# The most common dose-volume parameters used in interstitial breast BT

Parameter	Definition / calculation
Implant related	
V <sub>PD</sub>	absolute volume irradiated by the prescribed dose
V <sub>1.5xPD</sub>	absolute volume irradiated by 1.5 x the prescribed dose
DNR - dose non-uniformity ratio	$V_{1.5xPD}$ / $V_{PD}$
DHI - dose homogeneity index	$(V_{PD} - V_{1.5xPD}) / V_{PD}$
Target related	
V <sub>PTV</sub>	volume of the PTV
Vxx	percentage of PTV receiving xx% of the PD
OI - overdose volume index	$V_{2xPD}$ / $V_{PTV}$
CI - coverage index	V100 / 100
COIN - conformal index	PTV <sub>PD</sub> /V <sub>PTV</sub> x PTV <sub>PD</sub> /V <sub>PD</sub>
Dxx	percentage dose that covers xx% of the PTV
OAR related	
D <sub>mean</sub>	mean dose in organ
$V_{xGy}$	relative volume receiving x Gy
Vxx	percentage of organ receiving xx% of the PD
D <sub>xcm³</sub>	relative dose given to most exposed x cm <sup>3</sup> of organ

# **Recommended dose - volume limits for implant and PTV**

	Constraints
Implant	V <sub>PD</sub> ≤ 300 cm³ DNR ≤ 0.35
PTV	$V100 \ge 90\%$ $V150 < 65 \text{ cm}^3$ $V200 < 15 \text{ cm}^3$ $COIN \ge 0.65$

## Recommended dose - volume limits for OAR-s

Organ	Constraints
	(absolute values given in EQD2)
Ipsilateral non-target breast	V90 < 10%
	V50 < 40%
Skin*	$D_{1cm^3} < 90\% $ (37.5 Gy <sub>EQD2</sub> )
	D <sub>0.2cm<sup>3</sup></sub> < 100% (44.5 Gy <sub>EQD2</sub> )
Rib	$D_{0.1cm^3} < 90\% $ (37.5 Gy <sub>EQD2</sub> )
	$D_{1cm^3} < 80\% $ (31.5 Gy <sub>EQD2</sub> )
Heart**	MHD < 8% (1.7 Gy <sub>EQD2</sub> )
	$D_{0.1cm^3} < 50\% $ (15.5 Gy <sub>EQD2</sub> )
Ipsilateral lung	$MLD < 8\% (1.7 \text{ Gy}_{EQD2})$
	$D_{0.1cm^3} < 60\% (20.5 \text{ Gy}_{EQD2})$

<sup>\*</sup>skin volume is defined as a 5 mm shell below the body contour

<sup>\*\*</sup>left sided lesion only, MHD: mean heart dose, MLD: mean lung dose EQD2: radiobiologically equivalent dose given in 2 Gy fractions for  $\alpha/\beta$  =3 Gy

## Recommended parameters for recording

- 1. Type (**nuclide**) of the radioactive source and technique (HDR/PDR)
- 2. Number of catheters used and number of implanted planes
- Method of dose optimization (manual, geometric, graphical, inverse) and normalization (description of positions of the reference points)
- **4. Method of dose prescription** (on isodose line, volumetric), dose per fraction (pulse), total dose and fractionation scheme with time pattern
- **5.** Reference air kerma rate/source activity at the time of first fraction
- 6. Total reference air kerma (TRAK)
- 7. Implant related volume parameters:  $V_{PD}$ , DNR
- **8. Target related parameters**: V<sub>PTV</sub>(cm<sup>3</sup>), V100, V150, V200, D90
- 9. Optional OARs related parameters:
  - 1. ipsilateral non-target breast: V90, V50
  - 2. skin: D<sub>0.2cm</sub>3, D<sub>1cm</sub>3
  - 3. rib: D<sub>0.1cm</sub>3, D<sub>1cm</sub>3
  - 4. heart: MHD (mean heart dose), D<sub>0.1cm<sup>3</sup></sub>
  - 5. ipsilateral lung: MLD (mean lung dose), D<sub>0.1cm<sup>3</sup></sub>
  - 6. contralateral breast: D<sub>1cm³</sub>
  - 7. contralateral lung: D<sub>1cm<sup>3</sup></sub>

## Quality management issues for HDR-/PDR BT

☐ Check of treatment plan (before export to control unit) - patient information (name, ID, DOB etc.) - dose prescription (fraction dose, fraction number) - correspondence of first source dwell position to distal catheter reconstruction point - correct outdrive length - a rough estimation of the calculated treatment time (recalculation with another system) □ Plan data transfer - check the data in the control unit after data transfer □ Connection of catheters with transfer tubes correct labelling/numbering of the catheters (photo is recommended) - exact internal lengths of the catheters if applicable - follow the pathway of transfer tubes from indexer to catheters one by one ☐ Final control before initiation of irradiation - total length (transfer tube + catheter) is recommended to be checked with source position simulator - test run with a check cable