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Upcoming Events:

RSS Scientific Meeting 2014 - Reaching Higher Standards
May 7-10, 2014
Hilton Minneapolis, MN

2014 AERO Accuray Users' Meeting - The Frontiers of Image Guidance: Margins, Motion and Adaptation
Wednesday, May 7, 2014
Hilton Minneapolis, MN

Varian Medical Systems Symposia: "Sharpen Your EDGE Against Cancer"
Wednesday, May 7, 2014
Hilton Minneapolis, MN

For more information, go to www.therss.org

Outcomes of Early-Stage Lung Cancer and Early-Stage Prostate Cancer To Be Presented at RSS Scientific Meeting

Two studies from the RSSearch™ Patient Registry will be presented at the upcoming Radiosurgery Society Scientific Meeting, May 7-10, 2014, to be held at the Hilton Minneapolis, MN. Dr. Clinton Medbery III, M.D. Radiation Oncology, St. Anthony Hospital, Oklahoma City, OK will present clinical outcomes of 789 patients with T1-T2N0M0 lung cancer treated with SBRT during an oral presentation session on Thursday, May 8. This will be the largest study to date to report overall survival and lesion response of early-stage lung cancer treated with SBRT.

The second abstract, focused on SBRT-treatment of early-stage prostate cancer, will be discussed during the oral clinical poster session on Thursday, May 8. Patient characteristics, treatment manage-

ment patterns and biochemical disease-free survival of 464 patients (205 low-risk, 207 intermediate-risk and 52 high-risk) will be presented.

"We have been adding patients to RSSearch™ for several years and the efforts are coming to fruition with the presentations and publications of outcomes from large numbers of lung cancer patients," stated Dr. Clinton Medbery III, M.D. St. Anthony Hospital, OK.

These two studies demonstrate that RSSearch can be a valuable tool to track patient demographics, treatment management practices and clinical outcomes. Be sure to register for the RSS Scientific Meeting 2014- Bridging The Gap: Reaching Higher Standards and visit the event website at: <https://www.regonline.com/builder/site/?eventid=1272219>

RSSearch™ Has Expanded to Munich, Germany

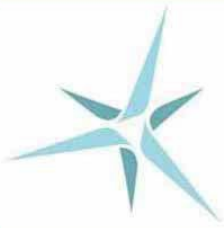
We are pleased to welcome the European CyberKnife Center Munich, Germany as a participant in RSSearch™. The team at CyberKnife Center, Munich has a long standing track record of conducting clinical research and publishing clinical outcomes studies focused on SRS/SBRT treatments and will be the first center in the European Union to participate in RSSearch. "The RSSearch Registry is a very important tool

for the prospective collection of patient data. In times where it is increasingly difficult to execute prospective randomized trials, multi-center data collection and consecutive outcome analysis are becoming the backbone of scientific publications," stated Dr. Alexander Muacevic, M.D., Professor Munich University and Director of European CyberKnife Center Munich. We look forward to collaborating with Dr. Muacevic and his team.

BRIDGING THE GAP *Reaching Higher Standards*

MAY 7TH - 10TH, 2014 | HILTON MINNEAPOLIS | MINNEAPOLIS, MINNESOTA





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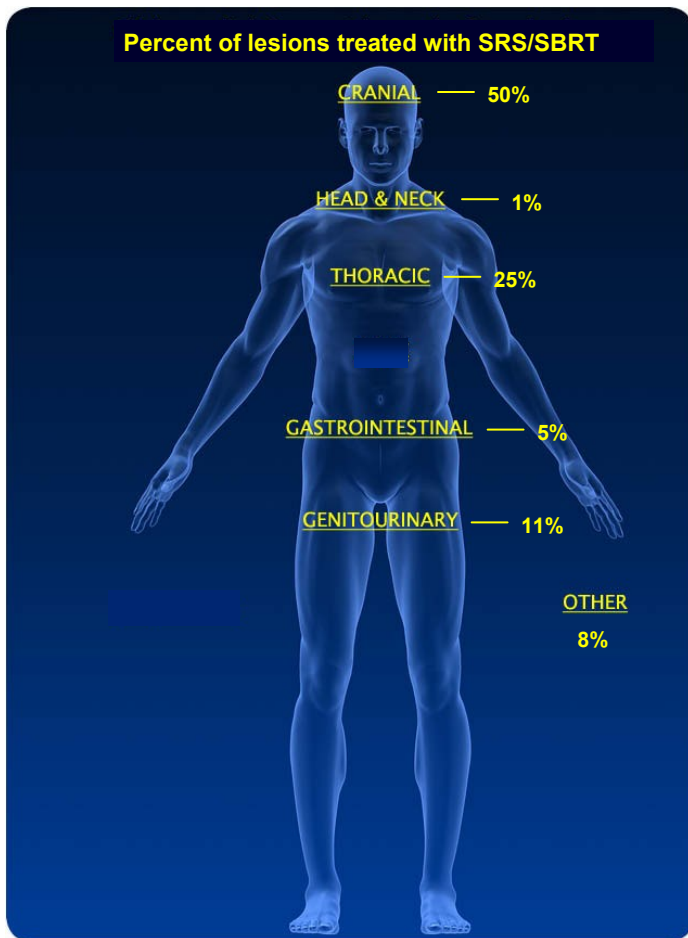
Bridging the Gap

RSSearch™ Patient Registry Quarterly Newsletter

Volume III

March 2014

2014 Treatment Locations in RSSearch™



Support the RSSearch™ Patient

If you are a Registry participant it is important that you:

- Update your IRB with RSSearch™ protocol and consent forms
- Continue to enter SRS/SBRT screened patients
- Complete screening, treatment and outcome data
- Update patient follow-up information

Become a Registry participant:

- Contact Nalani Brown at nbrown@therss.org

Coordinator's Corner: Meet RSSearch™ Participants

Veronica Kim, BSN is the CyberKnife Clinical Outcomes Coordinator at the CyberKnife Center at MedStar Franklin Square Medical Center in Baltimore, MD. In February 2009, Franklin Square began enrolling patients in the ReCKord Registry and have been enrolling patients ever since. The center under the direction of Dr. David Perry, M.D. Medical Director, has enrolled 570 patients in RSSearch™.

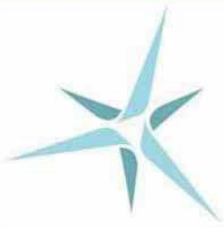
"The RSSearch Registry is a valuable tool to collect observational outcomes data, and many of our patients want to participate in the hopes of helping others with similar conditions," stated Veronica Kim, BSN, CyberKnife Clinical Coordinator.

We have a small and very cohesive CyberKnife team, which strives to provide world class care to our patients. Our center is very excited to be participating in a lung cancer study of patients with centralized tumors and look forward to collaborating with other centers in the future. It is a great opportunity to analyze and provide data regarding the effectiveness of CyberKnife treatment to other medical professionals in the field.

The CyberKnife Center at MedStar Franklin Square Medical Center has delivered more than 1,150 different courses of treatments with CyberKnife. For more information, please contact the Franklin Square CyberKnife Center at 443-777-8822.



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Bridging the Gap

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SRS/SBRT Article of Interest:

The intent of this section is to highlight and summarize the results of relevant articles on SRS/SBRT originating from RSSearch™ and elsewhere. If you have an article you would like to submit, please email the RSS at admin@therss.org

Stereotactic Ablative Radiation Therapy for Centrally Located Early Stage or Isolated Parenchymal Recurrences of Non-Small Cell Lung Cancer: How to Fly in a “No Fly Zone” Chang, J., Li, Q., Xu, Q., Allen, P., Rebueno, N., Gomez, D., Balter, P., Komaki, R. et al.

International Journal of Radiation Oncology, Biology, Physics. [Volume 88, Issue 5](#), Pages 1120-1128, 1 April 2014

The M.D. Anderson group recently published an update on their experience with stereotactic ablative radiation therapy (SABR) for centrally located non-small cell lung cancer. In this study, the authors report on 81 patients with biopsy-proven central T1-T2N0M0 and 19 patients with isolated parenchymal lung recurrences treated with 50 Gy delivered in 4 fractions or 70 Gy delivered in 10 fractions. Overall survival (OS), progression-free survival (PFS), local and regional control, distant metastasis and toxicities were reported. At a median of 30.6 months, the median OS was 55.6 months and the 3-year OS rate was 70.5%. PFS rates were 68.6% at 3 years and 63.6% at 5 years. The 3-year actuarial local, regional and distant control rates were 96.5%, 87.9% and 77.2%, respectively. Age and tumor diameter > 2 cm were related to OS and sex, performance status and type of tumor (primary or isolated recurrence) were related to PFS. There were no significant differences among OS, PFS, local and regional control or distant metastasis for 50 Gy in 4 fractions vs. 70 Gy in 10 fractions.

For toxicities, chest-wall pain and radiation pneumonitis were the most common toxicities. Grade 1 chest-wall pain was reported in 18% and Grade 2 in 13% of patients. Grade 2 pneumonitis was reported in 11% of patients and Grade 3 in 1% of patients. There were no Grade 4 + toxicities. On the basis of the author's previous experience and the current study, new recommendations for dose-volume constraints were described for patients treated with SABR to 50Gy in 4 fractions. The authors concluded that SABR for centrally located lesions can result in similar clinical outcomes for peripheral tumors when normal tissue constraints are respected.

The Radiosurgery Society®, 1350 Dell Avenue Suite 105, Campbell CA 95008
Telephone: 408-385-9411; Visit: <http://www.therss.org>

Frequently Asked Questions & Answers:

Question: How can I create site-specific questions in RSSearch™?

Answer: All participating centers can create site-specific questions in RSSearch in real time using the Custom Question Tool found in the ADMIN section of RSSearch.

Access the ADMIN section by clicking on the ADMIN link on the home page screen. Select “Add New Question”. Select which form (Screening, Treatment or Follow-Up) the question will appear. Type the text of your question in the “Question” field and select the type of question. Select SAVE and FINISH. The new question will appear on the form you selected.

Question: What treatment location do I use for acoustic neuromas?

Answer: Acoustic neuromas are benign lesions that arise on the eighth cranial nerve. The treatment locations listed in RSSearch™ are based on ICD-9 codes. Select “Brain, Cranial nerve, Spine” for the Treatment Location and select “benign” from the Category Description drop box. Select “Acoustic Neuroma” from the “Pathology/Disease” drop down list.

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Bridging the Gap

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the Radiosurgery Society® invites you to

THE SRS/SBRT SCIENTIFIC MEETING 2014

BRIDGING THE GAP *Reaching Higher Standards*

MAY 7TH – 10TH, 2014 | HILTON MINNEAPOLIS | MINNEAPOLIS, MINNESOTA



Register for the meeting before 12:00 am PDT on April 15, 2014 to receive the discounted registration rates

The complete **Agenda** and registration details can be found at the event website at:
<https://www.regonline.com/builder/site/?eventid=1272219>

A maximum of 26.5 CME credits have been awarded.

CME Credit

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the Minnesota Medical Association and The Radiosurgery Society. The Minnesota Medical Association (MMA) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The Minnesota Medical Association designates this live activity for **a maximum of 26.5 AMA PRA Category 1 Credit(s)™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



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American Association of Physicists in Medicine



The mission of the American Association of Physicists in Medicine is to advance the science, education and professional practice of Medical Physicists; a broad-based scientific and professional discipline which encompasses physical principles with applications in biology and medicine.

International Stereotactic Radiosurgery Society



The International Stereotactic Radiosurgery Society (ISRS) was founded as a worldwide non-profit organization in 1991. The ISRS and the RSS entered a mutual endorsement collaboration to promote and strengthen research and educational programs dedicated to advancing the knowledge of stereotactic radiosurgery and stereotactic body radiotherapy.