

# Spatially Fractionated Radiation Therapy to optimise LhARA

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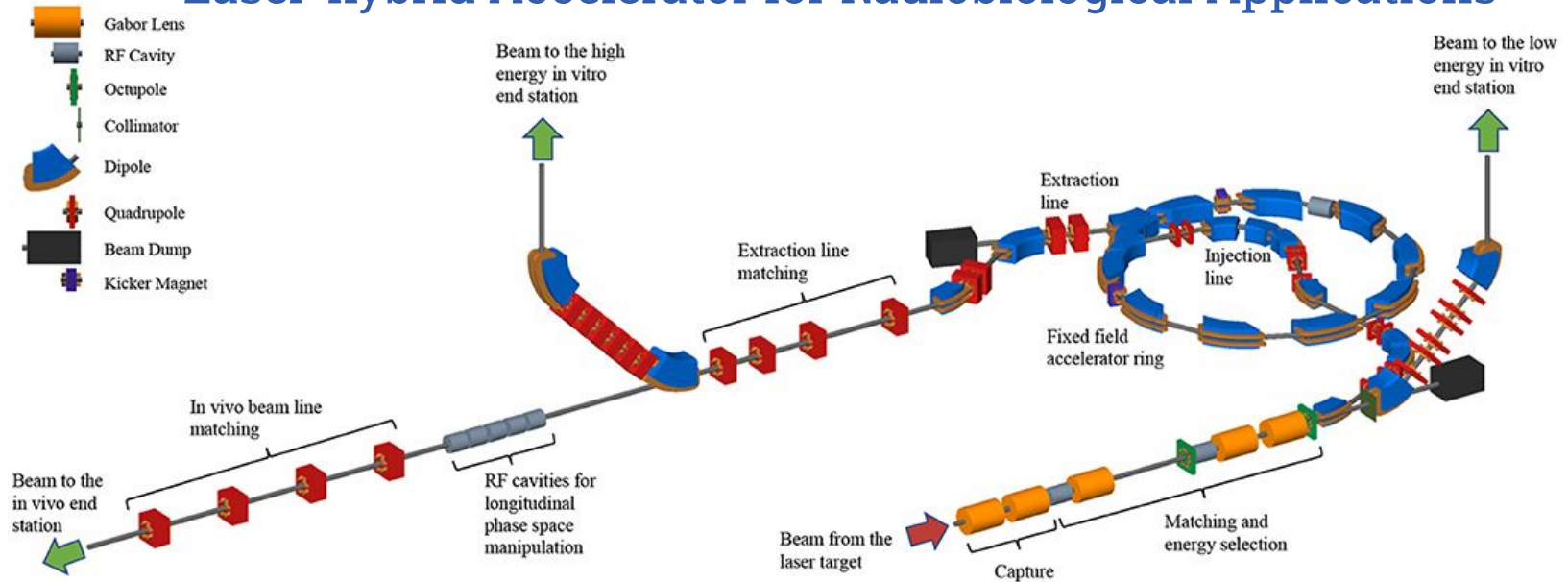
Josie McGarrigle



Imperial College  
London

# LhARA

## Laser-hybrid Accelerator for Radiobiological Applications



### Flexible facility

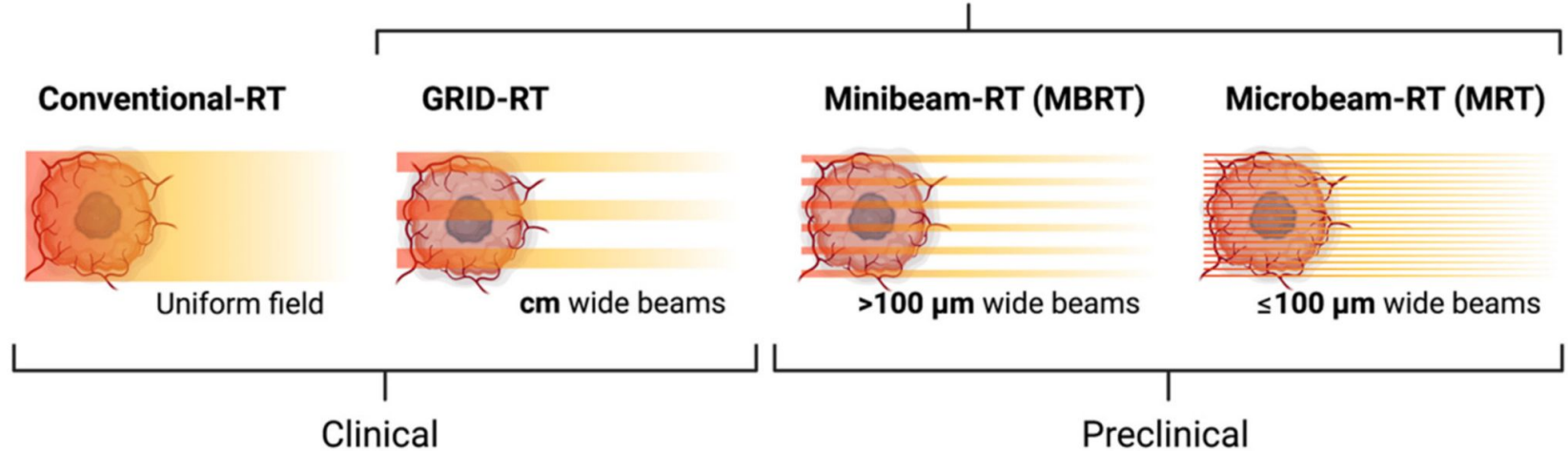
- dedicated to the study of the biological response to ionising radiation.

### Beam sizes

- allow for new radiotherapy modalities e.g. ultra-high dose rates and spatially fractionated radiotherapy delivered in these end stations.

# SFRT

## Spatially Fractionated Radiation Therapy (SFRT)



## SFRT

separates the beam into fractions to minimise the exposure regions, sparing the normal-tissue during treatment.

## MRT

Microbeam Radiation Therapy:  
 $\leq 100 \mu\text{m}$  width beamlets

## MBRT

Minibeam Radiation Therapy:  
 $> 100 \mu\text{m}$  width beamlets

# Literature Review Analysis

3 slit collimator & the associated distribution:

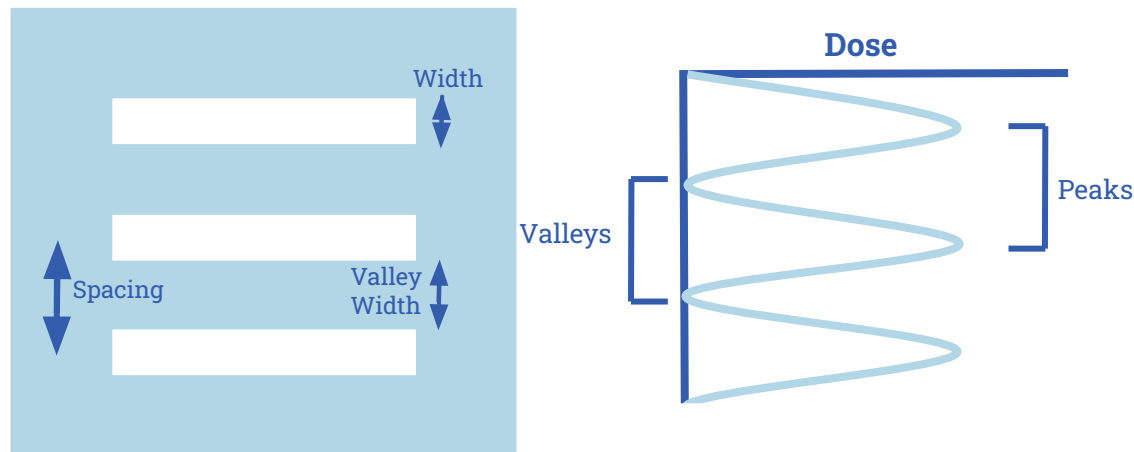
SFRT parameters:

## The Geometric Parameters:

- Width ( $\mu\text{m}$ )
- Spacing ( $\mu\text{m}$ )
- Valley Width ( $\mu\text{m}$ )
- % Peak Dose
- % Valley Dose

## The Dosimetric Parameters:

- Volume Average Dose (Gy)
- Peak Dose (Gy)
- Valley Dose (Gy)
- PVDR (Peak-Valley-Dose-Ratio)

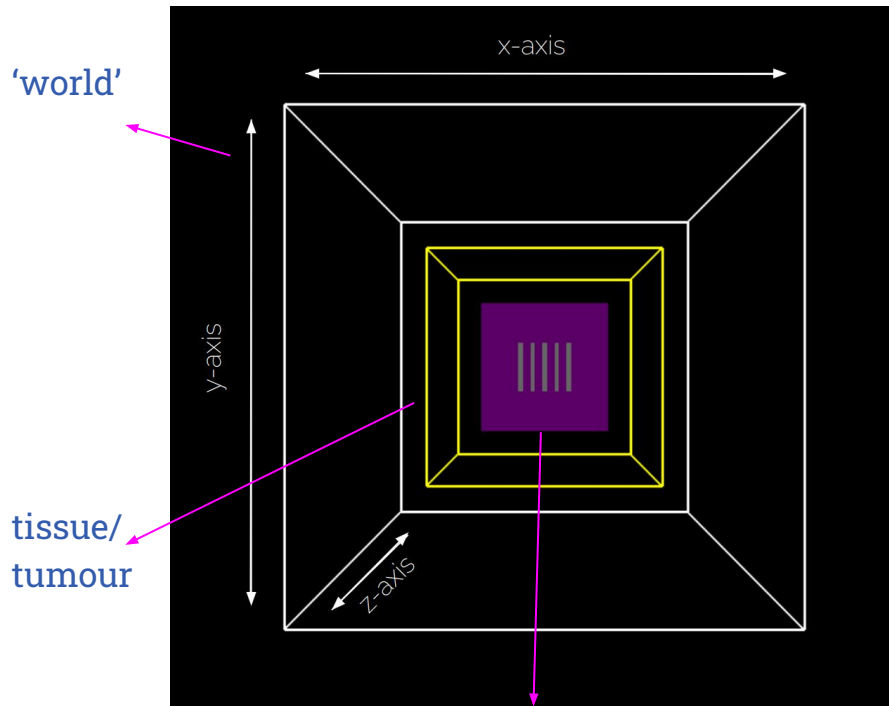


$$\% \text{ Valley Dose} = 100 * (\text{Spacing} / \text{Width})$$

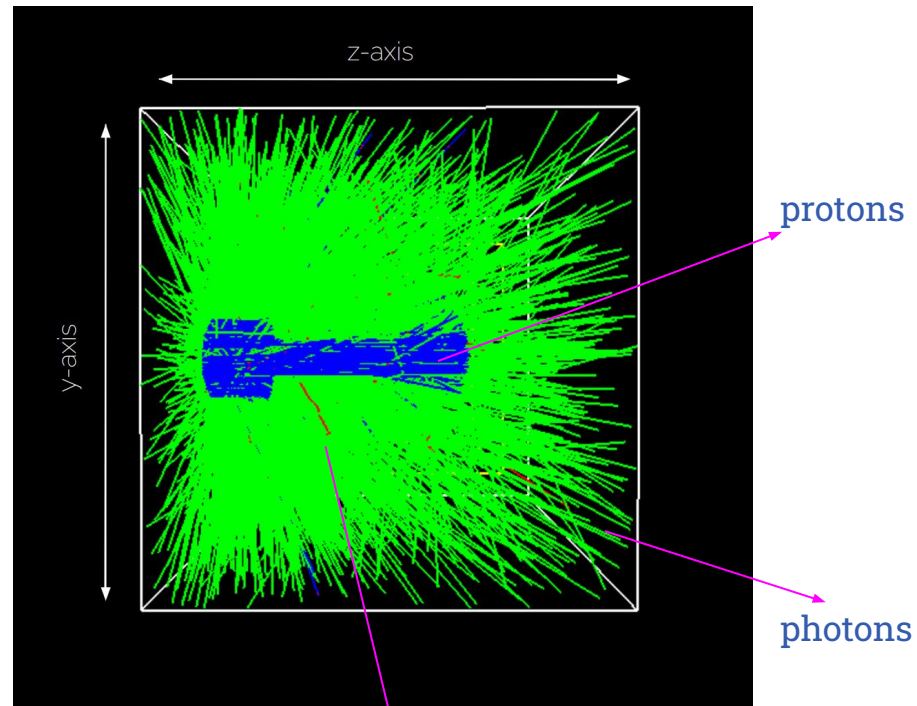
$$\% \text{ Peak Dose} = 100 * (\text{Width} / \text{Spacing})$$

$$\text{PVDR} = 100 * (\text{Peak Dose} / \text{Valley Dose})$$

# TOPAS Set-Up

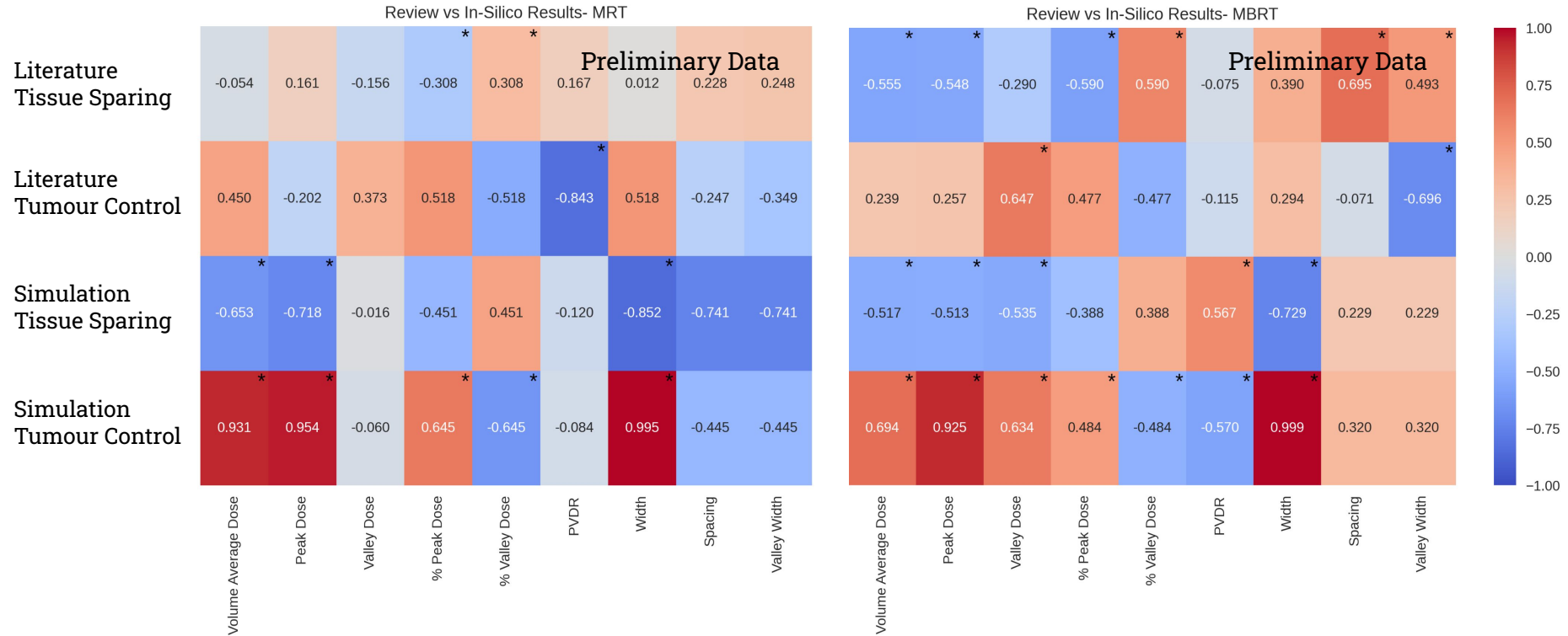


SFRT collimator

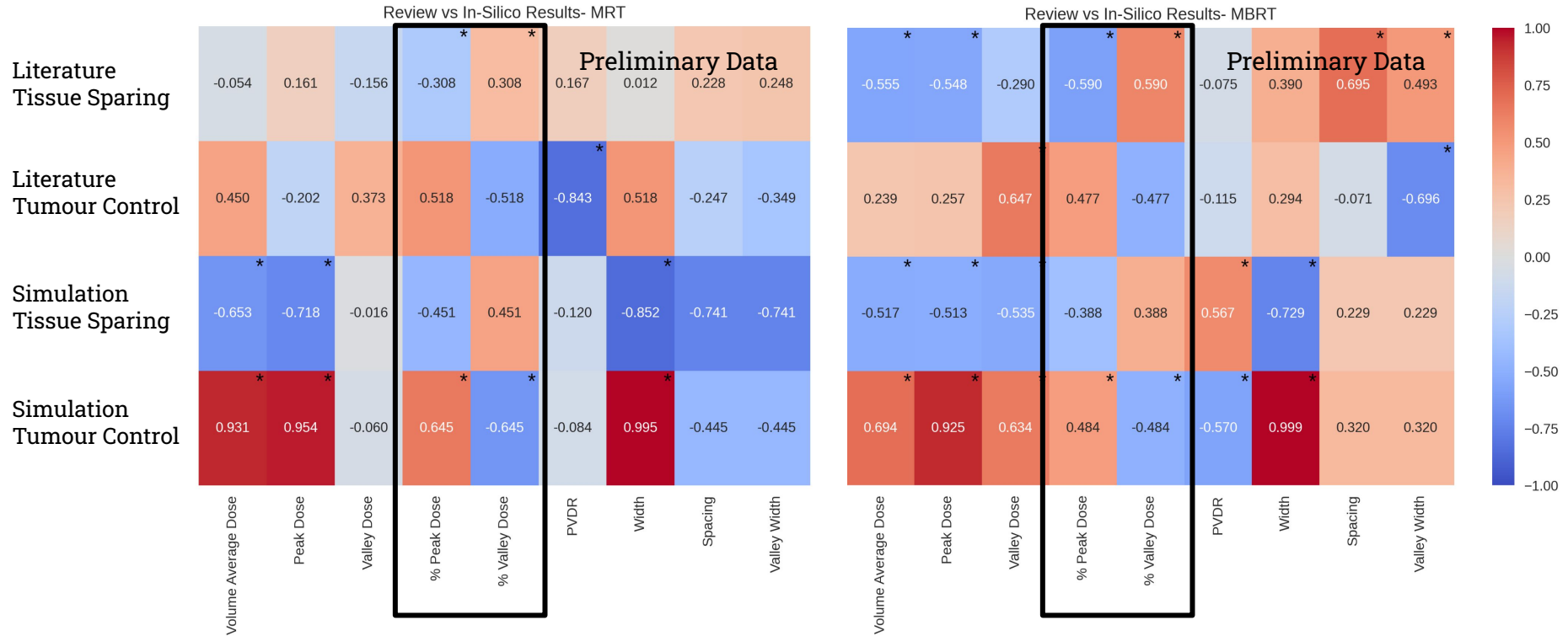


positrons

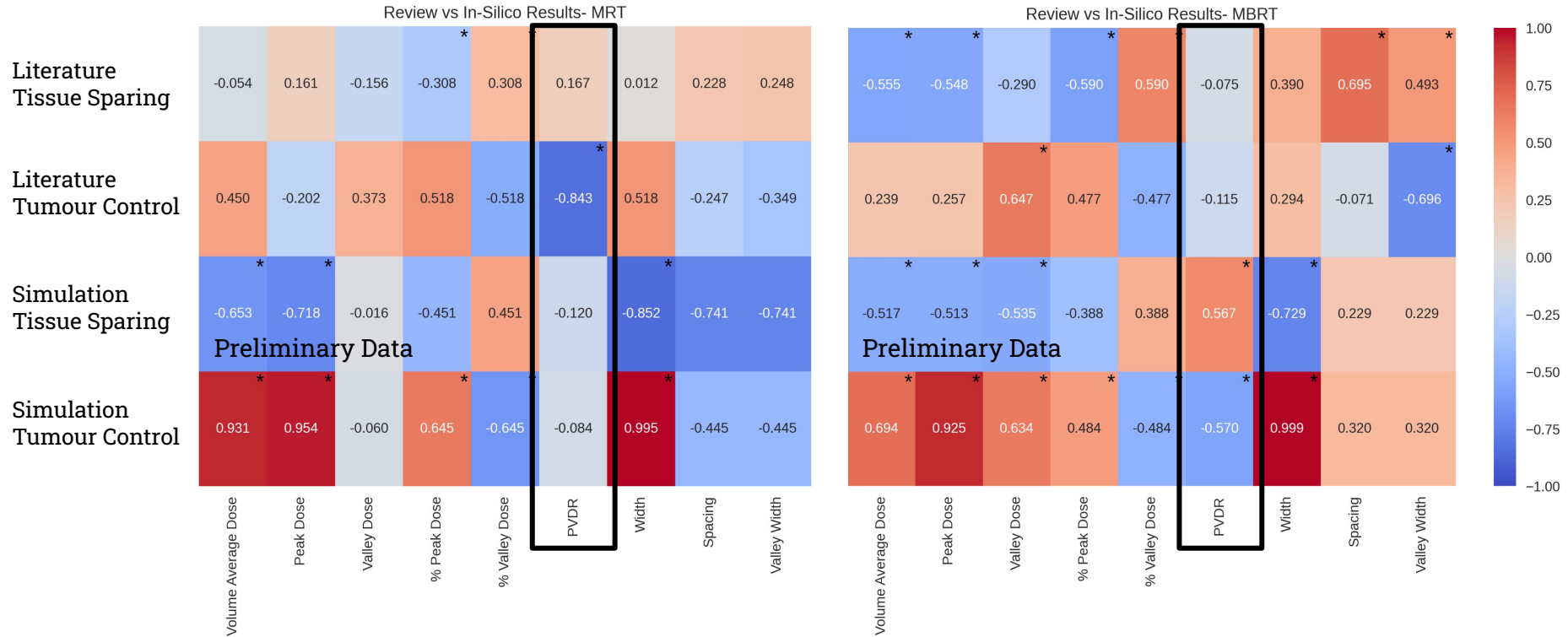
# Literature vs Model correlation coefficients



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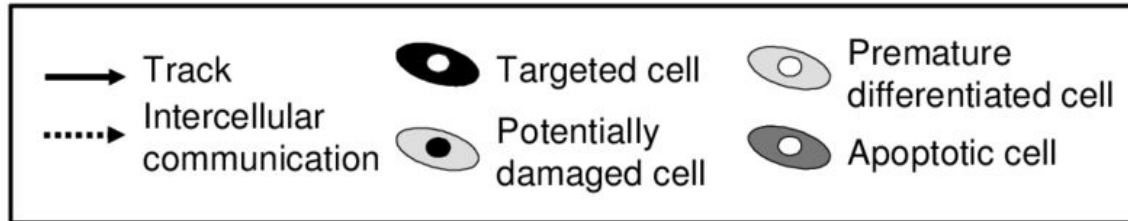
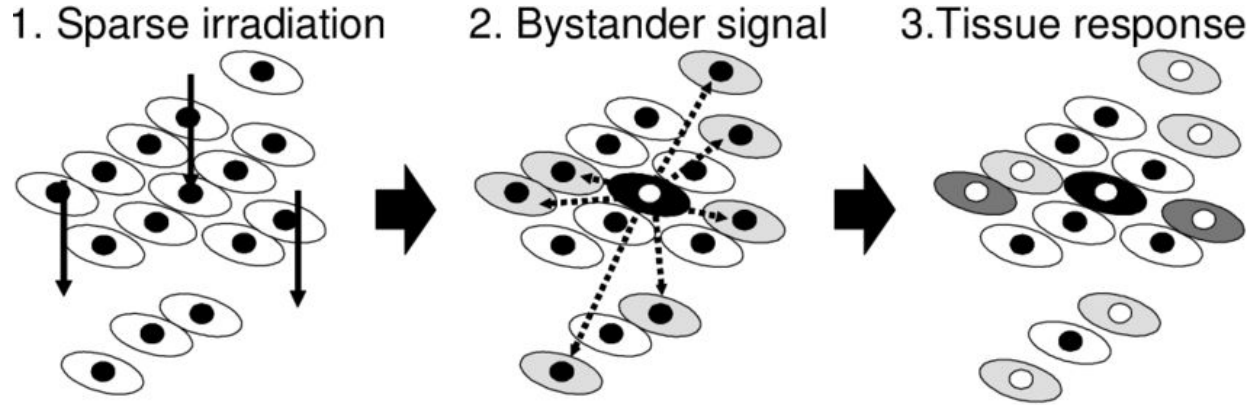


# Literature vs Model correlation coefficients



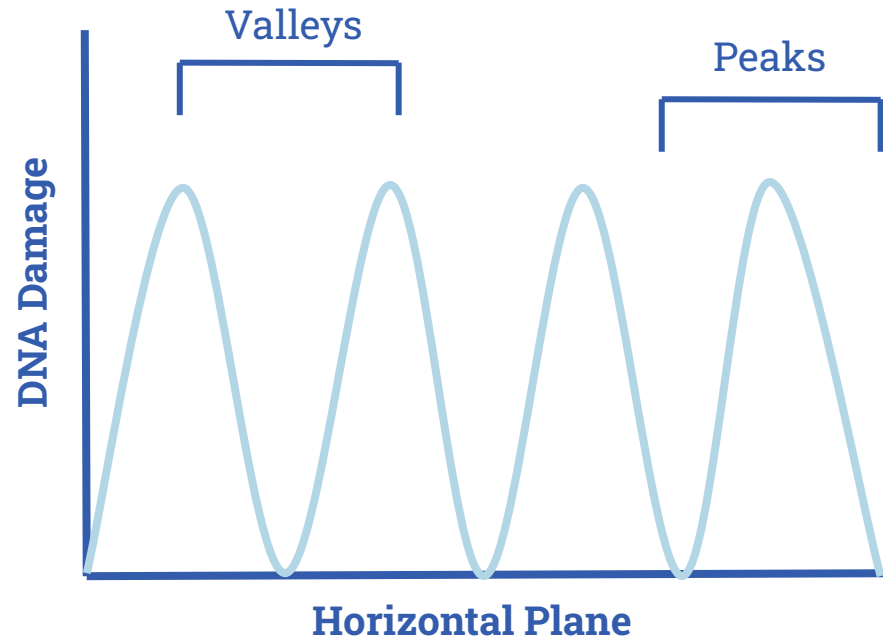


# The Radiation Bystander Effect

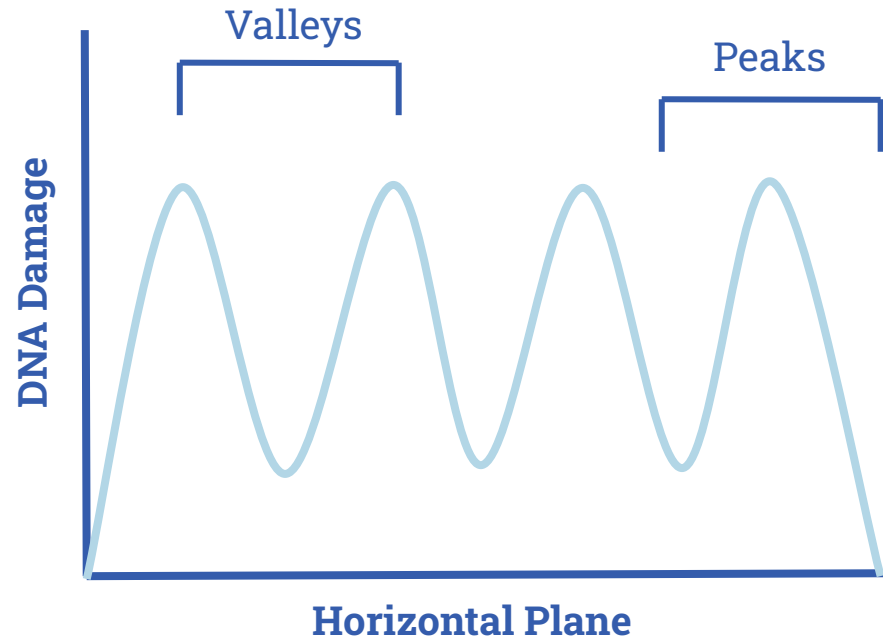


Ref: Little et. al (2008) URL: <https://tinyurl.com/cx5vakjf>

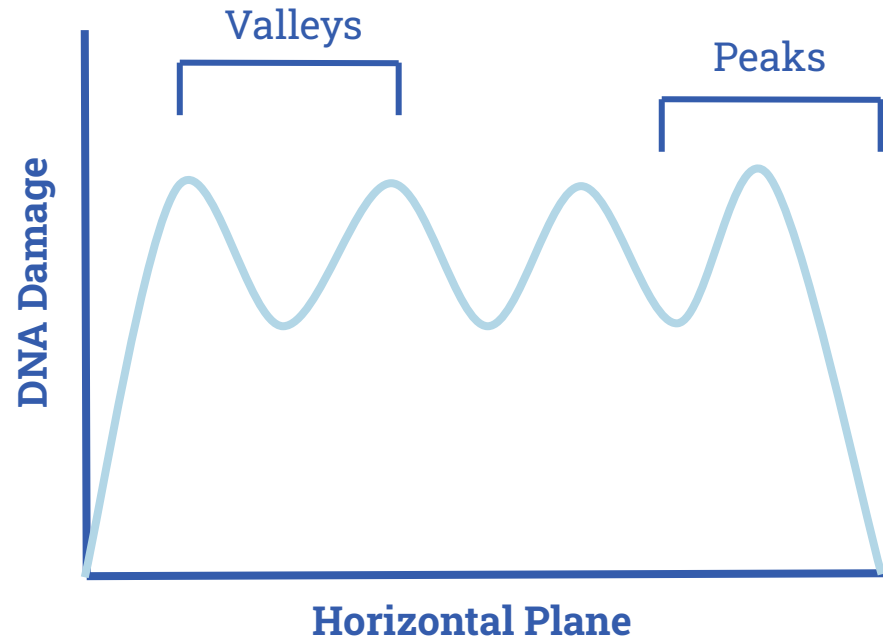
# SFRT and the Bystander Effect



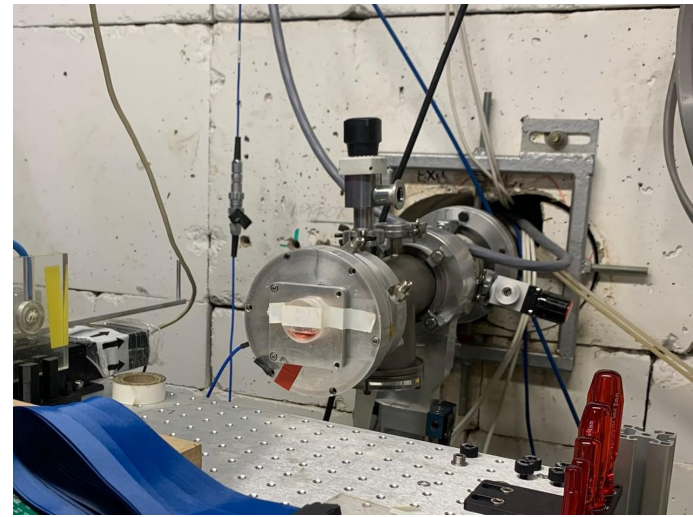
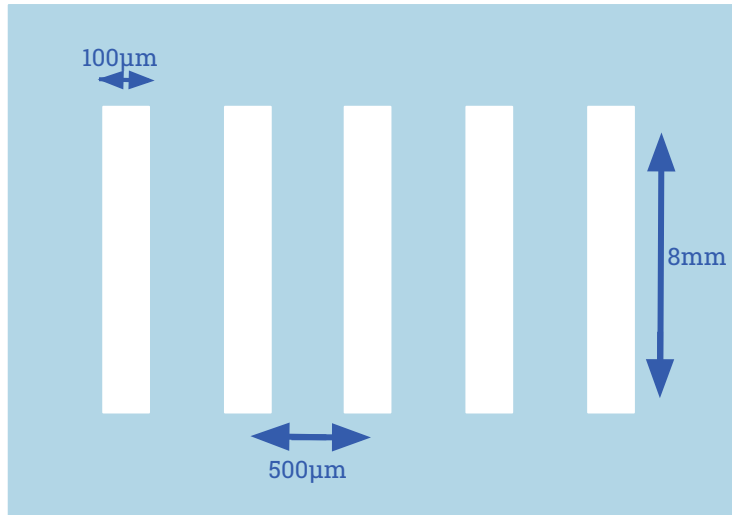
# SFRT and the Bystander Effect



# SFRT and the Bystander Effect

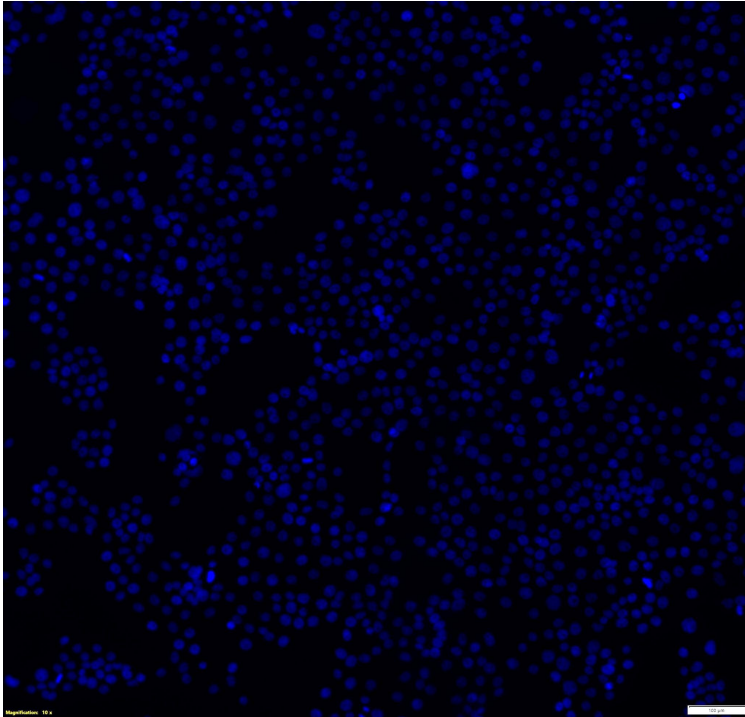


# $\gamma$ h2AX Bystander Effect Detection

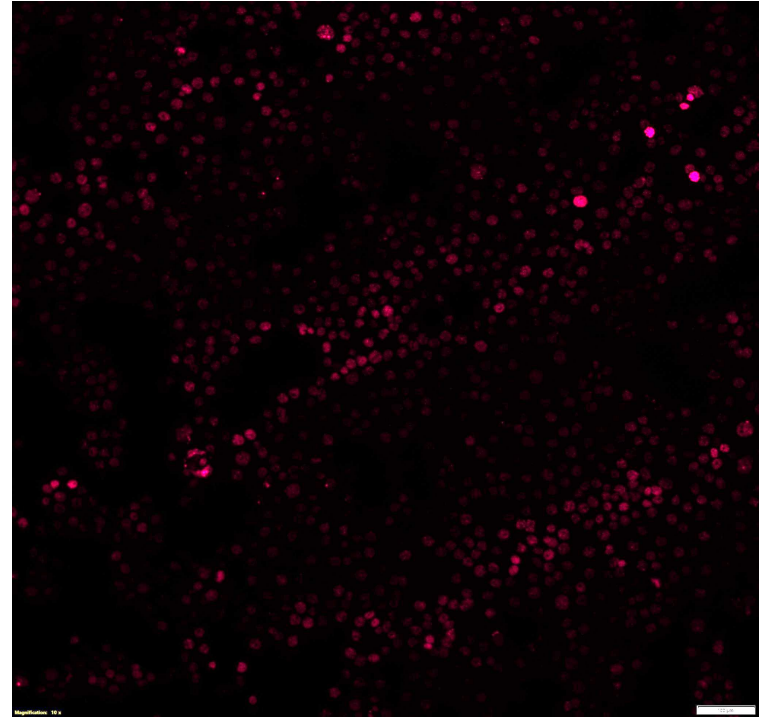


	Dose	4Gy	10Gy
Time post MRT	1 hour	x2	x2
	4 hours	x2	x2
	8 hours	x2	x2
	24 hours	x2	x2

# Fluorescent Images



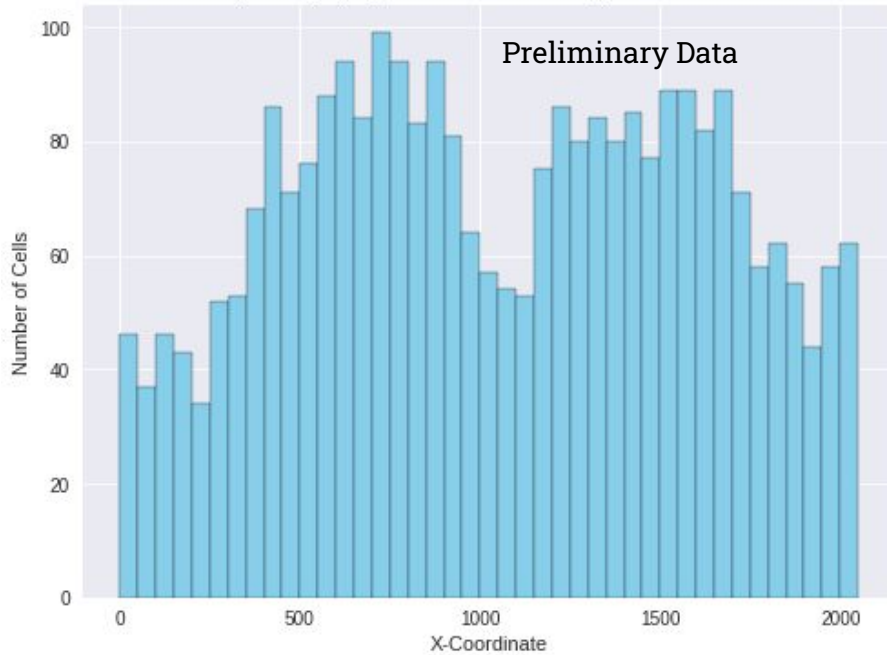
Dapi stain image (all nuclei)



$\gamma$ h2AX stain image (damaged nuclei)

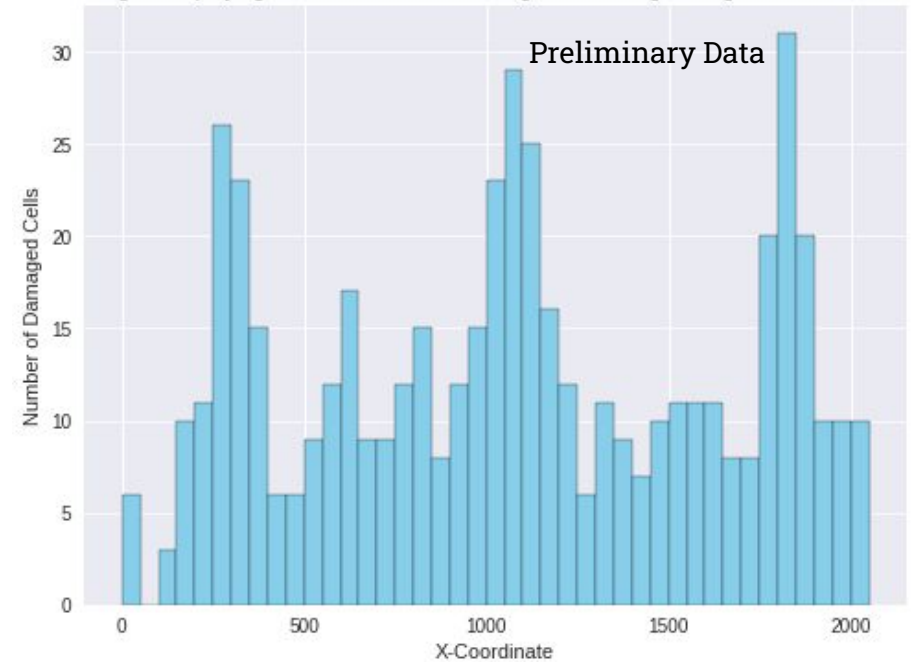
# Binning Dapi and $\gamma$ h2AX Images

Histogram Displaying Number of Cells Along the Horizontal Axis



Dapi co-ordinate histogram (all nuclei)

Histogram Displaying Number of Cells Exhibiting DNA Damage Along the Horizontal Axis



$\gamma$ h2AX co-ordinate histogram (damaged nuclei)

# Gaussian Fitting

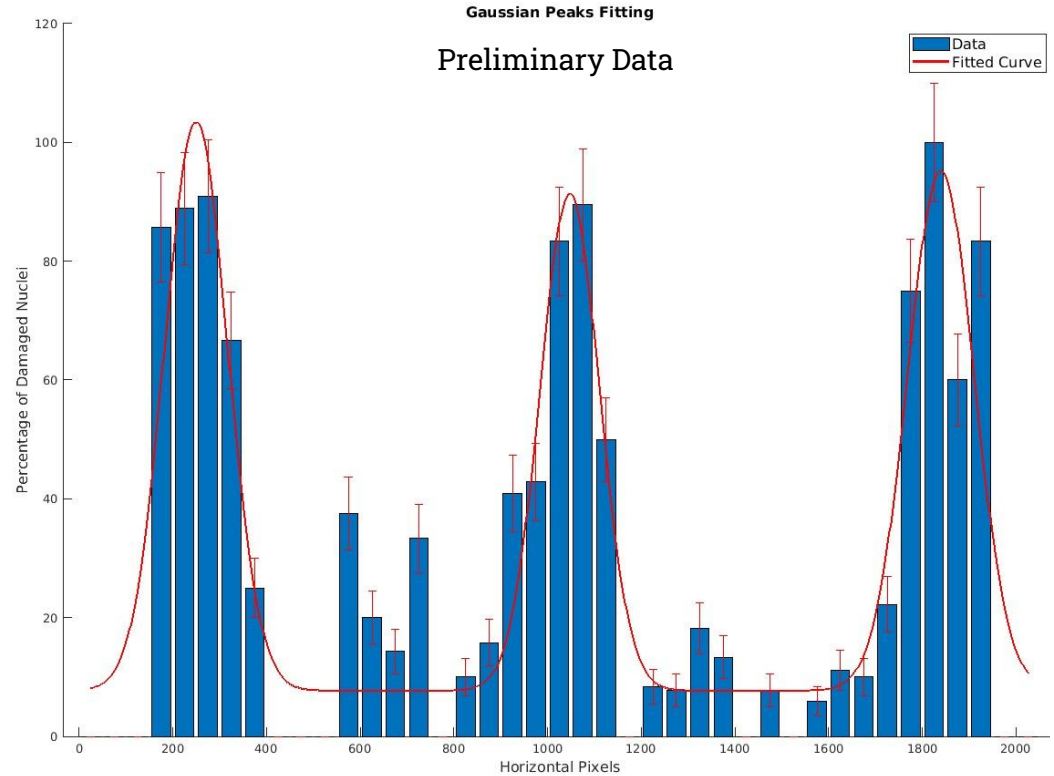
## Bin calculation:

$$\% \text{ damaged cells} = \left( \frac{\# \text{ damaged cells}}{\# \text{ total cells}} \right) \times 100$$

## Gaussian Fitting:

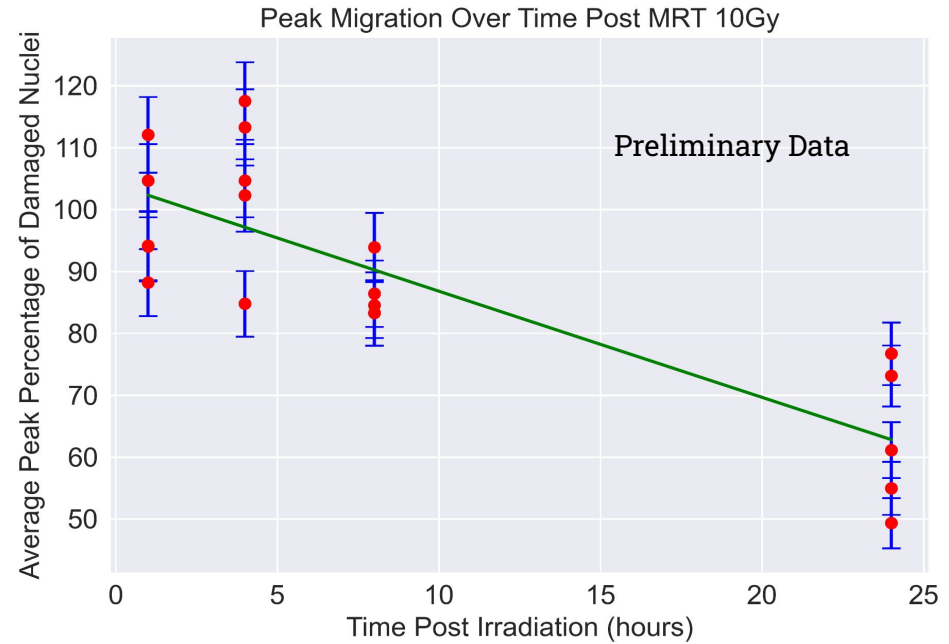
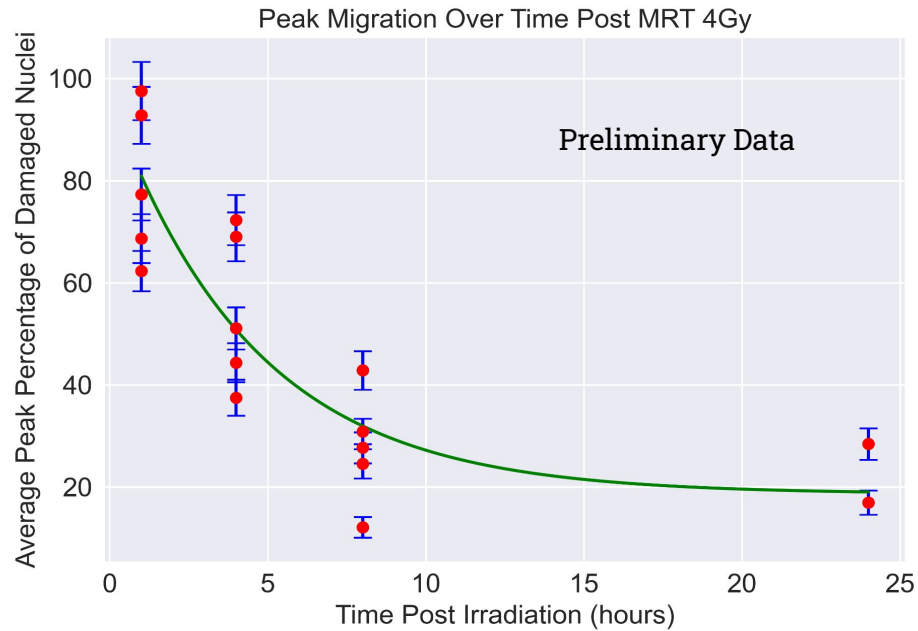
$$f(x) = A_1 \cdot e^{-\frac{(x-\mu_1)^2}{2\sigma_1^2}} + A_2 \cdot e^{-\frac{(x-\mu_2)^2}{2\sigma_2^2}} + A_3 \cdot e^{-\frac{(x-\mu_3)^2}{2\sigma_3^2}}$$

- $f(x)$ : The function describing the three-peak Gaussian curve as a function of  $x$ .
- $x$ : The independent variable (input) at which the function is evaluated.
- $A_i$ : Amplitude of the  $i^{\text{th}}$  Gaussian peak, controlling the height of each peak.
- $\mu_i$ : Mean or center of the  $i^{\text{th}}$  Gaussian peak, specifying its position along the  $x$ -axis.
- $\sigma_i$ : Standard deviation of the  $i^{\text{th}}$  Gaussian peak, determining its width or spread.

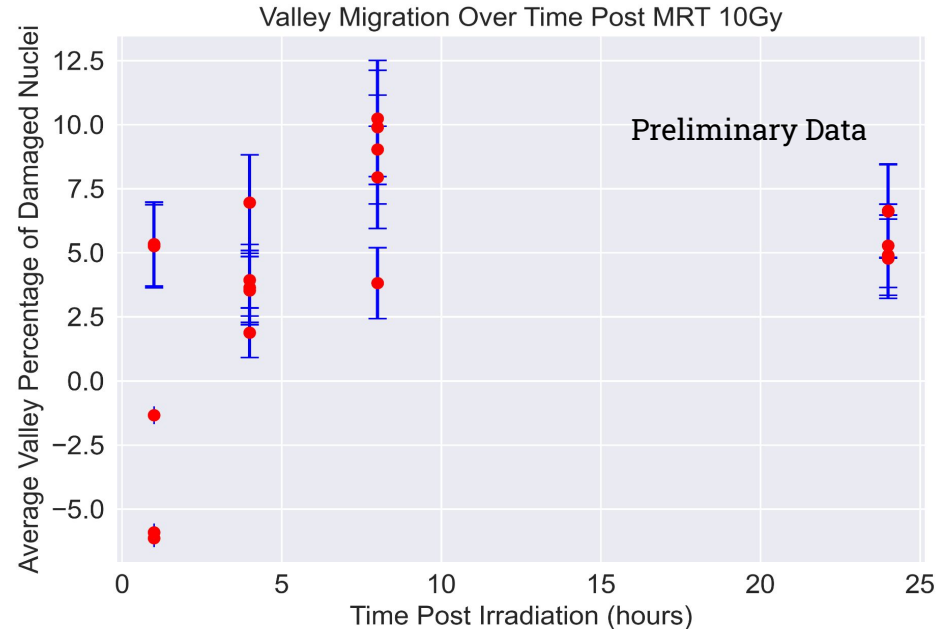
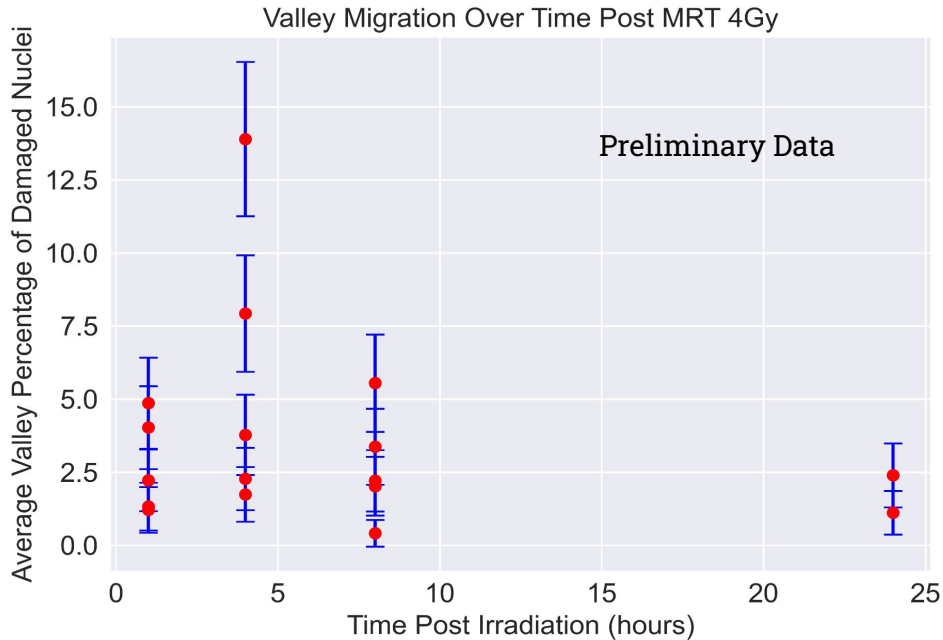




# Peak Migration (prelim data)



# Valley Migration (prelim data)



# Conclusions



## Literature Review

Emphasis on geometry- %Peak Dose/  
% Valley Dose statistically significant for  
both SFRT modalities, indicator for  
magnetic focussing at LhARA.



## Literature vs simulation

PDVR was different across both modalities,  
suggesting a linear model not suitable for  
predicting tissue effects for SFRT specifically  
when it comes to PDVR.



## In Vitro Bystander Experiment

Peaks decreased over time as damage  
repaired, whereas Valleys stayed stagnant.

# Thanks!

For further questions:

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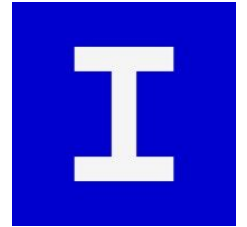
UNIVERSITY OF  
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- Jason Parsons (and team)
- Tony Price (and team)
- University of Birmingham MC40 specialists



institutCurie

- Yolanda Prezado (and team)



- Kenneth Long



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# Back-up



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# Literature Review Analysis

In order to explore the influences of different dosimetric parameters on the effectiveness of MRT and MBRT, searchable databases were created in order to evaluate normal-tissue sparing, tumour control and survival post irradiation with each modality.

<b>Score</b>	<b>Normal-tissue Sparing Score (NTSS)</b>	<b>Tumour Control Score (TCS)</b>
1	No radio-protection	No tumour control
2	Low level of radio-protection	Small amount of tumour control
3	Moderate radio-protection	Moderate tumour control
4	Fair radio-protection	Fair tumour control
5	Great radio-protection	Complete tumour control



# In-Silico Models

Both the TCP and NTCP models used by TOPAS are EUD-based modifications of the conventional Linear-Quadratic model.

## Tumour Control Probability (TCP)

The likelihood of a tumour being effectively controlled or eradicated by a radiation treatment.

$$TCP = \frac{1}{1 + \left( \frac{TD_{50}}{EUD^{Slope_{50} \cdot \gamma_{50}}} \right)}$$

$$EUD_T = \left( \sum_{i=1}^n v_i \cdot D_i^{\frac{1}{Slope_{50}}} \right)^{Slope_{50}}$$

## Normal-tissue Complication Probability (NTCP)

The likelihood that normal tissue will experience complications due to radiation exposure during treatment.

$$NTCP = \frac{1}{1 + \left( \frac{TD_{50}}{EUD^m \cdot \gamma} \right)}$$

$$EUD_N = \left( \sum_{i=1}^n v_i \cdot D_i^{1/m} \right)^m$$