

# LhARA: The Laser-hybrid Accelerator for Radiobiological Applications

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## 2 ABSTRACT

3 The ‘Laser-hybrid Accelerator for Radiobiological Applications’, LhARA, is conceived as a novel,  
4 uniquely-flexible facility dedicated to the study of radiobiology. The technologies demonstrated  
5 in LhARA, which have wide application, may be developed to allow particle-beam therapy to be  
6 delivered in a completely new regime, combining a variety of ion species in a single treatment  
7 fraction and exploiting ultra-high dose rates. LhARA will be a hybrid accelerator system in which  
8 laser interactions drive the creation of a large flux of protons or light ions that are captured using  
9 a plasma (Gabor) lens and formed into a beam. The laser-driven source allows protons and ions  
10 to be captured at energies significantly above those that pertain in conventional facilities, thus  
11 evading the current space-charge limit on the instantaneous dose rate that can be delivered. The  
12 laser-hybrid approach, therefore, will allow radiobiological studies to be carried out in completely  
13 new regimes, delivering protons and light ions in a wide variety of time structures, spectral  
14 distributions, and spatial configurations at instantaneous dose rates up to and significantly beyond  
15 the ultra-high dose-rate ‘FLASH’ regime.

16 It is proposed that LhARA be developed in two stages. In the first stage, a programme of in-vitro  
17 experiments will be served with proton beams with energies between 10 MeV and 15 MeV. In  
18 stage two, the beam will be accelerated using a fixed-field accelerator (FFA). This will allow  
19 experiments to be carried out in vitro and in vivo with proton beam energies of up to 125 MeV. In  
20 addition, ion beams with energies up to 30 MeV per nucleon will be available for in-vitro an in-vivo  
21 experiments. This paper presents the conceptual design for LhARA and the R&D programme by  
22 which the LhARA consortium seeks to establish the facility.

## 23 LAY SUMMARY

24 It is well established that radiation therapy (RT) is an effective treatment for many types of cancer.  
25 Most treatments are delivered by machines that accelerate electrons which are then used to  
26 produce a beam of high energy photons (high energy X-rays) which are directed at a tumour  
27 to kill cancer cells. However, healthy tissue anywhere in the path of the photon beam is also  
28 irradiated and so can be damaged, although there are ways of reducing this damage by using  
29 several beams at different angles.

30 Recent years have seen the use of a new type of machine in which protons are accelerated to  
31 produce proton beams (rather than photon beams) which are directed at a tumour. These proton  
32 beams can be arranged to deposit almost all of their energy in a small volume within a tumour so  
33 they cause little damage to healthy tissue; a major advantage over photon beams. But proton  
34 machines are large and expensive, so there is a need for the development of proton machines  
35 that are smaller, cheaper and more flexible in how they can be used.

36 The LhARA project is aimed at the development of such proton machines using a new approach  
37 based on high powered lasers. Such new machines could also make it easier to deliver the dose  
38 in very short high-intensity pulses and as a group of micro-beams—exciting recent research has  
39 shown that this brings improved effectiveness in killing cancer cells while sparing healthy tissue.  
40 The technology to be proved in LhARA should enable a course of RT to be delivered in days  
41 rather than weeks and should be more effective.

42 Scientifically, there is a need to understand much better the basic processes by which radiation  
43 interacts with biological matter to kill cancer cells—the investigation of these processes involves  
44 physics as well as biology. Thus the most important aim of LhARA is to pursue this radiobiological

45 research in new regimes and from this to develop better treatments. LhARA will also pursue  
46 technological research into laser-hybrid accelerators.

47 **Keywords:** Radiobiology, Novel acceleration, Laser-driven acceleration, Plasma lens, Fixed field alternating gradient acceleration

## 1 INTRODUCTION

48 Cancer is the second most common cause of death globally [The World Health Organisation (2020)]. In  
49 2018, 18.1 million new cancer cases were diagnosed, 9.6 million people died of cancer-related disease, and  
50 43.8 million people were living with cancer [Bray et al. (2018); Fitzmaurice et al. (2018)]. It is estimated  
51 that 26.9 million life-years could be saved in low- and middle-income countries if radiotherapy capacity  
52 could be scaled up [Atun et al. (2015)]. Novel techniques incorporated in facilities that are at once robust,  
53 automated, efficient, and cost-effective are required to deliver the required scale-up in provision.

54 Radiation therapy (RT), a cornerstone of cancer treatment, is used in over 50% of cancer patients [Datta  
55 et al. (2019)]. The most frequently used types of radiotherapy employ photon or electron beams with  
56 MeV-scale energies. Proton and ion beams offer substantial advantages over X-rays because the bulk of the  
57 beam energy is deposited in the Bragg peak. This allows dose to be conformed to the tumour while sparing  
58 healthy tissue and organs at risk. The benefits of proton and ion-beam therapy (PBT) are widely recognised.  
59 PBT today is routinely delivered in fractions of  $\sim 2$  Gy per day over several weeks; each fraction being  
60 delivered at a rate of  $\lesssim 10$  Gy/min deposited uniformly over the target treatment volume. Exciting evidence  
61 of therapeutic benefit has recently been reported when dose is delivered at ultra-high dose-rate,  $\gtrsim 40$  Gy/s  
62 (“FLASH” RT) [Favaudon et al. (2014); Vozenin et al. (2019)], or provided in multiple micro-beams with  
63 diameter less than 1 mm distributed over a grid with inter-beam spacing of  $\sim 3$  mm [Prezado et al. (2017)].  
64 However, the radiobiological mechanisms by which the therapeutic benefit is generated are not properly  
65 understood.

66 LhARA, the Laser-hybrid Accelerator for Radiobiological Applications is conceived as the new, highly  
67 flexible, source of radiation that is required to explore the vast “terra incognita” of the mechanisms by  
68 which the biological response to ionising radiation is determined by the physical characteristics of the beam.  
69 A high-power pulsed laser will be used to drive the creation of a large flux of protons or light ions which  
70 are captured and formed into a beam by strong-focusing plasma lenses. The laser-driven source allows  
71 protons and ions to be captured at energies significantly above those that pertain in conventional facilities,  
72 thus evading the current space-charge limit on the instantaneous dose rate that can be delivered. The plasma  
73 (Gabor) lenses provide the same focusing strength as high-field solenoids at a fraction of the cost. Rapid  
74 acceleration will be performed using a fixed-field alternating-gradient accelerator (FFA) thereby preserving  
75 the unique flexibility in the time, energy, and spatial structure of the beam afforded by the laser-driven  
76 source.

77 We propose that LhARA be developed in two stages. In the first stage, the laser-driven beam, captured  
78 and transported using plasma lenses and bending magnets, will serve a programme of in-vitro experiments  
79 with proton beams of energy of up to 15 MeV. In stage two, the beam will be accelerated using a fixed-field  
80 accelerator (FFA). This will allow experiments to be carried out in vitro and in vivo with proton-beam  
81 energies of up to 125 MeV. Ion beams (including  $C^{6+}$ ) with energies up to 30 MeV per nucleon will also  
82 be available.

83 The laser pulse that initiates the production of protons or ions at LhARA may be triggered at a repetition  
84 rate of up to 10 Hz. The time structure of the beam may therefore be varied to interrupt the chemical  
85 and biological pathways that determine the biological response to ionising radiation with 10 ns to 40 ns  
86 long proton or ion bunches repeated at intervals as small as 100 ms. The technologies chosen to capture,  
87 transport, and accelerate the beam in LhARA have been made so that this unique capability is preserved.  
88 The LhARA beam may be used to deliver an almost uniform dose distribution over a circular area with  
89 a maximum diameter of between 1 cm and 3 cm. Alternatively the beam can be focused to a spot with  
90 diameter of  $\sim 1$  mm.

91 The technologies demonstrated in LhARA have the potential to be developed to make “best in class”  
92 treatments available to the many by reducing the footprint of future particle-beam therapy systems. The  
93 laser-hybrid approach, therefore, will allow radiobiological studies and eventually radiotherapy to be  
94 carried out in completely new regimes, delivering a variety of ion species in a broad range of time  
95 structures, spectral distributions, and spatial configurations at instantaneous dose rates up to and potentially  
96 significantly beyond the current ultra-high dose-rate “FLASH” regime.

97 The LhARA consortium is the multidisciplinary collaboration of clinical oncologists, medical and  
98 academic physicists, biologists, engineers, and industrialists required to deliver such a transformative  
99 particle-beam system. With its “pre Conceptual Design Report” (pre-CDR) [The LhARA consortium  
100 (2020)] the consortium lays out its concept for LhARA, its potential to serve a ground-breaking programme  
101 of radiobiology, and the technological advances that will be made in its execution. The work presented in  
102 the LhARA pre-CDR lays the foundations for the development of full conceptual and technical designs  
103 for the facility. The pre-CDR also contains a description of the R&D that is required to demonstrate the  
104 feasibility of critical components and systems. This paper presents a summary of the contents of the  
105 pre-CDR and lays out the vision of the consortium.  
106

## 2 MOTIVATION

107 Conventional (X-ray) RT is one of the most effective cancer treatments, particularly for solid tumours  
108 including head and neck tumours and glioblastoma. The dose delivered using X-rays falls exponentially  
109 with depth; this characteristic implies a fundamental limit on the maximum dose that can be delivered to  
110 the tumour without delivering an unacceptably large dose to healthy tissue. Tumours that lie deep within  
111 the patient will receive a dose significantly lower than that delivered to the healthy tissues through which  
112 the beam passes on its way to the treatment site. X-rays that pass through the tumour will also deliver a  
113 dose to the tissues that lie behind. Dose delivered to healthy tissues can cause the death of the healthy cells  
114 and create adverse side effects. Furthermore, the maximum X-ray dose that can be delivered is limited by  
115 the presence of sensitive organs such as the brain and spinal cord. This situation is particularly acute in  
116 infants for whom dose to healthy tissue, sensitive organs, and bone can lead to developmental issues and a  
117 higher probability of secondary malignancies later in life. The efficacy of X-ray therapy is also impacted by  
118 biological factors such as the tumour micro-environment, the oxygen level (hypoxia) present in the tissue,  
119 and the inherent radio-resistance of certain types of tumour.

120 RT delivered using protons and ions, particle-beam therapy (PBT), has the potential to overcome the  
121 fundamental limitation of X-rays in cancer treatment [Loeffler and Durante (2013)]. The physics of the  
122 interaction between ionising radiation and tissue determines the radiobiological effect. Energy loss through  
123 ionisation is the dominant mechanism at the beam energies relevant to proton- or ion-beam therapy. The  
124 energy lost per unit distance travelled (the linear energy transfer, LET) increases as the proton or ion slows  
125 down. At low velocity the rate of increase in LET is extremely rapid. This generates a ‘Bragg peak’ in the  
126 energy deposited at the maximum range of the beam just as the protons or ions come to rest. In contrast to  
127 photons, this characteristic allows the dose delivered to healthy tissue behind the Bragg peak to be reduced  
128 to zero for protons, and almost to zero for carbon ions. The effect of scanning the Bragg peak over the  
129 tumour volume is to increase the dose to the tumour while, in comparison to X-ray therapy, sparing tissues  
130 in front of the tumour. By choosing carefully the treatment fields, dose to sensitive organs can be reduced  
131 significantly compared to an equivalent treatment with photons, thus improving patient outcomes. The  
132 Particle Therapy Co-Operative Group (PTCOG) currently lists 90 proton therapy facilities and 12 carbon  
133 ion therapy facilities, and these are located predominantly in high-income countries [PTCOG (2020)]. Low-

134 and middle-income countries (LMIC) are relatively poorly served, indeed nearly 70% of cancer patients  
135 globally do not have access to RT [Datta et al. (2019)]. Novel RT techniques incorporated in facilities that  
136 are robust, automated, efficient, and cost-effective are therefore required to deliver the necessary scale-up  
137 in provision. This presents both a challenge and an opportunity; developing the necessary techniques  
138 and scaling up RT provision will require significant investment but will also create new markets, drive  
139 economic growth through new skills and technologies and deliver impact through improvements in health  
140 and well-being.

#### 141 **The case for a systematic study of the radiobiology of proton and ion beams**

142 The nature of the particle-tissue interaction confers on PBT the advantage that the dose can be precisely  
143 controlled and closely conformed to the tumour volume. However, there are significant biological  
144 uncertainties in the impact of ionising radiation on living tissue. The efficacy of proton and ion beams is  
145 characterised by their relative biological effectiveness (RBE) in comparison to reference photon beams.  
146 The treatment-planning software that is in use in the clinic today assumes an RBE value for protons of  
147 1.1 [Paganetti and van Luijk (2013)]. This means that a lower dose of protons is needed to produce the  
148 same therapeutic effect that would be obtained using X-rays. However, the rapid rise in the LET at the  
149 Bragg peak leads to significant uncertainties in the RBE. It is known that RBE depends strongly on many  
150 factors, including particle energy, dose, dose rate, the degree of hypoxia, and tissue type [Paganetti (2014)],  
151 however, the radiobiology that determines these dependencies is not fully understood. A number of studies  
152 have shown that there can be significant variation in RBE [Jones et al. (2018); Giovannini et al. (2016); Lühr  
153 et al. (2018)]. Indeed, RBE values from 1.1 to over 3 have been derived from in-vitro clonogenic survival  
154 assay data following proton irradiation of cultured cell lines derived from different tumours [Paganetti  
155 (2014); Chaudhary et al. (2014); Wilkens and Oelfke (2004)]. Some of this variation may be due to the  
156 positioning of the cells during irradiation relative to the Bragg peak. RBE values of  $\sim 3$  are accepted for  
157 high-LET carbon-ion irradiation, although higher values have been reported [Karger and Peschke (2017)].  
158 RBE uncertainties for carbon and other ion species are at least as large as they are for protons.

159 Uncertainties in RBE can lead to a mis-estimation of the dose required to treat a particular tumour.  
160 Overestimation of the required dose leads to risk of damage to healthy tissue, while an underestimate can  
161 lead to the tumour not being treated sufficiently for it to be eradicated. RT causes cell death by causing  
162 irreparable damage to the cell's DNA. Hence, differences in RBE can also affect the spectrum of DNA  
163 damage induced within tumour cells. The larger RBE values corresponding to higher LET, can cause  
164 increases in the frequency and complexity of DNA damage, particularly DNA double strand breaks (DSB)  
165 and complex DNA damage (CDD) where multiple DNA lesions are induced in close proximity [Vitti and  
166 Parsons (2019a); Carter et al. (2018)]. These DNA lesions are a major contributor to radiation-induced cell  
167 death as they represent a significant barrier to the cellular DNA repair machinery. Furthermore, the specific  
168 nature of the DNA damage induced by ions determines the principal DNA repair pathways employed to  
169 effect repair; base excision repair is employed in response to DNA-base damage and single-strand breaks,  
170 while non-homologous end-joining and homologous recombination is employed in response to DSBs [Vitti  
171 and Parsons (2019b)]. However, there are a number of other biological factors that contribute greatly to RBE  
172 in specific tumours, including the intrinsic radio-sensitivity of the tissue, the level of oxygenation (hypoxia),  
173 the growth and repopulation characteristics, and the associated tumour micro-environment. Consequently,  
174 there is significant uncertainty in the precise radiobiological mechanisms that arise following PBT and a  
175 more detailed and precise understanding is required for optimal patient-treatment strategies to be devised.  
176 Detailed systematic studies of the biophysical effects of the interaction of protons and ions, under different  
177 physical conditions, with different tissue types will provide important information on RBE variation and  
178 could enable enhanced treatment-planning algorithms to be devised. In addition, studies examining the

179 impact of combination therapies with PBT (e.g. targeting the DNA damage response, hypoxia signalling  
180 mechanisms and also the tumour micro-environment) are currently sparse, and performing these is vital in  
181 devising future personalised patient-therapy strategies using PBT. Such studies are needed, especially in  
182 the case of ion-beam radiotherapy.

### 183 **The case for novel beams for radiobiology**

184 PBT delivery to date has been restricted to a small number of beam characteristics. In a typical treatment  
185 regimen the therapeutic dose is provided in a series of daily sessions delivered over a period of several  
186 weeks. Each session would consist of the delivery of a single fraction of  $\sim 2$  Gy delivered at a rate of  
187  $\lesssim 5$  Gy/minute. The dose in each fraction would be distributed uniformly over an area of several square  
188 centimetres. Exciting evidence of therapeutic benefit has recently been reported when the dose is delivered  
189 at ultra-high dose rates ( $> 40$  Gy/s) and termed FLASH RT [Favaudon et al. (2014); Vozenin et al. (2019)].  
190 These studies indicate significantly reduced lung fibrosis in mice and skin toxicity in mini-pigs, and reduced  
191 side-effects in cats with nasal squamous-cell carcinoma. Varian has indicated that dose rates greater than  
192 40 Gy/s are useful for FLASH irradiation [Systems (2020)], while IBA have indicated that the FLASH  
193 phenomenon is observed at dose rates above 33 Gy/s [IBA (2019)]. In addition, therapeutic benefit has  
194 been demonstrated with the use of multiple micro-beams with diameter of less than 1 mm distributed over a  
195 grid with inter-beam spacing of 3 mm [Prezado et al. (2017)]. However, there is still significant uncertainty  
196 of the thresholds and the radiobiological mechanisms by which therapeutic benefit is generated in FLASH  
197 and micro-beam therapy, which require further extensive study both in-vitro and in appropriate in-vivo  
198 models.

199 The LhARA consortium has conceived LhARA, the Laser-hybrid Accelerator for Radiobiological  
200 Applications, as the highly flexible source delivering the temporal, spectral, and spatial beam structures that  
201 are required to elucidate the mechanisms that underlie the FLASH and micro-beam effects. LhARA will  
202 also allow the exploration of the vast “terra incognita” of the mechanisms by which the biological response  
203 to ionising radiation is modulated by the physical characteristics of the beam. These comprehensive studies  
204 are not currently possible at clinical RT facilities. Thus the LhARA facility will provide greater accessibility  
205 to stable ion beams, enable different temporal fractionation schemes, and deliver reliable and reproducible  
206 biological data with fewer constraints than at current clinical centres. The availability of several ion beams  
207 (from protons to heavier ions) within the same facility will provide further flexibility and the ability  
208 to perform direct radiobiological comparisons of the effect of different charged particles. In addition,  
209 LhARA will enable exhaustive evaluations of RBE using more complex end-points (e.g. angiogenesis  
210 and inflammation) in addition to routine survival measurements. The ability to evaluate charged particles  
211 in conjunction with other therapies (immunotherapy and chemotherapy), and of performing in-vivo  
212 experiments with the appropriate animal models is a huge advantage given the current lack of evidence in  
213 these areas. LhARA therefore has the potential to yield the accumulation of radiobiological data that can  
214 drive a significant change in current clinical practice. The simulations of LhARA that are described in this  
215 document have been used to estimate the dose delivered as a function of energy for protons and carbon  
216 ions. Details of the simulations can be found in sections 3.3 and 3.4. The simulations show instantaneous  
217 particle rates on the order of  $10^9$  particles per shot can be achieved, corresponding to average dose rates  
218 up to  $\gtrsim 400$  Gy/s for protons and  $\gtrsim 10^4$  Gy/s for carbon ions. These estimates are based on the baseline  
219 specifications for LhARA.

### 220 **Laser-hybrid beams for radiobiology and clinical application**

221 High-power lasers have been proposed as an alternative to conventional proton and carbon-ion facilities  
222 for radiotherapy [Bulanov et al. (2002); Fourkal et al. (2003); Malka et al. (2004)]. The capability of

223 laser-driven ion beams to generate protons and high-LET carbon ions at FLASH dose rates is a significant  
224 step forward for the provision of local tumour control whilst sparing normal tissue. High-power lasers have  
225 also been proposed to serve as the basis of electron, proton and ion-beams for radiobiology [Kraft et al.  
226 (2010a); Fiorini et al. (2011); Doria et al. (2012a); Zeil et al. (2013a); Masood et al. (2014); Zlobinskaya  
227 et al. (2014)]. More recent projects (e.g. A-SAIL [A-SAIL Project (2020)], ELI [Cirrone et al. (2013)] and  
228 SCAPA [Wiggins et al. (2019)]) will also investigate radiobiological effects using laser-driven ion beams.  
229 These studies will also address various technological issues [Manti et al. (2017a); Romano et al. (2016);  
230 Masood et al. (2017); Chaudhary et al. (2017); Margarone et al. (2018)].

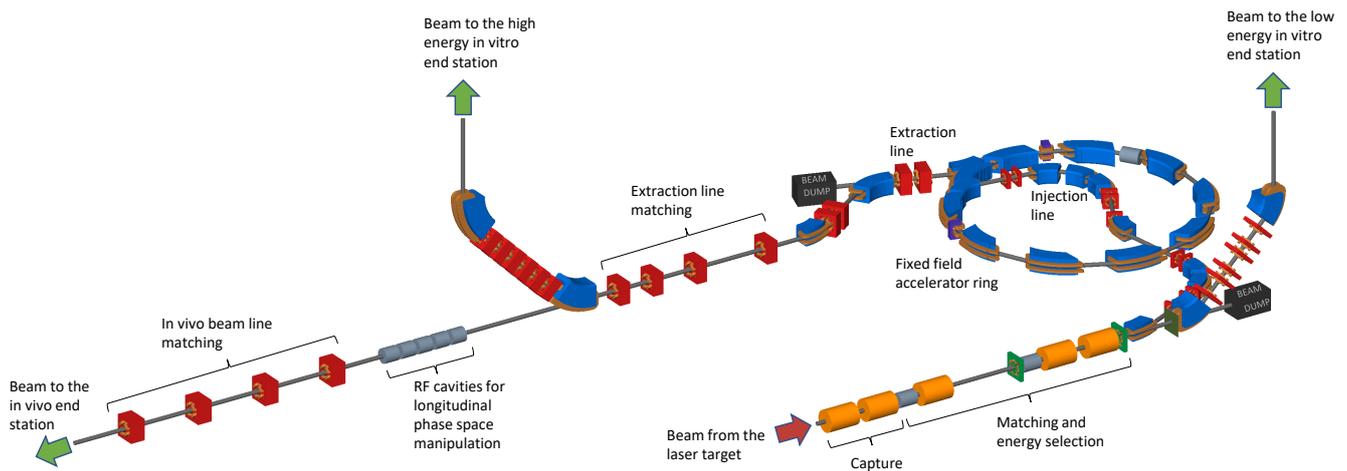
231 The LhARA collaboration's concept is to exploit a laser to drive the creation of a large flux of protons  
232 or light ions which are captured and formed into a beam by strong-focusing plasma lenses. The laser-  
233 driven source allows protons and ions to be captured at energies significantly above those that pertain in  
234 conventional facilities, thus evading the current space-charge limit on the instantaneous dose rate that can  
235 be delivered. Rapid acceleration will be performed using a fixed-field alternating-gradient accelerator (FFA)  
236 thereby preserving the unique flexibility in the time, energy, and spatial structure of the beam afforded  
237 by the laser-driven source. Modern lasers are capable of delivering a Joule of energy in pulses that are  
238 tens of femtoseconds in length at repetition rates of  $\gtrsim 10$  Hz. At source, a laser-driven electron beam is  
239 reproducibly-well collimated and has a modest ( $\sim 5\%$ ) energy spread. By contrast, laser-driven proton and  
240 ion sources create beams that are highly divergent, have a large energy spread, and an intensity that varies  
241 by up to 40% pulse-to-pulse. Multiple ion species, from proton to carbon, can be produced from a single  
242 laser by varying the target foil and particle capture optics. The realisation of LhARA requires each of these  
243 issues to be addressed. The LhARA consortium's vision is that LhARA will prove the principal of the  
244 novel technologies required for the development of future therapy facilities. The legacy of the LhARA  
245 programme will therefore be:

- 246 • A unique facility dedicated to the development of a deep understanding of the radiobiology of proton  
247 and ion beams; and
- 248 • The demonstration in operation of technologies that will allow particle beam therapy to be delivered in  
249 completely new regimes.

250

### 3 THE LHARA FACILITY

251 The LhARA facility, shown schematically in figure 1, has been designed to serve two end stations for  
252 in-vitro radiobiology and one end station for in-vivo studies. The principle components of the LhARA  
253 accelerator are: the laser-driven proton and ion source; the matching and energy selection section; beam  
254 delivery to the low-energy in-vitro end station; the low-energy abort line; the injection line for the fixed-  
255 field alternating-gradient accelerator (FFA); the FFA; the extraction line; the high-energy abort line; beam  
256 delivery to the high-energy in-vitro end station; and the transfer line to the in-vivo end station. Proton  
257 beams with energies of between 12 MeV and 15 MeV will be delivered directly from the laser-driven  
258 source to the low-energy in-vitro end station via a transfer line. The high-energy in-vitro end station and the  
259 in-vivo end station will be served by proton beams with energy between 15 MeV and 127 MeV and by ion  
260 beams (including  $C^{6+}$ ) with energies up to 33.4 MeV/u. This configuration makes it natural to propose that  
261 LhARA be constructed in two stages; Stage 1 providing beam to the low-energy in-vitro end station and  
262 Stage 2 delivering the full functionality of the facility. The development of LhARA Stage 1 will include  
263 machine performance and optimisation studies designed to allow in-vitro experiments to begin as soon as  
264 possible.



**Figure 1.** Schematic diagram of the LhARA beam lines. The particle flux from the laser-driven source is shown by the red arrow. The ‘Capture’ section is followed by the ‘Matching and energy selection’ section. The beam is then directed either into the 90° bend that takes it to the low-energy in-vitro end station, towards the FFA injection line, or to the low-energy beam dump. Post acceleration is performed using the ‘Fixed field accelerator ring’ on extraction from which the beam is directed either to the high-energy in-vitro end station, the in-vivo end station, or the high-energy beam dump.

265 The design parameters for the various components of LhARA are given in tables 1 and 2. The design of  
 266 the LhARA facility is described in the sections that follow.

267

### 268 3.1 Laser-driven proton and ion source

269 Laser-driven ions have been posited as a source for radiobiological studies for a number of years [Kraft  
 270 et al. (2010b); Yogo et al. (2011); Bin et al. (2012)]. Until now, the achievable ion energies, energy  
 271 spreads, and reproducibility of such beams have meant that such sources are not suitable for a full  
 272 radiobiological laboratory setting. While a number of cell irradiation experiments have been conducted  
 273 with laser-accelerated ions [Doria et al. (2012b); Zeil et al. (2013b); Pommarel et al. (2017); Manti et al.  
 274 (2017b)], these have been limited in scope to a single-shot configuration. In addition, most of these  
 275 experiments have been performed on high-power laser facilities with rapidly shifting priorities, where the  
 276 time to install dedicated diagnostic systems has not been available. At present, a dedicated ion beam for  
 277 radiobiology, based on a laser-driven source, is not available anywhere in the world. Therefore, LhARA  
 278 will be a unique, state-of-the-art system, able to explore the radiobiological benefits of a laser-accelerated  
 279 ion source.

280 Conventional ion sources are capable of producing ions with energies of the order of 50 keV with relatively  
 281 modest currents (of the order of 100  $\mu A$ ) [Osmic et al. (2012)]. A novel solution to the ion-acceleration  
 282 problem is to use a compact, flexible laser-driven source coupled to a state-of-the-art beam-transport line.  
 283 This allows an accelerating gradient of  $\gtrsim 10$  GV/m to be exploited at the laser-driven source. We propose  
 284 to operate in a laser-driven sheath-acceleration regime [Clark et al. (2000); Snively et al. (2000); Daido  
 285 et al. (2012)] for ion generation. An intense, short laser pulse will be focused onto a target. The intense  
 286 electric field generated on the front surface of the target accelerates the surface electrons, driving them into  
 287 the material. Electrons which gain sufficient energy traverse the target, ionising the material as they go. A  
 288 strong space-charge electric field, the ‘sheath’, is created as the accelerated electrons exit the rear surface  
 289 of the target. This field in turn accelerates surface-contaminant ions. The sheath-acceleration scheme has

**Table 1.** Design parameters of the components of the LhARA facility. The parameter table is provided in a number of sections. This section contains parameters for the Laser-driven proton and ion source, the Proton and ion capture section, and the Stage 1 beam transport section.

Parameter	Value or range	Unit
<b>Laser driven proton and ion source</b>		
Laser power	100	TW
Laser Energy	2.5	J
Laser pulse length	25	fs
Laser rep. rate	10	Hz
Proton energy	15	MeV
<b>Proton and ion capture</b>		
Beam divergence to be captured	50	mrad
Gabor lens effective length	0.857	m
Gabor lens length (end-flange to end-flange)	1.157	m
Gabor lens cathode radius	0.0365	m
Gabor lens maximum voltage	65	kV
Number of Gabor lenses	2	
Alternative technology: solenoid length	1.157	m
Alternative technology: solenoid max field strength	1.3	T
<b>Stage 1 beam transport: matching &amp; energy selection, beam delivery to low-energy end station</b>		
Number of Gabor lenses	3	
Number of re-bunching cavities	2	
Number of collimators for energy selection	1	
Arc bending angle	90	Degrees
Number of bending magnets	2	
Number of quadrupoles in the arc	6	
Alternative technology: solenoid length	1.157	m
Alternative technology: solenoid max field strength (to serve the injection line to the Stage 2)	0.8 (1.4)	T

290 been shown to produce ion energies greater than 40 MeV/u at the highest laser intensities. The maximum  
 291 proton energy ( $E_p$ ) scales with laser intensity ( $I$ ) as,  $E_p \propto I^{\frac{1}{2}}$ . The laser required to deliver a significant  
 292 proton flux at 15 MeV can be compact, relatively inexpensive, and is commercially available.

293 The distribution of proton and ion energies observed in laser-driven beams exhibits a sharp cut off at  
 294 the maximum energy and, historically, the flux of laser-accelerated ion beams has varied significantly  
 295 shot-to-shot. To reduce the impact of the shot-to-shot variations the choice has been made to select particles  
 296 from the plateau of the two-temperature energy spectrum of the laser-accelerated ion beam. This choice  
 297 should enhance ion-beam stability and allow reproducible measurements to be carried out at ultra-high dose  
 298 rate using a small number of fractions. To create the flux required in the plateau region it is proposed that a  
 299 100 TW laser system is used. A number of commercial lasers are available that are capable of delivering  
 300  $> 2.5$  J in pulses of duration  $< 25$  fs, at 10 Hz with contrast better than  $10^{10} : 1$ . Shot-to-shot stability of  
 301  $< 1\%$  is promised, an important feature for stable ion-beam production.

302 Key to the operation of this configuration is a system that refreshes the target material at high-repetition  
 303 rate in a reproducible manner. A number of schemes have been proposed for such studies, from high-  
 304 pressure gases [REF], cryogenic hydrogen ribbons [Margarone et al. (2016); Gauthier et al. (2017); Obst  
 305 et al. (2017)], liquid sheets [Morrison et al. (2018)] and tape drives [Noaman-ul Haq et al. (2017)]. For the  
 306 LhARA facility, a tape drive based on the system developed at Imperial College London is proposed. This

**Table 2.** Design parameters of the components of the LhARA facility. The parameter table is provided in a number of sections. This section contains parameters for the Stage 2 beam transport and the In-vitro and In-vivo end stations.

Parameter	Value or range	Unit
<b>Stage 2 beam transport:</b> FFA, transfer line, beam delivery to high-energy end stations		
Number of bending magnets in the injection line	7	
Number of quadrupoles in the injection line	10	
FFA: Machine type	single spiral scaling FFA	
FFA: Extraction energy	15–127	MeV
FFA: Number of cells	10	
FFA: Orbit $R_{min}$	2.92	m
FFA: Orbit $R_{max}$	3.48	m
FFA: Orbit excursion	0.56	m
FFA: External R	4	m
FFA: Number of RF cavities	2	
FFA: RF frequency	1.46–6.48	MHz
FFA: harmonic number	1, 2 or 4	
FFA: RF voltage (for 2 cavities)	8	kV
FFA: spiral angle	48.7	Degrees
FFA: Max B field	1.4	T
FFA: k	5.33	
FFA: Magnet packing factor	0.34	
FFA: Magnet opening angle	12.24	degrees
FFA: Magnet gap	0.047	m
FFA: Ring tune (x,y)	(2.83,1.22)	
FFA: $\gamma_T$	2.516	
FFA: Number of kickers	2	
FFA: Number of septa	2	
Number of bending magnets in the extraction line	2	
Number of quadrupoles in the extraction line	8	
Vertical arc bending angle	90	Degrees
Number of bending magnets in the vertical arc	2	
Number of quadrupoles in the vertical arc	6	
Number of cavities for longitudinal phase space manipulation	5	
Number of quadrupoles in the in vivo beam line	4	
<b>In-vitro biological end stations</b>		
Maximum input beam diameter	1-3	cm
Input beam energy spread	< 2	%
Input beam uniformity	< 5	%
Scintillating fibre layer thickness	0.25	mm
Air gap length	5	mm
Cell culture plate thickness	1.3	mm
Cell layer thickness	0.03	mm
Number of end stations	2	
<b>In-vivo biological end station</b>		
Maximum input beam diameter	1-3	cm
Input beam energy spread	< 2	%
Input beam uniformity	< 5	%
Beam options	Spot-scanning, passive scattering, micro-beam	

307 system is capable of reliable operation at target thicknesses down to  $5\ \mu\text{m}$ , using both aluminium and steel  
308 foils, and down to  $18\ \mu\text{m}$  using plastic tapes. Such tape-drive targets allow operation at high charge (up to  
309  $100\ \text{pC}$  at  $15 \pm 1\ \text{MeV}$ , i.e.  $> 10^9$  protons per shot) and of delivering high-quality proton and ion fluxes at  
310 repetition rates of up to  $10\ \text{Hz}$  or greater.

311 The unique features of the laser-driven ion source proposed for LhARA offer a number of opportunities  
312 to push the frontiers in the fields of sustained high-frequency ion generation, advanced targetry solutions  
313 and active, high-repetition rate diagnostics. The successful development and execution of LhARA will  
314 provide a leap forward in terms of capability and open up exciting new opportunities for applications not  
315 just in radiobiology, but also medical isotope production and materials processing. While pushing these  
316 new frontiers, the radiobiological-capabilities of LhARA are based on relatively low-energy ion beams,  
317 mitigating the risks that operating at the energy-frontier of the field would imply.

318 High repetition-rate operation of laser-driven radiation sources is a relatively new, but active area of  
319 interest [Noaman-ul Haq et al. (2017); Aurand et al. (2019); Streeter et al. (2018); Dann et al. (2019);  
320 Kirschner et al. (2019)]. Such operating schemes pose a number of engineering challenges. It is proposed  
321 to apply machine-learning and genetic algorithms to the optimisation of the laser-target interaction to  
322 optimise the beam charge, peak energy, energy spread, and divergence of the ion flux produced [Aurand  
323 et al. (2019)]. These techniques will require appropriate R&D effort. The first experiments of this kind will  
324 be possible using the existing laser capabilities at Imperial College London, the Central Laser Facility at  
325 the Rutherford Appleton Laboratory, and elsewhere.

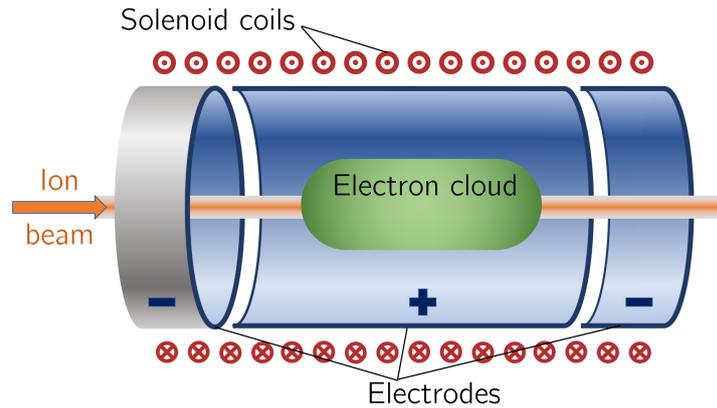
326 The careful control of the tension on the tape in a tape-drive target is critical for reproducible operation.  
327 The tape must be stretched to flatten the surface, without stretching it to its plastic response. Surface  
328 flatness is important for a number of reasons. Rippling of the front surface modifies the laser absorption  
329 dramatically; uncharacterised rippling can make shot-to-shot variations significant and unpredictable  
330 [Noaman-ul Haq et al. (2017)]. Similarly, rear surface perturbations can modify the sheath field, resulting  
331 in spatial non-uniformities of the proton beam or suppression of the achievable peak energies. Tape drives  
332 with torsion control and monitoring to maintain a high-quality tape surface have been designed and operated  
333 in experiments at Imperial College London. The development of these targets continues with a view to the  
334 development of new, thinner tapes for improved ion generation and the creation of ion species other than  
335 proton and carbon. This is an active area of R&D that will continue with the development of LhARA.

336 High repetition-rate ion-beam diagnostics will also need to be developed to allow successful execution  
337 of LhARA. Such diagnostics will need to measure both the energy spectrum and the spatial profile of  
338 the beams. Current methods are destructive and are often limited to low-repetition rate. Passive detectors  
339 have not been demonstrated in the conditions that will pertain at LhARA. Technologies being evaluated to  
340 address the issues raised by ion-source diagnostics for LhARA are discussed in section 3.5.

341

### 342 **3.2 Proton and ion capture**

343 The use of an electron cloud as a focusing element for charged-particle beams was first proposed by  
344 Gabor in 1947 [Gabor (1947)] who noted that a cloud of electrons uniformly distributed about the axis of a  
345 cylindrical vessel would produce an ideal focusing force on a beam of positively charged particles. The  
346 focal length of such a lens scales with the energy of the incoming particle beam allowing such lenses to  
347 provide strong focussing of high-energy beams. Confinement conditions in the radial and axial directions  
348 can be determined [Pozimski and Aslaninejad (2013)]. In the radial direction, where there is magnetic



**Figure 2.** Schematic diagram of a Penning-Malmberg trap of the type proposed for use in the Gabor lenses to be used in LhARA. The solenoid coils, and the direction of current flow, are indicated by the red circles. The confining electrostatic potential is provided using a central cylindrical anode and two cylindrical negative end electrodes. The ion beam enters on-axis from the left and the electron cloud is indicated by the green shaded area.

349 confinement and Brillouin flow, the number density of electrons,  $n_e$ , that can be contained is given by:

$$n_e = \frac{\epsilon_0 B^2}{2m_e e}; \tag{1}$$

350 where  $B$  is the magnetic field,  $e$  the magnitude of the charge on the electron,  $m_e$  the mass of the electron,  
 351 and  $\epsilon_0$  the permittivity of free space. In the longitudinal direction there is electrostatic confinement for  
 352 which  $n_e$  is given by:

$$n_e = \frac{4\epsilon_0 V_A}{eR^2}; \tag{2}$$

353 where  $R$  is the radius of the cylindrical anode which is held at the positive potential  $V_A$ . For the electron  
 354 densities of interest for LhARA the required anode voltage is of the order of 50 kV.

355 In the thin lens approximation, the focal length,  $f$ , of a Gabor lens can be expressed in terms of the  
 356 magnetic field and the particle velocity,  $v_p$  [Reiser (1989)]:

$$\frac{1}{f} = \frac{e^2 B^2}{4m_e m_p v_p^2} l; \tag{3}$$

357 where  $m_p$  is the mass of the particles in the beam. The focal length of the Gabor lens is therefore  
 358 proportional to the kinetic energy or, equivalently, the square of the momentum, of the incoming beam. By  
 359 comparison, the focal length for a solenoid is proportional to the square of the momentum and that of a  
 360 quadrupole is proportional to momentum. At the particle energies relevant to LhARA, the Gabor lens or  
 361 solenoid are therefore preferred.

362 For a given focal length, the magnetic field required in the Gabor lens is reduced compared to that of a  
 363 solenoid that would give equivalent focusing [Pozimski and Aslaninejad (2013)]:

$$B_{GPL} = B_{sol} \sqrt{Z \frac{m_e}{m_{ion}}}; \tag{4}$$

364 where  $B_{GPL}$  and  $B_{sol}$  are the magnetic fields in the Gabor lens and the equivalent solenoid respectively;  
 365  $m_{ion}$  is the mass of the ions being focused, and  $Z$  is the charge state of the ions. In the case of a proton beam  
 366 the reduction factor is 43. Thus, for example, where a 2 T superconducting solenoid would be required, the  
 367 magnetic field required for a Gabor lens would only be 47 mT. This means the cost of the solenoid for a  
 368 Gabor lens can be significantly lower than the cost for a solenoid of equivalent focusing strength.

369 An expression for the focal length as a function of electron number density can be derived by substituting  
 370 equation (1) into equation (3) to give:

$$\frac{1}{f} = \frac{e^3 n_e}{2\epsilon_0 U} l; \quad (5)$$

371 where  $U = m_p v_p^2$  is the energy of the particle beam. The focal length of the Gabor lens is inversely  
 372 proportional to the number density of electrons trapped in the cloud. The focal lengths desired to capture  
 373 the proton and ion beams at LhARA have been chosen such that the required electron number densities are  
 374 conservative and lie within the range covered in published experiments.

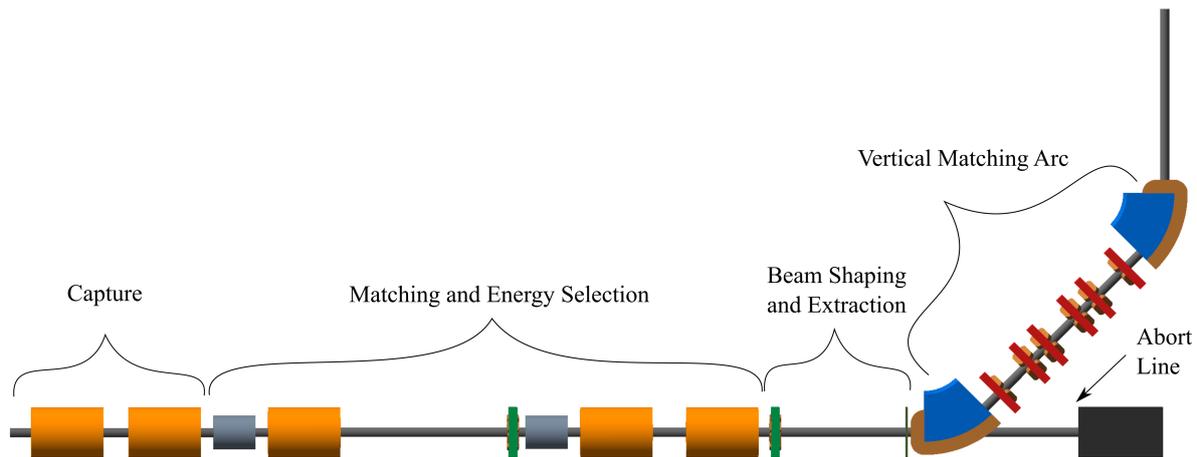
375 Instability of the electron cloud is a concern in the experimental operation of Gabor lens; azimuthal  
 376 beam disruption due to the diocotron instability has been seen in both experiment and theory [Meusel et al.  
 377 (2013)]. Theory indicates that the diocotron instability is most problematic under well-defined geometric  
 378 conditions. The reliable operation of a Gabor lens in a regime free from this instability has yet to be  
 379 demonstrated. Gabor lenses promise very strong focusing, simple construction, and low magnetic field,  
 380 all attractive features for LhARA. However, these attractive features come at the cost of relatively high  
 381 voltage operation ( $\gtrsim 50$  kV) and possible vulnerability to instability.

382 With reliable operation of Gabor lenses as yet unproven we plan a two-part experimental and theoretical  
 383 programme of research to prove Gabor-lens suitability. Initial work will include: theoretical investigation  
 384 of lens stability in a full 3D particle-in-cell code such as VSIM [VSI (2020)]; and the development of  
 385 electron-density diagnostics based on interferometric measurement of the refractive-index change. These  
 386 activities will be applied to a time-invariant electron cloud. A test Gabor lens will be constructed to allow  
 387 validation of both the simulation results and a new diagnostic using an alpha emitter as a proxy for the  
 388 LhARA beam. In addition, the initial investigation will include the design of an electron beam to fill the  
 389 lens. This last objective will enable the second part of the experimental project; the operation of the Gabor  
 390 lens in short pulses. It is attractive to match the timing of the establishment of the electron cloud within the  
 391 Gabor lens to that of the beam and thereby limit instability growth. The research project is time limited  
 392 such that, should it not prove possible to produce a suitable Gabor lens, there remains time to procure  
 393 conventional solenoids in their place.

394

### 395 **3.3 Beam transport and delivery to the low-energy in-vitro end station**

396 Beam-transport from the laser-driven ion source and delivery to the low-energy in-vivo end station is  
 397 required to deliver a uniform dose distribution at the cell layer. Beam losses must be minimised for radiation  
 398 safety and to maximise the dose that can be delivered in a single shot. The transport line has been designed  
 399 to minimise regions in which the beam is brought to a focus to reduce the impact of space-charge forces on  
 400 the beam phase-space. An optical solution was initially developed using Beamoptics [Autin et al. (1998)]  
 401 and MADX [Grote and Schmidt (2003)]. Accurate estimation of the performance of the beam line requires  
 402 the inclusion of space-charge forces and particle-matter interactions. Therefore, performance estimation  
 403 was performed using Monte Carlo particle-tracking from the ion source to the end station. BDSIM [Nevay  
 404 et al. (2020)], which is based on the Geant4 toolkit was used for the simulation of energy deposition arising



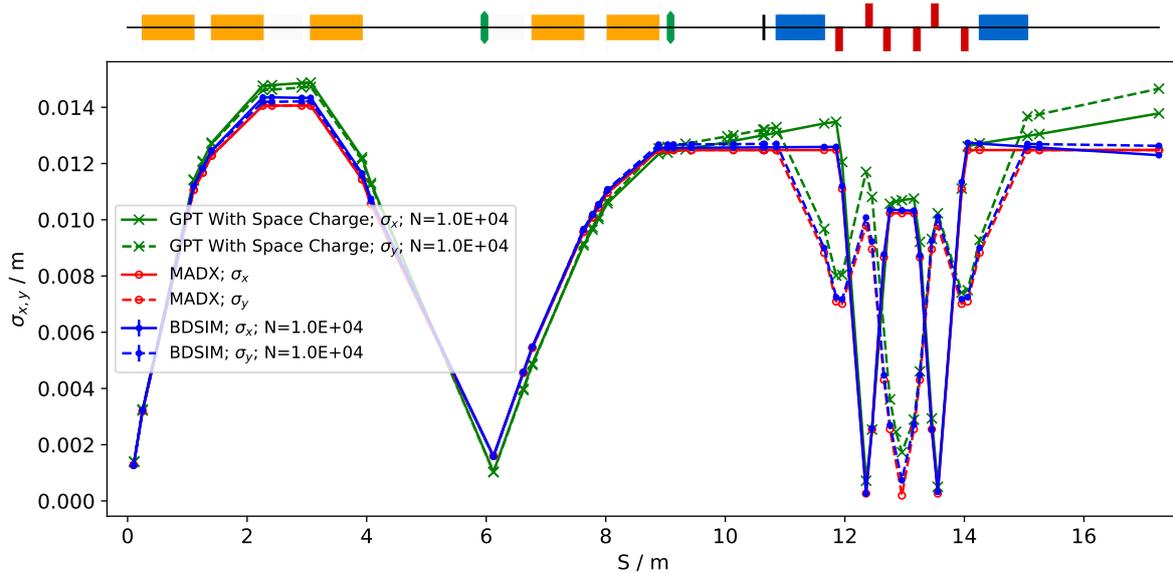
**Figure 3.** Beam transport for Stage 1 of LhARA visualised in BDSIM, showing five machine sections. The capture section is composed of two Gabor lenses (orange cylinders). The matching and energy selection section includes three Gabor lenses, two RF cavities (grey cylinders) and an octupole magnet (green disc). The beam shaping and extraction section includes a second octupole and a collimator (black vertical bar). The vertical matching arc directs the beam into the low-energy in-vitro end station and is composed of two 45° dipoles and six quadrupoles. The total length of this beam line is 17.255 m.

405 from beam interactions with the material in the accelerator and the end station and GPT [De Loos and  
406 Van der Geer (1996)] was used for evaluating the full 3D impact of space-charge.

407 An idealised Gaussian beam was generated with a spot size of  $4\ \mu\text{m}$  FWHM, an angular divergence of  
408 50 mrad, 35 fs FWHM bunch length, and an energy spread of  $1 \times 10^{-6}$  MeV. The maximum estimated  
409 bunch charge is  $1 \times 10^9$  protons. The presence of a substantial electron flux produced from the laser target  
410 compensates the high proton charge density in the vicinity of the ion-production point. Therefore, the first  
411 5 cm of beam propagation was simulated without space-charge. Beyond this, the proton beam will have  
412 separated from the lower energy electrons sufficiently for space-charge to become a prominent effect and  
413 cause an emittance growth. Therefore, a further 5 cm drift was simulated including space-charge forces. At  
414 a distance of 10 cm from the ion source the beam is at the exit of the laser-target vessel. The kinematic  
415 distributions of ions in the beam were stored at this point and passed to the relevant BDSIM and GPT  
416 simulations of the downstream beam line.

417 The beam line, shown schematically in figure 3, is composed of five sections: beam capture; matching  
418 and energy selection; beam shaping; vertical arc matching; and an abort line. The capture section uses two  
419 Gabor lenses to minimise the beam's transverse momentum. Beyond the capture section, an RF cavity  
420 permits control of the bunch length and manipulation of the longitudinal phase-space. A third Gabor lens  
421 then focuses the bunch to a small spot size after which a second RF cavity is located to provide further  
422 longitudinal phase-space manipulation. Two further Gabor lenses bring the beam parallel once more in  
423 preparation for the vertical 90° arc. All Gabor lenses have an inner radius of 3.65 cm and an effective length  
424 of 0.857 m. All lenses operate below the maximum cathode voltage of 65 kV.

425 A parallel beam emerges from the final Gabor lens, providing significant flexibility for the inclusion of  
426 beam shaping and extraction systems. Beam uniformity will be achieved using octupole magnets to provide  
427 third-order focusing to perturb the first-order focusing from the Gabor lenses. Such schemes have been  
428 demonstrated in a number of facilities [Tsoupas et al. (1991); Urakabe et al. (1999); Amin et al. (2018)].



**Figure 4.** Horizontal (solid lines) and vertical (dashed lines) beam sizes through the in-vitro beam transport, simulated with space-charge in GPT (green), and without space-charge in MADX (red) and BDSIM (blue).

429 A suitable position for the first octupole was identified to be after the final Gabor lens where the beam  
 430 is large; its effect on the beam is expected to be significant. Octupoles were only modelled in BDSIM  
 431 simulations as GPT does not have a standard component with an octupolar field. The typical rectangular  
 432 transverse distribution resulting from octupolar focusing requires collimation to match the end station's  
 433 circular aperture. A collimator is therefore positioned at the start of the vertical arc. Further simulations are  
 434 required to determine the optimum position of the second octupole and to evaluate the performance of the  
 435 octupoles. The switching dipole which directs the beam to the injection line of the FFA in Stage 2 will  
 436 be located between the second octupole and the collimator, requiring the octupole to be ramped down for  
 437 Stage 2 operation.

438 The vertical arc uses transparent optics in an achromat matching section to ensure that the first-order  
 439 transfer map through the arc is equivalent to the identity transformation and that any dispersive effects are  
 440 cancelled. A 2 m drift tube is added after the arc to penetrate the concrete shielding of the end station floor  
 441 and to bring the beam to bench height. The abort line consists of a drift followed by a beam dump and  
 442 requires the first vertical dipole to ramp down, preventing charged-particle transportation to the end station.

443 The underlying physics of plasma-lens operation cannot be simulated in BDSIM or GPT, however it  
 444 can be approximated using solenoid magnets of equivalent strength. RF cavity fields were not simulated.  
 445 10000 particles were simulated corresponding to the estimated maximum bunch charge of  $1 \times 10^9$  protons.  
 446 Figure 4 shows excellent agreement between horizontal and vertical transverse beam sizes in BDSIM  
 447 and MADX, verifying the beam line's performance in the absence of space-charge effects. Reasonable  
 448 agreement between BDSIM and GPT is also seen when space-charge forces are included in GPT. Emittance  
 449 growth is observed prior to the first solenoid, affecting the optical parameters throughout the machine.  
 450 However, the resulting beam dimensions at the cell layer of 1.538 cm horizontally and 1.205 cm vertically  
 451 are not significantly different from the ideal beam in BDSIM. Further adjustments of the Gabor lenses  
 452 and arc-quadrupole strengths may compensate for this. The transmission efficiency of the beam line is  
 453 approximately 100%.

454 The small bunch dimensions in both transverse planes at the focus after the third Gabor lens, where  
455 the energy selection collimator will be placed, remains a concern if the effect of space-charge has been  
456 underestimated. Similar bunch dimensions are achieved in the vertical arc, however, quadrupolar focusing  
457 is confined to a single plane mitigating further emittance growth. Further tuning of the Gabor lens voltages  
458 in the capture section may compensate space-charge effects, reducing the non-zero transverse momentum  
459 seen entering the vertical arc.

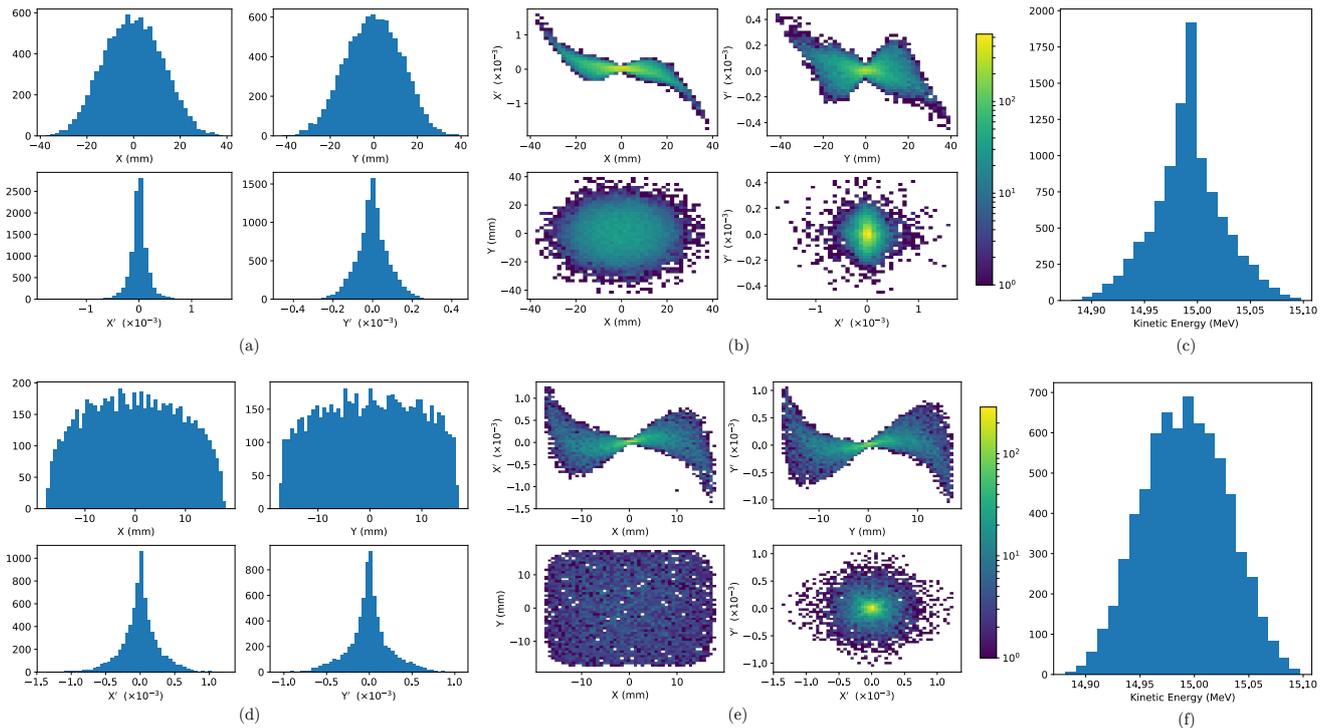
460 To investigate beam uniformity, BDSIM simulations with and without octupoles and collimation for beam  
461 shaping were conducted. Both octupoles were arbitrarily set to a strength of  $K3 = 6000$  with a magnetic  
462 length of 0.1 m and pole tip radius of 5 cm, which, for a 15 MeV beam corresponds to pole tip field of  
463 0.42 T. A 2 cm thick iron collimator with a 40 mm diameter aperture was positioned 1.5 m downstream  
464 of the octupole. Figure 5 shows the beam phase-space and particle distributions at the end station for the  
465 transverse and longitudinal axes with and without beam shaping. Without octupoles the spatial profile  
466 is Gaussian as expected, however, beam uniformity is improved with octupoles and collimation. The  
467 total beam width is 3.58 cm horizontally and 3.46 cm vertically which is sufficient to irradiate one well  
468 in a six-well cell-culture plate. Further optimisation is required to improve uniformity whilst optimising  
469 beam-line transmission, which is approximately 70% for the results presented in figure 5. An aberration  
470 can be seen in both transverse planes with and without beam shaping; this effect originates upstream of  
471 the octupoles in the solenoids, and persists through to the end station. These aberrations are a concern,  
472 however, future simulation efforts will replace the solenoids with a full electromagnetic simulation of the  
473 Gabor lens. This change is likely to change the aberrations. The non-Gaussian energy distribution without  
474 beam shaping is a result of space-charge forces at the ion source; the distribution persists to the end station  
475 as no components which affect the longitudinal phase space were simulated. The Gaussian distribution  
476 seen with beam shaping is due to collimation.

477 The proposed design is capable of delivering beams of the desired size to the in-vitro end station. Space-  
478 charge effects impact the beam transport performance but it is believed that this can be mitigated with  
479 minor adjustments to the Gabor lenses in the capture section. Initial studies indicate that a uniform beam  
480 can be delivered with further optimisation of the octupoles and collimator.

### 481 3.3.1 Alternative Design

482  
483 To mitigate potential emittance growth from space-charge forces, an alternative beam line design was  
484 developed in which the final two Gabor lenses in the matching and energy selection section are replaced by  
485 four quadrupoles, limiting any bunch focusing to one plane at a time. The resulting machine is reduced  
486 in length to 15.439 m. Without space-charge effects, a bunch size of 2.5 mm at the end station can be  
487 achieved. With space-charge, the initial emittance growth prior to the first solenoid is once again observed  
488 leading to an increased beam size at the entrance of the first quadrupole, resulting in a spatially asymmetric  
489 and divergent beam at the end station. It is believed that the space-charge effects can be compensated  
490 by applying the same Gabor-lens optimisation as in the baseline design in addition to adjustments of the  
491 alternative design's quadrupoles settings, and that beam parameters similar to those without space-charge  
492 may be recovered. The alternative design provides a solution that is more resilient to space-charge effects  
493 than the baseline, however, only the lower bound on the desired beam size can be achieved. Further  
494 optimisation is required not only to optimise optical performance but also to optimise octupole settings and  
495 to determine whether a beam with the desired uniformity can be delivered to the end station.

496



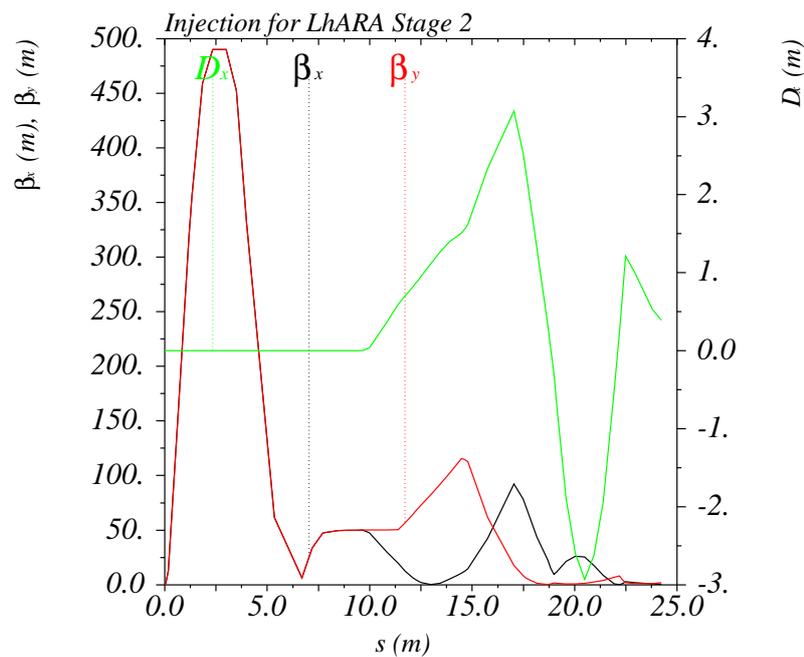
**Figure 5.** Beam phase space distributions in the transverse plane,  $(X, Y)$ ;  $X'$  and  $Y'$  give the slope relative to the  $Z$  axis. The transverse phase space is shown in figures a and b for simulations without octupolar focusing and collimation, with the kinetic energy distribution shown in c. The same phase space distributions simulated with the effect of octupoles and collimation are in figures d, e, and f.

### 497 3.4 Post-acceleration and beam delivery to the in-vitro and in-vivo end stations

498 A fixed-field alternating-gradient accelerator (FFA), based on the spiral scaling principle [Krest et al.  
 499 (1956); Symon et al. (1956); Fourier et al. (2008); Tanigaki et al. (2006)], will be used to accelerate the  
 500 beam in LhARA Stage 2 to obtain energies greater than the 15 MeV protons and 4 MeV/u carbon ( $C^{6+}$ )  
 501 ions delivered by the laser-driven source. FFAs have many advantages for both medical and radiobiological  
 502 applications such as: the capability to deliver high and variable dose; rapid cycling with repetition rates  
 503 ranging from 10 Hz to 100 Hz or beyond; and the ability to deliver various beam energies without the use  
 504 of energy degraders. An FFA is relatively compact due to the use of combined function magnets, which  
 505 lowers the overall cost compared to conventional accelerators capable of delivering beams at a variety of  
 506 energies such as synchrotrons. Extraction can be both simple and efficient, with the possibility for multiple  
 507 extraction ports to be used. Furthermore, FFAs can accelerate multiple ion species, which is very important  
 508 for radiobiological experiments and typically very difficult to achieve with cyclotrons.

509 A typical FFA is able to increase the beam momentum by a factor of three, though a greater factor may  
 510 be achieved. For LhARA, this translates to a maximum proton-beam energy of 127 MeV from an injected  
 511 beam of 15 MeV. For carbon ions ( $C^{6+}$ ) with the same rigidity, a maximum energy of approximately  
 512 33.4 MeV/u can be produced.

513 The energy at injection into the FFA determines the beam energy at extraction. The injection energy will  
 514 be changed by varying the focusing strengths in the Stage 1 beam line from the capture section through to  
 515 the extraction line and the FFA ring. This will allow the appropriate energy slice from the broad energy  
 516 spectrum produced at the laser-driven source to be captured and transported to the FFA. The FFA will then



**Figure 6.** Twiss  $\beta_x$  and  $\beta_y$  functions and dispersion in the beam line consisting of the modified Stage 1 lattice and the transfer line allowing injection of the beam into the FFA ring.  $S$  goes from the laser target to the exit of the injection septum.

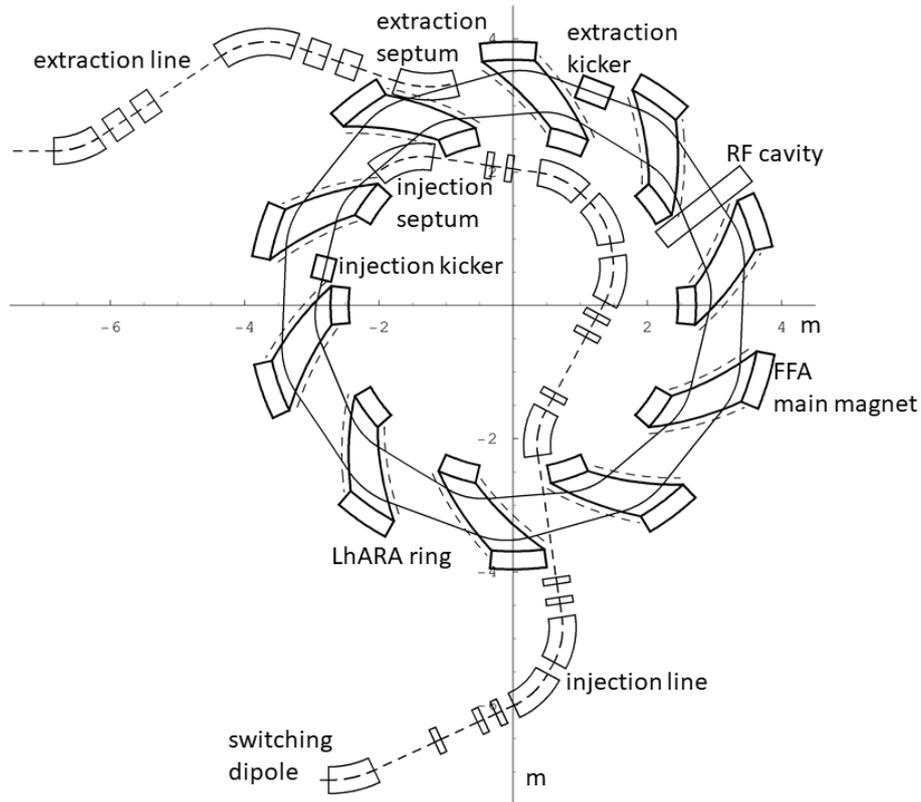
517 accelerate the beam, acting as a three-fold momentum multiplier. This scheme simplifies the injection and  
 518 extraction systems since their geometry and location can be kept constant.

519 A second, ‘high-energy’, in-vitro end station will be served by proton beams with a kinetic energy in the  
 520 range 15–127 MeV and carbon-ion beams with energies up to 33.4 MeV/u. The extraction line from the  
 521 FFA leads to a 90° vertical arc to send the beam to the high-energy in-vitro end station. If the first dipole  
 522 of the arc is not energised, beam will be sent to the in-vivo end station. The extraction line of the FFA  
 523 includes a switching dipole that will send the beam to the high-energy-beam dump if it is not energised.  
 524 The detailed design of the high-energy abort line will be performed as part of the R&D programme. The  
 525 design of the abort line will take into account the requirement that stray radiation from the aborted beam  
 526 does not enter the end stations.

527

### 528 3.4.1 Injection line

529 The settings of the Stage 1 beam line need to be adjusted to reduce the Twiss  $\beta$  function propagating  
 530 through the injection line to allow beam to be injected into the FFA ring. The optical parameters in the  
 531 Stage 1 beam line after adjustment are shown in figure 6. The beam is diverted into the injection line by a  
 532 switching dipole. The injection line transports the beam to the injection septum magnet. In the injection  
 533 line matches the beam in both transverse planes and beam dispersion to the values dictated by the periodic  
 534 conditions in the FFA cell (figure 6). The presence of dispersion in the injection line allows a collimator  
 535 to be installed for momentum selection before injection. The beam is injected from the inside of the ring,  
 536 which requires the injection line to cross one of the straight sections between the FFA magnets, see figure 7.  
 537



**Figure 7.** The layout of the injection line from the switching dipole to the injection septum together with the FFA ring, some of its subsystems and the first part of the extraction line.

### 538 3.4.2 FFA ring

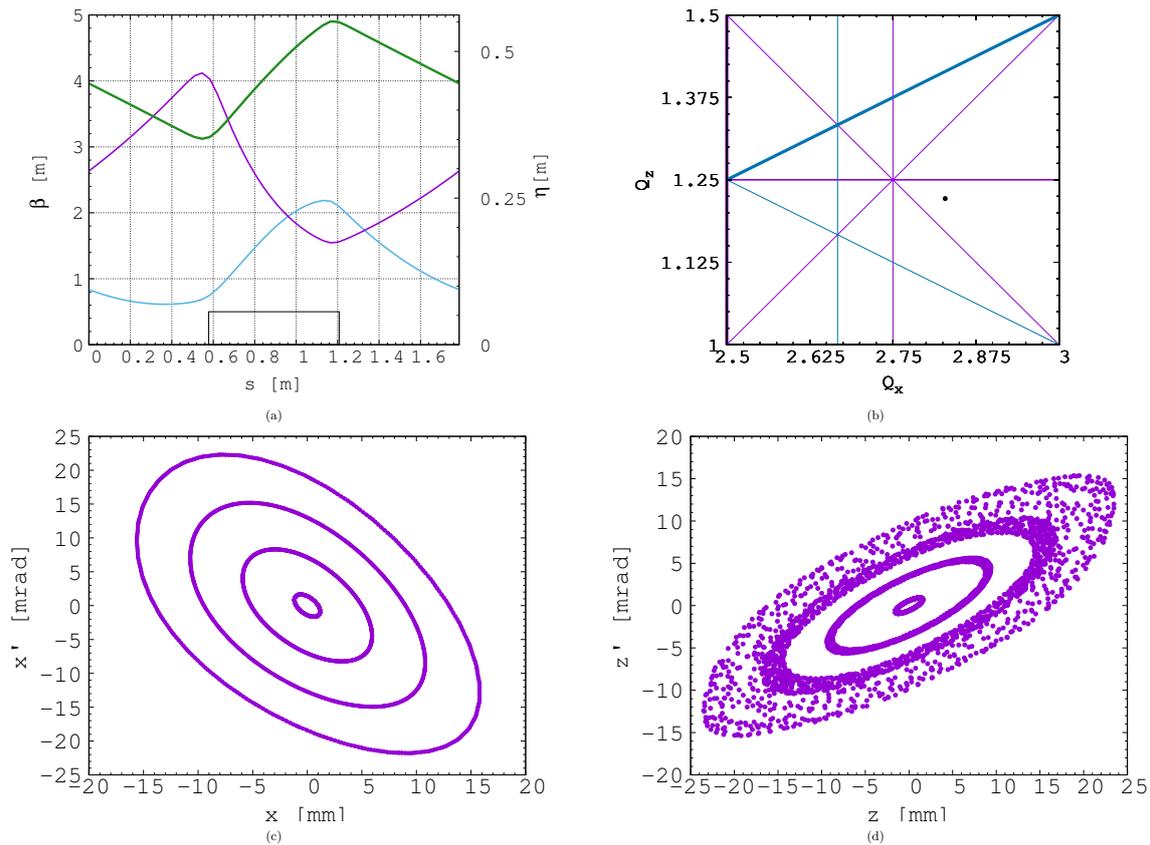
539 The magnetic field,  $B_y$ , in the median plane of a scaling spiral FFA is given by:

$$B_y = B_0 \left[ \frac{R}{R_0} \right]^k F \left( \theta - \ln \left[ \frac{R}{R_0} \right] \tan \zeta \right); \quad (6)$$

540 where  $B_0$  is the magnetic field at radius  $R_0$ ,  $k$  is the field index,  $\zeta$  corresponds to the spiral angle and  $F$   
 541 is the ‘flutter function’. This field law defines a zero-chromaticity condition, which means the working  
 542 point of the machine is independent of energy up to field errors and alignment imperfections and avoids  
 543 resonance crossings that would reduce the beam quality and may lead to beam loss.

544 Table 2 gives the main design parameters of the FFA ring. The ring consists of ten symmetric cells each  
 545 containing a single combined-function spiral magnet. The choice of the number of cells is a compromise  
 546 between the size of the orbit excursion, which dictates the radial extent of the magnet, and the length of the  
 547 straight sections required to accommodate the injection and extraction systems.

548 The betatron functions and dispersion in one lattice cell at injection are shown in figure 8a. The tune  
 549 diagram, showing the position of the working point of the machine in relation to the main resonance  
 550 lines, is shown in figure 8b. Tracking studies were performed using a step-wise tracking code in which the  
 551 magnetic field is integrated using a Runge-Kutta algorithm [Lagrange et al. (2018)]. The magnetic field in  
 552 the median plane was obtained using the ideal scaling law (equation 6) and using using Enge functions to  
 553 give the fringe fields. Out of the median plane the field was obtained using a 6<sup>th</sup>-order Taylor of the field.



**Figure 8.** Beam optics and tracking in the FFA. Twiss  $\beta_h$  (blue),  $\beta_v$  (purple) functions and dispersion (green) in one lattice cell of the FFA ring (a). The working point of the FFA ring at (2.83, 1.22) on the tune diagram (b). The results of the horizontal (c) and vertical (d) dynamical acceptance study in the FFA ring, where a 1 mm offset is assumed in the vertical and horizontal planes respectively.

554 The dynamical acceptance for 100 turns, shown for the horizontal and vertical planes in figures 8c and 8d  
 555 respectively, are significantly larger than the beam emittance, even when the most pessimistic assumption  
 556 is used. These results confirm that a good machine working point has been chosen.

557 A full aperture, fast injection of the beam will be performed using a magnetic septum, installed on internal  
 558 side of the ring, followed by a kicker magnet situated in a consecutive lattice cell, as shown in figure 7. The  
 559 specifications of the injection system are dictated by the parameters of the beam at injection, which are  
 560 summarised for the nominal proton beam in table 3. The beam at injection has a relatively small emittance  
 561 and short bunch length, which limits the intensity accepted by the ring due to the space-charge effect. If the  
 562 beam emittance is adjusted such that is larger then the nominal value by a factor of 1.7, then an intensity  
 563 of approximately  $10^9$  protons would be accepted by the ring at the space-charge limit. Fast extraction of  
 564 the beam over the full aperture will be performed using a kicker magnet followed by a magnetic septum  
 565 installed in a consecutive lattice cell close to the extraction orbit.

566 Acceleration of the beam to 127 MeV will be done using an RF system operating at harmonic number  
 567  $h = 1$  with an RF frequency range from 2.89 MHz to 6.48 MHz. The RF voltage required for 10 Hz  
 568 operation corresponds to only 0.5 kV, however, with such a low voltage, the energy acceptance at injection  
 569 would be limited to  $\pm 0.1\%$  so a voltage of 8 kV is required to increase the energy acceptance to  $\pm 0.7\%$ .

**Table 3.** Summary of the main parameters for the proton beam at the injection to the FFA ring. These parameters correspond to the nominal (maximum) acceleration mode of operation.

Parameter	unit	value
Beam energy	MeV	15
Total relative energy spread		$\pm 0.7\%$
Nominal physical RMS emittance (both planes)	$\pi$ m rad	$4.1 \times 10^{-7}$
Incoherent space charge tune shift		-0.2
Bunching factor		0.05
Total bunch length	ns	17.5
Beam intensity		$5.7 \times 10^8$

570 This voltage can be achieved with just two cavities [Yonemura et al. (2008)]. Normal conducting spiral-  
571 scaling FFA magnets, similar to the ones needed for LhARA, have been constructed successfully [Tanigaki  
572 et al. (2006); Planche et al. (2009)] using either distributed, individually-powered coils on a flat pole piece  
573 or using a conventional gap-shaping technique. For the LhARA FFA, we a variation of the coil-dominated  
574 design recently proposed at the Rutherford Appleton Laboratory in R&D studies for the upgrade of the  
575 ISIS neutron and muon source. In this case, the nominal scaling field is achieved using a distribution of  
576 single-powered windings on a flat pole piece. The tuning of the parameter  $k$  can be then achieved using up  
577 to three additional windings that are powered independently. The extent of the fringe field across the radius  
578 of the magnet must be carefully controlled using a ‘field clamp’ to achieve zero-chromaticity. An active  
579 clamp, in which additional windings are placed around one end of the magnet, may be used to control  
580 the flutter function and thereby vary independently the vertical tune of the FFA ring. Since the magnetic  
581 field of the FFA ring needs to be adjusted to provide variable-energy operation, a laminated design may  
582 be required to reduce the time required to change the field. The magnet gap of 4.7 cm given in table 2 is  
583 estimated assuming the flat-pole design of the magnet. The details of the design will be addressed in as  
584 part of the LhARA R&D programme.

### 585 586 3.4.3 Extraction Line

587 Substantial margins in the beam parameters were assumed in the design of the extraction line from the  
588 FFA due to uncertainties in the beam distributions provided beam by the Stage 1 beam transport, FFA  
589 injection line, and the uncertainty introduced by the absence of space-charge effects in the simulation of  
590 acceleration in the ring. Therefore, the beam emittance was allowed, pessimistically, to be as large as a  
591 factor of ten greater than in the nominal value, which was derived assuming that the normalised emittance  
592 is conserved from the source, through the Stage 1 beam line, and in the FFA ring. In the nominal case, the  
593 physical emittance of the beam is affected by the adiabatic damping only. A substantial flexibility in the  
594 optics of the extraction line is required as extraction line must accommodate a wide spectrum of beam  
595 conditions to serve the in-vitro and in-vivo end-stations

596 Detailed studies were carried out for proton beams with kinetic energies of 40 MeV and 127 MeV. Table  
597 4 gives the Twiss  $\beta$  values for different beam sizes for the 40 MeV and 127 MeV proton-beam scenarios  
598 assuming a Gaussian beam distribution. The optics and geometric acceptance of the system is approximately  
599 the same for the 40 MeV and 127 MeV beams. This justified the working hypothesis that beam emittance is  
600 approximately the same for both beam energies. This assumption will be revised as soon as space-charge  
601 simulations for the entire system are available.

**Table 4.** Beam emittance values and target  $\beta$  values for different beam sizes for 40 MeV and 127 MeV beams. The beam size is taken to be four times the sigma of the transverse beam distribution.

	40 MeV protons (Nominal)	127 MeV protons (Nominal)	127 MeV protons (Pessimistic)
RMS Emittance ( $\epsilon_x, \epsilon_y$ ) [ $\pi$ mm mrad]	0.137	0.137	1.37
$\beta$ [m] for a 1 mm spot size	0.46	0.46	0.039
$\beta$ [m] for a 10 mm spot size	46	46	4.5
$\beta$ [m] for a 30 mm spot size	410	410	40

602 The first two dipoles and four quadrupoles of the extraction line bend the beam coming from the extraction  
 603 septum of the FFA such that it is parallel to the low-energy beam line while ensuring that dispersion is  
 604 closed. Closing the dispersion is critical as off-momentum particles will follow trajectories different to  
 605 those followed by particles with the design momentum and therefore impact the size and shape of the beam  
 606 downstream. The second part of the extraction line consists of four quadrupoles which transport the beam  
 607 either to the first dipole of the vertical arc beam that serves the high-energy in-vitro end station or to the  
 608 in-vivo end-station, if this dipole is not energised. These quadrupoles provide the flexibility required to  
 609 produce the different beam sizes for the in-vitro end station as specified in table 4.

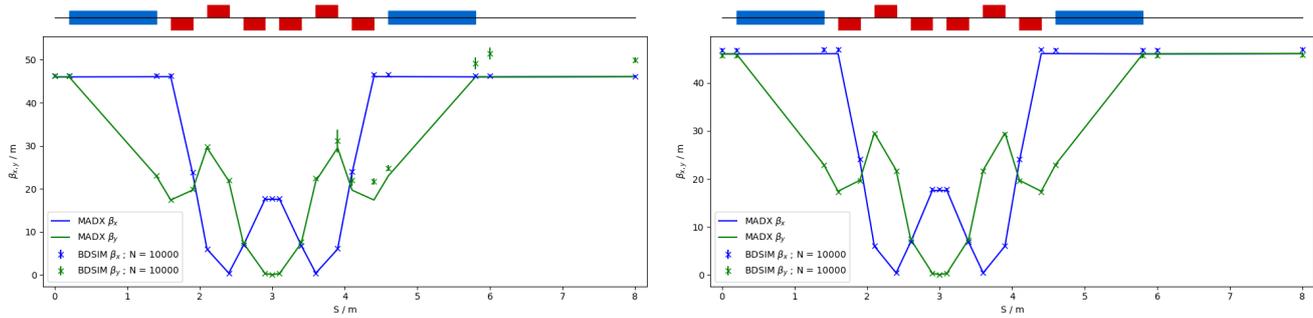
#### 610 611 3.4.4 High-energy in-vitro beam line

612 The high energy in-vitro beam line transports the beam from the exit of the extraction line and delivers  
 613 it to the high energy in-vitro end station. The 90° vertical bend is a scaled version of the low energy  
 614 vertical arc, following the same design principles, and also consists of two bending dipole magnets and six  
 615 quadrupole magnets. To accommodate the higher beam energies, the lengths of the magnets were scaled in  
 616 order to ensure that peak magnetic fields were below the saturation limits of normal conducting magnets.  
 617 The bending dipole magnet lengths were increased to 1.2 m each and the quadrupole lengths were tripled to  
 618 0.3 m each. The overall length of the arc then becomes 6 m, compared to 4.6 m for the low energy in-vitro  
 619 arc. This difference in arc length means the high-energy in-vitro arc finishes about 0.9 m higher than the  
 620 low-energy one. This difference can easily be accommodated by adjusting the final drift lengths.

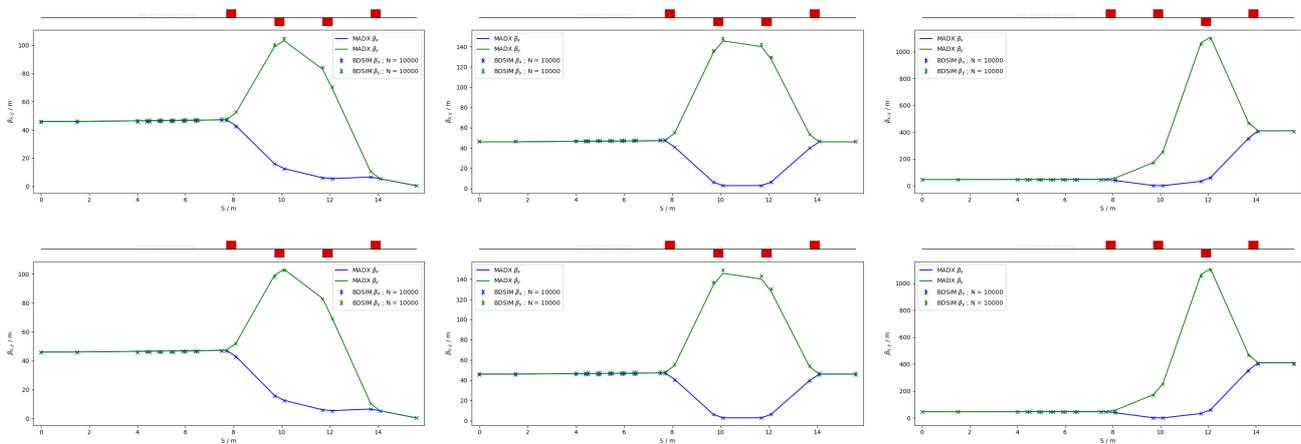
621 The quadrupole strengths for the scaled high-energy in-vitro arc were obtained using MAD-X and  
 622 tracking simulations using BDSIM show good agreement, see figure 9. The input beam distribution used  
 623 in BDSIM was assumed to be Gaussian with Twiss  $\beta = 46$ , which gives a beam size of about 10 mm.  
 624 GPT simulations were performed which show small discrepancies due to space-charge effects. It may be  
 625 possible to compensate for this by adjusting the strengths of the quadrupoles in the arc and the matching  
 626 section in the extraction line.

#### 627 628 3.4.5 In-vivo beam line

629 If the first dipole of the high-energy in-vitro arc is not energised then beam is sent to the in-vivo end  
 630 station. From the end of the extraction line, 7.7 m of drift is necessary to clear the first bending dipole of  
 631 the in-vitro arc, to provide space for the five RF cavities needed for longitudinal phase-space manipulation  
 632 and to allow space for diagnostic devices. Following this drift is a further 6.6 m of beam line that includes  
 633 four quadrupoles, each of length 0.4 m, which are used to perform the final focusing adjustments of the  
 634 beam delivered to the in-vivo end station. A final 1.5 m drift at the end is reserved for scanning magnets to  
 635 be installed to perform spot scanning and to penetrate the shielding of the in-vivo end station. In total the  
 636 in-vivo beam line is 15.6 m in length.



**Figure 9.** Comparison of MAD-X and BDSIM simulation of 40 MeV (left) and nominal 127 MeV (right) proton beam passing through the high energy in-vitro arc simulated with  $10^4$  particles (in BDSIM).



**Figure 10.** MAD-X and BDSIM simulations of the in-vivo beam line for a 40 MeV proton beam (top row) and a nominal 127 MeV proton beam (bottom row) with quadrupoles matched to  $\beta_{x,y} = 0.46$  m (left),  $\beta_{x,y} = 46$  m (middle) and  $\beta_{x,y} = 410$  m (right) for  $10^4$  particles.

637 The design is flexible in matching the various  $\beta_{x,y}$  values given in table 4, but is not able to match  
 638 the smallest target value of  $\beta_{x,y} = 0.039$  m for the pessimistic scenario, which is very challenging. To  
 639 verify that the optics design could provide the required beam sizes, simulations were performed with  
 640 BDSIM using an input Gaussian beam generated with the Twiss  $\beta$  values given in tables 4. Figure 10  
 641 shows the results of simulations for a 40 MeV proton beam and a nominal emittance 127 MeV proton  
 642 beam matched in order to obtain beam sizes of 1 mm, 10 mm and 30 mm. GPT was used to investigate the  
 643 effects of space-charge. These simulations show discrepancies compared to the BDSIM simulations. These  
 644 discrepancies can be compensated for by adjusting the strengths of the quadrupoles in the matching section  
 645 in the extraction line.

646

### 647 3.5 Instrumentation

648 Commercial off-the-shelf (COTS) instrumentation will be used for Stages 1 and 2 of LhARA wherever  
 649 possible. However, the characteristics of the beam (e.g. very high charge per bunch, low to moderate  
 650 energy) will require some custom solutions to be developed. The authors are developing two concepts,  
 651 termed SciWire and SmartPhantom, for the low- and high-energy in-vitro end stations respectively. These  
 652 detectors can also be used for beam diagnostics. This new instrumentation may find application at other  
 653 facilities. Instrumentation for the detection of secondary particles due to the interaction of the beam with

654 tissue is not discussed here but is an important area that will be studied in the future.

655

### 656 3.5.1 SciWire

657 For the Stage 1 beam, the maximum proton energy is 15 MeV. Shot-to-shot characterisation of the beam is  
658 essential and requires the use of a very thin detector with a fast response. The SciWire is being developed to  
659 address this [Kurup (2019)]. A SciWire plane consists of two layers of 250  $\mu\text{m}$  square-section scintillating  
660 fibres, with the fibre directions in the two layers orthogonal to each other. This gives a 2D beam-profile  
661 measurement. Using multiple planes might also give energy loss information. Detection of the light from  
662 SciWire fibres may be by CMOS camera, or using photodiodes. If the instrumentation is sufficiently fast, it  
663 could be used to derive feedback signals for beam tuning.

664

### 665 3.5.2 SmartPhantom

666 To study in real time the dose profile of Stage 2 beams, the SmartPhantom [Barber (2018)] is being  
667 developed. This is a water-filled phantom, which is instrumented with planes of scintillating fibres, by  
668 which to infer the dose distribution with distance. The detection elements of the SmartPhantom are 250  $\mu\text{m}$   
669 diameter, round scintillating fibres. Each fibre station consist of two planes of fibres, in which the fibre  
670 directions are orthogonal. Five fibre stations are arranged in the phantom in front of the cell-culture flask.  
671 The fibres may be coupled to photodiodes, or a CMOS camera. Simulations in GEANT4 are being used to  
672 develop analysis techniques by which to predict the position of the Bragg peak shot-by-shot. The beam  
673 profile and dose delivered can then be calculated in real time. The key emphasis is to be able to derive these  
674 parameters from shot- by- shot data, and not purely from simulations.

675

### 676 3.5.3 Beam line Instrumentation

677 The instrumentation requirement begins with the Ti:Sapphire laser. The laser focal spot will be  
678 characterised using a camera-based system and high-speed wavefront measurements [Wang (2014)]  
679 from COTS vendors.

680 For the Stage 1 beam line, beam position monitors (BPMs) will be needed for beam steering. Because  
681 of the low beam energy, non-intercepting BPMs using capacitive pickup buttons will be used. Custom  
682 pickups will be needed to match the beam pipe geometry but COTS electronics are available. The beam  
683 current will be monitored near the end of each beam line, using integrating current toroids (ICT), backed  
684 up with the option of insertable multi-layer Faraday cups (MLFC) to give absolute beam current and energy  
685 measurements. Beam profiles could be measured by SEM grids on both Stage 1 and Stage 2 beam lines.  
686 For Stage 1, these monitors will be mounted on pneumatic actuators to avoid scattering. Each end station  
687 could be equipped with insertable “pepper-pot” emittance monitors and a transverse deflection cavity with  
688 fluorescent screen could be provided for bunch shape measurements.

689 The BPMs on the FFA will require pickup designs suitable for the unusual, wide and shallow, vacuum  
690 vessel. The FFA at the KURNS facility in Kyoto is of a similar layout [Uesugi (2018)] and uses a kicker  
691 and capacitive pickup for to perform tune measurements in each transverse direction. A minimum of one  
692 BPM every second cell will be used in the FFA so that the tune can be matched. BPMs will also be required  
693 close to the injection and extraction septa. The BPM system may be able to use COTS electronics, but the  
694 pickups will be based on the KURNS design of multiple electrodes arranged across the vacuum vessel  
695 width.

696 The DAQ needs to be able to store calibration data and apply corrections in real time. It is necessary to  
697 be able to find the beam centre from a profile, even when the profile may be non-Gaussian and possibly

698 asymmetric. FPGAs can be used to perform fast fitting and pattern recognition of beam profiles. The  
699 instrumentation will be integrated with the accelerator control system to be able to provide fast feedback  
700 and adjustment of the beam parameters in real time.

701

### 702 **3.6 Biological end stations**

703 In order to deliver a successful radiobiological research programme, high-end and fully equipped in-vitro  
704 and in-vivo end-stations will be housed within the LhARA facility. The two in-vitro end-stations (high  
705 and low energy) will contain vertically delivered beam lines which will be used for the irradiation of 2D  
706 monolayer and 3D cells systems (spheroids and patient-derived organoids) in culture. The beam line within  
707 the end-stations will be housed in sealed units that will be directly sourced with appropriate gases (carbon  
708 dioxide and nitrogen), allowing for the cells within culture plates to be incubated for a short time in stable  
709 conditions prior to and during irradiation. This will also enable the chamber to act, where necessary, as  
710 a hypoxia unit (0.1–5% oxygen concentration). Furthermore, these sealed units will contain robotics to  
711 enable simple movement of the numerous cell culture plates housed within to be placed into and taken  
712 away from the beam.

713 The in-vitro end-stations will be located within a research laboratory equipped with up-to-date and  
714 state-of-the-art facilities. This, coupled with two separate end-stations and multiple workspaces, will enable  
715 multiple groups of researchers to perform productive and high-quality biological research. The laboratory  
716 will include all the vital equipment for bench-top science, sample processing and analysis (e.g. refrigerated  
717 centrifuges and light/fluorescent microscopes), along with the equipment required for contaminant-free cell  
718 culture (e.g. humidified CO<sub>2</sub> cell culture incubators, Class II biological safety cabinets), and for the storage  
719 of biological samples and specimens (e.g. -20 °C / -80 °C freezers and fridges). The laboratory will also  
720 house an X-ray irradiator (allowing direct RBE comparisons between conventional photon irradiation, and  
721 the proton and carbon ions delivered by the accelerator), hypoxia chamber (for long-term hypoxia studies),  
722 a robotic workstation (handling and processing of large sample numbers, assisting in high-throughput  
723 screening experiments), and an ultra-pure water system. These facilities will enable a myriad of biological  
724 end-points to be investigated in both normal- and tumour-cell models not only from routine clonogenic  
725 survival and growth assays, but will expand significantly on more complex end-points (e.g. inflammation,  
726 angiogenesis, senescence and autophagy) as these experiments are difficult to perform at current clinical  
727 research beams due to limited time and facilities.

728 The in-vivo end-station, housed on the basement floor, will be served with high-energy proton and carbon  
729 ions capable of penetrating deeper into tissues allowing the irradiation of whole animals. The ability to  
730 perform in-vivo preclinical studies is vital for the future effective translation of the research into human  
731 cancer patients where optimum treatment strategies and reduction of side-effects can be defined. The  
732 in-vivo end-station will allow the irradiation of a number of small-animal models (e.g. xenograft mouse  
733 and rat models) which can further promote an examination of particular ions on the appropriate biological  
734 end-points (e.g. tumour growth and normal tissue responses). The end-station will contain a small-animal  
735 handling area which will allow for the anaesthetisation of animals prior to irradiation. To enable the  
736 irradiation of small target volumes with a high level of precision and accuracy, an image guidance system  
737 (e.g. computed tomography) will be available. The animals will subsequently be placed in temperature-  
738 controlled holder tubes enabling the correct positioning of the relevant irradiation area in front of the  
739 beam line. The beam size is sufficient to give flexibility in the different irradiation conditions, in particular  
740 through passive scattering, pencil-beam scanning, and micro-beam illumination, to be investigated at both  
741 conventional and FLASH dose rates. It is envisaged that the animals will be taken off-site post-irradiation

742 to a nearby animal-holding facility for a follow-up period where biological measurements will be conducted.

743

### 744 **3.7 Infrastructure and integration**

745 The LhARA facility will encompass two floors of roughly 42 m in length and 18 m wide. The ground  
746 floor will contain the laser, accelerator, and in-vivo end station while the first floor will house the laboratory  
747 area and the two in-vitro end stations. The entire facility will require radiation protection in the form of  
748 concrete shielding, which will delineate the facility into three principal areas: a radiation-controlled access  
749 area, a laser controlled access area and a laboratory limited-access area.

750 It is assumed that LhARA will be built at an STFC National Laboratory or equivalent research institute  
751 which has an established safety-management system and culture in place. At STFC, a comprehensive set of  
752 Safety Codes has been developed to cover the hazards associated with working in such an environment.  
753 STFC Safety Codes applicable to LhARA include: risk management, construction, biological safety,  
754 working with lasers, working with time-varying electro-magnetic fields, management of ionising radiation  
755 at work and electrical safety. In practice at STFC, these codes are backed-up by the knowledge, skills and  
756 experience of staff and by appointed responsible persons such as Radiation Protection Advisors, Laser  
757 Responsible Officers and Authorising Engineers. In addition, STFC operates many facilities that encompass  
758 the same hazards as LhARA, which for lasers include the Gemini Target Areas 2 and 3 [STFC (2019a)]  
759 as well as the new EPAC (Extreme Photonics Application Centre) [STFC (2019b)] and for accelerators  
760 include FETS (Front End Test Stand) [Letchford et al. (2015)] and the ISIS Neutron and Muon Source  
761 [STFC (2019c)]. Safety systems will be required for LhARA, which will include Class II biological safety  
762 cabinets and sealed plates prior to experiments.

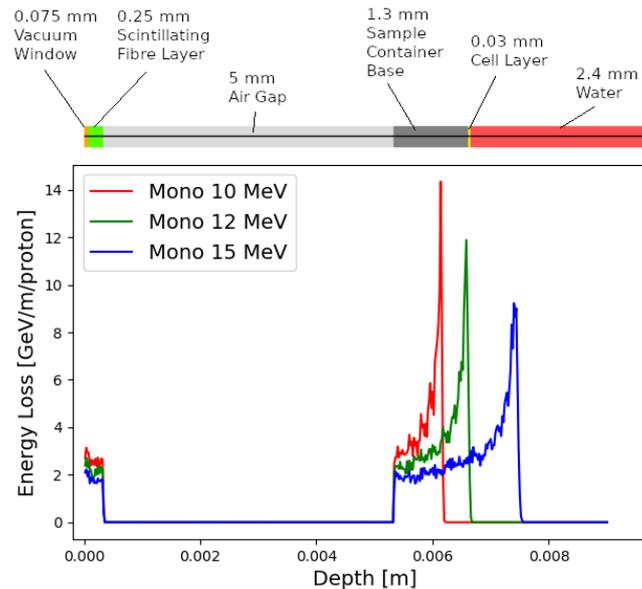
763 For a facility such as LhARA, radiation safety is a primary concern and all work will be completed  
764 under Regulation 8 of the Ionising Radiations Regulations 2017 (IRR17) [HSE (2018)], which requires a  
765 radiation risk assessment before commencing a new work activity involving ionising radiation.

766 The infrastructure and integration of the LhARA facility will require R&D in four key areas: risk analysis  
767 (project risks), risk assessments (safety risks), radiation simulations, and controls development. The risk  
768 analysis will cover all aspects of the facility, such as funding and resource availability, not just technical  
769 risks. A safety-risk assessment will be performed to describe and control all potential safety risks in the  
770 facility. The safety-risk assessment will, to a reasonable degree, identify all pieces of equipment that  
771 require safety mitigations and identify control measures that must be put in place. Coupled closely with the  
772 safety-risk assessment, radiation simulations will be developed to characterise the radiation hazards in and  
773 around the LhARA facility. The last area to require R&D will be the control systems. It is expected that the  
774 facility will use the Experimental Physics and Industrial Control System (EPICS), which can be further  
775 developed at this stage.

776

## **4 PERFORMANCE**

777 The dose distributions delivered to the end stations was evaluated using BDSIM. Figure 11 shows the  
778 energy lost by the beam as it enters the low-energy, in-vitro end station. The beam passes through the  
779 vacuum window, a layer of scintillating fibre and then traverses a 5 mm air gap. The beam then enters  
780 the cell-sample container, assumed to be polystyrene on which a layer of cells, which supports 30  $\mu\text{m}$   
781 thick layer of cells, modelled using the Geant4 material "G4\_SKIN\_ICRP" [NIST (2017)]. The transverse  
782 momentum of protons in the beam was assumed to be Gaussian distributed, with a lateral spread small  
783 enough for the beam to be fully contained within the required spot size of 3 cm. Figure 11 shows a proton



**Figure 11.** Energy loss as a function of depth in the low-energy in-vitro end station for three monoenergetic proton energies: 10 MeV; 12 MeV; and 15 MeV. Each beam was simulated using  $10^4$  particles at the start of the beam line.

784 beam with 10 MeV kinetic energy does not reach the cell. The Bragg peak of a 12 MeV proton beam  
 785 is located close to the cell layer, while a 15 MeV beam, maximum energy specified for delivery to the  
 786 low-energy in-vitro end station, has a Bragg peak located beyond the cell layer. LhARA's ability to deliver  
 787 various energies will allow the investigation of radiobiological effects for irradiations using different parts  
 788 of the Bragg peak, effectively varying the LET across the sample.

789 The maximum dose that can be delivered was evaluated for a variety of beam energies. The dose was  
 790 estimated by calculating the energy deposited in a volume the size of the sensitive volume of a PTW 23343  
 791 Markus ion chamber placed at the position of the Bragg peak. The volume of the cylindrical chamber  
 792 has a radius of 2.65 mm and a depth of 2 mm, giving a volume of about  $4.4 \times 10^{-8} \text{ m}^3$ . The total energy  
 793 deposited into the volume was recorded and converted into dose in units of Gray.

794 For the low-energy in-vitro end station the minimum spot size is specified to have a diameter of 10 mm,  
 795 which is larger than the area of the chamber. A single shot of  $10^9$  protons at 12 MeV with the minimum  
 796 design spot size deposits  $2.98 \times 10^{-4} \text{ J}$  in the chamber volume, corresponding to a dose of 6.75 Gy. For this  
 797 simulation, the thickness of the sample container was reduced so that the Bragg peak was positioned within  
 798 the chamber volume. For a bunch width of 2 ns the maximum instantaneous dose rate is  $3.37 \times 10^9 \text{ Gy/s}$   
 799 and the average dose rate is 67.5 Gy/s assuming a repetition rate of 10 Hz. A single shot of  $10^9$  protons at  
 800 15 MeV deposits  $5.40 \times 10^{-4} \text{ J}$  in the chamber volume corresponding to a dose of 12.23 Gy. This gives an  
 801 instantaneous dose rate of  $6.12 \times 10^9 \text{ Gy/s}$  and an average dose rate of 122 Gy/s.

802 For the high energy in-vitro end station a different setup was used to accommodate the higher energies. A  
 803 similar design to the low-energy end station was used but with the air gap increased from 5 mm to 5 cm and  
 804 a water phantom was placed at the end of the air gap instead of a cell culture plate. The water phantom  
 805 used in the simulation was based upon the PTC T41023 water phantom. In addition, the smaller minimum  
 806 design beam size of 1 mm was used. A single shot of  $10^9$  protons at 127 MeV deposits  $1.95 \times 10^{-3} \text{ J}$  in the  
 807 chamber at the pristine Bragg peak depth corresponding to a dose of 44.1 Gy, an instantaneous dose rate

**Table 5.** Summary of expected maximum dose per pulse and dose rates that LhARA can deliver for minimum beam sizes. These estimates are based on Monte Carlo simulations using a bunch width of 2 ns for the instantaneous dose rate and the average dose rate is based on the 10 Hz repetition rate of the laser source.

	12 MeV Protons	15 MeV Protons	127 MeV Protons	33.4 MeV/u Carbon
Dose per pulse	6.75 Gy	12.23 Gy	44.12 Gy	1141.57 Gy
Instantaneous dose rate	$3.37 \times 10^9$ Gy/s	$6.12 \times 10^{10}$ Gy/s	$2.21 \times 10^{10}$ Gy/s	$5.71 \times 10^{11}$ Gy/s
Average dose rate	67.5 Gy/s	122.3 Gy/s	441.2 Gy/s	11416 Gy/s

808 of  $2.21 \times 10^{10}$  Gy/s and an average dose rate of 441 Gy/s. For a 33.4 MeV/u carbon beam, a single pulse  
 809 of  $10^9$  ions deposits a total energy of  $5.04 \times 10^{-2}$  J at the depth of the pristine Bragg peak, leading to an  
 810 instantaneous dose rate of  $5.71 \times 10^{11}$  Gy/s and a maximum average dose rate of  $11.4 \times 10^3$  Gy/s.

811 The expected scaled maximum dose rates are summarised in table 5 from the simulations of the dose per  
 812 pulse, instantaneous dose rate assuming a 2 ns bunch width, and an average dose rate assuming a 10 Hz  
 813 repetition rate from the laser-driven ion source. The minimum beam size used for the 12 MeV and 15 MeV  
 814 proton-beam simulations was 1 cm. A 1 mm beam radius was assumed for the 127 MeV proton beam and  
 815 33.4 MeV/u carbon-ion beam simulations.

816

## 5 CONCLUSIONS

817 The initial conceptual design of LhARA, the Laser-hybrid Accelerator for Radiobiological Applications,  
 818 has been described and its performance evaluated in simulations that take into account the key features of  
 819 the facility. LhARA combines a laser-driven source to create a large flux of protons or light ions which are  
 820 captured and formed into a beam by strong-focusing plasma lenses thus evading the current space-charge  
 821 limit on the instantaneous dose rate that can be delivered. Acceleration, performed using a fixed-field  
 822 alternating-gradient accelerator (FFA), preserves the unique flexibility in the time, spectral and spatial  
 823 structure of the beam afforded by the laser-driven source. The ability to trigger the laser pulse that initiates  
 824 the production of protons or ions at LhARA will allow the time structure of the beam to be varied to  
 825 interrupt the chemical and biological pathways that determine the biological response to ionising radiation.  
 826 In addition, the almost parallel beam that LhARA will deliver can be varied to illuminate a circular area  
 827 with a maximum diameter of between 1 cm and 3 cm with an almost uniform dose or focused to a spot with  
 828 diameter of  $\sim 1$  mm. These features make LhARA the ideally flexible tool for the systematic study of the  
 829 radiobiology of proton and ion beams.

830 The technologies demonstrated in LhARA have the potential to be developed to make “best in class”  
 831 treatments available to the many by reducing the footprint of future particle-beam therapy systems. The  
 832 laser-hybrid approach, therefore, will allow radiobiological studies and eventually radiotherapy to be  
 833 carried out in completely new regimes, delivering a variety of ion species in a broad range of time structures  
 834 and spatial configurations at instantaneous dose rates up to and potentially significantly beyond the current  
 835 ultra-high dose-rate “FLASH” regime.

836 LhARA has the potential to drive a change in clinical practice in the medium term by increasing the  
 837 wealth of radiobiological knowledge. This enhanced understanding in turn may be used to devise new  
 838 approaches to decrease radio-toxicity on normal tissue while maintaining, or even enhancing, the tumour-  
 839 kill probability. This, in combination the demonstration in operation of the laser-hybrid technique, LhARA

840 has the potential to drive a step-change in the clinical practice of proton- and ion-beam therapy.

841

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