

**The Recipient of 2015 Randall S. Caswell Award
for Distinguished Achievements in the Field of Ionizing
Radiation Measurements and Standards**

Dr. X. George Xu

**The Edward E. Hood Endowed Chair of Engineering
Professor of Nuclear Engineering
Rensselaer Polytechnic Institute**



Tuesday, April 28, 2015 @CIRMS 2015

Dr. Randall S. Caswell



- Physicist, Radiation Physics Division, 1952-1957
- Chief, Neutron Physics Section, 1957-1969
- Deputy Director, Center for Radiation Research, 1969-1978
- Chief, Nuclear Radiation Division, Center for Radiation Research, 1978-1985.
- Chief, Ionizing Radiation Division, Physics Laboratory, 1985-1994.

Past Randall S. Caswell Awardees

2002	H. Thompson Heaton II	FDA
2004	Anthony J. Berejka	Ionicorp
2006	Kenneth L. Swinth	Swinth Associates
2007	Bert M. Coursey	U.S. DHS
2008	Larry A. DeWerd	University of Wisconsin
2009	Marshall R. Cleland	IBA Industrial, Incorporated
2010	Geoffrey Ibbott	MD Anderson Cancer Center
2011	Dr. Kenneth Inn	NIST
2012	Joseph C. McDonald	PNNL
2013	Stephen M. Seltzer	NIST

Research on Radiation Dosimetry and Monte Carlo Simulation at RPI – A Review

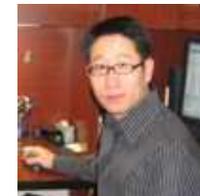
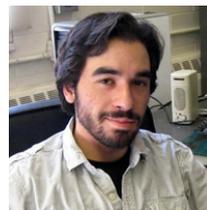
X. George Xu
(xug2@rpi.edu)

Tuesday, April 28, 2015 @CIRMS 2015

Acknowledgements

Rensselaer Radiation Measurements and Dosimetry Group (RRMDG):

<http://RRMDG.rpi.edu>



Outline

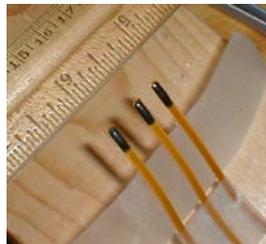
1. Computational Human Phantoms

2. ARCHER Monte Carlo Code

Experimental vs Computational Approaches

Measurements

- Dosimeters
- Physical phantom



Monte Carlo Simulations

- Computational phantoms
- Monte Carlo codes



AP



PA



RLAT

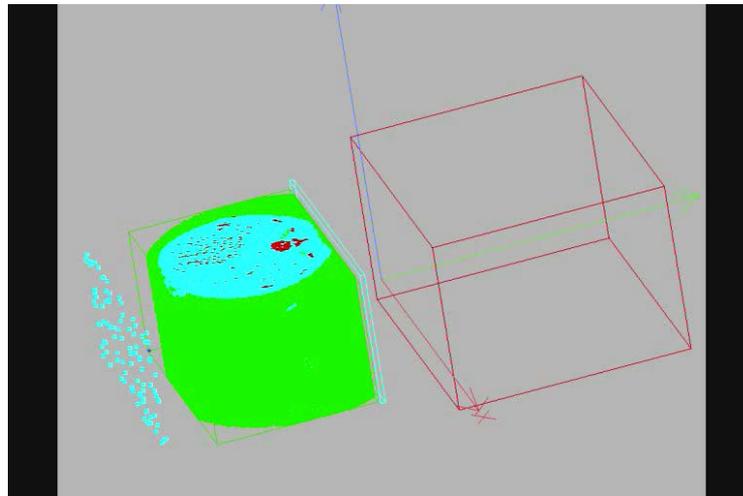
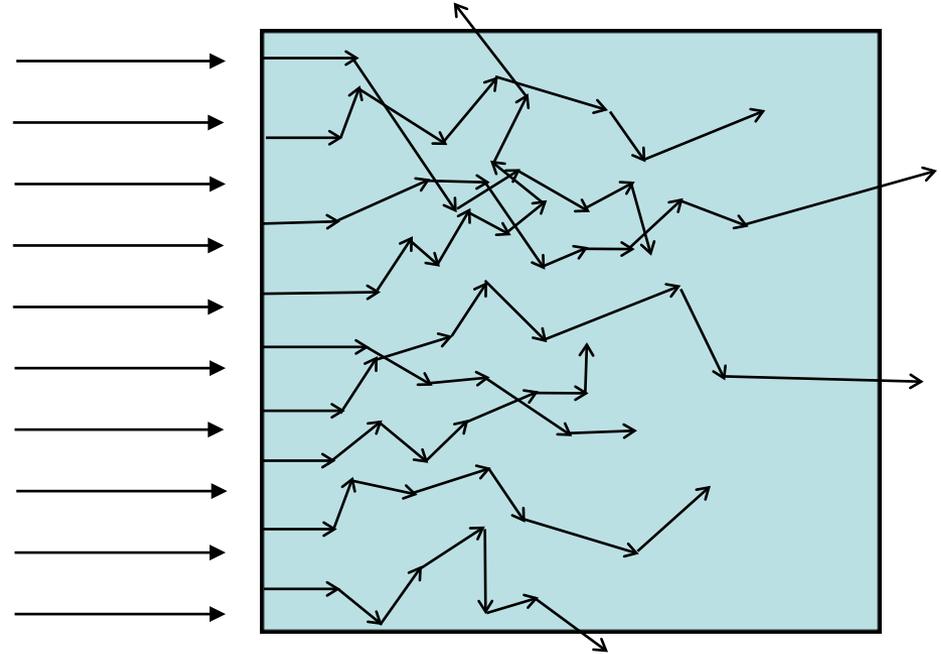
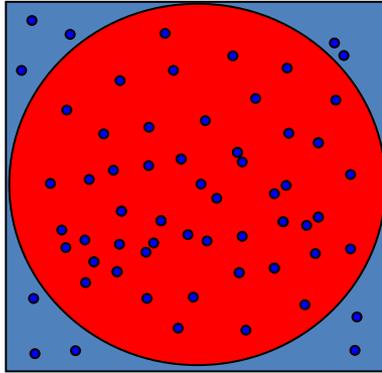


LLAT

Boltzmann Radiation Transport Calculations

$$\frac{1}{v} \frac{\partial}{\partial t} \psi(\vec{r}, \hat{\Omega}, E, t) + \hat{\Omega} \cdot \vec{\nabla} \psi(\vec{r}, \hat{\Omega}, E, t) + \Sigma_t(\vec{r}, E) \psi(\vec{r}, \hat{\Omega}, E, t)$$
$$= \int dE' \int d\Omega' \Sigma_s(\vec{r}, E' \rightarrow E, \hat{\Omega}' \cdot \hat{\Omega}) \psi(\vec{r}, \hat{\Omega}', E', t) + S(\vec{r}, \hat{\Omega}, E, t)$$

Monte Carlo Simulation Methods



Ptrac tracking
Moritz software

MCNP Geometry Example – HPGe Gamma Detector

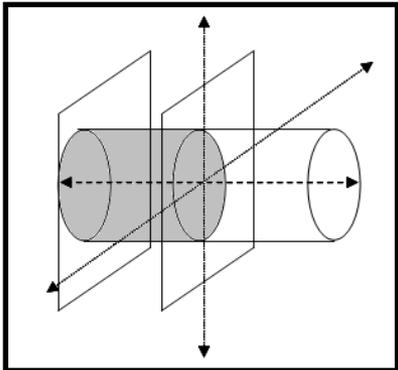
C CELL CARDS

1	4	-2.698	2	-3	-1	IMP:P=1	#2	\$Aluminum Material
2	2	-0.000125	2	-4	-1	imp:p=1		\$Air
3	0	-2:3:1				IMP:P=0		\$Void Outside

Not include cell #2

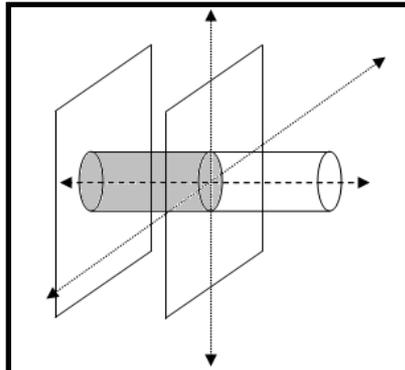
- The Cell Cards define the geometry using the shapes provided in the Surface Cards.

Cell Card 1



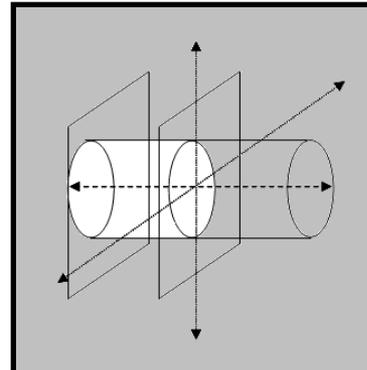
Aluminum

Cell Card 2

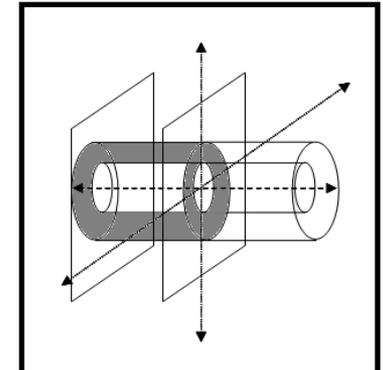


Air Inside

Cell Card 3



Void Outside



Container with
Air Inside and Void Outside

- They also define the material type and its density
 - Cell 1 → Material 4 (Aluminum), $\rho = 2.698 \text{ g/cm}^3$
 - Cell 2 → Material 2 (Air), $\rho = .000125 \text{ g/cm}^3$
 - Cell 3 → Void
- The negative signs designate which face of the geometry the program is to consider



US006518579B1

(12) **United States Patent**
Xu et al.

(10) **Patent No.:** US 6,518,579 B1

(45) **Date of Patent:** Feb. 11, 2003

(54) **NON-DESTRUCTIVE IN-SITU METHOD AND APPARATUS FOR DETERMINING RADIONUCLIDE DEPTH IN MEDIA**

Primary Examiner—Constantine Hammaber
Assistant Examiner—Shun Lee
(74) *Attorney, Agent, or Firm*—Notaro & Michalos P.C.

(75) **Inventors:** X. George Xu, Clifton Park, NY (US); Edward P. Naessens, West Point, NY (US)

(57) **ABSTRACT**

(73) **Assignee:** Rensselaer Polytechnic Institute, Troy, NY (US)

(*) **Notice:** Subject to any disclaimer, the term of this patent is extended or adjusted under 35 U.S.C. 154(b) by 0 days.

A non-destructive method and apparatus which is based on in-situ gamma spectroscopy is used to determine the depth of radiological contamination in media such as concrete. An algorithm, Gamma Penetration Depth Unfolding Algorithm (GPDUA), uses point kernel techniques to predict the depth of contamination based on the results of uncollided peak information from the in-situ gamma spectroscopy. The invention is better, faster, safer, and cheaper than the current practice in decontamination and decommissioning of facilities that are slow, rough and unsafe. The invention uses a priori knowledge of the contaminant source distribution. The applicable radiological contaminants of interest are any isotopes that emit two or more gamma rays per disintegration or isotopes that emit a single gamma ray but have gamma-emitting progeny in secular equilibrium with its parent (e.g., ⁶⁰Co, ²³⁵U, and ¹³⁷Cs to name a few). The predicted depths from the GPDUA algorithm using Monte Carlo N-Particle Transport Code (MCNP) simulations and laboratory experiments using ⁶⁰Co have consistently produced predicted depths within 20% of the actual or known depth.

(21) **Appl. No.:** 09/330,660

(22) **Filed:** Jun. 11, 1999

(51) **Int. Cl.:** G01T 1/00

(52) **U.S. Cl.:** 250/393

(58) **Field of Search:** 250/370.01, 363.01, 250/363.1, 358.1, 393

(56) **References Cited**

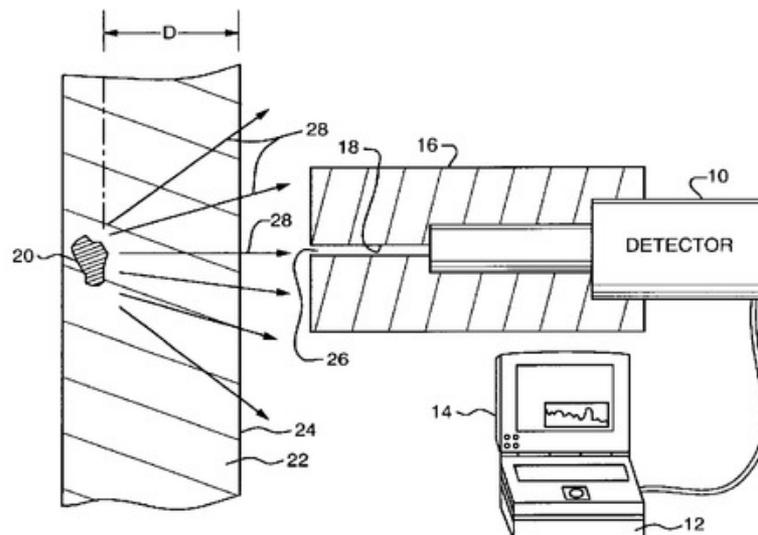
U.S. PATENT DOCUMENTS

4,680,470 A * 7/1987 Heald 250/358.1
5,412,206 A * 5/1995 Seidel et al. 250/253

* cited by examiner

8 Claims, 5 Drawing Sheets

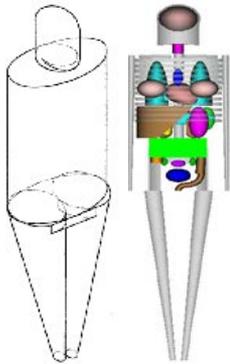
US Patent Serial #6,518,579 "Non-destructive In-situ Method and Apparatus for Determining Radionuclide Depth in Media" by X.G. Xu and E.P. Naessens. Awarded February 11, 2003.



50-Year History of Computational Phantoms

- Radiation Protection
- Medical Imaging
- Radiotherapy

1st Generation



MIRD anthropomorphic models in 1980s

STYLIZED

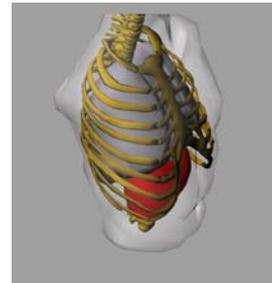
2nd Generation



Image-based rigid, 3D model in 1990-2000s

VOXEL

3rd Generation



Deformable and moving 4D models 2008-2010

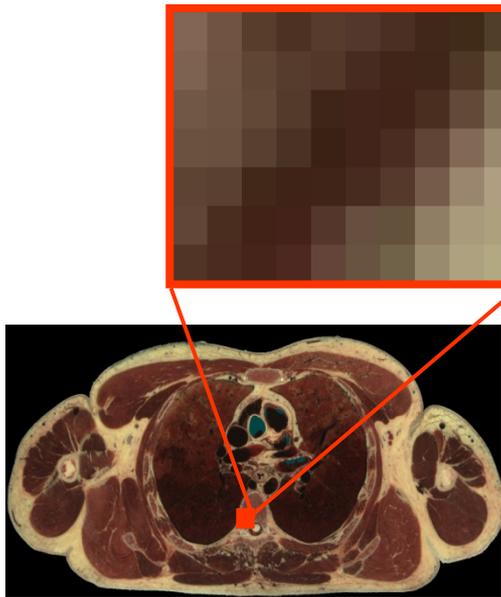
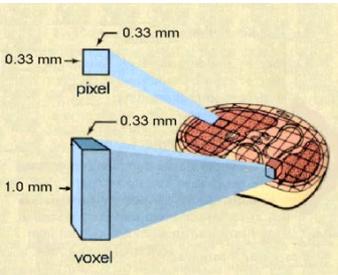
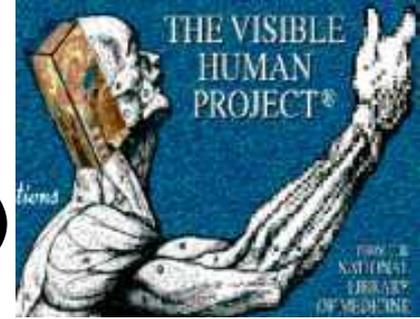
BREP



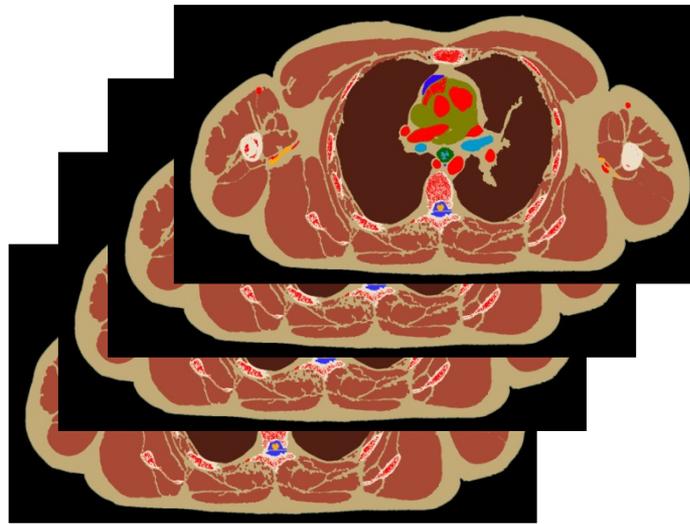
Personalization is Future

2nd-Generation “Voxel” Phantoms - Example of the VIP-Man (1997-2000)

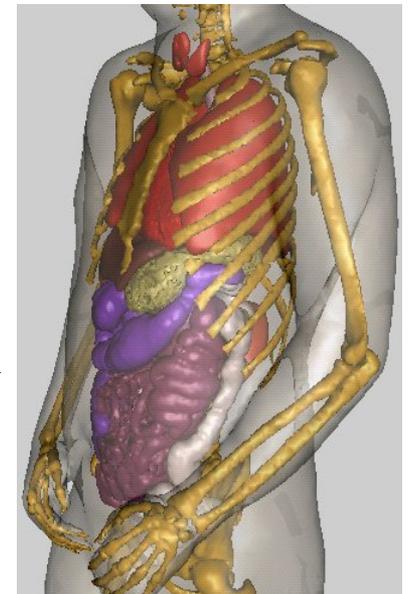
Xu et al. Health Physics 2000



Identification of organs in each slice of a 2D pixel map



Registration of all slices



Finished 3D voxel phantom

VIP-Man Phantom For Radiation Dosimetry

Xu, X. G. Chao, T.C. and Bozkurt A. Health Physics, 78(5):476-486, 2000.

“VIP-Man: An image-based whole-body adult male model constructed from color photographs of the visible human project for multi-particle Monte Carlo calculations”.

EGS4 Code

0.33 mm x 0.33 mm x
1 mm Resolution
Photons / Electrons

MCNP5 Code

4 mm x 4mm x
4 mm Resolution
Photons/Electros/
Neutrons

MCNPX Code And

GEANT4 Code
Protons etc



Dr. Ahmet Bozkurt,
Class 2000

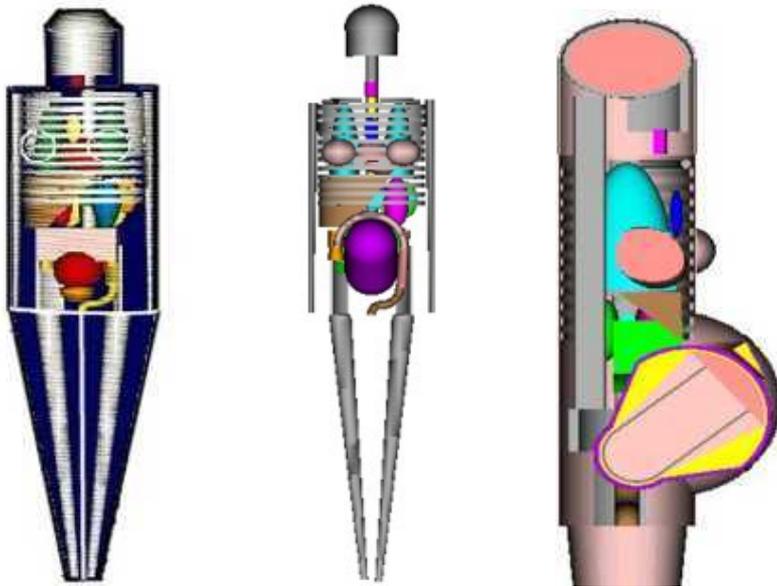


Dr. T.C. (Ephraim) Chao,
Class 2001



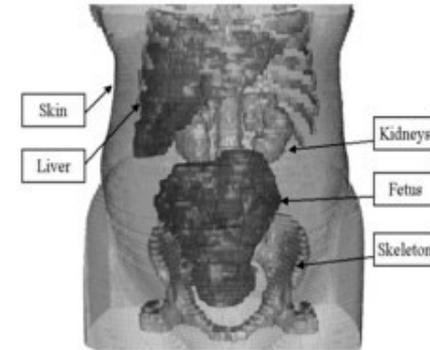
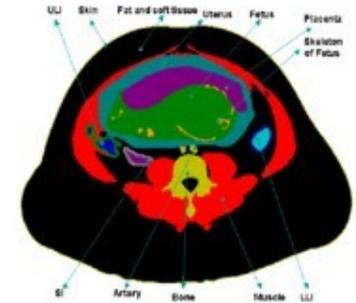
Earlier Pregnant Female Phantoms

Stylized models



Curtsey of Stabin et al (1995)

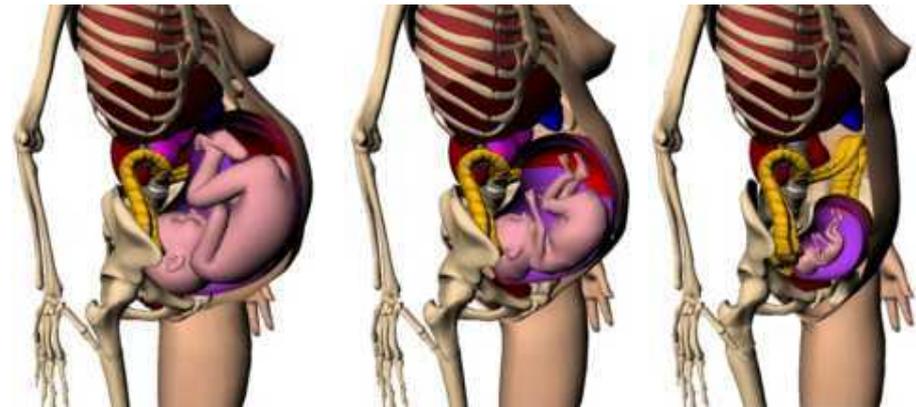
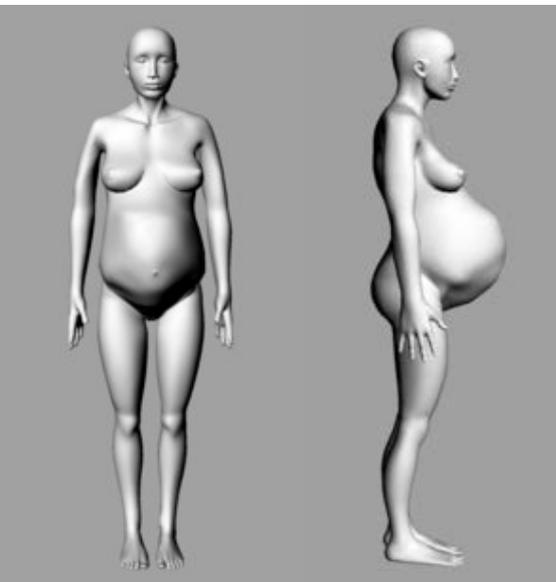
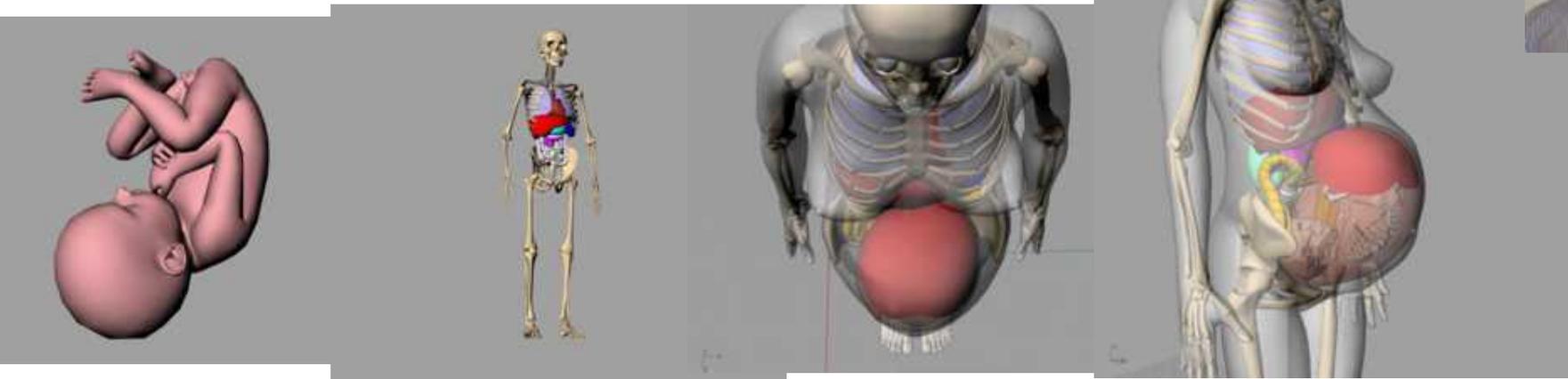
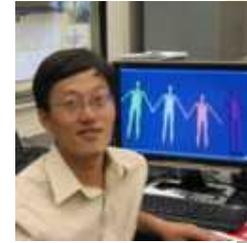
Partial-body CT phantom (7-month)



Shi and Xu (2004)

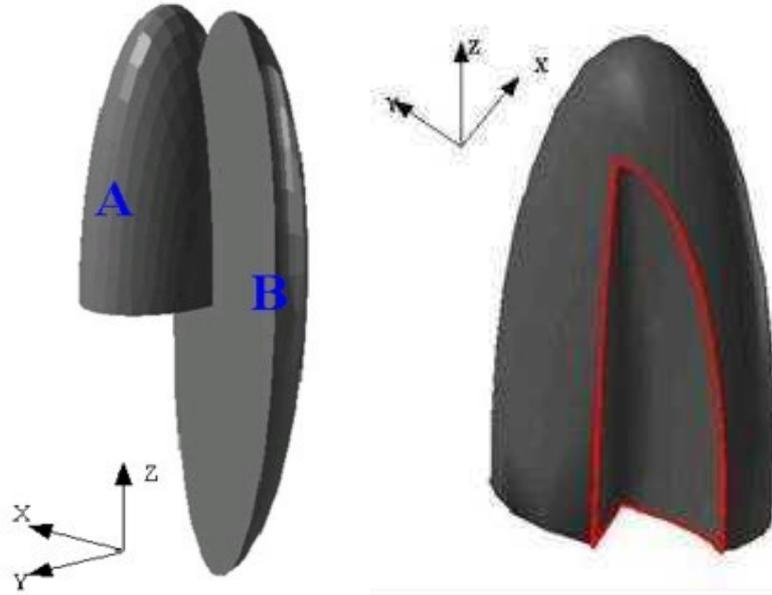
A New Method of Morphing and Deforming

Xu X G, Taranenko V, Zhang J, Shi C. A boundary-representation method for designing whole-body radiation dosimetry models: pregnant females representing three gestational periods, RPI-P3, -P6 and -P9. Phys. Med. Biol. (2007) **The Best 10 papers by PBM in 2007**

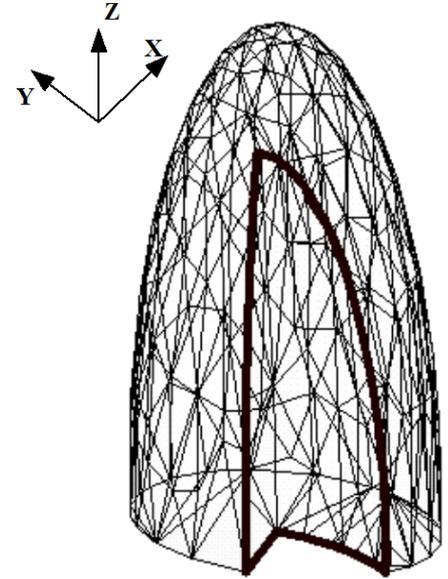


A Major Advancement in Phantom Geometry

from Constructed Solid Geometry (CSG) to Boundary Representation (BREP)



Polygon meshes

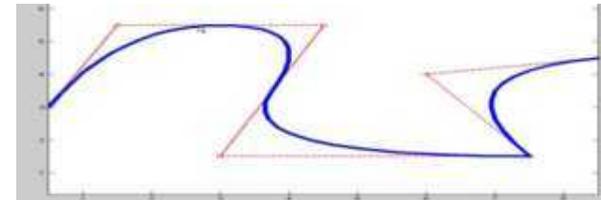


$$A: \left(\frac{X-8.5}{5}\right)^2 + \left(\frac{Y}{7.5}\right)^2 + \left(\frac{Z-43.5}{24}\right)^2 \leq 1, Z \geq 43.5$$

$$B: \left(\frac{X-2.5}{5}\right)^2 + \left(\frac{Y}{7.5}\right)^2 + \left(\frac{Z-43.5}{24}\right)^2 \geq 1, \text{if } y < 0$$

Non-Uniform Rational B-Splines (NURBS)

$$S^w(u, v) = \sum_{i=0}^n \sum_{j=0}^m N_{i,p}(u) N_{j,q}(v) P_{i,j}^w$$



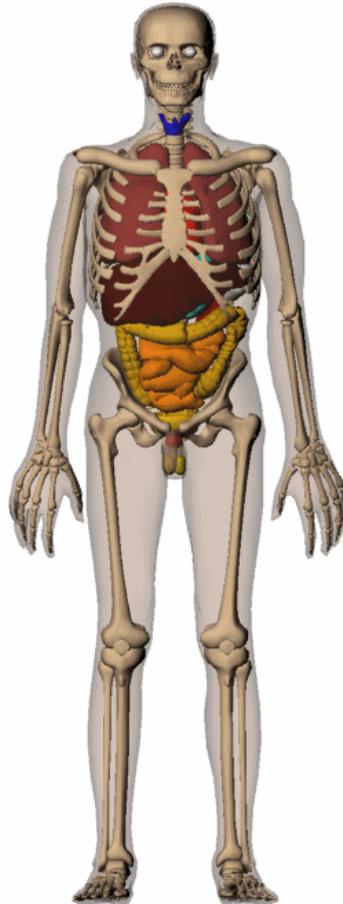
RPI Adult Male and Female Phantoms

Zhang* J, Na* YH, Caracappa PF, Xu XG. RPI-AM and RPI-AF, a pair of mesh-based, size-adjustable adult male and female computational phantoms using ICRP-89 parameters and their calculations for organ doses from monoenergetic photon beams. *Phys. Med. Biol.* 54:5885-5908. 2009



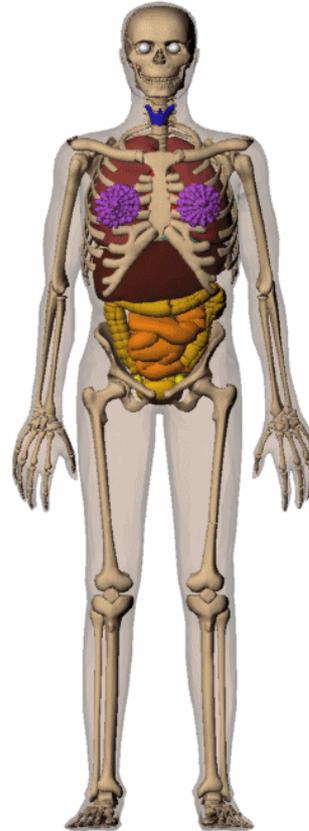
RPI Adult Male

Height: 176cm
Weight: 73 Kg



RPI Adult female

Height: 163 cm
Weight: 60 Kg



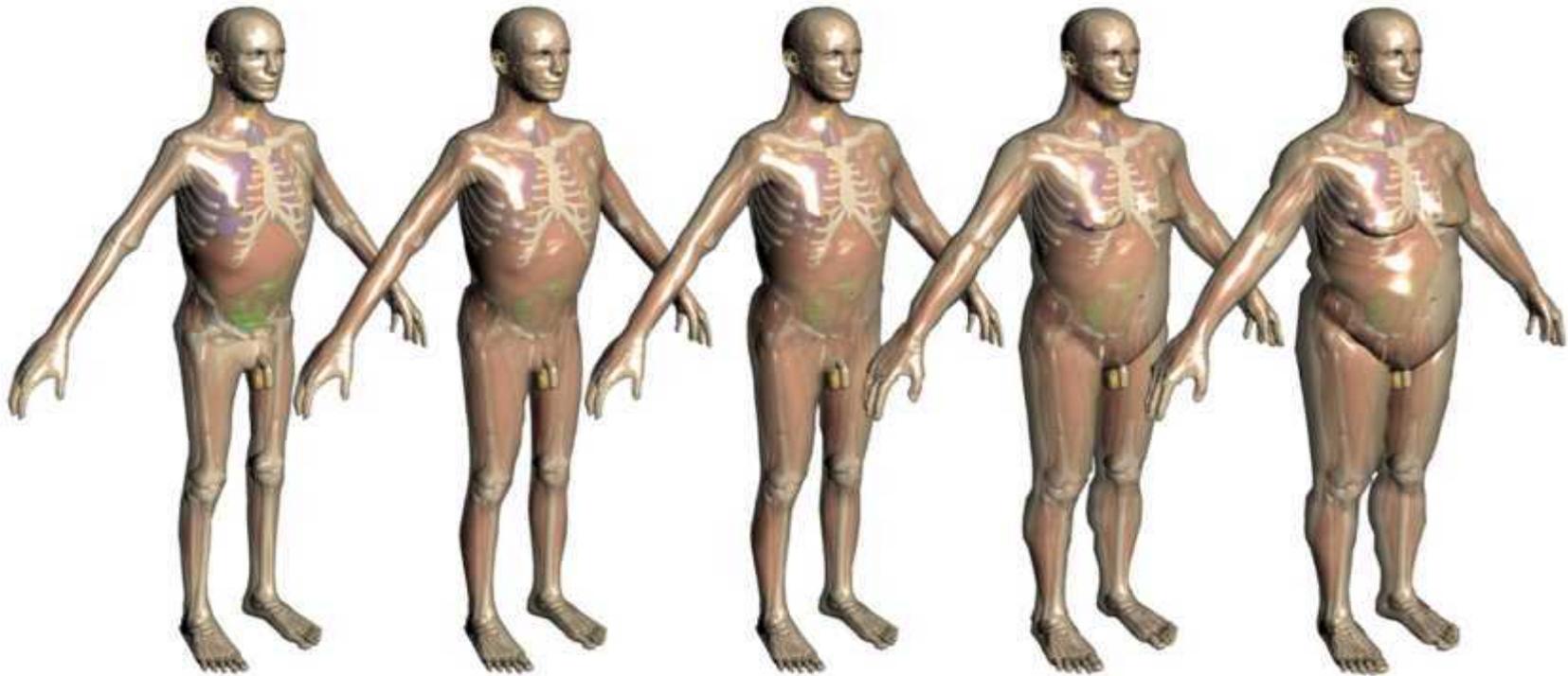
70 Organs; 45 Bone Components; 4 Muscle Structures

Size and Weight Adjustable Phantoms

Na* YH, Zhang* B, Zhang* J, Xu XG. Deformable Adult Human Phantoms for Radiation Protection Dosimetry: Anatomical Data for Covering 5th- 95th Percentiles of the Population and Software Algorithms. Phys. Med. Biol. (submitted)



- Same height (e.g. 176cm Male), but different weights:

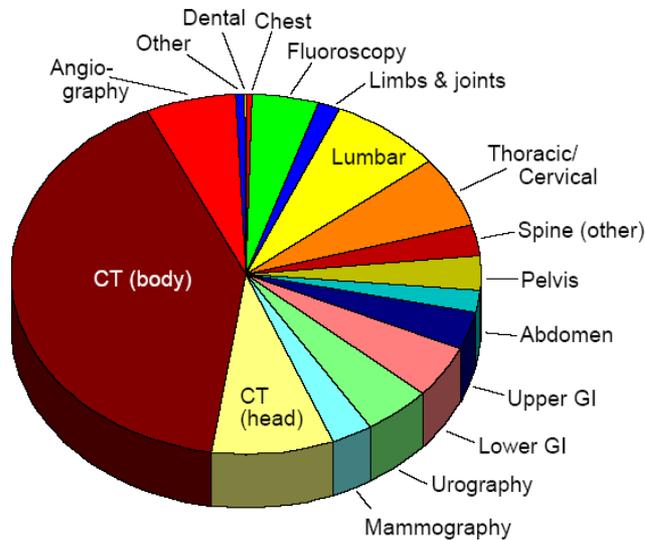


Weight	58.5kg	66.3kg	73.1kg	86.4kg	103.8kg
Percentile	5 th	25 th	50 th	75 th	95 th

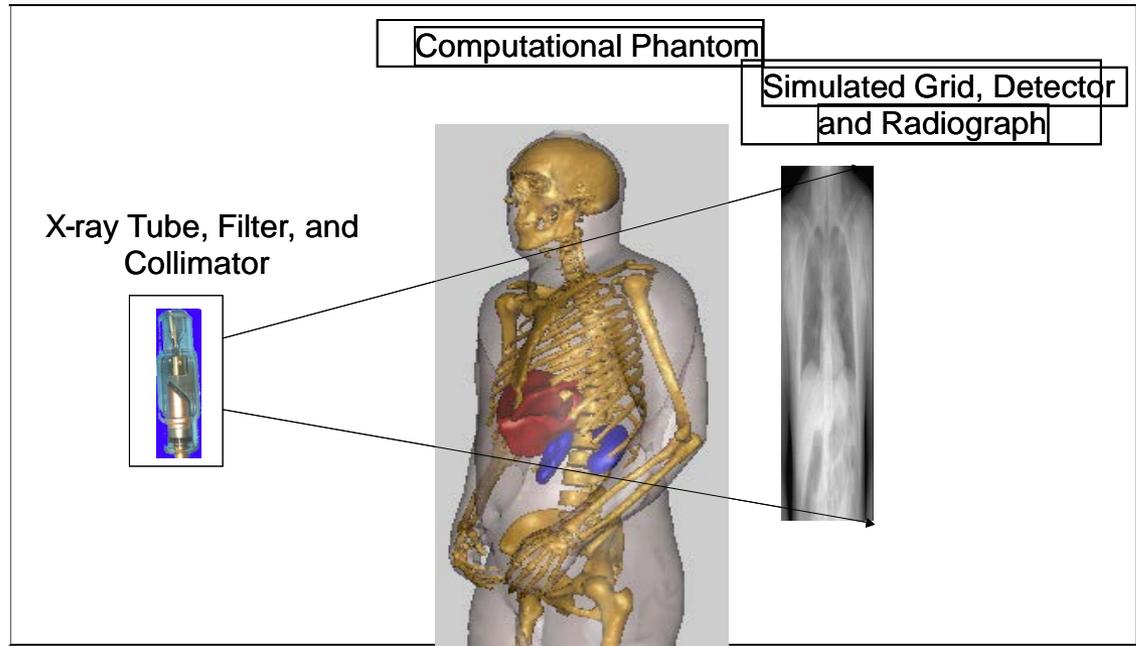
Radiograph Image Optimization (External Dosimetry)



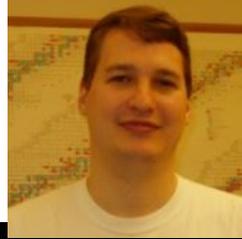
- Simulator linking image quality with x-ray tube settings (mAs, kVp, filtration, grid etc).
- Optimization involves
 - Maximizing diagnostic information (resolution, contrast, SNR)
 - Minimizing organ doses



The relative contribution of diagnostic procedures to the collective medical dose estimated for the year 1996.

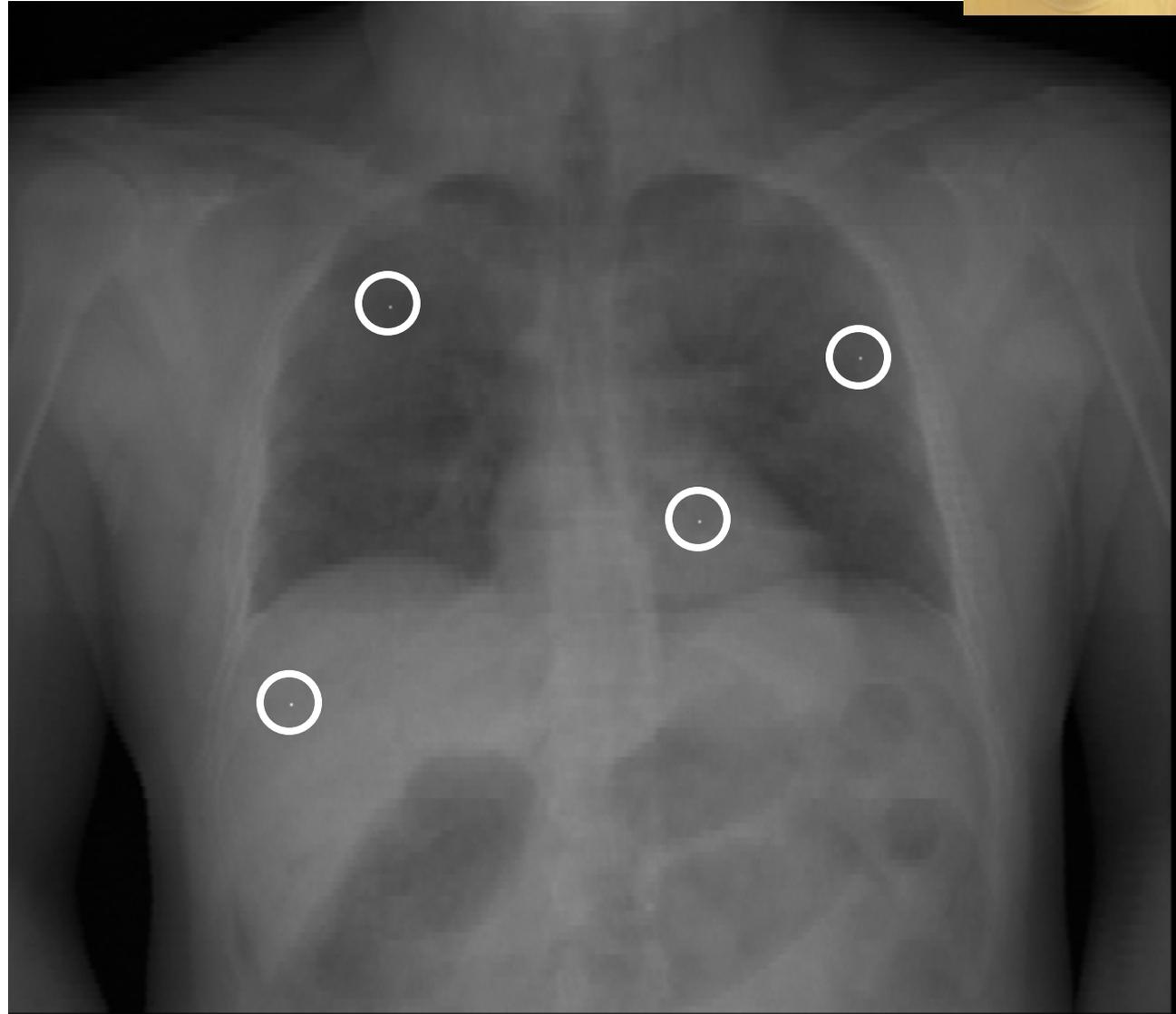


Simulation of Lesions



Locations

1. Right Lung, Behind Rib
2. Left Lung, Clear
3. Behind Heart
4. In Liver





Results

Comparison of chest x-ray from different mAs settings and doses



Low dose and low resolution



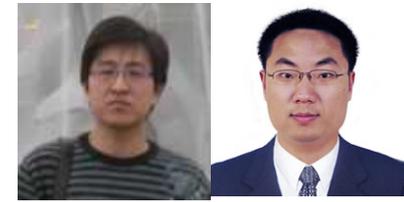
high dose and high resolution



Optimized dose and resolution

Winslow M. Xu, X.G, Yazici, B. Development of a Simulator for Radiographic Image Optimization. Computer Methods and Programs in Biomedicine. 78 (3):179-190. 2005.

Son I.Y., Winslow M., Xu X.G., Yazici B. X-ray imaging optimization using virtual phantoms and computerized observer modelling. Phys. Med. Biol. 51:4289-4310, 2006.



A platform independent, browser-based software

<http://www.virtual-dose.com>

VIRTUAL PHANTOMS, INC. | VIRTUALDOSE

Perfecting radiation dose management through innovative simulation technologies

Information from PACS/DICOM VirtualDose

Patient phantoms: Obese_Level-1_Male Scan Protocol: Chest CT Manufacturer: GE

Bowtie filters: Head Body Beam Collimation(mm): 20 kVp: 120

mAs: 100 CTD_{1W} (per 100mAs): 8.52 Pitch: 1 Organ Weighting Scheme: ICRP103 ICRP60 Z-Over Scan Length(mm): No Yes

Z-Over Scan Length(mm): No Yes

Calculate D

Information from PACS/DICOM VirtualDose

Patient phantoms: Obese_Level-1_Male Scan Protocol: Chest CT Manufacturer: GE Scanner Name: GE LightSpeed Pro 16 Bowtie filters: Head Body Beam Collimation(mm): 20 kVp: 120 Tube Current Modulation: No Yes

mAs: 100 CTD_{1W} (per 100mAs): 8.52 Pitch: 1 Organ Weighting Scheme: ICRP103 ICRP60 Z-Over Scan Length(mm): No Yes

Calculate Dose

Organs vs. Dose

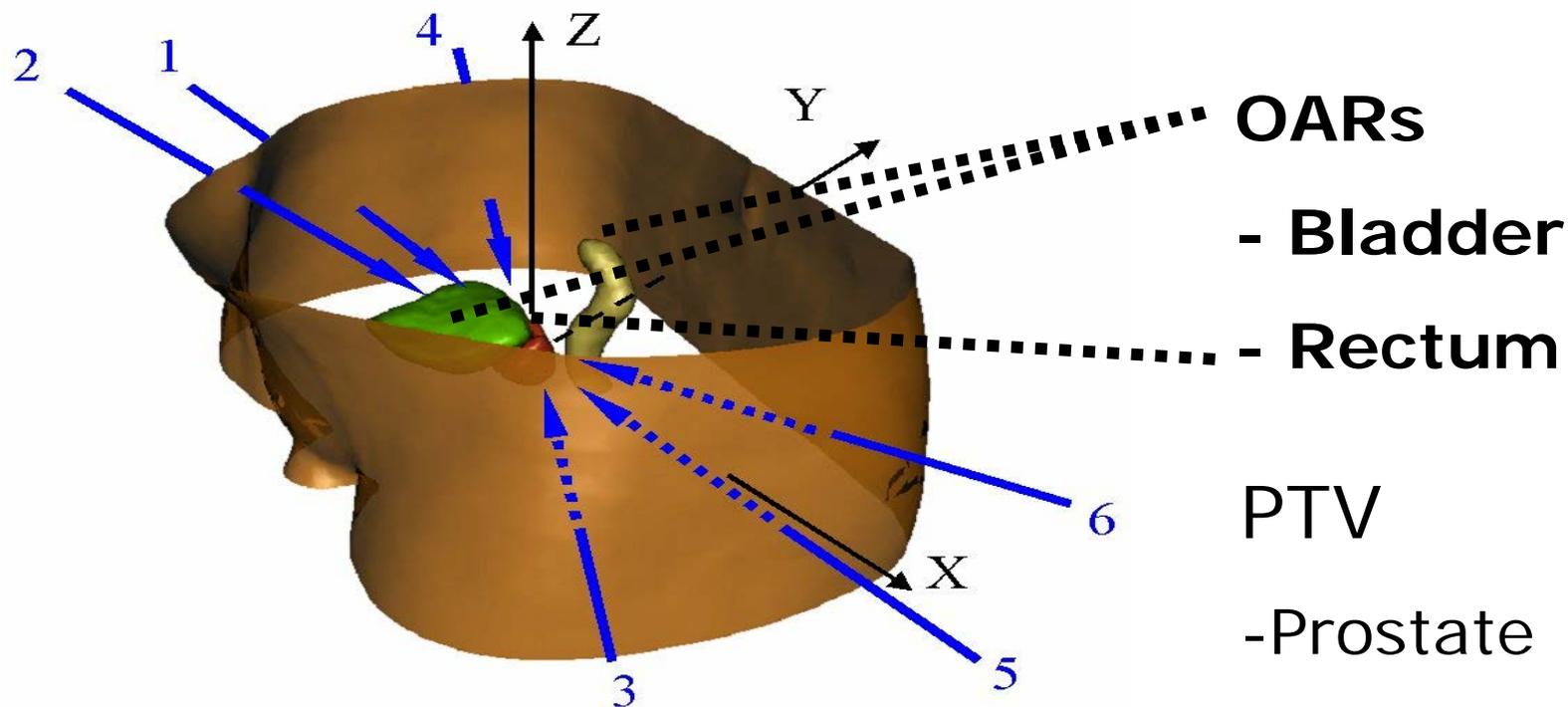
Organ/Tissue Name	Doses (mGy)
Bone Endosteum	2.88
Brain	0.30
Breast	7.13
Colon	0.70
Esophagus	3.22
Gonads	0.10
Liver	4.43
Lungs	7.97
Red Bone Marrow	2.29
Remainder_103	3.83
Salivary Glands	0.56
Skin	1.87
Stomach	4.88
Thyroid	1.65
Urinary Bladder	0.13
Total Effective Dose(ICRP103) (mSv): 3.70	

Remainder Organs	Doses (mGy)
Adrenals	8.47
ET Region	0.56
Fat	1.26
Gall Bladder	4.97
Heart	7.74
Kidneys	4.44
Lymphatic Nodes	3.88
Muscle	2.83
Oral Mucosa	0.79
Pancreas	2.26
Small Intestine	0.33
Spleen	8.31
Thymus	8.32
Uterus(Prostate)(M)	0.14



3D CRT Beam Selection Using Adjoint MC

Wang* B., Xu X.G., Goldstein M., Sahoo N. Adjoint Monte Carlo method for prostate external photon beam treatment planning: An application to 3-D patient anatomy. Phys. Med. Biol. 50: 923-935, 2005.

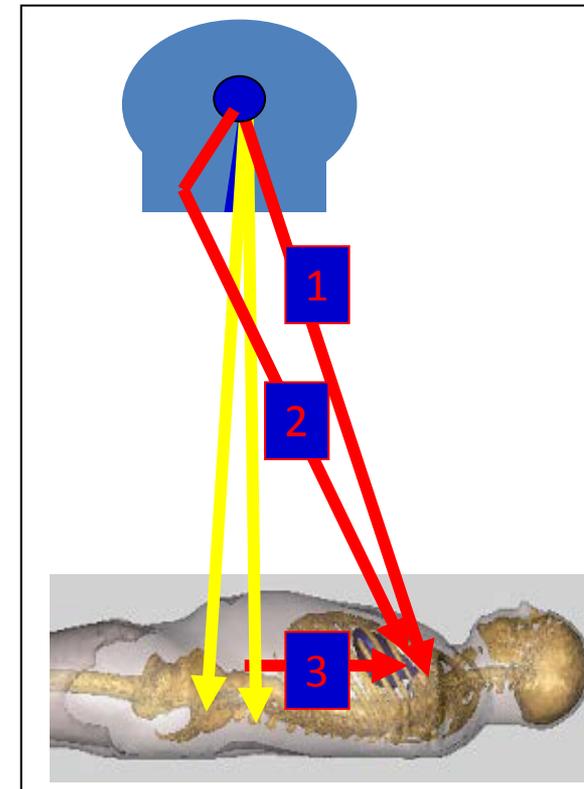


Secondary Cancer from Non-target Doses in Radiation Therapy: A Price to Pay for Successful RT

Hall and Wu. Radiation-induced second cancers: The impact of 3D-CRT and IMRT. Int. J. Radiation Oncology Biol. Phys. Vol. 56, No. 1 pp 83-88. 2003.

Suit, et al. Secondary Carcinogenesis in Radiation Treated Patients; Part 1. A Review of Data on Radiation Induced Cancers in Human, non Human Primate, Canine and Rodent Subjects. Submitted to Radiation Research.

- Cancer patients survive and live longer
- Patient younger
- Latent effects expected to increase
- IMRT requires greater MU (x3 3DCRT)

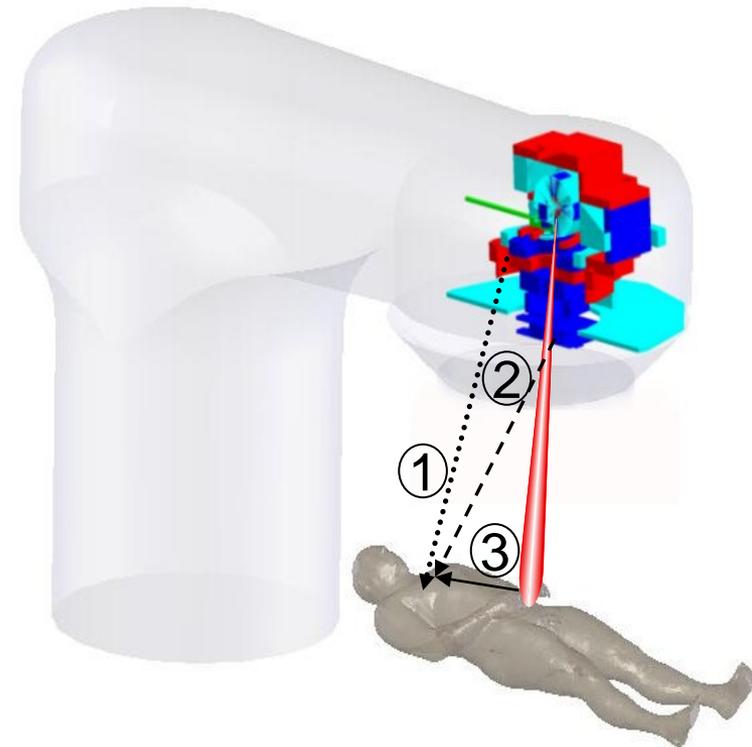


Secondary Cancer from Non-target Doses in Radiation Therapy



Bednarz* B, Xu XG. Monte Carlo modeling of a 6 and 18 MV Varian Clinac medical accelerator for in-field and out-of-field dose calculations: development and validation. Phys. Med. Biol., 54:N43-N57, 2009.

- Include both accelerator model and computational phantom
- The Accelerator Details:
 - Varian blueprints of 2100C
 - Model by Kase et al. in HPJ
- Patient Details:
 - RANDO Phantom
 - VIP-Man
 - Pregnant patients
 - RPI adult male and female



PET and The Partial Volume Effect

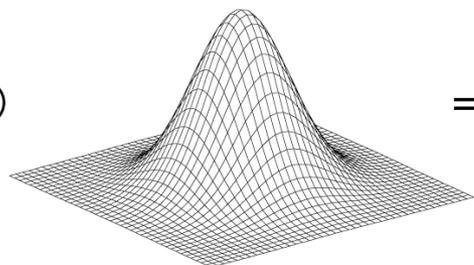
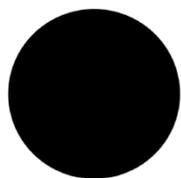


4 mm
└─┘

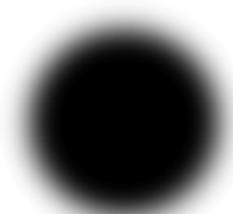
Arises from the poor spatial resolution:

- 1) Spreading of counts across physical tumor boundaries due to image blurring
- 2) Tissue fractionation due to coarse voxel grid

General tendency is to make small lesions look less metabolically active



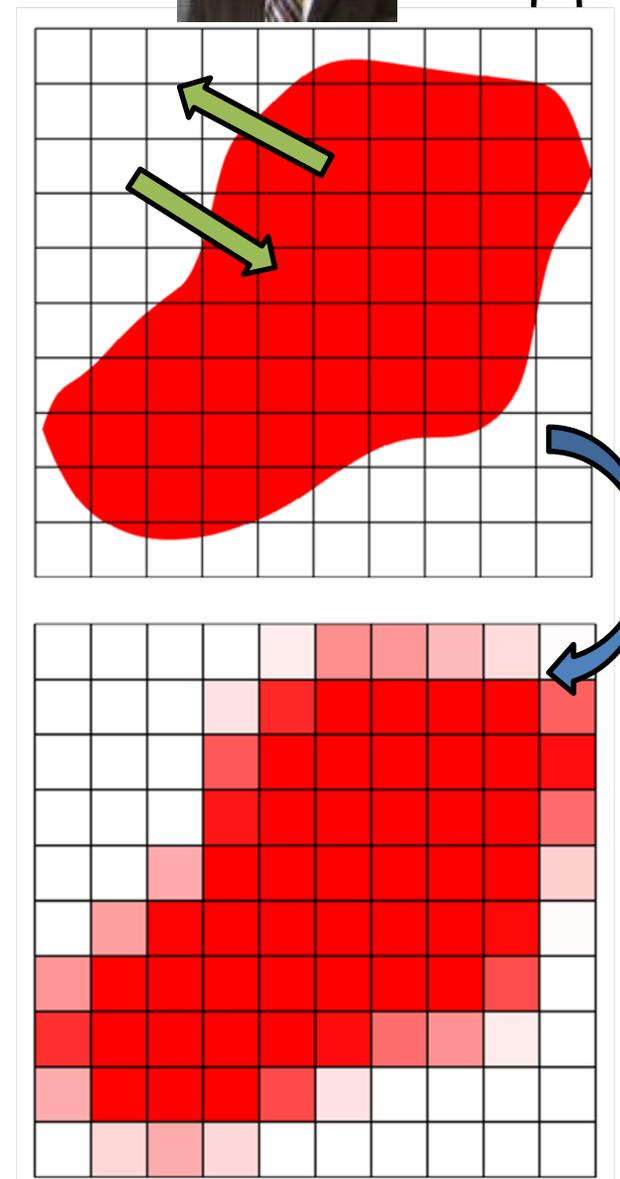
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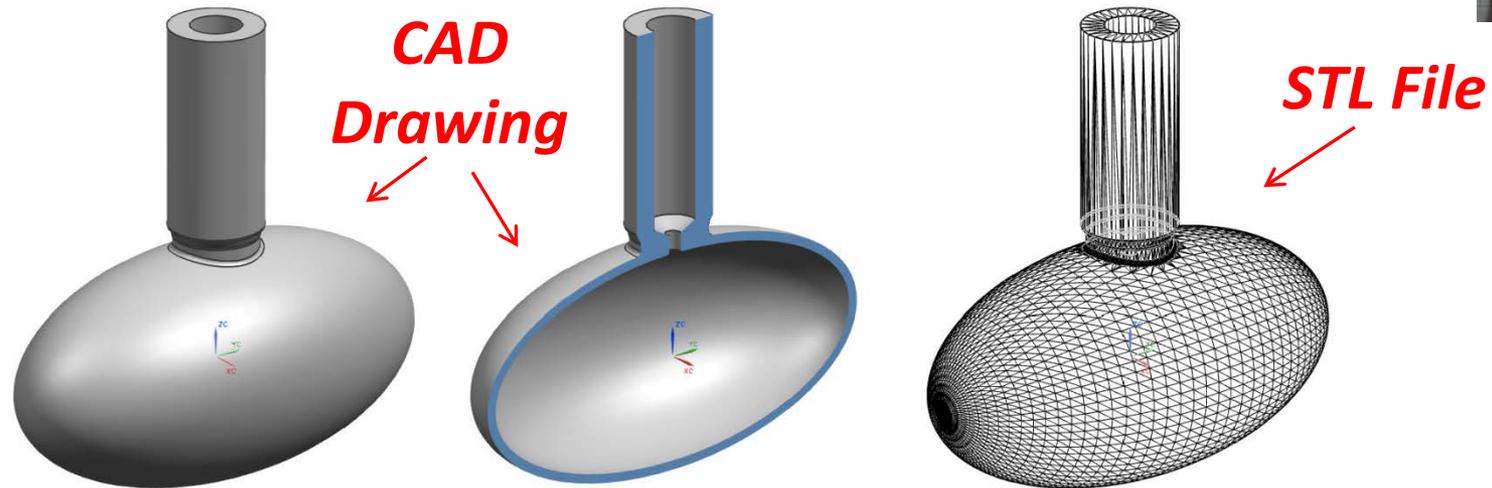
True Image

**Gaussian Point-Spread
Function**

**Measured
Image**



Exp. Methods: Ellipsoid Phantom Designs



		Fill Volume (cm ³)					
		A	B	C	D	E	F
		26.52	11.49	5.58	2.57	1.15	0.52
Axis Ratio		Inner Diameter (mm)					
		A	B	C	D	E	F
1:1	Major	37.0	28.0	22.0	17.0	13.0	10.0
4:3	Minor	33.6	25.4	20.0	15.4	11.8	9.1
	Major	44.8	33.9	26.7	20.6	15.7	12.1
8:5	Minor	31.6	23.9	18.8	14.5	11.1	8.5
	Major	50.6	38.3	30.1	23.3	17.8	13.7
2:1	Minor	29.4	22.2	17.5	13.5	10.3	7.9
	Major	58.7	44.4	34.9	27.0	20.6	15.9

Tumor volumes same as that of NEMA image quality phantom

Experimental Methods:

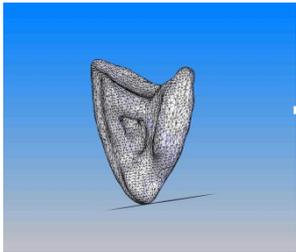
Preparation of Phantoms with Radioactivity





CAD/CAM Phantom Fabrication

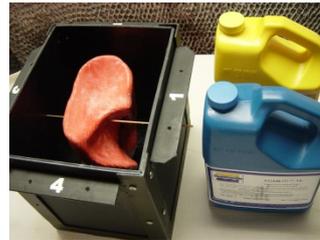
1. Rapid Prototyping the lung in a plaster material (i.e., 3D printing)
2. Suspend lung prototype in mold box
3. Pour foaming plastic around to form a mold and wait to cure
4. Cut mold apart after and seal with epoxy



(1) CAD model



(2) Prototype



(3) Molding box

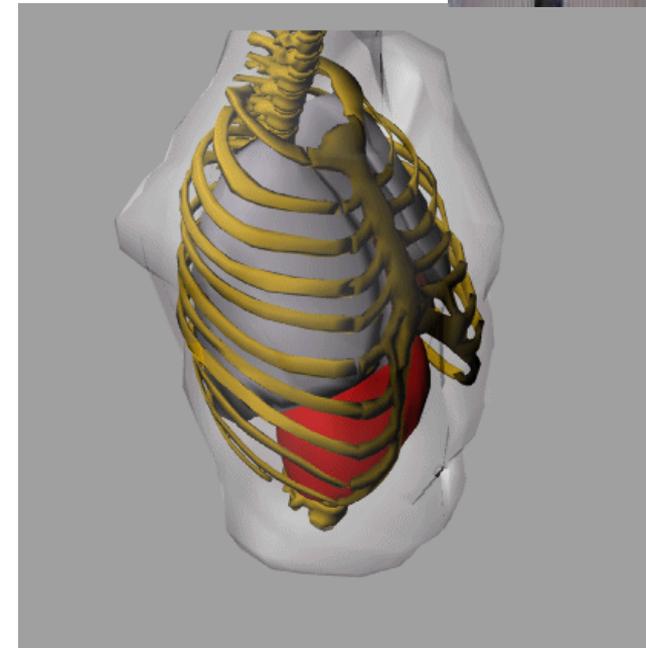
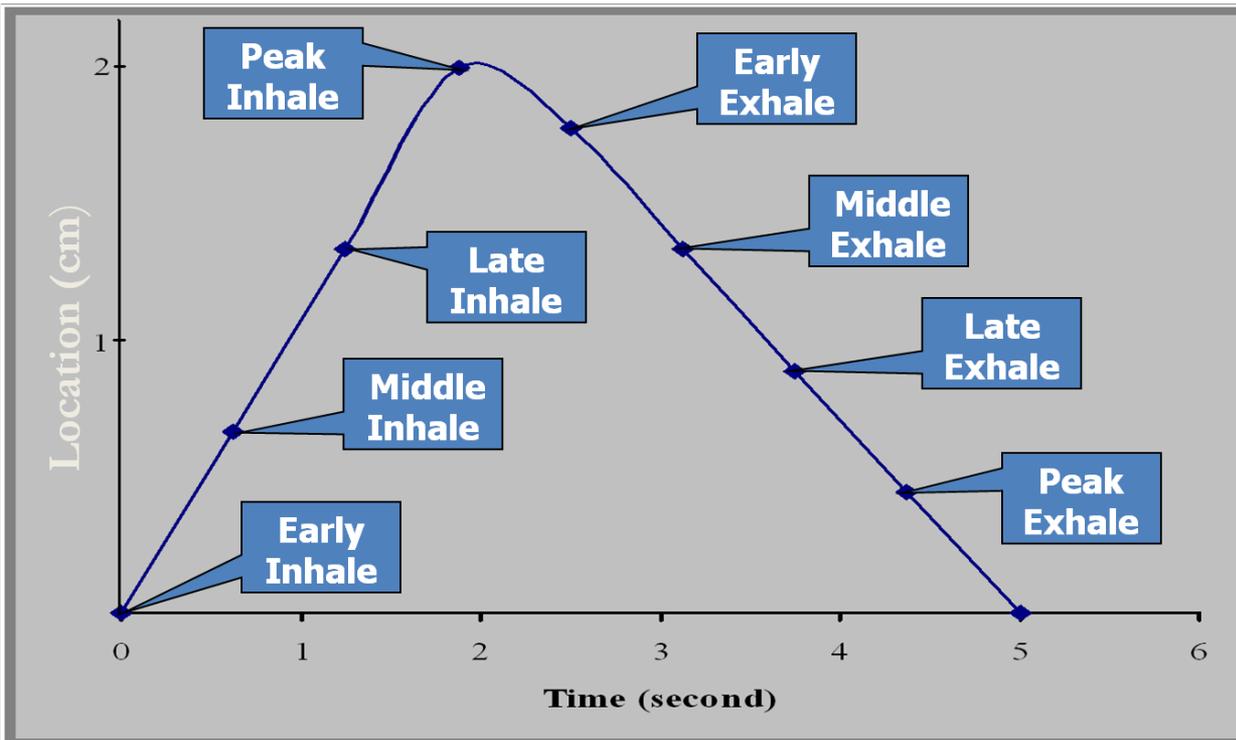
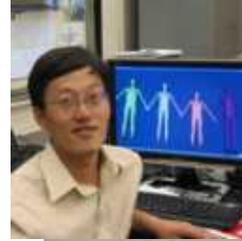


(4) Mold parts



4D Geometry-Based Respiration Modeling

Zhang JY, Xu XG, Shi C.Y, Fuss M. Development of A Geometry-Based Respiratory-Motion-Simulating Patient Model for Radiation Dosimetry. Journal of Applied Clinical Med. Phys., 9(1):16-28, 2008

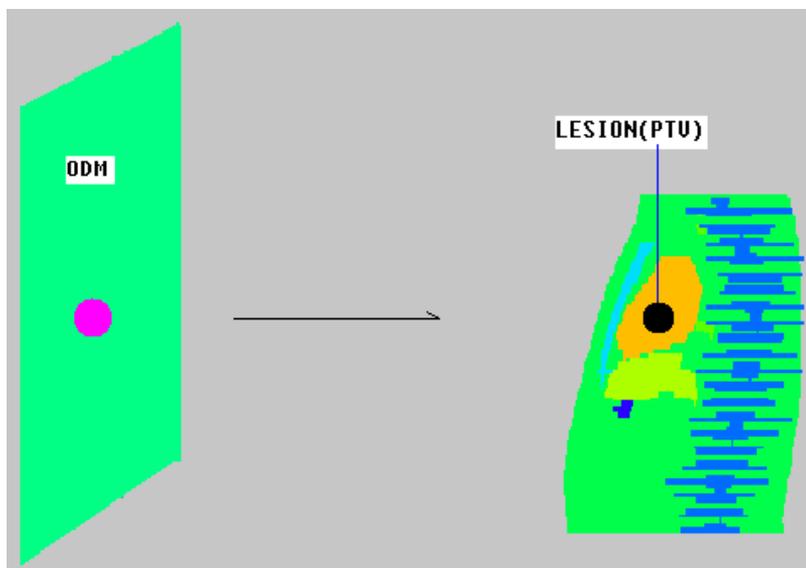


Two Treatment Plans Simulated in Monte Carlo Code



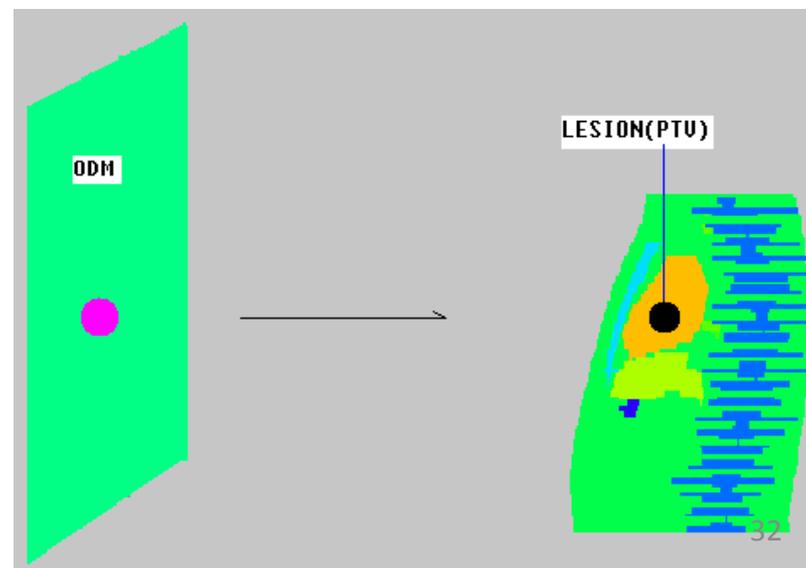
Treatment Planning #1 (gating TP)

- The center of ODM is aligned to the lesion in Phase 1 (early inhalation), i.e., 3D treatment planning

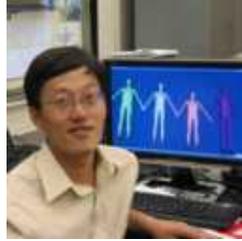


Treatment Planning #2 (4D TP)

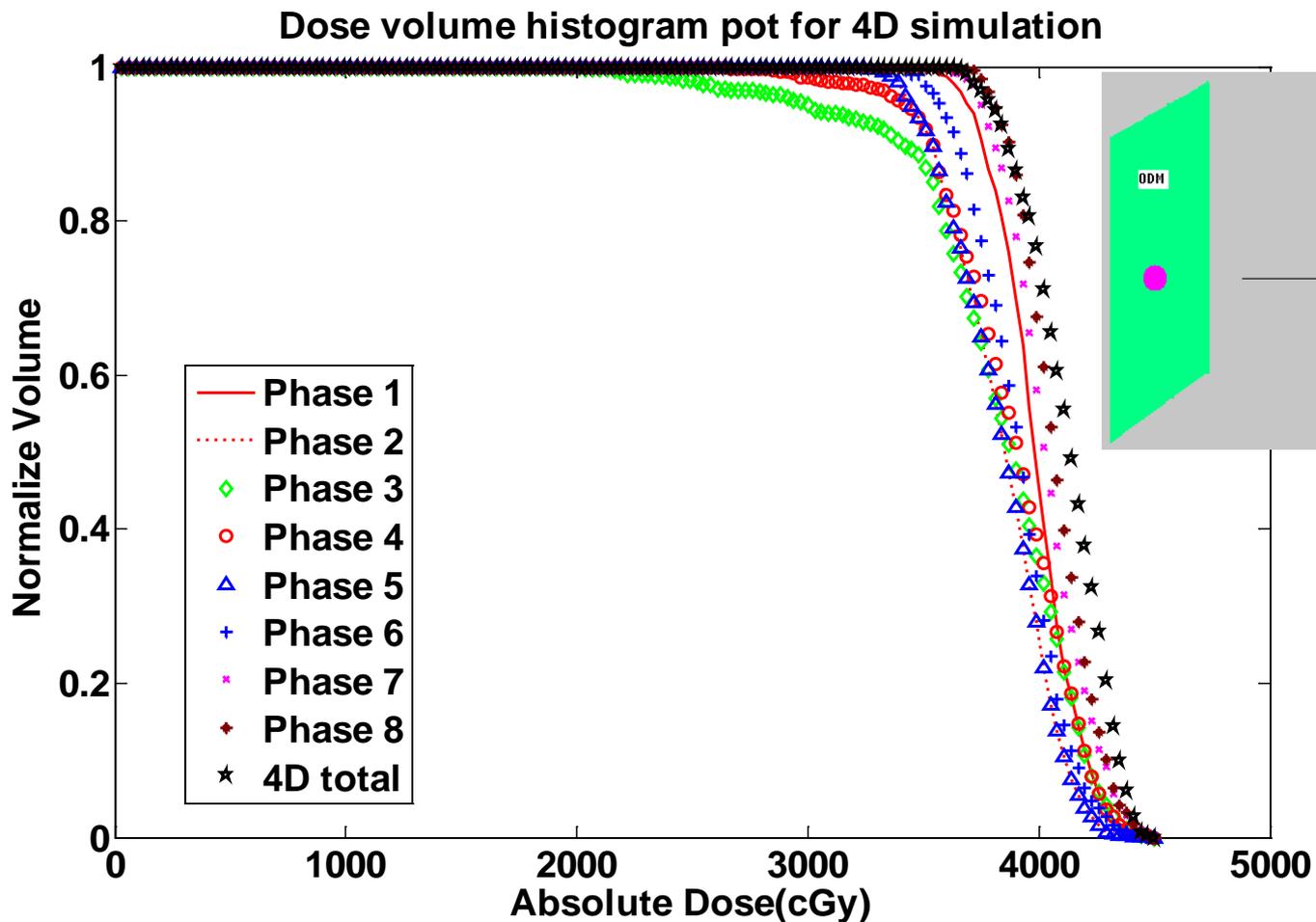
- The “image-guided” 4D TP where PTV moves according to 8 phases



4D Monte Carlo Dose Simulations



- The center of ODM is always kept conformal to the center of the lesion in Phase1.
- The data show that dose distributions in phase 3 and phase 4 are under-dosed



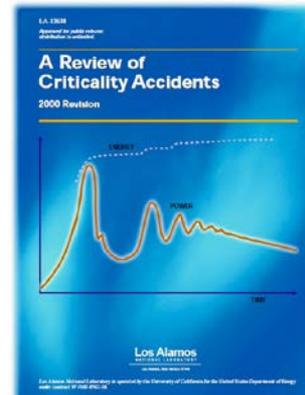
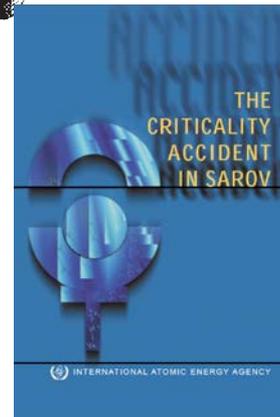
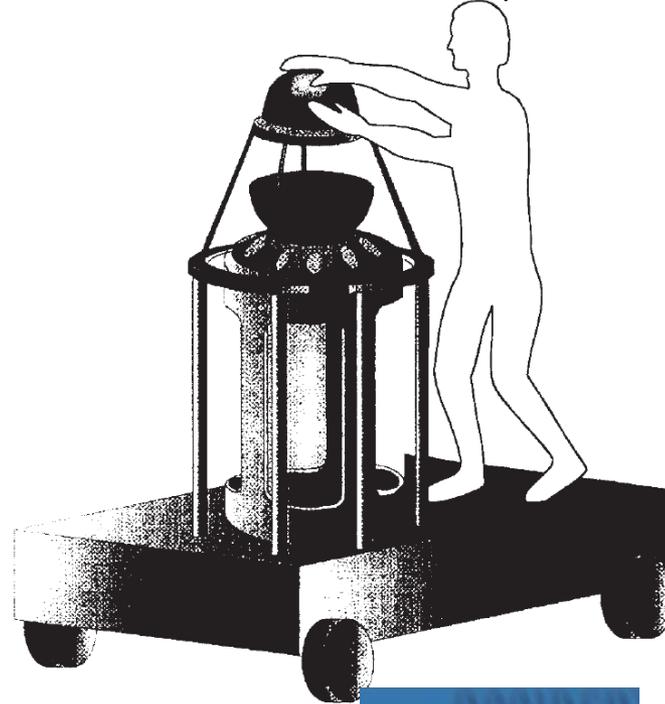
Posture Simulation for Criticality Accident

Vazquez* JA., Ding A, Haley T, Caracappa PF., Xu XG. A dose-reconstruction study of the 1997 Sarov criticality accident using animated dosimetry techniques. Health Phys. 106(5):571-82 (2014). Cover page

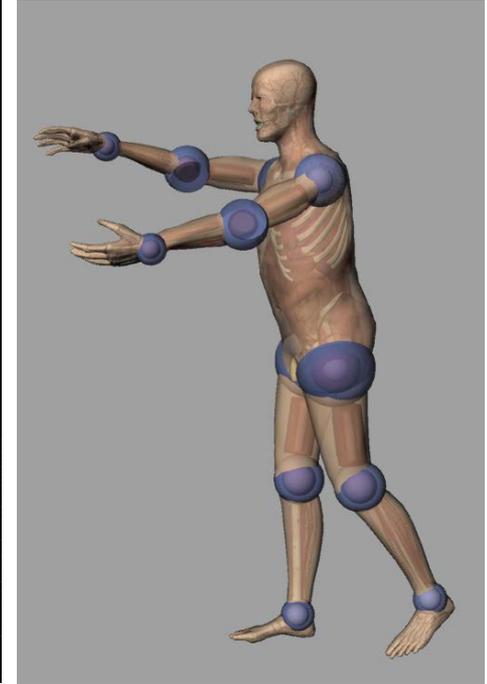
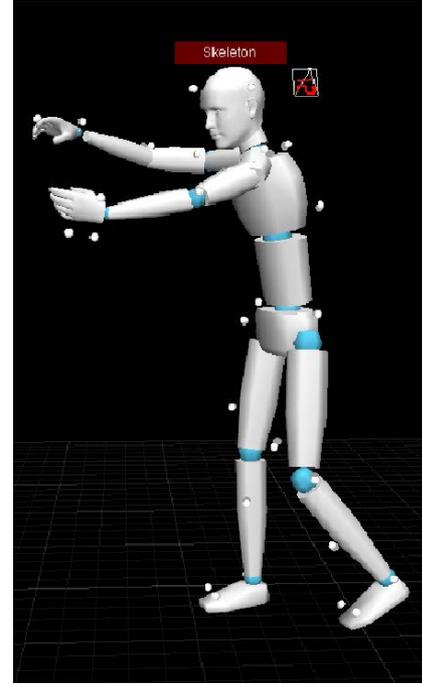
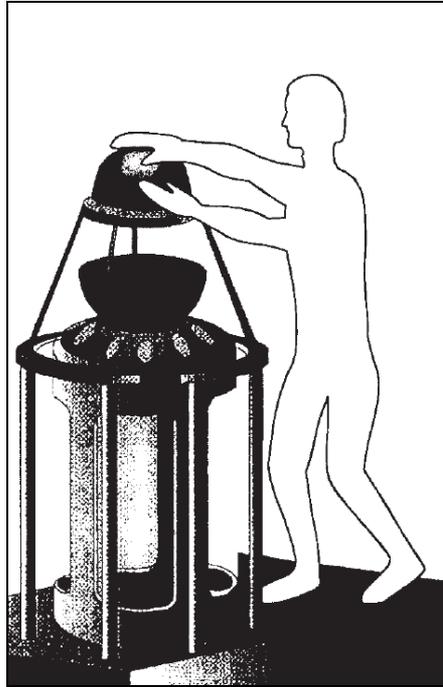
Vazquez* JA., Caracappa PF, Xu XG. Development of posture-specific computational phantoms using motion capture technology and application to radiation dose reconstruction for the 1999 Tokai-mura nuclear criticality accident. Phys. Med. Biol. 59: 5277-5286 (2014).



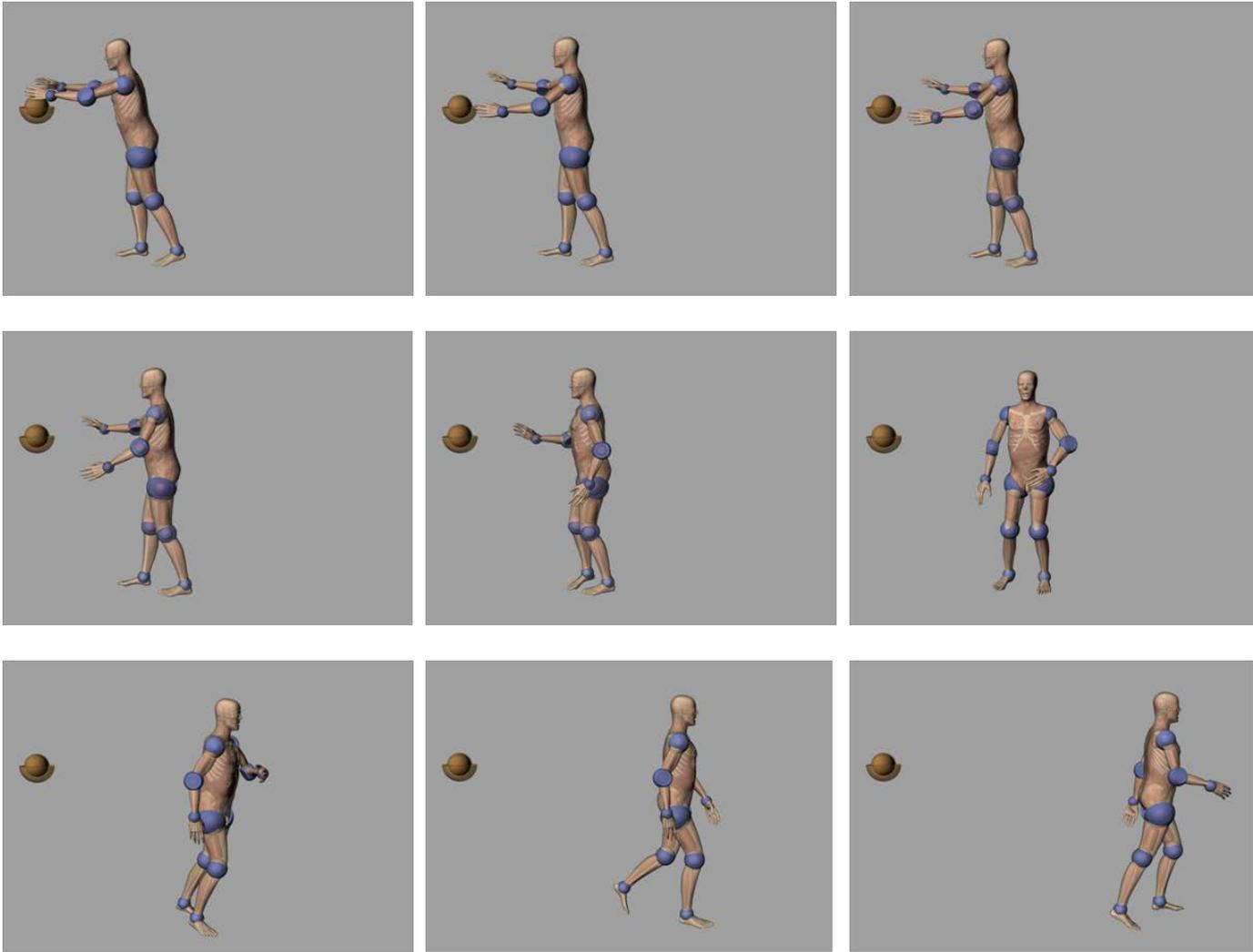
- **1997 accident at a nuclear testing facility in Sarov, Russia**
- **Technician exposed to radiation resulting from a criticality excursion**
- **Death 66 hours later**



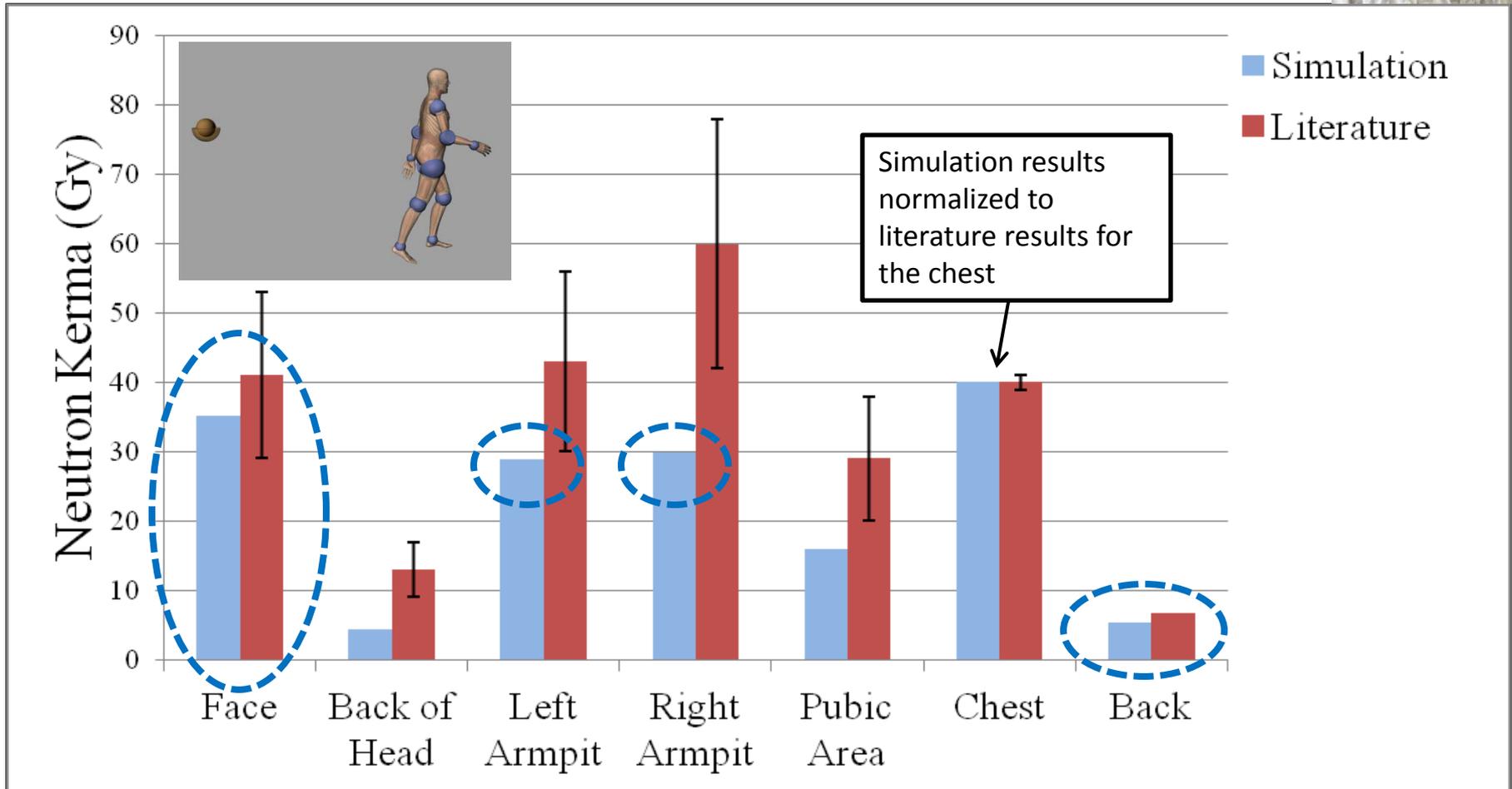
Simulating the Sarov Accident



Simulating the Sarov Accident



Results: Neutron Kerma

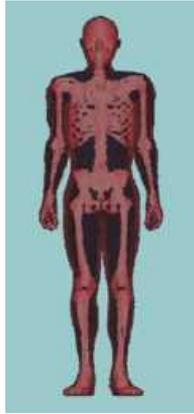


<<Handbook of Anatomical Models for Radiation Dosimetry>>

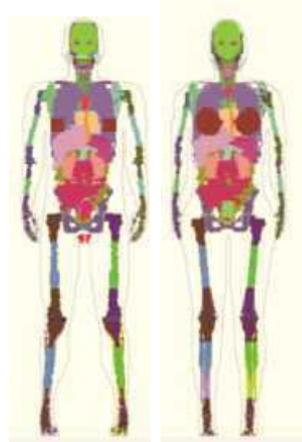
– *curtsey images from various authors*



REX & REGINA (ICRP)



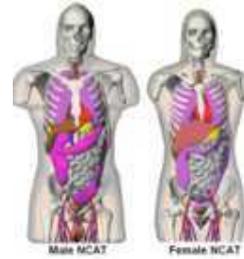
NORMAN



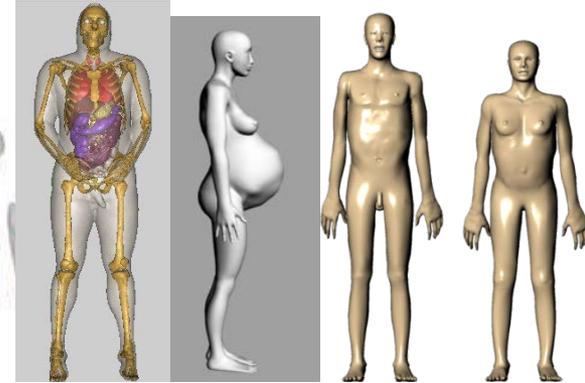
MAX06 FAX06



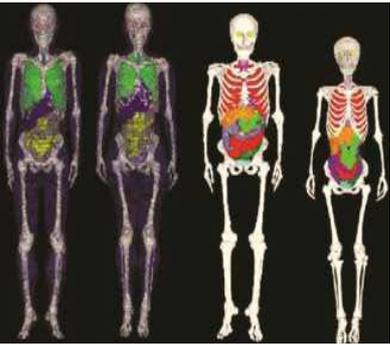
Zubal



NCAT



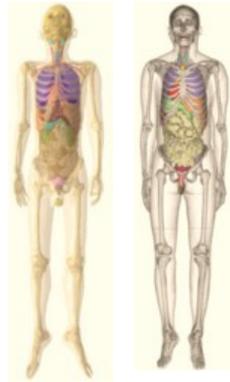
VIP-Man, Pregnant, Adult M/F



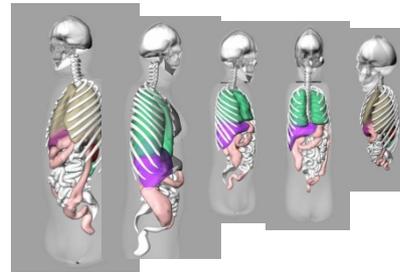
Otoko Onago JM KF



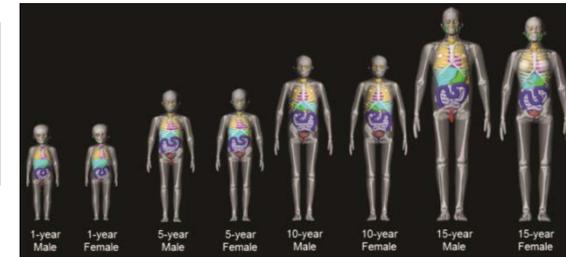
KTMAN 1, 2



CNMAN VCH

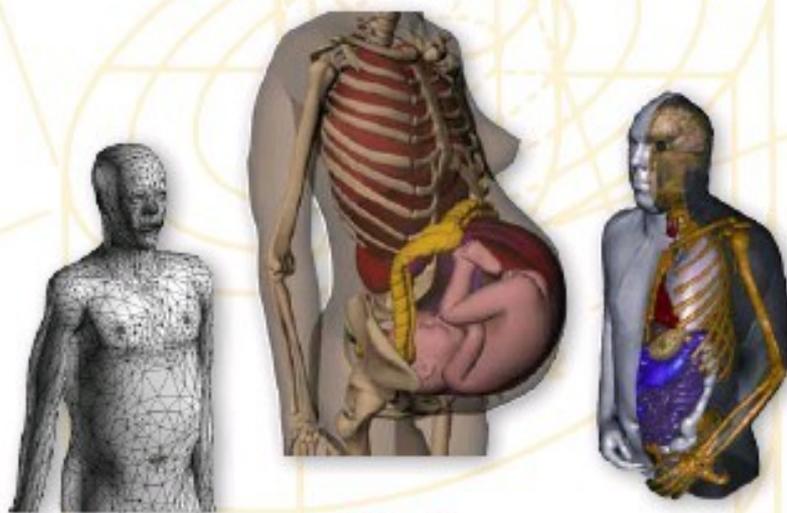


Vanderbilt Family



UF Family

HANDBOOK OF ANATOMICAL MODELS FOR RADIATION DOSIMETRY



Edited by
Xie George Xu and Keith F. Eckerman

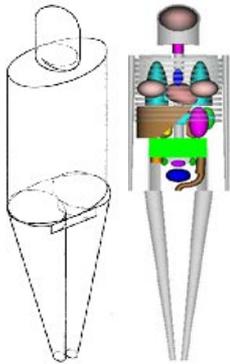
Published in late 2009

- 50-y history
- 30 chapters
- 64 authors
- 13 countries (regions)
- **100+ phantoms**

50-Year History of Computational Phantoms

- Radiation Protection
- Medical Imaging
- Radiotherapy

1st Generation



MIRD anthropomorphic models in 1980s

STYLIZED

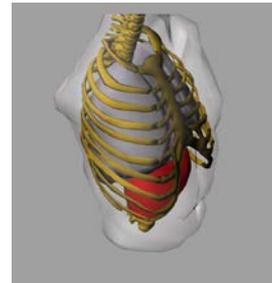
2nd Generation



Image-based rigid, 3D model in 1990-2000s

VOXEL

3rd Generation



Deformable and moving 4D models 2008-2010

BREP

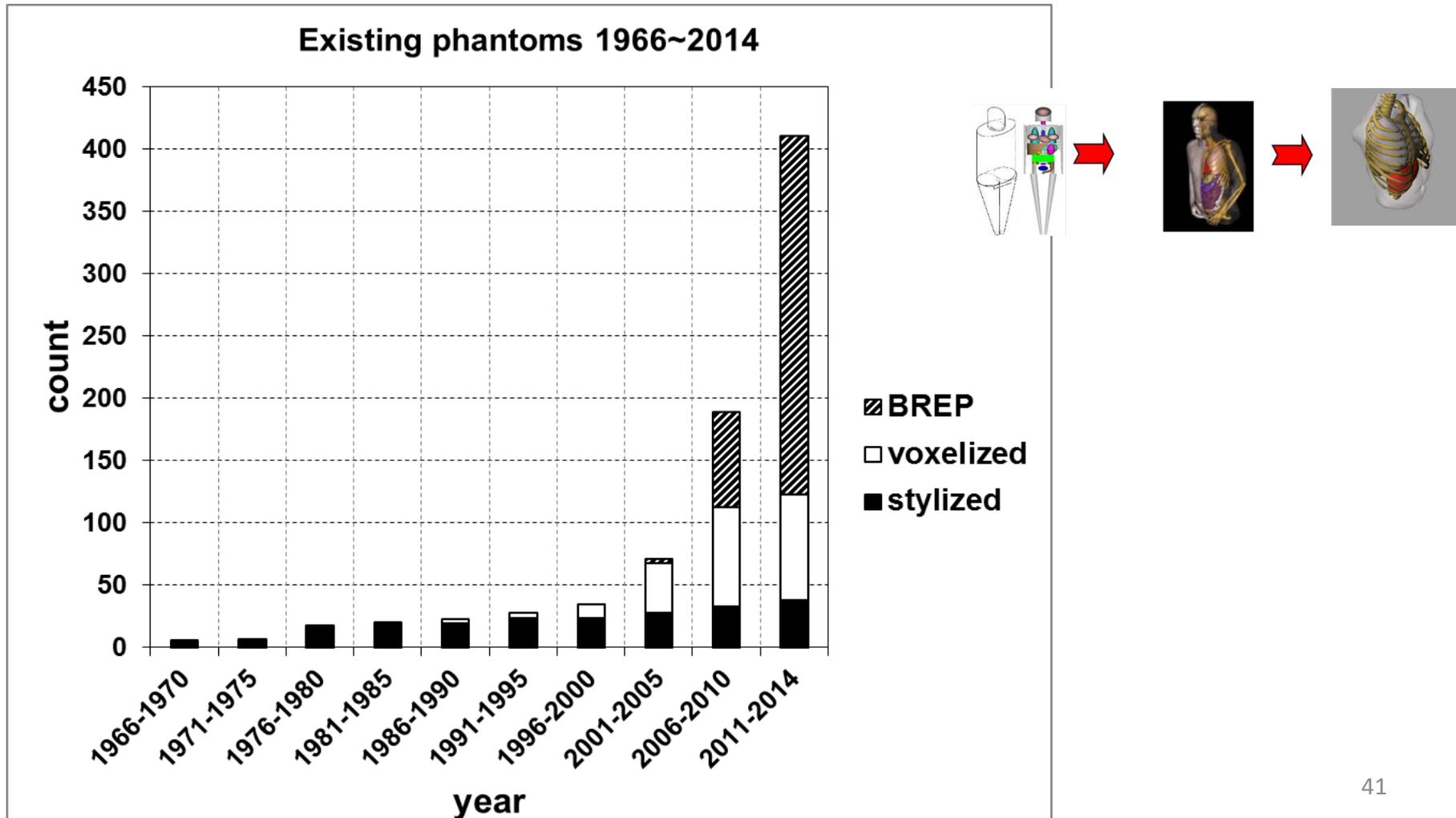


Personalization is Future

The Number of New Phantoms Increased Exponentially

Xu XG. An exponential growth of computational phantom research in radiation protection, imaging, and radiotherapy: a review of the fifty-year history. **Phys. Med. Biol.** (2014).

Top-10 most-downloaded paper in PMB during 2014



Outline

1. Computational Human Phantoms
2. ARCHER Monte Carlo Code

Recent Work on Fast Monte Carlo Methods

- **Monte Carlo method is the gold standard in radiation transport analysis and dose calculations**
- **Advantages**
 - Accurate physics model
 - Particle tracking in heterogeneous systems
 - 3-D geometry
- **Disadvantage**
 - Long computation time to achieve acceptable statistical uncertainty (a few hours to days)
- **Traditional parallel paradigms are CPU-based**
 - Message Passing Interface (MPI): MPICH, OpenMPI
 - Multithreading: OpenMP, Pthreads

High-Performance Computing Depends on Hardware Accelerators

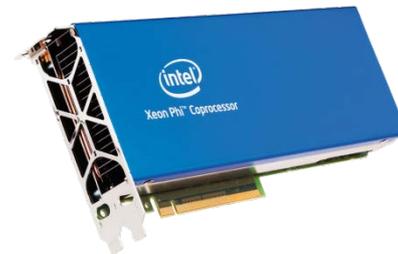
- **Hardware accelerators**
 - High computing efficiency



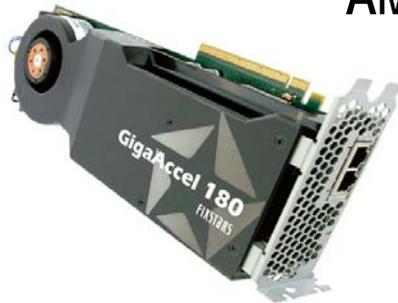
Nvidia GPU [1]



AMD GPU [2]



Intel coprocessor [3]



IBM PowerXCell 8i processor [4]

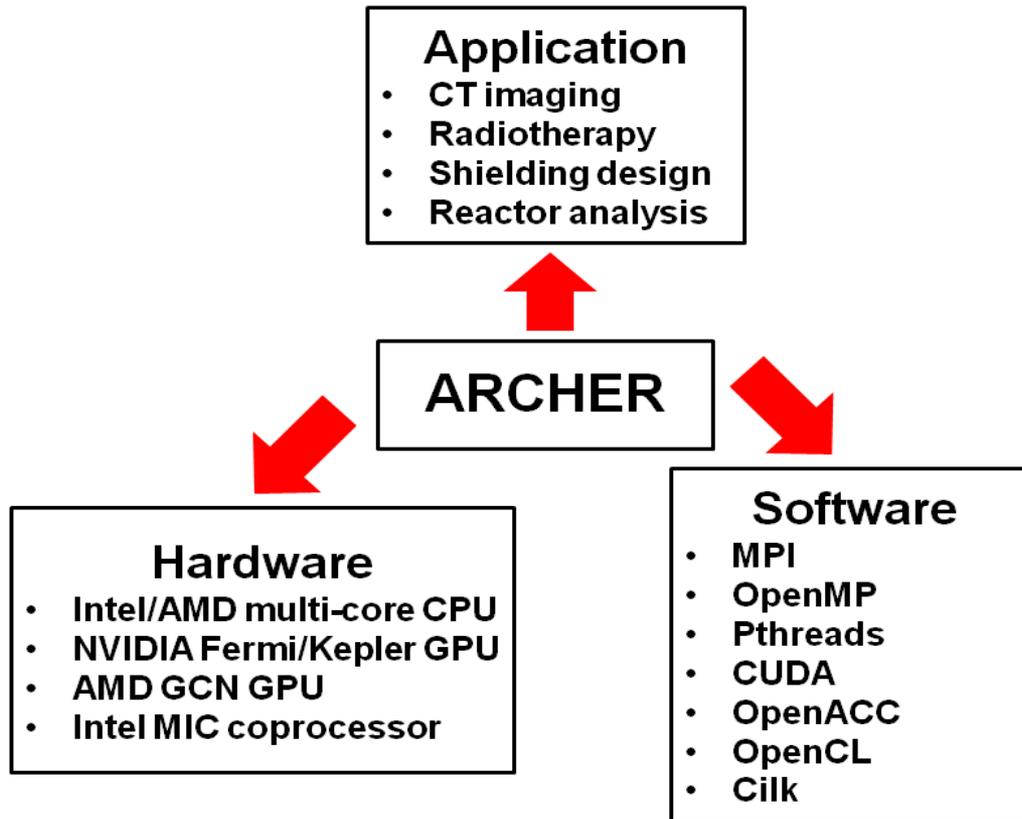


ClearSpeed CSX processor [5]

ARCHER – A Monte Carlo Testbed



Accelerated Radiation-transport Computations in Heterogeneous Environments



www.archer-MC.com

Two Recent Examples:

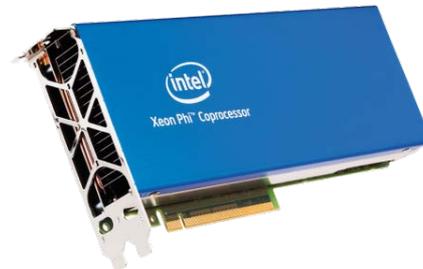
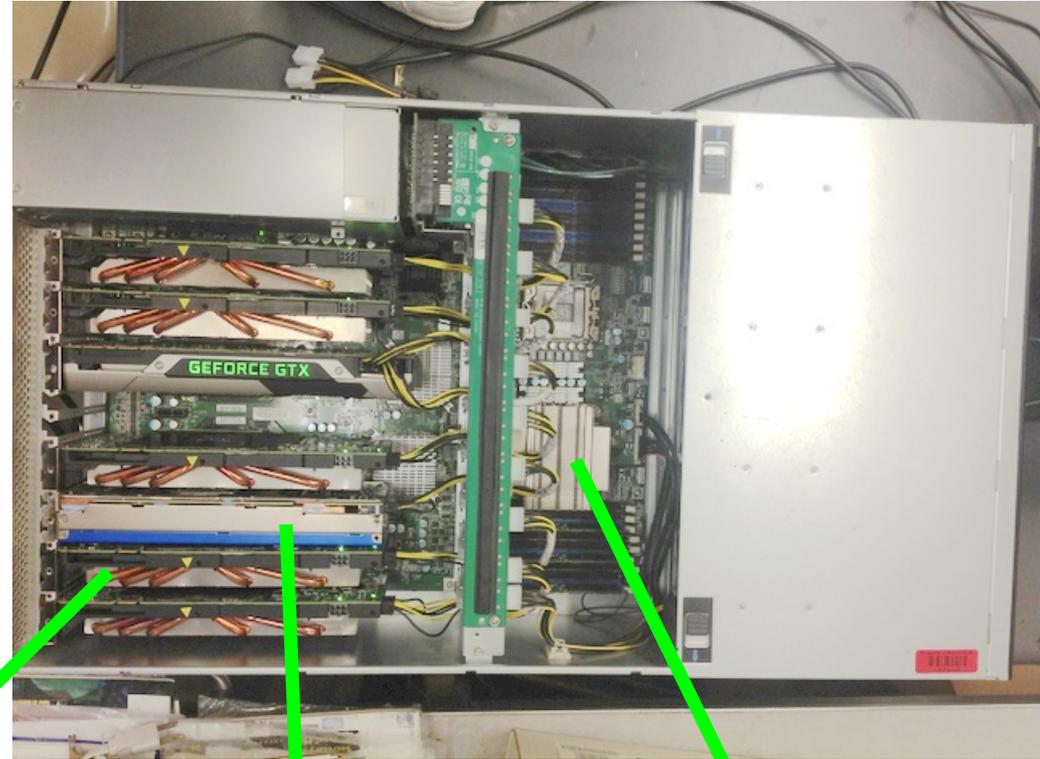
1. CT imaging

2. Radiotherapy



Materials and Methods: Hardware @ \$10k

- **Tyan FT77B7015 server**
- **Intel Xeon X5650 CPU**
 - 6 cores
 - 12 hyperthreads in total
- **Nvidia Tesla M2090 GPU**
- **Intel Xeon Phi 5110p coprocessor**



[1] CPU figure resource: SuperBiiz

Method: Nvidia Tesla M2090 GPU



- **Fermi architecture**

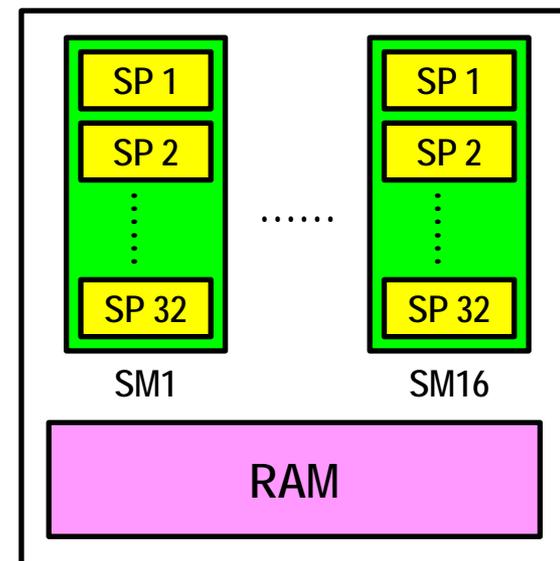
- 16 Streaming Multiprocessors (**SM**)/GPU
- 32 Streaming Processors (**SP**)/SM → CUDA core
- 6 GB RAM

- **Parallelism achieved by:**

- GPU: thread blocks are distributed among the SMs for **simultaneous** execution
- SM: threads are pushed into the instruction pipelines for **concurrent** execution

- **Number of active resident threads on a GPU**

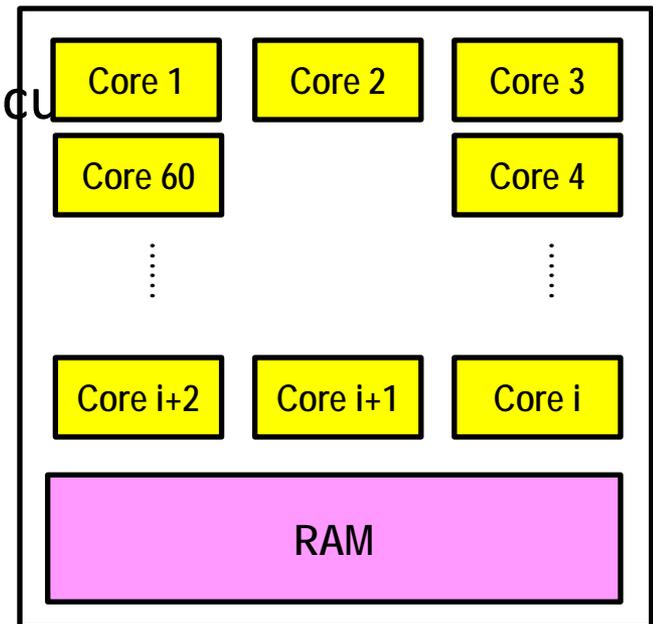
- Problem-dependent
- ~8000 in our case



Introduction: Intel Xeon Phi “coprocessor”



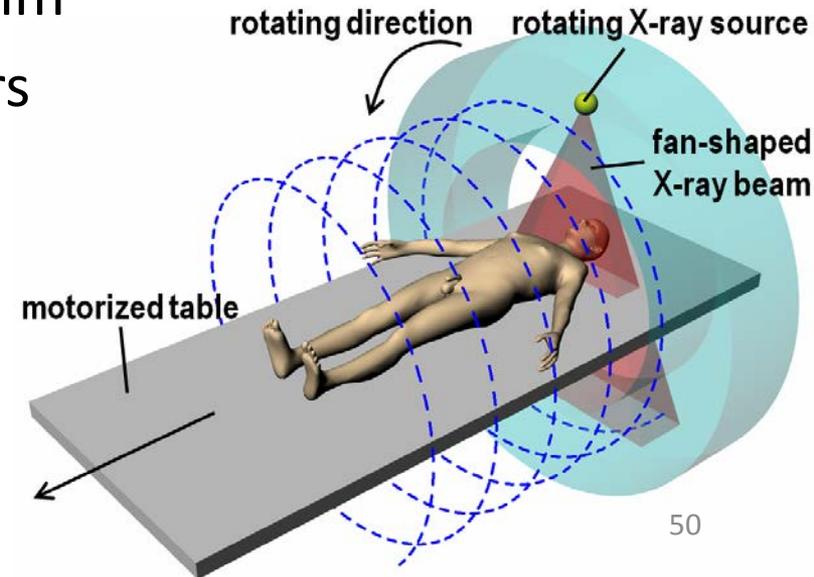
- **Many Integrated Core (MIC) architecture**
 - 60 Pentium cores
 - 8 GB RAM
- **Parallelism achieved by:**
 - coprocessor: threads are distributed among the cores for **simultaneous** execution
 - core: 4 hyper-threads for **concurrent** execution
- **Number of threads on a coprocessor**
 - 240 (fixed)



Materials and Methods: CT scanner model (w Dr. Bob Liu and Mannu Kalra, MGH)



- **GE LightSpeed third-generation 16-multi-detector CT scanner**
 - Validated with experimental CTDI data
- **Scan protocol**
 - Tube voltage: 80, 100, 120, 140 kVp
 - Beam collimation: 1.25, 5, 10, 20 mm
 - Scan type: head, body bowtie filters
 - Scan mode: helical, axial



Results and Discussion: Performance benchmark

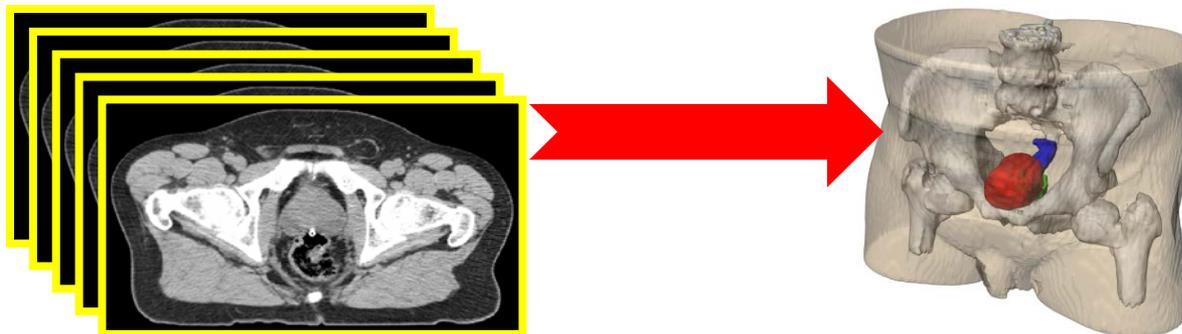
Code	Runtime configs	Computation time [min]	Speedup to ARCHERCPU
Parallel MCNPX	12 MPI procs	476.35	--
ARCHER-CT _{CPU}	12 HTs	11.40	1.00×
ARCHER-CT _{GPU}	100 photons/thread 256 threads/block	2.38	4.80×
ARCHER-CT _{COP}	60 MPI procs, 4 HTs/proc Native execution mode	3.48	3.28×

- **Theoretical peak performance**
 - GPU: 1.3 TFLOPS
 - Coprocessor: 2 TFLOPS
- **But ARCHER-CT_{GPU} is 46% faster than ARCHER-CT_{COP}**

Results and Discussion: Clinical CT case

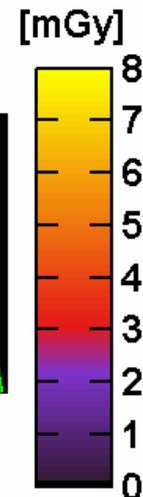
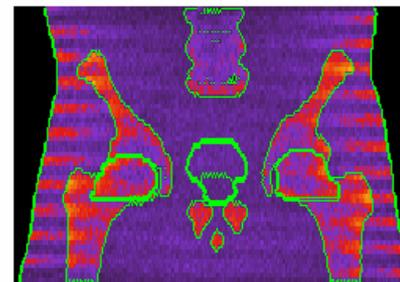
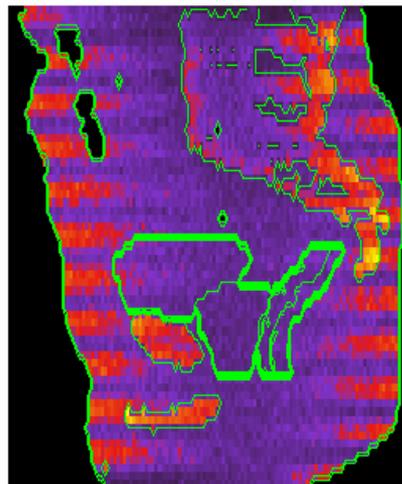
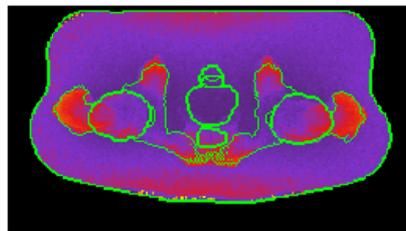


- CT images converted to voxelized phantom



- 3D CT imaging dose distribution by ARCHER-CT_{GPU}

- 1 GPU: **3.7 seconds**
- 6 GPUs: **0.6 seconds** – *real-time speed*



Simulation of Tomotherapy (w/ Dr Bryan Bednarz of UW-Madison)



Su* L Yang YM, Bednarz, Edmond Sterpin, Du* X, Liu* T, Ji W, Xu XG. ARCHERRT — A Photon-Electron Coupled Monte Carlo Dose Computing Engine for GPU: Software Development of and Application to Helical Tomotherapy. Med Phys. 41:071709 (2014).

MC for helical tomotherapy dose calculation

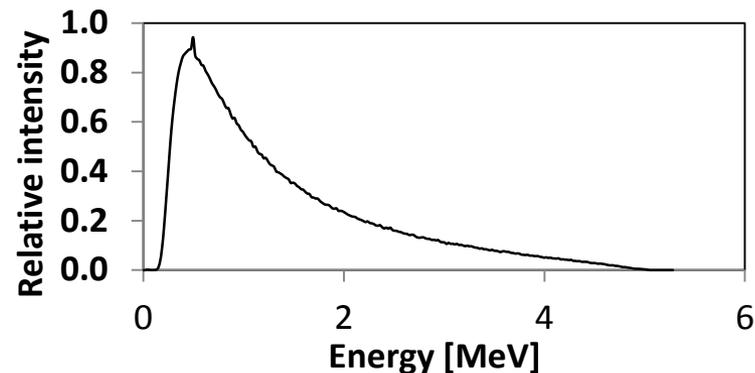
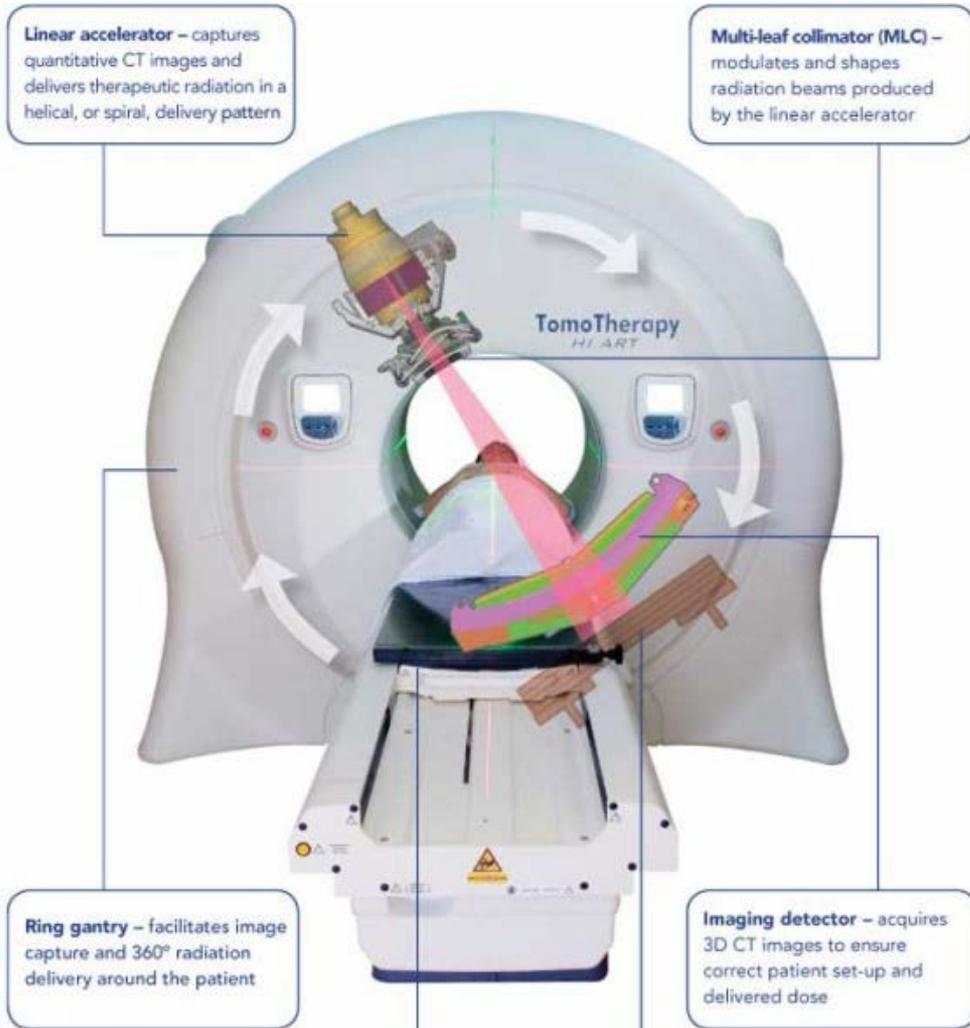
- Megavoltage X-ray source
 - 6MV electron linac
 - secondary electrons transported
- Phase space file (PSF) used for input
 - Patient-specific
- Electron + photon transport in ARCHER





Introduction: TomoTherapy PSF

6 MeV photon hit on target, generate X-ray



Mean energy: 1.45 MeV

With the rotation of gantry and translation of bench, the PS particles form a cylinder

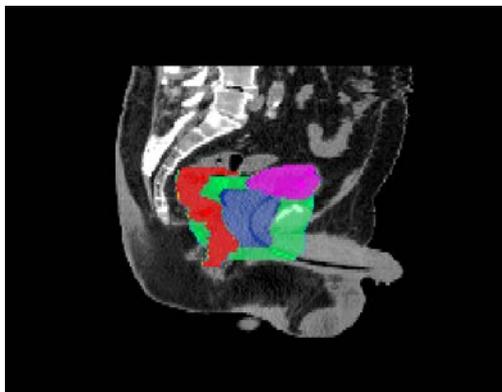
~ 10^8 photons PSF size ~GBs
Reading time nontrivial ~30 sec

Materials and Methods: cases tested

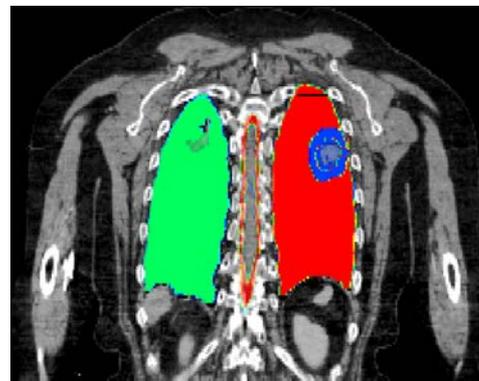


- 6 MV SIEMENS PRIMIS accelerator PSF dose distribution in water
- Three clinical TomoTherapy cases
- Prostate PSF, 200M particles, 2x recycle (600M particles in total)
- Lung PSF, 53M particles, 9x recycle (530M particles in total)
- Head & Neck PSF, 160 M particles, 4x recycle (800M particles in total)
- $E_{\text{cutoff}}=200$ keV ; $Ph_{\text{cutoff}}=10$ keV

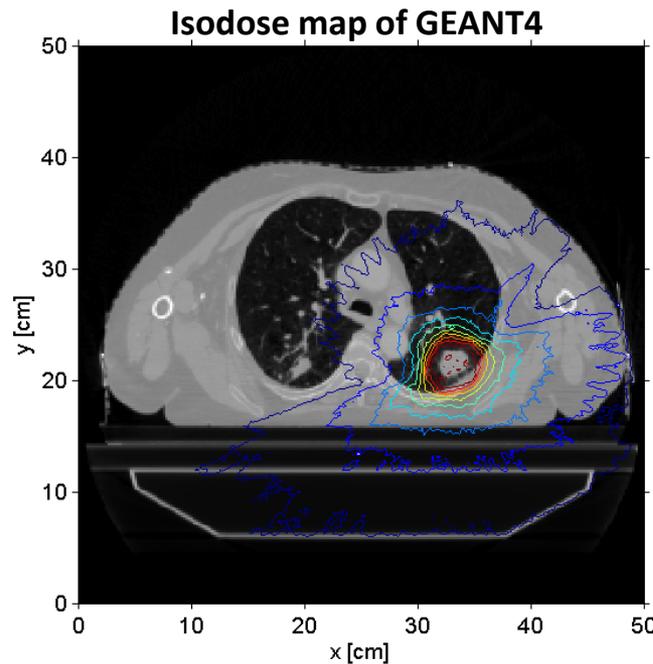
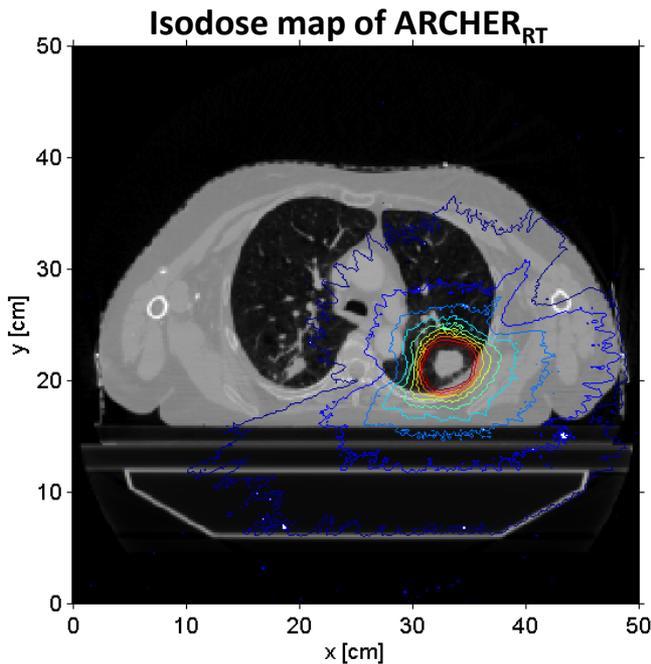
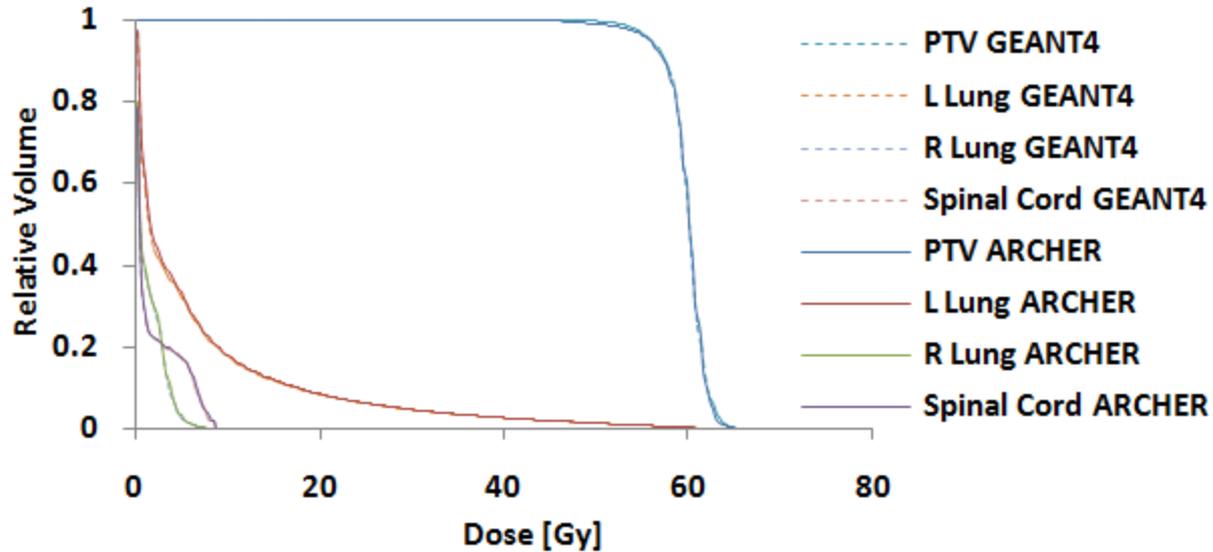
Prostate Case



Lung Case



Results: Lung case



Statistical error in PTV ~1%

2%/2mm Gamma test pass rate: 98.5%

Results: MC Transport Time Comparison



Clinical cases	Intel X5650 (12 threads) time [s]	K40 GPU time [s]
Prostate	729 (1x)	37.9 (19.2x)
Lung	507 (1x)	29.7 (17.1x)
Head & neck	876 (1x)	44.2 (19.8x)

In contrast, GEANT4 needs ~ 500 CPU hours for the similar simulation

Summary

1. Phantom research advanced exponentially in the past 60 years
2. GPU and MIC hardware will drive high-performance computing in this decade, leading to “real-time” Monte Carlo simulations

More info at <http://RRMDG.rpi.edu>