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PREDICTION OF HIGH-RESOLUTION PORTAL IMAGES FOR TREATMENT VERIFICATION IN RADIOTHERAPY BY COUPLING MONTE CARLO SIMULATIONS TO NON PARAMETRIC BAYESIAN DENOISING

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6 I. INTRODUCTION

7 In order to ensure safety and efficiency in the delivery of Intensity Modulated Radiotherapy (IMRT) treatments, amorphous silicon (a-Si) electronic portal imaging devices (EPIDs) are now routinely used for dosimetric 8 9 verifications. A straightforward way to do this is to compare the measured EPID image with a reference image 10 which can be calculated in the treatment planning system (TPS). Among the various prediction models proposed to compute the reference image. Monte Carlo (MC) simulation is highly attractive due to its ability to predict 11 12 accurately and directly the dose to the detector in a wide range of configurations, without requiring the 13 conversion to dose in water [1]. However, MC remains to date so time consuming that MC computation of portal 14 images with meaningful statistical uncertainty is only feasible for pixel sizes around 2 mm, which could lead to 15 misinterpretations due to the loss of image resolution. To overcome this problem, we developed a new method to 16 compute high resolution reference EPID images in reasonable computing times. This method is based on the 17 denoising of MC calculated images with a non parametric Bayesian algorithm called DPGLM (for Dirichlet 18 Process Generalized Linear Model) [2], particularly suited to very noisy images. In this study, an accurate model of an a-Si EPID was first developed and validated. Then, the performances of the denoising algorithm were 19 20 assessed and compared to those obtained with IRON (Iterative Reduction Of Noise [3]), a denoising algorithm usually employed in radiotherapy. Finally, MC images of a head-and-neck treatment plan were computed and 21 22 denoised, and then compared to acquired EPID images.

23 II. MATERIALS AND METHODS

24 II.1. EPID model development and validation

25 Experiments were carried out with a Siemens Optivue1000 EPID mounted on a Siemens ARTISTE linear 26 accelerator (linac). The Optivue1000 is an a-Si flat panel device of 1024×1024 pixels of 0.39×0.39 mm² each, representing a 41×41 cm² active detection area. The PENELOPE MC code was used both to model the linac [4] 27 28 (including a full description of the Siemens 160 leaf MLC) and the EPID. The EPID model consists of 13 layers 29 described in terms of geometry and materials according to manufacturer's information. To mimic backscattering coming from structures surrounding the EPID, uniform water-equivalent slabs of varying thicknesses (from 1 to 30 31 70 mm) were added below this model and corresponding images were simulated for 10×10 and 20×20 cm² fields. By comparing profiles drawn in the inline and crossline directions on simulated and acquired images, a 32 33 non-uniform map of water-equivalent slabs can be deduced.

34 The final model was validated against experimental data for two configurations. First, portal images without 35 phantom in the beam were acquired for different jaw defined field sizes (5 \times 5, 10 \times 10, 15 \times 15, 20 \times 20 and 36 25×25 cm²) with the EPID positioned at a 100 cm source to detector distance (SDD). Second, a layered heterogeneous phantom (cf Figure 1) was placed in the beam, its entrance face located at 67.8 cm from the 37 38 source. This phantom is made of two $30 \times 30 \times 5$ cm³ slabs of water equivalent material (1.04 g/cm³), a 39 $30 \times 30 \times 8$ cm³ slab of CIRS bone equivalent material (1.8 g/cm³) and two $30 \times 16 \times 8$ cm³ slabs of CIRS lung 40 equivalent material (0.3 g/cm³), separated by a 3 cm air gap. For the model validation step, portal images were computed on a 256 × 256 pixel grid (pixel size: 1.6 mm) to decrease the simulation run time. Acquired and 41 42 simulated images were then compared using a 2 % / 2 mm gamma-index, after normalization of the simulated 43 images with respect to acquired images.

44 II.2. Denoising of portal images

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II.2.1. IRON denoising method

46 The IRON denoising method relies on the minimization of a criterion combining two terms: one accounting for 47 the data adjustment and the other one encouraging low curvature. But since the curvature penalty in IRON is 48 non-convex, a global minimum solution is not guaranteed. Another difficulty in the IRON method lies in the 49 roughness of the non differentiable penalty. Minimization routines like conjugate gradient or quasi-Newton 50 methods are known to be non optimal for such non smooth functions.

51 With a pixel size of about 2 mm, these algorithmic difficulties tend to be mitigated since the MC calculated dose 52 images can exhibit a convenient signal-to-noise ratio (SNR). In this situation, the initial point of the 53 optimization, which is taken to be the MC data, is not "so far" from the desired solution. But this is not the case 54 when one wants to respect the EPID's physical pixel size (0.39 mm) in the MC simulations. We are faced here to 55 o much pricing environment for measurable computation. 56 reveal the ill-behavior of the minimization routine and extremely slow convergence to a local minimum. This

initialization point's dependency may appear troublesome and this work aims at proposing a method relaxing
 this constraint.

59 <u>II.2.2. Principles of the DPGLM denoising method</u>

In the statistical interpretation of the IRON criterion, the curvature penalty can also be seen as a kind of *prior* term characterizing our degree of belief in a smooth dose deposit. This Bayesian rephrasing of the denoising problem forms in that way the framework of the proposed approach. A key point of Bayesian methods is that they give access to the estimation's uncertainty. Namely, we seek for the whole set of solutions, expressed by their *posterior* distribution, instead of looking for just a particular one. We retain for the dose estimate the posterior mean – which minimizes the L2 risk –. As a side-effect, our method is able to propagate the whole

- 66 information present in the MC data.
- 67 Another characteristic of our approach is its nonparametric feature. Since the number of variables is huge in the
- 68 EPID's MC data denoising problem ($n=1024 \times 1024$ pixels), it turns out that it is convenient to consider the
- 69 problem as the estimation of a continuous surface in R^2 which amounts to infer over a potentially infinite number
- of parameters, leading to a so-called *Bayesian nonparametric regression* approach. All statistical material cannot be expressed here and readers may refer to [2, 5] to gain an insight into involved methodologies. We model the *n*
- 72 computed EPID's data (x_i, y_i) for i=1,...,n, where $x_i \in R^2$ stands for the pixel coordinates and y_i for the pixel's
- 73 calculated dose. The method lies in estimating f(x,y), the join distribution of (x,y), from simulated points (x_i,y_i) in
- 74 a nonparametric way and to take for the denoised dose d(x) for all $x \in R^2$:

$$d(x) = E(y|x) = \int_{R} y \cdot f(y|x) \, dy = \frac{\int_{R} y \cdot f(x,y) \, dy}{\int_{R} f(x,y) \, dy}$$
(1)

Nonparametrics arise from the choice of a Dirichlet Process Mixture (DPM) for prior specification of the joint density f(x,y). Roughly, the DPM structure involves an open-ended number of components which relies only on the dataset and DPM parameters.

- From the elicited prior and data (x_i, y_i) , we want to compute the posterior distribution $f(x, y | x_1, y_1, ..., x_n, y_n)$
- and conditional expectation $\hat{d}(x) = E(y|x, x_1, y_1, ..., x_n, y_n)$. The exact computation of the posterior is intractable and we use a Markov Chain Monte-Carlo (MCMC) approximation scheme (Gibbs sampler) to draw samples from the target distribution.
- At each iteration (*t*) of the MCMC procedure, we are thus able to sample a denoised dose surface $d(x)^{(t)}$. For *T* samples, the posterior distribution is given by the set of $d(x)^{(t)}$ for t = 1,...,T, and the dose estimate (posterior mean) is expressed as:

$$\hat{d}(x) \approx \frac{1}{T} \sum_{t=1}^{T} d(x)^{(t)}$$
 (2)

85 We can as well compute the posterior standard deviation or credible intervals from the collection $\{d(x)^{(t)}\}$.

All parameters of the DPM prior distribution are also sampled at each iteration, assuming an additional degree of hierarchy in the dose data model and putting vague priors on these parameters.

II.2.3. Denoising test case

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89 Denoising effectiveness of the DPGLM algorithm was assessed on 1024×1024 images simulated for the 90 heterogeneous phantom irradiated by a 15 \times 15 cm² field. MC calculations of phase space files (PSF) storing 50, 91 100, 500, 1000, 1700, 3000 and 5000 million photons were performed with associated statistical uncertainties of 92 better than 15, 10, 5, 3.5, 2, 1 and 0.7 % of the maximum dose. Portal images were then simulated using these 93 PSF and recycling particles with a splitting factor of 10, and they were then denoised with the DPGLM and 94 IRON algorithms. To assess performances of both algorithms, we calculated in a 600×600 pixel central area of 95 the image the fraction of pixels presenting a difference of more than 1 % of the maximum normalized dose, with 96 respect to the reference image. Due to computational time limitations linked to EPIDs MC calculations, the 97 choice of a common reference image remains a tricky issue since the image with the best statistical uncertainty (0.7 %) is still too noisy to be taken as the reference. In order to avoid any bias in the comparison, we then 98 99 resorted to use a reference for each denoising method, namely the image with 0.7 % statistical uncertainty 100 denoised with the algorithm under test. The reference for raw MC image evaluation is the 0.7 % statistical 101 uncertainty MC image itself.

102 II.2.4. Application to a head-and-neck treatment plan

103 The portal image associated to one of the beams used in a head-and-neck IMRT treatment plan was simulated 104 with an associated statistical uncertainty of better than 5 % and was denoised with DPGLM and IRON.

105 III. RESULTS

106 III.1. EPID model development and validation

107 The model for the Optivue1000 EPID that best matches experimental data includes two kinds of non-uniform 108 layers of water-equivalent material beneath the 13 layers model: a 50 mm water layer of 16×33 cm², centered in 109 (x=0 cm, y=-4 cm) (the Y axis refers to the inline direction) and anywhere else a 30 mm water layer. Profiles 110 drawn through acquired and simulated images in the crossline direction are shown on Figure 2, for portal images 111 without and with phantom in the beam, respectively. 2D gamma-index values are also given in Table I. These 112 results demonstrate the need to include in the model a correction for backscatter to accurately predict portal 113 images in any configuration, especially for large field sizes.

Table I. Comparison of gamma-index values obtained for the different configurations. Images with phantom Images without phantom Without With With Field size (cm²) backscatter correction backscatter correction backscatter correction 99.4 % 99.4 % 5 x 5 99.4 % 10 x 10 95.0 % 98.4 % 98.1 % 15 x 15 97.4 % 97.5 % 95.4 % 20 x 20 96.1 % 57.2 % 25 x 25 24.6 % 93.1 %



Figure 1. Description of the
heterogeneous phantom.Figure 2. Profiles for acquired (blue) and simulated (red) portal images in the crossline
direction, for the configuration without phantom (left) and with phantom (right).

115 III.2. Denoising of portal images

116 <u>III.2.1. Denoising test case</u>

As expected, we experienced slow convergence for the IRON algorithm for low SNR images. Note that, due to the large amount of variables, we resorted to use a limited-memory Broyden, Fletcher, Goldfarb, Shanno algorithm (LM-BFGS) [6]. Despite the needs of significant computing requirements, the structure of DPGLM algorithm makes it suitable for parallelization contrary to the LM-BFGS optimization algorithm. As a consequence, the effective computation times are similar for both methods.

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Figure 3. Fraction of pixels failing the 1 % difference test for MC images (raw data), images denoised with IRON and with DPGLM.

Figure 4. Central profiles drawn through the reference image, the MC image, the image denoised with IRON and the image denoised with DPGLM, for a 100 million photons PSF.

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Figure 3 summarizes the fraction of pixels which fail the 1 % criterion. In all cases, the interest of using any of the denoising algorithms is evident, even for MC images with a high SNR. IRON and DPGLM exhibit similar 126 performances for images with a statistical uncertainty better than 2 %. At lower SNR, the statistical basis of 127 DPGLM offers more robustness with respect to noise. This allows maintaining below 2 % the fraction of pixels 128 failing the chosen dose criterion for images with a statistical uncertainty lower than 5 %. Obtaining the same 129 image quality with IRON would require a PSF about three times larger. We also observe on the profiles shown in Figure 4 that DPGLM produces smoother images than IRON while preserving edges in high-gradient dose 130 131 regions. These results demonstrate that it is possible to reach image quality compatible with clinical 132 interpretation for PSF storing between 100 (10 % statistical uncertainty) and 500 million photons (5 % statistical 133 uncertainty) with DPGLM. For instance, the computation of the simulated image on 100 processors (2.26 GHz) 134 of our Linux cluster lasts in half an hour when running 100 million photons from the PSF and 2,5 hours when 135 running 500 million photons. In the same configurations, DPGLM denoising on 1024×1024 images necessitates 136 1,5 hour. The complete computation of the portal image takes 2 hours and 4 hours for 100 and 500 million 137 photons, respectively. Shorter MC simulation times were observed for smaller field sizes.

138 <u>III.2.2. Head-and-neck treatment plan</u>

139 The acquired image and its reference image calculated by combining MC simulation and DPGLM denoising are 140 shown on Figure 5. Profiles drawn along the white line on the acquired image, the undenoised MC image, the 141 MC image denoised with IRON and DPGLM are compared on Figure 6. Here again, DPGLM produces

smoother images than IRON and allows direct comparison with the acquired image at the same resolution.



Figure 5. Acquired EPID image (left) and associated simulated image after denoising with DPGLM (right), for the head-and-neck treatment beam.



Figure 6. Profiles drawn through the acquired image, the MC image undenoised, the MC image denoised with IRON and with DPGLM.

143 IV. DISCUSSION AND CONCLUSION

144 This study shows that the combination of MC simulations with efficient denoising methods enables the accurate 145 computation of high-resolution portal images for computational burden now compatible with clinical settings and acceptable for TPS. Particularly, in a context of low SNR, DPGLM reveals interesting performances. In 146 addition, some features of the proposed method have not been fully investigated. Among them, based on a 147 148 nonparametric regression approach, DPGLM is able to interpolate the dose deposit at any coordinates of the 149 portal image's plane. This could offer flexibility in the choice of final image resolution. Another key feature of 150 the approach lies in the uncertainty estimation over the whole image. This could bring enhanced information 151 which can help in practical situations to determine credible intervals containing the desired dose image.

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