



DEUTSCHER  
ZUKUNFTSPREIS

# **(Un)sichtbare Tumore in Bewegung Neue Perspektiven für die Strahlentherapie durch präzises Tumortracking**

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\*Universitätsklinikum Hamburg-Eppendorf (UKE), Hamburg

NOMINIERT FÜR DEN DEUTSCHEN ZUKUNFTSPREIS 2022



Chemotherapie/  
Immuntherapie



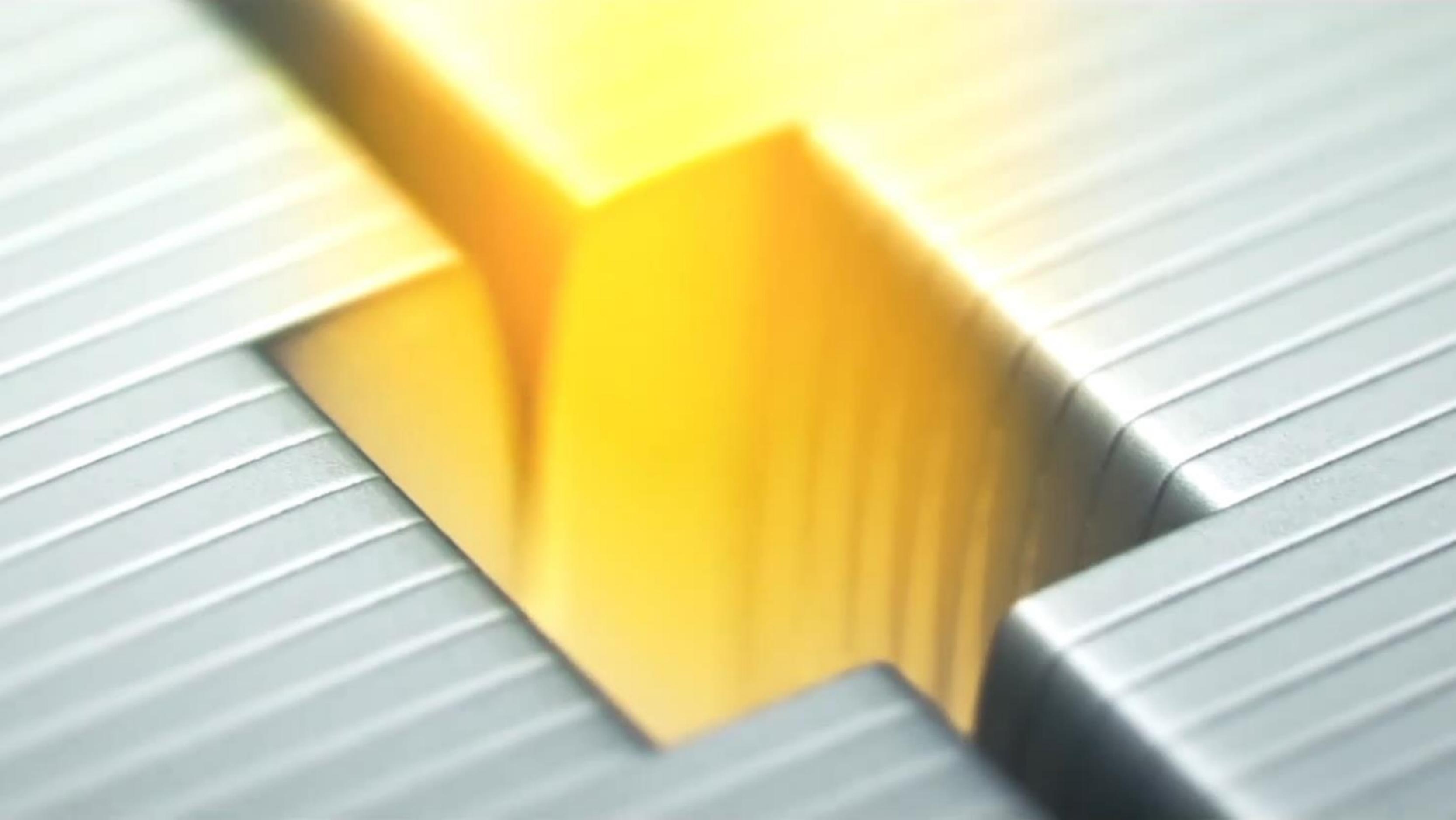
Strahlentherapie

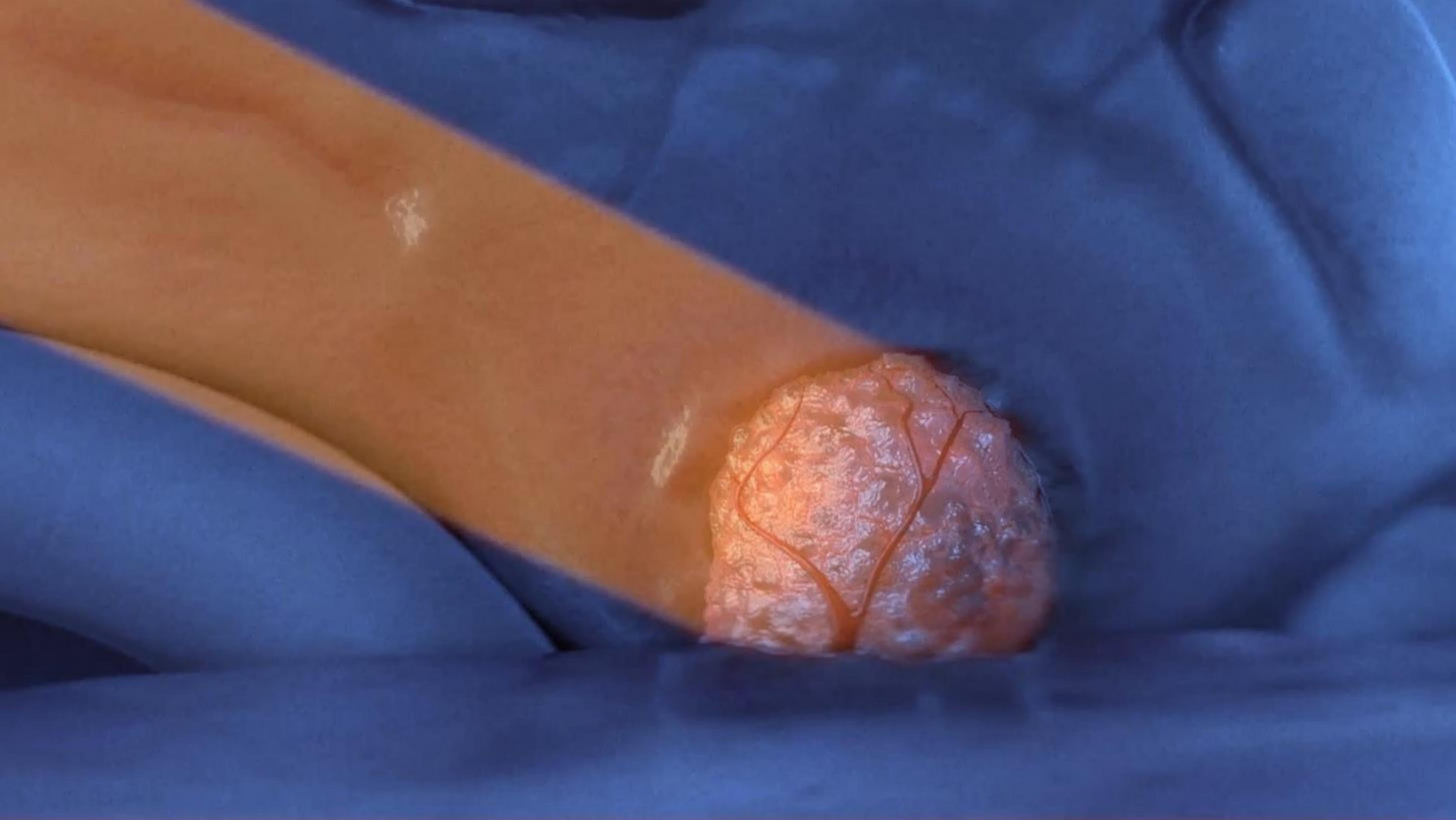


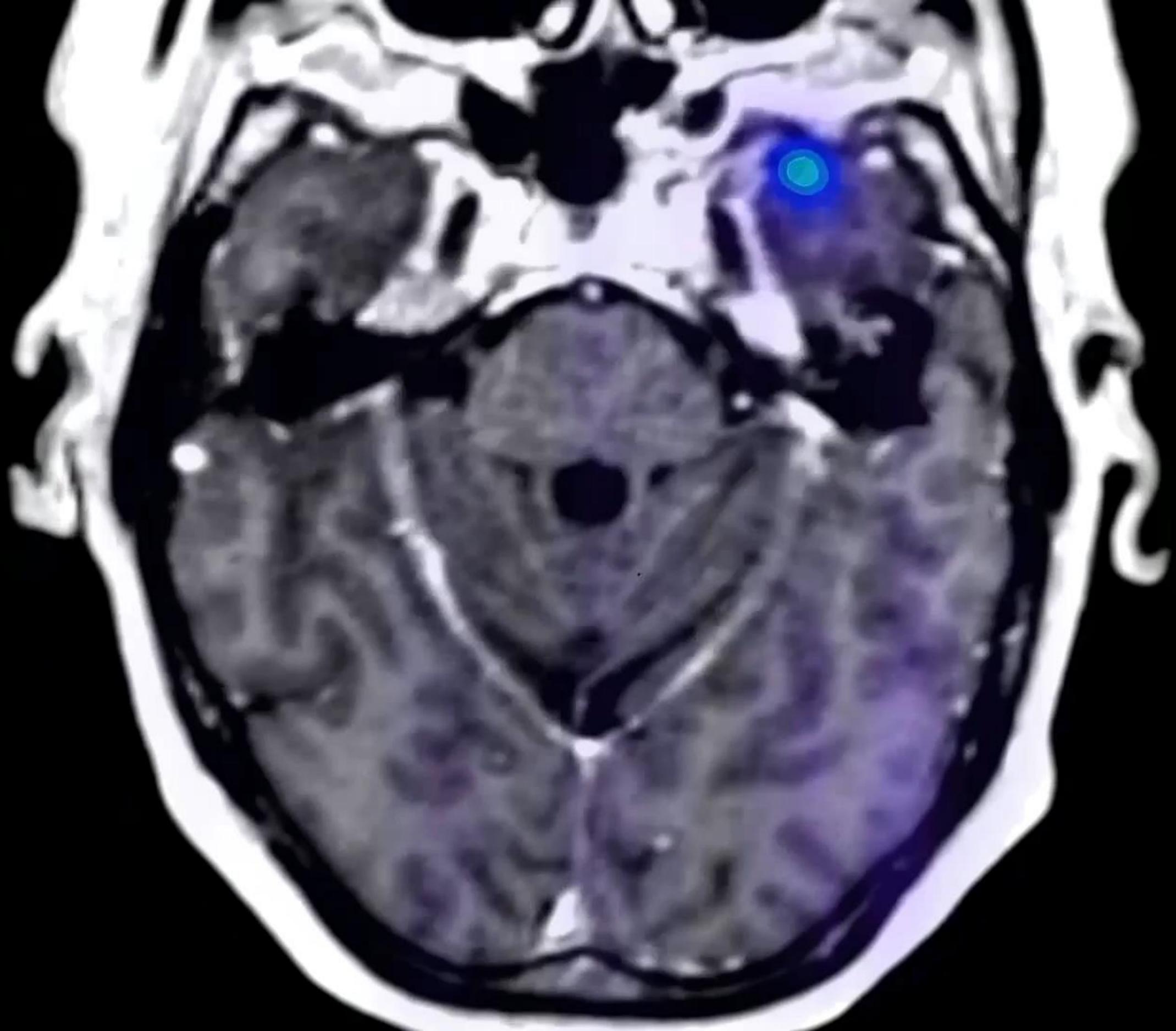
Chirurgie









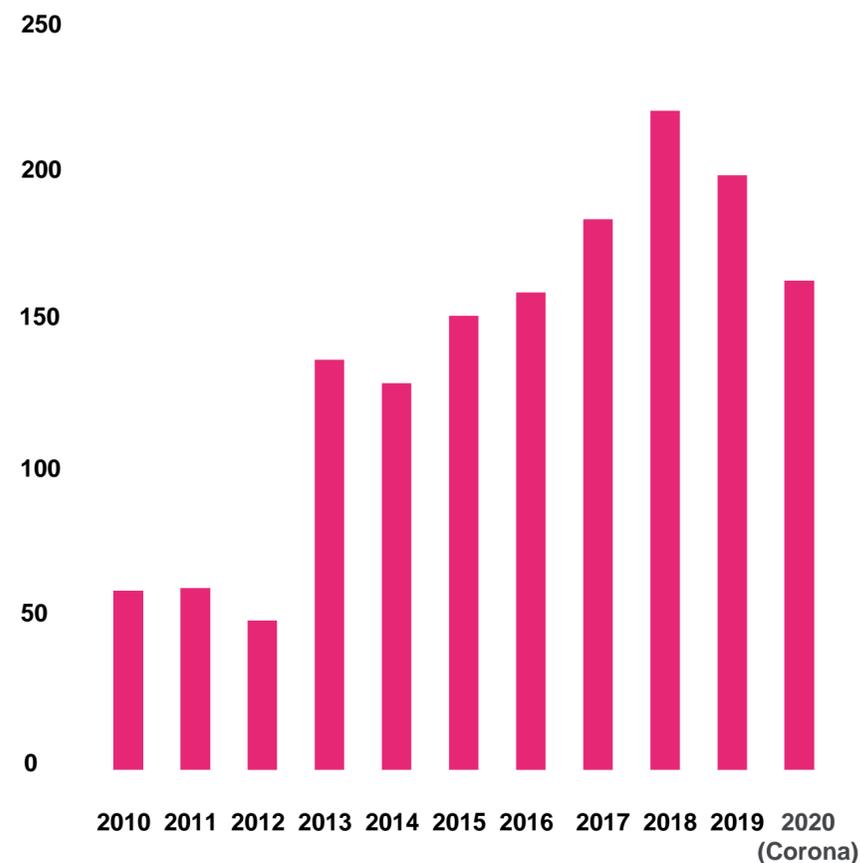




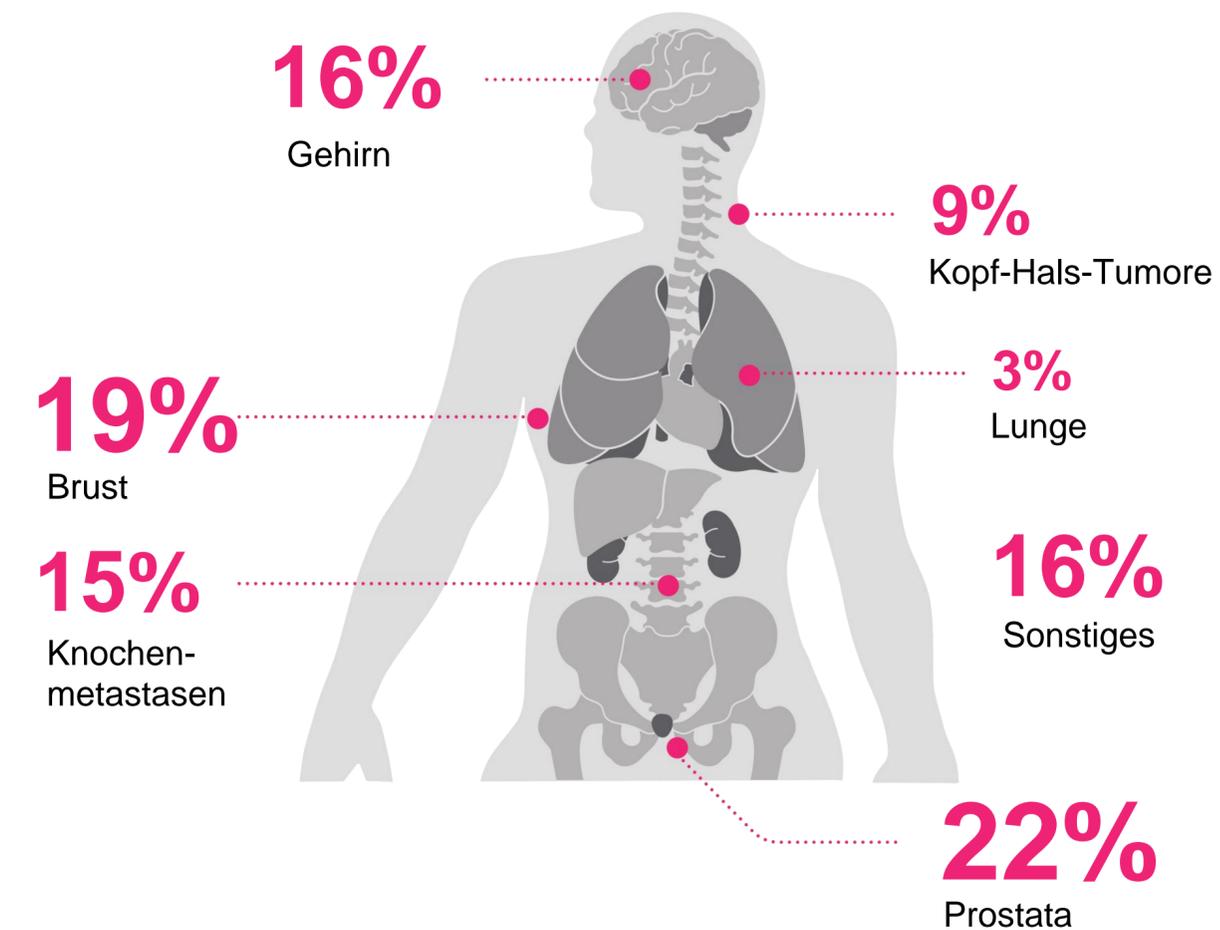
## Einblick in klinische Praxis

Patientenzahlen am Universitätsklinikum Hamburg-Eppendorf (UKE)

### Patientenzahlen für Hochpräzisionsstrahlentherapie am UKE



### Tumorindikationen für Hochpräzisionsstrahlentherapie am UKE





# Lungenkrebs

## Neuerkrankungen/Jahr

Deutschland  
**57.000**



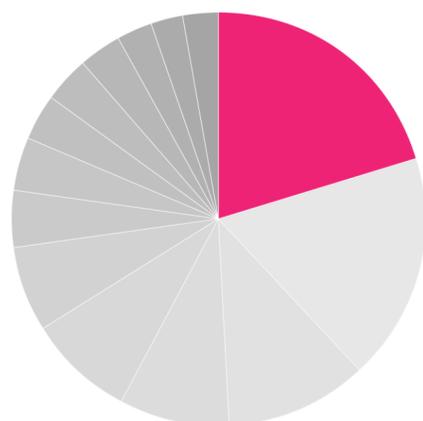
Weltweit

**2,1 Mio.**



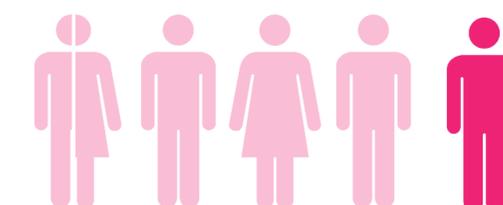
## Krebstodesfälle/Jahr Deutschland

Lunge  
**45.000**



**5 von 100**

erkranken im Laufe  
ihres Lebens an  
Lungenkrebs

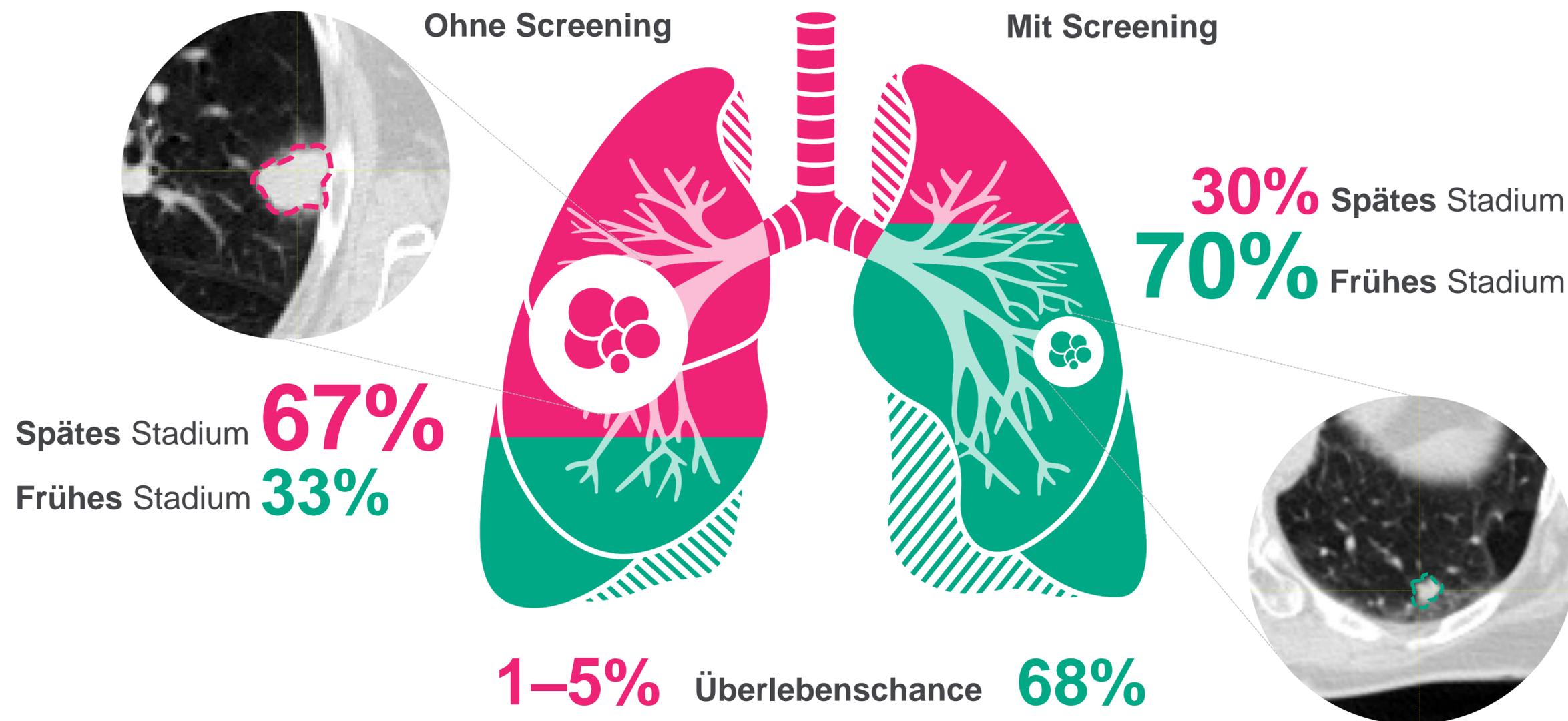


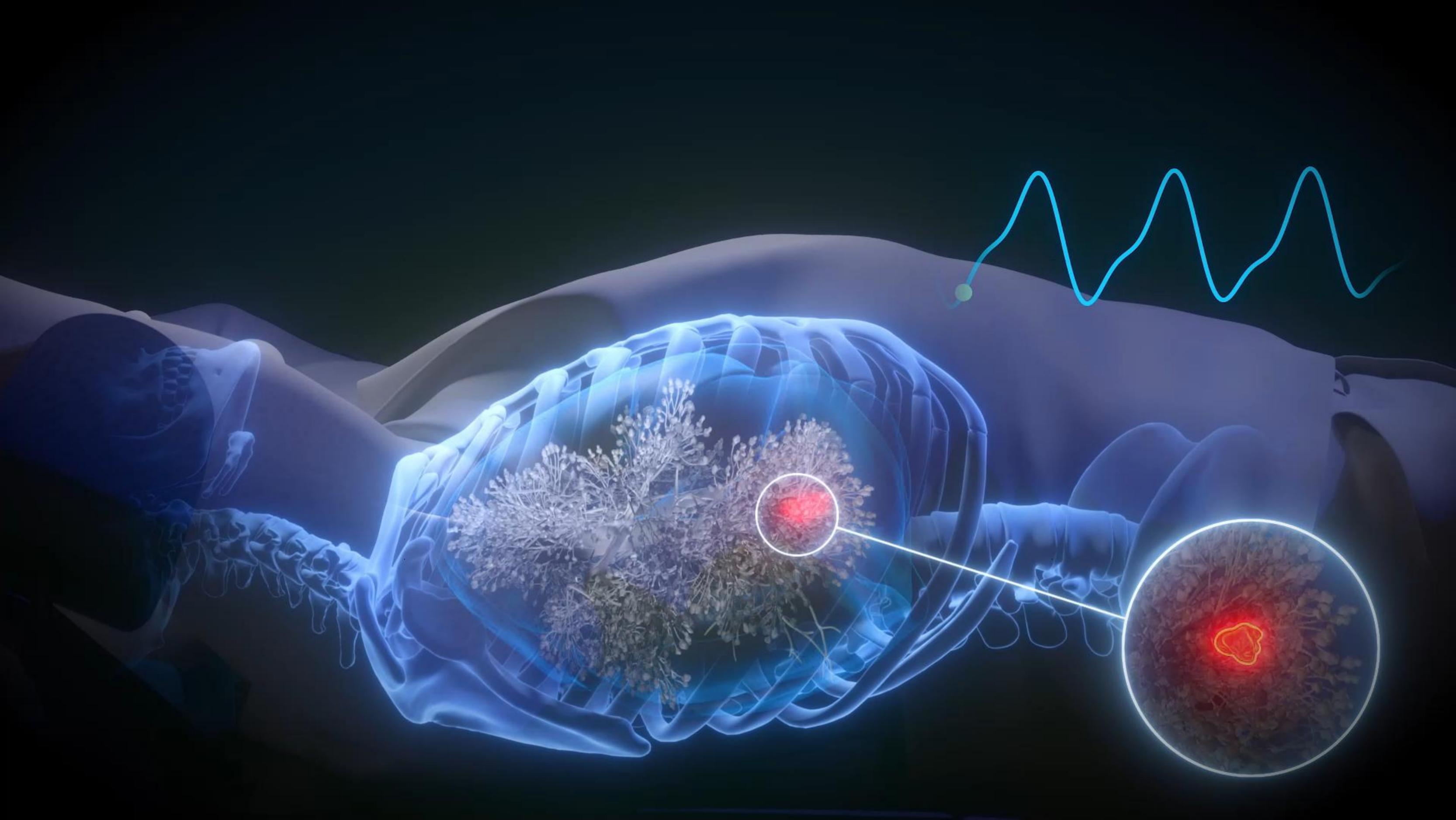
**4** davon sterben  
an Lungenkrebs





## Diagnose von Lungenkrebs



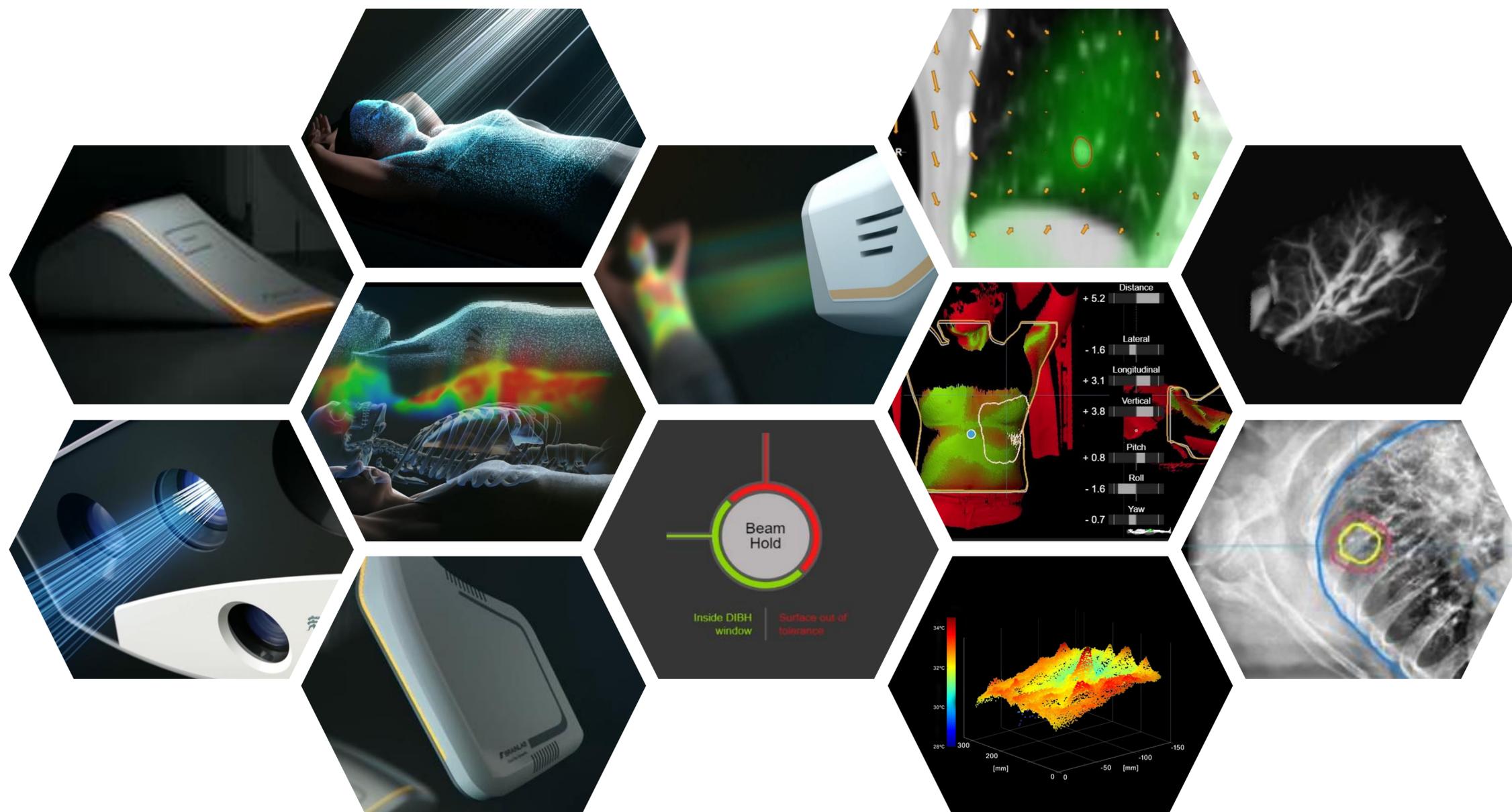




DEUTSCHER  
ZUKUNFTSPREIS

# Zusammenwirken zahlreicher Innovationen

## Hardware & Software



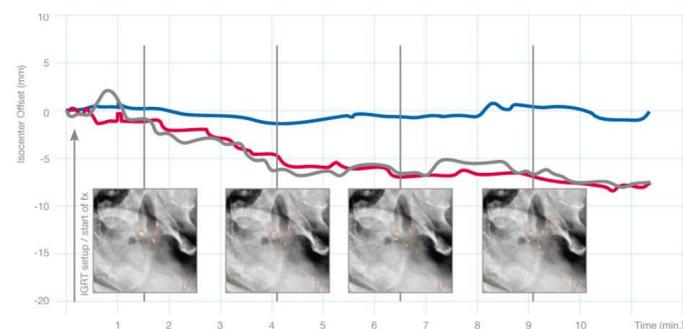


# Entwicklung von ExacTrac Dynamic

## Historische Behandlungsinnovationen



**Infrarot Positionierung**  
ExacTrac 1.0



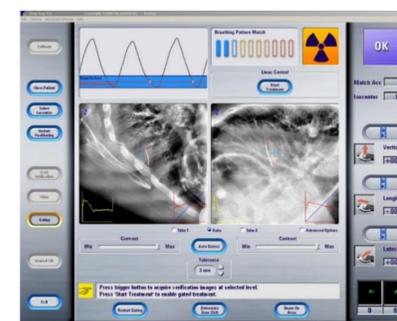
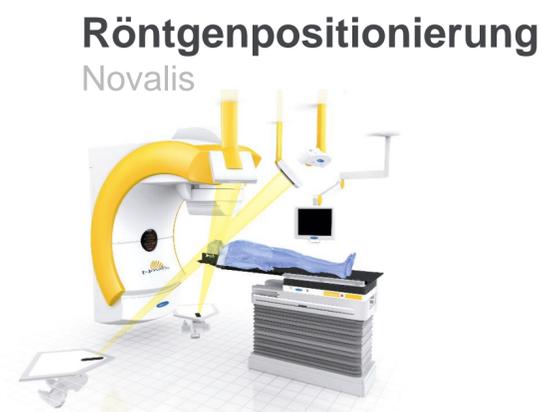
**Intrafraktionelle Verifikation**  
ExacTrac 5.0



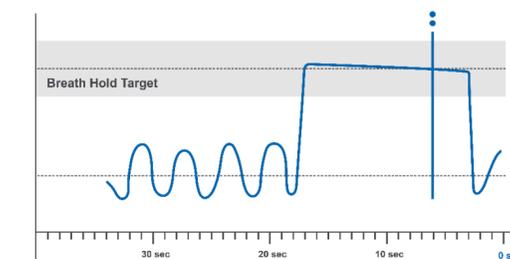
**Robotische Positionskorrektur**  
ExacTrac 6.0



**Oberflächentracking**  
ExacTrac Dynamic



**Atmungskorrelation**  
ExacTrac Dynamic

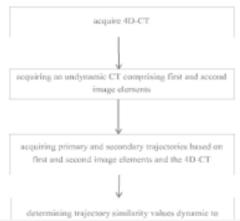


# Patente & Publikationen

United States  
**Patent Application Publication** (10) Pub. No.: US 2022/0189080 A1  
 BERLINGER et al. Jun. 16, 2022

- (54) DETERMINATION OF DYNAMIC DRRS (2013.01); G06T 2307/10081 (2013.01); G06T 2307/10124 (2013.01); G06T 2307/30241 (2013.01); A61N 5/1087 (2013.01)
- (71) Applicant: Brainlab AG, Munich (DE)
- (72) Inventors: Kajetan BERLINGER, Munich (DE); Birte DOMNIK, Munich (DE); Elha Garcia Corcos, Munich (DE); Pascal BERTRAM, Munich (DE)
- (21) Appl. No.: 17873/032
- (22) Filed: Jan. 11, 2022
- Related U.S. Application Data
- (63) Continuation of application No. 17/010,254, filed on Sep. 2, 2020, now Pat. No. 11,227,417, which is a continuation of application No. 16/075,431, filed on Aug. 3, 2018, now Pat. No. 10,776,959, filed as application No. PCT/EP2016/053291 on Feb. 16, 2016.

Publication Classification	
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G06T 11/00	(2006.01)
A61N 5/10	(2006.01)
A61B 6/00	(2006.01)
A61B 6/12	(2006.01)
A61B 6/01	(2006.01)
G16H 50/50	(2006.01)
G06T 7/20	(2006.01)
G06T 7/00	(2006.01)
U.S. Cl.	(2006.01)
G06T 11/001 (2013.01); G06T 22/1412 (2013.01); A61B 6/406 (2013.01); A61B 6/12 (2013.01); A61B 6/5228 (2013.01); A61B 6/5388 (2013.01); A61B 6/012 (2013.01); A61N 5/1089 (2013.01); G16H 50/50 (2018.01); G06T 11/008 (2013.01); G06T 7/20 (2013.01); G06T 7/0012 (2013.01); A61N 2005/1062 (2013.01); G06T 2307/10076	



## 2. Family 75787093 (US2020069972 AA)

Title  
 [EN] IRRADIATION TREATMENT PLANNING BASED ON TARGET COVERAGE REDUCTION

Abstract  
 [EN] A computer-implemented medical method of irradiation treatment planning is provided. Therein, an initial coverage volume (118) for a planning target volume (116), which is to be irradiated in an irradiation treatment with a prescribed dose, is provided. Further, at least one constraint (106, 110) indicative of an allowed dose for an organ at risk (120) is provided. Applying an initial irradiation treatment plan, an organ dose deposited in at least a partial volume of the organ at risk (120) is calculated. Based on comparing the organ dose with at least one constraint (106, 110), an amount of violation is determined. Taking into account the determined amount of violation, a reduction coverage volume is calculated for the planning target volume (116) and a virtual planning object (122) is generated based on changing a volume of the organ at risk (120), such that an overlap region (124) of the virtual planning object (122) and the planning target volume (116) corresponds to the reduction coverage volume. By removing at least a part of the overlap region (124) from the planning target volume (116), an optimized planning target volume (132) is generated.

International Class: A61N5/10  
 Cooperative Patent Class: A61N5/1031; A61N5/1069  
 Family Information



## 3. Family 31308755 (US2004242991 AA)

Title  
 [EN] METHOD FOR DETERMINING DOSAGE WHEN PLANNING RADIOTHERAPY AND/OR RADIOSURGERY PROCEDURES

Abstract  
 [EN] A method for determining dosage when planning radiotherapy and/or radiosurgery procedures can include imaging an irradiation target area using an imaging method, which can differentiate functional and/or biologically active regions of the irradiation target area. Ascertained activity values can be allocated to individual regions of the imaged irradiation target and irradiation doses can be assigned to the regions in accordance with the activity values. A nominal dosage distribution, which can be ascertained from the irradiation dosages for the regions, can be used as an input value for treatment planning.

International Class: A61N5/10; A61B5/05  
 Cooperative Patent Class: A61N5/103  
 US Class: 600/407  
 Family Information

# 30 Patentfamilien mit 60 Patenten



# „ExacTrac Dynamic“

An evaluation of gating window size, delivery method, and composite field dosimetry of respiratory-gated IMRT

Abstract  
 [EN] A method and apparatus (10) for determining a displacement of an internal object (104) disposed in a body (102) of a patient (100) are provided. The method comprises positioning an arrangement (12) of electrodes (16) of a capacitive sensor (12) adjacent to a body part (103) of a patient (100), such that each electrode (16) is spaced apart from the body part (103), wherein the body part at least partly encloses the internal object (104) of the patient; providing, with the capacitive sensor (12), a plurality of sensor signals, wherein each sensor signal is indicative of a capacitance in a vicinity of the treatment volume (14) of the arrangement (12) of electrodes (16); determining a set of capacitance values for at least a subset of the electrodes (16) of the arrangement (12) of electrodes based on processing the plurality of sensor signals; and determining a displacement of the internal object (104) with respect to the body part (103) based on comparing the determined set of capacitance values with a set of reference capacitance values.

International Class: A61B5/00; A61B5/053; A61B5/06  
 Cooperative Patent Class: A61B2562/0214; A61B5/0064; A61B5/053; A61B5/053  
 Family Information

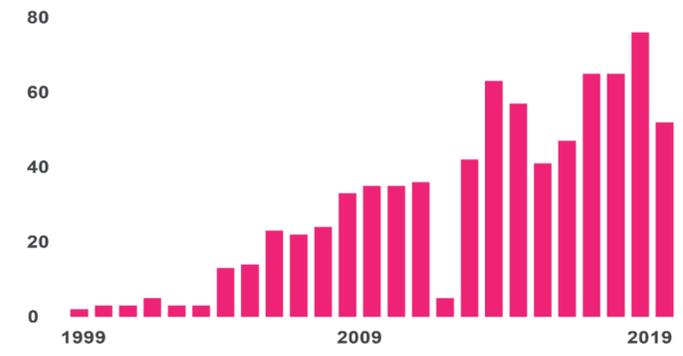
1. Family 85486969 (WO21115563 A1)

Title  
 [EN] METHOD AND APPARATUS FOR DETERMINING INTERNAL ORGAN SHIFT

Abstract  
 [EN] A method and apparatus (10) for determining a displacement of an internal object (104) disposed in a body (102) of a patient (100) are provided. The method comprises positioning an arrangement (12) of electrodes (16) of a capacitive sensor (12) adjacent to a body part (103) of a patient (100), such that each electrode (16) is spaced apart from the body part (103), wherein the body part at least partly encloses the internal object (104) of the patient; providing, with the capacitive sensor (12), a plurality of sensor signals, wherein each sensor signal is indicative of a capacitance in a vicinity of the treatment volume (14) of the arrangement (12) of electrodes (16); determining a set of capacitance values for at least a subset of the electrodes (16) of the arrangement (12) of electrodes based on processing the plurality of sensor signals; and determining a displacement of the internal object (104) with respect to the body part (103) based on comparing the determined set of capacitance values with a set of reference capacitance values.

International Class: A61B5/00; A61B5/053; A61B5/06  
 Cooperative Patent Class: A61B2562/0214; A61B5/0064; A61B5/053; A61B5/053  
 Family Information

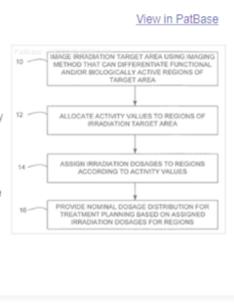
# 175 Publikationen „ExacTrac“



## 5. Family 52443815 (US2013324785 AA)

Title  
 [EN] METHOD AND APPARATUS FOR PLANNING OR CONTROLLING A RADIATION TREATMENT

Abstract  
 [EN] The present invention relates to method for generating planning data or control data for a radiation treatment, comprising the following steps: acquiring segmented data of an object which contains a treatment volume and a non-treatment volume; modelling at least some or all of the volume or surface of the treatment volume as a source of light or rays exhibiting a predefined or constant initial intensity; modelling the non-treatment volume as comprising volumetric elements or voxels which each exhibit an individually assigned feature of attenuation or transparency value (tmm@t@tmax) for the light or rays which feature is assigned to the light or ray or which attenuation or transparency maintains or reduces the intensity of the light or ray as it passes through the respective volumetric element or voxel, wherein the feature of attenuation or transparency value is individually assigned to each volumetric element or voxel of the non-treatment volume; defining a map



SUPPLEMENTAL MATERIAL

Quality and Safety Considerations in Stereotactic Radiosurgery and Stereotactic Body Radiation Therapy

Timothy D. Solberg, Ph.D., James M. Balzer, Ph.D., Stanley H. Benedict, Ph.D., Benedick A. Francis, Ph.D., Ernie Kenigsmuth, M.D., Curtis Williamson, M.D., Todd Pawlicki, Ph.D., Louis Portier, M.D., Yoshya Yamada, M.D.

Abstract  
 [EN] This document is intended to provide a framework for the development of quality and safety considerations in stereotactic radiosurgery and stereotactic body radiation therapy. The document is intended to provide a framework for the development of quality and safety considerations in stereotactic radiosurgery and stereotactic body radiation therapy. The document is intended to provide a framework for the development of quality and safety considerations in stereotactic radiosurgery and stereotactic body radiation therapy.

# 734 Publikationen zu „Lung Stereotactic Radiotherapy“

5. Family 52443815 (US2013324785 AA)

Title  
 [EN] METHOD AND APPARATUS FOR PLANNING OR CONTROLLING A RADIATION TREATMENT

Abstract  
 [EN] The present invention relates to method for generating planning data or control data for a radiation treatment, comprising the following steps: acquiring segmented data of an object which contains a treatment volume and a non-treatment volume; modelling at least some or all of the volume or surface of the treatment volume as a source of light or rays exhibiting a predefined or constant initial intensity; modelling the non-treatment volume as comprising volumetric elements or voxels which each exhibit an individually assigned feature of attenuation or transparency value (tmm@t@tmax) for the light or rays which feature is assigned to the light or ray or which attenuation or transparency maintains or reduces the intensity of the light or ray as it passes through the respective volumetric element or voxel, wherein the feature of attenuation or transparency value is individually assigned to each volumetric element or voxel of the non-treatment volume; defining a map



ACR-ASTRO PRACTICE GUIDELINE FOR THE PERFORMANCE OF STEREOTACTIC RADIOSURGERY

Abstract  
 [EN] This document is intended to provide a framework for the development of quality and safety considerations in stereotactic radiosurgery. The document is intended to provide a framework for the development of quality and safety considerations in stereotactic radiosurgery. The document is intended to provide a framework for the development of quality and safety considerations in stereotactic radiosurgery.

An evaluation of gating window size, delivery method, and composite field dosimetry of respiratory-gated IMRT

Abstract  
 [EN] A method and apparatus (10) for determining a displacement of an internal object (104) disposed in a body (102) of a patient (100) are provided. The method comprises positioning an arrangement (12) of electrodes (16) of a capacitive sensor (12) adjacent to a body part (103) of a patient (100), such that each electrode (16) is spaced apart from the body part (103), wherein the body part at least partly encloses the internal object (104) of the patient; providing, with the capacitive sensor (12), a plurality of sensor signals, wherein each sensor signal is indicative of a capacitance in a vicinity of the treatment volume (14) of the arrangement (12) of electrodes (16); determining a set of capacitance values for at least a subset of the electrodes (16) of the arrangement (12) of electrodes based on processing the plurality of sensor signals; and determining a displacement of the internal object (104) with respect to the body part (103) based on comparing the determined set of capacitance values with a set of reference capacitance values.

1. INTRODUCTION

The advent of intensity modulated radiotherapy (IMRT) has allowed for dose escalation to the target volume and a reduction in dose to the surrounding normal tissue.<sup>1</sup> More precise radiotherapy techniques require more accurate target detection as well as knowledge of the target position. In recent years, the design of the gating system is described below. We have also designed a phantom capable of motion simultaneously in two dimensions. The phantom is capable of motion based on an arbitrary input function.

Balcer et al. have described the correlation of diaphragm motion and target motion within the lung.<sup>2</sup> Furthermore, Lujan et al. developed an analytical model of liver motion due to respiration.<sup>3</sup> The model assumes a fixed period and amplitude of motion. We have adapted this model for use as a motion function for this study.

II. METHODS

A. IMRT system

The gating system of this study was based on a commercial patient positioning system (ExacTrac<sup>®</sup>, BrainLAB AG, Heimstetten, Germany) that utilizes three-dimensional laser detection as well as combined patient positioning and gating functions. The design of the gating system is described below. We have also designed a phantom capable of motion simultaneously in two dimensions. The phantom is capable of motion based on an arbitrary input function.

Balcer et al. have described the correlation of diaphragm motion and target motion within the lung.<sup>2</sup> Furthermore, Lujan et al. developed an analytical model of liver motion due to respiration.<sup>3</sup> The model assumes a fixed period and amplitude of motion. We have adapted this model for use as a motion function for this study.

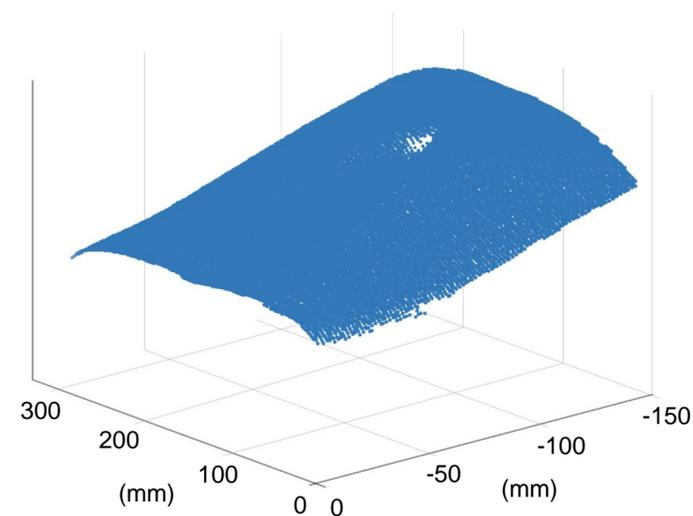




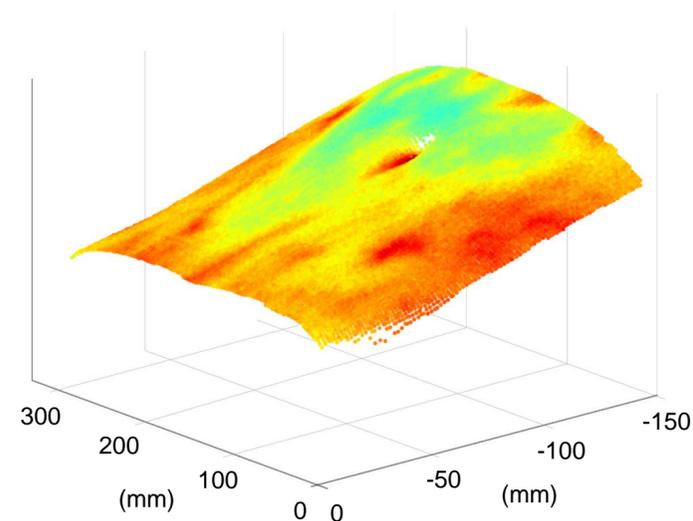
# Zusammenwirken zahlreicher Innovationen

## 4D Thermal Tracking

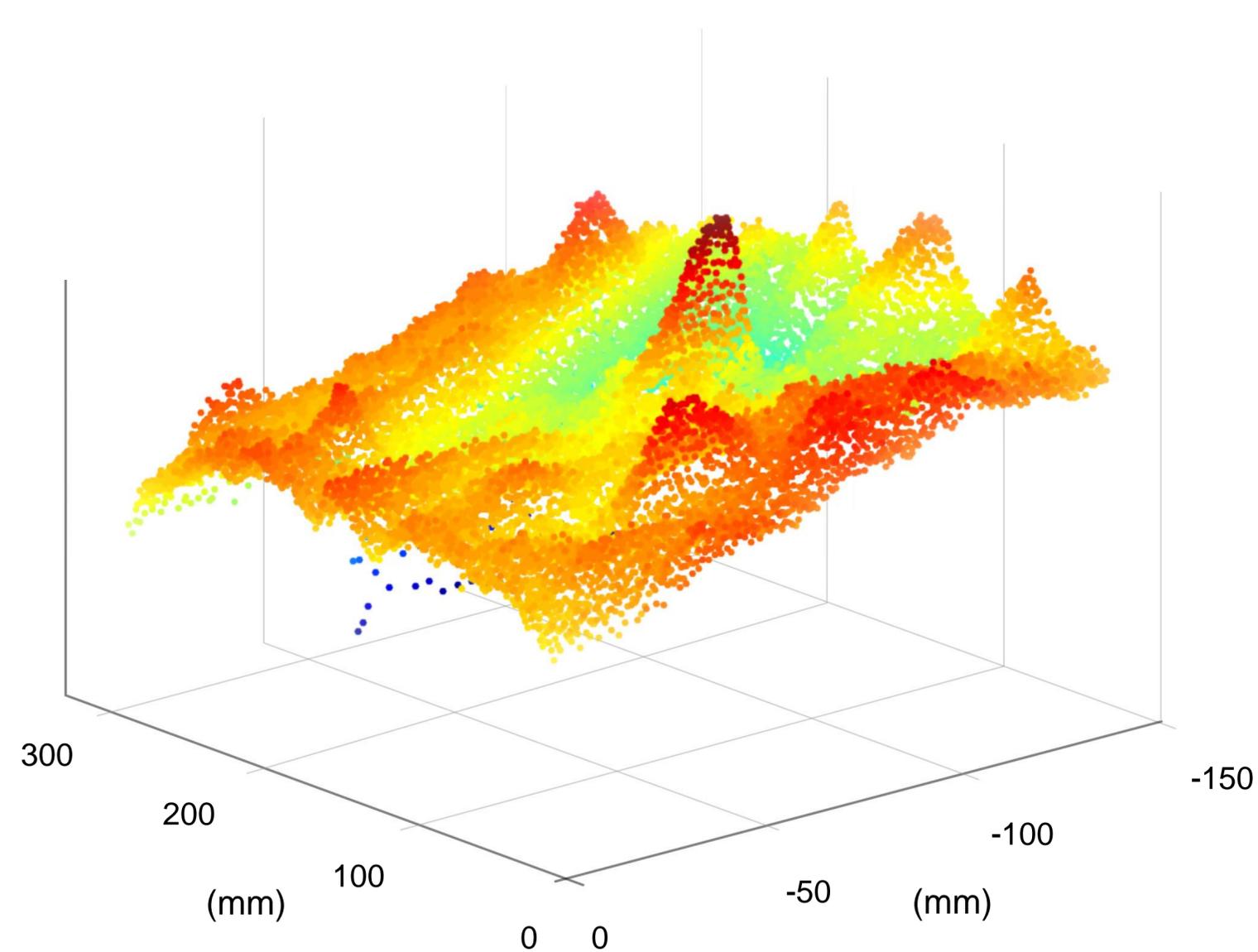
### Oberflächen-Tracking



### Thermo-Tracking



### Kombiniertes 4D Tracking





Menu

DIBH | Navigation

90 kV 10 mAs

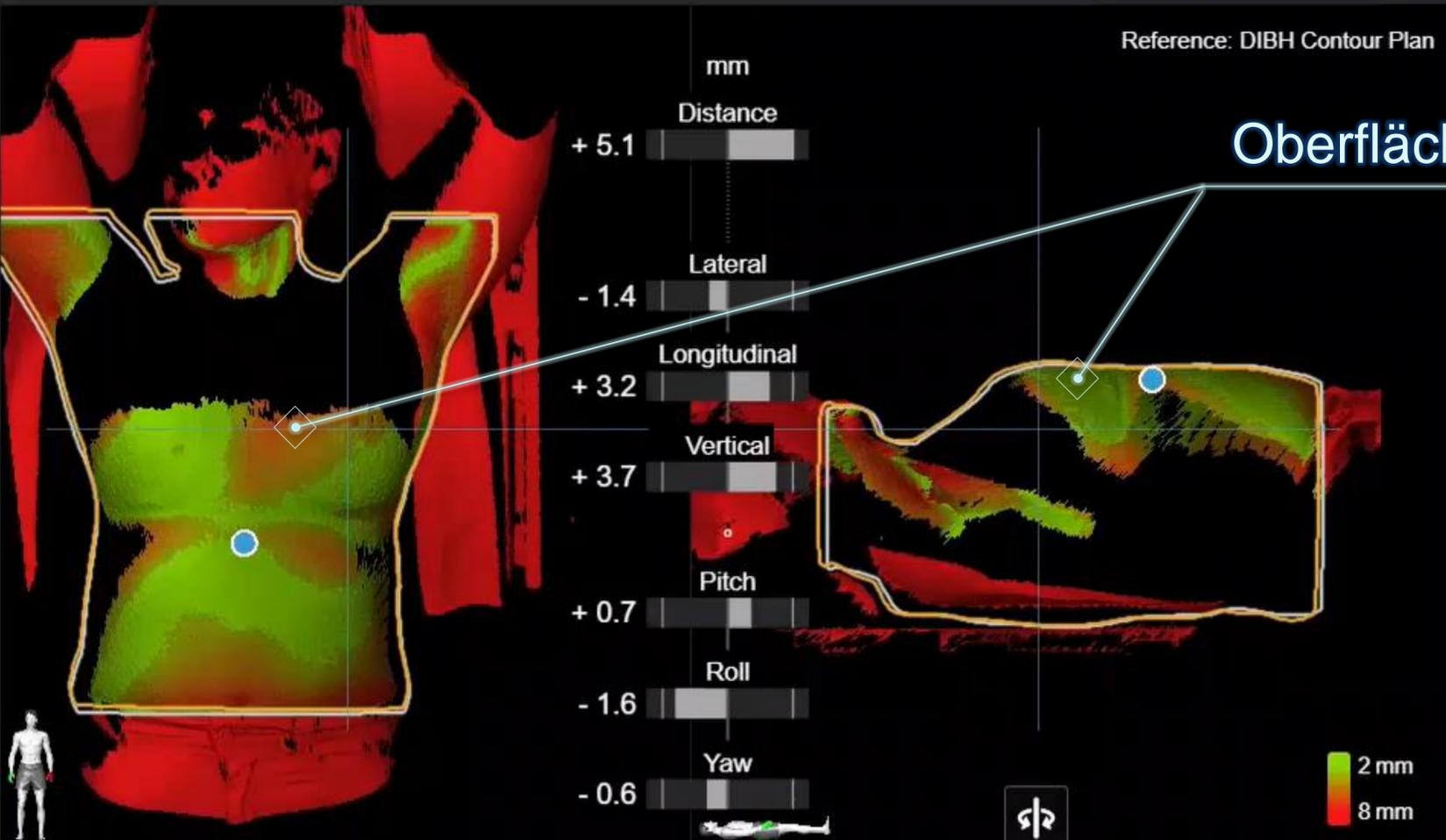
1 ● 2

90 kV 10 mAs

Beam: sc1

Couch: 0°

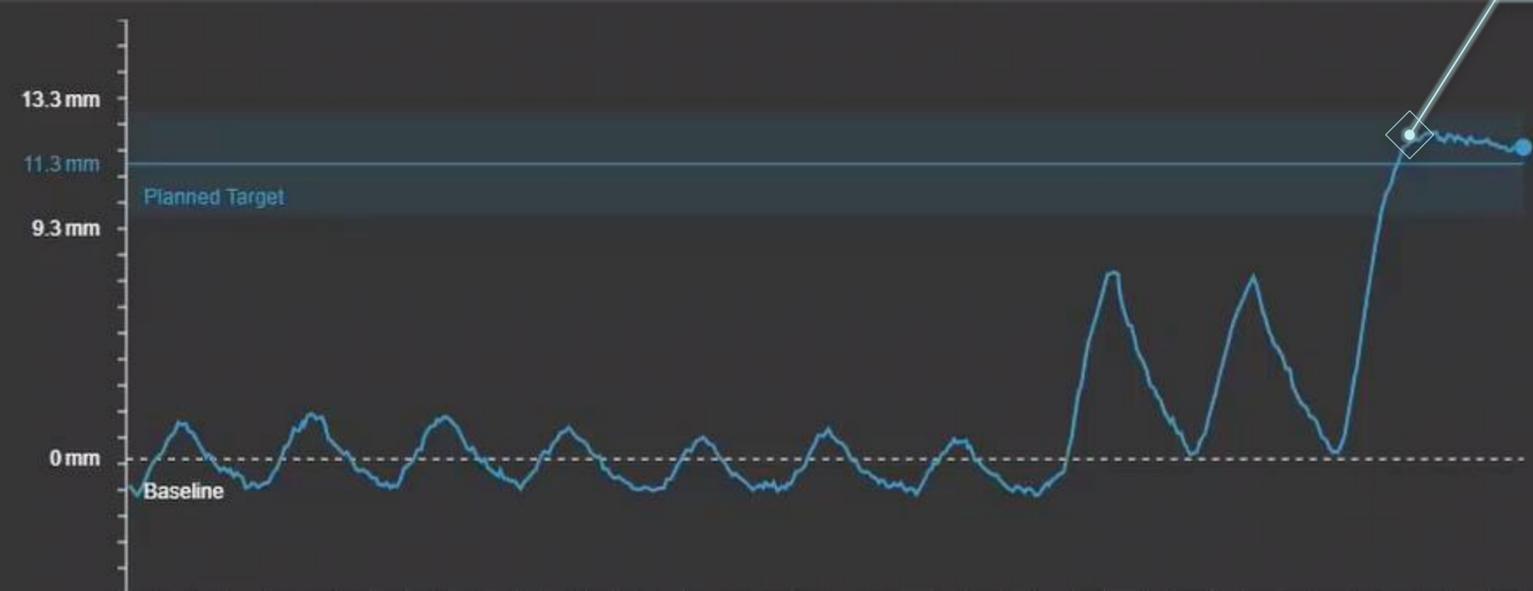
Gantry: +179.0° - +303.0°



### Röntgenaufnahmen

Acquire X-rays via console

### Respiratory Signal and Levels



### X-ray Generator Settings

Generator 1 & 2

Link generators

90kV

10mAs



Menu

# ExacTrac Dynamic Treatment Application



DIBH Patient Monitoring

90 kV 10 mAs

1 ● ○ 2

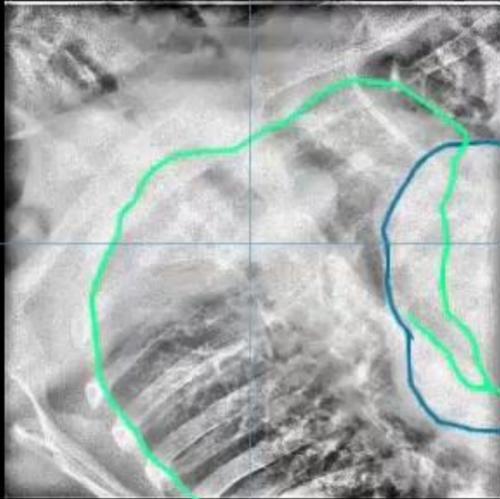
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Beam: sc1

Couch: 0°

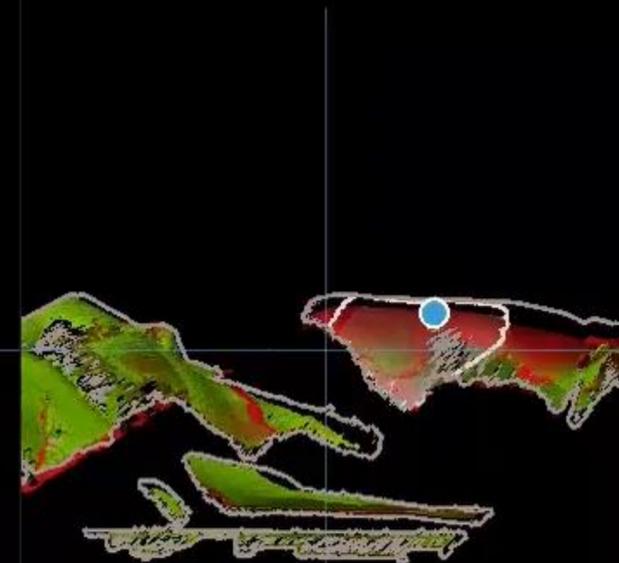
Gantry: +179.0° - +303.0°

Display Options ▾



Tracking Area  
2 mm  
8 mm

Reference: DIBH Contour Today



mm

Distance + 12.2

Lateral + 4.5

Longitudinal - 6.0

Vertical - 9.6

Pitch + 0.2

Roll + 0.4

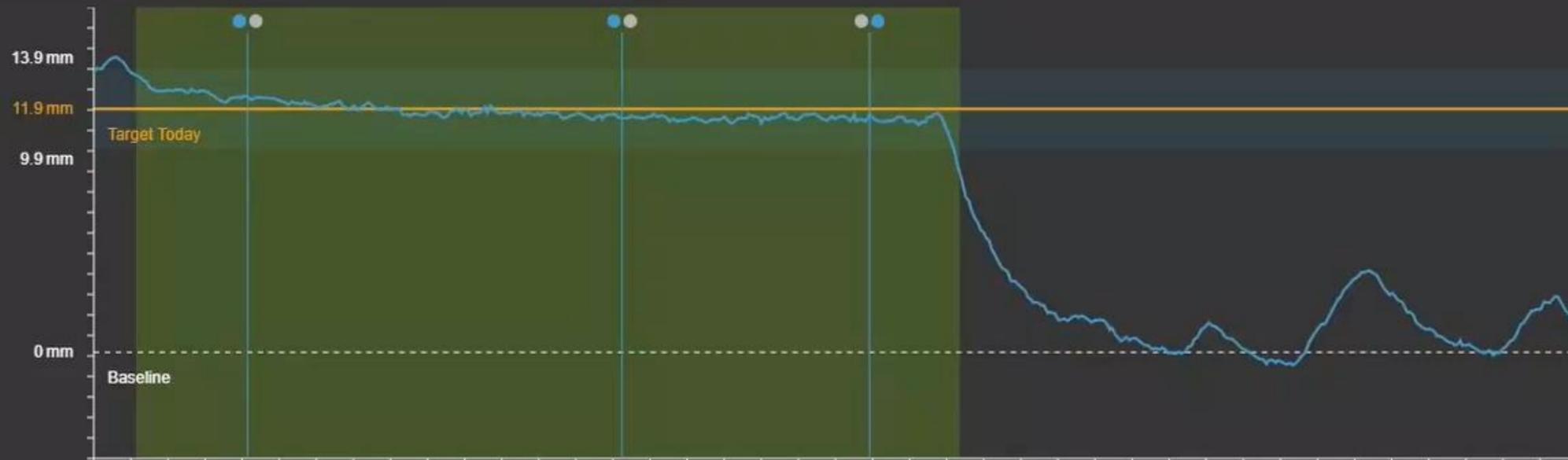
Yaw - 0.6

Gantry Position



Angle: 330°

Respiratory Signal and Levels



DIBH Gating Status

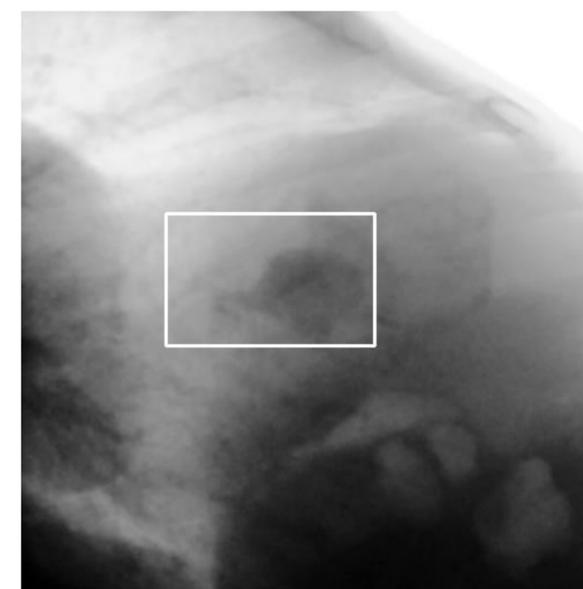
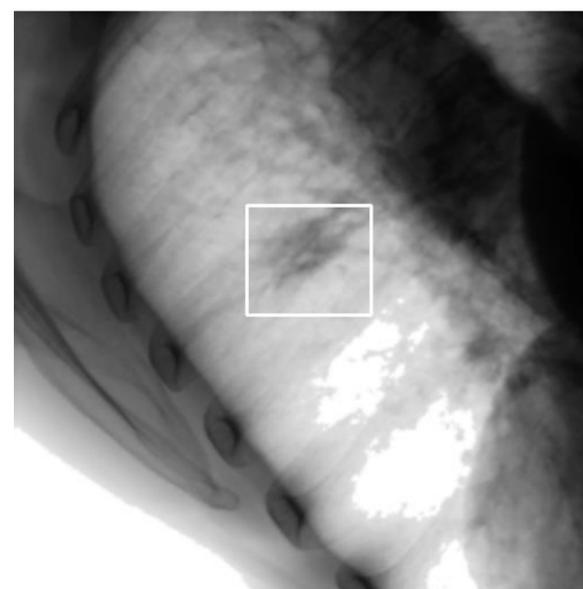
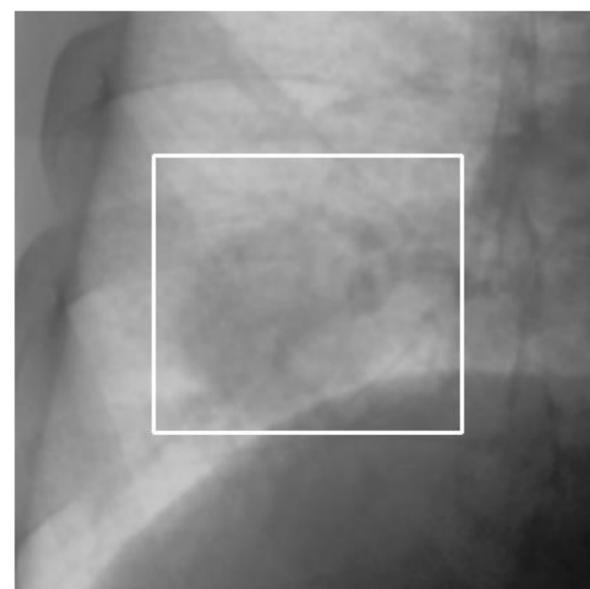
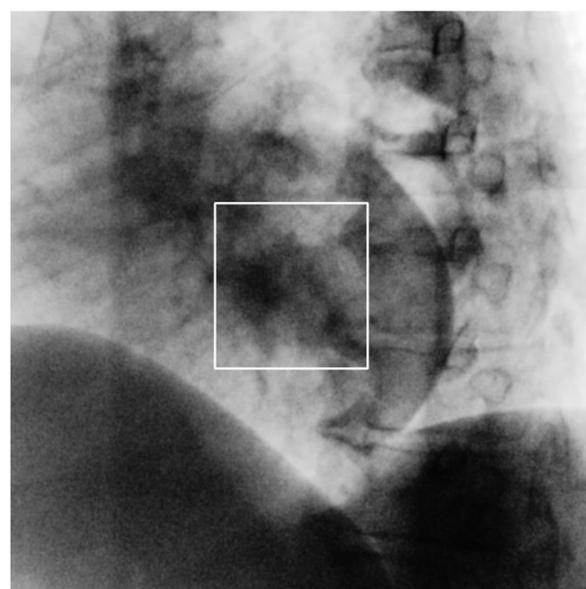
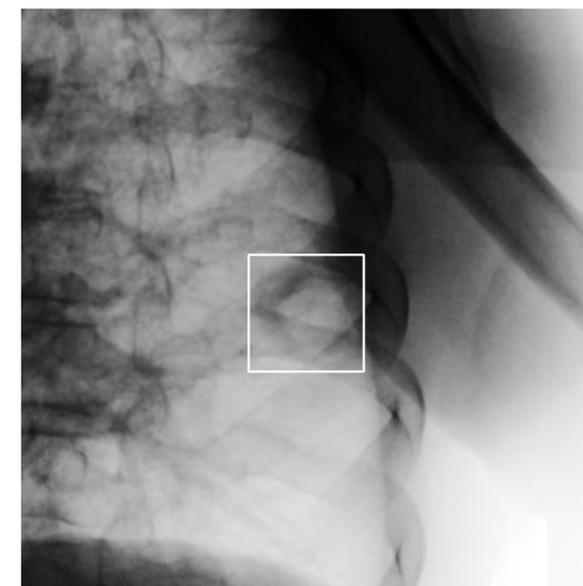
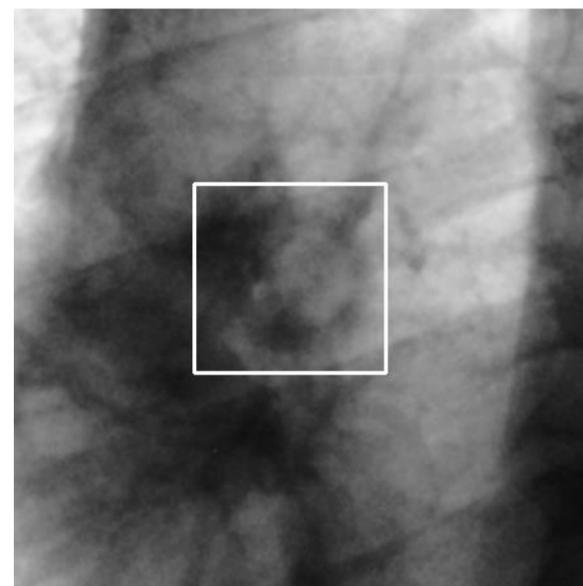
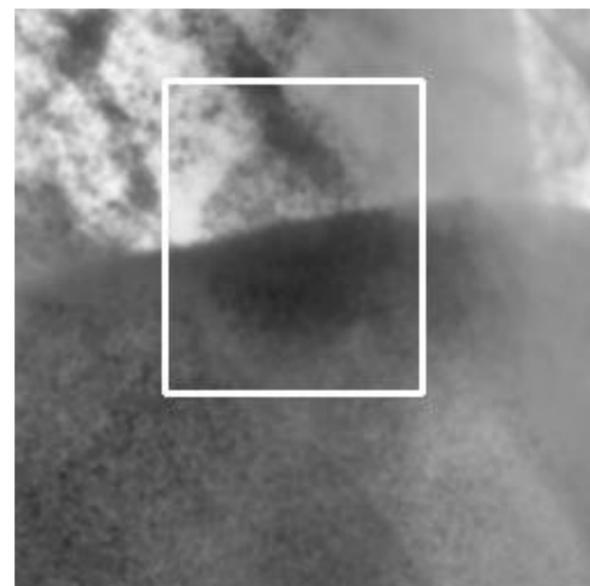
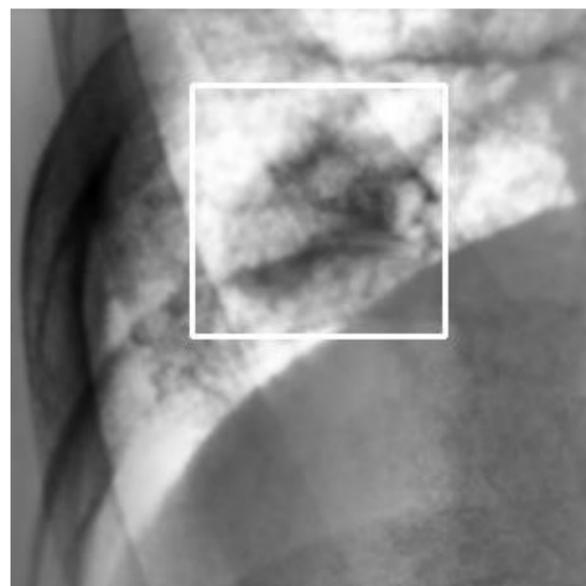


Outside DIBH Gating Window

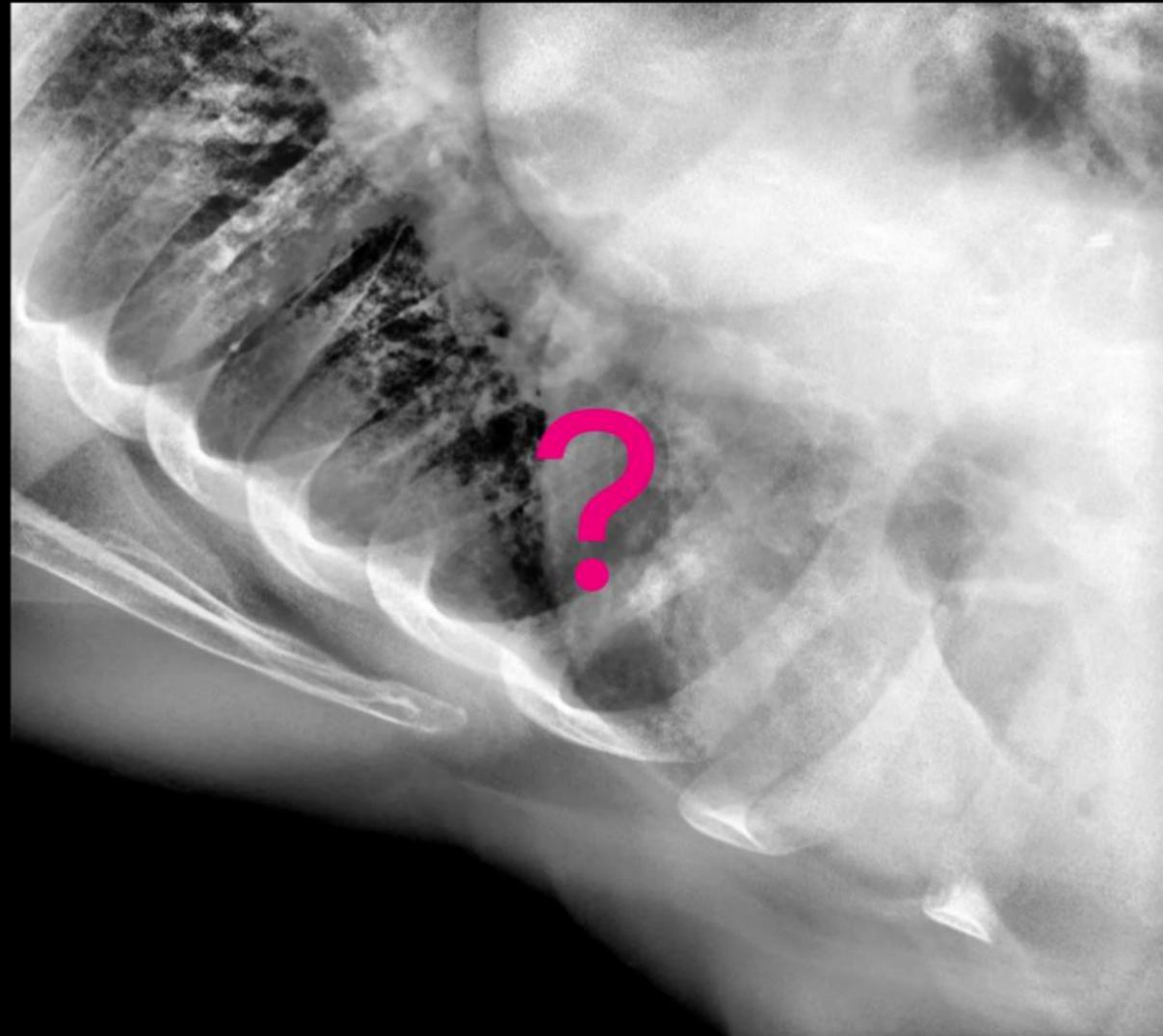
Surface out of tolerance



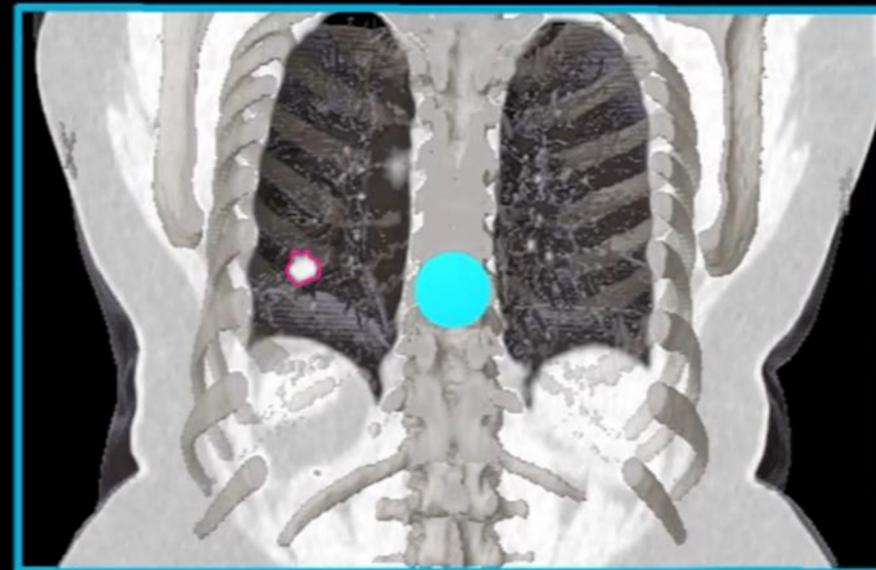
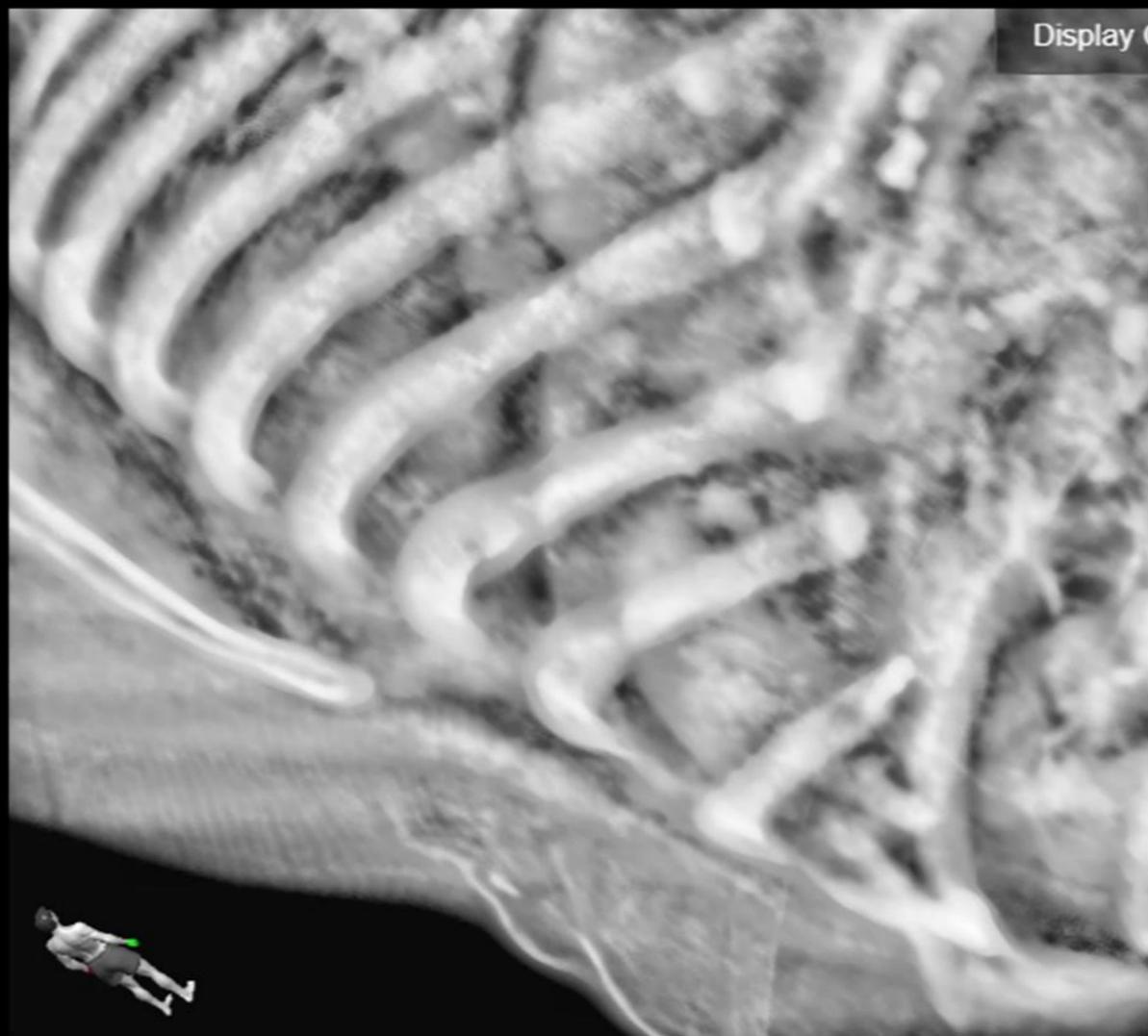
## Erfassung der Tumorbewegung

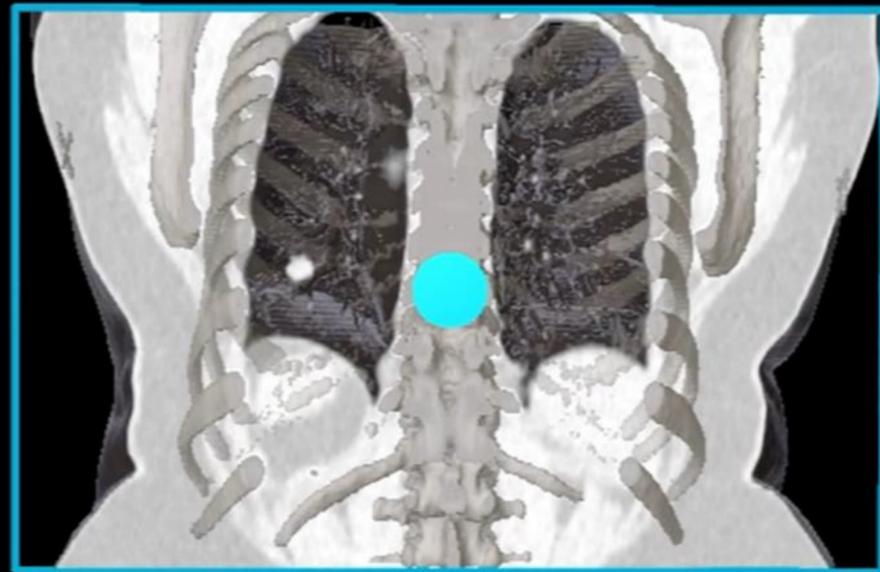


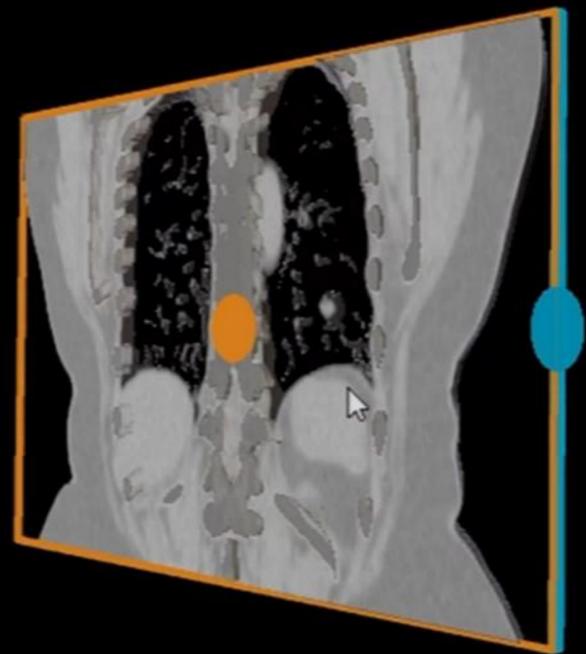
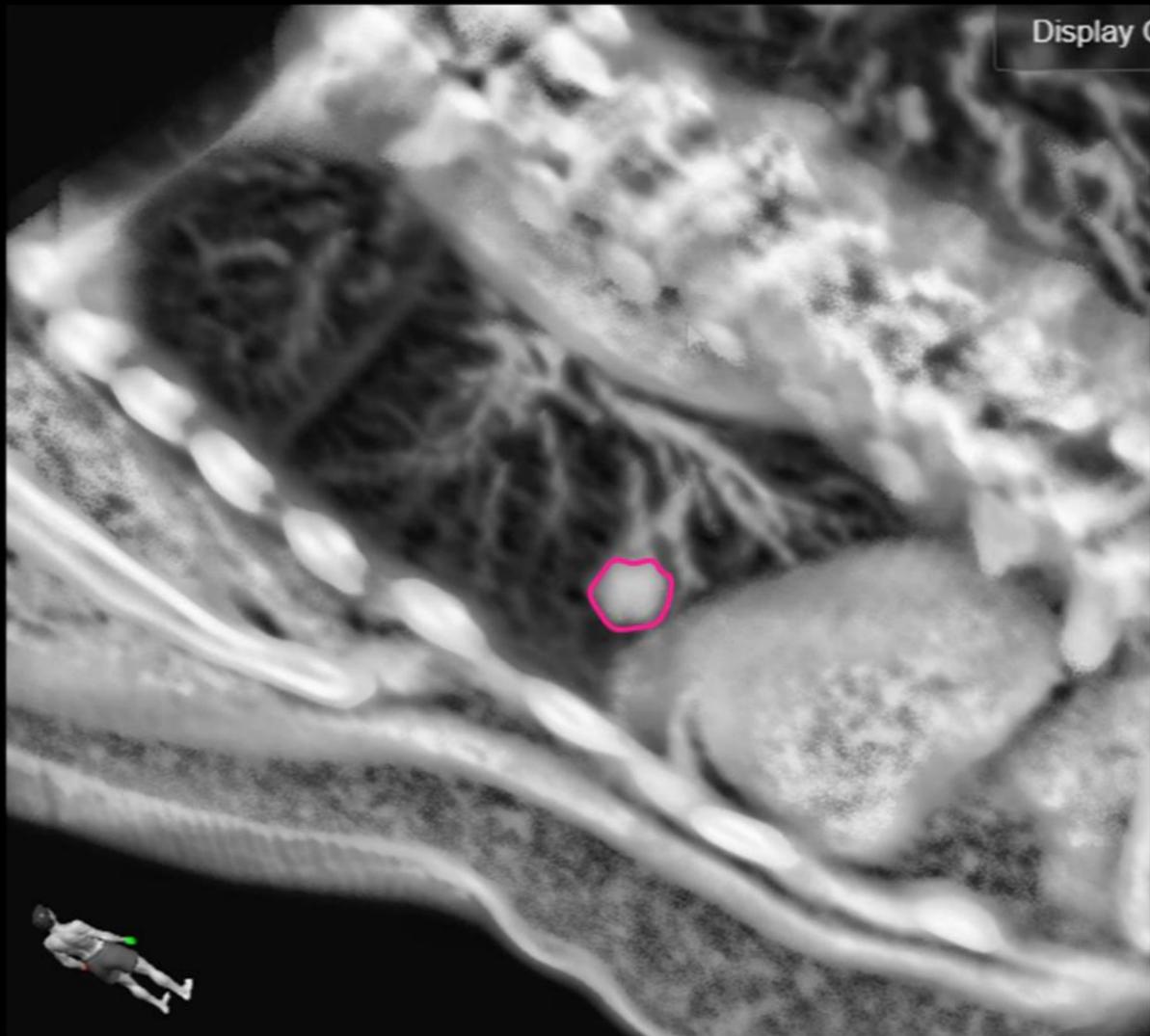


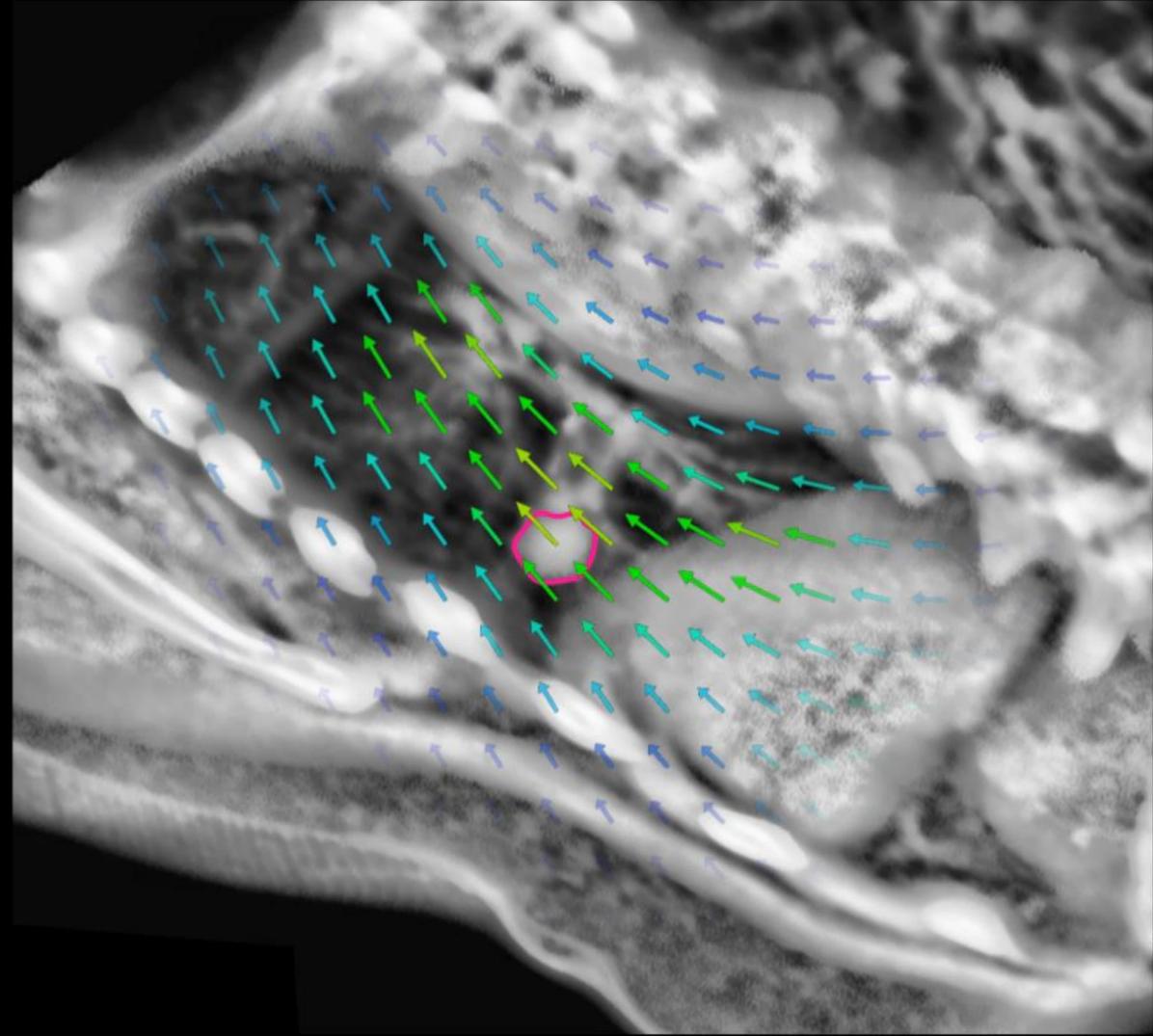


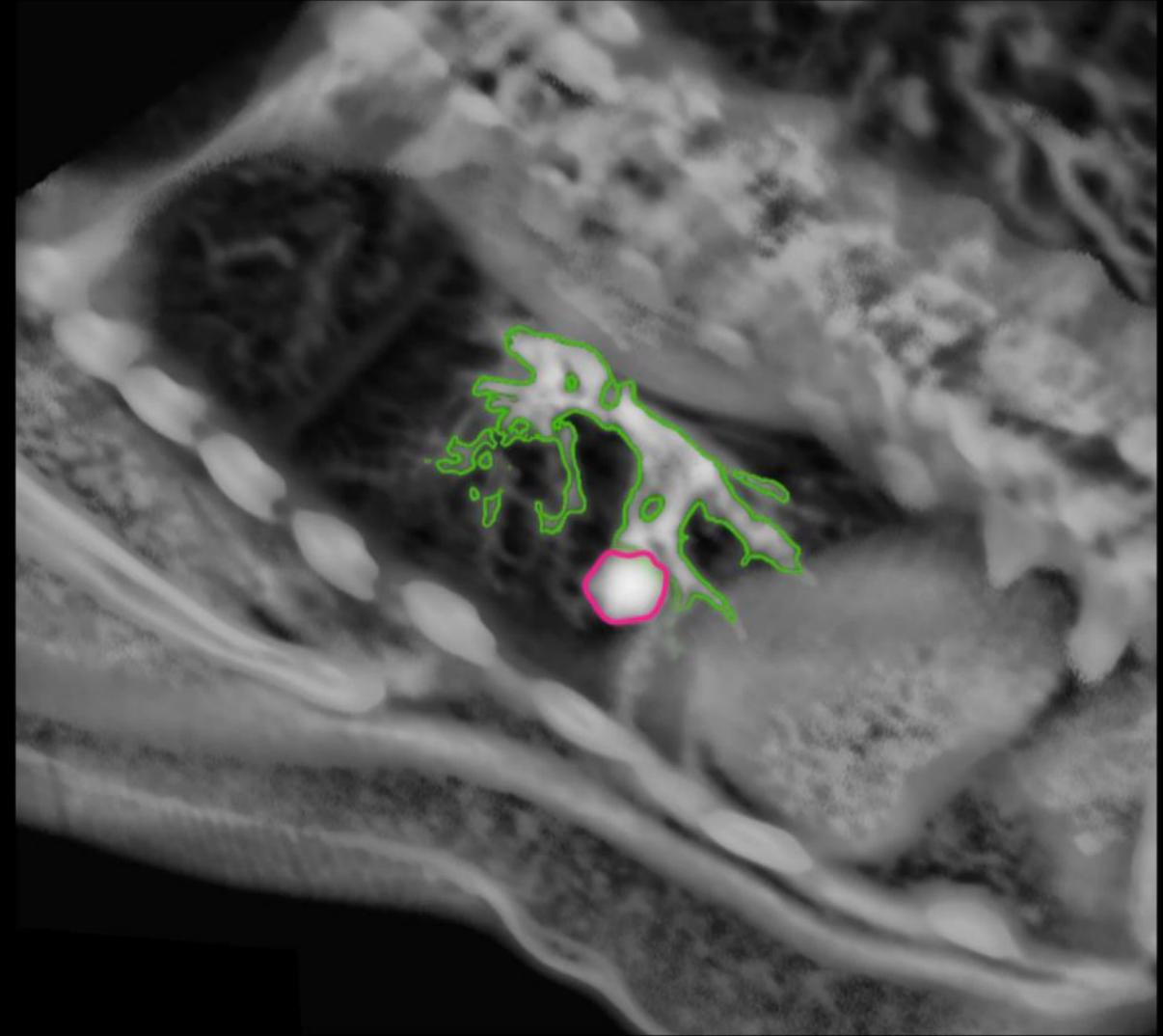










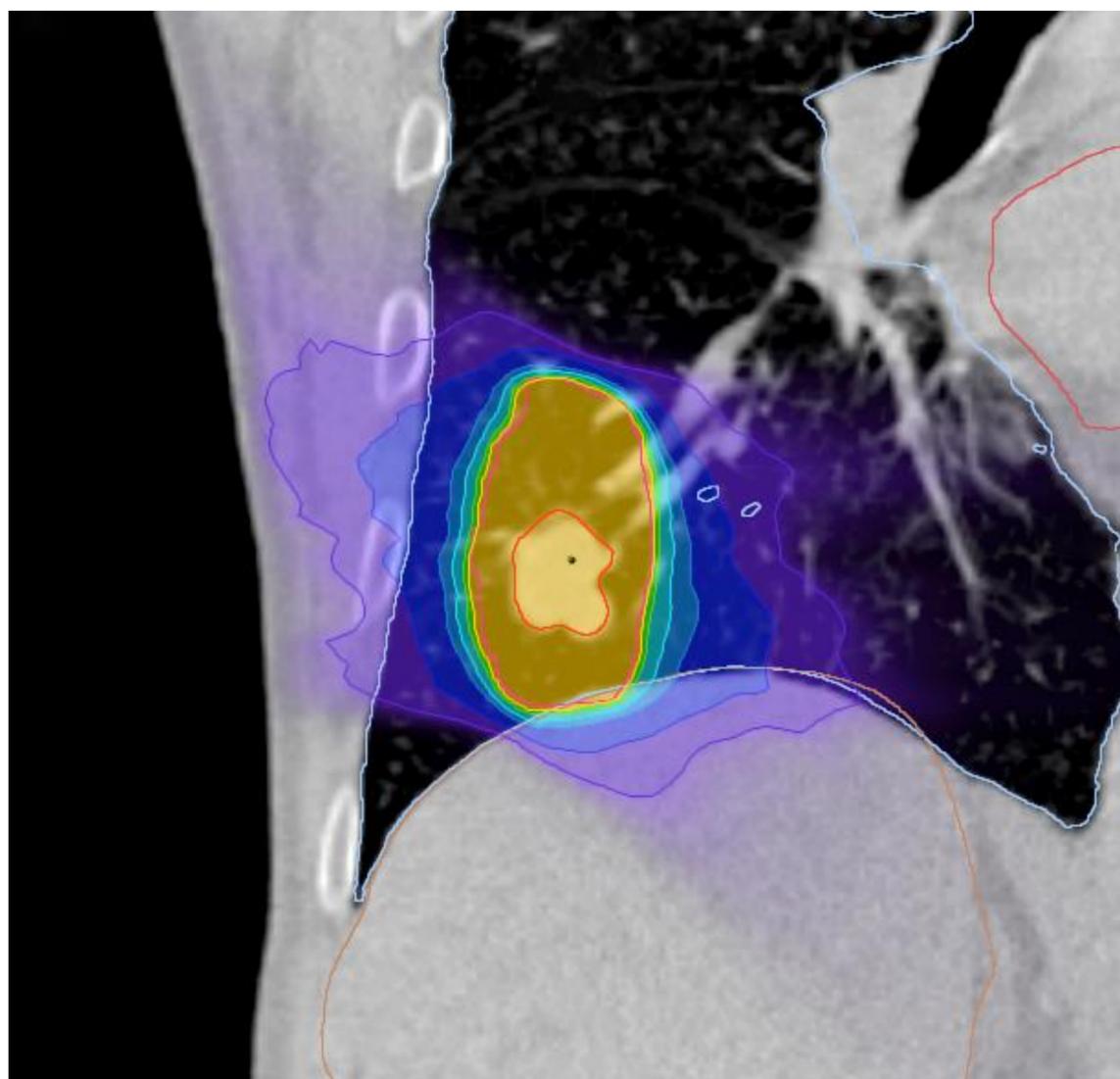




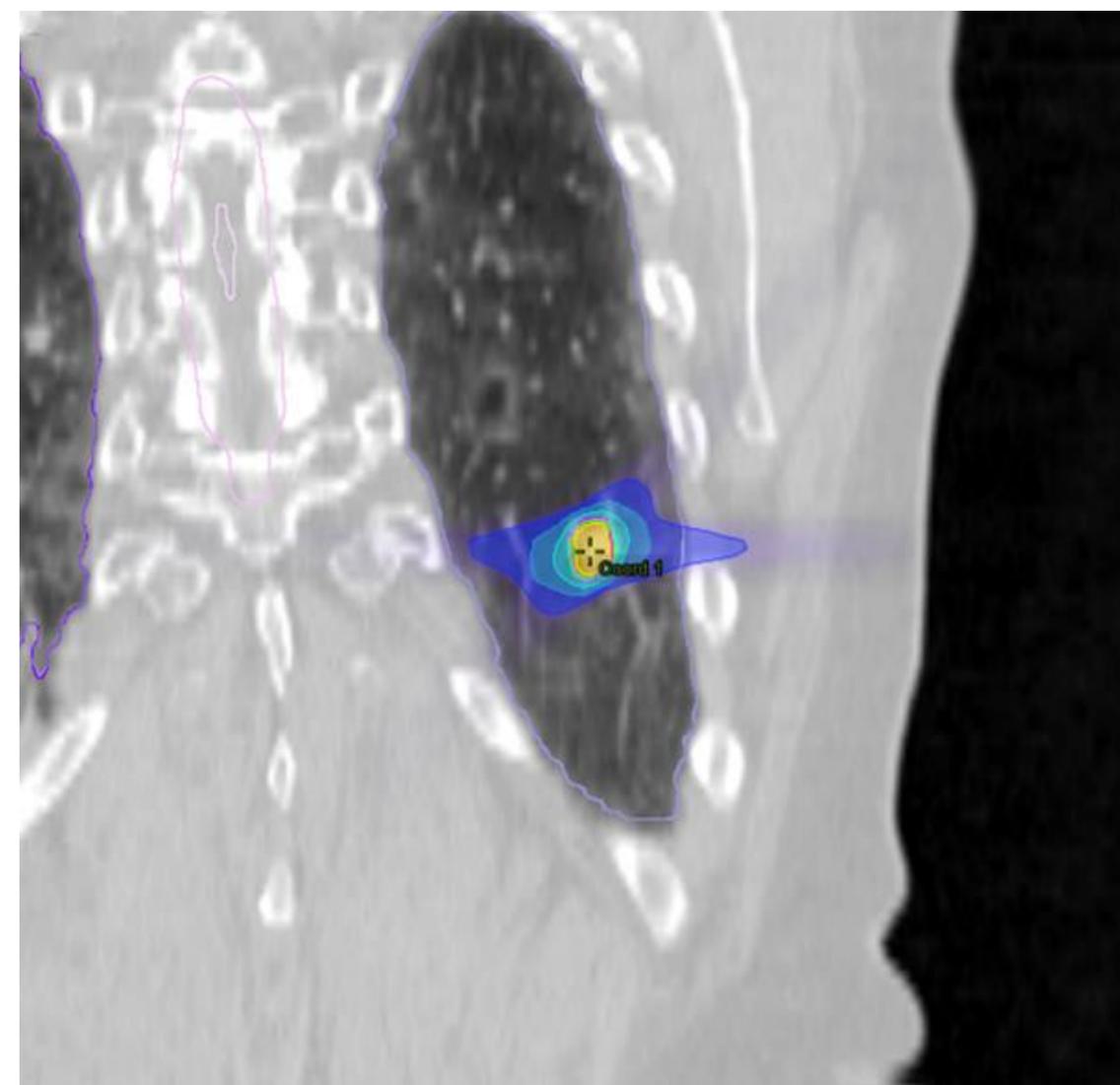
## Dosisverteilung

Hohe Dosisbelastung limitiert Einsatzmöglichkeiten

Status Quo



Ziel



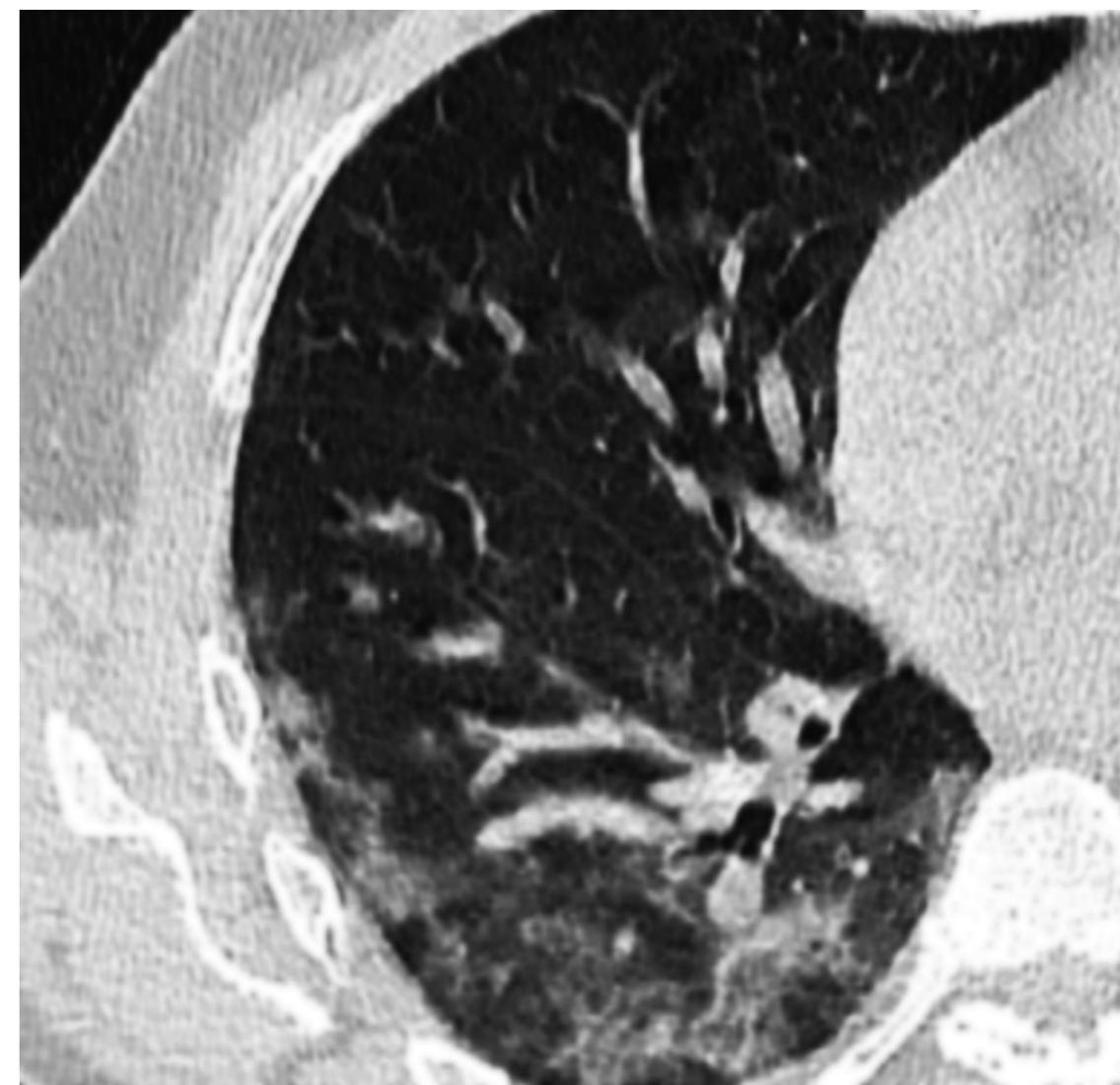


## Bewahrung von Lungengewebe post-COVID

Gesund



COVID-19 

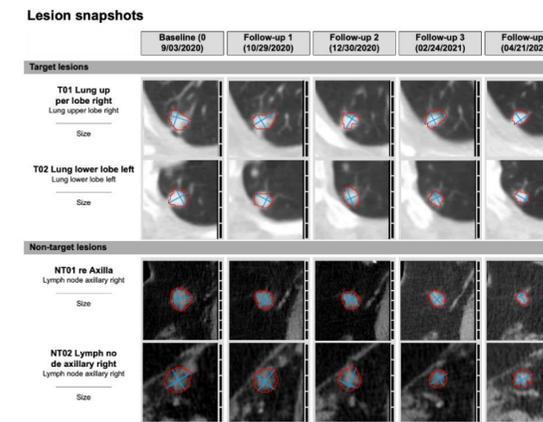
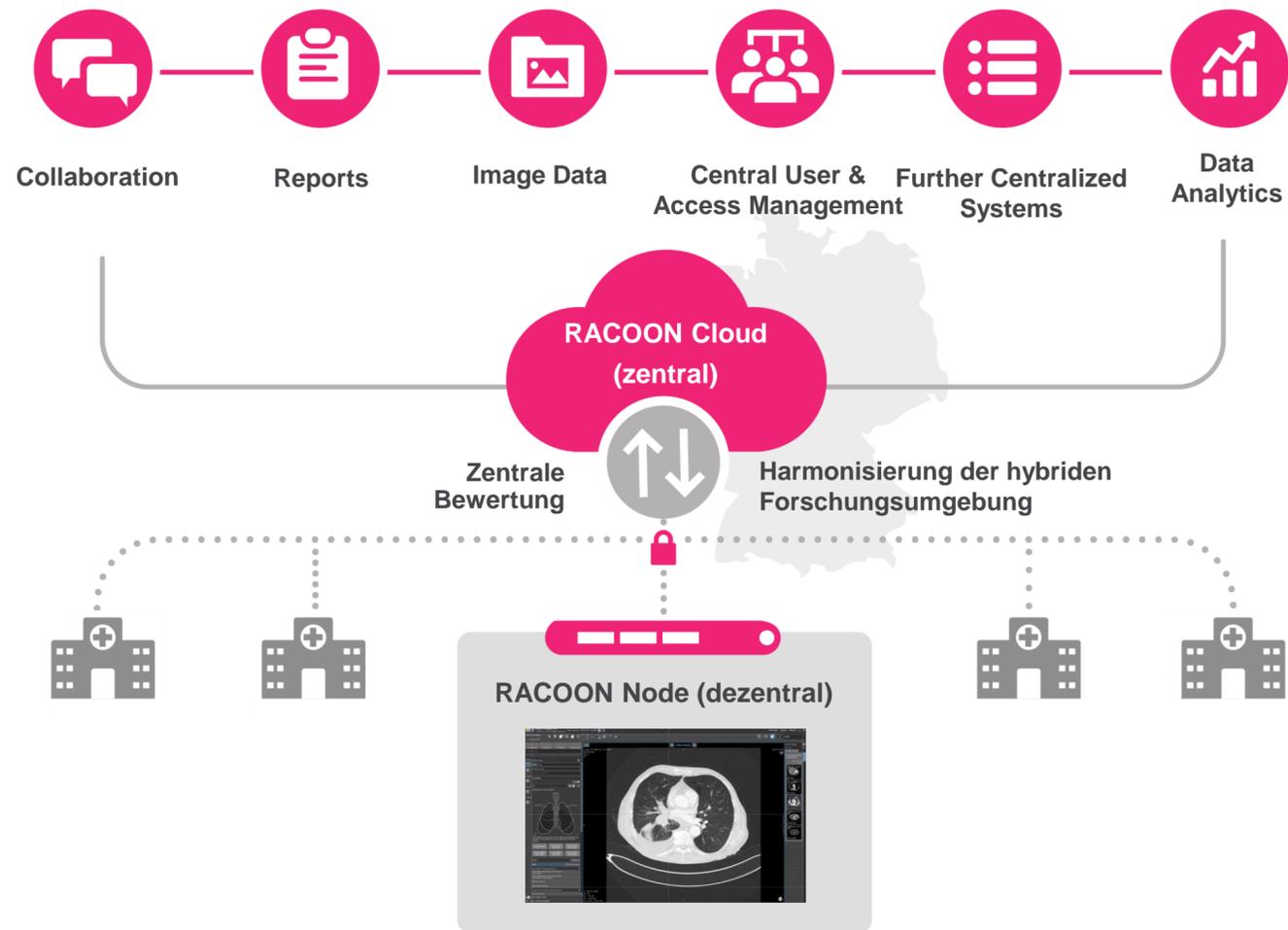






# Quantifizierung des Therapieerfolgs

## Einzigartig, granulares Register strukturierter Daten



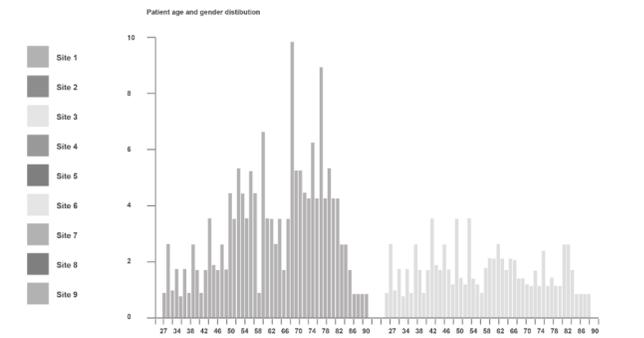
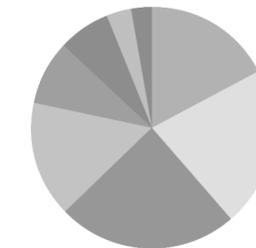
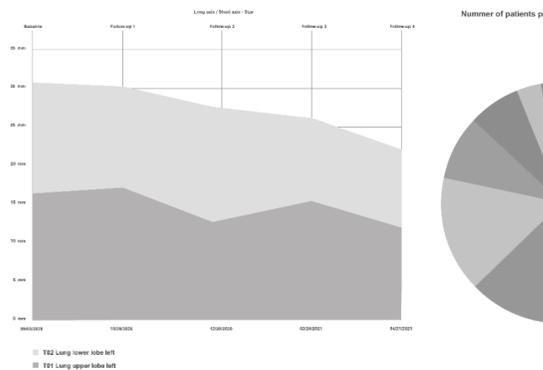
**COVID-19 Trial report - 03/13/2020**

**Overall assessment**  
 Diagnostic: Pulmonary findings consistent with COVID infection  
 High resolution CT scan: Yes  
 Antibody assay status: Not performed  
 Clinical symptoms: Onset of clinical symptoms: 02/10/2020

**Classification**  
 Immunocompromised: No  
 Malignant/diagnostic disease: No  
 Tobacco smoking: Current  
 Chronic obstructive pulmonary disease: No  
 Other lung disease: No  
 Hypertension: No  
 Cancer disease: No  
 Chronic liver disease: No  
 Diabetes: No  
 Other comorbidities: Trigeminal neuralgia

**Disease overview**  
 COVID-19 compatible radiological signs  
 Distribution pattern: Peripheral  
 Laterality of lung lobe involvement: Bilateral (predominant ipsilateral involvement)  
 Lung lobes with Ground glass opacities (GGO): 1 (lower) present, Lung upper lobe right, Lung lower lobe left, Lung lower lobe right  
 Lung lobes with GGO with consolidation: 1 (lower) present, Lung lower lobe left, Lung lower lobe right  
 Lung lobes with GGO with interlobular septal thickening: 3 (lower) present, Lung lower lobe left, Lung lower lobe right, Lung lower lobe right  
 Lung lobes with GGO with subpleural septal thickening: 3 (lower) present, Lung lower lobe left, Lung lower lobe left, Lung lower lobe right  
 General pulmonary radiological findings: Are there any other pulmonary radiological findings?: No  
 Clinical chemistry: White blood cell count: Normal, Lymphocyte count: Normal, Platelet count: Normal, C-reactive protein: Increased, Other laboratory parameter: LDH, GOT, GPT elevated

**Demographic information**  
 Age: 41 (M), Sex: Male  
 History of exposure to infection: Contact history: Present  
 Date of contact with infected persons: 03/10/2020  
 Detailed medical history: Unremarkable  
 Exposure to high-risk geographic areas: Not present  
 Diagnosis: COVID-19  
 Other diagnostic assays: No



# Luftfahrt



**2,1%**  
CO<sub>2</sub>e

# Gesundheitsbranche



**4,4%**  
CO<sub>2</sub>e

# Schifffahrt



**2,9%**  
CO<sub>2</sub>e

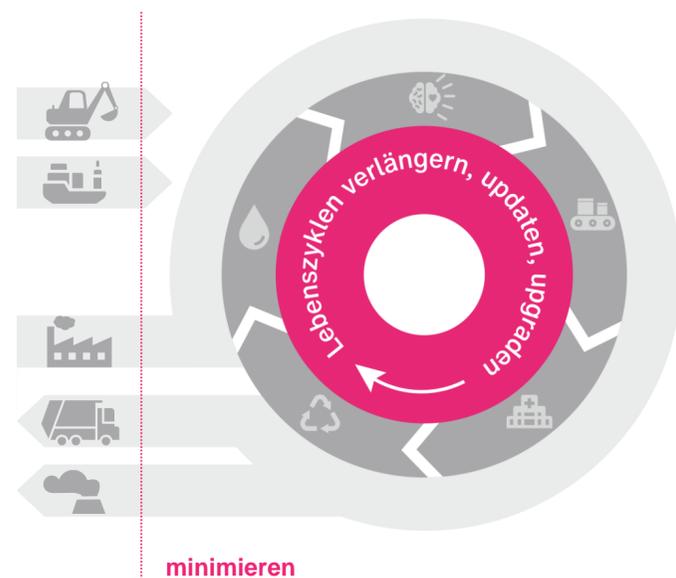
Aviation Benefits Beyond Borders (2018): Powering global economic growth, employment, trade links, tourism and support for sustainable development through air transport. [https://aviationbenefits.org/media/167517/aw-oct-final-atag\\_abb-2020-publication-digital.pdf](https://aviationbenefits.org/media/167517/aw-oct-final-atag_abb-2020-publication-digital.pdf); International Maritime Organization (2020): Fourth IMO GHG Study 2020. Full Report. Fourth IMO GHG Study 2020 - Full report and annexes; Karliner, Josh et al. (2019): Health Care's Climate Footprint: How the Health Sector Contributes to the Global Climate Crisis and Opportunities for Action: Healthcare without Harm. [https://noharm-global.org/sites/default/files/documents-files/5961/HealthCaresClimateFootprint\\_092319.pdf](https://noharm-global.org/sites/default/files/documents-files/5961/HealthCaresClimateFootprint_092319.pdf); Bilder von jannoon028 und tawatchai07 auf Freepikz



# Nachhaltigkeit

## Ökologisch

ExacTrac als Retrofit



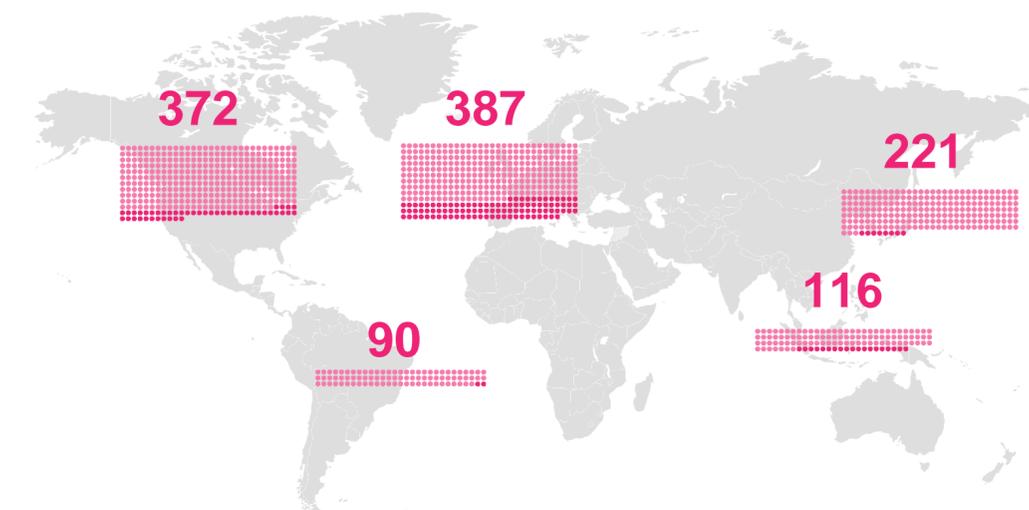
## Ökonomisch

Weniger Fraktionen & Energie



## Sozial

ExacTrac für alle



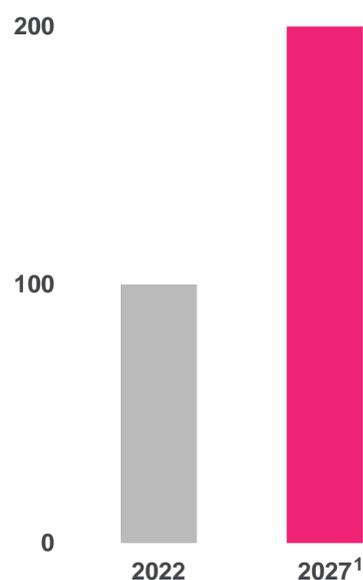


## Wirtschaftlichkeit

### Zukunftsstandort Deutschland

#### Umsatz

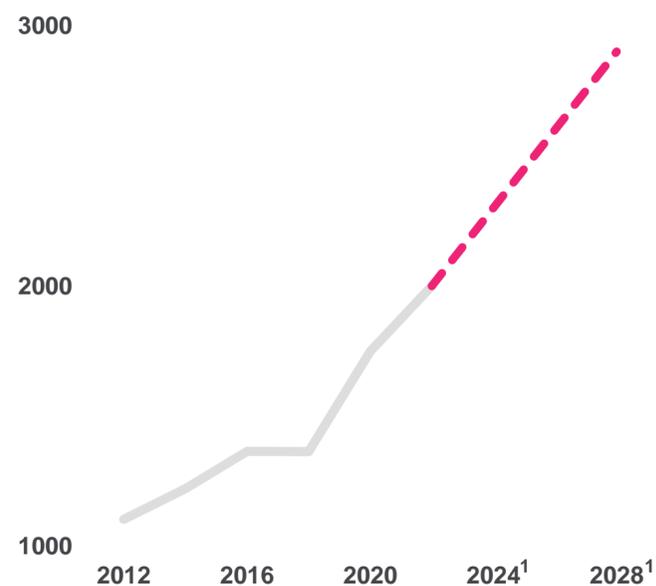
>1.000 installierte ExacTracs



**100%** Wachstum  
in 5 Jahren<sup>1</sup>

#### Mitarbeiter

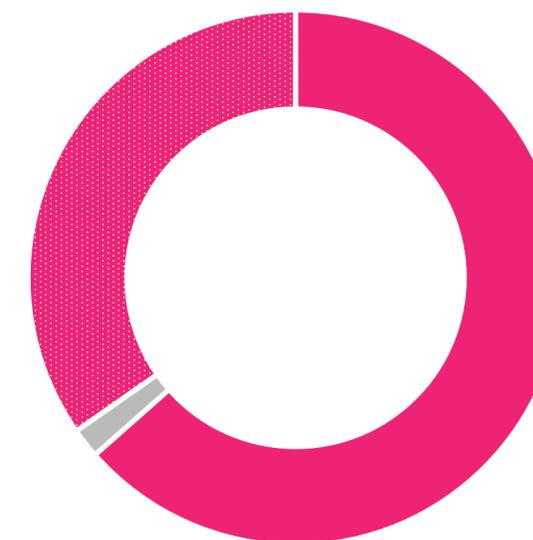
>700 Ingenieur:innen



**+150** Neue Arbeitsplätze  
pro Jahr<sup>1</sup>

#### Eigentumsverhältnisse

Inhabergeführt

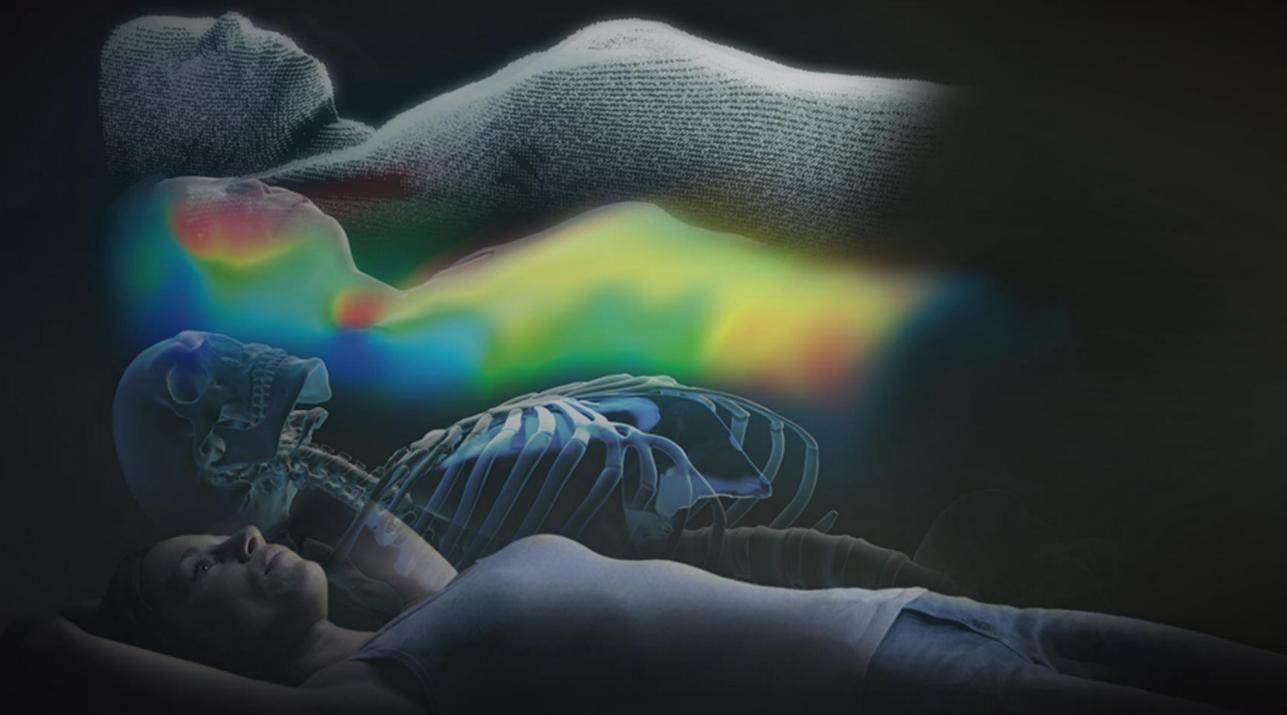
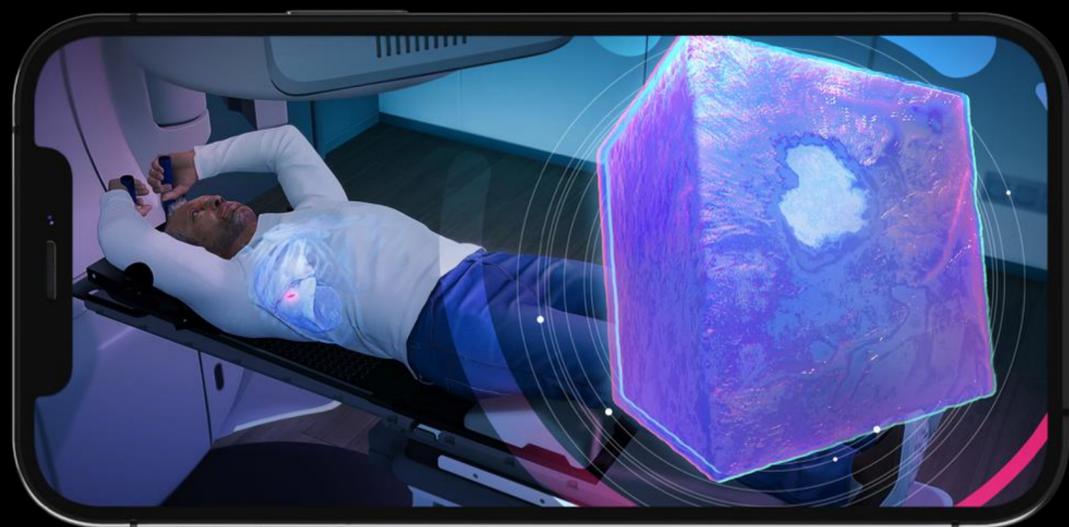


**>90%** Deutsche  
Aktionäre

<sup>1</sup>Prognose: Installation weiterer 2.000 Systeme und Update von 70% der >1.000 Bestandsysteme; Eigentumsverhältnisse: 63,5% Management und assoziierte Parteien, 34,6% Finanzinvestoren und assoziierte Parteien, 1,9% aktuelle und ehemalige Mitarbeiter und assoziierte Parteien

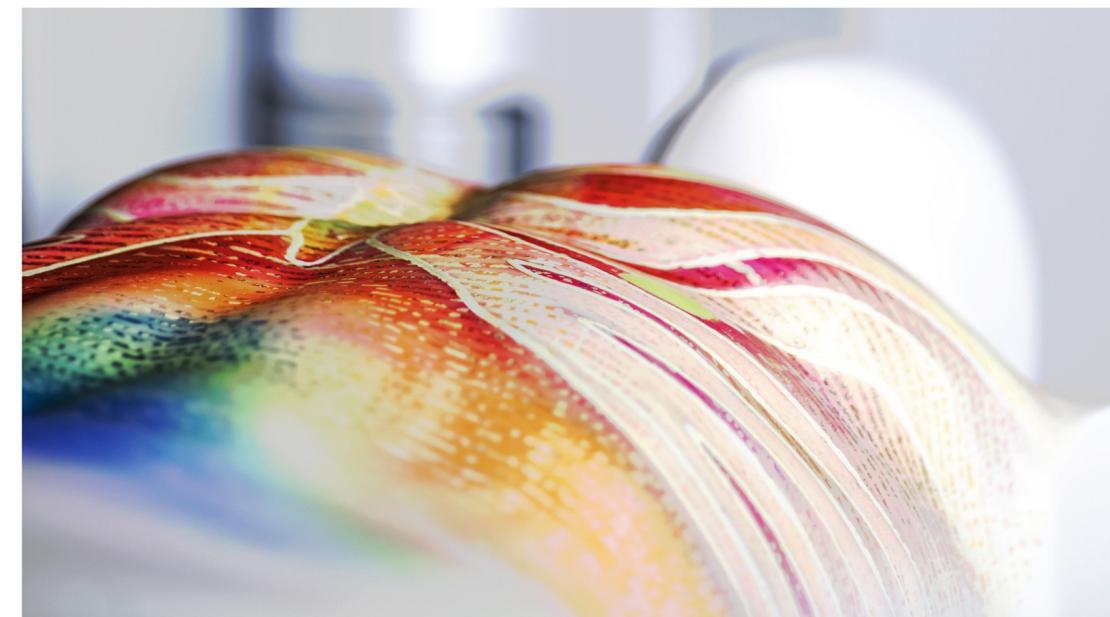


DEUTSCHER  
ZUKUNFTSPREIS





DEUTSCHER  
ZUKUNFTSPREIS



NOMINIERT FÜR DEN DEUTSCHEN ZUKUNFTSPREIS 2022