

⁴Medical Radiation Sciences, Department of Immunology, Genetics and Pathology, Uppsala University, Uppsala, Sweden.

BACKGROUND: Proton therapy of superficial targets often require the addition of a range shifter (RS) to bring the proton

energies in the necessary range, at the cost of neutron production. These neutrons are a concern due to their high

radiobiological effectiveness and the risk for second cancer induction.

<u>PURPOSE</u>: To evaluate the neutron dose increase due to RS in patients treated with proton beam scanning (PBS).

MATERIAL AND METHODS

BRAIN CASE

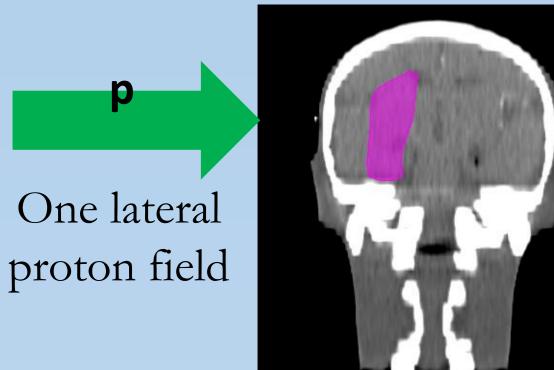


Fig. 1. Shallow target (4 cm depth, 84.4 cm³ volume) in brain.

- Planned by EclipseTM.
- Prescription: 54.5 Gy.
- Energy layers:
 - Plan without RS (NRS): 21
 - between 60 and 97 MeV.
 - Plan with RS (RS): 14 between
 - 93 and 124 MeV.
- RS: 3.1 cm WET Lexan

- NEUTRON EVALUATION
- Neutron dose equivalent (H_n) from full Monte Carlo simulation (using
 - MCNP 6.2 code).
 - Actual spot distribution.
 - Simulation layer by layer.
 - Production in patient and RS
 - assessed separately.



Fig. 2. MC voxel phantom created from CT images using the Schneider method (1).



RESULTS

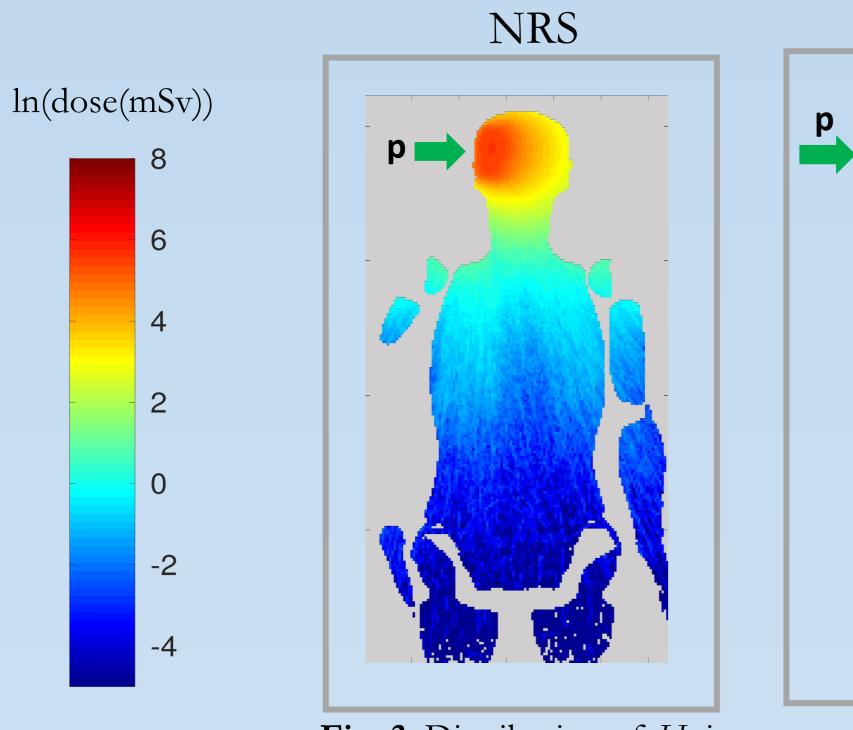


Fig. 3. Distribution of H_n in the NRS plan.

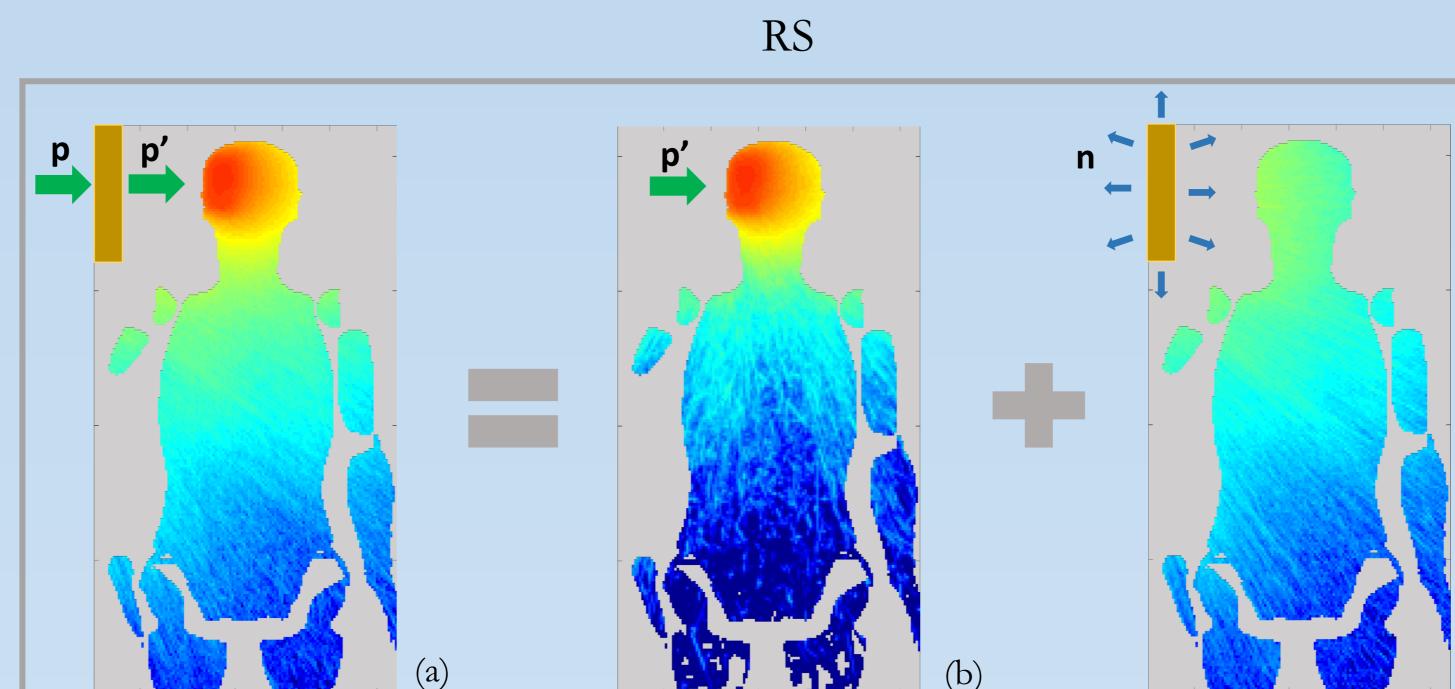
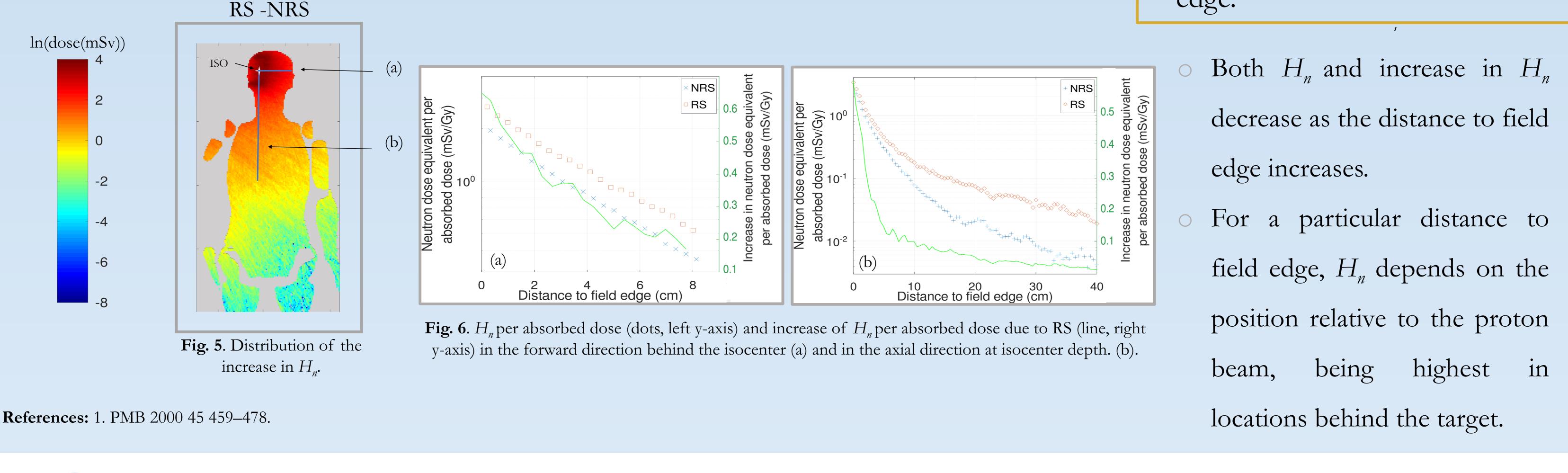


Fig. 4. Distribution of H_n in the RS plan: Total (a), due to neutrons from protons (b), due to neutrons from RS (c). (Same colour scale of figure 3).

The contribution of RS to neutron production in PBS is low.
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For the characteristics of the target (volume and depth) and the RS (material and thickness), the maximum increase due to RS is around 1 mSv/Gy in the field edge.



SINFONIA

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Contact: maite.romero@skandion.se