



CERN from particle physics to healthcare



Manjit Dosanjh Advisor to DG for Life Sciences & International Organisations



WHO-Reproductive Health

6.02.2008

Seeking answers to questions about the Universe Advancing the frontiers of technology Training the scientists of tomorrow Bringing nations together through science

CERN in Numbers

- 2600 staff
- 570 Fellows and Associates
- 7000 users

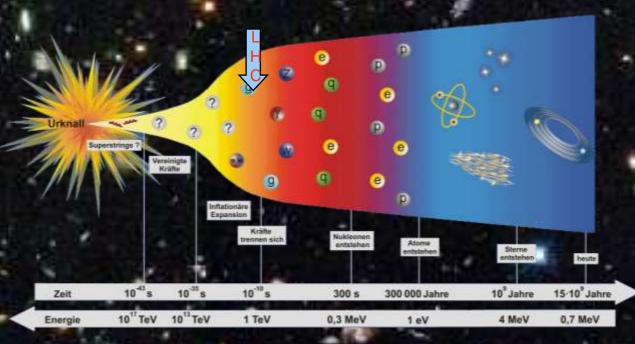


Member States: Austria, Belgium, Bulgaria, the Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Italy, Netherlands, Norway, Poland, Portugal, Slovakia, Spain, Sweden, Switzerland and the United Kingdom.

Observers: India, Israel, Japan, the Russian Federation, the United States of America, Turkey, the European Commission and Unesco



Our view of the Universe.







Research

Technology

Collaborating

Training

X-Rays, the fastest technology transfer example

۲



- On November 8, 1895 Röntgen discovered X-Rays
- On November 22, 1895 he takes the first image of his wife's hand



Röntgen received the first Nobel prize in physics in 1901

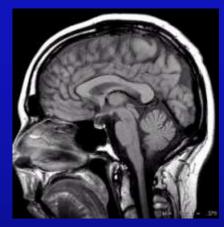


MRI, Magnetic Resonance Imaging



Felix Bloch Physicist Stanford

The Nobel Prize in Physics 1952



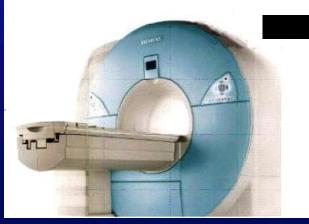


Edward M. Purcell Physicist Harvard

The Nobel Prize in Physiology or Medicine 2003



Sir Peter Mansfield Physicist Nottingham





Lauterbur Chemist Uni.



WHO-Reproductive Health

Key Area

- Imaging detectors for diagnostics
- Accelerators for hadron therapy
- Isotope production
- GRID applications for Health





Bio-medical applications of CERN technologies

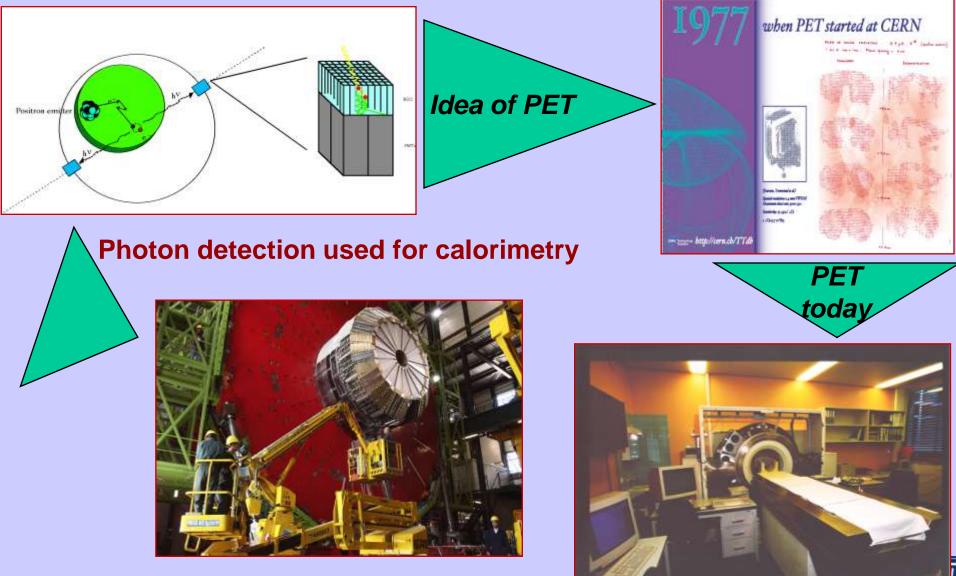
- •Some properties of HEP apparatus
- •Objectives: Particle Physicist
- •Highest possible performance
- Lab environment/physicist operated
- Possible complex maintenance
- Possible complex operation
- Single unit production
- Non commercial
- Industry as a manufacturer only
- Networked devices, specialist online

- Some properties of biomedical apparatus
- Objectives: Medical practioners
- Robustness
- Non-specialist operated
- Minimal maintenance
- Simple to operate
- Small series production
- Commercial distribution
- Industry as a partner

•



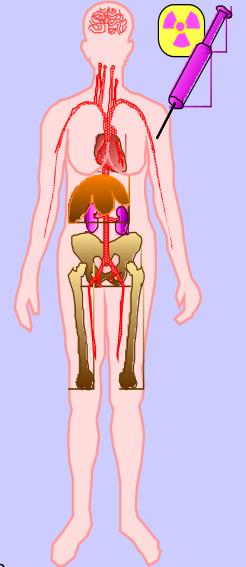
Physics to medicine



6.02.2008

CMS calorimeter Health

Inject Patient with Radioactive Drug

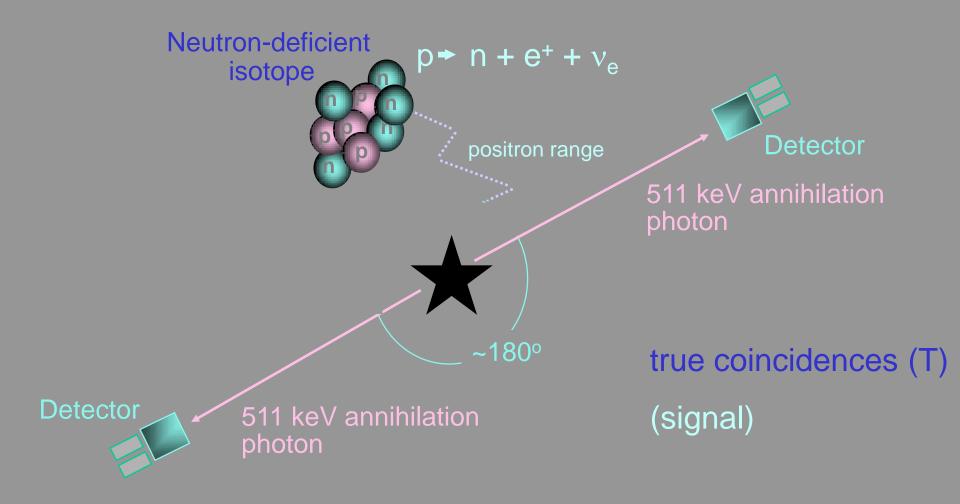


- Drug is labeled with positron (β⁺) emitting radionuclide.
- Drug localizes in patient according to metabolic properties of that drug.
- Trace (pico-molar) quantities of drug are sufficient.
- Radiation dose fairly small (<1 rem).

Drug Distributes in Body



PET: true events





Similar challenges for PET and HEP detectors

- New scintillating crystals and detection materials
- Compact photo-detectors
- Highly integrated and low noise electronics
- High level of parallelism and event filtering algorithms in DAQ
- Modern and modular simulation software using worldwide recognized standards (GATE)









Crystal Clear Collaboration

-New scintillators :

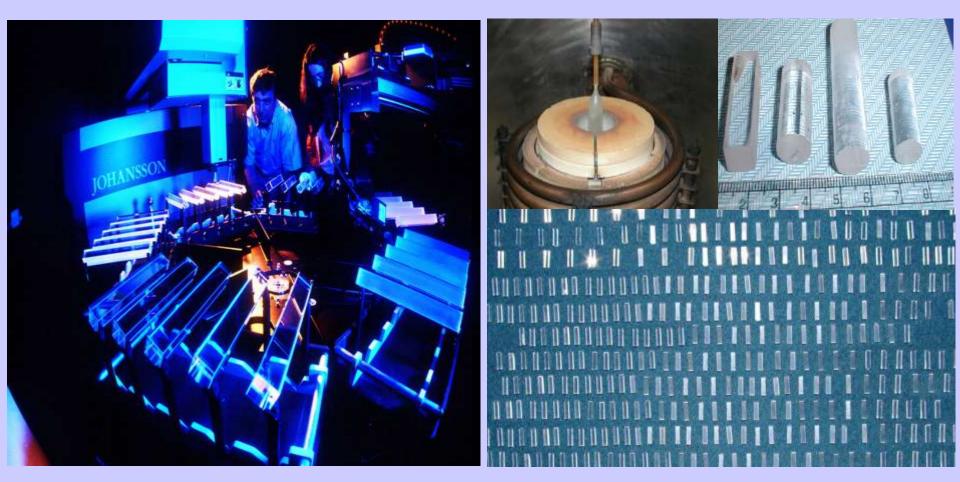
- LuAP, phoswich LuAP-LSO (CERN patent)
- other crystals
- new photodetectors (Avalanche PhotoDiodes)
- -new low noise front end electronics
- -new intelligent DAQ systems with pipeline and parallelized architecture
- -better simulation GEANT 4
- -- better reconstruction algorithms



1- Crystals

CMS PbWO₄ production

Crystal Clear LuAP production





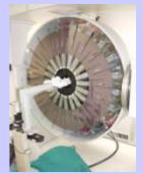
The ClearPET LYSO/LuYAP Phoswich Scanner A high Performance Small Animal PET System Higher ef





The Design

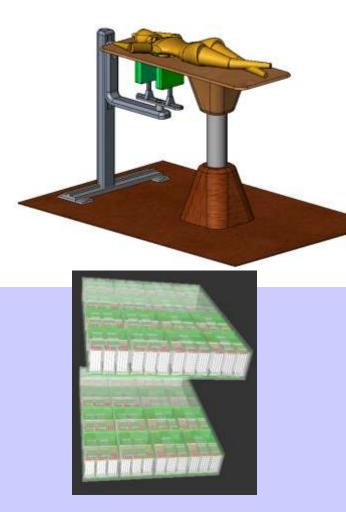
- •20 detector cassettes on the ring
- each cassette has 4 PM in line
- •each PM has 64 photocathodes
- each photocathode reads 1 phoswich
- •each phoswich has 2 crystals LYSO and LuYAP
- •each crystal is 2 x 2 x 10mm³
- •open gantry diameter adjustable 120 240mm
- •rotation 360 degree
- T_{cosine} resolution 2 ns FWHN Spatial resolution 1.5 mm at centre Peak sensitivity >4%





Positron Emission Mammography CRYSTAL CLEAR Collaboration

Model of the PEM detector



Dedicated breast PET detector allowing high sensitivity to the small tumor detection

- Spatial resolution 1-2 mm
- High counting sensitivity
- Short PET exams
- Compatible X-Ray mammography
- Compatible stereotactic biopsy

Technical characteristics:

- 6000 crystals 2x2x20 mm
- Avalanche Photodiodes (APD)
- Low noise electronics
- High rate data acquisition
- Spatial resolution 1-2 mm
- Breast and axila region



What is Medipix?

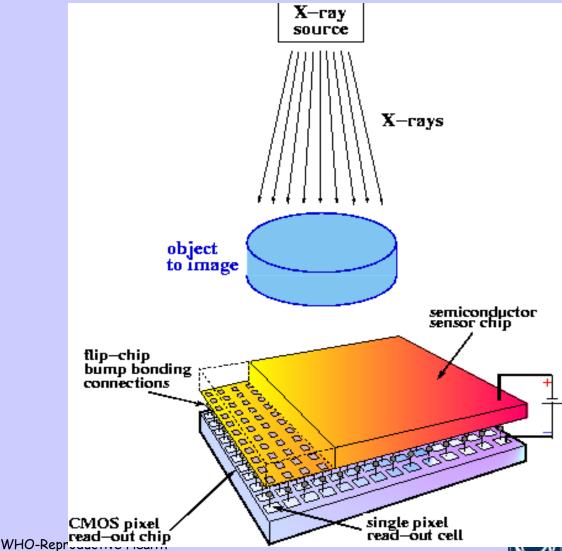
The Medipix is an electronic chip similar to the electronic imaging chip in a digital camera. One difference is that the Medipix chip is sensitive to xrays instead of visible light. What is unique about the Medipix chip is that it can create the first true colour images with x-rays. Thus, it permits us to move from black and white x-ray images to full colour xray images. The chip also can be read out very rapidly. This allows the use the chip for colour x-ray digital movies or for fast colour x-ray CT scans



MEDIPIX: Allows counting of single photons in contrast to traditional charge integrating devices like film or CCD

High Energy Physics
original development:
Particle track detectors

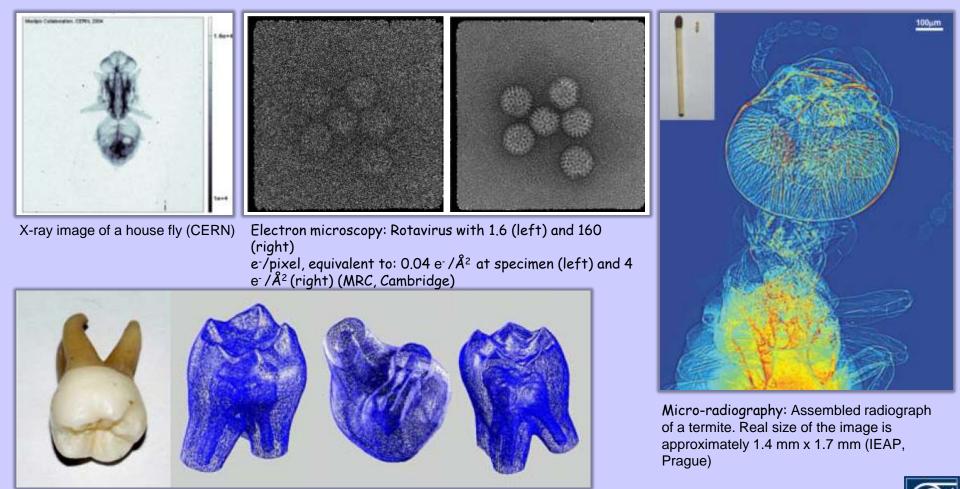
Main properties:
Fully digital device
Very high space resolution
Very fast photon counting
Good conversion efficiency of
low energy X-rays





Applications using Medipix2

Applications: Adaptative optics, X-ray diffraction, Micro-radiography, Neutron imaging, Computed tomography, Autoradiography, Gamma imaging, Electron microscopy, energy weighting, In vivo optical and radionuclide imaging, Micro-patterned gas detectors, Mammography...

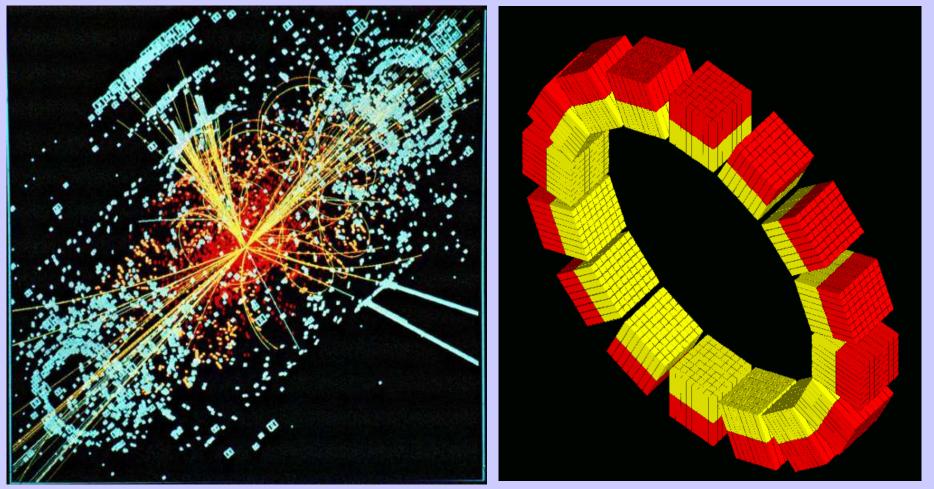


6.02.2008 Photograph and tomographic 3D reconstructions of a tooth (IEAP Arague)

http://www.cern.ch/MEDI

5- Simulation

Higgs event at LHC (CMS) with Geant4 ClearPET with GATE: Geant4 Application for Tomographic Emission

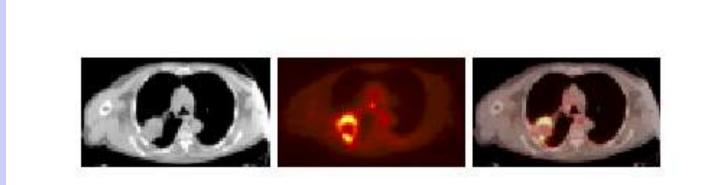




WHO-Reproductive Health

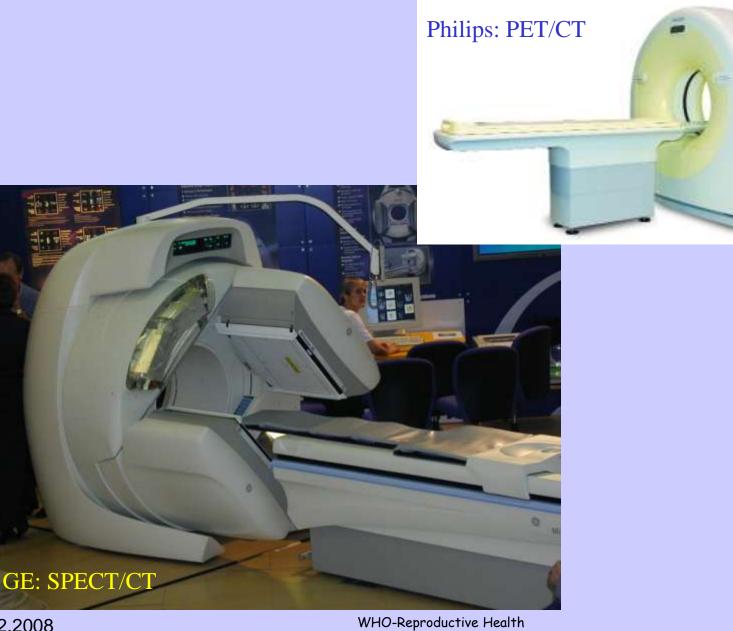
Multi-modality imaging

Primary lung cancer imaged with the SMART scanner. A large lung tumor, which appears on CT as a uniformly attenuating hypodense mass, has a rim of FDG activity and a necrotic center revealed by PET.













Use of Accelerators for cancer treatment





Ideal cancer treatment would be to eliminate all tumour cells without affecting any normal cells

<u>Physics</u> : 100% of the dose on target 0% of the dose in surrounding healthy tissues or critical organs

<u>Biology</u> : differential effect kill 100% of cancer cells "protect" normal cells

Radiation Therapy is non-invasive, has short-term side effects and is used to cure about 50% of all cancers with 5% of the total cancer treatment budget

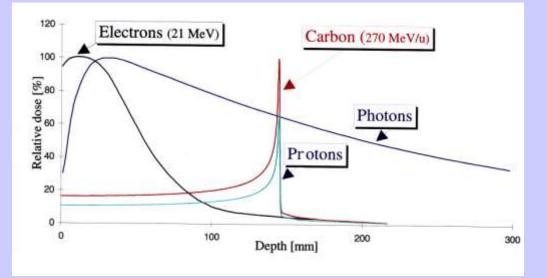


Radiotherapy in the 21st Century

- RT is, nowadays, the least expensive cancer treatment method
- There is no substitute for RT in the near future
- The rate of patients treated with RT will likely increase in the years to come

(Acta Oncol, Suppl:6-7, 1996)

Hadrontherapy vs. radiotherapy



Photons and Electrons

- Physical dose high near surface
- DNA damage easily repaired
- Biological effect lower
- Need presence of oxygen
- Effect not localised

Tumours close to critical organsTumours in children

Radio-resistant tumours

Hadrons

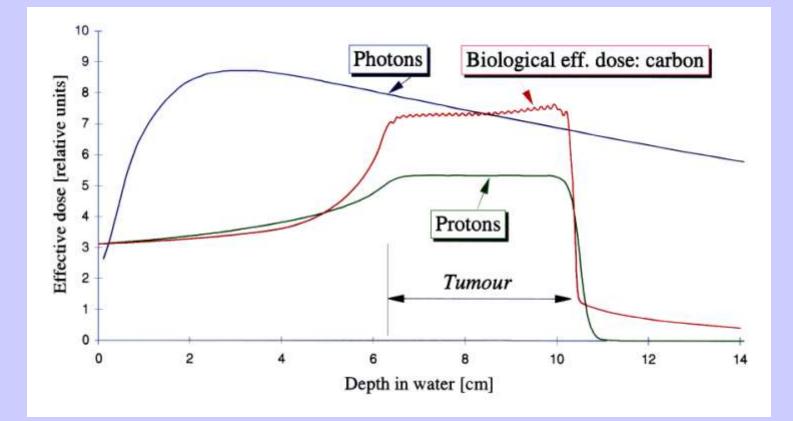
- Dose highest at Bragg Peak
- DNA damage not repaired
- Biological effect high
- Do not need oxygen
- Effect is localised



VS.

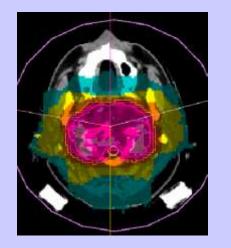
Considerations for ion beam treatment

- ٠
- Deep seated tumour Hypoxic tumour Tumour close to critical organ(s) Tumour in young children

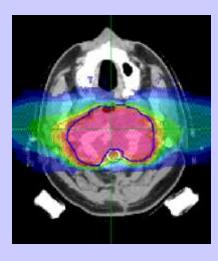




Comparative Treatment Planning: Large Skull Base Chordoma



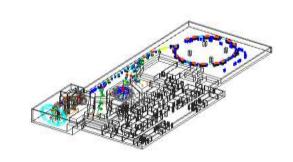
20 - 40
40 - 60
60 - 80
80 - 100
100 - 120



4 photon fields with x-rays 2 fields with carbon ions



The PIMMS Collaboration

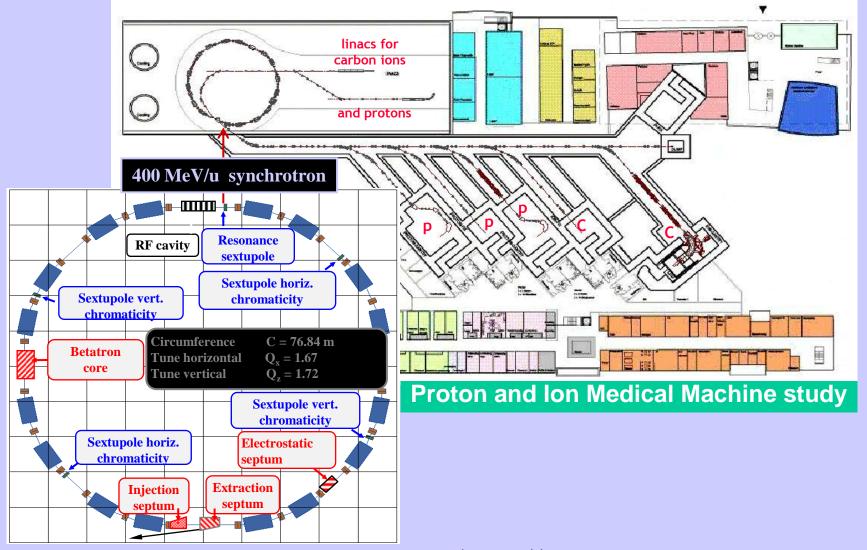


- Collaboration was formed in 1996 following an agreement between Med-AUSTRON (A) and TERA (I)
- CERN agreed to host and support the study in PS-Division
- The study was later joined by ONKOLOGY 2000 (CZ)
- Close contacts were kept with GSI (D)
- Work started in January 1996 and continued for 4 years.
- Final report is now available (CD ROM; CERN Yellow Report)



PIMMS at CERN in 1996 - 2000

CERN–TERA–MedAustron Collaboration for optimized medical synchrotron



6.02.2008

WHO-Reproductive Health

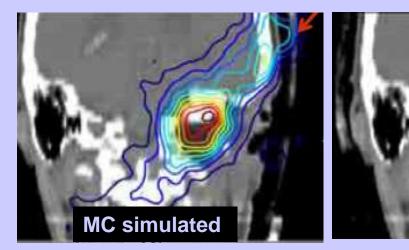


5. In-beam-PET for Quality Assurance of treatments

measured

CHAR

In-beam-PET



On-line determination of the dose delivered First time in 110 years!

Modelling of beta⁺ emitters:

Cross section

Fragmentation cross section

Prompt photon imaging

Advance Monte Carlo codes

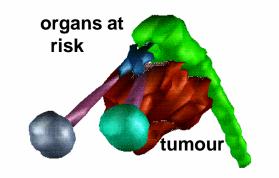
WHO-Reproductive Health

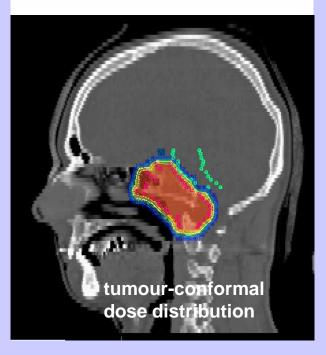


GSI- Darmstadt

Hadrontherapy goals

- Provide the irradiation technology and the detection systems to optimally use the advantageous properties of heavy charged particles in external radiotherapy
- Optimize dose to tumour conformity by beam scanning and adaptation of the delivery to the organ motion
- Treat patients and perform clinical trials using low-LET (p, He) and high-LET (C, O) beams
- Conduct technical, physical and clinical R+D







ENLIGHT: European Network for Light Ion Therapy

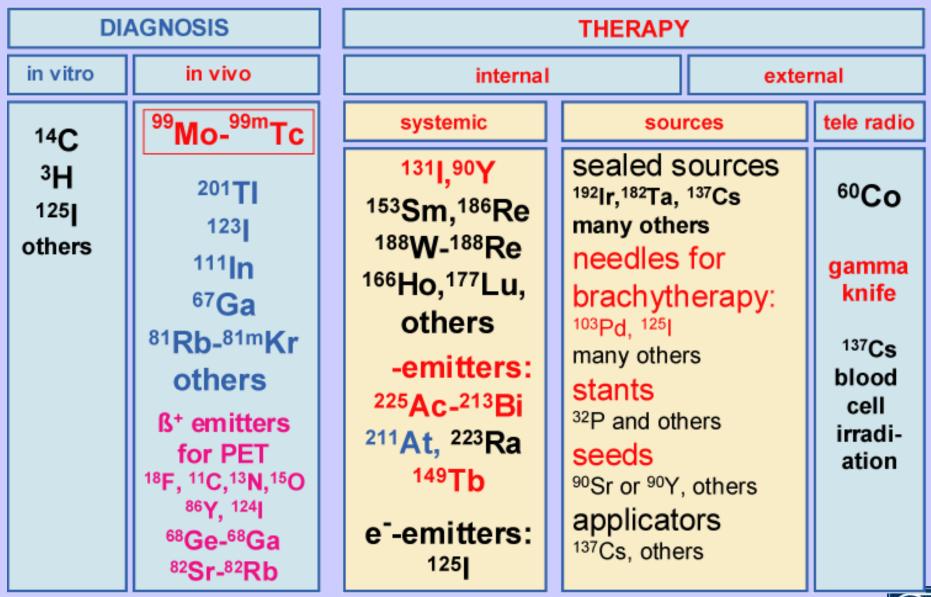
- Creation of common interdisciplinary environment
- Define and Collaborate in areas needing further research at the European level
- Profit from each others experience in building, managing, operating
- Reduce Duplication, Increase Quality, profit from best ideas, concepts
- Creation of maximum possible uniformity
- Inter-facilities uniformity and comparison
- Ease of exchange of information.



Production of isotopes

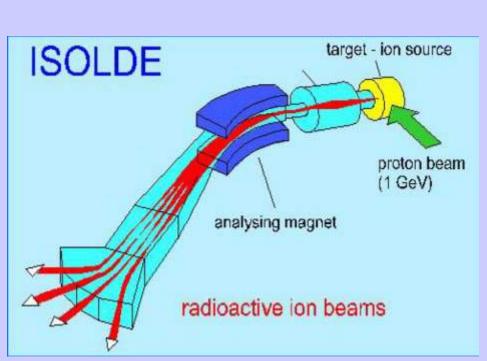


ISOTOPES IN MEDICINE





Terbium produced with 1 GeV protons + ISOLDE







Tumour

No tumour after treatment with ¹⁴⁹Terbium

Experimental evidence of the usefulness of immunoconjugates for micro-metastases

ISOLDE allows the production of novel isotopes



Grids and e-health





LHC data challenge

- 40 million collisions per second
- After filtering, 100 collisions of interest per second
- 10¹⁰ collisions recorded each year
- ~10 Petabytes/year of data ~10 000 times the world annual book production, ~20km CD stack

Concorde (15 Km)

CD stack with 1 year LHC data! (~ 20 Km)

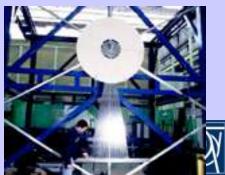
> Mt. Blanc (4.8 Km)

CMS









The Web

- Was a response to the needs of a distributed collaborating community
- And saved time and effort in fetching information from other places
- It made sharing information so much easier





The GRID

The Aim of the GRID is to give access,

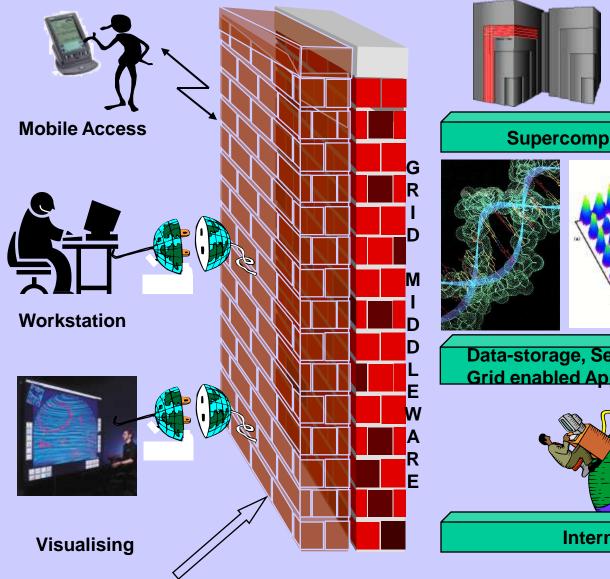
again easily and transparently,

Not only to simple information,

But also to all of the computing resources and storage distributed around the world

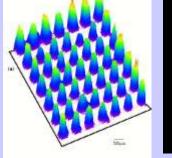


The User connects to his "Virtual Laboratory" or "Workbench Environment"





Supercomputer, PC-Cluster





Data-storage, Sensors, Experiments, Grid enabled Applications



Hoffmann, Putz



MammoGrid Objectives

- Acquisition of large sample of mammograms
- Standardization of mammograms
- Annotation of mammograms by humans as well as CADe software
- Distributed data management system, cross-institute, cross-country queries
- Sharing of computing resources for the purpose of optimizing data storage and execution of computingintensive algorithms
- Proof of concept with active clinical participation



MammoGRID

A pan-European distributed database of mammography images using GRID technologies

- To manage health care information for screening
- To assist health operators in their work environment and exchange data and practices
- To integrate latest technical developments in clinical practices
- 2 Main pilot applications:
 - CADe for quality controls (DICOM standards, GRID compliant, SMF Software)
 - Breast Density measurements



At work at Cambridge Hospital

32 MB / Image 2 x 2 images: 128MB per visit 400 TB / year of information to be preserved for UK screening Breast tumours: 24% not visible at screening, 80% of biopsies are negative



WHO-Reproductive Health



eDiaMoND Project

Mammograms have different **Temporal** appearances, depending on image mammography settings and acquisition systems Computer Standard Mammo Aided Format Detection The Grid links a large federated database **3D** View of normalised digital mammograms shared initially by 4 hospitals WHO-Reproductive Health 6.02.2008

Health-e-Child on a slide

