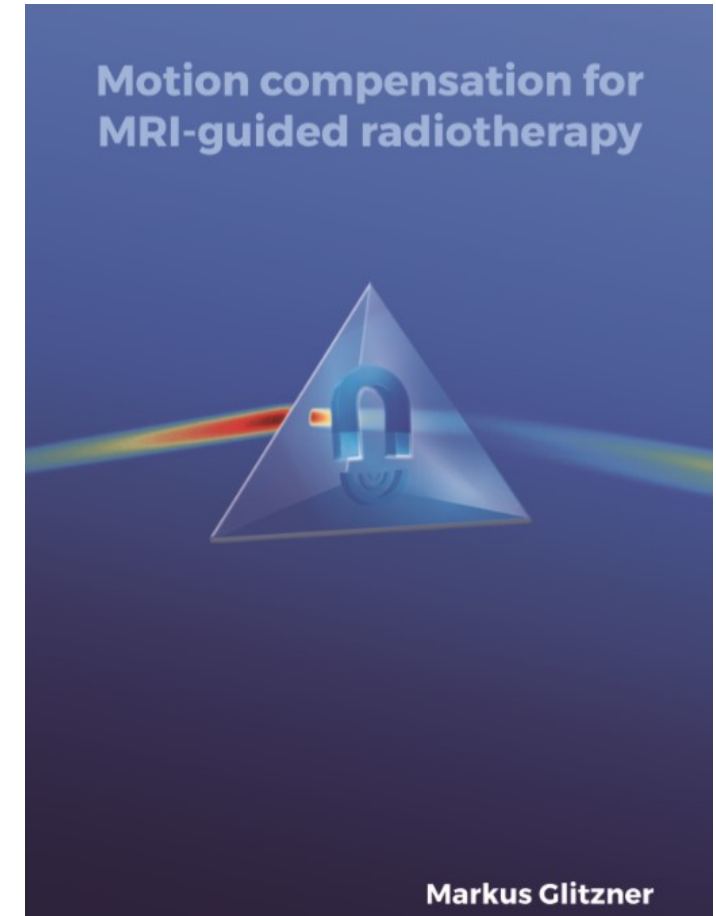


MR-guided radiotherapy: Vision, status and research at the UMC Utrecht

Dipl. Ing. Dr. Markus Gitzner

About myself

- Training
 - Medizintechnik TU Graz
 - PhD UMC Utrecht
- Clinical work
 - Software implementation (ART, IGRT)
 - Infrastructure maintainance (DICOM servers, workflows)
 - MRI (commissioning, QA, protocol development)



- Research
 - Starlit project 16M€
 - Fast MRI-acquisition
 - MLC tracking



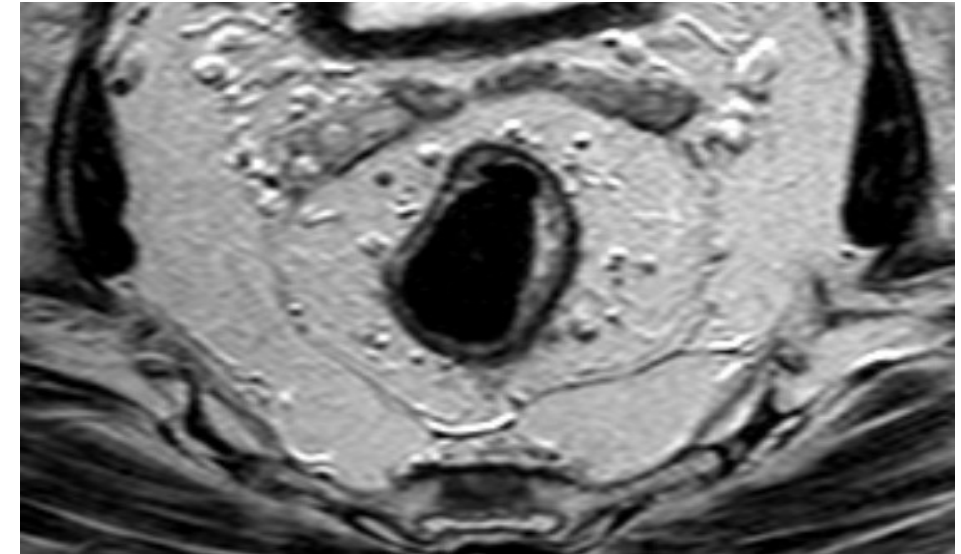
Topics

- Simultaneous MRI /Why MRI-linac
- Image quality
- MRI-linac at the UMC Utrecht
- First clinical action of MRI-linac
- Research
 - Adaptive replanning
 - Online imaging
 - Real-time imaging
 - Latency
 - Geometric fidelity
 - **MLC tracking**



Why online MRI-guidance?

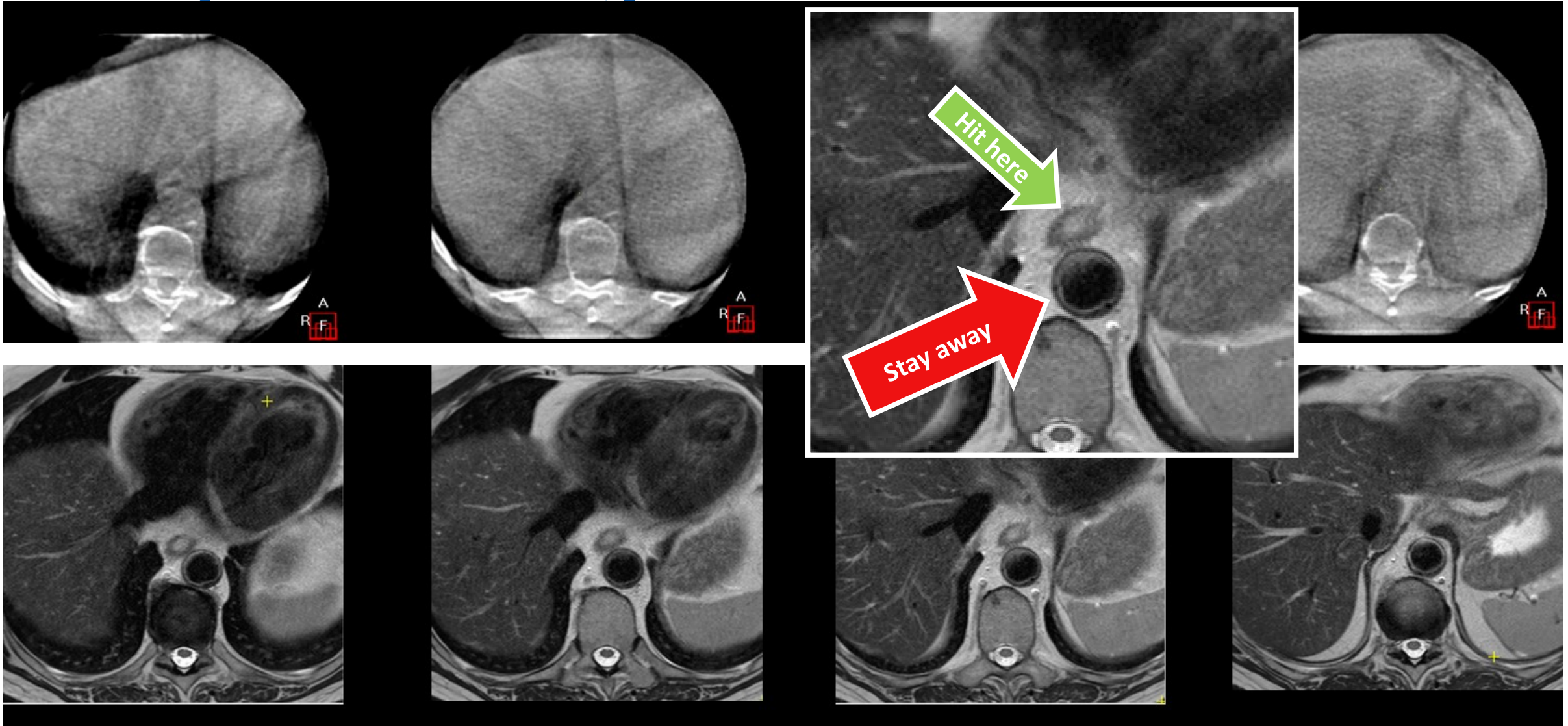
- Image guidance
 - Solve anatomic uncertainty
 - Reduce the margins!
 - At the moment of radiation
 - With diagnostic image quality



T₂ Weighted MRI of rectum, Courtesy Martijn Intven

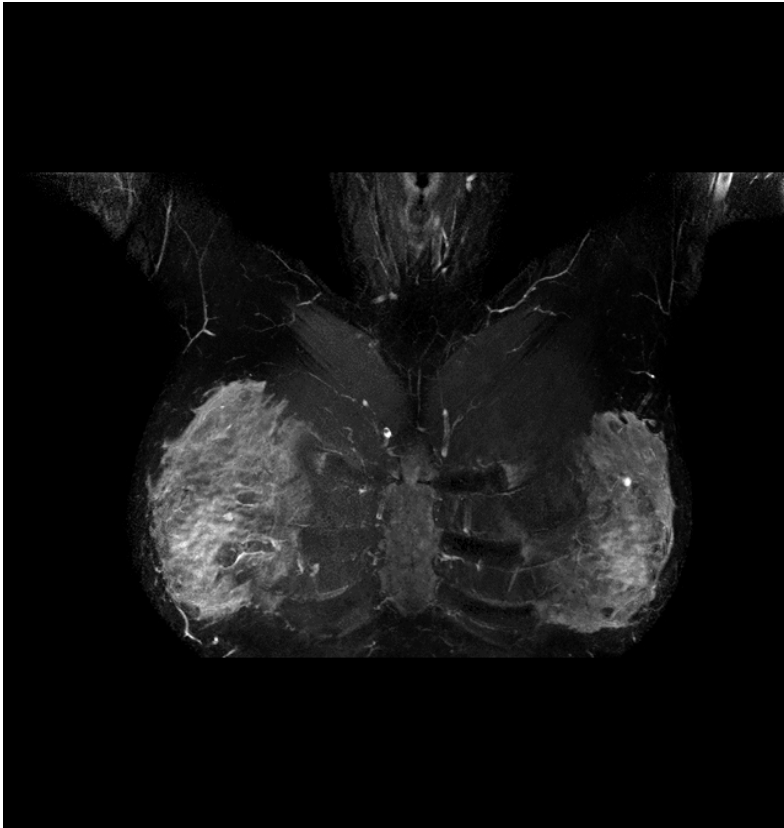


Why online MRI-guidance?

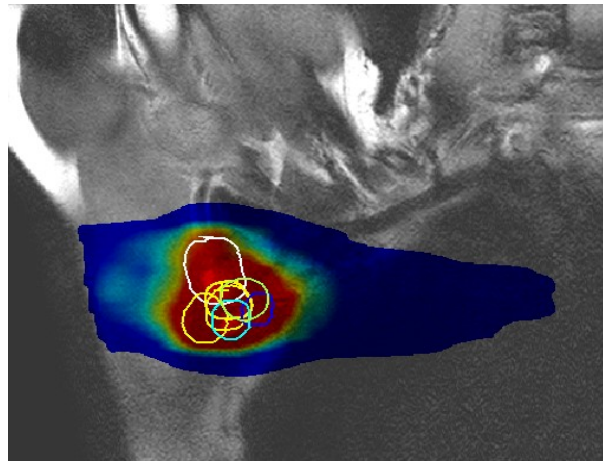
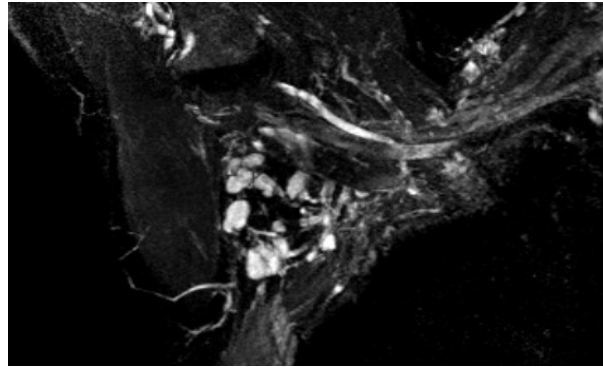


Why online MRI-guidance?

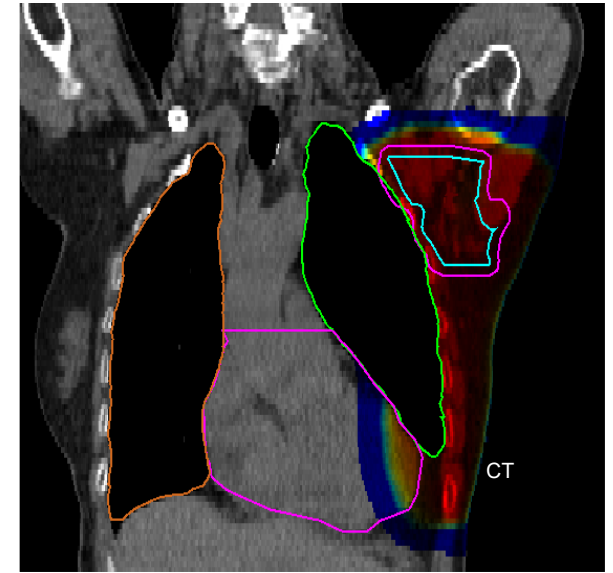
3D T₂-TSE



2D T₂-TSE

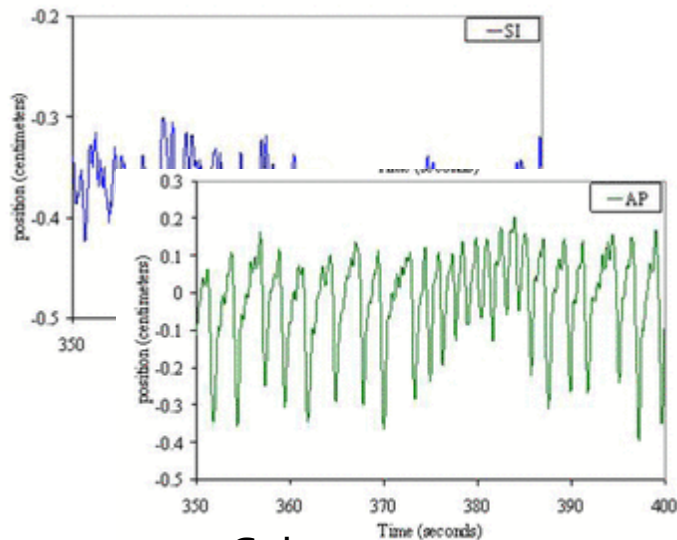


Irradiating individual lymph nodes

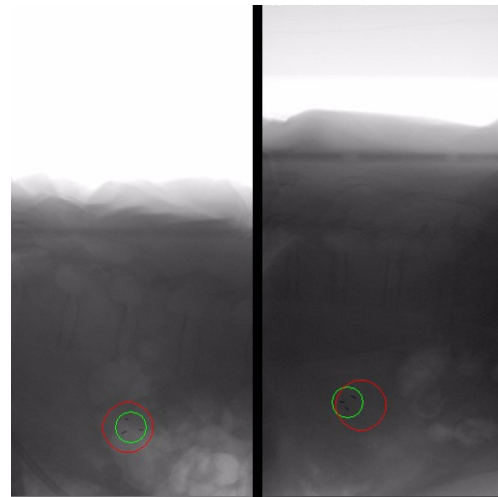


Why online MRI-guidance?

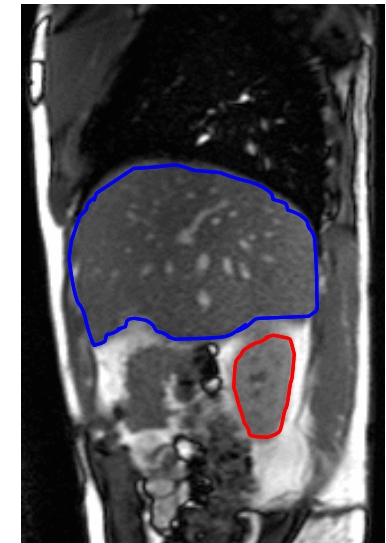
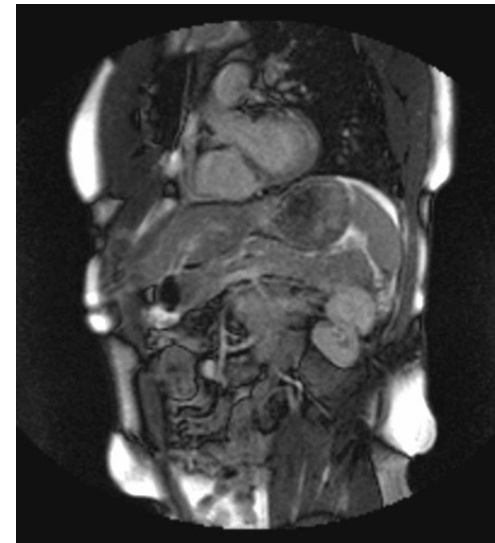
- Solve uncertainty due to motion
 - Resolve and visualize motion
 - Discrimination of target and surroundings
 - Independent of linac position



Calypso



Projektionen

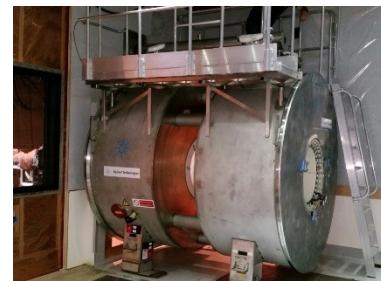
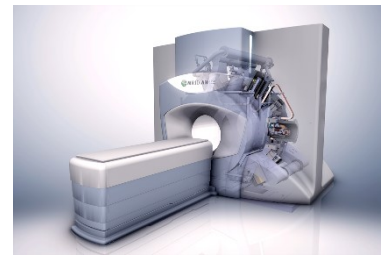
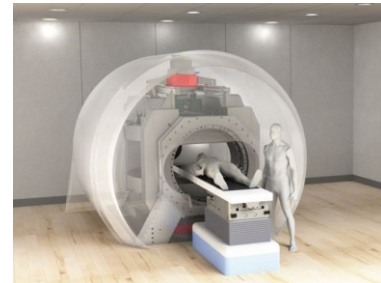


ONLINE MRI

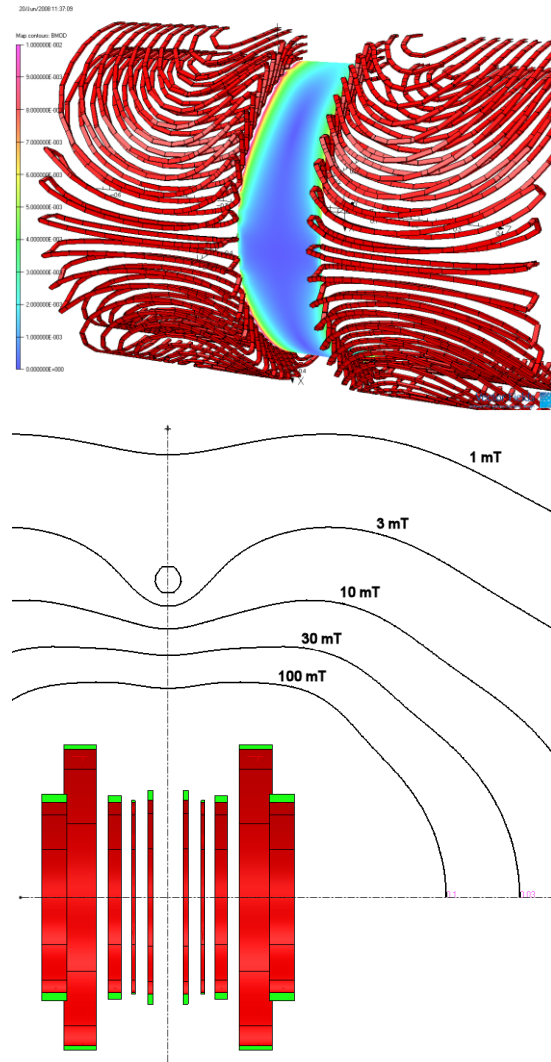
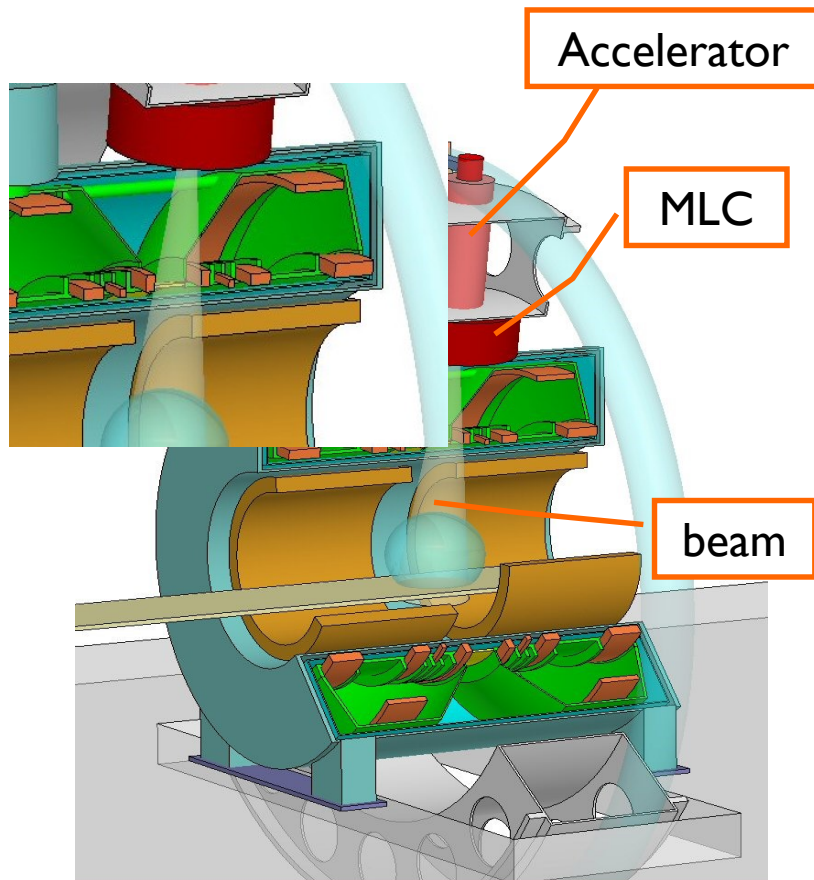


MRI-guidance research and developments

- Utrecht, The Netherlands
 - 1.5 T MRI, 7 MV linac
 - www.elekta.com/mr-linac
- Edmonton, Canada
 - 0.5 T MRI, 6 MV linac
 - www.magnettx.com
- Viewray, Cleveland, USA (www.viewray.com)
 - 0.35 T MRI, 3 Co sources or 6 MV linac (Feb 2014)
 - Clinical since 2014
- Australia MR linac project, Sydney (www.sydney.edu.au)
 - 1.0 T MRI, 6 MV linac



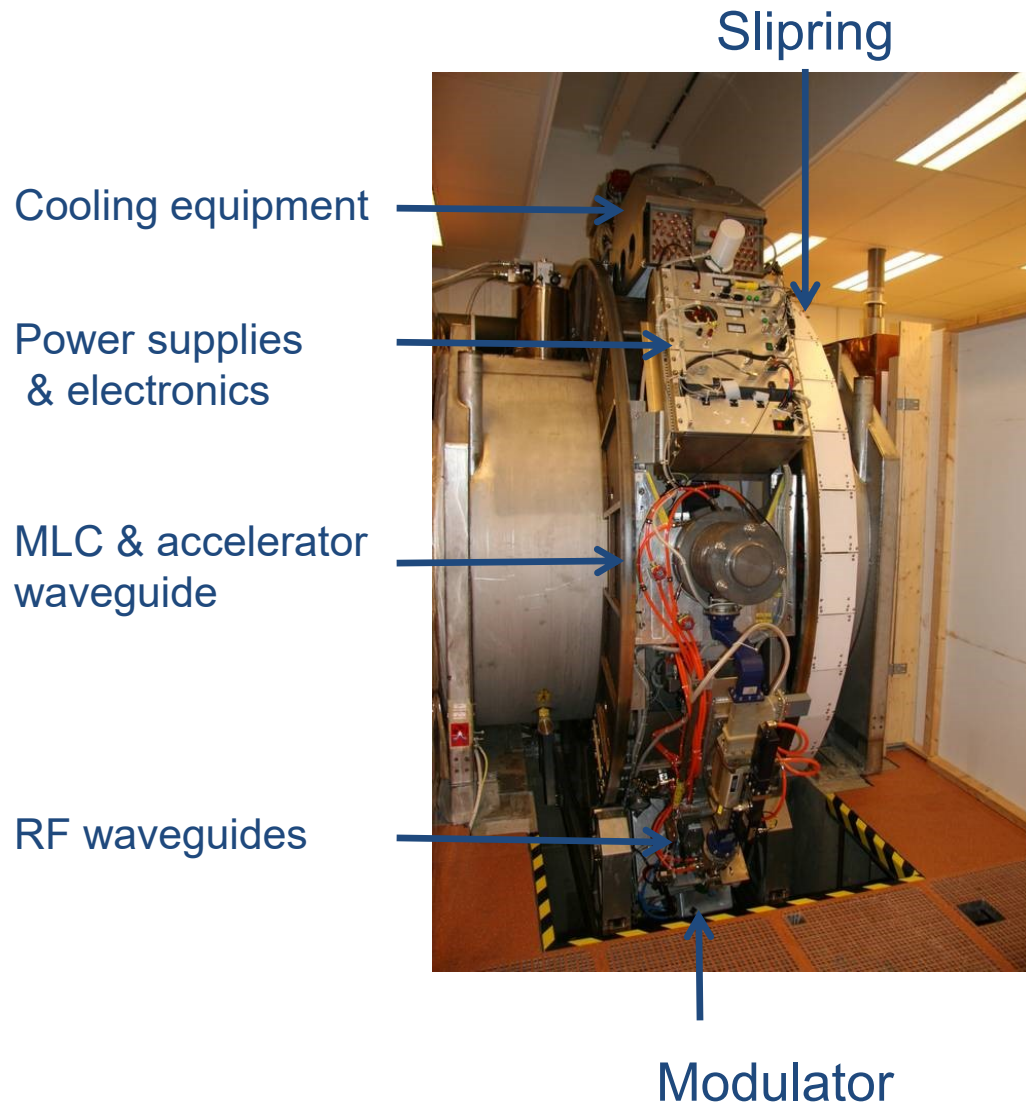
MRI-linac design at the UMC Utrecht



- Bore design
 - High field strength
 - Diagnostic image quality
 - Good field homogeneity
- Radiation transparency
 - Coil gap
 - Uniform gamma attenuation in cryostat
 - Split gradient coil
- Active shielding
 - 0T zone



MRI-linac design at the UMC Utrecht



MRI-linac at the UMC Utrecht

1999

2004

2005

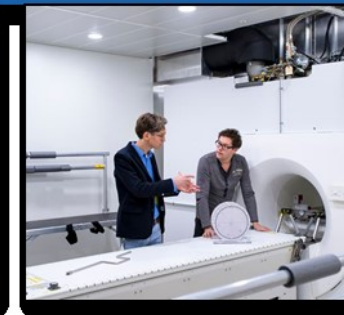
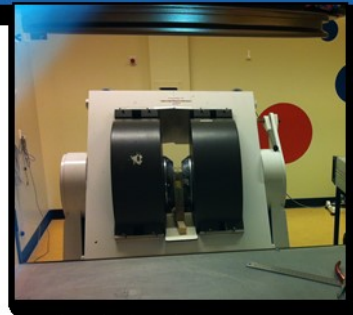
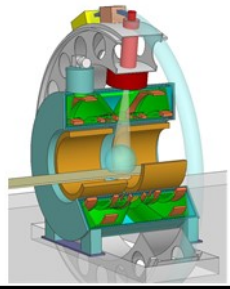
2009

2012

2014

2015

220 oral
MRI guided radiotherapy:
a MRI based linear accelerator
J.J.W. Lagendijk¹, C.J.G. Bakker²
¹University Medical Center Utrecht,



invention

design

Initial exp.

1st prototype

2nd prototype

3rd prototype

(pre)Clinical

More recent:

- Upgrade to CE-configuration
- Set-to-work
- Finished in July 2018
- First patient in pre-CE state

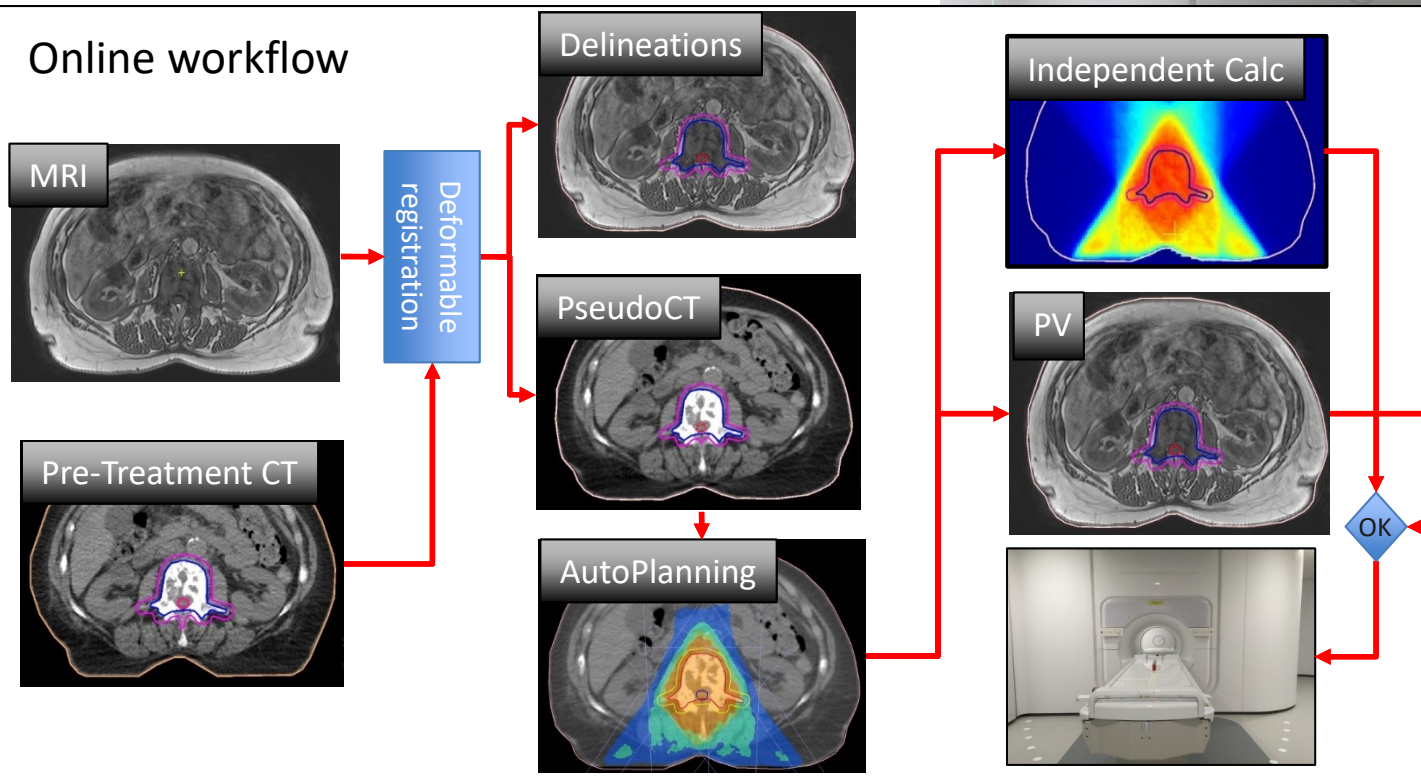


First patient on the MRL: "First in Man"

- Aim:

Online workflow

- D
- fe
- th

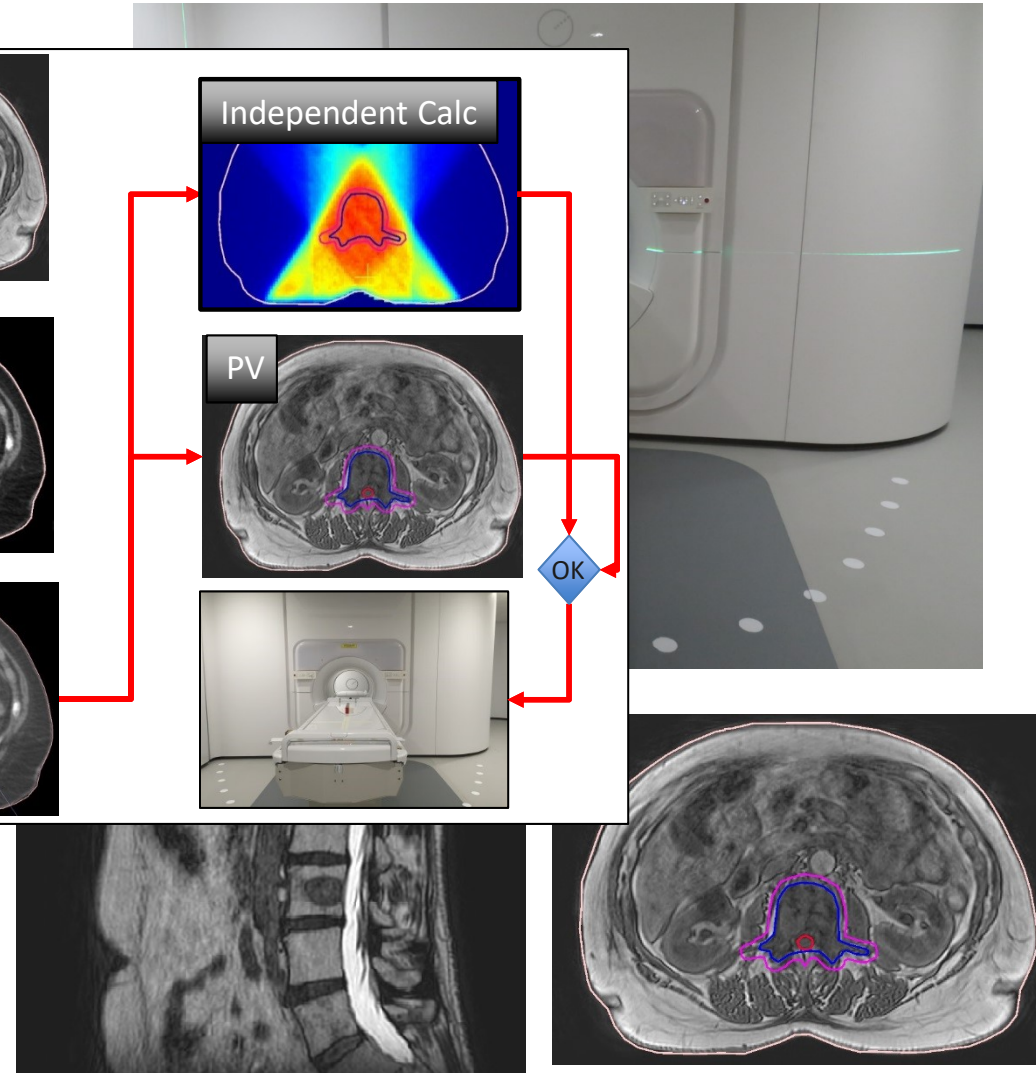


- Patient:

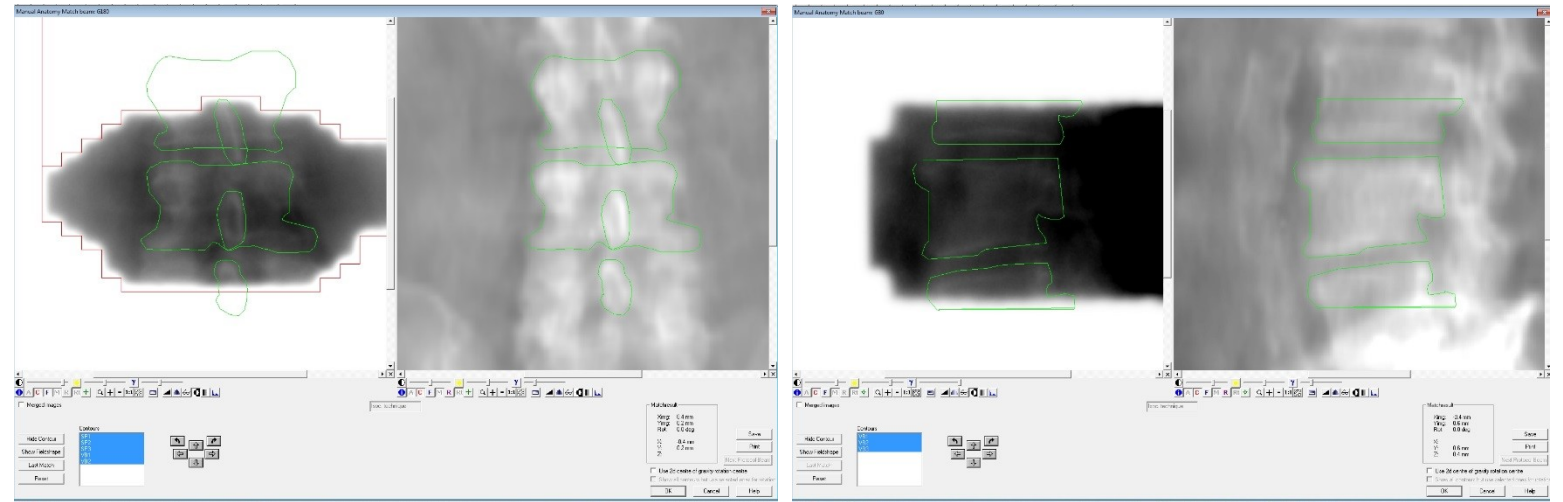
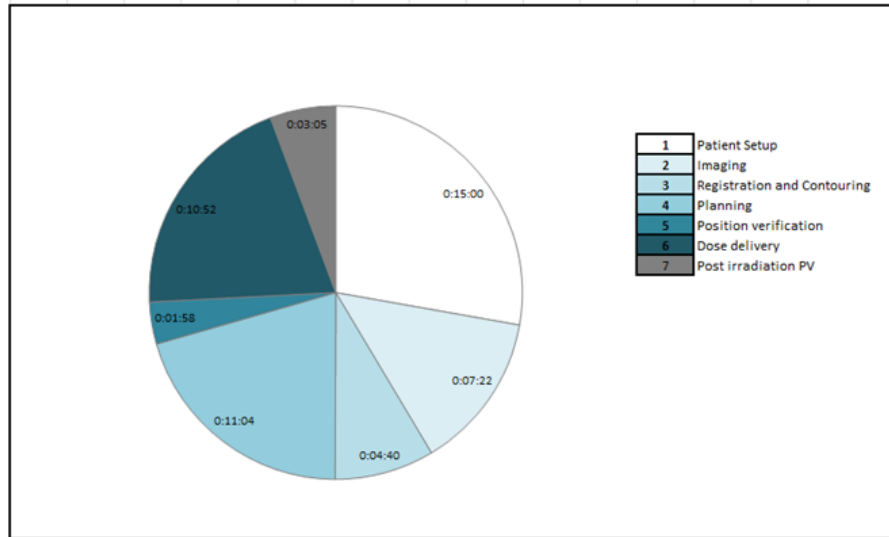
- B
- P

- Treatment:

- 8 Gy in **single** fraction
- 3/5 field IMRT



First in Man: Summary

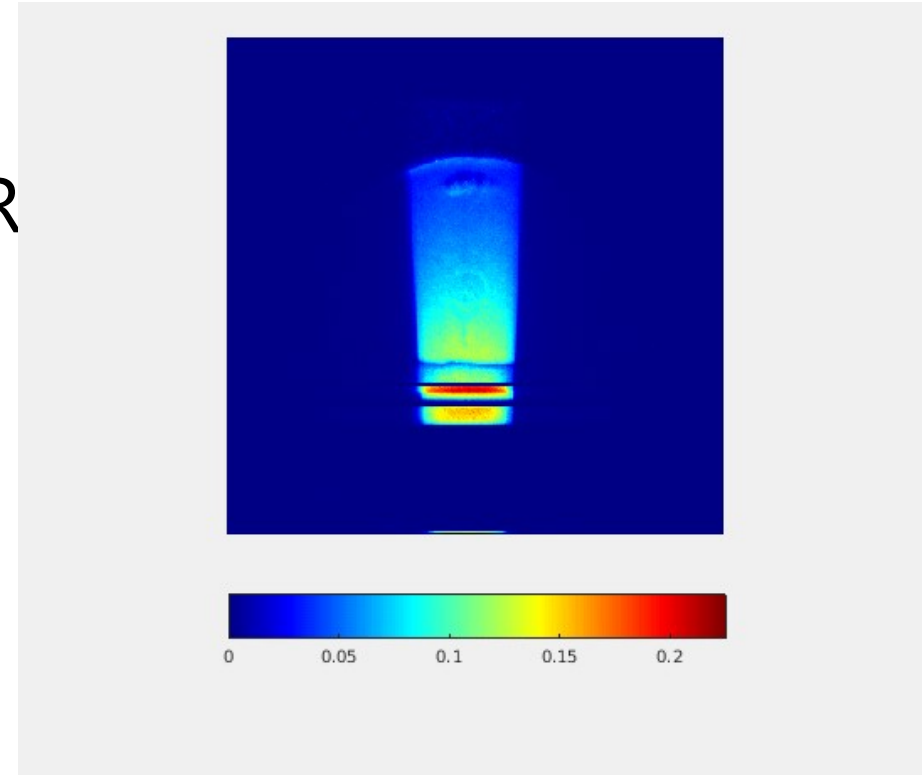


- Total time **54 minutes** for entire procedure
 - 15 min patient set-up
 - 7 min preparation MRI
 - 4 min registration and contour validation
 - 11 min planning
 - 10 min delivery and beam-on MRI
- Bone match using EPID and pseudo CT DRR
- Theraview software
- Displacement vector (3D): 0.3 mm

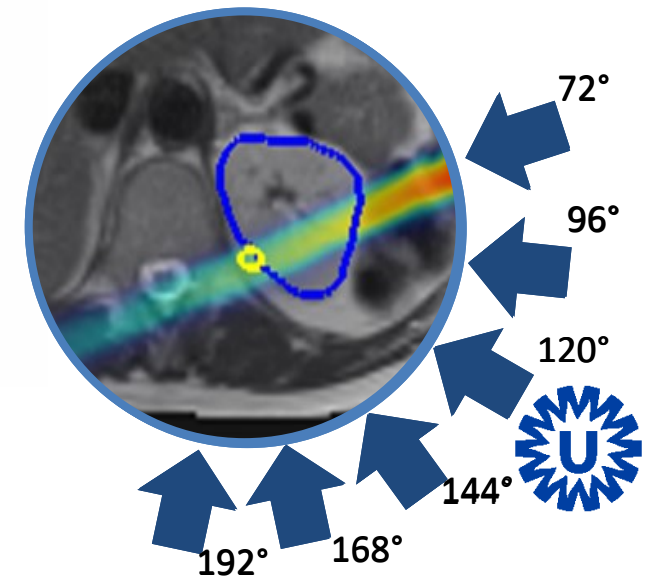
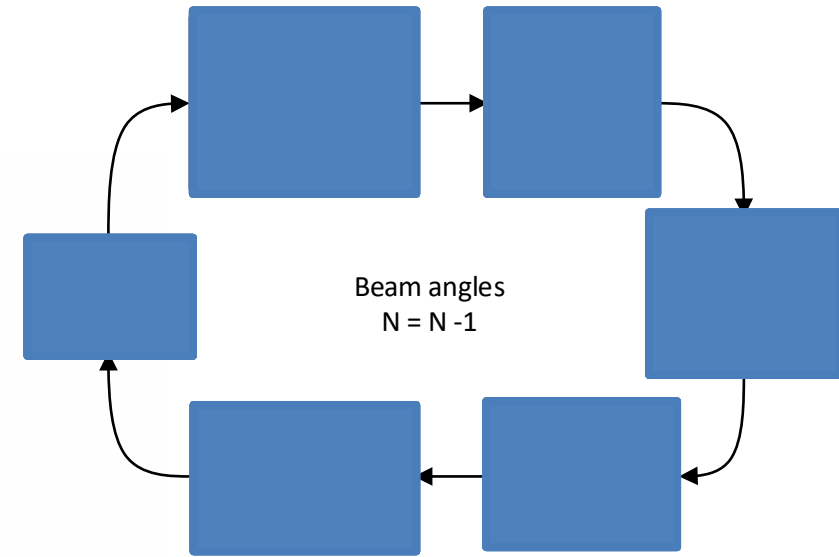
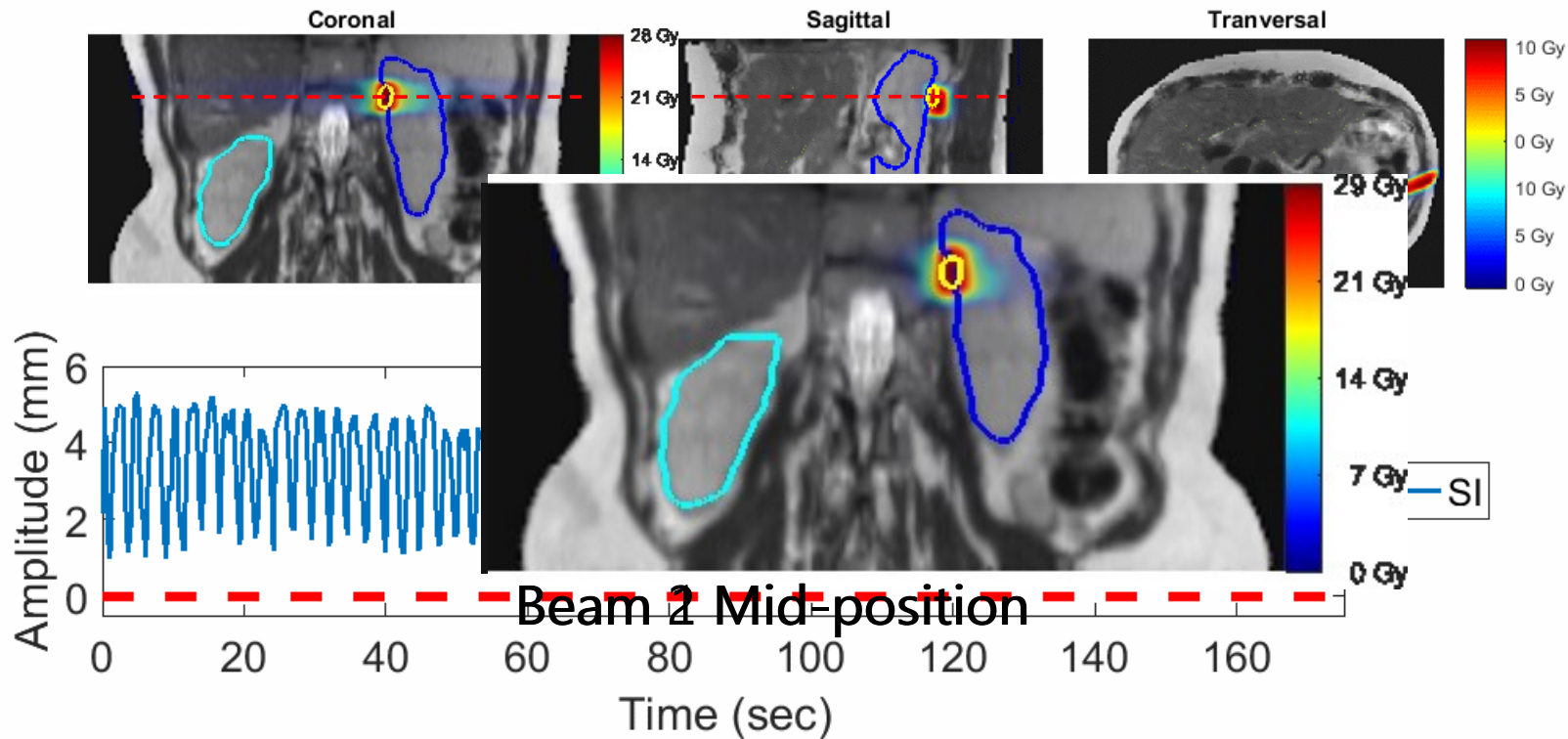


First in Man: Dose reconstruction

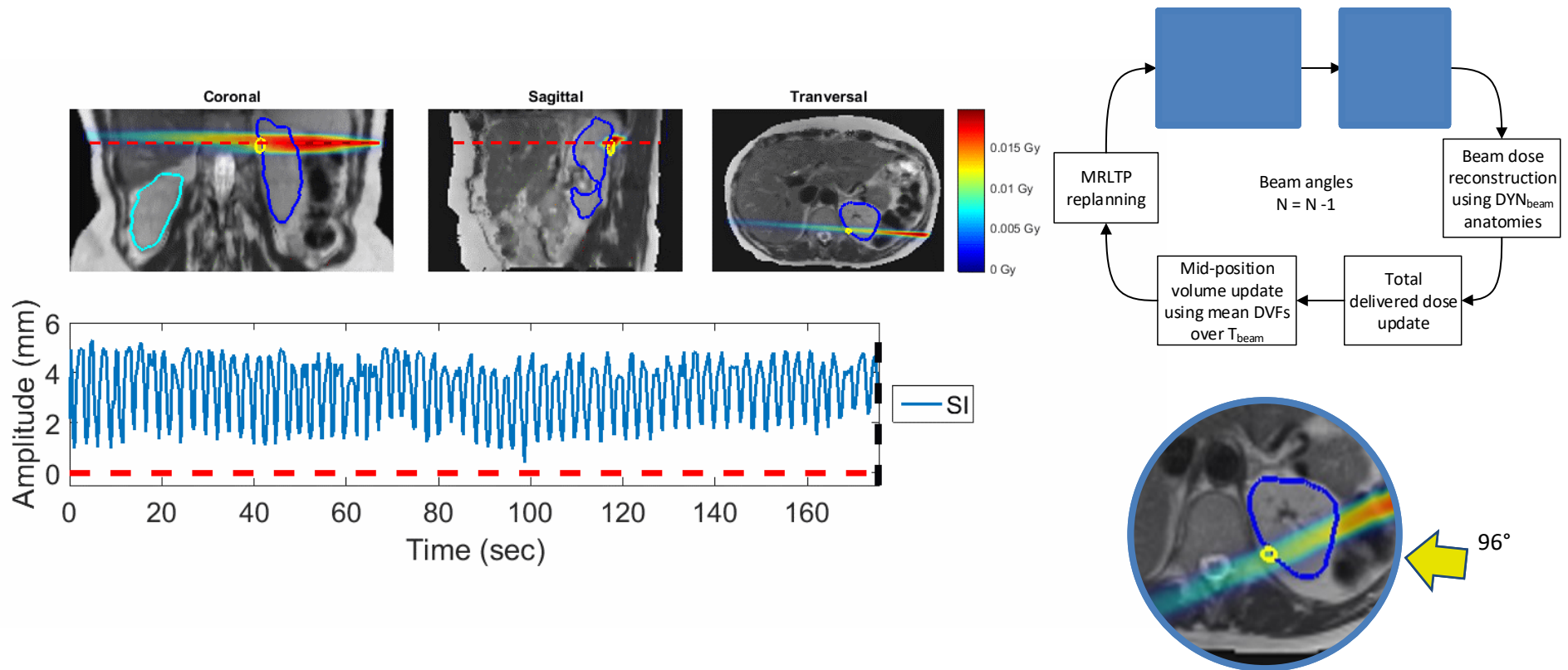
- **Independent** (geometry, state) 3D MR imager
- Time-stamped MRI data + time-stamped linac geometry
- Forward dose calculation
- First live dose reconstruction
- **Dose validation**



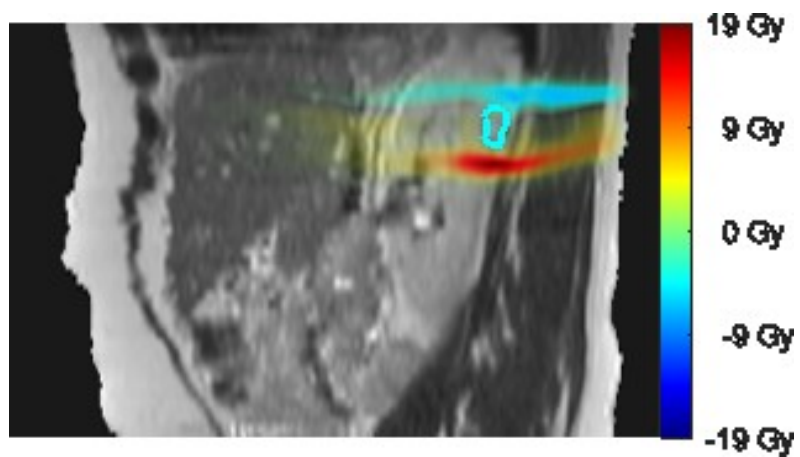
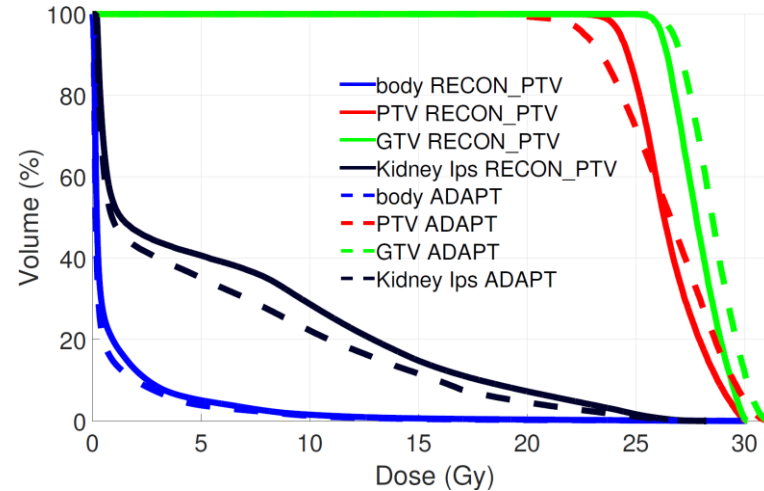
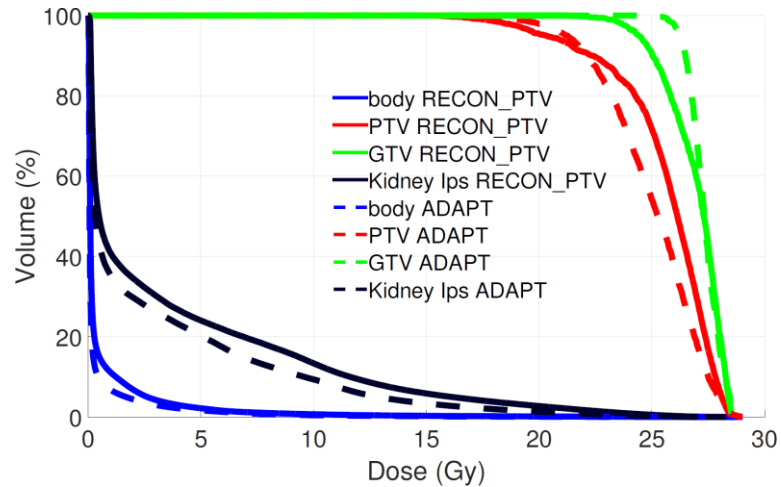
Research: Adaptive replanning per beam



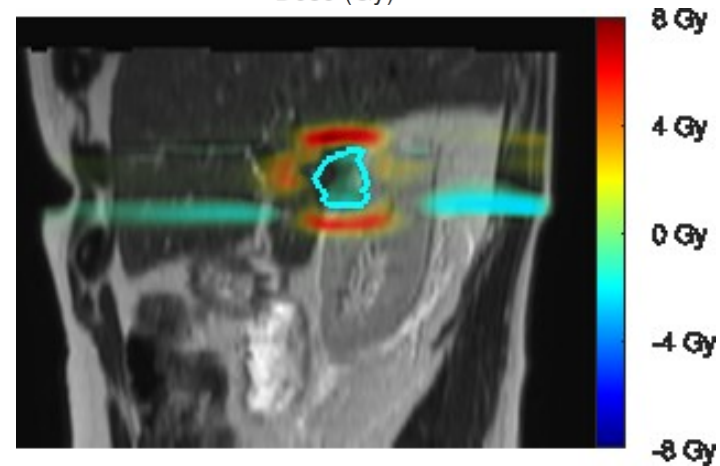
Inter-beam replanning regime



Baseline drift correction and margin reduction



Recon_PTV - Adaptive

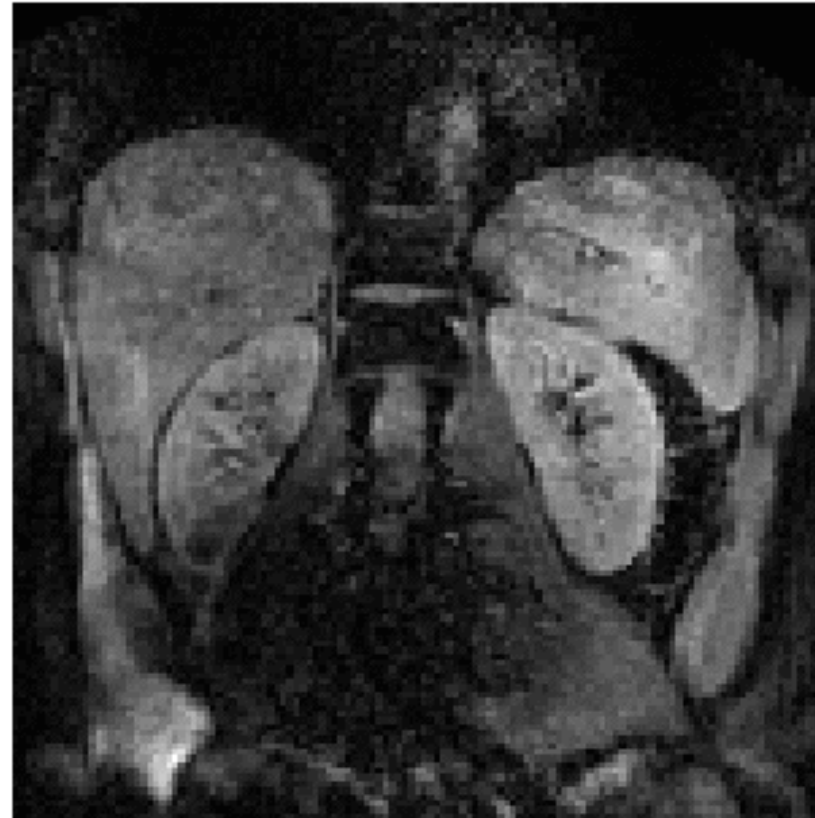


Recon_PTV - Adaptive



MR-linac therapy guidance: real time, MRI-guided MLC-tracking

- Response (tracking) quality
 - Image fidelity
 - geometric accuracy
 - Target/OAR
 - Surrogate
 - Temporal quality
 - **real-time**

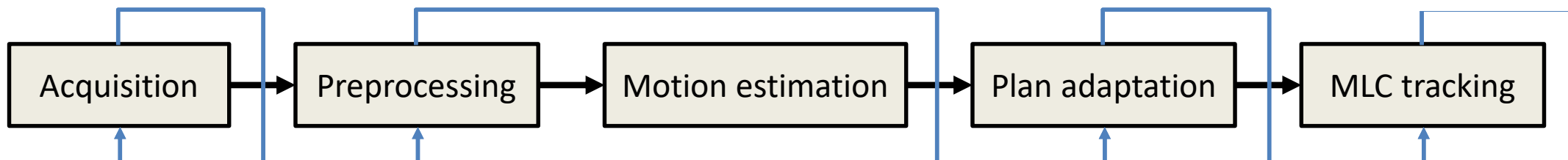
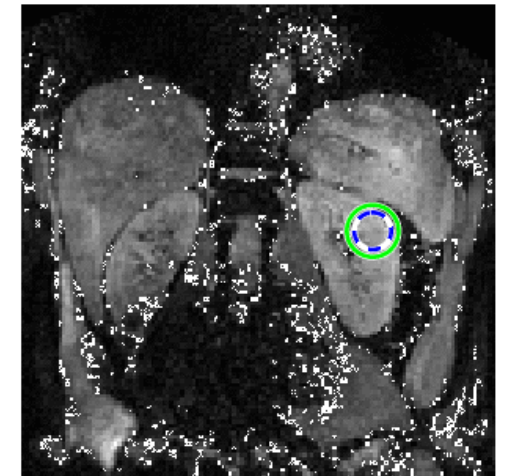
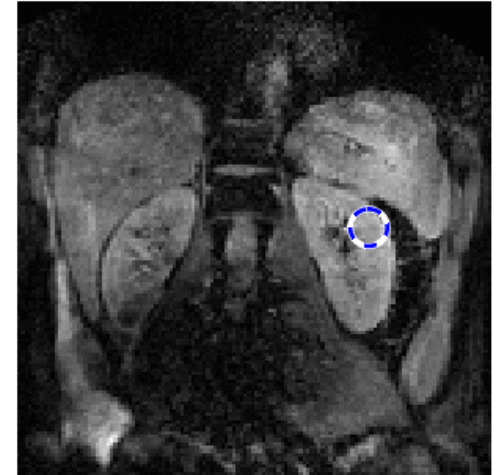




asynchronous program

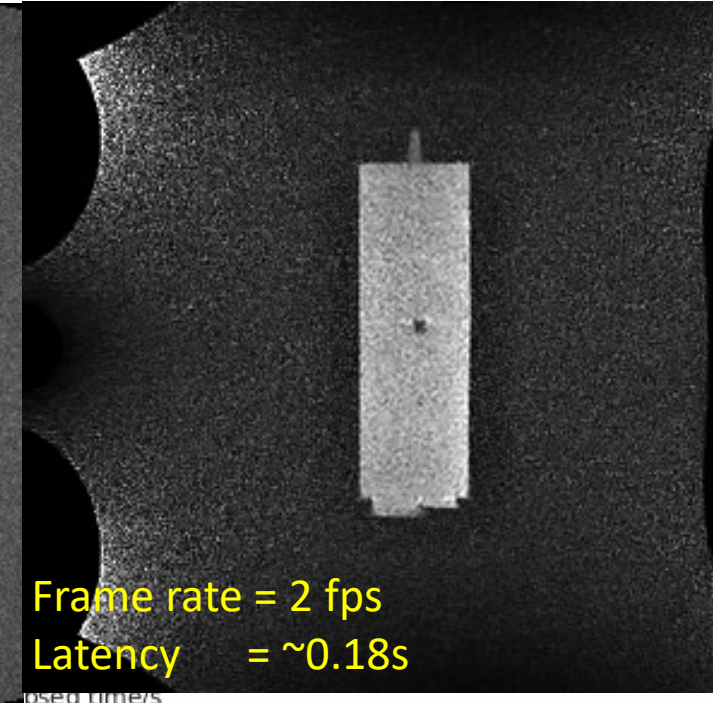
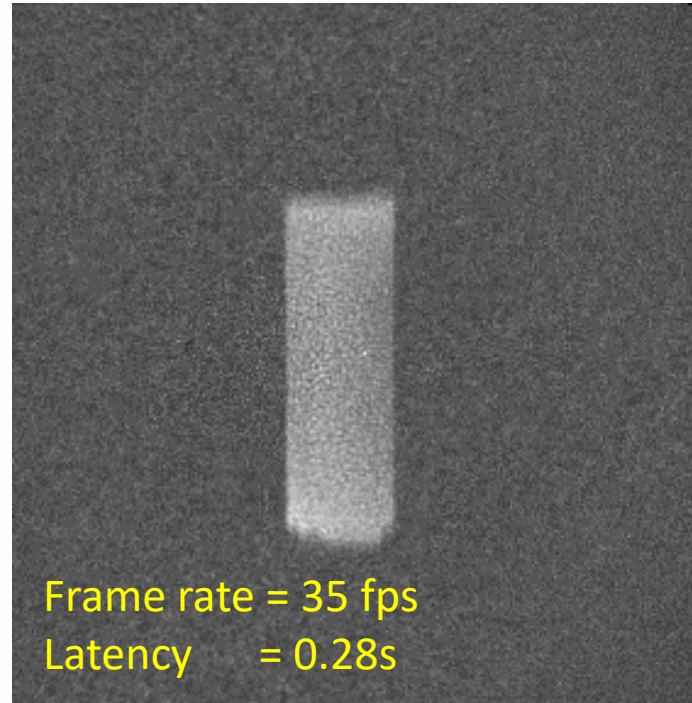
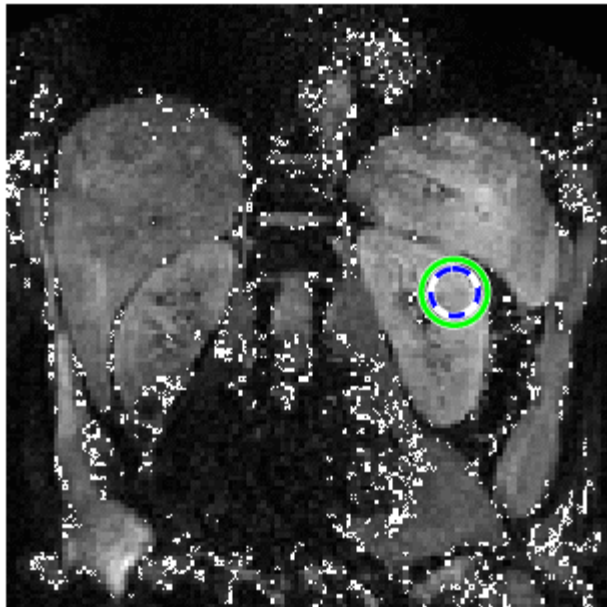
MR-linac therapy guidance: real time, MRI-guided MLC-tracking

- A typical day of an real-time MRI-linac system
 - Take an image (⌚)
 - Process the image (⌚)
 - Estimate motion in the image (⌚)
 - Process motion into a suitable adaptation (⌚)
(segment shift)
 - Apply adaptation as long as it is suitable (⌚)
 - Be done fast and start all over ...



MR-linac therapy guidance: Imaging latency

— Object in MRI
— physical object



MRI-latency: How long does the image acquisition take...

- 'Normal sensors' Integration time + readout

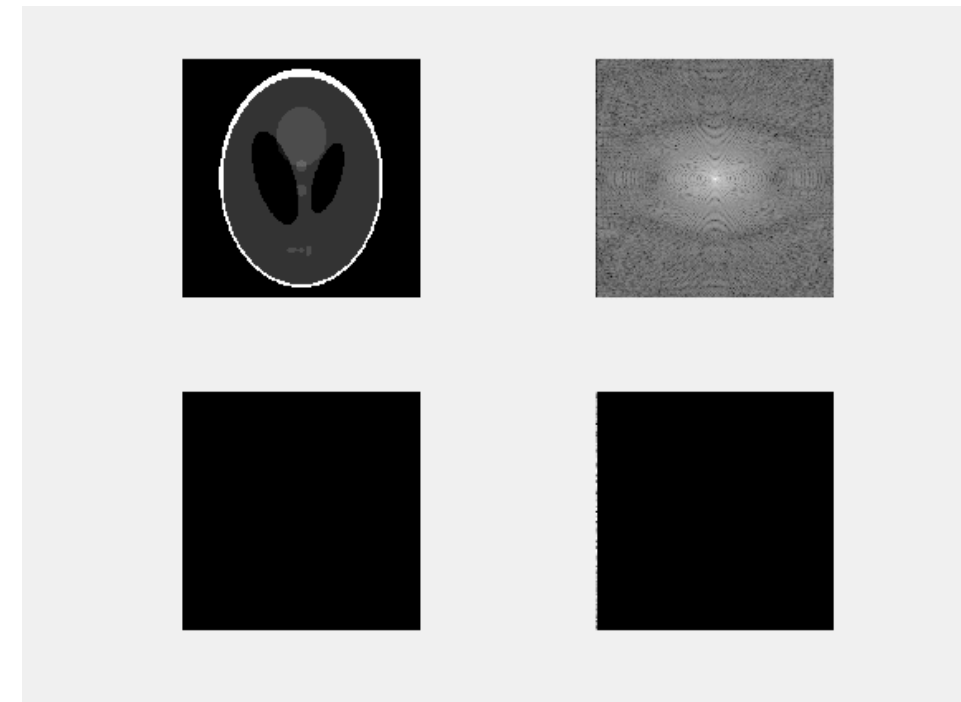


- Special sensors, i.e. DSLR



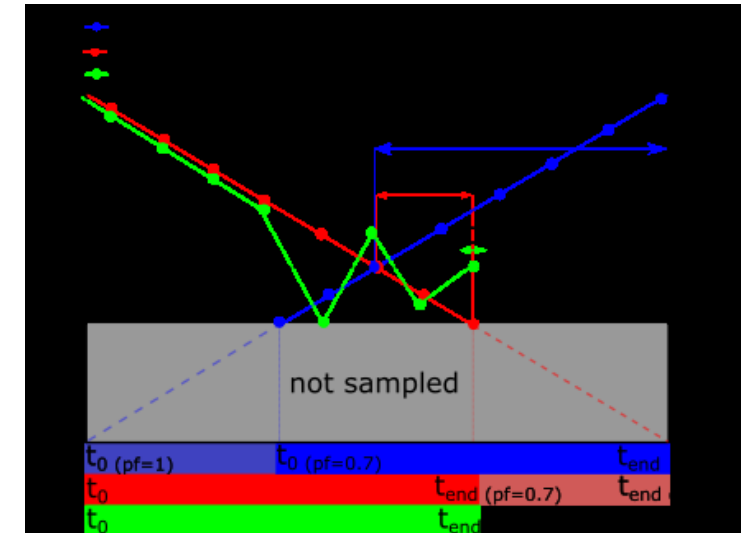
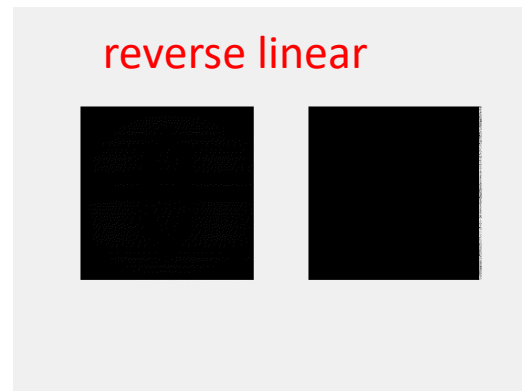
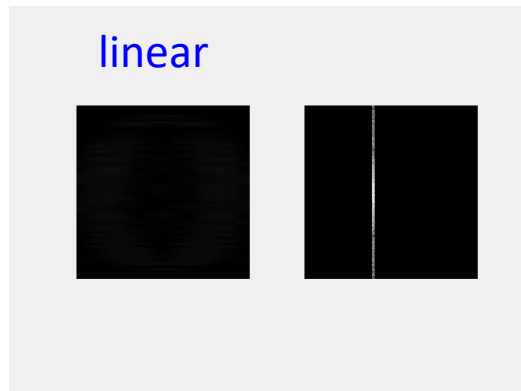
- MRI sensors

WHERE and WHEN is my image formation



MRI latency analysis

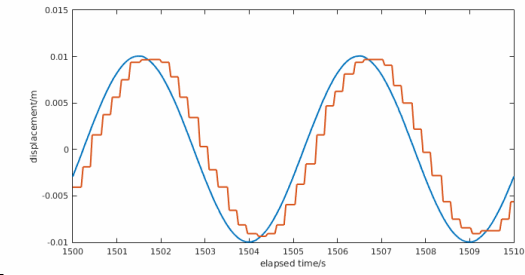
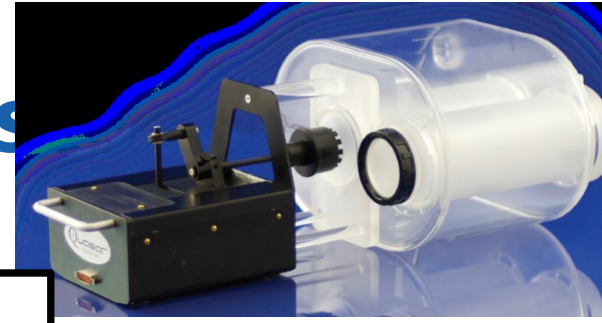
- Hypothesis: High sensitivity of k-space-based read-out to trajectory



- Acceleration using partial sampling/partial *Fourier*



MRI latency analysis: Cartesian results



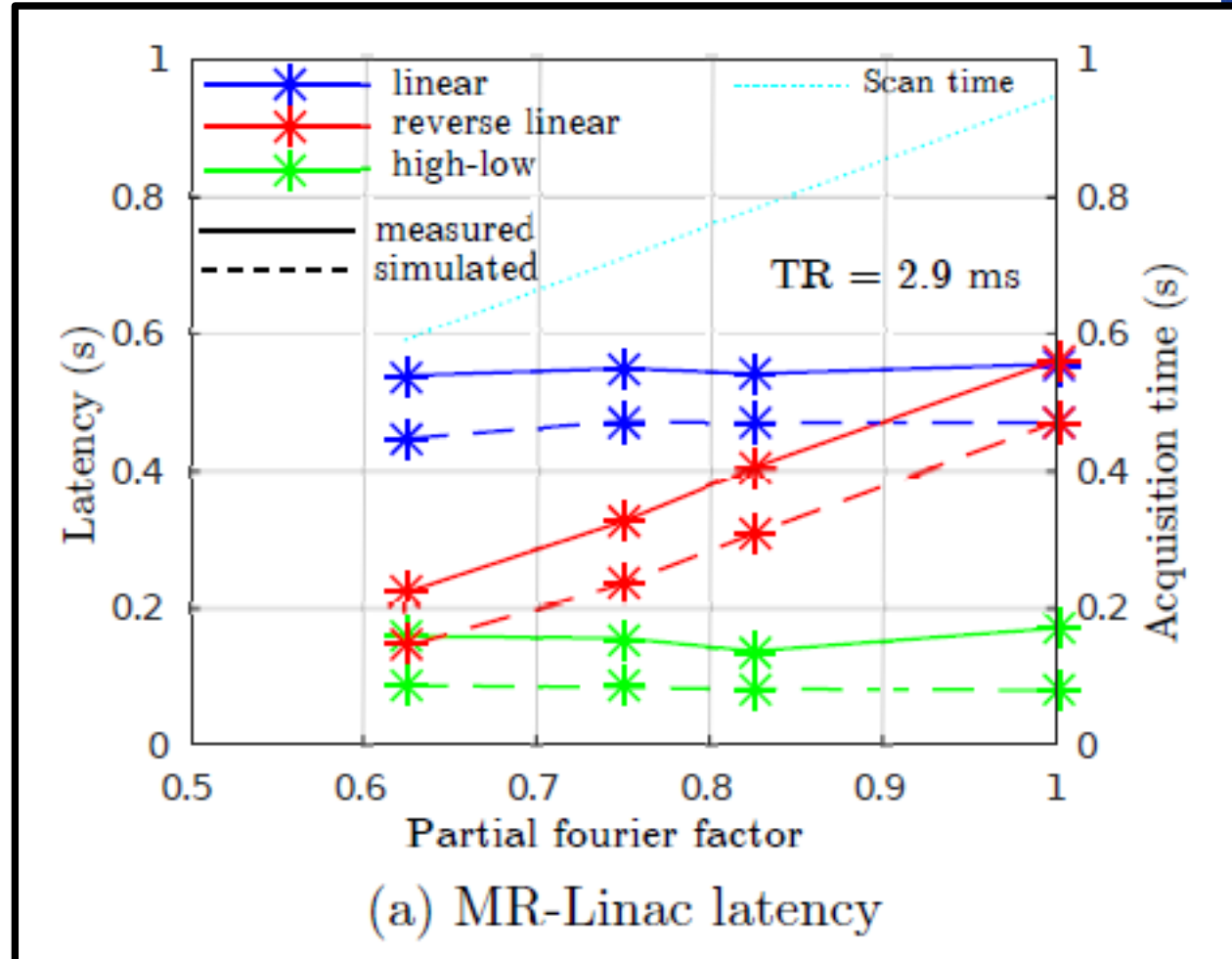
linear



reverse linear



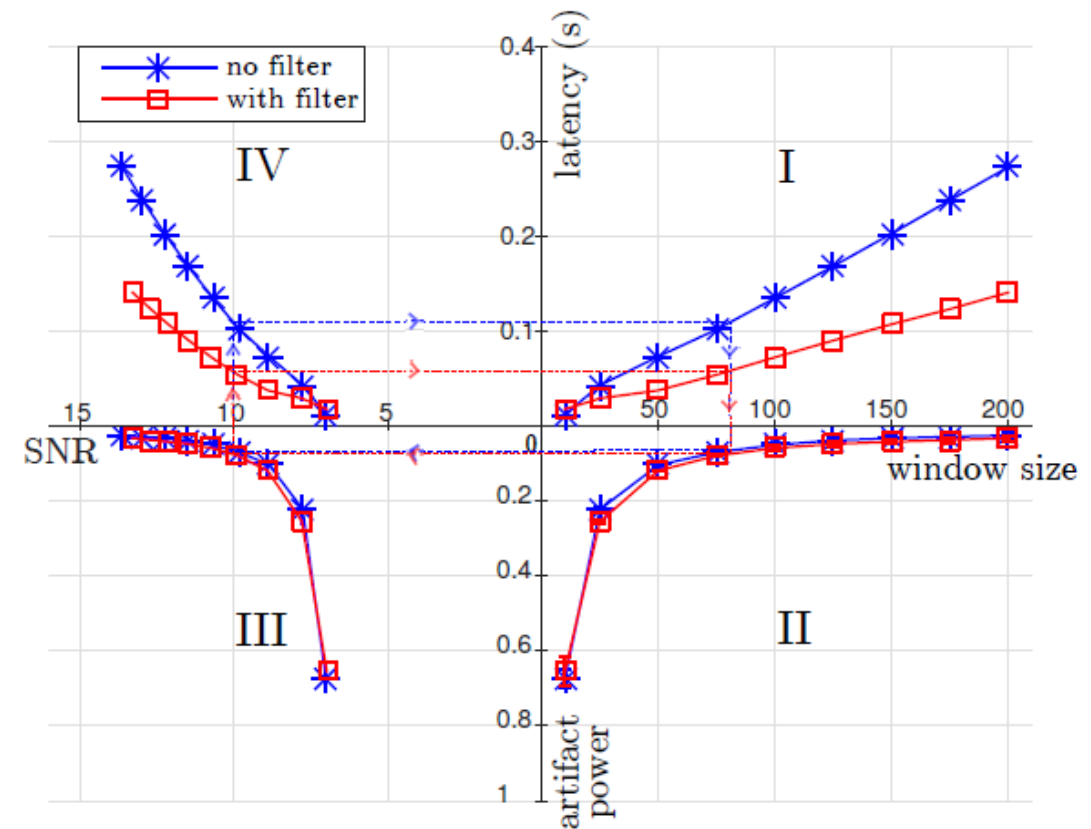
high-low



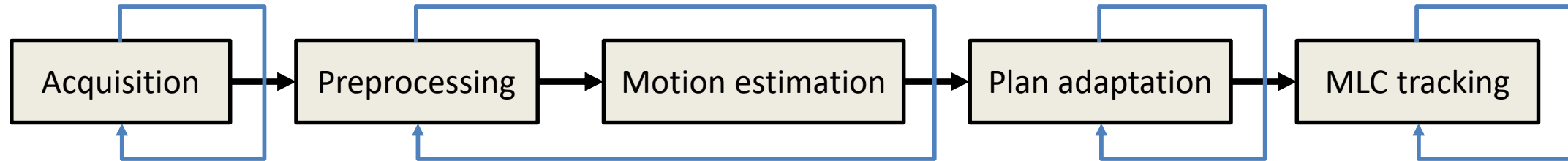
MRI latency analysis con'd: Radial results



- Generally, $\Delta T = t_{\text{acquisition}}/2$
- Golden angle sampling:
 - Temporal weighting filter penalizes importance of “old spokes”
 - Signal processing can reduce latency about 50%, $T = t_{\text{acquisition}}/4$



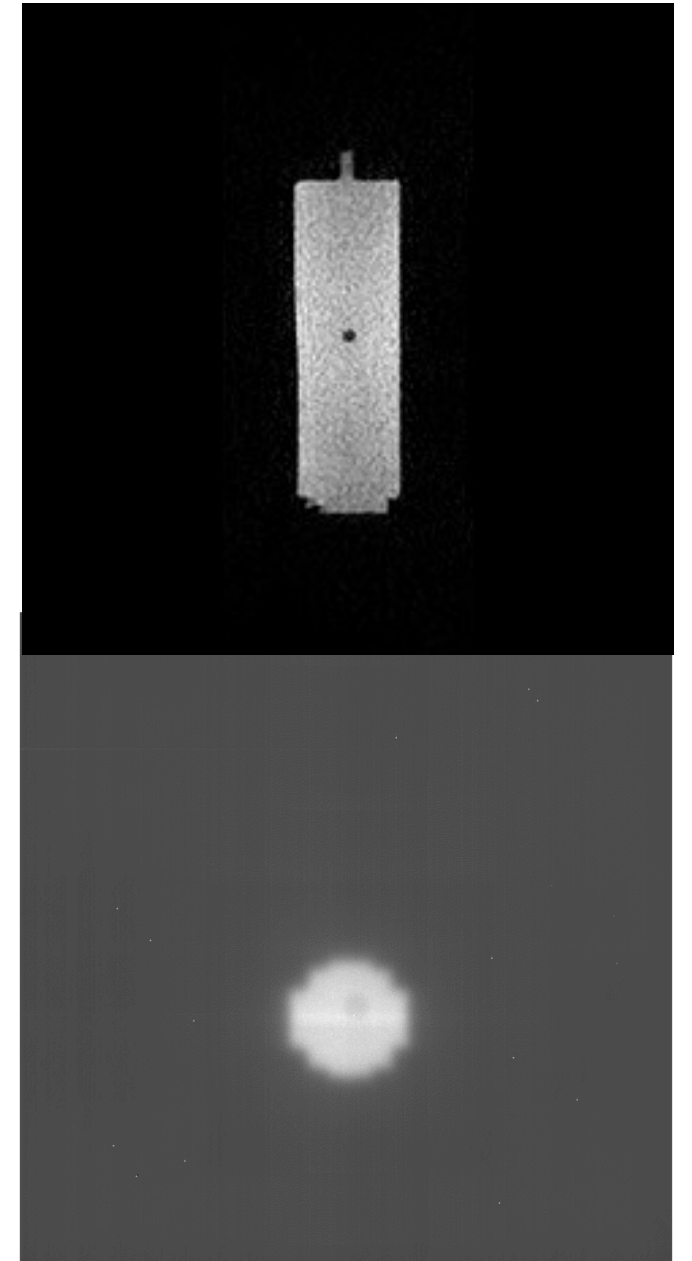
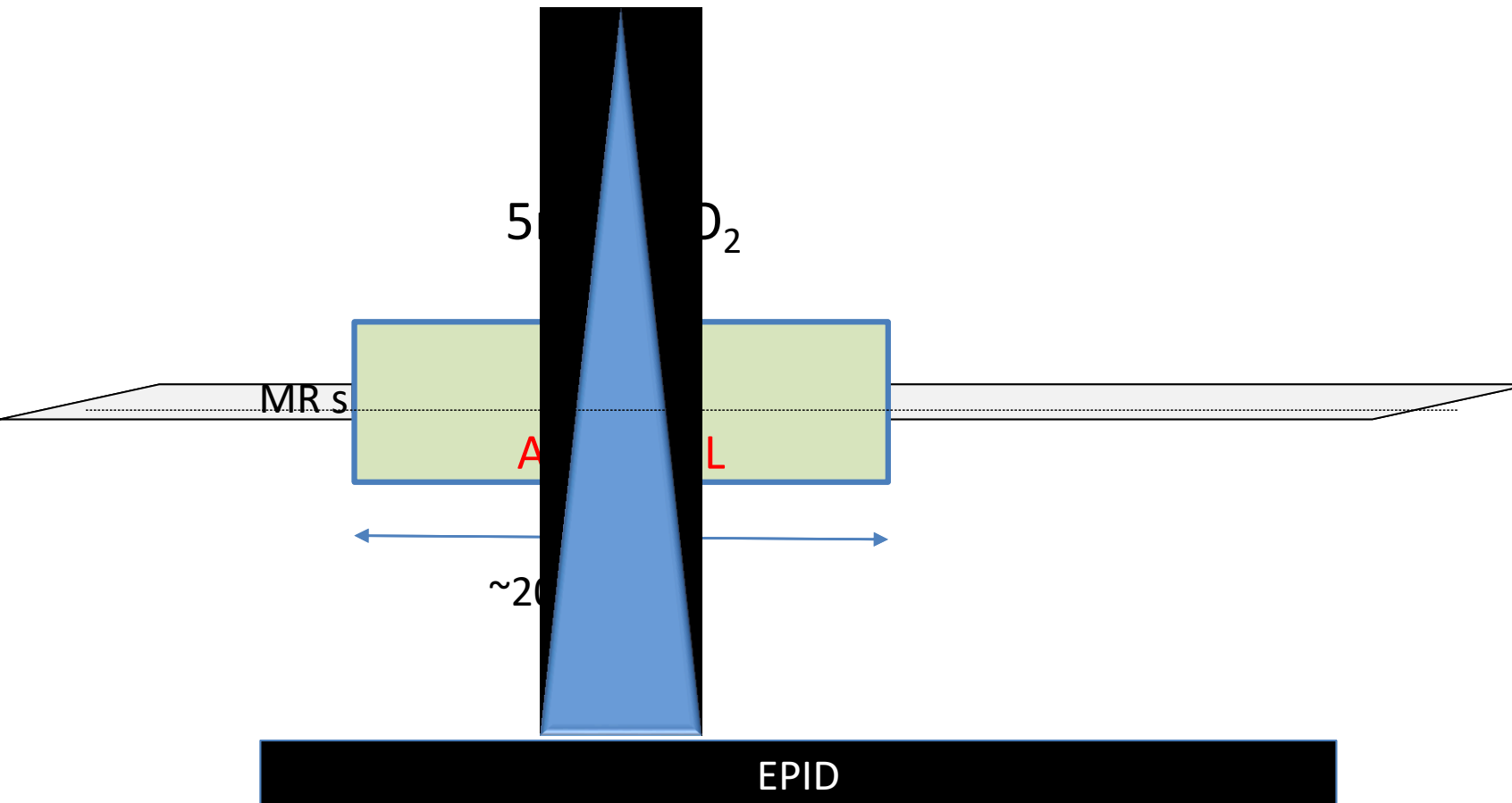
Latency summary



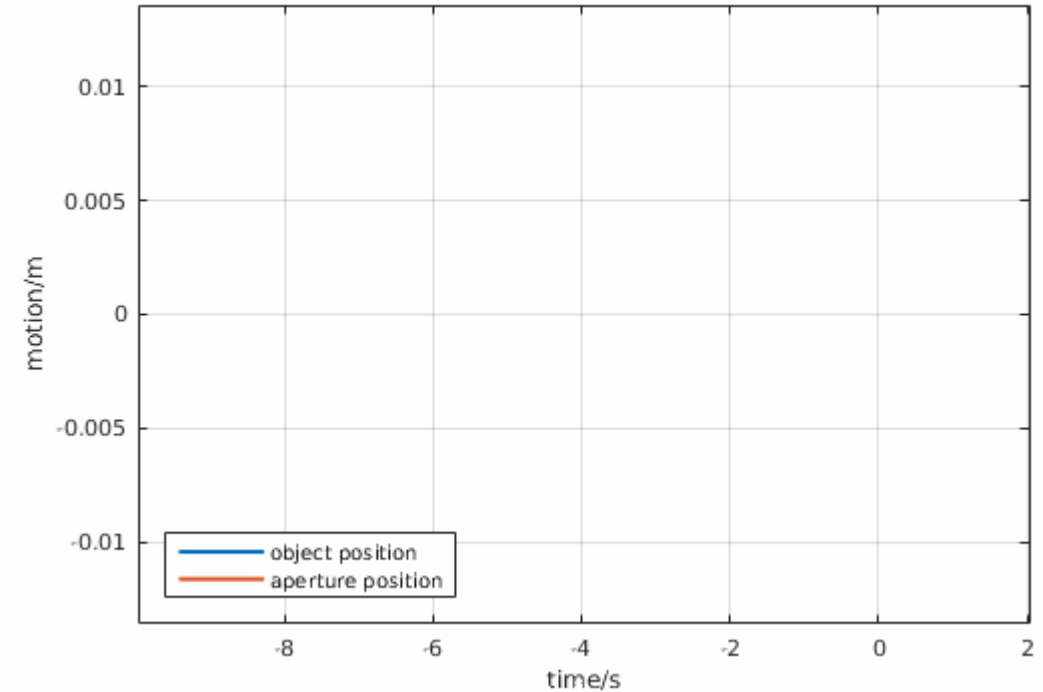
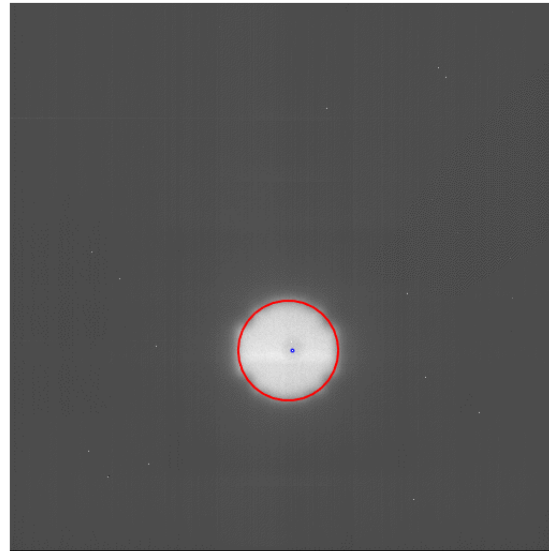
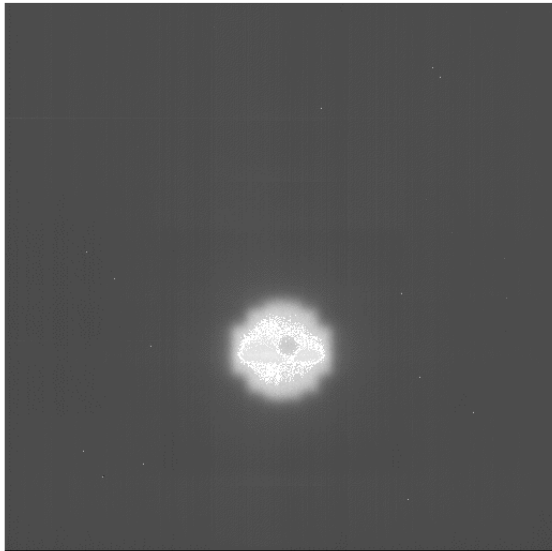
- Runtime estimation
 - Acquisition: 180ms – 550ms + image age!
 - Preprocessing + motion estimation: ~80ms
 - Plan adaptation (simple tracking, gating): 5ms
 - MLC tracking: ~30ms



The proof of the pudding: MLC tracking on the MRI linac



Experiments: MRI-guided position feedback



Estimated latency	10Hz	41.94
	5Hz	127.11



MRI-guidance at UMC Utrecht

- Prototype phase finished
 - Clinical proof of concept
 - Beam & plan QA
- CE clearance in due time (July 2018)
- Strong research line
 - Real-time imaging and MLC tracking
 - Adaptive replanning
- See what you treat

