



Lisbon, 9-11 November 2009



# OPTIMIZING RADIATION PROTECTION IN MEDICAL PRACTICE

M. GINJAUME\*, X. ORTEGA

*Institute of Energy Technology, Universitat Politècnica de Catalunya (UPC). Spain*



E. CARINOU

*Greek Atomic Energy Commission (GAEC), Greece*



F. VANHAVERE

*Belgian Nuclear Research Centre (SCK•CEN), Belgium*



I. CLAIRAND

*Institut de Radioprotection et de Sûreté Nucléaire (IRSN), France*



G. GUALDRINI

*Radiation Protection Institute – Ente per le Nuove Tecnologie, l'Energia e l'Ambiente (ENEA), Italy*



M. SANS-MERCE

*University Hospital Center Vaudois (UPC), Switzerland*



Other partners:



MIRION TECHNOLOGIES





# Presentation

---

1. Introduction
2. Scope - contents
3. Approach to prepare ORAMED training material
4. Feedback from first experiences in a nuclear medicine department
5. Summary

# 1.1 The use of ionizing radiation in medical applications

---

- A major field of non-natural exposure.
- New developments in medical technology and the increased complexity.
- Different backgrounds, other interests.
- Specific scope to complete existing training initiatives.

## 1.2 Objectives of ORAMED

---

- ORAMED aims at developing methodologies for better assessing and reducing exposures to medical staff in interventional radiology and nuclear medicine.
- The main goal of ORAMED training proposals is to disseminate the new knowledge to medical staff and other stakeholders.
- Four main topics are addressed.

## 2 Scope

---

- o Optimization of radiation protection in **interventional radiology**
- o Development of **practical eye lens dosimetry** in interventional radiology
- o Optimization of the use of **active personal dosimeters in interventional radiology**
- o Improvements in **extremity dosimetry in nuclear medicine**, with special emphasis for **PET** applications and nuclear medicine **therapy**

# 2.1 Interventional radiology and cardiology

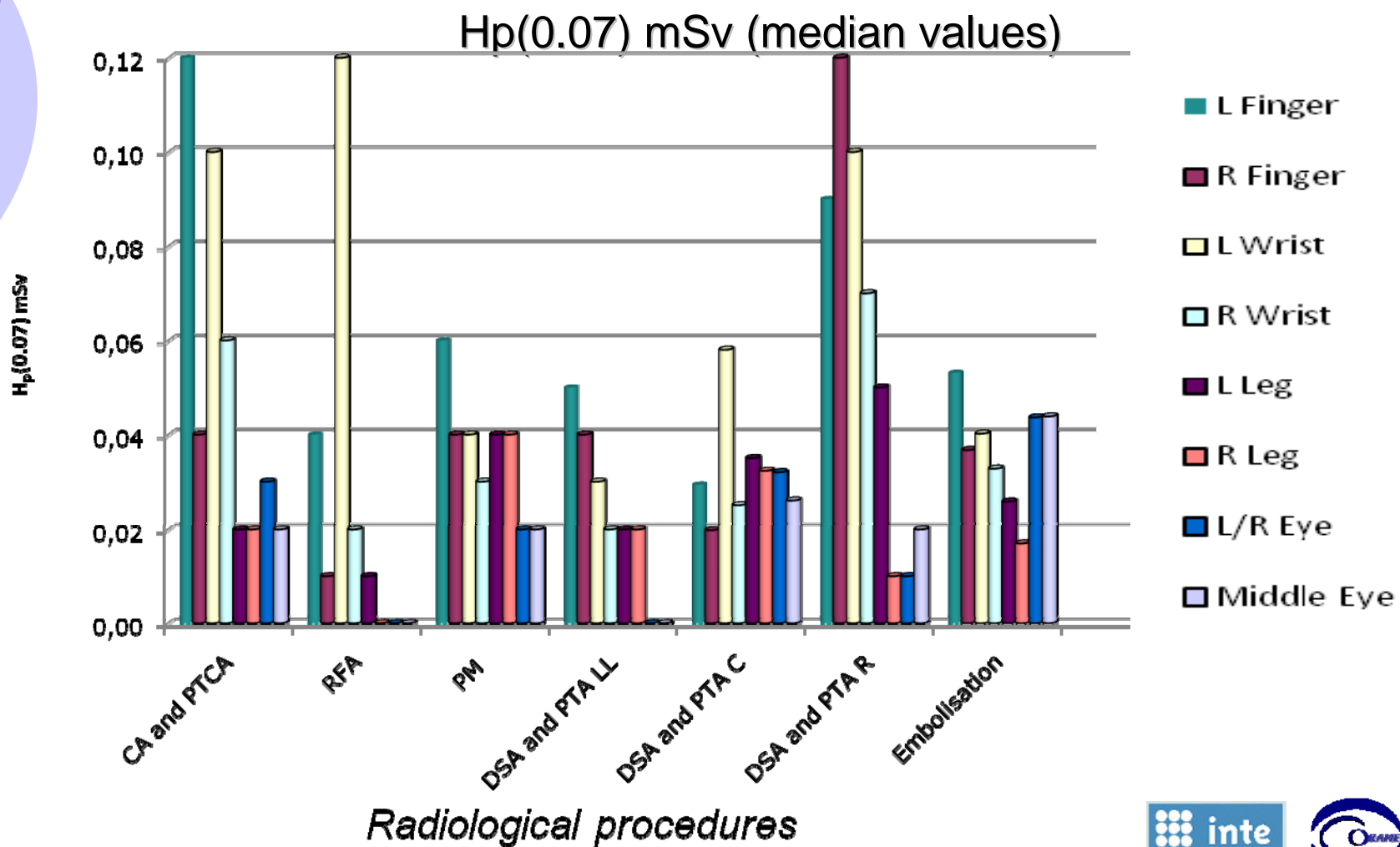
---

Measurement campaign

5 countries  
3 hospitals



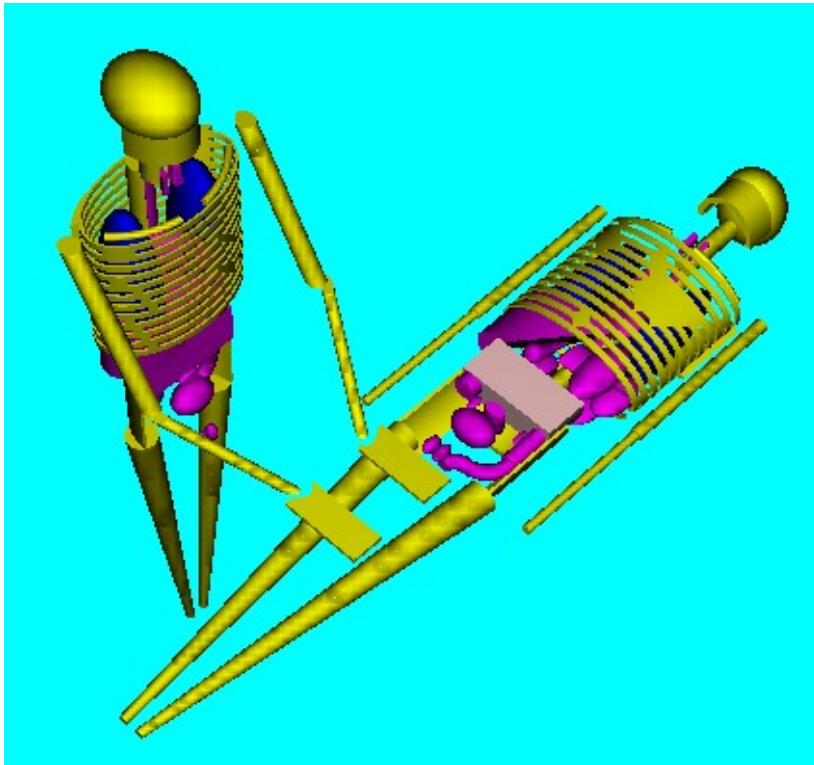
# 2.1 Interventional radiology and cardiology





# 2.1 Interventional radiology and cardiology <sup>2. Scope</sup>

---

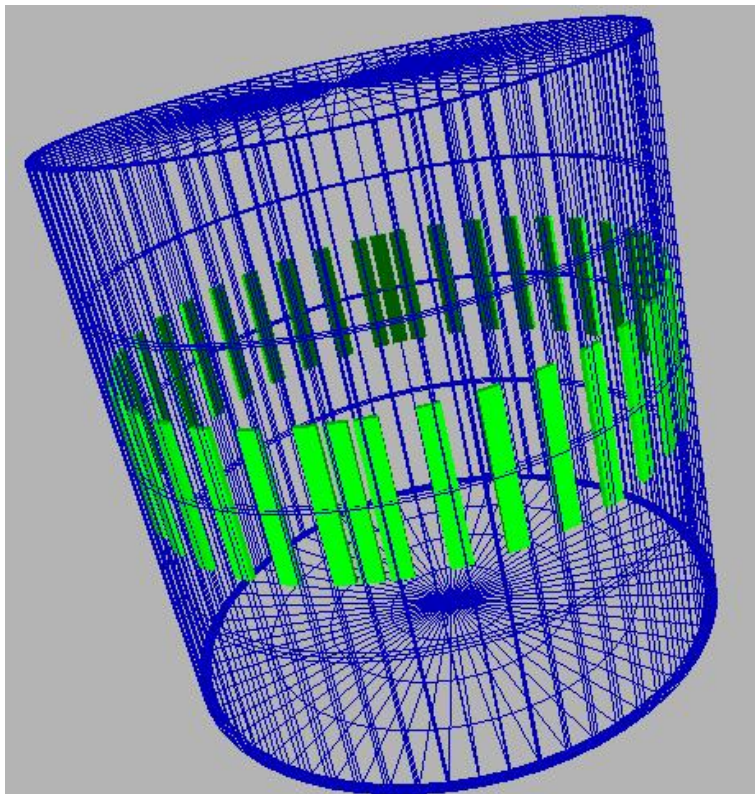


MC Simulations:  
geometry influence  
sensitivity study  
(filtration, kV, shieldings)



## 2.2 Eye-lens dosimetry

---



A Monte Carlo approach to define the operational quantity  $H_p(3)$

## 2.2 Eye-lens dosimetry

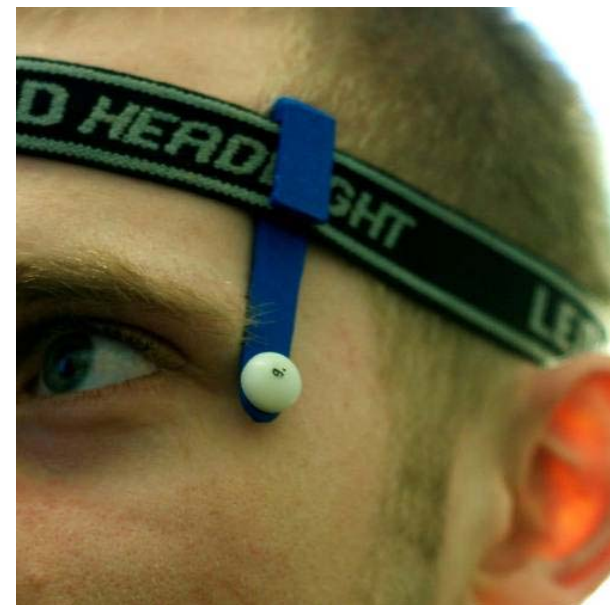
---



Capsule and TL dosimeter  
Pre-prototype



Monte Carlo simulations



Mounted on headband

## 2.3 Active personal dosemeters in IR/IC



MGPi  
DMC 2000XB



Siemens  
EPD Mk2.3



Dosilab  
EDM III



Polimaster  
PM1621A



Rados  
DIS-100



UNFORS  
EDD30

## 2.4 Extremity dosimetry in Nuclear medicine

### **Radiopharmaceutical:**

diagnosis Tc-99m, F-18,

Therapy: Y-90 Zevalin

✓7 countries, 2 Nuclear Medicine Dept.

11 TLDS





# Example of good and bad practices in NM therapy



Bad Practice

Good Practice



Opening the vial

# Example of good and bad practices in NM therapy



Bad Practice

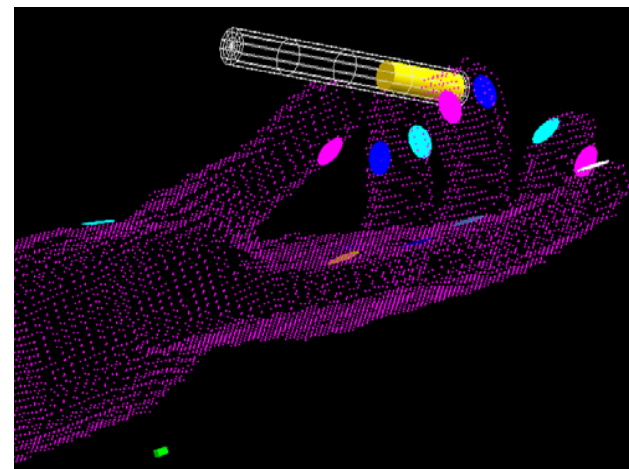
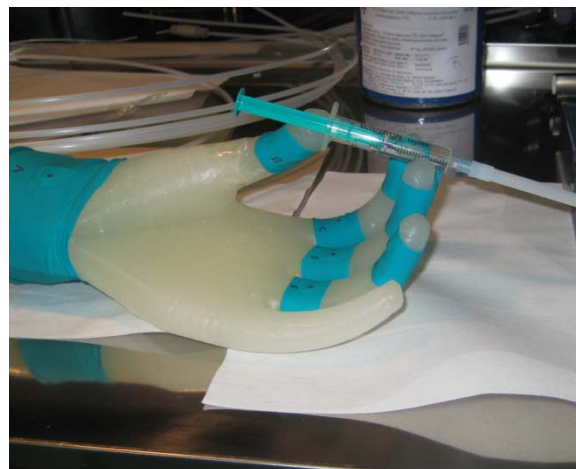
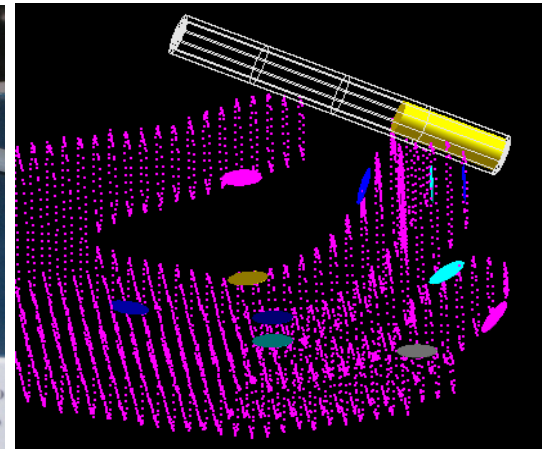
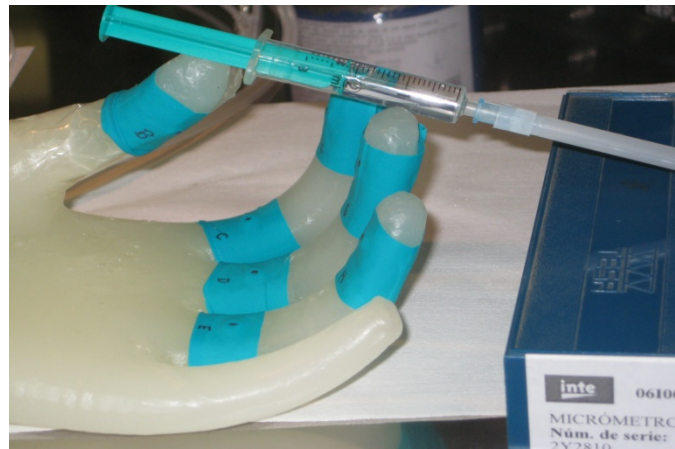


Good Practice



Holding the vial shielding

## 2.4 Nuclear medicine: Validation: comparison measurements with simulations







---

## 3. Training and dissemination:



## 3.1 Main stakeholders

---

- **Medical staff** exposed to ionizing radiation.
- Radiation Protection Officers and Medical Physicists.
- Education and training institutions in radiation protection.
- Personal dosimetry services.
- Calibration laboratories.
- Radiation protection regulators and authorities.
- Instrument manufacturers.

## 3.2 Dissemination channels

---

- Contact with professional societies (EANM, EFOMP, ESR, ...); institutions (IAEA, ICRP); networks (EURADOS, EMAN); Other EURATOM Fp7 projects (MADEIRA).
- Conferences and workshops
- Scientific papers.
- Workshop: Barcelona, 20-22<sup>nd</sup> of January 2011

## 3.3 Training material for medical staff

---

- **Reports on guidelines** about radiation protection measures to reduce staff dose in interventional radiology and nuclear medicine.
- **A video** with “good practices” to optimize radiation protection of medical staff,
- **Transparencies** to be used on training courses.
- **Interactive lectures, e-material.**

## 3.4 Foreseen training activities

---

- On the job training for participating medical staff,
- Workshops and conferences
- Training for “trainers”
- Collaboration with existing courses
- International workshop in January 2011 in Barcelona.

## 4. Feedback from first experiences

---

*Lifelong learning session in a Nuclear Medicine department which had participated in ORAMED measurements (45-min)*

- Practical recommendations, photographs.
- Credibility of the project participants.
- Involvement of responsables.
- Motivation to be the best.
- Open discussion - mother tongue.



## 5. Summary and perspectives

---

- Useful recommendations and guidelines to improve radiation protection practice in interventional radiology, cardiology and nuclear medicine.
- Contacts and collaboration with other organizations to ensure dissemination.
- Pilot training sessions are being organized.
- Feedback from interested parties and regular up-date are foreseen.



For more information, please visit our website:

---

[www.oramed-fp7.eu](http://www.oramed-fp7.eu)

**THANK YOU  
FOR YOUR ATTENTION**

ACKNOWLEDGMENT

The research leading to these results has received funding from the European Atomic Energy Community's Seventh Framework Programme (FP7/2007-2011) under grant agreement n° 211361.

