

AbstractID:9651Title:Fiducial Placement Guidelines for Thoracic Radiation Therapy Determined by 4DCT

Purpose: To determine the volume of lung where a fiducial would accurately represent lung tumor motion.

Method and Materials: A 4DCT scan with spirometry was performed on 4 patients, and the results were evaluated by deformable image registration and a lung motion model was applied to determine motion vectors for each point in the lung. The position vector of the lung tumor centroid at peak inhalation, peak exhalation, mid-inhalation and mid-exhalation of was compared to the position vector of points throughout the rest of lung to find the difference in relative positions.

Results: Cubes were constructed containing a volume in which we could accurately predict the position of the tumor within 2mm, 3mm and 4mm. These cubes showed that at least 95% of the reconstructed point shaving motion differences below the selected thresholds. The average side length of the cube for patients with upper lobe tumors when the motion was within 2mm was 2.5cm. These side lengths increased to an average of 4.3cm and 6.0cm for thresholds of 3mm and 4mm respectively. For patients with lower lobe lung tumors, the average side length of the cubes were 1.0cm, 1.8 cm, and 2.6cm for thresholds of 2mm, 3mm, and 4mm respectively.

Conclusion: 4DCT scans are evaluated with lung motion model showing that points near lung tumors show similar trajectories as the lung tumor itself. This allows for the placement of fiducials close to lower-lobe tumors compared to upper-lobe tumors. As expected, allowing for an increased difference between the motion of the tumor and other points in the lung yields a larger volume. Further work will focus on extending these results to a larger average breast hinge cycles.