







مستشفى الملك فيصل التخصصي ومركز الأبحاث  
 King Faisal Specialist Hospital & Research Centre  
 مؤسسة عامة - Gen. Org.

accept the challenge

# 2016 RADIOTHERAPY PLAN COMPETITION

Be the strongest link in the radiotherapy chain



**Hugues Mailleux**  
 Medical Physics Department  
 Institut Paoli-Calmettes  
 Marseille  
 France

Sunday 17 July 2016

Centre régional de lutte contre le cancer Provence-Alpes-Côte d'Azur

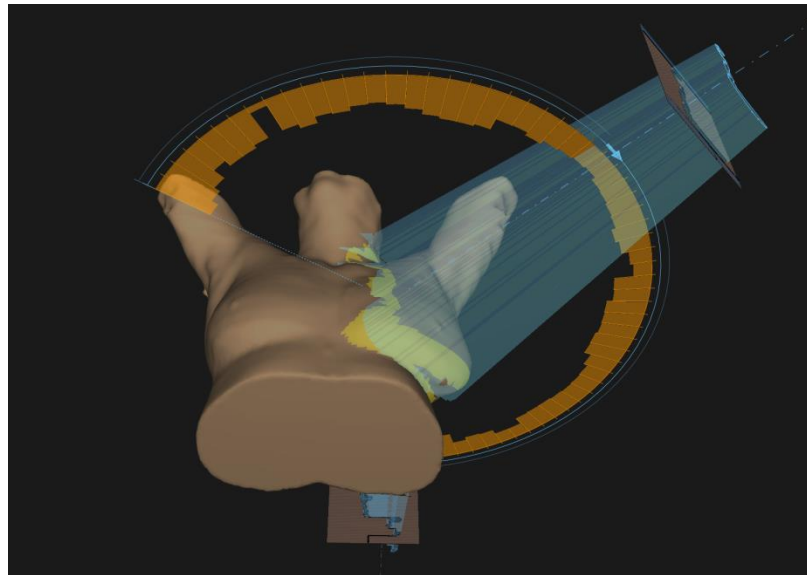


# AGENDA

1. Introduction
2. Material
3. Optimization process
4. Results
5. Comments
6. Conclusion
7. Thanks

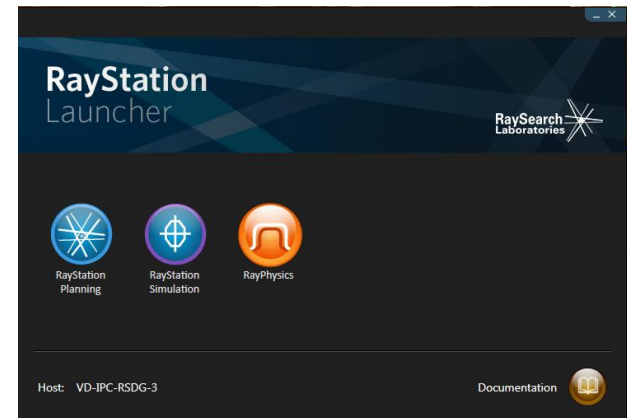
# INTRODUCTION

- **Plan Competition:** opportunity to evaluate our current treatment technique for left sided breast
  - ✓ VMAT with 2 partial arcs
  - ✓ First patient treated in september 2014



# TREATMENT PLANNING SYSTEM

- RayStation (RaySearch) r.5.0
  - ✓ Dose calculation for photon beams
    - Collapsed cone convolution superposition algorithm
    - GPU: Fluence + Convolution
  - ✓ Plan Optimization
    - Standard inverse planning
    - Clinical goals



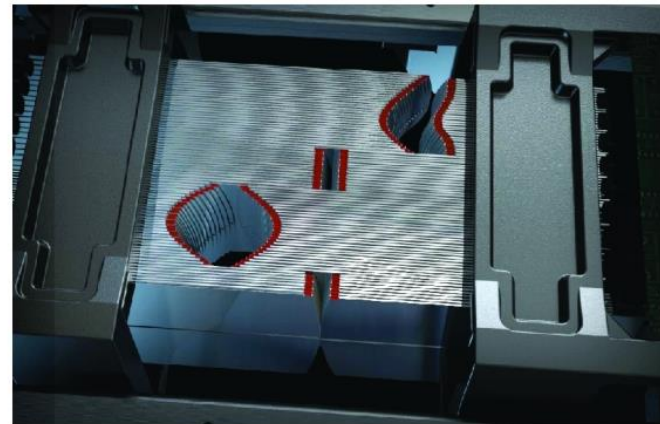
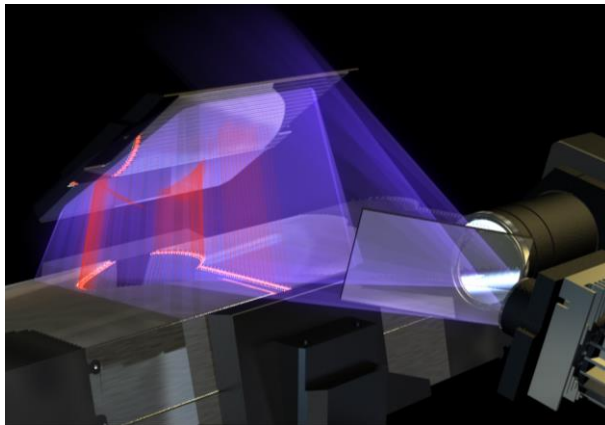
# TREATMENT PLANNING SYSTEM

## ○ Clinical goals

Dose	ROI/POI	Clinical goal	Value	Result	% outside grid
Plan dose: Mailleux Hugues 2 (CT 1)	BREAST_RIGHT	At most 2.00 Gy dose at 0.3 cm <sup>3</sup> volume	11.31 Gy	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	BREAST_RIGHT	At most 2.00 Gy dose at 5.00 % volume	3.26 Gy	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	HEART	At most 4.00 Gy average dose	14.91 Gy	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	HEART	At most 15.00 % volume at 15.00 Gy dose	39.26 %	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	HEART	At most 20.00 Gy dose at 5.00 % volume	34.02 Gy	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	LUNG_LEFT	At most 9.00 Gy average dose	22.04 Gy	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	LUNG_LEFT	At most 15.00 % volume at 20.00 Gy dose	43.45 %	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	LUNG_LEFT	At most 30.00 % volume at 10.00 Gy dose	86.87 %	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	LUNG_LEFT	At most 50.00 % volume at 5.00 Gy dose	100.00 %	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	LUNG_RIGHT	At most 3.00 % volume at 5.00 Gy dose	12.20 %	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	PTV_TOT_EVAL	At least 47.50 Gy dose at 99.00 % volume	48.90 Gy	✓	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	PTV_TOT_EVAL	At least 50.00 Gy dose at 95.00 % volume	49.80 Gy	!	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	PTV_TOT_EVAL	At most 52.00 Gy dose at 50.00 % volume	51.61 Gy	✓	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	PTV_TOT_EVAL	At most 55.00 Gy dose at 0.3 cm <sup>3</sup> volume	54.81 Gy	✓	0 %
Plan dose: Mailleux Hugues 2 (CT 1)	SPINAL CORD	At most 8.00 Gy dose at 0.0 cm <sup>3</sup> volume	14.08 Gy	!	0 %

# ACCELERATOR

- Versa HD (Elekta)
  - ✓ Standard 6 MV
  - ✓ MLC Agility

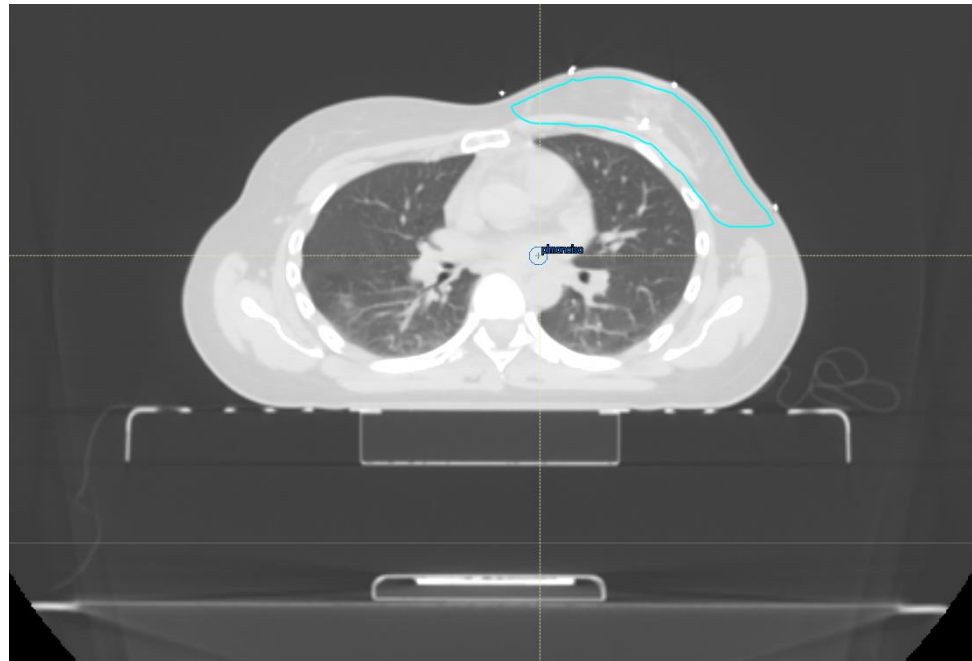


# OPTIMIZATION PROCESS

## 1. Beam geometry

# ISOCENTER POSITION

- Not guided by dosimetric considerations but by technical constraints:
- Constraint n°1: CBCT
  - ✓ The isocenter must be placed to avoid collisions

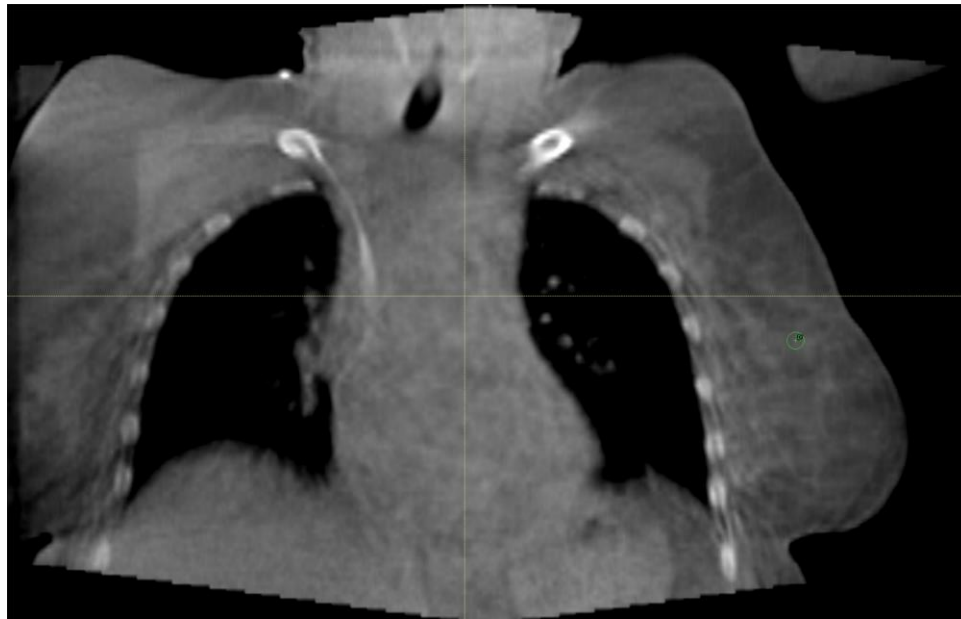




# ISOCENTER POSITION

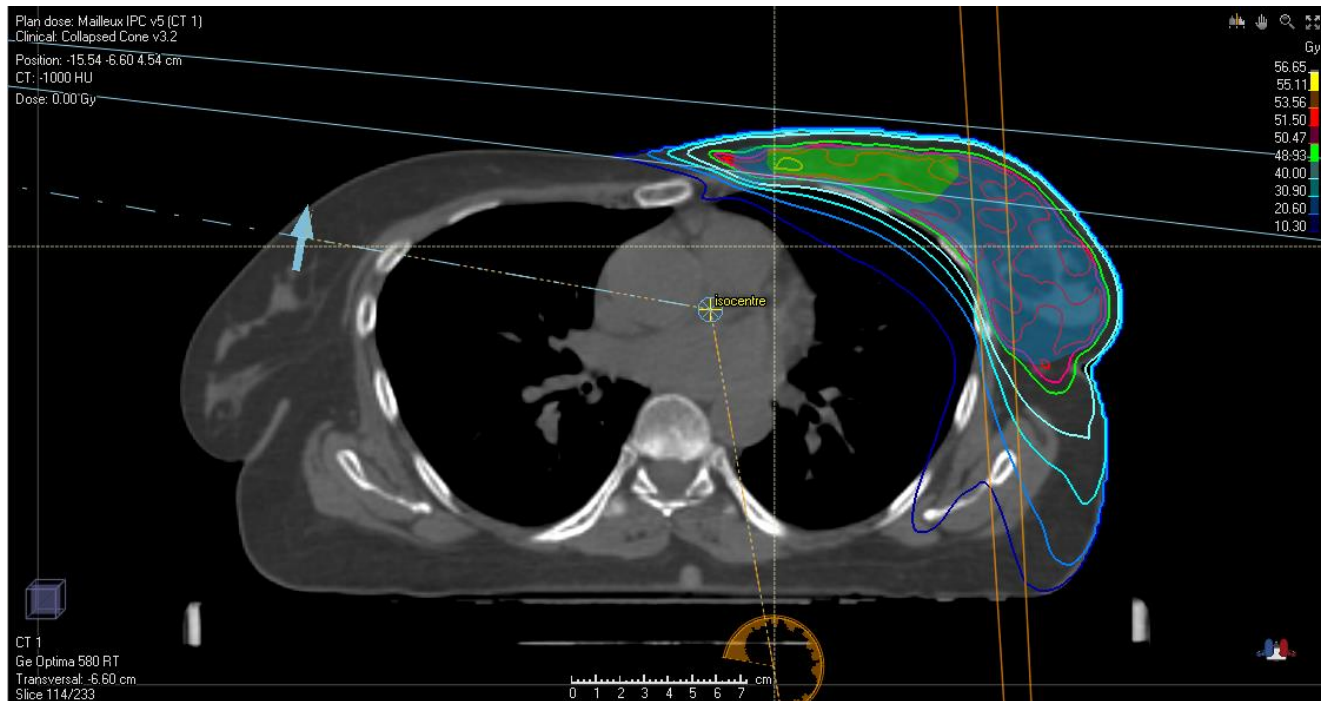
- **Constraint n°2: CBCT**

- ✓ The isocenter must be placed to get the entire breast inside the field of view



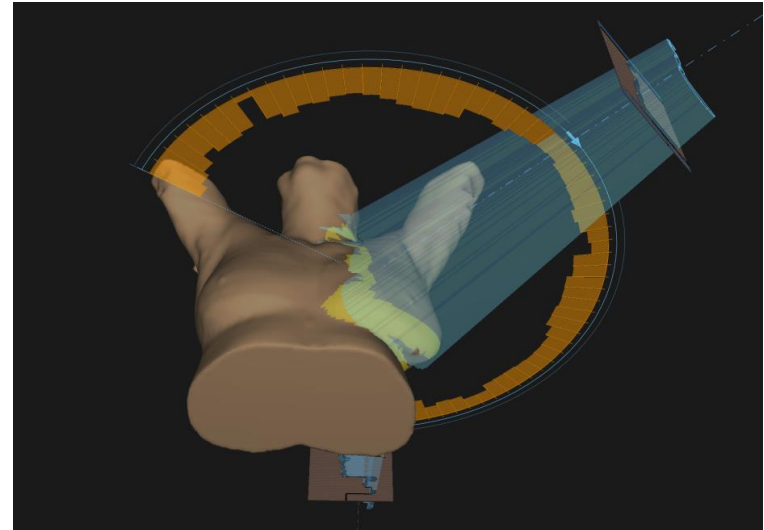
# ISOCENTER POSITION

- **Constraint n°3: Jaws and MLC maximum opening**
  - ✓ The isocenter must be placed to cover the entire PTV



# BEAM GEOMETRY

- **No couch rotation**
- **Gantry**
  - ✓ Arc 1:  $170^\circ \rightarrow \sim 300^\circ$
  - ✓ Arc 2:  $\sim 300^\circ \rightarrow 170^\circ$
- **Collimator :**
  - ✓ Arc 1:  $5^\circ$
  - ✓ Arc 2:  $355^\circ$
- **Grid size:**
  - ✓ Plan Competition: 1,5 mm
  - ✓ Current practice: 3 mm
- **Gantry spacing between 2 CP:  $4^\circ$**



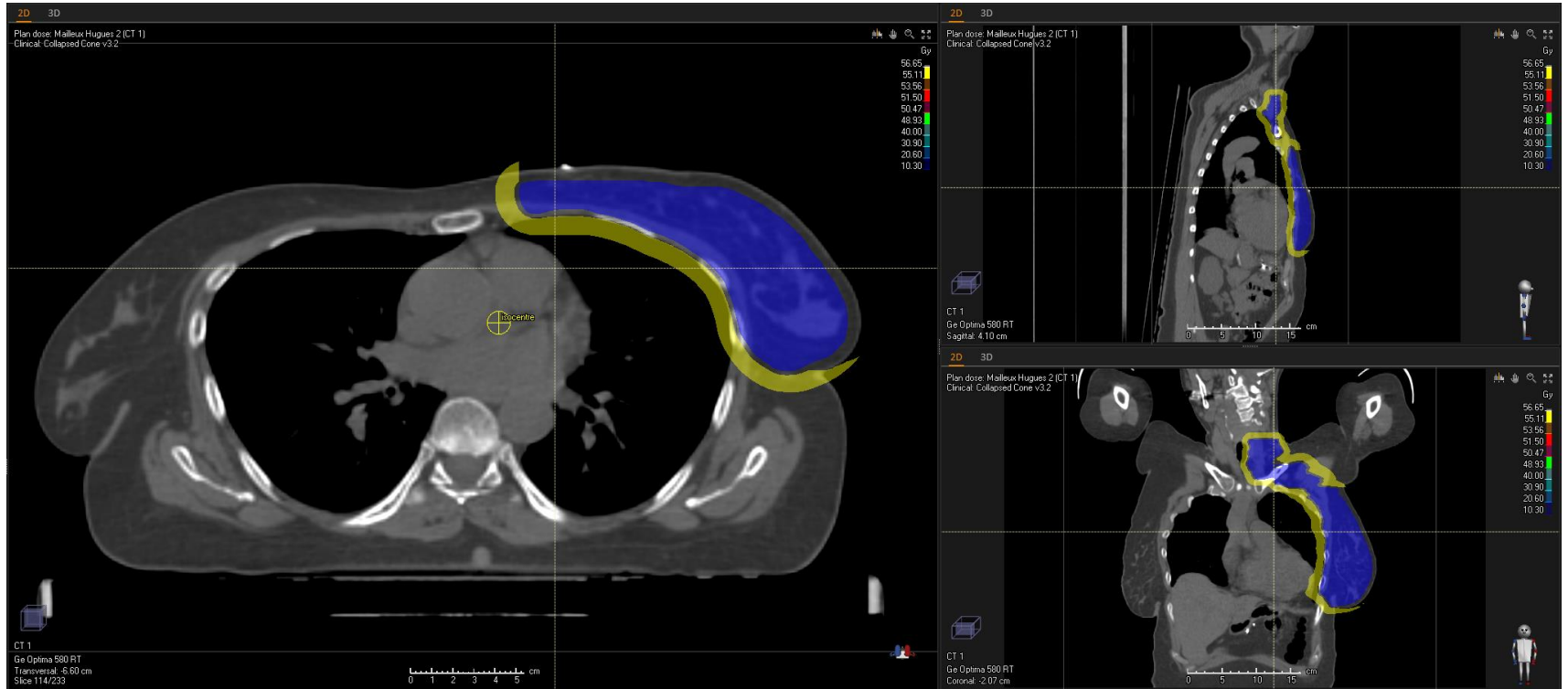
# OPTIMIZATION PROCESS

1. Beam geometry

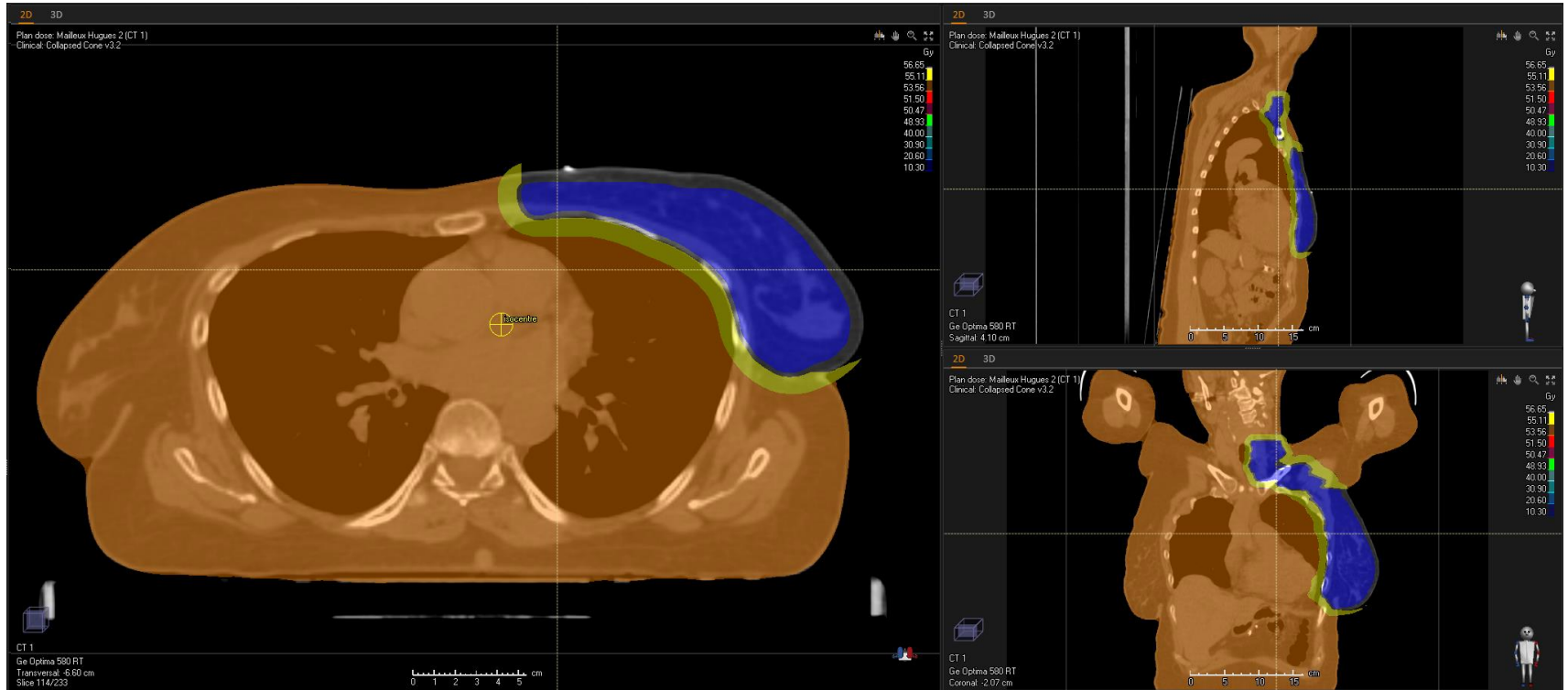


2. Create additional structures

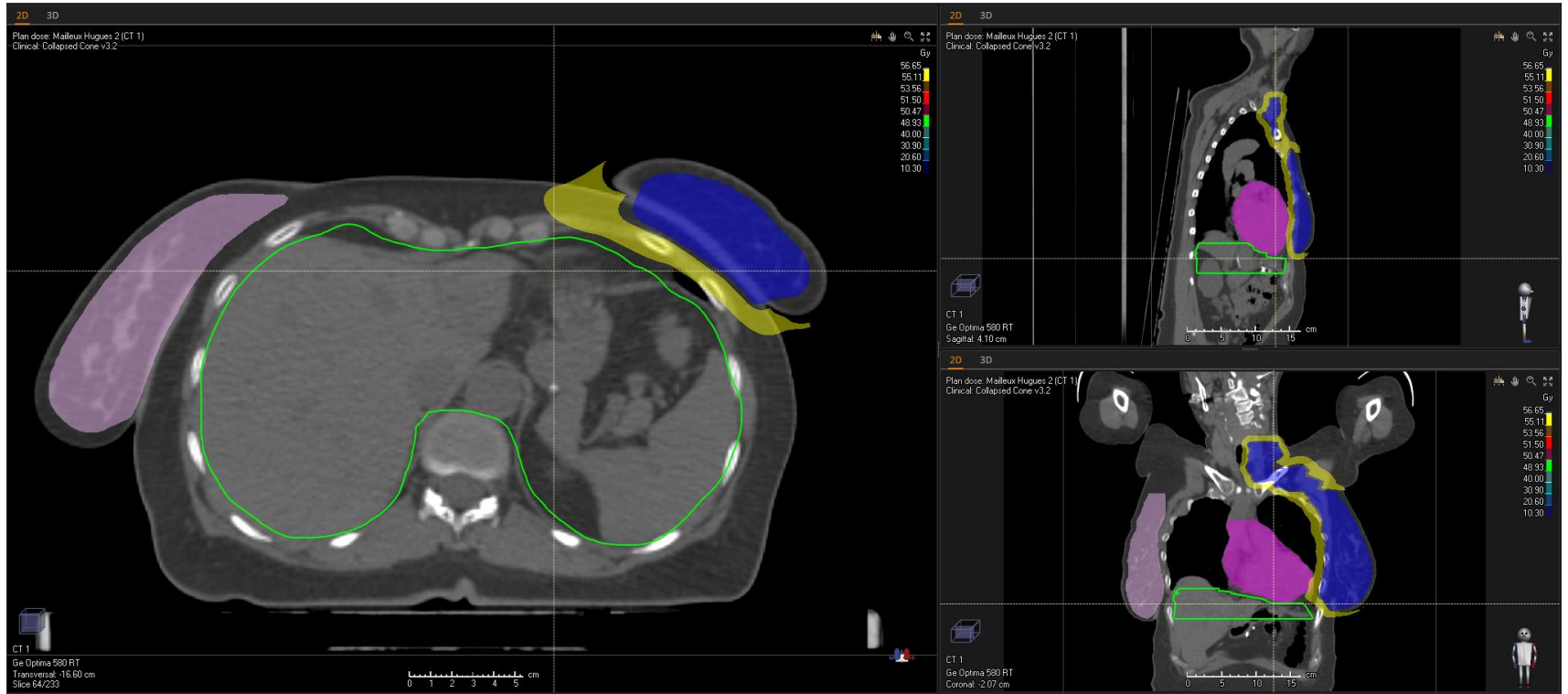
# ADDITIONAL OPTIMIZATION STRUCTURES



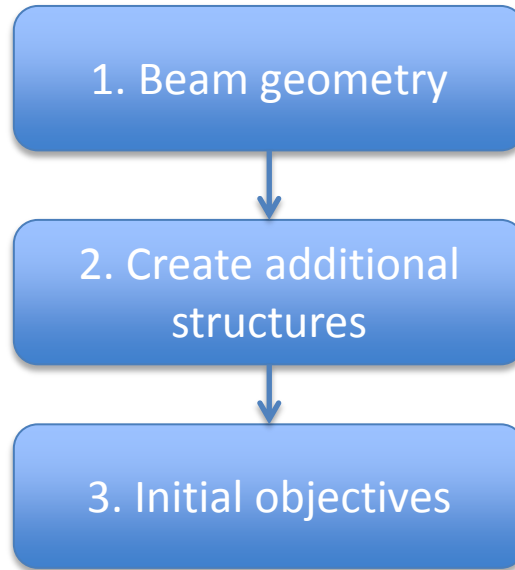
# ADDITIONAL OPTIMIZATION STRUCTURES



# ADDITIONAL OPTIMIZATION STRUCTURES



# OPTIMIZATION PROCESS

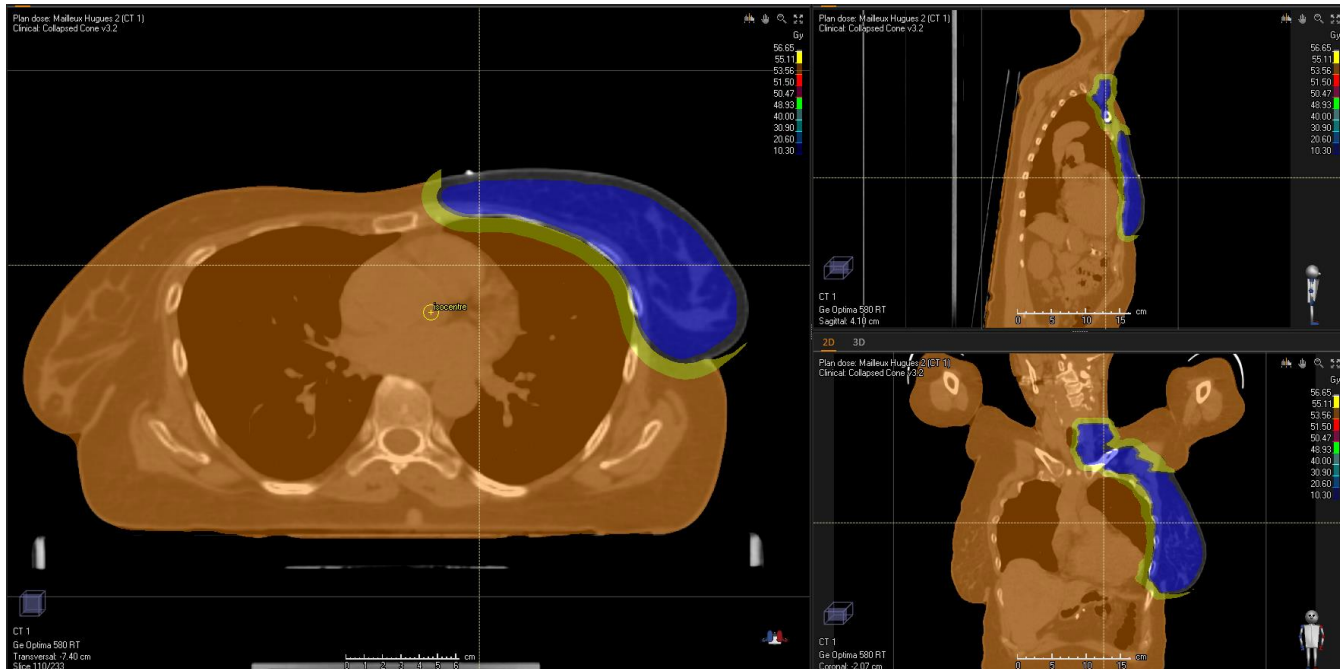




# OPTIMIZATION PROCESS

- Initial objectives

Function	Constraint	Dose	ROI	Description	Robust	Weight
<input type="checkbox"/> Physical Composite Objective						
Uniform Dose		Plan	PTV_TOT_EVAL	Uniform Dose 50.00 Gy		100
Min Dose		Plan	PTV_TOT_EVAL	Min Dose 49.50 Gy		100
Max Dose		Plan	ring	Max Dose 47.50 Gy		10
Max Dose		Plan	zc	Max Dose 30.00 Gy		10



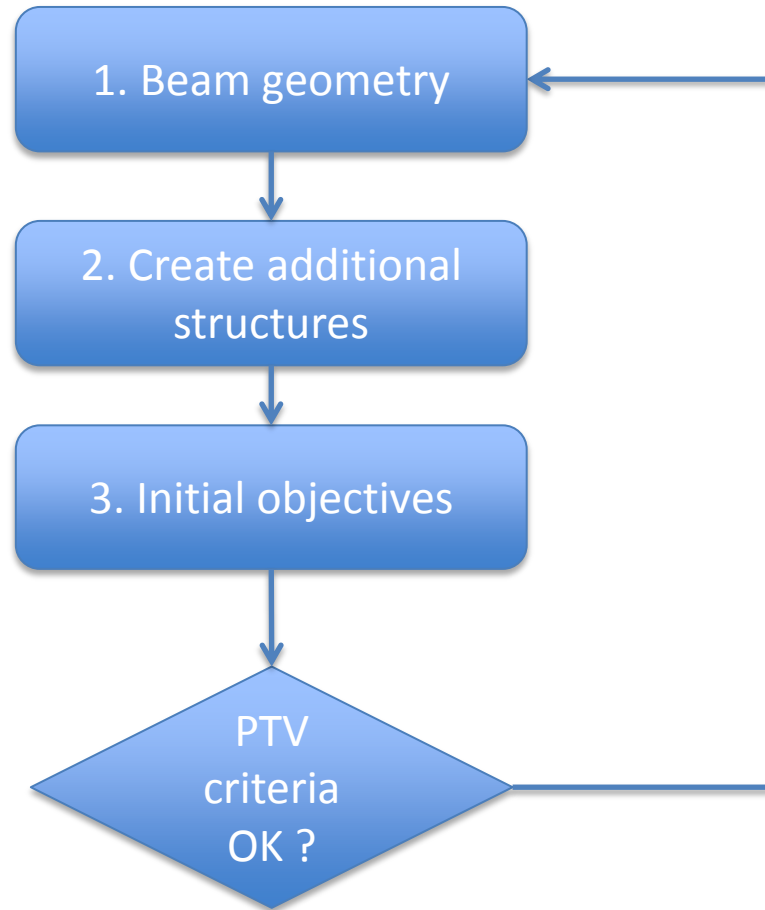
# OPTIMIZATION PROCESS

- Initial objectives

Function	Constraint	Dose	ROI	Description	Robust	Weight
<input type="checkbox"/> Physical Composite Objective						
Uniform Dose		Plan	PTV_TOT_EVAL	Uniform Dose 50.00 Gy		100
Min Dose		Plan	PTV_TOT_EVAL	Min Dose 49.50 Gy		100
Max Dose		Plan	ring	Max Dose 47.50 Gy		10
Max Dose		Plan	zc	Max Dose 30.00 Gy		10



# OPTIMIZATION PROCESS



# INITIAL OBJECTIVES

- Uniform dose and prescription
  - ✓ Usually: 50 Gy to median dose (ICRU 84)
  - ✓ in this case: 51,5 Gy to median dose



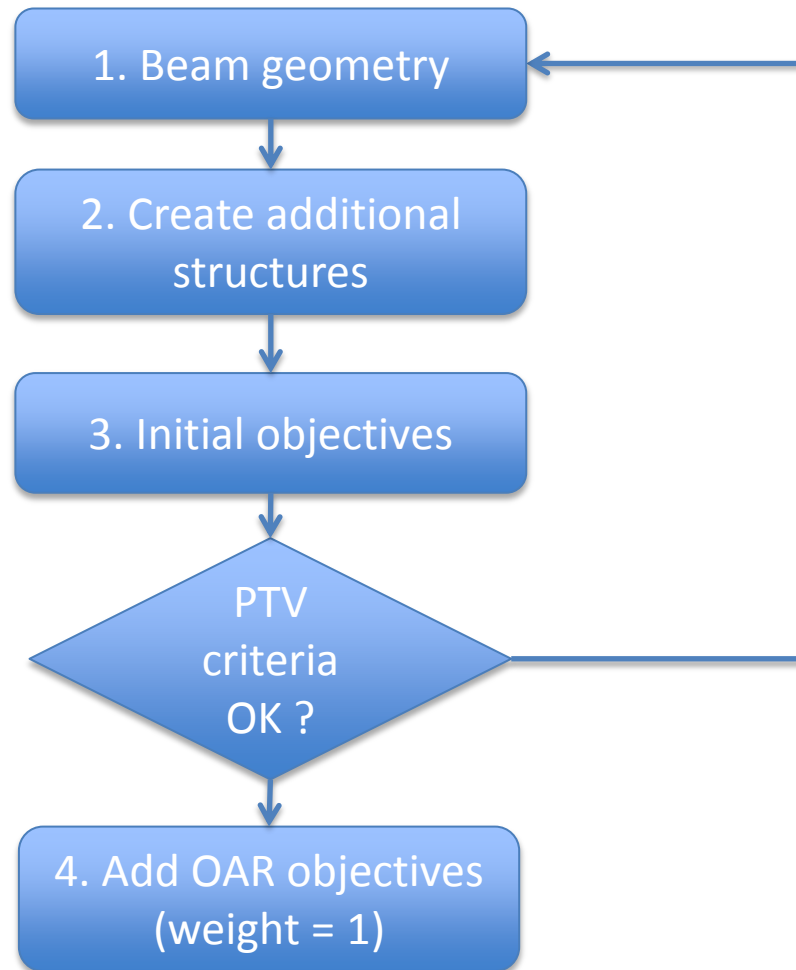
# INITIAL OBJECTIVES

Function	Constraint	Dose	ROI	Description	Robust	Weight
<input type="checkbox"/> Physical Composite Objective						
Uniform Dose		Plan	<span style="color: blue;">■</span> PTV_TOT_EVAL	Uniform Dose 50.00 Gy		100
Min Dose		Plan	<span style="color: blue;">■</span> PTV_TOT_EVAL	Min Dose 49.50 Gy		100
Max Dose		Plan	<span style="color: yellow;">■</span> ring	Max Dose 47.50 Gy		10
Max Dose		Plan	<span style="color: orange;">■</span> zc	Max Dose 30.00 Gy		10



Function	Constraint	Dose	ROI	Description	Robust	Weight
<input type="checkbox"/> Physical Composite Objective						
Uniform Dose		Plan	<span style="color: blue;">■</span> PTV_TOT_EVAL	Uniform Dose 51.50 Gy		100
Min Dose		Plan	<span style="color: blue;">■</span> PTV_TOT_EVAL	Min Dose 51.00 Gy		100
Max Dose		Plan	<span style="color: yellow;">■</span> ring	Max Dose 47.50 Gy		10
Max Dose		Plan	<span style="color: orange;">■</span> zc	Max Dose 30.00 Gy		10

# OPTIMIZATION PROCESS



# OAR CRITERIA

- **2 types of criteria for OAR:**

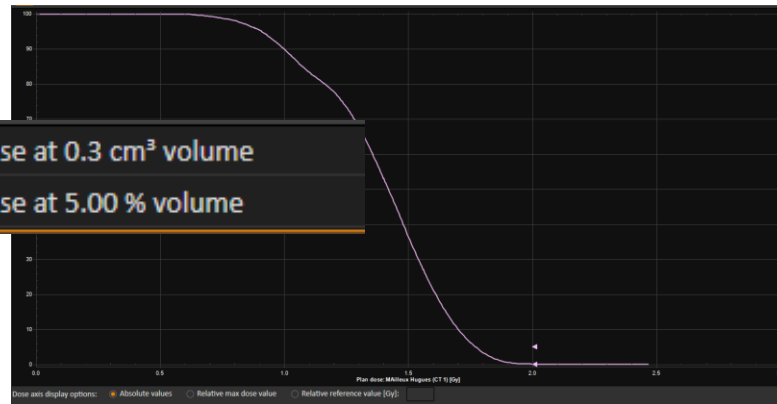
- ✓ maximum dose
  - Righth breast
  - Spinal cord

- ✓ Parallel organs
  - Heart
  - Left lung
  - Righth lung

# MAXIMUM DOSE CRITERIA

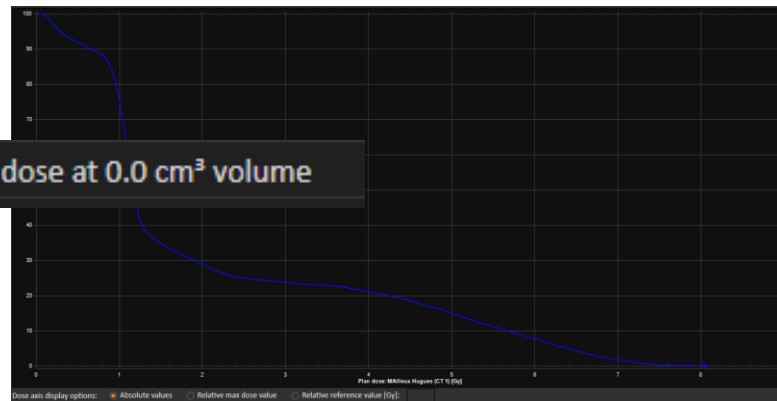
- Maximum dose:
  - Righth breast

■ BREAST_RIGHT	At most 2.00 Gy dose at 0.3 cm <sup>3</sup> volume
■ BREAST_RIGHT	At most 2.00 Gy dose at 5.00 % volume



- Spinal cord

■ SPINAL CORD	At most 8.00 Gy dose at 0.0 cm <sup>3</sup> volume
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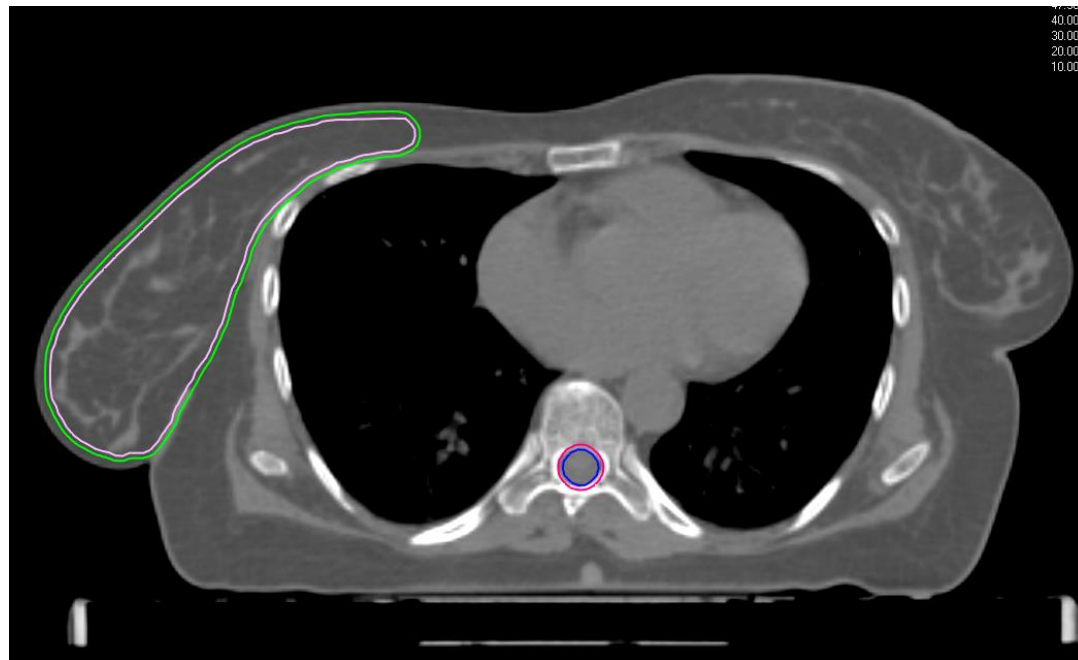
# MAXIMUM DOSE : OAR OBJECTIVES

- **Aditonal structures**

- ✓ Breast righth + 2 mm
- ✓ Spinal cord + 2 mm

breast righth + 2mm Max Dose 1.80 Gy

spinal cord + 2mm Max Dose 7.80 Gy



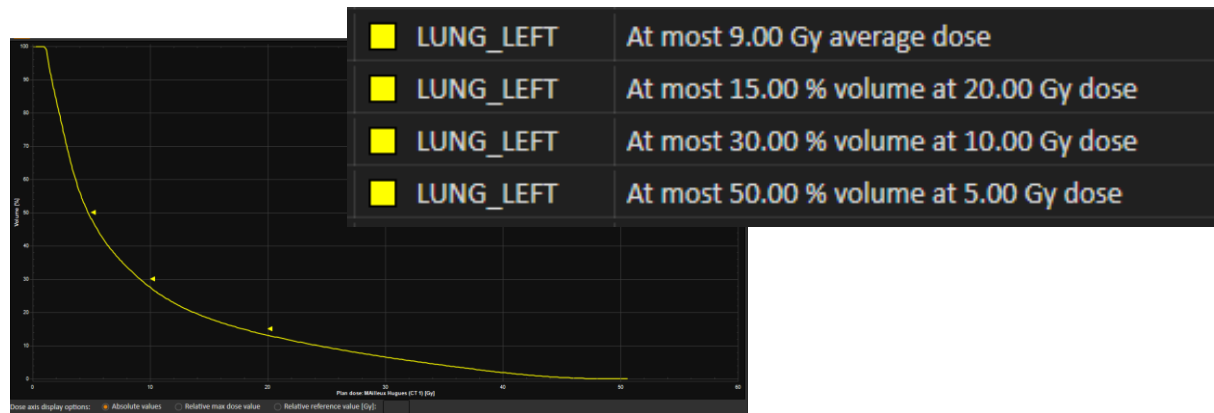
# PARALLEL OAR CRITERIA

- Parallel OAR

- Heart

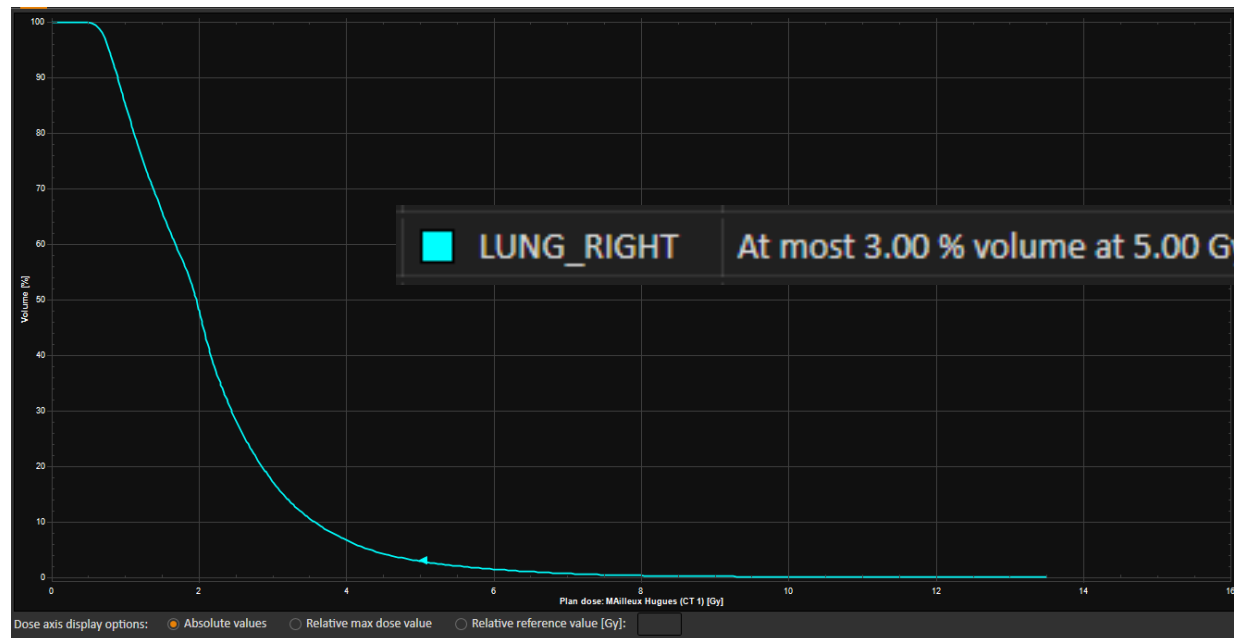


- Left Lung



# PARALLEL OAR CRITERIA

- Parallel type OAR dosimetric criteria
  - Righth Lung:



# PARALLEL OAR OBJECTIVES

- Only one objectif by OAR

■ HEART	Max DVH 4.00 Gy to 12% volume
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■ HEART	At most 4.00 Gy average dose
■ HEART	At most 15.00 % volume at 15.00 Gy dose
■ HEART	At most 20.00 Gy dose at 5.00 % volume

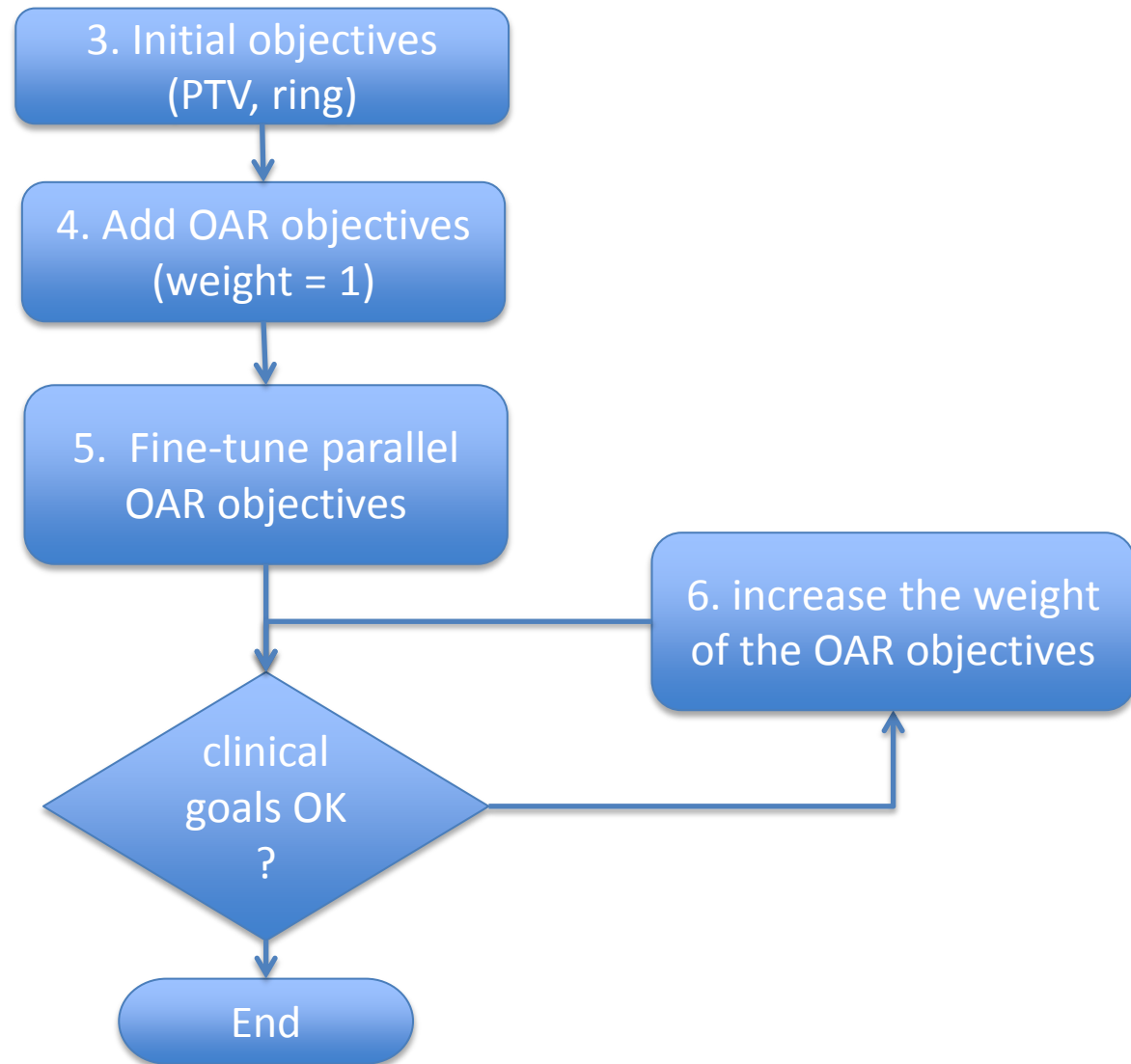
■ LUNG_LEFT	Max EUD 10.00 Gy, Parameter A 1.95
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$$gEUD = \left( \sum_i v_i D_i^a \right)^{1/a}$$

■ LUNG_LEFT	At most 9.00 Gy average dose
■ LUNG_LEFT	At most 15.00 % volume at 20.00 Gy dose
■ LUNG_LEFT	At most 30.00 % volume at 10.00 Gy dose
■ LUNG_LEFT	At most 50.00 % volume at 5.00 Gy dose

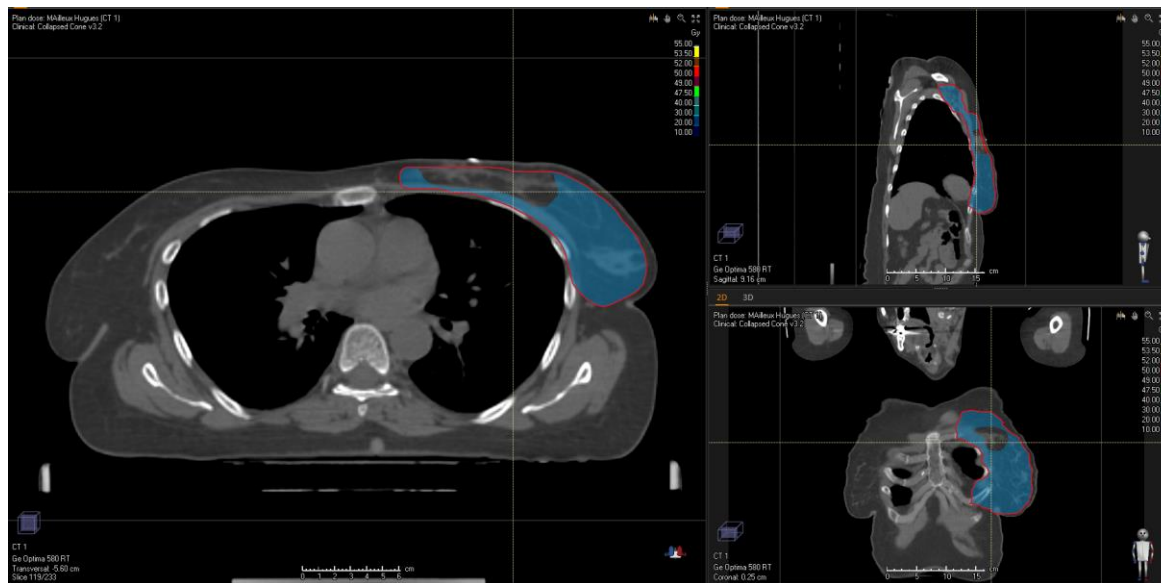
- Initial weight: 1

# OPTIMIZATION PROCESS



# HOW TO PUT THE MAXIMUM DOSE INSIDE DE CTV-LUMPECTOMY

- Additional structure:
  - ✓ PTV – (CTV-LUMPECTOMY)



- ✓ Add objectives:

Max Dose	Plan	PTV without CTV-LUMPECTOMY	Max Dose 51.60 Gy
Min Dose	Plan	CTV-LUMPECTOMY	Min Dose 51.40 Gy



# RESULTS

Function	Constraint	Dose	ROI	Description	Robust	Weight	Value
Physical Composite Objective							0.1061
Max EUD		Plan	LUNG_LEFT	Max EUD 10.00 Gy, Parameter A 1.95		1.95	0.0368
Uniform Dose		Plan	PTV_TOT_EVAL	Uniform Dose 51.50 Gy		110	0.0361
Min Dose		Plan	PTV_TOT_EVAL	Min Dose 50.50 Gy		200	0.0184
Max Dose		Plan	breast righth + 2mm	Max Dose 1.90 Gy		105	0.0086
Max Dose		Plan	ring	Max Dose 47.50 Gy		10	0.0023
Max Dose		Plan	PTV without CTV-LUMPECTOMY	Max Dose 52.00 Gy		80	0.0018
Max DVH		Plan	HEART	Max DVH 4.00 Gy to 12% volume		1	9.5871E-4
Max Dose		Plan	zc	Max Dose 40.00 Gy		10	5.5566E-4
Min Dose		Plan	CTV-LUMPECTOMY	Min Dose 51.00 Gy		40	3.0658E-4
Max DVH		Plan	LUNG_RIGHT	Max DVH 4.30 Gy to 3% volume		2	2.4930E-4
Max Dose		Plan	spinal cord + 2mm	Max Dose 7.80 Gy		22	3.5969E-5
Max DVH		Plan	cav abdo	Max DVH 5.00 Gy to 10% volume		1	0.0000

Function	Constraint	Dose	ROI	Description	Robust	Weight	Value
Physical Composite Objective							0.1258
Max EUD		Plan	LUNG_LEFT	Max EUD 8.90 Gy, Parameter A 1.7		2.2	0.0470
Uniform Dose		Plan	PTV_TOT_EVAL	Uniform Dose 51.50 Gy		100	0.0412
Min Dose		Plan	PTV_TOT_EVAL	Min Dose 51.00 Gy		100	0.0223
Max Dose		Plan	breast righth + 2mm	Max Dose 1.80 Gy		40	0.0060
Max DVH		Plan	HEART	Max DVH 4.00 Gy to 10% volume		1.5	0.0027
Max Dose		Plan	PTV without CTV-LUMPECTOMY	Max Dose 51.60 Gy		30	0.0022
Max Dose		Plan	ring	Max Dose 47.50 Gy		10	0.0018
Max DVH		Plan	LUNG_RIGHT	Max DVH 4.00 Gy to 3% volume		3.5	0.0013
Max Dose		Plan	zc	Max Dose 40.00 Gy		10	7.1477E-4
Min Dose		Plan	CTV-LUMPECTOMY	Min Dose 51.40 Gy		20	4.1151E-4
Max Dose		Plan	spinal cord + 2mm	Max Dose 7.80 Gy		50	1.4472E-4

← Better !

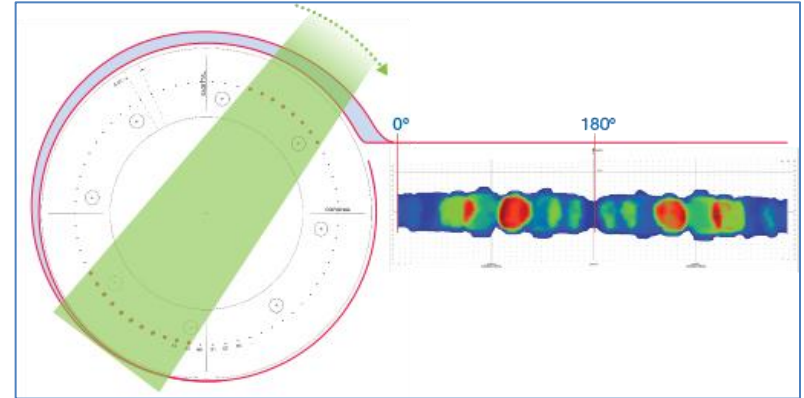
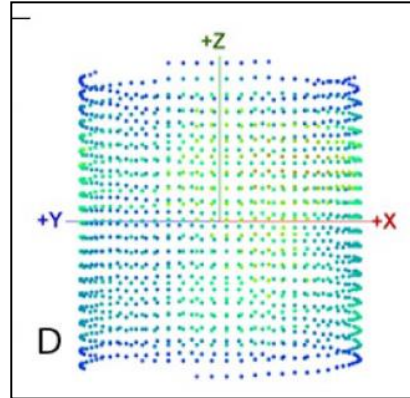
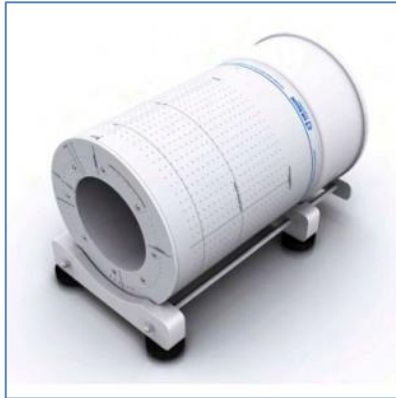


# DELIVERY TIME

- **Delivery time:**
  - ✓ Arc 1: 1'13"
  - ✓ Arc 2: 1'18"



# PATIENT-SPECIFIC QA



**Analysis**

Default Normalization

Show Top 5

Best

CAX

Max

Dose Difference Threshold

Default	Current
0,0 cGy (AD)	0,0 cGy

Region Of Interest Analysis

Show Dissimilar Warning

Van Dyk (Global % Difference)

Apply Measurement Uncertainty (SNC Device Measured Only)

Always Ask For Dose Scaling Factor

Revert To RD Mode If No Absolute Dose Present

Display Electronics In Beam Message

Use 3D DTA for ArcCHECK

TomoTherapy Measurement Mode (ArcCHECK Only)

OK Cancel

**Analysis\***

Compare

DTA  $\gamma$

RD AD

TH 10,0

%Diff 3

mm 3,0

# PATIENT-SPECIFIC QA

**Analysis\***

Compare

DTA  $\gamma$

RD AD

TH 10.0

%Diff 3

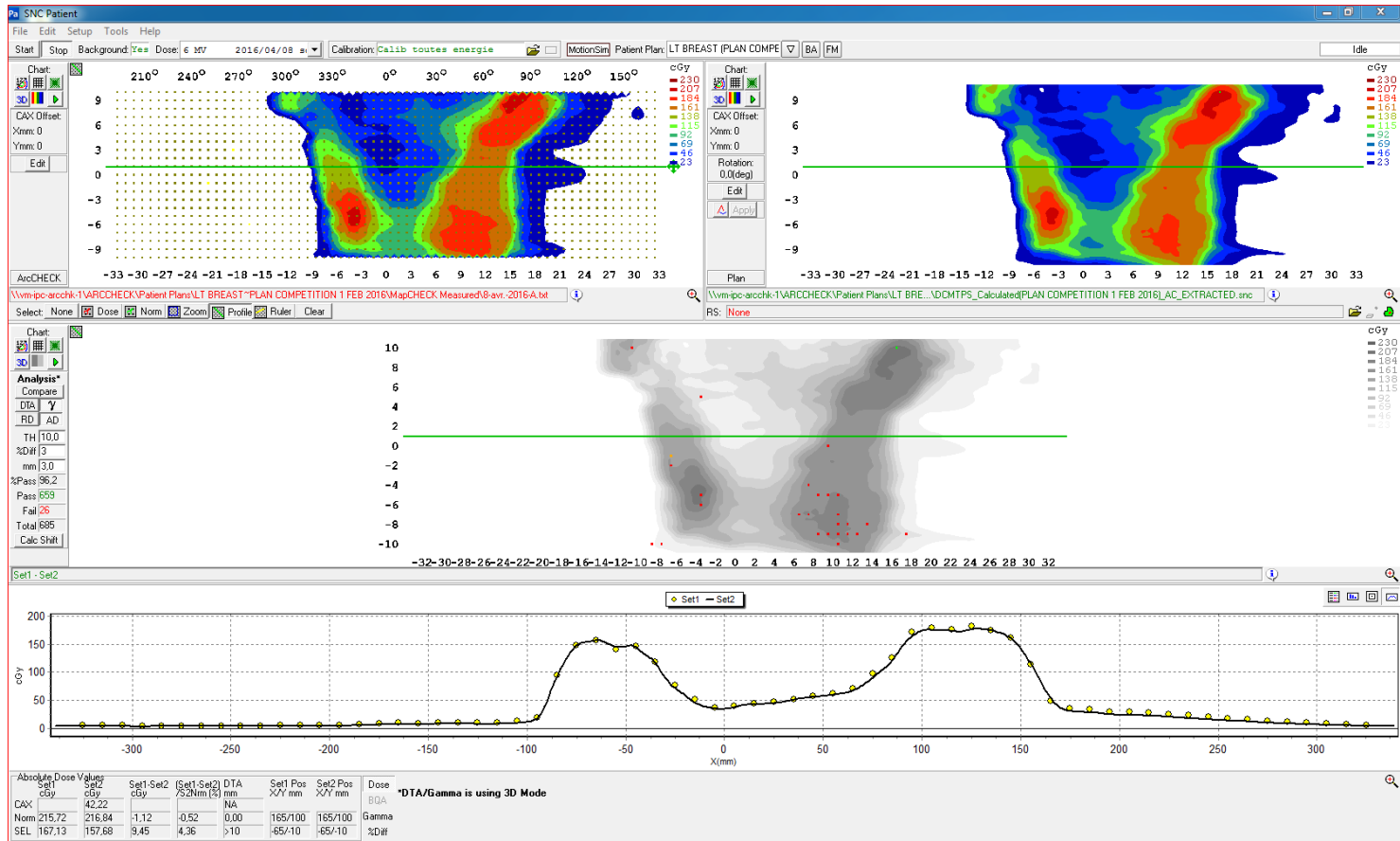
mm 3.0

%Pass 96.2

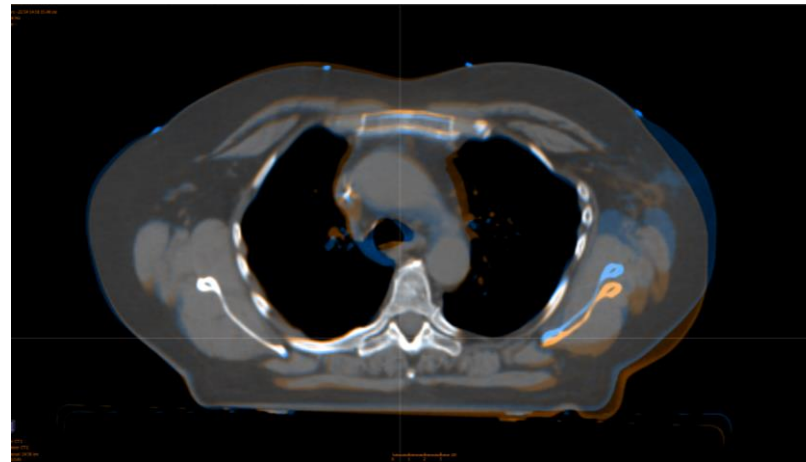
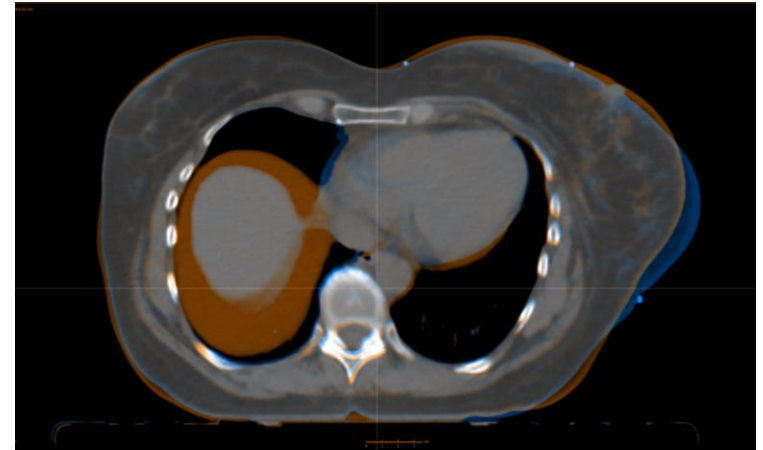
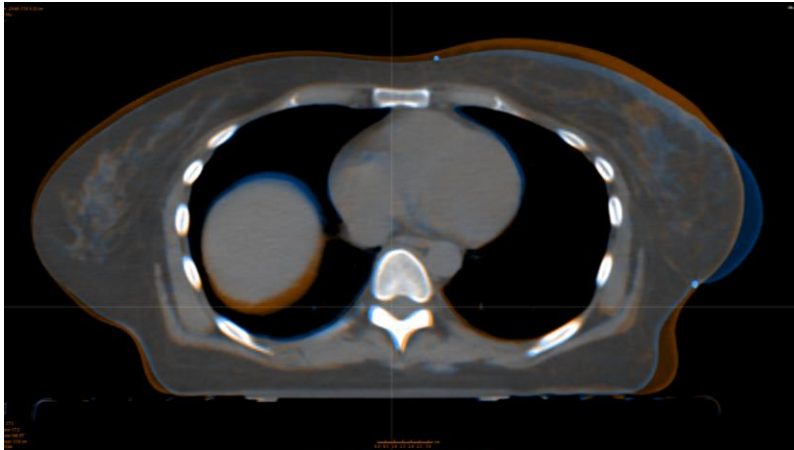
Pass 659

Fail 26

Total 685

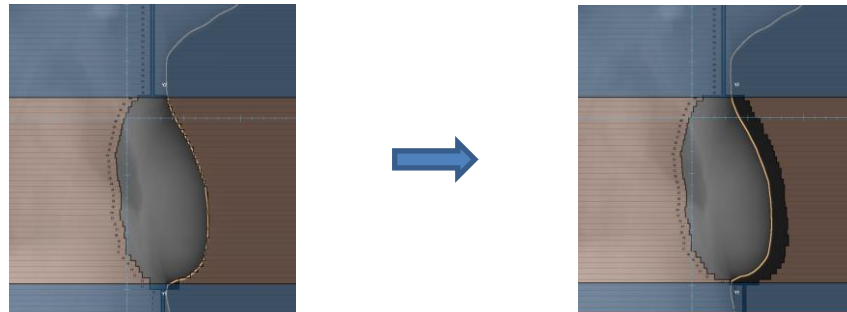


# COMMENTS: INTERFRACTION MOVEMENT



# COMMENTS: INTERFRACTION MOVEMENT

- How to take this into account ?
  - ✓ For fixed fields: skin flash

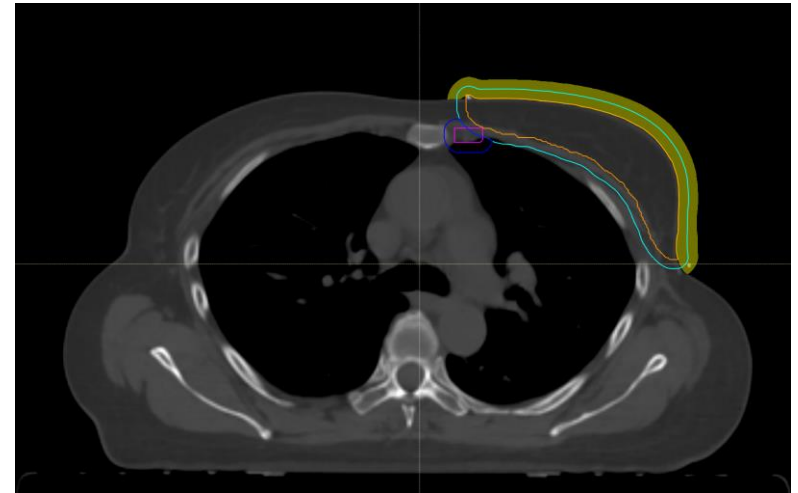
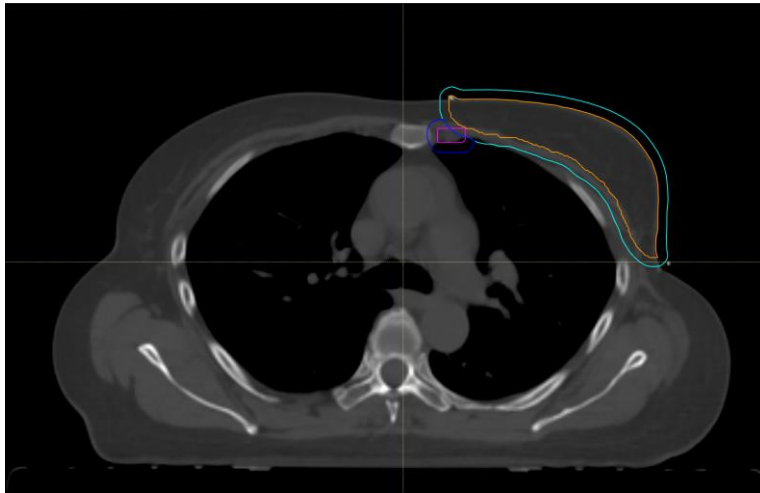


- ✓ VMAT ?



# COMMENTS: INTERFRACTION MOVEMENT

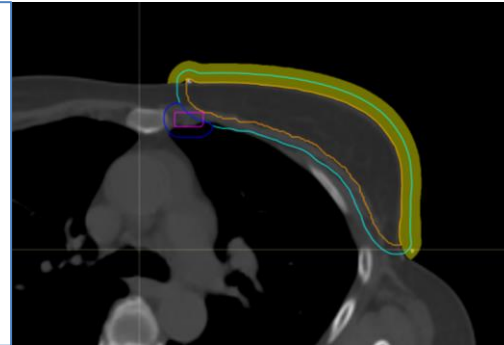
- Virtual bolus



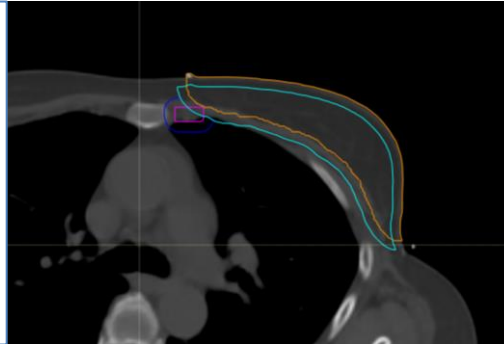
# COMMENTS: INTERFRACTION MOVEMENT

- Optimization: 2 step process

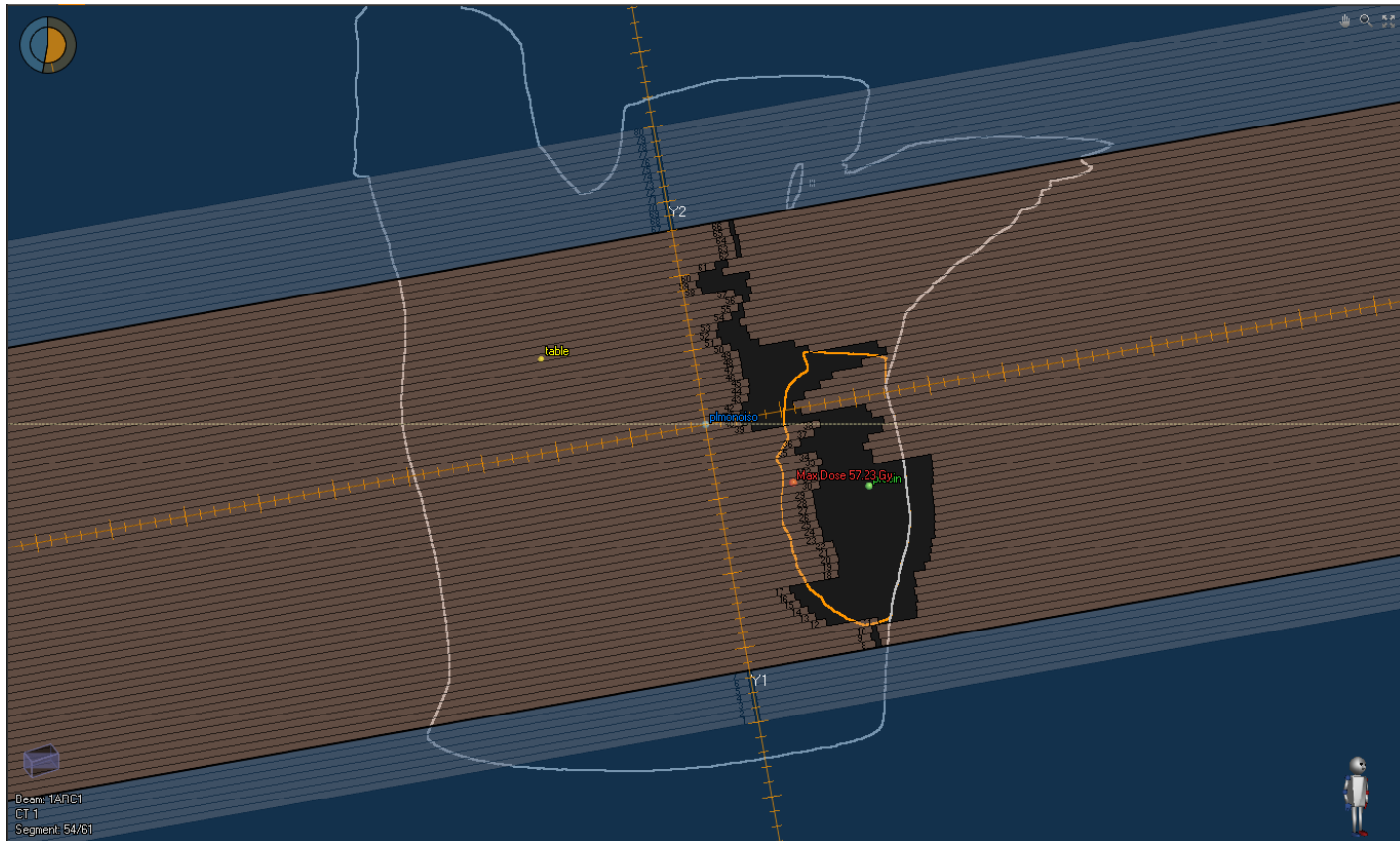
1) With virtual bolus:  
Optimization on the  
*PTV OUTSIDE*



2) After having  
removed the virtual  
bolus: Optimization  
on the PTV without  
modifying the  
shape of the  
segments



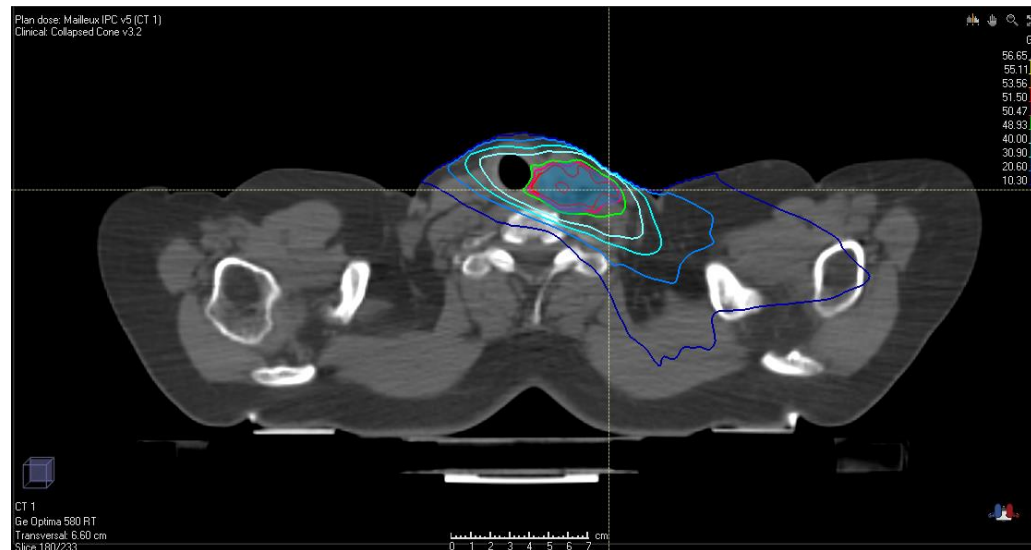
# COMMENTS: INTERFRACTION MOVEMENT





# COMMENTS

- In our current technique, we use additional objectives for:
  - ✓ Larynx
  - ✓ Thyroid
  - ✓ esophagus



# CONCLUSION

- **Some (humble) recommendations:**
  - ✓ Well-defined methodology
    - learning curve
    - homogeneity of practices
  - ✓ As simple as possible:
    - 2 arcs
    - No couch rotation
    - As few objectives as possible for optimization
  - ✓ Use of Virtual bolus

# THANKS

- ✓ Ahmad Nobah
- ✓ Radiation Oncologists
- ✓ Medical Physics team
- ✓ RaySearch
- ✓ My Family