#### The clinical use of OSLD

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#### Outline

- Introduction
- Dose calculation
- Other practical considerations
- Low-energy applications

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#### **Commercial OSLD**

- Nanodot from Landauer
- Al<sub>2</sub>O<sub>3</sub>:C
- Crystal grown, crushed, mounted onto discs, mounted into light-tight case
- Disc is 4mm in diameter and 0.2 mm thick
- Density 1.41 (average) 3.95 (crystal)
- Effective atomic number: 11.28

#### Upcoming relevant TG

- TG-191: Clinical use of luminescent dosimeters: TLD and OSLD
- Stephen F. Kry, Paola Alvarez, Joanna Cygler, Larry DeWerd, Rebecca M. Howell, Sanford Meeks, Jennifer O'Daniel, Chester Reft, Gabriel Sawakuchi, Eduardo Yukihara

• Expected publication date: 2016

#### Stimulation and Read-out



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#### **Calculating Dose**

#### D = M \* N \* Correction factors

$$D_{w} = M_{corr} \cdot N_{D,w} \cdot k_{F} \cdot k_{L} \cdot k_{Q} \cdot k_{\theta}$$

$$M_{corr} = \frac{k_{s,i} \cdot \sum_{j} \left( M_{raw,j} \cdot k_{d,j} \right)}{j}$$

#### Variables

- M signal (counts)
- N calibration coefficient (cGy/count)
- k<sub>Q</sub> beam quality correction factor
- $k_{L}$  dose non-linearity correction factor
- k<sub>F</sub> fading correction factor
- $k_{\theta}$  angular dependence correction factor
- $k_d$  depletion correction factor
- k<sub>s,i</sub> element sensitivity correction factor

## Signal

- M is the number of counts
- Read detector multiple times (3)
  - Improved statistics
  - Verify performance of dosimeter/reader
    - Standard deviation in repeat reads should be <2%, usually <1%</li>

#### Calibration

- We need to relate number of counts to dose
- Irradiate "standards" to a known dose

$$N_{D,w} = \frac{D_0}{\left(M_{0,corr}\right)}$$

- Similar process as for an ion chamber
- Can determine N for each session
- Can create a calibration curve
   N across dose ranges N + kL

### Depletion (k<sub>d</sub>)

- Only a small part of signal is lost during read-out
- 0.03 0.07 % / reading (high dose scale)
- 0.25 % / reading (low dose scale)
- Usually irrelevant (but not always)
- Varies between readers (must characterize)

$$M_{corr} = \frac{k_{s,i} \cdot \sum_{j} (M_{raw,j} \cdot k_{d,j})}{j} \qquad M_{corr} = k_{s,i} \cdot M_{raw}$$

#### Element Sensitivity Correction k<sub>s,i</sub>

- Sensitivity of dot vs. ave
- Screened dots
  - Assume k<sub>s,i</sub> is unity for all dots
  - It's not: ±2.5% uncertainty (1-sigma)
- Unscreened
  - Must deal with variations
    - Reuse detectors
  - Establish and track  $k_{s,i}$



 $k_{s,i}$ 

M

## Linearity k<sub>L</sub>

- Response is supralinear over most dose response range
- Correction is notable for 2 Gy
  - -2-3% compared to 1 Gy
  - Roll into calibration

curve

- Create correction curve



Otomaya et al. Med Phys 2012

## Fading k<sub>F</sub>

- Severe fading in first ~8 minutes
- DO NOT READ!!
   10 minute wait
- After this
  - 1 % / month
- Worry about it for long term record



Reft Med Phys 2009

#### Beam quality $k_Q$

- At dmax under reference conditions, response changes by ~1% from 6 MV to 18 MV
- As field size and depth change, spectrum changes, effect is up to 3% relative to dmax reference conditions
- Outside the treatment field response can overestimate the dose by 30% or more because of the soft spectrum
- In imaging applications the response can overestimate the dose by a factor of 3+ relative to MV calibration

#### Angular dependence $k_{\theta}$

- En-face vs edge on
  - 2% difference in a 6X beam





Where does that leave us?  

$$D_{w} = M_{corr} \cdot N_{D,w} \cdot k_{F} \cdot k_{L} \cdot k_{Q} \cdot k_{\theta}$$

$$M_{corr} = \frac{k_{s,i} \cdot \sum_{j} (M_{raw,j} \cdot k_{d,j})}{j}$$

If this is not a long term record or maximum precision scenario:

$$D_{w} = M_{raw} \cdot N_{D,w} \cdot k_{L} \cdot k_{Q} \cdot k_{s,i}$$

If using a calibration curve N and kL are combined If using screened dosimeters ks,i assumed to be unity

$$D_{w} = M_{raw} \cdot N_{D,w}(D_{ex}) \cdot k_{Q}$$

If you generate a calibration curve for each energy:

$$D_{W} = M_{raw} \cdot N_{D,W}(Dex, Qex)$$

#### Calibration

#### Ion Chamber

- $D = M N P_{tp} P_{ion} k_Q \dots$
- D and M are related by N under calibration conditions
- Calibration conditions more than just 10x10 at 100 cm SSD
  - Full ion collection, STP, Co-60
- The corrections relate the measurement conditions to the calibration conditions – where N is defined and valid
- The calibration conditions are logical
  - STP, full ion collection, reference beam

#### OSLD

- $D = M N k_L k_F k_\theta k_Q \dots$
- Same relationship
- Calibration conditions include
  - Dose, beam quality, time, orientation
- Corrections also relate measurement conditions to the calibration conditions – where N is defined and valid
- Calibration conditions are less natural
  - What dose? what time after irradiation? What angle of incidence? What beam?

#### **Calibration conditions**

- For ion chamber
  - Logical reference conditions
    - Co-60, STP, full ion collection
- For OSLD, no natural default
  - Can pick arbitrary calibration conditions
  - Flexible minimize corrections for given application
  - Requires application of appropriate correction factors to get back to the calibration conditions selected
  - N is a function of the irradiation conditions of the standards

N = N (dose level, time since irradiation, beam quality, orientation, reader mode, reader.....)

#### Calibration option 1

- Shoot standards and determine N for each session
  - Match experimental conditions most closely
  - Minimize correction factors
  - Account for any changes in reader performance
- Minimize uncertainty
- More work
  - Shoot standards for each session
  - Characterize detectors so can correct because it won't be a perfect match

#### Calibration option 2

- Create a calibration curve
  - Provides a one-time N and kL relationship to get dose from signal
  - What about kq, ke, kF.
    - Manage or ignore with increased uncertainty.

#### • Stability/consistency in N?

- Big differences between readers
- 1.2% variation (1-sigma) day-to-day
- Can see large scale drift
- Must monitor stability in N!



#### **Constancy dosimeter**

If you generate a calibration curve, keep an eye on it:

Irradiate a constancy dosimeter (irradiated to a known dose and corrected for fading a depletion).

- 1. Correct for session-specific reader output to determine N (scale output)
- Use N established at the time of the calibration curve – verify no large scale drifts with constancy dosimeter.

Use common sense with a constancy dosimeter. Reader performance should not change drastically!

#### Let's put this all together

Calculate dose

• High precision vs. high efficiency

#### **Dose calculation**

#### **High Precision**

- N is determined for each session to optimally match the experimental conditions
- Determine relative sensitivity of each dot (k<sub>s,i</sub>)
- Batch-based correction factors:  $k_L$ ,  $k_F$ ,  $k_Q$ ,  $k_\theta$  are determined at commissioning and applied
- Multiple detectors are used and read multiple times
- Correction factors are minimized to minimize uncertainty

$$D_{w} = M_{raw} \cdot N_{D,w} \cdot k_{L} \cdot k_{F} \cdot k_{Q} \cdot k_{\theta} \cdot k_{s,i}$$

#### High Efficiency

- Generate a calibration curve over range of relevant doses at most common energy (N, k<sub>L</sub>).
  - Verify curve with constancy dot for each session
- Use screened dots (ignore k<sub>s,i</sub>)
- Ignore  $k_F$ ,  $k_Q$ ,  $k_{\theta}$
- Detectors are read multiple times
- Minimize correction factors match experimental conditions and calibration conditions to the extent possible

$$D_{w} = M_{raw} \cdot N_{D,w}(D_{ex})$$

#### **Dosimetric Uncertainty**

|                  |          | OSLD           |            |                 |            |  |
|------------------|----------|----------------|------------|-----------------|------------|--|
|                  |          | High Precision |            | High Efficiency |            |  |
|                  |          |                | Less       |                 | Less       |  |
| Variable         |          | Controlled     | Controlled | Controlled      | Controlled |  |
| D <sub>0</sub>   |          | 0.6            | 0.6        | 0.9             | 0.9        |  |
| M <sub>0</sub>   |          | 0.8            | 1.6        | 1.4             | 2.0        |  |
| M <sub>raw</sub> |          | 0.8            | 1.6        | 0.8             | 1.6        |  |
| <b>k</b> L       |          | 0.3            | 0.6        | 0.3             | 0.6        |  |
| k <sub>F</sub>   |          | 0.1            | 0.2        | 1.0             | 2.0        |  |
| k <sub>Q</sub>   |          | 0.9            | 2.9        | 1.0             | 3.0        |  |
| K <sub>s.i</sub> |          | -              | -          | 2.5             | 2.5        |  |
| K <sub>θ</sub>   |          | 0.0            | 1.0        | 0.0             | 1.0        |  |
| Total (1         | l-sigma) | 1.6            | 3.9        | 3.4             | 5.3        |  |
| Total (2         | 2-sigma) | 3.2            | 7.9        | 6.9             | 10.6       |  |

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## Handling

- Background signal
  - Can subtract pre-irradiation signal from M<sub>raw</sub>.
  - For un-irradiated dot: not necessary unless monitoring very low doses (imaging)
    - Assumes you don't deliver super-high dose to dot
- You can immerse in water for a reasonable period of time
- If detector pops open, don't lose a lot of signal
- Warm up reader before use (or leave it on continuously)
- Operator can influence precision
  - Knob turning is a skill! 1-2% extra uncertainty for novice operators

#### **Re-use: Bleaching**

- Not recommended to use signal differential
  - don't accumulate signal and measure the signal difference before and after each irradiation
- Bleaching is easy and works well
- Expose the detector to light: empty traps
  - Revert to background counts
- Light source doesn't matter too much
  - Don't have a UV component
    - Adds signal

#### **Re-use: Limits**

- Bleaching does not empty deep traps
- This affects relative trapping and recombination efficiency
  - Changes sensitivity!
  - Changes supralinearity!
- Relationship is complicated
   Depends on bleaching regimen = messy
- Do not use past 10 Gy

#### Commissioning and QA

- TG-191 details commissioning and QA procedures
- Commissioning Reader
- Commissioning Detectors
- Per-session QA
- Annual QA
- Tests and tolerances depend on calibration approach – high precision vs high efficiency

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## Low Energy Applications

- Low energy applications
  - Brachytherapy, imaging, out of field
- **k**Q
  - Corrections are large relative to MV
  - Highly sensitive to spectral variations
- **k**θ
  - 5% in brachytherapy
  - 10% in CT
  - 70% in mamo
  - Depends on scatter
    - complicated



#### Scarboro Rad Prot Dosim 2013

### Low Energy Applications

- ko can be factor of 3-4
  - Overestimates dose if not accounted for
    - Out of field vs in-field: 30% difference
    - kV imaging signal/dose: 3X signal/dose in MV beam
- kq varies with measurement condition
  - 10% variation with measurement location for Ir-192 (2 cm vs. 10 cm of solid water)
  - 3% difference between Varian and Nucletron Ir-192 sources
  - >25% variation with CT scan parameter/measurement conditions

## Low Energy Applications

- Determine and apply large correction factor
  - Use a known dose in the low E environment to determine relative signal/dose
  - Correct with kq
- Calibrate in low-E conditions
  - Determine Now or a calibration curve in the beam of interest
    - Roll into NDW
  - Still may need to correct for specific conditions
    - Smaller kQ

#### Summary

- Versatile point dosimeters
- Offer good accuracy/precision
- Flexible implementation

- With documented associated uncertainties

#### Thank You!



#### Selected references

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## Q1: What is the maximum cumulative dose that should be given to OSLD?

| 20% | 1. | 1 Gy  |
|-----|----|-------|
| 20% | 2. | 2 Gy  |
| 20% | 3. | 5 Gy  |
| 20% | 4. | 10 Gy |
| 20% | 5. | 15 Gy |

• 10 Gy

 Sensitivity and non-linearity characteristics change beyond this dose

Mrcela et al PMB 56: 6065-6082; 2011 Omotayo et al Med Phys 39: 5457-5468; 2012 Q2: What approximate precision in absolute dose (1-sigma) is possible with an OSLD program measuring dose in a controlled setting?

| 20% | 1. | 0.5% |
|-----|----|------|
| 20% | 2. | 1.0% |
| 20% | 3. | 1.5% |
| 20% | 4. | 2.5% |
| 20% | 5. | 5.0% |

#### A2: 3

- 1.5%
- This is following a high precision protocol
- This is under controlled irradiation conditions
- Clinical applications (lower precision and less control of irradiation conditions): 3-5% (1-sigma)

Kry et al Med Phys 41: 394; 2014

# Q3: Compared to a calibration in a megavoltage beam, by how much does OSLD over-respond in a CT environment?

| 20% | 1. | A factor of 1.1 |
|-----|----|-----------------|
| 20% | 2. | A factor of 1.3 |
| 20% | 3. | A factor of 2   |
| 20% | 4. | A factor of 3   |
| 20% | 5. | A factor of 10  |

#### A3: 4

• A factor of 3

- Reft Med Phys 36:1690-1699;2009
- Scarboro et al Radiation Protection Dosimetry 153: 23-31; 2013

Q4: Shallow traps fade rapidly after irradiation. How long must one wait after irradiating OSLD before reading them out to avoid this signal loss?

| 20% | 1. | 1 minute   |
|-----|----|------------|
| 20% | 2. | 10 minutes |
| 20% | 3. | 1 hour     |
| 20% | 4. | 12 hours   |
| 20% | 5. | 24 hours   |

A4: 2

• 10 minutes

 Signal drops by ~40% between 1 min and 10 min

Jursinic Med Phys 34: 4594-4604; 2007 Reft Med Phys 36:1690-1699;2009

## Q5: Which parameter does not affect the calibration coefficient

| 20% | 1. The specific reader used               |    |
|-----|---|----|
| 20% | 2. Time between irradiation and readout   |    |
| 20% | 3. Dose level                             |    |
| 20% | 4. Leaving the reader on continuously     |    |
| 20% | 5. Beam quality used to irradiate standar | ds |

#### A5: 4

- Leaving the reader on continuously
  - This is a reasonable approach to ensuring the PMT is warmed up for use
- The relationship between signal and dose (N) is defined for a specific condition on a specific reader
- The calibration coefficient will depend on which reader you use, the time between irradiation and readout, dose level, and the beam quality.
- Jursinic Med Phys 34: 4594-4604; 2007
- Mrcela et al Phys Med Biol 56: 6065-6082; 2011
- Dunn et al, Radiation Measurements 51-52: 31-39; 2013