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### HEP software & the GRID A breakthrough in the fight against cancer

http://www.ge.infn.it/geant4/examples/brachytherapy

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CERN INFN Genova National Institute for Cancer Research, IST Genova

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# A real-life case

but all the results presented in this talk are general

- Activity initiated at IST Genova, Natl. Inst. for Cancer Research (*F. Foppiano et al.*)
  - hosted at San Martino Hospital in Genova (the largest hospital in Europe)
- Collaboration with San Paolo Hospital, Savona (G. Ghiso et al.)
  - a small hospital in a small town

#### Major work by **Susanna Guatelli**

MSc. Thesis, Physics Dept., University of Genova, 2002 *http://www.ge.infn.it/geant4/tesi/* 



Brachytherapy is a medical therapy used for cancer treatment

Radioactive sources are used to deposit therapeutic doses near tumors, while preserving surrounding healthy tissues



Techniques:
endocavitary

lung, vagina, uterus

interstitial

prostate

superficial

skin





## Radiotherapy treatment planning

- Treatment planning is performed by means of commercial software
- The software calculates the dose distribution delivered to the patient in a given source configuration



Maria Gra Monte Carlo simulation is not used in clinical practice (only side studies)

## A dosimetric system for brachytherapy

**Geant 4** 

Calculation of 3-D dose distribution in tissue Determination of **isodose curves** 

#### **Precision**

Accurate model of the real set-up

Easy configuration for hospital usage

#### Speed

Other requirements

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Based on Monte Carlo methods Accurate description of physics interactions Experimental validation of physics involved

ara

**I**D

**WWW** 

DIANE

AIDA

Anaphe

Realistic description of geometry and tissue Possibility to interface to CT images

Graphic visualisation + User Interface Elaboration of dose distributions and isodoses

Parallelisation Access to distributed computing resources

Open to extension and new functionality Publicly accessible

### Modeling the radioactive source

Plato-BPS treatment planning algorithm makes some crude approximation (φ dependence, no radial dependence)



Transverse axis of the source Comparison with experimental data



Longitudinal axis of the source Difficult to make direct measurements



10.5 mm 5 mm 12 mm 1

Effects of source anisotropy

Rely on simulation for better accuracy than conventional treatment planning software

# Validation

Microscopic validation: verification of Geant4 physics

Dosimetric validation: comparison to manufacturer data, protocol data, original experimental data





# Flexibility of modeling

#### **Configuration of**

- any brachytherapy technique
- any source type

through an Abstract Factory to define geometry, primary spectrum



#### **CT DICOM interface**

- through Geant4 parameterised volumes
- parameterisation function: material

(preliminary, work in progress)

#### **Phantom**

• various materials water, soft tissue, bone, muscle etc.

No commercial general software system!

# Application configuration



# Dosimetry

Analysis of the energy deposit in the phantom resulting from the simulation



#### AIDA + Anaphe

for analysis

Python

for interactivity

may be any other AIDA-compliant analysis system

#### Bebig Isoseed I-125 source





#### **Dosimetry** Interstitial brachytherapy



### **Dosimetry** Endocavitary brachytherapy

#### MicroSelectron-HDR source





### **Dosimetry** Superficial brachytherapy

#### Leipzig applicator





Endocavitary	1M events
brachytherapy	61 minutes
Superficial	1M events
brachytherapy	65 minutes
Interstitial	1M events
brachytherapy	67 minutes

on an "average" PIII machine, as an "average" hospital may own

Monte Carlo simulation is not practically conceivable for clinical application, even if more precise

## Access to distributed computing



Geant4 Simulation and Anaphe Analysis on a dedicated Beowulf Cluster S. Chauvie et al., IRCC Torino, Siena 2002



Previous studies for parallelisation of a Geant4 based medical application

- speed OK
- but expensive hardware investment
   + maintenance



**Transparent** access to a distributed computing environment

Parallelisation

Access to the GRID

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Alternative

strategy

## **DIANE** Distributed Analysis Environment

### hide complex details of underlying technology



### Migration to distributed environment

- The application developer (e.g. Geant4 simulation + analysis) is shielded from complexity of underlying technology
- Not affecting the original code of application
  - standalone and distributed cases is the **same code**
- Good separation of the subsystems
  - application does not need to know that it runs in distributed environment...
  - the distributed framework (DIANE) does not need to care about what actions application performs internally

# Performance: parallel mode



on up to 50 workers, LSF at CERN, PIII machine, 500-1000 MHz

Performance is adequate for clinical application, but...

it is not realistic to expect any hospital to own and maintain a PC farm

# Running on the GRID

#### Via DIANE

- Same application code as running on a sequential machine or on a dedicated cluster
  - completely transparent to the user

#### Consequence

- a hospital is not required to own and maintain extensive computing resources to exploit the scientific advantages of Monte Carlo simulation for radiotherapy
- any hospital even small ones, or in less wealthy countries, that cannot afford expensive commercial software systems – may have access to advanced software technologies and tools for radiotherapy

#### Work in progress: submission to the GRID and retrieval of results from a web portal

to facilitate the usage by end-users

## Outlook: other radiotherapic techniques



# Conclusions

A precise dosimetric system, based on Monte Carlo simulation

- Geant4
- Full dosimetric analysis
  - AIDA + Anaphe
- Simple interface
  - configuration from www
- Fast performance
  - DIANE
- Access to distributed computing resources
  - GRID

• The dream of medical physics for the past 40 years...

## Post-conclusion

Medical physics does not only require fast simulation and fancy analysis...



# Thanks!

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