

Optimisation of GYN brachytherapy by 3D printing of personalized applicators

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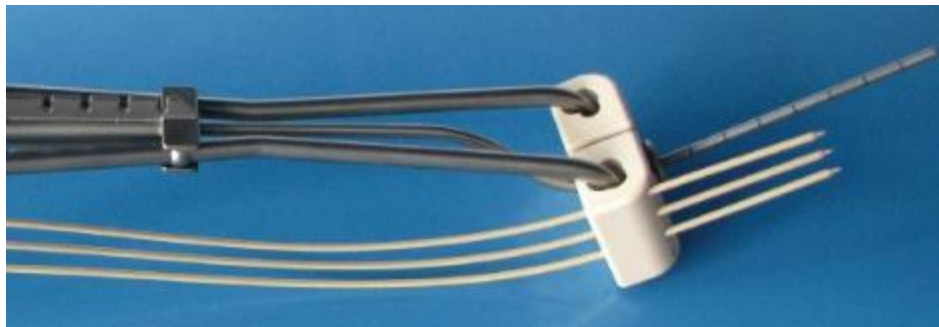
- Project background
- 3D printing: methods and results
 - 'New Standard' designs
 - Personalisation
- Clinical implementation
- Closing remarks & Conclusion

Project background: team

- Britt Haanen *Research Associate*
 - Dr. ir. Celine van Beveren *Medical Physicist, Project Leader*
 - Dr. Nienke Kuijsters *Radiation Oncologist*
 - Dr. Ludy Lutgens *Radiation Oncologist*
 - Dr. ir. Erik Roelofs *Medical Physicist, Medical Technology Supervisor*
 - Robert Voncken *Brachytherapy Technician*
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- Prof. Dr. ir. Frank Verhaegen *Head of Physics Research Department*
 - Dr. Gabriel Paiva Fonseca *Assistant Professor Physics Research Department*

Project background: cervix procedure

- Brachytherapy Centre of Excellence
 - +/- 200 brachy treatments per year
 - Cervix: 50 treatments per year (25 patients)
 - Use combined IC/IS technique:
 - Varian Fletcher applicator with interstitial ovoids
 - Varian Interstitial Cylinder



Fletcher applicator with interstitial ovoids [1]



Interstitial cylinder [1]

Project background

'We can do better'

Standard needle configurations not satisfactory

- *Combination oblique and straight*
- *New applicator forms*
- *Personalisation*

3D printing opens up a lot of possibilities

Project background

Aim of the project is two-fold

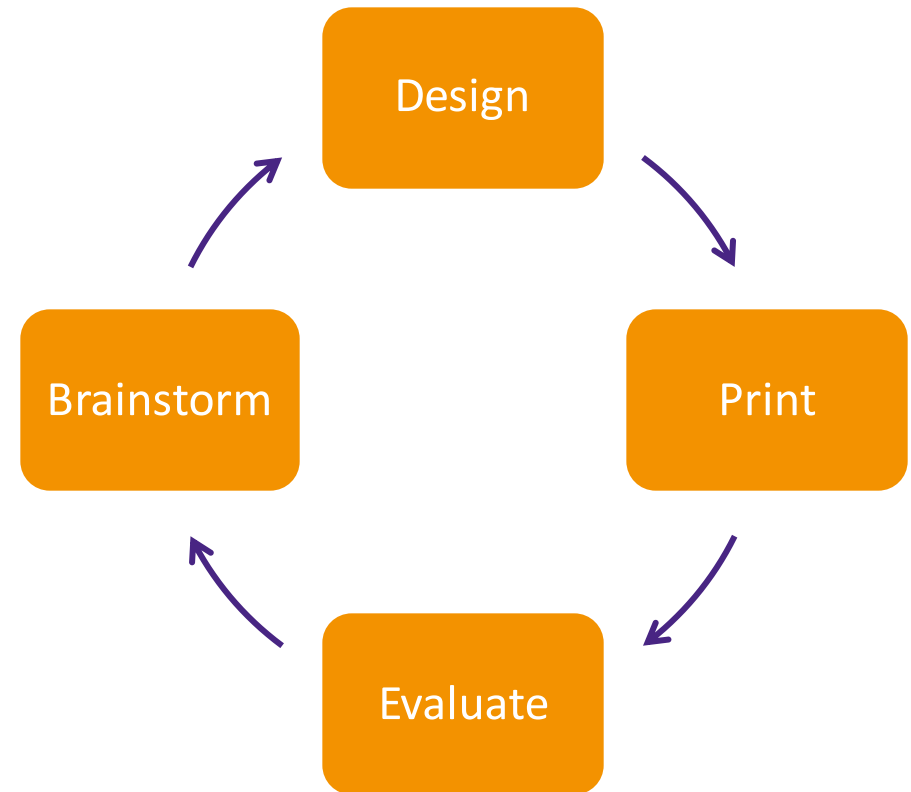
Use 3D printing to...

- (1) Develop a set of 'new standard' templates based on our clinical experience *Focus for clinical implementation*
- (2) Develop a method for full personalization of a template based on a pre-plan *Research phase*

3D printing: methods & results



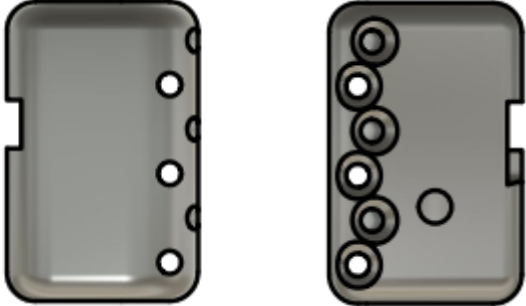
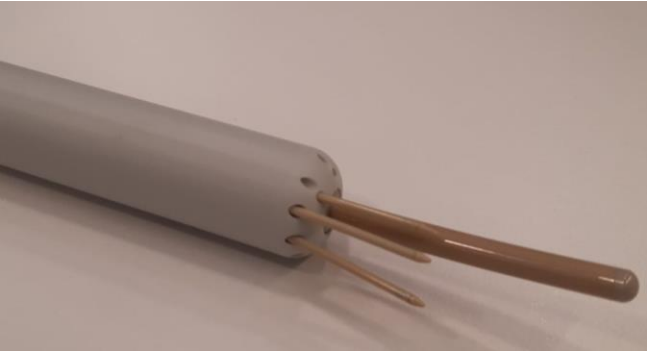
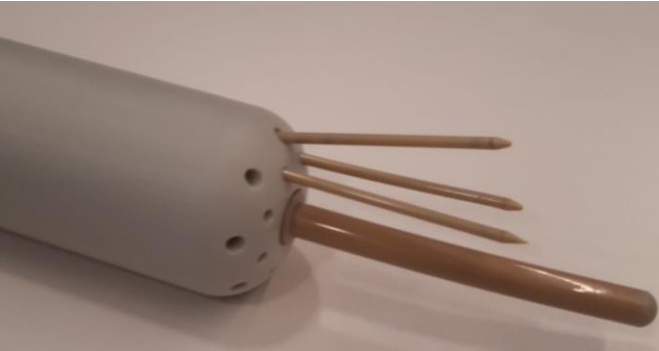
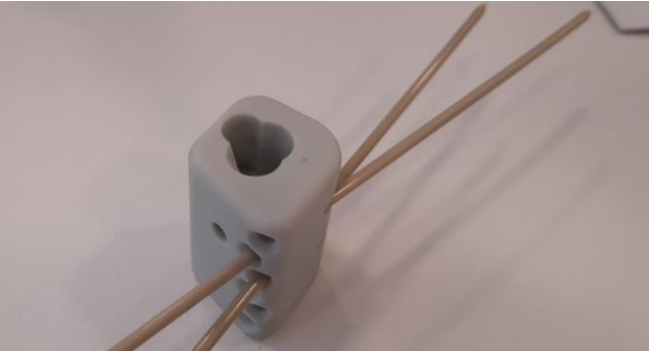
'New standard' designs: methods

- Starting point: current clinical material
- Adapt based on clinician and technician experience/need



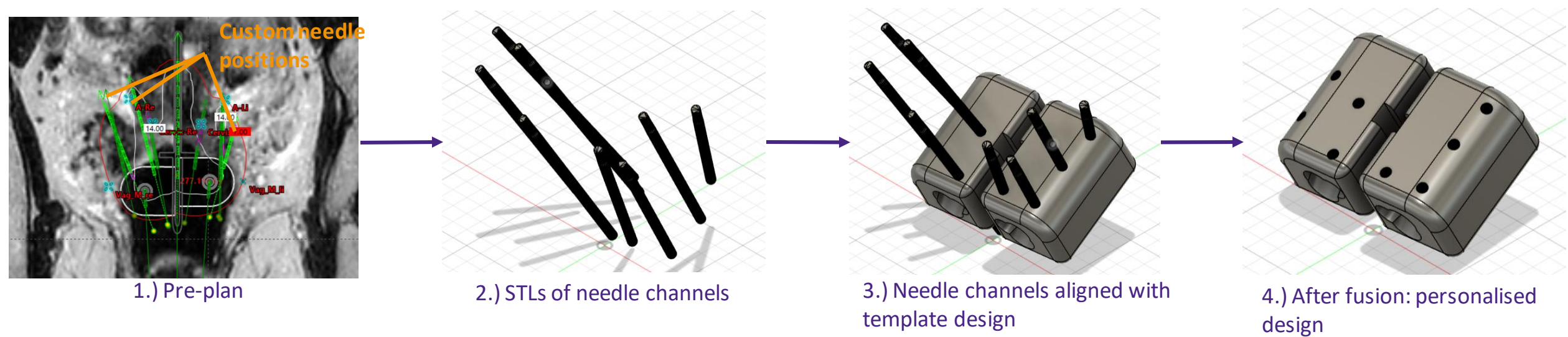
'Expanding our arsenal'

'New standard' designs: results

	1.) Optimised cylinder A (25 mm)	2.) Optimised cylinder B (30/35/40 mm)	3.) Optimised ovoid (mini/small/medium/large, 10 or 15 degree angle)
a.) Needle configuration			
b.) Printed design			

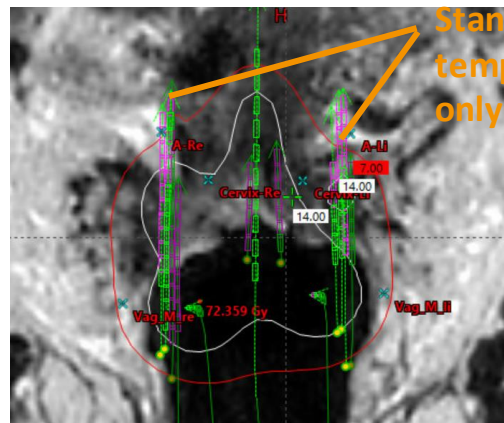
Personalisation: methods

- Create a personalised design from a pre-plan
 - Export plan
 - Developed software to convert dwell positions to STL file of needle channel
 - Needle channel STLs manually fused with template design



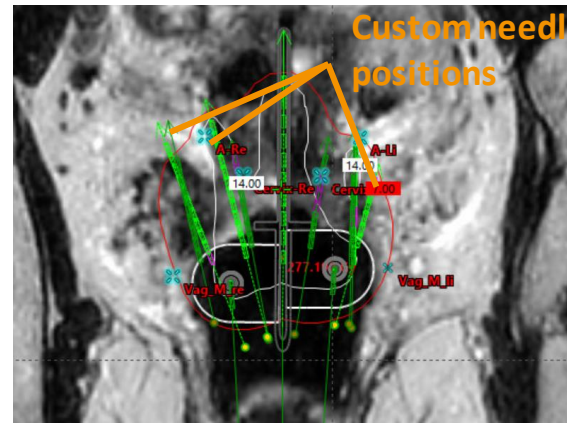
Personalisation: results

- For 2 cases, a personalized design was generated from a pre-plan



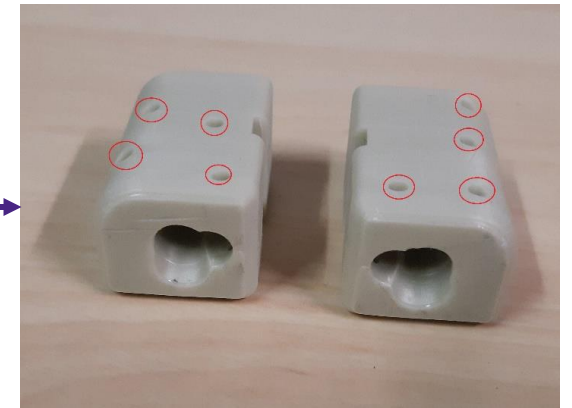
0.) Original plan

Standard
template: needles
only upwards



1.) Personalised pre-plan

Custom needle
positions



2.) Printed personalised ovoid set

- Proof-of-concept
 - *Higher dose to tumour, higher coverage, lower dose to OAR*
 - *Further developed with applicator stl and needle coordinates → avoid manual step*
- Future development:
 - *In-house development*
 - *External: commercial software developments may also fulfil the desired functionality.*

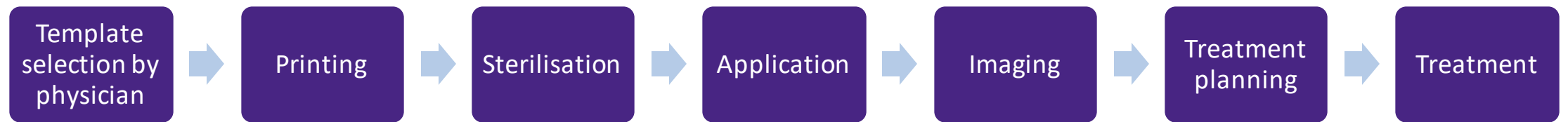
Clinical implementation

Clinical implementation: manufacturing

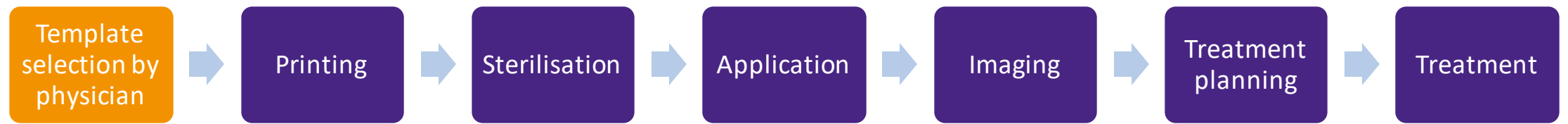
- Rules and regulations:
 - *MDR: accessory to medical device class IIa*
 - *ISO10993: biocompatibility endpoints for an externally communicating device with prolonged tissue contact*
- Explore outsourcing and in-house production
 - *Selected in-house SLA production with biocompatible resin*
- Manufacturing subject to Quality Management System



Clinical implementation: proposed workflow

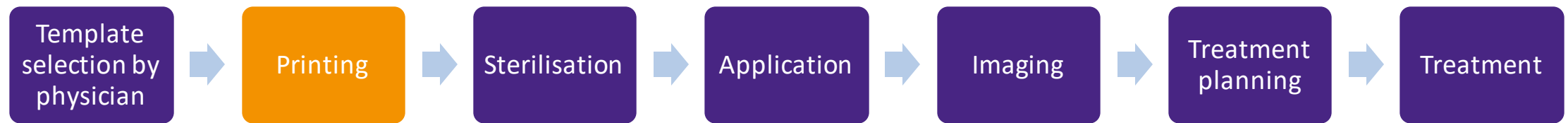


Clinical implementation: proposed workflow



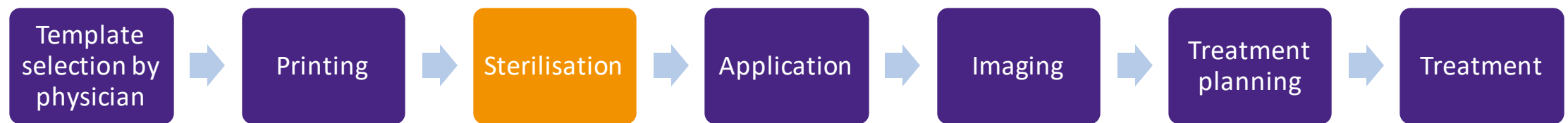
Physician selects most appropriate template
All templates must be commissioned

Clinical implementation: proposed workflow



Printing according to resin instructions to ensure biocompatibility endpoints
Possibility of 'on-the-shelf'
Personalised prints in duplo

Clinical implementation: proposed workflow

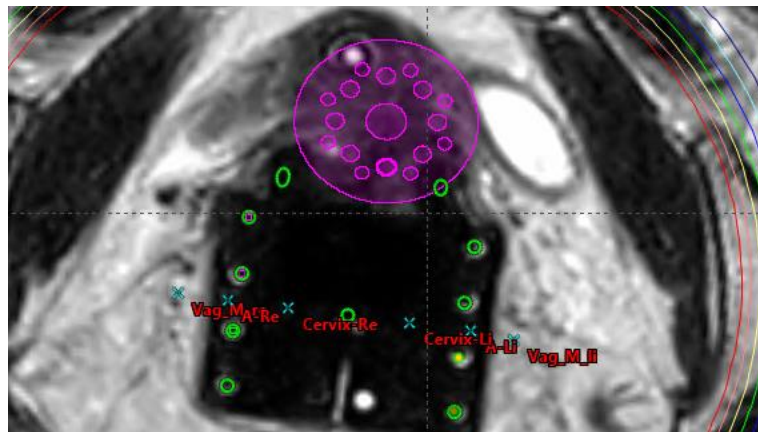
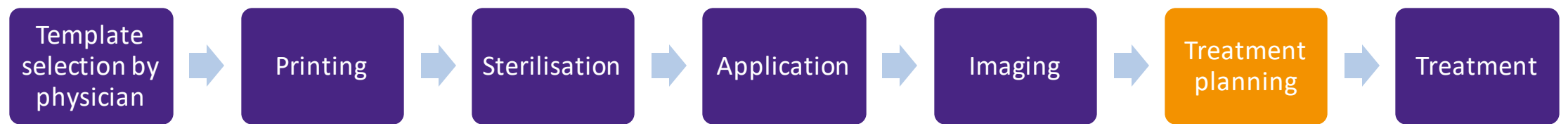


Validate sterilisation procedure for our designs

- No deformations
- Microbiological testing

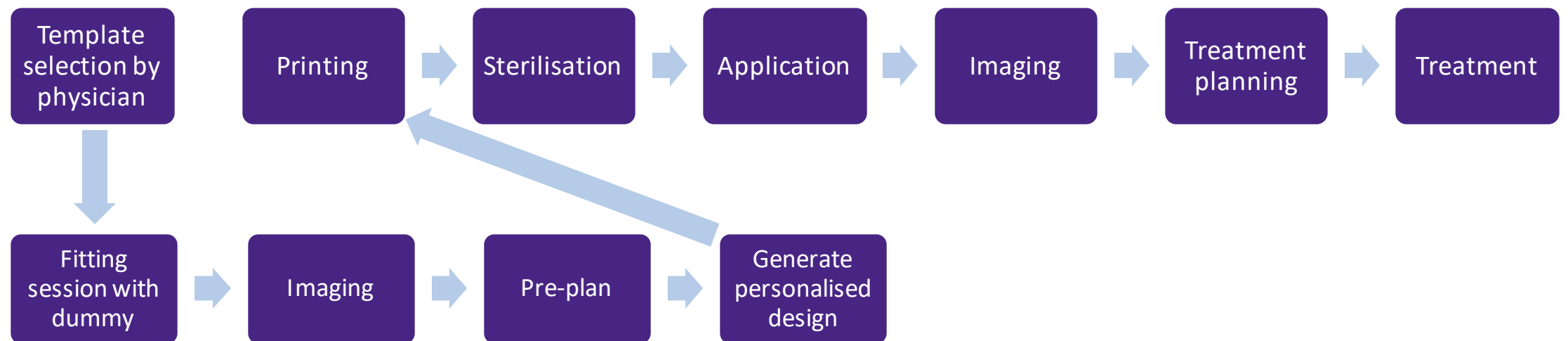
These steps also in commissioning!

Clinical implementation: proposed workflow



Template is imported as contour structure rather than 'solid applicator'.

Clinical implementation: proposed workflow



Closing remarks

- MDR procedures and in-house validation
 - Move towards commissioning of 'new standard' templates late this year
- Further brachy innovations within Maastrro more accessible
 - *Workflow and equipment present*
 - *MDR documentation procedure for 3D prints Collaboration with Femke Vaassen*

Thank you!

Any questions?

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