

Multimodal Imaging for Radiotherapy and its Benefit.

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Myths and facts in Oncology: the challenge of local therapies

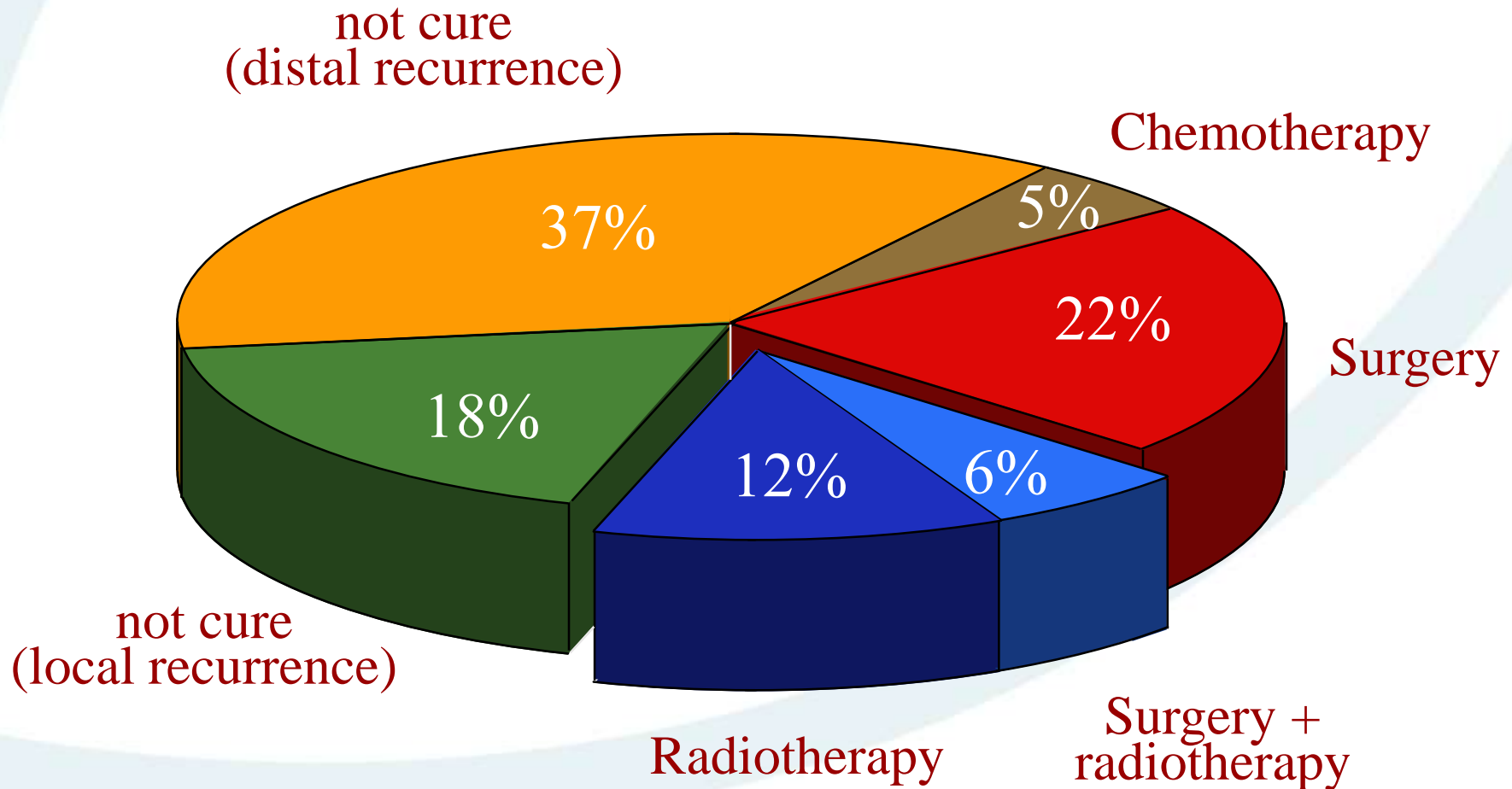


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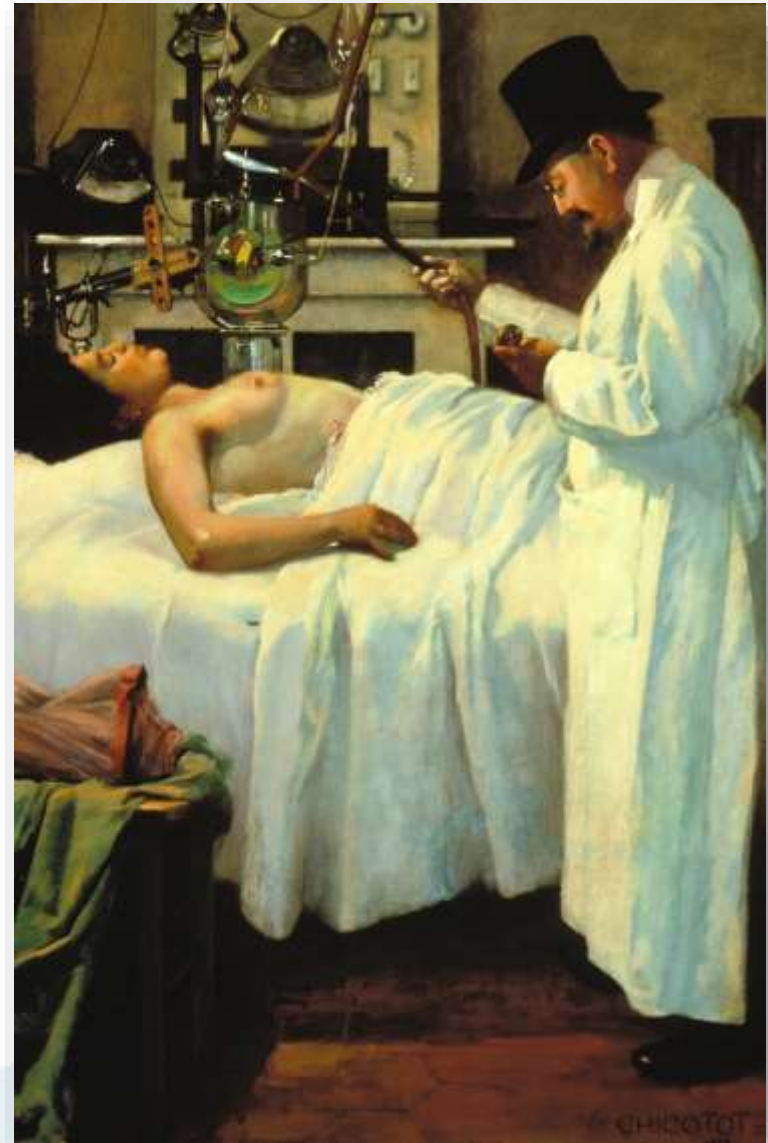
- Set the scene
- Multimodality imaging
- Future prospects



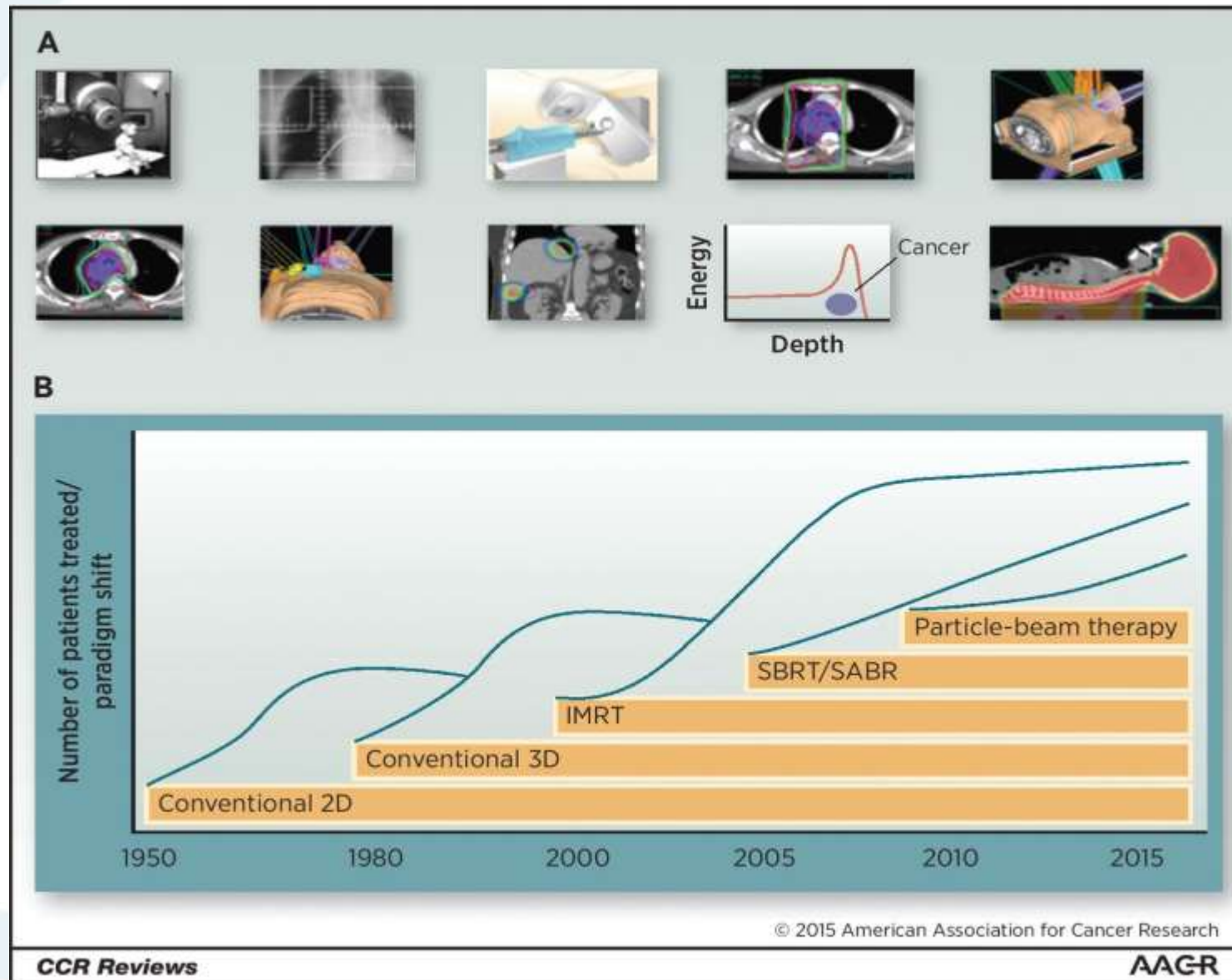
From X-rays ...

Discovered in 1895 and immediately used for the treatment of cancer...

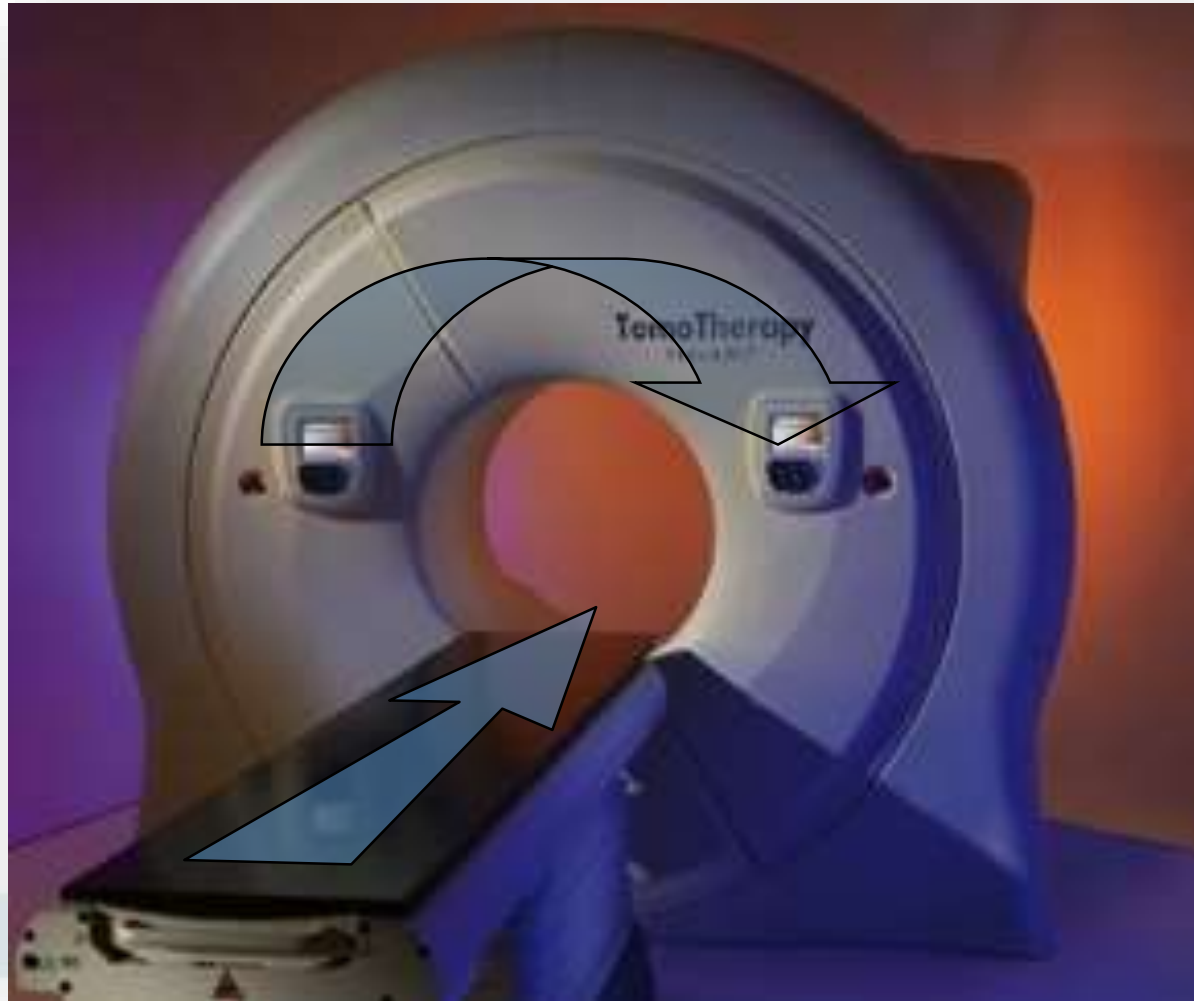
Why so quickly?
Surgery was the only option but it was not armless...



Evolution of Radiation Delivery



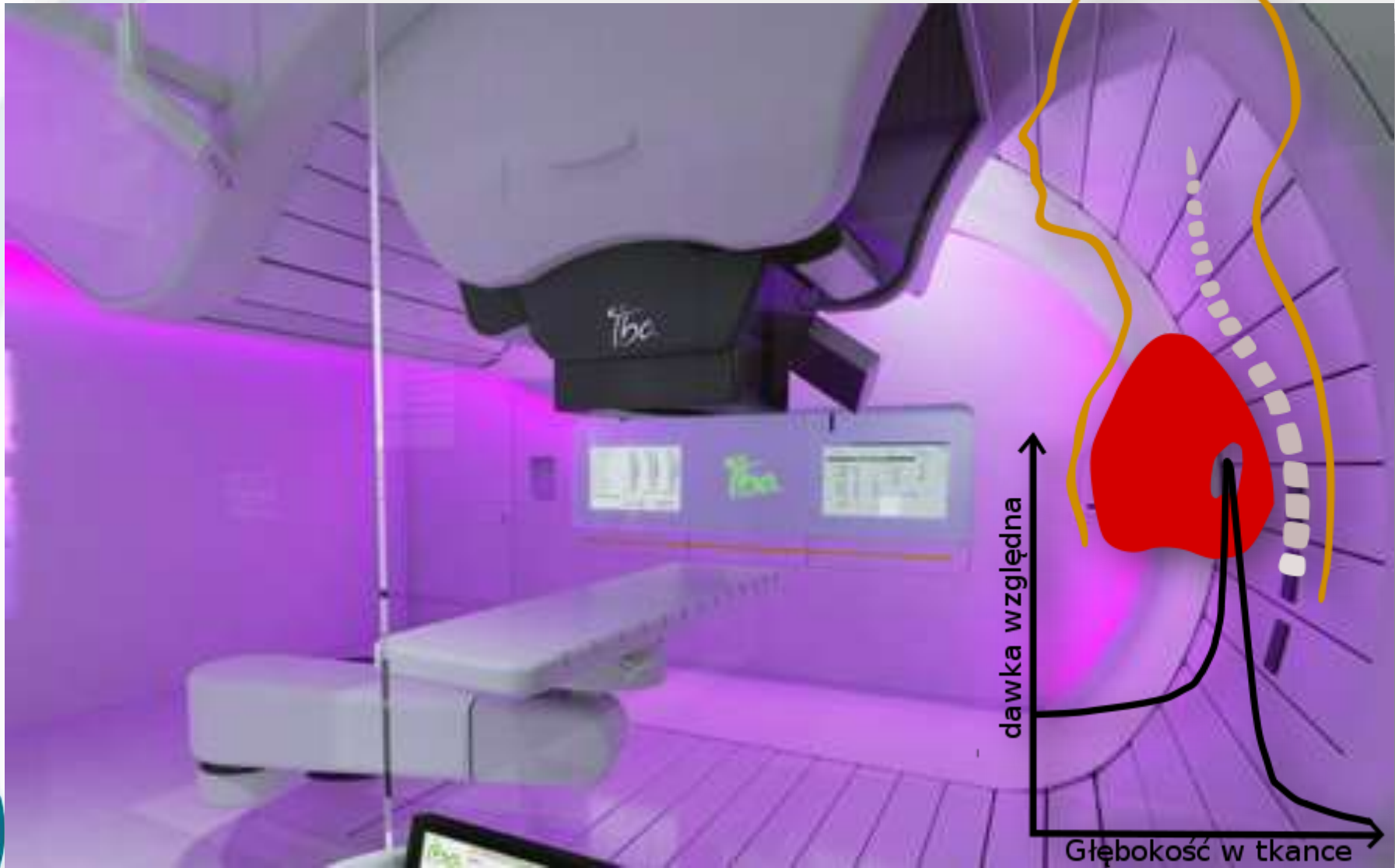
Arc therapy: the linac is constantly rotating while the coach is moving



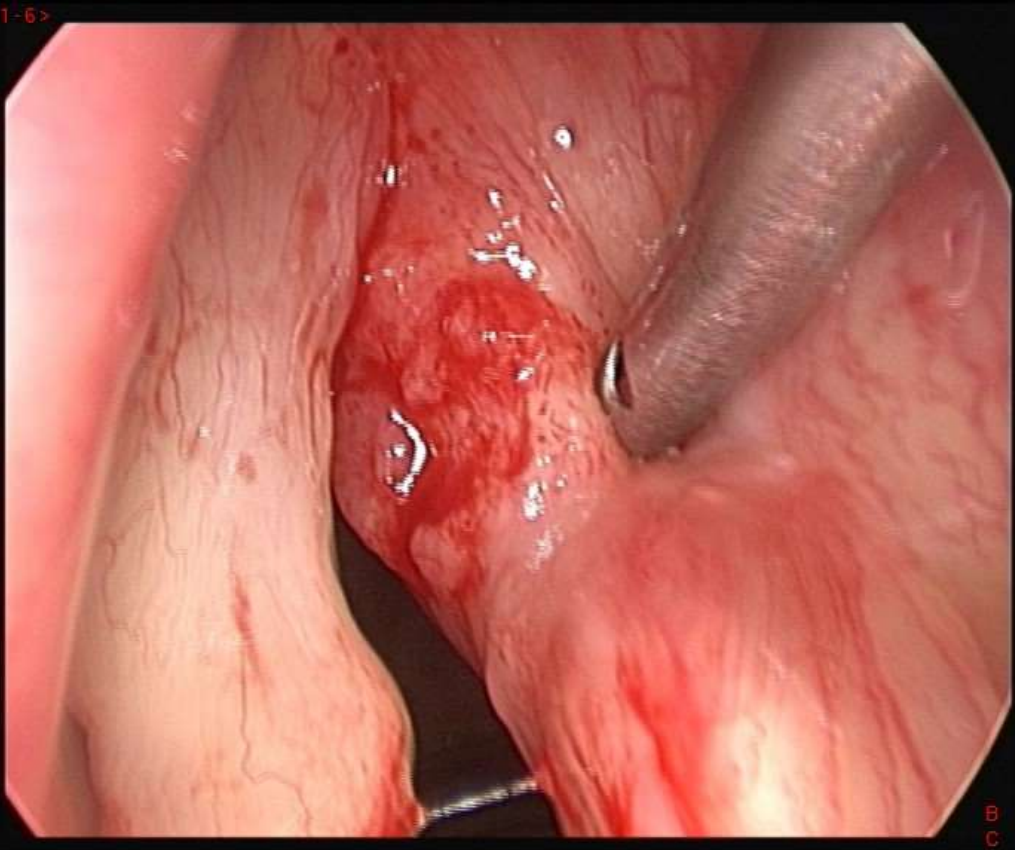
Protontherapy



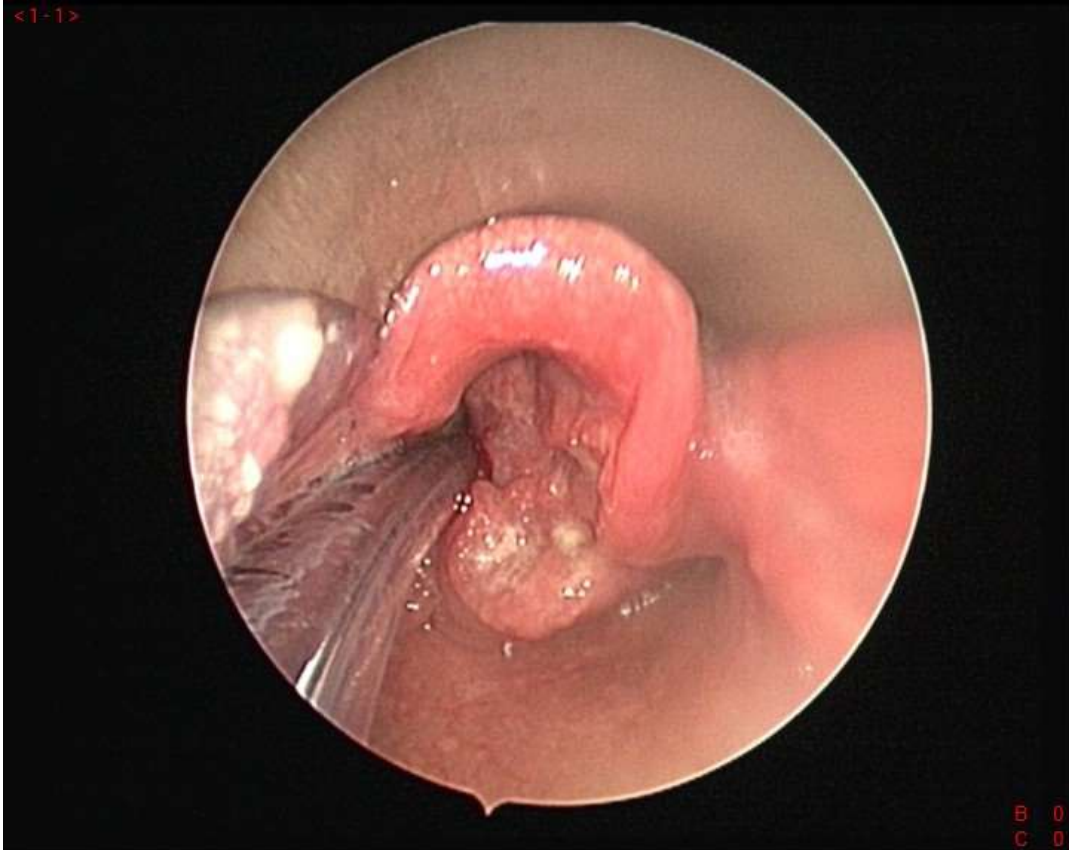
Protontherapy



Target volume: clinical examination



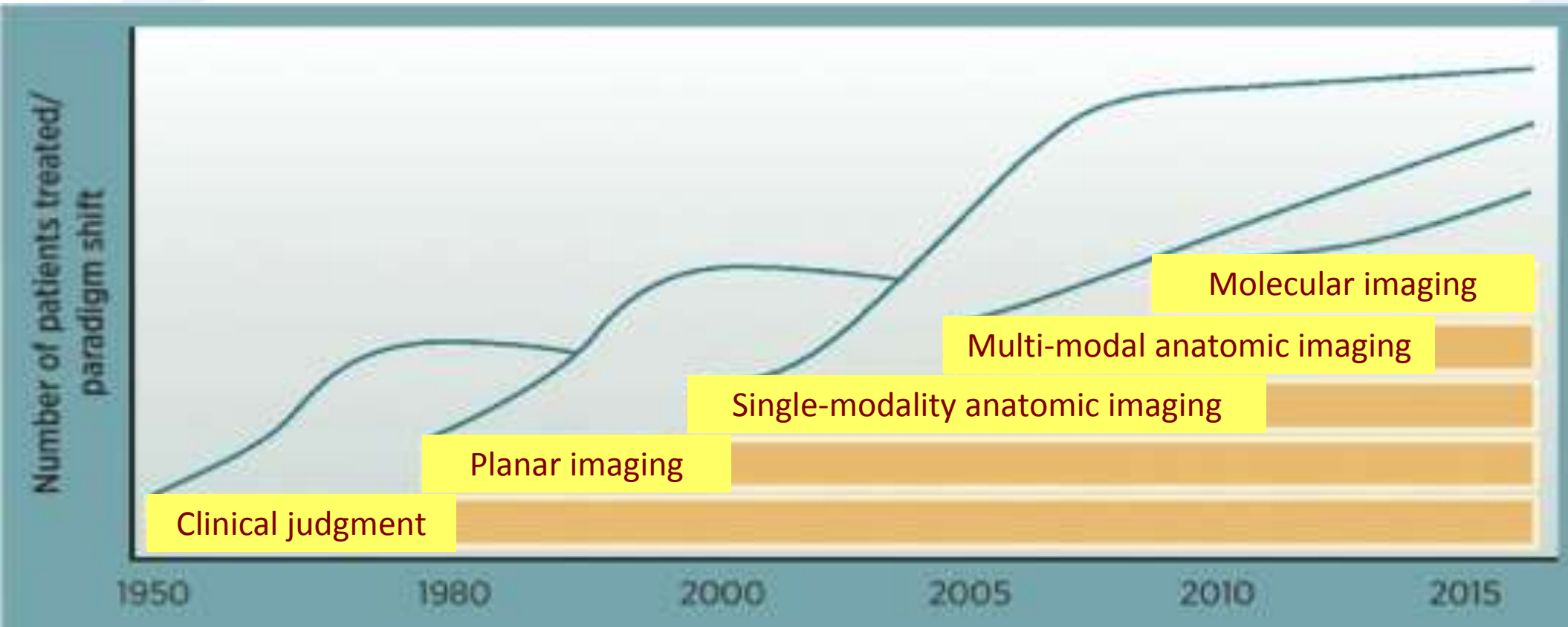
T1a glottic larynx



T3 supra-glottic larynx



Evolution of Target Volume/normal anatomy definition

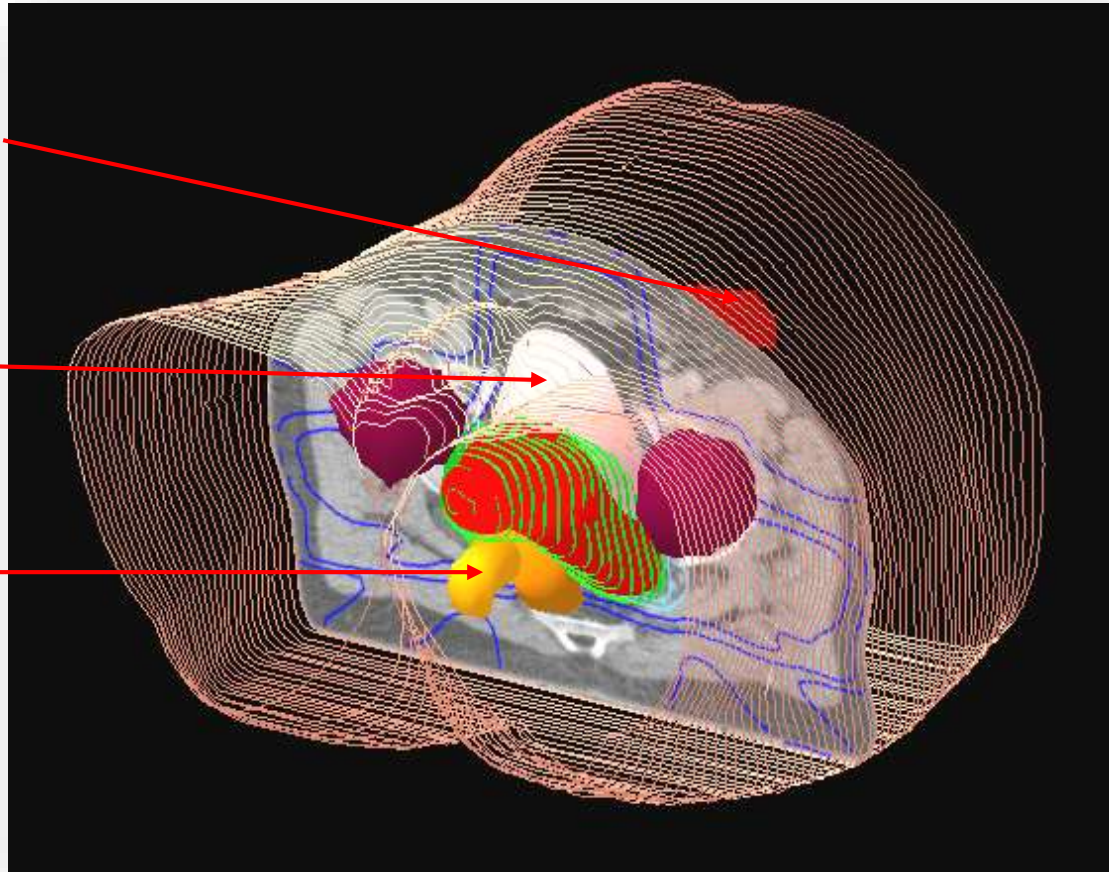


3D- Reconstruction

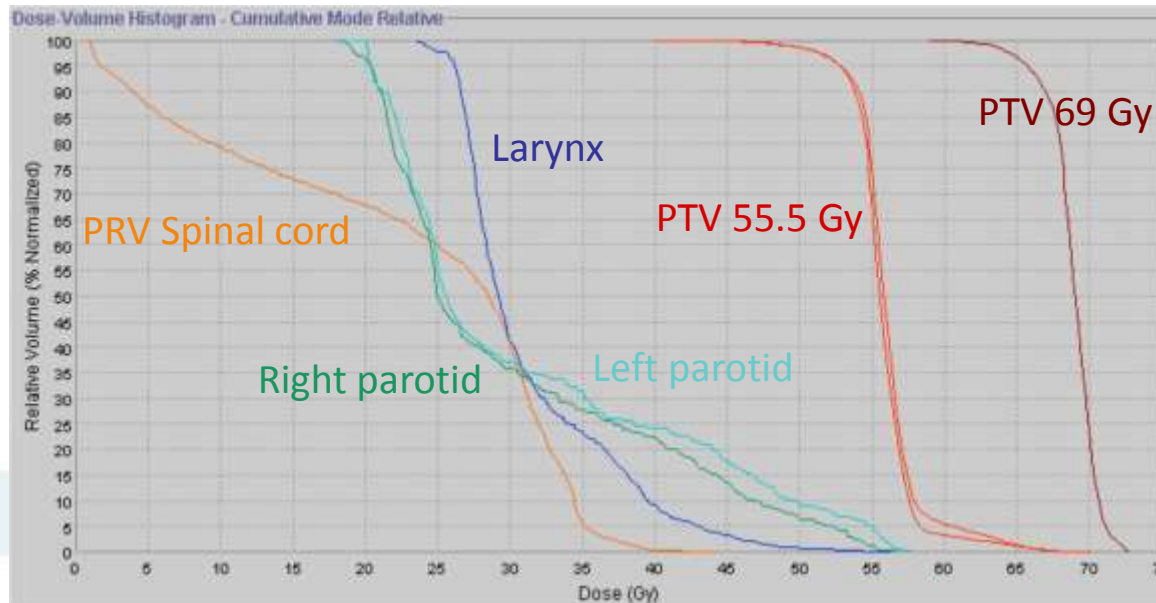
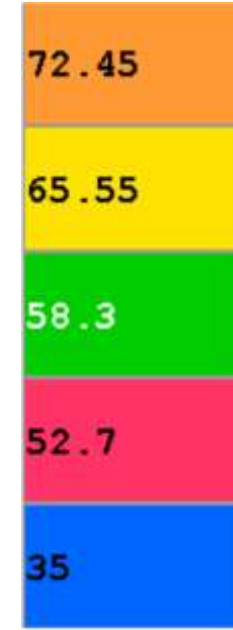
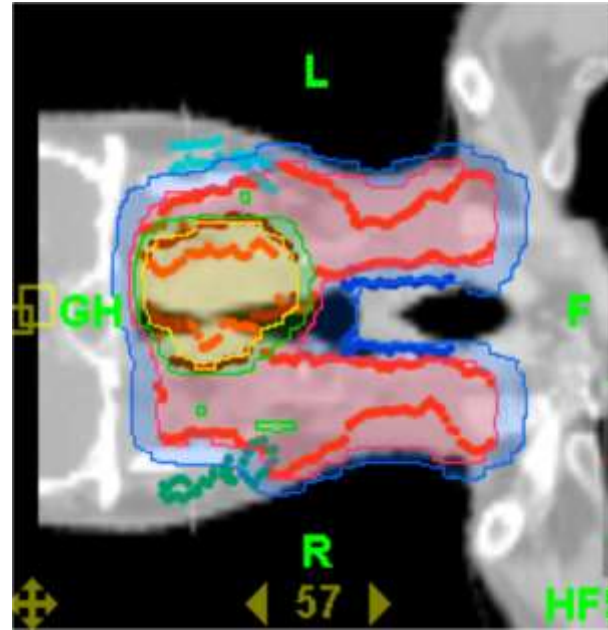
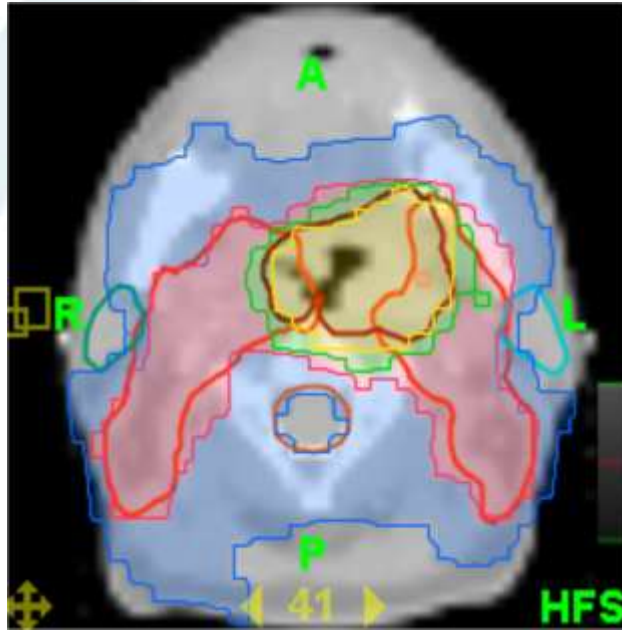
Small intestine

Bladder

Target Volume



IMRT for Head and Neck Tumors



Oropharyngeal SCC
 T2-N0-M0
 SIB-IMRT: 30x2.3 Gy
 30x1.85 Gy



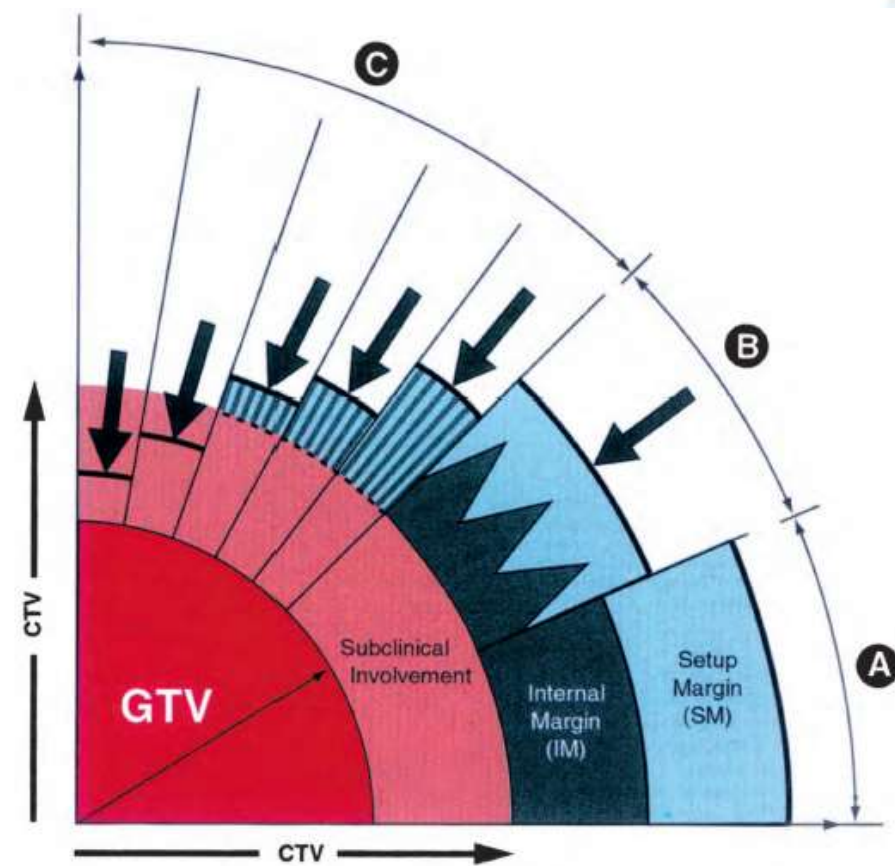
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- **Multimodality imaging**
- Future prospects



Target volumes in Radiation Oncology: ICRU 50, 62 and 83:

- Gross Tumor Volume: GTV
- Clinical Target Volume: CTV
- Internal Target Volume: ITV
- Planning Target Volume: PTV
- Organ at Risk: OAR
- Planning Organ at Risk Volume: PRV

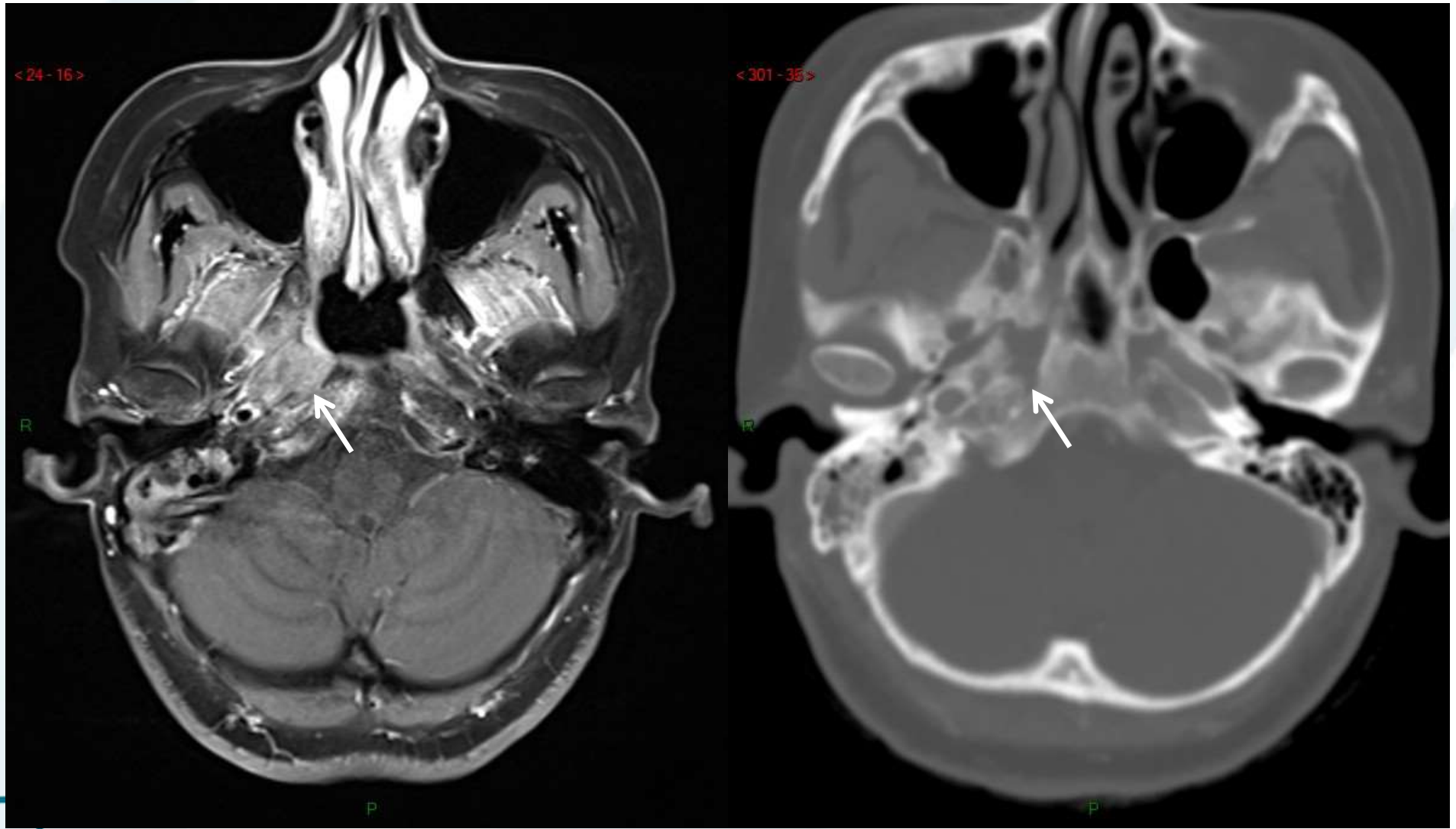


↓ The arrow illustrates the influence of the organs at risk on delineation of the PTV (thick, full line).

- Gross Tumor Volume (GTV)
- Subclinical Involvement
- Internal Margin (IM)
- Set Up Margin (SM)



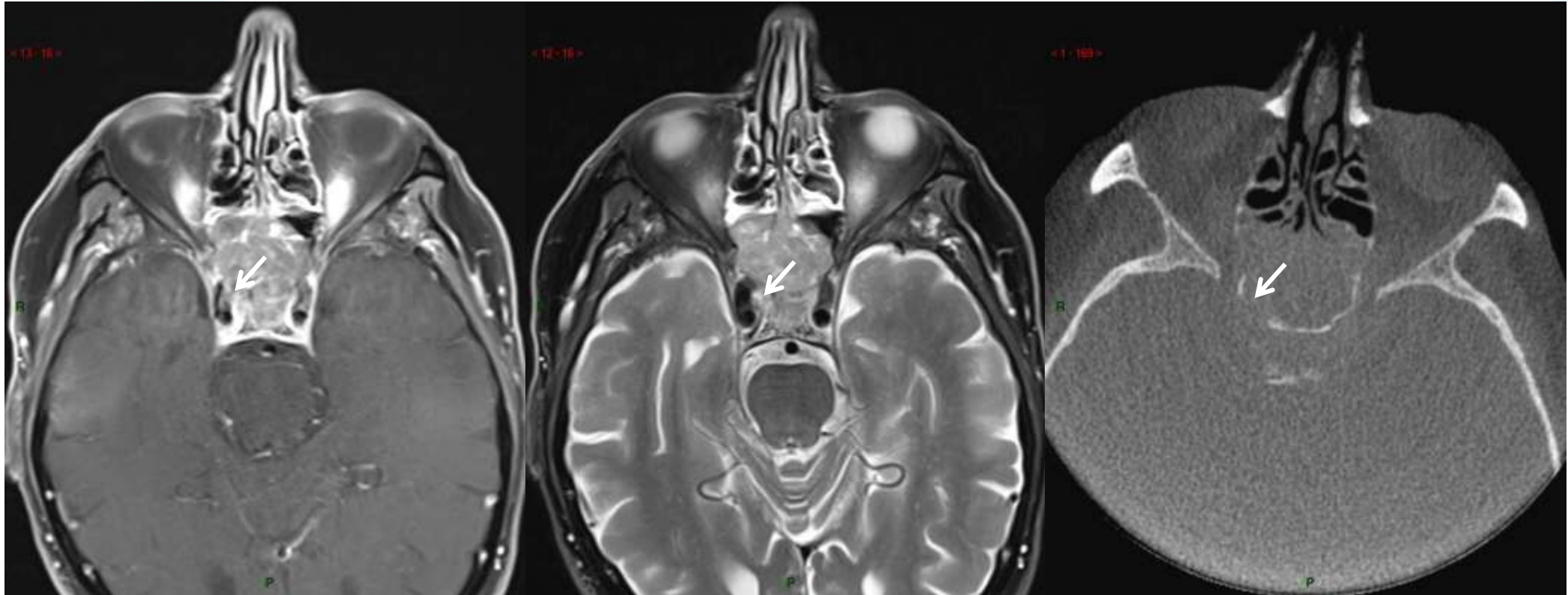
Multimodality imaging for target visualisation



Gadolinium-enhanced T1 FatSat

Contrast-enhanced CT (bone window)

Multimodality imaging for target visualisation



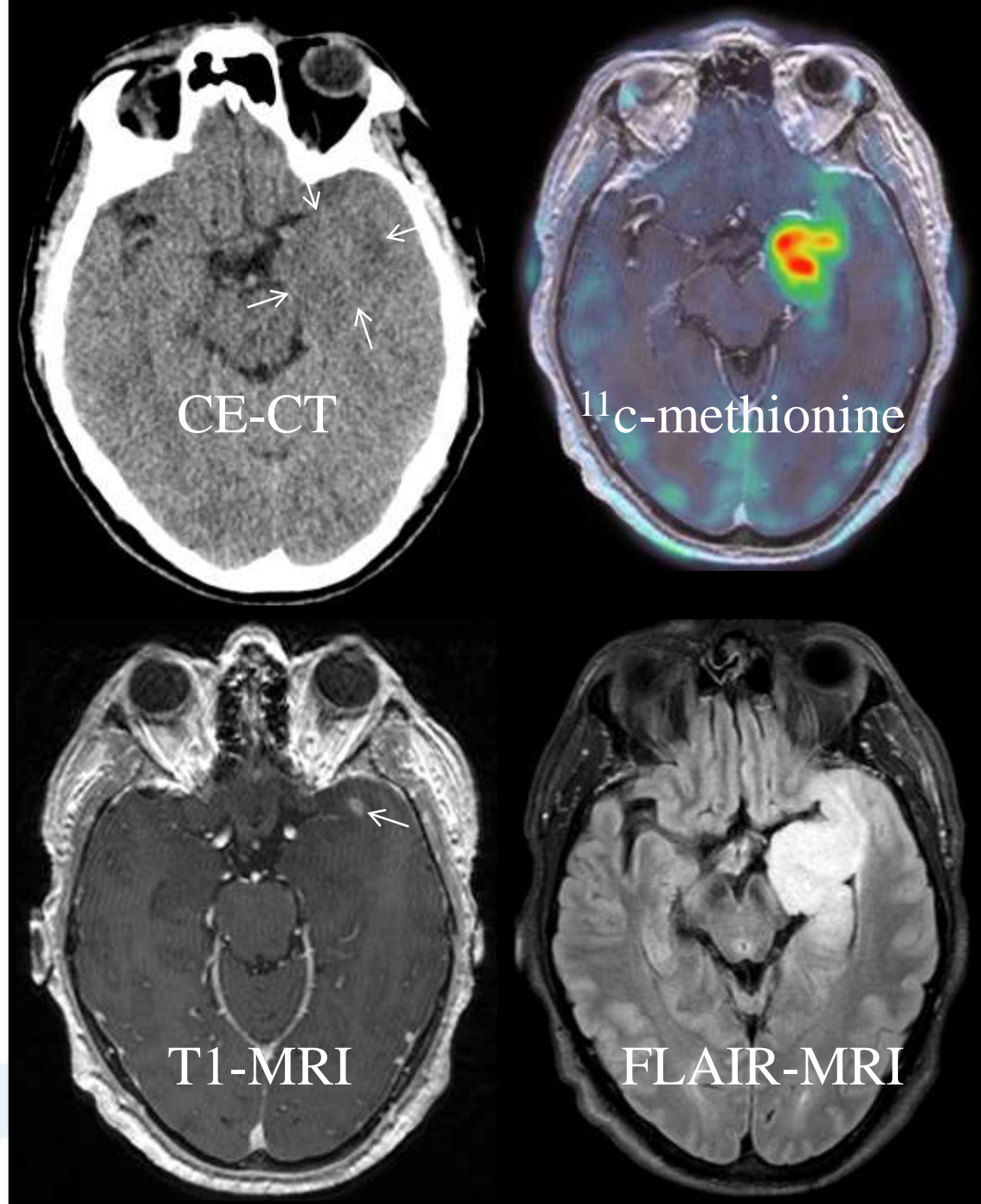
CE T1-W (fat Saturated)

T1-W (fat Saturated)

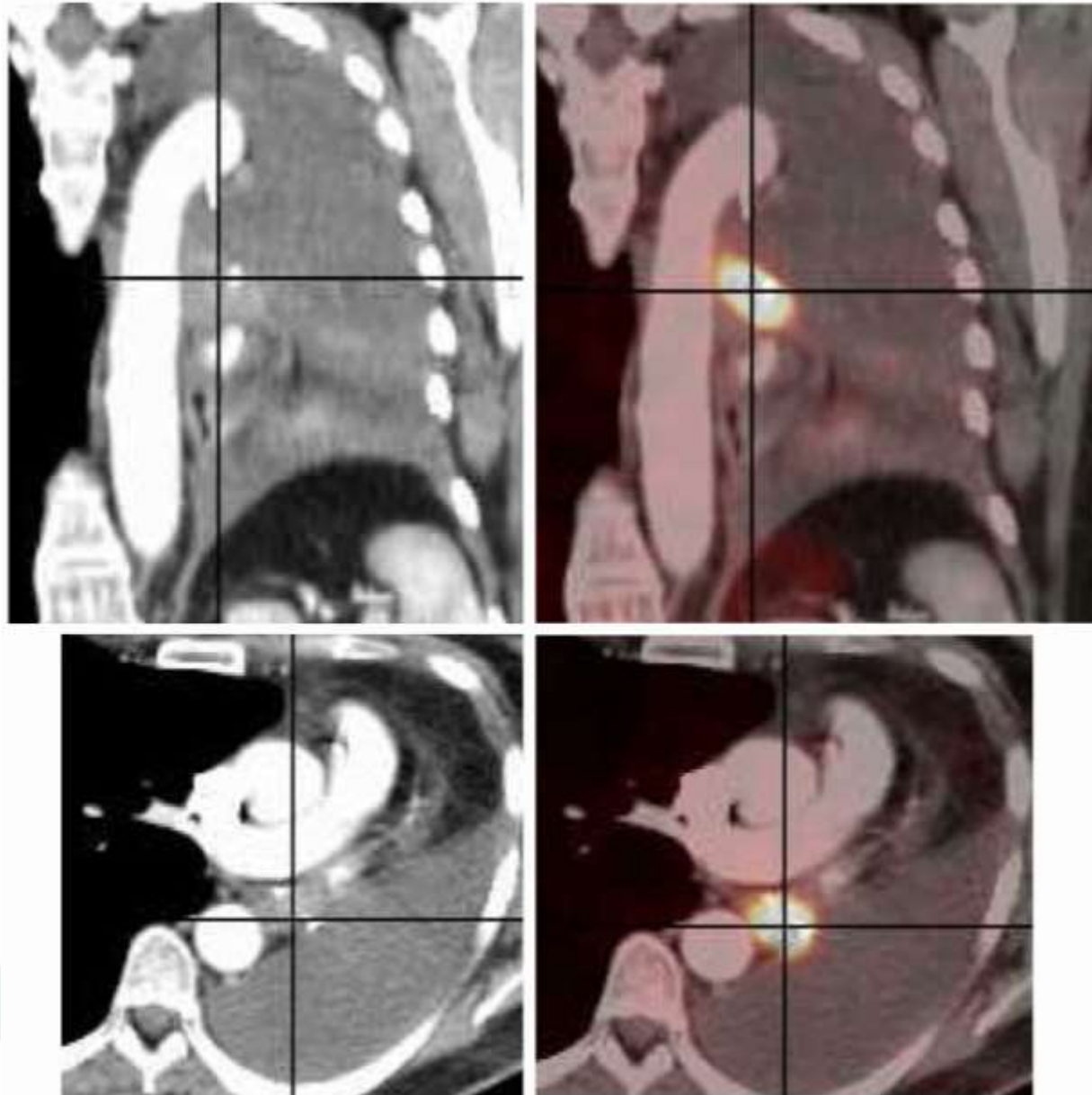
ConeBeam CT scanner



Multimodality imaging for target visualisation

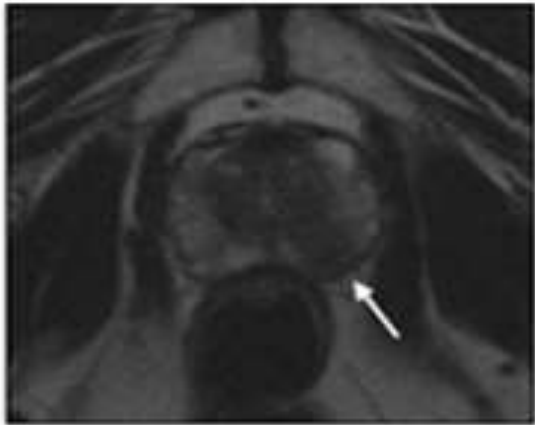


Multimodality imaging for target visualisation

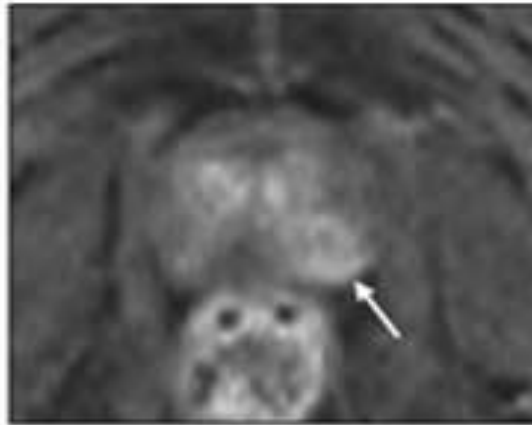


Multimodality imaging for target visualisation

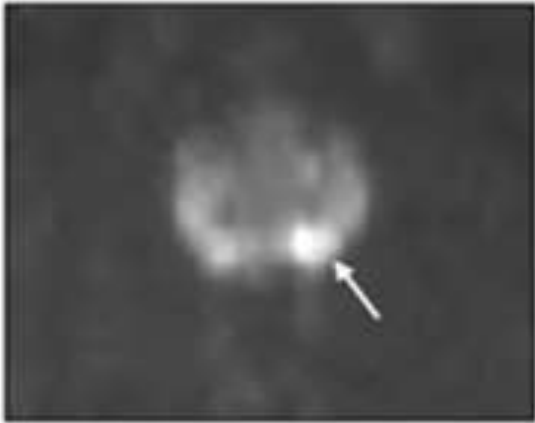
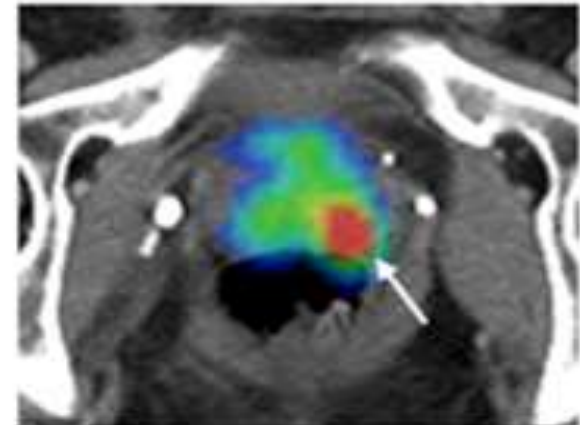
T2w MRI



DCE MRI



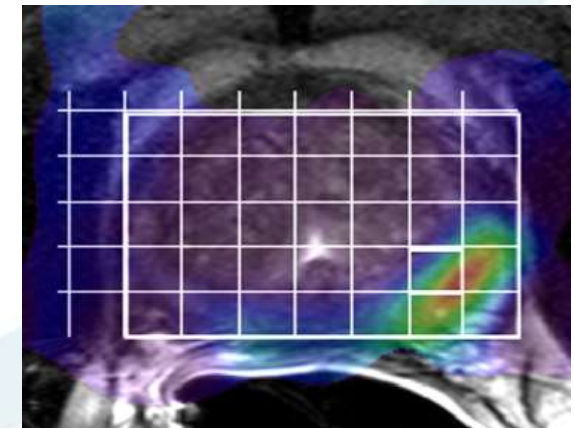
^{11}C -Choline PET-CT



DW MRI: b1000



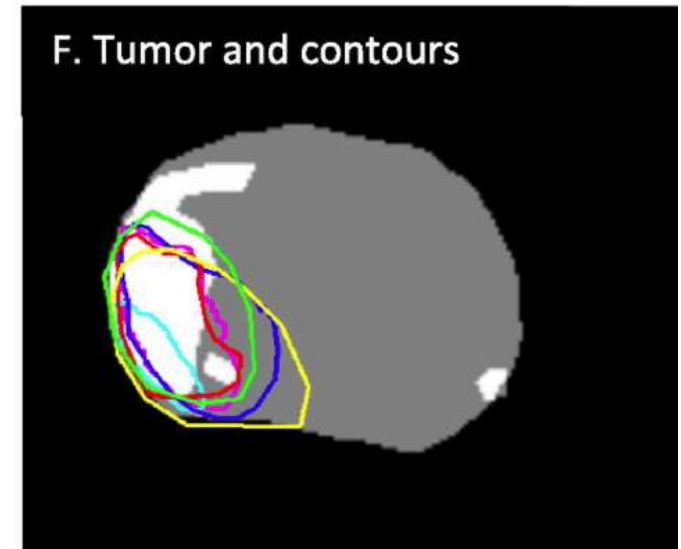
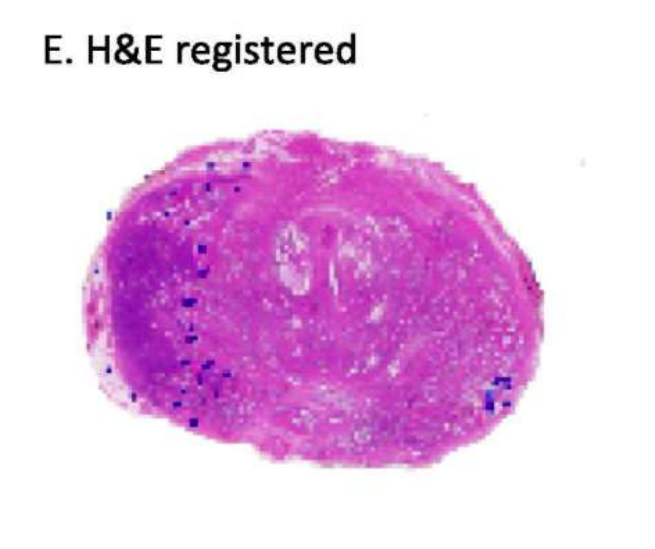
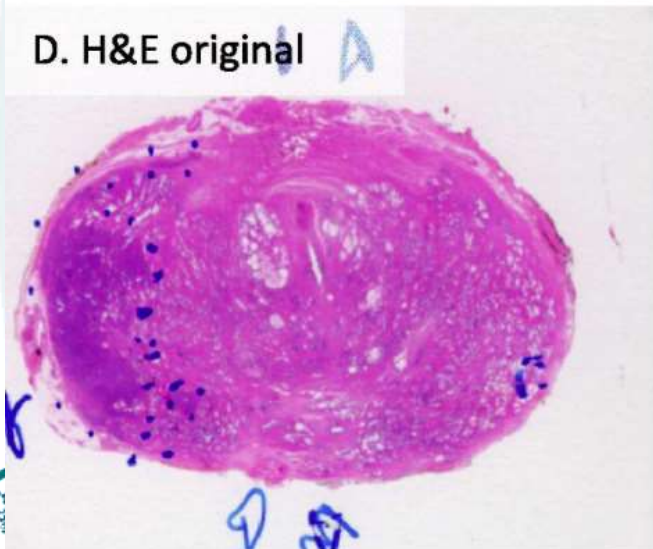
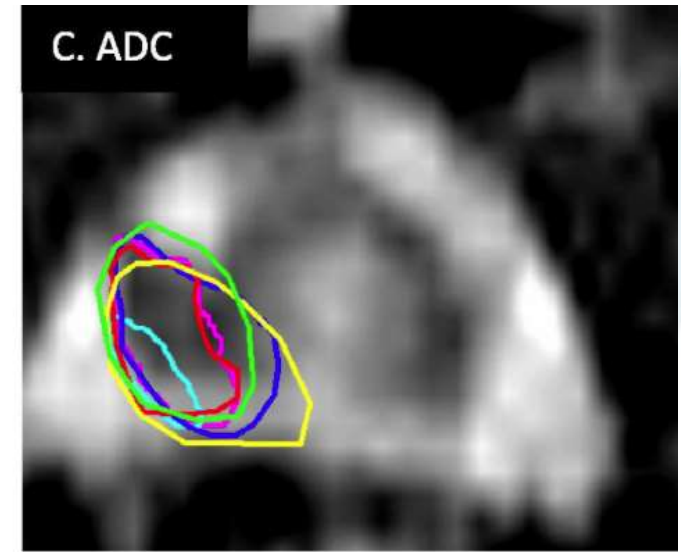
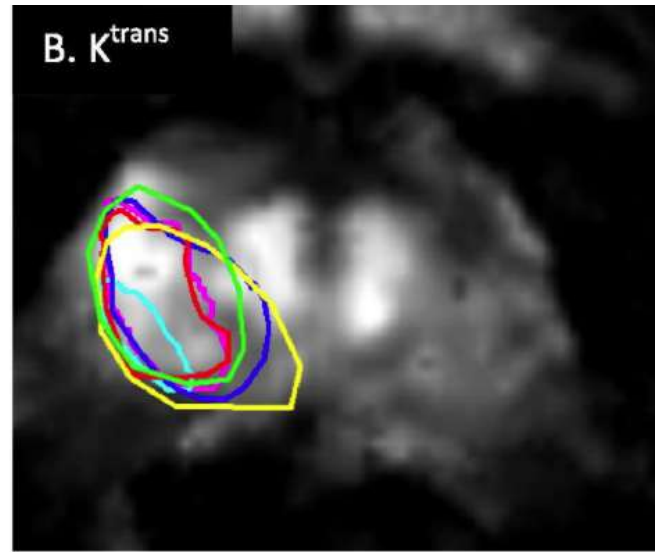
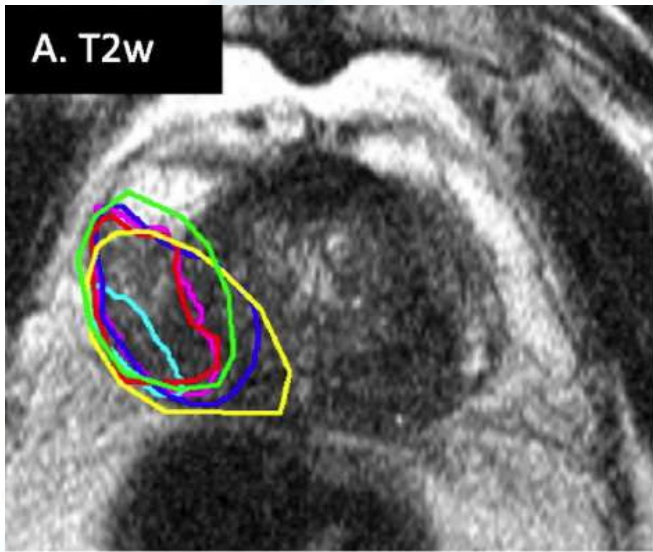
DW MRI: ADC map



MRS

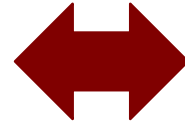


Multimodality imaging for target visualisation

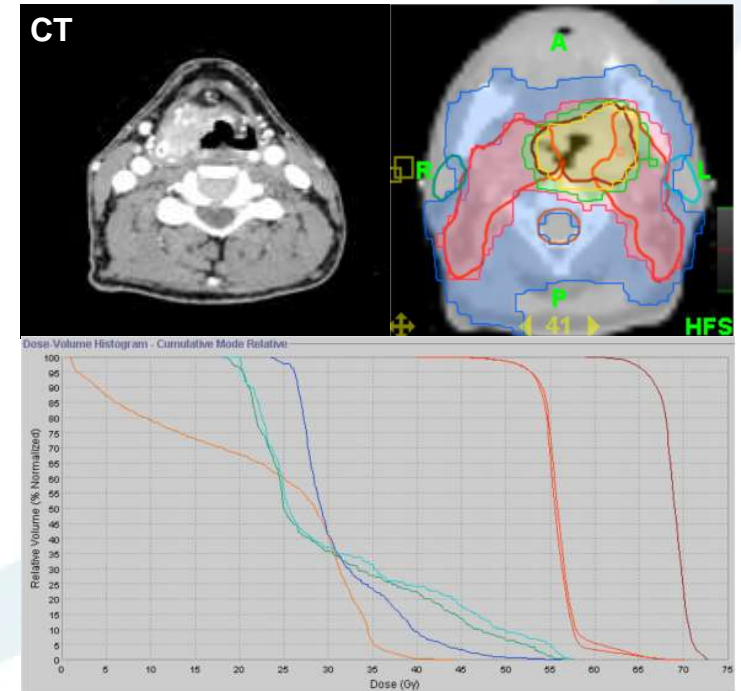
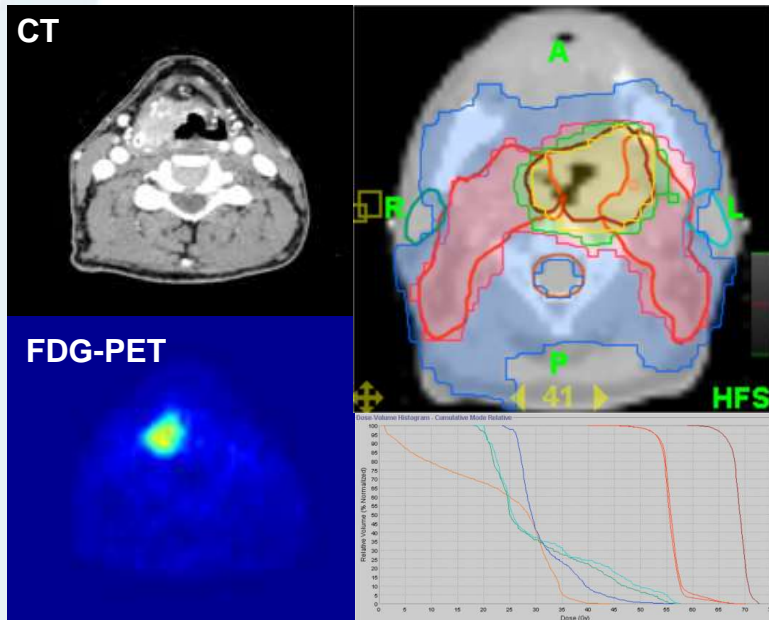


FDG-PET based target volume delineation

R/ PET-based IMRT treatment



CT-based IMRT planning

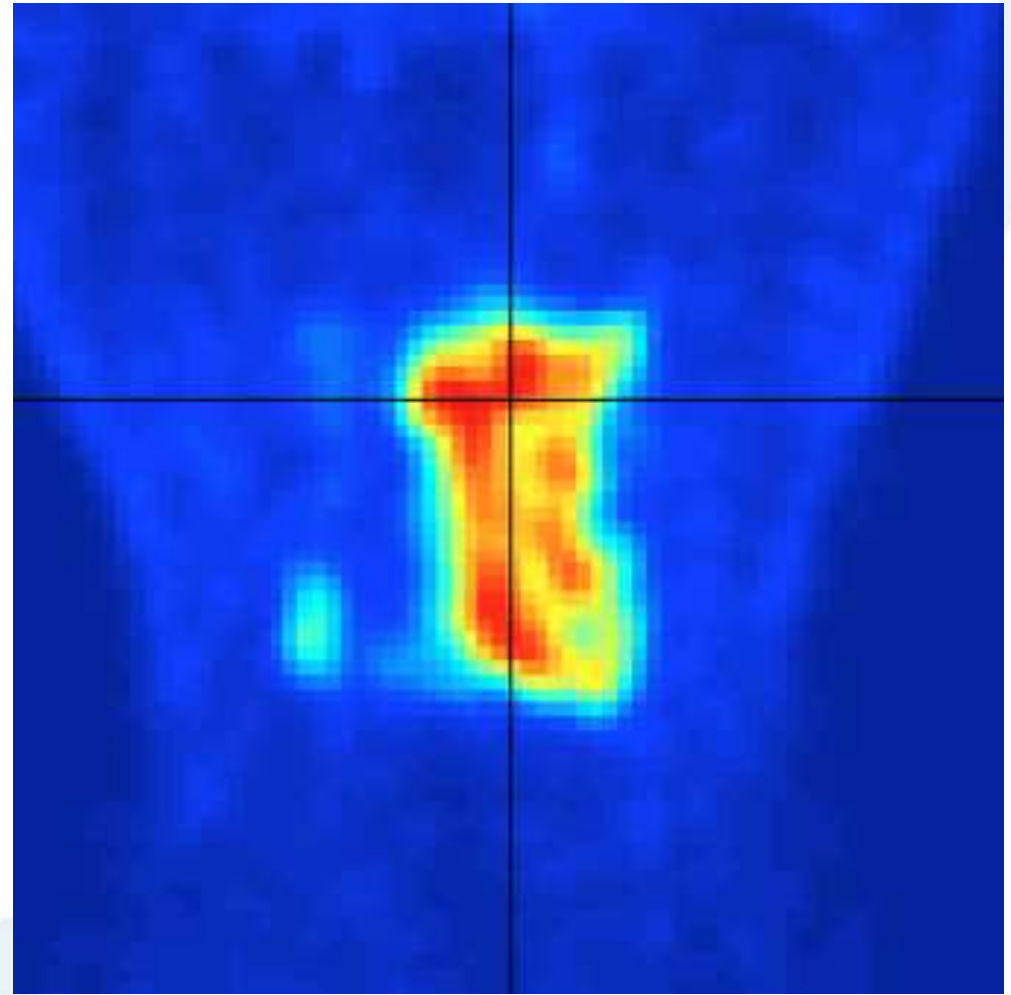
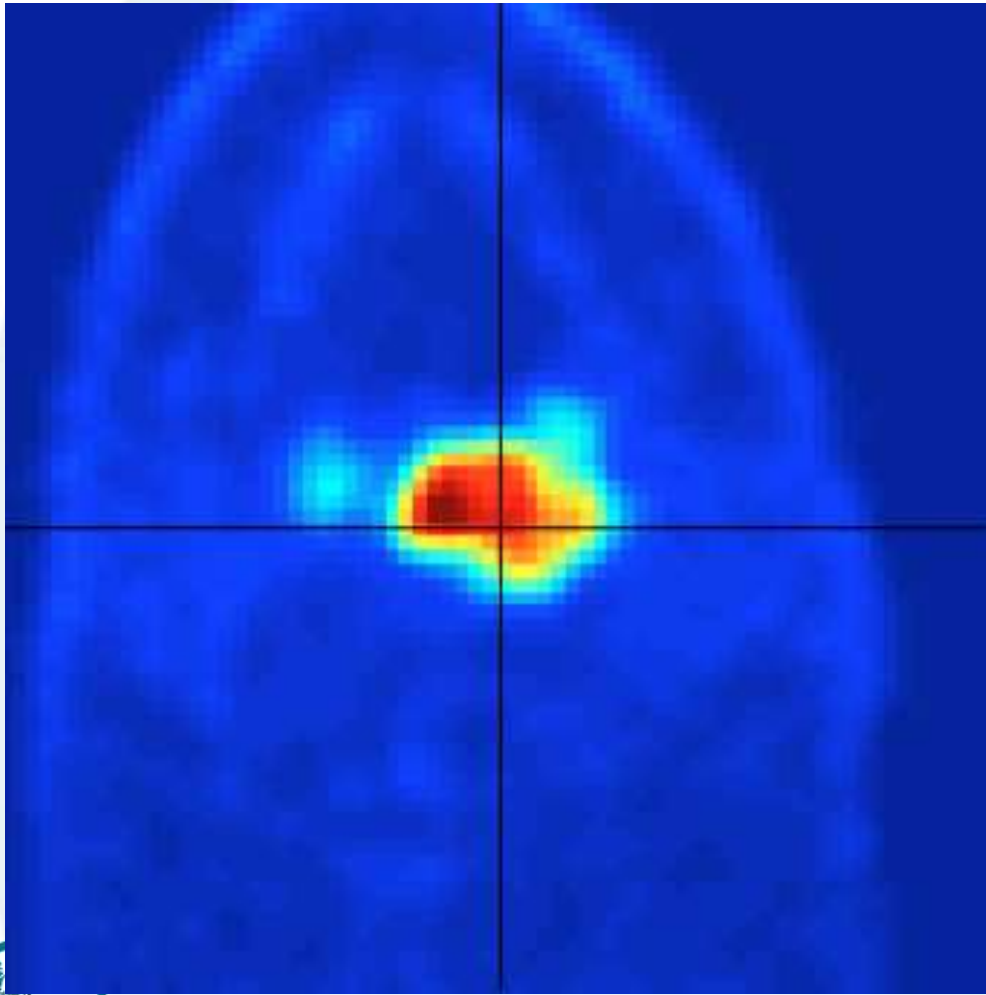


No difference in target volume conformity: $p = ns$



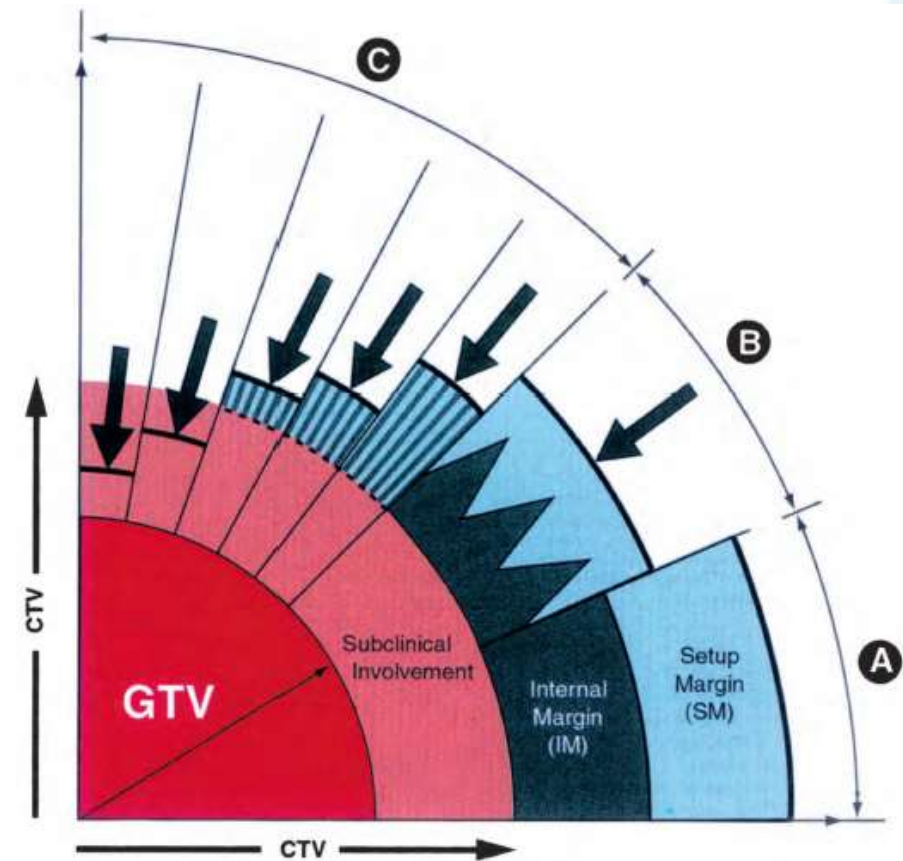
Imaging the target: intra-tumour heterogeneity

SCC oropharynx: T4b-N0-M0 – FDG-PET-CT



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↓ The arrow illustrates the influence of the organs at risk on delineation of the PTV (thick, full line).

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From primary tumor GTV to CTV

Geometrical margins

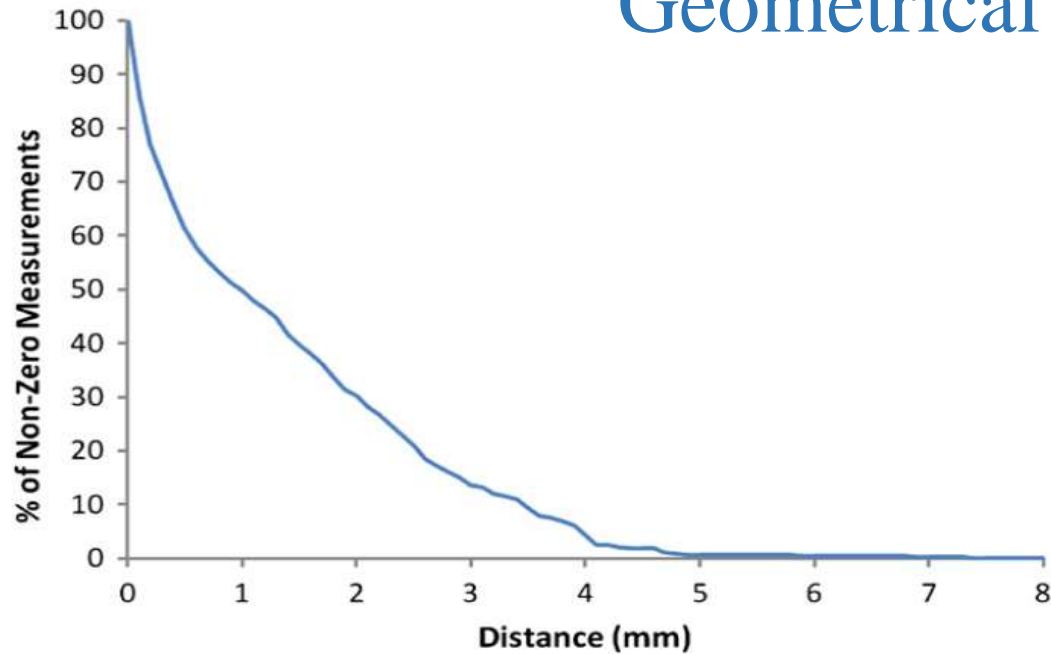


Fig. 8. Graph showing the percentage of nonzero measurements against distance from the gross tumor volume.

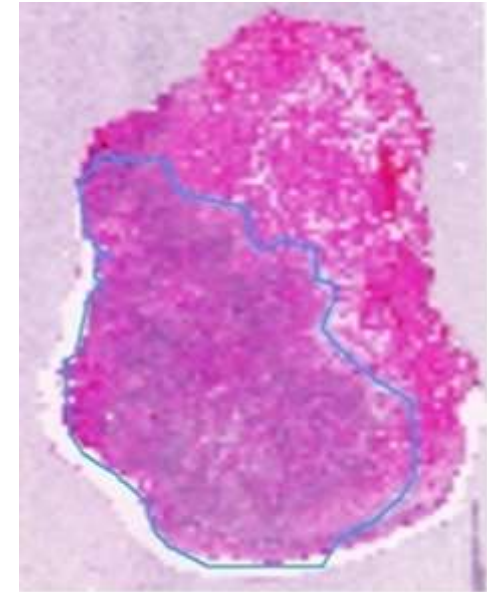
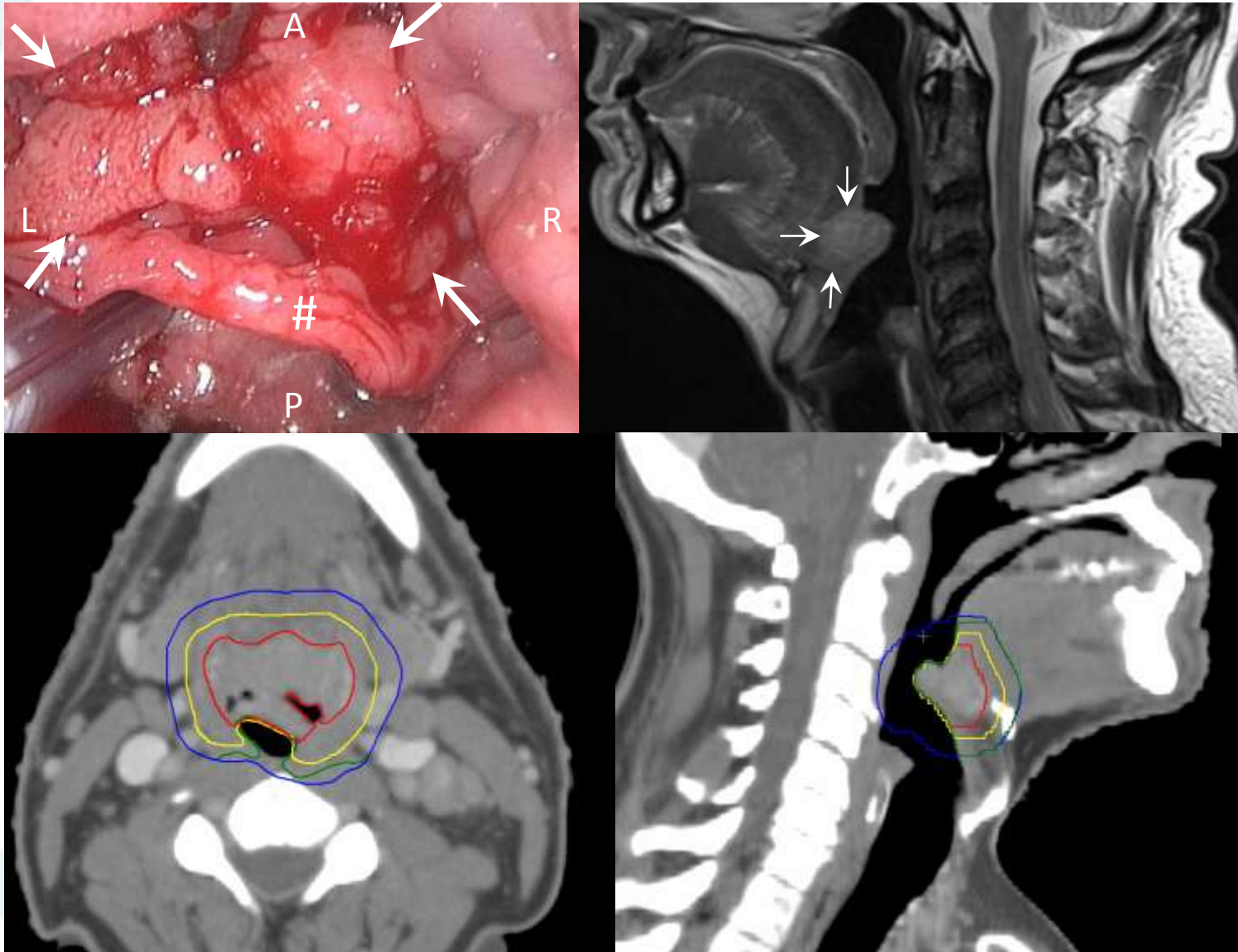


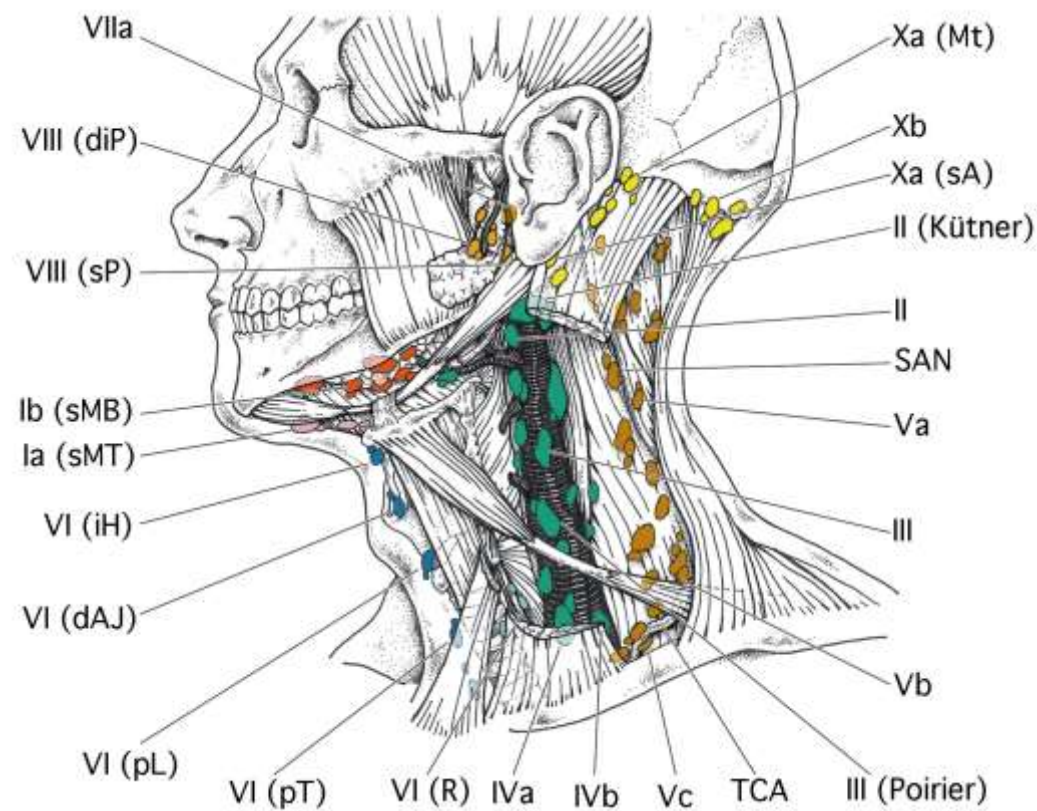
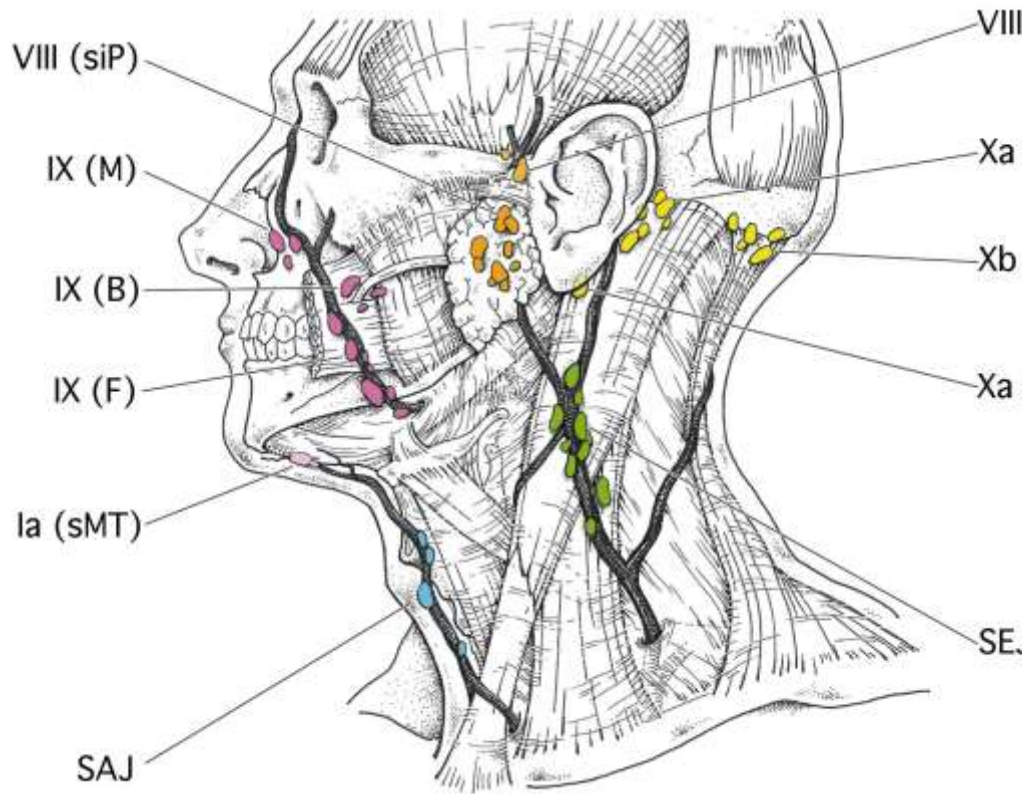
Fig. 4. Image at $\times 4$ magnification and naked eye resolution with gross tumor volume contoured in blue.

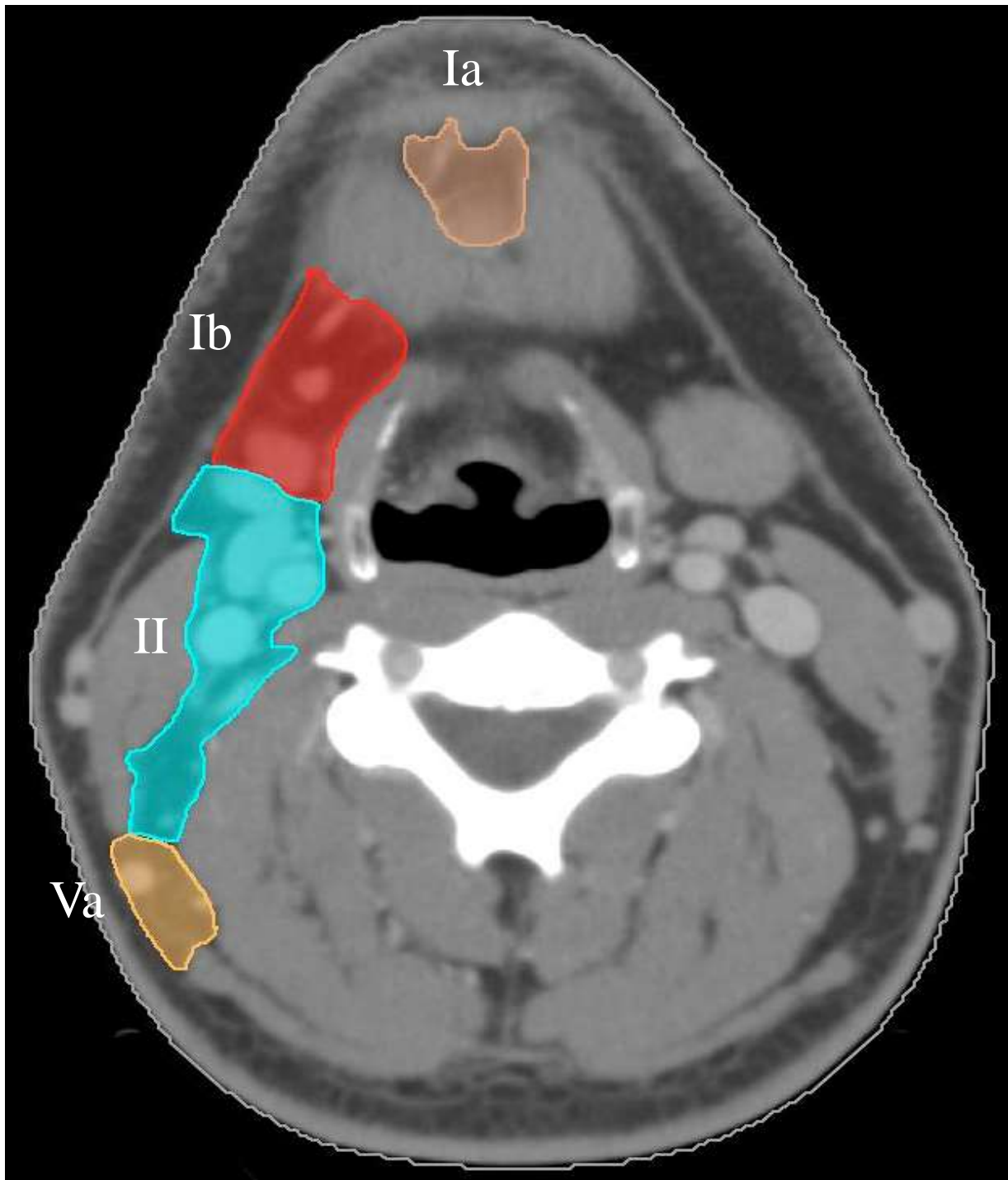
Of 88 slides from 10 patients with oral cancers, 44 (50%) had signs of microscopic extension. The maximum distance from the border was 7.8 mm. Ninety-nine percent of all MD was within 4.75 mm and 95% was within 3.95 mm of the GTV.

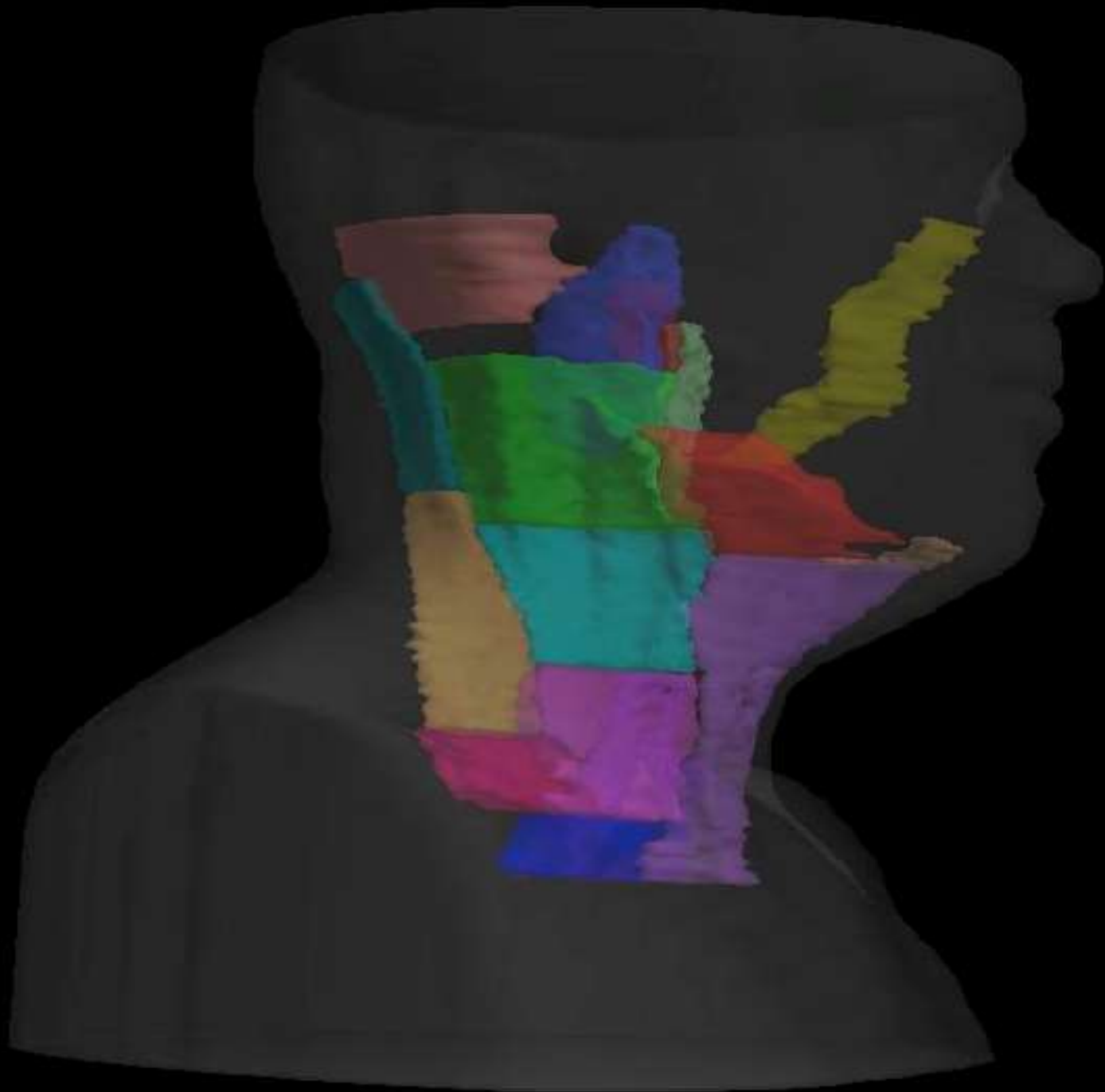
From macroscopic (GTV_P) to microscopic (CTV_P) target volumes



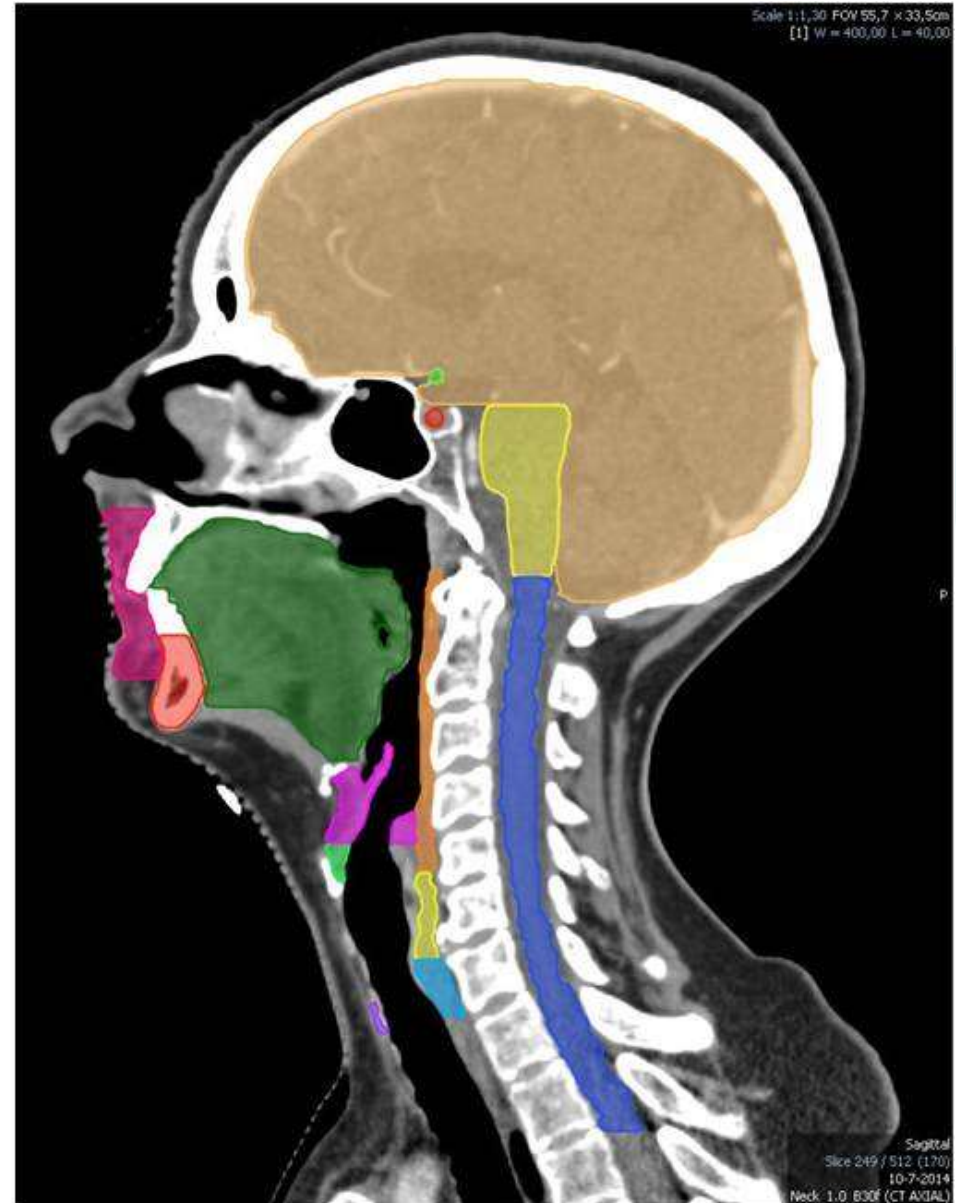
CT-based delineation of lymph node levels in the neck (revised version 2013)



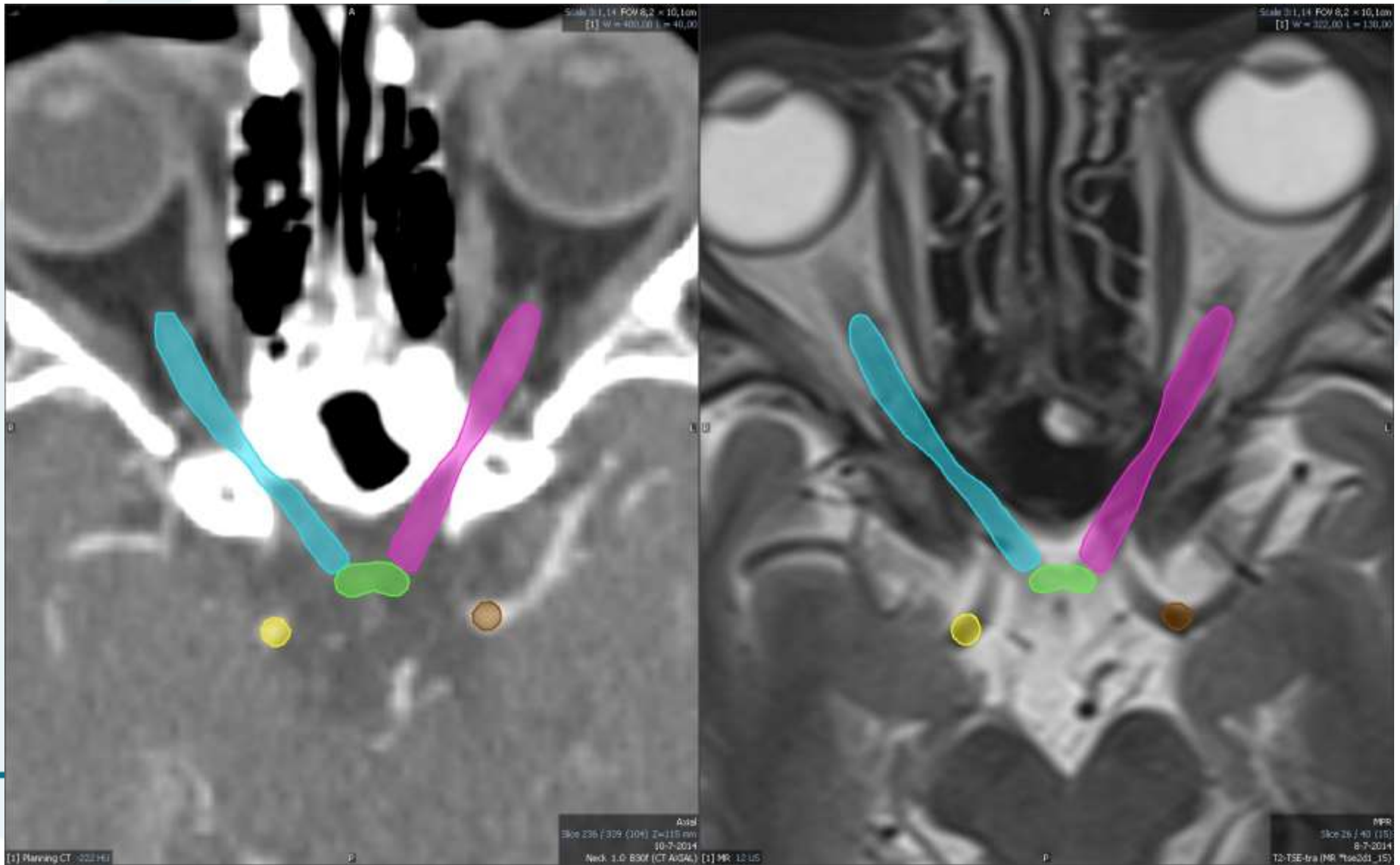




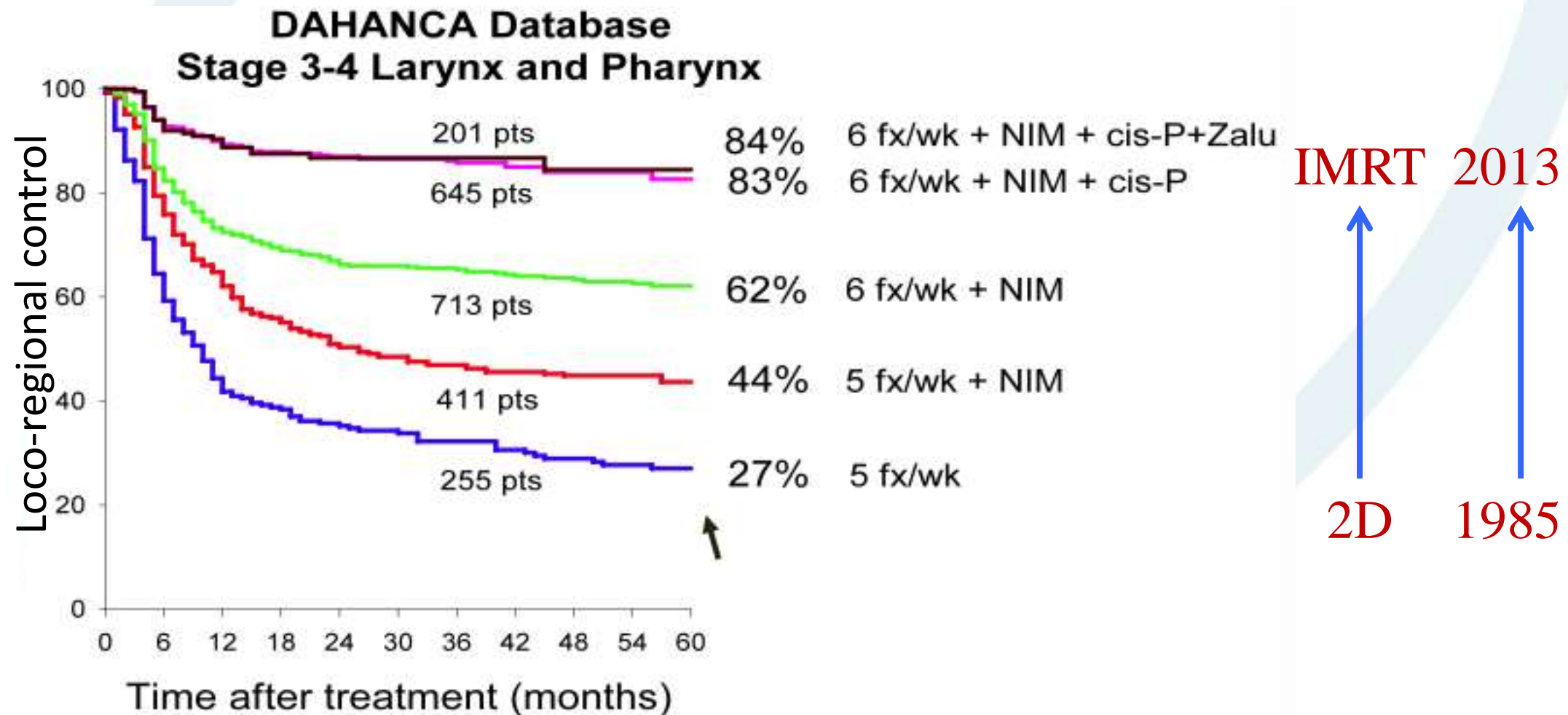
Imaging the Organ at Risk



Multimodality imaging for Organ at Risk visualisation



Thirty years of progresses: the Danish example



Clinical Impact of Radiotherapy Compliance (TROG 02.02)

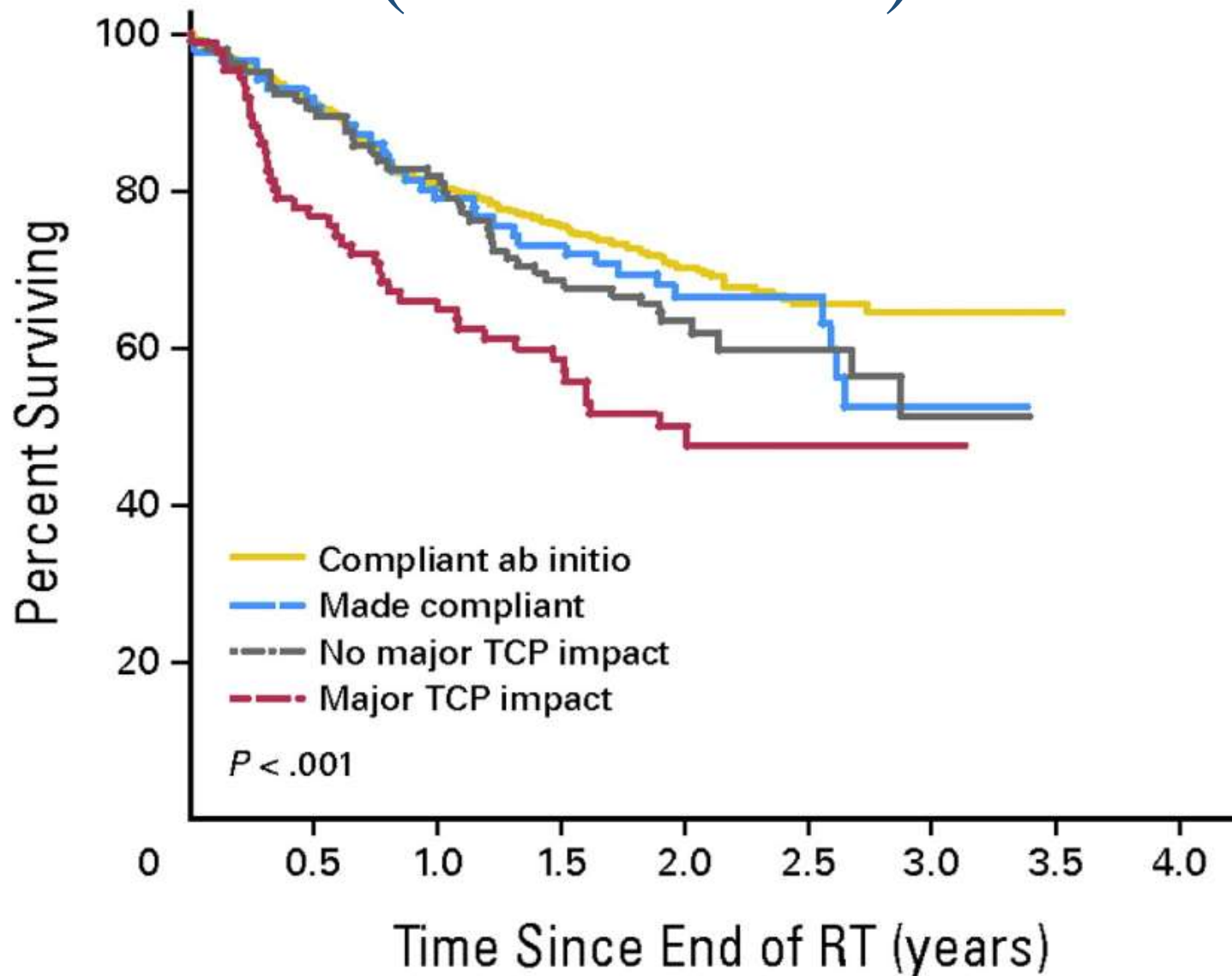
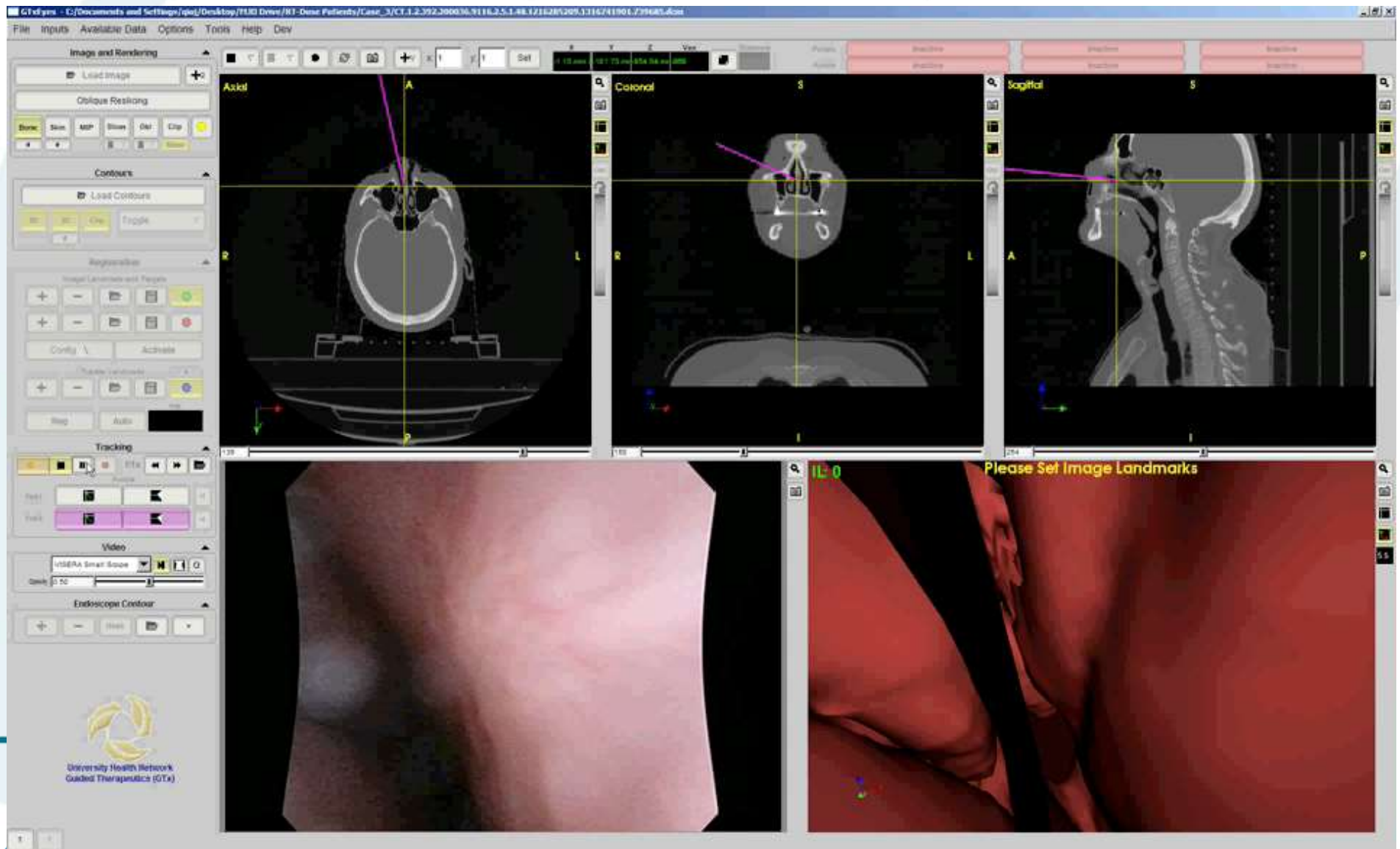


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- Multimodality imaging
- **Future prospects**



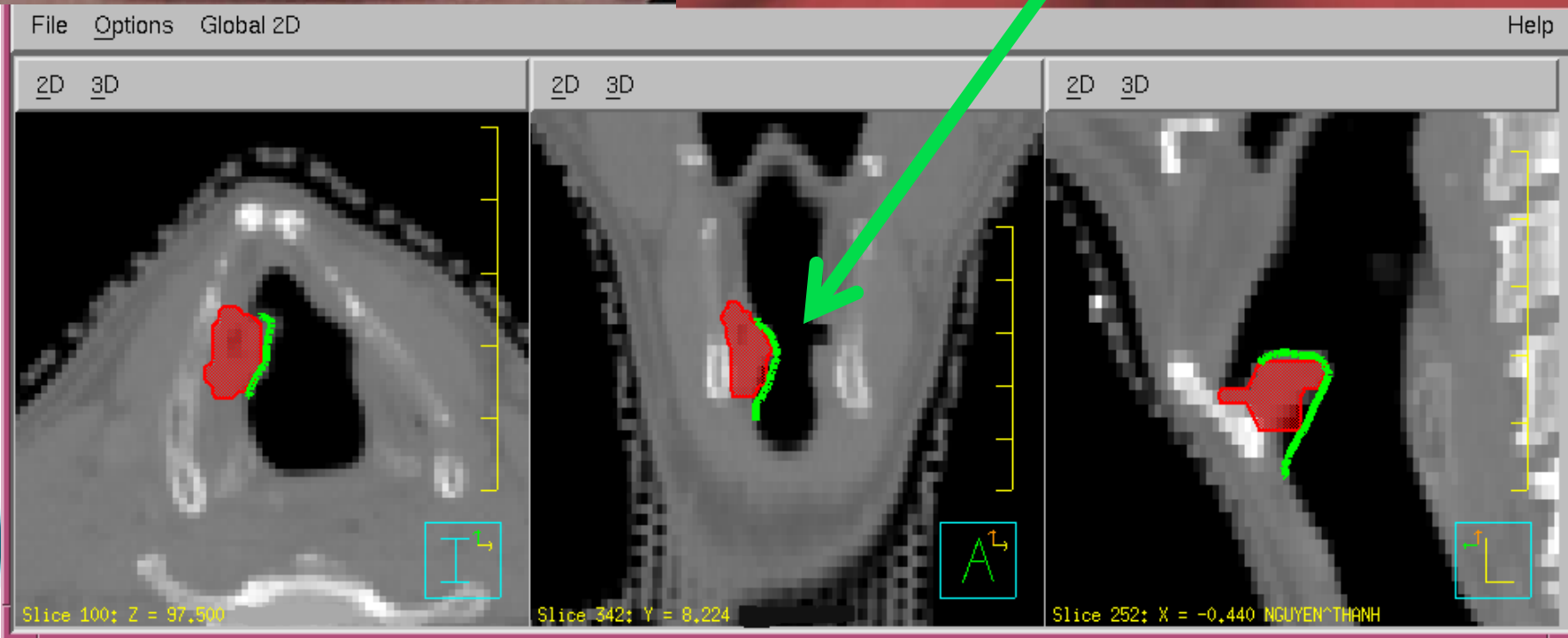
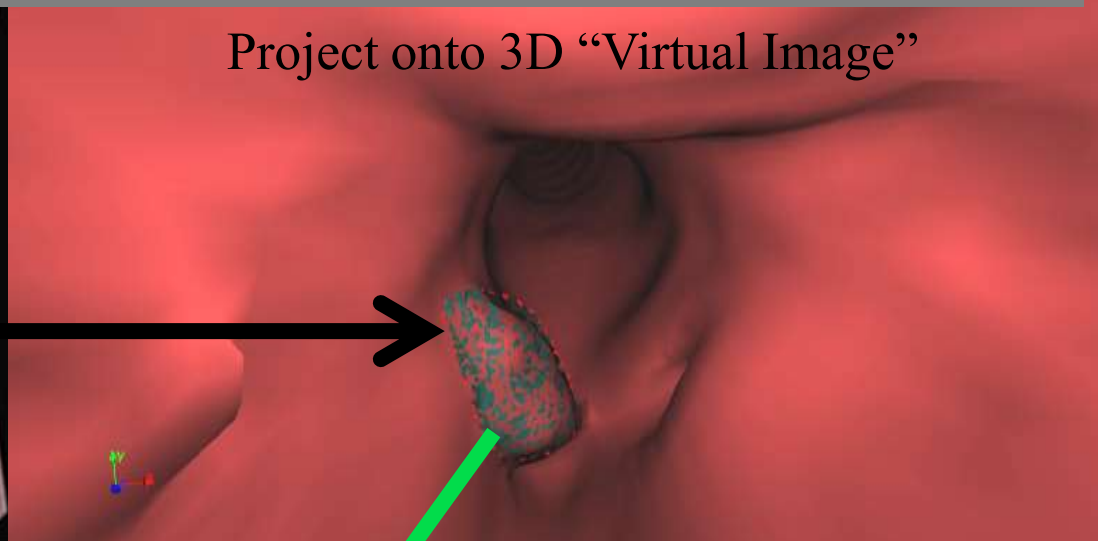
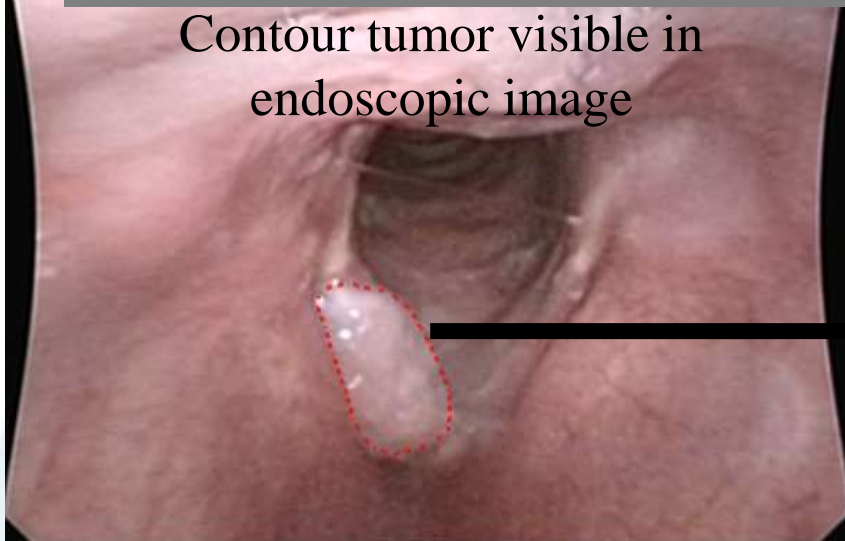
And in the “foreseeable” future... Augmented reality?



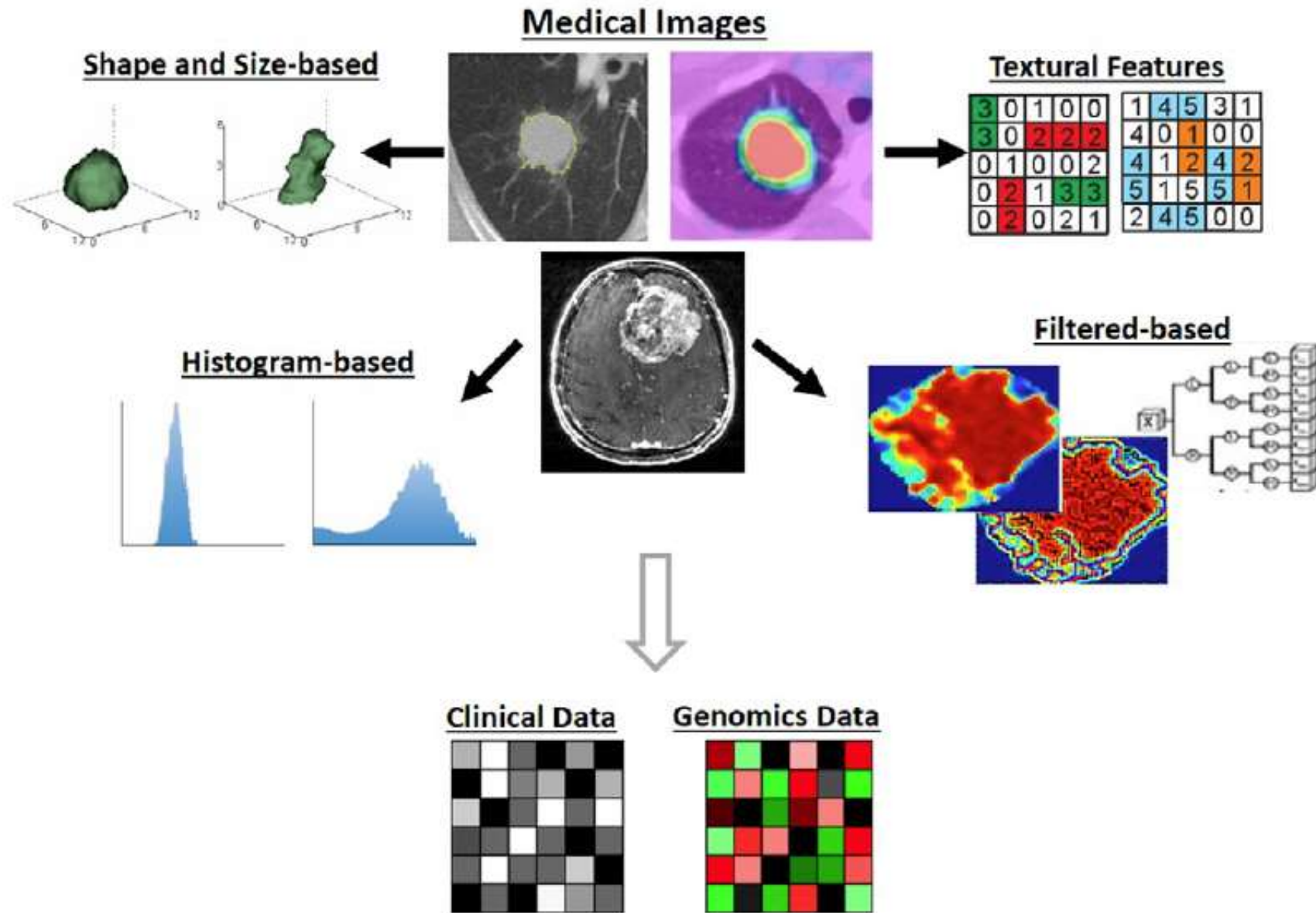
Clinical Impact: Endoscopic Contouring

Contour tumor visible in endoscopic image

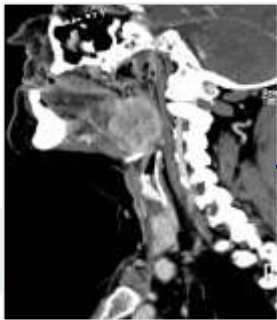
Project onto 3D "Virtual Image"



Radiomics for treatment individualization



From care to the “average” ...



**Multidisciplinary
Tumor board**



... to personalized care

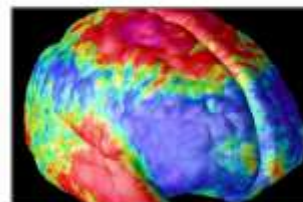


ANATOMY



**ANATOMICAL
IMAGING**

PHYSIOLOGY



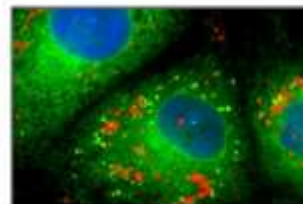
**FUNCTIONAL
IMAGING**

METABOLISM

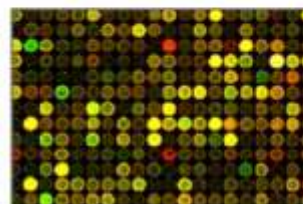


**MOLECULAR
IMAGING**

PROTEINS



GENOME





One patient ...

One disease ...

One treatment ...

"Here's my sequence..."

