A new paradigm: Stereotactic Radiotherapy for Breast Cancer: **GammaPod**TM

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I do not have anything to disclose.

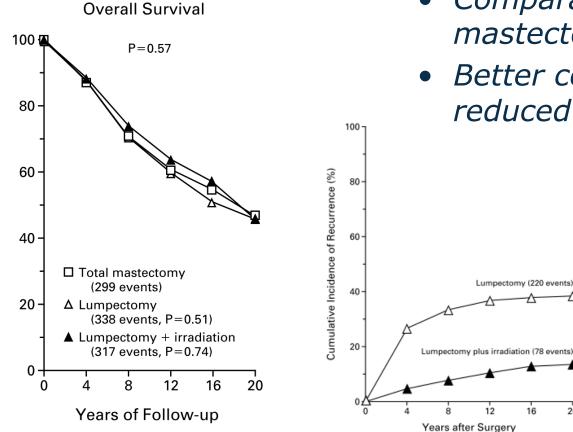
Outline

Clinical background

- Device Introduction
 - GammaPod
 - Immobilization Device & Image Loader
- Preliminary Performance Results
 - Reproducibility Study
 - Post-operative and pre-operative settings
 - Dosimetric comparisons

Breast Conservation Therapy

BCT established as standard of practice



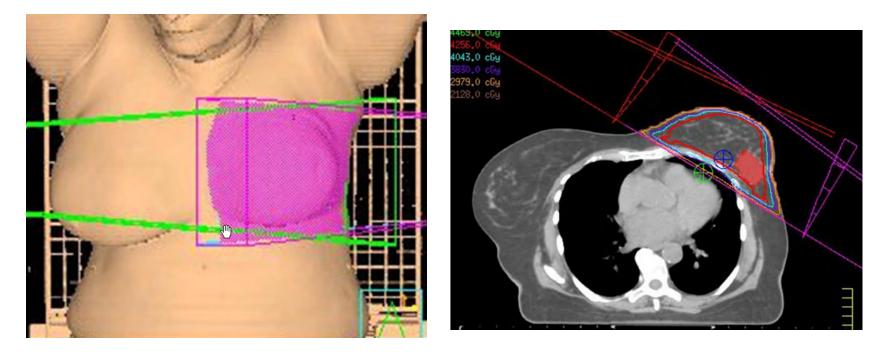
• Comparable outcomes to mastectomy

20

 Better cosmetic results and reduced trauma

Whole Breast Radiotherapy

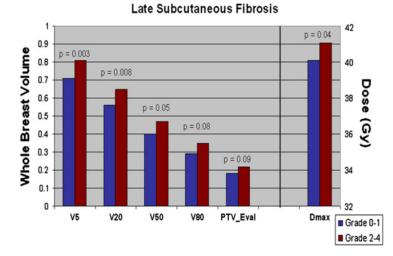
• Whole breast RT

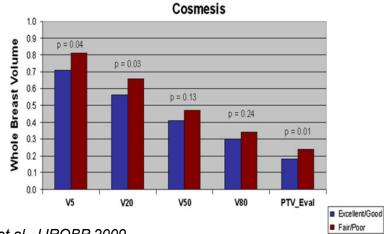


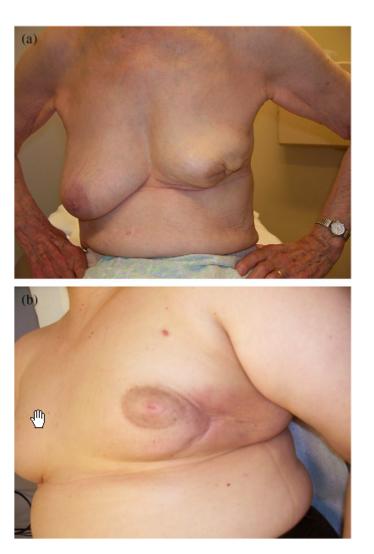
- Simple parallel opposed tangent beams
- Course of 5-7 weeks

Breast Toxicity









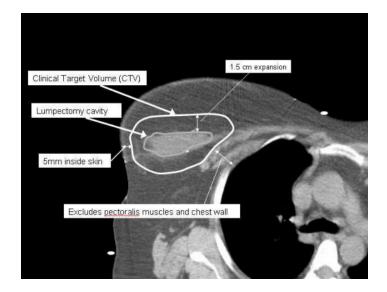
Hepel et al., IJROBP 2009

Extent of Tumor Involvement

- Pathological studies of multi-focality of the breast cancer improved understanding of disease extent...
- Holland et al. Cancer 1985
 - ~ 40% disease @ >2.0 cm away from the "otherwise would-be resections" in the mastectomy specimens
- Ohtake et al. BCRS 2000
 - < 10% cases with disease @ >2.0 cm
- Faverly et al. Cancer 2001
 - Residual disease unlikely @ >1.1 cm (<8%)

Partial Breast Irradiation

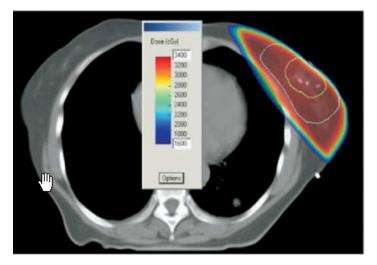
- Several "partial breast" irradiation techniques have been devised...
- External beam RT
 IMRT & 3DCRT

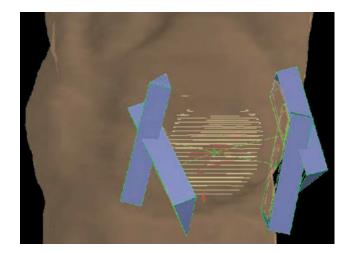


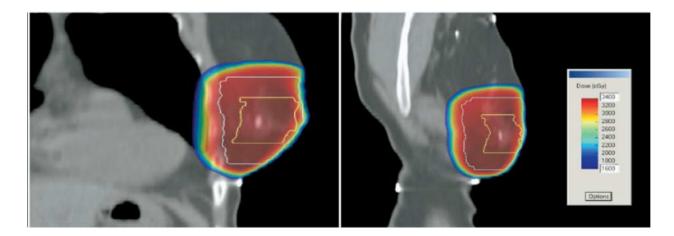
- Brachytherapy
 - Interstitial and multi-lumen applicators
 - Balloon-based, single & multi-lumen

External Beam RT

• External Beam RT

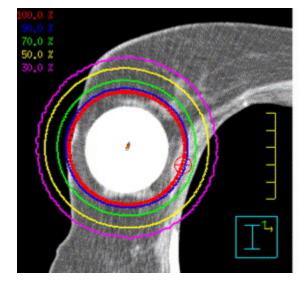


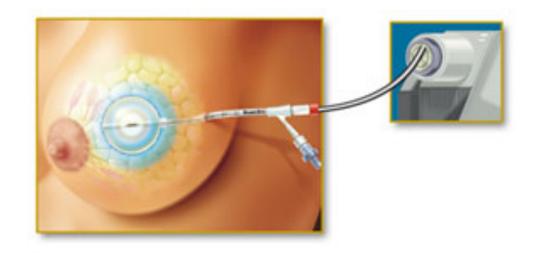


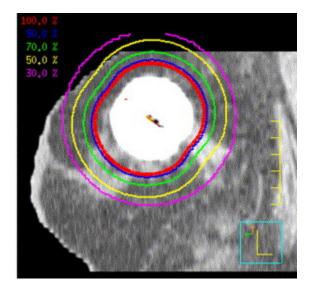




• Mammosite





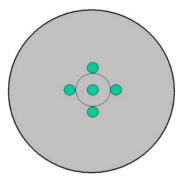


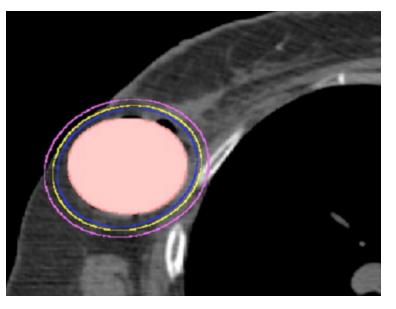
Major et al., Rad Onc 2006

Contura

• Contura multi-lumen







Multi-Lumen

• SAVI



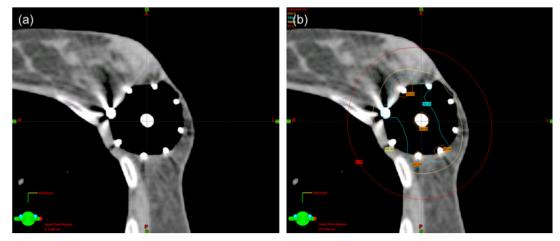


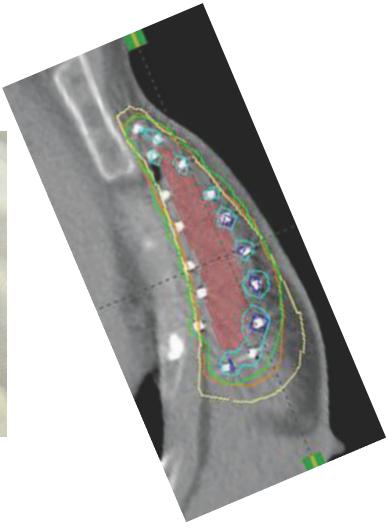
Fig. 2. Strut-Adjusted Volume Implants (SAVI) with simultaneous close proximity to (a) skin and chest wall and (b) dosimetry.



Interstitial

• Interstitial

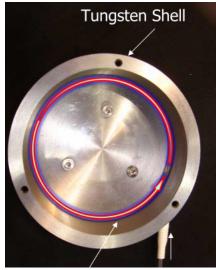


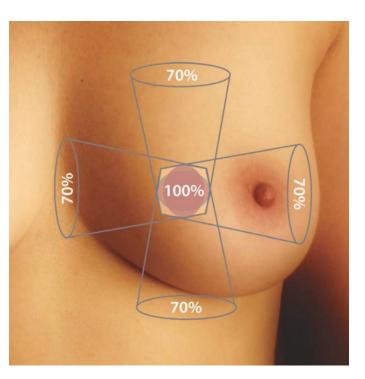


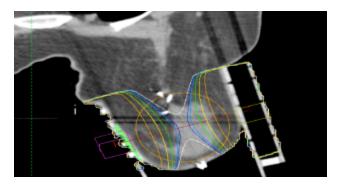


• Accuboost



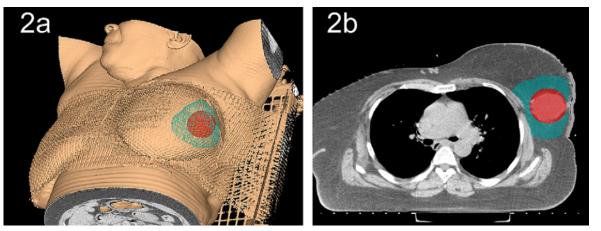






Problem(s) with Standard APBI

- Radiation following lumpectomy results in large volumes of normal tissue treated
 - NSABP-B39: 1.5 cm CTV & 1.0 cm PTV margin



Nichols et al., IJROBP 2010

• Can we give RT pre-operatively?

Problem(s) with Standard APBI

- There are also other issues with standard PBI techniques
 - Non-conformal irradiation
 - ✓ EBRT still tangents
 - Brachytherapy dose is very heterogeneous and poor dose fall-off
 - Localization, setup, reproducibility difficulties
 - Breathing motion etc.
- Can we improve the technology?



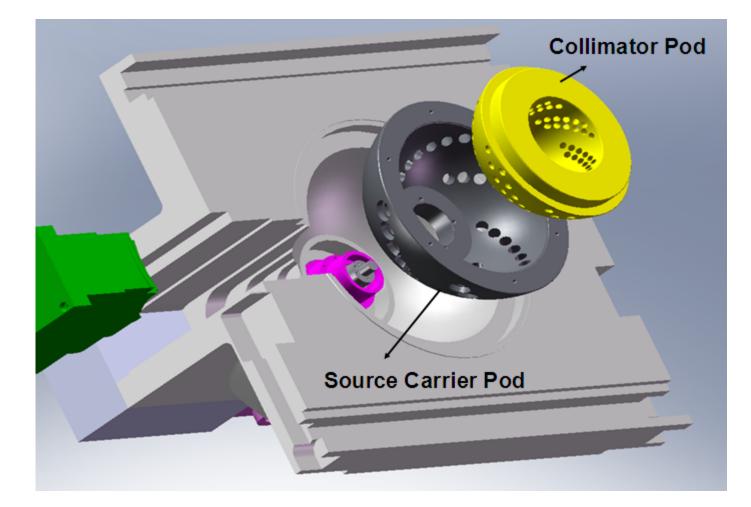


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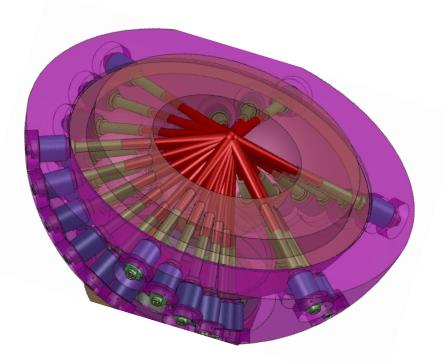






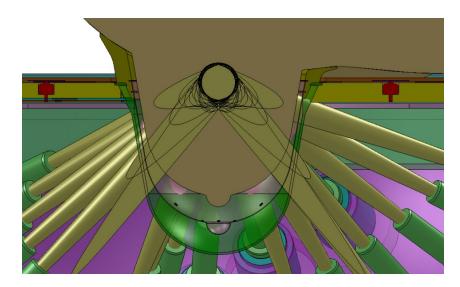
Arcs

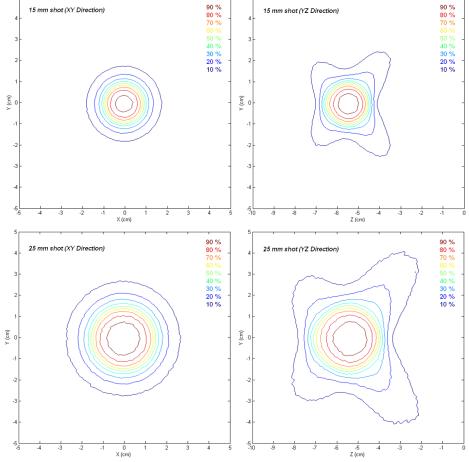
• 36 sources spaced 1 degree apart laterally and 10 degrees longitudinally



- 2.5 cm & 1.5 cm collimator positions
- Source carrier & collimator rotates synchronously...
- Total 4400 Ci source produces ~5 Gy per minute for 2.5cm

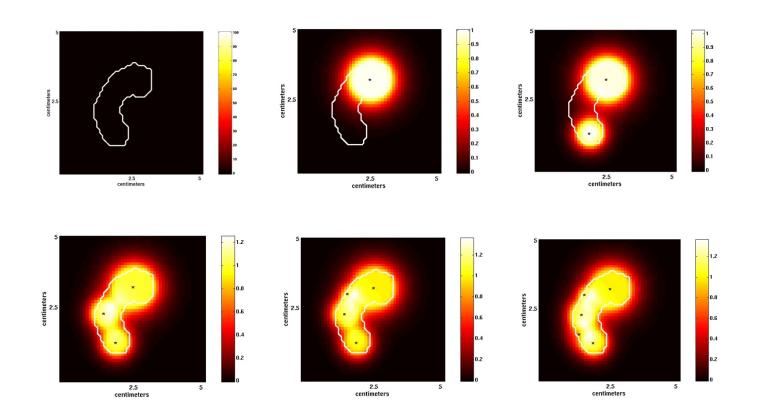
Dose Distributions





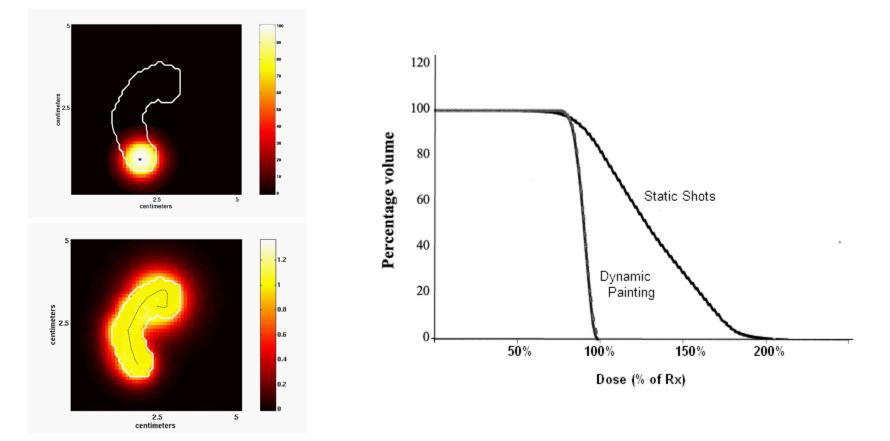
Static Dose Shaping

Static ball packing of "shots" to create adequate target coverage -> Gamma Knife

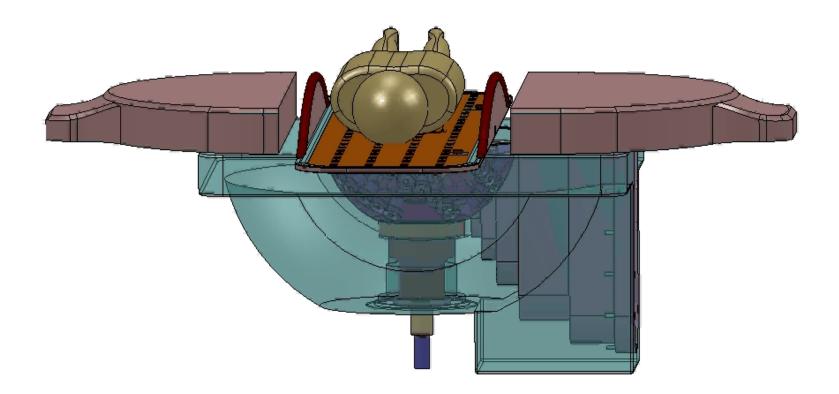


Dynamic Dose Painting

Dynamic dose painting allows more high dose homogeneity and differential dosing...

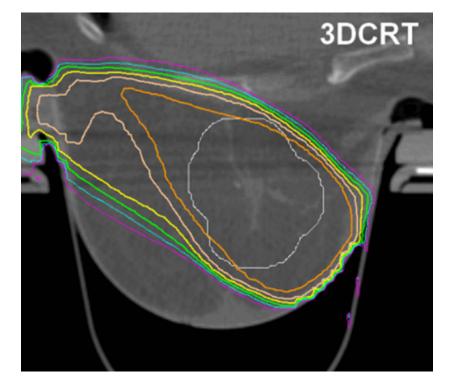


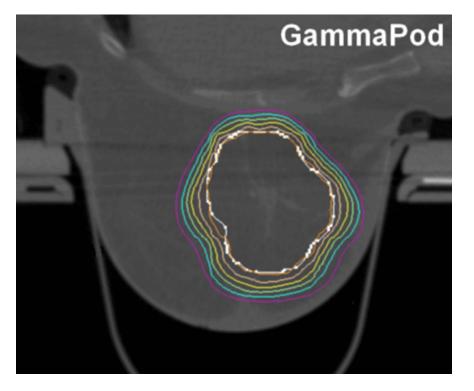






GammaPod Dose Distribution



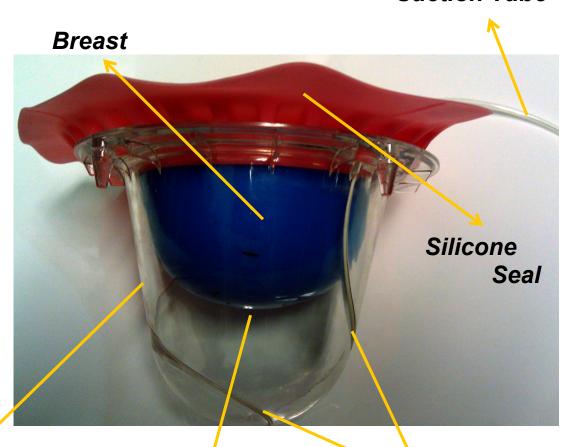


Stereotactic Principles

- Stereotactic level of targeting accuracy requires
 - Good immobilization of anatomy
 - Improved localization
- GammaPod Immobilization
 - Reduced motion with prone setup
 - Breast cup with vacuum suction
 - Automatic patient loading mechanism
- Localization
 - Radio-opaque stereotactic frame

GammaPod Breast Cup

- Two-layered breast cup system
 - 3 Outer cup sizes
 - 9 Inner cup sizes
- Vacuum between the inner and outer cups...
- Built-in radioopaque wire for stereotactic frame



Outer cup

Inner cup

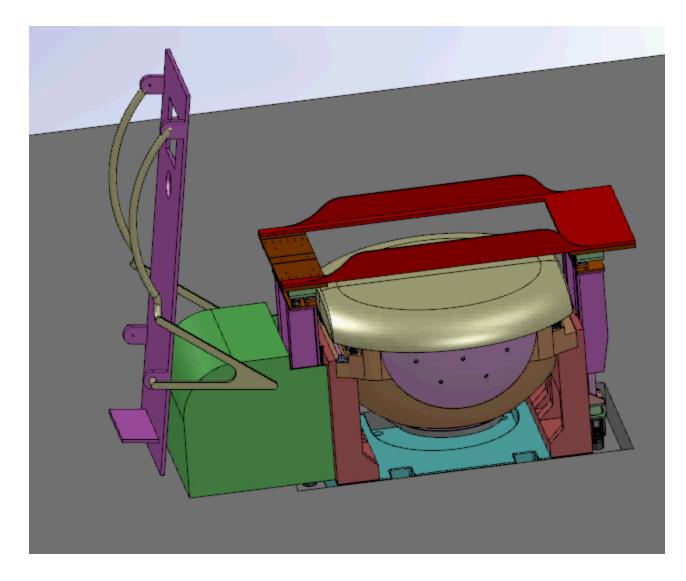
Fiducial Wire

Suction Tube





GammaPod Loader





GammaPod Loader

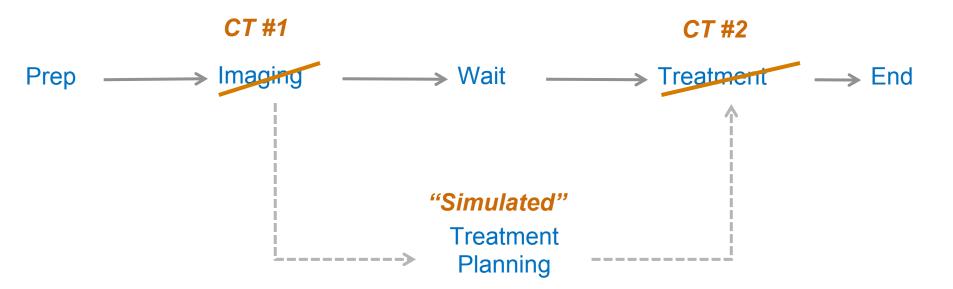
 Improves integrity of breast immobilization between imaging and treatment sessions...





Study of Localization Accuracy

• U of Maryland IRB approved Localization Accuracy and Reproducibility Study









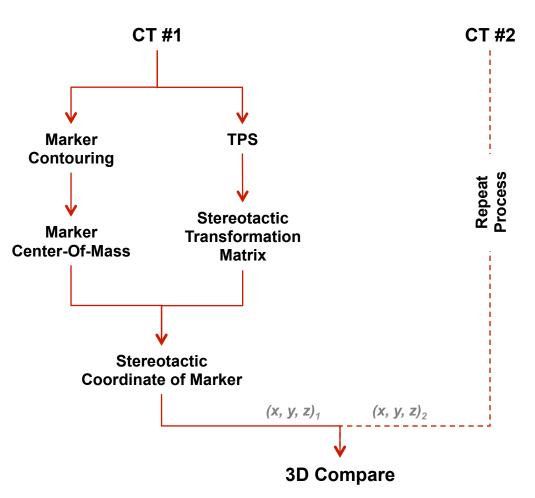


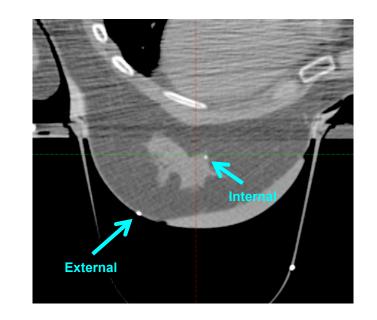
Timing of the Process

Initial Setup	···· → 26″ [13 – 45]
Dock & Scan	→ 6″ [4 – 10]
Registration	→ 3″ [1 – 7]
Contouring	→ 6″ [2 – 13]
Planning & Finish	→ 8″ [6 – 14]
Second Setup	→ 6″ [3 – 13]
	31″ [13 – 45]

Analysis Method

• Reproducibility of Internal and External Fiducials

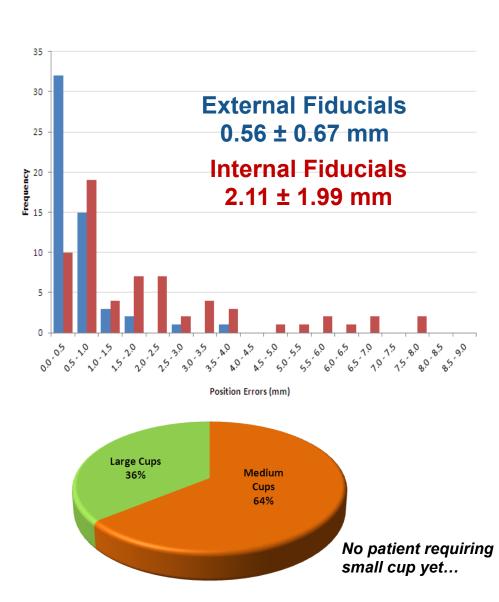


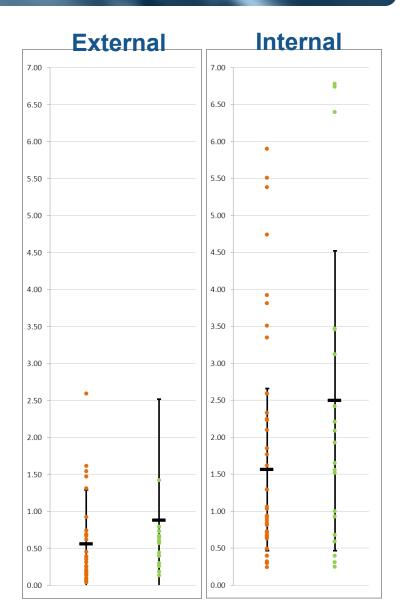


Reproducibility Results

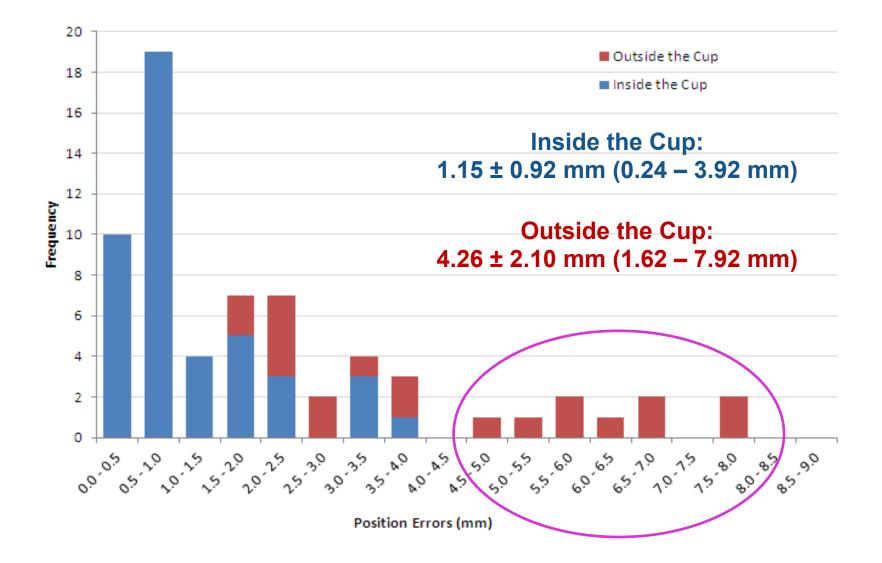
- 20 patients accrued in the study...
 - 3 patients aborted the study due to comfort issues or setup difficulty...
 - 1 patient cancelled due to breast cup size mismatch (logistics)
- 16 patient scans were available for study...
 - 5 patients had pressure related issues

3D Reproducibility





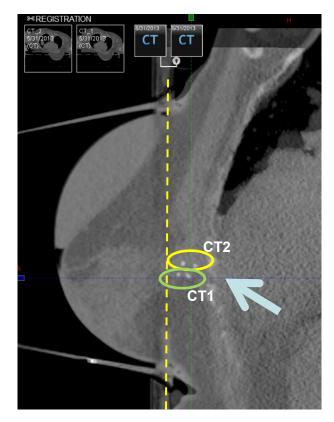
3D Reproducibility



3D Reproducibility

Breast cup immobilizes the tissue within the cup sufficiently...

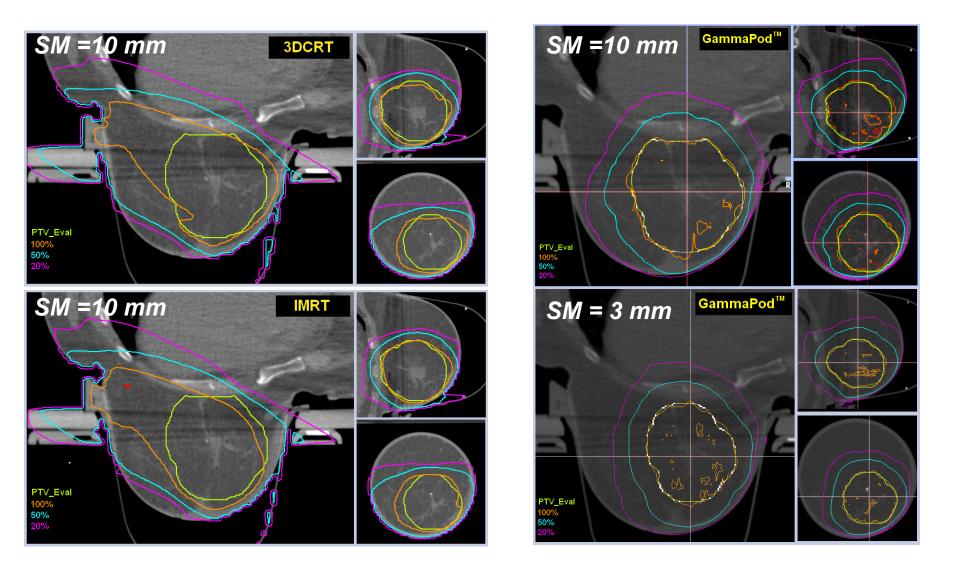
The anatomy outside the cup (for targets close to chest-wall) is prone to general patient setup errors.





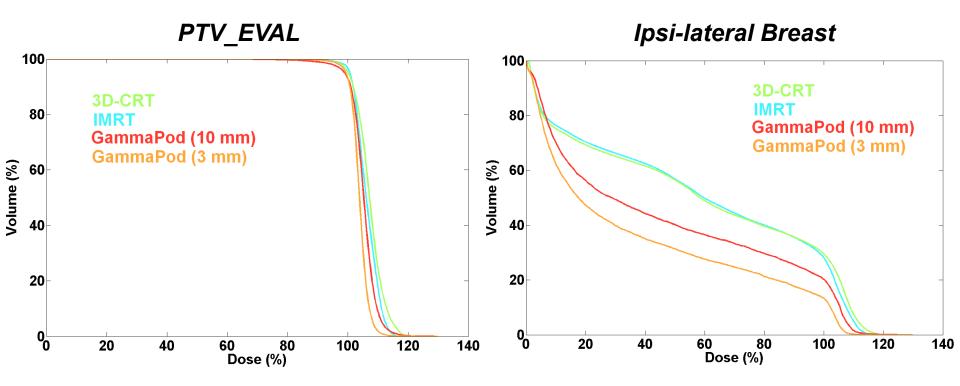


GammaPod in Post-Op APBI



GammaPod in Post-Op APBI

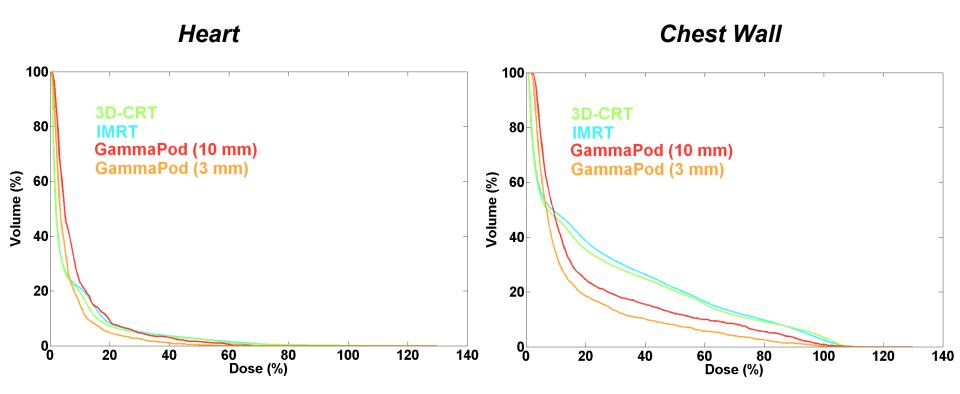
6 post-lumpectomy breast cancer patients (5 LT and 1 RT)



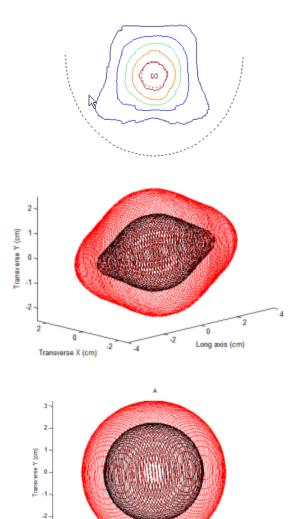
Hepel et al. \rightarrow V20 less than 60%

GammaPod in Post-Op APBI

6 post-lumpectomy breast cancer patients (5 LT and 1 RT)



Comparison to APBI Brachytherapy



Transverse X (cm)

Long axis (cm)

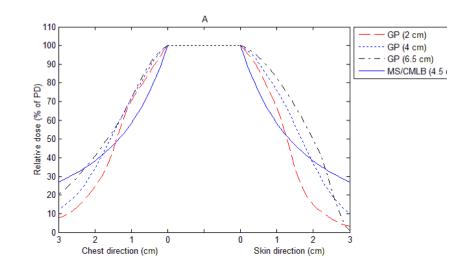


Table 2: Skin doses in % of PD. Mean skin doses for the BT devices and range within parentheses. Two values for GP – skin dose when the dose is normalized to 100% of PD at the target edge and skin dose obtained from the optimization (second one within square brackets).

Skin distance (cm)	MS	CMLB	SAVI	GP 6.5 cm	GP 4 cm	GP 2 cm
1.5	75 (73-77)	75 (74-77)	71 (70-71)	13 [9]	7 [5]	9 [7]
1.0	100 (100-100)	75 (73-77)	72 (71-74)	9 [6]	10 [9]	10 [7]
0.7	122 (120-124)	79 (78-79)	72 (70-74)	20 [15]	14 [14]	12 [10]
0.5	144 (137-144)	83 (82-84)	76 (74-77)	22 [13]	21 [18]	23[20]

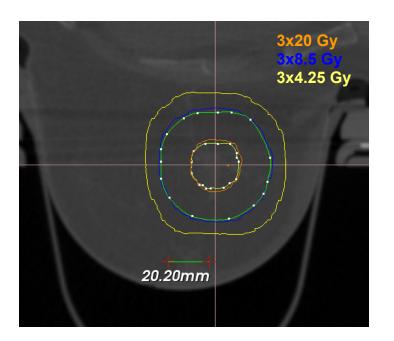


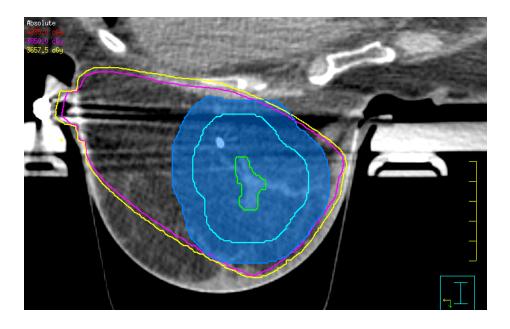
GammaPod in Pre-Op APBI

Potentially use dose-shaping capabilities of GammaPod

Deliver ablative dose to the gross tumor (GTV) Example: High dose e.g. 3 x 20 Gy to GTV

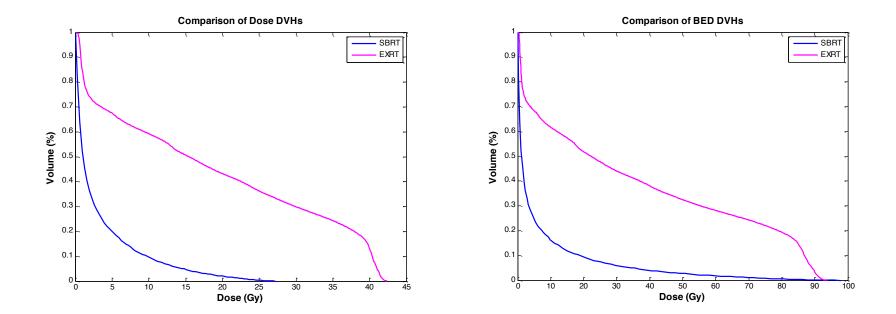
Deliver sterilizing dose to tumor extension ~ GTV + 1.5 cm Example: Low dose e.g. 3 x 8.5 Gy (~equiv. to 10x3.85 Gy)





GammaPod in Pre-Op APBI

• Whole Breast Physical Dose (D) and Biologically Equivalent Dose (BED)



GammaPod in Pre-Op APBI

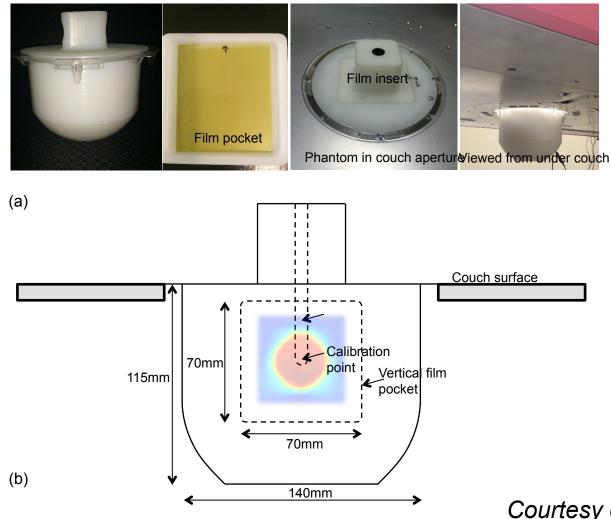
- Uninvolved Breast NTCP* (end point "moderate" fibrosis)
 - GammaPod (SBRT) = < 0.1
 - EUD (2 Gy) = 5.5 Gy
 - APBI Post-Op (EXRT) = 1.2 %
 EUD (2 Gy) = 24.5 Gy

* Assuming Lyman's Poisson Model with NTCP parameters from Alexander et al.

Current Status

- GammaPod was installed at U of Maryland in June 2014
 - Co-60 sources (2700 Ci) were installed in November 2014
- Preliminary dosimetry and comissioning work has started
 - First treatments expected in Aug 2015
- Studies coordinated through a consortium of 5 academic institutions
 - UMMS, UT Southwestern, Kansas, Allegheny and Ottawa

Commissioning Work

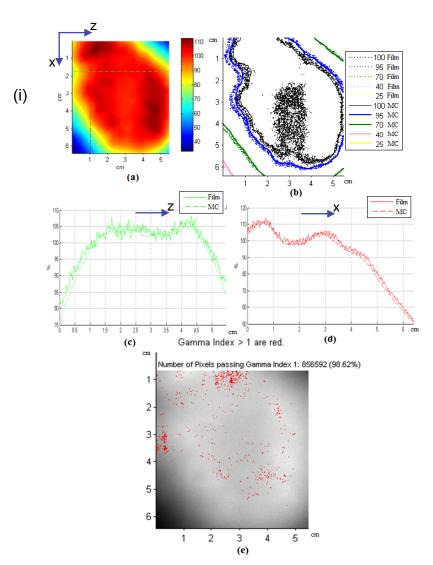


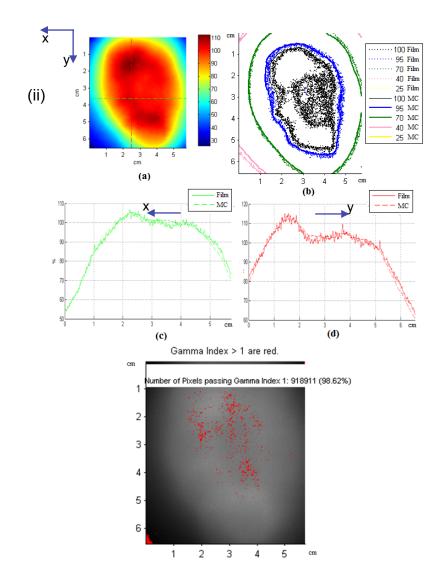
Courtesy of P. Hoban



Commissioning

Treatment Plan Measured vs Calculated Relative Dose







Thank You!