2010

Dosimetric Advantages of Active Tracking and Dynamic Dose Delivery

I. Buzurovic

Thomas Jefferson University and Hospitals

K. Huang

Thomas Jefferson University and Hospitals

M. Werner-Wasik

Thomas Jefferson University and Hospitals

T. Biswas

Thomas Jefferson University and Hospitals

J. M. Galvin

Thomas Jefferson University and Hospitals

Follow this and additional works at: <https://jdc.jefferson.edu/bodinejournal>

Part of the [Oncology Commons](#)

See next page for additional authors

[Let us know how access to this document benefits you](#)

Recommended Citation

Buzurovic, I.; Huang, K.; Werner-Wasik, M.; Biswas, T.; Galvin, J. M.; Dicker, A.; Yu, Y.; and Podder, T. (2010) "Dosimetric Advantages of Active Tracking and Dynamic Dose Delivery," *Bodine Journal*: Vol. 3 : Iss. 1 , Article 9.

DOI: <https://doi.org/10.29046/TBJ.003.1.008>

Available at: <https://jdc.jefferson.edu/bodinejournal/vol3/iss1/9>

This Article is brought to you for free and open access by the Jefferson Digital Commons. The Jefferson Digital Commons is a service of Thomas Jefferson University's [Center for Teaching and Learning \(CTL\)](#). The Commons is a showcase for Jefferson books and journals, peer-reviewed scholarly publications, unique historical collections from the University archives, and teaching tools. The Jefferson Digital Commons allows researchers and interested readers anywhere in the world to learn about and keep up to date with Jefferson scholarship. This article has been accepted for inclusion in Bodine Journal by an authorized administrator of the Jefferson Digital Commons. For more information, please contact: JeffersonDigitalCommons@jefferson.edu.

Dosimetric Advantages of Active Tracking and Dynamic Dose Delivery

Authors

I. Buzurovic, K. Huang, M. Werner-Wasik, T. Biswas, J. M. Galvin, A. Dicker, Y. Yu, and T. Podder

Dosimetric Advantages of Active Tracking and Dynamic Dose Delivery

Buzurovic, I., Huang, K., Werner-Wasik, M., Biswas, T., Galvin, J.M., Dicker, A., Yu, Y., Podder, T.

Department of Radiation Oncology, Thomas Jefferson University and Hospitals, Philadelphia, PA

Purpose

To investigate dosimetric effect of tumor tracking. To evaluate changes of treatment volumes when tracking is applied.

Method and Materials

Tumors in thorax region incur significant amount of motion and deformation due to respiratory and cardiac cycles. In this study, volumetric and dosimetric effect of tumor motion tracking have been investigated. We have analyzed data for ten patients who were diagnosed with lung cancer. In order to make dosimetry comparison, the treatment plan was made for each of ten phases of tumor motion. The dosimetric and volumetric effects were analyzed for two groups of tumor motion. In the first group tumor motion was up to 1.5cm, whereas for the second the motion was up to 2.5cm.

Results

It was observed that during respiratory cycle GTV was changed from 1-3cm³ for GTVs around 20cm³, 5cm³ for GTVs around 50cm³, and 20cm³ for GTVs of 100 cm³ and above, depending on tumor position and respiratory cycle itself. When active tracking was applied and tumor motion was up to 1.5 cm, irradiated PTV was from 20-30% less for medium size tumors and more than 50% for small size tumors. For tumor motion range up to 2.5cm, irradiated PTV was two times smaller when tracking is applied. It was noticed that V20 with tracking was from 2-15% less of V20 without tracking, for tumor motion up to 1.5cm. For tumors within motion range from 2.2cm to 2.5cm, V20 with tracking was from 11-30% less comparing to one without tracking. Calculating dose it was concluded that 20% of healthy lung approximately receives from 2Gy to 6Gy less when tumor tracking technique was used.

Conclusion

Implementation of real-time tracking techniques can minimize irradiation to healthy tissues and improve sparing of critical organs. Consequently, quality of patient treatment potentially can be improved.

Acknowledgement: Study supported by Elekta, Ltd.