## Master's Thesis Engineering Technology

2022-2023

# **Optimalisation of a Monte Carlo model regarding** skin treatment using the XOFT® AXXENT® ELECTRONIC BRACHYTHERAPY (EBX®) SYSTEM®

#### Sander Grosemans

Master of Nuclear Engineering Technology

### 1. Introduction

Brachytherapy has emerged as a promising treatment modality for nonmelanoma (NMSC) skin lesions due to its excellent dose conformality.

Nevertheless, the **radioactive** nature of the **sources** typically used in brachytherapy entails several inherent disadvantages including:

- a high potential **risk** for the patient in case of system failure;
- the inability to account for inhomogeneities and differences in radiosensitivity between different tissues.

In response, electronic brachytherapy (eBT) systems replaces these sources with x-ray tubes.

### 4. Conclusion

The differences between the measured transverse dose profiles using EBT3 films and the simulated dose profiles using the final TOPAS MC model **do not exceed the limit** of 10%. Therefore, the final TOPAS MC model has been successfully validated for predicting transverse dose profiles.

This thesis aims to improve an existing Monte Carlo (MC) model of the XOFT Axxent Electronic Brachytherapy (eBx) System to produce simulated transversal dose profiles that are within 10% of measured transversal dose profiles.



3. Results

The final TOPAS MC model included a circular electron beam with :

- a diameter of 1.596944 mm;
- a Gaussian angular distribution of the electrons with a mean ( $\mu$ ) of 0° and a standard deviation ( $\sigma$ ) of 45°;
- a smaller particle cutoff equal to  $1 \, \mu m$ .

Figure 5, 6 and 7 show the measured and simulated transversal dose profiles for the setups in air, on the phantom surface and at 1 cm depth inside this phantom. The maximal discrepancies were 6.3% at 12.5 mm in air, 5.0% at 11.7 mm on the phantom surface, and **3.0%** at 12.5 mm at 1 cm depth inside the phantom.

# 2. Materials & methods

EBT3 films were used to measure the absorbed dose by the skin during a treatment, while a virtual scorer calculated the absorbed dose in the skin from a simulated treatment.



Both real and simulated treatments were conducted in three setups: (1) in air, (2) on the surface of a 10x10x4 cm Plastic Water LR phantom, and (3) at a depth of 1 cm inside the phantom.





Transversal dose profiles were evaluated at radii every 1 **mm**, with the **centre** aligned with the **x-ray beam axis**. After comparing corresponding measured and simulated profiles, the TOPAS MC model was iteratively refined by changing the design of the **electron beam**.

Air

#### Phantom surface

1 cm depth



#### Supervisors / Co-supervisors / Advisors **Brigitte Reniers Dries Colson**







