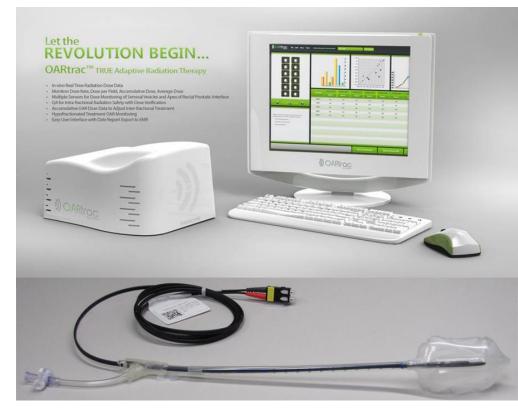
# Dosimetry for Balloon-based Radiation Therapy

Workshop on Opportunities with Detector Technologies in Nuclear Physics

Catholic University of America January 2018

Cynthia Keppel, Jefferson Lab (with help from Steve Gelmine, Radiadyne)









### **Balloon use in External Beam Radiation Therapy**

Over 50% of (USA) cancer patients receive radiation treatment for localized disease sites, mostly delivered via an external beam (X-ray, proton,..)



# Patient immobilization can be critical – *internal structures as well!*

How to accomplish this?....



- Immobilizes the prostate
- Reduces movement variation between treatments
- Displaces posterior and superior rectum away from the field
- Reduce rectal toxicity by decreasing the volume of the rectal wall being irradiated
- May allow for physicians to reduce PTV/treatment margins
- Facilitates dose escalation/hypofractionated treatments
- Is well tolerated by prostate patients



# balloon



### "Brachy" = near, short distance: Internal

Radioactive seeds or sources are placed in or near the tumor, delivering a high radiation dose to the tumor while reducing the radiation exposure to surrounding healthy tissues.

- Where possible, allows delivery of higher doses of radiation to more-specific areas
- Typically causes fewer side effects than does external beam radiation, and the overall treatment time is usually shorter

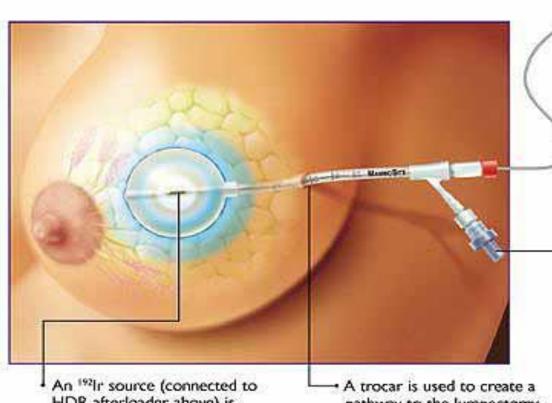


Used to treat brain, breast, lung, pancreas, prostate, esophagus, cervix,....

### Where do balloons come in?



### **Example: Brachytherapy for Partial Breast Irradiation**



- An <sup>192</sup>Ir source (connected to HDR afterloader, above) is positioned within the center of the MammoSite balloon to deliver a highly conformal dose to the area immediately surrounding the resected tumor
- A trocar is used to create a pathway to the lumpectomy cavity for insertion of the catheter
- The MammoSite RTS is inflated with saline to allow the surrounding tissue to conform to the balloon



- Radiation is delivered via a high-dose rate (HDR) remote afterloader under precise computer control
- The MammoSite RTS is compatible with Nucletron, Varian, and GammaMed<sup>®</sup> HDR afterloader equipment
- Shorter course of treatment
- Reduced local recurrence rates (0-3%)



### "Active Catheter" Development at Hampton University

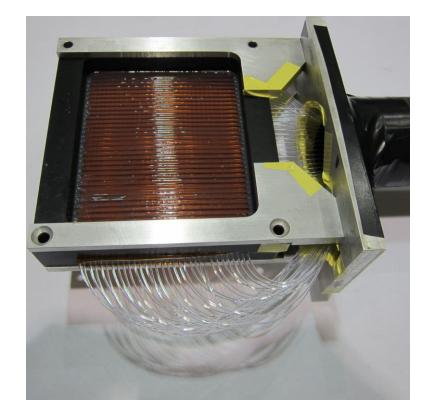
# • NO real time dose distribution feedback!

HDR Brachytherapy dose calculations are based on computer simulations and *in-vitro* measurements. It is difficult to set a tolerance level because according to AAPM's TG56: *"no practical and validated dose measurement technology is available to the hospital physicist".* 

- Can be large doses
- In-vivo dose measurements would allow for real time evaluation of dose delivered to patient.

•Increase patient safety since the detector may be used for dose-at-a-point confirmation or to monitor dose absorbed by critical organs.

• <u>Idea:</u> What about scintillating fibers (used in nuclear physics) placed INSIDE the catheters?



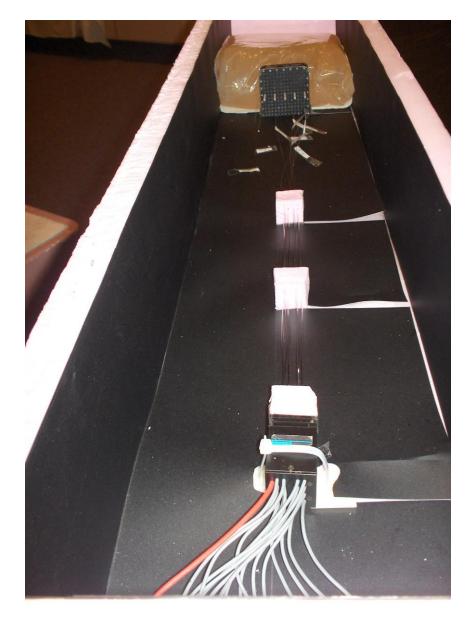
Scintillating fiber array for APEX experiment at Jefferson Lab



# Scintillating Fiber Dosimetry

- Hair-like, bendable, radiation sensitive detectors
- Produce light output proportional to dose delivered
- Couple to straightforward electronics



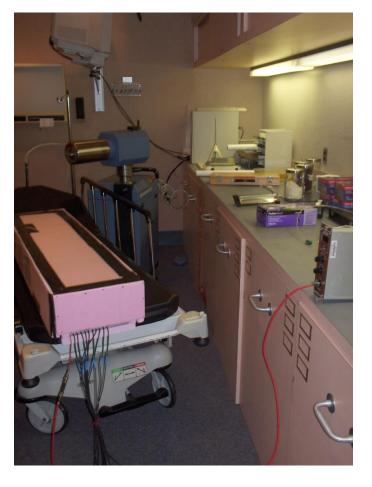


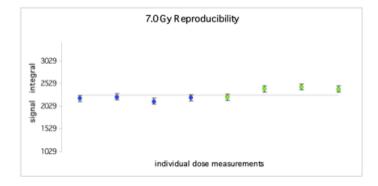
First test set-up: used gelatin mold and brachytherapy surgery metallic template to hold the fibers in place, coupled to Hamamatsu PSPMT



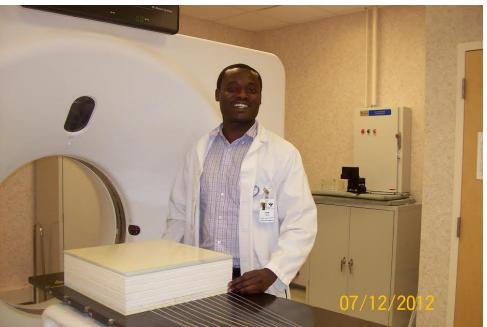


- Students (at that time) Lawrence Tynes, Melissa Barruzza, Carlos Velasco
- HDR unit at Bon Secours DePaul Hospital in Norfolk, VA
- Dose reproducibility studies (also with water phantom and MOSFETs) looked positive....



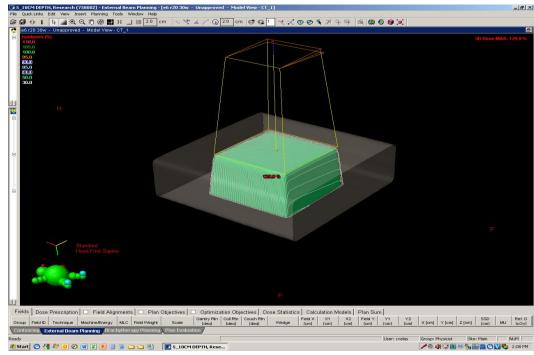






Continued testing...

- Instrumented a solid water phantom
- Compared to full treatment plan (as well as GEANT4)
- External beam irradiation
- Determined calibration procedure
- Thesis for (then) doctoral student John Okine



### Fast forward...

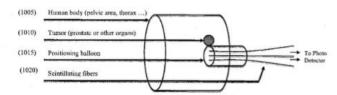
• We patented the technology....



#### 19) United States

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(71)	Applicant:	Hampton University, Hampton, VA (US)		CPC	A61B 6/425 G01T 1/164		
(72)	Inventors:	Cynthia E. KEPPEL, Norfolk, VA (US); Paul Gueye, Hampton, VA (US); Christopher Sinesi, Virginia Beach, VA		USPC			600/436
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Exemplary schematic of a positioning balloon with one or multiple scintillating fibers as an invivo or ex-vivo dosimetry monitoring quality assurance system



Small note: Dosimetric approach also suggested for use in brachytherapy catheters (non-balloon type)



### ...and it was licensed

List of OARtrac<sup>®</sup> Patents from Radiadyne web page:

US 8603129 B2 US 8885986 B2 US 8953912 B2 \*US 7662083 \*US 8133167 B2 \*US 20140018675



\*Hampton University patents developed by HU/JLab Center for Advanced Medical Instrumentation – *licensed to Radiadyne* 



...and Radiadyne put in a lot of time, effort, investment, cleverness, dedication - and beyond to bring it to market...



### **RADIADYNE**

»)OARtrac® ⊕plus

# Transformation in Dosimetry Monitoring

After eight years and millions of dollars invested in research and development, OARtrac<sup>®</sup> Plus is the first of its kind radiation dose monitoring platform providing gold standard accuracy without correction factors, real-time pinpoint measurement, and dedicated intracavitary delivery devices to measure where it counts.

OARtrac<sup>®</sup> Plus monitors multiple cancer treatment modalities within the same treatment center, as well as reduces overall treatment costs related to routine patient dose monitoring through a reusable dosimeter.

# Micro size. Max Performance.



Simple Localization Radiopaque Sensor

Actual size 0.5 mm diameter x 2 mm length

> MR Compatible Threaded Connector

> > Patient Unique ID RFID Chip

# Interpose Plastic Scintillating Detector



#### Water Equivalent

PSD Sensors are manufactured using water equivalent materials and will not perturb the energy deposition process.



### FDA Cleared For Reusability

Up to five times with no additional correction factors for cost effective clinical adoption.



#### **Consistent Repeatability**

Excellent precision and repeatable data without degradation of dose response or additional correction factors.



#### **Excellent Accuracy**

Highly accurate pinpoint measurement in real-time, and exhibits excellent energy independence.

# Dose Monitoring at Light Speed

The scintillation light created from radiation interaction is emitted within nanoseconds down the fiber optic cable to the clinical detector unit for real-time measurement.

# Clinical Detector Unit Millisecond Processing



### Low Energy Dependence

Monitor dose from a low to high energy range (0.2Mev to 20Mev) with no correction factors.



### Four Sensor Ports

Measure up to four anatomical readings simultaneously with color coded microPSD sensors.



#### **Real-Time Dose Measurement**

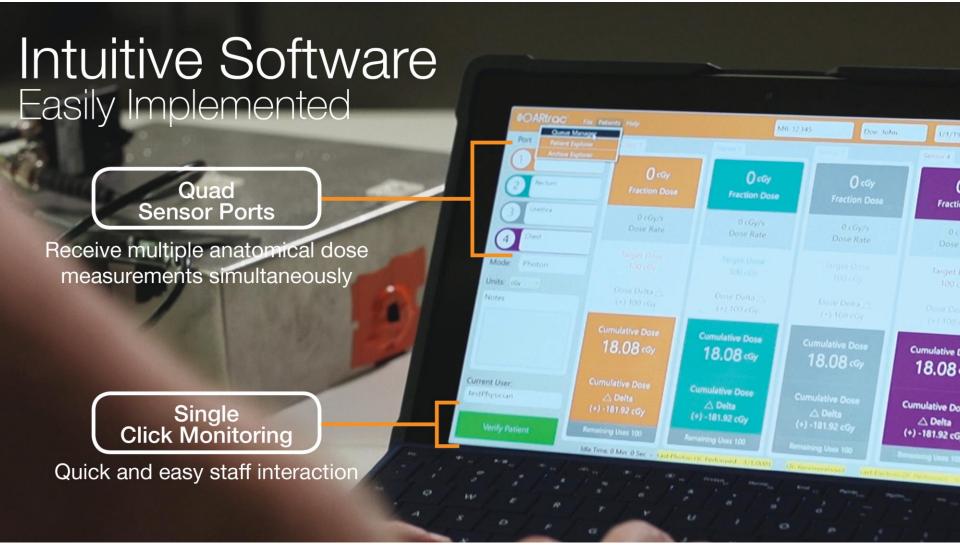
Sub-second processing speed providing valuable data for adaptive radiotherapy.



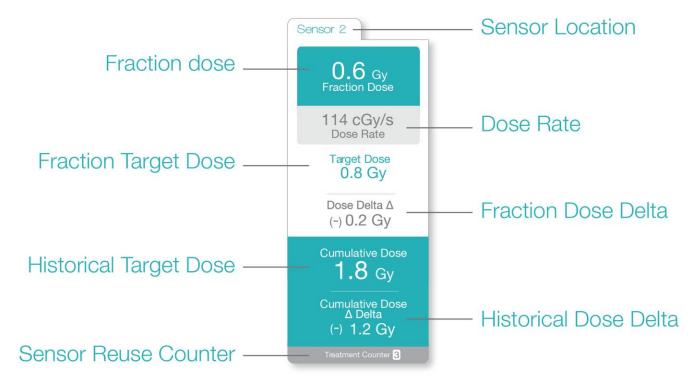
#### **Monitors Multiple Modalities**

Universally measures dose for SBRT, IMRT, Cyberknife, Electron\*, and HDR Brachytherapy treatment modalities.

\*pending FDA clearance



# Comprehensive Data Captures Intrafractional & Historical Dose



# Intracavitary Devices Measure Dose Where It Counts





# Universal Capabilities Specific Anatomical Monitoring



#### **Endorectal Balloon**

Stabilizes the Prostate and provides realtime dose measurement at the rectal prostatic interface.



### Skin With Bolus

Measures skin dose for Photon, Electron\* and HDR Brachytherapy, as well as entrance dose.



### **Urinary Catheter\***

Sterile MR microPSD compatible with commercially available urinary catheters for point dose measurements.



Vaginal Cylinder & Vaginal Balloon Packing\* Provides real-time dose information for the organs at risk during GYN treatments.

**Future Applications -** multiple delivery devices in final stages of development for head & neck and in situ applications.\*

\*pending FDA clearance

# Plug and Play

Precalibrated sensors offer easy routine clinical dose monitoring for the Therapist, Physicist, and Radiation Oncologist.

# How It Works Simple Workflow For Routine Use



# Significant Clinical Advantages Over OSLDs, TLDs, and MOSFETs

The OARtrac<sup>®</sup> Plus Platform Offers Real-Time In-Vivo Dose Data For True Adaptive Radiotherapy

# 

# Simple. Accurate. Real-Time. Know Your Dose

Delores Smith, MD Radiation Oncologist

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# Thank you!

https://vimeo.com/236786553





