Computational Tools to Calculate X-ray Imaging Dose & Assess Radiotherapy Treatment Beam Modulation

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#### Part 1: Development & Validation of a Kilovoltage (kV) Dose Computation Method

# **Background:** Medical Imaging & Kilovoltage (kV) X-rays



#### X-ray Radiography



Fluoroscopy



#### **CT** Scans

### Background: Image Guided Radiotherapy



- Treatment Goal:
- Maximize dose to tumor
- o Avoid healthy tissue
- Imaging to locate tumor and adjust patient setup
- Patients imaged daily can accumulate considerable dose
- Skin (max. dose deposited at surface)
- Bone (photo-electric effect dominates)

### **Background & Motivation**

#### Dose from imaging can:

- Increase stochastic effects (cancer risk)
- In radiotherapy: Push planned dose to healthy tissues beyond their tolerance for a given side effect

#### Need to:

 Assess and monitor x-ray dose each patient receives from kV-imaging

## **Overall Research Goal**

- Develop and validate an approach to compute patient-specific dose from a kV imaging device
- Method must be:
  - o Accurate
  - Clinically feasible
    - Patient specific
    - Calculate dose within reasonable time

# Method for Computing kV Dose

- Developed in-house software (kVDoseCalc) to compute dose deposited by kV x-rays<sup>1</sup>
- Dose is computed by numerically solving the linear Boltzmann transport equation (LBTE)
- Validated using MCNP, EGSnrc, and experimental measurements<sup>1,2</sup>
- <sup>1</sup>Kouznetsov, A. and Tambasco, M., 2011, A hybrid approach for rapid, accurate and direct kilovoltage radiation dose calculations in CT voxel space, *Medical Physics*, 38(3), 1378-1388.
- <sup>2</sup> Poirier, Y., Kouznetsov, A., and **Tambasco, M.**, 2012, A simplified approach to characterizing a kilovoltage source spectrum for accurate dose computation, *Medical Physics*, 39(6).

### Overview: Computational Approach

- Source defined by spectrum and spatial fluence
  - Deterministic ray transport

0

- Primary component
- Stochastic computation
  - 1-Scattered
  - N-Scattered





X-ray

Source

### Source Characterization

- Spatial fluence
- Spectrum at different spatial positions
- Requirement:
  - Characterization needs to be clinically feasible

#### Properties of a kV x-ray source

- Photon intensity
  - Varies along X
  - Varies along Y
- Spectrum
  - Varies along X
  - Does not vary along Y
- Proposed source model :

Monte Carlo graphs obtained from : Ding, G.X, Duggan, D.M., Coffey, C.W., *Characteristics of kilovoltage x-ray beams used for cone-beam computed tomography in radiation therapy*, Phys. Med. Biol. **52**, 2007 p. 1595-1615



### Determination of $U_{(x,E)}$

In principle:

The entire spectrum should be known

In practice:

Half-value layer (HVL) and 4008 kVp used to describe beam 3590

 Use kVP + HVL to determine spectrum
Matlab Freeware Spektr
Validated for open beams within 4-6%\*



\*Y. Poirier, A. Kouznetsov, M. Tambasco, A simplified approach to characterizing a kilovoltage source spectrum for accurate dose computation, Med. Phys. 39 (6), 2012 p.3041-3050

Relative Intensity

#### Validation: Computational & Experimental



<sup>\*</sup>Ding GX, et al., Phys. Med. Biol. 52 (2007) 1595-1615



kVDoseCalc GUI

#### MCNP/EGSnrc Validation: Central Axis Depth Dose



Kouznetsov, A, Tambasco, M. (2011) *Medical Physics, 38*(3), 1378-1388.

#### Computational Validation: Profile at Centre of Lung Slab



Kouznetsov, A, Tambasco, M. (2011) *Medical Physics, 38*(3), 1378-1388.

# Source: Spectrum

- Computational validation assumed point spectral source
- HVL and kVp do not uniquely determine spectrum
- Performed sensitivity analysis
  - Showed that HVL and kVp are sufficient to characterize a kV source spectrum

# Sensitivity Analysis Conclusions

- Difference in dose computation between Spektrderived and MC spectrum is ≤0.1%
- Experimental variation of HVL (0.1-0.2 mm Al) changes dose computation accuracy by at most 1%
- Experimental variation of kVp (1-2 kVp) changes computation accuracy by at most 1%
- Possible to characterize spectrum based on HVL and kVp within 1.2% accuracy

### Experimental Validation -Relative

- Measurements are made with 0.6 cc Capintec ion chamber
- Radiographic pulse of 125 kVp, 160 mA 160 ms



Off-axDeptibitano)e (cm)

Off-aixis distance (com)

Depth (cm)

2

0

10

10

12



### Experimental Validation -Absolute



Very sensitive LiF (MgCuP) thermoluminescent detectors calibrated apgoutely • Measurement Absolute dosimetry performed in anthropomorphic Rando<sup>®</sup><sub>3</sub>phantom of phantom divided and Tissue and Bong I materials I-0 10x10 cm<sup>2</sup> field 6 7 8 0 **TLD Number** Irradiated with same 125 kVp x ray beam

#### Dose Interpolation: Adaptive Sparse Grid

#### **Regular Grid**



#### Adaptive Grid

		Tissue
	2 <sup>1</sup> - 1	Bone
		Lung
	· · ·	Bone
• •	•	Tissue



Gamma Analysis (%DD = 2%, DTA = 2 mm)

#### **Dose Interpolation:** Error Distribution & Dose Map







#### Progress summary

- Sensitivity Analysis & Source Characterization
  - HVL and kVp can be used to characterize source spectrum
  - Developed clinically feasible method to characterize spatial fluence as input for kVDoseCalc
- Relative dosimetry
  - Homogeneous phantom : agrees within 2%
  - Heterogeneous phantom : agrees within 4%
- Absolute dosimetry Rando<sup>®</sup> phantom
  - Complex geometry
  - Agreement within experimental uncertainty

### Work in Progress

- Adaptive Grid Implementation
  - To speed up calculations and maintain accuracy
- Incorporate added filtration (e.g. half and full bowtie filters) on source characterization
- Model and validate our method for radiography, fluoroscopy, CT, and CBCT imaging
  - Anthropomorphic phantom for dose validation
- Adapt code for GPU computation

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