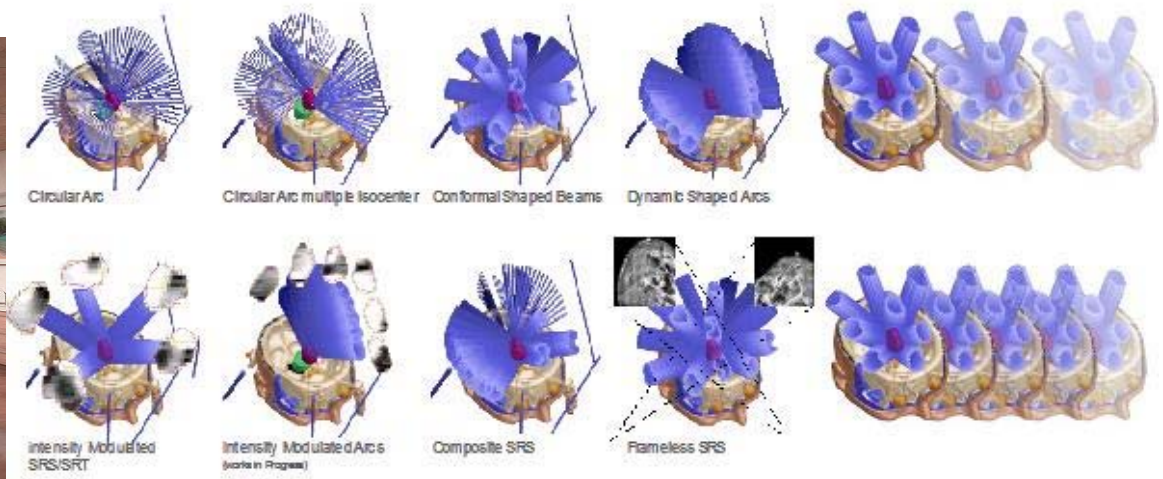


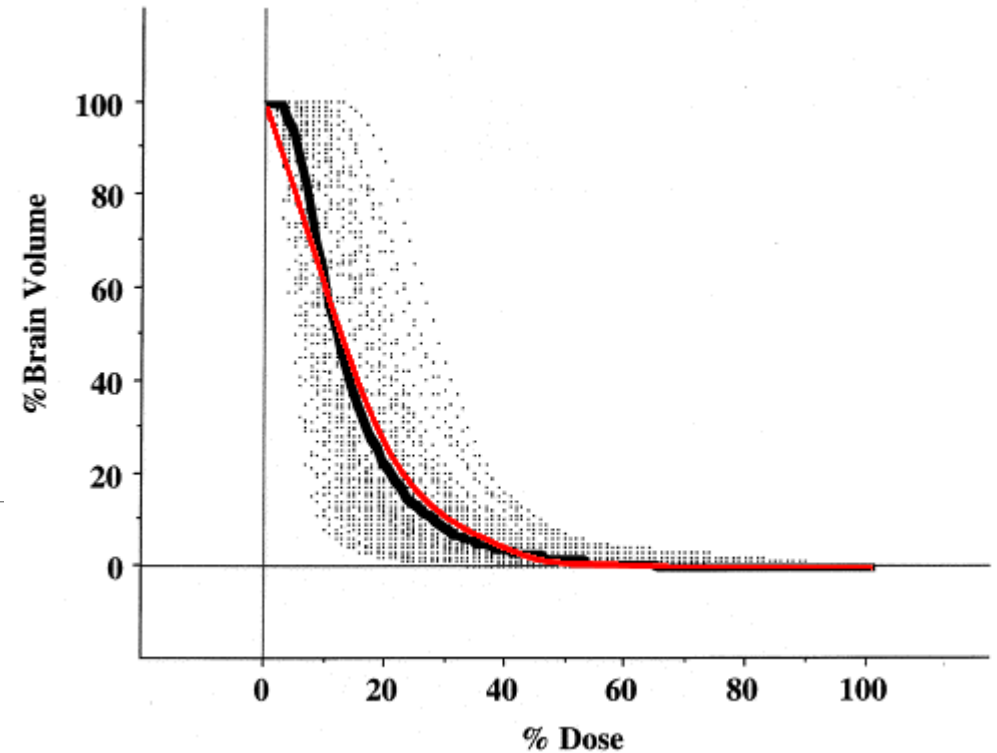
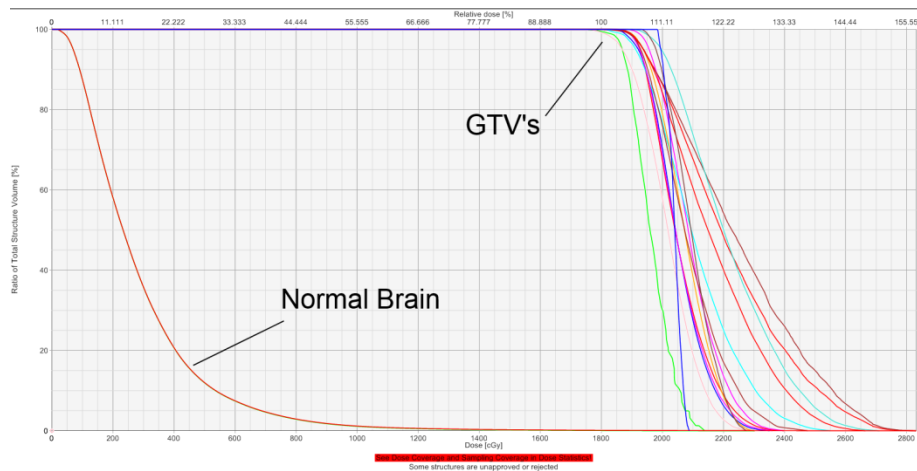
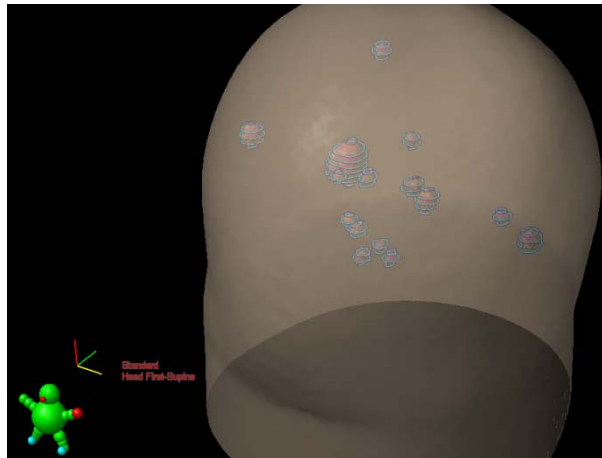
Clinical considerations for MLC based Linac SRS of small targets

Richard Popple

Radiosurgery tools

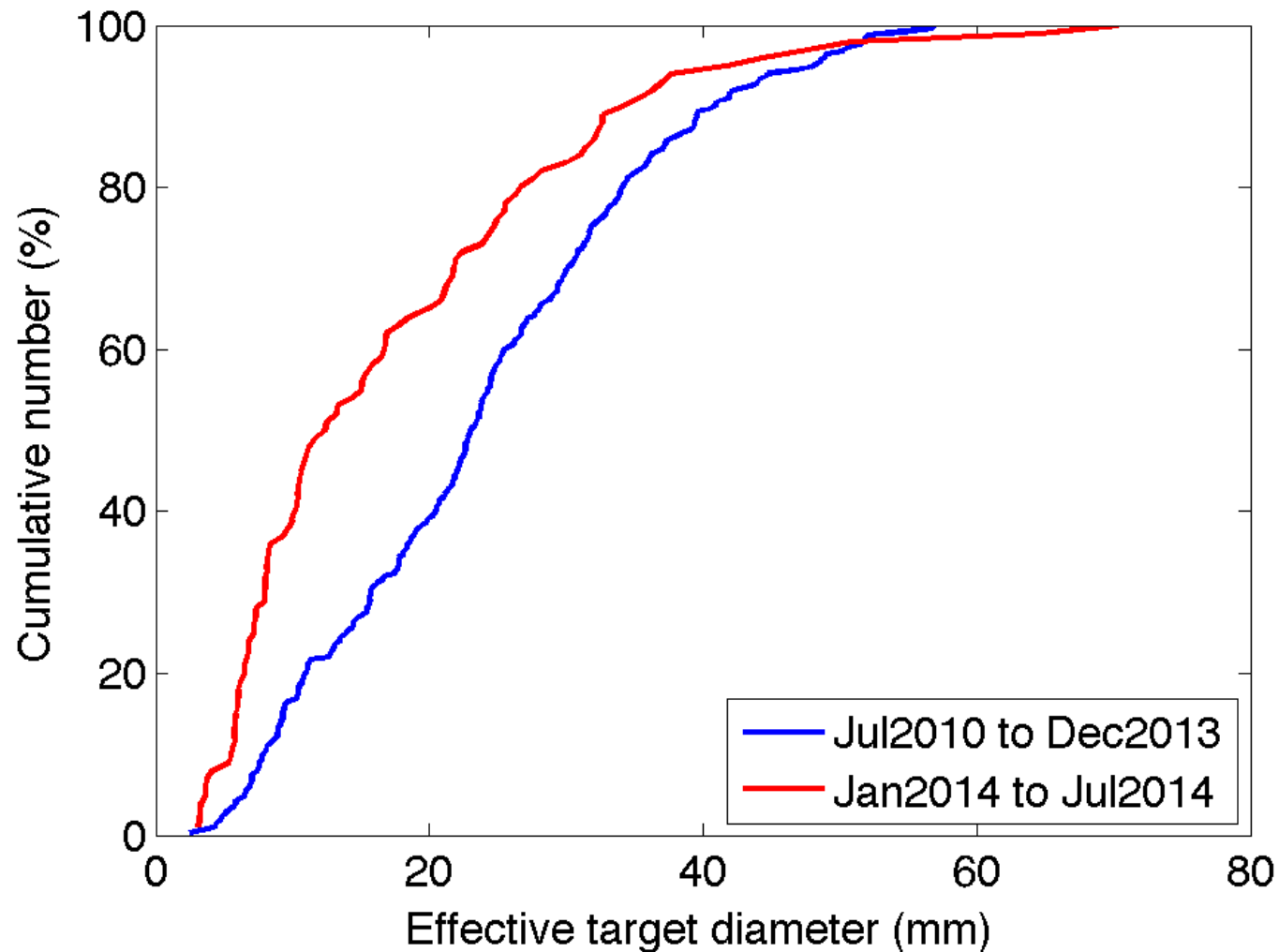


16 mets, Rx = 18 Gy, GTVtotal = 2cc

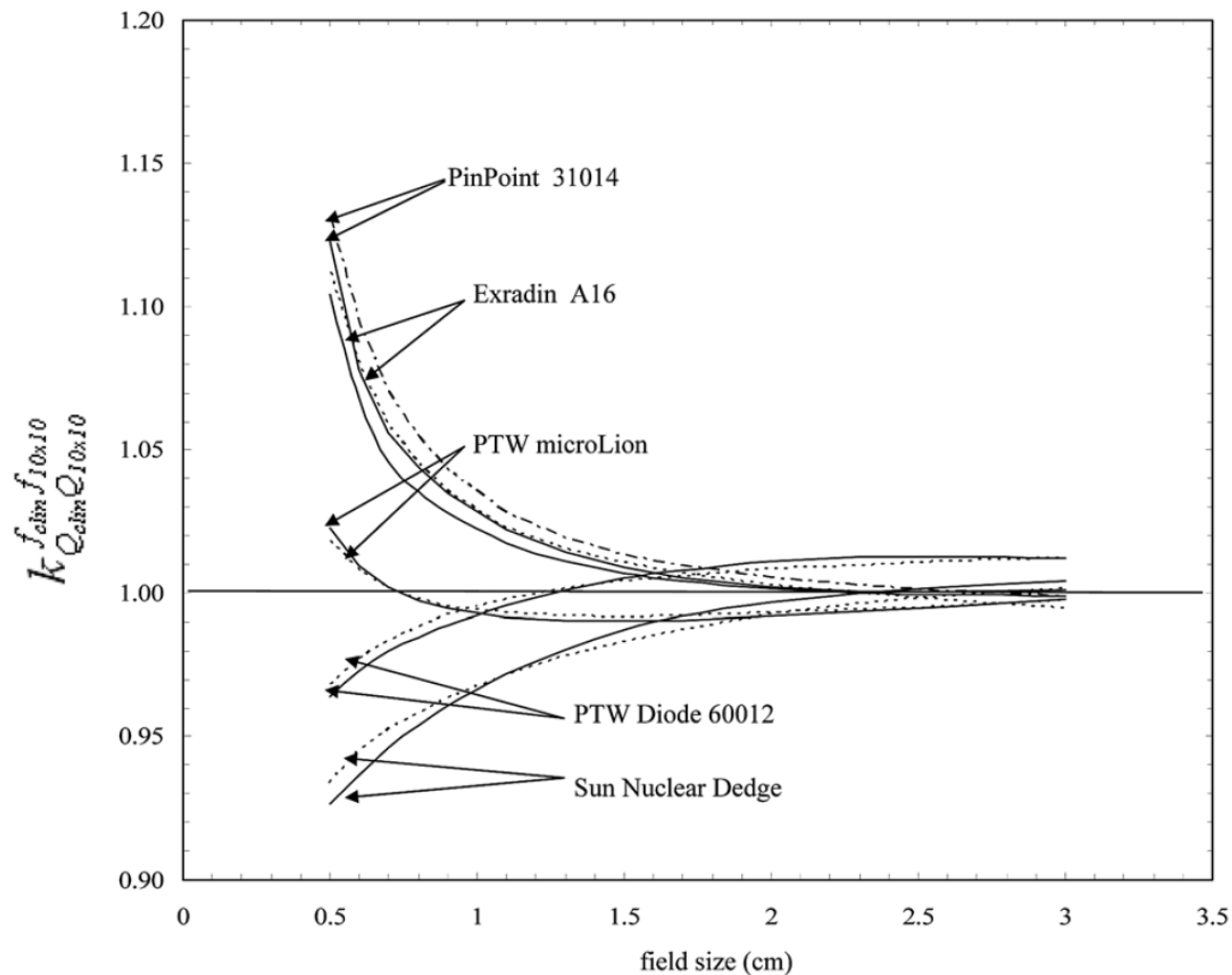


Yamamoto, Masaaki, et al. "Gamma Knife radiosurgery for numerous brain metastases: is this a safe treatment?." *International Journal of Radiation Oncology* Biology* Physics* 53.5 (2002): 1279-1283.

TrueBeam SRS - evolution of target size



Small field dosimetry



Francescon et al. Medical Physics, Vol. 38, No. 12, December 2011

Small field dosimetry

Output for square fields measured using EDR2 and calculated using AAA.
Difference between calculation and measurement is given in parentheses.

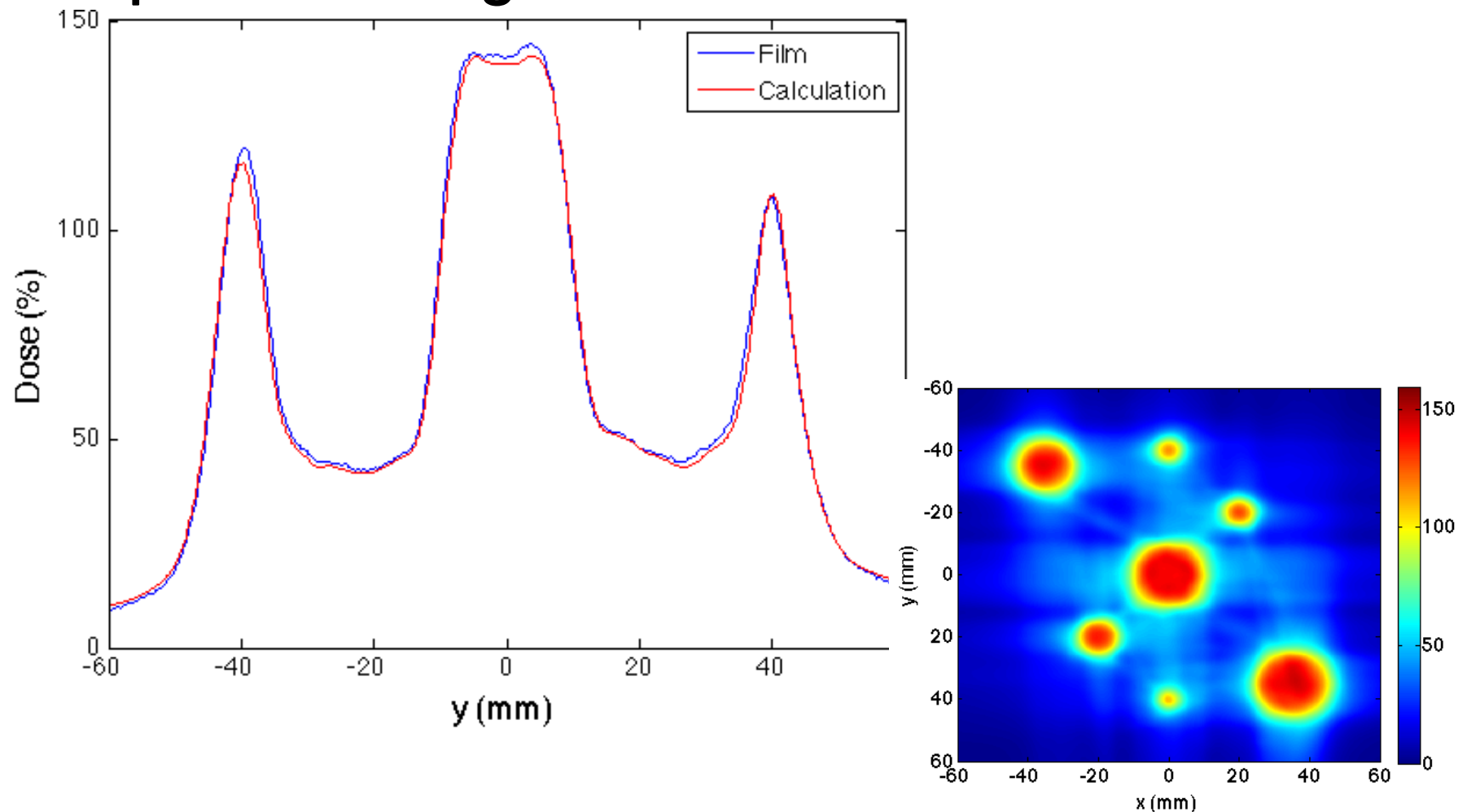
Field (cm)	6 MV FFF		10 MV FFF	
	EDR2	AAA	EDR2	AAA
3	0.629	0.623 (-0.9%)	0.718	0.721 (0.4%)
2	0.587	0.595 (1.4%)	0.670	0.679 (1.4%)
1	0.486	0.529 (8.9%)	0.519	0.562 (8.2%)
0.5	0.289	0.415 (43.7%)	0.305	0.398 (30.6%)

Small field dosimetry

Output for square MLC fields measured using EDR2 and calculated using AAA. Difference between calculation and measurement is given in parentheses.

MLC Field (cm)	Jaw field (cm)	6 MV FFF		10 MV FFF	
		EDR2	AAA	EDR2	AAA
1	10 x 10	0.523	0.535 (2.3%)	0.569	0.569 (-0.1%)
1	2.6 x 1.4	0.521	0.524 (0.6%)	0.560	0.560 (-0.0%)
0.5	10 x 10	0.385	0.379 (-1.6%)	0.403	0.374 (-7.3%)
0.5	2.1 x 0.9	0.377	0.370 (-2.0%)	0.390	0.366 (-6.0%)

Planning system calculation accuracy for multiple small targets



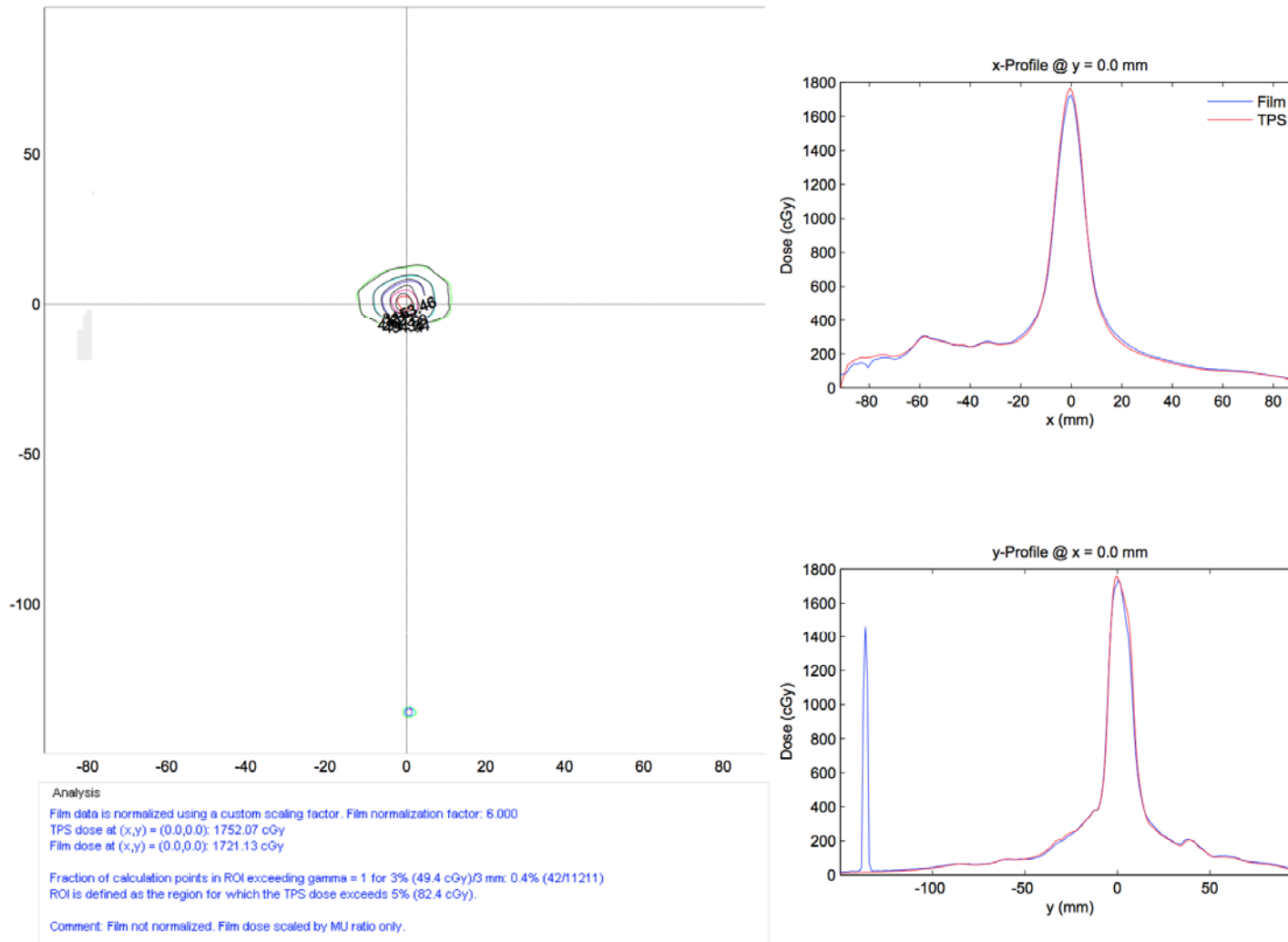
Multi-target single isocenter patient specific QA



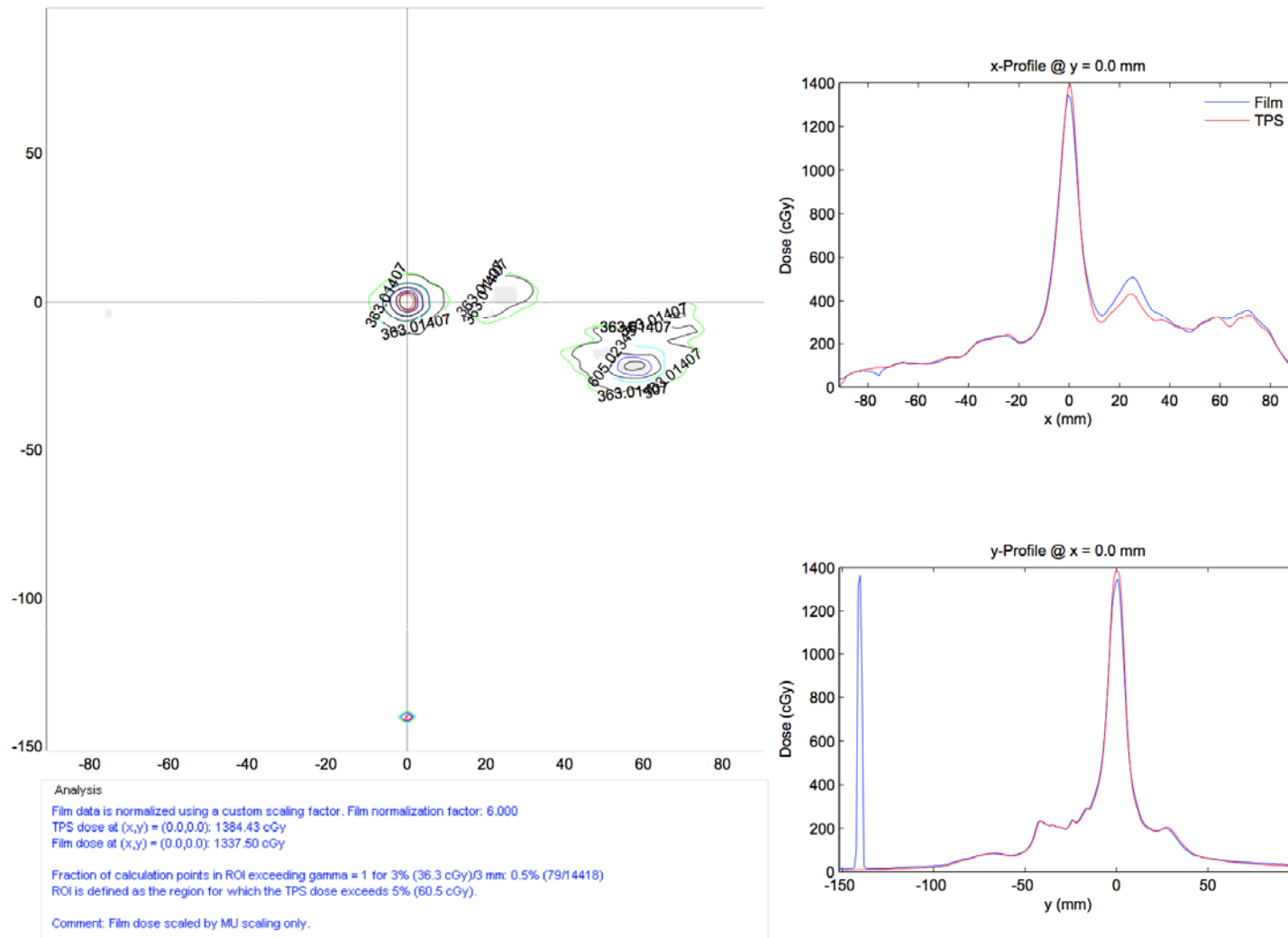
Multi-target single isocenter patient specific QA

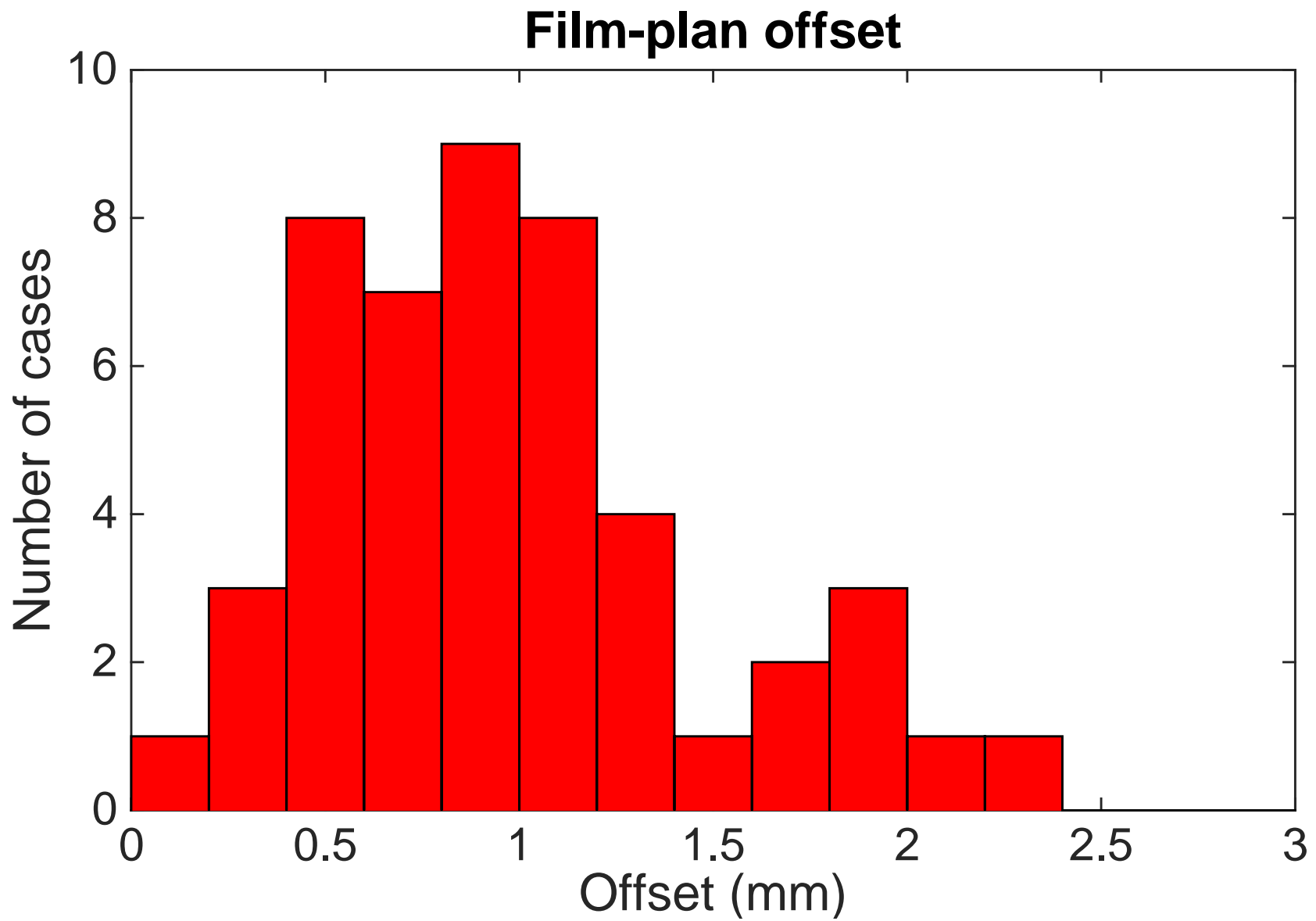


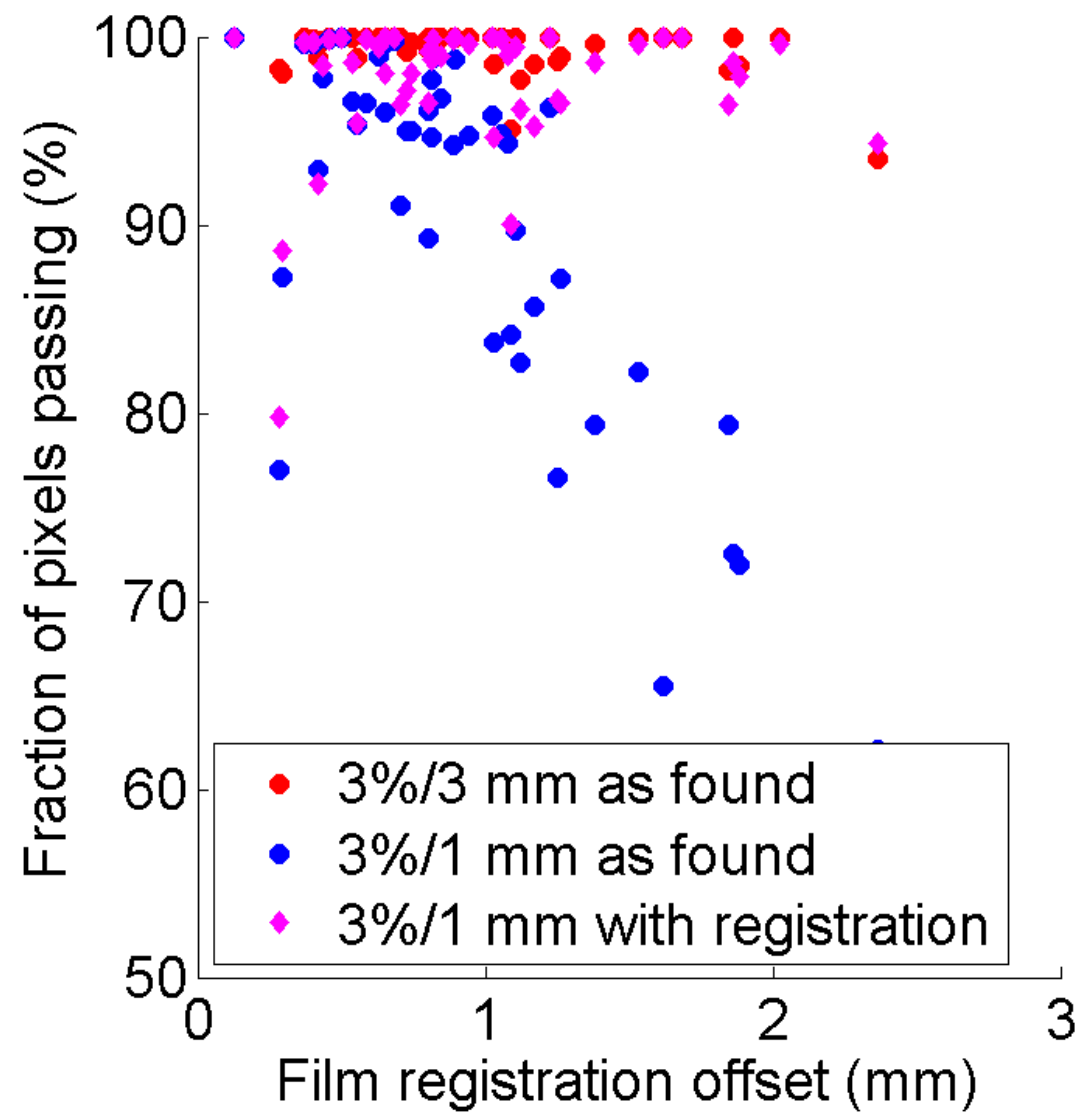
8 Target case – largest target (0.83 cm³)



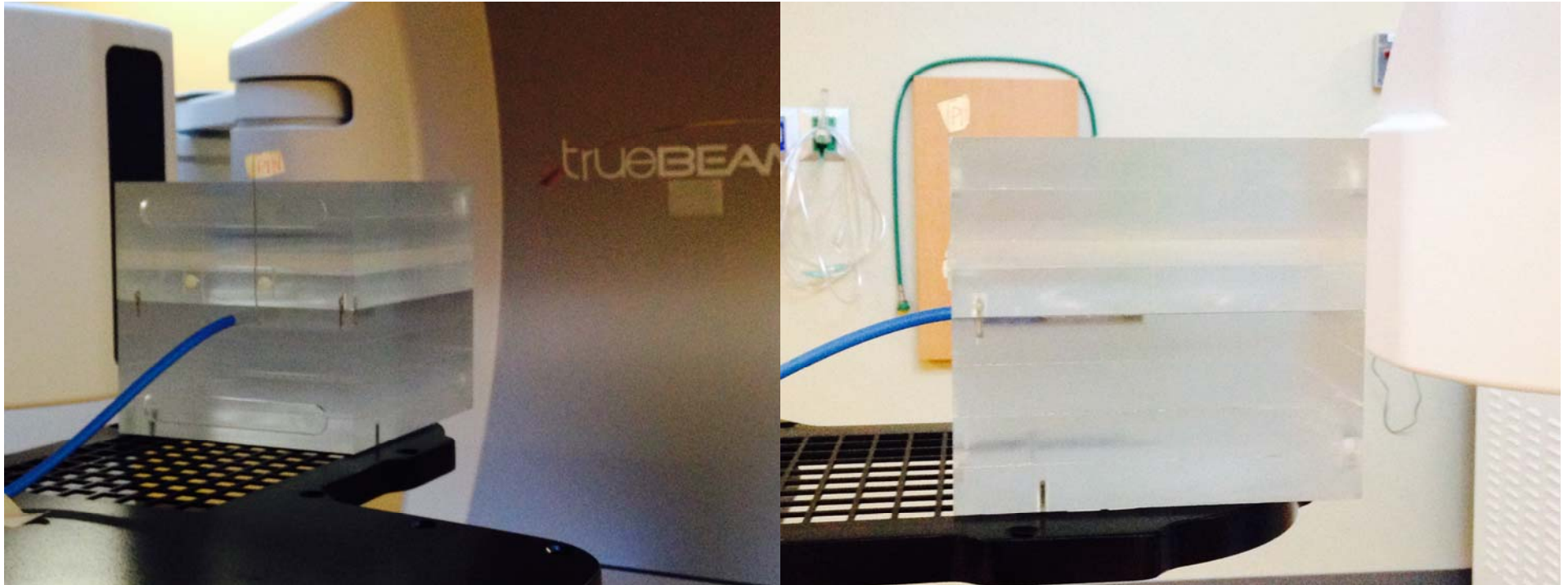
8 Target case – smallest target (0.02 cm³)

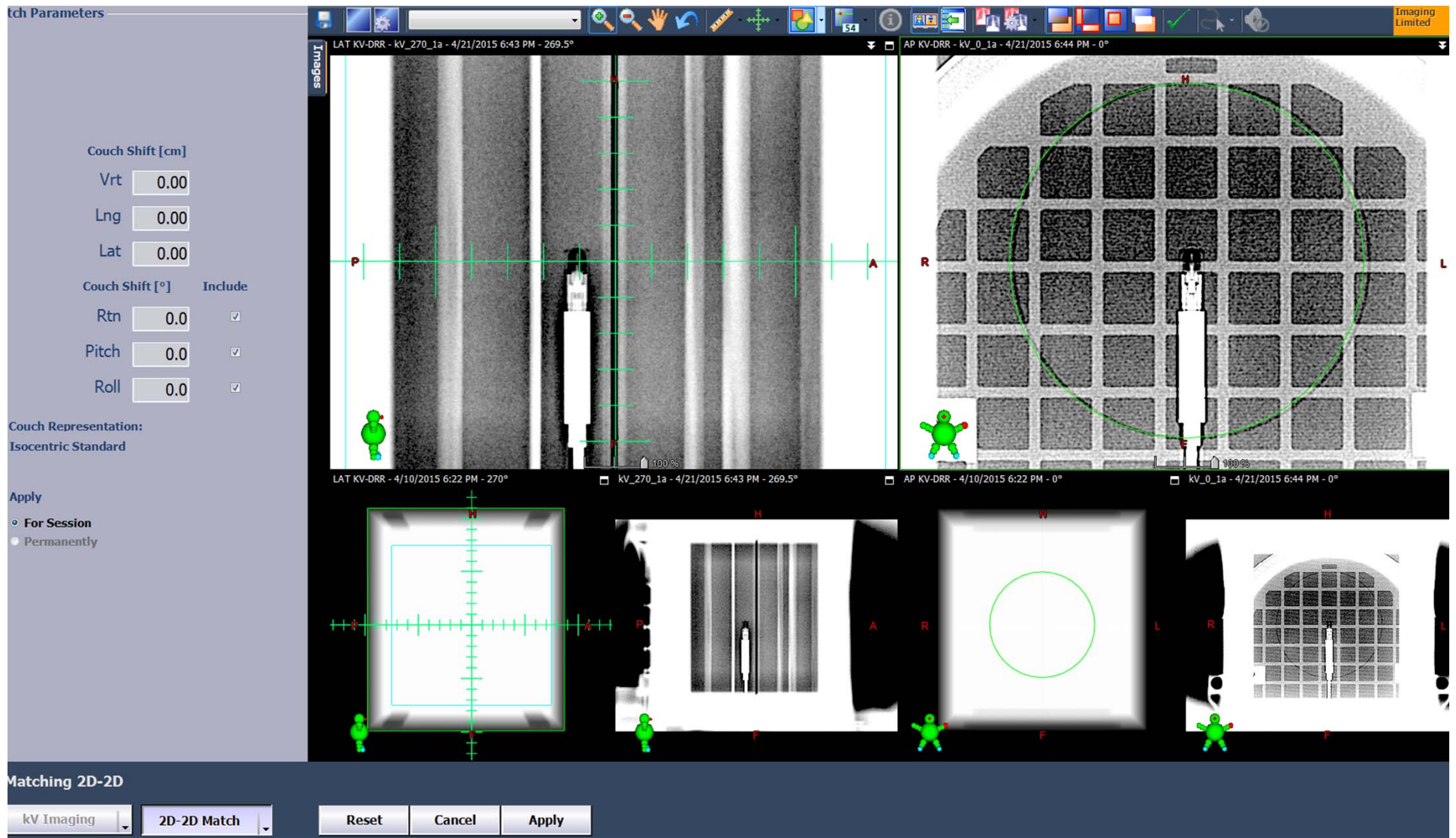


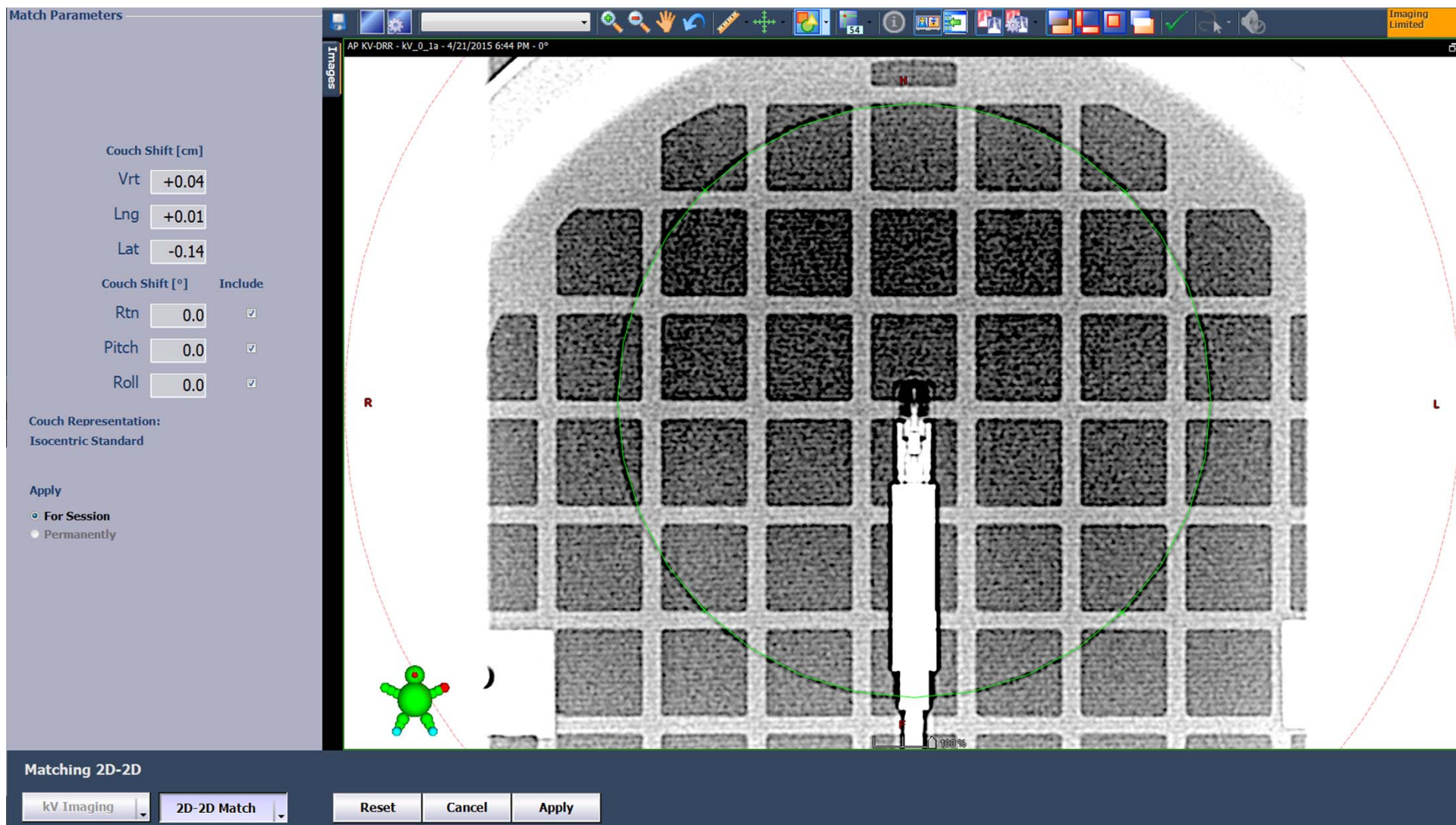




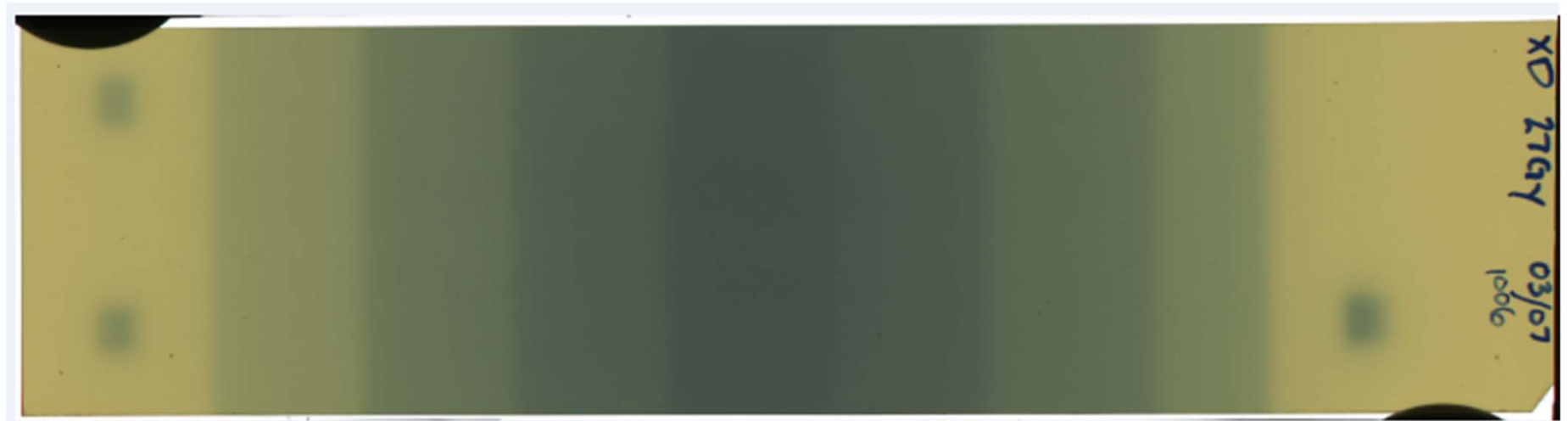
Solution: IGDQA

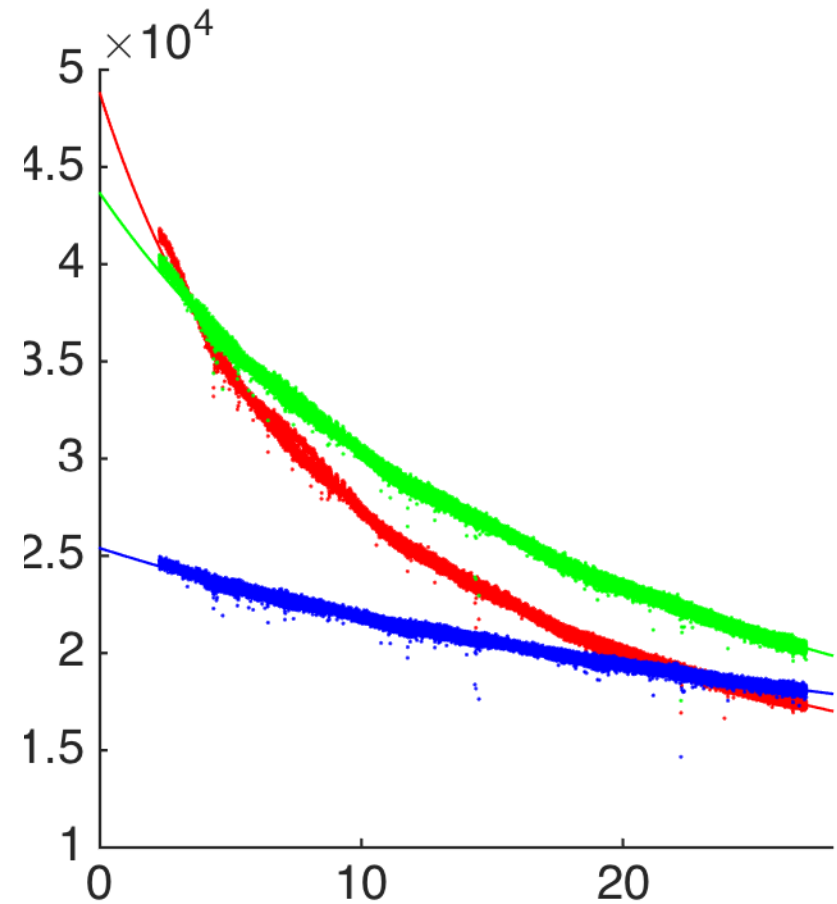
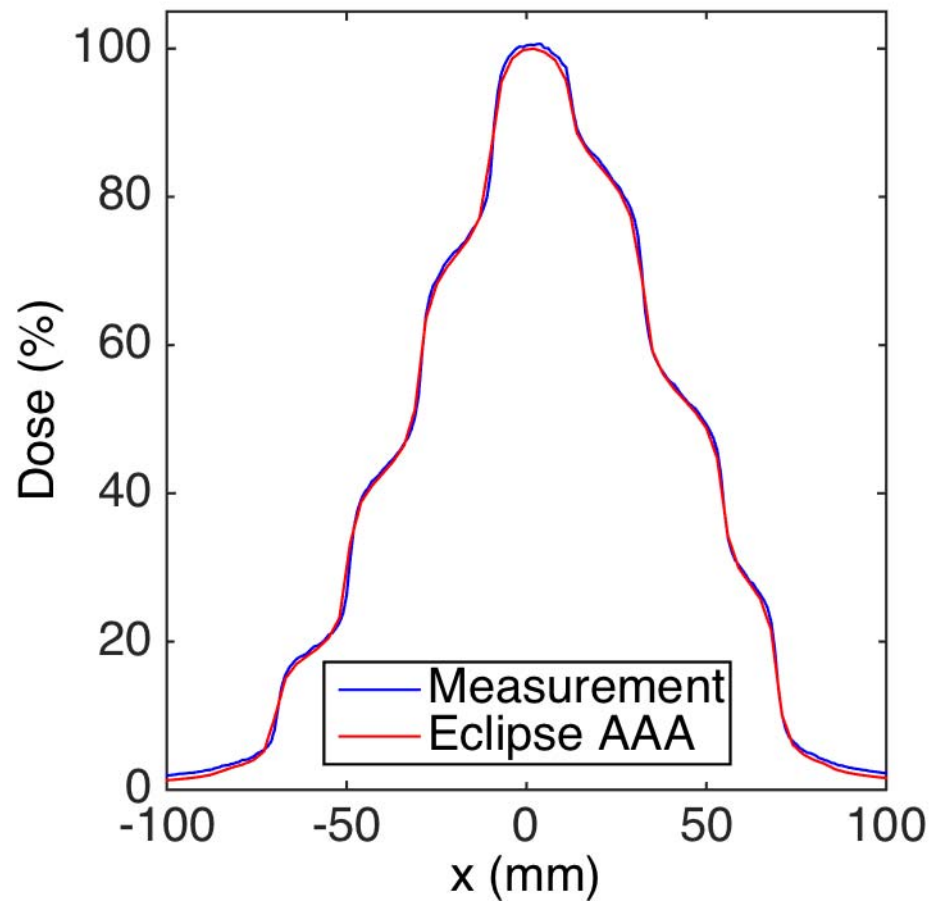






Film calibration using step wedge

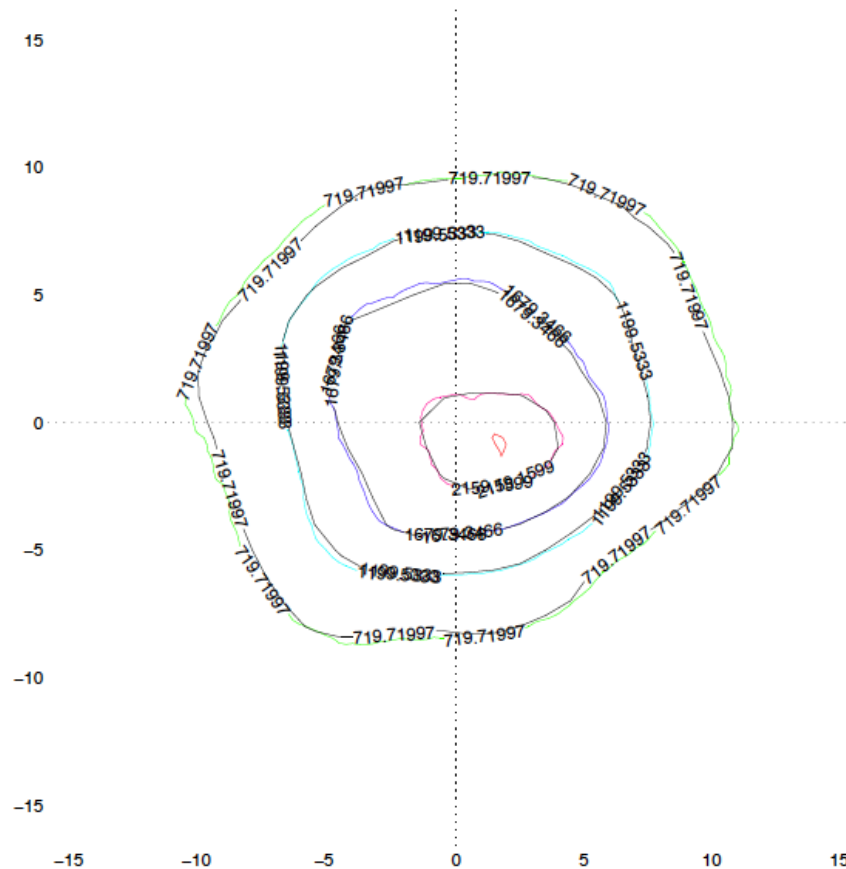




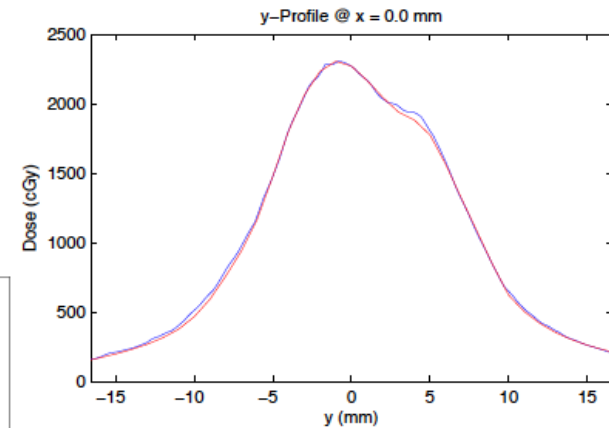
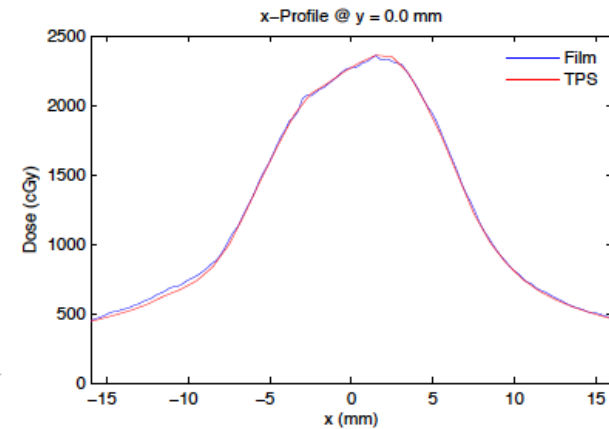
Does IGDQA improve alignment?

- IGDQA phantom: Mean offset magnitude = 0.43 mm (0.13 to 0.64)
- Previous experience: Mean offset magnitude = 0.96 mm (0.13 to 2.36)

Evaluation



Analysis
 Using green color channel.
 Film data is normalized to the TPS mean dose in the region > 90% (2159.2 cGy).
 Film normalization factor: 0.958
 Additional registration shift: x = -0.32 mm, y = 0.16 mm (magnitude = 0.35 mm)
 Dose at (0,0,0): TPS = 2271.54 cGy, Film = 2269.14 cGy
 Fraction of calculation points in ROI exceeding gamma = 1 for 3% (72.0 cGy)/1 mm: 0.0% (0/6474)
 ROI is defined as the region within 17.5 mm for which the TPS dose exceeds 20% (479.8 cGy).



Evaluation

Analysis

Using green color channel.

Film data is normalized to the TPS mean dose in the region > 90% (2159.2 cGy).

Film normalization factor: 0.958




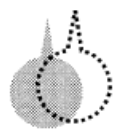
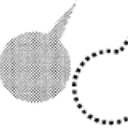
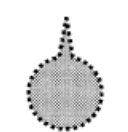
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Table 2. Comparison of the various volume-based conformity indices in various clinical settings

Treatment plan	Parameters	$\frac{V_{RI}}{TV}$ RTOG (1)	$\frac{TV_{RI}}{TV}$ SALT-Lomax (28,32)	$\frac{TV_{RI}}{V_{RI}}$ Lomax (32)	$\frac{TV_{RI} \times TV_{RI}}{TV \times V_{RI}}$ Van't Riet (33)
	TV = 5 cm ³ * V _{RI} = 10 cm ³ § TV _{RI} = 5 cm ³ ¶	2	1	0.50	0.50
	TV = 5 cm ³ V _{RI} = 3 cm ³ TV _{RI} = 3 cm ³	0.60	0.60	1	0.60
	TV = 5 cm ³ V _{RI} = 5 cm ³ TV _{RI} = 4 cm ³	1	0.80	0.80	0.64
	TV = 5 cm ³ V _{RI} = 5 cm ³ TV _{RI} = 2.5 cm ³	1	0.50	0.50	0.25
	TV = 5 cm ³ V _{RI} = 5 cm ³ TV _{RI} = 0 cm ³	1	0	0	0
	TV = 5 cm ³ V _{RI} = 5 cm ³ TV _{RI} = 5 cm ³	1	1	1	1

Abbreviations: TV = Target Volume (gray); V_{RI} = Volume of the Reference Isodose (dotted line); TV_{RI} = Target volume covered by the Reference Isodose = intersection of TV and V_{RI}.

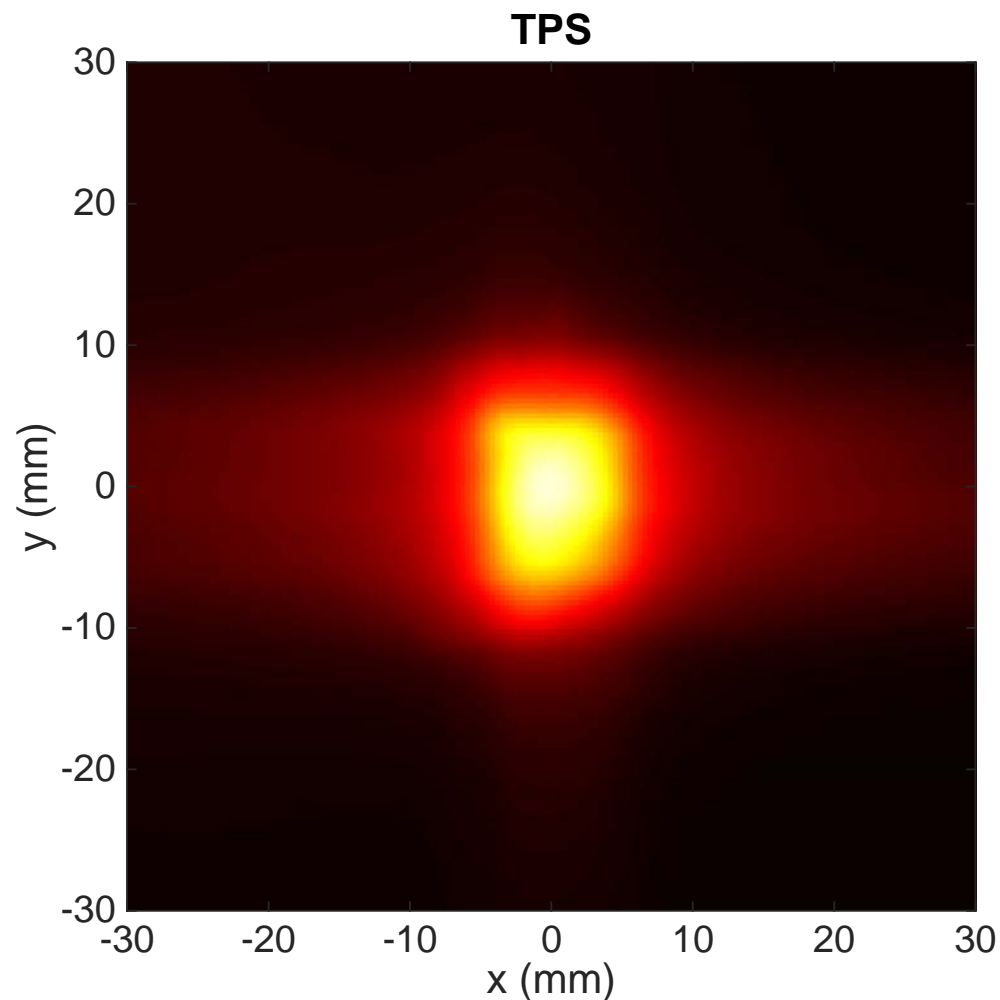



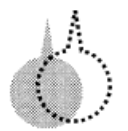
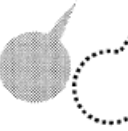
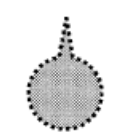


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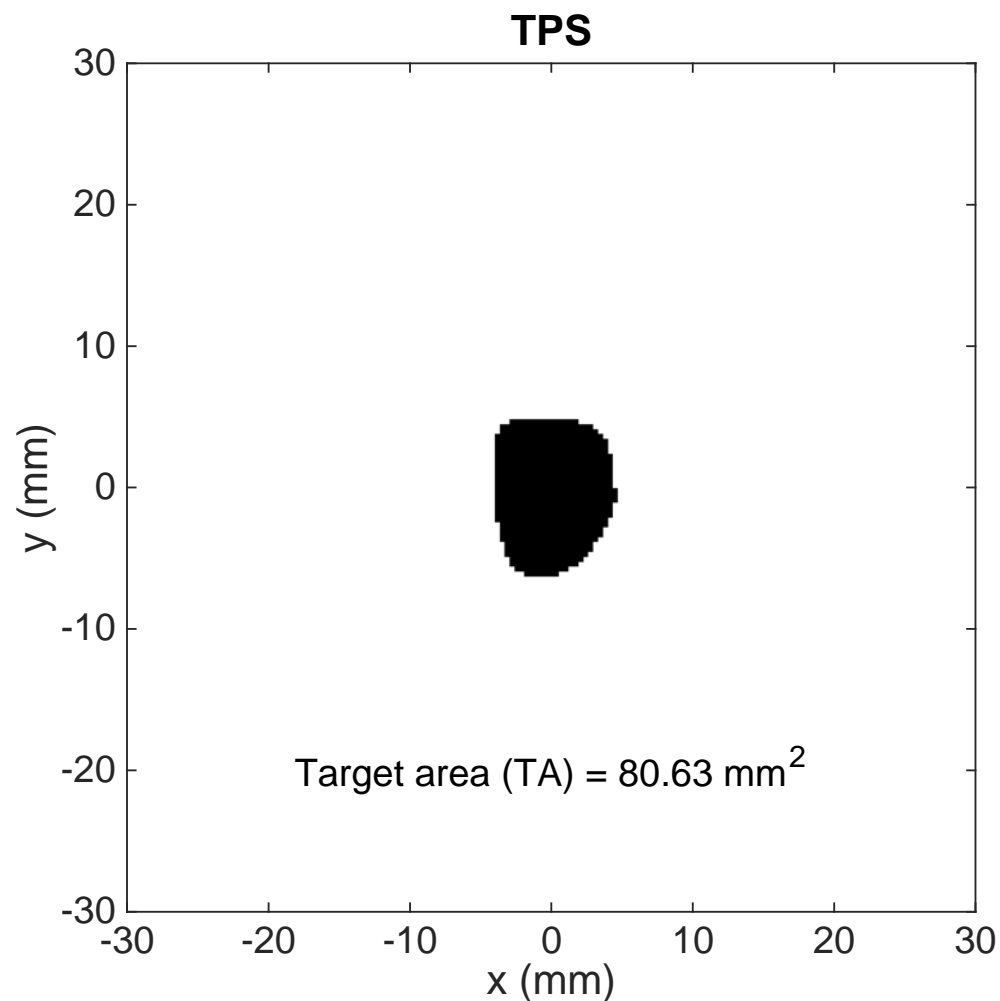



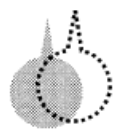
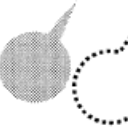
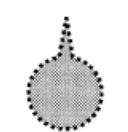


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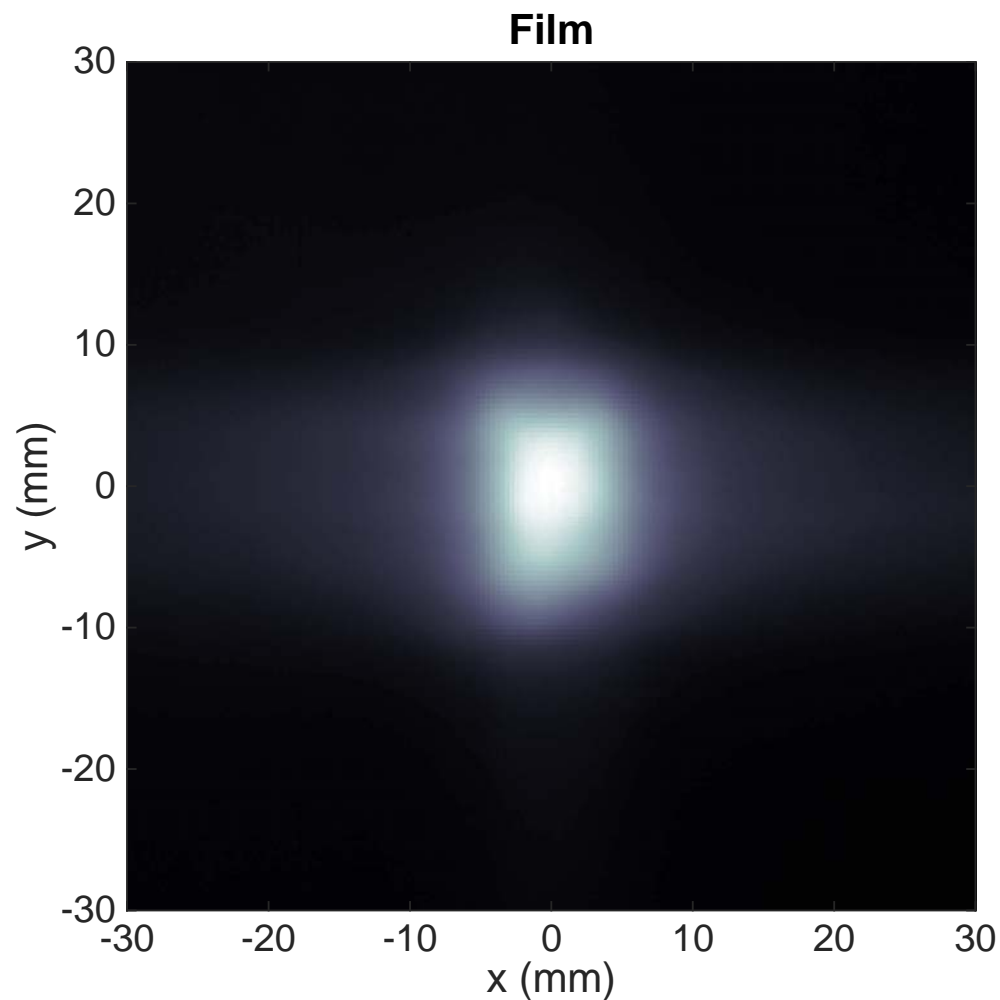



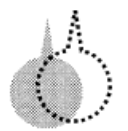
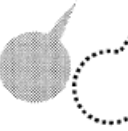
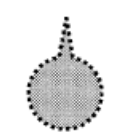


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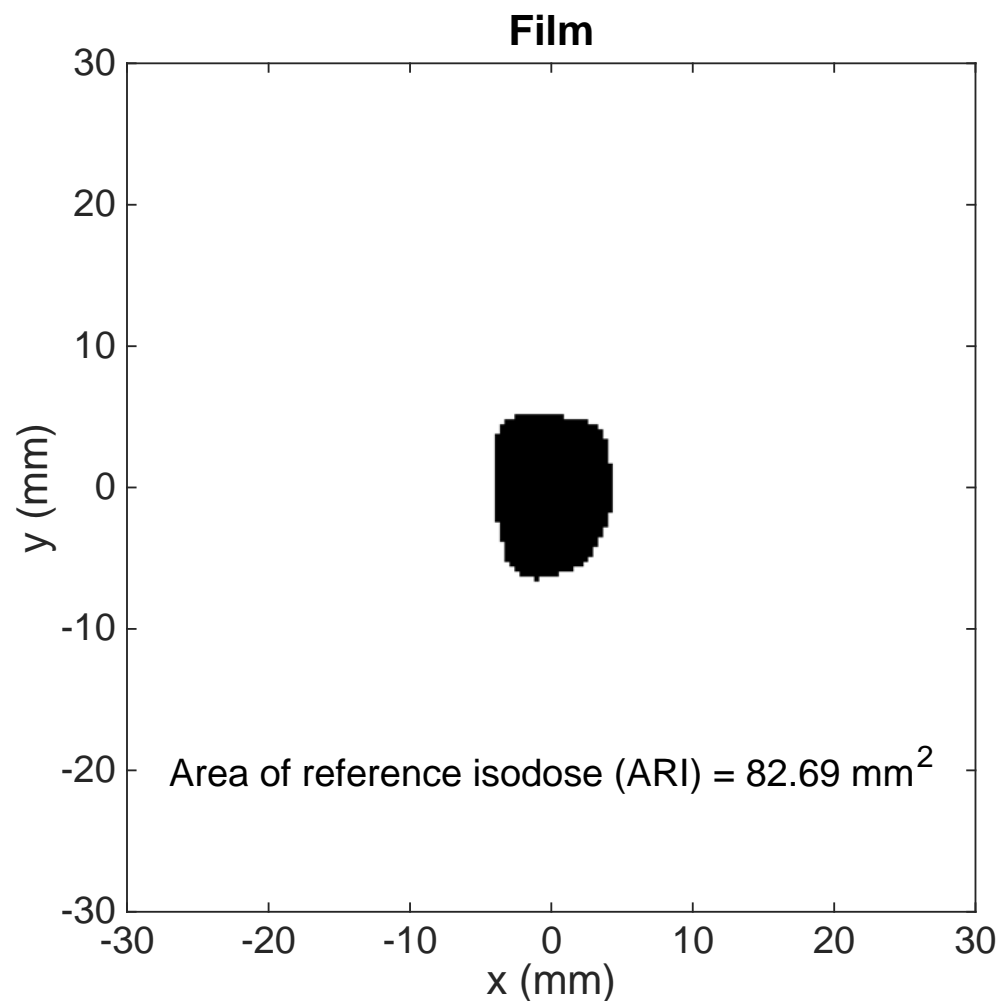


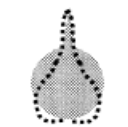

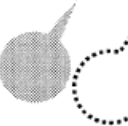
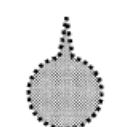


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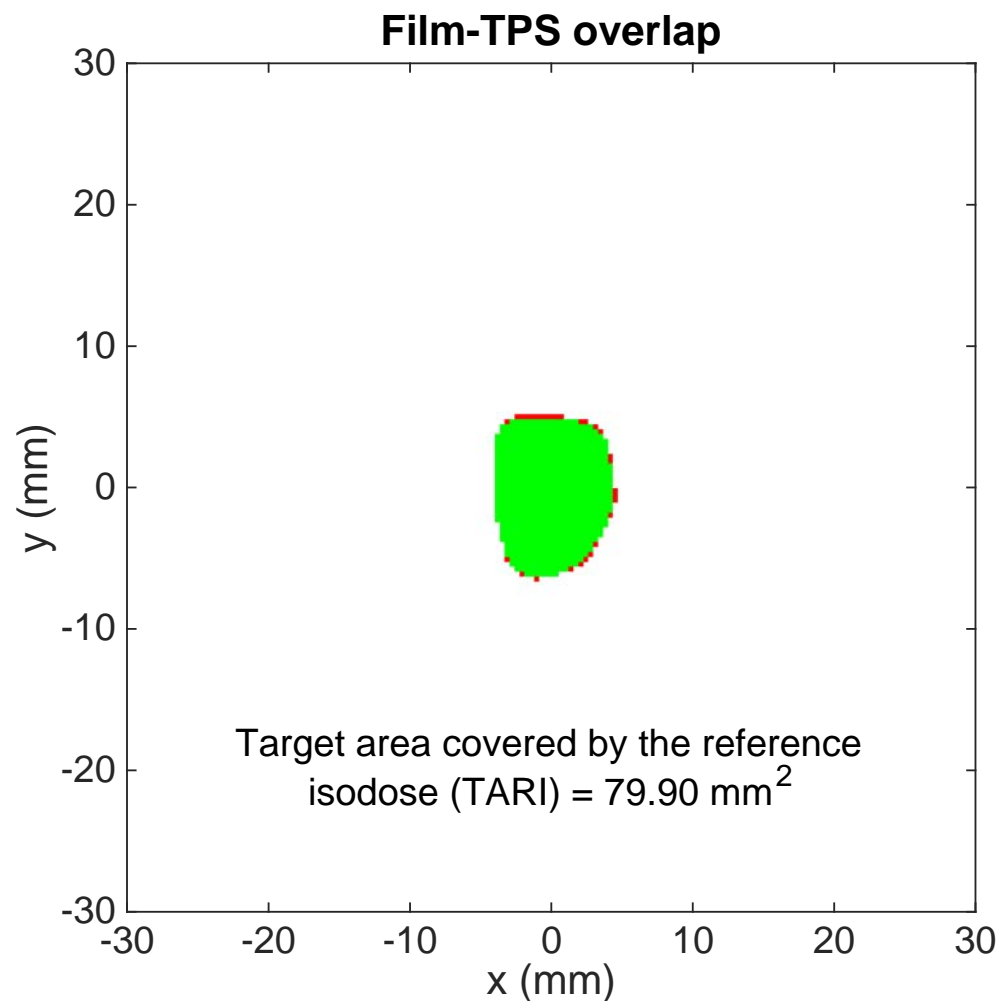



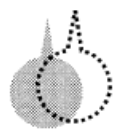
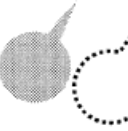
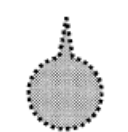
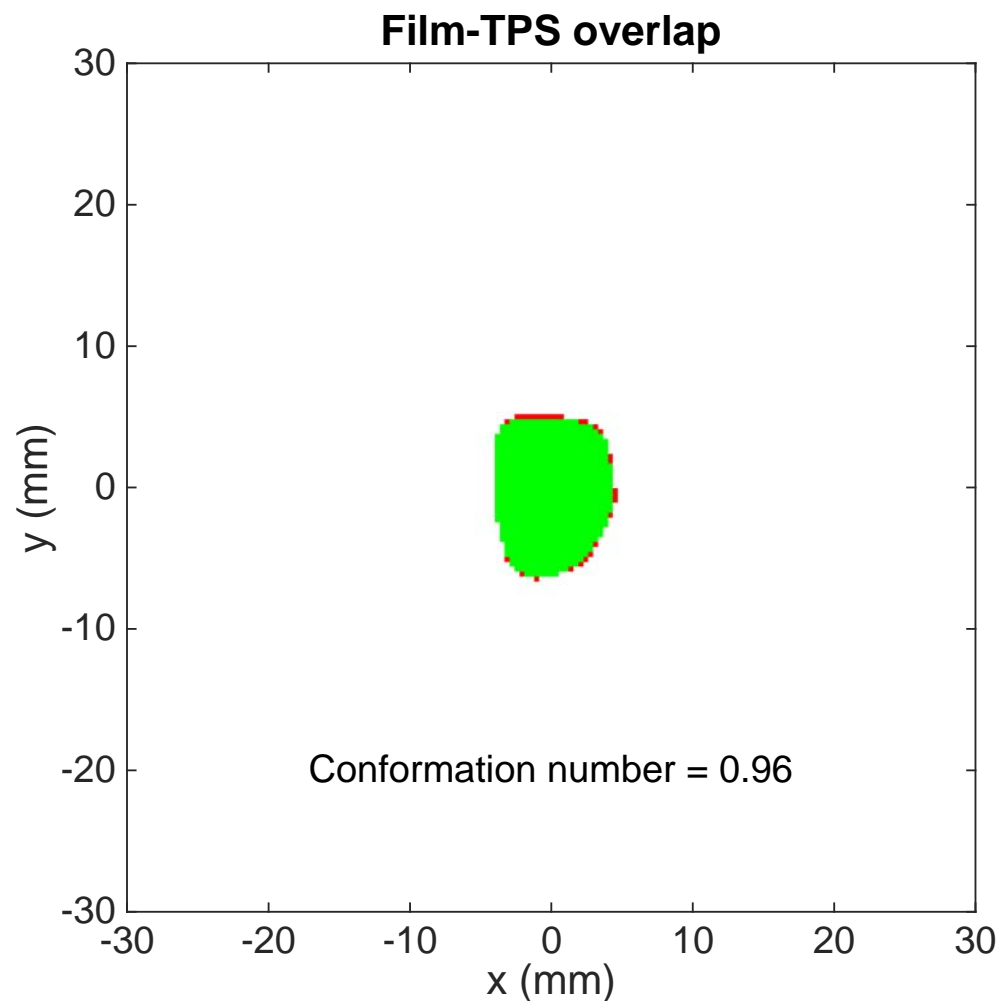
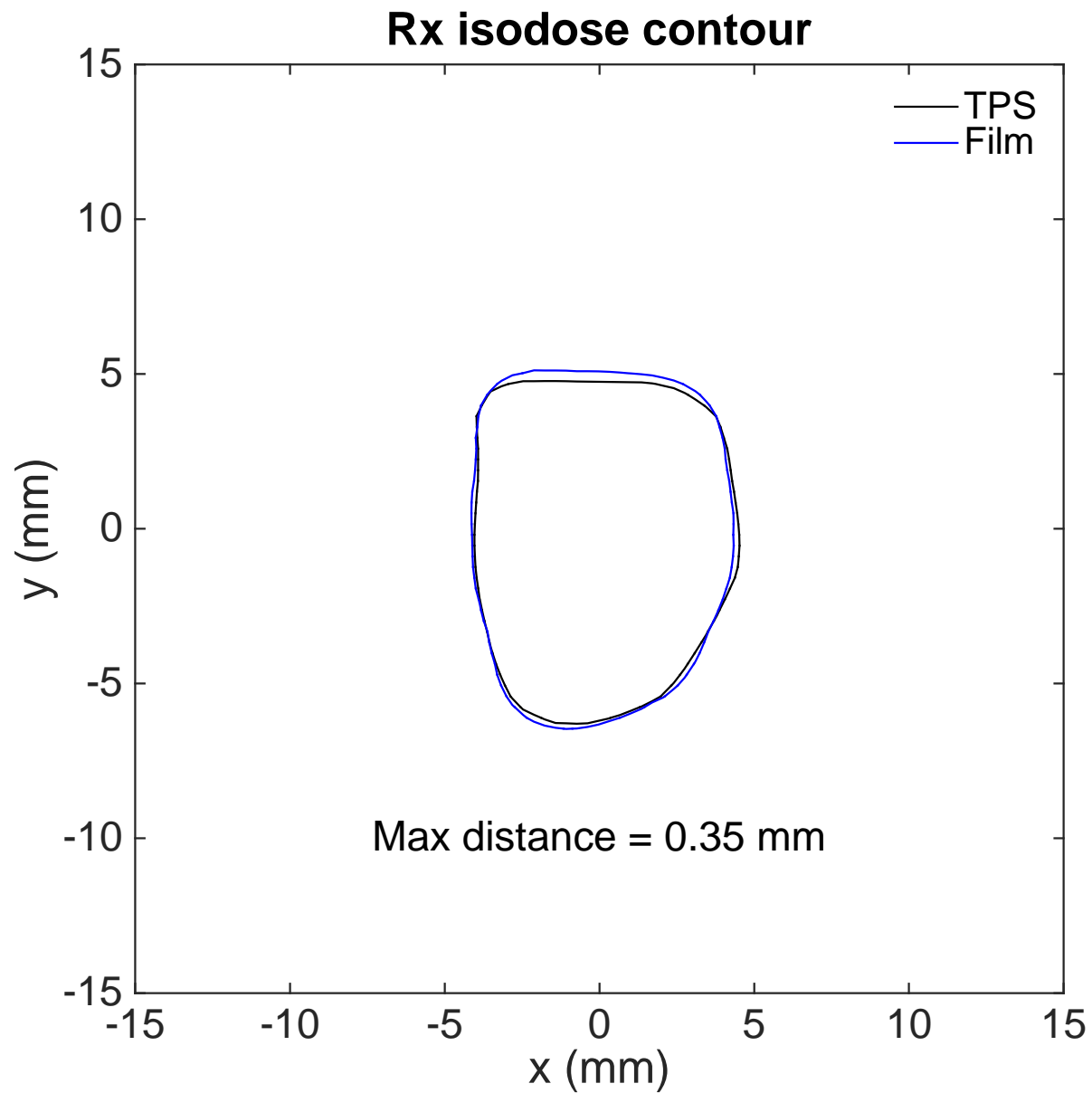


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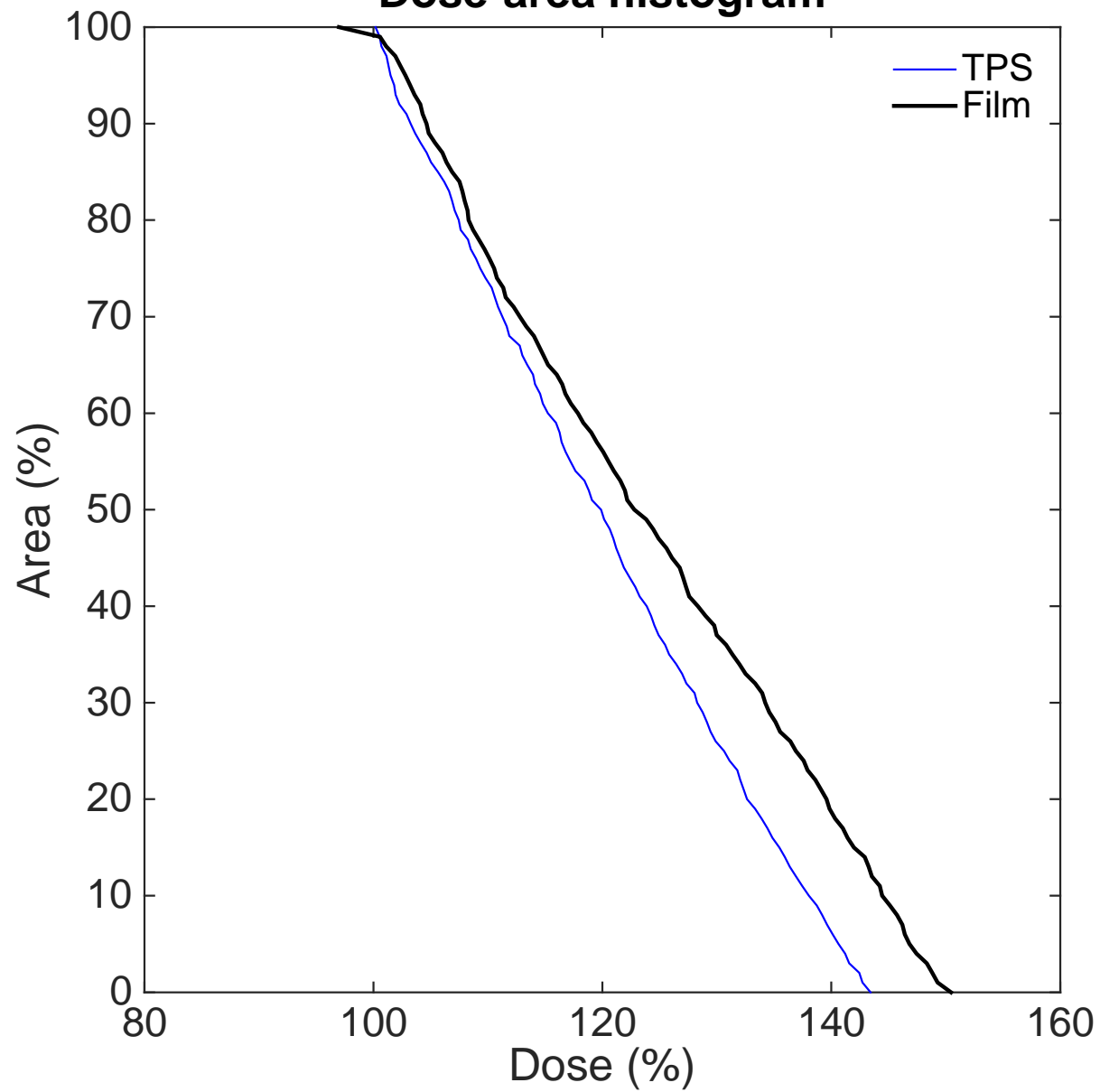
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Dose-area histogram



Conclusion

- Quality assurance for small targets is challenging but doable.
- Need to use film with careful calibration.
- Use a chamber whenever possible – use to cross check film.
- Patient specific geometric QA can be achieved using IGDQA.
- Which evaluation metrics are most useful for small target QA is still an open question.

Questions?

