

# MCMA2017



#### A ROBUST MONTE CARLO TREATMENT PLANNING OPTIMIZATION ALGORITHM FOR DOSE PAINTING CLINICAL IMPLEMENTATION

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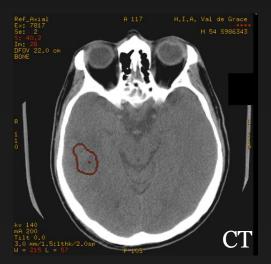
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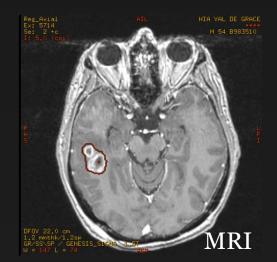


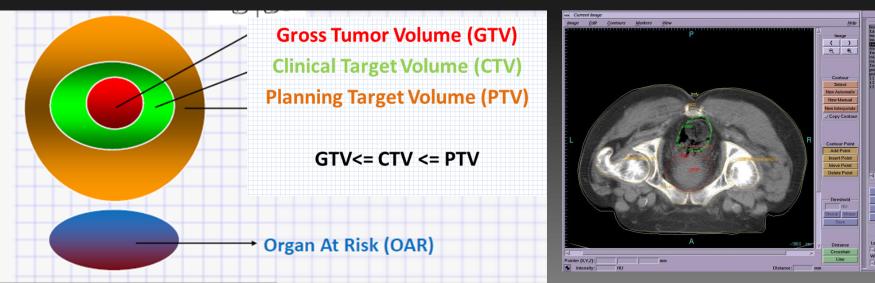


#### Medical imaging in radiotherapy treatment planning.

- Classic role
- Delimitation based on morphological information
- Margins for incorporating functional information (movements, extension)



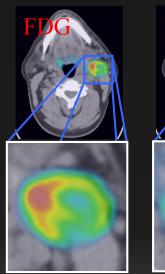




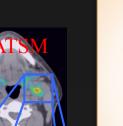




- New role → Functional Information
  Evolution and characteristics of the lesion
- PET
  - Metabolism
  - Proliferation
  - O<sub>2</sub> concentration
  - Differentiation...
- SPECT
- fMRI





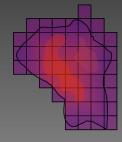


BTV

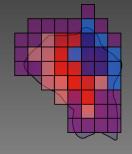
(Biological Target Volume)



#### Conventional



- Homogeneous dose to volumes
- Few targets
- Conventional prescription



#### Dose Painting

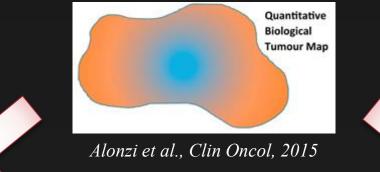
- Heterogeneous doses
- Multiple targets
- Dose escalation according to functional information

New concepts and protocols

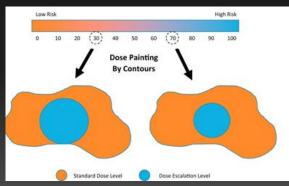




#### Heterogeneous distributions

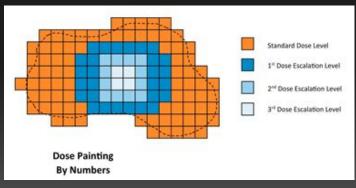


#### Dose Painting by Contour (DPBC)



- Dose escalation based on thresholds
- Dose-to-volume restrictions
- Simultaneous boost strategies in TPS

#### Dose Painting by Numbers (DPBN)



- Dose escalation based on individual values: TRUE DP
- Dose-to-voxel restrictions
- Commercial TPS: approximations based on dose-volume optimization



<u>DP means a new scenario for planning RT</u> New tools should be incorporated to TPS (Our proposal) **Dose calculation:** Higher dose gradients within the target require the most accurate dose calculation engine: Monte Carlo Treatment Planning (MCTP) **Optimization procedure:** A more important role for image into the algorithms BIOMAP New restrictions and robustness at the voxel level Linear Programming (LP)



A robust MC treatment planning optimization algorithm for dose painting clinical implementation



# **Material and Methods**

http://grupos.us.es/medicalphysics/

#### Full Monte Carlo Treatment Planning System





- MATLAB platform
- Image processing
- fMC planning
- Optimization
- Evaluation

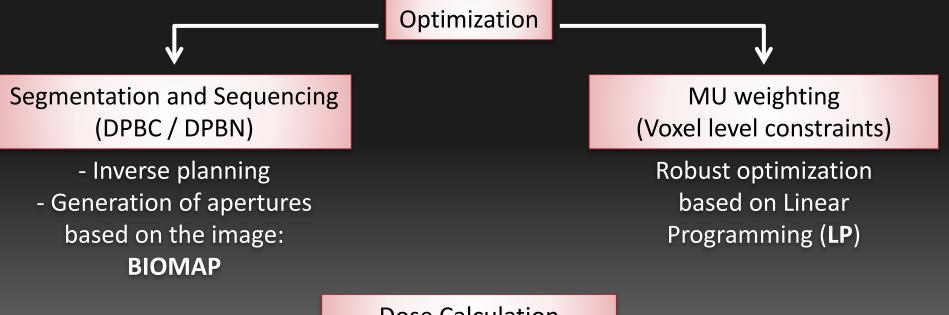




**PLANNING PROCESS** 

Functional image processing

Reconstruction protocols and uncertainty assessment



**Dose Calculation** 

As accurate as possible  $\rightarrow$  Full Monte Carlo planning





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# **Material and Methods**

Functional imaging processing

PET/CT Images (Siemens Biograph mCT 64 scanner of CNA):

- Location and size of the disease
- Prescription of the dose

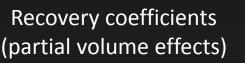
Need for standardized accreditation

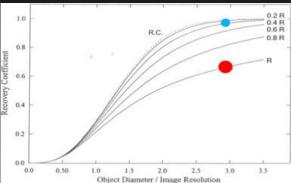
#### PET reconstruction protocols: EARL / "Radiotherapy"





- Patient protocol simulation
- RT table fitting
- Study of different reconstructions
- Assessment of uncertainties





Adapted from: M.E. Phelps. PET: Molecular Imaging and Its Biological Applications (2004)







• Functional imaging processing

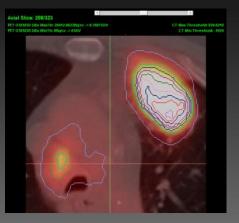


#### **SEGMENTATION ALGORITHM**

(Foster et al., IEEE Trans Biomed Eng, 2014):

- Clustering according to SUV
- Based on affinity propagation
- Taking into account diffusion PET
- Reduction of uncertainties

# Dose prescription map generation



ST_by_AP_Segmentation_5      5.8823      8.3578      68.0        ST_by_AP_Segmentation_6      6.0196      9.8687        ST_by_AP_Segmentation_7      4.4403      11.3754      71.1	0 66 2961
ST_by_AP_Segmentation_4      6.1111      6.8982      67.1        ST_by_AP_Segmentation_5      5.8823      8.3578      68.0        ST_by_AP_Segmentation_6      6.0196      9.8687        ST_by_AP_Segmentation_7      4.4403      11.3754      71.1	2961
ST_by_AP_Segmentation_5      5 8823      8.3578      68 0        ST_by_AP_Segmentation_6      6 0196      9.8687        ST_by_AP_Segmentation_7      4.4403      11.3754      71.3	
ST_by_AP_Segmentation_6      6.0196      9.8687        ST_by_AP_Segmentation_7      4.4403      11.3754      71.1	
ST_by_AP_Segmentation_7 4.4403 11.3754 71.	6247
	70
ST by AP Segmentation 8 3 5248 12 8997 72	3715
	7590
ST_by_AP_Segmentation_9 2.0599 14.3269 74.0	0581
ST_by_AP_Segmentation_10 0.4120 15.7546 75.1	3577

$$D_i = D_{low} + \frac{S_i - S_{low}}{S_{high} - S_{low}} (D_{high} - D_{low}),$$

for 
$$S_{low} \leq S_i \leq S_{high}$$
,  $i = 1, ..., N$ 





#### **Material and Methods PLANNING PROCESS** Functional image processing Reconstruction protocols and uncertainty assessment Optimization Segmentation and Sequencing **MU** weighting (Voxel level constraints) (DPBC / DPBN) - Inverse planning **Robust optimization** - Generation of apertures based on Linear based on the image: Programming (LP) **BIOMAP Dose Calculation**

As accurate as possible  $\rightarrow$  Full Monte Carlo planning





Optimization: Segmentation and sequencing

## **Dose Painting By Contours**

- Conventional distribution of prescription doses
- Weight optimization: Dose-volume restrictions
- Two planning options:

#### INVERSE PLANNING

# CONTOURS

#### PLANNING BASED ON DIRECT APERTURES

#### **BIOMAP** algorithm

Ureba et al., Med Phys, 2014

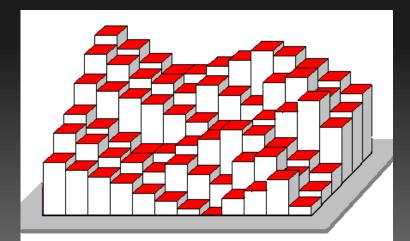




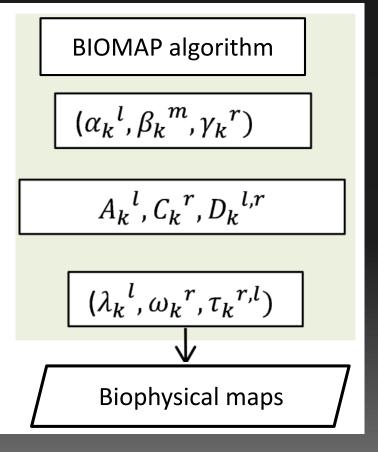
Optimization: Segmentation and sequencing

**BIOMAP** algorithm Ureba et al., Med Phys, 2014

- Based on matrix generation
- Morphological and functional information recruitment



### **Biophysical maps**

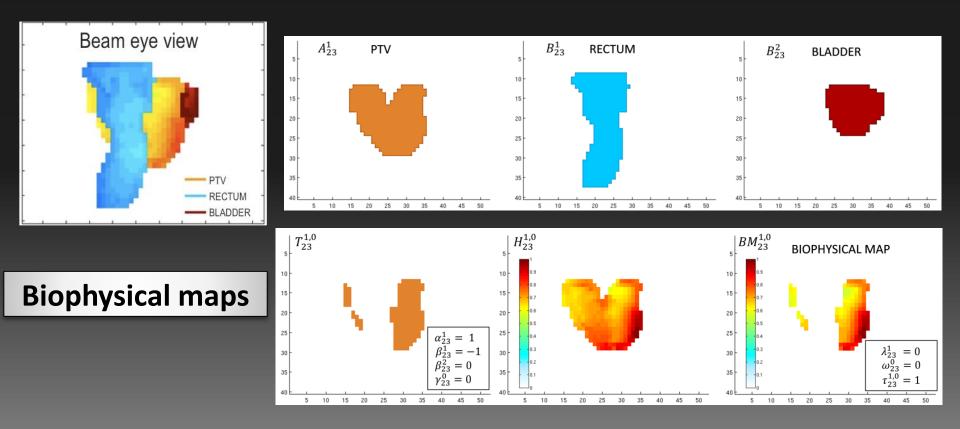






• Optimization: Segmentation and sequencing

**BIOMAP** algorithm Ureba et al., Med Phys, 2014 Based on morphological and functional images: Adaptive radiation therapy







Optimization: Segmentation and sequencing

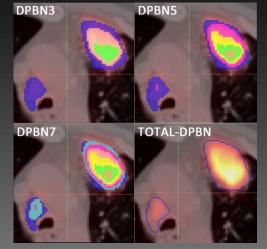
## **Dose Painting By Numbers**

- Heterogeneous distribution of prescription doses
- Weights optimization: dose-voxel restrictions
- Two planning options

#### **INVERSE PLANNING**

- LP optimization of beamlets fluence
- Segmentation and sequencing
- 2nd LP optimization of apertures

CLUSTERING



#### Jiménez-Ortega et al., Phys Med, 2017

#### PLANNING BASED ON DIRECT APERTURES

**BIOMAP** algorithm Ureba et al., Med Phys, 2014

Clusters for apertures generation





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As accurate as possible  $\rightarrow$  Full Monte Carlo planning

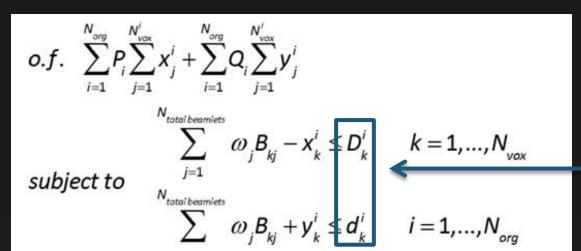


A robust MC treatment planning optimization algorithm for dose painting clinical implementation



# **Material and Methods**

• Optimization: Monitor Units Weighting



Ureba et al., Med Phys, 2014

#### LINEAR PROGRAMMING (LP) OPTIMIZATION

Simplification of the problem by random selection of voxels

> Dose constraints at the voxel level, rather than volumes

**TRUE DPBN option** 





Optimization: Monitor Units Weighting

$$\begin{array}{l} \min \ o.f. \equiv P_{target}^{max} \sum_{i=1}^{N_{target}} x_i + P_{target}^{min} \sum_{i=1}^{N_{target}} y_i + P_{OAR}^{max} \sum_{i=N_{target}+1}^{N} x_i \\ sujeto \ a \\ \\ \sum_{j=1}^{M} \omega_j d_{ij} - x_i \leq D_i^{max} \Delta_i \\ \sum_{j=1}^{M} \omega_j d_{ij} + y_i \geq D_i^{min} \Delta_i \\ \\ \sum_{j=1}^{M} \omega_j d_{ij} - x_i \leq D_{OAR}^{max} \\ \end{array} \quad i = 1, \dots, N_{target} \\ i = 1, \dots, N_{target} \\ i = N_{target} + 1, \dots, N \\ x_i, y_i, \omega_i \geq 0 \ \forall i, j \end{array}$$

#### LINEAR PROGRAMMING (LP) OPTIMIZATION

Simplification of the problem by random selection of voxels

> Dose constraints at the voxel level, rather than volumes

TRUE DPBN option

Jiménez-Ortega et al., Phys Med, 2017

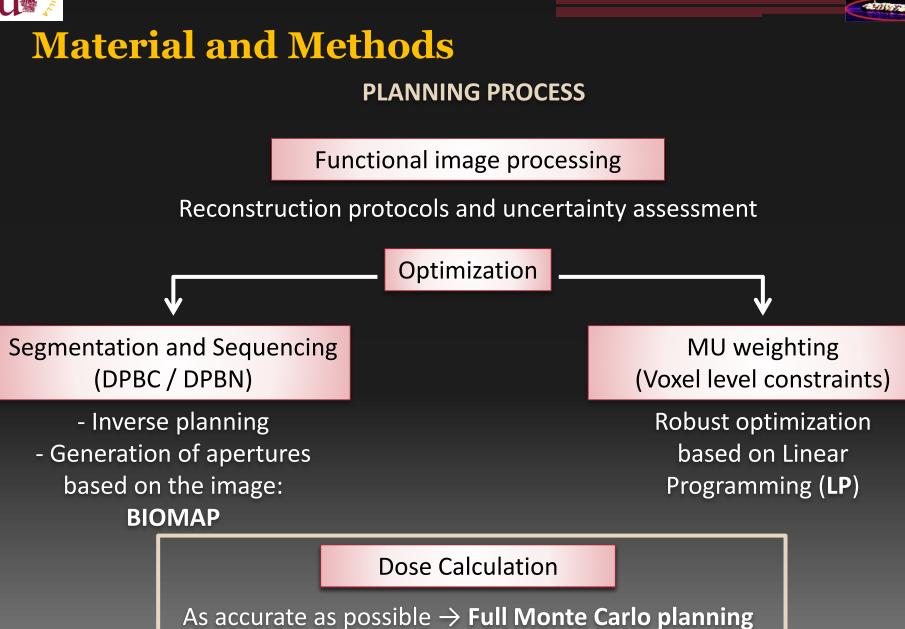
#### **ROBUST OPTIMIZATION**

- Image uncertainties (dose prescription)
- Geometric uncertainties (positioning / movement)

- VOXEL LEVEL







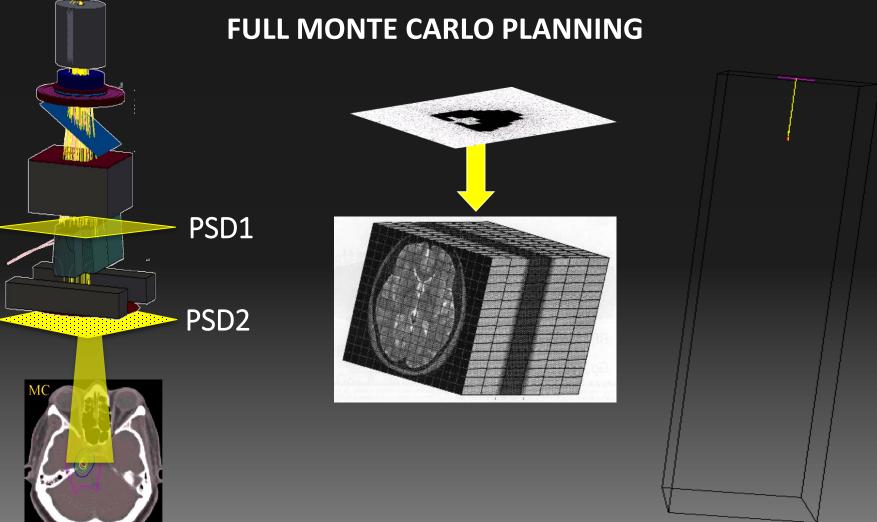


A robust MC treatment planning optimization algorithm for dose painting clinical implementation



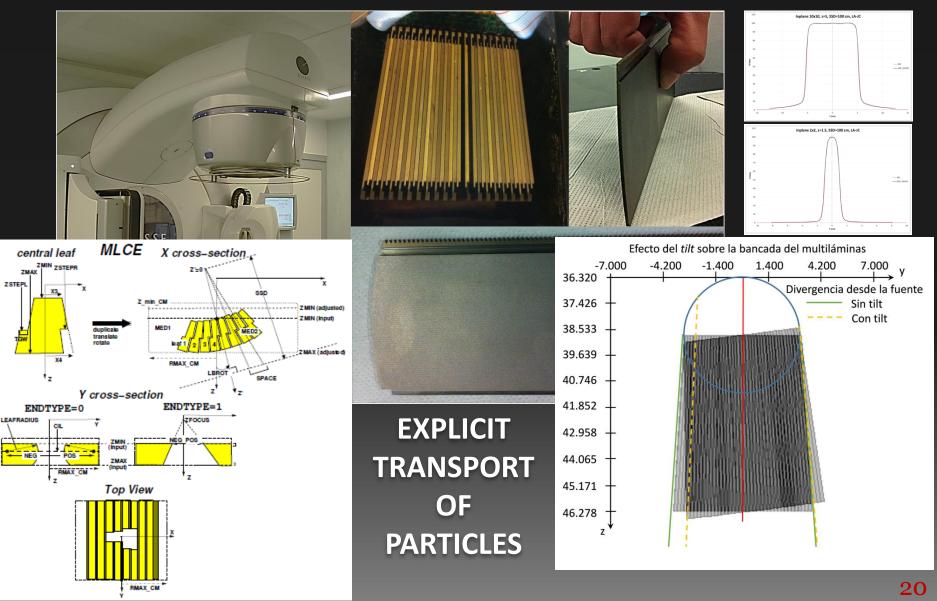
# **Material and Methods**

• Dose Calculation













Dose Calculation

#### EGSnrc/DOSXYZnrc/BEAMDOSE

- Linac head: BEAMnrc (Rogers et al., 2011; Walters et al., 2009)
- CT patient: BEAMDOSE (Salguero Castaño, 2008)
- Parallel Computing (Leal et al., 2004b; Leal et al., 2001b)



HP ProLiant DL585 G7 Performance 4 processors Opteron 2.2 GHz with 12 nodes



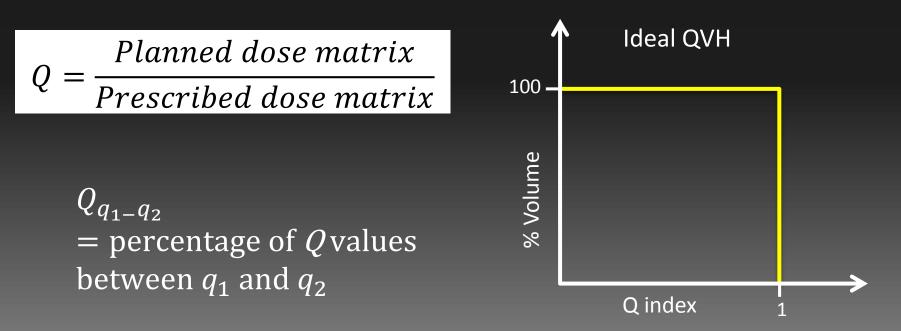




• Dose Calculation: Evaluation

## **Dose Painting By Numbers**

# NEW EVALUATION Quality index per voxel (Q) $\rightarrow$ QVH







ROBUSTNESS

CONSIDERATION OF SYSTEMATIC AND RANDOM ERRORS FOR CLINICAL IMPLEMENTATION

Image processing

- Reconstruction protocol: EARL / Radiotherapy
- Segmentation algorithm (Affinity propagation clustering by Foster)

#### Full Monte Carlo

- Statistical errors in dose calculation (parallelized framework)
- Adaptive anisotropic diffusion filtering (and others)

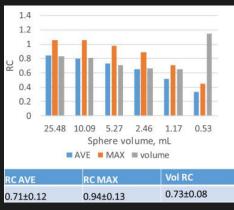
LP Robust Optimisation min  $o.f. \equiv P_{target}^{max} \sum_{i=1}^{N_{target}} x_i + P_{target}^{min} \sum_{i=1}^{N_{target}} y_i + P_{OAR}^{max} \sum_{i=N_{target}}^{N} x_i$ Voxel uncertainty subject to 
$$\begin{split} &\sum_{j=1}^{m} \omega_j d_{ij} - \mathbf{x}_i \leq \mathsf{D}_i^{\max} \Delta_i \quad i = 1, \dots, \mathsf{N}_{\text{target}} \\ &\sum_{i=1}^{M} \omega_j d_{ij} + y_i \geq \mathsf{D}_i^{\min} \Delta_i \quad i = 1, \dots, \mathsf{N}_{\text{target}} \end{split}$$
Dose prescription  $\sum_{i=1}^{M} \omega_{i} d_{ij} - x_{i} \leq D_{OAR}^{max} \qquad i = N_{target} + 1, \dots, N$ Geometric uncertainties  $x_i, y_i, \omega_i \ge 0 \quad \forall i, j$ **Evaluation of results**  $D = MC \text{ dose } (\Delta D \text{ statistical error})$  $D_p$  = Prescribed dose ( $\Delta D_p$  systematic error)  $Q(D,D_p) = \frac{D}{D_{ii}};$  $\Delta Q(D, D_p) = \sqrt{\left(\frac{\partial Q}{\partial D}\right)^2 (\Delta D)^2 + \left(\frac{\partial Q}{\partial D_n}\right)^2}$ 





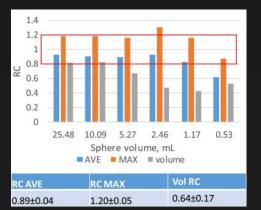
## **Results**

• Functional imaging processing

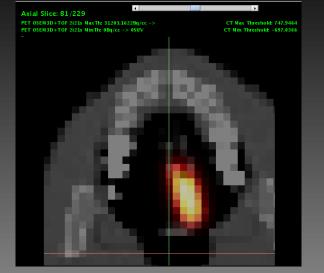


#### EARL

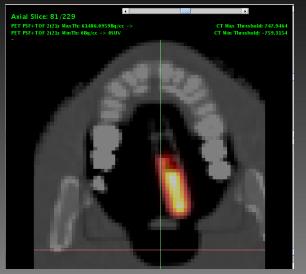
#### RADIOTHERAPY



#### Balcerzyk et al., Nuclear Instruments and Methods A, 2017

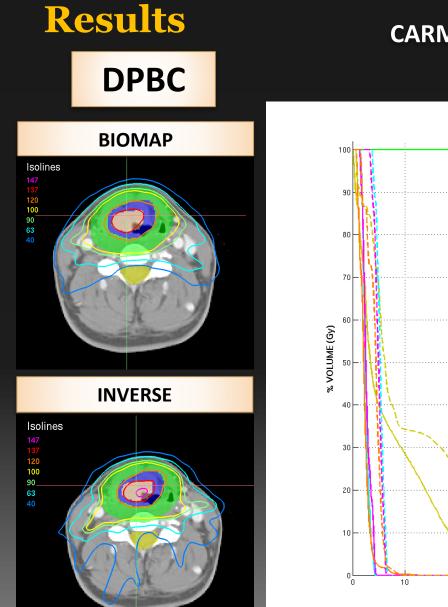


# Study of uncertainties in SUV values

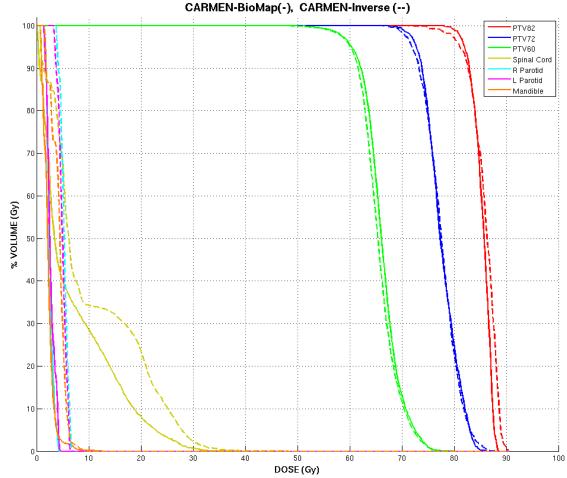








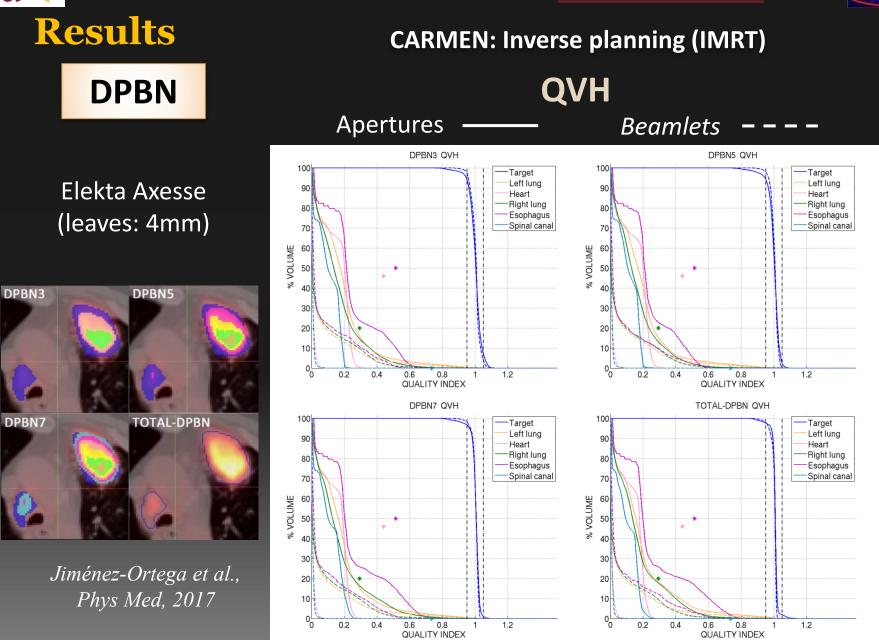
# CARMEN: BIOMAP vs Inverse planning **DVH**



25





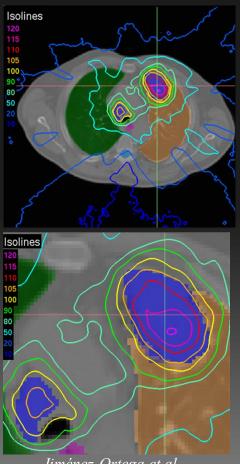






# Results

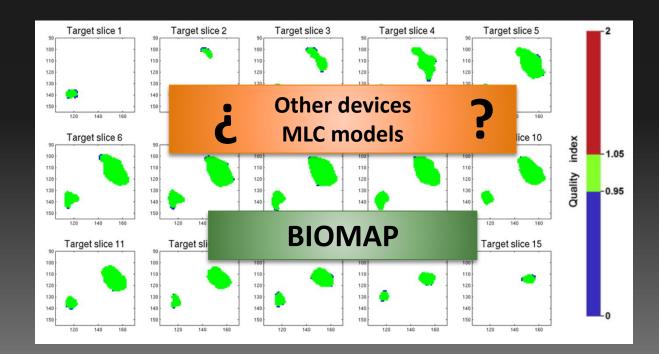
DPBN



Jiménez-Ortega et al., Phys Med, 2017

#### **CARMEN:** Inverse planning (IMRT)

Study	Q <sub>0.95-1.05</sub> (beamlets)	Q <sub>0.95-1.05</sub> (segments)	Segments number	MU/fraction
DPBN3	93.3%	86.9%	235	2337
DPBN5	97.7%	91.8%	235	2286
DPBN7	98.1%	95.6%	291	2157
TOTAL-DPBN	97.8%	95.7%	351	2057







#### **Results BIOMAP Algorithm and Robust LP Optimization DPBN** QVH BIOMAP **INVERSE** $BM_{23}^{1,0}$ ✓TARGET ✓left\_lung 15 Meart 20 ✓right\_lung 75 ✓esophagus 25 $\lambda_{23}^{1} = 0 \\ \omega_{23}^{0} = 0 \\ \tau_{23}^{1,0} = 1$ = 0✓spinal\_canal ٧ 35 0 L U M E (%) 20 ĩ٨ 0.1 Study Q<sub>0.95-1.05</sub> (segments) MU/fraction $Q_{0.95-1.05}$ (beamlets) Segments number DPBN3 93.3% 86.9% 235 2337 DPBN5 97.7% 91.8% 235 2286 DPBN7 95.6% 291 2157 98.1% TOTAL-DPBN 97.8% 95.7% 351 2057

**BIOMAP** 

98.7%

63

699

CLINICALLY ACCEPTABLE

28



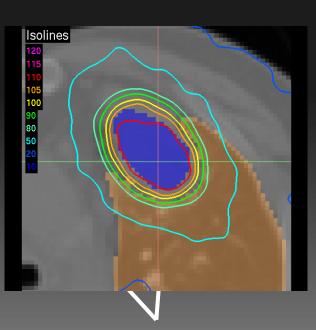
A robust MC treatment planning optimization algorithm for dose painting clinical implementation



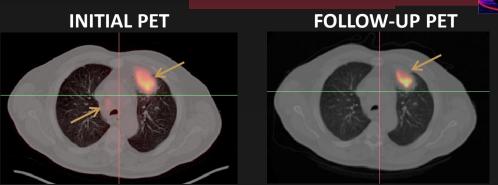
# Results

# DPBN

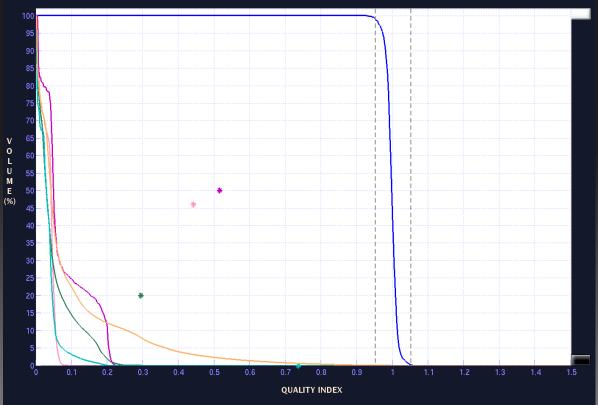
Changes in images: New biological targets and dose prescription map



Normal tissue overdosage



#### CONSEQUEARCES OR TNOLAD APPROXIDA.







# Results

DPBN

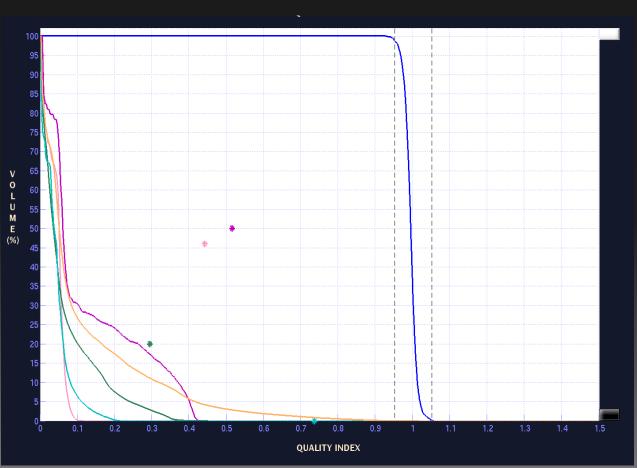
Adaptive RT by BIOMAP at the voxel level

#### VOXEL LEVEL: DEFORMABLE REGISTRATION NOT NECESSARY

TOTAL TREATMENT EVALUATION  $Q_{\nu} = \sum_{i=1}^{N} f_i Q_{\nu}^i$ 

 $Q_v$ : Q index of voxel v $f_i$ : fraction weight N: number of fractions  $Q_v^i$ : Q index of voxel v in fraction i

> Q<sub>0.95-1.05</sub>=98.9% Q<sub>0.97-1.03</sub>=96.2%







# Conclusions

- In these conditions of accuracy and robustness (through fMC planning, LP-based optimization and BIOMAP algorithm), we feel confident to move our system for DPBN application into the clinical environment.
- The BIOMAP algorithm, based on the image information, allows the **adaptive** radiation therapy planning at voxel level.
- This solution can be easily extended to other types of functional information such as MRI.





# Thanks for your attention





# Unión Europea

Fondo Europeo de Desarrollo Regional Fondo Social Europeo



FISEVI 552 PIE 2012 LEAL PLAZA ANTONIO CTS-2482 G-MC 15/06/2016



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