

Hello folks,

Here is what's been going on in medical physics and related areas the last 24 hours. Here's what you folks might find interesting today:

RADIOTHERAPY AND HADRON THERAPY

[Direct probabilistic IMPT treatment planning with setup and range errors for neuro-oncological patients](#)

This paper presents a probabilistic planning approach for intensity-modulated proton therapy (IMPT) that explicitly handles setup and range errors using patient-specific acceptance probabilities. The method uses a percentile-based optimization framework where dose percentiles are approximated as a linear combination of expected value and standard deviation, calculated efficiently by sampling a polynomial chaos expansion of the dose-influence matrix. It employs a nested optimization structure with warm-starting to iteratively update and improve the accuracy of the percentile estimate. Compared to standard robust optimization, this probabilistic approach achieves improved trade-offs between target coverage and organ-at-risk sparing in neuro-oncological patients. This work is highly relevant to robust optimization under anatomical and beam-delivery uncertainty, offering a clinically feasible pathway to better proton therapy treatments.

UNCERTAINTY QUANTIFICATION AND IMAGING PHYSICS

[Calibrated Closed-Form Uncertainty for Radiative Gaussian Splatting in Sparse-View CT](#)

This work tackles the lack of trust signals in radiative Gaussian splatting for sparse-view CT reconstruction by introducing a variational density posterior with closed-form predictive variance. The authors exploit the fact that projection and voxelization are strictly linear in per-Gaussian densities for transmissive X-ray imaging, allowing uncertainty to propagate exactly in a single forward pass. They present the first systematic calibration study for Gaussian-splatting CT, demonstrating that the resulting per-voxel uncertainty effectively ranks true reconstruction error across various view budgets. Furthermore, they identify different coverage regimes and show how principled uncertainty can inform a coverage-gated, maturity-scheduled acquisition policy and a dose-adaptive stopping rule. This is a strong contribution to calibrated uncertainty in image reconstruction, bridging geometric architectures with information-geometric treatment of inference.

NOVEL ARCHITECTURES AND OBJECTIVES FOR IMAGING

[Improving Medical Image Generative Models with Frechet Distance Loss](#)

The authors address the limitation of standard denoising objectives in diffusion models, which often smooth out high-variance, irregular structures characteristic of heterogeneous tumors. They propose finetuning generative models with a Frechet Distance loss (FD-loss) that aligns the first and second order feature statistics of real and generated images in a pretrained encoder space. This objective encourages the generator to capture complex structural variations without relying solely on per-pixel error. The method is integrated across diverse architectural settings on multiple liver and brain cancer datasets, leading to downstream segmentation networks that consistently achieve superior performance. This work offers a conceptually novel loss function derived from feature statistics rather than empirical pixel-wise tuning, making it highly relevant for improving clinical workflows involving synthetic data.

Back tomorrow with more!

P.S. In the most recent submission window: physics.med-ph: 4 papers cs.CV: 98 papers