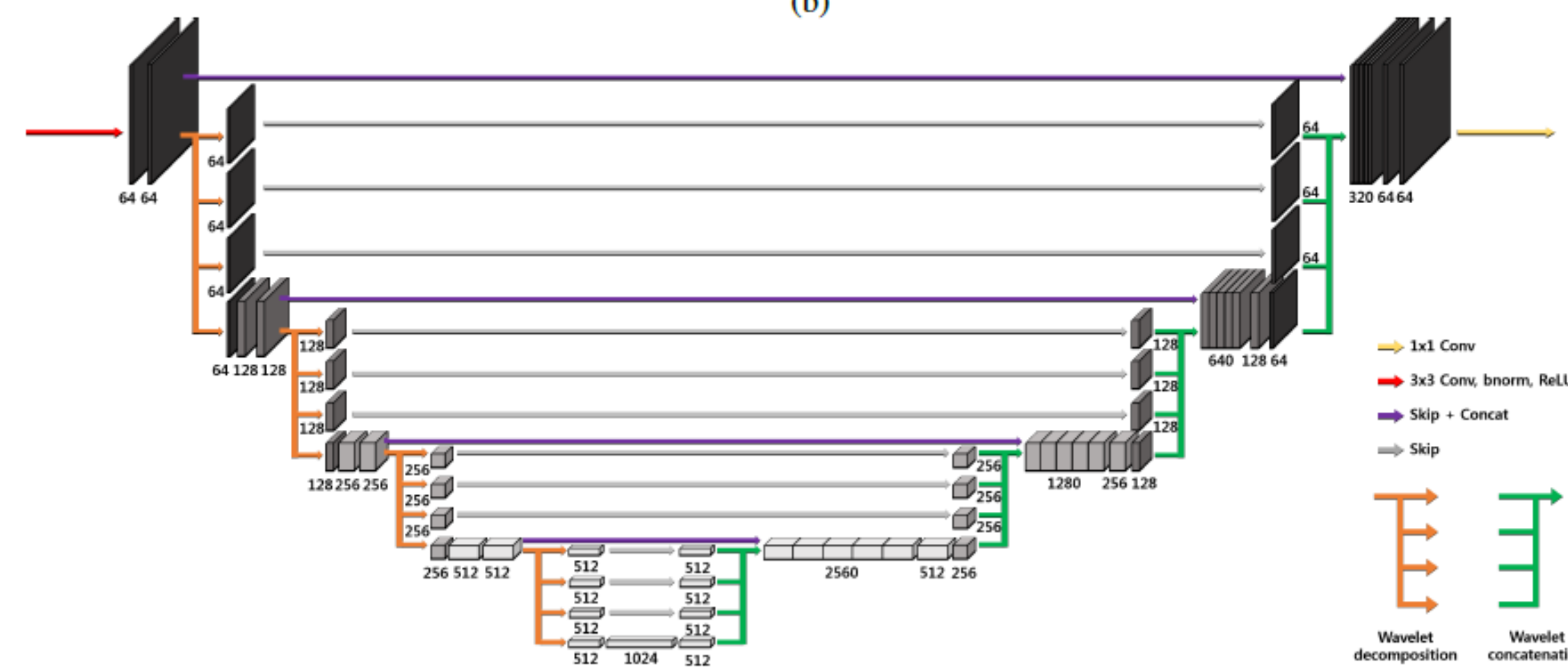
- The input images are the results of the tenth iteration (~ 4-6 min) of MLEM algorithm
- The models were implemented in 3-D variants



(a)



(b)



(c)

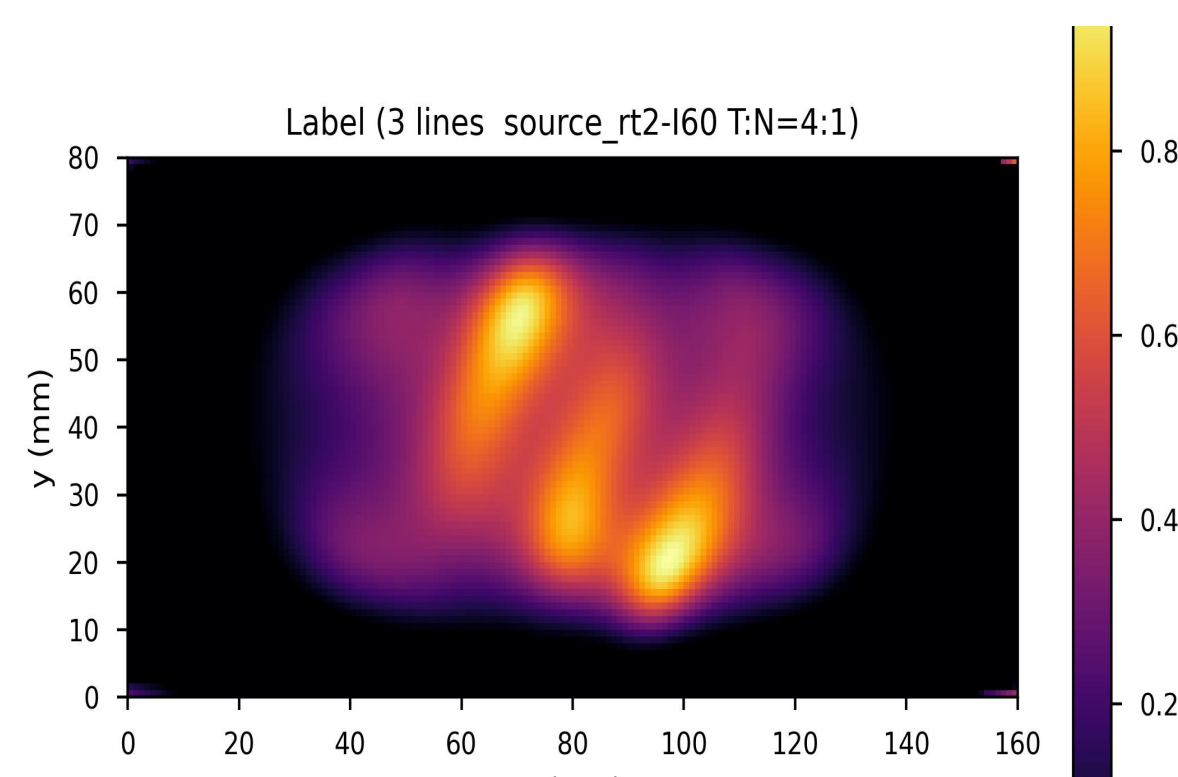
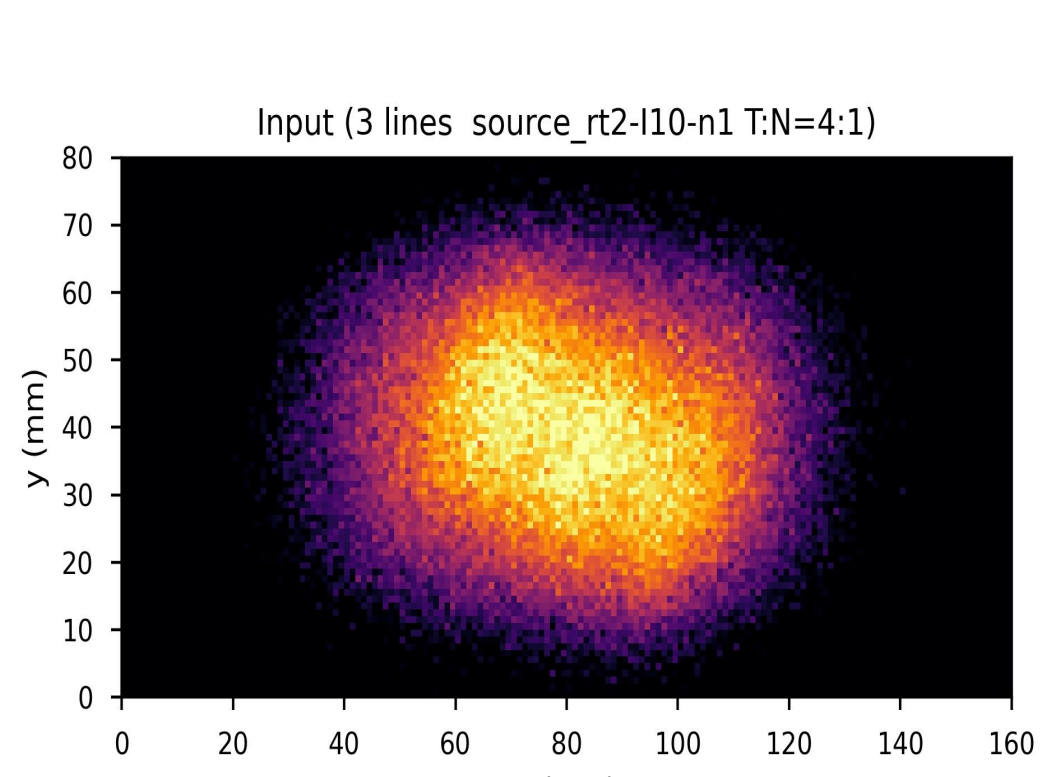
*Framing U-Net via Deep Convolutional Framelets: Application to Sparse-view CT
Yoseb Han and Jong Chul Ye, Senior Member, IEEE

Evaluation



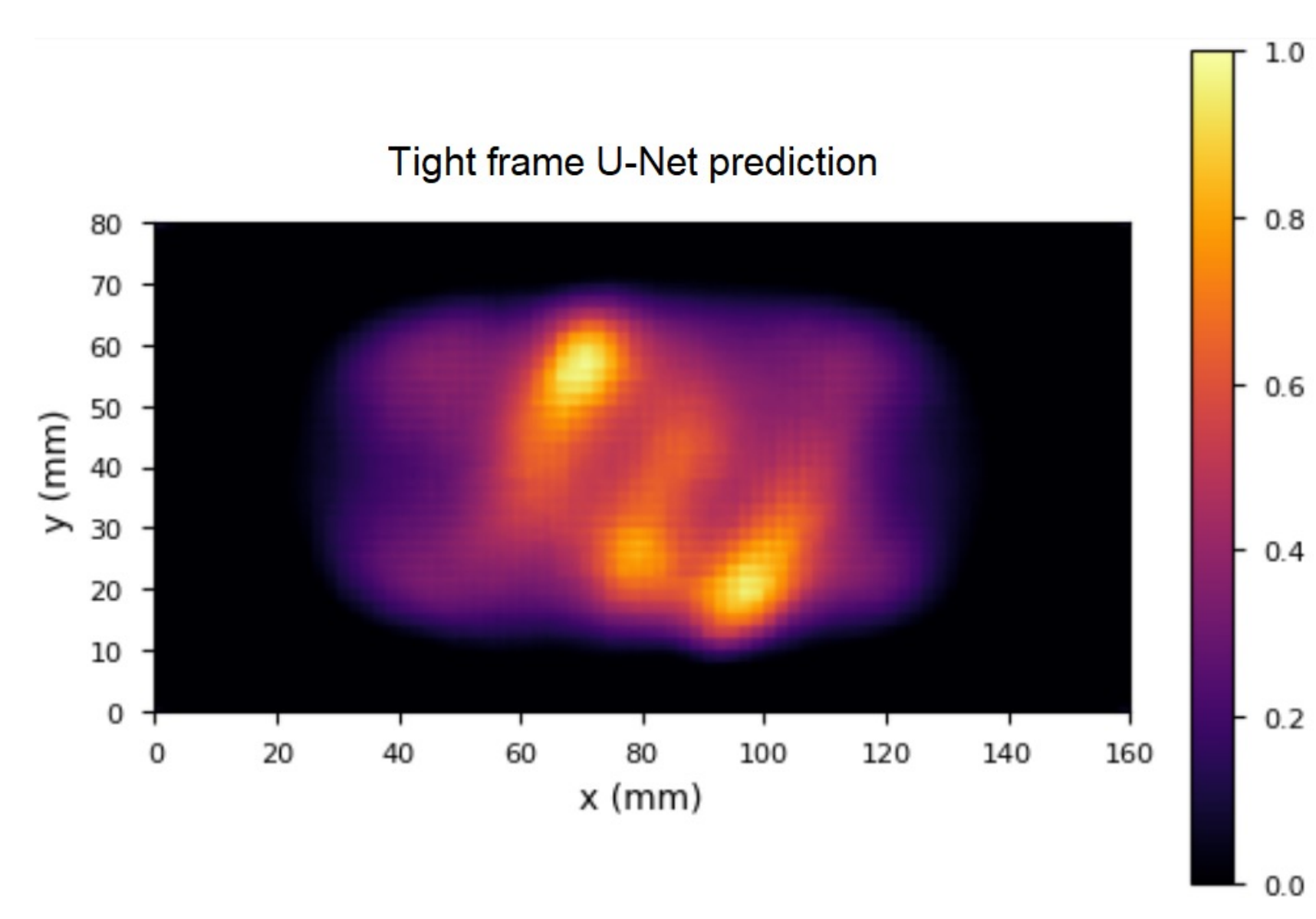
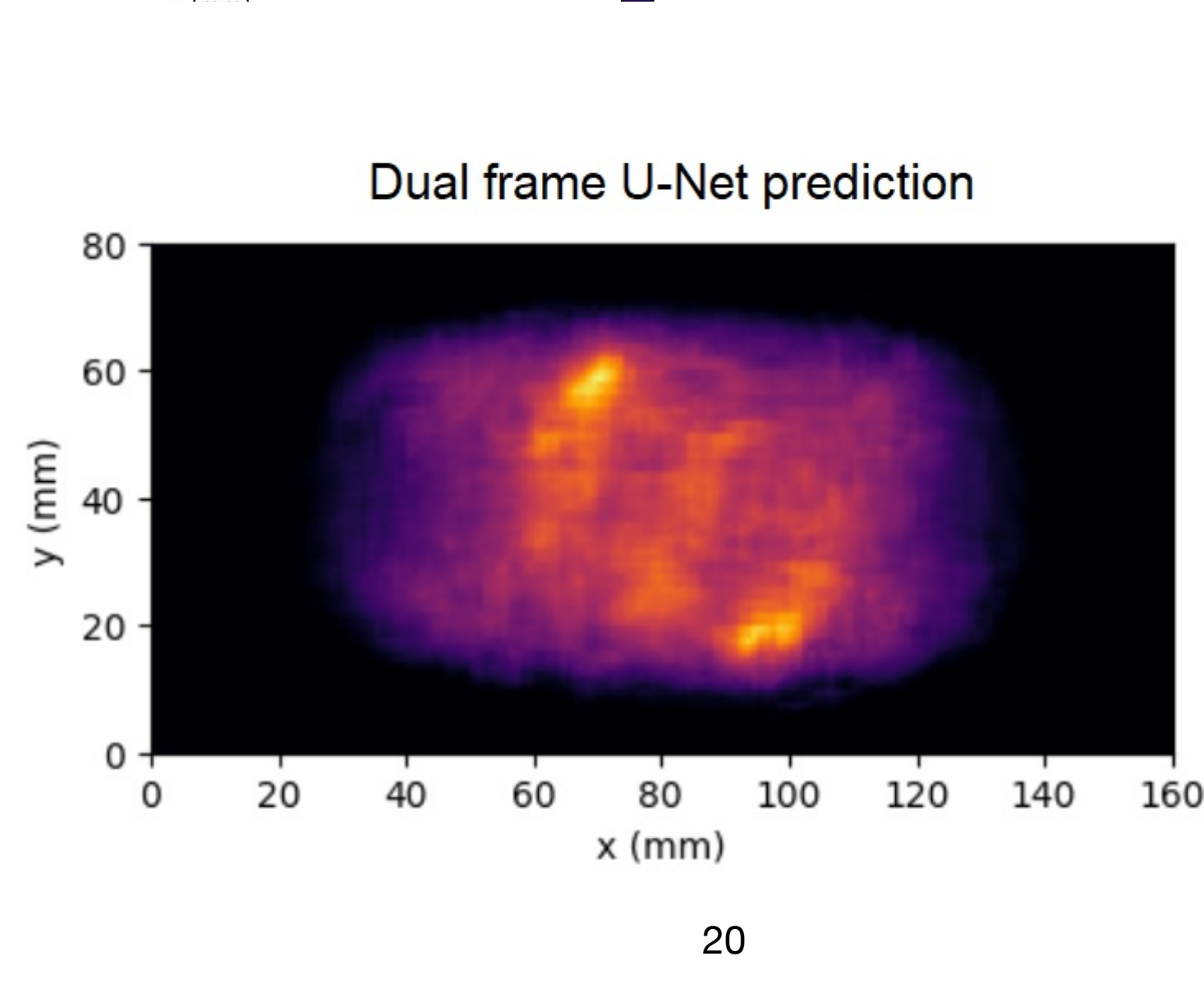
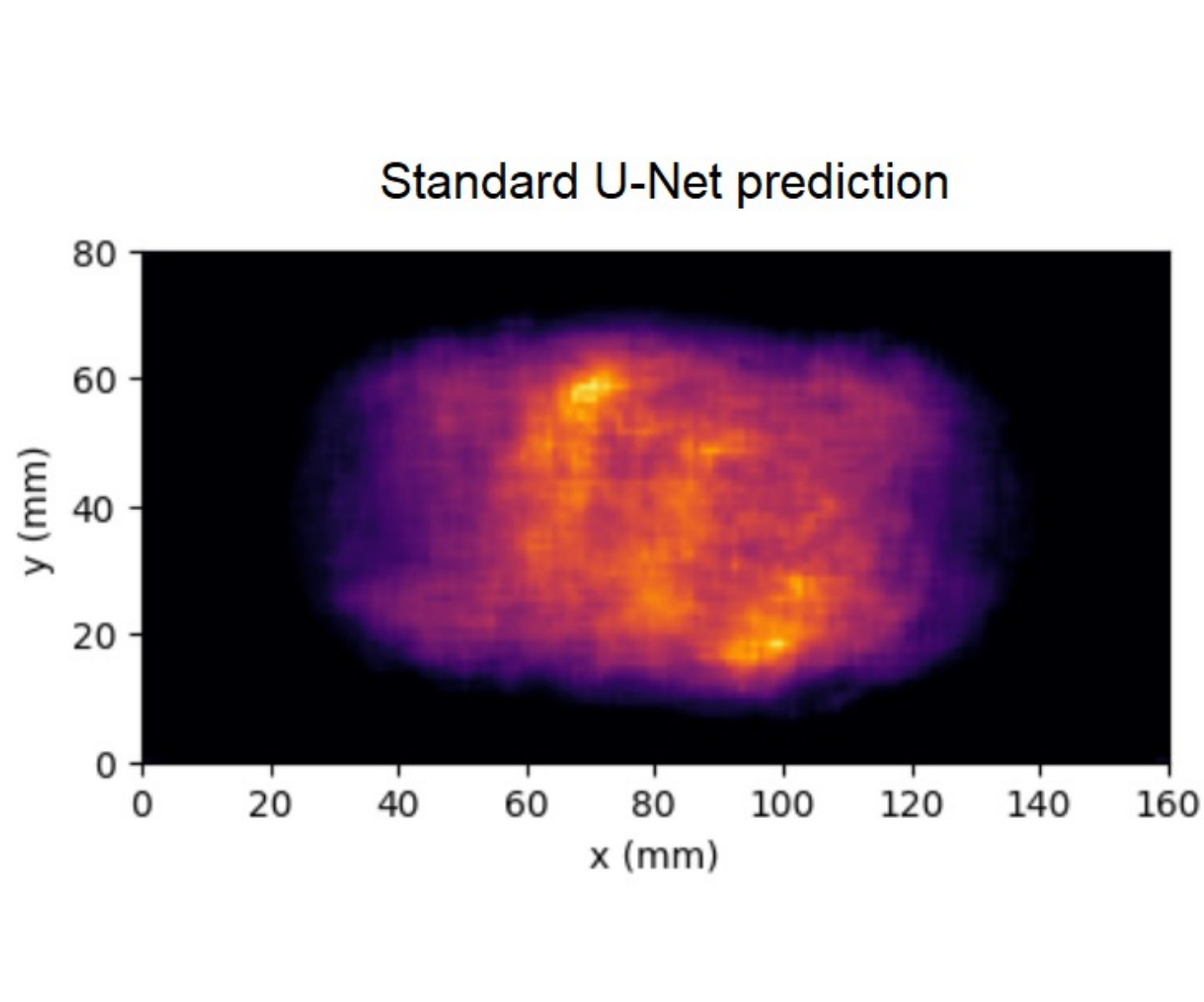
- Networks were trained using ADAM algorithm with learning rate 0.001 and NMSE loss function

- Evaluation: $NMSE = \frac{\|f^* - \hat{f}\|_2^2}{\|f^*\|_2^2}$ $PSNR = 10 \log_{10} \left(\frac{\|f^*\|_\infty^2}{MSE} \right)$ $SSIM = \frac{(2\mu_{\hat{f}}\mu_{f^*} + c_1)(2\sigma_{\hat{f}f^*} + c_2)}{(\mu_{\hat{f}}^2 + \mu_{f^*}^2 + c_1)(\sigma_{\hat{f}}^2 + \sigma_{f^*}^2 + c_2)}$



	NMSE	PSNR	SSIM
Standard U-Net	0.031803	36.119379	0.754417
Dual frame U-Net	0.029113	36.396008	0.726286
Tight frame U-Net	0.011953	40.615813	0.853548

Prediction time: $\approx 4-6$ min



Summary and Future



- There is a possibility to exploit **SPECT** and **Compton imaging** approaches for **boron dose tomography** within **Boron Neutron Capture Therapy**
Compton imaging pros: dynamic FOV, no collimation is needed, less system complexity
- Fine tuning by using **experimental data is needed** (SPECT ongoing, Compton imaging → founding for a prototype)
- The use of **Deep Learning** has proved the possibility to **reduce reconstruction times** ($\approx 4-6$ min using Compton imaging)

What's next?

- Development of Deep Learning algorithms to be applied to SPECT reconstruction
- Approaches to reduce artifacts and improve reconstruction, more detailed MC simulation, unrolled learned prior algorithm optimization, other deep learning techniques (GANs, DIP, ...)



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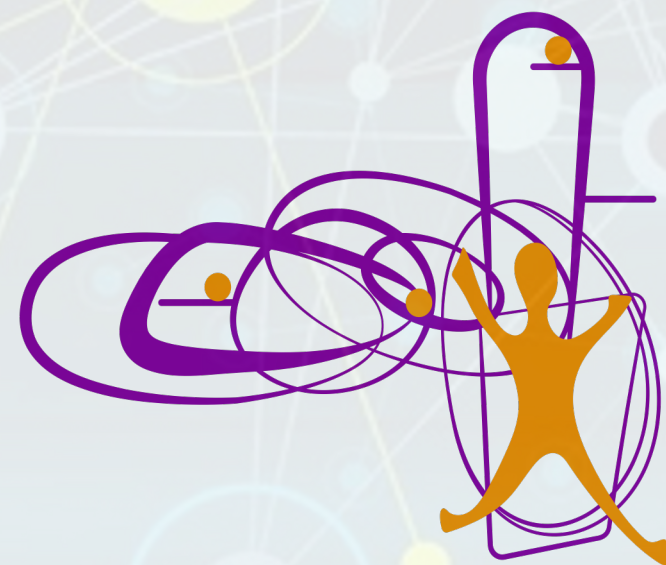
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Sezione di Bari



SensiMed
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Thanks!
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RECAS



DIPARTIMENTO
INTERATENEIO
DI FISICA



Quantum sensing for one-health

A complex network diagram with numerous nodes of various sizes and colors (blue, yellow, orange, white) connected by thin lines, set against a light blue background with horizontal lines.

| Spares

Tumor Monitoring DL model

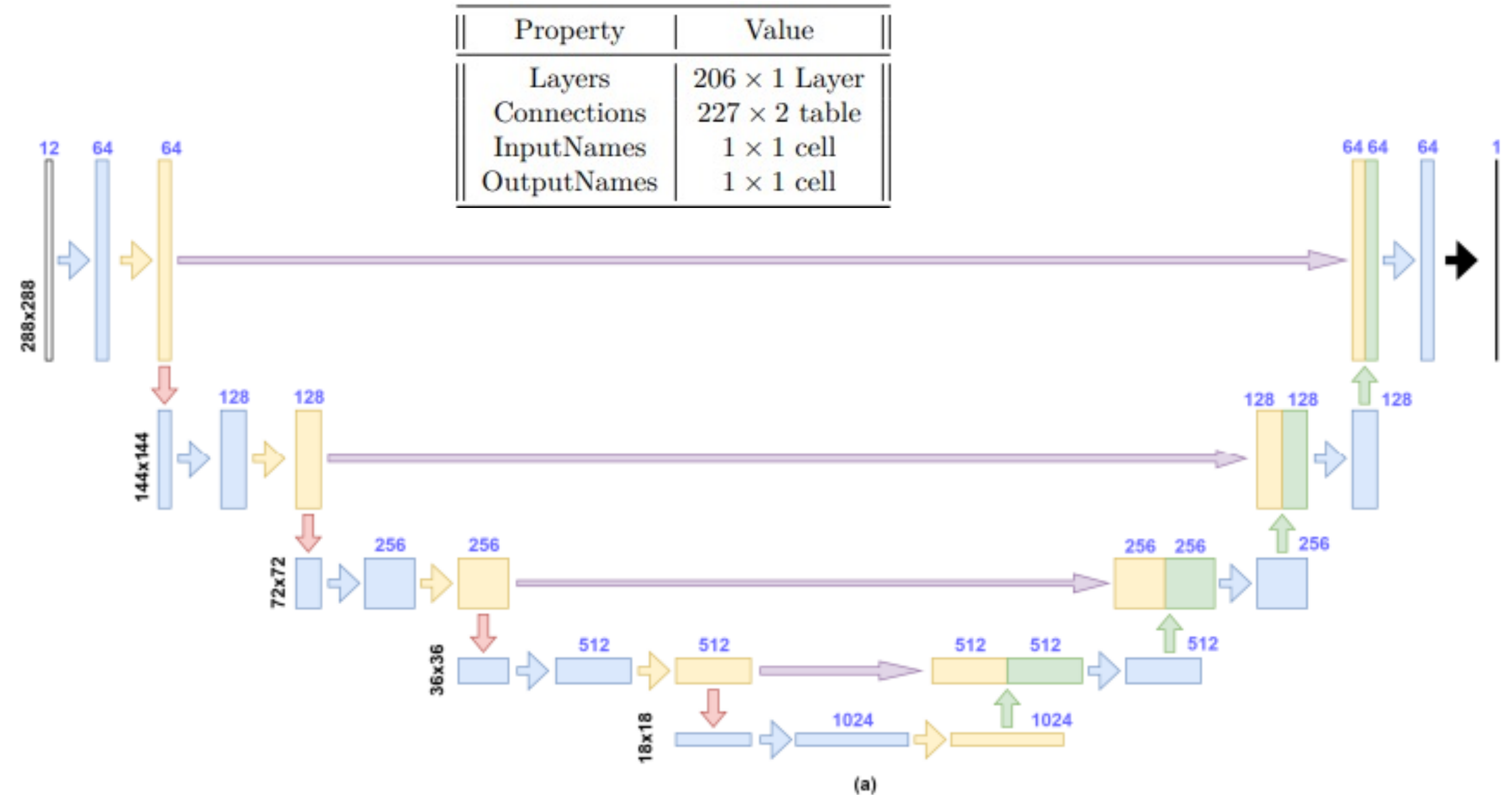
- **Matlab pipe-line** for segmentation of images
- Use of Convolutional Neural Network model with a **Residual U-net Architecture (ResNet)**, widely used for segmentation

Test metrics: **accuracy and sensitivity**

$$\text{Accuracy} = \frac{TP}{TP + FP}$$

$$\text{Sensitivity} = \frac{TP}{TP + FN}$$

Resnet U-net architecture



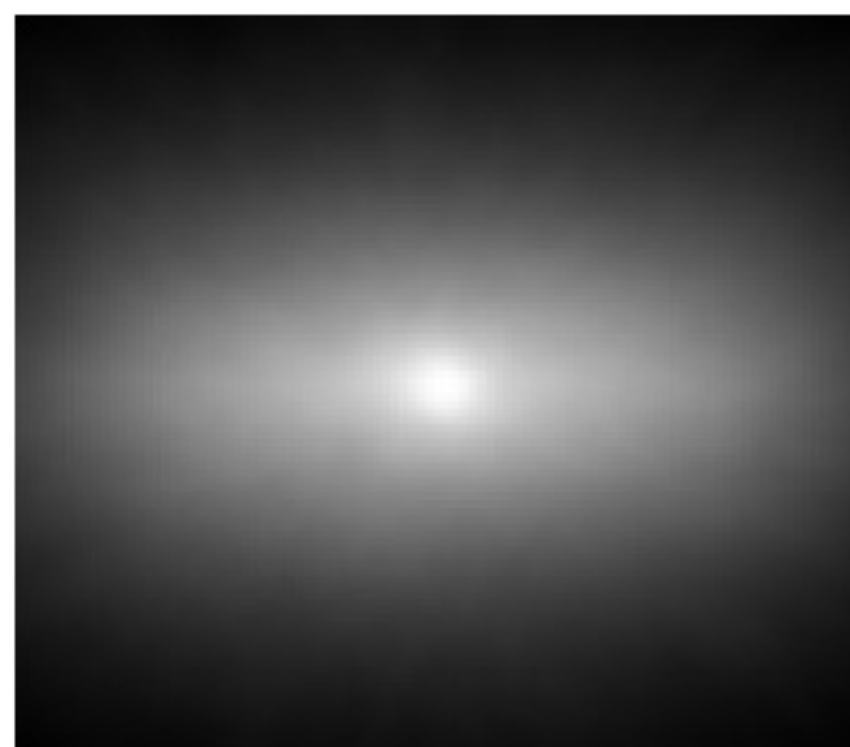
Model performance performance

	Accuracy	Sensitivity
case 1	79.56%	99.87%
case 2	4.83%	100%
case 3	19.68%	100%
case 4	3.81%	100%

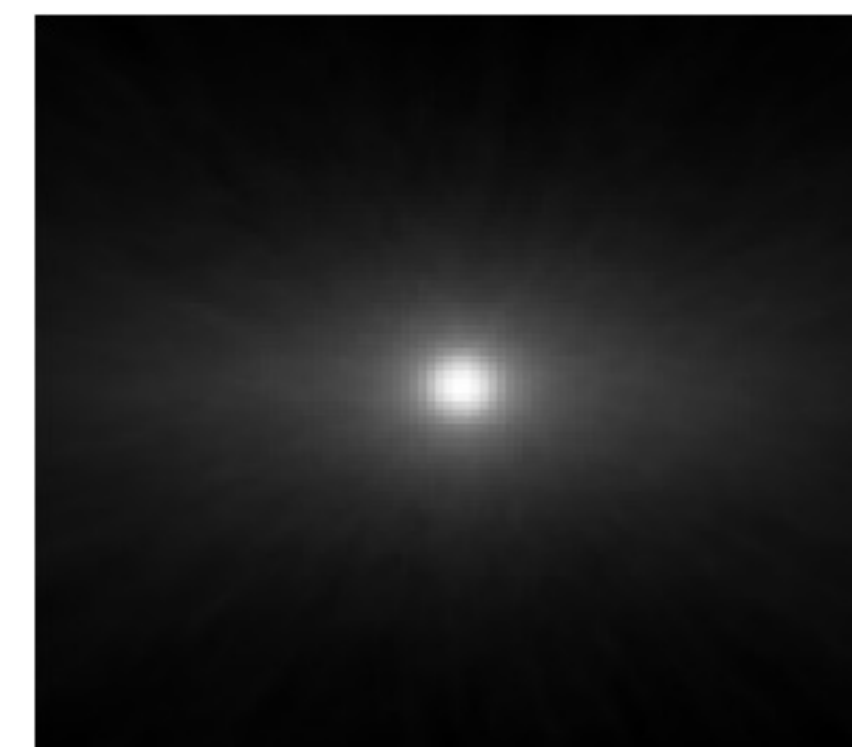
Normalized back
projections



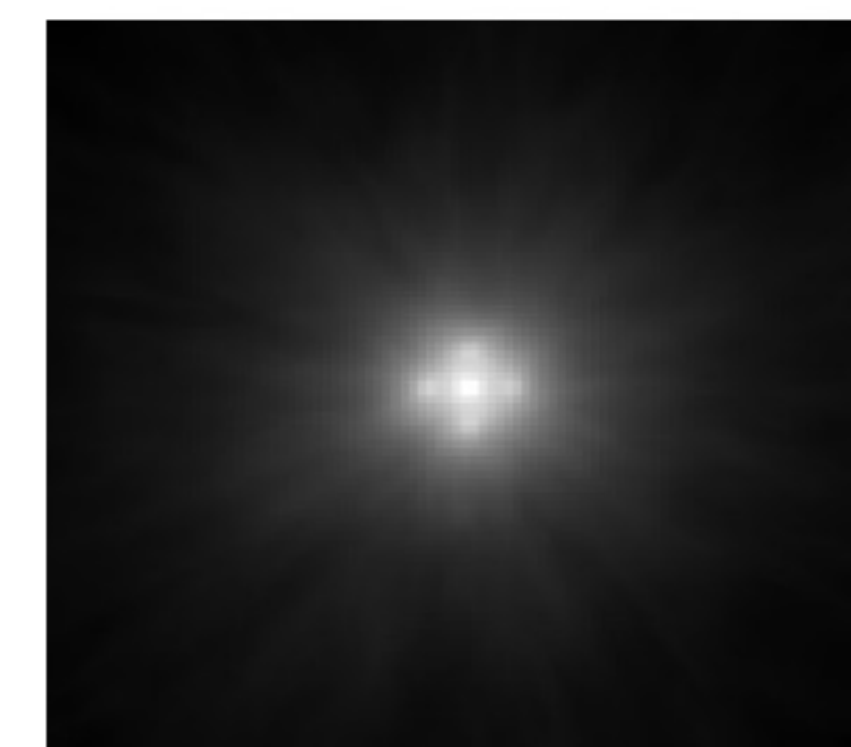
Case 1: Spheric
source in Air



Case 2: Spheric source
in Tissue (T/N=2)

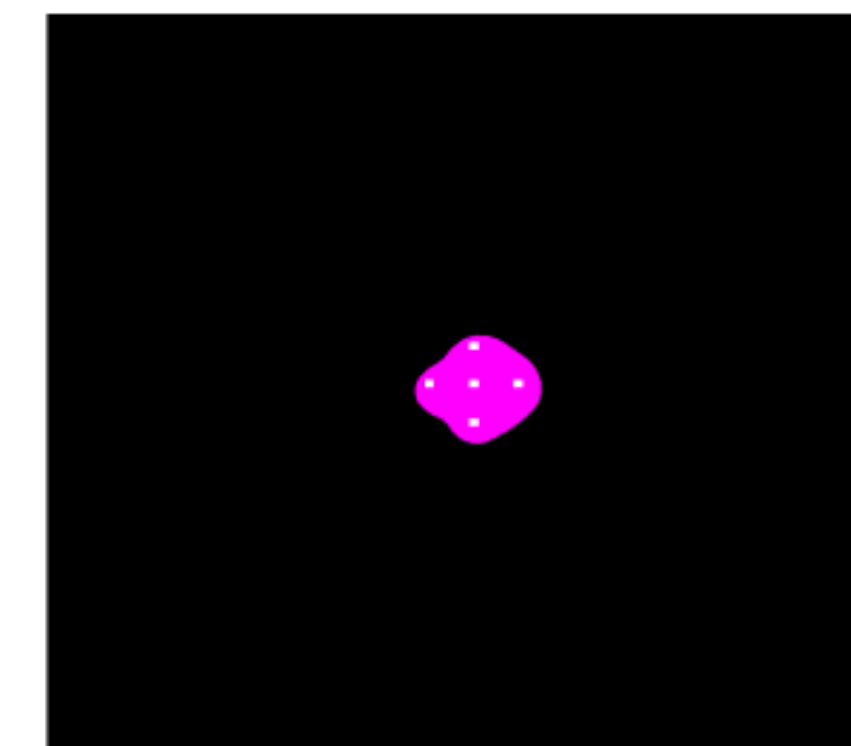
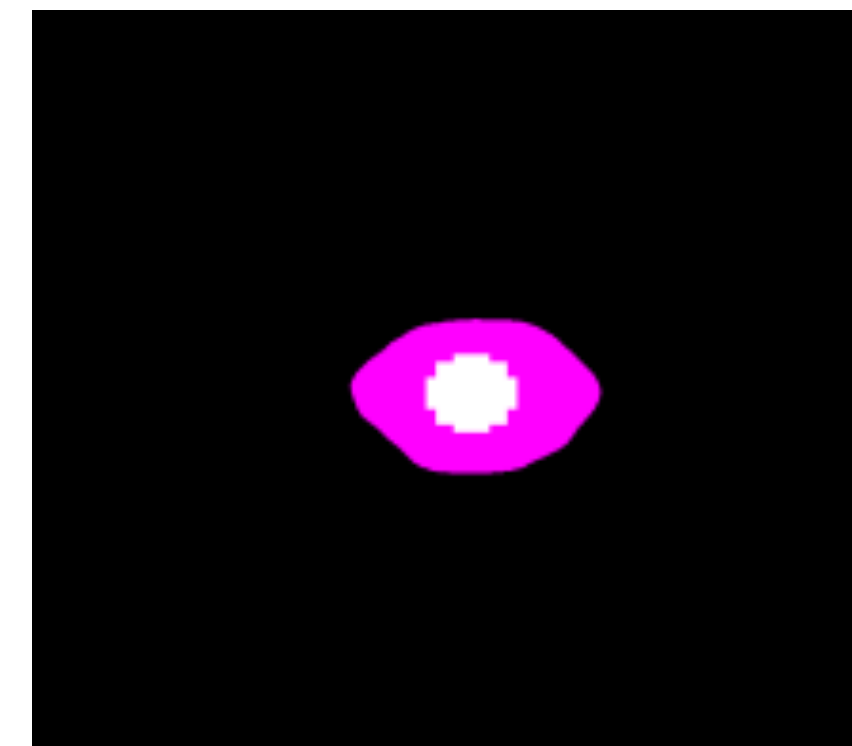
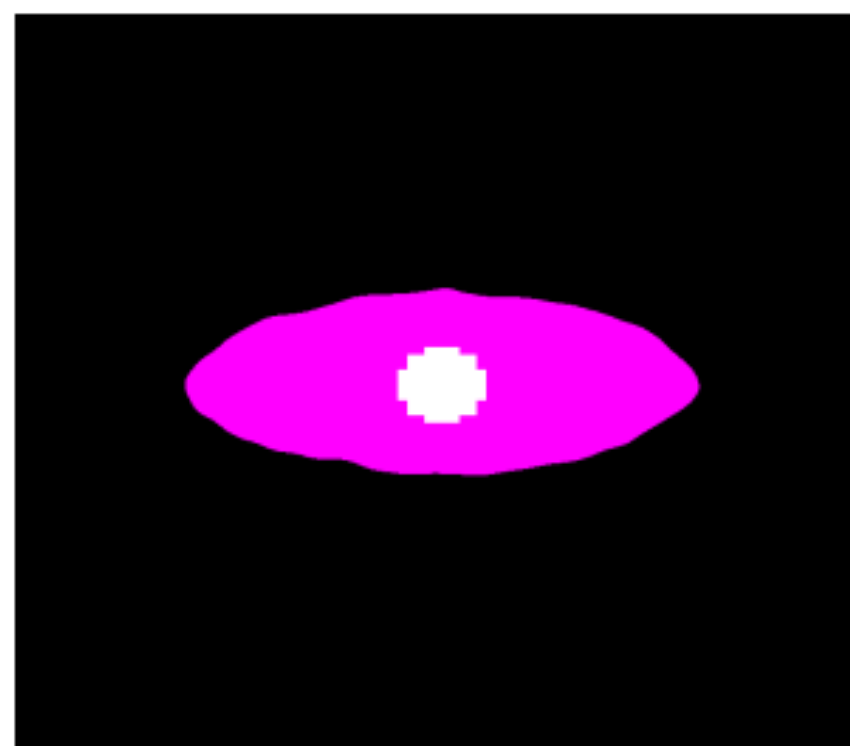
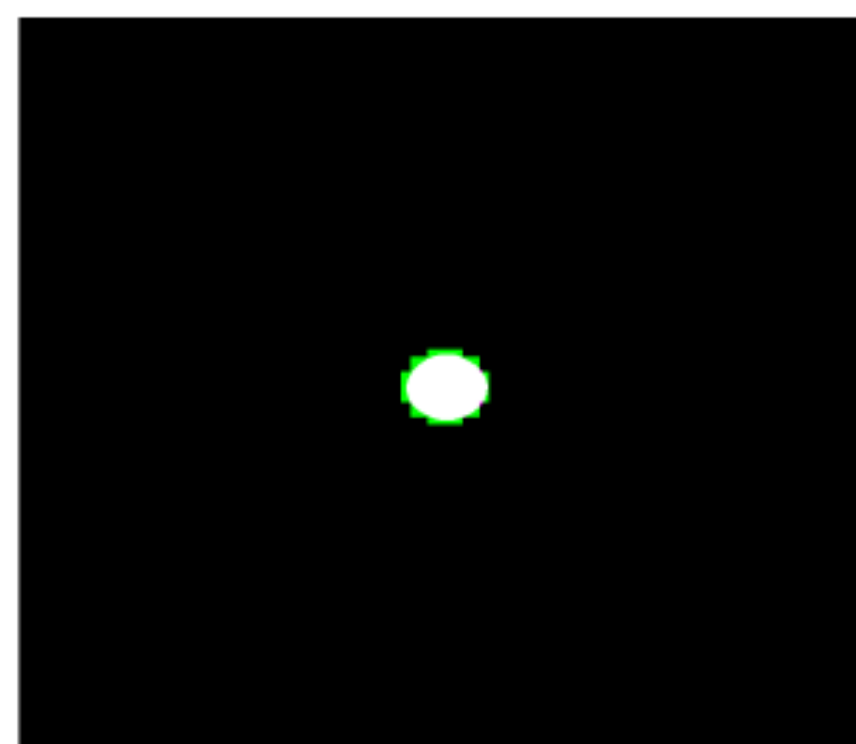


Case 3 Spheric source
in Tissue (T/N=5)



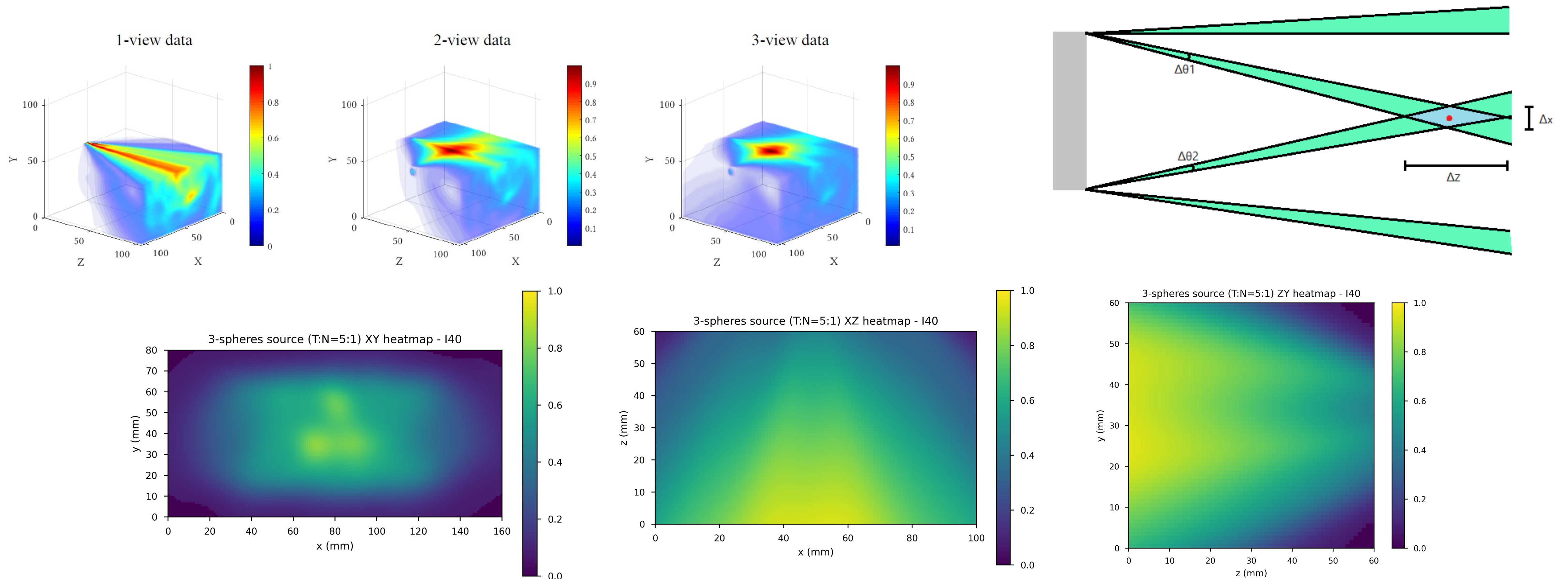
Case 4: 5 point-like
source in air

ResNet
segmentation



List-mode MLEM with single-view camera

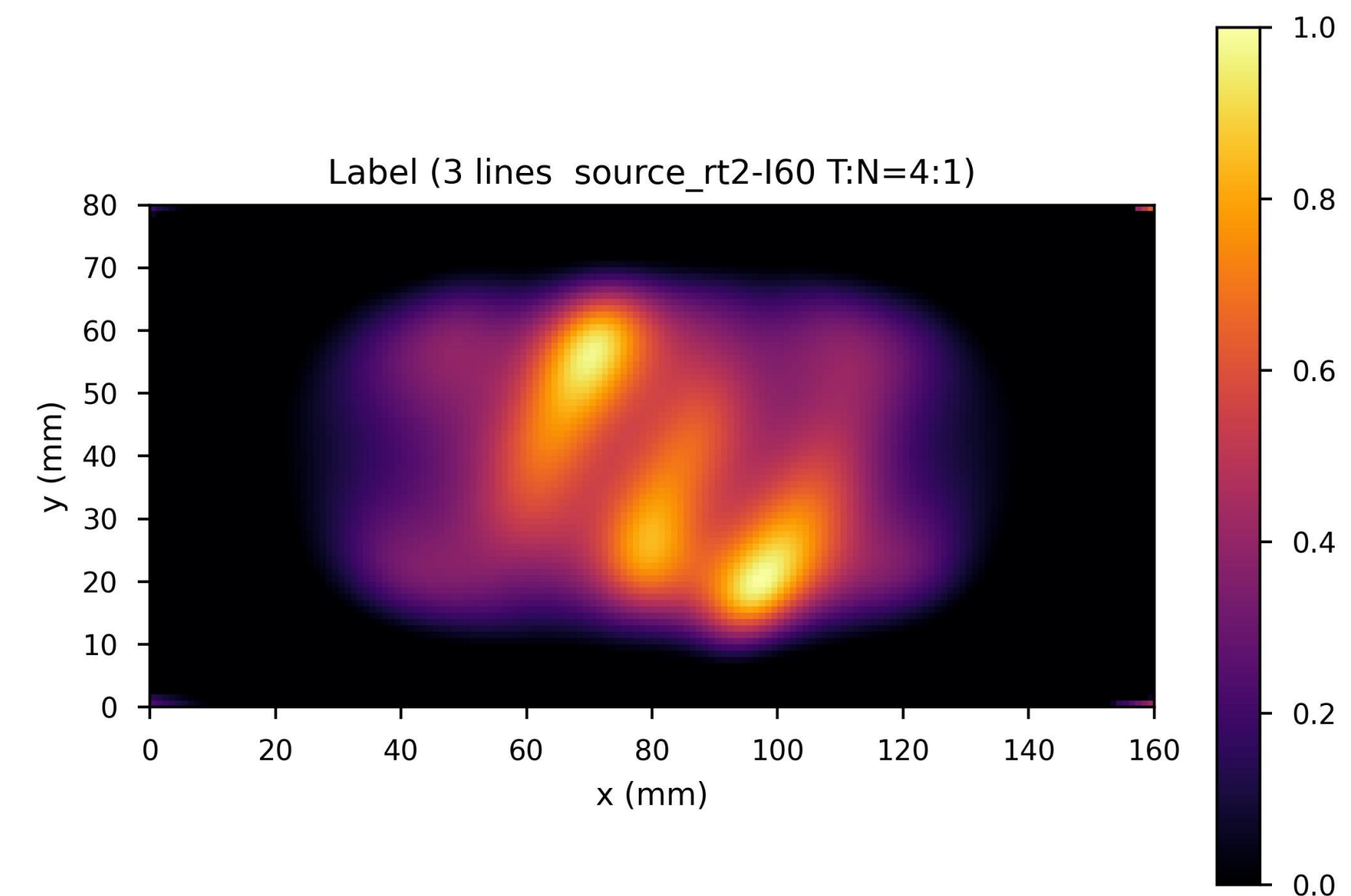
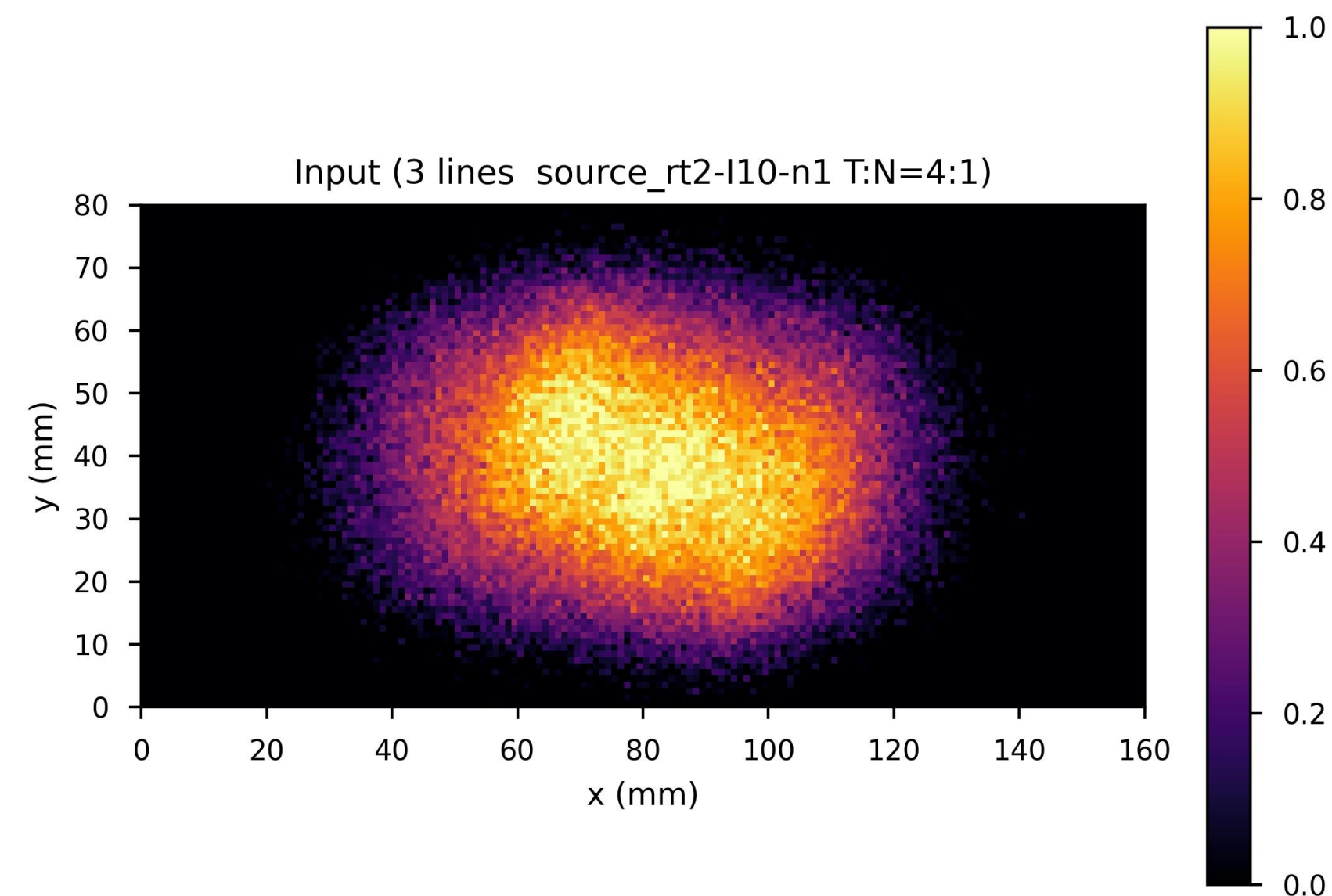
Poor localization of the source in the z direction with single-view camera, although single-view reconstructions could be integrated with multi-view using image fusion techniques



Dataset



- Starting from 20 different tumor source geometries, 71 original 3D images were obtained considering different T:N ratios (3:1, 4:1, 5:1, ∞ :1). Input: 10th iteration MLEM reconstructions, output: 60th iteration reconstructions
- For each of the 71 original images, **4 roto-translations** of the tumor source were considered (71x5 images)
- For each of the images, 41 images were obtained by adding four different levels of white Gaussian noise (71x5x42= 14910 images)
- Distributed **70 : 10 : 20** among the training set (11130 images), validation set (1260 images) and test set (2520 images)





Training phase and evaluation

- Networks were trained using ADAM algorithm with learning rate 0.001 and NMSE loss function

- Evaluation: $NMSE = \frac{\|f^* - \hat{f}\|_2^2}{\|f^*\|_2^2}$ $PSNR = 10 \log_{10} \left(\frac{\|f^*\|_\infty^2}{MSE} \right)$ $SSIM = \frac{(2\mu_{\hat{f}}\mu_{f^*} + c_1)(2\sigma_{\hat{f}f^*} + c_2)}{(\mu_{\hat{f}}^2 + \mu_{f^*}^2 + c_1)(\sigma_{\hat{f}}^2 + \sigma_{f^*}^2 + c_2)}$

- Prediction time: $\approx 4-6$ min (BNCT treatment duration: $\approx 30-90$ min, MLEM algorithm: $\approx 24-36$ min) min

Network	n_{te}	Best epoch	Tr. NMSE	Val. NMSE
U-Net	56	39	0.03396	0.02865
Dual frame U-Net	53	50	0.03280	0.02571
Tight frame U-Net	52	48	0.01102	0.01113

	NMSE	PSNR	SSIM
Standard U-Net	0.031803	36.119379	0.754417
Dual frame U-Net	0.029113	36.396008	0.726286
Tight frame U-Net	0.011953	40.615813	0.853548

