



FLASH sciences lab @Stanford
biology+physics+engineering | PI: B Loo



Stanford
MEDICINE | Department of
Radiation Oncology

Clinical perspective of VHEE

Billy W Loo Jr MD PhD FASTRO FACR

Professor, Director of Thoracic Rad Onc, Co-Director of Particle Therapy,
Director of New Technologies

PI – FLASH Sciences Lab @Stanford

Department of Radiation Oncology & Stanford Cancer Institute

Stanford University School of Medicine



@BLoo_LT_SABR
#FLASH_RT #PHASER

International Workshop on Very High Energy Electron Radiotherapy (VHEE'25)

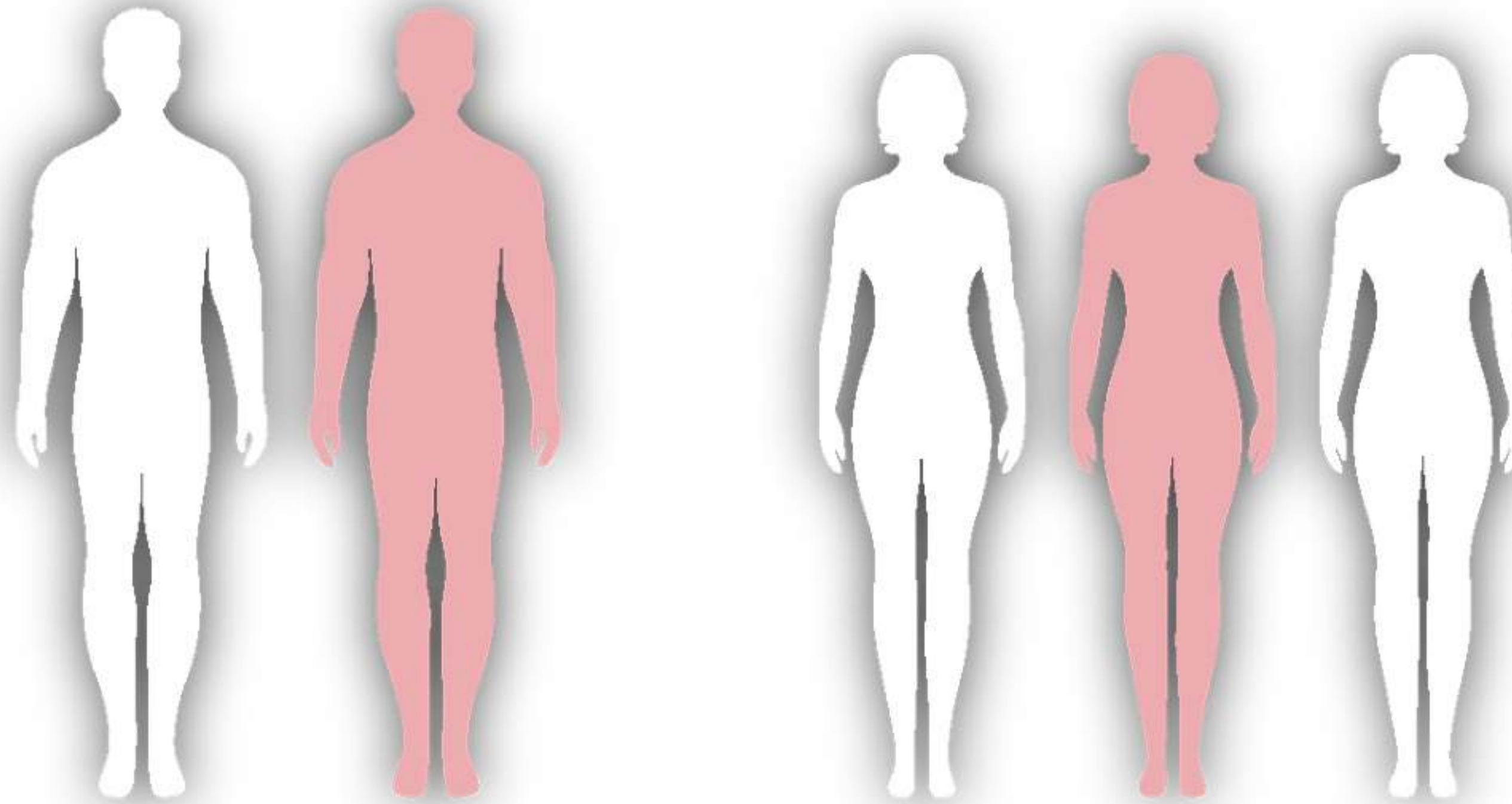
Sept 15-17, 2025

STFC, Daresbury Laboratory



Cancer is the #1 single cause of global deaths

In the US, 2 in 5 people will get it



1 in 5 people will die of it

c.f., American Cancer Society, Siegel CA 2024

What does it take to **cure cancer**?



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- Elimination of cancer
- Survival of patient *without* unacceptable collateral injury



Cancer can **only** be cured if the treatment needed to eliminate the cancer **can be tolerated** by the patient



Therapeutic precision:

Targeting cancer

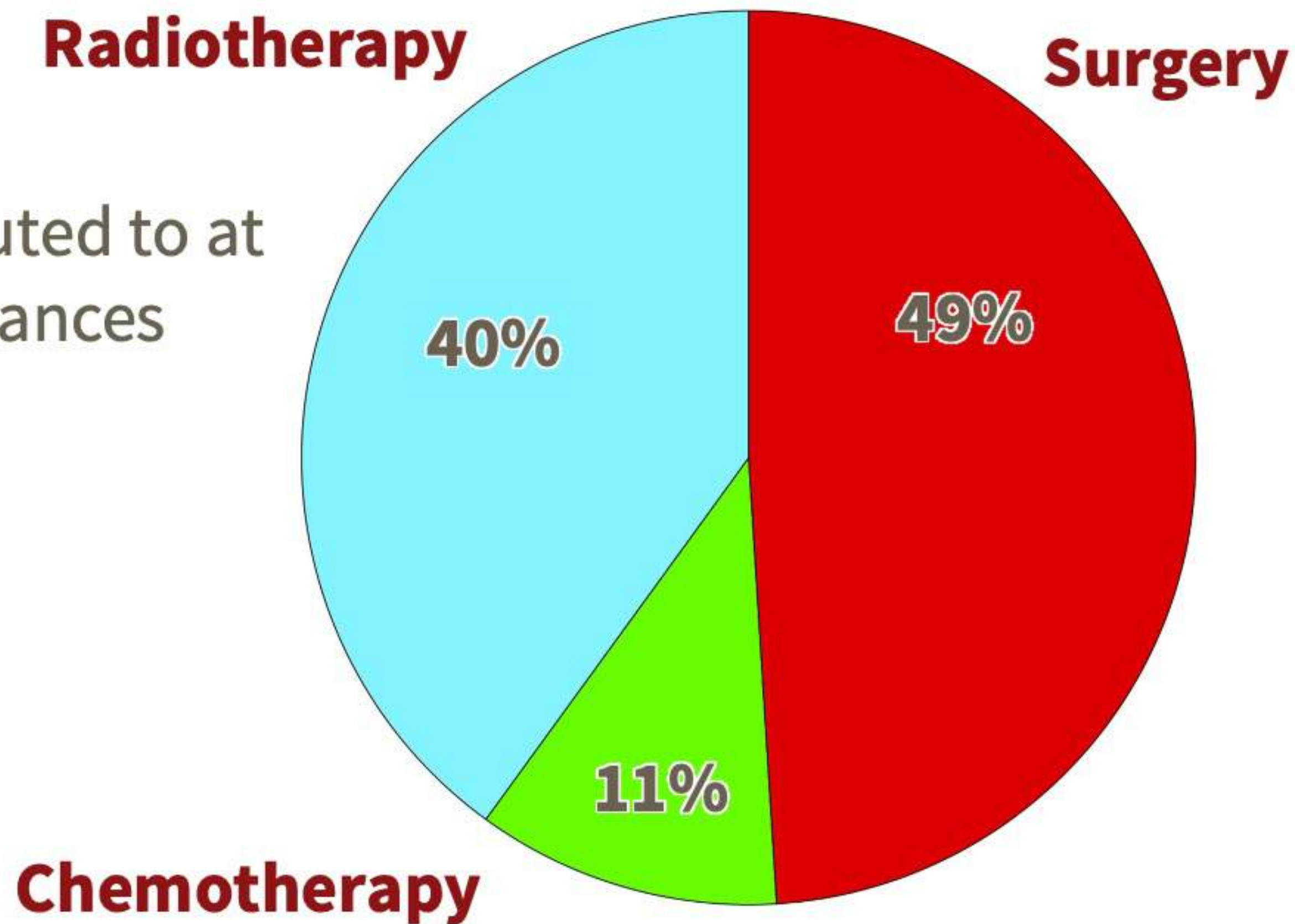
Sparing normal tissue
(therapeutic index)



In the US, **radiotherapy** is used to treat ~2/3 of patients with cancer, most with curative intent

Historically, radiotherapy has contributed to at least 40% of cures – growing with advances

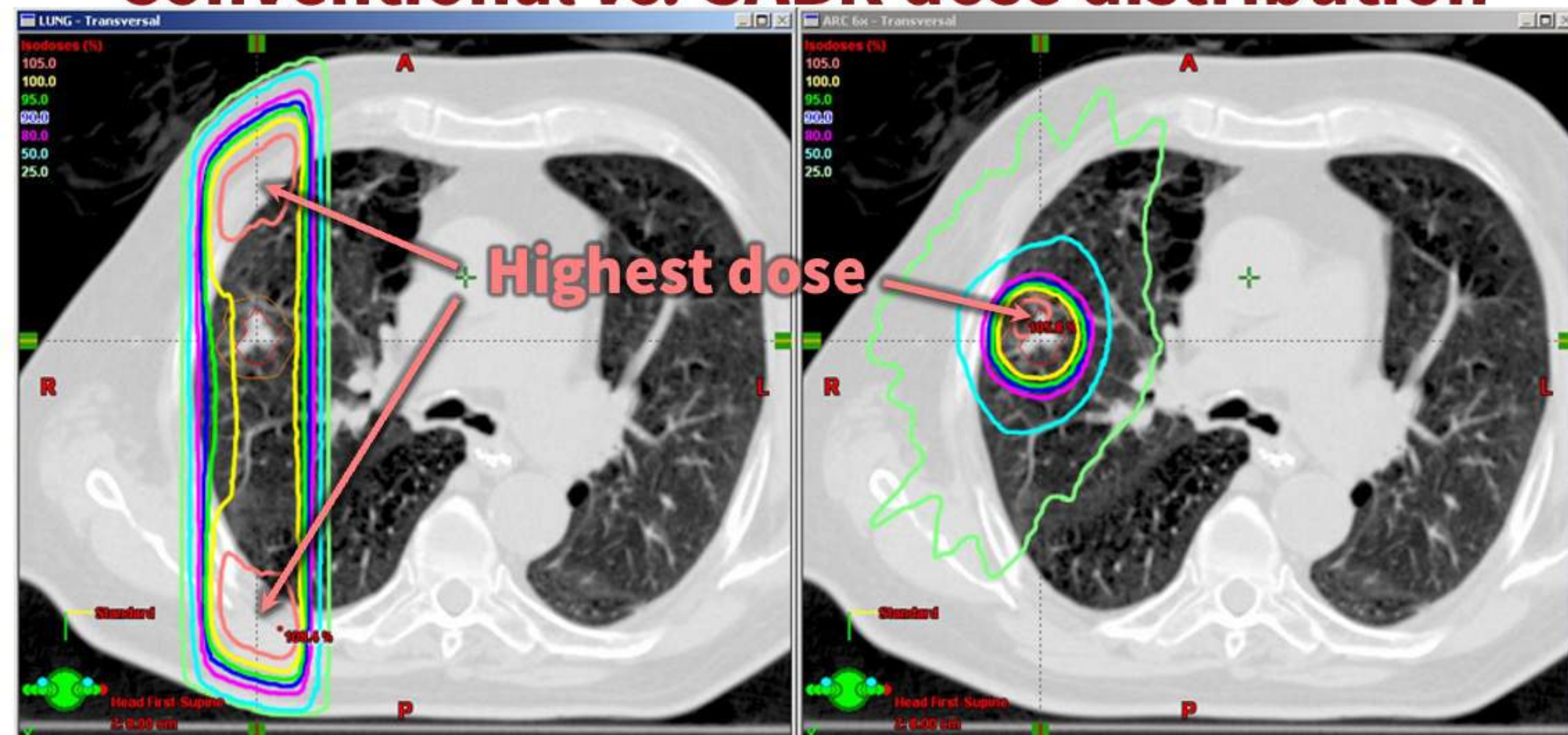
! *Breakthroughs in radiotherapy
can revolutionize cancer therapy*



Mee Br J Radiol 2023

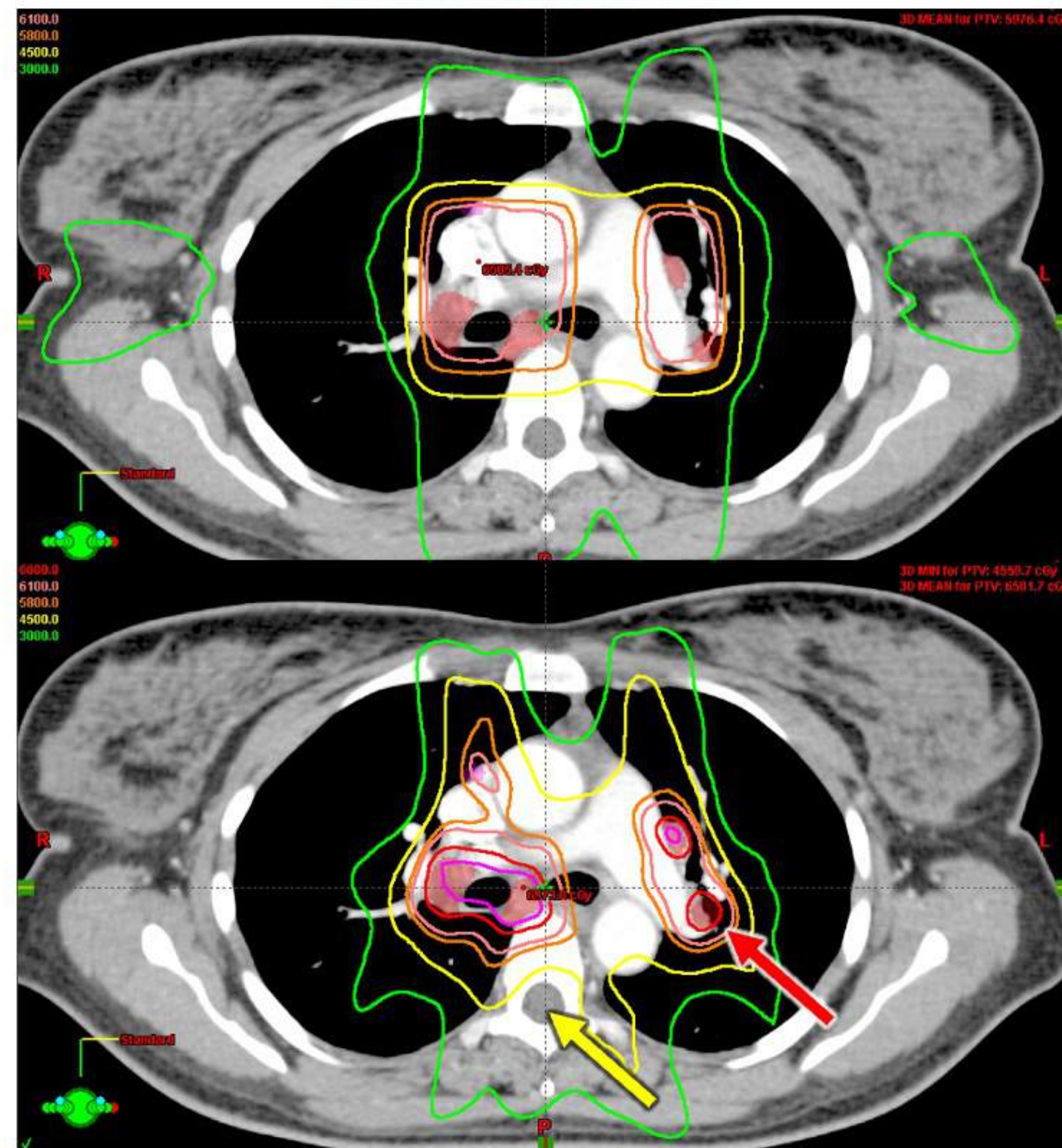


Conventional vs. SABR dose distribution



! Major improvements in **therapeutic index**
through **spatial precision**

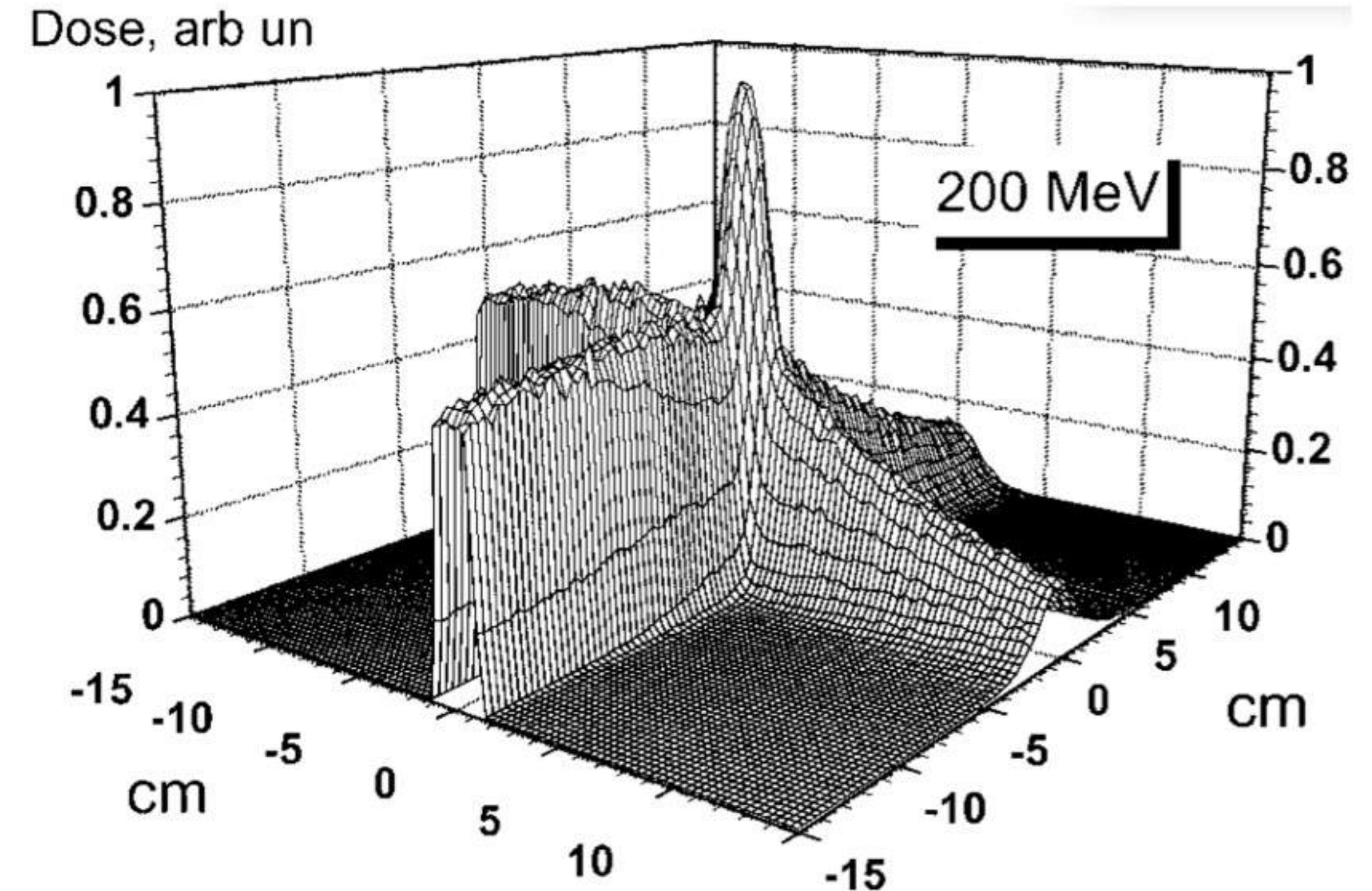
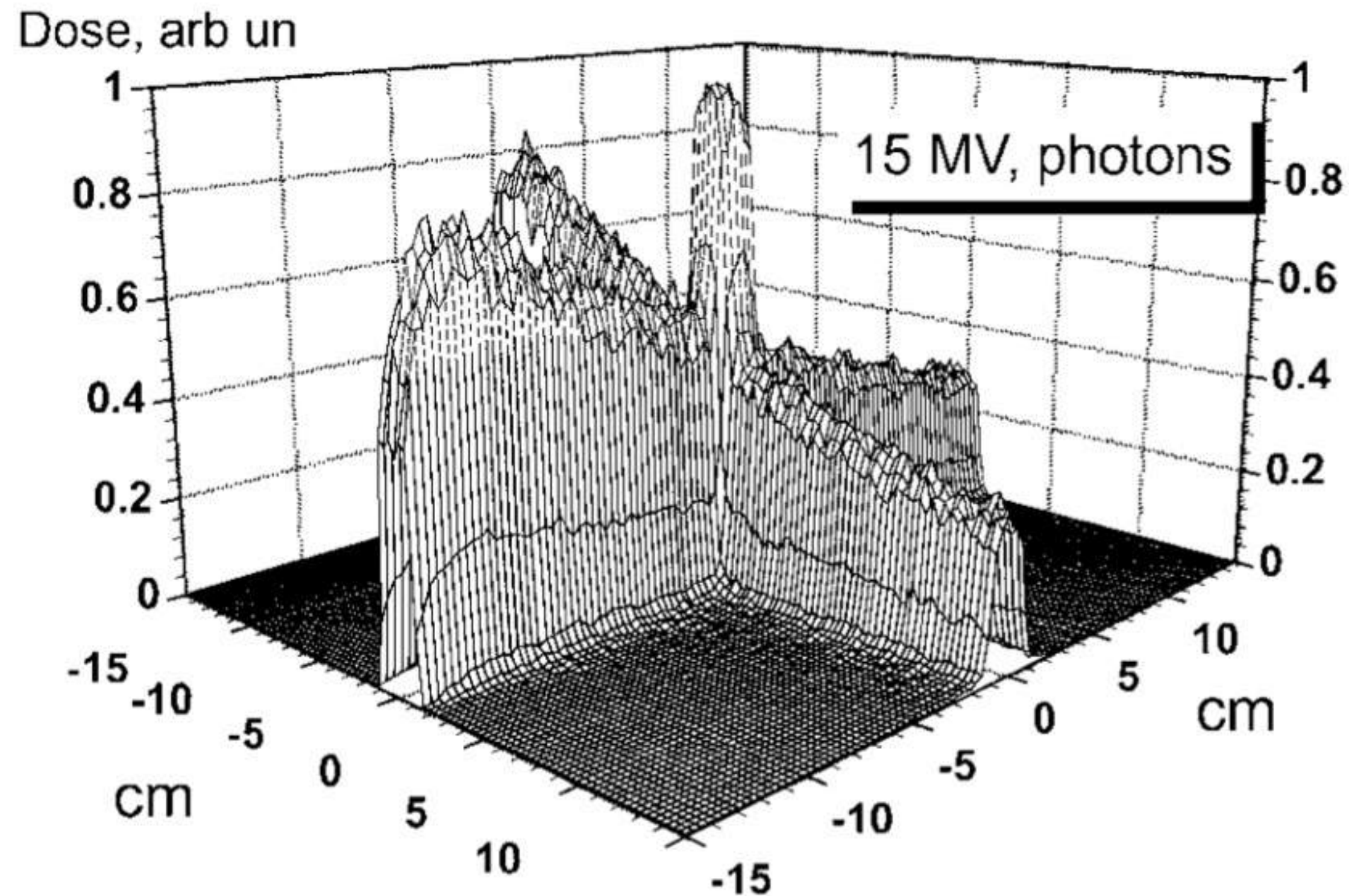
Conformal RT



Highly conformal RT



Improved *depth dose* of very high-energy electrons (VHEE) vs. photons Also less sensitive to electronic disequilibrium, sharper lateral penumbra



DesRosiers *Phys Med Biol* 2000

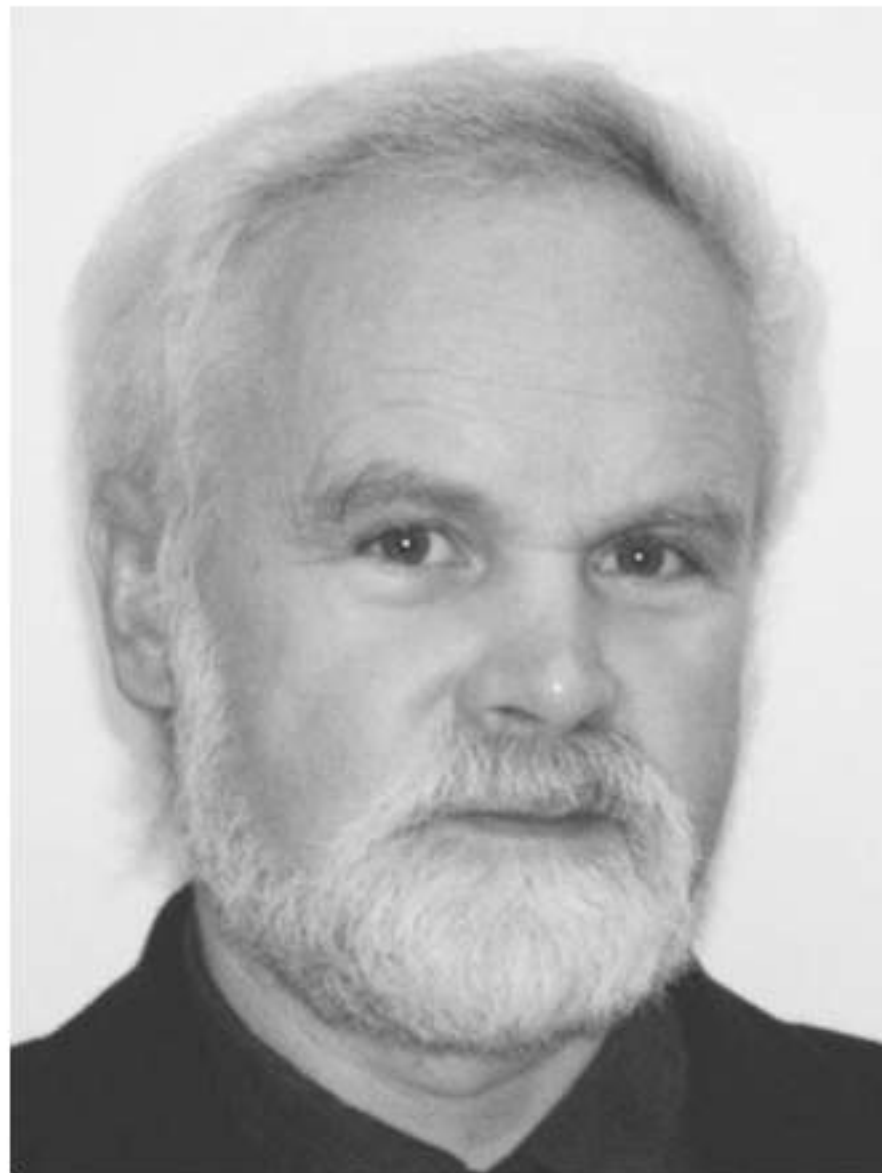


POINT/COUNTERPOINT

Suggestions for topics suitable for these Point/Counterpoint debates should be addressed to the Moderator: William R. Hendee, Medical College of Wisconsin, Milwaukee: whendee@mcw.edu. Persons participating in Point/Counterpoint discussions are selected for their knowledge and communicative skill. Their positions for or against a proposition may or may not reflect their personal opinions or the positions of their employers.

Very high energy electromagnetically-scanned electron beams are an attractive alternative to photon IMRT

Pro



Lech Papiez

*Indiana University, Radiation Oncology Department, Indianapolis, Indiana 46202
(Tel: 317/274-1188, E-mail: lpapiez@iupui.edu)*

Thomas Bortfeld

*Massachusetts General Hospital and Harvard Medical School, Department of Radiation Oncology, Boston, Massachusetts 02114
(Tel: 617/724-1180, E-mail: tbortfeld@partners.org)*

Papiez: “fast-scanning VHEEB allows realistic, efficient solutions to problems of 4D image guided radiotherapy”

Con



Papiez, Bortfeld Med Phys 2004

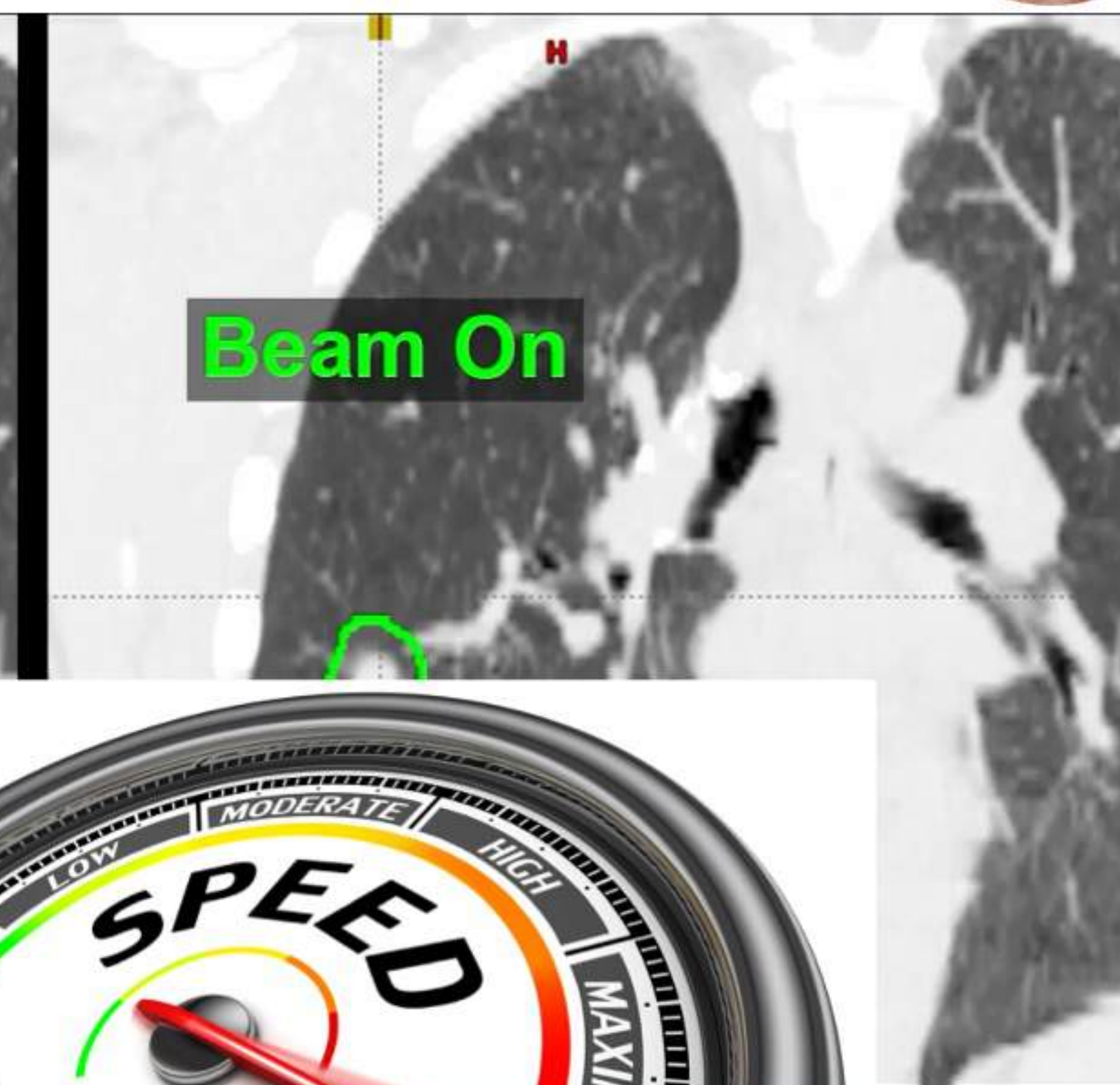
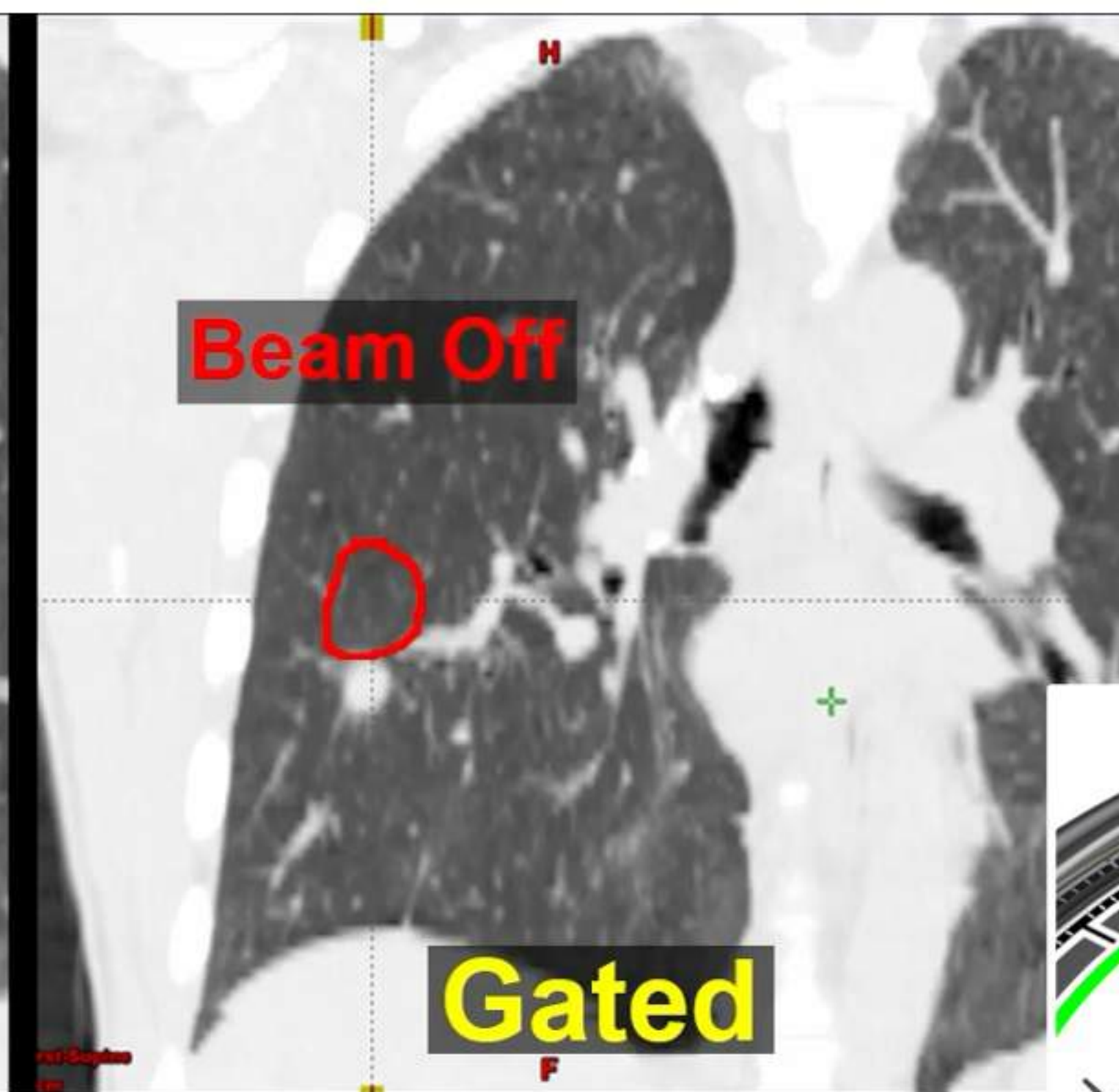
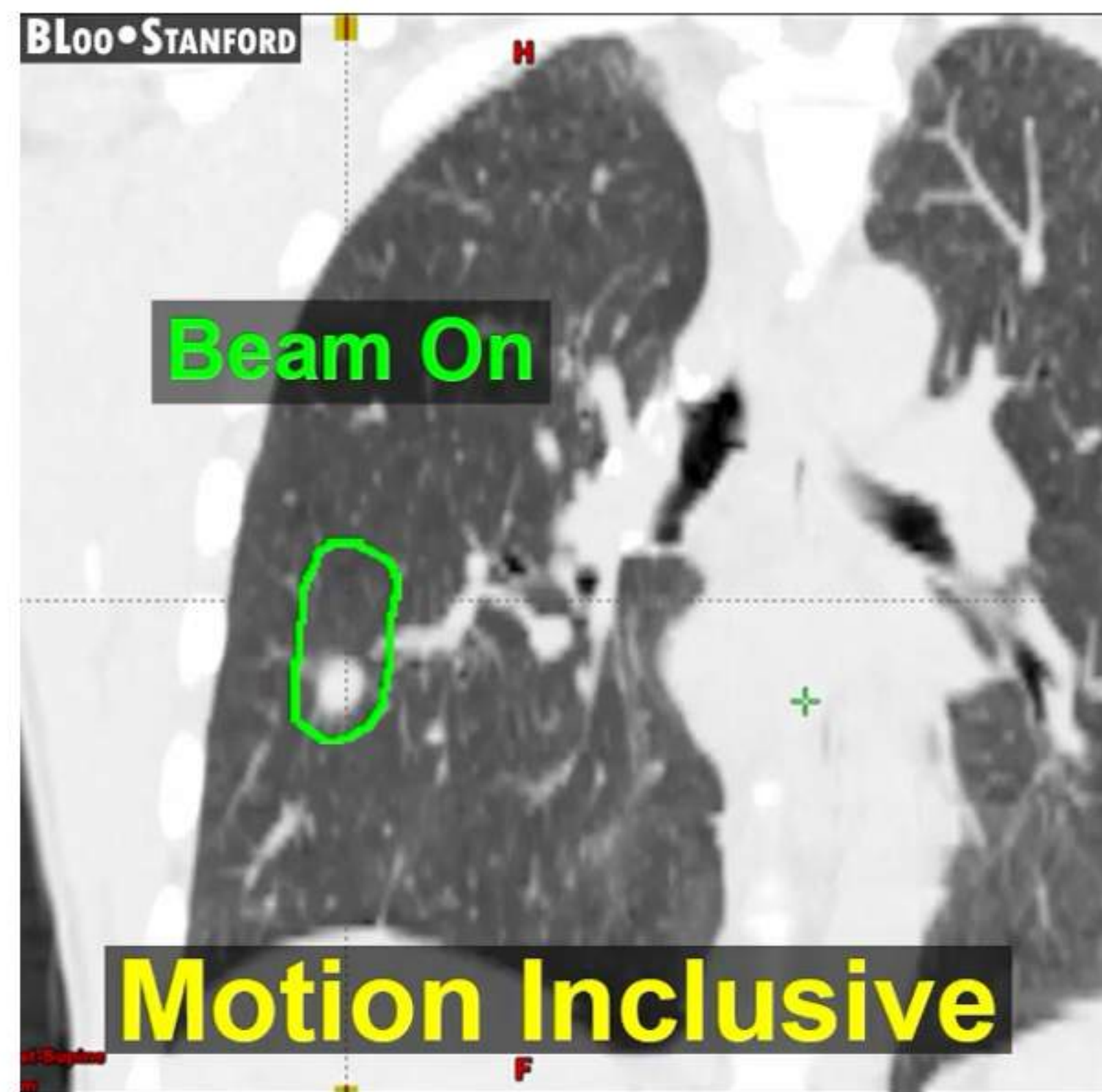
Precision – hitting moving targets



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“Motion management”

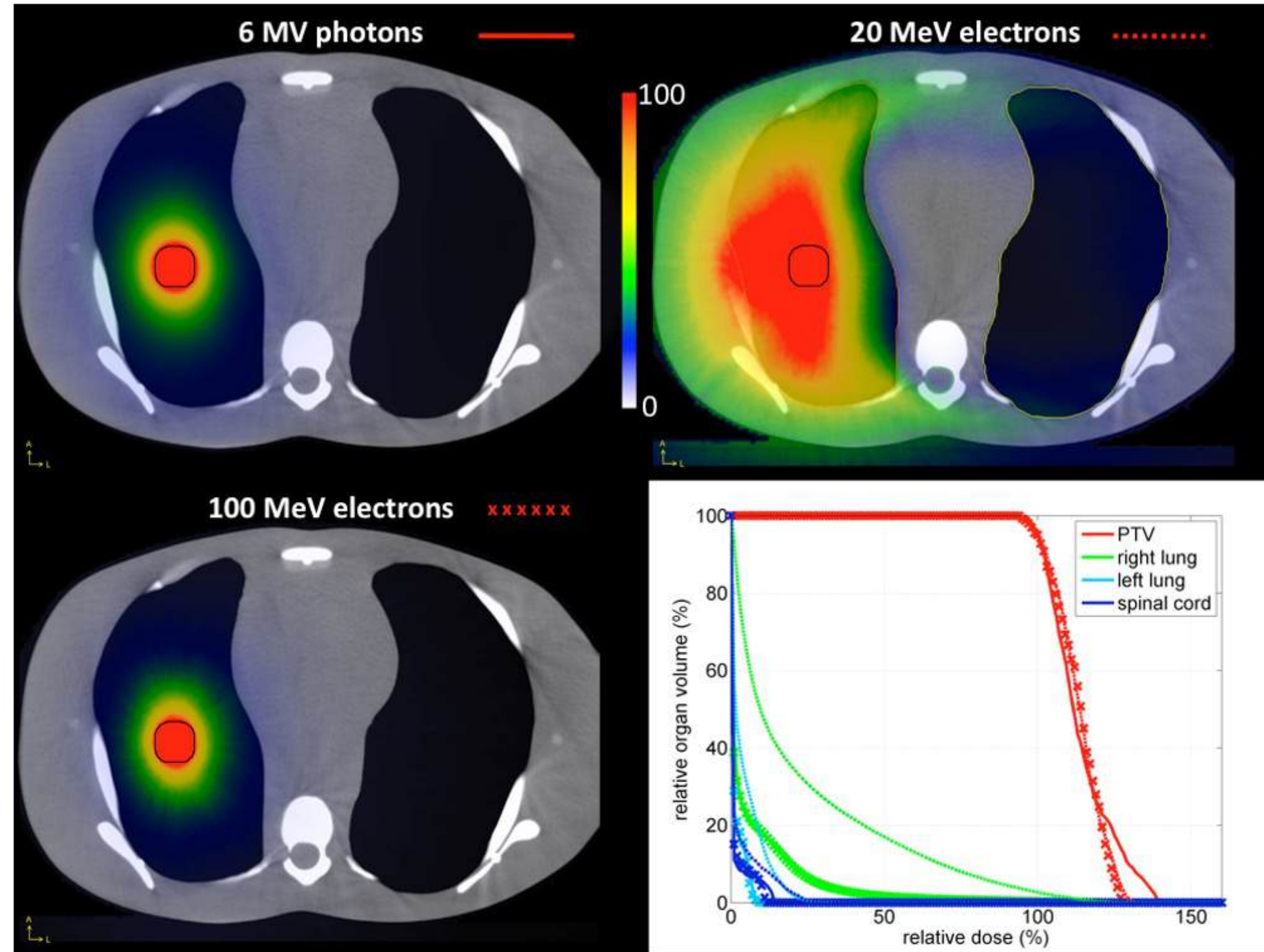


Need. For. Speed.
Instantaneous treatment to “freeze” motion

Preliminary VHEE simulations



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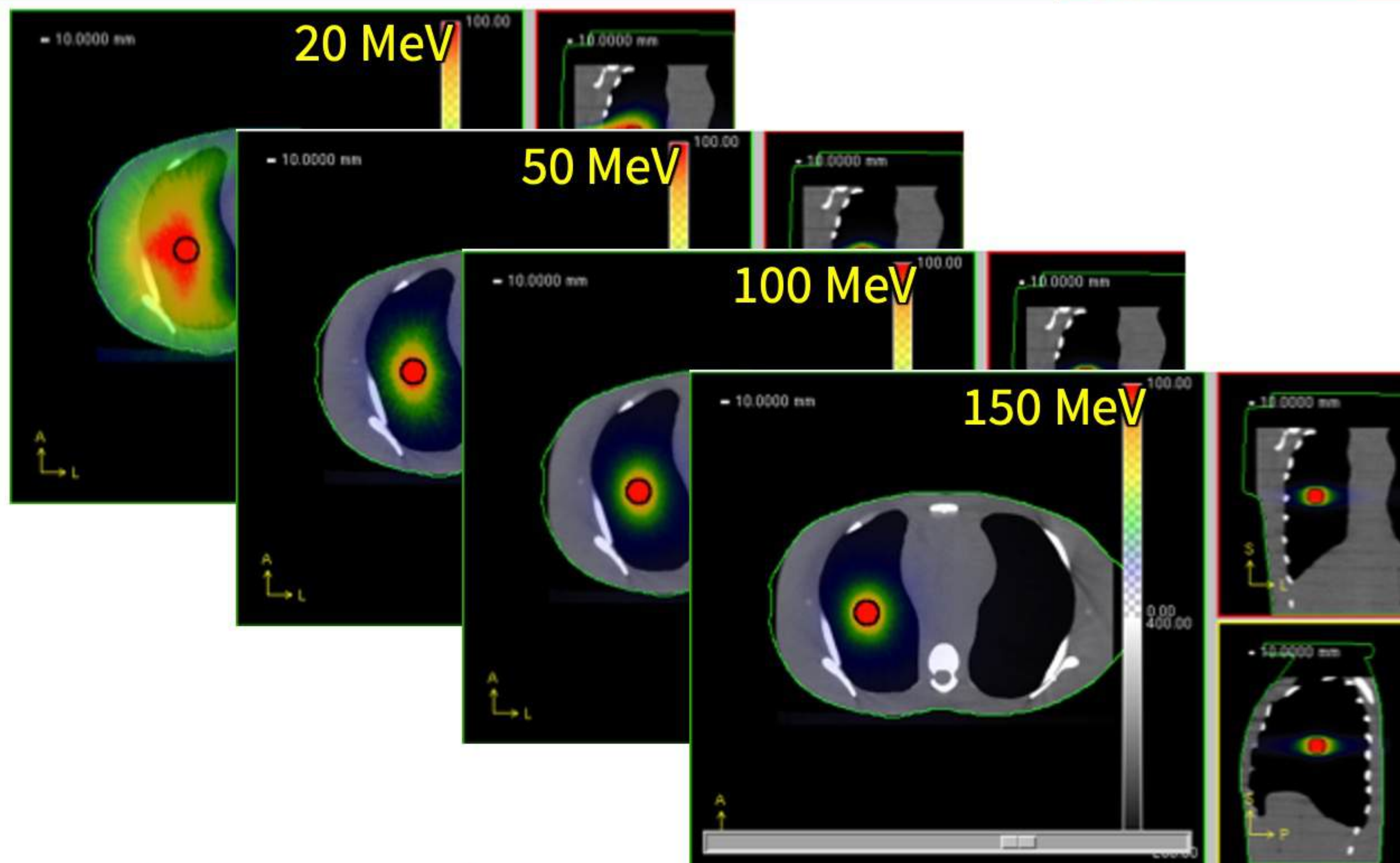


Coplanar arc of electron pencil beams in lung target
(Monte Carlo simulation)

Preliminary VHEE simulations



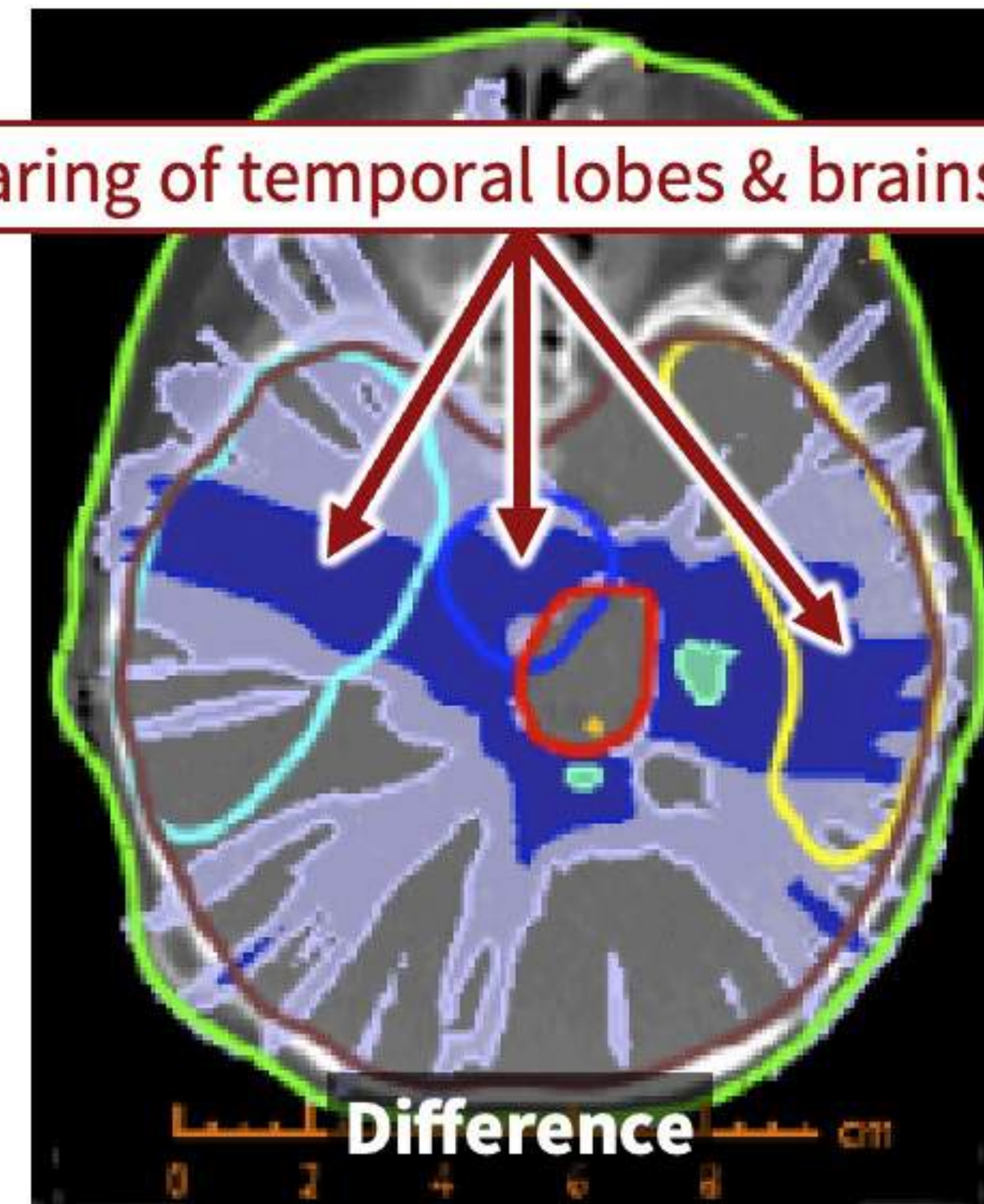
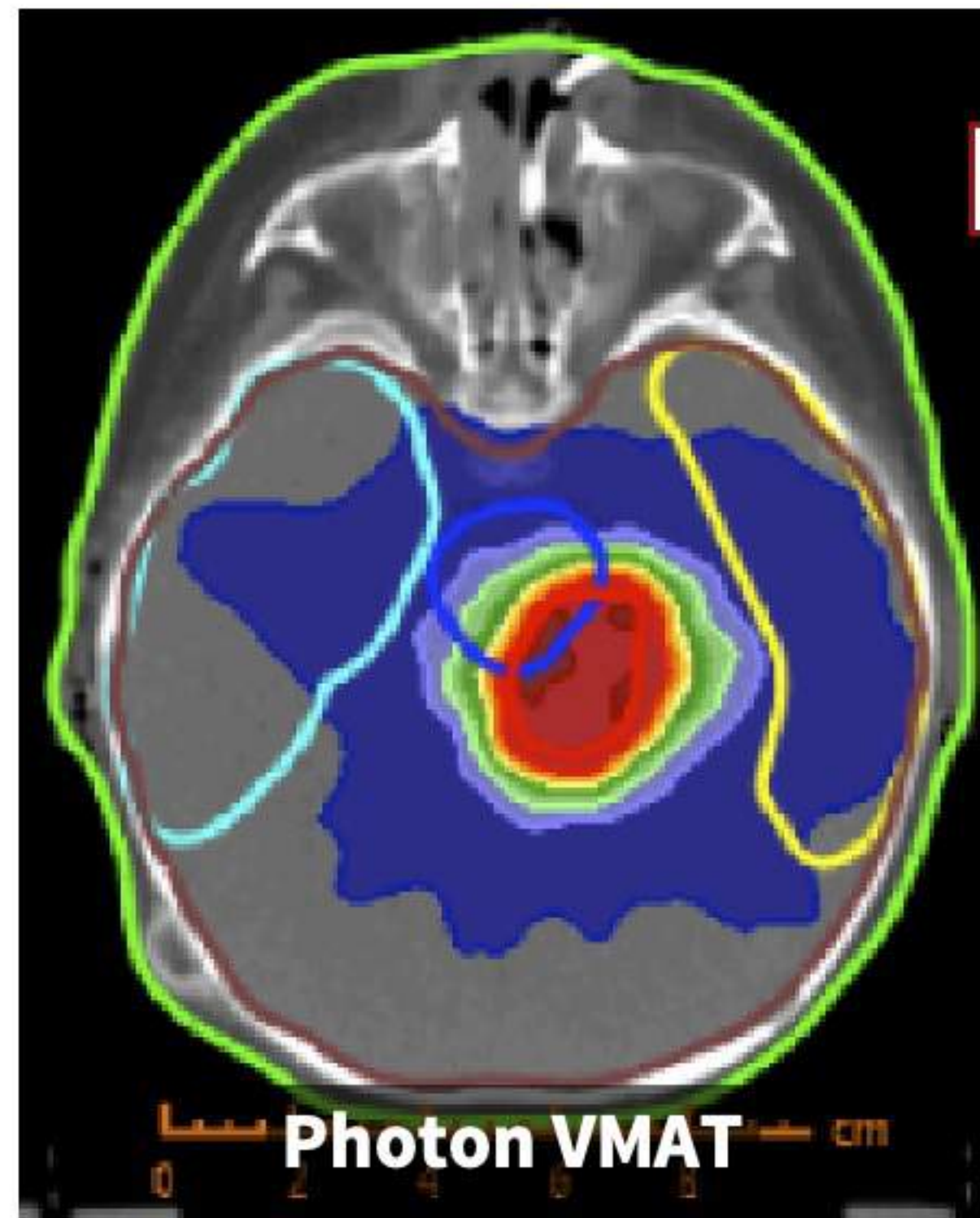
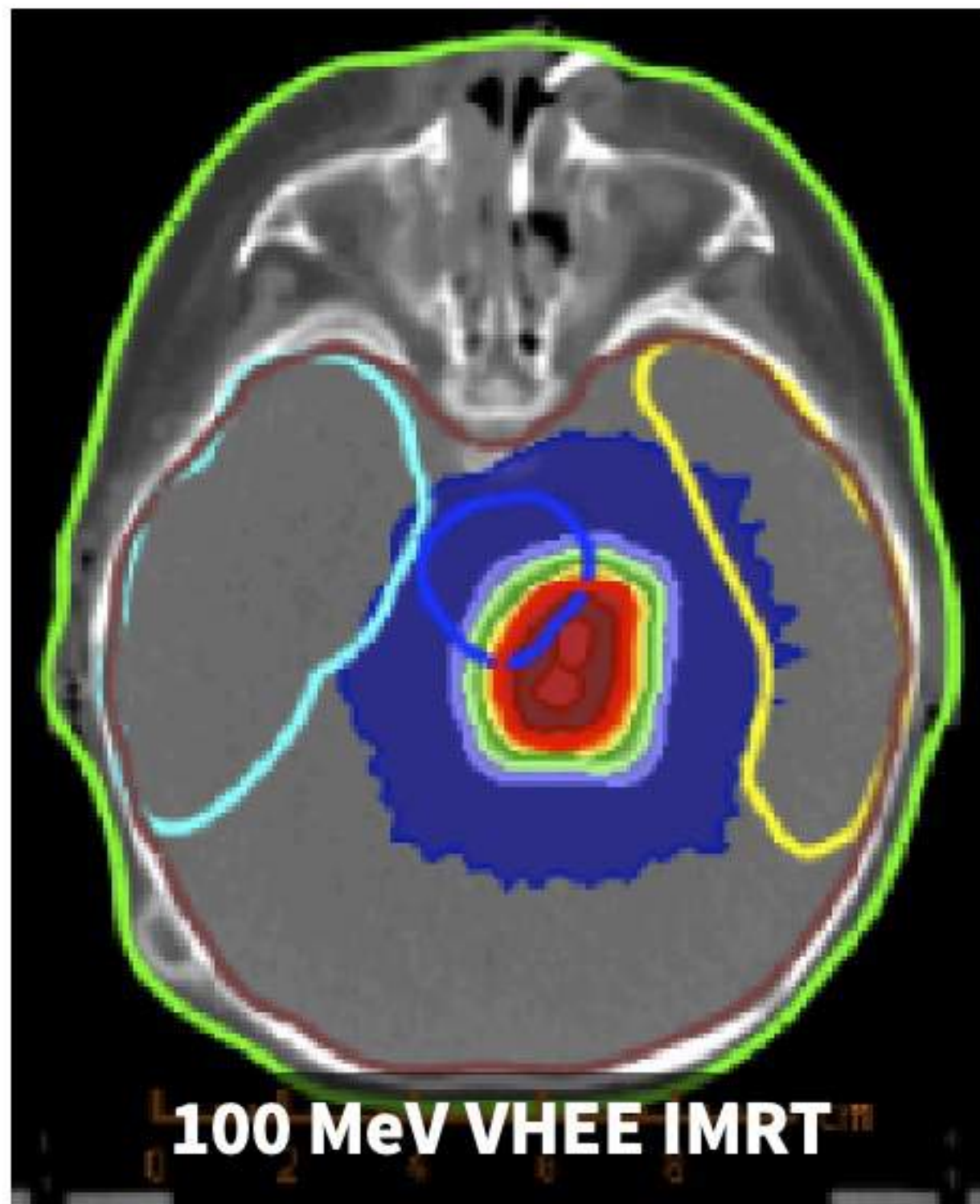
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Coplanar arc of electron pencil beams in lung target
(Monte Carlo simulation)



Superior dose distribution for VHEE: pediatric brain tumor



Sparing of temporal lobes & brainstem

Inverse planned VHEE IMRT achieves complex dose shaping and compact dose, intermediate between photon and proton therapy

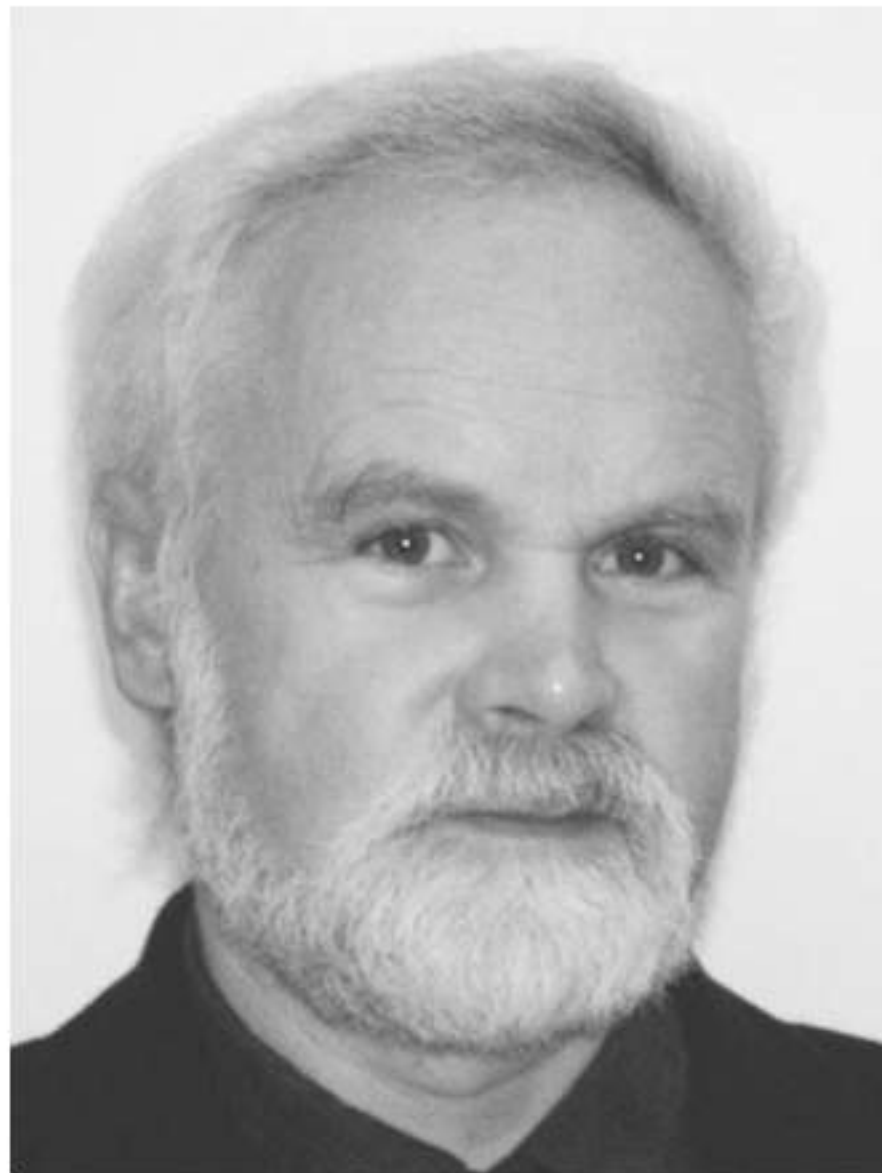
Bazalova-Carter *Med Phys* 2015



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Bortfeld: “The potential of scanned VHEE therapy to deliver dose nearly instantaneously (dose rates of Gy/s) to a treatment volume might be characterized with one word: **scary”**

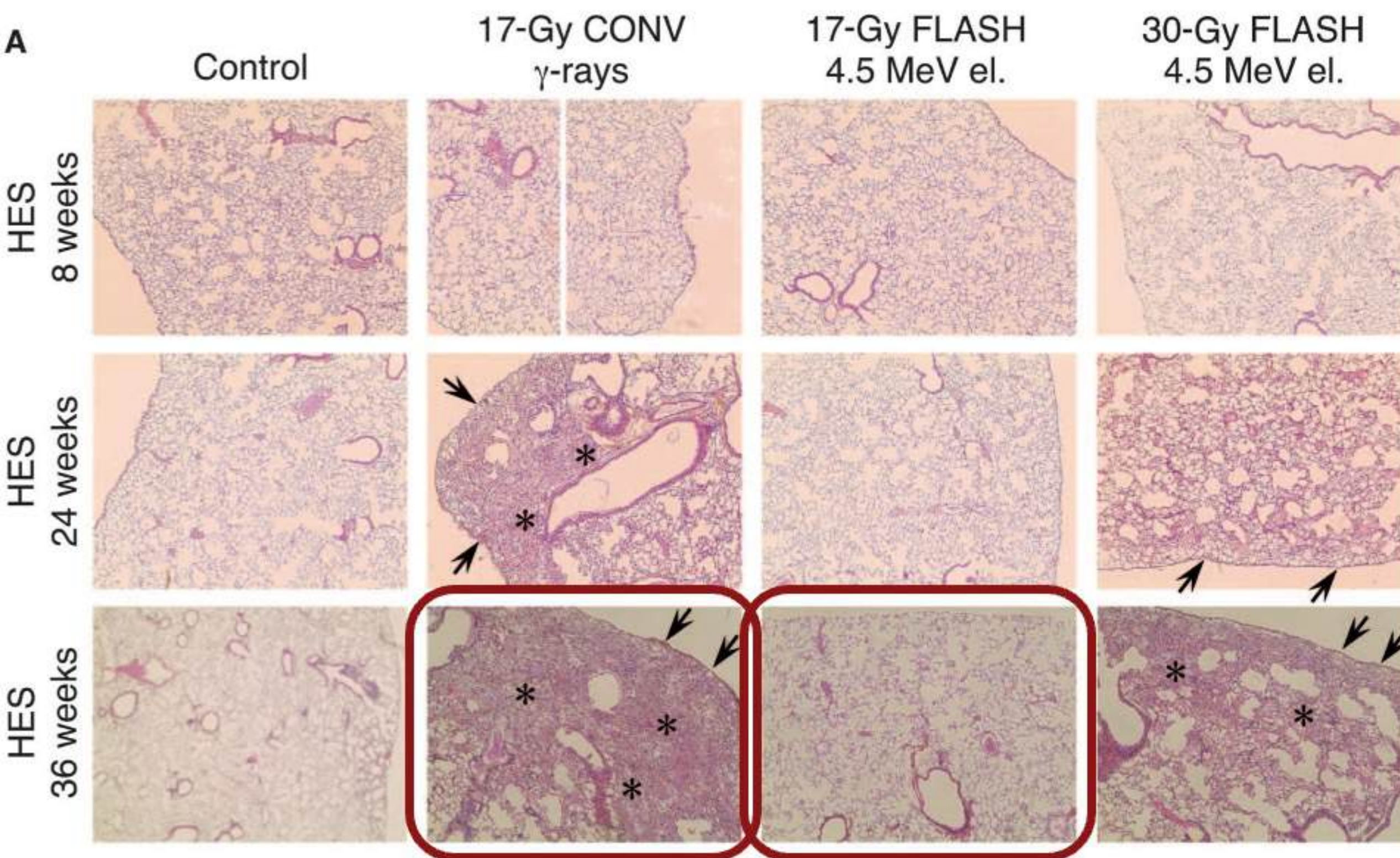
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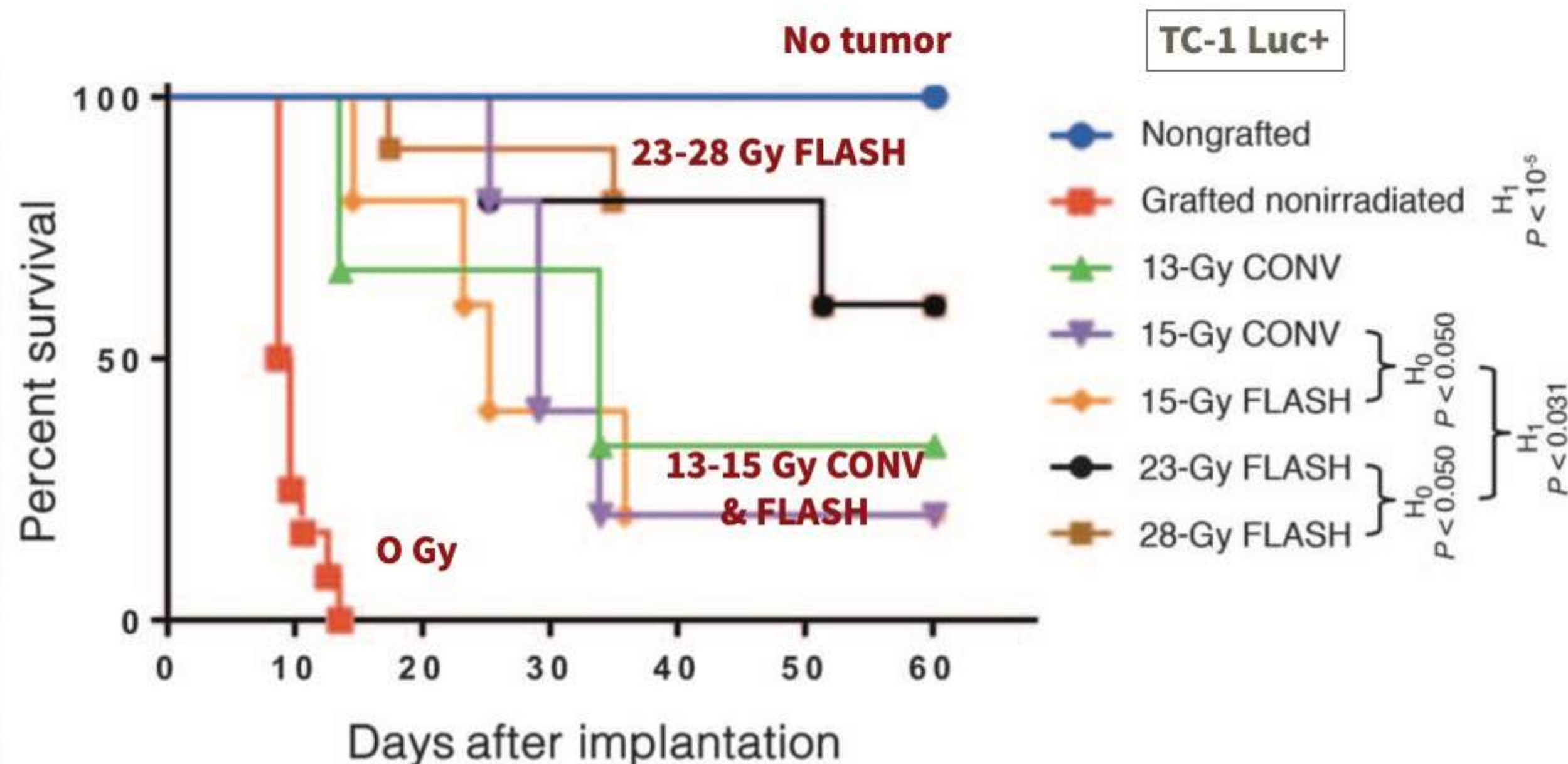
Papiez, Bortfeld Med Phys 2004



Normal organ sparing Lung



Tumor control Orthotopic lung tumors



Syngeneic tumors in C57BL/6J mice

Favaudon/Vozenin *Science Translat Med* 2014



The Need for Speed

Clinical electron FLASH has begun



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First in human case



Day 0

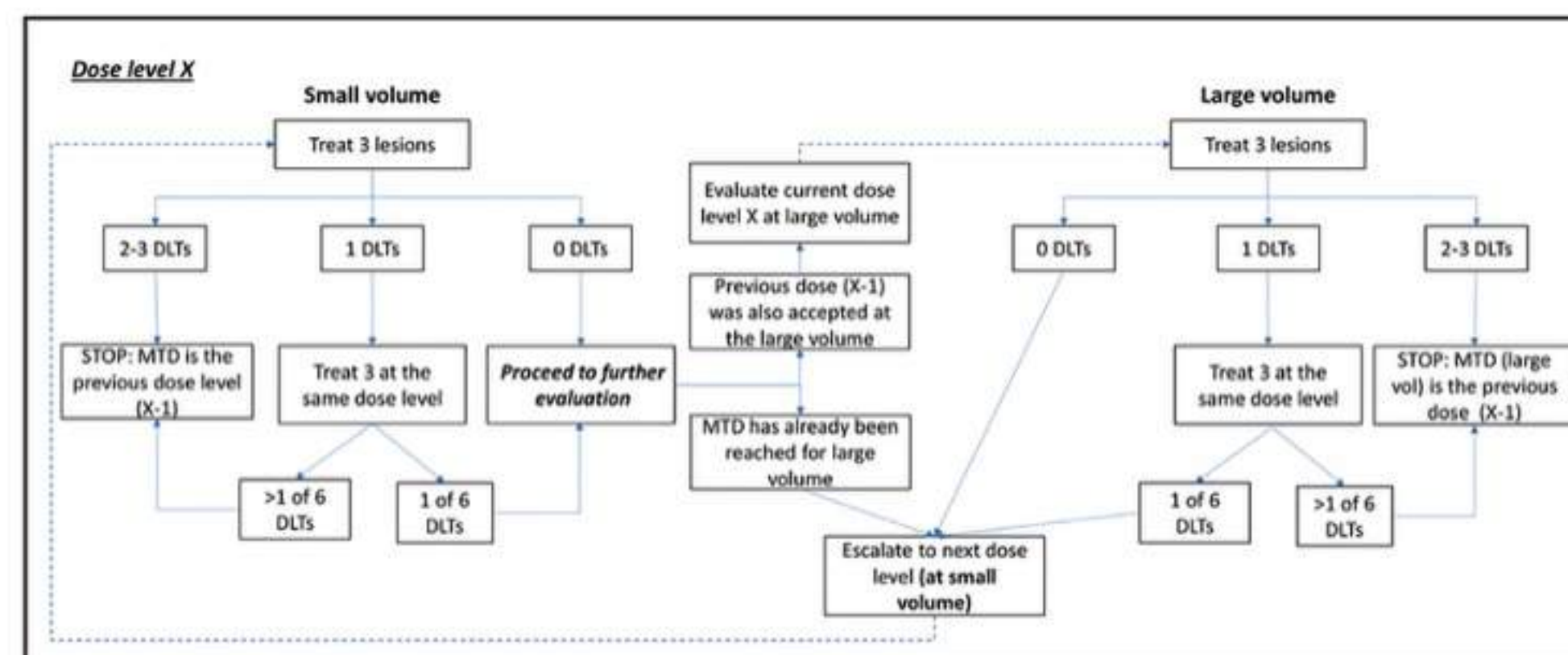


5 months



Bourhis Radiother Oncol 2019

**CHUV Impulse phase I
melanoma electron trial**

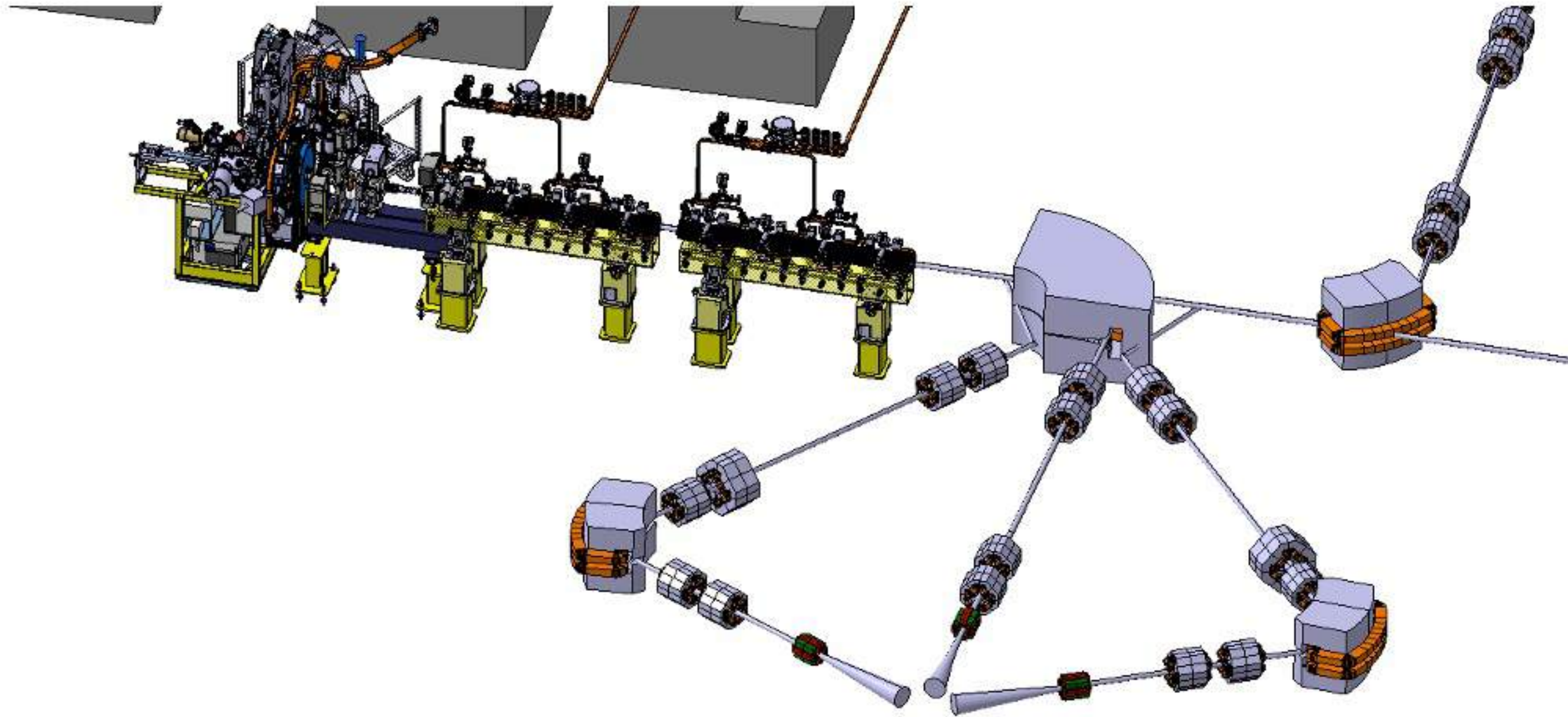


Wu, No Appl Radiat Oncol 2021

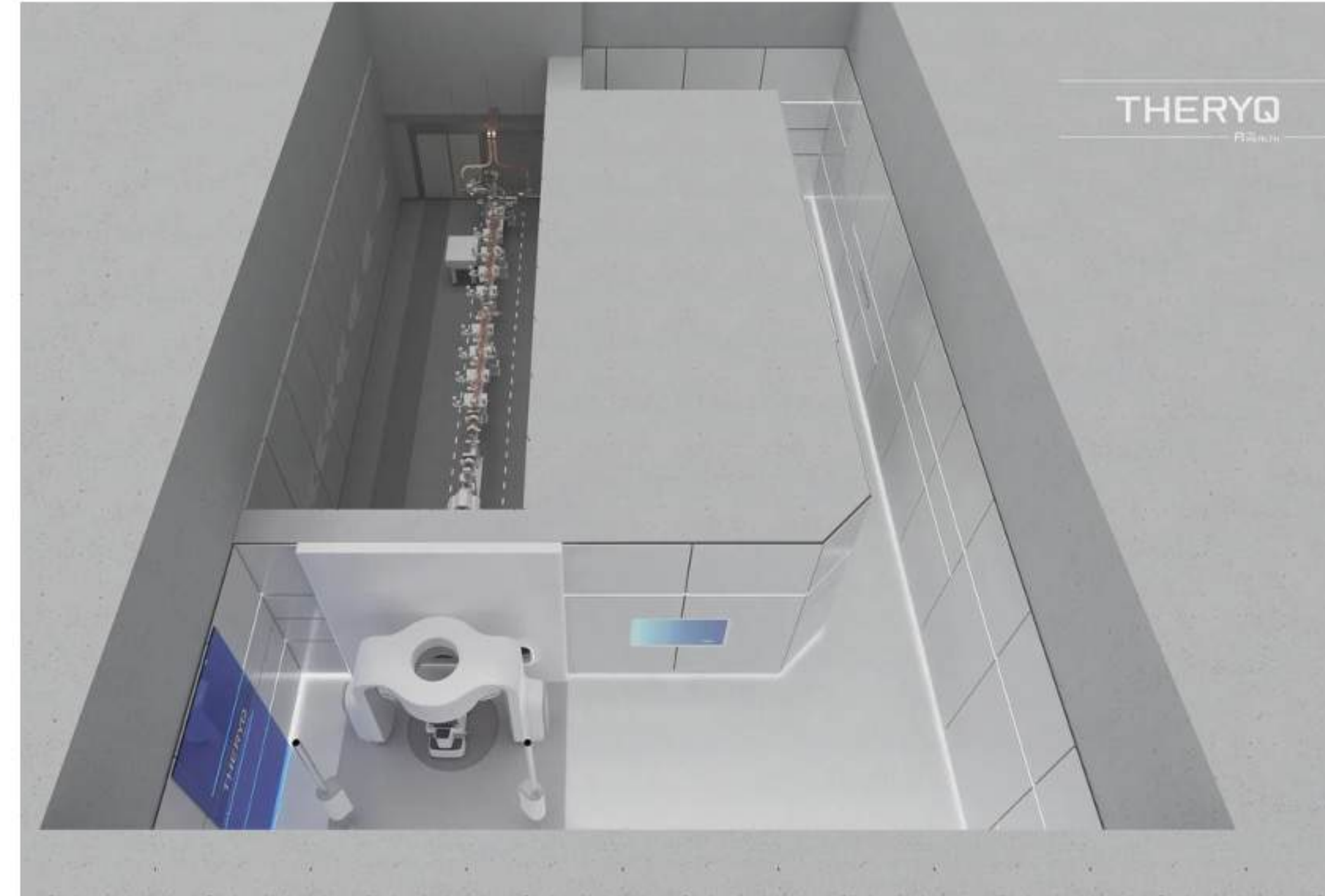
CERN-CHUV VHEE FLASH project

DEFT (Deep Electrons FLASH Therapy) :

VHEE (140 MeV) FLASH therapy facility for large deep seated tumors



Status : construction is ongoing



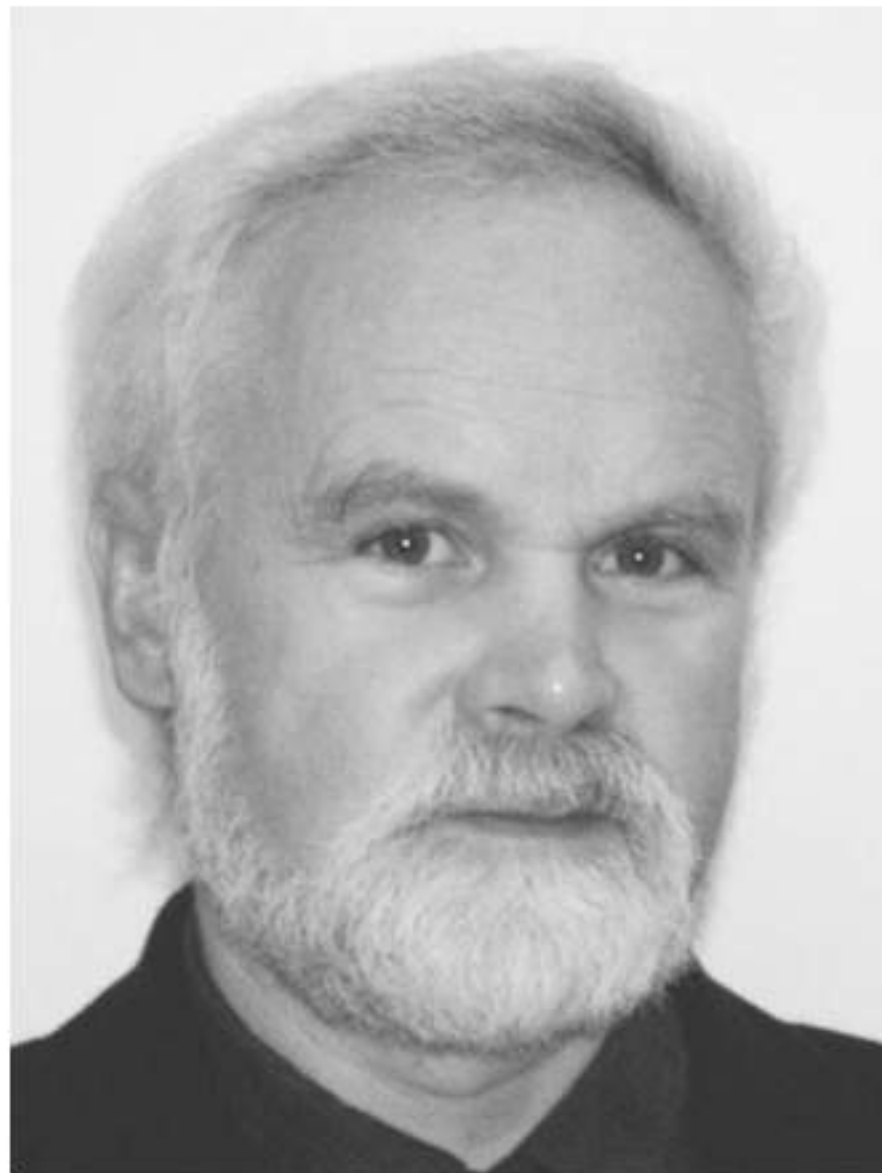


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Bortfeld: “One thing that is clear about VHEE is that a clinical treatment machine for 250 MeV electrons would be relatively **bulky and expensive... It seems to me that VHEE stands primarily for **Very Highly Expensive Electrons**”**

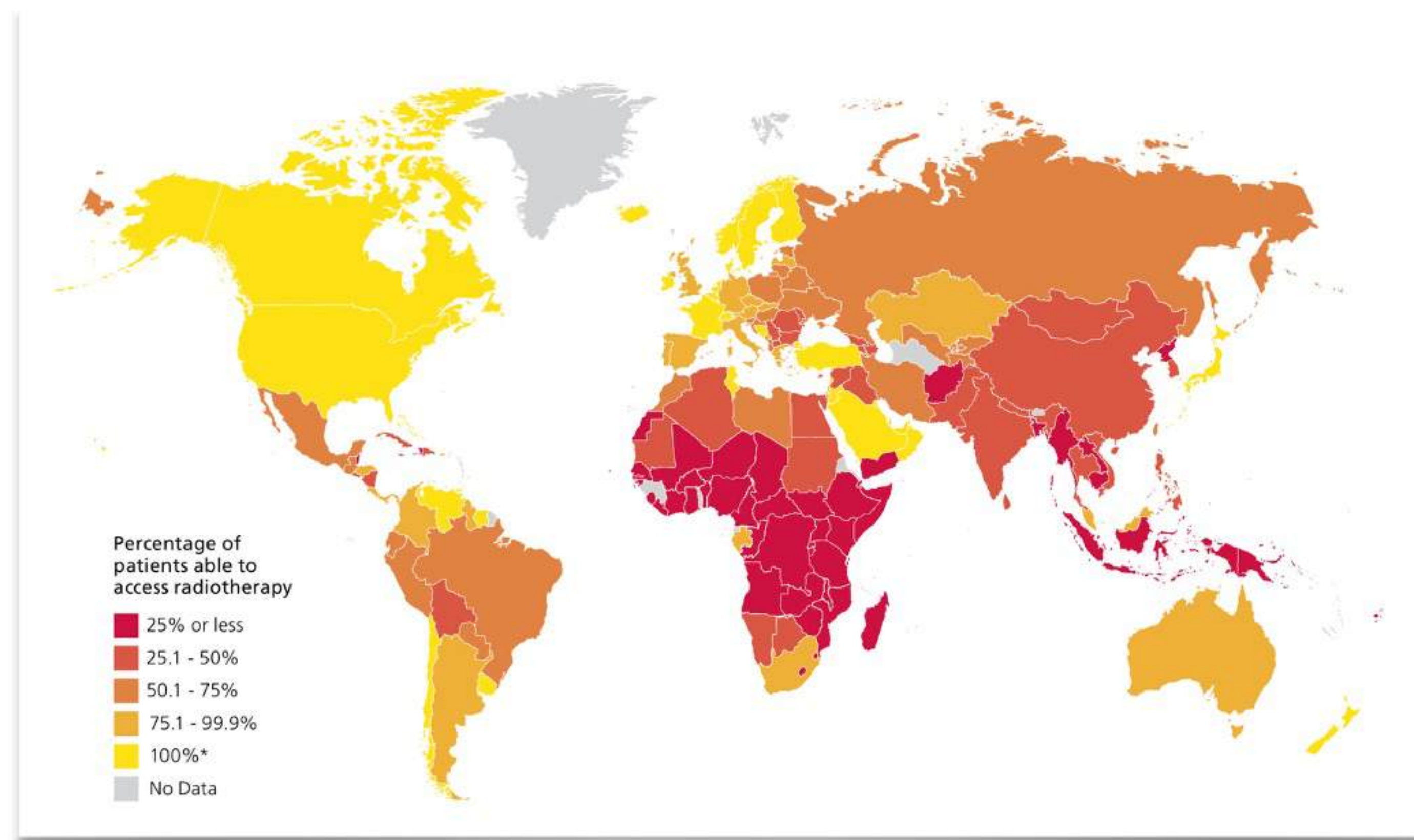
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Papiez, Bortfeld Med Phys 2004



! *Only half of patients worldwide who could benefit from RT have any access*

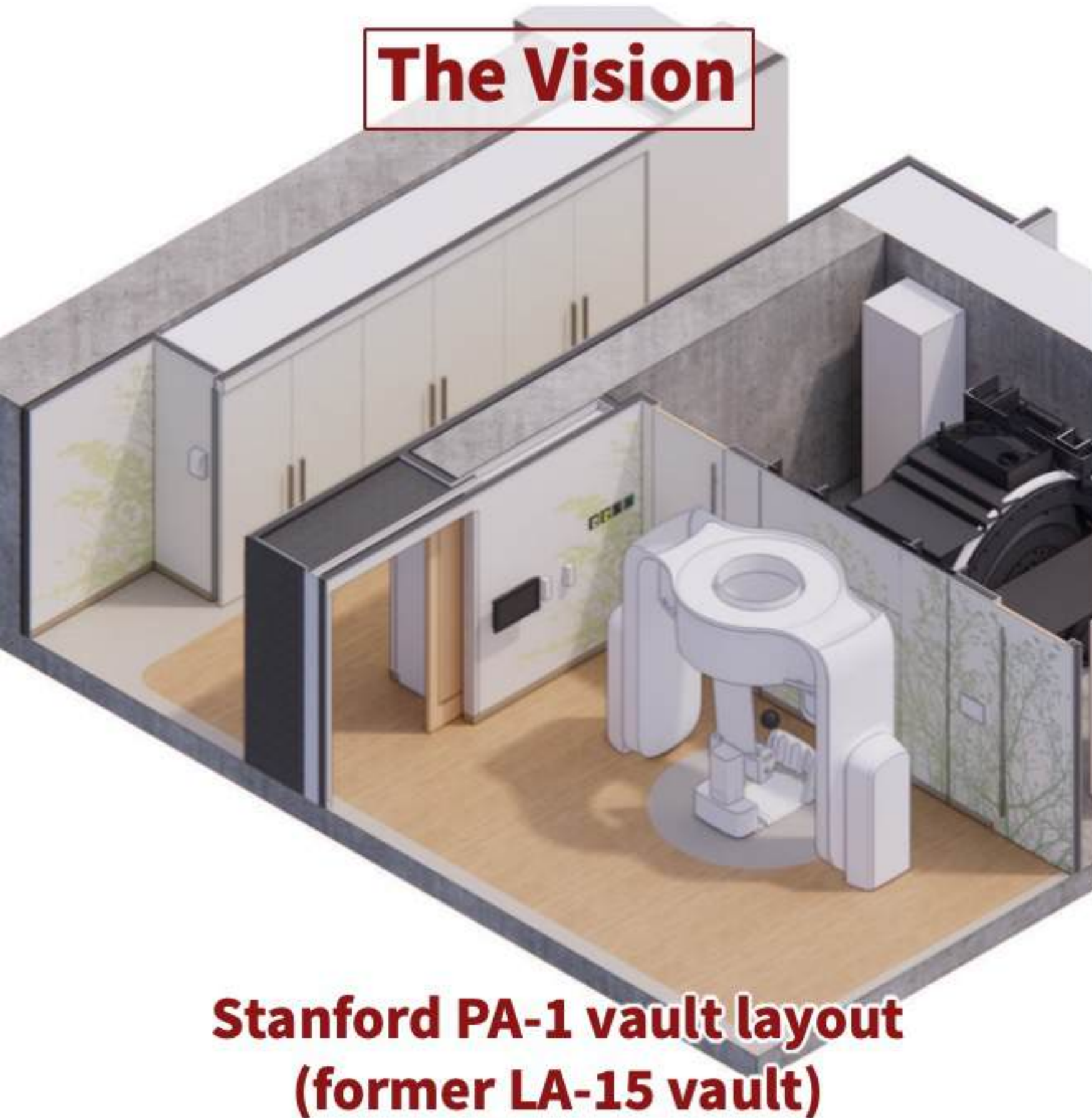


Millions who should be able to receive curative therapy can only get palliative treatment

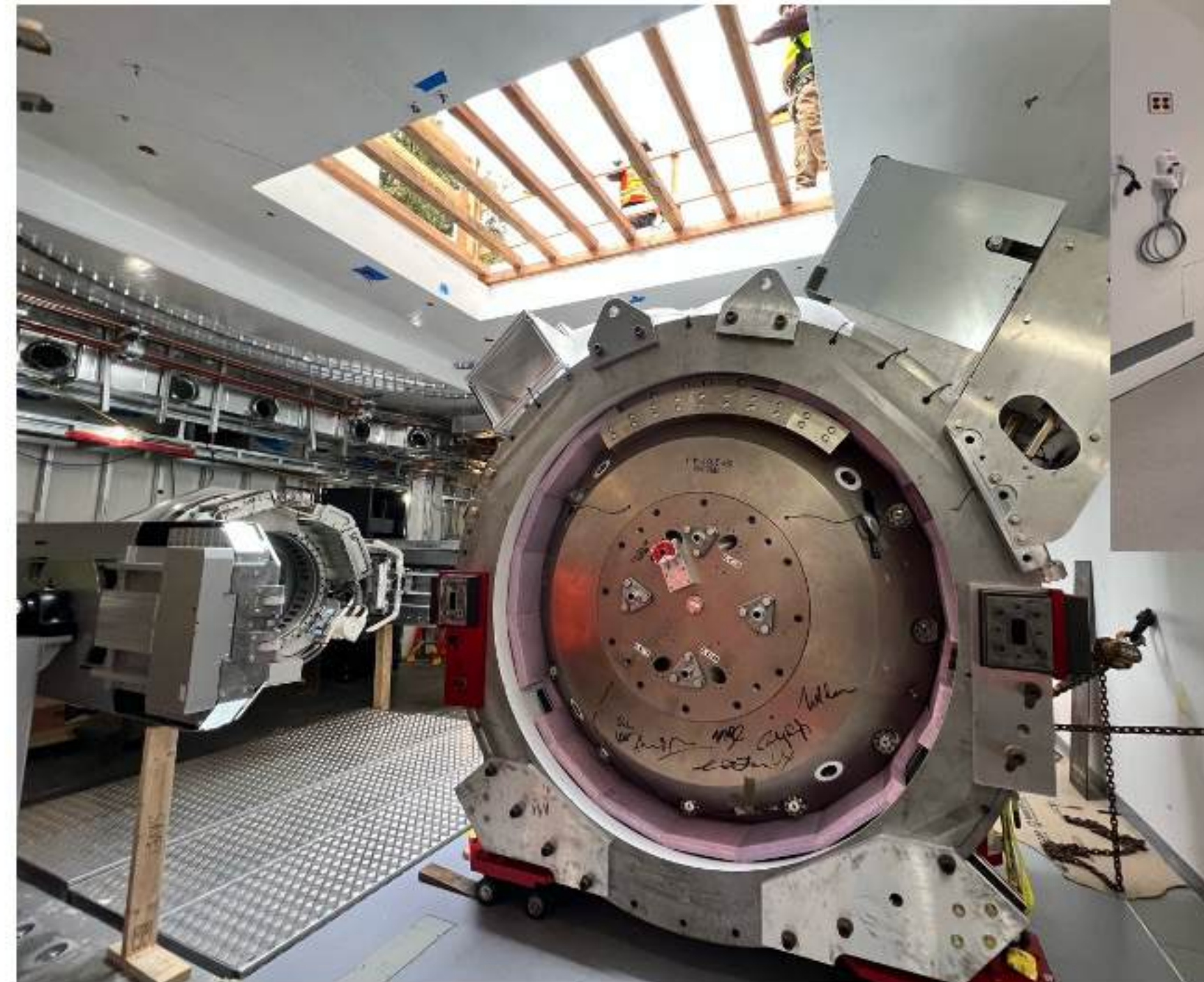
Ultra-compact proton therapy

Advanced proton therapy in a standard radiotherapy vault

The Vision



Realized



Mevion S250-FIT delivered to Stanford
1/19/2025



Installation nearly complete

Treatments to start December 2025

Key to linac performance: efficiency



- RF power (from klystron/magnetron) is used to:
 - Establish accelerating gradient (lost as waste heat)
 - Impart energy to electrons in beam
 - Conventional linacs: RF to beam efficiency <20%
- Discovery:
 - Pulsed heating from RF induced surface magnetic fields is major source of energy loss
 - New class of linac with accelerating cells optimized to minimize surface magnetic fields is far more efficient: RF to beam efficiency >80%
- Greater “RF budget” can be used for any combination of:
 - Higher beam current
 - Higher beam energy
 - Higher gradient (more compact structure)

New class of linear accelerator

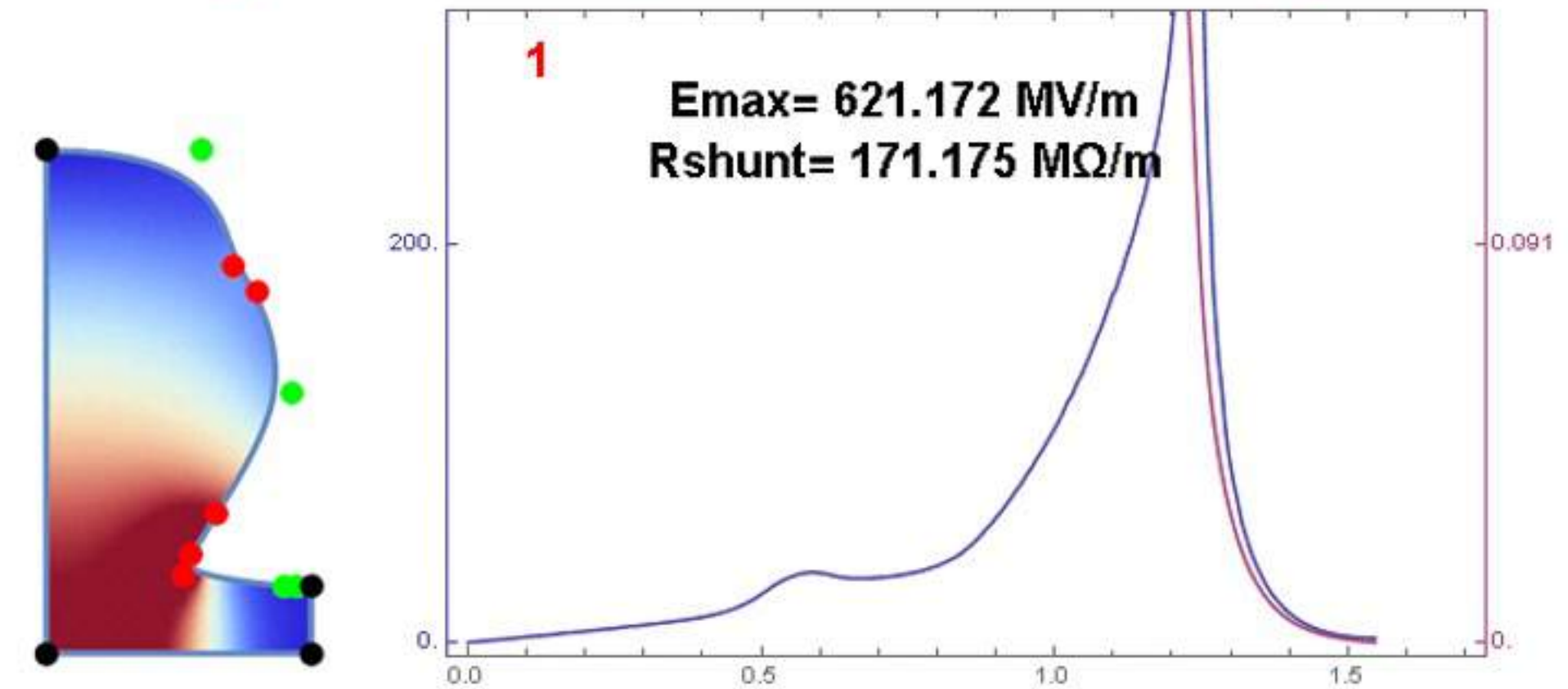


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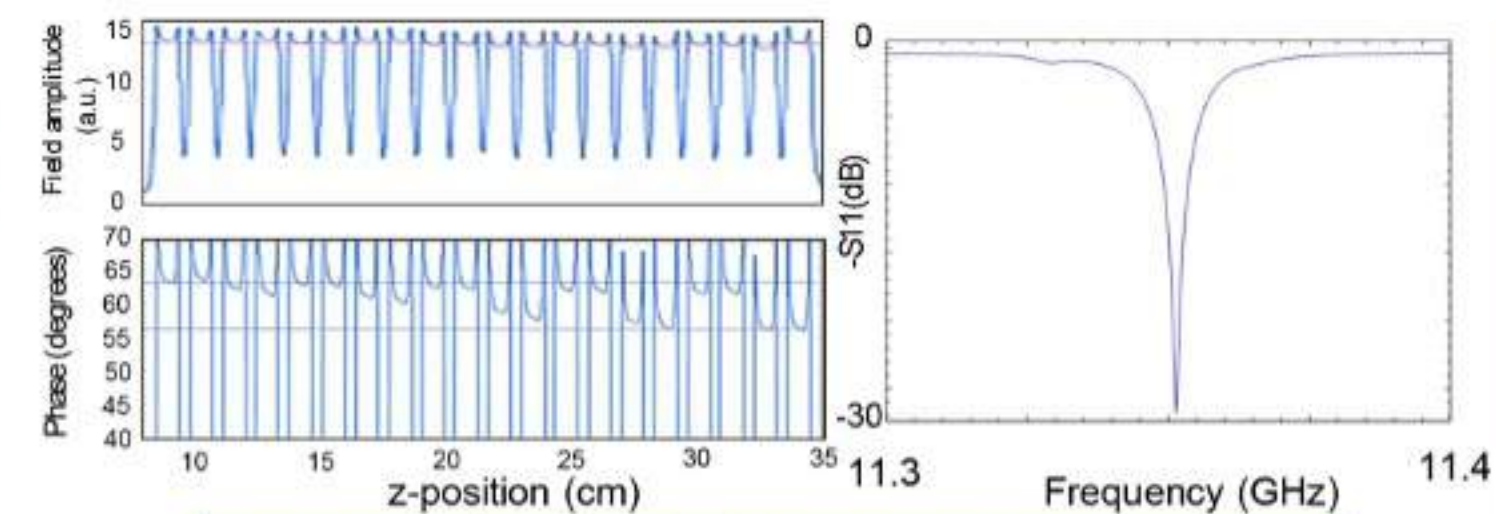
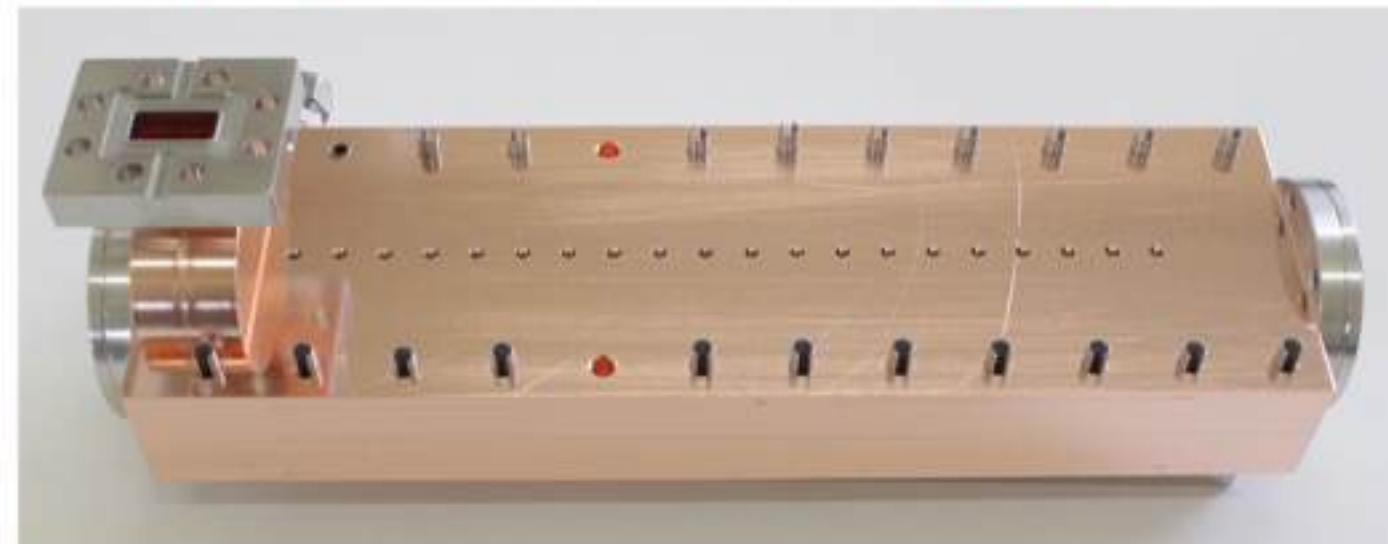
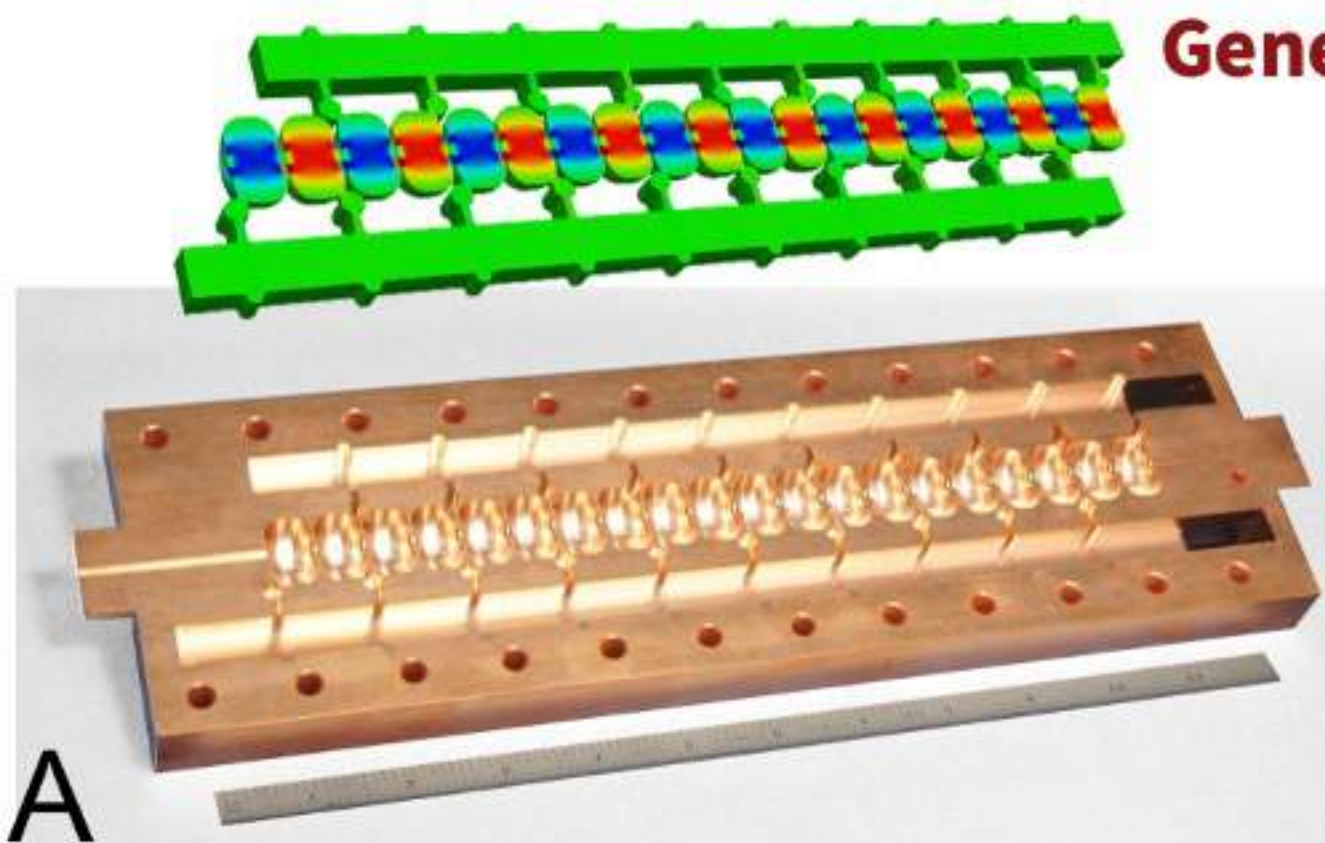
Conventional linear accelerator design



Optimized cell design: minimize peak electric and magnetic surface fields



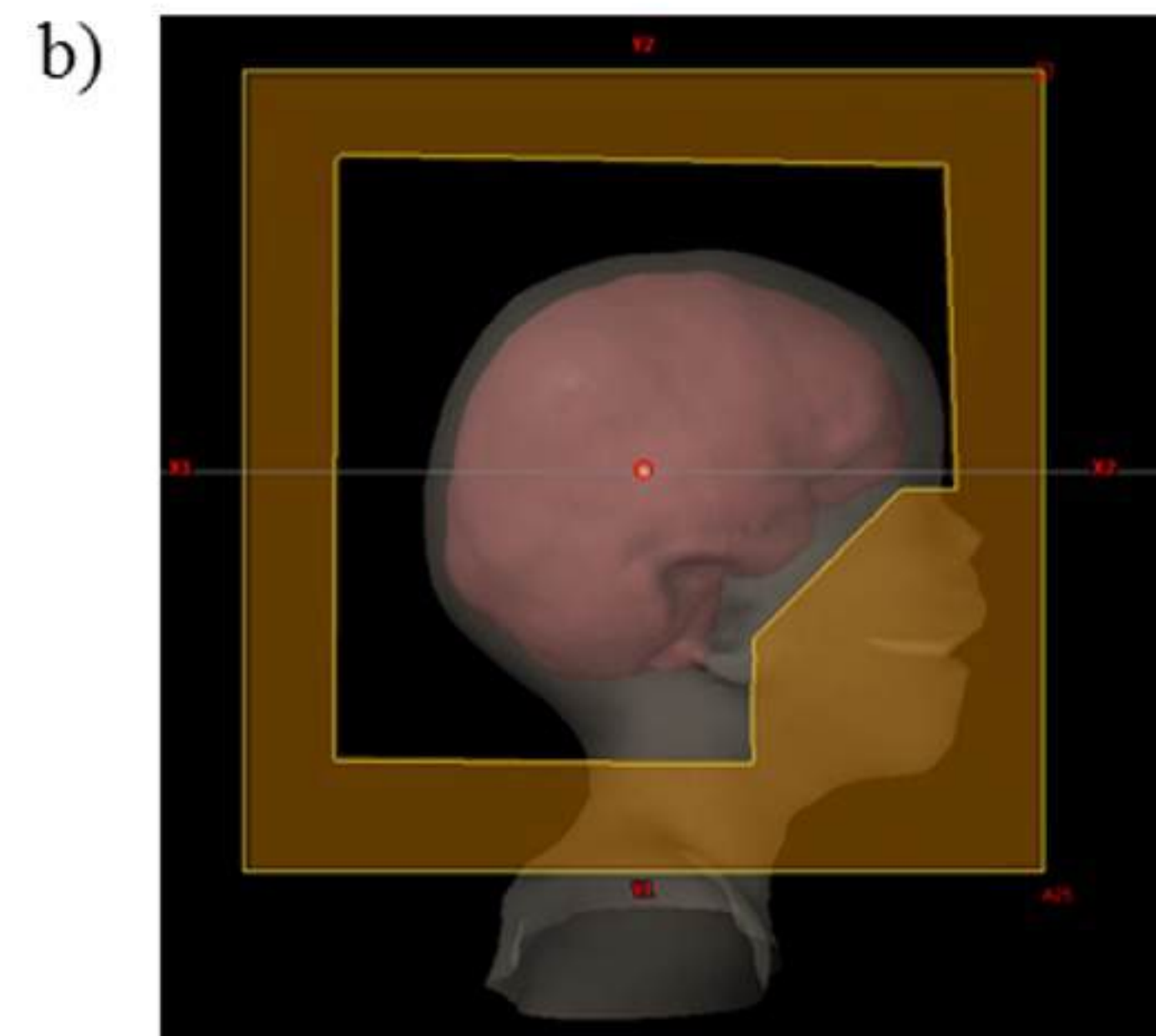
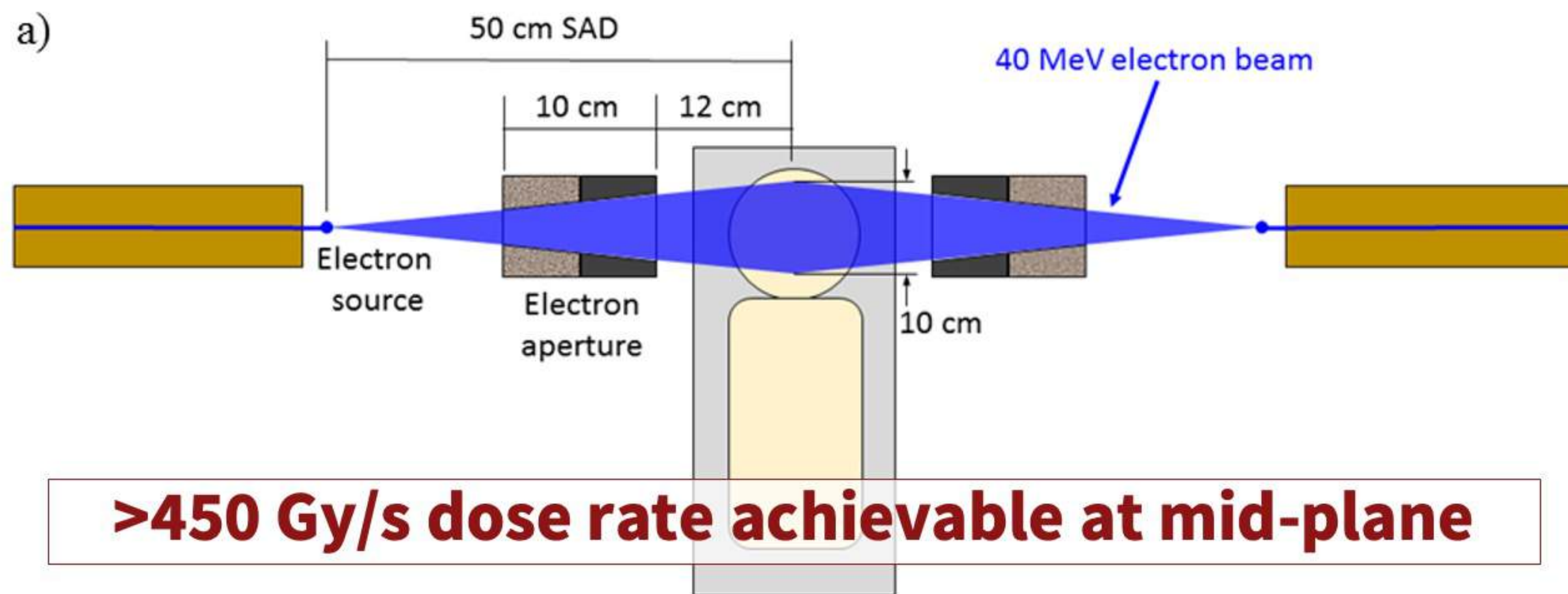
Distributed RF-coupling Architecture with Genetically Optimized cell design (DRAGON)



Maxim, Tantawi, Loo *Radiother Oncol* 2019; Tantawi *Phys Rev Accel Beams* 2020



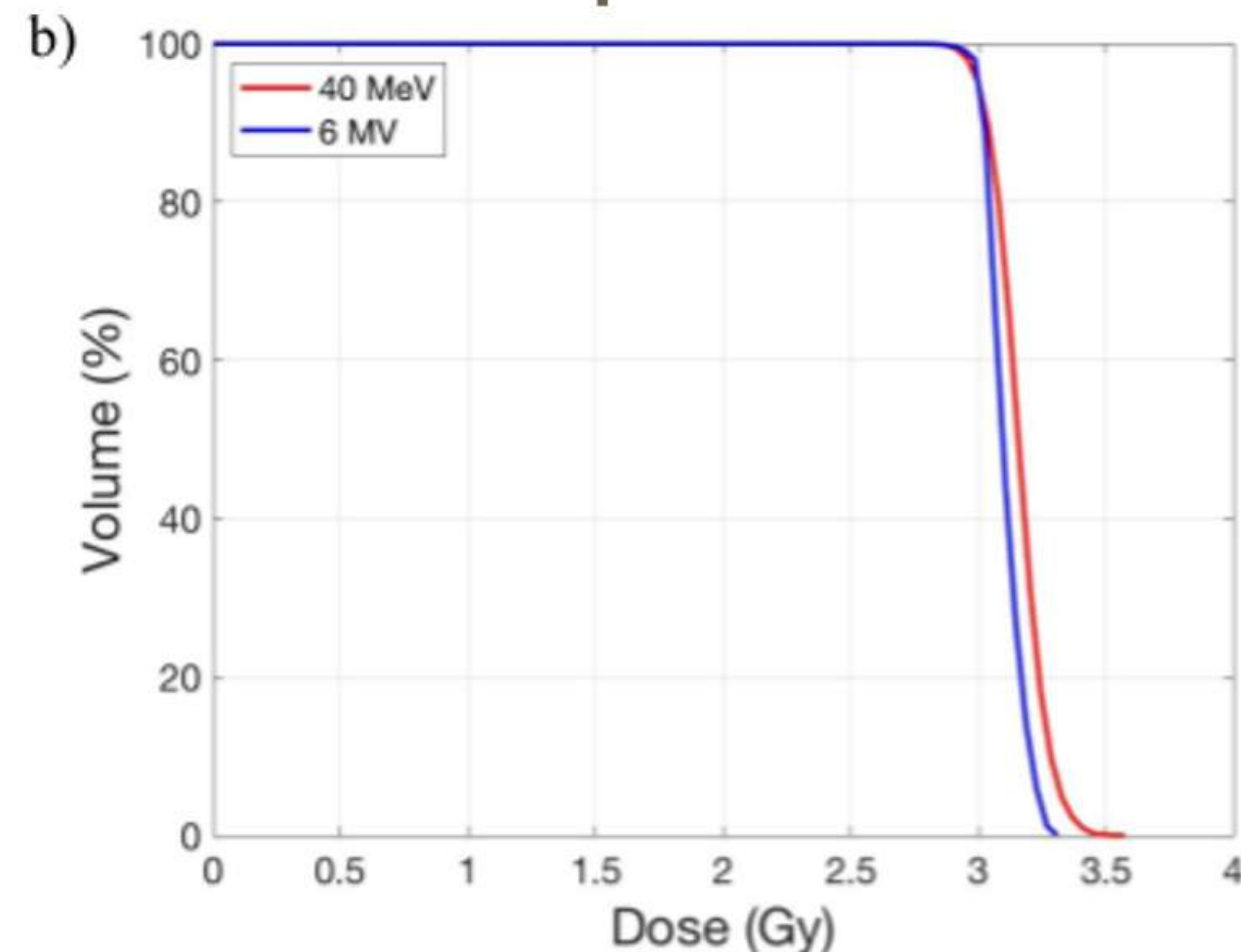
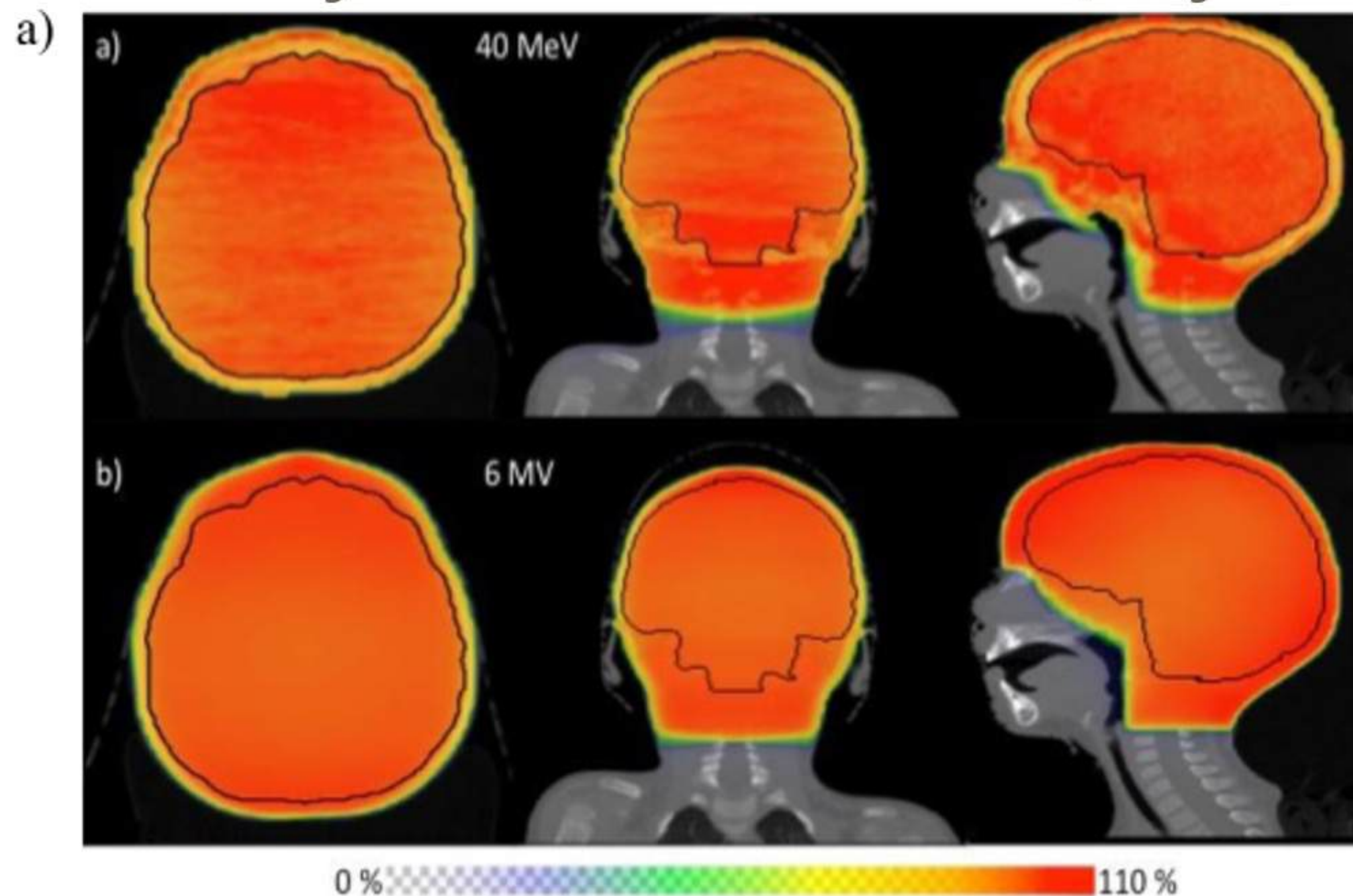
Feasibility of available linac/klystron for FLASH pediatric WBRT



Breitkreutz *Rad Res* 2020



Feasibility of available linac/klystron for FLASH pediatric WBRT

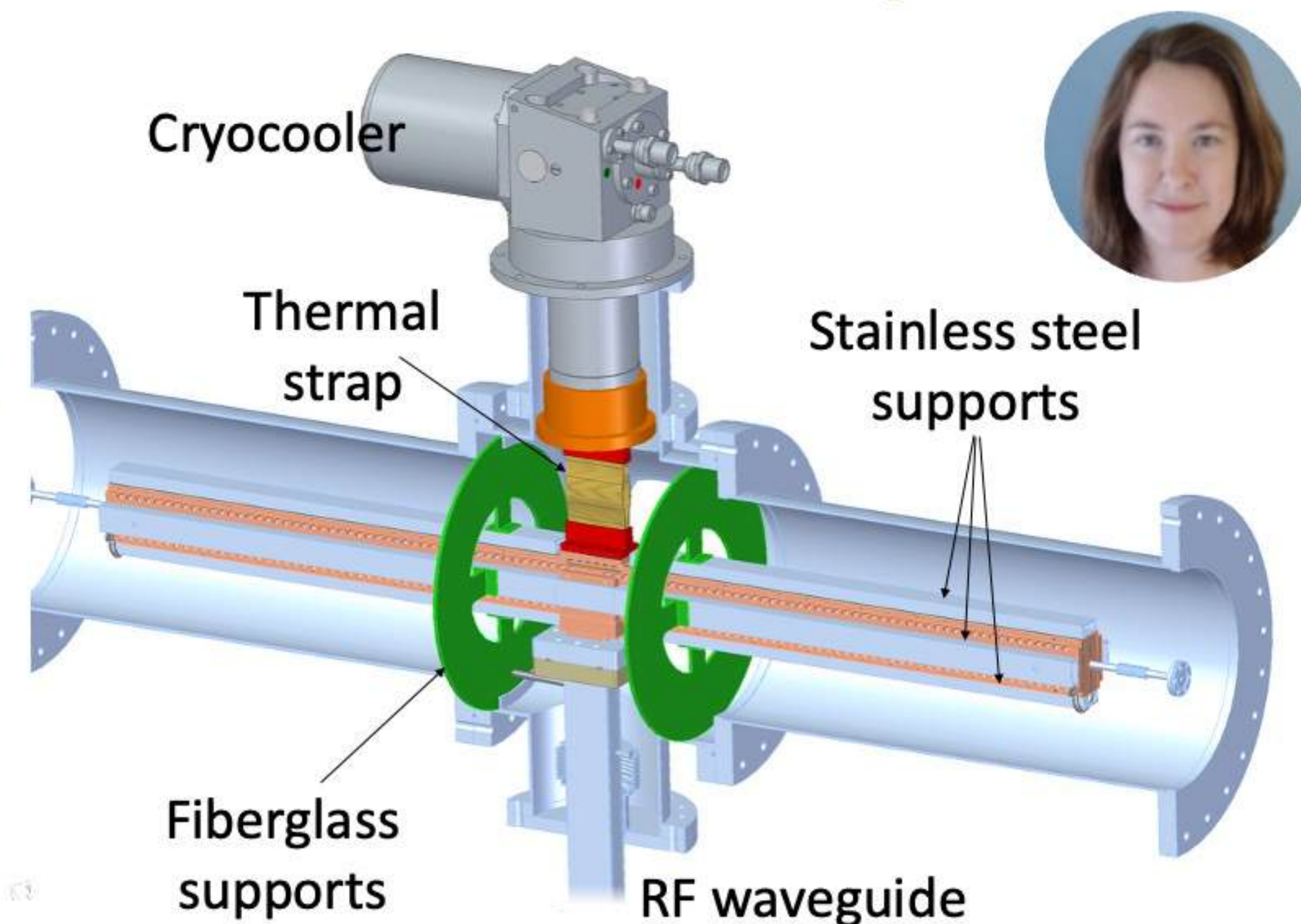
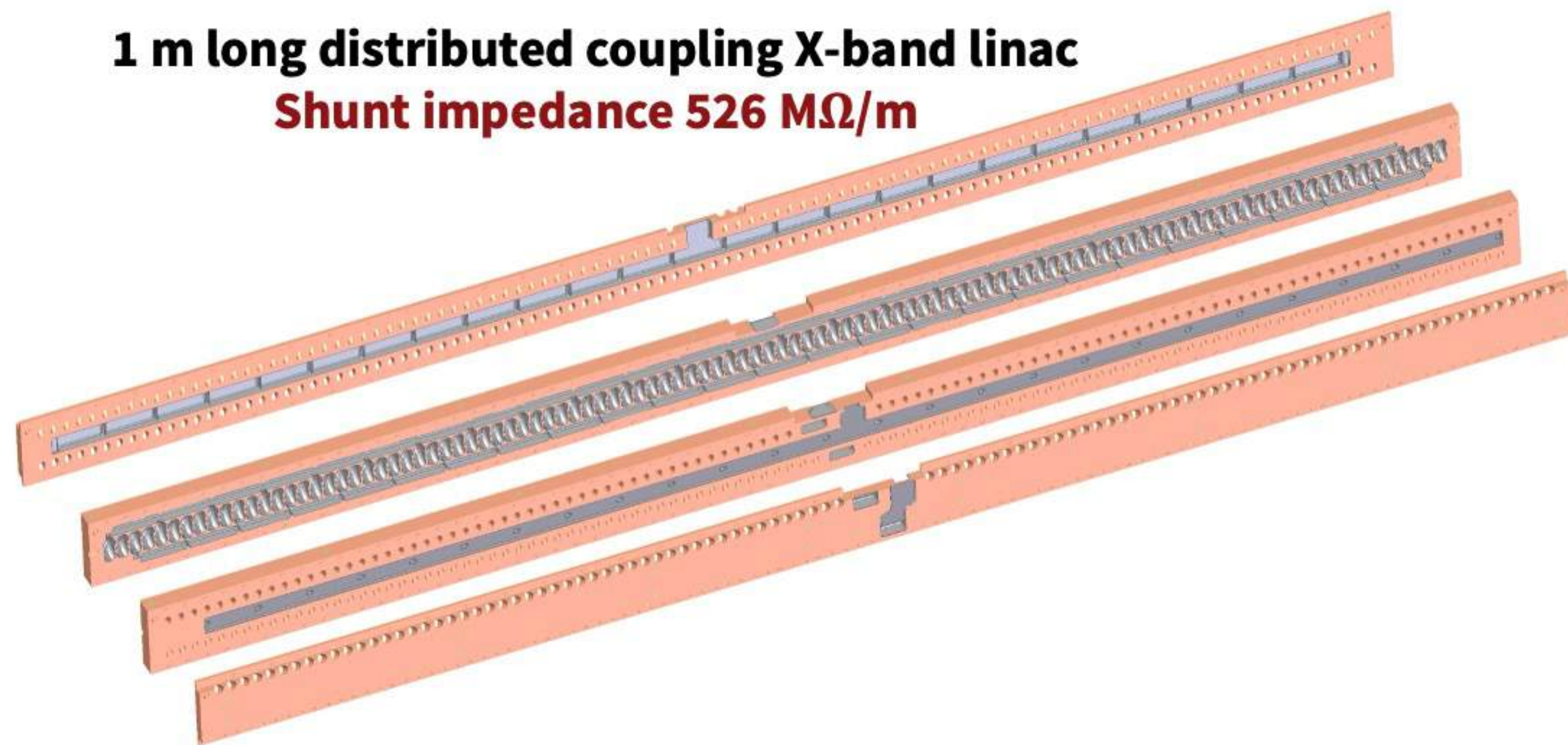


Breitkreutz *Rad Res* 2020

Compact VHEE FLASH technology

100 MeV VHEE linac powered by commercial 6 MW klystron

1 m long distributed coupling X-band linac
Shunt impedance 526 MΩ/m



High efficiency compact cryogenically cooled linac system for very high energy electron radiation therapy



Accelerator Stewardship Program

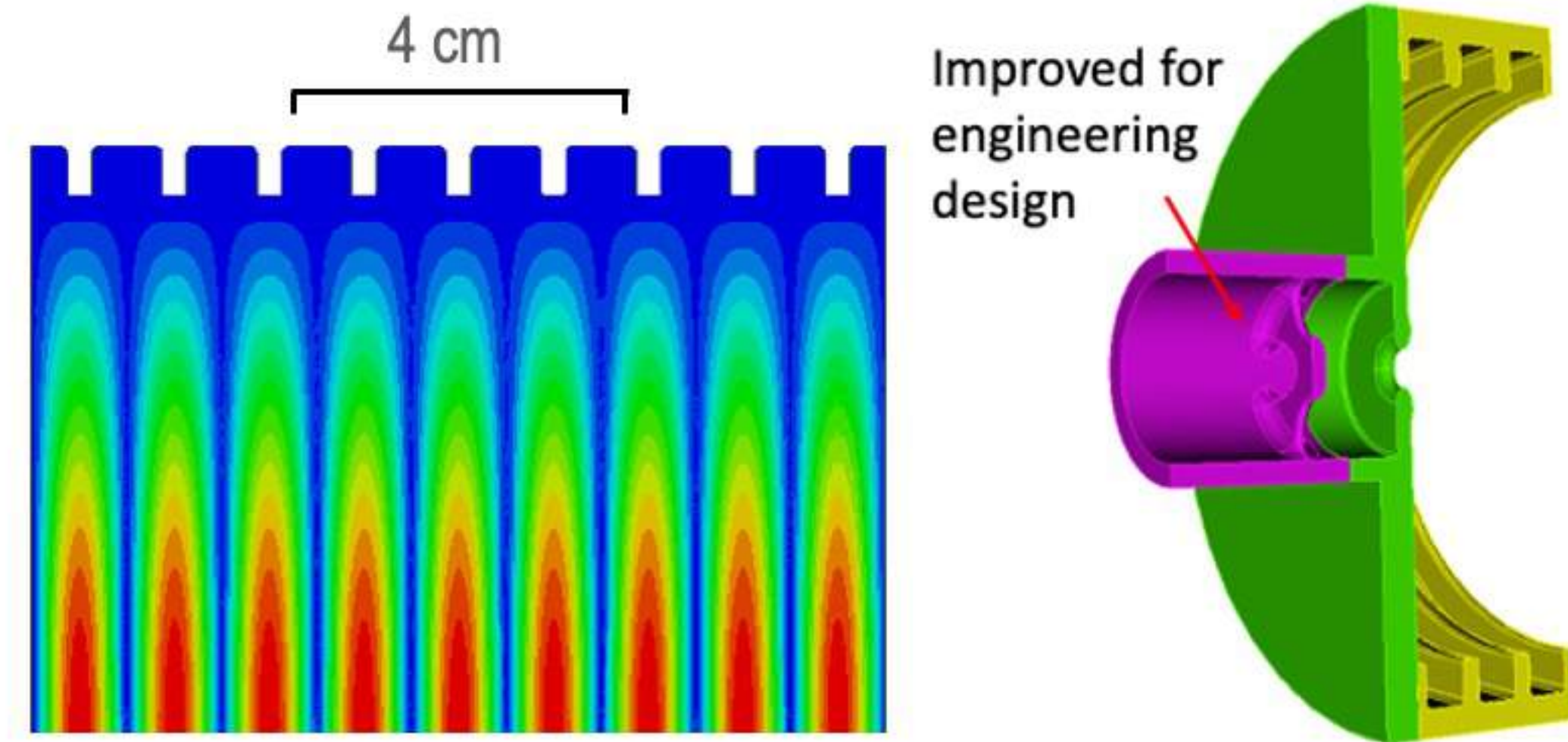
Compact RF pulse compression

Powering the FLASH VHEE linac



K200 Solid State Modulator System from ScandiNova

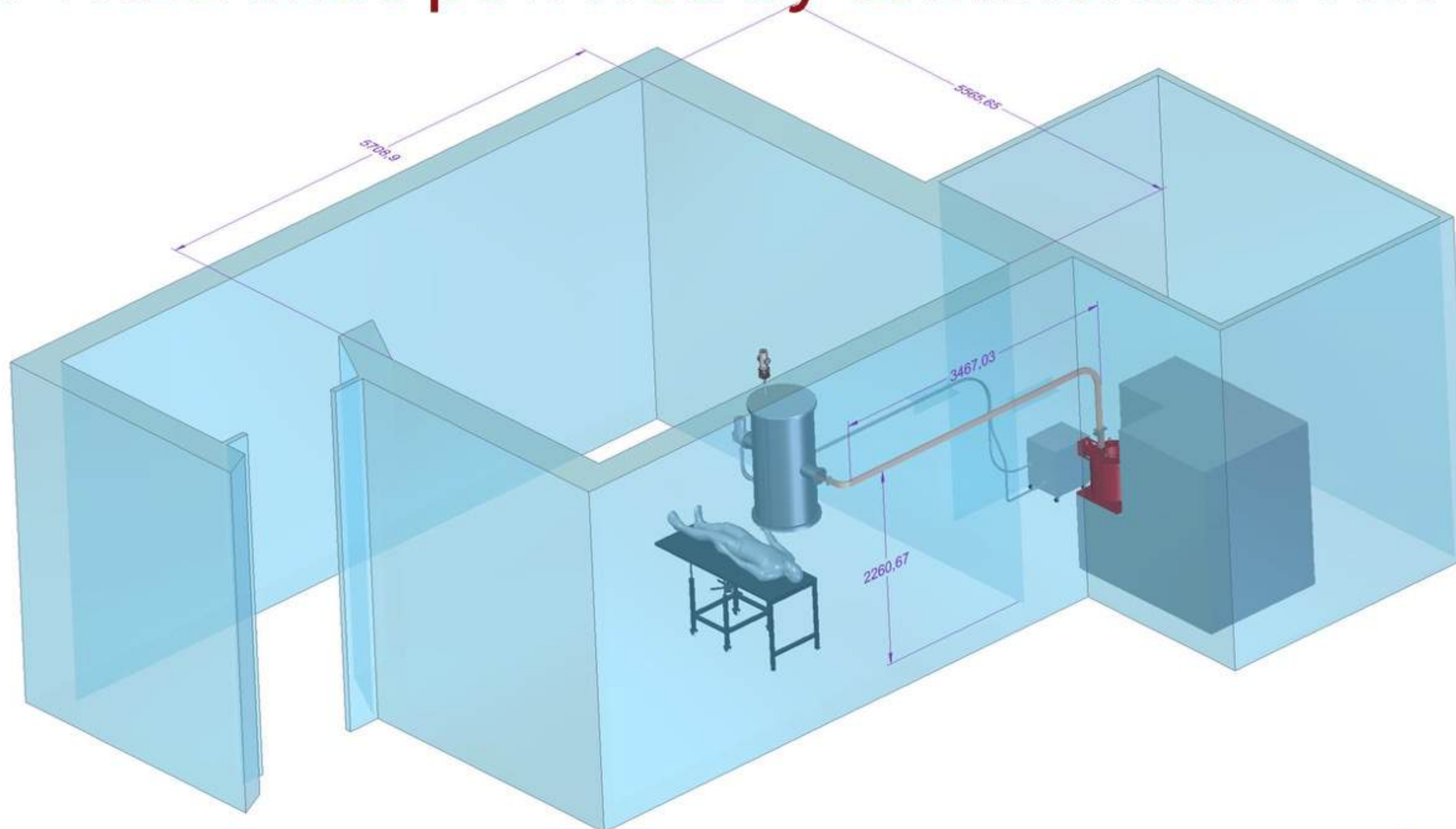
- 11.424 GHz
- Peak power 6 MW
- Pulse length 4 μ s



Compressed pulse reaches 19 MW peak power
in a 200 ns flattop

Compact VHEE FLASH implementation

100 MeV VHEE linac powered by commercial 6 MW klystron



Accelerator Stewardship Program

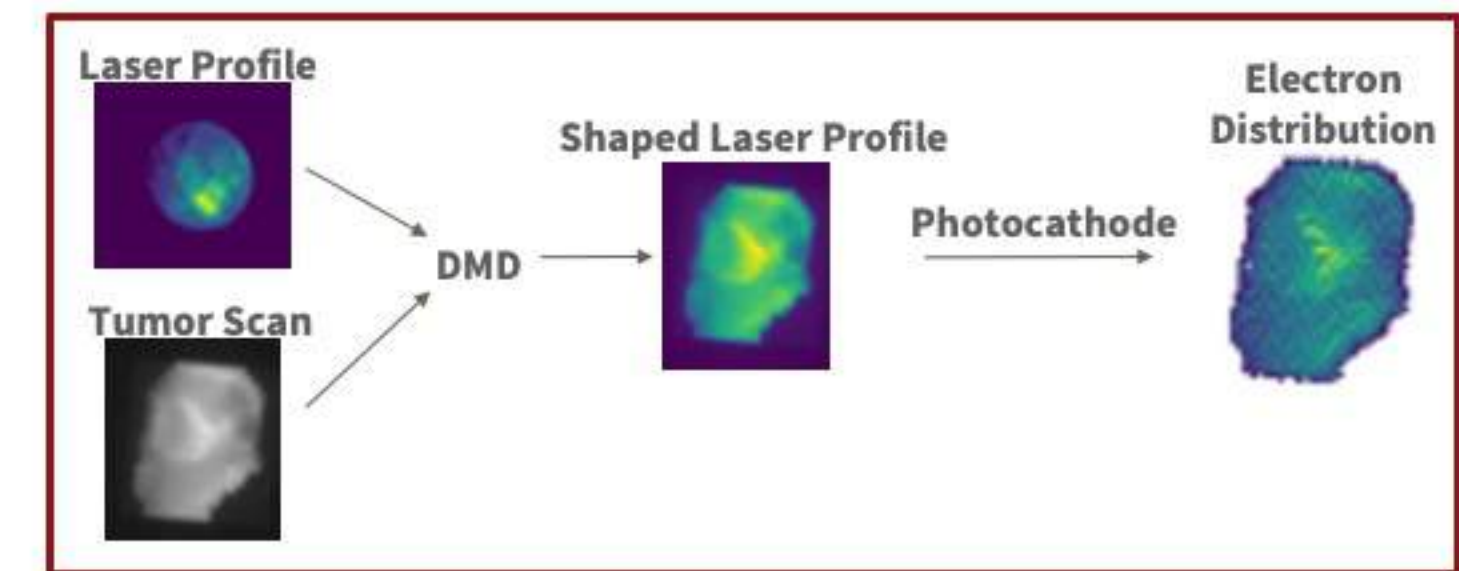
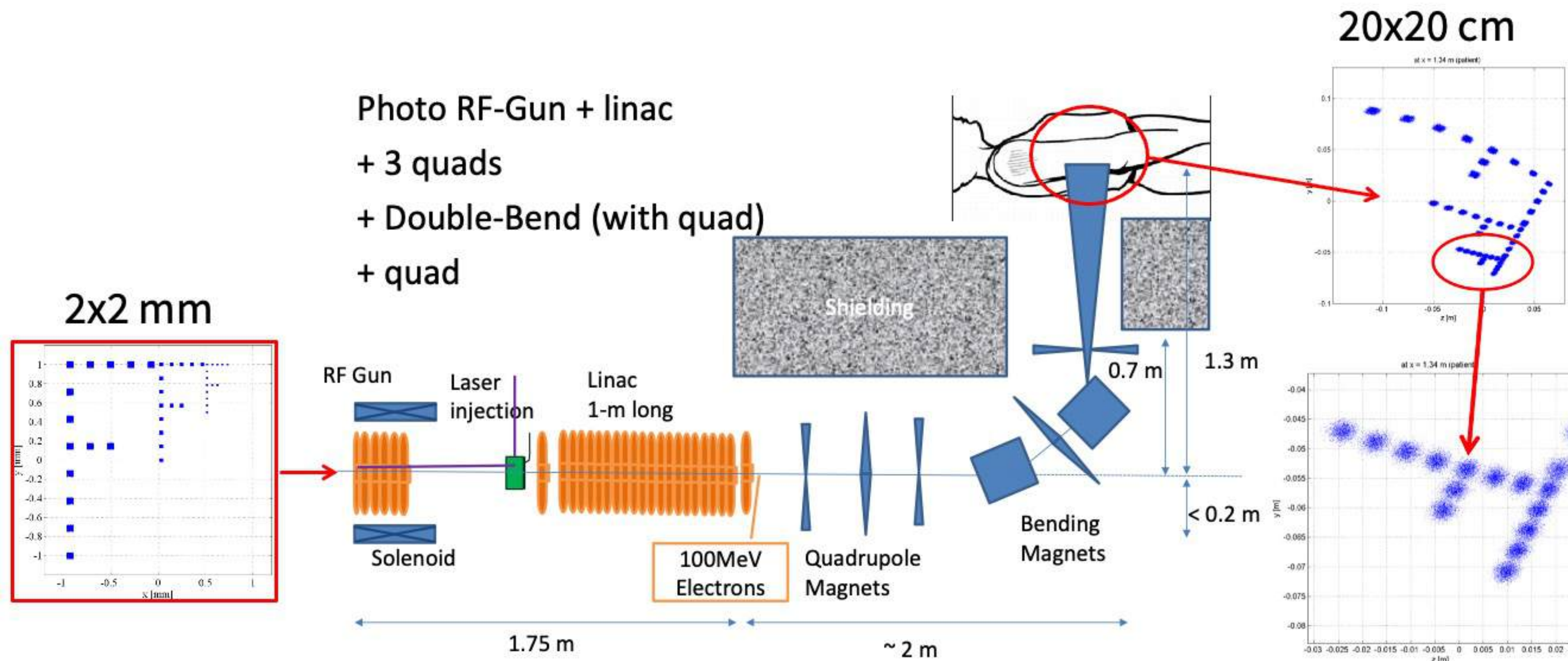
SLAC NATIONAL
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Stanford
MEDICINE



Novel VHEE intensity modulation

Unique 100 MeV compact electron beamline optics design to **accelerate & project electron “image”** from source to patient

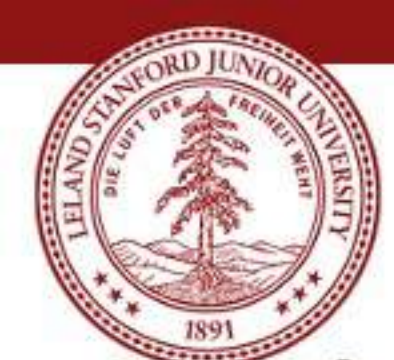


C Recker, N Neveu, E Snively –
SLAC

Maxim, Tantawi, Loo *Radiother Oncol* 2019



- Compared to x-rays, VHEE provides
 - Dosimetric advantages
 - Faster delivery
 - Motion mitigation
 - Potential to leverage FLASH effect
- These may provide the improved therapeutic precision needed to increase the impact of radiotherapy on *clinical outcomes & cure*
- Advances in accelerator/RF science underly the *clinical practicality* of these solutions – power efficiency, compactness, economy



Stanford
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Loo Lab:

Bill Loo
Duaa Al Rawi
Ramish Ashraf
Dylan Breitzkreutz
Suparna Dutt
Michael Dworkin
Aaron Garza
Vedika Grover
Byunghang Ha
Naviya Kapadia
Nikita Katila
Anna Kim
Ryan Ko
Fred Lartey
Brianna Lau

Reagan Lee

Kaitlyn Liang

Aaron Libed

Rakesh Manjappa

Stavros Melemenidis

Josh No

Marjan Rafat

Nathaniel Scher

Luis Soto

Vignesh Viswanathan

Jinghui Wang

Brendan Whelan

Fred Wu

Stanford Med Phys:

Lawrie Skinner

Murat Surucu

Lei Wang

Amy Yu

Maxim Lab (UCI/IU):

Peter Maxim

Christina Huang

Masha Servati

Brian Thorndyke

Rankin Lab:

Erinn Rankin

Stephanie Chow

Joshua Eggold

Karen Levy

Phoebe Loo

Suchitra Natarajan

Hussein Shehade

Graves Lab:

Ted Graves

Oscar Cortez

Comparative Med:

Kerriann Casey

Le Lab:

Quynh Le

Hongbin Cao

Dhanya Nambiar

Immunology:

Ed Engleman

Sam Strober

Longo Lab:

Frank Longo

Danielle Simmons

MDACC:

Albert Koong

Chih-Chien Chou

Seoul National Univ:

G-One Ahn

Hak Jae Kim

SLAC:

Sami Tantawi

Matt Franzi

Mark Kemp

Chris Nantista

Muhammad Shumail

Aaron Tremaine

Brandon Weatherford

Sayed Rokni

Andrew Rosenstrom

Mario Santana

NIH NATIONAL CANCER INSTITUTE
P01 Collaborators



C Limoli



MC Vozenin



D Spitz

R01 Collaborator



E Schüler

R01 Collaborator



E Engleman

