

Medical applications of Compton generation

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Warnings:

- This is a laser physicist point of view... not from a MD!
- All applications presented are really from synchrotron radiation research...



Outline

- Applications of monochromatic Xray sources to medical imaging
 Oncology, Angiography
- RadioTherapy
- Why go from synchrotron to Compton Xrays?
- What MDs are waiting for...



Medical Xray imaging: medical state of the art

- Standard tool: Xray tubes, very polychromatic Standard range: up to 250 kV
- Low energy → dose deposition;
 high energy → scatter
- No spatial or longitudinal coherence
 - → low resolution; absorption only
- Possibility to add sensitizers (contrast agents)

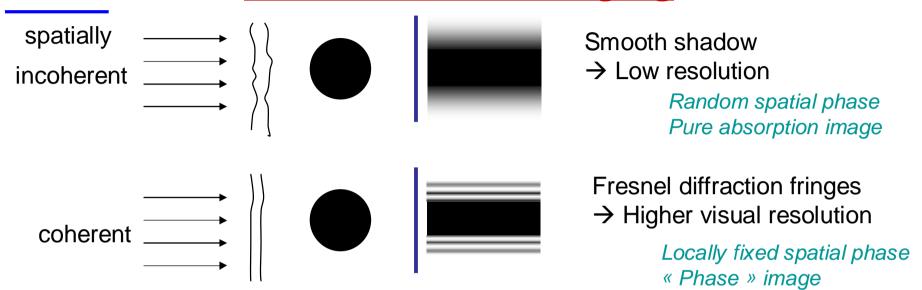


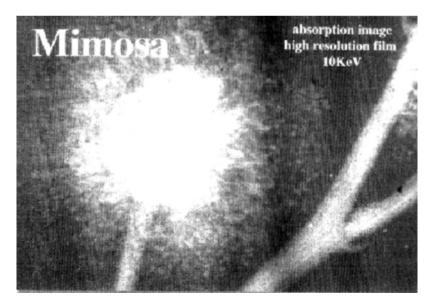
Medical imaging: how can monochromatic Xray beams help?

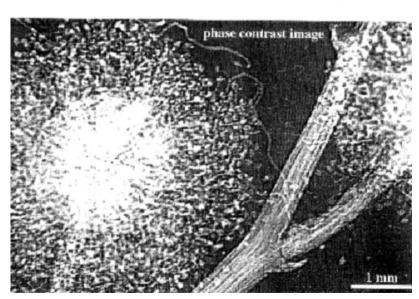
- Get rid of low hv absorption / high hv scatter
 - → very clear images
- Monochromaticity allows propagation to create spatial coherence
- Possibility to use resonant interaction with sensitizers



Phase contrast Imaging







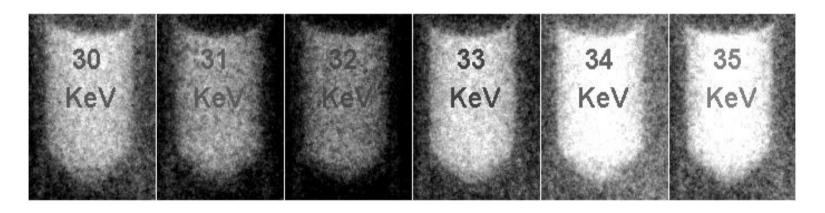
Courtesy G. Margaritondo



Kα differential imaging

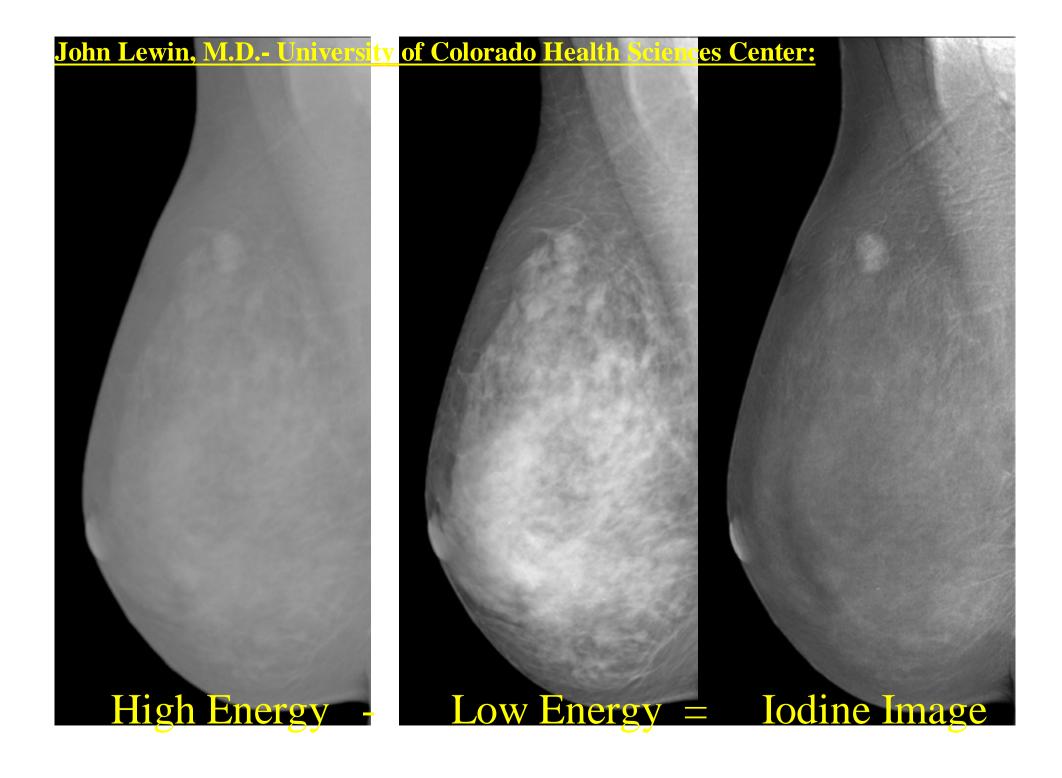
• Introduce contrast agent with high Z element : I

Iodine k-edge is at 33.2 keV



Courtesy F. Carroll, MXIsystems

• Substract two images taken at $hv(K\alpha) + \varepsilon$ and $hv(K\alpha) - \varepsilon$



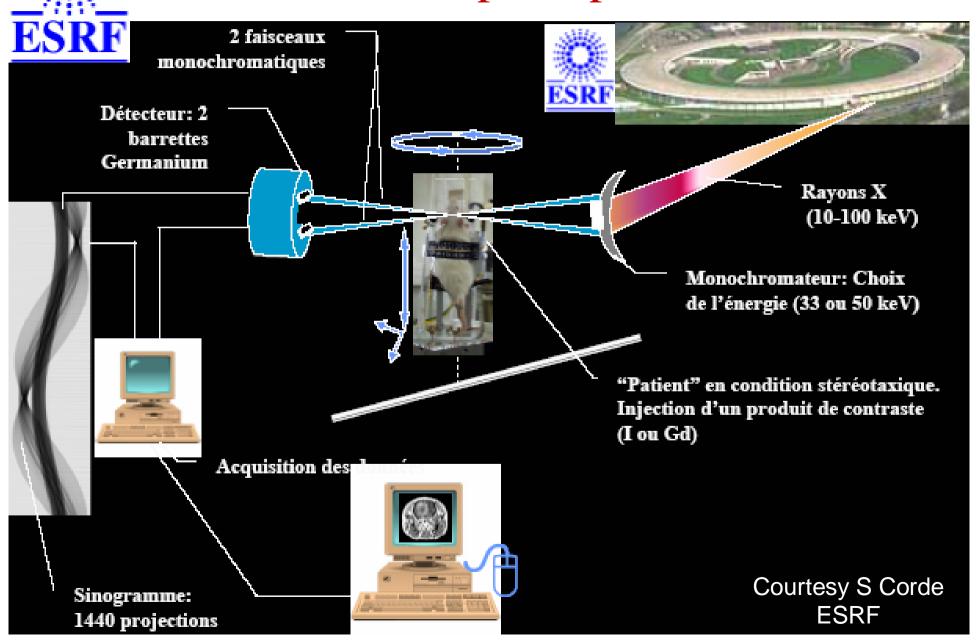


Computer Tomography with contrast agents

- Main contrast agents: compounds based on lodine, Gadolinium; Platinum
- Also: Barium in gastro-oesophaegical system, Xenon in lungs
- Many of these compounds have intrinsic toxicity, even with no-zero morbidity

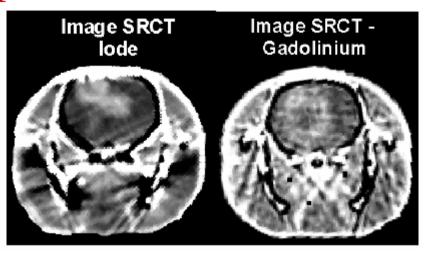


Reminder: principle of CT





Application of CT with I and Gd:

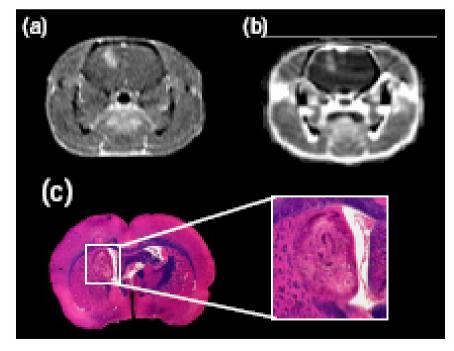


Courtesy S Corde ESRF

Comparison with other imaging techniques:

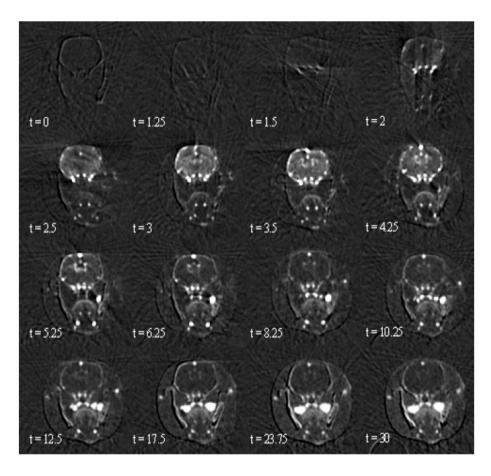
(a): Synch. Rad. differential CT(b): NMR imaging

(c): post-mortem histology





Angiography: dynamic investigation of blood perfusion in rat brain



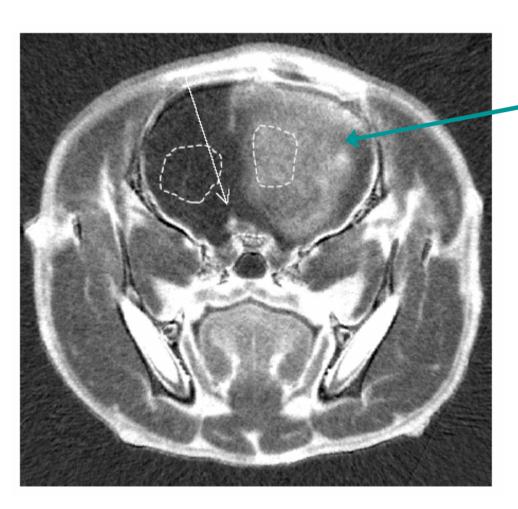
Healthy cerebral tissue

Large brain tumor on right hand side



These techniques can be combined:

Study of blood perfusion of rat glioma by I differential imaging



« Map » of increasedpermeability ofHemato-encephalicBarrier



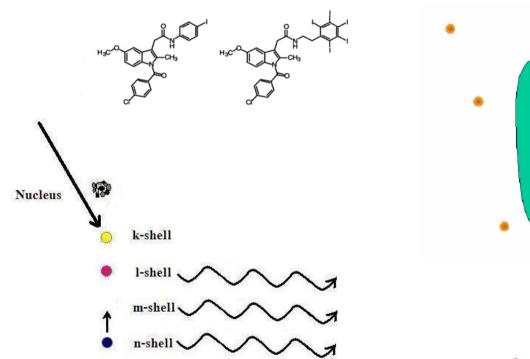
Xray RadioTherapy: medical state of the art

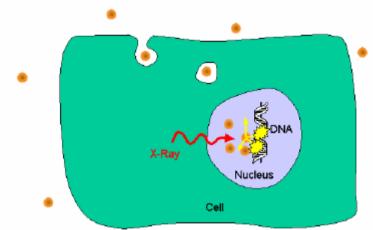
- RX therapy is one of 3 big tools against cancer (often used together with Chemitherapy and surgery)
- Very high photon Xrays: up to 6 MVp
- Very high doses: up to 60 Gy in tumor
- Low differential absorption of tumor : < 10%
- Strong irradiation of sane tissues → major side effects (functional damage, Xray induced tumors)
- New technique: Intensity Modulation RT
- Brain glioma still not curable → almost no RT



Photon activation therapy

Excite selectively around High Z sensitizer





High probability of double-strand breaks



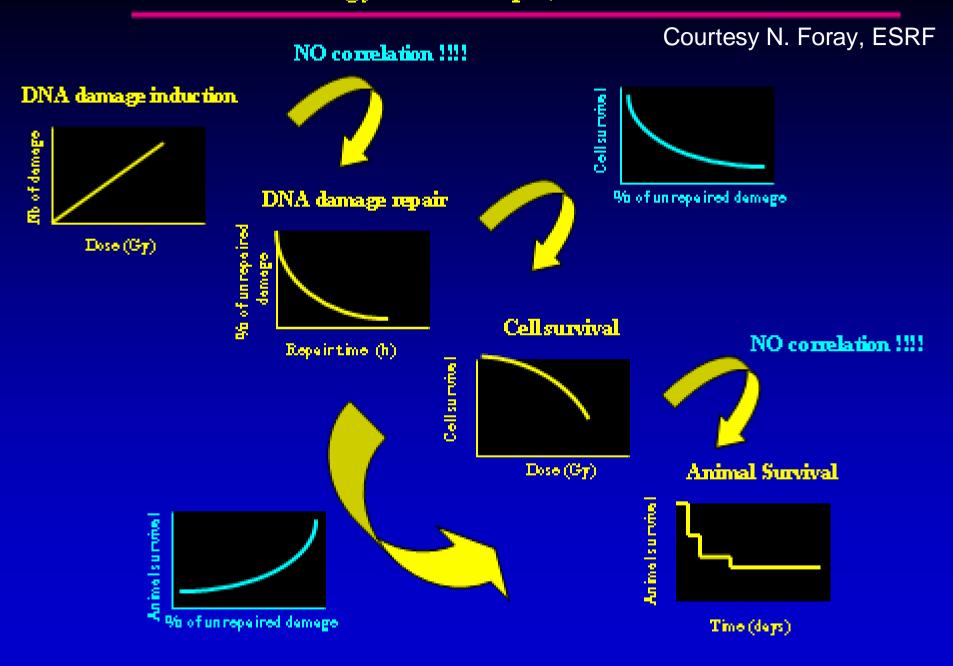
Why is single v Xray useful?

- Sensitizer → Dose Enhancement Ratio > 1
- No beam hardening -> homogeneous dose
- Pencil like beams → sharp boundaries

But!

Extremely complex physical – chemical – biological – medical behaviour!

Radiobiology: new concepts, and FALSE IDEAS

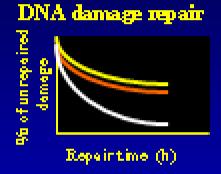


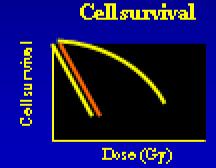
Photoactivation of iodinated contrast agents and cis-platinum: A comparison ...

DNA damage induction



Courtesy N. Foray, ESRF





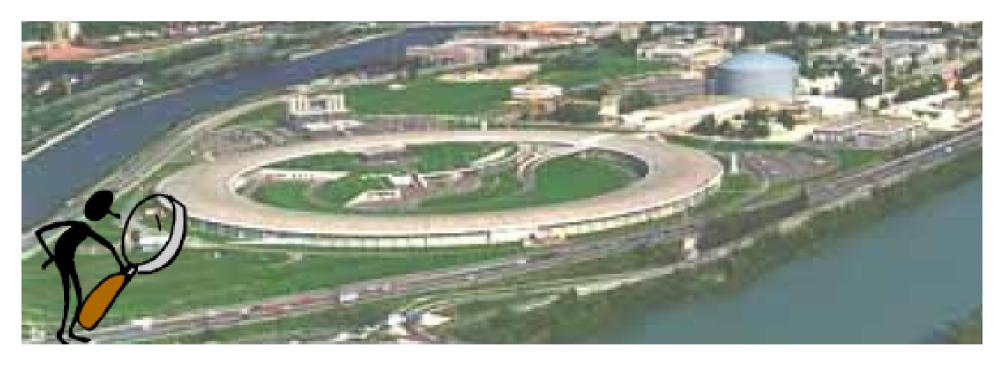
In a nutshell: might work for therapy, but no certainty yet





Applicability of Compton sources:

Main aim → not have to use that:





Technical requirements

- Flux: looks feasible, even for therapy
- Photon energy: the higher the better
- Divergence : often too small
- Monochromaticity: adjustable (→ fine)
- Compacity: marvelous
- Radioprotection: a nightmare
- Coupling to IMRT: very difficult
- Cost: much too expensive for medics



Conclusion:

The coupling between laser and electron acceleration – storage technologies might be extremely useful for medical imaging and radio-therapy, especially for brain glioma

(but no certainty yet for RT)



Many thanks to...

- Dr J. Bourhis, MD, and Dr A. Bridier (IGR)
- Prof F. Carroll , Vanderbilt, USA
- Dr H Elleaume, Dr N Foray, MD, Dr J. Balosso, MD, S. Corde, JF Adam, and col. ESRF (Grenoble)
- Dr N. Artemiev, LOA Palaiseau
- All the LAL group