

Inter- and intra-fraction fiducial position reproducibility in end-exhalation breath hold for Ethos liver radiotherapy

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To determine inter- and intra-fraction fiducial and patient position reproducibility in order to determine appropriate safety margins for liver SBRT treatment on Ethos.

Ethical review	Approved WMO
Status	Pending
Health condition type	Hepatobiliary neoplasms malignant and unspecified
Study type	Observational invasive

Summary

ID

NL-OMON57145

Source

ToetsingOnline

Brief title

Part of the Modern Art study

Condition

- Hepatobiliary neoplasms malignant and unspecified

Synonym

hepatocellular carcinoma, liver metastases

Research involving

Human

Sponsors and support

Primary sponsor: Erasmus MC, Universitair Medisch Centrum Rotterdam

Source(s) of monetary or material Support: Varian Medical Systems

Intervention

Keyword: Hepatocellular carcinoma, Liver metastases, Online adaptive, Stereotactic body radiation therapy

Outcome measures

Primary outcome

The primary parameters are inter- and intra-fraction fiducial position reproducibility on the Ethos.

Secondary outcome

not applicable.

Study description

Background summary

One of the possible treatments for patients with liver tumours (hepatocellular carcinoma (HCC) or liver metastases) at the Erasmus MC is stereotactic body radiation therapy (SBRT) on the Cyberknife. To spare the organs at risk, suboptimal coverage of the planning target volume is sometimes accepted on the Cyberknife. The Ethos treatment system is equipped with a novel cone-beam CT (CBCT), which provides higher quality images. This makes it possible to consider online adaptive radiotherapy with daily plan adaptation, potentially leading to a higher dose on the tumour whilst sparing the surrounding healthy tissue more.

Study objective

To determine inter- and intra-fraction fiducial and patient position reproducibility in order to determine appropriate safety margins for liver SBRT treatment on Ethos.

Study design

A prospective, single arm cohort study.

Study burden and risks

Nine Hypersight CBCTs will be made of each patient. These will be made over three sessions, with three CBCTs per session (41 mSv or 0.041Gy in total, compared to 48-60Gy of total treatment). The patients will be asked to make these scans in end-exhalation breath-hold, with each breath-hold lasting six seconds. The imaging sessions will last fifteen minutes, and will take place immediately before or after the standard treatment fraction on the Cyberknife. There will be no direct personal benefit for the participants.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

- Written informed consent;
- Patients discussed in multidisciplinary tumor board;
- Patients diagnosed with liver metastases and referred to the dept. of

Radiotherapy to undergo treatment with stereotactic radiotherapy; or patient ≥ 65 years, diagnosed with HCC and referred to the dept. of Radiotherapy to undergo standard treatment;

- Able to comply with breath-hold requirements.

Exclusion criteria

- Eligible for surgery, ablation or liver transplantation.

Study design

Design

Study type: Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-10-2024

Enrollment: 10

Type: Anticipated

Medical products/devices used

Registration: No

Ethics review

Approved WMO

Date: 23-10-2024

Application type: First submission

Review commission: METC Erasmus MC, Universitair Medisch Centrum Rotterdam (Rotterdam)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL86070.078.24