

# FROM ACCELERATORS TO CANCER THERAPY

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ESOF2004-Stockholm - 27.8.04 - U. Amaldi



# The starting point

1895 discovery of X rays

> Wilhelm Conrad Röntgen









J.J. Thompson

1897 "discovery" of the electron





### Ernest Lawrence invents the cyclotron 1930

# M. S. Livingston and E. Lawrence with the 25 inches cyclotron





# 1945: E. McMillan and V.J.Veksler discover the principle of phase stability





1959: Veksler visits McMilan at Berkeley

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# The synchrotron

### 1 GeV electron synchrotron Frascati - INFN - 1959





### The electron linac

#### Sigmur Varian

### William W. Hansen



**Russell Varian** 

1939 Invention of the klystron



1947 first linac for electrons 4.5 MeV and 3 GHz



# All the CERN strong-focusing synchrotrons







In 1952 the "strong-focusing" method invented at BNL (USA) was chosen for the CERN PS



# We advance on the highway with accelerators of higher and higher and higher energies



# Accelerators running in the world

CATEGORY OF ACCELERATORS	NUMBER IN USE (*)
High Energy acc. (E >1GeV)	~120
Synchrotron radiation sources	<u>&gt;100</u>
Medical radioisotope production	<u>~200</u>
Radiotherapy accelerators	<u>&gt; 7500</u> >9000
Research acc. included biomedical research	~1000
Acc. for industrial processing and research	~1500
Ion implanters, surface modification	>7000
TOTAL	<u>&gt; 17500</u>

(\*) W. Maciszewski and W. Scharf: Int. J. of Radiation Oncology, 2004



# Synchrotron Light Sources: X-rays in science and industry

### Main applications in

Physics Chemistry

### crystallography materials analysis fast chemical reactions

Biology Medicine structural biology biological imaging medical imaging microbeam radiotherapy

### Enginering

### litography micromachining





# X-rays in radiotherapy: linacs

Radiotherapists only use one type of accelerator:

the electron linac



3 GHz

6-20 MeV

# "Hadrontherapy" uses beams of hadrons





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To control radioresistant tumours carbon ions 4800 MeV

> protons 200 MeV





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Macroscopic advantages of hadrontherapy

# **Protons and ions are more precise than X-rays**

### Tumour between the eyes

### 9 X –ray beams



### 1 proton beam



### Carbon ions are even better



#### Eye and Orbit

- Cheroidal Melanoma
- Retinoblastoma
- Choroidal Metastases
- Orbical Rhabdomyosarcoma
- · Lacrimal Gland Carcinoma
- Choroidal Hernangiomax

#### Abdomen

Paraspinal Tumors
 Soft Texus
 Sarcomas,
 Low Grade
 Chondrosarcord,
 Chordomas

#### **Central Nervous Syste**

- Adult Low Grade Gliomas
- Pediatric Gliomas
- Acoustic Neuroma Recurrent or Unresectable
- Pituitary Adenoma Recurrent or Unresectable
- Meningioma Recurrent or Unresoctable
- Craniopharyngioma.
- Chordomas and Low Grade Chondrosarcoma Clivus and Cervical Spine
- Brain Metastases
- Optic Glioma
- Arteriovenesus Mallormations

#### Head and Neck Tumors

- \* Locally Advanced Oropharyna
- \* Locally Advanced Nasopharanx
- Soft Tinue Sarcoma
   Recurrent or Unresectable
- Misc. Unresoccable or Recurrent
   Carcinonses

#### Chest

- Non Small Cell Lung Carcinoma Early Stage—Medically Inoperable
   Paraspinal Tumora
  - Soft Tissue Sarcomas, Low Grade Chondrosarcomas, Chordomas

#### Pelvis

- \* Early Stage Prostate Carcinoma
- Locally Advanced Prostate Carcinoma
- Locally Advanced Cervix Carcinoma
- Sacral Overdoma
- \* Recurrent or Unresectable
  - Rectal Carcinoma
- Recurrent or Unresectable
   Pelvic Masses

# The sites

# Protontherapy: 35 000 patients

### Cost about 20000 Euro 2-3 X-rays

If cost would be the same as for X-rays 90% of the treatments would be with protons !





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### Radiobiological efficiency of carbon ions





Numbers of potential patients

X-ray therapy every 10 million inhabitants: 20'000 pts/year

**Protontherapy** 

### 12% of X-ray patients = 2'400 pts/year

Therapy with Carbon ions for radio-resistant tumour

3% of X-ray patients =

600 pts/year

TOTAL about 3'000 pts/year

every 10 M



### Japan: 4 proton Centres and 2 carbon ion centres



# 1993 - GSI pilot project

### G. Kraft

200 patients treated with carbon ions under J. Debus (Heidelberg)











# HIT – University of Heidelberg

### Financed with 72 MEuro:

State:	<mark>3</mark> 6
loan:	36



G

SI:	H. Eickhoff
	Th. Haberer

Project started in 2001 First patient: end 2006



Projects of the TERA Foundation



TERA is developing a novel technique for diagnostics and protontherapy

The "cyclinac"



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# PIMMS: 1996 - 2000

Proton Ion Medical Machine Study CERN – TERA – Med-Austron Project leader: P.Bryant PAC Chairman: G. Brianti

PIMMS/TERA
One linac à la GSI inside the ring
Multiturn injection
Short beam lines



### CNAO = Centro Nazionale di Adroterapia

CNAO Foundation was created by the Italian Government in 2001 to realize CNAO: 4 Hospitals in Milan, 1 Hospital in Pavia and TERA INFN is Institutional Participant

In September 2003 TERA has completed and passed to CNAO the design of the high-tech part of CNAO and 25 people



#### President: E. Borloni

Med. Dir.: R. Orecchia Tech. Dir: S. Rossi



### The underground level of CNAO





### CNAO on the Pavia site Project: TERA



Project: Calvi – TEKNE

**Magnets ordered** 

August 2004:

17 companies applied for the civil enginerering construction

First patient: end of 2007





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# Other European projects: MedAustron in Wiener Neustadt





### ENLIGHT and the European projects European Network for LIGHt-ion Therapy

- GSI project for the University of Heidelberg Clinics
- TERA project for CNAO in Pavia
- Med-Austron for Wiener Neustadt partner of PIMMS since 1996
- ETOILE in Lyon

started in 1997 by TERA – Preliminary design by IN2P3 and CEA

[ASCLEPIOS in Caen in 2004]

 Baltic Centre in Stockholm Preliminary design by TERA: NIM B184 (2001) 569



# TERA new instrument for hadrontherapy: the cyclinac



**IBA Cyclone 30** produces radioisotopes for diagnostics and therapy





### 2007 - 110 years later



### **Research in fundamental physics**





Prof. Dr. Ugo Amaldi Department of Physics University of Milano Bicocca Piazza della Scienza, 3	Ugo Amaldi studied physics at Rome University where he finished his post-graduate studies in 1960. At the Rome "Istituto di Sanita" he worked in radiation physics and introduced two new experimental methods: Electron Momentum Spectroscopy (in atomic physics) and (e, e'p) reactions (in nuclear physics). In 1973 Amaldi moved to CERN. Since then his research activities are woven around the physics of elementary particles At the ISR he co-discovered the proton-proton rising cross-section. In 1975 he founded with K. Winter the CHARM Collaboration, which performed many fundamental experiments on neutrino scattering. Since 1980 to 1993 he served as spokesman for the DELPHI Collaboration at the electron-positron storage ring LEP. In 1991, using the first LEP data
Email	he gave a widely recognized contribution to the understanding of the unification of the electroweak and strong forces. The hadron
Ugo.Amaldi@cern.ch	cancer therapy project of the TERA Foundation at Novara, founded in 1992, is Amaldi's most recent initiative At present he is Professor
Home page: http://www.tera.it/ise.cgi?lang=2	of Medical Physics at the University of Milano Bicocca. About one quarter of all the Italian high-school pupils study physics on his text books.

#### **Abstract:**

The discovery of quarks as components of all the strongly interacting particles (the hadrons) and the construction of the Standard Model would not have been possible without the development of particle accelerators. These accelerators, invented and improved with the aim of understanding the inner working of the subatomic world, have since their beginnings - i.e. since the discovery of X rays - also been used to cure cancer. About half of the accelerators running in the world are installed in hospitals to treat, for every 10 million people, about 20'000 patients per year. The story of how X-ray tubes, cyclotrons, synchrotrons and linear accelerators have become essential instruments in cancer care proves that also apparently exotic technologies invented for basic research have practical applications. The last frontier – on which Europe is particularly active - is the use of beams of protons and carbon ions. This kind of radiotherapy was proposed in 1946 by Bob Wilson who later became the founder and first director of Fermilab. Not by chance this approach is called "hadrontherapy".

### EuroScience Open Forum 2004

Highlighting Science, Technology & Innovation in Europe



Japan patients with tumours that resist to treatments with both X-rays and proton beams are irradiated with Carbon ions in two centres in the Provinces of Chiba and Hyogo. In Europe two centres for Carbon ion therapy are under construction: HICAT in Heidelberg (Germany) and CNAO in Pavia (Italy). They have been designed by GSI (Darmstadt) and TERA Foundation (Novara) respectively. The two centres feature the same "injector", that pre-accelerates the Carbon ions. On July 15, 2004, an agreement has been signed between GSI and the CNAO Foundation - (responsible for the realisation of the Italian centre) - following which GSI will realise for CNAO an injector identical to the one under construction for Heidelberg.

**Recent publications:** 

http://www.tera.it/ise.cgi?oid=268

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