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FMH teaching course  
Selected topics  
on special  
techniques in  
radiotherapy





## Conflicts of interest

Grant from Accuray



Collaborations with  
RaySearch  
IntraOp  
PMB Alcen  
CERN



Tomotherapy  
CyberKnife  
Flash Therapy

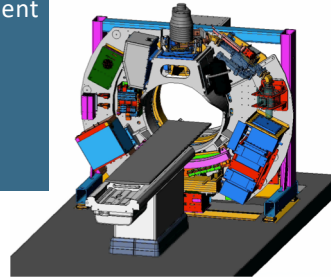


# TOMOTHERAPY

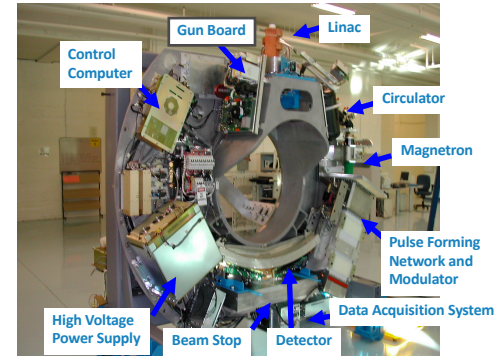


## Tomotherapy

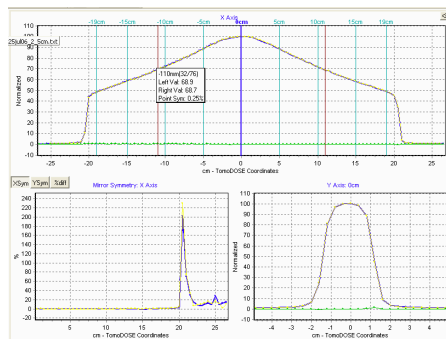
Principle: rotate a linac around the patient  
 « Mix » between a CT and a linac  
 Patient table moving during irradiation  
 Leaves moving during irradiation  
 Native IMRT and IGRT



## Tomotherapy

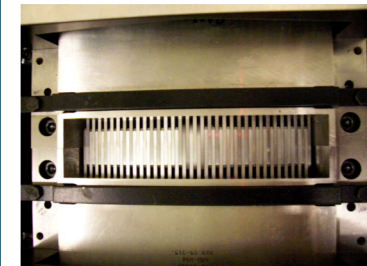


## Characteristics



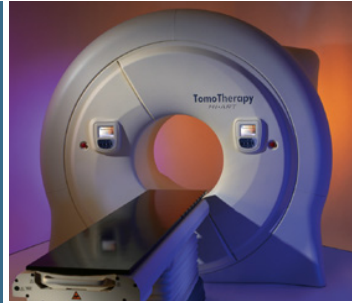
## MLC

64 leaves  
 1 leaf (isocentre)  
 Width : 6.25 mm  
 Thickness : 10 cm  
 Open - close : 20 ms  
 Leaf transmission: 0.5 %  
 "Field sizes" : 1, 2.5 and 5 cm

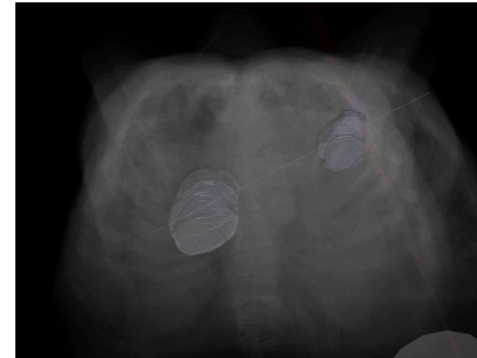


## Treatment table

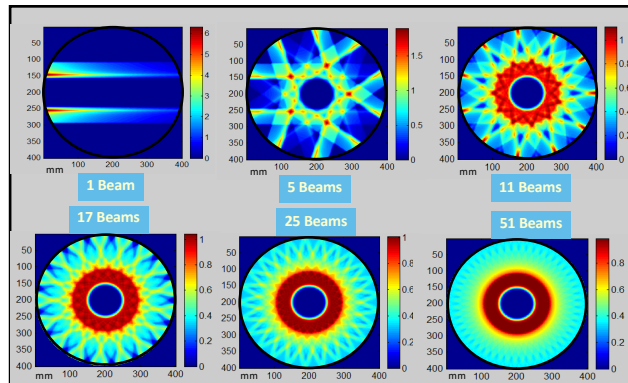
Same as CT, but flat  
 Max. treatment length: 160 cm  
 Pitch: between 0.1 and 1.5  
 Usually: 0.35 to 0.5  
 2 - 3 times same "gantry" position  
 2 - 3 times diff. leaves config.  
 → Helical irradiation  
 → IMRT !



## Irradiation

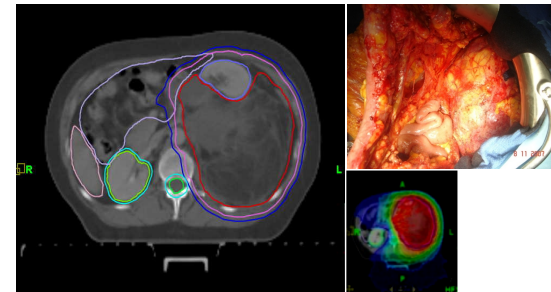


## IMRT



## IMRT


### Retroperitoneal sarcoma



Courtesy: G. Kantor, Bordeaux

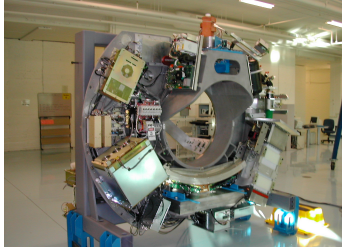



# IGRT – MVCT



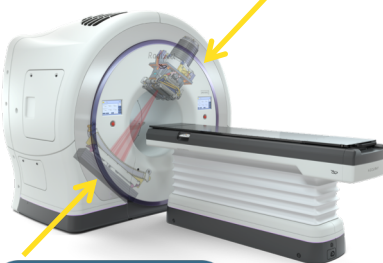
## MV detector

- High energy CT imaging system
- 738 Xe ionisation chambers
- Fan beam geometry
- Volumetric imaging of the patient
- Online acquisition of beam data during the treatment





## MVCT imaging

**3.5MV (nominal) imaging beam**




**Low absorbed dose  
1 - 3 cGy**

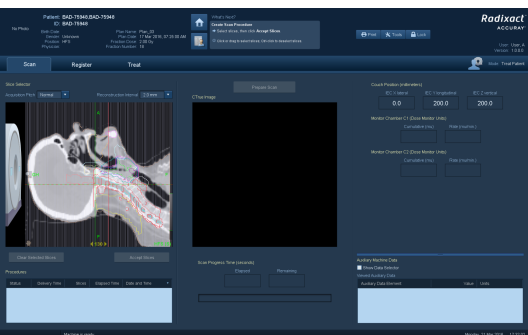
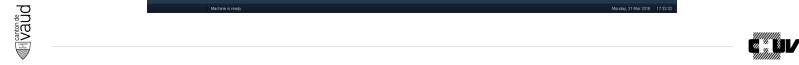


**CT imaging detectors**

Courtesy Accuray



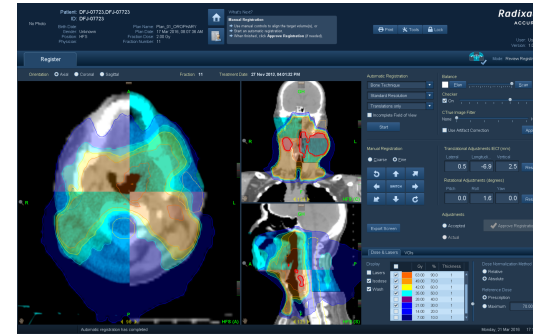
## MVCT image acquisition

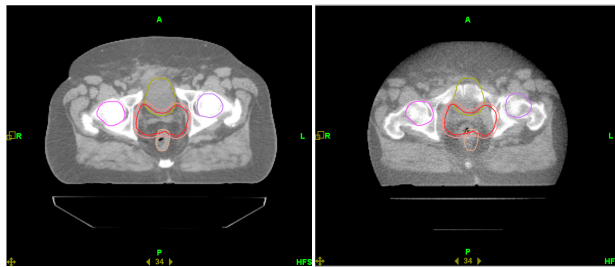
## Image registration with planning CT



## Add dose distribution and contours



## Prostate case

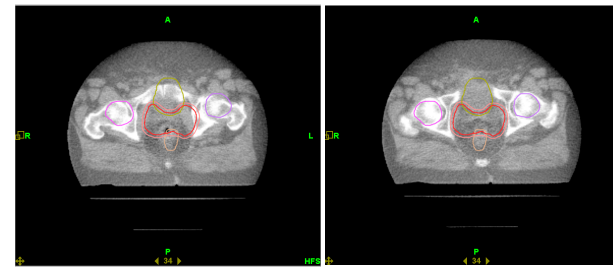


Dedicated CT

MVCT tomotherapy



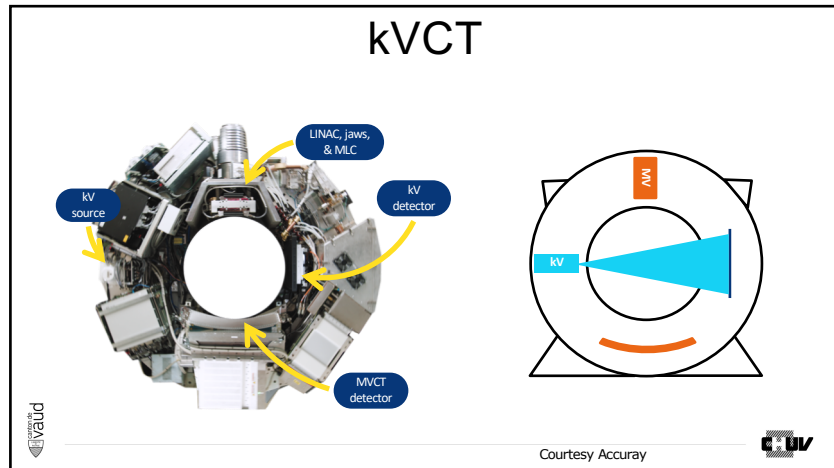
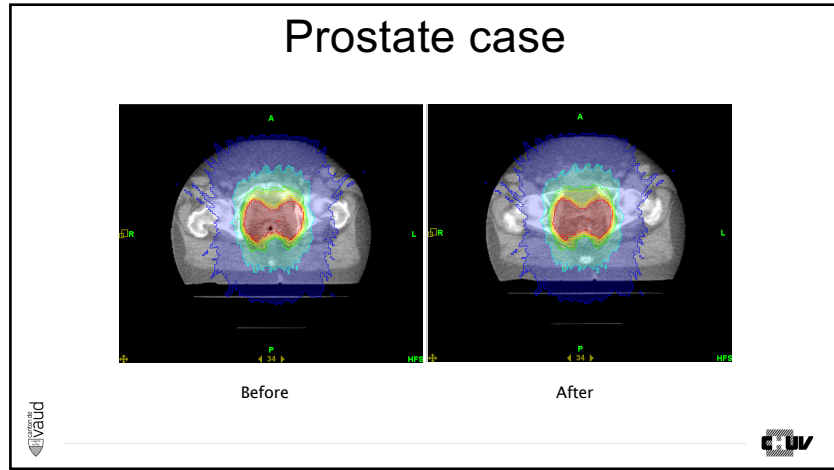
## Prostate case



Before

After

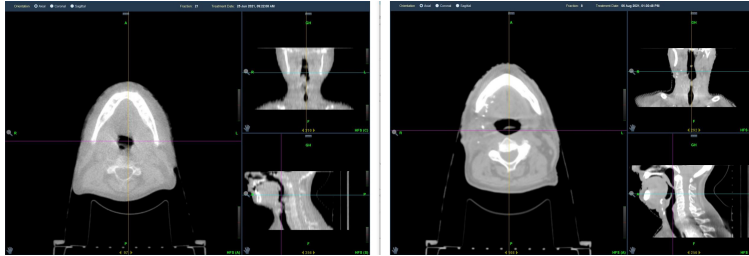




### Characteristics

<p><b>X-ray tube</b>                  40 – 150 kV                  5 – 800 mA                  Focal spot size: 0.6 or 1.2 mm<sup>2</sup>                  SAD: 104 cm                  Bowtie filter and filtration</p>	<p><b>Detector</b>                  aSi                  28.8 cm<sup>2</sup> at isocenter                  Pixel size: 150 μm<sup>2</sup>                  DQE: 76% (0 mm<sup>-1</sup>)                  MTF: 66% ( 1 mm<sup>-1</sup>)</p>
<p><b>Results</b>                  Improved image quality                  Reduced acquisition time</p>	

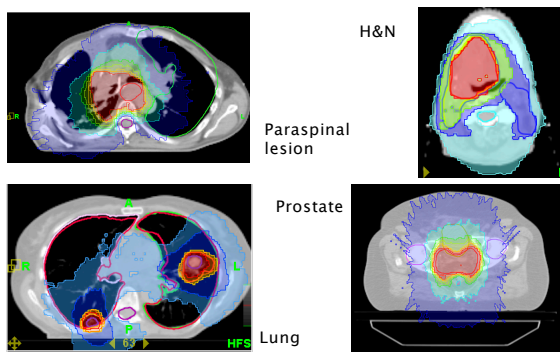
## Comparison MV - kV



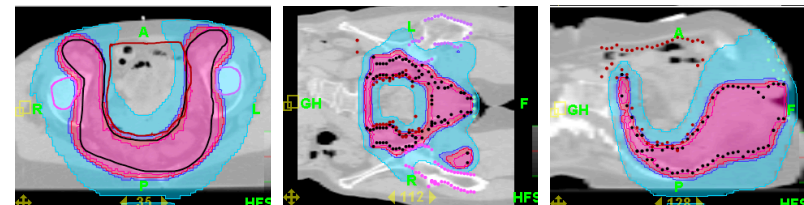
## QA

Some QA are described in SSRMP recommendations 11  
 Some QA have disappeared  
 Virtual wedges, light fields, MLC precision, electron's check, collimator, table rotation, ...  
 New QA appeared  
 Dynamic  
 Synchronisation between gantry, table and MLC

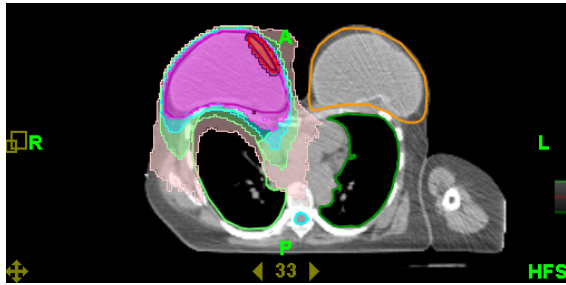
## Examples



## Anal canal



# Breast



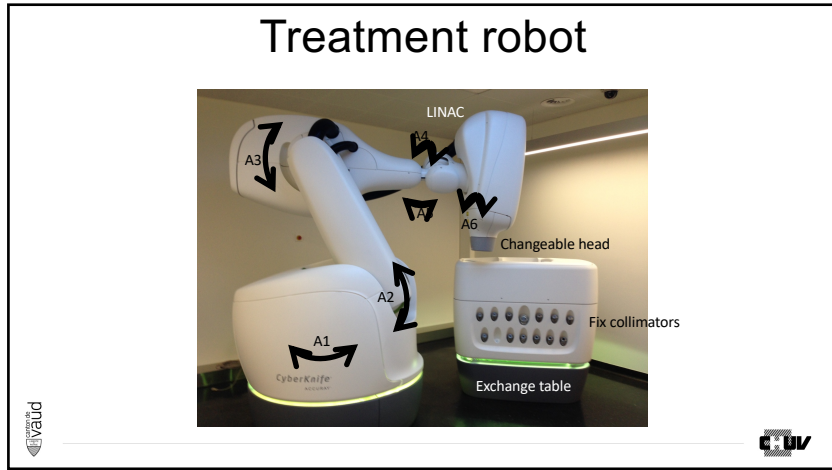
# CYBERKNIFE



# Cyberknife







### Collimators

12 fix collimators	IRIS (dodecagon)
5 mm	5 mm
7.5 mm	7.5 mm
10 mm	10 mm
12.5 mm	12.5 mm
15 mm	15 mm
20 mm	20 mm
25 mm	25 mm
30 mm	30 mm
35 mm	35 mm
40 mm	40 mm
50 mm	50 mm
60 mm	60 mm

### Collimators

**MLC**

2 banks of 26 leaves

Leave size: 3.85 mm

11.5 x 10 cm<sup>2</sup>

Full digitation

Overtravel

### Treatment planning

**3D with many beams**

Each beam starts from a node

The available nodes depend on the chosen path during optimization

Each beam incidence is corrected according to patient position

### Patient positioning

Only before the irradiation

### Patient positioning

Online correction ⇒ tracking

### Moving target – Synchrony

Correlation between external markers and target movement

↓

Synchronization of the beam movement with target movement

### Synchrony – Correlation model

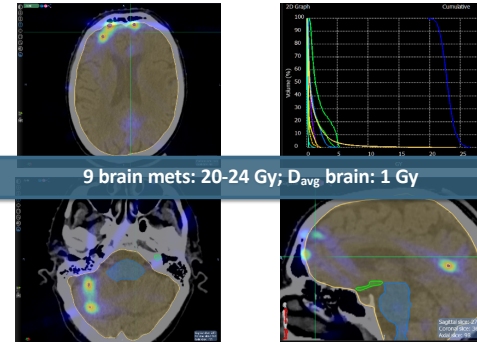
Patient on table  
Creation of correlation model

Model update during treatment

### Synchrony – Correlation model



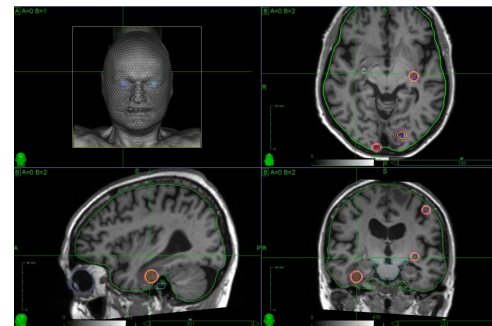
### Clinical example



### Melanoma – 8/2015 4 mets



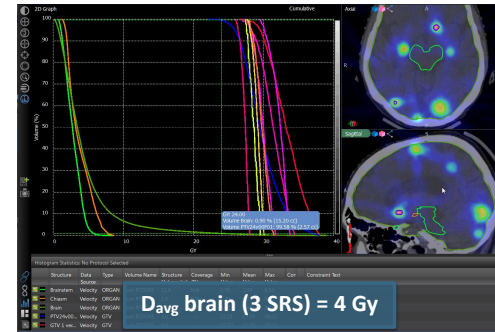
### Melanoma – 10/2015 5 mets



## Melanoma – 12/2015 9 mets



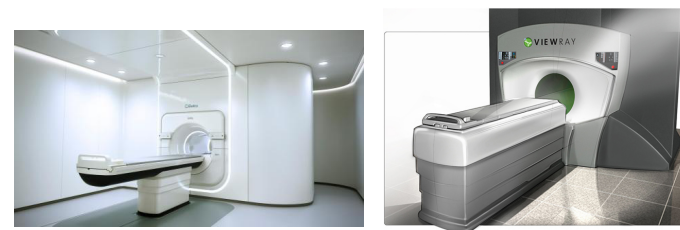
## Composite dose of 3 SRS



## MR LINAC

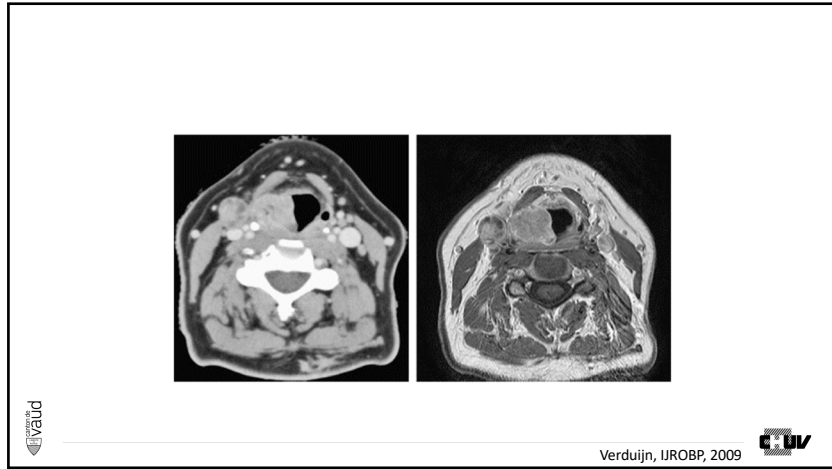


## Online MR imaging



Courtesy Elekta & ViewRay





## SWOT analysis

<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>Improved image quality</li> <li>Cross-sectional images</li> <li>On-board functional imaging</li> <li>No dose</li> </ul> <p><b>Weaknesses</b></p> <ul style="list-style-type: none"> <li>Money</li> <li>Fraction time</li> <li>Magnetic field</li> <li>Bore size</li> </ul>	<p><b>Opportunities</b></p> <ul style="list-style-type: none"> <li>New workflow</li> <li>On-line adaptive RT</li> <li>Motion monitoring during irradiation</li> </ul> <p><b>Threads</b></p> <ul style="list-style-type: none"> <li>Workflow and software</li> <li>Intra-fraction motion</li> <li>Patient selection</li> <li>Staffing</li> <li>Evidence of clinical benefit</li> </ul>
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Van Herk, 2018

## FLASH RT

## What is FLASH RT ?

Ultra high dose rate (UHDR) beam to trigger FLASH effect

Biological effect

**No biology, no FLASH (only UHDR)**

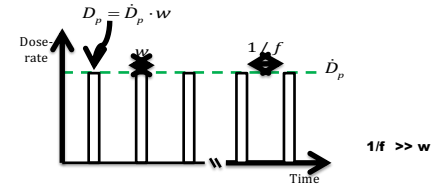
Increase in **differential response** between normal tissue and tumors

**Short treatment time (<1s)**

Motion management, i.e. remove intra-fraction motion



## Beam structure



$w$	pulse width	$[0.5 - 2.2] \mu s$
$f$	pulse repetition frequency	$[10 - 200] Hz$
$\dot{D}_p$	dose-rate in pulse	$[10^3 - 5 \cdot 10^4] Gy / s$
$D_p = \dot{D}_p \cdot w$	dose per pulse	$[10^{-3} - 5] Gy$
$\dot{D}_m = \dot{D}_p \cdot w \cdot f$	mean dose-rate	$[10^2 - 1000] Gy / s$



## FLASH RT

	CONV	FLASH
Dose rate	$\sim 10^{-1} Gy/s$	$> 100 Gy/s$
Dose per pulse	$\sim 10^{-4} Gy$	$\sim 10 Gy$
Time for dose delivery	$\sim 10^2 s$	$< 10^{-1} s$



## Reference dosimetry

### Five different dosimeters

Films



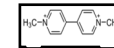
Ionization chamber



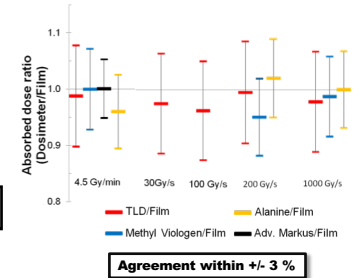
TLD



Methyl viologen

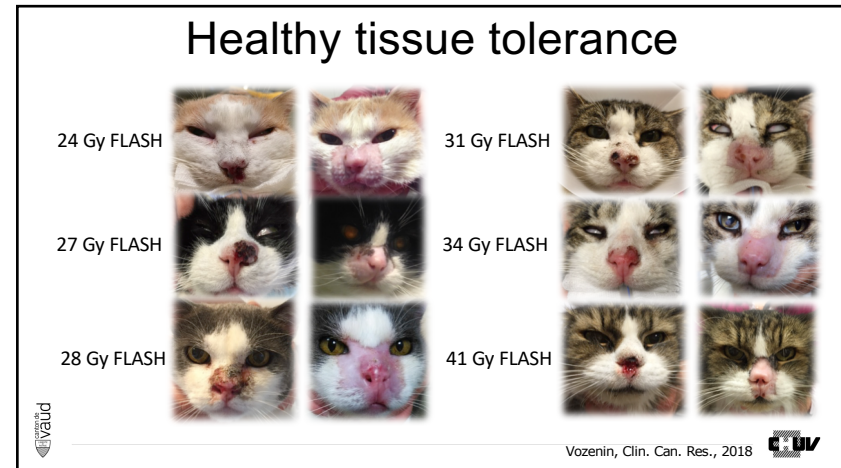
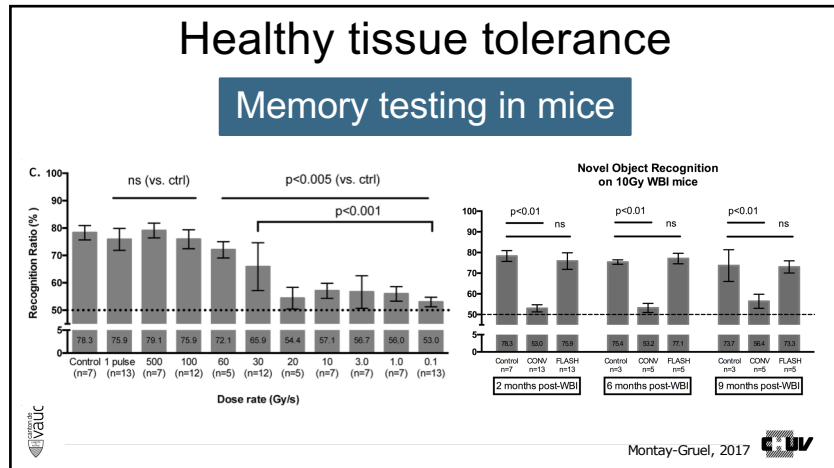
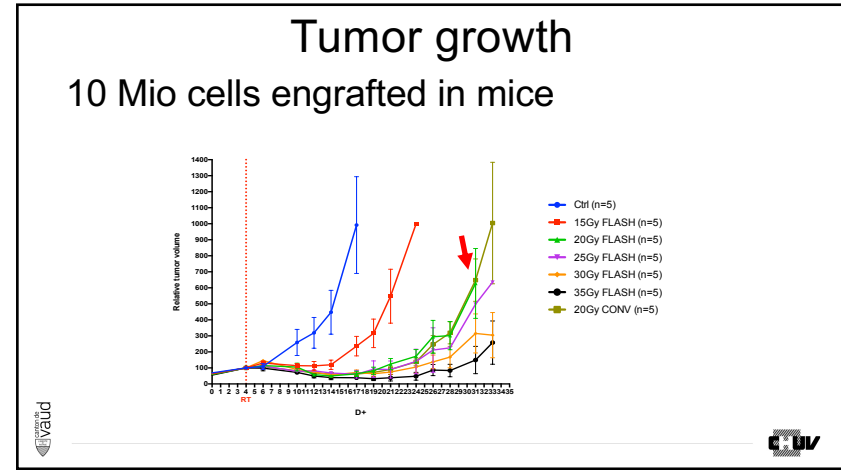
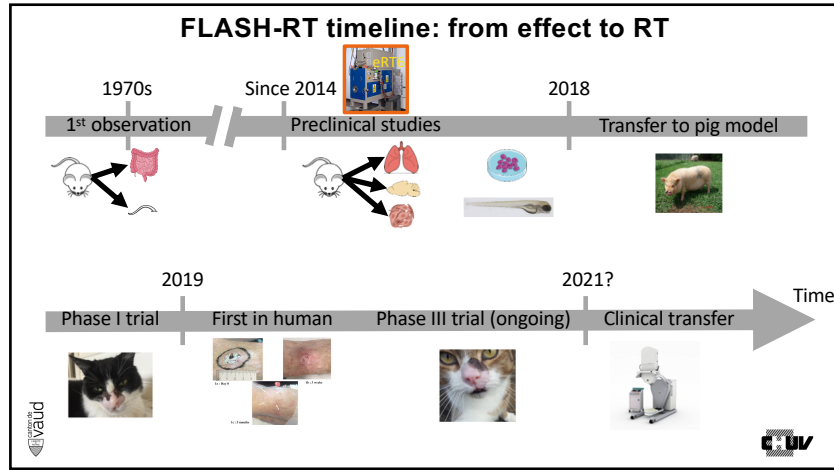


Alanine

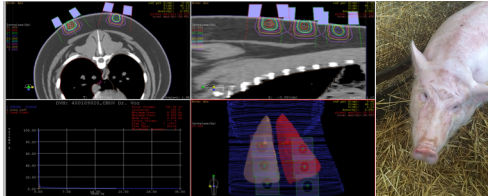


Jaccard, 2017, Petersson, 2017; Gondré, 2020






## Pig irradiation




34Gy 31Gy 28Gy

Conv



FLASH



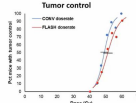
Vozenin, Clin. Can. Res., 2018

## TCP / NTCP differential

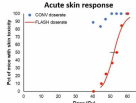
ESTRO2022 Radiobiology Best Paper: Differential effect of PBS Proton FLASH on tumor co... Room D3

### Radiation induced Fibrosis

**Tumor control**



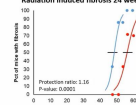
**Acute skin response**




**Mice included in fibrosis assay**

Dose	FLASH	ED05
4.4	0	0
6.6	0	0
8.8	4	3
11	5	7
14	9	7
16.6	7	9
18.8	10	10
21	10	10
Total	35	36

**Radiation induced fibrosis 24 weeks after radiation**






**ESTRO2022**  
Bita Singers SØRENSEN  
(DENMARK)


Singers Sørensen, 2022

## First patient


Cutaneous lymphoma, 15 Gy single dose  
10 pulses, 1 μs, 90 ms




1a : Day 0



1b : 3 weeks



1c : 5 months



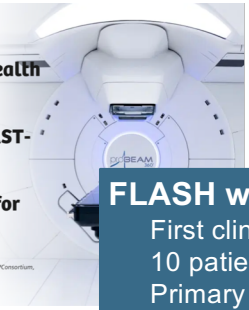
Bourhis, 2018

## Clinical trial

Press Release

**Varian and the Cincinnati Children's/UC Health Proton Therapy Center Complete Enrollment of FAST-01, First Human Clinical Trial of FLASH Therapy for Cancer**

This trial, designed in collaboration with the FlashForward™ Consortium, launched and treated first subject in November 2020. Published by Varian, a Siemens Healthineers company. Published October 2021



FLASH with protons

First clinical trial completed  
10 patients  
Primary endpoint: workflow feasibility  
To date, no serious adverse event

16



## Clinical trial




### IntraOp Announces First Patients Enrolled in FLASH Clinical Trial

July 08, 2021

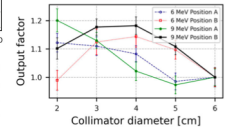
IntraOp Medical Corporation announced today that [Lausanne University Hospital \(CHUV, Switzerland\)](#) enrolled the first patients in the **Impulse Trial: A phase I dose-escalation study of high dose rate radiotherapy with electrons in patients with skin metastases from melanoma**. The trial is a key milestone for the groundbreaking research collaboration agreement between IntraOp and the CHUV, executed in 2020. The Impulse Trial is the first in the world to evaluate the potential of leveraging the biological phenomenon known as the "FLASH Effect" to provide radiotherapy with curative intent to radio-resistant cancers.





## Beam commissioning




Position	A (PW, 4 µs, PRF, 60 Hz, 2 patients)	B (PW, 4 µs, PRF, 60 Hz, 7 patients)
Energy (MeV)	6	9
Film dose (Gy)	16.9 ± 0.2	18.7 ± 0.1
Alkalin dose (Gy)	20.9 ± 0.2	23.6 ± 0.4
Alkalin dose (Gy)	16.6 ± 0.2	18.3 ± 0.1
Difference (%)	1.8	2.2
Dose per pulse (Gy)	8.5	9.2
	3.0	3.3




Moeckli, 2021 

## Beam commissioning

Test and frequency	Method	Tolerance
<b>Daily</b>		
Output constancy	Daily check setup	3%
Energy constancy	Daily check with 2 cm additional water slabs	2 mm shift in depth dose
Door interlock	Run an irradiation in CONV mode and open the door	Functional
Mechanical motion	Manual and visual check	Functional
Docking system	Manual and visual check	Functional
<b>Monthly</b>		
Output constancy	Daily check setup, ten measurements per mode	2%
Energy constancy	Daily check with 2 cm additional water slab, ten measurement per mode	2 mm shift in depth dose
Flatness and symmetry constancy	Profile at maximum depth comparison	3%
<b>Annually</b>		
Beam output; Definitive calibration	Reference dosimetry with alanine and films	2%
Depth dose curve for all collimators	Same setup as for commissioning	2%/2 mm
Dose profiles; Extensive checks	Same setup as for commissioning	3%
Output factors	Same setup as for commissioning	2-3%
Linearity of the dosimetry system	Same setup as for acceptance	1%

Moeckli, 2021 



## Beam commissioning

How to do the measurements ?


Limitation comes from radiation protection


Just to fix ideas

CHUV: ~ 1'200 patient / year

How long is the beam on time in UHDR ?

About 5 minutes !

Moeckli, 2021 





**A phase I dose finding study of high dose rate radiotherapy in patients with skin metastases from melanoma**

Current level

Dose level	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6	Level 7
Dose	22 Gy	24 Gy	26 Gy	28 Gy	30 Gy	32 Gy	34 Gy

2,2 Gy / pulse → 3.4 Gy / pulse

10 pulses, 100 ms

