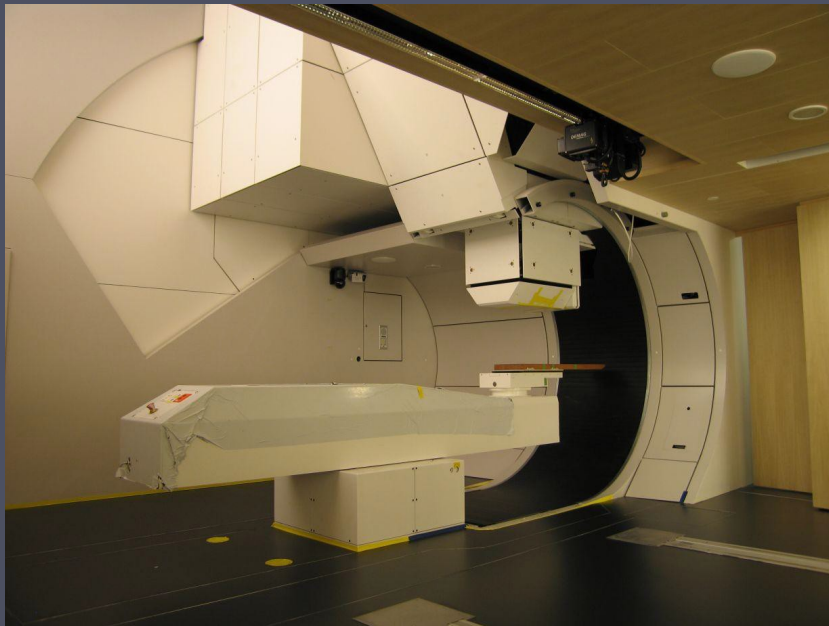


# GANTRIES

David Robin

Lawrence Berkeley National Laboratory



*Based on material/Courtesy of:*

*D. Meer, PSI;*

*A. Koschik, MedAustron;*

*J. Matteo, ProNova;*

*M. Murphy, Varian;*

*Y. Iwata, NIRS;*

*M. Pullia, CNAO;*

Educational Session 54<sup>th</sup> Annual Conference of the  
Particle Therapy Co-Operative Group, May 20, 2015

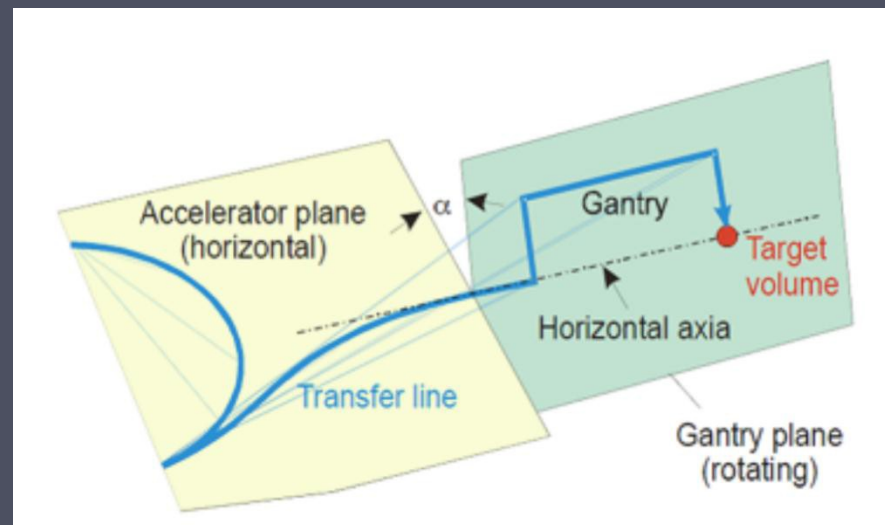
# Outline

- Motivation and general concepts
- Brief history of gantries
- Gantry properties and considerations
- PSI Gantry 2 : Example gantry at the state-of-art
- Some future directions

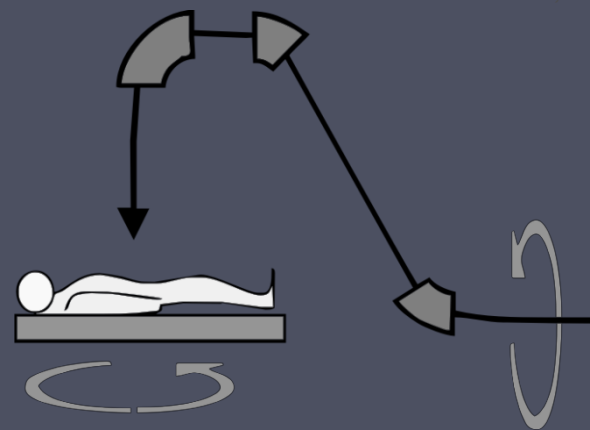
# Motivation and general concepts

# What is a Gantry?

- Gantry is a *rotating beam transport line* that focuses and directs the particle beam to the desired position in the patient target volume, at *any angle* required by the treatment plan.
- Gantry rotation and rotation of the patient table (patient positioning system – PPS) allow a full  $4\pi$  *solid angle* coverage.
- Patient in *supine* position.



PIMMS Vol.1, CERN



# Anatomy of a gantry

Example PSI Gantry 2\*

Last bending dipole:  
bends beam into plane of  
rotation and iso-center

Dipoles:  
bending beam  
away from/to axis

beam from  
accelerator

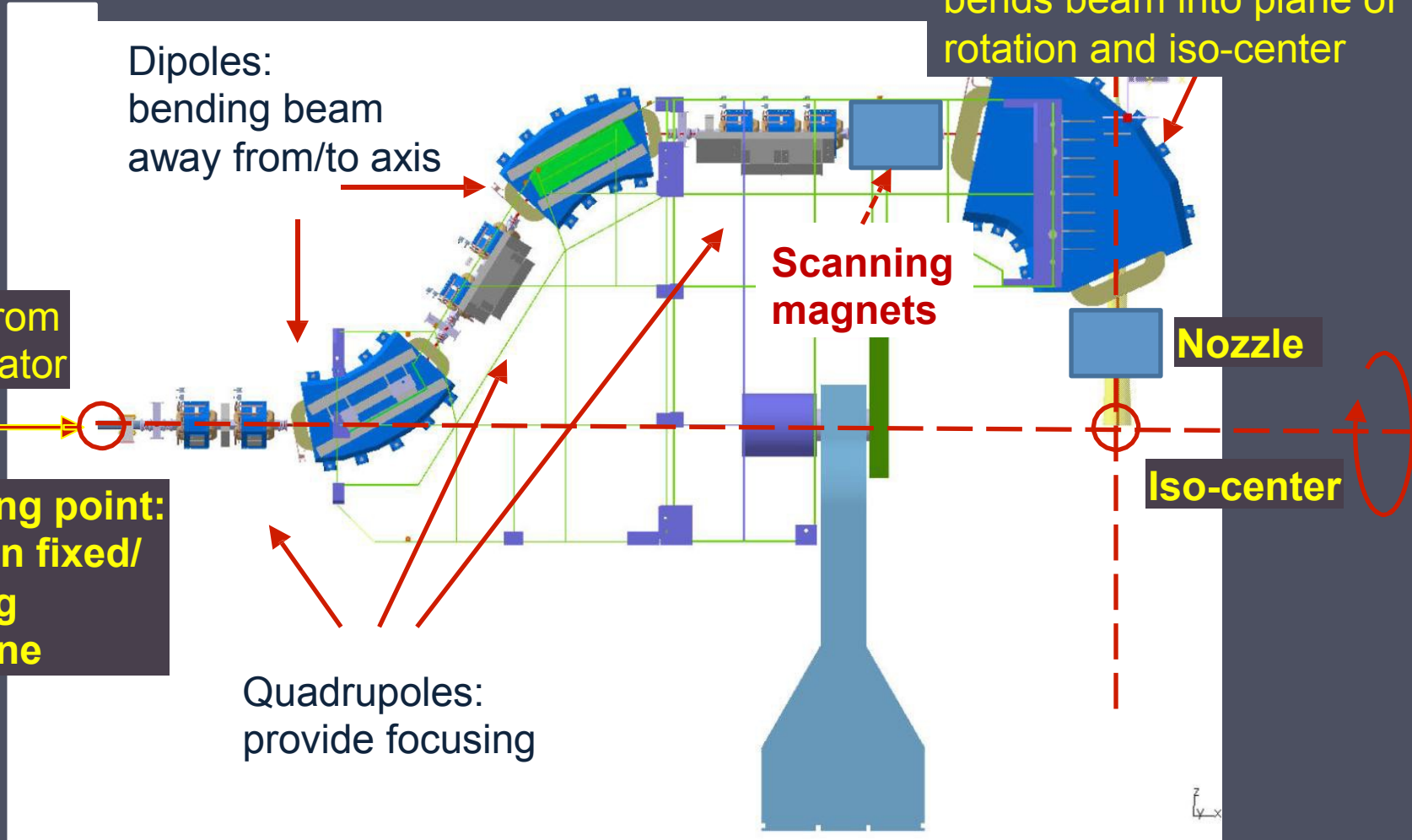
Coupling point:  
junction fixed/  
rotating  
beamline

Scanning  
magnets

Nozzle

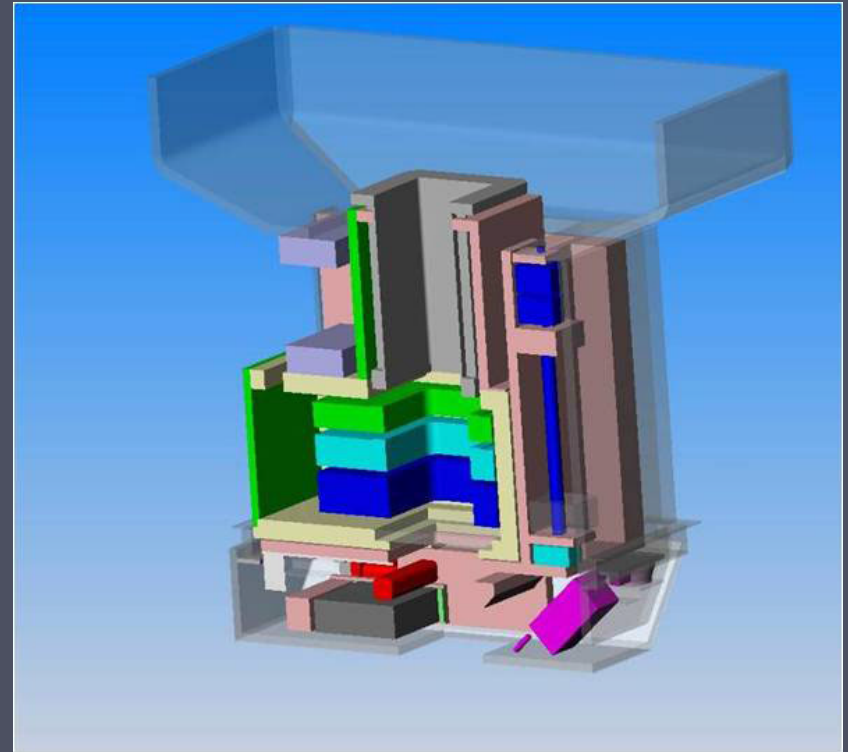
Iso-center

Quadrupoles:  
provide focusing



# Nozzle (radiation head)

- Measure dose
- Beam position
- Beam shape
- Range shifter



# Examples of existing proton gantries

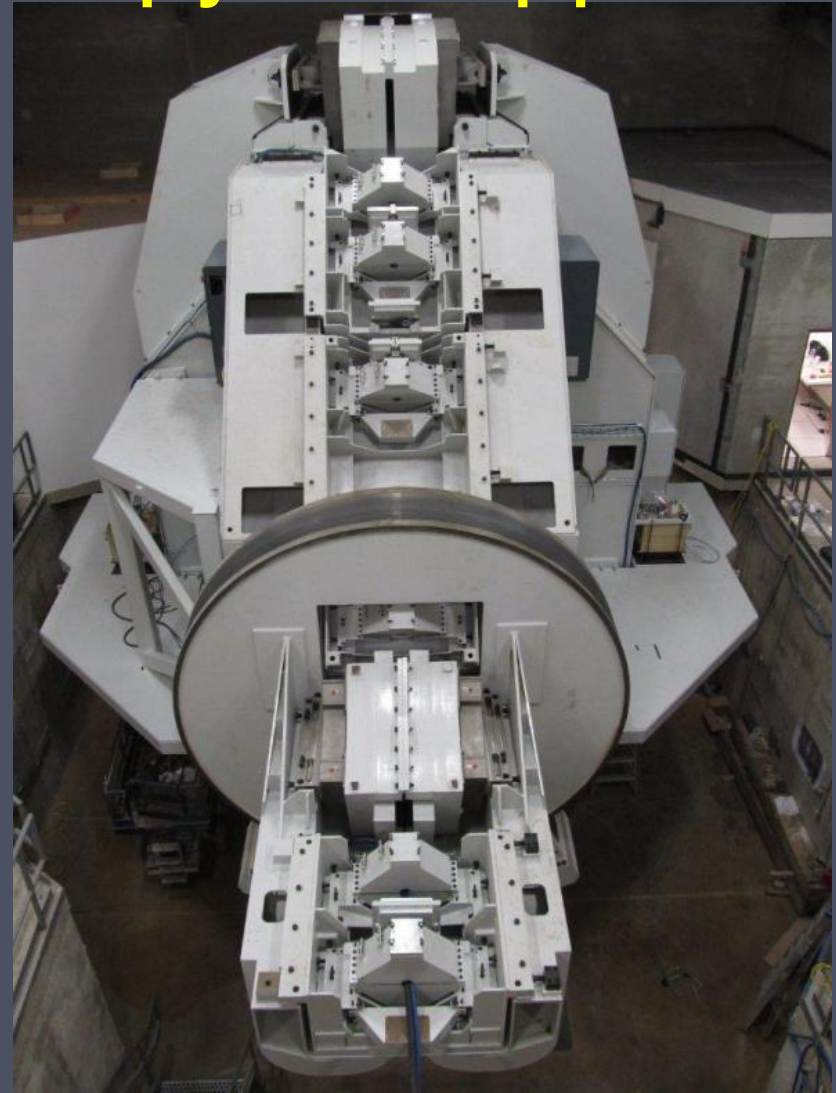


# Varian Particle Therapy / Scripps

ProBeam™ Delivery System  
Rotational Gantry

## Gantry

- 380° rotation, 1 RPM
- Angular position precision  $\pm 0.1^\circ$
- Moving floor
- 10.8m diameter, 10.2m length
- Room dimensions 36 x 47 ft





# Varian Particle Therapy

## Scripps

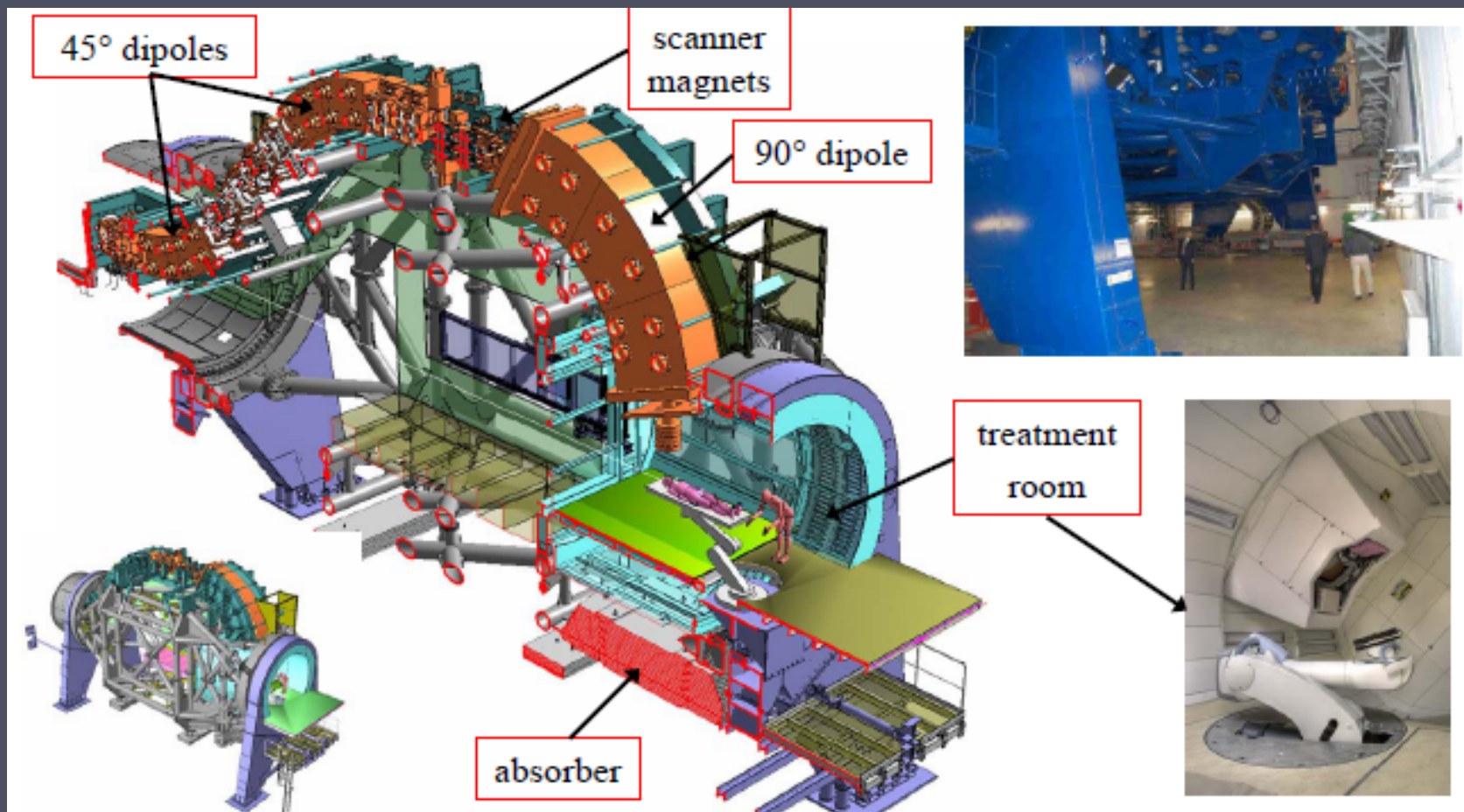


VARIAN  
medical systems

PR

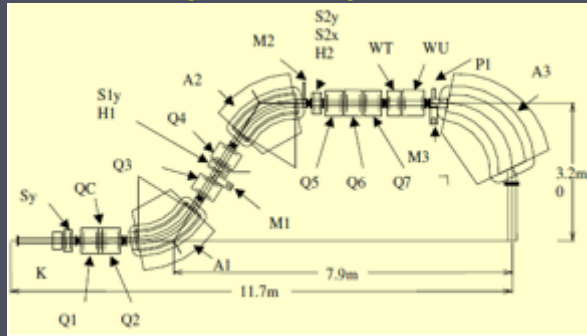
# Heidelberg Ion Therapy Carbon Ion Gantry

*Only Carbon Gantry Worldwide*



# Gantries are Large

## PSI Gantry 2 (Proton)

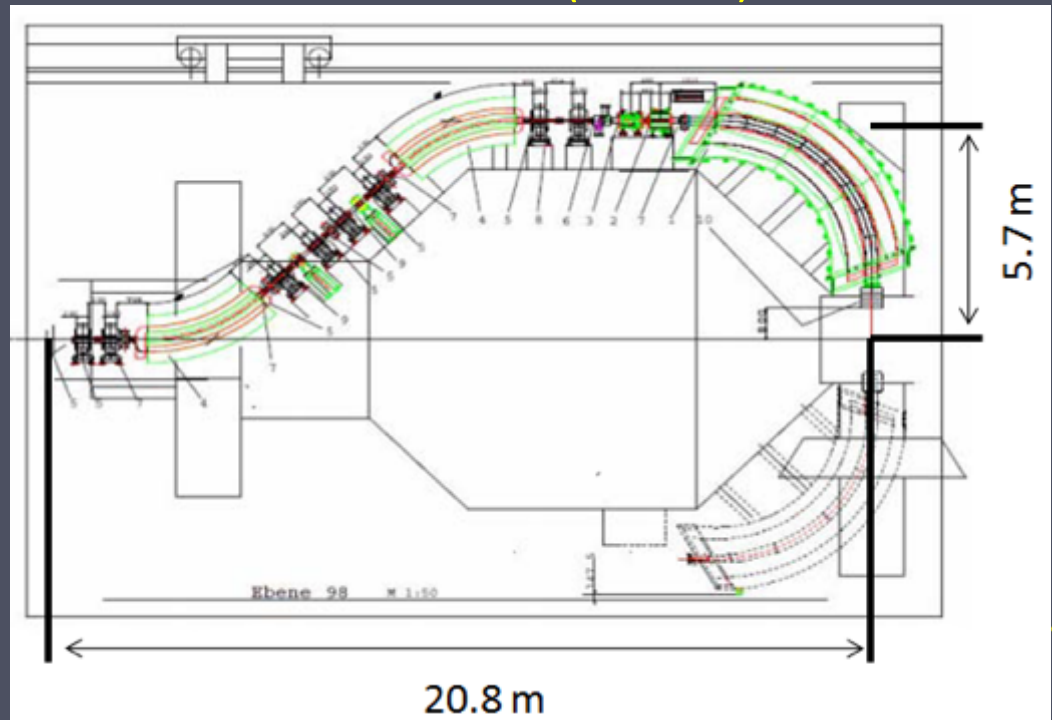


~8 m

~12 m

## HIT

(Carbon)



5.7 m

~13 m

20.8 m

~22 m

### Weight

- Proton gantries weight about 100 tons
- HIT carbon gantry weighs **600 tons**

*1/10 of the Eiffel Tower*

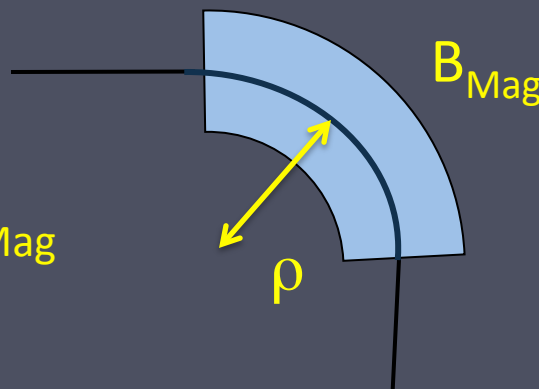
# Why Carbon Gantries Are Bigger

*Carbon Ion beams are harder to bend*

- Difficulty to bend measured by magnetic rigidity,  $B\rho$  [T m]

- Bending radius,  $\rho$ , is :

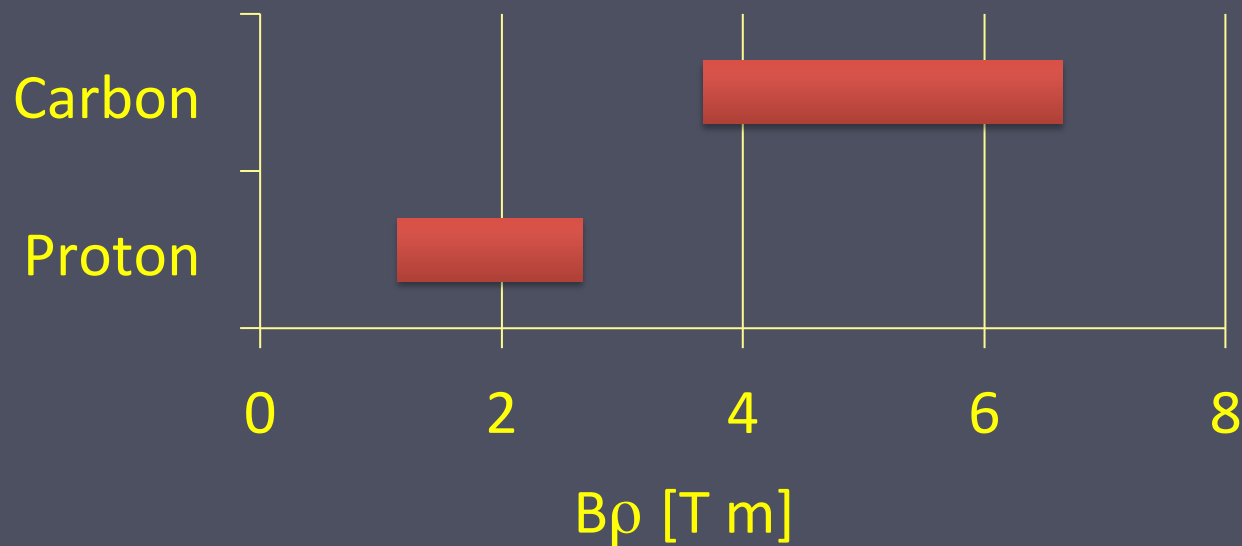
$$\rho = B\rho / B_{\text{Mag}}$$



- For the same penetration depth
  - Magnetic Rigidity is  $\sim 2.6$  times higher for Carbon Ion Beams

# Magnetic Rigidity

Magnetic rigidity for 3 – 30 cm penetration depth

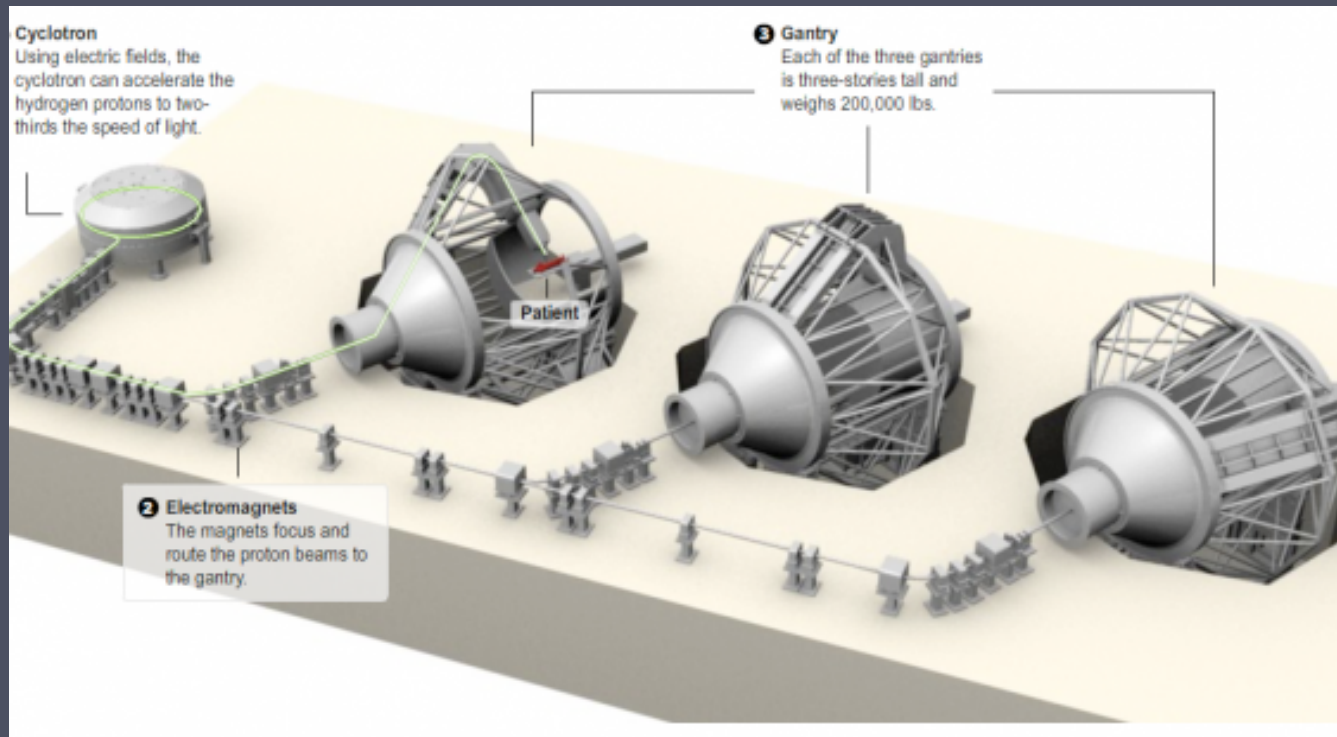


Example : HIT 90° Dipole

Field Strength is 1.81 Tesla

Bending radius is 3.67 m for Bρ is 6.64 Tm

# Proton Therapy Center



*Gantries are larger than the proton cyclotron*

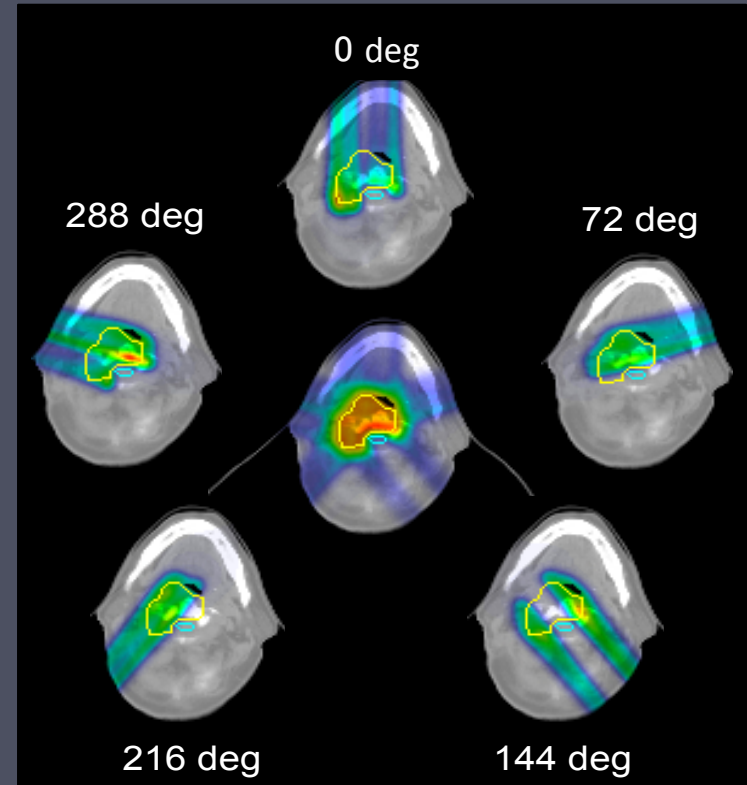
# Heidelberg Ion Therapy (HIT) Facility

Gantry is 3 stories tall



# Why Gantries?

- ▶ Gantries facilitate treatment planning
- ▶ Multiple beam directions help to
  - *Avoid* sensitive organs (*OAR*)
  - *Spare* surrounding *tissue*
  - *Conform more closely tumor shape*



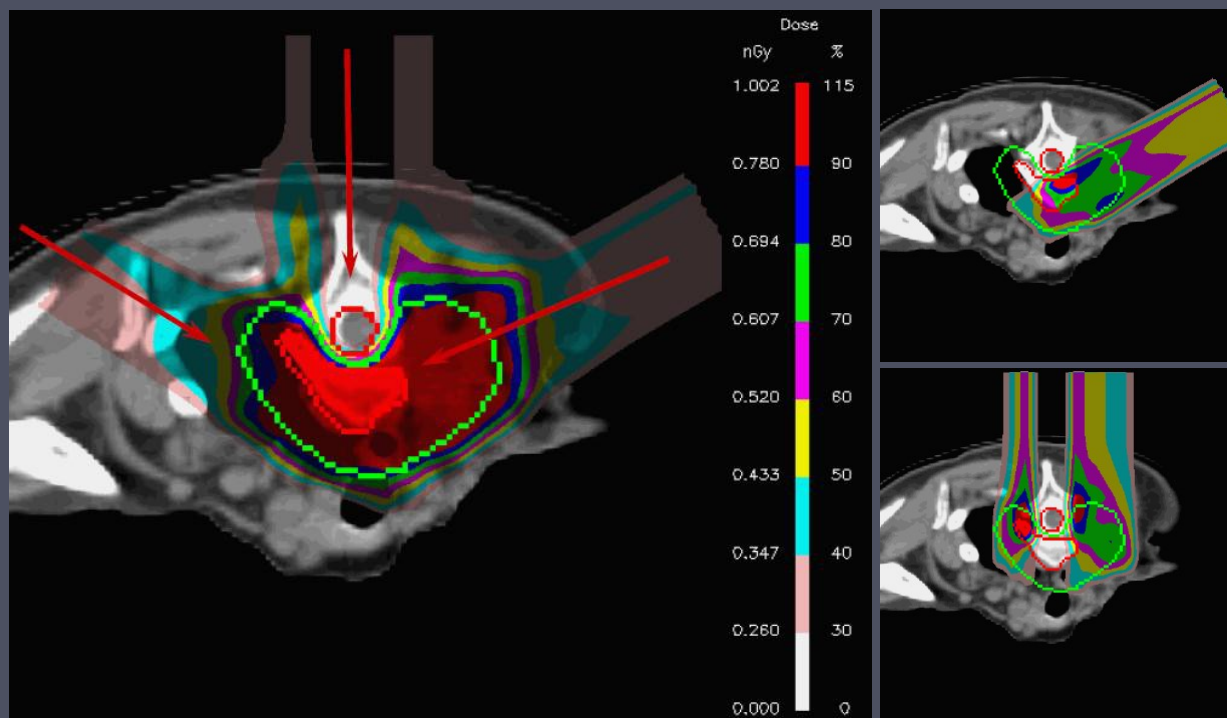
*Thesis, B. Schaffer, PSI*



# Combining gantries and scanning

- IMPT (intensity modulated particle therapy)
  - Simultaneous optimization of dose fields
  - Superposition of non-homogenous dose fields

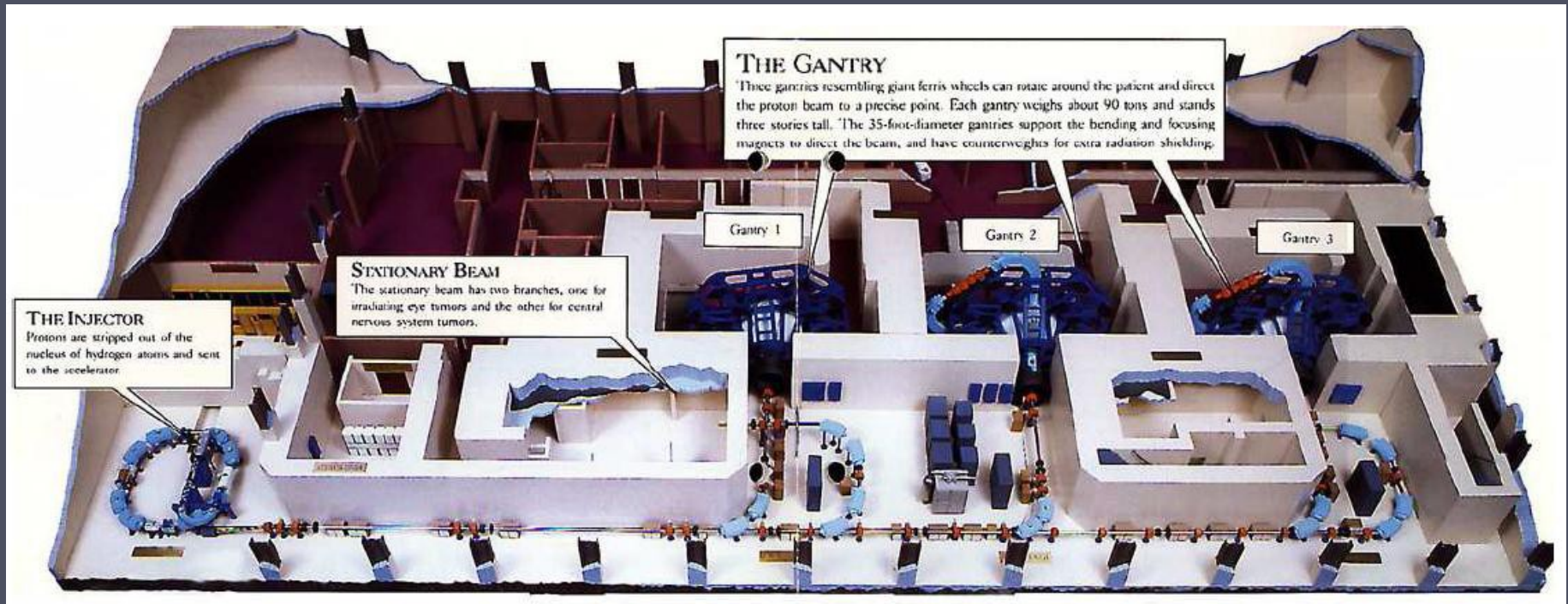
- Requires the use of a **gantry**
  - Need to apply all fields in the same session
- Requires **scanning**



# Brief history of gantries

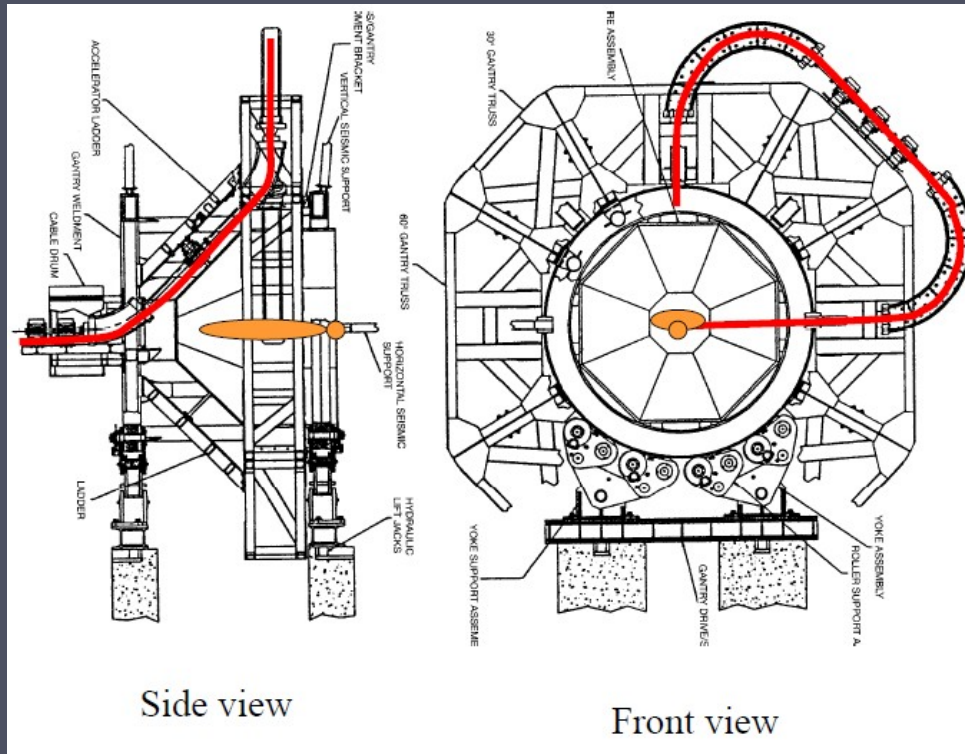
# 1991 – Loma Linda University

- First hospital-based proton therapy facility
  - Synchrotron based (Fermilab technology – Optivus)
  - 3 Gantries, 2 fixed horizontal beam rooms
  - Passive scattering



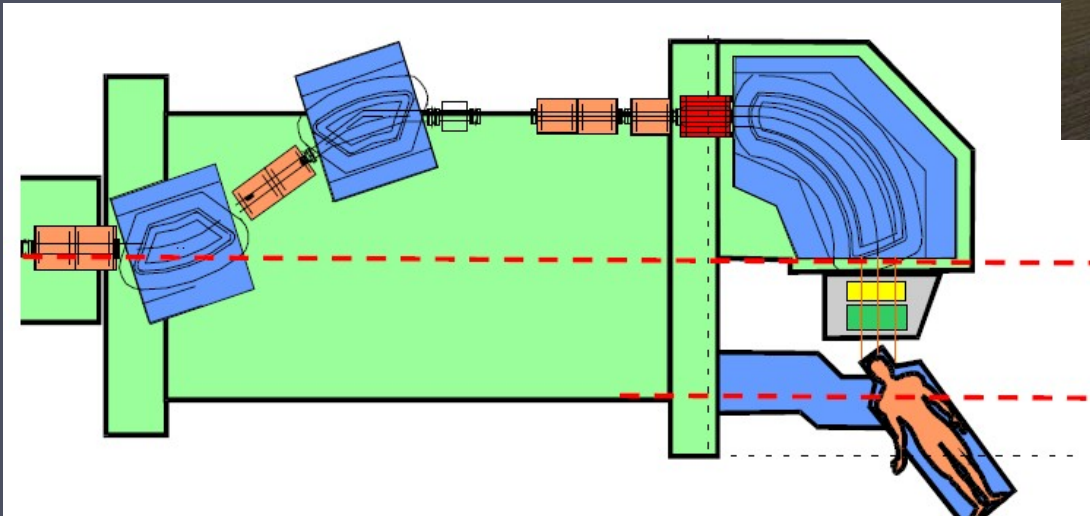
# Loma Linda – Corkscrew Gantry

The first proton gantry



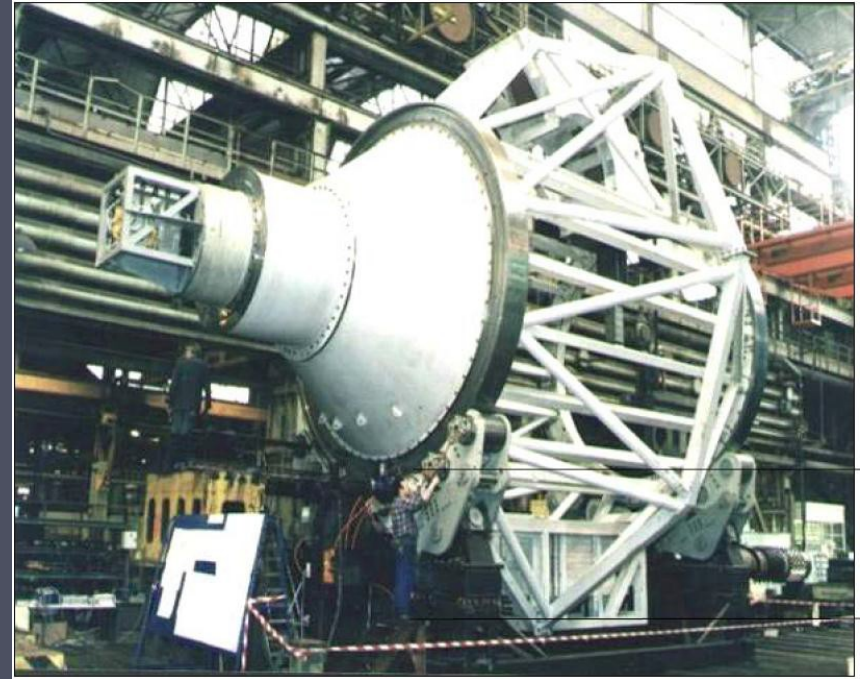
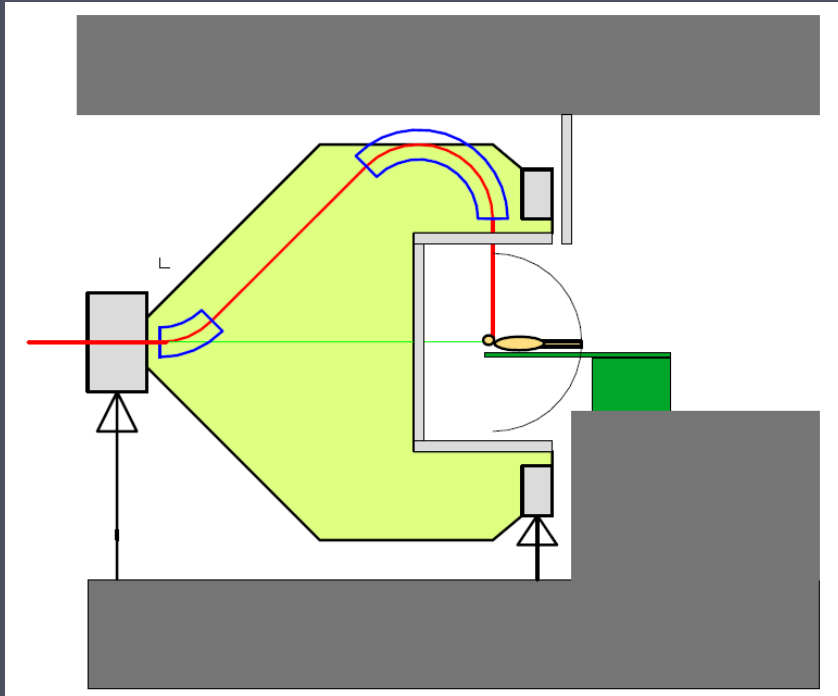
# 1992 – PSI Gantry 1

- The first **scanning** Gantry in the world
- Characteristics
  - **Upstream parallel scanning**
  - Gantry radius only **2m**
  - Eccentric mounting of patient table on front Gantry wheel



One plane is scanned magnetically, the other via table motion (like field patching)

# Commercial solutions end of 90s

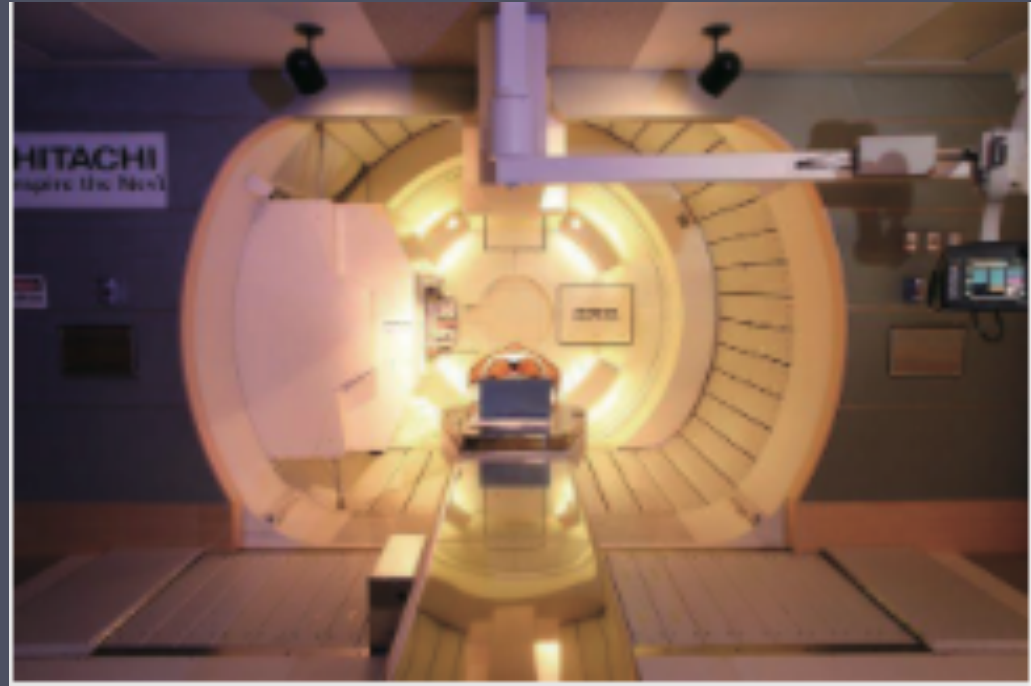


## Example IBA

- Last bend 135°
  - Short path up-down, short length
  - Cylindrical treatment cell, gantry pit
- Passive scattering, nowadays also scanning

# First commercial scanning systems 2008

- MD Anderson (Hitachi)
- Followed by RPTC Munich (Varian) and MGH Boston (IBA)



# Gantry properties and considerations

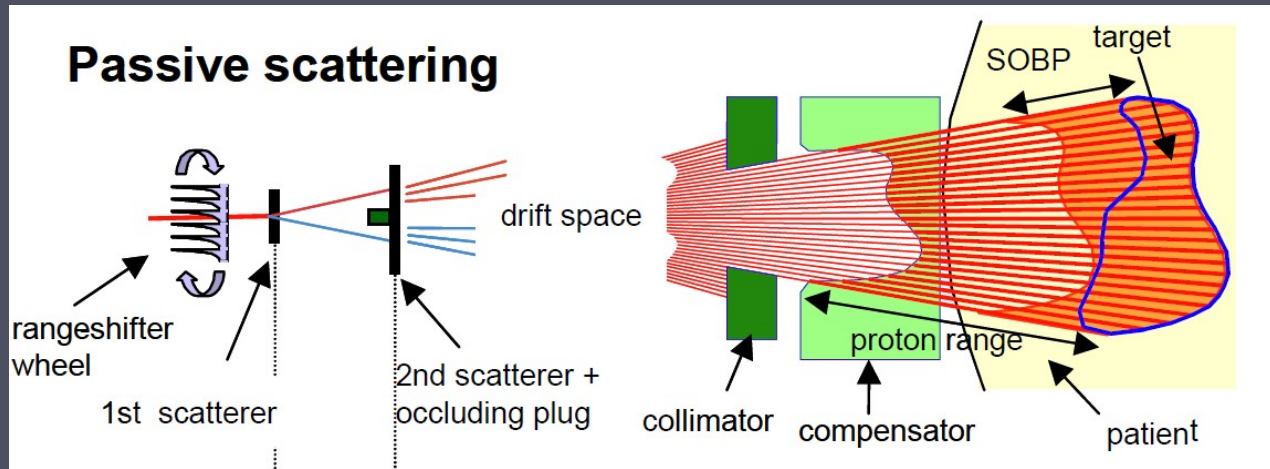


# Some Gantry Properties and Considerations

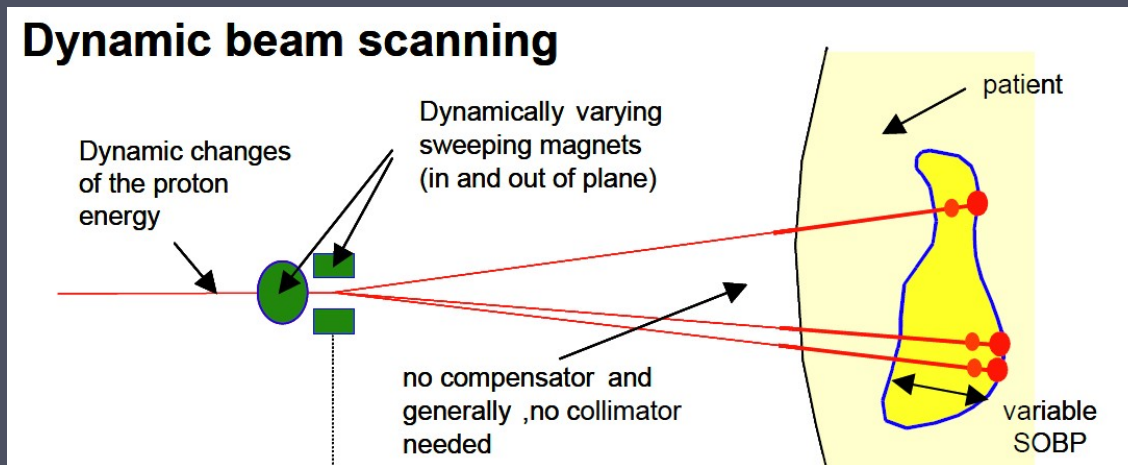
1. Beam delivery modalities: Active Scanning versus Scattering
2. Fast Depth Scanning
3. Size of the Good-Field Region
4. Source to Axis Distance (SAD)
5. Fixed versus Mobile Isocenter

# Beam delivery modalities

## (Passive scattering versus scanning)



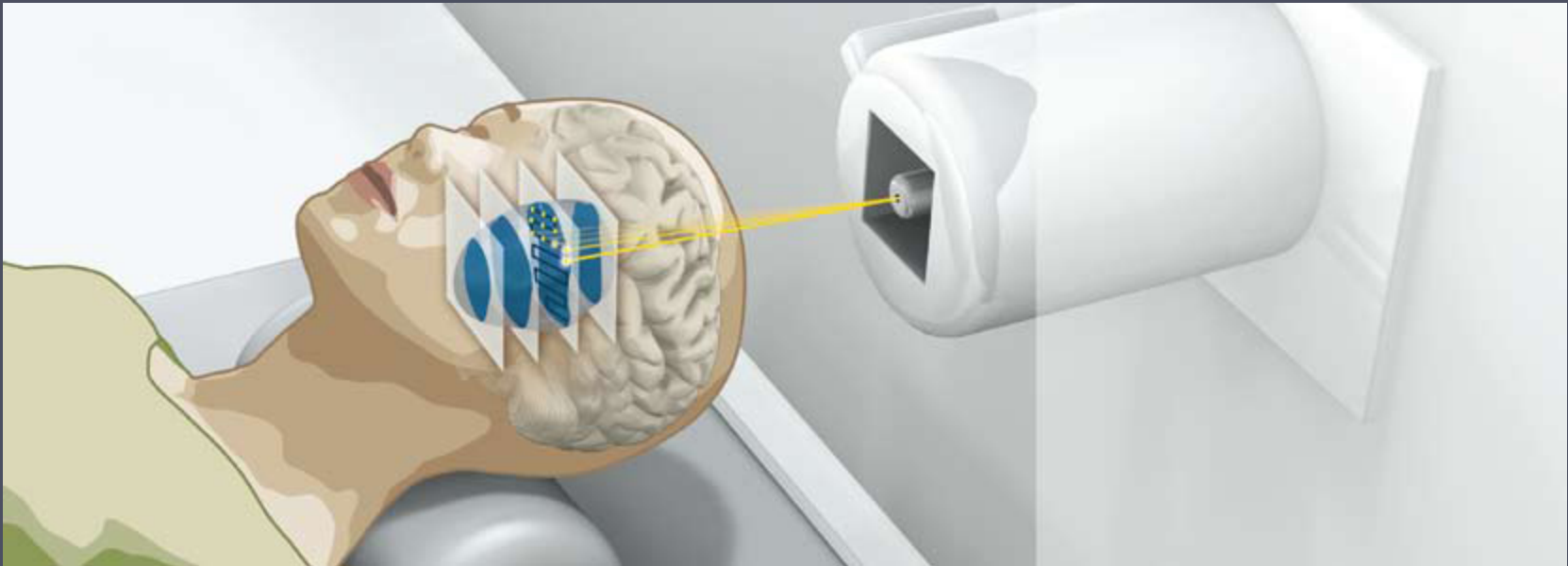
Will not talk about this technique further, however many installed (proton) Gantries still use this technique



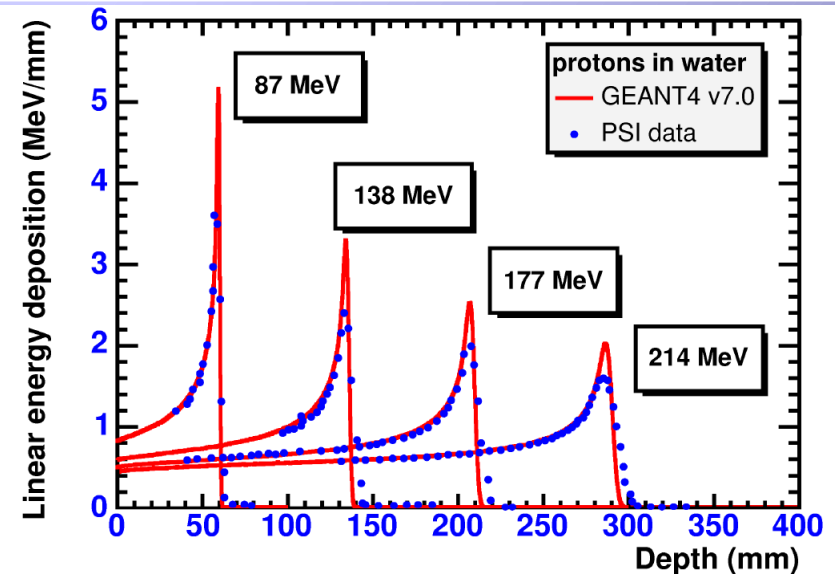
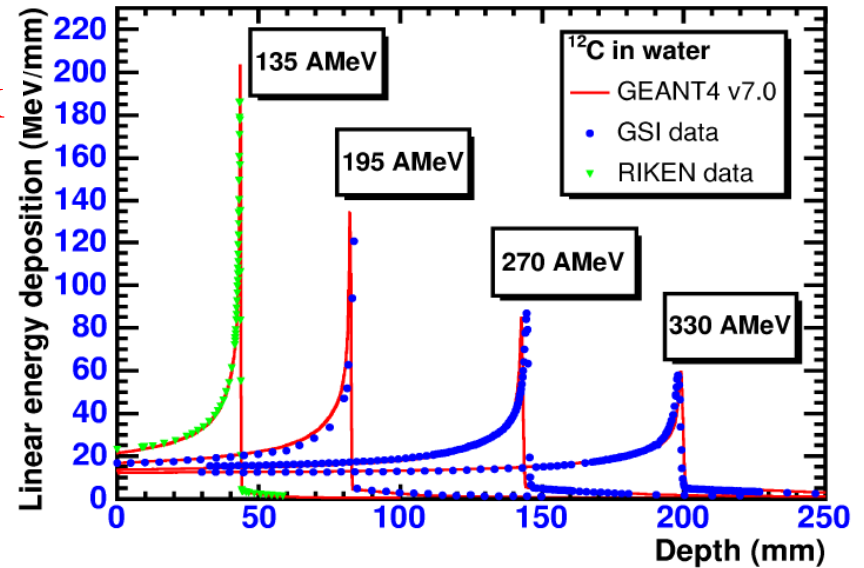
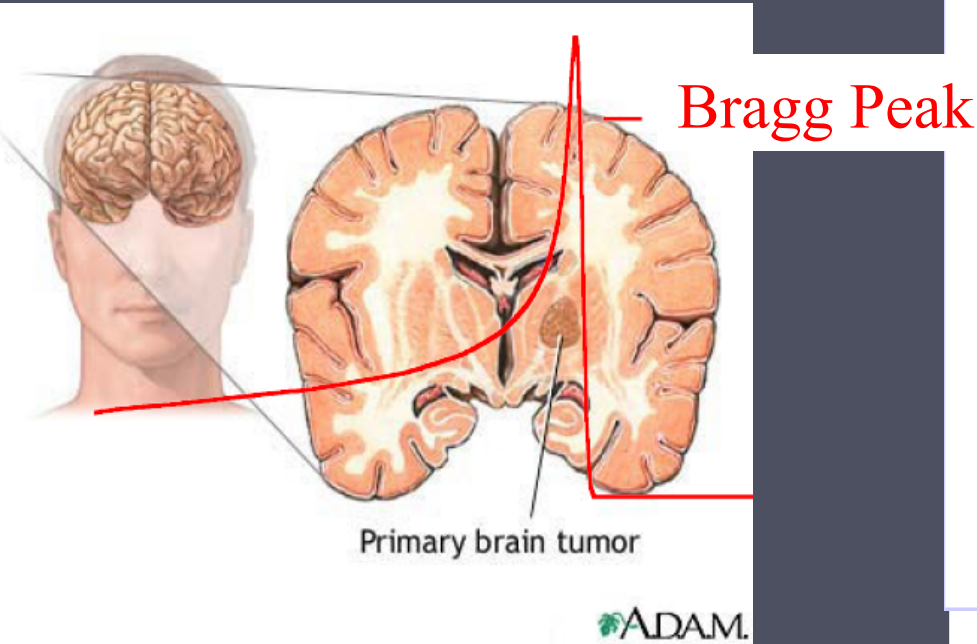
**Active Scanning:** State-of-the art nowadays. Allows intensity modulated therapy. No patient-specific hardware needed.

# 1. Active Scanning

- Active spot or pencil scanning - the desired dose is delivered by scanning a small (few millimeters) beam in all 3-dimensions



## 2. Fast depth scanning



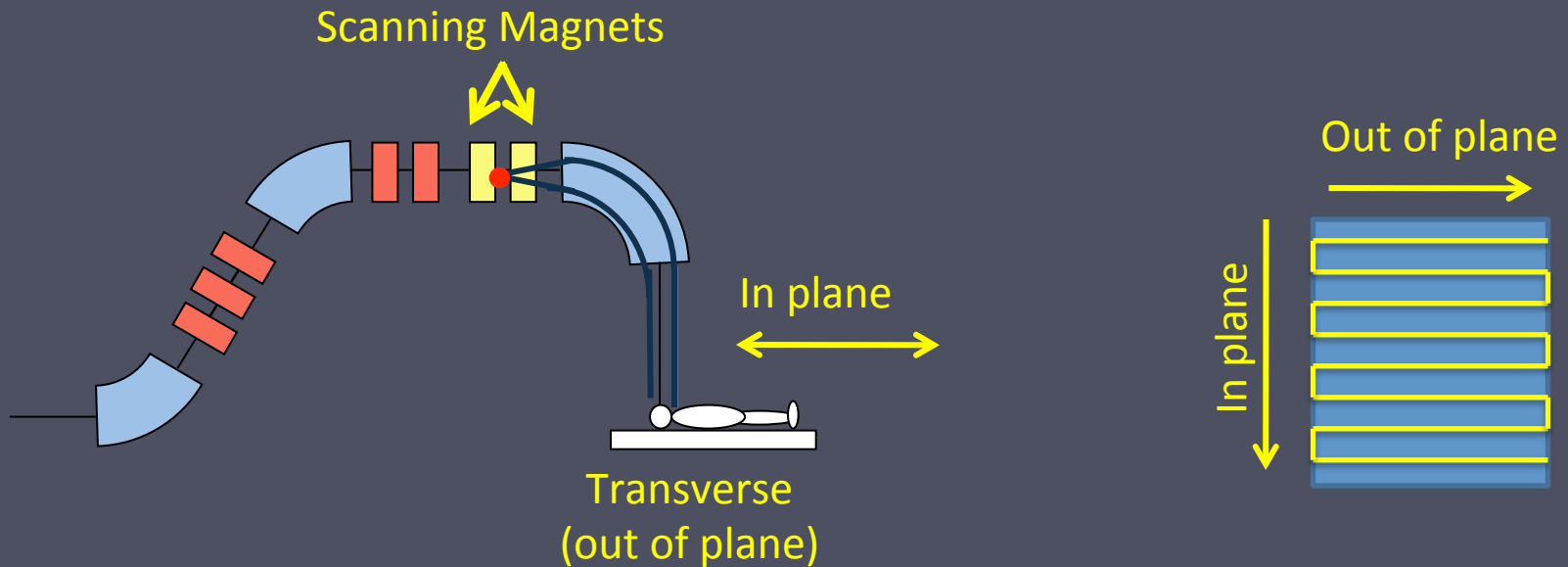
- The depth of the energy deposition peak (Bragg peak) can be efficiently tuned by changing the ion energy
- Most gantries require changing the magnet fields

*5mm depth change requires a 1% field change (on average)*

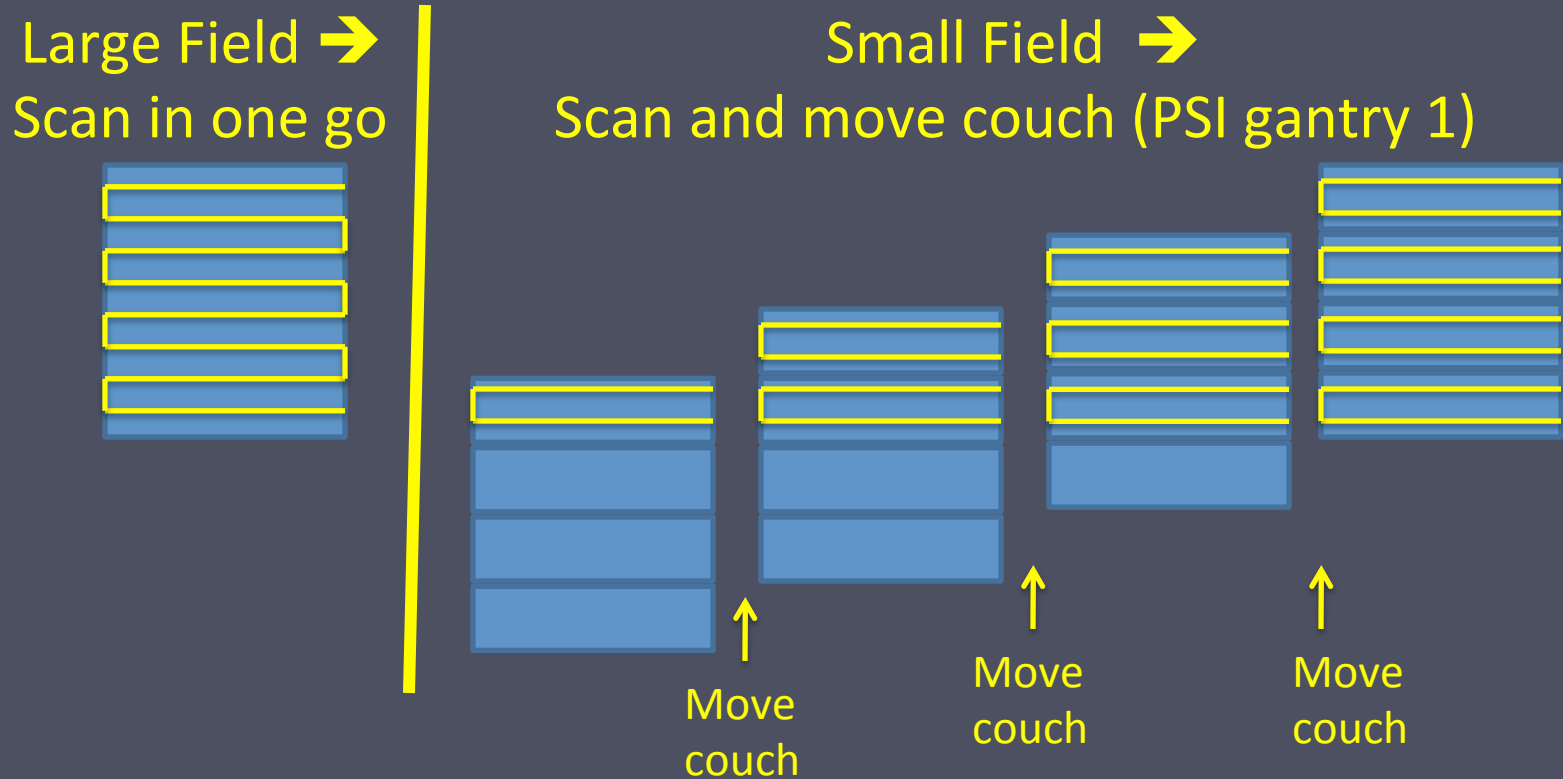
# 3. Good Field Region

Good field region is the lateral region that can be scanned without moving the gantry or patient

Lateral plane (In plane and Out of plane Dimensions)



# Field Patching

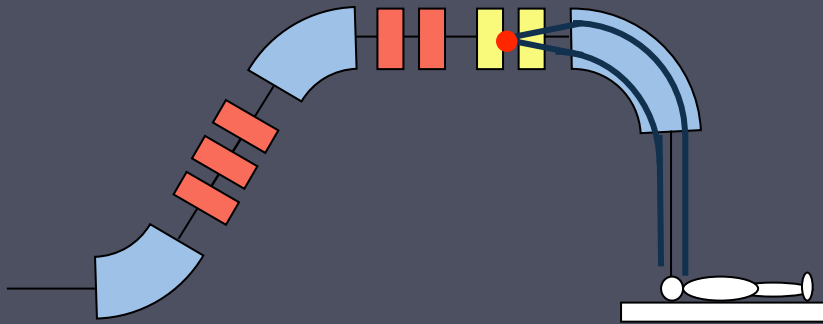


- Field patching is slower
- Large field may require larger magnet apertures and higher costs

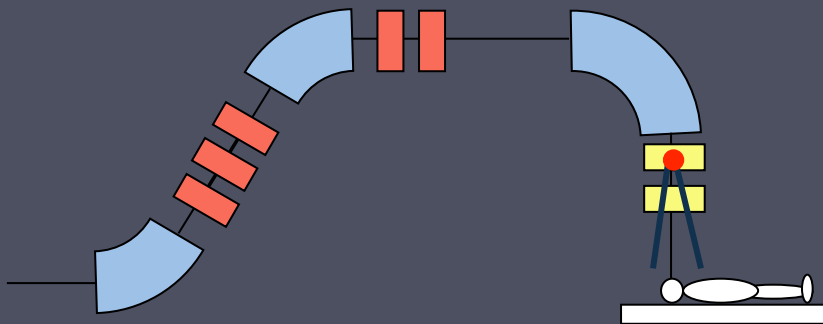
*What is an optimal size for the good field region?*

# 4. Parallel versus Angular Scanning

- To minimize normal tissue dose → Parallel scanning is preferable



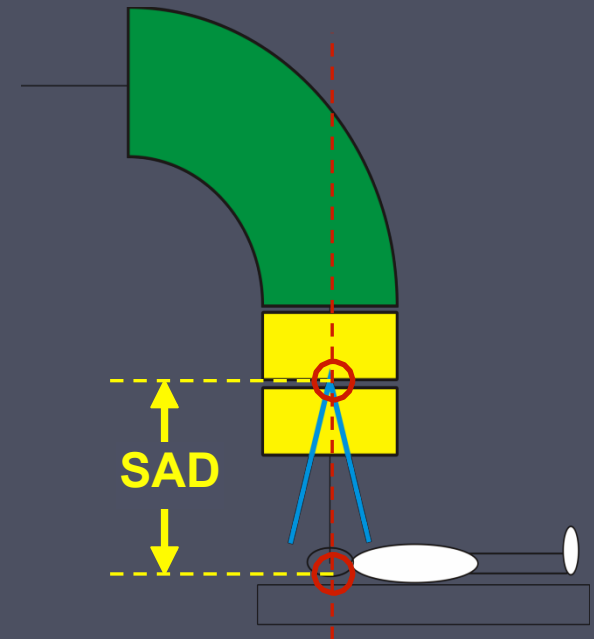
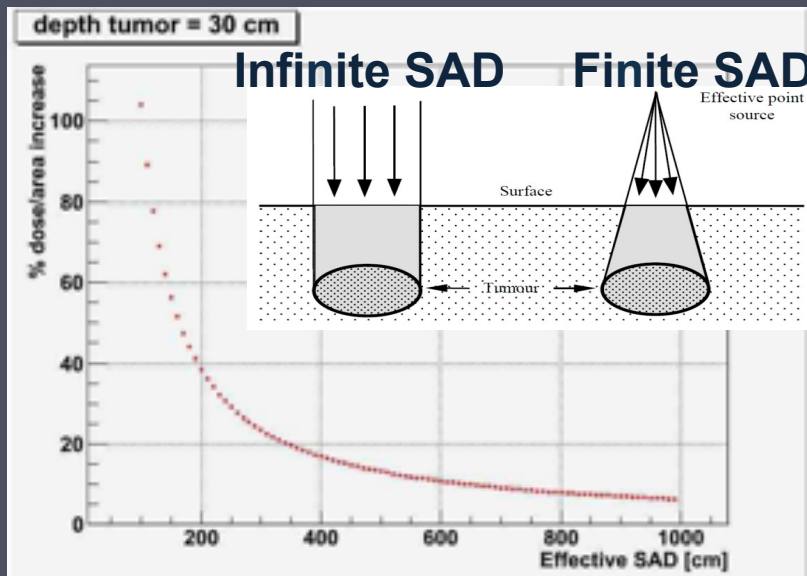
- But some small angle might be acceptable



- Source to Axis Distance (SAD)

# Considerations for smaller SADs

- Higher relative skin dose
- More complex planning and dosimetry



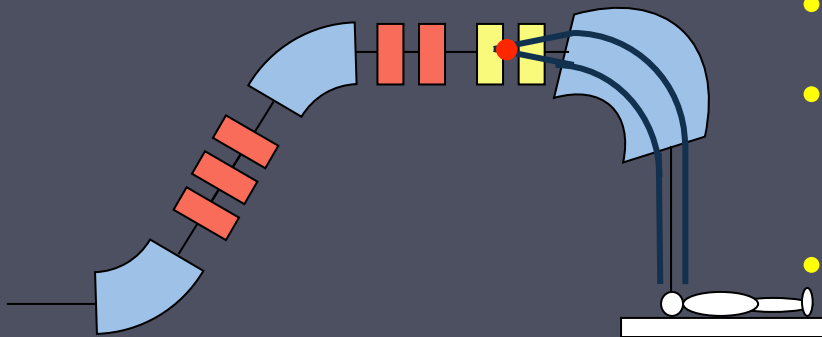
*What is the Minimal Acceptable SAD?*



# Scanning Magnets Location

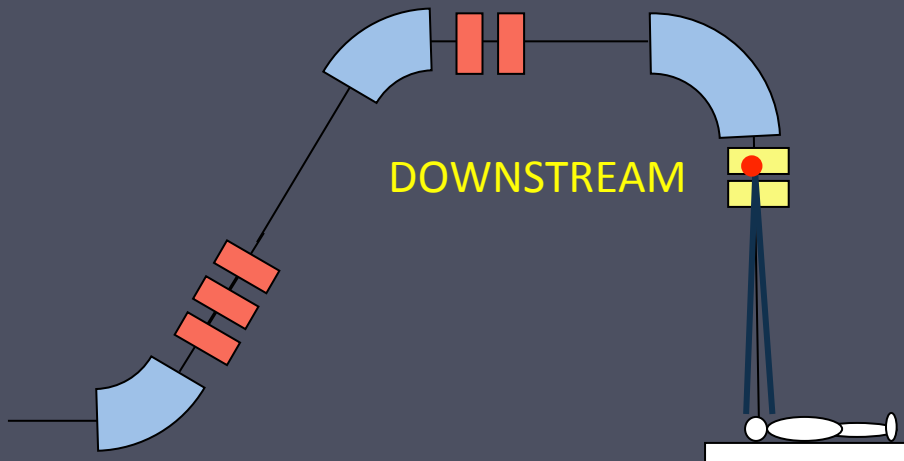
## *Upstream or Downstream of Final Bend?*

UPSTREAM



- Large aperture magnet
- Emphasis on magnet field quality
- Higher operating costs

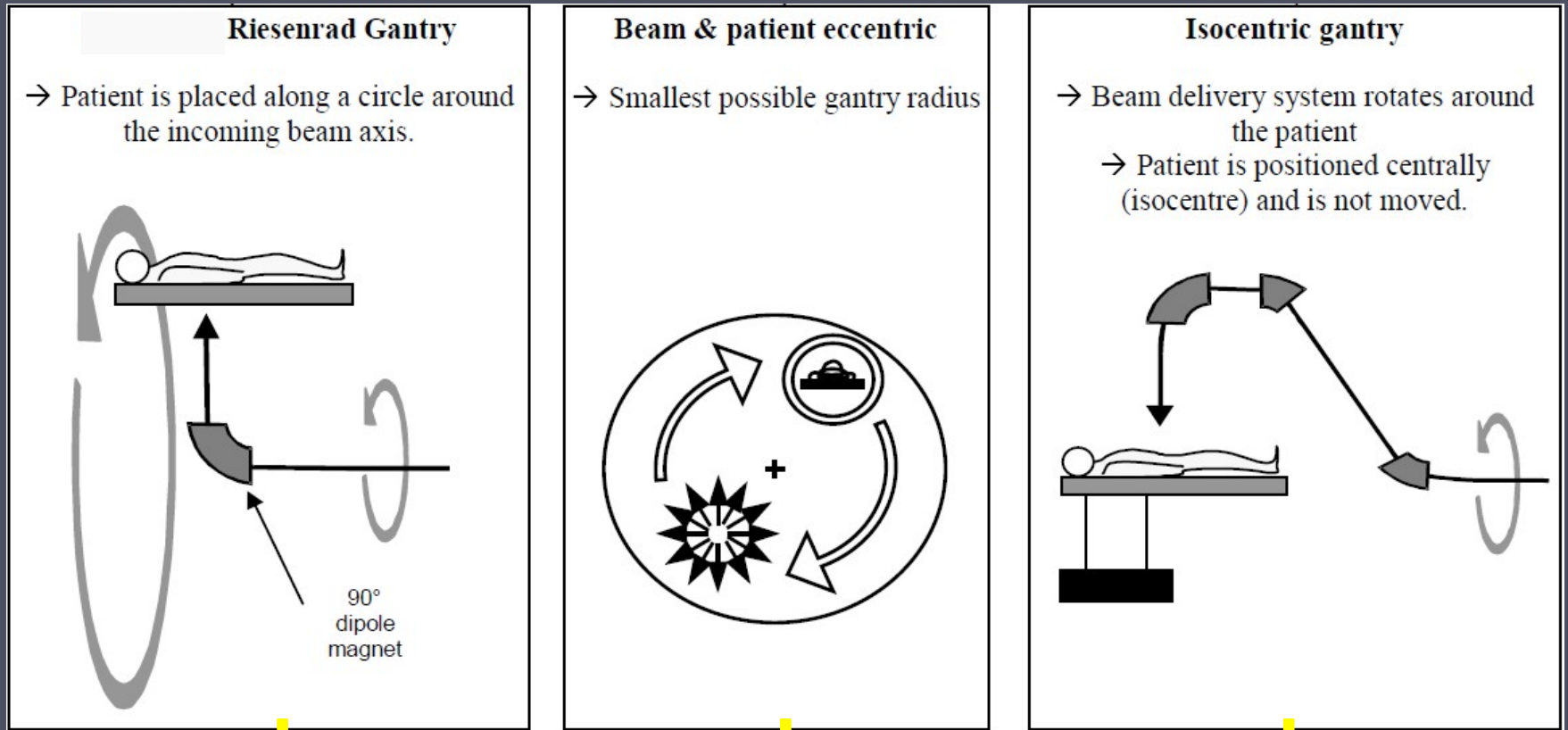
DOWNSTREAM



- Larger gantry radius
- Larger room size

# 5. Mobile versus fixed Isocenter

Reinoser, Thesis, PMMS



Has not been built yet

PSI Gantry 1

Most Gantries in the world

# Gantry functional specifications

## Example (ULICE\* survey)

- As part of the Union of Light Ion Centers in Europe (ULICE), physicians and medical physicists from CNAO and other European facilities completed a survey
- Some of the survey results are shown on the next page are useful in understanding the carbon ion **gantry functional specifications**

<b>Gantry functional specifications</b>	
<b>Minimum good field size</b>	<b>15 x 15 cm<sup>2</sup></b>
Maximum number of fields per session	4
Penetration depth (range)	<b>3 – 30 cm (corresponding energy: p = 60 - 220MeV; C ion = 120 – 430 MeV/u)</b>
Voxel dose accuracy	<b>±1%</b>
Dose uniformity	<b>±2.5%</b>
Voxels characterization	<b>3 x 3 x 3 mm<sup>3</sup></b>
Voxels out of range	1%
Field position accuracy	<b>±0.5 mm</b>
<b>SAD</b>	<b>4 m</b>
Maximum treatment time	<b>30 min</b>
Minimum required space around isocenter	<b>60 cm</b>
Achieved beam directions	<b>4π</b>

What is the present state-of-art?

# Present state-of-art

- Fast Conformal Scanning with Volumetric Repainting
- Active and Parallel (large SAD)scanning
- Short (few minute) treatment time per field (including repaintings)
- Reasonably large Lateral Good-Field Regions
- Fixed Isocenter
- Field position accuracy ~1mm
- Full  $4\pi$  angular coverage

PSI Gantry-2 and HIT are good examples

Both are derivatives of the same design - Pavlovic

# Pavlovic Type Gantry Design

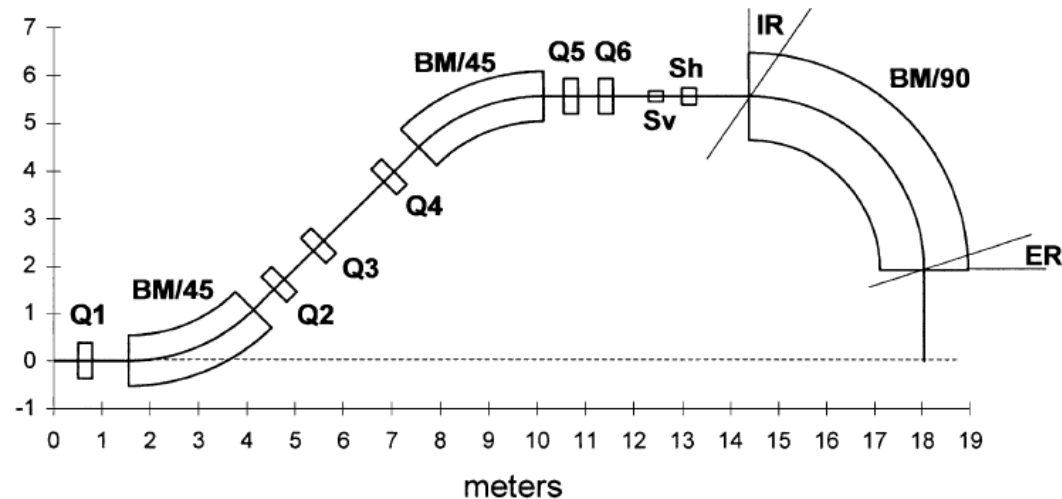


Fig. 3. Layout of the gantry with the minimum number of quadrupoles: Q1–Q6 = quadrupoles, BM/45 = 45° bending magnet, BM/90 = 90° bending magnet, Sh = horizontal scanner, Sv = vertical scanner, IR = input pole face rotation (30°), ER = exit pole face rotation (21°).

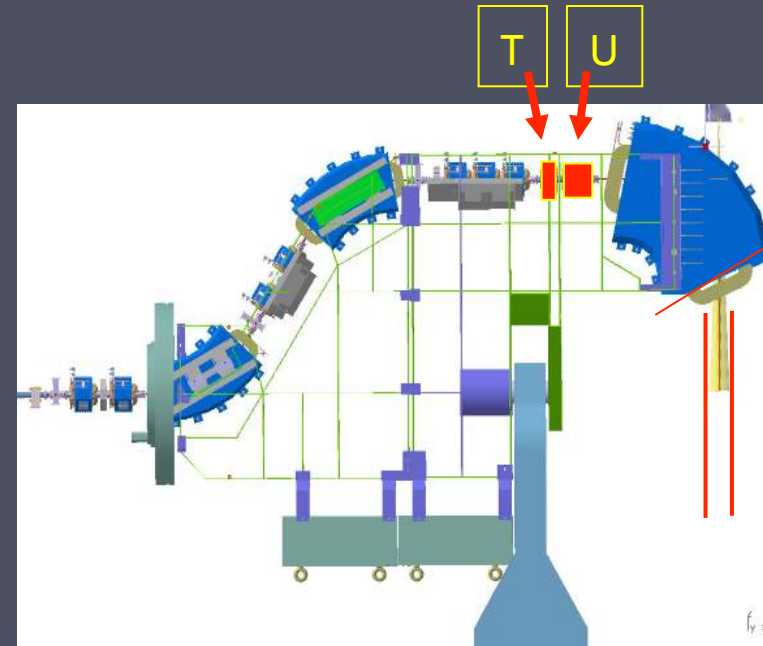
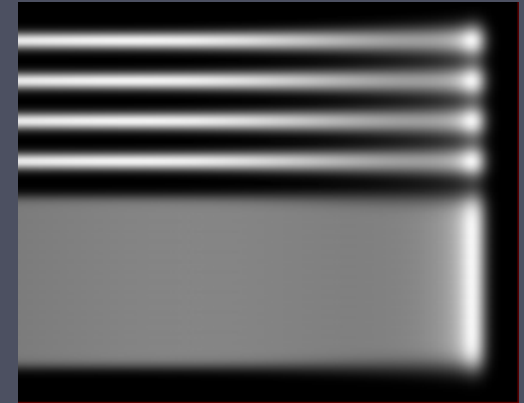
Radially very compact by having the last magnet a 90 degree magnet. All the other magnets – quadrupoles, dipoles, and steering magnets, do not take up additional radial space.

The radial size is determined by only three things –  
(1) the space between the patient and the last magnet,  
(2) the bending radius of the 90 degree dipole, and  
(3) the outer diameter of the magnet.

# Example – PSI Gantry 2

- Good Field Region 12 cm x 20 cm
- Fast double parallel scanning
  - Lines ~10 ms
  - Lateral Plane (one energy) <200 ms (20 lines)
  - Beam Intensity Modulation (BIM)
- Quick Depth Change
  - 100 ms per 5 mm
- Repainting of iso-layers
  - ~ 7 seconds per cubic liter (20 energies)
- Volumetric repainting capability
  - 10 repaintings / liter in 1 (2) minutes

Lateral Scanning

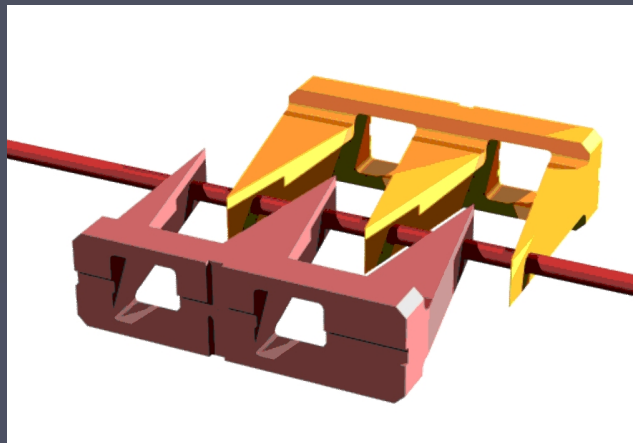




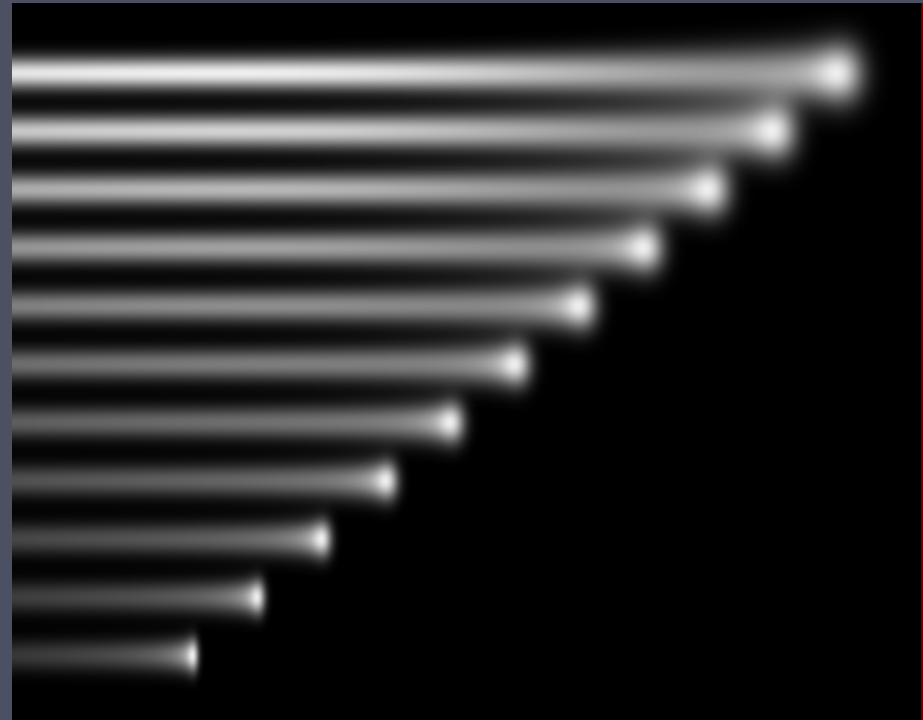
# Fast beam energy changes



Carbon wedges moving against each other in the beam



Fast energy changes  
with degrader and beam line  
(including GANTRY 2 magnets)  
Aiming at 100 ms dead time for  
range steps of 5 mm  
Achieved 80 ms !!



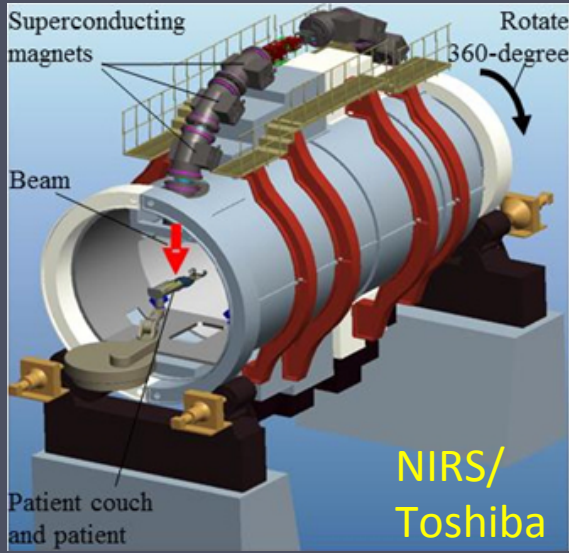
Future developments

# Potential For Improvement

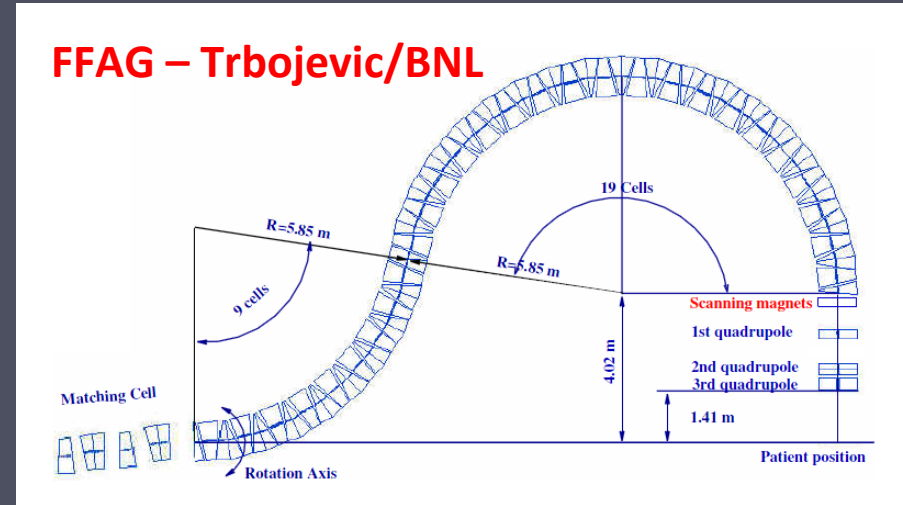
- Gantries are expensive
  - Large structures
  - Requiring big heavily shielded (~5m thick) rooms
  - Substantial operating costs (up to 0.8 MW for HIT Gantry)
- Advantages of gantries are such that many new proton facilities are being built with multiple gantries
- Gantry development has potential for achieving significant gains in size reduction, cost, and improved performance

# Potential for lighter and higher performance gantries

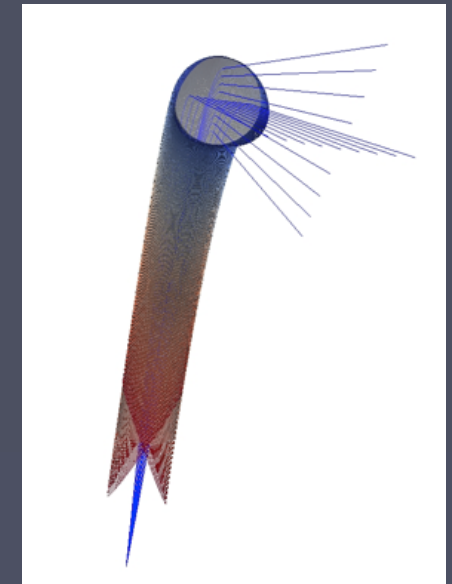
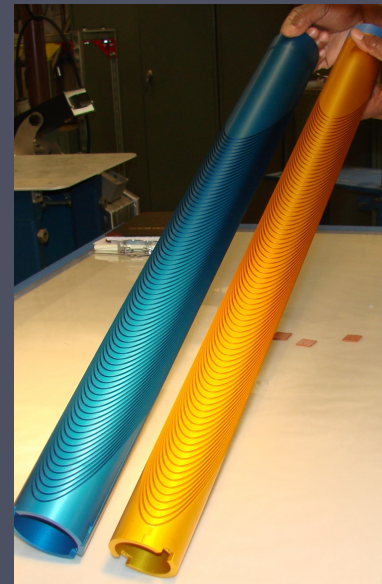
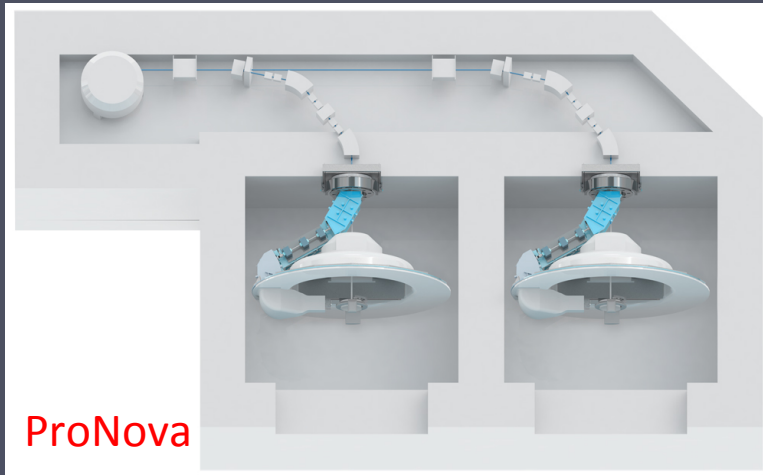
## 1. More compact gantries using superconducting magnets (Y. Iwata)



## 2. Faster energy scanning



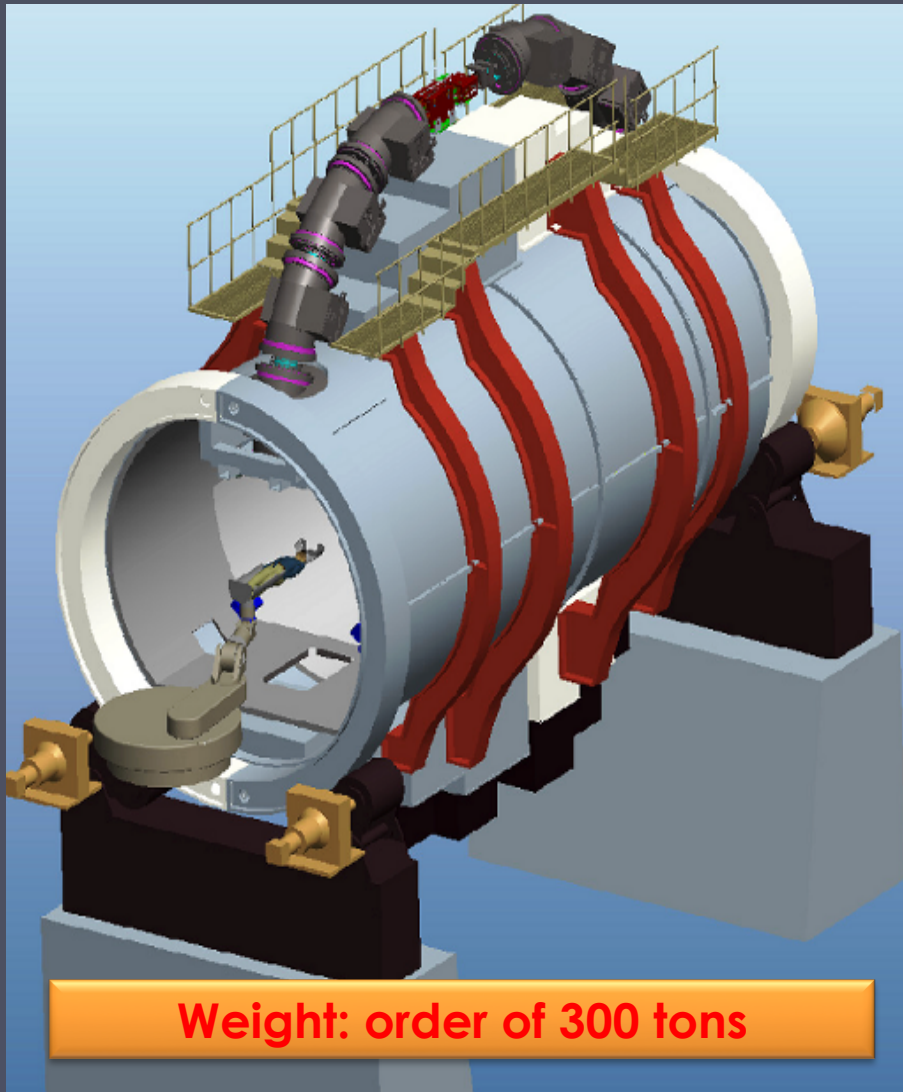
## Superconducting CCT magnets – Caspi/LBL



# Superconducting Magnets

- Attraction
  - Superconducting magnets can achieve many times the magnetic field strength compared with normal conducting magnets
    - *more compact lighter systems*
- Some major challenges such as
  - Rotatable cryogenic systems
  - Rapid field changes for scanning depth

# Superconducting rotating-gantry (NIRS/TOSHIBA)



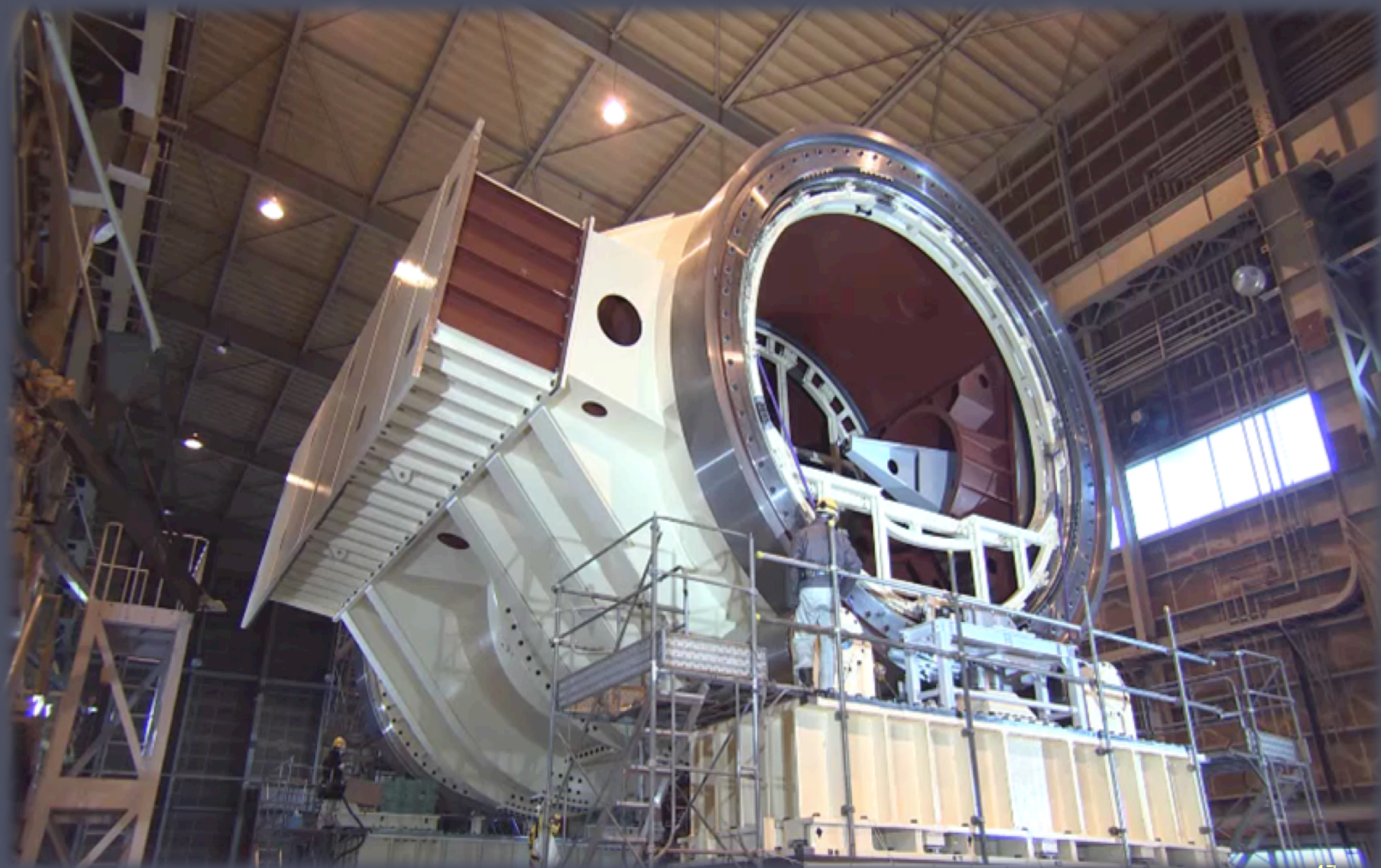
**Weight: order of 300 tons**

## **Use of superconducting (SC) magnets**

Ion kind :  $^{12}\text{C}$   
Irradiation method: 3D Scanning  
Beam energy : 430 MeV/n  
Maximum range : 30 cm in water  
Scan size :  $200 \times 200 \text{ mm}^2$   
Beam orbit radius : 5.45 m  
Length : 13 m

**The size and weight are considerably reduced**

# Rotation tests at the Toshiba factory



# Summary (NIRS/TOSHIBA)

## ■ Superconducting rotating-gantry

- World's first superconducting gantry
- Compact (~proton gantries)

## ■ Future plan

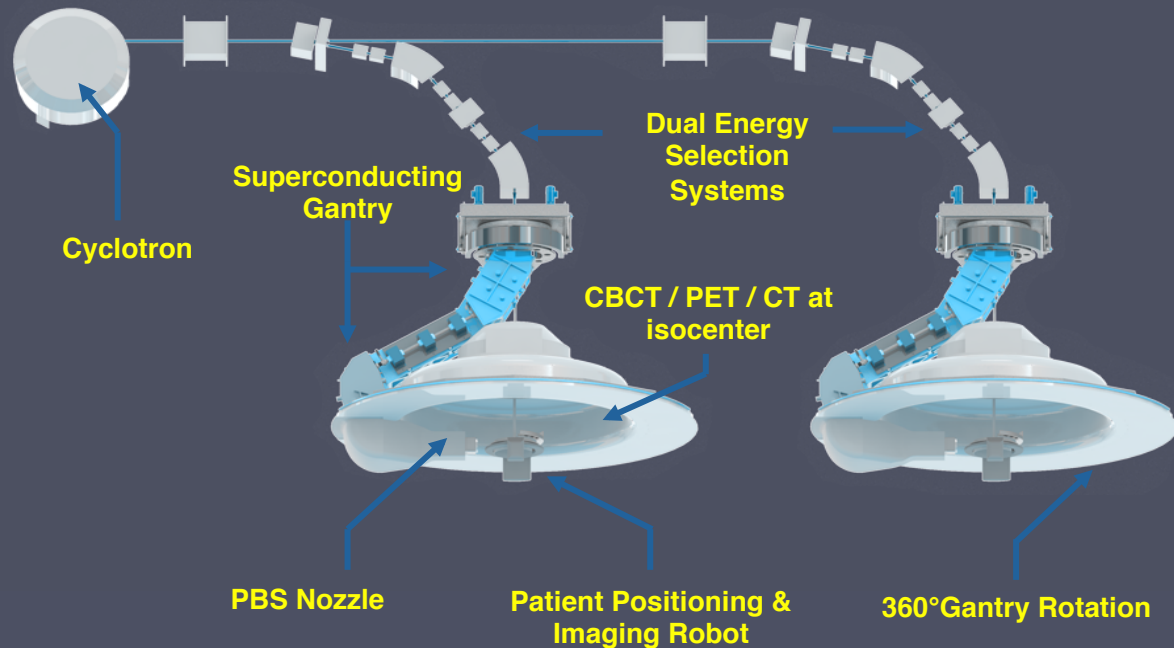
- Construction will complete by this summer
- Beam commissioning will be made in this autumn
- Treatment using the gantry (~March, 2016)





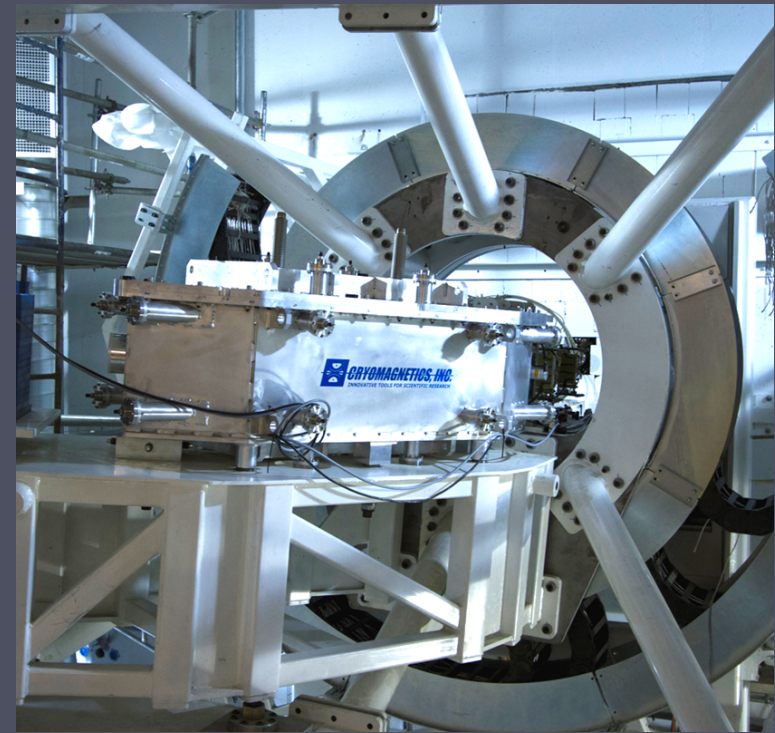
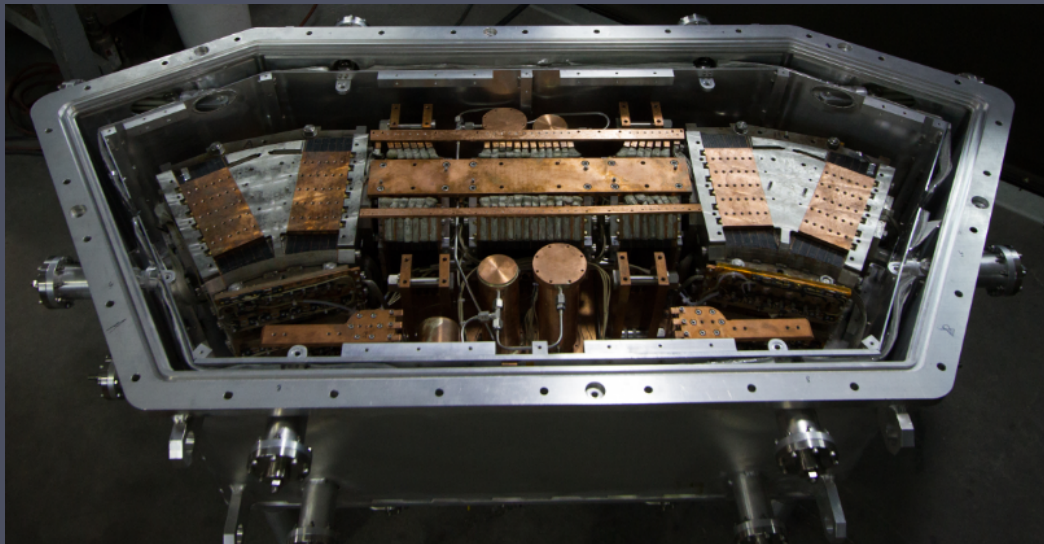
# PRONOVA SC360 SUPERCONDUCTING GANTRY

- 4T Achromatic 60 and 150 deg bends
- Lightweight and compact design allows:
  - 360 rotation in compact vault
  - Rectangular treatment room
  - Cantilever nozzle – open isocenter
  - Space for full 360 dual energy CBCT at isocenter
  - Low operating power



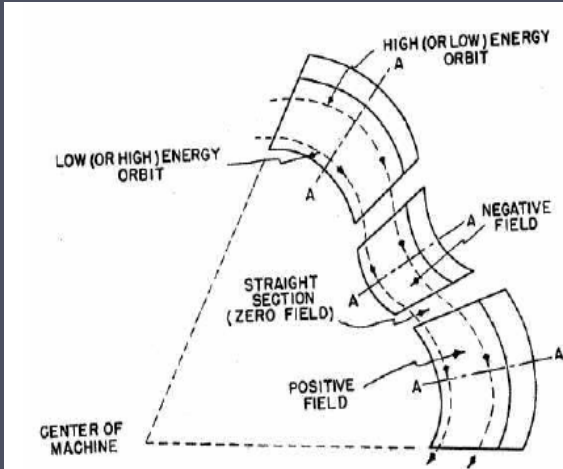
# ProNova Superconducting Achromat

- Achromat status
  - SC achromat US Patent issued
  - Exceeds ramp rate, full field, and rotational test requirements
  - Mounted and tested at full field on gantry
  - In production for early 2016 shipments

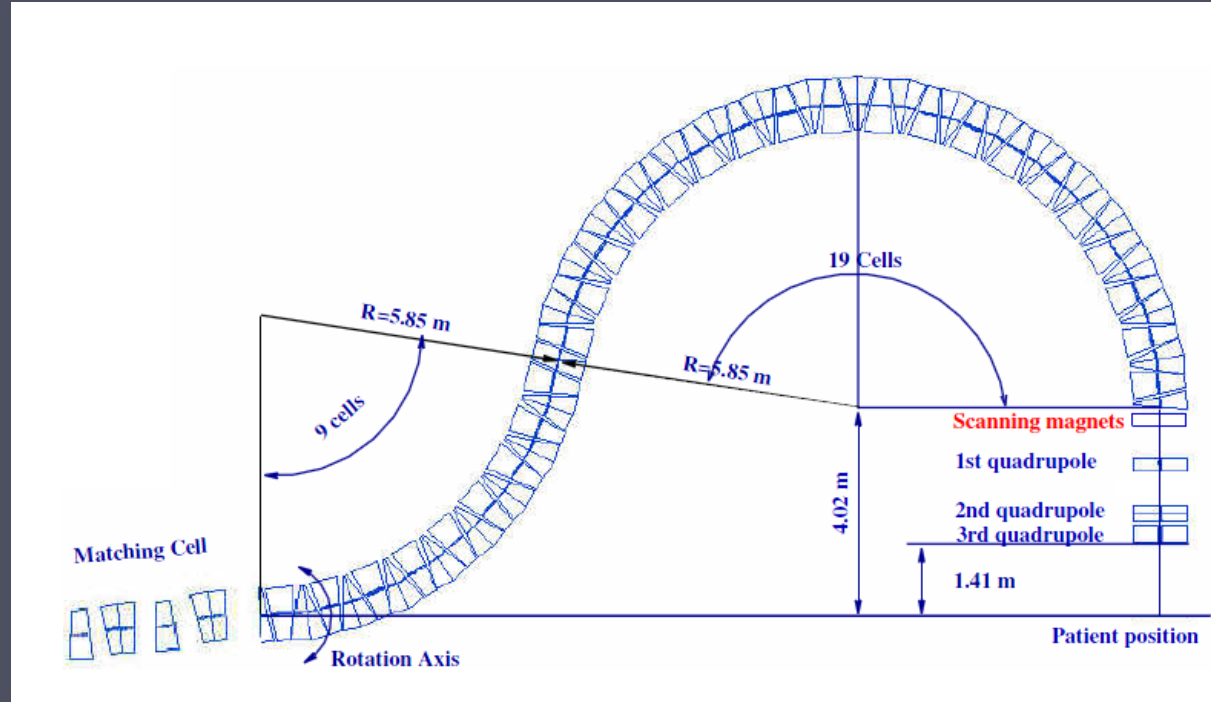


**Larger momentum acceptance - Achromat allows to scan the beam energy over some range without changing the magnet field**

# Fixed Field Alternating Gradient Gantry



Dejan Trbojevic, Workshop on Hadron Beam Therapy of Cancer, Erice 2009



## Fixed Field Alternating Gradient Design

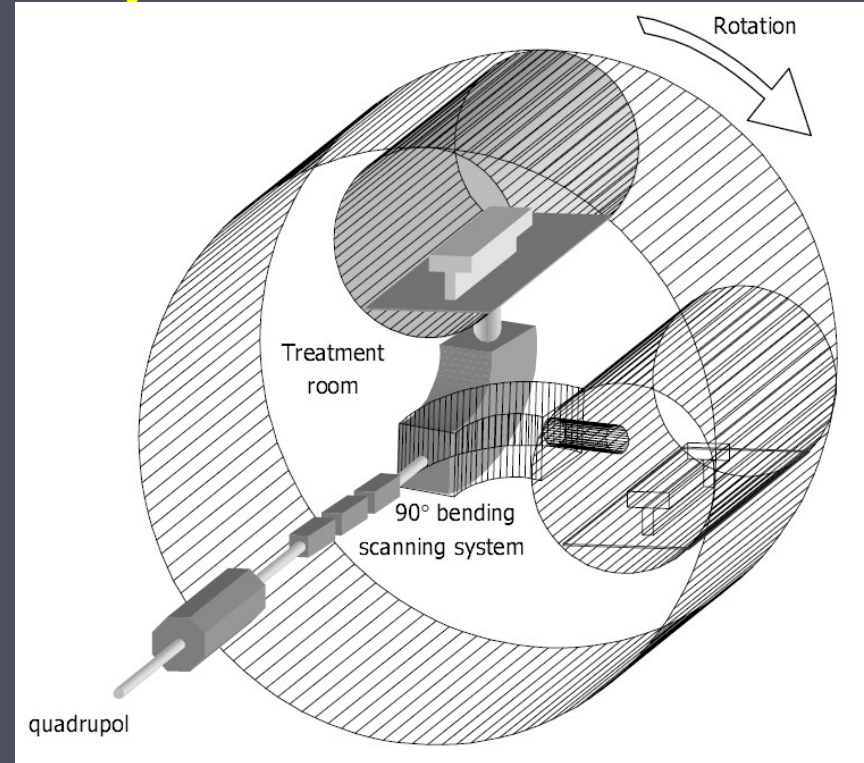
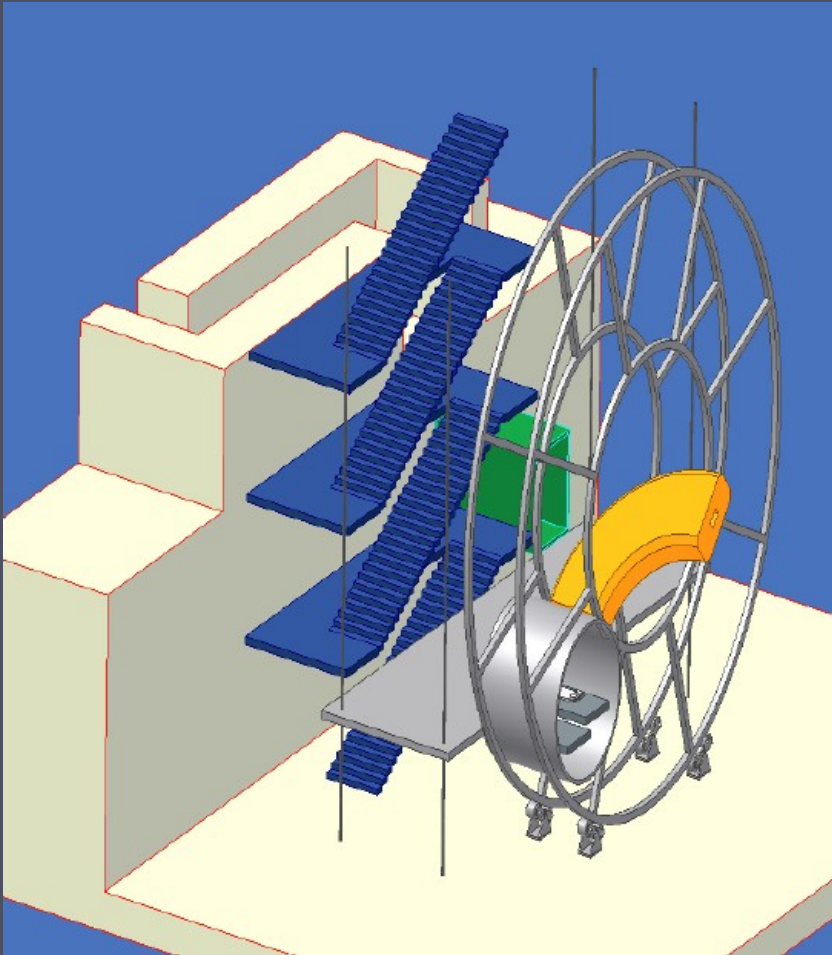
- Small aperture high gradient dipoles

# The potential for very fast depth scanning

## A Potential Major Advantage

- Large Energy/Momentum Acceptance
  - May not need to change field while scanning depth
  - Potential to enable very fast depth scanning

# Mobile Isocenter – The Riesenrad Gantry



The main rotating structure is the room with the patient (lighter than the 600t of HIT).

# Summary

- Gantry are essential for optimizing PT
- Performance of existing gantries is impressive
- Gantry development can have significant impact on the performance and cost of the facility

**THANK YOU**

