Medical Applications of Particle Physics

Saverio Braccini

TERA
Foundation for Oncological Hadrontherapy

Outline

- Introduction: a short historical review
- Applications in medical diagnostics
- Applications in conventional cancer radiation therapy

I

- Hadrontherapy, the new frontier of cancer radiation therapy
  - Proton-therapy
  - Carbon ion therapy
- Conclusions and outlook

II

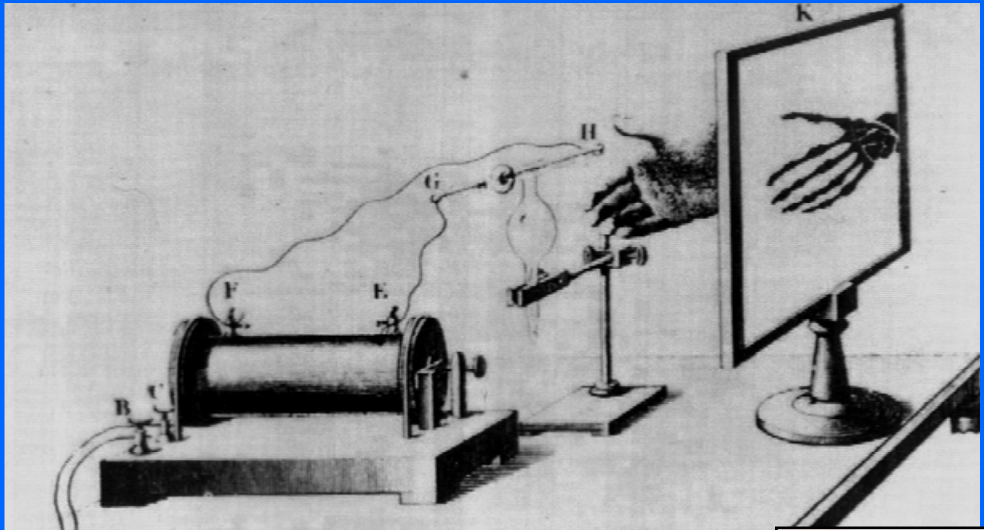
Introduction

Fundamental research in particle physics and medical applications

The starting point

- **November 1895 : discovery of X rays**

Wilhelm Conrad Röntgen



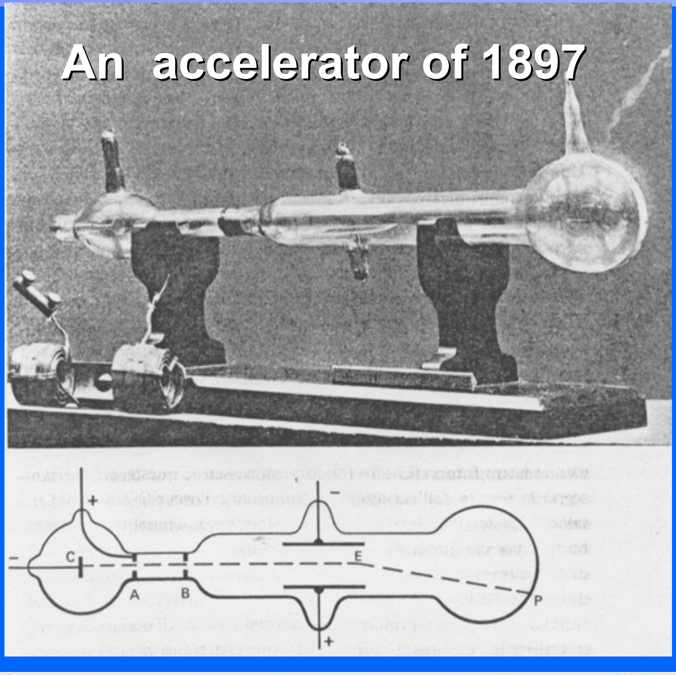
- **December 1895 : first radiography**

The beginning of modern physics and medical physics

Wilhelm Conrad Röntgen

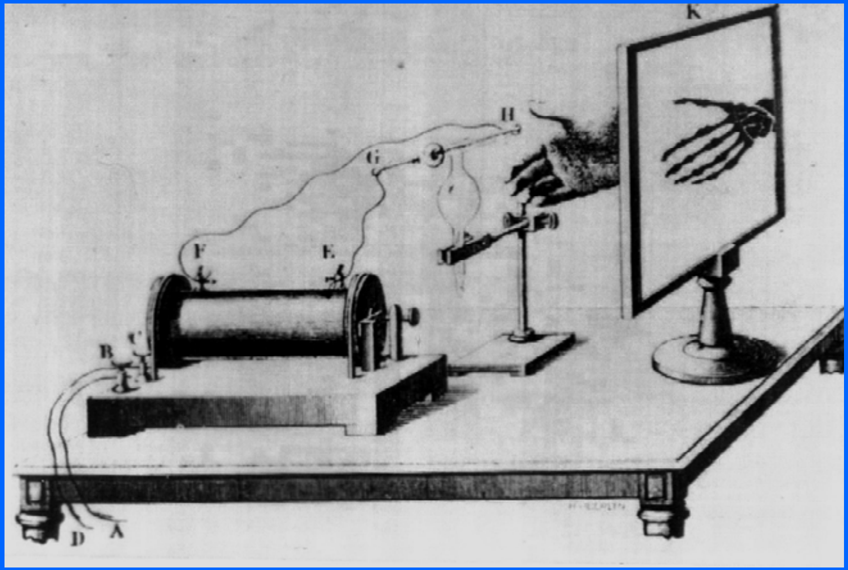
1895

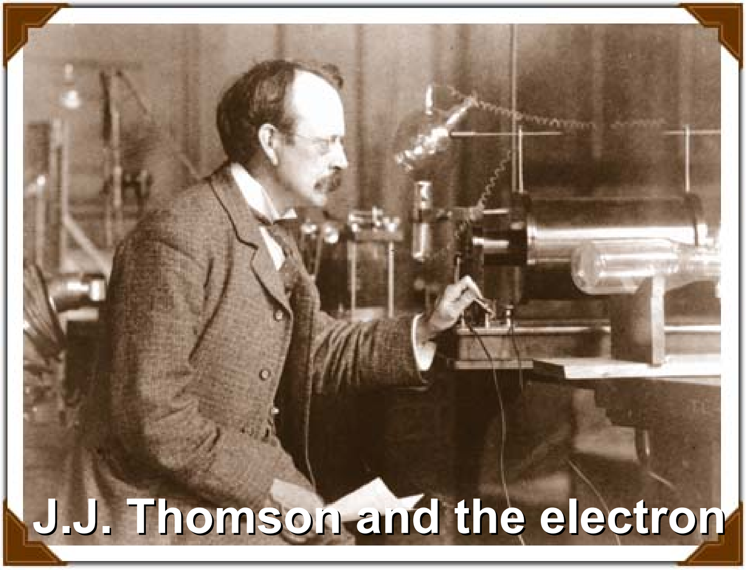
discovery of X rays



An accelerator of 1897

1895 – starting date of four magnificent years in experimental physics

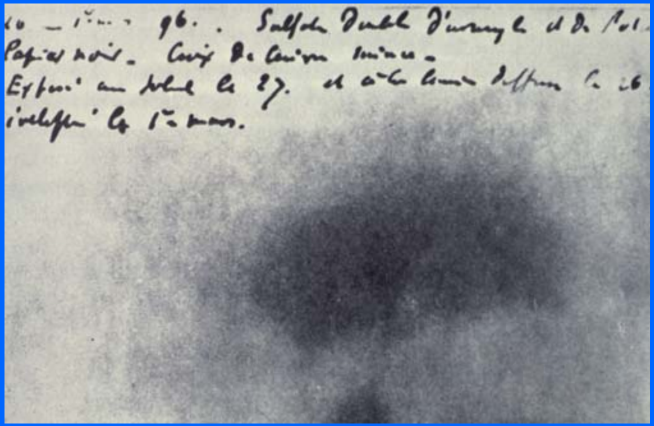




J.J. Thomson and the electron

The beginning of modern physics and medical physics

Henri Becquerel
(1852-1908)

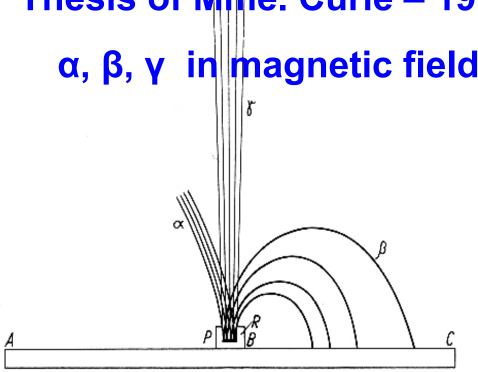


1896:

Discovery of natural radioactivity

Thesis of Mme. Curie – 1904

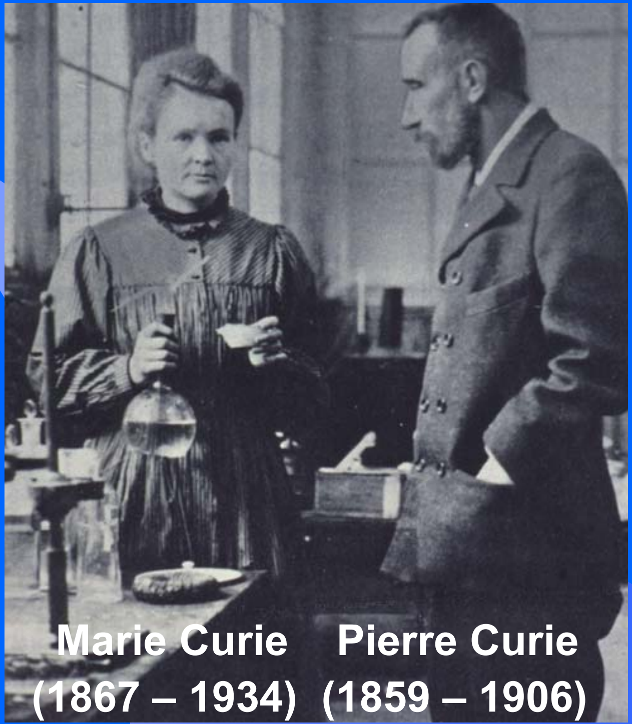
α, β, γ in magnetic field



Hundred years ago

1898

Discovery of radium



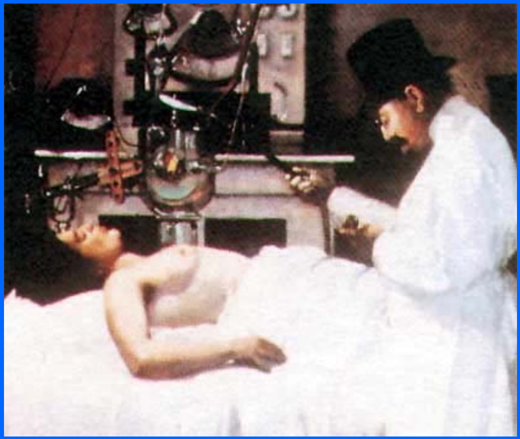
Marie Curie
(1867 – 1934)

Pierre Curie
(1859 – 1906)

First applications in cancer therapy

Basic concept

Local control of the tumour



1908 : first attempts of skin cancer radiation therapy in France ("*Curietherapy*")

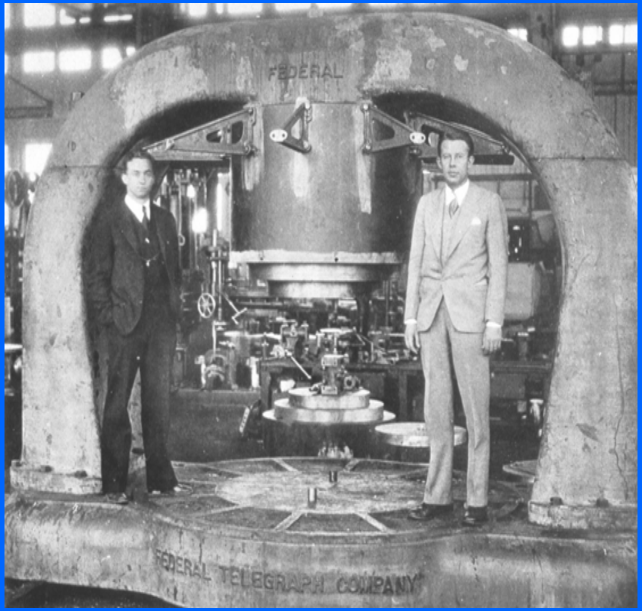
A big step forward…

…in physics and in

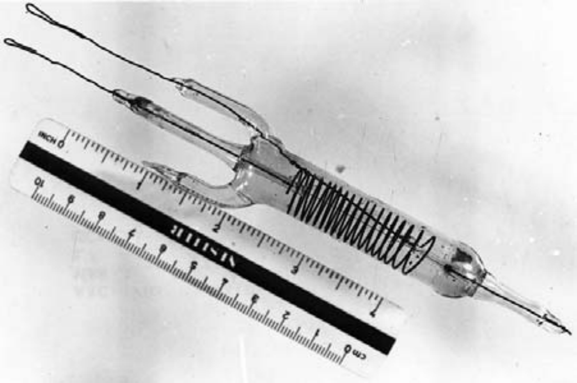
- Medical diagnostics
- Cancer radiation therapy

due to the development of three fundamental tools

- Particle accelerators
- Particle detectors
- Computers



M. S. Livingston and E. Lawrence with the 25 inches cyclotron

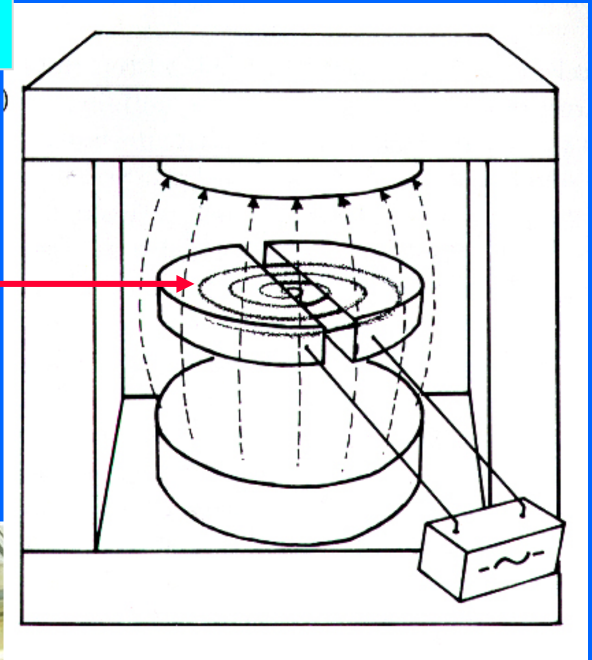


Geiger-Müller counter built by E. Fermi and his group in Rome

1930: the beginning of four other magnificent years

1930: invention of the cyclotron

Spiral tajectory of an accelerated nucleus



Ernest Lawrence

(1901 – 1958)

The Lawrence brothers

John H. Lawrence made the first clinical therapeutic application of an artificial radionuclide when he used phosphorus-32 to treat leukemia. (1936)

- John Lawrence, brother of Ernest, was a medical doctor
- They were both working in Berkley
- First use of artificially produced isotopes for medical diagnostics
- Beginning of nuclear medicine

An interdisciplinary environment helps innovation!

Discovery of the neutron

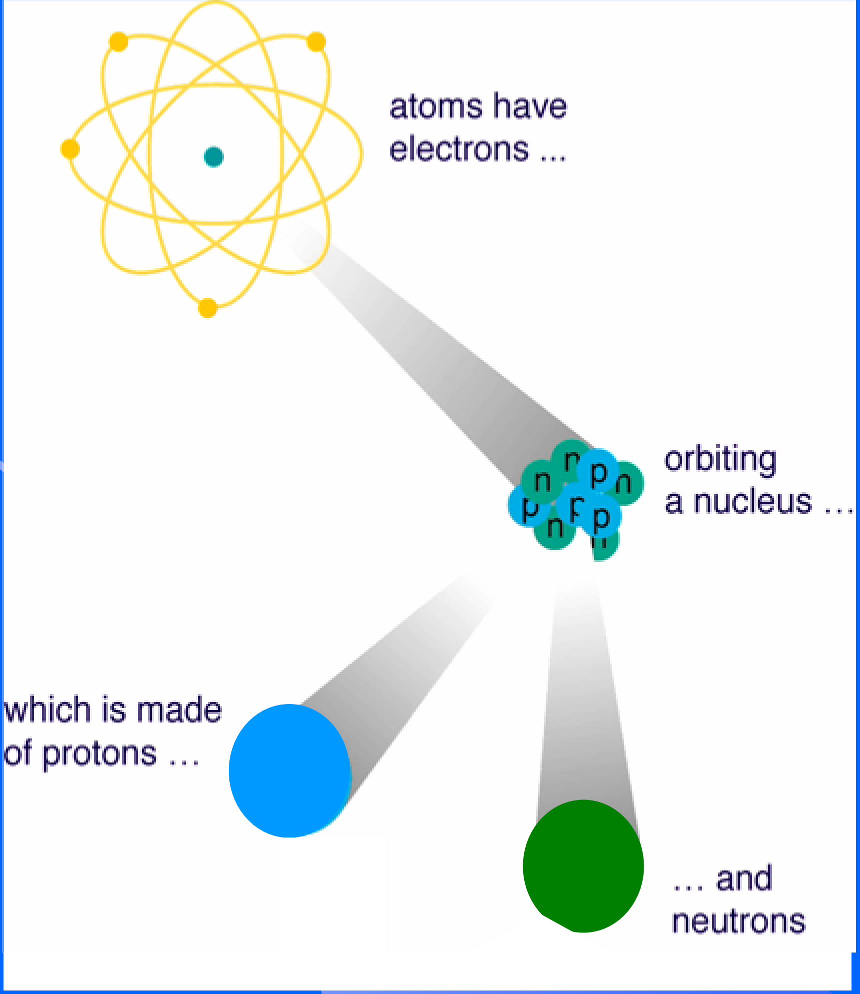
James Chadwick

(1891 – 1974)

Student of

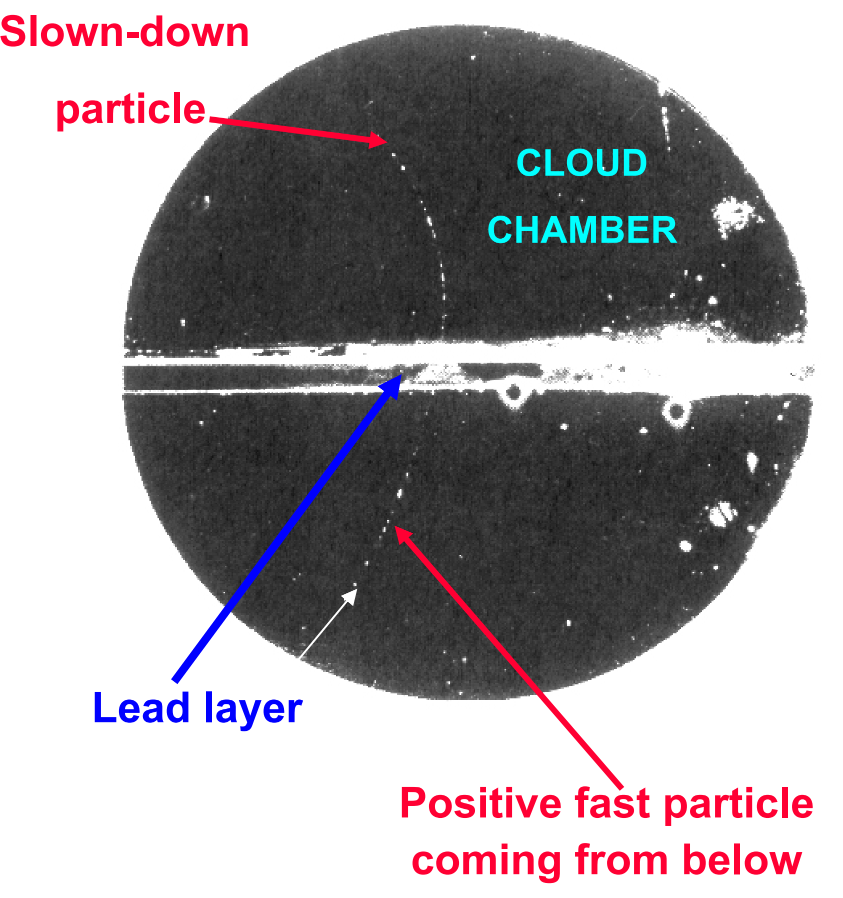
Ernest Rutherford

1932



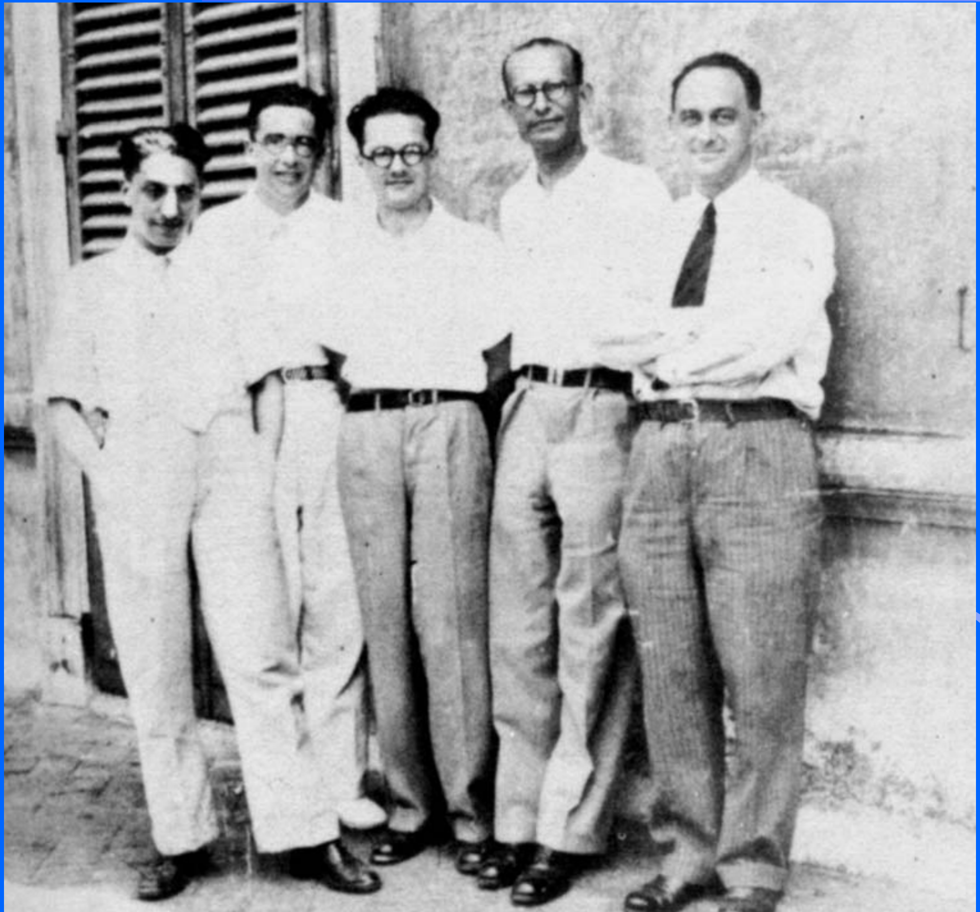
Matter and antimatter...

1932 – discovery of antimatter: the positron



Carl D. Anderson - Caltech

Discovery of the effectiveness of slow neutrons

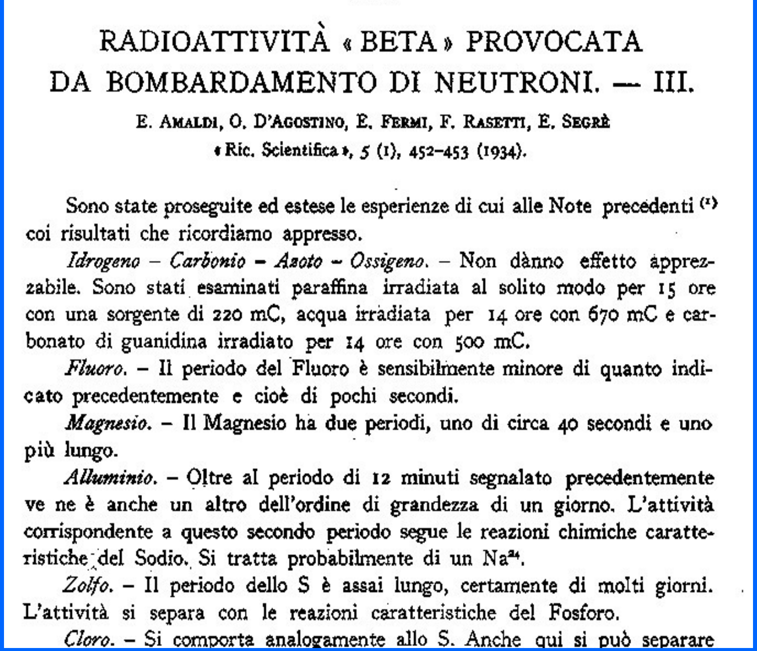


O. D'Agostino E. Segrè E. Amaldi F. Rasetti E. Fermi

1934

First radioisotope of Iodine

among fifty new artificial species



RADIOATTIVITÀ « BETA » PROVOCATA
DA BOMBARDAMENTO DI NEUTRONI. — III.

E. Amaldi, O. D'Agostino, E. Fermi, F. Rasetti, E. Segrè
« Ric. Scientifica », 5 (1), 452–453 (1934).

Sono state proseguite ed estese le esperienze di cui alle Note precedenti (1) coi risultati che ricordiamo appresso.

Idrogeno – *Carbonio* – *Azoto* – *Ossigeno*. – Non dànno effetto apprezzabile. Sono stati esaminati paraffina irradiata al solito modo per 15 ore con una sorgente di 220 mC, acqua irradiata per 14 ore con 670 mC e carbonato di guanidina irradiato per 14 ore con 500 mC.

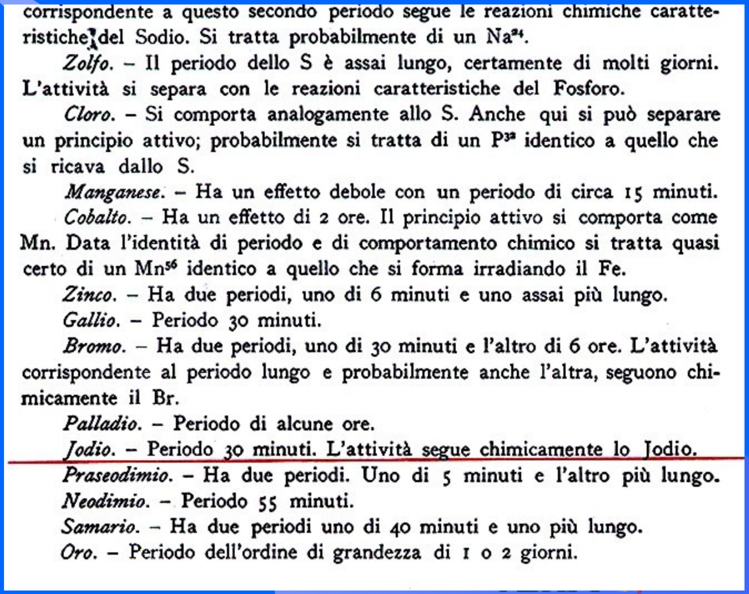
Fluoro. – Il periodo del Fluoro è sensibilmente minore di quanto indicato precedentemente e cioè di pochi secondi.

Magnesio. – Il Magnesio ha due periodi, uno di circa 40 secondi e uno più lungo.

Alluminio. – Oltre al periodo di 12 minuti segnalato precedentemente ve ne è anche un altro dell'ordine di grandezza di un giorno. L'attività corrispondente a questo secondo periodo segue le reazioni chimiche caratteristiche del Sodio. Si tratta probabilmente di un Na^{24}.

Zolfo. – Il periodo dello S è assai lungo, certamente di molti giorni. L'attività si separa con le reazioni caratteristiche del Fosforo.

Cloro. – Si comporta analogamente allo S. Anche qui si può separare



corrispondente a questo secondo periodo segue le reazioni chimiche caratteristiche del Sodio. Si tratta probabilmente di un Na^{24}.

Zolfo. – Il periodo dello S è assai lungo, certamente di molti giorni. L'attività si separa con le reazioni caratteristiche del Fosforo.

Cloro. – Si comporta analogamente allo S. Anche qui si può separare
un principio attivo; probabilmente si tratta di un P^{32} identico a quello che si ricava dallo S.

Manganese. – Ha un effetto debole con un periodo di circa 15 minuti.

Cobalto. – Ha un effetto di 2 ore. Il principio attivo si comporta come Mn. Data l'identità di periodo e di comportamento chimico si tratta quasi certo di un Mn^{56} identico a quello che si forma irradiando il Fe.

Zinco. – Ha due periodi, uno di 6 minuti e uno assai più lungo.

Gallio. – Periodo 30 minuti.

Bromo. – Ha due periodi, uno di 30 minuti e l'altro di 6 ore. L'attività corrispondente al periodo lungo e probabilmente anche l'altra, seguono chimicamente il Br.

Palladio. – Periodo di alcune ore.

Jodio. – Periodo 30 minuti. L'attività segue chimicamente lo Jodio.

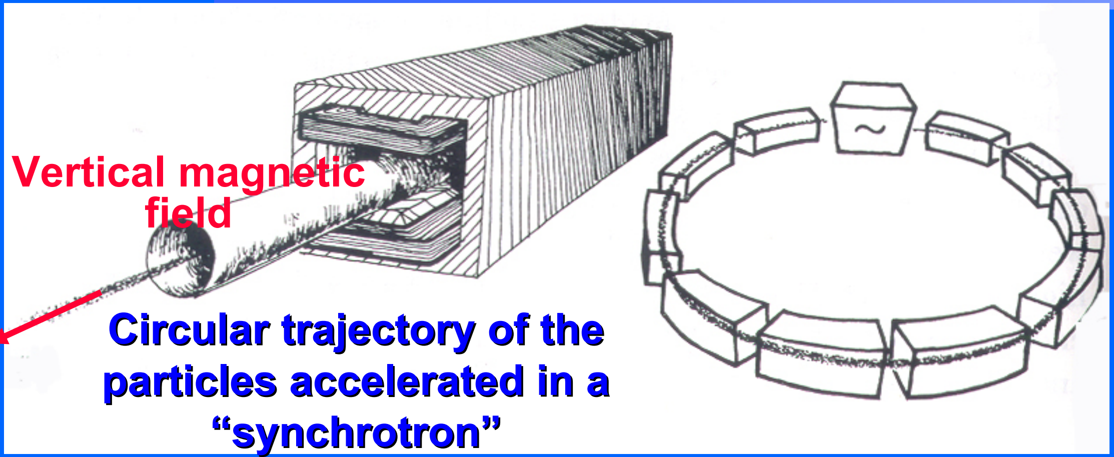
Praseodimio. – Ha due periodi. Uno di 5 minuti e l'altro più lungo.

Neodimio. – Periodo 55 minuti.

Samario. – Ha due periodi uno di 40 minuti e uno più lungo.

Oro. – Periodo dell'ordine di grandezza di 1 o 2 giorni.

Four other crucial years: the synchrotron



Vertical magnetic field

Circular trajectory of the particles accelerated in a "synchrotron"

1944

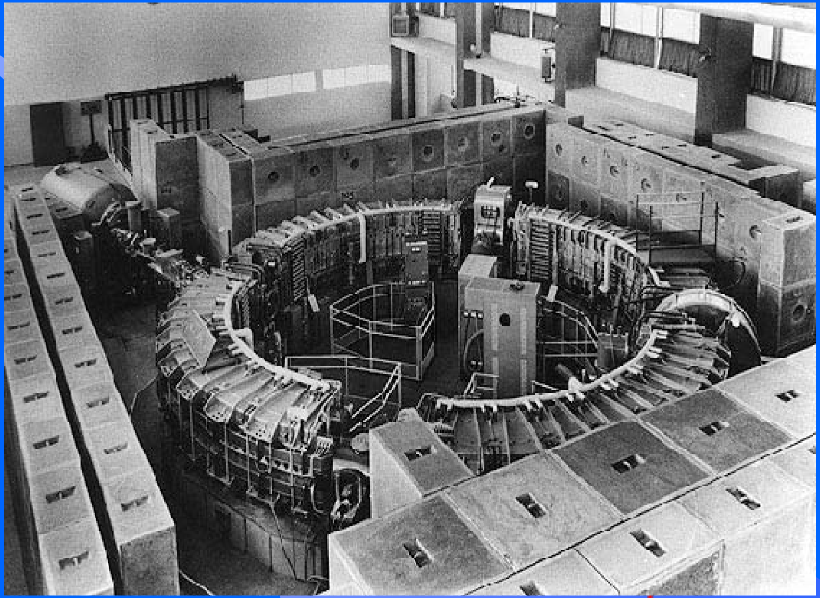
principle of phase stability

1 GeV electron synchrotron

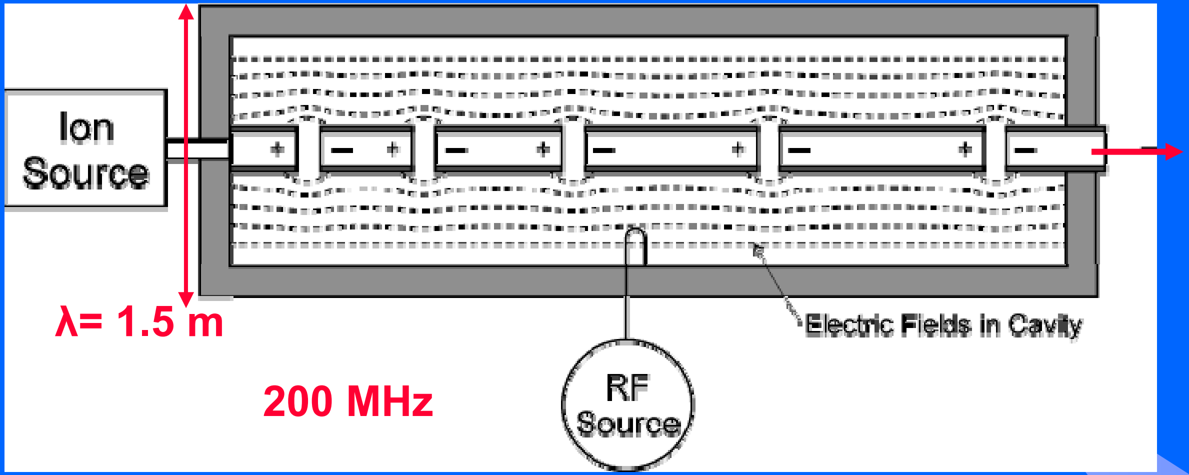
Frascati - INFN - 1959

Veksler visits McMillan

1959 - Berkeley



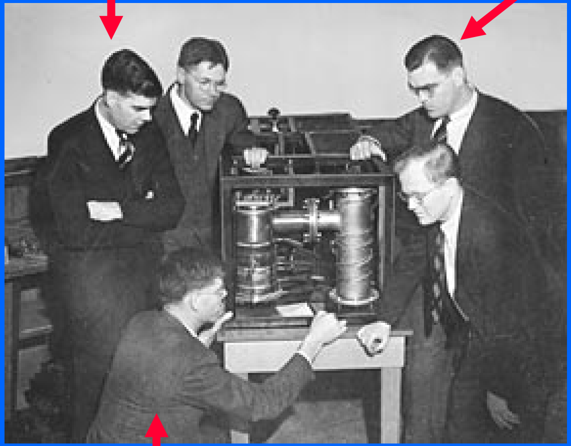
Linacs for protons and ions



L. Alvarez

1946 – Drift Tube Linac

The electron linac



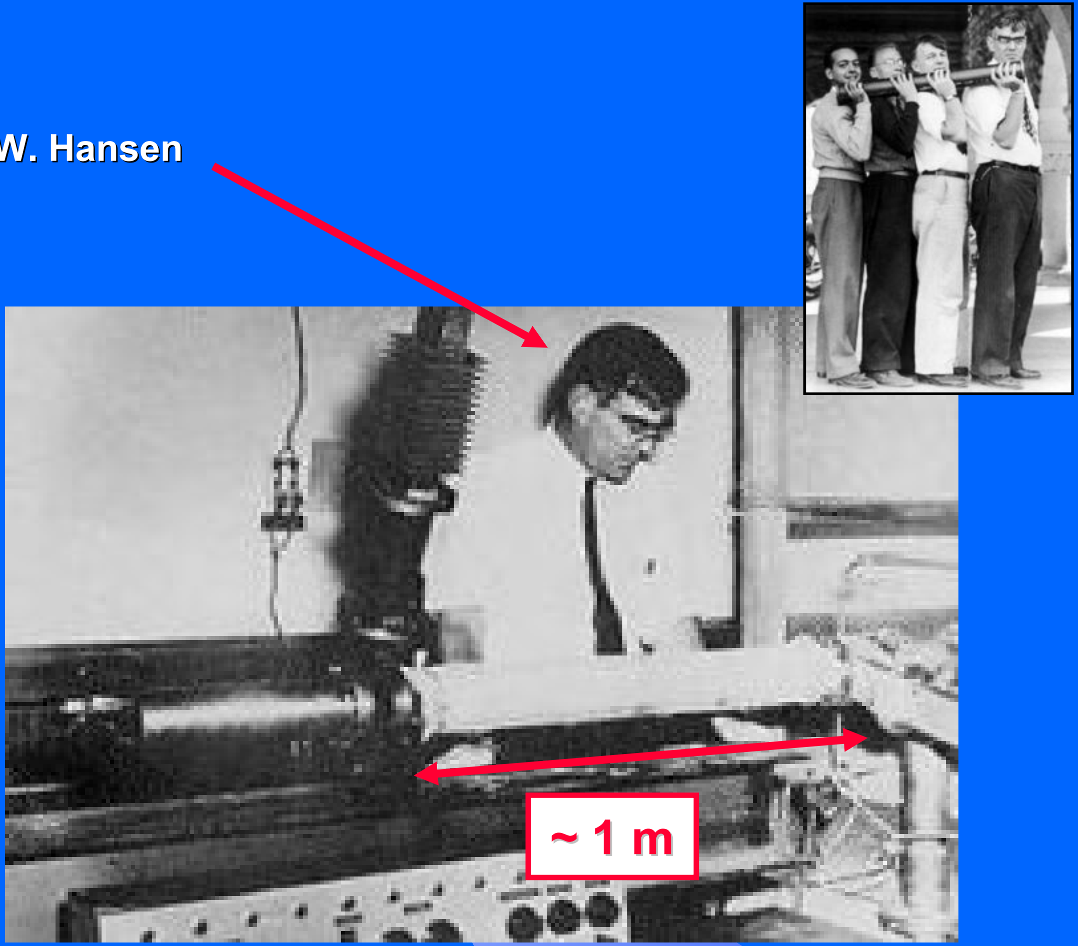
Sigurd Varian

William W. Hansen

Russell Varian

1939

Invention of the klystron



1947
first linac for electrons
4.5 MeV and 3 GHz

The beginning of CERN 50 years ago

Isidor Rabi

UNESCO talk in 1950

1952: Pierre Auger **Edoardo Amaldi**

Secretary General

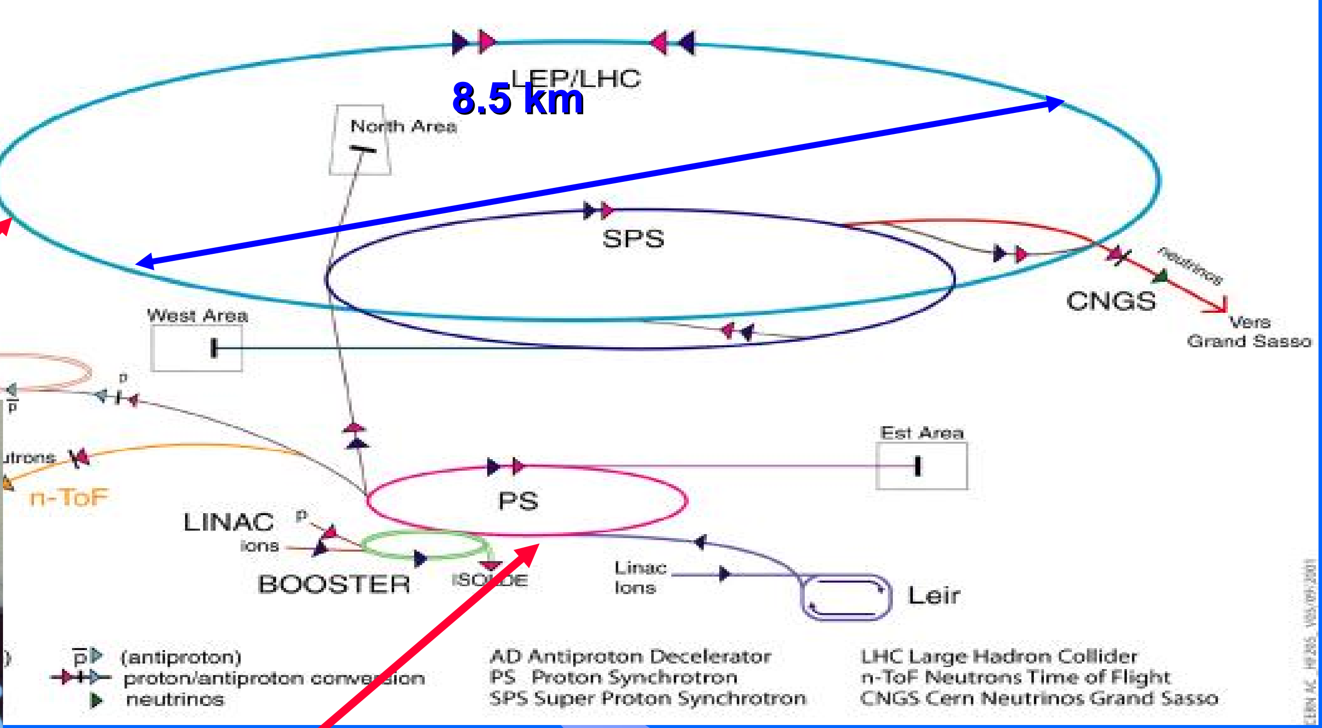
1952-54

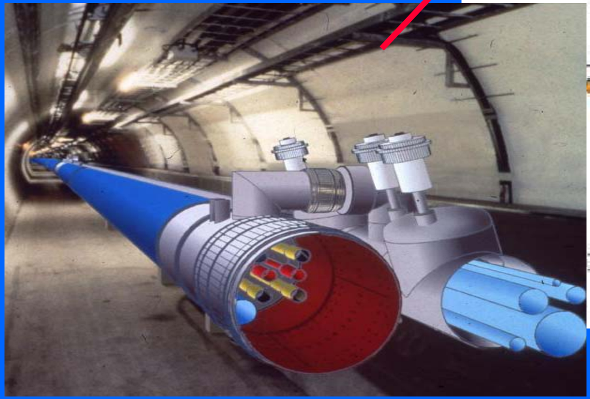
at the meeting that created the provisional CERN

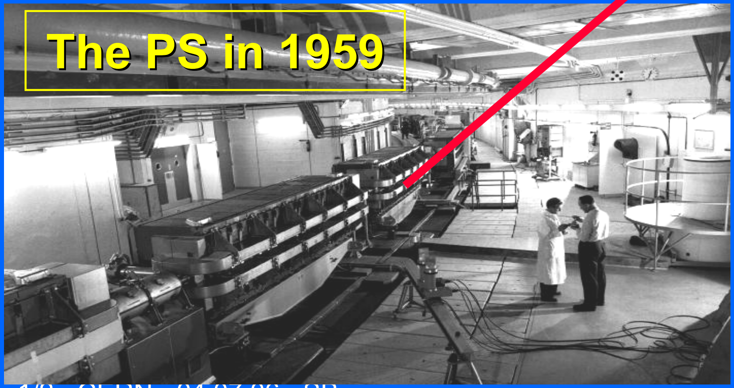
At CERN we have linacs and strong-focusing synchrotrons

Large Hadron Collider
(7+7) TeV

2007







The PS in 1959

In 1952 the "strong-focusing" method

invented at BNL (USA)

was chosen for the CERN PS

Accelerators running in the world

CATEGORY OF ACCELERATORS	NUMBER IN USE (*)	
High Energy acc. (E >1GeV)	~120	
Synchrotron radiation sources	>100	
Medical radioisotope production	~200	9000
Radiotherapy accelerators	> 7500	
Research acc. included biomedical research	~1000	
Acc. for industrial processing and research	~1500	
Ion implanters, surface modification	>7000	
TOTAL	> 17500	

(*) W. Maciszewski and W. Scharf: Int. J. of Radiation Oncology, 2004

- **About half are used for bio-medical applications**

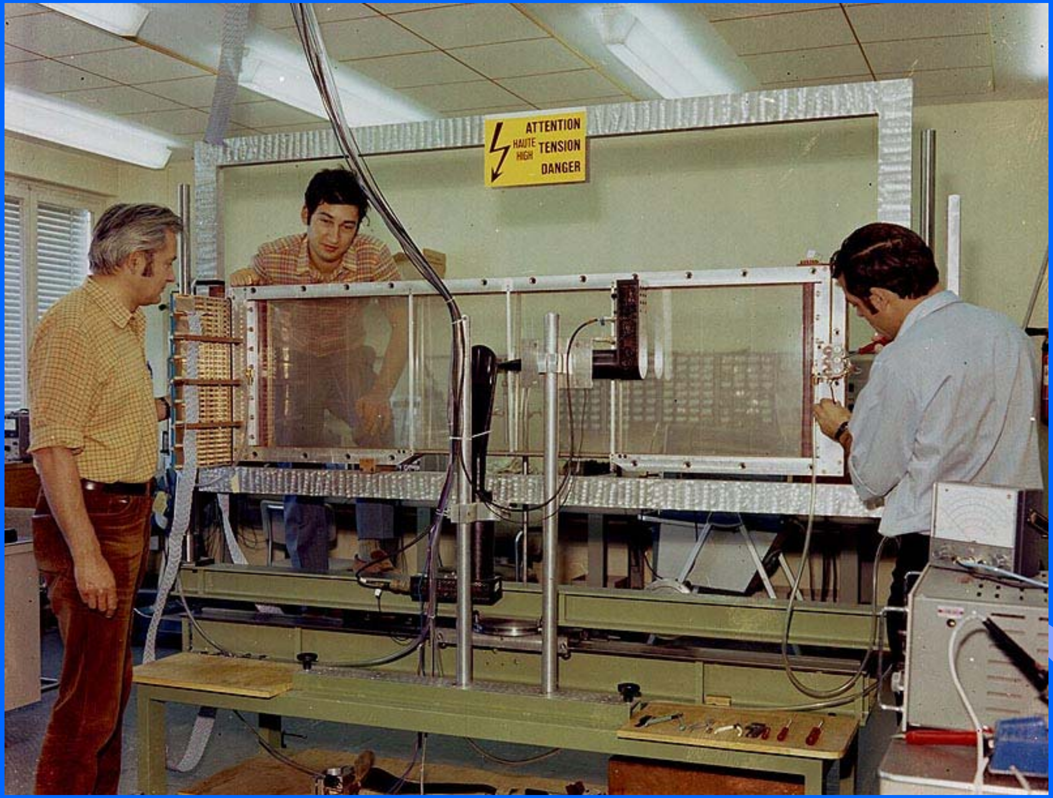
Particle detectors

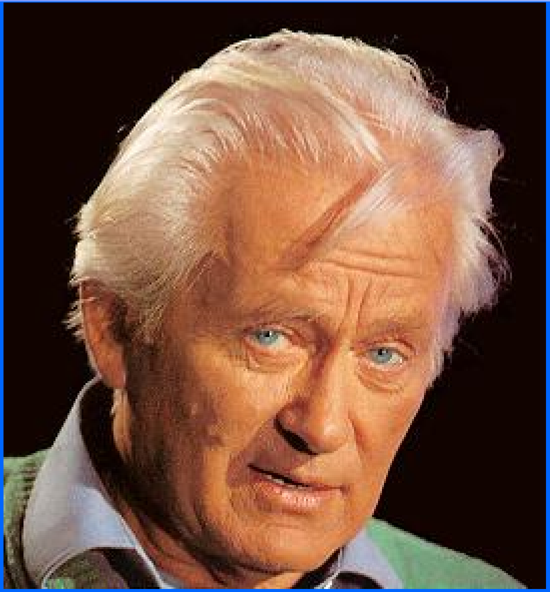
- They are the "eyes" of particle physicists

- A very impressive development in the last 100 years
  - From the Geiger counter to ATLAS and CMS !

- Crucial in many medical applications

One example: the multiwire proportional chamber





Georges Charpak, CERN physicist since 1959,

Nober prize 1992

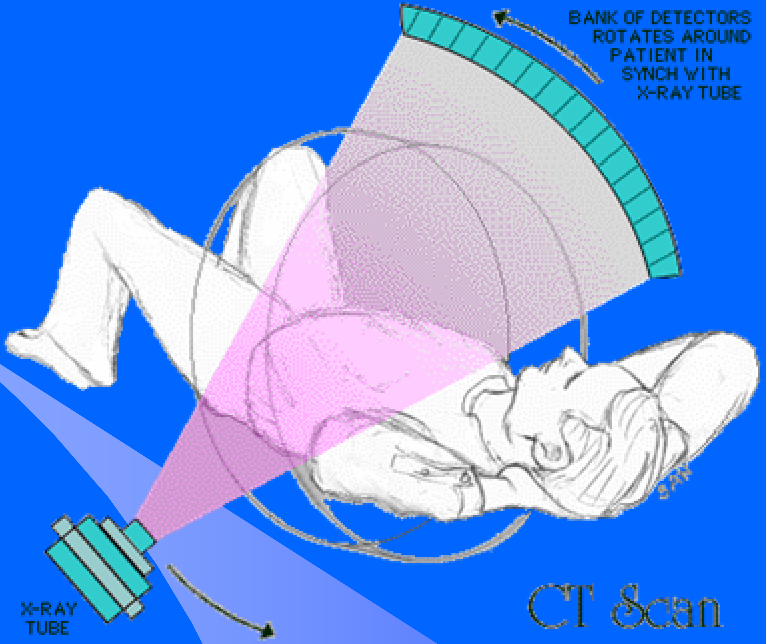
- Invented in 1968, launched the era of fully electronic particle detection
- Used for biological research and could eventually replace photographic recording in applied radio-biology
- The increased recording speeds translate into faster scanning and lower body doses in medical diagnostic tools based on radiation or particle beams

Applications in medical diagnostics

Diagnostics is essential!

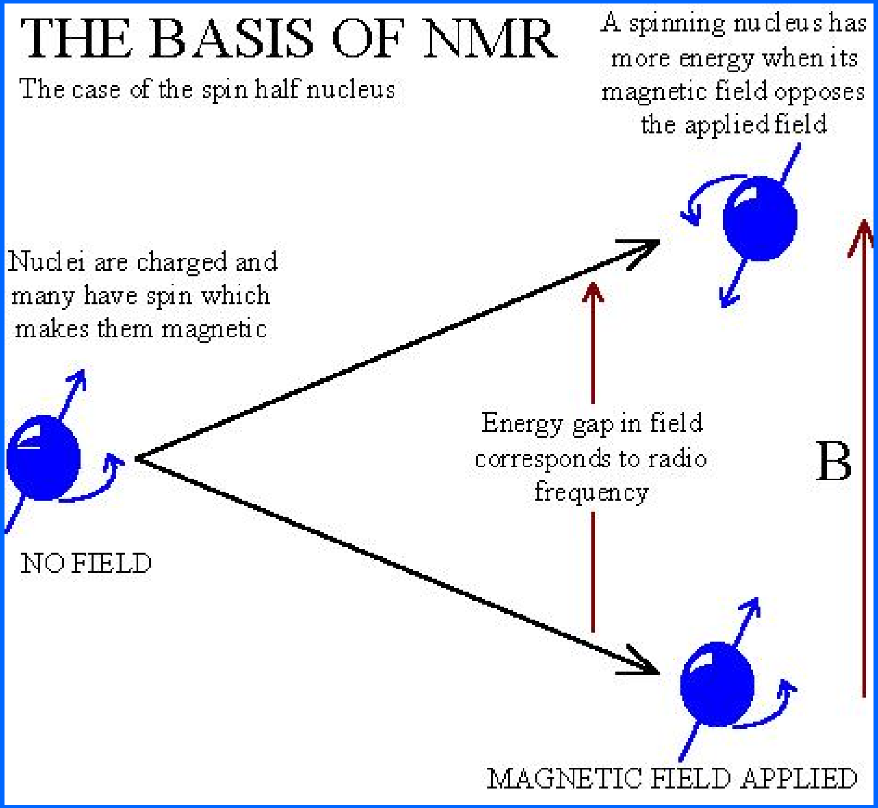
Abdomen

Computer Tomography (CT)



- **Measurement of the electron density**
- **Information on the morphology**

Nuclear Magnetic Resonance

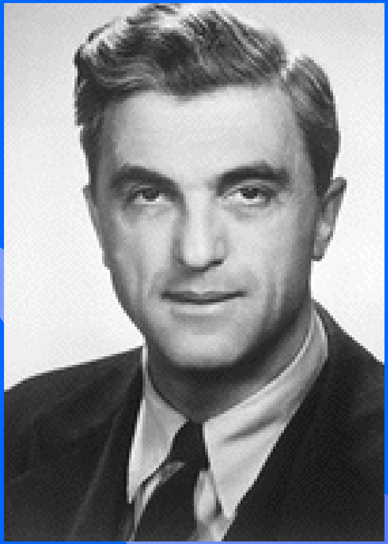


1938-1945

Felix Bloch and Edward Purcell

discover and study

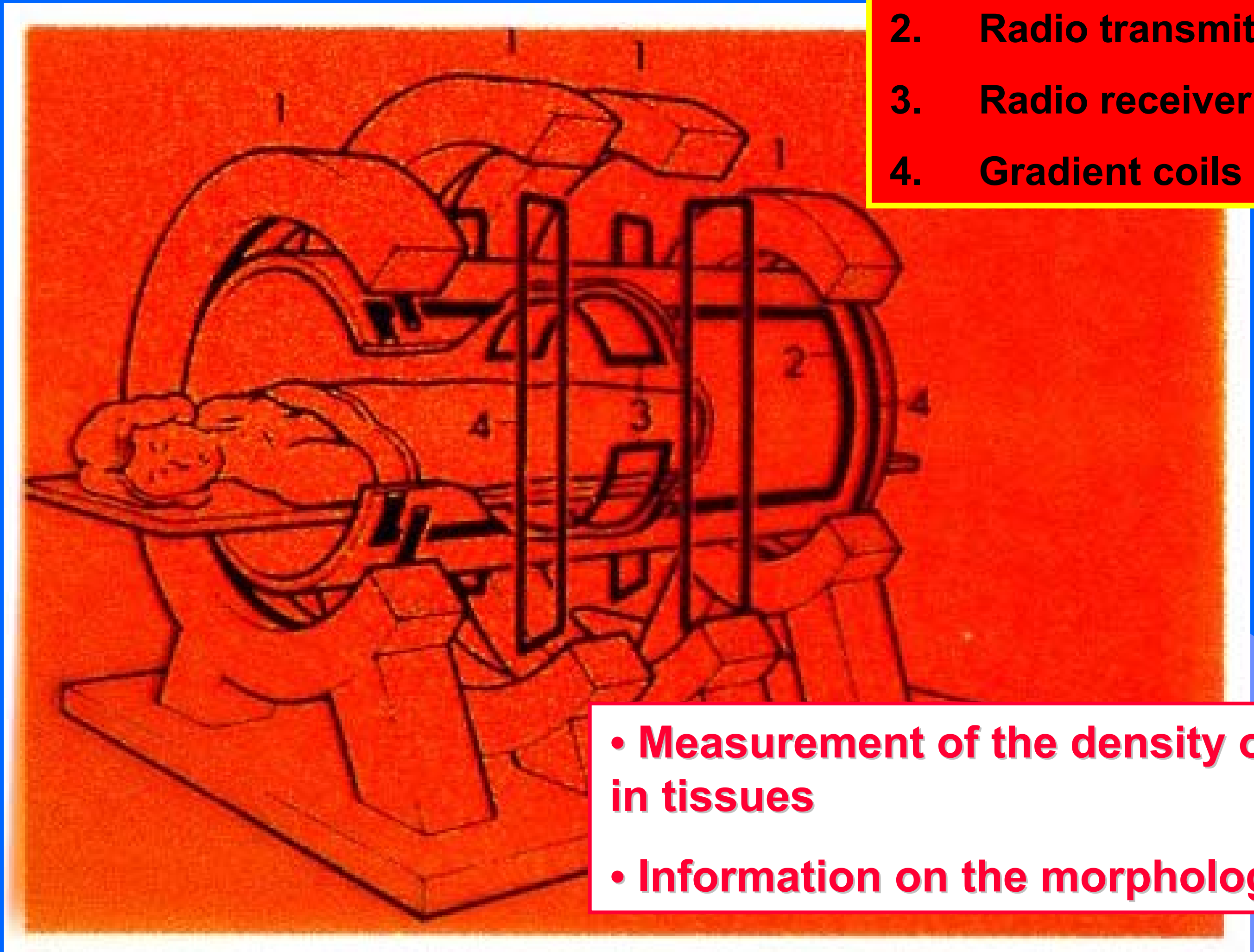
NMR



In 1954 Felix Bloch became

the first CERN Director General

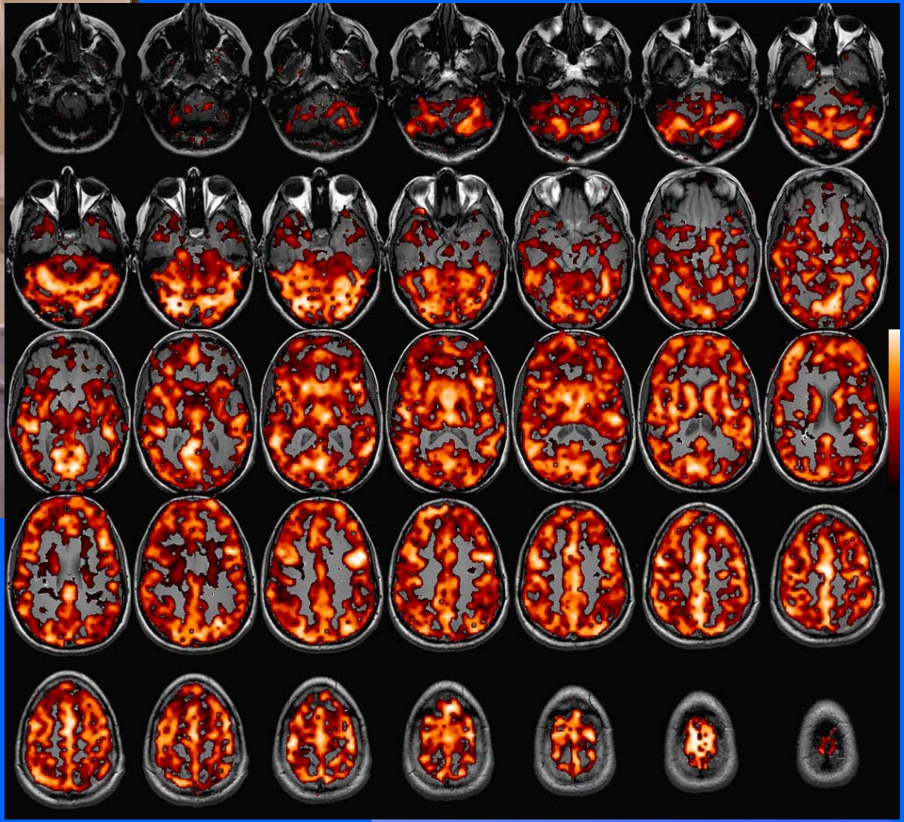
MRI = Magnetic Resonance Imaging



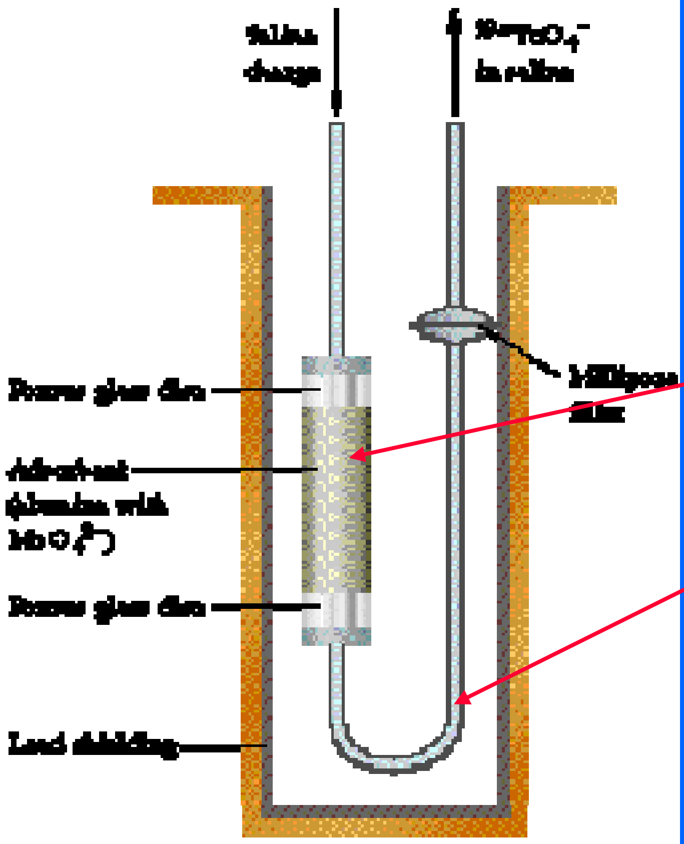
1. Main magnet (0.5-1 T)
2. Radio transmitter coil
3. Radio receiver coil
4. Gradient coils

- Measurement of the density of the protons (water) in tissues
- Information on the morphology

A MRI scanner



SPECT = Single Photon Emission Computer Tomography

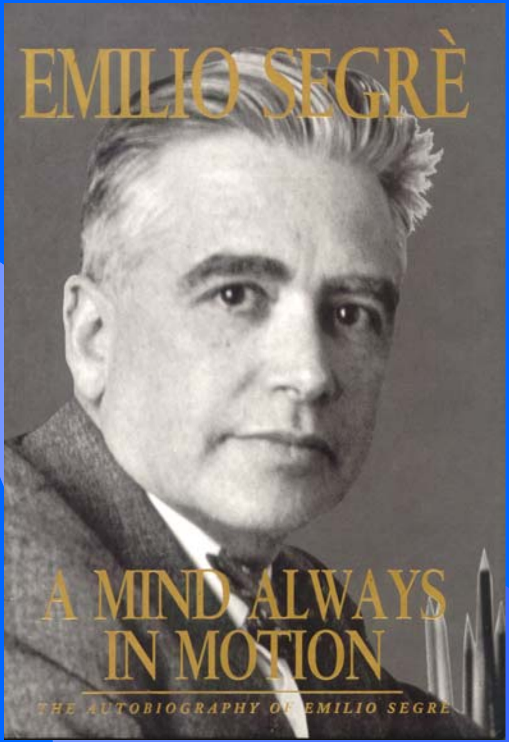


In reactors slow neutrons produce

$^{98}Mo + n = {}^{99}Mo + \gamma$

^{99}Mo (66 h) = ^{99m}Tc (6 h) + e^- + $\overline{\nu}$

gamma of 0.14 MeV

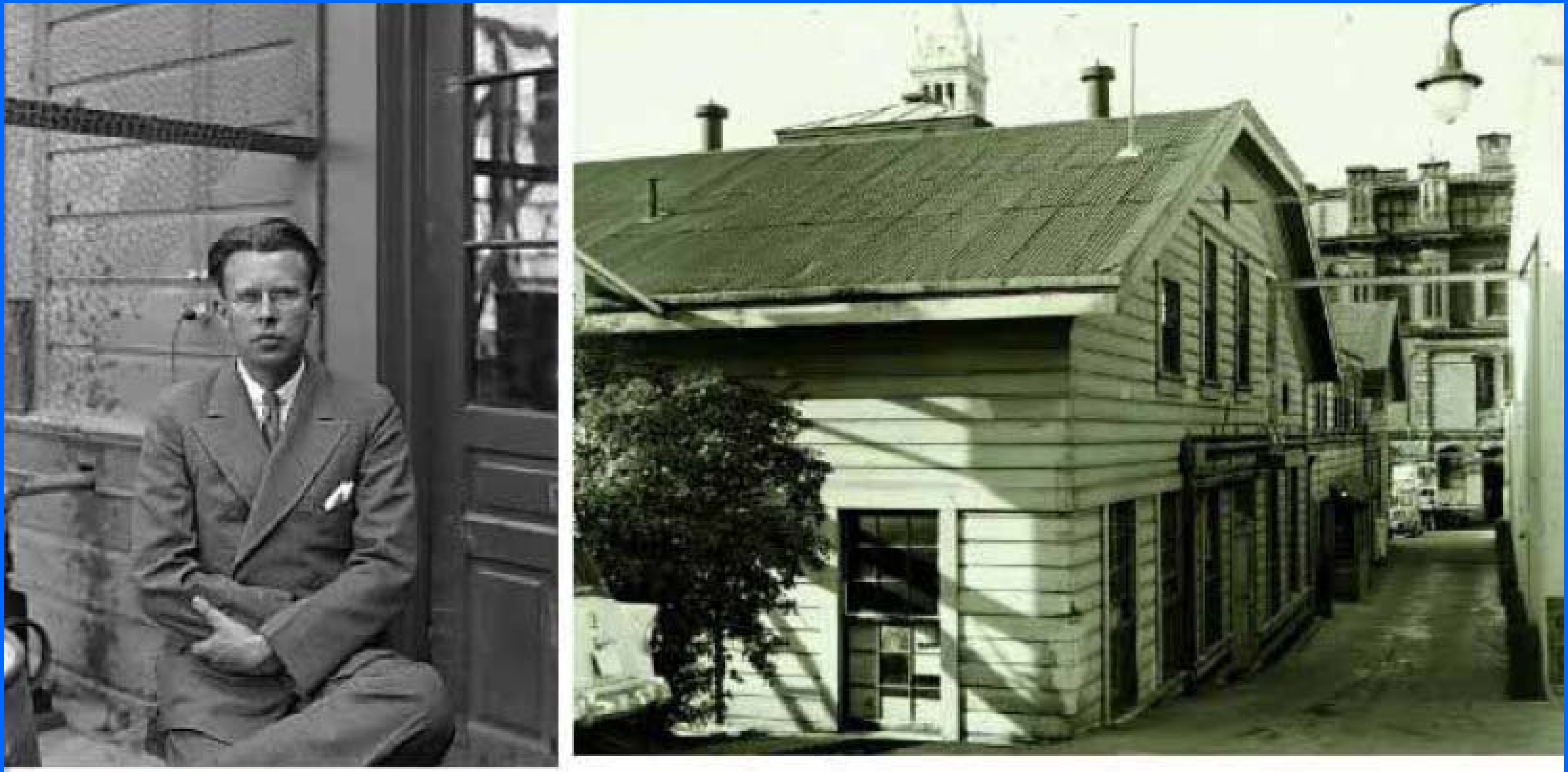


Emilio Segrè

1936: Discovery of technetium

1938: discovery of ^{99m}Tc with E. McMillan

The discovery of technetium



The Rad Lab is officially established within the UC Physics Department with Lawrence as director; in Italy, Segrè examines an "invaluable gift" of material irradiated by the 27-inch cyclotron and discovers the first artificial element, later named technetium.

SPECT scanner

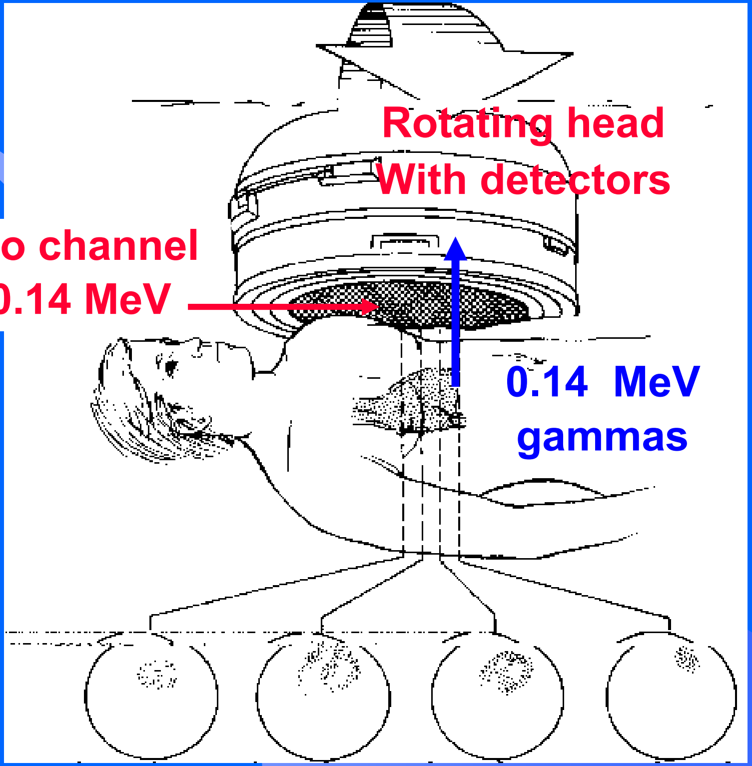
85% of all nuclear medicine examinations use technetium produced by slow neutrons in reactors

… liver

lungs

bones ……

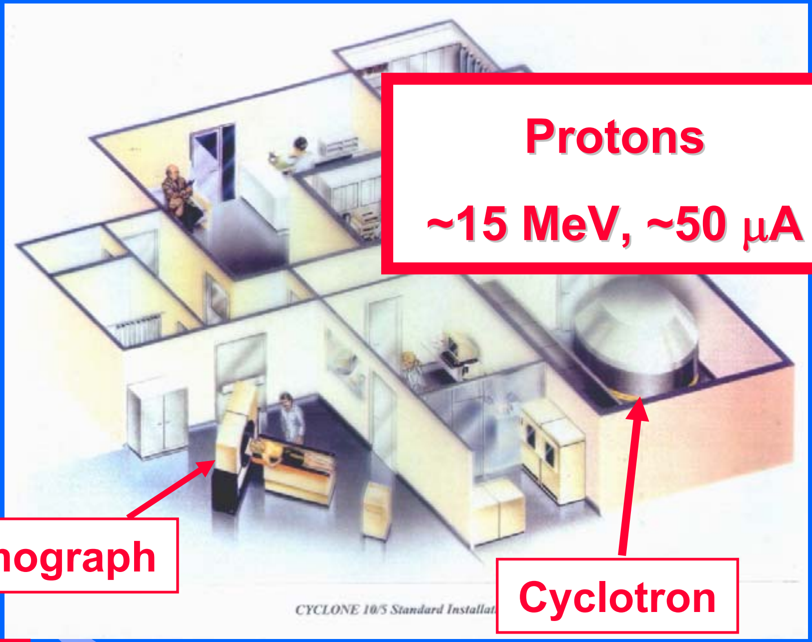
- Measurement of the density the molecules which contain technetium
- Information on morphology and/or metabolism



Lead collimators to channel the gammas of 0.14 MeV

Positron Emission Tomography (PET)

- FDG with ^{18}F is the most used drug (half life 1.6 h)
- Measurement of the density of ^{18}F through back-to-back gamma detection
- Information on the metabolism



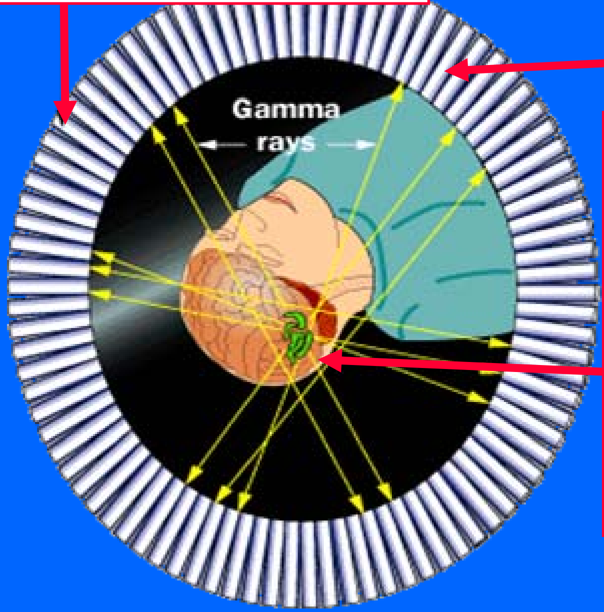
Protons

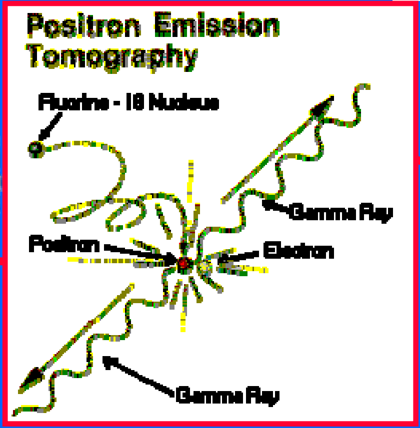
~15 MeV, ~50 µA

PET tomograph

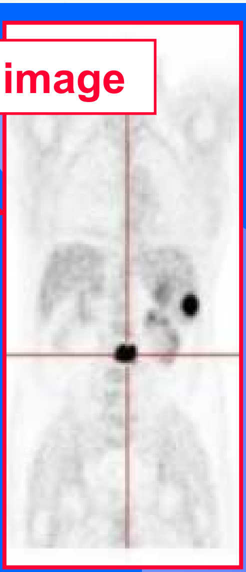
Cyclotron

Gamma ray detectors (Ex. BGO crystals)





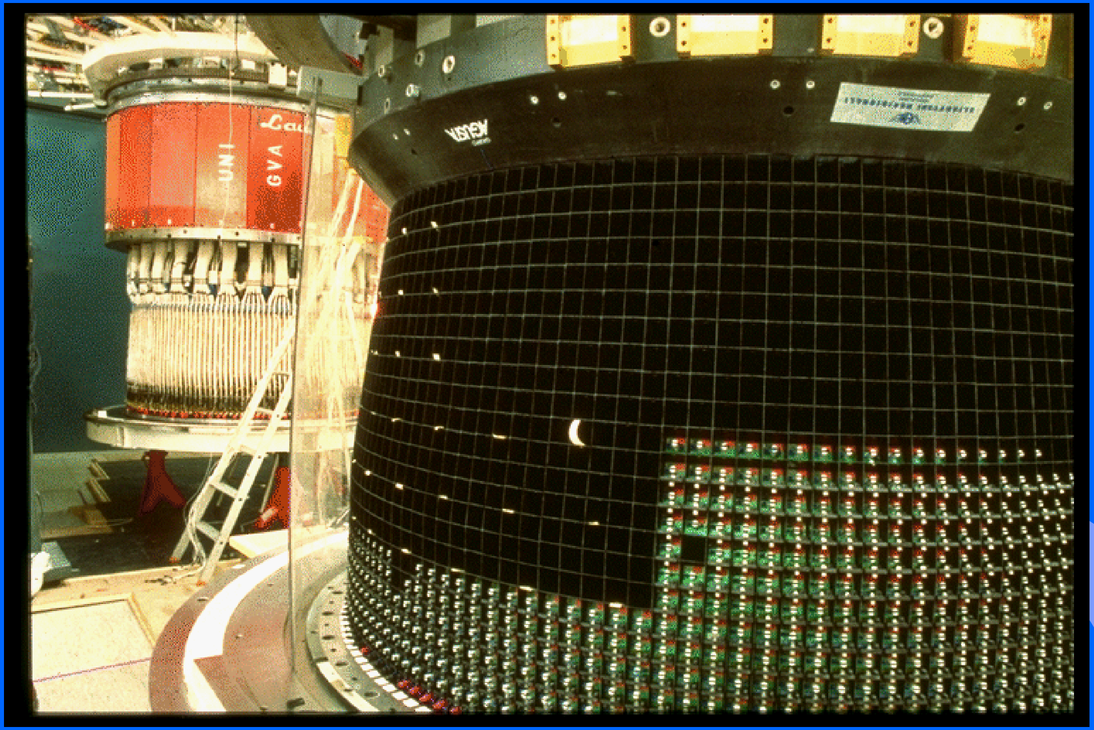
PET image

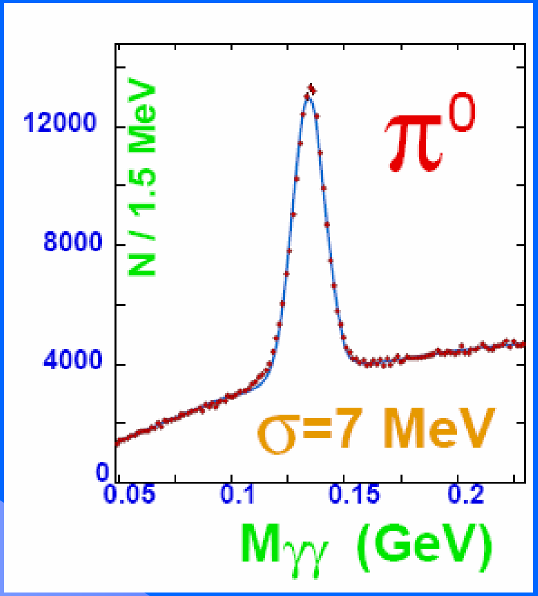


CT-PET

The BGO calorimeter of the L3 experiment at LEP (CERN 1989-2000)

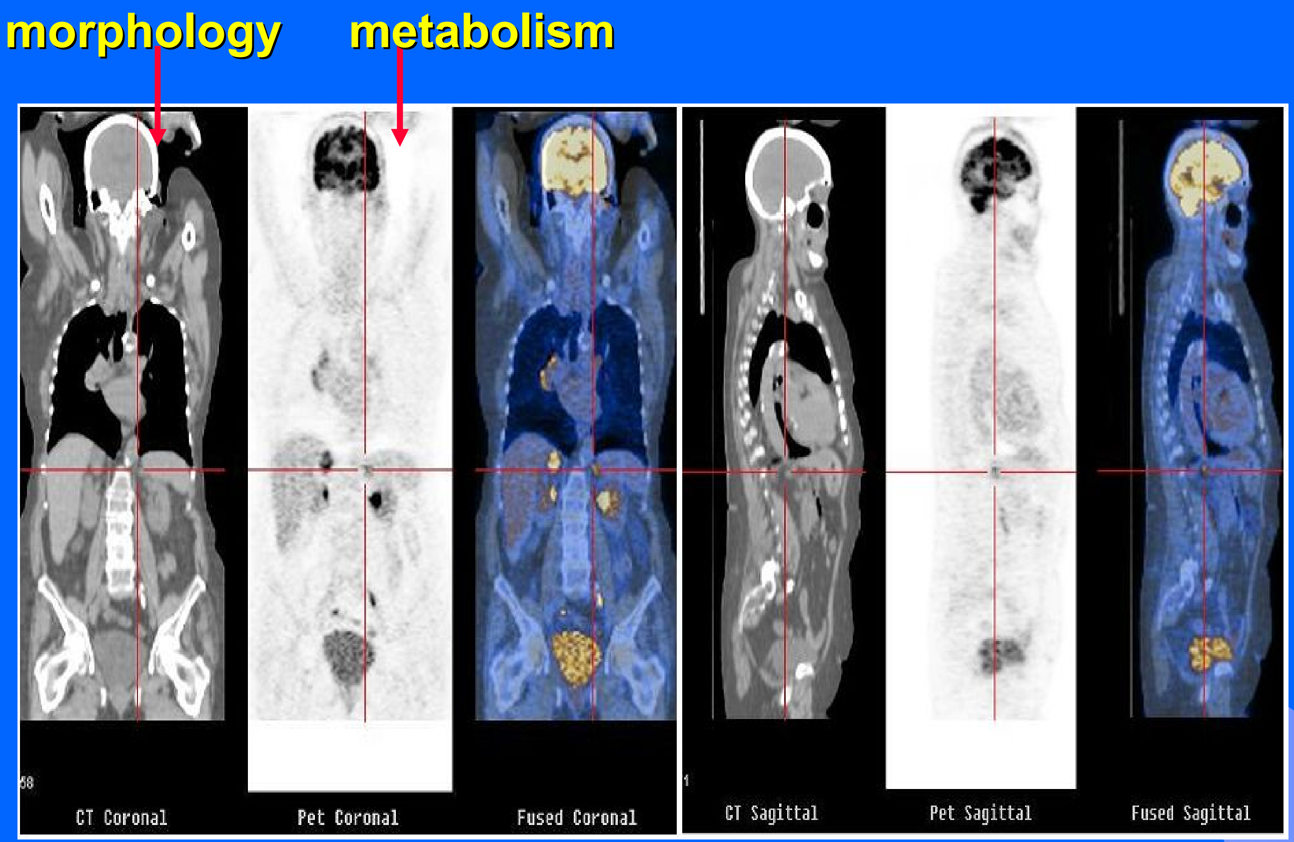
BGO crystals have been developed for detectors in particle physics





- 11000 BGO crystals
- Precise measurement of the energy deposited by the particles
- Almost 4 π coverage

The new diagnostics: CT/PET



David Townsend

CERN: 1970-78

Uni Ginevra

UPSM Pittsburgh

and

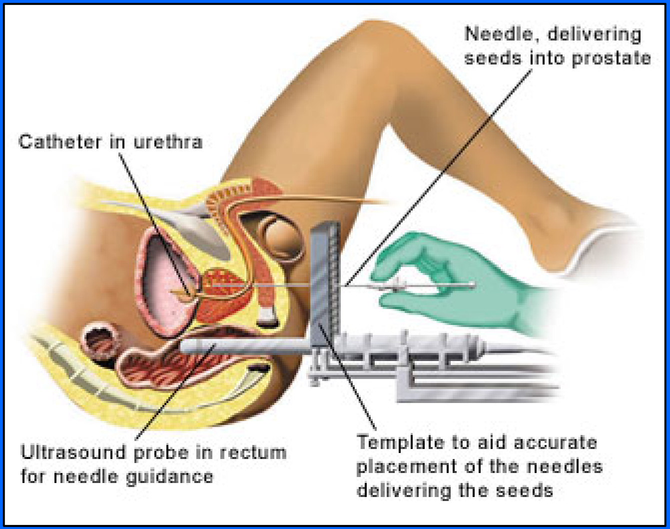
Ronald Nutt

(CTS – CTI)

Applications in conventional cancer radiation therapy

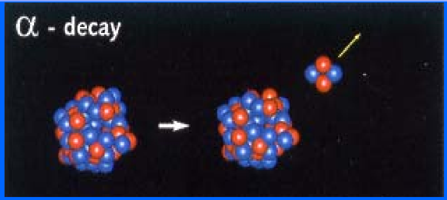
Methods

- Brachitherapy
  - Insertion of radiation sources in the body



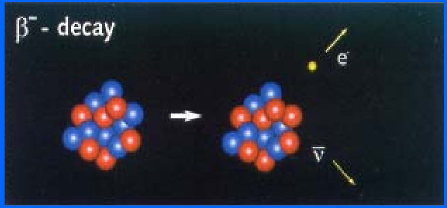
- Teletherapy
  - Bombardment of the tumour tissues with radiation coming from outside the body of the patient
- Radio immunotherapy
  - The radiation is brought by a radioisotope attached to a specifically selective vector

Radioactivity in cancer therapy



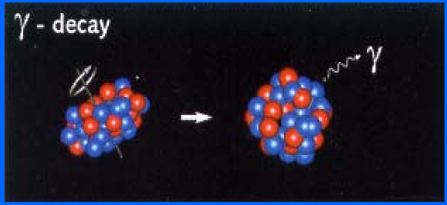
targeted radioimmunotherapy

α particles from Bismuth-213 for leukaemia



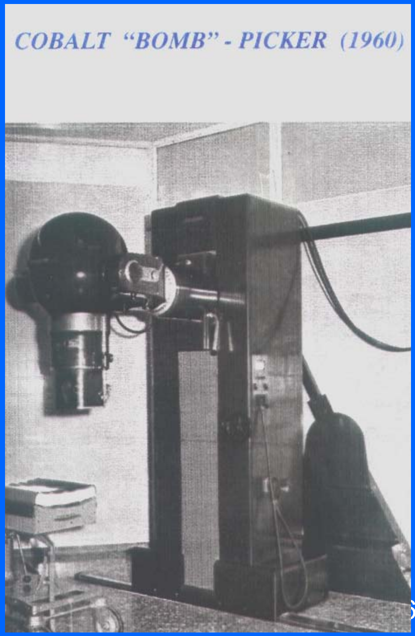
β particles from Yttrium-90 for glioblastoma

teletherapy



gammas from Cobalt-60 for deep tumours

COBALT "BOMB" - PICKER (1960)



Cobalt source 2000

Cobalt-60

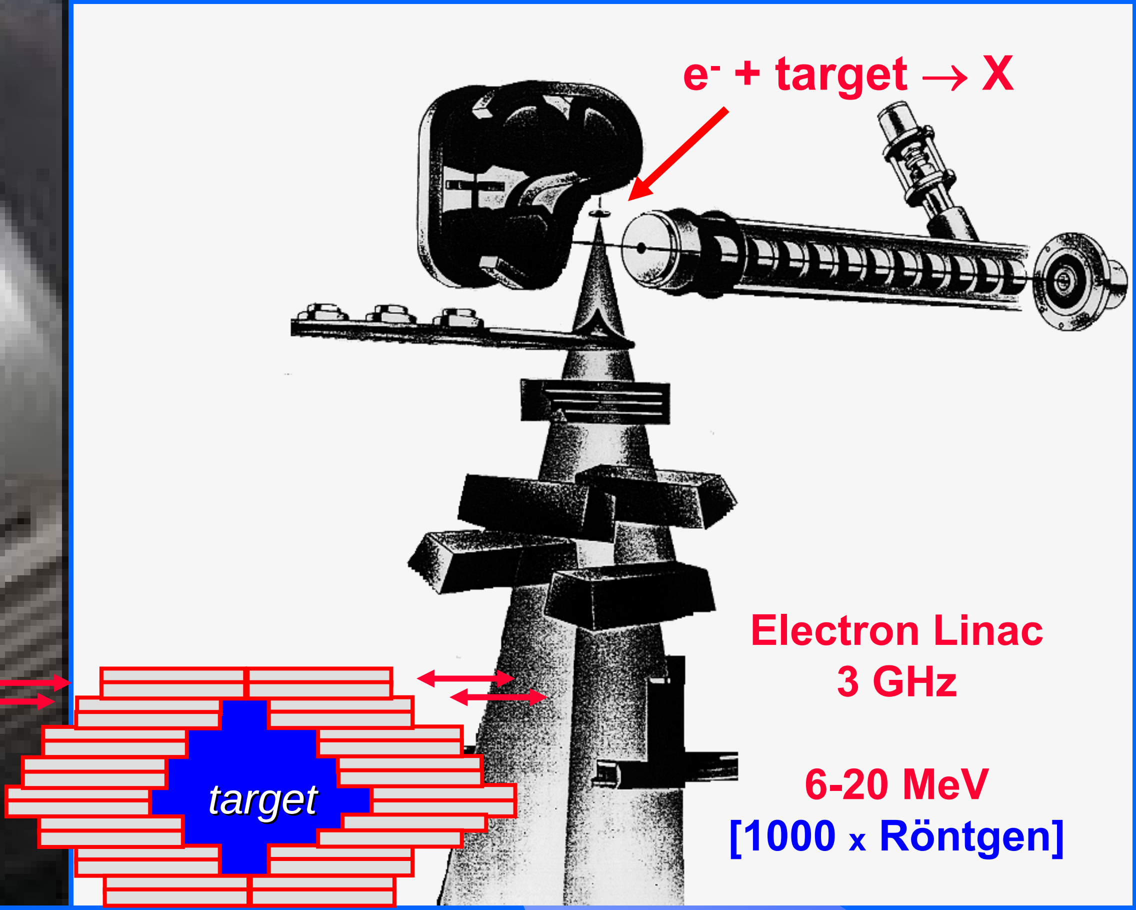
(1 MeV gammas)

is produced in reactors

by <u>slow neutrons</u>

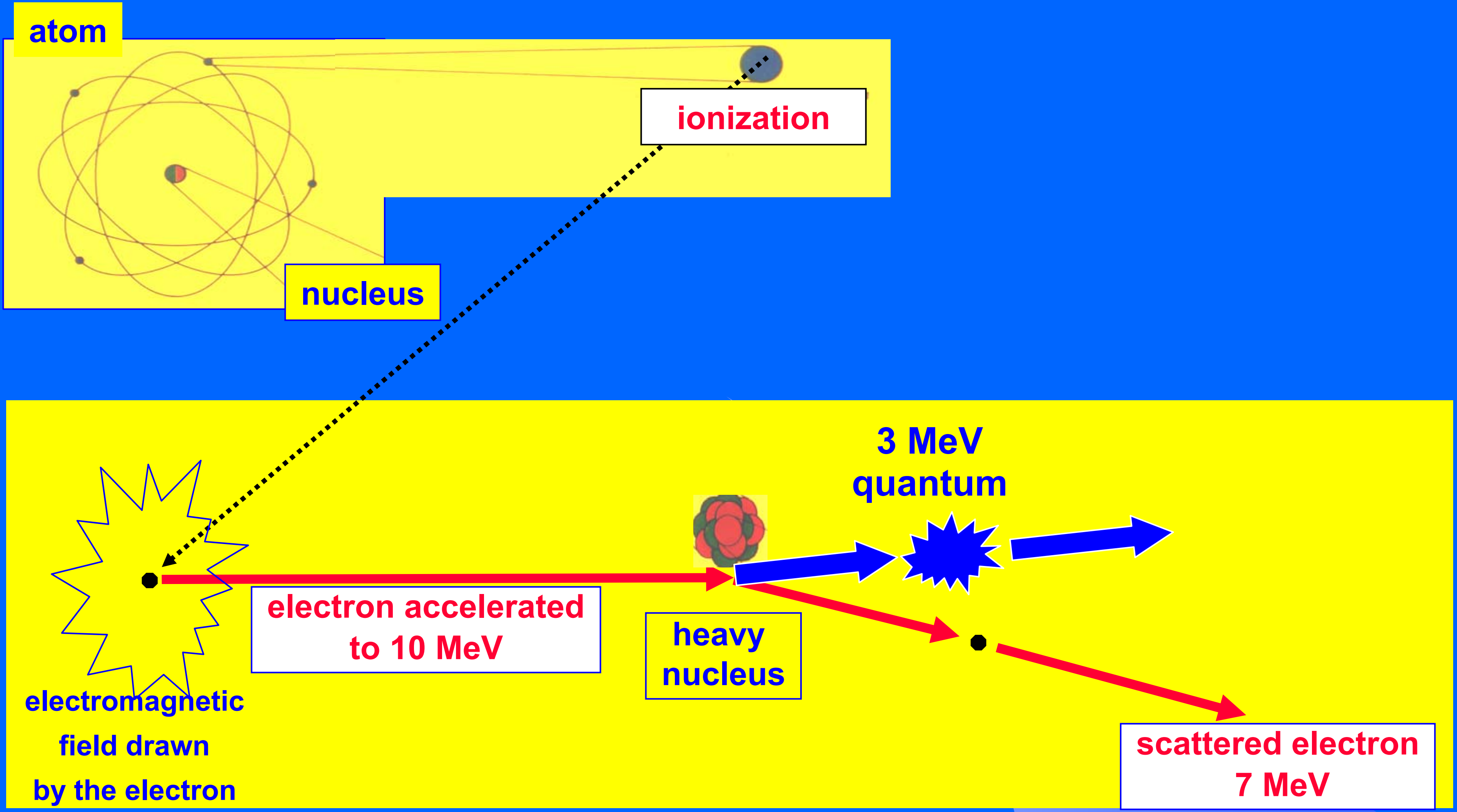
TERA

Teletherapy with X-rays



- Electron linacs to produce gamma rays (called X-rays by medical doctors)
- 20'000 patients/year every 10 million inhabitants

Production of X "quanta"



atom

nucleus

ionization

3 MeV quantum

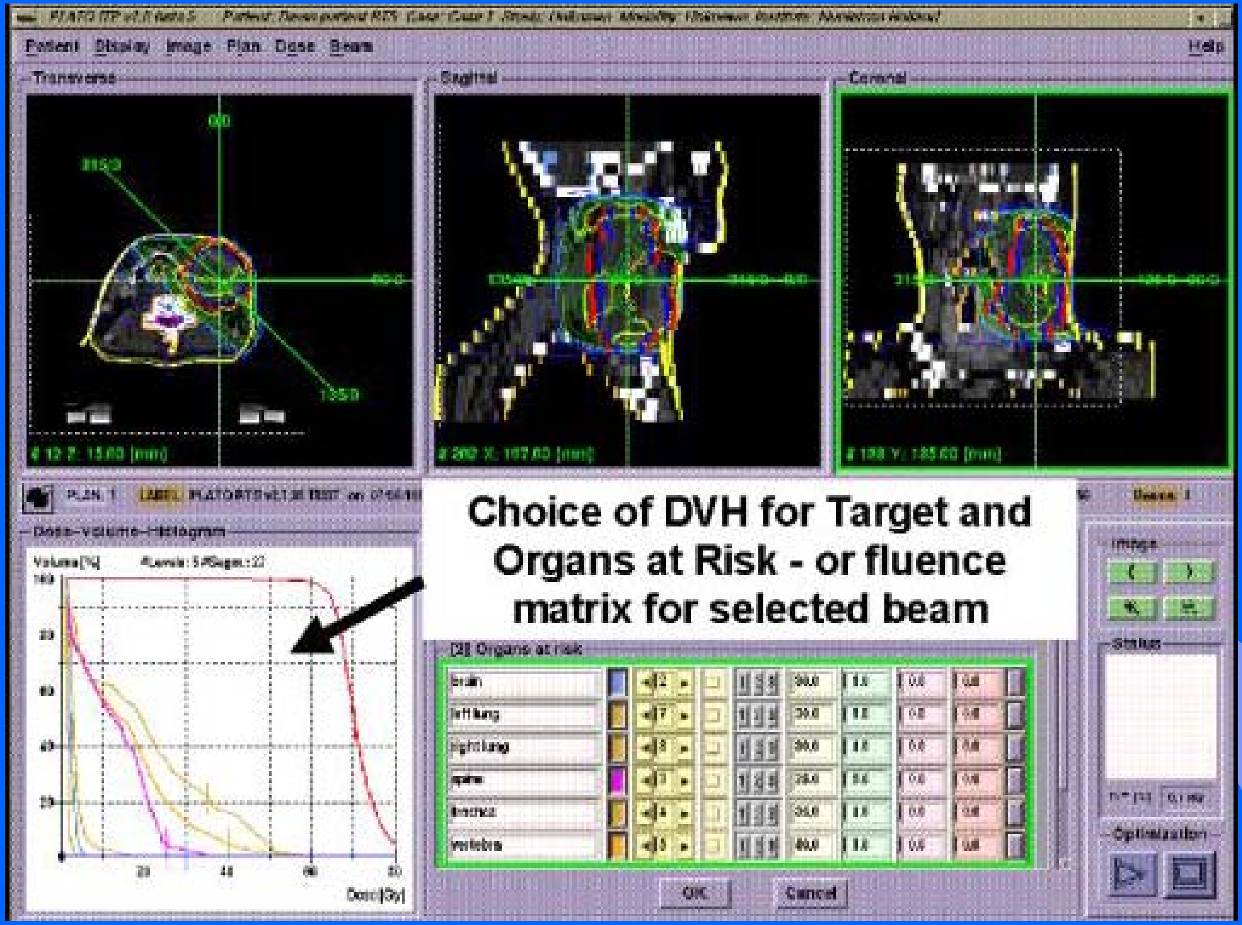
electron accelerated to 10 MeV

heavy nucleus

scattered electron 7 MeV

electromagnetic field drawn by the electron

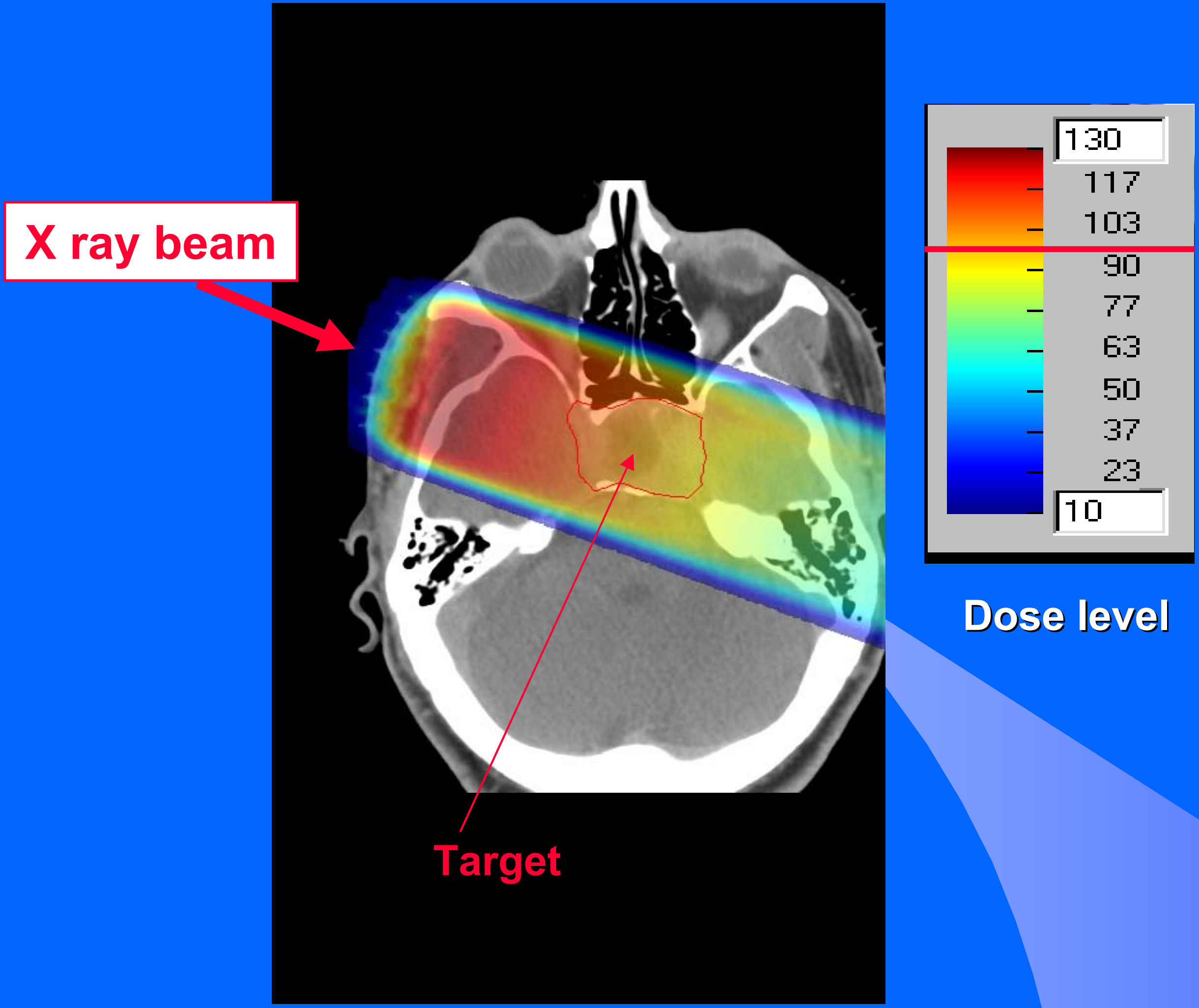
Computerized Treatment Planning System (TPS)



Choice of DVH for Target and Organs at Risk - or fluence matrix for selected beam

- TC scan data are used to
  - design the volume to be irradiated
  - choose the radiation fields
  - calculate the doses to the target and to healthy tissues
- The dose is given in about 30-40 fractions of about 2 Gray

The problem of X ray therapy

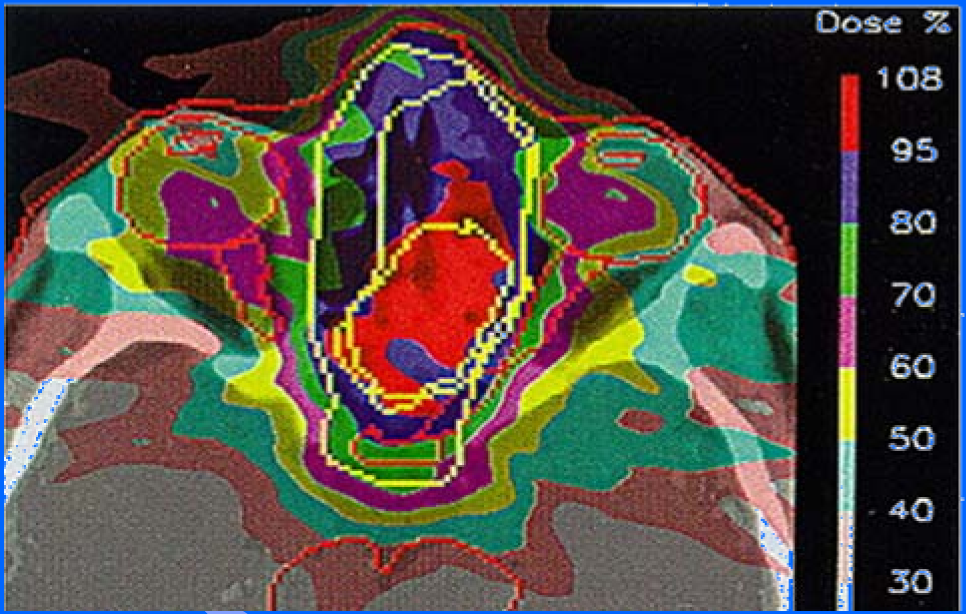


Dose level

The problem of X ray therapy

Solution:

- **Use of many crossed beams**
- **Intensity Modulation Radiation Therapy (IMRT)**

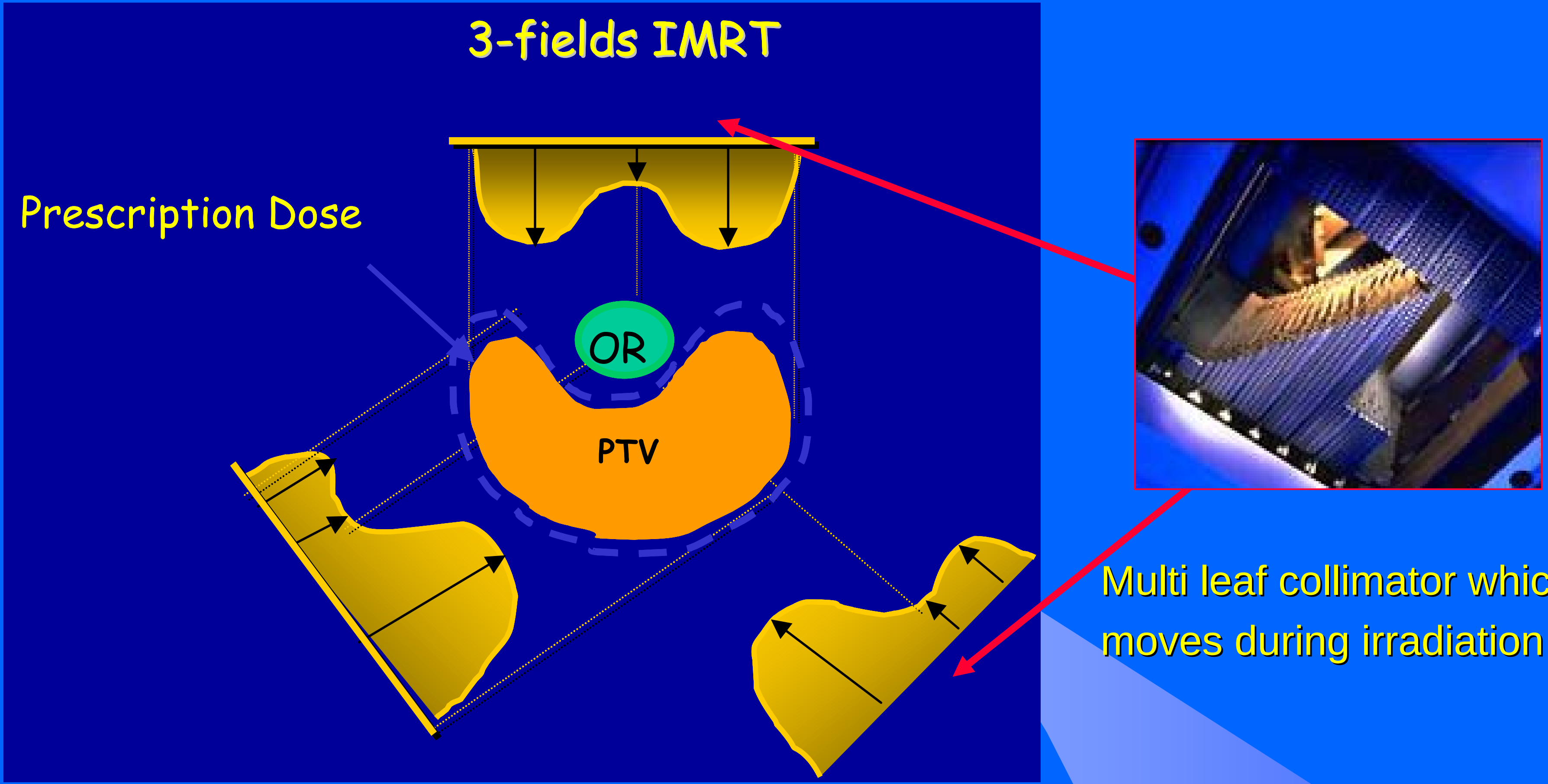


9 different photon beams

The limit is due to the dose given to the healthy tissues!

Especially near organs at risk (OAR)

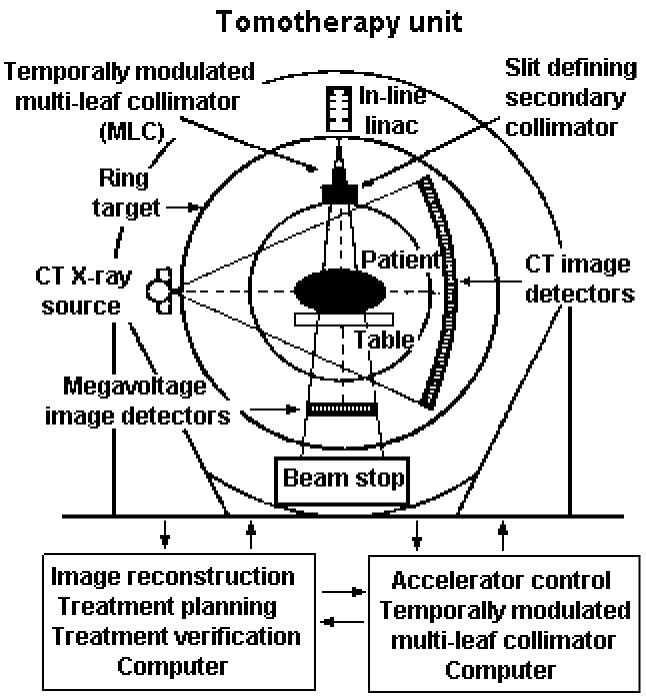
Multi leaf collimators and IMRT

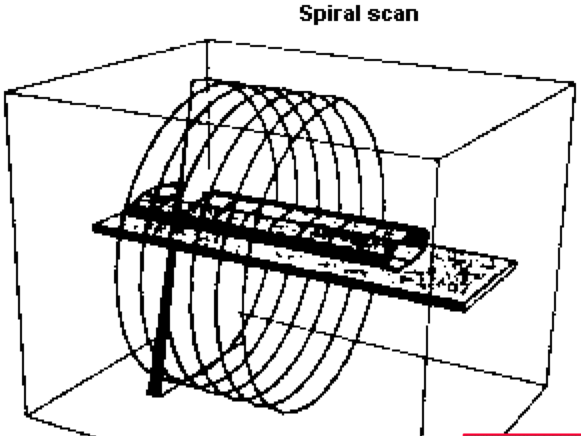


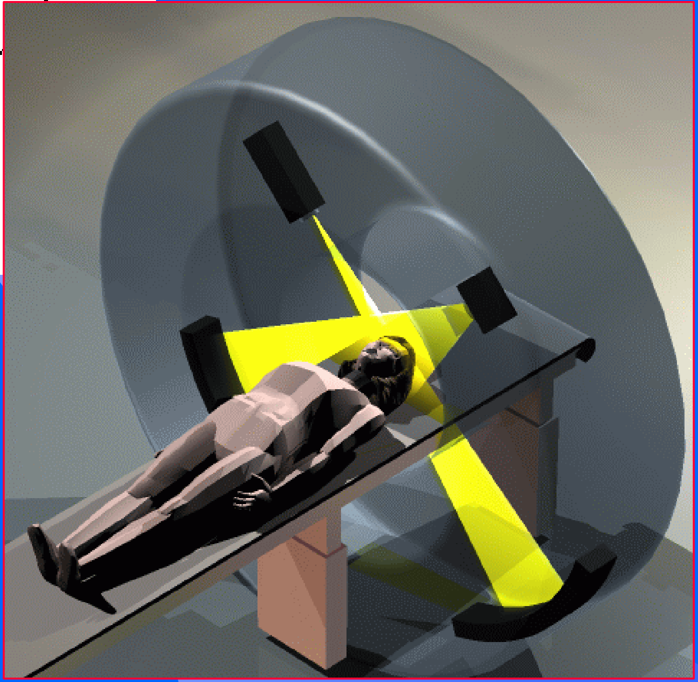
Multi leaf collimator which moves during irradiation

- It is possible to obtain concave dose volumes
- Time consuming (used for selected cases)

Tomotherapy







- The tumor is irradiated from as the accelerator rotates and the patient is moved (spiral pattern)
- The intensity is modulated through the use of a multi-leaf collimator
- CT imaging integrated within the device itself

Intra Operative Radiation Therapy (IORT)

Irradiation with an electron beam during surgery

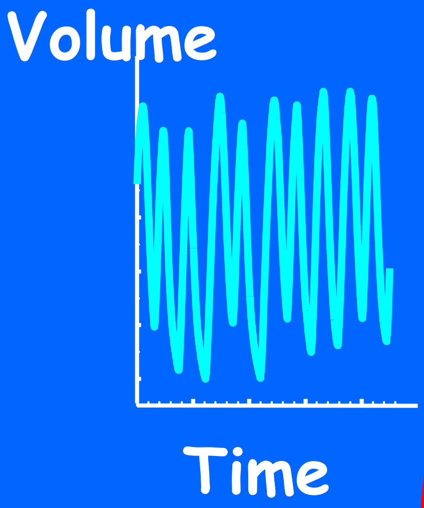
Electron energies: 3 – 9 MeV

Mean dose rate: 6 – 30 Gy/min

Irradiation time (21 Gy): 0.7 – 3.5 min

TERA

The problem of organ motion



Liver CT images

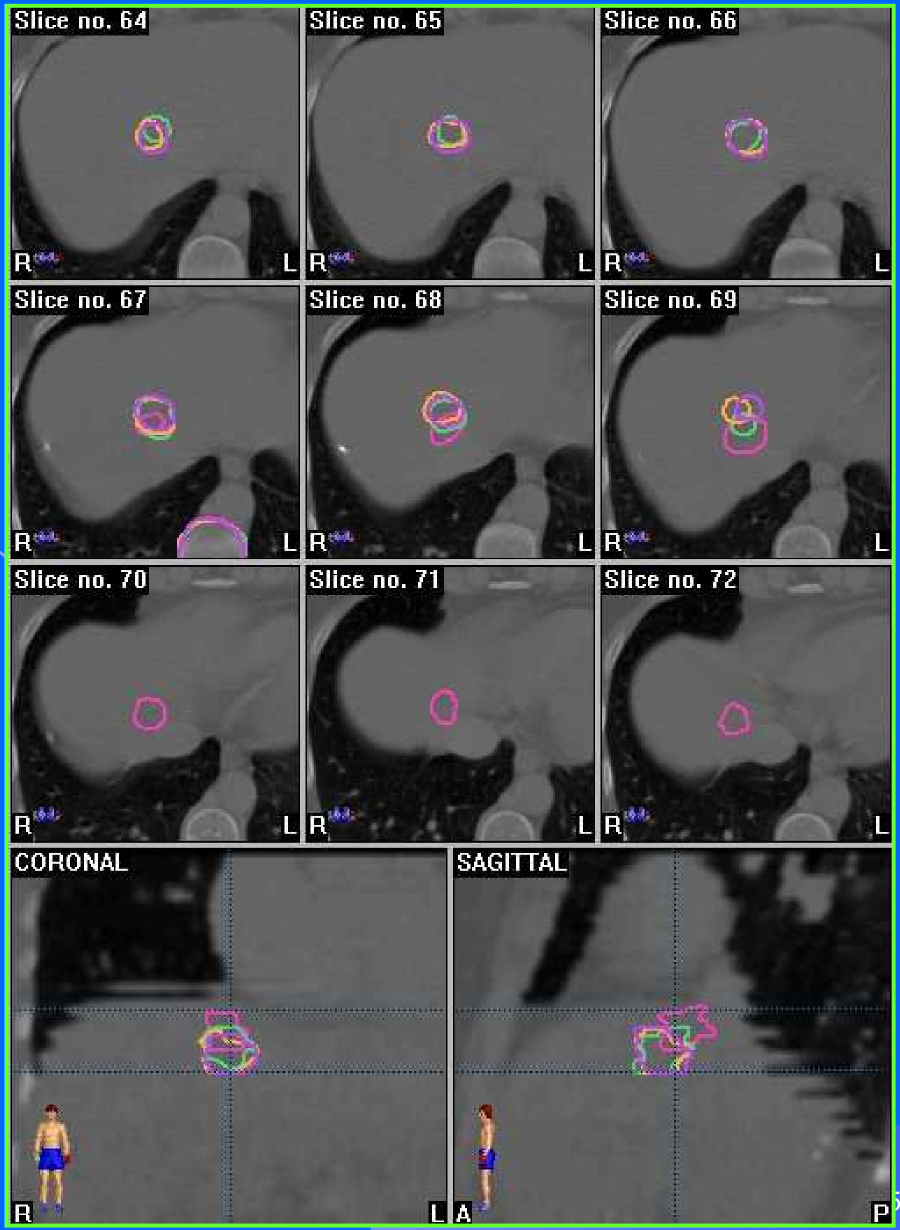
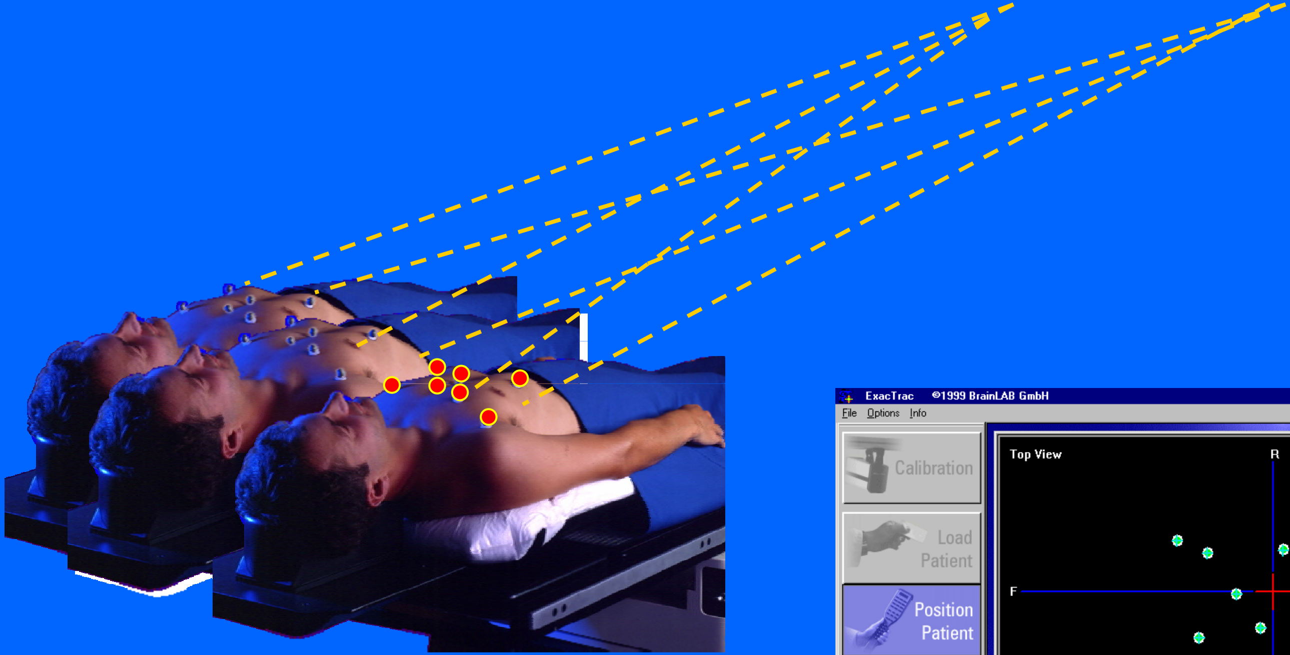
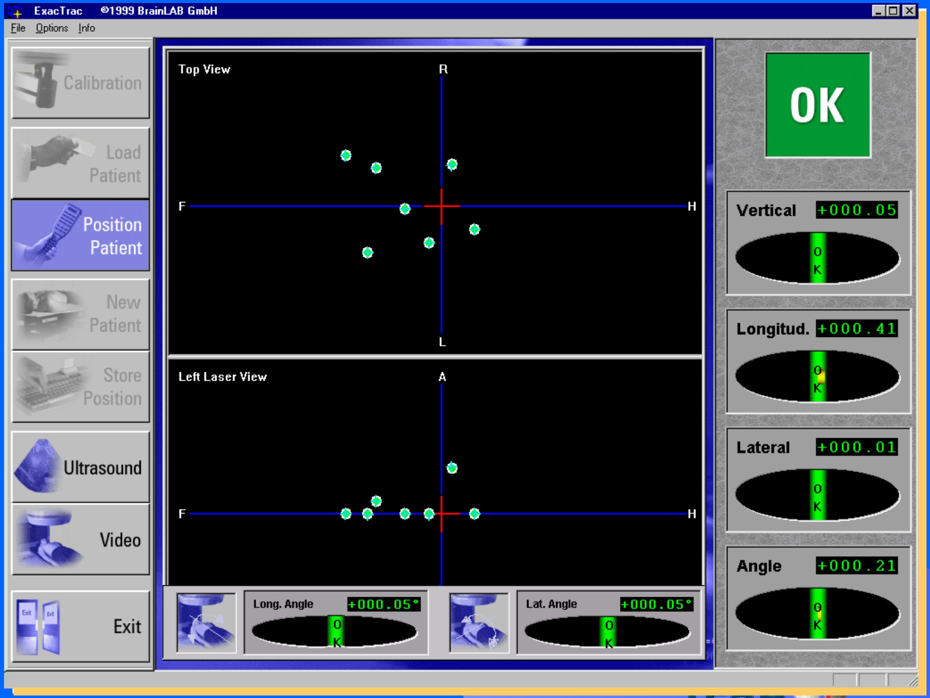


Image Giuded Radiation Therapy (IGRT)

INFRARED CAMERAS





ExacTrac ©1999 BrainLAB GmbH

Vertical +000.05

Longitud. +000.41

Lateral +000.01

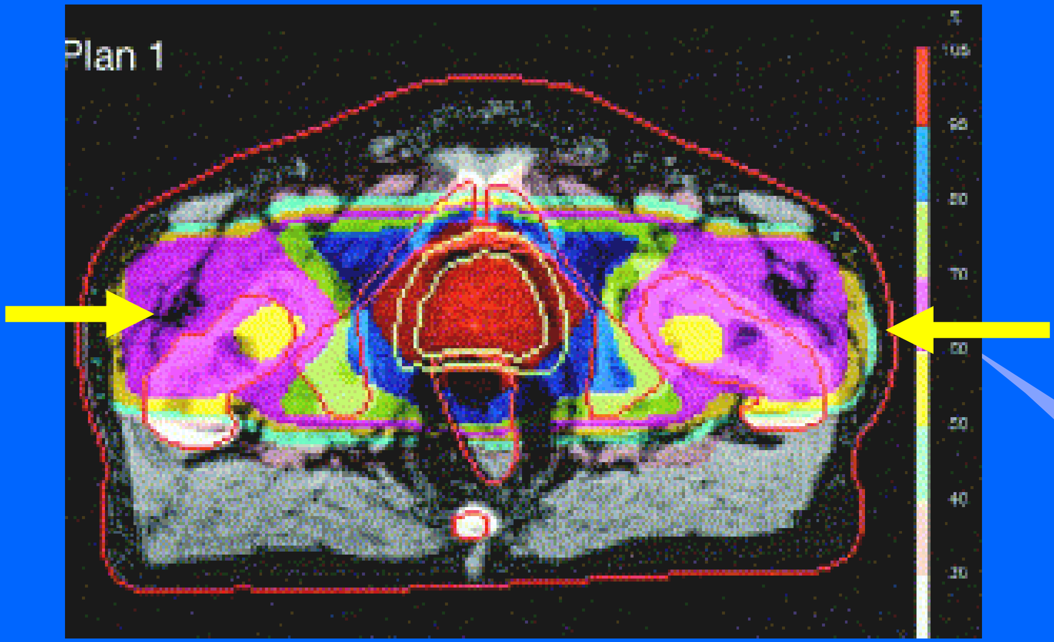
Angle +000.21

Long. Angle +000.05°

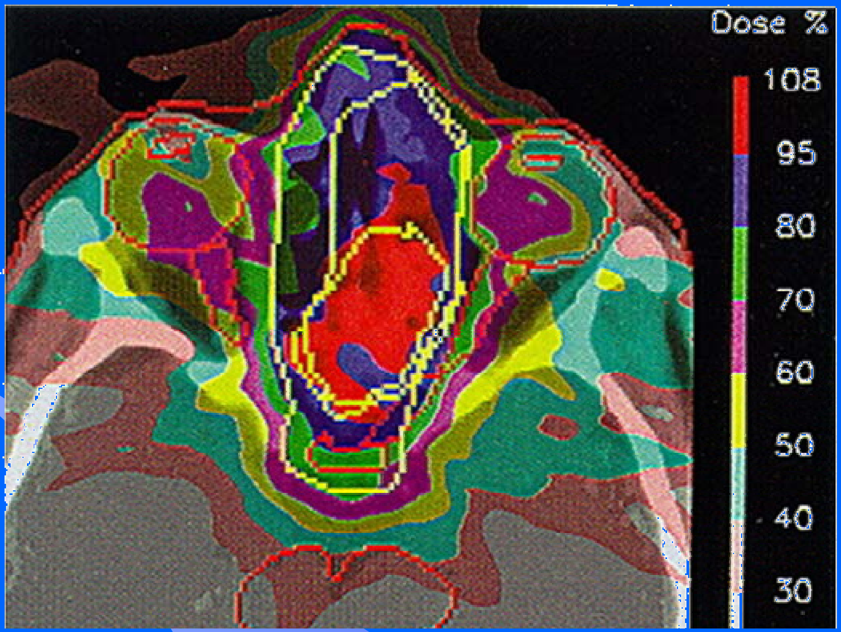
Lat. Angle +000.05°

Can we do better ?

2 X ray beams



9 X ray beams (IMRT)



A question for a particle physicist

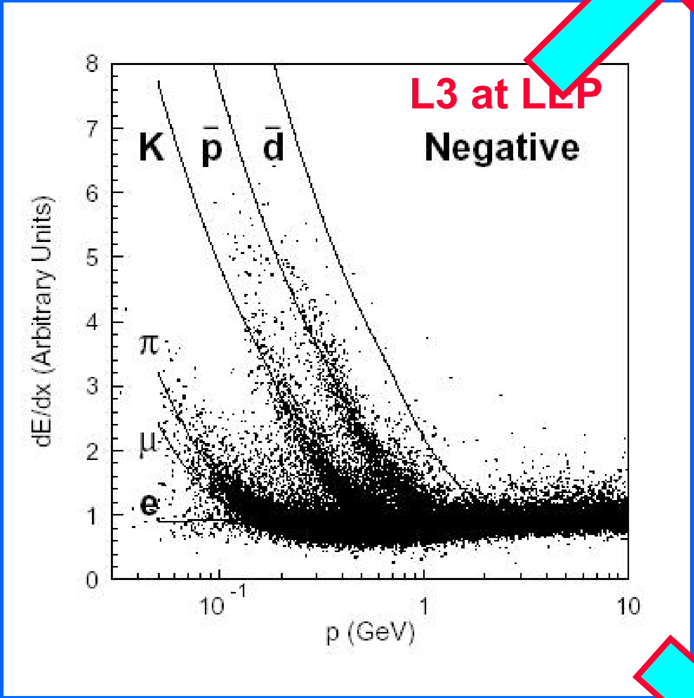
Are there better radiations to attack the tumour and spare at best the healthy tissues?

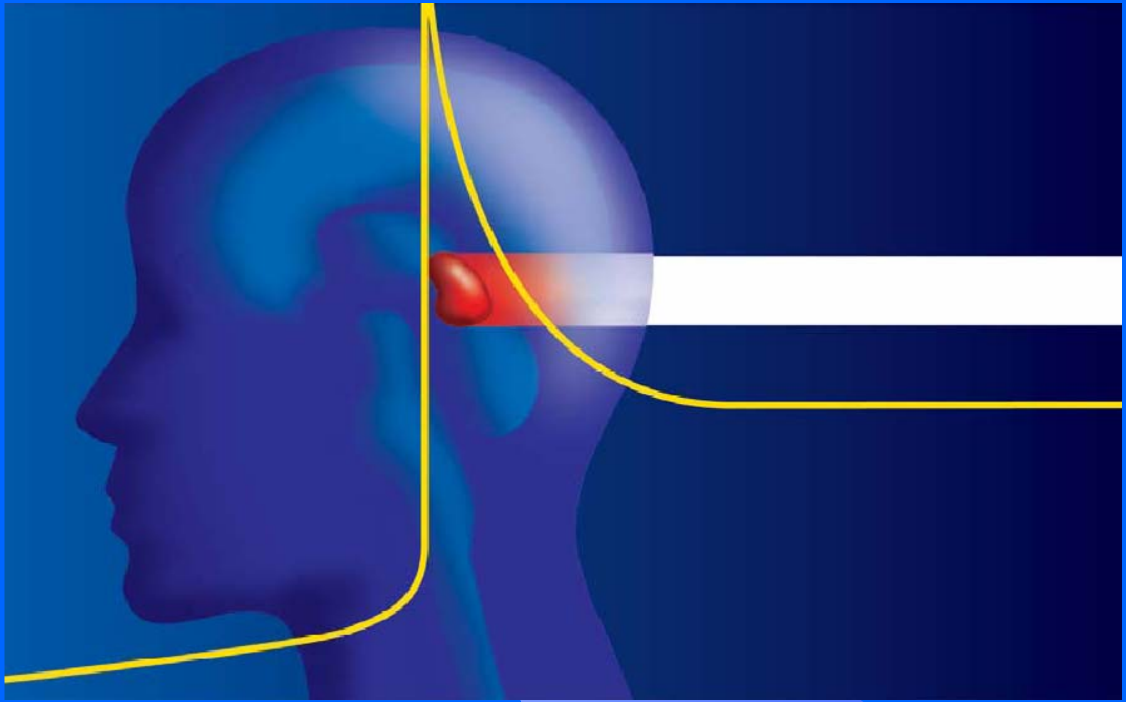
Answer : BEAMS OF CHARGED HADRONS

Let's go back to physics...

Fundamental physics

Particle identification





Medical applications

Cancer hadrontherapy

End of lecture I