

Semester – IV: Theory MPH 551: Physics of Radiotherapy (Radiotherapy – I) Teaching hours: Each Unit – 12 h

Objectives:

Students will be familiarised basics, working principlesand operating protocols of instruments used in radiation diagnosis and therapy; also to design, install and calibrate all the instruments including dose monitoring instruments. Acquaint students with the science of phantom and their application in dosimetric studies.

Outcomes:

- Students will acquaint basics and working principles of Low energy and high energy Xray units, teletherapy cobalt units, medical electron accelerator and medical proton accelerator and associated instruments and components.
- The students will acquire knowledge in source designing, beam collimation, calibration of diagnosis and therapy units, simulation, dose monitoring &dose protocols related to the operation of therapy units.
- Students acquaint with the various phantoms and their application in dosimetry and dosimetric data generation as well as on various scatter factors.
- The students will understand techniques and devices for beam modification and shaping such as wedge fitter, shielding block etc. for appropriate dose delivery as well as better patient dosimetry.
- □ The students will know the method of electron energy selection, depth dose characterization, homogeneity correction, field shaping etc. and also carrying out the quality assurance in electron therapy beam.

Unit I: Beam Therapy Generators

Description of low kV therapy X-ray Units -Grenz ray therapy-contact therapy, superficial therapy, ortho-voltage, deep therapy– spectral distribution of kV X-rays and effect of filtration – thoraeus filter – output calibration procedure. Mega voltage therapy units: Construction and working of telecobalt units - source design – beam collimation and penumbra – trimmers and breast cones -Beam shutter mechanisms:-Mercury shutter – pneumatic pressure system – Isocentric gantry - Design and working of medical electron linear accelerators – beam collimation – asymmetric collimator – multileaf collimator – dose

monitoring – electron contamination. Basic aspects of proton accelerators - Output calibration of Cobalt-60 gamma rays, high energy x-rays, electron and proton beams using IAEA TRS 398, AAPM TG 51 and other dosimetry protocols. Relative merits and demerits of kV x-rays, gamma rays, MV x-rays and electron beams. Radiotherapy simulator and its applications.CT and virtual simulations.

Unit II: Central axis Dosimetry parameters and Beam Modifying Devices

Phantoms - Tissue equivalent phantoms - Percentage depth doses (PDD), Tissue air ratio (TAR), Back scatter factor/Peak scatter factor (BSF/PSF)– Tissue phantom ratio (TPR) – Tissue maximum ratio (TMR) – Collimator scatter factor, Phantom scatter factor and total scatter factors. Relationship between TAR and PDD and its applications – relationship between TMR and PDD and its applications. SAR, SMR, off axis ratio and Field factor. Build-up region and surface dose. Use of Radiation field analyzer (RFA) in generation of Dosimetric data.

Beam modifying and shaping devices: Wedge filters – design of wedge filters –wedge isodose angle –wedge transmission factor – wedge system- universal, motorized and dynamic wedges –wedge field techniques - shielding blocks - custom blocking – independent jaws — Tissue compensation – Bolus, design of compensators - skin dose and factors influencing – methods of field separation – field matching.

Unit III: Beamtherapy techniques and patient dosimetry

Treatment planning in beamtherapy –SSD and SAD set ups – two and three dimensional localization techniques – contouring – simulation of treatment techniques – field arrangements – single, parallel opposed and multiple fields – corrections for tissue in homogeneity, correction for contour irregularities and beam obliquity –- integral dose. Arc/rotation therapy and Clarkson technique for irregular fields – mantle and inverted Y fields.Conventional radiotherapy.Treatment time and Monitor unit calculations.

Unit IV: Clinical Electron Beams

Energy specification – electron energy selection for patient treatment – depth dose characteristics (Ds, Dx, R100, R90, Rp, etc.) – beam flatness and symmetry – penumbra – isodose plots – monitor unit calculations – output factor formalisms – effect of air gap and

obliquity on beam dosimetry – effective SSD – X-ray contamination – tissue in homogeneities correction – use of bolus and absorbers – adjacent fields separation – field shaping.

Unit V: Quality Assurance of Beam Therapy

Relative merits of electron, neutron, X-ray and gamma ray beams – Neutron capture therapy heavy ion therapy. Quality assurance in radiation therapy: precision and accuracy in clinical dosimetry – quality assurance protocols for telecobalt, Medical Linear Accelerator and radiotherapy simulators – IEC requirements – acceptance, commissioning and quality control of telecobalt. Portal and in-vivo dosimetry.Electronic portal imaging devices (EPID).

Reference Books:

- 1. H.E. Johns and Cunningham, The Physics of radiology
- 2. FaizM.Khan, Roger A. Potish, treatment Planning in radiation Oncology
- 3. Walter and Miller's Textbook of Radiotherapy by C.K.Bomford, I.H.kunkler
- 4. F.A.Attix -Radiation Dosimetry Vol IIII,
- 5. Academic press New York, 1985.
- 6. F.M. Khan Physics of Radiation Therapy 2010 Fourth edition.
- 7. H.E.Jones, J.R.Cunnigham, -The Physics of Radiology Charles C.Thomas, NY, 1980.
- 8. W.R.Hendee, -Medical Radiation Physicsl, Year Book Medical Publishers Inc London, 1981.
- 9. R.F.Mould, -Radiotherapy Treatment Planning Medical Physics Hand book series No.7, Adam Hilger Ltd, Bristol, 1981.
- 10. S.C.Klevenhagen –Physics of Electron Beam Therapy Medical Physics Hand Book Series No.6 Adam Hilger Ltd, Bristol, 1981.
- 11. J.R.Greening –Fundamentals of Radiation Dosimetryl, Medical Physics Hand Book, ADAM Hildre, 1981.

