## AbstractID: 10802 Title: Gamma is a necessary, but not sufficient criteria for comparing dose distributions

**Purpose:** To demonstrate via simple test cases that although percent pass gamma ( $\gamma$ <1) may be a necessary condition for acceptance in dosimetric analysis, it is not a sufficient condition to ensure dose integrity and therefore should not be used as a sole of criterion to judge dosimetric acceptability.

**Method and Materials:** Simple modifications to the delivery of treatment fields are created such that, although > 98% of points have  $\gamma < 1$  with respect to the reference field when 2D planar fluence/dose verification images are acquired, the resultant dose distributions are clinically unacceptable. Gamma criterion of 3%, 3 mm and 5%, 5mm are used. Reference test fields include a  $10 \times 10$  cm<sup>2</sup> open field with 5mm gap sweeping and two modified  $10 \times 10$  cm<sup>2</sup> fields. Deviations include shrinking the dose distribution by 3 mm, and introducing a non-moving 5 mm wide MLC leaf in the interior of a field.

## **Results:**

The two-dimensional field that is narrower than the reference field can have 100% of the points with  $\gamma$ <1. A non-moving 5 mm MLC leaf in a 10 x10 cm<sup>2</sup> sliding window can have 94.5% of the points passed 3%, 3mm gamma test and 97.8% of the points passed 5%, 5mm gamma test. Similarly, fields with dose peaks or valleys in them with dimensions up to two-times the DTA criteria can have 100% of points with  $\gamma$ <1. Exchanging to roles of the reference and test images in the gamma evaluation can be distinguish some, but not all, of the clinically relevant errors.

**Conclusion:** Evaluation of the fraction of points with  $\gamma < 1$  may be a necessary condition, but it is not sufficient to state a plan is dosimetically acceptable. Evaluation of additional dose metrics is required to show clinical acceptability.

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