AbstractID:8812Title:Do simetriccompa risonofco mpensatoran dm ulti-leafcolli mator (MLC) based intensitymo dulatedradio surgery(IMRS)

Purpose: Multi-leaf collimator(MLC)basedintensit y-modulatedradi osurgery(IMRS)often r esultsin largenumber ofmonit orunits (MU)f orpati entswit hm ultipleb rainl esions.Com pensatorbasedIM RS,howe ver, mayd ramaticallyreduceM U. Thepurposeofthi s study istoquant ifyther eductionofMUfor IMRSofmul tiplebrain lesionsu singsolid tiss uecompensators.

Methodand Materials: Patientsw ithmul tiplebrai ntum orswereselected forourstudy. Fore achpatient, VarianE clipse TPS was used togenerat e anMLCbase dIMR S planconsist ingof10 -11coplanarbeam s. Theprescr iptiondoseforat ypicalI MRSt reatmentis 1800-2000 cGydeliveredin1 fra ctionusi nga 6 MVphoton beam.I MRSplan s werege neratedon2patients. The optimal fluence mapsfrom IMRSp lanwere exported to the compensator ge neratingsyst emtogener atecompensators for eachfi eld. The compensator files areimported bac kto Ec lipsetoca lculate MUsfor the compensator fields. EclipseT PSwasmodifi edt oallow compensatorbased planningan d evaluation insideEcli pse. Finally, we paredML C and comp ensatorplans intermsofMUs and arget and normal structure overage.

Results: Compensatorsof fersu periorr esolutioncomparedto MLCsandareeas ierandfastertopl an.DVH analysis frombot h patientsshow s adequatetar getcovera geforboth IMRS andcomp ensatorplans .M ores paringof nor maltiss uesincompensator plan wasobs ervedsome times. The MUs were duced byfactors of morethan3 comparedtoanMLCbase dI MRSplan .

Conclusion: Compensatorb asedIMRScan dramaticallyreducethe numberofMUneededform ultiplebr ainles ion radiosurgery as comparedtoanMLCbas edIMRS plan whilepreser veprescrib eddos ecoverage.

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