

Illinois Institute of Technology

Radiation Biophysics High-LET Radiation Andrew Howard

08/07/2008

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Class Overview

- ◆ High-LET Radiation
 - Review of definitions
 - Physics of energy deposition
 - Impact on DNA
 - Resistance to repair

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High LET Radiation

- ◆ Review definition of LET:
Rate of change of energy with distance along a track
- ◆ Caveat I: Local Deposition
- ◆ Caveat II: LET only associated with charged particles

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LET Equation: Bethe-Block Formulation

- ◆ If we let:
 - z^* = Effective charge of projectile particle
 - Z = Atomic number of atoms in medium
 - A = Atomic weight of atoms in medium
 - C = sum of electron shell corrections
 - $\delta/2$ = condensed medium correction
 - $\beta = v/c$ for particle
 - I = <ionization potential for absorbing medium>
- ◆ $-dE/dx = (0.307z^{*2}Z/A\beta^2) \cdot \{[\ln((2m_0c^2\beta^2)/(1-\beta^2)I)] - \beta^2 - C/Z - \delta/2\}$

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Where is Energy Deposited?

- ◆ Most of the energy is deposited just before the particle stops moving
- ◆ We're interested in *average* LET over a region or track

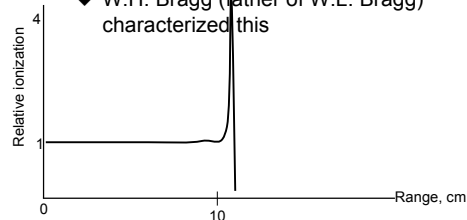
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Depositions with heavy particles

- ◆ "Bragg peak": most of the energy is deposited over a narrow linear track.
- ◆ W.H. Bragg (father of W.L. Bragg) characterized this



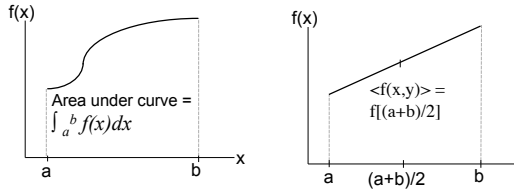
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Calculating Averages of Continuous Variables

We wish to calculate the mean of a continuous function $f(x)$ over a range of x from a to b ,
Then $\langle f(x) \rangle_{a,b} = [\int_a^b f(x) dx] / (b-a)$



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Applying this to LET

- ◆ Average LET over energies:
 $(LET_{av})_S = (1/(E_2-E_1)) \int_{E_1}^{E_2} [LET(E)] dE$
- ◆ So for a slowly varying LET function we assume that it is close to linear, i.e.
 $(LET_{av})_S = [(LET)_1 + (LET)_2] / 2$
- ◆ These are instances of *track segment averages*, $(LET_{av})_{TS}$; they're somewhat different from *energy averages*, for which we average over energy deposited.

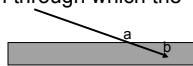
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Alternative averages

- ◆ Energy-averaged LET
(see previous slide; energy range from E_1 to E_2):
 $\langle LET \rangle_S = [1/(E_2-E_1)] \int_{E_1}^{E_2} LET(E) dE$
where E is the energy that we're averaging over.
- ◆ Track-averaged LET
(track from position a to position b):
 $\langle LET \rangle_{TS} = [1/(b-a)] \int_a^b LET(x) dx$
where x is the linear dimension through which the energy is being deposited



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Average LET, $\text{keV } \mu\text{m}^{-1}$

Table 14.1:

Radiation type	$(LET_{av})_T$	$(LET_{av})_E$
^{60}Co γ -rays	0.27	19.6
250 kVp x-rays	2.6	25.8
3 MeV neutrons	31	44
Radon α rays	118	83
14 MeV neutrons	11.8	125
Recoil protons	8.5	25
Heavy recoils	142	362

• Looks like the $(LET_{av})_{TS}$ is more in accord with our intuitive notion of what constitutes LET!

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Direct & Indirect Effects

- ◆ High LET means that many ionizations occur in a small neighborhood

	LET Kev/ μm	Spur energy eV	Events/ μm	Spacing nm
^{60}Co γ	0.25	60	4	250
Radon α	118	60	2000	0.5

- ◆ This fact by itself accounts for much of the difference in biological consequence of high LET radiation

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Biological Effects of High-LET Radiation

- ◆ RBE = relative biological effectiveness
- ◆ analogous to OER in its definitional form:
 $RBE = (\text{dose for given end point for reference radiation}) / (\text{dose for given end point for test radiation})$
- ◆ Problem with this formulation:
 - assumes that dose-response curves are described by identical functions, i.e.
 - RBE is independent of the response level at which it is estimated. Often not true!

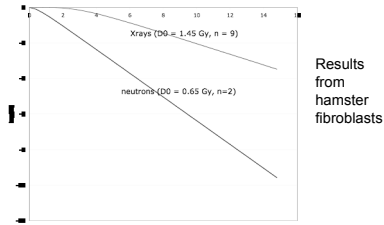
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MTSH comparisons

- ◆ Cf. fig. 14.3: Xrays and fast neutrons



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Can we define a single RBE?

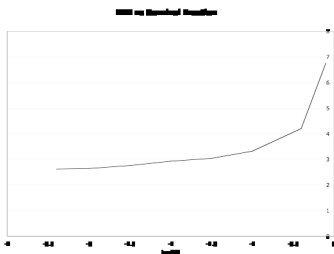
- ◆ Not really, unless our survival curves are really just rescalings of one another (“dose-modifying effect”)
- ◆ For MTSH data RBE will be close to constant if the extrapolation numbers aren't too high
- ◆ For LQ we're definitely going to have to pick a survival ratio

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Survival Level Matters!



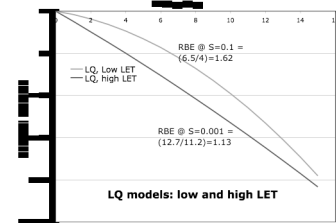
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LQ case

- ◆ RBE varies significantly between $S=0.1$ and $S=0.001$:



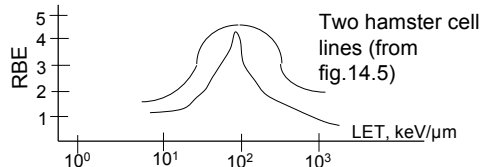
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Relationship between RBE and LET

- ◆ RBE vs LET:
- ◆ Generally higher LET radiations have higher RBE, up to a certain point.
- ◆ With some systems the curve turns over.



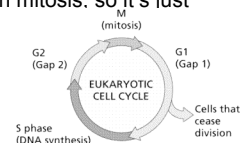
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Cell-Cycle Dependence for RBE

- ◆ Low LET radiations exert much more effect in late G2 & M than elsewhere
- ◆ High LET radiation exerts approximately equal effects throughout the cell cycle
- ◆ Reason: irreparable damage early in the cycle will persist through mitosis. so it's just as bad!



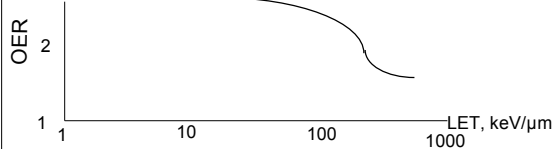
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OER vs LET

- ◆ OER for High-LET Radiation is generally smaller than for low-LET radiation because the damage is less dependent on oxygen fixation of radical species.
- ◆ This plot shows OER going not to 1 but to ~1.5-- because water-derived radicals are still produced at high LET; cf. Fig. 14.6.



LET vs Fractionation

- ◆ Recall that repair-competent systems respond less to fractionated doses than to single doses whereas repair-deficient systems are fractionation-independent
- ◆ For high-LET radiation fractionation does not decrease biological effects

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Contrarian results for fractionation

- ◆ Sometimes in tumors fractionation *increases* biological effect!
 - Why? - no explanation in Alpen
 - 2-stage model for cancer: (Ullrich)
 - Also: high dose rate is more likely to simply kill the cell rather than producing clonogenically competent but mutated cells (remember the concept of correcting for mortality in epidemiology)

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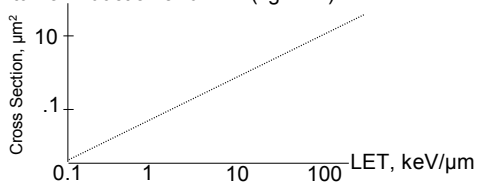
Late Effects of High LET Radiation

- ◆ You can induce cancer with neutrons
- ◆ Ignores fractionation or (!) damage is more likely with fractionation
- ◆ Tumors also arise from heavy-ion irradiation

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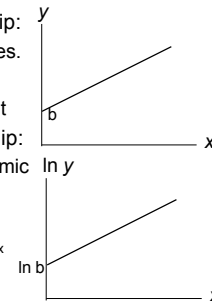
LET vs. Cross Section

- ◆ Alpen looked at particle fluence as a dose parameter-- requires constant LET over volume
- ◆ Result: power-law relationship between cross section for tumor induction and LET (fig.14.7)



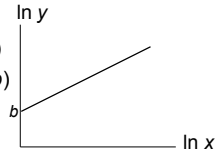
General note re linearity

- ◆ Ordinary linear relationship:
 - Both axes on linear scales.
 - $y = ax + b$,
 - a = slope, b = Y intercept
- ◆ Semi-log linear relationship:
 - X linear scale, Y logarithmic
 - $\ln y = ax + b$
 - $\exp(\ln y) = \exp(ax+b)$
 - $y = \exp(b) \exp(ax) = ke^{ax}$
 - for $k = \exp(b)$



Third possibility: power law

- ◆ Here we have linearity on a log-log plot:
- ◆ $\ln(y) = a \ln x + b$
- ◆ $\exp(\ln(y)) = \exp(a \ln x) \exp(b)$
- ◆ $y = k \exp(a \ln x)$ for $k = \exp(b)$
- ◆ But $a \ln x = \ln(x^a)$, so
- ◆ $y = k \exp(\ln(x^a)) = k x^a$
- ◆ So this is a *power law*.



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Probability of Traversals

- ◆ Table 14.2 shows that multiple traversals of the nucleus are very rare even at high doses

- ◆ It also shows a close correspondence between cross section for tumor production and cross-section for traversal

Dose, Gy	<fluence/ cell>	Probability of traversals			
		0	1	2	>= 1
0.01	0.006	0.993	0.006	2.1×10^{-5}	0.006
0.02	0.013	0.987	0.013	6.8×10^{-5}	0.013
0.05	0.032	0.968	0.031	5.0×10^{-4}	0.032
0.15	0.097	0.907	0.088	4.0×10^{-3}	0.092
0.20	0.129	0.878	0.114	7.0×10^{-3}	0.121
0.30	0.193	0.823	0.159	1.5×10^{-2}	0.176
0.40	0.258	0.772	0.199	2.5×10^{-2}	0.227

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Cell Transformation in High-LET Irradiation

- ◆ Assertion: non local effects on DNA predominate over point mutation events
- ◆ Certain assay systems suggest this assertion:
- ◆ Kronenberg et al, human TK6 lymphoblasts--entire *hprt* gene is missing after irradiation
- ◆ "If large genomic changes are brought about by heavy ion radiation, then a multistep process may be short circuited to a single event."

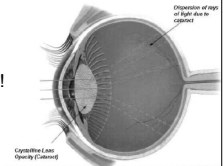
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Cataracts

- ◆ The vertebrate eye is a remarkable organ
- ◆ All the living components must be completely transparent for maximum fidelity of light transmission.
- ◆ Even the lens is made up of living cells!
- ◆ A loss of transparency is a *cataract*, either evanescent or permanent.
- ◆ A variety of insults can give rise to a loss of transparency.



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Cataracts from high-LET radiation

- ◆ It's long been known that high-LET radiation can give rise to cataracts, even at low doses.
- ◆ Relative biological effectiveness of high-LET radiation (neutrons) is 30 or more for low doses
- ◆ RBE goes down for higher doses
- ◆ Beams of ions ($Z > 20$) produce similar effects, again including lowered RBE for higher doses.

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The Ullrich Tumor Experiments

- ◆ Ullrich found that with low-doses of neutrons, fractionation never diminished incidence of tumors
- ◆ With certain types (lung, mammary) there was an *enhancement* in tumor rate with fractionation
- ◆ Dose-response was nonlinear
- ◆ Saturation and fall-off of incidence with high doses

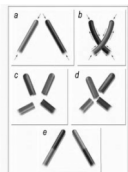
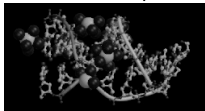
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Ullrich Experiment: Why?

- ◆ Mechanisms of Genetic Damage
- ◆ Low vs High LET
 - Low-LET radiation exerts many of its effects at the level of point mutations (single-base substitutions, deletions, or additions)
 - High-LET exerts most of its effects on a more macroscopic scale



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Macroscopic Damage to Chromosomes

- ◆ First half of chapter 13
- ◆ Structural changes in chromosomes
 - Inversions of fragments
 - Multiple hits
 - Isochromatid breaks
 - Dicentrics
 - Minutes
 - Cross over

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Cataracts

- ◆ Cataracts are common with high-LET radiation
- ◆ Reminder: cataracts involve loss of transparency in the lens because problems with differentiation will lead to failure of alignment of the fibers
- ◆ Cataracts happened with workers in early accelerator facilities
- ◆ RBE values are high, and tend to be higher for lower doses (i.e. low doses cause almost as many cataracts as higher doses)

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Cataracts from specific types of radiation

- ◆ Neutrons:
 - In animals: cause cataracts with RBE~2 to 100
 - But with humans: cataracts become rare up to 2 Gy, almost universal at $D > 11$ Gy.
- ◆ Argon and iron ions: RBE ~12-40 for low doses (below 0.25 Gy), more like 2-5 for higher doses
- ◆ Why does the RBE depend on dose?
 - Can't kill a cell more than once?
 - Mechanistic explanations (see Ullrich discussion)?

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