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# Nur noch moduliert? Schnelle IMRT mit Elekta Agility FFF

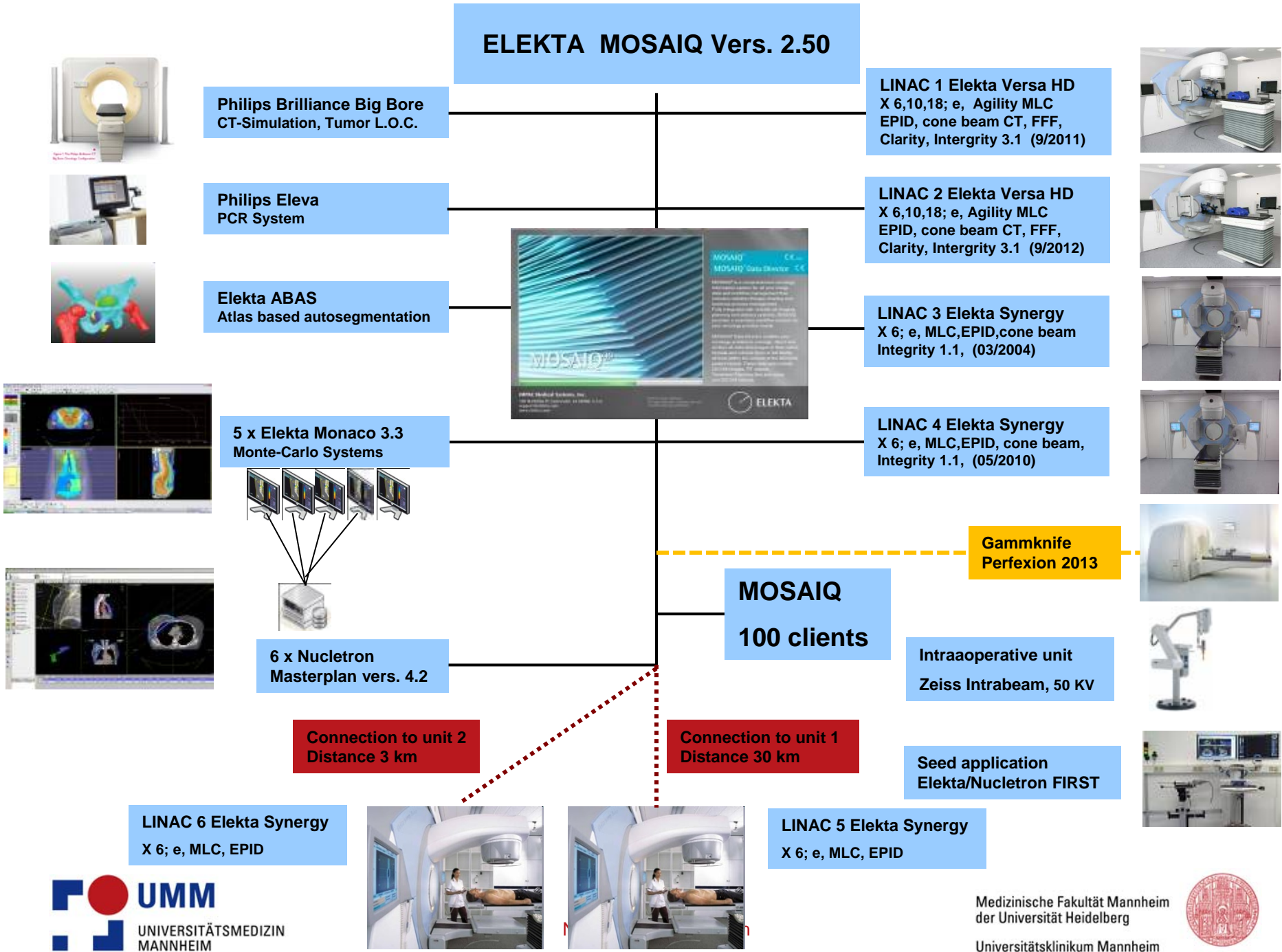
Frank Lohr, M.D.  
Vice Chairman  
University Medical Center Mannheim  
Germany

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# Disclosures: Research/Training Agreements with Elekta, IBA and CRAD



# ELEKTA MOSAIQ Vers. 2.50



Philips Brilliance Big Bore  
CT-Simulation, Tumor L.O.C.

Philips Eleva  
PCR System

Elekta ABAS  
Atlas based autosegmentation

5 x Elekta Monaco 3.3  
Monte-Carlo Systems

6 x Nucletron  
Masterplan vers. 4.2

LINAC 1 Elekta Versa HD  
X 6,10,18; e, Agility MLC  
EPID, cone beam CT, FFF,  
Clarity, Intergrity 3.1 (9/2011)

LINAC 2 Elekta Versa HD  
X 6,10,18; e, Agility MLC  
EPID, cone beam CT, FFF,  
Clarity, Intergrity 3.1 (9/2012)

LINAC 3 Elekta Synergy  
X 6; e, MLC,EPID,cone beam  
Integrity 1.1, (03/2004)

LINAC 4 Elekta Synergy  
X 6; e, MLC,EPID, cone beam,  
Integrity 1.1, (05/2010)

Gammknife  
Perfexion 2013

Intraoperative unit  
Zeiss Intrabeam, 50 KV

Seed application  
Elekta/Nucletron FIRST

LINAC 6 Elekta Synergy  
X 6; e, MLC, EPID

LINAC 5 Elekta Synergy  
X 6; e, MLC, EPID

Connection to unit 2  
Distance 3 km

Connection to unit 1  
Distance 30 km

MOSAIQ  
100 clients

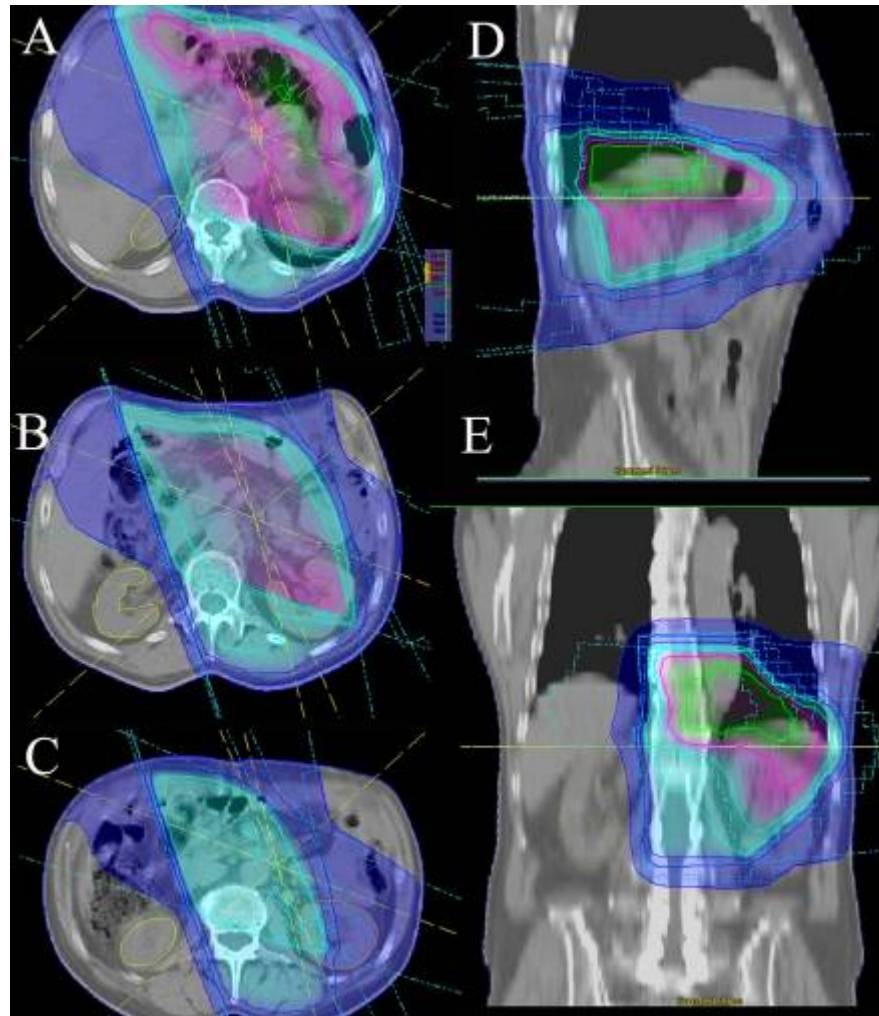


# 10J post full neck IMRT

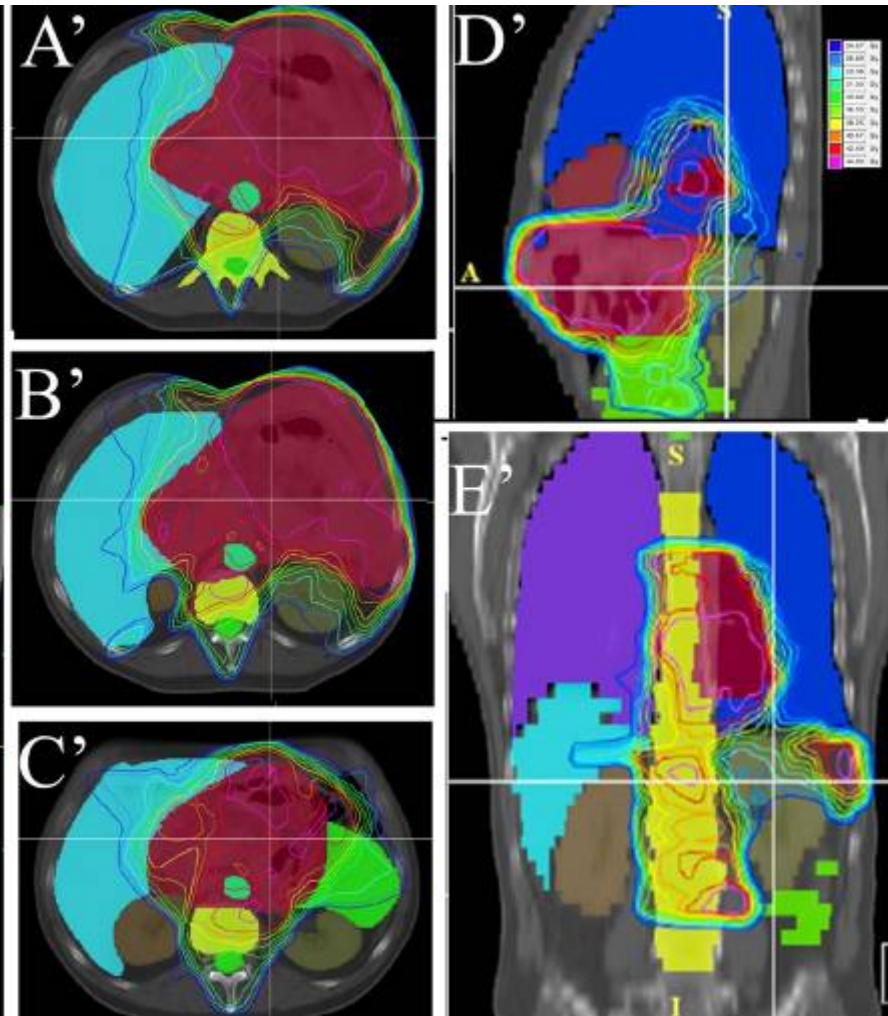




### 3DCRT

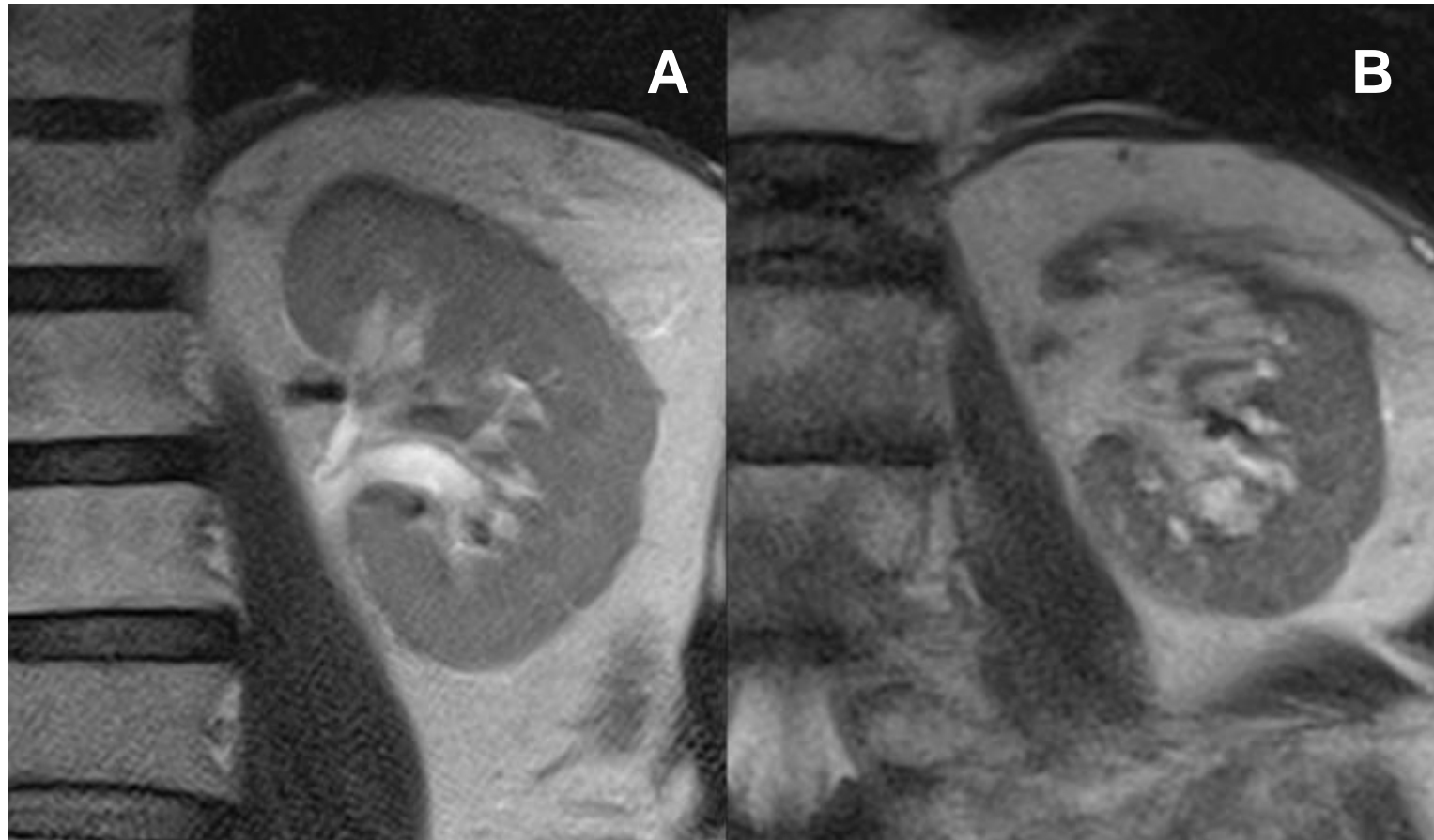


### IMRT



	Right Kidney (Gy)							Left Kidney (Gy)						
	Median	Mean	D30	D60	Cranial part	Middle part	Caudal part	Median	Mean	D30	D60	Cranial part	Middle part	Caudal part
<b>3DCRT-1</b>	2.52	3.18	3.3	2.4	5	<5	<5	41.07	36.9	46.3	38.4	47.8	45.3	25.2
<b>3DCRT-2</b>	3.2	7.76	8.1	2.7	22.5	4.5	<4.5	25.8	22.95	27	18	45	42.7	36
<b>IMRT-1</b>	1.49	1.61	1.77	1.39	11	5	0	20.25	22.18	26.68	18.15	29	26	9
<b>IMRT-2</b>	14.77	16.12	17.4	13.8	13	8	4	23.84	23.28	27.7	21.2	26.8	18.5	13.5

T2w: (A) IMRT vs. (B) 3D



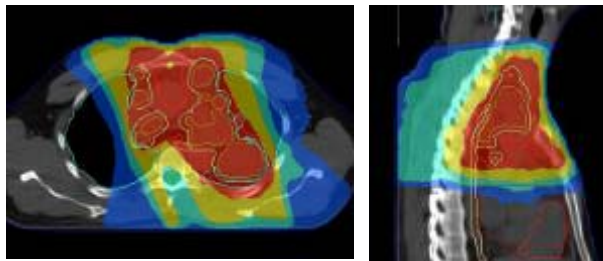
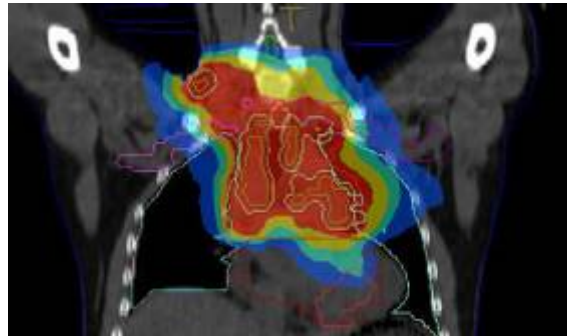
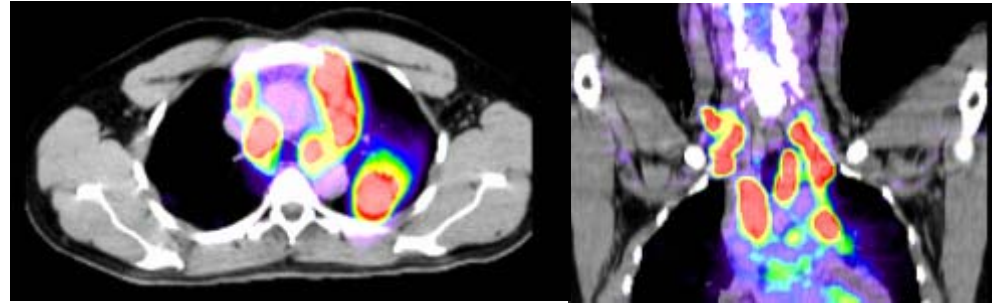
Haneder et al., SUON, 2012



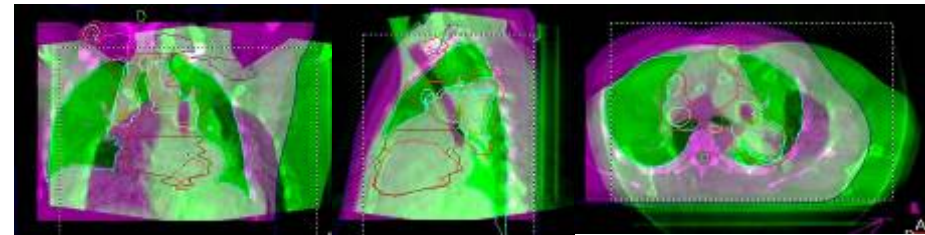
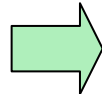
# Image Guided, PET-assisted Radiotherapy of Lung Cancer

Target Volume Reduction and RT-Optimization for critical Tumor-to-Lung Ratio

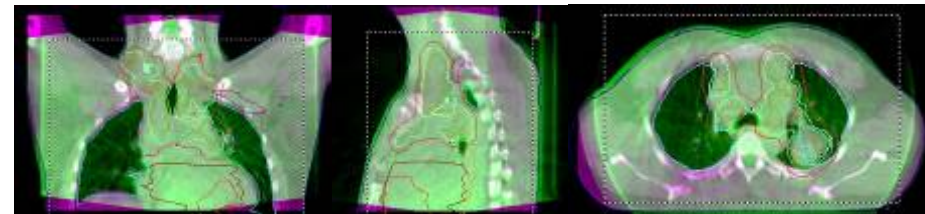
**1. CTV-Definition/Minimization**  
based on functional Imaging (PET-CT)



**2. Treatment Planning as IMRT based on Monte-Carlo Dose calculation**



*Suboptimal Positioning*



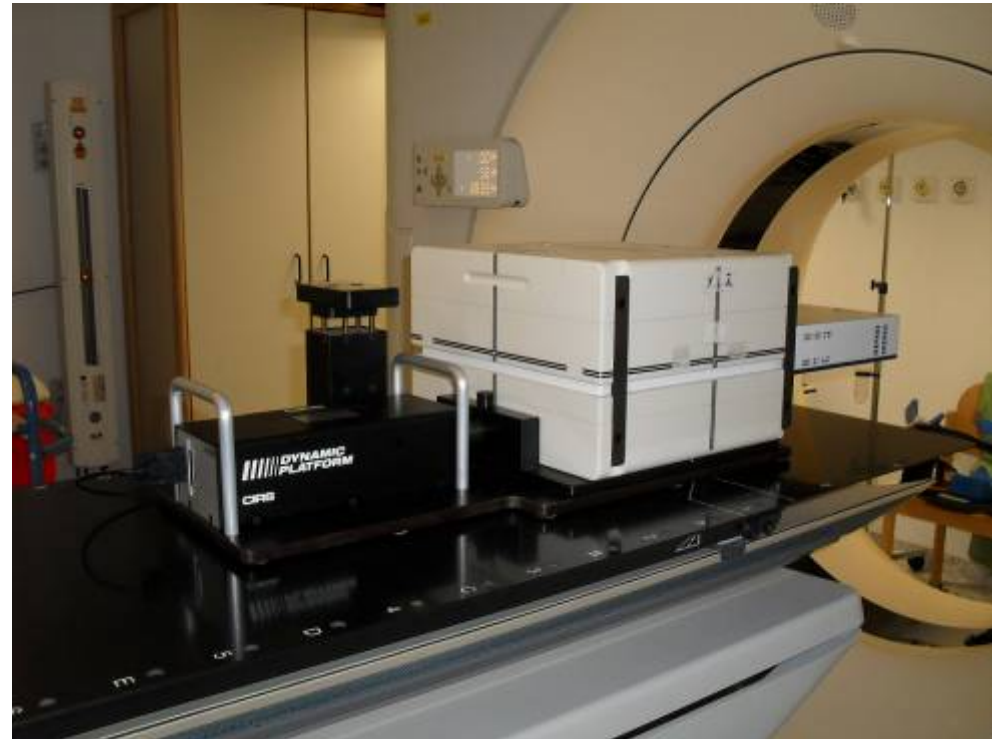
*Optimal Positioning*

**3. Image Guided Radiotherapy Treatment**  
with Cone-Beam-CT at Linac



## Measurement setup

- IBA Matrixx Evolution
- IBA Multicube
- CIRS dynamic platform model 008PL (accuracy 0.05mm)
- VMAT plan generated in Monaco 2.0.3.beta





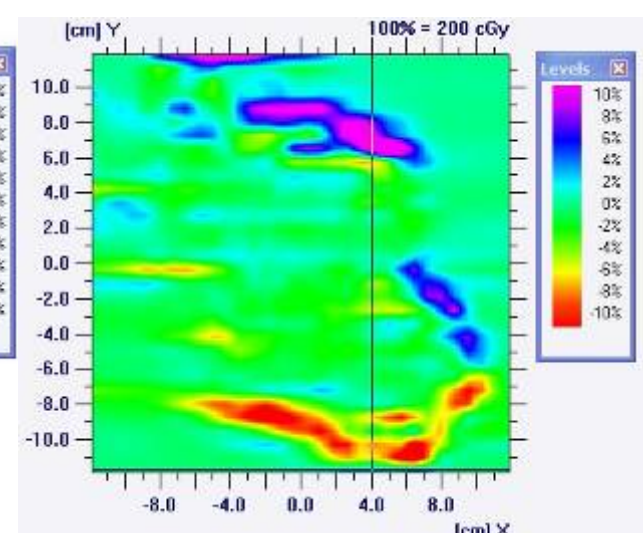
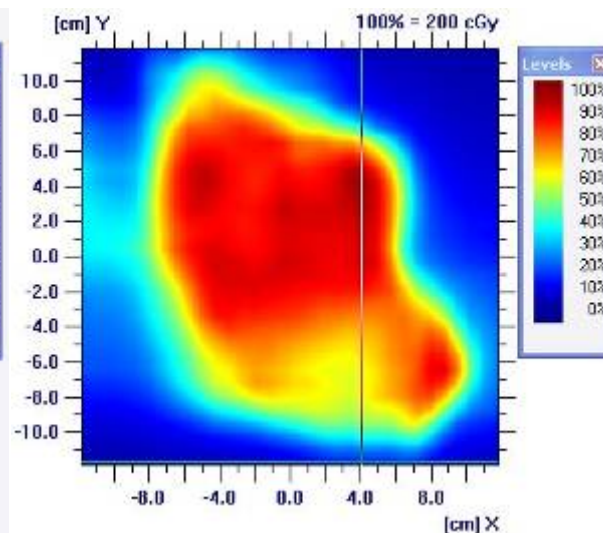
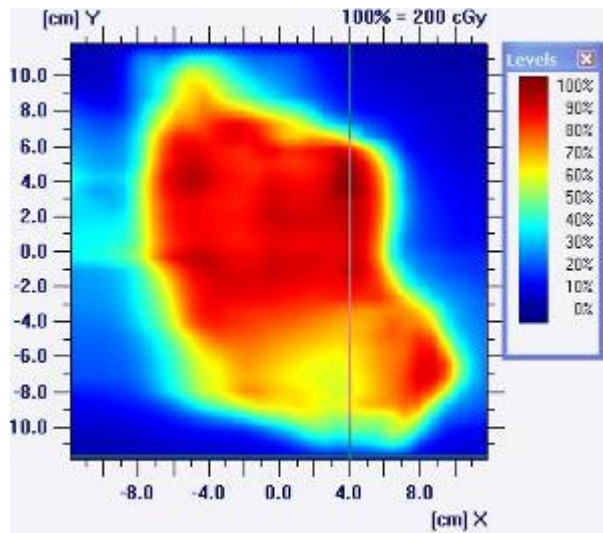
A=10mm, T=3.6s, cos4-motion trajectory



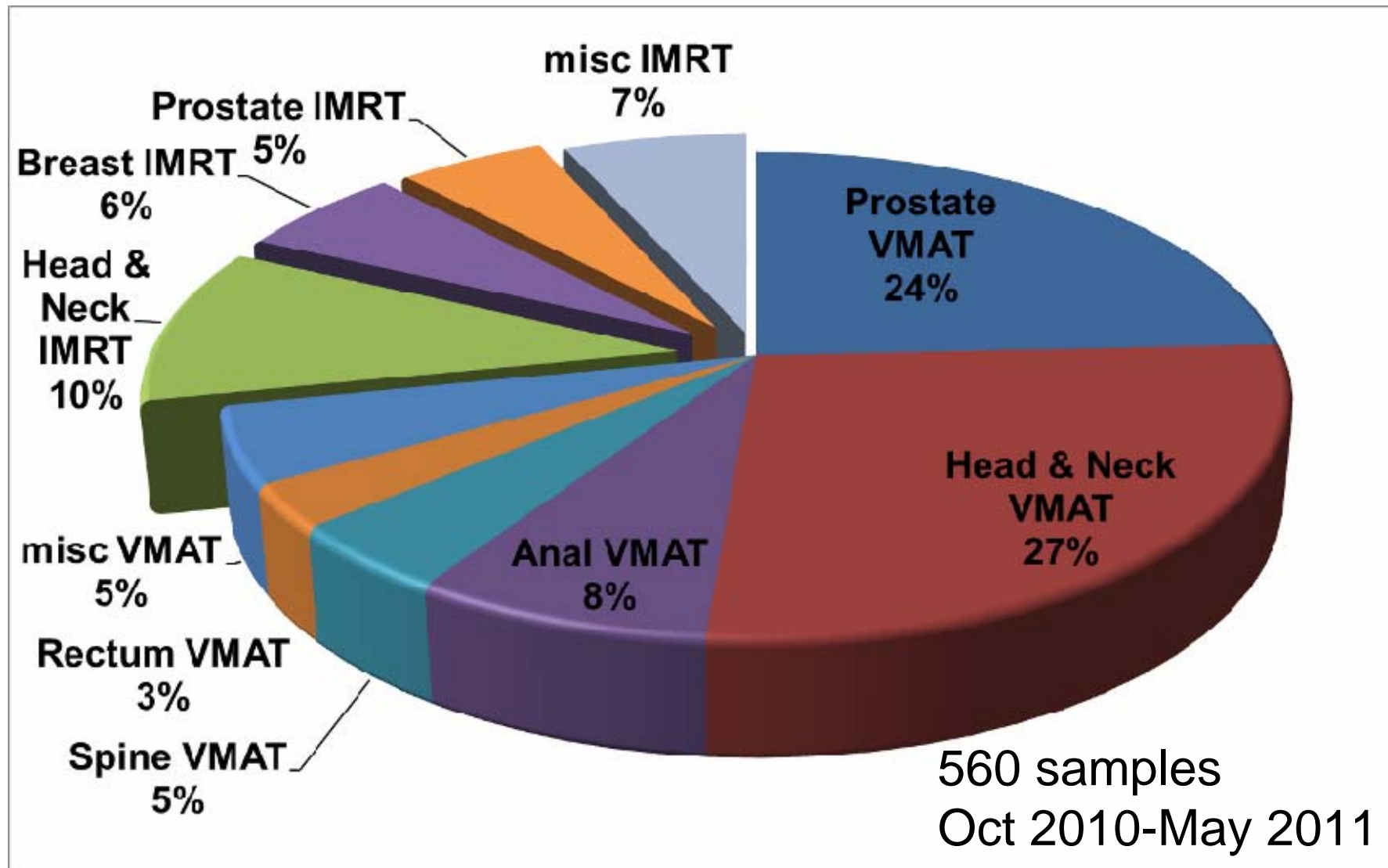
static case

with motion

difference map



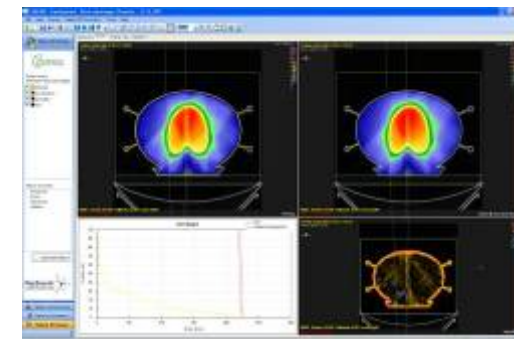
# treatment plans by entities/modalities



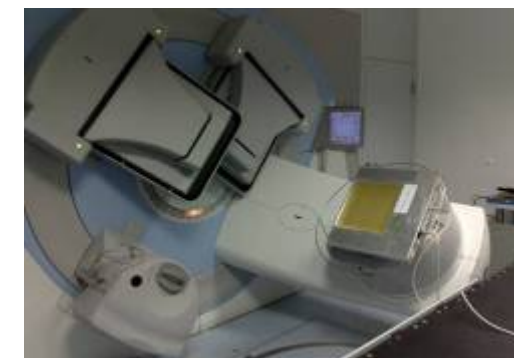
- So far
  - Extended Linac QA according DIN 6847-5
  - Full patient plan verification using EDR2/Gafchromic film and ion chamber
  - In vivo dosimetry during patient delivery for prostate cancer
- Recent additions:
  - IBA MatriXX 2D-array detector for patient plan verification
    - MatriXX Evolution with gantry angle sensor and multicube phantom (Comparison of measurement to TPS)
    - MatriXX Evolution with gantry holder and Compass software (independent TPS using measured fluences)



IBA Multicube



IBA Compass



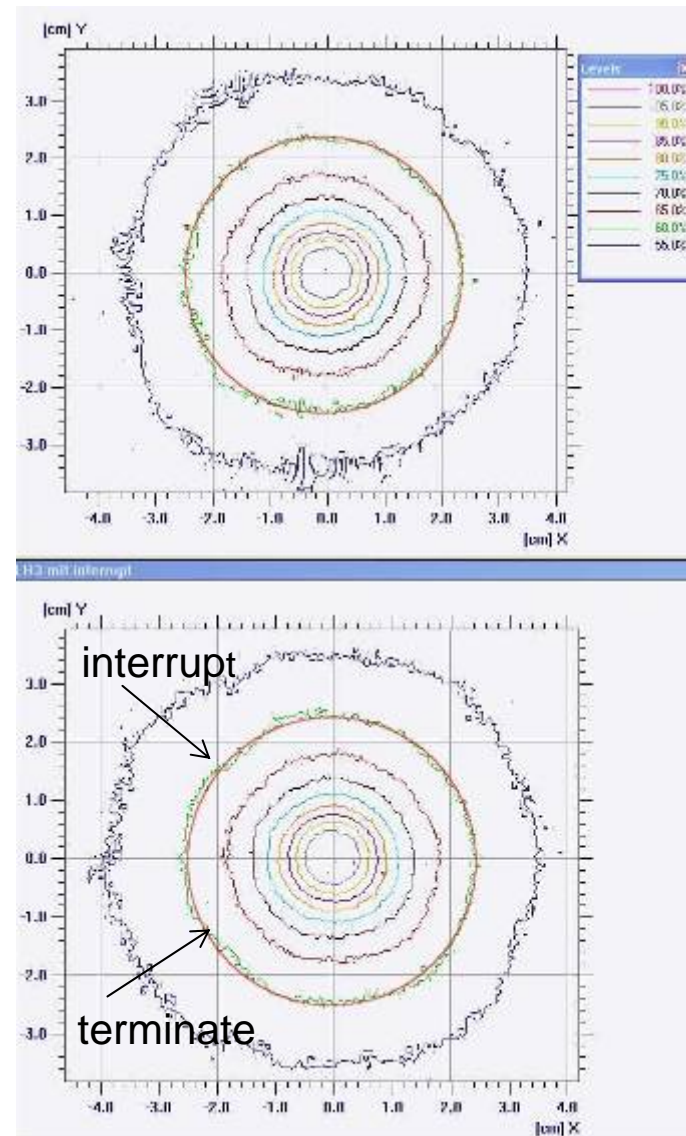
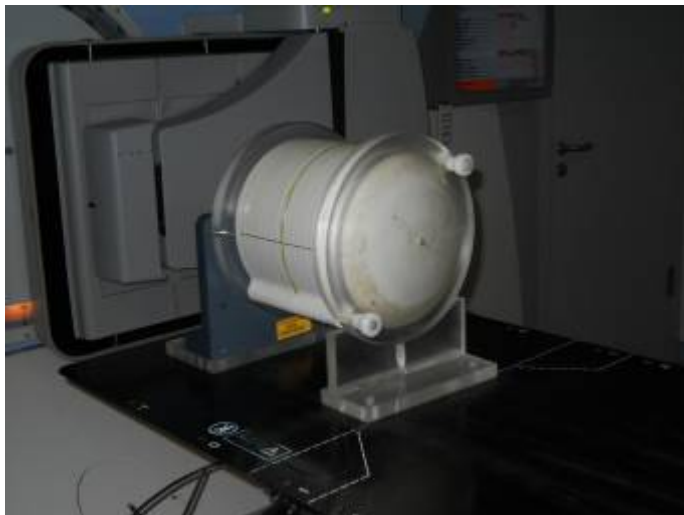
IBA transmission detector



# off-axis-target test

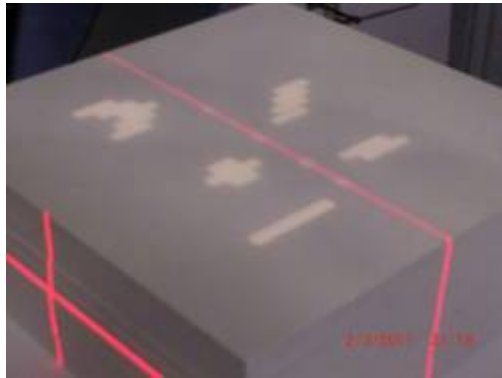
test 3: MLC and Gantry synchronization

modulated VMAT arc, which delivers dose to a PTV 8 cm from isocenter (16 cm x 1 cm field)

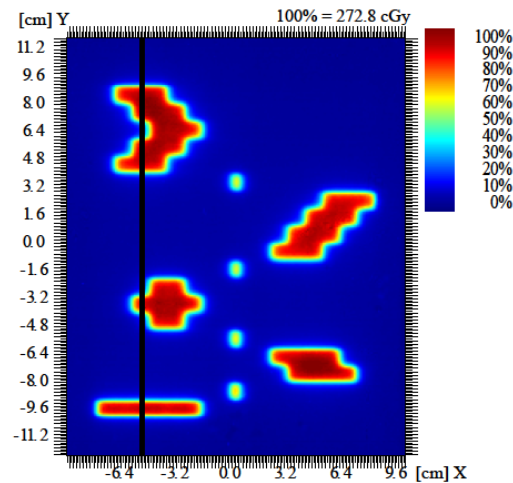




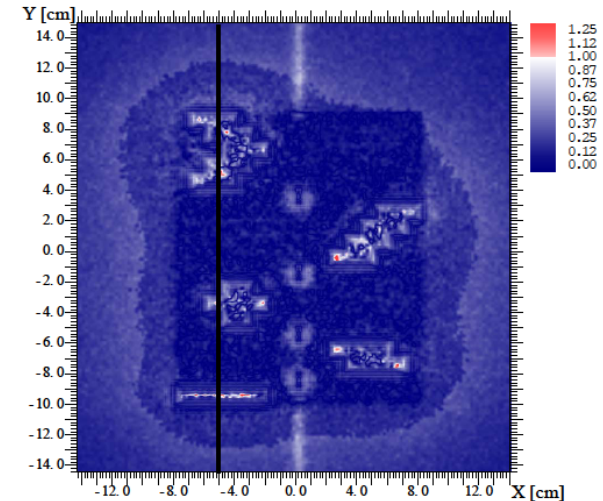
# irregular MLC shaped field



measurement setup



film measurement



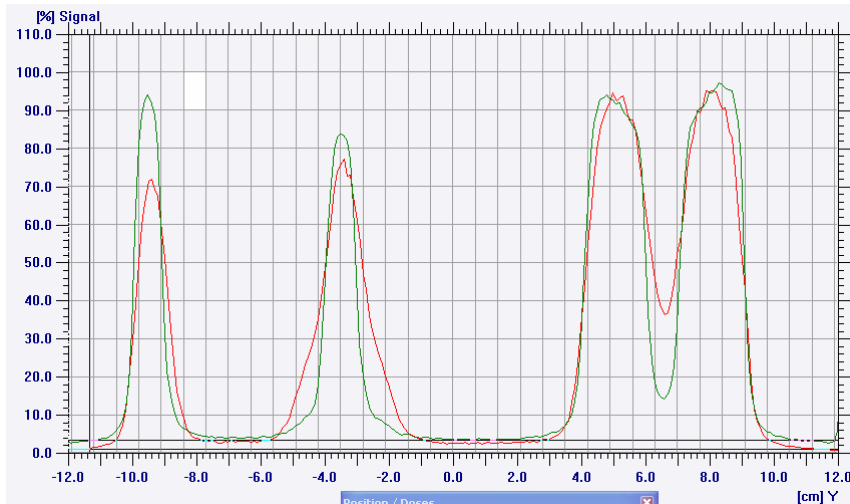
Gamma map (3%,3mm)

$\sigma_{\text{Monaco}} = 0.5 \%$ ,  $\sigma_{\text{Geant4}} = 1.3 \%$  on a 2 mm dose grid  
 $\gamma$  (3 %, 3 mm) in the  $\text{ROI}_{10}$  :

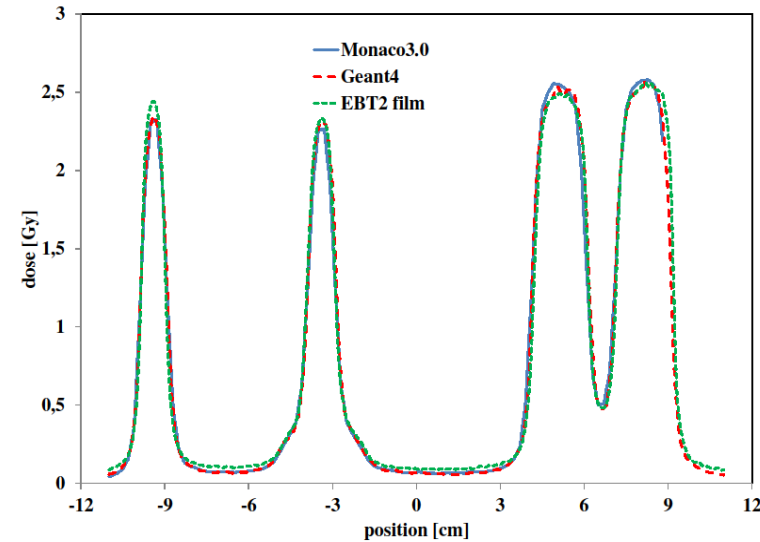
- 97.3 % for film measurement against Monaco
- 99.0 % for film measurement against Geant4 and
- 99.4 % Monaco against Geant4



# irregular MLC shaped field



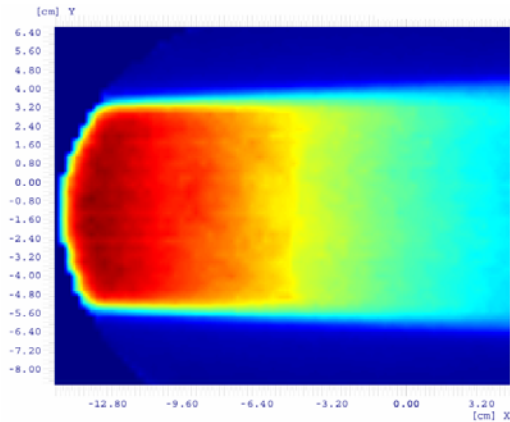
profiles with  
initial Monaco<sup>®</sup> head model



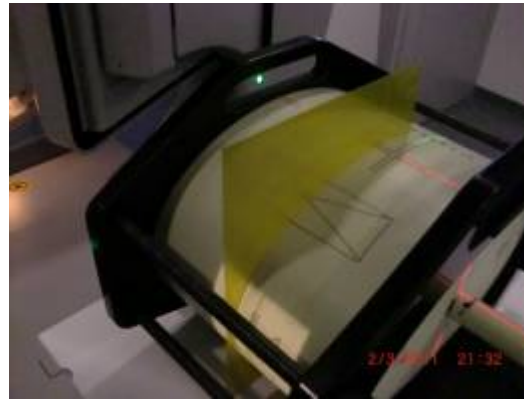
profiles with  
adjusted Monaco<sup>®</sup> head model

Fleckenstein et al., submitted

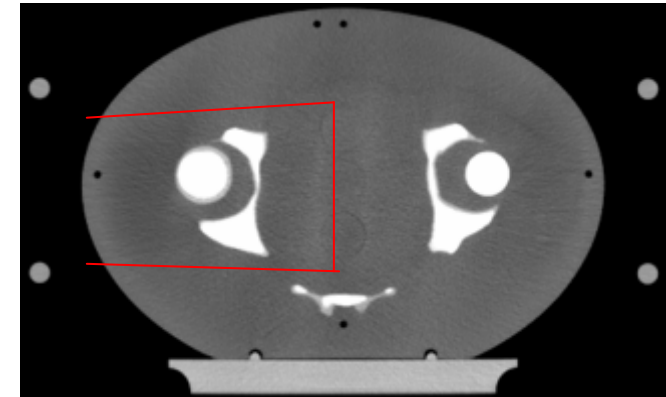
# Dose to water – dose to medium conversion



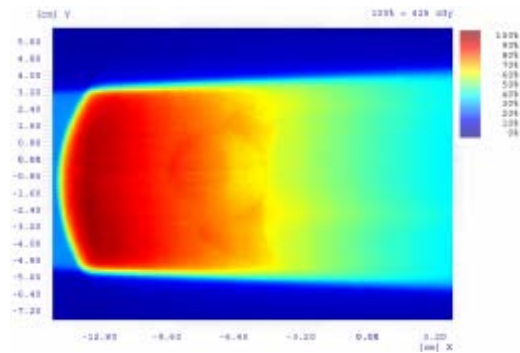
film measurement



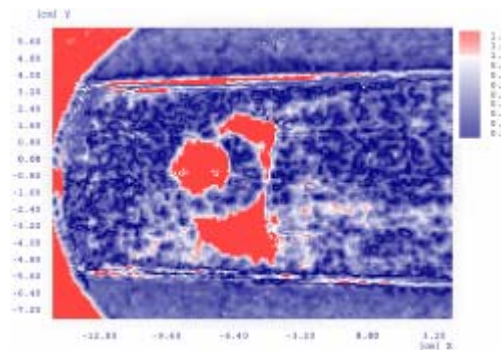
setup



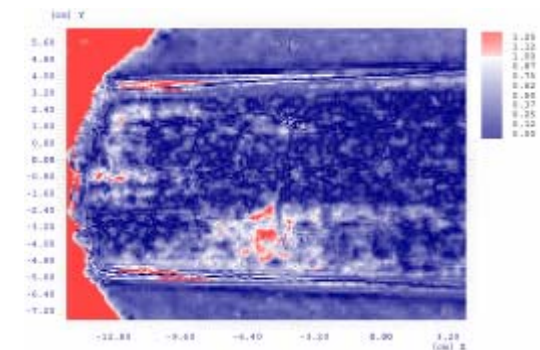
CT-slice



Monaco dose slice



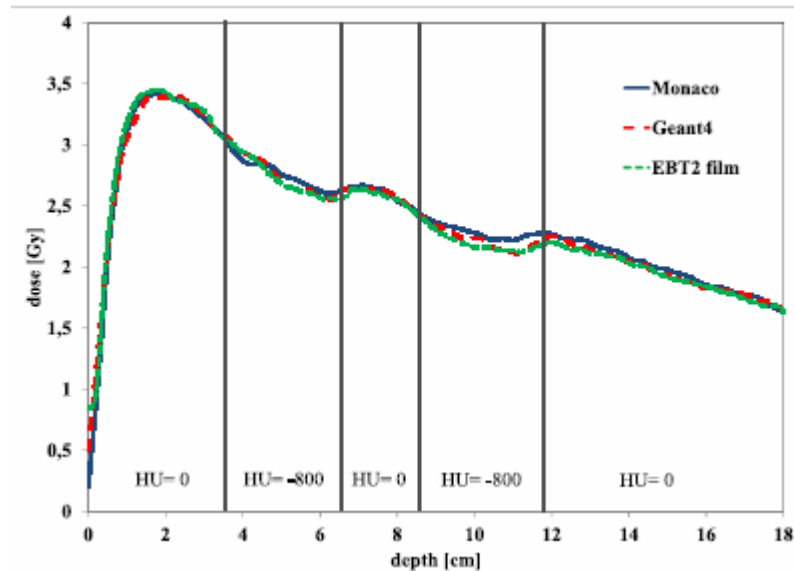
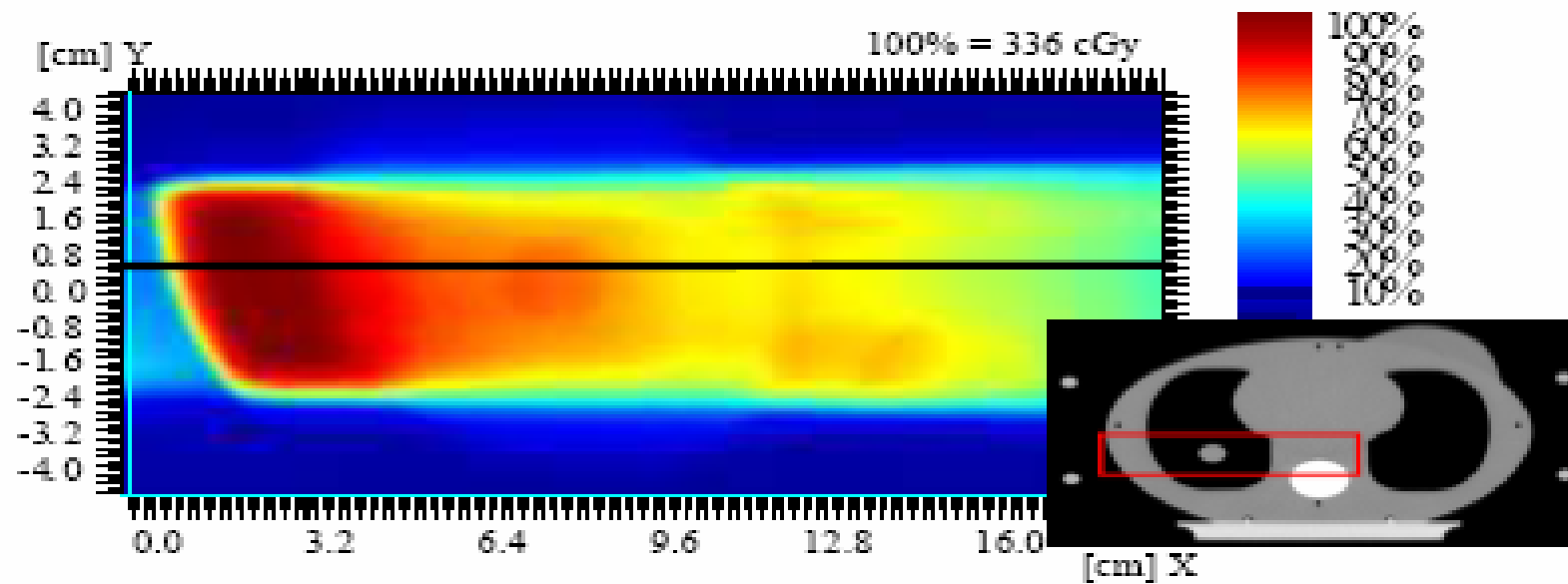
global gamma  
(3%,3mm)



dm-dw corrected  
gamma (3%,3mm)

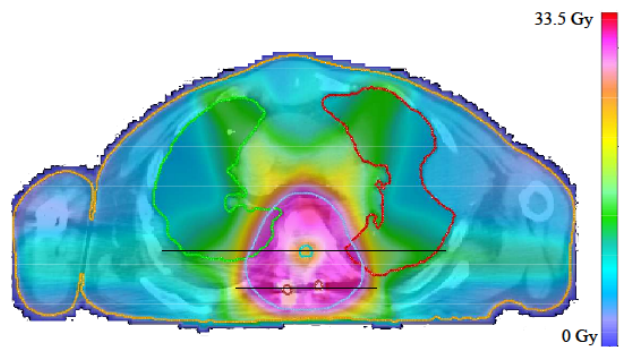


# Fleckenstein et al., Z Med Phys, 2013



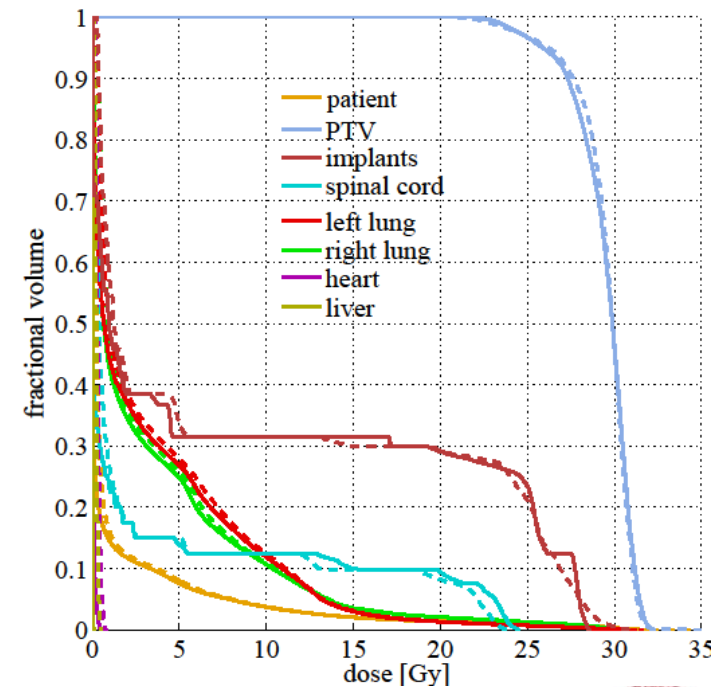
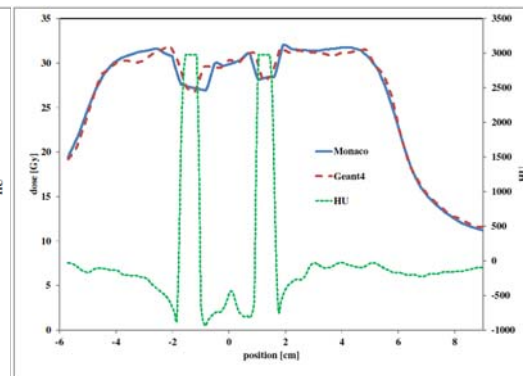
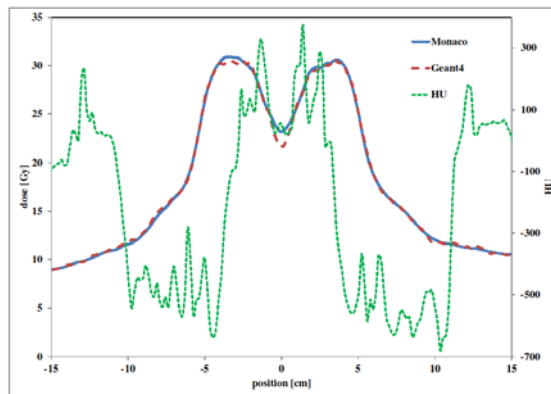


# Monaco<sup>®</sup> vs. Geant4 patient with metallic implants

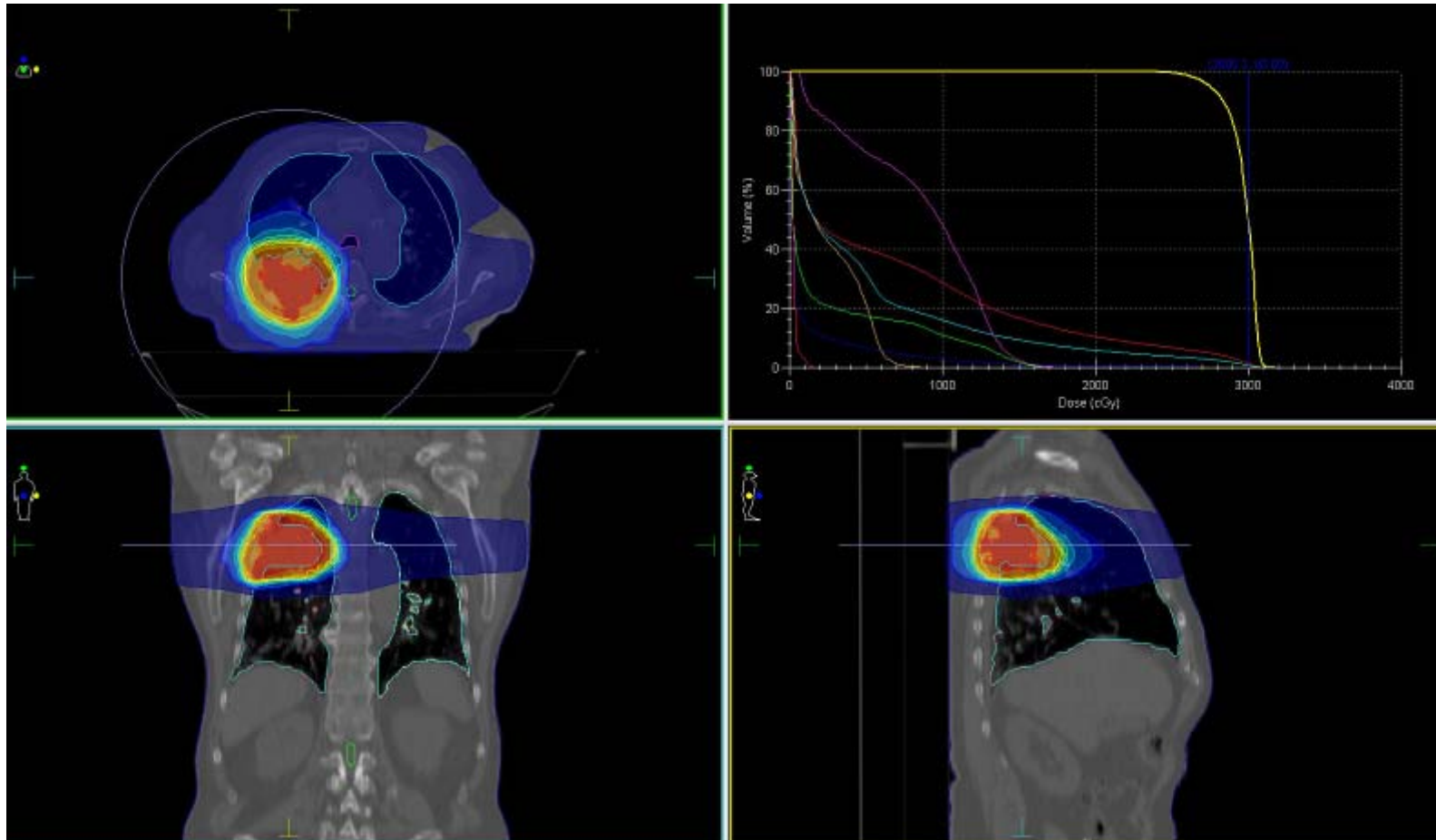


mean deviation of the organs at risk:  
( $0.7 \pm 0.3$ ) % of  $D_{50}(\text{PTV})$

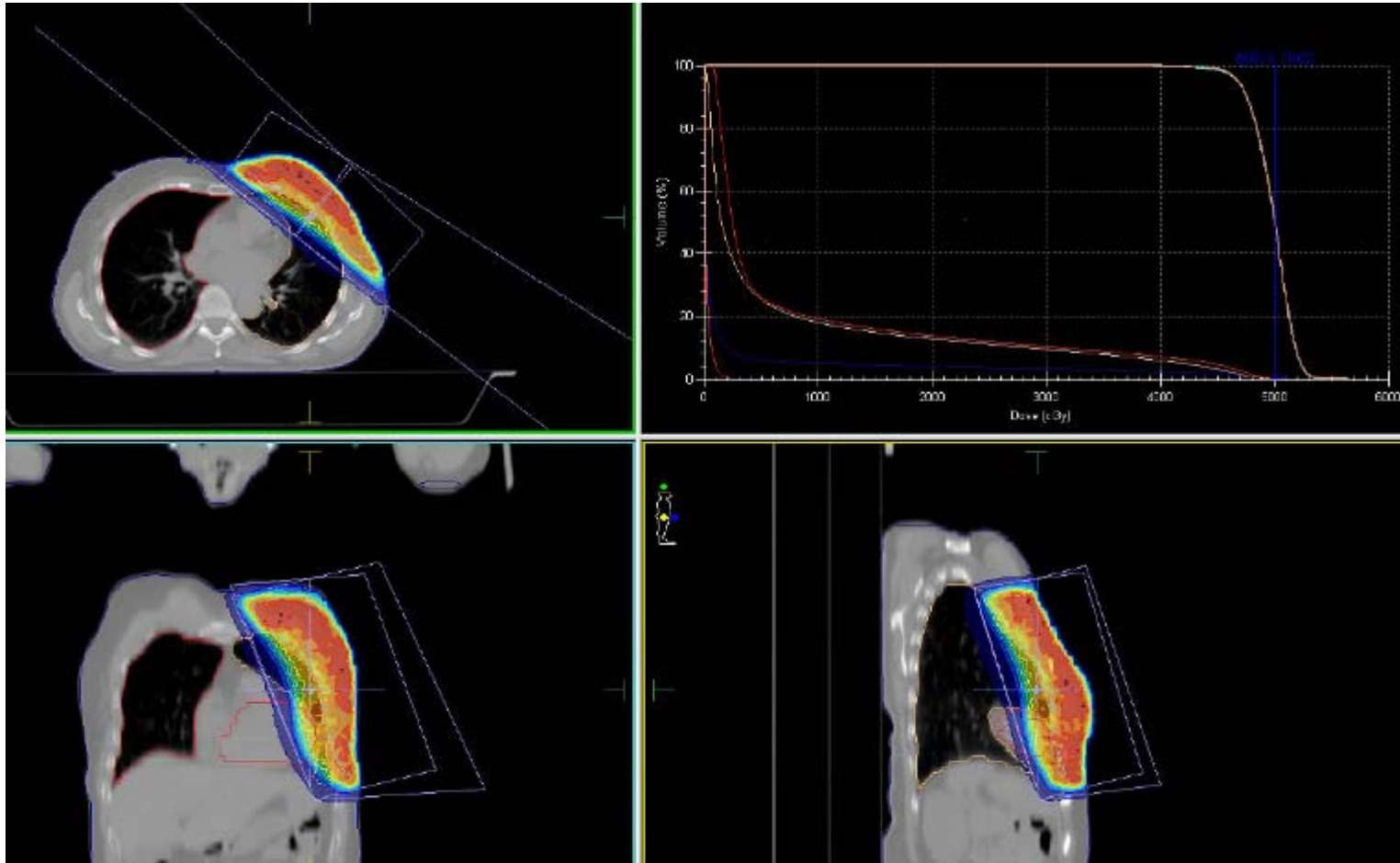
$$\sigma_{\text{Monaco}} = 0.4 \%, \quad \sigma_{\text{Geant4}} = 1.6 \%$$



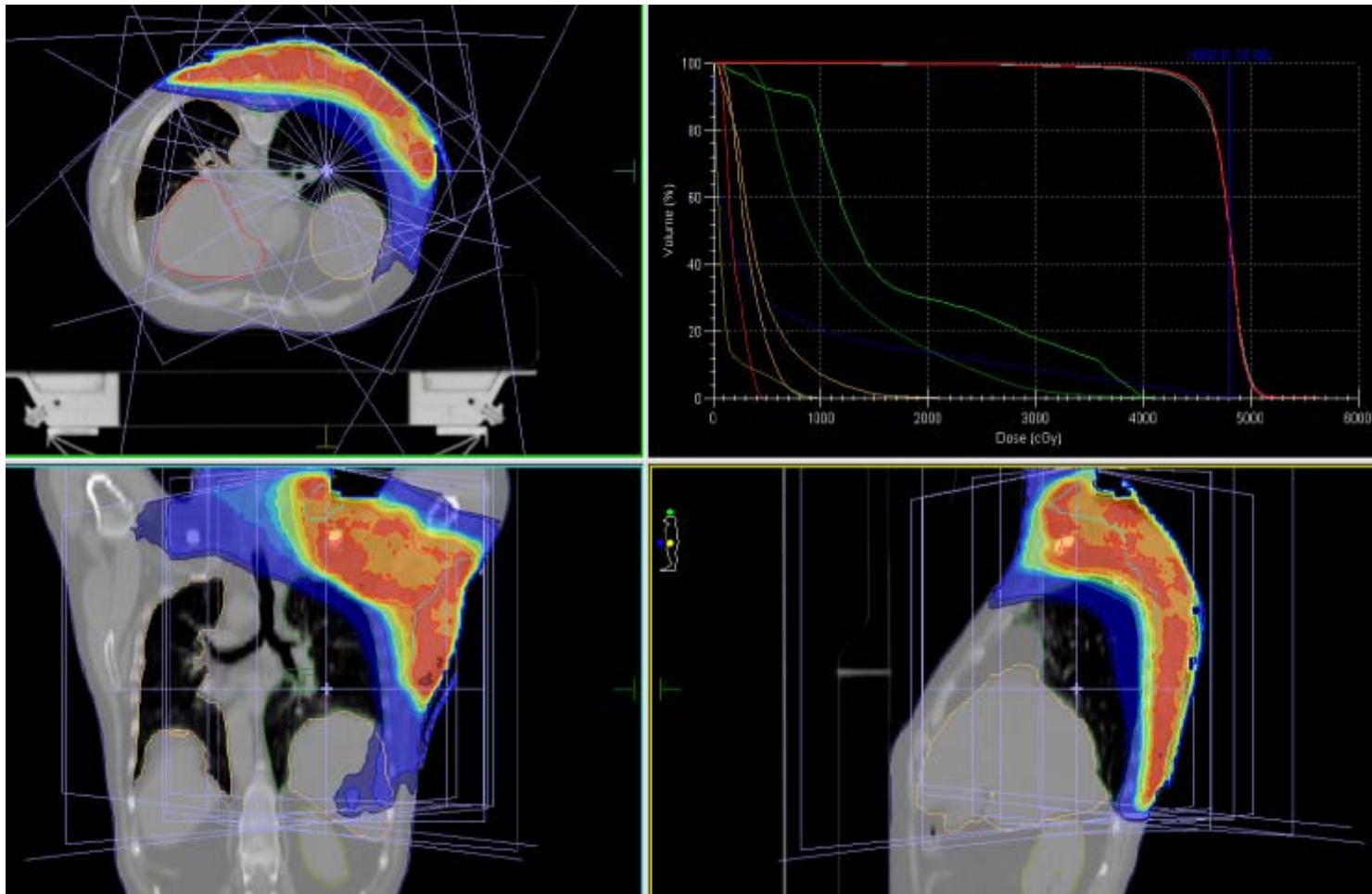
# Lung Tumor boost



# Breast will in a bit be exclusively tangential IMRT



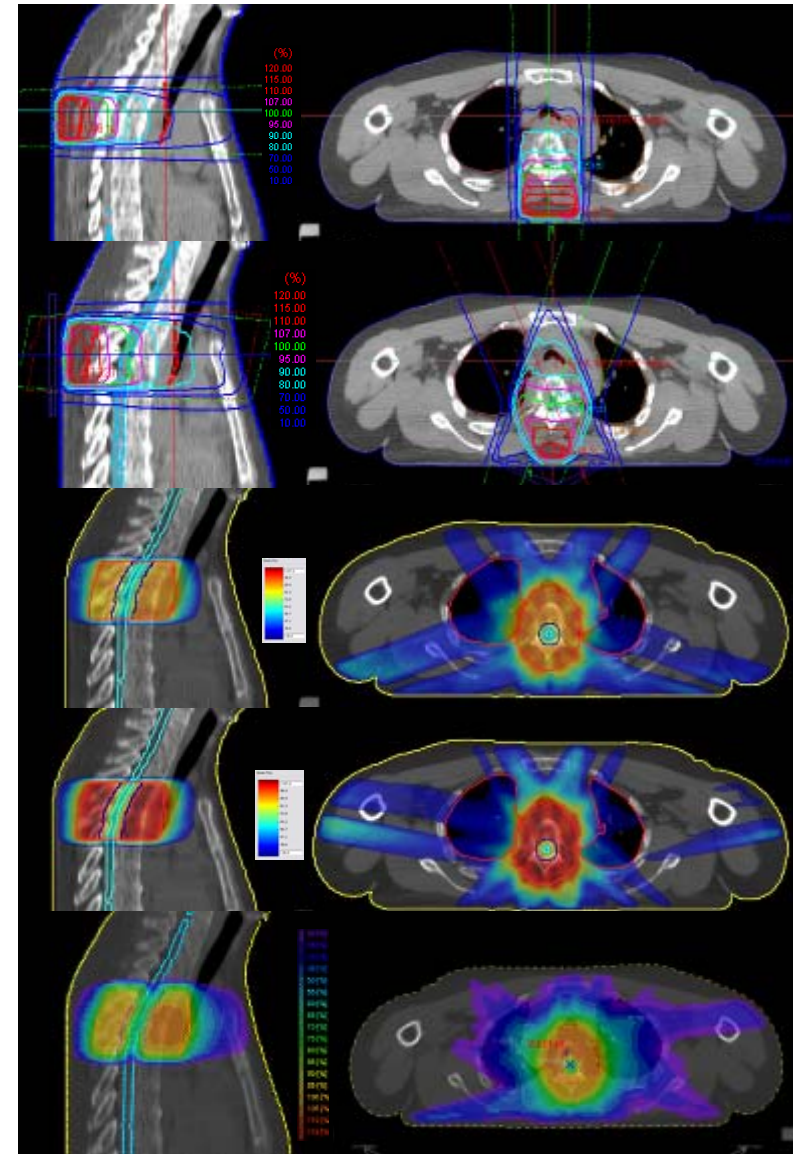
# Cutaneous Melanoma Metastases





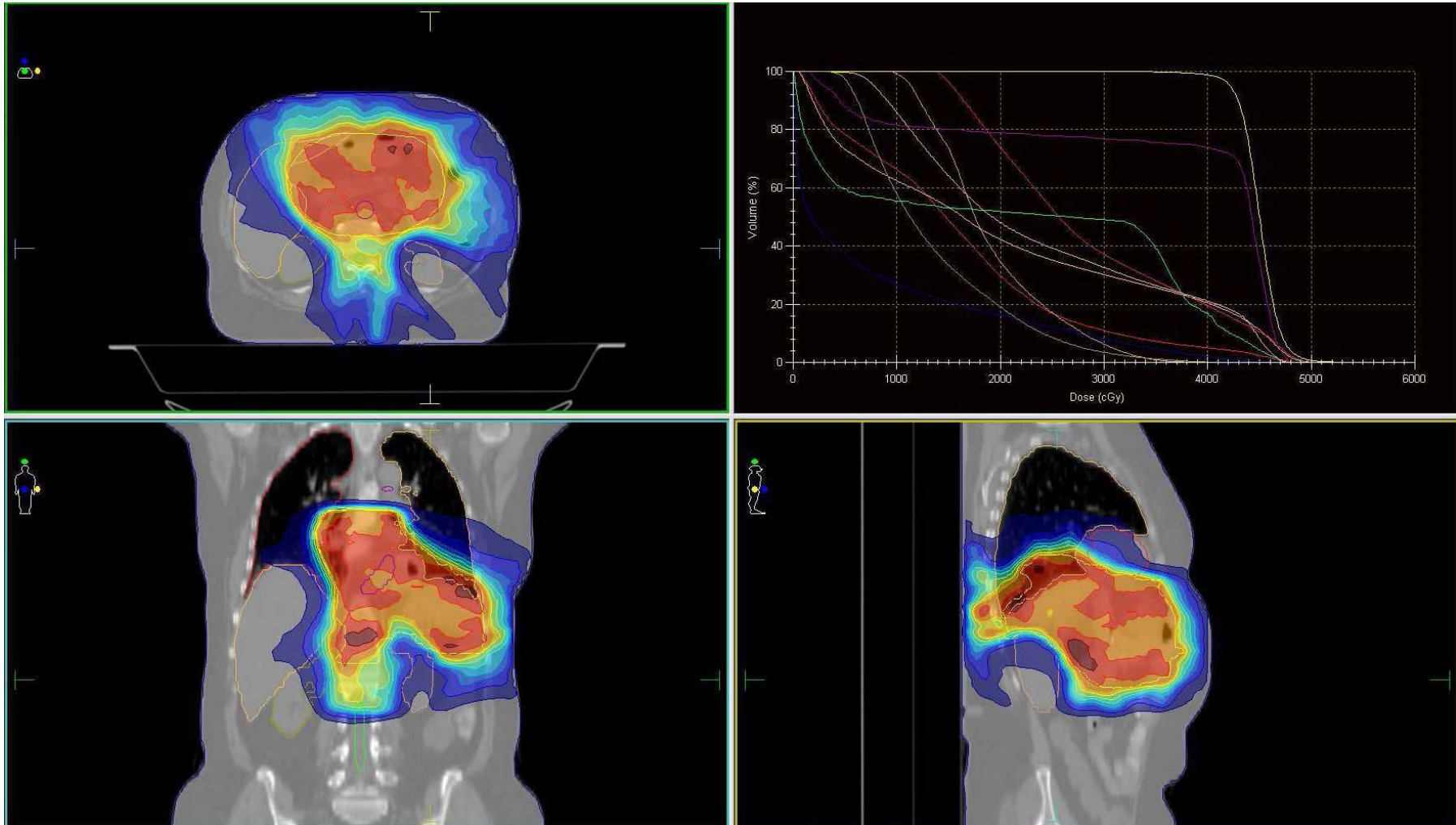
## VMAT for Reirradiation of Paraspinal Tumors

	3D-PA	3D-Wedge	IMRT 5B	IMRT 7B	VMAT
<b>HI40</b>	-	-	1.18±0.07	1.17±0.06	1.14±0.07
<b>CI</b>	-	-	1.74±0.32	1.85±0.21	1.96±0.36
<b>MU</b>	240±21	553±136	844±133	877 ±102	785±92
<b>Time</b>	25±2 sec	88±7 sec	348±72 sec	472±82 sec	289±69 sec
<b>C<sub>95%PD</sub></b>	0% / 47.92±9.89%	0% / 55.33±1.93%	82.59±4.56%	81.22±4.37%	81.28±4.25%
<b>SC<sub>PTV</sub></b>	26.11±0.33Gy	25.98±0.06Gy	26.91±0.93Gy	25.67±1.55Gy	23.54±2.35Gy

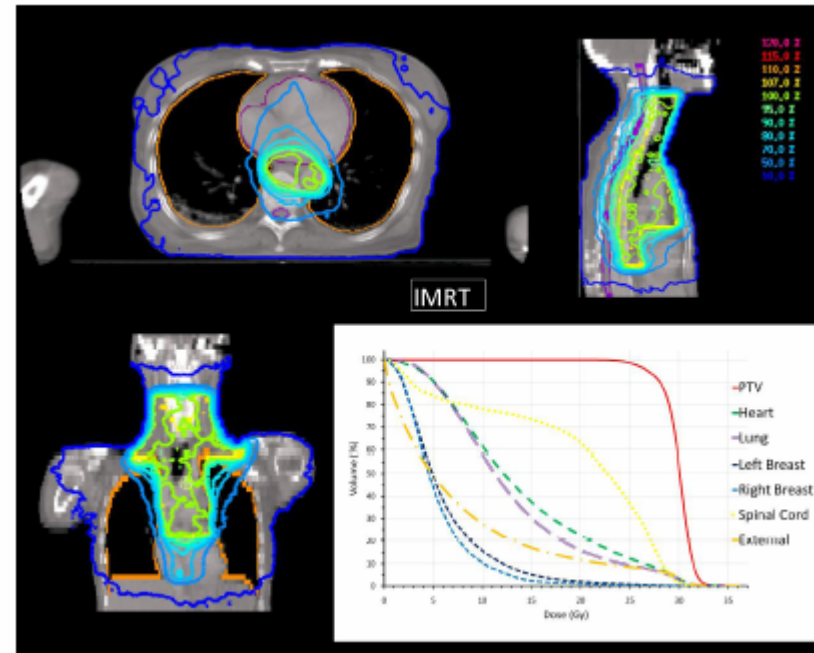
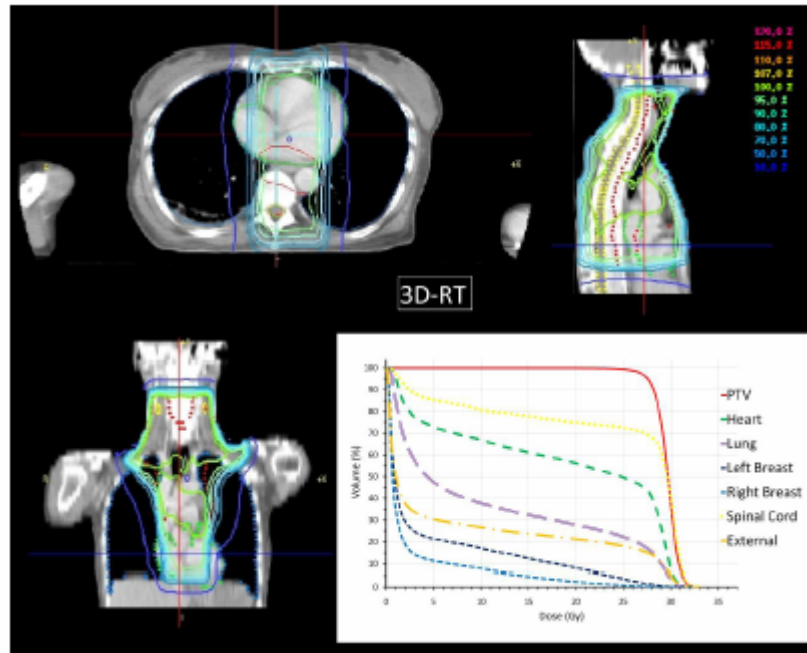


Stieler et al. SUON, 2011

# Gastric Cancer



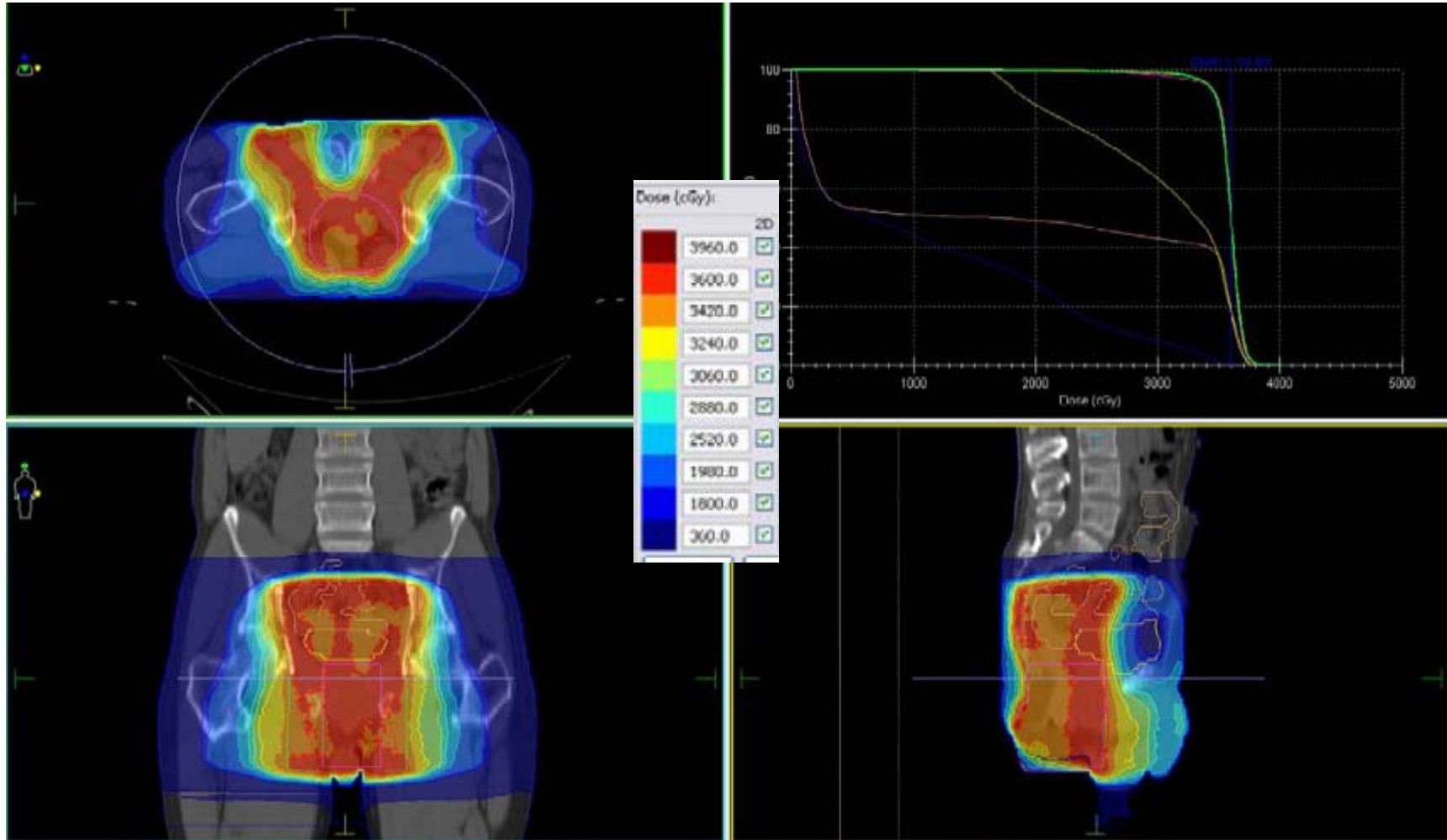
# Hodgkin's Disease



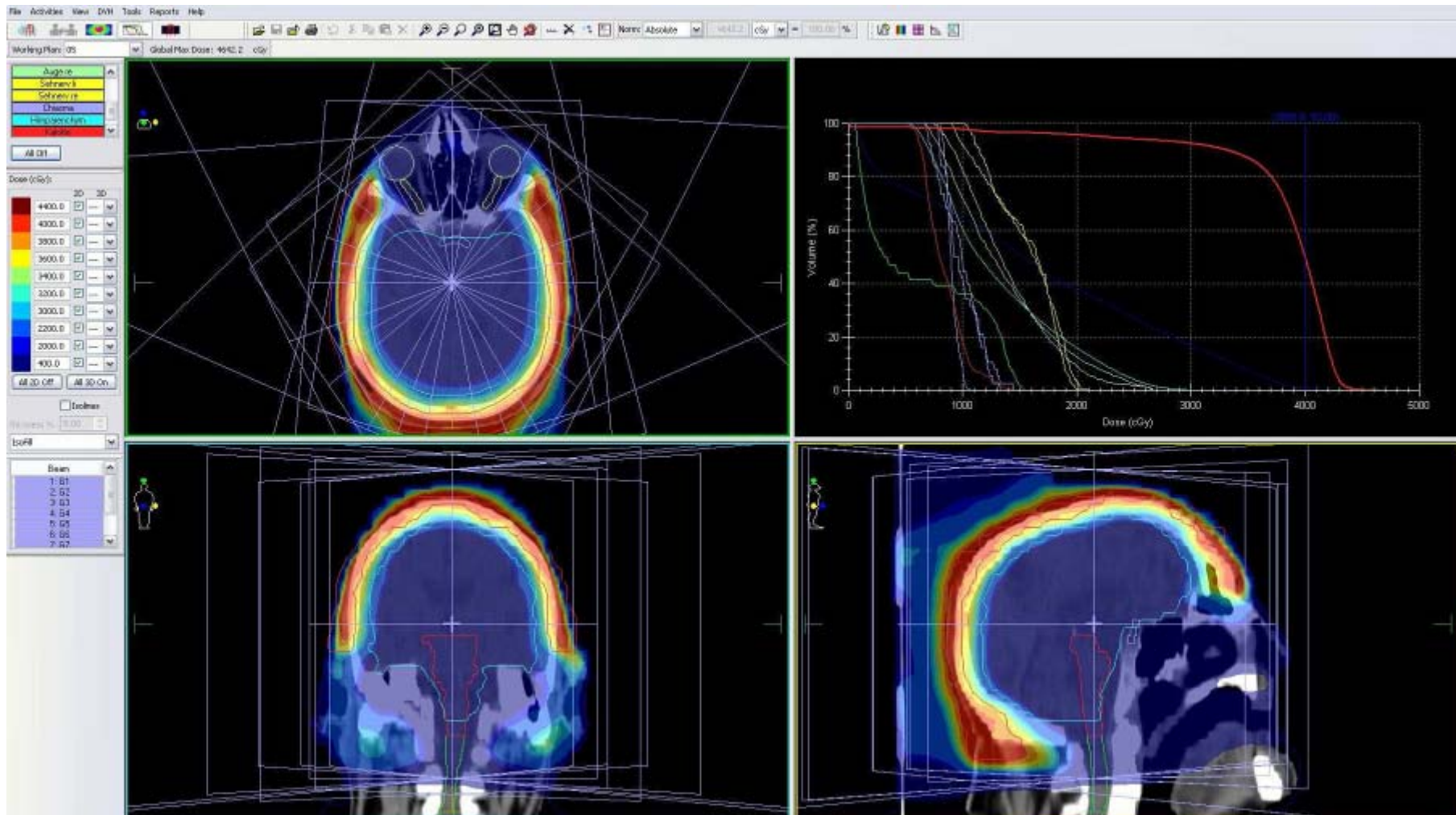
Koeck et al., IJROBP, 2012

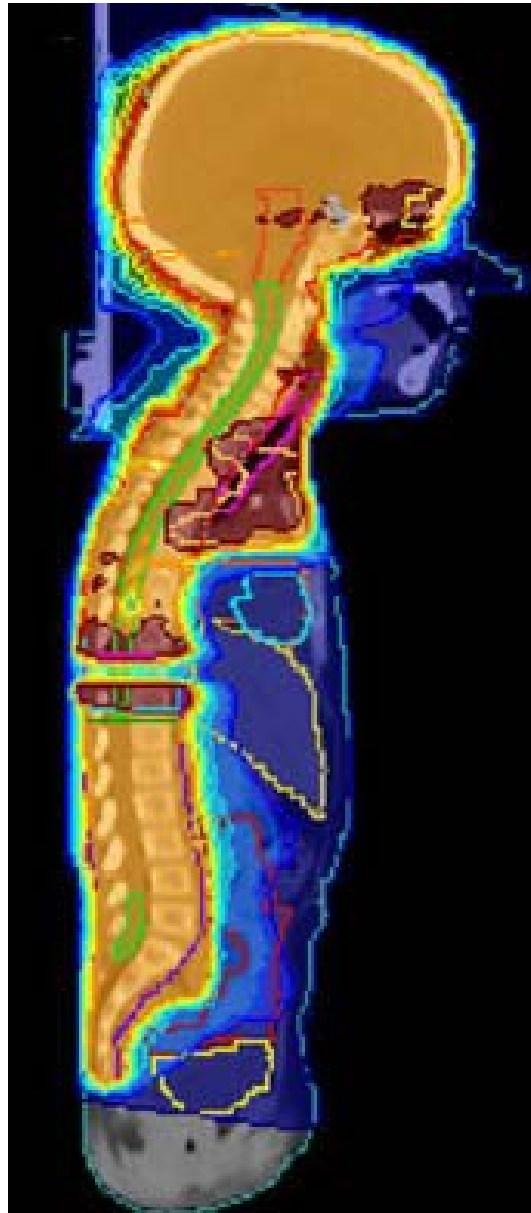
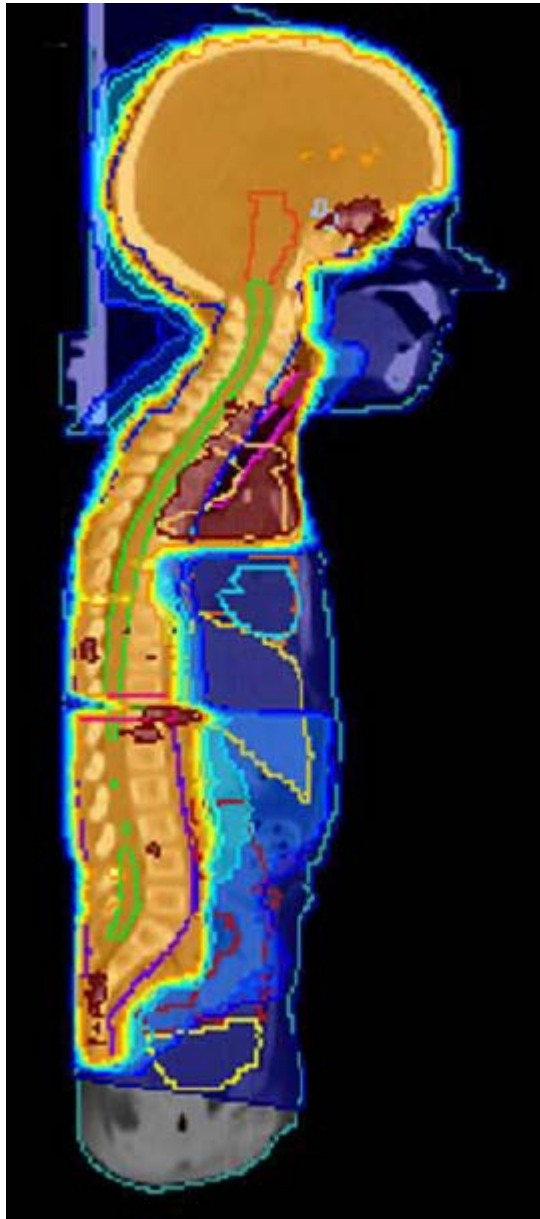


# Anal Cancer

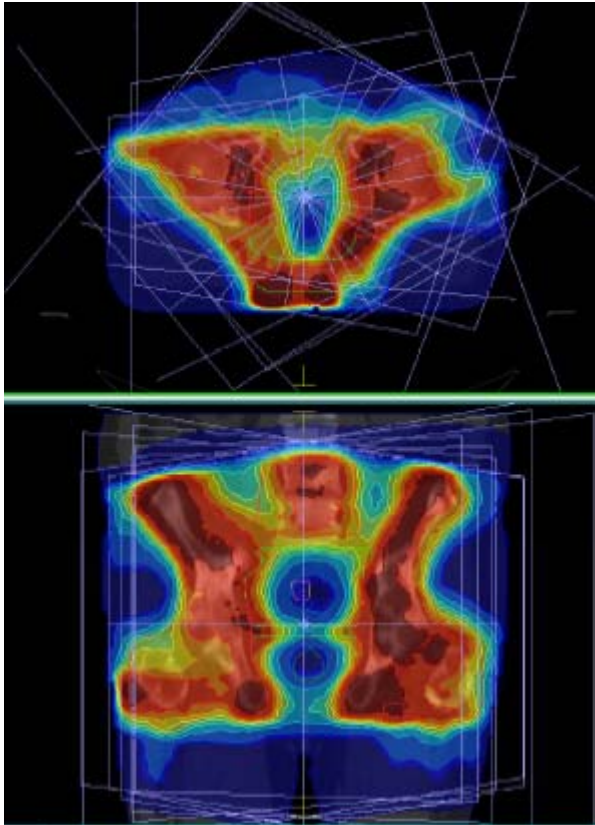




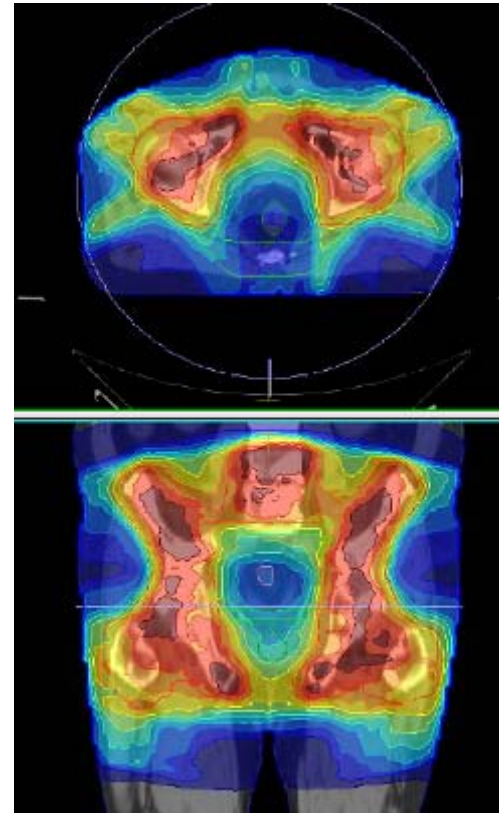




# Static Gantry IMRT



# VMAT





LB4  
07.09.2010

#	Patient	ID1	Time (beams on + imaging)	Crs	Txd- Field	Mode	MU	Wdg MU	Dose	Wdg- Appl	Comp- FDA*	Block- Orth	V&R	I/O
100	Patient A	AAA	12:47	1	CT	X CT	0.0		0 cGy				vp	Out
101	Patient B	BBB	12:52	1	10ROT	6X VMAT 104C P	444.1	0.0	200 cGy				vf	Out
	Patient B	BBB	13:02	7	CT	X CT	0.0		0 cGy				vp	Out
102	Patient C	CCC	13:06	7	4ROT1	6X VMAT 91CP	848.1	0.0	200 cGy				vf	Out
	Patient C	CCC	13:13	1	CT	X CT	0.0		0 cGy				vp	Out
103	Patient D	DDD	13:23	1	2ROT1	6X VMAT 192C P	662.9	0.0	200 cGy				vf	Out
	Patient D	DDD	13:39	1	CT	X CT	0.0		0 cGy				vp	Out
104	Patient E	EEE	13:47	1	2ROT1	6X VMAT 189C P	775.3	0.0	200 cGy				ovf	Out

27 min. total treatment time, including cone beam CT and imaging.

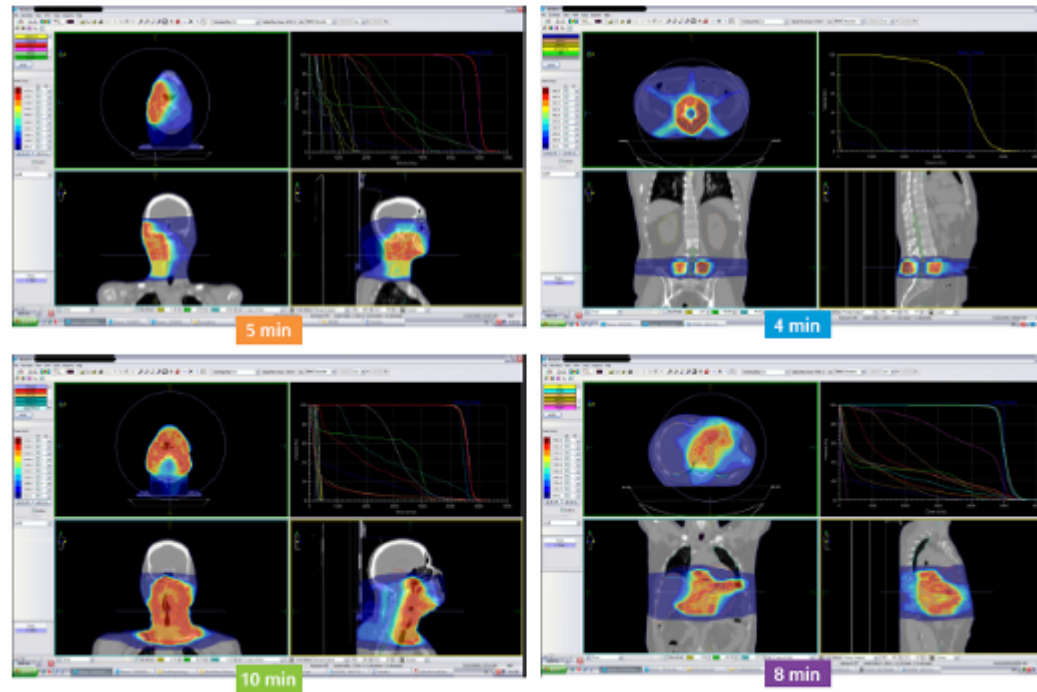


Figure 5. One hour routine treatment. Patient logistics vs. treatment time (IGRT + VMAT): 50% / 50%. Beam-on-times between 2 and 7 minutes.





# Clinical Commissioning of the new Elekta Agility

**Dipl.Phys. MSc. Flavia Molina**

**Klinik für Strahlentherapie und Radioonkologie**

Universitätsklinikum Mannheim

Medizinische Fakultät Mannheim

**Direktor: Prof.Dr.F.Wenz**

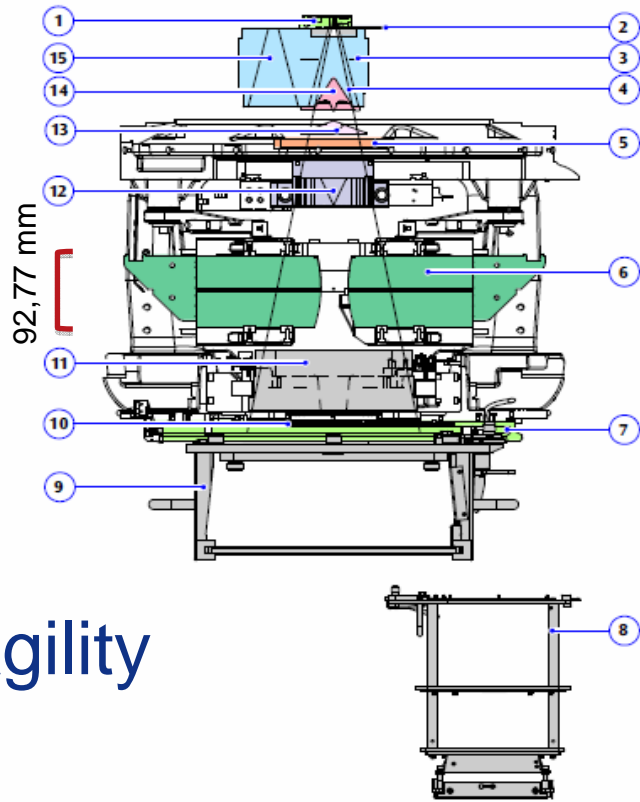


# Properties of Agility

Lamellenzahl	160
Leaf width at Isocenter	5 mm
Maximum Field size	40 x 40 cm <sup>2</sup>
Minimum Field size	0,5 x 0,5 cm <sup>2</sup>
Maximum Leaf Speed	6,5 cm/s
Diaphragm-Speedt	9 cm/s
Transmission	< 0,5%
Interdigitation	possible



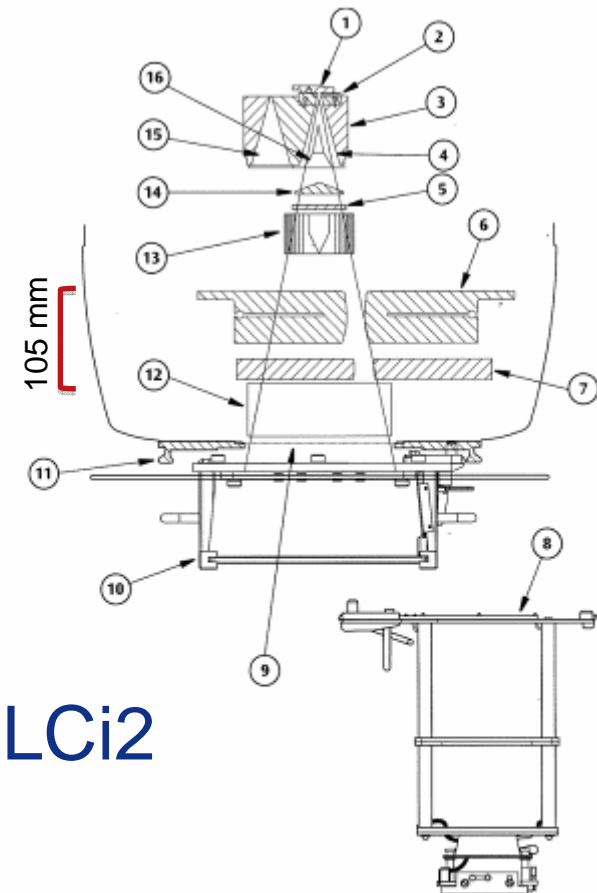
# Modes of



## Agility

Abbildung 11.1 Schematische Darstellung des Agility-Blendensystems (IEC 61217)

- |                                   |                             |   |
|-----------------------------------|-----------------------------|---|
| (1) Targetblock                   | (6) MLC-Leaves              | (11) Y-Blenden                                      |
| (2) Primärer Feldausgleichsfilter | (7) <del>Zubehörring</del>  | (12) Motorisierter Keilfilter (mit Rückstreuplatte) |
| (3) Primärkollimator              | (8) Elektronenappikator     | (13) Sekundärer Filter                              |
| (4) Port 1                        | (9) Satellitenträger        | (14) Differentialfilter                             |
| (5) Ionisationskammer             | (10) Mylar®-Fadenkreuzfolie | (15) Port 2   |



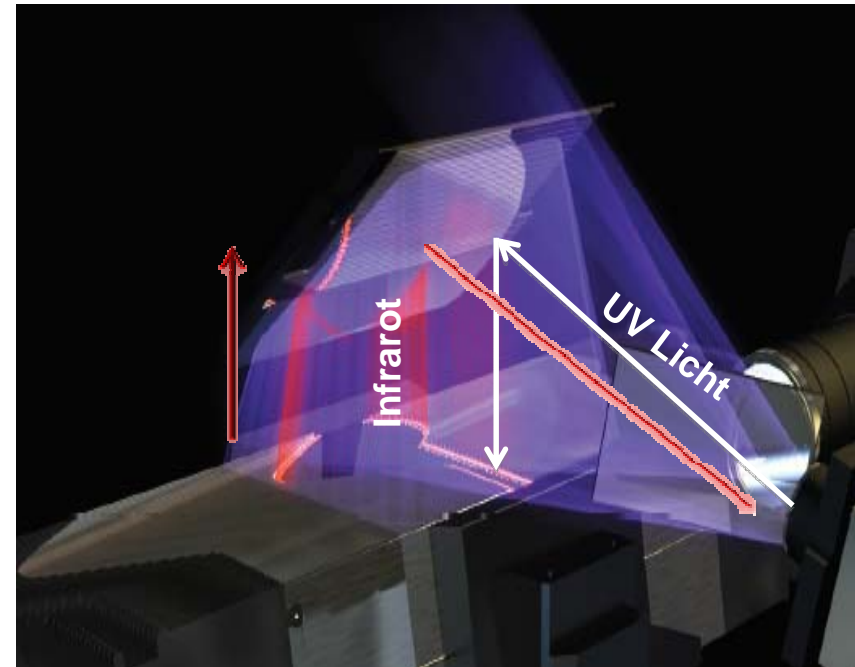
## MLCi2

Abbildung 13.1 Schematische Darstellung von MLCi und MLCi2 (IEC 61217)

- |                                   |   |   |
|-----------------------------------|---|---|
| (1) Targetblock                   | (7) X-Backup-Blenden (Sekundärkollimatoren) | (12) Y-Blenden (Sekundärkollimatoren)               |
| (2) Primärer Feldausgleichsfilter | (8) Elektronenappikator                     | (13) Motorisierter Keilfilter (mit Rückstreuplatte) |
| (3) Primärkollimator              | (9) Mylar®-Fadenkreuzfolie                  | (14) Sekundärer Filter                              |
| (4) Port 1                        | (10) Satellitenträger                       | (15) Port 2   |
| (5) Ionisationskammer             | (11) Zubehörring                            | (16) Differentialfilter                             |
| (6) MLC-Leaves                    |   |   |



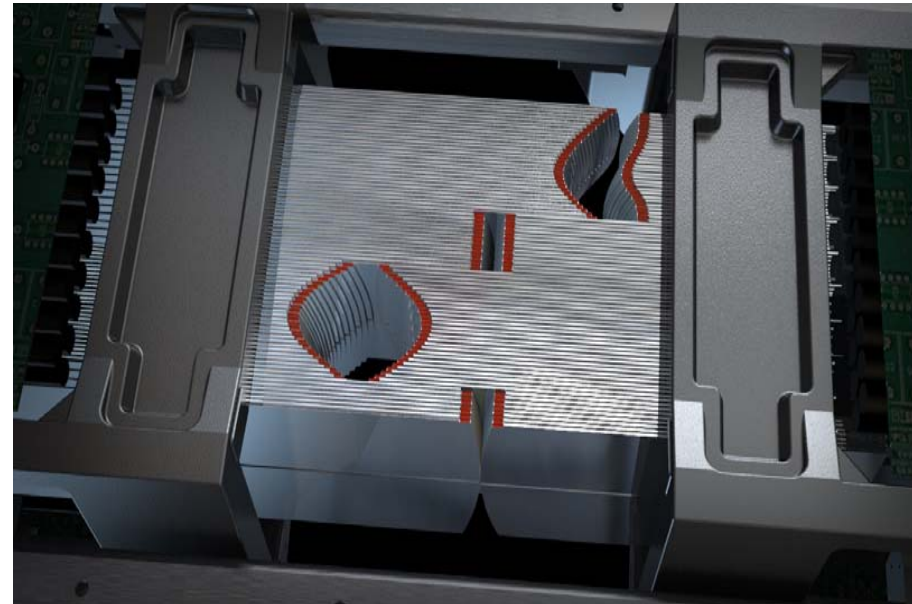
# MLC Rubicon-System





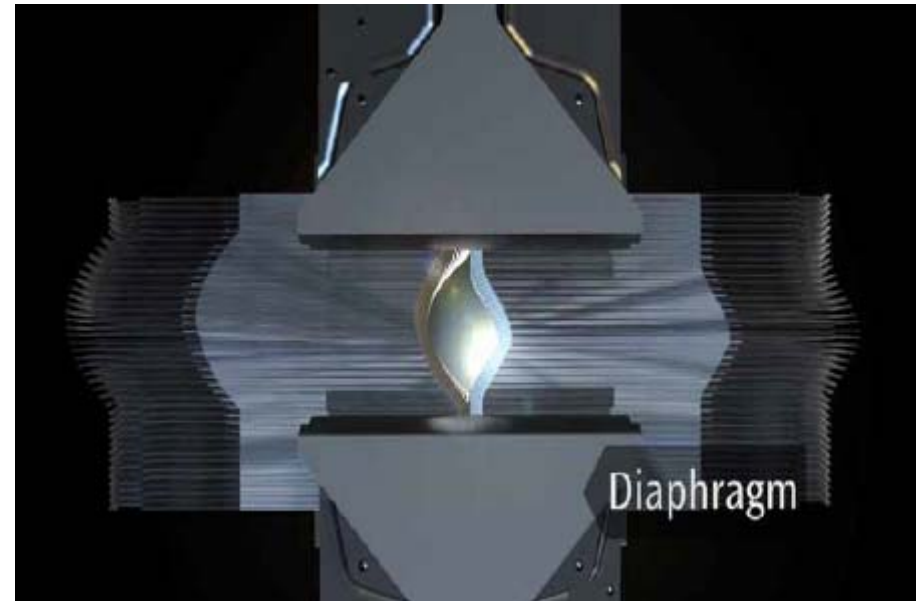
# Leafspeed

- 160 Leaves x 5 mm at Isozentrum, über das gesamte 40x40 Feld.
- Interdigitation and Island Shapes
- Maximum Leafspeed 6.5cm/s



# Transmission

- Leakage < 0,5% over the whole field



# Agility Kommissionierung I

**1 Linac delivered in Mai 2012**

**Installation june/july 2012**

**Integrity 3.0**

**XVI R 4.5**

**IViewGT**

**Mosaiq 2.4.1**

**- Photon Energy**

**6MV**

**10MV**

**18MV**

**Elektron Energy:**

**- 6MeV**

**- 8 MeV**

**- 10 MeV**

**- 12 MeV**

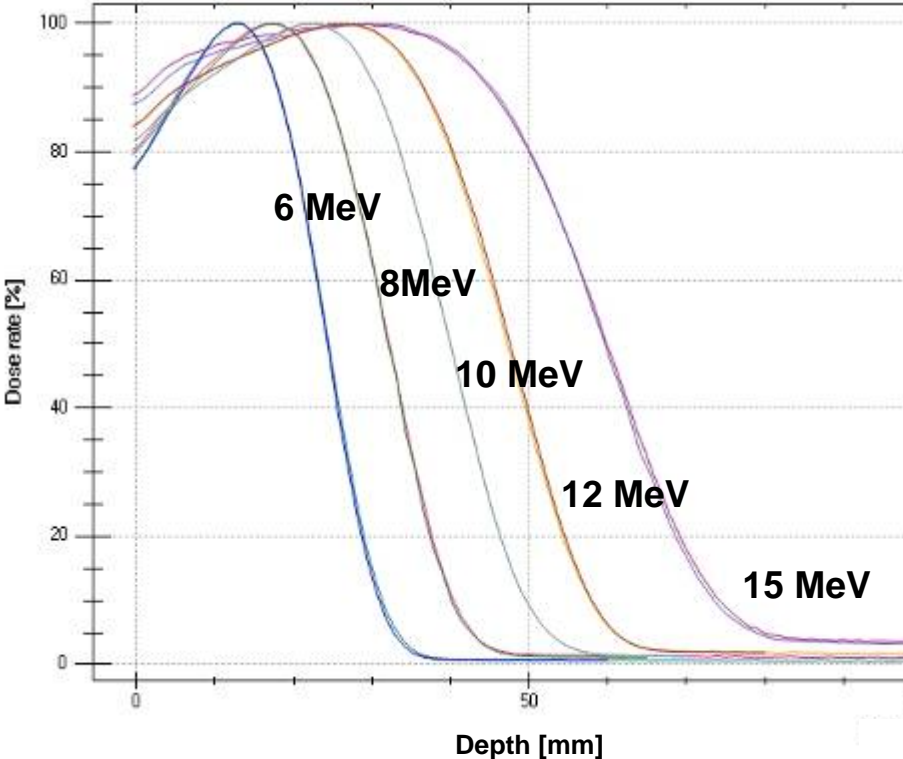
**- 15 MeV**

**Filter free for Research since Oktober 2012**

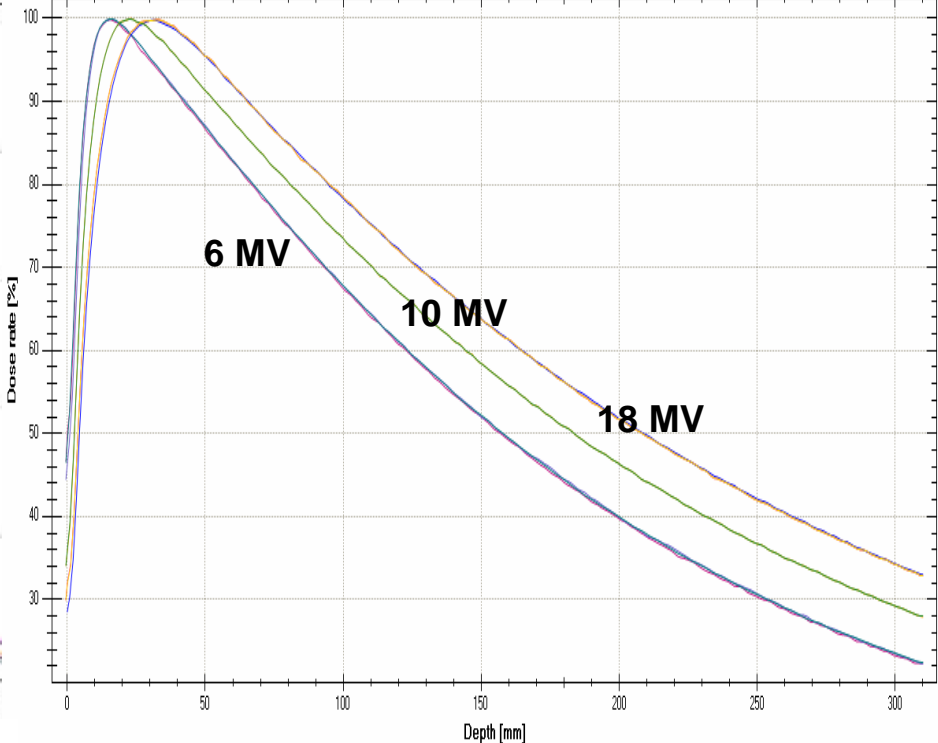


# TDK Agility and MLCi2

## Elektronen

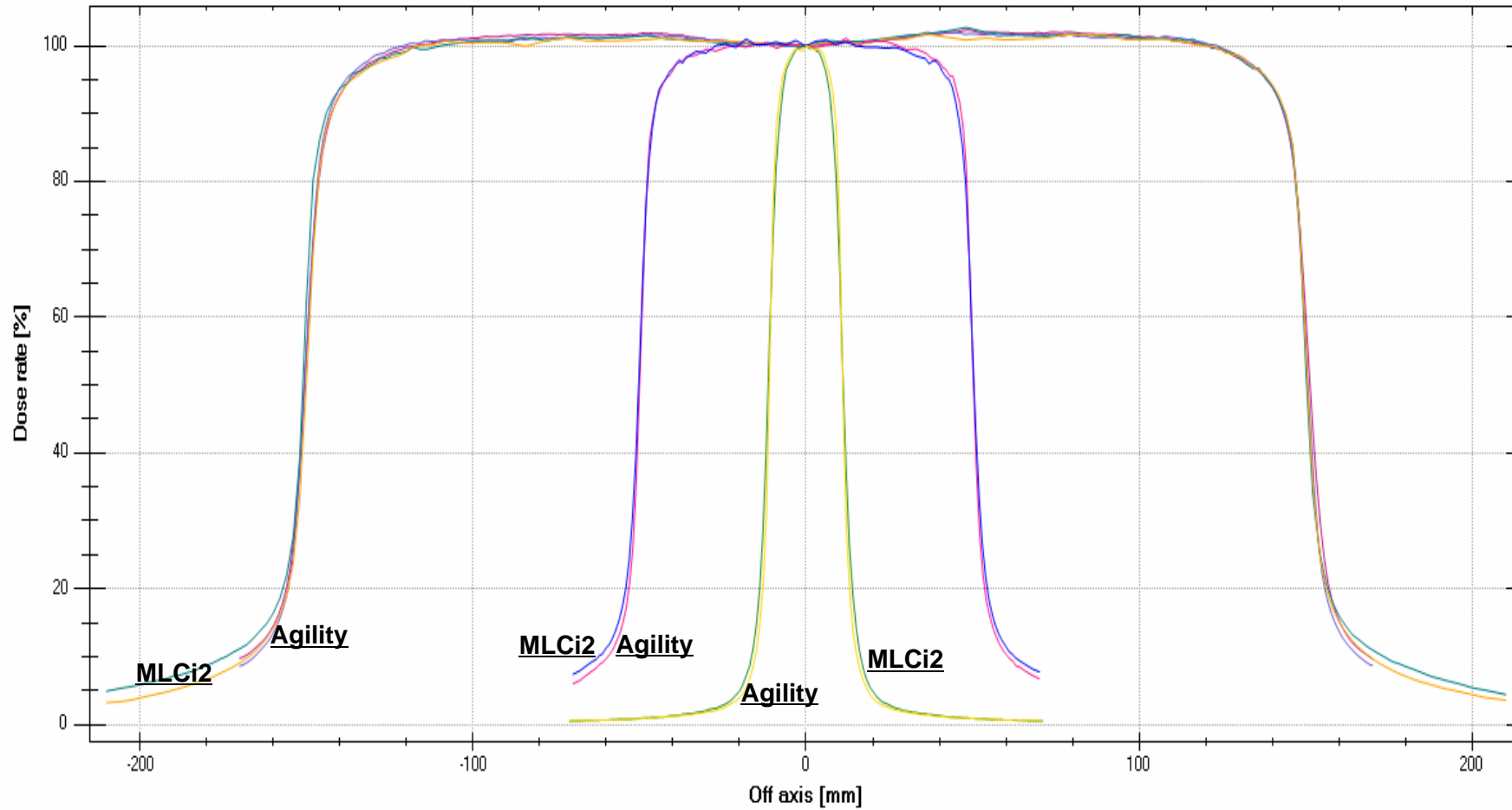


## Photonen





# In- Cross Plane Agility und MLCi2



# Flattening filter free (FFF) with Monaco 3.3

F. Stieler, Ph.D.  
V. Steil, F. Lohr, M.D.



Name | Folie 1 | Datum

Medizinische Fakultät Mannheim  
der Universität Heidelberg

Universitätsklinikum Mannheim



Medizinische Fakultät Mannheim  
der Universität Heidelberg

Universitätsklinikum Mannheim



# FFF Development Work

The FFF pilot sites are

Middlesbrough, UK

Leeds, UK

Mannheim, Germany

Leeuwarden, Netherlands

The following sites were a part of the consortium

National Physics Laboratory, UK

Vienna, Austria

Birmingham, UK

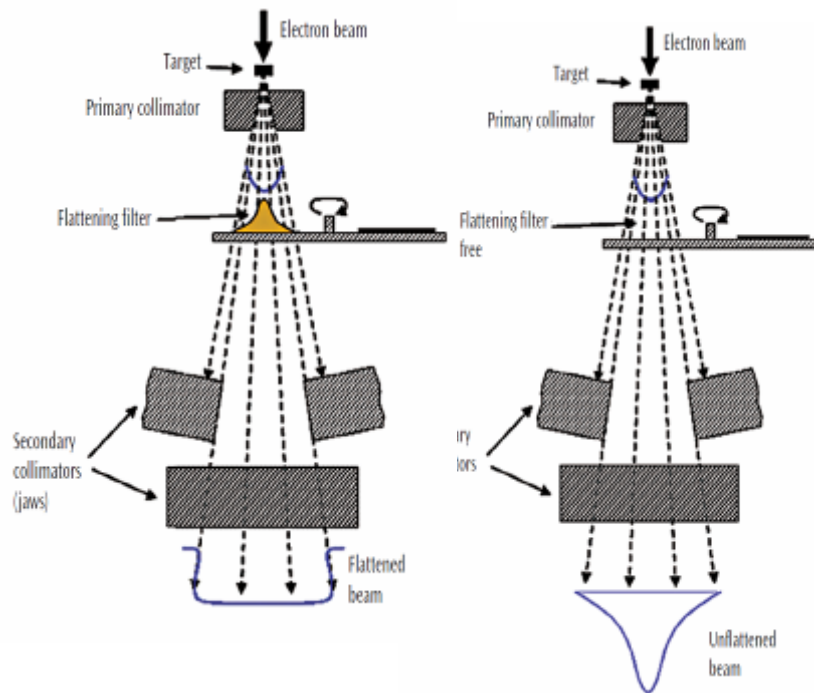
NKI-AVL, Netherlands

Leeds, UK

Leeuwarden, Netherlands



# Flattening filter free (FFF) mode



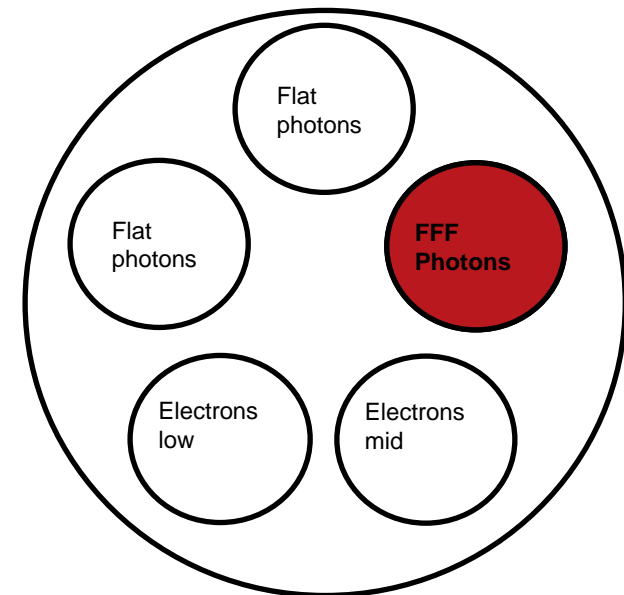
\*By courtesy of, Elekta Crawley

- FFF increases the dose rate for 6MV ~16 Gy/min, 10 MV ~22 Gy/min
- FFF beams have less variation of off-axis beam hardening
- FFF has less photon head scatter
- FFF has less leakage outside of beam collimation



# FFF Mannheim machine setup

Photonen (MV)	FF	FFF
X06	√	√
X10	√	√
X18	√	∅
Elektronen (MeV)		
Low 04,06,08	√	√
Mid 10,12,15	√	√
High 18,20,22	∅	∅



# FFF - Clinical application chain

Treatmentplanning

**Monaco Version 3.3**

Linear accelerator

**Versa HD (Agility, Integrity vers. 3.1, FFF)**

OIS System

**Mosaiq Version 2.5**



# Limitations for Modulation in General

- Gantry speed
  - Due to patient safety 1 rpm

- Leaf speed
  - Agility MLC ~3 times faster than MLC2i

- Doserate
  - conventional ~ 6 Gy/min

MLC	Nr. of leaves	Leaf width isocenter	overtravel	Leaf speed	Leaf nominal height
Agility	160	0,5 cm	15 cm	0-3,5cm/sec up to 6,5 cm/sec * *Combined with leaf guide	9 cm
MLC2i	80	1,0 cm	12,5 cm	0-2,0 cm/sec.	8,2 cm

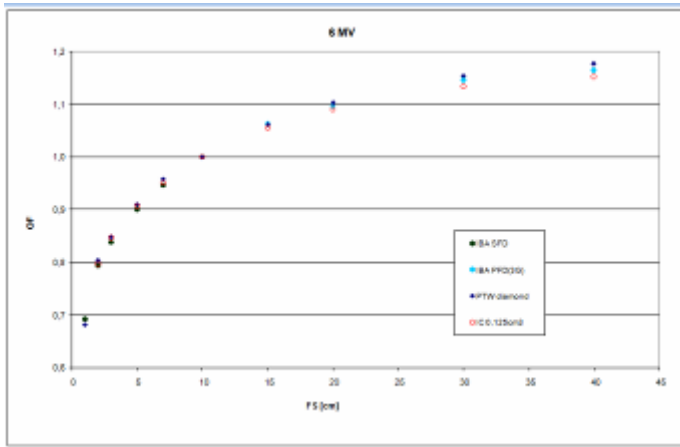




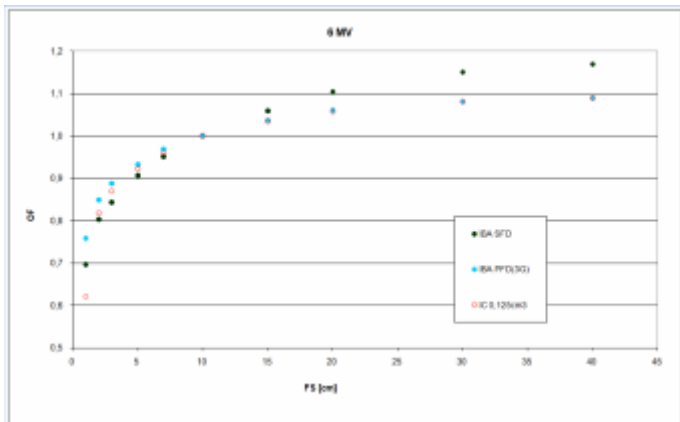
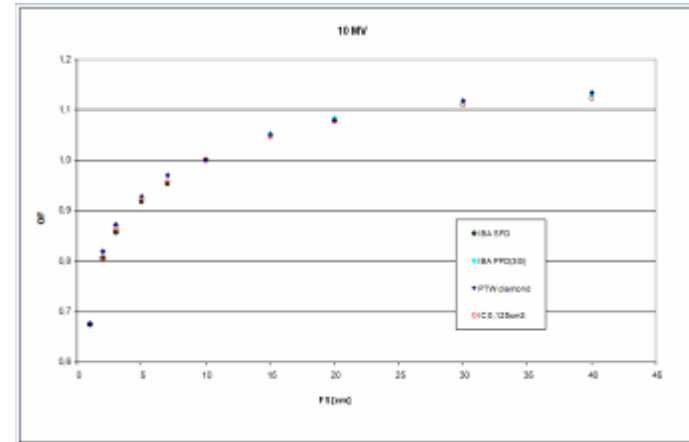
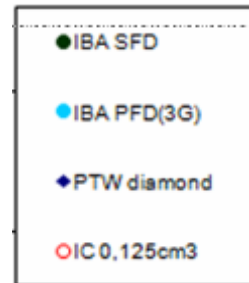


# FF / FFF – Validation output factors

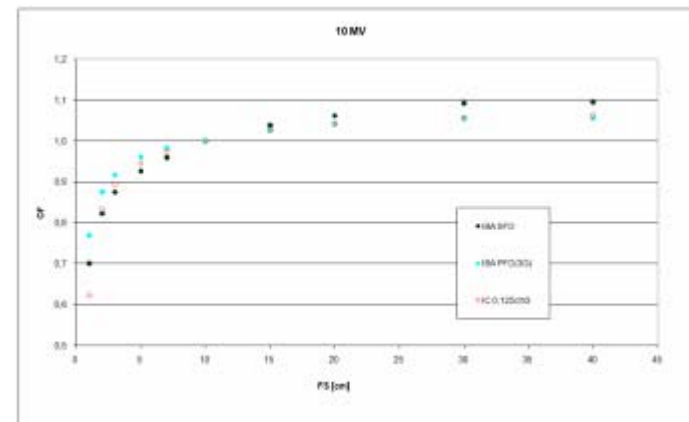
## Monaco 3.3 vers. Measurements 6 /10 MV



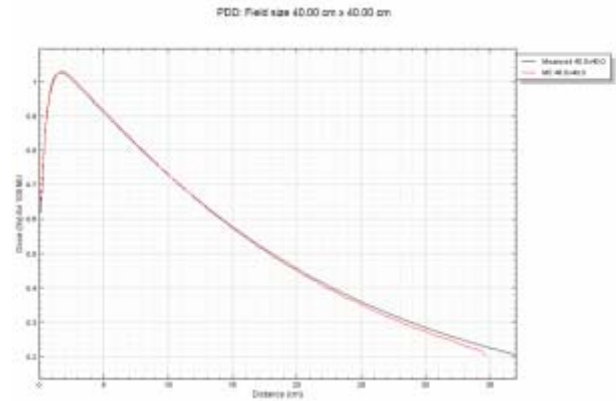
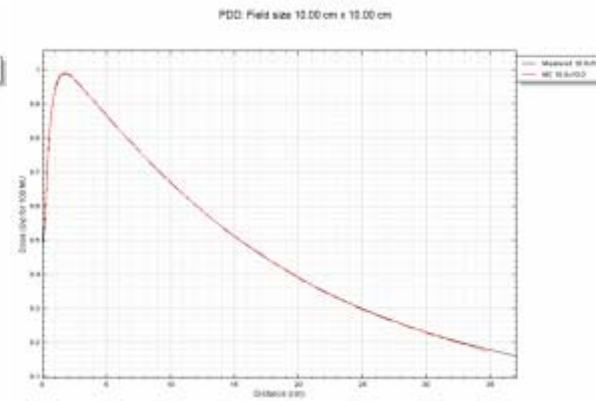
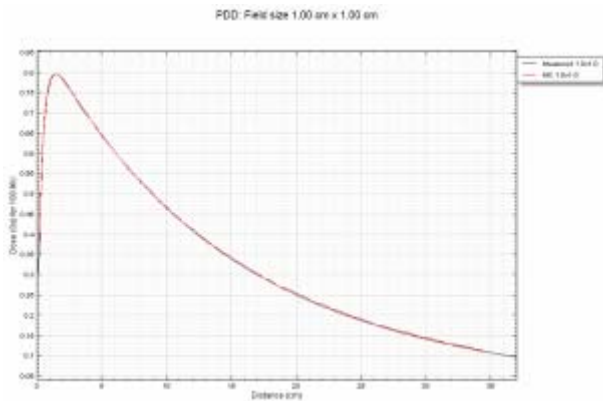
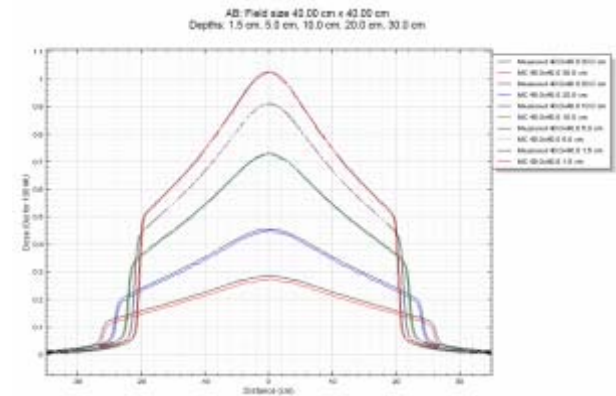
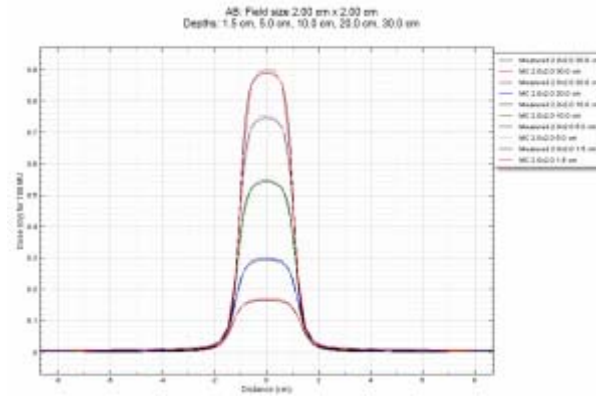
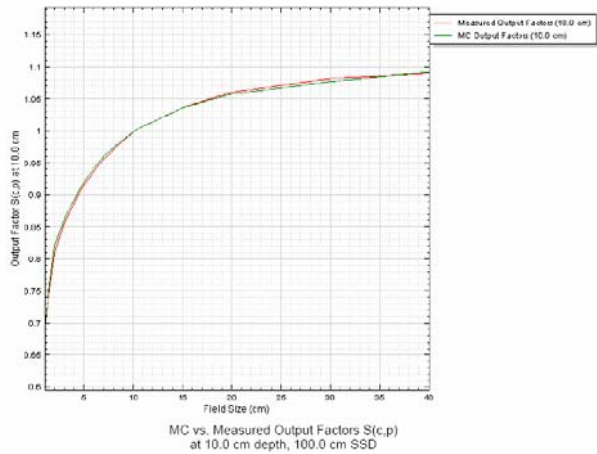
FF - mode



FFF - mode



# FFF – Validation measured vers. calculated data e.g. 6 MV



## Surface Dose

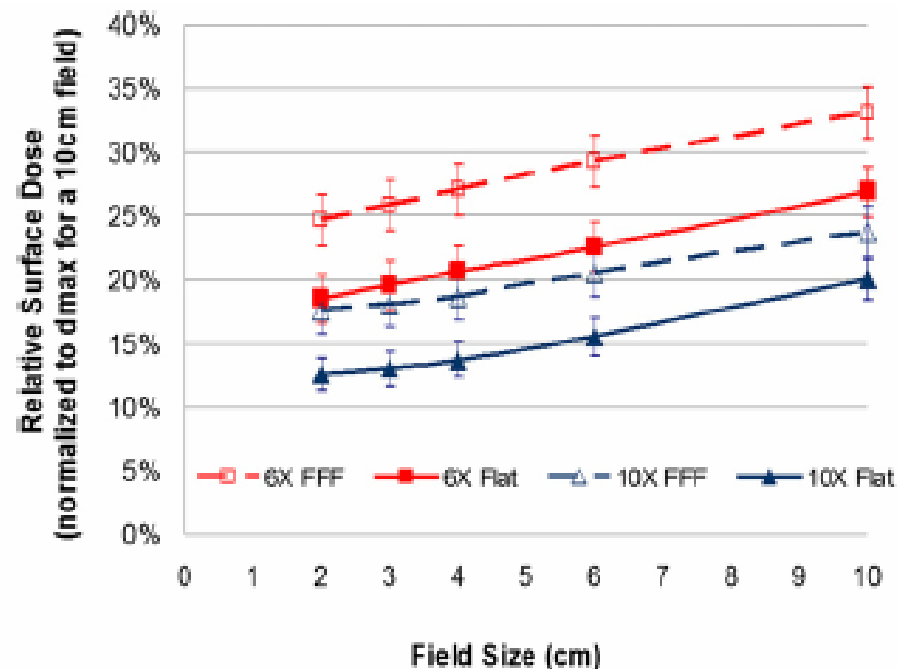


Fig. 1. Relative surface dose ( $D_0/D_{max}$ ) increases linearly with the field size ( $\sim 1\%/cm^2$ ) for both 6X and 10X flat and FFF photon beams (error bar = standard deviation). The surface output factors for field sizes  $2 \times 2 \sim 10 \times 10 \text{ cm}^2$  show  $6X \text{ FFF} > 6X \text{ Flat} > 10X \text{ FFF} > 10X \text{ Flat}$ , which have zero-field-size surface doses of 22.8%, 16.4%, 15.7%, and 10.2%, respectively. FFF = flattening filter-free.

# Peripheral Dose

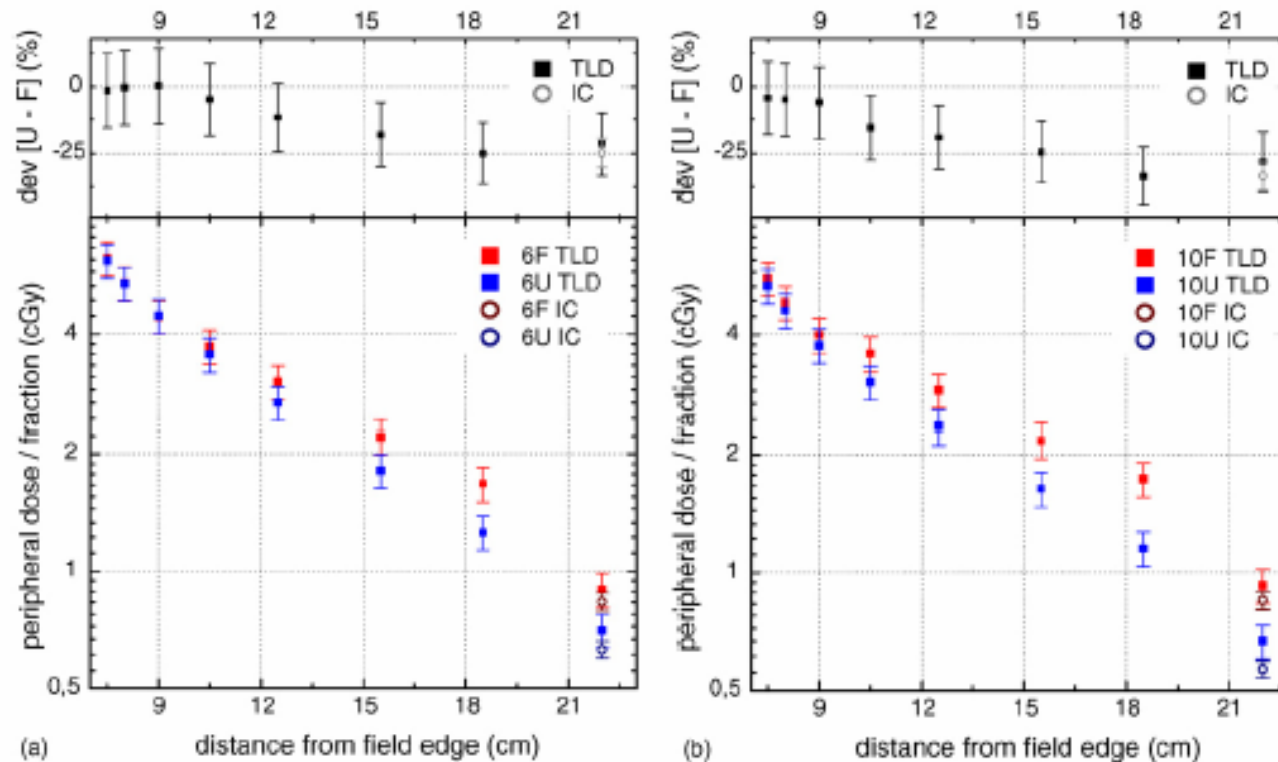


Figure 5. Results of peripheral dose measurements (in the isocentric plane) as a function of the distance from the field edge for the lung SBRT plans with a) 6 and b) 10MV flattened and unflattened beams. The relative percentage reduction in peripheral dose (dev [U - F]) achieved by using FFF beams when compared to FF beams is indicated in gray in the top part of the figure.

Kragl et al., Z Med Phys, 2011





# Peripheral Dose

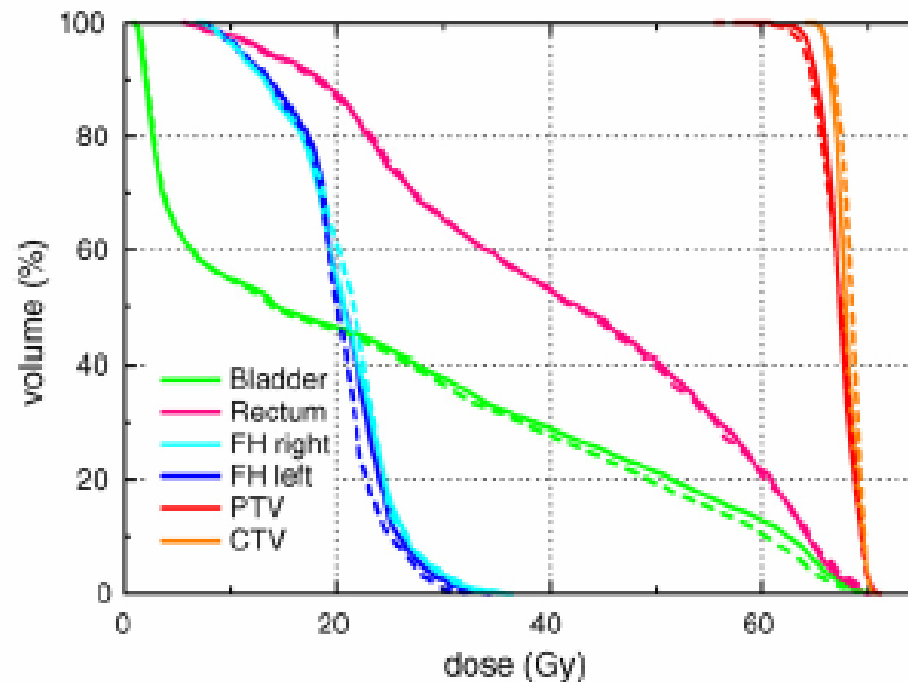


Figure 4. Comparison of DVHs for the prostate IMRT case using FF (solid lines) and FFF beams (dashed lines). The plans were normalized in order to result in the same mean dose to the PTV.

Kragl et al., Z Med Phys, 2011



# Commissioning FFF with Monaco 3.3 and Agility

F. Stieler  
J. Fleckenstein

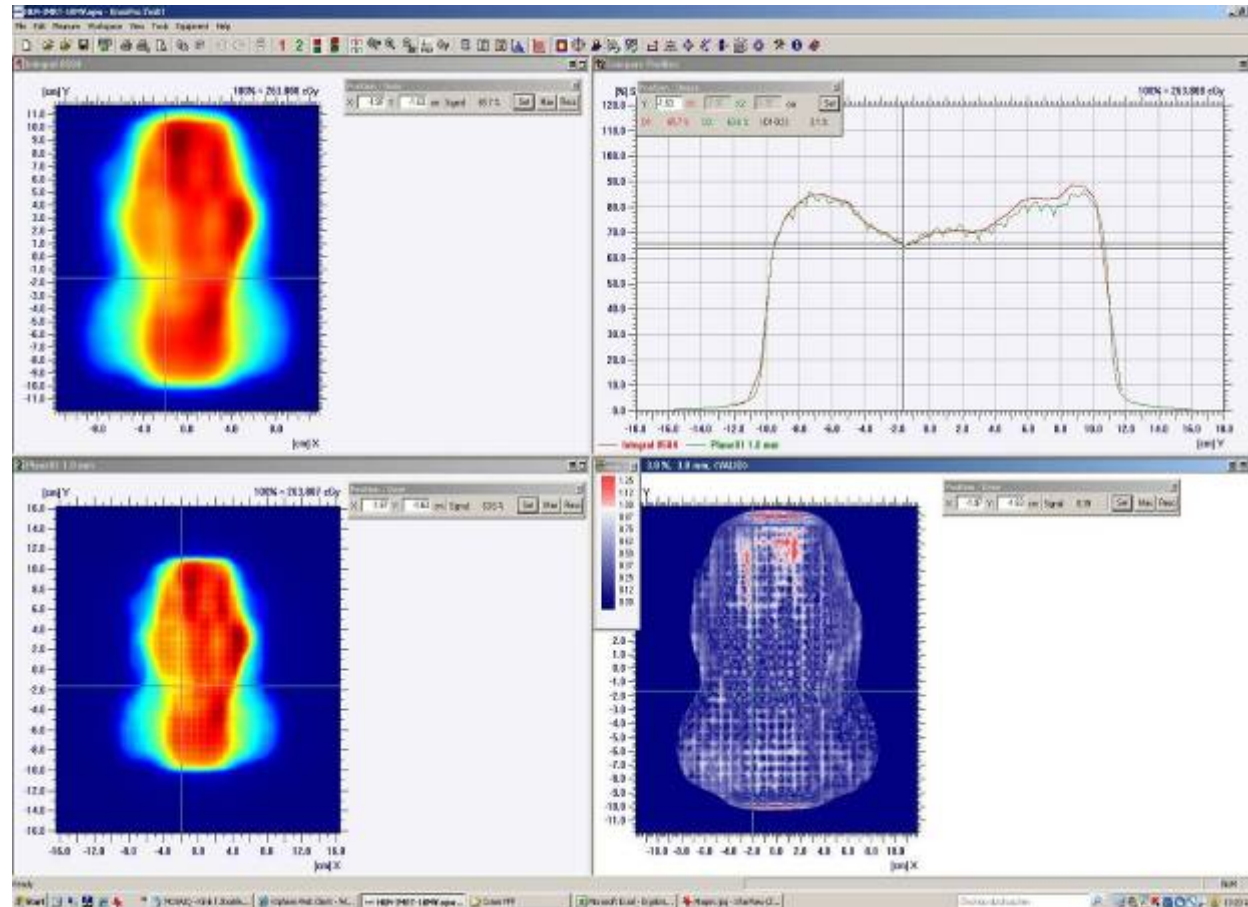


# Larger volume Head & Neck 6MV FFF – IMRT 9 Beams- 2Gy

Gamma 33:  
97,95%

Gamma 55:  
99,99%

collapsed



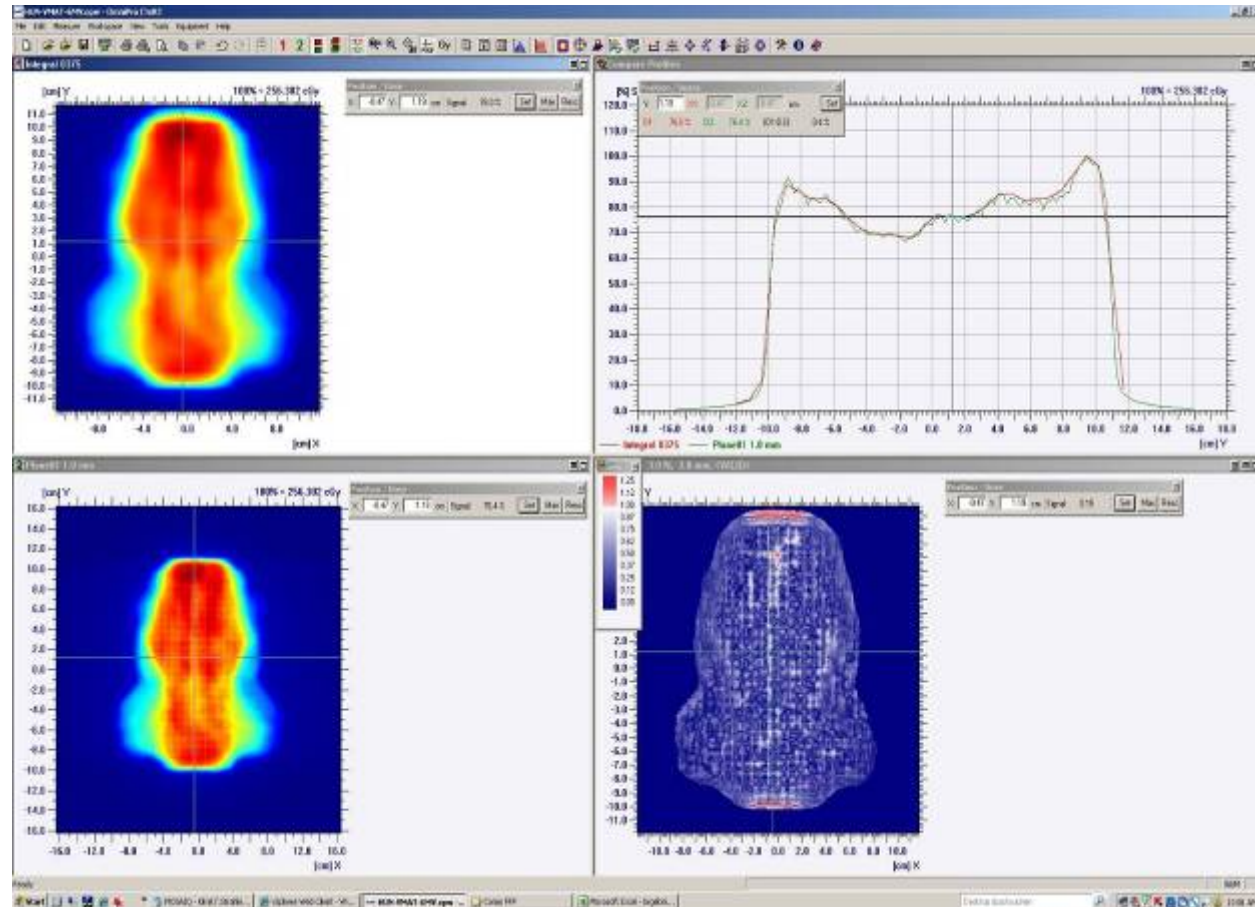
# Larger volume

## Head & Neck 6MV FFF – VMAT 2 Arcs – 2Gy

Gamma 33:  
98,99%

Gamma 55:  
99,91%

collapsed

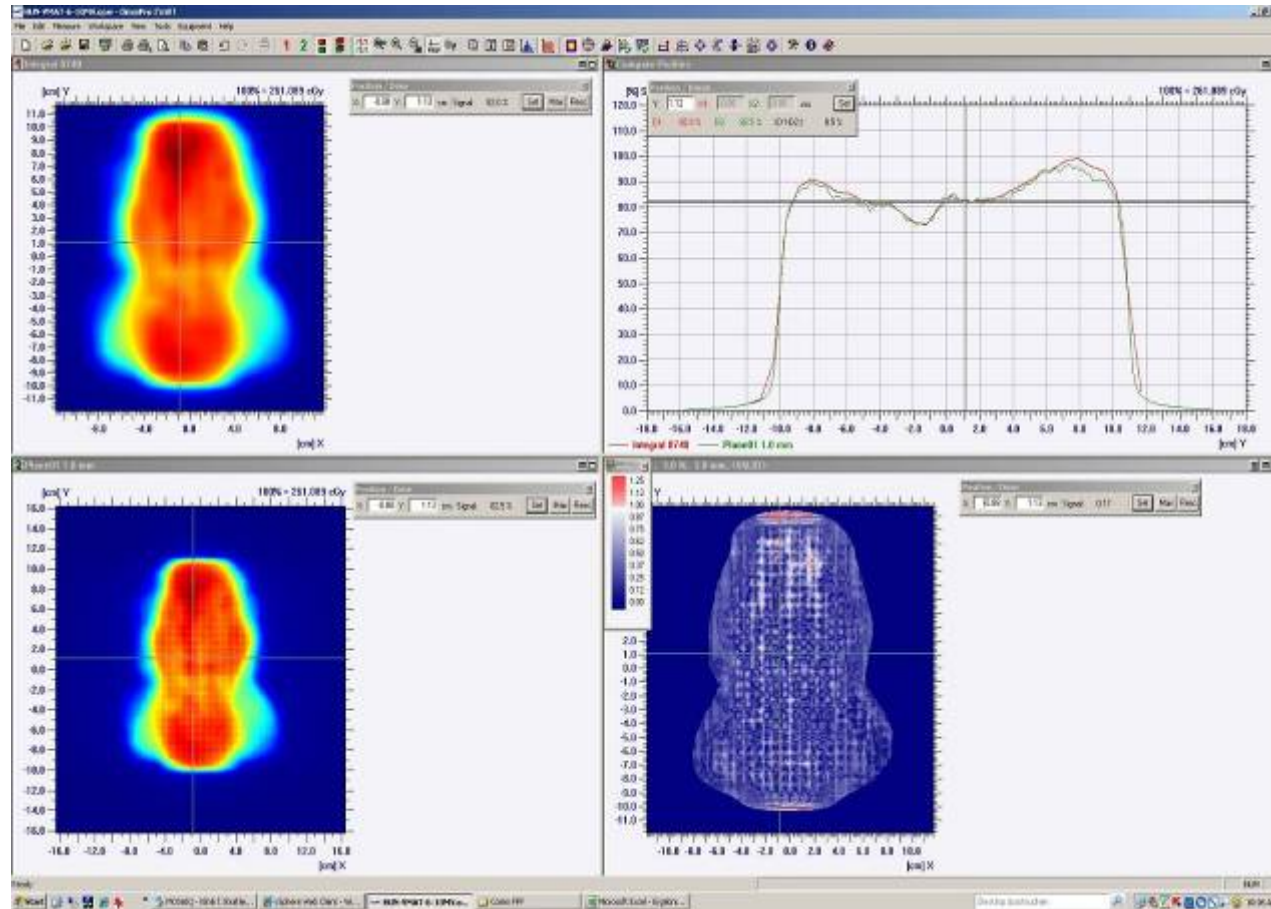


# Larger volume Head und Neck – 6&10MV FFF – VMAT 2 Arc – 2Gy

Gamma 33:  
99,19%

Gamma 55:  
99,98%

collapsed



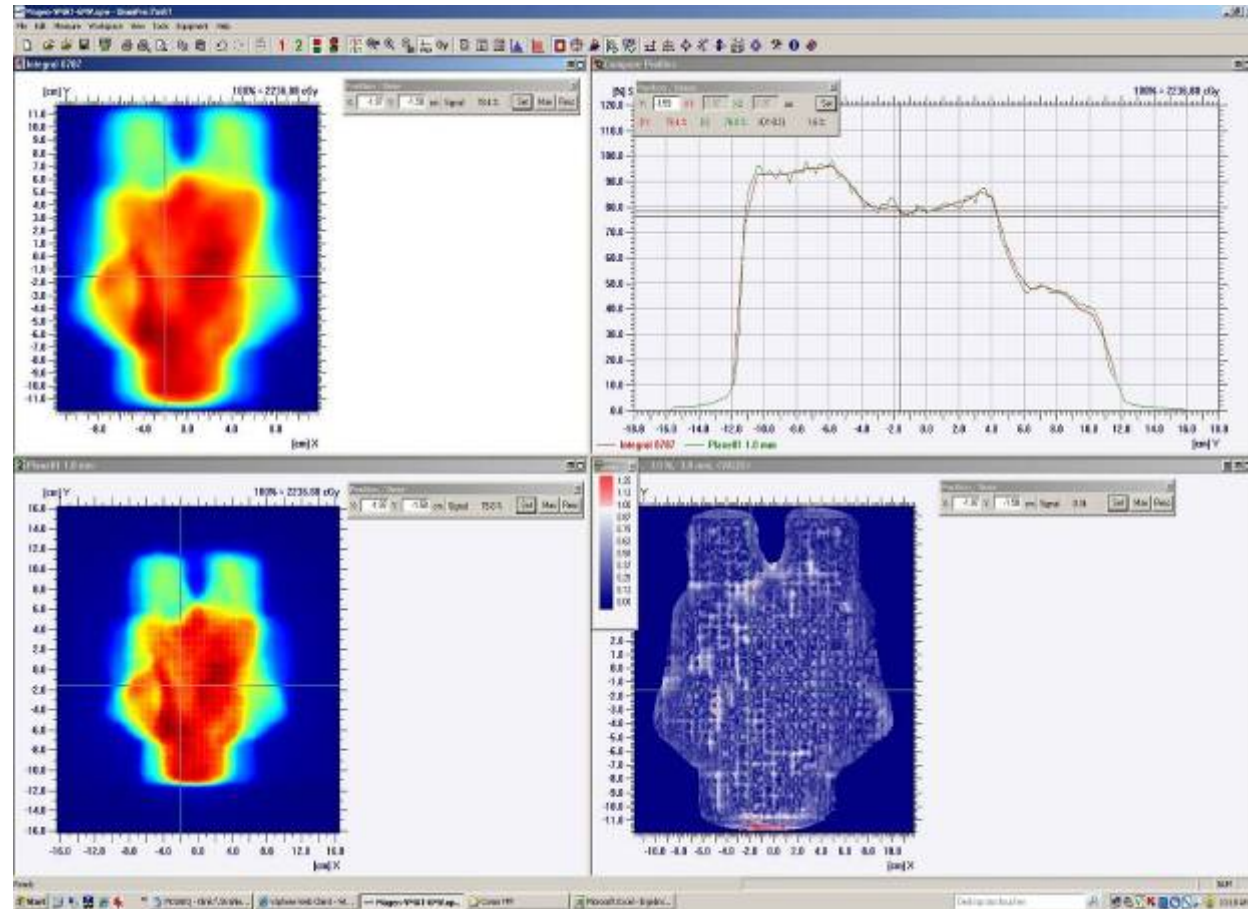


# Larger volume stomach 6 MV FFF – VMAT 2Arcs – 15Gy

Gamma 33:  
99,48%

Gamma 55:  
100%

collapsed

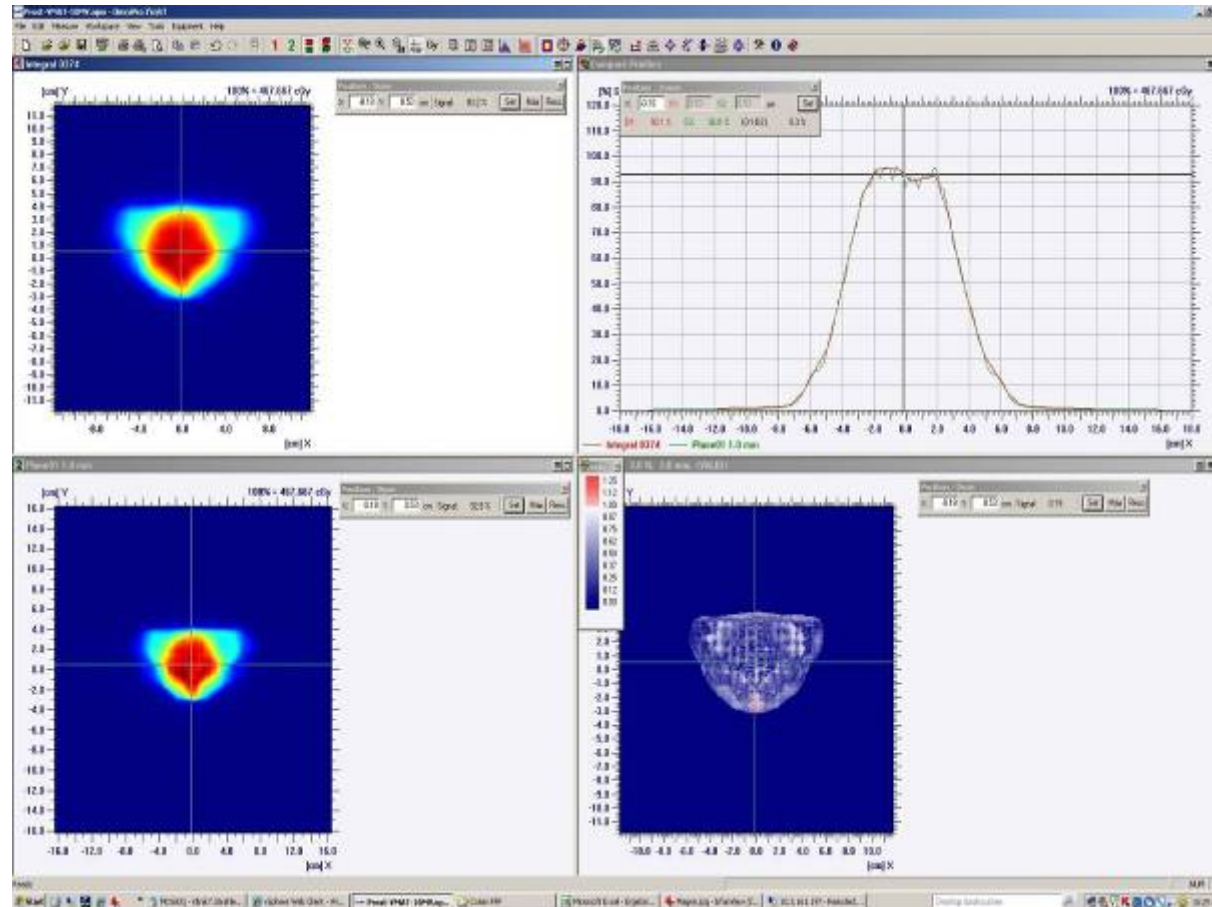


# Midsize volume Prostate with integrated boost 10MV FFF – VMAT 2Arcs -2,5Gy

Gamma 33:  
99,17%

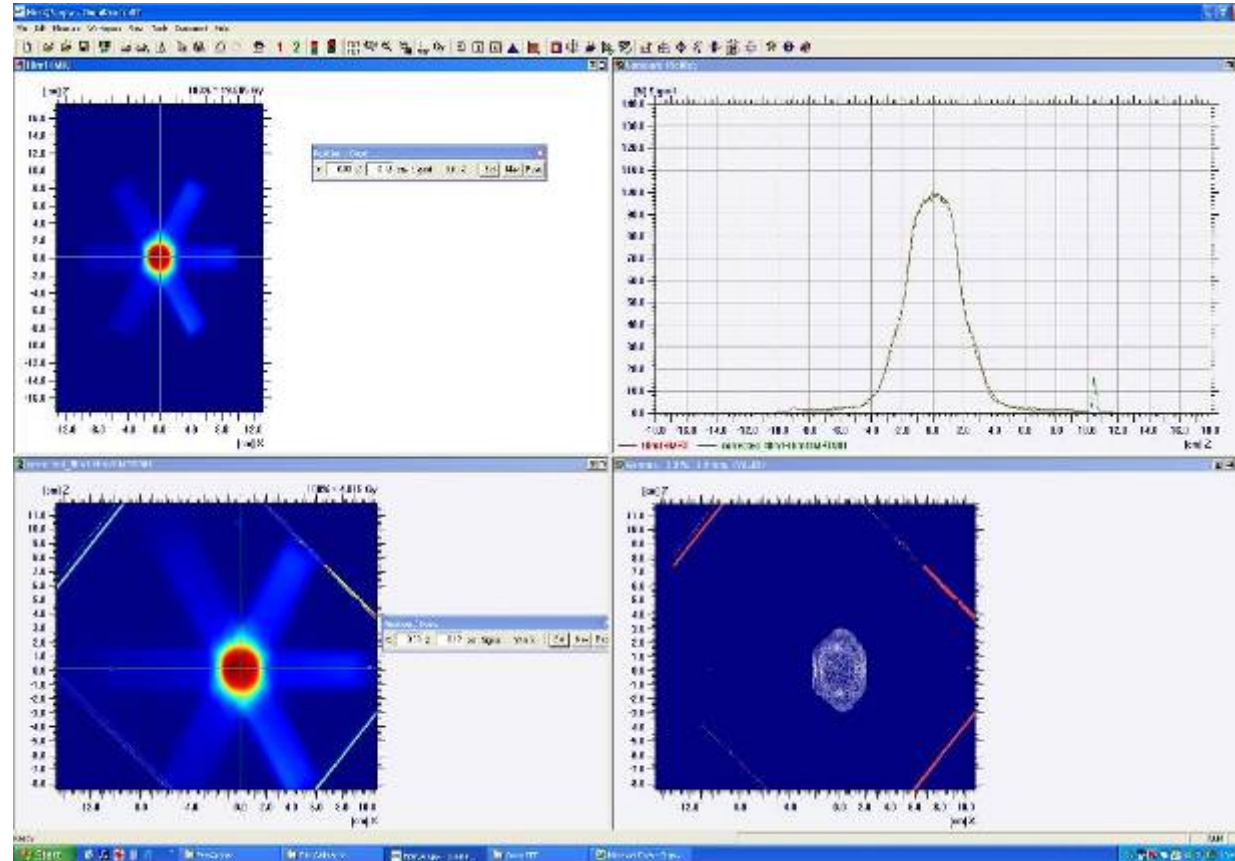
Gamma 55:  
100%

collapsed



# Small volume Brain 1 – 6 MV FFF – IMRT vs VMAT (noncoplanar)

Gamma 33:  
99,86%  
Gamma 55:  
100%  
Kammer:  
-1.1%



# Flattening filter free (FFF) with Monaco 3.3

## Preclinical Examples

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V. Steil, F. Lohr, M.D.



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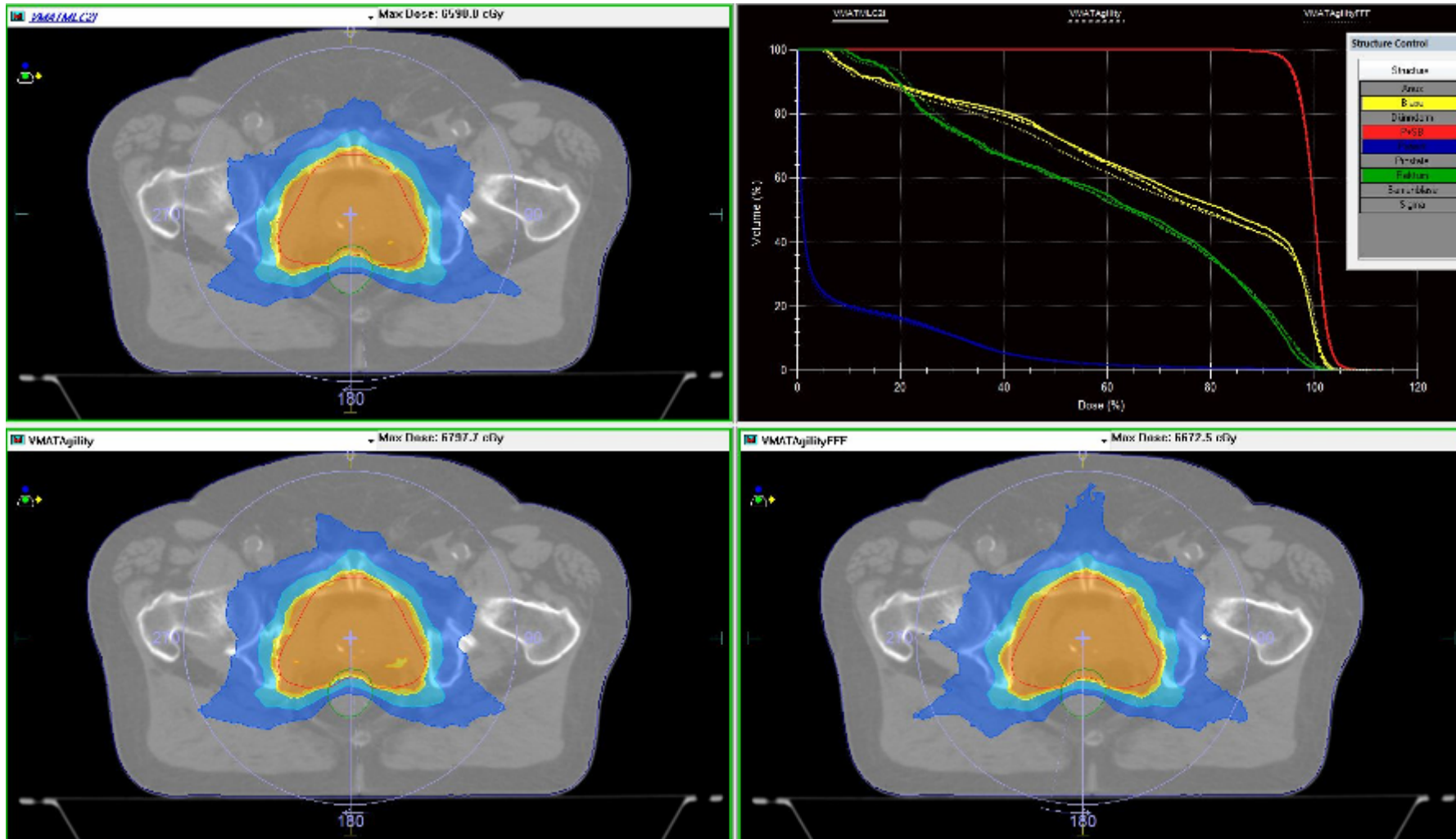
# Prostate – moderately complex, low fraction dose

PROSTATE	MLCi2 Monaco 3.3	Agility Monaco 3.3	Agility + FFF Monaco 3.3
PTV prescription	mean 60 Gy	mean 60 Gy	mean 60 Gy
Homogeneity index	1.09	1.09	1.09
OAR Rectum, mean dose	35.8Gy	35.6	35.96 Gy
OAR Bladder, mean dose	42.3 Gy	41.7	40.95 Gy
number of fractions	30	30	30
beam-on time per fraction	171 sec	152 sec	156 sec
number of MU's delivered	789	762	915
total number of segments	2 Rotations	2 Rotations	2 Rotations





# Dose distribution screenshots, DVH

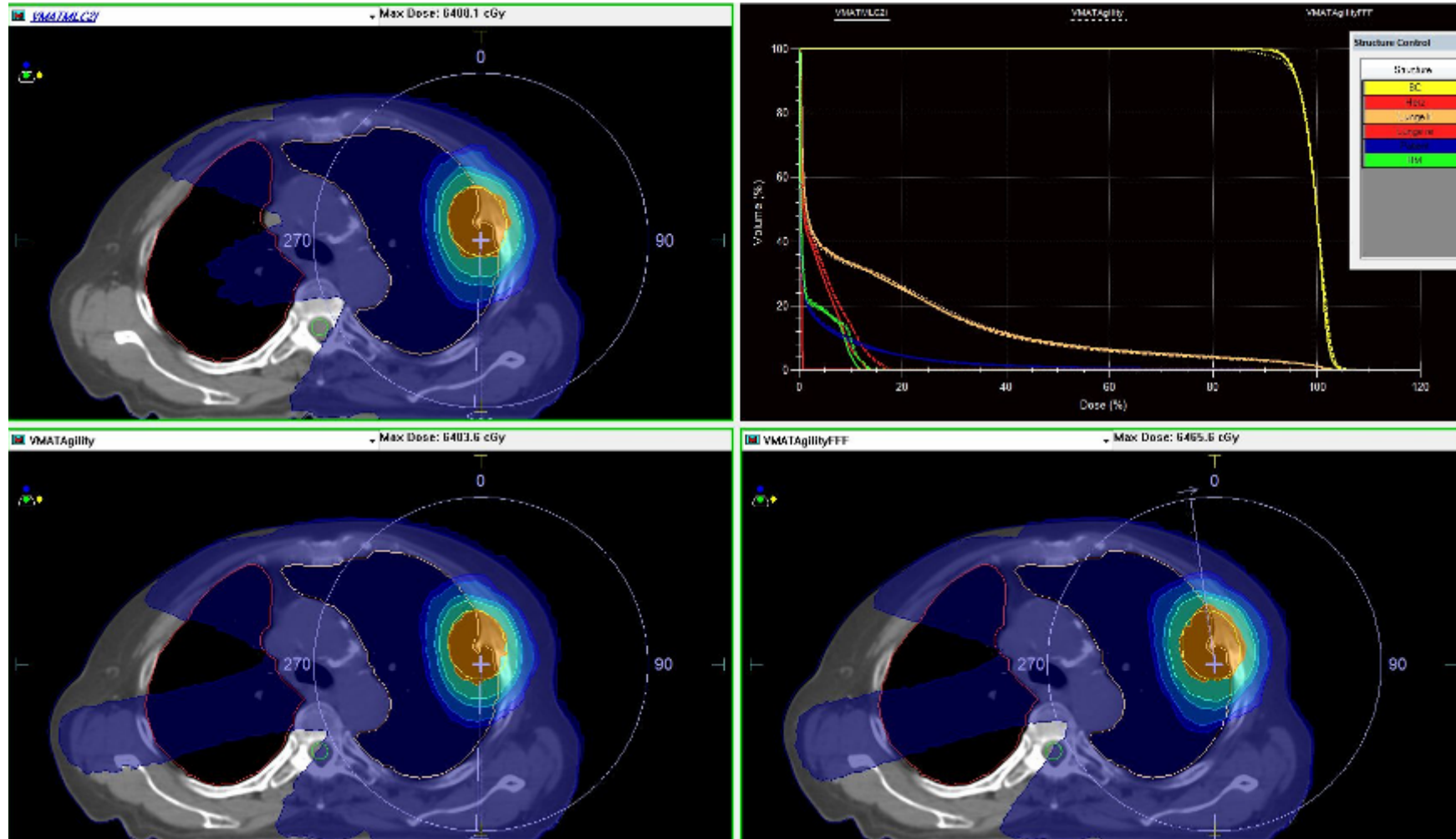


# Lung - moderately complex, high fraction dose

LUNG	MLCi2 Monaco 3.3	Agility Monaco 3.3	Agility + FFF Monaco 3.3
PTV prescription	60 Gy	60 Gy	60 Gy
Homogeneity Index	1.09	1.09	1.09
OAR Lung left, mean dose	8.25 Gy	8.13 Gy	8.35 Gy
OAR Lung right, mean dose	1.80 Gy	2.2 Gy	2.15 Gy
OAR Heart, Mean dose	0.18 Gy	0.17 Gy	0.17 Gy
number of fractions	5	5	5
beam-on time per fraction	230 sec	245 sec	130 sec
number of MU's delivered	2014	1997	2281
total number of segments	1 Rotation	1 Rotation	1 Rotation



# Dose distribution screenshots, DVH

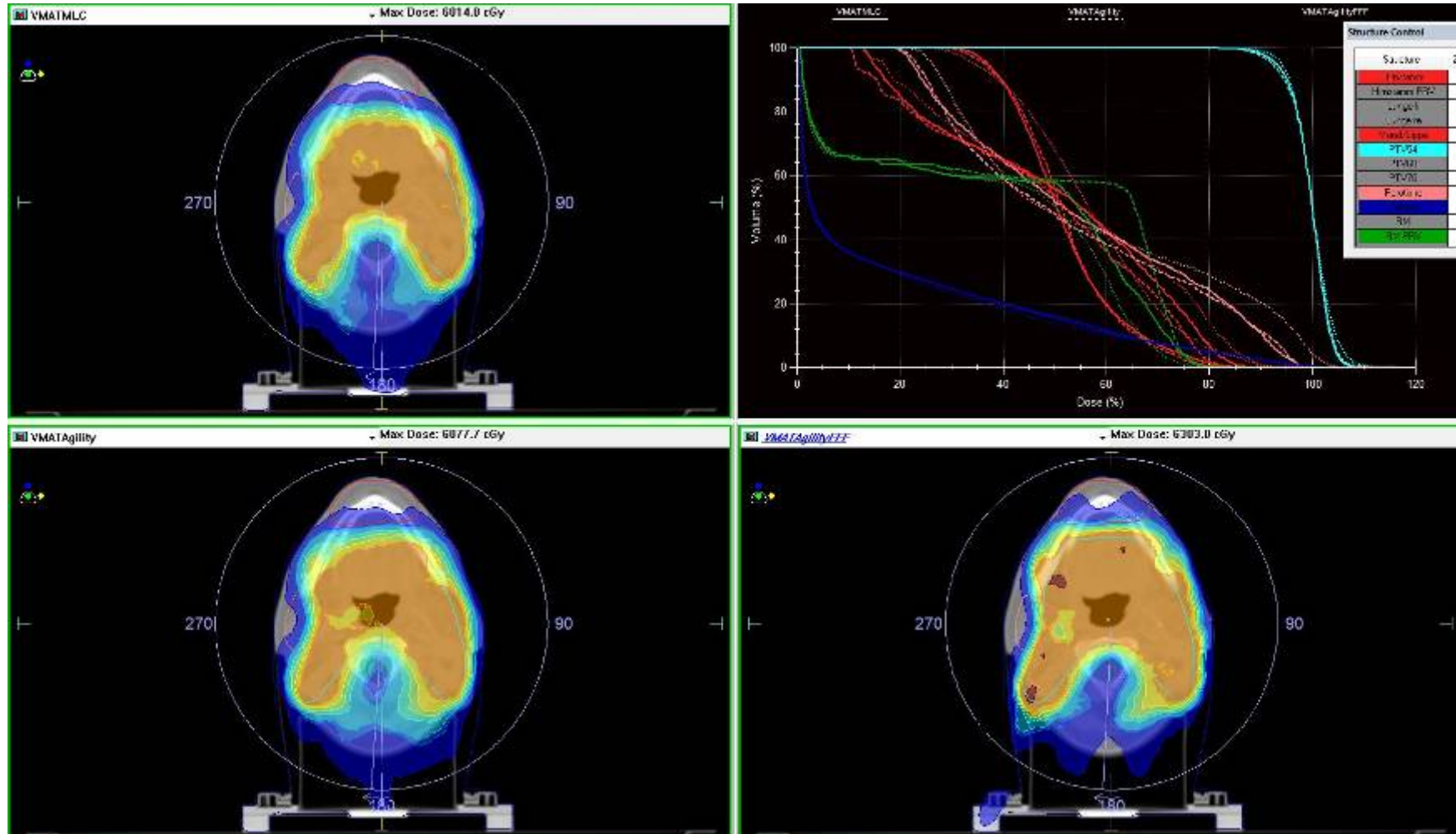


# Head & Neck - highly complex, low fraction dose

Head and neck	MLCi2 Monaco 3.3	Agility Monaco 3.3	Agility + FFF Monaco 3.3
PTV prescription	54 Gy	54 Gy	54 Gy
Homogeneity Index	1.12	1.14	1.13
OAR Parotis, mean dose	29.79 Gy	28.86 Gy	30.91 Gy
OAR Spinal Cord, max dose	44.33 Gy	42.40 Gy	44.62 Gy
OAR Lips, Mean dose	27.99 Gy	28.01 Gy	30.82 Gy
OAR Brain stem, mean dose	28.32 Gy	26.94 Gy	29.46 Gy
number of fractions	30	30	30
beam-on time per fraction	293 sec	182 sec	169 sec
number of MU's delivered	635	633	1123
total number of segments	2 Rotation	2 Rotation	2 Rotation



# Dose distribution screenshots, DVH

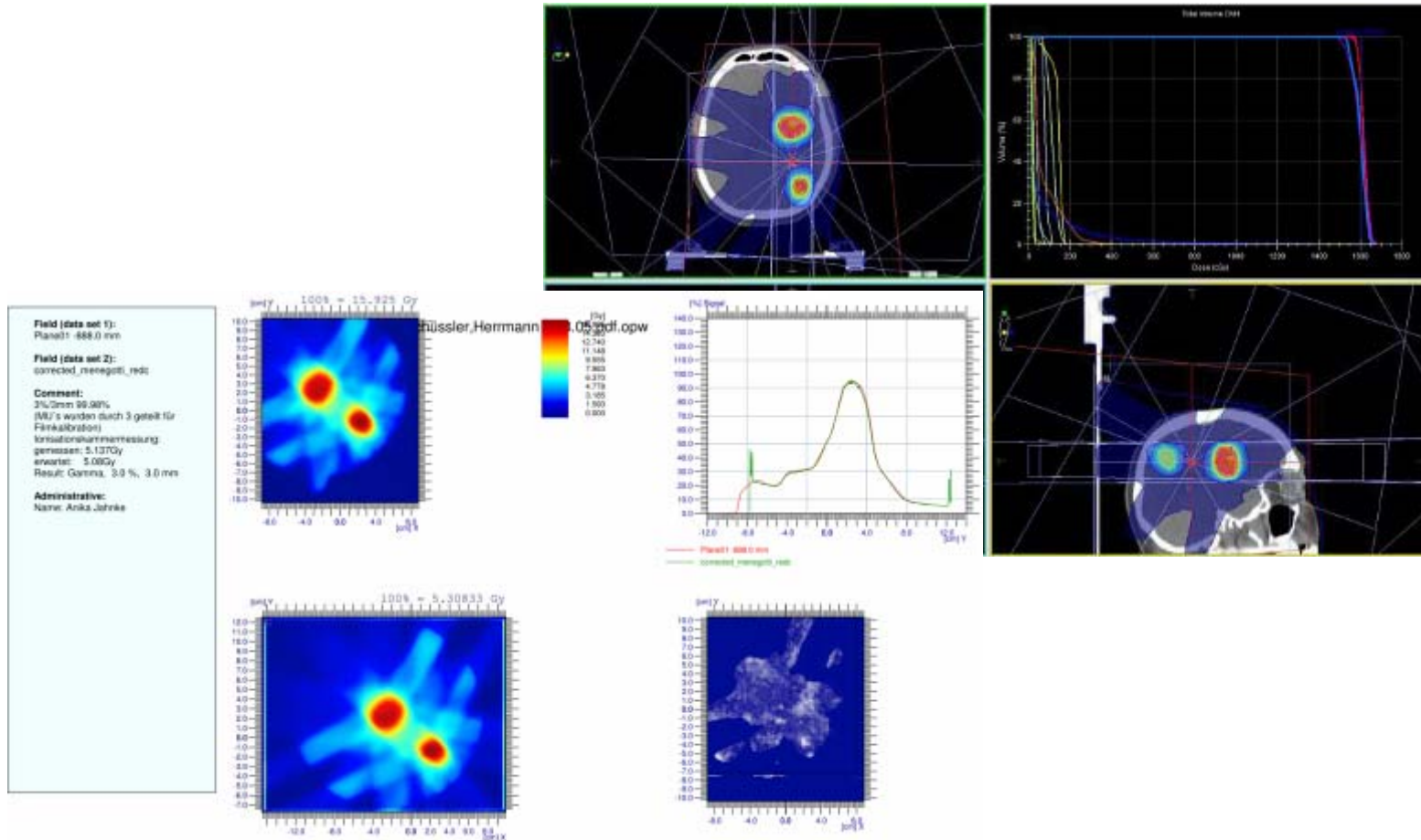






# Our first FFF treatment

## 2 metastases 16 Gy each, one fraction



# Our first FFF treatment

**Plan Information**  
 Studysset ID: CT3    # of Slices: 163    Pixel Size: 0.07    Scan Orientation: HFS  
 Treatment Position: HEAD IN

## Setup Information

Scan Reference Coordinates (cm): No Scan Reference Point has been selected

Beam #	Description	Machine ID	Energy	Gantry	Coll.	Couch	Isocenter			# of Segs	MU/tx
							X	Y	Z		
1	G12A	Agity BMV FFF	6 (FFF)	181.0	0.0	0.0	2.75	-46.90	-2.00	11	296.79
2	G10A	Agity BMV FFF	6 (FFF)	220.0	0.0	0.0	2.75	-46.90	-2.00	19	522.48
3	G11A	Agity BMV FFF	6 (FFF)	288.0	0.0	0.0	2.75	-46.90	-2.00	21	621.88
4	G13A	Agity BMV FFF	6 (FFF)	72.0	0.0	0.0	2.75	-46.90	-2.00	28	676.61
5	G14A	Agity BMV FFF	6 (FFF)	144.0	0.0	0.0	2.75	-46.90	-2.00	23	491.70
6	G15A	Agity BMV FFF	6 (FFF)	30.0	0.0	90.0	2.75	-46.90	-2.00	22	461.56
7	G16A	Agity BMV FFF	6 (FFF)	70.0	0.0	90.0	2.75	-46.90	-2.00	24	688.53
8	G17A	Agity BMV FFF	6 (FFF)	150.0	0.0	90.0	2.75	-46.90	-2.00	24	441.39
9	VER3A	Agity BMV Int	6	0.0	0.0	0.0	2.75	-46.90	-2.00	0	0.00
10	Ver4A	Agity BMV Int	6	270.0	0.0	0.0	2.75	-46.90	-2.00	0	0.00
<b>Total:</b>										<b>172</b>	<b>4200.98</b>

## Normalization

Prescription (cGy): 1600.0    # of Fractions: 1 (1,600.00 cGy/tx)  
 100.00 % of 1600.0 cGy to cover 50.00 % of PTV.1

## Dose Calculation

Grid Spacing (cm): 0.20  
 # of Calculation Points: 5906752  
 Assigned CTtoED File: DICOM3.BrillianceBigC  
 Algorithm: Monte Carlo Photon  
 Calculate Dose to: Medium  
 MC Std Dev per Plan: 1.00  
 Max Dose in Plan (cGy): 1674.7  
 Max Dose Location (cm): X = 1.95    Y = -46.90    Z = 1.40  
 Delivery Mode: Step & Shoot IMRT

## Whole procedure Incl. CBCT and verification 19 min. treatment time (beam on) 7 min.

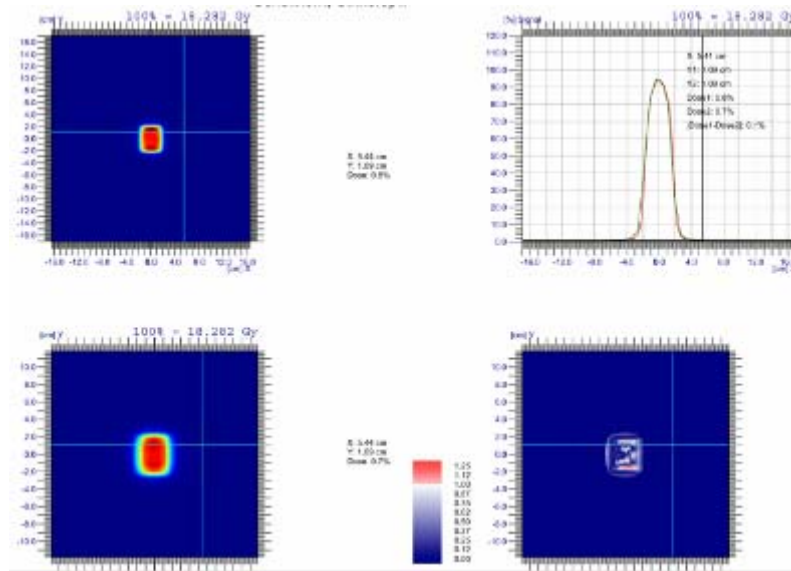
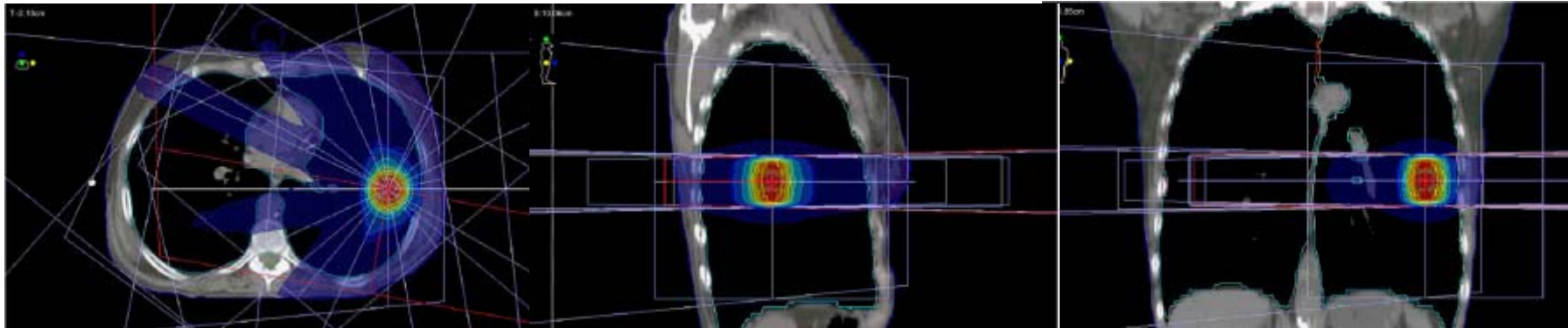
p / Field	Dose				Machine	Notes					Sts	By	Rx: GH			Rx: Einzeit			
	Meterset	Fx	ED	Dly		T	S	P	F	D			C	Fx	ED	Dly	Cum	Fx	ED
	LB3																		
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R-36	18.02	2Fids																	
R-36	08.03.2013	10.54	2Fids																
R-37	11.03.2013	14.18	2Fids																
R-38	12.03.2013	14.59	2Fids																
R-39	13.03.2013	11.22	4Fids			1PI													
		11.22	CT			CT													
		11.23	VER4	1															
		11.24	VER3	1				2.0 MU											
		11.34	G12A	1				2609.6 MU	800 cGy										800 cGy
		11.41	G13A	1				1591.5 MU	800 cGy										800 cGy
R-40	14.03.2013	7.44	2Fids																
R-40A		9.46	1fid																
R-41	15.03.2013	7.44	2Fids																
R-42	18.03.2013	7.44	2Fids																



# First Lung hypofractionated FFF treatment

## Fraction dose 12 Gy



# First Lung hypofractionated FFF treatment Fraction dose 12 Gy

**Whole procedure  
incl. CBCT and verification 30 min.  
treatment time (beam on) 8 min.**

### Plan Information

Studyset ID: CT1 # of Slices: 88 Pixel Size: 0.12 Scan Orientation: HFS  
Treatment Position: HEAD IN

### Setup Information

Scan Reference Coordinates (cm): No Scan Reference Point has been selected

Beam #	Description	Machine ID	Energy	Gantry	Coll.	Couch	Isocenter			# of Segs	MU/fx
							X	Y	Z		
1	G1	Agilby 10MV FFF	10 (FFF)	190.0	0.0	0.0	10.06	-2.10	-1.85	4	325.68
2	G8	Agilby 10MV FFF	10 (FFF)	220.0	0.0	0.0	10.06	-2.10	-1.85	4	286.03
3	G5	Agilby 10MV FFF	10 (FFF)	295.0	0.0	0.0	10.06	-2.10	-1.85	4	253.22
4	G2	Agilby 10MV FFF	10 (FFF)	335.0	0.0	0.0	10.06	-2.10	-1.85	4	236.78
5	G7	Agilby 10MV FFF	10 (FFF)	0.0	0.0	0.0	10.06	-2.10	-1.85	4	280.43
6	G3	Agilby 10MV FFF	10 (FFF)	30.0	0.0	0.0	10.06	-2.10	-1.85	4	237.89
7	G4	Agilby 10MV FFF	10 (FFF)	80.0	0.0	0.0	10.06	-2.10	-1.85	4	341.93
8	G6	Agilby 10MV FFF	10 (FFF)	140.0	0.0	0.0	10.06	-2.10	-1.85	4	298.01
9	VER1	Agilby 6MV Int	6	0.0	0.0	0.0	10.06	-2.10	-1.85	0	0.00
10	VER2	Agilby 6MV Int	6	90.0	0.0	0.0	10.06	-2.10	-1.85	0	0.00
<b>Total:</b>										<b>32</b>	<b>2259.77</b>

Rad Rx: Lungenmetastase FFF - IMRT Plan - Xrays Dose: 6.000 cGy @ 1.200 cGy	A 26.3.2013 SM
Site Setup	AE 22.3.2013 KS
Treatment Fields	
G1 - 190° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
G8 - 220° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
G5 - 295° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
G2 - 335° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
G7 - 0° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
G3 - 30° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
G4 - 80° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
G6 - 140° Lunge ABC FFF - 10 X FFF DMLC 5 Control Points	26.03.2013 A 26.3.2013 SM
VER1 - 0° Lunge ABC FFF - 6 X MLC	26.03.2013 A 26.3.2013 SM
VER2 - 90° Lunge ABC FFF - 6 X MLC	26.03.2013 A 26.3.2013 SM
CT1 - FFF - CT	A 25.3.2013 KH
EPID - 0° - 10 X FFF	26.03.2013 A 26.3.2013 SM

### Normalization

Prescription (cGy): 6000.0 # of Fractions: 5 (1,200.00 cGy/fx)

Time	Beam #	Description	MU	Machine ID	Energy	Gantry	Coll.	Couch	Isocenter X	Isocenter Y	Isocenter Z	# of Segs	MU/fx
11:46	CT1	CT											
11:53	VER2	1	2.0 MU										
11:54	VER1	2	4.0 MU										
12:01	EPID	2	10.1 MU										
12:05	G7	1	280.4 MU	150 cGy	LB2								150 cGy
12:06	G3	1	237.7 MU	150 cGy	LB2								150 cGy
12:07	G4	1	341.9 MU	150 cGy	LB2								150 cGy
12:08	G6	1	298.0 MU	150 cGy	LB2								150 cGy
12:10	G1	1	325.7 MU	150 cGy	LB2								150 cGy
12:11	G8	1	286.0 MU	150 cGy	LB2								150 cGy
12:12	G5	1	253.3 MU	150 cGy	LB2								150 cGy
12:13	G2	1	236.8 MU	150 cGy	LB2								150 cGy



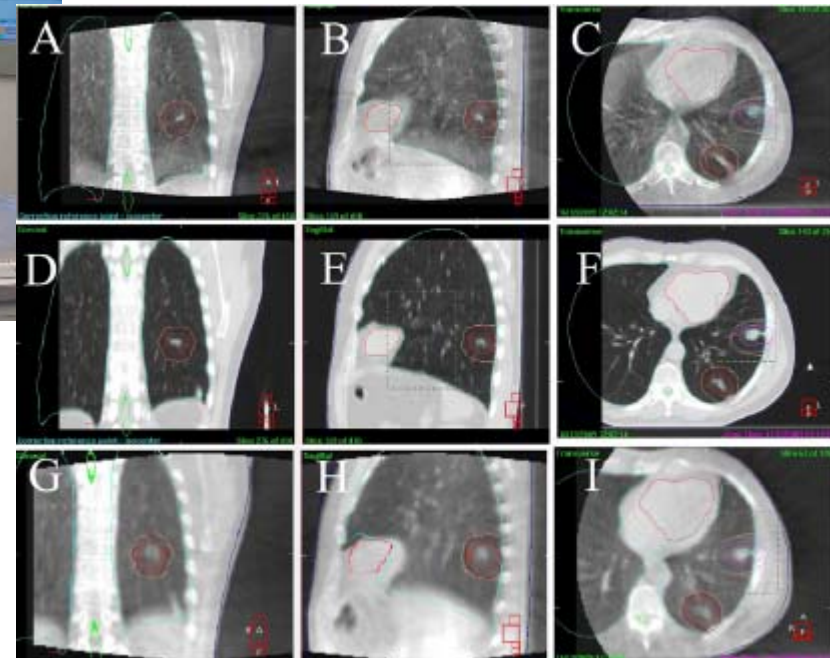


# Breath Hold / Gating



# Clinical Setup:

## 1. Flow-Based Breath Hold Triggering

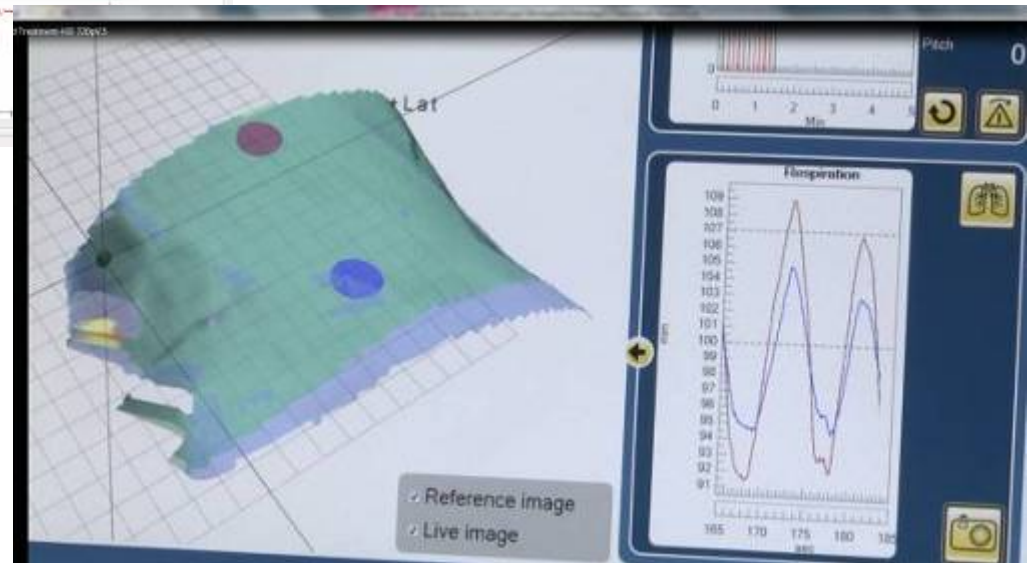
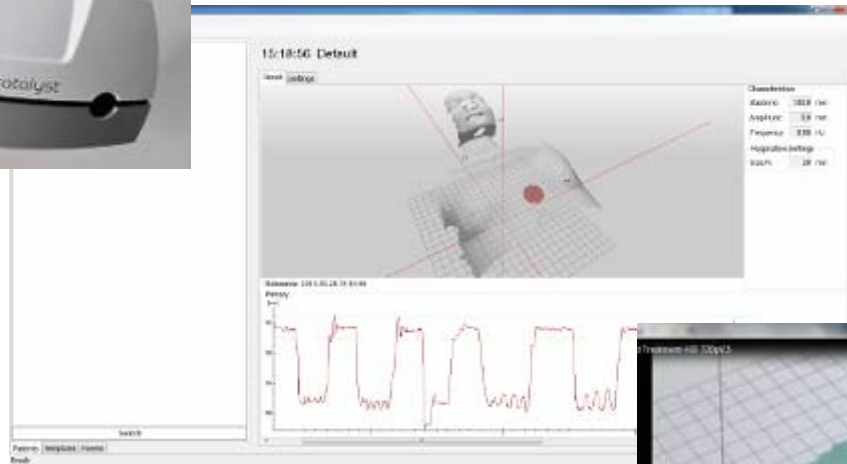


Boda-Heggemann et al,  
Radiother Oncol, 2011



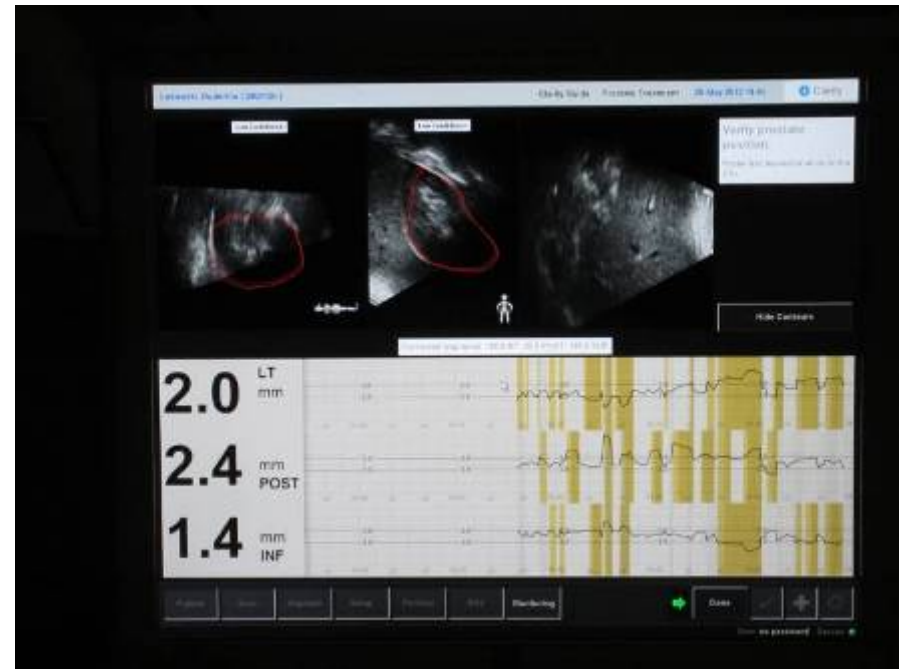
# Clinical Setup:

## 2. Surface-based Surveillance



# Clinical Setup:

## 3. Direct Liver Tracking



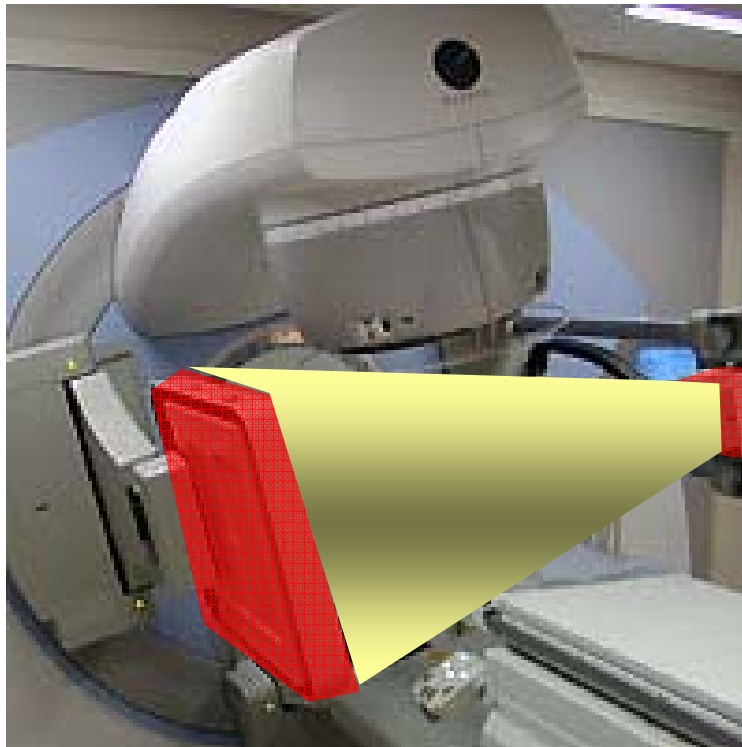
# Fast CBCT



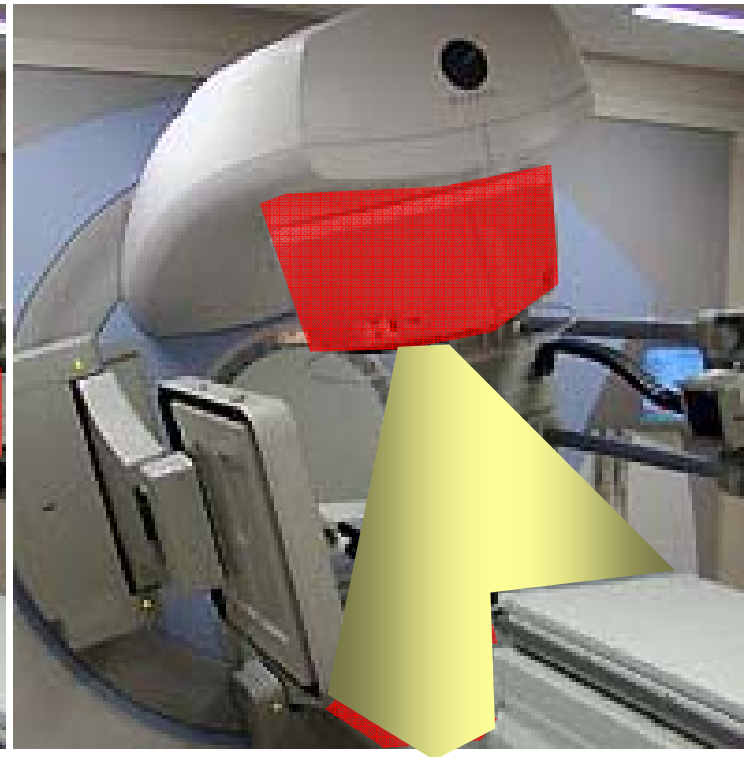


# Ansatz kV+MV-Rekonstruktion

kV



MV



[http://www.elekta.com/healthcare\\_international\\_beaumont\\_work\\_results\\_breakthrough.php](http://www.elekta.com/healthcare_international_beaumont_work_results_breakthrough.php)



# kV-MV imaging workflow

Workflow  
Automation for  
ultrafast  
Kilovoltage  
Megavoltage  
Cone Beam CT

Blessing et al.,  
ESTRO, 2013

Physics 1:  
Imaging in  
radiotherapy:  
Technical  
developments.  
20/04/13, 10:30  
to 11:30.

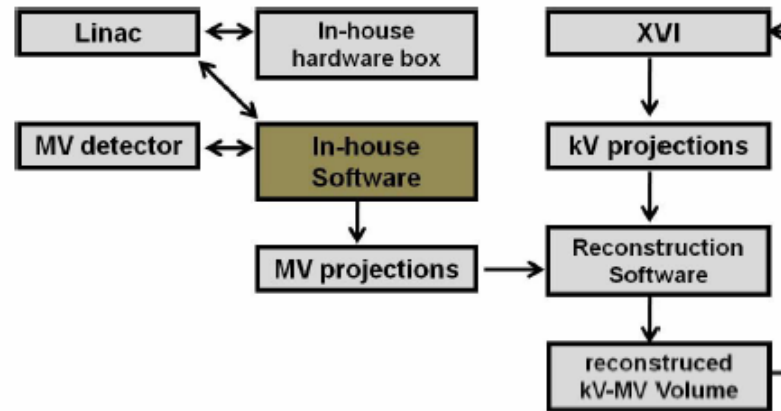


Table 1

workflow	duration (manual)	duration (automated)
prepare Linac for kV-MV mode	~1/2 hour (connect hardware box, reconnect cables in kV and MV detector control board)	~1 sec (turn key switch)
Login kV and MV service mode	~10 sec	~10 sec
prepare XVI for Volume imaging	~10 sec	~10 sec
logout, login MV	~10 sec	~10 sec
load MV beam	~10 sec	~10 sec
set relevant Linac parameters I	~30 sec (manual changes in MV service mode)	~1 sec (in-house software waits for confirmation, press enter)
start and interrupt MV beam	~10 sec	~5 sec
set relevant Linac parameters II	~30 sec (manual changes in MV service mode)	~1 sec (in-house software waits for confirmation, press enter)
start kV	~10 sec	~1 sec
start MV	~10 sec	~1 sec
rotate Gantry, start MV readout	~10 sec	~15 sec
angle mapping	~10 min (analyse images, find initial projection)	0 sec (software output: angle list for MV projection)
reconstruction	~10 sec	~10 sec
<b>total:</b>	<b>roughly 10 min +1/2 hour preparation</b>	<b>roughly 1 min</b>

# Dose Rate effects in Photon and Particle treatments -

## Are high dose rates problematic?



# Dose Rate? Pulse Rate??? Dose per Pulse????

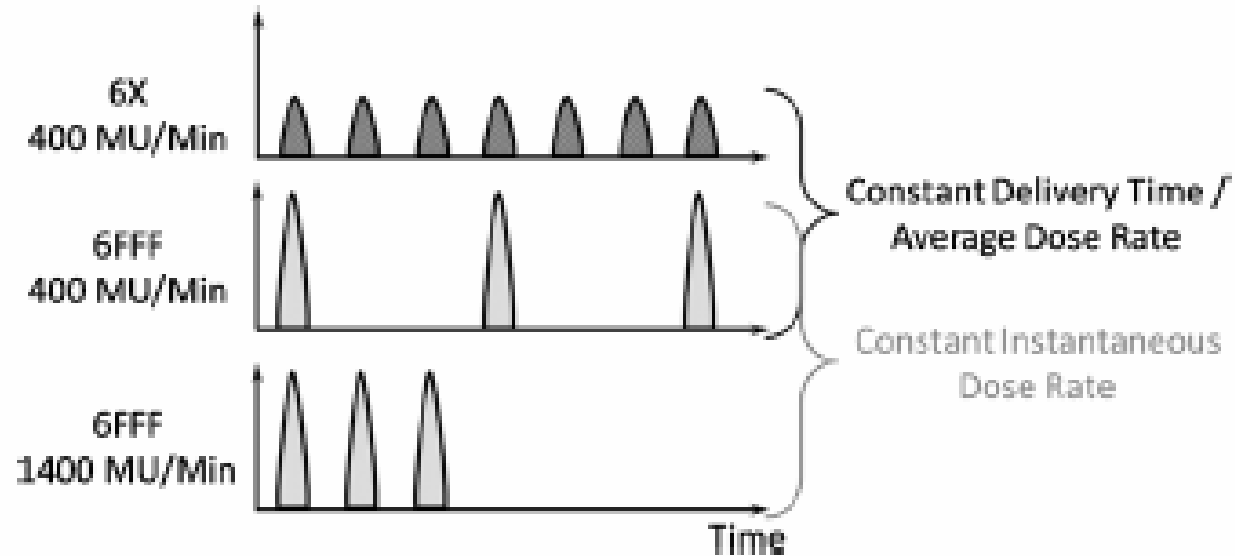


Figure 1. Schematic illustrating the different dose-per-pulse and pulse repetition frequencies of the x-ray fields used in this study.

King et al., PMB, 2013

## Negative Studies

Michaels, Rad Res, 1978

(OER, field emitting device)

Ling, IJROBP, 1985

(OER)

Steel et al., 1990

(cell lines, 0,25-90 cGy/min)

*“There was little evidence of a dose-rate effect above 2 cGy/min but significant sparing was seen at lower dose rates”*

Zackrisson, Acta Oncol, 1991

(cell lines, HDR e-, 24000Gy/min)

Soerensen, R&O, 2011

(cell lines, diff. DR/pulse)

Verbakel, Acta Oncol, 2013

(cell lines, moving strip)

King, PMB, 2013

(cell lines, mesh buildup)

Reviews bei

Ling, R&O, 2010

Wilson, Br J Radiol, 2012 (Oxygen depletion)



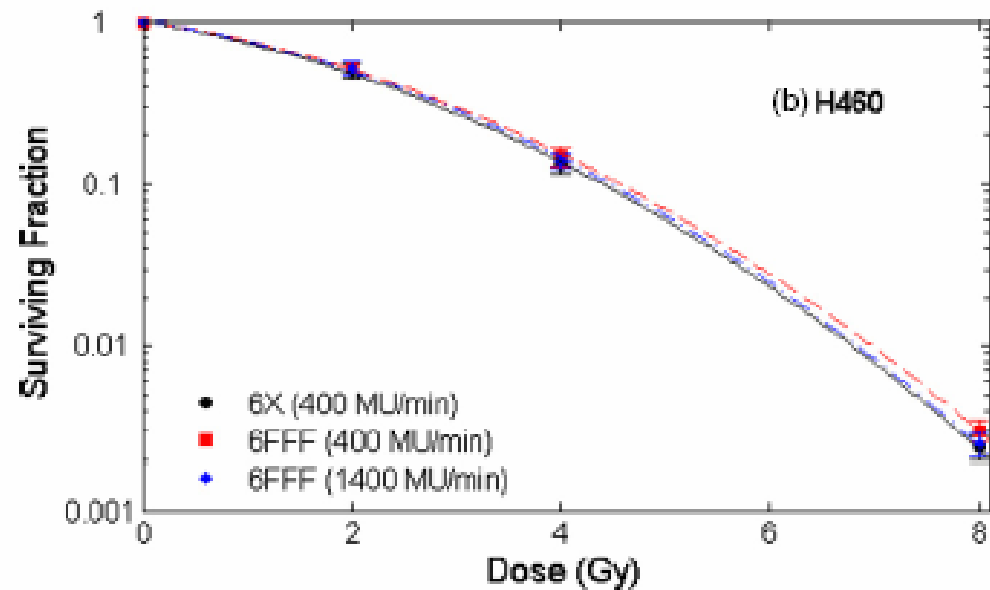
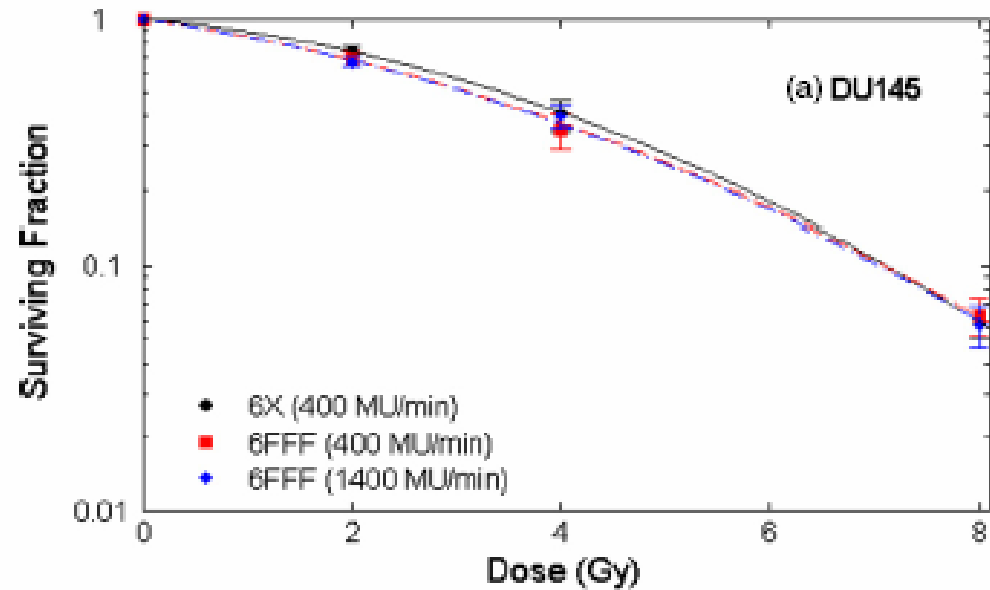


# Negative Studies

**Figure 4.** Cell survival plots following exposure to flat 6 MV radiation fields with different average or instantaneous dose-rates for (a) DU145 and (b) H460 cell lines. Error bars represent  $\pm$  standard error of each data set. Lines represent the results of linear-quadratic fits to the data.

**Table 2.** Results of linear-quadratic curve fitting analysis (with  $\pm$  standard error of the mean) for cells exposed to different average or instantaneous dose-rates.

Treatment modality (MU dose-rate)	DU145		H460	
	$\alpha$	$\beta$	$\alpha$	$\beta$
6X (400 MU min <sup>-1</sup> )	0.09 $\pm$ 0.03	0.03 $\pm$ 0.01	0.24 $\pm$ 0.19	0.06 $\pm$ 0.03
6FFF (400 MU min <sup>-1</sup> )	0.14 $\pm$ 0.13	0.03 $\pm$ 0.02	0.21 $\pm$ 0.11	0.07 $\pm$ 0.02
6FFF(1400 MU min <sup>-1</sup> )	0.14 $\pm$ 0.15	0.03 $\pm$ 0.06	0.21 $\pm$ 0.16	0.07 $\pm$ 0.03



King et al., PMB, 2013

# Positive Studies

Lohse, R&O, 2011

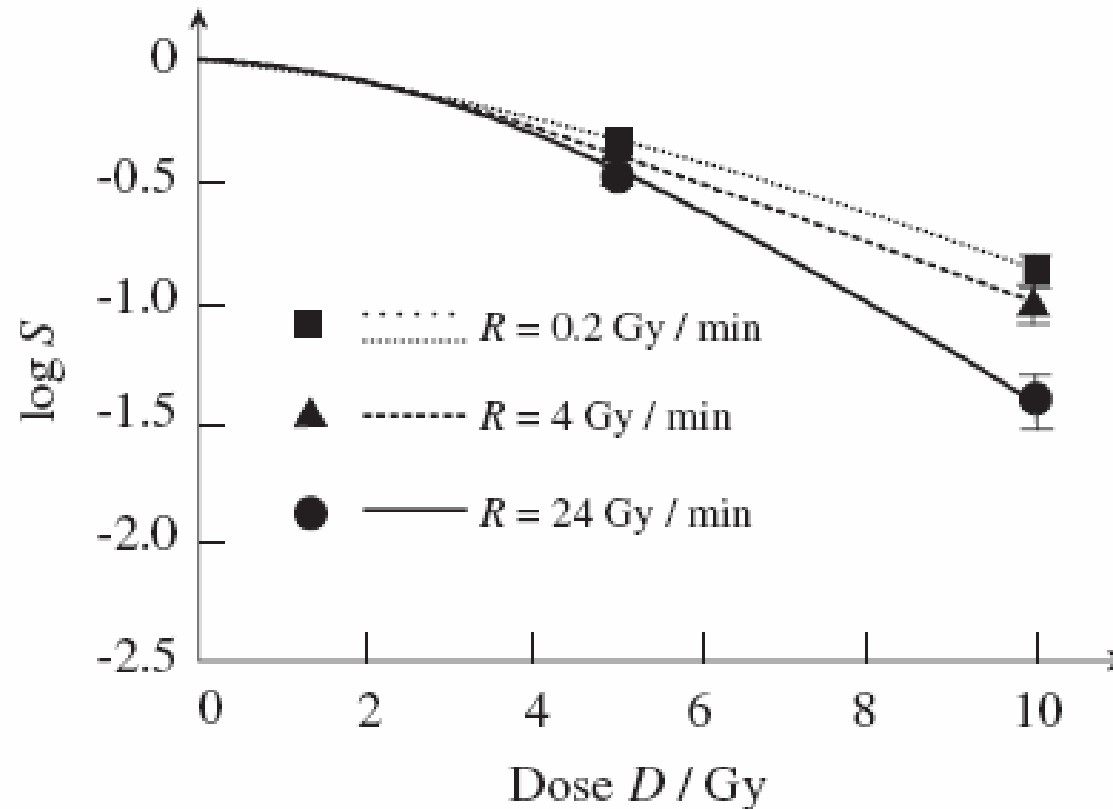


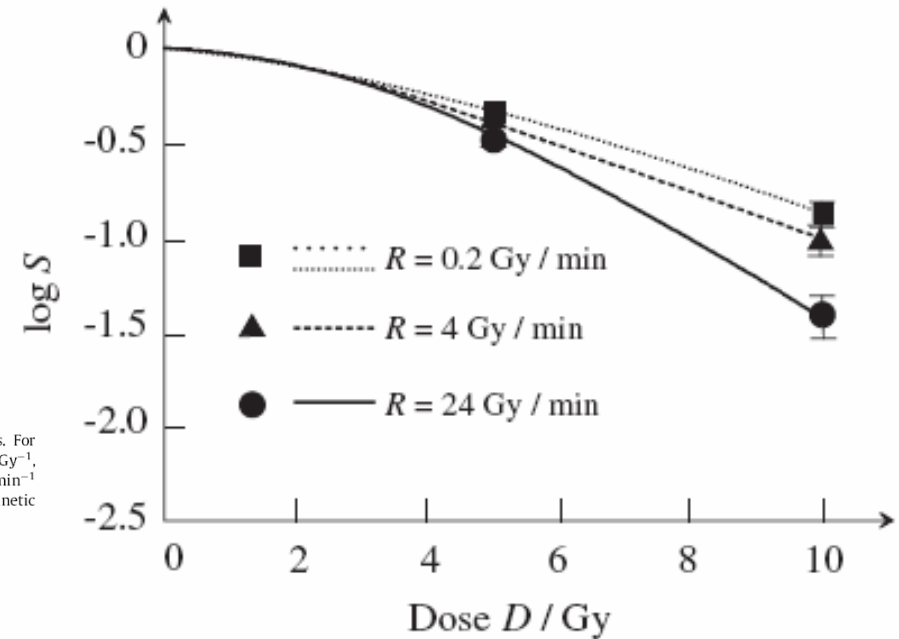
Fig. 4. Surviving fraction of T98G-glioblastoma cells at different dose rates. For 24 Gy/min, the  $\Gamma$ -LQ-model can fit the experimental data with  $\alpha = 0.03 \text{ Gy}^{-1}$ ,  $\beta = 0.04 \text{ Gy}^{-2}$  and  $\gamma = 0.556 \text{ min}^{-1}$ ; for 4 Gy/min,  $\gamma$  has to be adapted to  $0.361 \text{ min}^{-1}$  and for  $R = 0.2 \text{ Gy/min}$ , a good fit can only be achieved by adapting the kinetic constant to  $\gamma = 0.0313 \text{ min}^{-1}$ .



# But: Disparate Results for same cell line (T98 Glioma)

Lohse, R&O, 2011

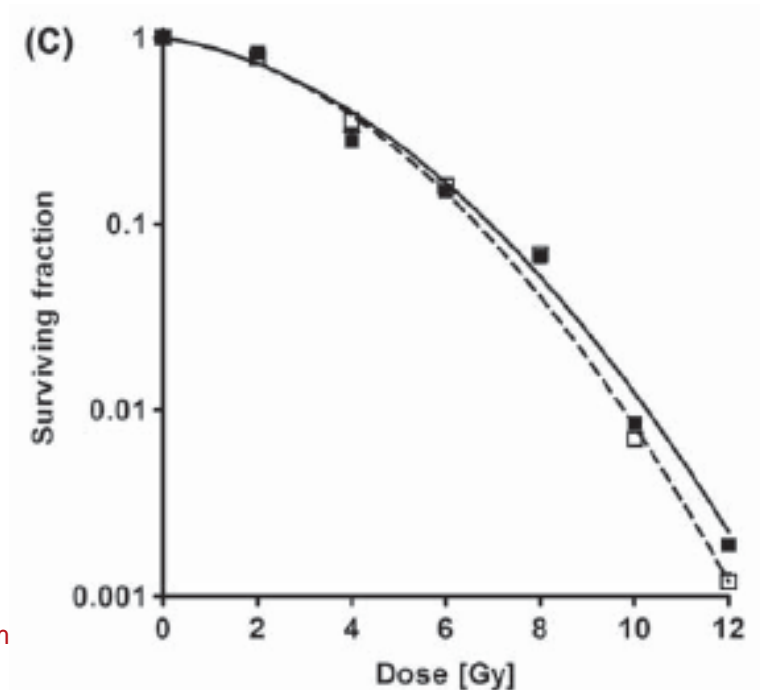
Fig. 4. Surviving fraction of T98G-glioblastoma cells at different dose rates. For 24 Gy/min, the  $L$ -LQ-model can fit the experimental data with  $\alpha = 0.03 \text{ Gy}^{-1}$ ,  $\beta = 0.04 \text{ Gy}^{-2}$  and  $\gamma = 0.556 \text{ min}^{-1}$ ; for 4 Gy/min,  $\gamma$  has to be adapted to  $0.361 \text{ min}^{-1}$  and for  $R = 0.2 \text{ Gy/min}$ , a good fit can only be achieved by adapting the kinetic constant to  $\gamma = 0.0313 \text{ min}^{-1}$ .



VS.

Verbakel, Acta Oncol, 2013

Figure 3. Normalized cell survival curves for SW 1573 (A), D384 (B) and T98 (C) cells. Error bars represent the standard error of the mean (n = 3). Open squares FF, Closed squares FFF.



# Synopsis

Low dose rates

-> Loss of effect

Intermediate dose rates (covering the spectrum of what is currently possible with FFF Linacs (overall and per pulse)

->No effect

Ultra-high Dose rates

(not relevant for photons, possibly for laser pulsed particles)

-> Oxygen Depletion



# Courtesy M. Alber/F. Stieler

