AbstractID:9682Title:Peri pheraldos einv estigationofacor pusco llosotomybyGam ma Knife,ModelC.

Purpose: Corpus c ollosotomy by Gamma Knife Radiotherapy is at reatment for medically ref ractory epilepsy. Due to the long treatment d uration (3-6 h ours), the peripher al dose received by patients becomes a concern. In this study, peripheral doses for a posterior corpuscollosot omyby GammaKnife, ModelC wereinvestigated.

MethodandM aterials: AR ando-Phantomwasusedto measur etheperi pheraldoses. Threetypesofd osimetrysyst emswereu sed, whichinc luded ionizationc hambers, TLDs (TLD -1003 x3x1mmchips), and OneDose™MOSF ET dosimeters. The dosimeters were placed on the surfaceofth eRa ndo-Phantom under 0.5 cmofbu ild upatdi stancesof 5.0,17.5 , 30.0,42.5,54.0, 70.0 and 84 cm from the center of the treatment volume. Seven cylindrical ionization chambers with build upcap swere placed at the same distances, one chamber at each posi tion. The leakage of the ionization chambers was measured before i rradiation and recorded during treatment sessions. The phant om was irradiated using aclinical treatment entplanfor a posterior corpus collosotomy. The prescription dose was 130Gy(maxdose), and the delivery dose was reduced to one third of the prescription dose form easurement purposes. The treatment time was 99.38m in utes.

Results: The measured doses by TLDw ere 17.9,9.9, 5.8,2.9,2.4, 1.5, and 1.1 cGyf orthesev enpositionsr espectively. The measured doses by ionization chambers were 16.9,12. 0,5.2,2.9, 2.8,2.2, and 2.0 cGy. The results obtained with the One DoseTM were not consistent due to the decay of the signal over the period of measurement. The doses measured by TLD and ionization chamber or the same position were a veraged. The total doses to the measurement positions were 52.2,33.0,16.5,8.7,7.8,5.7, and 4.8 cGy, respectively, for the full prescription dose of 130 Gy.

Conclusion: Theper ipheraldos esw eres ignificant, especially intheheadandneckregion