



To study the principles of stereotactic ablative body radiotherapy in primary and oligometastatic lung cancer.

Host institute: Weston Park Hospital, Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield, UK

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Non-small lung cancer (NSLC) is the leading cause of cancer-related deaths, with more than a million deaths annually worldwide. Around 2-30% of patients who present with Stage I have excellent tumour control rates with Stereotactic Ablative Body Radiotherapy (SABR). SABR is a high precision radiotherapy utilised for the control of extra cranial sites like thorax and abdomen. My institute, AH Regional Cancer Centre, Cuttack, is one of the largest centres in eastern India, and caters to a large number of patients with primary as well as metastatic lung cancer. In Weston Park Hospital, Sheffield, SABR treatment is delivered for primary lung cancers as well as oligo-metastatic disease under the 'Commissioning Through Evaluation' (CTE) with CORE, SHARON and HALT trials.

I was welcomed by my mentor, Dr Tathagata Das, the lead for thoracic oncology and a consultant clinical oncologist at the Sheffield Teaching Hospital, NHS Foundation Trust. He introduced me to my fellow oncologists, physicists and planners.

First, I studied the guidelines of the SABR UK consortium. Dr Das helped me to understand the basic principles and techniques of SABR, starting from the selection of patients for SABR multi-disciplinary team (MDT) 4D CT, planning,



With Dr Tathagata Das

evaluation of plan, post-planning MDT approval, and final treatment and timely follow-up.

A well-designed timetable organised my training and I could experience the workflow and responsibility of a dedicated SABR team from physicians to radiographers. Weston Park Hospital has eight Linacs, of which two are dedicated to SABR. The treatment delivery by the dedicated radiographers, in the presence of the physicists, makes SABR highly precise with a scheduled pre-scan and mid-scan. I could attend two SABR MDT on Friday mornings at 8.30am, ✓



With Dr Liza Siddall

which enriched my understanding and clarified most of my doubts, and I was happy to follow up a few patients in clinics.

My sincere thanks to the radiographers, who helped me to understand the 4D CT, Mr James Moore for the planning part, Dr Allice Dwiendwy for pelvic node SABR, Dr Liza Siddall for taking time to help me understand the basics of SABR from a physics perspective, and lastly to all the staff and patients, who were very supportive and friendly. I also express my heartfelt gratitude to Dr Das for making my training so successful.

I have presented the whole workflow for SABR in my institute's monthly seminar and conveyed to my colleagues the importance of this technique so that we can provide the best possible treatment to our patients.



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