

# Monte Carlo simulation of electron-photon transport: from particle physics to cancer radiotherapy

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# Disclosure statement

I worked for, and receive royalty payments from, the National Research Council regarding licensing agreements for Monte Carlo software with:

Elekta Philips/ADAC NOMOS  
Nucletron Varian

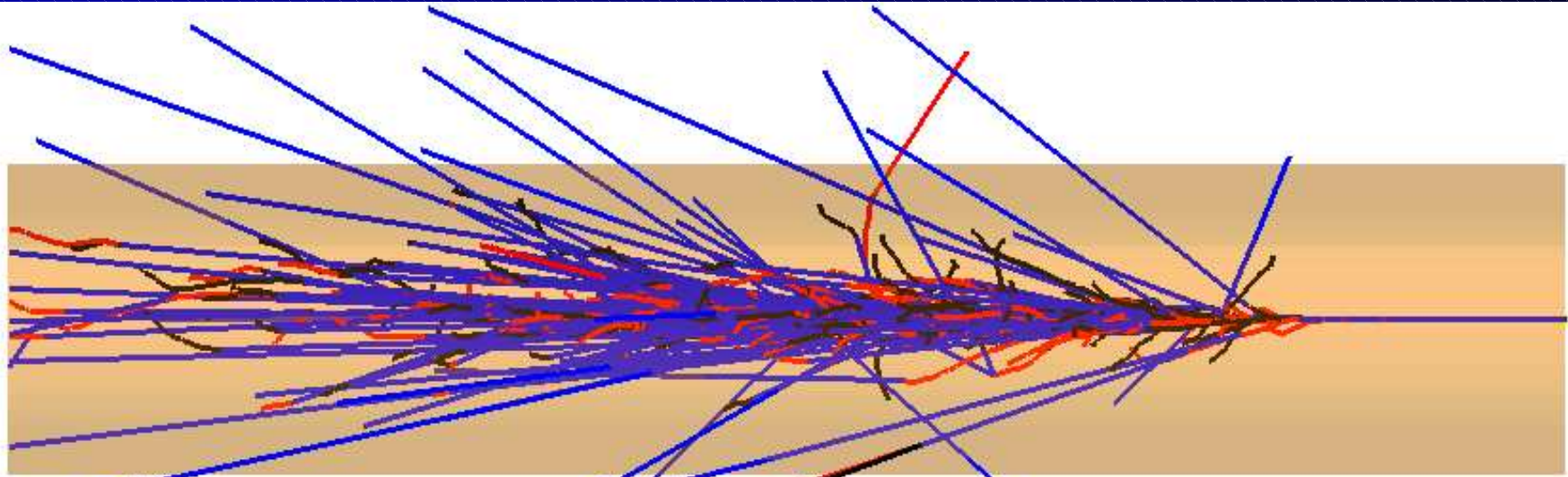
The following companies are supporting the Monte Carlo lab I am setting up at Carleton University:

Nucletron Canada TomoTherapy Inc  
Philips/ADAC MDS Nordion Varian

# Why Monte Carlo?

- electrons create
  - photons and  $\delta$ -rays (knock-on e-)
- photons create
  - electrons and positrons
- photons and e- scatter a lot
- know physics of all processes
- no analytic solution possible

# EGS: Electron Gamma Shower



Photons

Electrons

positrons

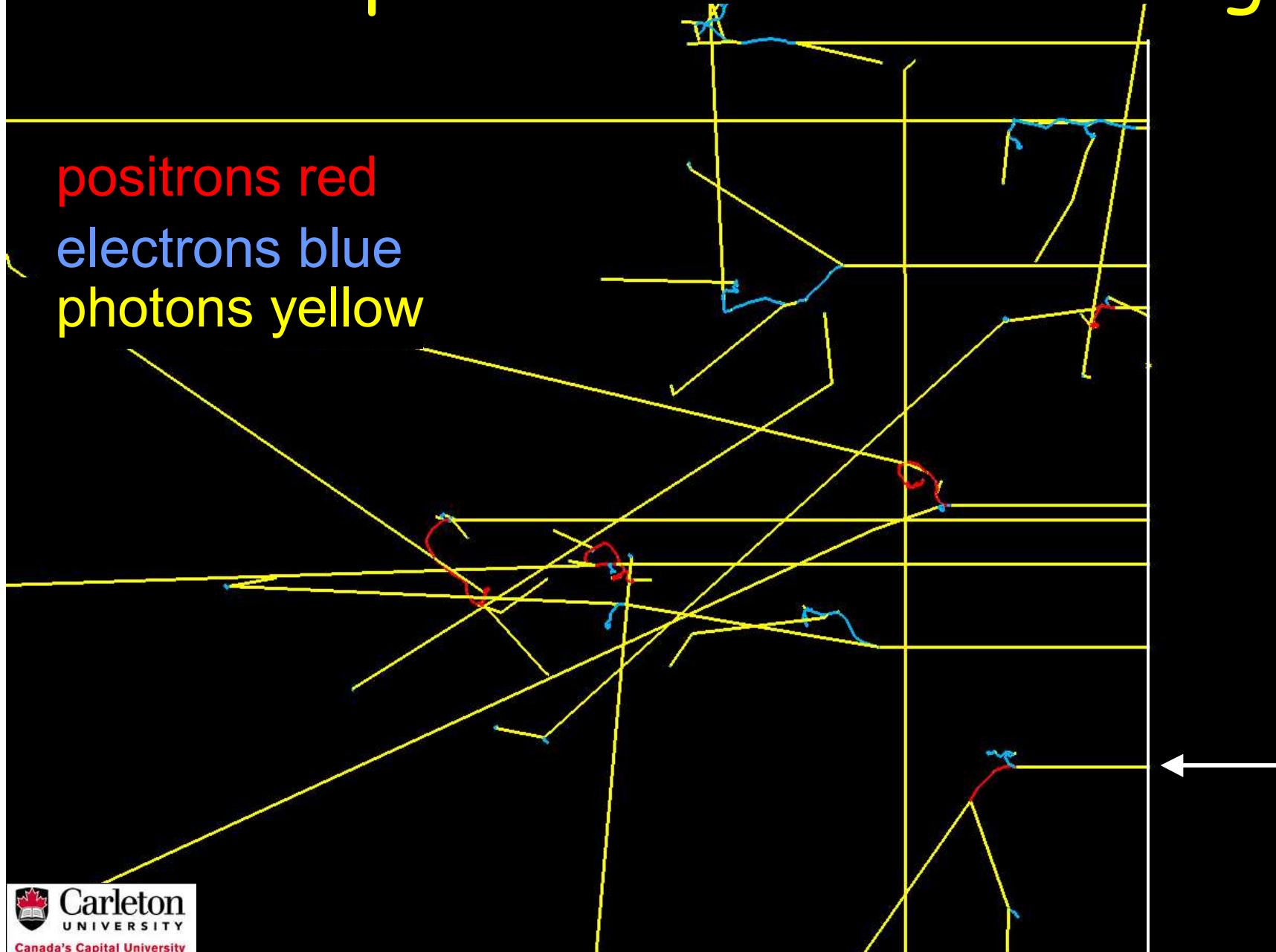
10 GeV photon from right  
on 10 cm lead cylinder

EGS3 Ford and Nelson, SLAC 1985

EGS4 Nelson et al, SLAC, NRC 1985

# 10 MeV photons on lead from right

positrons red  
electrons blue  
photons yellow



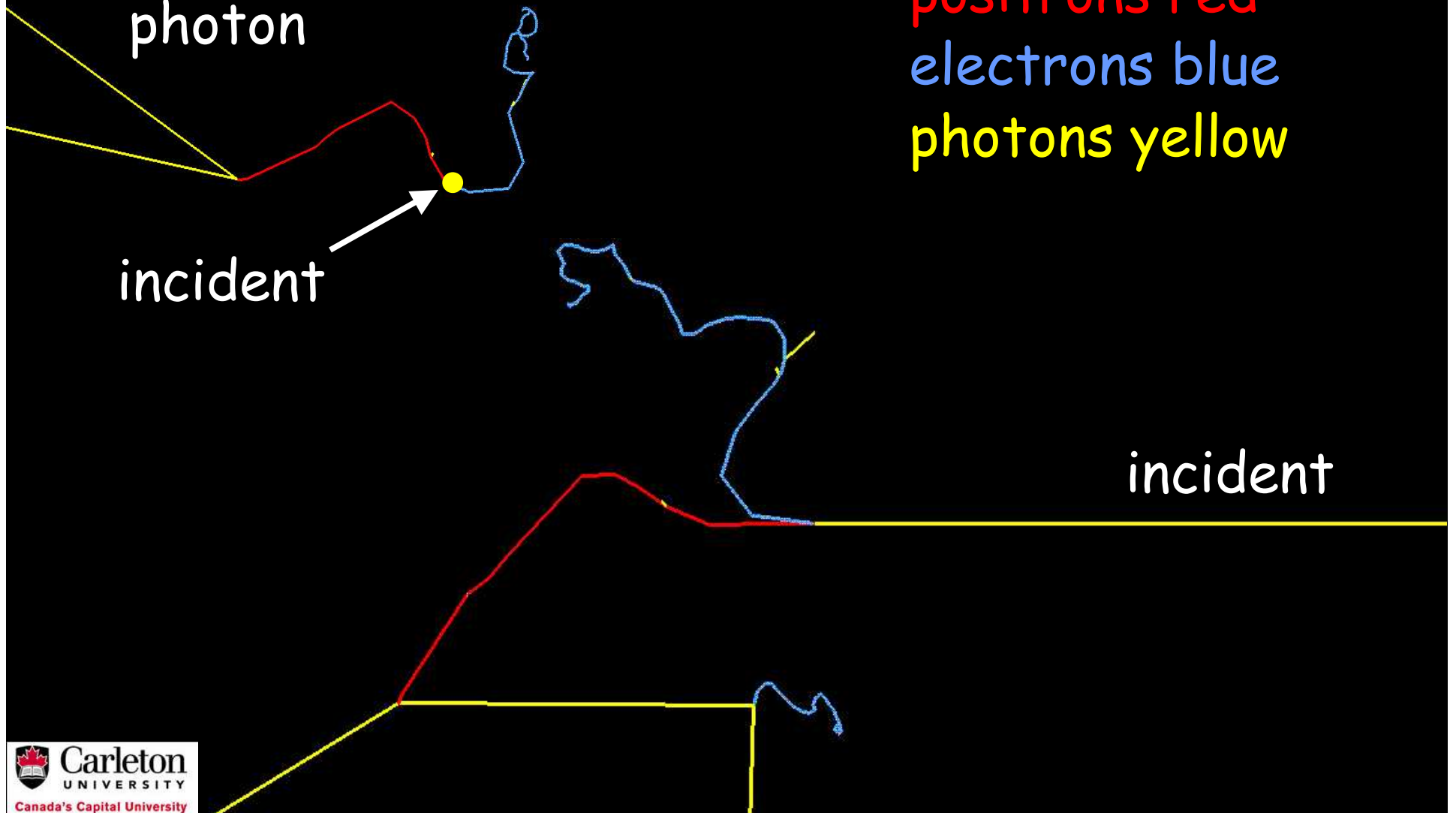
# 10 MeV photon on lead

along incident  
photon

positrons red  
electrons blue  
photons yellow

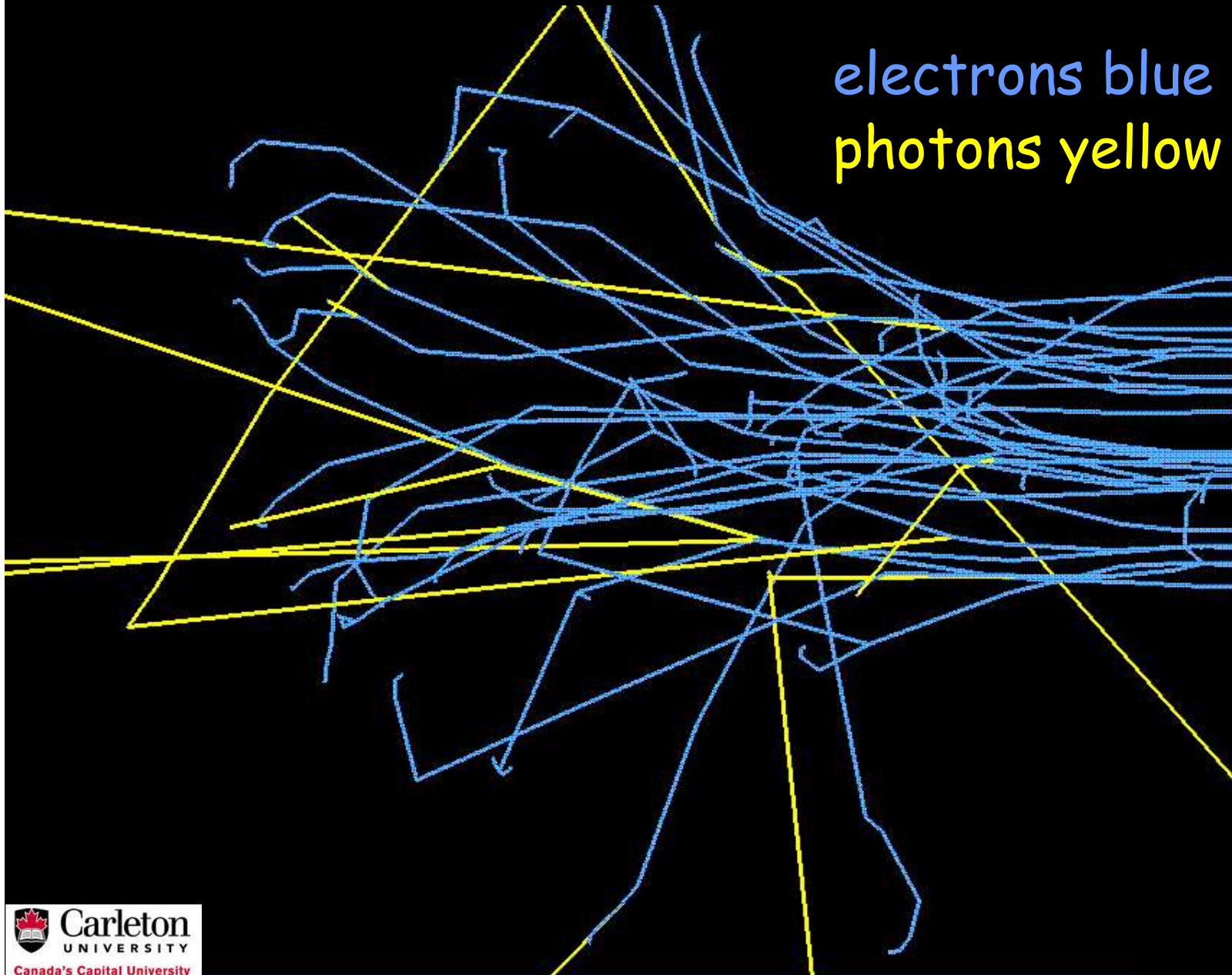
incident

incident



# 10 MeV electrons on water from right

electrons blue  
photons yellow



# Monte Carlo transport

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- simulate paths of many particles
  - use random numbers
  - known probability distributions
    - from physics of interactions
- keep track of physical quantities
  - learn average properties
  - stochastic distributions of events



# Simple photon simulation

- say:  $\Sigma_{\text{total}} = \Sigma_{\text{compton}} + \Sigma_{\text{pair}} \text{ cm}^{-1}$
- select 2 random numbers **R1, R2**
  - uniform between 0 and 1
  - whole careers devoted to doing this
  - cycle length now  $10^{40}$

# Photon transport (cont)

How far does photon go before interacting?

$$x = -\ln(R1) / \sum_{\text{total}} \text{cm}$$

is exponentially distributed  $[0, \infty)$

with a mean of  $1 / \sum_{\text{total}}$

# Photon transport (cont)

After going  $x$ , what interaction occurs?

$$\text{if } R_2 < \frac{\Sigma_{\text{compton}}}{\Sigma_{\text{total}}}$$

then a compton scatter occurs

**otherwise**

a pair production event occurs

# How is simulation used?

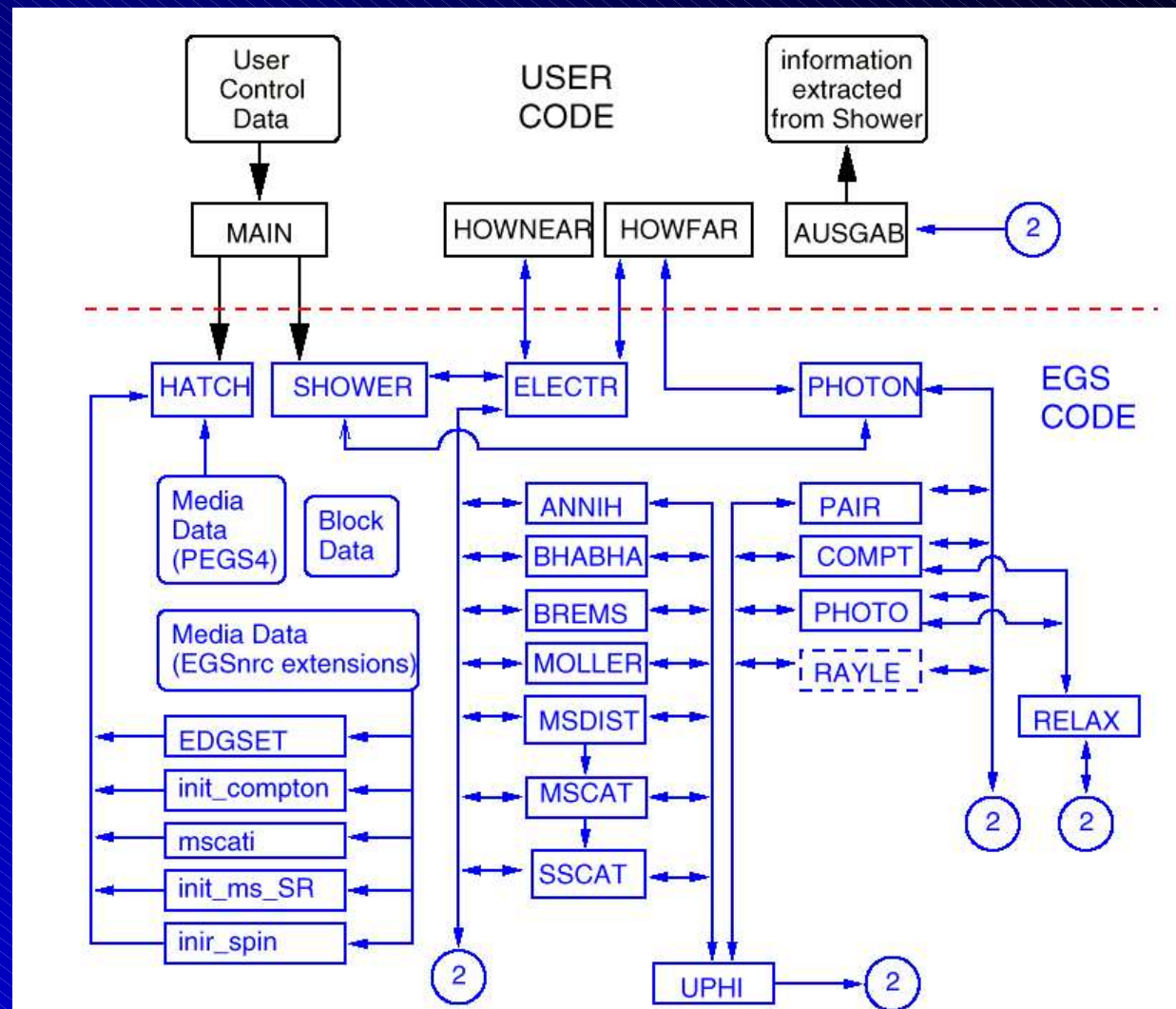
---

- score whatever data wanted
  - average distance to interaction
  - how many of each type
  - energy deposited by each type
  - etc
- more useful in complex cases

# EGSnrc structure (2000)

Kawrakow  
added new  
physics

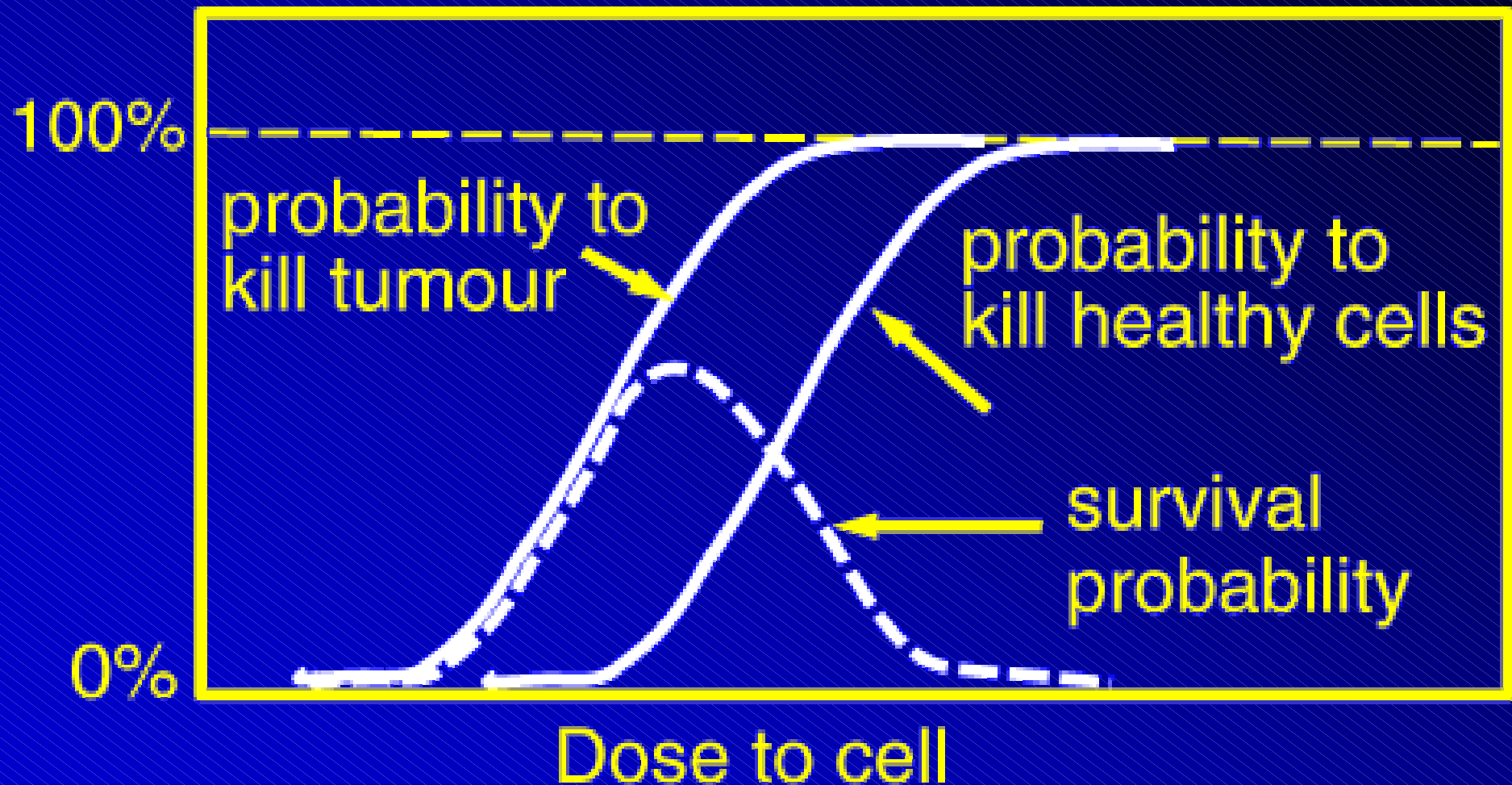
Code accurate  
to **0.1%**  
relative to its  
cross-sections  
& geometry



# What is medical physics?

- Application of principles of **physics** to practice of **medicine**
- **Cancer radiotherapy**
  - 70,000 people treated / year
  - cure rate 50% for curative Rx
- **diagnostic radiology**
  - x-rays, CT scans, MRI, ultrasound
- **nuclear medicine**
  - inject radioactivity and observe

# Basis of radiation therapy



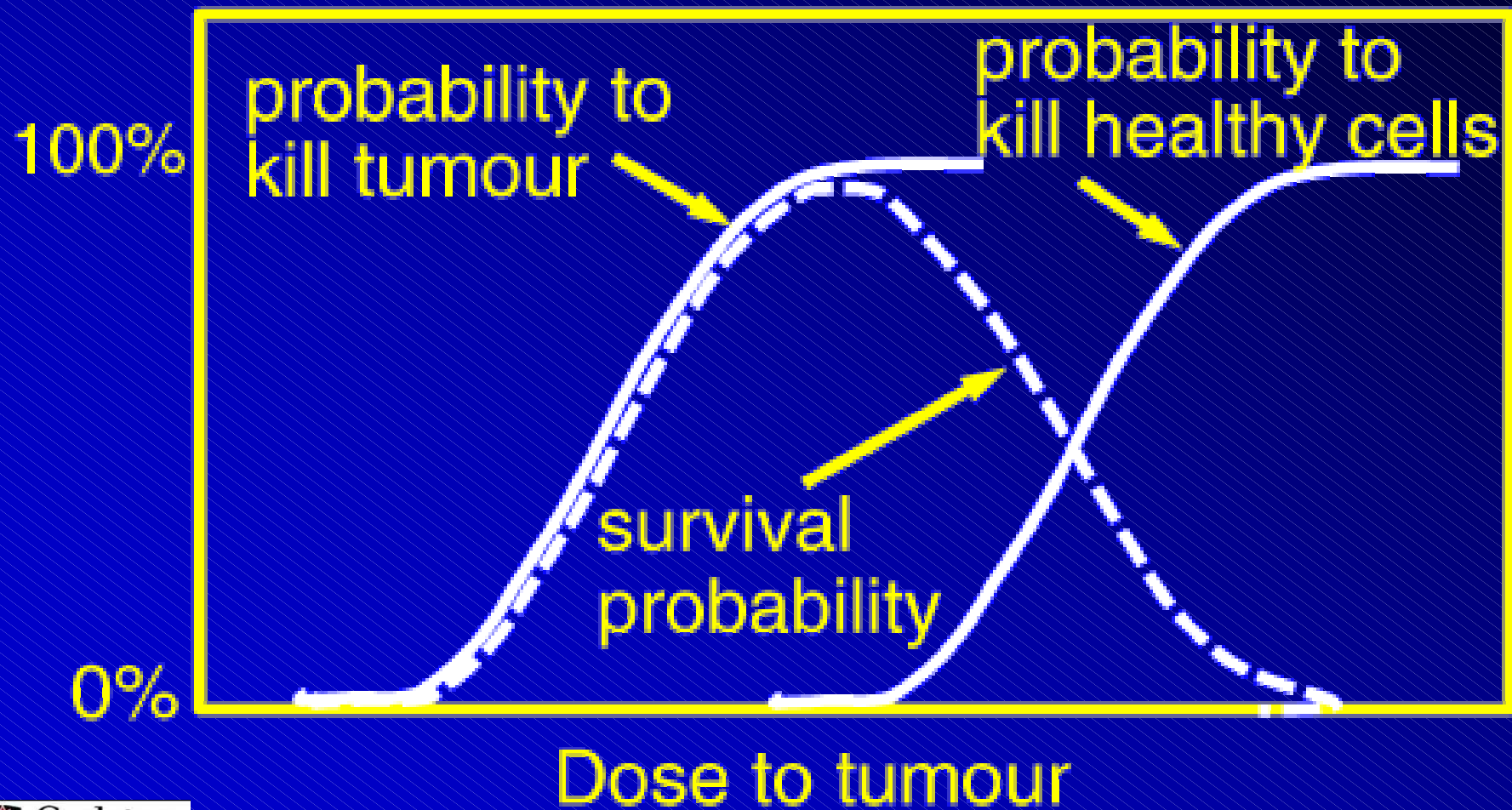
# Treatment planning

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- process to plan treatment
  - maximize dose to tumour
  - minimize dose to healthy tissue
- need accurate measure of dose
- need calculated dose in patient

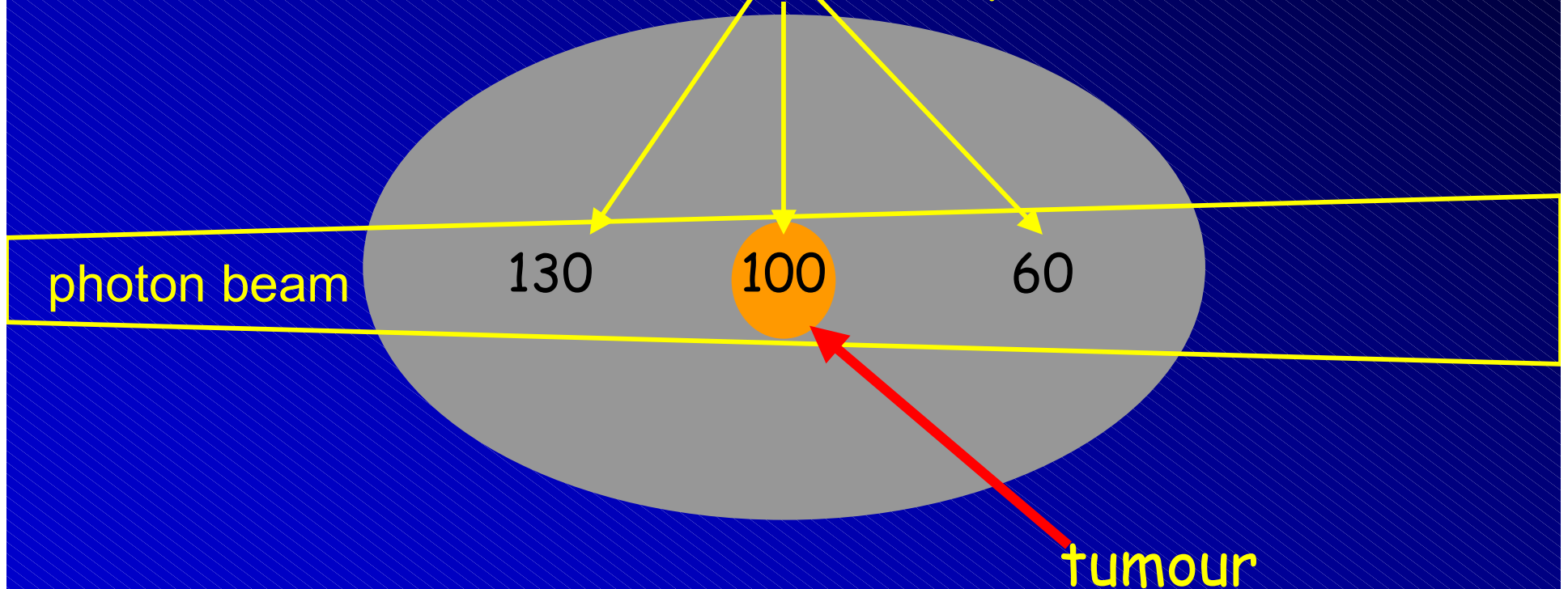


# Treatment planning



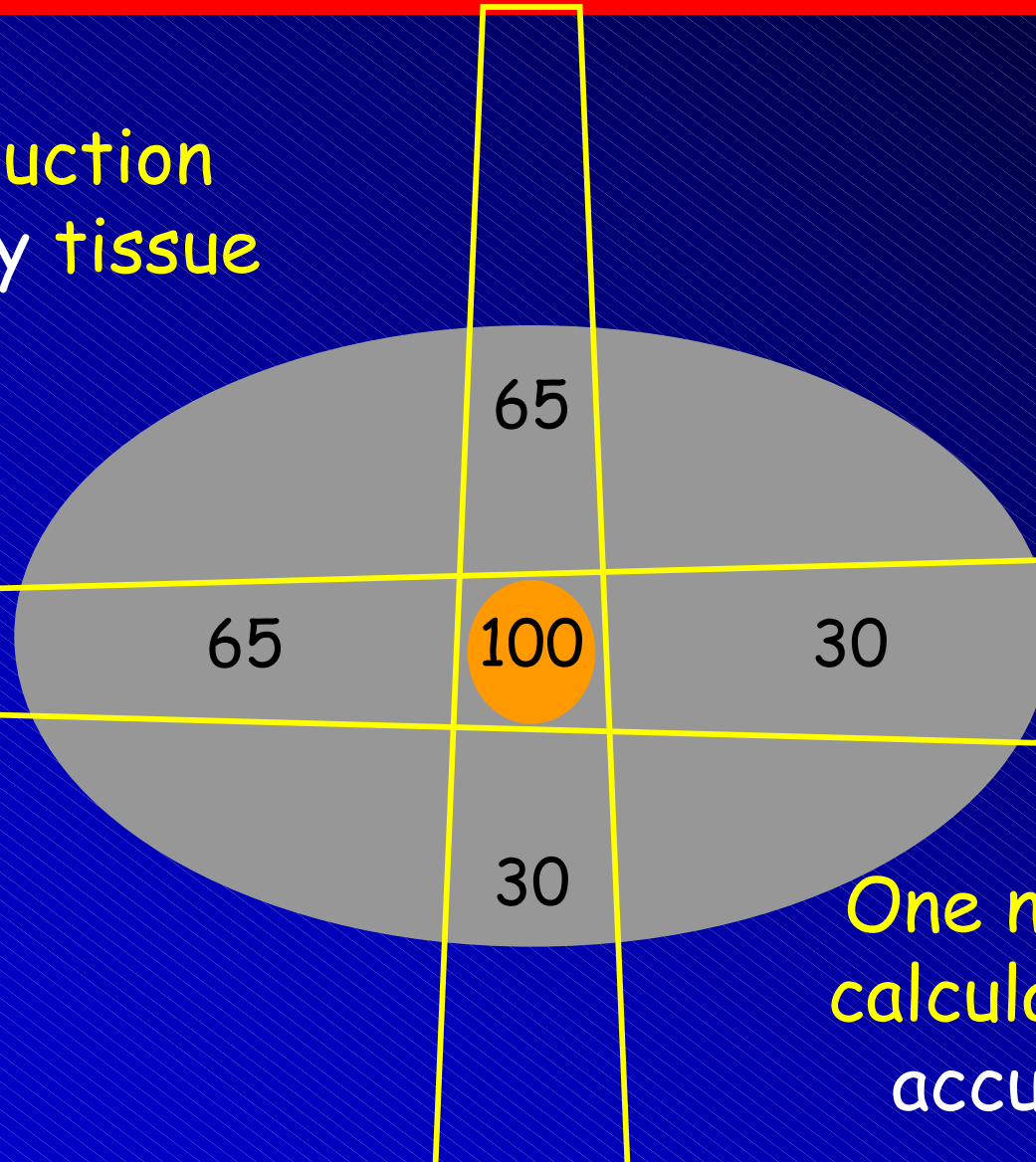
# Basis of treatment planning

relative doses - decrease due to attenuation in patient



# Basis of treatment planning

dose reduction  
to healthy tissue

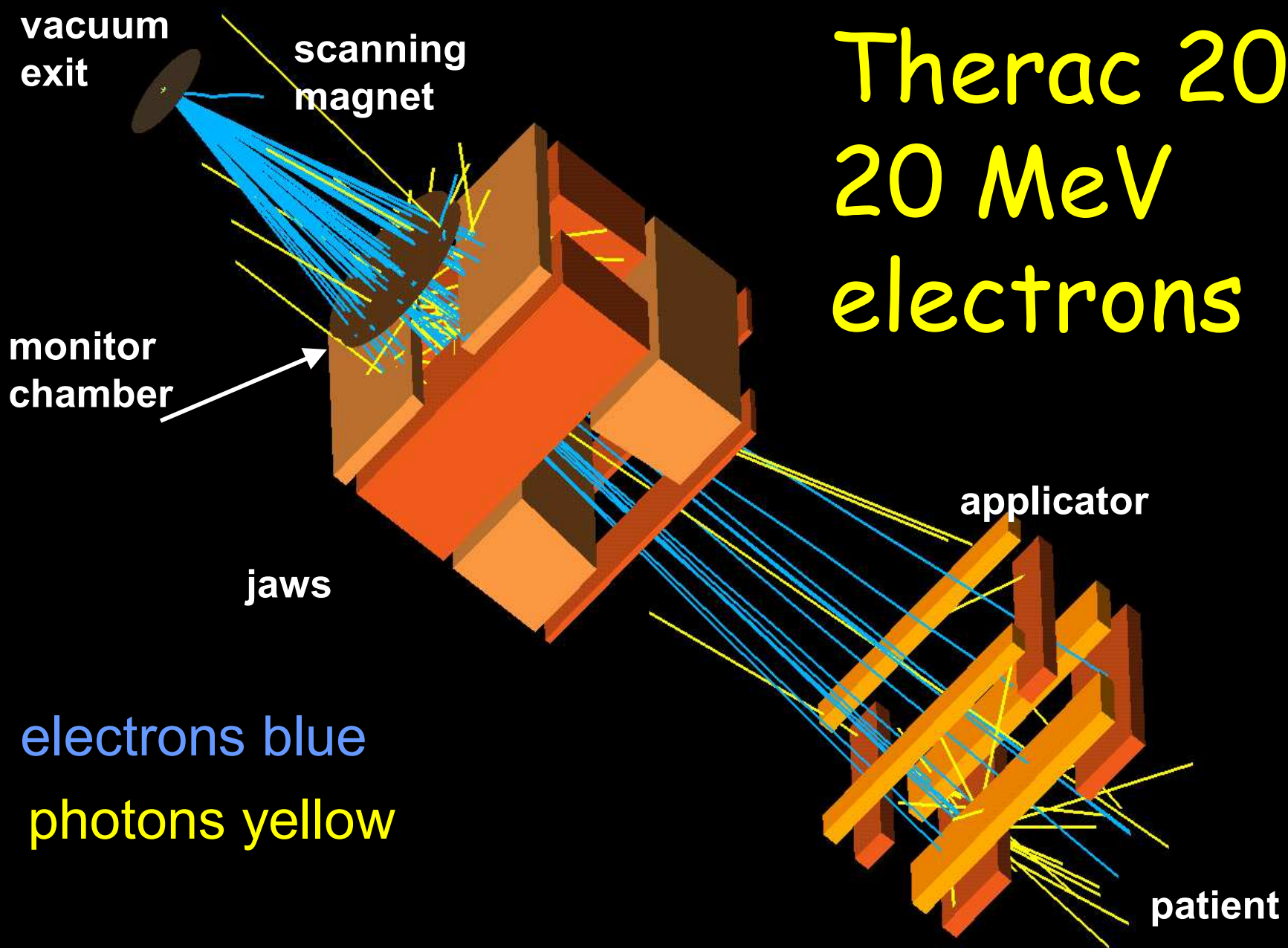


One needs to  
calculate dose  
accurately

# BEAM code

- general purpose code to simulate **radiotherapy beams**
  - accelerators -electrons & photons
    - $^{60}\text{Co}$  units
    - x-ray units
- Part of the **OMEGA project** with **Rock Mackie's** group in Madison
  - many grad students, RAs and TOs involved

# Therac 20 20 MeV electrons



electrons blue  
photons yellow

File



**NRC-CNR**

# BEAM Graphical User Interface

Ionizing Radiation Standards Group  
 Institute for National Measurement Standards  
 National Research Council Canada

Copyright 1998 National Research Council Canada

Main Inputs

? Title 10\_13Mup: MD2, no last appli. 13 MeV, 10x10cm field

? Medium AIR521ICRU

? Incident particle ele

? IWATCH Output none

? Run option first time

? Output Options phase space at each scoring plane

? Store Data Arrays yes

? LATCH option inherited latch - set by passage

? Score Last Z no

? Number of histories 1.3e+07

? Edit JAWS, CH#4

Jaws

The default maximum number of pa  
 When this window was opened, the prev

? Half-width of outer square boundary

? Title jaws set for a 10x10cm field at S

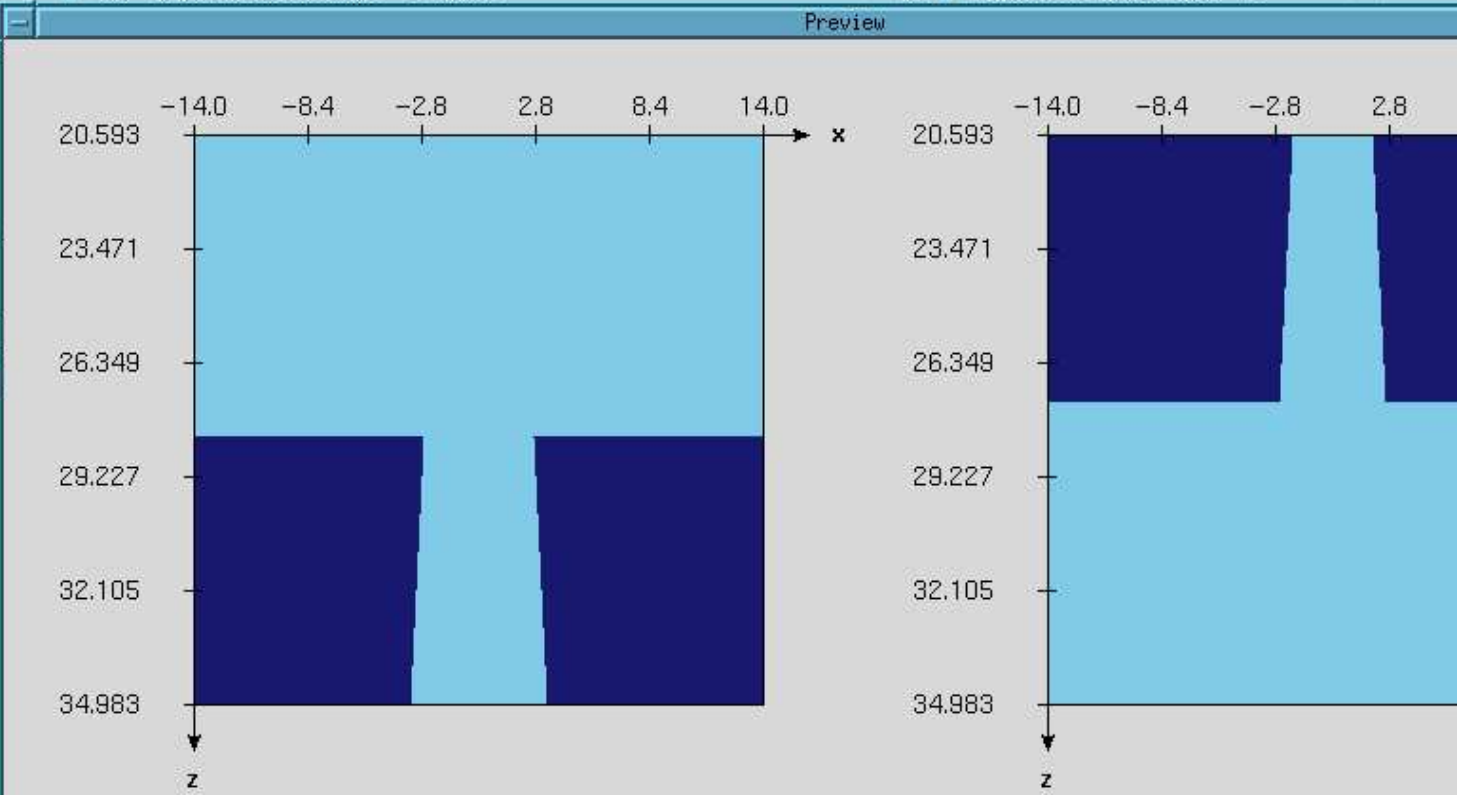
? Number of paired bars 2

Accelerator parameters  
 Accelerator parameters  
 Using PEGS4 file /usr/people/peo

Selected components

Edit main input parameters

CONESTAK	FOIL	Edit...
FLATFILT	COLFOIL	Edit...
CHAMBER	MONITOR	Edit...
JAWS	MAINJAWS	Edit...
APPLICAT	APP1	Edit...
BLOCK	APP2	Edit...



# NRC accelerator 20 MeV electrons

vacuum  
exit

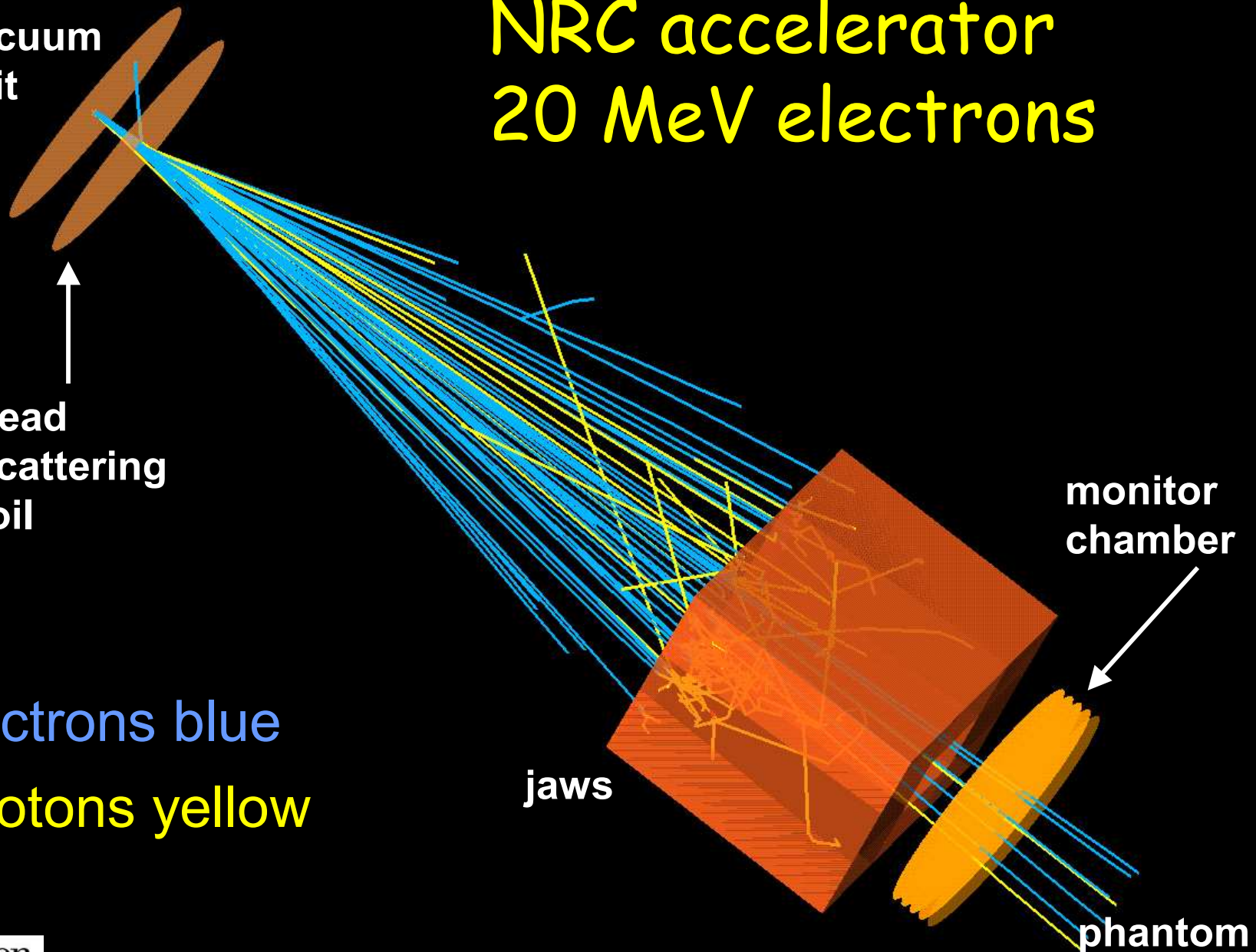
Lead  
scattering  
foil

electrons blue  
photons yellow

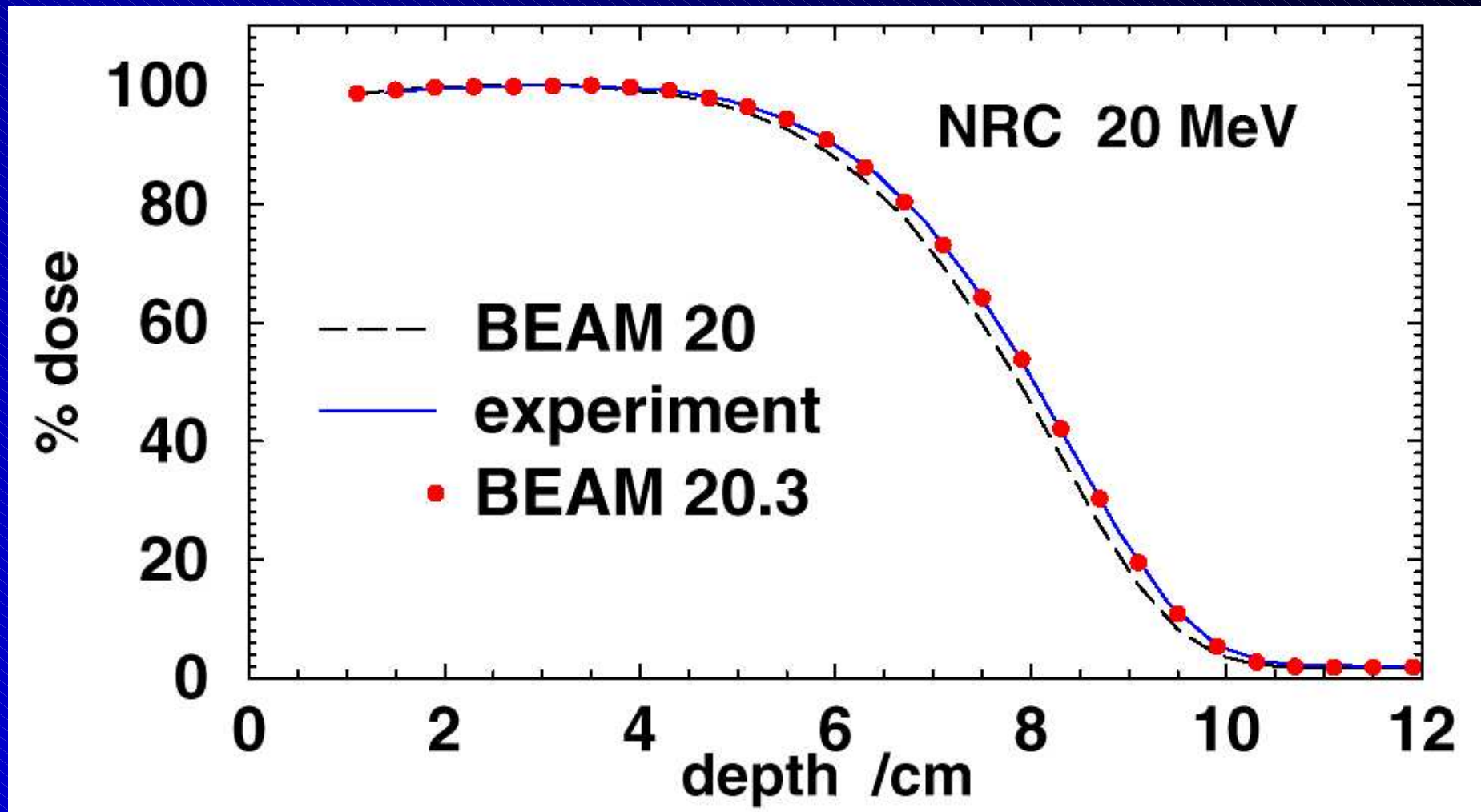
jaws

monitor  
chamber

phantom

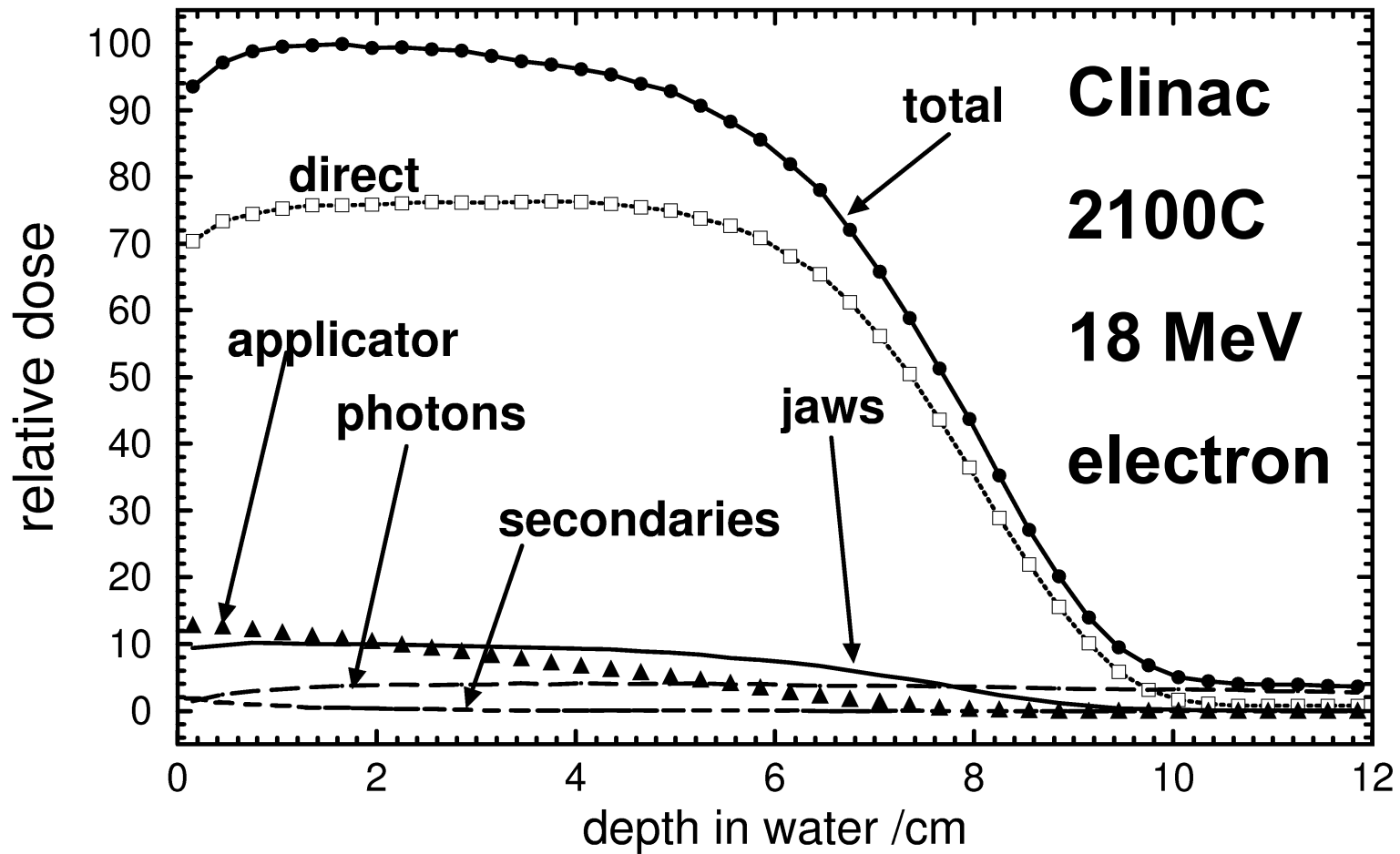


# 20 MeV NRC depth-dose



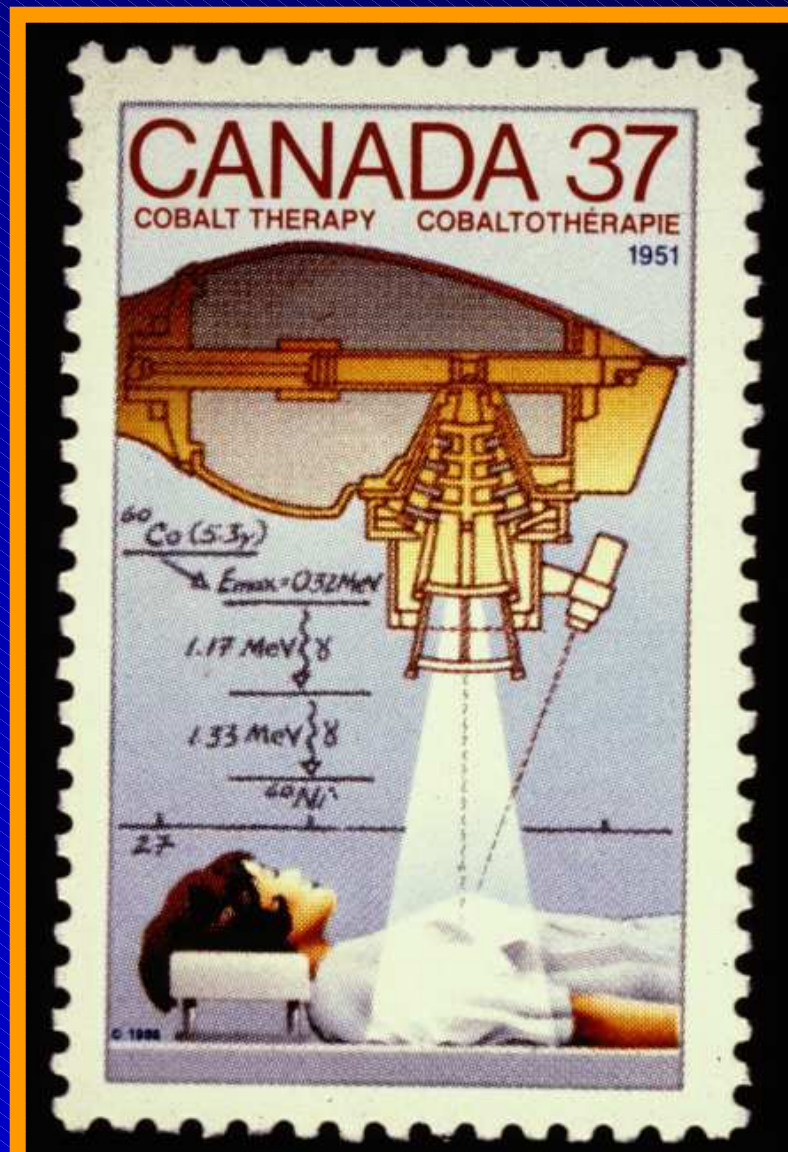


# Dose Components



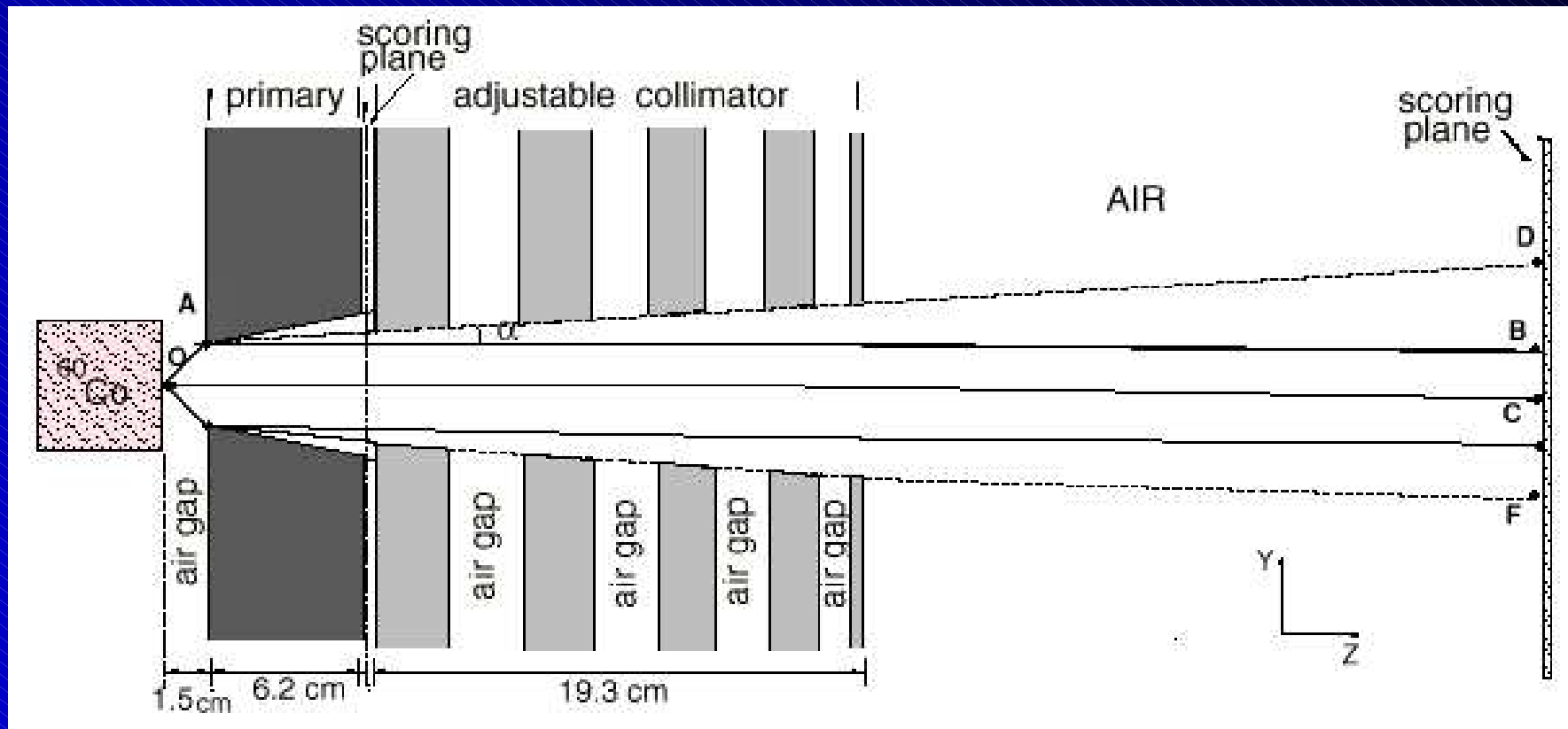
# $^{60}\text{Co}$ therapy unit

Issued  
June 17,  
1988



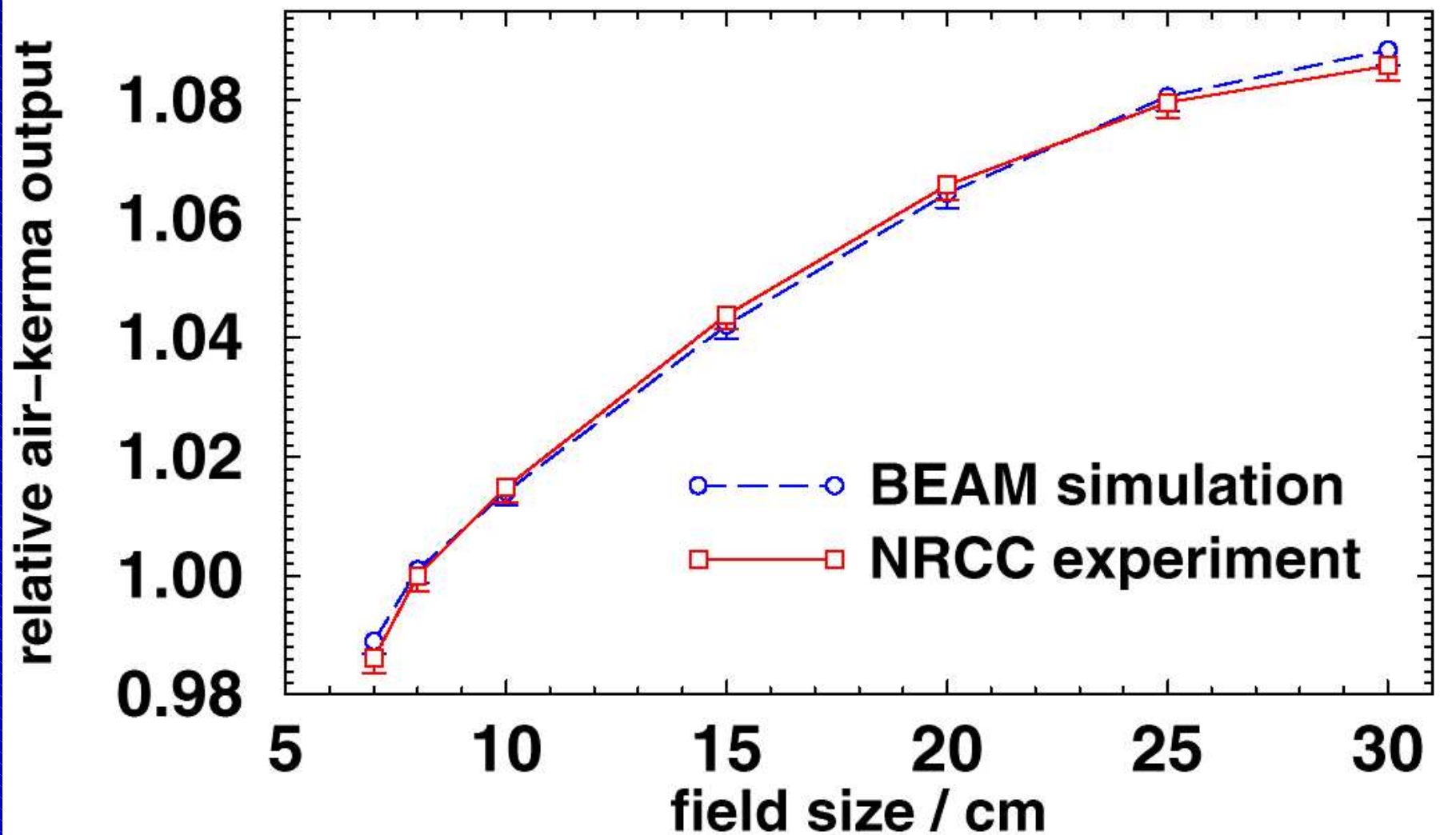
Thanks to  
Jerry Battista

# Simulating an Eldorado6

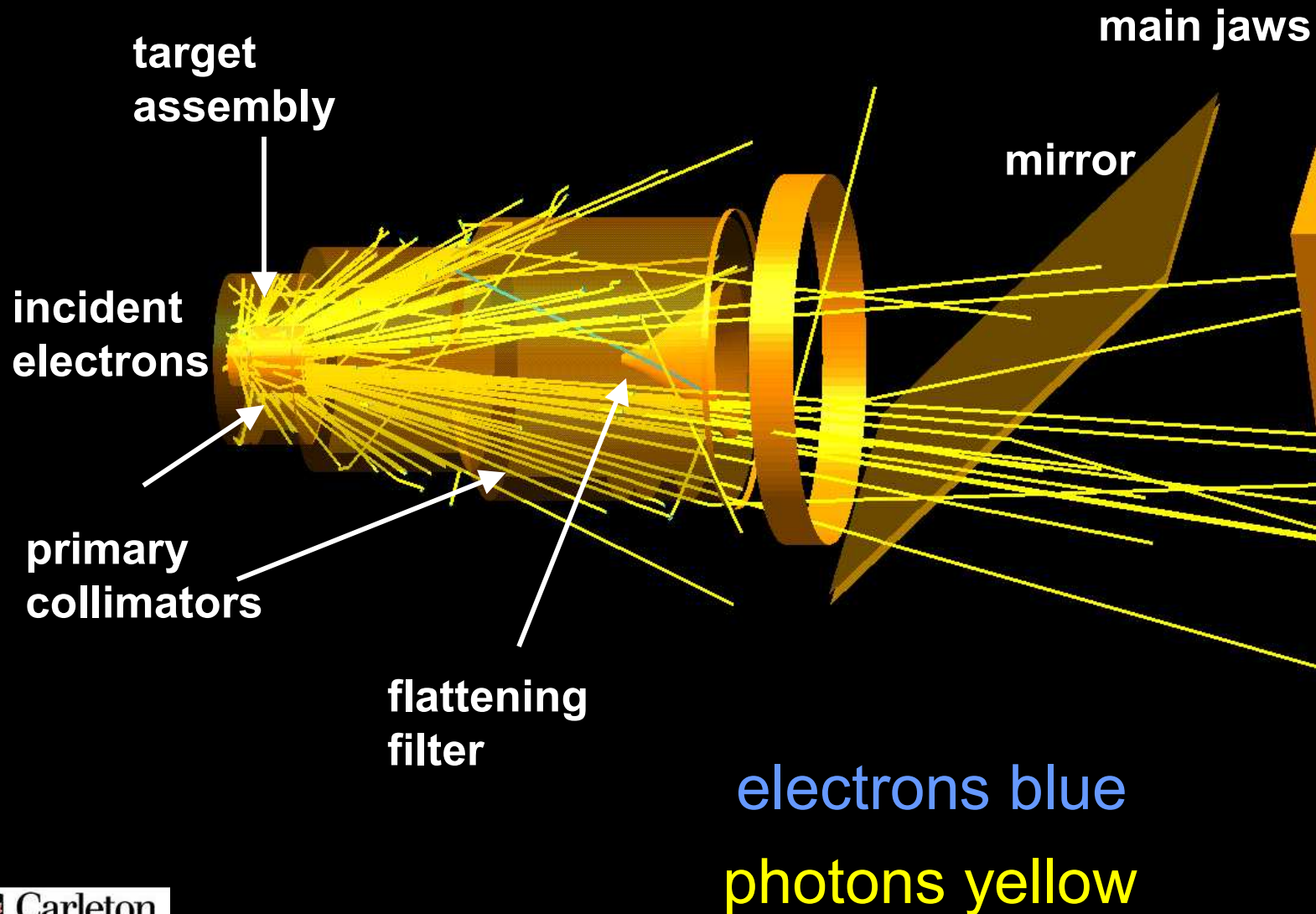


Mora et al Med Phys 26(1999) 2494

# Output variation vs expt



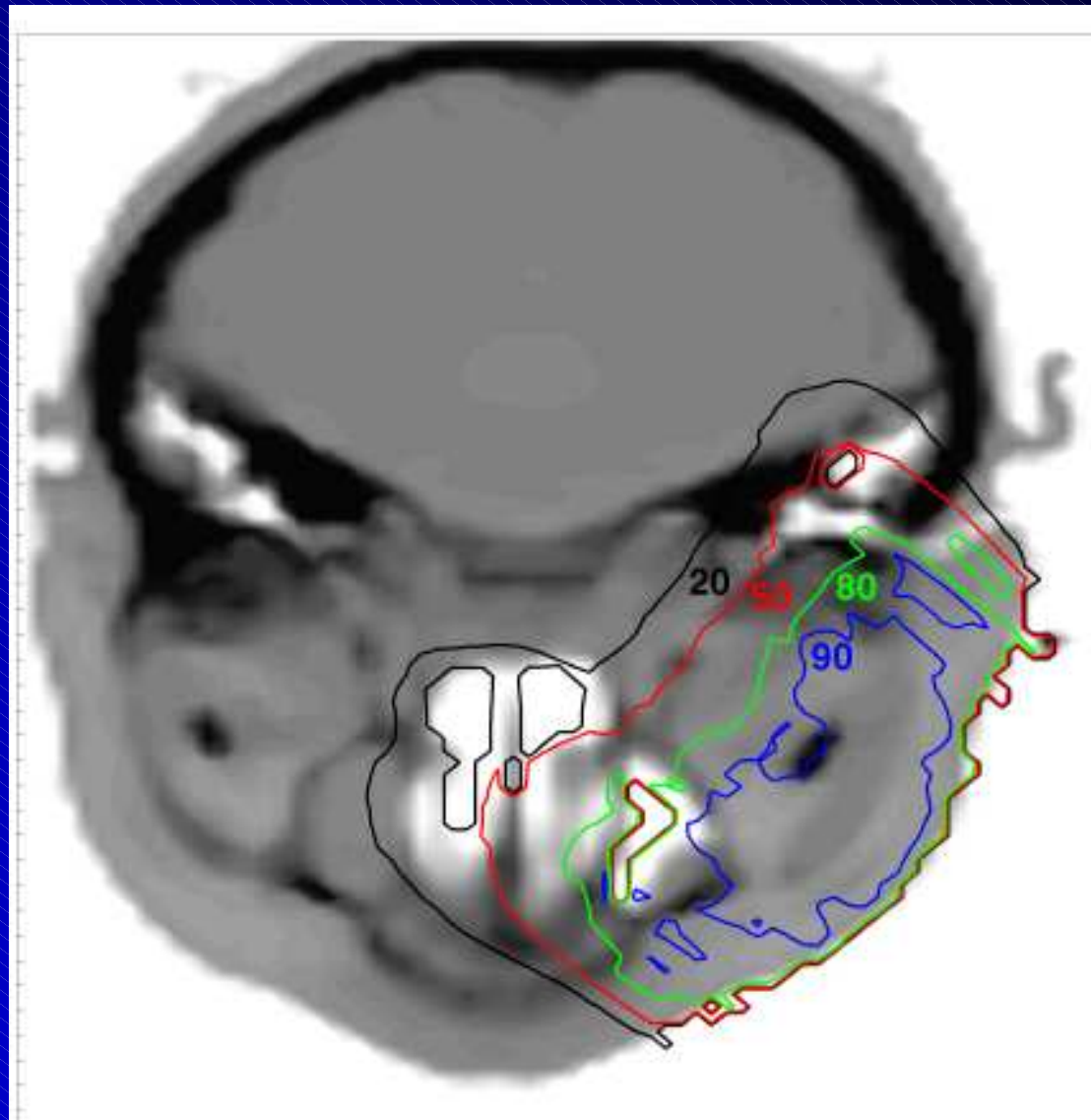
# Siemens 6MV KD2



# Uses of BEAM

- accelerator design
- study physics of beams
- dosimetry studies
- beam characterization
  - 1st step to **treatment planning**
- commissioning accelerators

# CT Treatment Planning



# Radiotherapy Treatment Planning

- plan how to deliver a dose to tumour
  - avoid critical organs
- need **accurate calculation of patient dose**
  - patient specified by CT data
- traditional **analytic techniques** are inaccurate
  - especially for electron beams
  - photons less so (already use MC **energy deposition kernels**)



# Clinical Electron Monte Carlo

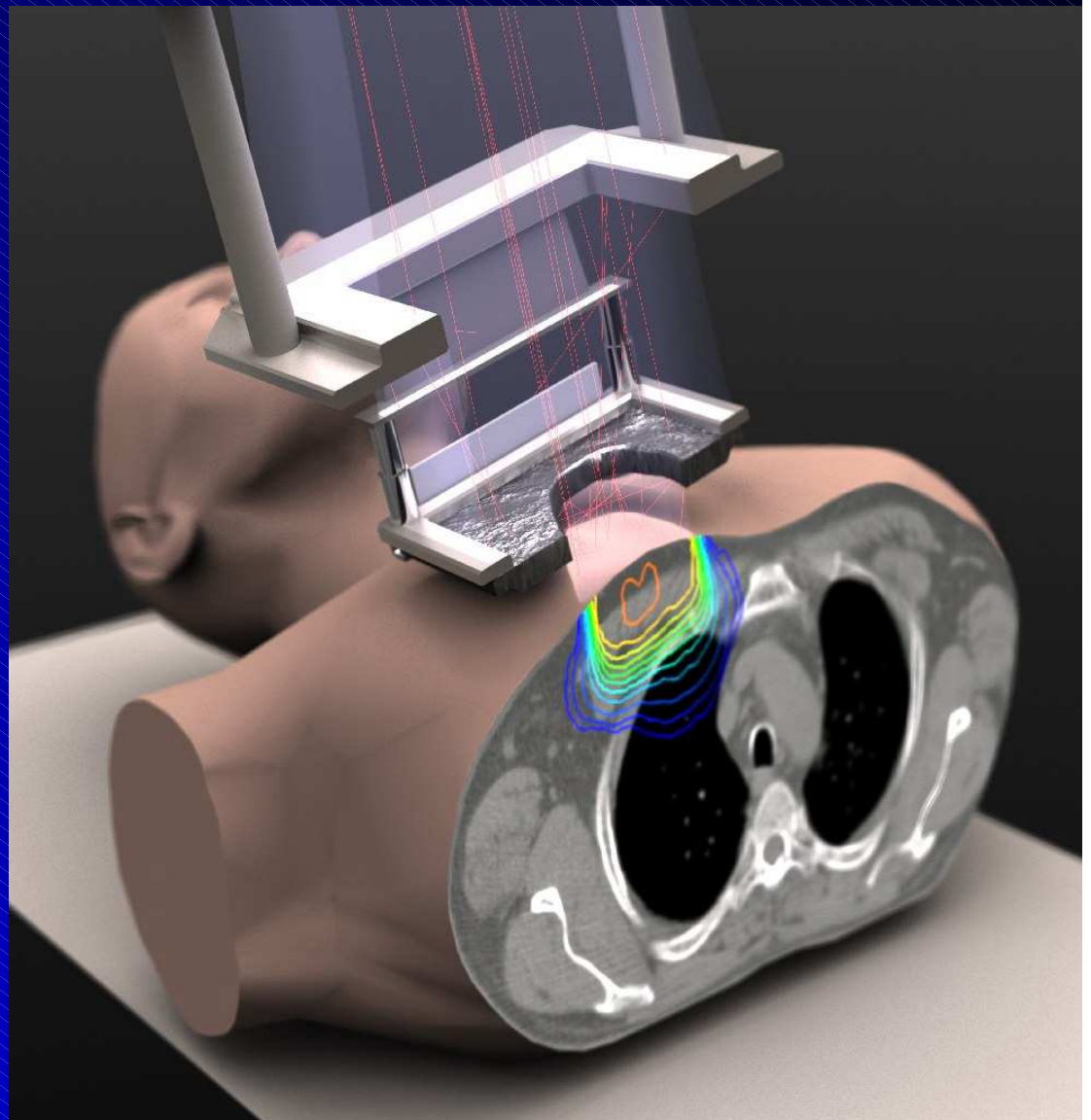
VMC Iwan Kawrakow &  
Matthias Fippel, 1996  
working in Germany

2000 summer at NRC

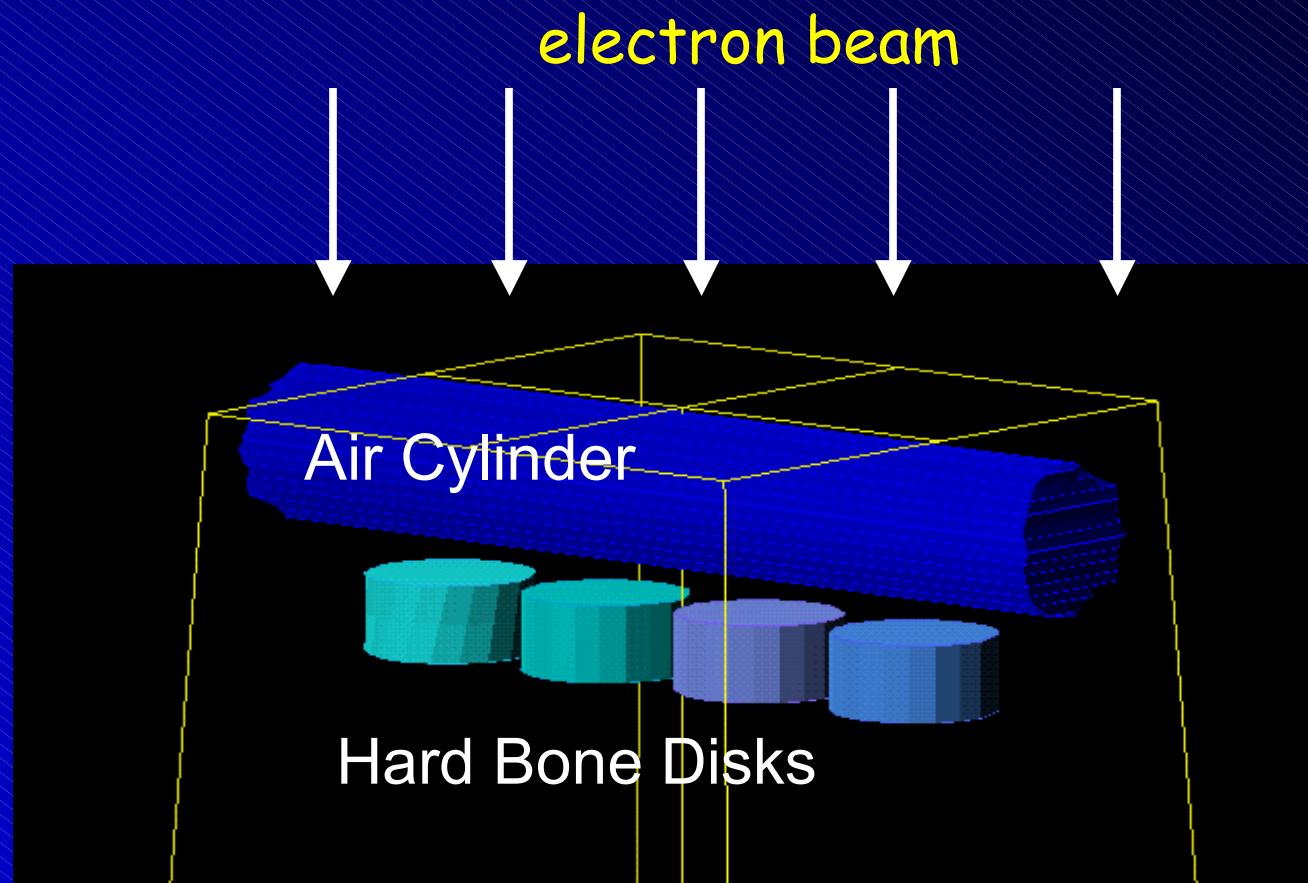
Kawrakow VMC++ (C++)

Nordion (Nucletron)  
licensed

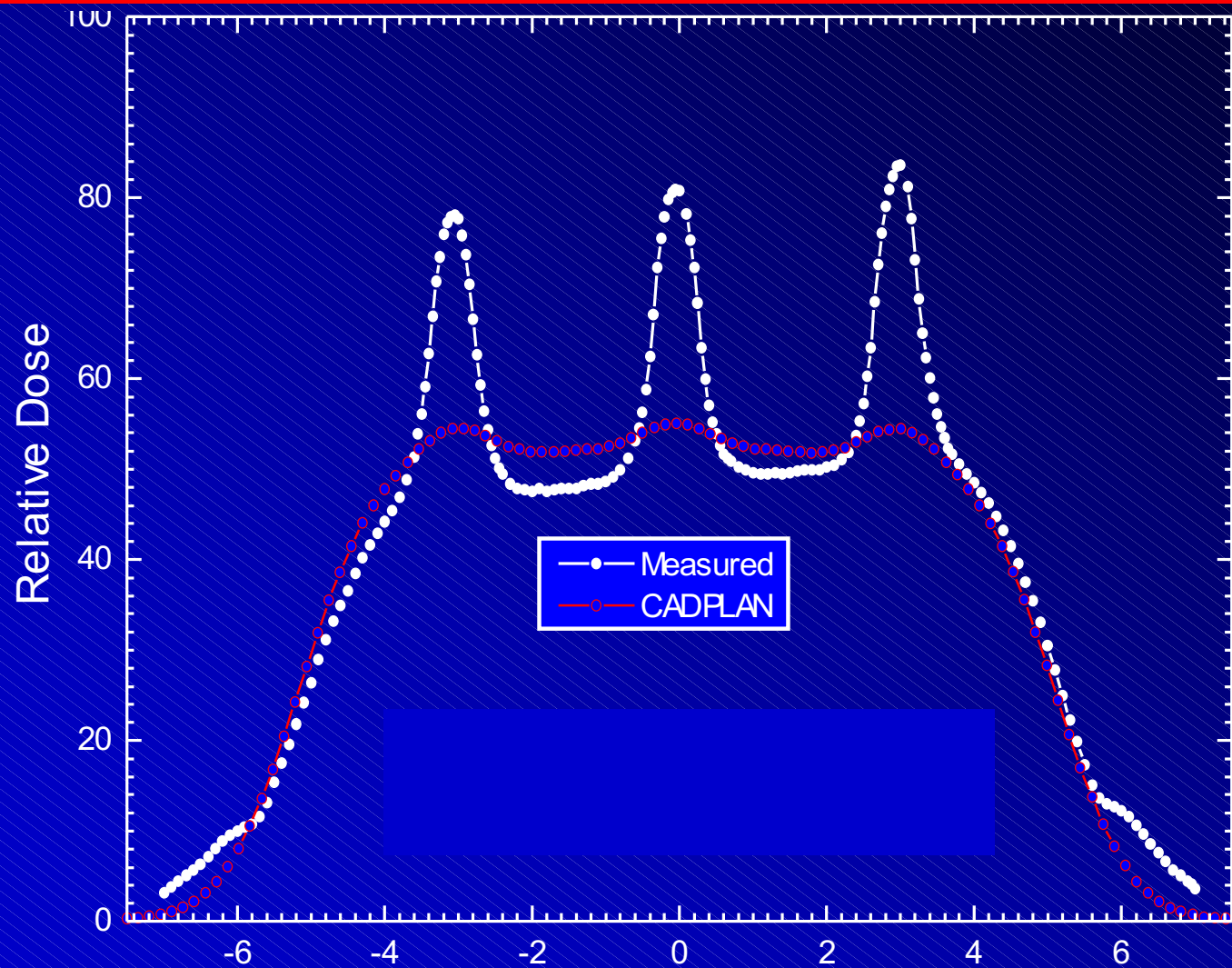
Cygler beta tested  
(ORCC)



# Cygler's Trachea and Spine Phantom

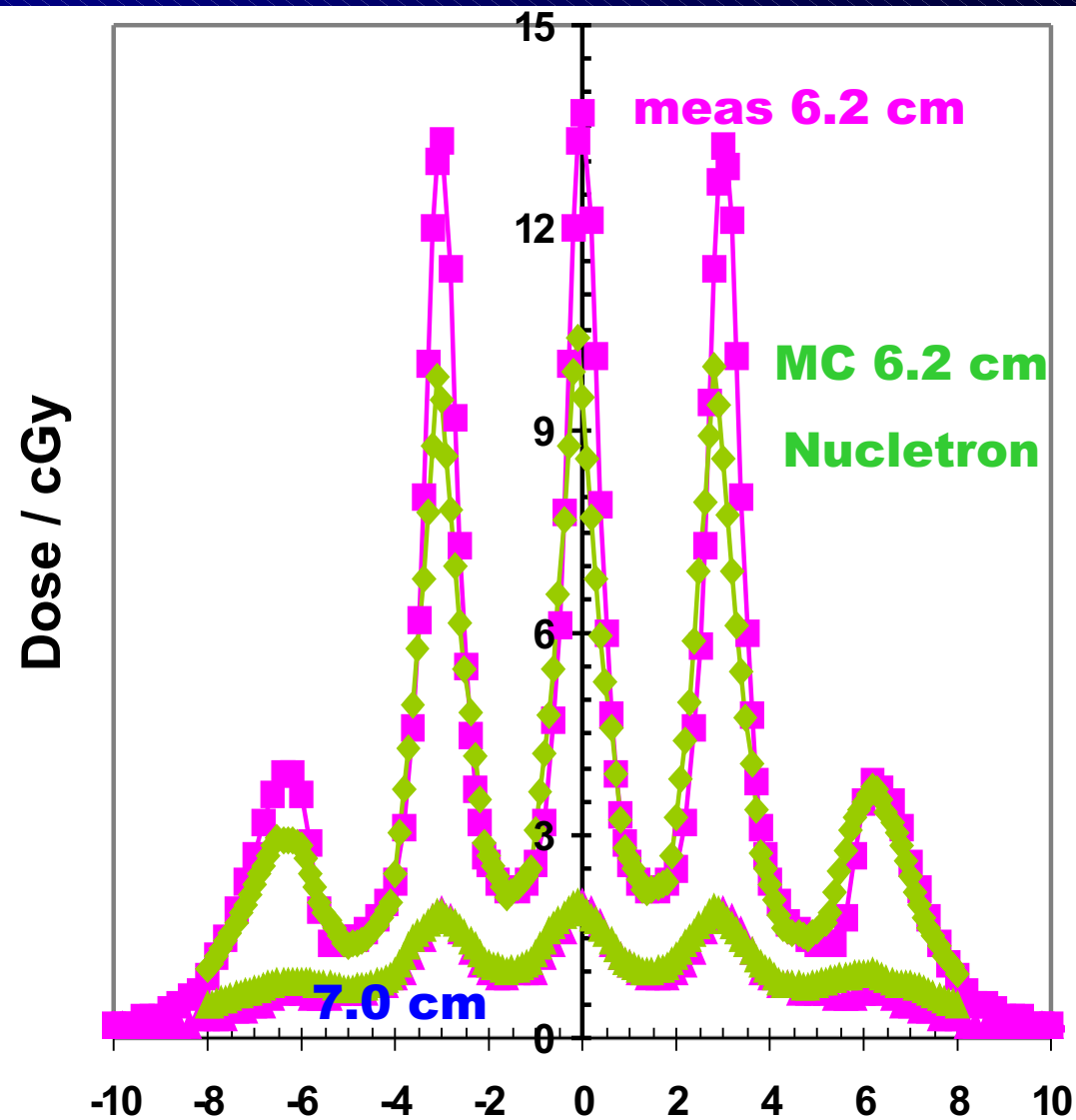


# 9 MeV: Trachea & Spine measurements vs pencil beam



# 9 MeV beam: Trachea and spine

Cyglar et al,  
Med Phys  
31(2004) 142



# SNOMAN -MC for SNO

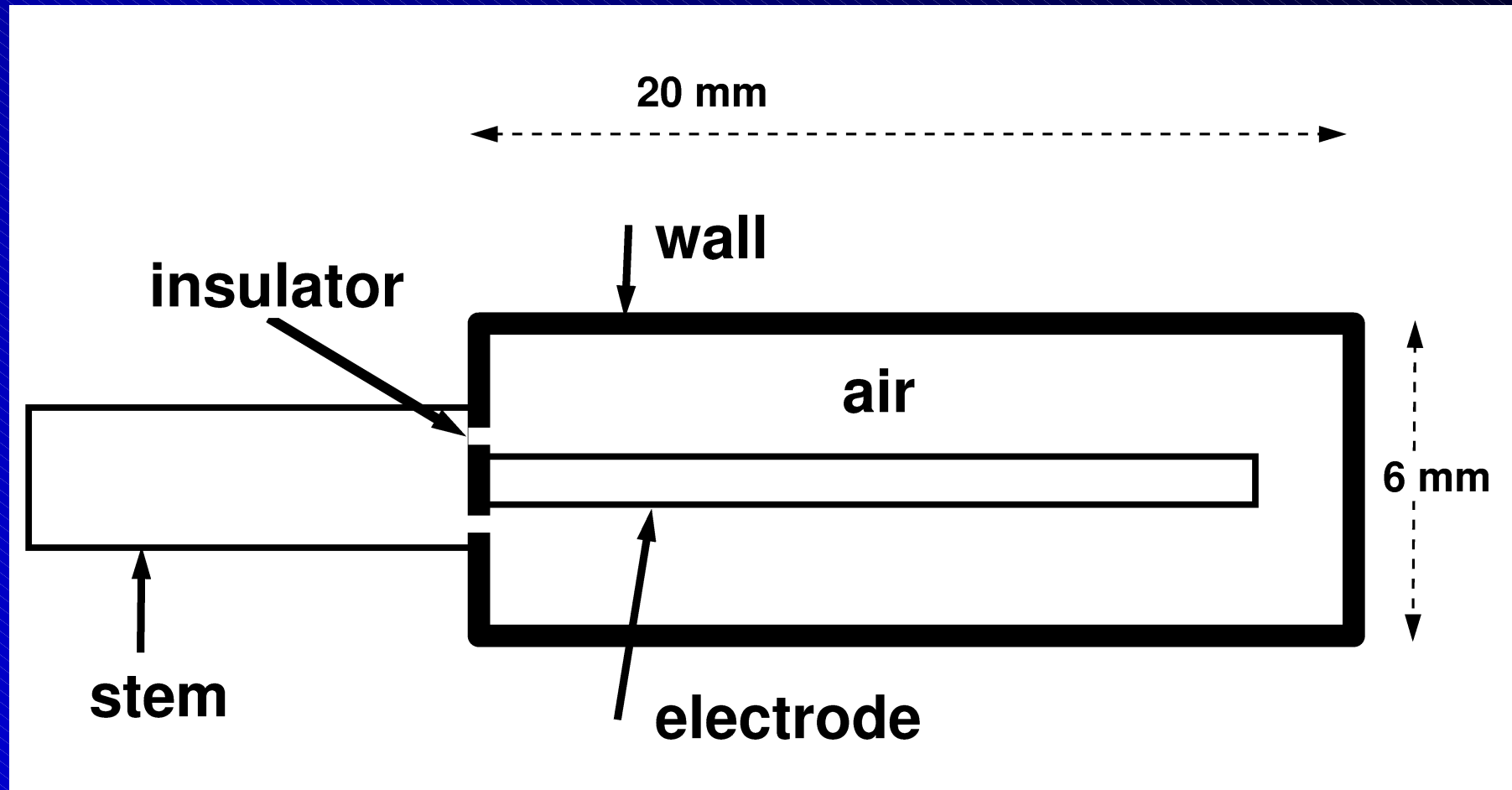
- the Monte Carlo simulation of the SNO detector (**SNOMAN**) uses **EGS4** to simulate the slowing of electrons
  - this is critical in determining the light output
- recently a **discrepancy with the calibration data** has been removed by adding in a patch to include Mott scattering in the simulation
- comparisons with **EGSnrc** demonstrate that the SNOMAN patch **gets the right answer**

# Conclusions

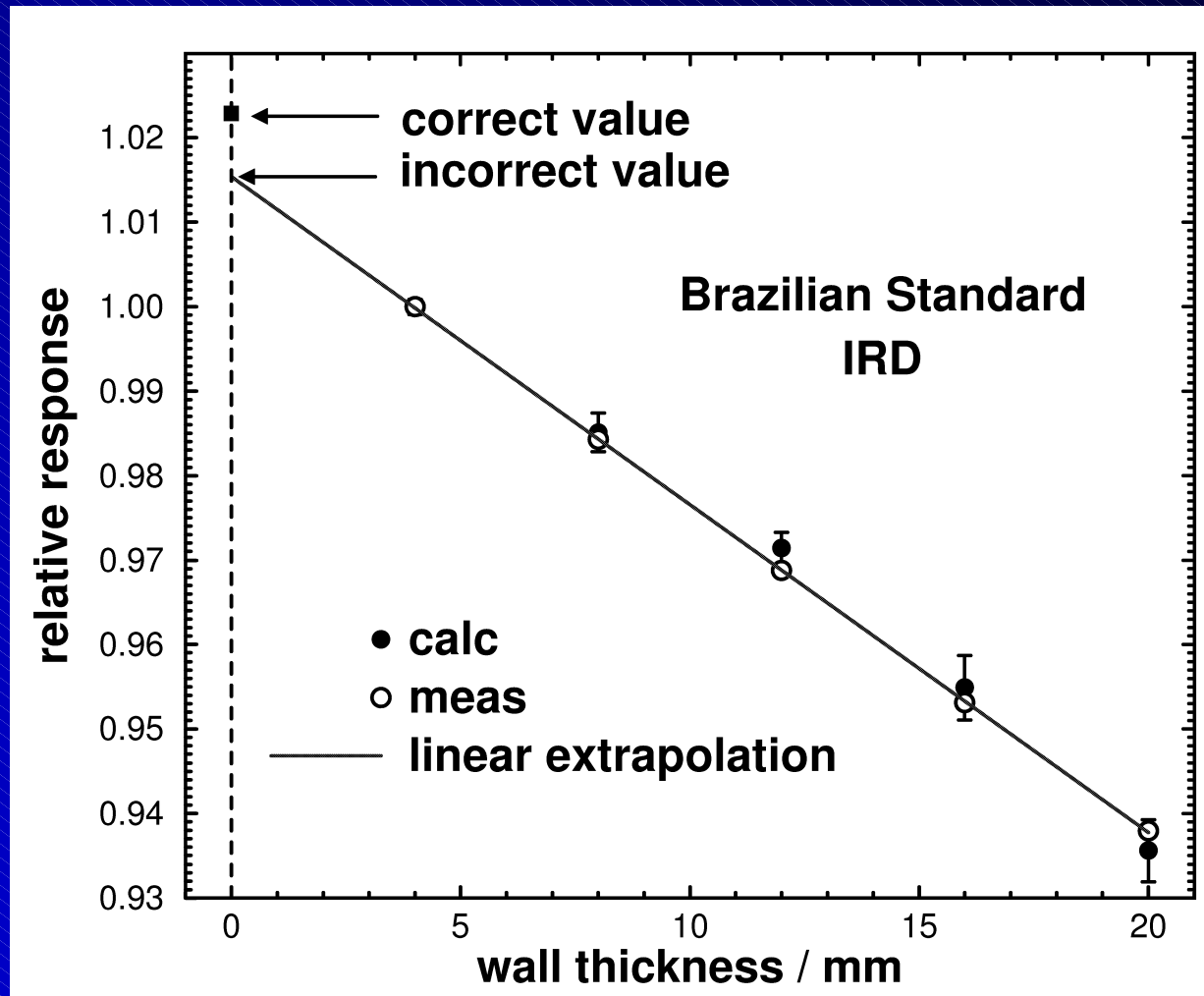
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- Monte Carlo is useful
  - making dosimetry more accurate
    - improving radiotherapy
- golden age ahead as machines and codes faster and more flexible
- the future will see modelling to the biological level, not just physical dose

# Ion chambers



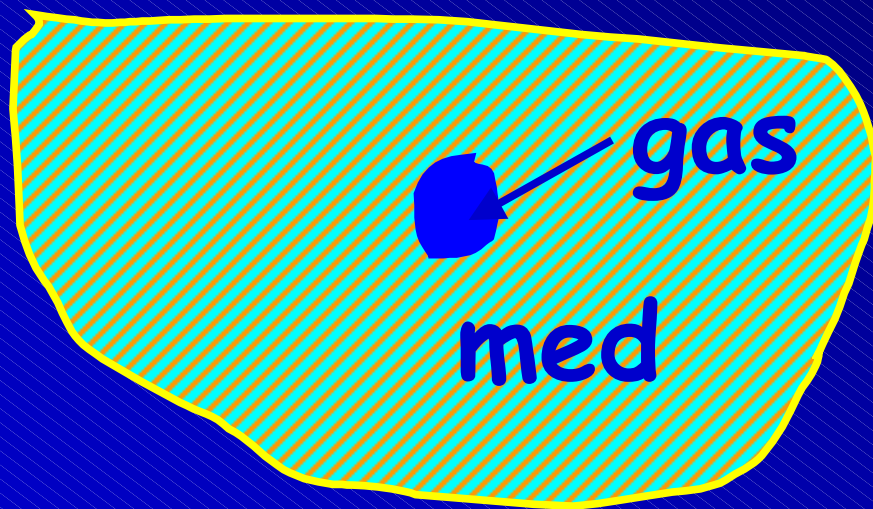
# $A_{\text{wall}}$ correction





# Stopping-power ratios

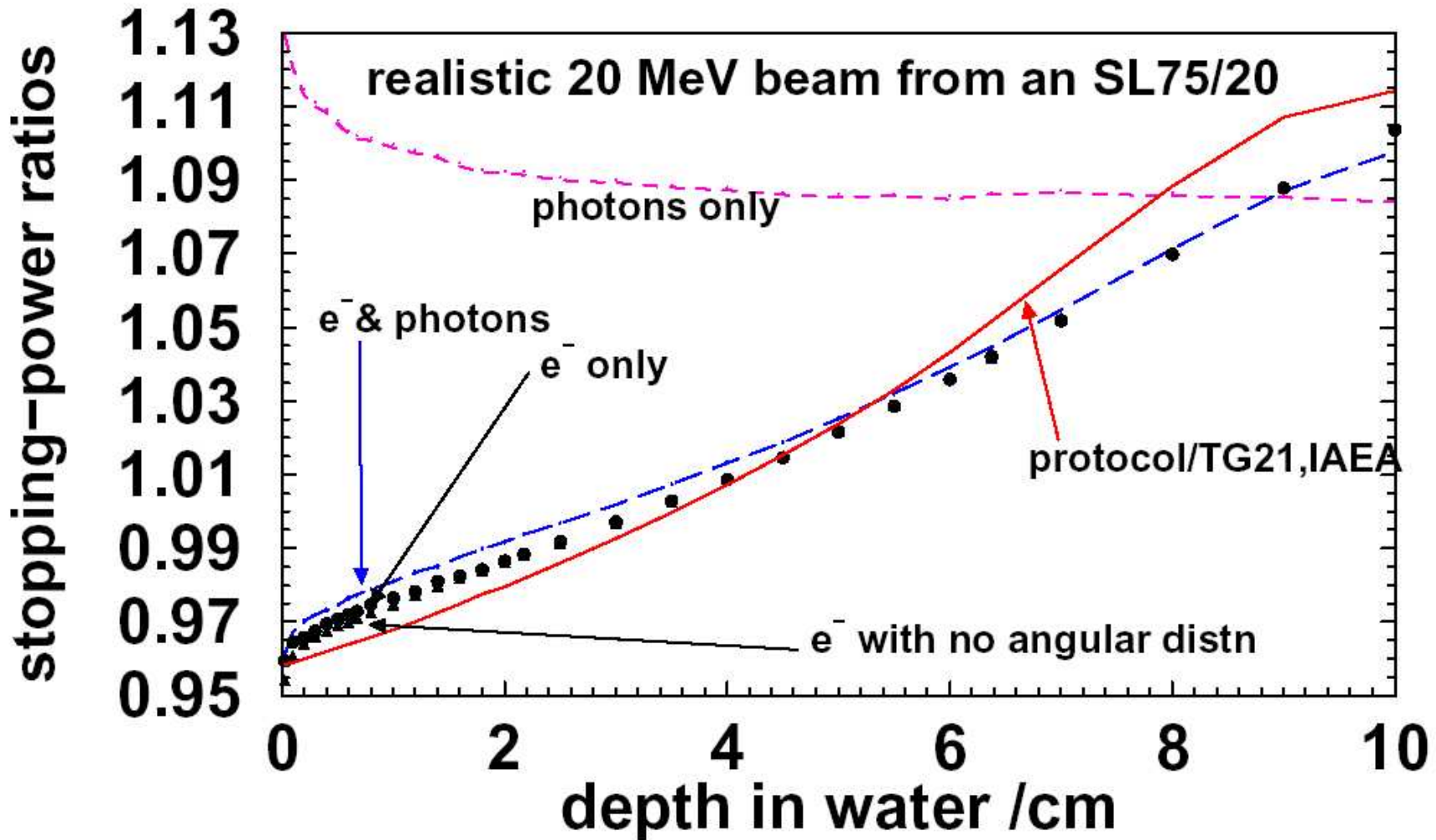
Relates dose in cavity to dose in medium.



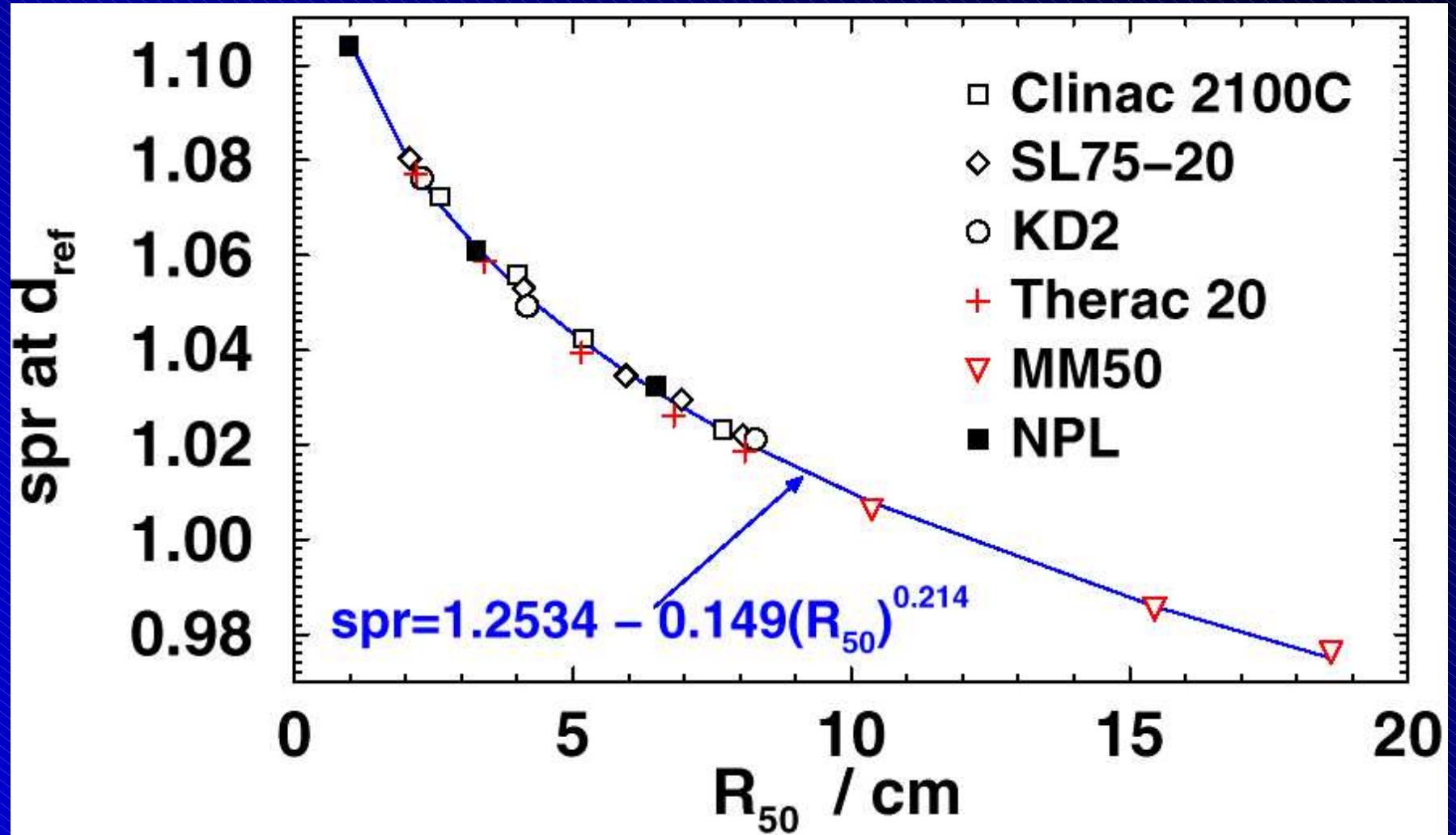
sprs fundamental to  
-dosimetry protocols  
-primary standards

$$D_{med} = D_{gas} \left( \frac{\bar{L}}{\rho} \right)_{gas}^{med}$$

# Realistic electron beam sprs

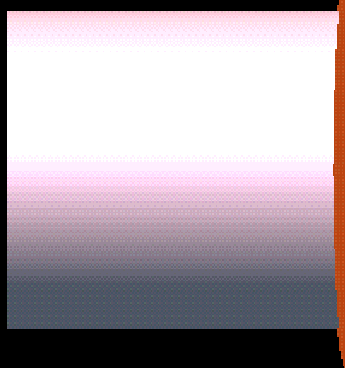


# Realistic sprs at $d_{ref}$



# Measuring electron stopping powers

electron  
accelerator

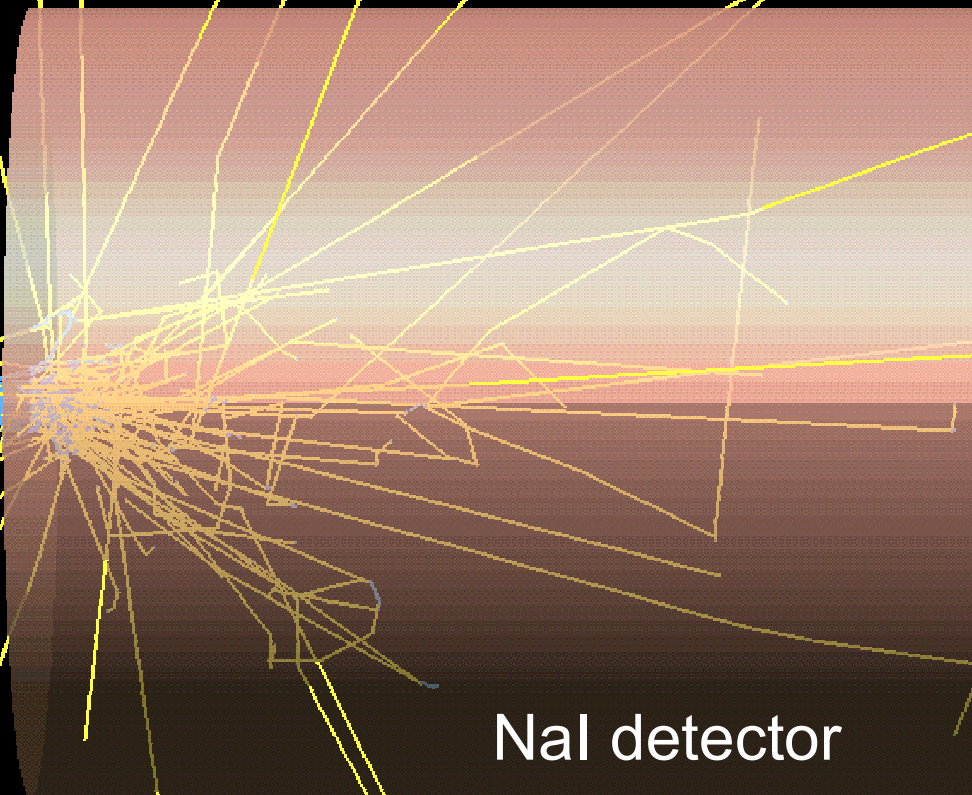


exit window

thin slab of  
material



brem escape



NaI detector

**NRC-CNRC**

MacPherson et al

# electron stopping power measurements

