

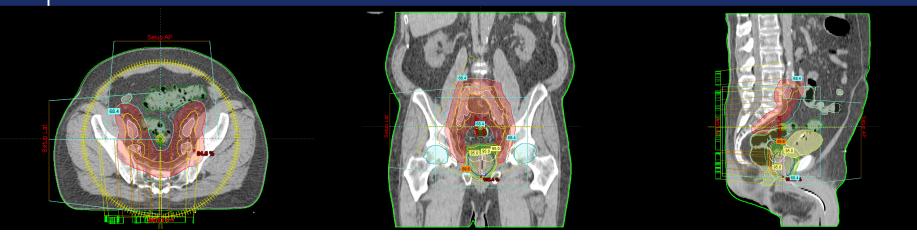
# Patient-specific QA using 3D EPID dosimetry: future becomes reality

S.M.J.J.G. Nijsten, MAASTRO CLINIC





#### Verification of modern radiotherapy techniques



Current modern radiotherapy techniques demand robust and fast dose delivery verification techniques taking into account different uncertainties in dose delivery.

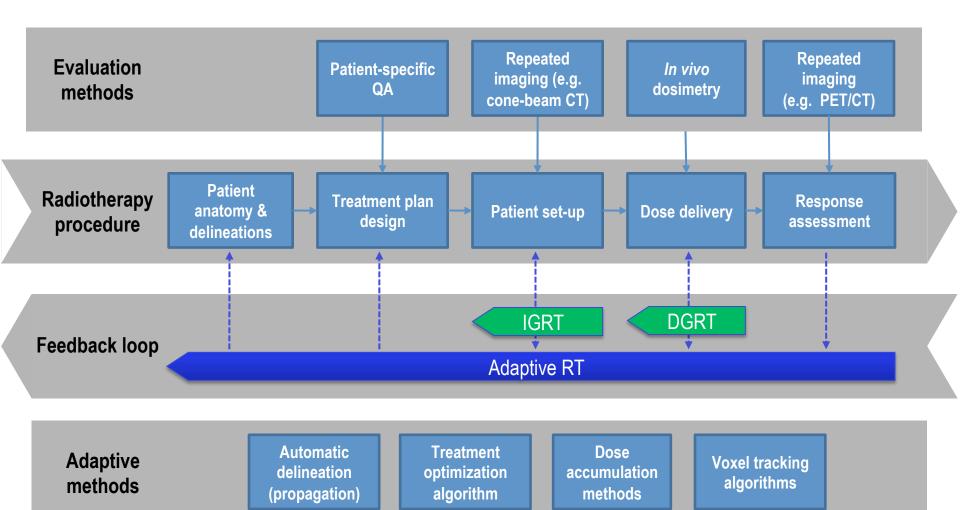
More complex techniques often also require more complex verification techniques which are still under development and are not always commercially available.







#### The chain of radiotherapy (Adaptive RT using IGRT and DGRT procedures)



### Dose Guided Radiation Therapy (DGRT)

## Statement about IGRT

(Lancet Oncology, October 2006)

"Frequent imaging during the course of treatment, or image guided radiotherapy, is becoming a crucial requirement for further innovation in conformal radiotherapy, to ensure that high-precision techniques are delivered as planned."

DGRT allows for monitoring and adapting a treatment based on the **measured** delivered dose to a patient.

MAASTRO uses electronic portal imaging devices (EPIDs) for this purpose.







#### Equipment



#### LINACs

- Siemens Oncor/Artiste, Varian TrueBeam, Elekta Synergy
- Energy: 6/10/15 MV X-rays

### a-Si EPIDs

- Siemens OptiVue (AL7/AG9/AN9)
- Varian aS1000
- Elekta iView GT

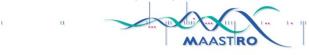
### Overview of DGRT

## DGRT @ MAASTRO CLINIC

- EPID dosimetry
- Point dosimetry
- 2D dosimetry
  - Flat-panel dose calibration (for *a-Si* EPIDs started in 2005)
  - Pre-treatment
  - Transit dosimetry
- 3D dosimetry
  - Pre-treatment
  - Dose Recalculation
  - In-Vivo dosimetry
- Time-resolved dosimetry
  - Under investigation

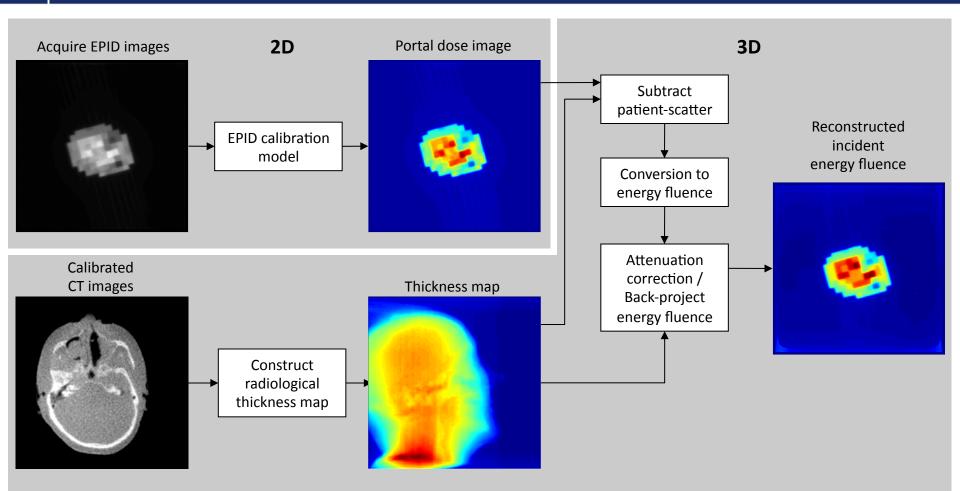
(CCD-based EPID research started in 2000) (clinically used from 2002 to 2006)

- (in clinical use from June 2006 present) (in clinical use from December 2006 – present)
- (in clinical use from July 2012) (in clinical use from July 2012)
- (in clinical use from July 2012)





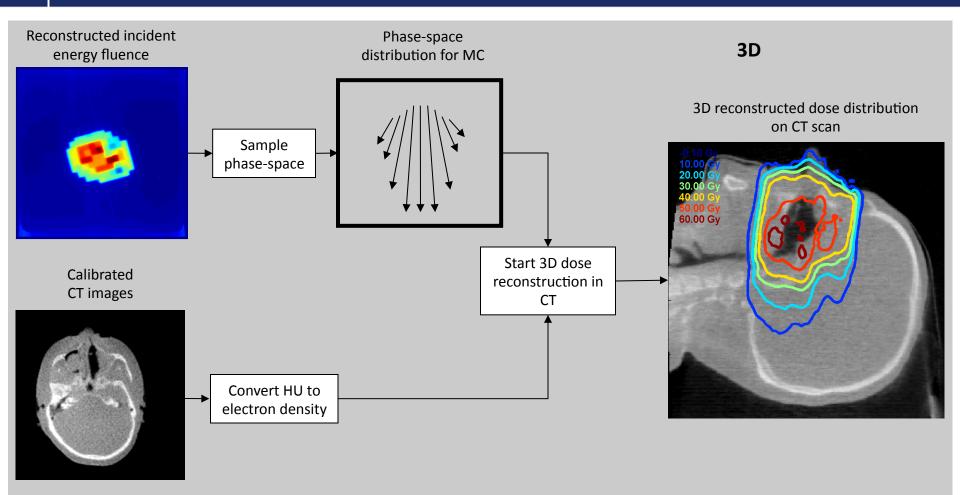
# *EPID dosimetry* (2D and 3D verification methods)



van Elmpt et al., A Monte Carlo based three-dimensional dose reconstruction method, Med. Phys. 33(7), 2006 Nijsten et al., A global calibration model for a-Si EPIDs used for transit dosimetry, Med. Phys. 34(10), 2007



# *EPID dosimetry* (2D and 3D verification methods)

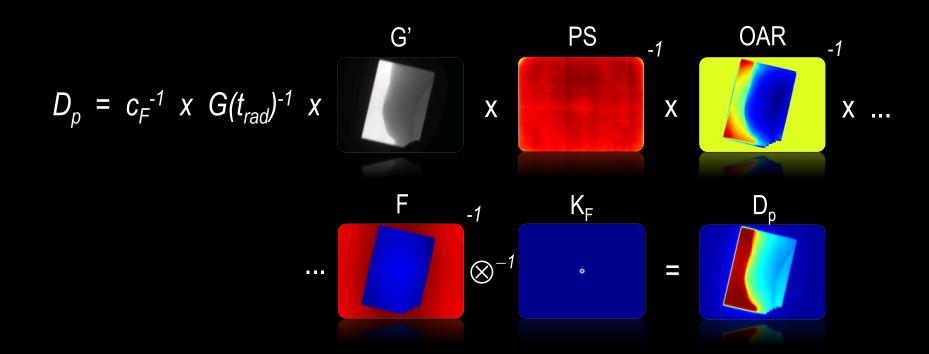


van Elmpt et al., A Monte Carlo based three-dimensional dose reconstruction method, Med. Phys. 33(7), 2006 Nijsten et al., A global calibration model for a-Si EPIDs used for transit dosimetry, Med. Phys. 34(10), 2007



## Dosimetric calibration model

(Including off-axis panel shifts)



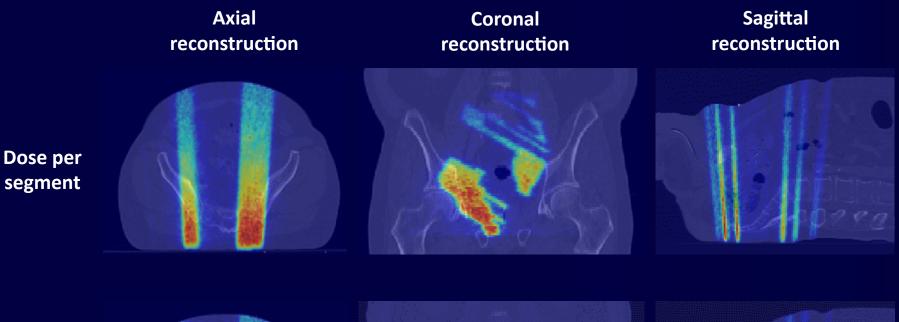
G' is corrected for back scatter (Varian only), dark field and dead pixels.

P. Greer, Med. Phys. 32(12), 2005 S.M.J.J.G. Nijsten et al., Med. Phys. 34(10), 2007 P. Rowshanfarzad et al., Med. Phys. 37(5), 2010

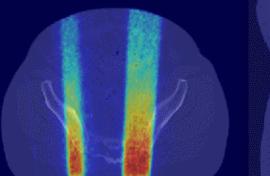


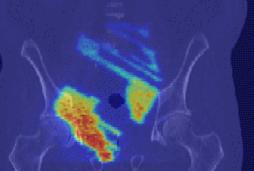
#### 3D EPID dosimetry

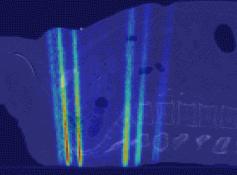
(Dose reconstruction based on transit dosimetry and planning CT anatomy)



Integrated dose









### Verification scenarios during 3D portal dosimetry

	Planning CT	CT/CBCT
Pre-treatment PDIs	3D pre-treatment verification - Prior to first treatment, check of	3D dose recalculation
	<ul> <li>Phot to first treatment, check of LINAC, QA</li> <li>Adaptation by designing new treatment plan</li> </ul>	<ul> <li>Prior to treatment, check of dose in patient</li> <li>Adaptation by incorporating anatomy changes</li> </ul>
Transit PDIs		3D in vivo dosimetry
		<ul> <li>During treatment, delivered dose in patient</li> <li>Adaptation by incorporating anatomy changes and dose delivery differences</li> </ul>







## Patient-specific QA with MatriXX and EPID (Some specifications)

#### MatriXX detector array in MULTICube phantom



Number of chambers: 1020 Active area: 24.4x24.4 cm<sup>2</sup> 7.62 mm center-to-center distance

#### Varian MV EPID @ TrueBeam LINAC



Number of pixels: 196608 Active area: 40.1x30.1 cm<sup>2</sup> 0.78 mm center-to-center distance

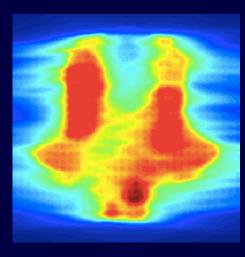


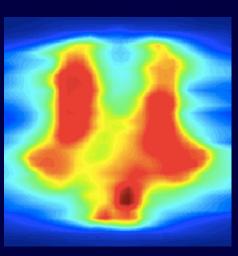




## Cumulative gamma histograms for MatriXX and EPID (*Cut-off isodose values of 0,20,50,80,100%*)

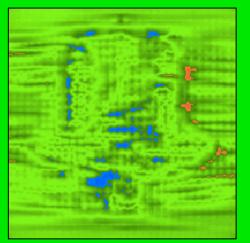
3D dose MatriXX





3D dose EPID

3D gamma MatriXX

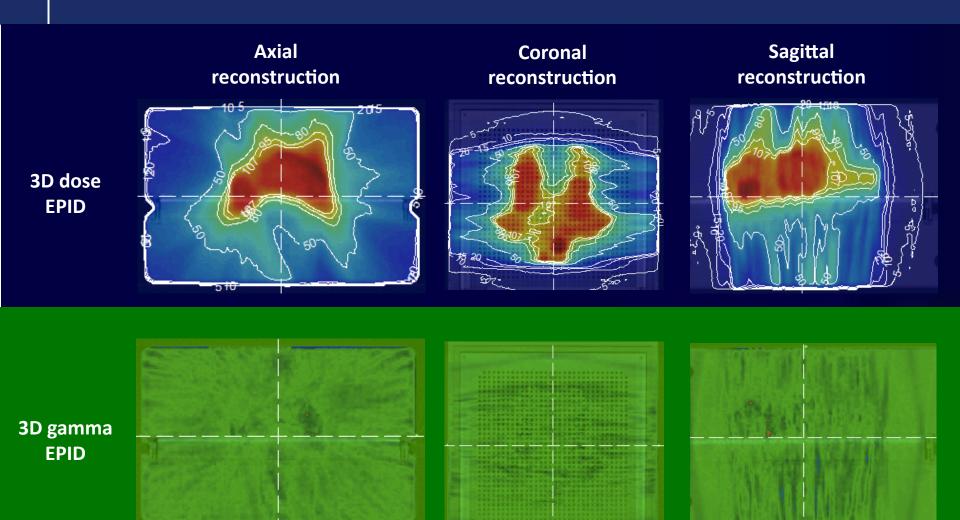


#### 3D gamma EPID

global γ: 3%, 3 mm



### Full 3D dose verification using EPID dosimetry

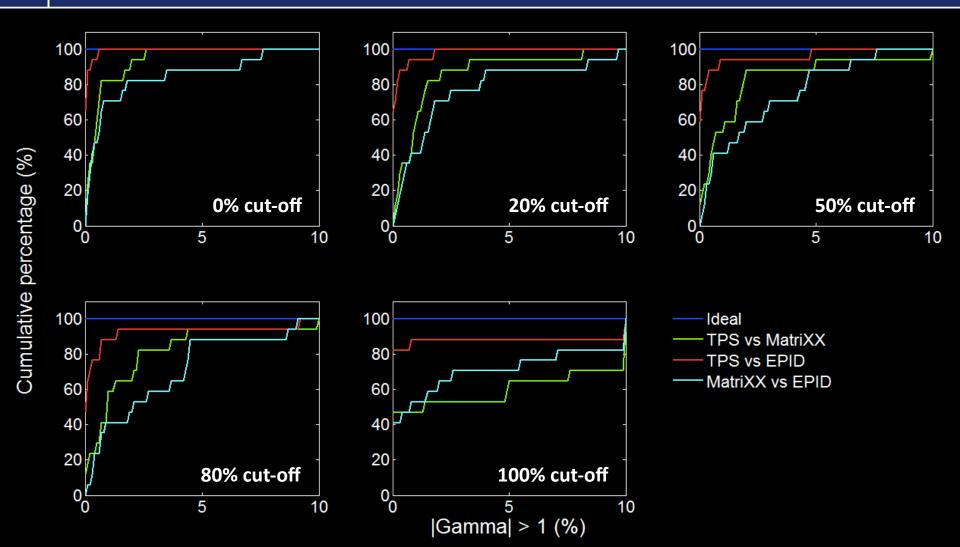


global γ: 3%, 3 mm



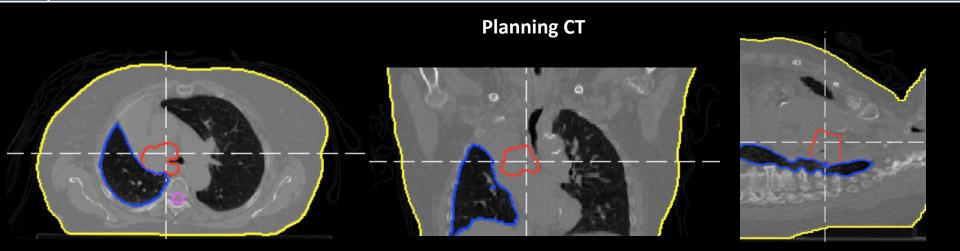
#### Cumulative gamma histograms for MatriXX and EPID

(Based on 17 coronal measurements through isocenter for different cut-off dose values)

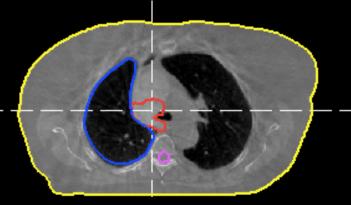


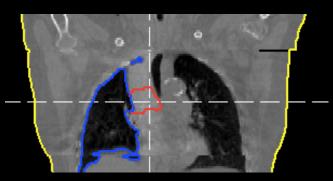


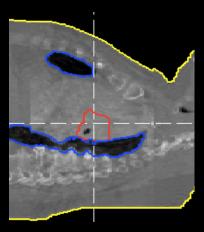
# kV CBCT for soft tissue visualization and dose reconstruction (*Redelineation*)



kV CBCT F25



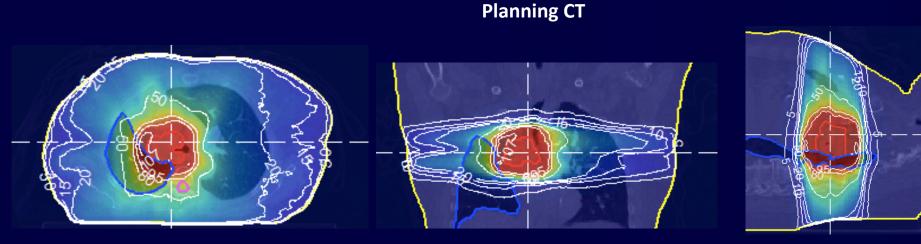




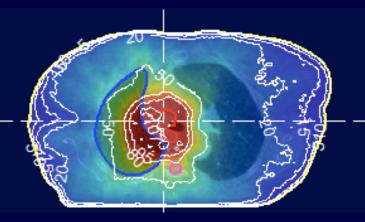


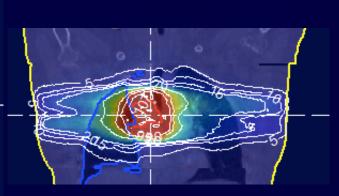
#### kV CBCT for soft tissue visualization and dose reconstruction

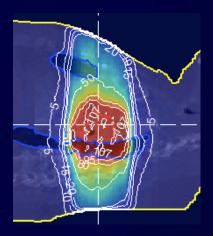
(Dose reconstruction based on transit dose measurements)



kV CBCT F25



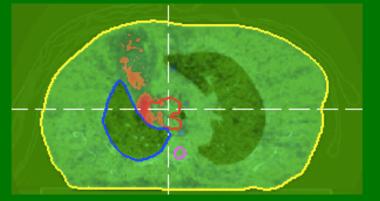






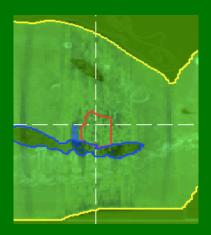
### kV CBCT for soft tissue visualization and dose reconstruction

(3D gamma calculation based on transit dose measurements)

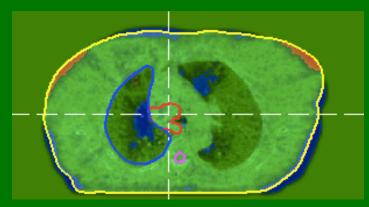


#### Planning CT

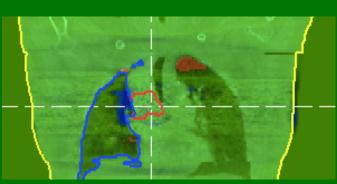


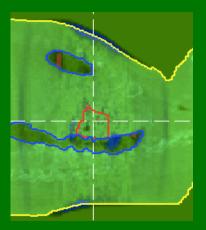


kV CBCT F25



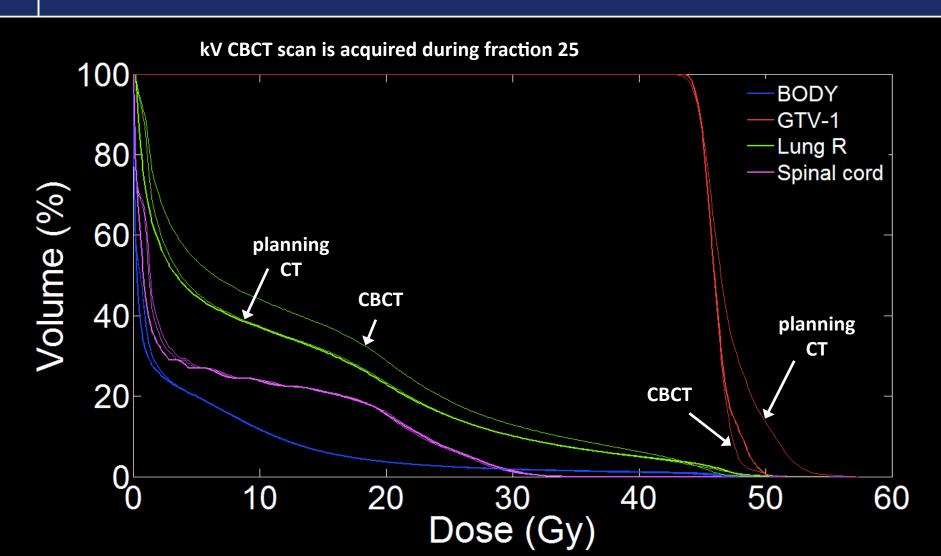
global γ: 3%, 3 mm







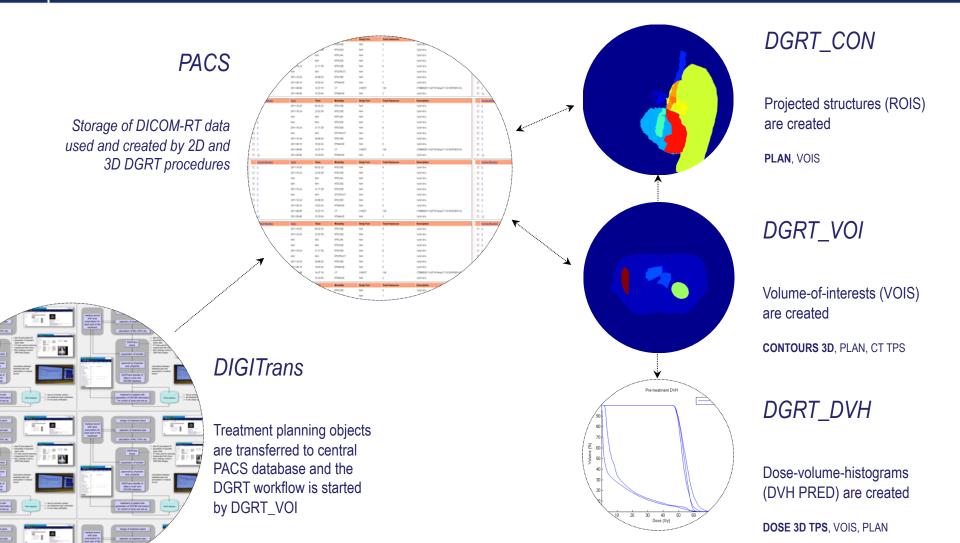
#### kV CBCT for soft tissue visualization and dose reconstruction (DVH calculations for planning CT and 1 fraction with CBCT based on VIVO)





#### EPID dosimetry

(DGRT workflow prior to treatment)





#### EPID dosimetry (DGRT workflow during treatment)

#### DGRT\_ACQ

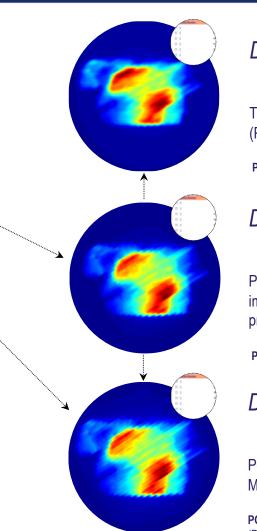
Generation of multi-frame DICOM-RT Image object based on individual dark field corrected frames

SYNC DB, PLAN





Individual frames are captured and stored to local disk



#### DGRT\_VIV

Transit portal dose images (PDI PRED T) are predicted **PDI PRET P**, PLAN, VOIS, CT TPS

#### DGRT\_PRE

Pre-treatment portal dose images (PDI PRED P) are predicted

PORTAL IMAGE, PLAN

#### DGRT\_EPD

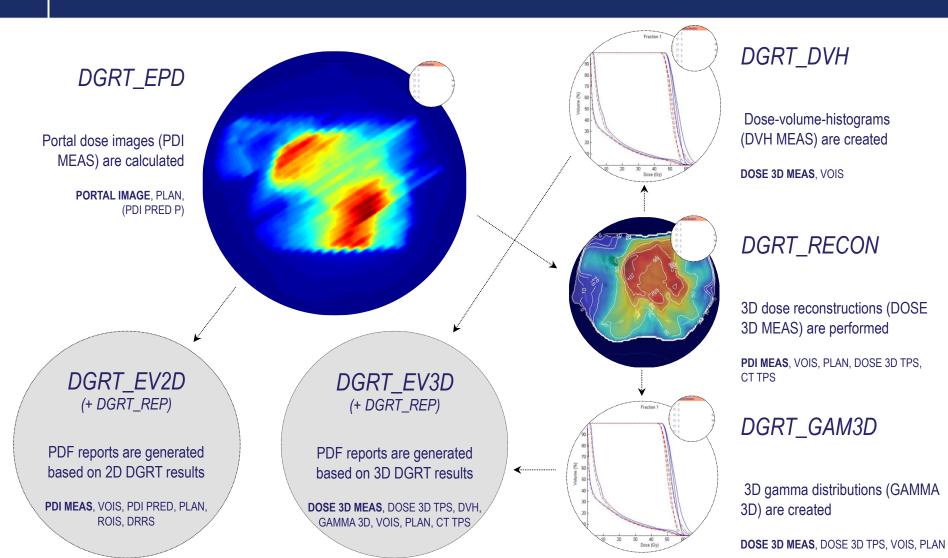
Portal dose images (PDI MEAS) are calculated

PORTAL IMAGE, PLAN, (PDI PRED P)



## EPID dosimetry

(DGRT workflow during treatment)



## MAAST RO

### Conclusions

- *a*-Si EPIDs can be accurately calibrated for dosimetric purposes and included as dosimeter in verification procedures of modern complex radiotherapy techniques
- Patient-specific QA using 3D EPID dosimetry can replace existing pre-treatment verification methods offering a high verification accuracy and minimizing workload
- 3D EPID dosimetry makes it possible to apply Dose Guided Radiation Therapy during clinical routine and allows for documentation, adaptation and individualization of patient treatments
- > Patient-specific QA using 3D EPID dosimetry is no longer future but reality







#### Acknowledgements



#### MAASTRO physics

#### DGRT research group

#### MAASTRO clinic

Medical Physics group



