

Moderne Beschleunigerkonzepte und ihre Anwendung in der Medizin

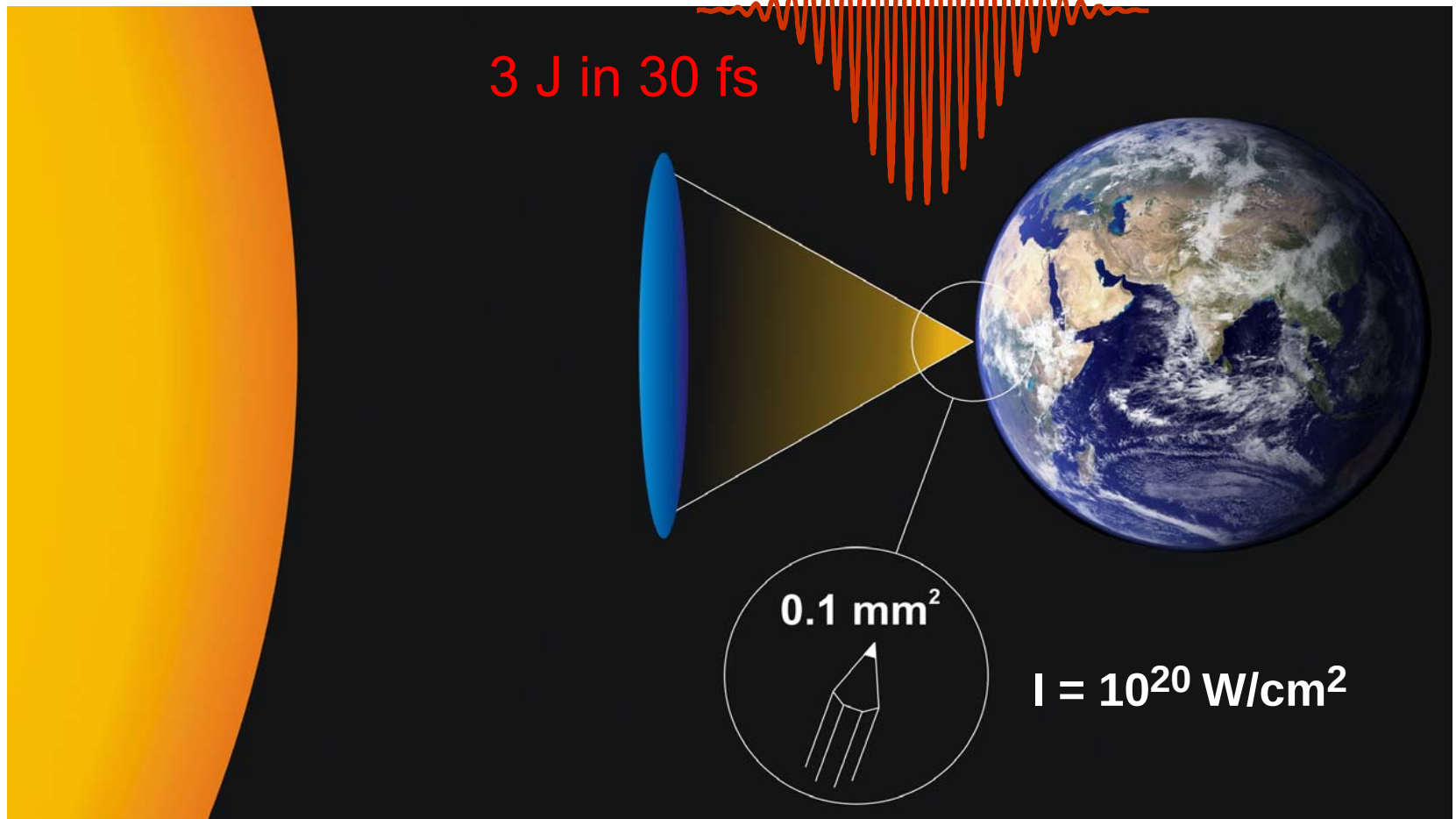
Kompakte Laserbeschleuniger

U. Schramm

100 TW Laser

$$I = 10^{20} \text{ W/cm}^2$$

$$E_0 = 10^{12} \text{ V/m}$$

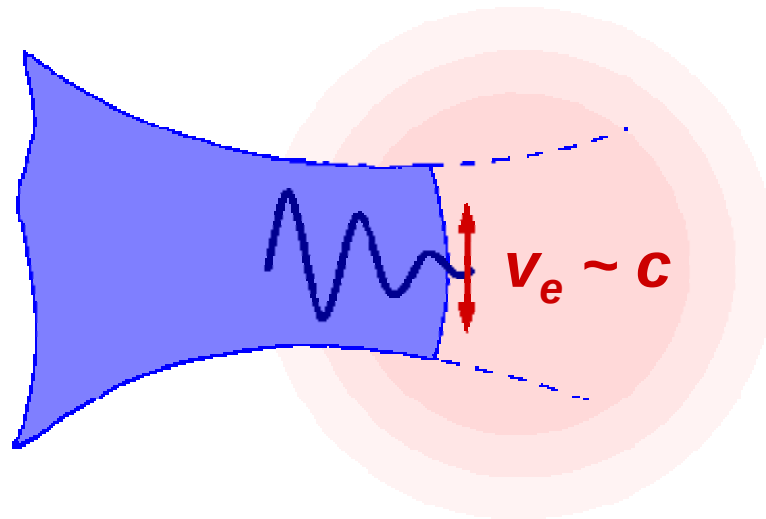


Beschleunigen mit Licht

- Ia. Wie wird ein Elektron beschleunigt ?
- Ib. Was ändert sich in einem dünnen Plasma ?
- Ic. Wie erzeugt man einen
monoenergetischen Elektronenstrahl ?
- II. Wie erreicht man die viel schwereren Ionen ?
- III. Mögliche medizinische Anwendungen

For laser intensities exceeding $I \sim 10^{18} \text{ W/cm}^2$, the electron quiver motion becomes relativistic within half a period

target: one electron

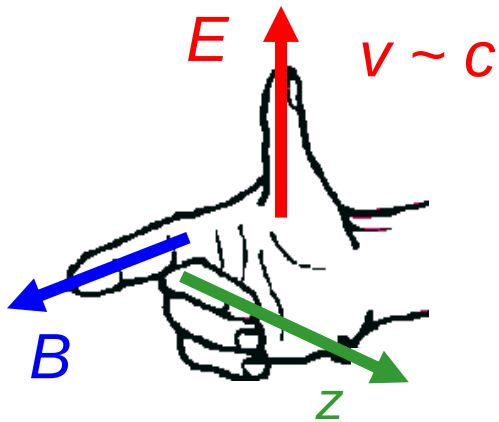


► *mass increase*

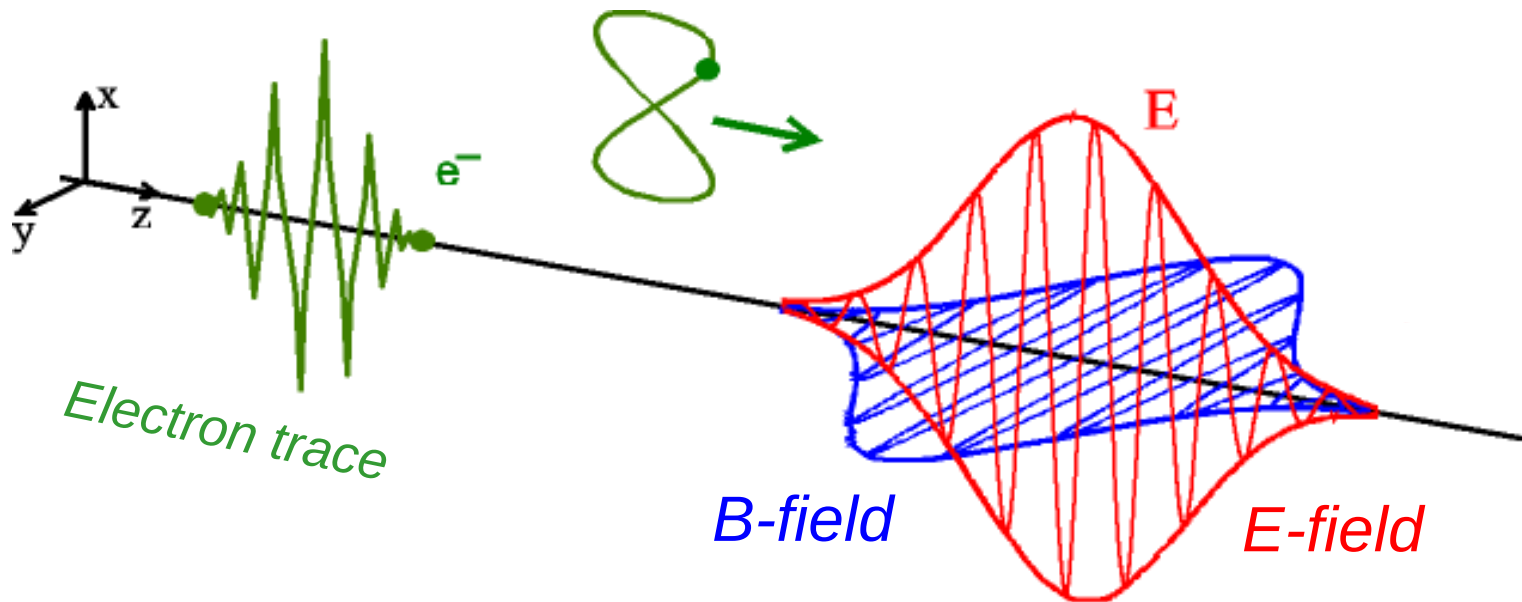
► *forward acceleration due to Lorentz force*

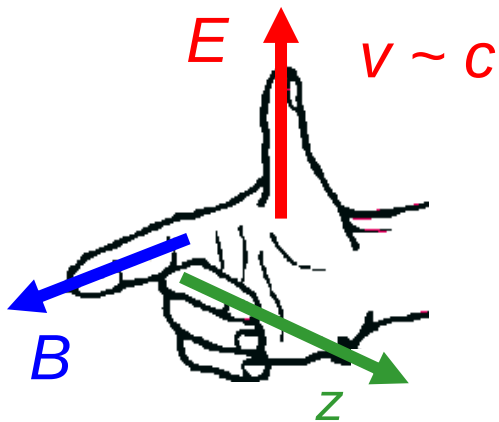
► *anharmonic osc.*

$$a_0 = \frac{eE_0}{\omega m_e c} \quad I = \frac{E_0 B_0}{\mu_0} = \frac{E_0^2}{\mu_0 c} = \frac{a_0^2}{\lambda^2 [\mu\text{m}]} \cdot 1.4 \cdot 10^{18} \frac{\text{W}}{\text{cm}^2}$$

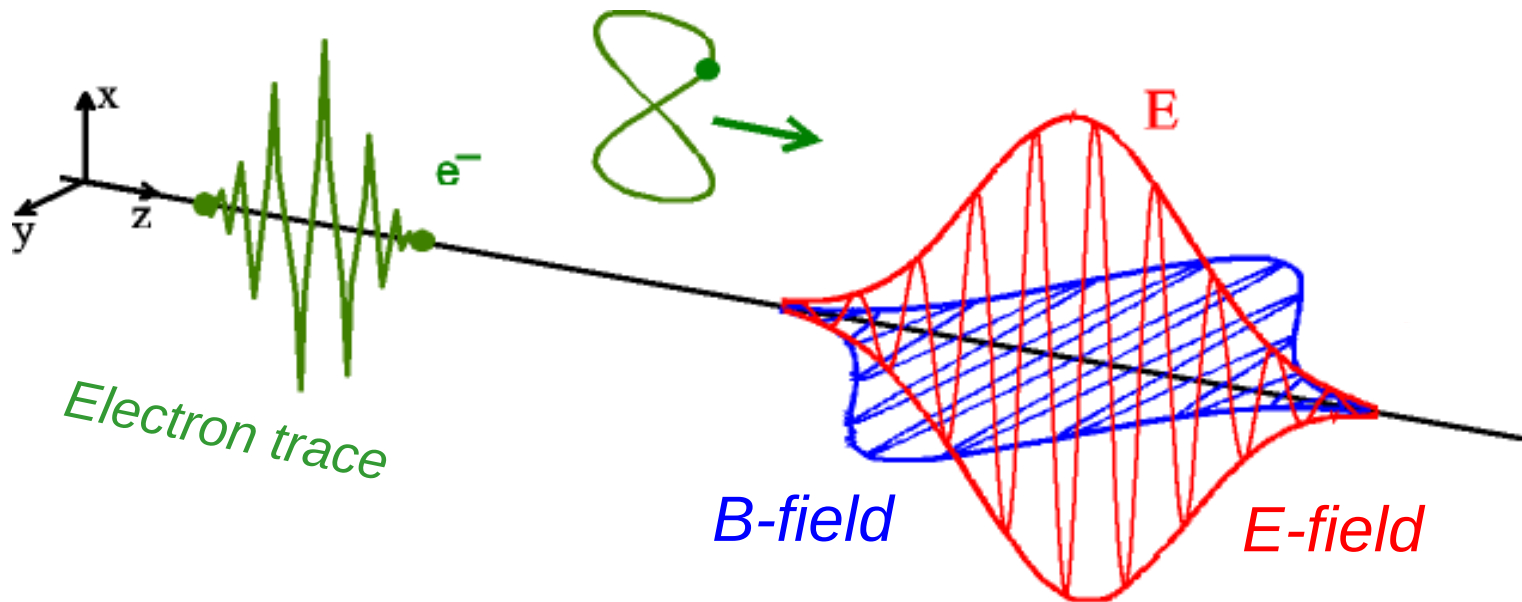
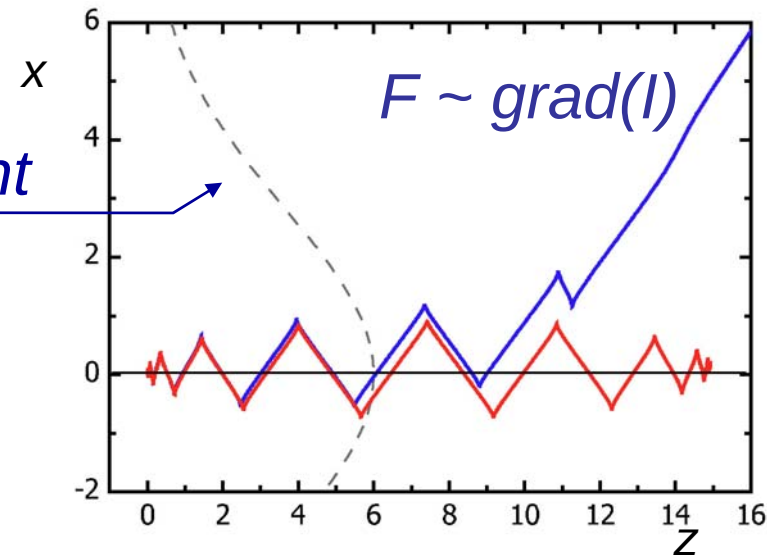


$$\vec{F} = e\vec{E} + e\vec{v} \times \vec{B} \quad (B_0 = E_0/c)$$





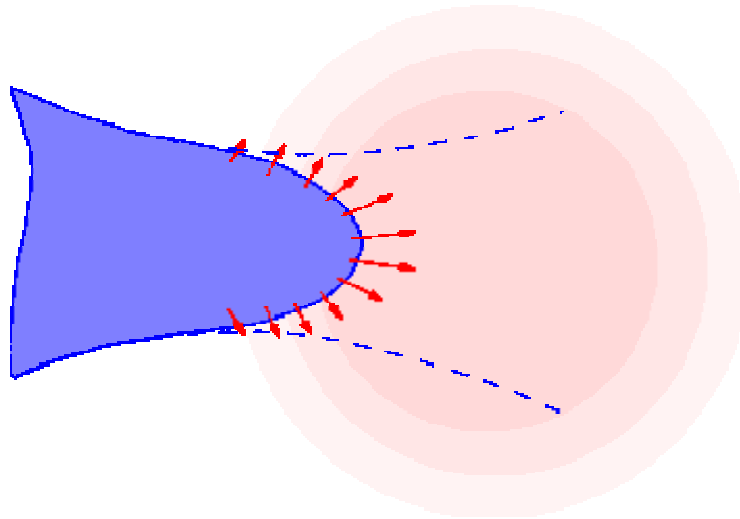
*intensity gradient
ponderomotive
acceleration*



Beschleunigen mit Licht

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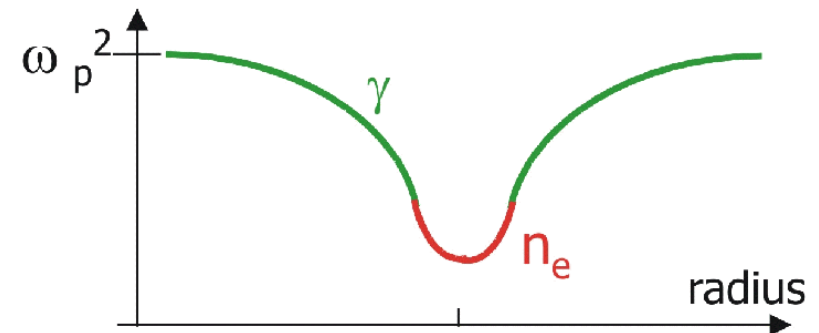
target: underdense (=transparent) plasma



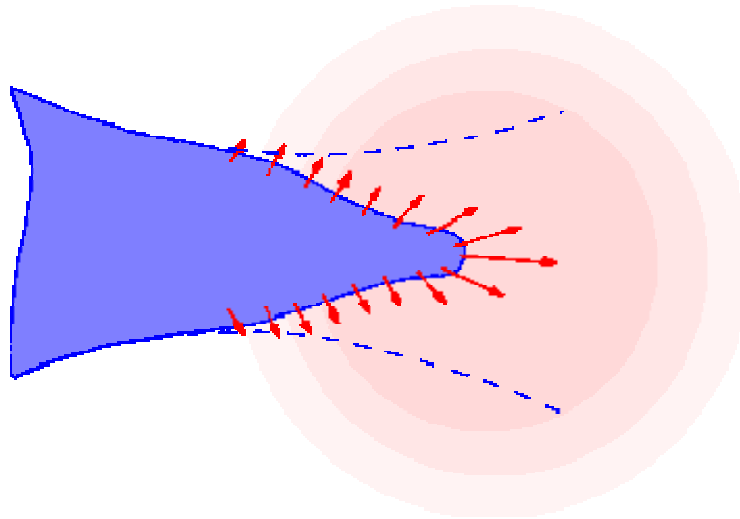
plasma frequency

$$\omega_p^2 = \frac{en_e}{\varepsilon_0 \gamma m_e}$$

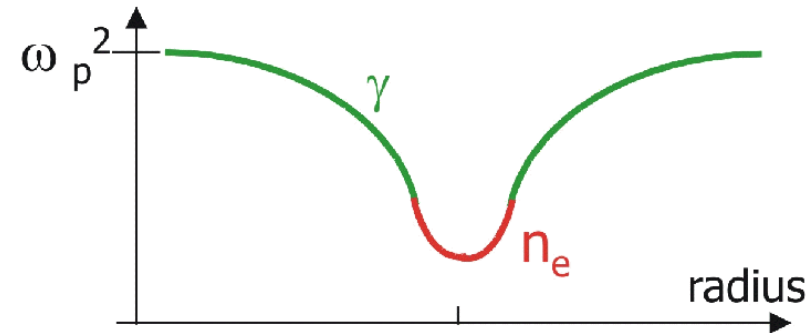
- mass increase
- density reduction



Index of refraction n locally increases -> relativistic self focusing

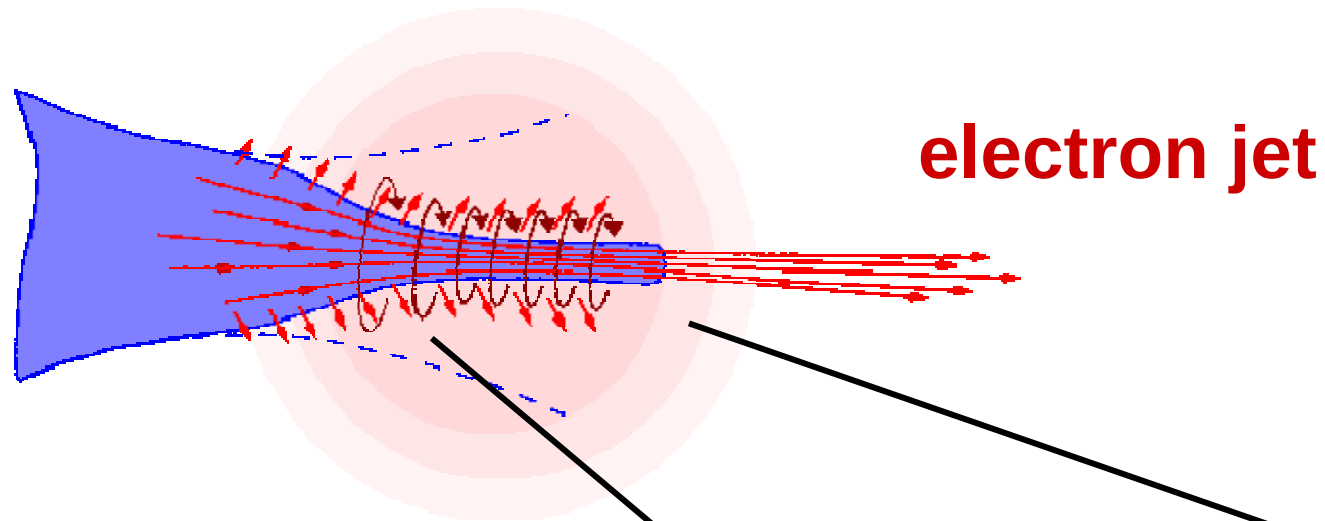


$$n = \sqrt{1 - \frac{\omega_p^2}{\omega^2}}$$

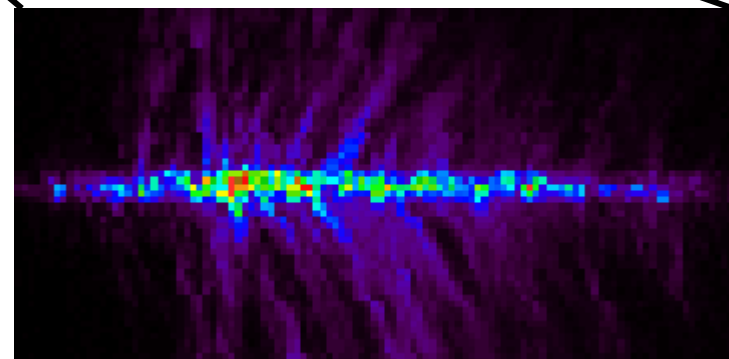


$$v_{ph} = c/n \quad v_{gr} = c \cdot n \quad n_{19} = 0.999 \quad n_0 = 0.995$$

channel formation

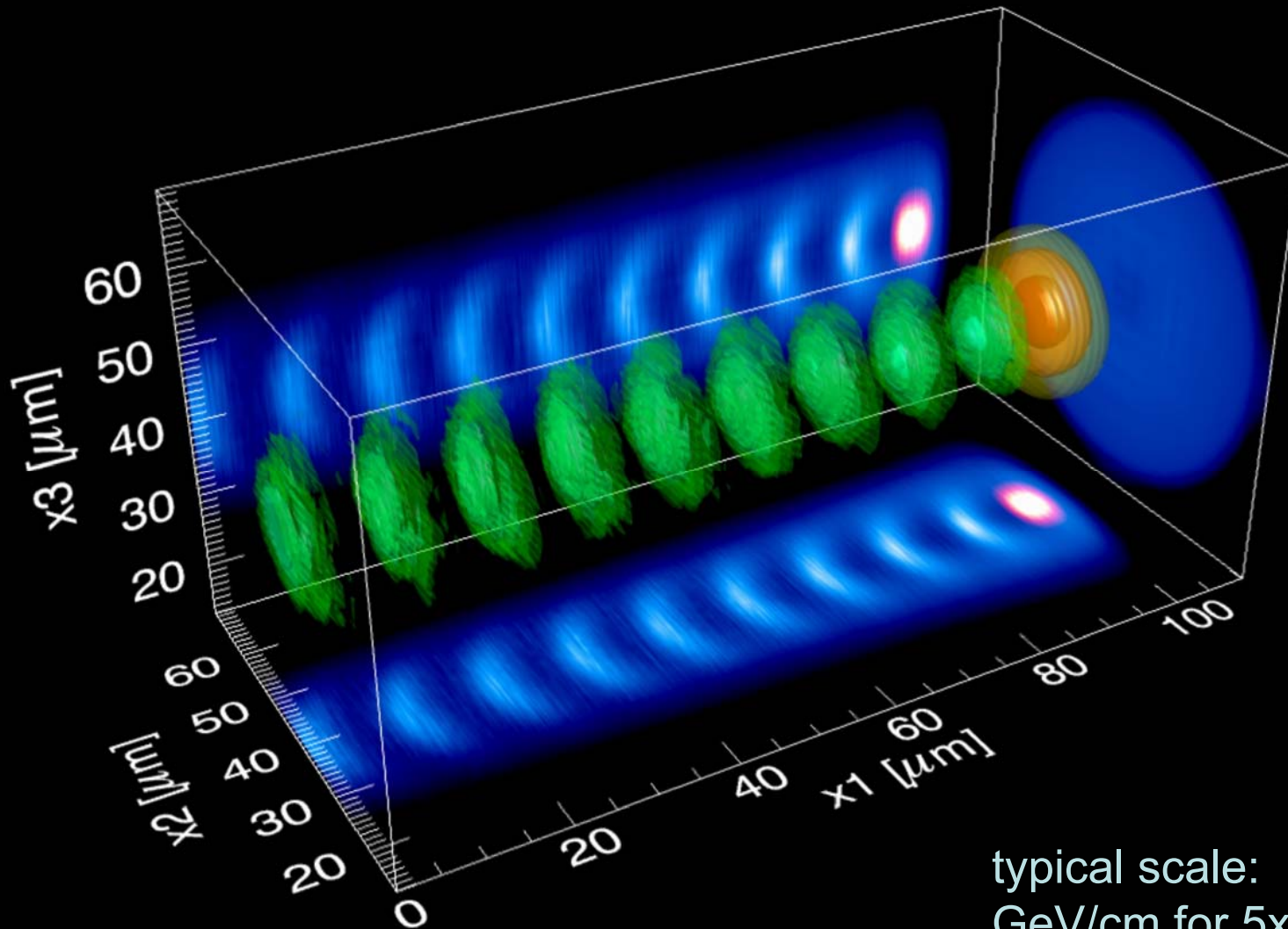


Thomson scattering @ 2ω
(length $0.4\text{mm} = 400 \lambda$)



excitation of a longitudinal wave (wake)

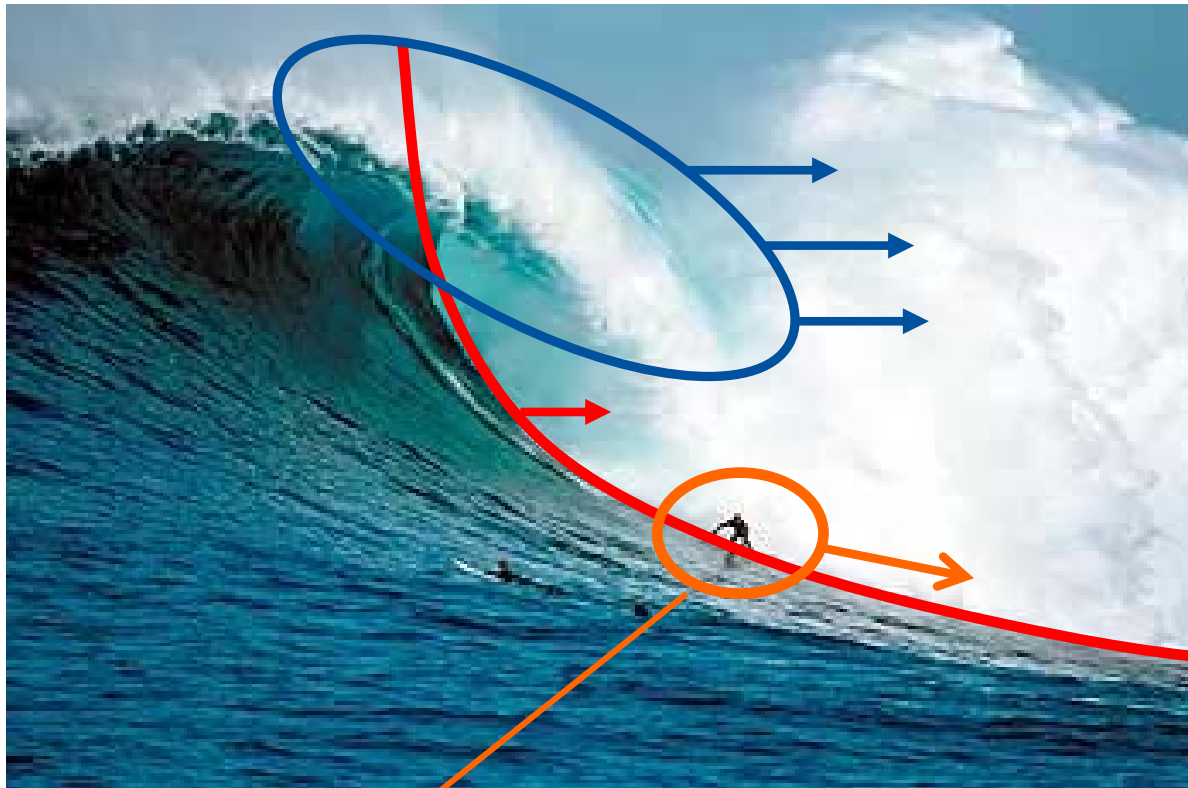




typical scale:
 GeV/cm for $5 \times 10^{18} \text{ e/cm}^3$

3D PIC Simulation courtesy L. Silva, W. Mori

nonlinear wavebreaking (self injection) $v > v_{ph}$



dephasing

test particle $v_e > v_{ph}$
(external injection)

acceleration potential
(anharmonic, moving with v_{ph})

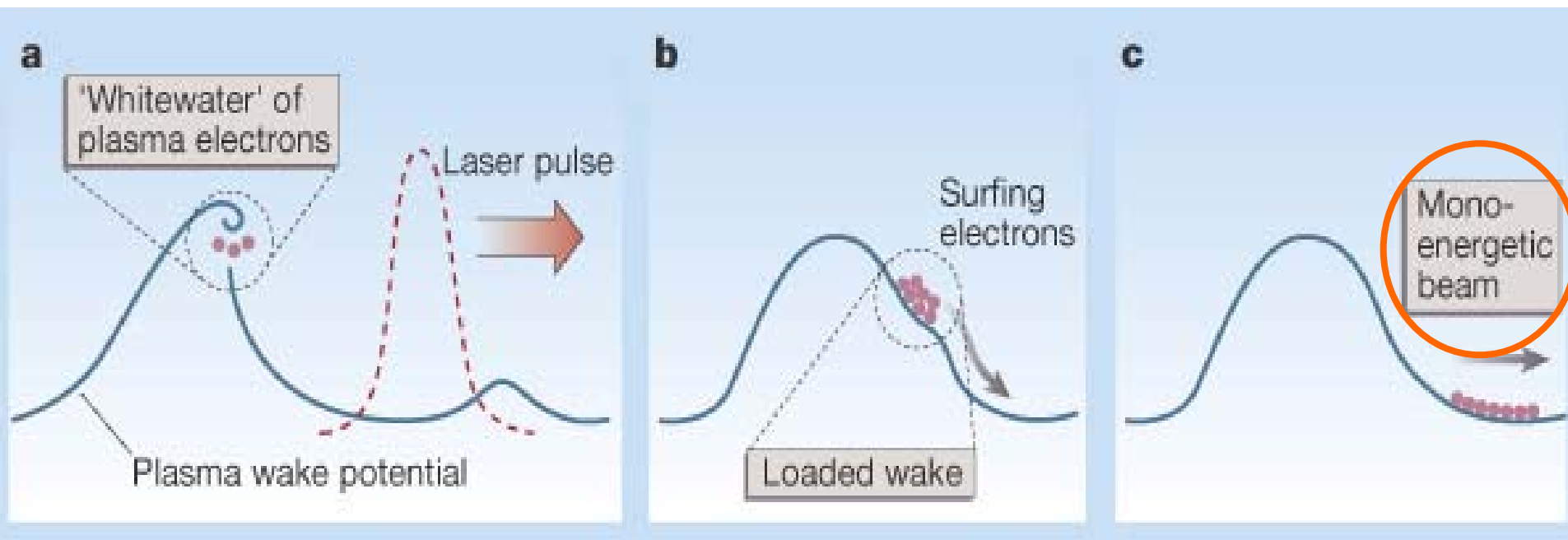
... effective, but rather hard to control



and normally destructing the accelerating wave (or wake)

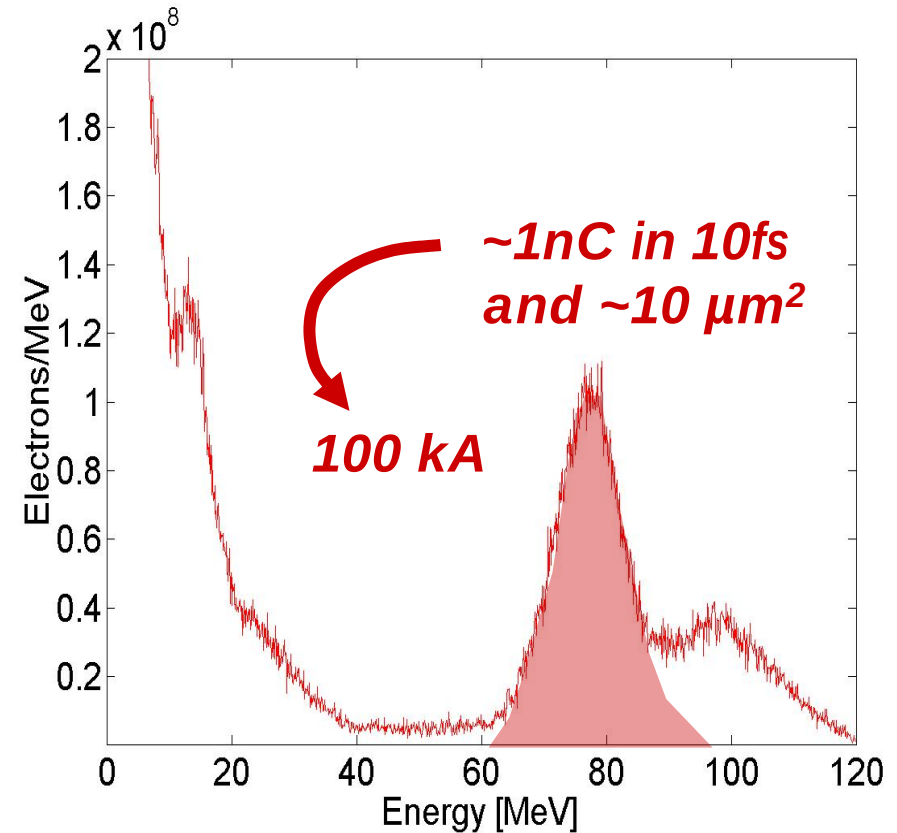
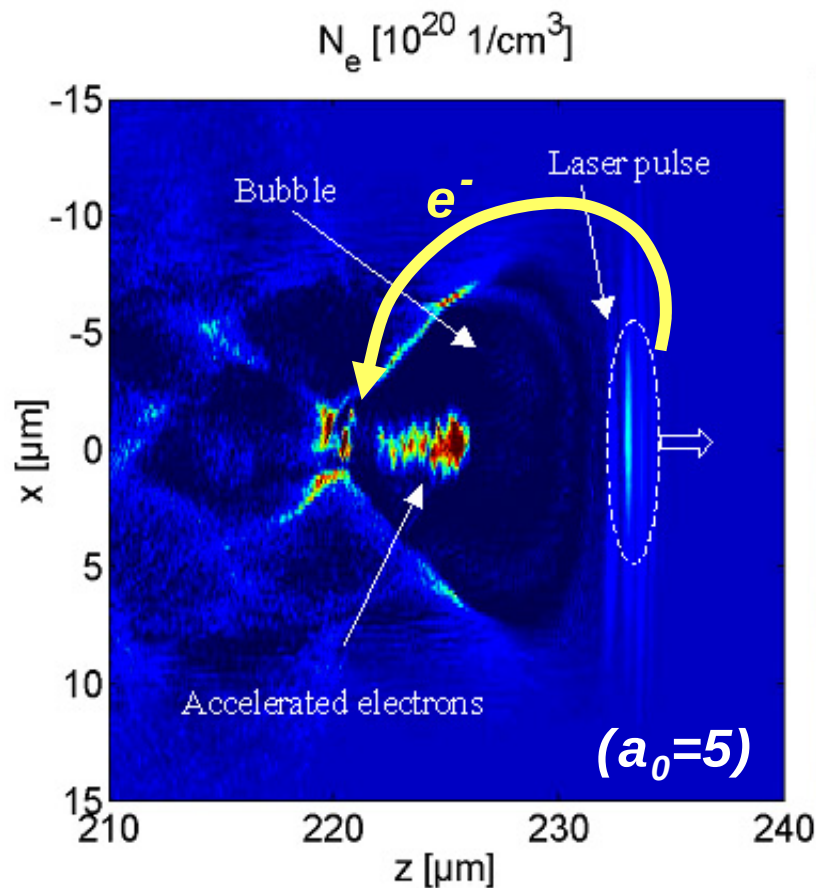
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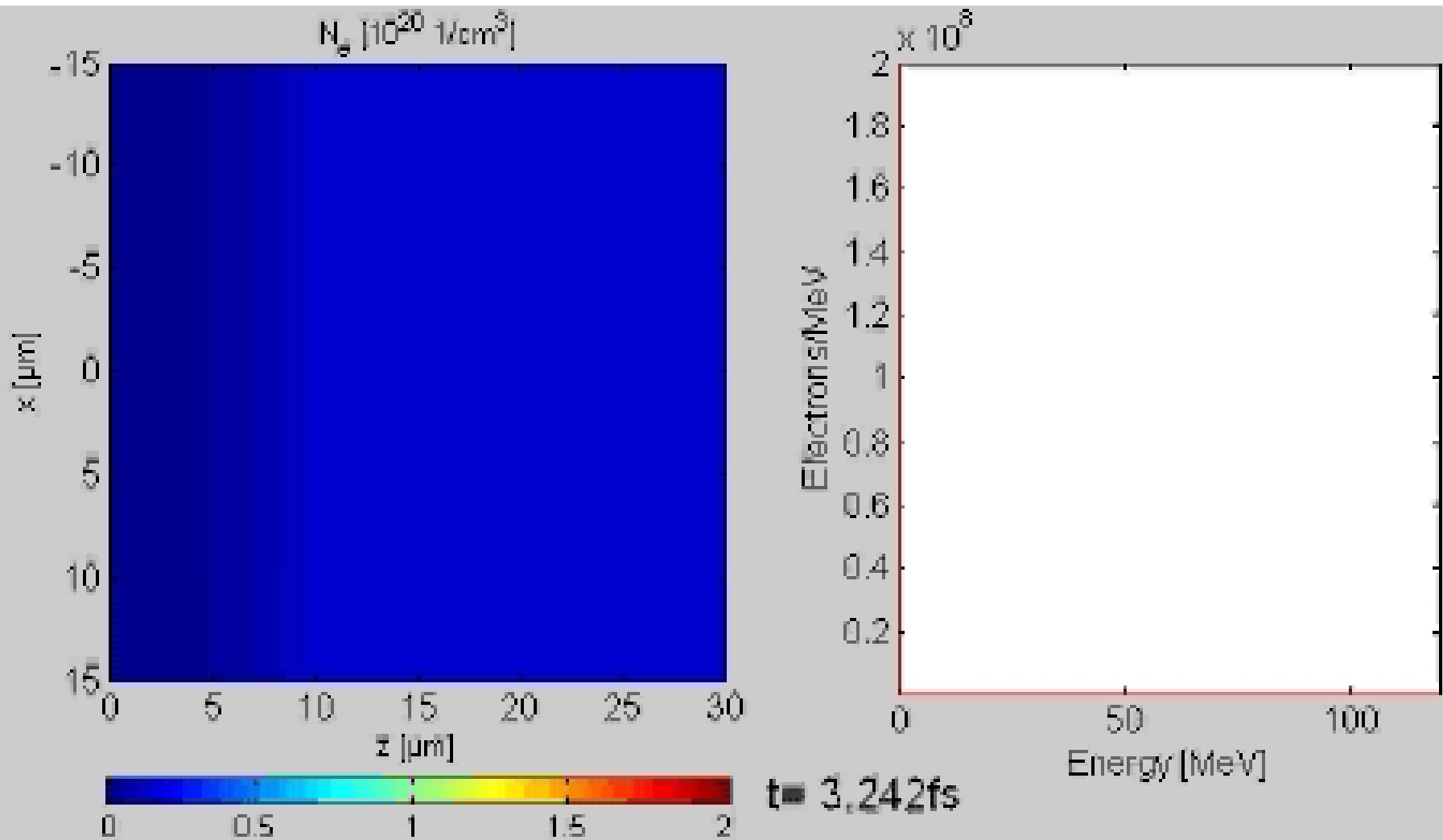
T. Katsouleas, Nature 431, 515 (2004)

... and yet surprisingly „real“ in the highly nonlinear broken wave – blow-out – bubble regime ...

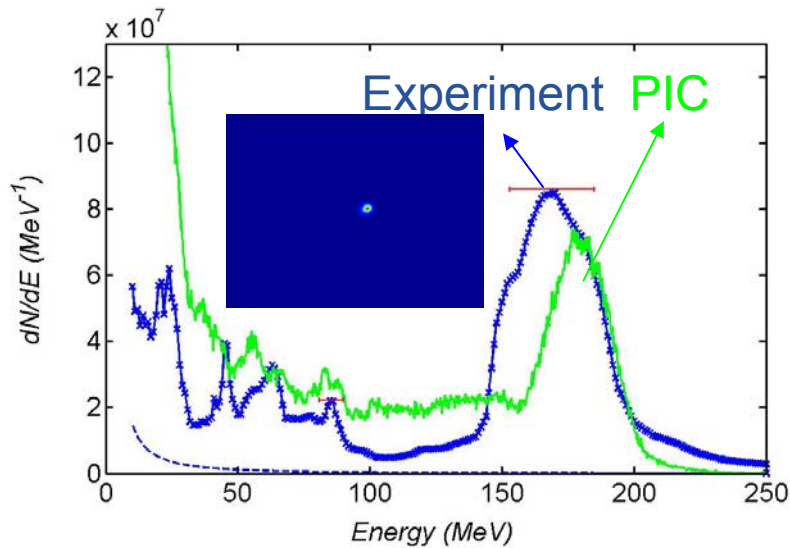


plasma wavelength < *pulse length*

[M. Geissler, NJP 8 (2006) 186]

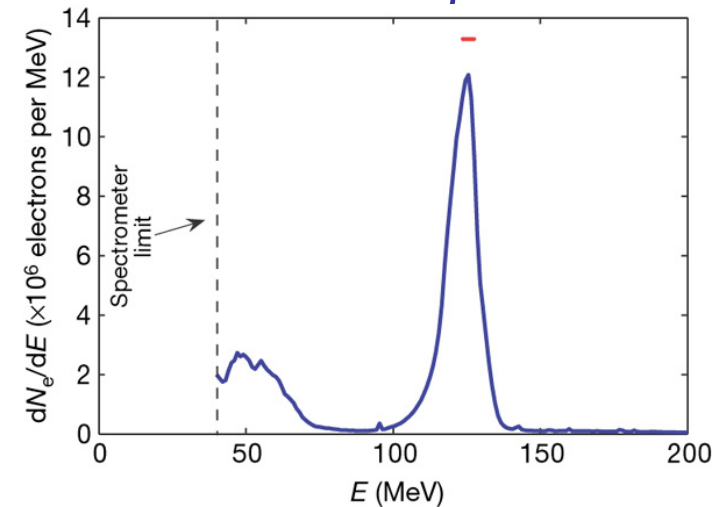


[M. Geissler, NJP 8 (2006) 186]



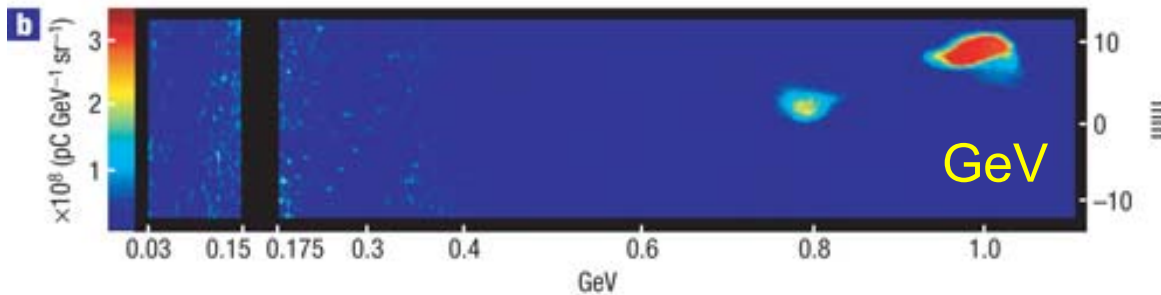
S. Mangles et al., C. Geddes et al., J. Faure et al.,
in Nature 431 (2004)

controlled injection



J. Faure, et al., Nature 444 (2006) 737

matched discharge capillary



W. Leemans, et al.,
Nature physics 2 (2006) 696

Features of laser accelerated beams

high charge (up to nC)
short pulses (down to 10fs)



high peak current
(up to 100kA)



space charge



„compact“ accelerators (up to GeV electrons)



low rep-rate (<10Hz)



excellent emittance, yet poor divergence

Features of laser accelerated beams

high charge (up to nC)
short pulses (down to 10fs)



high peak current
(up to 100kA)



space charge



„compact“ accelerators - local machines



low rep-rate (<10Hz) - restrict to low average
yet high peak dose



excellent emittance, yet poor divergence

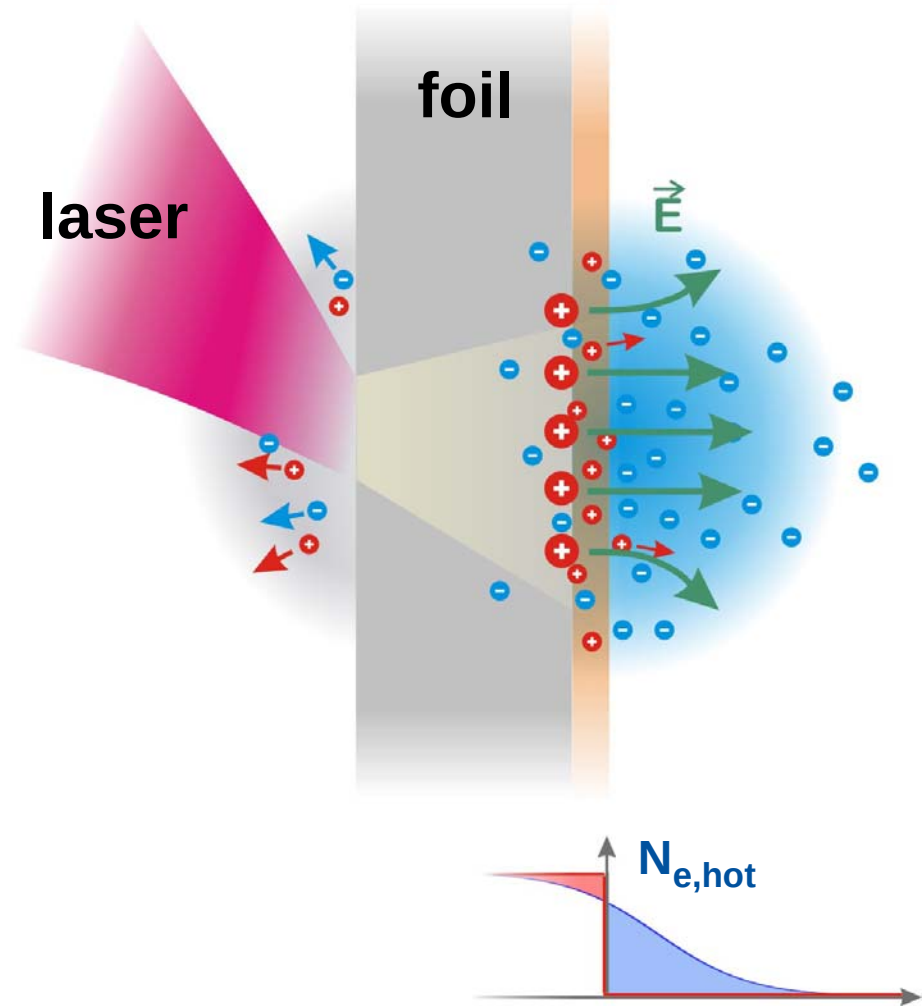
Beschleunigen mit Licht

II. Wie erreicht man die viel schwereren Ionen ?

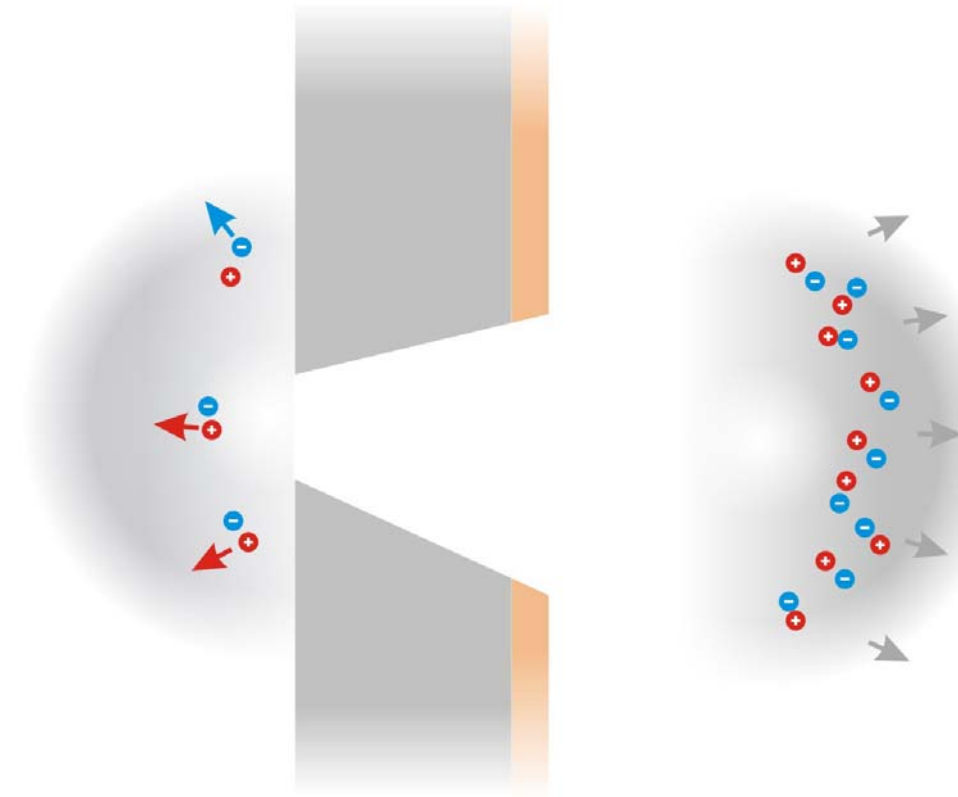
... immer nur über die Elektronen ...

III. Mögliche medizinische Anwendungen

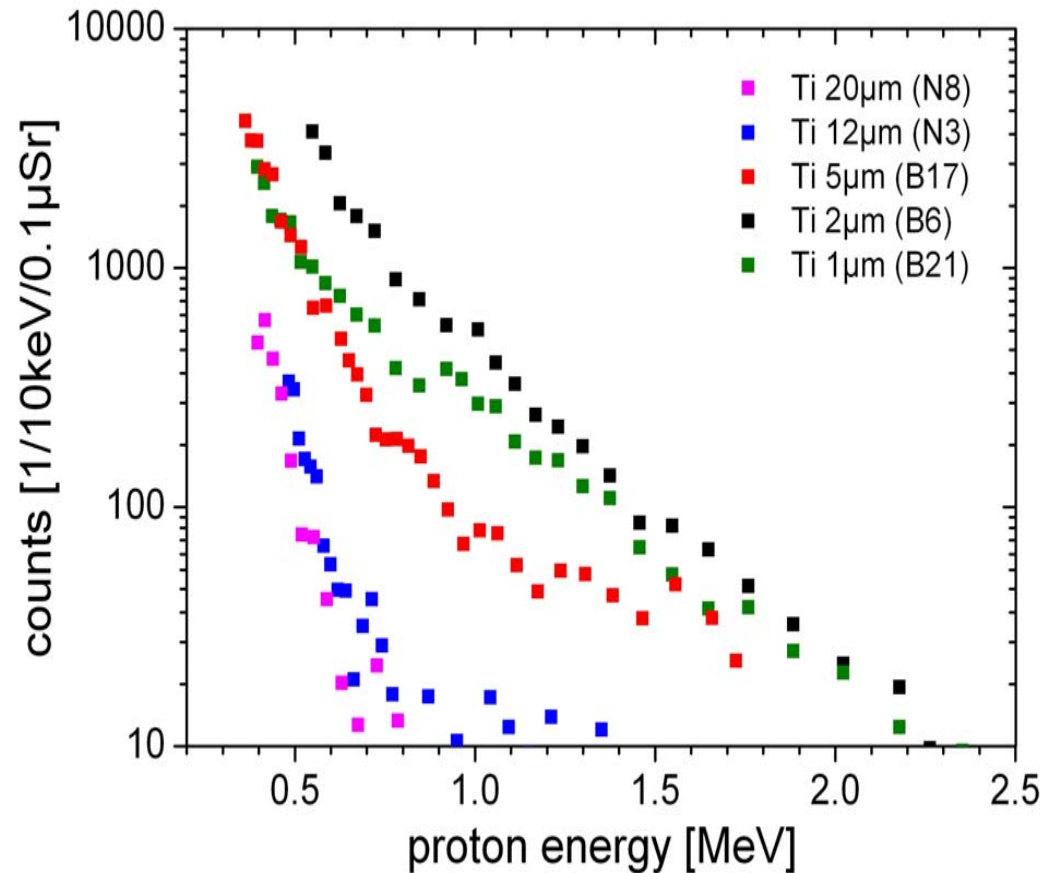
- electron acceleration
- hot (MeV) electrons penetrate the (μm) foil
- quasi static field forms normal to target surface, source size $\gg$ laser spot



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- hot (MeV) electrons penetrate the foil
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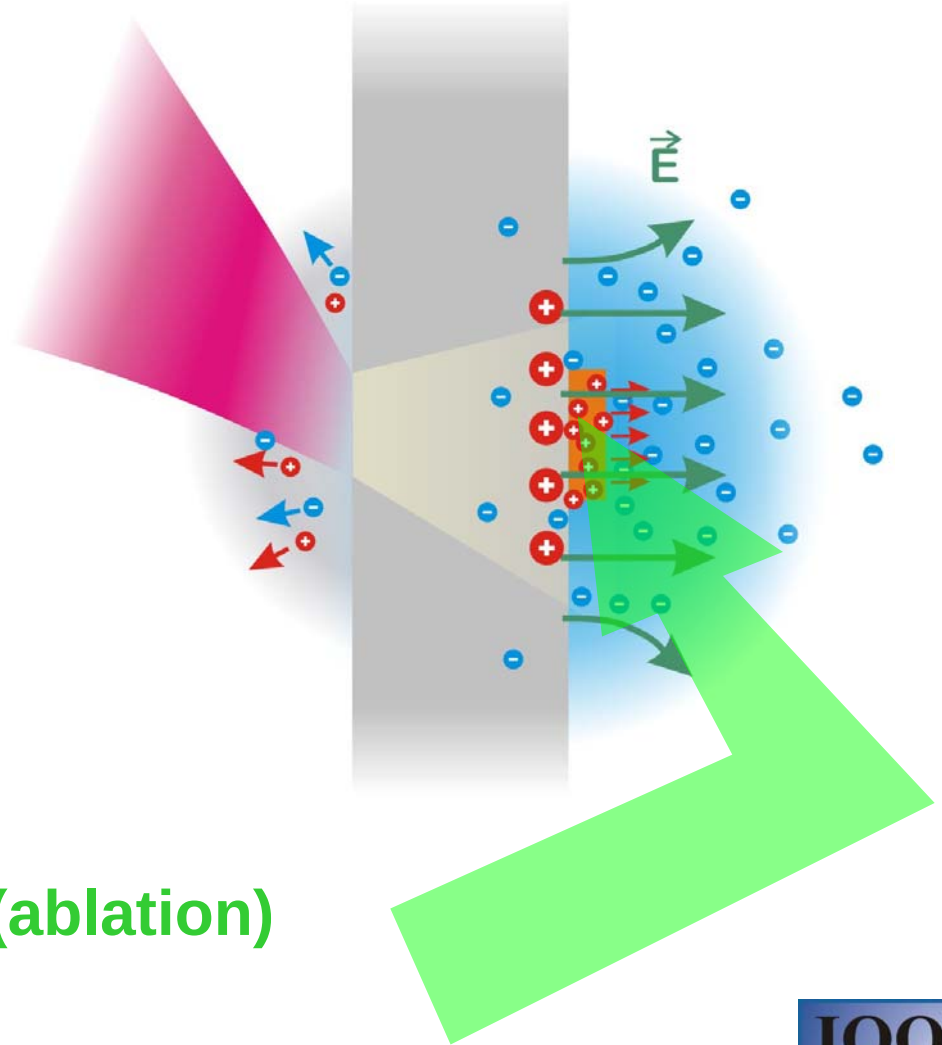


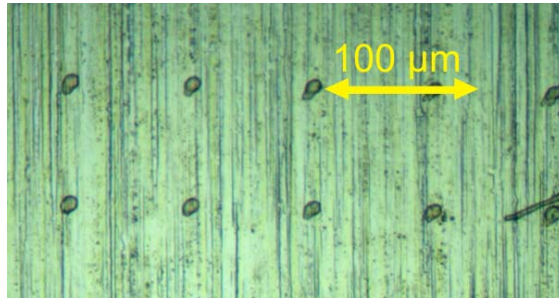
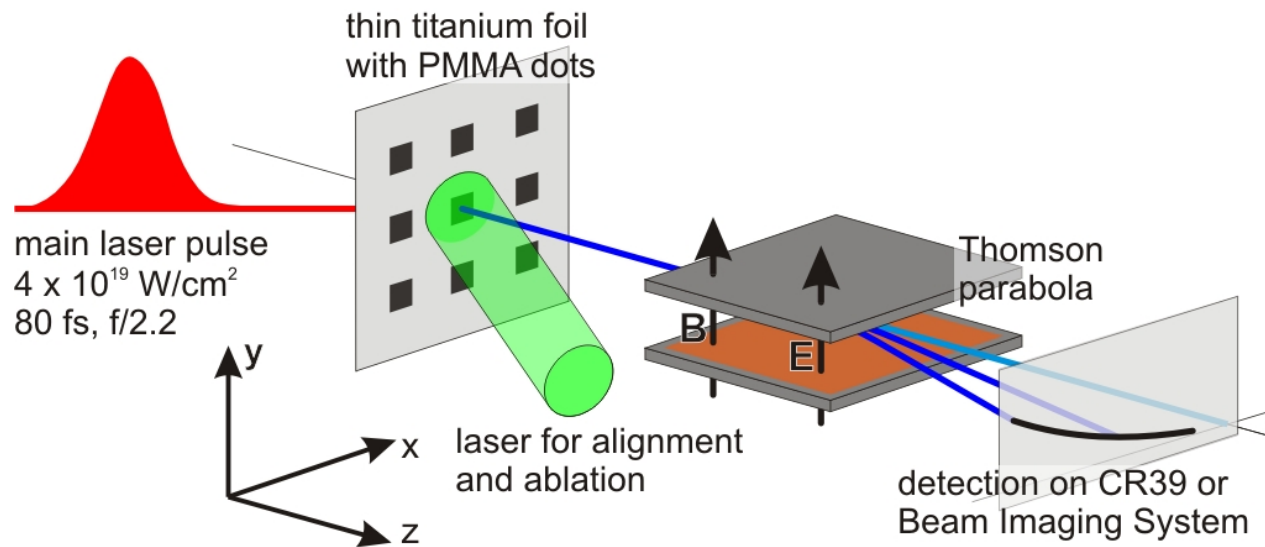
quasi-neutral pulse with exponential energy distribution (with max. energy depending on laser pulse duration, energy, and target thickness)



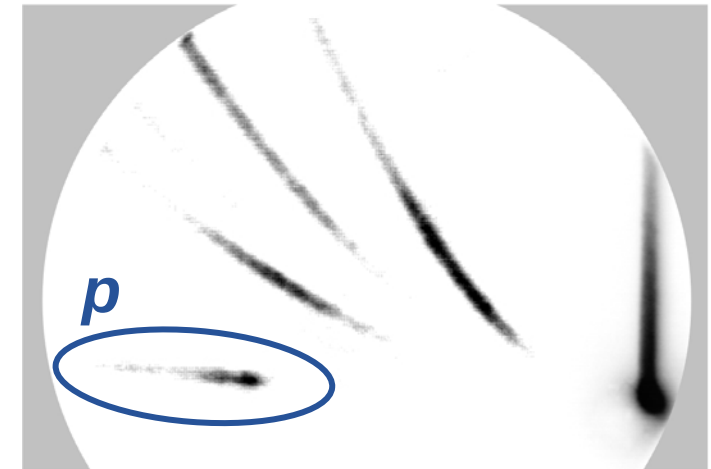
quasi-neutral pulse with exponential energy distribution (with max. energy depending on laser pulse duration, energy, and target thickness)

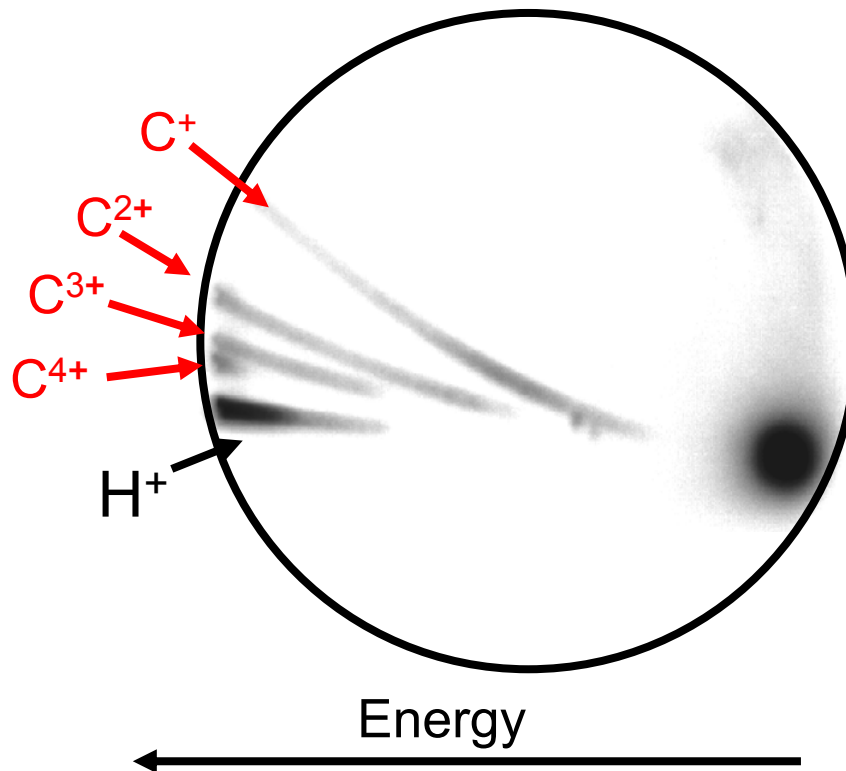
- enhance yield in the central, homogeneous region by applying a proton rich „dot“
- use thin dot (to avoid temporal field depletion and shielding)
- Careful backside cleaning (ablation) increases the fidelity





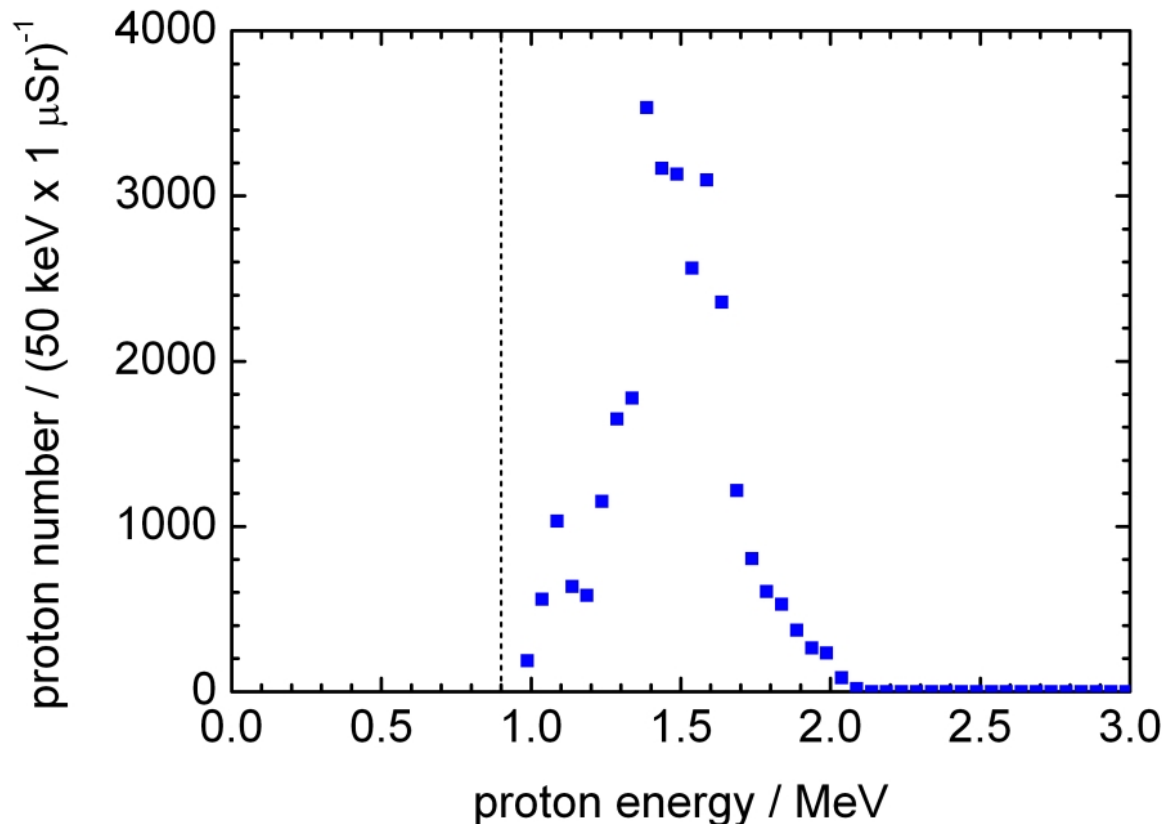
Lith. polymer coating on Ti-foil
 $8 \times 8 - 20 \times 20 \mu\text{m}^2$ base area
 $0.15 - 1.0 \mu\text{m}$ height





Ions are separated by a mass and energy selective spectrometer and hit a position sensitive detector.

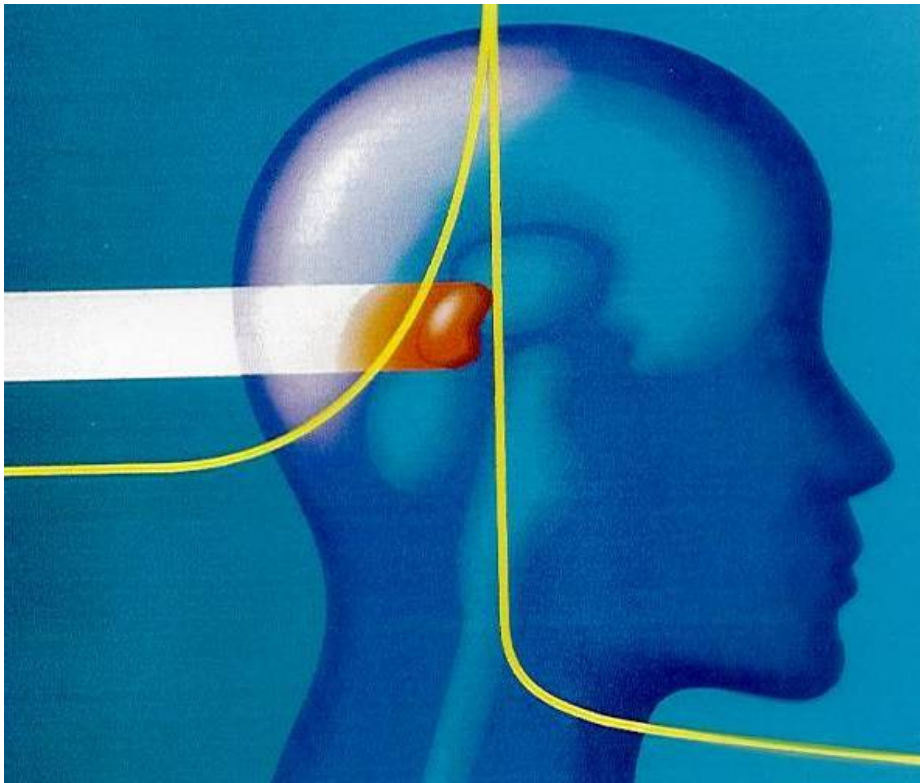
All species of ions located at the backside of the foil can be accelerated



- overall number of ions about 10^8 in 20msr
- 80% fidelity with online target cleaning (ablation)

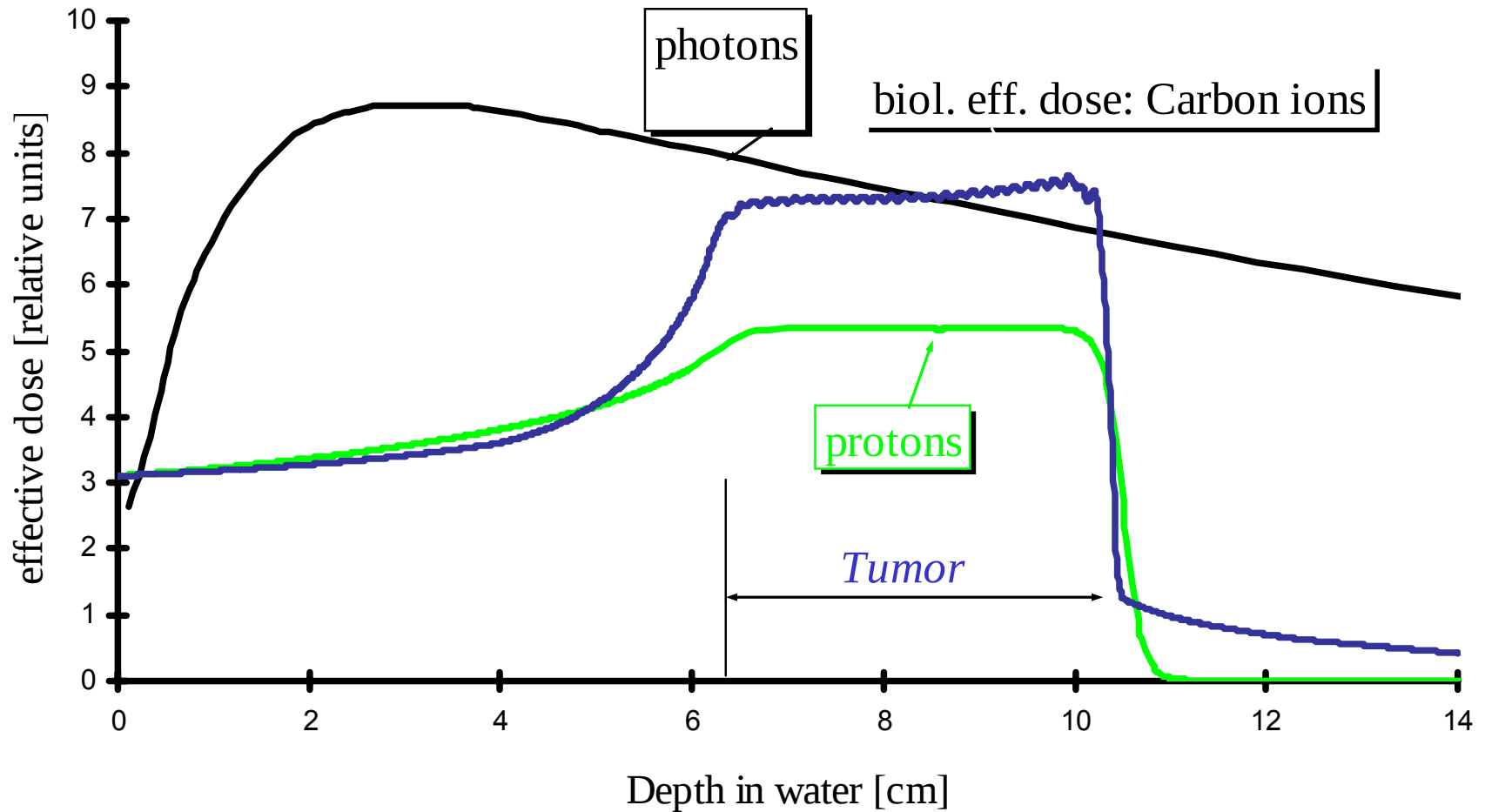
[H. Schworer et al., Nature 439 (2006) 445]

Laserbeschleuniger für die Ionenstrahl Tumorthherapie ?

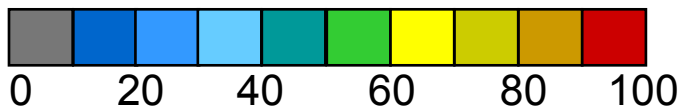
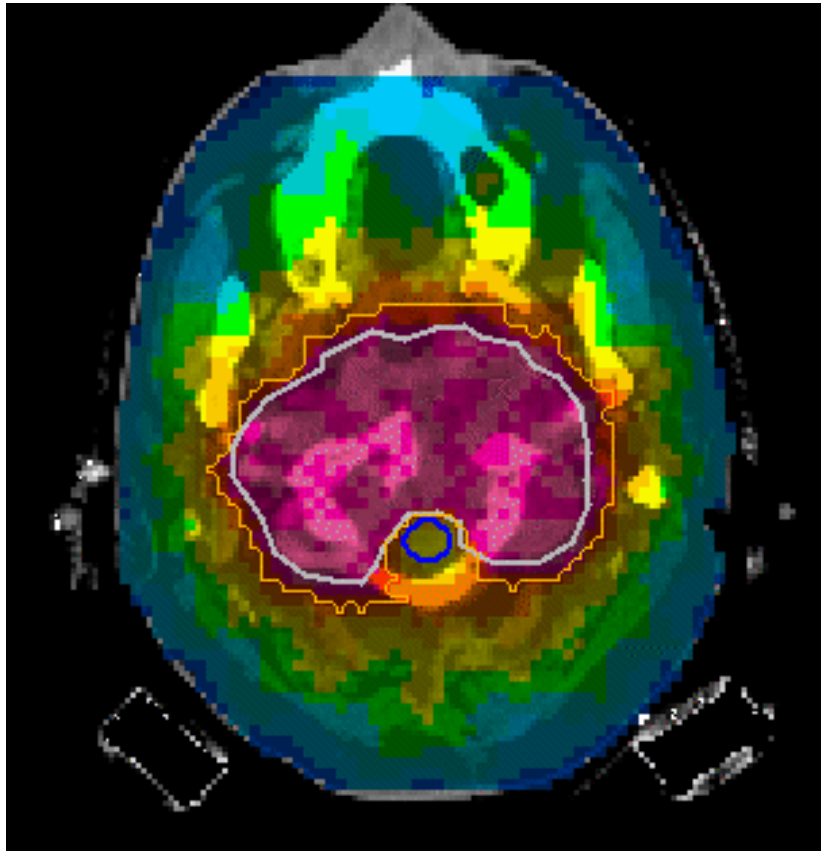


© GSI Darmstadt

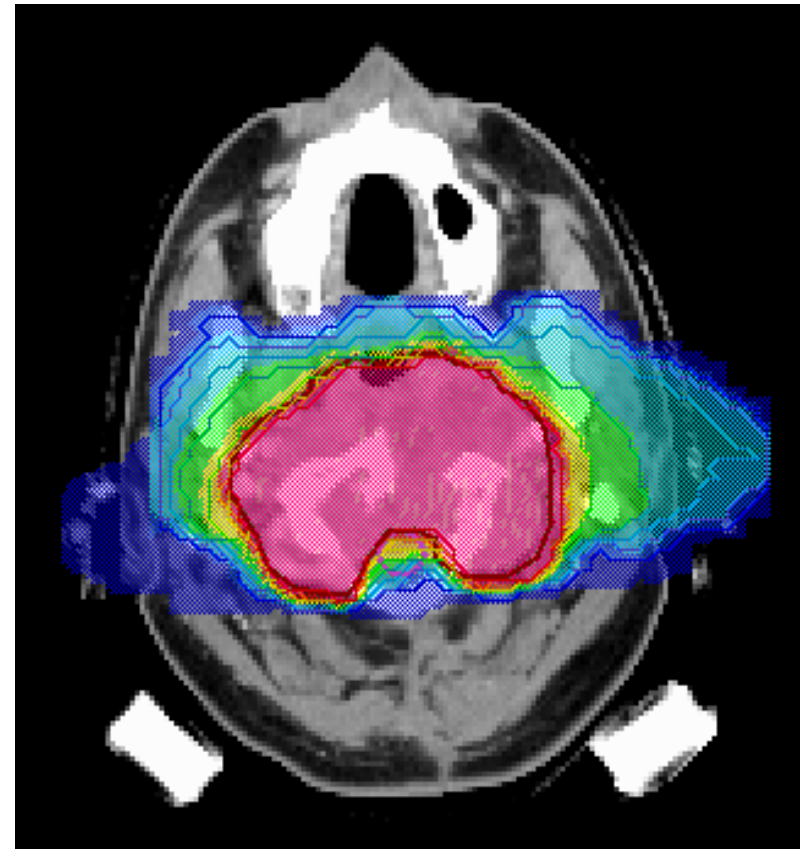
Ion beam therapy – the idea



Photons: 9 fields



carbon-ions: 2 fields



dose in % of the maximum dose

Courtesy O. Jäkel, DKFZ Heidelberg

The GSI / HIT approach



Pictures by courtesy of T. Haberer HIT Heidelberg

requirements for ion beam therapy



Dose: 40-80 Gray distributed over 10-20 fractions

-> 10^9 - 10^{10} ions per fraction and few minutes



Spatial control: mm-scale @ 20cm depth

-> 200 MeV @ percent level control

-> mm pointing (contour shaping)



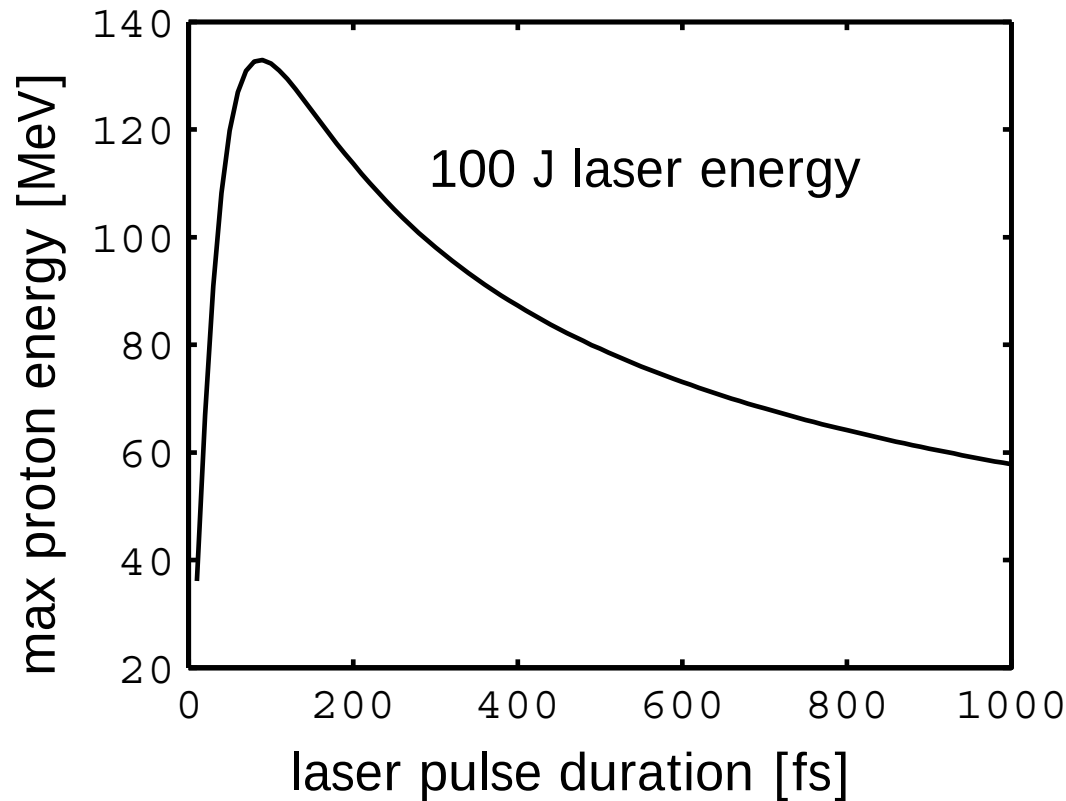
Complete (nondestructive shot-to-shot) monitoring



Clean beam

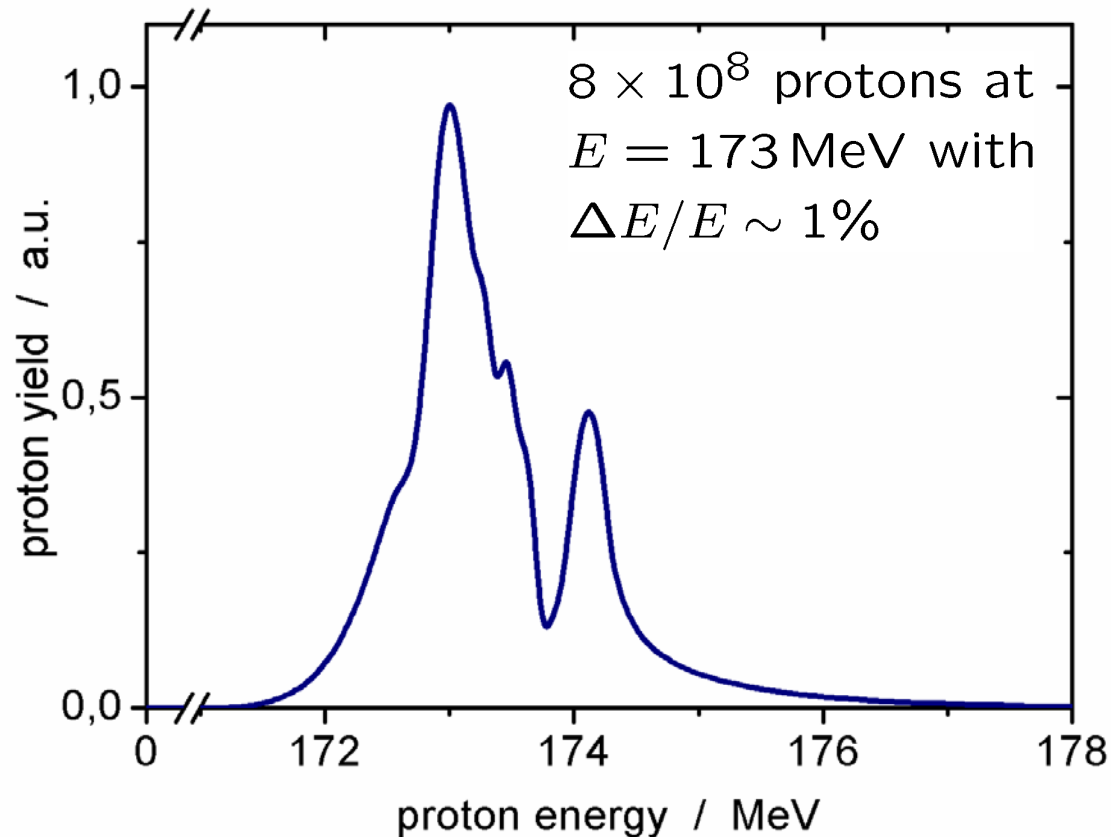
-> 5% position dependent dose control

For each laser system there is an optimal pulse duration for TNSA ion acceleration, which is not necessarily the shortest

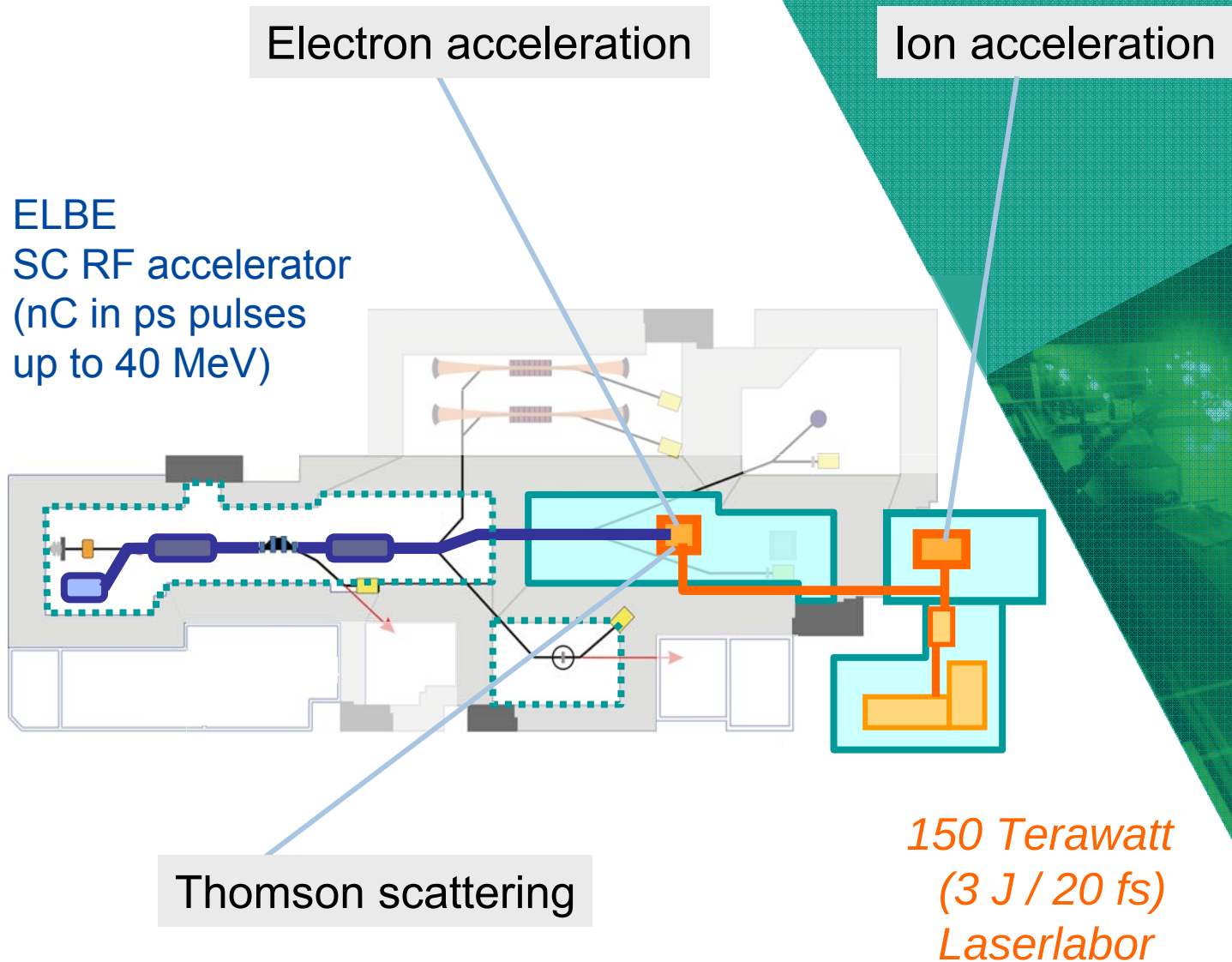


[J. Schreiber, et al, PRL 97 (2006) 045005]

2D-PIC simulation by T. Esirkepov for next laser generation (POLARIS):
100 J in 100 fs, $I_L = 10^{21}$ W/cm², 5 μ m Ti-foil + 0.1 μ m PMMA dot ($\varnothing$ 2.5 μ m)



Aktuelle Situation am FZD

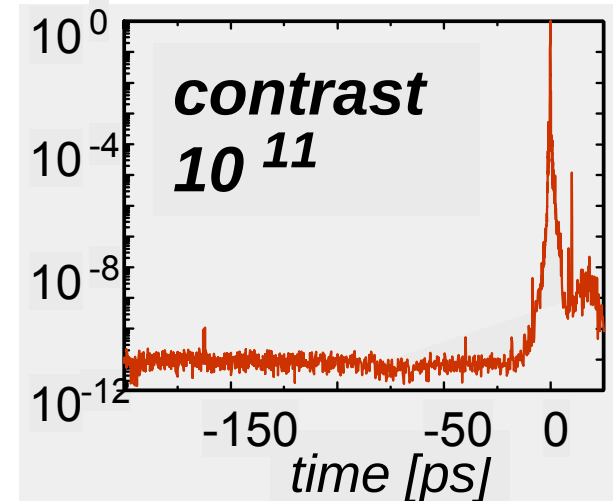
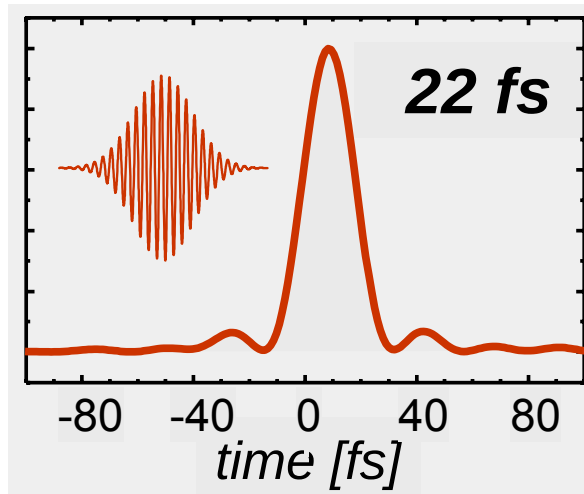
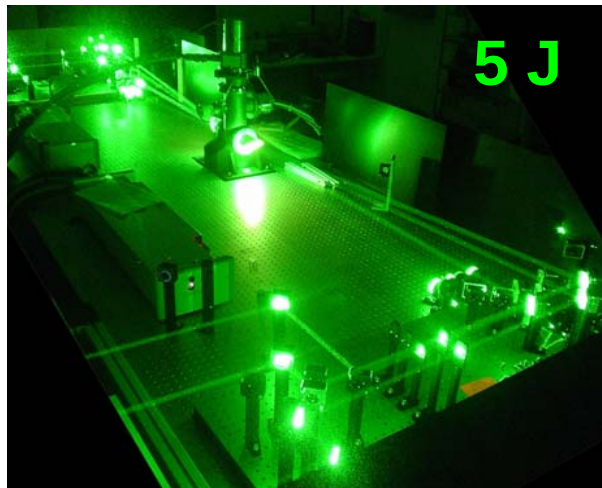
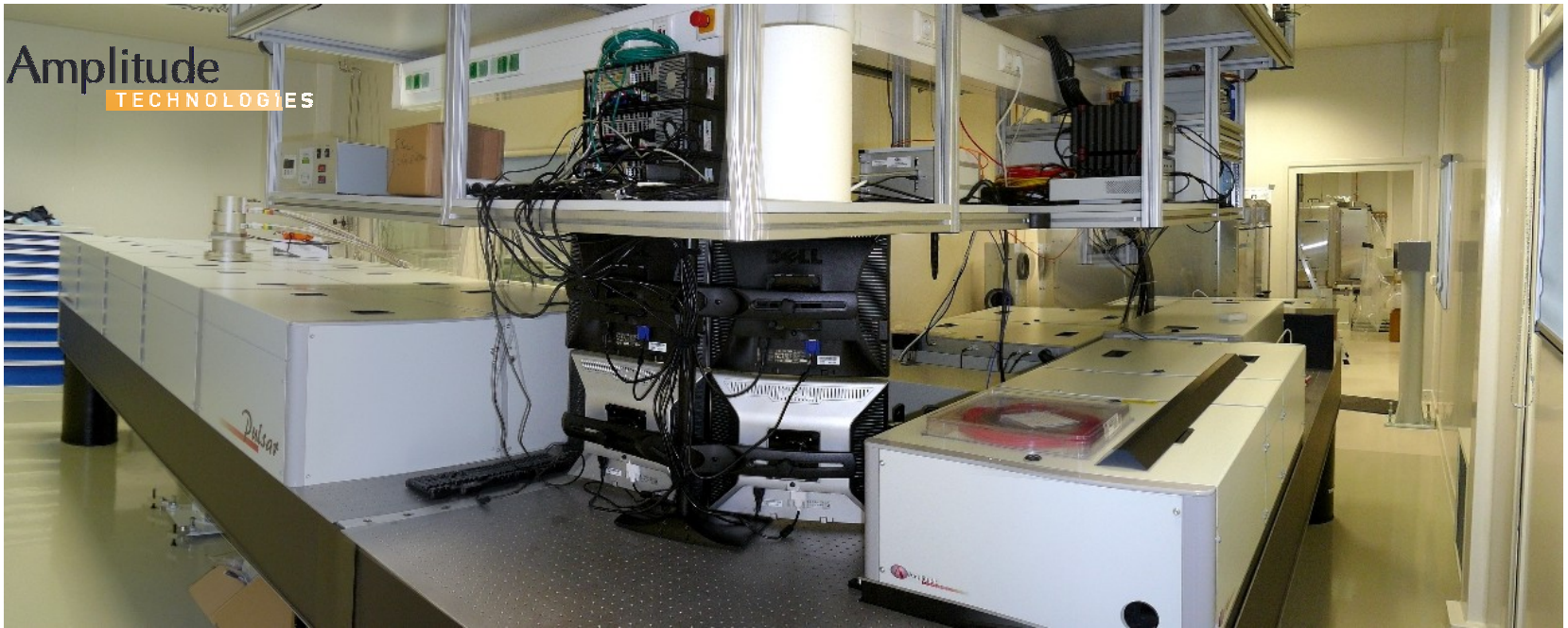








Amplitude
TECHNOLOGIES





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M. Siebold)



K. Ledingham



S. Karsch, J. Osterhoff, A. Popp, Zs. Major, M. Fuchs, B. Marx,
R. Hörlein, K. Schmid, L. Veisz, S. Becker, D. Habs, F. Grüner,
F. Krausz, (T.P. Rowlands-Rees, S.M. Hooker), M. Geissler



H. Schworer, B. Liesfeld, K.-U. Amthor, W. Ziegler, O. Jäckel,
S. Pfotenhauer, S. Podleska, R. Bödefeld, J. Hein, J. Polz, F.
Ronneberger, H.-P. Schlenvoigt, B. Beleites



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oncooptics

