# ASTRO DAILY NEWS



#### SCHEDULE-AT-A-GLANCE

Monday, September 30

7:55 a.m. - 9:15 a.m.

Breakfast 01 - International Breakfast

**♀** Room 146

8:00 a.m. - 8:30 a.m.

SH 02 - Science Highlights - Breast Cancer 

Propriet Room 145

8:00 a.m. - 8:30 a.m.

SH 01 - Science Highlights - Central Nervous System

▼ Room 147

8:00 a.m. - 9:00 a.m.

**ASTRO Committee Fair** 

Seast Salon C

8:00 a.m. - 9:00 a.m.

**EDU 14** - "Let's Talk About It!" - Biology and Management of Sexual Toxicity Resulting from Prostate Cancer Radiotherapy

**♀**Room 150

8:00 a.m. - 9:00 a.m.

**EDU 15** - Addressing Disparities in the Delivery of Palliative Radiation Therapy

**♀**Room 209

8:00 a.m. - 9:00 a.m.

EDU 18 - Multidisciplinary Management of Lung Cancer in the Patient with Interstitial Lung Disease

8:00 a.m. - 9:00 a.m.

**EDU 19** - Is Consolidation Radiotherapy Still Needed for Lymphoma in 2024? Reappraisal in Light of Recent Trials Results

**♀** Room 143

8:00 a.m. - 9:00 a.m.

**EDU 17** - Elevating Excellence without the Extra Steps: APEx Insights and Innovative Strategies

**♀**Room 140

8:00 a.m. - 9:00 a.m.

**EDU 16** - Management of Unfavorable Intermediate-Risk Prostate Cancer: Role of SBRT, Brachytherapy and Androgen Deprivation Therapy

**♀** Room 202

8:00 a.m. - 9:00 a.m.

**SS 12** - Gl 1: Esophago-gastric Cancer: Revisiting Radiotherapy, Investigating Immunotherapy, and Mobilizing MRD

**♀**Room 151

Continued on page 3



# Clinical Trials session explores promising advances in radiation therapies, potential changes to standards of care

BY LAURA WILLIAMSON, SCIENCE WRITER

YESTERDAY'S CLINICAL TRIALS SESSION

focused on advances in radiation therapy that offer promising new treatments for hard-to-treat cancers and some potential changes to standards of care. The session was moderated by Kenneth Rosenzweig, MD, FASTRO, of the Icahn School of Medicine at Mount Sinai in New York City and by Farzan Siddiqui, MD, PhD, of Henry Ford Health/Henry Ford Hospital in Detroit. Drs. Rosenzweig and Siddiqui began the session by thanking all patients who participate in clinical trials.

The session's first presentation was given by Kenneth W. Merrell, MD, MS, of Mayo Clinic in Rochester, Minnesota, who was introduced as one of two recipients of the 2024 Leibel Memorial Award. The Award is given to early- to mid-career American Board of Radiology certified or boardeligible principal investigators chosen each year by the Annual Meeting Steering Committee based on their abstract's peerreviewed scores.

Dr. Merrell presented "A Prospective, Phase II Study of <sup>177</sup>Lu-Dotatate in Patients with Surgery- and Radiation-Refractory Meningioma: Results of the WHO Grade II/ III Cohort." In this milestone trial, people with surgery- and radiation-refractory meningioma were treated with <sup>177</sup>Lu-Dotatate radiopharmaceutical therapy. Six months after treatment, 78% of patients were progression-free, greatly surpassing the benchmark progression-free survival rate of 26% established by prior research.

<sup>177</sup>Lu-Dotatate is one of the first prospectively evaluated systemic agents to yield promising clinical efficacy for this difficult-to-treat disease, Dr. Merrell said.

Continued on page 4

### Inside This Issue

#### PRESIDENTIAL SYMPOSIUM

Presidential Symposium highlights new innovations in genitourinary cancers.

Page 7

## ASTRO EARLY CAREER COMMITTEE

Programming at the Annual Meeting and throughout the year to support early career practitioners.

Page 10

## LANCET ONCOLOGY COMMISSION

Recently published findings of the Lancet Oncology Commission on Theranostics and Radiotherapy to be presented.

Page 11

## RADIATION ONCOLOGY INSTITUTE

New research, publications and awards celebrated Sunday.

Page 11

## **Industry-Expert Theater**



The Evolution of Prostate
Cancer Therapy: SpaceOAR™
Hydrogel's Clinical Impact
and Future Directions



Monday, September 30th, 2024 12:00 - 1:00PM EST Theater 2

Lunch will be provided\*

#### **MODERATOR**



Daniel Spratt, M.D.

Radiation Oncologist, Vincent K Smith Chair of Radiation Oncology, UH Seidman Cancer Center, Chair and Professor, Department of Radiation Oncology, Case Western Reserve University, Cleveland, Ohio, U.S.

#### **PRESENTERS**





Daniel A. Hamstra, M.D., PhD, FASTRO, FASCO

William T. Butler Professor and Chairman of Radiation Oncology, Radiation Oncology, Baylor College of Medicine, Houston, TX SpaceOAR for Perirectal Spacing: Long-Term Safety and Efficacy; Optimizing Procedural Techniques



Health, NY

Michael Zelefsky, M.D.

Radiation Oncologist, Professor of Radiation Oncology, Director, Genitourinary Oncology and Brachytherapy, Perlmutter Cancer Center Vice Chair Academic & Faculty Affairs, Dept of Radiation Oncology Director, Brachytherapy Services, NYU Langone Perirectal Spacing in Dose Escalated Prostate Cancer Radiotherapy: Update on the Largest Randomized Global Clinical Trial using SpaceOAR Vue



Suneil Jain, M.D.

Professor and Honorary Consultant in Clinical Oncology at Queen's University Belfast Ireland Patrick G Johnston Centre for Cancer Research

### ASTRO Annual Meeting 2024 | Visit booth #1001

#### SCHEDULE AT A GLANCE

### Sunday, September 29

#### 8:00 a.m. - 9:00 a.m.

SS 13 - Peds 1: Functional Outcomes and Disease Control Following Multimodality Therapy in Pediatric Oncology **♀** Room 204

#### 8:00 a.m. - 9:00 a.m.

SS 11 - Bio 2: Experimental Therapeutics **♀**Room 144

#### 8:00 a.m. - 9:00 a.m.

SS 14 - Phys 2: Advanced Imaging **♀**Room 152

#### 8:00 a.m. - 9:00 a.m.

PQA 03 - Gynecological Cancer, Pediatric Cancer, and Professional Development Poster O&A ♥ Hall C

9:05 a.m. - 9:15 a.m.

Welcome 02 - Incoming ASTRO CEO Vivek Kavadi Addresses Members **♀**Ballroom A/B/C

#### 9:15 a.m. - 10:15 a.m.

Keynote 01 - The Science of Bite-Sized Well-Being during Uncertain Times: Evidence, Practice and Resources to Share **♀** Ballroom A/B/C

#### 9:30 a.m. - 10:00 a.m.

Advocacy: Why It Matters and How You Can Get Involved

**♀** East Salon C

#### 10:00 a.m. - 5:00 p.m.

**Exhibit Hall Open** 

♥ Halls A/B/C, Lower Level

#### 10:45 a.m. - 11:45 a.m.

Speed Mentoring II

**Q** East Salon C

#### 10:45 a.m. - 12:00 p.m.

International 04 - Lancet Oncology Commission on Theranostics and Radiotherapy: Toward Bridging the Gaps in Cancer Radiotherapy Access for All 

#### 10:45 a.m. - 12:00 p.m.

EDU 21 - Best Practices in the Management of Oligometastatic and Oligoprogressive Liver Metastases **♀**Room 143

#### 10:45 a.m. - 12:00 p.m.

EDU 24 - Integration of HPV ctDNA Testing into Clinical Practice for HPV+ OPSCC - Ready for Prime Time? Room 151

#### 10:45 a.m. - 12:00 p.m.

EDU 23 - Multimodality Treatment De-Intensification in Low-Risk Breast Cancer: What are the Limits? Room 147

#### 10:45 a.m. - 12:00 p.m.

EDU 20 - Contemporary FLASH-RT to its Clinical Translation 

#### 10:45 a.m. - 12:00 p.m.

EDU 22 - Radiation Oncology within the Context of Multidisciplinary Cancer Centers: Are We Losing Our Identity? **♀** Room 209

#### 10:45 a.m. - 12:00 p.m.

ST 01 - Overlooked No More: Managing Provider Wellness after Medical Errors **♀** Room 158

#### 10:45 a.m. - 12:00 p.m.

SS 20 - DEIH 1

**♀** Room 140

#### 10:45 a.m. - 12:00 p.m.

SS 15 - GU 3: Prostate Cancer Treatment Intensification **♀** Room 202

#### 10:45 a.m. - 12:00 p.m.

SS 18 - Heme 2: Breaking through Resistance: Novel Approaches in NHL **Radiation Therapy ♀**Room 144

#### 10:45 a.m. - 12:00 p.m.

SS 16 - Lung 3: Clinical Trials of Chemoradioimmunotherapy and Risk Adapted Radiotherapy for Advanced **Lung Cancer ♀** Room 207

#### 10:45 a.m. - 12:00 p.m.

SS 19 - Bio 3: Genomics and Biomarkers **♀** Room 150

#### 10:45 a.m. - 12:00 p.m.

SS 17 - Phys 4: Machine Learning **♀** Room 145

#### 10:45 a.m. - 12:00 p.m.

POA 04 - Palliative Care and Central Nervous System Poster Q&A **♀**Hall C

#### 12:00 p.m. - 1:00 p.m.

**Grant Writing Office Hours** 

**♀** East Salon C

**12:00 p.m. - 1:00 p.m.** Insert ticket icon Women of ASTRO Luncheon - Sponsored by AAWR-ASTRO-SWRO-Curie Society **♀** Room 146

#### 1:00 p.m. - 1:30 p.m.

**Presidential Address:** Is There a Relationship between Provider Well-Being and Quality of Patient Care? **♀** Ballroom A/B/C

#### 1:30 p.m. - 3:00 p.m.

**Plenary Session** 

**♀** Ballroom A/B/C

#### 3:00 p.m. - 3:30 p.m.

**Plenary Debrief** 

**Q** East Salon C

#### 3:00 p.m. - 4:00 p.m.

**Grant Writing Office Hours** 

Seast Salon C

#### 3:00 p.m. - 4:00 p.m.

EDU 27 - Getting Papers Published: **ASTRO Journal Editor Recommendations** 

#### 3:00 p.m. - 4:00 p.m.

EDU 30 - Designing, Implementing and **Interpreting Patient Reported Outcomes** in Clinical Investigation

**♀** Room 140

#### 3:00 p.m. - 4:00 p.m.

**EDU 28** - Updates and Challenging Cases in Pediatric Neuroblastoma and Wilms Tumor

**♀** Room 204

#### 3:00 p.m. - 4:00 p.m.

EDU 29 - Emerging Diagnostic and Therapeutic Options for Meningioma Room 202

#### 3:00 p.m. - 4:00 p.m.

EDU 26 - Out from the Shadows and into the Spotlight: Making Brachytherapy Available and Sustainable for Our Patients and Providers

**♀** Room 152

#### 3:00 p.m. - 4:00 p.m.

EDU 25 - Single Cell RNA Sequencing and Its Applications in Radiation Oncology **♀** Room 151

#### 3:00 p.m. - 4:00 p.m.

International 05 - New Applications of Radiation Therapy: Starting a Program in a Low-Resource Setting 

#### 3:00 p.m. - 4:00 p.m.

SS 21 - GU 1: Miscellaneous GU Topics **♀** Room 207

#### 3:00 p.m. - 4:00 p.m.

SS 23 - Patient Safety 1: Using Yesterday's Data to Drive Tomorrow's Change: Advances in Patient Safety Room 209

#### 3:00 p.m. - 4:00 p.m.

SS 22 - Phys 3: Biological Imaging **♀** Room 145

#### 3:00 p.m. - 4:00 p.m.

QP 03 - HSR 2: Health Services Research/ Global Health Quick Pitch **♀** Room 143

#### 3:00 p.m. - 4:00 p.m.

PQA 05 - Breast Cancer and Nonmalignant Disease Poster Q&A

#### 3:30 p.m. - 4:00 p.m.

**Explore RTAnswers on Epic MyChart ♀** East Salon C

#### 4:00 p.m. - 4:30 p.m.

One-on-One: Hands On MyChart Care Companion

Seast Salon C

#### 4:00 p.m. - 5:00 p.m.

**Diversity, Equity and Inclusion** Reception

#### 4:00 p.m. - 5:00 p.m.

**Exhibit Hall Networking Reception** ♥ Halls A/B/C

#### 5:00 p.m. - 6:00 p.m.

EDU 33 - Challenging Cases in Palliative Care

**♀** Room 209

#### 5:00 p.m. - 6:00 p.m.

EDU 32 - ASTRO/JASTRO Joint Session: Advances in Liver Cancer Radiation

**♀**Room 151

#### 5:00 p.m. - 6:00 p.m.

**International 06** - Building Radiation Capacity in Africa through Collaborations in Research and Training - Voices from **ASTRO and AORTIC Members ♀** Room 204

#### 5:00 p.m. - 6:00 p.m.

**EDU 31** - Simulation-Free Radiotherapy Treatment Planning and Workflow - From Diagnostic CT and MR to State of the Art On-Board Imaging **♀** Room 145

#### 5:00 p.m. - 6:00 p.m.

SS 24 - Breast 2: Partial Breast Irradiation **♀** Room 202

#### 5:00 p.m. - 6:00 p.m.

SS 27 - Heme 1: Glowing Results: Clinical Trials of Radiation in Lymphoma **♀**Room 144

#### 5:00 p.m. - 6:00 p.m.

SS 25 - Lung 1: Randomized Trials for **Lung Cancer ♀** Room 207

#### 5:00 p.m. - 6:00 p.m.

SS 26 - Sarcoma 1: Optimizing Treatment Outcomes in Soft Tissue Sarcoma and Melanoma 

#### 5:00 p.m. - 6:00 p.m.

QP 04 - H&N 4: Pitching Clinically Focused Research to Improve Outcomes and Prognostication

#### 5:00 p.m. - 6:00 p.m.

**♀** Room 152

QP 05 - Phys 8: Adaptive Therapy **♀** Room 147

#### 5:00 p.m. - 6:00 p.m.

PQA 06 - Biology and Patient Reported Outcomes/QoL/Survivorship Poster Q&A **♀**Hall C

#### **ASTRO Daily News 2024**

Issue Number 2 Monday Edition

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# STREET

What's something new you're planning to do at this year's Annual Meeting?



Something new for myself that I am planning to participate in at this year's Annual Meeting is the ARRO Day Mentorship Meet and Greet on Saturday as well as the Mentoring and Networking Reception on Sunday. As a member of the radiation oncology community, I would not be where I am today without the

mentorship and support I have and continue to receive. Events like this allow us to give back and support the next generation of radiation oncologists with the hope of building long-term relationships."

– Chirag Shah, MD



"I haven't been to the ASTRO meeting for several years, so I'm looking forward to meeting up with, and making new, radiation oncology friends from America and around the world. Potentially my most impactful plan is to continue discussions with ASTRO leaders about establishing a World Radiation Therapy Awareness

Day (WRAD) as an ongoing calendar event. Many international societies and organizations have signed up to support WRAD, starting in 2025. Having ASTRO as a leading champion of this proposal will be key to the event's success. The goal of WRAD is to amplify and intensify RO advocacy and awareness efforts focused on improving patient access to radiation therapy, on a global scale."

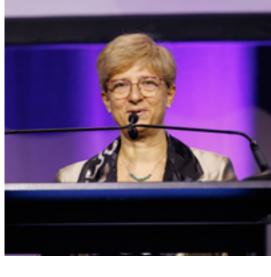
– Sandra Turner, MBBS, PhD



"I look forward to engaging with students and trainees to better understand the needs and desires of our future workforce. The ARRO events provide outstanding opportunities to connect with our young leaders. Additionally, I plan to attend sessions that focus on advancements in health equity and advocacy efforts through

health policy and government relations."

– Malika Siker, MD



Dr. Merrell gave an overview of how radiopharmaceuticals work, then spoke about this theranostic trial with regard to the CNS population. This trial achieved its primary endpoint and may mark a significant safety milestone, Dr. Merrell explained.

"We found a therapy with meaningful signals for effectiveness and safety for people with refractory meningioma, a condition with no standard treatment options," he said. The study showed that the radiopharmaceutical "appears to be a safe and rational therapeutic choice for patients with aggressively growing tumors."

Next, Gabriella Macchia, MD, of the Radiation Oncology Unit, Responsible Research Hospital in Campobasso, Italy, presented "A Phase 3 Study of Pembrolizumab (Pembro) + Concurrent Chemoradiotherapy (CCRT) for High-Risk Locally Advanced Cervical Cancer (LACC): Safety Findings."

This randomized, double-anonymized phase III trial found pembrolizumab (versus placebo) plus concurrent chemoradiotherapy followed by pembrolizumab (versus placebo) monotherapy significantly improved progression-free survival and had a manageable safety profile in patients



with high-risk, locally advanced cervical cancer.

"These data support the use of pembrolizumab plus CCRT as a potential new standard of care for this patient population," Dr. Macchia said. Dr. Macchia noted that this trial took place during the COVID-19 pandemic and the Russian/Ukranian war, and thus it was difficult to track patients and for patients to complete care. Adverse advents were similar across both arms and dropped off significantly after the first three months of treatment.

"Hypofractionated Whole-Breast Irradiation with Simultaneous Integrated Boost for Breast Cancer: Primary Analysis of the HYPOSIB-Trial (ARO 2013-05)" was presented by lead study author David Krug, MD, of Universitätsklinikum Schleswig-Holstein, Campus Kiel, Klinik für Strahlentherapie in Kiel, Germany.

This randomized, controlled, multicenter European trial is one of three large trials to study hypofractionation with simultaneous integrated boost irradiation in patients with breast cancer who have had breast-conserving surgery. It established non-inferiority in disease-free survival for a simultaneousintegrated boost regimen of 40 Gy to











the breast and 48 Gy to the tumor bed in 16 fractions, compared to moderate hypofractionation with a sequential boost, conventional fractionation with sequential or simultaneous integrated boost. After five years, both arms demonstrated high local control rates and comparable late toxicity.

"In conjunction with the results of RTOG 1005 and IMPORT HIGH, the results of HYPOSIB demonstrate that moderate hypofractionation with simultaneous integrated boost can be considered standard of care," Dr. Krug said.

Kimberly Corbin, MD, of the Mayo Clinic Alix School of Medicine served as a discussant for Dr. Krug's presentation. Dr. Corbin sought to explain how the results of the above trial could be integrated into "best breast" practice. In her analysis of Dr. Krug's presentation, Dr. Corbin explored the data and emphasized that the youngest patients gained the most from boost. "We must remain thoughtful of who to treat with boost in breast radiation," Dr. Corbin said. Patient quality of life and favorable outcomes are of the utmost importance, Dr. Corbin said. Integrated boosts, according to this trial, are non-inferior to sequential boosts. Dr. Corbin also predicted an increase in IMRT. Dr. Corbin also predicted an increase in the use of IMRT in performing boost radiation.

Next, "Pirfenidone in the Treatment of Radiation-Induced Lung Injury: A Randomized, Controlled, Multicenter Clinical Trial" was presented by lead study author Ming Chen, MD, of Sun Yat-sen University Cancer Center, State Key Laboratory of Oncology in South China and Sun Yat-sen University in Guangzhou Guangdong, China. The study showed pirfenidone could significantly improve lung function, mild to moderate radiation pulmonary fibrosis and acute pulmonary exacerbation-free survival in patients with RILI compared with the control group, with an acceptable safety profile. The drug was well tolerated by 81% of patients who received it. Dr. Chen explained this was the first randomized clinical trial to examine RILI's pathological process, and that the optimal duration of treatment could not yet be determined based on current data. Additionally, its role in more advanced pneumonitis is unclear.

Vedang Murthy, MD, of Tata Memorial Hospital, Mumbai, India, next presented "Bladder Adjuvant RadioTherapy (BART): Acute and Late Toxicity from A Phase III Multicenter Randomized Controlled Trial." According to the authors, this is the largest RCT of adjuvant RT in bladder cancer.

This multicenter, phase III randomized trial confirmed that the combination of surgery, chemotherapy, and adjuvant radiotherapy can offer better outcomes for those with high-risk bladder cancer, safely eradicating any microscopic disease that may remain after surgery.

"The BART trial was born out of the pressing need to address a crucial gap in treatment of advanced bladder cancers," Dr. Murthy said. "While chemotherapy helps manage systemic disease, locoregional recurrences are significant yet underappreciated. Older trials showed that adjuvant radiotherapy could improve locoregional control but fell out of favor due to high toxicity with

outdated radiation methods. Today, however, advances in radiation technology and precision targeting have changed the game." A scientific paper about this presentation was published in the Red Journal concurrently with this session.

"As follow-up continues, the results of the BART trial may reshape how we treat bladder cancer, giving future patients a chance at longer, cancer-free lives," said Dr. Murthy.

Jay Detsky, MD, of the University of Toronto in Ontario, Canada, was introduced as the second Leibel award winner. He presented "MR-Linac On-Line Weekly Adaptive Radiotherapy for High Grade Glioma (HGG): Results from the UNITED Single Arm Phase II Trial."This single arm, phase II trial tested the safety of feasibility of weekly on-line MR-Linac (MRL) adaptive radiotherapy with concurrent temozolomide (chemoRT), with a reduced 5 mm clinical target volume (CTV) margin, for patients with newly diagnosed high-grade glioma (grade 4 astrocytoma or IDH-wildtype glioblastoma).

"This trial confirms that CTV reduction, with adaptation, can safely spare brain tissue from radiotherapy," Dr. Detsky said. "Further trials are required to determine if this benefit translates to reductions in adverse events and improves quality of life."

"Short-term Androgen Deprivation Therapy and High-dose Radiotherapy in Intermediate- and High-risk Localized Prostate Cancer: Results from the GETUG 14 Randomized Phase III Trial," was presented by lead study author Nicolas Demogeot, MD, of CLRCC Institut de Cancérologie de Lorraine, Vandoeuvre-Lès-Nancy, France.

The trial found short-term androgen deprivation therapy improves disease-free survival in intermediate and high-risk prostate cancer patients receiving high dose (80 Gy) radiotherapy, with no differences in safety or quality of life.

"This trial is significant because it further demonstrates the importance of ADT in intermediate and high-risk prostate cancer," Dr. Demogeot said. "It will allow for a larger cohort in future meta-analyses."

The session concluded with a presentation from Dr. Ou-ying Yan, a student of Xin Wang, MD, of West China Hospital, Sichuan University, Chengdu, Sichuan, China, who reported findings from "A Multicenter Phase III Randomized Clinical Trial Comparing the Efficacy of an Adjuvant SOX Chemotherapy Regimen with SOX Combined with a Simultaneous Radiotherapy Regimen after D2 Radical Resection for Gastric Cancer."

This phase III, randomized trial sought to detect whether adjuvant chemoradiotherapy would have a survival benefit in gastric cancer patients with high risk factors, such as being in stage T4 or having positive lymph nodes after D2 dissection. It compared the efficacy of two postoperative adjuvant treatment strategies, SOX (Oxaliplatin and S-1) chemotherapy plus concurrent chemoradiotherapy (SOXRT) as well as SOX alone. While both treatment strategies were well tolerated, researchers found no survival benefit with addition of radiation therapy in these patients.

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9MC3 Curved Array

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HOWARD SANDLER, MD, MS, FASTRO, ASTRO President introduced this year's topic as GU cancers, noting his presidential prerogative to designate an exploration of three areas: prostate, renal and bladder cancers. Today's Symposium serves as a catalyst to applying

these strategies straightaway in clinical practice.

Shankar Siva, PhD, MBBS, moderated Session I on the Renaissance of Radiotherapy for Renal Cell Carcinoma (RCC). Dr. Siva asked, is stereotactic ablative body radiotherapy (SABR) "ready for prime time?" Dr. Siva defined primetime as a treatment at center stage, one ready for discussion at a tumor board meeting and a viable option for patients. He noted enablers to achieve such status include understanding the history and evidence, its optimal dose, the role of post RT biopsy and optimal posttreatment schedule. Dr. Siva encouraged: "As a community let's be invigorated by our findings. The future should undertake randomized trials of SABR vs. surgery. SABR for RCC IS ready for primetime."

Chad Tang, MD, provided context, with global increase of RCC, especially for patients above age 70. Enter SABR as a possibly suitable alternative, a high precision technique with millimeter accuracy. For secondary spread, SABR provides durable disease control and valuable adjunct to drug therapies. Rana McKay, MD, provided the

medical oncologist perspective on different scenarios. For the oligometastatic patient who is treatment naïve, she advised applying IMDC criteria to inform prognosis. The image was presented of how histologies have been thrown into one grab bag despite the distinct responses each might have to SBRT. "We need more clinical trials that actually look at SBRT and its impact on different histologies." Dr. McKay highlighted: "Congrats to ASTRO for elevating the work that has been done. We need more studies that demonstrate SBRT's impact; enter the data into guidelines; educate our community, physicians, and clinicians; encourage multidisciplinary conversations, engage patients. It all starts with investing in clinical research."

Leslie Ballas, MD, moderated Session II, "Bladder Preservation – A Modern Choice for Patients," providing updates on trimodality therapy (TMT). She opened with the timeline for bladder cancer, that little has changed regarding cystectomy as treatment. While organ preservation techniques are common for other cancers, for the bladder, physicians have viewed radiation as too toxic. The tipping point for bladder preservation occurred from a study with a cohort of over 1,100 patients. A sea change is happening, with cystectomy no longer the gold standard, and for the properly selected population, TMT is the appropriate approach.

Drivers have been clinical trials — with two more NRG randomized trials coming soon, guidelines, and those behind them, including Dr. Sandler, Jason Efstathiou, MD, PhD, FASTRO, and Siamak Daneshmand, MD.

– Rana McKay, MD

Ananya Choudhury, PhD, shared the practical use of bladder radiation, that is, the "dawn of a more personalized radiotherapy." We now have the technology to adjust to the shift-changing of the bladder and that adaptive therapy improves the coverage of the planned target volume (PTV). Now is the time to personalize further, choosing the correct radiosensitizer for the patient and making that part of the treatment pathway.

Gopakumar Iyer, MD, closed out the session on bladder cancer by exploring the integration of novel therapeutics with TMT. This included looking at data for antibody-drug conjugate therapy combined with radiation in preclinical bladder cancer models.

Session III was facilitated by Ronald Chen, MD, MPH, FASTRO, on "Radiotherapy for Prostate Cancer: Innovations You Can Implement Today." He navigated this session on microboost developments, salvage therapy options for patients who develop a local recurrence after

Continued on the following page





"As a community let's be invigorated by our findings. The future should undertake randomized trials of SABR vs. surgery. SABR for RCC IS ready for primetime." - Shankar Siva, PhD, MBBS

definitive radiation therapy and treatment for oligometastatic prostate cancer.

Brandon Mahal, MD, specifically covered microboost, on dominant lesions in the prostate with external beam radiotherapy. Future considerations to optimize microboost paradigm include defining optimal margin and boost dose, clarifying risk of urethral toxicity. Dr. Mahal's optimism was evident: "I sincerely believe we're arriving at the golden era of modern radiation oncology and emerging techniques, while improving prostate microboost feasibility."

Dr. Chen reviewed salvage therapy options for patients who develop a local recurrence after definitive radiation therapy. Finally, Phuoc Tran, MD, PhD, delved into the topic of oligometastatic SBRT, summarizing that space and time in mCSPC are clinical manifestationsphenotypes that are correlated with

outcome and can direct treatment. Understanding the underlying biology better can instruct rational design of combination, systemic and local therapy for metastatic disease.

Dr. Sandler closed the Symposium, remarking upon his initial goal to make this the "best Symposium ever." The objective was to focus on innovations achievable upon returning to the office. Personalizing practice to the individual patient level, Dr. Sandler shared: If one more kidney cancer patient can be treated with SBRT, or a prostate cancer patient have radiotherapy applied as a salvage modality or a bladder cancer patient have their physician advocate for bladder preservation/sparing, then, truly, the goal was achieved.







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Applying ultra-sensitive NGS technology, our HPV-SEQ assay detects and quantifies cfHPV-DNA to monitor treatment response, identify minimal residual disease post-treatment and detect recurrences earlier.



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At Sysmex Inostics, we recognize the critical role of cfHPV-DNA monitoring in optimizing patient care and treatment management for head and neck and other HPV-driven cancers. We are committed to bring this novel biomarker to every patient suffering from HPV-driven cancers.



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THE EARLY CAREER COMMITTEE (ECC) WAS CREATED within ASTRO to support early career practitioners. As chair of the ECC, I sit as an ex-officio nonvoting member of the ASTRO Board of Directors and have the opportunity to provide input to all discussions from the early career perspective. In addition to an academic/community-based leadership dyad, with Anna Paulsson, MD serving as our Vice Chair, the ECC is organized into four subcommittees, each supporting a different facet. The Community Building/Inclusion Subcommittee, chaired by Anna Brown, MD, MPhil, seeks to encourage participation in social and networking events and help recruit and retain early career ASTRO members. The Education Subcommittee, chaired by James Bates, MD, seeks to create and maintain educational resources, including webinars, educational sessions, and relevant upcoming meetings. The Liaisonship Subcommittee, chaired by Shearwood McClelland, MD, focuses on creating and maintaining relationships and collaboration opportunities with similarly situated organizations. And, the Physics Subcommittee, chaired by Haidy Nasief, PhD, seeks to provide resources for early career physicists and integrate them within ASTRO.

Some of our initial activities included a focus group-based environmental scan, an educational session on mentorship and career transitions, webinars on interdisciplinary communication and ROCR, and networking meetups at affiliated meetings. You may have also seen our inaugural quarterly Early Career newsletter. We are also developing a survey of our Early Career workforce to evaluate factors triggering job transitions and the evolution of satisfaction after the ARRO Graduating Resident survey.

We are very excited about the events planned by the ECC that will take place over the next few days. Yesterday morning, we held our first open committee meeting. We want the early career community to be involved in helping us provide value to your ASTRO membership and enjoyed robust discussions during this meeting. This year's education session, What I Wish I Knew in the Early Career, was also yesterday (and is available onDemand). Featured discussions included partnership and contract negotiations, financial planning, and navigating the promotions process.

Stop by the Early Career and Mentoring Lounge in East Salon C, which is open throughout the meeting. The Lounge provides a supportive and convenient space for both official programming and informal meet ups. Speaking of programming, there's plenty to choose from! In addition to Speed Mentoring, we've scheduled an ASTRO Committee Fair, brief talks on topics including How to Become a FASTRO, Why Now is the Right Time to be an Authorized User for RPT, and Advocacy: Why it Matters and How You Can Get Involved, as well as Grant Writing Office Hours, an ASTRO Journals Office Hour and ASTRO's patient education collaboration with Epic MyChart demonstrations. While you are visiting the Lounge be sure to have some fun catching up with colleagues, take a selfie, charge your mobile device or just rest your feet. Check the portal for programming specifics.

As we continue our Annual Meeting activities, I am energized for the year ahead and look forward to continuing to build resources and supports for my fellow Early Career ASTRO members. We plan to continue to host open meetings throughout the year to continually solicit feedback and ensure we are appropriately devoting resources to help us to make ASTRO your Society!

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## **Accelerating Innovations:**

## **New Research and Awards from ROI**

#### MORE THAN 100 GUESTS JOINED the Sunday

Lunch to celebrate the Radiation Oncology Institute (ROI) – the ASTRO Foundation. Since the foundation was established 18 years ago, it has funded more than \$4.7 million in radiation oncology research, made possible by the generosity of thousands of ASTRO members and corporate supporters. The lunch was an opportunity to honor new awardees and highlight how gifts received are helping patients live longer, healthier lives.

#### 2024 Publication Excellence Award Winners

ROI honored three exceptional early career investigators for their outstanding contributions to the field as the lead authors of an outstanding manuscript or collection of articles on research that addresses an important problem or critical barrier in radiation oncology, has the potential to change current thinking, and advances one or more of the ROI research priorities. The following investigators are the recipients of the 2024 ROI Publication Excellence Awards for their exceptional contributions to the field of radiation oncology in the past year.

#### • Jie Jane Chen, MD, University of California San Francisco

"Patient Education Practices and Preferences of Radiation Oncologists and Interprofessional Radiation Therapy Care Teams: A Mixed-Methods Study Exploring Strategies for Effective Patient Education Delivery" published in the International Journal of Radiation Oncology • Biology • Physics

## • Felix Ehret, MD, Massachusetts General Hospital

"Clinical Implications of DNA
Methylation-based Integrated Classification of
Histologically Defined Grade 2 Meningiomas"
published in Acta Neuropathologica
Communications

• Omran Saifi, MD, Mayo Clinic Jacksonville A series of four articles on integrating radiation with CAR T-cell therapy for non-Hodgkin lymphoma

#### ROI Researcher Reflects on the Impact of His Award

The Sunday Lunch with ROI featured a conversation with Ryan Hughes, MD, the winner of the 2022 ROI Publication Award. Dr. Hughes, an assistant professor at Wake Forest University School of Medicine, discussed how he leveraged the \$5,000 grant that accompanied the award to continue his team's award-winning work and kickstart new research trajectories. The 2022 award recognized Dr. Hughes for his research on the safety and quality of radiotherapy when peer review of treatment plans is conducted virtually rather than in-person, and he is sharing results from their continuing work on this topic at the Annual Meeting.

Dr. Hughes is presenting "If You're Talking, I Think You're Muted" Follow-Up Analysis of Weekly Peer Review Discussion and Deviation Detection after Transitioning from Virtual to In-Person Format today during Scientific Session 23 - Patient Safety 1: Using Yesterday's Data to Drive Tomorrow's Change: Advances in Patient Safety,



which takes place from 3:00 p.m. - 4:00 p.m. in Room 209.

In addition to the virtual chart rounds work, Dr. Hughes used the grant funds to launch pilot studies on a keratin-based topical cream for radiation dermatitis in patients with head and neck cancer and the use of carotid ultrasound to identify head and neck cancer survivors with high cardiovascular risk after radiation therapy. The radiation dermatitis work supported by the ROI award was crucial to Dr. Hughes obtaining an \$85,000 Cancer Prevention and Control pilot grant from the Wake Forest Baptist Comprehensive Cancer Center (WFBCCC) to scale up the research. Dr. Hughes said, "The ROI Publication Award has been exceptionally helpful in promoting my career and providing support for the many publications and presentations that I've been fortunate to generate."

To learn more about ROI's new research funding opportunity "Expanding Indications for Radiation Therapy" or make a donation to advance the critical work of ROI, visit the ROI pod in the East Salon A/B Street Level or ROInstitute.org.

# Initial Findings of the Lancet Oncology Commission on Theranostics and Radiotherapy

#### MONDAY MORNING, ATTEND SESSION

INTERNATIONAL 04 to hear the initial findings from the Lancet Oncology Commission on Theranostics and Radiotherapy. The commission was formally convened by the International Atomic Energy Agency (IAEA) in 2021 and today will present its findings which illustrate that scaling up access to radiation therapy and theranostics for cancer patients would yield substantial health and economic benefits.

Following up on the 2015 Lancet Oncology
Commission¹ on expanding access to radiotherapy, the
IAEA, together with experts from 44 academic institutions
and medical centers from 23 countries, assessed the access
and availability of radiotherapy and theranostics. The
report highlights the importance of implementing costeffective approaches in low-income and middle-income
countries (LMICs) where access to radiation therapy and
theranostics is most limited. Specifically, the findings
illustrate that scaling up access to radiotherapy and
theranostics for cancer patients would yield substantial
health and economic benefits. This body of work builds
upon prior Lancet Oncology commission reports for
radiation therapy (released in 2015) and medical imaging
and nuclear medicine (released in 2021). The paper draws

on data obtained from a survey of 200 radiation therapy centers spanning 55 countries and highlights global disparities in relevant services and outlines a compelling health economics case for countries. This morning's session coincides with the publication of the commission's findings in The Lancet Oncology.

In today's session, May Abdel-Wahab, MD, PhD, FASTRO, co-lead author of the report and Director of the IAEA Division of Human Health, will present the goals and scope of the commission's report, followed by Jean-Luc Urbain, MD, PhD, CPE, who will discuss global utilization and challenges of theranostics. Surbhi Grover, MD, MPH, will then present data on global utilization and challenges in radiation therapy, specifically SBRT, in various regions of the world. Mauro Carrara, PhD, will focus discussion on turning the commission's findings into tangible actions, followed by a look at what's next for the commission. Time will be reserved for questions and discussion led by John Buatti, MD, FASTRO.

#### REFERENCE

**1** Responding to the cancer crisis: expanding global access to radiotherapy. *The Lancet Oncology*. Published on September 27, 2025. Accessed on September 29, 2024. https://www.thelancet.com/commissions/radiotherapy



Monday, September 30 10:45 AM – 12:00 PM

**♀**Room 204

#### **INTERNATIONAL 04**

Lancet Oncology Commission on Theranostics and Radiotherapy: Toward Bridging the Gaps in Cancer Radiotherapy Access for All

#### **INDUSTRY-EXPERT THEATERS**

♦ Theaters 1 and 2 are located in Hall C of the Exhibit Hall.
Room 154 AB is located on the Street Level of the Walter E. Washington Convention Center.

#### **MONDAY, SEPTEMBER 30**

#### **♥ Theater 1**

12:00 p.m. - 1:00 p.m. | GammaTile

A Simple Solution to Complex Challenges in Brain Tumor Management

#### **♥ Theater 2**

#### 12:00 p.m. - 1:00 p.m. | Boston Scientific

The Evolution of Prostate Cancer Therapy: SpaceOAR Hydrogel's Clinical Impact and Future Directions

#### **Q Room 154**

#### 12:00 p.m. - 1:00 p.m. | Lantheus

Impact of PSMA PET Imaging in the Management of Prostate Cancer

#### **♥ Theater 1**

#### 2:00 p.m. - 3:00 p.m. | Philips Healthcare

Better Care for More People with Philips Radiotherapy Solutions

#### **♥ Theater 2**

#### 2:00 p.m. - 3:00 p.m. | Chimerix

The Role of Radiotherapy in the Treatment of H3 K27M-mutant Diffuse Midline Glioma (DMG)

#### **Q Room 154**

#### 2:00 p.m. - 3:00 p.m. | Servier Pharmaceuticals

Targeted Therapy in mIDH Adult-Type Diffuse Glioma

Take a session break and enjoy some cuddle time with our lovable canine companions. Your perfect pick-me-up is just a wag away at the Paw Zone! Studies have shown that petting a dog lowers stress and anxiety and has lasting mental health benefits.



#### **♥ Booth 2805, Hall B**

Sunday, September 29 Monday, September 30 Tuesday, October 1 2:45 p.m. – 4:45 p.m. 11:00 a.m. – 1:00 p.m. 12:00 p.m. – 2:00 p.m.





NETWORKING RECEPTION

**♥ Halls A/B/C, Lower Level** 

Monday, September 30 | 4:00 p.m. - 5:00 p.m.

All registered attendees are invited to the Exhibit Hall Networking Reception hosted by ASTRO. This is a great opportunity for you to meet with industry partners over a beverage and refreshments while learning about the latest products, technology and services in cancer treatment and care. Full Conference, Monday One Day, Exhibit Hall Only and Spouse/ Guest registrants will receive a complimentary beverage ticket on site with their registration materials.

# ASTRO SPEED MENTORING SCHEDULE

#### **MONDAY, SEPTEMBER 30**

10:45 a.m. – 11:45 a.m. | ♀ Early Career and Mentoring Lounge, East Salon C

TABLE 1
Why and How to Add LDR
Brachytherapy to Your Practice



Pete Rossi, MD, FASTRO

# TABLE 2 Career Development in Academic Radiation Oncology



Charles Thomas Jr., MD, FASTRO

## TABLE 3 How to Build a Career in Research



David Gius, MD, PhD

# TABLE 4 How to Best Prepare for the Next Decade in Radiation Oncology



Paul Harari MD, FASTRO

TABLE 5
Career Development for Women in Radiation Oncology



Krisha Howell, MD

TABLE 6
Why and How to Get Involved in
Your Local Cancer Communities



Join Luh, MD, FASTRO

TABLE 7
How to Deal with Workforce
Shortages on Your Treatment Team



Christopher Jahraus, MD

TABLE 8 Maintaining Work-Life Balance



Jenna Kahn, MD



### **ROI RESEARCH SPOTLIGHT**

# Discover innovative animated patient videos in development

New series supported by Radiation Oncology Institute (ROI) grant

#### ALTHOUGH MORE THAN HALF OF PATIENTS DIAGNOSED

with cancer will be treated with radiation therapy, many have limited knowledge of what to expect during treatment. To help improve understanding and alleviate anxiety, Eulanca Liu, MD, PhD, and faculty mentor Ricky Savjani, MD, PhD, of the UCLA Department of Radiation Oncology are directing the development of a series of short, attention-grabbing animated videos that explain radiation therapy and its side effects. The Radiation Oncology Institute (ROI) awarded Dr. Liu one of its 2024 Advancing Care for All: Innovations to Drive Access to Radiotherapy Awards to lead the production of this series of videos. The team's initial focus will be on radiation therapy for head and neck cancer.

Dr. Liu and Dr. Savjani are collaborating with Robert Chin, MD, PhD, division head for head and neck radiation at UCLA, and animators from the world-renowned UCLA Animation Workshop to produce these videos, which are designed to clearly and concisely illustrate treatment logistics, common toxicities, and management strategies. To reach a wide audience of viewers, the videos are being translated from English into Spanish and other commonly spoken languages, and they will employ accessibility options for individuals with sensory, intellectual, learning and physical disabilities. When the videos

are ready to be shared with patients, Dr. Liu and her colleagues will measure patient understanding and anxiety before and after watching the videos. They will also assess whether the videos help reduce toxicities by increasing adherence to recommended skin and oral care regimens. "Today, many individuals retain information most effectively through watching videos, and we saw a unique opportunity to deliver important information in an easily digestible format that can be rewatched at any time," says Dr. Liu. "We hope that these animations on head and neck cancer will serve as a foundation for an entire library of videos."

The team produced one video prior to receiving the grant from ROI, and Dr. Liu is presenting their results at the Annual Meeting in abstract 3538, Animated, Multilingual, ADA-Accessible Videos to Improve Patient Education and Radiation Treatment Outcomes. Meet Dr. Liu and hear about the team's experience to date during Poster Q&A 03 - Gynecological Cancer, Pediatric Cancer, and Professional Development on Monday, September 30, from 8:00 a.m. - 9:00 a.m. in Hall C.

ROI believes these videos will be a great resource for patients and is excited to see the outcomes of the grant presented in the future. Stay up to date on Dr. Liu's project and other ROI research by following @RO\_Institute on X or visiting ROInstitute.org.



Eulanca Liu, MD, PhD



Ricky Savjani, MD, PhD



Robert Chin, MD, PhD

# ASTRO 2024 Virtual Coding and Coverage Seminar

Saturday, December 7

### **ASTRO Coding Seminar Helps You Tackle Rad Onc Coding Challenges**

BY EMILIO BEATLEY, SENIOR HEALTH POLICY ANALYST

INTERESTED IN ENSURING THAT YOUR PRACTICE IS ACCURATELY coding and billing for radiation therapy services? Worried that you may not be getting reimbursed properly? Or just want to freshen up on your radiation oncology coding knowledge? You are in luck! The ASTRO 2024 Virtual Coding and Coverage Seminar is set to take place on Saturday, December 7.

This seminar is the perfect opportunity for radiation oncologists and their coding and billing teams to gain a better understanding of coding and coverage policies specific to the field of radiation oncology. Key learning opportunities include how to apply coding based on modality, ongoing changes in health care policy that can affect coverage, and walkthroughs of clinical case studies with step-by-step coding guidance.

A previous seminar attendee said that "Hearing that other clinics have the same questions and concerns about how to charge correctly for the different types of treatments was extremely helpful. It was also great to hear that the prior authorization issues are being addressed. The meeting for me acts as a resource and with the Q/A it really helps answer questions as radiation can be very complex."

With expanded case studies and personalized Q&A sessions with our expert panel of radiation oncologists throughout the country, do not miss the chance to attend the most comprehensive radiation oncology coding and coverage seminar to date!

Coding Seminar attendees will also receive an advance printed and electronic copy of the ASTRO 2025 Radiation Oncology Coding Resource, an essential coding reference tool for all radiation oncology practices. ASTRO's Radiation Oncology Coding Resource includes information on the most up to date CPT and HCPCS codes, as well as critical coding, billing and documentation guidance for all relevant radiation oncology codes. The 2025 edition will include new information on coding guidance related to evaluation and management, image guidance, radiopharmaceuticals and more! The 2025 resource will be available for sale to the public starting January 2, 2025.

Please visit www.astro.org/codingseminar24 for additional information on seminar registration, program agenda, continuing education credits, and other available coding/billing resources.





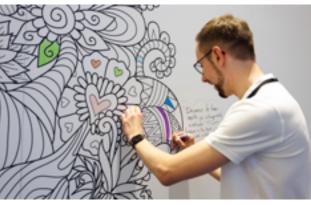






















# Photos of ASTRO 2024



























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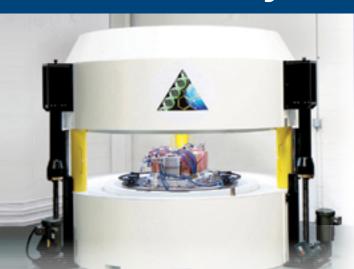
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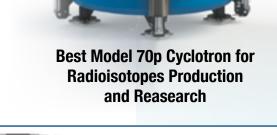


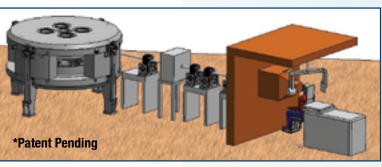
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NEW! B-11	11 MeV	For radioisotopes production and research
B100 Cyclotron	7.5 MeV	<ul> <li>Capable of producing: <sup>18</sup>FDG and Na<sup>18</sup>F</li> <li>Single or batch dose production</li> <li>Integrated self-shielded cyclotron, chemistry module and FDG QC module</li> <li>Complete production lab in a 5 x 5 meter area</li> </ul>
BG-95 Cyclotron	1-9.5 MeV	• Low energy, self-shielded compact system capable of producing: <sup>18</sup> FDG, Na <sup>18</sup> F, <sup>18</sup> F-MISO, <sup>18</sup> FLT, <sup>18</sup> F-Choline, <sup>18</sup> F-DOPA, <sup>18</sup> F-PSMA, <sup>13</sup> N and <sup>68</sup> Ga
Best Cyclotrons	1–3 MeV	Deuterons for materials analysis*
	70-200 MeV	• For Proton Therapy*
	3-90 MeV	High current proton beams for neutron production and delivery*
B6-15 Cyclotron	1–15 MeV	Proton only, capable of high current up to 1000 Micro Amps, for medical radioisotopes
B25 Cyclotron	20, 15-25 MeV	Proton only, capable of high current up to 1000 Micro Amps, for medical radioisotopes
B25u-35adp Cyclotron	25–35 MeV	• Proton or alpha/deuteron/proton, capable of high current up to 1000 Micro Amps, for medical radioisotopes
B35 Cyclotron	35 MeV	Proton only system for medical radioisotopes production
B70/70adp Cyclotron	35-70 MeV	<ul> <li>Proton only or alpha/deurotron/proton systems, capable of high current up to 1000 Micro Amps, for medical radioisotopes</li> </ul>

\*Some products are under development and not available for sale currently.



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