532. Wilhelm und Else Heraeus-Seminar

Development of High-resolution Pixel Detectors and their Use in Science and Society Bad Honef, 25.5.2013

The Timepix detector for ion beam radiotherapy applications

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Heidelberger Ionenstrahl-Therapiezentrum





- 1. Ion beam radiotherapy
- 2. Timepix detector
- 3. Studies for ion spectroscopy
 - beam monitoring within the patient





Dose conformity to the target better than for photons due to Bragg peak



Data: Particle Therapy Cooperative Group, March 2013





- 1. Ion beam therapy
- 2. Timepix detector
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Timepix detector from the Medipix family





• Sensor chip: **300 µm thick**

crystalline silicon

- Area 1.4 x 1.4 cm²
- Pixel size 55 x 55 μm²
- USB-based readout FITPix: Plug & Play with any PC
- Measurement of time of arrival and deposited energy





- 1. Ion beam therapy
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Nuclear fragmentation of carbon ions in tissue has to be taken into account in therapy planning:

$$D_{biol} = RBE(Z, E, \dots) \cdot D_{physical}$$

However, only small amount of experimental data available

Problem: the size and complexity of the experiments

Goal: To develop a method capable of collecting large data sets in therapy relevant situations

Timepix signal for different ions with the same range in water



PhD-work of Bernadette Hartmann

Towards ion spectroscopy





B. Hartmann, 1. student award at IEEE Nuclear Science Symposium in Anaheim, USA, 2012



Biological changes during the therapy Organ motion Incorrect patient positioning

- \rightarrow change of the ion range
- → the delivered dose distribution can differ from the planned one

Overdose outside of the target \rightarrow damage on healthy tissue **Underdose** inside of the target \rightarrow risk of tumor recurrency

 \rightarrow Important to know whether the dose was delivered correctly



PET-monitoring is applicable for proton and carbon ion beams

Parodi et al NIMA **591** p.282 (2008)

Limitations: - low induced activities in comparison to diagnostics - movement of beam-activated nuclei (physiological washout processes) *Knopf et al PMB* **54** *p.4477 (2009)*

Alternative approaches exploit prompt radiation:

o Photons

• Secondary ions [Amaldi et al. NIMA 617 (2010)]



Predicted advantages:

- Originate in prompt processes
- \rightarrow less influenced by biological washout \rightarrow no prolongation of time-on-couch
- → no prolongation of time-on-couch due to measurements
- high yield ≈ 0.1/ primary ¹²C [Henriquet et al PMB 57 (2012) 4655]



Can we register secondary ions leaving the patient?



M. Martišíková et al. JINST 6 C11014 (2011)



Can we determine the beam properties from tracking of secondary ions?

Homogeneous phantom



No info on secondary ion origin \rightarrow simple extrapolation technique used



P. Soukup et al. 2011 JINST 6 C01060

Measurement of impact time:

- \rightarrow Coincident particle hits
- \rightarrow Particle direction

J. Jakubek et al. 2011 JINST 6 C12010



Projections of the measured ion tracks to the projection plane:



Analysed for sensitivity to:

- beam energy / range
- -- beam width
- -- beam position

Radiotherapy with ion beams:

- Physical and biological potential for highly localized dose deposition
- Dedicated detection methods necessary to use this advantage for patients
- Pixelized silicon detectors: high spatial resolution and online readout
 up to now rarely used for ion beam radiotherapy

Timepix detector: provides imaging of **single ion tracks**

+ measurement of particle impact time

+ signal dependent on their energy deposition in silicon

Summary & Conclusions



1) Ion spectroscopy for therapy planning:

- directly in the phantom
- promissing for ion discrimination as needed for fragmentation studies

2) Studies towards ¹²C beam monitoring exploiting tracking of secondary ions:

- Monitoring in the **homogeneous phantom**:
 - beam position: σ = 0.2 mm
 - beam width: σ = 0.9 mm
 - correlation with range: within 1.3 mm / < 3 mm depending on the method

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