

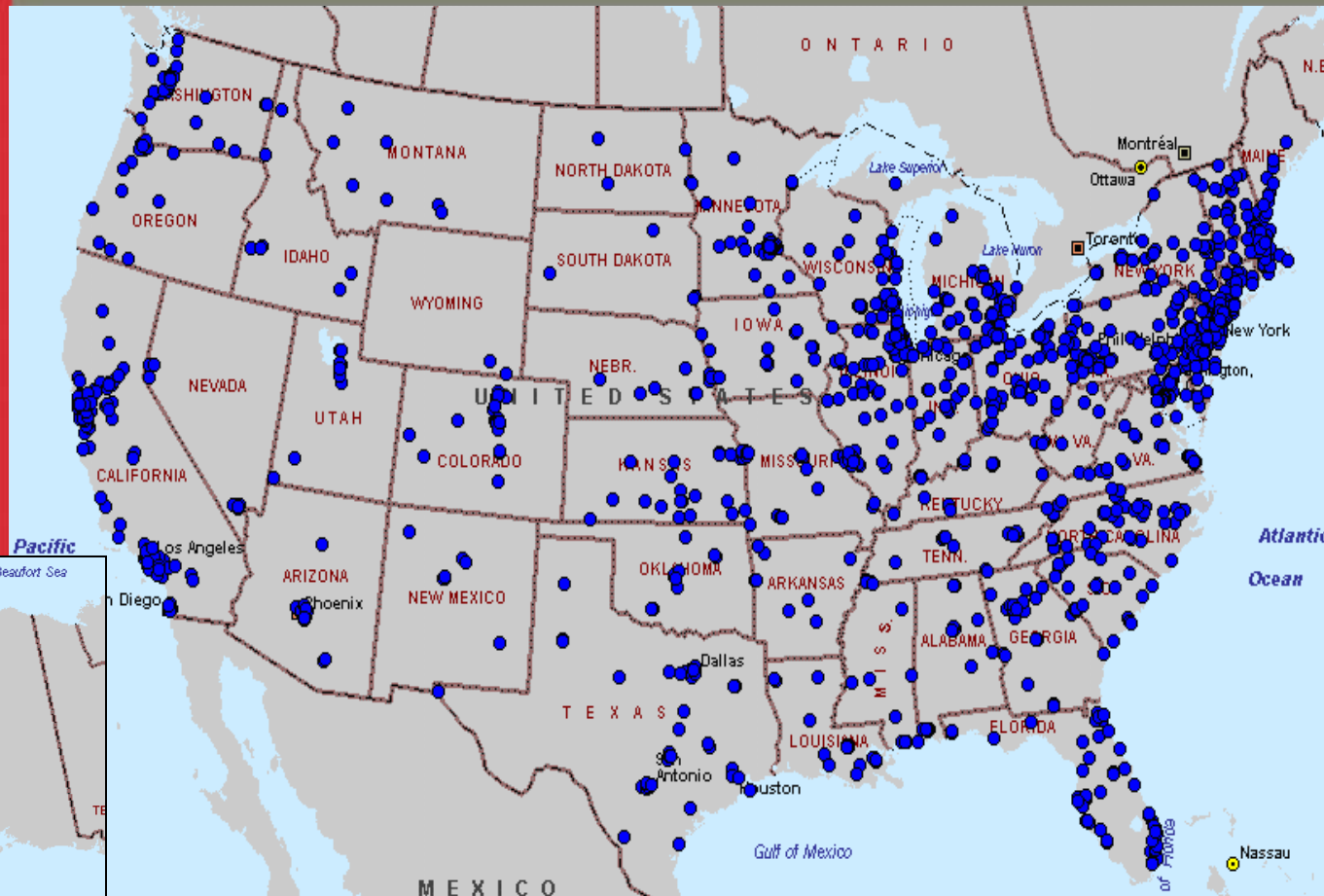
Radiation Oncology Technology Exploration and Quality Assurance in Clinical Trials

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Objectives

- Describe NCI's Initiative to revamp the clinical trial system
- Present an overview of a proposed Imaging Radiation Oncology Core (IROC) services Group
- Describe the proposed Center for Innovative Radiation Oncology (CIRO) of NRG
- Introduce clinical trial technological exploration and quality assurance science

Overview of the Current Program



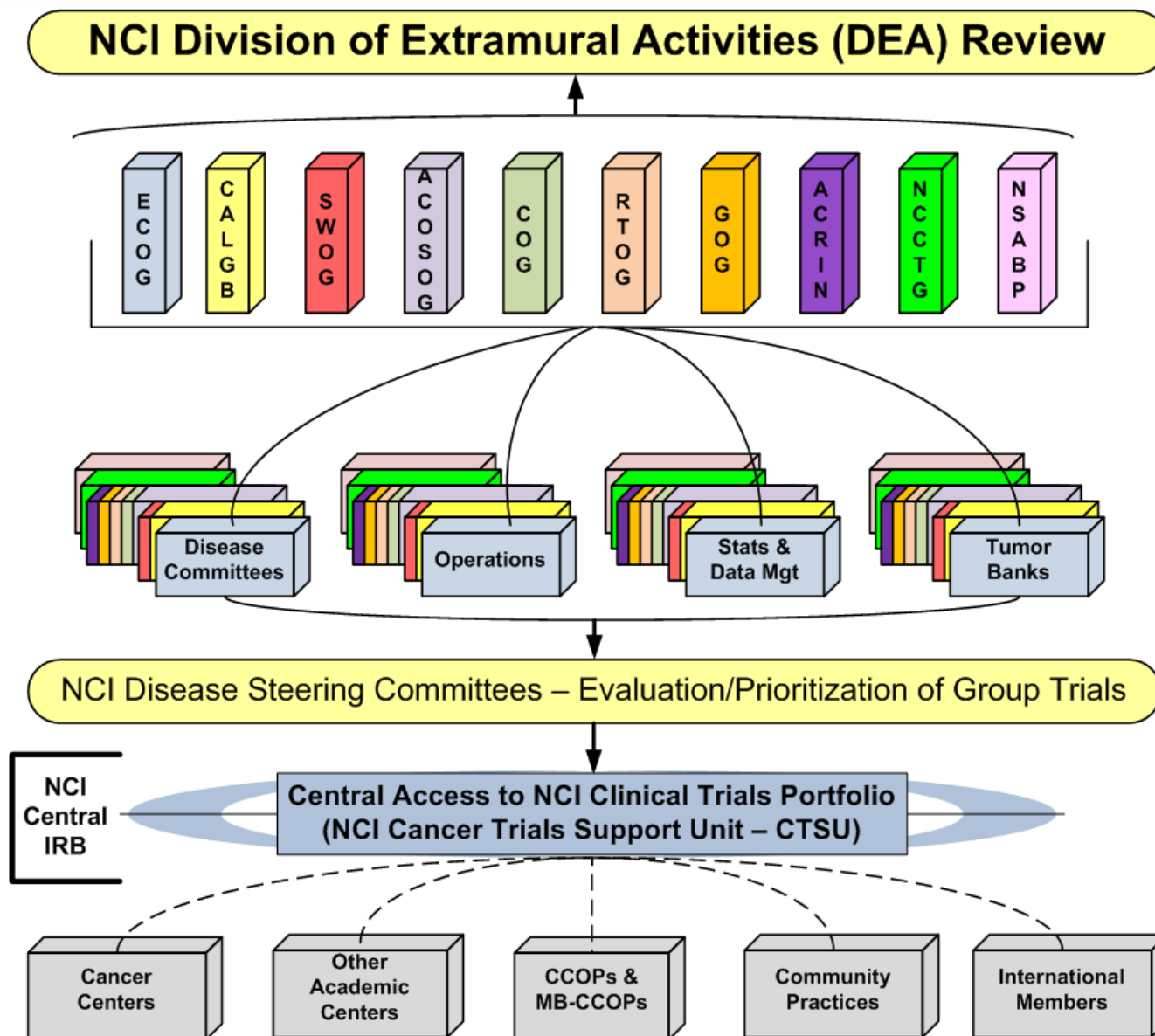
**3,100
Institutions**

**14,000
Investigators**

**About
25,000 pts
enrolled on
tx trials
annually**

Trials	FY2006	FY2007	FY2008	FY2009	FY2010	Accrual Distribution: Phase 3: 83.4% Phase 2: 15.1% Phase 1/Pilot: 1.5%
All Phases: Treatment Trials	27,667	24,715	25,784	29,285	23,468	

Structure of Program: As of January 2011

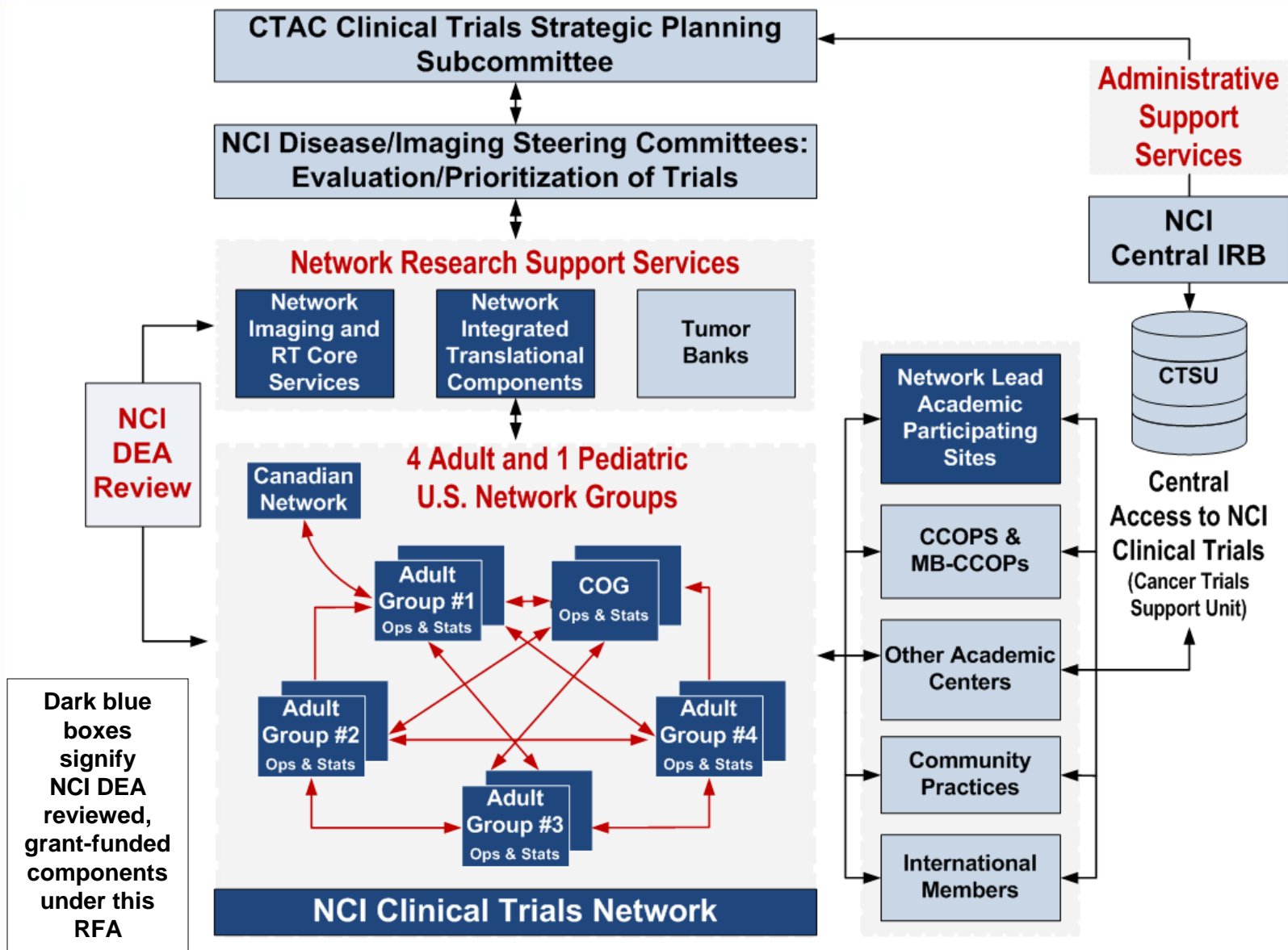


Rationale for Transforming Current Program:

How Will Consolidated Network System Help?

- **Consolidate infrastructure to gain efficiencies (e.g., IT, Regulatory, Administrative, Tissue Resource Management)**
- **Consolidate Imaging & RT core services to benefit entire Network**
- **Integrate new components into trials to provide value-added research questions (e.g., advanced imaging, translational science)**
- **Integrate new agents into trials**
 - **Ex:** Erlotinib, crizotinib, & ipilimumab are being integrated into trials in earlier stages of lung cancer & melanoma treatment requiring screening large populations & combining the agents optimally with surgery, RT, and immunotherapy
- **Evaluate new agents in molecularly-defined disease subsets**
 - **Ex:** Even for common diseases such as breast cancer, # of molecularly-defined patient subsets is increasing & there is a need for trial prioritization evaluating multiple new agents with standard regimens across subsets to avoid duplication & optimize accrual

Introducing A New Organizational Structure NCI Clinical Trials Network





IROC

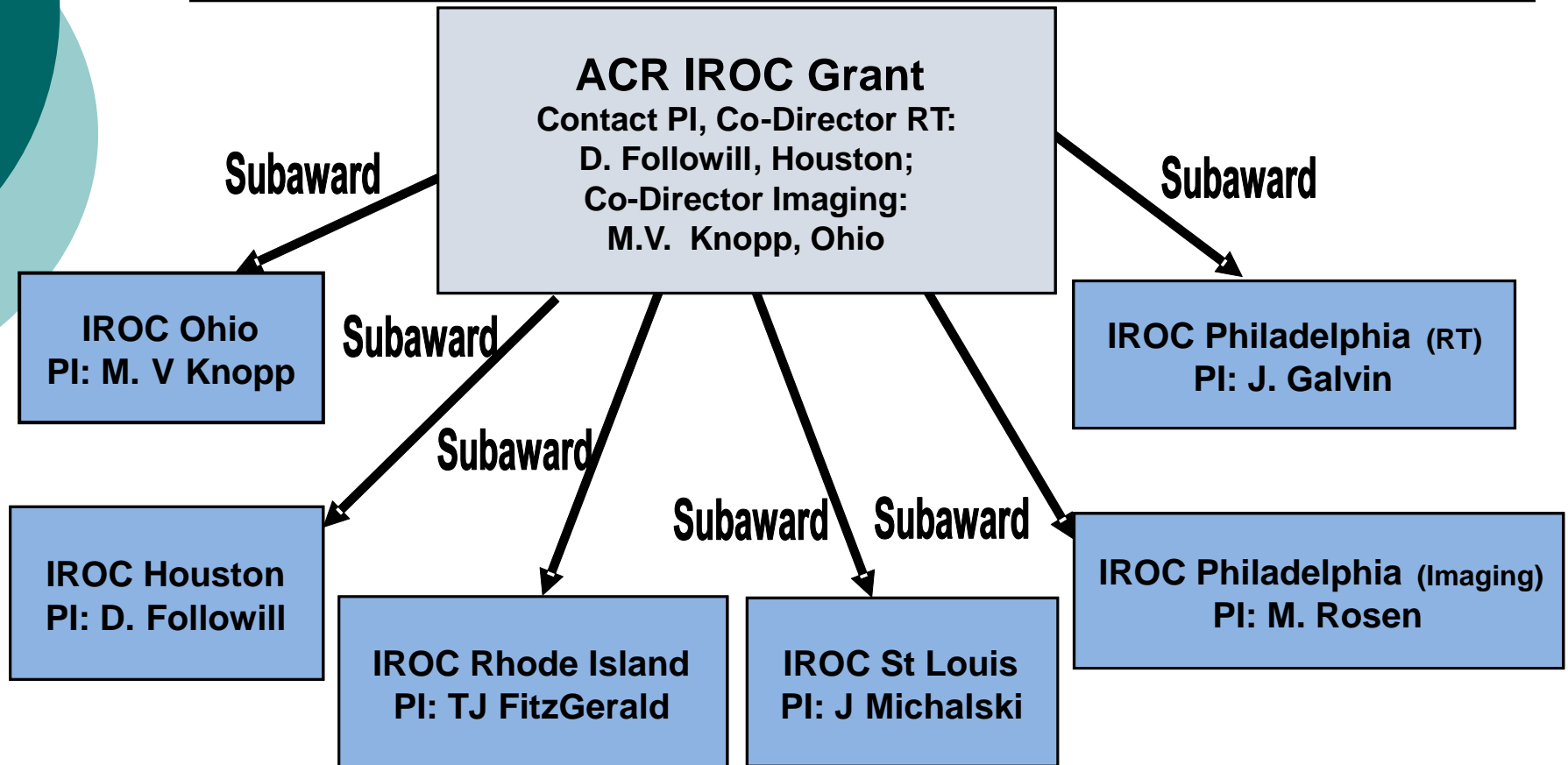
*Imaging and Radiation
Oncology Core Group*



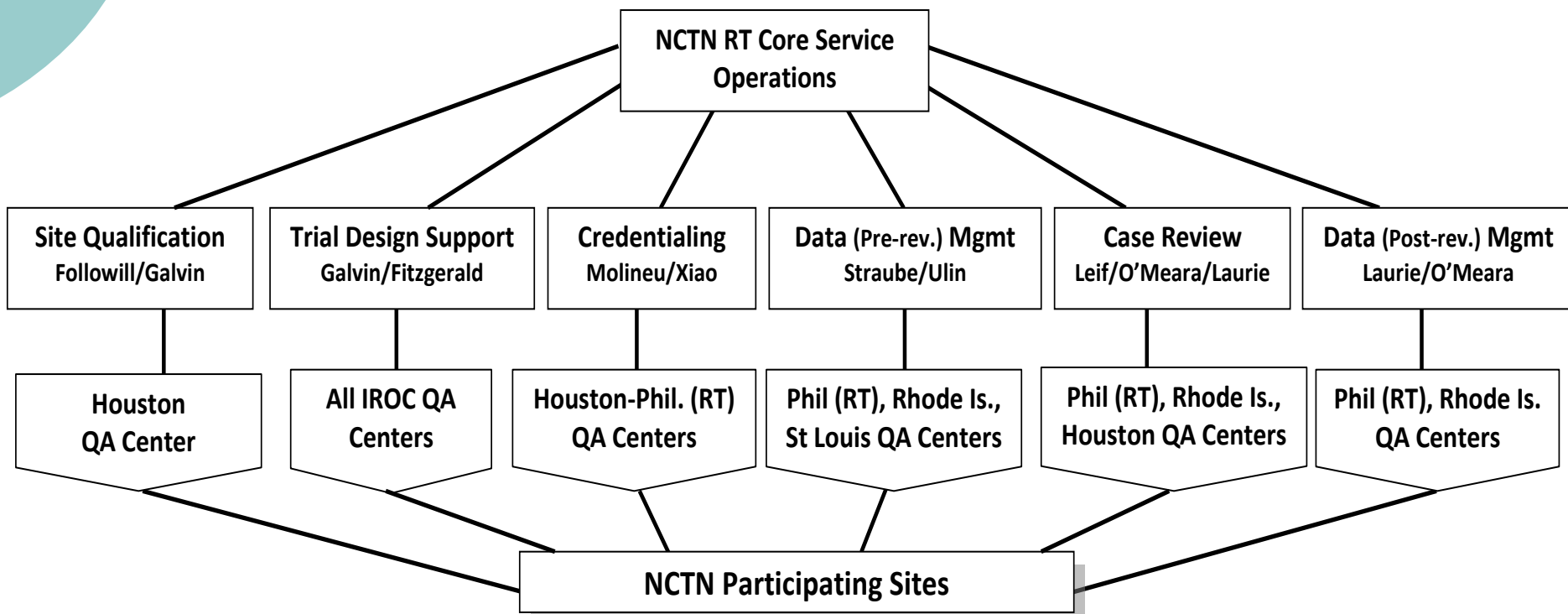
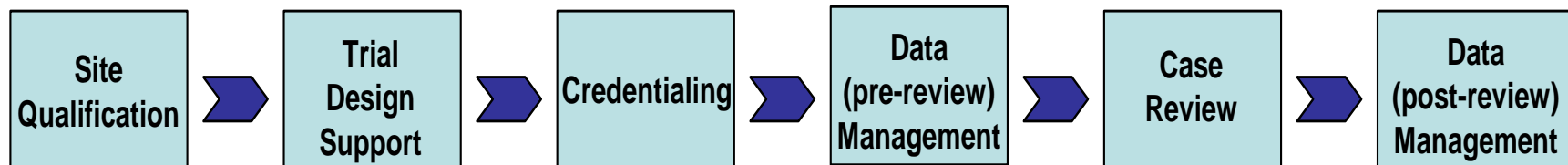
IROC Mission

Provide integrated radiation oncology and diagnostic imaging quality control programs in support of the NCI's NCTN Network thereby assuring high quality data for clinical trials designed to improve the clinical outcomes for cancer patients worldwide

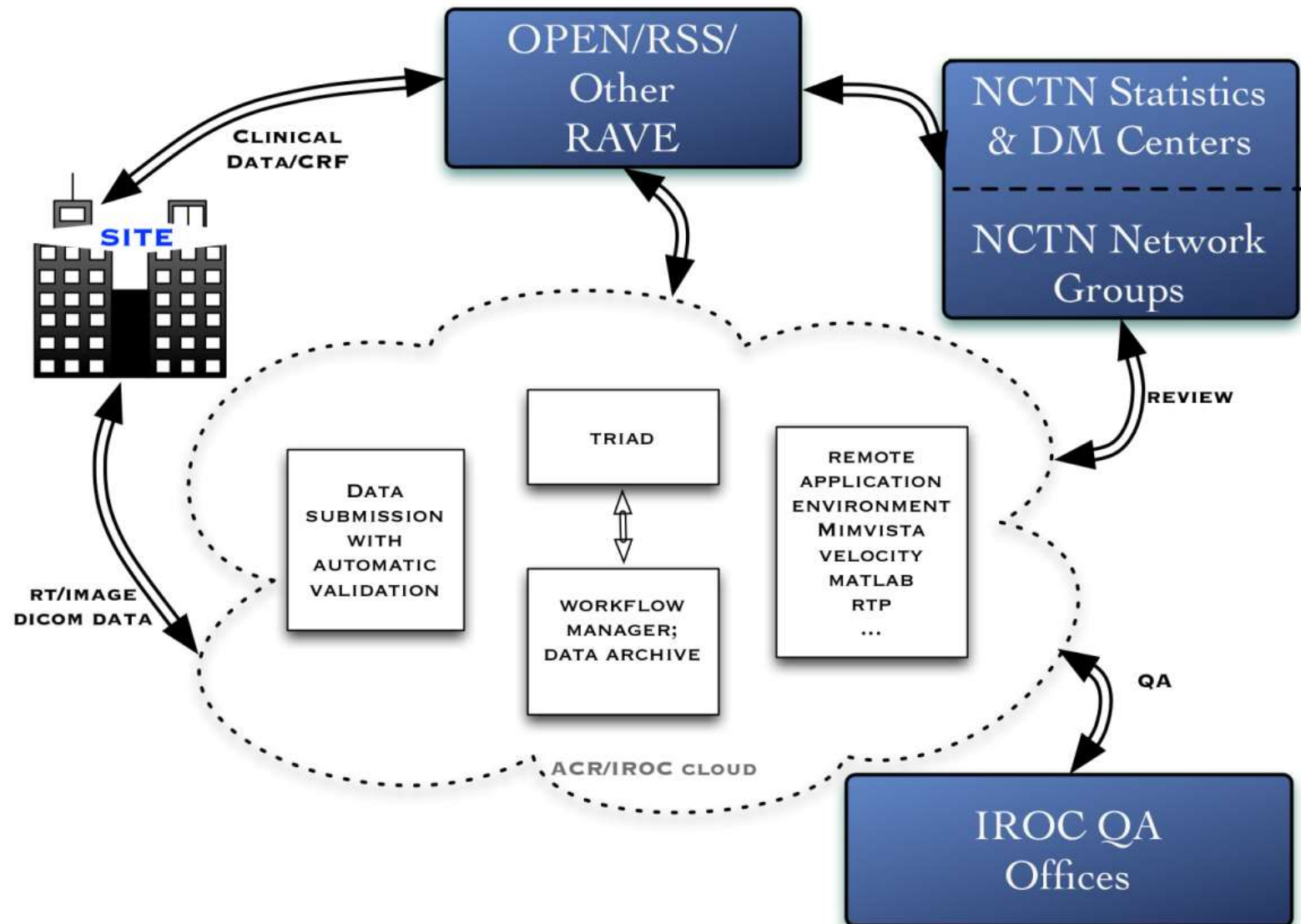
Members of IROC



IROC's Five General NCTN Core Services



The ACR/IROC Cloud



Example: Data Submission via TRIAD

The screenshot displays the TRIAD Clinical Trials web application. The interface is divided into several sections:

- Top Navigation:** Includes a menu bar with "File", "Actions", and "Help". On the right, there are links for "Logout", "Site User 1", "Choose DICOM Viewer", and "QC Viewer".
- Left Sidebar:** Contains tabs for "Submission" and "Submission History". Under "Submission", there are sections for "Site & Trial Information" (with a dropdown for "University of Pennsylvania Medical Center" and "Site Number: 2201") and "Project and Group Details" (with a dropdown for "RTDG 539 - Meningioma Ph II Feasibility IMRT to").
- Main Content Area:**
 - Submission Header:** "CT Submission for Site: University of Pennsylvania Medical Center(2201) and Trial: Meningioma Ph II Feasibility: IMRT for IntHigh-Risk, Observation for Low-Risk(539)".
 - File Selection:** Buttons for "Choose Files From Computer" and "Choose Files From PACS". Below these are "Choose Files" and "Choose Folder" buttons.
 - Submission Queue Table:** A table with columns: "DICOM Study ID", "Study Description", "Study Date", "Image", "Study Time", "Modality", "Accession Number", and "Attachment". It lists four entries with checkboxes for selection.
 - Non-DICOM File Type Table:** A table with columns: "Non-DICOM File Type", "File Name", "File Size", and "Open".
- Bottom Section:** A "Submission Queue" table with columns: "Subject ID", "Time Point", "Time Point Description", "Submission", "Site Name", "Trial Name", "Patient Name", "Study Description", "Study Date", "Series Count", "Total Files", "Total File Size", "Anonymize", "Validate", "Upload", and "Action".

Automated Validation

Validation Result

Study IDStudy DescriptionStudy DateStudy TimeAccession Num

9245/24/2012

Series Instance UIDSeries DescriptionSeries NumberModality

1.3.6.1.4.1.22213.2.38869.3RTStruct from rtag conversion2RTSTRUCT

RuleTagExpected ValueActual ValueResult

Patient Check(0010,0040)PatientsSexequal M✗

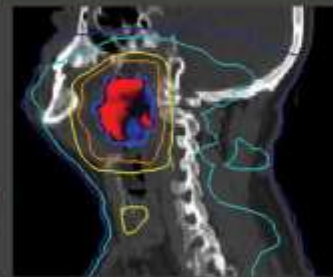
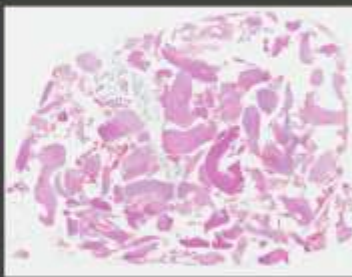
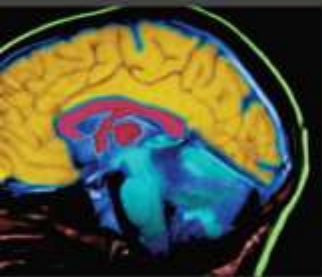
Rule2(0018,1152)Exposureinbetween 200 - 240✗

Check All ROI Values(3006,0020)StructureSetROISequenceMust have all the values:
CTV1,
RECTUM,
BLADDERBLADDER,
CTV1,
CTV2,
FEMUR_LT,
FEMUR_RT,
PENILE_BULB,
PTV1,
PTV2,
RECTUM,
SEM_VES,
SKIN,
TABLE_2✓

Close

Summary

- IROC RT QA centers have decades of experience/ knowledge and infrastructure.
- Protocol review as early as possible is critical to establishing appropriate QA procedures.
- Patient case reviews require IROC and Groups to work together.
- RT and Imaging to work closely together.
- Collaboration and feedback from NCTN Groups is required.
- Groups to have complete accessibility to data.



NRG Oncology Center for Innovation in Radiation Oncology (CIRO)

Aims of CIRO

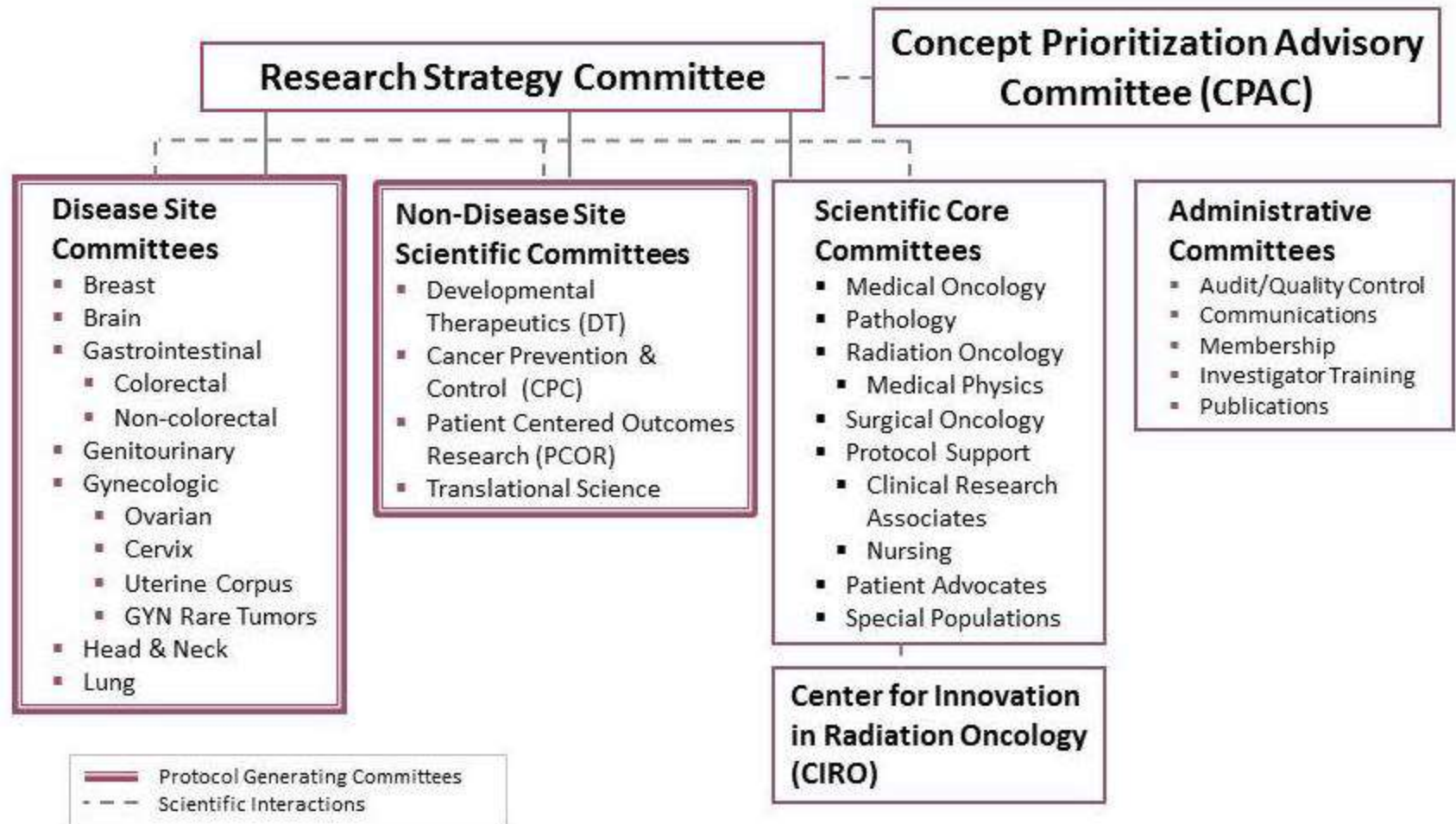
1) Promote innovative RT research within the entire NCTN

- Accelerate the testing of new radiation oncology innovations in NCTN clinical trials in all groups
- Facilitate the application of innovations across all appropriate protocols

2) Foster intergroup collaboration and protocol harmonization in terms of inclusion and description of RT techniques and delivery devices

- Reduce timelines for development of new protocols
- Improve the clarity of NCTN protocols

NRG Committee Structure



CIRO

- 1) Radiation Oncology Committee
- 2) Medical Physics Subcommittee
- 3) Staff

Medical Officer

Technical Officer

Support Staff

- 4) Statistical and Data Management Liaison

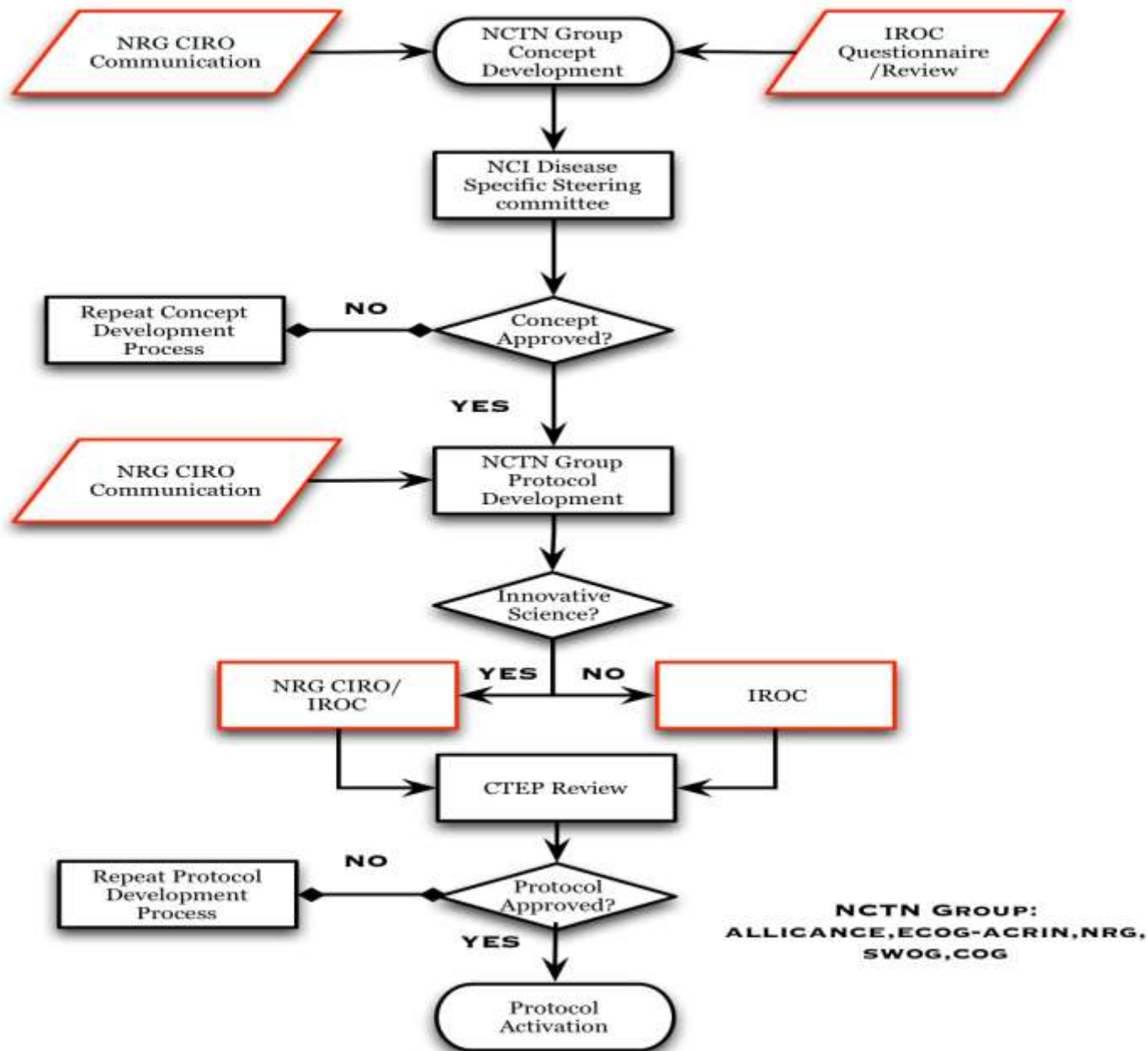
Medical Physics Committee Membership Structure

- Disease site liaisons
 - Leading member to report @ conference/meeting
- Intergroup, QA core liaisons
 - Leading member to report when requested
- Modality/technology liaisons (Working Group)
 - Leading member to report when requested
- Bio-informatics liaisons (WG)
- Industry liaison(s) (ad hoc guest)
- International liaison(s) (ad hoc guest)
- NCI and Staff liaison(s) (Data Manager, Protocol, Statistics)
(invited talk on a rotating basis)

Professional Commitment

(Missions, Job Description)

- Interface with disease site committees as liaisons
 - Cover disease site conferences and face-to-face meetings
- Interface with intergroup, QA core and NCI
- Serve as Physicist PI on protocols
 - Overall protocol design and development
 - Specific responsibility for technical RT aspects and QA considerations
- General Responsibilities
 - Prospective identification of physics/QA objectives in new trials
 - Aid in creation of RT clinical Trials protocol templates
- Interface with Vendors of Technologies as needed
- Monthly conference
- Bi-annual NRG face-to-face meetings



SDMC Collaborations

- Support design and implementation of innovative radiation oncology technologies
- Pursuit of innovative prospective designs to evaluate radiation therapy quality assurance (RTQA) as part of clinical trials
- Collaborate on predictive model building for radiotherapy and quality assurance

Quality Assurance Science and Vision

Adaptive QA;
Investigation into QA efficiency and efficacy;
collaboration with Imaging QA;
collaboration with NCTN group;

Future Quality Assurance

- Prospective QA trials, independently or as part of a clinical trial, with adaptive statistical design
- Retrospective QA data analysis for efficacy and efficiency

Thank You