

Reproducibility of plan specific dosimetric quality assurance procedures of patients treated with a Helical **TomoTherapy system**

Sideri Liana¹, Argyris Moutsatsos ¹, Panagiotis Archontakis ¹, Katerina Salvara ¹, Evaggelos Pantelis¹

¹Radiotherapy Department, latropolis Clinic, Athens, Greece







Background

- 1. IMRT treatments are commonly used
- 2. IMRT Patient plan Dose-Quality-Assurance is mandatory
- 3. Patient DQA commonly performed prior to treatment
- 4. Assumption: Reproducible machine properties throughout treatment schedule
- 5. Common IMRT treatments: 20-35 fractions (4-7wks)

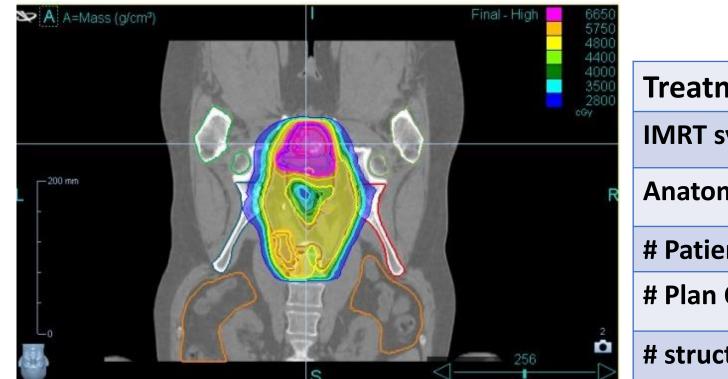
Aim

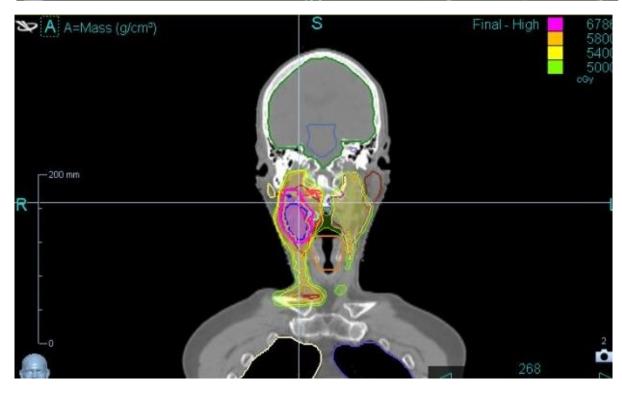
Assessment of the reproducibility of plan QA results over the treatment course of patients undergoing IMRT treatment with a helical TomoTherapy HDA system (Accuray Inc., CA, USA)





2. Materials & Methods





IMRT system platform	TomoThera
Anatomical sites	Prostate, H
# Patients	10
# Plan QA tests	39
# structures evaluated	20
Distribution of performed tests	Throughou





apy HDA

lead & Neck

ut treatment duration



Processing tool: Delivery Analysis Software (Accuray Inc.)

- Uses the photon fluence incident to the onboard detectors
 - a) without patient (for plan-QA purposes)
 - b) with patient (for treatment delivery monitoring purposes)
- Recalculates the dose distribution based on the daily measured photon fluence (Dose delivery QA) ۲
- γ-index analysis •

Structures evaluated	
Prostate	Head and Neck
SIB Prostate	SIB
SIB Ln	SIB LN
PTV Prostate	PTV High
PTV Med	PTV Med
PTV Ln	PTV Ln
Rectum	Spinal canal
Anal Canal	Esophagus
Bladder	Parotid L
Bowel Bag	Parotid R
External	External





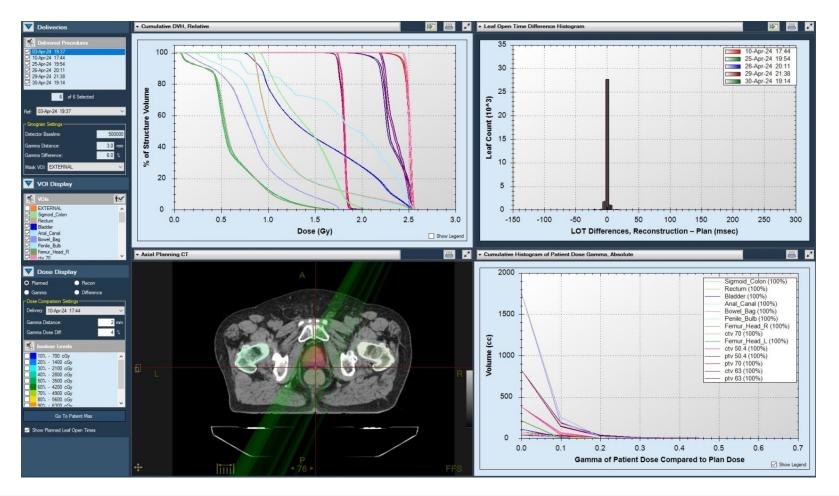
2. Materials & Methods

Comparison tools:

- 1. γ-index (global, per individual structure)
- 2. Criteria: Distance-To-Agreement (DTA) and Dose Difference (DD) criteria 2mm/3%

Tolerance limits (AAPM TG-218):

- γ passing rate >95% (global volume) •
- Dose difference:10% (global volume) ullet



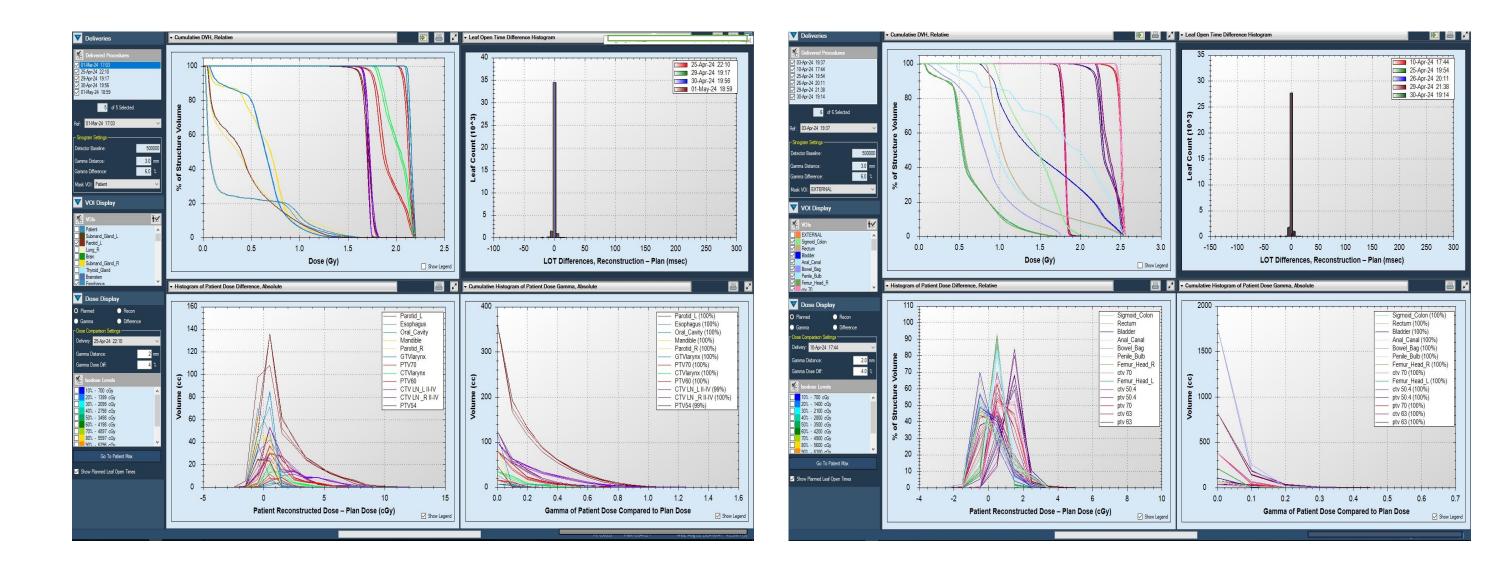




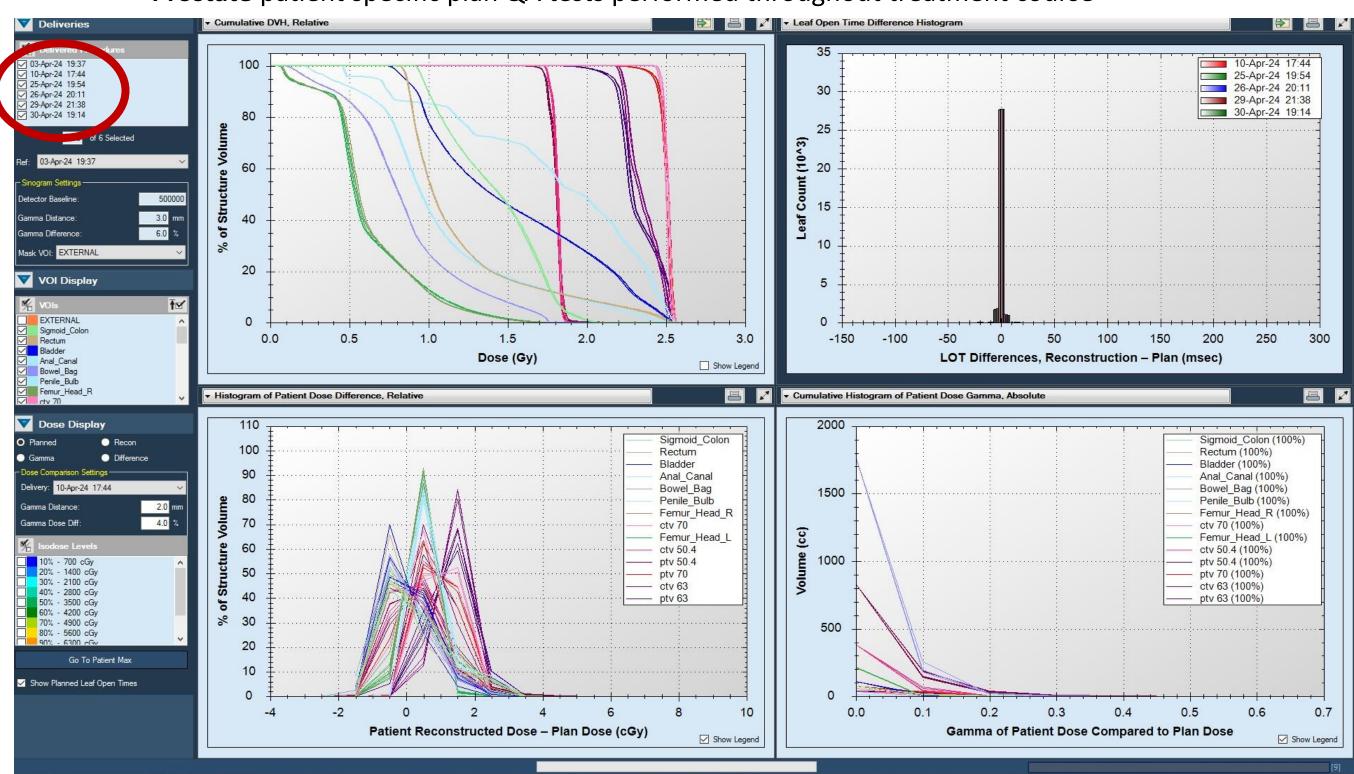


3. Results

- 1. γ-passing rates: global distribution>98%, individual structures >95%
- 2. γ -variation within treatment course <1%
- 3. Dose difference <2% in all cases

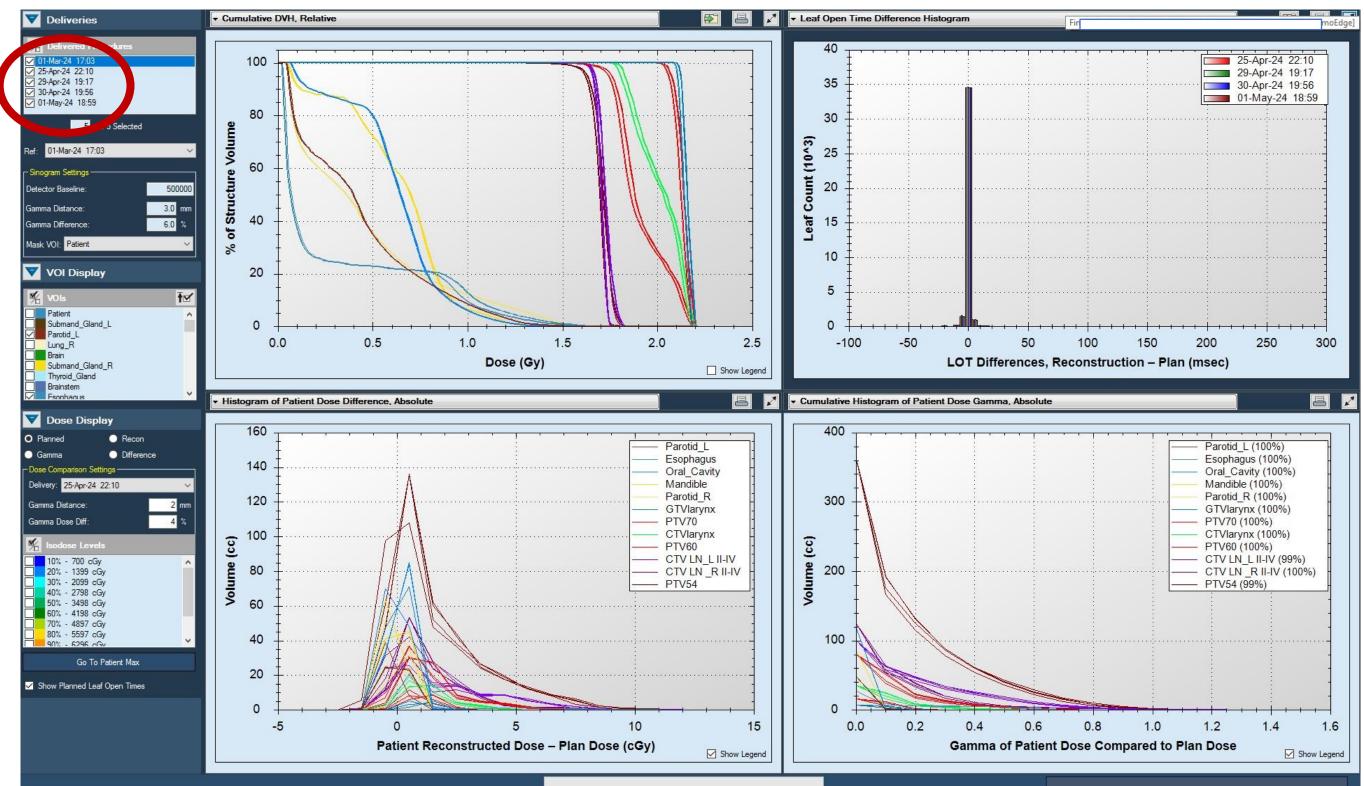






Prostate patient specific plan QA tests performed throughout treatment course





Head & Neck: patient specific plan QA tests performed throughout treatment course



Conclusions

- 1. IMRT + SIBs increases plans complexity
 - Delivery of highly modulated beam fluences •
- TomoTherapy is equipped with onboard imaging (Xe-based detector) 2.
- TomoTherapy onboard trend machine QA and treatment delivery monitoring tool 3.
- Onboard exit fluence measurements are crucial for treatment delivery and QA purposes 4.
- 5. Strict machine and patient plan QA procedures ensures reproducible plan dose distribution





- 1. Tolerance Limits and Methodologies for IMRT Measurement-Based Verification QA: Recommendations of AAPM Task Group No.218 (2018)
- 2. Delivery Analysis Software (Accuray Inc.), Manual Guide



