

Implementing MobiusFX: Enhancing Treatment Outcomes

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Project Timeline



Data Transfer



Error Detection

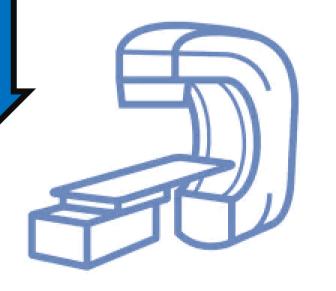


First Site: **Prostate**





Commission New Sites



Clinical Service & QA

Introduction

- > Technological advancements have resulted in increasingly complex radiotherapy (RT) treatment plans.
- >Advanced methods are required to provide verification of the entire treatment chain. [1]
- > Numerous commercial solutions are available in the UK for Online Treatment Monitoring (OTM).
- > Log-file analysis from the LINAC trajectory files is generally considered to be the optimal solution for OTM. [2]

> At NHST, we have a project underway to commission and bring into service, MobiusFX (MFX, Varian Medical System, Palo Alto, CA, USA) for log-file based OTM.

First Steps: Error Detection

In-house software was developed (Python) to introduce known errors to plans generated using the treatment planning system (TPS) and test data transfer to the MFX system.

> Error detection performance was tested by delivering a **Error Detection: MVP Phantom** standard plan without any errors, then delivering

treatment with an intentional error (Fig. 1):

o Jaw + 3, 5, 10mm

o MLC + 3, 5, 10mm

o MU ± 3, 5, 10, 15

OF +x3 +x5 +x10 mcx3 mcx5 mcx10 mu.15 mu.10 mu.5 mu.3 mu.x3 mu.x10 mu.x15

Figure 1: Gamma pass rates of plans analysed within the MFX, for standard (QA) and error plans

Future Work: Commissioning

First clinical site will begin with prostate patients, allowing users to gain experience interpreting and investigating results (Fig. 2).

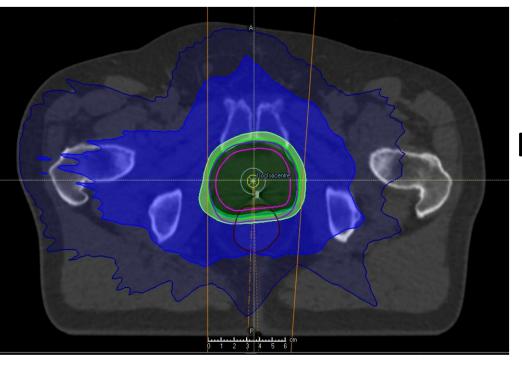
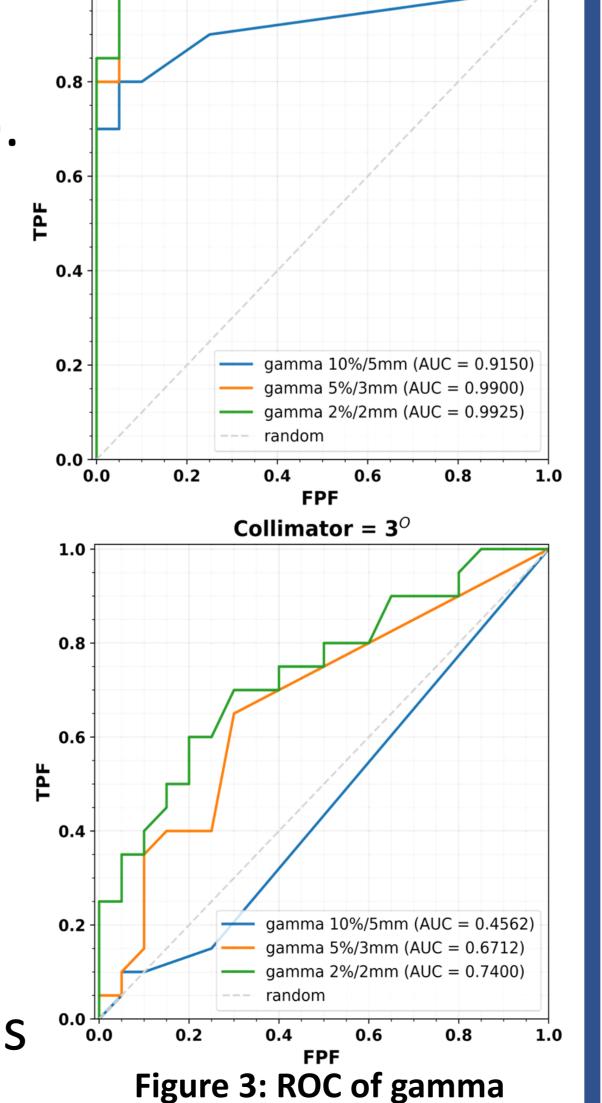


Figure 2: Prostate VMAT plan from the RayStation TPS

- ➤ Delta4 patient QA phantom can be compared to MFX and error detection tolerances, to set clinically acceptable baselines.
- > Receiver Operating Characteristic (ROC) analysis will allow for tuning of OTM behaviour, yielding satisfactory compromises between detection & workload (Fig. 3).



Collimator = 10°

Outlook

- > OTM with MFX will allow for verification and dose assessment for each treatment fraction, but will require additional quality assurance.
 - Release into clinical service requires the development of a regular QA protocol to trend and monitor the systems performance.
 - Patient outcomes are improved by making treatment more sensitive and reactive to errors, allowing for it to be corrected during treatment.
- > Time spent on patient specific QA can be

dramatically reduced, reducing the burden to the service (Fig. 4).

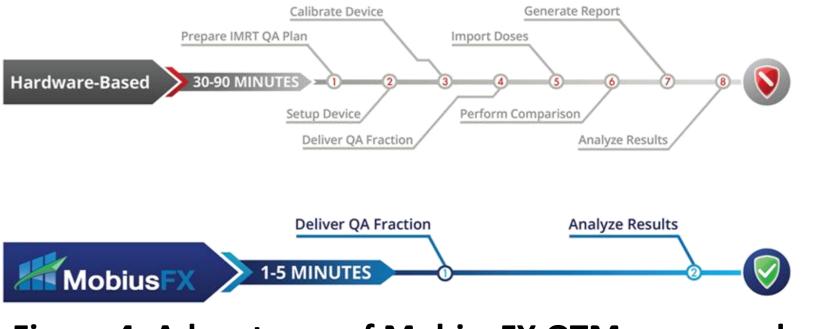


Figure 4: Advantages of MobiusFX OTM compared to standard patient QA practice

tolerances for introduced errors