

# School on Medical Physics for Radiation Therapy: Dosimetry, Treatment Planning and Delivery for Advanced Applications



**11 - 22 September 2023**  
**An ICTP Meeting**  
**Trieste, Italy**

Further information:  
<http://indico.ictp.it/event/10205/>  
[smr3871@ictp.it](mailto:smr3871@ictp.it)

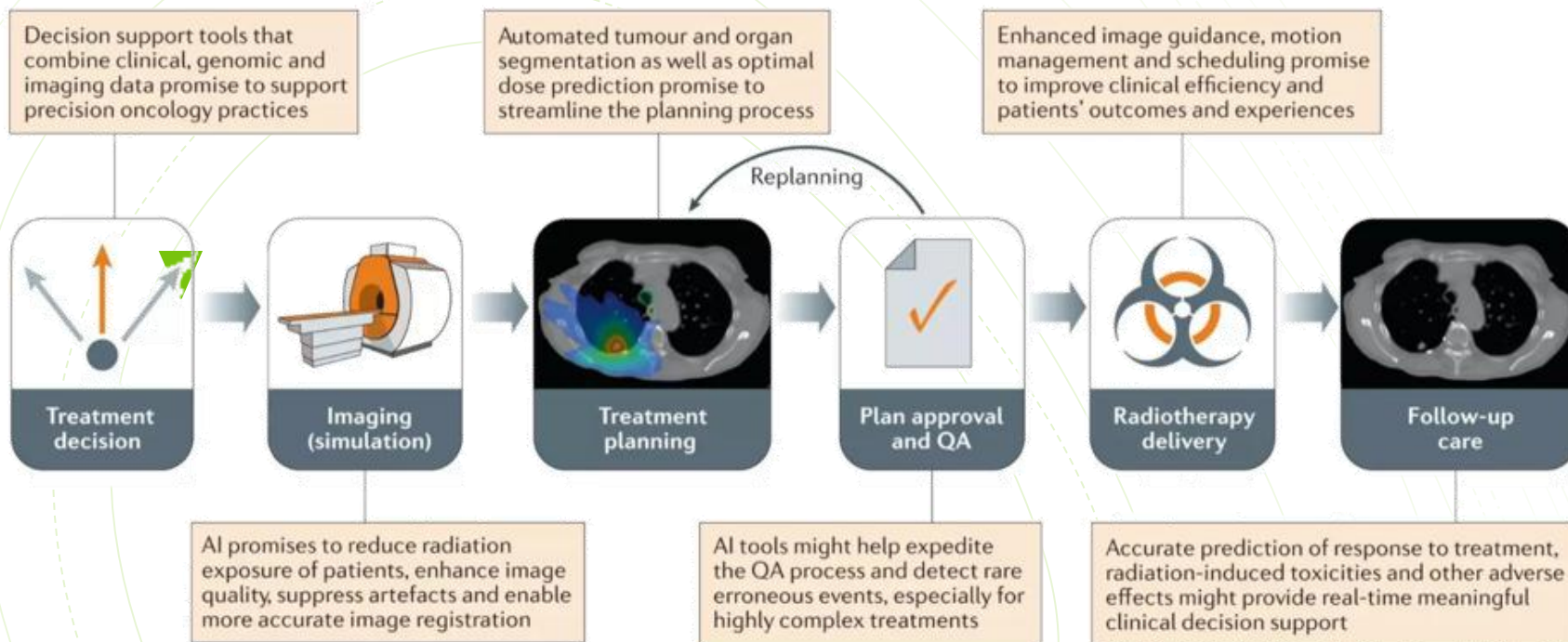
## Artificial intelligence in Radiotherapy

Michele Avanzo

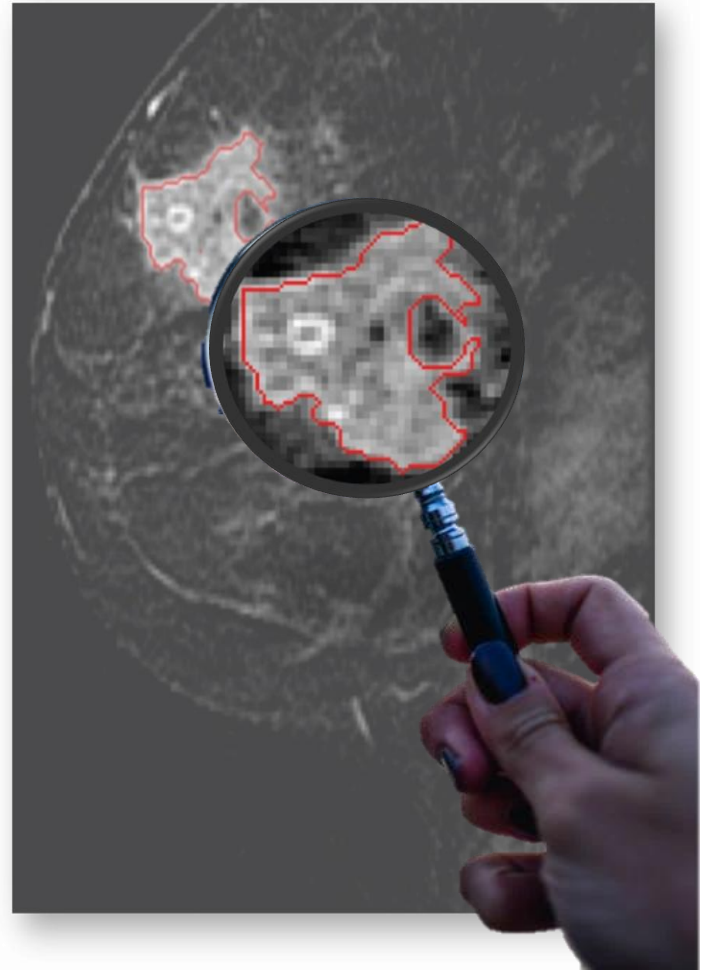
Centro di Riferimento Oncologico di Aviano IRCCS, Aviano (PN), Italy



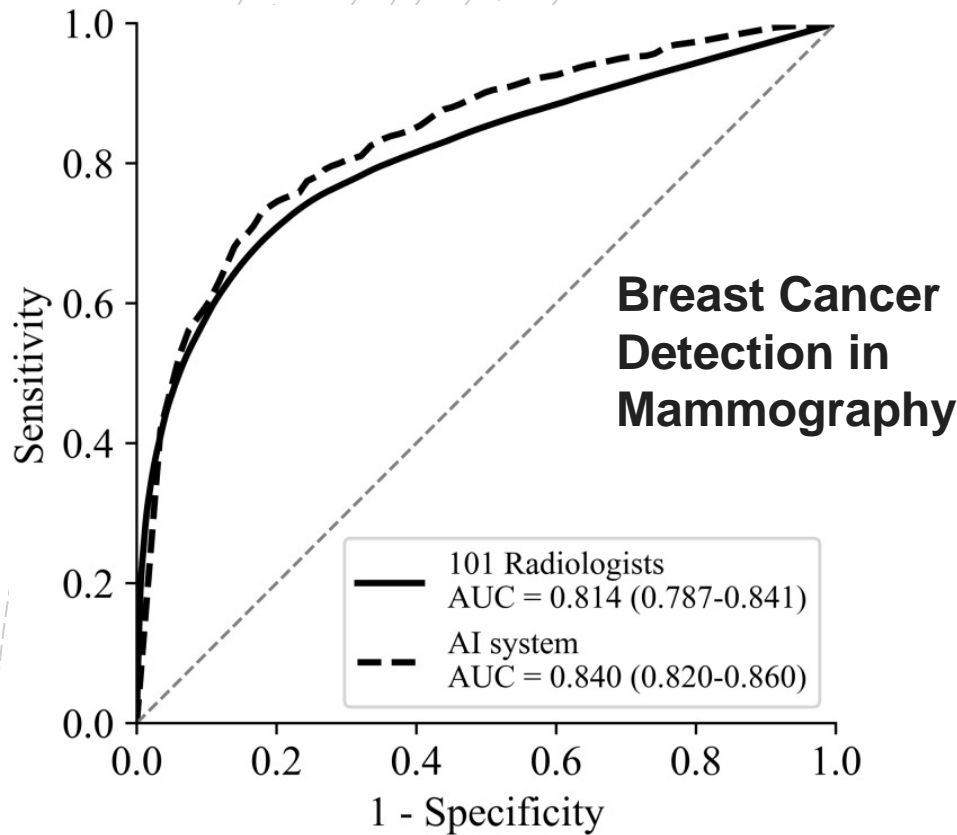
# AI in Radiation Oncology



Treatment  
decision



# Treatment decision

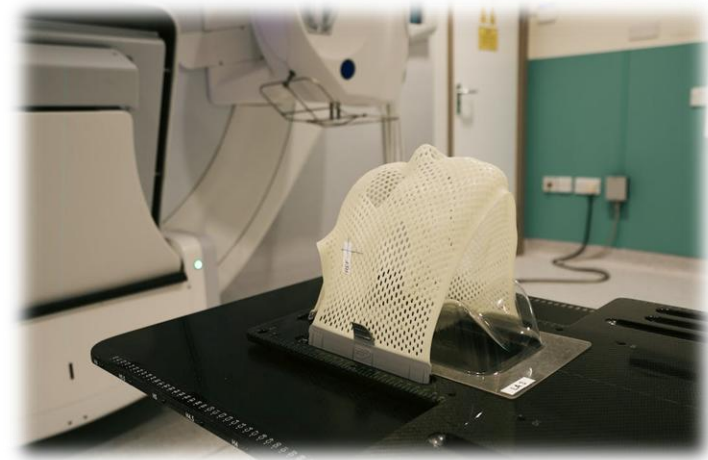


## ChatGPT in glioma adjuvant therapy decision making: ready to assume the role of a doctor in the tumour board?

Julien Haemmerli <sup>1</sup>, Lukas Sveikata,<sup>2,3,4</sup> Aria Nouri,<sup>1</sup> Adrien May,<sup>1</sup> Kristof Egervari,<sup>5</sup> Christian Freyschlag,<sup>6</sup> Johannes A Lobrinus,<sup>5</sup> Denis Migliorini,<sup>7</sup> Shahan Momjian,<sup>1</sup> Nicolae Sanda,<sup>2</sup> Karl Schaller,<sup>1</sup> Sebastien Tran,<sup>8</sup> Jacky Yeung,<sup>9</sup> Philippe Bijlenga<sup>1</sup>

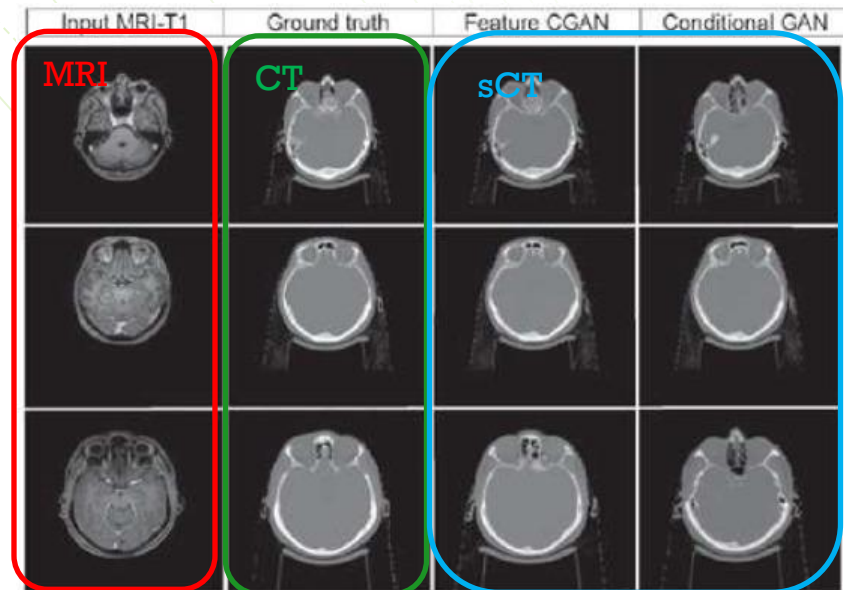
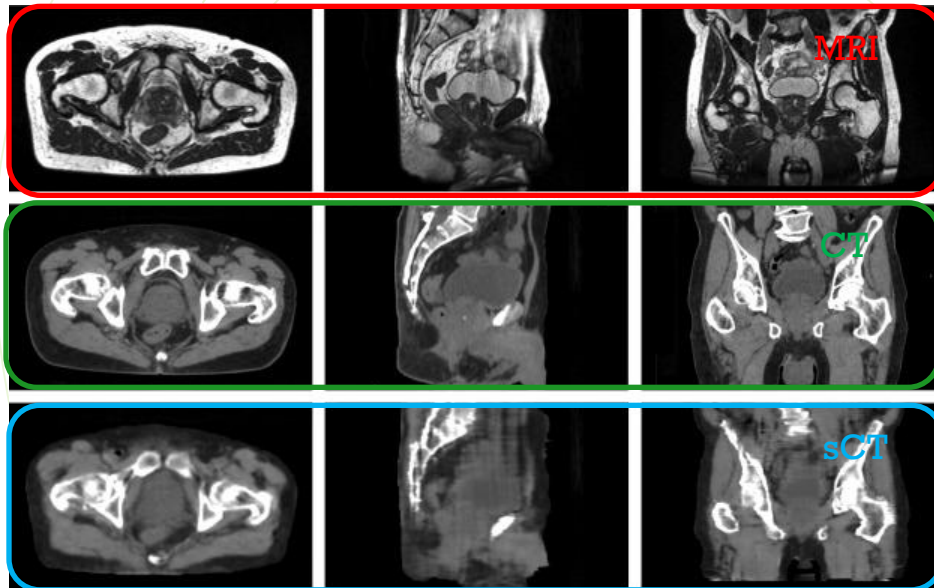
**Figure 1.** Receiver operating characteristic curve comparison between the reader-averaged radiologists and the artificial intelligence (AI) system in terms of area under the curve (AUC). Parentheses show the 95% confidence interval of the AUC.

# Pre- Treatment imaging



# Conversion among imaging modalities

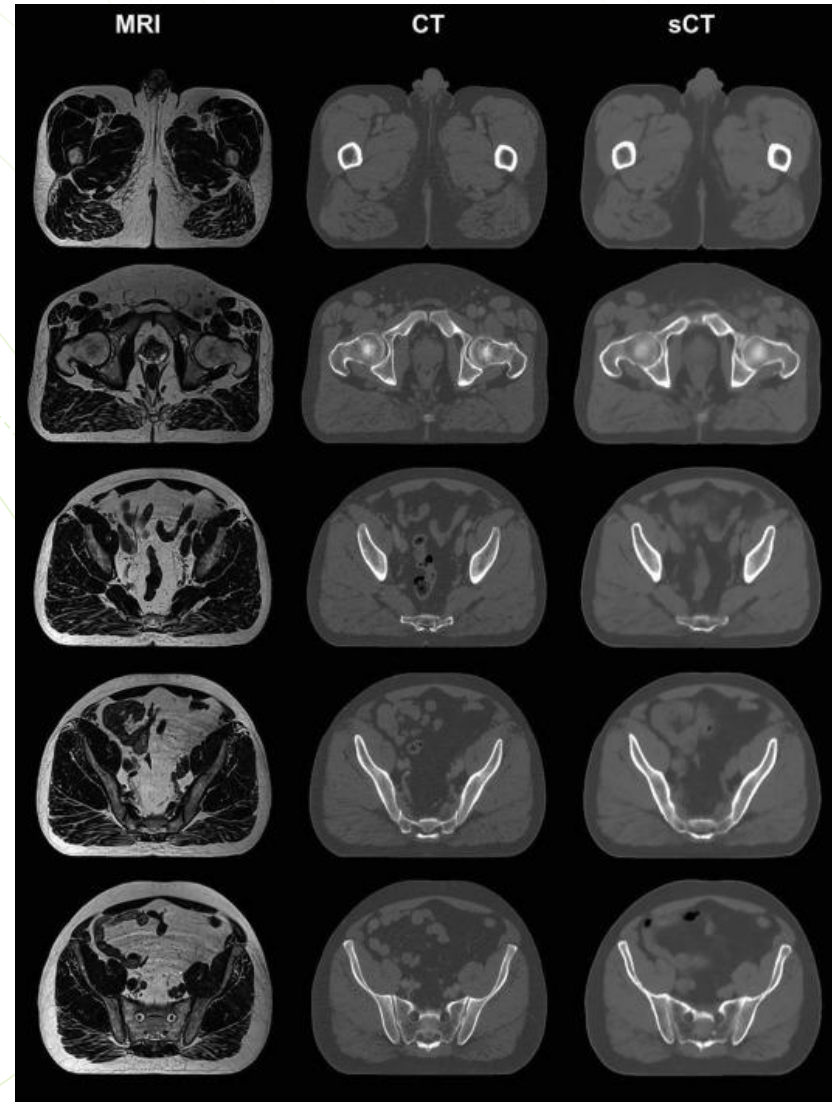
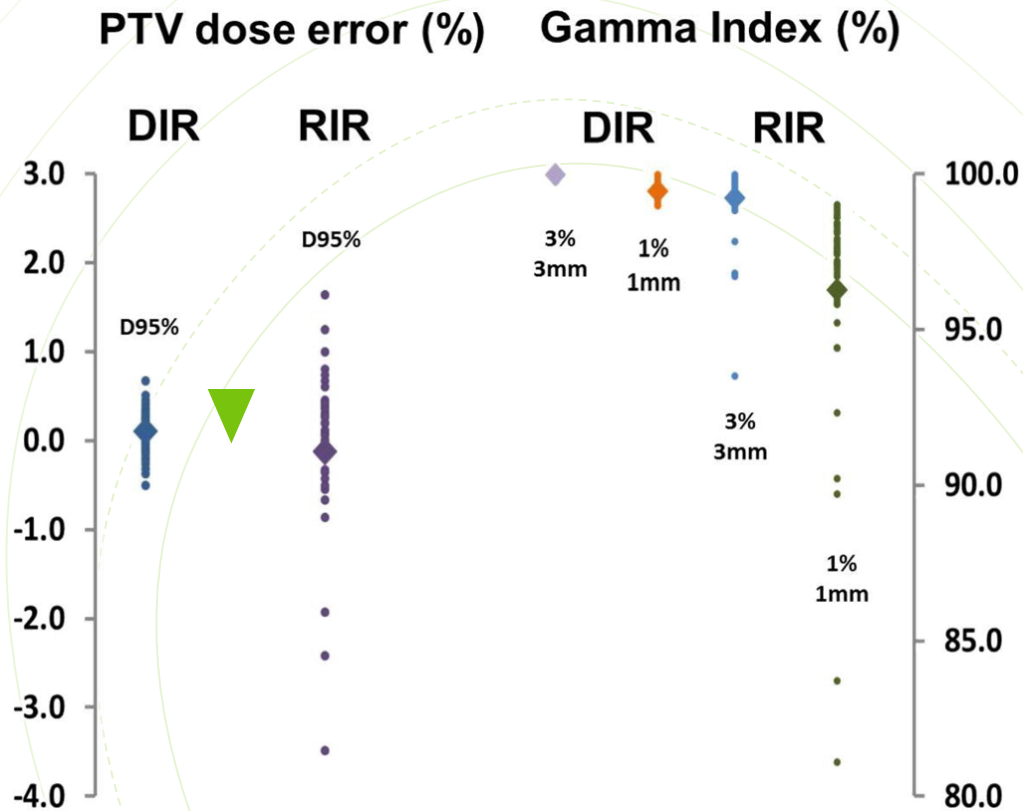
- GAN and autoencoders



Cusumano et al. Radiotherapy and Oncology  
Volume 153, December 2020, Pages 205-212

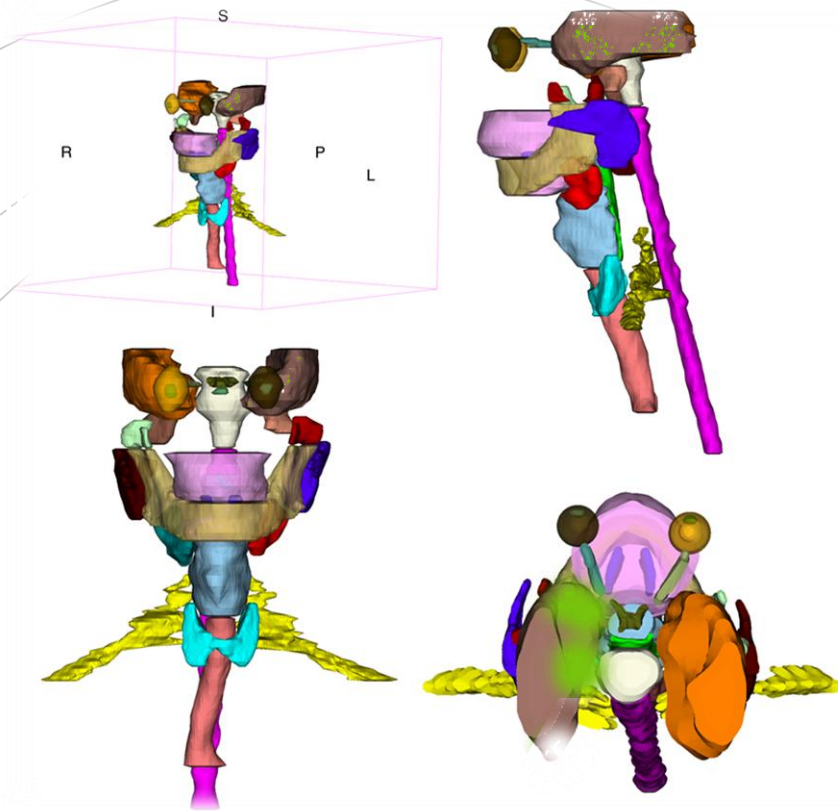
Fard et al., Computers in Biology and Medicine ,  
Vol. 146, July 2022, 105556

# Synthetic-CT generation for MR-only RT

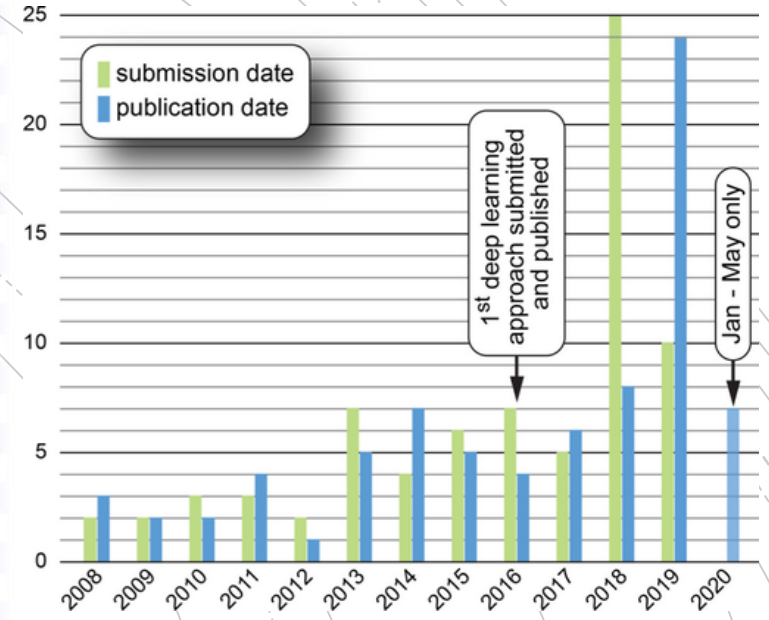




# Autocontouring: head and neck



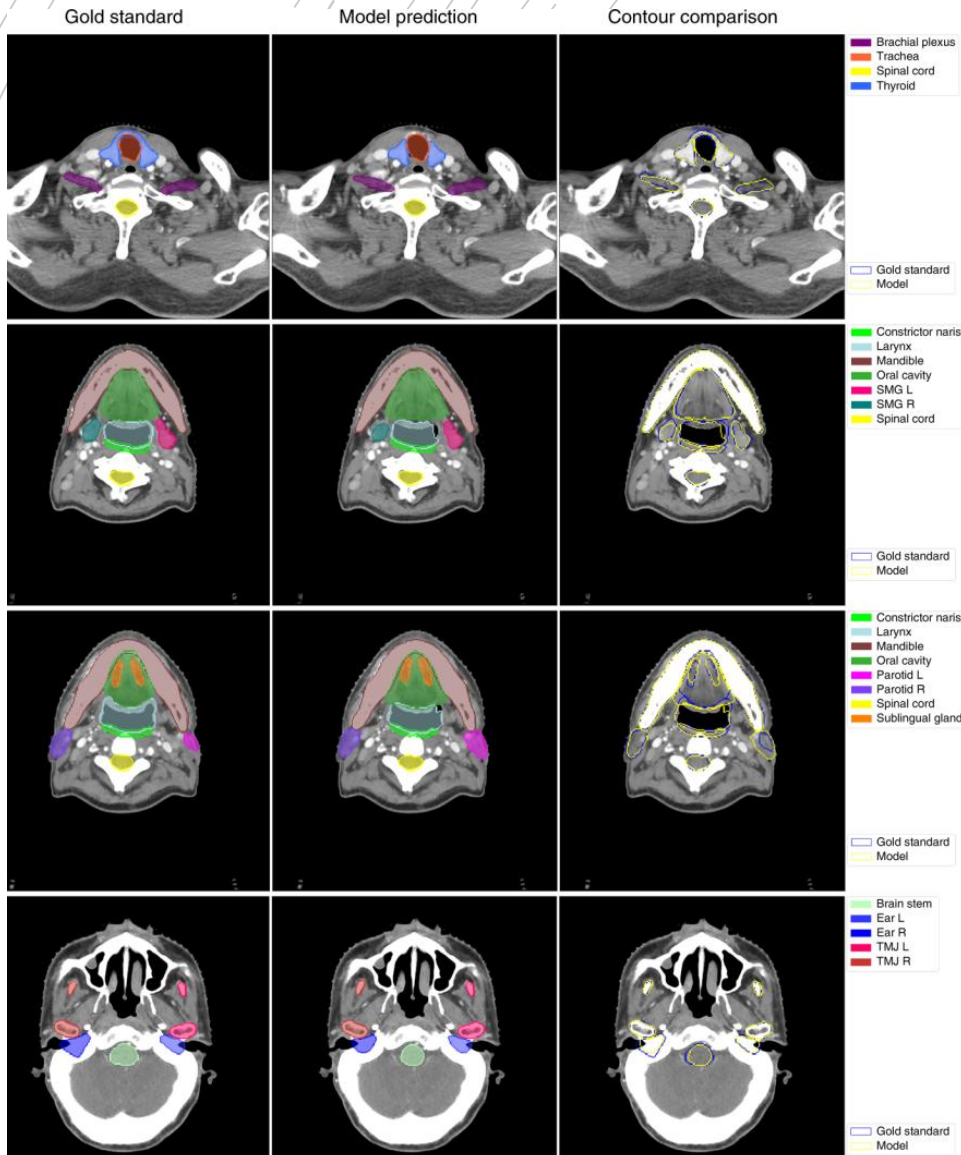
- Brachial plexus
- Brain stem
- Constrictor naris
- Ear L
- Ear R
- Eye L
- Eye R
- Hypophysis
- Larynx
- Lens L
- Lens R
- Mandible
- Optical chiasm
- Optical nerve L
- Optical nerve R
- Oral cavity
- Parotid L
- Parotid R
- SMG L
- SMG R
- Spinal cord
- Sublingual gland
- Temporal lobe L
- Temporal lobe R
- Thyroid
- TMJ L
- TMJ R
- Trachea



Tang, Nature Machine Intelligence 2019

Vrtovec, Medical Physics 2020

# Autocontouring: head and neck

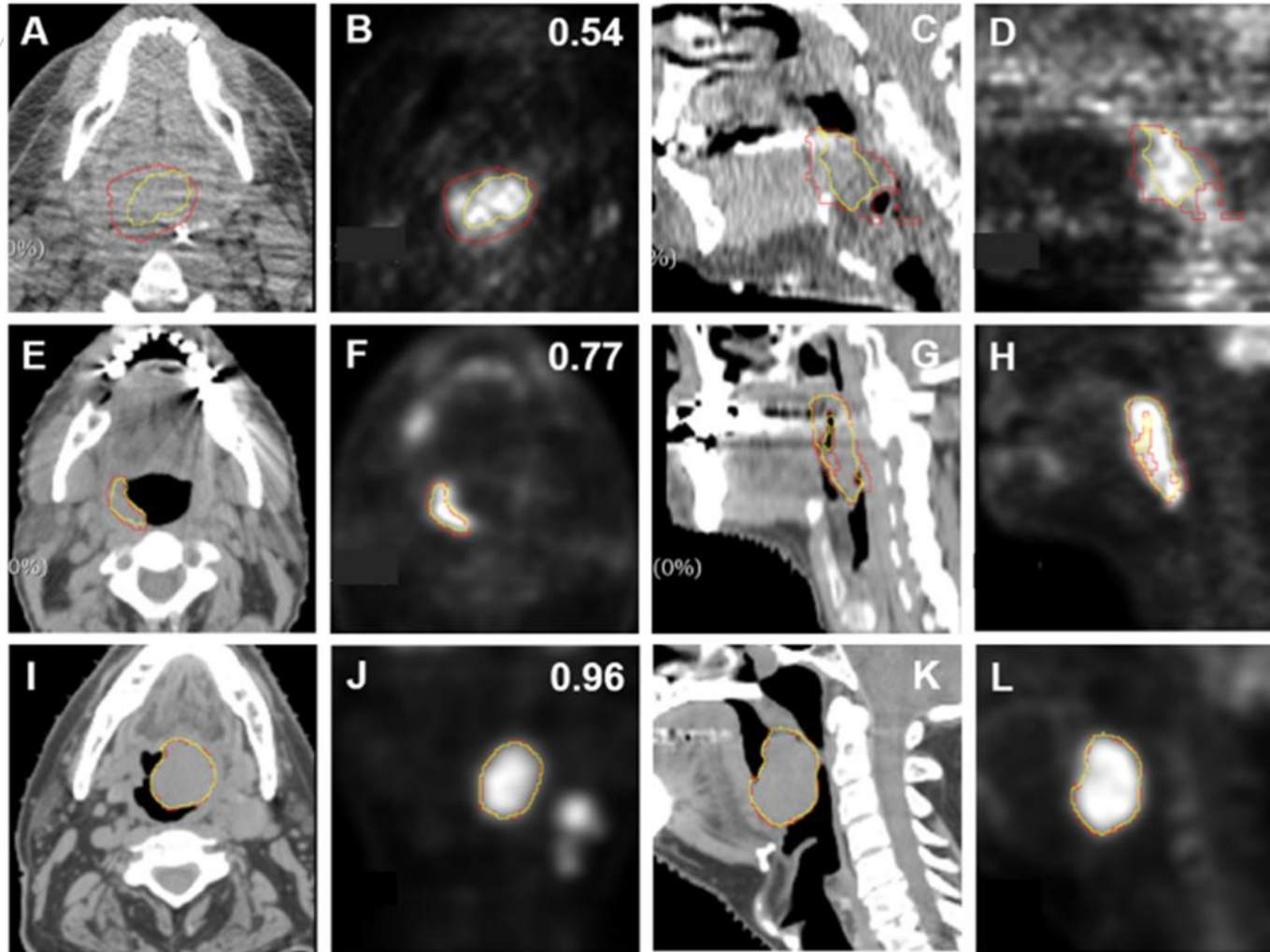


**Table 3 | DSC comparison on the test set of dataset 1**

OAR	MAS	AnatomyNet	U <sub>2</sub> -Net	Human
Brachial plexus	30.38 ± 15.63	50.41 ± 8.08	<b>56.15 ± 10.83</b>	33.03 ± 7.83
Brain stem	82.25 ± 7.47	82.63 ± 4.57	<b>86.25 ± 3.86</b>	83.25 ± 4.63
Constrictor naris	66.38 ± 8.21	73.68 ± 7.56	<b>75.46 ± 6.13</b>	62.34 ± 8.63
Ear L	70.38 ± 14.94	76.68 ± 5.00	<b>77.28 ± 4.25</b>	43.57 ± 12.63
Ear R	70.03 ± 15.57	<b>78.77 ± 5.77</b>	78.64 ± 6.35	39.71 ± 10.81
Eye L	85.96 ± 10.99	88.41 ± 3.10	<b>92.51 ± 2.00</b>	90.71 ± 2.11
Eye R	82.68 ± 17.38	89.25 ± 3.38	<b>92.49 ± 2.34</b>	91.51 ± 1.79
Hypophysis	43.54 ± 18.45	56.18 ± 10.01	<b>63.86 ± 8.73</b>	59.26 ± 14.77
Larynx	82.60 ± 8.19	83.06 ± 7.98	<b>89.25 ± 3.26</b>	68.60 ± 6.59
Lens L	46.25 ± 24.29	77.25 ± 7.92	<b>81.90 ± 6.88</b>	64.27 ± 10.06
Lens R	45.53 ± 23.94	78.06 ± 7.51	<b>83.04 ± 5.90</b>	71.79 ± 9.59
Mandible	83.95 ± 11.48	91.97 ± 1.71	<b>93.12 ± 1.41</b>	90.97 ± 1.46
Optic chiasm	42.08 ± 17.52	60.55 ± 11.16	64.21 ± 16.39	28.61 ± 14.40
Optic nerve L	59.49 ± 14.61	72.55 ± 6.55	<b>75.73 ± 7.26</b>	65.10 ± 8.44
Optic nerve R	59.08 ± 16.53	72.95 ± 7.90	<b>76.06 ± 6.49</b>	66.14 ± 7.29
Oral cavity	86.10 ± 9.11	87.69 ± 5.67	<b>90.77 ± 2.32</b>	79.30 ± 3.59
Parotid L	72.52 ± 15.57	82.28 ± 6.71	<b>84.86 ± 4.22</b>	78.46 ± 4.90
Parotid R	71.20 ± 17.55	82.20 ± 7.26	<b>84.93 ± 3.99</b>	78.88 ± 4.41
SMG L	60.89 ± 12.11	75.47 ± 8.93	<b>80.71 ± 7.32</b>	77.73 ± 6.25
SMG R	63.70 ± 15.80	74.82 ± 14.69	<b>82.54 ± 7.47</b>	74.10 ± 16.92
Spinal cord	77.42 ± 16.70	80.32 ± 6.48	<b>85.64 ± 5.90</b>	84.59 ± 6.62
Sublingual gland	21.52 ± 16.34	39.94 ± 21.02	<b>45.99 ± 18.84</b>	35.16 ± 23.87
Temporal lobe L	80.05 ± 7.28	81.76 ± 5.33	<b>84.78 ± 2.62</b>	82.41 ± 5.01
Temporal lobe R	78.26 ± 7.40	72.97 ± 14.60	<b>84.13 ± 3.34</b>	80.90 ± 7.49
Thyroid	63.68 ± 19.65	71.82 ± 11.40	<b>85.62 ± 4.63</b>	82.42 ± 6.16
TMJ L	61.26 ± 19.86	86.65 ± 3.34	<b>87.96 ± 3.12</b>	84.67 ± 5.09
TMJ R	63.45 ± 20.48	85.73 ± 3.69	<b>86.86 ± 3.60</b>	81.98 ± 8.59
Trachea	65.86 ± 18.75	79.34 ± 7.75	81.29 ± 4.84	<b>91.05 ± 1.69</b>
Average	64.87	76.19	80.43	70.38

Values are given in units of %. L, left; R, right; SMG, submandibular gland; TMJ, temporomandibular joint; MAS, multi-atlas segmentation. Bold numbers represent oncologist modified his/her previous delineation by referencing the corresponding MRI images.

# Autocontouring: bhead and neck



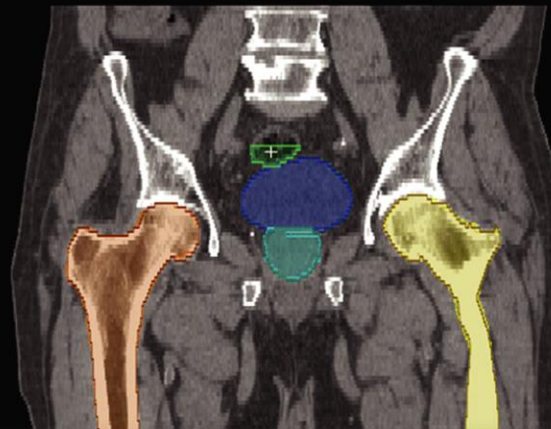
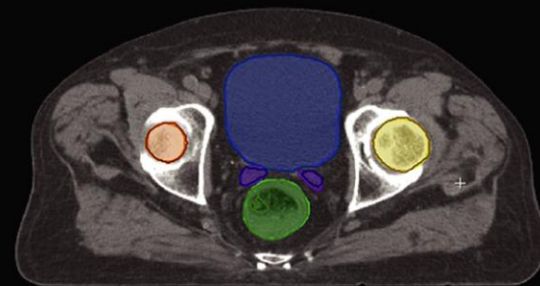
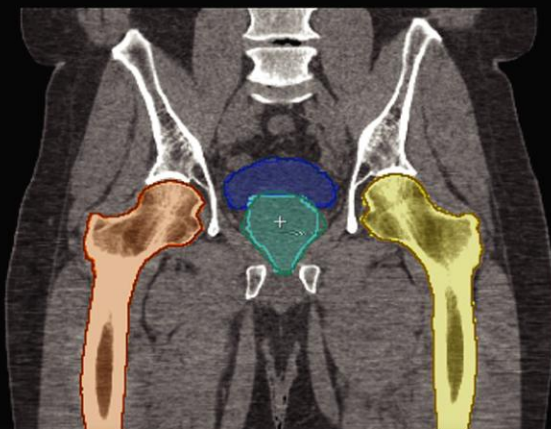
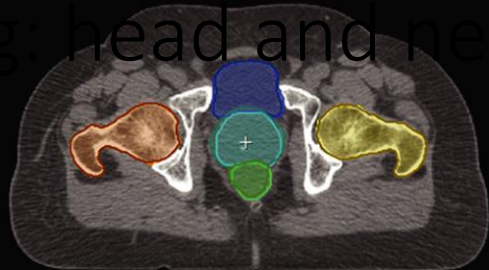
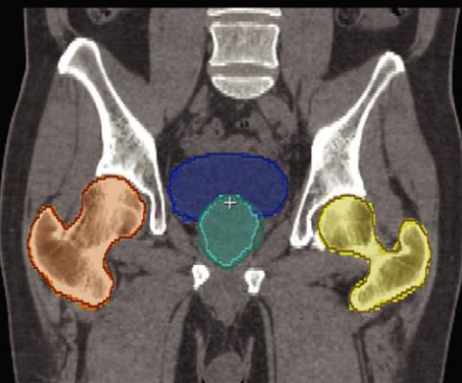
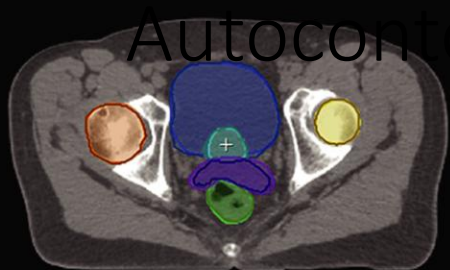
256 and 512 ResUnet mod

Model	DSC
256 (mean)	$0.771 \pm 0.039$
256 (median)	$0.829 \pm 0.024$
512 (mean)	$0.768 \pm 0.041$
512 (median)	$0.828 \pm 0.024$

1

C Main data set

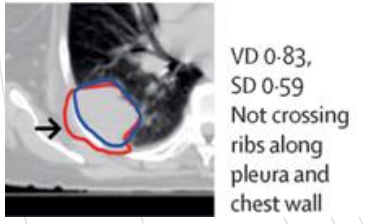
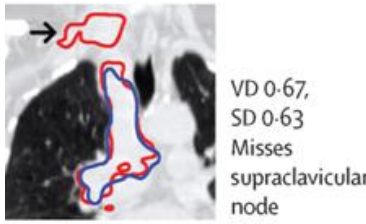
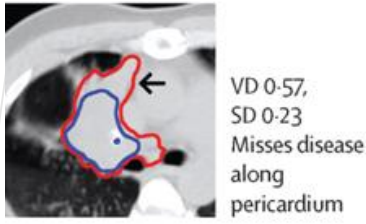
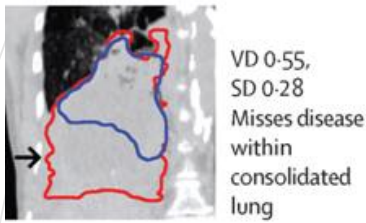
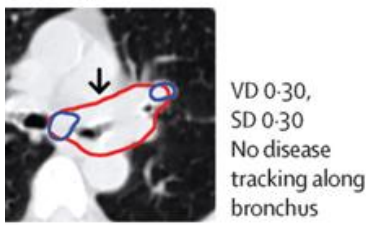
D External data set



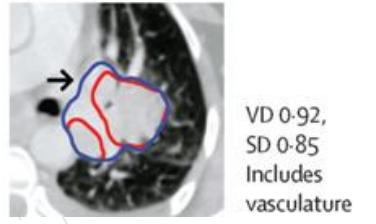
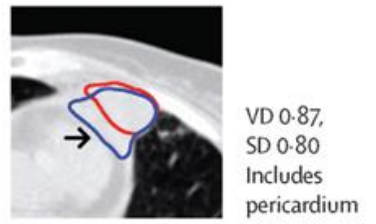
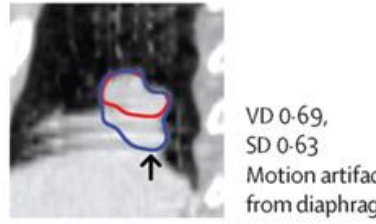
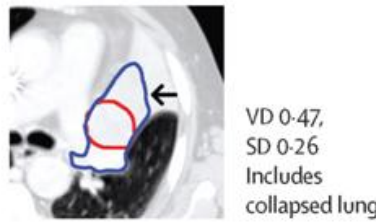
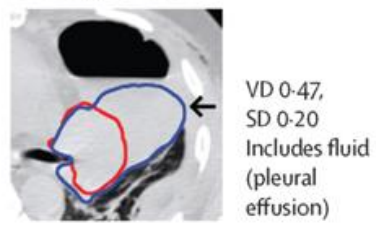
# Autocontouring: pelvis

**A Model failure modes**

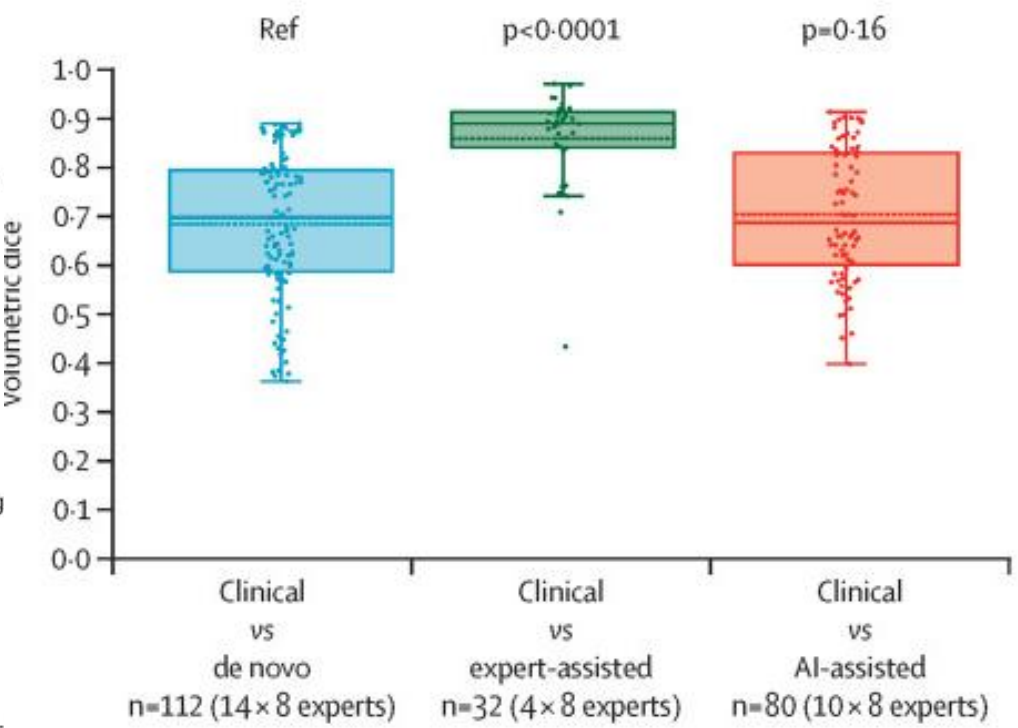
**Under-segmentation**



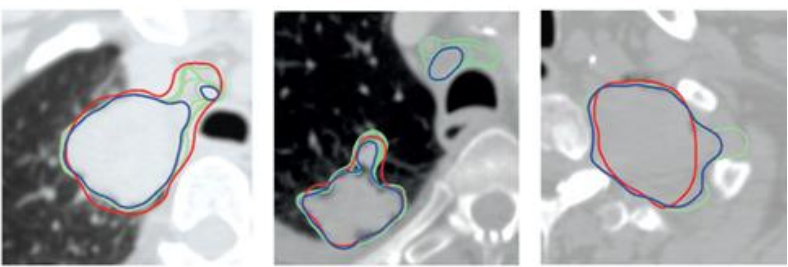
**Over-segmentation**



**A Quantitative scoring**



**AI assisted**

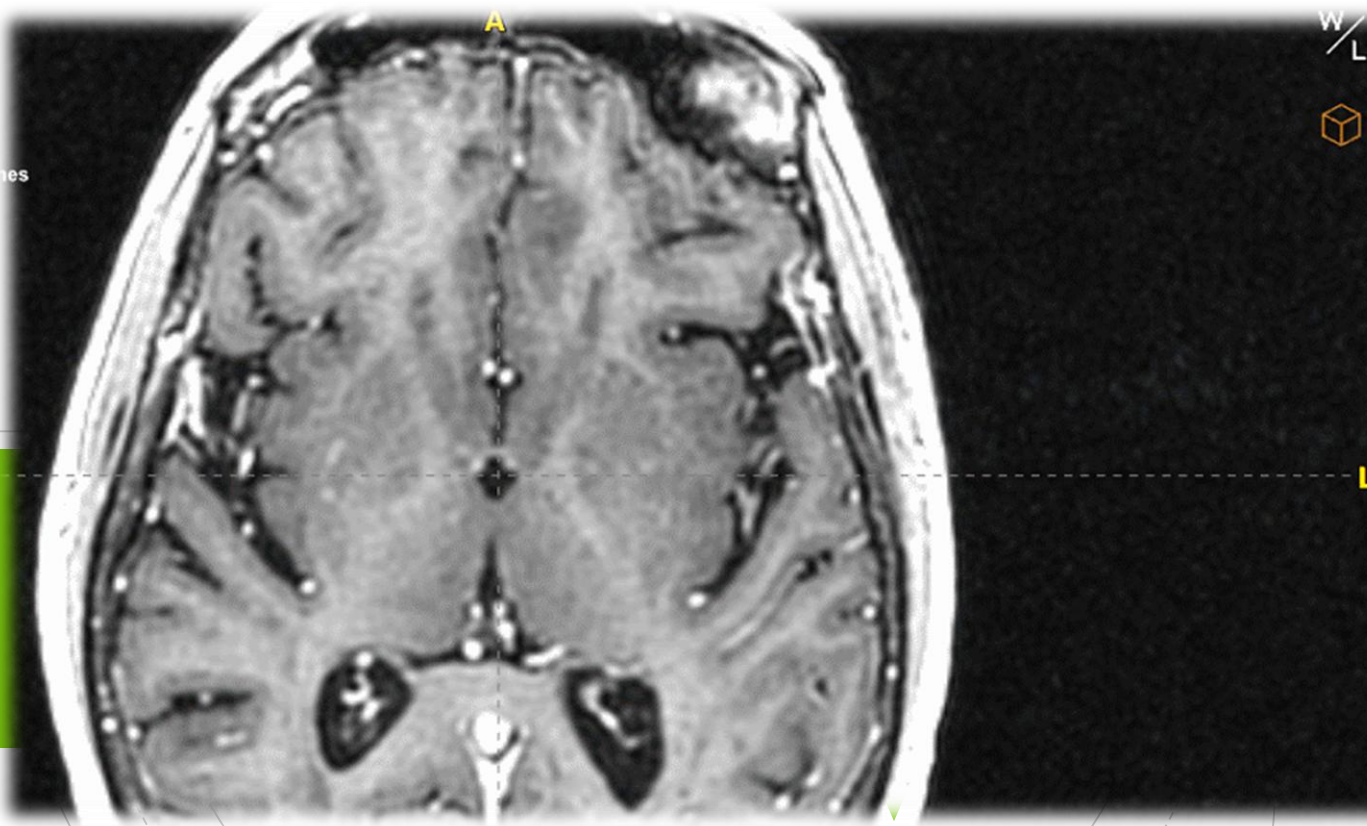


VD 0-59, SD 0-29      VD 0-76, SD 0-63      VD 0-91, SD 0-75

- Clinical
- AI
- Eight experts

**Autocontouring: failure modes**

# Autocontouring: brain



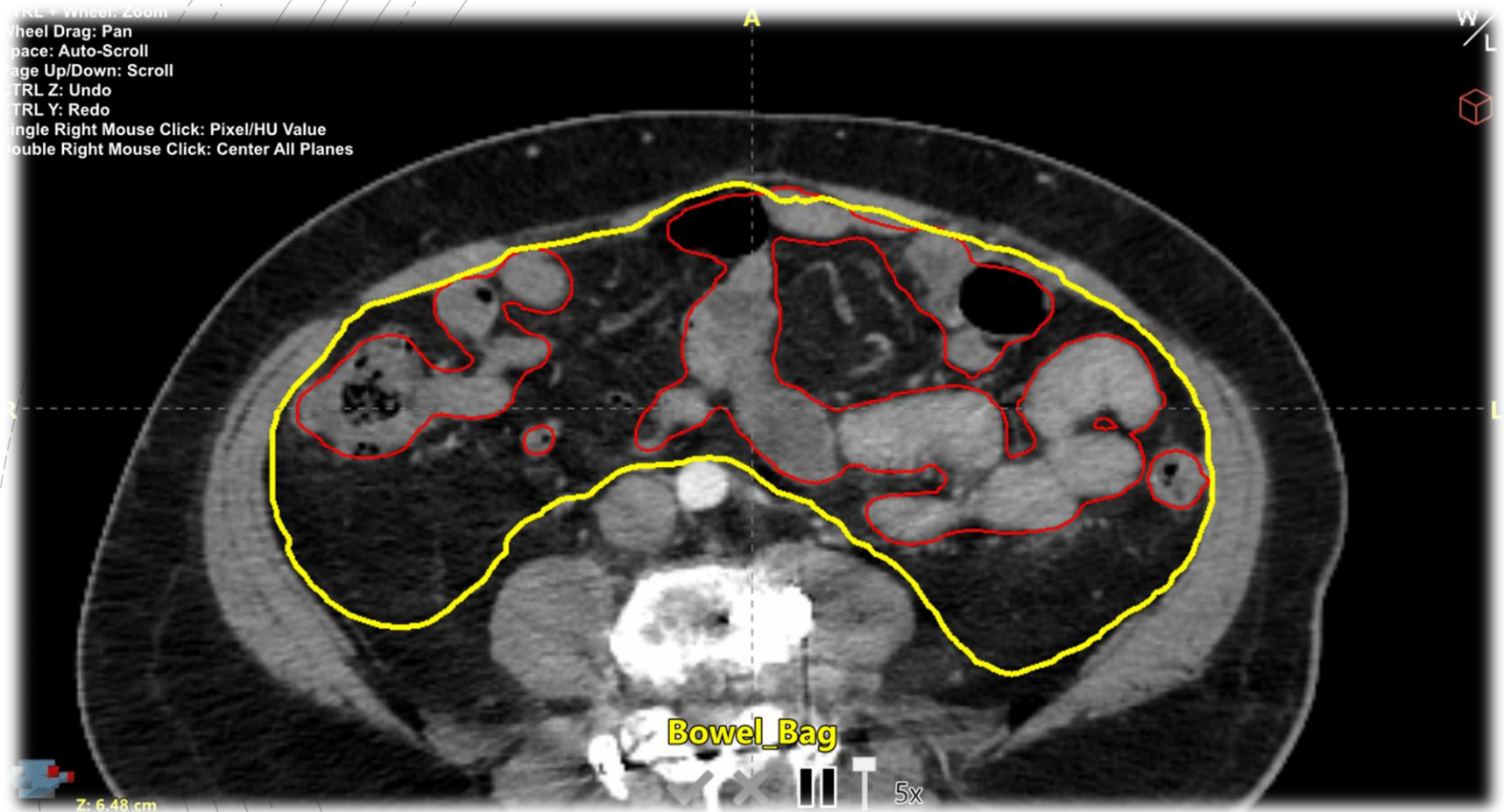
Brain MR Template

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<input checked="" type="checkbox"/>	Hypo_True
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<input checked="" type="checkbox"/>	OpticNrv_R
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<input checked="" type="checkbox"/>	Pituitary

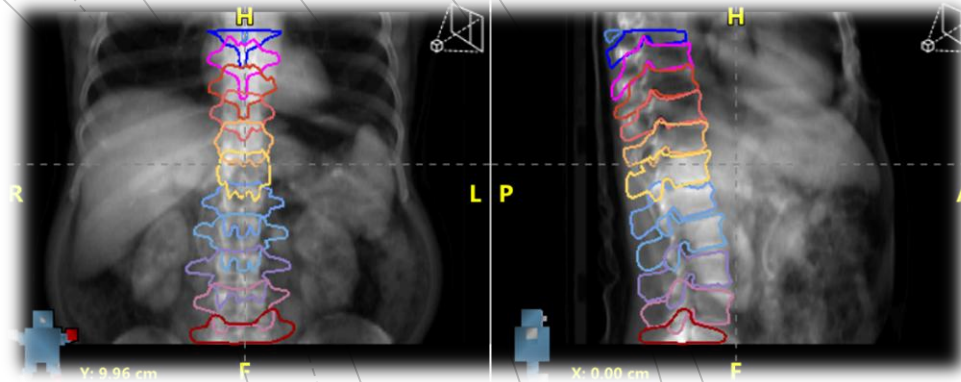
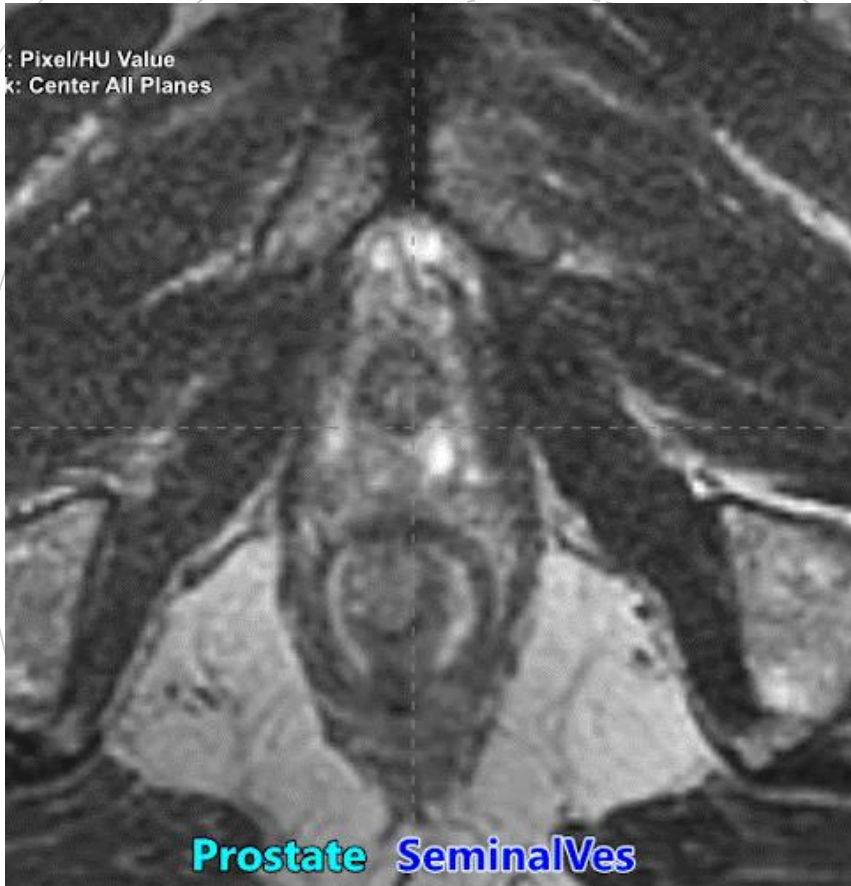
+ [document icon] [trash icon]

# Autocontouring: abdomen

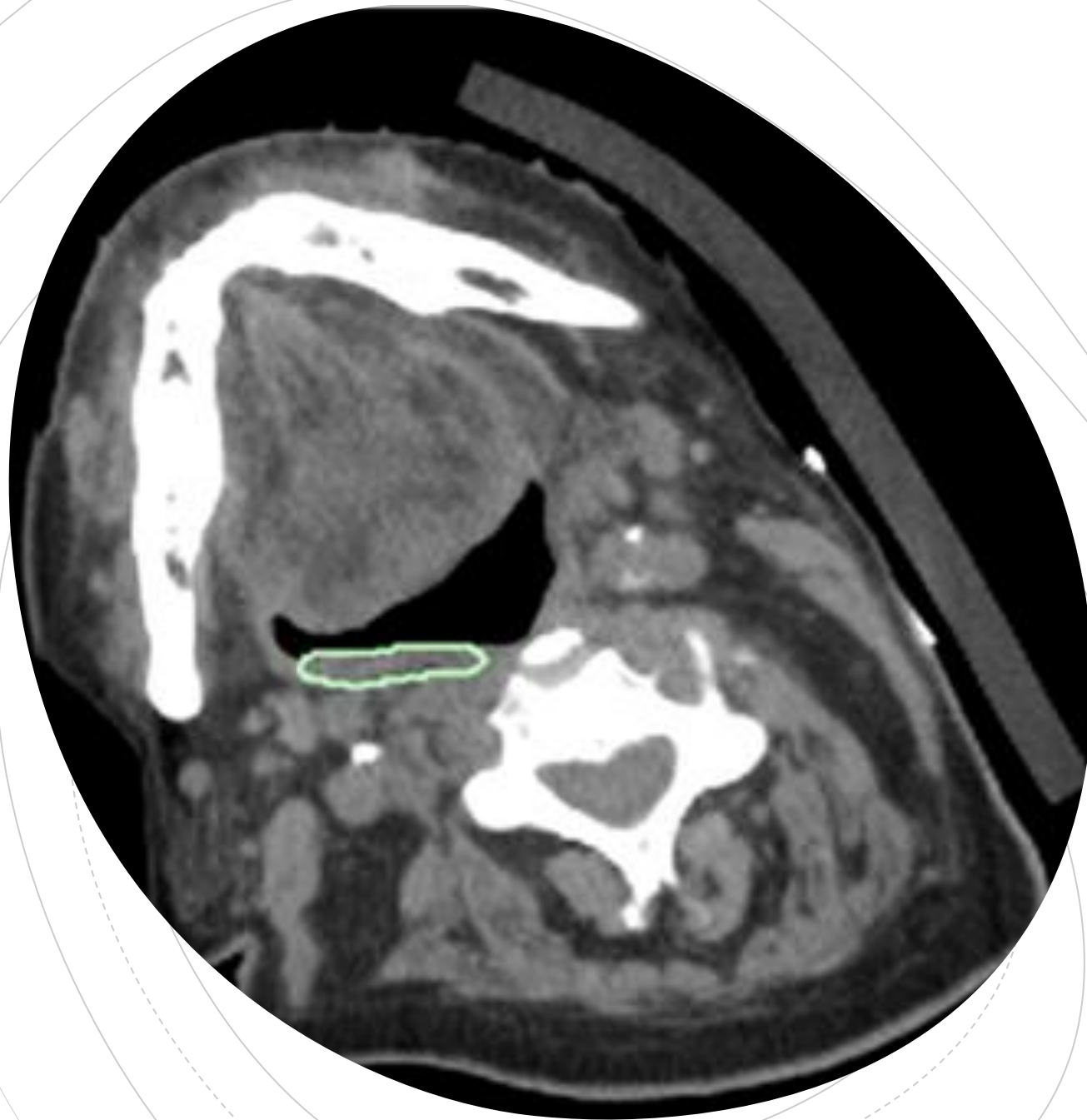
CTRL + Wheel: Zoom  
Wheel Drag: Pan  
Space: Auto-Scroll  
Page Up/Down: Scroll  
CTRL Z: Undo  
CTRL Y: Redo  
Single Right Mouse Click: Pixel/HU Value  
Double Right Mouse Click: Center All Planes



# Autocontouring: MRI, DRR



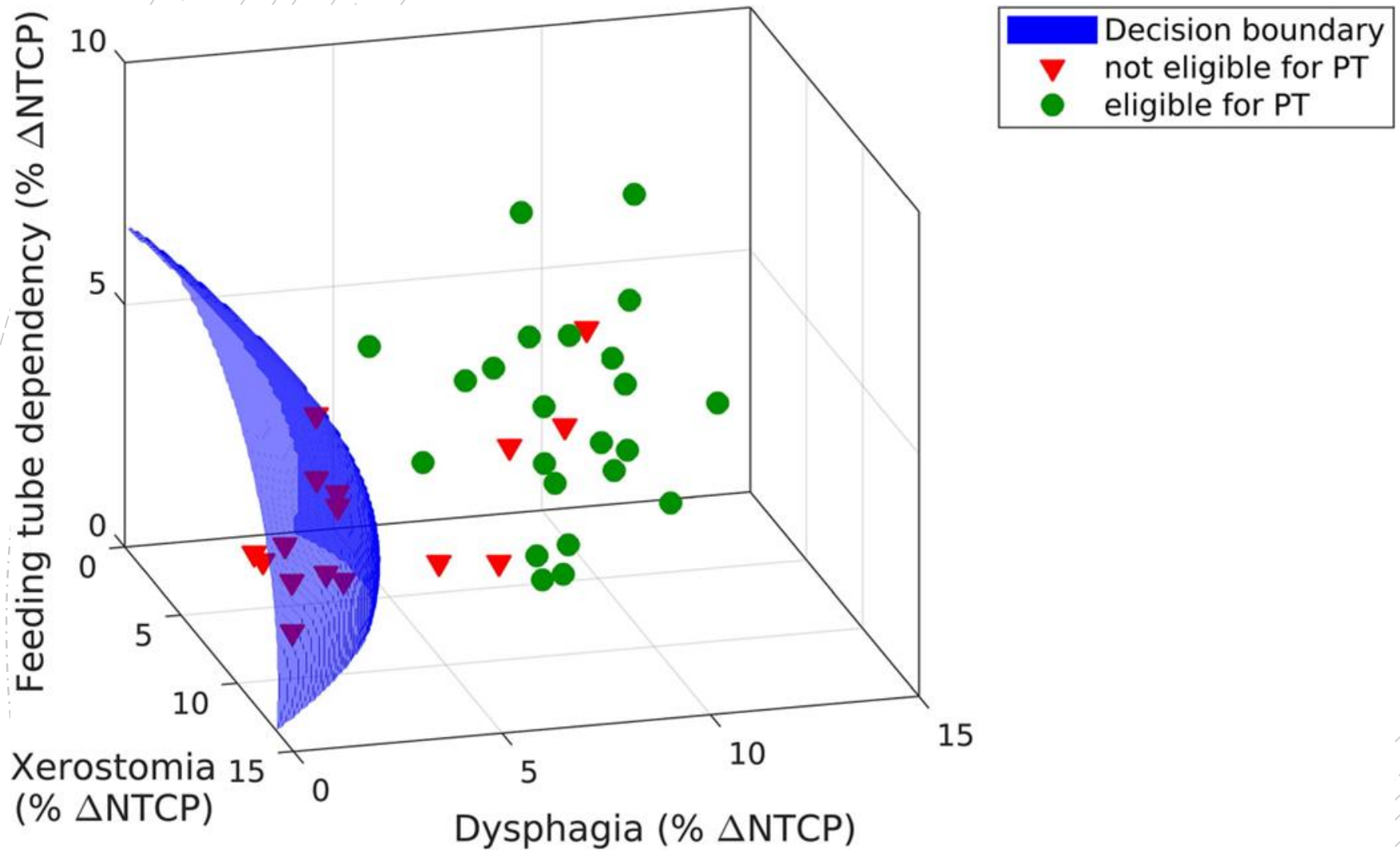




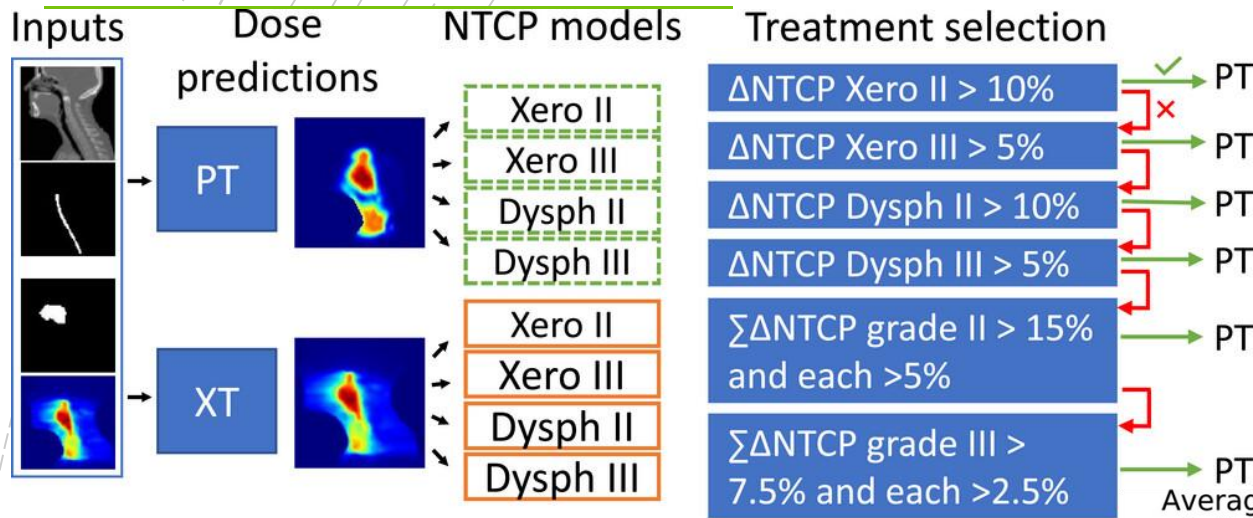
pharyngeal constrictor  
muscle in wrong place

**Michael Gensheimer**  
**@MFGensheimer**

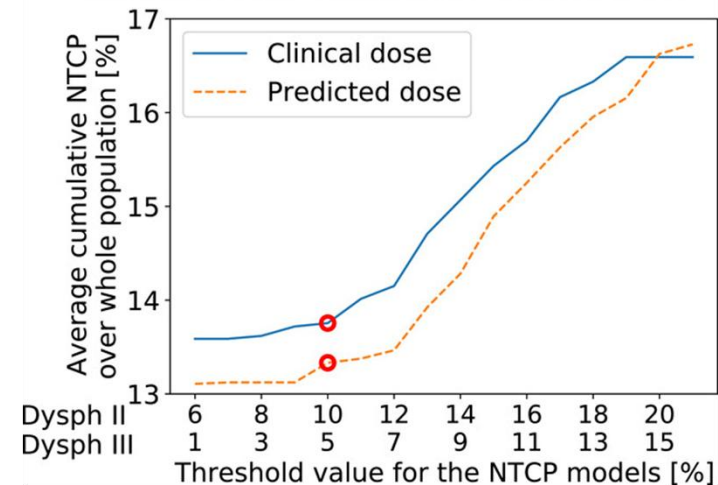
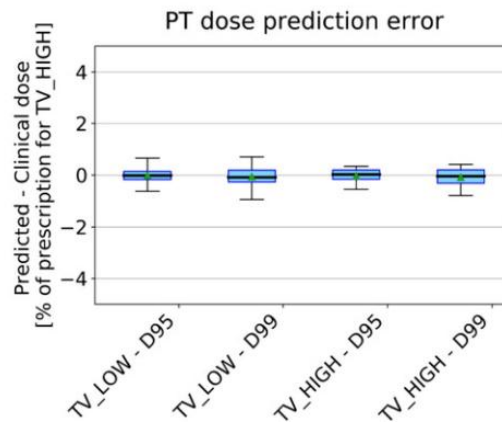
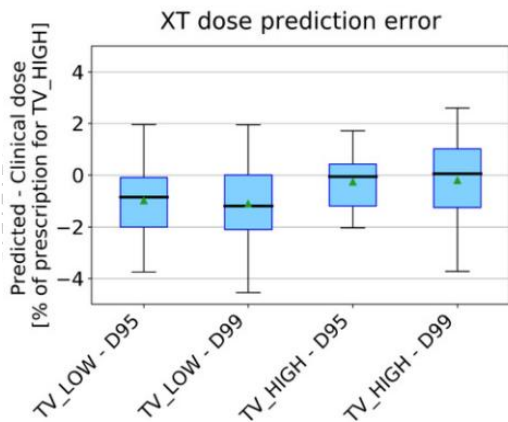
# Patient selection for proton therapy



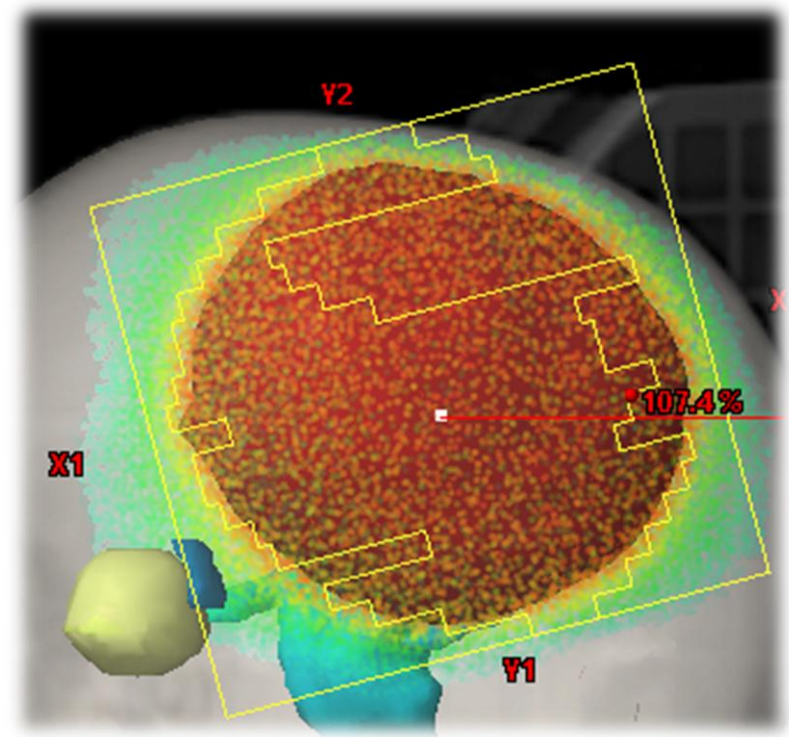
# Patient selection for proton therapy



Average cumulative NTCP using the treatment indication with clinical and predicted doses

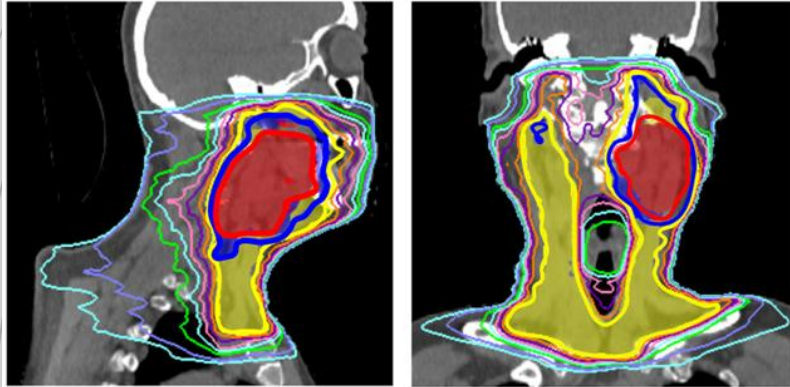


# Radiotherapy treatment planning

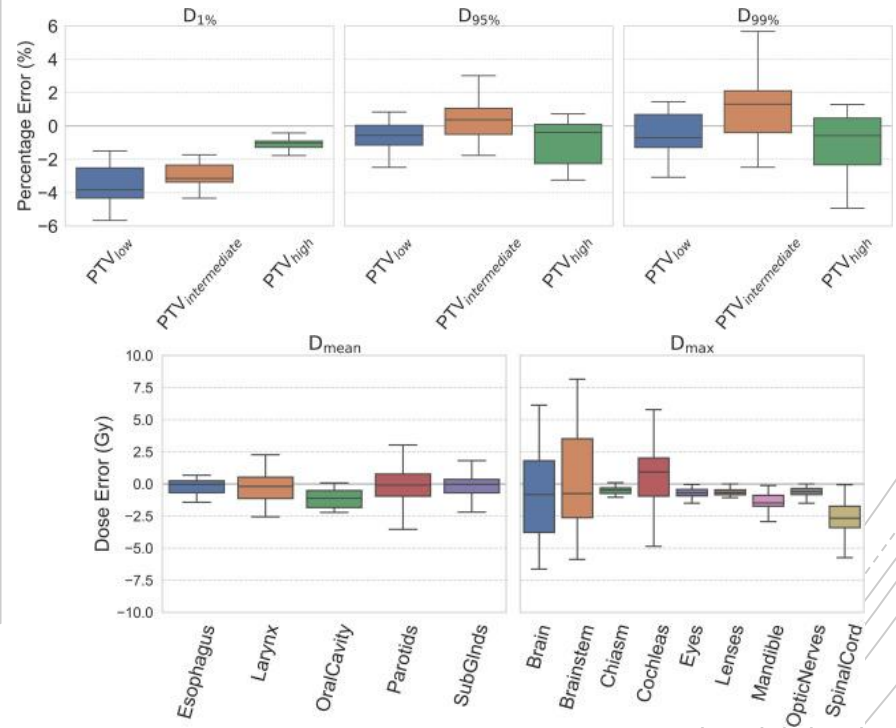
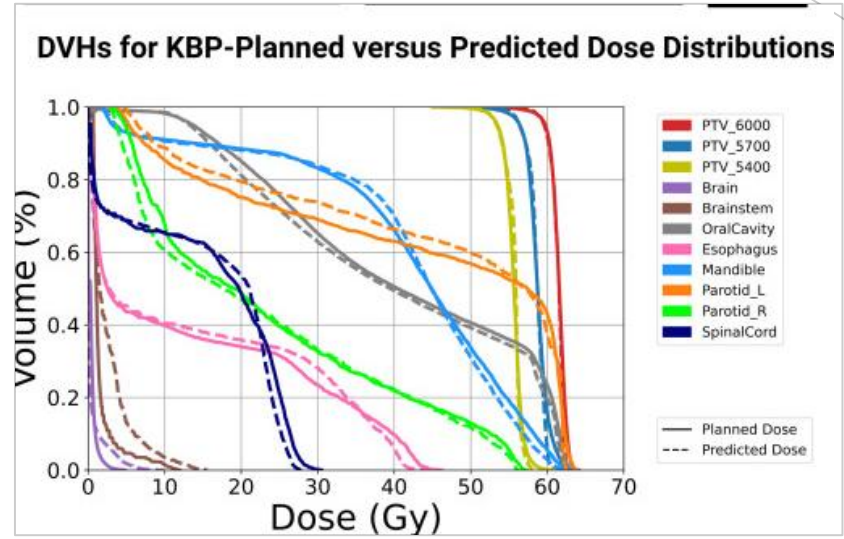
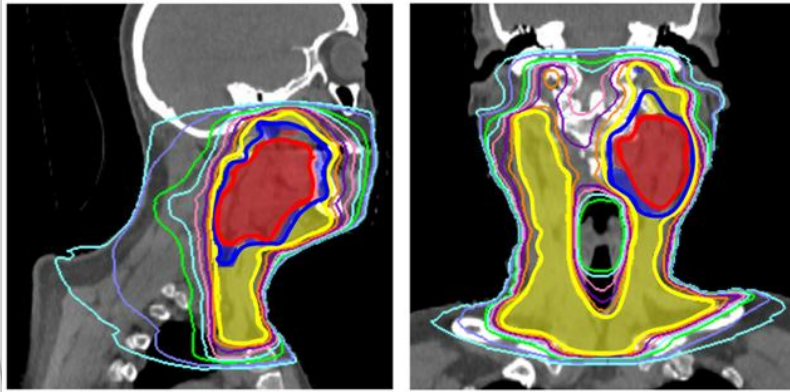


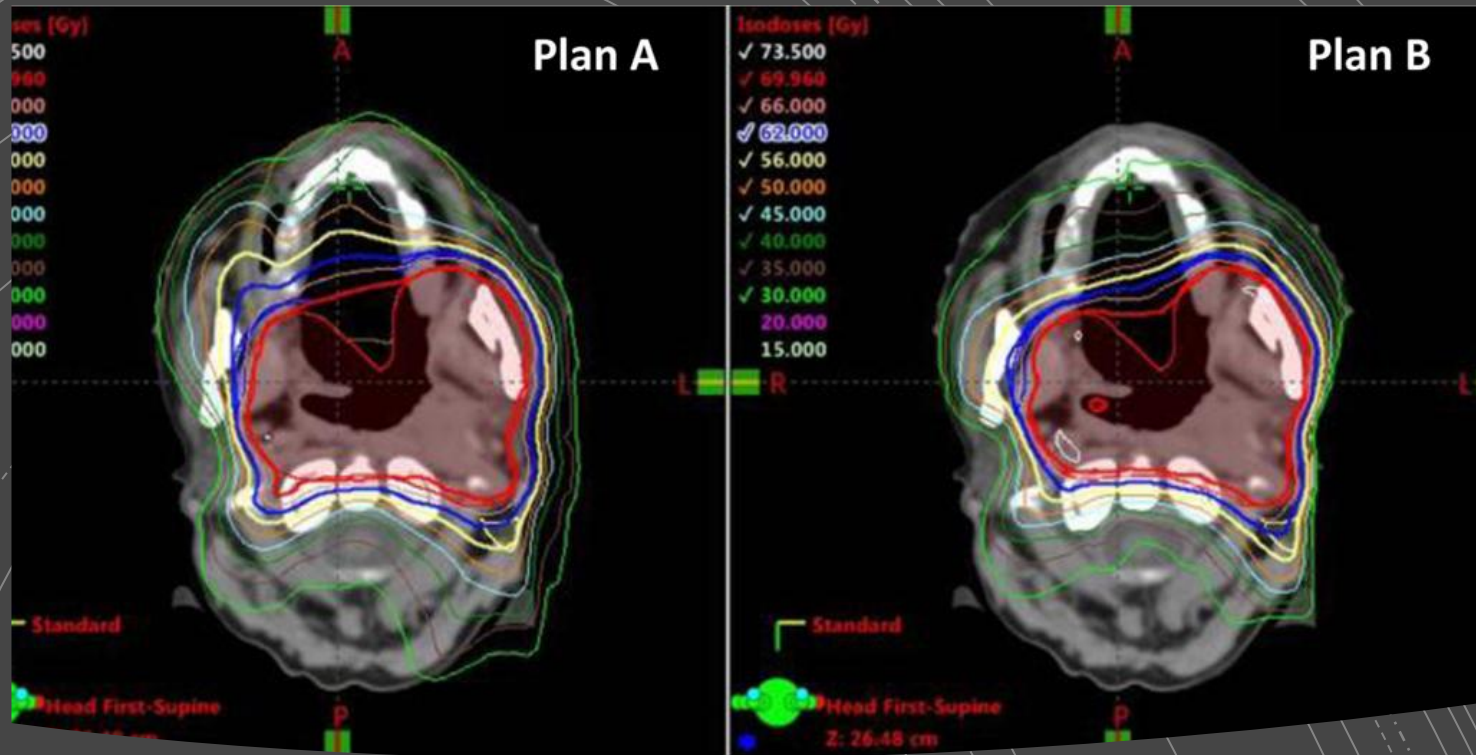
# Dose prediction

**KBP-Planned Dose**



**Predicted Dose**

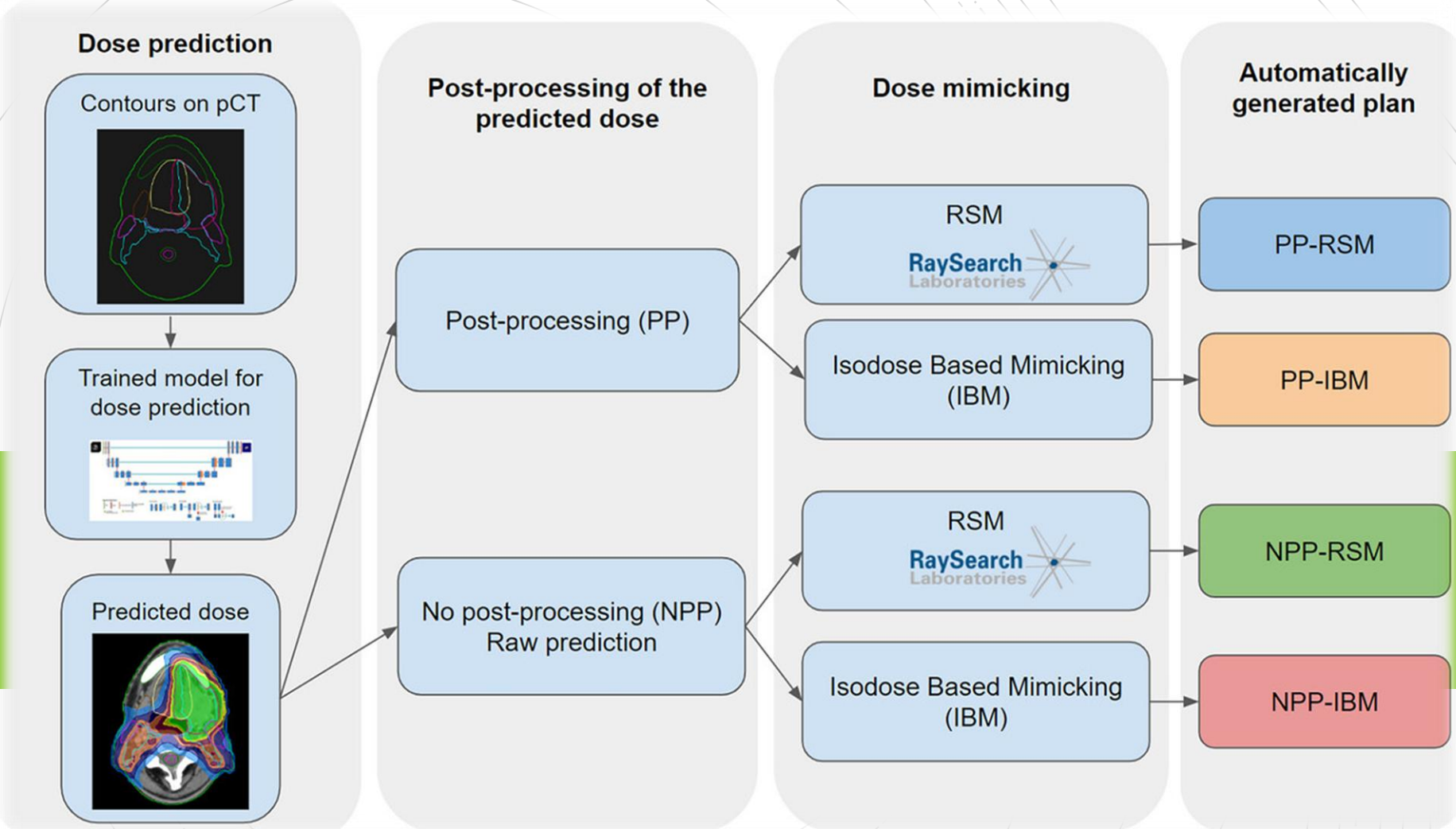




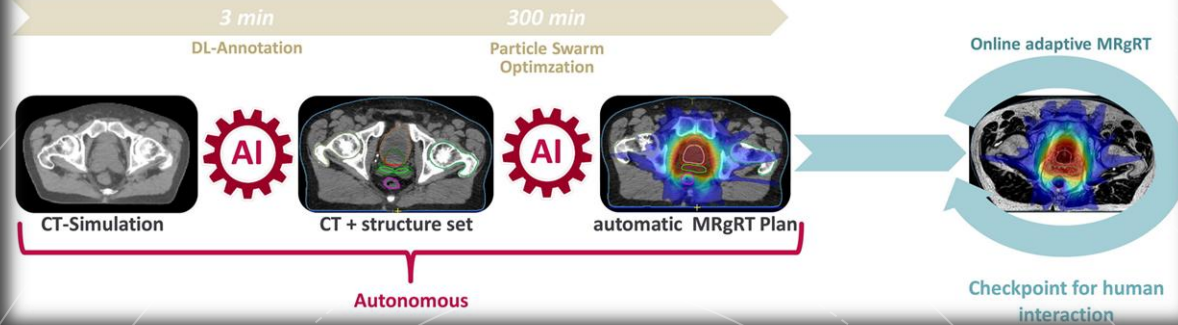
## Automated planning

- Figure clinical plan vs auto-plan. Both were judged to be acceptable plans, with preference for the auto-plan based on reduced dose to the oral cavity and posterior neck.

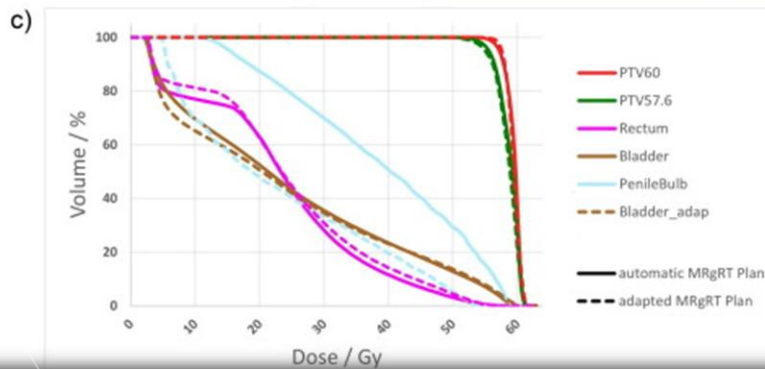
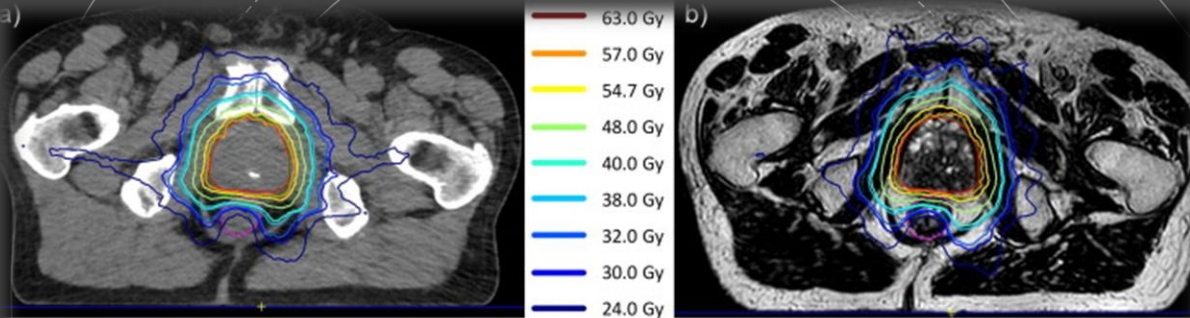
# Dose prediction/autoplanning



## Autonomous, un-supervised planning pipeline



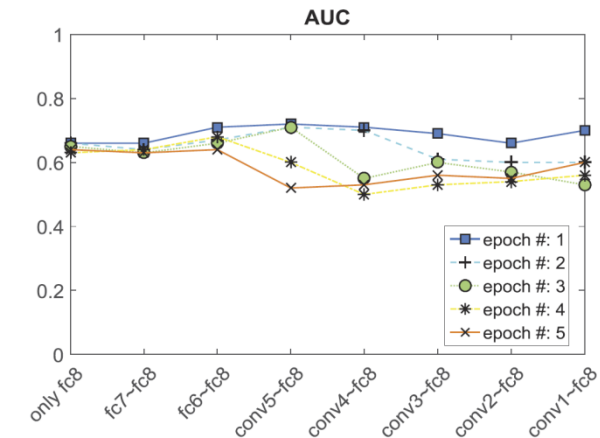
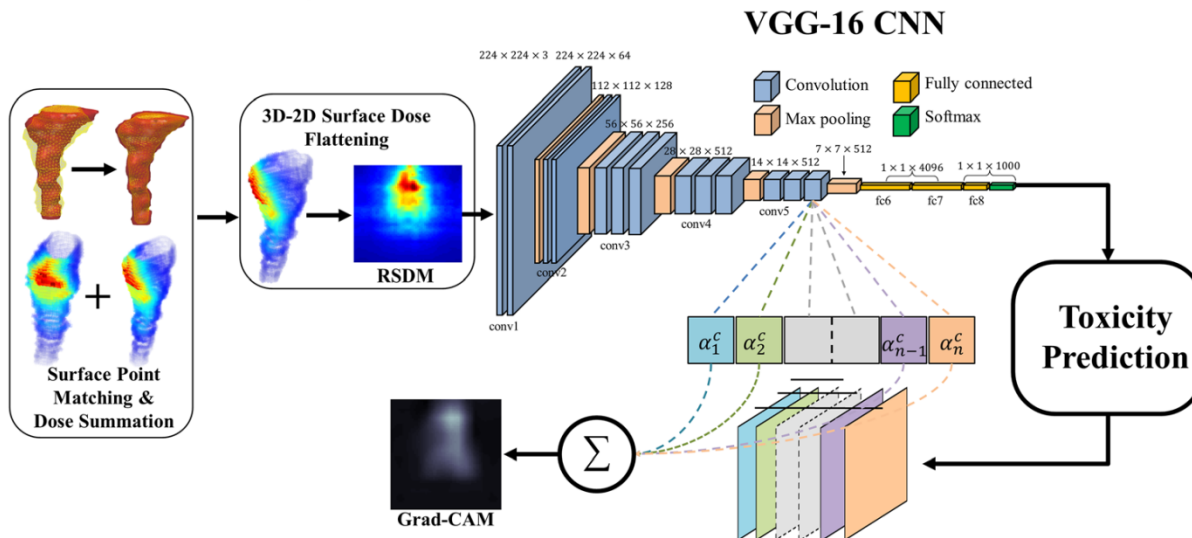
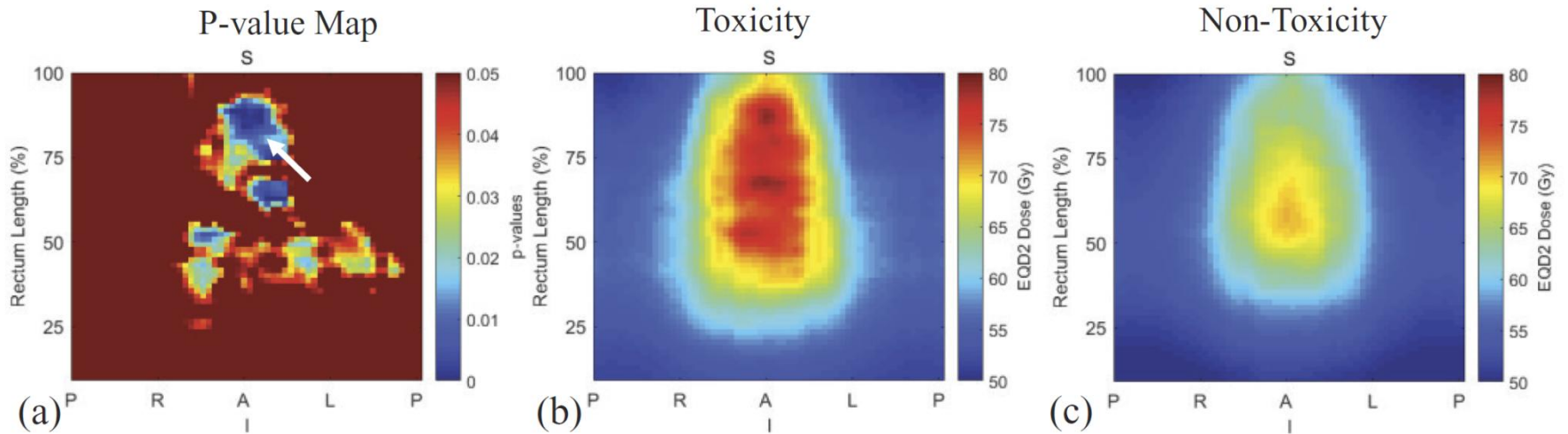
# Fully automated RT workflow



- Autonomous plan generation, including OAR segmentation, target generation and optimization
- First checkpoint for human interaction at the time of clinical online adaptation at the MR-Linac.

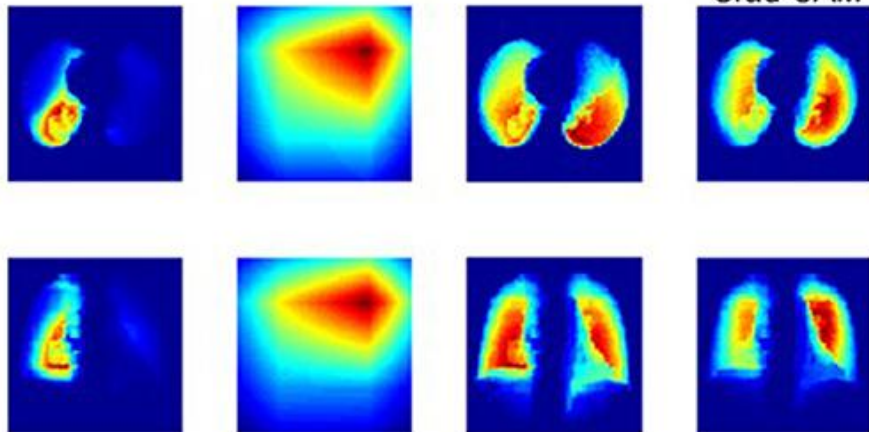


# Prediction of acute toxicity to the rectum

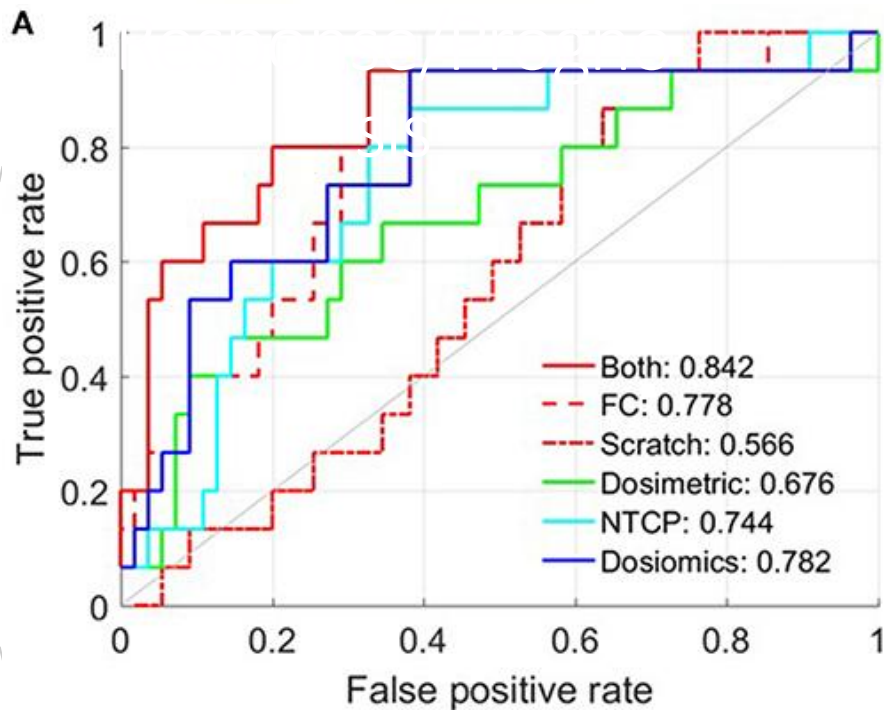
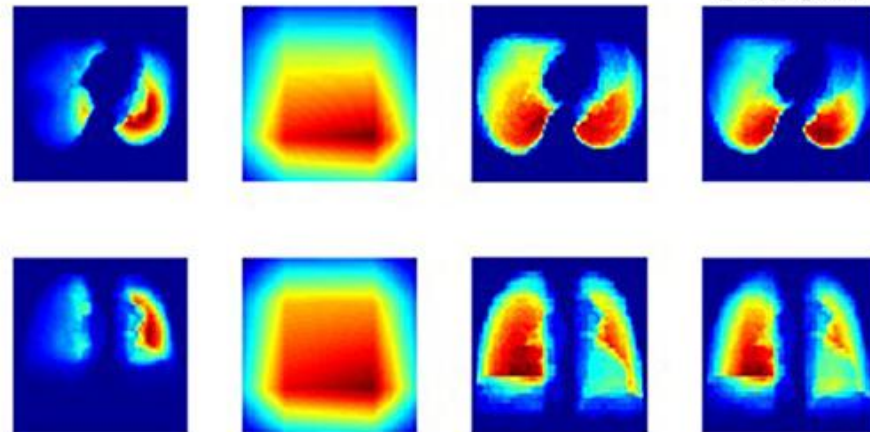


**A**

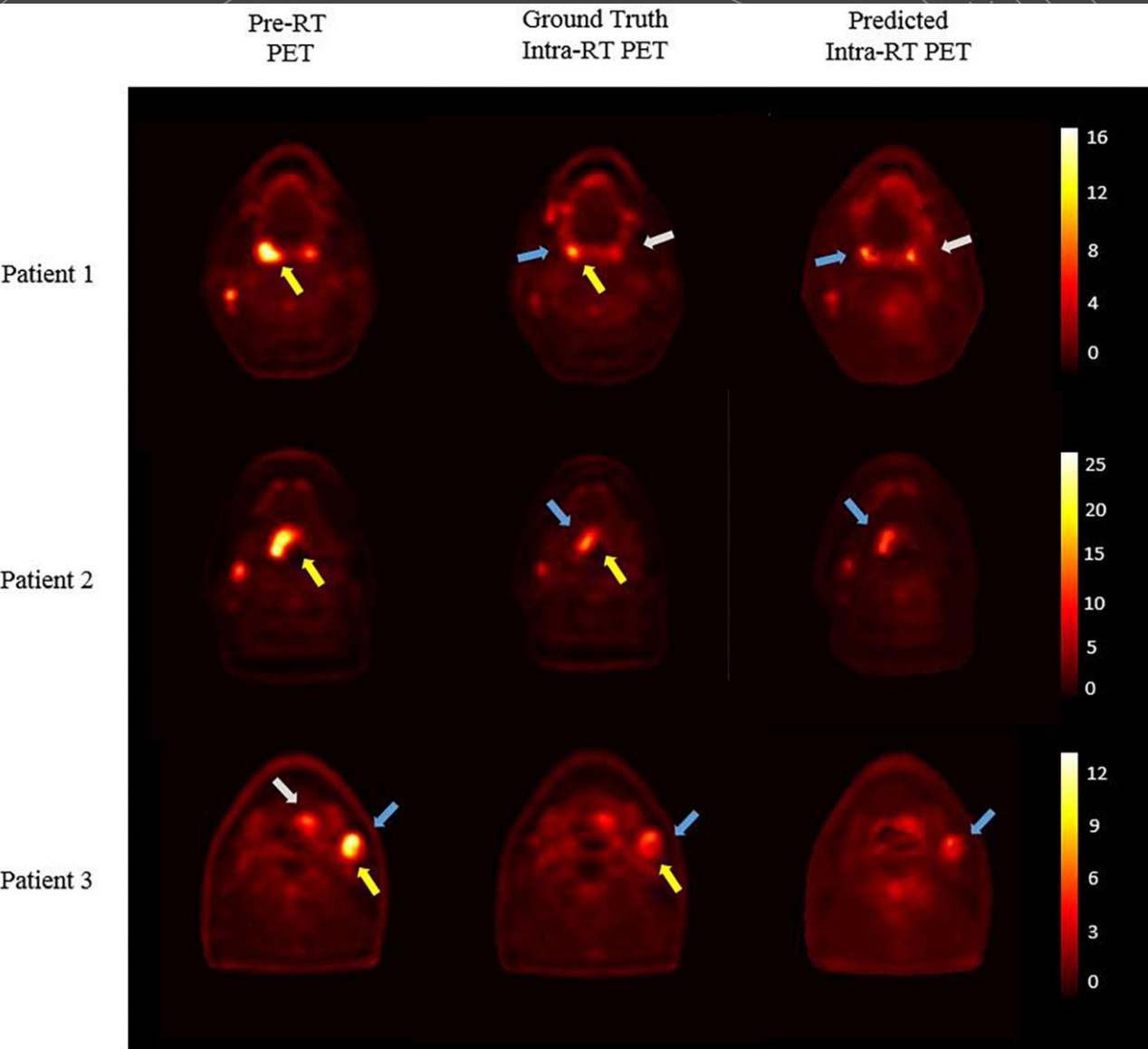
Dose      Grad-CAM      Global GB      Guided Grad-CAM

**B**

Dose      Grad-CAM      Global GB      Guided Grad-CAM

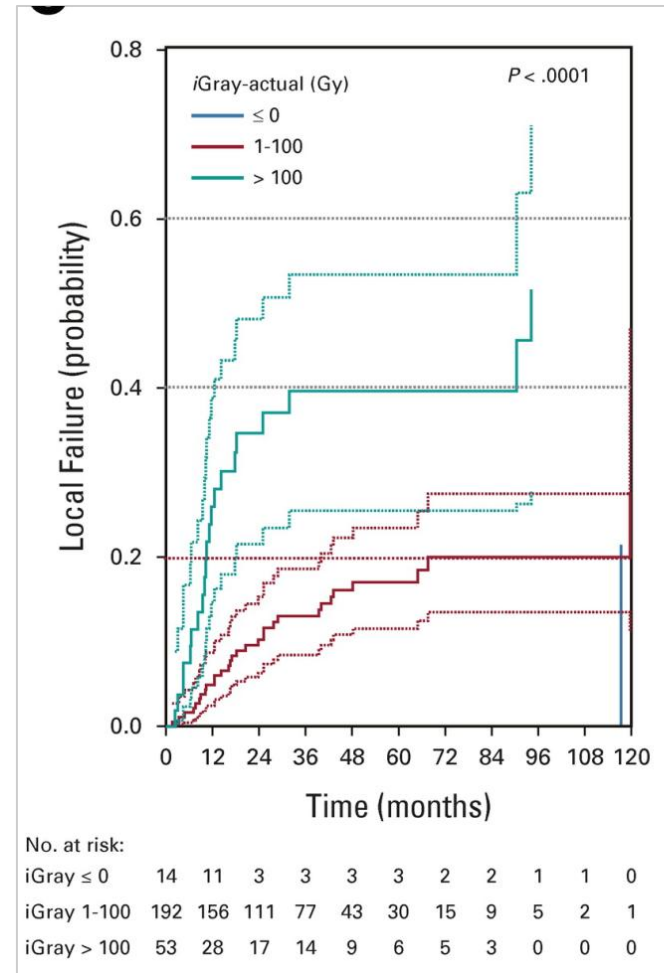
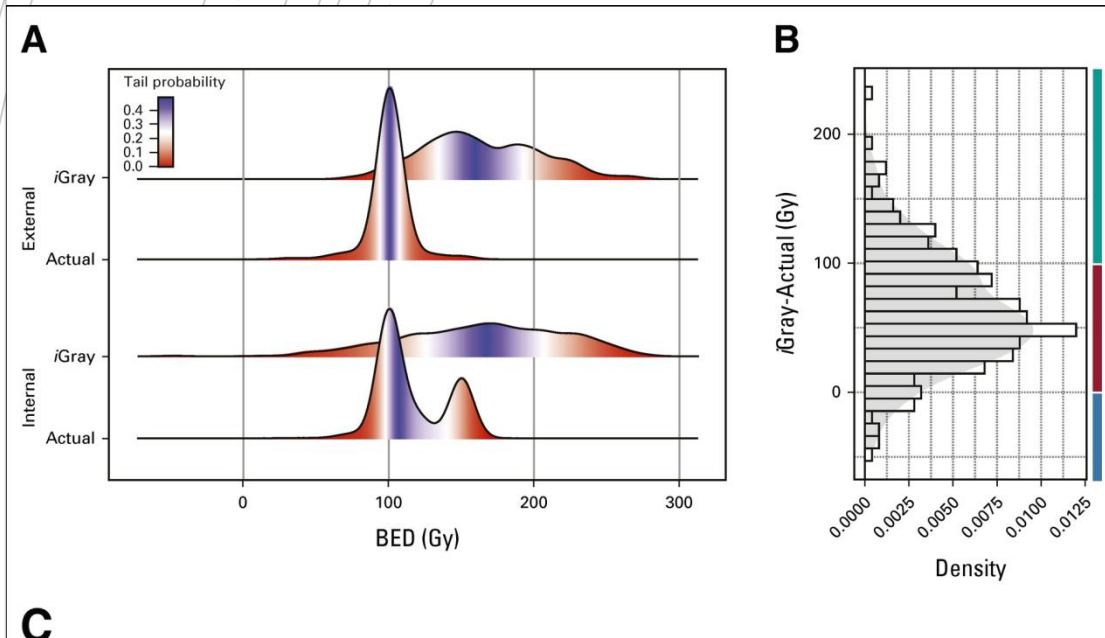


Prediction of  
lung toxicity (fibrosis)



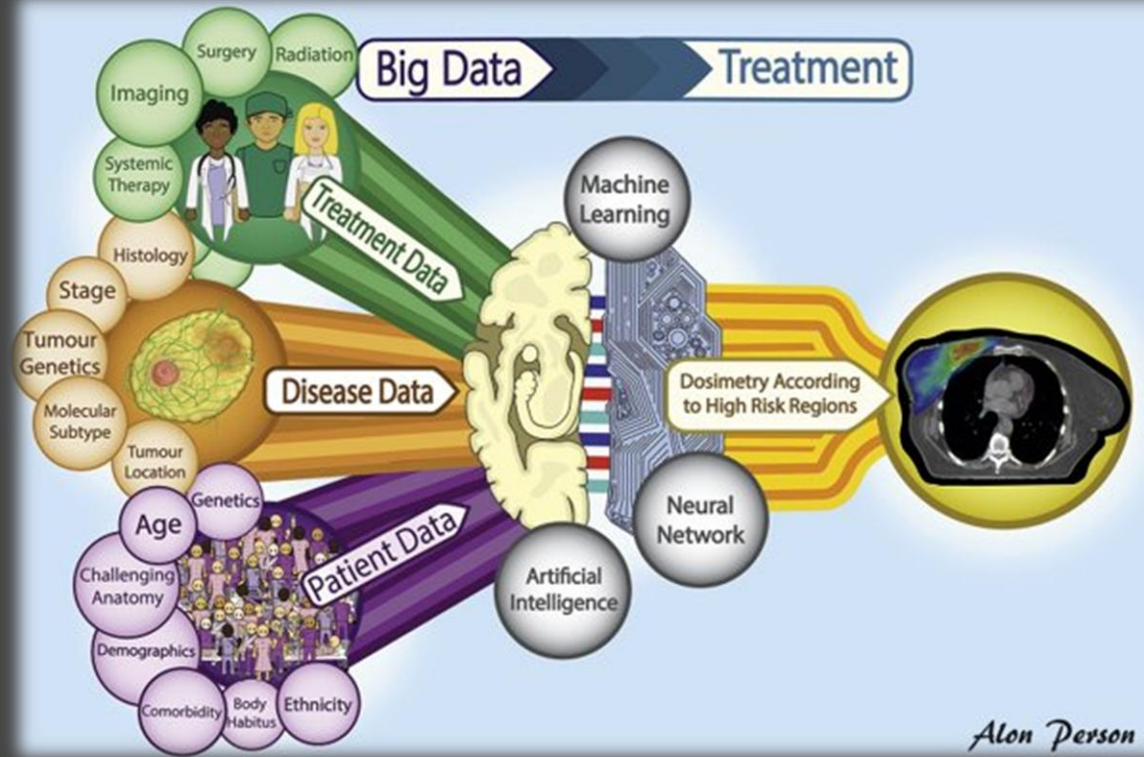
Prediction of tumor response in PET

# Dose prescription

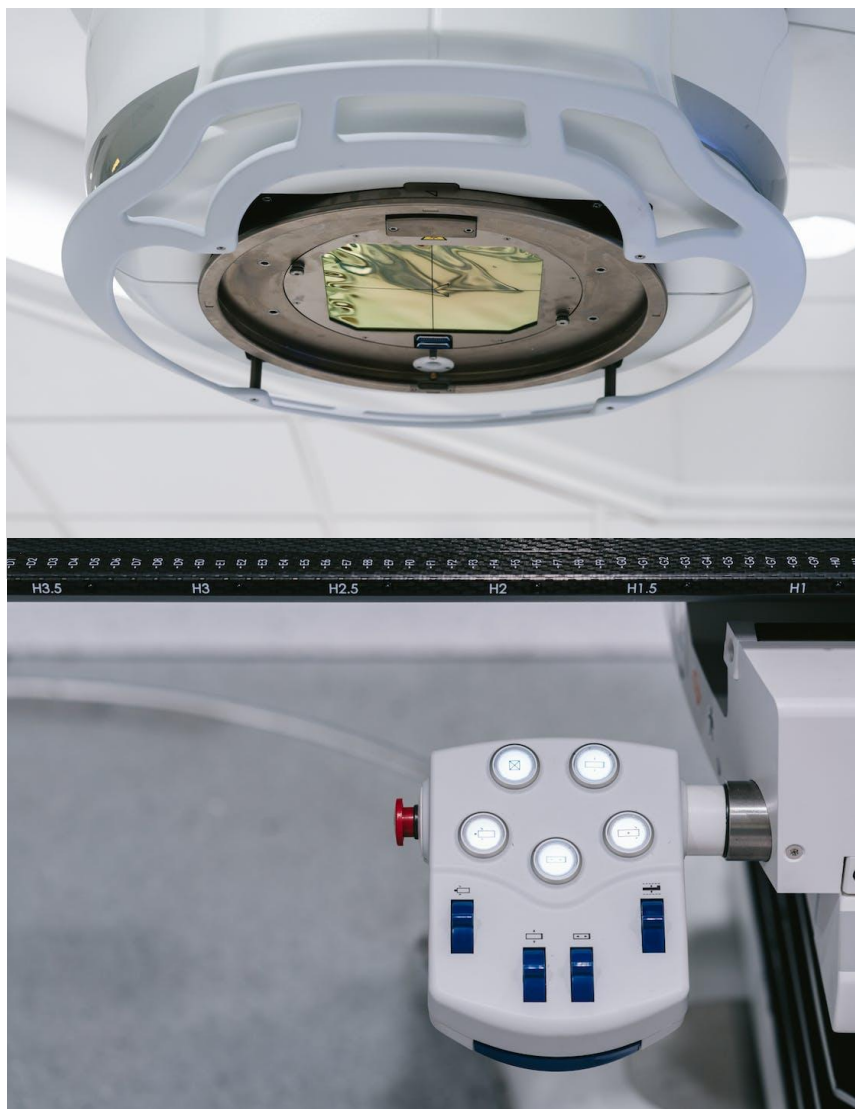


**iGray, an individualized radiation dose estimate that projects a treatment failure probability of  $< 5\%$  at 24 months**

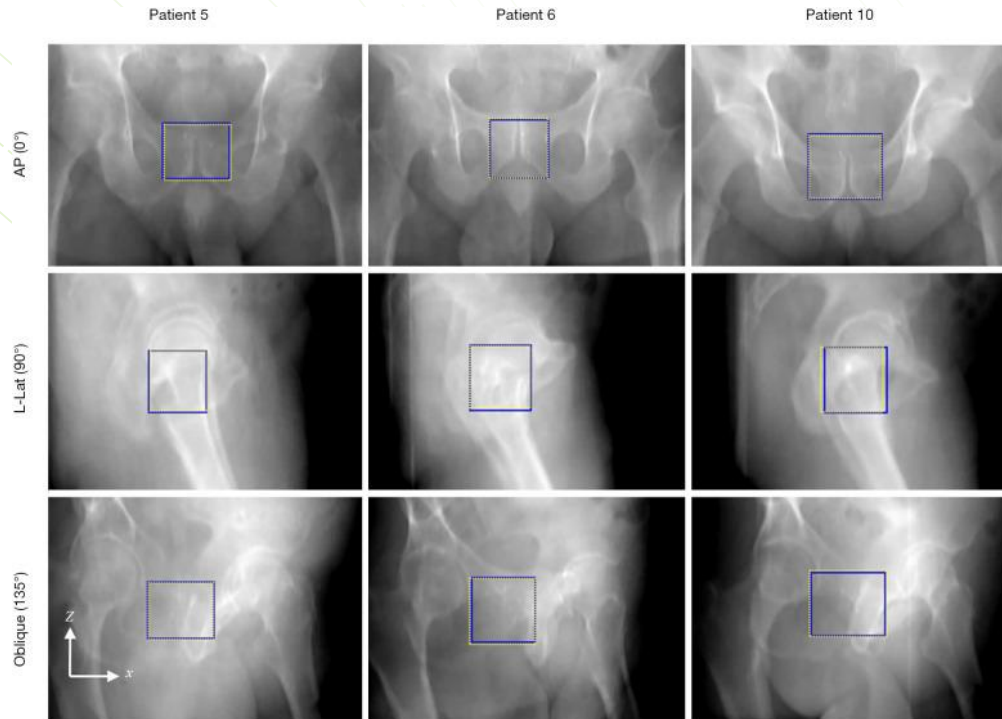
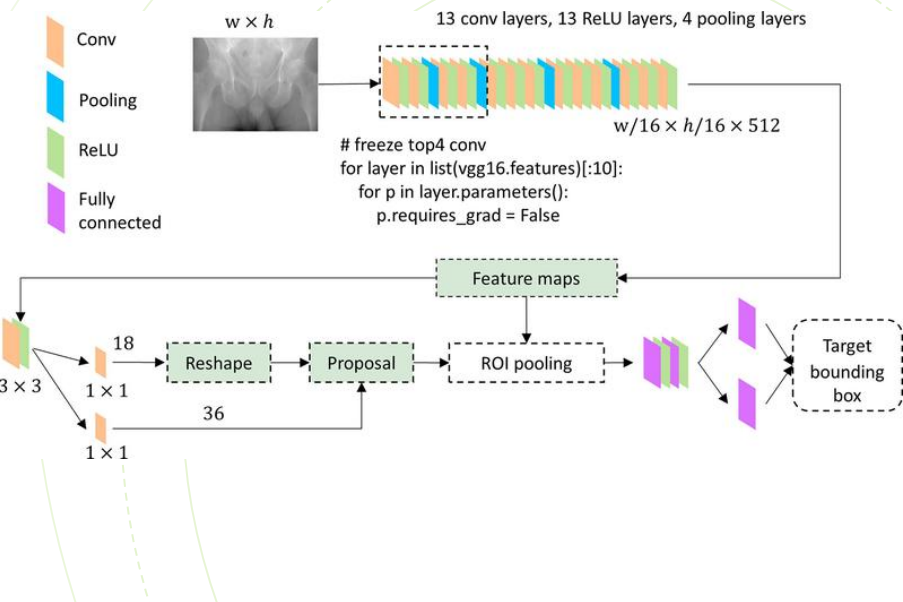
# AI guided treatment



# Radiotherapy treatment delivery



# Target localization for IGRT

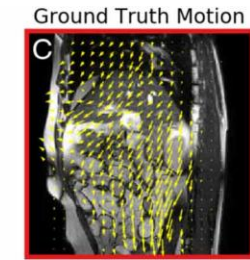
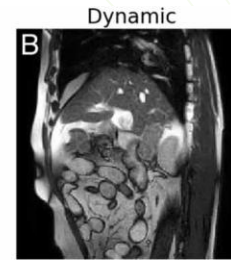
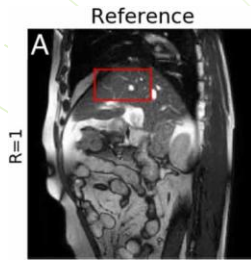
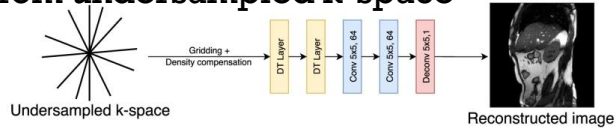


Ground truth     
  Predicted

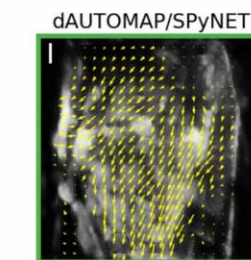
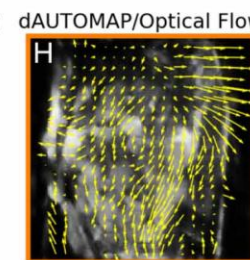
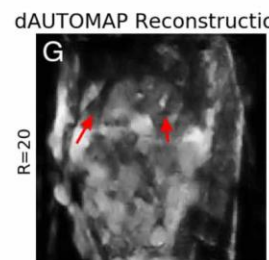
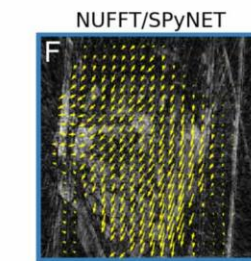
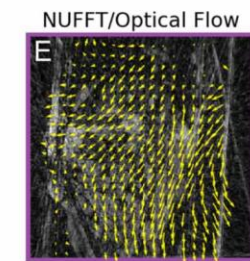
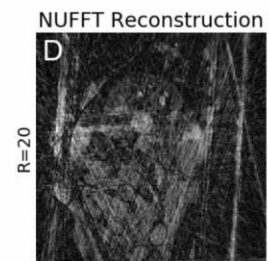
# Deformable image registration

## ■ GAN

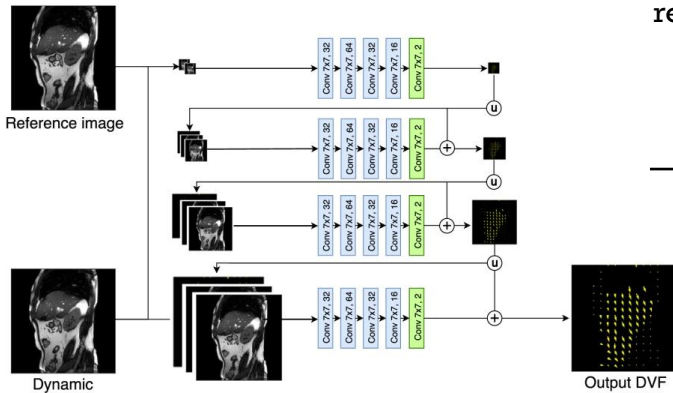
dAUTOMAP: fast image reconstruction from undersampled k-space



## Comparison w traditional methods



	Time (acquisition/ reconstruction/motion (ms))
R=10	100/5/15
R=20	50/5/15
R=25	40/5/15



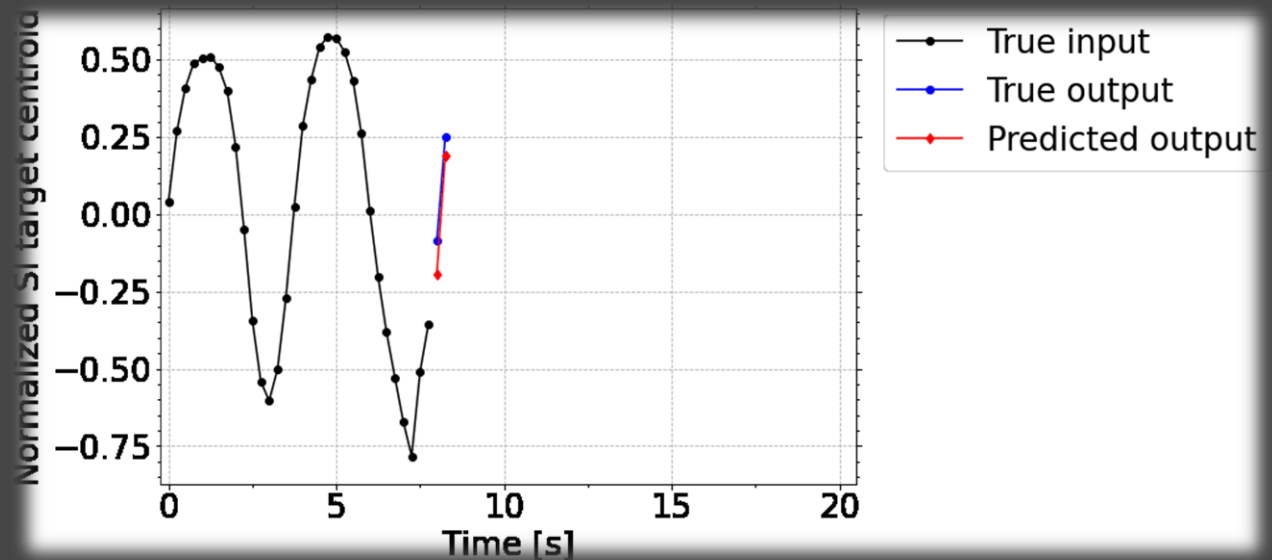
Spynet: CNN motion estimation



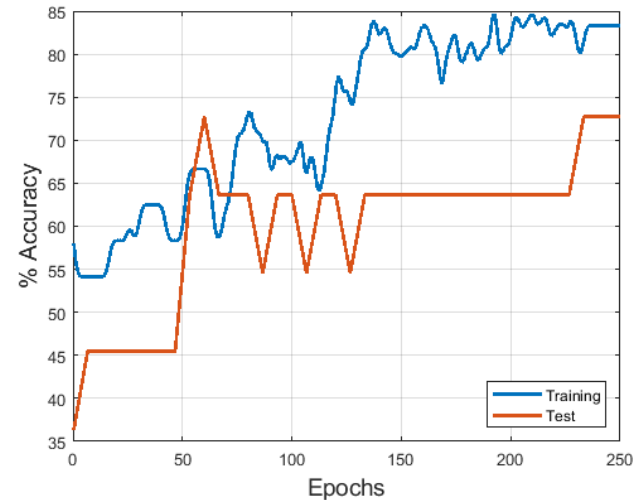
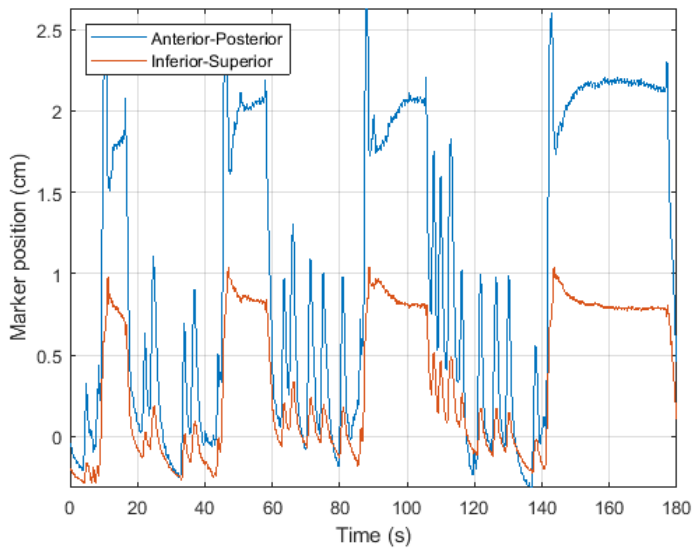
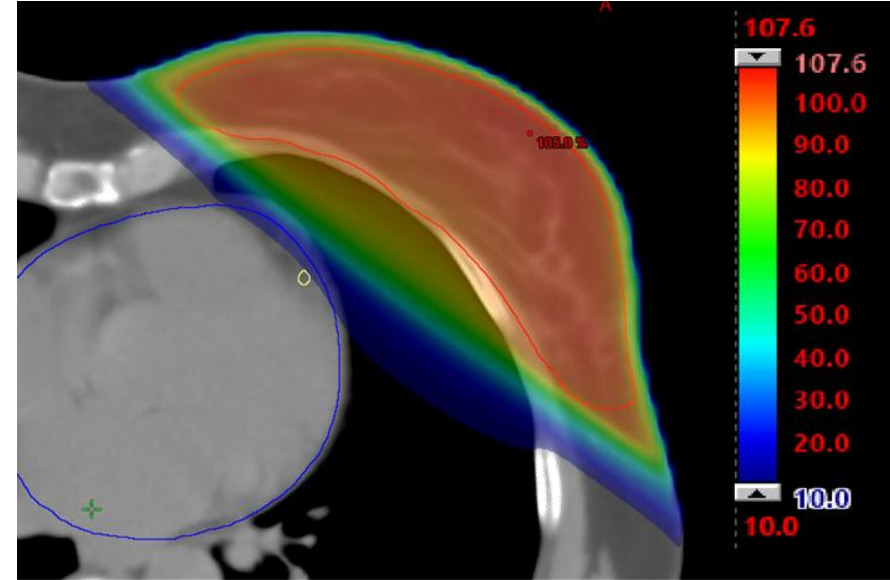
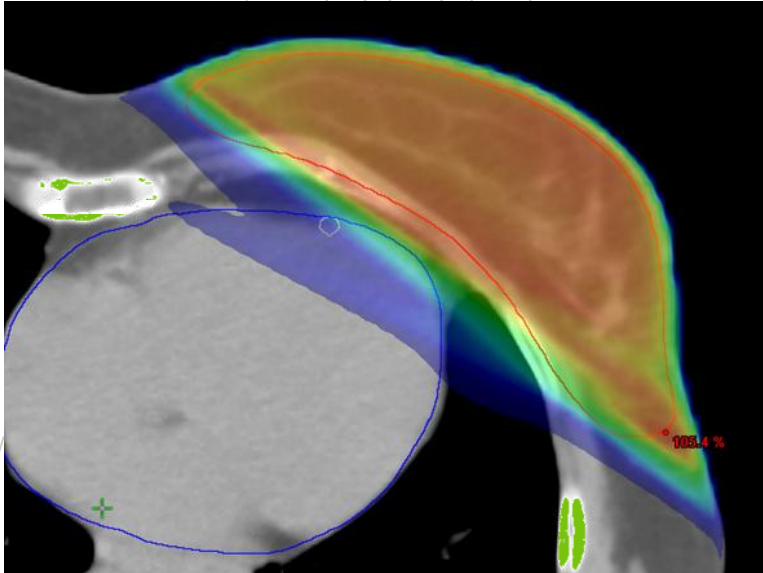
# Tumor Tracking by AI

## Tumor centroid prediction:

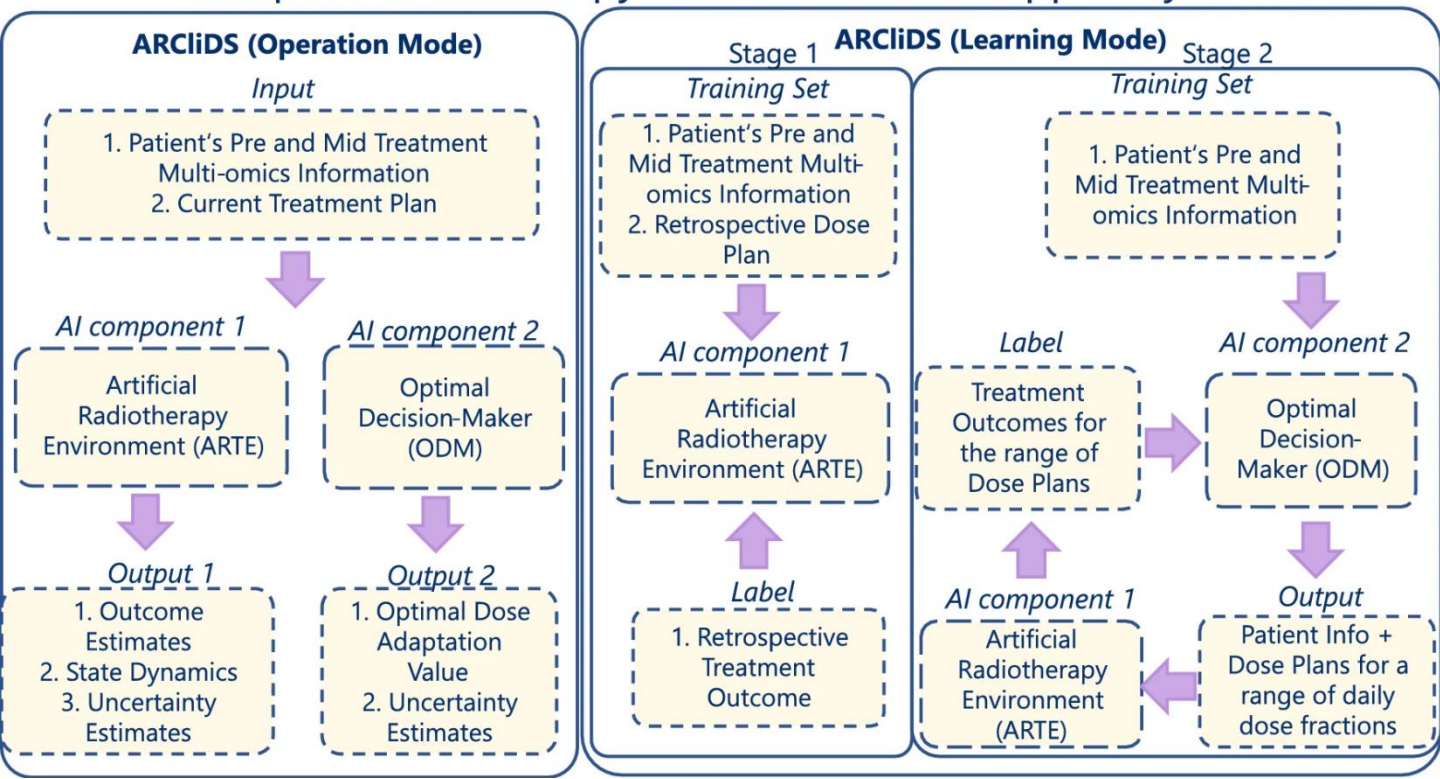
- LSTM (Long Short Term Memory) networks (AI)



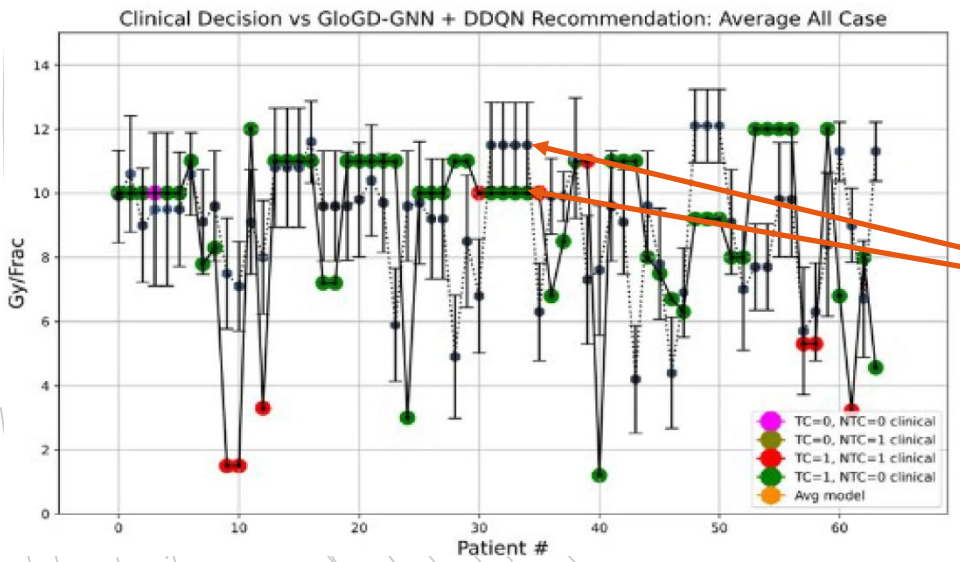
# Patient selection for breath-hold RT



**(b) Adaptive Radiotherapy Clinical Decision Support system**



Treatment adaptation

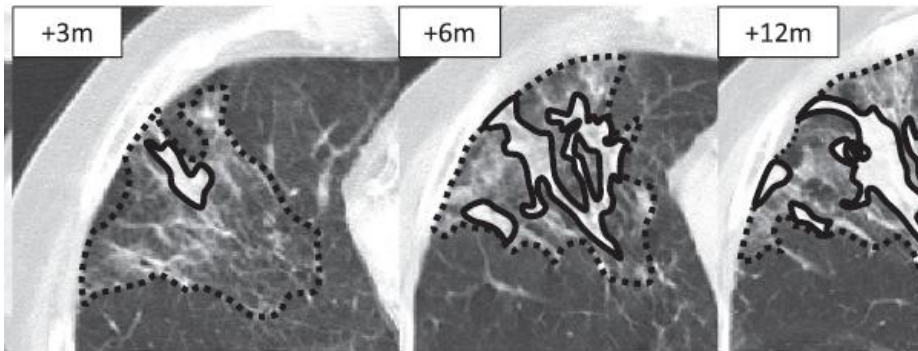


Blue dots = adapted fraction dose by AI  
Other colors = adapted by human

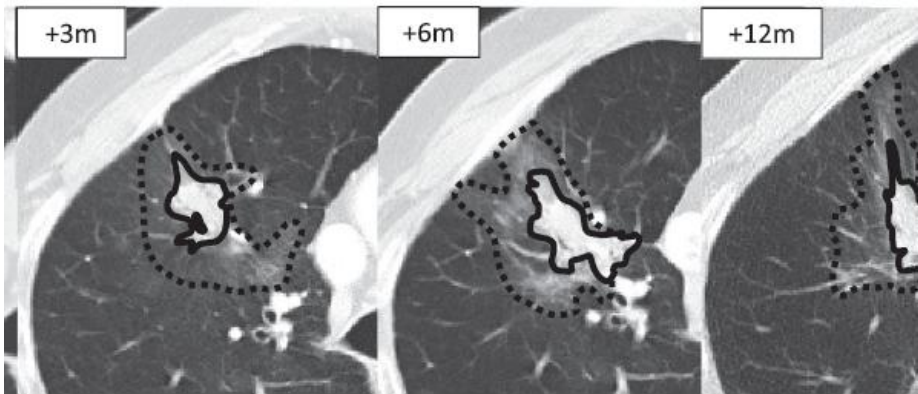
Radiotherapy  
follow-up



## Recurrence



## old lung injury



## Benign changes

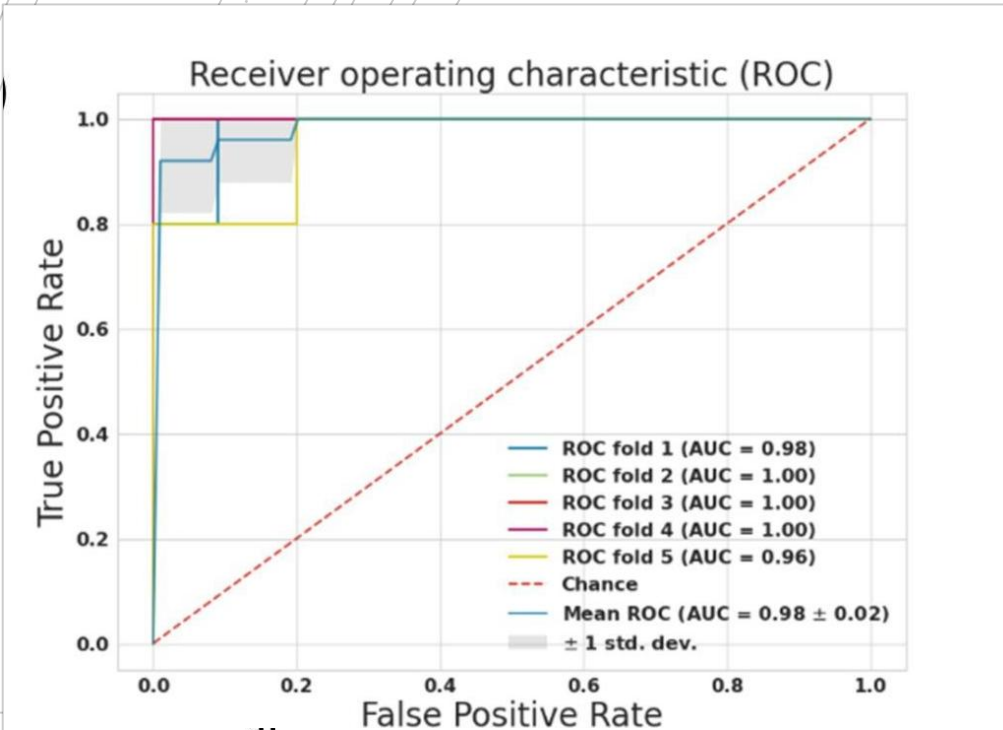
Differentiation of relapse from fibrosis

- Accuracy 76%–77% of radiomic features in cross-validation

# Radiotherapy QA

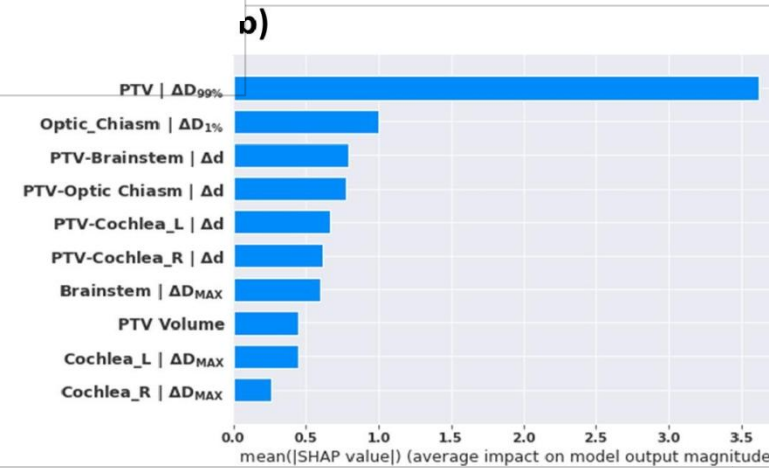
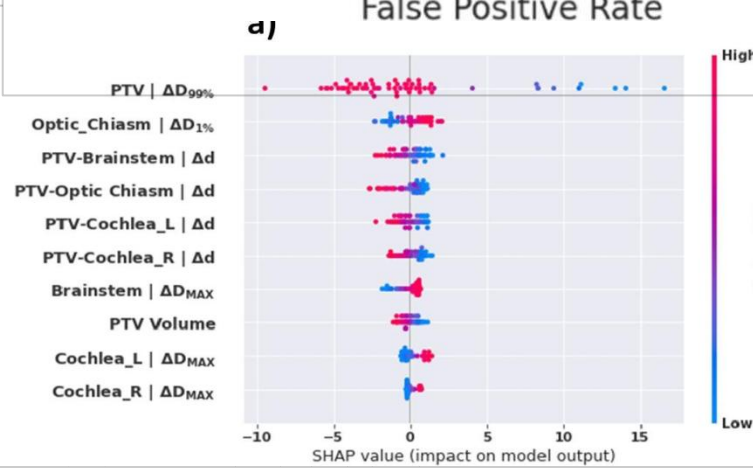


# Automated QA of treatment plans



- class-0 plans for which the PTV objective was met
- class-1 plans for which the PTV objective was not met due to the priority trade-off to meet one or more organs-at-risk constraints.

Siciarz,  
Clinical and Translational  
Radiation Oncology  
 2021

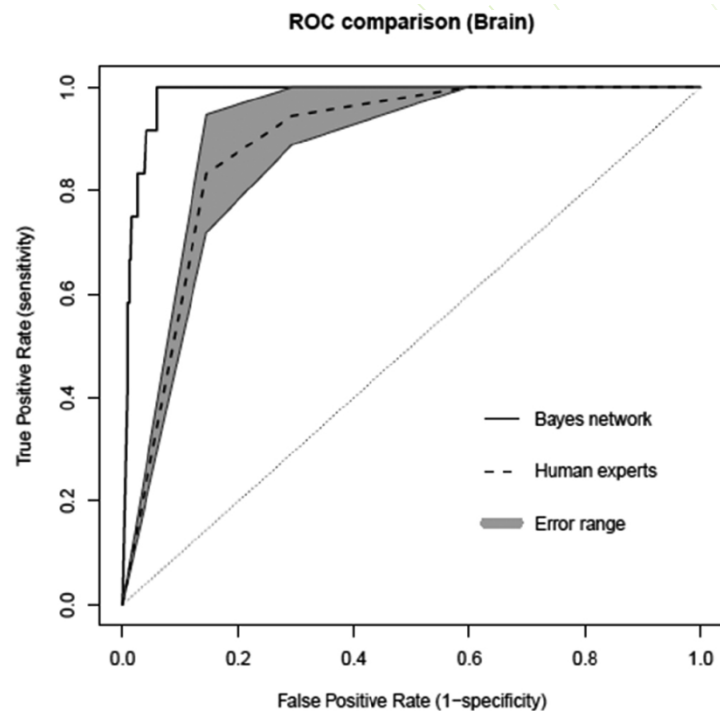


# Quality check of treatment plans

**Table 1.** Example potential error cases.

Tx_Intent (site)	Technique	Modality	Dose_Ttl	Dose_Tx	numFields	Severity
Palliative (Brain)	Conformal Plan	×06	<b>5400</b>	200	6	7
Curative (Brain)	IMRT	×18	6000	200	12	2
Palliative (Breast)	PA	×18	2268	<b>81</b>	2	8

*Note:* Introduced errors are indicated in bold.

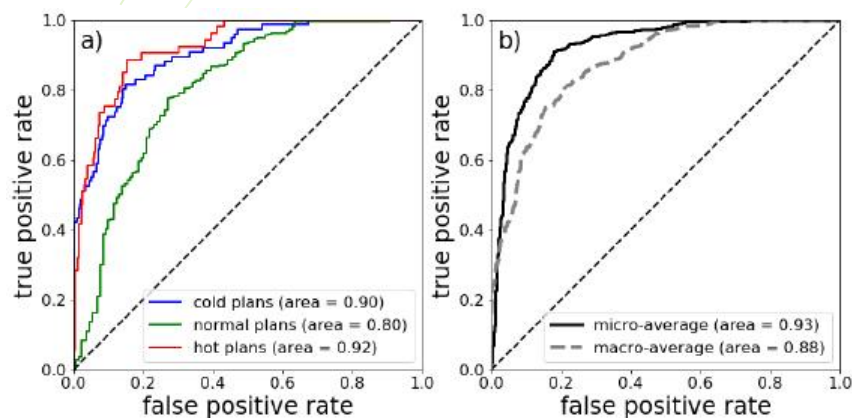




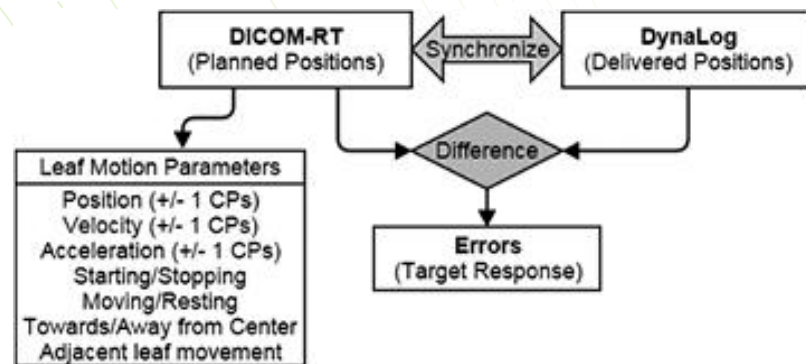
# Automated QA of LINACs by AI

- Prediction of results of Delivery Quality Assurance (DQA) of VMAT

Prediction of Delivery Quality Assurance of VMAT success/failure by ML



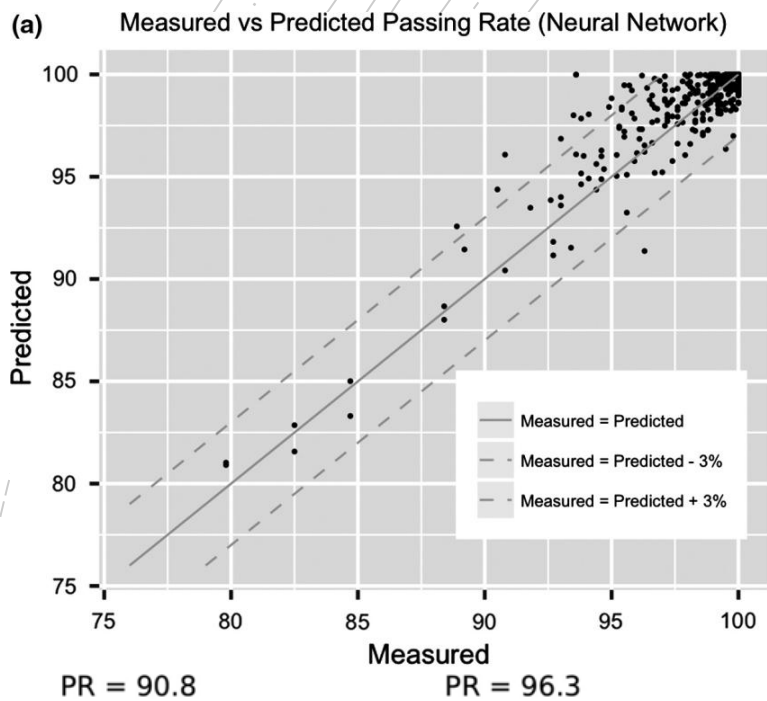
prediction of multi-leaf collimator positional errors  
Using dynalog files



References	QA Source	Data Source	ML Model	Task
Carlson et al. (2016)	DICOM_RT, Dynalog files	74 VMAT plans	Regression, Random Forest, Cubist	MLC Position Errors Detection
Li and Chan (2017)	Daily QA Device	5-year Daily QA Data	ANN Time-Series, ARIMA Models	Symmetry Prediction
Sun et al. (2018)	Ion Chamber	1,754 Proton Fields	Random Forrest, XGBoost, Cubist	Output for Compact Proton Machine
El Naqa et al. (2019)	EPID	119 Images from 8 Linacs	Support Vector Data Description, Clustering	Gantry Sag, Radiation Field Shift, MLC Offset
Grewal et al. (2020)	Ion Chamber	4,231 Proton Fields	Gaussian Processes, Shallow NN	Output and Patient QA Proton Machine
Osman et al. (2020)	log files	400 machine delivery log files	ANN	MLC Discrepancies during Delivery & Feedback
Chuang et al. (in press)	Trajectory log files	116 IMRT plans, 125 VMAT plans	Boosted Tree Outperformed LR	MLC Discrepancies during Delivery & Feedback
Zhao et al. (in press)	Water Tank Measurement	43 Truebeam PDD, Profiles	Multivariate Regression (Ridge)	Modeling of Beam Data Linac Commissioning

## QA of radiotherapy

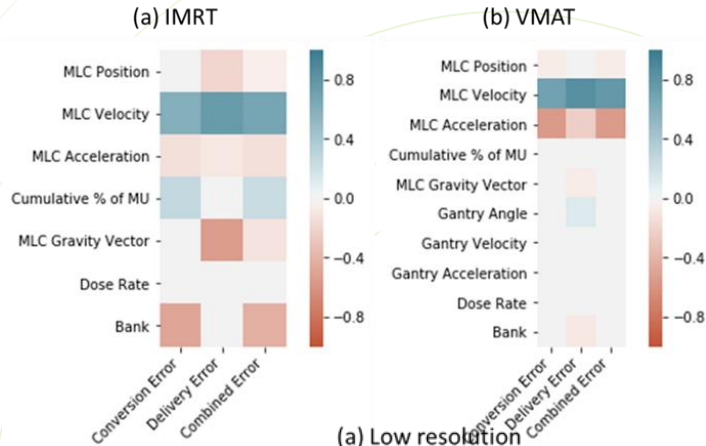
# Prediction of gamma passing of IMRT plans



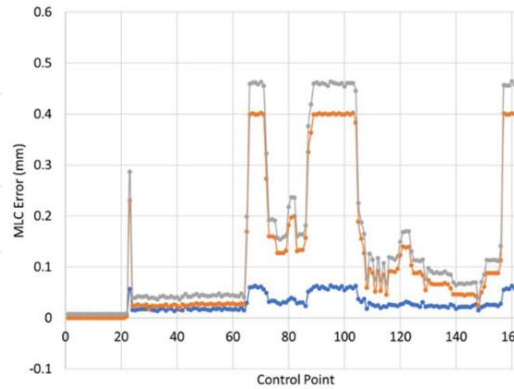
- Dosimetry quality assurance:  
Prediction of 3% 3mm gamma passing of IMRT plans rate by CNN



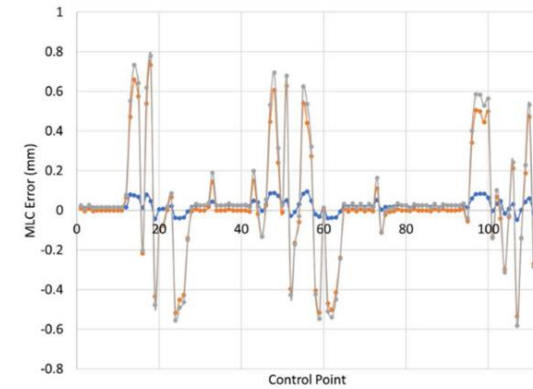
# Prediction of errors in treatment delivery



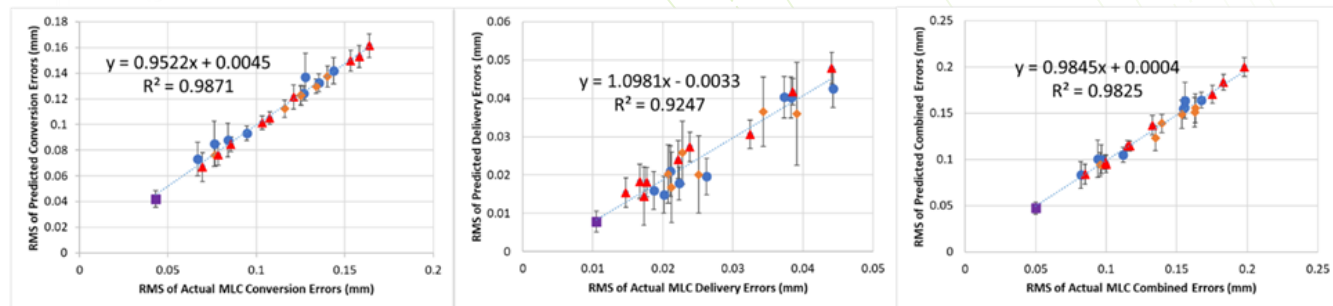
(a) A single IMRT field



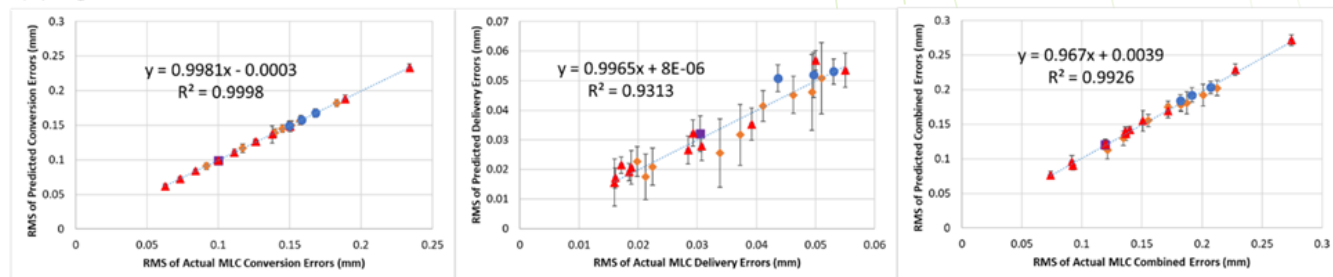
(b) A single VMAT arc



(a) Low resolution



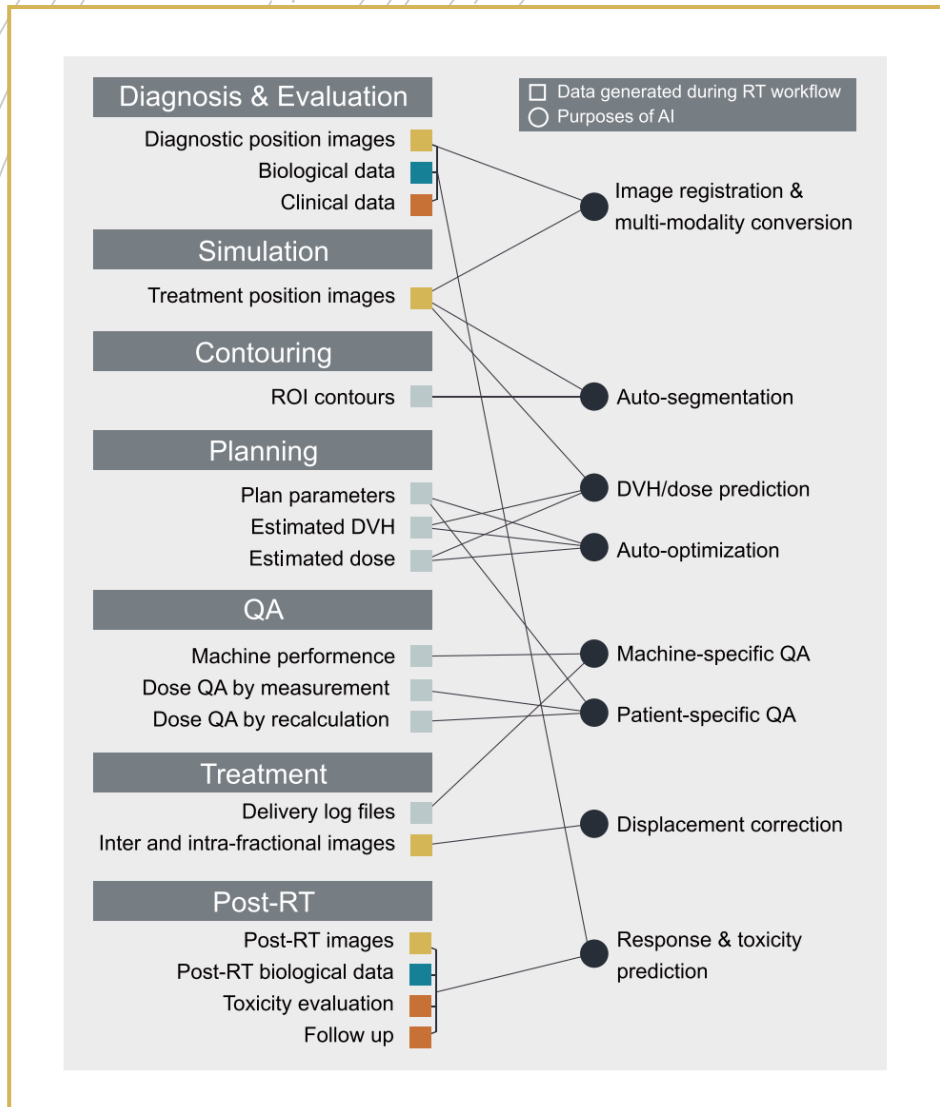
(b) High resolution



● STX    ◆ TB1    ■ TB2    ▲ TB3

# Summary

- Li, Seminars in Cancer Biology 2022



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- Shen, C.; Nguyen, D.; Zhou, Z.; Jiang, S.B.; Dong, B.; Jia, X. An Introduction to Deep Learning in Medical Physics: Advantages, Potential, and Challenges. *Phys.Med.Biol.* **2020**, *65*, 05TR01-6560/ab6f51, doi:10.1088/1361-6560/ab6f51.

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- 2. Avanzo, M.; Trianni, A.; Botta, F.; Talamonti, C.; Stasi, M.; Iori, M. Artificial Intelligence and the Medical Physicist: Welcome to the Machine. *Applied Sciences* **2021**, *11*, 1691, doi:10.3390/app11041691.

## Applications of AI to RT:

- 3. Appelt, A.L.; Elhaminia, B.; Gooya, A.; Gilbert, A.; Nix, M. Deep Learning for Radiotherapy Outcome Prediction Using Dose Data - A Review. *Clin Oncol (R Coll Radiol)* **2022**, *34*, e87–e96, doi:10.1016/j.clon.2021.12.002.
- 4. Vandewinckele, L.; Claessens, M.; Dinkla, A.; Brouwer, C.; Crijns, W.; Verellen, D.; van Elmpt, W. Overview of Artificial Intelligence-Based Applications in Radiotherapy: Recommendations for Implementation and Quality Assurance. *Radiother Oncol* **2020**, *153*, 55–66, doi:10.1016/j.radonc.2020.09.008.