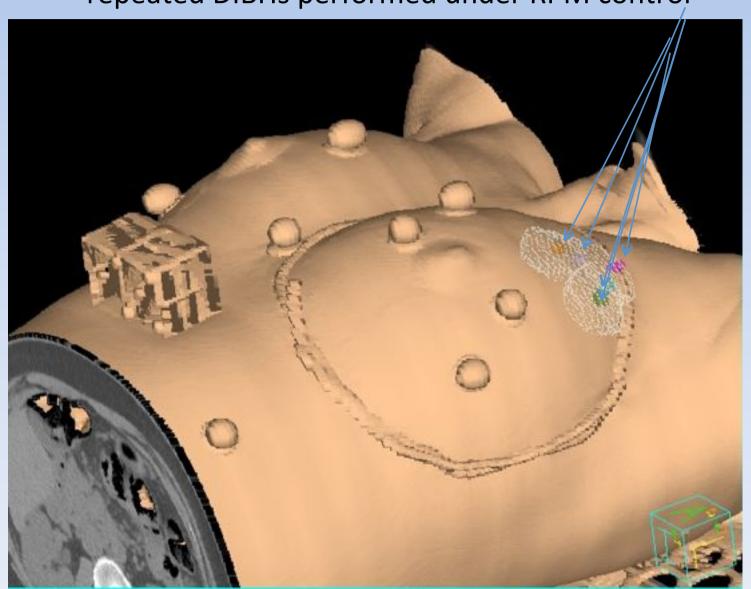


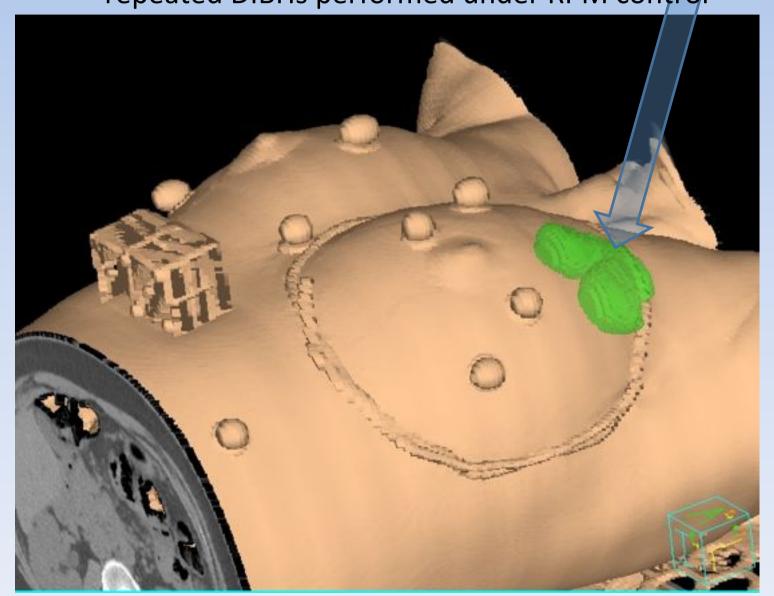
# Reproducibility and Accuracy of Deep Inspiration Breath-Holds (DIBH) Breast Radiotherapy Based on Real-Time Positioning Management through Surgical Clips Localization

G.Ivaldi<sup>1</sup>, A. Fassi<sup>2</sup>, M. Liotta<sup>3</sup>P. Tabarelli<sup>3</sup>,, I. Meaglia<sup>1</sup>, C. Bocci<sup>1</sup>, M. Riboldi<sup>2,4</sup>, P. Porcu<sup>1</sup>G. Baroni<sup>2,4</sup>,

<sup>1</sup>Fondazione Salvatore Maugeri, Department of Radiation Oncology, Pavia <sup>2</sup>Politecnico di Milano, Dipartimento di Elettronica Informazione e Bioingegneria, Milano <sup>3</sup>Fondazione Salvatore Maugeri, Medical Physics, Pavia <sup>4</sup>CNAO Foundation, Bioengineering Unit, Pavia Using surgical clips implanted in the tumor bed we evaluated reproducibility and accuracy of the internal target position in repeated DIBHs performed under RPM control

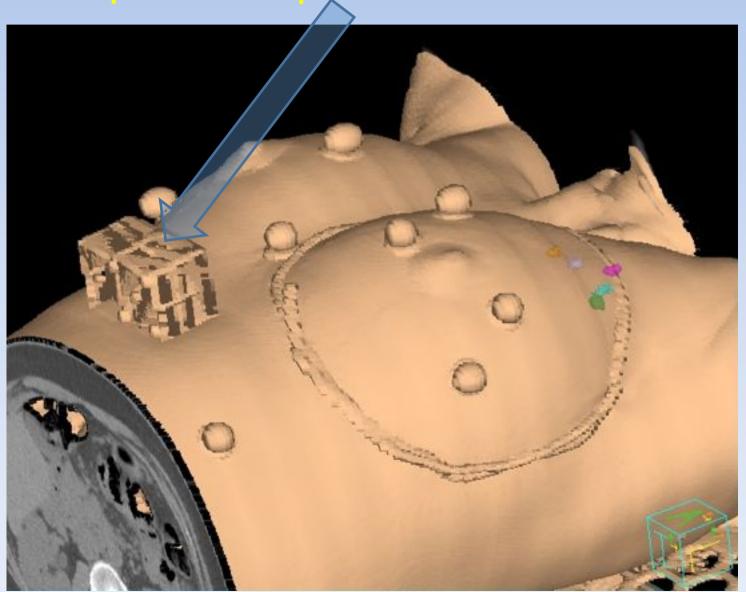


Using surgical clips implanted in the tumor bed we evaluated reproducibility and accuracy of the internal target position in repeated DIBHs performed under RPM control



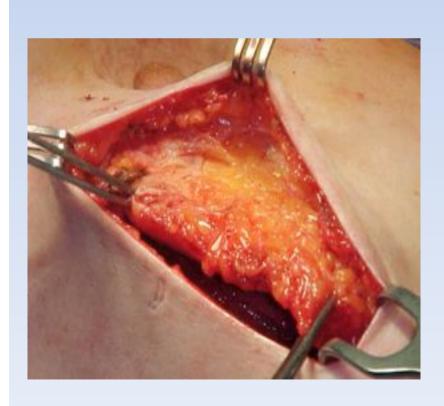
Using surgical clips implanted in the tumor bed we evaluated reproducibility and accuracy of the internal target position in

repeated DIBHs performed under RPM control



# **MATERIALS/METHODS**

- 8 left-breast cancer patients
- 3 to 6 titanium clips in the excision cavity walls
- Planning CT scan during single DIBH RPM based

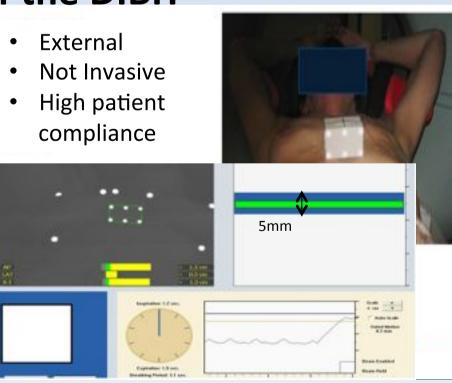




#### **MATERIALS/METHODS**

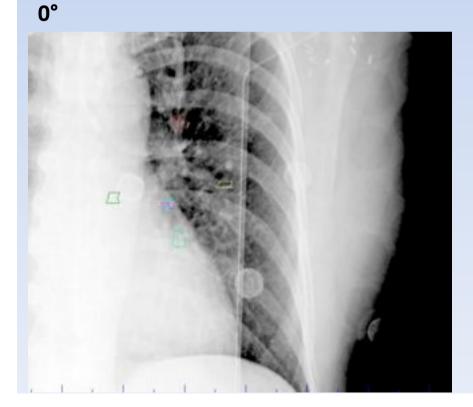
- whole-breast RT with tangential beams
- DIBH Varian® RPM based
- marker block placed on the pts' abdomen
- 5 mm tolerance interval of the DIBH





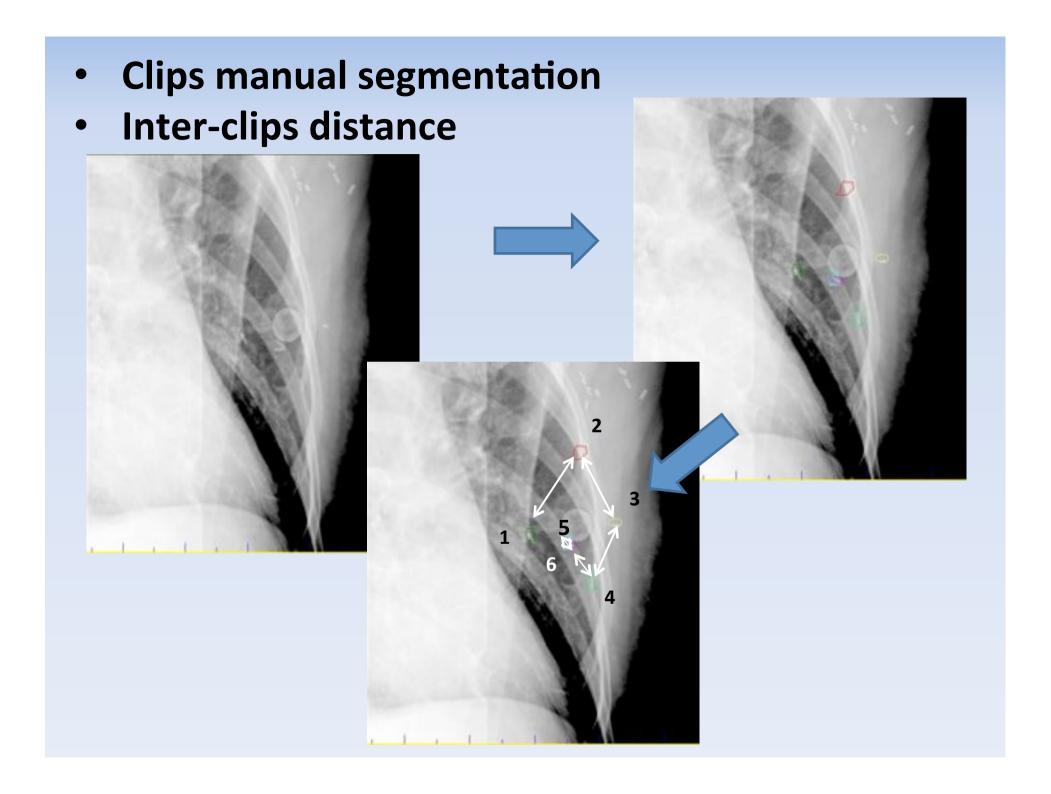
## **WORKFLOW**

- 12-18 fx after EPID setup correction → DIBH
- 0°-315° kV-OBI images during DIBH for clips identification



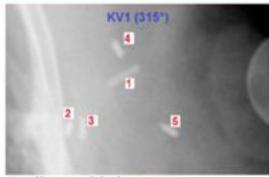




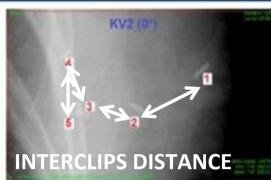


#### INTERNAL TARGET POSITION

Manual selection of 2D clips position in the two acquired radiographic images



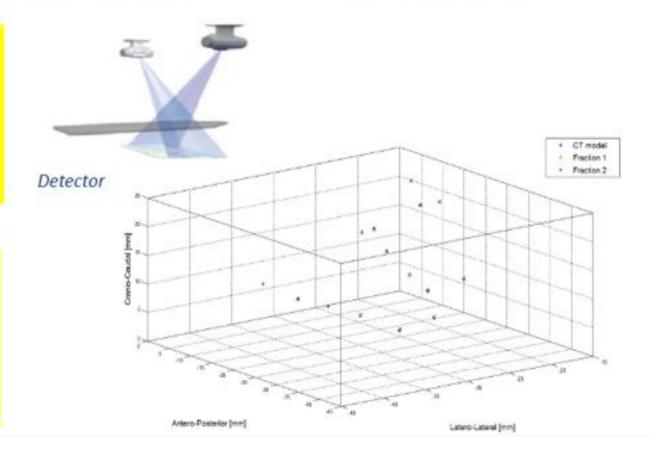
Radiographic image 1



Radiographic image 2

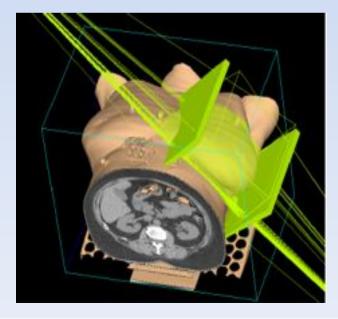
Reconstruction of 3D clips position (triangulation technique)

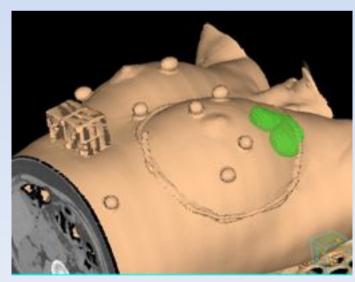
Calculation of 3D distance between treatment and CT model positions of internal clips



# 1.Reproducibility: displacement around median value (fx 1,2,3......)

2.Accuracy: displacement around reference value (fx 1 vs CT, fx 2 vs CT......)





#### Results (I)

Reproducibility: Median of SD of Clips Displacements

all fractions

Direction	Median of SD, all sessions (mm)
Latero-lateral	1.7 [range 1.3-3.0]
Antero-posterior	2.2 [range 1.7-3.2]
Cranio-caudal	2.8 [range 1.1-4.8]

Accuracy: Absolute Clips Displacements from reference CT

position

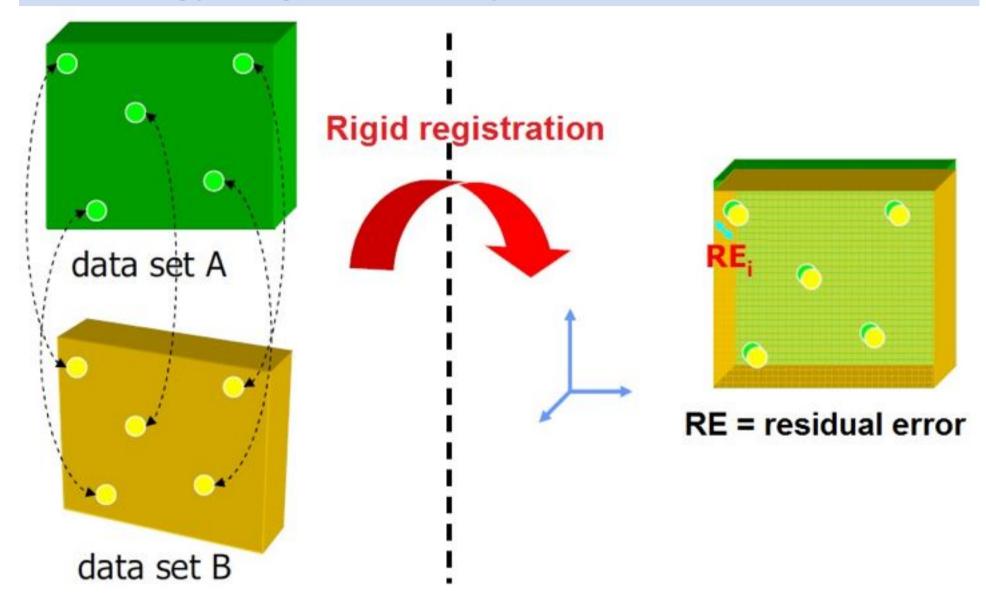
Direction	Mean all pts, all sessions (mm)
Latero-lateral	3.6 ± 1.7
Antero-posterior	2.6 ± 1.2
Cranio-caudal	2.8 ± 1.4

#### **Conclusions (I):**

RPM-based control for DIBH left-breast <u>radiotherapy</u> guarantees an adequate reproducibility and accuracy of the clips implanted in the surgical bed considering the adopted tolerance level

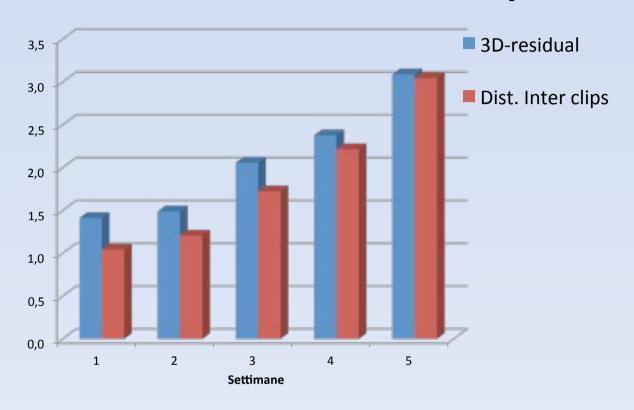
#### RIGID REGISTRATION → 3D RESIDUAL ERROR

minimizing planning and treatment clips distance



### Results (II)

#### **3D Residual Error and Inter-Clips Distance**



#### **Conclusions (II):**

The increasing residual error during therapy implies the possibility of lumpectomy cavity variation. As a matter of fact we observed a corresponding increasing variation of inter-clips distance

#### "The Discovery" 1956



Grazie

#### **FUTURE RESEARCH**

- Dosimetric implications for surgical bed
- Passive markers on skin surface
- Deformable registration → CT volume and other structurs
- Dosimetric implications for all CTVs and OAR