



Department of Radiation Sciences

Institute of Radiation Protection WG Medical and Environmental Dosimetry

Developments from MIRD to the current ICRP reference voxel phantoms

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Overview

- Background (radiological protection)
- Short history of anthropomorphic phantoms
- Stylized ("MIRD") vs. voxel phantoms
- ICRP Reference computational phantoms
 - Method of construction
 - Characterisation
 - Applications and conceptual limitations



Protection against ionising radiation

Risk from ionising radiation:

- Potential detrimental effects on human health at higher exposure levels
- Needs to be limited

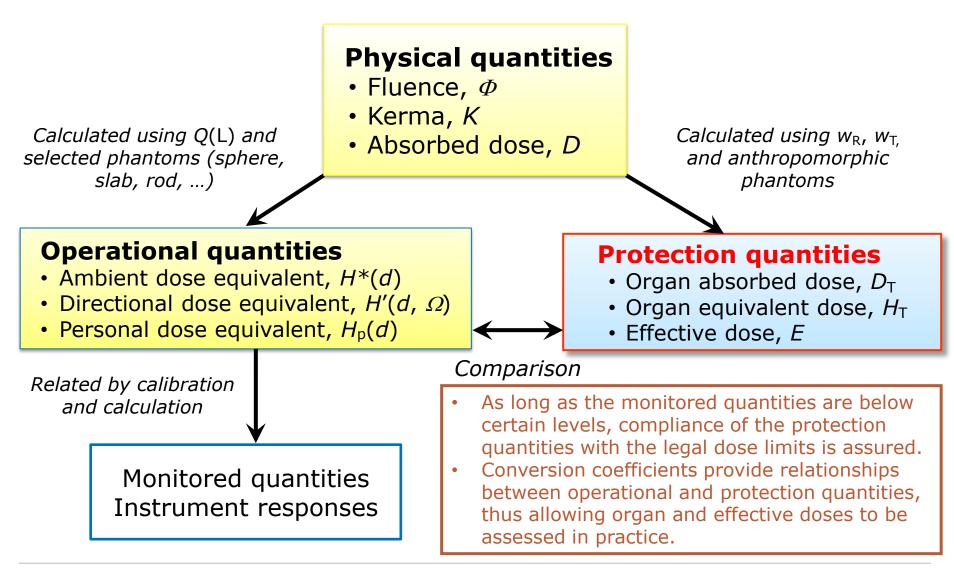
Radiation protection legislation and infrastructure that limits annual doses to

- whole body
- individual radiation-sensitive organs

at workplaces and from the environment



Dose quantities for radiological protection

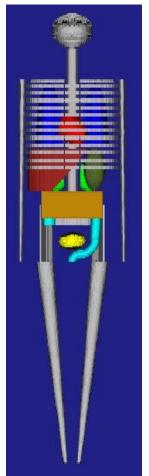


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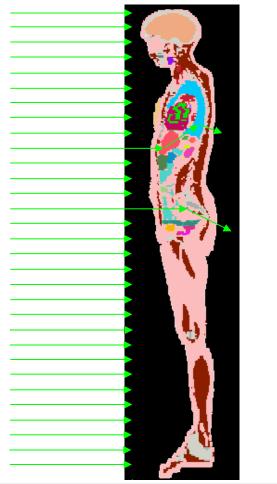
Calculation of conversion coefficients with radiation transport programs

Remote past



- Model of the radiation source
- Model of the body
- Physical models of
 - radiation interactions
 - energy depositions

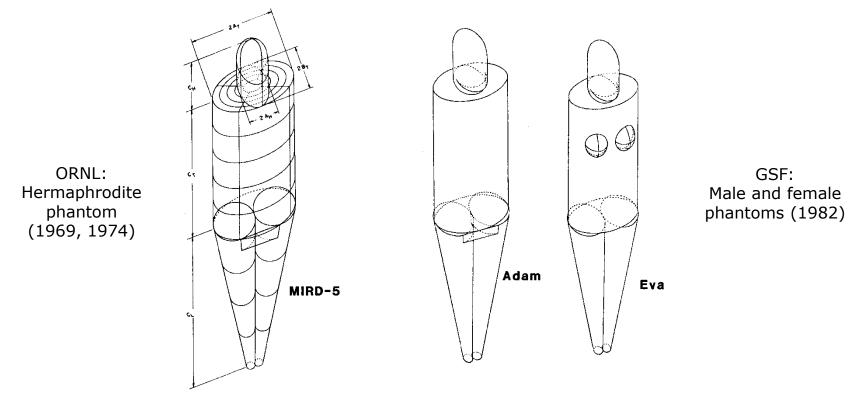
Recent past until present



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Various types of anthropomorphic phantoms – mathematical phantoms

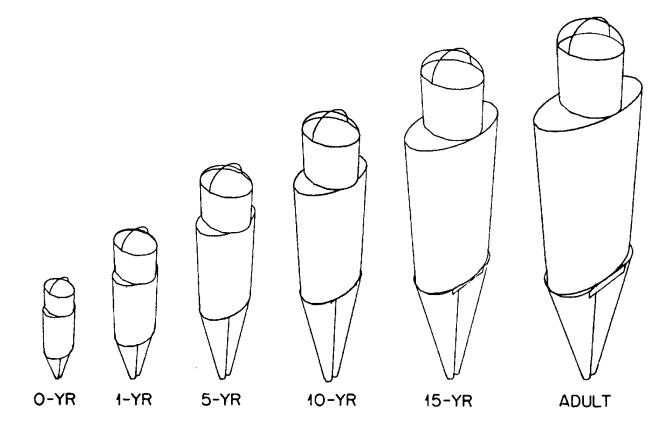


- Organ masses and volumes according to data on Reference Man (ICRP Publication 23, 1975)
- Organ shapes described by geometrical bodies (spheres, ellipsoids, cylinders, cones ...)



Mathematical models of the human body

ORNL-DWG 79-19955



Oak Ridge phantom family (Cristy, 1980) Further developed by Cristy and Eckerman (1987)

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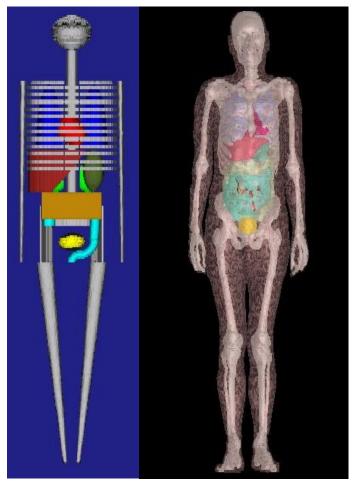
Various types of anthropomorphic phantoms – mathematical phantoms

Advantages:

- They are simple.
- They are flexible.
- They represent a "standard" or "reference" person.
- They can easily be used with (Monte Carlo) radiation transport programmes.

Disadvantage:

They are unrealistic.



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Adam

Golem

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EURADOS Winter School, Lisbon, 8 Feb 2018

HELMHOLTZ RESEARCH FOR GRAND CHALLENGES

Various types of anthropomorphic phantoms – voxel phantoms

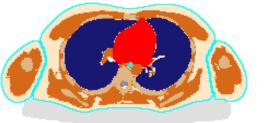
Construction of voxel models from 3D medical image data

- Whole body (or partial body) tomographic data of contiguous slices
- Numbered list of relevant organs (organ identification numbers, OID)
- Identification of relevant organs on the single slice images
- Replacement of the grey values (Hounsfield Units) by organ identification numbers (segmentation) using image processing software



Original CT slice Grey values: absorption properties

Image processing software



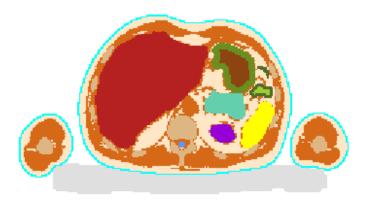
T-50 **Segmented** slice Colours: identification numbers assigned to individual organs



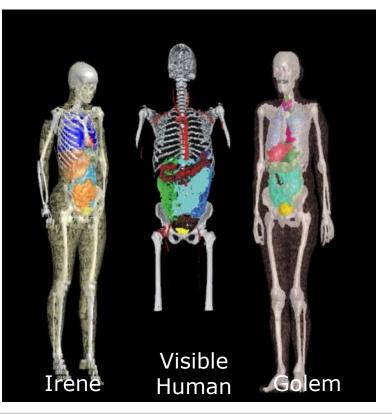
Various types of anthropomorphic phantoms – voxel phantoms

Segmented data

Data per slice arranged in columns and rows of picture elements (pixel)



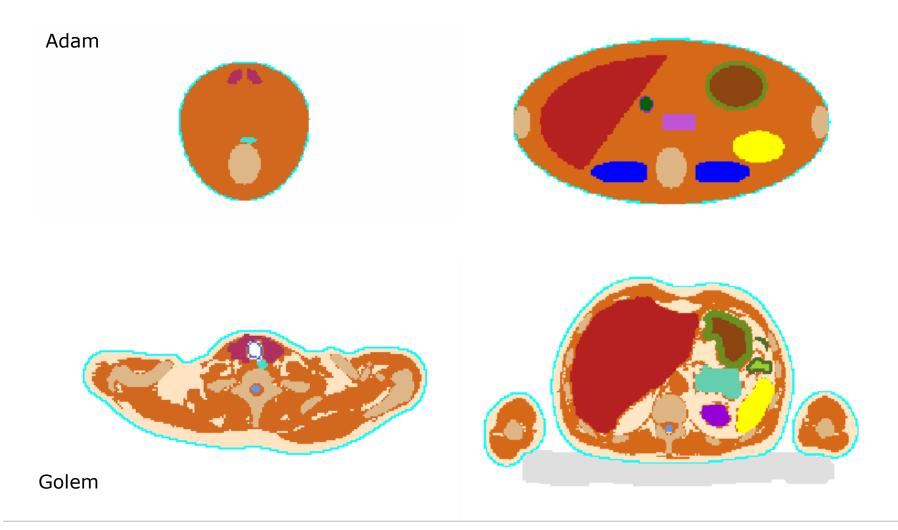
Stack of slices \rightarrow 3D array of volume elements (voxel)



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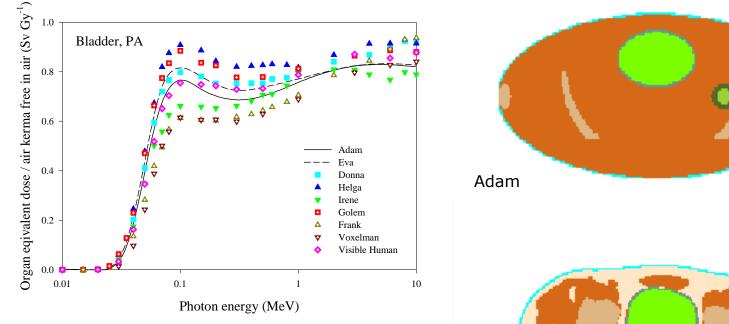
Voxel models have a more realistic anatomy



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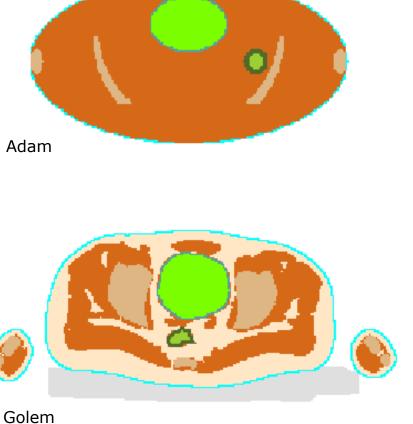
Comparison of voxel-type and schematic phantoms – Dosimetry



External dosimetry: organ dose conversion coefficients

Doses for mathematical phantoms inside dose range for a variety of voxel models

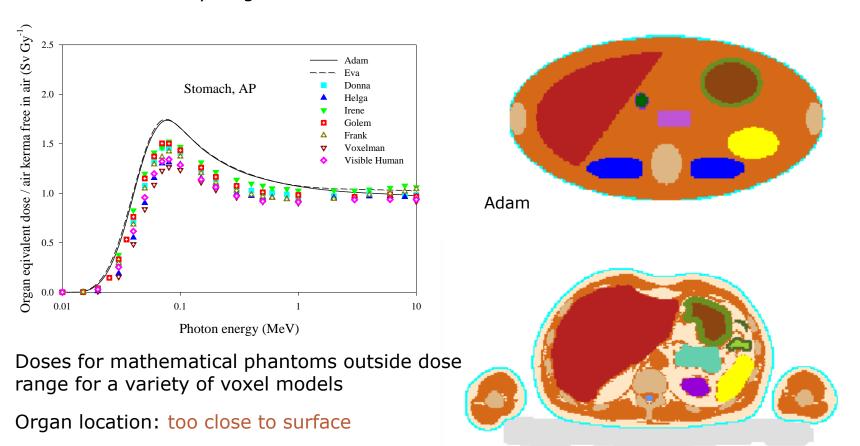
Organ location: similar



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Comparison of voxel-type and schematic phantoms – Dosimetry



External dosimetry: organ dose conversion coefficients

Golem

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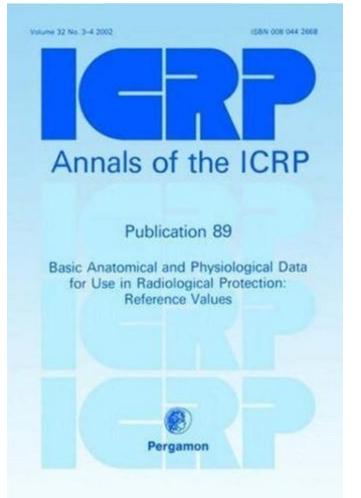


Comparison of voxel-type and schematic phantoms – Dosimetry (external photons)

- Dose differences between individual voxel models mostly < 30% (60-200 keV); in single cases up to 100% and more
- Dose values for mathematical models partly outside these ranges
- Reason: unrealistic geometry
 - Organs located too shallowly beneath the skin: stomach, spleen, kidneys
 - Circumference of trunk too flat (elliptical)
 - Constant trunk diameter from neck down to bottom of trunk



For legislation, "standard" (or "reference") persons are needed



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ICRP has specified their main characteristics:

Table 2.9. Reference values for height, mass, and surface area of the total body

Age	Height (cm)		Mass (kg)	
	Male	Female	Male	Female
Newborn	51	51	3.5	3.5
1 year	76	76	10	10
5 years	109	109	19	19
10 years	138	138	32	32
15 years	167	161	56	53
Adult	176	163	73	60

Reference masses for 56 organs, organ groups, and tissues



Reference computational phantoms – Method of construction



Select segmented voxel models of male and female individual whose body height and mass closely resemble the ICRP 89 reference values "Golem": 176 cm. 69 kg (176 cm. 73 kg)

"Golem":	176 cm,	69 kg	(176 cm,	73 kg)
"Laura":	167 cm,	59 kg	(163 cm,	60 kg)

Modify these segmented voxel models in several steps

- Voxel scaling
- Individual organ volume modifications
- Additional modifications (blood, lymphatic nodes, ...)
- Sub-segmentation of bones (cortical bone, spongiosa, medullary cavity)



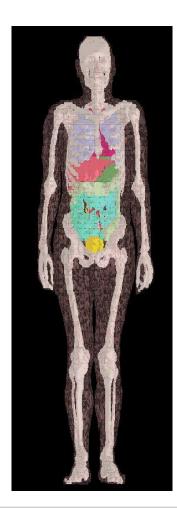
Golem

Laura

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Reference computational phantoms – Characterisation



Male 176 cm, 73 kg 1.9 million voxels Voxel size: 36.5 mm³

140 Organ identification numbers

Female 163 cm, 60 kg 3.9 million voxels Voxel size: 15.2 mm³



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Limitations due to image resolution

Extrathoracic airways, trachea: one voxel layer

- does not mirror their small dimensions (thickness in the range of micrometres)
- but: locates them at correct anatomical position
 Bronchi
- only larger diameters
- no proper tree structure

Bronchioles: homogeneous lung tissue

Skin: one voxel layer

Cartilage: only small amount segmented

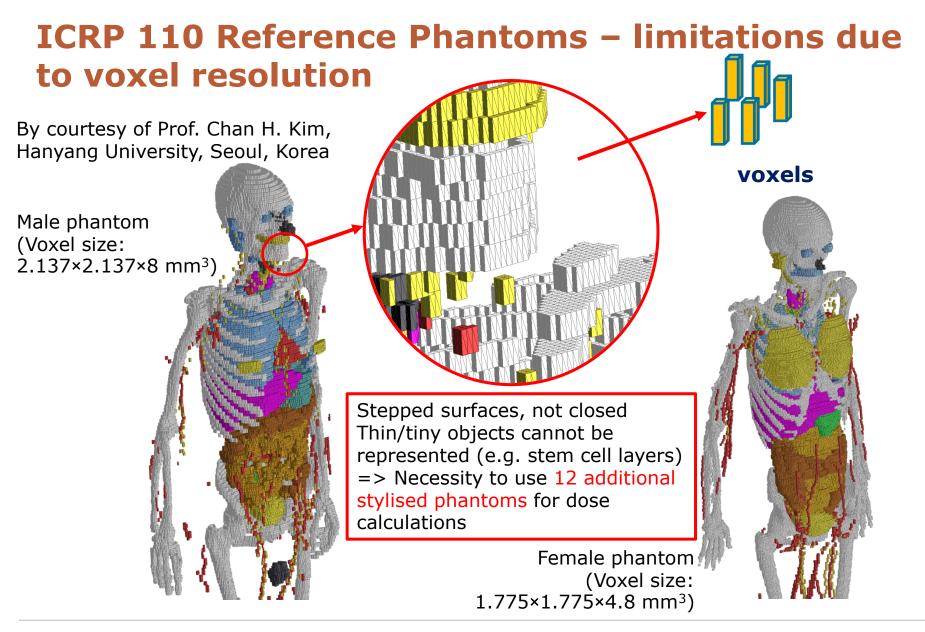
Gall bladder: not enough wall voxels to enwind the contents

Eye lenses: not properly covered by correct amount of overlying tissue

Adipose tissue

- used to fill up the whole body mass
- meets the reference values of ICRP Publication 89 only approximately





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Applications and conceptual limitations of the reference computational phantoms – summary

These phantoms are currently the official computational models representing the ICRP Reference Male and Reference Female.

They are based on computed tomographic data of real persons.

They are defined to enable calculations of the protection quantities organ and tissue equivalent dose and effective dose.

They have organ masses of reference values, but they have still individual organ topology reflecting the tomographic data used in their construction.

Both models cannot represent any real individual.

These phantoms have limitations concerning their spatial resolution.

