

Principle and Practice of Image-Guided SRS/SRT

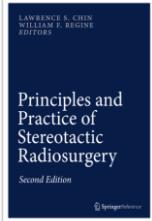
Lijun MA, PhD, FAAPM

Professor In Residence
CAMPEP Residency Program Director
UCSF Radiation Oncology
San Francisco, California, USA



Moving What for SRS/SRT ?

- | | |
|--|---|
| Beam <input type="checkbox"/> | Skull <input checked="" type="checkbox"/> |
| Beam <input checked="" type="checkbox"/> | Skull <input type="checkbox"/> |
| Beam <input checked="" type="checkbox"/> | Skull <input checked="" type="checkbox"/> |
| Beam <input type="checkbox"/> | Skull <input type="checkbox"/> |



State-of-the-Art Platforms



Ideal Design for SRS/SRT

- Short source-focal length (minimizing penumbra)
- Multi-isocenter capability (central targeting)
- High number of beams (sharpening dose gradient)
- No translation and rotation uncertainty (robust tx)

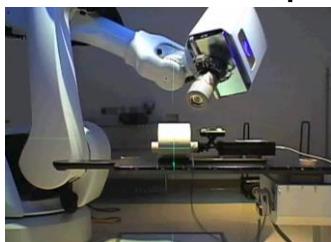
Classic SRS/SRT Example: LGK



Courtesy of
Elekta AB
2006



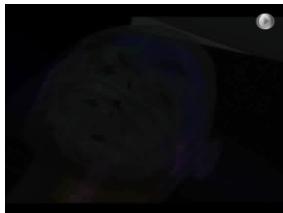
Robotic SRS/SRT Example: CKS



Courtesy of
Dr. Chris
McGuinness
UCSF



VMAT-based SRT/SBRT Example

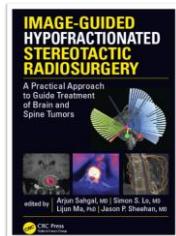


- FFF driven output
- HD MLC
- Variable Gantry Rotations

Courtesy of
Varian Oncology

Imaging Guidance + Hypofractionation

- High precision delivery leveraging the power of image guided 6DOF alignments
- Hypofractionation leveraging enhanced biological effects



Radiobiological Rationales

- Single fraction

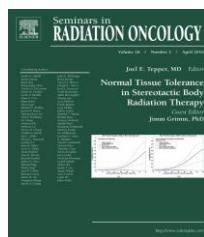
Small Lesion, No 4Rs

- Hypofractionation

Larger Lesion;
Reoxygenation &
Reassortment



Hypofractionation Tissue Effects in Clinic (HyTEC)

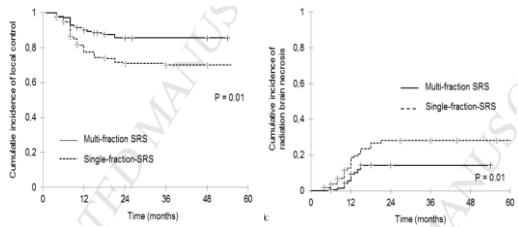


Hypofractionated Brain Mets SRS/SRT

| | 1 x 15-18 Gy | 3 x 9 Gy | p |
|------------|--------------|-----------|-------|
| Pts | 151 | 138 | |
| Mets | 1-4 | 1-4 | ns |
| GTV (cc) | 9 (3-24) | 13 (4-48) | 0.001 |
| LC (12 mo) | 77% | 90% | 0.01 |
| RN (12 mo) | 18% | 9% | 0.01 |

Minniti G et al, Int J Radiat Oncol Phys 95(4)1142-8 July 15, 2016

Results



Minniti G et al, Int J Radiat Oncol Phys 95(4)1142-8 July 15, 2016

GOLD STANDARD REDEFINED

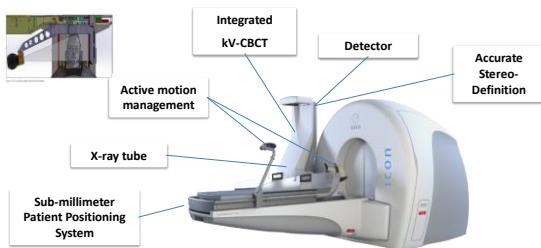


*Precision
SRS/SRT
via Online
Adaptive Dose
Control*

US Arrival: Spring 2016

Courtesy of Elekta AB

Physical Characteristics



Major Workflow Features

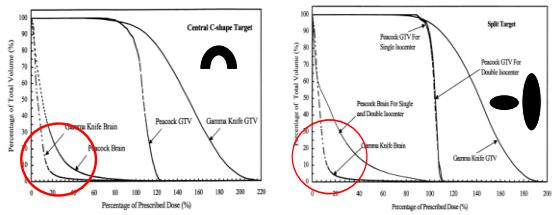


- IMMOBILIZATION**
 - frame or frameless
- TREATMENT PARADIGM**
 - single session or fractionation
- TARGET TYPE**
 - volume, number and location
- CLINICAL MODE**
 - radiosurgery or ultra-precise microradiosurgery

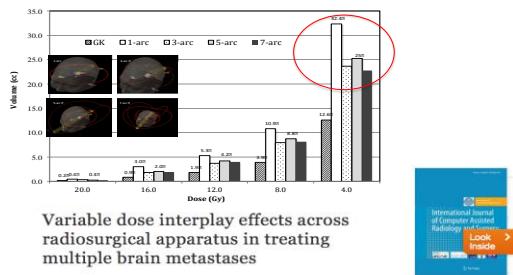
Maintain Focusing and Normal Brain Sparing Advantage



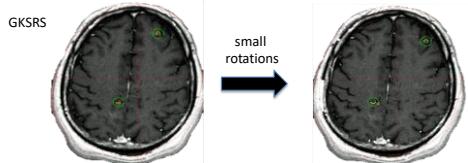
Low-Dose Spillage Effect



Multiple Targets: Multiplied Effect



Rotational Misalignment Issue



VMAT
Physical Contribution
Single-Isocenter Multiple-Target Stereotactic Radiosurgery:
Risk of Compromised Coverage

Justin Ropner, PhD*, A. Vorakarn Charunyavich, PhD*, Gregory Betzal, PhD*, Jeffrey Seltzerko, PhD†, Annes Dhabaan, PhD*

Summary

- Image-guided FFF-based modulated beam delivery (e.g. VMAT) has dominated linac-based SRS/SRT
- Image-guided GK Icon is redefining the gold standard for ultra-precise intracranial SRS/SRT

