

ARDOS

Advanced Radiation Dosimetry System

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Background

- Respiratory induced intra- and inter-fractional **lung tumor motion** can cause **significant uncertainties** in dose delivery of lung cancer radiotherapy
- Motion-management **strategies**:
 - Beam-gating, breath-hold control
 - Additional margin to Internal Target Volume (ITV)
 - **4D (3D + t) techniques** for imaging, treatment planning and dose delivery *
- **Necessity to verify** such techniques and/or
- **Investigate** the related dosimetric improvements under conditions as close as possible to the clinical situation



* [Korremann, 2012; Hugo et al, 2012]

Respiratory Motion Phantom - ARDOS

Features (1/2):

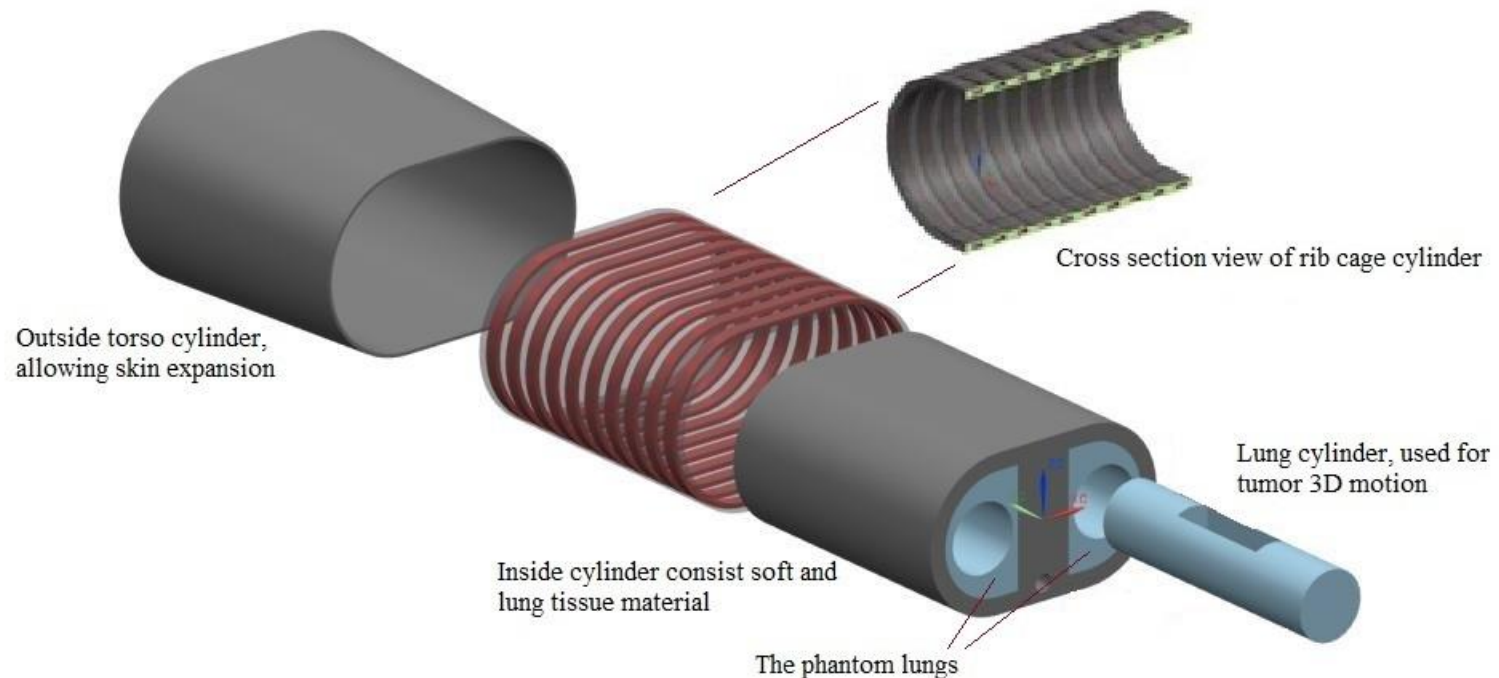
1. Represents an average human torso with a movable tumor insert

Comprises a chest wall, ribs, and lungs

2. Made from tissue-equivalent materials:

Lung tissue - high density balsa wood (0.3 g/cm^3),

tissue equivalent solid water (1.05 g/cm^3), and bone material (1.4 g/cm^3)



Respiratory Motion Phantom - ARDOS

Features (2/2):

3. Different types of dosimeters can be used:

Films, TLDs, pinpoint IC, diamond, diode, alanine

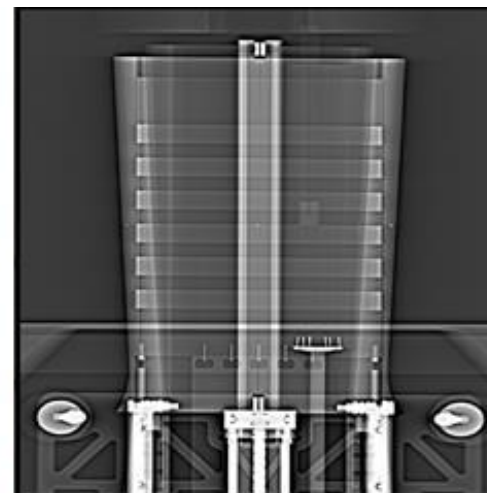
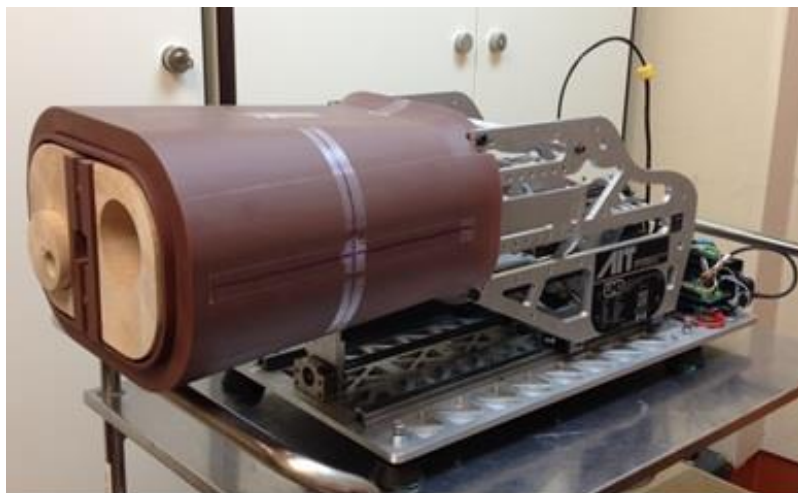
4. 4 programmable independent motions:

Tumor insert – up to 360 degrees rotation and 10 cm translation

Lung expansion – up to 4 cm

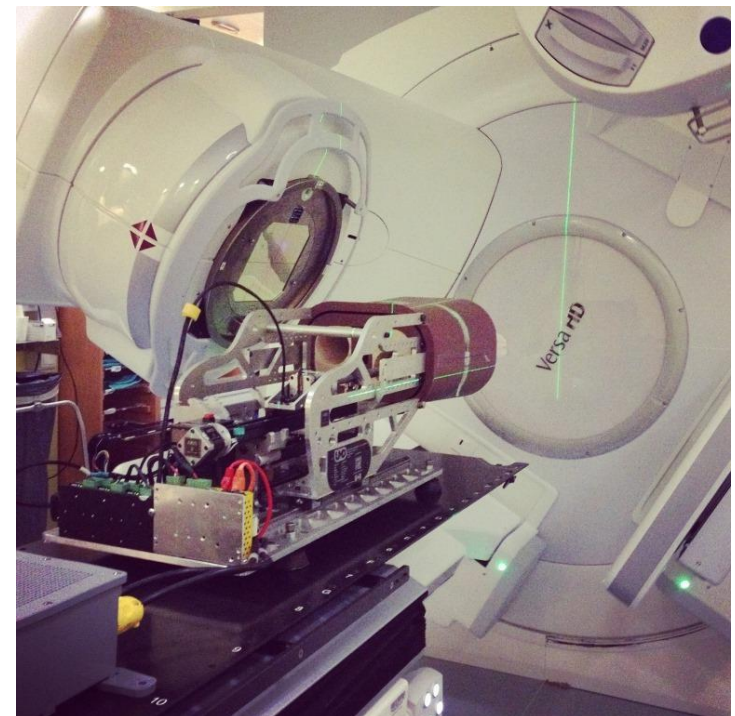
Rib motion – up to 10 cm

Declared by the manufacturer accuracy – 0.025 mm



Dosimetric Investigation - Setup

- Based on standard clinical photon beam-based stereotactic protocol
- Dosimetric verification: EBT3, pin-point IC, TLDs
- Implemented motion scenarios:
 - Static
 - Chest wall motion – 7.5 cm amplitude
 - Ribs motion – 1.8 cm amplitude
 - Tumor motion – 1.5 cm amplitude
& 90 degrees rotation
 - Combined motion – Chest wall, Ribs
& Tumor



Dosimetric Investigation - Preliminary Results

Dose difference depending on the motion of the phantom

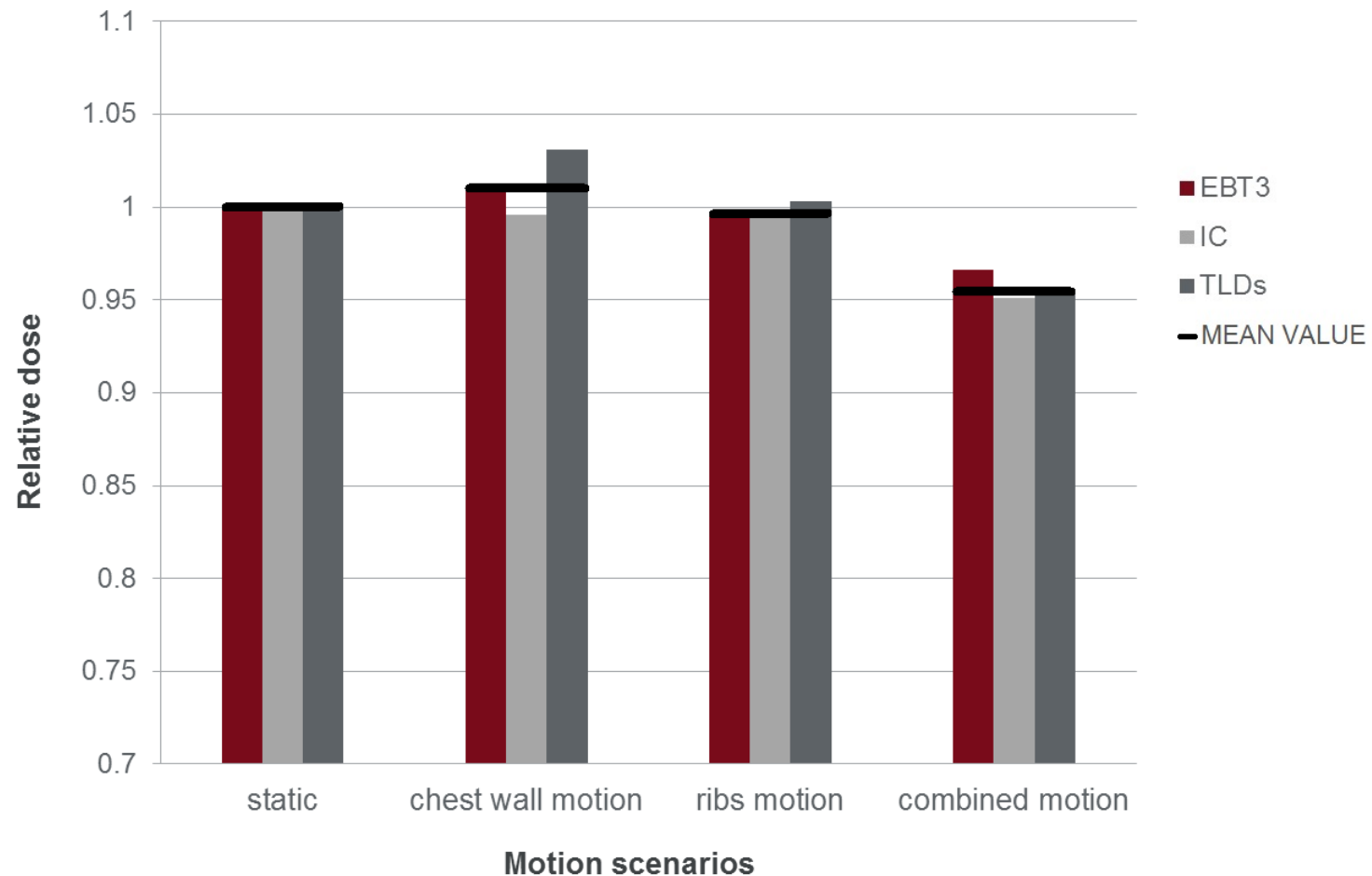


Image Registration Software Verification

Tumor-motion tracking based on 4D-CT data

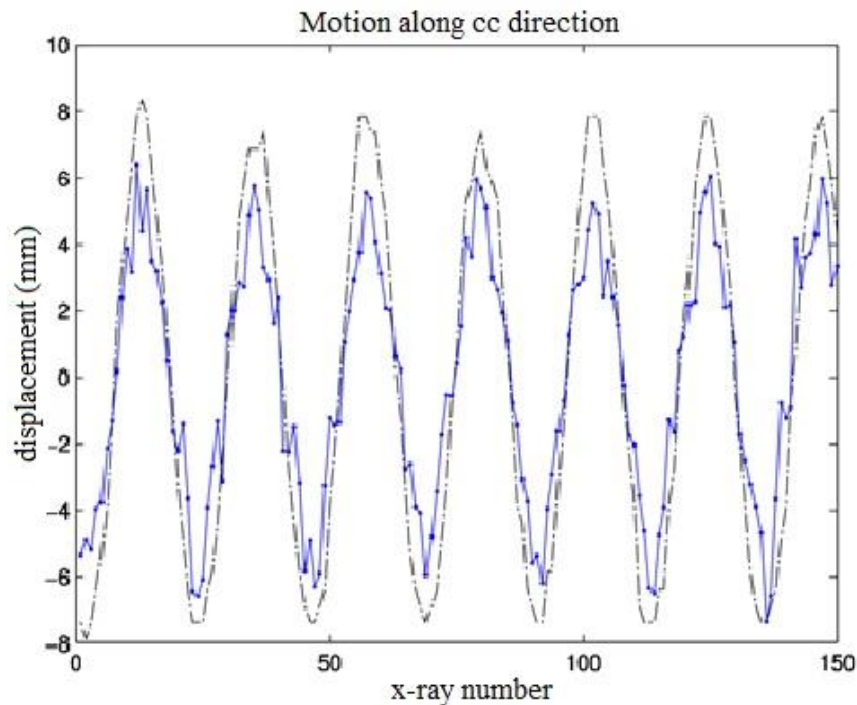
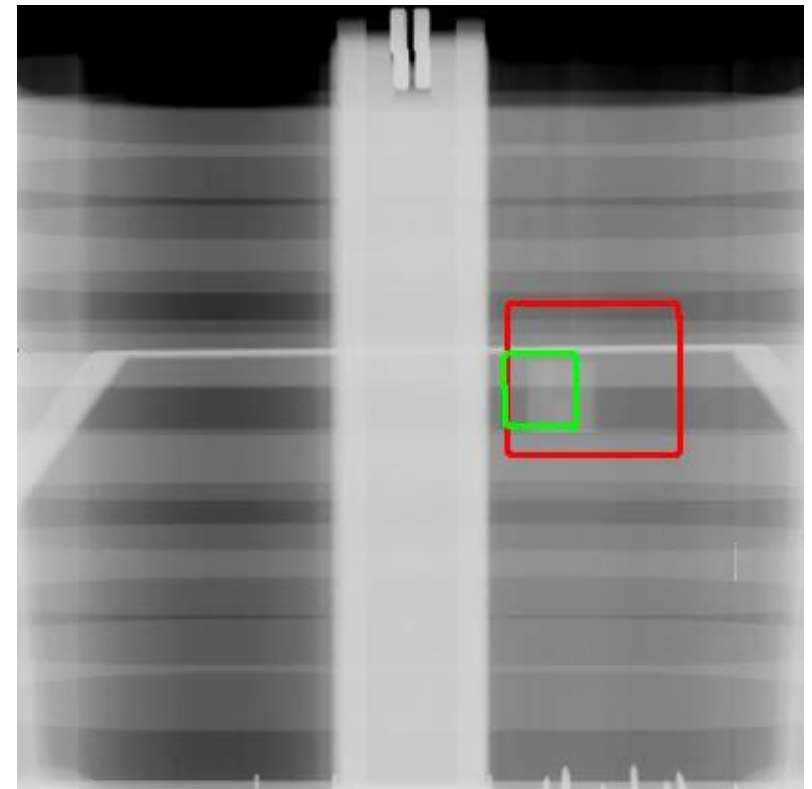


Fig 1 - Extracted tumor motion (blue) in comparison with annotated motion (black)



Next Steps

Short-term

- Continue dosimetric studies with multiple detectors (improve statistics)
- Continue image registration software verification
 - with more challenging tumor inserts and materials
 - using the MV data in combination with kV, and ExacTrac
- Start dosimetric verification of VMAT for lung-cancer
- Start pilot study for 4D PET

Medium-term

- Start research of scanned ion beams
- Develop and implement a QA workflow protocol
- Compare measured data with MC simulation

Thank you for your attention!

Any questions?

