



A REVIEW ON WATER BOLUS STRUCTURE INTEGRATION FOR NON-INVASIVE HYPERTHERMIA TREATMENT

Mazlina Mansor Hassan

Faculty of Engineering, Universiti Malaysia Sarawak (UNIMAS), Malaysia

Kasumawati Lias

Faculty of Engineering, Universiti Malaysia Sarawak (UNIMAS), Malaysia

Norlida Buniyamin

Faculty of Electrical Engineering, Universiti Teknologi MARA (UiTM), Malaysia

Bibi Sarpinah Sheikh Naimullah

Faculty of Engineering, Universiti Malaysia Sarawak (UNIMAS), Malaysia

ABSTRACT

This paper presents a review of hyperthermia on a modified water bolus structure for breast cancer. Hyperthermia is an alternative treatment for cancer, which uses high heat to treat a cancer patient. Because of certain limitations, especially difficult to control focus position distance on the treated tissue has contributed to the low success rate of the treatment. In addition, excessive skin burn problems and adverse health effects on surrounding healthy tissue could occur as a result of high temperature applied on the skin and wide area of unwanted hot spots. Proper design on hyperthermia applicator can assist in reducing unwanted hot spots in the vicinity area while improving the focus position distance on the treated tissue, simultaneously. Meanwhile, massive skin burns can be overcome with the addition of water bolus. Based on previous research on water bolus, various designs have been investigated. However, further research needs to be carried out in order to provide more significant results on different stages of cancer. Therefore, in this research, a water bolus is investigated further by taking into consideration several factors to optimize the function of water bolus as a cooling system. Hence, it may reduce unwanted hot spots, minimize skin burn problem, while maintaining the required focus position distance on the treated tissue during the hyperthermia execution procedure. A deductive and inductive literature review approach is used to determine the research gap of current research on water bolus addition to hyperthermia procedure. A rectangular water bolus structure was used the most in hyperthermia research as it can be modified further, and it has the largest covered area for reducing unwanted hot spots on

surrounding healthy tissue. The comparison analysis of different types of water bolus is presented.

Key words: Non-Invasive, Hyperthermia, Water bolus, Cancer treatment, Skin burn.

Cite this Article: Mazlina Mansor Hassan, Kasumawati Lias, Norlida Buniyamin, and Bibi Sarpinah Sheikh Naimullah, A Review on Water Bolus Structure Integration for Non-Invasive Hyperthermia Treatment, *International Journal of Advanced Research in Engineering and Technology*, 11(7), 2020, pp. 524-532.

<http://www.iaeme.com/IJARET/issues.asp?JType=IJARET&VType=11&IType=7>

1. INTRODUCTION

Breast cancer is the most prevalent form of cancer affecting women globally and the leading cause of death among women in the world [1]. Researchers and scientists from all over the world have involved with the various method through simulation, experimental and clinical trials to improve the existing procedure to be more convenient and come out with the more effective cancer treatments [2],[3],[4]. Hyperthermia which also known as thermal therapy or thermotherapy, has attracted the interest of many researchers to be used as an alternative method to treat breast cancer patients [2],[5]. During hyperthermia treatment, the temperature is elevated between 40°C - 45°C where the range of the heat temperature can kill and destroy the cancer cells [2],[6]. Hyperthermia can be applied either invasive or non-invasively [5]. The invasive method is where the probe is inserted into the patient body, while non-invasive is where the applicators are applied externally or placed outside of the patient body. For non-invasive hyperthermia treatment, the applicator used is either Ultrasound (US) or Electromagnetic (EM) waves as a source of heating techniques [7]. Each of those heating techniques has its own advantages and disadvantages and selected based on the function or objectives of the treatment given.

Hyperthermia is safer than the traditional method and can enhance the efficacy of the conventional method [8]. However, previous research paper mostly discussed on the skin burn problem and not many papers discussed on unwanted hot spots obtained from undergoing the treatment [9],[10]. Hyperthermia treatment uses in various cancerous cells have been studied. Rectangle shape, deionized, or distilled water bolus is a preferred shape and liquid used for tissue cooling [4],[11]. Apart from that, the integration of water bolus to the applicators is also to create good impedance matching between the applicator and patient body [5].

In 2019, there are several publications on new material that have the same purposes of reducing skin burn problems. In the study of A.Ghasemlouy and S.Rajebi [2] a little, lightweight and wideband antenna has been designed. The purpose of the research is as the replacement of water bolus using the silicon layer, which can help decrease the percentage of burns to a minimum [2]. Another published research paper by Hana Dobsicek Trefina and Anna Storm [3] found a new way as alternative tools to by using hydrogels to improve heat delivery [3]. Most published hyperthermia cancer treatment use distilled or deionized water as water bolus, which is well known can help to solve skin burn problem.

Several limitations encountered by the previous researcher, such as the optimization of temperature to be used maximally within and at the restricted area in the target cancerous cells, is still a huge challenge in hyperthermia methods [12]. Different shapes of antennas were employed in hyperthermia for temperature increase purposes [13]. Finding the optimal temperature setting is considered difficult because available sources share the different settings, and some published papers provide limited information [14]. Previous clinical publications faced a challenge to control applicator powers, and water bolus temperature due to tissue homogeneities in every patient are time-varying and non-linear [15]. Therefore, this

paper proposed a modified water bolus structure to reduce unwanted hot spots and skin burn problems during hyperthermia execution while maintaining penetration depth and focus position distance.

Figure 1 shows a method of research conducted in non-invasive hyperthermia treatment with water bolus (NHIWB) between 2015 to 2020. The simulation method is preferable, as the process can save more time in which the initial result can be collected before continuing with the experimentation or clinical works. Figure 2 shows the types of cancer implicated in previous research. Samples of cancer implicated either in the head, neck, brain, breast, muscles, and a few other places on the human body phantom.

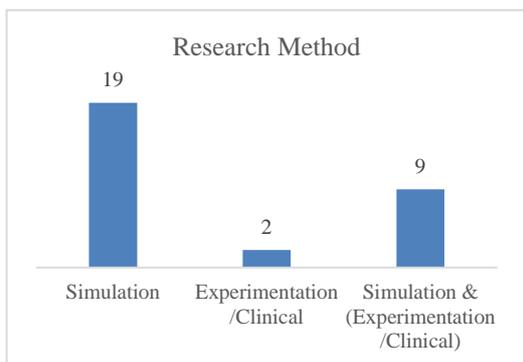


Figure 1. Conducted method

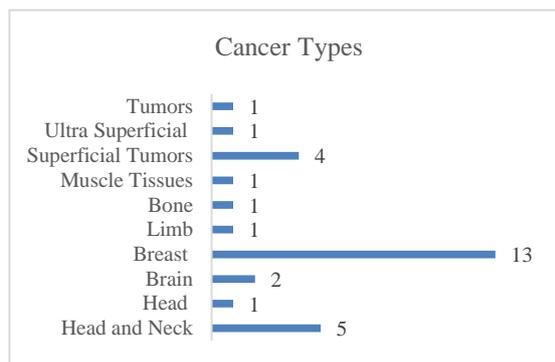


Figure 2. Types of cancers

Table 1 shows the list of antennas and research methods used and conducted by previous researcher, respectively. Microstrip shows the highest preferred antenna used in the research due to its many interesting characteristics such as lightweight, easy to manufacture, and suitable in hyperthermia treatments. Simulation represent the highest research method where the techniques are more flexible in conducting the research.

Table 1 Research publication on NHIWB

Types of antenna used in NHIWB	Publication						Total	Research Method S: Simulation E: Experiment C: Clinical
	2015	2016	2017	2018	2019	2020		
Microstrip	[11],[16],[17],[18]	[19],[4]	[5],[6],[20],[21],[22],[23]	[24],[25]	[2],[9],[26],[27]	[28],[29],[30]	21	S:12, E/C: 1 and S&E: 8
Bow-Tie				[31],[32]	[3]		3	S: 2 and E/C: 1
Waveguide				[24]			1	S:1
Dipole	[33]	[34]	[35]		[36]		4	S:4
BSD2000-3D/MR system	[37]						1	S & C: 1

2. WATER BOLUS FOR HYPERTHERMIA PROCEDURE

Figure 3 and Figure 4 shows water bolus liquid/material consumption and shape, respectively. From Figure. 3, as observed, the highest consumption is deionized water, followed by distilled water. Several researchers come out with new materials such as oil, hydrogel, and silicon, enriching the available material for use in hyperthermia. Figure. 4 shows the form of the water bolus, which is mostly in a rectangular shape. However, limited information can be extracted from the previous publication on the water bolus shape and material cover.

Most research aims to improve heating deposition on cancer target cells. Hana and Anna [3], for example, conduct research to improve heat delivery during the treatment. A research study by Sergio Curto et al. [18] aims to improve patient comfort, enhance energy deposition, and reduce power requirements. Publication paper from Aleix Garcia-Miquel et al. [4], on the other hand, aims to increase energy deposition and be able to concentrate on various parts of cancer cell location.

Apart from that, research by Kasumawati et al. [9] aims to enhance penetration depth, increase focusing capability, and reduce unwanted hot spots. Publication from A.Ghasemlouy and S.Rajebi [2] and Ki Joon Kim et al. [17] both intended to reduce skin burn overheating. The studies also aim to reduce the problem from water bolus using alternative material as a cooling item and improve heating depth, respectively.

Most research concerns and focuses on healing properties and less research discuss techniques to reduce skin burning and the problem of unwanted hot spots. Therefore, a complete study on non-invasive hyperthermia treatment integrates with water bolus information will be carried out to reduce the limitation.

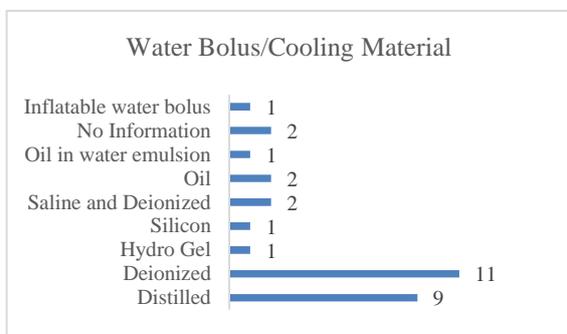


Figure 3. Coolant Material

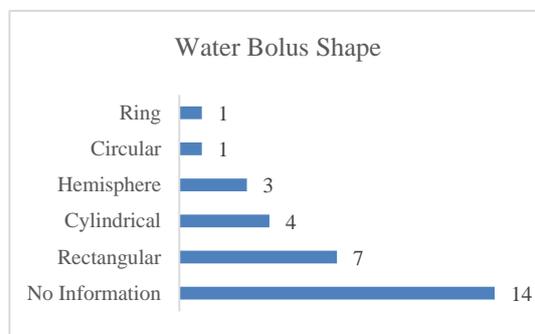


Figure 4. Water bolus shape

2.1. Design of Experiment

Figure 5 and Figure 6 show experiment 1 and experiment 2 architecture in conducting the research. The objectives of the design of experiment 1 are to investigate the most suitable antenna and operating frequency to be used in this research. Figure 4 shows the flowchart of microstrip applicator development. The research starts with breast analysis and continues with the design of breast phantom. The rectangular and circular shape of the antenna will be considered and design for evaluation purposes. The best frequency will be used in hyperthermia study and selected from three different frequency which are 434 MHz, 915MHz and 2.45GHz.

The objectives of the design of experiment 2 are to investigate the most suitable structure, liquid, and material cover for water bolus. Figure 6 shows the water bolus development process. The process starts with the selection of a water bolus structure, including thickness, width, and height. Next, for liquid selection, it will start with distilled water, deionized water, and followed by other suitable liquid. Apart from the selection of the best liquid, the selection of material for liquid cover will also be conducted. Simulation is performed using SEMCAD X to find the best SAR distribution. Once the best result is known, the final stage of hardware development is carried out to check and validate the results.

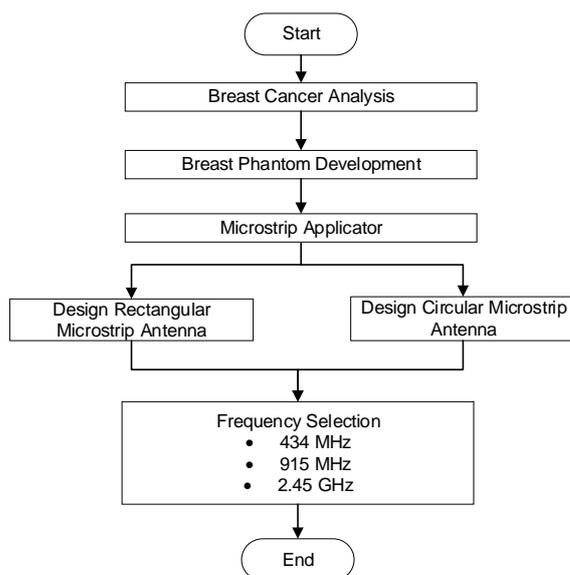


Figure 5. Microstrip Applicator Development.

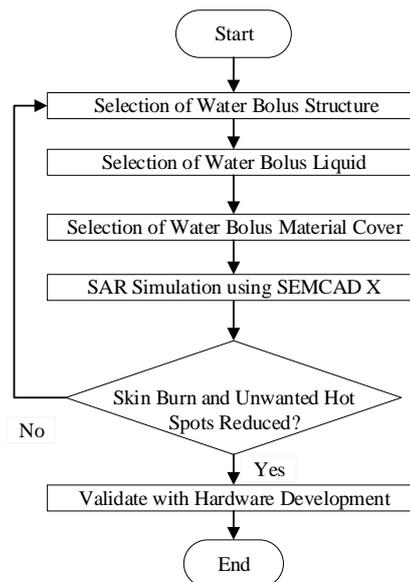


Figure 6. Water Bolus Development.

2.2. Thermal Equations used for SAR and Temperature Calculation

Specific absorption rate (SAR) is the rate of energy absorption per unit mass, inside the biological tissue when exposed to an electromagnetic field [33]. SAR formula [6] with σ

($S m^{-1}$) the electric conductivity and ρ ($kg m^{-3}$) the tissue density.

$$PD = \frac{\sigma}{2} \|\vec{E}\|^2 = \rho \cdot SAR \quad (1)$$

Thermal simulations were performed by solving Pennes' bio heat equation [6]

$$c\rho \frac{\partial T}{\partial t} = \nabla \cdot (k_{tis} \nabla T) - c_b W_b (T - T_{art}) + PD \quad (2)$$

where c is the specific heat capacity ($J Kg^{-1} \circ C^{-1}$), k_{tis} ($W m^{-1} \circ C^{-1}$) is the thermal conductivity, c_b the specific heat capacity of blood, W_b ($kg m^{-3} s^{-1}$) the volumetric perfusion rate and T_{art} is body core temperature.

3. PROPOSE WATER BOLUS STRUCTURE

Figure 7 shows the proposed research design for this study. The microstrip antenna integrates with the rectangular or circular shape of the water bolus placed on the surface of the breast phantom. Non-invasive hyperthermia treatment will be conducted where the applicator (antenna and water bolus) is applied externally on the breast phantom. A small red circle indicates existing cancerous cells, which is the target to be destroyed using a non-invasive hyperthermia technique. The last layer represents patient tissue muscles.

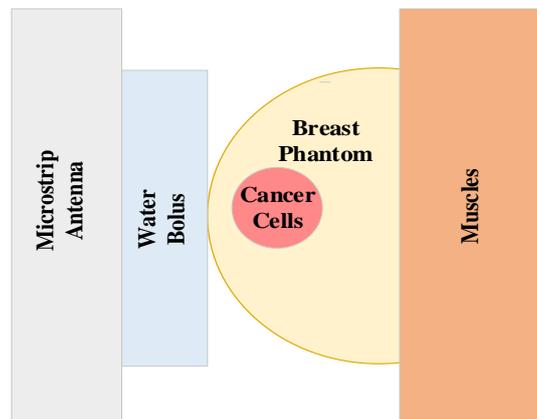


Figure 7 Proposed Research Design

A newly modified water bolus structure with rectangular or circular shape design is proposed. The rectangular or circular shape water bolus is selected to cover as much treated area as possible and match with the rectangular or circular antenna. The shape of water bolus and antenna must be in the same shape, to ease any modification, be it antenna or water bolus structure. Distilled water, deionized water, and a few other liquids will be tested through the simulation process in order to get the best liquid or material as a coolant on the treated tissues. PVC, plastic bags, and a few other suitable materials will be investigated for selection as a water bolus cover. The investigation on the percentage of reduction on skin burn problems and unwanted hot spots will be carried out while retaining the good penetration depth and focus position distance.

4. CONCLUSION

An overview of non-invasive hyperthermia treatment integrate with water bolus was presented. Most of the papers that have been reviewed are emphasized on superficial categories and several on deep hyperthermia. Water bolus is essential to work as a coupling medium and cooling material in hyperthermia treatment. The usage of water bolus can help to reduce skin burn problems and unwanted hot spots. Furthermore, most publications have concerned about heating optimization, heating homogeneity, the effective therapeutic temperature inside cancer, and efficient power deposition. However, limited information and less work have been done to reduce massive skin burn problems and unwanted hot spots using suitable water bolus. Limited information observed from the previous study conducted on suitable water bolus shape and material covered for water bolus. In addition, not much publication discusses both skins burn problems and unwanted hot spots using hyperthermia techniques. In conjunction with that, several factors on water bolus will be investigated further to enhance the function of a water bolus. The newly modified water bolus structure is therefore proposed to reduce skin burning and unwanted hot spots while simultaneously improving the depth of penetration and the focus position distance.

ACKNOWLEDGEMENT

The authors would like to thank the Faculty of Engineering, Universiti Malaysia Sarawak, for the support.

REFERENCES

- [1] F. Bray, J. Ferlay, I. Soerjomataram, R. L. Siegel, L. A. Torre, and A. Jemal. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA. Cancer J. Clin.*, 68(6), 2018 pp. 394–424.

- [2] A. Ghasemlouy and S. Rajebi, Investigation and Evaluation of the Effect of Silicon Layer and Its Comparison with Water Bolus in Designing Microstrip Antenna for Hyperthermia Applications. *J. Commun. Technol. Electron.*, 64(11), 2019, pp. 1307–1317.
- [3] H. D. Trefná and A. Ström, Hydrogels as a water bolus during hyperthermia treatment. *Phys. Med. Biol.*, 64 (11), 2019, 14pp.
- [4] A. Garcia-Miquel, S. Curto, N. Vidal, J. M. Lopez-Villegas, and P. Prakash, Compact microwave applicator for thermal therapy of breast cancer: Comparative assessment of arrays operating at 434 and 915 MHz. Proceedings 10th European Conference on Antennas and Propagation, 2016, pp. 2–5.
- [5] K. Lias and N. Buniyamin, FDTD computational simulation for SAR observation towards breast hyperthermia cancer procedure. *Pertanika J. Sci. Technol.* 25(S), 2017, pp. 221–230
- [6] H. P. Kok and J. Crezee. A comparison of the heating characteristics of capacitive and radiative superficial hyperthermia. *International Journal of Hyperthermia*, 33(4), 2017, pp. 378-386.
- [7] S. Jha, P. K. Sharma, and R. Malviya. Hyperthermia: Role and Risk Factor for Cancer Treatment. *Achiev. Life Sci.*, 10(2), 2016, pp. 161–167.
- [8] S. K. Sharma, N. Shrivastava, F. Rossi, L. D. Tung, and N. T. K. Thanh, “Nanoparticles-based magnetic and photo induced hyperthermia for cancer treatment,” *Nano Today*, vol. 29, no. xxxx, p. 100795, 2019, doi: 10.1016/j.nantod.2019.100795.
- [9] K. Lias *et al.* Simulation Study of a Modified Rectangular Microstrip for the Hyperthermia Breast Cancer Procedure with SEMCAD X Solver,” *J. Phys. Conf. Ser.*, 1372(1), 2019, pp. 0–8.
- [10] S. Curto, A. Garcia-Miquel, M. Suh, N. Vidal, J. M. Lopez-Villegas, and P. Prakash. Design and characterisation of a phased antenna array for intact breast hyperthermia. *Int. J. Hyperth.*, 34(3), 2018, pp. 250–260.
- [11] W. C. Choi, S. Lim, and Y. J. Yoon. Design of Noninvasive Hyperthermia System Using Transmit-Array Lens Antenna Configuration. *IEEE Antennas Wireless Propagation Letters*, 15, 2016, pp. 857–860.
- [12] G. G. Bellizzi, M. M. Paulides, T. Drizdal, G. C. Van Rhoon, L. Crocco, and T. Isernia. Temperature-Inspired Optimization in Hyperthermia Treatment Planning. Proceedings 13th Eur. Conf. Antennas Propagation, 2019, pp. 2019–2021.
- [13] Y. S. Koo, R. Kazemi, Q. Liu, J. C. Phillips, and A. E. Fathy. Development of a high SAR conformal antenna for hyperthermia tumors treatment. *IEEE Trans. Antennas Propag.* 62(11), 2014 pp. 5830–5840.
- [14] Z. Wang, E. G. Lim, Y. Tang, and M. Leach, “Medical applications of microwave imaging,” *Sci. World J.*, 2014, 2014, 7pp.
- [15] M. De Bruijne, J. Van Der Zee, A. Ameziane, and G. C. Van Rhoon. Quality control of superficial hyperthermia by treatment evaluation. *Int. J. Hyperth.*, 27(3), 2011, pp. 199–213.
- [16] W. Geyi, S. Wang, and X. He. Optimal design of focused arrays for microwave-induced hyperthermia. *IET Microwaves, Antennas Propag.*, 9(14), 2015 pp. 1605–1611.
- [17] K. J. Kim, W. C. Choi, Y. J. Yoon, and S. H. Bae. Planar array for non-invasive ultra-superficial hyperthermia applicator. Proceeding International Workshop on Antenna Technology, 2015, pp. 104–106.
- [18] S. Curto, M. Ramasamy, M. Suh, and P. Prakash. Design and analysis of a conformal patch antenna for a wearable breast hyperthermia treatment system. Proceedings of SPIE Energy-based Treat. Tissue Assess. VIII, 9326, 2015, p. 93260I.

- [19] D. A. M. Iero, L. Crocco, T. Isernia, and E. Korkmaz. Optimal focused electromagnetic hyperthermia treatment of breast cancer. Proceedings 10th European Conference on Antennas Propagation, 2016.
- [20] H. Younesiraad, M. Bemani, and S. Nikmehr. A dual-band slotted square ring patch antenna for local hyperthermia applications. *Progress in Electromagnetic Research Letters*, 71, 2017, pp. 97–102.
- [21] Houda Halheit and Tan Phu Vuong. Dual Frequency Applicator for Medical Applications. Proceedings Asia Pacific Microwave Conference, 2017, pp. 1063-1065.
- [22] S. Singh, B. Sahu, and S. P. Singh. Hyperthermia performance of conformal applicator for limb tumor in presence of water bolus. Proceedings International Symposium on Antennas and Propagation, 2017, 3pp.
- [23] P. T. Nguyen, A. M. Abbosh, and S. Crozier. 3-D focused microwave hyperthermia for breast cancer treatment with experimental validation. *IEEE Transactions on Antennas and Propagation*, 65 (7), 2017, pp. 3489–3500.
- [24] S. Curto, A. Garcia-Miquel, M. Suh, N. Vidal, J. M. Lopez-Villegas, and P. Prakash. Design and characterisation of a phased antenna array for intact breast hyperthermia. *International Journal of Hyperthermia.*, 34(3), 2018, pp. 250–260.
- [25] L. Xu and X. Wang. Comparison of Two Optimization Algorithms for Focused Microwave Breast Cancer Hyperthermia. Proceedings International Applied Computational Electromagnetic Society Symposium China, 2019, pp. 11–13, 2019.
- [26] F. Bardati, A. Di Carlofelice, and P. Tognolatti. Improving SAR Homogeneity in a Layered Spherical Model of Head for Hyperthermia Treatments with RF Phased Array Systems. Proceedings Photonics & Electromagnetics Research Symposium, 2019, pp. 2538–2546.
- [27] G. Muntoni, A. Fantì, M. B. Lodi, and G. Montisci. Optimum Design of Superficial Microwave Hyperthermia Treatment. Proceedings IEEE MTT-S International Conference Numerical Electromagnetics and Multiphysics Modelling and Optimization, 2019, pp. 1–3.
- [28] H. P. Kok, J. Groen, A. Bakker, and J. Crezee. Modelling Curved Contact Flexible Microstrip Applicators for Patient-Specific Superficial Hyperthermia Treatment Planning. *MDPI*, 12(13), 2020.
- [29] L. Xu and X. Wang. Focused Microwave Breast Hyperthermia Monitored by Thermoacoustic Imaging: A Computational. *IEEE Journals of Electromagnetics, RF and Microwaves in Medicine and Biology*, 4(2), 2020, pp. 81–88.
- [30] R. Gaffoglio, M. Righero, G. Giordanengo, M. Zucchi, and G. Vecchi. Temperature Focusing in Microwave Cancer Hyperthermia, A Computational. *IEEE Journals of Electromagnetics, RF and Microwaves in Medicine and Biology*, 2020, pp. 1–7.
- [31] P. Takook, M. Persson, and H. D. Trefna. Performance Evaluation of Hyperthermia Applicators to Heat Deep-Seated Brain Tumors. *IEEE Journals of Electromagnetics, RF Microwaves in Medicine and Bioogy.*, 2(1), 2018, pp. 18–24.
- [32] S. Park, S. Lim, D. Kim, H. Kim, and Y. J. Yoon. Dual Band Bowtie Antenna with Matching Stub for Medical Application,” Proceedings International Symposiums on Antennas and Propagation, 14, 2019, pp. 1–2.
- [33] O. Haraz, I. Elshafiey, and A. R. Sebak. Design of Dual-Band Phased Array Antenna System with Layered Cylindrical Human Tissue Model for Hyperthermia Treatment and Microwave Imaging Applications. Proceedings 32nd National Radio Science Conference, 2015.
- [34] F. Bardati and P. Tognolatti. Hyperthermia phased arrays pre-treatment evaluation. *International Journal of Hyperthermia.*, 32(8), 2016, pp. 911–922.

- [35] E. A. Lekka, K. D. Paschaloudis, and G. A. Kyriacou. Phased array design for near field focused hyperthermia based on reciprocity theorem. Proceedings International Workshop on Antenna Technology: Small Antennas, Innovative Structures, and Applications, 2017, pp. 277–280.
- [36] M. D. Geyikoglu, H. Koc Polat, and B. Cavusoglu. A new flexible antenna array design for hyperthermia treatment of bone cancer. Proceedings 5th International Electromagnetic Compatability Conference EMC Turkiye, 2019.
- [37] G. C. Van Rhoon, M. M. Paulides, and T. Drizdal. Computational electromagnetic modeling is key in objective control of hyperthermia. Proceedings 9th European Conference on Antennas and Propagation, 2015, pp. 1–5.