

TRANSFORMING PROTON THERAPY

ProtonVDA pCT Update: Algorithms and Images

Ethan DeJongh, ProtonVDA LLC August 3, 2021

Proton Imaging can help reduce range uncertainties by directly measuring proton stopping power

We aim to:

Develop a proton imaging system based on well-established fast scintillator technology.

- 1. \rightarrow High-performance, low-cost measurements of proton range.
- 2. Achieve lower dose to the patient relative to equivalent x-ray images.
- 3. Produce spatially sharp images.
- 4. Images free of artifacts from high-Z implants.

Multidisciplinary team of detector physicists, medical physicists, computer scientists, and radiation oncologists:

- ProtonVDA: Fritz DeJongh, Ethan DeJongh, Victor Rykalin, Igor Polnyi
- Loyola Stritch School of Medicine: James Welsh
- Northwestern Medicine Chicago Proton Center: Mark Pankuch
- <u>Northern Illinois University, Dept. of Computer Science:</u> Nick Karonis, Cesar Ordonez, John Winans, Kirk Duffin. <u>Dept. of Physics</u>: George Coutrakon, Christina Sarosiek
- Loma Linda University: Reinhard Schulte



Fiber layout cross-section for one tracking plane:

				_										
3	30	(°)	31			C)		L	2	2		3	
	3	31		C)		1	L	2	2	(°)	3	4	
$x = 0$ $x = 0.075$ $\Delta X = 0.1$														

- X-Y tracking planes upstream and downstream
- Multiplexed fiber readout
 - 32 digitized channels per tracking plane

- position ambiguities resolved using pencil beam targeting information

- reduces amount of electronics needed

- 40 x 40 x 13 cm block of scintillator for range detector
 - 4 x 4 array of PMTs
 - Output digitized into four channels: E, U, V,C
- Individual protons tracked at up 10 MHz
- > 99% tracking efficiency
- WEPL resolution ~ 3 mm per proton
- 40 x 40 cm image field size
- Fast (<1 min) image reconstruction for radiograph







• Linear detector response vs. range gives very good range sensitivity



Imaging with Multiple Proton Energies – Pediatric Head Phantom



Y (cm)



Pediatric Head Phantom with CIRS Inserts





WEPL (cm)



Measured difference: $+0.58 \pm 0.01$ mm



30 x 40 cm scan of torso phantom

- 4 energies: 120, 163, 200, 229 MeV

WEPL (cm)





WEPL (cm)

WEPL^3 (cm)

WET DRR from X-Ray CT Difference map WET (cm) 0.8 10 10 10 Y (cm) -15 -15 Y (cm) Y (cm) 0.4 0 10 10 0 0 0 -0.4 5 5 -10 -10 -10 -0.8 -10 X (cm) 10

0

Proton Radiograph

What goes into an RSP measurement?



TRANSFORMING PROTON THERAPY

Proton Imaging Meeting

- Acquisition of a large number of protons from a complete set of angles.
- Cuts, to select good events, reject nuclear scatters, etc.
- A well-calibrated WEPL for each proton.
- A well-aligned trajectory for each proton.
- A solver to find a 3D RSP map that explains the proton data.

For a given data set, image quality will be affected by:

- Accuracy of WEPL calibration
- Accuracy of tracker alignment
- Ability of solver to converge to an optimal solution to the proton data.

How can we check the elements of image quality?





In addition, in the short term at least, we will be looking at qualitative features, fixing problems, making improvements. We are still learning and have seen there are many details that are important.

Our solution: the DV method

$$d_p = Ax - b$$

 $d_v = \overline{A}^T d_p$
 $\overline{A}^T = V^{-1} A^T$

$$V^{-1} = diag\left(\frac{1}{\sum_{j} \alpha_{ij}^{T}}\right)$$

$$x_{k+1} = x_k - \lambda_k d_{vk}$$

10

5

-5

-10

Z (cm)



Connection to least squares: Minimizing χ^2 corresponds to $d_v = 0$

- $\chi^2 = d_p \cdot d_p = (Ax b) \cdot (Ax b)$
- $d\chi^2/dx_i = 2 a_i^T (Ax) 2 a_i^T b$ where a_i is the ith column of A

Least squares: Set $d\chi^2/dx_i = 0 \forall i$

(This is the gradient used in Landweber iteration)

• $a_i^T \cdot Ax - a_i^T \cdot b = 0$

Divide by $\Sigma_j \alpha^T_{ij}$ and go to matrix notation: • $\overline{A}^T A x - \overline{A}^T b = 0$

The left side is d_v :

• $d_v = \bar{A}^T d_p = \bar{A}^T (Ax - b)$

Benefits of DV method

- Definition of a unique, optimal solution
- Image quality metric that does not depend on knowledge of a ground truth
- . Ability to calculate optimal step size for each iteration
- Ability to optimize multiple iterations at a time
- Stopping criteria determined by distance from optimal solution
- . Does not depend on starting point
- Suitable for noisy data: Ax = b cannot be true for all protons, but DV = 0 can be true for all voxels

Optimization of λ_k

$$d_{pk} = Ax_{k} - b$$

$$d_{vk} = \bar{A}^{T} d_{pk}$$

$$x_{k+1} = x_{k} - \lambda_{k} d_{vk}$$

$$d_{p(k+1)} = Ax_{k+1} - b$$

$$= d_{pk} - \lambda_{k} A d_{vk}$$

$$d_{v(k+1)} = \bar{A}^{T} d_{p(k+1)}$$

$$= d_{vk} - \lambda_{k} \bar{A}^{T} (A d_{vk})$$

• One possible choice for λ_k : Minimize χ^2_{k+1}

 $\begin{vmatrix} \chi^{2}_{k+1} = d_{p(k+1)} \cdot d_{p(k+1)} \\ = d_{pk} \cdot d_{pk} - 2\lambda_{k} d_{pk} \cdot (Ad_{vk}) + \lambda^{2}_{k} |Ad_{vk}|^{2} \\ = \chi^{2}_{k} - 2\lambda_{k} d_{pk} \cdot (Ad_{vk}) + \lambda^{2}_{k} |Ad_{vk}|^{2} \end{vmatrix}$

 $|d\chi^{2}_{k+1}/d\lambda_{k} = -2 d_{pk} \cdot (Ad_{vk}) + 2\lambda_{k} |Ad_{vk}|^{2} = 0$ $\lambda_{k} = d_{pk} \cdot (Ad_{vk}) / |Ad_{vk}|^{2}$

• Another choice for λ_k : Minimize $d_{v(k+1)} \cdot d_{v(k+1)}$

 $\lambda_k = d_{vk} \cdot (\bar{A}^T A d_{vk}) / |\bar{A}^T A d_{vk}|^2$

Multi-step optimization



 Simulated pCT data for simple water phantom

Alternating between chi2-p and chi2-v leads to faster convergence



Stopping Criteria



Iteration 0



5-step DV optimization Iteration 0 10



WET (cm)



Iteration 5







Iteration 10







Iteration 15







Iteration 20







Iteration 25



5-step DV optimization Iteration 5 10



WET (cm)



Iteration 30







Iteration 35



5-step DV optimization

Iteration 7





Iteration 40







Iteration 45



5-step DV optimization Iteration 9 Z (cm)



WET (cm)



Iteration 50



5-step DV optimization

Iteration 10





Iteration 55



5-step DV optimization

Iteration 11







George Phantom pCT data (projections)

- Made with 3 energies: 195, 160, and 118 MeV
- Data taken every 4 degrees
- 1 mm³ voxels
- ~20 million protons in final cut



WEPL (cm

1 mm pCT Slice



Insert	RSP	RSP from pCT image In ROI for each insert (Statistical uncertainty only)	Difference (pCT - Nominal)
Sinus	0.200	0.192 ± 0.002	-0.008
Enamel	1.755	1.768 ± 0.002	0.013
Dentin	1.495	1.504 ± 0.002	0.009
Brain	1.040	1.043 ± 0.002	0.003
Spinal Cord	1.040	1.046 ± 0.002	0.006
Spinal Disc	1.070	1.079 ± 0.002	0.009
Trabecular Bone	1.100	1.106 ± 0.002	0.006
Cortical Bone	1.555	1.570 ± 0.002	0.015

1.6

1.4

1.2

Pork shoulder and ribs

- 4 energies, data taken in 4 degree intervals
- Vertical CT taken for comparison







Region	Volume	pCT RSP	x-ray CT	Diff.
	(cm^3)	Mean SD $SE(\%)$	RSP	(%)
Air	3.7	$0.017 \ 0.150 \ 15$	0.006	64
Adipose (Shoulder)	6.6	$0.983 \ 0.086 \ 0.1$	0.977	0.6
Adipose (Rib)	1.2	$0.965 \ 0.054 \ 0.2$	0.967	-0.2
Muscle (Shoulder-Med)	17.5	$1.044 \ 0.112 \ 0.1$	1.046	-0.2
Muscle (Shoulder-Lat)	25.6	$1.043 \ 0.114 \ 0.1$	1.043	0.0
Muscle (Rib)	5.8	$1.051 \ 0.091 \ 0.1$	1.046	0.5
Trabecular Bone (Rib)	1.1	$1.120 \ 0.062 \ 0.2$	1.141	-1.9
Trabecular (Shoulder)	1.1	$1.116 \ 0.082 \ 0.2$	1.114	0.2
Compact Bone	0.4	$1.467 \ 0.127 \ 0.4$	1.568	-6.9
Blue Wax	6.2	$0.972 \ 0.114 \ 0.1$	0.932	4.1

RSP derived from xCT



A: Blue Wax B: Muscle (Shoulder-Med) C: Muscle (Ribs) D: Air E: Adipose (Shoulder) F: Compact Bone G: Trabecular Bone (Shoulder) H: Adipose (Ribs) I: Muscle (Shoulder-Lat) pCT of fresh pig's head

- 4 energies, data taken in 4 degree intervals
- Vertical CT taken for comparison







Comparison of tissues between pCT and xCT using 3-D contours

> A: Adipose B: Eye C: Lens D: Sinus E: Brain Stem F: Muscle G: Brain H: Skull I: Mandible J: Tongue

Contours: tympanic bullae



Region	Volume	pCT RSP	Hor CT^a	Diff	Hor CT^b	Diff	Vert CT	Diff		
	(cm ³)	Mean SD $SE(\%)$	RSP	(%)	RSP	(%)	RSP	(%)		
Bullae	0.8	$0.491 \ 0.24 \ 1.7$	0.684	-39.3	0.690	-40.5	0.634	-29.1		
Adipose	3.7	$0.950 \ 0.14 \ 0.2$	0.961	-1.2	0.962	-1.3	0.954	-0.4		
Muscle	2.0	$1.033 \ 0.16 \ 0.3$	1.058	-2.4	1.059	-2.5	1.052	-1.8		
Tongue	9.4	$1.047 \ 0.23 \ 0.2$	1.035	1.1	1.036	1.1	1.031	1.5		
Brain Stem	0.7	$0.994 \ 0.16 \ 0.6$	1.038	-4.4	1.038	-4.4	1.016	-2.2		
Brain	2.5	$1.025 \ 0.16 \ 0.3$	1.037	-1.2	1.039	-1.4	1.031	-0.6		
Lens	0.1	$1.099 \ 0.12 \ 1.6$	1.078	1.9	1.080	1.7	1.076	2.1		
Eye Left	0.5	$1.015 \ 0.13 \ 0.5$	1.015	0.0	1.017	-0.2	1.018	-0.3		
Eye Right	0.8	$1.011 \ 0.15 \ 0.5$	1.021	-1.0	1.021	-1.0	1.014	-0.3		
Skull	0.5	$1.266 \ 0.12 \ 0.4$	1.297	-2.4	1.303	-2.9	1.320	-4.3		
Mandible	0.5	$1.540 \ 0.16 \ 0.5$	1.559	-1.2	1.565	-1.6	1.562	-1.4		
Sinus Air	0.1	$0.067 \ 0.12 \ 17$	0.057	15	0.058	13	0.039	42		

^{*a*} Low dose protocol ^{*b*} High dose protocol



WET DRR from X-Ray CT Difference map WET (cm) 0.8 10 10 10 Y (cm) -15 -15 Y (cm) Y (cm) 0.4 0 10 10 0 0 0 -0.4 5 5 -10 -10 -10 -0.8 -10 X (cm) 10

0

Proton Radiograph

Dose estimation – simulated in TOPAS





TRANSFORMING PROTON THERAPY

Next Steps

- Demonstrate use of pCT with gantry
- Implement fast, automatic pCT reconstruction
- Incorporate optical tracking data to improve spatial resolution
- Perform range measurements in phantoms using film stacks
- Study NTCP benefits of proton imaging (see talk by Andrew Best)