### The role of HPC technologies today

PediDose A pediatric simulated dosimetry platform for clinical use

## • BIOEMTECH





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EuroCC@Greece / HPC training for consultants of the EEN Athens, 17.06.2022

- > 2003-2009: BSc in Applied Physics (NTUA)
- 2009-2011: MSc in Medical Physics (UPAT)
- 2011-2015: PhD in Medical Physics (UPAT)
- > 2013-Today: Co-founder & Project Director (BIOEMTECH)

Evaluation of Diagnostic, Therapeutic and Dosimetry Protocols in Nuclear Medicine, with the Development of Computational Models and the Use of Monte Carlo Simulations



**BIOEMTECH** develops and offers innovative solutions in

pharmaceutical, medical physics and biotechnology research.

We focus on molecular imaging, dosimetry & biomedical engineering:

Design and construction of low-cost benchtop imaging devices

✓ Performance of preclinical imaging services in our imaging platform

✓ Computational solutions using MC simulations & AI techniques







## **PediDose - Overview**



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Call: FF4EuroHPC Call-1

Start date: June 2021

Duration: 15 months

- BIOEMTECH (Domain expert & End-user) Coordinator SME in the field of Biotechnology
- IKNOWHOW (End-user) SME in the field of Medical Software
- GRNET (HPC expert) Greek National Infrastructures for Research and Technology
- \* **YOTTA** (HPC provider) Subcontractor







## The problem...

- ✓ Nuclear Medicine procedures involve radioactivity.
- ✓ Ionizing radiation deposits energy in human body.
- Absorbed dose from ionizing radiation can lead to cancer.
- ✓ Pediatric patients are higher radiosensitive than adults.
- No way to measure the absorbed dose in each organ of the body(internal dosimetry).
- ✓ Estimations are based on the acquired images.
- Pre-calculations with MC simulations based on standard models.
- Optimization of pediatric dosimetry based on personalized patient's characteristics









## **Current solution...**

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# "Monte Carlo method is a statistical approach to solve deterministic problems and define a specified system using random number generators"

#### **Current Solution**

✓ >40 years MC techniques are applied in Medical Physics.

✓ MC simulations serve as ground truth for dosimetry.

 Calculations of doses per organ from a specific adult phantom (rescaling for pediatrics)



## Our idea...

- Develop a new product clinical software tool – assist clinicians
- Personalized pediatric dosimetry prediction
- Based on a dosimetry
   methodology previously
   developed
   (H2020-MSCA-RISE ERROR project)

			lunclear Medicine Dosimetry	
			IM Dosimetry	
Patient Information:			Colormap : Segmentatio Anatomy	
			Slice: 344 Window: 65535 Slice: 124 Window: 67535	ndow: 65535
Gender:	Female			6.6490
Age:	б			49++01
Total Height:	1.2	m		
Weight:	16	Кд		33#%
BMI:	15	kg/m²		
Height Torso to Top	34	cm	Lorat 🔶 🔶	1.84401
Lung:	13	cm		
Anteroposterior Thickness	8	cm	Lois 14y	o perm
LAT	9	cm	Slice: 124 Window: 65535 [] Slice: 344 Wi	ndow: 65535
Effective Diameter	8.8	cm	Level: 32767	Level: 32767
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l	Jobinic		1040	0,0#*N
			Lois_14y	
			Model Viewer	

- ✓ **BIOEMTECH** currently has 3 preclinical imaging devices (HW department).
- ✓ Extend and grow in medical SW market.
- Exploit expertise and create product based on developed methodologies
- ✓ Autonomous SW Department within the company.
- ✓ **IKH** enhances its medical SW, going beyond imaging to dosimetry.
- No current solution for personalized internal dosimetry (only rough estimations exist).



 Exploiting AI will provide a competitive advantage to existed dosimetry tools (OLINDA/EXM, RadCalc etc).

### Goal

To exploit advanced computational techniques (MC simulations, anthropomorphic computational phantoms and AI techniques) for the development of a realistic, simulated dosimetry database.

#### Outcome

A novel software product (decision support) that will offer clinicians the possibility to assess internal dosimetry and optimize Nuclear Medical (NM) imaging clinical protocols in terms of personalized dosimetry.



## **Experiment Approach (I)**

- Use of data for the biodistribution of specific radiopharmaceuticals
- Population of computational pediatric models
- Dosimetry MC simulations
- Creation of the simulated database
- ML techniques for prediction model
- Software development
- Clinical evaluation of the product
- Commercialization



## **HPC:** The need

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#### Large number & Intensive simulations:

- There is ~28 pediatric models (2-15 years old)
- Test at least 5 most common radiopharmaceuticals
- To have an accurate dosimetry assessment, 4 time points will be used for each radiopharmaceutical.
- ~500 different simulations.
- Machine Learning training models:
  - Training of the models will be tested in HPC to investigate their speed up



## **Experiment Approach (II)**

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#### All the appropriate tools and technology exist

✓ MC tools well validated (high accuracy)

- Advanced computational anthropomorphic models
- HPC resources (highly demanding in computational time)

✓ AI techniques for prediction models









## **Experiment Approach (III)**



✓ Standardized & benchmarked the execution of GATE MC simulations in the HPC

- Completed all the simulations (5 radiopharmaceuticals for a set of 28 pediatric computational models).
- Creation of the database, incorporating the completed simulated datasets.
- ✓ ML predictive models were developed, estimating the absorbed doses for each new patient.

Dissemination activities:
 Presentations, video, poster, logo, conference participation, social media

## Simulated Dosimetry .db

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#### "Creation of the simulated Database"

																			Do	ose Rates (	Gy/Mbq/sec)	– Tc-99m	
								Phantoms	Time(h)												Target or	ans of int	erest
								Phantom 1		Brain	Bladder	Urethra	Heart	Blood	Kidneys	Liver	Lungs	Salivary	Eyes	Intestines	Intestines' Air	Pancreas	Spleen
o. (#)	Age (y)	Gender	Weight (Kg)	Torso to top (cm)	Total height (m)	BMI (kg/m <sup>2</sup> )	Lung (cm)	Phantom 1	0	1.05E-10	1.30E-10	3.87E-10	1.51E-10	1.65E-10	1.14E-09	2.67E-10	1.35E-10	1.03E-10	9.28E-11	1.92E-10	8.24E-11	3.36E-10	3.19E-10
tom-01	14	Male	50.4	91.8	1.7	17.6	11.3	Phantom 1	1.42	1.01E-10	1.92E-10	2.95E-10	1.29E-10	1.42E-10	7.85E-10	1.96E-10	1.38E-10	1.15E-10	1.12E-10	1.58E-10	7.00E-11	2.47E-10	2.33E-10
ntom-02	5	Female	17.7	62.5	1.09	14.9	8.6	Phantom 1	4.11	1.02E-10	2.75E-10	1.91E-10	1.14E-10	1.24E-10	3.35E-10	1.26E-10	1.42E-10	1.20E-10	1.27E-10	1.31E-10	5.11E-11	1.53E-10	1.40E-10
tom-02	6	Male	18.6	65.4	1.05	12.8	8.2	Pliantoini 1	20.2	1.002-10	1.306-10	1.526-10	1.156-10	1.105-10	1.505-10	1.022-10	1.402-10	1.556-10	1.556-10	1.116-10	5.110-11	1.105-10	1.046-10
tom 04	0	Famala	20.64	74	1.10	15.8	0.0	Phantom 2	0	2.56E-10	2.87E-10	2.80E-10	3.17E-10	3.35E-10	2.11E-09	5.19E-10		2.88E-10	2.79E-10	4.05E-10	2.35E-10	5.47E-10	5.24E-10
10m-04	0	Female	29.64	74	1.50	10	9.2	Phantom 2	1.42	2.66E-10	4.80E-10	3.10E-10	2.90E-10	3.06E-10	1.48E-09	4.06E-10		3.51E-10	3.91E-10	3.39E-10	1.98E-10	4.18E-10	4.32E-10
itom-05	8	Male	25.6	/9.6	1.37	13.6	9.6	Phantom 2	4.11	2.81E-10	7.44E-10	4.00E-10	2.72E-10	2.85E-10	6.83E-10	2.92E-10		3.97E-10	4.60E-10	2.80E-10	1.55E-10	2.93E-10	3.24E-10
ntom-06	11	Female	34	83.3	1.49	15.3	9.6	Phantom 2	20.2	2.93E-10	3.15E-10	2.75E-10	2.72E-10	2.80E-10	3.28E-10	2.53E-10		4.15E-10	4.83E-10	2.39E-10	1.34E-10	2.49E-10	2.83E-10
ntom-07	17.2	Male	86.2	49.7	1.83	25.7	12.6					_					_						
ntom-08	15	Male	58	46.6	1.66	21	11.2	Phantom 3	0	2.44E-10	2.50E-10	5.68E-10	2.75E-10	3.32E-10	1.86E-09	4.52E-10	2.70E-10	2.77E-10	2.49E-10	4.21E-10	2.31E-10	6.46E-10	5.11E-10
tom-09	2.1	Female	12.2	24.2	0.86	16.5	7.1	Phantom 3	1.42	2.60E-10	4.15E-10	4.80E-10	2.31E-10	3.08E-10	1.31E-09	3.40E-10	2.81E-10	3.46E-10	3.37E-10	3.41E-10	1.95E-10	4.80E-10	3.87E-10
ntom-10	2.8	Female	14.9	28	0.92	17.6	7.7	Phantom 3	4.11	2.77E-10	6.54E-10	4.10E-10	2.07E-10	2.83E-10	5.99E-10	2.39E-10	2.93E-10	3.94E-10	3.94E-10	2.64E-10	1.57E-10	3.05E-10	2.57E-10
ntom-11	3.3	Female	13.8	28.1	0.93	16	7.2	Phantom 3	20.2	2.89E-10	2.50E-10	2.65E-10	2.0/E-10	2./2E-10	2.8/E-10	2.06E-10	2.99E-10	4.13E-10	4.14E-10	2.11E-10	1.30E-10	2.38E-10	2.08E-10
tom-12	5	Female	19.9	32	1.13	15.6	8.7	Phantom 4	0	1.67E-10	1.99E-10	7.51E-10	2.32E-10	2.32E-10	1.61E-09	3.59E-10	2.09E-10	1.67E-10	1.53E-10	3.06E-10	1.25E-10	5.18E-10	4.46E-10
ntom-13	5.2	Female	15.3	30.8	1.07	13.4	7.4	Phantom 4	1.42	1.74E-10	2.79E-10	5.66E-10	2.05E-10	2.12E-10	1.11E-09	2.71E-10	2.21E-10	1.84E-10	1.94E-10	2.35E-10	1.01E-10	3.74E-10	3.34E-10
ntom-14	13.8	Male	67.4	45.8	1.79	21	12	Phantom 4	4.11	1.83E-10	3.83E-10	3.43E-10	1.84E-10	1.96E-10	4.72E-10	1.85E-10	2.26E-10	2.01E-10	2.22E-10	1.74E-10	7.46E-11	2.22E-10	2.10E-10
tom-15	9.8	Female	40.7	35	1 27	25.2	9.6	Phantom 4	20.2	1.90E-10	2.36E-10	2.33E-10	1.80E-10	1.93E-10	1.96E-10	1.55E-10	2.31E-10	2.11E-10	2.34E-10	1.44E-10	6.21E-11	1.64E-10	1.62E-10
tom 16	10	Fomalo	22	27	1.20	17.1	10					_											
1011-10	10	Feilidie	33	57	1.59	17.1	10	Phantom 5	0	1.88E-10	1.96E-10	1.66E-10	2.16E-10	2.50E-10	1.56E-09	3.57E-10	2.05E-10	1.98E-10	1.94E-10	2.92E-10	1.82E-10	4.42E-10	4.08E-10
								Phantom 5	1.42	2.01E-10	3.21E-10	1.54E-10	1.85E-10	2.25E-10	1.09E-09	2.68E-10	2.16E-10	2.38E-10	2.72E-10	2.64E-10	1.66E-10	3.58E-10	2.98E-10
								Phantom 5	4.11	2.16E-10	4.94E-10	1.76E-10	1.69E-10	2.05E-10	4.99E-10	1.86E-10	2.22E-10	2.68E-10	3.21E-10	2.36E-10	1.46E-10	2.65E-10	1.85E-10
								Phantom 5	20.2	2.25E-10	2.18E-10	1.32E-10	1.71E-10	1.99E-10	2.37E-10	1.59E-10	2.29E-10	2.82E-10	3.37E-10	2.00E-10	1.30E-10	2.27E-10	1.44E-10

## **Final SW product**

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#### "Dosimetry SW and AI model for dosimetry prediction"

- mysql database build in a Spring Boot (Java).
- ML prediction will is based on XGBoost (<8% average differences).</li>
- A draft version of the SW has been developed.

Patient Information	Estimated Dosage
Physical	SADRs in Gy / (MBq * sec)
Gender 🕜 Male 🔵 Female	Bladder
Age	Heart
	Kidneys
Total Height	cm Liver
Weight	Kg Lungs
	Brain
BMI	Kg/m <sup>2</sup> Gallbladder
	Large intestine
Body Part Details	Small intestine
Height Torse to Top	Stomach
Height forso to top	Cili Pancreas
Lung	cm Red marrow
Anteronosterior Thickness	cm Science
	Thymus
LAT	cm Body
Effective Diameter	cm Adrenals
	Testis
	Ovaries
Process	Uterus
Radio Pharmaceutical NM-131I-Nal_p1	Thyroid Thyroid
Activity	Salivary
Activity	0 10 20 30 40 50 60 70 80 90
Calculate	Export PDF

## **Dissemination / Exploitation**

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#### Create awareness!!!

- ✓ 5 general presentations of the experiment
  ✓ 1 video presentation in YouTube
- ✓ 2 abstract conferences MCMA & ECMP 2022
- ✓ Social media presence (LinkedIn Facebook)
- ✓ HDHC cluster's Newsletter announcement
- ✓ Lean canvas KER table completed

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Αναζήτηση Αναζήτηση	
	HUHC - Internal newsletter #4
	Latest news / reports  BIOEMTECH and URNOWHOW joined forces to work in the field of personalized dosimetry through <u>The FF4EuroHPC</u> . FF4EuroHPC is a European initiative that helps facilitate access to supercomputers and all high-performance computing-related technologies for SMEs. You can find more details on the PediDose project <u>here</u>
PetiDose A petilistic simulaned dosimerity platform for clinical use  Periodical provide and the second sec	вюемтесн
diDose, success story Panagiotis Papadimitroulas, July 15th, 2021, FF4EuroHPC event	<ul> <li>Nikos Moschos, Founder &amp; Business Director at <u>PD Neurotechnology</u> gave an interview to the "Business in the Mix" podcast by NBG - You can listen the company's expertise and journey <u>here</u></li> </ul>

## **PediDose: Conference Abstracts**

## OBIOEMTECH

International Conference on Monte Carlo Techniques for Medical Applications, 2022

#### Exploitation of HPC for realistic pediatric dosimetry simulations using GATE

Georgios Savvidis<sup>1</sup>, Konstantinos Chatzipapas<sup>1</sup> and Panagiotis Papadimitroulas<sup>1,\*</sup>

<sup>1</sup>BIOEMTECH, Mesogeion Av. 387, 15343, Athens, Greece

#### Introduction

Noting from the European High-Performance Computing Joint Undertaking Jer Se pagreement No 951745. The JU receives support from the European This project has received fueling from the European High-Performance Computing Joint Undertaking Joint Undertaking (JU) under 95 co agreement No 951745. The JU receives support from the European France, Spain Union's Horizon 2020 research and ruce and the Computer of the State of the Stateo (Experiment 001 - PediDose).e .-4.11h, T=20.2h), and used for the calculation of dose rate at the respective time points. imulations were executed on YOTTA HPC centre, to accelerate their execution, having 112 parallel jobs running. YOTTA HPC consist of compute nodes that each one includes 28-Core Intel Broadwell CPUs and 512GB of memory. The "Dose actor" concept was utilized to measure the deposited energy per voxel, producing 112 dose maps for each case. They were then merged to a single file for minimizing uncertainty, during the calculation of the absorbed dose rate per organ (Figure 1a).

A Machine Learning approach for personalized dosimetry prediction in pediatric Nuclear Medicine applications

#### Purpose

Personalized dosimetry in pediatric patients is of great interest, due to the higher radiosensitivity that children experience in comparison to adults. Artificial Intelligence development n medical applications can serve towards the personalization of dosimetry protocols. The objective of this study is the design, development and evaluation of a machine



For the development of a dosimetry predictive model, the effectiveness of several machine learning regression algorithms (Random Forest Regressor, XGBoost Regressor, Gradient Boosting Regressor, Decision Tree Regressor, Support Vector Regressor, Ridge Regression & Linear Regression) has been investigated. The ML models were trained using 9 anthropometric features as input: Age, Gender, Weight, Height, BMI, Anteroposterior thickness, Lateral width, Lung size and Effective diameter. Single and multiple organ inputoutput models, based on each ML algorithm, were trained, and validated using the Leave One Out cross validation method.



#### **Challenges of the experiment**

#### ➢<u>ML prediction models:</u>

Larger simulated datasets (more pediatric computational models) are expected to provide more accurate results.

#### Development of the SW dosimetry tool:

Incorporate the developments in the current commercial software tool <sup>®</sup>evorad (by IKH).

### IPs definition between SMEs.

## Clinical evaluation of the SW: Bota version of the SW is expected to be clinical.

Beta version of the SW is expected to be clinically evaluated.



➢ Integrate the ML model in the SW (GUI).

> Optimize the SW, incorporating visualisation features.

> Develop a beta version of the SW to be tested in clinical environment

> Definition of the IPs and a common Marketing Strategy plan.

- ✓ New collaboration between 2 SMEs with a common goal to release a new product.
- Complementary expertise of the partners to achieve the main objective.
   BIOEMTECH: Exploits its expertise in the field adopting HPC methodologies within the company and enters in the medical SW market.
  - **GRNET**: HPC expert supports the execution of the simulations
  - **IKH**: Enhances its customers, extending to the market of dosimetry SW.
- ✓ HPC is expected to be a daily procedure for BIOEMTECH's activities including other applications.
- ✓ Staff was trained on HPC procedures.
- ✓ FF4EuroHPC provided the opportunity for new collaborations. Other proposals have been submitted by the partners.

## **General Thoughts - Discussion**

- Years of thoughts for an in-house cluster
- HPC could be considered a daily tool for business
  - Developers' daily use (like cloud services Share files etc.)
  - Many tasks could benefit from HPC (clinical data processing, patients' management, personalized medicine, simulations, AI)
- Industrial access on HPC???
  - Funds? National support resources?
  - o Training internal/external expert?
- HPC providers' awareness
  - Attract interest of SMEs / Start-ups
  - Enhance quality of results and daily workflow
  - Training & Dissemination activities (create awareness)
  - o Industry should identify its needs!
  - Different sectors of applications





The role of HPC technologies today

PediDose A pediatric simulated dosimetry platform for clinical use

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# Thank you



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