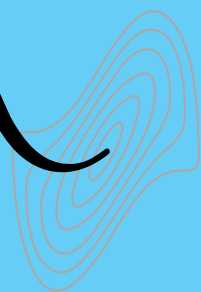


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Stereotactic ablative body radiotherapy: Current status and developments

12 December 2013

Venue: The London Deanery

5 CPD credits

Stereotactic radiosurgery has been used since the 1940s to treat intracranial lesions very precisely in a single fraction. In recent years treatment technology for standard conformal radiotherapy has advanced so that there is now much more emphasis on correct tumour localization using high quality imaging techniques and much greater conformity using high resolution collimators. These developments have allowed us to start to use treatment regimes that have fewer fractions and a higher, more targeted, dose. Where these sorts of treatments are used outside the cranium, they have come to be known as Stereotactic Ablative Body Radiotherapy (SABR). SABR offers us the chance to improve tumour control and better spare normal tissue. It also allows us to treat previously untreatable sites. In addition, the patient experience can be improved as fewer visits to hospital are required and shorter fraction times are possible, which can hopefully also improve the efficiency of radiotherapy delivery in the UK.

Programme

09:00	Registration
09:45	Welcome
10:00	The principles and clinical evidence for SABR in different sites Dr Kevin Franks, Consultant in Clinical Oncology St James's Institute of Oncology
10:30	The commissioning process of SABR Dr Gareth Webster, Medical Physicist, University Hospitals Birmingham
11:00	Physics and quality assurance Mr Neil Richmond, Clinical Scientist, The James Cook University Hospital
11:30	Proffered Paper 1: Results of Pt specific plan QA of NSCLC SABR with QUASAR anthropomorphic phantom & MAPCHECK2 diode array Ms Vanya Staykova, Northampton General Hospital NHS Trust
11:42	Manufacturer's viewpoint Mr David James, Sales Manager Radiosurgery, Varian Medical Systems
11:57	Manufacturer's viewpoint Mr Barry Bonner, Regional Sales Director, Accuray
12:12	Manufacturer's viewpoint Mr Amiya Roy, Business Line Manager - Stereotactic Solutions, Elekta
12:27	Questions
12:30	Lunch
13:30	4D-CT scanning and the SABR planning process Dr Simon Meara, Radiotherapy Physicist, The Clatterbridge Cancer Centre
14:00	Proffered paper 2: A review of challenging SABR lung cases Ms Gail Distefano, Royal Surrey County Hospital
14:12	Proffered paper 3: Evaluation of cyberknife prostate plans developed with 2 different template path techniques Mr Prasanarathy Nariyangadu, Mount Vernon Cancer Centre
14:24	Proffered paper 4: A smarter way of planning SABR lungs Mr Tom Williams, The Clatterbridge Cancer Centre
14:36	Proffered paper 5: Using lung optimized treatment & monte carlo plan evaluation for treating lung lesions with a cyberknife Dr Melvyn Folkard, Mount Vernon Cancer Centre
14:48	Verification and treatment delivery: SABR from the radiographer's point of view Mrs Marianne Dabbs, Radiotherapy Practice Development Manager, Royal Surrey County Hospital
15:20	Refreshments
15:45	Proffered paper 6: Online CBCT verification for SABR Mrs Nazima Haji, University College London Hospital Foundation Trust
15:57	Proffered paper 7: Imaging dose during cyberknife treatments Miss Philippa Sturt, Mount Vernon Cancer Centre
16:09	Proffered paper 8: SBRT for the treatment of liver metastases: initial UK experience Dr Katharine Aitken, The Royal Marsden NHS Foundation Trust
16:21	Proffered paper 9: Experiences of the UK SABR Consortium mentoring programme Ms Karen Whitfield, Bristol Haematology and Oncology Centre
16:33	Proffered paper 10: Paperlite SABR Ms Suzanne Jordan, Nottingham Radiotherapy Centre
16:45	Questions
16:50	Close of meeting

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