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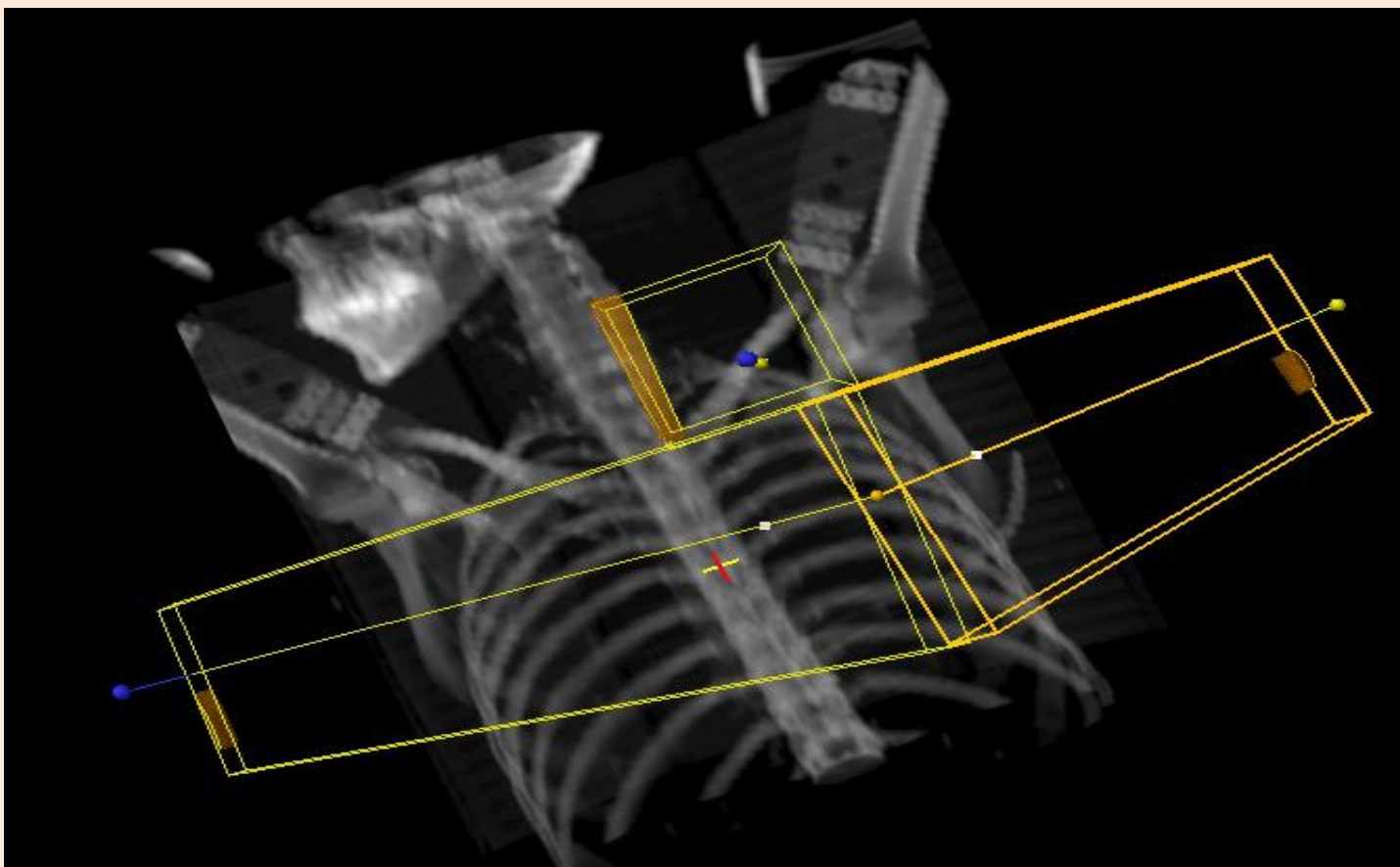
***Auto field alignment* treatment planning tool verification
by using *in vivo* dosimetry in breast and supraclavicular
matching region**

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Introduction

Three-field matching need

- Two tangential fields for breast irradiation
- One anterior field for supraclavicular region irradiation



Three-field matching complexity

➤ Causes

- irregular morphology of breast region
- divergence of tangential fields

➤ Consequences

- overdosage → healthy tissue damage
- underdosage → failure in tumor control

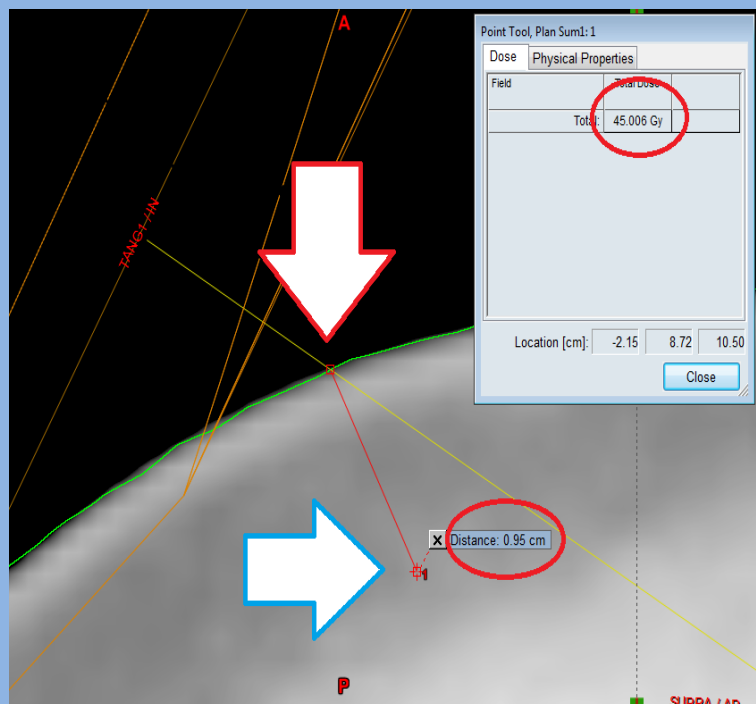
Purpose

In vivo treatment plan verification in field matching region, using thermoluminescence dosimeters (TLDs)

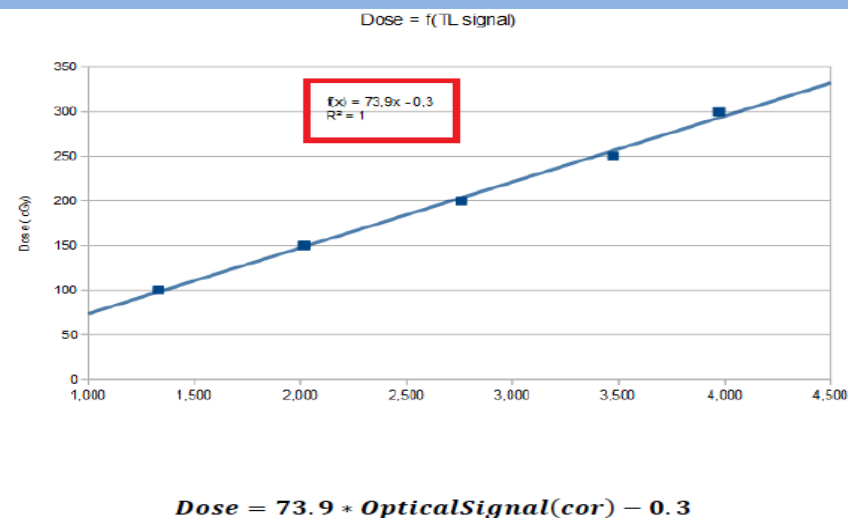


Methods

TPS dose calculation



TLDs calibration



In vivo dose measurements

- 10 patients
- 7 measurement points

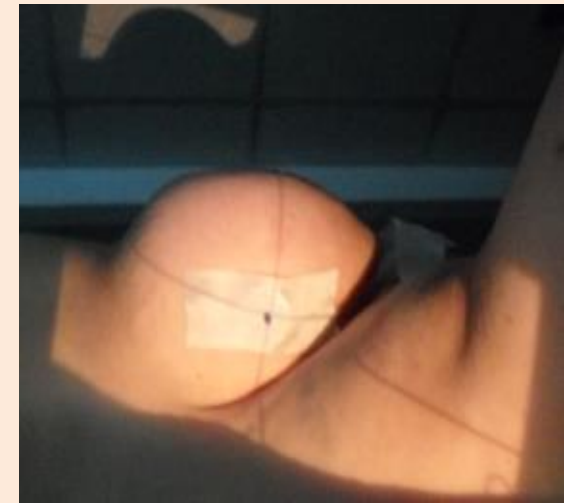
Expected – measured doses comparison

- Wilcoxon non parametric test
- H_0 : Doses do not differ significantly

Measurement points



Tangential in field



Tangential out field



Anterior field

Results

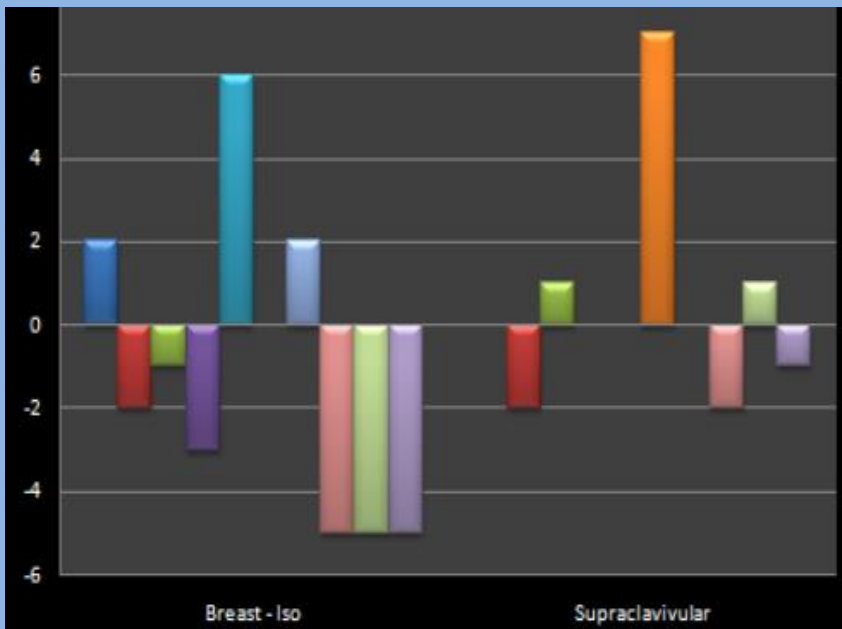
Measured and expected dose deviations (%):

Breast iso / Supraclavicular

→ do not reject H_0

($p = 0.4414$, $p = 1$)

→ lie between ICRU limits

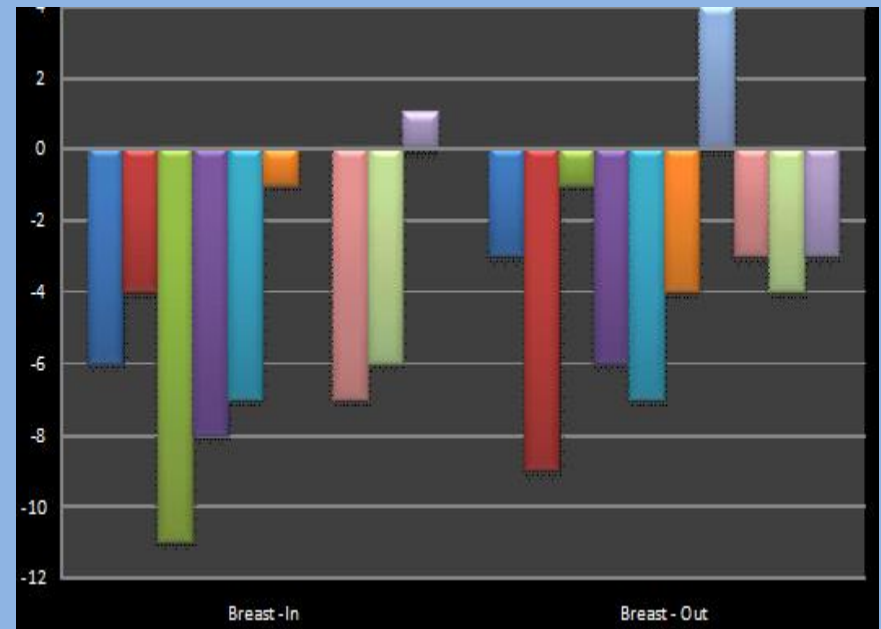


Tangential fields entrance

→ do differ significantly

($p = 0.0039$, $p = 0.0020$)

→ systematic negative deviation

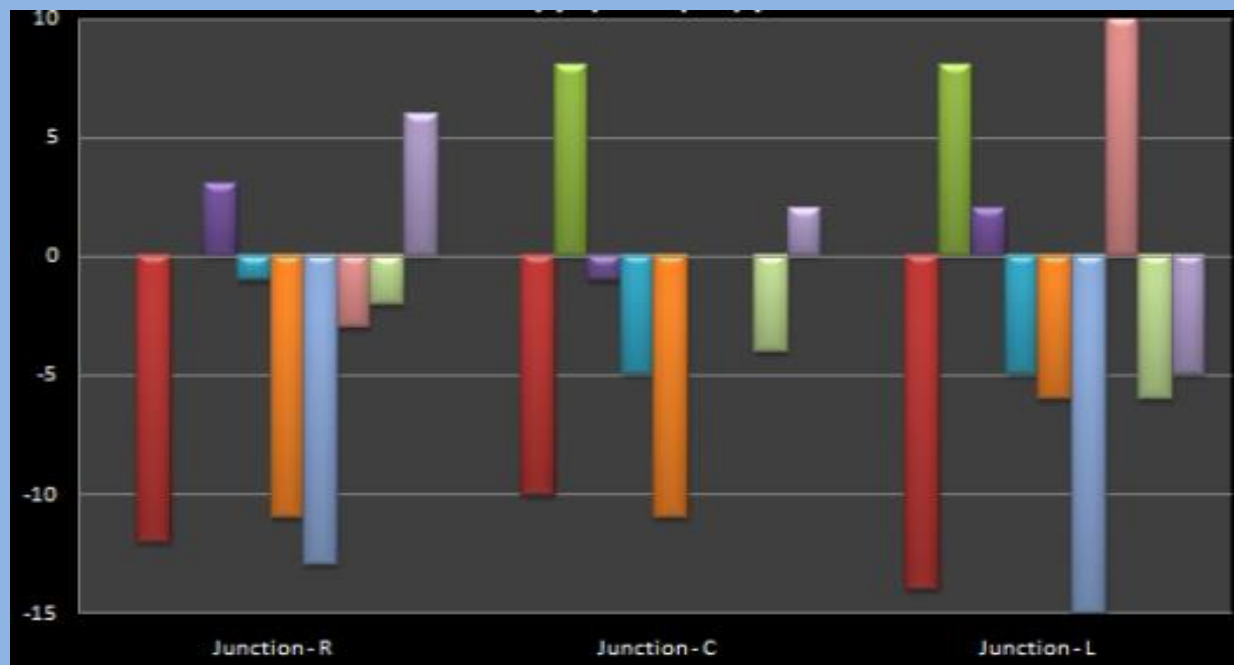


Results

Measured and expected dose deviations (%)

Matching region

- do differ significantly ($p = 0.0214$)
- non systematic deviation (-15% - +10%)
- large day to day deviations



Conclusion

Results indicate:

Breast iso /Supraclavicular

- correct calibration
- no serious mistakes in the procedure

Tangential fields entrance

- systematic positioning error
 - breast shape
 - breast motion

Matching region

- random errors
 - respiratory motion
 - immobilisation difficulties
 - reproducibility difficulties
 - TLDs positioning inaccuracies

Conclusion

- Results in matching region (dev : -15% - +10%) agree with relevant published studies (dev : -20% - +15%)
- Eclipse *auto field alignment tool* is verified
- Extra caution is required from radiographers and medical physicists when three fields need to be matched

Recommendation

- Monoisocentric technique should be used in three field matching (when possible)
- Better dosimetric results
 - Random errors are minimised