

# Improvement of radiation dosimetry: contribution of the IAEA

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**IAEA**

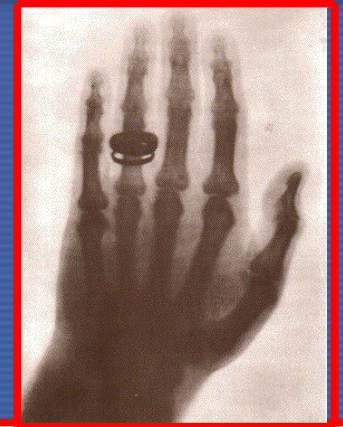
International Atomic Energy Agency

# Radiation and Our Life (1)

## FACTS

Each year

- Over 4 billion diagnostic medical radiation procedures
- 50 million nuclear medicine procedures
- 5.5 million patients treated with radiotherapy



# Radiation and Our Life (2)

## Radiotherapy

- Approximately one in three people will develop cancer during his/her lifetime
- Up to 60% of all cancer cases receive radiation therapy as part of their treatment



# Accuracy is vital in radiotherapy

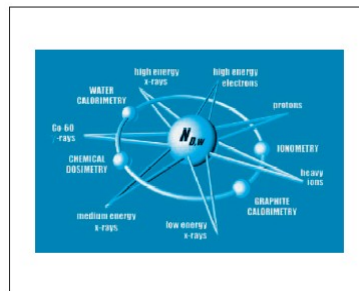
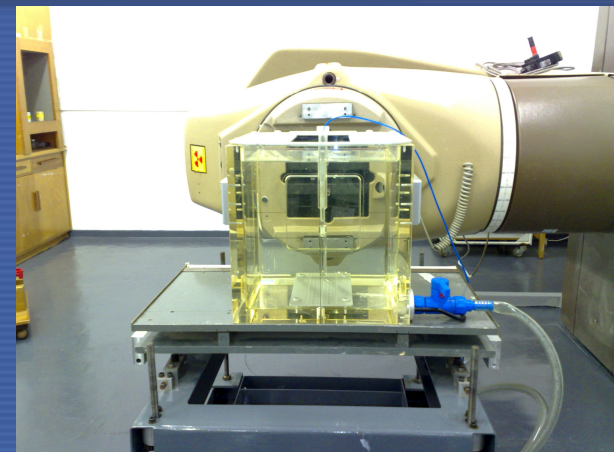
- The major risk in treatment delivery is incorrect beam calibration
- Incorrect beam calibration would result in a systematic error that could affect hundreds or thousands of patients



**I do not mind lying, but I hate inaccuracy** by Samuel Butler

# Key issues... to achieve accuracy

- Well trained staff
- Use of suitable and calibrated instruments for dosimetry measurements (S.I traceability)
- Use of standardized dosimetry protocol
- Participation in independent dosimetry audits to verify beam calibration
- Well maintained equipment



TECHNICAL REPORTS SERIES No. 398

**Absorbed Dose Determination in  
External Beam Radiotherapy**  
An International Code of Practice for Dosimetry  
Based on Standards of Absorbed Dose to Water

Sponsored by the IAEA, WHO, PAHO and ESTRO

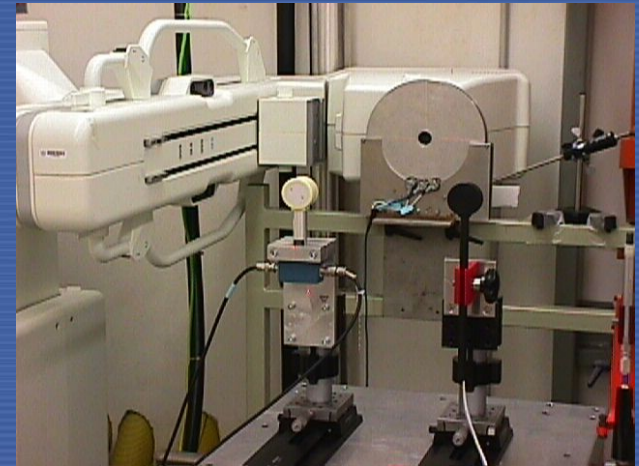


INTERNATIONAL ATOMIC ENERGY AGENCY, VIENNA, 2000



# Accuracy is important in imaging

- Diagnostic radiology: 20% for absolute risk assessment, 7% for deterministic effects and potential risk of paediatric examinations)
- Nuclear Medicine: 5-10% for therapy



# Why the IAEA??





# The IAEA: A unique mandate in the UN system

“The Agency shall seek to accelerate and enlarge the contribution of atomic energy to peace, **health** and prosperity throughout the world”



*Article II of the Statutes  
of IAEA*



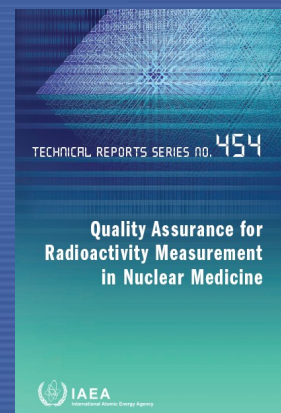
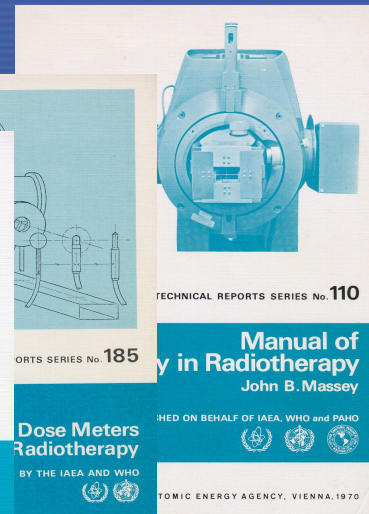
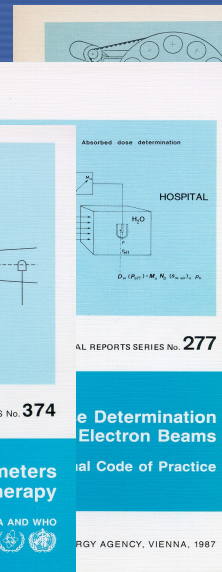
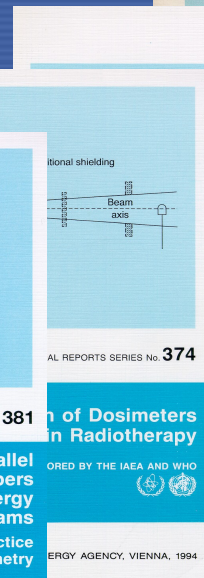
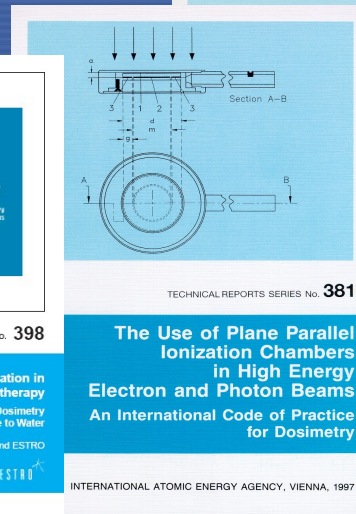
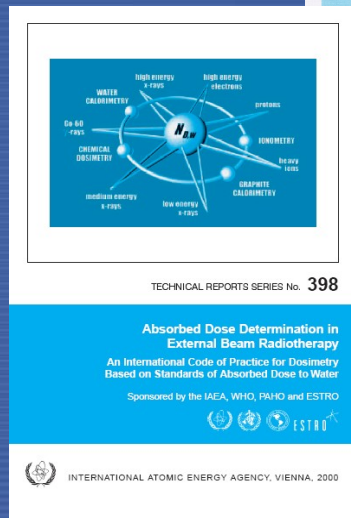
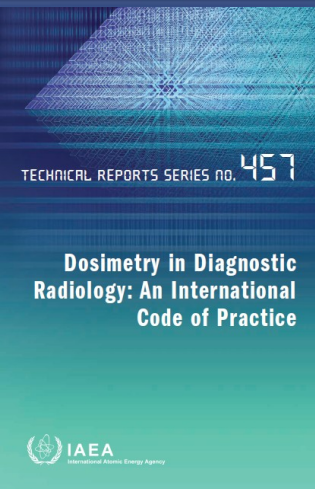


# IAEA contribution

- Contribute to harmonization of dosimetry worldwide through the publication of international dosimetry protocols
- Provide calibration, dose auditing and comparison services (to countries...)
- Support the establishment of national calibration laboratories (Tech Coop)
- Capacity building in radiation dosimetry

# Harmonization of radiation dosimetry

## Worldwide standardization

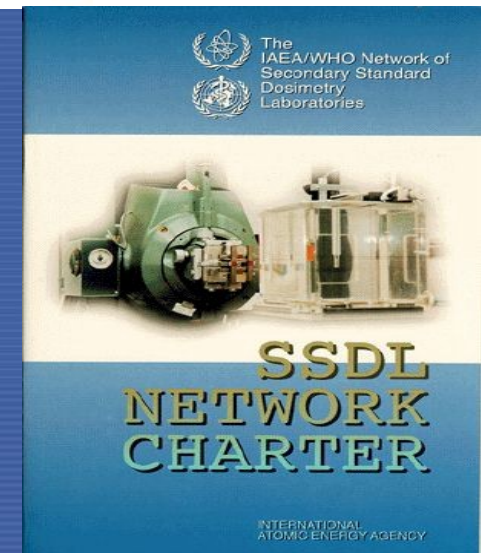
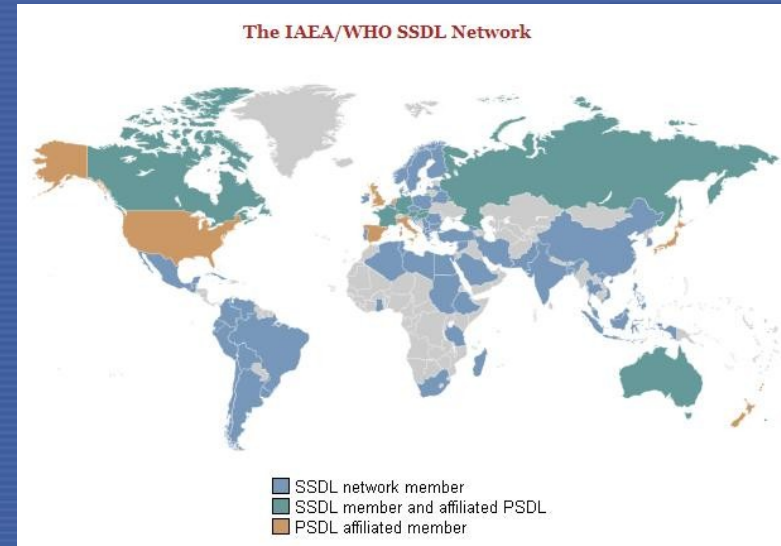


30 years

# IAEA/WHO SSDL Network of SSDLs

## Members

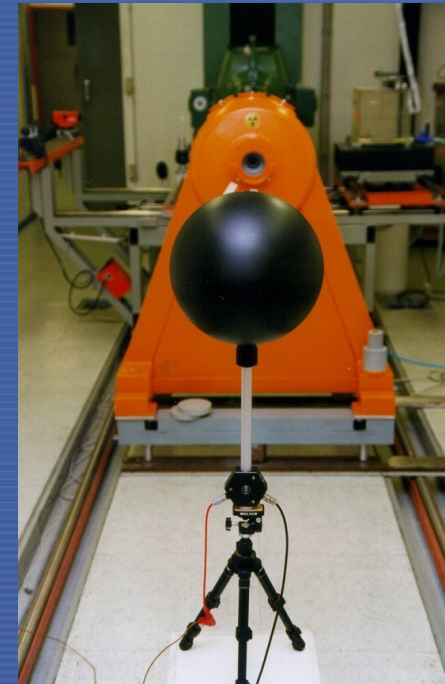
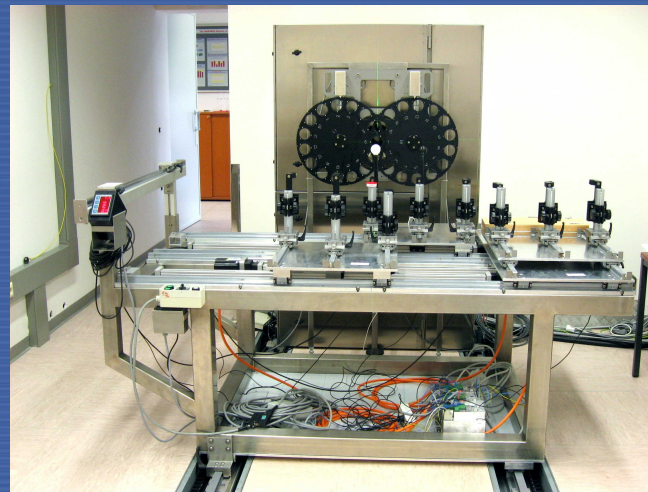
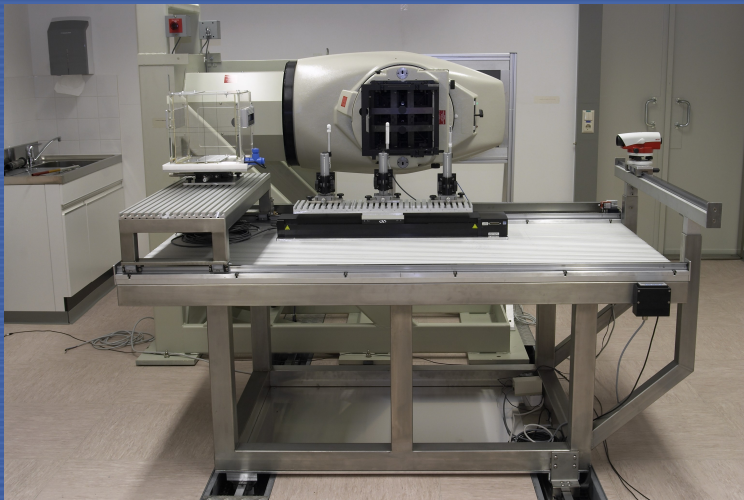
- 80 laboratories and 6 SSDL organizations in 67 countries
- 15 Primary Standards Dosimetry Laboratories (PSDLs)
- Five collaborating international organizations: ICRU, IOMP, IOML, IEC and BIPM
- Advisory committee (SSC)





# IAEA/WHO SSDL Network of SSDLs

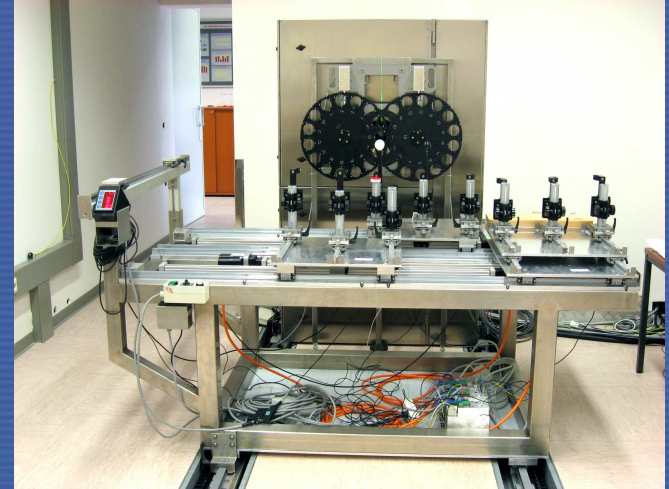
The IAEA laboratory is the central laboratory for the IAEA/WHO Network of SSDLs





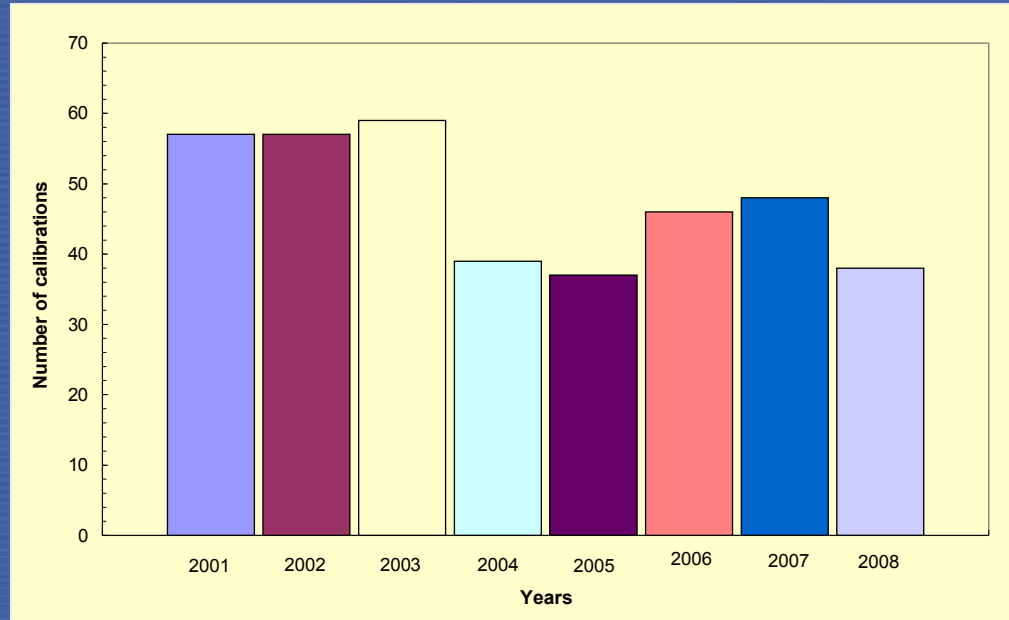
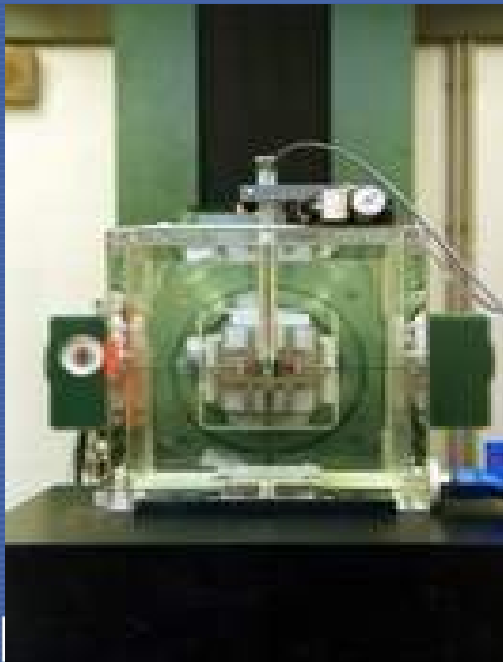
# IAEA Calibration services-SSDLs

- IAEA CMCs approved by the JCRB and listed in the BIPM KCDB
- Services provided to IAEA/WHO SSDL members, especially to those who are not signatories of the meter convention



# IAEA Calibration services-SSDLs

- Radiotherapy: 63%
- Rad. protec: 29%
- Mammography: 8%

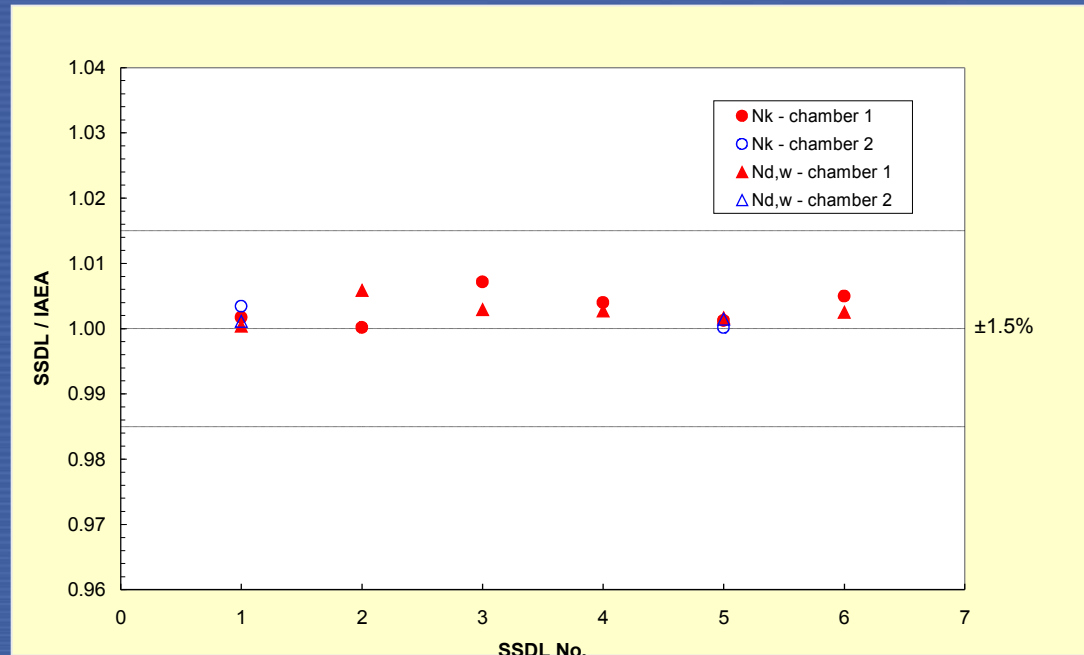


- 79% for SSDLs
- 21% for hospitals



# IAEA Comparison services-SSDLs

Proficiency testing for SSDLs to check their calibration procedures



It is possible to use of IAEA-SSDLs comparisons to support SSDLs' CMCs

# IAEA support in Africa (1)

Supported the establishment of 12 SSDLs:  
(Algeria, Tunisia, Morocco, Libya, Sudan,  
Ethiopia, Kenya, Ghana, Nigeria, Madagascar,  
Tanzania, C.I (new)

- Supply of standardized calibration equipment
- Support for equipment commissioning
- Training of staff

Limited support to SSDL of SAF and Egypt

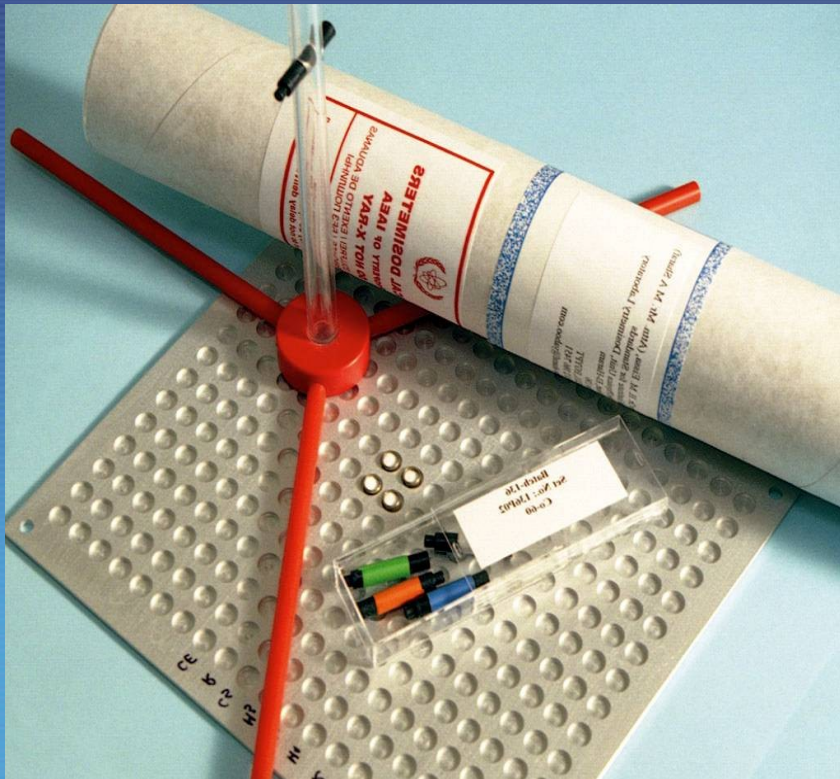


# IAEA support in Africa (2)

- Organization of workshops on radiation dosimetry
- Organization of a pilot dosimetry comparison in X-ray dosimetry



# Support to end-users in dosimetry: Verification of clinical beam calibration Through the IAEA/WHO postal TLD service

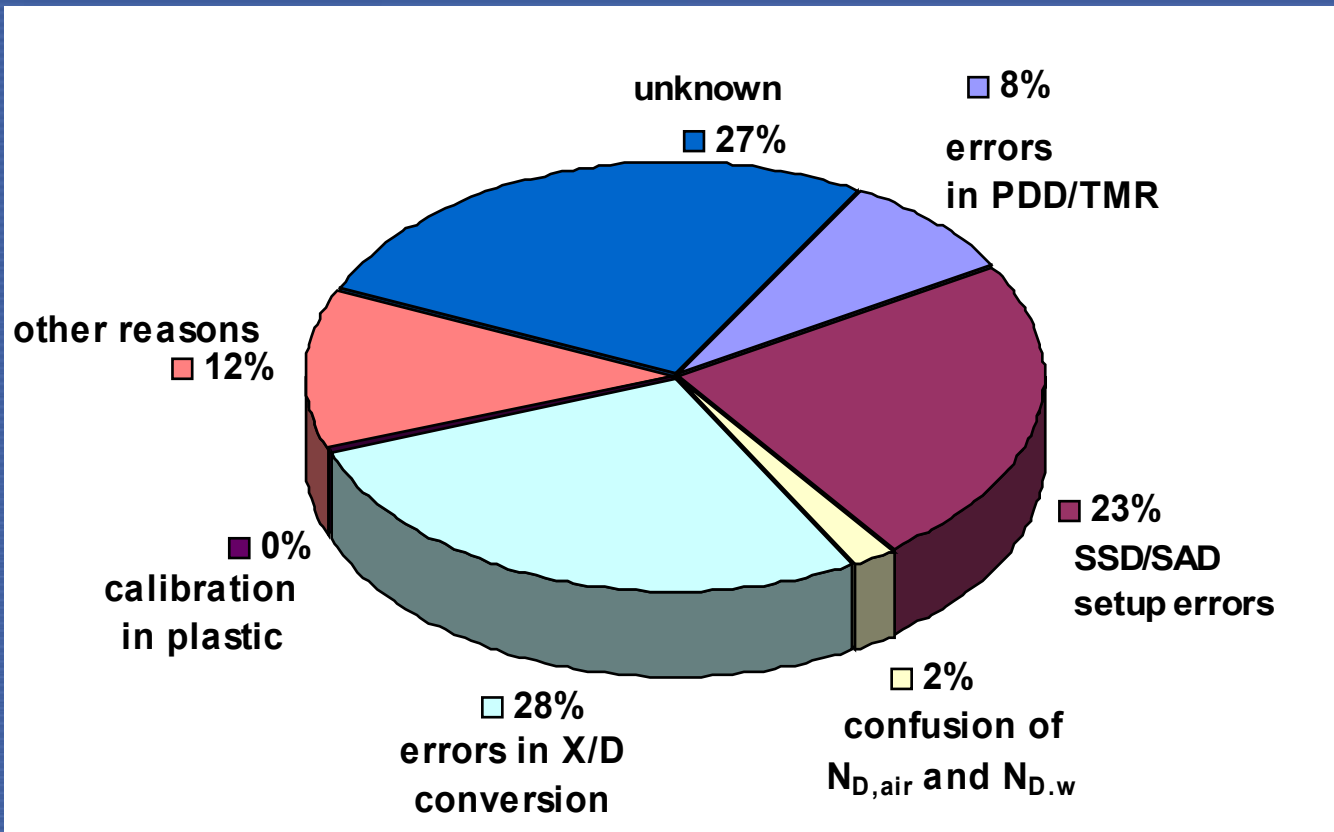


# TLD Postal dosimetry service for hospitals

- Objective: to ensure the quality of the entire dosimetric chain for radiotherapy to the end-user level in Member States by means of independent verification (via TLD)
- Discrepancies are followed up, if necessary by an expert visit
- About 500 beams per year
- Includes Co-60 and High Energy X-ray beams since 1991
- Coordinated with national audit networks and assisted by BIPM, PSDLs and other reference institutions

# IAEA/WHO TLD Postal dosimetry service for hospitals

## Dosimetry audits for hospitals



It is possible  
to store the  
mind with a  
million facts  
and still be  
entirely  
uneducated  
Alec Bourne

**Main source of dosimetry mistakes: lack of training of staff**



# Challenges

- Existing SSDLs to be linked to metrology org.
- Lack of well established SSDLs with internationally recognized capabilities
- Lack of established capabilities in critical health areas (diagnostic radiology, brachytherapy, nuclear medicine)
- Sustainability of some existing SSDLs
- Lack of qualified experts in dosimetry
- Lack of financial support

Where we cannot invent, we may at least improve

Charles Caleb Colton

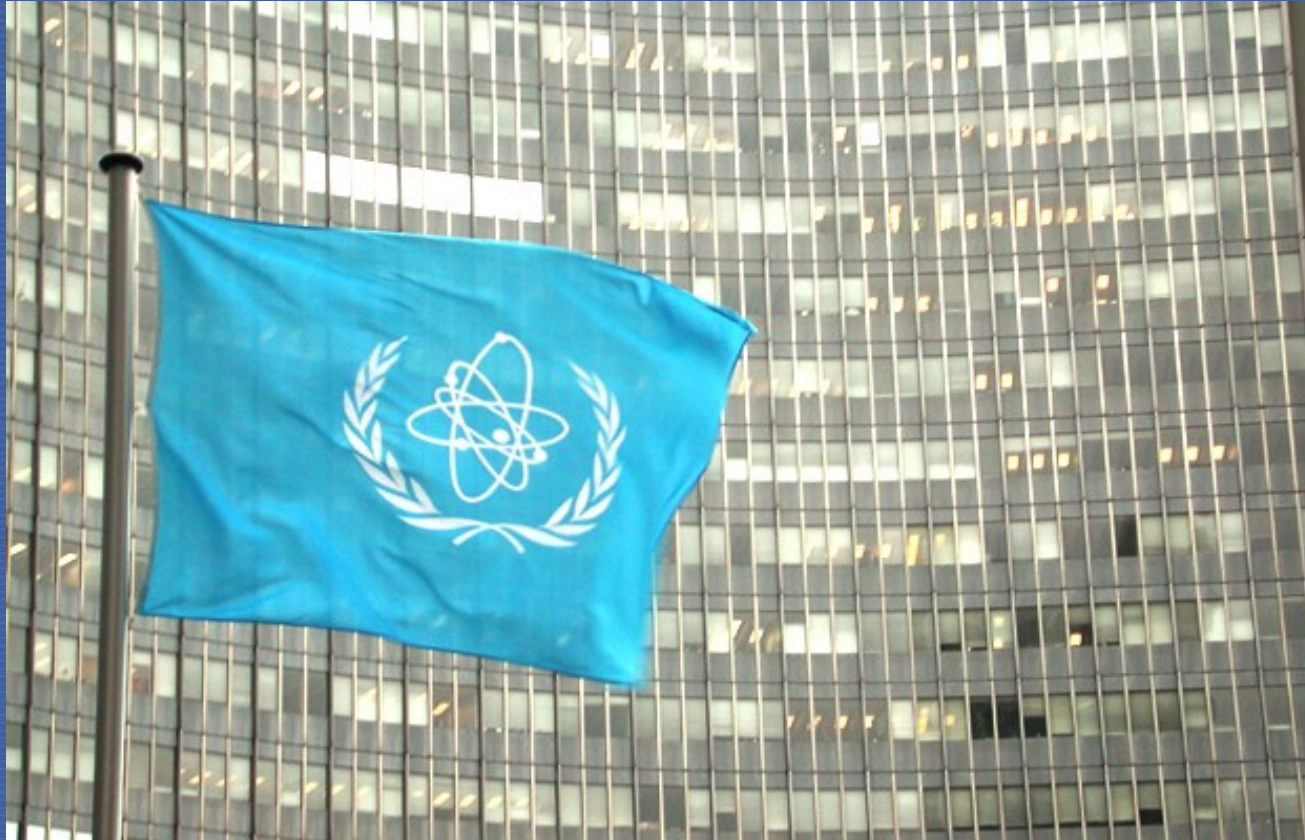
# Acknowledgements



## Dosimetry & Medical Radiation Physics Section



# Thank You



***IAEA...atoms for peace***



***IAEA...atoms for health***

IAEA/WHO SSDL Network, AFRIMETS