# Evaluation of heterogeneity correction algorithms through the irradiation of a lung phantom

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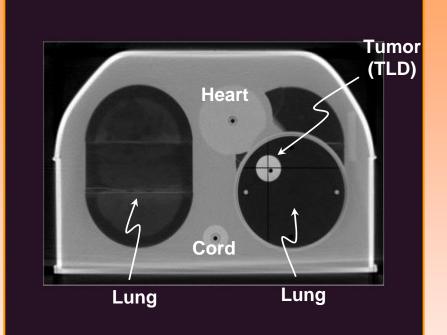
AAPM, Orlando FL, 2006





### **RPC Lung phantom**





#### Water fillable plastic shell

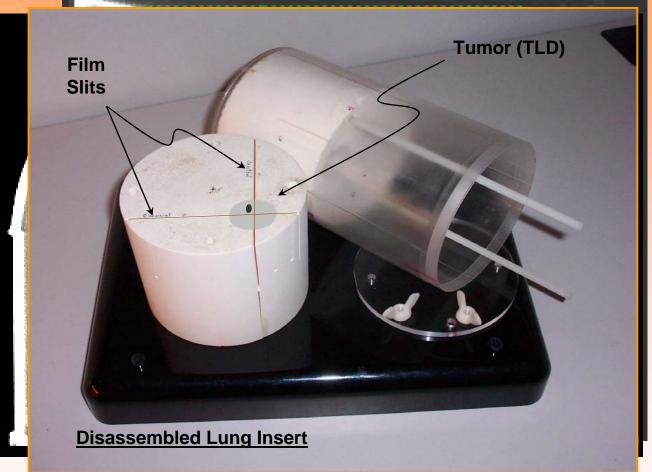
#### Include •different structures •imaging and dosimetry insert



# **RPC Phantom**

#### **Tumor dimension**

Ovoid shape 3 cm diameter 5 cm long **Densities** Lung = 0.33g/cm<sup>3</sup> Heart, cord = 1.1 g/cm<sup>3</sup> Cord = 1.31 g/cm<sup>3</sup> Tumor = 1.04 g/cm<sup>3</sup>



#### **Dosimeters** TLD and Gafchromic film



# Prescription

### •Based on RTOG 0236 (SBRT Radioablation study)

- Energies: 4 10 MV
- $\geq$  7 non-opposing static fields or  $\geq$  340° arc rotation technique.
- SBRT technique.
- 20 Gy/fx to 95% of the PTV
- Homogeneous planning and calculation of M.U.
- Must submit heterogeneous plan based on homogeneous M.U. set



### **Phantom Results**

- A total of 21 irradiations were analyzed
- The 6 MV photon beam was used most often
- The TPS used to plan the cases were: Pinnacle,
  BrainLab, XiO, Precise, Eclipse, Ergo and RenderPlan.
- Convolution Superposition algorithm was used most often.



## **Phantom Results**

**Center of Tumor** 

			TPS
TPS	<b>Dose Calc. Algorithm</b>	# irradiations	<b>D</b> <sub>hetero</sub> / <b>D</b> <sub>homo</sub>
Precise	Scatter Int. Clarkson	2	1.19 ± 2.6%
BrainLab	<b>Clarkson &amp; Pencil beam</b>	4	<b>1.21 ± 0.1%</b>
Eclipse	Pencil Beam	2	1.19 ± 4.6%
Ergo	3D Convol Poncil Room	1	1.19 ± 0.1%
RenderPlan	Change Clearly, the		1.20
	two group	oings	
Pinnacle	Adaptive convolve	8	1.13 ± 2.1%
XiO	Superposition/Convolution	3	1.12 ± 2.4%



## **Phantom Results (cont'd)**

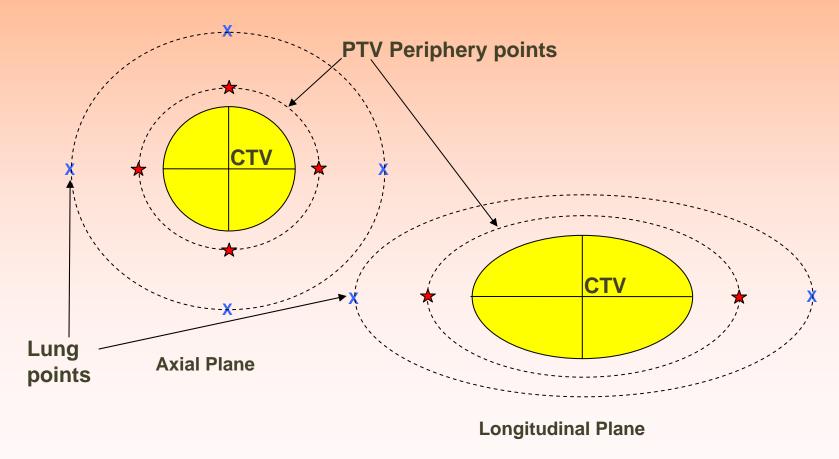
**Center of Tumor** 

Measured **Dose Calc. Algorithm** TPS **# irradiation D**<sub>TLD</sub>/**D**<sub>hetero</sub> Precise **Scatter Int. Clarkson** 2  $0.99 \pm 3.1\%$ **BrainLab Clarkson & Pencil beam**  $0.96 \pm 2.7\%$ 4  $0.97 \pm 1.6\%$ **Pencil Beam** 2 **Eclipse 3D Convol. Pencil Beam**  $0.98 \pm 3.2\%$ Ergo 1 **Change in primary** attenuation **RenderPlan** 0.92 1  $0.99 \pm 2.3\%$ **Pinnacle** 8 Adaptive convolve **XiO** Superposition/Convolution 0.96 1

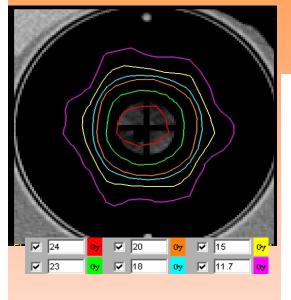
### **PTV Periphery and Lung Points**

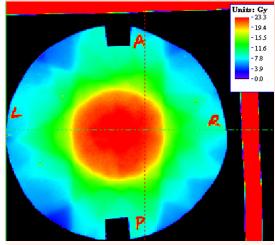
#### PTV = Tumor (CTV) + 0.5 cm in axial plane + 1 cm in longitudinal plane.

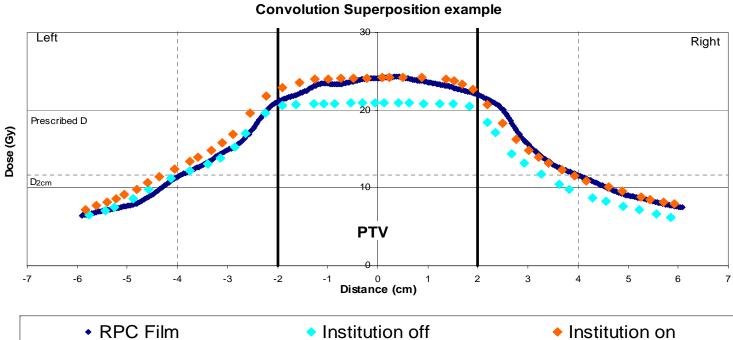
#### Lung constraint: points 2 cm from the PTV



## **Profile analysis**



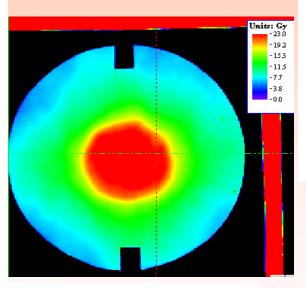




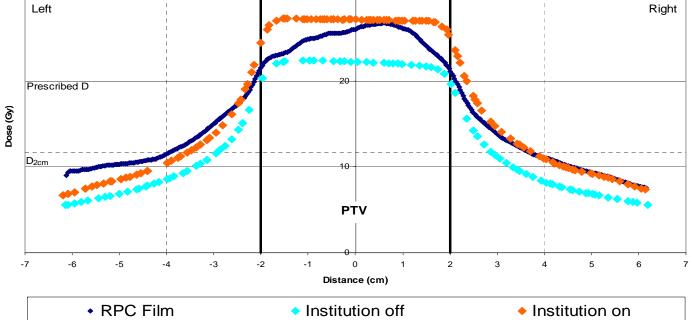
**Right Left Profile** 



#### -✓ 15 24 20 Gy бу ✓ 11.7 23 18 Gy Gy







**Right Left Profile** Clarkson example



### **Profile analysis**

# **Phantom Results (PTV Periphery)**

			TPS	
TPS	<b>Dose Calc. Algorithm</b>	# irradiation	<b>D</b> <sub>hetero/</sub> <b>D</b> <sub>homo</sub>	
Precise	Scatter Int. Clarkson	2	1.21 ± 2.7%	
BrainLab	Clarkson & Pencil beam	1	1.26 ± 3.5%	
Eclipse	Pencil Beam	2	1.18 ± 4.0%	
Ergo	<b>3D Convol. Pencil Beam</b>	2	1.19 ± 1.8%	
Pinnacle	Adaptive convolve	8	1.04 ± 6.1%	
XiO	Superposition/Convol.	2	1.11 ± 6.4%	
	Two separat groupings aga			
	groupings aga	ain		



# **Phantom Results (Lung points)**

			TPS	
TPS	<b>Dose Calc. Algorithm</b> <i>‡</i>	# irradiation	D <sub>hetero/</sub> D <sub>homo</sub> Axial plane	
Precise	Scatter Int. Clarkson	2	1.19 ± 4.2%	
BrainLab	Clarkson & Pencil beam	1	1.23 ± 5.7%	
Eclipse	Pencil Beam	2	1.18 ± 11.2%	
Ergo	<b>3D Convol. Pencil Beam</b>	2	1.20 ± 5.3%	
Pinnacle	Adaptive convolve	8	<b>1.12 ± 6.0%</b>	
XiO	Superposition/Convol.	2	1.14 ± 6.5%	
	Two separat groupings aga			



# Phantom Results (PTV Periphery) Measurements

#### **PTV Periphery**

measured

TPS	<b>Dose Calc. Algorithm</b>	# irradiation	<b>D</b> <sub>film/</sub> <b>D</b> <sub>hetero</sub>	
Precise	Scatter Int. Clarkson	2	0.88	
BrainLab	Clarkson & Pencil beam	1	0.79	
Eclipse	Pencil Beam	2	0.92	
Ergo	<b>3D Convol. Pencil Beam</b>	2	0.84	
Pinnacle	Adaptive convolve	8	0.98	
XiO	Superposition/Convol.	1	0.96	
	Two sepa groupings			



# Conclusions

- The average tumor TLD/Inst ratio is 0.97 (range 0.92 to 0.99). Good agreement for Convolution Superposition algorithms in the tumor.
- Large differences exists between the Convolution Superposition
  heterogeneity corrected dose calculations and other algorithms (ratios of 1.13 vs. 1.20).
- Heterogeneity corrected doses at the PTV periphery and lung points are higher than uncorrected doses.
- The Convolution Superposition algorithm calculations agree with the RPC measurements.

