# **Clinical implementation of Electronic Brachytherapy (eBT)**

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### **Disclosures**

#### Speaker for ELEKTA

### **Current eBT systems**

- Intrabeam<sup>®</sup> by Zeiss Surgical
- Xoft<sup>®</sup> by Icad Inc.
- Esteya<sup>®</sup> by Elekta
- SRT-100<sup>™</sup> by Sensus Healthcare
- Photoelectric Therapy by Xstrahl Ltd
- Papillon (UK only) by Ariane Medical Systems Ltd

Good reference:

Eaton DJ. Electronic brachytherapy-current status and future directions. Br J Radiol 2015;88: 20150002

### Implementation of eBT program

# Items to consider for the eBT program

- Room
- Staff/coverage
- Equipment
- Regulatory items
- Acceptance testing
- Commissioning
- Policy and procedures
- QM program
- Staff training
- End to end case (With all staff involved)

### **Room selection**

- Accelerator room (1)
- Sim room (2)
- Exam room (3)
- others

# Staffing

- Similar to HDR Brachytherapy staffing
- Dermatologists are purchasing these to be used in their offices (Potential issues with staffing, Q.A., patient safety)

# Equipment

- Delivery system and accessories
- Equipment to perform commissioning
- Door interlock system, A/V, intercom
- Emergency buttons installed in the room and outside
- Portable shield (if needed)

### Regulatory: check your state regs.

64E-5 Florida Administrative Code 64E-5.1601

Rules 64E-5.1601 — 64E 5.1604 are effective March 12, 2009 and are designated as Revision 9 (R9).

#### PART XVI ELECTRONIC BRACHYTHERAPY



Code of Colorado Regulations Secretary of State State of Colorado

#### 24.13Electronic Brachytherapy.

### AAPM Report 152

**AAPM REPORT NO. 152** 



The 2007 AAPM response to the CRCPD request for recommendations for the CRCPD's model regulations for electronic brachytherapy

# **Technical requirements**

- Survey for adequate shielding
- Calibrated chamber for the proper energy
- Q.A. check measurements
- Q.M. program: similar to HDR

# **Authority and responsibilities**

- Radiation safety officer
- Authorized User: *physically present at start* and during\* patient Tx; review patient Tx
- Authorized Medical Physicist (AMP): *physically present at start and during patient Tx*; evaluate eBT output; review calc. prior to Tx; assess each Tx for possible M.E.; establish a Q.A. spot checks

### **Operating procedures and calibration**

- Unit must be FDA approved
- Unit is secured when not in use
- Operating and emergency procedures in close proximity to the EBT.
- Survey meter
- Calibration: O.F. (Within 2%); timer accuracy; evaluation of relative dose distribution (5%)
- Source positioning accuracy within 1 mm within the applicator

### Spot checks

- Daily spot checks
- AMP to review spot checks within 2 days of completion. Should include indicator lights, cables, catheters or parts of the device
- Dosimetry spot checks: O.F (Dose rate) within 3%; validation of radiation area of the intended area within 1 mm

SAM's Question 1: When daily spot checks are performed on eBT units by someone other than the AMP, the results must be reviewed by the AMP within:



### **Answer to question 1**

When spot checks are performed by someone other than the AMP, the results need to be reviewed by the AMP within:

- 1) Four days
- 2) One week
- 3) One day
- 4) Two days
- 5) Three days

Answer: (4) Reference: AAPM report 152 page 4; section h

# **Acceptance testing**

- Hardware and software
- Inventory and functionality verification
- Interlocks and radiation detectors
- Basic training
- Manufacturer dosimetric data for comparison

# Commissioning

- Calibrated chamber (energy)
- Calibration: in air or water?
- Current calibration:
  - •U.S.: in air (NIST)
  - Europe: in water (PTB)

(TG 61 recommendations for both, not there yet!)

- Measuring tools: chamber holder (air and water), 1D water tank, plastic water, films etc.
- Opportunity to establish daily Q.A. and periodic testing during commissioning

# Commissioning

- Measurements:
- Flatness, symmetry, and penumbra
- ✓ HVL
- Dose rate
- Virtual source
- ✓ PDD
- Timer accuracy
- Others (Depending on the device)

## Example: Esteya commissioning

- Both films and chamber were used
- Surface dose rate (In air TG61, A20)
- PDD measurements (Water and film)
- Virtual SSD (Air, A20)
- Dose profiles (F&S, penumbra etc..) with film
- Accuracy of timer (Independent timer)
- HVL (In air, A20)

### Device



- Dose rate 2.7 Gy/min
   @3 mm
- X-ray source 69.5 kV, beam current (0.5, 1.0, 1.6 mA)
- Profiles similar to
   Valoncia applicator
  - Valencia applicators
- SSD 60 mm
- Five applicators

# QA device (Daily checks)

- 26 sensors to measure:
- Dose rate
- Flatness and symmetry at depth
- Percent dose at depth



Validated during commissioning!

# Work flow for Esteya (Opportunity for checklist)

#### Self test



#### QA check





#### Add a new patient



Position on surface

#### Set up treatment plan



Start treatment









# Dose Profiles using film dosimetry for all applicators



QA Device -Dose rate -Flatness and symmetry√ - Percent depth dose



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Date: 3/3/2015 Signature:

### Exradin A20 Chamber vs. TG-61 recommendations

- Parallel-plate chamber with thin window (50.8µm) √
- Small collecting volume is 0.0738 cm<sup>3</sup> √
- Collector diameter is 1.93 mm
- Total wall thickness (Full buildup and reduction of Elec. Contamination(TG61)): 7.72 g/cm<sup>2</sup> vs. 7.3 for 70 kV V (Table I TG61)
- effective point of measurement is at dc = 1.80 mm depth from the entrance surface (Inverse square corr.)
- Calibrated for energy\*
- Negligible stem effect

# **HVL determination**

- Using pure Al layers to determine the HVL
- Geometry (II C, TG61)
- Results: consistent with other findings

# **Exponential fit for HVL value**



# Polynomial (fourth) fit for HVL



### Dose rate measurements (In air TG61) for 1.6 mA

Applicator Size (cm)	Planned Dose Rate (Gy/min)	Measured Dose rate (Gy/min)	% Difference
3.0	3.33	3.41	2.46
2.5	3.29	3.40	3.26
2.0	3.25	3.31	1.85
1.5	3.18	3.23	1.50
1.0	3.11	3.09	-0.50

Measurements performed for other mA settings (1.0, 0.5)

### **Virtual SSD**

Esteya (S/N 87654321) Virtual SSD 3cm Applicator



### PDD measurements in water and with film

- Using A20 in a 1D water tank
- Film using plastic water\*
- Scanner: Epson 11000XL
- Software: Film QA PRO2015 from Ashland
- Films: GafChromic EBT2 and EBT3 radiochromic

### **Measurements of PDD in water**



### PDD results and comparison (3.0 cm applicator)



SAM's Question 2: The A20 chamber meet TG 61 requirements because of the following reason.

8%	1.	Chamber orientation
<mark>2%</mark>	2.	Published stem effect data
33%	3.	Can be calibrated in air or water
<mark>2%</mark>	4.	Does not require Inverse square law corr.
55%	5.	Small collecting volume, negligible stem
		effect, adequate total wall thickness

### Answer to question Sam's question 2

The A20 parallel chamber meet TG 61 requirements because of the following reason:

- 1. Chamber orientation
- 2. Published stem effect data
- 3. Can be calibrated in air or water
- 4. Does not require inverse square law corrections
- 5. Has a small collecting volume, negligible stem effect, adequate wall thickness

Answer: (5)

Reference: AAPM TG 61, Section V.

# **Sources of uncertainties**

- Film positioning vs. applicator
- Film measurements (PDD): surface dose
- Chamber and applicator positioning for water and air measurement
- Overall uncertainty for dose rate measurement: 3%

# Q.A for eBT

- Daily Q.A for all components (Cable, applicators, caps, emergency button, Applicator interlock, etc..)
- Establish a method of verification for Tx time
- Which data to use for Q.A.: own or internal?
- Compliance form (Presence of AU and AMP)
- Have a template for simulation information to avoid errors (Manual entry)
- Pacemaker verification
- Others

# Independent Tx time verification

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Independe	Independent calculation for EBT (Esteva) procedure				
Patient:		Date:	1		
Treatment Area:		Field#:			
Radiation Oncologi	st:	Physic	ist:	<u></u>	
Applicator identifica	ation (please cire	le appropriat	e size):		
10	15	20	25	30	
J	31		sz	05	
10 mm	15 mm	20 mm	25 mm	30 mm	
Han	d calculation for	r treatment tin	<u>ne</u>		
Use the equation bel measured PDD (Tal	Use the equation below, the dose per fraction, measured dose rate (Table1), and measured PDD (Table 2) to determine the calculated treatment time.				
Calc. Time =	1	Fraction Dos	e (Gy)	— = Min	
Measured Dose Rate $\left(\frac{Gy}{min}\right)$ x Measured PDD					
Treatment planning	time (from EST	$(\mathbf{EYA}) = M$	lin		
Treatment planning	time/calculated	time X 100=			
Acceptable (ratio le	ss than 3 %): '	Y N			
Calculated by:	Date				

#### Esteya measured data for 1.6 mA

Applicator diameter (mm)	Dose rate (Gy/min) at 0 mm		
10	3.109		
15	3.179		
20	3.248		
25	3.330		
30	3.330		

#### Table 1. Measured dose rate for ESTEYA S/N 87654321

	Applicators sizes(cm)				
Depth (mm)	3	2.5	2.0	1.5	1.0
0.0	1.000	1.000	1.000	1.00	1.000
0.5	0.968	0.964	0.962	0.967	0.959
1.0	0.937	0.931	0.925	0.935	0.919
1.5	0.906	0.900	0.890	0.904	0.881
2.0	0.877	0.871	0.856	0.874	0.845
2.5	0.849	0.844	0.824	0.845	0.811
3.0	0.821	0.818	0.794	0.818	0.778

# Table 2. Measured PDD (Film dosimetry) for ESTEYA S/N8765321 normalized at 0 mmExample:Dose/fraction: 7Gy at depth of 3 mmApplicator size: 30 mmUsed current: 1.6 mAEsteya calculated time: 2:34.3 which is equivalent to = 2.57 minCalculated time: Dose/ (Measured Dose Rate x measured PDD)

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7/ (3.330 x 0.821) = 2:33.6 (MIN: S.SS) which is: 2.56 min

(Calculated – Esteya)/calculated x 100 = -0.4%

### Esteya time vs. calculated time\* 7 Gy at 3 mm depth

Applicator Diameter (cm)	Actual Treatment Time	Calculated Treatment Time* (min)	% Difference
3.0	2.57	2.56	-0.45
2.5	2.61	2.57	-1.53
2.0	2.65	2.71	2.30
1.5	2.73	2.69	-1.21
1.0	2.80	2.89	3.24

\* Using *measured* dose rate and PDD

# Daily treatment verification/Compliance form



# **Useful beam and geometric miss**





#### Idea from the Valencia group (Jose Perez-Calatayud)

# Simulation





# **Special thanks to:**

- Casey Curley(FAU student)
- Resat Aydin (Ashland)
- Regina Fulkerson
- C. Candela-Juan, J. Perez-Calatayud,
  - F. Ballester, Y. Niatsetski
- S.I. for their support