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STEREOTACTIC
RADIOSURGERY

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DOSE CALCULATION
ALGORITHM

QUALITY
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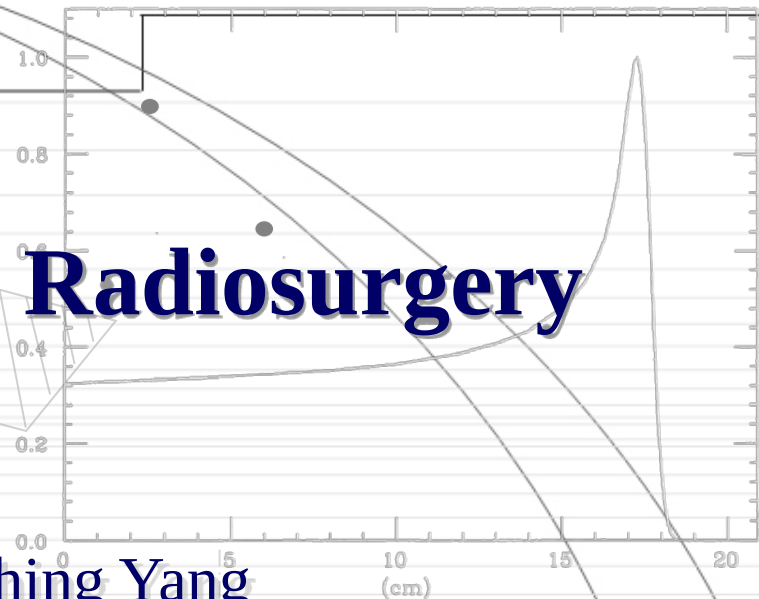
Stereotactic Radiosurgery

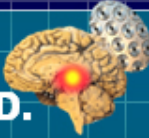
Chih-Ching Yang

2015.09.08

楊智清

relative
dosimetry





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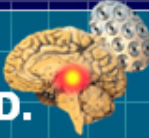
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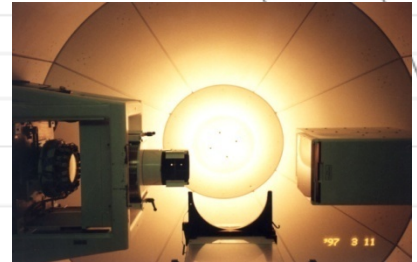
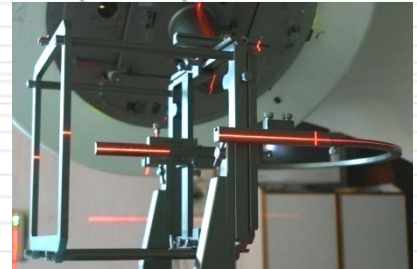
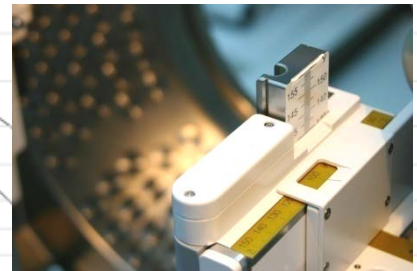
- The term radiosurgery was coined by a neurosurgeon Lars Leksell in 1951.
- Stereotactic radiosurgery (SRS) is a **single fraction** radiation therapy.
- Stereotactic apparatus and narrow multiple beams delivered through **noncoplanar isocentric arcs**.
- A high degree of dose conformity is a hallmark of SRS.
- Maximum error of **± 1.0 mm**



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SRS and SRT

- Cobalt-60 gamma rays
- Megavoltage x-rays
- Heavy charged particles



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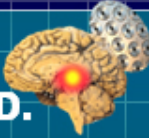
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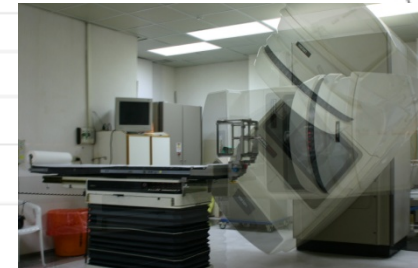
X Knife

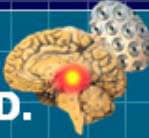
Stereotactic Radiosurgery

The linac-based SRS technique consists of using **multiple noncoplanar arcs** of circular beams converging on to the machine isocenter, which is stereotactically placed at the center of imaged target volume.



multiple noncoplanar arcs





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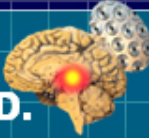


Stereotactic Frame

X Knife

- There are basically two linac-based SRS systems: **pedestal-mounted frame** and **couchmounted frame**. Which is attachable to the patient's skull as well as to the couch or pedestal.
- The most noteworthy of the SRS frames are: Leksell, Riechert-Mundinger, Todd-Wells, and Brown-Robert-Wells (**BRW**).
- A special relocatable head ring, called the Gill-Thomas-Cosman (**GTC**), has been designed for fractionated SRT.
- The CT **localizer frame** is equipped with nine **fiducial rods**, which appear as dots in the transaxial slice image.

Stereotactic Frame	Linac Isocentric Accuracy	Stereotactic Accuracy	Overall Accuracy	Beam Collimation
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Stereotactic Frame

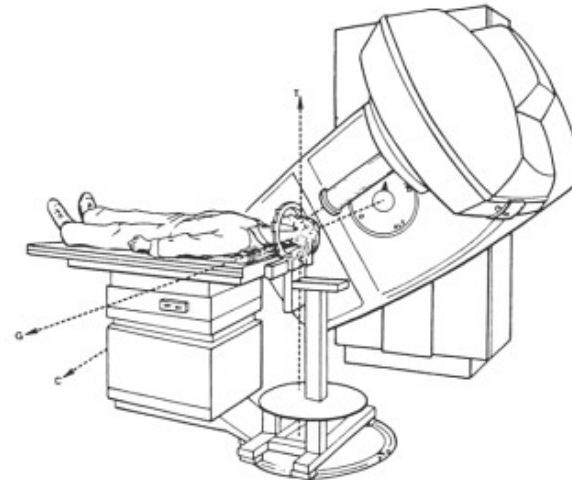
X Knife

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External Beam Stereotactic Radiosurgery Physics

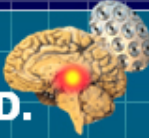
195

Fig. 10.1. The Joint Center hardware configuration, with the BRW pedestal mounted on the PSA base plate. The stereotactic frame is attached to the stand with the target positioned at the locus of the rotation axes of the gantry, table, and collimator



Radiation Therapy Physics; Alfred R. Smith P.195

Stereotactic Frame	Linac Isocentric Accuracy	Stereotactic Accuracy	Overall Accuracy	Beam Collimation
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Stereotactic Frame

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couchmounted frame

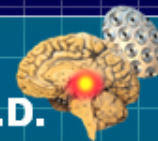
<http://houshasen-chiryou.com/advanced/machine/>

Stereotactic Frame	Linac Isocentric Accuracy	Stereotactic Accuracy	Overall Accuracy	Beam Collimation
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STEREOTACTIC RADIOSURGERY

CHAPTER 21

THE PHYSICS OF RADIATION THERAPY
THIRD EDITION FAIZ M. KHAN, Ph.D.



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Stereotactic Frame

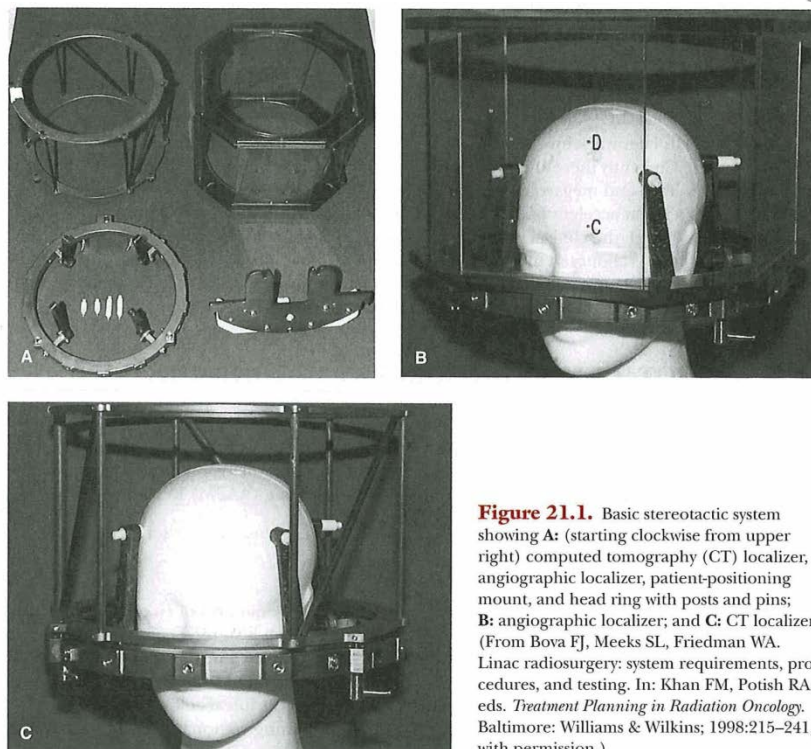


Figure 21.1. Basic stereotactic system showing A: (starting clockwise from upper right) computed tomography (CT) localizer, angiographic localizer, patient-positioning mount, and head ring with posts and pins; B: angiographic localizer; and C: CT localizer. (From Bova FJ, Meeks SL, Friedman WA. Linac radiosurgery: system requirements, procedures, and testing. In: Khan FM, Potish RA, eds. *Treatment Planning in Radiation Oncology*. Baltimore: Williams & Wilkins; 1998:215–241, with permission.)

X Knife

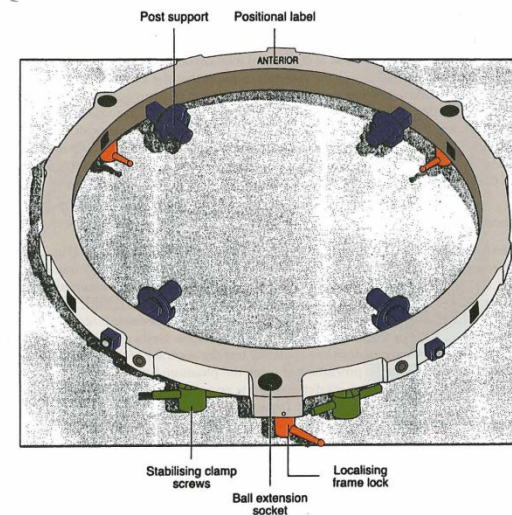
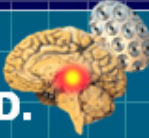


Figure 21.2. Schematic drawing of Brown-Robert-Wells frame. (From Cho KH, Gerbi BJ, Hall WA. Stereotactic radiosurgery and radiotherapy. In: Levitt SH, Khan FM, Potish RA, et al., eds. *Technological Basis of Radiation Therapy*. Philadelphia: Lippincott Williams & Wilkins; 1999:147–172, with permission.)

Stereotactic Frame	Linac Isocentric Accuracy	Stereotactic Accuracy	Overall Accuracy	Beam Collimation
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1/24/2004 10:07



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X Knife

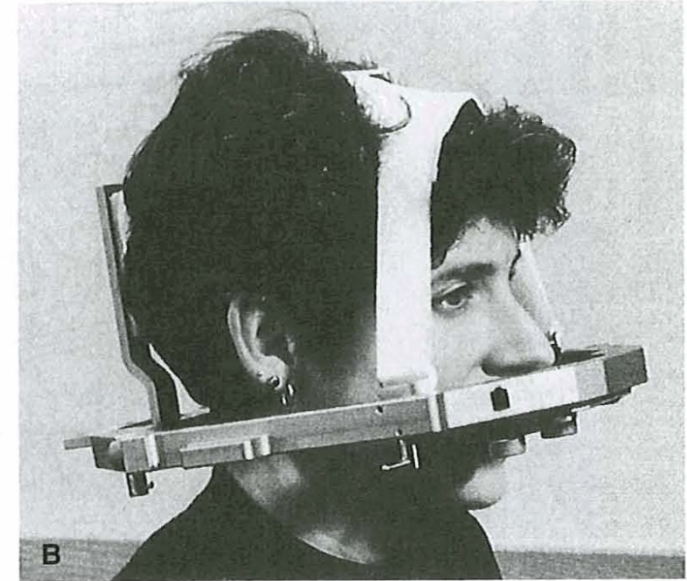
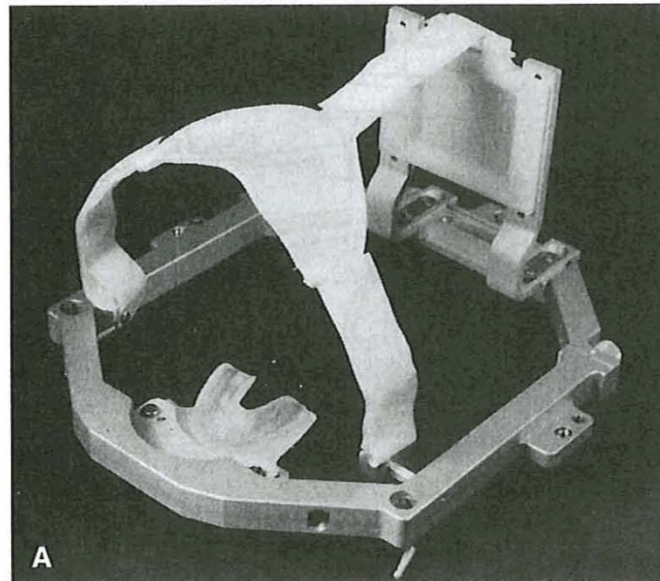
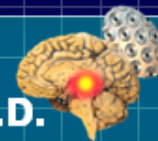


Figure 21.3. A: The Gill-Thomas-Cosman (GTC) relocatable head ring with bite block and Velcro straps. B: The GTC head ring worn by the patient. (From Cho KH, Gerbi BJ, Hall WA. Stereotactic radiosurgery and radiotherapy. In: Levitt SH, Khan FM, Potish RA, et al., eds. *Technological Basis of Radiation Therapy*. Philadelphia: Lippincott Williams & Wilkins; 1999:147–172, with permission.)

Stereotactic Frame	Linac Isocentric Accuracy	Stereotactic Accuracy	Overall Accuracy	Beam Collimation
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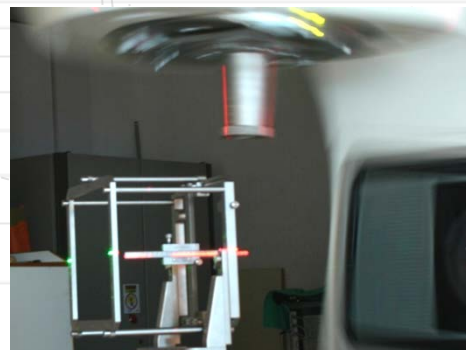


Beam Collimation

X Knife

Long circular cones

- As stated previously, attachment of long cones below the x-ray jaws extends the SDD, thus reducing the geometric penumbra.
- cone – from 1.25 to 5.00 cm step 0.25 cm
- 15-cm-long circular cones



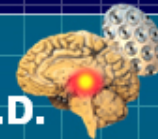
Stereotactic Frame

Linac Isocentric
Accuracy

Stereotactic
Accuracy

Overall Accuracy

Beam Collimation

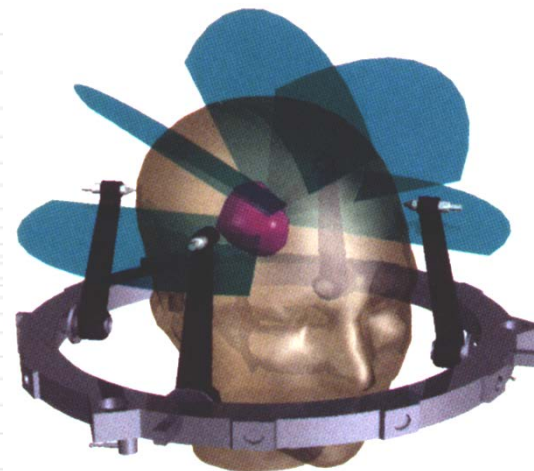


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Clinical Applications

- 非侵襲性(Noninvasive)
- 聚焦式放射手術(Focal Irradiation)
- 單次高劑量(Single Treated & High Dose)
- 高準確性定位(High Positional Accuracy)
- 小體積腫瘤(Small Volume)

X Knife



Stereotactic Radiosurgery

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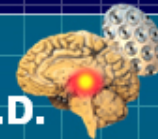
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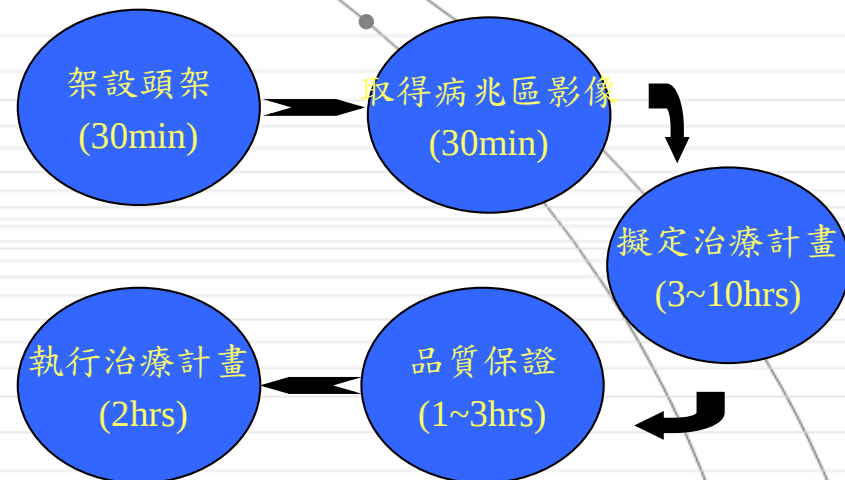


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Clinical Applications

X Knife

- 將病患以Radionics BRW系統固定頭部及當做定位座標
- 利用電腦斷層取得3mm一張之病兆區影像
- 利用XKnife-3治療計畫軟體擬定治療參數
- 依照治療計畫做品質保證，以確保定位誤差在 $\pm 1\text{mm}$ 內
- 使用Varian直線加速器4MV治療病患

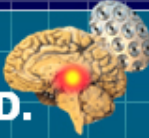


療程7~16小時

治療流程

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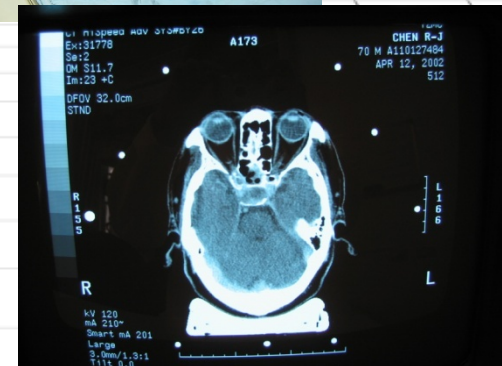
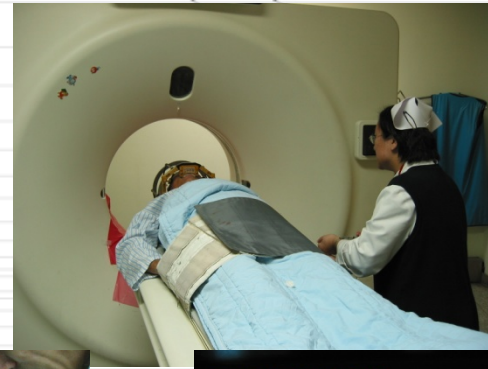
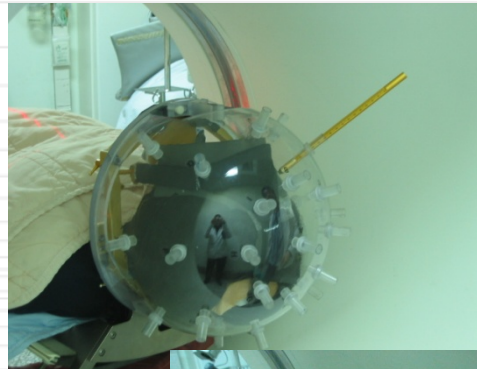
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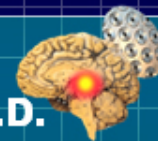
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取得影像及影像處理

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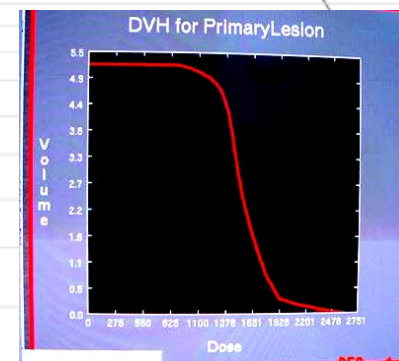
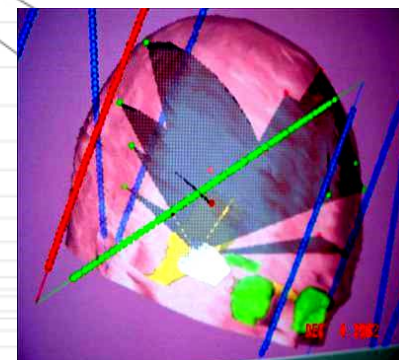
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Buddhist Tzu Chi General Hospital

- 依腫瘤體積及形狀決定中心點數目 (Number of Isocenter)
- 依腫瘤位置決定射束角度 (Arc Degree)
- 劑量-體積圖 (Dose Volume Histogram)
- 高劑量區與低劑量區位置 (Hot spot and cold spot)
- 80%劑量之體積與腫瘤比值 (Tumor Volume Ratio)

X Knife



決定治療計劃參數

RADIONICS® SYSTEM COMPONENTS

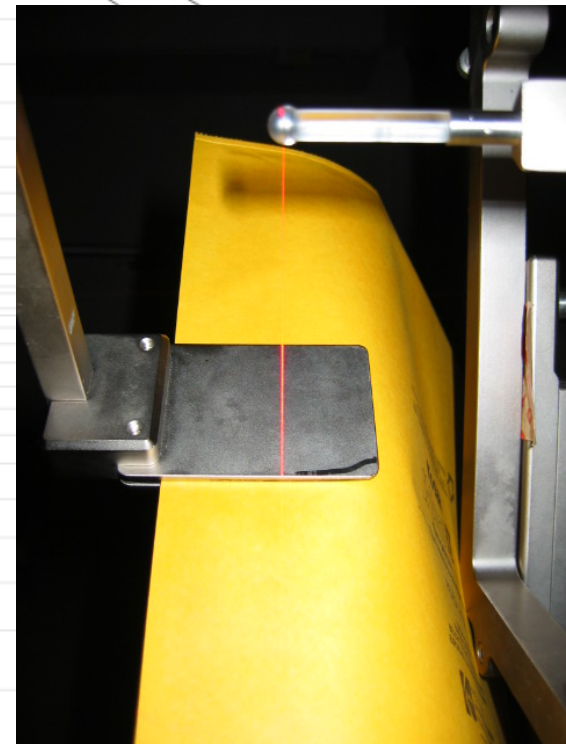
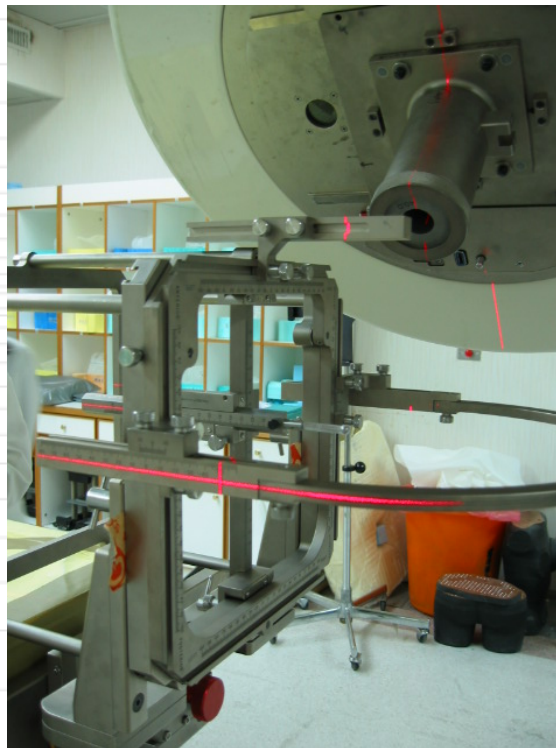
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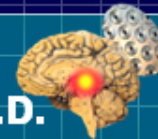
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Buddhist Tzu Chi General Hospital



執行治療計畫

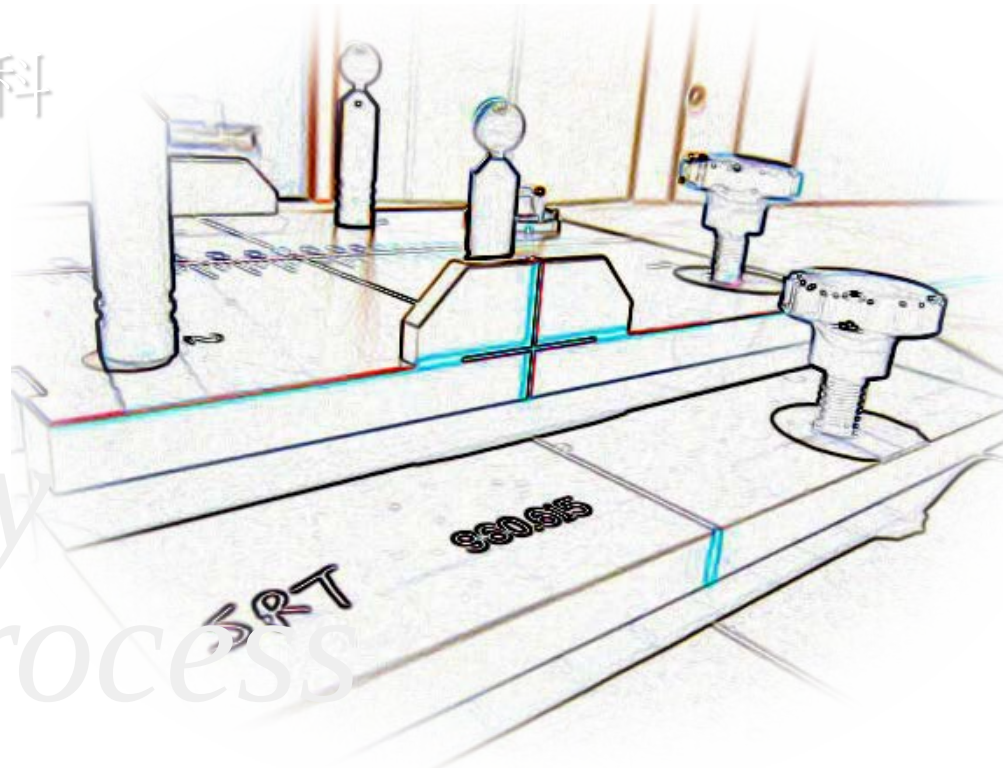
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SYSTEM 2004-10-07

立體定位放射治療 定位流程

花蓮慈濟醫學中心放射腫瘤科
江志軒

*Stereotactic
RadioTherapy
positioning process*



立體定位放射治療定位流程

Stereotactic RadioTherapy

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02

測試齒模

Bite Block Reseat verification test

03

製作頭枕

Head cushion preparation

04

製作面膜

Head mask preparation

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取得CT影像

Patient CT

07

治療計畫

Treatment Planning

08

OGP影像連結

Registration

09

OGP位置驗證

Registration Verification

10

治療

Patient Treatment

立體定位放射治療定位流程

Stereotactic RadioTherapy

齒模板

Bite tray



固定咬合、反射螢光球架

齒模材料

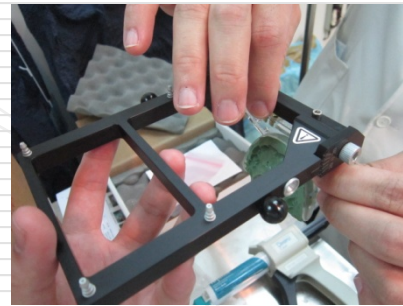
Dental Caulk kit



製作齒模

反射螢光球架

Reference Fiducial Frame



定位座標

齒模驗證環

Reseat verification Jig



驗證齒模是否良好

U型面膜

Thermoplastic mask



固定面型

塑型頭枕

Cushion



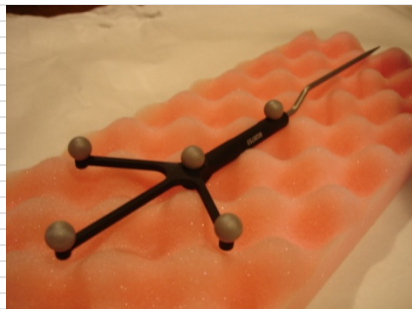
穩定頭部

立體定位放射治療定位流程

Stereotactic RadioTherapy

位置指示器

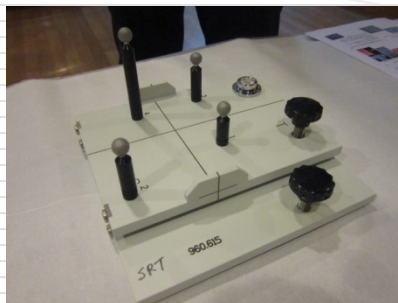
Blunt Pointer



辨認正確位置

攝影機校正器

Camera Calibration Jig



校正攝影機

光學導引系統

Optical Guidance Platform(OGP)



顯示座標

圓錐

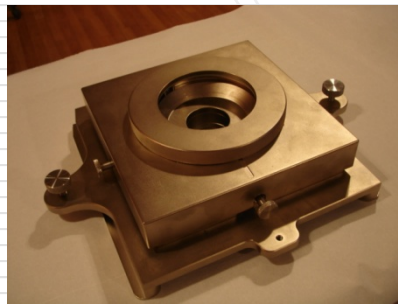
Cone



圓形輻射照野

圓錐支架

Collimator Holder



支撐圓錐

方位調整架

3DOF



調整左右上下及傾斜角度

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Bite Block Reseat verification test

製作頭枕

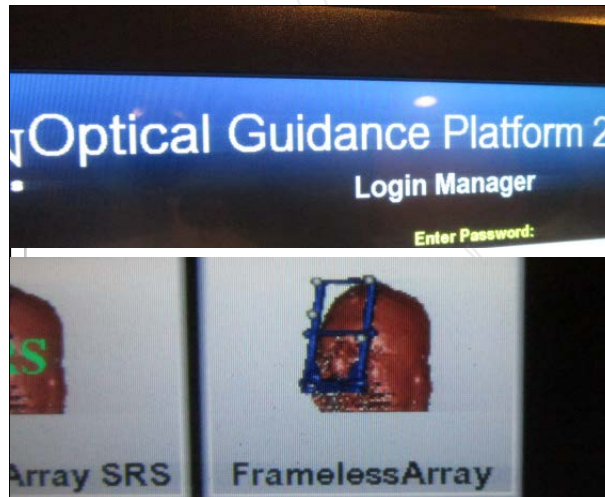
Head cushion preparation

製作面膜

Head mask preparation



開機須超過2小時，才可進行校正。camera 指示燈顯示兩個綠燈即可。



在**OGP**上按
FramelessArray。

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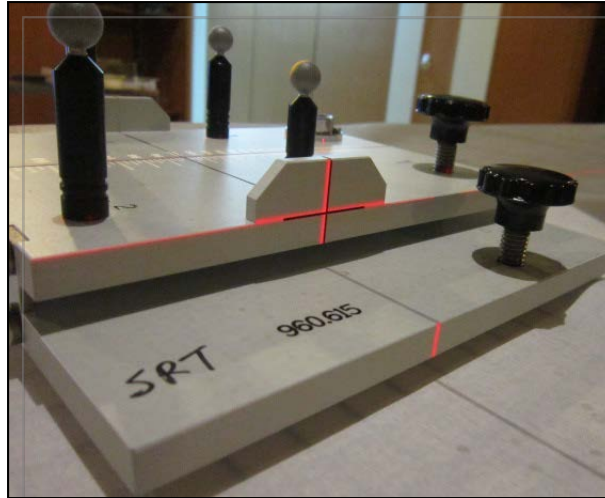
Bite Block Reseat verification test

製作頭枕

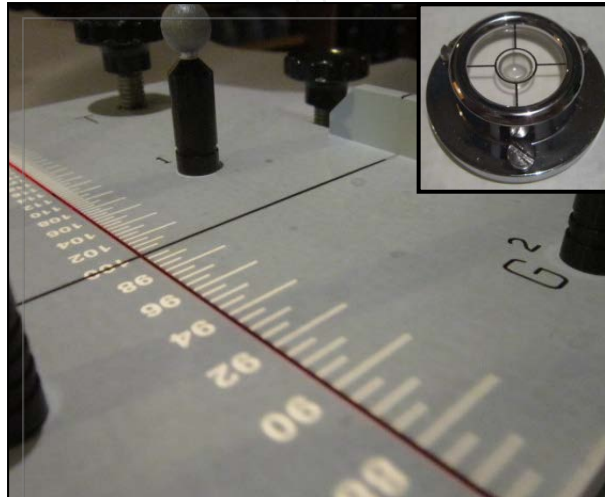
Head cushion preparation

製作面膜

Head mask preparation



將攝影機校正器(Camera Calibration Jig)放置於SAD位置。



注意擺放方向及水平。

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讓病患試咬(6分力)。



將齒模材料 (Dental Caulk kit)放入齒模板，整平後放入病患口中並稍微調整位置約5分鐘。

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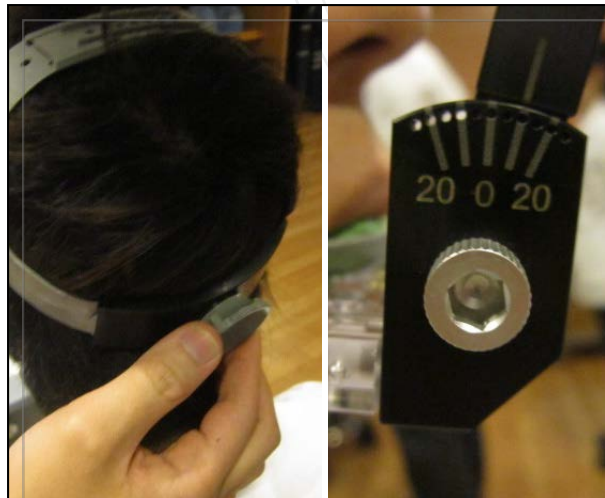
Head cushion preparation

製作面膜

Head mask preparation



將齒模驗證環(Reseat verification Jig)套於病患頭上，並請病患正確咬住齒模。



齒模驗證環須調緊、驗證環上的角度調整向camera方向傾斜10度，以方便驗證。

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Head mask preparation



將塑型頭枕放置於U型環內，並讓病患直接躺下。



五分鐘內快速塑型後，讓塑型頭枕硬化。讓病患試躺至習慣為止(至少三次)。

立體定位放射治療定位流程

Stereotactic RadioTherapy

攝影機校正

Camera Calibration

製作齒模

Bite Block Preparation

測試齒模

Bite Block Reseat verification test

製作頭枕

Head cushion preparation

製作面膜

Head mask preparation



製作面膜

約5分鐘後定型取出。



讓病患起身，再次試戴後
如合適才作記號並寫上病
患姓名日期。

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取得CT影像

Patient CT

治療計劃

Treatment Planning

OGP影像連結

Registration

OGP位置驗證

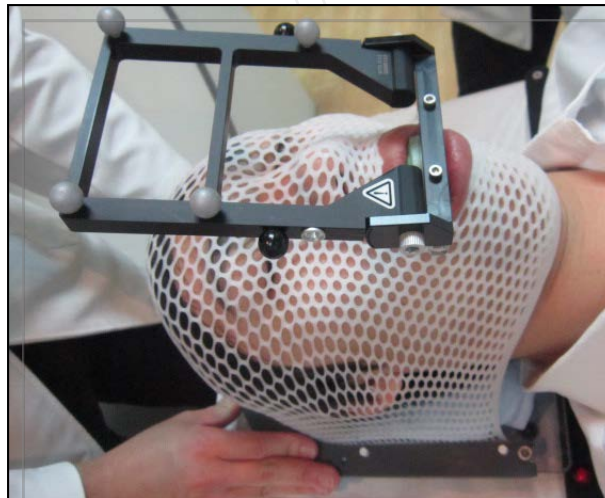
Registration Verification

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將齒模板裝上反射螢光球架。



面膜戴於病患上並調整位置。

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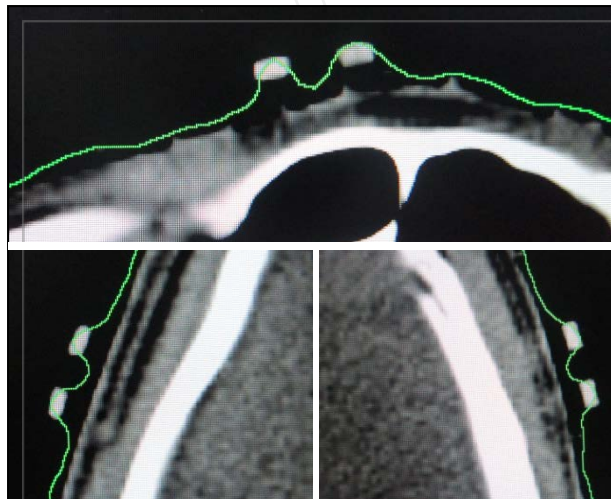
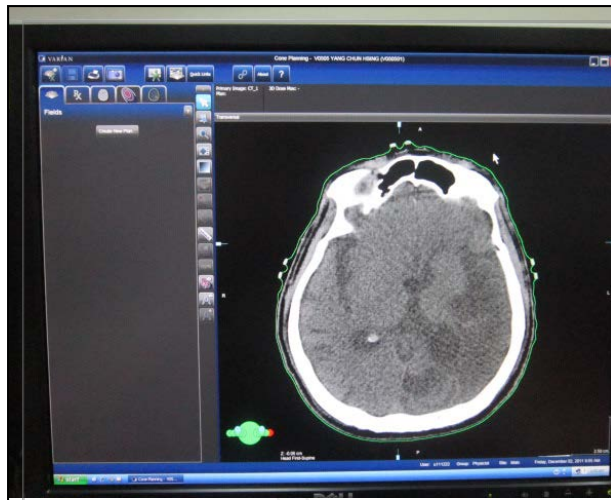
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- (1) 載入病患資料。
- (2) Isocenter數目不大于3個 (最佳為1個)，每個 Isocenter的Arc不大于5 個。
- (3) 以較佳之cone先包覆 Tumor主體約90%，未包覆之不規則處另加Arc包覆，如若不夠，再選較大之 cone，依此類推

- (4) 若(3)之狀況無法處理，則加Isocenter
- (5) 可能超過三個Isocenter之 Planning則應與醫師商量
- (6) 設定Prescribe dose 為 80% 或70%，直接劃PTV
- (7) 治療計劃結束後，傳送至 OGP及Aria

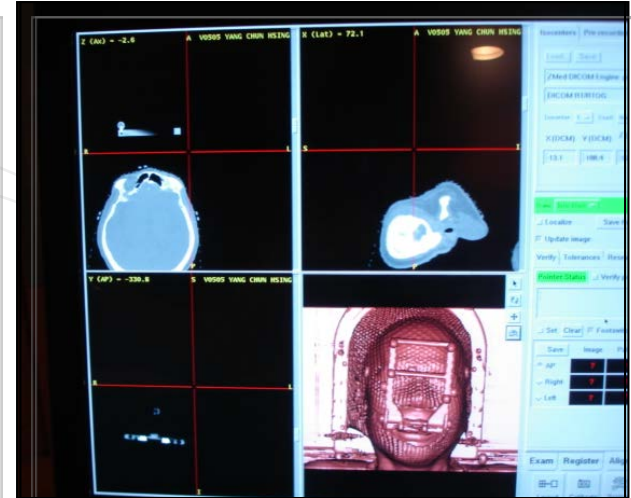
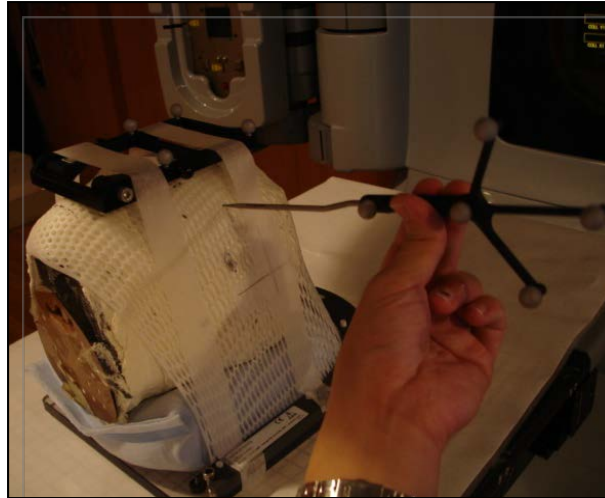
註：反射螢光球架可免畫

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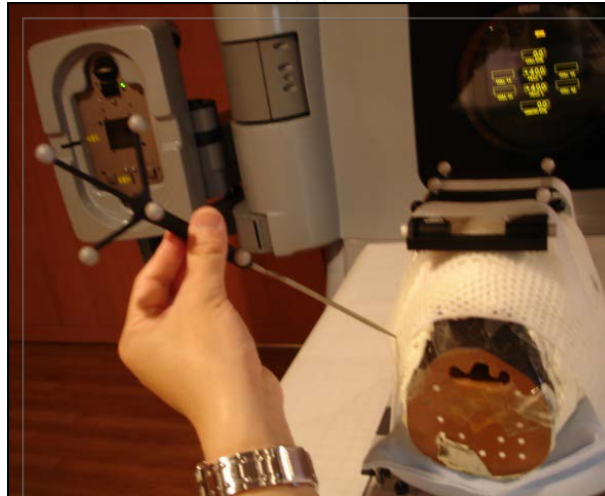


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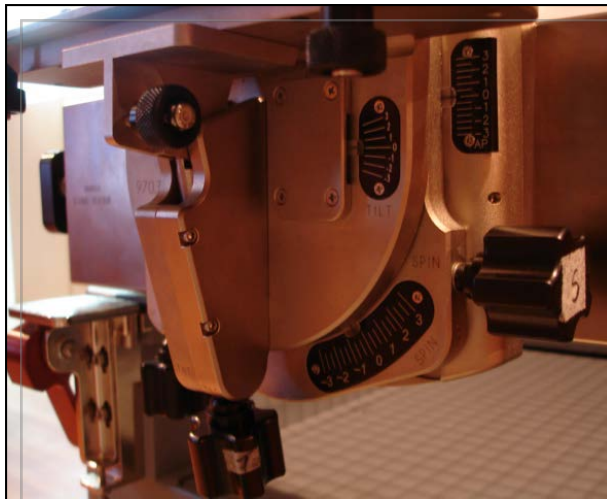
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(4) 先調整Tilt再調整Spin、AP、Lat 或者Ax，Longitudinal(Z軸)需由Table調整



(5) 調整好後，Gantry轉至最接近180°之治療位置角度(水平下方)
(第一次治療需看燈光投影是否有避開危急器官)

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感謝

放射腫瘤科醫事放射師同仁

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