

Physics Colloquium

Zeuthen

24. Feb. 2021 – 14:00

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# FLASH

# Irradiation

can cancer be treated within a  
second?



# 1. Introduction

# 1. Introduction *Cancer*

18.1 million cases in 2018  
1 in 4 people will develop



The most common cancers are:

Tumor side	cases
Lung	2.090 k
Breast	2.090 k
Colorectal	1.800 k
Prostate	1.280 k
Skin (non-melanoma)	1.040 k
Stomach	1.030 k

9.6 million deaths in 2018  
1 in 6 deaths is due to



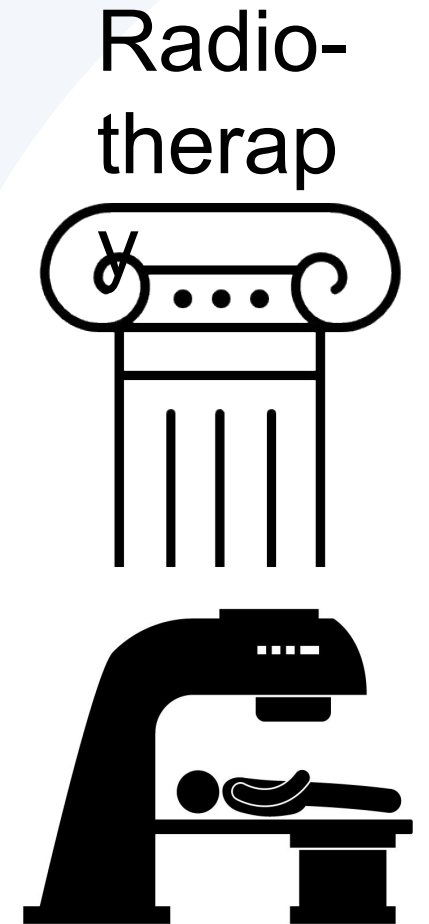
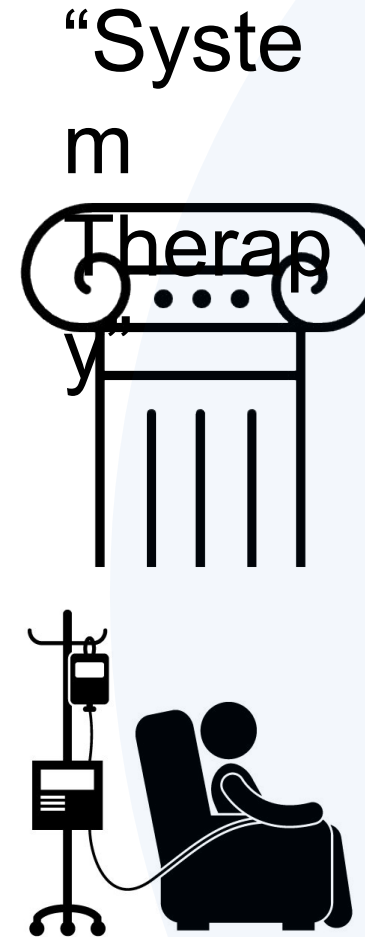
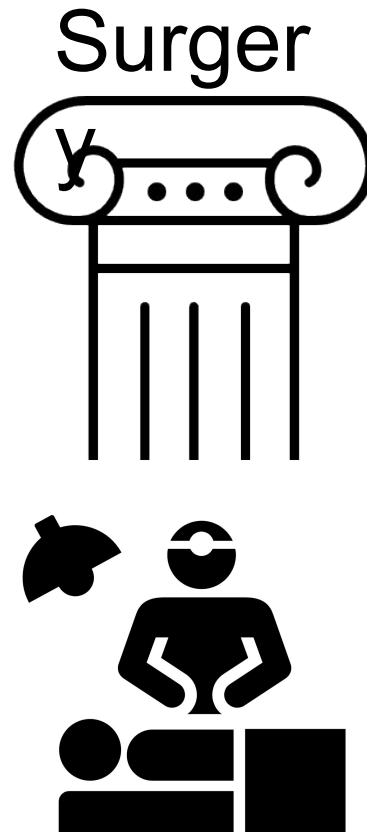
The most common causes of cancer death are:

Tumor side	Deaths
Lung	1.760 k
Colorectal	862 k
Stomach	783 k
Liver	782 k
Breast	627 k

**... is the 2nd leading cause of death globally**

# 1. Introduction *Cancer treatment*

The 3 columns  
of  
cancer  
treatment



# 1. Introduction

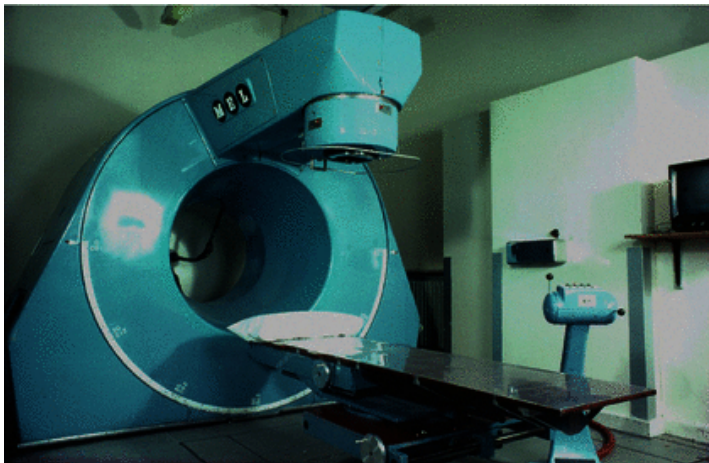
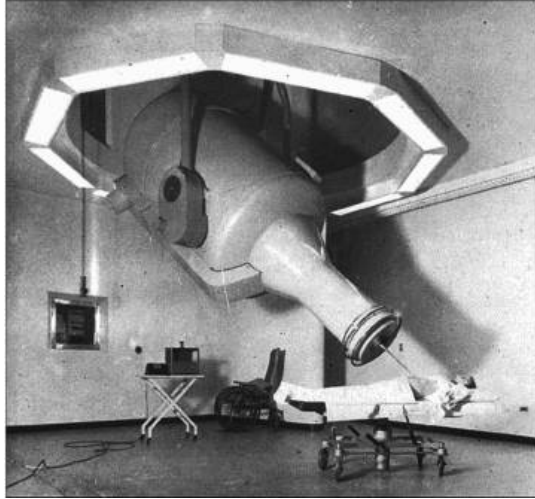
## *Radiation Oncology*

Use of ionizing radiation to kill tumor cells

Electromagnetic radiation (X-Ray,  $\gamma$ -

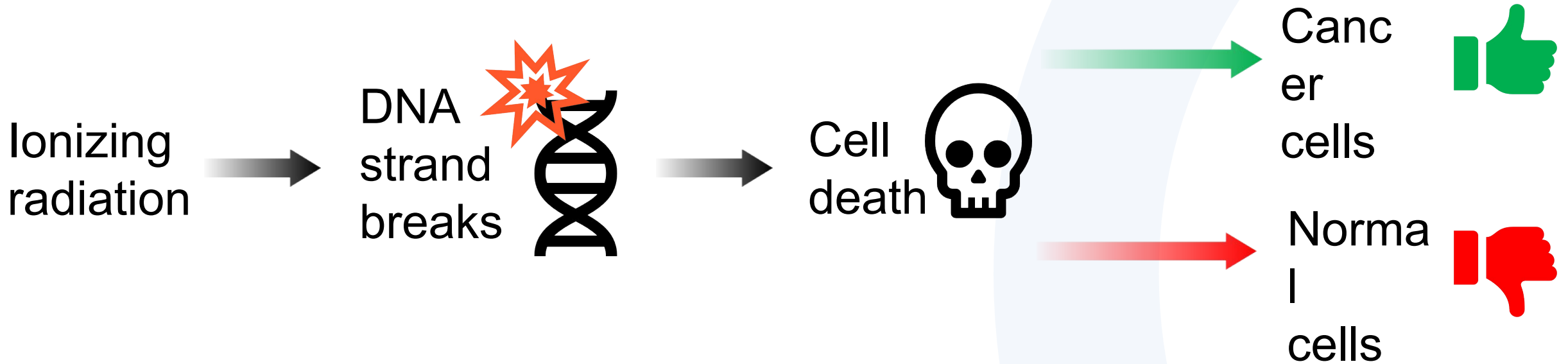
Ray)  
Particle radiation (Electrons, Protons, Heavy ions...)

# 1. Introduction *Radiation* *Oncology*



# 1. Introduction *Radiation*

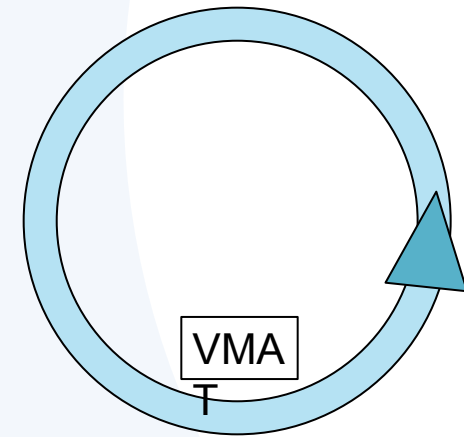
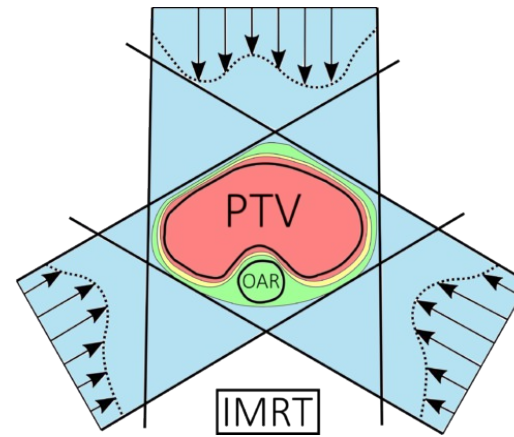
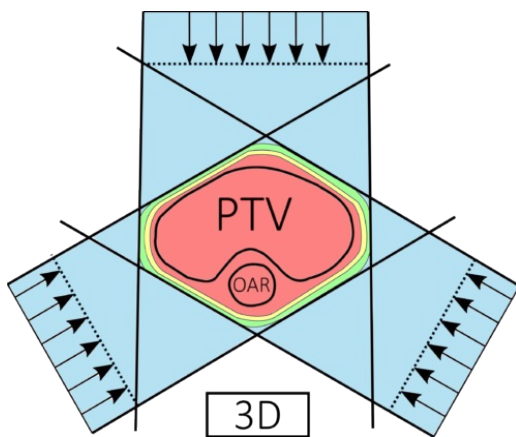
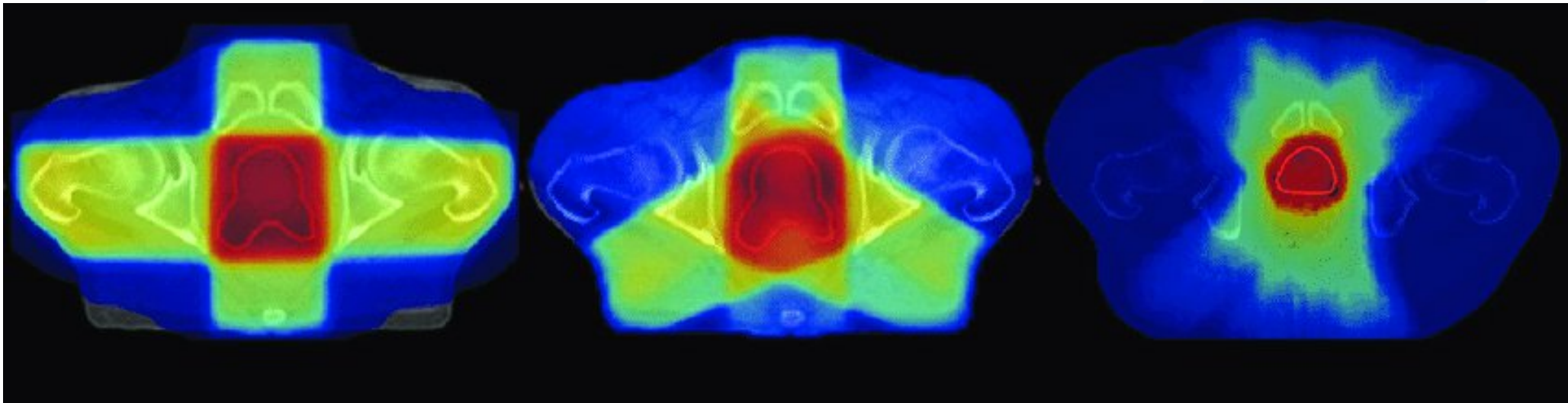
*Oncology*



# 1. Introduction *Radiation*

*Oncology*

## FOCUSING

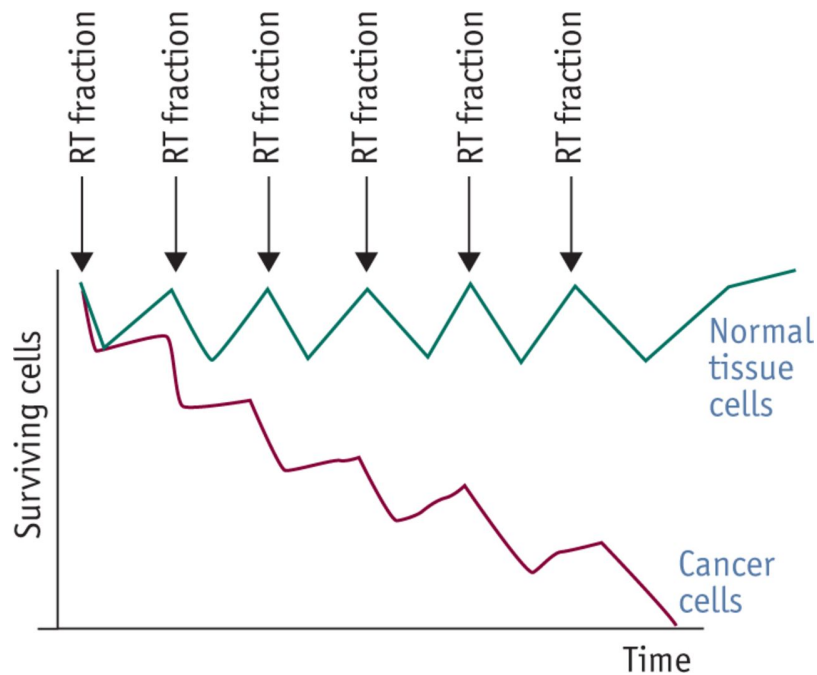




# 1. Introduction *Radiation*

## *Oncology*

### FRACTIONATION



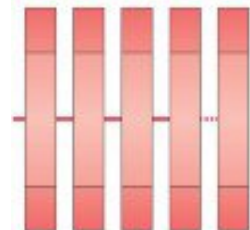
Conventional fractionation



Moderate hypofractionation



Extreme hypofractionation



	Fractionation schedule		
	Conventional	Moderate	Extreme
Total dose (Gy)	76–80	57–70.2	38–50
Total treatment duration (weeks)	8–9	4–6	1–2
Number of fractions (n)	38–40	19–30	4–5
Dose per fraction (Gy)	1.8–2	2.4–4	6–10
Interval between fractions (days)	1	1	1–2

# 1. Introduction *Radiation*

## *Oncology*



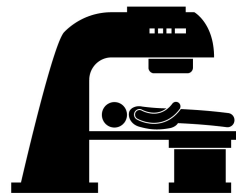
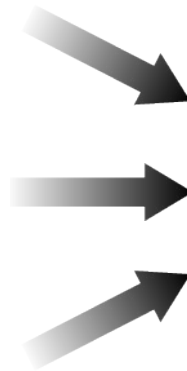
Better images  
(CT/MRT/PET)



Better medicine  
(Chemo-  
/Immunotherapy)



Better planning  
systems  
(new: artificial intelligence)



Better irradiation  
devices  
(linear/partical accelerator)



Better  
irradiation

***But...***

*SINCE DECADES ONE THING DIDN'T  
CHANGE AT ALL*

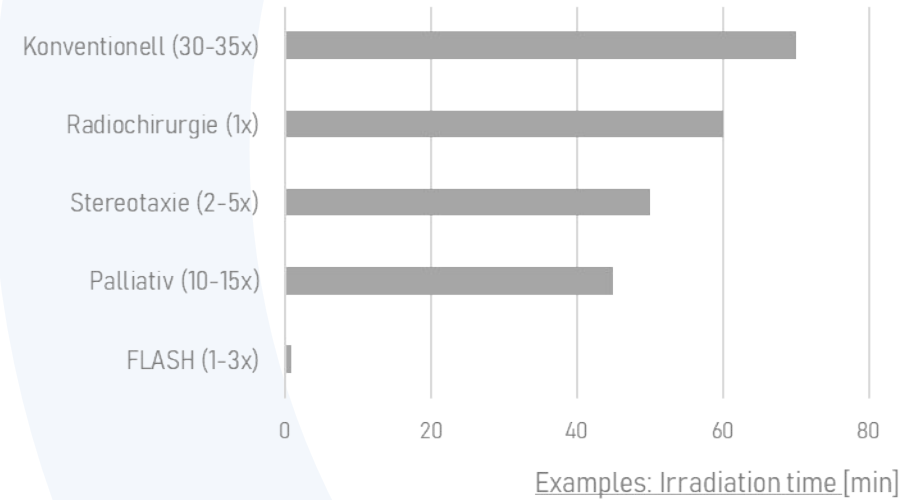
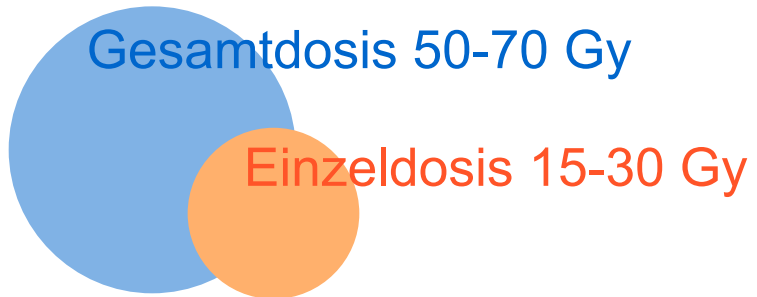
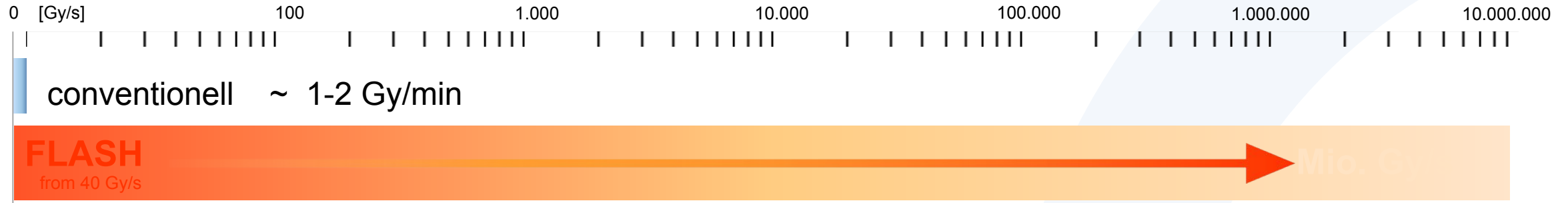
**DOSE**



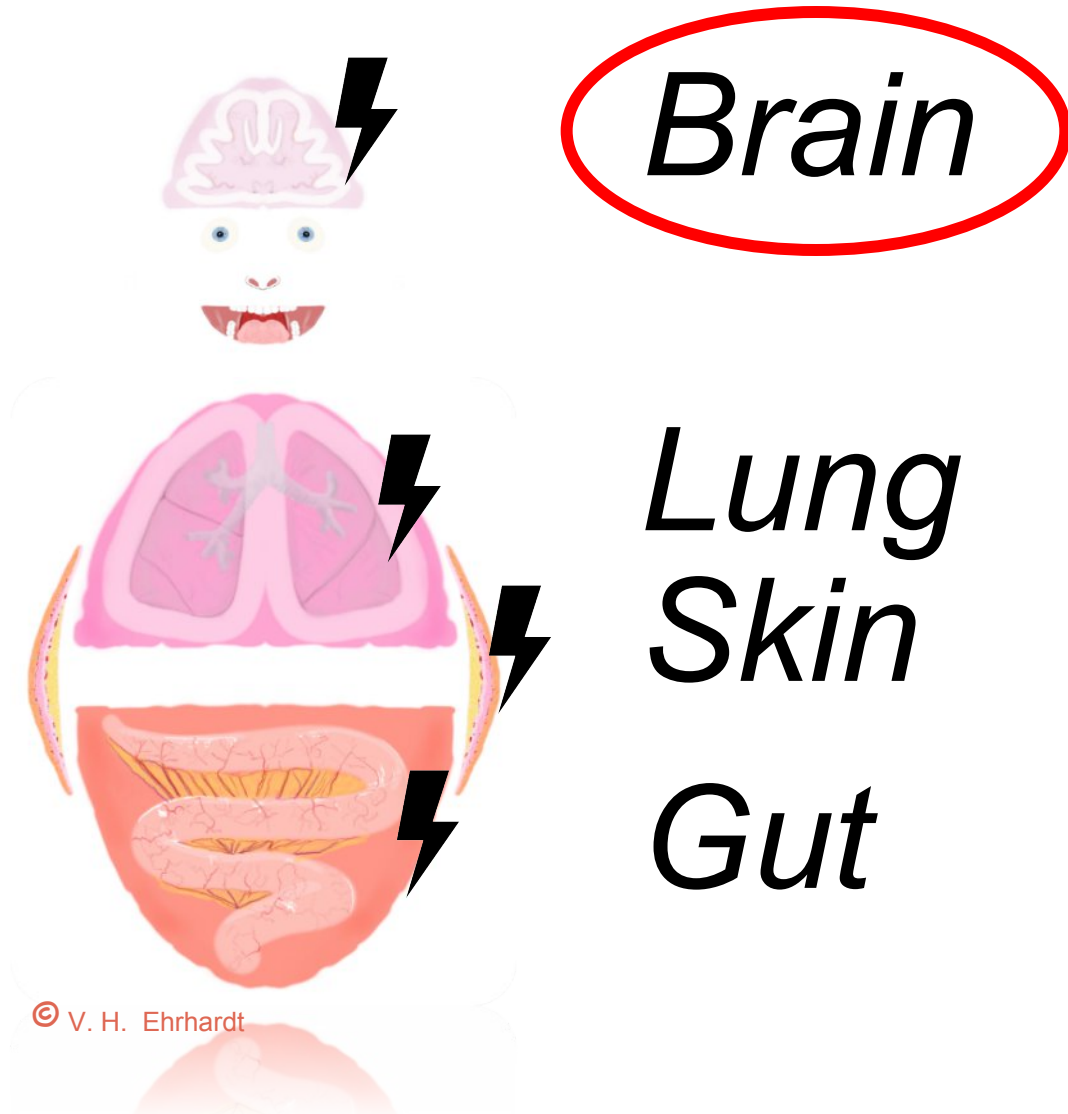
# 2. FLASH Irradiation

*What is FLASH  
Irradiation?*

# 2. FLASH Irradiation



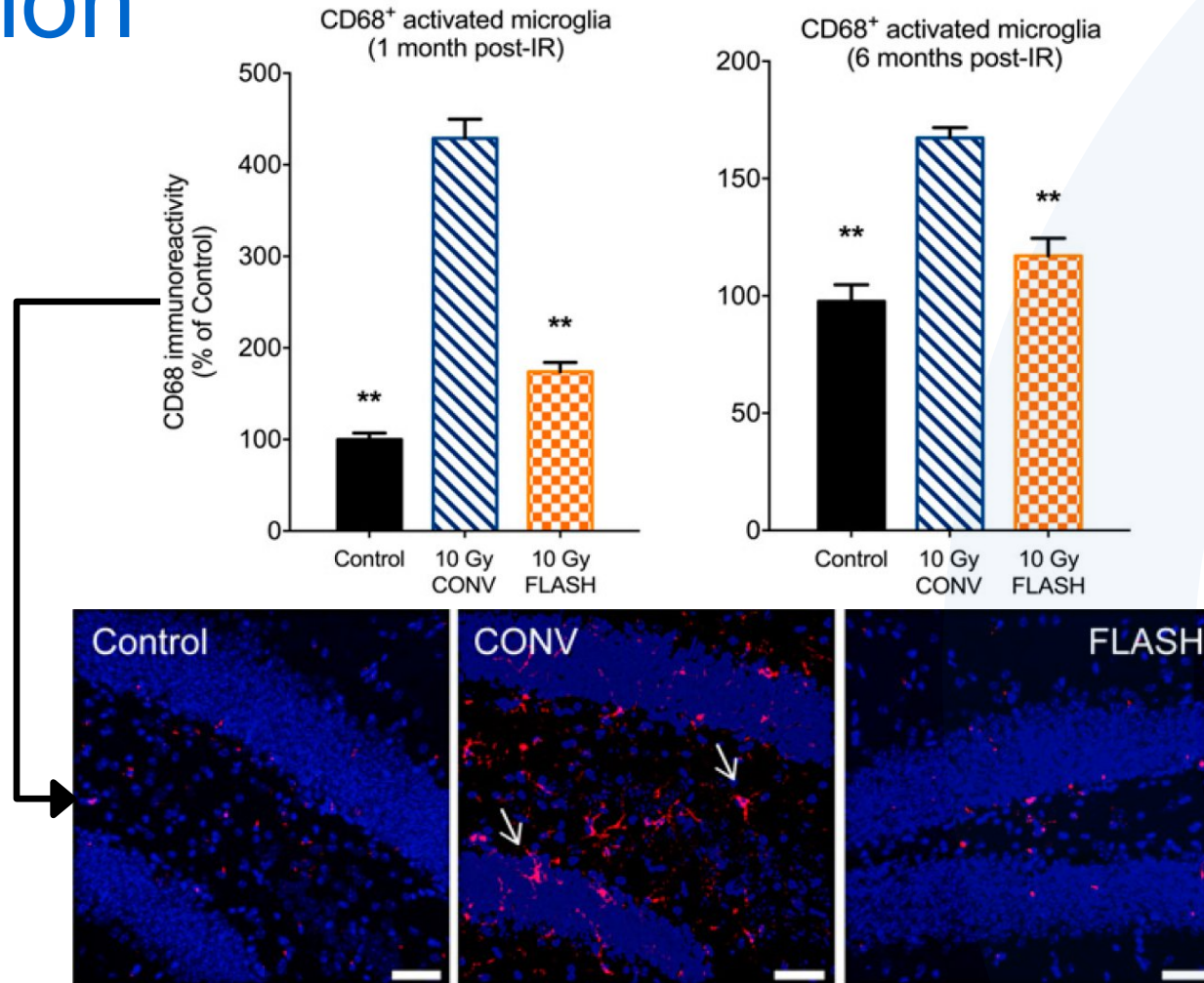
## 2. FLASH Irradiation



# 2. FLASH Irradiation *Brain*

## Inflammation

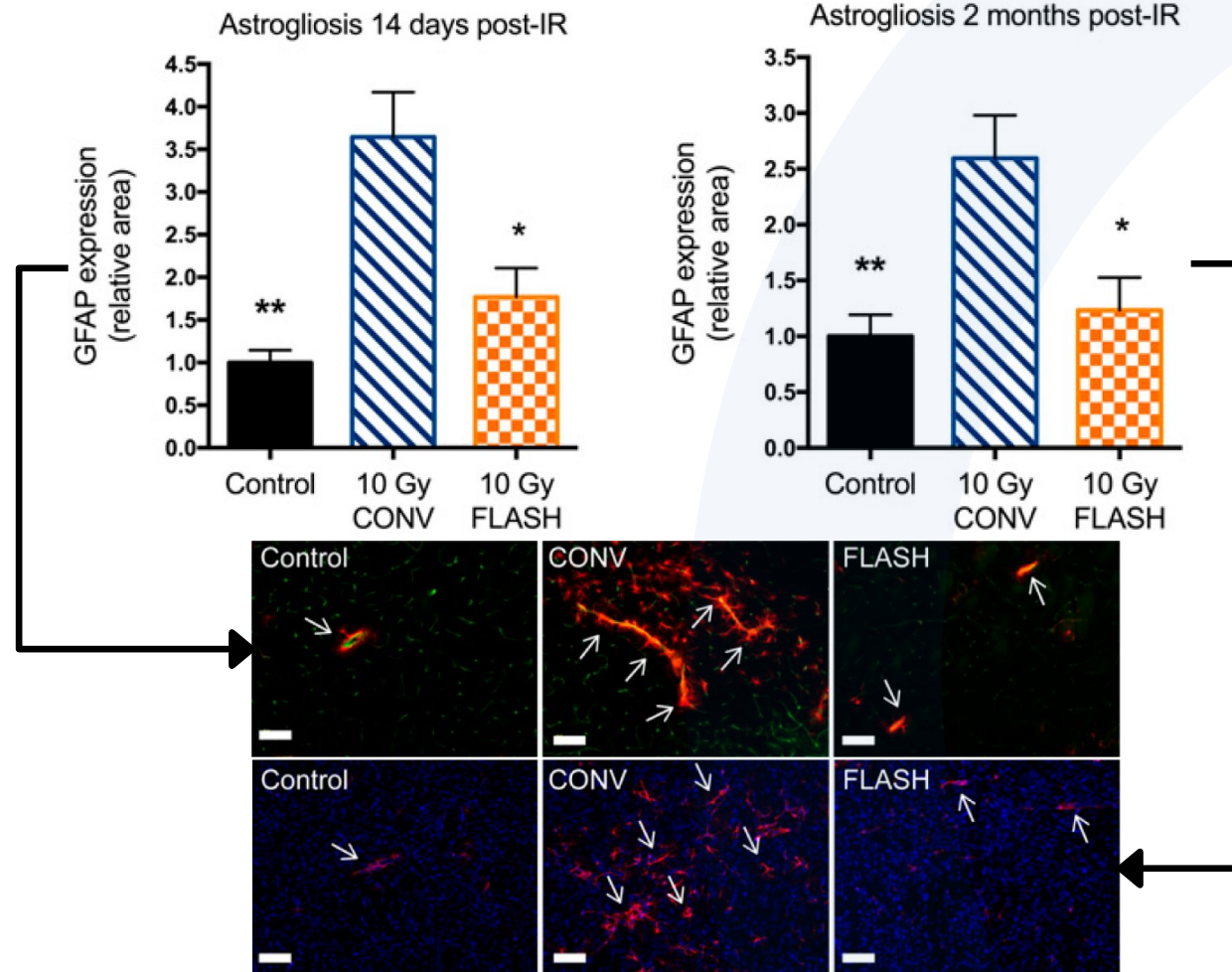
Activated microglia



Montay-Gruel P et al., 2017

# 2. FLASH Irradiation *Brain*

## Structural Astroglial changes

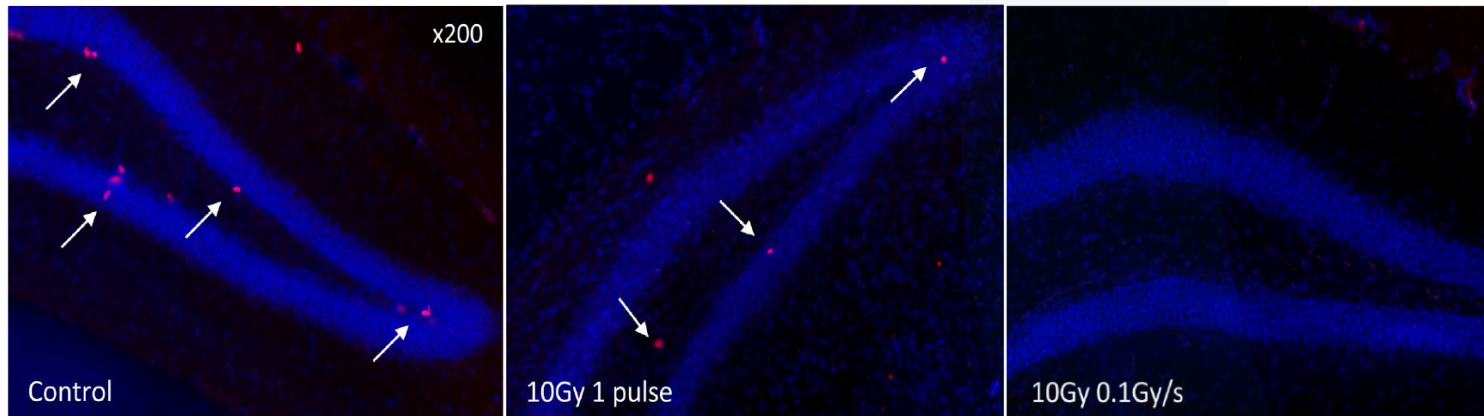
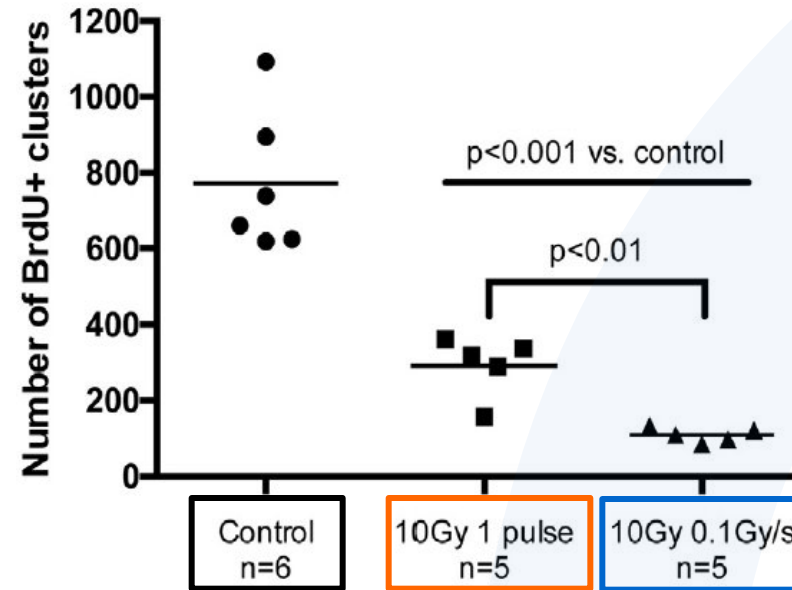


Montay-Gruel P et al., 2017

# 2. FLASH Irradiation *Brain*

## Regeneration

Neurogenesis



Control

FLASH

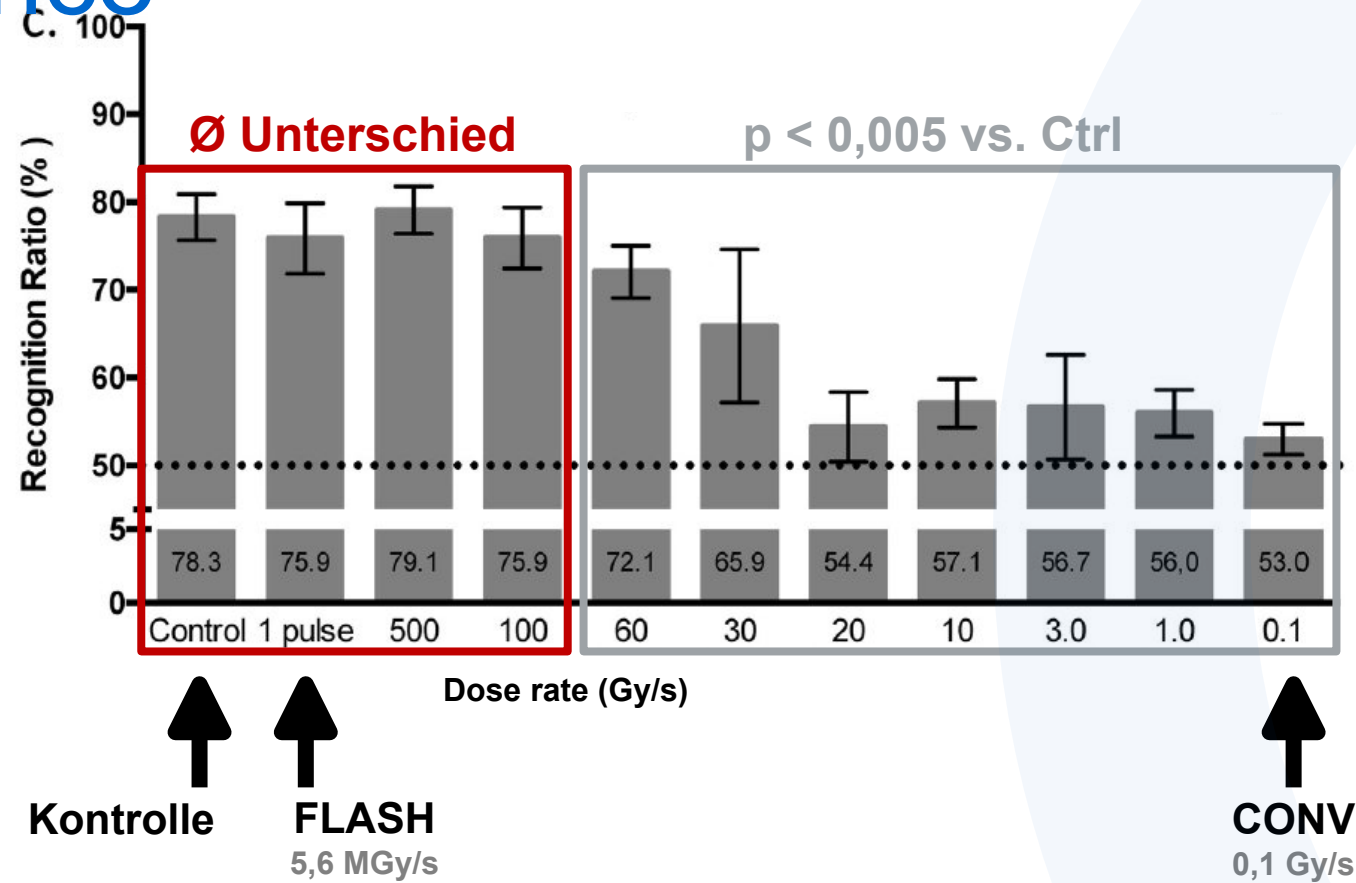
Conventional

Montay-Gruel P et al., 2017



# 2. FLASH Irradiation *Brain*

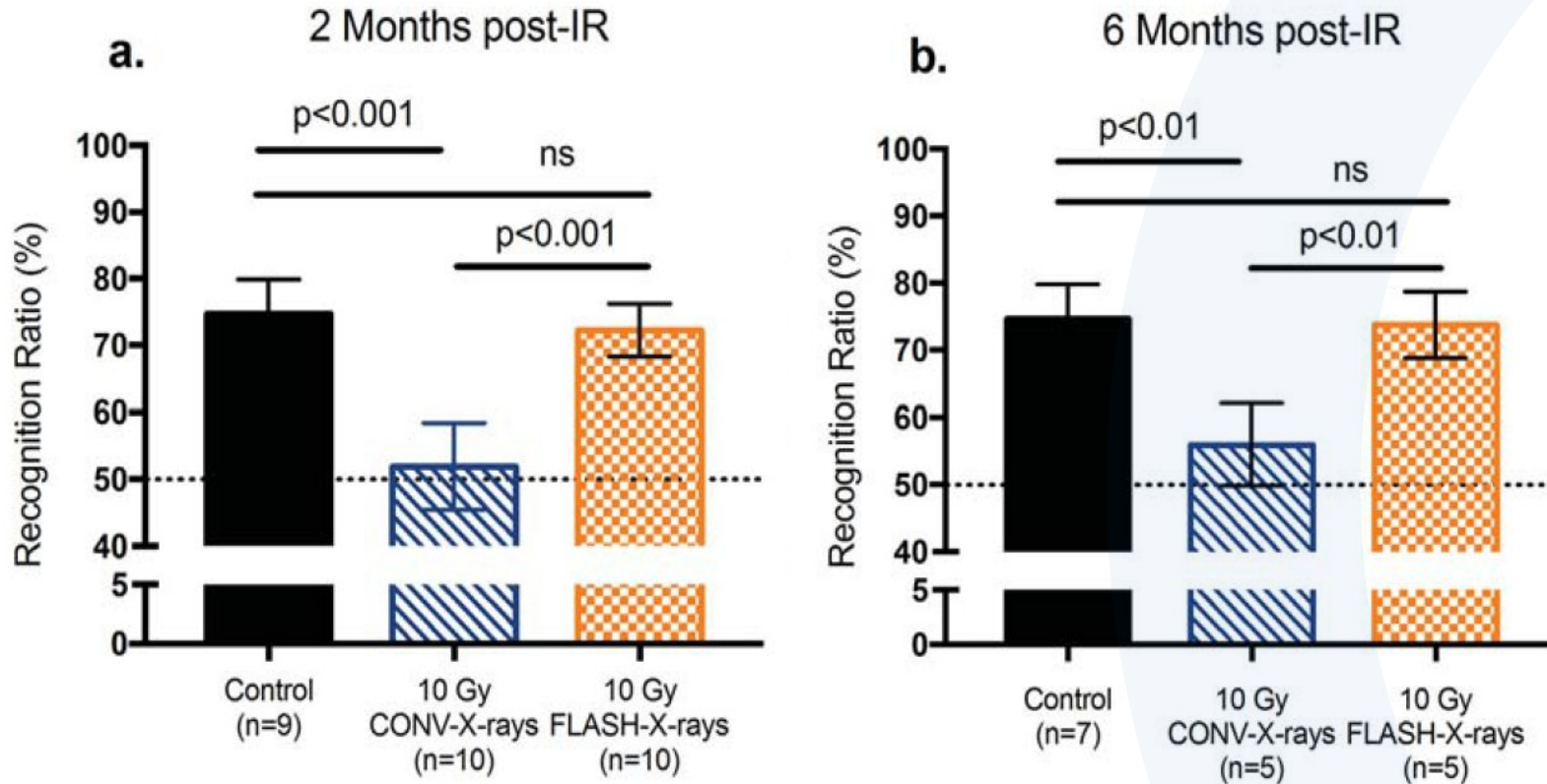
## Cognitive performance



Montay-Gruel P et al., 2017

# 2. FLASH Irradiation *Brain*

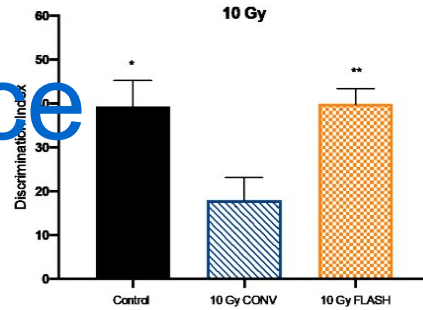
## Cognitive performance



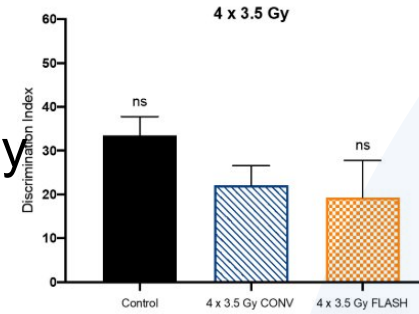
Montay-Gruel P et al., 2017

# 2. FLASH Irradiation *Brain*

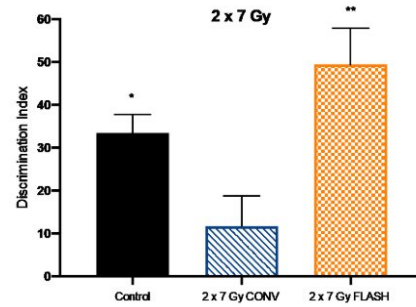
## Cognitive performance



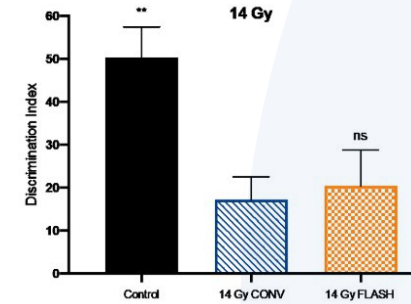
1 x 10 Gy  
P<0,05



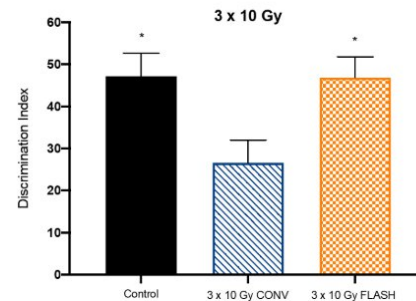
4 x 3,5 Gy  
ns



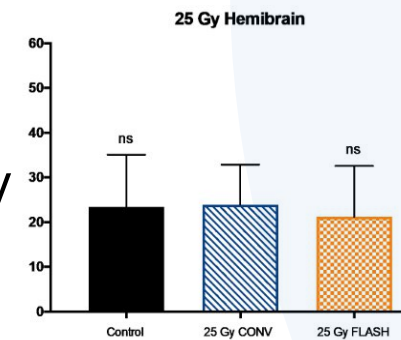
2 x 7 Gy  
P<0,05



1 x 14 Gy  
ns



3 x 10 Gy  
P<0,05

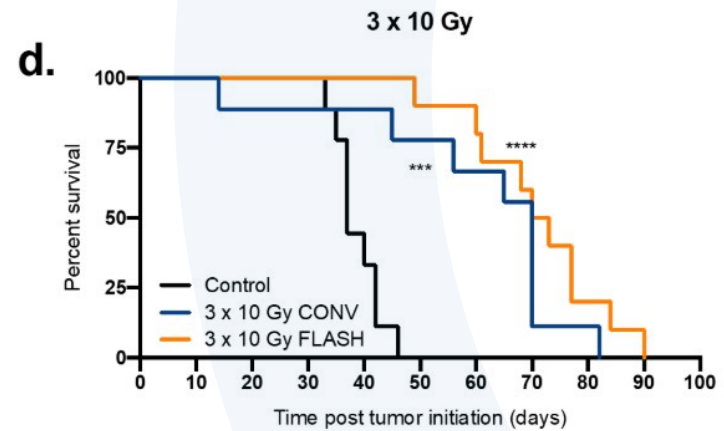
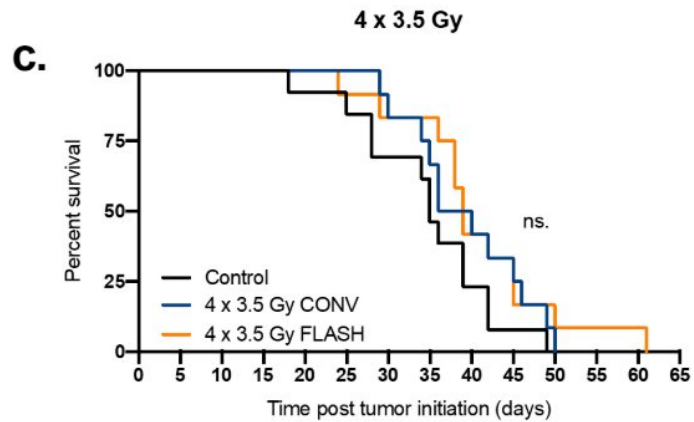
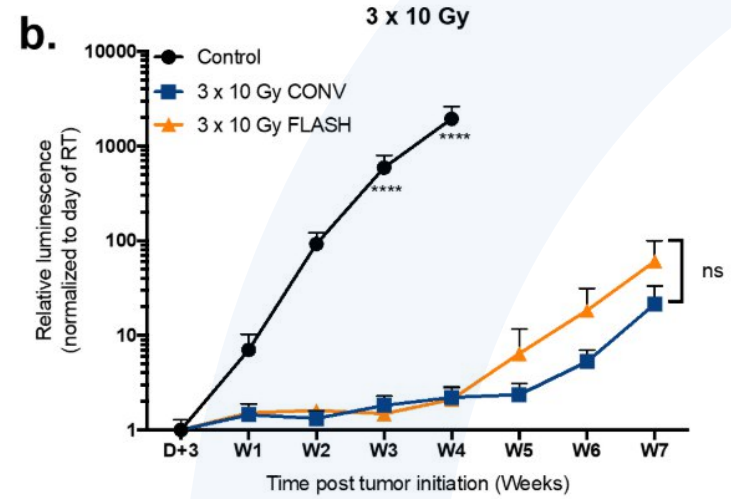
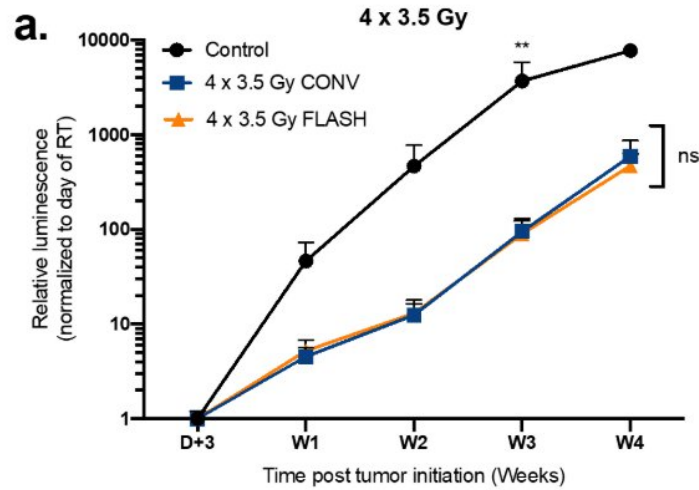


1 x 25 Gy  
ns

Montay-Gruel P et al., 2020

# 2. FLASH Irradiation *Brain*

## Tumor control



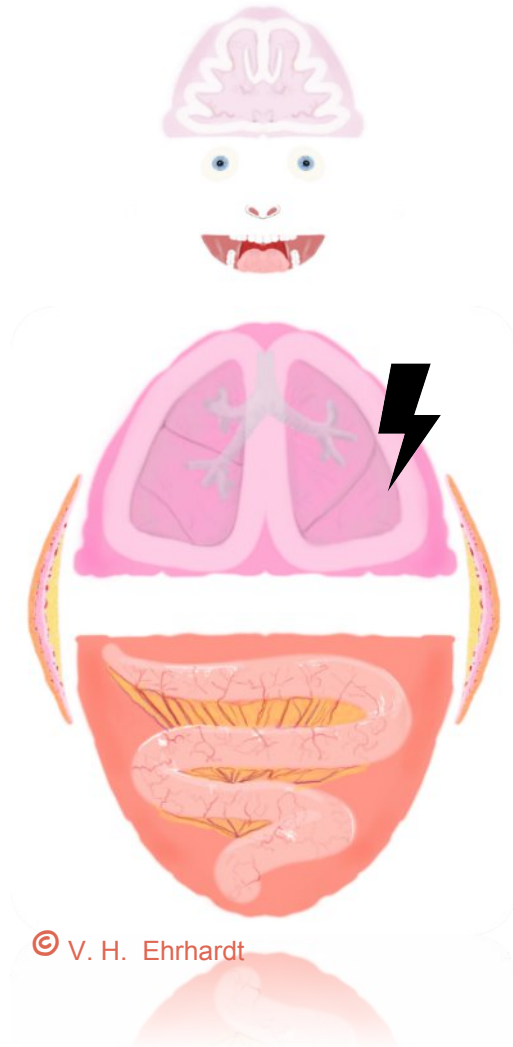
Montay-Gruel P et al., 2020

# 2. FLASH Irradiation *Brain*

## Summary

- Less inflammatory
  - Less tissue changes
  - Preserved regenerative capacity
  - Preserved functionality
  - Isoeffective tumor control
- CAVE: FLASH effect depends on many factors such as total dose, fractionation, dose rate and beam characteristics

# 2. FLASH Irradiation



*Lung*

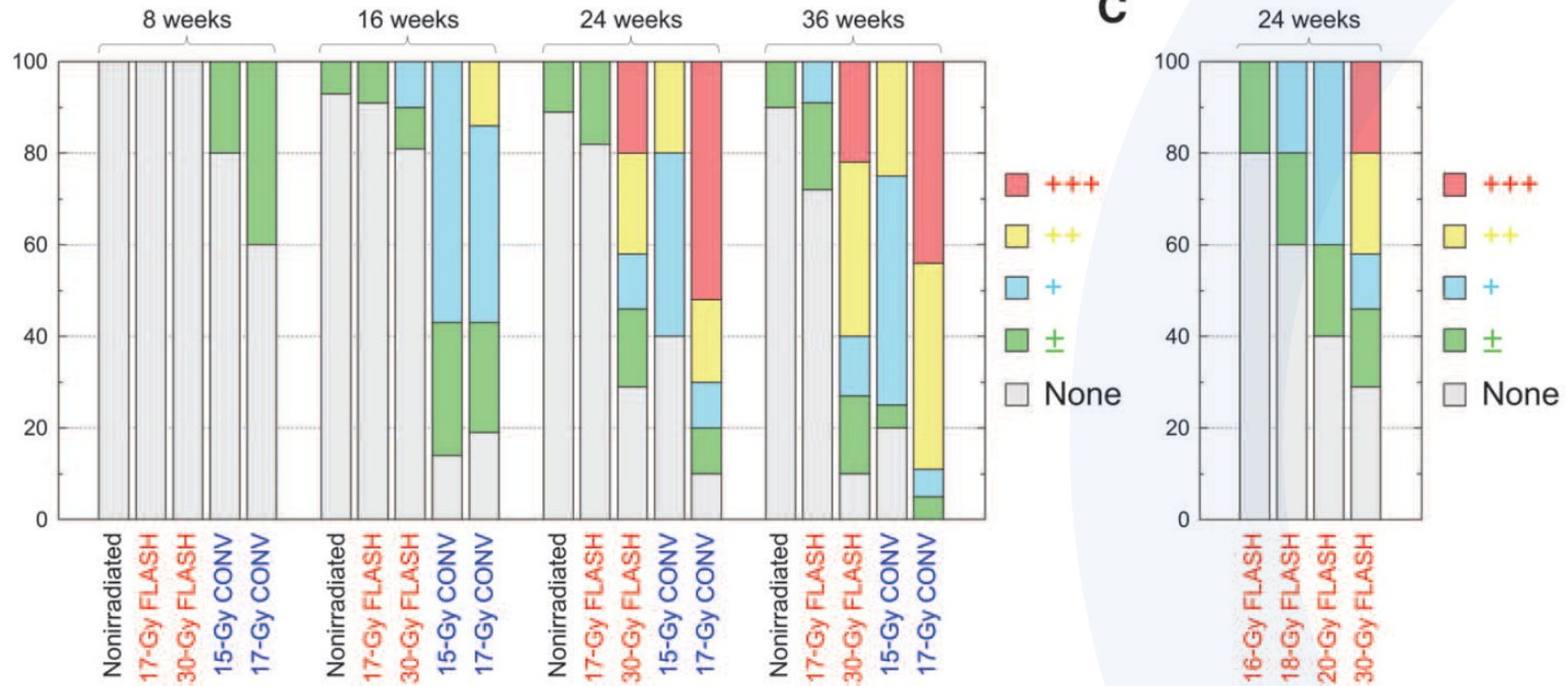
© V. H. Ehrhardt

Montay-Gruel P et al., 2017/2019

# 2. FLASH Irradiation *Lung*

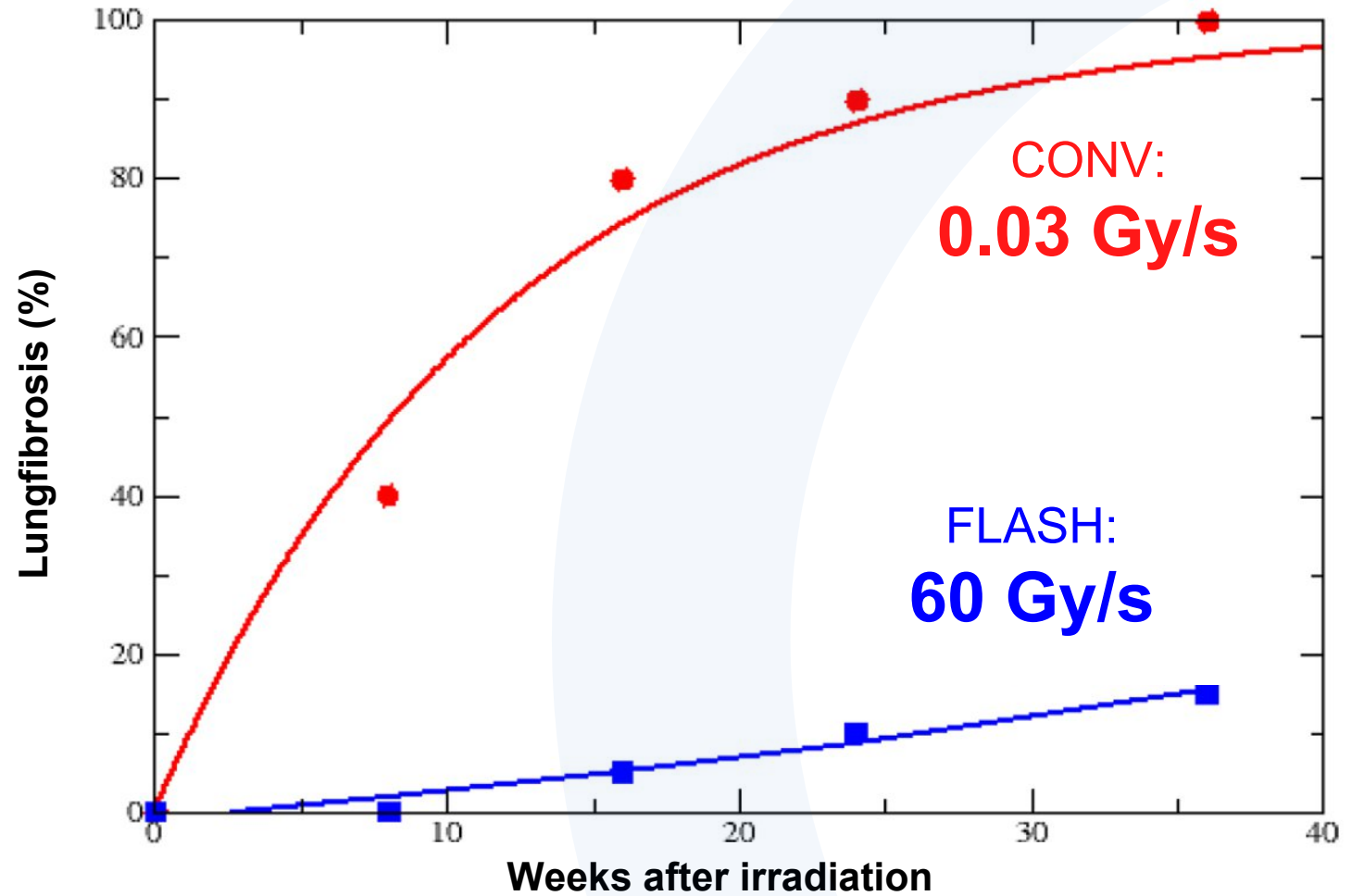
## Inflammation

Acute side effects



# 2. FLASH Irradiation *Lung*

## Structural Fibrosis changes

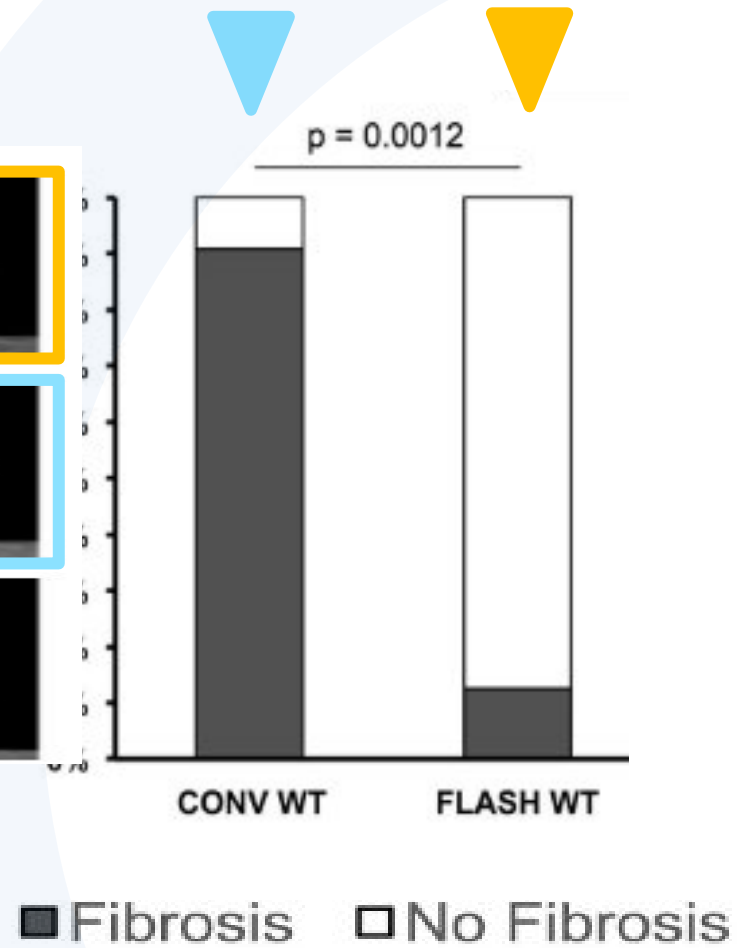
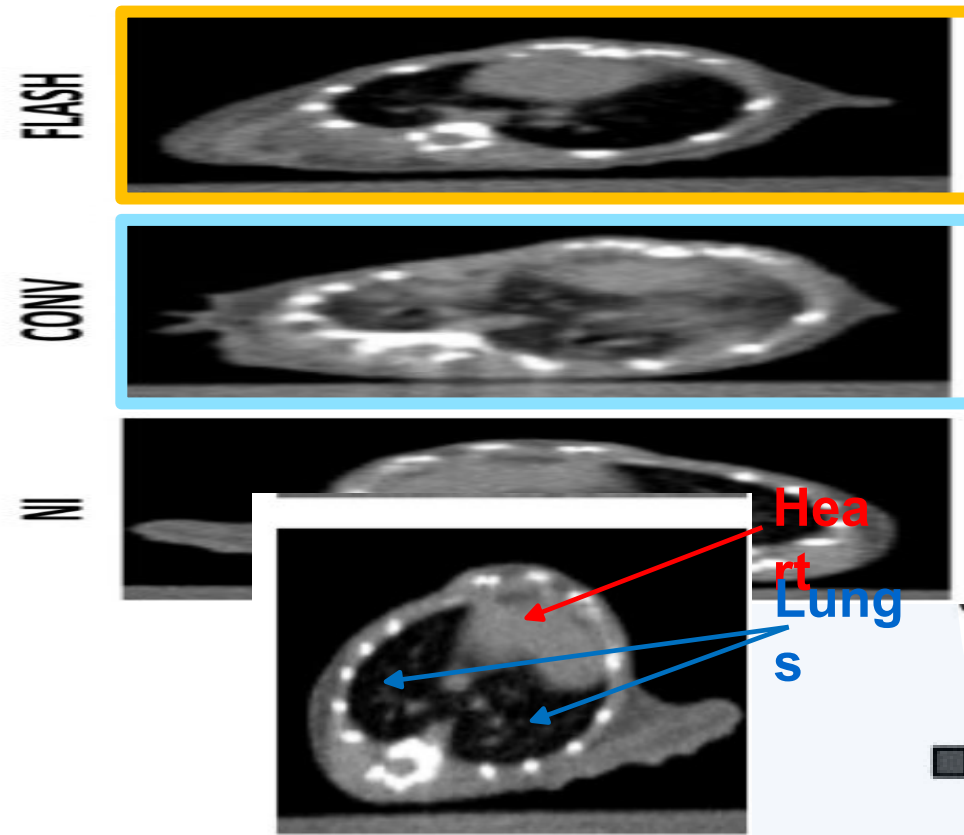


Favaudon et al., 2014



# 2. FLASH Irradiation *Lung*

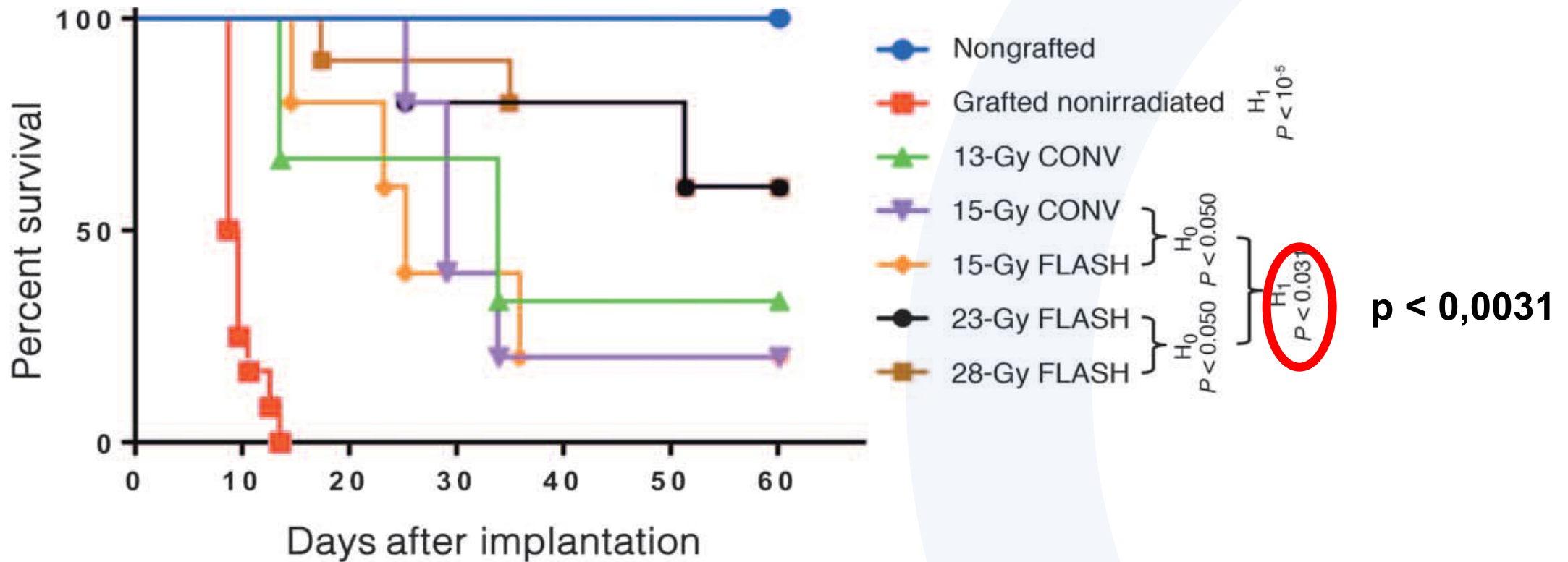
## Structural Fibrosis changes



Fouillade et al., 2019

# 2. FLASH Irradiation *Lung*

## Tumor control

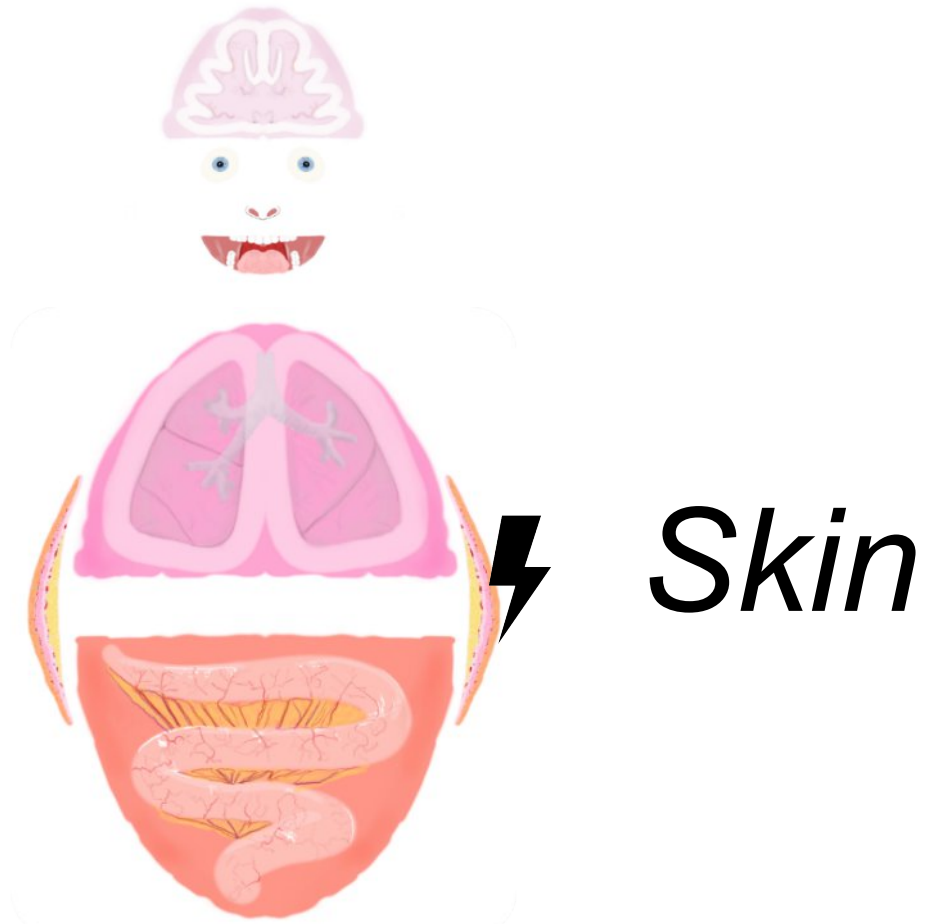


# 2. FLASH Irradiation *Lung*

## Summery

- Less inflammatory
- Less tissue changes / cell death
- Isoeffective tumor control or better

# 2. FLASH Irradiation



© V. H. Ehrhardt

## 2. FLASH Irradiation *Skin*

### Radiodermatitis

(A) Grade 3 dermatitis with contact bleeding occurred at one week after bioradiotherapy. (B) Resolution of dermatitis at 4 weeks after bioradiotherapy.



# 2. FLASH Irradiation *Skin*

## Skin

Long-term side effects  
**reaction**

B

34Gy\*

31Gy\*

28Gy\*

Conv



FLASH



Vozenin et al., 2018

## 2. FLASH Irradiation *Skin*

### Skin

Long-term side effects  
**reaction**

#### **CONV**

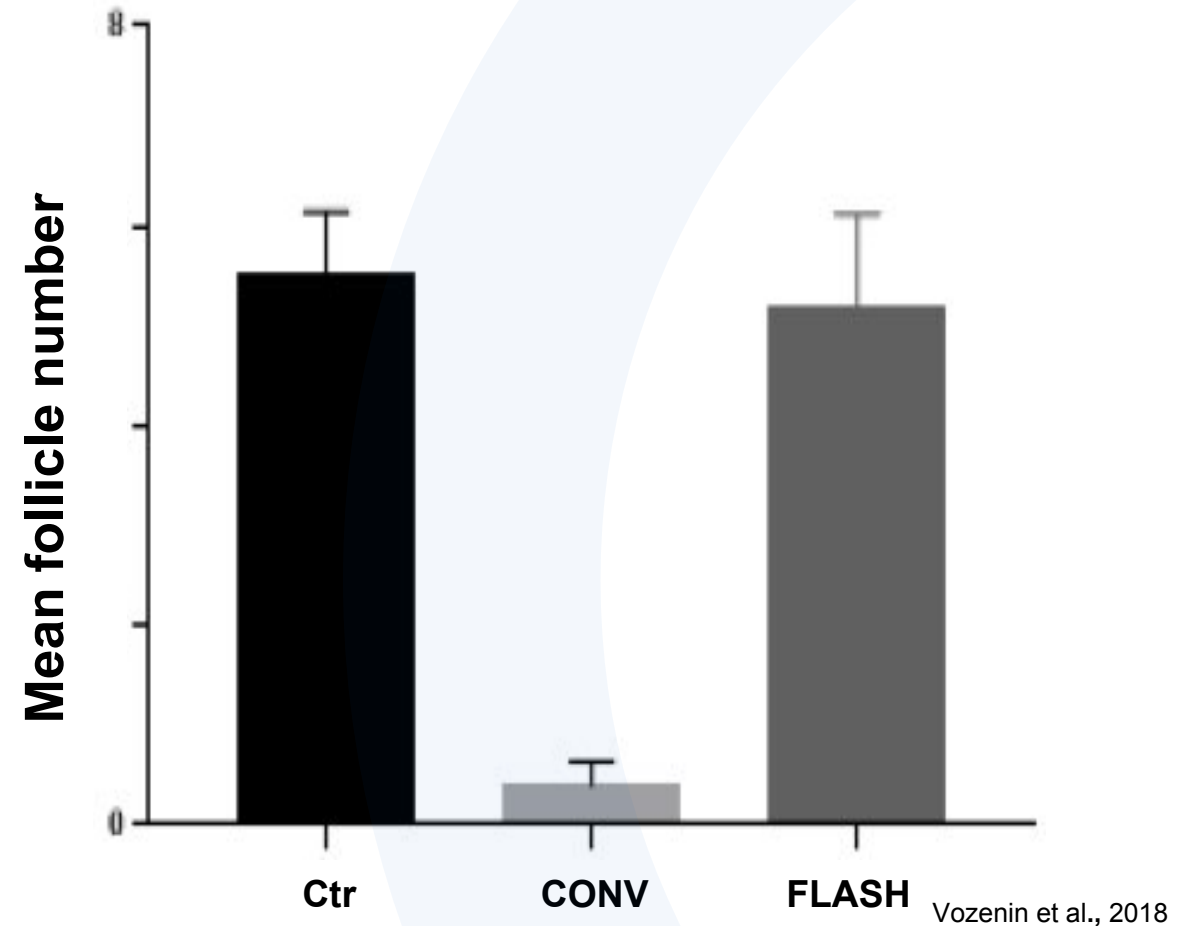
•80 % hair loss after 32 weeks

#### **FLASH**

•20 % hair loss after 32 weeks

#### **BIOPSY**

•Follicle protection after FLASH  
•No difference between FLASH and control

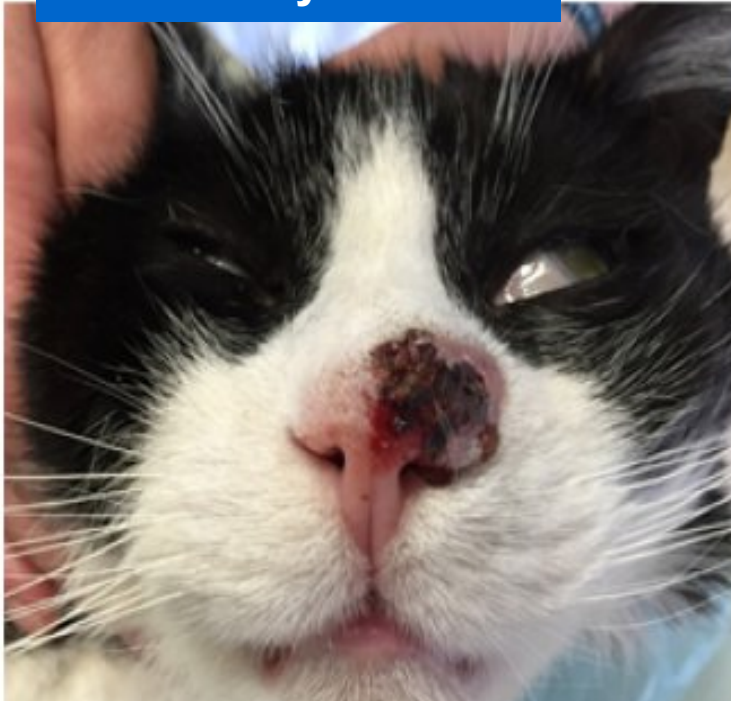


## 2. FLASH Irradiation *Skin*

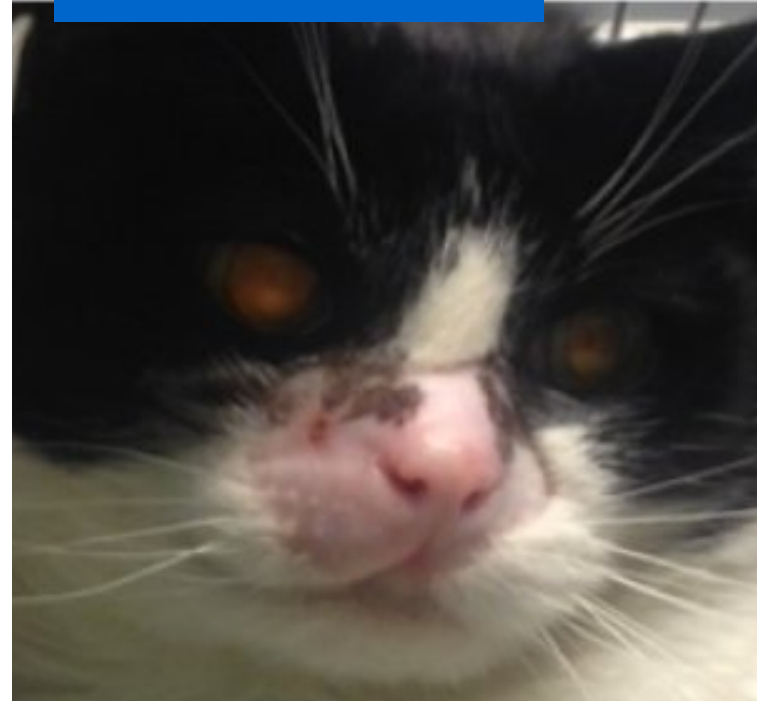
### Tumor controll

- **100 % after 16 month**
- **83% after 18 month**
- **50 % after 20 month**

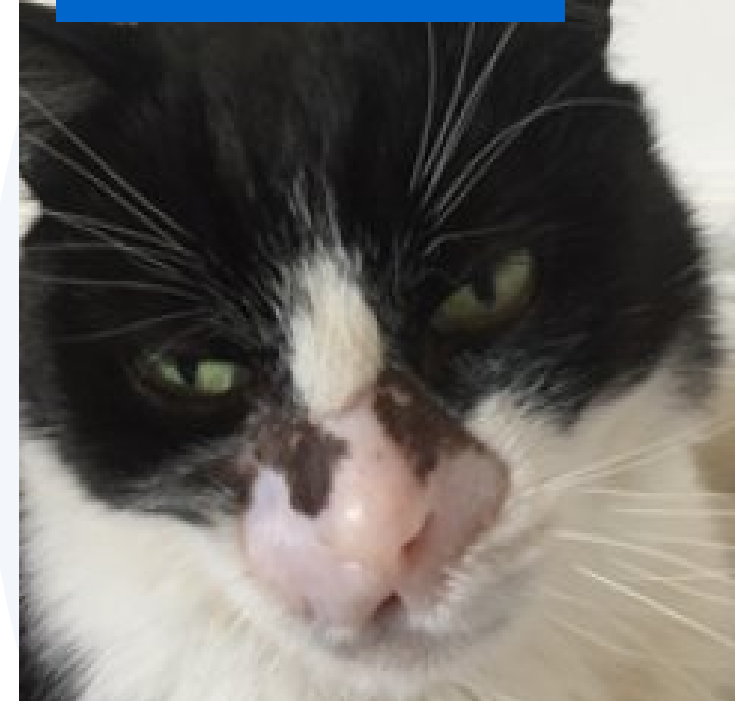
Day 0



After 7 month



After 14 month



Vozenin et al., 2018



# 2. FLASH Irradiation *Skin*

## Tumor

First human patient!!



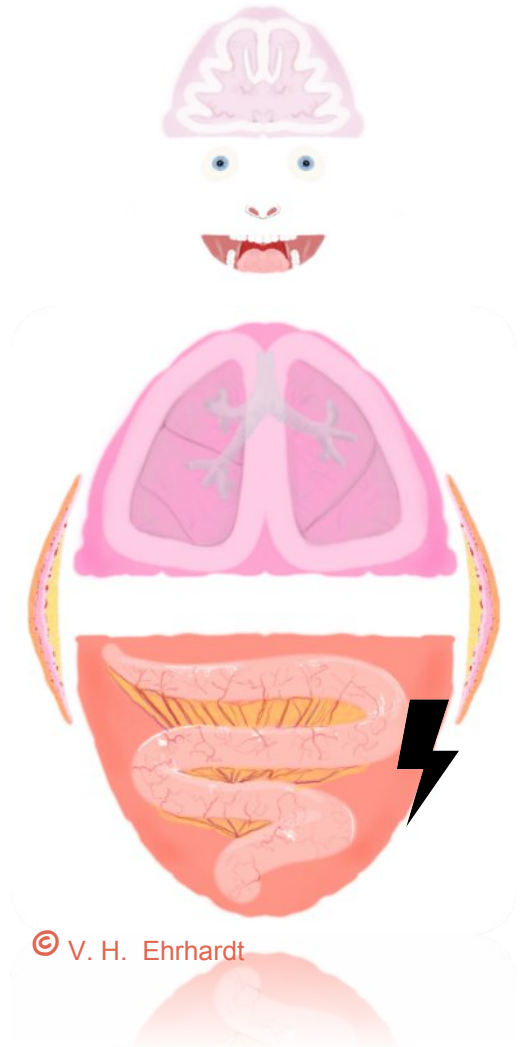
Bourhis et al., 2019

## 2. FLASH Irradiation *Skin*

### Summery

- No long term side effects
- Effective tumor control

# 2. FLASH Irradiation



*Gut*

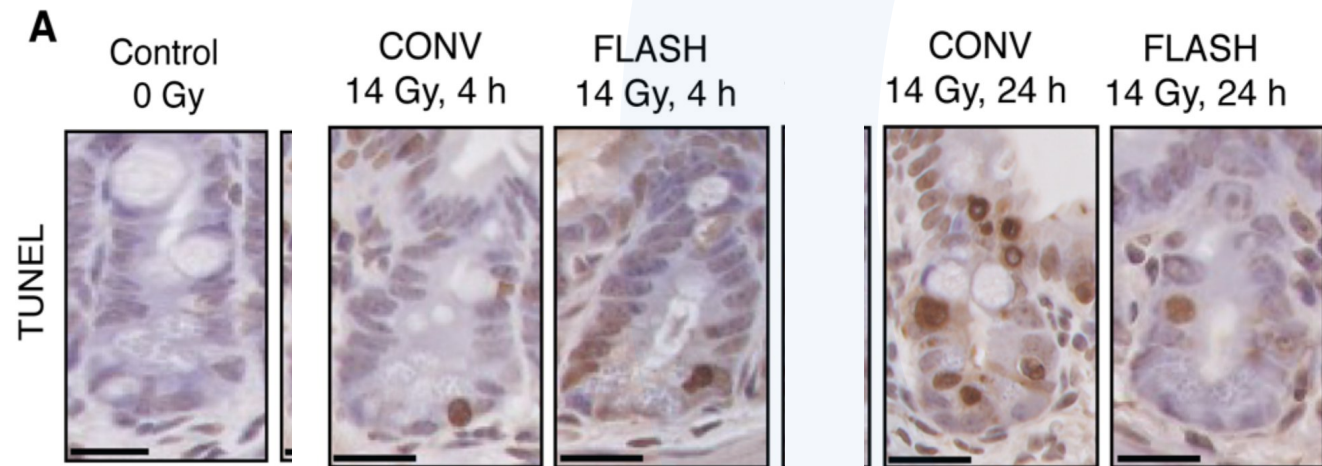
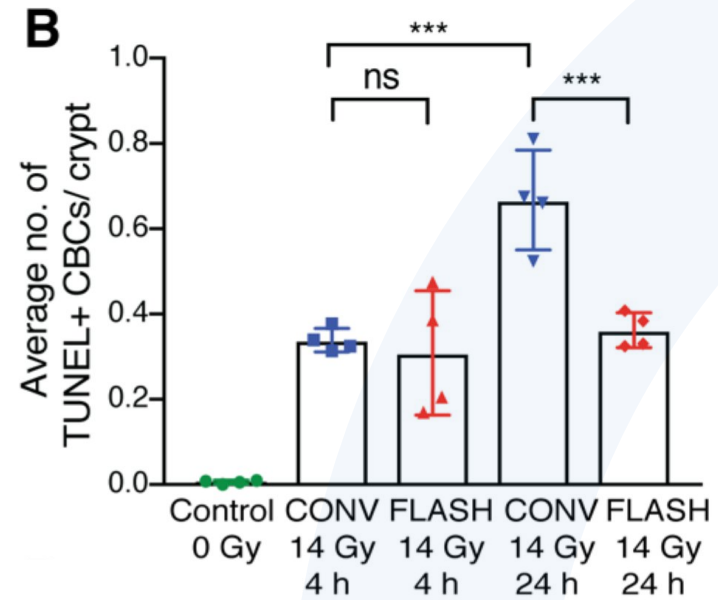
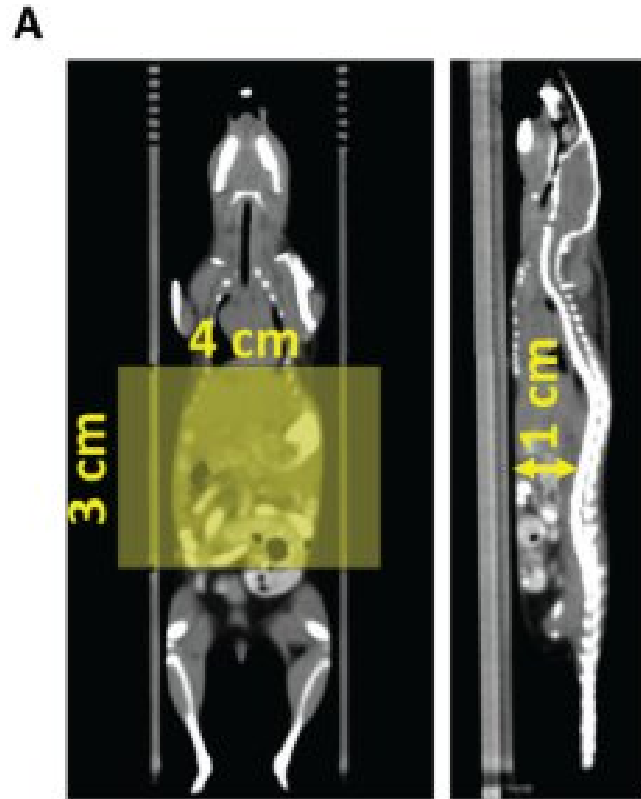
© V. H. Ehrhardt

Montay-Gruel P et al., 2017/2019

# 2. FLASH Irradiation *Gut*

## Apoptosis

„Cell death“

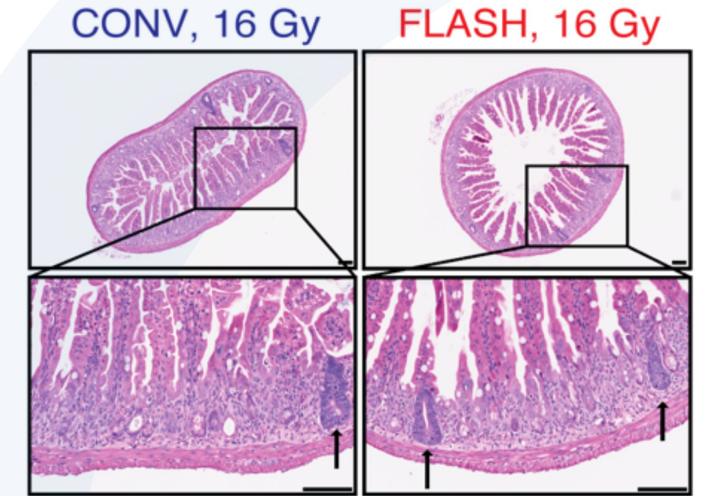
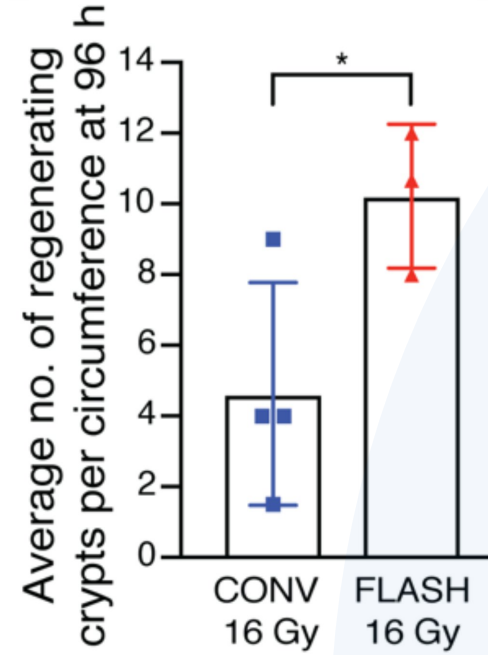
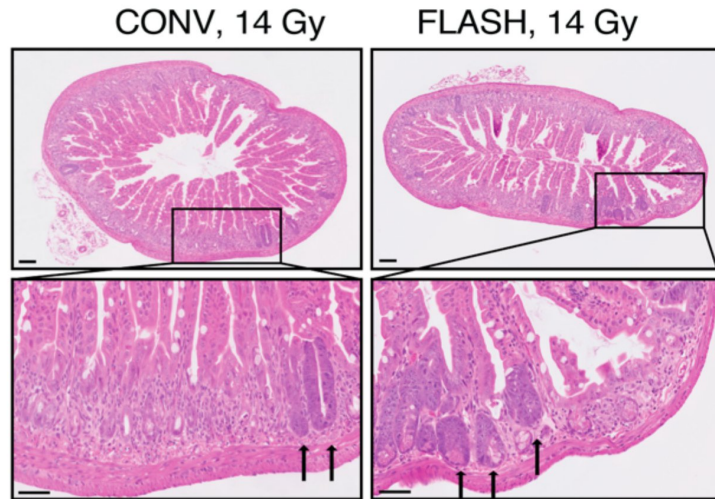
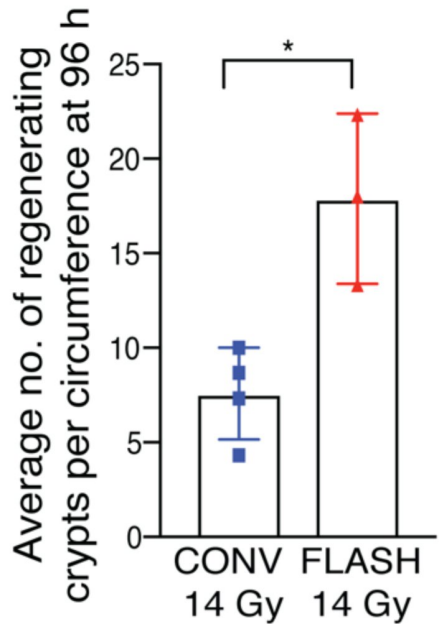


Levy, Natarajan, Wang et al., 2019

# 2. FLASH Irradiation *Gut*

## Regeneration

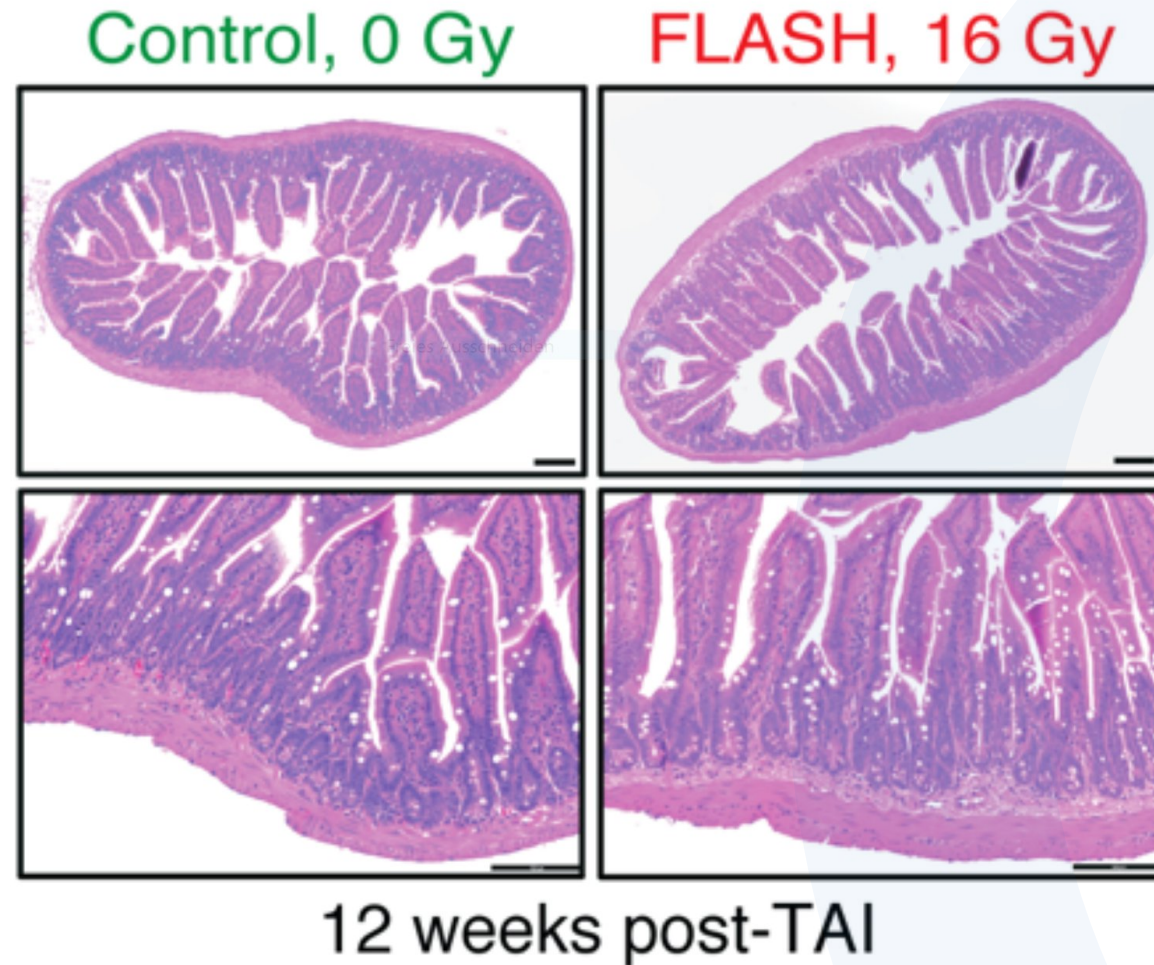
...after 4 days



# 2. FLASH Irradiation *Gut*

## Regeneration

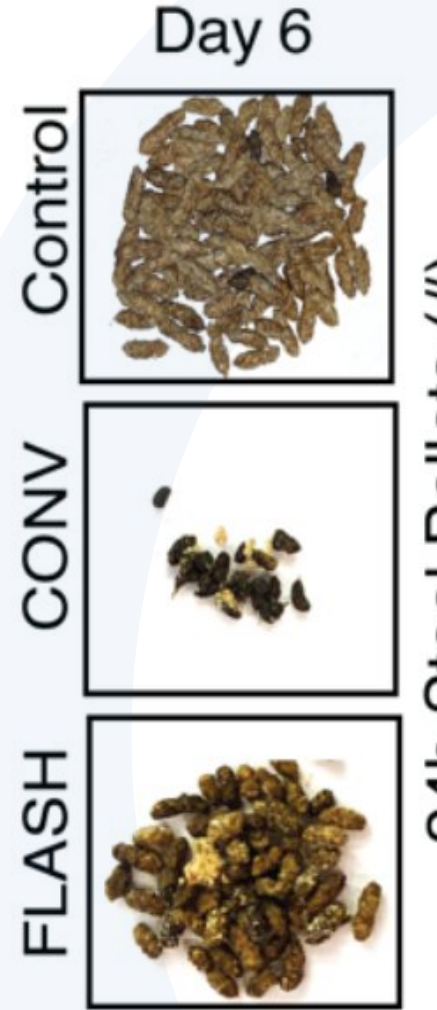
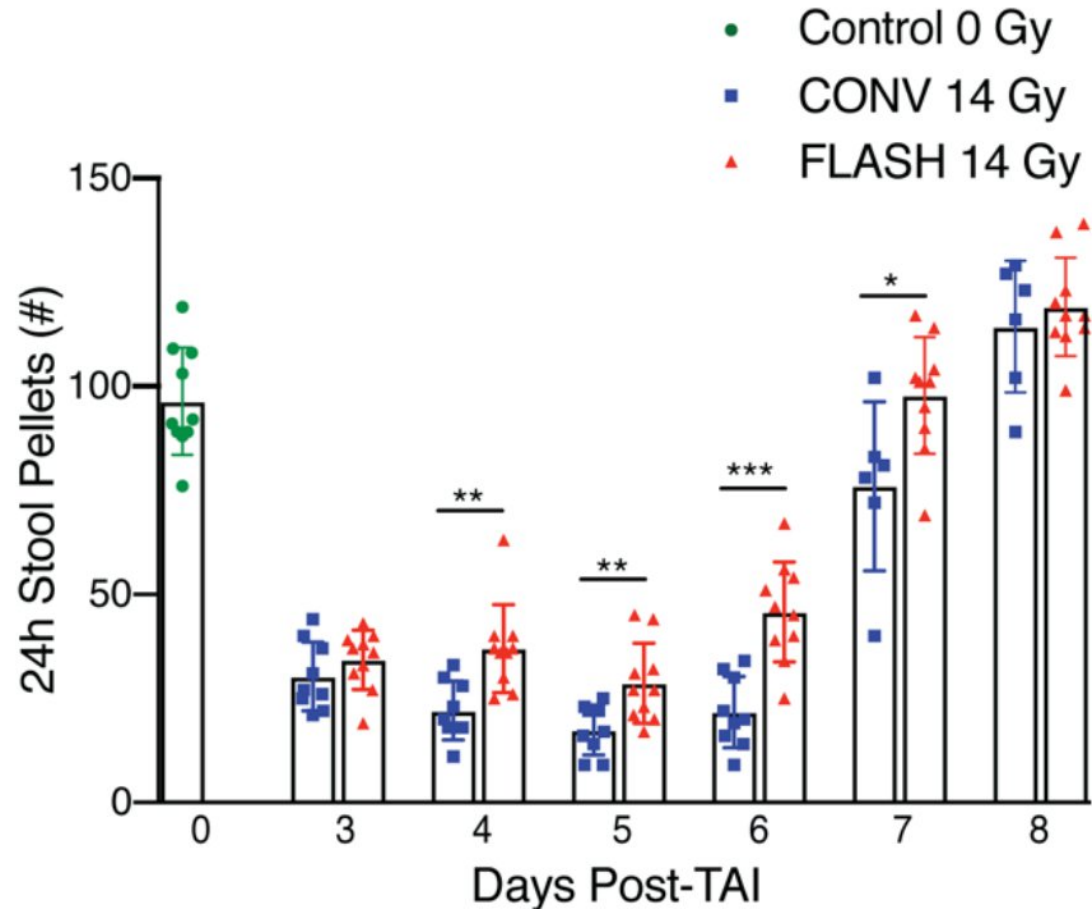
No long term difference



Levy, Natarajan, Wang et al., 2019

# 2. FLASH Irradiation *Gut*

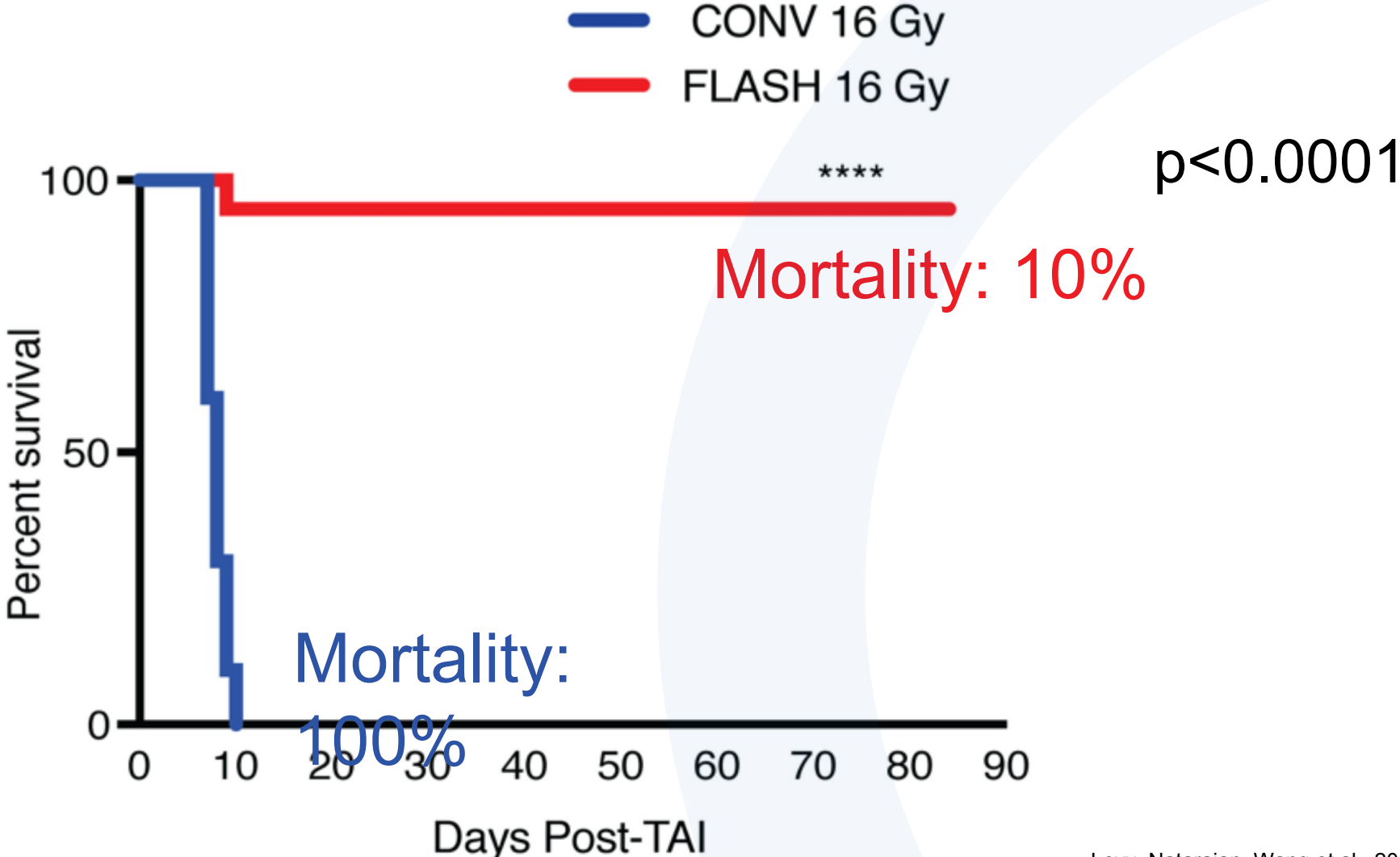
## Intestinal function



Levy, Natarajan, Wang et al., 2019

# 2. FLASH Irradiation *Gut*

## Survival

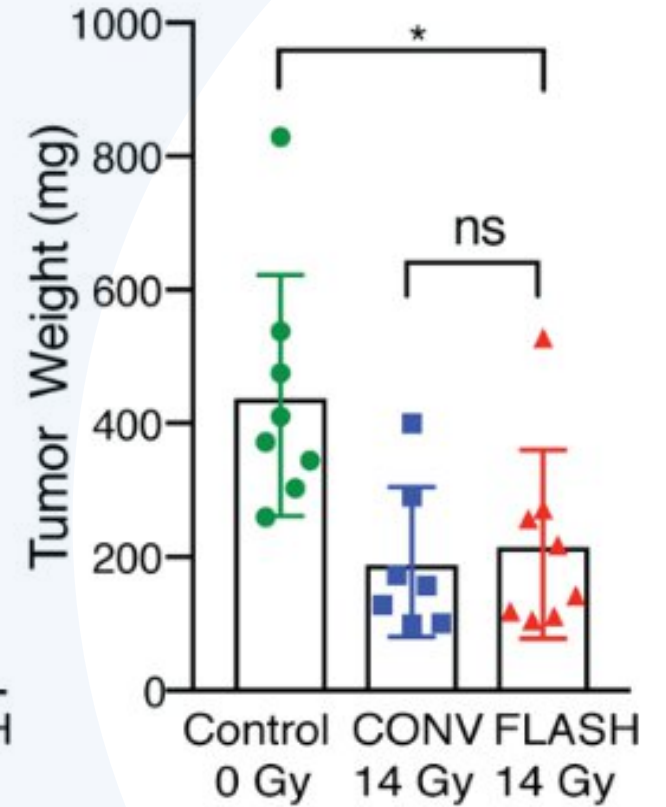
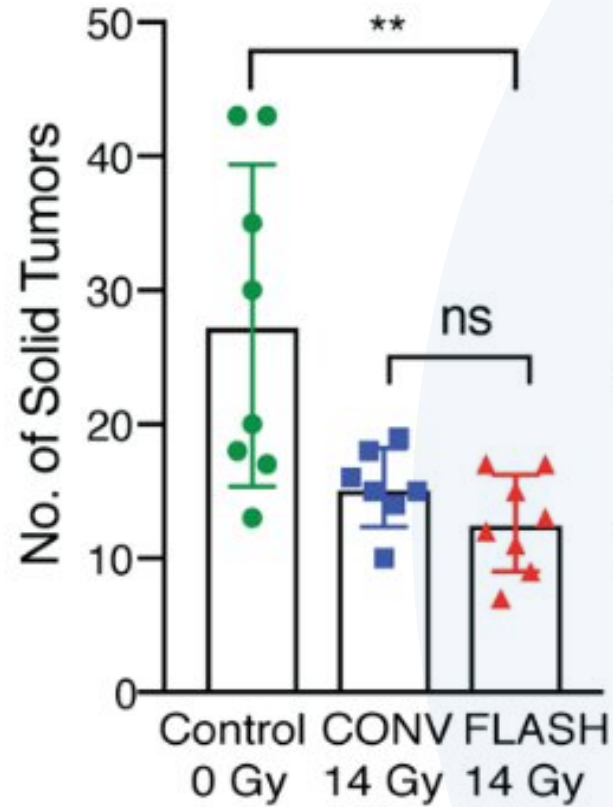
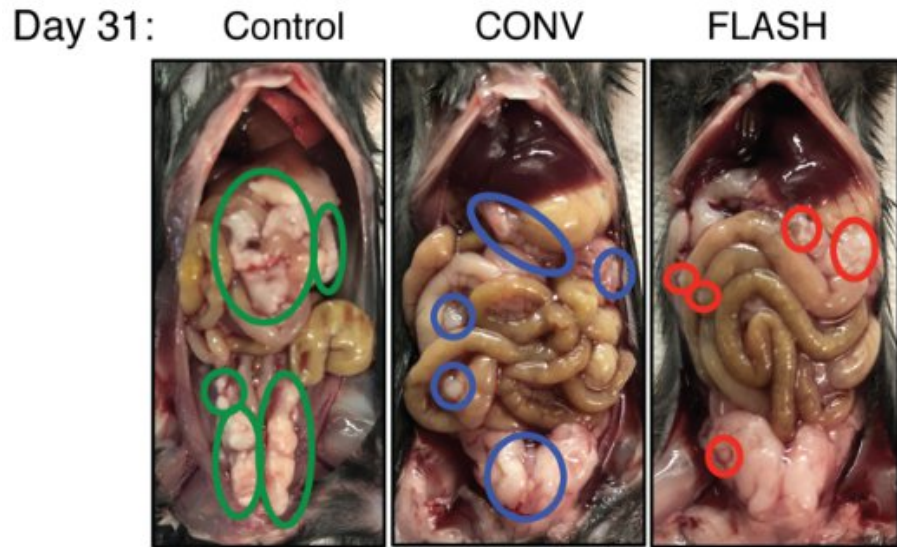


Levy, Natarajan, Wang et al., 2019



# 2. FLASH Irradiation *Gut*

## Tumor control



Levy, Natarajan, Wang et al., 2019

## 2. FLASH Irradiation *Gut*

### Summery

- Less apoptotic cells
- Preserved regenerative capacity
- Better intestinal function
- Less mortality
- Isoeffective tumor control

# 2. FLASH Irradiation *Conclusion*

## Normal tissue

Organ	N (in vivo)	Tier	Outcome better in...
Brain	5x	5x Mouse	FLASH
Lungs	4x	5x Mouse	FLASH
Abdominal	4x	5x Mouse	FLASH
Skin	3x	1x Pig 1x Mouse	FLASH
Total body	3x	1x Mouse 2x Zebrafish	FLASH

J. Hughes, J Parsons et al. 2020

# 2. FLASH Irradiation *Conclusion*

## Tumor

Tumor	Outcome	Literature
Head&Neck cancer	FLASH = CONV	Favaudon et al. 2014
Breast cancer	FLASH = CONV	Favaudon et al. 2014
Ovarial cancer	FLASH = CONV	Levy et al. 2020
Carcinoma nose	-	Vozenin et al. 2019
Glioblastoma	FLASH = CONV	Montay-Gruel et al. 2020
Pancreatic cancer	FLASH = CONV	Diffenderfer et al. 2019
Lung cancer	FLASH = CONV	Favaudon et al. 2014,

J. Hughes, J Parsons et al. 2020

# 2. FLASH Irradiation *Conclusion*

Table 1. Evidence of normal tissue sparing from FLASH irradiation.

Model (Site of Irradiation)	Assay/Endpoint	Dose (Gy)	Dose Rate (Gy/s)	Radiation Source	Reference
Mice (WBI) <sup>1</sup>	Memory tests, neurogenesis	10	>100	Electron	[13]
Mice (WBI) <sup>1</sup>	Neurocognitive tests, mature/immature neurons, growth hormone levels	8	4.4 × 10 <sup>6</sup>	Electron	[22]
Mice (WBI) <sup>1</sup>	Neurocognitive tests, dendritic spine density, microglial activation, inflammation	30	200/300	Electron	[20]
Mice (WBI) <sup>1</sup>	Neurocognitive tests, neuroinflammation,	10	>100	Electron	[23]
Mice (abdomen)	Survival, stool production, crypt cell regeneration, apoptosis, DNA damage	12–16	216	Electron	[18]
Mice (abdomen)	Intestinal crypt cell proliferation	15 Gy	78	Proton	[27]
Mice (local intestinal)	Fibrosis	18 Gy	78	Proton	[27]
Mini-pig (skin)	Skin toxicity/injury	22–34	300	Electron	[14]
Zebrafish Embryo	Morphology	8	>100	Electron	[23]

<sup>1</sup> WBI refers to whole brain irradiation.

Electrons  
(60-70%)

Protons  
(20-30%)

X-Ray  
(5%)

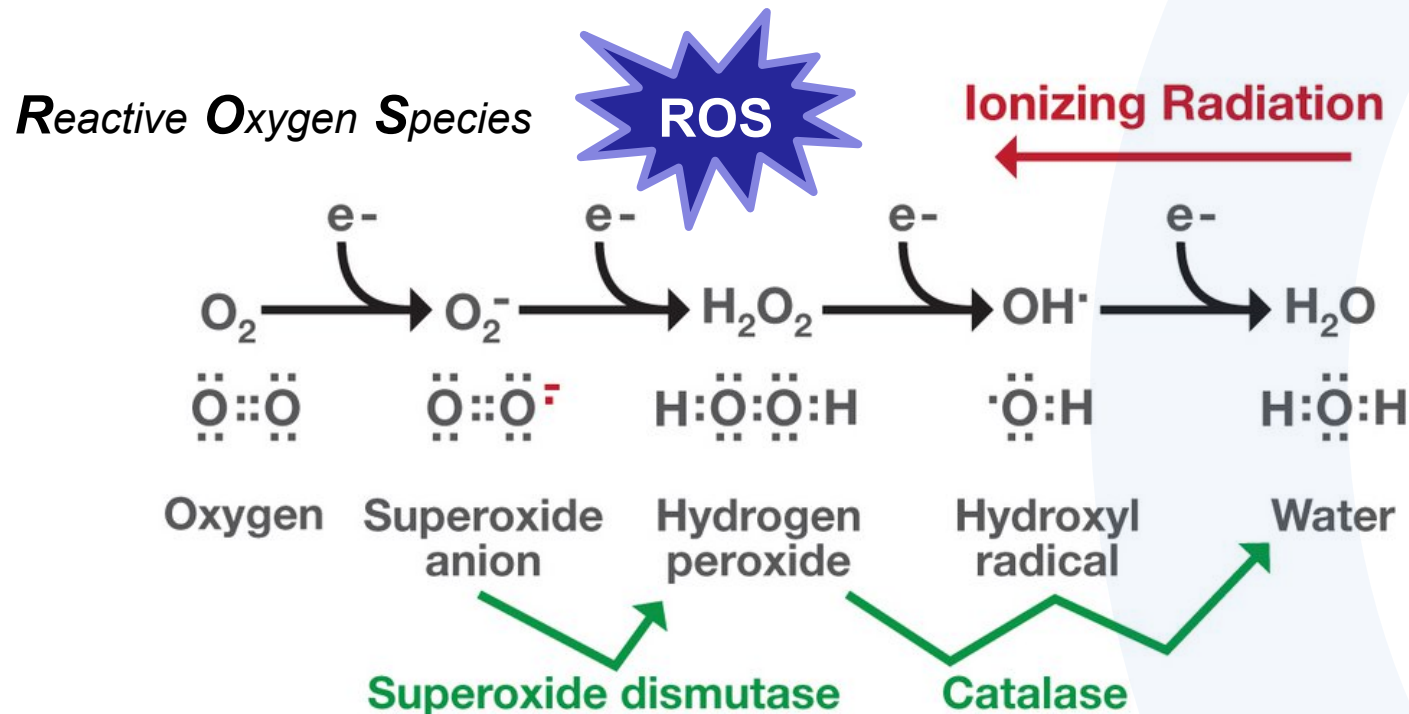
Table 2. Evidence of tumor control from FLASH irradiation.

Model	Assay/Endpoint	Dose (Gy)	Dose Rate (Gy/s)	Radiation Source	Reference
(local)	Tumor growth	25–41	150–330	Electron	[14]
Human, CD30+ T-cell cutaneous lymphoma	Tumor response	15	167	Electron	[15]

# 2. FLASH Irradiation *Conclusion*

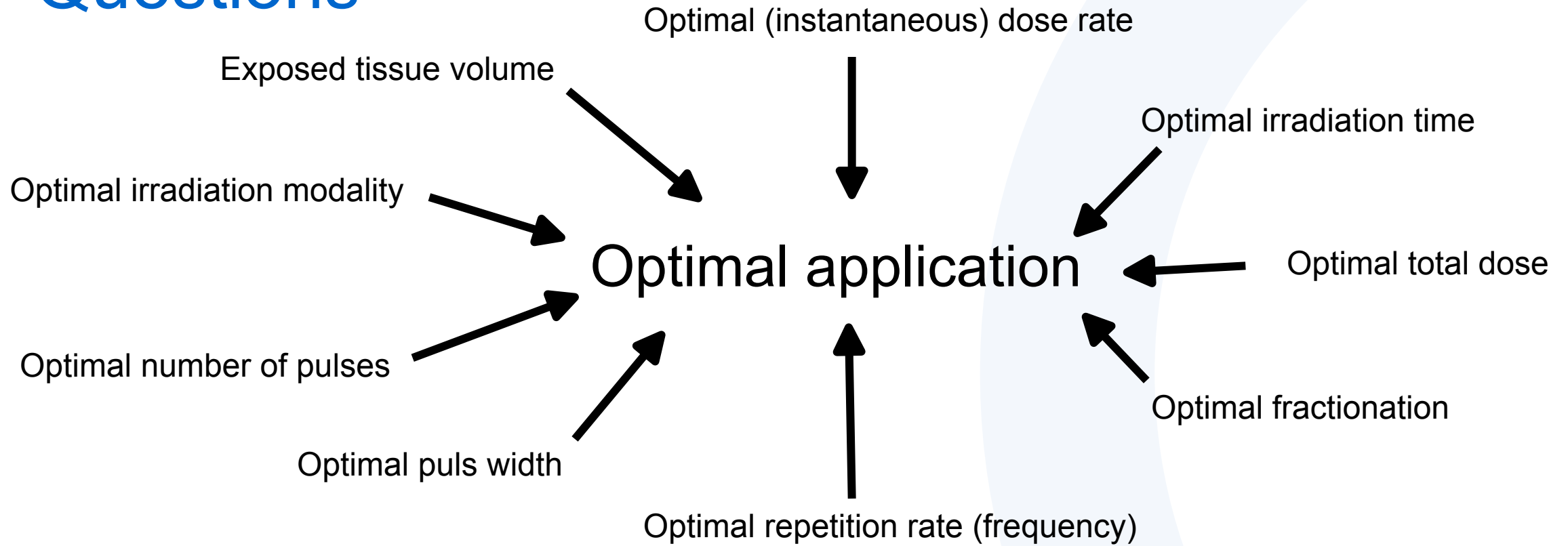
## Biggest Questions

What is the reason for the FLASH effect?



# 2. FLASH Irradiation *Conclusion*

## Biggest Questions













Montay-Gruel P et al., 2020

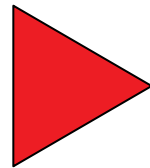
# 2. FLASH Irradiation *Conclusion*



The most common cancers are:    The most common causes of cancer death are:

Tumor side	cases
 Lung	2.090 k
 Breast	2.090 k
 Colorectal	1.800 k
 Prostate	1.280 k
Skin (non-melanoma)	1.040 k
 Stomach	1.030 k

Tumor side	Deaths
 Lung	1.760 k
 Colorectal	862 k
 Stomach	783 k
 Liver	782 k
 Breast	627 k



and many more!



# 3. FLASH Network

*Benefits of  
collaboration*

# 3. FLASH Network

## Projects at Charité

The effect of FLASH irradiation with protons on normal eye tissue of mice

Our hypothesis:

FLASH reduces the blindness after irradiation

Our methods:

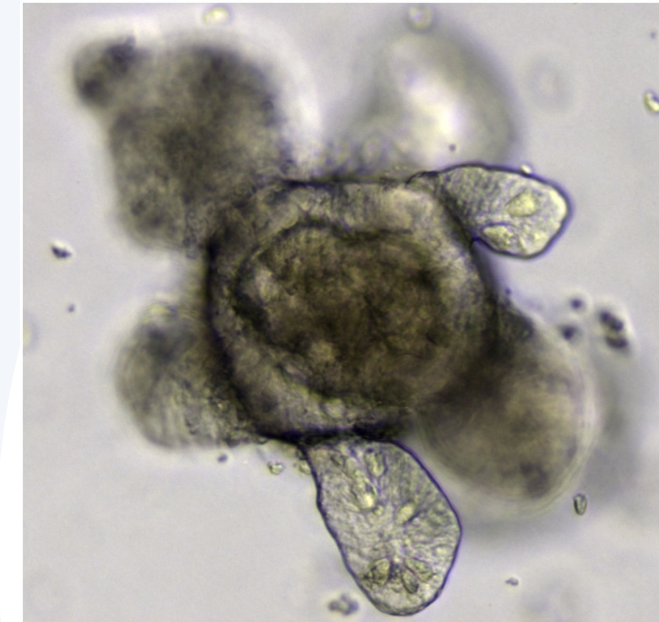
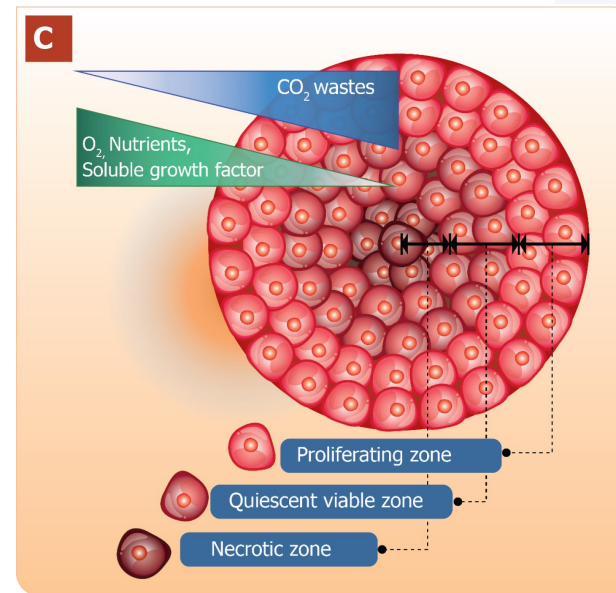
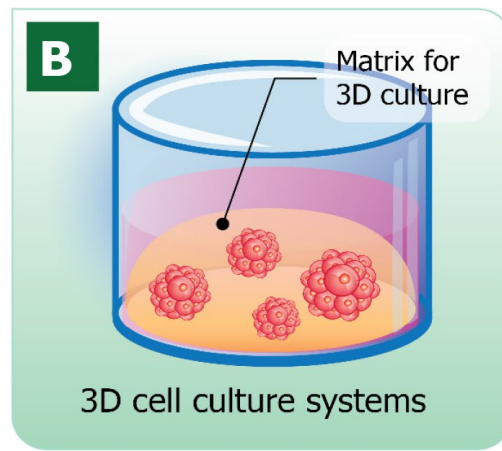
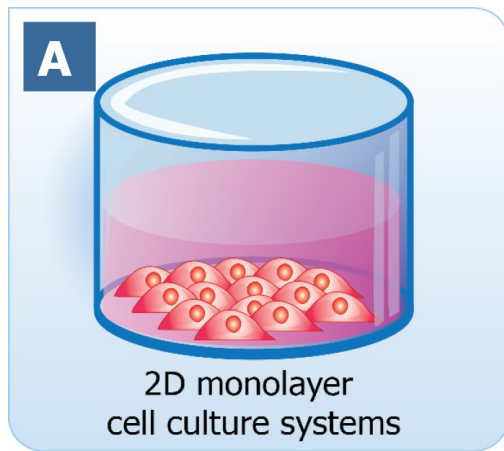
- Unilateral eye-irradiation of 80 mice
- Control of lens opacity and retinal damages after six month

**Current state:**

- All mice were irradiated
- All mice tolerated the irradiation well
- The investigations are still ongoing
- The first results are expected in a few month

# 3. FLASH Network *Projects*

The effect of FLASH irradiation (with protons) on normal tissue organoids and cancer spheroids



# 3. FLASH Network *Projects*

The effect of FLASH irradiation (with protons) on normal tissue organoids and cancer spheroids

The idea:

The reduction of animal studies and the development of alternative methods.

Our methods:

- Irradiation of different organoids with protons and photons at different dose rates.
- Analysis of cell changes after irradiation using histological and molecular markers.

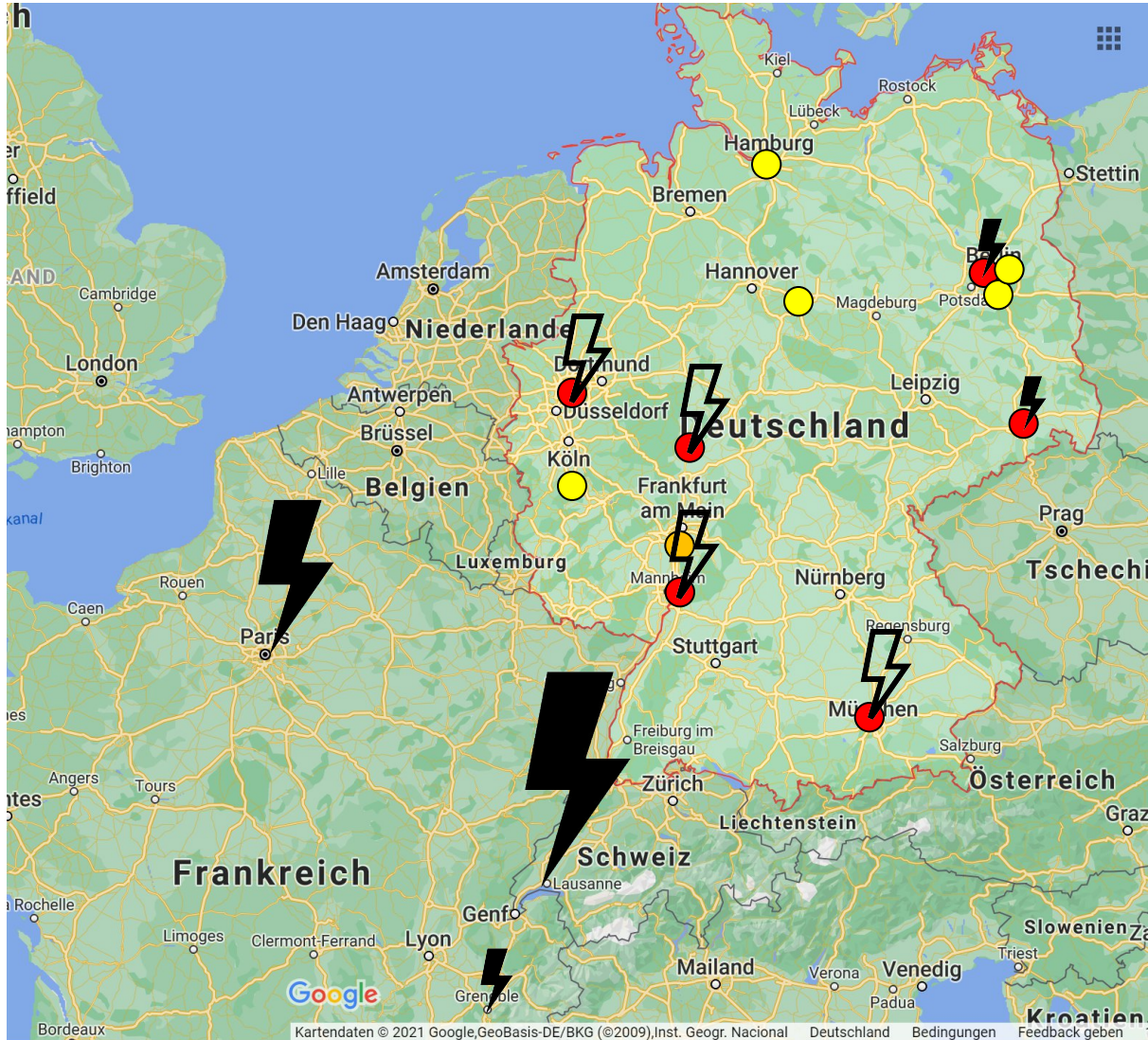
**Current state:**

- First organoids were successfully irradiated
- Results are expected in a few weeks
- Many more interesting organoid models (>15) to test

# 3. FLASH Network

*But why should we collaborate?*

# 3. FLASH Network *Collaboration*



● Particle therapy facilities in clinical operation

● Nuclear research facilities and other particle accelerators

⚡ FLASH facilities (published data)

⚡ Ongoing FLASH experiments expected

# 3. FLASH Network *Collaboration*



**HELMHOLTZ**

SPITZENFORSCHUNG FÜR  
GROSSE HERAUSFORDERUNGEN

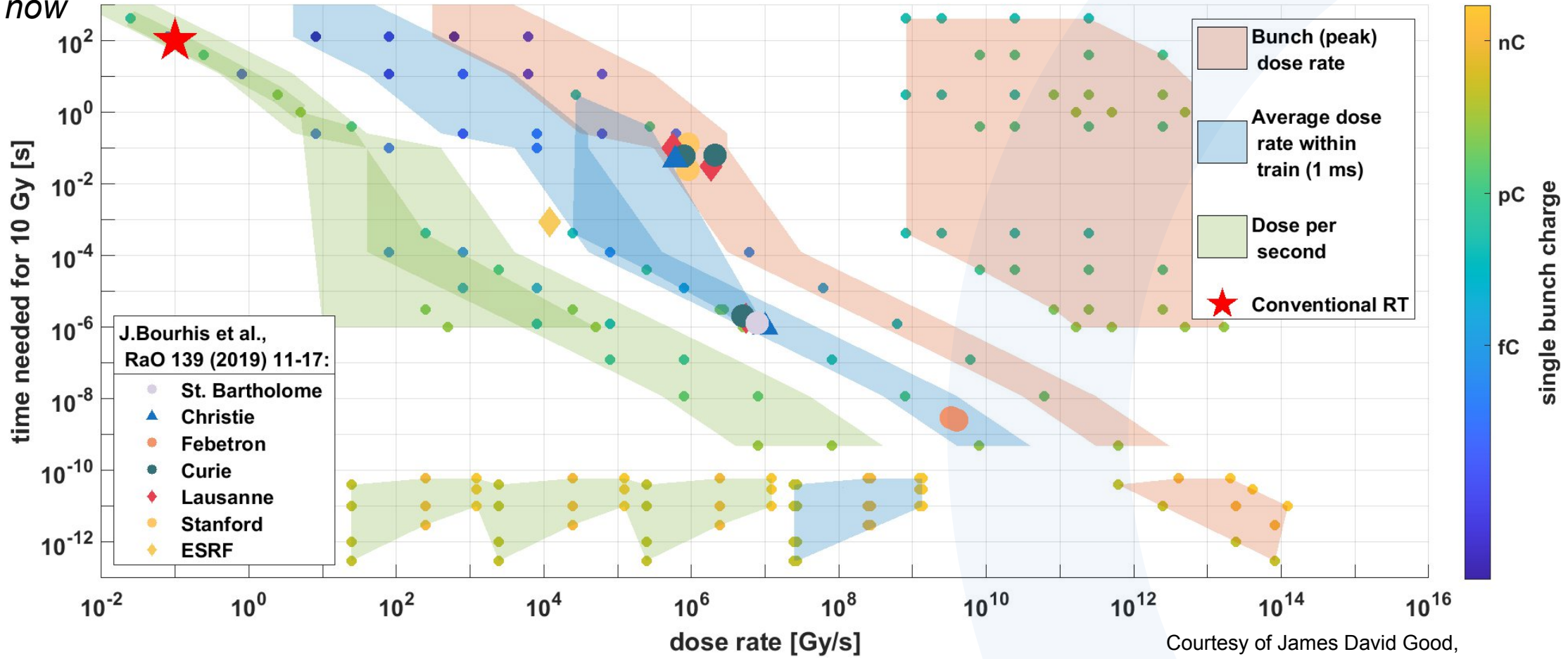


**HZB** Helmholtz  
Zentrum Berlin

# 3. FLASH Network *Collaboration*

## Parameter space available at PITZ *In comparison with the state-of-*

*art up to now*



Courtesy of James David Good, Marie-Catherine Vozenin, Jean-Francois Germond



Thank  
you!