

DOSIMETRIA DI FASCI DI IONI A SCANSIONE PER ADROTERAPIA

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CNAO



Typical layout for a proton-therapy facility:
cyclotron, 2 fixed-beam lines, 2 rooms with gantry, 1 experimental room



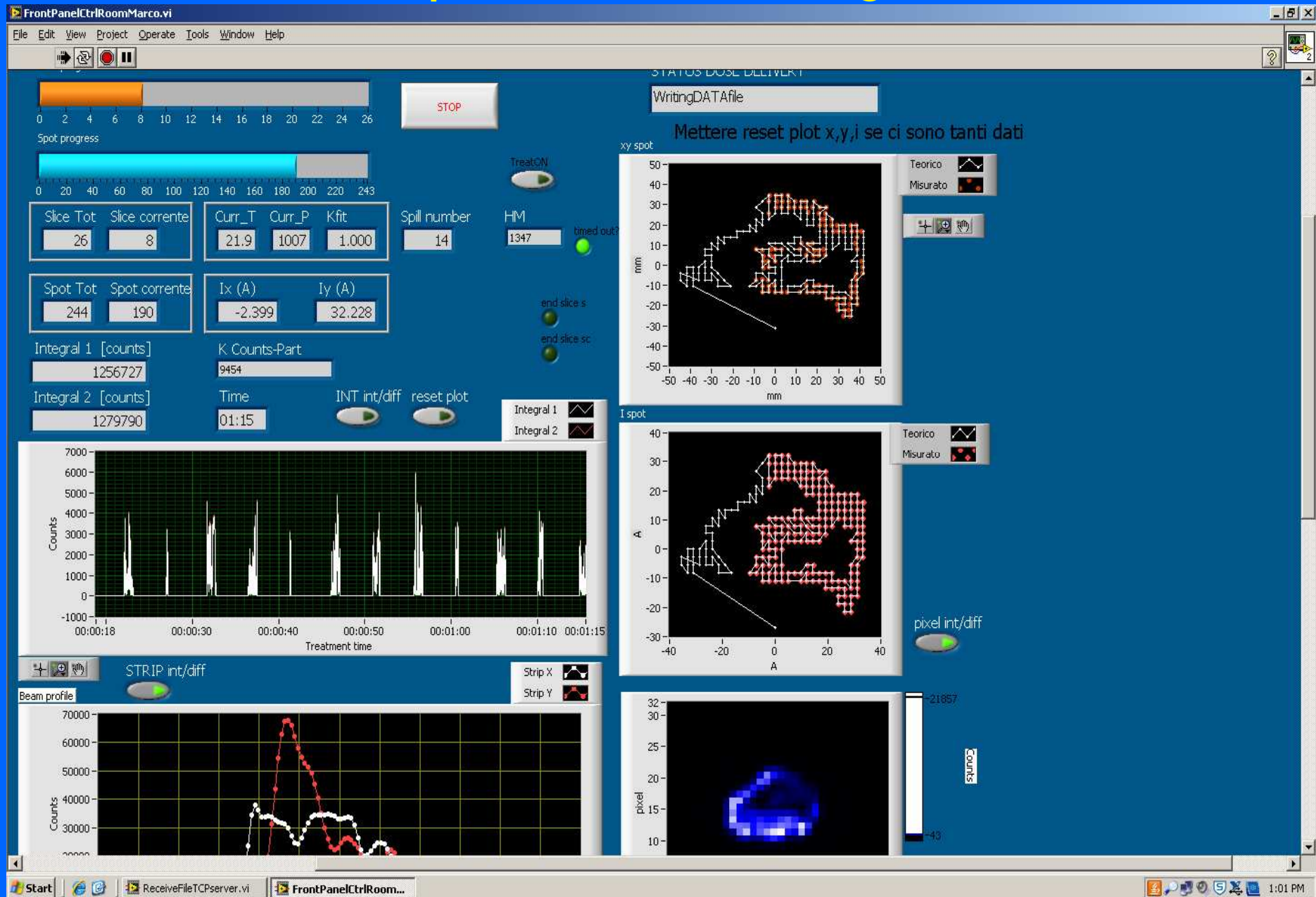


CNAO

Synchrotron-based
facility

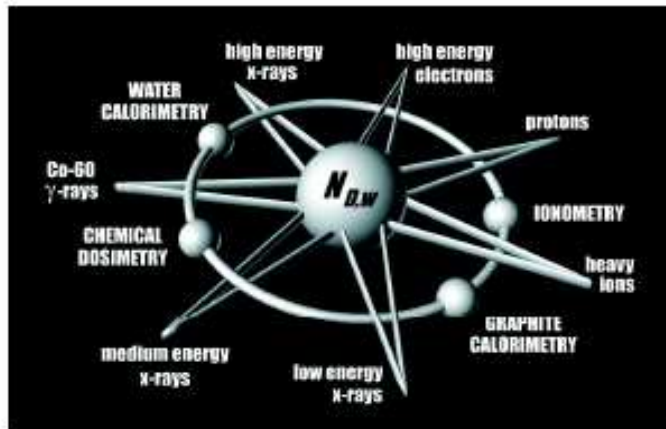


3-D active system: energy variation + pencil beam scanning



IAEA TRS-398

*Absorbed Dose Determination in
External Beam Radiotherapy:
An International Code of Practice for Dosimetry
based on Standards of Absorbed Dose to Water*



Pedro Andreo, Dosimetry and Medical Radiation Physics Section, IAEA
David T Burns, Bureau International des Poids et Mesures (BIPM)
Klaus Hohlfeld, Physikalisch-Technische Bundesanstalt (PTB), Braunschweig, Germany
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Stefan Vyuckier, Catholic University of Louvain (UCL), Brussels, Belgium

PUBLISHED BY THE IAEA ON BEHALF OF IAEA, WHO, PAHO, AND ESTRO



INTERNATIONAL ATOMIC ENERGY AGENCY **IAEA**
21 May 2001 (V.10A)



RAPPORTI ISTISAN 21|12

ISSN: 1123-3117 (cartaceo) • 2384-8936 (online)

**Raccomandazioni per l'impiego
della radioterapia con fasci di protoni**

M. Amichetti, M. Ciocca, E. Cisbani, M. Curzel, C. De Angelis,
M. Durante, G. Esposito, M. Ferrarini, R. Orecchia, E. Orlandi,
L. Raffaele, A. Rosi, M. Schwarz, C. Spatola, M.A. Tabocchini,
S. Tappellini, F. Valvo, S. Vennarini

 **TECNOLOGIE
E SALUTE**

Dose to water under non-ref. conditions

Physics basic beam data acquired:

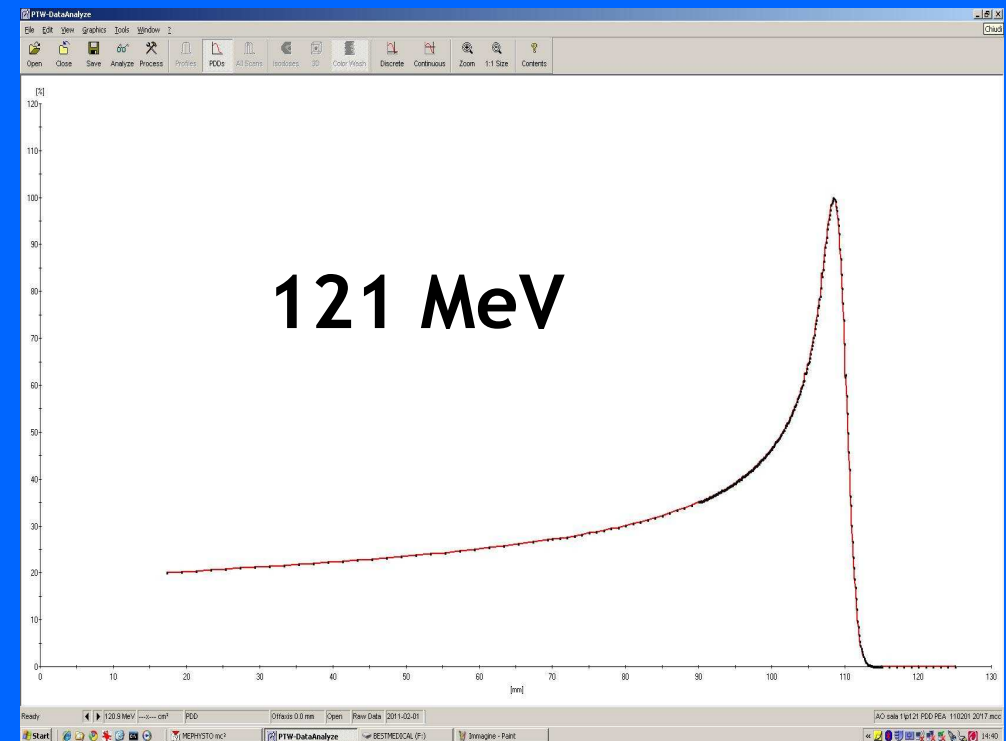
- experimentally
- Monte Carlo simulation (FLUKA or Geant4 codes)

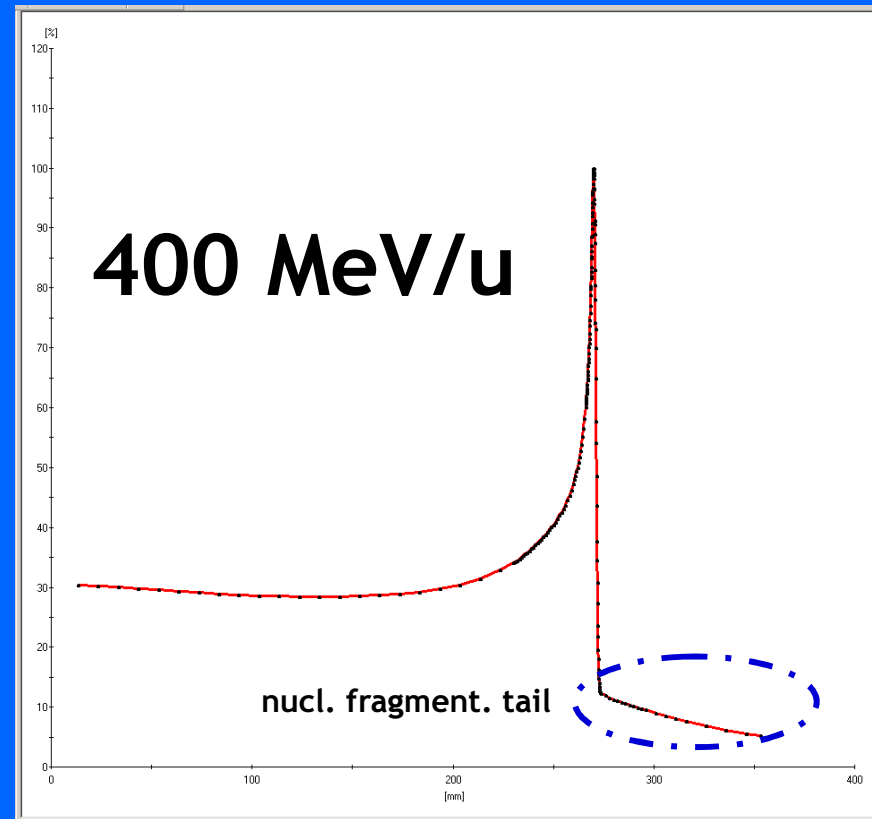
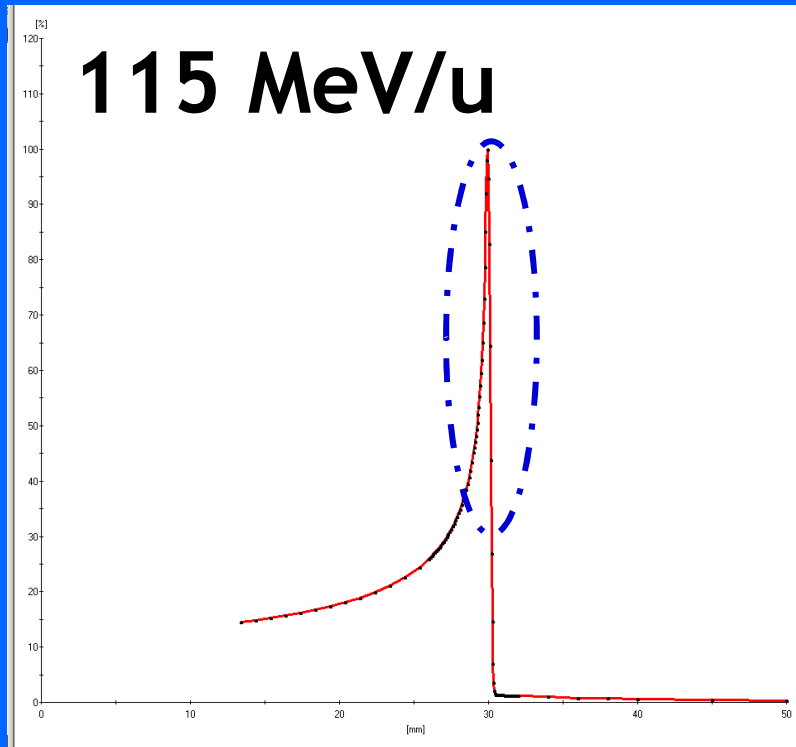
Experimental data

Lat-integrated Depth Dose Distributions (mono-en. pencil beams)



Peakfinder water column





Medical Physics

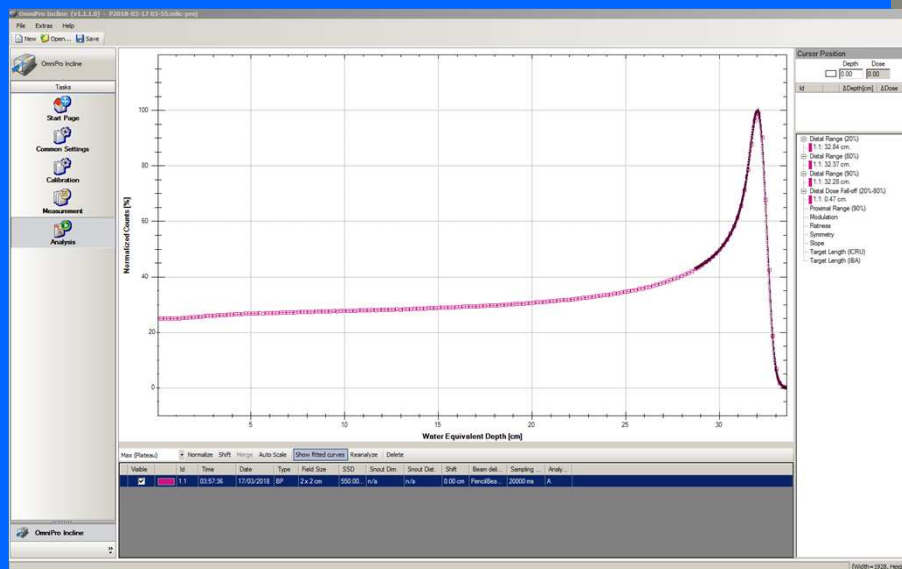
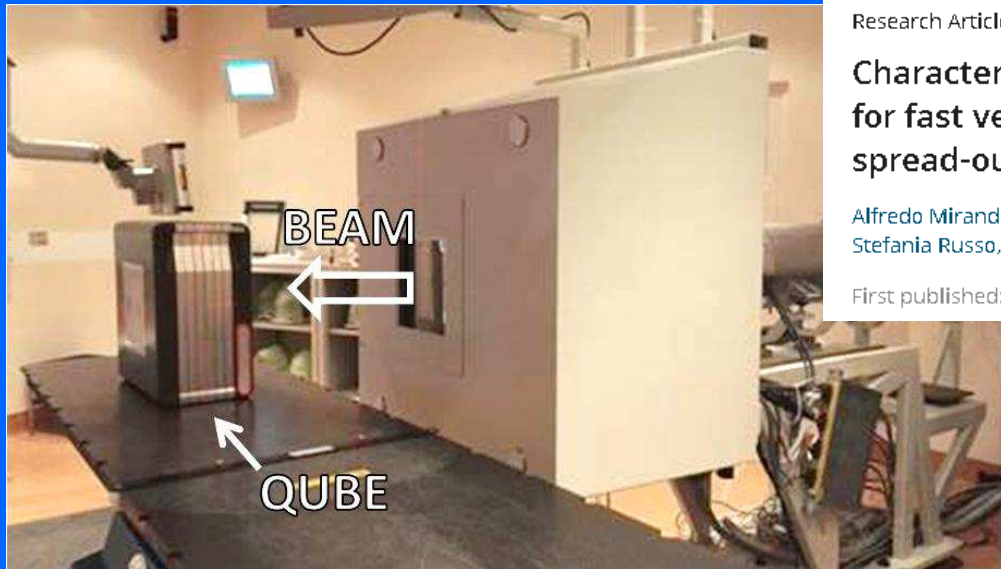
The International Journal of Medical Physics Research and Practice

Research Article

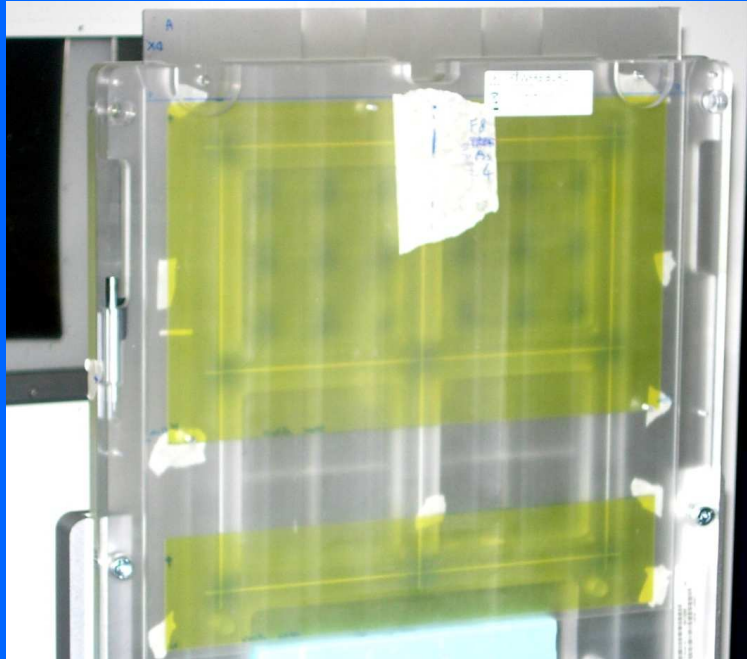
Characterization of a multilayer ionization chamber prototype for fast verification of relative depth ionization curves and spread-out-Bragg-peaks in light ion beam therapy

Alfredo Mirandola ✉, Giuseppe Magro, Marco Lavagno, Andrea Mairani, Silvia Molinelli, Stefania Russo, Edoardo Mastella, Alessandro Vai, Davide Maestri, Vanessa La Rosa, Mario Ciocca

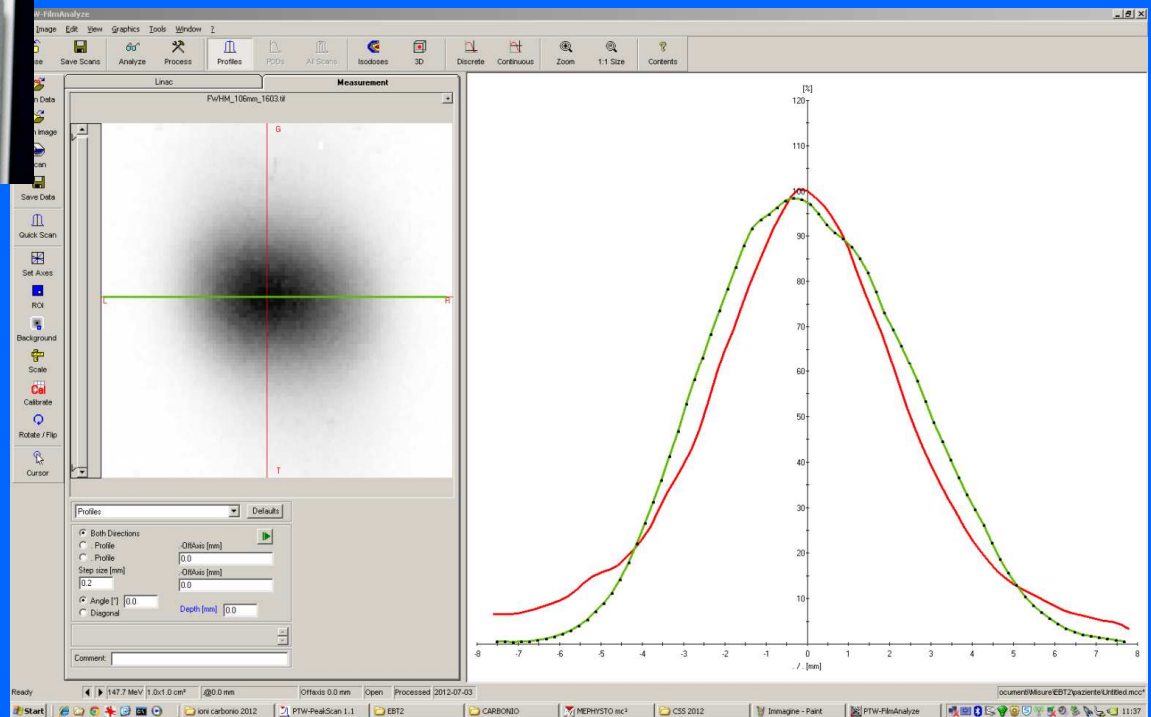
First published: 6 April 2018 | <https://doi.org/10.1002/mp.12866>

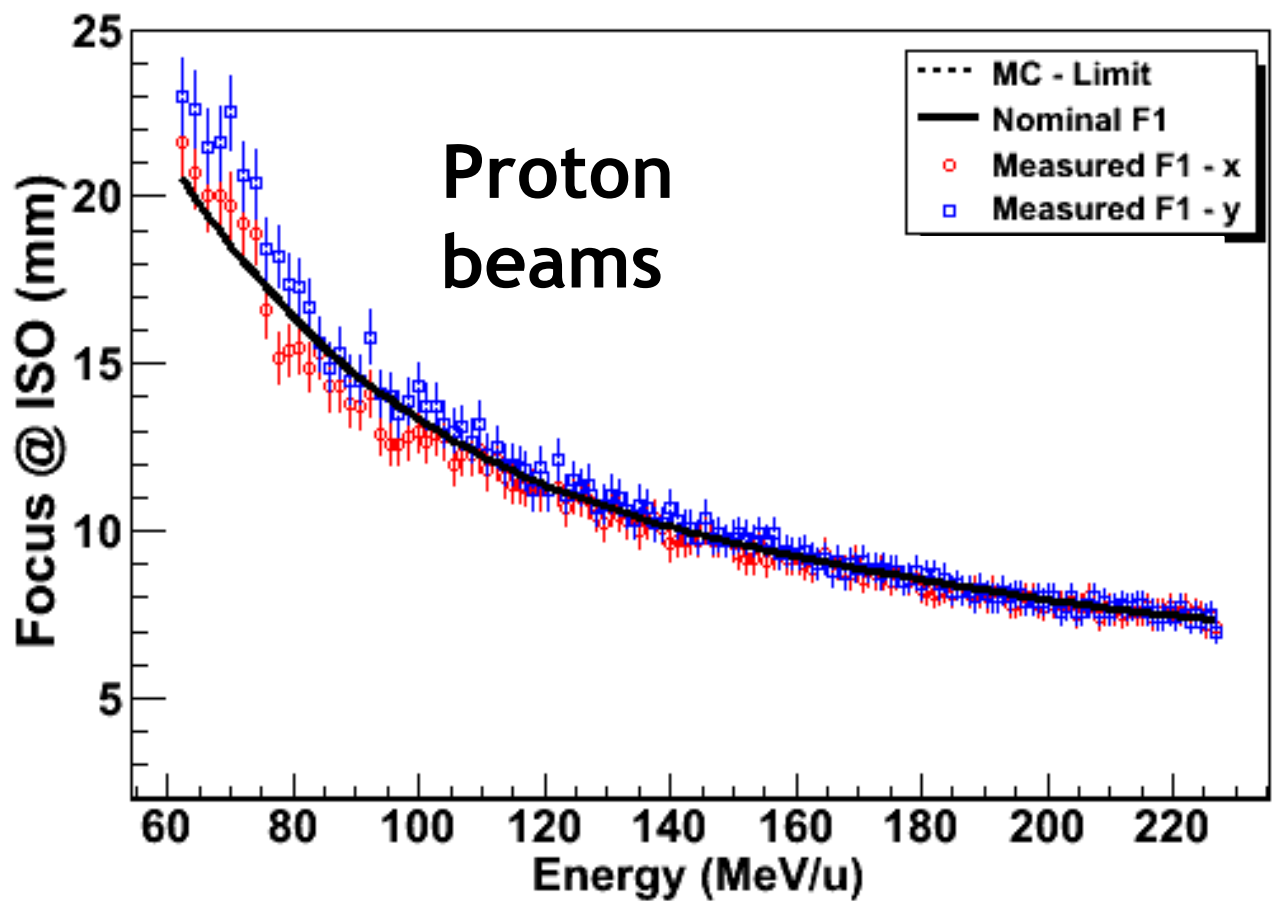


Transversal dose profiles in air

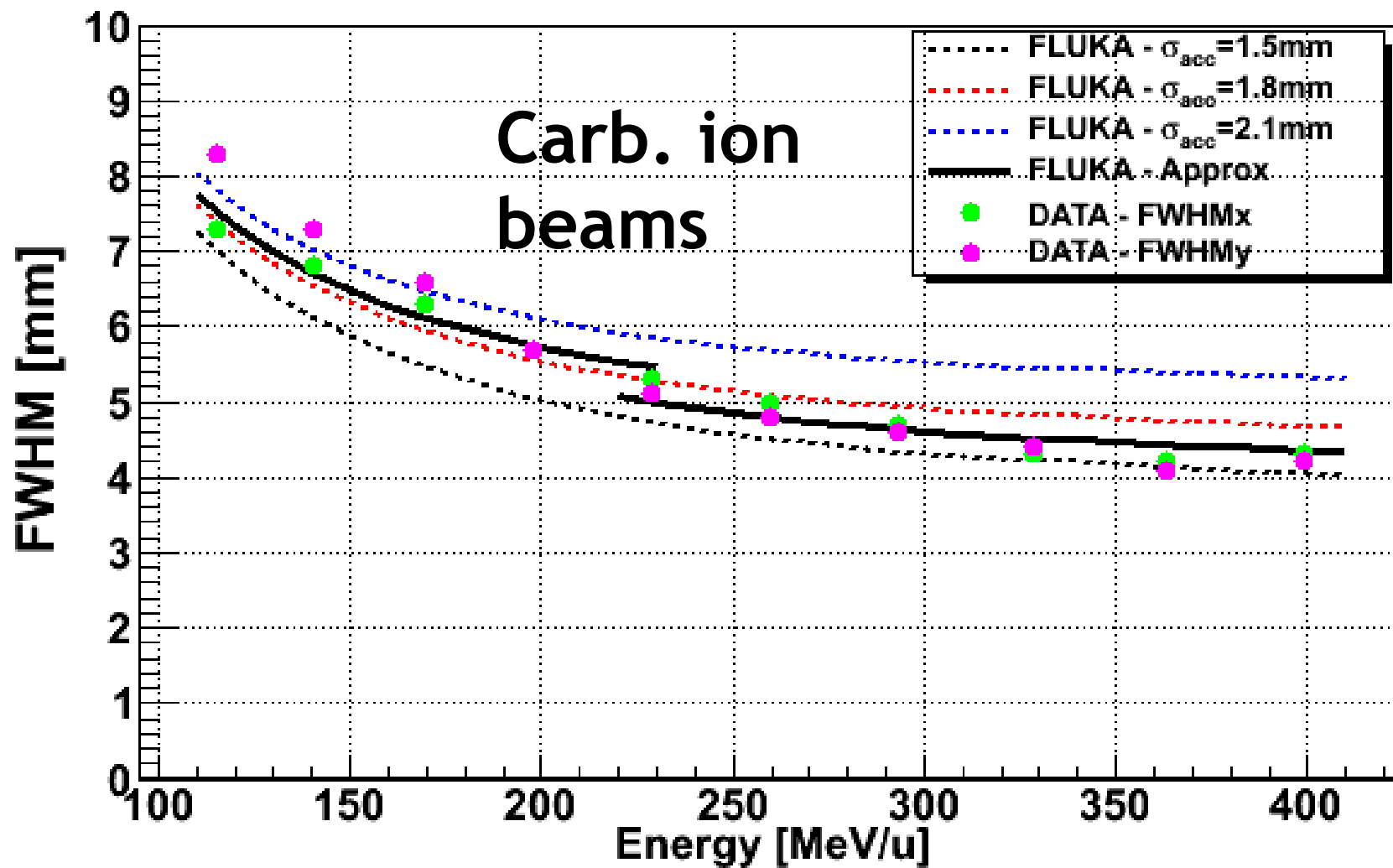


EBT3 radiochromic films





Carb. ion beams





Contents lists available at ScienceDirect

Physica Medica

journal homepage: <http://www.physicamedica.com>



Original paper

Characterization of a commercial scintillation detector for 2-D dosimetry in scanned proton and carbon ion beams



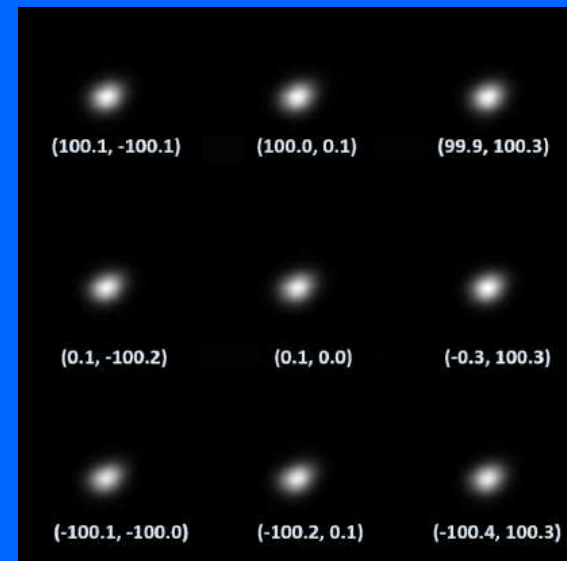
S. Russo^{a,*}, A. Mirandola^a, S. Molinelli^a, E. Mastella^a, A. Vai^a, G. Magro^a, A. Mairani^{a,b}, D. Boi^c, M. Donetti^{a,d}, M. Ciocca^a

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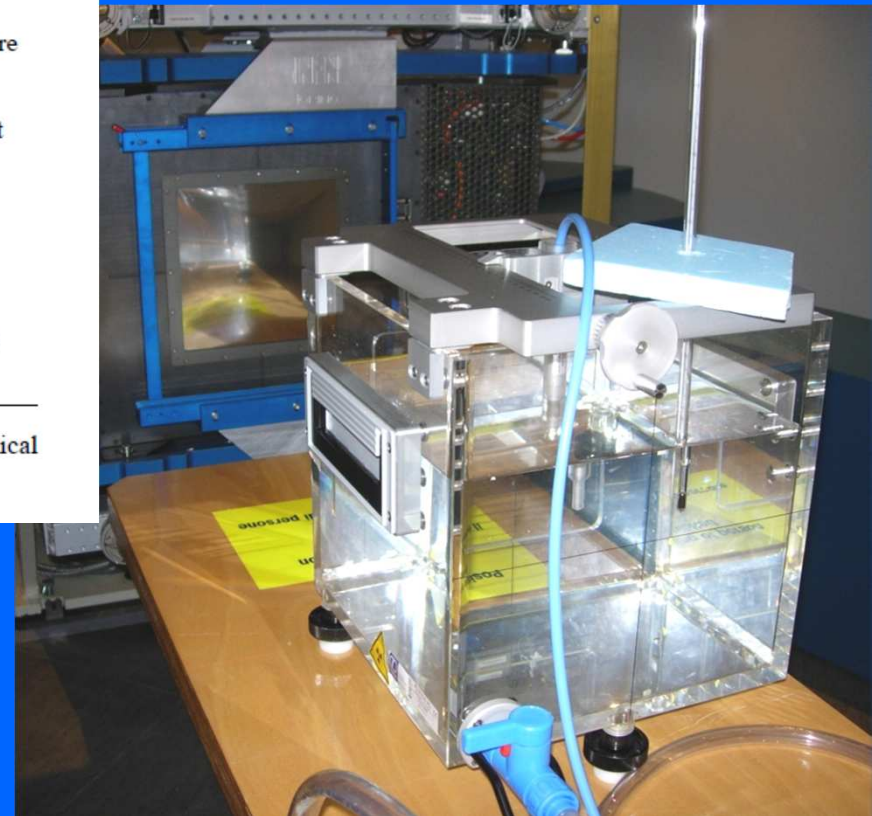
Dose to water under ref. conditions

TABLE 30. REFERENCE CONDITIONS FOR THE DETERMINATION OF ABSORBED DOSE IN PROTON BEAMS

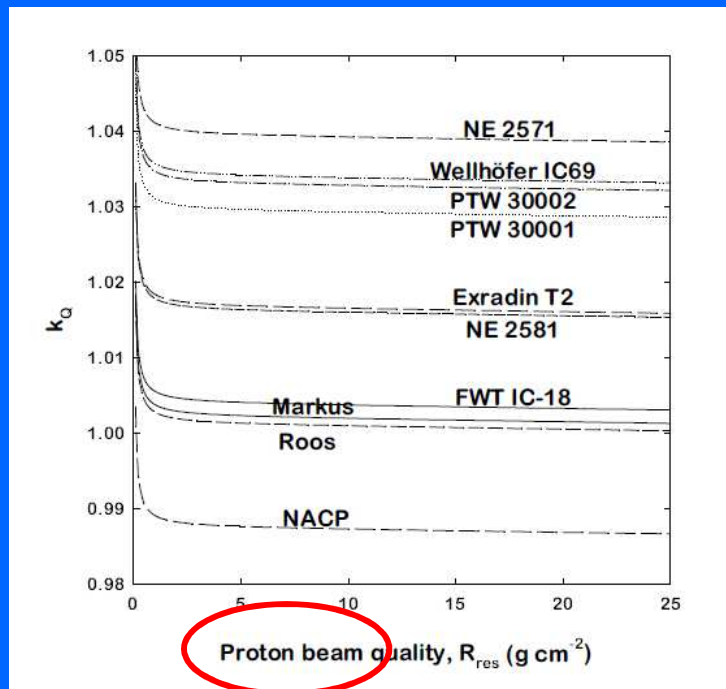
Influence quantity	Reference value or reference characteristics
Phantom material	Water
Chamber type	For $R_{\text{res}} \geq 0.5 \text{ g/cm}^2$, cylindrical and plane parallel For $R_{\text{res}} < 0.5 \text{ g/cm}^2$, plane parallel
Measurement depth z_{ref}	Middle of the SOBP ^a
Reference point of the chamber	For plane-parallel chambers, on the inner surface of the window at its centre For cylindrical chambers, on the central axis at the centre of the cavity volume
Position of the reference point of the chamber	For plane-parallel and cylindrical chambers, at the point of measurement depth z_{ref}
SSD	Clinical treatment distance
Field size at the phantom surface	10 cm × 10 cm, or that used for normalization of the output factors whichever is larger. For small field applications (i.e. eye treatments), 10 cm × 10 cm or the largest field clinically available

^a The reference depth can be chosen in the 'plateau region', at a depth of 3 g/cm², for clinical applications with a monoenergetic proton beam (e.g. for plateau irradiations).

$$D_{w,Q} = M_Q N_{D,w,Q_0} k_{Q,Q_0}$$



IAEA TRS 398 (2000)



ioni carbonio: dipende solo dalla camera, non da qualità fascio (current lack of experimental data!)

TABLE 11.II. CALCULATED VALUES OF k_Q FOR HEAVY-ION BEAMS, FOR VARIOUS CYLINDRICAL AND PLANE-PARALLEL IONIZATION CHAMBERS

Ionization chamber type ^a	k_Q
<i>Cylindrical chambers</i>	
Capintec PR-05P mini	1.045
Capintec PR-05 mini	1.045
Capintec PR-06C/G Farmer	1.037

TABLE 10.IV. ESTIMATED RELATIVE STANDARD UNCERTAINTY^a OF $D_{w,Q}$ AT THE REFERENCE DEPTH IN WATER AND FOR A CLINICAL PROTON BEAM, BASED ON A CHAMBER CALIBRATION IN ⁶⁰Co GAMMA RADIATION

Physical quantity or procedure	User chamber type:	Relative standard uncertainty (%)	
		cylindrical	plane-parallel
<i>Step 1: Standards Laboratory</i>			
$N_{D,w}$ calibration of secondary standard at PSDL		<i>SSDL</i> ^b	<i>SSDL</i> ^b
Long term stability of secondary standard		0.5	0.5
$N_{D,w}$ calibration of the user dosimeter at the standards laboratory		0.1	0.1
<i>Combined uncertainty in Step 1</i>		0.4	0.4
		<i>0.6</i>	<i>0.6</i>
<i>Step 2: User proton beam</i>			
Long-term stability of user dosimeter		0.3	0.4
Establishment of reference conditions		0.4	0.4
Dosimeter reading M_Q relative to beam monitor		0.4	0.6
Correction for influence quantities k_i		0.6	0.6
Beam quality correction, k_Q		0.4	0.5
<i>Combined uncertainty in Step 2</i>		1.7	2.0
		<i>1.9</i>	<i>2.2</i>
Combined standard uncertainty in $D_{w,Q}$ (Steps 1 + 2)		2.0	2.3

(vs 1.5% photons)

TABLE 11.III. ESTIMATED RELATIVE STANDARD UNCERTAINTY^a OF $D_{w,Q}$ AT THE REFERENCE DEPTH IN WATER AND FOR A CLINICAL HEAVY-ION BEAM, BASED ON A CHAMBER CALIBRATION IN ⁶⁰Co GAMMA RADIATION

Physical quantity or procedure	User chamber type:	Relative standard uncertainty (%)	
		cylindrical	plane-parallel
<i>Step 1: Standards Laboratory</i>			
$N_{D,w}$ calibration of secondary standard at PSDL		<i>SSDL</i> ^b	<i>SSDL</i> ^b
Long term stability of secondary standard		0.5	0.5
$N_{D,w}$ calibration of the user dosimeter at the standard laboratory		0.1	0.1
<i>Combined uncertainty in Step 1</i>		0.4	0.4
		<i>0.6</i>	<i>0.6</i>
<i>Step 2: User heavy-ion beam</i>			
Long-term stability of user dosimeter		0.3	0.4
Establishment of reference conditions		0.4	0.6
Dosimeter reading M_Q relative to beam monitor		0.6	0.6
Correction for influence quantities k_i		0.4	0.5
Beam quality correction, k_Q		2.8	3.2
<i>Combined uncertainty in Step 2</i>		2.9	3.0
		<i>2.9</i>	<i>3.0</i>
Combined standard uncertainty in $D_{w,Q}$ (Steps 1 + 2)		3.0	3.4

PAPER

Determination of ion recombination and polarity effect correction factors for a plane-parallel ionization Bragg peak chamber under proton and carbon ion pencil beams



A Mirandola^{1,3}, G Magro¹, D Maestri¹, A Mairani^{1,2}, E Mastella¹, S Molinelli¹, S Russo¹, A Vai¹ and M Ciocca¹

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Recombination correction factors were LET and energy dependent, ranging from 1.000 to 1.040 ($\pm 0.5\%$) for carbon ions, while nearly negligible for protons. Moreover, no corrections need to be applied due to polarity effect being $< 0.5\%$ along the whole IDD's for both particle types. IDD^ks showed a better agreement than uncorrected curves when compared to MC, with a reduction of the mean absolute variation from 1.2% to 0.9%.

PAPER

Water calorimetry-based k_Q factors for Farmer-type ionization chambers in the SOBP of a carbon-ion beamKim Marina Holm^{1,2,3,4} , Oliver Jäkel^{2,3,5}  and Achim Krauss¹**Abstract**

The dosimetry of carbon-ion beams based on calibrated ionization chambers (ICs) still shows a significantly higher uncertainty compared to high-energy photon beams, a fact influenced mainly by the uncertainty of the correction factor for the beam quality k_Q . Due to a lack of experimental data, k_Q factors in carbon-ion beams used today are based on theoretical calculations whose standard uncertainty is three times higher than that of photon beams. To reduce their uncertainty, in this work, k_Q factors for two ICs were determined experimentally by means of water calorimetry for the spread-out Bragg peak of a carbon-ion beam, these factors are presented here for the first time. To this end, the absorbed dose to water in the ^{12}C -SOBP is measured using the water calorimeter developed at Physikalisch-Technische Bundesanstalt, allowing a direct calibration of the ICs used (PTW 30013 and IBA FC65G) and thereby an experimental determination of the chamber-specific k_Q factors. Based on a detailed characterization of the irradiation field, correction factors for several effects that influence calorimetric and ionometric measurements were determined. Their contribution to an overall uncertainty budget of the final k_Q factors was determined, leading to a standard uncertainty for k_Q of 0.69%, which means a reduction by a factor of three compared to the theoretically calculated values. The experimentally determined values were expressed in accordance with TRS-398 and DIN 6801-1 and compared to the values given there. A maximum deviation of 2.3% was found between the experiment and the literature.



Correction method of measured images of absorbed dose for quenching effects due to relatively high LET

G. Gambarini^{a,b,*}, D. Bettega^{a,b}, G. Camoni^a, M. Felisi^a, A. Gebbia^a, E. Massari^a, V. Regazzoni^{a,b}, I. Veronese^{a,b}, D. Giove^{a,b}, A. Mirandola^c, M. Ciocca^c

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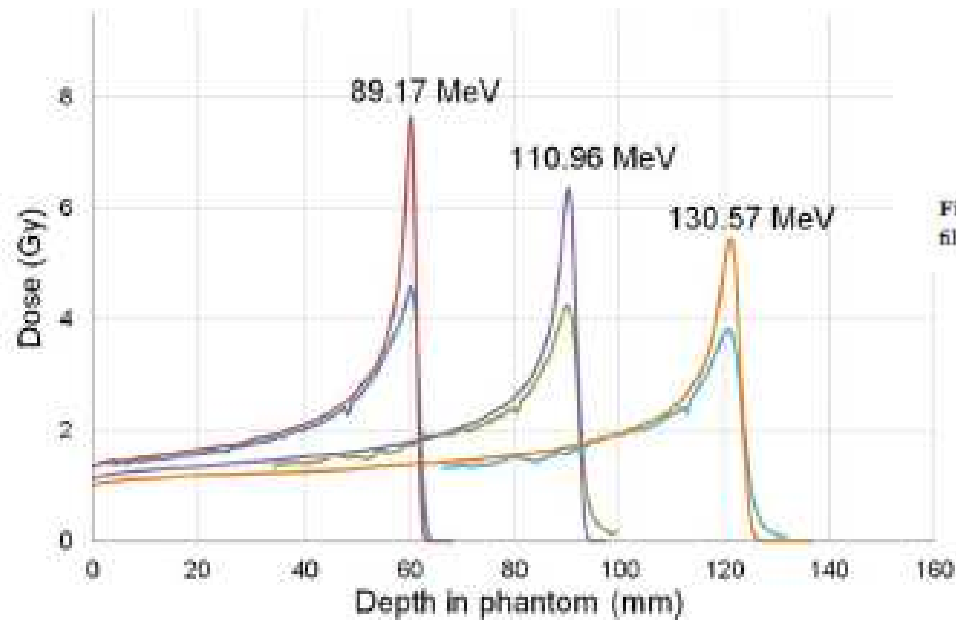


Fig. 3. Central depth-dose profiles measured with RBT3 films (lower profiles) and calculated by Monte Carlo simulations (higher profiles).

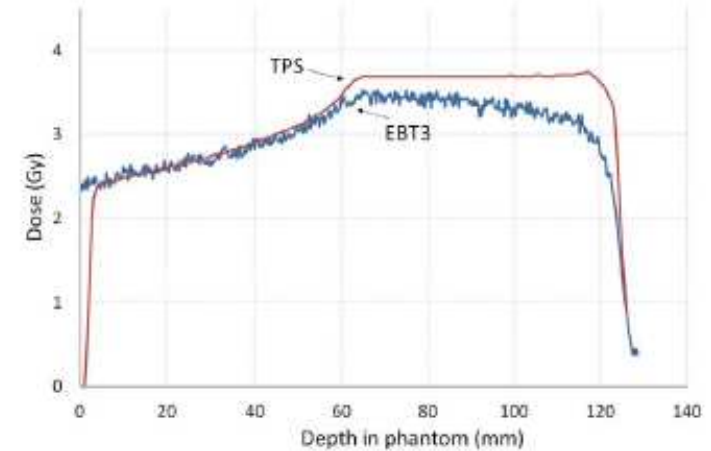


Fig. 5. Central dose profile in RW3 extracted from a dose image achieved with an EBT3 film and profile calculated by the Syngo TPS.



Dosimetric characterization of a silicon diode detector in cyclotron-based passively scattered and synchrotron-based scanning clinical proton beams

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^c Scuola di Specializzazione in Fisica Medica, Dipartimento di Scienze Mediche, Chirurgiche e Tecnologie Avanzate "G.F. Ingrassia", Scuola Facoltà di Medicina, Università degli Studi di Catania, Via Santa Sofia 78, Catania, 95123, Italy

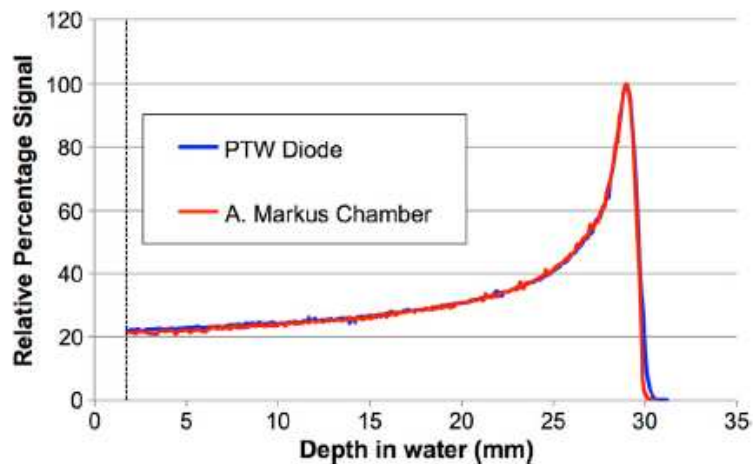


Fig. 5. Bragg peak curves measured by the diode and the Advanced Markus ionization chamber for the 62 MeV unmodulated proton beam.

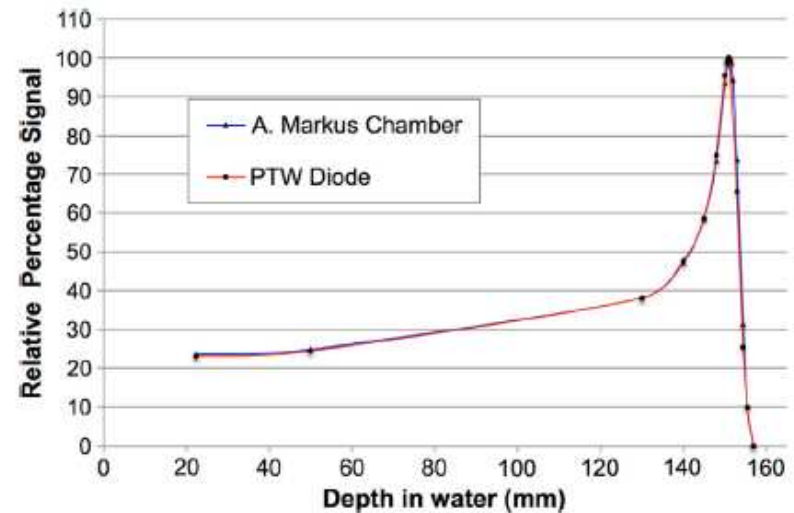


Fig. 12. Bragg peak curves measured by the diode and the Advanced Markus ionization chamber in the 149 MeV scanning proton beam.

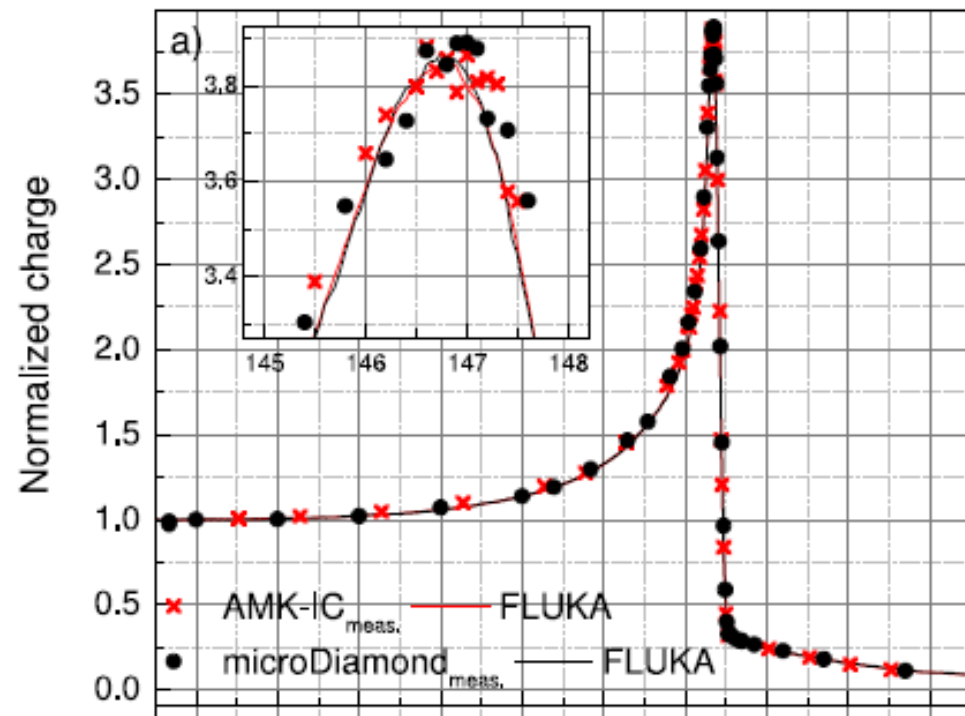
Dosimetric characterization of a microDiamond detector in clinical scanned carbon ion beams

Marco Marinelli, G. Prestopino,^{a)} C. Verona, and G. Verona-Rinati
*INFN—Dipartimento di Ingegneria Industriale, Università di Roma “Tor Vergata,” Via del Politecnico 1,
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A GEMPix-based integrated system for measurements of 3D dose distributions in water for carbon ion scanning beam radiotherapy

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Physics Institute 3B, RWTH Aachen University, 52074 Aachen, Germany

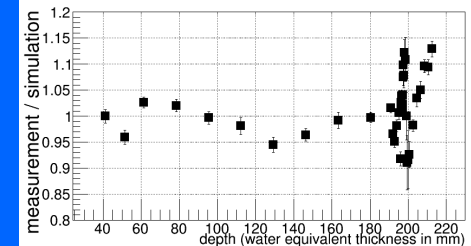
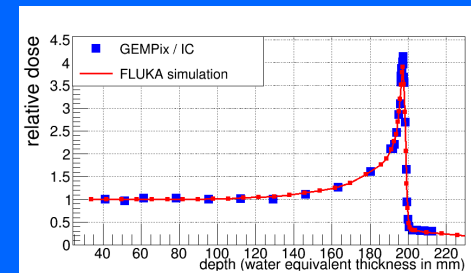
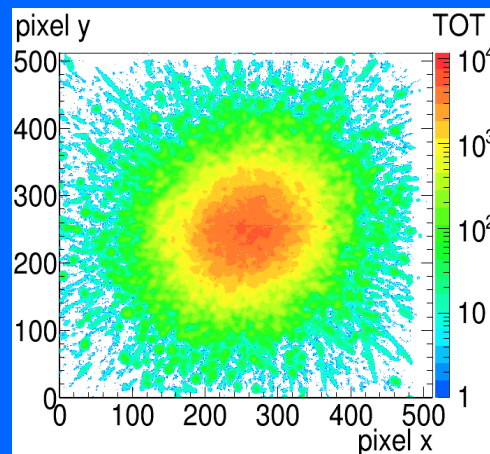
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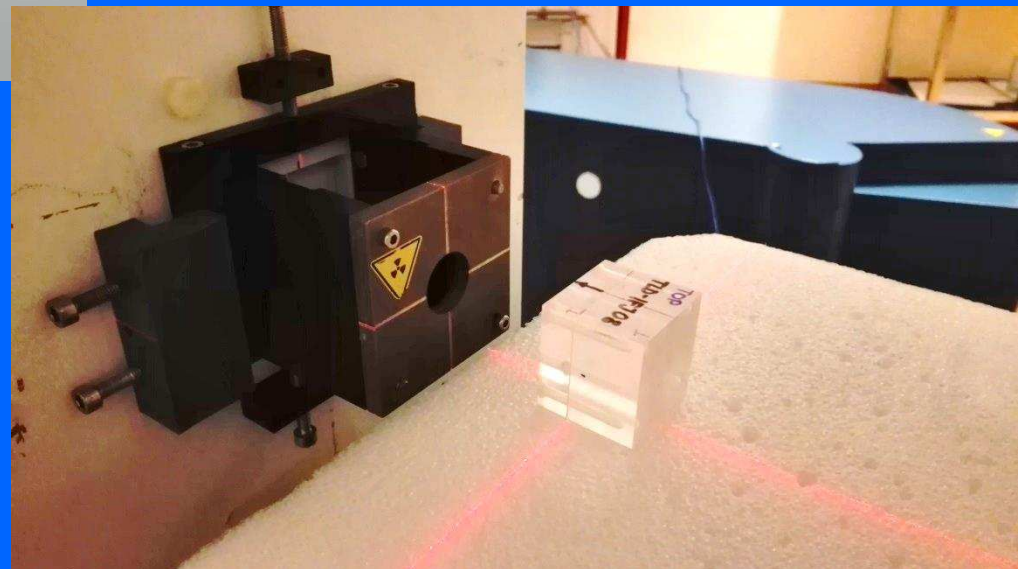
Med. Phys. 47 (6), June 2020



Mailed dosimetry intercomparison for ocular proton RT facilities (IFJ PAN, Cracovia, PL)



TLD, alanine,
Gafchromic film



End-to-end test: IMRT and protons

Background and purpose: In the next few years the number of facilities providing ion beam therapy with scanning beams will increase. An auditing process based on an end-to-end test (including CT imaging, planning and dose delivery) could help new ion therapy centres to validate their entire logistic chain of radiation delivery. An end-to-end procedure was designed and tested in both scanned proton and carbon ion beams, which may also serve as a dosimetric credentialing procedure for clinical trials in the future. The developed procedure is focused only on physical dose delivery and the validation of the biological dose is out of scope of the current work.



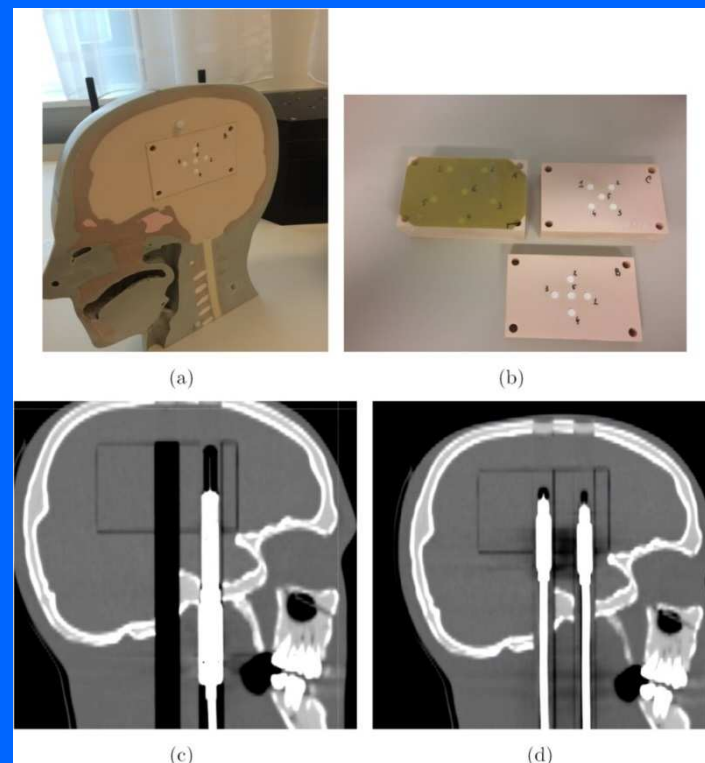
PAPER

End-to-end tests using alanine dosimetry in scanned proton beams

A Carlino^{1,3}, C Gouldstone², G Kragl¹, E Traneus⁴, M Marrale³, S Vatnitsky¹, M Stock¹ and H Palmans^{1,2}


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Campo misto di radiazioni e dip. risposta rivelatori solidi da E, LET (quenching effect): correzioni sino al 3.5% con simulazioni Monte Carlo



Radiotherapy and Oncology 108 (2013) 99–106

Contents lists available at SciVerse ScienceDirect



Radiotherapy and Oncology

journal homepage: www.thegreenjournal.com

Dosimetry

Dosimetry auditing procedure with alanine dosimeters for light ion beam therapy

Alexander Ableitinger^{a,*}, Stanislav Vatnitsky^a, Rochus Herrmann^{d,e}, Niels Bassler^{d,e}, Hugo Palm Peter Sharpe^f, Swantje Ecker^h, Naved Chaudhri^h, Oliver Jäkel^{g,h}, Dietmar Georg^{b,c}

Currently the Radiological Physics Center (RPC) is auditing proton facilities following a procedure based on OSLDs and TLDs [36]. However, these detectors used by RPC for dosimetry measurements may not provide suitable accuracy for scanned carbon beams as the LET dependence for TL detectors requires serious effort in understanding and evaluation of correction factors [37,38].

Contrary to TLDs, where the correction factors for scanning carbon beams are not yet established, the presented results for the alanine dosimeters, based on specific corrections, show an excellent match with the prescribed dose and the Farmer chamber measurements. Hence, the relative effectiveness calculated by MC simulations seems to be validated for the different detector positions. Furthermore the uncertainty levels for the alanine dosimeters are nearly the same as for Farmer chambers.

The Italian National Centre for Oncological Hadrontherapy (CNAO) has been treating patients since 2011 with carbon-ion beams using the active-scanning modality. In such irradiation modality, the beam spot, which scans the treatment area, is characterised by very high particle-fluence rates (more than $10^5 \text{ s}^{-1} \text{ mm}^{-2}$). Moreover, the Bragg-peak is only $\sim 1 \text{ mm-FWHM}$. Commercial tissue-equivalent proportional counters (TEPC), like the Far West Technologies LET- $1/2$, are large, hence they have limited capability to measure at high counting fluence rates. In this study we have used two home-made detectors, a mini-TEPC 0.81 mm^2 in sensitive area and a silicon telescope 0.125 mm^2 in sensitive area, to perform microdosimetric measurements in the therapeutic carbon-ion beam of CNAO. A monoenergetic carbon-ion beam of $189.5 \pm 0.3 \text{ MeV/u}$ scanning a $3 \times 3 \text{ cm}^2$ area has been used. Spectral differences are visible in the low y -value region, but the mean microdosimetric values, measured with the two detectors, result to be pretty consistent, as well as the microdosimetric spectra in the high y -value region.

Radiation Protection Dosimetry (2018), Vol. 180, No. 1-4, pp. 157-161
Advance Access publication 26 October 2017

doi:10.1093/rpd/nx217

MICRODOSIMETRIC STUDY AT THE CNAO ACTIVE-SCANNING CARBON-ION BEAM

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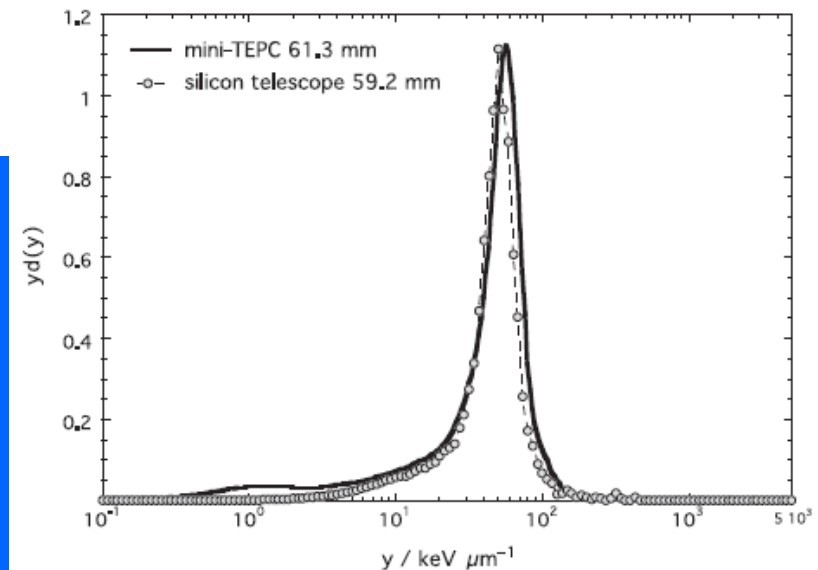


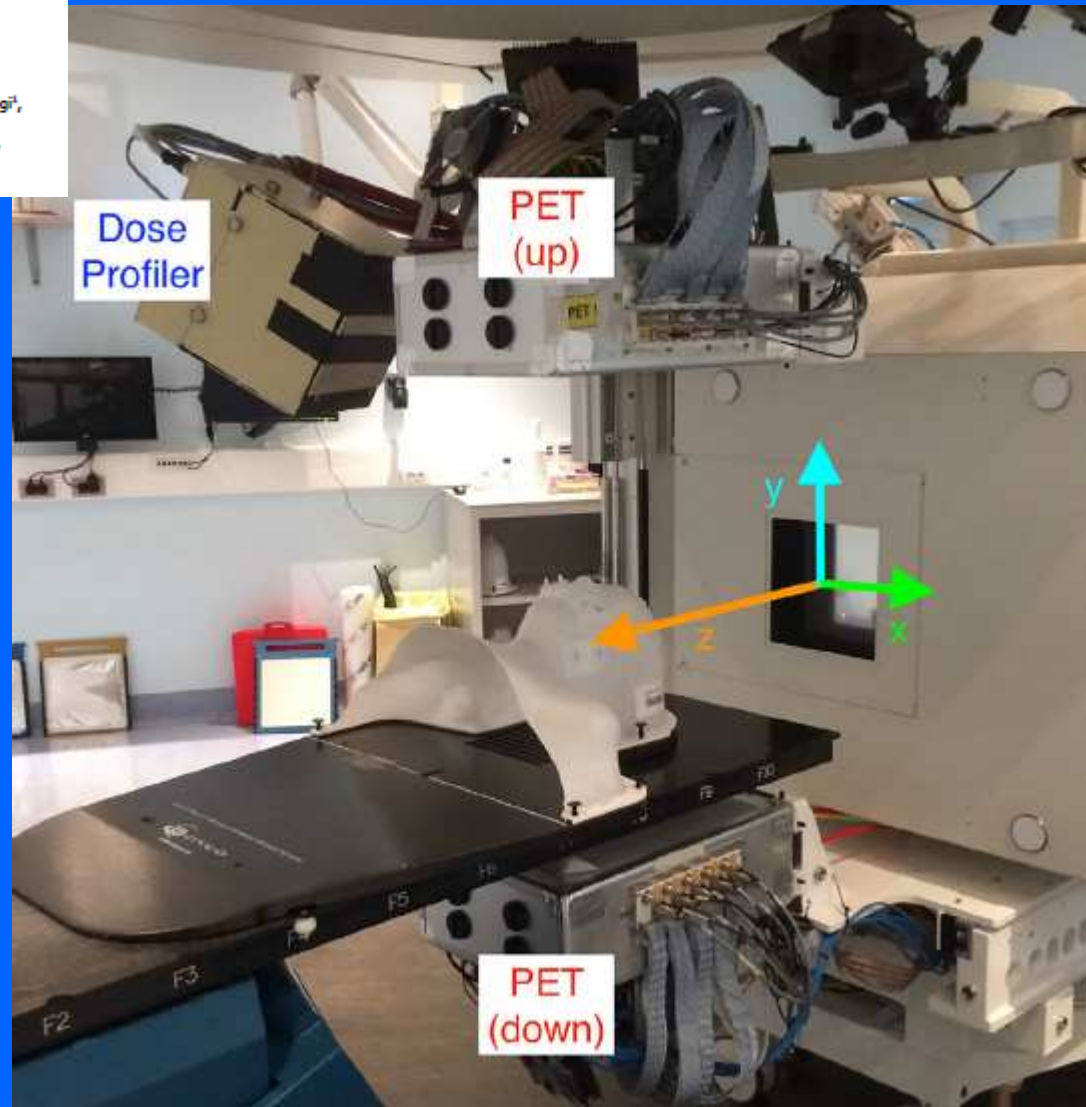
Figure 2. Microdosimetric spectra upstream of the proximal Bragg peak rise.

OPEN

Inter-fractional monitoring of ¹²C ions treatments: results from a clinical trial at the CNAO facility

M. Fischetti^{1,3}, G. Baroni^{2,4}, G. Battistoni^{7,8}, G. Bisogni^{7,9}, P. Cerello¹⁰, M. Ciocca¹¹, P. De Maria¹⁰, M. De Simoni^{1,3}, B. Di Lillo^{1,3}, M. Donetti¹⁰, Y. Dong^{4,12}, A. Embriaco¹³, V. Ferraro¹⁰, E. Fiorina^{14,15}, G. Franciosini^{1,3}, F. Galenta¹, A. Krasan⁷, C. Luongo^{1,14}, M. Magi¹, C. Mancini-Terreciano^{1,3}, M. Marafini^{1,4}, E. Malekzadeh¹¹, I. Matta^{1,4}, E. Mezzoni¹, R. Mirabelli^{1,4,14}, A. Mirandola¹¹, M. Morrocchi^{7,9}, S. Muraro⁴, V. Patera^{1,11,15}, F. Pennazio¹⁰, A. Schiavi^{1,3}, A. Sciubba^{1,4,14}, E. Solfaroli Camillocci^{1,11,15}, G. Sportelli^{7,9}, S. Tampellini¹¹, M. Toppi^{1,4,15}, G. Traini^{1,4}, S. M. Valle⁴, B. Vischioni¹¹, V. Vitolo¹¹ & A. Sarti^{1,4,14}

In-vivo range monitoring



Monitoring Carbon Ion Beams Transverse Position Detecting Charged Secondary Fragments: Results From Patient Treatment Performed at CNAO

OPEN ACCESS

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