

A yellow diamond-shaped background with a red crayon at the top left and a blue crayon at the bottom right. A red squiggly line extends from the red crayon, and a blue squiggly line extends from the blue crayon.

# Medical Physics: Thesis Topics

# Elementary particles and Medical Applications



Basic concept:

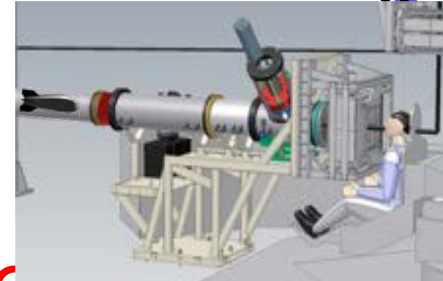
→ "Inject" radioactive material or particles inside the patient

If the particle "escapes" the patient

→ Diagnostics: SPECT, PET, Radioguided surgery

If the particle interacts inside the patient

→ Radiotherapy: RT, Radio Metabolic Therapy, Brachithery, Hadrotherapy, Flash Therapy



# Nuclear decays of interest

## Gamma rays:

escape patient, interact outside it  
extracting electrons



beta+ decays: positrons  $\nu\bar{\nu}$  annihilate with  $e^-$  and produce 2 photons that escape patient and interact outside



Beta- decays: electrons do not escape patient

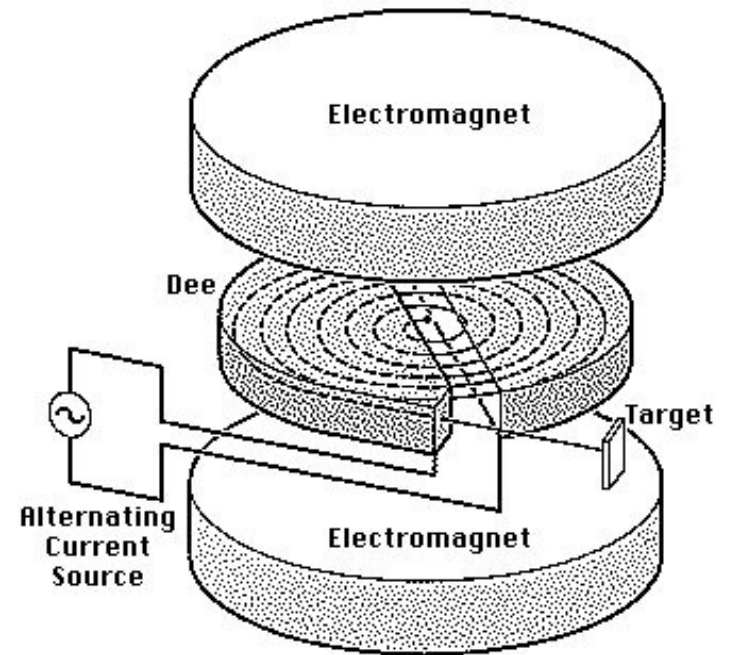
Alpha decays: like electrons but even shorter path



# Accelerators: the Cyclotron

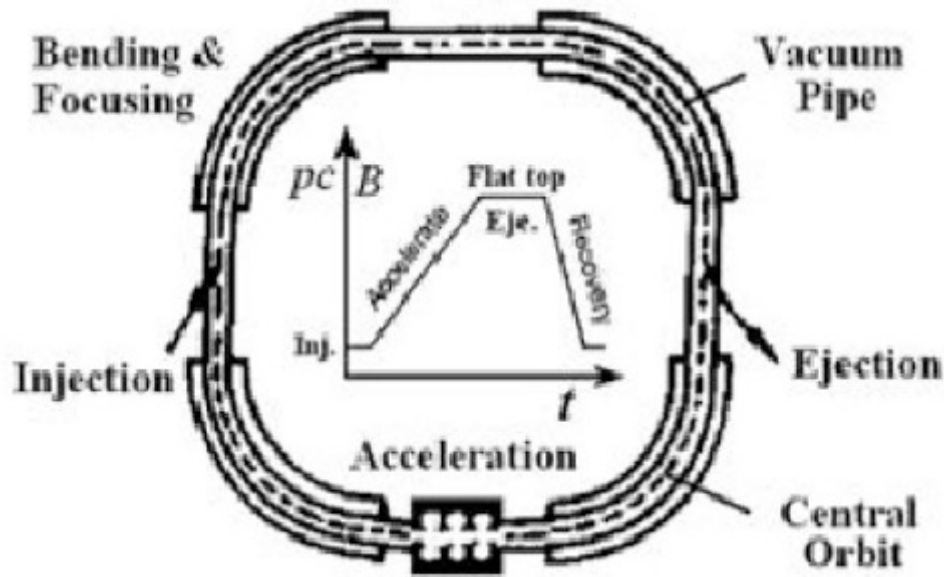
Used for  
protons/ions

- 10-30 MeV for radio-isotopes production
- up to 200 MeV per radiotherapy



230 MeV Protons

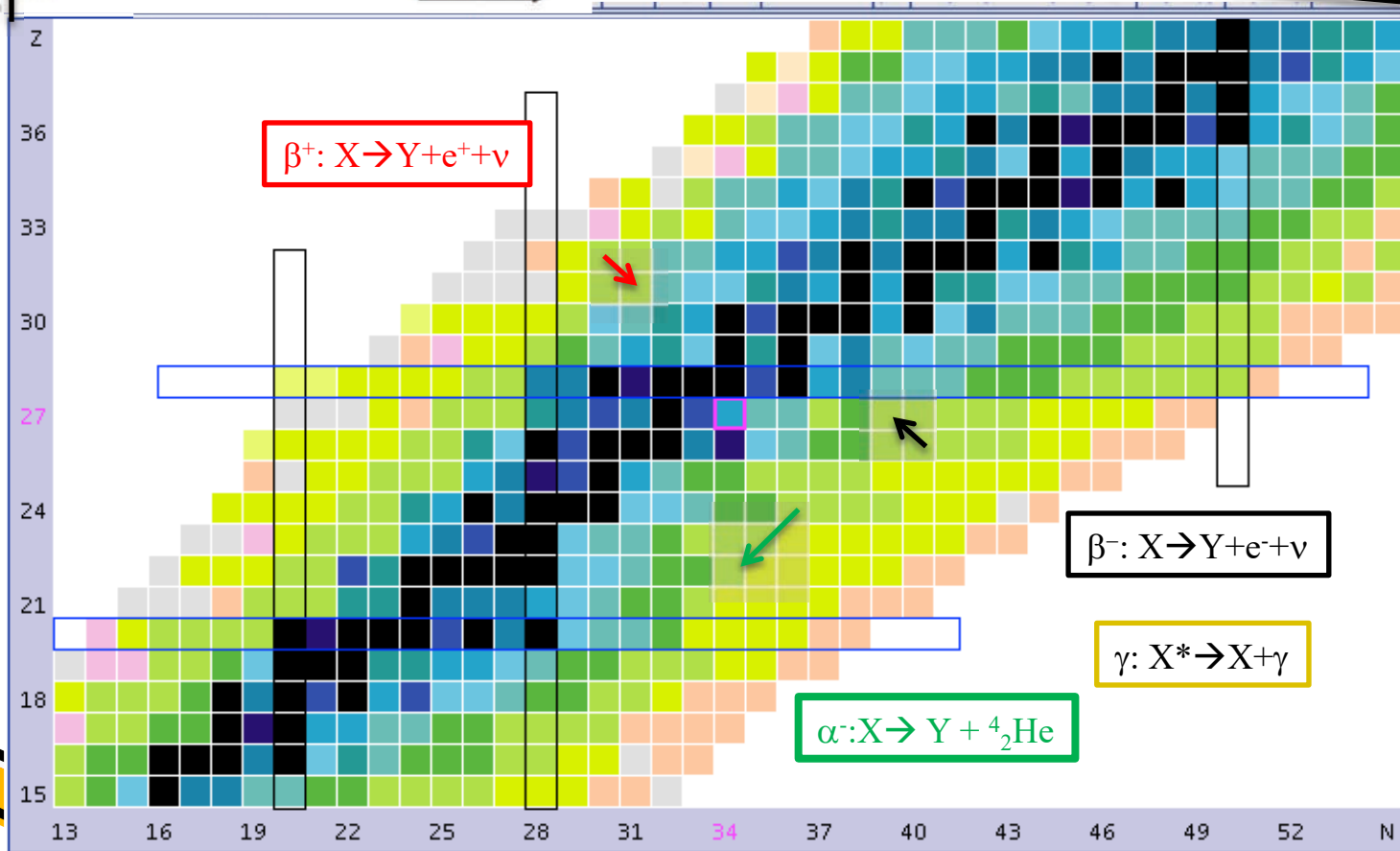
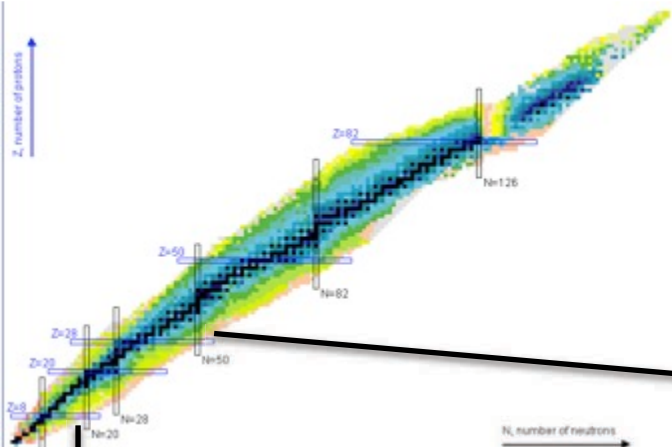
# Accelerators: the synchrotrons



Accelerate  
protons/carbon-ions  
for therapy (up to  
4800 MeV)



# Nuclear Decays of interest



**Tooltips**

On

Off

---

**Zoom**

1

2

3

4

5

6

7

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**Uncertainty**

NDS

Standard

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**Screen Size**

Narrow

Wide

---

**Nucleus**

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**Seconds**

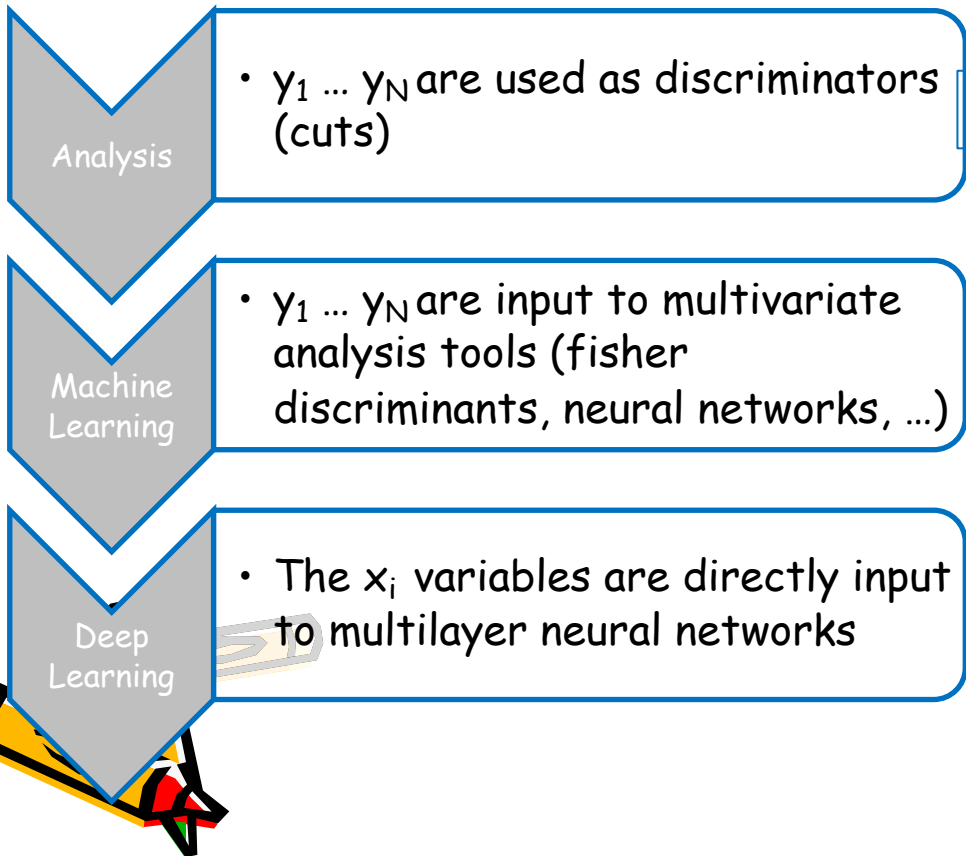
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# Artificial Intelligence

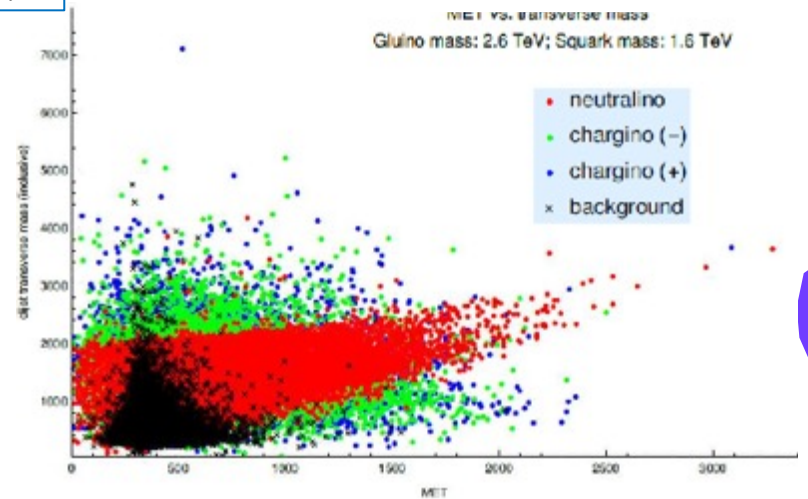


## Different Levels of Data Analysis in Particle Physics



$y_2$

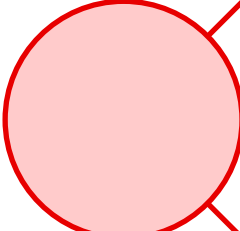
Given  $N_v$  variables  $x_i$  (signals from detectors), the variables  $y_k(x_1, x_{N_v})$  ( $k=1, \dots, N$ ) are derived



$y_1$



# Possible Research Fields



Diagnostics



Radiotherapy



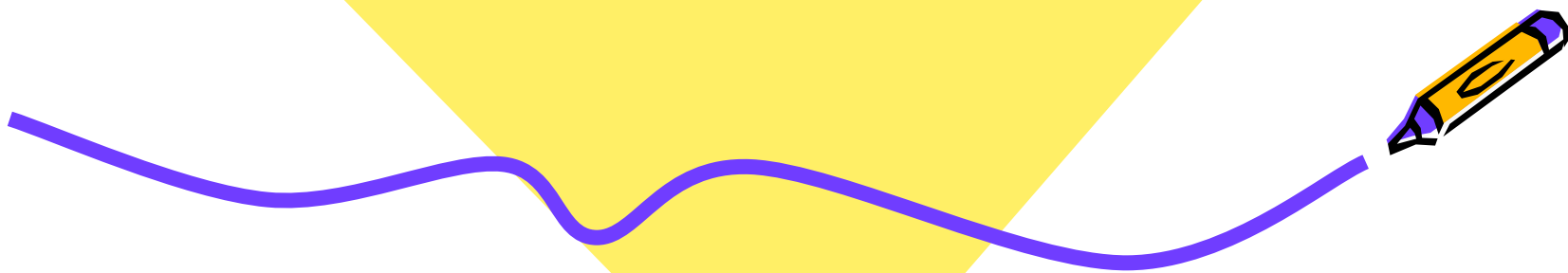
Artificial Intelligence  
in Medicine





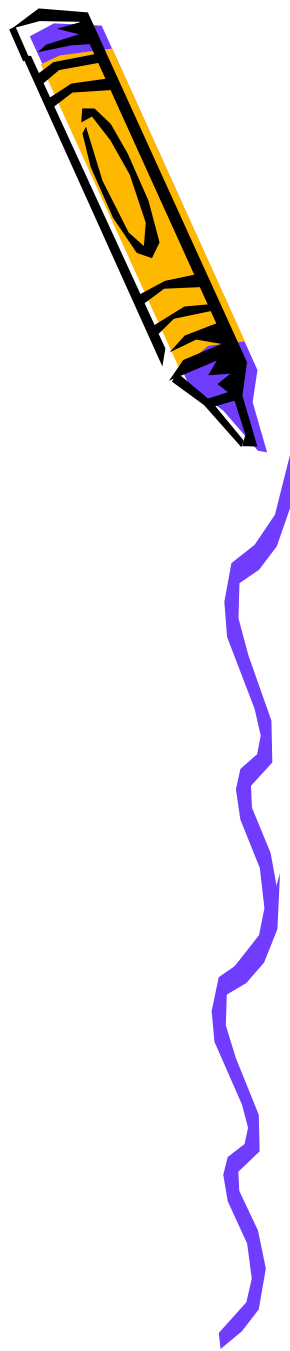


Diagnostics



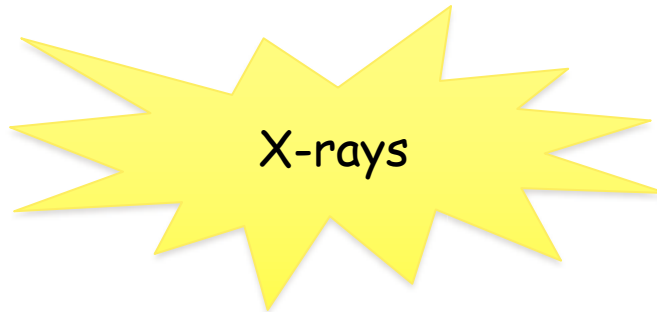
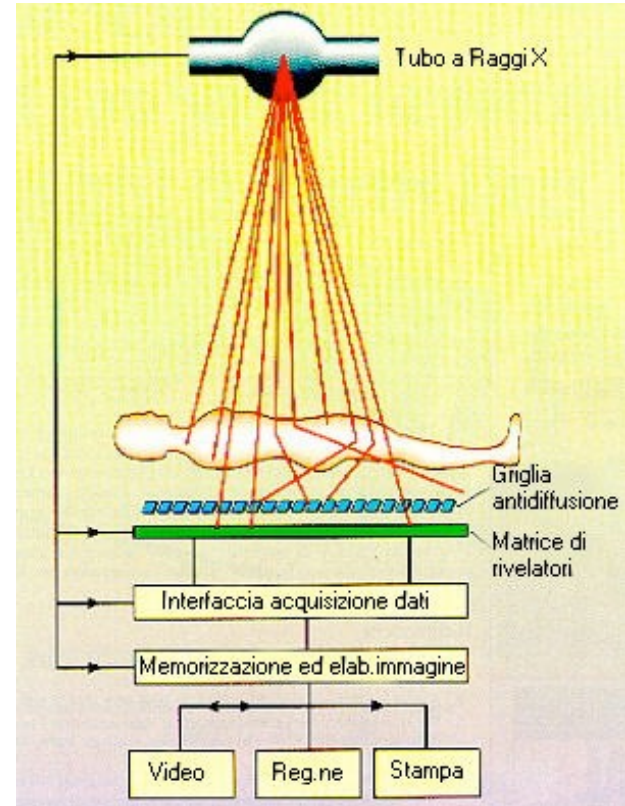
# Diagnostics

- Two major categories:
  - Morphologic: sensitive only to densities
    - Radiography
    - TAC
    - ultrasound, ...
  - Functional: sensitive to organ functionalities
    - PET
    - SPECT
    - ...



# Diagnostics: radiography

- X-rays produced with a cathodic tube by Bremsstrahlung
- Interaction between matter and patient
- X-ray detection

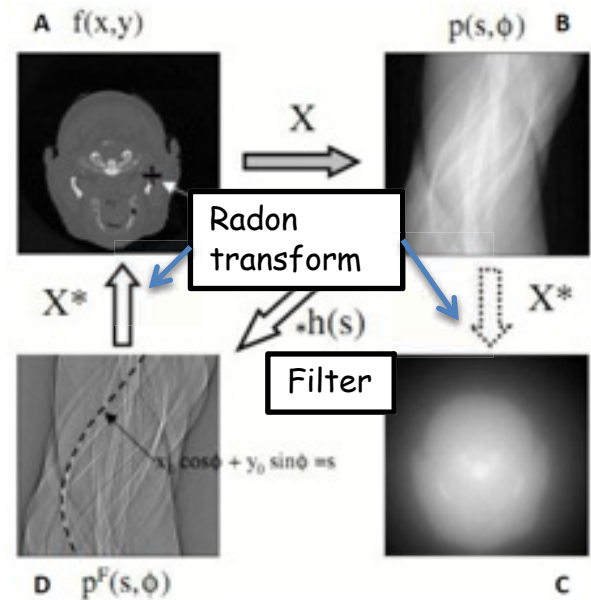
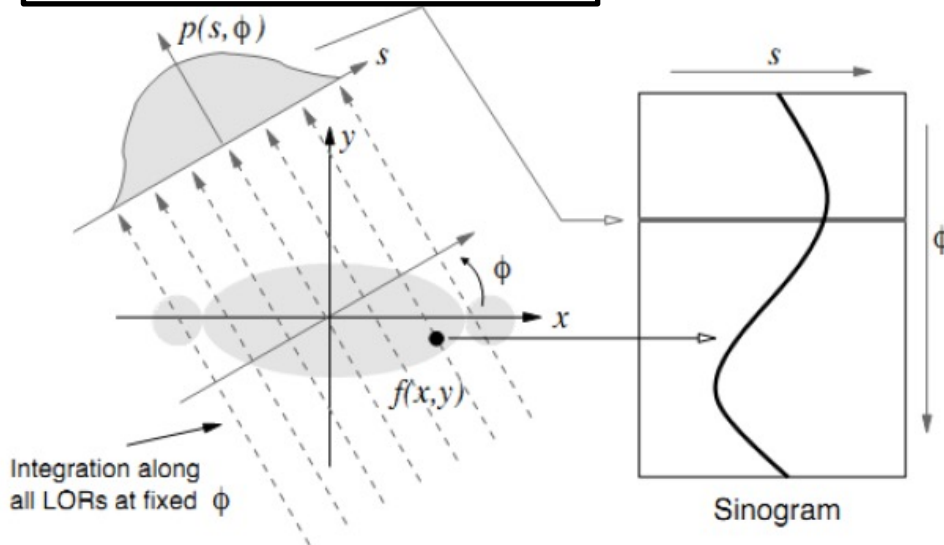


# Diagnostics: Tomography



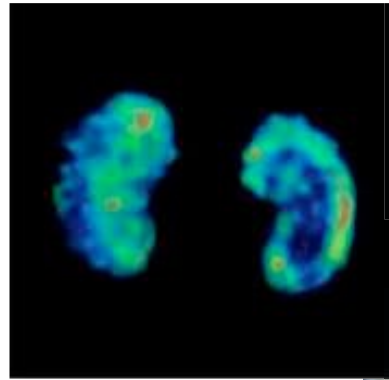
- Generic mathematical tool from 1D  $\rightarrow$  2D
- CT with X-rays is most renown

From image to sinogram



# Diagnostics: SPECT

Single Photon Emission Computerized Tomography



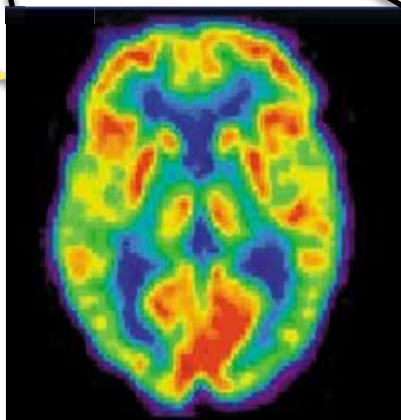
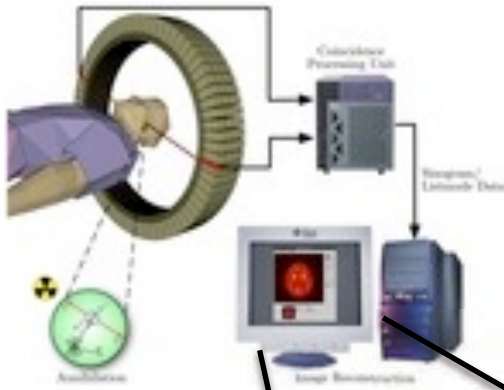
- Inject radionuclide (typically  $^{99}\text{Tc}$  but also  $^{131}\text{I}$ )
- Decays with single photon
- Detection  $\sim 50\text{cm}$  from source with angler camera



Gamma decays

# Diagnostics: PET

Positron Emission Tomography



- Inject radionuclide ( $^{18}\text{F}$  in FDG, FET,  $^{11}\text{C}$  in methionine, choline)
- $\beta^+$  decay
- Detect the two gammas in coincidence outside patient

Beta+ decays

# Radio-guided surgery

- **Administer**, before operation to patient (either systemically or locally) a drug which:
  - the tumor takes up significantly more than the healthy tissue.
  - is linked to a radio-nuclide that emits particles via nuclear decay
- **Wait** for the drug to diffuse to the margins of the tumor
- **Start operation**
  - Remove the bulk of the tumor
  - Verify with a probe that detects the emitted particles the presence of:
    - Residuals
    - Infected lymph nodes



Beta decays

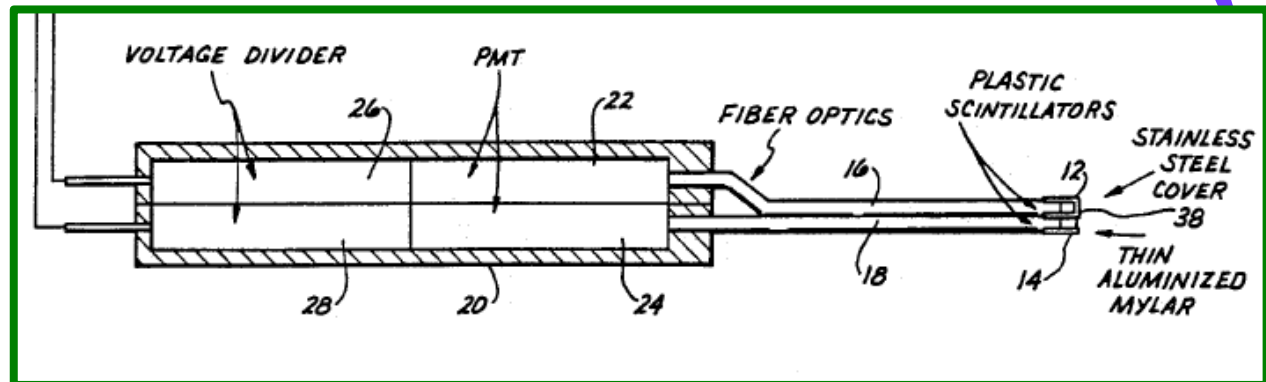
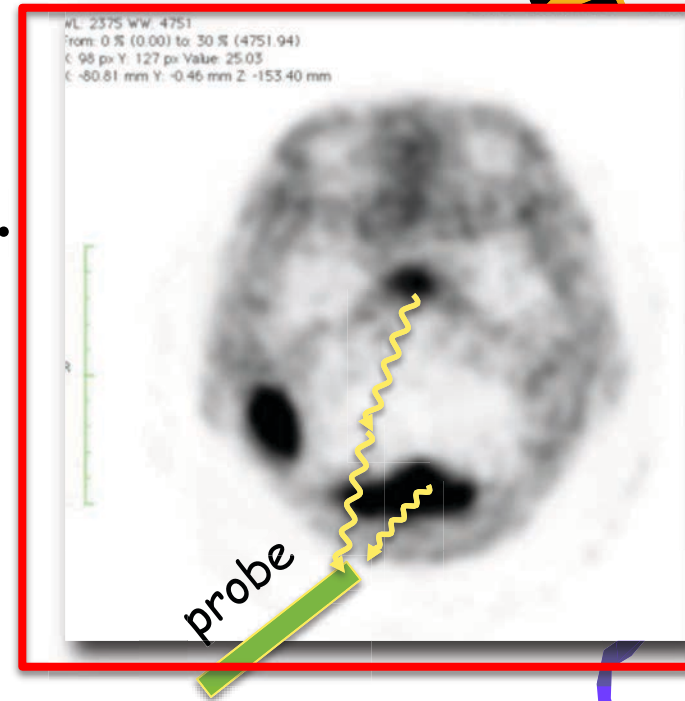


# Radioguided surgery



## Three approaches

- **Gamma**: well established, e.g. sentinel lymph-node
- **Beta+**: based on the dual probe approach
- **Beta-**: future frontier



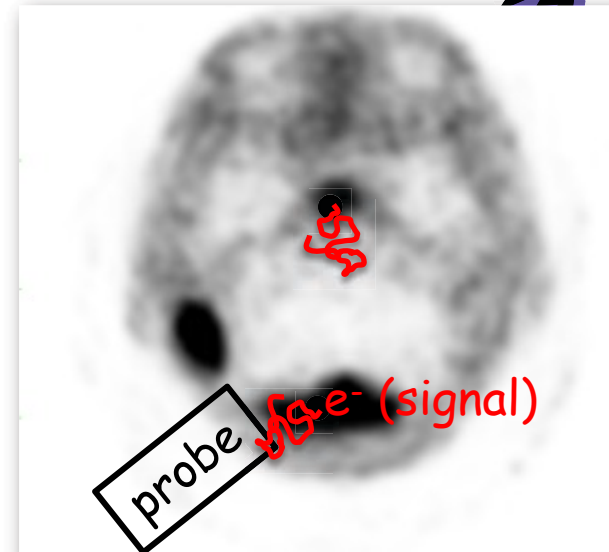


# A CHANGE IN PARADIGM

- Use of  $\beta^-$  tracers (electrons):  
pros

- Detect electrons that travels  
~100 times less than  $\gamma$
- Tracers with  $^{90}\text{Y}$  can be used  
(already used for Molecular RT)
- No background from gamma
  - Shorter time to have a response
    - » Smaller administered activity
  - Smaller and more versatile detector
  - Very reduced effect of nearby  
healthy tissues
  - Reduced dose to medical staff

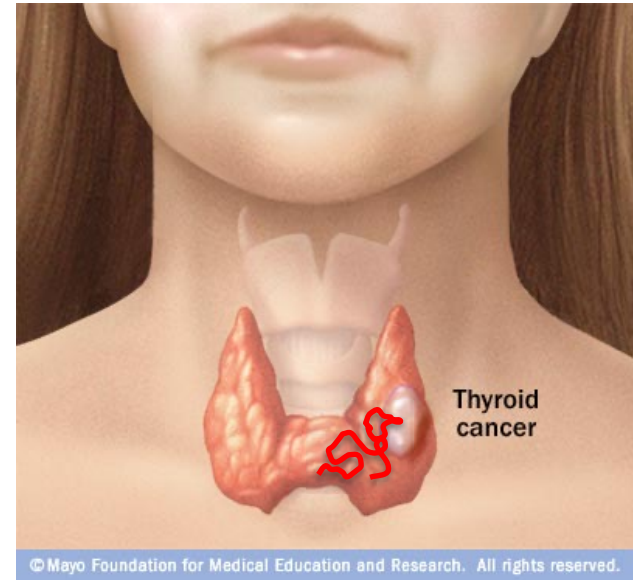
E. Solfaroli Camillocci et al,  
Sci. Repts. 4,4401 (2014)



# radiometabolic/ Brachitherapy



- Inject/ position radionuclide (e.g.  $^{131}\text{I}$ )
- Beta- decays
- Electrons release energy in tumor locally

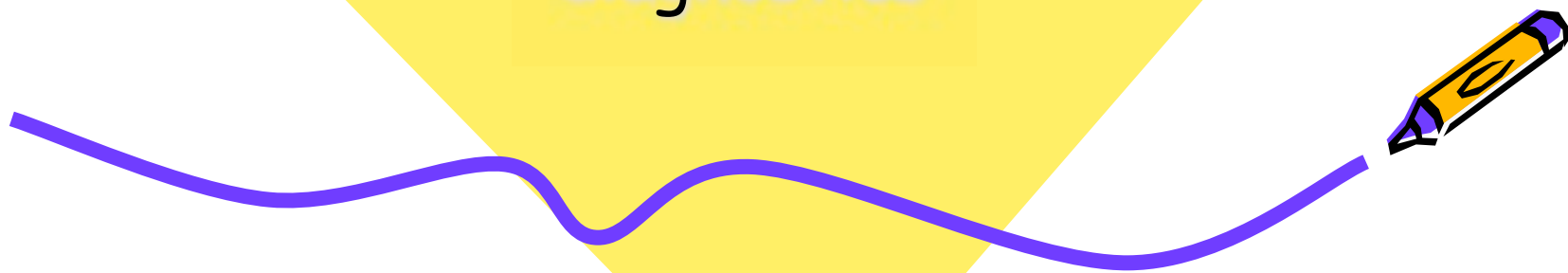


Beta- decays



# Available theses

diagnostics



# Radio Guided Surgery

## Probe Prototype

Compact, easy to handle,  
local measurement

Simple technology:

- scintillating crystal
- Light sensor (SiPM)

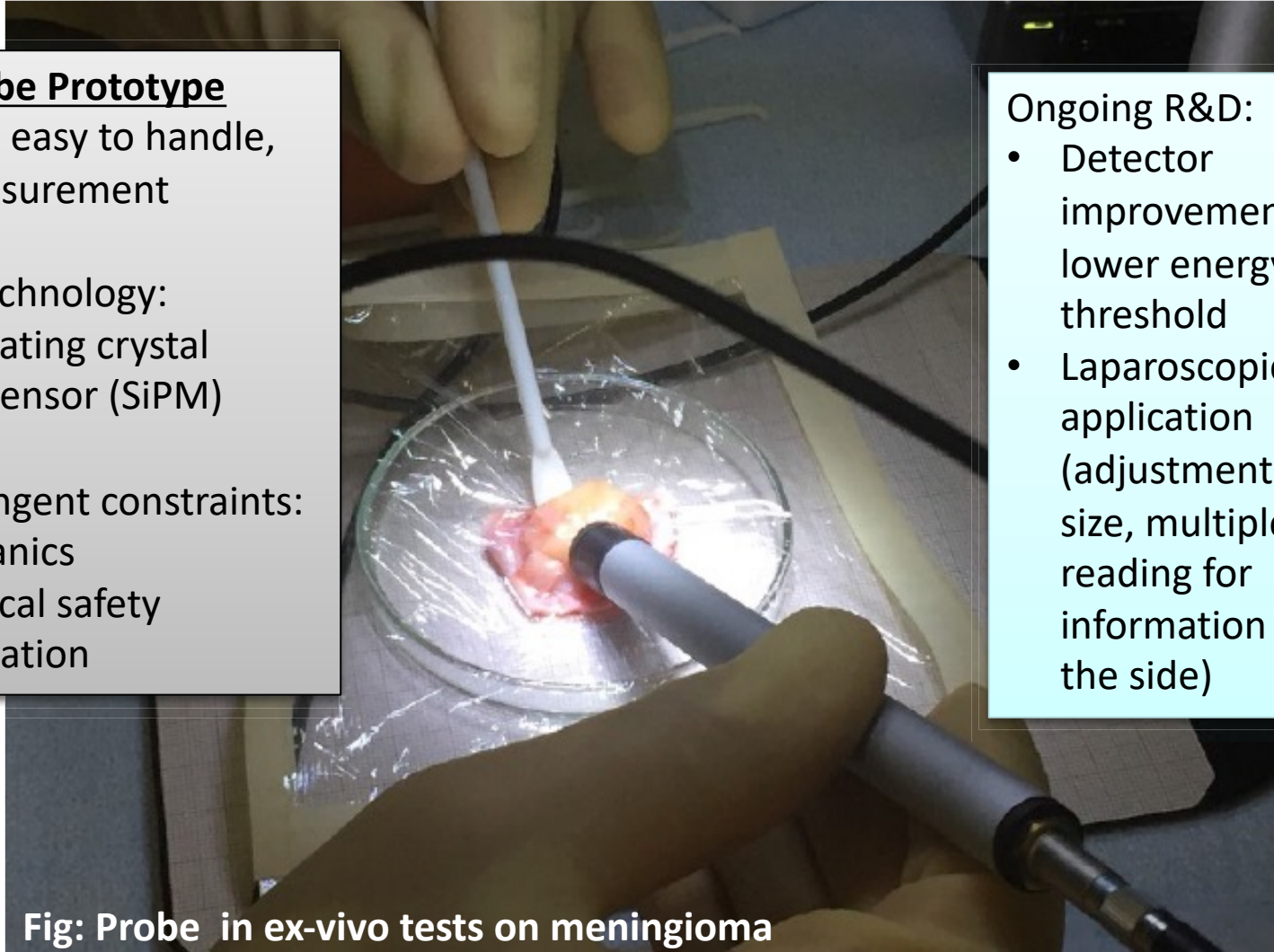
Most stringent constraints:

- Mechanics
- electrical safety
- sterilization

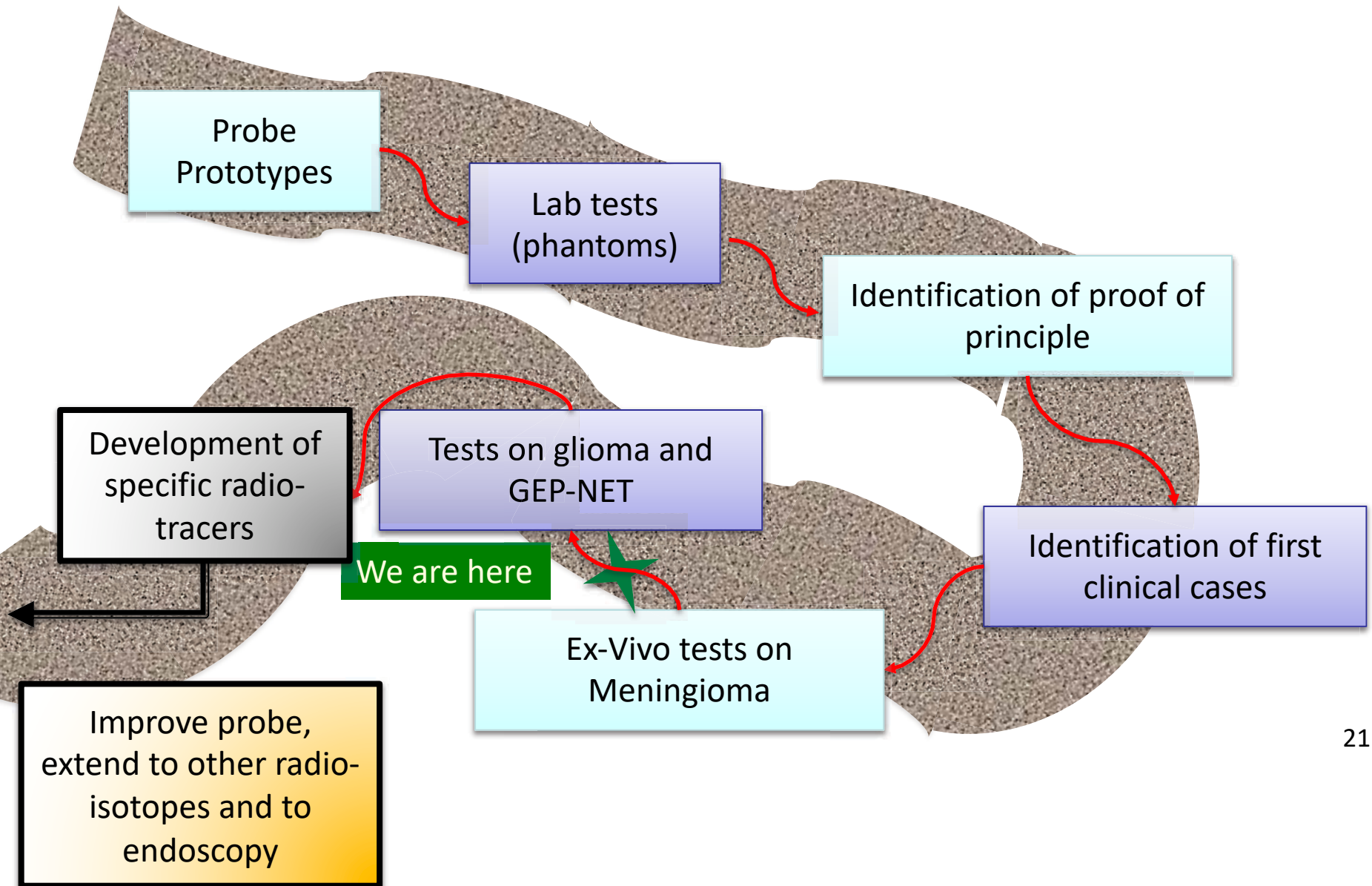
Ongoing R&D:

- Detector improvements to lower energy threshold
- Laparoscopic application (adjustment in size, multiple reading for information from the side)

Fig: Probe in ex-vivo tests on meningioma



# RESEARCH PATH



# Radioguided Surgery with $\beta$ - decays

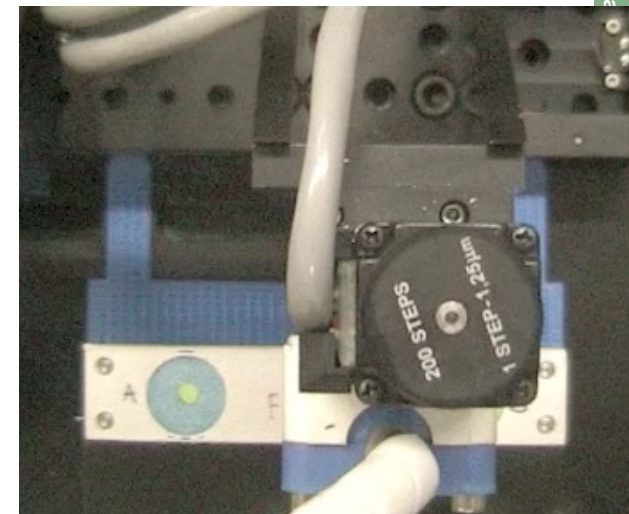
- Development and tests of a detector for low energy electrons
  - Multichannel device with imaging capabilities
  - Low energy sensitivity
- Data analysis and MC simulation of clinical cases
- Application to different radio-nuclides

Both SW  
(simulation, image reconstruction)  
and HW activities  
(detector assembly  
and experiment  
robotics)

Thesis topics contacts

F. Collamati ([francesco.collamati@roma1.infn.it](mailto:francesco.collamati@roma1.infn.it))

R. Faccini([riccardo.faccini@roma1.infn.it](mailto:riccardo.faccini@roma1.infn.it))



# Dosimetry in Target Radio Therapy

- TRT: Injection of radio-tracer that links preferentially with tumor → beta- radiation for therapy
- Need to certify acquired dose on patient-by-patient basis

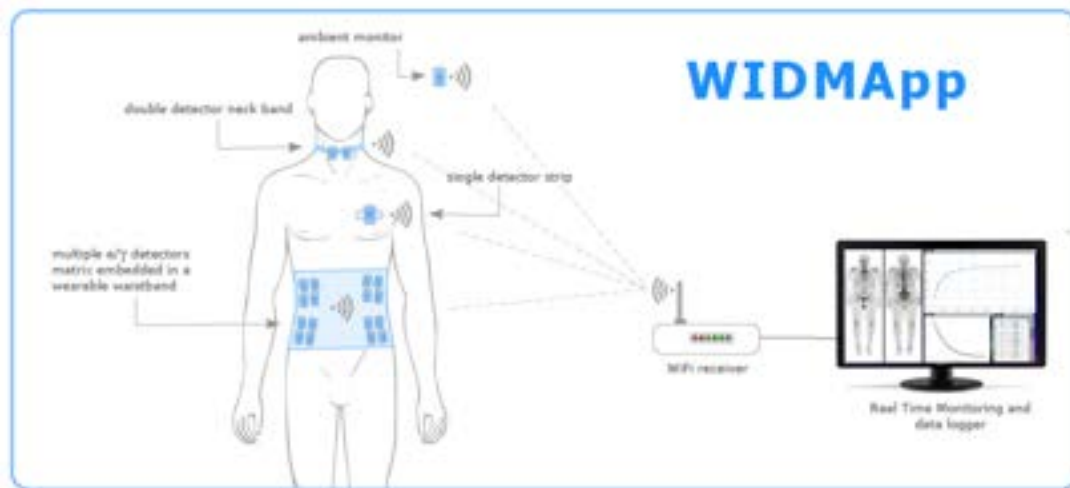
Development of sensors  
(evolution of the probe)

MC simulation/data analysis  
→ proof of principle

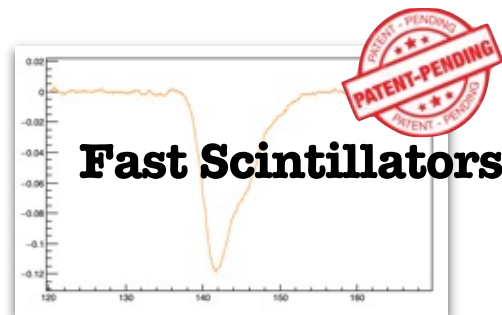
Thesis topics contacts

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R. Faccini([riccardo.faccini@roma1.infn.it](mailto:riccardo.faccini@roma1.infn.it))

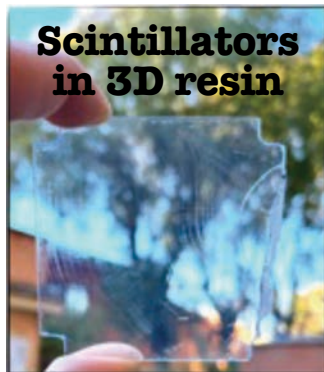
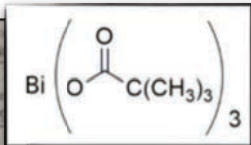


We have an R&D work on innovative plastic scintillators in collaboration with the LEOS group (Chemistry) of SBAI.



**Organic Scintillators with hi-Z**

23	german.	arsenic	selenium	bromine	krypton
	72.630	74.921595	78.971	79.904	83.796
In					
818					
Tl	Pb 83	Bi 84	Po 85	At	
um					
38					01758
Nh					Og
ium	flerovium	(moscovium)	livermorium	(tennessine)	(oganesson)
873)	(289.19042)	(288.19274)	(293.20449)	(292.20746)	(294.21392)



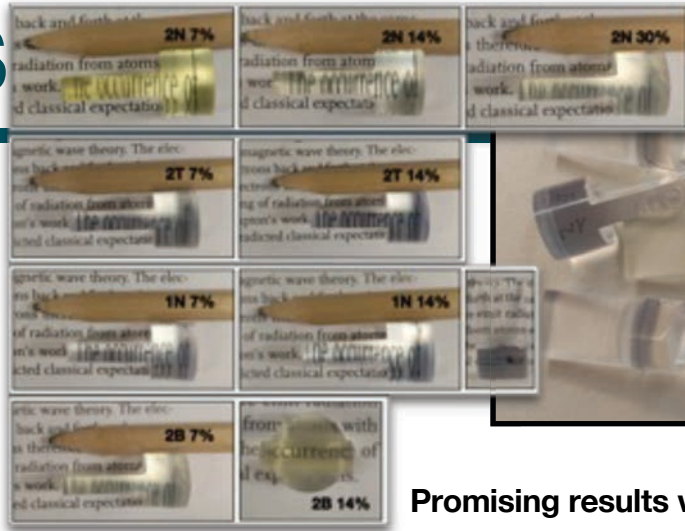


# TOPS: Fast timing plastic scintillators



After a long R&D work with many samples we select 4 new fluorophores that show promising performances in terms of light spectrum, transparency and time response.

We performed test with cosmoics\*, protons and carbon ions beams. The most recent results have been obtained with cosmic rays at SBAI.



Promising results with 2N for timing performances

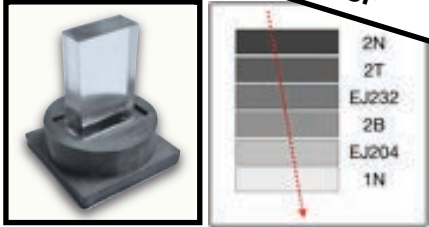
**Readout system:**

- PMT H10721-20
  - rise time (from datasheet) 0.57 ps
  - quantum efficiency impacts on the final light output (QE peak at 400nm)

**DAQ system:**

- WaveDAQ

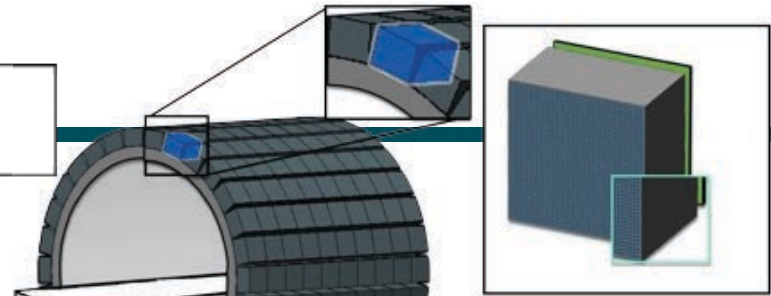
**Experimental SETUP**



Samples	Primary Dopant	Wavelength emission	Light Output* % EJ232	Rise-Time [ns]	Width [ns]	Time Resolution [ps]
	%	[nm]	systematic and statistics error 10%			
EJ-232	-	370	100	2	9	123
EJ-204	-	408	200	2.5	11	211
2N	14%	405	110	2	12	81
2T	14%	-	240	3	18	97
1N	14%	415	155	3	17	102
2B	14%	420	160	2.5	14	110

=> Thesis on the scintillator characterisation and development

Final Goal:  
reSPECT



We produced few samples at low concentration in order to verify the real capability of incorporate Bismuth in the scintillators

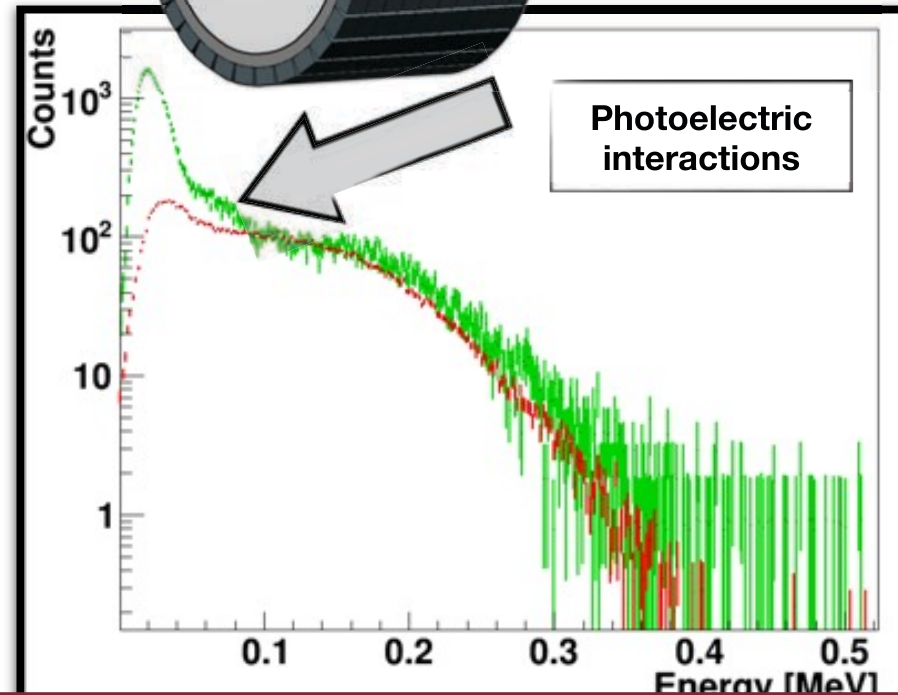
um	gorman.	arsenic	selenium	bronine	krypton	
23	72.630	74.921595	78.971	79.904	83.798	
In					Xe	
um					293	
818	Pb 83	Bi 84	Po 85	At		
Tl					Rn	
um					21758	
38					Og	
Nh						
um	flerovium	(moscovium)	livermorium	(tennessine)	(oganeson)	
873)	(289.19042)	(288.19274)	(293.20449)	(292.20746)	(294.21392)	

of 1 keV to 1 MeV. There  
of various interact  
50%. The nonlinear respo

PVT based scintillator (2T  
14%)+Bi 4%

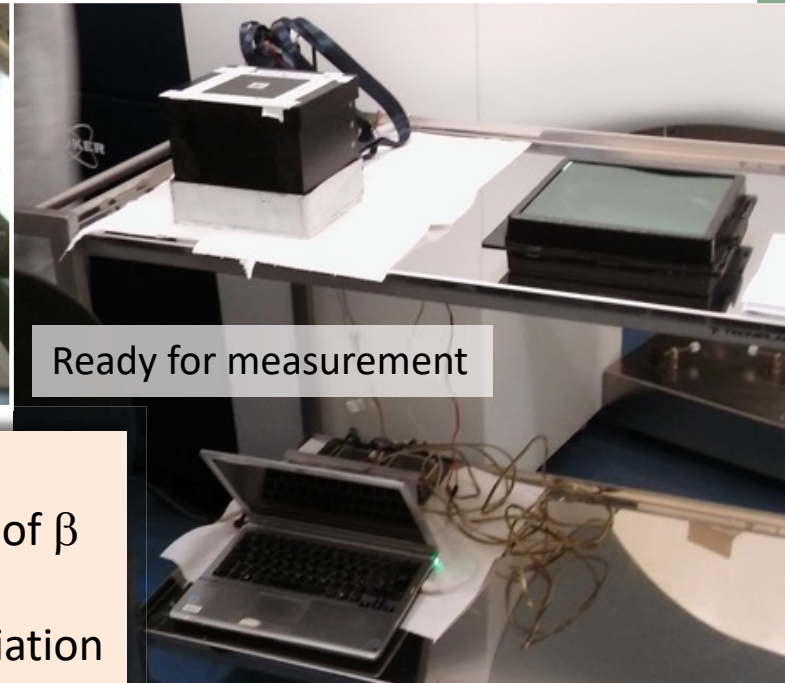
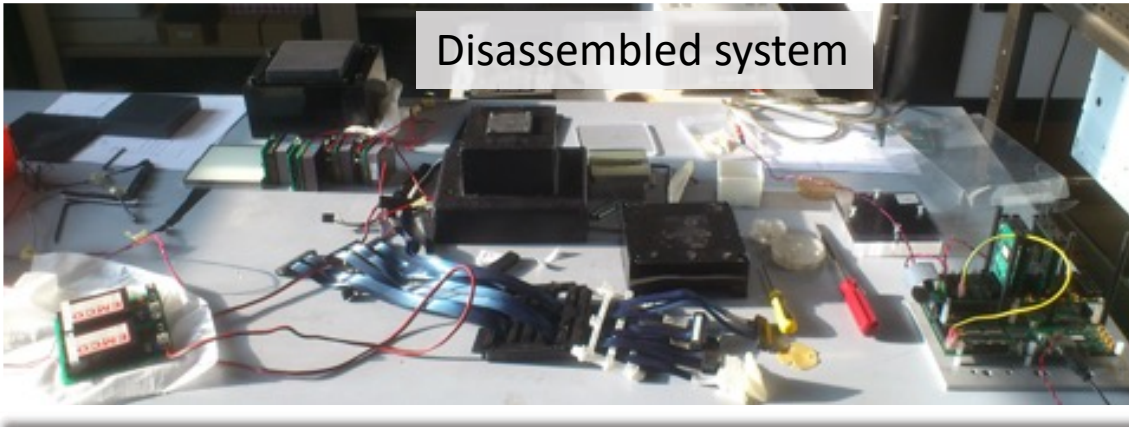
PVT based scintillator (2N  
10%)+Bi 4%

=> Thesis on the scintillator characterisation and development + MC study on the detector optimisation and evaluation of the performances



=> Thesis on the scintillator characterisation and prototypes realisation (measurement with FOOT experiment)

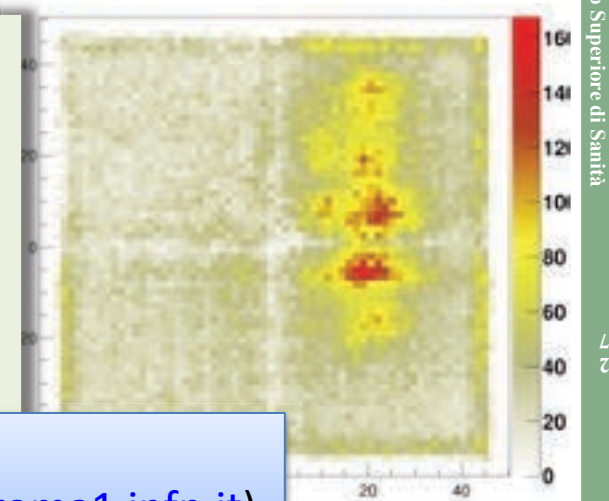
# Nuclear Medicine: Portable $\beta/\gamma$ Imaging System



Compact, flexible gamma camera-like device based on independent channel electronics and dedicated imaging of  $\beta$  (or  $\gamma$ ) radionuclides in small animal preclinical studies. Challenging image reconstruction of Bremsstrahlung radiation

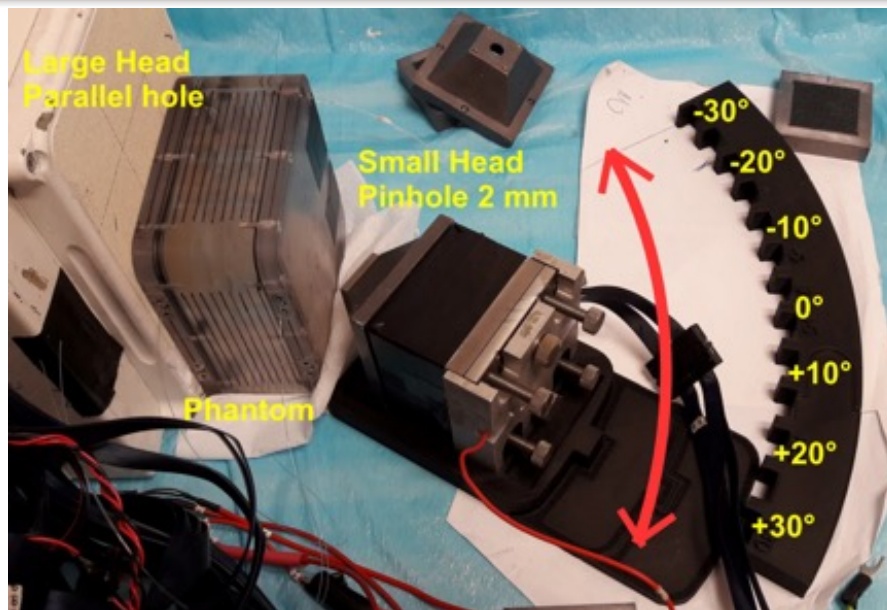
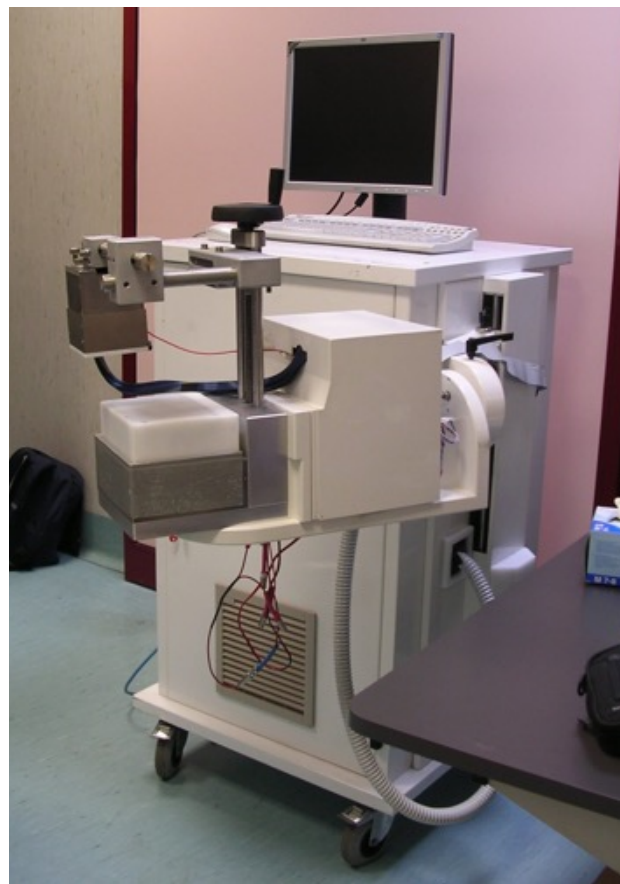
Activities: development of the image processing algorithms for beta emitters; characterization and measurement campaigns; validation of the simulation twin model toward quantitative imaging; investigation of new imaging modalities.

Thesis topics contacts  
E. Cisbani ([evaristo.cisbani@roma1.infn.it](mailto:evaristo.cisbani@roma1.infn.it))



# Nuclear Medicine: Limited Angle Tomography

Scintimammographic device for early detection of breast cancer based on dual-asymmetric gamma sensors. Study of new acquisition modality for improved tumor detection and 3-dimensional localization



Activities: evaluation of Silicon Photomultiplier sensor performances; development of a dedicated 3-dimensional image reconstruction; montecarlo simulations and data analysis

Thesis topics contacts

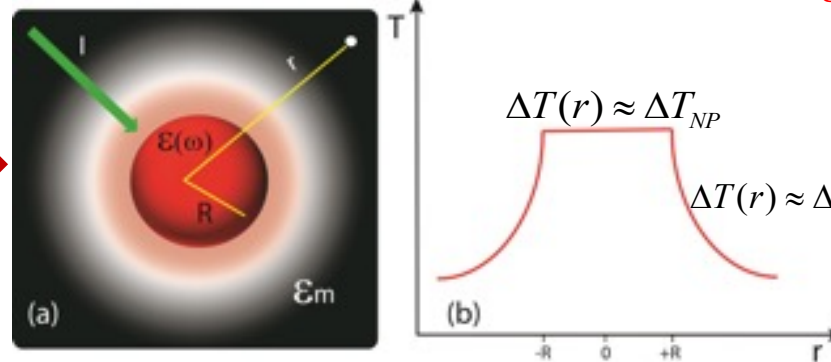
E. Cisbani ([evaristo.cisbani@roma1.infn.it](mailto:evaristo.cisbani@roma1.infn.it))

# Application of Au-NPs in medicine

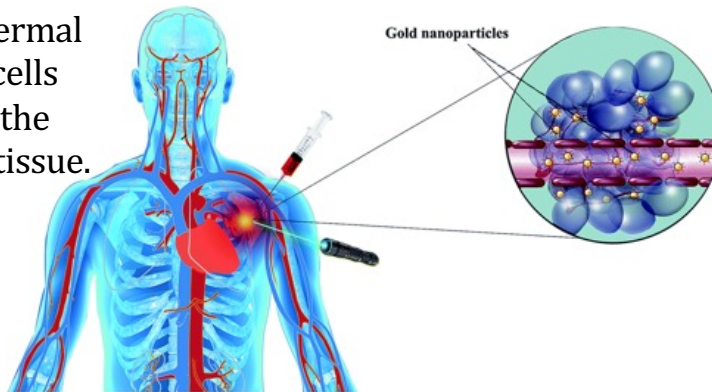
**Plasmonic-NPs**, thanks to a physical phenomenon called Localized Plasmonic Resonance (LPR), behave as **nano-sized sources of heat**.

**Plasmonic Photo-Thermal Therapy (PPTT)** is a drug-free cancer therapy utilized for producing a photothermal damage of tumors cells without damaging the surrounding healthy tissue.

A suitable laser radiation induces a localized heating



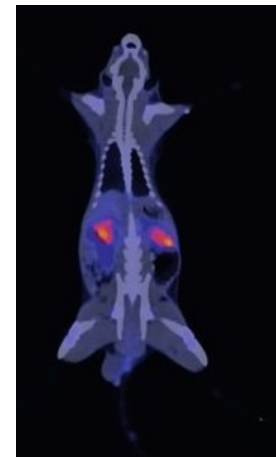
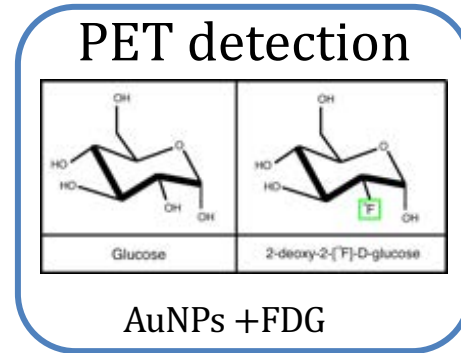
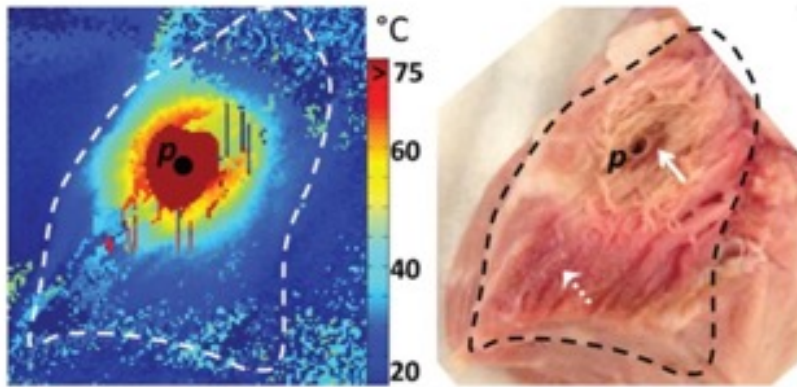
The  $1/r$  dependence of  $\Delta T(r)$  outside the sphere leads to an infinite amount of thermal energy stored in the surrounding medium.



## Au-NPs! why?

- Completely biocompatible
- Stable
- Easy surface functionalization

# In-vivo detection of photo-heated and radio labelled gold nanoparticles via MR (magnetic resonance) thermometry and PET (positron emission tomography) technique



PET imaging of radio labeled AuNPs

MR thermometry image (left) shows the temperature distribution under a resonant laser illumination of a cancer tissue (right)

For more details on available thesis topics

**Prof. Roberto Pani** ([roberto.pani@uniroma1.it](mailto:roberto.pani@uniroma1.it))

*In collaboration with: Center for Biophotonics/Latina (nanoparticles and optics);*

*Policlinico Umberto I (PET detector technology); S.M.Goretti/Latina (PET imaging)*



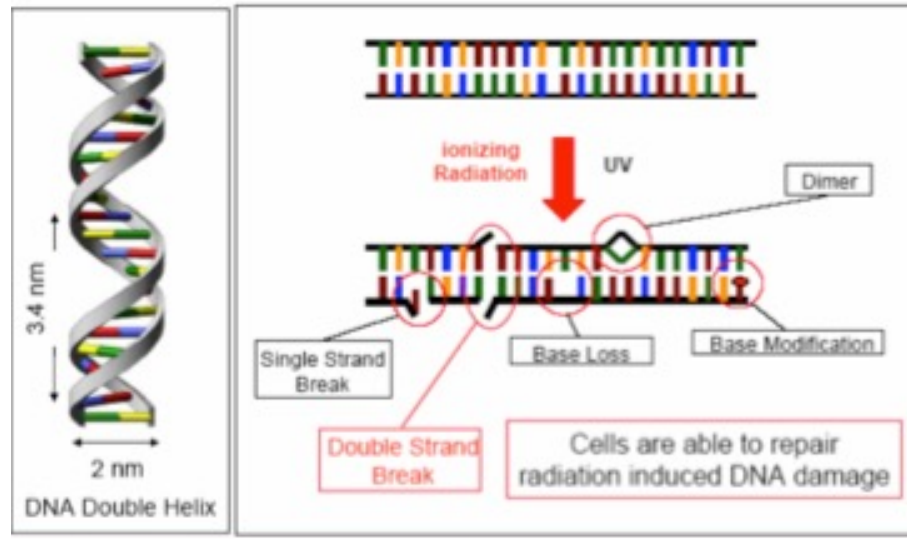
# Radiotherapy

From conventional to  
Hadrotherapy



# Radiotherapy

- Goal:
  - Deliver energy on tumor cells in order to break them in an irreparable way



Mean:

- passage of particles through matter



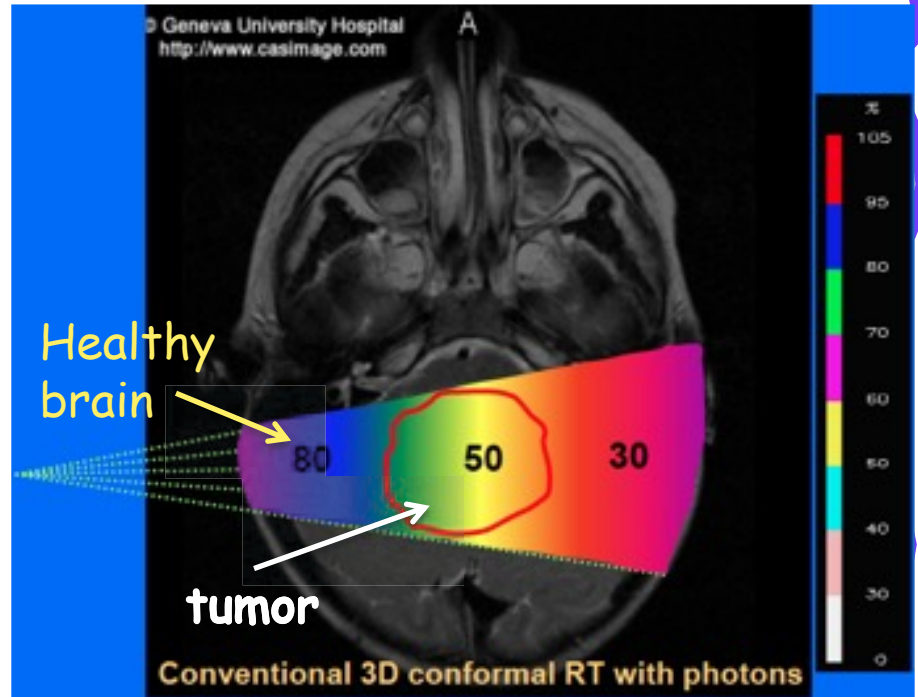
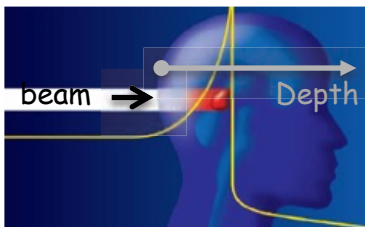
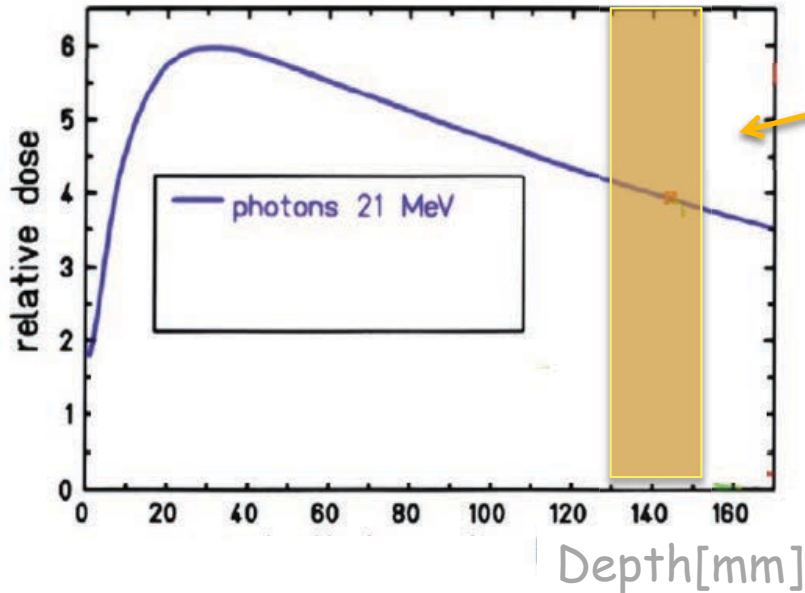


# Conventional radiotherapy



Photon beams on patient

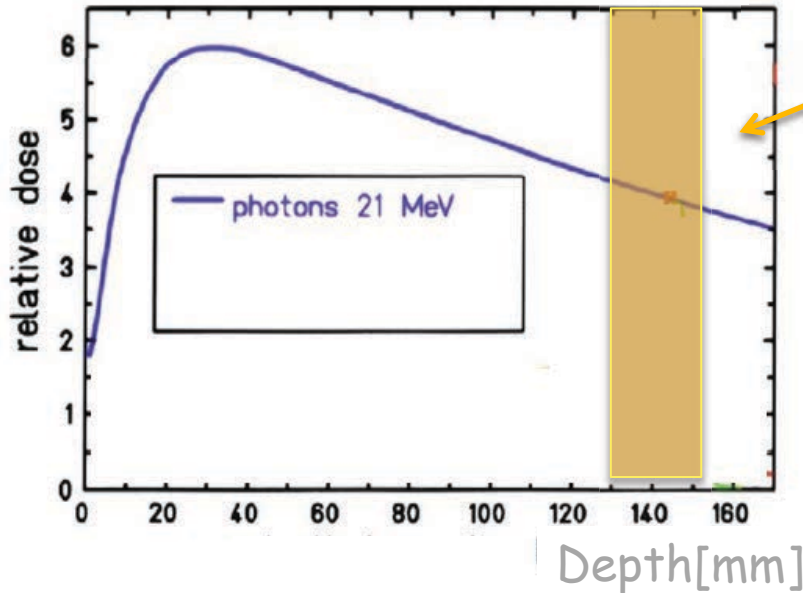
Large release of energy outside tumor



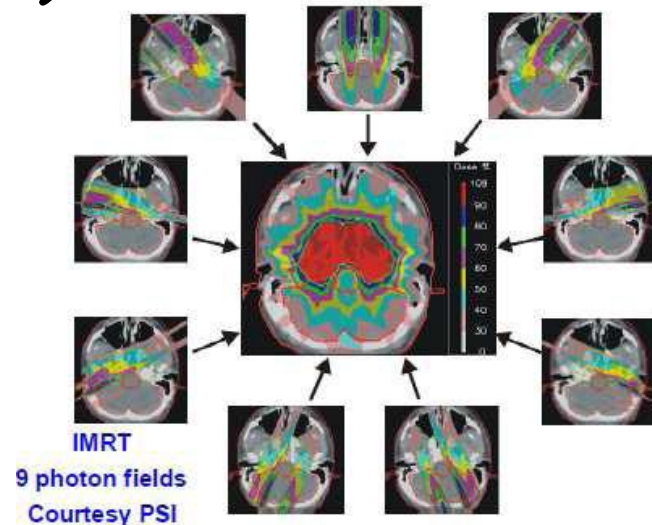
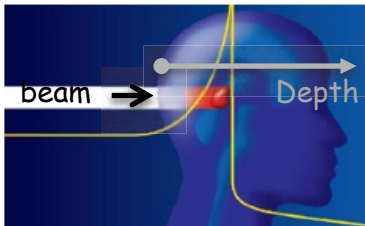
# Conventional radiotherapy



Photon beams on patient



- Large release of energy outside **tumor**
- Multiple beams each of smaller energy (IMRT)

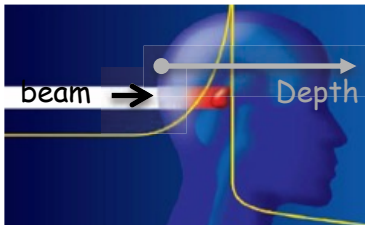
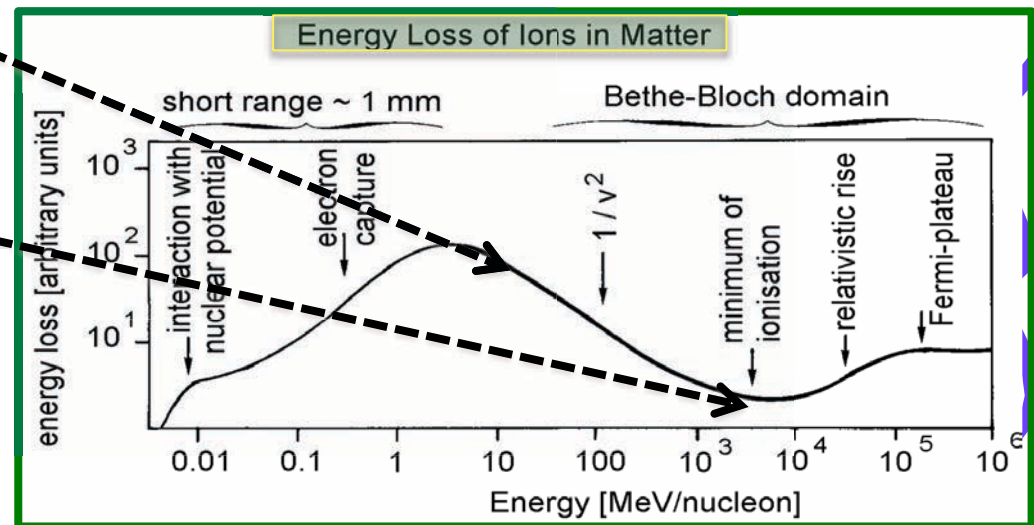
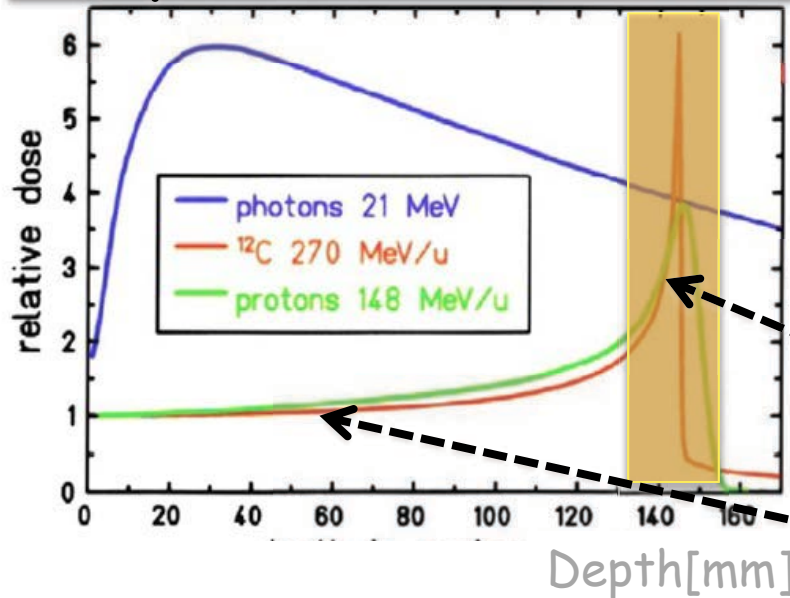


# Hadrontherapy

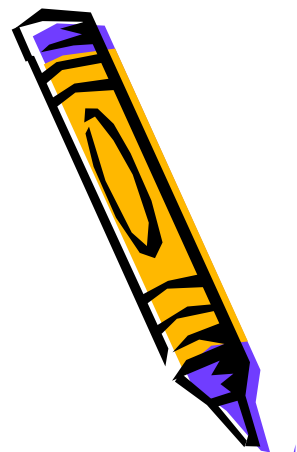


Proton/ion beams on patient

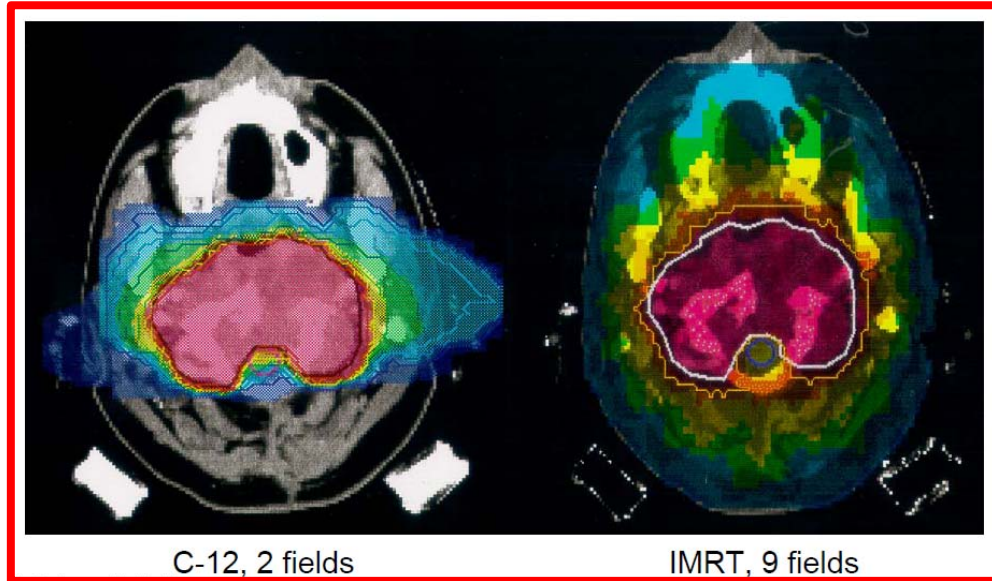
Concentrate release of energy inside **tumor** due to release of energy in ionization.



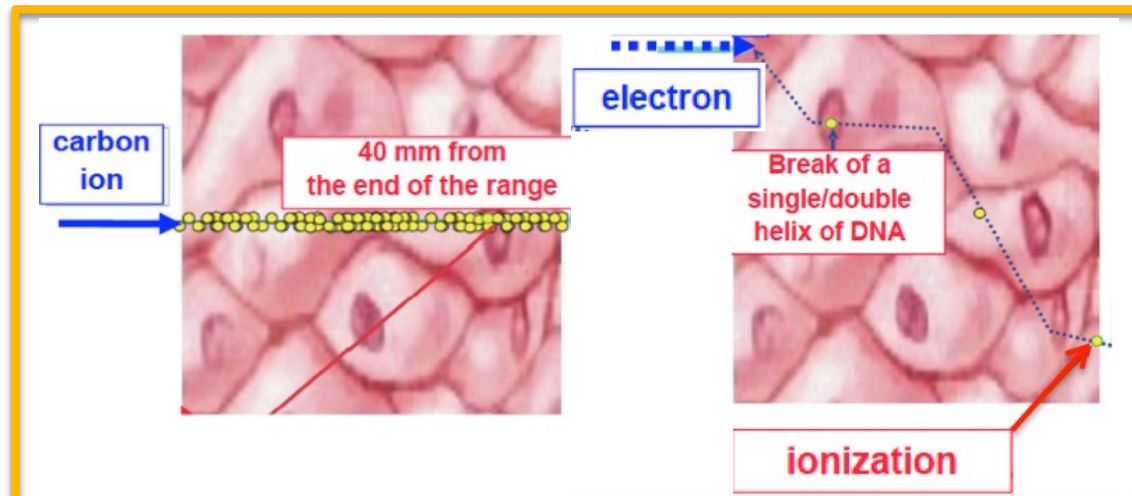
# Comparison $^{12}\text{C}$ vs IMRT



Better  
confinement of  
energy release



More effectiveness  
in killing cells



# The FLASH effect

Recently (starting from 2015, exploding from 2019) the 'fractionation' paradigm has been questioned.

- Before: dose has to be delivered in several fractions, and slowly as the 'healy' tissue has better healing capabilities and can recover in a better way → 60 Gy treatments are currently delivered in 30 fractions of 2 Gy that can last more than 1 month!



Radiotherapy and Oncology  
Volume 139, October 2019, Pages 18-22

First in Human  
Treatment of a first patient with FLASH-radiotherapy

Jean Bourhis <sup>a,\*, A. B.</sup>, Wendy Jeanneret Sozzi <sup>a</sup>, Patrick Duclos <sup>a</sup>, David Patin <sup>a</sup>, Mahmut Ozzahin <sup>a</sup>, François Bl Marie-Catherine Vozenin <sup>a, b, 1</sup>



Ia : Day 0      Ib : 3 weeks      Ic : 5 months

Oriatron eRT6 5.6-MeV linac located at Lausanne University Hospital → specifically engineered for accelerating electrons in a FLASH mode

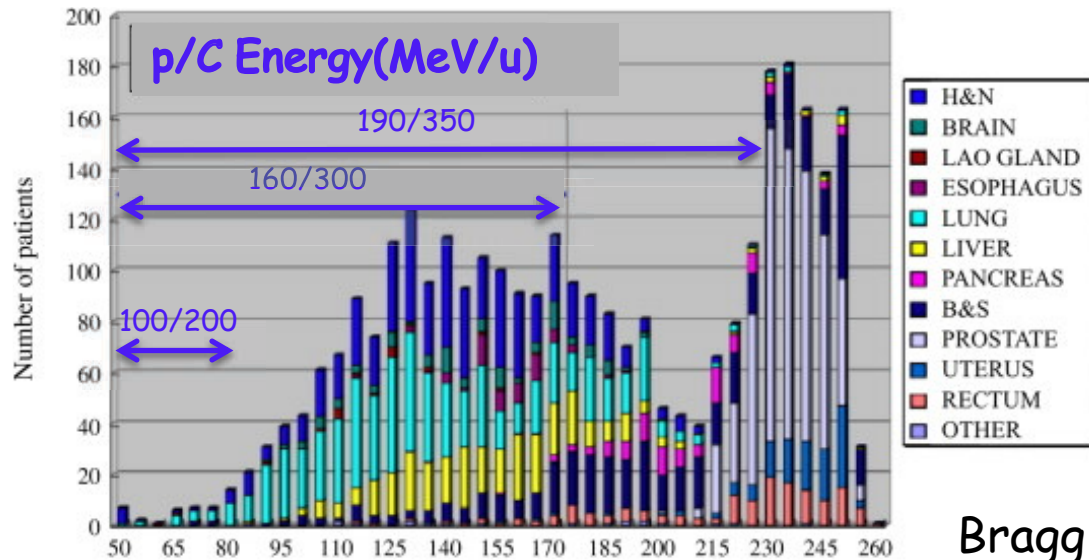
- Now: the FLASH revolution overturns that idea. A better sparing can be achieved if high doses and ultra high dose rates (3 orders of magnitude larger wrt conventional irradiation!) are used. Instead of going with 0.1 Gy/s one goes 100 Gy/s!
- Mechanism is yet to be understood... but.. It works!



# Accelerators



Required  
proton/Carbon  
energy



Bragg Peak  
depth (mm)

Proton Kinetic Energy between 100-250 MeV  
Carbon Kinetic Energy between 200-400 MeV/u



# Present of hadrotherapy

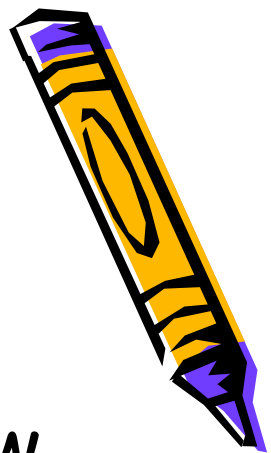


USA - 9 centres  
Japon - 8 centres  
Allemagne - 5 centres  
France - 2 centres  
Italie - 1 centre  
Suisse - 1 centre  
Taiwan - 1 centre  
Chine - 1 centre  
Corée du Sud - 1 centre



# HT: accelerators

- Cyclotrons: past, mostly for low energy applications (e.g. ocular tumors) → today up to 250 MeV/u
- Synchrotrons: present → cover also carbon-therapy
- Future applications: *CYCLINACS*, proton *LINACS*, ...



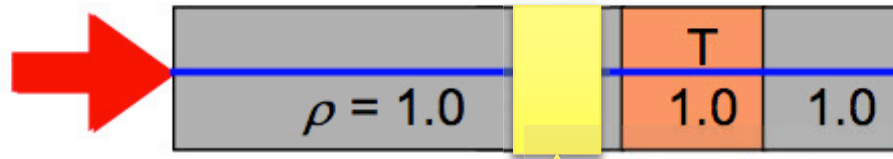


# HT: Monitoring the dose



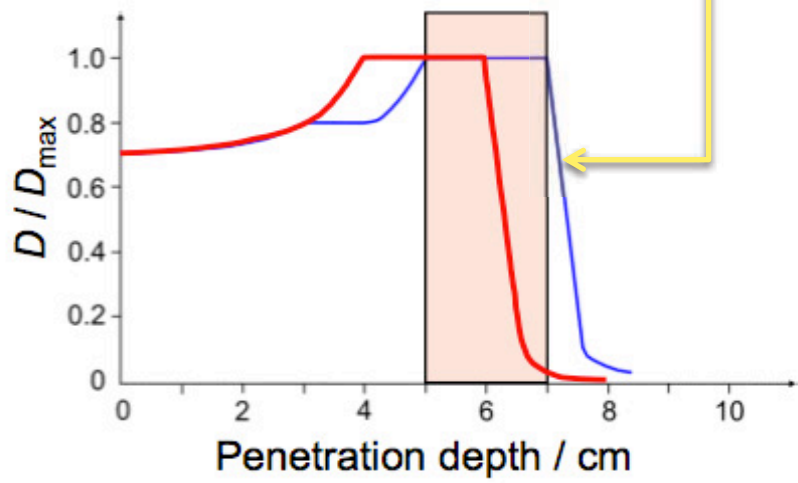
- Why is so crucial to monitor the dose in hadrontherapy? Is like firing with machine gun or using a precision rifle..

Effect of density changes in the target volume

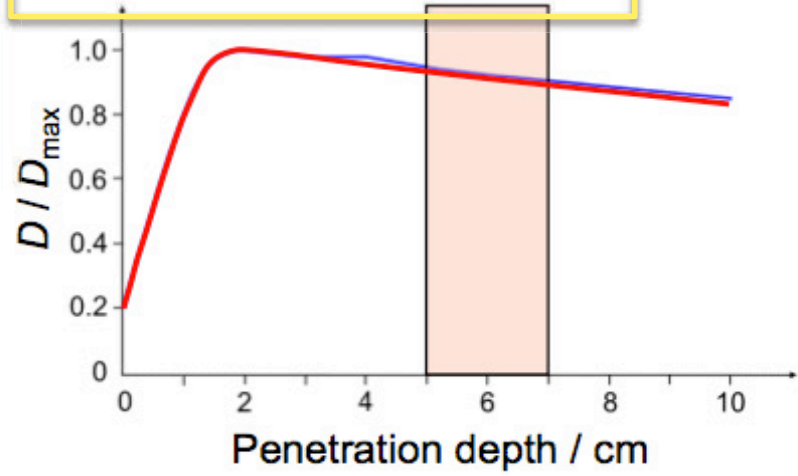


A little mismatch in density by CT  
→ sensible change in dose release

Ions



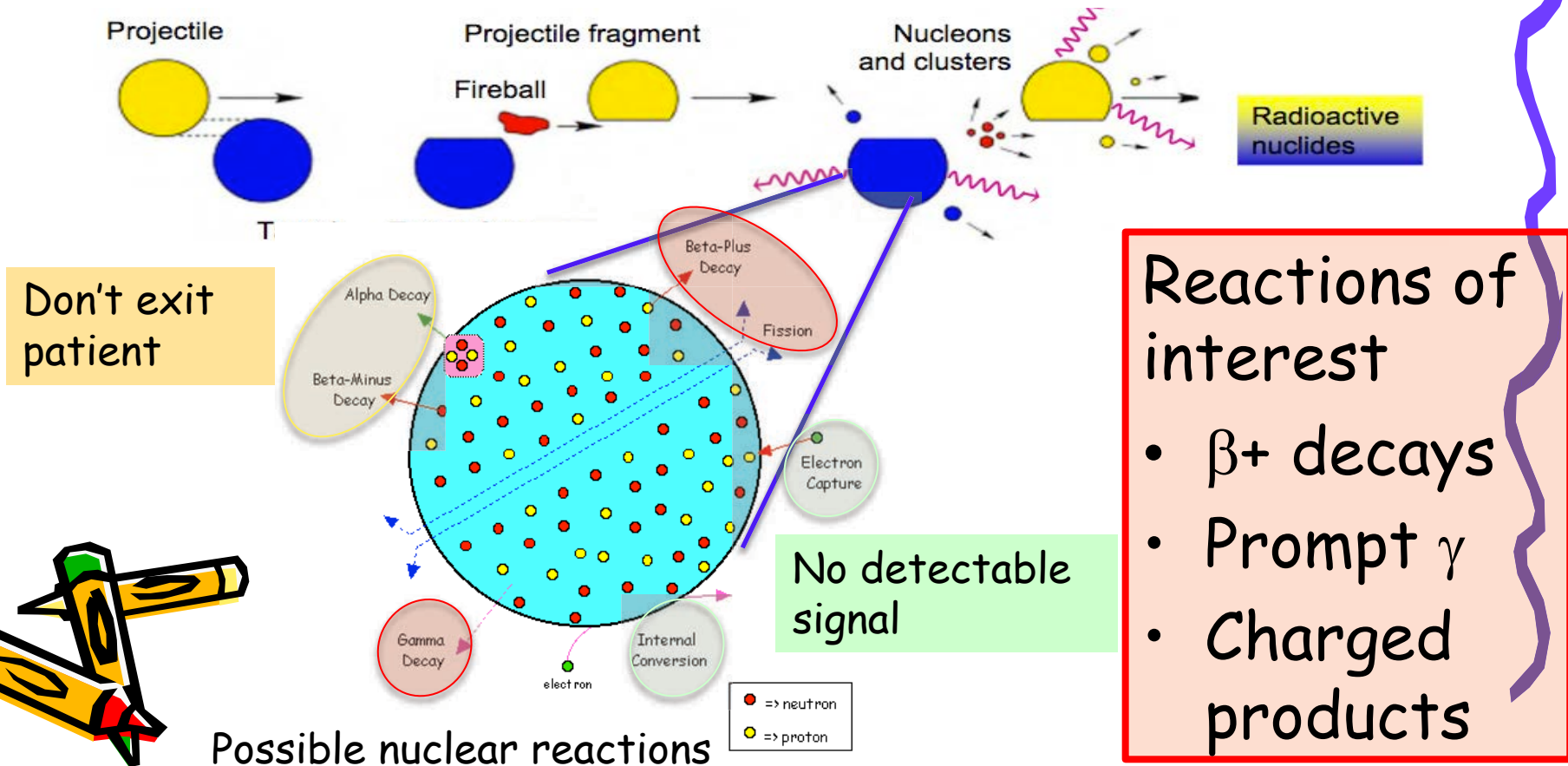
Photons



# Measuring the dose



Based on nuclear reactions between the projectile and the patient



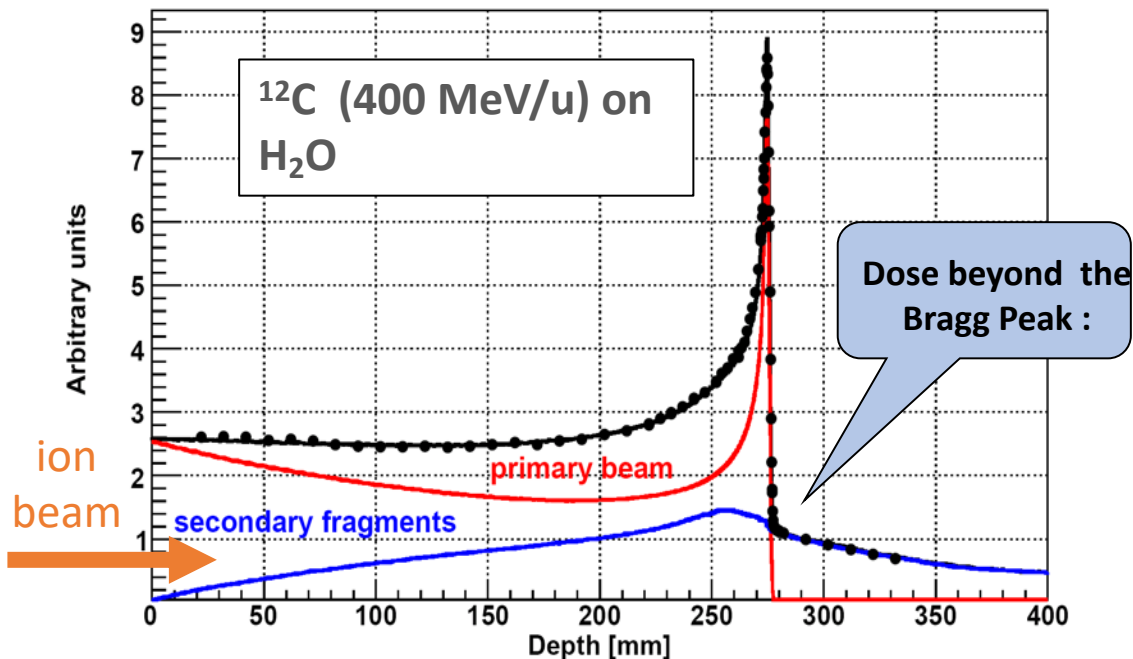


# Available theses

Radiotherapy

# Fragmentation in particle therapy

- **Projectile fragmentation:** production of fragments with **higher range** and **different direction** vrt the primary ions
- **Target fragmentation:** production of short range, low energy, high RBE fragments

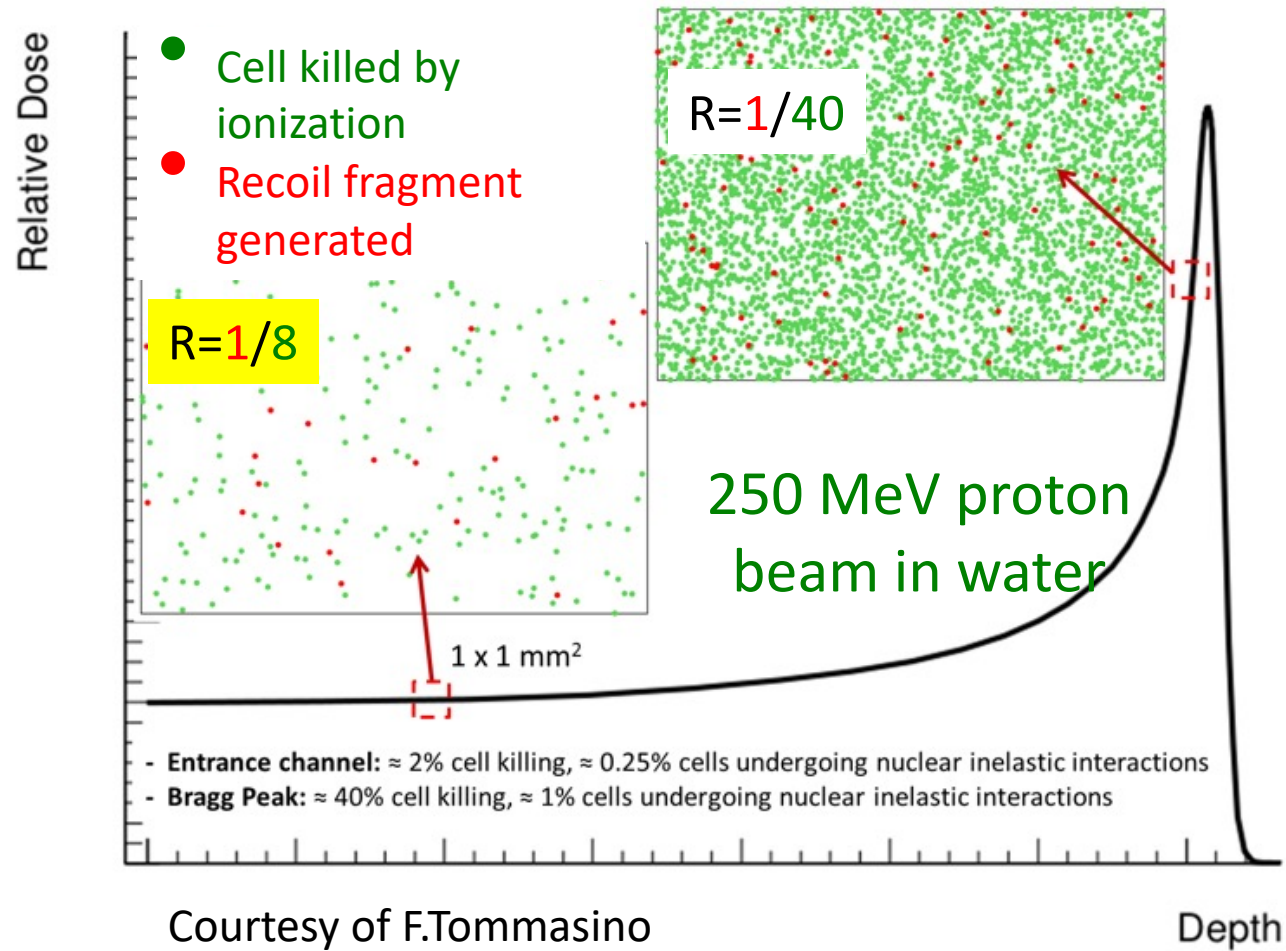


**Dose release in healthy tissues** with possible long term side effects, in particular in treatment of young patients → **must be carefully taken into account in the Treatment Planning System**

Exp. Data (points) from Haettner et al, Rad. Prot. Dos. 2006  
 Simulation: A. Mairani PhD Thesis, 2007, Nuovo Cimento C, 31, 2008

# Target fragmentation & RBE

Target fragmentation in proton therapy: gives contribution also outside the tumor region!



About 10% of biological effect in the entrance channel due to secondary fragments

**Largest contributions of recoil fragments expected from He, C, Be, O, N**

See also dedicated MC studies:

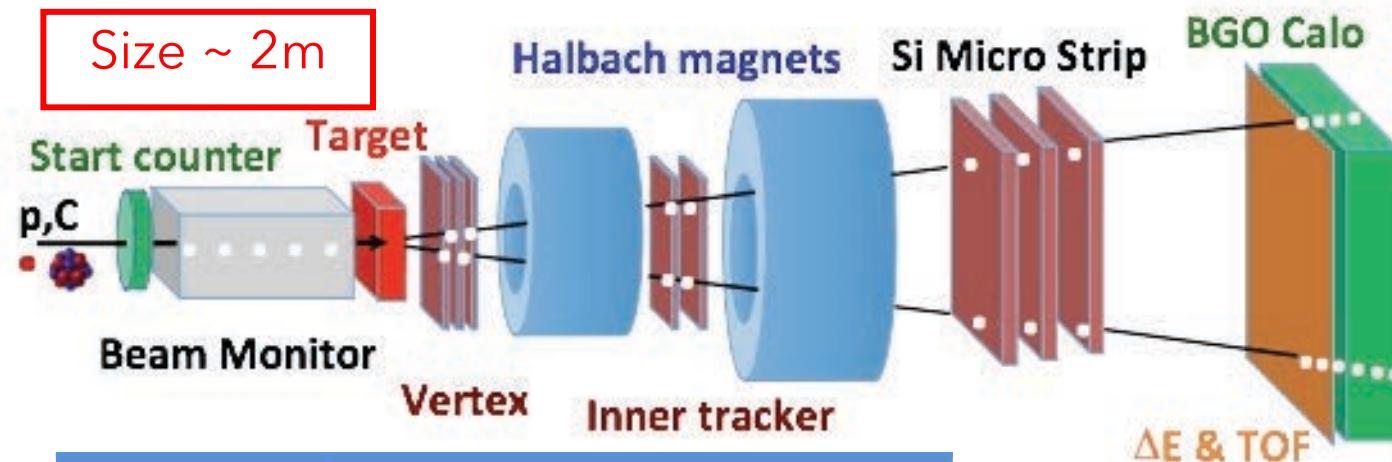
- Paganetti 2002 PMB
- Grassberger 2011 PMB

Courtesy of F.Tommasino



# The FOOT setup

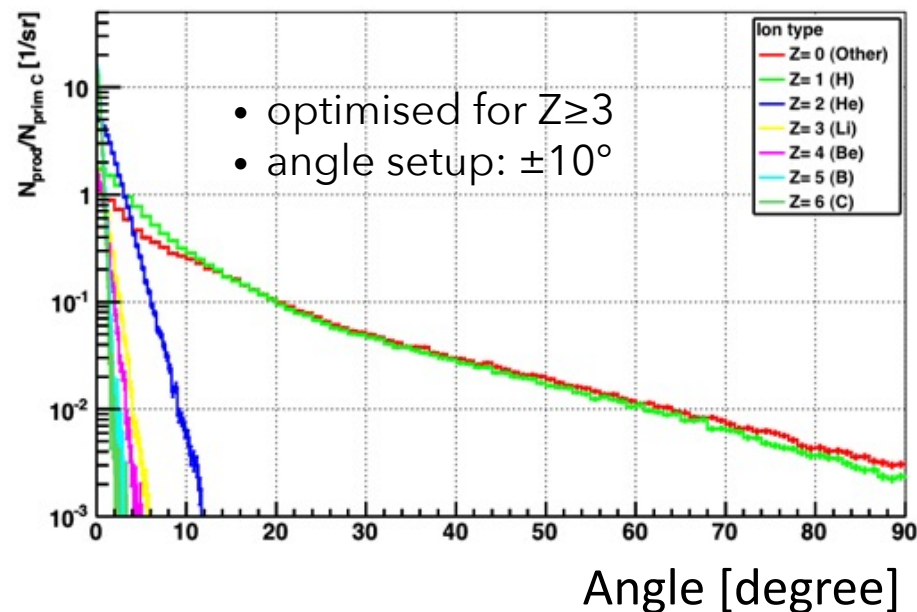
Size ~ 2m



## Target performances

- $\Delta p/p < 3.5\%$
- $\Delta_{TOF} < 70\text{ps}$
- $\Delta E_{kin}/E_{kin} < 2\%$
- $\Delta(dE)/dE \sim 3\%$

Sub-detector	Main characteristics
Start counter	plastic scintillator 250 $\mu\text{m}$
Beam monitor	drift chamber (12 layers of wires)
Target	C+C <sub>2</sub> H <sub>4</sub> (2 mm)
Vertex	4 layers silicon pixel (20x20 $\mu\text{m}$ )
Magnet	2 permanent dipoles (~ 1 T)
Inner tracker	2 layers silicon pixel (20x20 $\mu\text{m}$ )
Outer tracker	3 layers silicon strip (125 $\mu\text{m}$ pitch)
Scintillator	2 layers of 20 bars (2x40x0.3 $\mu\text{m}$ )
Calorimeter	360 BGO crystals (2x2x14 $\mu\text{m}$ )



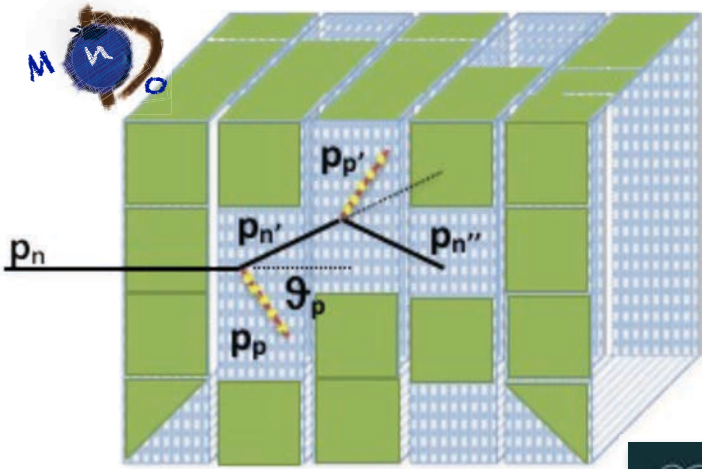
Thesis topics contacts

V. Patera ([vincenzo.patera@roma1.infn.it](mailto:vincenzo.patera@roma1.infn.it))

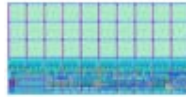
A. Sarti ([alessio.sarti@roma1.infn.it](mailto:alessio.sarti@roma1.infn.it))

# MONDO

In Particle Therapy (PT) the beam interacts with the patient producing secondary particles. Secondary neutrons can release **additional dose** also far away from the volume under treatment. The incidence (also years after the treatment) of SMNs (**Secondary Malignant Neoplasm**) impacts directly on the quality and life expectation of the patient.



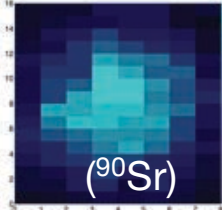
Chip (SBAM)



Tile (4x4 chips)

Module Fibre

MONDO is a **tracking detector** that exploits double neutron elastic scattering to reconstruct the energy and the direction of the secondary neutrons produced in PT.

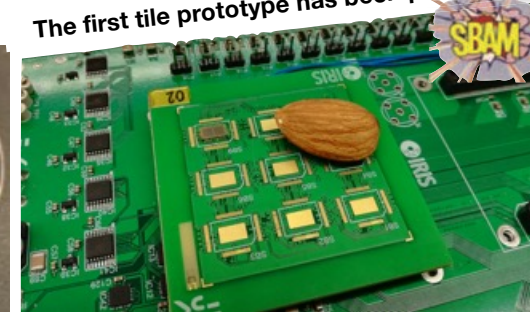
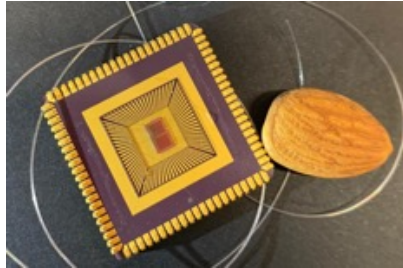


A dedicated readout silicon based system is under development in collaboration with FBK.

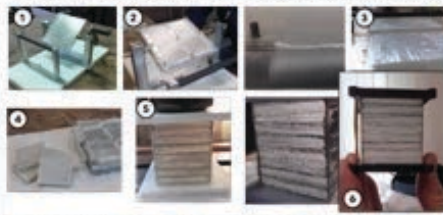


The first tile prototype has been produced

**MONDO: 16 x 16 x 20 cm<sup>3</sup>**

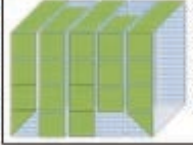


**PENELOPE: 4 x 4 x 4.8 cm<sup>3</sup> (fibre 250 µm, double cladding)**



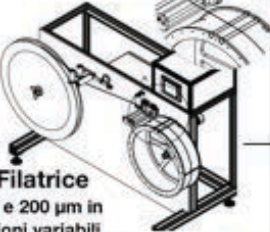
**ULISSE: 4 x 4 cm<sup>2</sup> x 0.250 mm (fibre 250 µm, double cladding)**





Struttura Modulare per ottimizzare l'accoppiamento con il sistema di readout

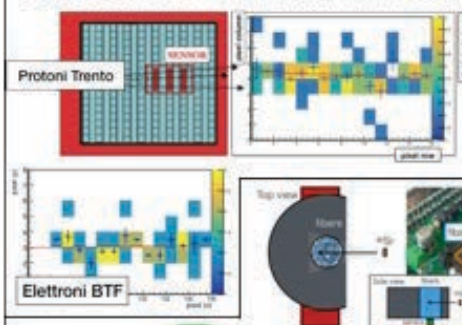
(fibre 250 µm, double cladding, mylar alluminato tra piani)



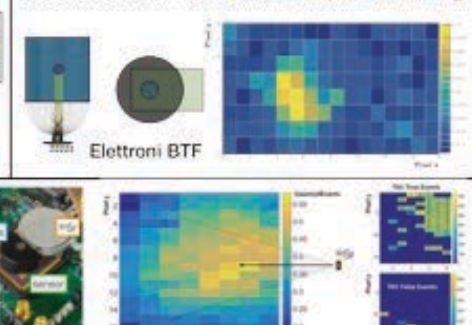
**Macchina Filatrice**  
per fibre da 250 e 200 µm in piani di dimensioni variabili

**ARGO: 2 x 2 x 1 cm<sup>3</sup>**


**PENELOPE: 4 x 4 x 4.8 cm<sup>3</sup> (fibre 250 µm, double cladding)**



**ULISSE: 4 x 4 cm<sup>2</sup> x 0.250 mm (fibre 250 µm, double cladding)**




**SBAM:**

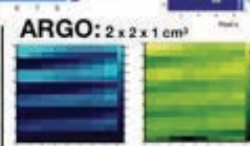


**TILE di SBAM**



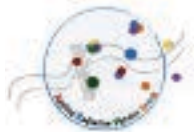


**ARGO: 2 x 2 x 1 cm<sup>3</sup>**



Thesis topics contact  
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([michela.marafini@roma1.infn.it](mailto:michela.marafini@roma1.infn.it))

E.Gioscio, et al. "Development of a novel neutron tracker for the characterisation of secondary neutrons emitted in Particle Therapy" under press on NIM A (2019) 162862 doi: <https://doi.org/10.1016/j.nima.2019.162862>



# The FRIDA project

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The FLASH implementation demands ultra high dose rates and a minimum dose per fraction: PT treatments can hardly satisfy such requirements: therapy with electrons, instead looks very promising!

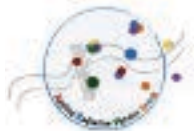
A new R&D era for accelerators (high intensities are needed!), beam monitors and dosimeters (UHDR cannot be addressed with standard Ionization Chambers), and treatment planning tools is just started..

FRIDA [Flash Radiotherapy with high Dose-rate particle beAms, <https://web.infn.it/FRIDA>] is an INFN project that will address all the different challenges in the field..



In roma three main items: accelerator development [not covered here], beam monitoring, treatment planning!

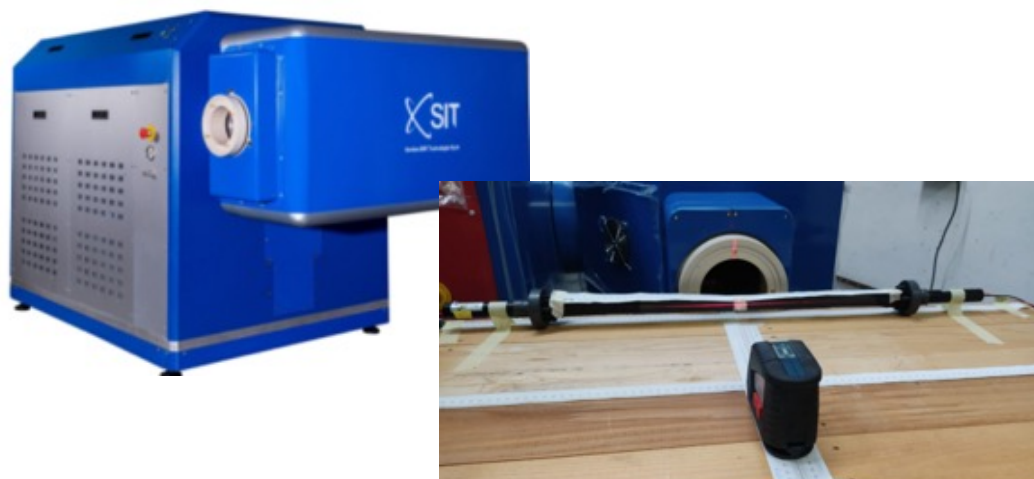




# Monitors for UHDR

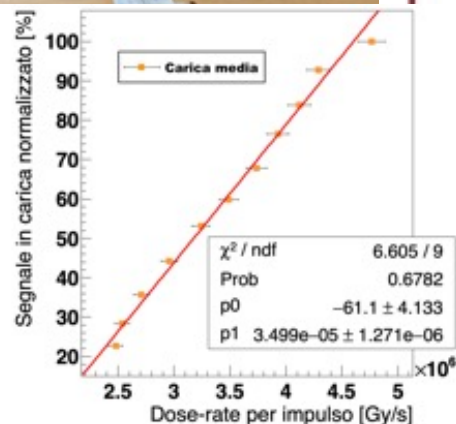
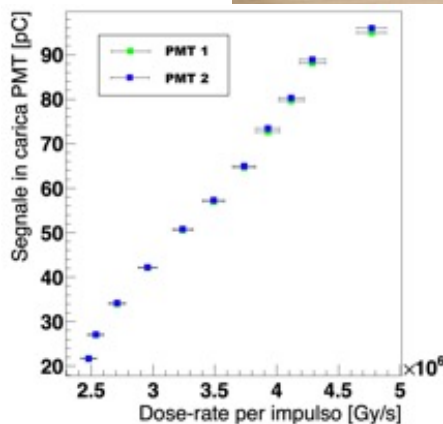
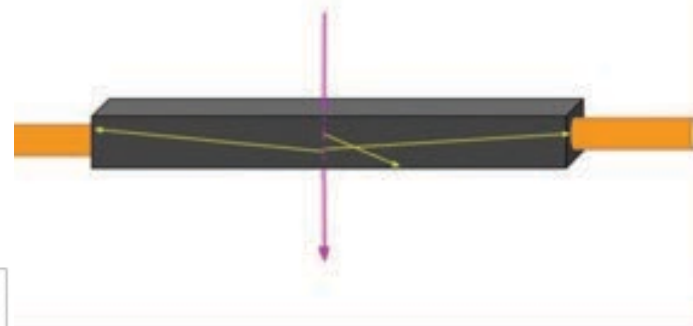
At ultra high dose rates, beams can induce fluorescence in air that could be exploited to measure the beam intensity.

A prototype detector has been built (just to demonstrate the possibility to exploit the effect) and has been tested against an e- beam at FLASH intensities..



**Prototipo di beam monitor (Tubino):** parallelepipedo lungo 60 cm e con sezione di 4 cm con due PMT ai bordi.

**Materiali:** rivestimento in **PTFE** (trasparente al fascio), l'interno è in **PVC** (materiale assorbente).



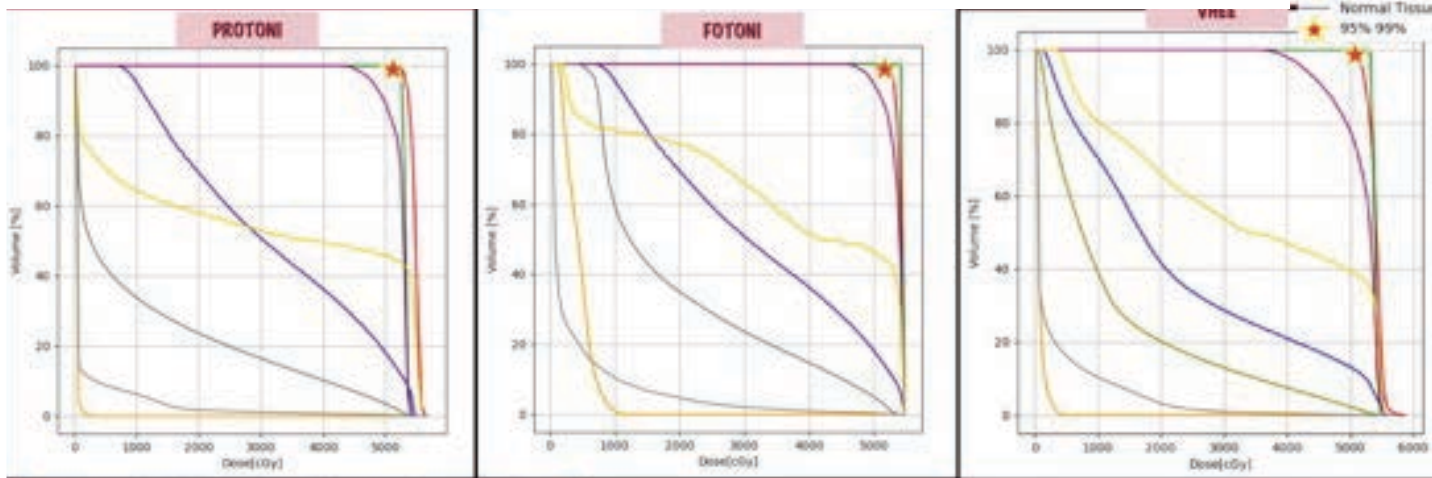


# Planning VHEE treatments

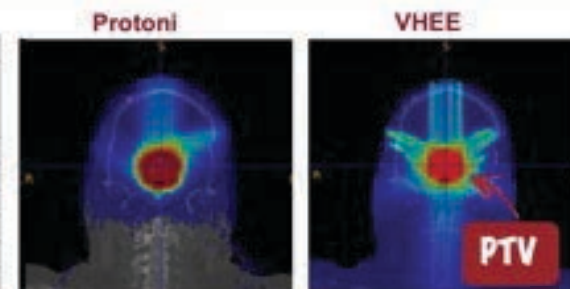
FRIDA aim is to explore what Very High Energy Electrons can do (VHEE), for the treatment of deep seated tumors..

Prostate, Head & neck have been already studied..  
**Promising preliminary results have been already obtained..**  
 Other districts can be explored (Pancreatic cancer... Lungs..)

Es: trattamento di un meningioma con protoni, RT convenzionale e VHEE. Il trattamento prevede ~60 Gy di dose, ed è effettuato in presenza di organi a rischio in estrema prossimità (nervi ottici, chiasma, tronco encefalico..)

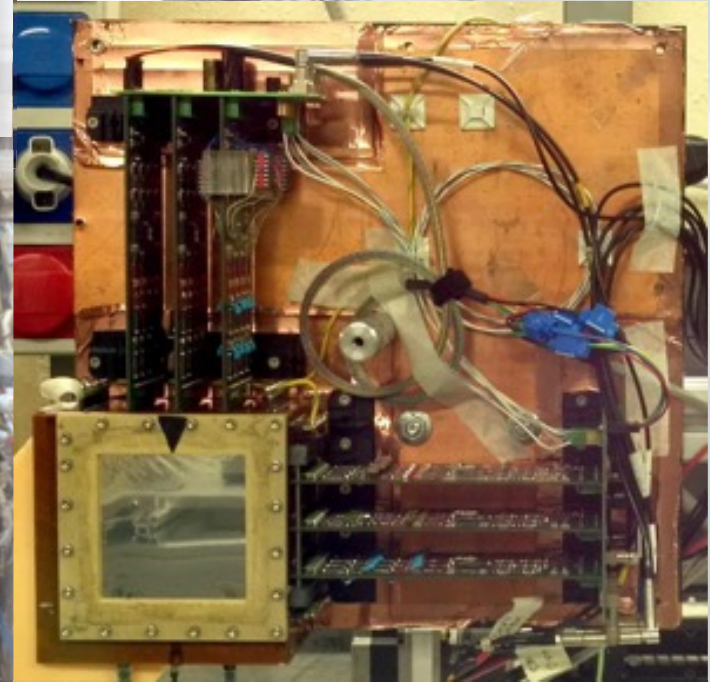


CONFRONTO TRA I VINCOLI DOSE-VOLUME				
Organo		Protoni	Fotoni	VHEE
PTV	$V_{95\%}$	100%	100%	99.44%
	$V_{100\%}$	90.62%	81.60%	67.41%
	$V_{105\%}$	0.01%	0.01%	1.16%
Nervi Ottici	$D_{max}$	53.52 GyRBE	54.36 GyRBE	55.61 GyRBE
Chiasma	$D_{max}$	53.60 GyRBE	54.19 GyRBE	54.59 GyRBE
Vie Ottiche Posteriori	$D_{max}$	53.81 GyRBE	54.30 GyRBE	55.13 GyRBE
Occhi	$D_{max}$	2.82 GyRBE	12.62 GyRBE	4.76 GyRBE
Tronco Encefalico	$D_{max}$	54.26 GyRBE	53.61 GyRBE	54.73 GyRBE
Arterie Carotidi	$V_{105\%}$	0.03%	9.17%	0.19%



# Protontherapy: Dose Monitors for p-LinAc

**TOP-IMPLART facility:** proton Linear Accelerator for cancer therapy under development @ENEA-Frascati



2D segmented ionization chamber prototype in Micro-Pattern Gaseous technology for the simultaneous x/y beam profile monitor

Main activities:

- R&D on alternative sensors (e.g. Micro Megas) for very high beam intensity monitor
- Readout electronics upgrade and related software
- Test and calibration campaigns
- Radiobiology irradiation studies

Thesis topics contacts

E. Cisbani ([evaristo.cisbani@roma1.infn.it](mailto:evaristo.cisbani@roma1.infn.it))

# Protontherapy: Low Energy Proton Vertical Line

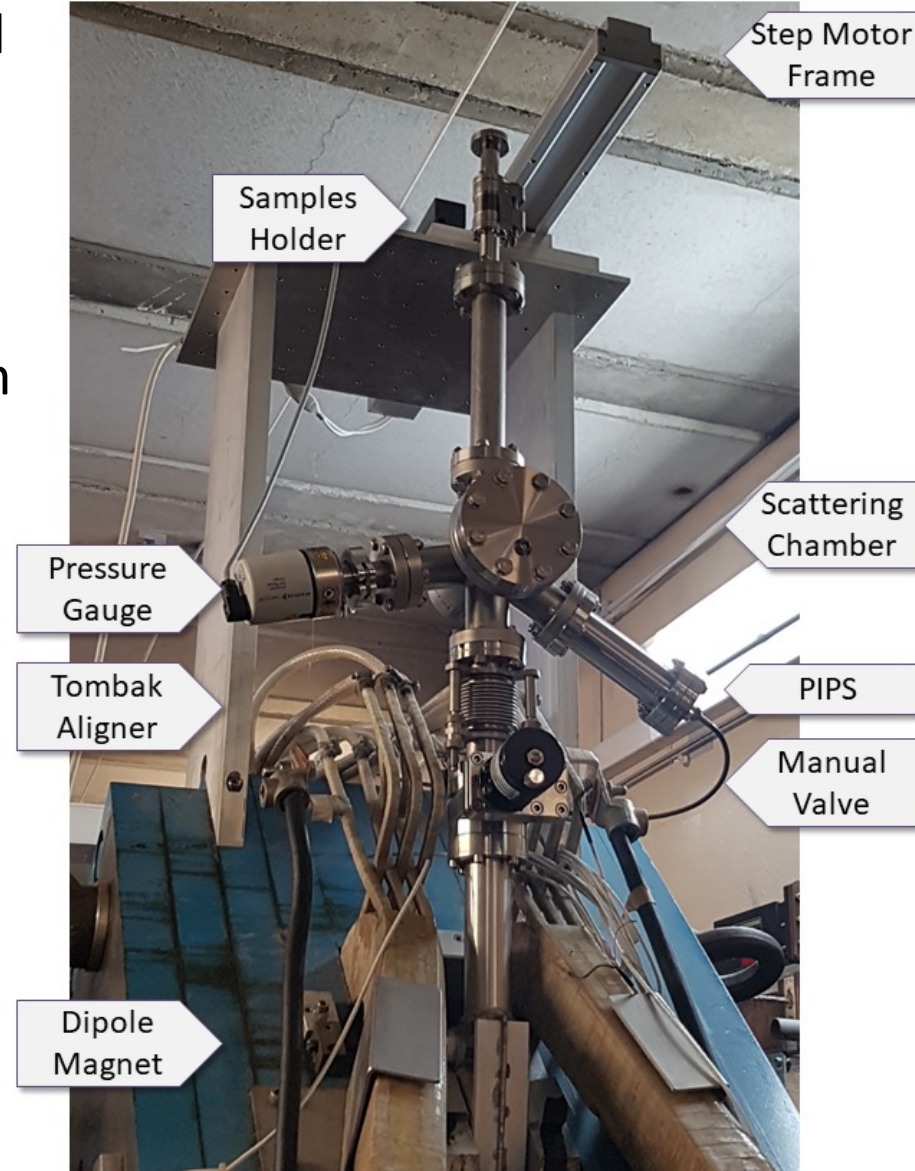
- Peculiar facility for radiobiological and other irradiation experiments
- part of TOP-IMPLART LINAC
- Essential to define optimal delivery protocols of the unique p-LINAC beam

## Main activities:

- Characterization of fluence monitors and dosimeters based on Silicon, naked Diamond and LiF detectors
- Inter-calibration campaigns
- Data analysis and optimization of working conditions

Thesis topics contacts

E. Cisbani ([evaristo.cisbani@roma1.infn.it](mailto:evaristo.cisbani@roma1.infn.it))





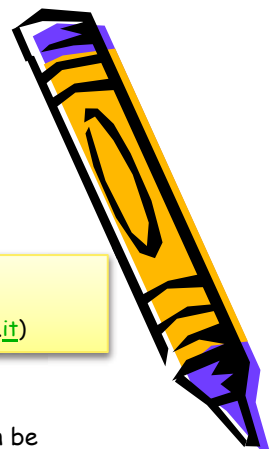
# Available theses

Accelerators



# Thesis with Sapienza SBAI group

Thesis topics contact  
L. Palumbo  
([luigi.palumbo@uniroma1.it](mailto:luigi.palumbo@uniroma1.it))



Title: Compact cryogenic electron source for advanced radiation sources

A new generation of particle sources is foreseen in order to provide beams of unprecedented six-dimensional brightness which can be employed to drive novel radiation sources, such as FELs and Compton sources. Radio-frequency photo-injectors operated at cryogenic temperatures are capable to achieve very high accelerating fields which enhance the peak brightness of the electron beam reducing its emittance. The design of such advanced devices is a challenging task which demands strong efforts, either technologically and for a successful control of the dynamics of the ultra-bright beam itself. (esperimento: INFN-ARYA)

Title: Plasma accelerators for novel radiation sources

Plasma based accelerator can profit off an extremely high accelerating field, order of magnitude higher than conventional accelerators. Experimental studies have been performed to produce ultra-short driver and witness beams with excellent transverse properties, starting from the optimization of beam generation device (laser on photocathodes) and then finely tuning the following linear accelerator to produce a high brightness beam at entrance of the plasma cell. Among others, the main activities concern simulation studies for the optimization of plasma density profile, experimental studies for the beam transport optimization, design and construction of an ultra-compact beam position monitor, executive design of Cherenkov effect based beam diagnostics as well as studies on graphene-copper photocathodes. (esperimento: INFN-SL\_Comb2Fel)

Title: Medical electron accelerators for Flash Therapy

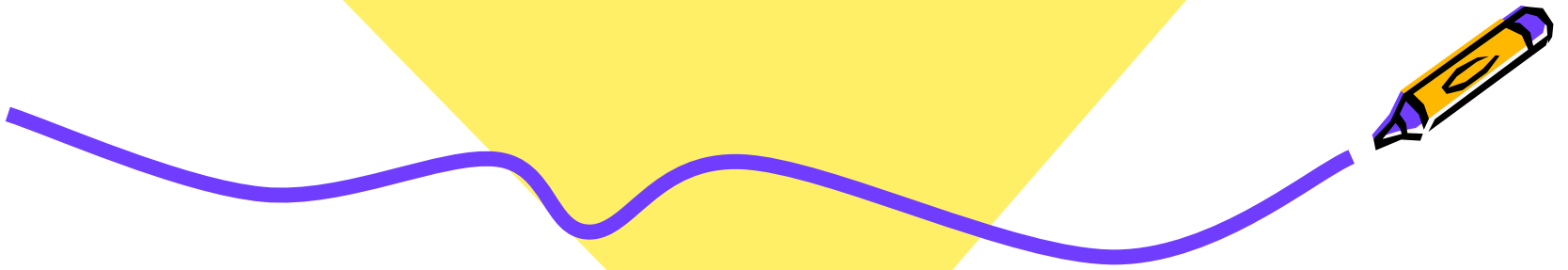
The Radiation Therapy (RT) is nowadays one of the most common methodology to treat cancer cells. The most important requirement is to destroy the cancer cells and to minimize the damage of the healthy cells as well as any side effect. In this scenario, an innovative technique has been proposed and already tested: the FLASH Therapy, which uses short pulses of electrons at very high dose rates. It foresees millisecond pulses of radiation (beam on time < 100-500ms) delivered at a high dose-rate (>40-100 Gy/s), over 2000 times faster and more than 1000 more intense than conventional RT. These bursts of radiation are less harmful to healthy tissues but just as efficient as conventional dose rate radiation to inhibit cancer growth. We will work on the implementation of this methodology based on an electrons linear accelerator. (esperimento INFN-ARYA)

Title: Compact linear electron accelerators for sterilization

The use of ionizing radiation is a well-established approach for the sterilization of industrial and medical devices. In order to be achieved, bursts of high doses are required (few kGy). High intensity pulses of electron and X-ray beams, which destroy the DNA of bacteria and other pathogens, are able to deliver the required dose in a short amount of time (few seconds) for the sterilization process. Nowadays, RF accelerators and in particular linacs (linear accelerators) are important devices used for such purpose. Nevertheless, most linacs work in S-band are bulky and expensive machines that often are not suitable for small facilities. In this scenario, there is a need for the development of a novel design of an ultra-compact linac that can be proposed as a viable solution for the production of high pulsed beam currents (up to few mA) and medium-low energies (below 9 MeV). The choice of the operation RF frequency range, such as C-band, will need to be explored with RF and beam dynamics optimization procedure. Moreover, up-to-date fabrication techniques will be investigated in order to obtain the design of an ultra-compact and low-cost linac that can be installed also in small facilities.



# Artificial Intelligence in Medicine



# AI Applied to Medical Imaging

**Aim:** help the clinician to take clinical decision based on images (CT, MRI, PET..)

Various **tasks:**

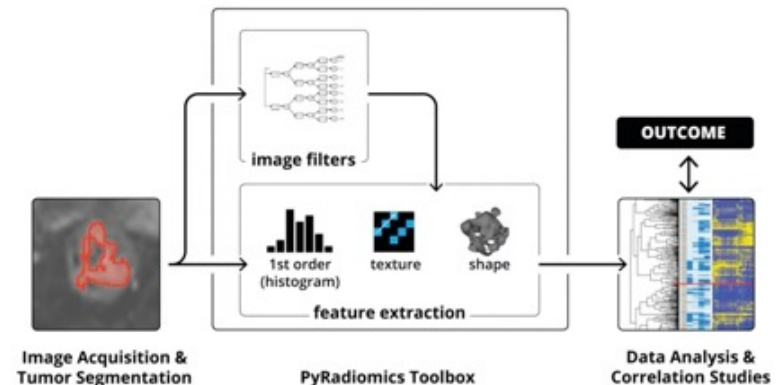
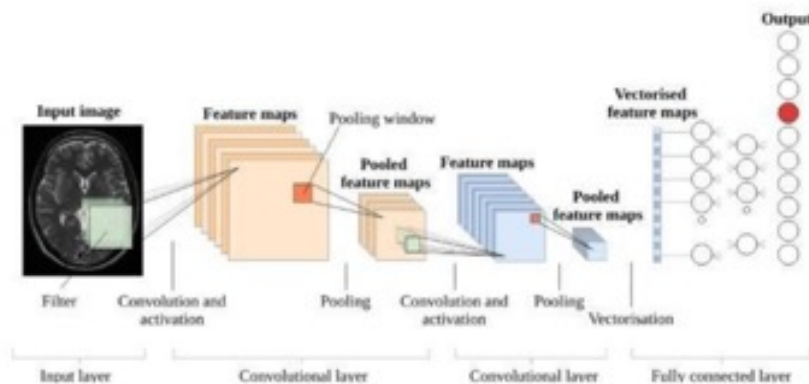
- segmentation of lesion (e.g. tumor)
- tumor staging and re-staging
- prognosis
- evaluation of response to therapy

The image can be directly input to a **Neural Network** that learns a specific task

OR

**Radiomic pipeline**

=> compute mathematical quantities (features) from the images and then use a AI algorithms to learn the task ..

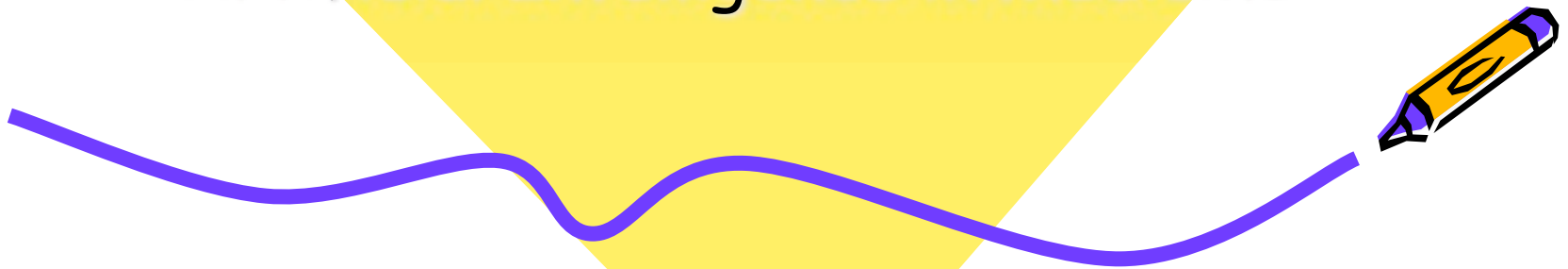






# Available theses

Artificial Intelligence in Medicine



# ATTRACT- AI based Radiogenomics in Colon Tumors

Funded AIRC project in collaboration with Policlinico Umberto I (2021-2025)

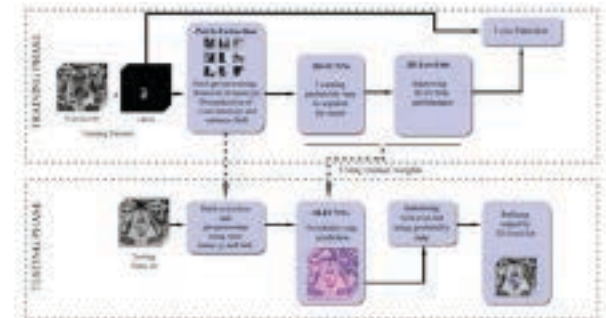
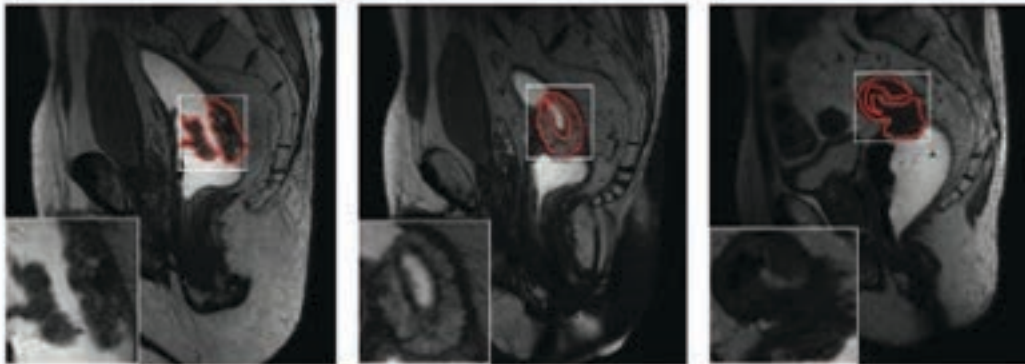
Goal: develop a **radiogenomic signature** that characterize colon tumor =

**Radiomic & Machine learning techniques** applied to colon CT and genomic data

Steps:

- tumor segmentation with artificial network from CT
- radiomic feature extraction and reduction
- radiogenomic model

300 retrospective annotated cases  
200 prospective annotated cases for external validation



Thesis topics contact  
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C.Voena ([cecilia.voena@uniroma1.it](mailto:cecilia.voena@uniroma1.it))

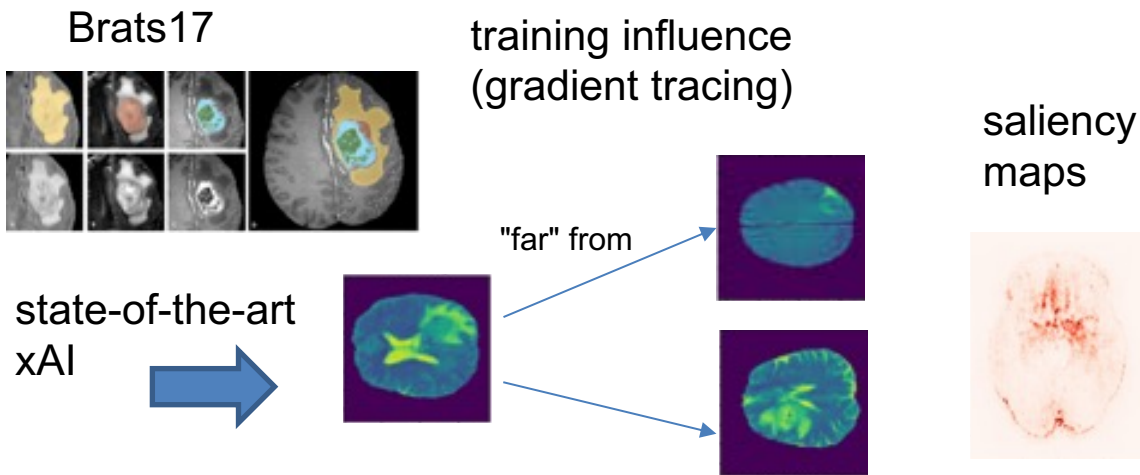
# MUCCA- AI Explainability of Medical Imaging

Funded by CHIST-ERA (EU) call "Explainable Artificial Intelligence"

**Goal:** develop explainable AI algorithms in different fields (Physics Applied to Medicine, High Energy Physics, Physics Applied to Neuroscience)



**Explainable AI models for the brain lesion segmentation** in publicly available MRI dataset (Unet2D, Resnet 3D)



Thesis topics contact  
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C.Voena ([cecilia.voena@uniroma1.it](mailto:cecilia.voena@uniroma1.it))

# CORONA – Prognostic Algorithm for COVID-19

- The goal of the project is to make **real-time predictions of the patient respiratory condition** and functional response at few days using an **AI algorithm** on the basis of:

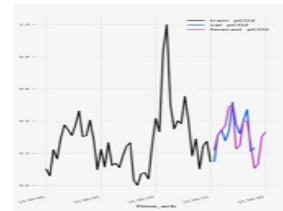
initial CT



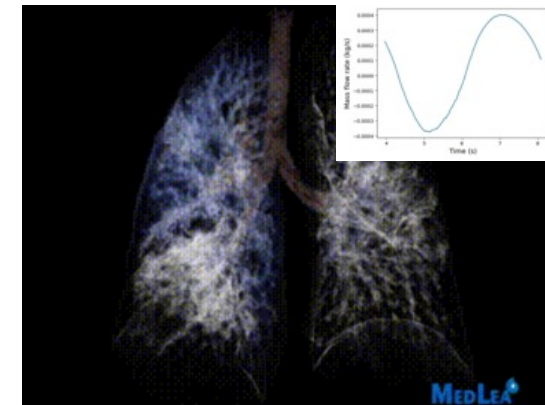
Arterial Blood Gas (ABG) analysis



Time series prediction



biomechanical simulations



Can be a support to ventilatory management

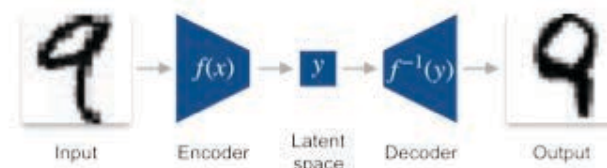
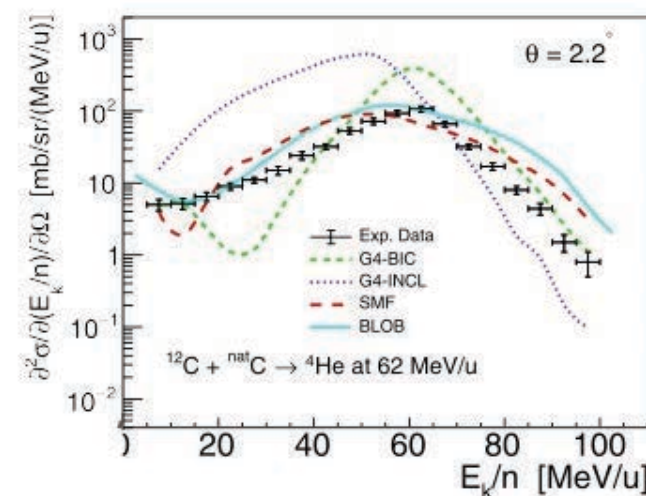
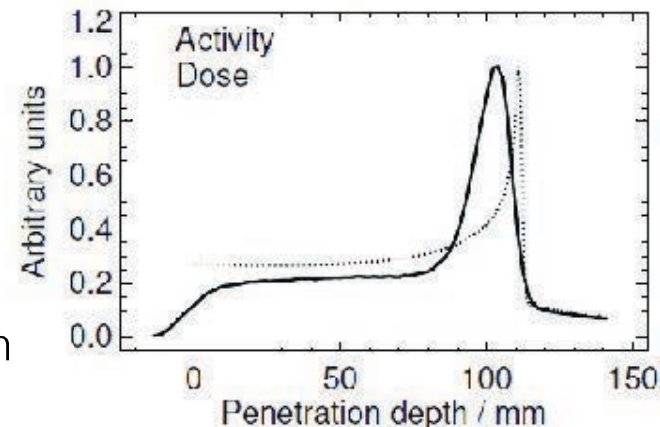
Collaborative research agreement between INFN, Sapienza, and Medlea srls

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# Emulate a low energy nuclear interaction model with Deep Learning

<http://www.roma1.infn.it/exp/gen>

- Nuclear reaction models are of utmost importance for MC simulation in hadrontherapy
- Geant4 is one of the most used tools to develop MC simulation also in this domain (also through a dedicated program, TOPAS)
- Its models fail to simulate nuclear reactions below 100 MeV/u
- We interfaced a model developed by theoreticians but it's far too slow
- It's possible to use Deep Learning generative algorithms (such as VAE and GAN) to emulate the model
- We published a paper with preliminary results but it has to be optimised and finalised
- Several tasks could become a thesis



- A. Ciardiello et al. Phys. Med. 73 (2020). doi: 10.1016/j.ejmp.2020.04.005. arXiv: 2004.0496
- C. Mancini-Terracciano et al. Phys. Med. 67 (2019), doi: 10.1016/j.ejmp.2019.10.026.

# The Neptune project

Goal: **enhancement of proton therapy effectiveness** using nuclear reactions

Technique: administration of borated and fluorinated compounds, that accumulate in tumor, to patients before irradiation



**development of  ${}^{19}\text{F}$ -MRI imaging**

nature.com > scientific reports > articles > article

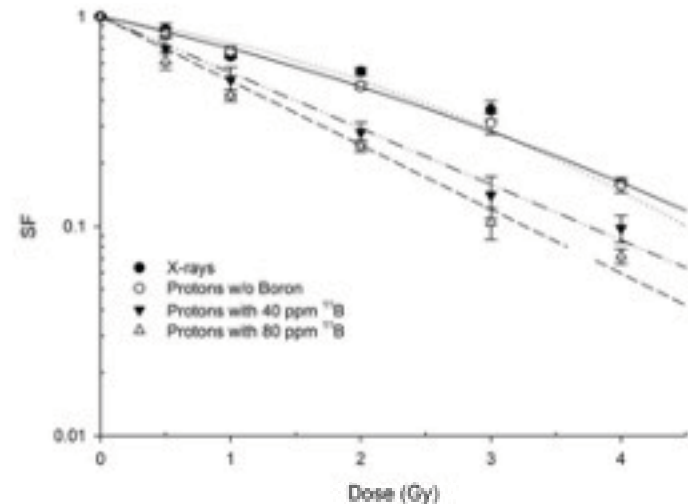
## SCIENTIFIC REPORTS

Article **OPEN** | Published: 18 January 2018

### First experimental proof of Proton Boron Capture Therapy (PBCT) to enhance protontherapy effectiveness

G. A. P. Cirrone , L. Manti, D. Margarone, G. Petringa, L. Giuffrida, A. Minopoli, A. Picciotto, G. Russo, F. Cammarata, P. Pisciotta, F. M. Perozziello, F. Romano, V. Marchese, G. Milluzzo, V. Scuderi, G. Cuttone & G. Korn

Scientific Reports 8, Article number: 1141 (2018) | [Download Citation](#)



# Improving $^{19}\text{F}$ -MRI

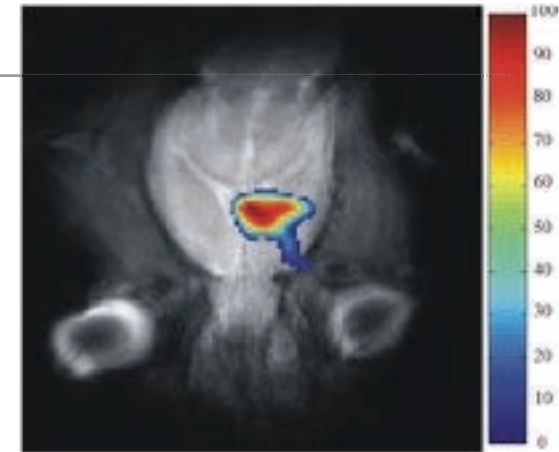
$^{19}\text{F}$ -MRI currently limited from low SNR ratio

Different strategies:

- improve raw signal processing
- => **Software Defined Radio technology**

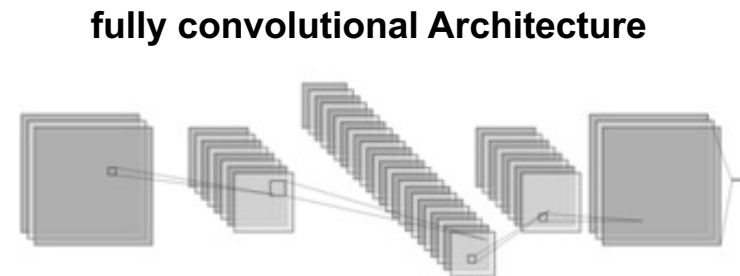
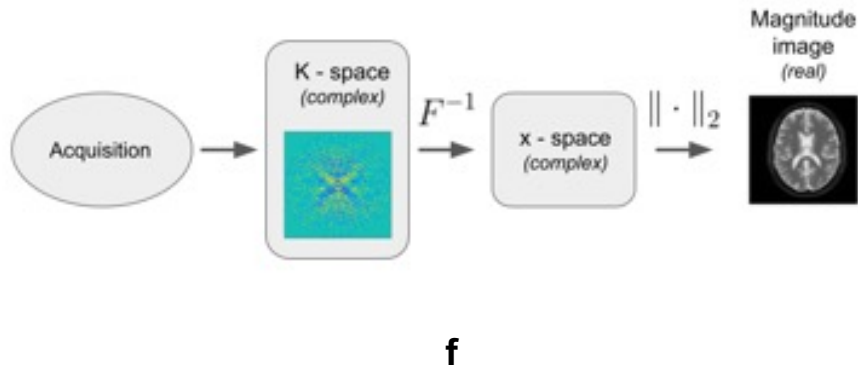


$^1\text{H}$ -MRI +  $^{19}\text{F}$ -MRI



P. Porcari, S. Capuani, E. D'Amore *et al.*  
2008 *Phys. Med. Biol.*

- **Deep learning based image analysis**



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# Possible Research Fields

COLLABORATIONS

Diagnostics

Radiotherapy

Artificial Intelligence in Medicine

