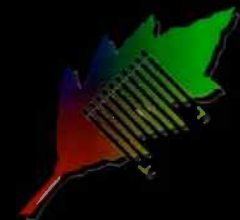


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**Correlation of Dosimetrical
Variables and Cytokines in NSCLC
Patients Treated with IG-IMRT**

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Background

Post RTOG 0617 era. Improving outcome in locally advanced NSCLC:

- Radiobiology - altered fractionations
- New systemic agents
- Biology

SBRT era. Widespread use of high ablative dose; the number of patients eligible for SBRT is likely to increase.

New challenges:

- interpretation of lung changes vs. PD
- foreseeing high risk patients for severe lung toxicity

Background

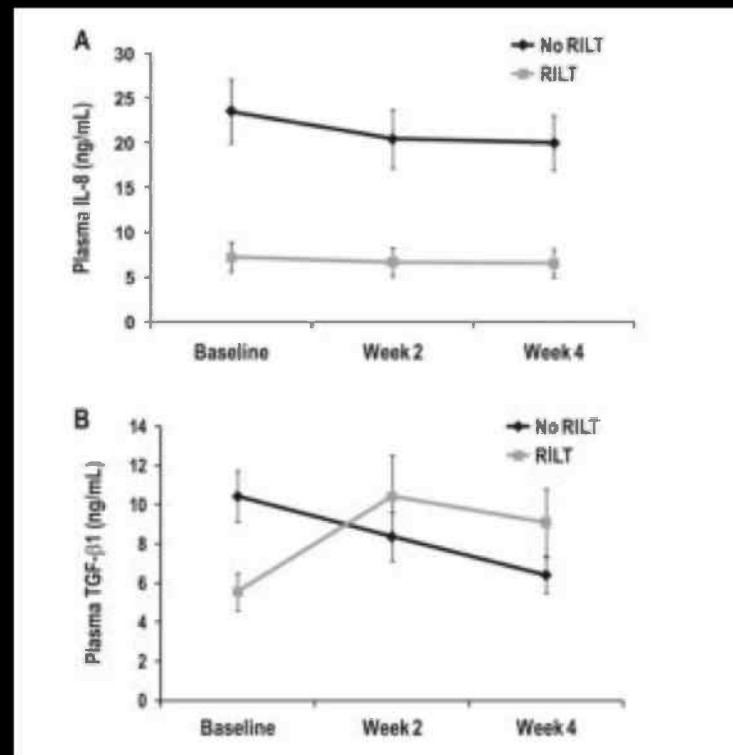
As part of Biology: cytokines!

Possible biomarkers:

- in the identification of patients at high risk for the development of radiation fibrosis
- differential diagnosis fibrosis vs. PD in SBRT
- in the identification of patients that might / might not benefit from dose-escalation
- surrogates of response

Rationale

A correlation exists between plasma levels of cytokines and side effects of RT to the lung



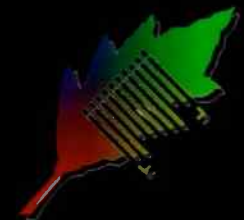
Rationale

Research has been conducted in this field with limitations:

- different studies assessed the role of *single* cytokines
- few molecules investigated
- no current endpoints (clinical –G2/4 pneumonitis)
- no conclusive results

Purpose

to investigate if a correlation exists between **dosimetrical variables** of the RT treatment and plasmatic levels of multiple **cytokines** in NSCLC patients treated with IG-IMRT.

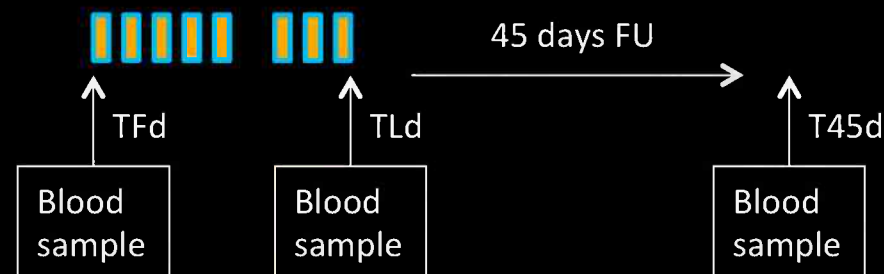


Methods and Materials

Ethics Committee Approval
Between May and December 2011

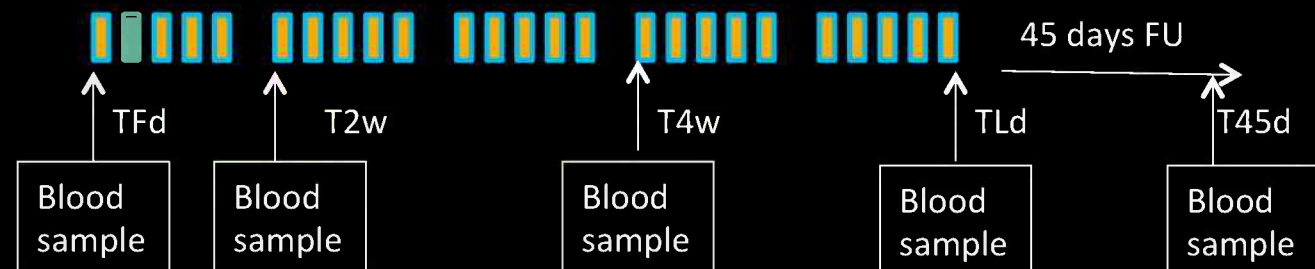
Early-stage:

SBRT 52 Gy/
8fr
15 patients



Locally-advanced:

IMRT 60 Gy/
25fr
13 patients



TFd: Time first day of RT; TLd: Time last day of RT; T45d: Time 45th day of follow-up; T2w: Time second week RT

Methods and Materials

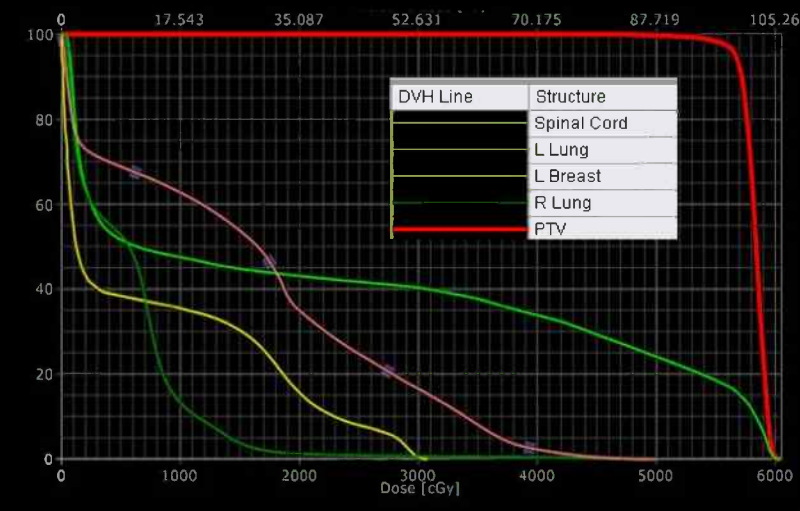
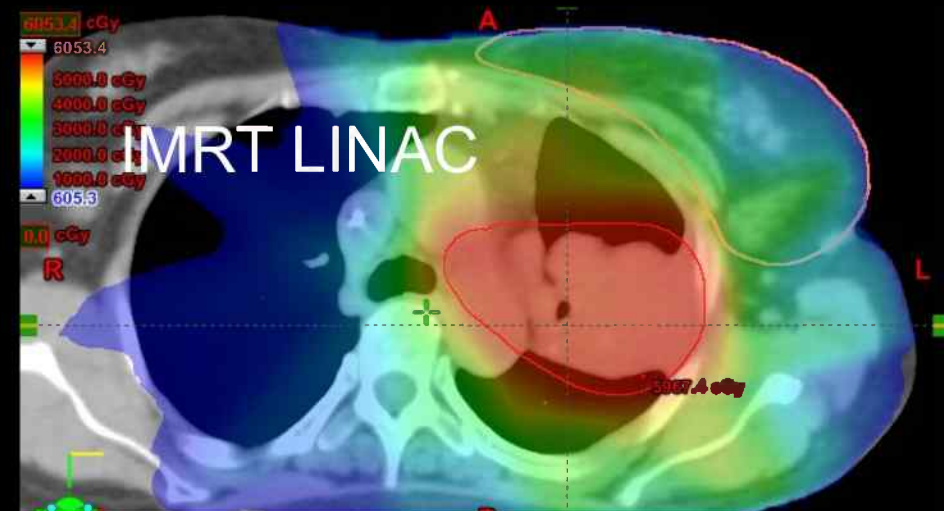
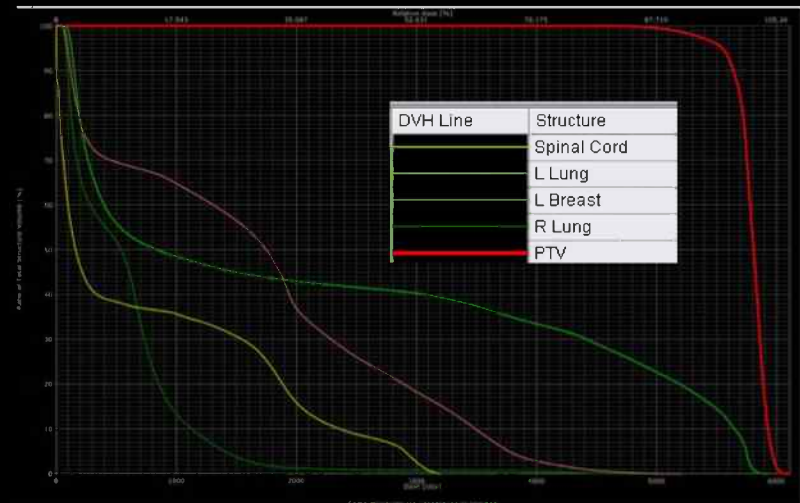
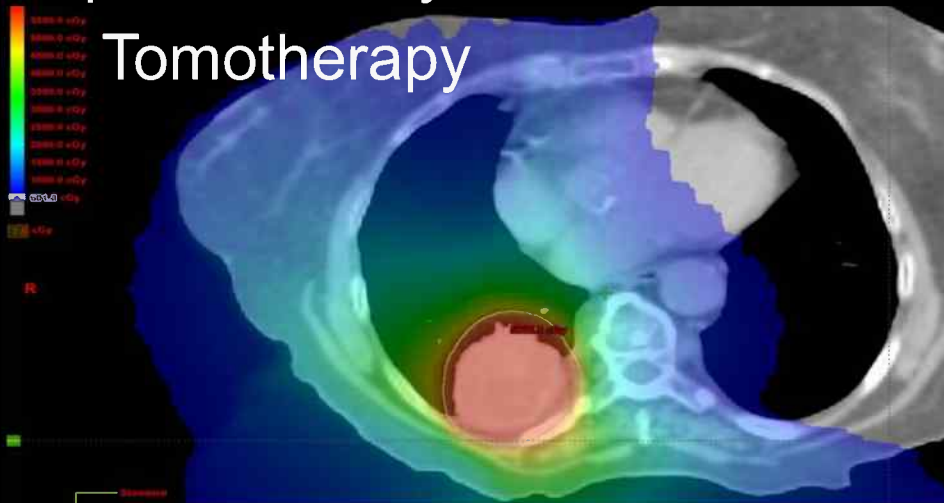
A multiplex parametric technology was used for quantification of the following cytokines:

IL-1, IL-1ra, IL-2, IL-4, IL-5, IL-6, IL-7, IL-8, IL-10, IL-12, IL-13, IL-15, IL-17,

EGF, FGF-2, INF- γ , MIP-1 α , MIP-1 β , TGF- α , VEGF, PDGF- α , PDGF- β

Methods and Materials

IMRT was delivered with the Tomotherapy Hi-Art II System or with a Varian LINAC (RA). Tomotherapy plans were exported to Eclipse for analysis.



Methods and Materials

The following **dosimetrical parameters** were extracted:

Variables related to ipsilateral lung:

Mean lung dose (MLD): 17.2 Gy (95% CI 3.7 - 30.1)

V20: 32.4 (95% CI: 6.1 - 59.1)

V5: 59.3 (95% CI: 16.3 - 94.6)

Variables related to PTV:

Size of PTV: 281.1 cc (95% CI: 25.4 – 975)

Average dose to PTV: 58.2 Gy (95% CI: 53.4 - 63.2)

Variables related to fractionation:

Average dose / fraction to PTV: 5.9 (95% CI: 2.4 - 10.9)

Number of fractions: 5, 8, 25

Statistical analysis

Correlations between dosimetric parameters and cytokines was performed using the Pearson linear correlation coefficient and the associated p -values computed using a Student's t distribution.

A matrix of p -values, showing only $p < 0.05$ was calculated to identify significant correlations

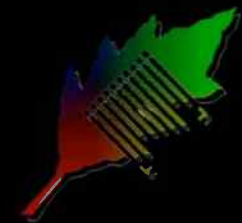
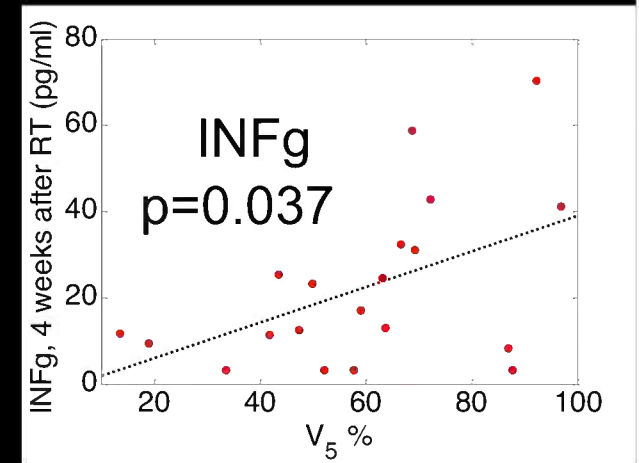
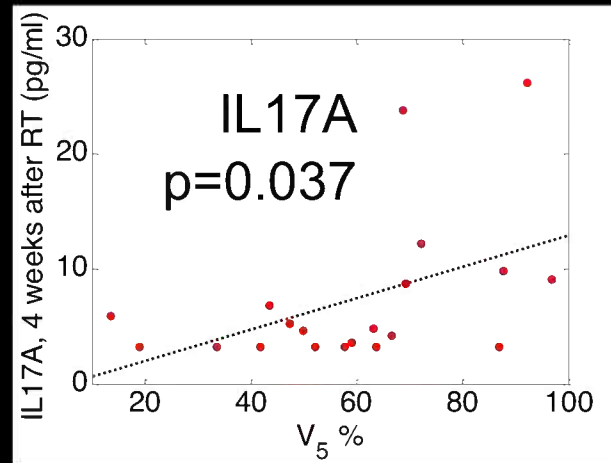
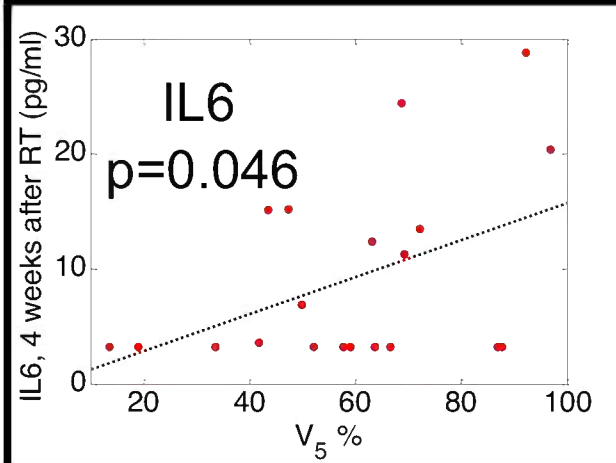
Dosimetrical variables

Measured Cytokines

	PTV size (cc)	V20 (Gy)	V5 (Gy)	MLD (Gy)	PTVave (Gy)	fractions	dose / fx (Gy)
IL1_0							
IL1ra_0							
IL2_0							
IL4_0							
IL5_0	0.009						
IL6_0							
IL7_0							
IL8_0	0.009						
IL10_0							
IL12_0							
IL13_0							
IL15_0							

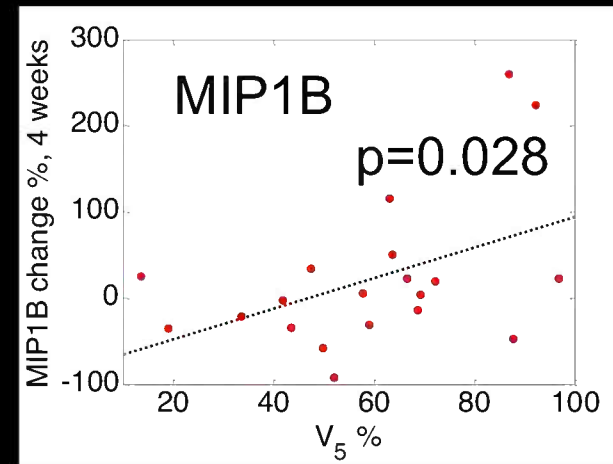
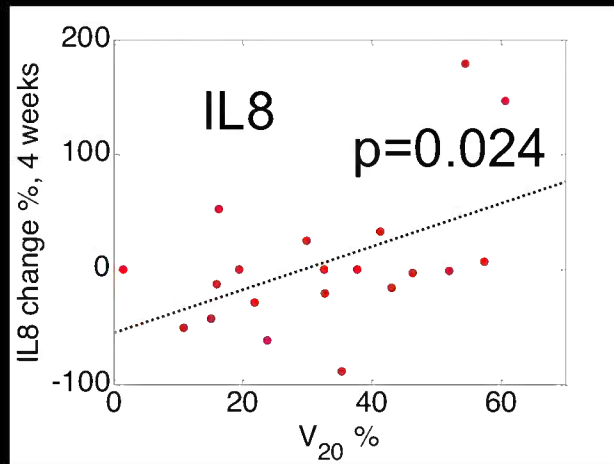
Results (2)

Ipsilateral Lung V5 was related to plasmatic value of IL6, IL17A and INF γ measured at 45 days after RT



Results (3)

Ipsilateral Lung V5 and V20 were also related to relative change in MIP1B and IL-8 45 days after RT



Conclusions

- PTV volume was related to some baseline cytokines values (IL-5, IL-8, VEGF).
- Dosimetrical lung variables (V5 and V20) were related to cytokines levels after completion of RT.
- All correlations were positive: an increase in dosimetrical parameters corresponded to an increase in cytokine plasmatic level
- No "fractionation effect" on cytokine levels.

