

Introduction

- VMAT is widely used clinically, but fundamental optimizer development remains limited by closed commercial systems.
- This study recasts VMAT direct aperture optimization as training a machine-learning model.
- MLC leaf positions and control-point weights are trainable parameters; dose deposition is a fixed linear map.
- Machine constraints are handled naturally as hard bounds and regularization terms.

Methods

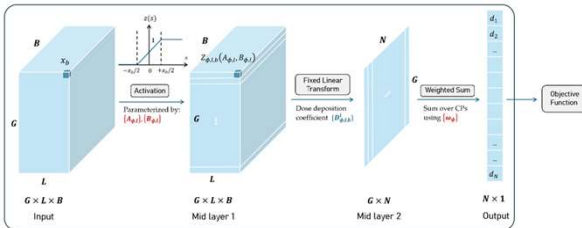


Figure 1: The neural network model for VMAT optimization. G: total number of control points. L: total leaf pairs. B: maximum beamlets per row. N: total voxels. Trainable parameters: $\{A_{\phi,l}\}, \{B_{\phi,l}\}, \{\omega_{\phi}\}$. Fixed, non-trainable parameters: $\{D_{\phi,l,b}^i\}$. The input layer is a stacking of x_b (x-coordinate in the 2D intensity map, grid resolution is 2.5mm) for all beamlets. It is connected to mid layer 1 through an activation given by the stepwise linear function $z(s)$. Mid layer 1 corresponds to $Z_{\phi,l,b}$ in equation 2. Mid layer 2 applies a fixed linear transformation using the dose deposition matrix. The output layer gives the voxel doses as a weighted sum over control points from mid layer 2. The entire forward pass is executed in parallel on GPU.

- Optimization objective: standard dose-volume terms plus machine-aware penalties (**regularization**).
- **Leaf motion**: maximum travel between neighboring control points.

$$C_1 = \alpha_1 \sum_{\phi,l} (|A_{\phi+1,l} - A_{\phi,l}| - s_{MLC})_+^2 + (|B_{\phi+1,l} - B_{\phi,l}| - s_{MLC})_+^2$$
- **Dose rate**: penalty for exceeding 600 MU/min nominal maximum.

$$C_2 = \alpha_2 \sum_{\phi} \left(\frac{MU * \omega_{\phi}}{\Delta\phi / v_g^{max}} - DR^{max} \right)_+^2$$
- **Smoothness**: discourages erratic back-and-forth leaf trajectories.

$$C_3 = \alpha_3 \sum_{\phi} (A_{\phi+1,l} - A_{\phi,l})^2 + (B_{\phi+1,l} - B_{\phi,l})^2$$
- Weights: sigmoid reparameterization maintains positive CP weights.
- Benchmarks: corresponding IMRT plans using the same objective and dose model.
- Implementation: PyTorch 2.1.2, L-BFGS optimizer, NVIDIA Quadro RTX 8000 GPU.
- Validation: optimized plans imported into Eclipse and delivered on TrueBeam without interlocks.

Results

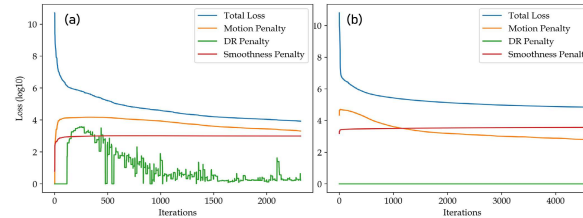


Figure 2: Total objective and regularization terms decrease stably for prostate and HN cases.

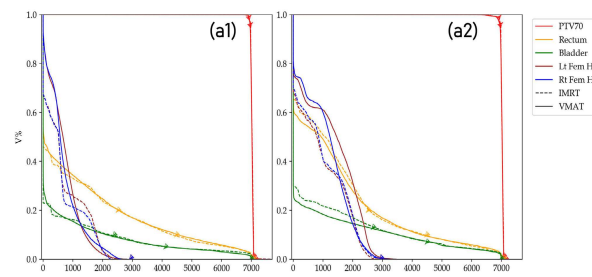


Figure 3: Prostate DVHs show two-arc VMAT plan quality comparable to benchmark IMRT

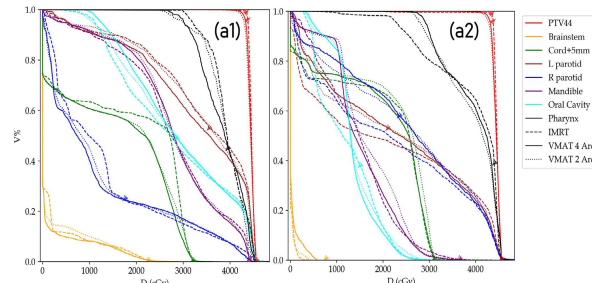


Figure 4: HN DVHs show four-arc VMAT improves target conformity and OAR sparing relative to two arcs.

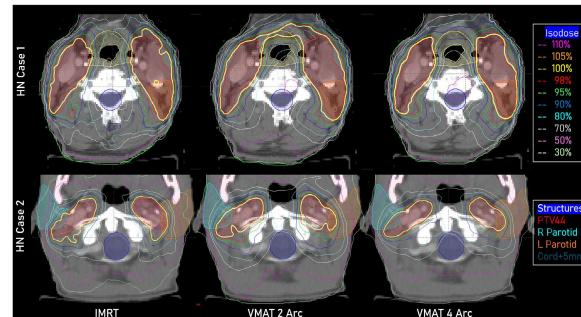


Figure 5: Dose distributions confirm smoother VMAT dose patterns and improved four-arc conformity in complex HN geometry.

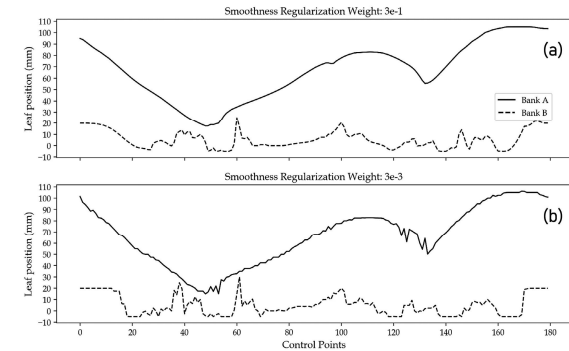


Figure 6: Stronger smoothness regularization reduces unnecessary leaf trajectory spikes.

- All VMAT optimizations converged successfully with stable objective reduction.
- For prostate cases, two-arc VMAT achieved PTV coverage and OAR sparing comparable to IMRT.
- For HN cases, four-arc VMAT consistently improved target conformity and OAR sparing versus two arcs.
- Machine-related penalties behaved as intended: dose-rate violations were limited and motion/smoothness terms guided deliverable trajectories.

Metric	Prostate (2-arc)	HN (4-arc)
Iterations	~3,000	~4,500
Total time	~40min	~140min
Peak GPU Usage	4-7 GB	19-22 GB

Conclusions

- VMAT optimization can be formulated as training a patient-specific ML model.
- The framework bridges ML optimization infrastructure with treatment planning physics.
- Plan quality was comparable to benchmark IMRT in tested cases, with four-arc HN VMAT improving over two-arc VMAT.
- The approach offers an extensible platform for future VMAT algorithm development.

References

- Wu X, Yang D, Sheng Y, Wu QJ, Wu Q. Feasibility study of a machine learning inspired approach for VMAT optimization. Medical Physics. 2026;53:e70431.
- Wu X et al. A machine learning toolkit assisted approach for IMRT fluence map optimization. Biomed Phys Eng Express. 2025;11:035016.
- Unkelbach J et al. Optimization approaches to volumetric modulated arc therapy planning. Med Phys. 2015;42:1367-1377.

Contact

Xin Wu, Ph.D. Duke University
Email: xin.wu@duke.edu