

# Medical Physics Calculations in the Cloud: A New Paradigm for Clinical Computing



Roy W. Keyes<sup>1</sup>, Christian Romano<sup>2</sup>, Dorian Arnold<sup>2</sup>, and Shuang (Sean) Luan<sup>2</sup>  
University of New Mexico, Albuquerque, New Mexico, USA

1: Department of Physics and Astronomy; 2: Department of Computer Science

Download this poster with your phone!



Web: [cs.unm.edu/~compmed/PTG](http://cs.unm.edu/~compmed/PTG)

**The big picture:** Cloud computing can enable routine clinical use of calculations currently deemed too resource intensive, in particular Monte Carlo. This is possible because cloud services offer on-demand, scalable, virtual clusters with pay-as-you-go pricing as cheap as  $\approx \$0.029/(\text{GHz}\cdot\text{hr})$ <sup>[1]</sup>.

**What is cloud computing?:** Cloud computing is a term loosely used to describe services offering CPU time, storage, and software over the Internet. The most common features of cloud computing services are transparent, on-demand scaling of resources and pay-as-you-go pricing. Companies offering cloud services include Google, Amazon, and Microsoft.

## The Cloud Calculation Process

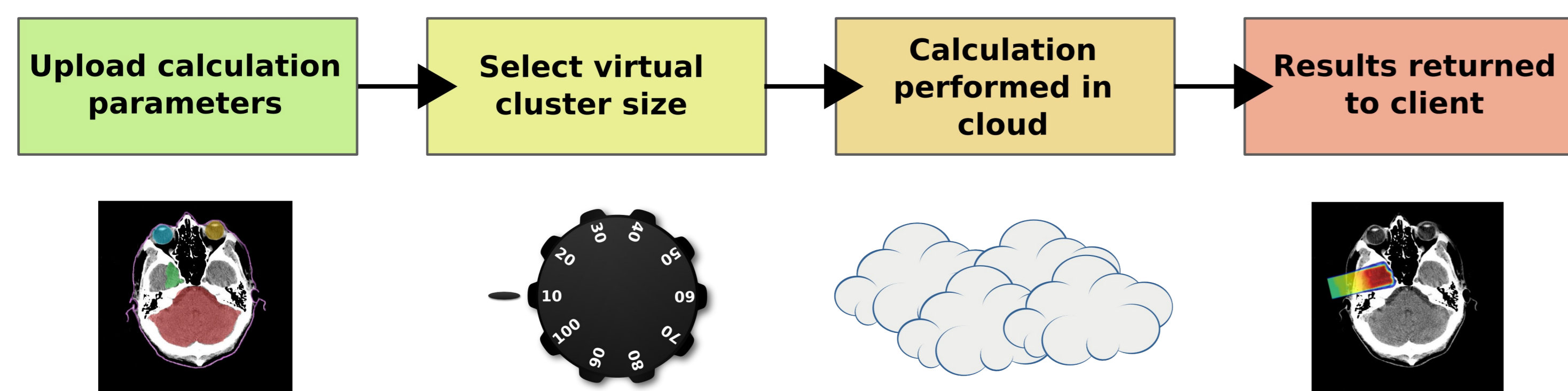


Figure 1: The cloud calculation process from the end user perspective.

**Demonstrating cloud computing for medical physics:** We designed and implemented a custom distributed processing framework for Monte Carlo, called *flsshd*, using Amazon's EC2 service as a virtual cluster. Figures 1 & 2 illustrate the steps in the calculation process.

**flsshd = Python + bash + boto + Fluka + SSH**



**Proof-of-concept calculations** included depth-dose curves of <sup>60</sup>Co, 10 MeV electrons, and proton beams of various energies, as well as a simple broad-beam proton plan with a CT-based voxel phantom<sup>[3]</sup>.

**Performance tests** were made on virtual clusters of 1-200 nodes by calculating 75 and 200 MeV proton depth-dose profiles. The calculation times were modeled with Equation 1. The fit was excellent ( $R^2 > 0.99999$ ). The linear overhead term,  $\beta n$ , is thought to be due to the serial nature of how *flsshd* initializes the calculations on the nodes. A parallelized version is being implemented and a subsequent performance increase is expected.

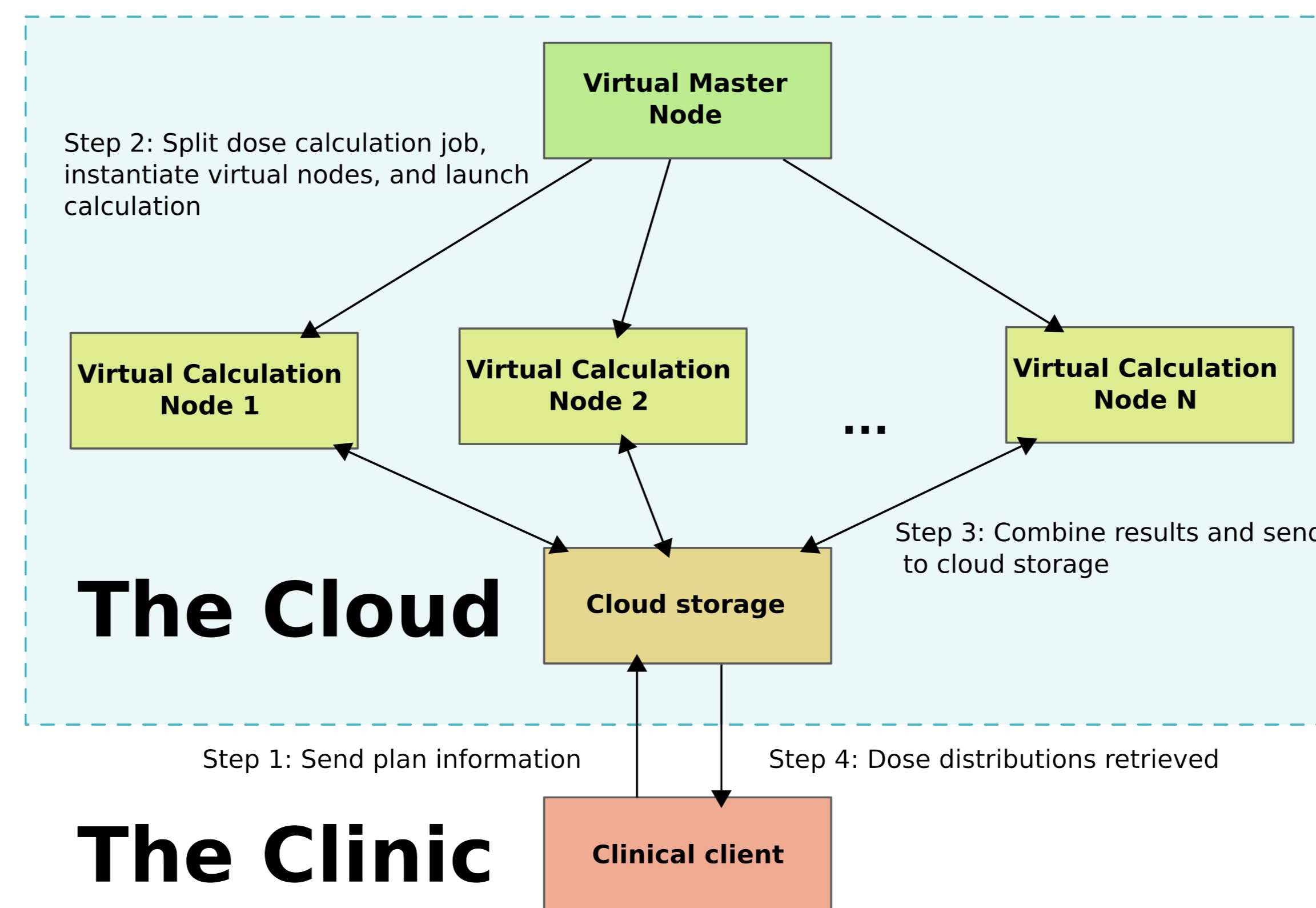


Figure 2: The cloud computing model for clinical calculations.

$$T(n) = \frac{\alpha p}{n} + \beta n + \gamma$$

Equation 1

T	Total run time
n	Number of nodes
p	Number of primary particles
$\alpha$	Calculation time per primary
$\beta$	Linear overhead per node
$\gamma$	Constant overhead

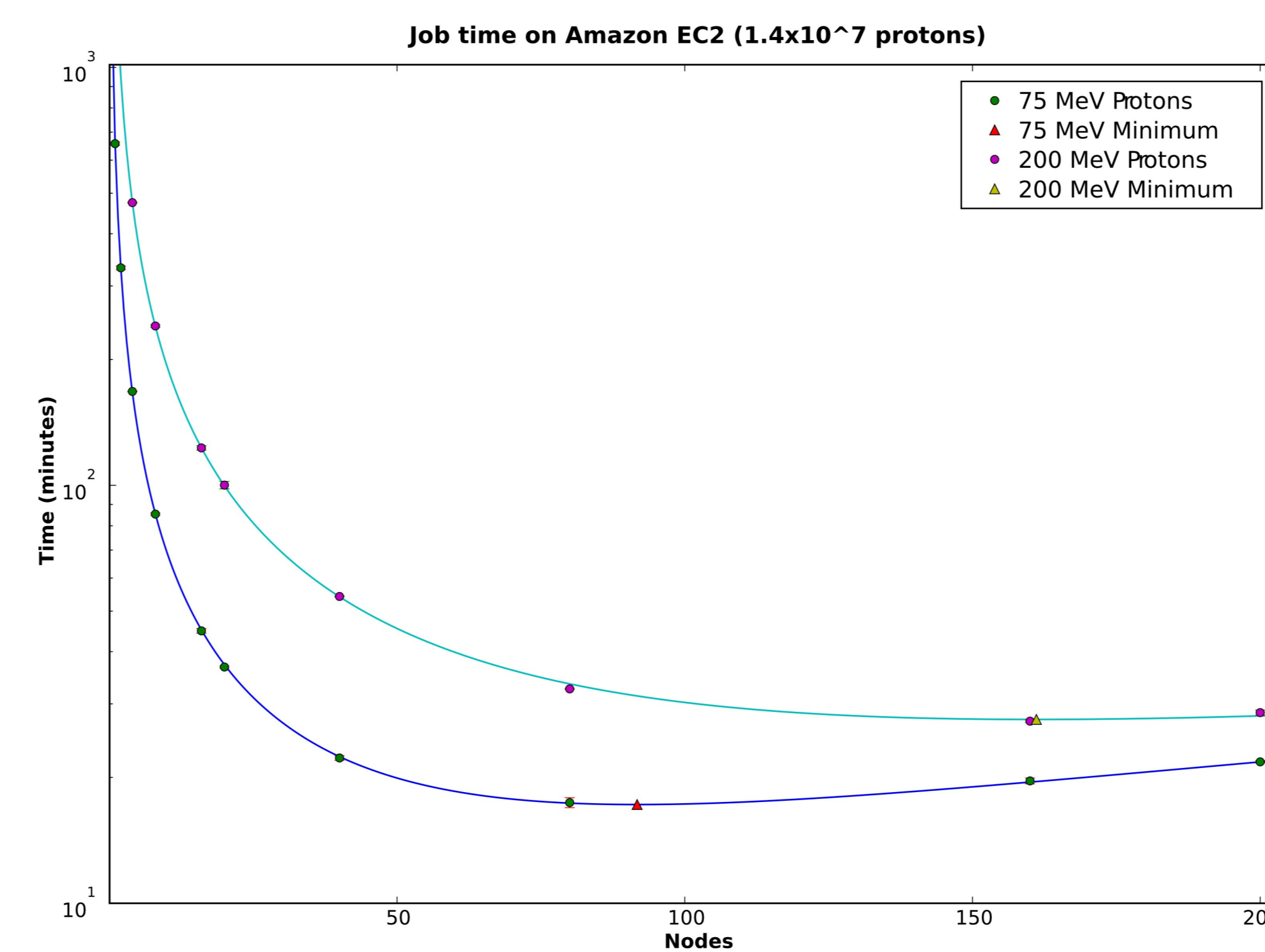


Figure 3: Calculation times for proton beam depth-dose profiles in water. The fit curves are from Equation 1.

**Our proof-of-concept tests have been successful:** We were able to remotely perform several clinically relevant calculations with an on-demand, virtual Monte Carlo cluster. Our current implementation of *flsshd* is limited by the linear time it takes to initialize calculations on each node. This leads to greater minimum possible calculations times at present than desired.

**Cost estimates** for in-house clusters are usually set around \$1000/node plus \$200/node per year in maintenance (a minimum cost of \$53k/year over a 3 year cluster lifespan for a 100 node cluster). For a clinic serving 1000 patients per year at 100 CPU hours per patient, the price of running on a cloud service could be as low as \$8,700/year in CPU time (using 3GHz CPU hours at  $\approx \$0.029/(\text{GHz}\cdot\text{hr})$ ).

**Patient data privacy** can be assured by anonymizing plan data before it is encrypted and sent to the cloud for calculations.

**Cloud vs. Grid:** Cloud services have the advantages of ubiquitous access, lower entry barriers, orders of magnitude greater economies of scale, and backing by the largest Internet companies.

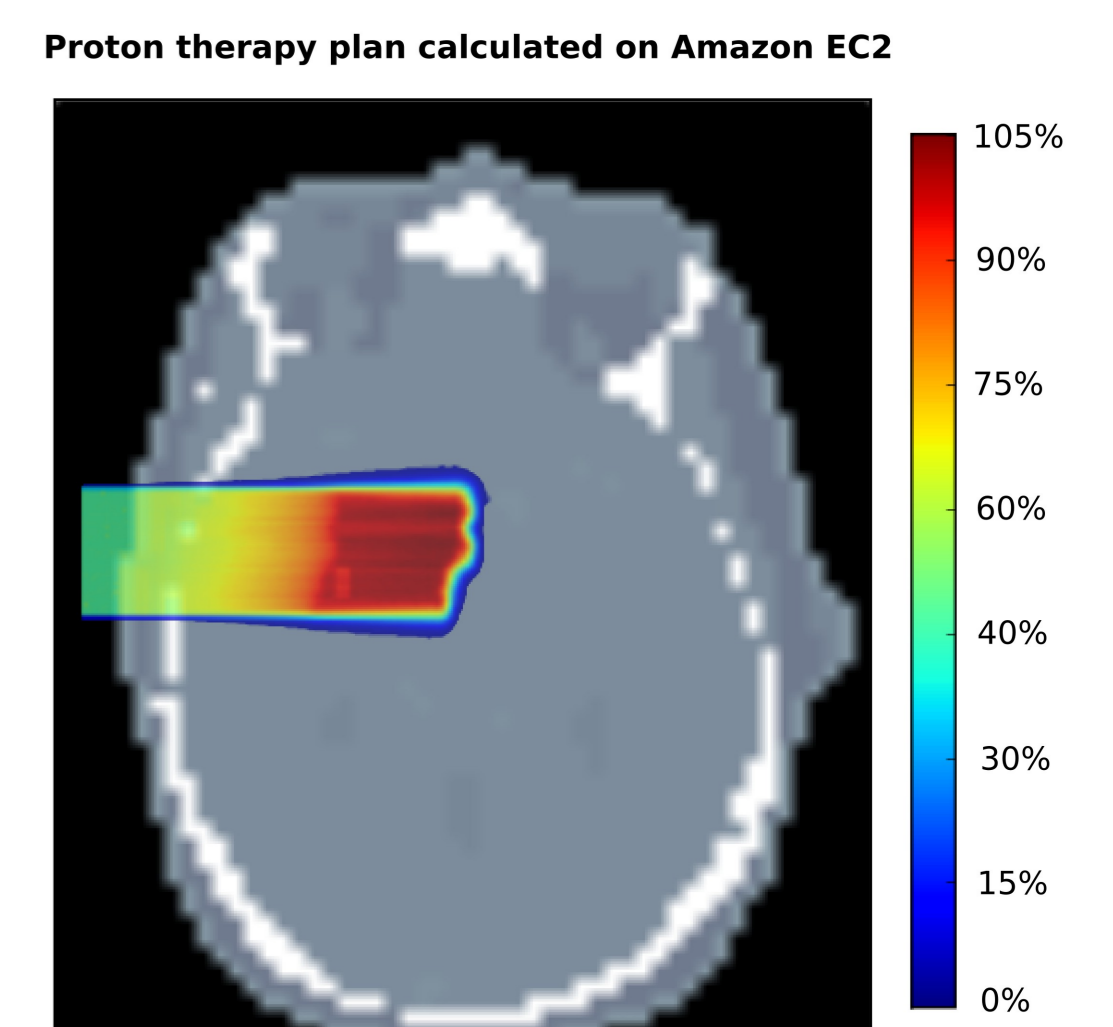


Figure 4: A simple proton therapy plan calculated on 130 EC2 nodes using a voxel phantom.

## A promising outlook for clinical Cloud Computing:

Cloud computing promises ubiquitous access to super computing level resources for medical physics. This has many implications for the future of radiation therapy planning and delivery. The pay-as-you-go model will allow users to replace or supplement existing infrastructure without incurring up-front costs.

Our future research plans include improving the performance of our current distributed cloud calculation framework, testing several other established distributed frameworks, optimizing costs, and developing a web portal for job submission by outside researchers.

**Acknowledgments:** This work was supported in part by the National Science Foundation under grant CBET-0853157.

[1] Amazon Elastic Compute Cloud 2010 <http://aws.amazon.com/ec2/>  
[2] Fasso A, Ferrari A, Ranft J & Sala P 2005 Fluka: a multi-particle transport code. Technical report, CERN-2005-10, INFN/TC 05/11, SLAC-R-773.  
[3] I. G. Zubal, C. R. Harrell, E. O. Smith, A. L. Smith, Two dedicated software-voxel-based, anthropomorphic (torso and head) phantoms, <http://noodle.med.yale.edu/zubal/>