Purpose: To model the geometry of eyeplaque ther apyu sing MCNP5 and study the dose distribution at specific points in the eye. Effects of tissue heter ogeneity and coverage fors mall umors (<10 mm) which have poor clinical outcomes ar econcentrated.

Method and M aterials: Geometry of the eyeplaque for eyeplaque therapyis modeled using MC NP5. The doseat the tumor base and ape x has been cal culated and compared against published data. For this work, a simple geometry of the eye plaque has been studied. The eyediameter, plaque diameter, plaque thickness and depthare chosen to be in compliance with the COMSs tandards. This model uses 14 radioactive NASIMED 3631 A/M mode I-125 seeds. The source energy distribution for this problem defines only the photonener gies and not the betaener regies as they are ab sorbed by the etitanium capsule in the eI-125 seed.

Results: Doseatth etumorap exwas calcu latedusing *F8 and F 6t allies in MCNP 5. Re sults show that F6 tally gives more accurate results than *F8 for this problem. So, F6 tally was used furt her in this research. Dose at tumor bas e and depth dos e profi le were studied for this problem u sing F6 tally. 54540 source part icles were simulated us ing MCNP5 and ther esulting part icle trace was obtained.

Conclusion: Thegeometryof theey eplaquehasbeenmod eledus ing MCNP5 and thedose d istribution atspecifi cpointsofi nterest hasbe enstu died. TheMCNP5 results were found to be agreeable ewith the published data for sever altreatment technique s. The effects of tissue element were there are a constrained and the reason for poort unor control /toxicit yout comes for small tumor s is found using Montecarlodosec alculation due to lack of coverage which could not be realized with 2D/3 Dplan ning.