

# Fast synthetic-CT-free dose calculation in MRgRT: A proof-of-concept study in prostate cases

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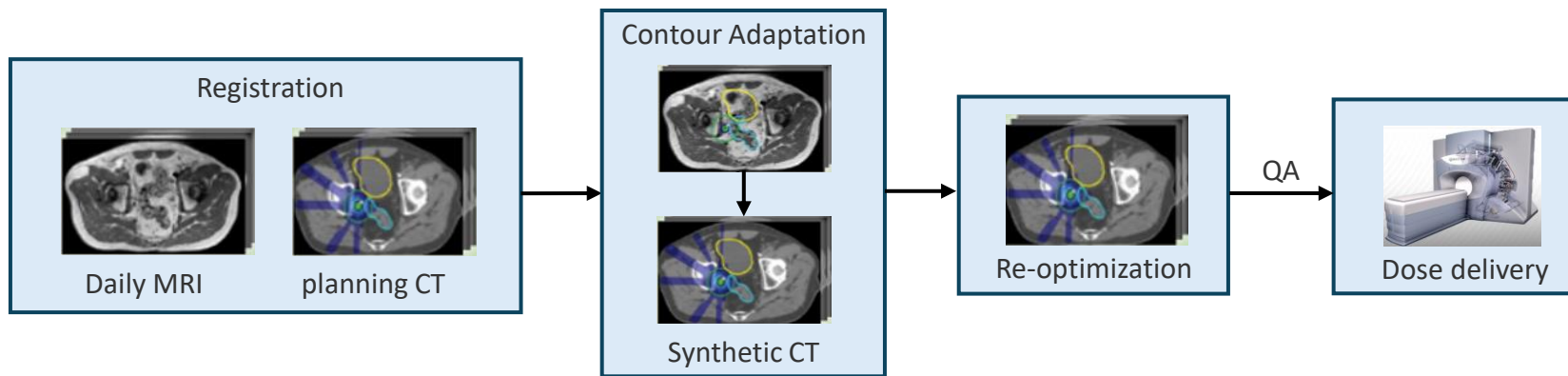
# MR-guided online adaptive photon radiotherapy

## ■ MR-Linac

- High soft-tissue contrast of MR images
- No additional radiation from MR scanning
- Online-replanning due to daily geometry changes



## ■ Online adaptive MR-guided radiotherapy workflow<sup>[1]</sup>

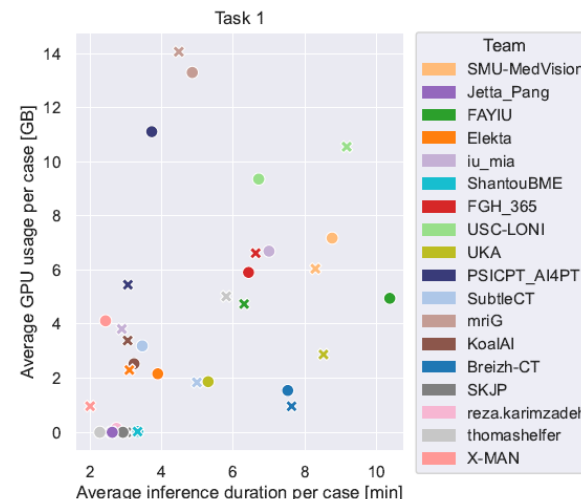
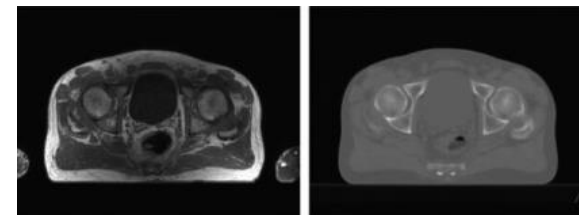


[1] Werensteijn-Honingh AM. Feasibility of stereotactic radiotherapy using a 1.5 T MR-linac. *Radiother Oncol.* 2019.

# AI synthetic CT (sCT) generation

## Deep learning (DL)-based sCT methods for dose calculation

- MRI has no tissue attenuation information required for accurate dose calculations
- Convert MRI to CT-equivalent images:
  - Convolutional neural networks (CNNs)
  - Generative adversarial networks (GANs)
  - Transformers/Diffusion models
- SynthRAD2023 Challenge Report <sup>[2]</sup> :
  - Gamma pass rates (2%/2mm ) > 98% for full photon plans
  - sCT generation time per patient > 2 mins ( $4.0 \pm 4.8$  GB GPU)
- sCT studies in 2025<sup>[3][4]</sup> :
  - sCT generation time per patient: 1-2 min
  - Limitations for real-time plan adaptation



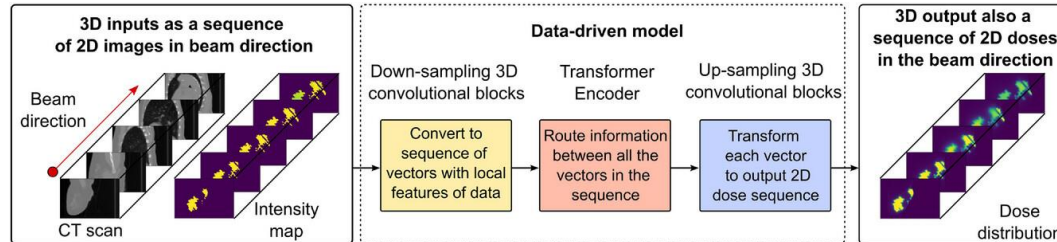
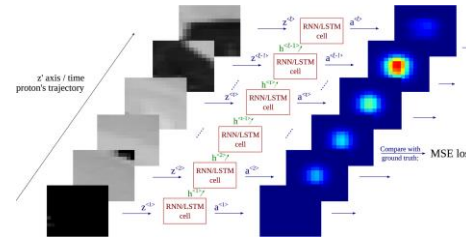
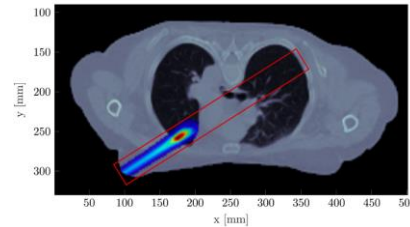
[2] Huijben EMC. Generating synthetic computed tomography for radiotherapy: SynthRAD2023 challenge report. *Med Image Anal.* 2024

[3] Vellini L. A deep learning algorithm to generate synthetic computed tomography images for brain treatments from 0.35 T magnetic resonance imaging. *Physics and Imaging in Radiation Oncology.* 2025

[4] Tulip R. Synthetic Computed Tomography generation using deep-learning for female pelvic radiotherapy planning. *Physics and Imaging in Radiation Oncology.* 2025

# AI dose calculation on CT

- **DL-based dose calculation for acceleration**<sup>[5][6]</sup>
  - **Millisecond speed (~10ms)** with accuracy close to Monte Carlo (MC) simulation
  - Models focus on the individual beamlet from Beam's Eye View (BEV)
  - Treat the extracted 3D cuboid as a sequence of 2D slices traveling from upstream to downstream

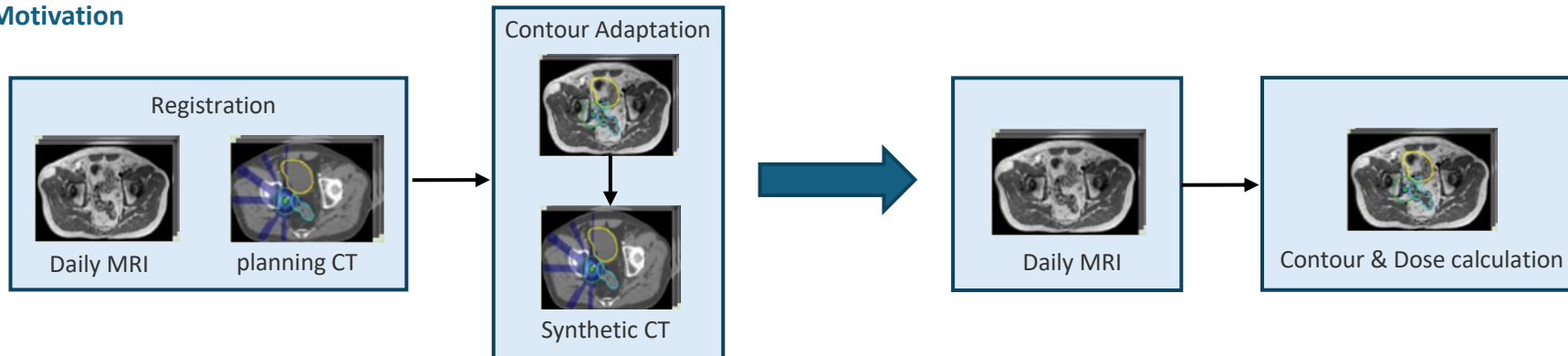


[5] Neishabouri A, Long short-term memory networks for proton dose calculation in highly heterogeneous tissues. *Med Phys.* 2021.

[6] Pastor-Serrano O. Sub-second photon dose prediction via transformer neural networks. *Med Phys.* 2023.

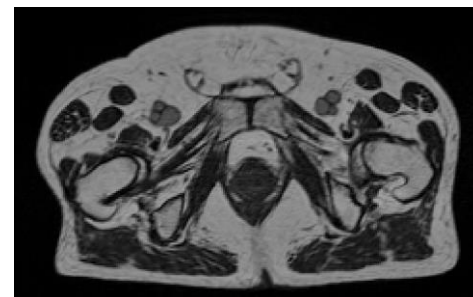
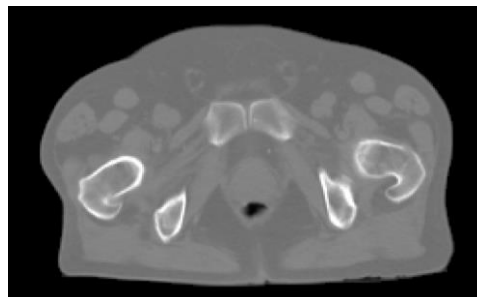
# AI dose calculation directly on MRI?

## ■ Motivation



## ■ Challenges

- Consistency between CT and MRI
- Low signal areas for soft tissues in MRI



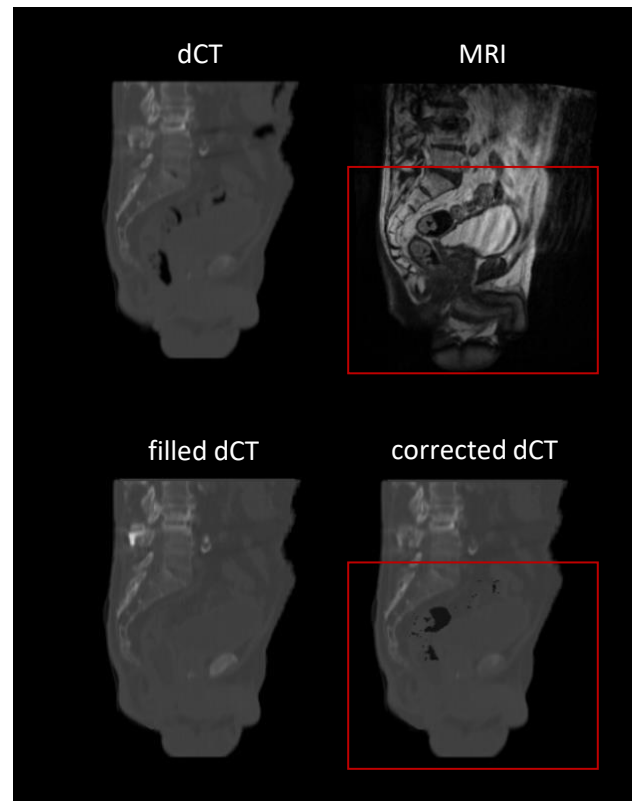
## Methods & Materials

### ■ Patient data (from the 0.35 T MR-Linac at LMU Hospital)

- 34 prostate cancer patients
  - Train : validation : test = 20 : 4 : 10
- MR-CT pairs
  - 0.35 T planning MRI & deformed planning CT (dCT) registered to MRI
  - Deformable registration via an intensity-based algorithm from ViewRay TPS<sup>[7]</sup>
  - Voxel size: 1.5x1.5x1.5 mm<sup>3</sup>

### ■ Air cavity (AC) correction

- Fill original ACs in dCT (threshold < -300 HU)
- Manually AC contour on MRI (red box area)
- Insert contoured AC mask into filled dCT
  - Assigned AC values: -700 HU<sup>[8]</sup>
- Corrected dCT for dose simulation



[7] Acharya S. Online magnetic resonance image guided adaptive radiation therapy: first clinical applications. *International Journal of Radiation Oncology\* Biology\* Physics*. 2016

[8] Lemus OMD, Influence of air mapping errors on the dosimetric accuracy of prostate CBCT-guided online adaptive radiation therapy. *J Appl Clin Med Phys*. 2023

## Methods & Materials

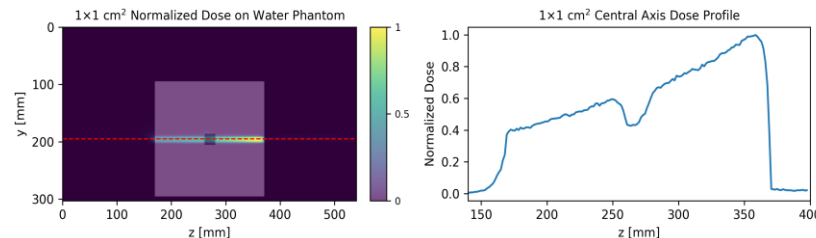
### ■ MC simulation (Geant4 v11.0)

#### ■ Simulation setup:

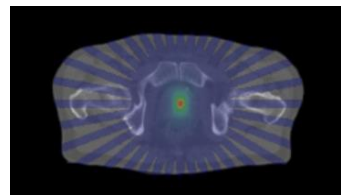
- B field: 0.35 T
- **Idealized parallel photon beam** (a plane source from G4 GPS)
- **Uniform square field size:**  $1 \times 1 \text{ cm}^2$
- Energy spectrum: ELEKTA\_PRECISE\_6MV (from IAEA website)
- Source axis distance: 100 cm

#### ■ Simulation on prostate corrected dCT

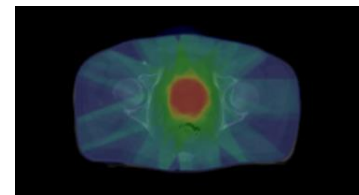
- Train: 10800 beams for 20 patients (5M photons/beam)
- Validation: 2160 beams for 4 patients (50M photons/beam)
- Test (50M photons/beam):
  - 1080 beams (through PTV) for 10 patients
  - Two 9-field intensity-modulated plans
    - Each field ( $9 \times 9 \text{ cm}^2$ ): 81 parallel beams ( $1 \times 1 \text{ cm}^2$ )
    - Beam weights optimized by open-source toolkit pyRadPlan<sup>[9]</sup>



gantry angles  $0^\circ$ – $350^\circ$  ( $\Delta 10^\circ$ )  
with varied isocenters



An optimized 9-field plan  
using  $1 \times 1 \text{ cm}^2$  beams



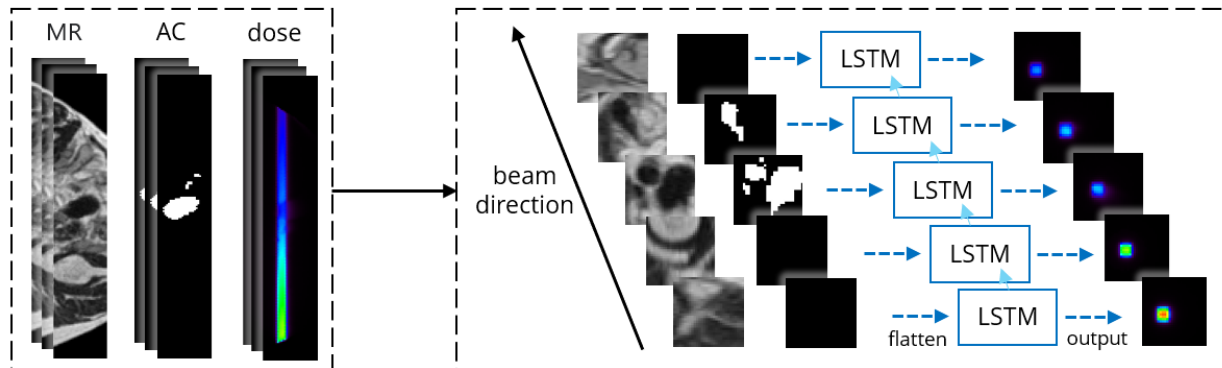
## Methods & Materials

### BEV Cuboid extraction

- 3D dose/MR/AC cuboids
- Cuboid size:  $32 \times 32 \times 200$
- Voxel size:  $2 \times 2 \times 2 \text{ mm}^3$

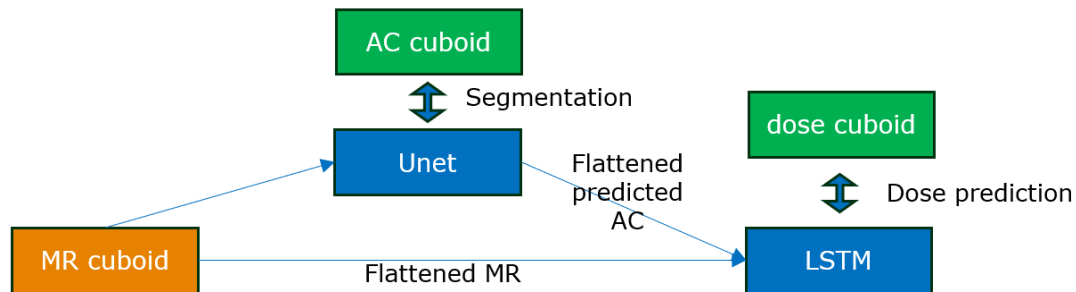
### DL Models:

- LSTM: MR + Manual AC  $\rightarrow$  dose
- 3D Unet: MR  $\rightarrow$  predicted AC



### Training parameters:

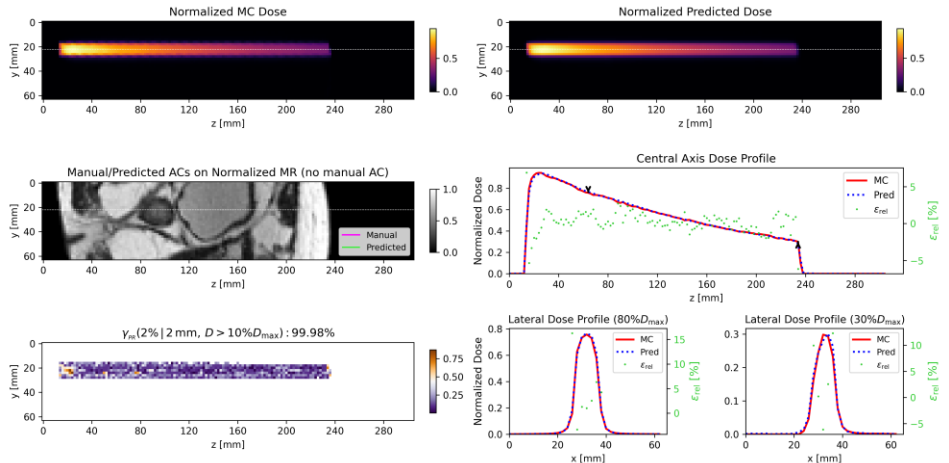
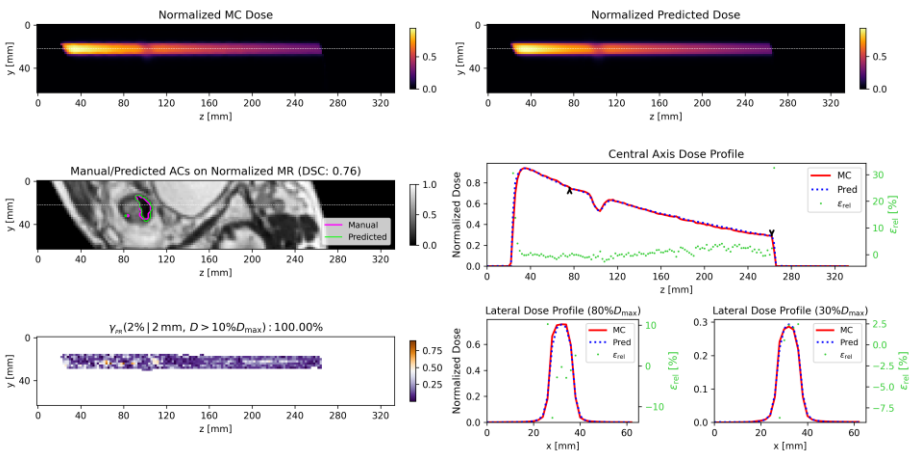
- Loss:
  - LSTM: MSE (Mean Square Error) +  $10 \times \text{AC} \times \text{MSE}$
  - Unet: BCE (Binary Cross Entropy)
- Optimizer: Adam, learning rate:  $10^{-5}$
- Training time: two days (RTX A6000 GPU, 48 GB)





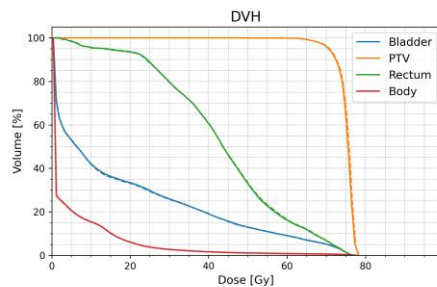
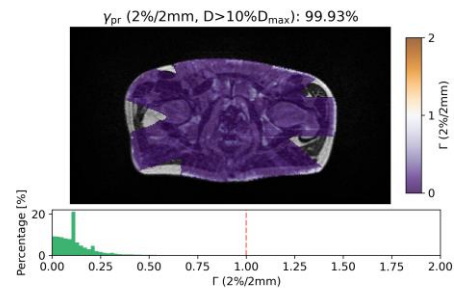
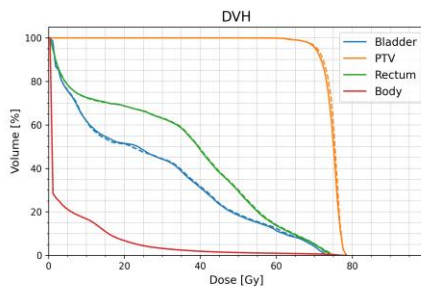
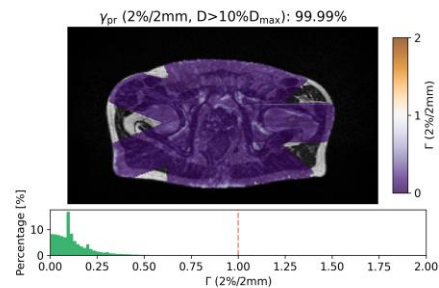
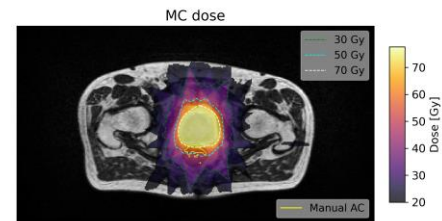
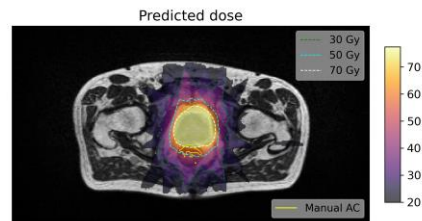
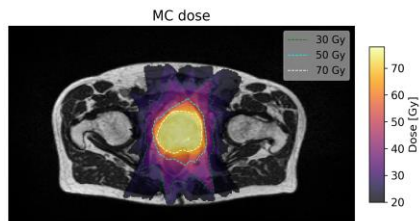
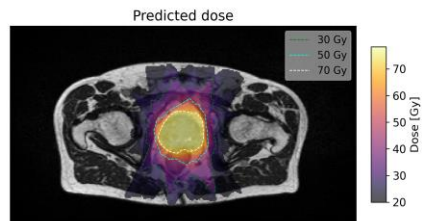
## Results

Total 2%/2mm $\gamma_{pr}$ (mean $\pm$ SD, min)	2%/2mm $\gamma_{pr}$ , dose through AC (mean $\pm$ SD, min)	DSC (mean $\pm$ SD)
99.68 $\pm$ 0.87 (91.93)	99.66 $\pm$ 0.91 (94.45)	0.62 $\pm$ 0.20



## Results

### ■ 9-field plan results



## Results

- Tested on an Intel(R) Xeon(R) Gold 6354 3.00 GHz CPU and an NVIDIA RTX A6000 GPU
- GPU cost: 2GB

Model	Averaged inference time/beam (ms)
LSTM	7
Unet	5
Total	12

## Conclusion

- DL-based photon dose calculation directly on 0.35T MRI is feasible in prostate cases

## Outlook

- Incorporate MLC modelling into MC simulation
- Compare AI dose calculation methods with synthetic CT methods
- More challenging treatment sites, e.g., lung

# Thank you for your attention!



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