AbstractID: 5448 Title: Absolute Rectal Volumetric Dose as a Meaningful Predictor to Its Late Side Effect in Prostate IMRT

Purpose: To investigate a meaningful correlation between rectal volumetric doses and the rectal late side effect in prostate IMRT.

Method and Materials: Six cases with complaints of prolonged rectal bleeding after one year of prostate IMRT course were analyzed. The DVH's were compared with the control group comprised of 14 similar IMRT cases without late rectal side effects. The follow-up time was 24-45 months. In each case, a total of 75.6 Gy radiation dose was delivered in 32 fractions using 7-field 18 MV photon beams. All CTV's were delineated on fused MR/CT images. The posterior margins of PTV's were 7 mm for initial 45 Gy and 4 mm for the 30.6 Gy reduction dose. Nonexclusively, PTV protruded into the anterior portion of rectal wall. During patient daily setup, an ultrasound targeting system was employed to ensure the accuracy.

Results: There were no significant deviations seen in relative volumetric DVH's between the two groups for rectal D_5 through D_{50} (p> 0.05). However, DVH's for absolute rectal volume indicated significant higher values (p< 0.01) in the group with late rectal side effect, as seen in table1.

Table 1. Rectal Mean Dose (cGy) in Prostate IMRT

Rectal Volume	Test Grou	up (No=6)	Control Group (No=14)		t-test
cm3	Mean	SD	Mean	SD	p (2 tails)
0	9083	80	8473	<i>265</i>	0.000
5	7489	350	6959	<i>524</i>	0.019
10	6890	357	5987	692	0.001
15	6313	442	5351	667	0.002
20	5878	346	4754	706	0.000
25	5349	222	4201	674	0.000
35	4403	441	3220	832	0.001
45	3205	665	1927	1228	0.008

Conclusions: No statistical meaningful correlation was found in our data between relative volumetric DVH and the occurrence of late rectal side effect. Rectal DVH using absolute volume is suggested by this study to be a more sensitive indicator to predict late rectal side effect in prostate IMRT. This study is valuable for future follow-ups and investigations.

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