



DECEMBER 11-12, 2025
۲۱ و ۲۰ آذر ماه ۱۴۰۴



دومین کنگره
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The 2nd Congress on Plasma Medicine

دبیرخانه دائمی کنگره
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Multiphysics Simulation of the Synergistic Interaction Between Plasma-Based Radiosensitization and Liquid ^{131}Cs Balloon Brachytherapy in GBM

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ABSTRACT

Citation:

Kazemi A, Poorbaygi H, Akbari Koradeh S. Multiphysics Simulation of the Synergistic Interaction Between Plasma-Based Radiosensitization and Liquid ^{131}Cs Balloon Brachytherapy in GBM. *Iran Biomed J. Supplementary* (2-2026): 7.

Introduction: Glioblastoma multiforme (GBM) is a highly aggressive primary brain tumor known for its significant resistance to radiation treatment. This resistance is primarily due to efficient repair of DNA double-strand break (DSB), hypoxic microenvironments (with oxygen partial pressure, $p\text{O}_2 < 10$ mmHg), and hypermethylation of the MGMT promoter. Standard treatment typically involves maximal safe surgical resection, external beam radiotherapy (60 Gy/30 fractions), and the chemotherapy agent temozolomide, providing a median survival of only 14.6 months. To enhance the cytotoxic effects of ionizing radiation on residual tumor cells within a 1 cm clinical target volume, this study employs a multiphysics simulation that integrates plasma-based radiosensitization with liquid ^{131}Cs balloon brachytherapy.

Materials and Methods: The photon transport from a silicone balloon (0.2 mm wall thickness, 3 cm diameter) filled with liquid ^{131}Cs (half-life = 9.7 days, energy ≈ 29 keV) was modeled using MCNPX 2.6. This model aims to deliver 60 Gy at a distance of 1 cm from the balloon its surface (with $V_{100} = 92\%$, $D_{90} = 58$ Gy, and $\text{BED}_{10} < 100$ Gy). Additionally, COMSOL Multiphysics 6.2 simulated an argon dielectric-barrier discharge (10 kV, 10 kHz, 0.1 L/min for 60 seconds) producing reactive oxygen species (ROS) and nitrogen species such as O_3 , $\bullet\text{OH}$, H_2O_2 , and nitric oxide, with penetration depths of 1.2–1.8 mm and $<10\%$ deviation from experimental validation.

Results and Discussion: Linear-quadratic modeling ($\alpha_0 = 0.25\text{Gy}^{-1}$, $\beta = 0.03\text{Gy}^{-2}$) that incorporated CAP-induced α enhancement ($\Delta\alpha/\alpha_0 = 28\%$) predicted a 37% reduction in survival of U87MG cell ($\text{SF}_{(\text{combined})} = 0.15$ vs. 0.24) and a 35% increase in apoptosis, as indicated by $\gamma\text{-H2AX}$ and caspase-3 activation. Plasma-activated liquids (PAL) further improved the diffusion of ROS by $\sim 50\%$ without inducing significant thermal effects ($\Delta T < 1.5^\circ\text{C}$). Overall, CAP and PAL act as effective radiosensitizers, amplifying oxidative damage to DSB and improving the therapeutic efficacy of ^{131}Cs brachytherapy while maintaining safe doses of normal tissue.

Conclusion: Our findings support the development of a hybrid intraoperative treatment system and its future preclinical application in trials.



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Keywords: ^{131}Cs balloon brachytherapy, Cold atmospheric plasma, COMSOL multiphysics, GBM, MCNPx simulation, Plasma-based radiosensitization

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Iranian Biomedical Journal Supplementary (February 2026): 7