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VMAT in Mannheim



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- ERGO++ delivered in Sept. 2007, current version 1.7.1, DMS 2.6.2
 - Class solutions of treatment of pelvis, prostata and spinal cords developed
 - Currently development of class solutions for head and neck, breast and stomach MONACO VMAT
- **Desktop 7.01** installed in April 2008 (nonclinical version)
- Mosaiq 1.5 installation in September 2008 (for VMAT delivery)
- Desktop 7.01 installed in December 2008 (clinical version)
- Mosaiq 1.6 installation in December 2008 (clinical Version for VMAT delivery)
- First Patient treated clinically in December 2008
- MONACO awaiting clinical comissioning
- Starting Monaco VMAT BETA

Prostata carzinoma – VMAT rotation strategies



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VMAT 1 Rot:

•1x 360° rotation with shielded OAR in front of target

VMAT 1,5 Rot.

- •1x360° rotation on target
- •2x100° rotation on target with shielded OAR

Axial dose distribution



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VMAT 1 Rot.



VMAT 1.5 Rot.





MIMiC

Sagittal dose distributions



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VMAT **1 Rot.**



VMAT 1.5 Rot.

MIMiC











		VMAT 1x	VMAT 2x	IMRT _{MLC}	MIMiC
D _{mean} Target	[Gy]	75,96 0,06	75,93 0,06	75,73 0,13	75,89 0,28
D _{95%} Target	[Gy]	71,59 0,49	71,7 0,59	70,51 0,86	71,85 0,85
D _{mean Rectum post}	[Gy]	38,56 2,24	38,12 2	34,89 1,7	31,85 2
D _{mean Rectum ant}	[Gy]	61,58 4,16	60,29 3,15	53,99 3,05	50,69 3,1
V _{tissue 70%}	[cm ³]	819 93	797 47	629 71	627 84
V _{tissue 50%}	[cm ³]	1546 191	1470 108	1278 201	1158 164
V _{tissue 30%}	[cm ³]	3753 494	3655 503	3759 726	3109 626
CI	[cm ³]	1,51 0,15	1,45 0,13	1,23 0,15	1,5 0,21
ні	[cm ³]	1,11 0,03	1,09 0,02	1,1 0,02	1,19 0,06
ттт	[min]	1,5	3	6 1	15 3
MU		389 31	371 32	544 53	2714 657



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- For every patient: 2 plans (1rot and 1.5 rot)
- > measurements with ion chamber + film
 - > Ion chamber: 0.125cm³
 - Film: KODAK edr2
 - > homogenous H&N phantom
- Film analysis
 - > γ -Index for different pass and fail criteria
 - pixel count









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errors by light exporsure or no film

- are excluded by cutting-out the images of the γ -index
- the index for 10% / 5mm
 - excludes errors by the markers and light exposure on the film border





pixel count fail and pass



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was calculated for each plan , here exemplary for pat 8

















Results of the measurements

- absolute dose of ion chamber $\Delta_{mean} = 1,64\%$ 1,14 (max: +3,7% min: -1,25%)
- good relative agreement between measured and calculated in film measurements
- Mean pass criteria for γ-Index:

1% / 1mm	40,9% 8,7	pass pixel (green)
2% / 2mm	69,3% ± 10,4	pass pixel (green)
3% / 3mm	84,8% ± 8,0	pass pixel (green)
5% / 5mm	97,2% ± 2,7	pass pixel (green)
10% / 5mm	is set to 100%	-

Patient QA



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γ-Index



Absolutdosis -1,9%













First patient with 3 rotations



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Second patient with 2 rotations



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545MU 2,4Gy PTV / 2,9Gy Prostata 3min beam on time

In Vivo Dosimetry



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XVI CT without offline match XVI **localisation CT** with soft tissue match

> Point of measurement was transferred relative to *isocenter* of the treatment plan





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9 measurements in first patient in the high dose region: All <2.5% (except 2) deviation from calculation













- Plans for the treatment of prostate and pelvis can be produced comparable plan quality to established modulated techniques
- Complex geometries (2 concavities) → MONACO VMAT
- Good agreement of calculation and measurement
- Shorter treatment time than step-and-shoot- IMRT and tomotherapeutic approach
- Low number of monitor units
- No complex table movements (like tomotherapeutic approach)
- VMAT needs no additional linac hardware
- 5 prostate patients were treated





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Thank you for your attention

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