

Standardization of Lifetime Cumulative Dose Estimation for Re-Irradiated Patients Using Whole-Body Computational Phantoms

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Background

- Advances in radiation therapy have improved cancer survival, resulting in a growing number of patients receiving re-irradiation for recurrent disease or new primary tumors.
- Accurate assessment of lifetime cumulative dose to organs at risk (OARs) is critical for minimizing toxicity and guiding treatment decisions.
- We propose mapping patient dose distributions from multiple treatment courses onto standardized whole-body computational phantoms developed by the International Commission on Radiological Protection (ICRP).
- The ICRP phantom contains detailed representations of numerous OARs, enabling lifetime dose tracking across anatomies that extend beyond the field of view (FOV) of individual treatment-planning CT scans.
- This approach enables comprehensive lifetime dose accumulation within a common anatomical framework and may facilitate multi-institutional studies, toxicity modeling, and the development of standardized re-irradiation dose constraints.

Materials/Methods

- Synthetic CT datasets of the male and female ICRP reference phantoms were generated using the DICOMator extension in the graphics software Blender®.
- Hounsfield Unit (HU) values were assigned to each anatomical structure using tissue density and elemental composition data from ICRP Publication 145, followed by voxelization at $0.54 \times 0.54 \times 3.0$ mm resolution.
- Dose distributions from a small cohort of thoracic re-irradiation patients were mapped onto the ICRP reference phantoms for preliminary evaluation in RayStation 2023B.

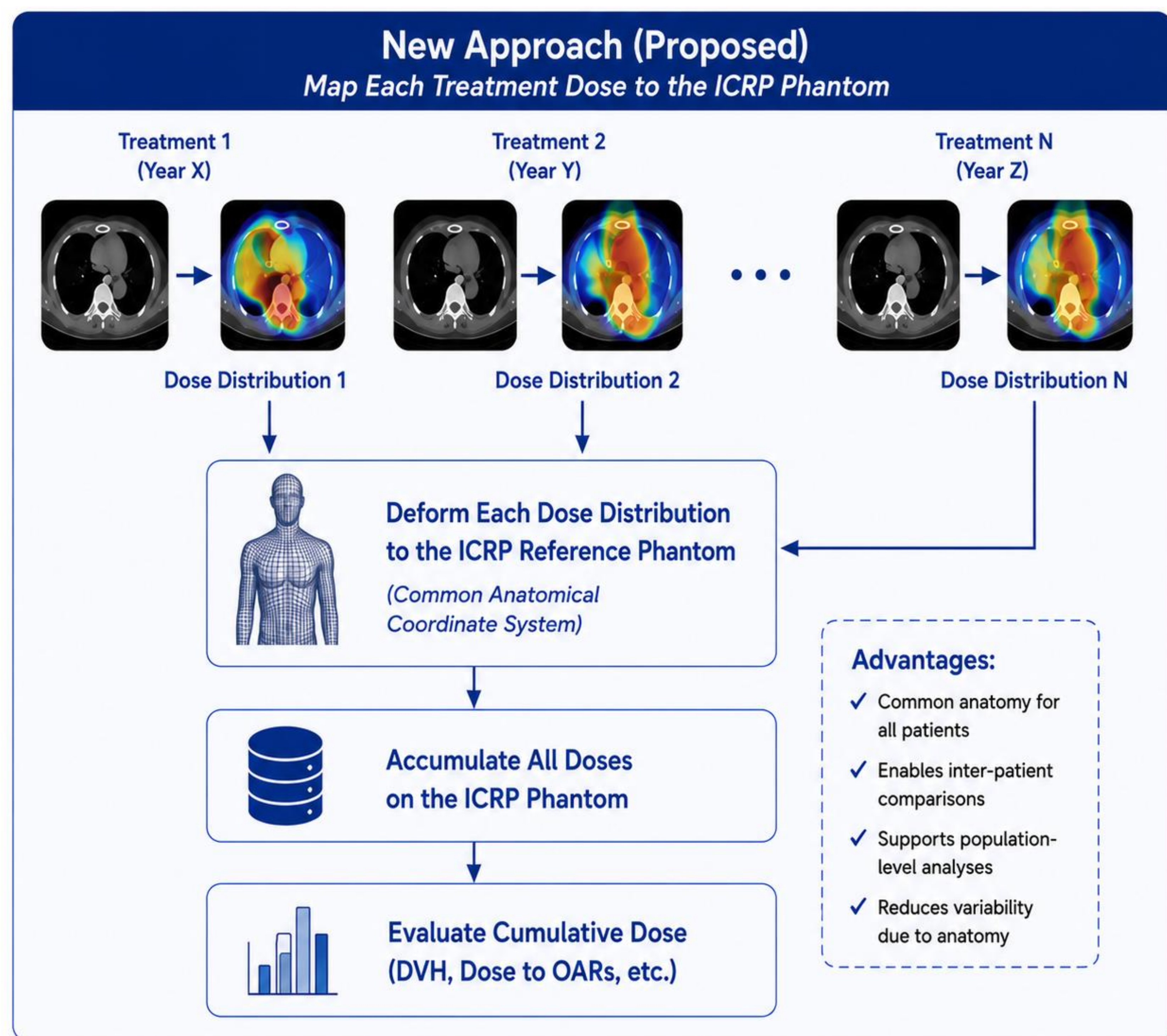


Figure 1. Proposed workflow for dose accumulation from multiple treatment courses onto a standard reference phantom model.

Results

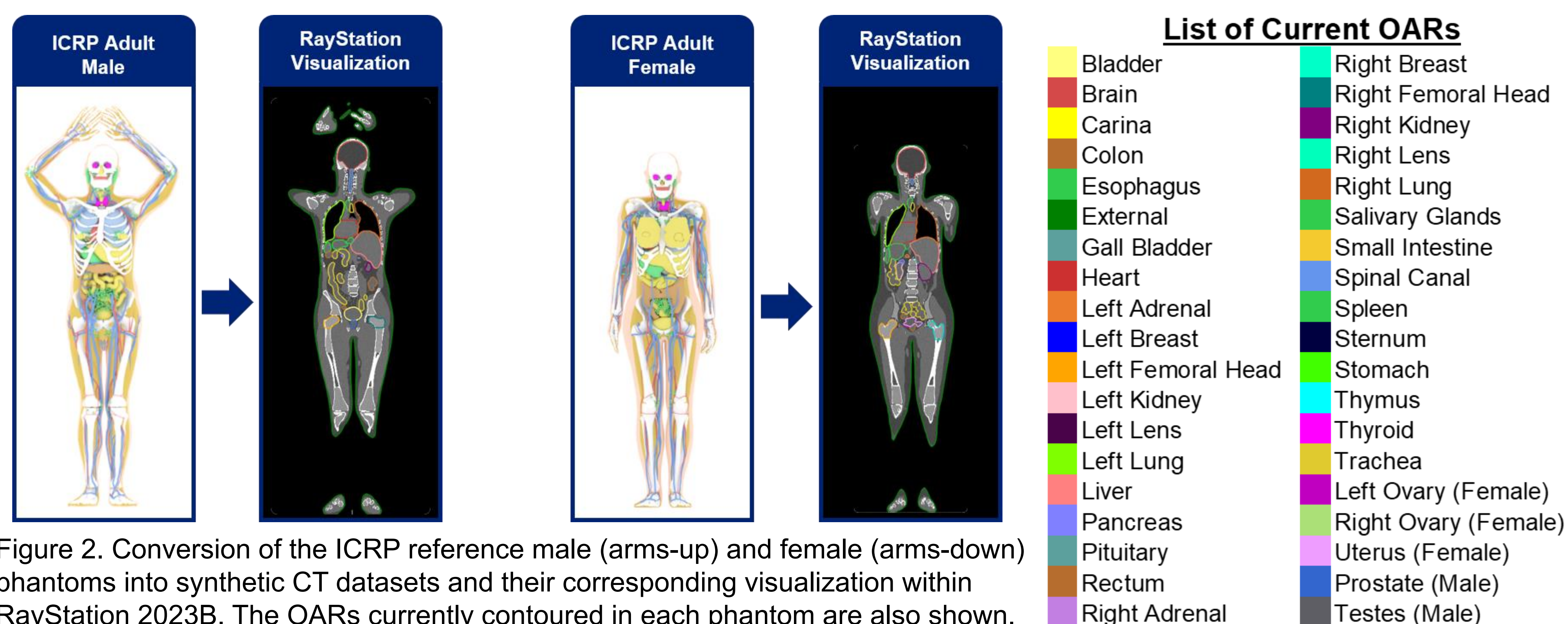


Figure 2. Conversion of the ICRP reference male (arms-up) and female (arms-down) phantoms into synthetic CT datasets and their corresponding visualization within RayStation 2023B. The OARs currently contoured in each phantom are also shown.

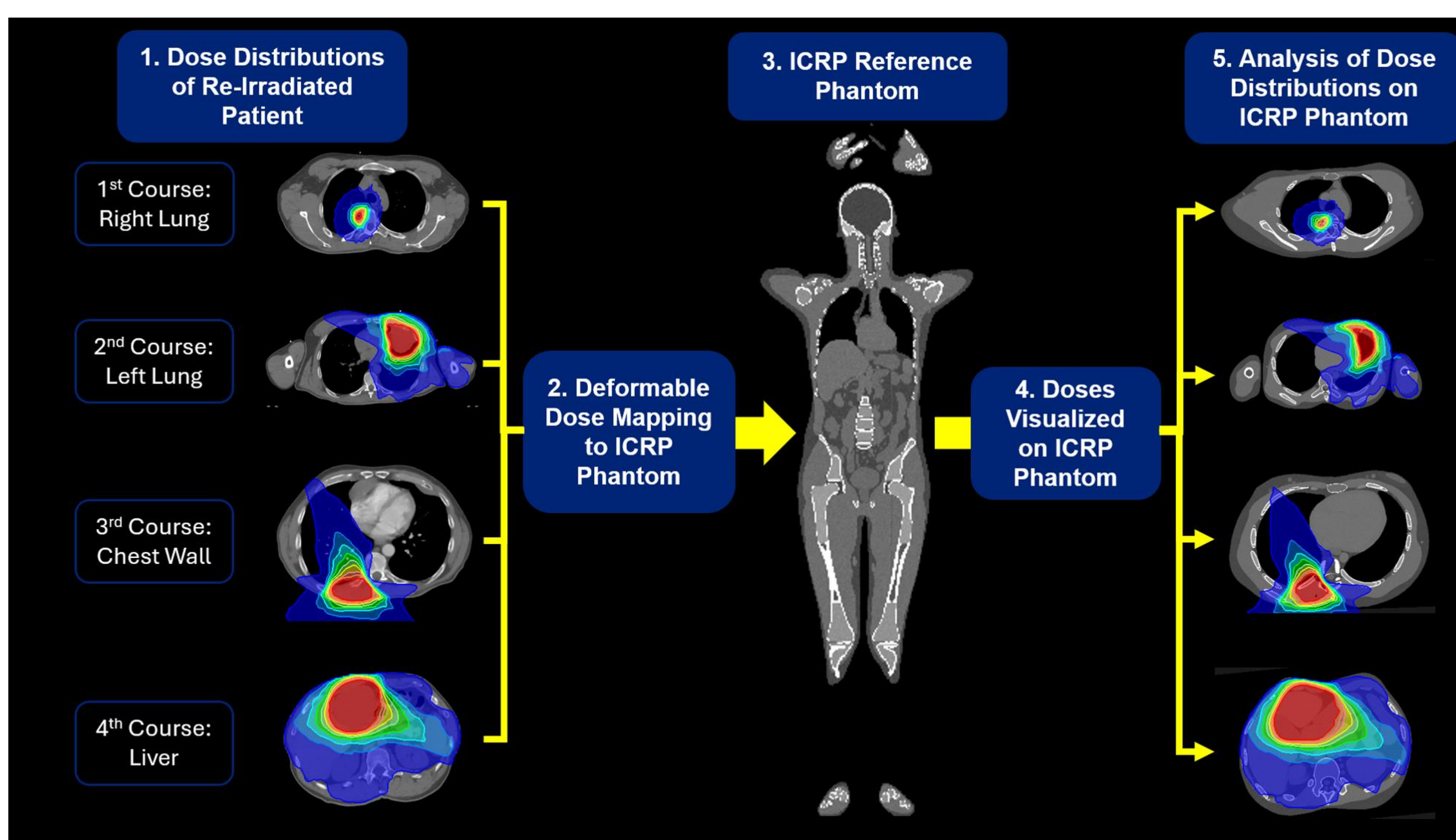


Figure 3. Deformable mapping of dose distributions from four radiotherapy courses delivered to a single patient onto the ICRP male reference phantom. The availability of both arms-up and arms-down phantom configurations enabled position-specific dose mapping, with the second treatment course mapped through the arms-down phantom before transformation to the common arms-up reference atlas. This approach allows for improved accuracy in dose accumulation across treatment courses acquired under differing patient setups.

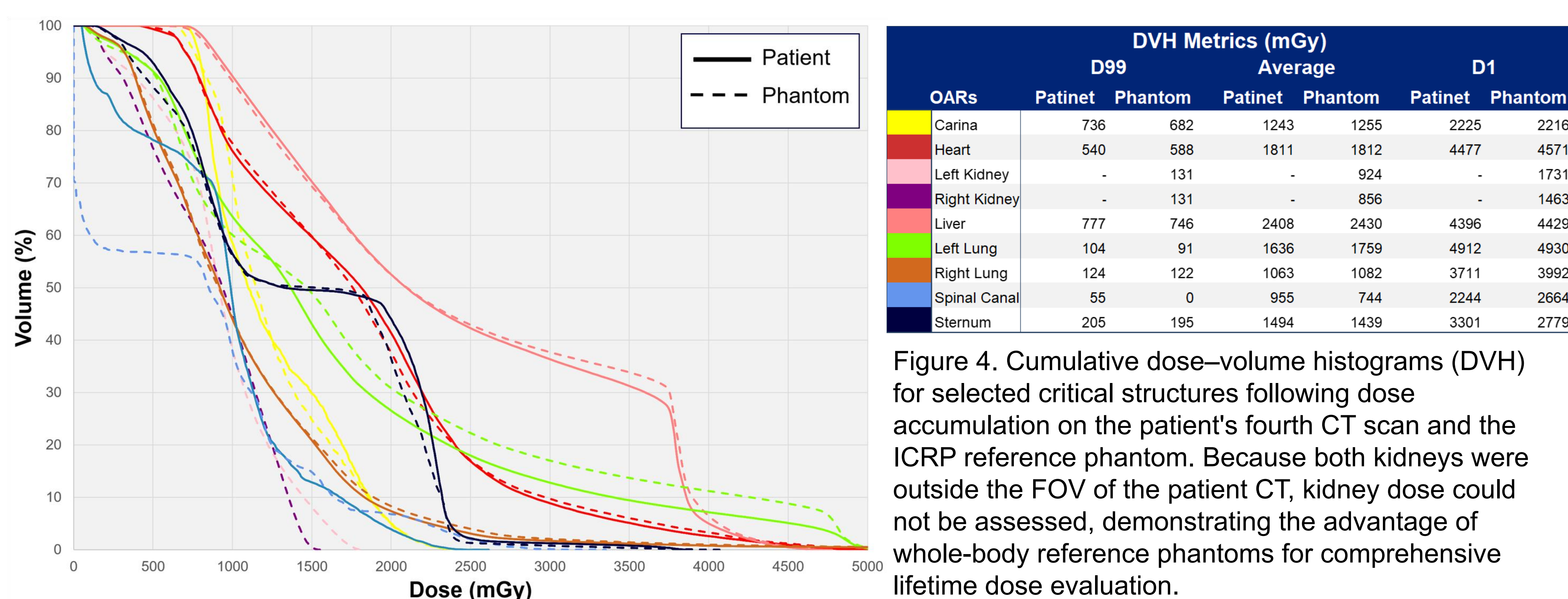


Figure 4. Cumulative dose-volume histograms (DVH) for selected critical structures following dose accumulation on the patient's fourth CT scan and the ICRP reference phantom. Because both kidneys were outside the FOV of the patient CT, kidney dose could not be assessed, demonstrating the advantage of whole-body reference phantoms for comprehensive lifetime dose evaluation.

Conclusion

- A standardized phantom-based dose accumulation framework was developed to address the lack of consistent methods for estimating cumulative lifetime OAR dose in re-irradiation, enabling meaningful comparisons across patients, institutions, and treatment platforms.

References

- [1] Kim CH, Yeom YS, Petoussi-Henss N, et al. ICRP Publication 145: Adult Mesh-Type Reference Computational Phantoms. *Ann ICRP*. 2020;49(3):13-201. doi:10.1177/0146645319893605
- [2] Dawson RJ, Baggett JM, Dinwiddie LE, et al. The UF/MSK adult mesh-based computational human phantom library: applications to organ dosimetry in computed tomography. *Phys Med Biol*. 2025;70(23):10.1088/1361-6560/ae1dc5. Published 2025 Nov 21. doi:10.1088/1361-6560/ae1dc5