

THE FUTURE OF Flash Radiation Therapy



**Flash Radiation
Therapy in 1975**

Flash Therapy, first known as Intra Operative Radiation Therapy (IORT), was initiated in the late 1960s by doctors in Japan. At that time, Radiation and Surgical Oncologists in Japan started to administer one-shot radiation therapy while the patient's cancer was being removed and the surgical area was left open. After the surgery, the patient was transported to the radiation therapy department for one-shot prophylactic/preventive radiation therapy.

In mid-July 1972, Dr. Ulrich K. Henschke recruited Krishnan Suthanthiran as an Engineer Physicist to design, develop, and manufacture devices aimed at improving clinical treatment and promoting active research and development. Dr. Henschke instructed Dr. Suthanthiran to help convert the 18 MeV Clinac Linear Accelerator Room into an operating theater/room suitable for performing IORT.

In 1975, at Howard University Hospital in Washington, DC, **Dr. Ulrich K. Henschke and his team, including Dr. Suthanthiran, became the first to perform both**



**Flash Radiation
Therapy Now**

procedures—surgery and radiation therapy—in the same room, advancing Flash Radiation Therapy. They used High Energy Electron Beam from the Clinac 18 Linear Accelerator.

In early 1977, Dr. Henschke and Dr. Suthanthiran traveled to California and met with the management of Varian and Siemens. They urged the companies to produce electron-only Linacs for IORT, but unfortunately, their efforts were unsuccessful.

TeamBest Global Companies plan to introduce a new version of the IORT System/Flash Therapy, which will utilize a robot. It's noteworthy that this is the first time a robot has been used, and Best Medical International holds a patent for this Robotic Electron Linac.



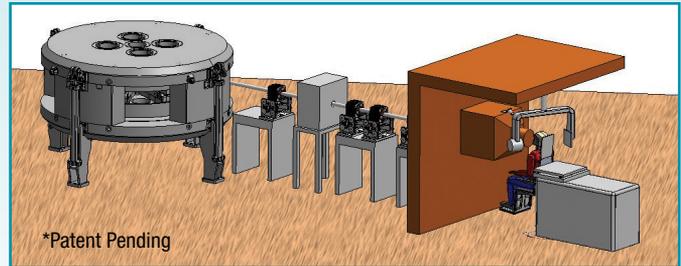
Please visit www.teambest.com to find out more.



THE FUTURE OF Particle Therapy

NEW! Best Model 200p Cyclotron for Proton Therapy*

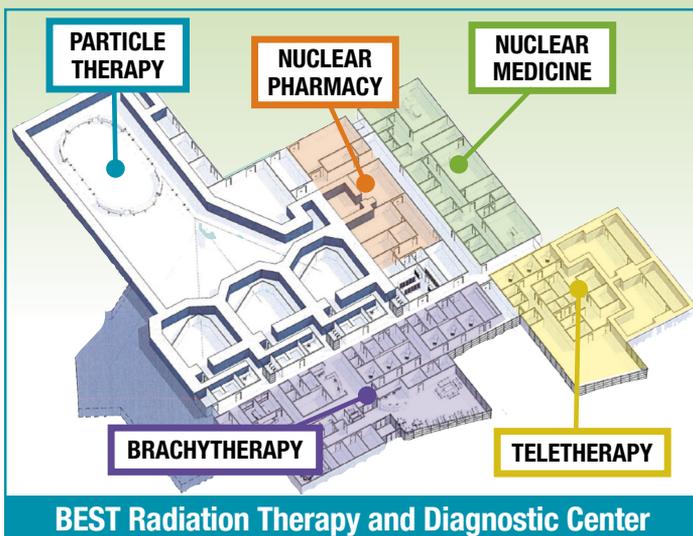
- From 70 MeV up to 200 MeV Non-Variable Energy
- Dedicated for Proton Therapy with two beam lines and two treatment rooms
- For all Medical Treatments including: Benign and Malignant Tumors, Neurological, Eye, Head/Neck, Pediatric, Lung Cancers, Vascular/Cardiac/Stenosis/Ablation, etc.



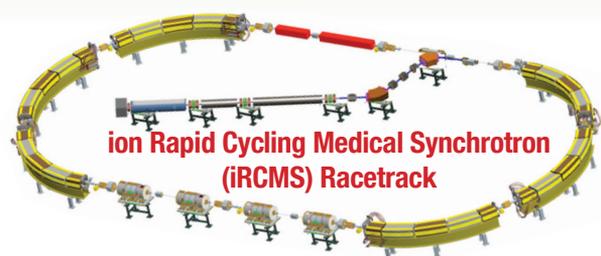
B100 Cyclotron	7.5 MeV	<ul style="list-style-type: none"> • Capable of producing: ^{18}FFDG and Na^{18}F • Single or batch dose production • Integrated self-shielded cyclotron, chemistry module and FDG QC module • Complete production lab in a 5 x 5 meter area
BG-95 Cyclotron	1-9.5 MeV	<ul style="list-style-type: none"> • Low energy, self-shielded compact system capable of producing: ^{18}FFDG, Na^{18}F, ^{18}F-MISO, ^{18}FFLT, ^{18}F-Choline, ^{18}F-DOPA, ^{18}F-PSMA, ^{13}N and ^{68}Ga
Best Cyclotrons	1-3 MeV	<ul style="list-style-type: none"> • Deuterons for materials analysis*
	70-200 MeV	<ul style="list-style-type: none"> • For Proton Therapy*
	3-90 MeV	<ul style="list-style-type: none"> • High current proton beams for neutron production and delivery*
B6-15 Cyclotron	1-15 MeV	<ul style="list-style-type: none"> • Proton only, capable of high current up to 1000 Micro Amps, for medical radioisotopes
B25 Cyclotron	20, 15-25 MeV	<ul style="list-style-type: none"> • Proton only, capable of high current up to 1000 Micro Amps, for medical radioisotopes
B25u-35adp Cyclotron	25-35 MeV	<ul style="list-style-type: none"> • Proton or alpha/deuteron/proton, capable of high current up to 1000 Micro Amps, for medical radioisotopes
B35 Cyclotron	35 MeV	<ul style="list-style-type: none"> • Proton only system for medical radioisotopes production
B70/70adp Cyclotron	35-70 MeV	<ul style="list-style-type: none"> • Proton only or alpha/deuteron/proton systems, capable of high current up to 1000 Micro Amps, for medical radioisotopes

*Some products are under development and not available for sale currently.

Best Particle Therapy 400 MeV ion Rapid Cycling Medical Synchrotron (iRCMS) for Proton-to-Carbon, Variable Energy Heavy Ion Therapy—with or without Gantry—Single and Multi-Room Solutions



- Intrinsically small beams facilitating beam delivery with precision
- Small beam sizes—small magnets, light gantries—smaller footprint
- Highly efficient single turn extraction
- Flexibility—heavy ion beam therapy (protons and/or carbon), beam delivery modalities



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