Elekta Free Breathing Call (9-2-2020)

Our compression device broke. The paddle broke in half, and a screw broke on top. Bionix said that this device is discontinued, so we can only replace if there’s an old one lying around. The field is moving away from compression to gating/breath hold, anyway, so we’re exploring Elekta’s offerings for this. We doubt that our physicians are interested in active breathing.

CRAND is similar to Vision RT in that it is surface guided. Non-ionizing light is projected onto the patient. The light color indicates the direction (e.g., left, up) in which the patient needs to be moved. This eliminates the need for tattoos. An example application of CRAND is SRS with open face masks.

Basically, CRAND limits the stages in the patient’s breathing cycle during which treatment beams may be delivered. Some clinics prefer a tolerance of 40–70 percent of gating. Others beam on only during inspiration or during expiration.

We have Response on E2 (Infinity) but not on E1 (Symmetry). For a Symmetry, a surface-guided diaphragm control, like Elekta’s ABC, is better than active breathing. (Active breathing also takes about three minutes, severely lengthening treatment delivery time.) Diaphragm control is similar to our old paddle system: it doesn’t gate, but shallows breathing for less patient movement. It’s great that we also have a 4DCT cone beam license on E2.

CRAND is more expensive than ABC because ABC can only do expiration and DIBH. For DIBH, a bar graph shows the patient’s breathing motion. Beam can only be delivered if the meter is within a user-set window.

The presenters will contact CRAND’s Scott Phillips and Matt Douglas (clinical person for the central region) to set up a quote and a demo. Zach will update Beshoi around 9/14 and gauge his interest in diaphragm control.