

PRELIMINARY EVALUATION OF TREATMENT-RELATED PNEUMONITIS (TRP) BY PROTON BEAM RADIOTHERAPY (PBT) COMPARED TO IMRT IN PATIENTS WITH LOCALLY ADVANCED NSCLC TREATED WITH CONCURRENT CT

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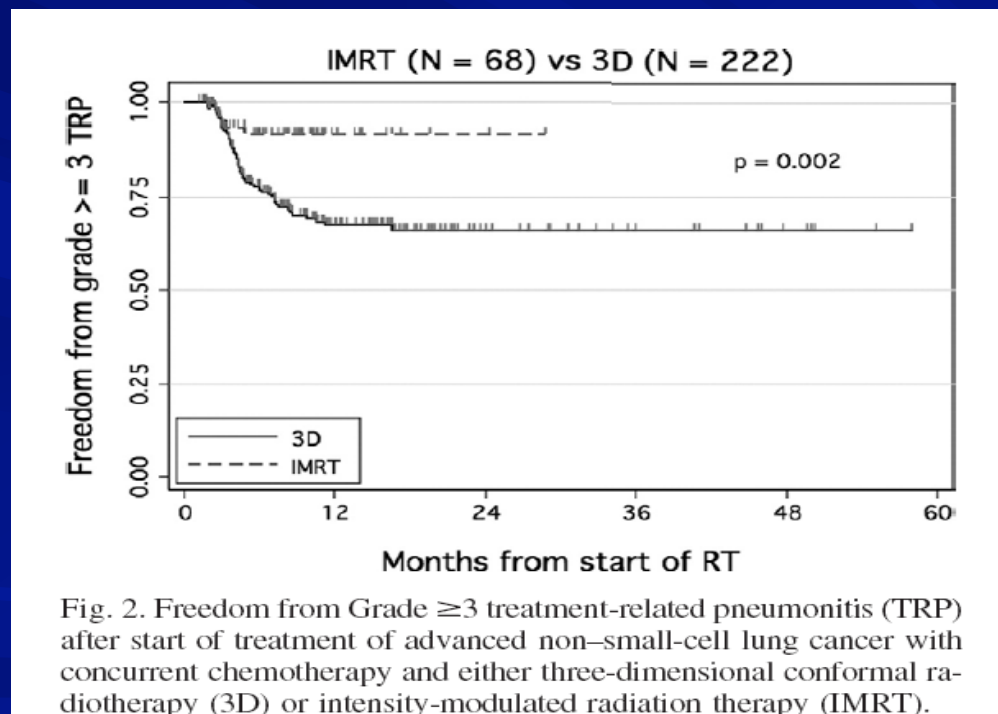
***PTCOG, Jacksonville
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Background

- MDACC retrospective study of locally advanced NSCLC treated w/ CT/XRT (IMRT or 3DCRT)



Yum,S et al. IJROBP 2007

At median f/up time of 9 months in both arms Grade $\Rightarrow 3$ TRP at 12 mo is 8% in IMRT arm and 32 % in 3D-CRT arm

Background

- Proton Beam Therapy (PBT) compared to photons
 - Lower exit dose
 - Lower integral dose
- Dosimetric reduction of dose to critical structures
- Dosimetric study by Chang et al... (2007)
- 10% to 20% absolute improvement in lung DVH for tx plans with Proton therapy compared to 3D-CRT or IMRT

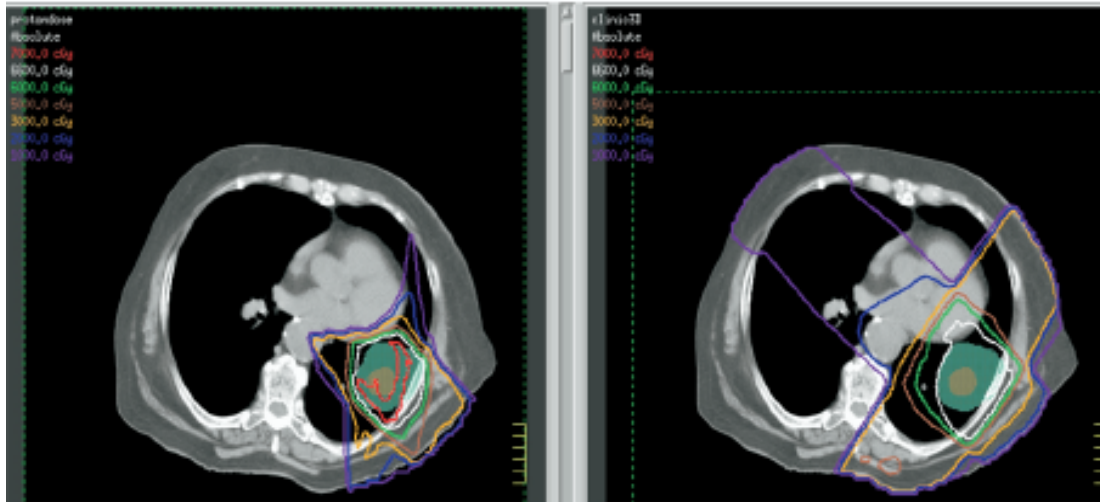
CLINICAL INVESTIGATION

Lung

SIGNIFICANT REDUCTION OF NORMAL TISSUE DOSE BY PROTON RADIOTHERAPY COMPARED WITH THREE-DIMENSIONAL CONFORMAL OR INTENSITY-MODULATED RADIATION THERAPY IN STAGE I OR STAGE III NON-SMALL-CELL LUNG CANCER

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Proton Plan

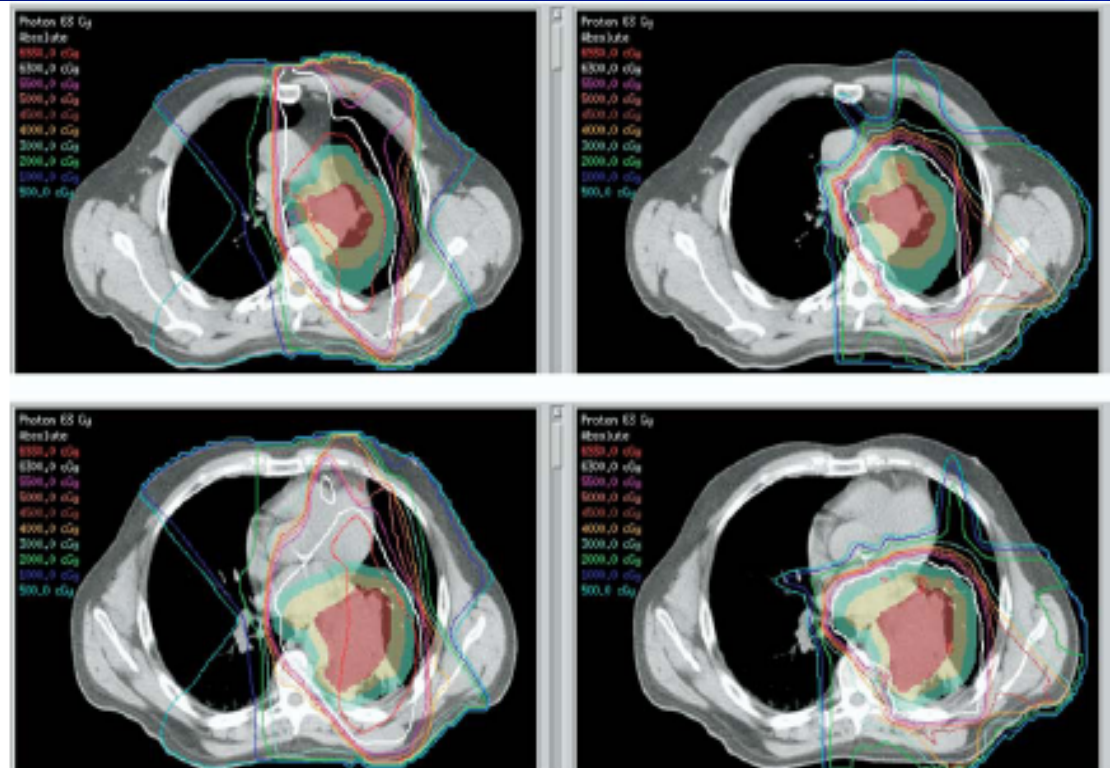
Photon Plan

Stage I NSCLC

Stage III NSCLC

Photon Plan

Proton Plan



Objectives

- Clinically evaluate incidence of treatment related pneumonitis (TRP) in:
 - Patients with locally advanced NSCLC who received concurrent CT with XRT (Proton Beam Therapy (PBT) or IMRT

Methods

- Retrospective Study
- From 2002 to 2007
- 106 patients identified
- PBT: 31 patients (2005-2007)
- IMRT: 75 patients (2002-2007)
- All patients after 2004 had treatment planning with 4D CT

Methods: Criteria

■ Inclusion Criteria:

- Concurrent Chemotherapy
- No history of prior major thoracic RT
- Dose ≥ 60 Gy (CGE for protons)

■ Excluded

- IMRT + 3D-CRT or IMRT + PBT

- Common Terminology Criteria (CTC) version 3.0 was used to grade toxicity

PULMONARY/UPPER RESPIRATORY						Page 3 of 4
		Grade				
Adverse Event	Short Name	1	2	3	4	5
Pneumonitis/pulmonary infiltrates	Pneumonitis	Asymptomatic, radiographic findings only	Symptomatic, not interfering with ADL	Symptomatic, interfering with ADL; O ₂ indicated	Life-threatening; ventilatory support indicated	Death

ALSO CONSIDER: Adult Respiratory Distress Syndrome (ARDS); Cough; Dyspnea (shortness of breath); Hypoxia; Infection (documented clinically or microbiologically) with Grade 3 or 4 neutrophils (ANC <1.0 x 10⁹/L) – *Select*; Infection with normal ANC or Grade 1 or 2 neutrophils – *Select*; Infection with unknown ANC – *Select*; Pneumonitis/pulmonary infiltrates; Pulmonary fibrosis (radiographic changes).

Patient Characteristics	PBT + Concurrent CT (N=31)	IMRT + Concurrent CT (N=75)	p-value
Gender			<i>0.857</i>
Male	20	47	
Female	11	28	
Age			<i>0.096</i>
Median (Range)	64.4 (45-78)	62 (38-82)	
Wt Loss			<i>0.118</i>
<5 %	25	49	
>= 5%	6	26	
Prior Malignancy			<i>0.001</i>
Yes	14	10	
No	17	65	

Tumor Characteristics	PBT + Concurrent CT (N=31)	IMRT + Concurrent CT (N=75)	p-value
Histology			<i>0.001</i>
Squamous	19	20	
Non-squamous	12	55	
Clinical Stage			<i>0.061</i>
IIB	1	4	
IIIA	10	15	
IIIB	11	42	
IV	2	9	
Recurrence	8	5	
Tumor Location			<i>0.413</i>
Left Lung	13	25	
Right Lung	18	47	
Mediastinum	0	3	

Chemotherapy Regimen

	PBT N = 31	IMRT N = 75
Induction CT	13 (42%)	37 (49%)
Concurrent CT	31	75
Carbo + Taxol	19 (61%)	42 (56%)
Cis + Taxol	6	4
Carbo + Etop	4	8
Cis + Etop	0	2
Other	2	19
Adjuvant CT	8 (26%)	18 (25%)

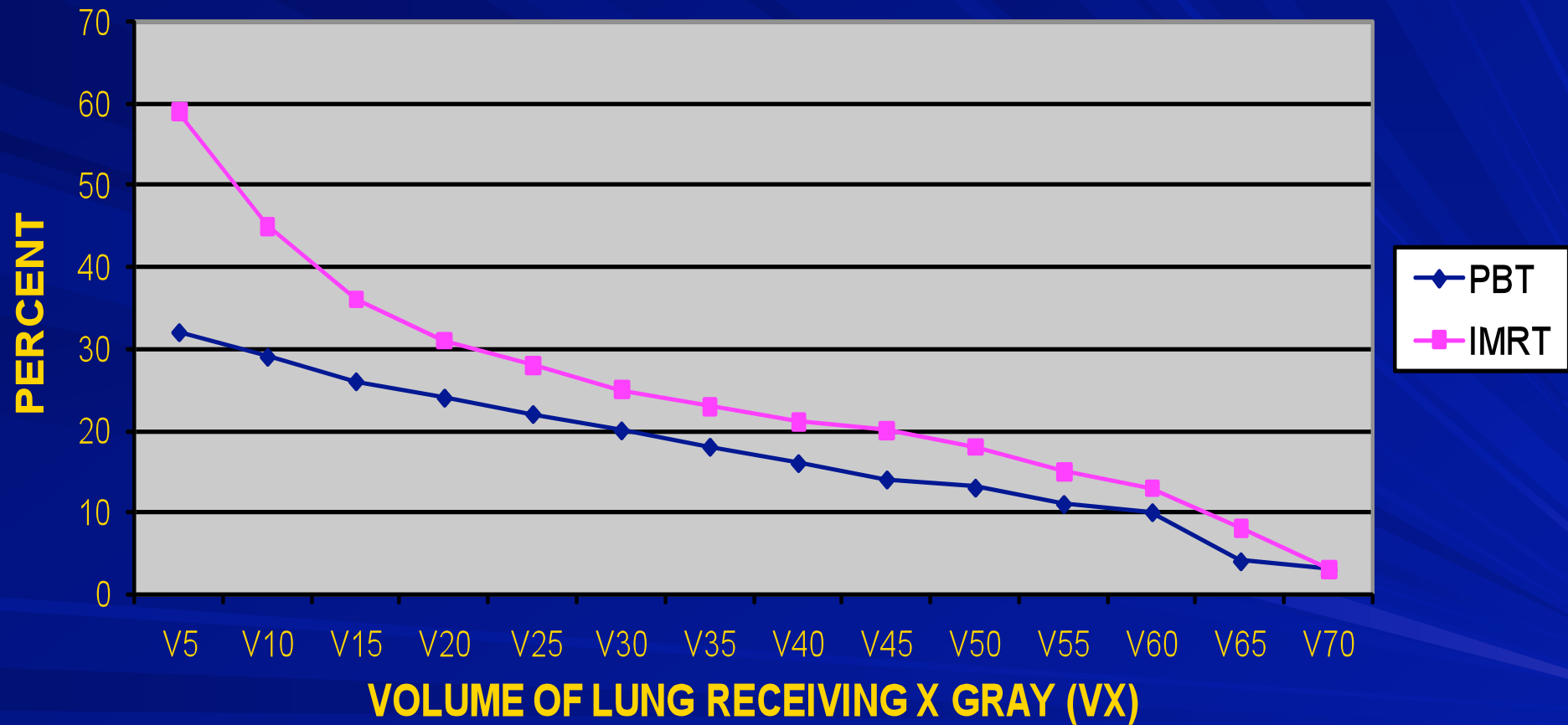
Results

	PBT	IMRT	p value
Median f/up Range	9.5 mo (range, 1.6 -16.1)	9.8 mo (range 1.4 – 32.3)	
Median KPS	80	80	
Median GTV volume	93.6 ml (range, 13 – 431 ml)	247.7 ml (range, 21 - 818 ml)	<.0001
Median Dose	74 CGE (range, 63 – 74 CGE) <on protocol>	63 Gy (range, 60 -76 Gy)	

Dosimetric Results

Mean V (dose)*	PBT	IMRT	p value
V5	32	59	0.0001
V10	29	45	0.0001
V15	26	36	0.0006
V20	24	31	0.005
V30	20	25	0.02
V40	16	21	0.009
V50	13	18	0.010
V60	10	13	0.07
V70	3	3	0.45

VOLUME OF NORMAL LUNG RECEIVING A RELATIVE DOSE FOR PBT VS IMRT



PBT reduced amount of normal lung receiving 5Gy – 65 Gy

Clinical Results

Incidence of Pneumonitis	PBT	IMRT	p value
Grade 1	12 (39%)	28 (37%)	0.38
Grade 2	6 (19%)	18 (24%)	
Grade =>3	0	7 (9.3%)	

Tumor Volume and TRP

GTV (cc)	N	=>2 TRP Events (%)	P value	V20%	P value
<=100	PBT = 22 IMRT = 9	2 (9.1) 3 (33.3)	0.10	21 29	0.124
<=200	PBT = 28 IMRT = 30	5 (17.9) 10 (33.3)	0.18	23 30	0.023
<=300	PBT = 29 IMRT = 43	5 (17.2) 16 (37.2)	0.07	24 32	0.002
<=400	PBT = 30 IMRT = 48	6 (20.0) 19 (39.6)	0.07	24 32	0.004
<=500	PBT = 31 IMRT = 56	6 (19.4) 20 (35.7)	0.11	24 32	0.007

Summary of Results

- Compared to IMRT, PBT significantly reduced amount of normal lung receiving 5Gy – 65 Gy.
- Absolute Reductions
 - V5 of 30%
 - V10 of 15%
 - V20 of 7%
- Grade 2 – 5 TRP ($p=0.15$)
 - IMRT: 33%
 - PBT: 19.4%
- No patients treated with PBT experienced Grade ≥ 3 TRP compared to 9.3% with IMRT ($p = 0.078$)
- Analysis by GTV size: Trend towards decrease incidence of TRP in PBT arm compared to IMRT

Conclusions

- In patients with locally advanced NSCLC treated with PBT or IMRT with concurrent CT, preliminary evaluation shows that:
 - PBT appears to reduce frequency of TRP despite a higher total cumulative dose when compared to IMRT
- Longer follow up time and more patients are needed to confirm these results

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