THE SURFACE AREA EFFECT:

The Dependence of Intermediate Dose Spill on PTV Surface Area

D. Desai¹, I. Cordrey¹, E. Johnson², S. Srinivasan¹ and H. Elasmar¹

CHI Memorial Hospital, Chattanooga, TN

²The University of Kentucky, Lexington, KY



AIM

The purpose of this **phantom model research** was to **investigate two characteristics of the** Planning Target Volume (**PTV**) that have a marked effect on the intermediate dose spill in cranial Stereotactic Radiosurgery (SRS) as measured by R50%: **Mean Dose deposited within the PTV** (**D**_{av}) and **Surface Area of the PTV** (**S**A_{PTV}).

INTRODUCTION

SRS refers to the highly conformal delivery of a very high dose, with very high spatial precision, in a single fraction, to a target typically in the cranium. One objective of SRS, regardless of delivery equipment or technique, is to minimize the non-target brain dose. There are many metrics for quantifying the intermediate dose spill and thus, the non-target brain dose; we use R50%.

$$R50\% = \frac{IDC50\% \text{ Volume}}{PTV \text{ Volume}} \text{ where } IDC50\% = 50\% \text{ IsoDose Cloud}$$

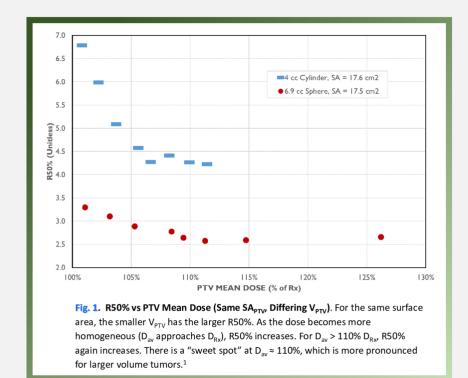
R50% is a common metric in lung SBRT but is less commonly used in SRS. Yet, R50% conveniently scales with the prescription dose, and since all isodose lines are concentric nested shells, R50% is a reasonable surrogate for any intermediate isodose level. PTV Volume is abbreviated as V_{PTV} .

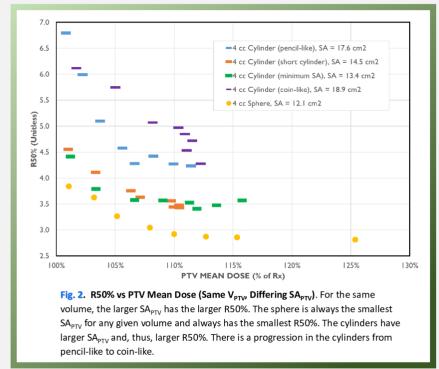
METHOD

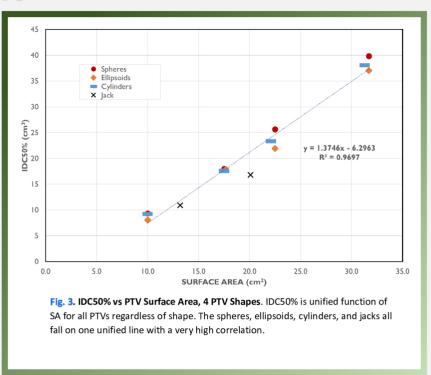
A 3D Phantom model was obtained from a high-resolution CT scan (1.25 mm slices) of the IROC SRS Head Phantom®. Planning was conducted using the Eclipse® Treatment Planning system. Final doses were calculated using the AAA algorithm (v15.6) on a 1 mm calculation grid. A prescription (Rx) dose of 18 Gy delivered in a single fraction was used in all cases. Four PTV shapes were created as high-resolution structures using standard Eclipse contouring tools and included spheres, ellipsoids, cylinders, and "jacks." A "jack" is a 3D solid composed of three orthogonal ellipsoids sharing a common center. The "jack" has a high surface area to volume ratio and serves as an extreme case. The PTV volumes were centered within the skull. All treatment plans utilized the same beam geometry consisting of 5 non-coplanar hemi-arcs and were planned using VMAT (RapidArc®) delivery using a TrueBeam STx HD MLC. Optimizations utilized the Eclipse PO (v15.6) algorithm. The D99% condition (99% of the PTV receives at least the Rx dose) was used as a constraint on all optimizations. Eclipse NTO was used to limit the dose spill. An additional constraint was used to control the mean PTV dose by starting D_{max} at "unlimited" and then decreasing from 140% to 100% of the Rx dose in increments of 5%.

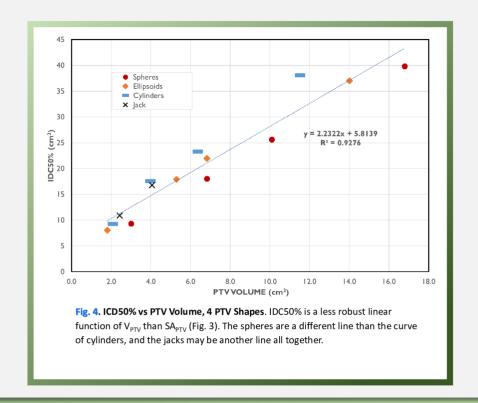
The following scenarios were considered: same SA_{PTV}, differing V_{PTV} for spheres and cylinders (Fig. 1); same V_{PTV}, differing SA_{PTV} also for spheres and cylinders (Fig. 2); and all PTV shapes/sizes and their dependence on SA_{PTV} (Fig. 3) and V_{PTV} (Fig. 4).

RESULTS









CONCLUSIONS

PTV D_{av} Effect: The mean dose in the PTV has a clear effect on the R50%. As the D_{av} approaches the D_{Rx} (with D99% Rx), the R50% increases (Fig. 1). A minor increase in R50% is also seen when D_{av} is higher than 110% D_{Rx}. This dose "sweet spot" is more pronounced in larger PTVs studied in lung phantom.¹

PTV Surface Area Effect: For the same volume, the higher the SA_{PTV}, the higher the R50% (Fig. 2). For the cylinders, there is a progression in cylinder aspect ratio that goes from a pencil-like shape to a coin-like shape (both high SA objects with high R50%) through a minimum SA cylinder. The minimum SA cylinder (diameter = height) is closest to the sphere, which is always the smallest SA object for any given volume. Surface area was hypothesized to be a factor in R50% by other authors;² Fig. 2 clearly demonstrates this.

IDC50% is a very strongly linear function of SA_{PTV} (Fig. 3): In addition, the correlation of IDC50% is stronger to SA_{PTV} than to V_{PTV} (Fig. 4). Thus, by extension, R50% is highly dependant on SA_{PTV} (of course, R50% is dependant on V_{PTV} by definition).

All these concepts are explored in depth in recently published work.¹

REFERENCES

- 1. Desai D, Cordrey I, Johnson E L. A novel and physically meaningful relationship between R50% and PTV surface area supported by phantom studies of SBRT in lung. J App Clin Med Phys. 2020; in press. doi:10.1002/acm2.12964.
- 2. Goldbaum D, Hurley J, Hamilton R. A simple knowledge-based tool for stereotactic radiosurgery pre-planning. J Appl Clin Med Phys. 2019;20(12):97-108. doi:10.1002/acm2.12770.

ACKNOWLEDGEMENTS

I would like to thank Dr. Robert Zwicker for his mentorship during my early years in Medical Physics and Debra Desai for her assistance with the editing process.

CONTACT INFO

Dharmin Desai, PhD, DABR: dharminddesai@gmail.com