

THE UNIVERSITY OF TEXAS MDAnderson Cancer Center



An update on the dosimetric accuracy of different treatment planning system algorithms in the IROC lung phantom

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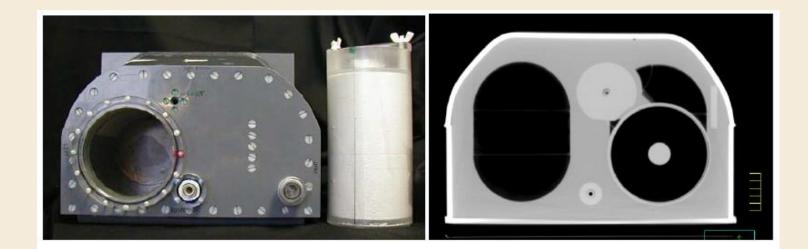
Imaging and Radiation Oncology Core

The University of Texas MD Anderson Cancer Center,

Houston, TX

IROC Lung phantom

- Assess dose in a heterogeneous environment
 - Following a clinical workflow
 - Moving phantom
- Dose assessment
 - 2 TLD in center of lung target (3 cm x 5 cm)
 - Film in 3 planes
- How accurate are current treatment planning systems?



Publication on this (2013)

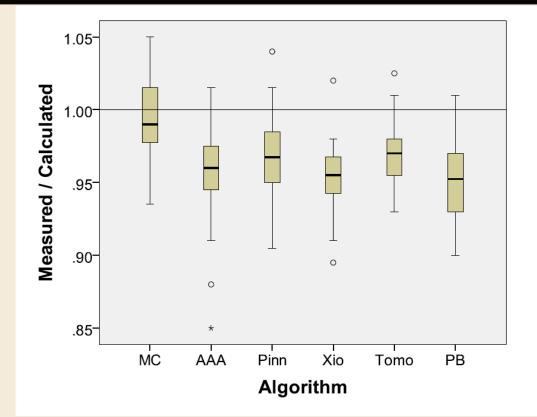
 There were <u>systematic</u> differences in dose calculation accuracy to the center of the target between different algorithms

> Physics Contribution Physics Contribution Algorithms Used in Heterogeneous Dose Calculations Show Systematic Differences as Measured With the Radiological Physics Center's Anthropomorphic Thorax Phantom Used for RTOG Credentialing Stephen E Kry PhD * Paola Alwarez MS * Andrea Moliney MS * Carrie Amador BS *

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TLD Dose Findings (2013)

- Dose to the center of the target
- Measured doses systematically lower than calculated doses for S/C and AAA algorithms (p<0.0001)
- No significant difference between C/S AAA algorithms
- MC results looked good
- For C/S AAA algorithms:
- No significant difference between IMRT (mean=0.963) and 3D CRT (mean=0.964) irradiations (p=0.7)
- No significant difference between moving (mean=0.961) and static (mean=0.964) irradiations (p=0.5)
- No significant trend versus irradiation date (p=0.2)



Status

Previous study

- Based on 304
 irradiations
- All Monte Carlo results combined (n=32)
- No Acuros

Present day

- 965 irradiations
- Monte Carlo can be divided (n=89):
 - Multiplan (n=50)
 - Monaco (n=19)
 - -iPlan (n=18)
- Acuros results (n=63)

How do the new results look Particularly compared to historical values?

Measured/Calculated Dose to the centre of the target (TLD)

- **Prior Results Updated Results** • AAA (n=98) • AAA (n=417) -0.959(0.003)• S/C (n=87) • S/C (n=360) -0.966 (0.002) • MC (n=32) • MC (n=89) -0.994 (0.005) Acuros Acuros (n=63) -N/A
 - 0.962 (0.001)¹ $0.968(0.001)^{1}$ $0.982(0.003)^2$ $0.991(0.004)^2$

S/C

- Previously, there were trends but no significant differences between any S/C algorithm
- New results, similar trends, some significant:

Algorithm	Ν	Meas/Calc	St. Dev of mean
XiO	39	0.961*	0.004
Pinnacle	250	0.967	0.002
Raysearch	13	0.973	0.004
Tomotherapy	53	0.977*	0.003

Monte Carlo results: Measured/Calculated (TLD)

- **Prior Results**
- N=32
 - -0.994 (0.005)
- 25/32 results were Multiplan

- **Updated Results**
- Overall (n=89)
 - 0.982 (0.003)
- Multiplan (n=50)
 - 0.992 (0.005)¹
- Monaco (n=19)
 - 0.971 (0.007)
- iPlan (n=18)
 - 0.970 (0.004)²

A few points

- Dose to center of target
 - -6 MV beam achieves electronic equilibrium
- Other IROC phantoms (homogeneous):
 - Average agreement between measurement and calculation:
 - within 1% (lbbott G et al. *Technol Ca Res Treat* 2006;5:481)
- Differences between algorithms have been seen
 - MC recalculations of S/C
 - Larger irradiated volumes in SBRT lung tumors when CS/AAA plans recalculated with MC
 - (Li Int J Radiat Oncol Biol Phys; 84;508:2012)

Conclusion

- SC/AAA overestimate dose to center of target in IROC thorax phantom (3.5%)
- Issue for dose calculation accuracy
 - (TG-65 goal: 1-2%)
- Potentially issue for dose reporting/prescribing
- Different Monte Carlo algorithms provided different levels of accuracy
- Many unknowns remain
- Acuros and Multiplan provide best accuracy

Thank You!

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