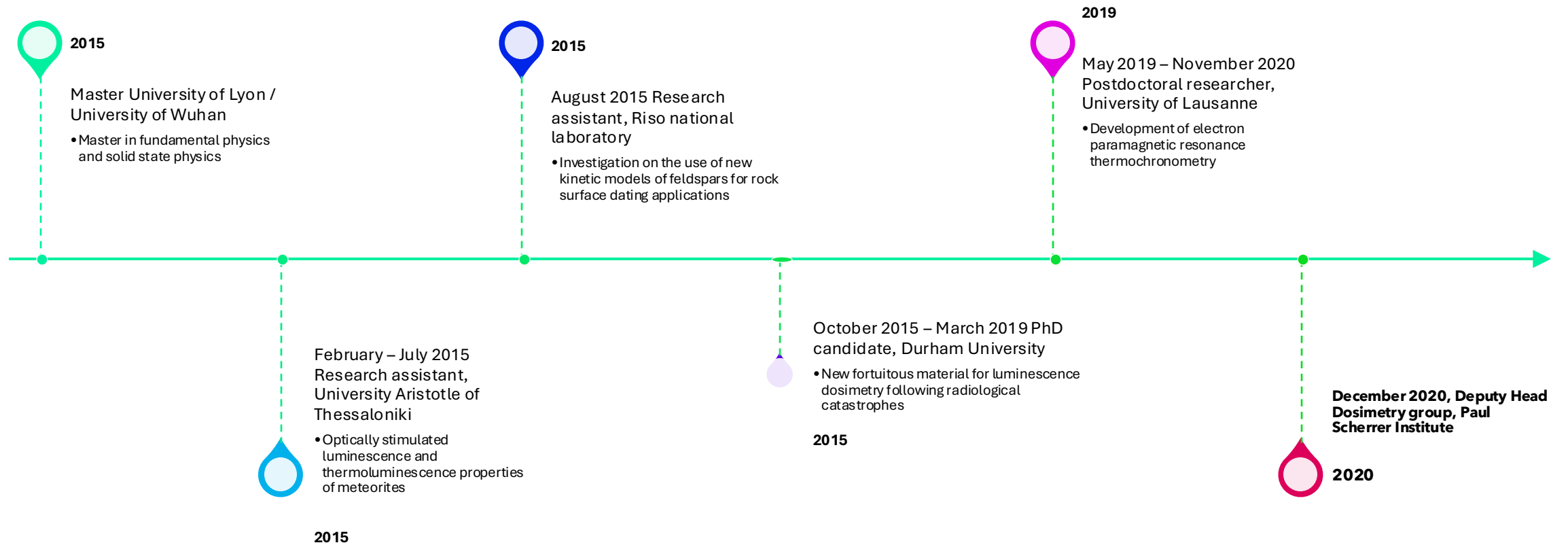


Luminescence dosimetry

Lily Bossin
EPFL, 6 Dec 2024

Who am I?



The Paul Scherrer Institute (PSI)



← Basel

Germany ↑

Aarau/Bern ↓

Zurich →



Section Messwesen: Our responsibilities (highlights)

Personal and environmental dosimetry



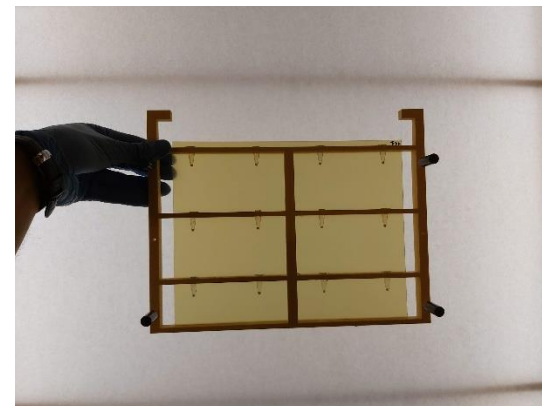
Calibrations and verifications



Development of calibration methods



Support for experiments



External personal dosimetry for PSI
employees and external customers
(ETH, research institutes,...)



Reporting to the authorities
(central dose registry)



Internal dosimetry



Whole body counter



Thyroid counter



*Urine and excretion
analysis*

Neutron dosimetry (only service in CH)



Poly-Allyl Diglycol Carbonate (PADC)

Research on new instrumentation and
methods



BeO OSL system

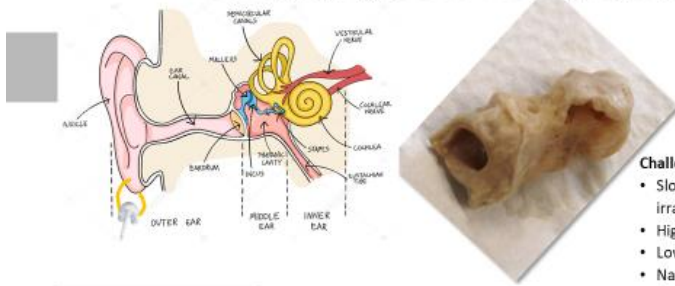


*Fluorescence Nuclear
Track Detectors*

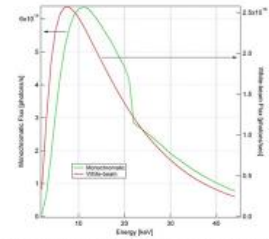
Supporting research at PSI...

Supporting research at PSI

Dosimetry for Dynamic X-Ray Tomography (DYNAMYTE project)



- Challenges**
- Slow shutter (>1 s opening; long irradiations)
 - High doses/dose rates
 - Low energy
 - Narrow field

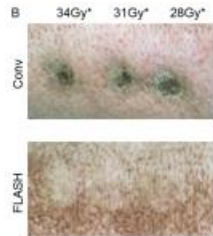


<https://www.psi.ch/en/sls/tomcat>

Support for FLASH radiobiology experiments

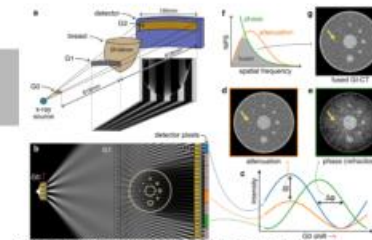
The advantage of FLASH radiotherapy confirmed in mini-pig and cat-cancer patients

Maria-Catherine Vigneron^{1*}, Pascale De Ferra^{1*}, Kristoffer Petersen^{1,2*}, Vincent Escandon¹, Maud Jaccard¹, Jean-François Geronzi¹, Benoit Petit¹, Marco Barbi¹, Giulio Fenucci¹, David Petit¹, Hans Bouckamp¹, Meline Oudizien¹, François Bochot¹, Claude Barla¹, Patrick Devicqhe¹ and Jean Bourhis^{1,2*}

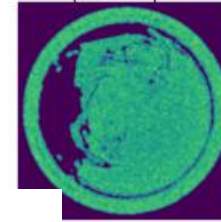


Christensen et al. (2021) Phys. Med. Biol. 66, 085003.

Paul Scherrer Institute PSI



Geant4 simulations of a segmented breast (Kantonspital Baden)



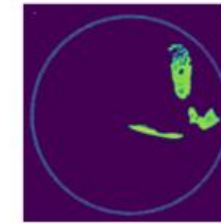
16 cm

- > CT scan
-> simulations of dose to
- adipose tissue
 - glandular tissue
 - microcalcifications



Evaluation of radiation levels in biological samples?

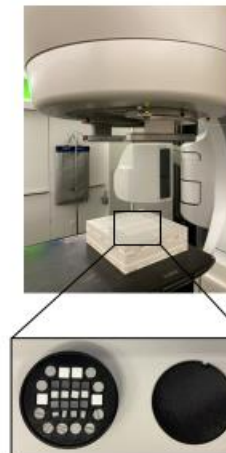
Simulations of a segmented ear



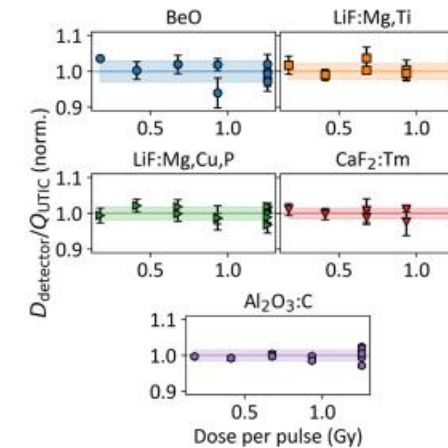
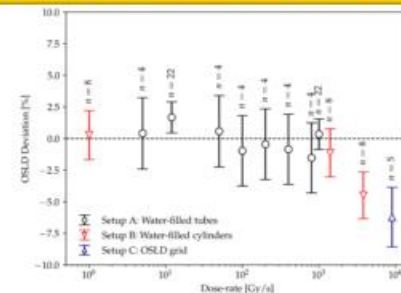
16 cm

Dose rate dependence of luminescence detectors (electrons) - USZ

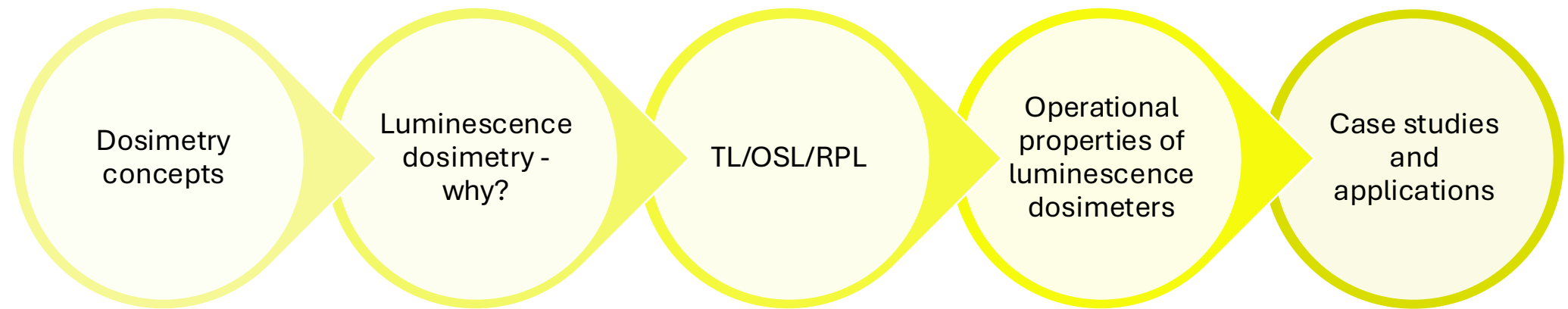
Medical LINAC converted for FLASH studies



Any dose rate effect in luminescence detectors?



Outline



I. Dosimetry concepts

I. Dosimetry
concept

II. Luminescence Dosimetry - Why?

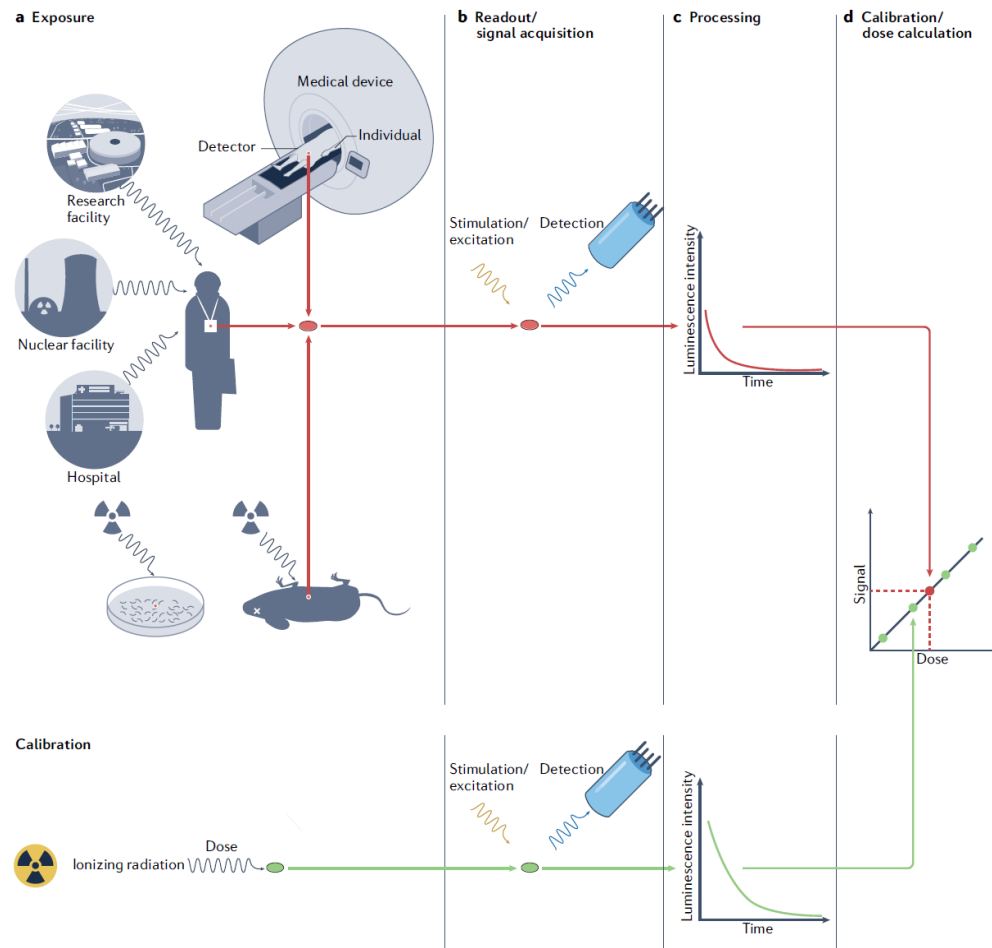
III. TL, OSL, RPL

IV. Operational properties

V. Case studies

What is dosimetry?

“quantification of the energy deposited in a living or inanimate object from a radiation field in order to estimate, predict or limit the effect of radiation”

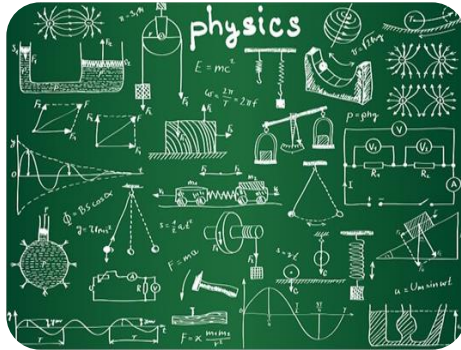


Dosimetry can be...
(find adjectives)

Adjectives

- Passive
- Active
- Computational
- Retrospective
- Accident
- Luminescent
- Personal
- Environmental
- In-vivo
- Clinical
- Off-line
- Real-time
- Three-dimensional
- Neutron
- Gamma
- Etc.

Quantities in dosimetry



Physical quantities

- Fluence Φ
- Kerma K
- Absorbed dose D
- Linear energy transfer LET
- Etc.

Radiation Protection Quantities

- Organ equivalent dose H_T
- Effective dose E
- Committed dose E_{50}

Operational quantities

- Personal dose equivalent $H_p(10)$, $H_p(0.07)$, $H_p(3)$
- Ambient equivalent dose $H^*(10)$

I. Dosimetry concept

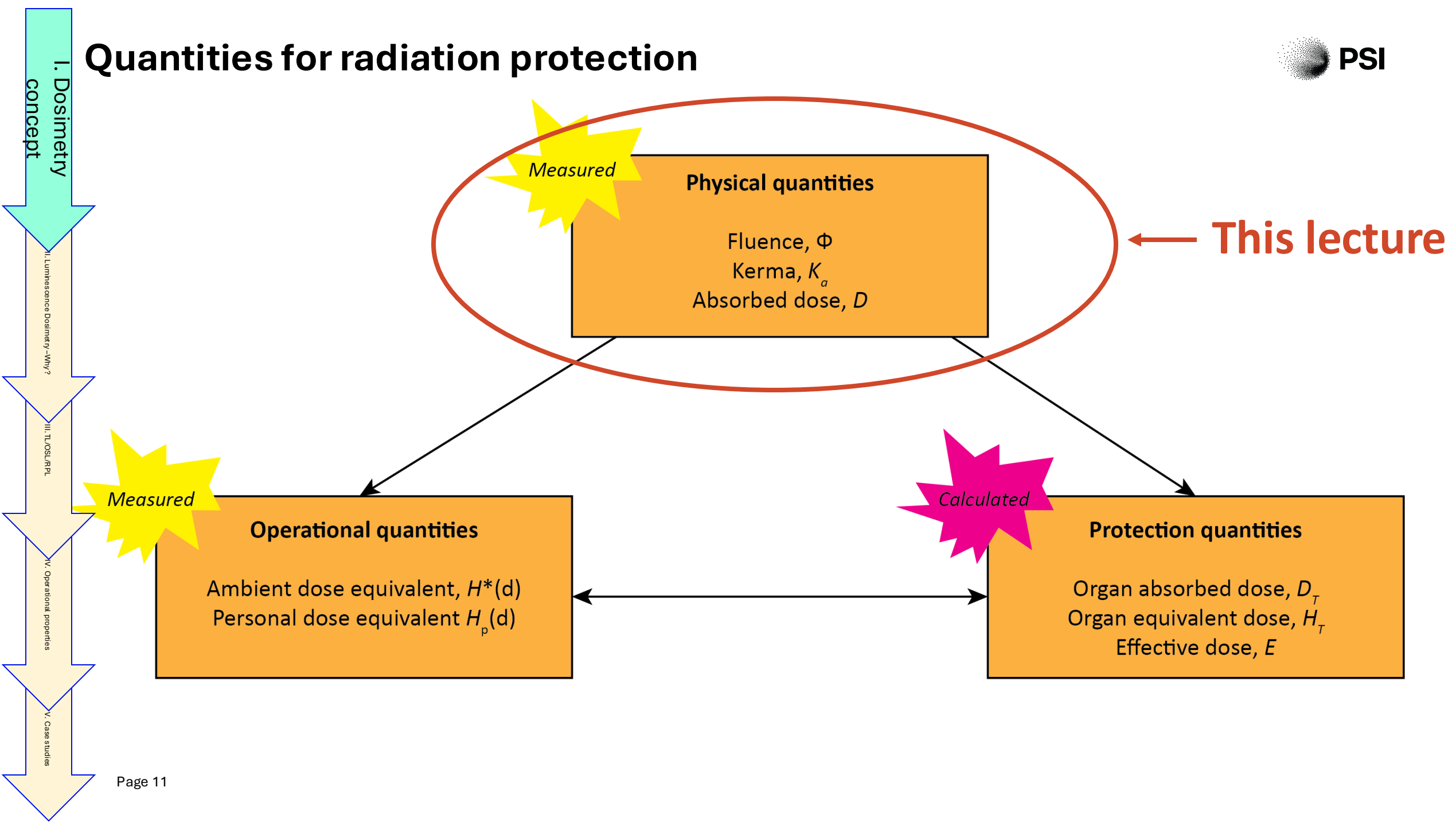
II. Luminescence Dosimetry - Why?

III. TL, OSL, RPL

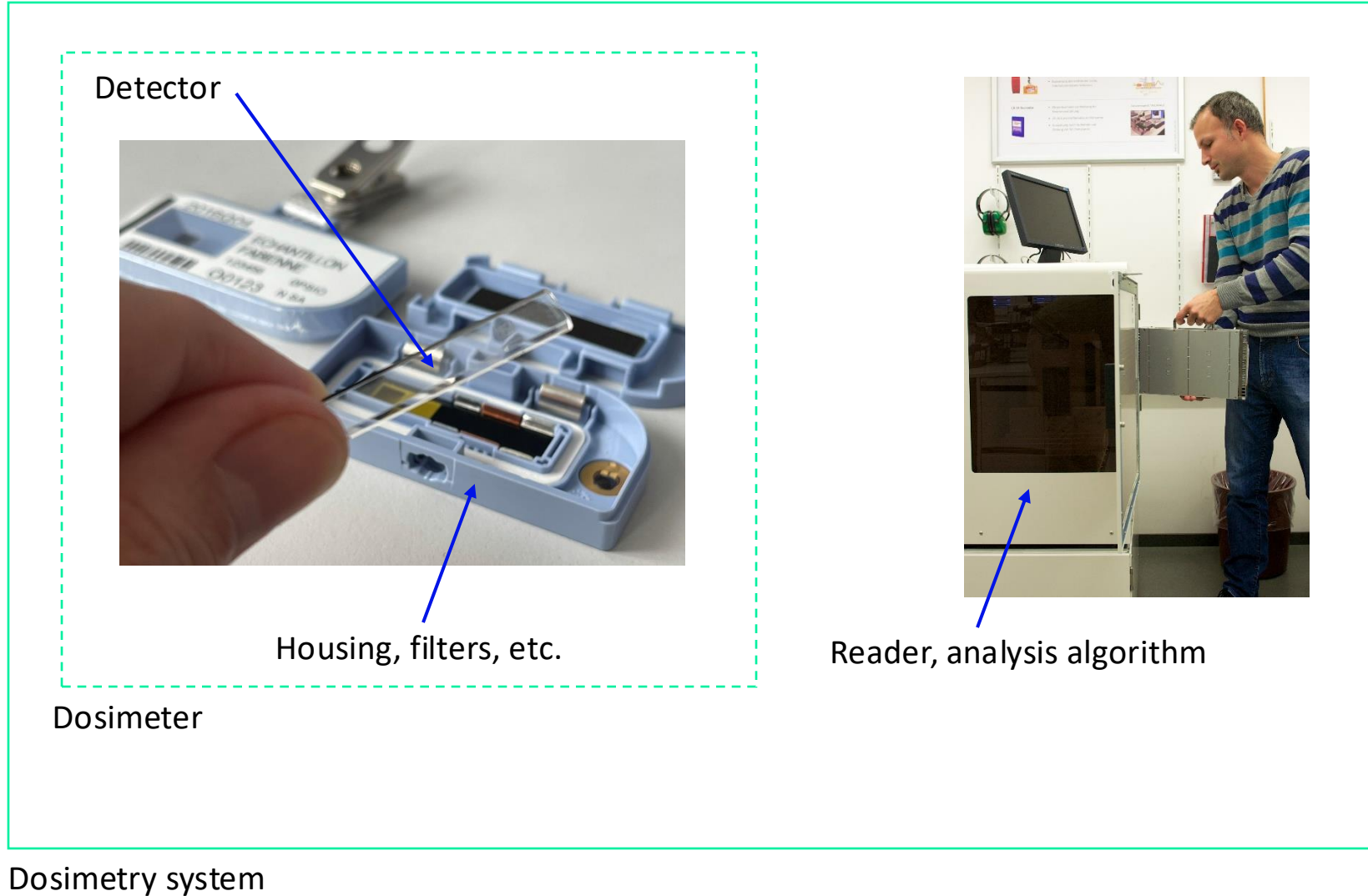
IV. Operational properties

V. Case studies

Quantities for radiation protection



Detector/dosimeter/dosimetry system



I. Dosimetry
concept

II. Luminescence Dosimetry - Why?

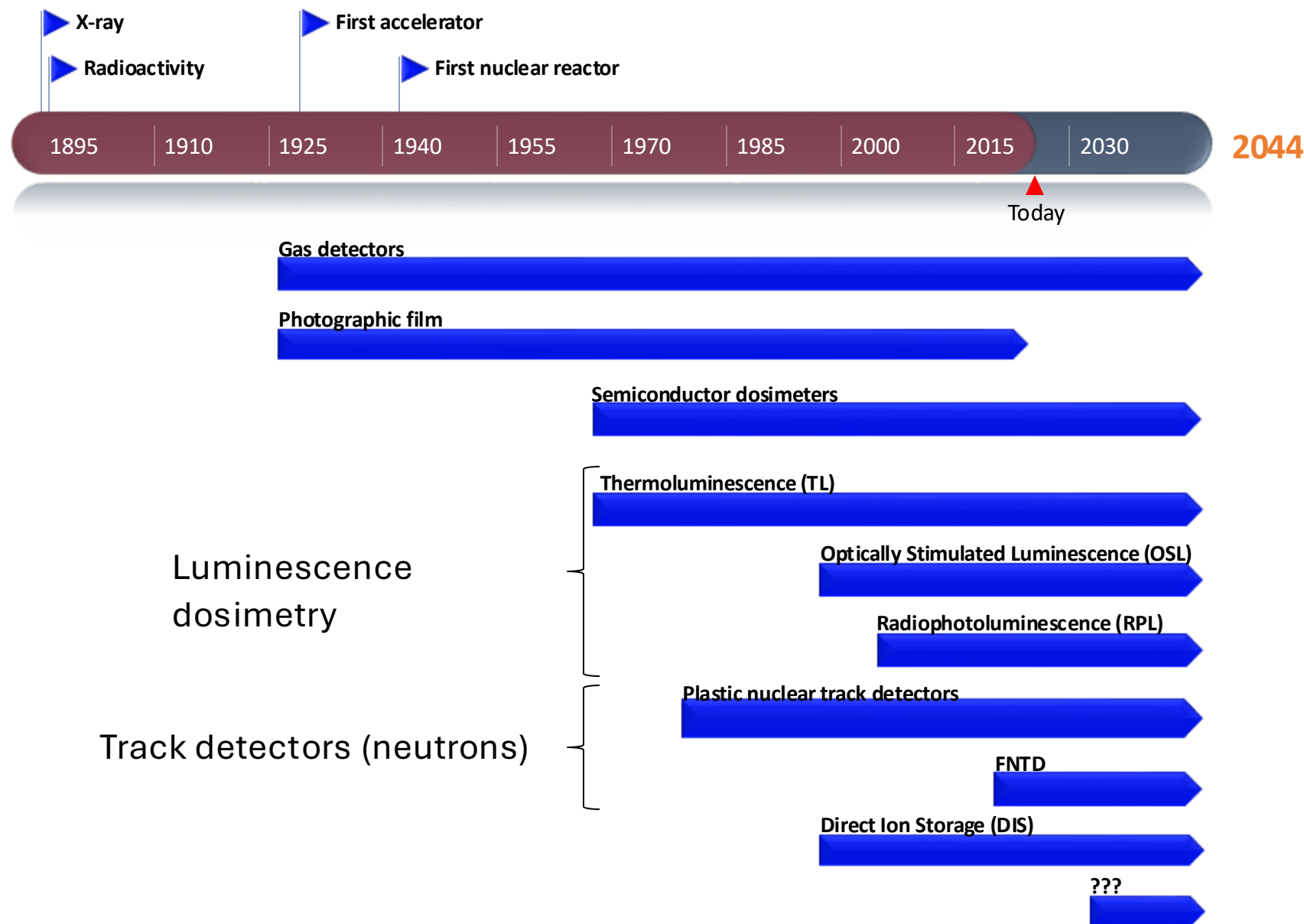
III. TL, OSL, RPL

IV. Operational properties

V. Case studies

What happens inside the detector?
How do we assess the fluence?
How do we assess the LET?
How do we get the absorbed dose?

Technologies in individual monitoring



I. Dosimetry concept

II. Luminescence Dosimetry - Why?

III. TL, OSL, RPL

IV. Operational properties

V. Case studies

II. Luminescence dosimetry - why?

I. Dosimetry concept

II. Luminescence
Dosimetry - Why?

III. TL/OSL/RPL

IV. Operational properties

V. Case studies

Means to measure ionising radiation



I. Dosimetry concept

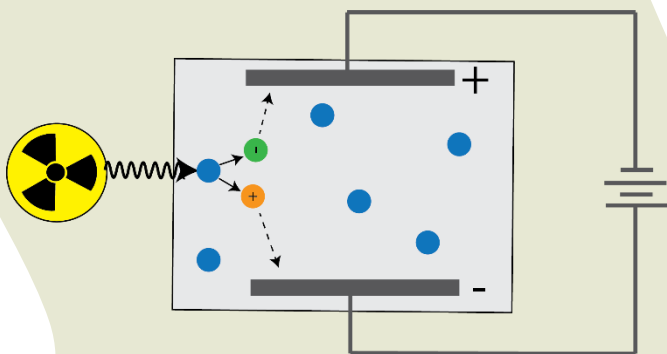
II. Luminescence Dosimetry – Why?

III. TL/OSL/RPL

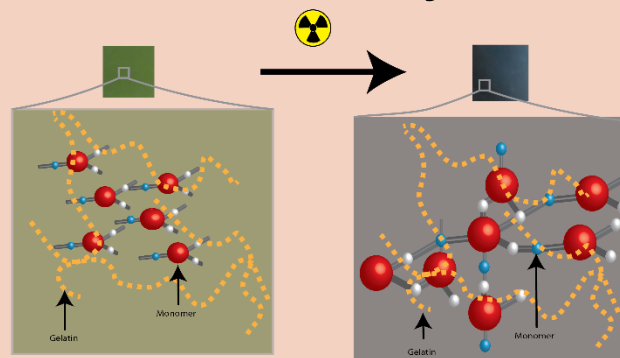
IV. Operational properties

V. Case studies

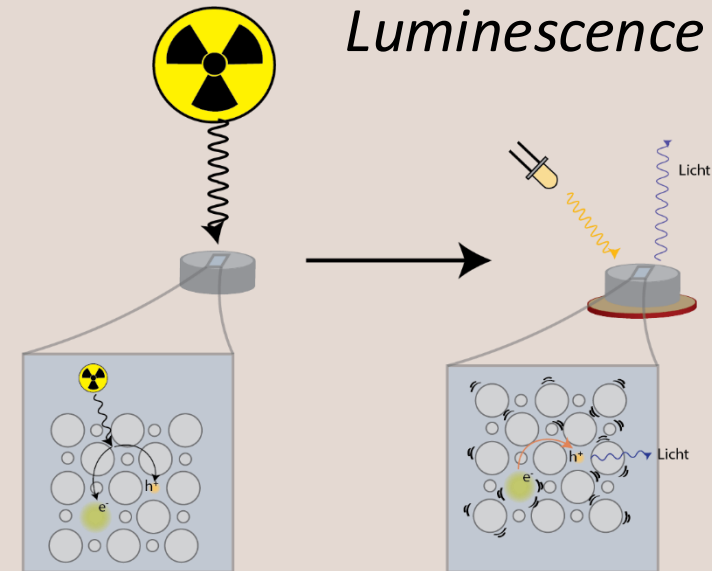
Ionisation chamber



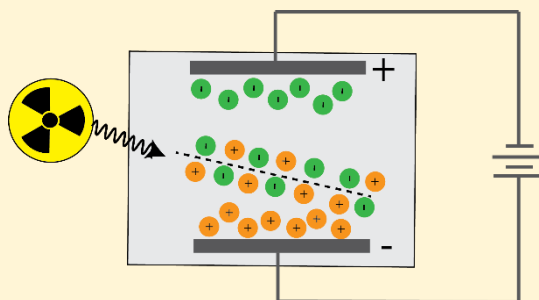
Radiochromic film



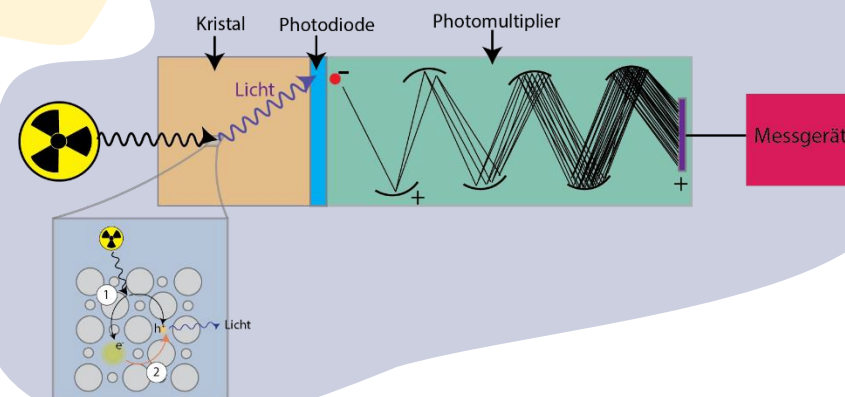
Luminescence



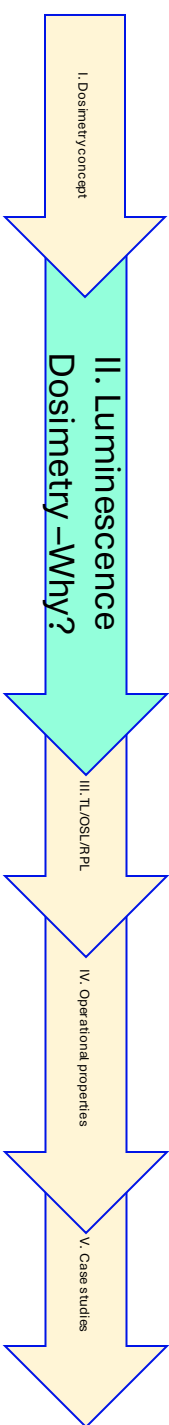
Semi conductor detector



Scintillation counter



Advantages of luminescence dosimetry



Small detectors

No cables

Precision and accuracy

Convenience (easy to read)

Similar to tissue or water

Minimal influence of magnetic field

Supposedly minimal influence of dose rate

No choice but luminescence dosimetry

I. Dosimetry concept

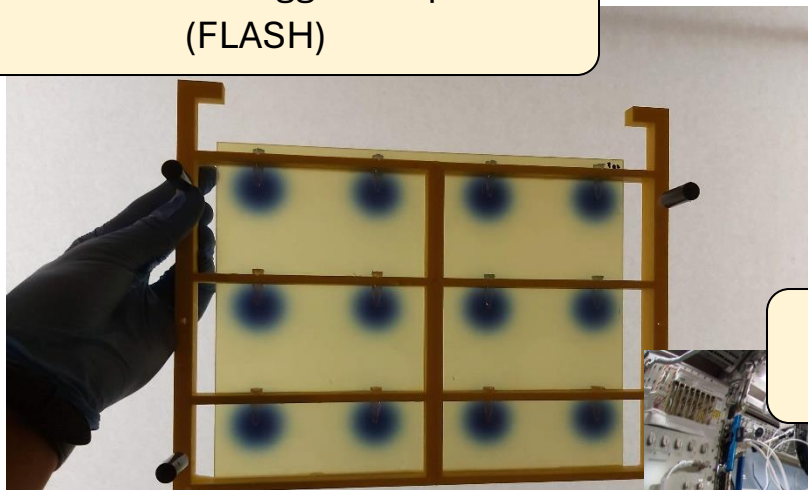
II. Luminescence Dosimetry – Why?

III. TL/OSL/RPL

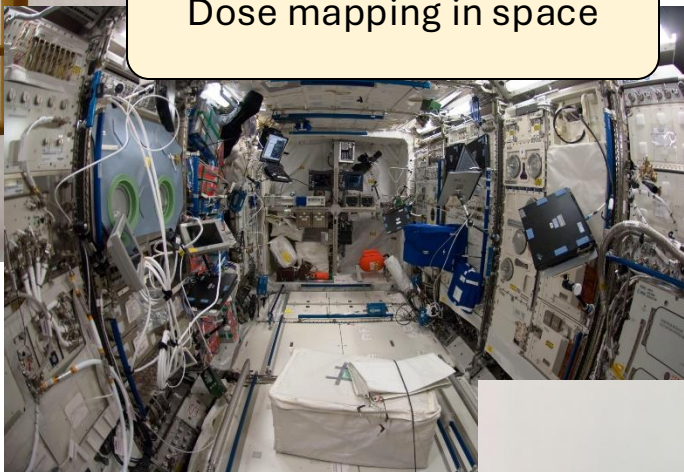
IV. Operational properties

V. Case studies

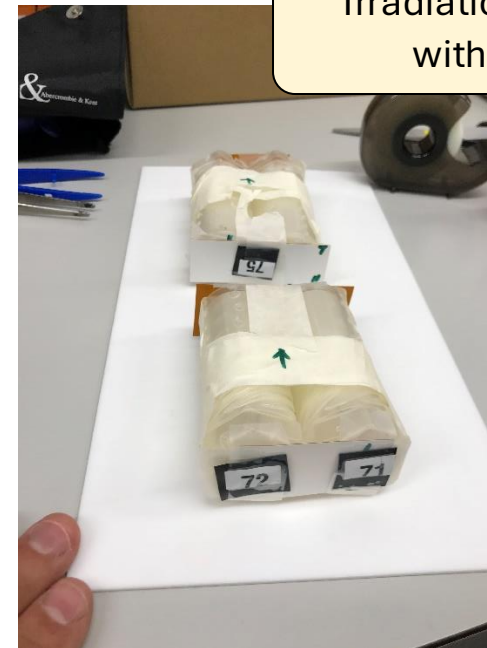
Irradiation of fish eggs with protons (FLASH)



Dose mapping in space



Irradiation of mice with pions



Dose mapping in phantoms



Extremity dosimetry



I. Dosimetry concept

II. Luminescence Dosimetry - Why?

III. TL/OSL/RPL

IV. Operational properties

V. Case studies

III. TL/OSL/RPL

Examples of luminescent detectors

I. Dosimetry concept

II. Luminescence Dosimetry - Why?

III. TL/OSL/RPL

IV. Operational properties

V. Case studies

Thermoluminescence (TL) detectors
TLDs

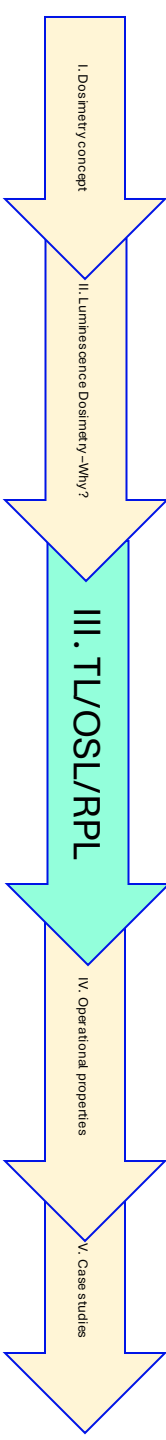


Optically stimulated luminescence (OSL) detectors
OSLDs



Radiophotoluminescence (RPL) detectors - RPLGD





How do they work?

A perfect crystal

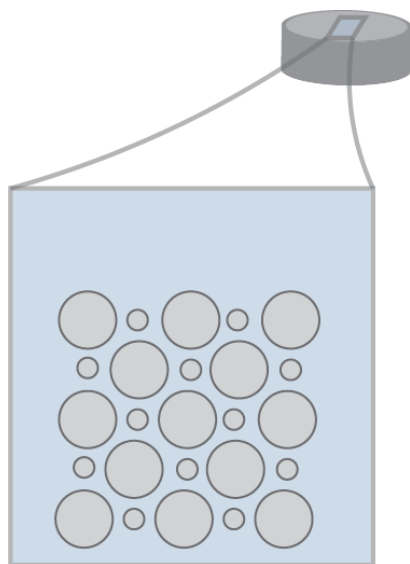
I. Dosimetry concept

II. Luminescence Dosimetry - Why?

III. TL/OSL/RPL

IV. Operational properties

V. Case studies

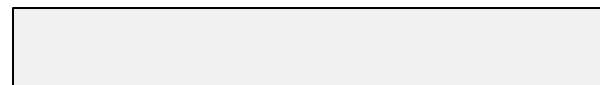


How do you represent the energy levels in a crystal?

Conduction band



Valence band



Band gap



An imperfect crystal

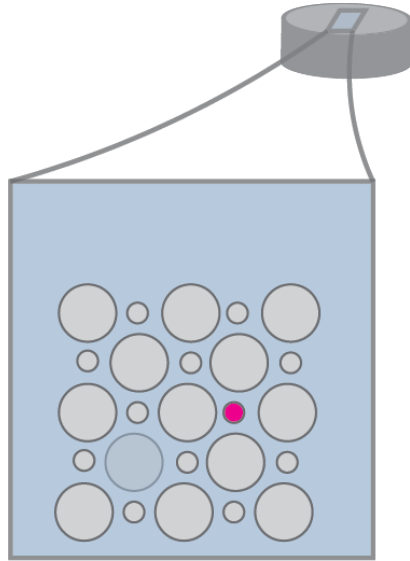
I. Dosimetry concept

II. Luminescence Dosimetry - Why?

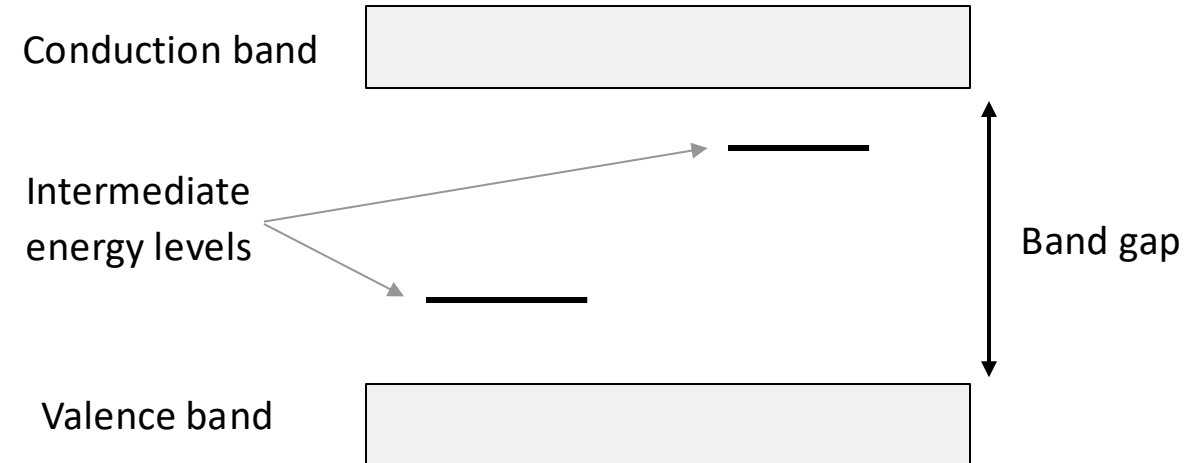
III. TL/OSL/RPL

IV. Operational properties

V. Case studies

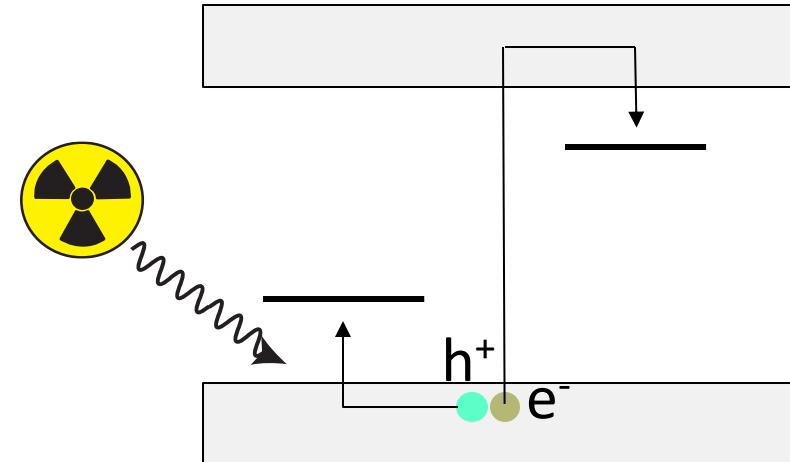
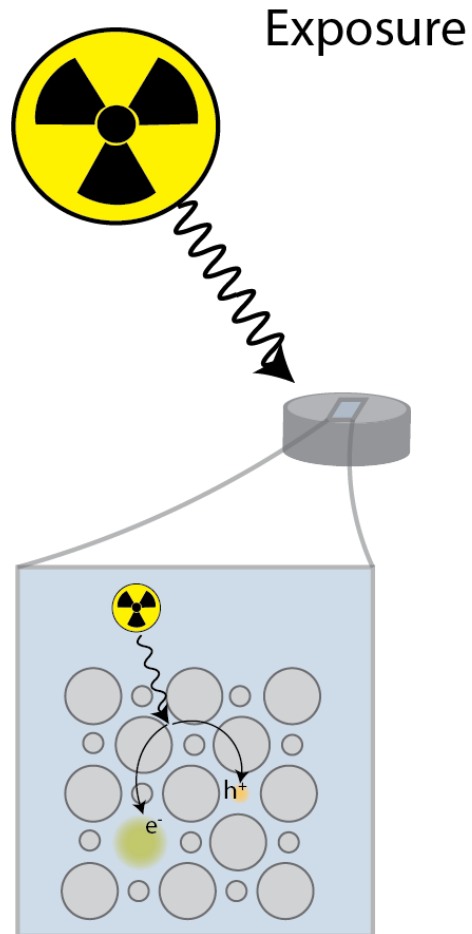


How do you represent the energy levels in a crystal?



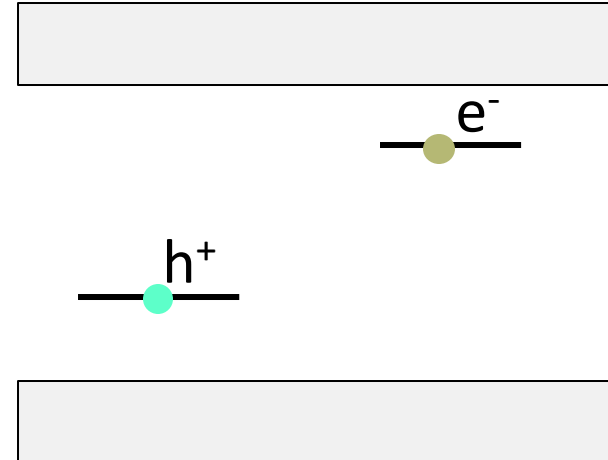
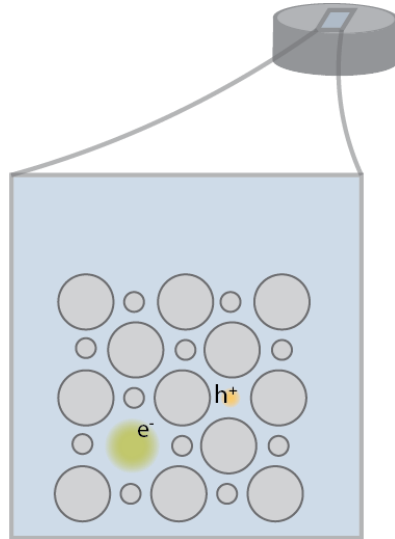
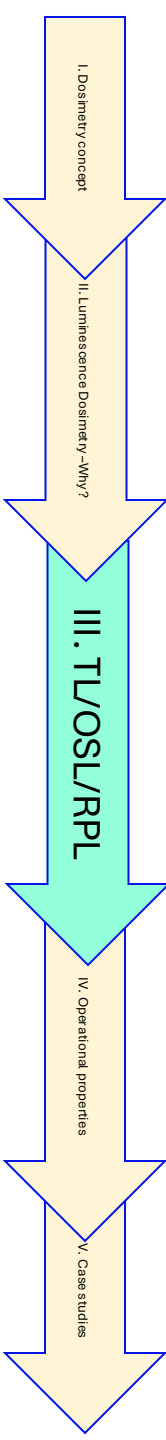
Imperfections in crystals (dislocations, substitutions, etc) create intermediate energy levels.

An imperfect crystal – exposure to ionising radiation



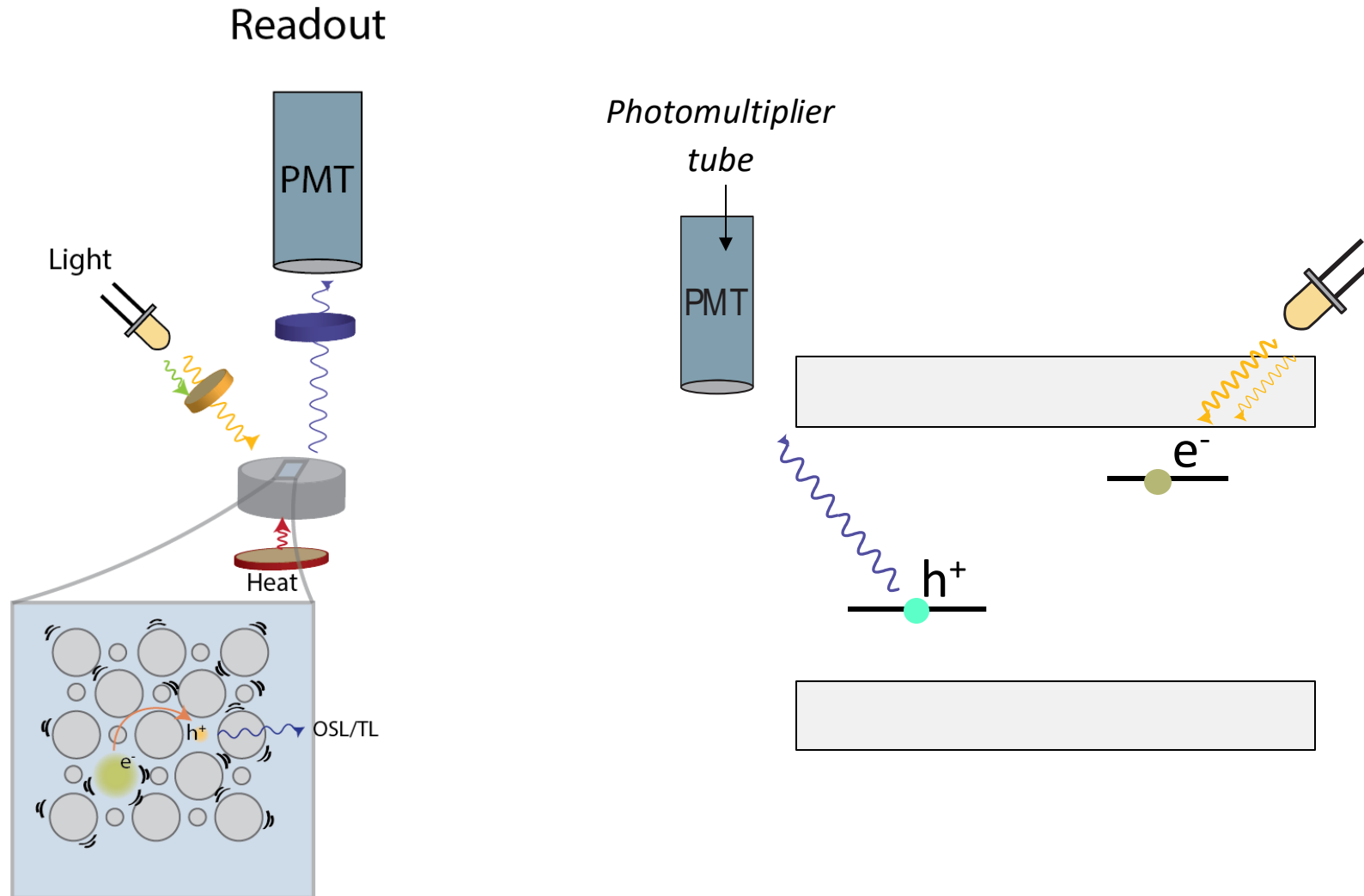
Ionising radiation creates electron-hole pairs. Electrons and holes are released into conduction/valence bands and trapped in defects.

An imperfect crystal – storage



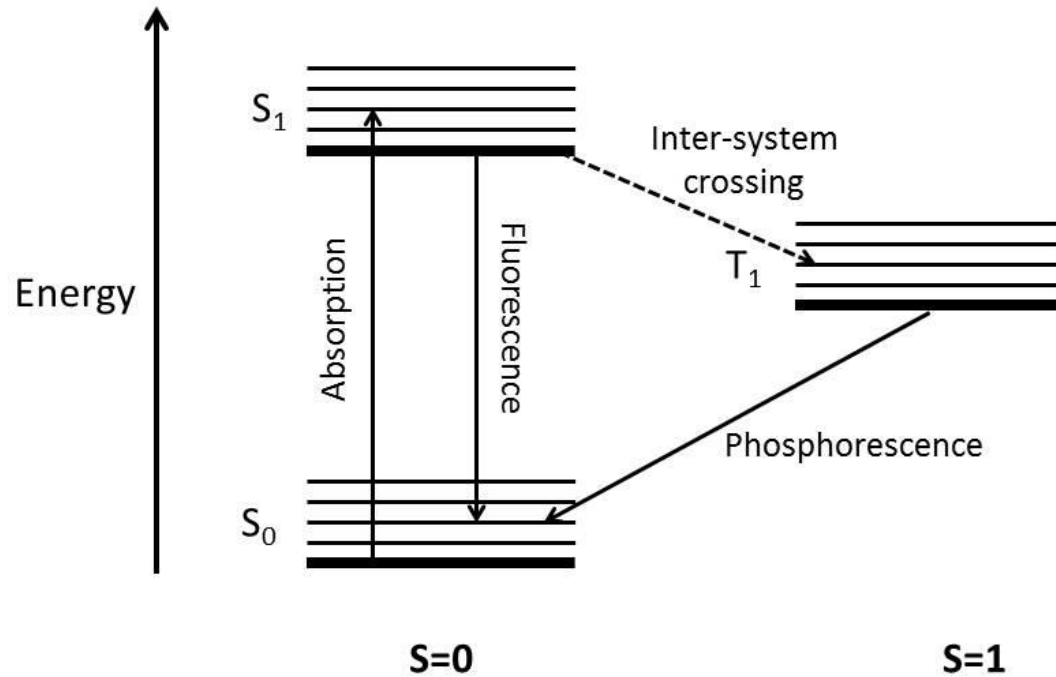
Charges can remain in traps – from fractions of seconds to million of years.

An imperfect crystal – stimulation/readout



Upon stimulation, charges are released from their traps. They travel to a recombination centre. The de-excitation process produces photon, easily detectable in the lab.

Fluorescence vs Phosphorescence vs Stimulated Luminescence

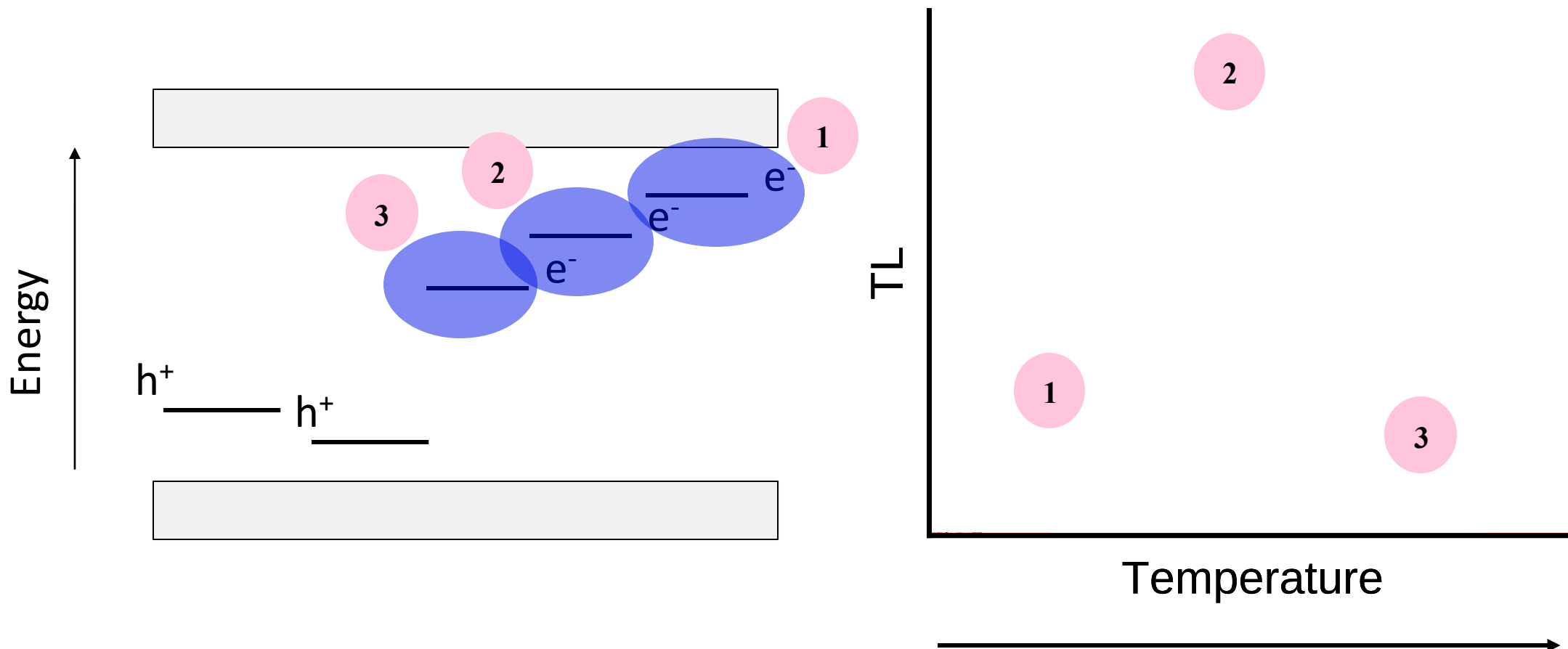
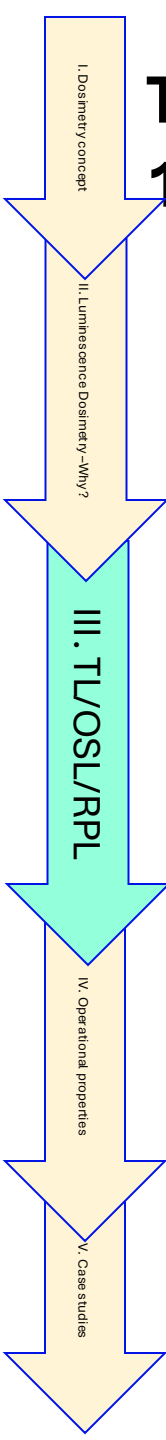


Fluorescence
 $\tau < 10^{-8} \text{ s}$

Phosphorescence/stimulated
luminescence
 $10^{-8} \text{ s} < \tau < 10^9 \text{ years}$

Two main types of stimulation:

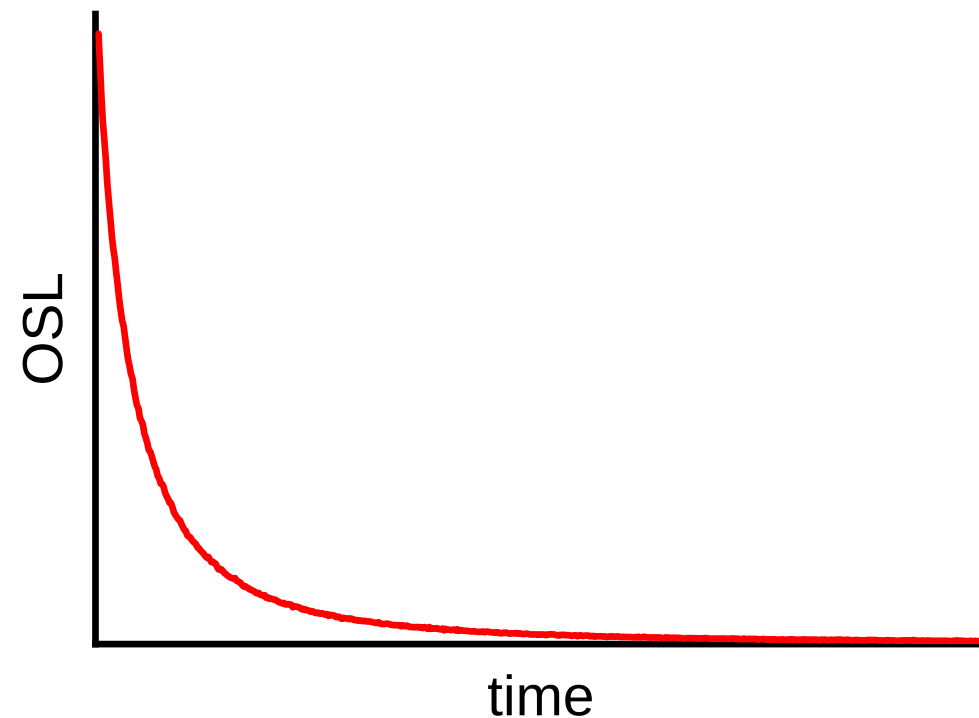
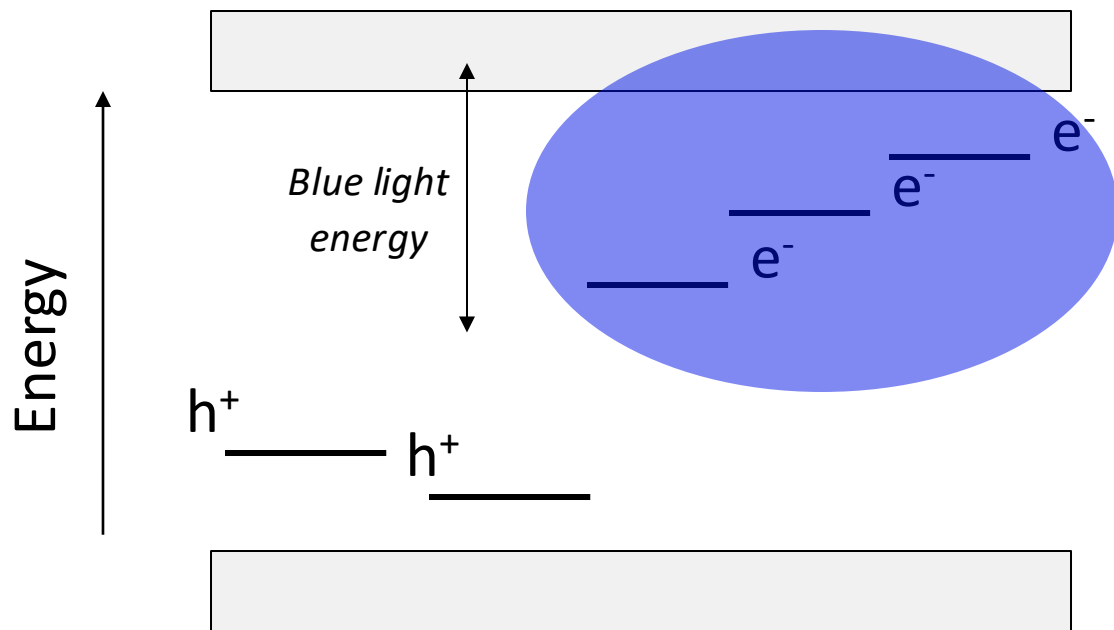
1) Thermal stimulation



Thermal stimulation = thermoluminescence (TL)

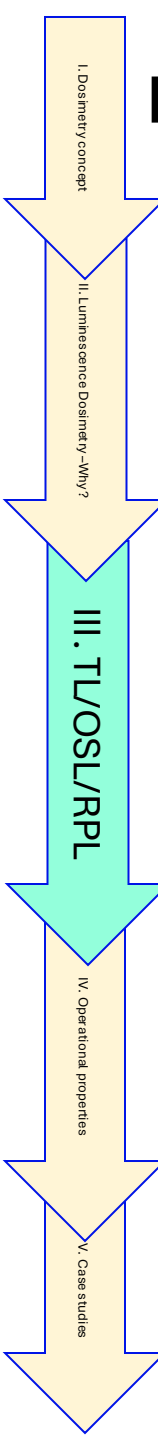
Two main types of stimulation:

2) Optical stimulation

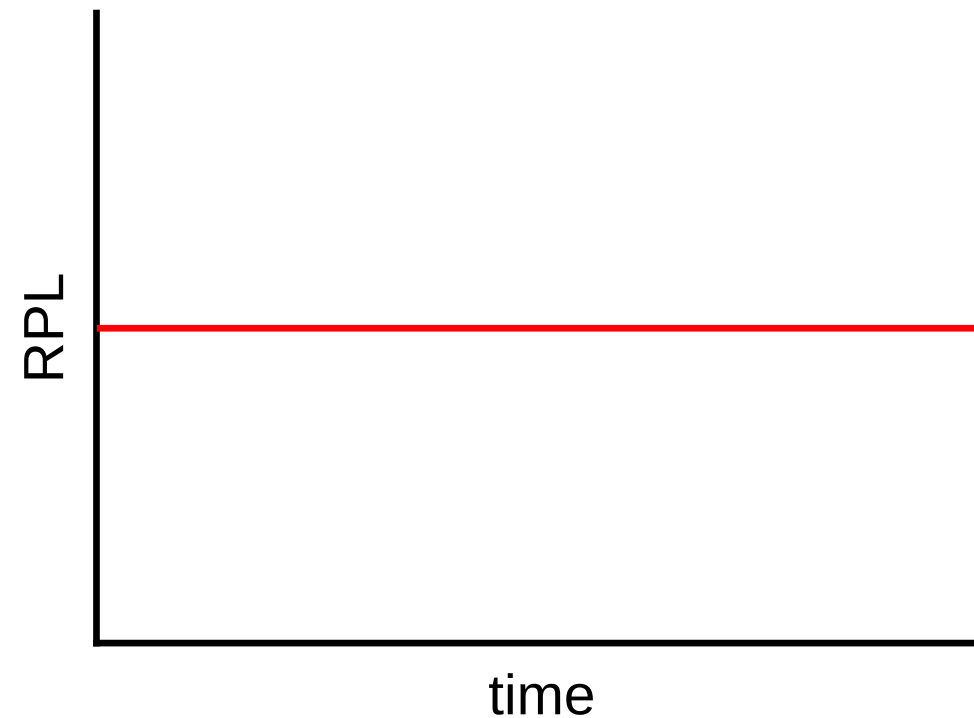
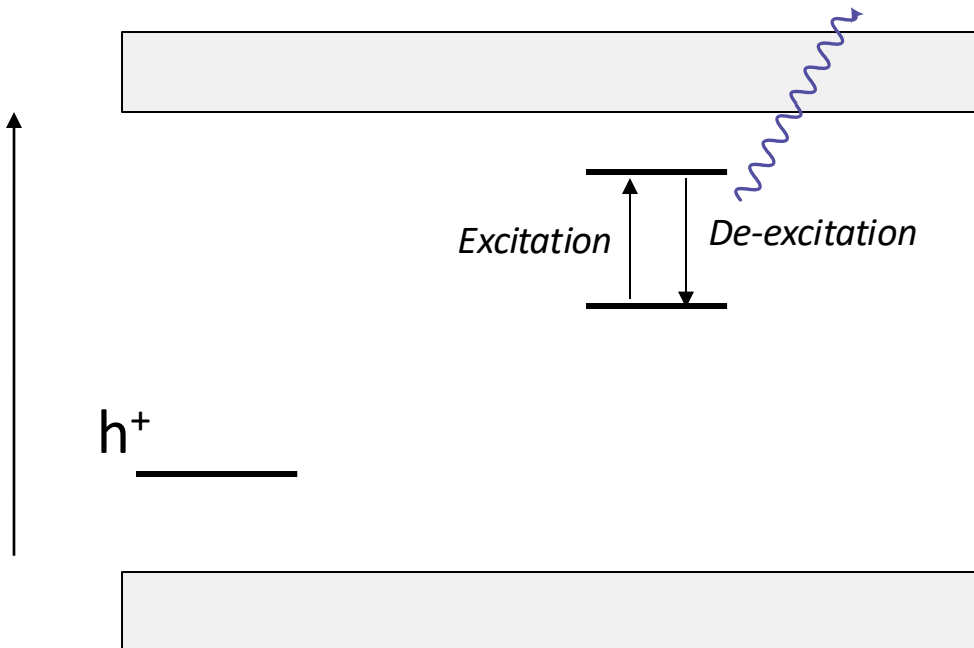


Optical stimulation = optically stimulated luminescence (OSL)

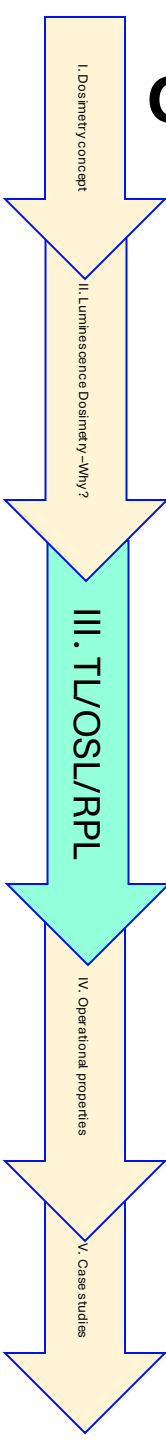
Radiophotoluminescence



Energy

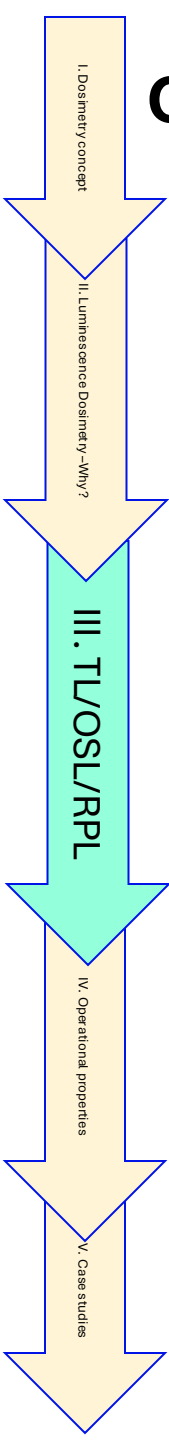


Comparison between the techniques



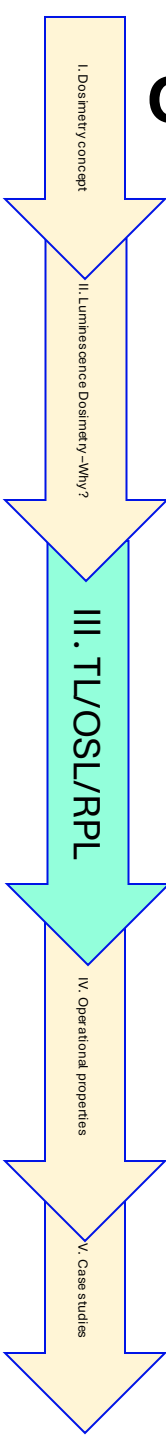
Readout technique	TL	OSL	RPL
• Stimulation • Readout destructive? • Detection window restrained? • Background to take into account? • Signal acquisition? • Affected by thermal quenching?			

Comparison between the techniques

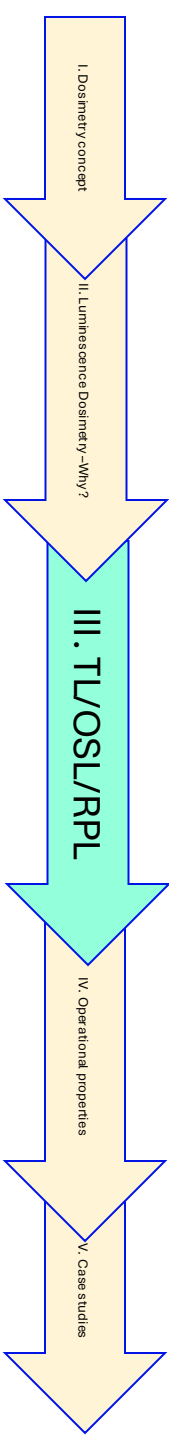


Readout technique	TL	OSL	RPL
• Stimulation • Readout destructive? • Detection window restrained? • Background to take into account? • Signal acquisition? • Affected by thermal quenching?	• Thermal contact • Destructive readout • Broad detection possible • Blackbody background • Only integrated luminescence • Affected by thermal quenching		

Comparison between the techniques



Readout technique	TL	OSL	RPL
• Stimulation • Readout destructive? • Detection window restrained? • Background to take into account? • Signal acquisition? • Affected by thermal quenching?	• Thermal contact • Destructive readout • Broad detection possible • Blackbody background • Only integrated luminescence • Affected by thermal quenching	• Optical readout • (Semi)destructive readout • Need to block stimulation light • Low background (light leakage) • Time-resolved measurement possible • Not affected by thermal quenching	• Optical readout • Non-destructive readout • Need to block stimulation light • High background (phosphorescence) • Time-resolved measurement required • Not affected by thermal quenching



Questions

Could we have TL/OSL from a perfect crystal?

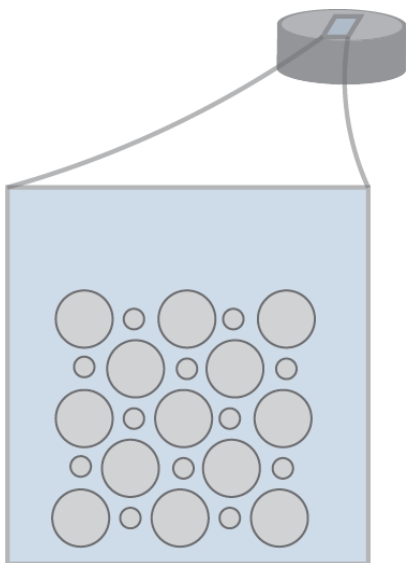
I. Dosimetry concept

II. Luminescence Dosimetry - Why?

III. TL/OSL/RPL

IV. Operational properties

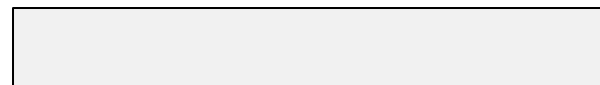
V. Case studies



Conduction band



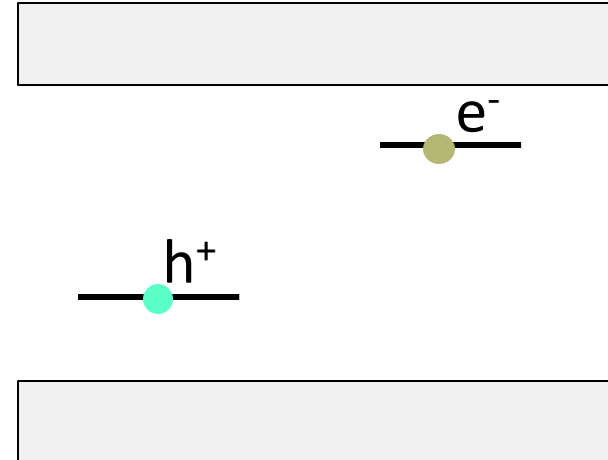
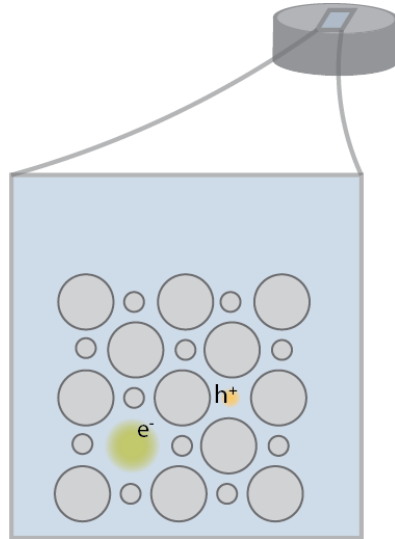
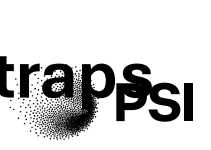
Valence band



Band gap

No you wouldn't. No presence of intermediate energy levels acting as trapping levels.

What governs how long the charges can stay in their traps before the readout?



Probability of escape – frequency factor.

I. Dosimetry concept

II. Luminescence Dosimetry – Why?

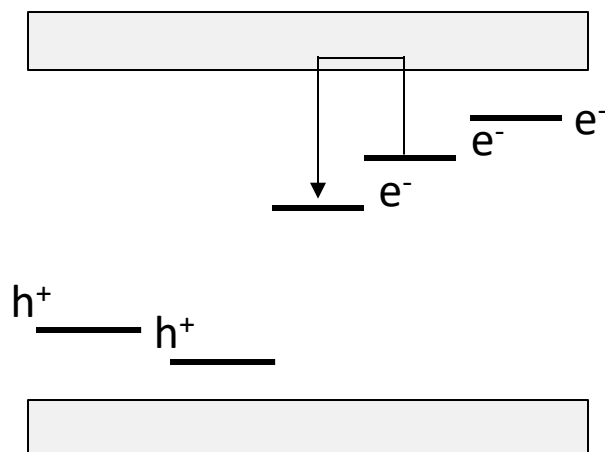
III. TL/OSL/RPL

IV. Operational properties

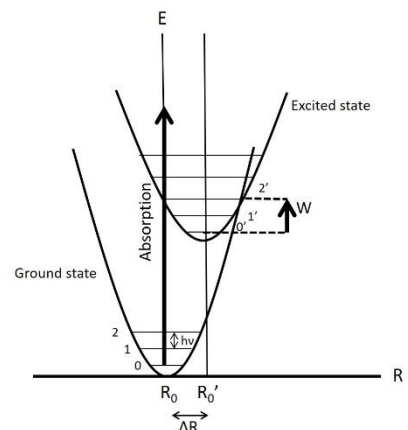
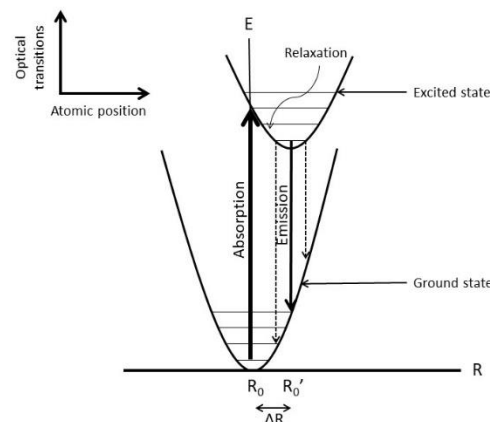
V. Case studies

Factors limiting the luminescence efficiency

Competition/Retrapping



Non-radiative recombination



Quenching effects

- **Thermal quenching**
 - High temperature increases the probability of non-radiative recombination
- **Concentration quenching**
 - High number of luminescent centres results in energy transfer
- **Impurity quenching**
 - «killer» centres introducing non-radiative recombination pathways

Factors limiting the luminescence efficiency

I. Dosimetry concept

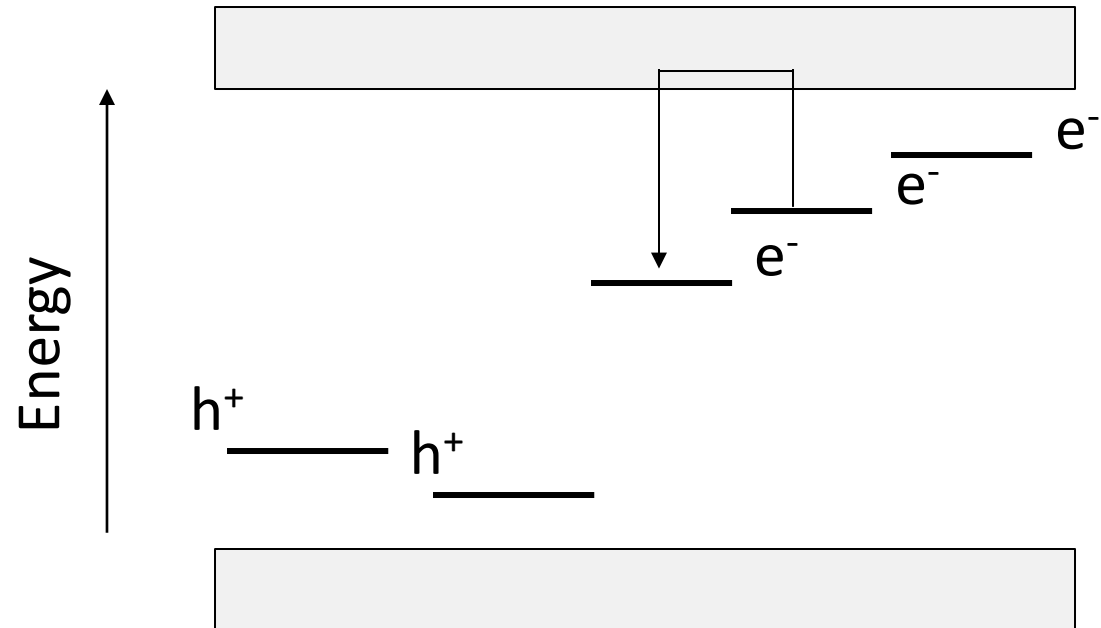
II. Luminescence Dosimetry - Why?

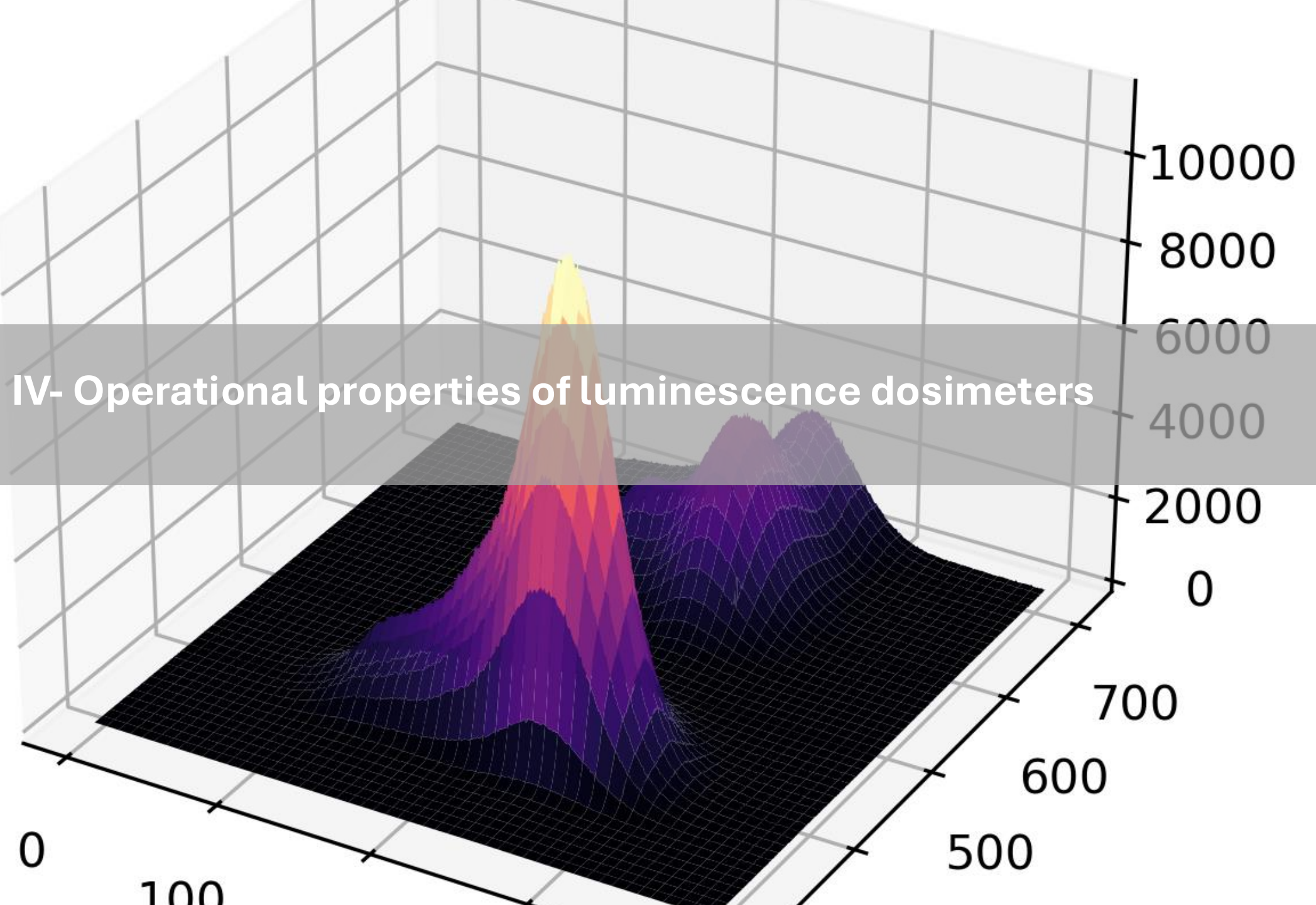
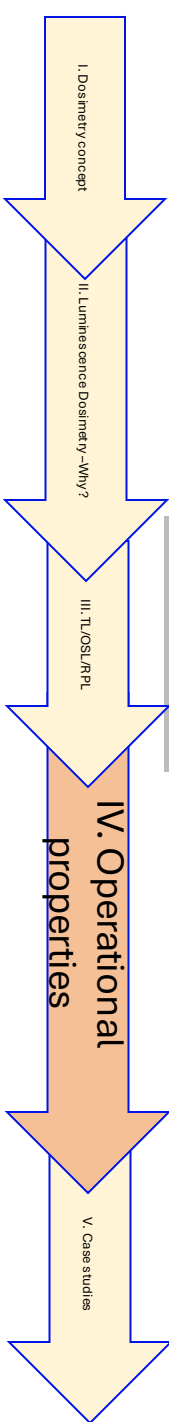
III. TL/OSL/RPL

IV. Operational properties

V. Case studies

- Average luminescence efficiency: 3-4 % only...





Operational properties of luminescence dosimeters – what you should consider

Is the system I am choosing good enough for my application?

- Do I need to detect low doses (μGy)? High doses (kGy)?
- Do I need to correct for energy response in the range I am interested in?
- Is my signal stable over time?
- ...

I. Dosimetry concept

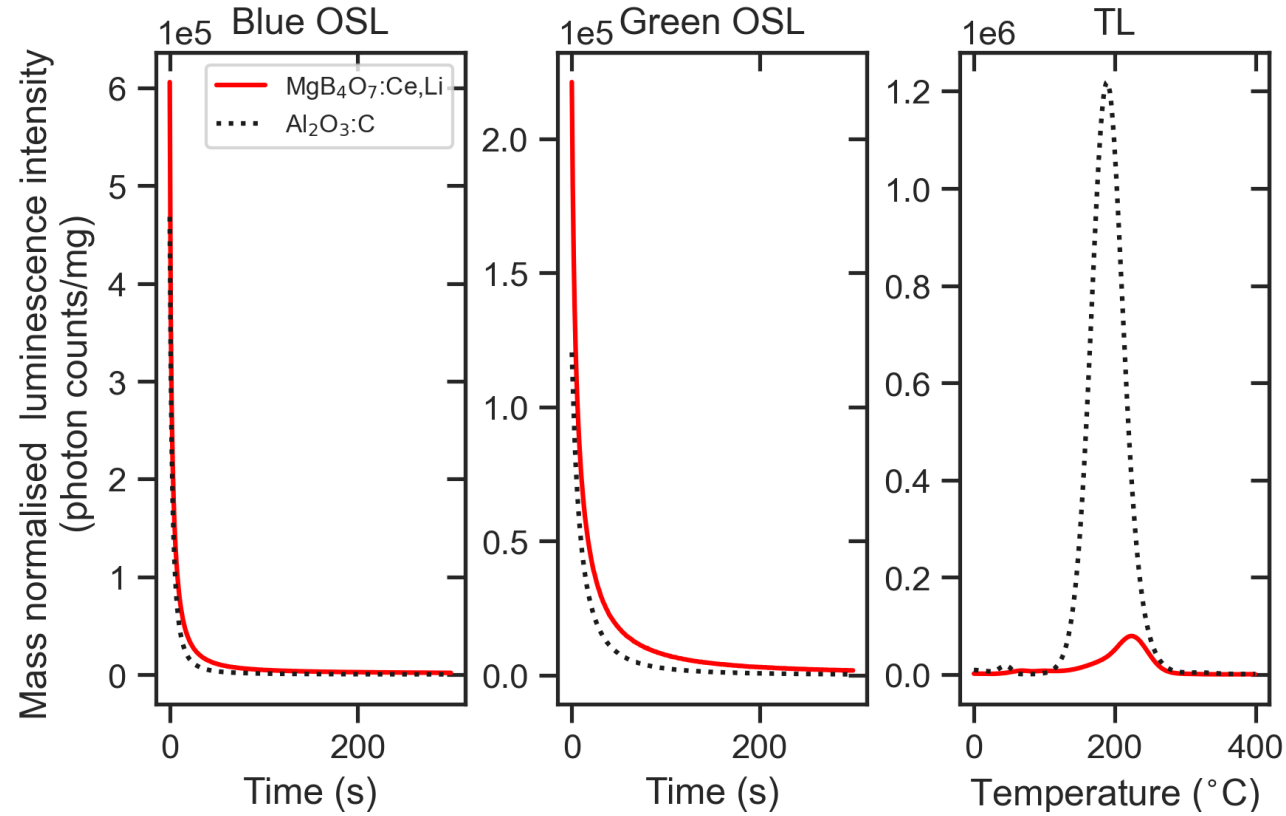
II. Luminescence Dosimetry – Why?

III. TL/OSL/RPL

IV. Operational properties

V. Case studies

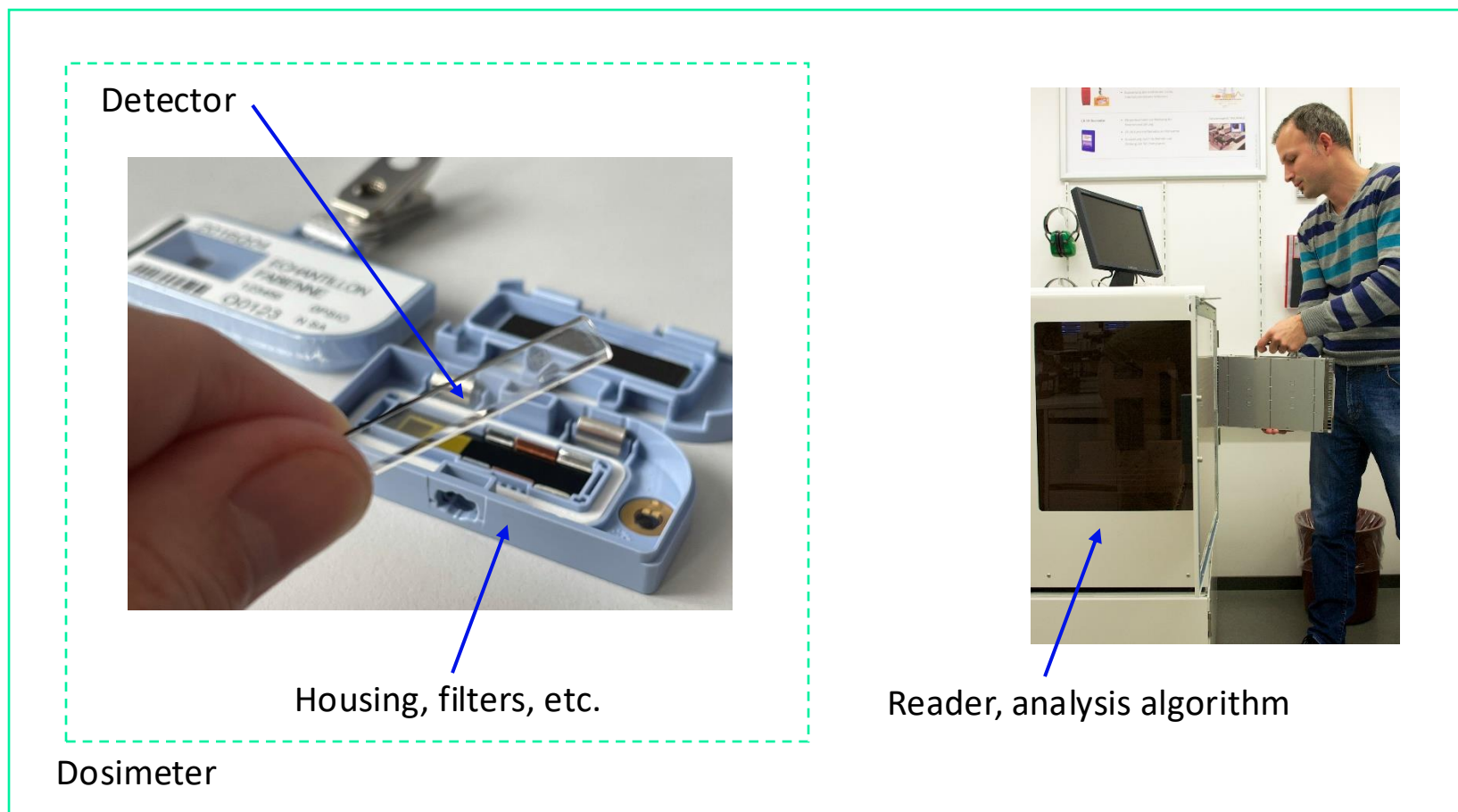
Sensitivity



Sensitivity of $\text{MgB}_4\text{O}_7:\text{Ce,Li}$ under blue light stimulation, green light stimulation and thermal stimulation compared to that of $\text{Al}_2\text{O}_3:\text{C}$.

Detection limit

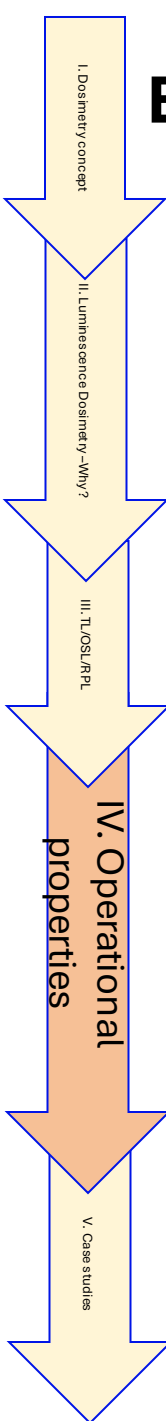
Dosimetry system



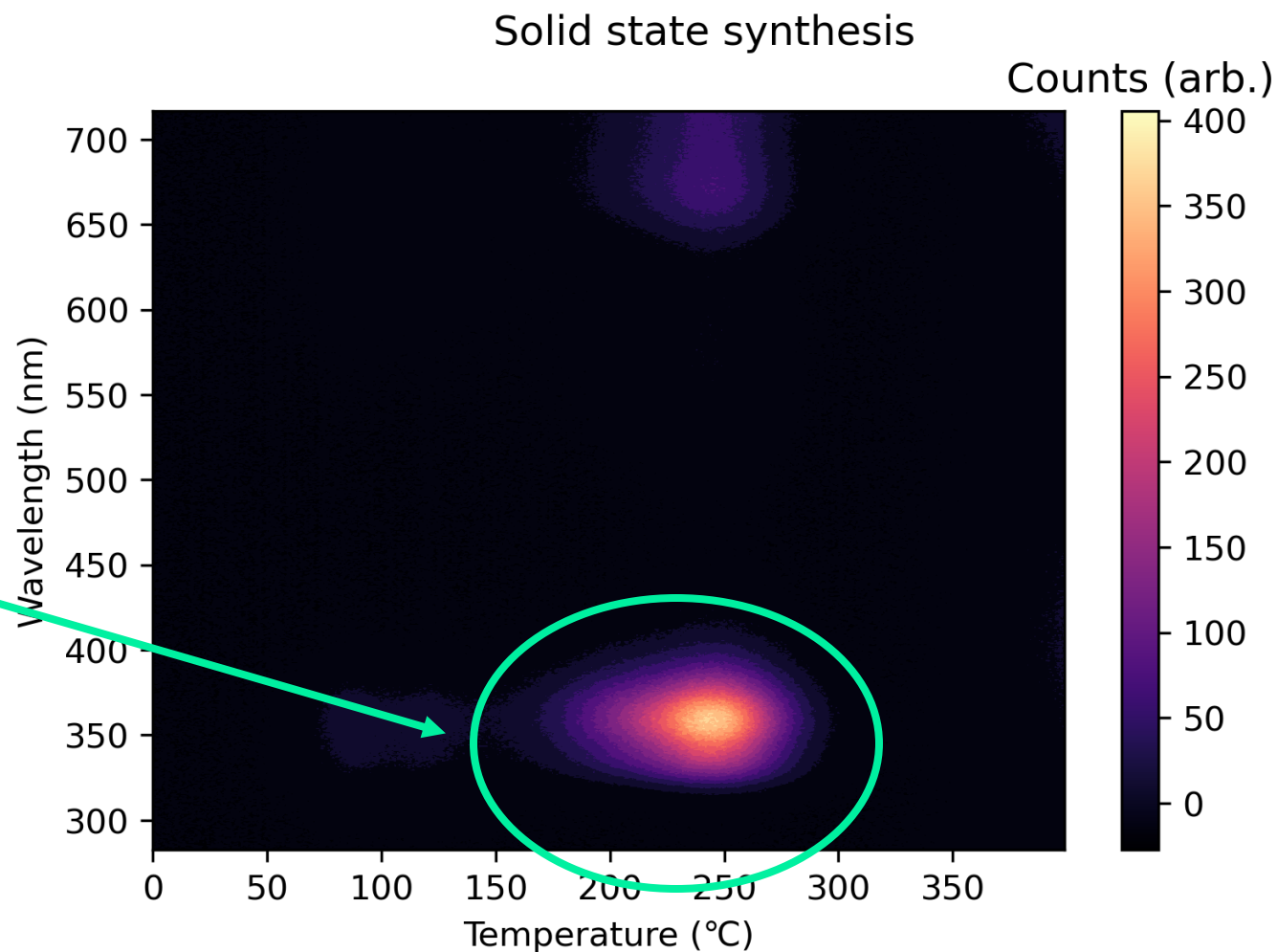
... is a characteristic of the entire system:

- **How much signal does the detector emit**
- **How well the system can detect it**

Emission spectrum

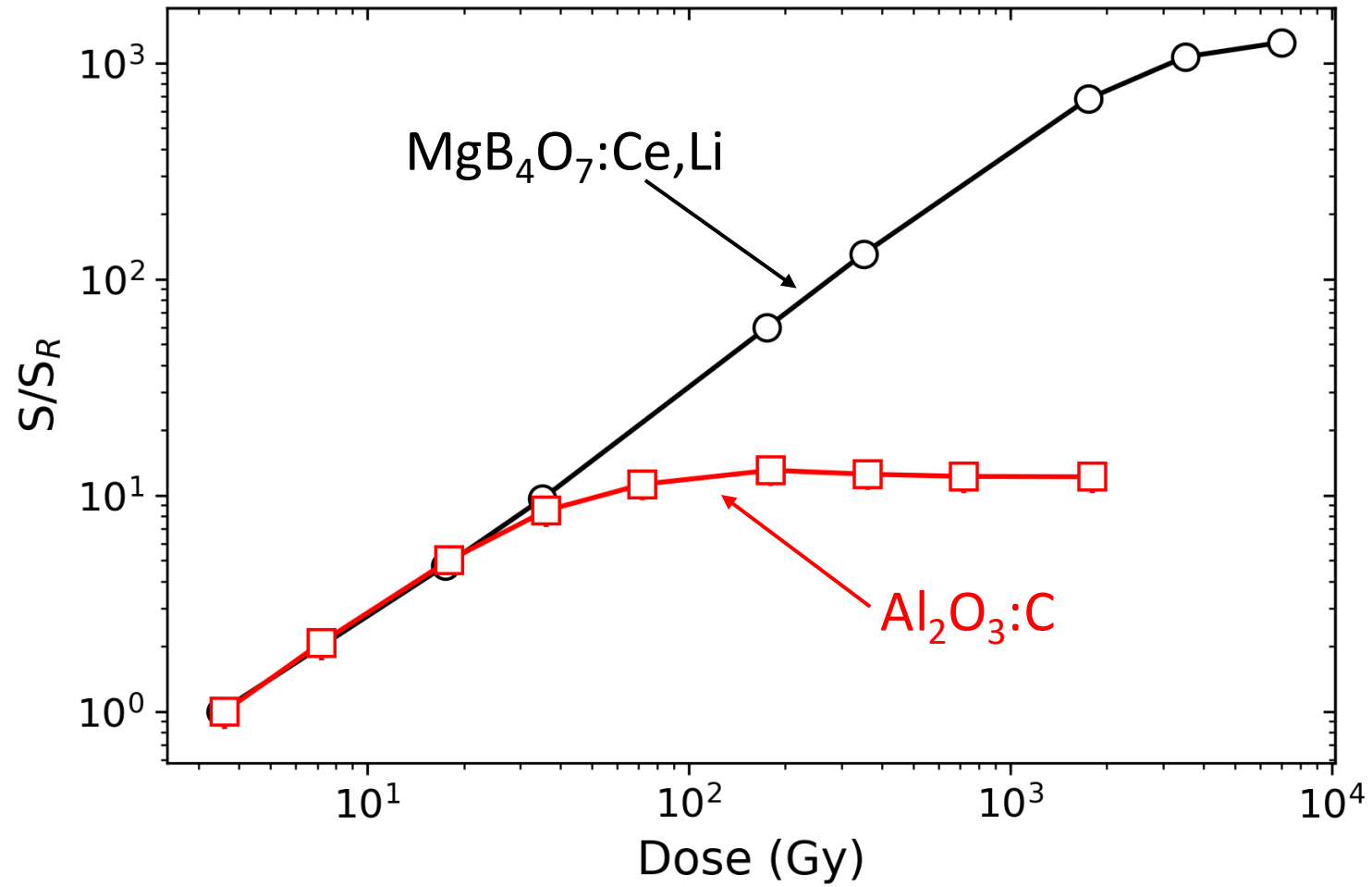


Recombination centre:
Ce³⁺ (≈ 350 nm)



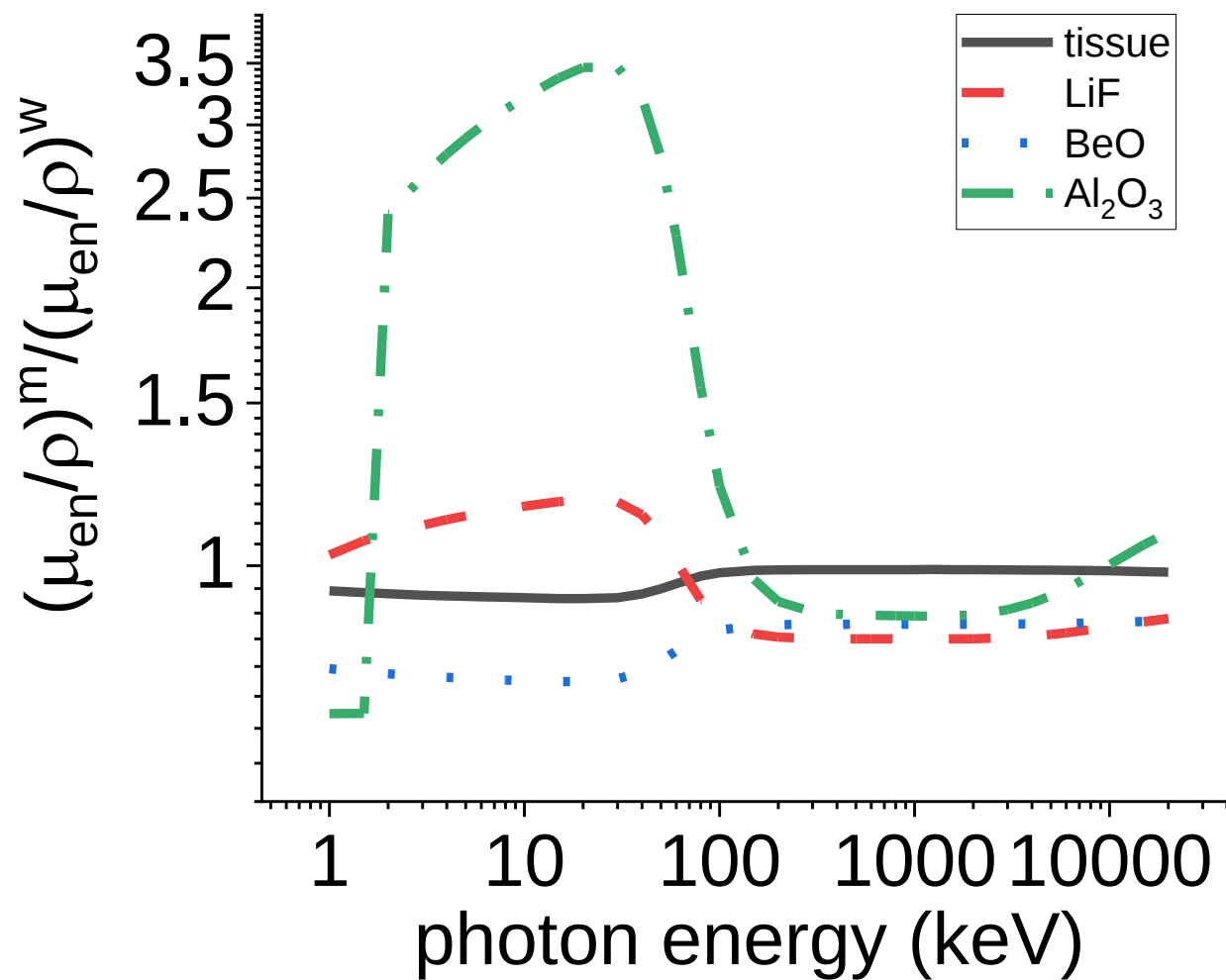
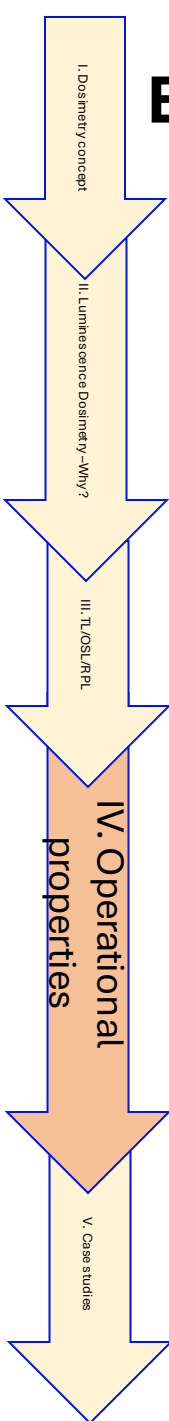
Adapt detection unit (photomultiplier response, filter) to emission spectrum. For OSL, should differ from stimulation wavelength.

Saturation limit



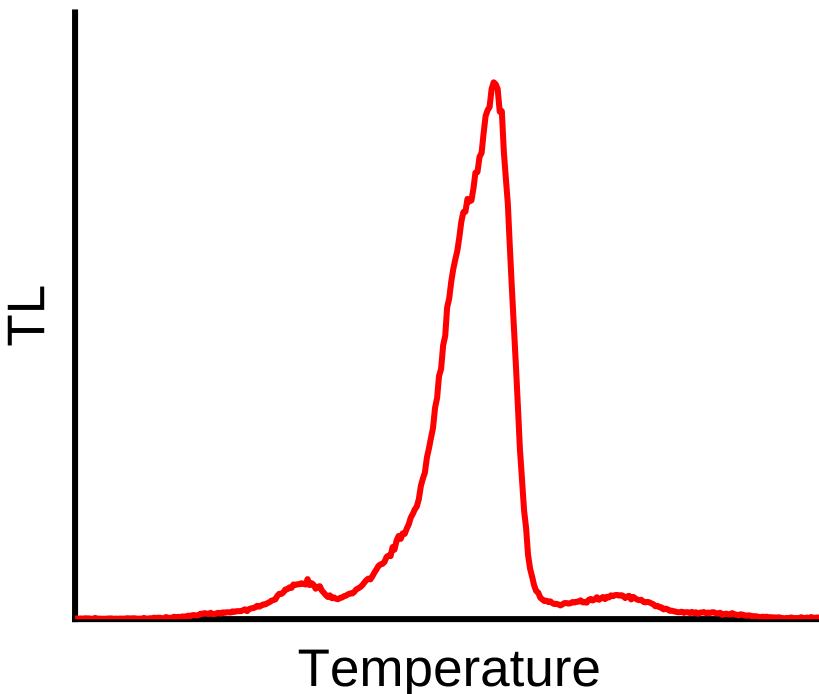
All materials will saturate eventually, some earlier than others.

Energy response



Signal depends on the energy of incoming photon

Stability of the signal



Which peak will fade more rapidly?

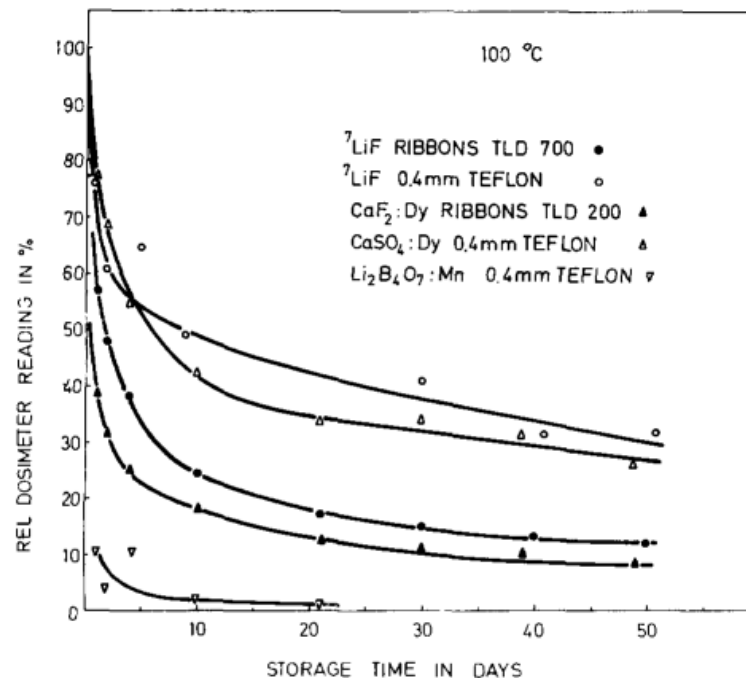


Fig. 16. Fading of TL at 100 °C in TLD 200 and TLD 700 ribbons as well as in LiF: Mg, Ti, in $\text{CaSO}_4\text{:Dy}$ and in $\text{Li}_2\text{B}_4\text{O}_7\text{:Mn}$ (teflon 0.4 mm thickness).

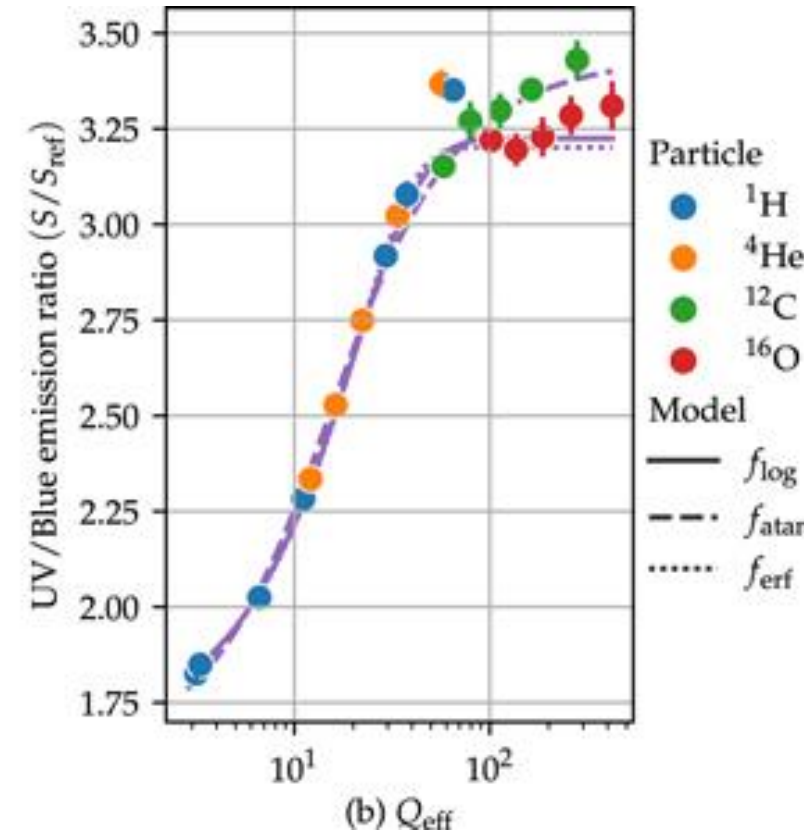
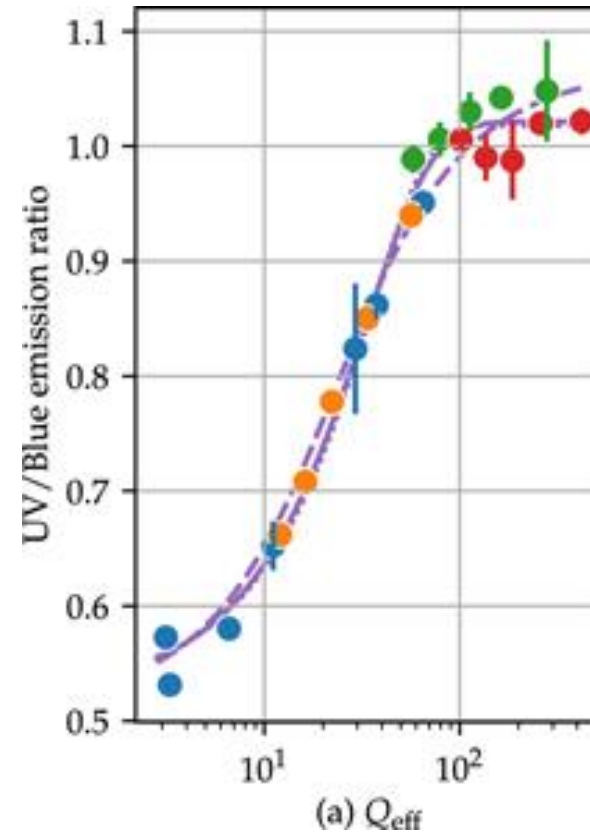
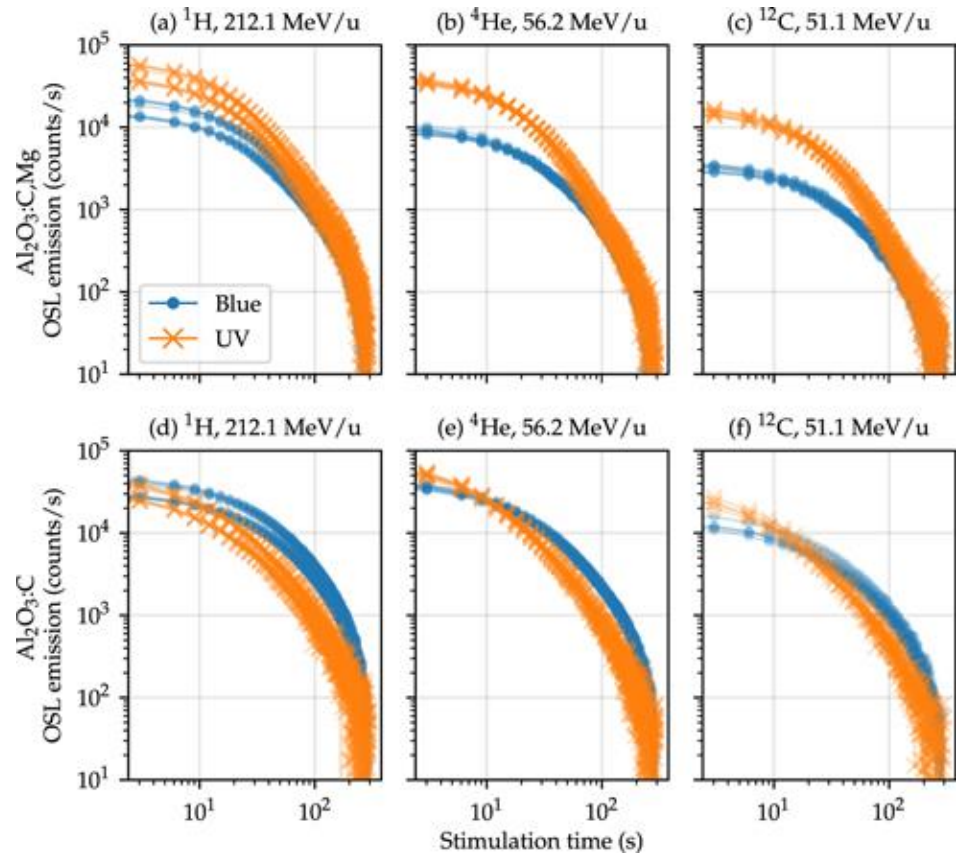
Burgkhardt et al., 1976

Fading rate depends on trap energy. Fading rate will depend:

- On material
- On trap considered
- On storage condition

Ability to measure linear energy transfer (LET)

Christensen et al., 2023



$\text{Al}_2\text{O}_3:\text{C}$ has two emission bands (blue and UV)...

... and their ratio depends on the LET of the incoming particle.



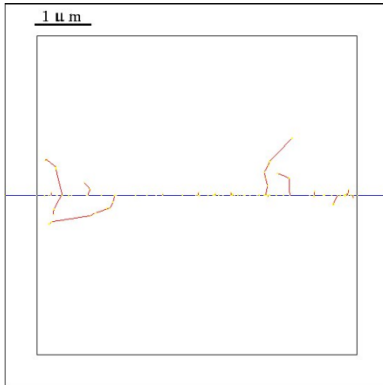
Where does this LET dependence come from??

Low LET particle

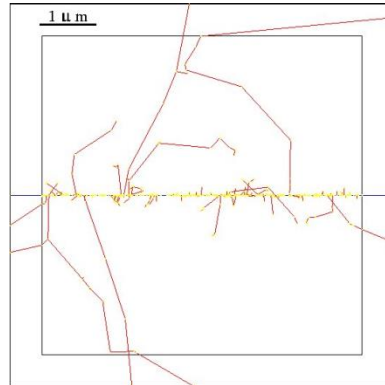
Deposits energy more uniformly

- Isolated excitation regions
- Less localised damage
- Less local saturation of traps and recombination centre
- Higher luminescence efficiency

He 144.2 MeV/u
2.24 keV/ μ m



O 385.5 MeV/u
19.8 keV/ μ m

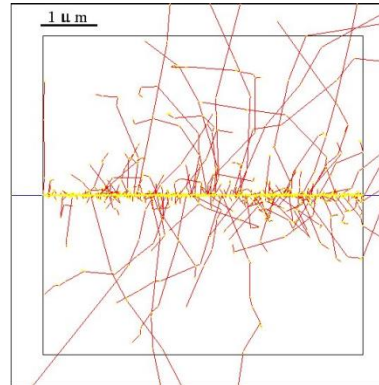


High LET particle

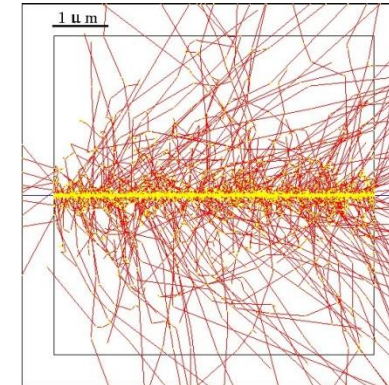
Deposits energy densely amongst its tracks

- Dense ionisation tracks
- More localised damage
- Traps and recombination along the tracks are easily saturated
- More competition effects
- Lower luminescence efficiency

Ar 450.5 MeV/u
93.3 keV/ μ m



Fe 122.9 MeV/u
421 keV/ μ m



Choose your material wisely

There is no “perfect” luminescence dosimeter that would be able to tick all of those boxes...
→ be wise and select your material.

There are options available, know your material!

Table 1

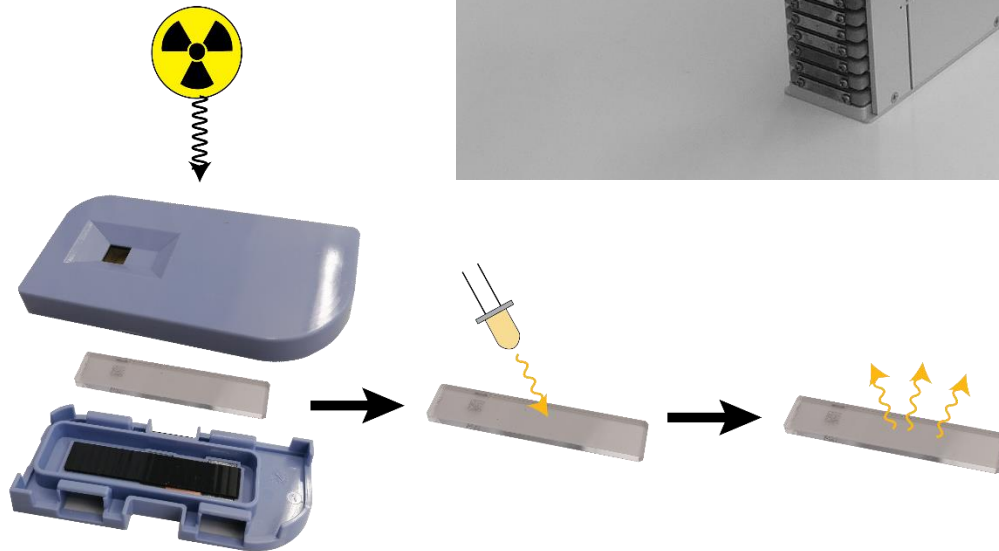
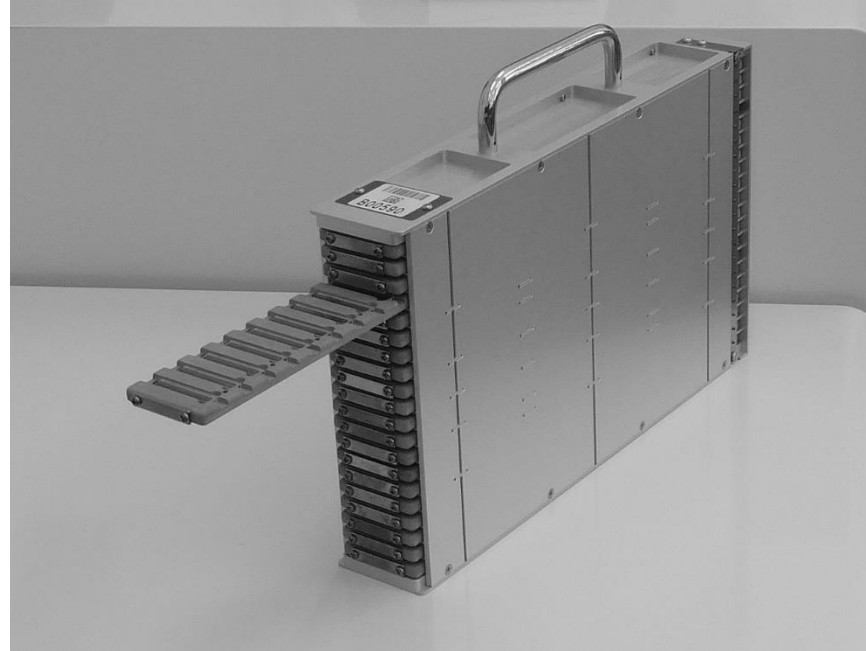
Summary of TL and OSL materials most used in dosimetry. Most of the data are from [McKeever et al. \(1995\)](#) with a few updates, as indicated with the additional references; for OSL properties, see ([Bøtter-Jensen et al., 2003](#); [Yukihara and McKeever, 2011](#)). The linearity ranges are those summarized in ISO/ASTM 51956 ([ISO/ASTM, 2013b](#)), also based on data from [McKeever et al. \(1995\)](#).

Material	Technique	Z_{eff} (host)	Comments
LiF:Mg,Ti	TL	8.3	Widely used in individual and area monitoring, and in medical dosimetry. TL sensitivity and curve shape influenced by aggregated defects that change with annealing and time. Linear up to 1 Gy, supralinear 1 Gy– 10^3 Gy.
LiF:Mg,Cu,P	TL	8.3	High sensitivity, but cannot be heated above 240 °C without loss of sensitivity. Linear up to 10 Gy, then sublinear. High-temperature TL can be used $>10^3$ Gy. Kim et al. (2022)
LiF:Mg,Cu,Si	TL	8.3	
CaF ₂ :Mn	TL	16.9	Linear up to 10 Gy, supralinear up to 10^3 Gy.
CaF ₂ :Dy	TL	16.9	Linear up to 6 Gy, supralinear up to 500 Gy.
CaF ₂ :Tm	TL	16.9	Linear up to 1 Gy, supralinear up to 10^4 Gy.
Al ₂ O ₃ :C	TL/OSL	11.3	High TL and OSL sensitivity, broad, complex single TL peak. Linear up to 1 Gy, supralinear up to 30 Gy.
Al ₂ O ₃ :C,Mg	TL/OSL	11.3	Higher concentration of shallow traps in comparison with Al ₂ O ₃ :C and more aggregated defects.
Al ₂ O ₃ :Mg,Y		11.3	Linear up to 10^4 Gy.
BeO	TL/OSL	7.2	Low TL sensitivity; high OSL sensitivity. Linear up to 1 Gy, supralinear up to 100 Gy.
MgO	TL	10.8	Linear up to 10^4 Gy.
CaSO ₄ :Dy	TL	15.6	Linear up to 10 Gy, supralinear up to 10^3 Gy.
CaSO ₄ :Tm	TL	15.6	Linear up to 10 Gy, supralinear up to 10^3 Gy.
Li ₂ B ₄ O ₇ :Mn	TL	7.3	Linear up to 100 Gy, supralinear up to 10^4 Gy.
Li ₂ B ₄ O ₇ :Mn,Si	TL	7.3	Danilkin et al. (2006)
Li ₂ B ₄ O ₇ :Cu	TL	7.3	Linear up to 10^3 Gy.
MgB ₄ O ₇ :Dy	TL	8.5	Linear up to 50 Gy, supralinear up to 5×10^3 Gy.
MgB ₄ O ₇ :Tm	TL	8.5	Linear up to 50 Gy, supralinear up to 5×10^3 Gy.

Yukihara et al., 2022

Instrumentation

Routine readers



PSI

Photon timer

Radioluminescence

EMCCD spectrometer

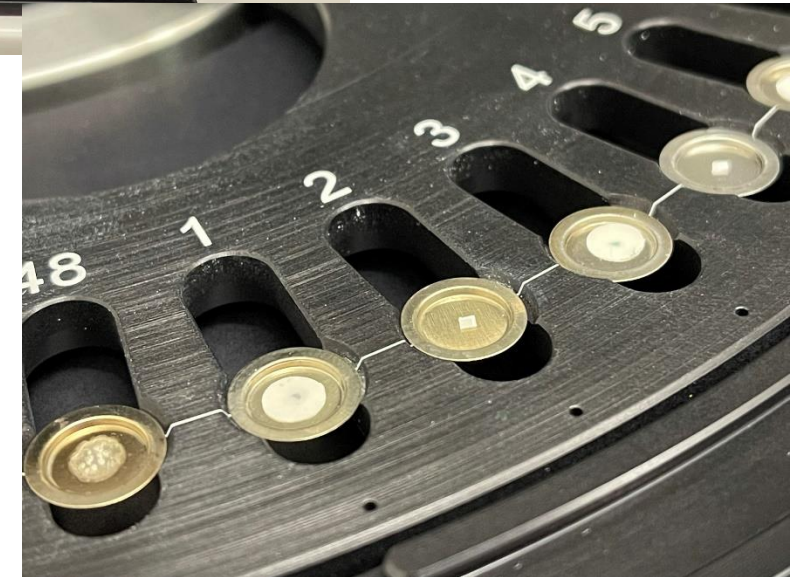
TL/OSL
blue, green, IR

Heater

UV LEDs

alpha

beta



Frank-and-Stein

Frank

The luminescence reader

Can:

- Irradiate samples with a beta source
- Heat the samples
- Measure thermoluminescence

Stein

The spectrofluorometer

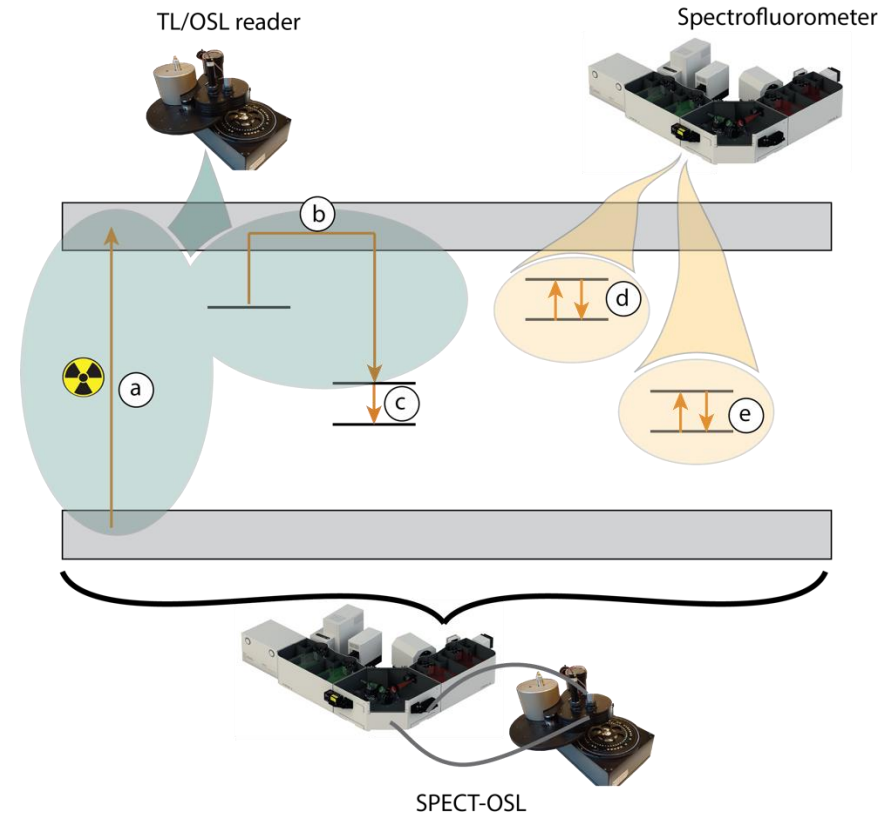
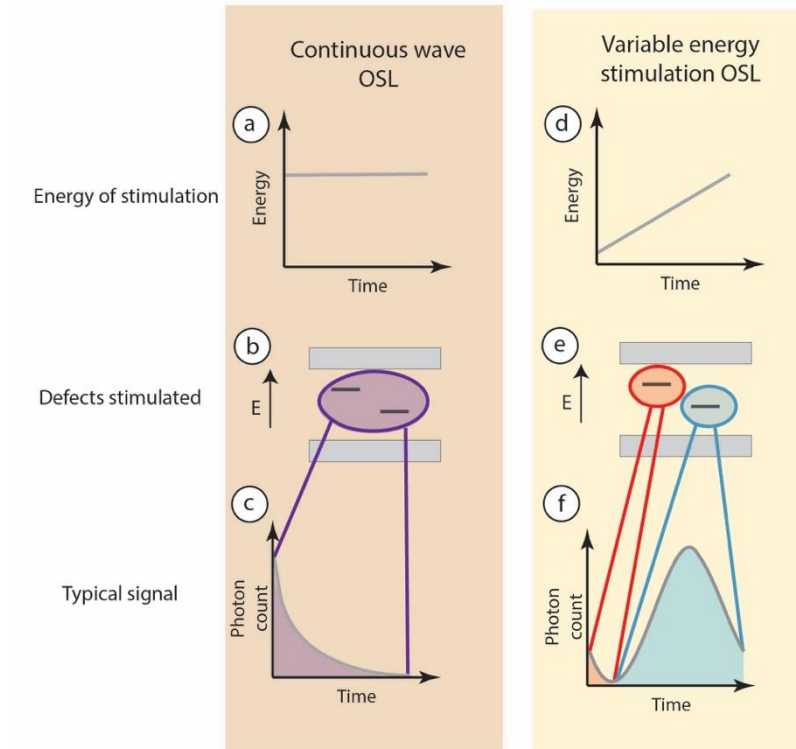
Can:

- Measure photoluminescence emission
- Measure photoluminescence excitation
- Measure the lifetime of the luminescence emission (pulsed laser sources)

Can:

- Photoluminescence of irradiated samples
- Vary the OSL stimulation light
- Measure the spectrum of the light emitted during OSL measurements
- Photoluminescence at elevated temperature/Photoluminescence after heating of the sample
- Time-resolved OSL in the sub-nanosecond range

Frank-and-Stein capabilities



PRIMER



Luminescence dosimetry

*Eduardo G. Yukihiro¹✉, Stephen W. S. McKeever², Claus E. Andersen³,
Adrie J. J. Bos⁴, Ian K. Bailiff⁵, Elisabeth M. Yoshimura⁶, Gabriel O. Sawakuchi⁷,
Lily Bossin¹ and Jeppe B. Christensen¹*

Abstract | Luminescence dosimetry is the process of quantifying the absorbed dose of ionizing radiation using detectors that exhibit luminescence. The luminescence intensity scales with energy absorbed from the radiation field. Calibration enables conversion of the luminescence intensity to the quantity of interest, for example the absorbed dose, kerma and personal dose equivalent. The different techniques available — thermoluminescence (TL), optically stimulated luminescence (OSL) and radiophotoluminescence (RPL) — share a common theoretical framework. Alongside applications in radiation protection, including personal dosimetry and area monitoring, luminescence dosimetry is also used in industry, research and medicine. Examples include quality assurance in radiation therapy, mapping of radiation levels in new accelerators, the estimation of ionizing radiation dose to organs in medicine and accidents, and the characterization of the radiation environment in space. The objective of this Primer is to summarize the fundamental concepts of luminescence dosimetry, the main experimental considerations, analysis procedures, typical results, applications and limitations, with an outlook into potential future advances.

I. Dosimetry concept

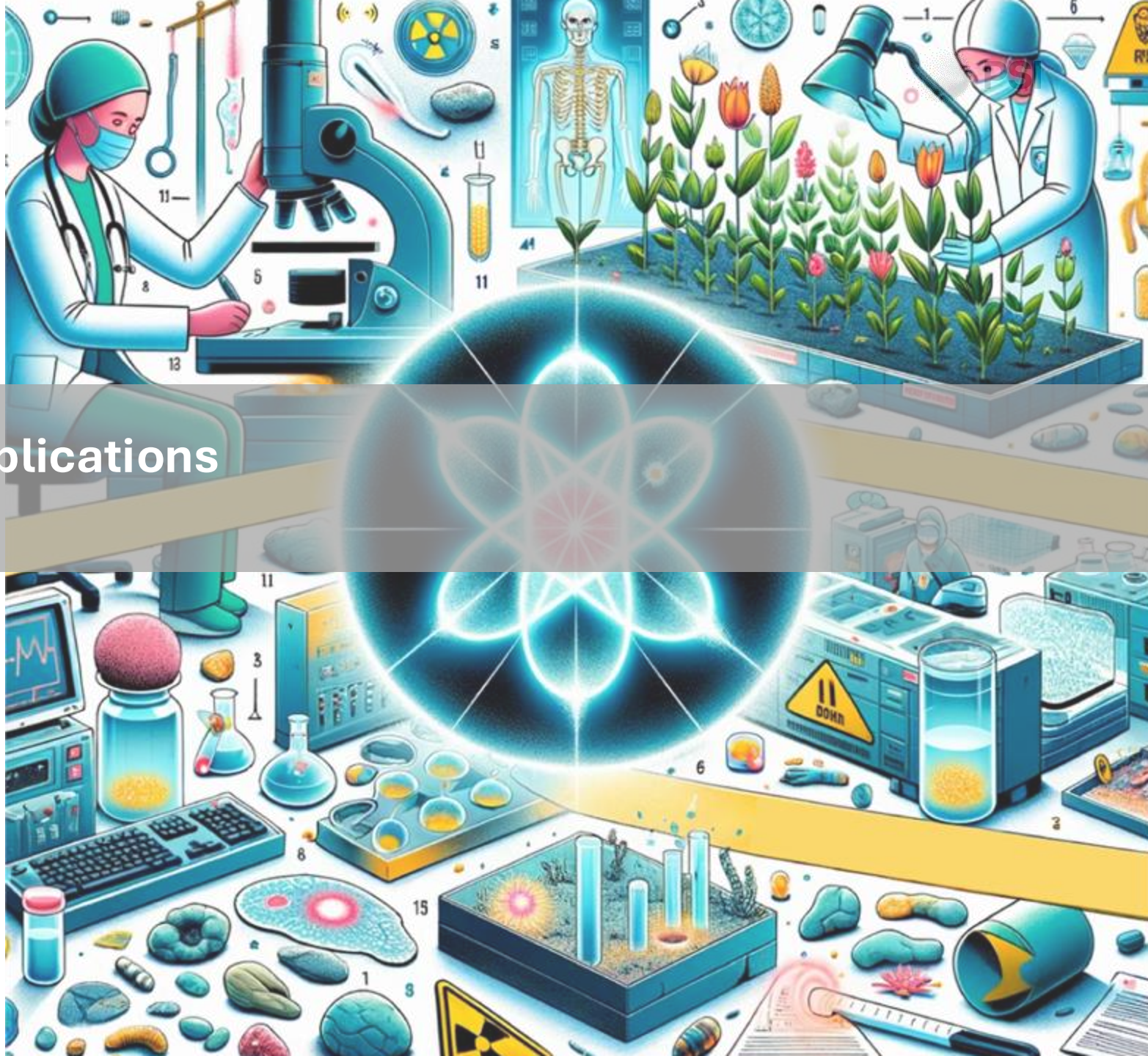
II. Luminescence Dosimetry - Why?

III. TL/OSL/RPL

IV. Operational properties

V. Case studies

IV. Case studies/Applications



Applications

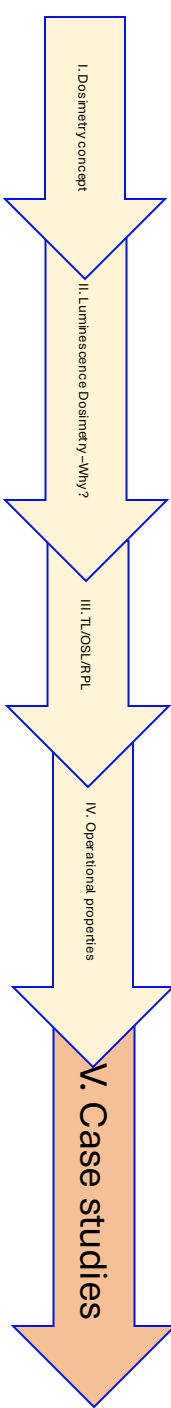


Table 3 | Quantities of interest, quantities estimated and goals of the dosimetry for examples in different fields of application, with useful references when available

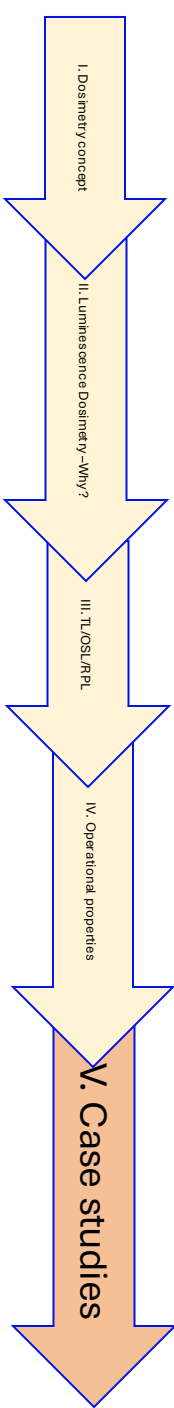
Field	Sub-field	Typical quantities of interest	Quantity estimated	Goal
Radiation protection	Personal dosimetry	$H_p(d)$	Absorbed dose at a depth in the body; such as $d=0.07$ mm, 3 mm or 10 mm	Conservative estimate of the radiation protection quantity effective dose E (REF. ³⁰)
	Area monitoring	$H^*(d)$	Absorbed dose at a depth in the ICRU sphere; for example $d=10$ mm	Conservative estimate of the radiation protection quantity effective dose E (REF. ³⁰)
	Space dosimetry	D	Absorbed dose to water D at the dosimeter's position	Quantification of the low-LET part (photons, electrons, high-energy protons) of the complex radiation field ⁸⁸
Biology	Radiobiology experiments	D	Absorbed dose D to biological samples	Quantification of the absorbed dose in biological samples, to be correlated with biological endpoints ¹⁶¹
Accident and epidemiological studies	Retrospective dosimetry	D	Absorbed dose D to minerals in ceramic building material such as brick and tile, or in teeth of human remains	Reconstruction of the dose to groups of individuals for epidemiological studies ⁸⁹
	Accident dosimetry	D	Absorbed dose D to fortuitous materials	Reconstruction of the dose to exposed individuals for triage after an accident or for future epidemiological studies ⁸⁹
Chronometry, with application to environmental and archaeological sciences	Dating of archaeological artefacts	D	Cumulative absorbed dose D to luminescent mineral grains from natural environmental radiation since a resetting event, for example an anthropogenic heating event	Estimate the age of the resetting event, such as the firing of pottery ^{38,39}
	Luminescence dating of sediments	D	Cumulative absorbed dose D to luminescent mineral grains from natural environmental radiation since a resetting event, for example exposure to sunlight followed by burial of sediment	Estimate the age of a natural or anthropogenic depositional process ³⁸⁻⁴⁰
	Environmental dosimetry	D	Absorbed dose D to a luminescent detector placed in the environment for a defined measurement period	Estimation of the natural dose rate to the luminescent mineral grains in their burial context from the gamma component and cosmic rays ^{38,39,162}
Medical	Postal audits	D	Absorbed dose to water D in a specific point in a phantom	Quality assurance programme involving the comparison of the quality of dose delivery from different medical facilities ⁵⁵
	In vivo and in/on-phantom dosimetry in radiation therapy and radiodiagnostics	D, K_r, K_e	Absorbed dose to water D at a specific point in the patient or phantom (entrance or exit of the beam, in a cavity close to an organ at risk) incident air kerma K_r , entrance surface air kerma K_e	Quality assurance, demonstration that a certain dose to an organ at risk is not exceeded, verification of doses to patient devices such as a pacemaker ^{163,164} , establishment of guidance levels, optimization ⁶⁴ , provide data for estimation of organ doses and correlation with, or estimation of, secondary effects ^{54,105}
Industrial applications	Control of instrument output	D, K	Absorbed dose D or air kerma K	Verification of equipment performance
	Radiation hardness	D	Absorbed dose to material D of electronic component, such as silica	Establish the correlation between electronic failure and the exposure to the radiation field
	Food processing and sterilization	D	Absorbed dose D to a material or to water	Quality assurance of the dose delivered in industrial processes ^{7,105}

LET, linear energy transfer.

Applications

1. Measuring doses following radiological catastrophes
2. Measuring doses and LET for new radiotherapy treatments
3. Constraining the exhumation rate of mountains
4. Characterisation of phosphors

- *Issue addressed*
- *Methodology*
- *Experimental steps*
- *Knowledge gained*



Measuring doses following radiological catastrophes

The application of retrospective luminescence dosimetry in areas affected by fallout from the Semipalatinsk Nuclear Test Site: an evaluation of potential

I.K. Bailiff^{*}, V. F. Stepanenko[†], H.Y. Göksu[‡], H. Jungner[§], S.B. Balmukhanov^{**}, T.S.

Balmukhanov^{**}, L.G. Khamidova[†], V.I. Kisilev^{††}, I.B. Kolyado^{††}, T.V. Kolizshenkov[†], Y.N.

Shoikhet^{††}, A.F. Tsyb[†].

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[†] Medical Radiological Research Center of RAMS, Korolev str. 4, Obninsk, 249020 Russia;

[‡]GSF-National Research Center for Environment and Health, Institute of Radiation Protection, D-85764 Neuherberg, Germany;

[§]Dating Laboratory, University of Helsinki, 00014 Helsinki, Finland.

^{**} Radiation Research Center, Alma Alta, Kazakhstan.

^{††} Research Institute for Regional Medico-Ecological Problems, Barnaul, Russia.

I. Dosimetry concept

II. Luminescence Dosimetry - Why?

III. TL/OSL/RPL

IV. Operational properties

V. Case studies

Measuring doses and LET for new radiotherapy^{PSI} treatments

scientific reports

OPEN

Improved simultaneous LET and dose measurements in proton therapy

Jeppe Brage Christensen^{1,2}, Michele Togno², Lily Bossin², Oskari Ville Pakari¹, Sairos Safar² & Eduardo Gardenali Yukihiro²

The objective of this study was to improve the precision of linear energy transfer (LET) measurements using Al_2O_3 :C optically stimulated luminescence detectors (OSLDs) in proton beams, and, with that, improve OSL dosimetry by correcting the readout for the LET-dependent ionization quenching. The OSLDs were irradiated in spot-scanning proton beams at different doses for fluence-averaged LET values in the (0.4–6.5) $\text{keV } \mu\text{m}^{-2}$ range (in water). A commercial automated OSL reader with a built-in beta source was used for the readouts, which enabled a reference irradiation and readout of each OSLD to establish individual corrections. Pulsed OSL was used to separately measure the blue (F -center) and UV (F^+ -center) emission bands of Al_2O_3 :C and the ratio between them (UV/blue signal) was used for the LET measurements. The average deviation between the simulated and measured LET values along the central beam axis amounts to 5.5% if both the dose and LET are varied, but the average deviation is reduced to 3.5% if the OSLDs are irradiated with the same doses. With the measurement procedure and automated equipment used here, the variation in the signals used for LET estimates and quenching-corrections is reduced from 0.9 to 0.6%. The quenching-corrected OSLD doses are in agreement with ionization chamber measurements within the uncertainties. The automated OSLD corrections are demonstrated to improve the LET estimates and the ionization quenching-corrections in proton dosimetry for a clinically relevant energy range up to 230 MeV. It is also for the first time demonstrated how the LET can be estimated for different doses.

The proton therapy community increasingly focuses on the relative biological effectiveness (RBE) and the effect of the linear energy transfer (LET) distributions in treatment plans¹. Several detectors, such as semiconductors², gas counters³, and radiochromic films⁴, have been proposed to measure the LET of hadrons at conventional dose-rates. Nevertheless, dosimetry in hadron beams remains challenging because of the typical under-response due to the ionization quenching of otherwise dose-rate independent detectors^{5–7}.

Ionization quenching is occasionally exploited to estimate the LET by comparing the response of two detectors having different quenching characteristics, e.g. scintillators relative to absorbed dose calorimeters⁸ or scintillators relative to ionization chambers⁹. Similarly, pairs of differently quenching organic scintillators¹⁰, thermoluminescent detectors¹¹ or phosphor films¹² have been used to simultaneously estimate dose and LET, which, however, is associated with large uncertainties in regions with steep gradients, e.g. at the distal edge.

The optically stimulated luminescence (OSL) of Al_2O_3 :C allows the estimation of both dose and LET, but with the advantage of only requiring a single detector, and has been demonstrated¹³ to be dose-rate independent in proton beams up to 150 kGy s^{-1} .

Al_2O_3 :C OSL is associated¹⁴ with a fast UV emission (centered at 335 nm, lifetime < 7 ns) and a much slower blue emission (centered at 420 nm, 35 ms lifetime). The emission in the blue band is traditionally used for dosimetry with a negligible time dependence after irradiation¹⁴. The emission in the UV band is less favorable for dosimetry, but it has been demonstrated that the ratio of the two emission bands, measured using pulsed OSL (POSL), can be used to establish an LET calibration curve and estimate the LET in proton beams^{15–18}, and heavier ions¹⁹. However, previous proton LET studies using Al_2O_3 :C focused on LET estimations for constant doses around 0.2 Gy and LETs below the elevated LET at the distal edge^{19,20}.

Previous studies on the possibility of LET estimation using OSL relied on custom-build readers designed to achieve the type of specialized POSL measurements required for this finality^{7,15}. More recently, automated OSL readers capable of POSL measurements, which offers more controlled and stable readout than previous readers,

¹Department of Radiation Safety and Security, Paul Scherrer Institute, Villigen PSI, Switzerland. ²Center for Proton Therapy, Paul Scherrer Institute, Villigen PSI, Switzerland. [✉]email: jeppe.christensen@psi.ch

Constraining the exhumation rate of mountains

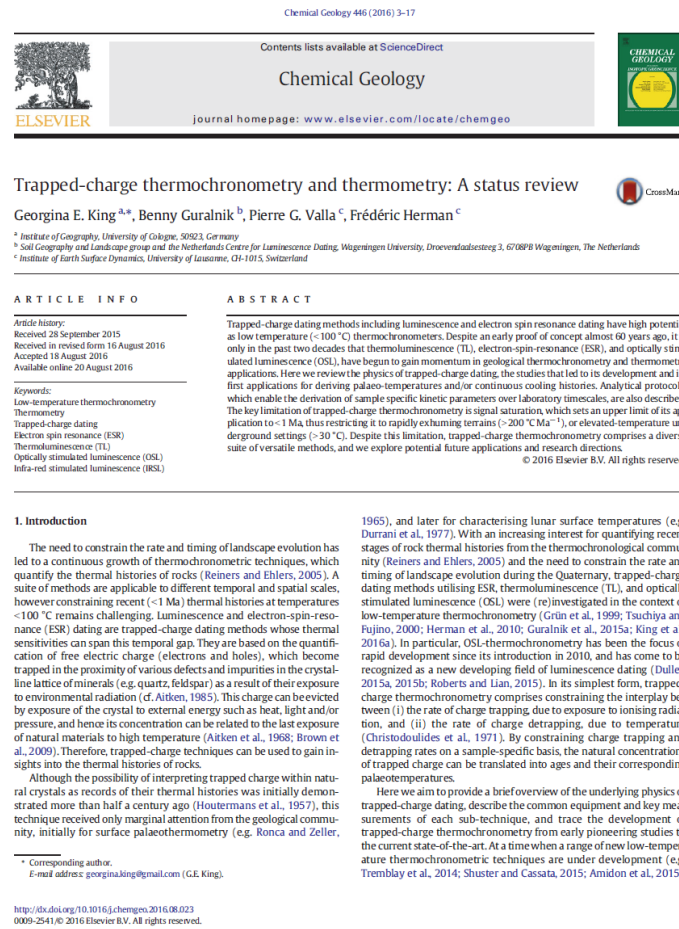
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Characterisation of phosphors

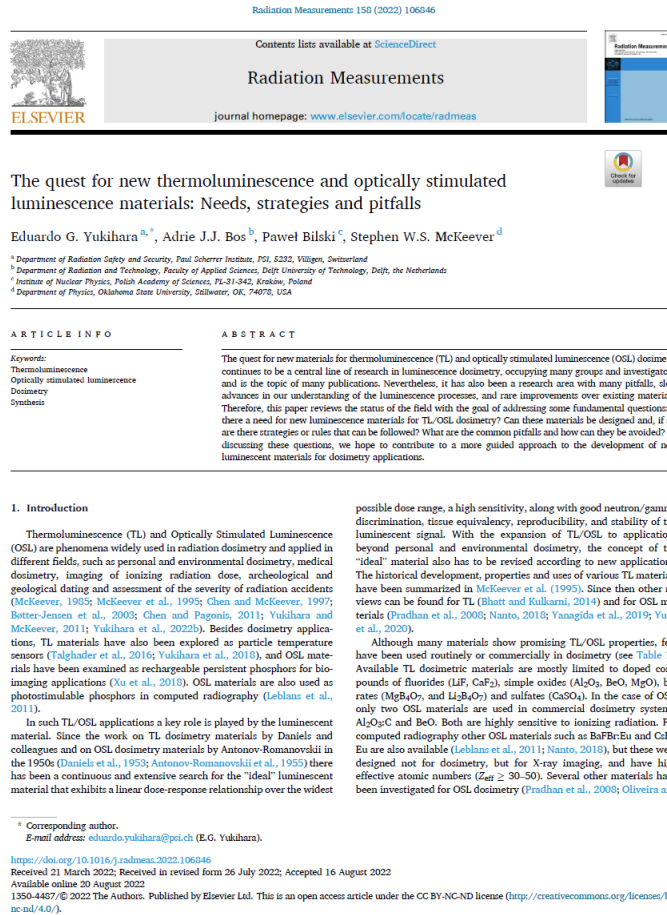
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Questions?

**Master projects
available in our
group!!**

Get in touch:

Lily.bossin@psi.ch



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- Yukihiro, Eduardo G., and Stephen WS McKeever. *Optically stimulated luminescence: fundamentals and applications*. John Wiley & Sons, 2011.