Robotic stereotactic body radiotherapy

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Robotic Stereotactic Body Radiotherapy (rSBRT) is a sophisticated and precise radiation therapy technique that combines the use of robotics, stereotactic principles, and advanced imaging to deliver highly focused and accurate radiation doses to tumors. This treatment approach is particularly effective for treating small tumors or metastases, often referred to as "oligometastatic disease," where there are only a limited number of metastases in the body.

Key features and concepts associated with rSBRT include:

1. Stereotactic Principles: Stereotactic radiotherapy involves precise targeting of radiation to a specific three-dimensional location within the body. It relies on advanced imaging techniques, such as CT scans, MRI, or PET scans, to precisely locate the tumor and ensure that the radiation is delivered with pinpoint accuracy.

2. Robotics: The term "robotic" in rSBRT refers to the use of robotic arms or platforms to position the radiation source with extreme accuracy. These robotic systems allow for fine-tuned adjustments to ensure that the radiation beams are delivered from multiple angles, converging precisely on the tumor target. This level of precision minimizes damage to surrounding healthy tissues and organs.

3. Treatment Planning: Before administering rSBRT, a comprehensive treatment plan is created based on detailed imaging data. This involves determining the optimal radiation dose, the number of treatment sessions (fractions), and the angles from which the radiation beams will be delivered. The aim is to maximize the radiation dose to the tumor while minimizing exposure to nearby healthy tissues.

4. Hypofractionation: One of the distinguishing features of SBRT, including rSBRT, is the use of hypofractionation. This means that the total prescribed radiation dose is divided into a smaller number of larger doses, delivered over a few treatment sessions (often fewer than 5). This approach capitalizes on the radiobiological principle that highly focused radiation can cause significant damage to tumor cells while allowing surrounding healthy tissues to recover.

5. Oligometastatic Disease: Oligometastatic disease refers to a state in which a patient with cancer has a limited number of metastatic lesions, typically five or fewer. The goal of treating oligometastases with rSBRT is to eliminate or control these metastases, potentially extending the patient's disease-free interval and overall survival.

6. Clinical Applications: rSBRT is commonly used to treat various types of tumors, including lung metastases, liver tumors, spinal tumors, and more. It is particularly effective for cases where surgical removal of the tumor is challenging due to location or patient-related factors.

7. Benefits and Challenges: The precision and focused nature of rSBRT offer several benefits, such as improved tumor control rates and reduced treatment duration compared to conventional radiation therapy. However, this technique requires advanced equipment, rigorous treatment planning, and highly specialized medical teams to ensure accurate delivery.

In summary, Robotic Stereotactic Body Radiotherapy (rSBRT) represents a cutting-edge approach to delivering highly targeted and effective radiation therapy for patients with limited metastatic disease or small tumors. Its integration of robotics and stereotactic principles allows for a level of precision that can lead to improved treatment outcomes while minimizing potential side effects.

Rosenbrock et al. presented a retrospective analysis focused on the effectiveness and safety of robotic stereotactic body radiotherapy (rSBRT) for treating lung cancer metastases in patients with oligometastatic disease.

1. Research Context and Objectives: The abstract provides a clear overview of the research's context by explaining the significance of rSBRT in treating lung metastases among patients with oligometastatic disease. The objective is well-defined: to assess the local control rate, progressionfree survival, overall survival, and toxicity associated with rSBRT, while identifying independent factors influencing its efficacy and safety.

2. Patient Cohort and Methodology: The methodology mentions a retrospective single-center analysis of patients with various cancer types who underwent rSBRT using the Accuray Cyberknife® device. This description provides an understanding of the patient demographics and the treatment modality used, which enhances the study's credibility. The temporal scope (2012-2019) and the inclusion of different cancer types emphasize the study's generalizability.

3. Treatment Outcomes: The abstract presents essential treatment outcomes, such as the 4-year Kaplan-Meier estimates for local control rate (LC), progression-free survival (PFS), and overall survival (OS). These metrics provide insights into the effectiveness of rSBRT in managing lung metastases. The reported LC of 72.0% suggests favorable tumor control, while the lower PFS (12.4%) and OS (49.7%) indicate challenges in preventing disease progression and achieving long-term survival, which is common in metastatic settings.

4. Factors Influencing Treatment Efficacy: The study conducts a Cox regression analysis to identify independent factors affecting the efficacy of rSBRT. Notably, it finds that LC for metastases from colorectal carcinoma and those treated with a lower biological effective dose (BED10) is significantly

worse. This finding underscores the importance of tailoring treatment parameters based on tumor histology and radiation dose to optimize outcomes.

5. Safety and Toxicity: The abstract mentions the occurrence of grade I-II pneumonitis in 21.4% of cases treated with rSBRT. This information highlights the potential toxicity associated with the treatment, which is crucial for evaluating the overall risk-benefit profile of rSBRT.

6. Conclusion: The study concludes that rSBRT is an effective and safe therapy for lung metastases, aligning with the initial hypothesis. It also suggests that aiming for a higher BED10 (>100 Gy) is advisable, particularly for radioresistant histologies such as colorectal carcinoma, to improve treatment outcomes.

7. Limitations and Future Directions: While the abstract provides valuable insights, it's important to acknowledge potential limitations. Being a retrospective study from a single center, there might be inherent biases and generalizability concerns. Additionally, the abstract doesn't elaborate on the specific clinical and treatment-related characteristics of patients, which could provide a deeper understanding of the results.

In conclusion, this abstract contributes valuable information to the field of rSBRT for lung metastases in patients with oligometastatic disease. The study's findings, particularly regarding factors influencing efficacy and the importance of radiation dose, can guide future research and clinical decision-making ¹⁾.

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Rosenbrock J, Lieser A, Ostermann-Myrau J, Judge M, Linde P, Claus K, Marnitz S, Kocher M, Baues C, Celik E. Efficacy and Toxicity of Robotic Stereotactic Body Radiotherapy of Lung Metastases in Patients With Oligometastatic Disease. Anticancer Res. 2023 Sep;43(9):4125-4131. doi: 10.21873/anticanres.16602. PMID: 37648304.

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