

### PARTICLES FOR TUMOUR TREATMENTS: THE NATIONAL CENTRE FOR ONCOLOGICAL HADRONTHERAPY

Sandro Rossi



Università degli Studi di Pavia – 21 Maggio 2015

## Outline

**Rationale for hadrontherapy** 

Hadrontherapy in the world

The CNAO

**Clinical results at CNAO** 



### **Evidence on the research topics**



Electrons (X-rays): conventional radiotherapy Hadrontherapy ?

Carbon ion is 12×2000 times heavier than electron

Nucleus of Carbon made of 6 protons (p) and 6 neutrons (n)

Simplest nucleus: the proton (p)

Hadrontherapy

р

Proton is 2000 times heavier than electron

## Which advantages with hadrons?

## + PRECISION

Conformal irradiation of tumour volume (= reduced damages to healthy tissues)

### Precision in hadrontherapy





### Irradiation technique active scanning







## Which advantages with hadrons?

## + EFFICACY

Increased radiobiological efficacy of carbon ions wrt X-rays (= DNA of tumour cells directly destroyed in multiple hits)

### X-rays: sparse damage and indirect effects



### Carbon ions: clustered damage only on tumour and direct effect



## Hadrontherapy in Italy Number of potential patients

(Commission Ministry of Health - Year 2009)

### **ITALY: 60 MILLIONS HABITANTS**

X-Ray therapy (photons 5 – 20 MeV)

New patients per year: 150'000 pts/y

#### Protons

Categoria A: elective patients = 1'000 pts/y Categoria B: good indications = 12'000 pts/y

#### Carbon ions

% radioresistant tumours

1'500 pts/y

### 1 dual centre (p and C): CNAO Possibly 1 protontherapy centre every 10 M citizens

## Particles for tumour treatments: the CNAO

Hadrontherapy in the world

### Protontherapy is booming (www.ptcog.psi.ch)



#### Carbon lons: > 13.000 patients; 8 centres (+3 planned)

### Loma Linda University Medical Center: first patient 1992

First hospital based protontherapy centre (1992)

2012:160 sessions/d





#### Optivus Ltd. commercialises this centre









### Coming up: single room facility 250 MeV synchrocyclotron rotating around the patient



### **MEVION S250**

Superconducting SC Diameter 1.8 m





## Synchrotron



Fixed frequency, high intensities



 $\rho$  = constant

**Dynamic law:** 
$$p = qB\rho$$

**Energy increases with B** 

# The accelerators used today in hadrontherapy are "circular"

### **Teletherapy with protons (200-250 MeV)**

CYCLOTRONS (\*) (Normal or SC)



**SYNCHROTRONS** 



(\*) also synchrocyclotrons

**Teletherapy with carbon ions (4800 MeV = 400 MeV/u)** 







### **Research issues...** New accelerators for hadrontherapy



- fast 3D scanning capabilities
- increased dose rate capability
- reduced dimensions and power consumption
- reduced complexity

## Particles for tumour treatments: the CNAO

### The CNAO

## Background: 2 main steps



The Phases of CNAO

### Phase 0: organisation



Phase 1: construction



### Phase 2: experimentation



Phase 3: running



The numbers of CNAO's construction



### Starting point... THE PATIENT Hospital based: safety, efficiency, reliability, maintainability

1	Beam particle species	p, He <sup>2+</sup> , Li <sup>3+</sup> , Be <sup>4+</sup> , B <sup>5+</sup> , C <sup>6+</sup> , O <sup>8+</sup>
2	Beam particle switching time	$\leq 10 \min$
3	Beam range	1.0 g/cm <sup>2</sup> to 27 g/cm <sup>2</sup> in one treatment room 3.1 g/cm <sup>2</sup> to 27 g/cm <sup>2</sup> in two treatment rooms Up to 20 g/cm <sup>2</sup> for $O^{8+}$ ions
4	Bragg peak modulation steps	$0.1 \text{ g/cm}^2$
5	Range adjustment	$0.1 \text{ g/cm}^2$
6	Adjustment/modulation accuracy	$\leq \pm 0.025 \text{ g/cm}^2$
7	Average dose rate	$2 \text{ Gy/min}$ (for treatment volumes of $1000 \text{ cm}^3$ )
8	Delivery dose precision	≤± 2.5%
9	Beam axis height (above floor)	150 cm (head and neck beam line) 120 cm (elsewhere)
10	Beam size <sup>1</sup>	4 to 10 mm FWHM for each direction independently
11	Beam size step <sup>1</sup>	1 mm
12	Beam size accuracy <sup>1</sup>	$\leq \pm 0.25 \text{ mm}$
13	Beam position step <sup>1</sup>	0.8 mm
14	Beam position accuracy <sup>1</sup>	$\leq \pm 0.2 \text{ mm}$
15	Field size <sup>1</sup>	5 mm to 34 mm (diameter for ocular treatments) $2 \times 2 \text{ cm}^2$ to $20 \times 20 \text{ cm}^2$ (for H and V fixed beams)
16	Field position accuracy <sup>1</sup>	≤± 0.5 mm
17	Field dimensions step <sup>1</sup>	1 mm
18	Field size accuracy <sup>1</sup>	≤± 0.5 mm

### (Basic specifications of CNAO facility)

### CNAO - Pavia



## View of the site



Copyright ©2008 Pictometry I





#### HOSPITAL FACILITY DEVELOPING ON FOUR LEVELS

Surface Level (L.0): reception, first visit and medical imaging

Underground level (L. -1): treatment area

First floor (L. 1): administration, offices and laboratories

Second floor (L. 2): direction, conference and meeting rooms

### Hospital based: safety, efficiency, reliability, maintainability COMPACT DESIGN



### The synchrotron for protons and carbon ions





LEBT

0.008 MeV/u H<sup>3+</sup> 0.008 MeV/u C<sup>4+</sup>

I ~ 0.5 mA (H<sup>3+</sup>) I ~ 0.2 mA (C<sup>4+</sup>)

**Two ECR sources** 

**Continuous beam** 

**LEBT Chopper** 

### Ion sources ... were protons and carbon ions are generated



Each source produces a cloud formed by 1 billion of carbon ions or 10 billions of protons







#### 217 MHz

#### RFQ 0.008-0.4 MeV/u H<sup>3+</sup> 0.008-0.4 MeV/u C<sup>4+</sup>

IH 0.4-7 MeV/u H<sup>3+</sup> 0.4-7 MeV/u C<sup>4+</sup>


### The Linear accelerator for ions

In about 6 meters the beam increases the energy by a factor 1000 - to reach 1/10th of light speed... 30'000 km/sec





# **MEBT** 7 MeV p 7 MeV/u C<sup>6+</sup> I ~ 0.75 mA (p) I~0.12 mA (C<sup>6+</sup>) **Stripping foil Current selection** Debuncher **Emittance dilution Match betas** (x,x')<sub>inj</sub>

### Intensity degrader



### 4 transmission levels: 100%, 50%, 20%, 10% Keep overall emittance unchanged

### **Multiturn injection**



Generally there are 2, 3 or 4 bumpers. The bump collapses in tens of turns



#### Synchrotron

7-250 MeV p 7-400 MeV/u C

I ~ 0.1-5 mA (p) I ~ 0.03-1.5 mA (C)

**Slow extraction** 

**Betatron core** 

#### **MAGNETIC SYSTEM**

The higher the speed the bigger the force

### (SYNCHRO-TRON)

**20 Correctors** 

to steer

### 24 Quadrupoles to focus (3 fam.)

### 16 Dipoles to bend (1 fam.)

### **Beam Diagnostics**

#### Designed and specified by CNAO-INFN-CERN









#### **Beam Position Monitor**





### Smooth spill to allow tumour painting



Intensity ripple  $(\Delta I/I) \le \pm 20\%$  at 2 kHz (extraction with a betatron core - PIMMS)



50 ms





#### HEBT

60-250 MeV p 120-400 MeV/u C 10<sup>10</sup> p/spill (~2nA) 4 10<sup>8</sup> C/spill (~0.4nA)

different settings for

- •Treatment Line
- •Horizontal beam size
- Vertical beam size
- •Extraction energy

### The extraction lines (safety is an issue)



## High precision devices for patient positioning

----

0

💰 C

F10 🦷

F8

F7

H2

**Collaboration CNAO-PoliMi** 



TPS is directly related to scanning modality and RBE evaluation model

#### Need to include management of moving organs and integration of in-room imaging

CQ !











## **Oncological Information System**



### Much more than ... "just" ... an accelerator



Depth 25 cm: Proton 195 MeV Carbon 380 MeV/u

(Courtesy of Siemens Medical)

### Research issues...



### Research topics at CNAO

### Research is a must to keep CNAO up-to-date



Production of radioisotopes for imaging Collaboration with UniPv Interests of Pavia hospitals



Cyclotron already installed at LENA could be re-used in a clinical&research environment for radioisotopes production to improve imaging capabilities Radiofarmacy and drugs development (chemistry)

### Advanced Medical Imaging Modalities (fusion sw)



### Improvements: On-line imaging and Tumour tracking

"Minimal" choice: breathing synchronisation (already applied in Chiba and HIT)



Interesting also for IMRT: lots of efforts and devices

(Review in Riboldi et al, Lancet Oncology 2012)

External surrogates with correlation models
X-rays
Ultrasound, MRI
Particle radiography



### Dose visualisation: "in beam PET" + secondaries



### Collaborations with INFN groups

ISSUES: low statistics; blood flow dilution; off-line PET → logistics 200

### **BNCT: Boron Neutron Capture Therapy**



**RFQ at LNL for BNCT** 

<sup>10</sup>B(n, $\alpha$ )<sup>7</sup>Li

### Collaboration INFN, UniPv, CNAO

Figure 1: the accelerator is made up of three segments 2.4 m long (left), the quadrupole (right)

Table 1: accelerator elements and characteristics					
Ion source	TRIPS	80 keV protons, 50 mA intensity			
Accelerator type	RFQ	Radio Frequency Quadrupole			
Final Energy	5 MeV				
Beam current	30 mA	•			
Useful cycle	CW	Continous accelerated beam			
Neutron Converter	Beryllium	Incident power on converter: 150 kW			
Neutron source intensity produced	~10 <sup>14</sup> s <sup>-1</sup>	Mean neutron energy: 1.2 MeV. Neutron			
in the converter		emitted per second in the whole solid angle			
RF power	1.3 MW	•			
Electrical power in function	3.3 MVA				
Thermal power at the refrigerating system	2.9 MW	Two different closed circuits: 1.1 MW with maximum temperature T <sub>max</sub> = 11 °C and 1.8 MW with T <sub>max</sub> = 20 °C			

# Future expansion of CNAO



### **Comparison of dimensions**



# Novel gantry for carbon ions

#### The ULICE WP6 collaboration realized a conceptual design of a mobile isocenter gantry,



#### **Rationale for the choice**

- Innovative layout
- Cheaper and simplified mechanical structure
- Less magnets in the gantry line

- Total weight reduced as well as deformations
- Well known magnet technology
- Layout scalable to SC magnets

### Project in progress by CEA (France) in collaboration with IBA



# 90° magnet following a design by INFN-Genoa and TERA

### Project in progress at LBL - Berkeley



ISSUES: field quality for scanning beams; changing fields (energy) for active scanning



Opera

### CNAO model: requests from the world

Austria, Croatia, United Arab Emirates, South Korea, Australia, USA: various projects request collaboration and support

Med-Austron (Wien): based on projects of CNAO/INFN/CERN



Med-Austron (Wien) from CNAO: DDS + db + commissioning

## Particles for tumour treatments: the CNAO

### **Clinical results at CNAO**



#### PROGETTO DI SPERIMENTAZIONE CLINICA

#### A CURA DI:

Erminio Borloni – Presidente Roberto Orecchia – Direttore Scientifico Sandro Rossi – Segretario Generale e Direttore Tecnico



IL CENTRO NAZIONALE DI ADROTERAPIA ONCOLOGICA Strada Privata Campeggi - 27100 Pavia



Sedi: Via Caminadella, 16 - 20123 Milano Iscrizione al Registro delle Persone Giuridiche della Prefettura di Milano n. 192 P IVA n. 03491780965 Codice Fiscale n. 97301200156

# <u>CE Procedure</u>

### October 2010 approved by:

- Ministry of Health
- Region Lombardy

### Main Tasks:

- Dosimetry characterisation
- Radiobiology characterisation
- Patient treatments



### Radiobiology: cell lines irradiations



In collaboration with INFN groups (LNL, Mi, Na, Rm3, ISS - Coordinator:

Still ongoing research topics in collaboration with Uni, INFN, CNR of Pavia



## In vivo experiments

Horizontal beam of carbon ions

### 3 animals per field



### In collaboration with NIRS and UniPv

### ✓ Survival curves of cells crypts in 3 SOBP positions



Results

Profondità in H<sub>2</sub>O (mm)

Facility	Beam	D <sub>10</sub> (Gy)	Variance	RBE <sub>10</sub>	Variance
	position		D <sub>10</sub>		(%)
Cobalt-60		14.86±0.08(*)			
γ rays					
NIRS	Proximal	10.38 (+)		1.44 (*)	
	Middle	9.46(+)		1.57(*)	
	Distal	8.29(+)		1.80(*)	
GSI	Proximal	10.21(+)		1.47(*)	
	Middle	9.40(+)		1.63(*)	
	Distal	8.37(+)		1.80(*)	
CNAO	Proximal	9.85	5.1 % NIRS	1.51	4.7% NIRS
			3.5% GSI		2.7 % GSI
	Middle	9.75	3.1% NIRS	1.52	3.18% NIRS
			3.7% GSI		6.7% GSI
	Distal	8.5	2.5% NIRS	1.75	2.78% NIRS
			1.5% GSI		2.78% GSI



Carb iden

(diff

Still ongoing research topics in collaboration with Uni, INFN, CNR of Pavia

## 22 September 2011 First treatment session at CNAO with protons



### 13 November 2012: first patient treated with Carbon lons

Local recurrence of adenoid cycstic ca. salivary gland



- 12 fractions 4.1 GyE, 4 fractions per week, 49.2 GyE total dose. Boost of 4 fractions in case of good tolerance.
- 3 fields of IMPT

### CE label!!!

### CNAO is the only Ion-Centre with CE label, after clinical experimentation

Mod. 2200 - 155

13 DIC 2013

VIALE REGINA ELENA, 299 00161 ROMA TELEGRAMMI, ISTISAN ROMA

TELEFONG: D6 19901 TELEFAX: 06 49387118 http://www.iss.it

Roma.



#### Istituto Superiore di Sanità

Organismo Notificato Nº 0373 Sez. presso il Dipartimento di Tecnologie e Salute Notified Body Nº 0373 – Uni relating to Department Technology and Health

#### CERTIFICAZIONE CE

Secondo l'allegato III della Direttiva Europea 93/42/CEE e successive modifiche Attuate con DLgs. 37 del 25.01.2010

#### EC CERTIFICATION

According to Annex III of Directive 93/42/EEC and subsequent modifications Transposed by DLgs. 37 of 25.01.2010

#### Certificato nº 20131213 036 3303 CT Certificate nº

L'Istituto Superiore di Sanità, Organismo Notificato nº 0373, certifica che il prodotto sotto menzionato soddisfa i requisiti essenziali di cui all'allegato I della Direttiva 93/42/CEE e successive modifiche verificati in accordo all'allegato III della stessa Direttiva.

The Italian National Institute of Health, as Notified Body nº 0373, certifies that the product hereinbelow described satisfies the essential requirements set out in Annex I and verified in compliance with Annex III of Directive 93/42/EEC and subsequent modifications.

Tipo e modello:	Acceleratore per adroterapia
Type and model:	Accelerator for hadrontherapy
Description:	[ 34469 ] ACCELERATORE DI PARTICELLE, RADIOTERAPIA [ 34469 ] PARTICLE ACCELERATOR, RADIOTHERAPY
Destinazione d'uso: Intended use:	Vedi allegato di 3 pagine See annex of 3 pages
Numero di serie: Serial number:	0001/2012
Fabbricante: Manufacturer:	Fondazione CNAO (Centro Nazionale Adroterapia Oncologica) Sede Legale: Via Caminadella,16 – 20133 Milano Sede Operativa: Strada Campeggi, 53 – 27100 Pavia

Rapporto di conformità nº	2013 003 33 003	del	13/12/2013	
Conformity report n°		of	dd/mm/yyyy	
Il presente certificato è valido dal This certificate is valid from	13/12/2013	al until	08/07/2018	

Il Direttore del Dipartimento Tecnologie e Salute F.F. The Acting Director of Department Technology and Health (Ing. Pietro Bartolini)

Pedo All



### From 2014 on ... the running phase

The treatments will be performed in the frame of the National Health System

Progressively increase the number of patients to reach in 2017 about 1000 patients per year

A <u>network</u> is set up to connect CNAO with national and international hospitals to efficiently recruit patients

**Research activities** are of paramount importance for CNAO. A dedicated room is in preparation


http://folder.cnao.it

Sistema Sanitario





#### Geographical distribution of patients 22/09/ 2011 - 10/04/2015







Sistema Sanitario

Regione Lombardia

# Acute toxicity (CTCAE criteria)



# Very good results: G3+G4 less than 4% !



Sistema Sanitario 🔀

#### low-grade osteosarcoma of cervical vertebrae, C1-C2 56 years old male









# **Clinical efficacy**

# **Protons. Local control at 5 years Chordoma more than 80% Chondrosarcoma about 98%**



### **SKULL BASE CHORDOMA: Proton therapy**



# 10 months F-UP



# **Clinical efficacy**

**Protons. Ocular melanoma** 

# Local control at 5 years more than 95%

Eye preservation
> 90%

Vision acuity > 45%



# Non invasive eye tracking system for intraocular tumor localization in proton therapy treatment



#### In collaboration with INFN and UniPv



Sistema Sanitario

# **Toxicity reduction** (spine irradiation)





#### Relapsed ACC in right pterygopalatine fossa post Surgery and RT (60 Gy)

6 Nov 2012 >> Re-irradiation with Carbon RT >> 12 march 2013 65.6 Gy(RBE) - 4.1 Gy(RBE)/fx, 16 fx (3 months after CIRT) performed in CNAO. 13/11-06/12/12



# Skin Toxicity (not more than G2)



# **Carbon. Chordoma of the sacrum**

# Local control at 5 years: 85%







#### 1 year after treatment



Diagnosis

# Carbon. Clinical case at CNAO



# **Clinical Efficacy**

# *Carbon. Pacreatic carcinoma Survival at 2 years: 50% Median survival double wrt best starndard RTOG/USA*





Pancreas

Tx Planning



#### Moving organs: 4-D treatment strategies at CNAO



- Reducing respiratory motion (less than 5 mm) using thermoplastic mask or compression band
- Multiple fields (2-3) and fractionated treatment
- Gating (ref. Phase: max expiratory; Anzai system and OTS) + rescanning (N = 5)



#### 4 gating 5 rescanning









#### **CLINICAL RESEARCH**

**Protons Hypofractioned dose** 

Phase III: Carbon lons vs conventional RT (ACC and sarcomas) Melanoma of the rectum and vagina

**Advanced lung cancer** 

**Paediatric patients** 

Phase III study: Carbon ions vs RT / CT in locally advanced pancreatic





### Formation an important issue

#### SECOND LEVEL INTERNATIONAL MASTER IN HADRONTHERAPY



#### Hadrontherapy: physics, biology, medicine and technology

Organized by

(2)

UNIVERSITÀ DEGLI STUDI DI MILANO

In collaboration with

-CNAO

INFN

Funded by

fondazione c a r i p l o

Organized by the University of Pavia with the State University of Milan and Milan Bicocca, in collaboration with CERN, CNAO and INFN.

Applicants are expected to have obtained a Diploma at the end of a five-year Course in: Physics, Biology, Biotechnology, Medicine and Engineering.

The Course will be held over a twelve-month period. Those taking the Course are expected to attend full-time. Lectures will be given in English.

Applications must be made no later than the 25° of November 2011. Teaching will commence in January 2012. Eight Scholarships will be awarded on the basis of merit.

Director: Prof. Michele Livan Dipartimento di Fisica Nucleare e Teorica Università di Pavia | Via Bassi 6 - 27100 Pavia, Italy michele.livan@unipv.it





Information: http://www.pv.infn.it/imh • mail: imh@pv.infn.it





#### Hadrontherapy: physics, biology, medicine and technology

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Director: Prof. Michele Livan Dipartimento di Fisica Università di Pavia | Via Bassi 6 - 27100 Pavia, Italy michele.livan@unipvit





















Information: http://www.pv.infn.it/imh • mail: imh@pv.infn.it

#### Communication ... another one



# **Acknowledgments 1**



## Today at CNAO 115 persons

**Acknowledgments 2** The Technical-Scientific Collaborations NATIONAL **TERA Foundation:** final design and high tech specifications **INFN:** co-direction HT, technical issues, radiobiology, research, formation University of Milan: medical coordination and formation University of Pavia: technical issues, radiobiology, formation **University of Catania: medical physics University of Florence:** medical physics **University of Turin:** interface beam-patient, TPS **Polytechnic of Milan:** patient positioning, radioprotection, authorisations European Institute of Oncology: medical activities, authorisations San Matteo Foundation: medical activities, logistics Town of Pavia: land and authorisations **Province of Pavia:** logistics and authorisation

#### **Acknowledgments 3**

The Technical-Scientific Collaborations

**CERN (Geneva):** technical issues, PIMMS heritage

INTERNATIONAL

**GSI (Darmstadt): linac and special components** 

LPSC (Grenoble): optics, betatron, low-level RF, control system

Med-Austron (Vienna): technical collaboration for MA centre

**Roffo Institute (Buenos Aires):** medical and research activities

NIRS (Chiba): medical activities, radiobiology, formation

HIT (Heidelberg): research activities



# **Grazie dell'attenzione**

"C'è vero progresso solo quando i vantaggi di una nuova tecnologia diventano per tutti" H. Ford



#### New medical accelerators (?): FFAG

- + Simplicity of fixed field
- + Potential for fast (ms) variable energy
- + Rapid cycling (200 Hz, repainting)
- High intensities
- Multistage accelerators
- Complicated magnets
- Complicated RF cavity
- Dense lattice (ext. diff.)

#### (original idea dates back to 1950's)



Only existing reasearch facility: KURRY 150 MeV proton scaling FFAG

#### New medical accelerators (?): BNL fast cycling synchrotron (first publication 1999's, S. Peggs et al.)



100

Time, T [ms]

#### New medical accelerators (?): TERA cyclinac for C-ions

Linac for Image Guided Hadron THerapy LIGHT 150-400 MeV/u

CABOTO =



400 MeV/u

300 Hz

Source	EBIS - SC
Cyclotron	K 600 - SC 200 tons
Linac	CCL @ 5.7 GHz 16 modules
RF power system	16 Klystrons (P <sub>peak</sub> = 12 MW)

150 MeV/u

Energy is adjusted in 2 ms in the full range by changing the power pulses sent to the accelerating modules

PH III

Charge in the spot is adjusted every 2 ms with the computer controlled source

## Los Alamos solution: Dielectric Wall Accelerator (DWA)



Pulsed High-Voltage accelerators (G. Caporaso et al) built in collaboration with Tomotherapy – Madison (T. Mackie)

Far into the future

### Laser-driven particle accelerators



Toncian et al., Science 2006