

RPC REPORT

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AAPM Proposal for an Imaging Physics Center

- * Per John Boone:
- * No concrete efforts to form an IPC
- * Boone has written a grant through AAPM to focus on quantitative imaging physics.
 - * Subcontractors: 5 universities including MDACC
- * A "virtual" center, not envisioning on-going NCI funding



ACRIN QA Committee

- * Function is similar to RTOG QC Committee
- * Committee reviews quality of data, timeliness of submissions
- * Also reviews individual member institutions
- * Discusses monitoring and auditing, and adverse events
- * RPC participates in these discussions



ATC Supported Protocols

* NCCTG N0577

* N0577: Phase III Intergroup Study of Radiotherapy versus Temozolomide Alone versus Radiotherapy with Concomitant and Adjuvant Temozolomide for Patients with Newly Diagnosed Anaplastic Oligodendroglioma or Anaplastic Mixed Glioma with Chromosomal Co-deletions of 1p and 19q

* GOG 0238

* A RANDOMIZED TRIAL OF PELVIC IRRADIATION WITH OR WITHOUT CONCURRENT WEEKLY CISPLATIN IN PATIENTS WITH PELVIC-ONLY RECURRENCE OF CARCINOMA OF THE UTERINE CORPUS

* GOG 0249

* A PHASE III TRIAL OF PELVIC RADIATION THERAPY VERSUS VAGINAL CUFF BRACHYTHERAPY FOLLOWED BY PACLITAXEL/CARBOPLATIN CHEMOTHERAPY IN PATIENTS WITH HIGH RISK, EARLY STAGE ENDOMETRIAL CARCINOMA

EORTC Collaboration

- * 24 EORTC Institutions participating in RTOG 0525
- * 21 EORTC institutions currently being monitored by RPC through agreement with EORTC
- * RPC monitors ~ 26 institutions of 45 we're aware of outside North America
- * ~ 100 EORTC institutions (combining all available lists)

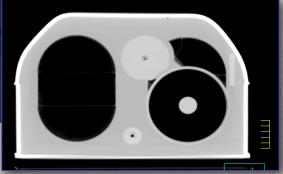


INFERER.

prostate IMRT: 8 in service

RPC Phantoms





thorax SBRT: 9 phantoms





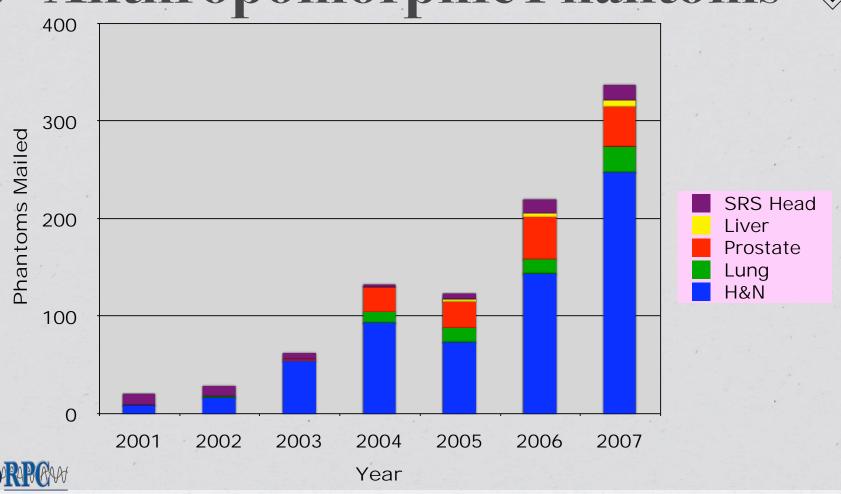


H&N IMRT: 31 in service

SRS: 2 in service, others sent by RDS

liver SBRT: 3, incl. motion

Credentialingwith Anthropomorphic Phantoms





Phantom Results

Comparison between institution's plan and delivered dose. Criteria for agreement: 7% or 4 mm DTA

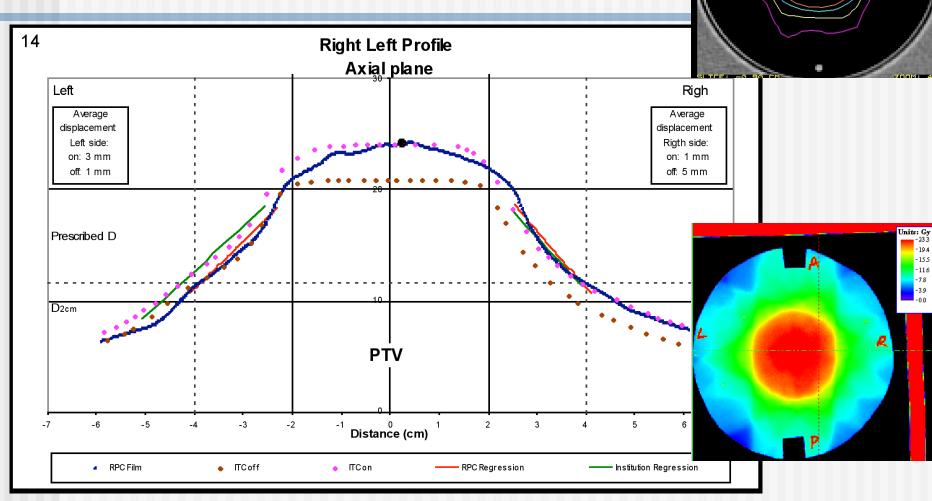
Site	Technique	Irradiations	Acceptable irradiations	Institutions acceptable
H&N	IMRT	558	425	377
Pelvis	IMRT	109	89	74
Lung	SBRT/ IMRT	55	42	35
Liver	SBRT	13	6	6
Bench- mark	IMRT	89 (19)	55 (18)	

Evaluation of Lung Phantoms

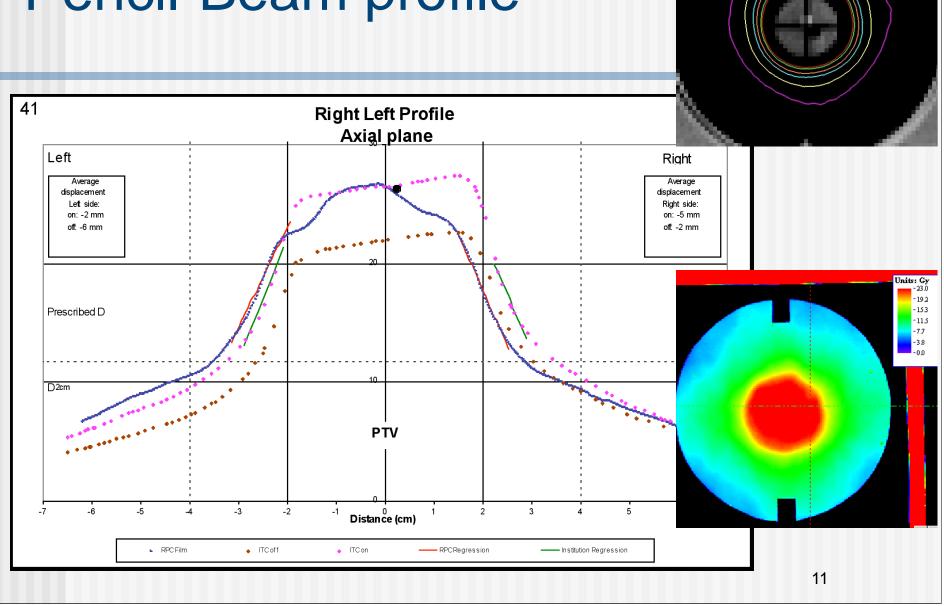
- * Asked to re-evaluate data at July RTOG meeting
 - * Promised to complete by 30 Sept.
 - * Functioning software delivered late December
 - * Analysis is under way



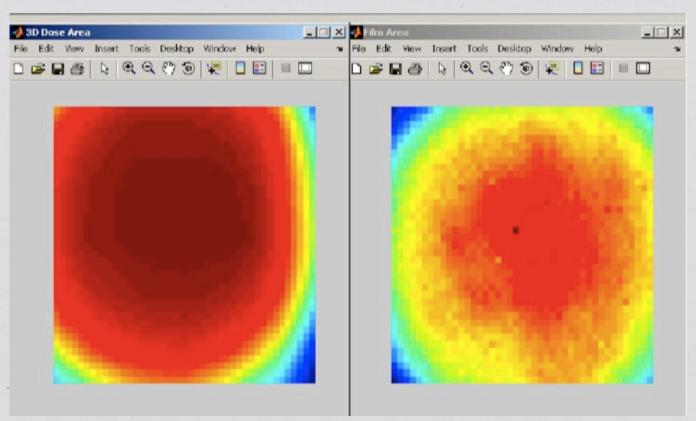
Convolution R-L Profile



Pencil-Beam profile

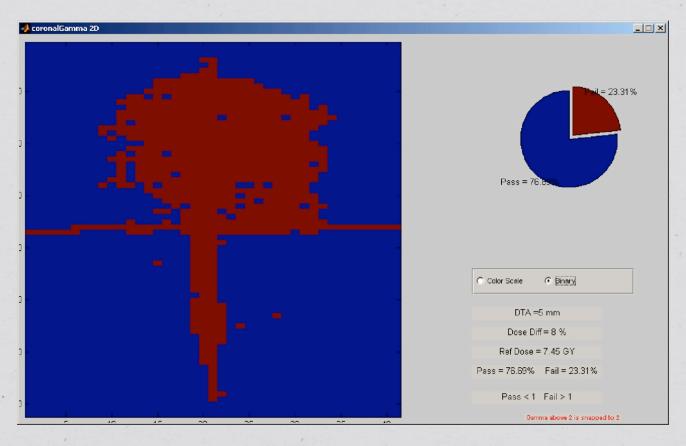


2D Gamma Index Evaluation "Good" Irradiation





2D Gamma Index Evaluation Failing Irradiation





Evaluation

* Criteria: 5% / 5 mm over PTV

* Percent of pixels passing: 92% - Axial

78% - Coronal

78% - Sagittal



Results

- * Systems with "good" algorithms, passing original criteria:
 - * 25/29 irradiations passed 2D Gamma Index
- * Systems with "poor" algorithms, passing original criteria:
 - * 3/18 irradiations passed 2D Gamma Index



0413 / B-39 Reviews

Review Type	Number
PBI	1566
WBI	1572
Patients with completed reviews	1085
Rapid Reviews	337
Timely Reviews	
Open Reviews	
Random Reviews	
DVA Scores	
Per Protocol	924
Minor corrections	
Major corrections	



0413 / B-39 Reviews

Review Type	Number
PBI	1566
WBI	1572
Patients with completed reviews	1085
Rapid Reviews	337
Timely Reviews	565
Open Reviews	145
Random Reviews	38
DVA Scores	
Minor corrections	
Major corrections	



0413 / B-39 Reviews

Review Type	Number
PBI	1566
WBI	1572
Patients with completed reviews	1085
Rapid Reviews	337
Timely Reviews	565
Open Reviews	145
Random Reviews	38
DVA Scores	
Per Protocol	924
Minor corrections	157
Major corrections	3
Repeat Timely Reviews	



RTOG 0417 Cervix Brachytherapy

- * 37 rad oncs submitted KAs. 16 pts registered.
 - * 10 cases reviewed by RPC and study chair:
 - * 7 per protocol
 - * 1 deviation unacceptable
 - * 2 chair can't evaluate, needs special viewer
 - * 4 cases inst has not submitted all data.
 - * 2 cases just started.





RTOG 0418 Endometrial or Cervix IMRT

- * RPC does rapid review for 1st patient from inst, 98 patients registered. Endometrial arm closed.
 - * 39 rapid reviews conducted
 - * 7 had to submit twice
 - * 2 had to submit three times



RTOG 0529 Anal Ca IMRT

- * RPC does rapid review for each patient. 63 cases submitted:
 - * 9 passed review on first submission
 - * 29 passed on second submission
 - * 25 required more than two submissions to pass



AAPM Posters/Presentations

- * The RPC's Evaluation of Advanced Technology Radiation Therapy
- * A Comparison of Heterogeneity Correction Algorithms
- * Identification of a 3D Dosimeter Best-Suited for Use by the RPC
- * Requirements for Addressing Respiratory Motion in Cooperative Group Clinical Trials
- * Comparisons of a Monte Carlo IMRT Plan Recalculation Results with the Pinnacle Treatment Planning System
- * Has IMRT Delivery Improved in the Last 5 Years?
- * Quality Audits of the Calibration for TG-51 Non-Compliant Beams by the Radiological Physics Center
- Deformable Lung Phantom for Verification of 4D Dose Calculations
- Verification of a Monte Carlo-Based Source Model for a Varian 10 MV Photon Beam



Development of Monte Carlo Calculations

- * Collaboration with Joe Deasy to develop MC code
 - * General source model
- * Evaluated Varian 6X
 - * IMRT with H&N phantom
 - * IMRT with lung phantom
- * Varian 10X under evaluation
- * Used ATC carryover funds to purchase server
- * RPC intends to use to evaluate IMRT and hetero calculations



Monte Carlo



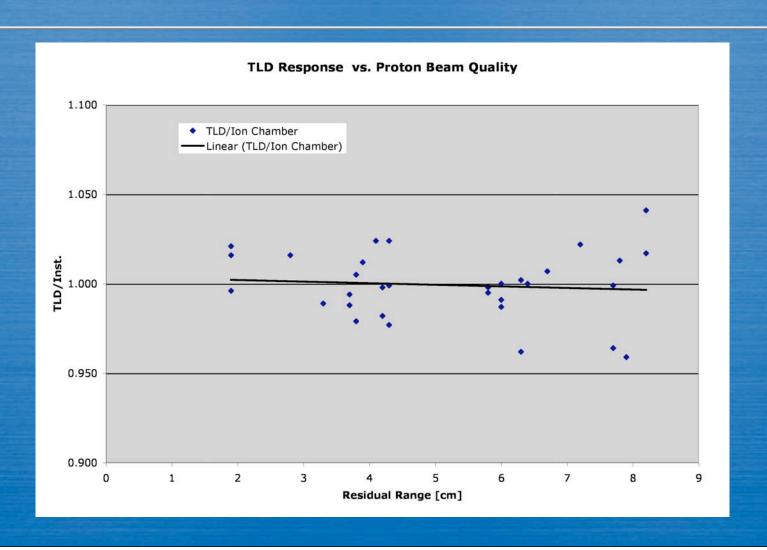


RPC Monitoring of Proton Therapy

- Questionnaire developed jointly with QARC
- TLD audits of basic calibration
- Dosimetry review visits
- Dose delivery evaluation with anthropomorphic phantoms

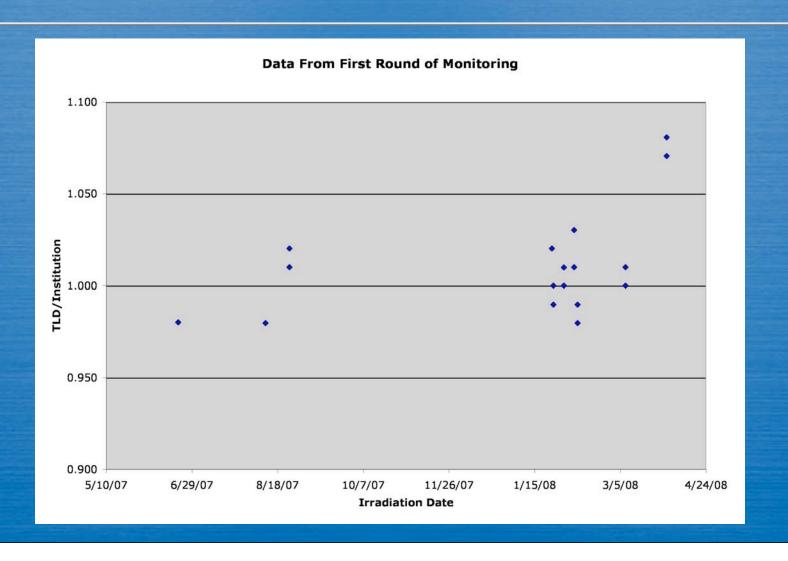


TLD Response vs Residual Range





First Round of Monitoring

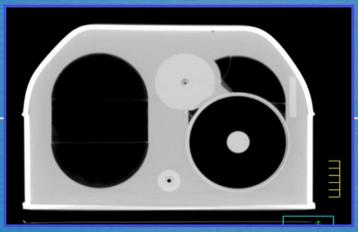


THE INTEREST

Pelvis (8)



RPC Phantoms



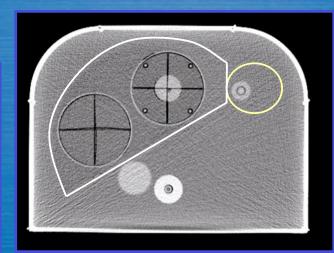
Thorax (9)



H&N IMRT (30)



SRS Head (4)



Liver (2)



