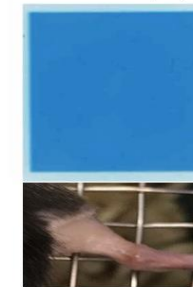
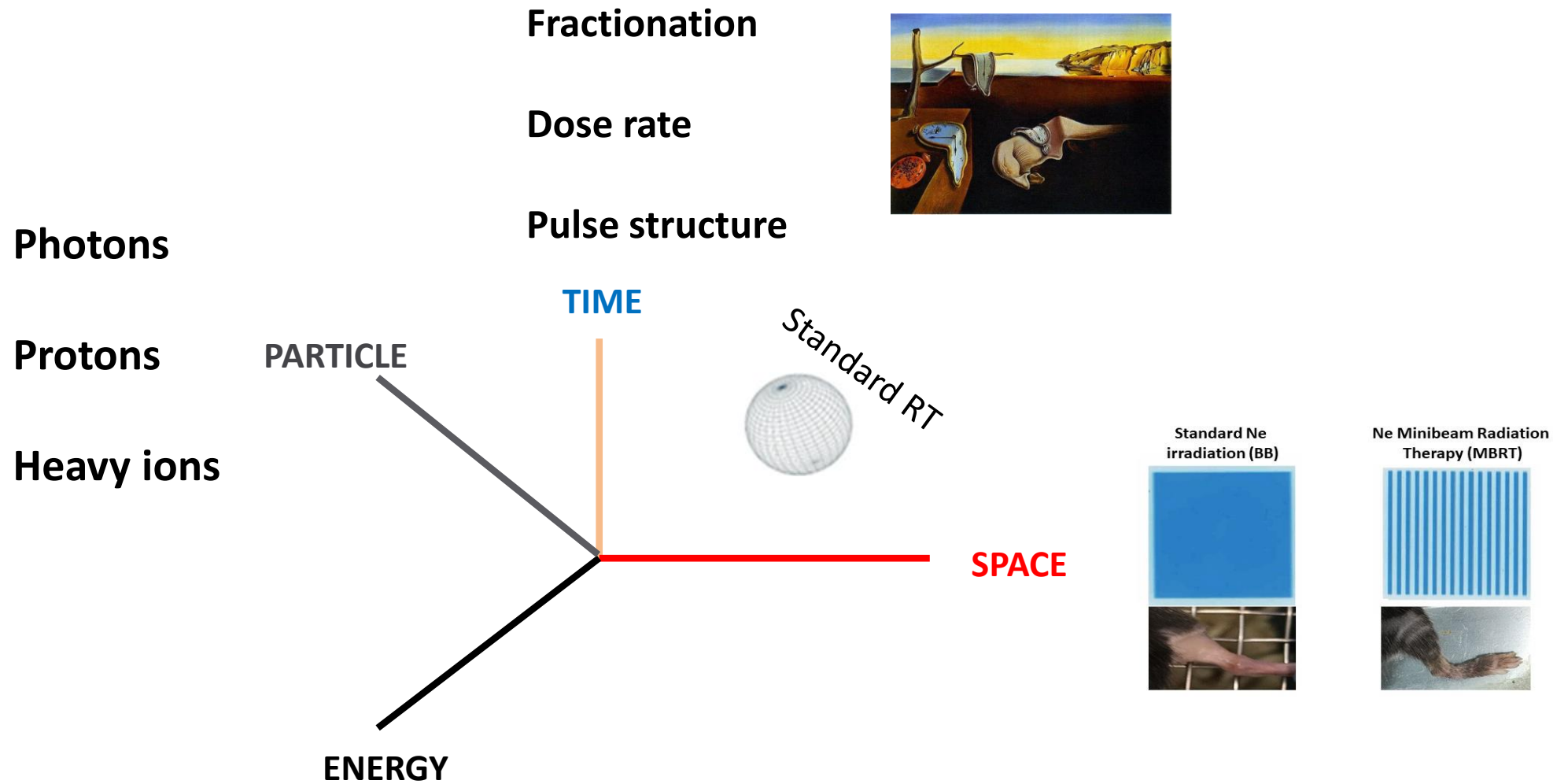


# Exploration of distinct spatiotemporal dose distributions at LhARA

*Yolanda Prezado*

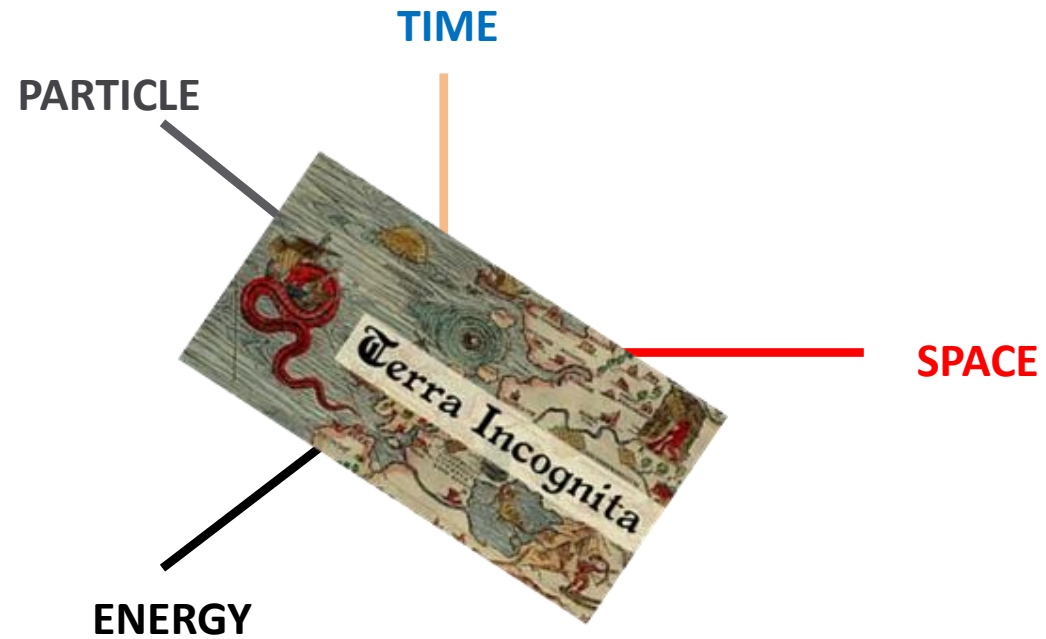


# Radiotherapy: a paradigm shift in the 21<sup>th</sup> century



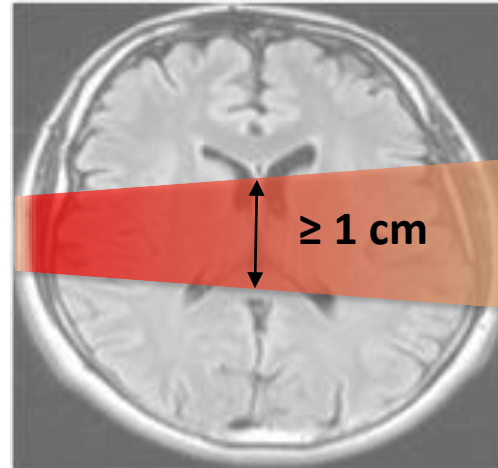
# Exploration of the influence of the different parameters on the biological response

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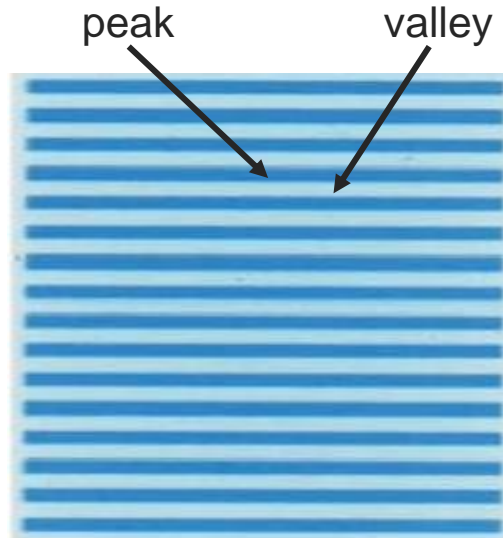
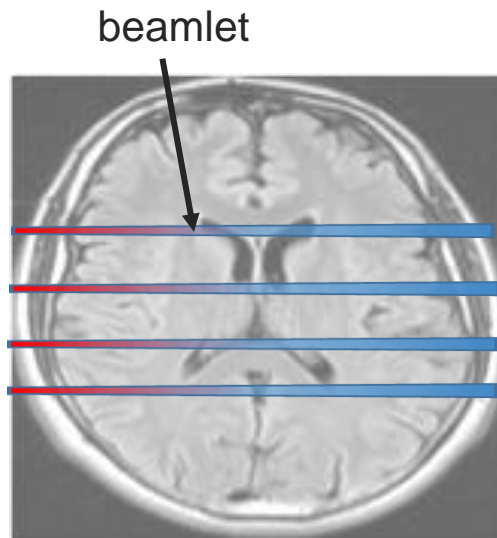
# Spatially Fractionated Radiation Therapy (SFRT)

Standard RT



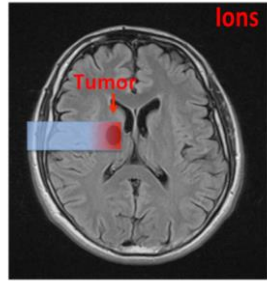
- large fields ( $\geq 1$  cm)
- laterally homogeneous dose distributions

SFRT

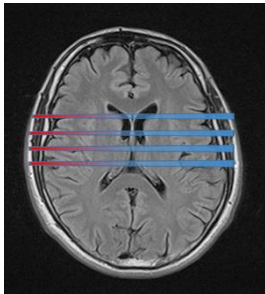


- field composed of smaller **beamlets**
- laterally **heterogeneous** dose distributions (*peaks* and *valleys*)
- **increase of normal tissue tolerance**

# PROTONMBRT: an innovative therapeutic approach

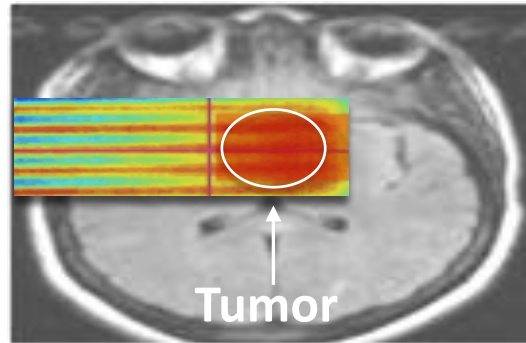


Charged particles



Minibeam radiation therapy (MBRT)

## Proton MBRT



*Prezado et al. 2013*

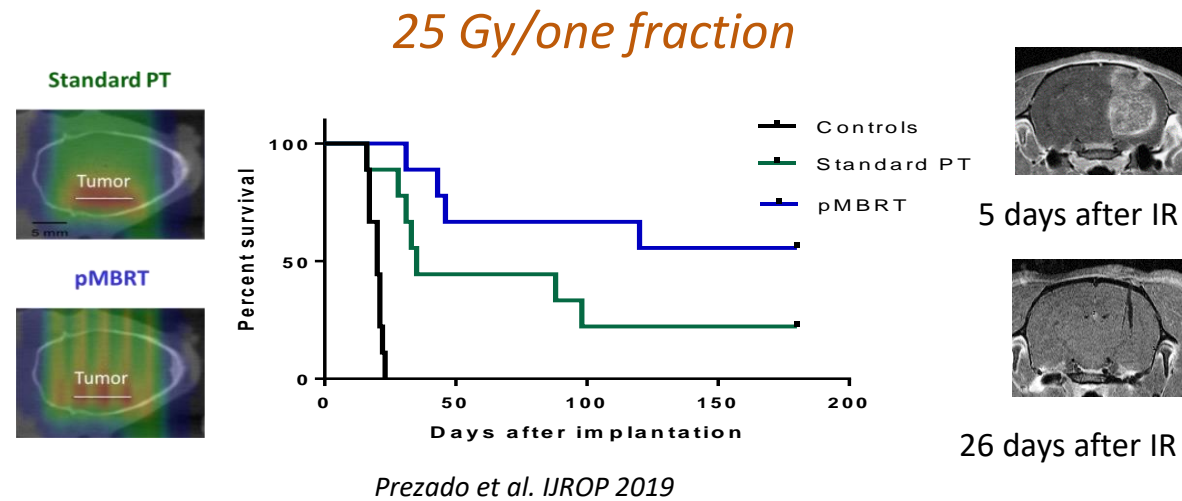
Beam width < 1 mm



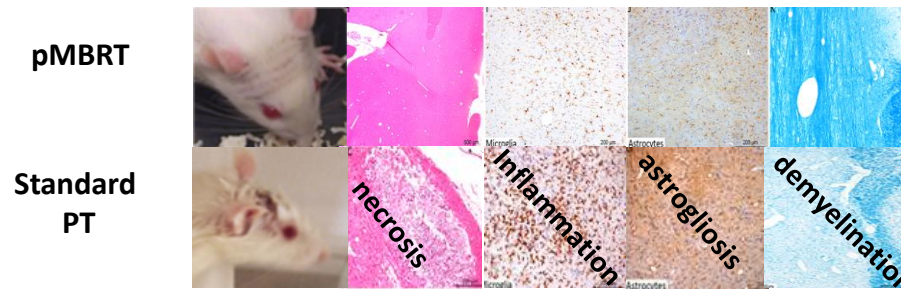
ERC consolidator grant

# pMBRT increases the therapeutic index for high-grade gliomas

Equivalent or superior tumor (rat glioma) control than standard proton therapy

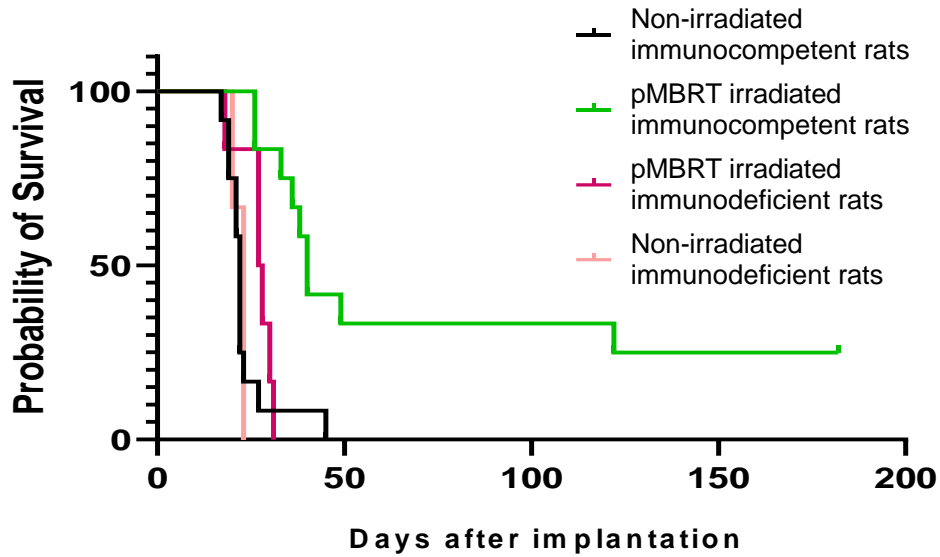


## Net reduction of neurotoxicity



Prezado et al. Scie Reports 2017; Lamirault et al. Scie Reports 2020

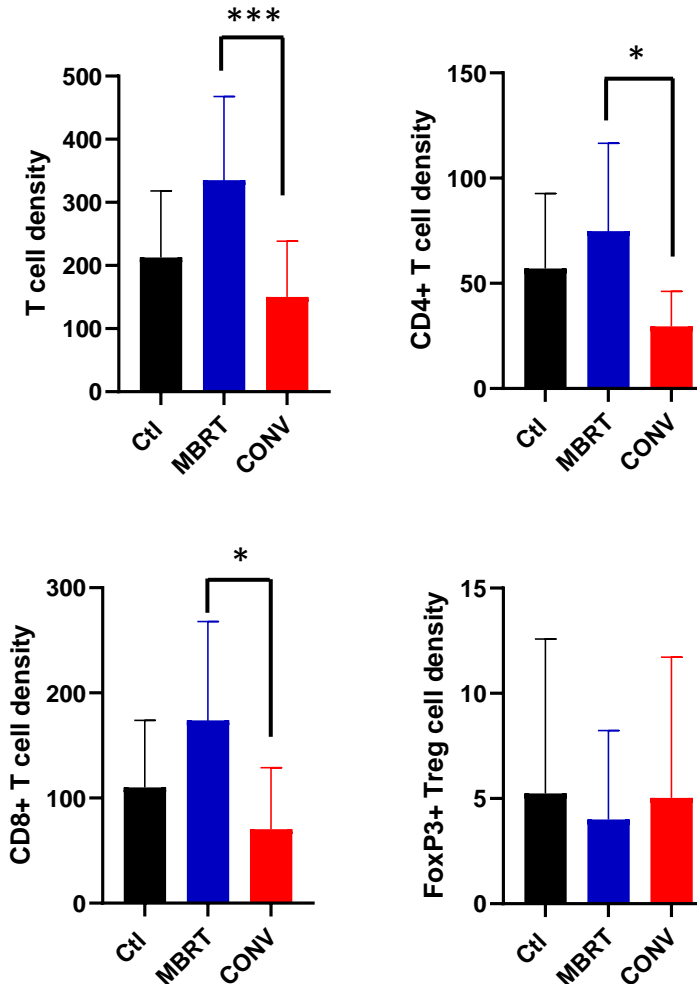
# Determinant role of immune system in the anti-tumor response of MBRT



**MBRT and Conventional irradiations leads to different temporal and spatial distributions**

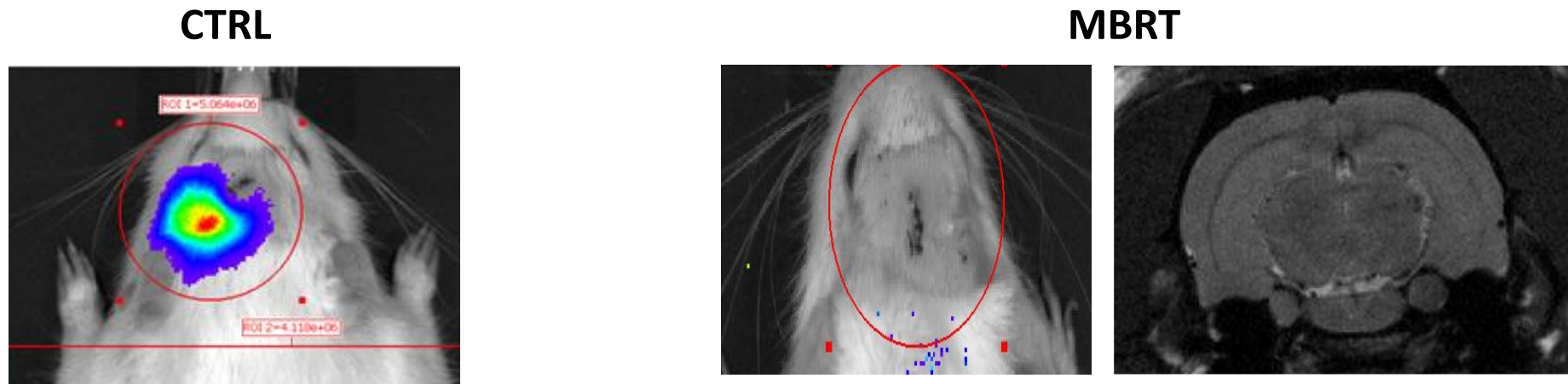
*A. Bertho et al. Redjournal 2022*

48 h post-irradiation



# Minibeam radiation therapy could provide long-term anti-tumor immunity

Irradiated and cured immunocompetent RG2-bearing rats were rechallenged with RG2 tumor cells ( 3 to 6 months after irradiation). While naïve controls developed tumor normally, this was not the case for any of the previously irradiated animals.



*A. Bertho et al. Redjournal 2022*



# Beam characteristics LhARA

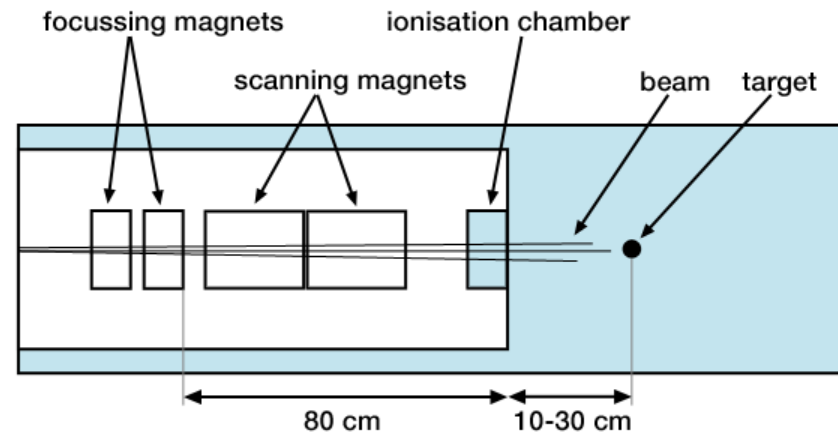
## Ideal beam features

- Low divergence
- Small emittance



## Magnetically focussed minibeams

LhARA → FWHM < 0.5 mm



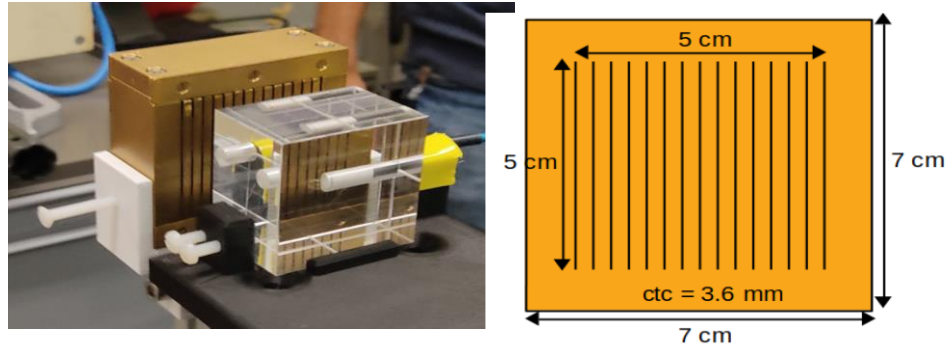
T. Schneider et al. Scientific Reports 2020

can pave the way towards combination of pMBRT + FLASH

# Carbon minibeam radiation therapy @ GSI

180 MeV/A C ions

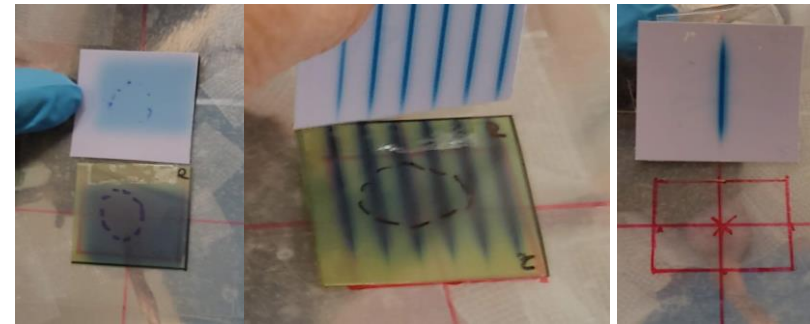
550  $\mu\text{m}$  width



Conv. IR

MBRT

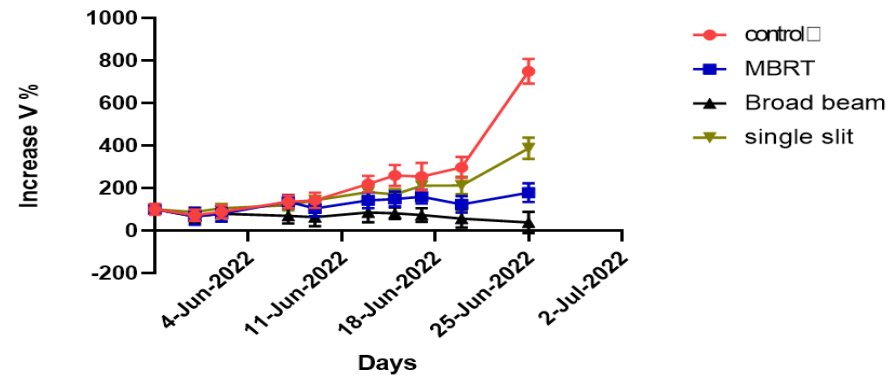
Single slit



Dose prescription: 20 Gy average

Dose peak =  $121 \pm 6$  Gy,  
D valley =  $1.5 \pm 0.1$  Gy

LM8 mice osteosarcoma

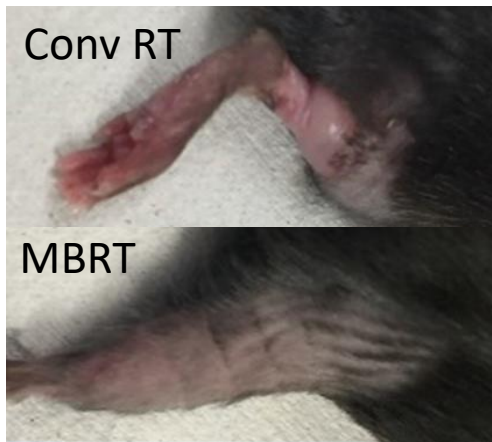


Less lung metastasis with Conv.RT and MBRT

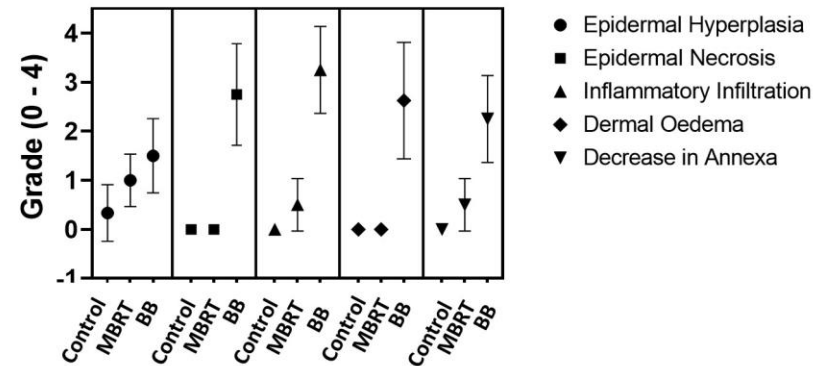
# Very heavy ions MBRT

Ne, Si and Ar ions used in the past, extremely efficient for the treatment of hypoxic tumors (*Castro 1994*).  
HOWEVER, abandoned due to important side effects in normal tissues

## Ne MBRT @ HIMAC, mice's legs irradiation



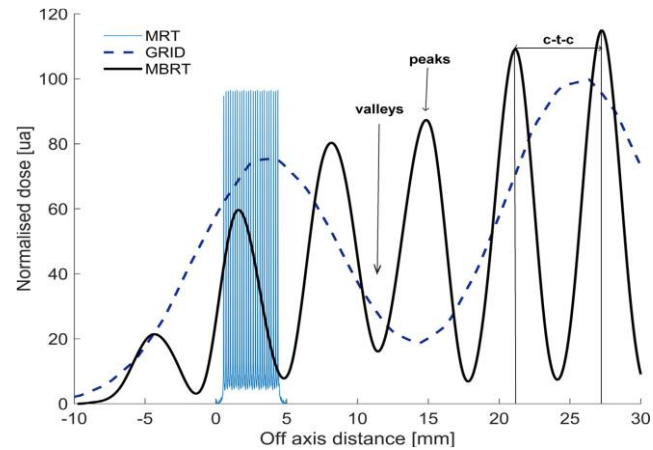
Histopathology Evaluation Scoring Results



**MBRT leads to a net reduction of toxicity as compared to BB**  
**Potential renewed use of very heavy ions for therapy!**

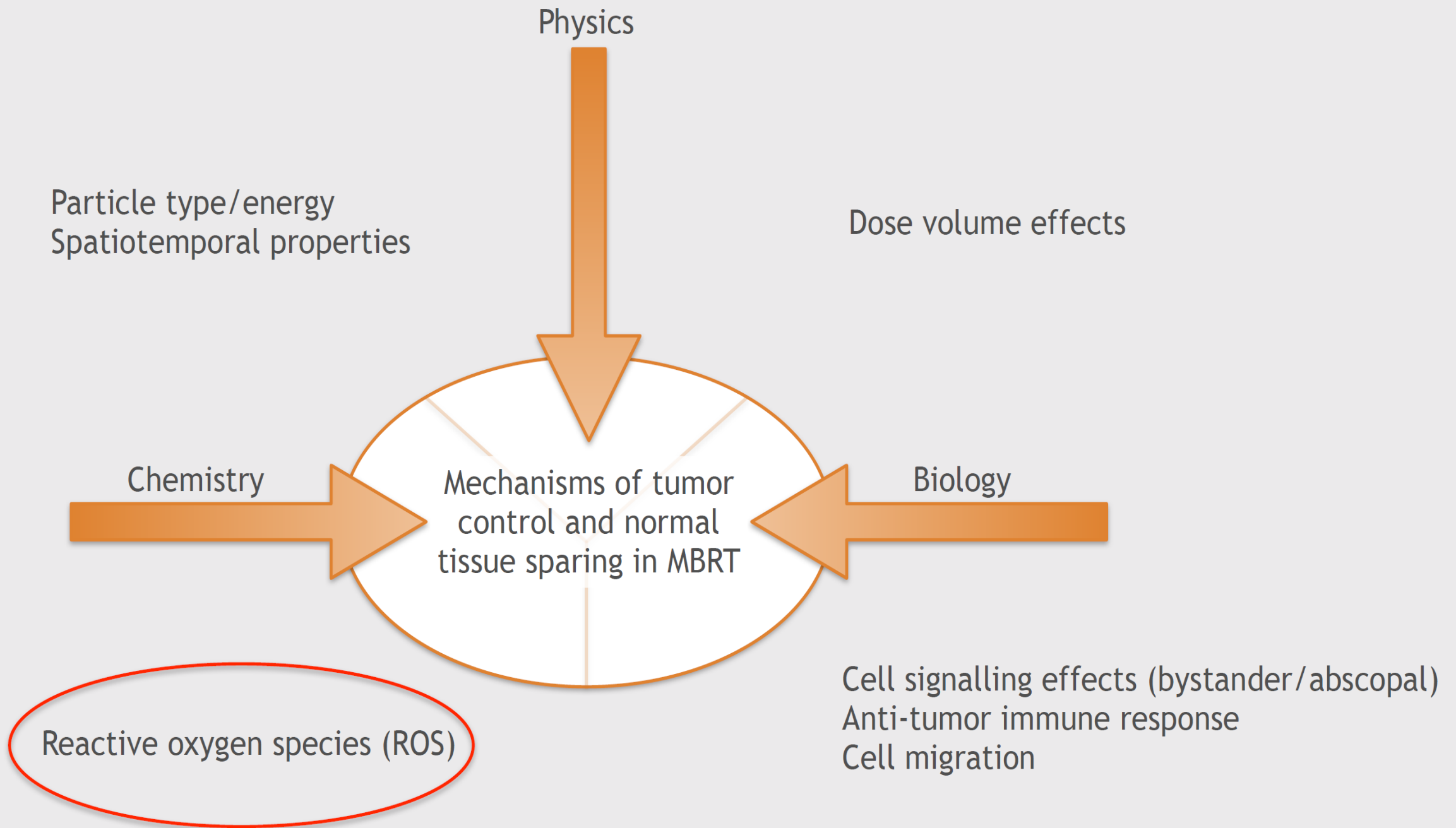
Prezado et al Cancers 2021

# Missing the full picture

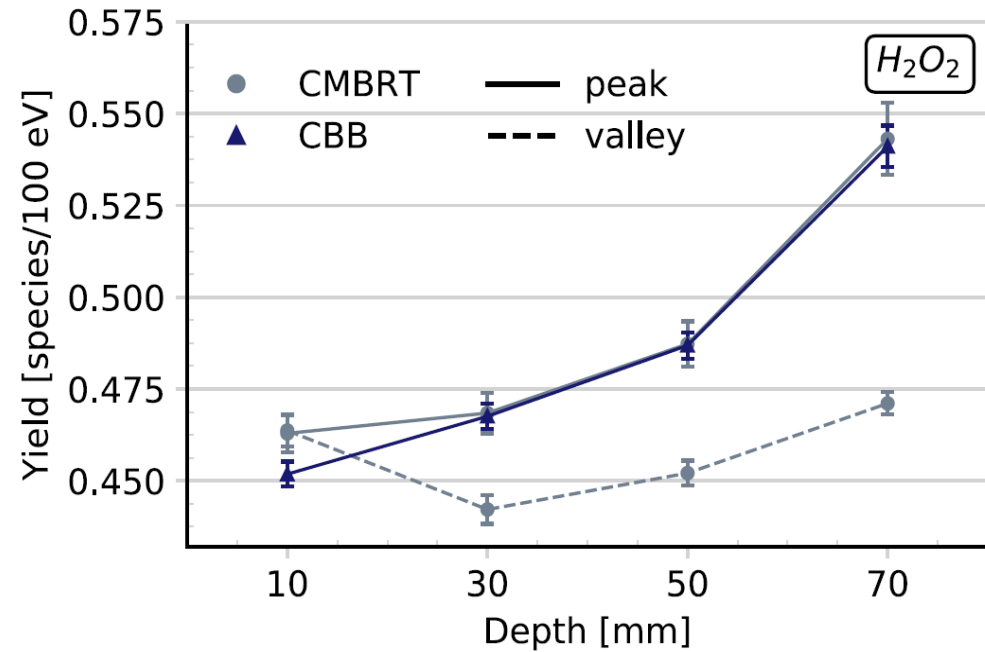
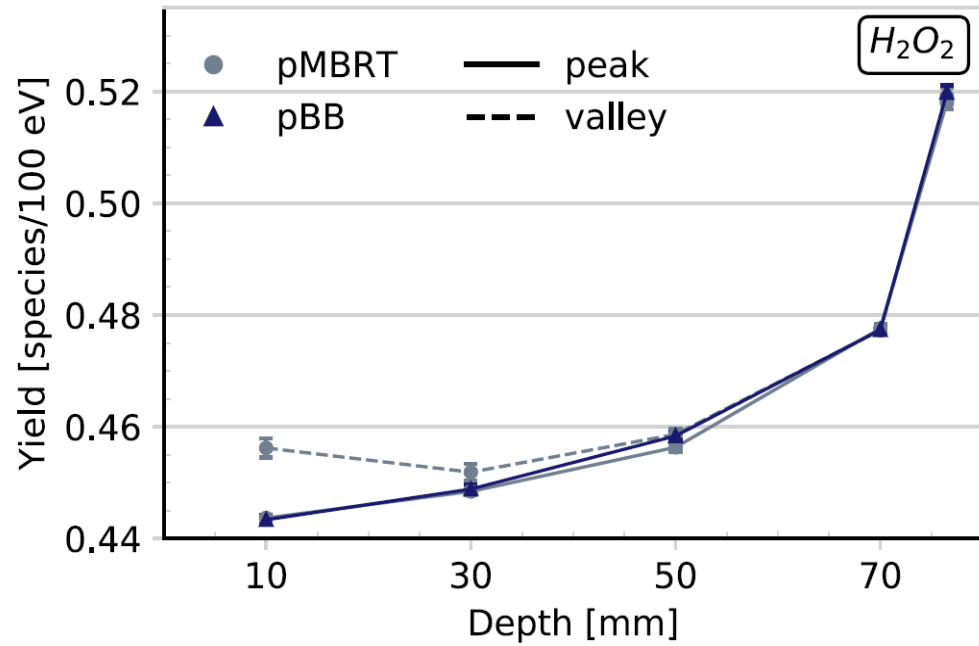


Normal tissues	Tumor
Vascular effects	
Prompt repair	Damage
Cell signalling	
Positive "bystander"-like effects	Cytotoxic "bystander"-like effects
Immune system	
Reduced inflammation	Immune infiltration/activation
Cell migration, hyperplasia and proliferation	ROS production and diffusion?





# ROS in pMBRT vs CMBRT



## LhARA will open new a wide range of possibilities for exploration

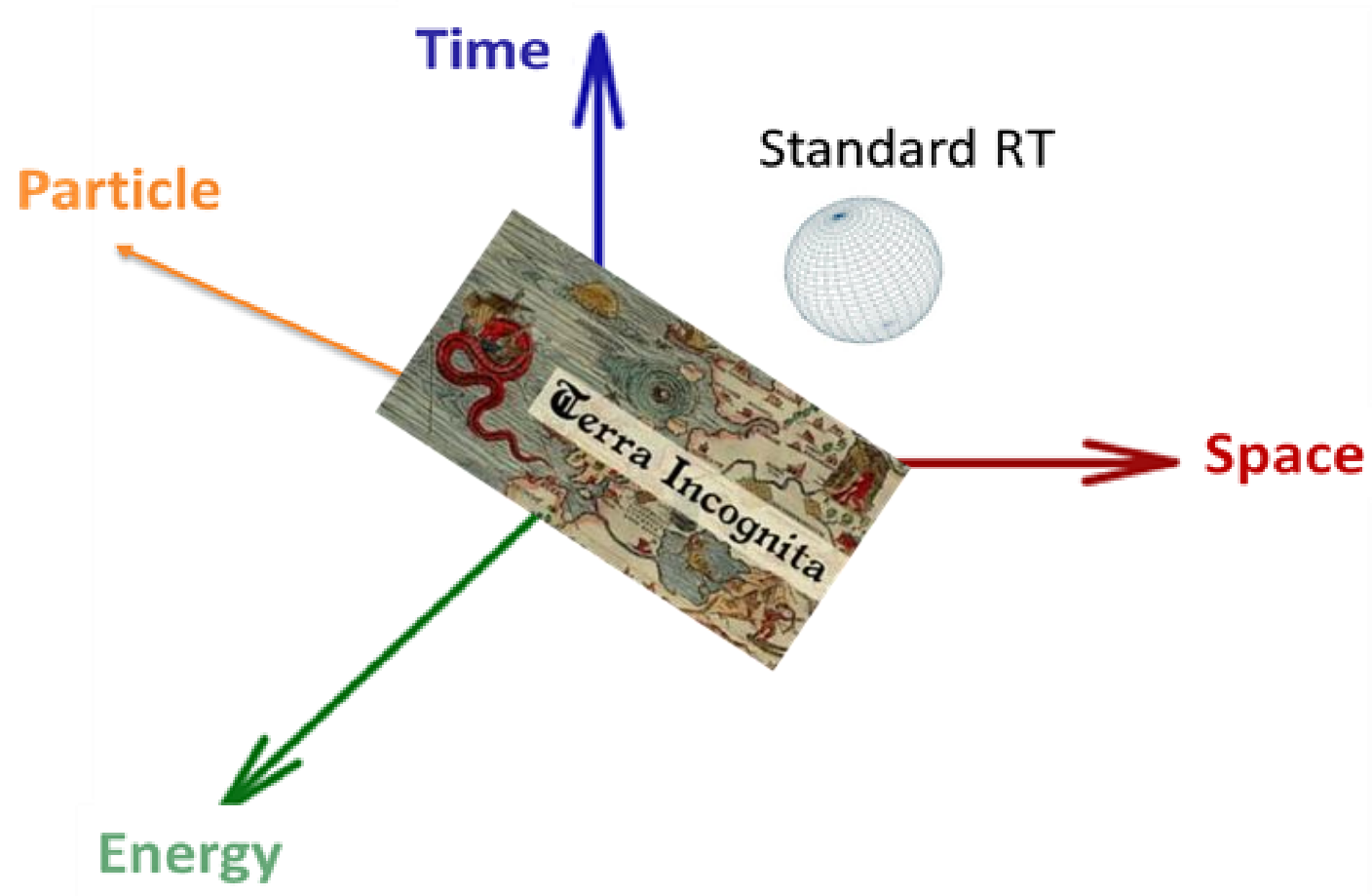
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- Evaluation of the influence of different fractionation schemes in SFRT

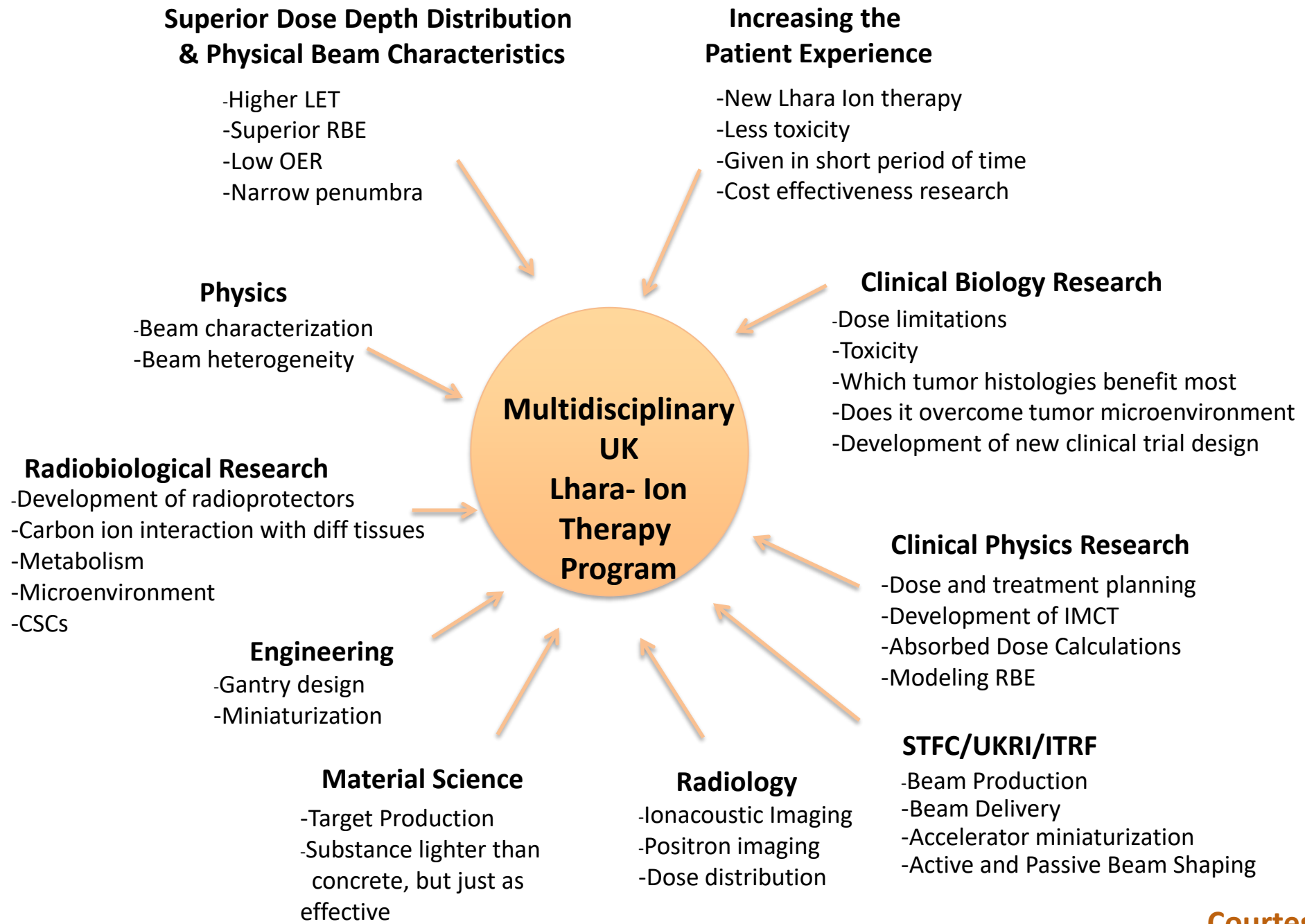
*Optimised spatiotemporal dose distributions*

- Influence of the particle type
- Assessment on the (ultra high) dose-rate dependance in SFRT
- Influence of the particle type

# LhARA

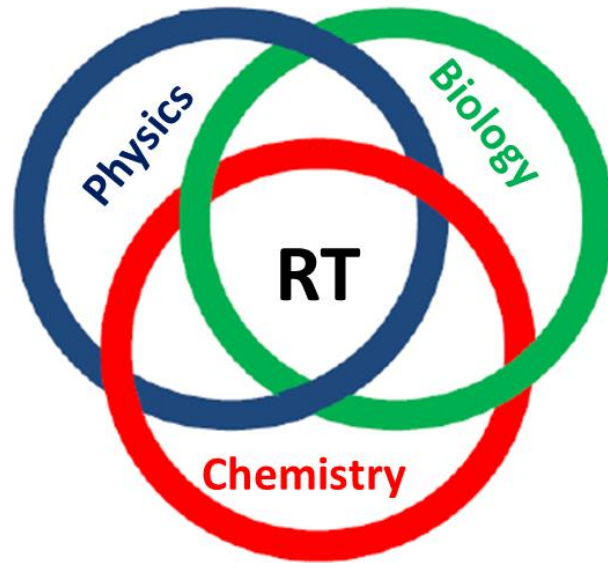






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**Thank you very much for your attention!**



yolanda.prezado@curie.fr