# 7th International Particle Accelerator LNS Conference

The ELIMED beamline at ELI-Beamline (Prague, Cz) status, plans and potential applications

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> > \*on behalf of the LNS ELIMED Collaboration

We are dealing with high power laser - matter interaction for particle acceleration

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Laser characteristics		Accelerated beams		
Power	PW order (10 <sup>15</sup> W)	Beams	gamma, electrons, ions,	
Duration ntensity	fews femto seconds 10 <sup>21</sup> -10 <sup>23</sup> W/cm <sup>2</sup>	<b>Energies</b> Intensities	MeV/GeV in broad spectra 10 <sup>9</sup> -10 <sup>12</sup>	

### We are dealing with high power laser - matter interaction for particle acceleration



Power

**Duration** 

Intensity

lectrons, ions, in broad spectra



### ELI (Extreme Light Infrastructure) An European distributed infrastructure where laserpower will be exploited





ELI-NP(R)



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# Talk mainstream

Hadrontherapy: advantages, its limitations

The ELIMED initiative: a ion beamline for laser-driven beams

Status of the realisation of the ELIMED beamline



# Hadrontherapy

Its advantages, its limitations

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## External radiation treatment

# The most common approach in cancer treatment together with surgery

Anatomy does not allow surgery Radio-resistant tumours close to organ at risk

### HADRONTHERAPY and the debate in the medical community





## The medulloblastoma case





### x-Ray therapy

### Protontherapy

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## The medulloblastoma case

### Reduction of secondary tumour risk

#### Pediatric Medulloblastoma: The yearly risk of getting a secondary tumor was estimated to be 8 times greater with X-rays than with proton therapy <sup>2</sup>

Tumor Site	Proton Therapy	X-rays/IMRT	
Stomach and esophagus	0%	11%	This chart compares the rates of secondary tumors
Colon	0%	7%	treated for medulloblastoma.
Breast	0%	0%	Data shown are from a study
Lung	1%	7%	and compared a caunon plane.
Thyroid	0%	6%	
Bone and connective tissue	1%	2%	
Leukemia	3%	5%	
All Secondary Cancers	5%	<b>43</b> %	IMRT= intensity modulated radiation therapy (a type of X-ray therapy)

#### Mirabell RA et al.

Potential reduction of the incidence of radiation-induced second cancers by using proton beams in the treatment of pediatric tumor, Int. Jour. Rad. Onc. Phys. 2002, 54 (3) 824

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Years Particle Therapy Cooperative Group (PTCOG)

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### REVIEWS

#### Charged particle therapy—optimization, challenges and future directions

#### Jay S. Loeffler and Marco Durante

Abstract | The use of charged particle therapy to control tumours non-invasively offers advantages over conventional radiotherapy. Protons and heavy ions deposit energy far more selectively than X-rays, allowing a higher local control of the tumour, a lower probability of damage to healthy tissue, low risk of complications and the chance for a rapid recovery after therapy. Charged particles are also useful for treating tumours located in areas that surround tissues that are radiosensitive and in anatomical sites where surgical access is limited. Current trial outcomes indicate that accelerated ions can potentially replace surgery for radical cancer treatments, which might be beneficial as the success of surgical cancer treatments are largely dependent on the expertise and experience of the surgeon and the location of the tumour. However, to date, only a small number of controlled randomized clinical trials have made comparisons between particle therapy and X-rays. Therefore, although the potential advantages are clear and supported by data, the cost:benefit ratio remains controversial. Research in medical physics and radiobiology is focusing on reducing the costs and increasing the benefits of this treatment.

Loeffler, J. S. & C Research and development in the field of accelerators should be towards a reduction of costs, while maintaining or improving the performances of the current NATURE REV machines. Possible new accelerators for CPT122 include synchrocyclotrons, rapid cycling synchrotrons, fixedfield alternating gradient rings cyclotron-linac combinations, dielectric wall accelerators, and laser-driven plasma accelerators.<sup>123</sup> These options are at very different

NE PUBLICATION 1



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NE PUBLICATION 1

### Are new acceleration solution available, reducing cost and size still maintaining quality?

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# Research for a dream' solution

can we reduce size, complexity and cost without loosing the quality ?



Simple Small Cheap (order of 10 M€) Widespread Multi-beam and modalities





Quite large accelerators Sophisticated beam transport (gantry) High costs Limited number of hadrontherapy centres Alternative solutions

"If 200 MeV proton accelerators would be as cheap and small as the 10 MeV electron linacs used in conventional radiotherapy, at least 90% of the patients would be treated with proton beams" U. Amaldi et al., NIM A 2010.





Bulanov et al. REVIEWS OF TOPICAL PROBLEMS (2014)

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# The ELIMED initiative

ELI-Beamlines MEDical and multidisciplinary applications

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# ELIMED goals

Beam control

### Answer to the question

can we use laser-ions for medical/multidisciplinary applications? Try to fill this table

	Conventional beams	Laser-driven beams
Maximum energy	250 MeV 400 AMeV	?
Current	order of nA	?
Monochromaticity	∆E/E ≤10 <sup>-2</sup>	?
Stability, reproducibility, control, absolute dosimetry	Less that 3%	?
Radiobiology	Almost known	?

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### ELIMAIA final goal: Users' beamline realisation ELI-Beamlines (Prague, CZ) within 2017

### Flexible, modular, Users' addressed



# **ELIMED** history

### 2012

#### 2011







Memorandum of Understanding for a scienti collaboration towards medical applications Between the

Ell-Beamlines, Institute of Physics of AS CR, public research institution (FZU), Prague, Czech Republic

And

Laboratori Nazionali del Sud (LNS), of INFN, public research institution, Catania, Italy

4.



WORK SUBJECT-MATTER; WORK SCOPE

The Contract concerns the design, assembling, performance optimization, and delivering to the Client at the Client's Place of Business of a complete transport beamline and a number of dosimetric endpoints that will enable the users to apply laser-driven ion beams in multidisciplinary fields in accordance with this Contract (hereinafter the "System"). Furthermore, the scope of this Contract mainly encompasses (i) various training services to be provided to the Client's personnel in compliance with Article 13 of this Contract (ii) a royalty free licence, if any according to Article 14, to use the System for the purposes of the use of the EU-Beamlines Project after completion and (iii) the possible realization of the Additional System, subject to the exercise of the Call Option right by the Client under par. 4.6 (the System and the other parts of the works/services are hereinafter referred to as the "Works").

Signed in Prague on 811212019

Signed in Rome on

On behalf of: Fyzikální ústav AV ČR, v. v. i.

Signature: \_\_\_\_\_\_ Name: Prof. Jan Řídký, DrSc. Title: the Director

On behalf of: INFN, Instituto Nazionale di Fisica Nucleare

-5 DIC. 2014

Signature

Name: Prof. Fernando Ferroni ISTITUTO NAZIONALE DI FISICA NUCLEARE Title: fint P IL PRESIDENTE (Brok Famando Famoni)

2014

## ELIMAIA hall and the ELIMED beamline

**ELI** Multidisciplinary Applications of laser Ion Acceleration **ELI** MEDical and multidisciplinary applications







# The ELIMED beamline

Implementation status

Three ingredients:

Beam transport solutions
 Diagnostic and dosimetry
 Monte Carlo simulations

### ELIMED beamline



### Collecting and focusing: permanent magnetic quadrupoles





High field uniformity (2% in radial direction) and gradient 100 T/m on 36 mm bore

### Collecting and focusing: permanent magnetic quadrupoles



### Quadrupoles delivering expected within September 2016

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# Energy selection





Commator 2				
° of Dipoles	B field	Geometric length	Effective length	Gap
4	0,085 – 1,2 T	400 mm	450 mm	59 mm
Good Field egion (GFR)	Field uniformity	Curvature radius	Bending angle	Drift between dipoles
100 mm	< 0,5 %	2,5293 m	10,10° (176,3 mrad)	500 mm

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Angular divergence: 5° (FWHM)

Angular divergence: 12% (9.2 \*107 H+/bunch)



### 60 MeV case

Dose: 0.05 Gy/bunch Fluence: 3\*10<sup>7</sup> H+/cm<sup>2</sup> Dose rate: 3 Gy/min

Angular divergence: 5° (FWHM)

Angular divergence: 14% (3.2 \*10<sup>9</sup> H+/bunch)



30 MeV case

Dose: 0.35 Gy/bunch Fluence: 3.4\*10<sup>8</sup> H+/cm<sup>2</sup> Dose rate: 21 Gy/min

# Beam-transport prototypes completed (up to 30 MeV)

# INFN-LNS conventional 30 beams



# ELIMED R&D: beam transport and selection prototypes





FIGURE 4 – Average proton beam spectrum extracted from the traces recorded by the forward Thomson Parabola, without (in red) and with (in blue) the quadrupole system.







# Diagnostics and Absolute dosimetry

Beam characteristics:



# Diagnostics and dosimetry



LNS



### Diagnostics and dosimetry

- Time of Flight approach
  - On-line energy distribution and flux for p up to 60 MeV
- Detector requirements
  - Radiation hardness
  - Time resolution

#### sCVD diamond

Substrate thickness: 500 µm Electrode size: 4 mm diamete Detector capacitance: 3 pF Bias voltage: 400 V

#### pCVD diamond

Substrate thickness: 100 µm Electrode size: 3 mm diameter Detector capacitance: 4 pF Bias voltage: 200 V



### Diagnostics along the beamline

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### , pepper-pot' approach

### ، pepper-pot' approach

### Grid characteristics Tantalum

- 13 mm in thickness
- 4 mm pitch
- 1 mm hole diameter



### repper-pot' approach

### Grid characteristics Tantalum

- 13 mm in thickness
- 4 mm pitch
- 1 mm hole diameter



### Monte Carlo simulation







# Tests with conventional proton beams ongoing

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# Diagnostics and dosimetry: in-air final section





### Diagnostics and dosimetry: in-air final INFN LNS section Unit A Irradiation system **SEM** Multi-gap chamber Faraday cup Passive detectors: Absoulte dosimetry RCF and sample irradiation 1 MDC TLD On-line relative dosimetry **CR39**



# On-line dosimetry: multi-gap ionisation chamber



Thanks to the the different gaps we can correct for the charge recombination effects at very high beam intensity

#### Collaboration with Turin INFN section



## **ELIMED Monte Carlo simulations**

Main requirements of the application

- Accurately simulate the particle source using PIC
- Implement magnetic and electric fields described by maps
- Provide a graphical user interface to easily modify geometry
- Provide tools to easily retrieve output information on specific virtual planes
  - Energy spectrum, emittance, fluence, dose
  - The secondary radiation produced along the beam line





Multigap chambers

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## **ELIMED Monte Carlo simulations**



### **ELIMED Monte Carlo simulations**

The complete simulation with Geant4





#### Radiobiology

- Cultural heritage
- **Radiation damage**
- **Proton imaging**
- Detector and dosimetry tests-bench
- GAP Cirrone, pablo.cirrone@lns.infn.it



#### Radiobiology

Cultural heritage

**Radiation damage** 

**Proton imaging** 

Detector and dosimetry tests-bench

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- Motorized system with 100 um precision
- Remotely controlled
- Interfaced with beam control system
- Real time dose-rate monitoring



	Conventional beams	Laser-driven beams
Maximum energy	250 MeV 400 AMeV	<b>(250</b> ?)
Current	order of nA	
Monochromaticity	ΔE/E ≤10-2	Broad beam: optical solutions, target solutions?, both? 😒
Stability, reproducibility, control, dosimetry	Less that 3%	
Radiobiology	Almost known	



# Conclusions

Hadrontherapy, its advantages, its limited spread

Laser driven ion beams as possible future alternative

ELIMED: a Users' open transport beamline for laserdriven ion beams equipped with dosimetry for multidisciplinary studies will be ready in 2018

















ALMA MATER STUDIORUM UNIVERSITÀ DI BOLOGNA



Istituto Tecnologie Avanzate Laboratorio Nano Tecnologie



Consiglio Nazionale delle Ricerche Istituto di Bioimmagini e Fisiologia Molecolare

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#### 2nd ELIMED Workshop and Panel



Catania, Italy 18-19 October 2012 Editors Daniele Margarone, Pablo Cirrone, Giacomo Cuttone and Georg Korn

AIP Proceedings







The 3<sup>rd</sup> **ELI MED**ical and Multidisciplinary Applications of Laser-Driven Ion Beams at the ELI Beamlines

7-9 September, 2016 Catania, Italy



The **ELIMED** project aims to demonstrate the validity of new approaches based on laser-driven ion sources for potential future applications in medical and other multidisciplinary fields, including hadrontherapy. In 2018, a User-oriented beam-line, ELIMAIA (ELI Multidisciplinary Applications of laser-Ion Acceleration) equipped with diagnostics and dosimetry end-points will be commissioned at the ELI-Beamlines facility in the Czech Republic with the main goal to perform proof-of-principle experiments, dosimetry measurements and radiation biology investigations at high repetition rate. The main goal of **the 3<sup>rd</sup> ELIMED** workshop is to strengthen the collaboration among the international research groups involved in this challenging project and gather new ideas, proposals and additional requirements from a broad community of users coming from different fields (Physics, Biology, Medicine, Chemistry, Material Science, etc.) interested in exploiting the availability of non-conventional (laser-driven) ion beams at the ELI Beamlines.

#### INTERNATIONAL SCIENTIFIC COMMITTEE

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S.V. Bulanov, JAEA (Japan)
T. Cowan, HZDR (Germany)
G. Cuttone, INFN (IT)
G. Korn, ELI-Beamlines (CZ)
K. Parodi, LMU (Germany)

#### ORGANIZING COMMITTEE

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The 3<sup>rd</sup> **ELI MED**ical and Multidisciplinary Applications of Laser-Driven Ion Beams at the ELI Beamlines



#### SCOPE

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#### INFN:

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#### **ELI-Beamlines:**

Georg Korn, Daniele Margarone, Andrey Velyhan, Lorenzo Giuffrida, Scuderi Valentina, Jan Kaufman, Filip Grepl





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SCOPE

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# Thank you

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