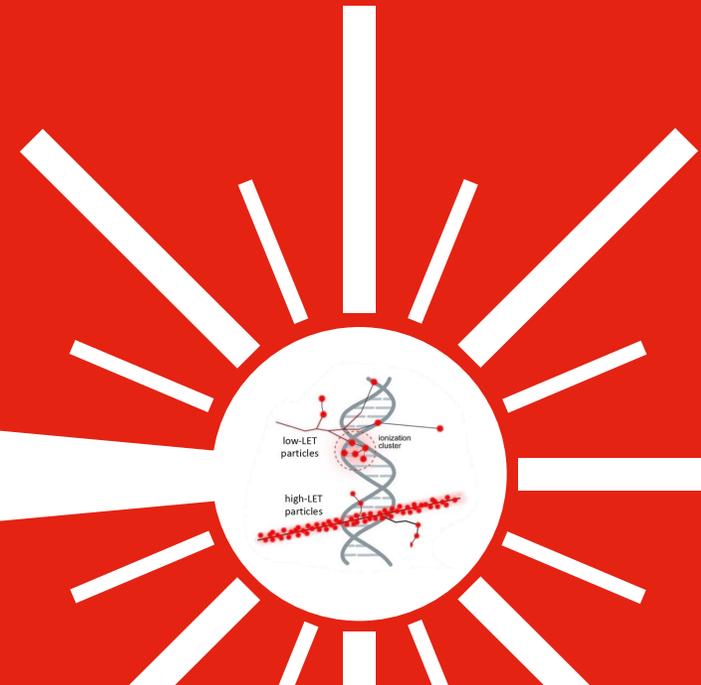
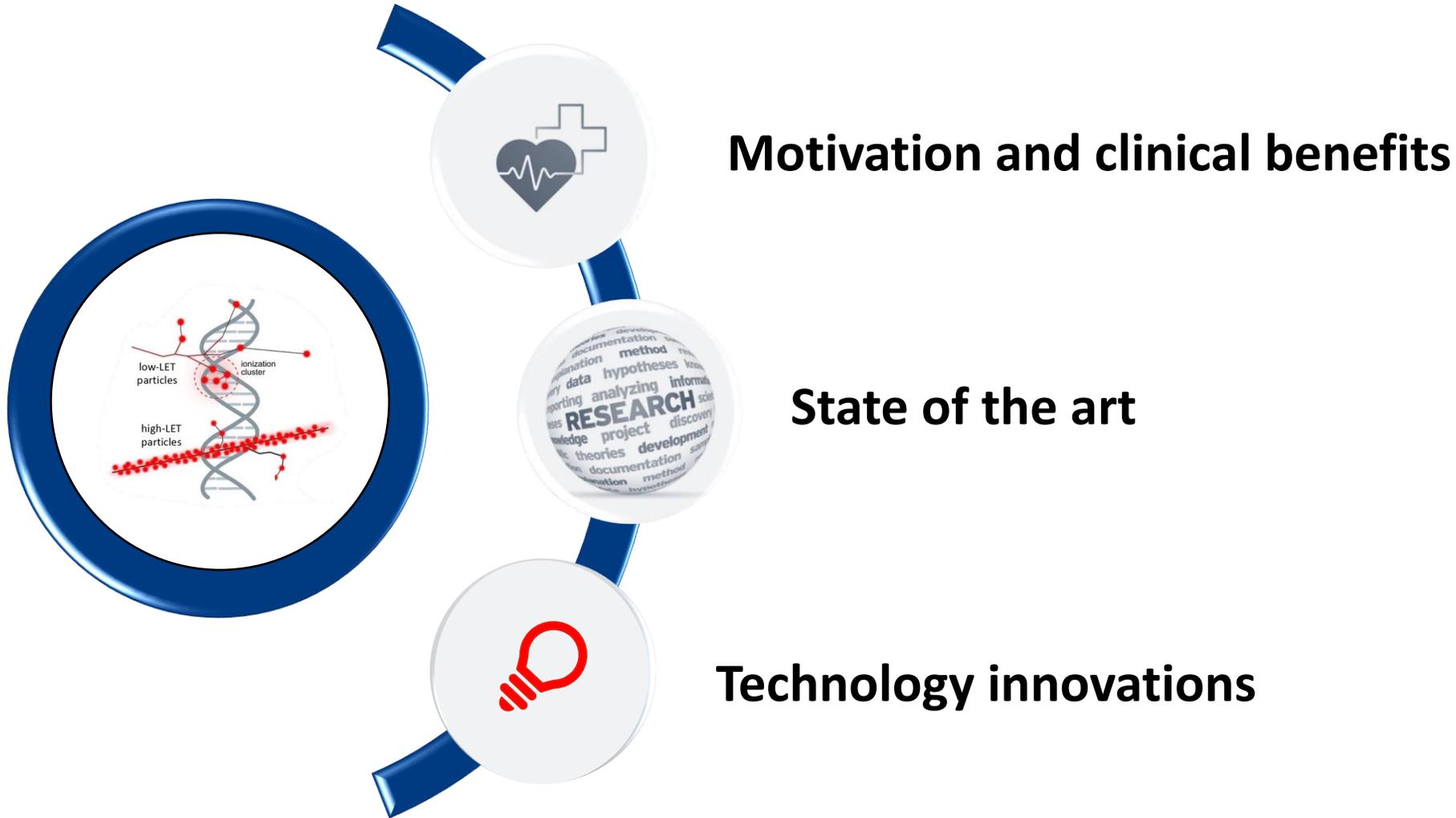


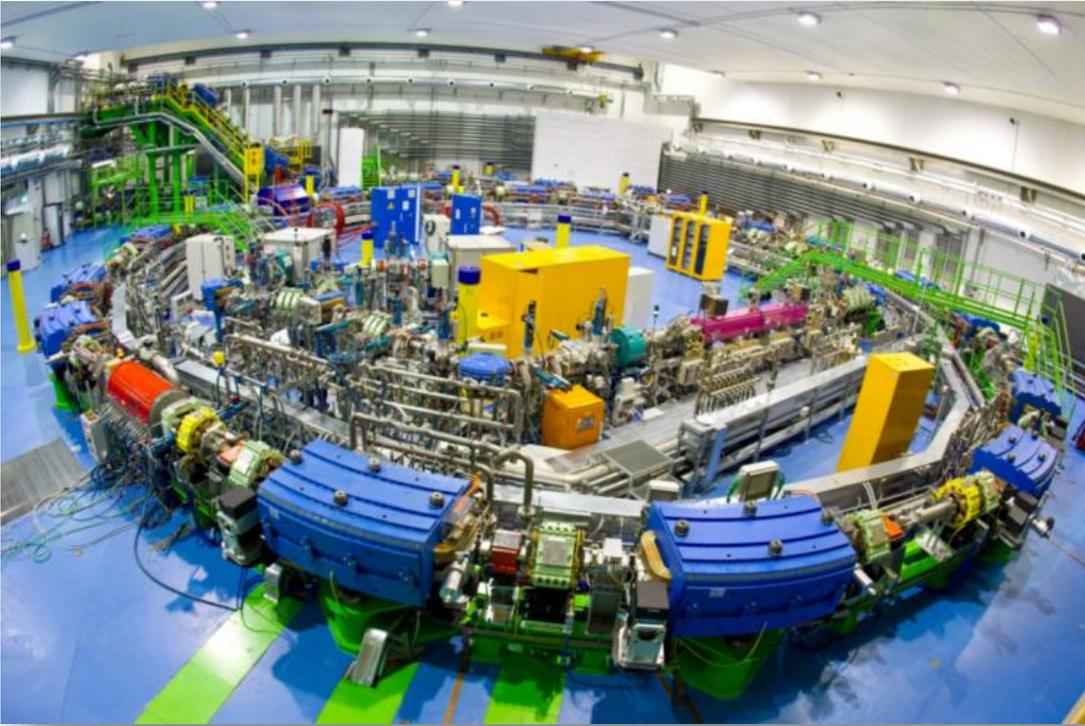
State of the art: Beam instrumentation

Prof Dr Carsten P Welsch





Hadron beam therapy

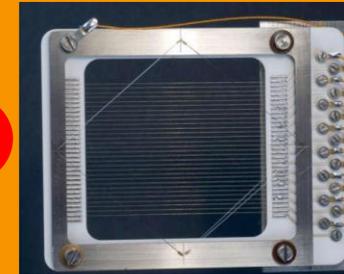
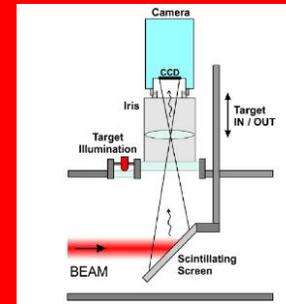
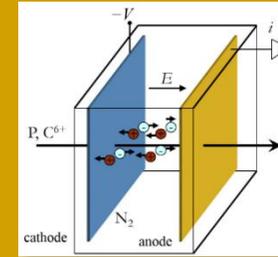


CNAO Synchrotron, image courtesy CNAO.

- **Significant investment** through in the UK and around the world;
- Optimization of Medical Accelerators (OMA) network identified **key R&D challenges**:
 - Significant time goes into Q&A
 - New technology solutions needed for novel treatment modalities such as FLASH
 - Desirable machine operation modes not currently possible due to lack of non-invasive (online) diagnostics
 - Future facilities (e.g. LhARA) will require different approaches to instrumentation and beam control!

Current diagnostics – established technology

- + High resolution
- + Reliability
- + Validity
- Interceptive
- Ongoing calibration
- Beam perturbation
- Limited live feedback



Novel diagnostics solution - dosimetry

1

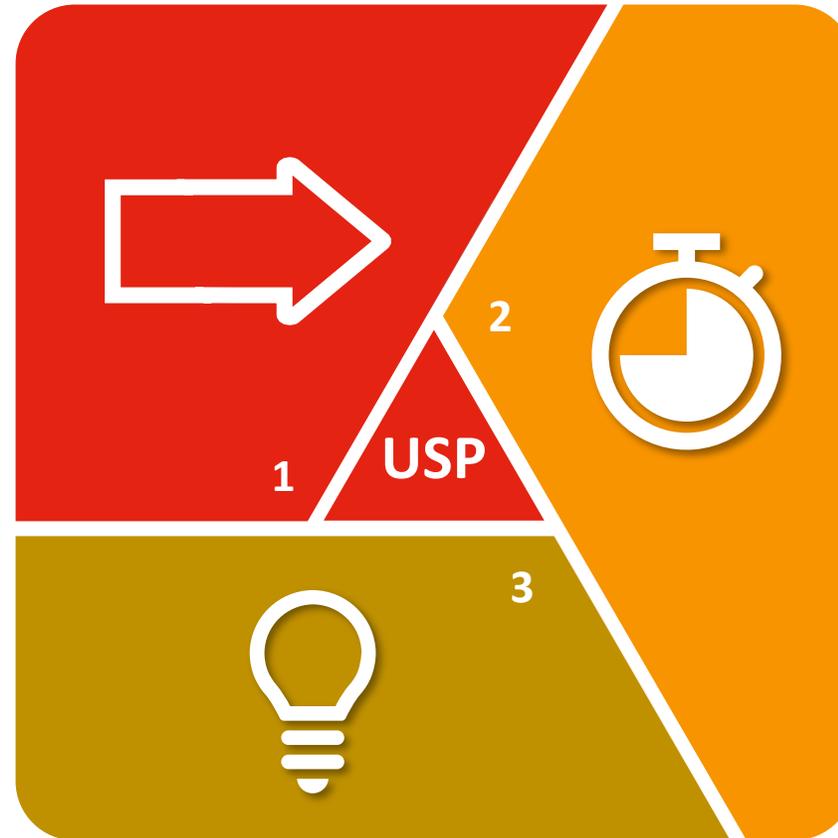
Minimally invasive

- ✓ No beam perturbation
- ✓ Online monitoring
- ✓ Superior error detection

3

Novel treatments and improved operation

- ✓ Enabling technology for FLASH and Mini-Beam treatments
- ✓ Active machine regulation based on live feedback becomes feasible



2

Significantly reduced calibration time

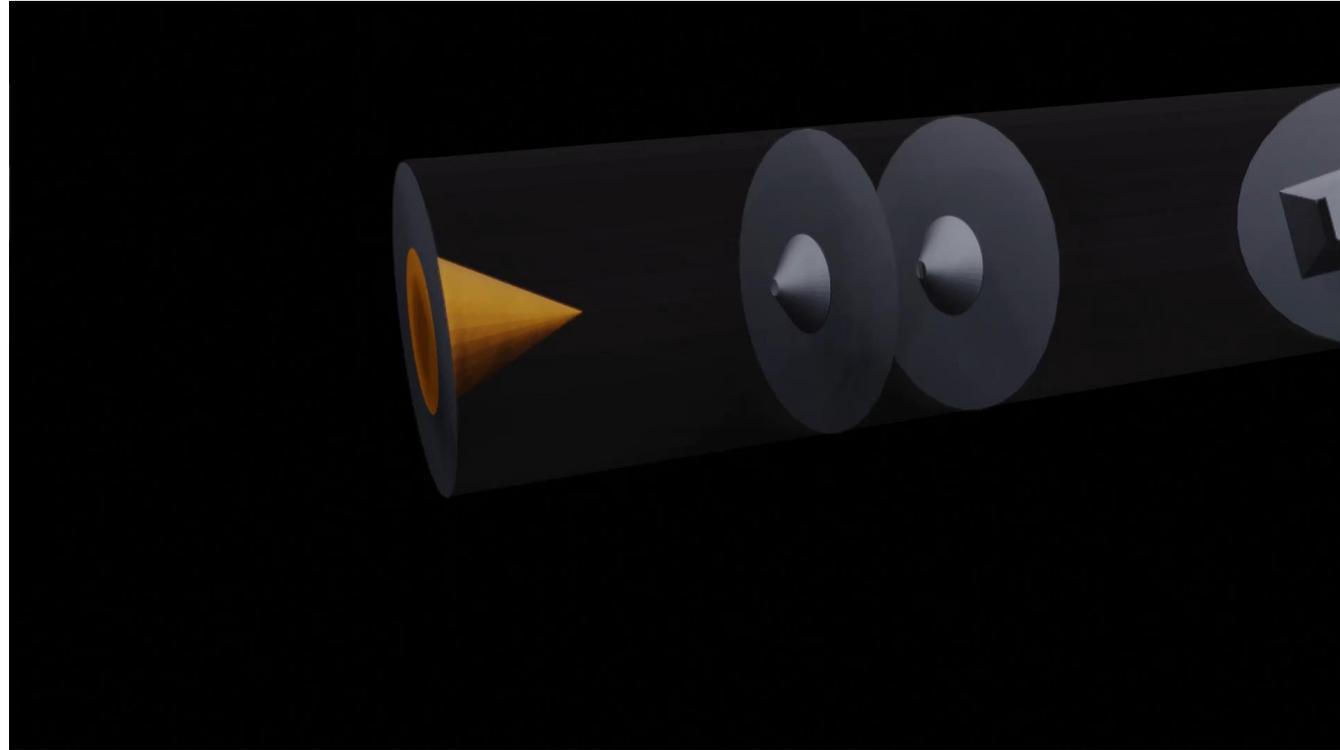
- ✓ No mechanical parts interact with the beam
- ✓ All key parameters monitored remotely
- ✓ Significantly reduced maintenance

N. Kumar, C.P. Welsch, et. al, Physica Medica 73, p 173-178 (2020).

S. Jolly, C.P. Welsch, et al., "Technical challenges for FLASH proton therapy", Phys Med 2020 – Galileo Galilei Award, best paper in 2020

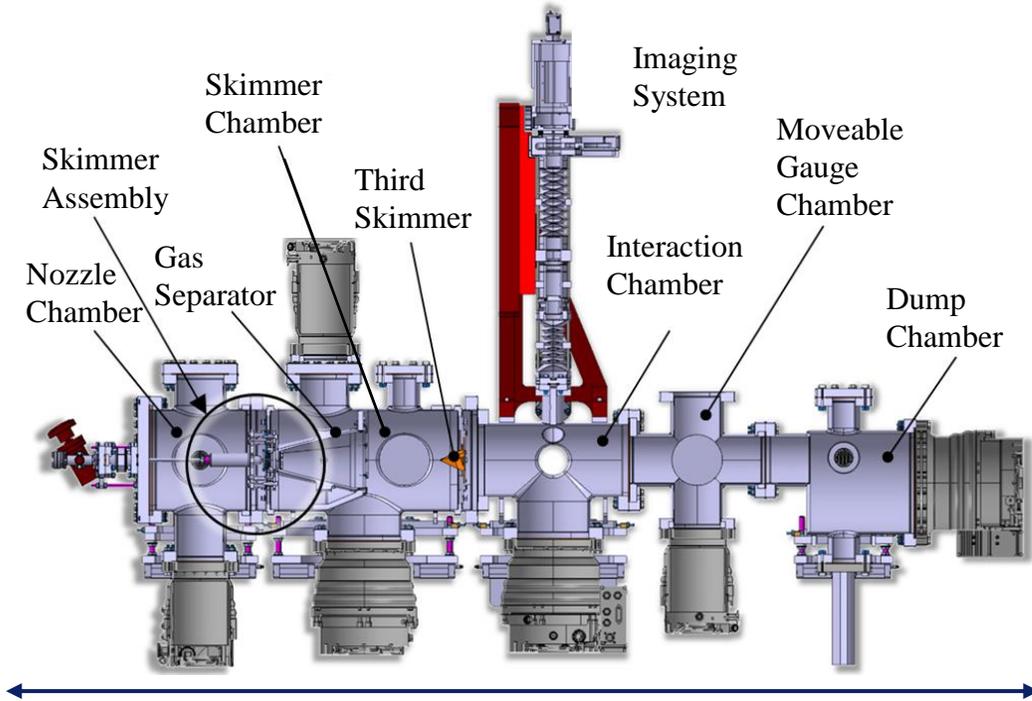
"Non-Invasive Gas Jet In-Vivo Dosimetry for Particle Beam Therapy", contributed talk at IPAC21

Building up on HL-LHC technology

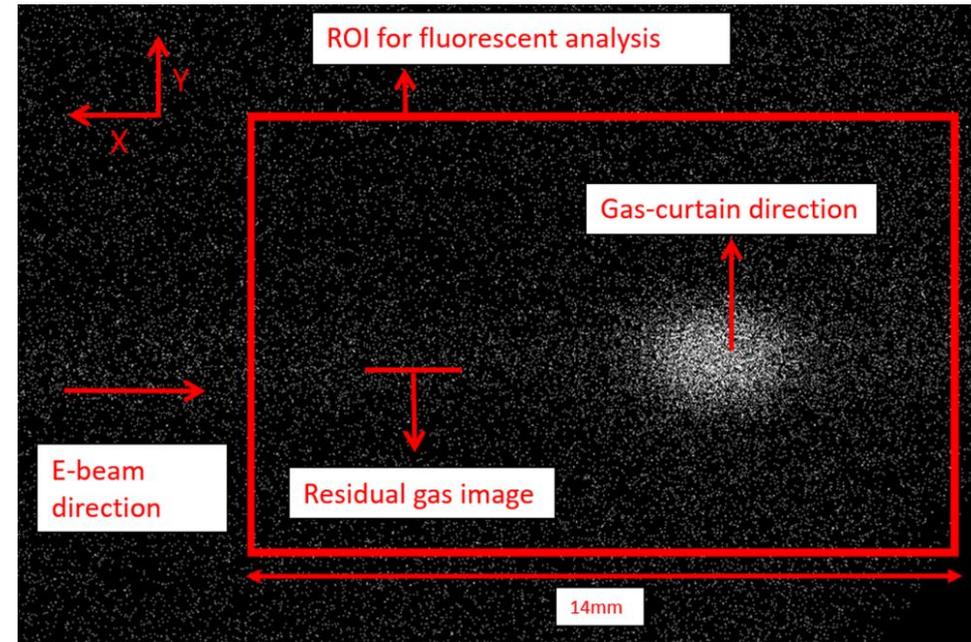


Gas jet shaping

Building up on HL-LHC technology

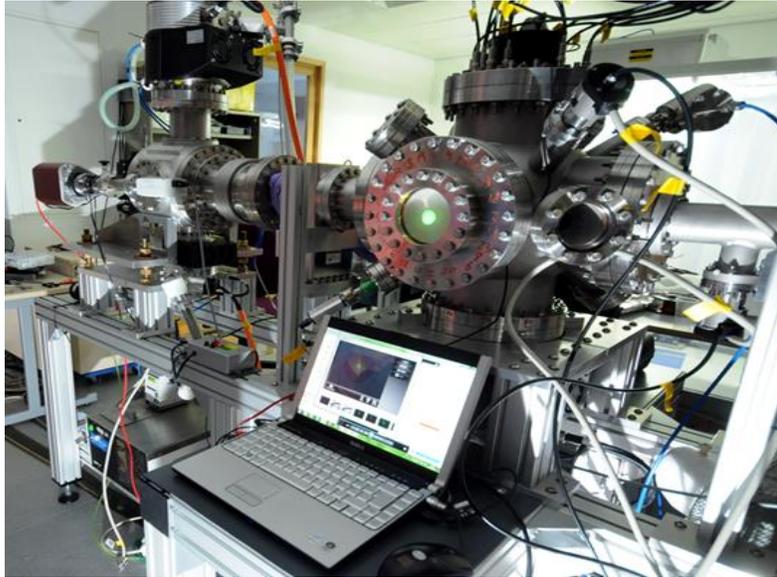


~3 m

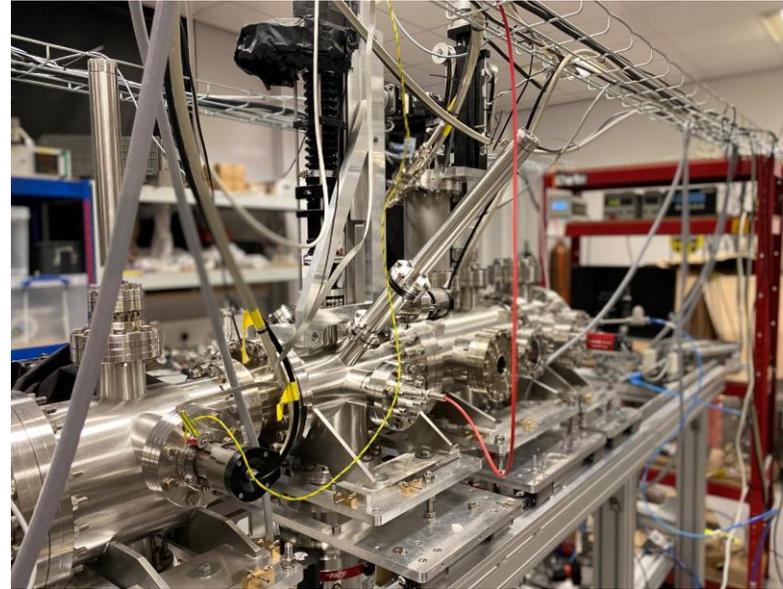


“Gas jet monitor R&D is world leading” – CI SAC (2019)

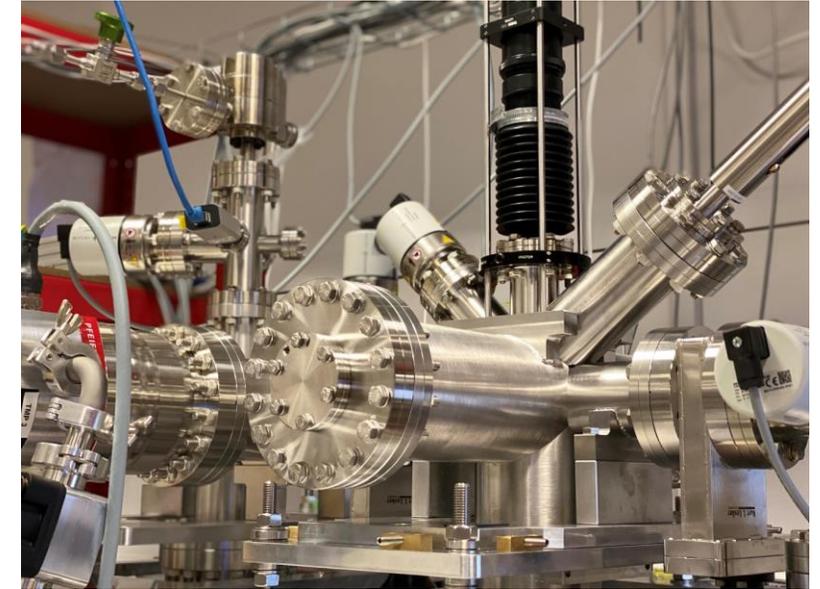
Different setups at the Cockcroft Institute



Monitor for keV beams

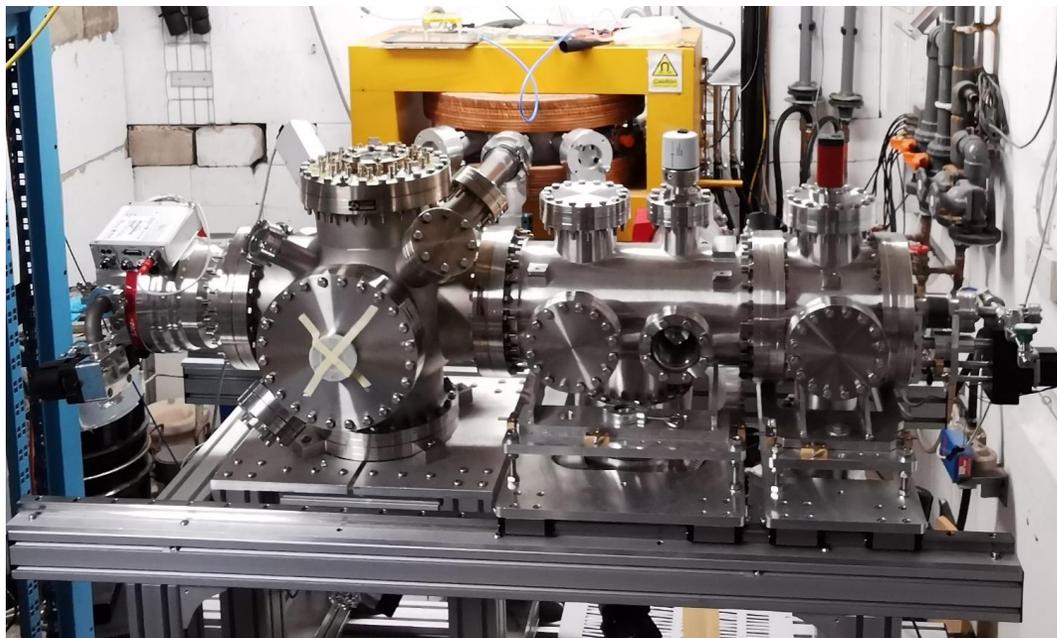


HL-LHC prototype



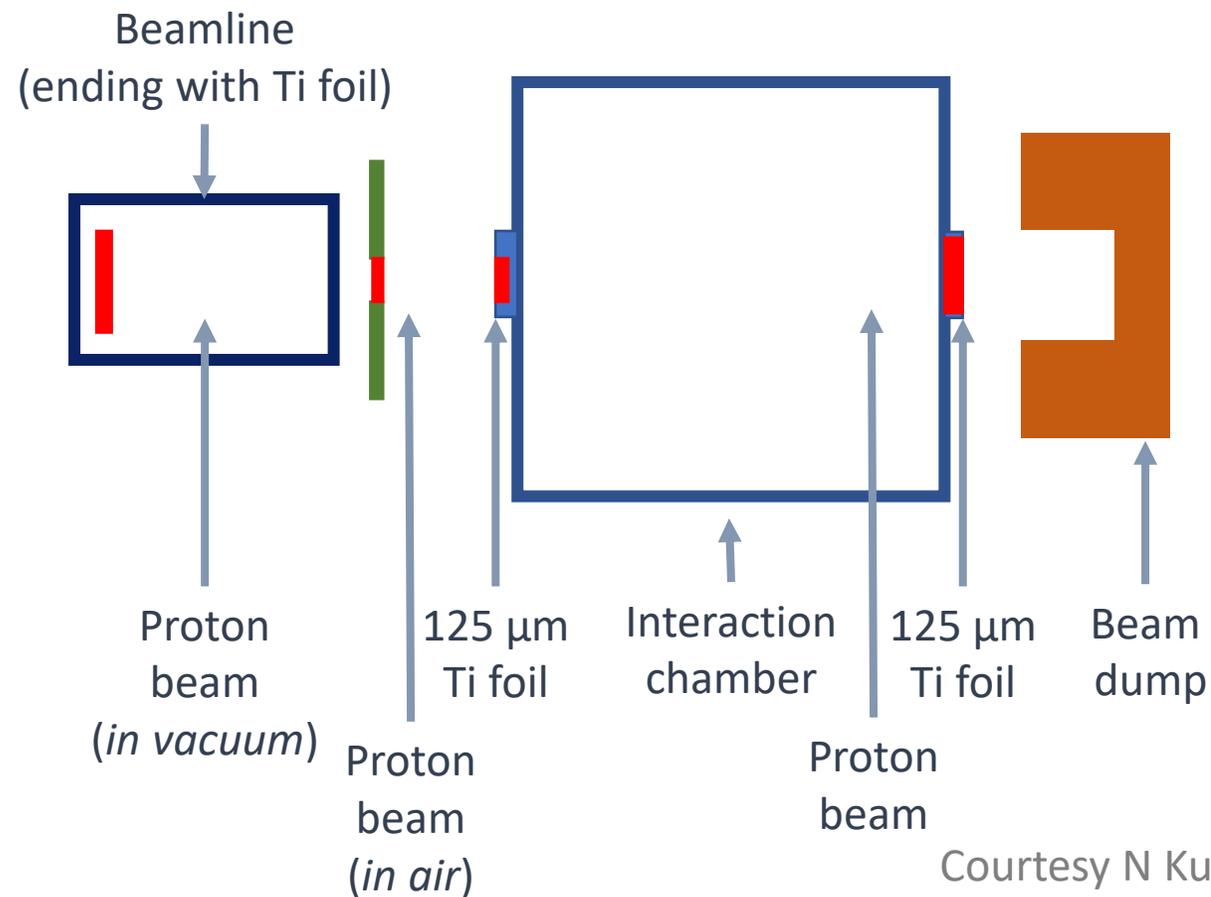
HL-LHC working instrument

Measurements @ UoB MC40 cyclotron



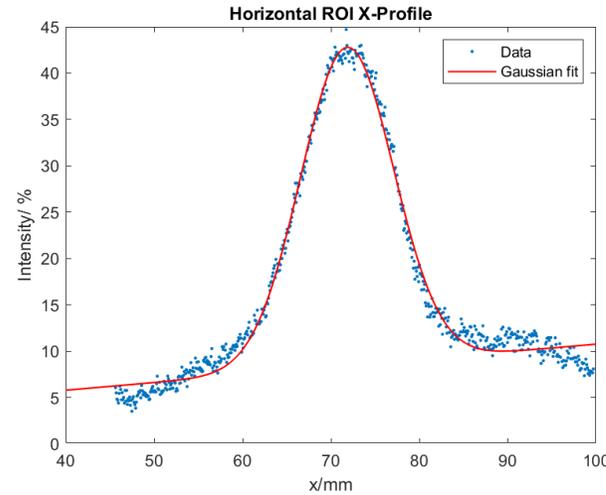
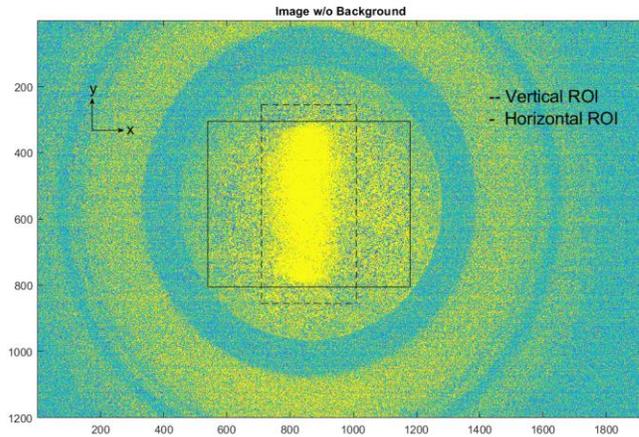
Beam Parameters

Beam Species: **Protons**
Beam Energy: **28 MeV**
Beam Current: **150-750 nA (on FC1)**
Beam Collimator Area: **4-100 mm²**



Courtesy N Kumar, ULIV

Measurements @ UoB MC40 cyclotron



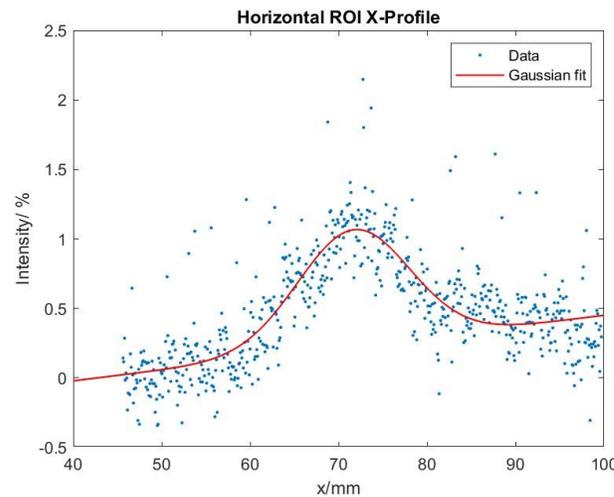
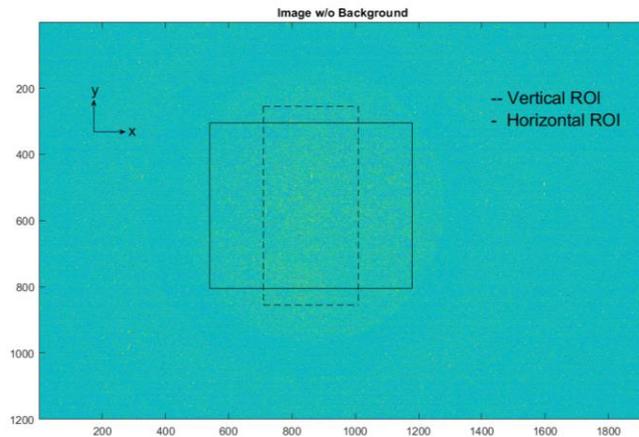
Beam collimator Area= 100 mm²

Integration time = 1 s

Gas Pressure in Interaction chamber
= 1.2×10^{-5} mbar

$\sigma = 5.4$ mm

Beam current at FC₁ = 150 nA



Beam collimator Area= 4 mm²

Integration time = 20 s

Gas Pressure in Interaction chamber =
 1.2×10^{-5} mbar

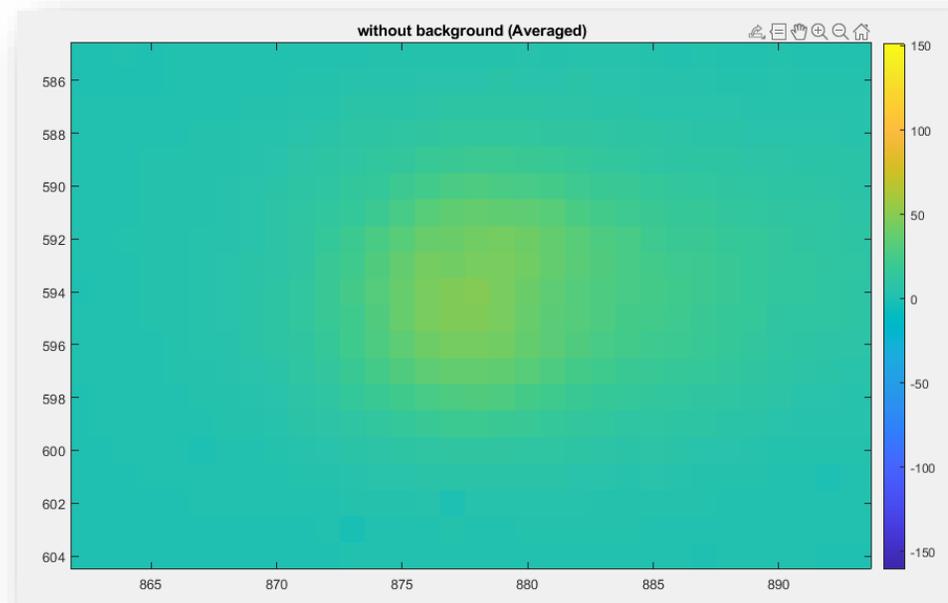
$\sigma = 6.4$ mm

Beam current at FC₁ = 150 nA

Measurements at DCF, Whitehaven

Carbon beam energies: 16 MeV, 20 MeV (Nitrogen) and 12 MeV, 16 MeV, 20 MeV, 24 MeV (Argon).

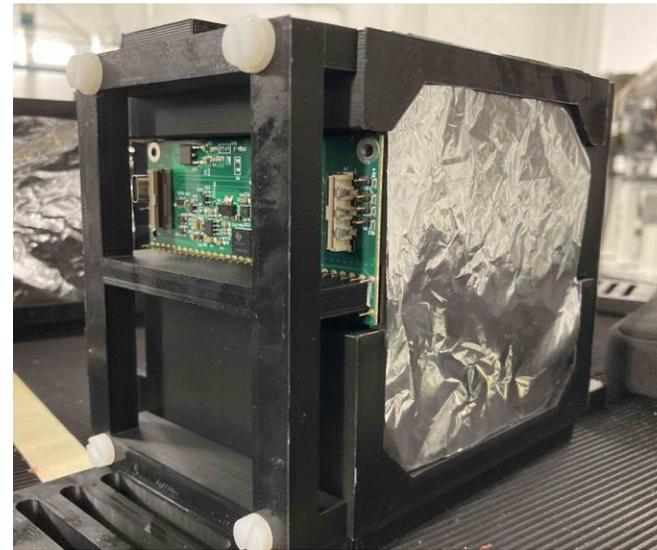
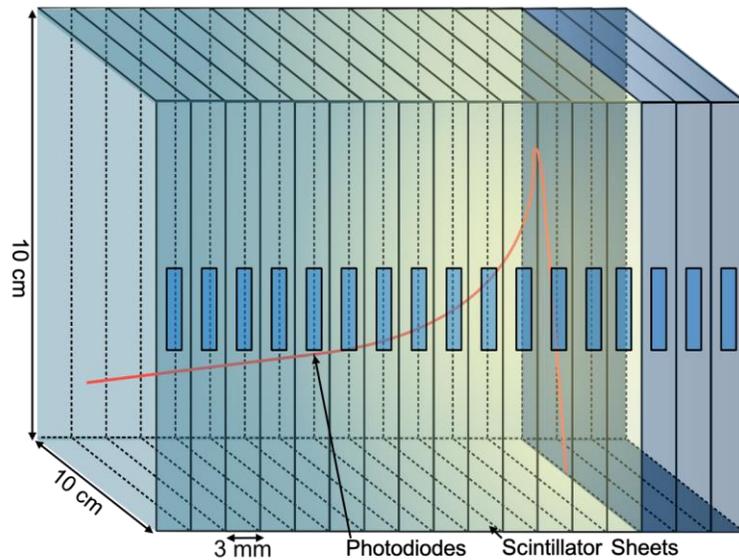
- 100nA (3.25×10^{10} – 8.125×10^{10} Carbon Ions/Sec) with/without gas jet –Exposure times: 1 s, 300 ms, 100 ms
- 100nA (3.25×10^{10} – 8.125×10^{10} Carbon Ions/Sec) with/without gas jet size 2 –Exposure times: 1 s, 300 ms, 100 ms
- 100nA (3.25×10^{10} – 8.125×10^{10} Carbon Ions/Sec) with/without gas jet size 3 –Exposure times: 1 s, 300 ms, 100 ms
- 10nA (3.25×10^9 – 8.125×10^9 Carbon Ions/Sec) with/without gas jet –Exposure times: 1 s, 2 s
- 1nA (3.25×10^8 – 8.125×10^8 Carbon Ions/Sec) with/without gas jet –Exposure times: 1 s, 2 s



Courtesy N Kumar, ULIV

Quality Assurance Range Calorimeter (QuARC)

- Optically-isolated polystyrene scintillator sheets in a segmented design.
- Photodiodes coupled to fast, modular electronics and FPGA to read light levels at 6 kHz.
- Light output nonlinear to LET due to quenching effects described by Birks' law.
 - Fit light output using analytical depth-light model.

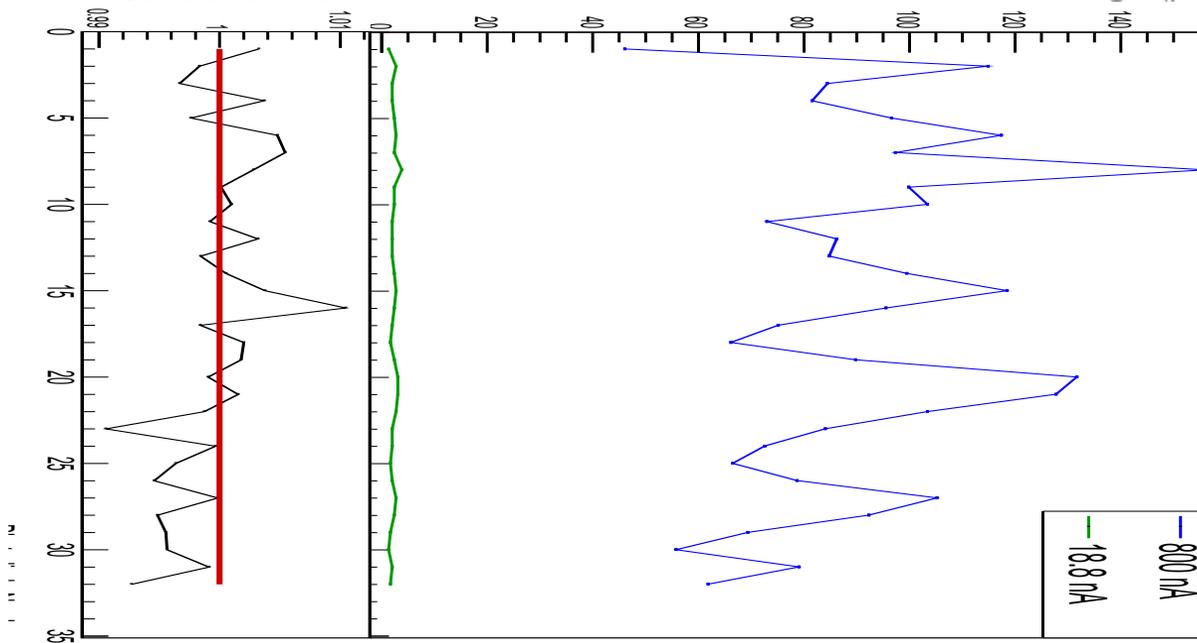


S Jolly, S Shaikh, S E Rodriguez, C Godden, M Warren, D Attree, R Saakyan (all UCL), R Radogna (U Bari), L Kelleter (DKFZ)

Courtesy S Jolly , UCL

The Christie Beam Test

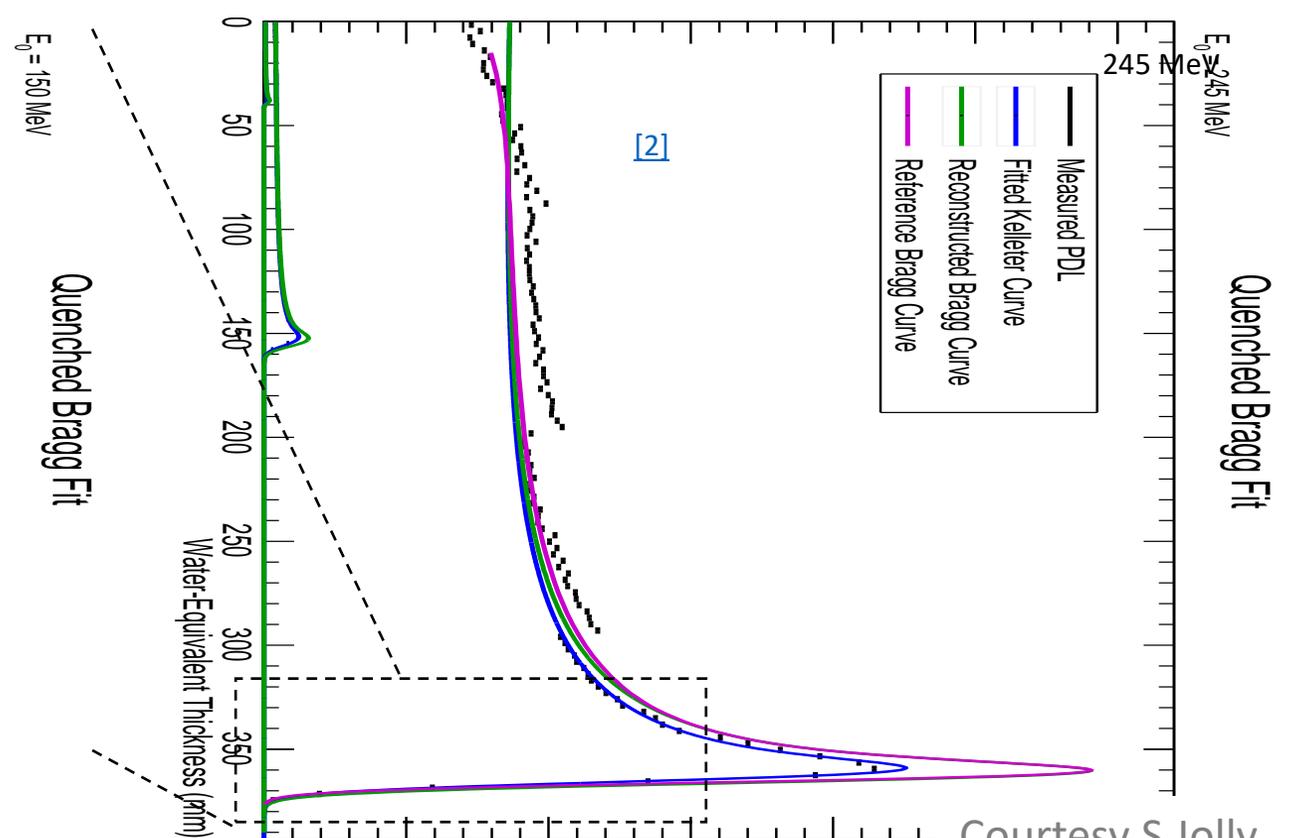
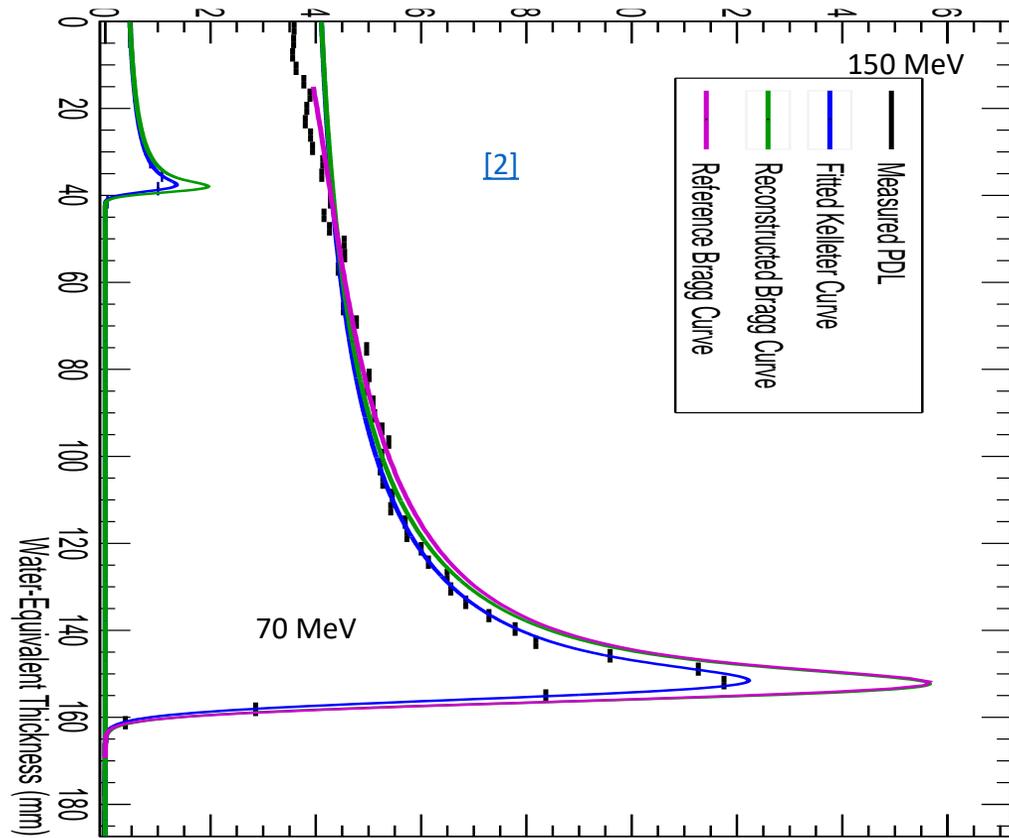
- Four 32-sheet detector modules (40 cm WET) to test energies between 70 - 245 MeV at clinical current;
- 245 MeV FLASH beam available at 800 nA ion-source current ($\sim 7\%$ transmission).



Courtesy S Jolly , UCL

The Christie Beam Test: Results

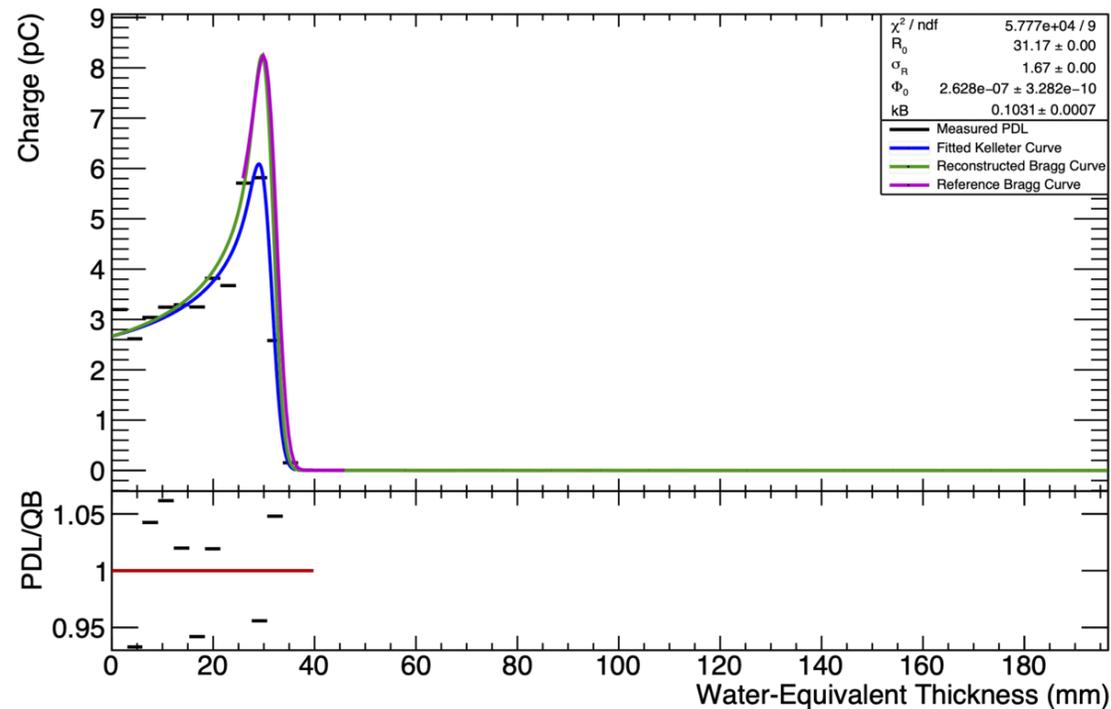
	70 MeV	150 MeV	245 MeV
Reference range (mm)	38.67	154.79	363.89
Fitted range(mm)	38.87	154.99	364.27



Courtesy S Jolly , UCL

PARTREC Beam Test

- Tested currents up to 50 nA and energies up to 150 MeV.
- Push the detector to its limit in terms of beam current/scintillator light output.
- 2 detector modules tested.



Courtesy S Jolly , UCL

Summary and future plans

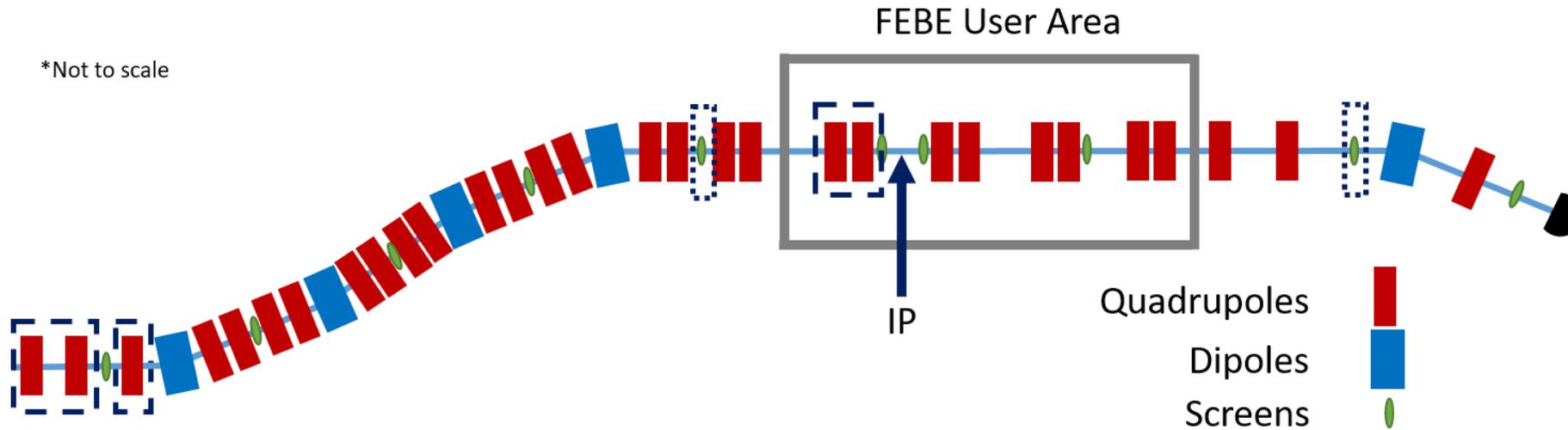
- Detector able to reconstruct proton ranges at clinical currents between 70-245 MeV with an accuracy of 0.4 mm.
- Detector can handle up to 50 nA of nozzle current. Non-linearities in charge observed but range consistent.
- Further development of web-based GUI to allow detector control.
- Improve scintillator composition and construction to optimise light output.
- Geant4 simulation to benchmark experimental results and constrain Birks' constant.
- Additional beam tests to optimize light output and characterize detector performance with clinical and FLASH beams.

Courtesy S Jolly , UCL

- Beam characteristics crucial in places where measurement difficult, e.g. inside of a plasma cell;
- Virtual diagnostics (VD) can infer properties those locations!
- Case study:
 - Simulation study on profile measurements at FEBE @ CLARA
 - Upstream and downstream X-Y measurements used to infer characteristics

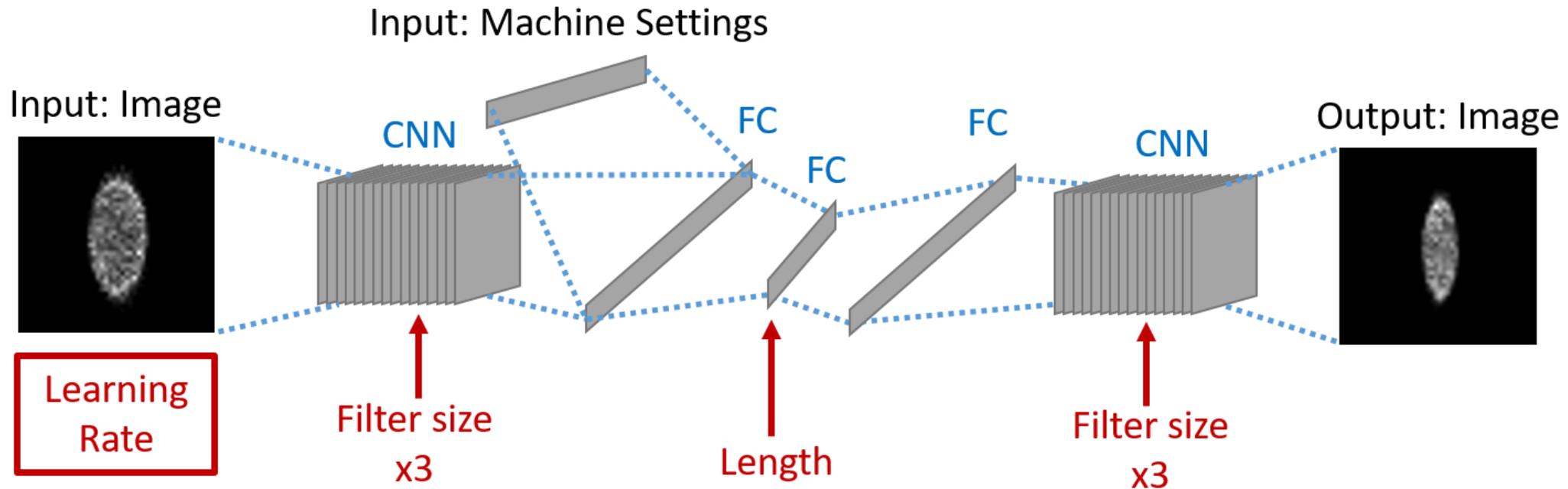
Courtesy J Wolfenden, ULIV

Virtual diagnostics



- Initial simple demonstration - planned profile measurement points could be used
- Highlighted quads were varied and profiles at highlighted screens were simulated

Courtesy J Wolfenden, ULIV



- **Convolutional Neural Network** architecture used with tuneable **hyper parameters**
- Upstream and downstream versions of the diagnostic were tested

Courtesy J Wolfenden, ULIV

- Wide range of reliable diagnostics available for medical accelerators;
- However, future facilities will require new and different approaches as performance of current monitors no longer sufficient;
- This will require cross-discipline collaboration!
- These technology innovations are expected to also find application outside of medical accelerators.

Thanks for your attention!