

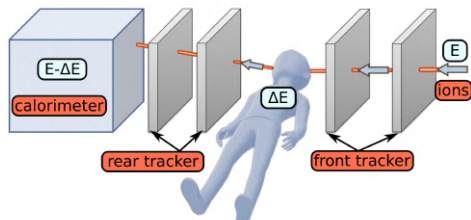


IonCT system based on LGAD sensors

Silicon@GSI: Kick-off event, Darmstadt, Germany
31st January 2025

**Felix Ulrich-Pur on behalf of the GSI LGAD group
and the ion CT group of HEPHY and TU WIEN**

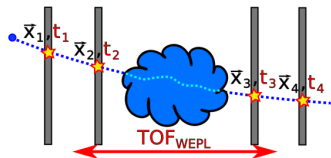
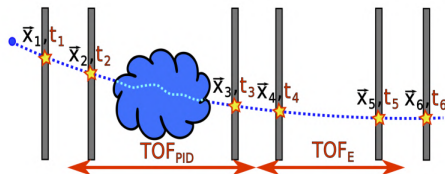
- ion computed tomography allows determining the relative stopping power (RSP) distribution inside a patient directly
 - improves treatment planning accuracy
 - requires tracking and energy measurement



$$\int_L \text{RSP}(\vec{x}(s)) ds = \text{WEPL}(E, \Delta E)$$

- several prototypes have been developed ([Johnson 2018](#))
 - still no clinical system exists so far
- meeting all clinical requirements at once is challenging
 - RSP accuracy < 1 %
 - energy resolution < 1 %
 - DAQ rate > 10⁶-10⁷ Hz
- 4D-tracking detectors would offer perfect solution ([Ulrich-Pur et al. 2022](#))
 - 4D-tracking iCT system
 - incorporate time-of-flight (TOF) measurements into imaging process

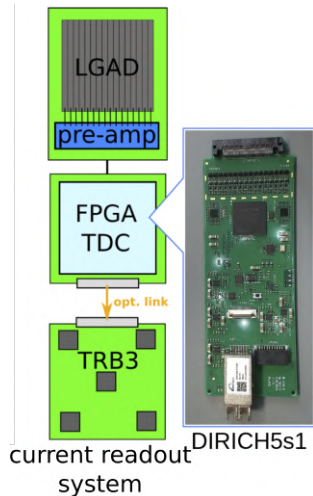
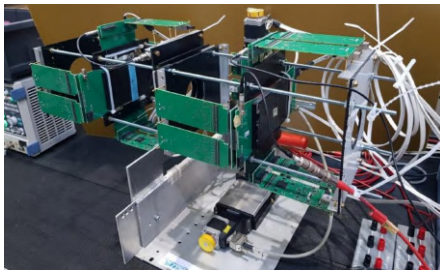
- LGAD-based TOF-iCT system
 - requires 6 4D-tracking layers
 - TOF in air for residual energy determination ([Ulrich-Pur et al. 2022](#))
 - TOF through object + energy loss for PID ([Rovituso et al. 2017](#))
- **second approach: “sandwich” TOF-iCT**
 - indirect WEPL measurement via TOF through object ([Ulrich-Pur et al. 2023](#))
 - no need for residual energy detector
 - requires only 4 4D-tracking layers



TOF-iCT demonstrator - first setup

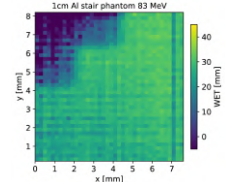
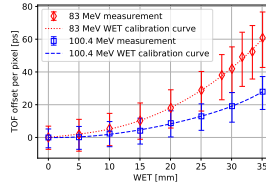
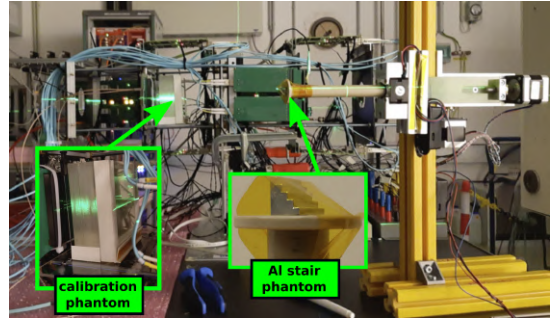
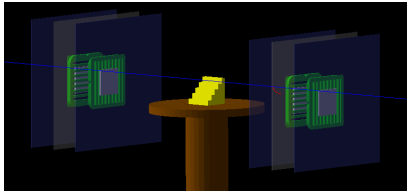
TOF-iCT demonstrator at GSI

- four $1 \times 1 \text{ cm}^2$ FBK LGAD strip sensors ($100 \mu\text{m}$ pitch)
- discrete front-end electronics
- FPGA-based TDCs with leading-edge discriminator
 - 4x DIRICH5s1 (32 channels per DiRICH)
- imaging of small objects $\mathcal{O}(< 1 \text{ cm}^2)$



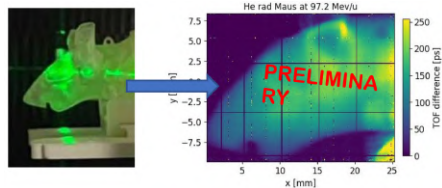
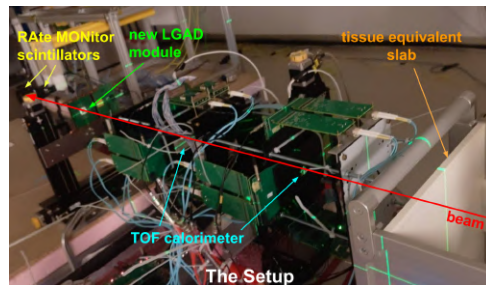
TOF-iCT demonstrator - first experiments

- first experimental TOF-based proton radiography (TOF-pRad) ([Ulrich-Pur et al. 2024](#))
 - 10^5 p/s protons with 83 and 100.4 MeV
 - 1.6 mm PMMA slabs for WEPL calibration
 - Sandwich TOF-pRad of Al stair phantom was recorded

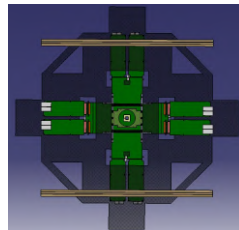
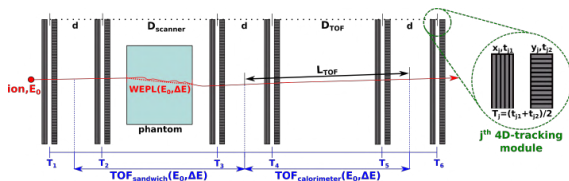


TOF-iCT demonstrator - first experiments

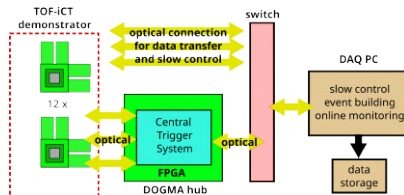
- first experimental TOF-based He radiography (TOF-HeRad)
 - now TOF calorimeter instead of sandwich TOF
 - SP measurements of bone and plastic water with p and He ions
 - TOF-HeRad of a plastic mouse head
 - required image stitching



TOF-iCT demonstrator - current upgrade

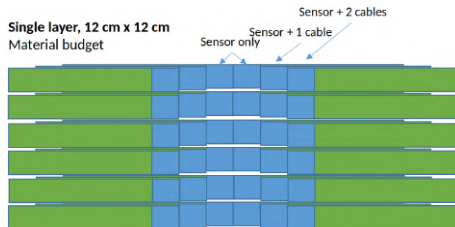
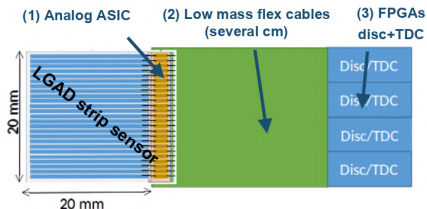


- small, but full TOF-iCT system
 - 12 single-sided LGAD strip sensors with upgraded front-end-electronics
 - DOGMA readout system with optical data transfer
- full ion CT of a live mouse is planned



Future large-area 4D-tracking system

- novel LGAD sensors with increased fill factor will be investigated
 - new sensor production with trench-isolated LGADs planned
- upgraded readout electronics with increased number of readout channels
 - dedicated ASIC and FPGA-based TDCs
- dedicated low-mass module design for large active areas (tens of cm^2)
 - low mass flex cables to reduce overall material budget ($X/X_0 < 1\%$)



- LGADs are promising 4D-tracking detectors with many applications
 - well-suited for ion imaging
- two possible scanner concepts
 - “standard” TOF-iCT system with TOF calorimeter
 - sandwich TOF-iCT system without a residual energy detector
- TOF-iCT demonstrator system
 - demonstrator system based on LGAD strip sensors was built and tested
 - first sandwich TOF-pRad of an aluminium stair phantom and first TOF-HeRad of a plastic mouse was successfully recorded at MedAustron to show proof-of-principle
 - further measurements with upgraded demonstrator system planned
- long-term goal: large-area 4D-tracking system

Thank you for your attention!

■ TU WIEN/HEPHY

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■ CREATIS

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Backup slides

Motivation – ion beam therapy

Advantages of ion beam therapy

- energy deposition (dose) of ions **strongly localised** ($S \propto \frac{1}{v^2}$)
 - relatively low entrance dose and rapid distal dose fall-off (Bragg peak)
 - accurate dose deposition
 - allows treatment of tumors close to critical organs, e.g. optical nerve

photon therapy:

$$I = I_0 e^{-\mu x}$$

ion-beam therapy:

$$\bar{R}(E_0) = \int_{E_0}^0 \frac{1}{S(E)} dE$$

with $S(E) = -\frac{dE}{dx}$

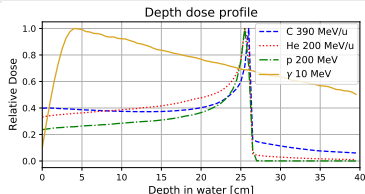


Figure: Bragg peak

photon therapy: proton therapy:

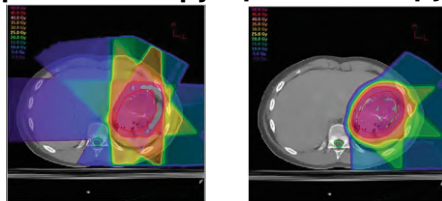


Figure: treatment plans (Linz 2016)

Treatment planning based on x-ray CT

- conversion errors from Hounsfield units (HU) to relative stopping power (RSP) lead to range errors (Schaffner et al. 1998)

$$HU = 1000 * \frac{\mu - \mu_{\text{water}}}{\mu_{\text{water}}}$$

↓

$$RSP = \frac{S(E)}{S(E)_{\text{water}}}$$

- solution: direct measurement of stopping power using ions in plateau region
 - **ion computed tomography (iCT)**

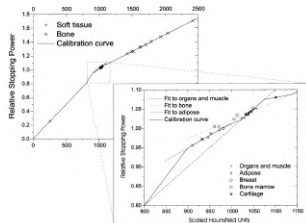


Figure: HU→RSP conversion (Schaffner et al. 1998)

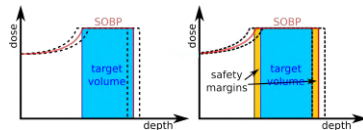
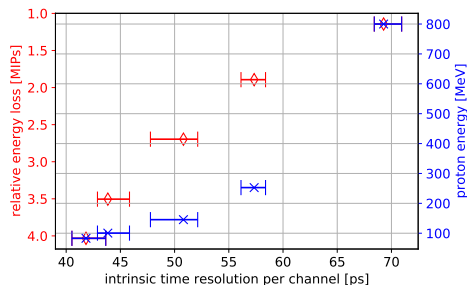
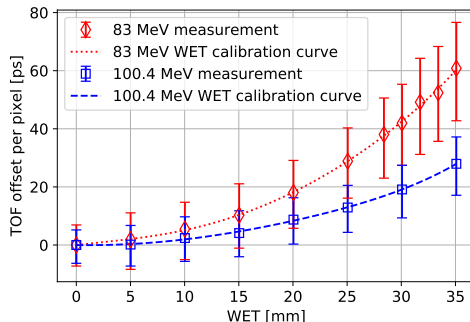


Figure: range uncertainties

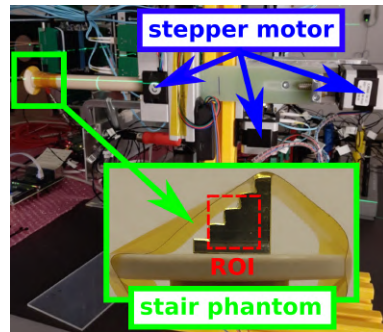
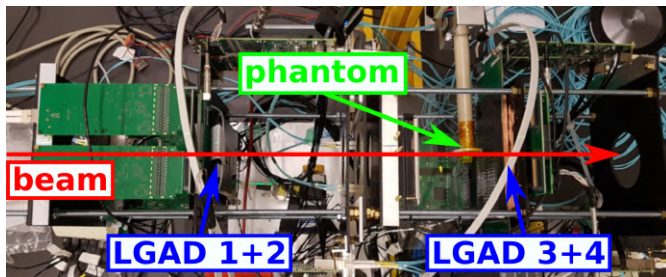
- time-walk and offset correction was performed for each LGAD channel
 - synchronisation of all LGAD channels in each 4D-tracking layer
- intrinsic time resolution was measured for different beam energies
 - energies between 83 and 800 MeV
 - time resolution improves with lower beam energy
 - higher signal-to-noise ratio in detector at lower beam energies
 - median time resolution per channel between 42 ps (4.03 MIPs) and 68 ps (1.14 MIP)



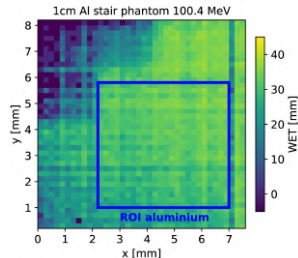
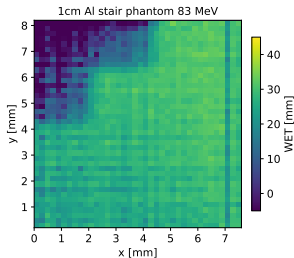
- TOF per pixel was measured for different PMMA absorber thicknesses at two different beam energies
- 5th-order polynomial was used to fit the increase in TOF to the corresponding WET



- Al stair phantom was mounted on rotational table
 - due to alignment and size of sensors, only part of phantom could be imaged (ROI)
- pRads were recorded at 83 and 100.4 MeV

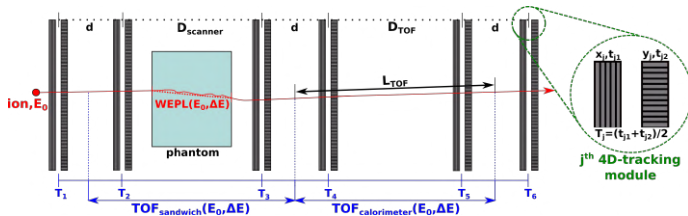







- increase in TOF was measured in $0.2 \times 0.2 \text{ mm}^2$ pixels projected onto the last two LGAD planes (i.e. 2×2 LGAD strips per pixel)
 - WET calibration was applied and WET was collected in centre of phantom (blue square)
- Al stair phantom still clearly visible
 - however, WET overestimated (measured WET: $\approx 29 \text{ mm}$, theory: $\approx 20.8 \text{ mm}$)
 - upgrade of setup and more tests will follow





TOF-iCT demonstrator - next steps

- current setup consists of only 2 4D-tracking layers
 - allows only straight-line approximation
- upgrade of current setup with more layers planned (Erwin-Schrödinger grant)
 - main goal: record first TOF-based iCT
 - additional 4D-tracking layers will allow implementation of MLP
 - more experimental data for TOF through matter will be recorded to further test and improve sandwich TOF-iCT models



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-  Ulrich-Pur, Felix et al. (2024). “First experimental time-of-flight-based proton radiography using low gain avalanche diodes”. In: *Physics in Medicine and Biology* 69.7, p. 075031. DOI: [10.1088/1361-6560/ad3326](https://doi.org/10.1088/1361-6560/ad3326).