ANNUAL PROFESSIONAL CONFERENCE & EXHIBITION
MERCURE GRAND HOTEL, BRISTOL
UK SABR CONSORTIUM 2018 PROGRAMME

THURSDAY 29 NOVEMBER

12.00 REGISTRATION, EXHIBITION, POSTER VIEWING AND WELCOME LUNCH

13.10 Chairs’ welcome and introduction
   Dr Nicholas van As, Chair, UK SABR Consortium & John Lilley, Head of External Beam Radiotherapy, Leeds Cancer Centre

13.15 Opening address: New evidence in treating oligometastases; from COMET to CORE and beyond
   Dr David Palma, Radiation Oncologist/OICR Clinician-Scientist, London Health Sciences Centre, Canada

13.50 Motion management for SABR
   Marianne Aznar, Medical Physicist, The Christie NHS Foundation Trust

14.20 An update on protons – where are we?
   Dr Rovel Colaco, Consultant Clinical Oncologist, The Christie NHS Foundation Trust

14.40 REFRESHMENTS, EXHIBITION AND POSTER VIEWING

15.10 SABR: UK implementation and current practices. Progress since 2012.
   Gail Distefano, Principal Clinical Scientist and NIHR Doctorate Research Fellow, Royal Surrey County Hospital and University of Surrey & Dr Satya Garikipati, Consultant Clinical Oncologist, Sheffield Teaching Hospitals NHS Trust

15.35 Results from the National SABR Spine Audit
   Rush Patel, Lead SABR Physicist RTTQA, Mount Vernon Cancer Centre

15.55 UK SABR Consortium – 10 years on, the past, the present and the future
   Dr Matthew Hatton, Consultant and Honorary Professor in Clinical Oncology, Weston Park Hospital

16.25 Proffered papers in the spotlight

16.25 End expiration breath hold as a method of managing respiratory movement in treating abdominal structures with SABR - implementation and impact
   James Barber, Research and Development Radiographer, Guy’s and St. Thomas’ NHS Foundation Trust

16.35 SABR Dosimetric plan robustness for small lung lesions: How low can you go?
   Chris Dean, Lead Stereotactic Radiotherapy Physicist, Barts Health NHS Trust

16.45 Stereotactic body radiotherapy for prostate cancer: Long-term outcomes from one of the first UK centres
   Dr Kirsty Morrison, Clinical Research Fellow, The Royal Marsden Hospital NHS Foundation Trust

16.55 Case studies in the spotlight

16.55 SABR for lung patients with irregular breathing: A case series
   Dr Naomi Sisson, Senior Clinical Scientist, Clatterbridge Cancer Centre NHS Foundation Trust

17.10 Use of EEBH gated treatment and FFF photon beams can be essential for effective delivery of abdominal SABR cases
   Vanya Staykova, Radiotherapy Physicist - Clinical Trials, Medical Physics Department Guy’s and St Thomas’ NHS Foundation Trust

17.25 Closing remarks

19.30 UK SABR CONSORTIUM ANNUAL CONFERENCE DINNER AND DANCE
FRIDAY 30 NOVEMBER

08.45 REGISTRATION, EXHIBITION AND POSTER VIEWING

09.10 Chairs’ welcome and introduction
Dr Nicholas van As, Chair, UK SABR Consortium & Gail Distefano, Principal Clinical Scientist and NIHR Doctorate Research Fellow, Royal Surrey County Hospital and University of Surrey

09.15 Keynote address: Prostate SABR, nodal irradiation and rectal sparing
Dr Suneel Jain, Clinical Reader and Honorary Consultant in Clinical Oncology, Queen’s University, Belfast

09.45 Complexities and solutions for randomised trials of surgery versus SABR for stage I NSCLC
Dr Drew Moghanaki, Director of Clinical Radiation Oncology Research, Staff Physician, Veterans Affairs Medical Center, Richmond, Virginia, United States

10.20 REFRESHMENTS, EXHIBITION AND POSTER VIEWING

Chairs: Chris Dean, Lead Stereotactic Radiotherapy Physicist, Barts Health NHS Trust & Yat Man Tsang, Consultant Radiographer, Specialised Service Delivery, East and North Hertfordshire NHS Trust

10.50 SABR for unfavorable prostate cancer: An emerging standard of care?
Dr Sean P. Collins, M.D., Ph.D., Associate Professor, Georgetown University Hospital, United States

11.20 An update on liver treatments
Professor Maria A. Hawkins, Associate Professor in Clinical Oncology, MRC Clinical Group Leader/Honorary Consultant Clinical Oncologist, CRUK MRC Oxford Institute for Radiation Oncology, University of Oxford & Kwun-Ye Chu, Research Radiographer, CRUK MRC Oxford Institute for Radiation Oncology, Oxford University Hospitals NHS Foundation Trust

12.05 Proffered papers in the spotlight

12.05 Targeted radiotherapy in androgen-suppressed prostate cancer patients
Priyanka Patel, Clinical Oncology Research Fellow, The Royal Marsden NHS Foundation Trust and the Institute of Cancer Research

12.15 Multi-criteria optimisation for dose escalation in gynaecological SABR treatments
Letitia Aitken, Advanced Specialist Lead Dosimetrist, The Lanarkshire Beatson, Monklands District General Hospital

12.25 Impact of abdominal compression on image matching time in abdominal SABR and radical RT
Kwun-Ye Chu, Research Radiographer, CRUK MRC Oxford Institute for Radiation Oncology, Oxford University Hospitals NHS Foundation Trust

12.35 Verification of delivered dose for liver SABR using CBCT images
Dr Samantha Warren, Principal Clinical Scientist, University Hospitals Birmingham NHS Foundation Trust

12.45 LUNCH, EXHIBITION AND POSTER VIEWING

13.45 SABR clinical trials & ART-NET update
Dr Fiona McDonald, Consultant Clinical Oncologist, The Royal Marsden NHS Foundation Trust & Dr Alison Tree, Consultant Clinical Oncologist, The Royal Marsden NHS Foundation Trust and The Institute of Cancer Research

14.20 Debate: SABR will replace surgery?
Chairs: Dr Fiona McDonald, Consultant Clinical Oncologist, The Royal Marsden NHS Foundation Trust & Dr Clive Peedell, Consultant Clinical Oncologist, South Tees Hospitals NHS Foundation Trust
For: Dr David Palma, Radiation Oncologist/OICR Clinician-Scientist, London Health Sciences Centre, Canada & Dr Drew Moghanaki, Director of Clinical Radiation Oncology Research, Staff Physician, Veterans Affairs Medical Center, Richmond, Virginia, United States
Against: Mr David Waller, Consultant Thoracic Surgeon, Barts Health NHS Trust & Mr Prasanna Sooriakumaran, Consultant Urological Surgeon, University College London Hospital

15.10 CLOSE OF 2018 CONFERENCE
Important Safety Information

Most side effects of radiotherapy, including radiotherapy delivered with Accuray systems, are mild and temporary, often involving fatigue, nausea, and skin irritation. Side effects can be severe, however, leading to pain, alterations in normal body functions (for example, urinary or salivary function), deterioration of quality of life, permanent injury, and even death. Side effects can occur during or shortly after radiation treatment or in the months and years following radiation. The nature and severity of side effects depend on many factors, including the size and location of the treated tumor, the treatment technique (for example, the radiation dose), and the patient’s general medical condition, to name a few. For more details about the side effects of your radiation therapy, and to see if treatment with an Accuray product is right for you, ask your doctor.

WHO WE ARE
Accuray develops, manufactures and sells radiotherapy systems that make cancer treatments shorter, safer, personalized and more effective, ultimately enabling patients to live longer, better lives. Our radiation treatment delivery systems in combination with fully-integrated software solutions set the industry standard for precision and cover the full range of radiation therapy and radiosurgery procedures.

OUR TECHNOLOGIES
Accuray technologies empower treatment teams around the world to transform the fight against cancer—improving clinical and economic outcomes through a singular focus on making cancer treatment as precise as possible for every patient.

CYBERKNIFE® TREATMENT DELIVERY SYSTEM
Precise robotic treatment as individual as every patient.

The CyberKnife® System empowers clinicians to make the most of their skills in treating cancer and functional disorders. It’s the only robotic radiosurgery system that offers highly precise, non-surgical treatment for tumors and lesions anywhere in the body—including the brain, breast, kidney, liver, lung, pancreas, prostate and spine. And it is the only system that tracks and automatically adjusts for tumor or patient movement during treatment, delivering the radiation dose directly to the target with sub-millimeter precision. This high level of accuracy gives clinical teams the confidence to deliver state-of-the-art treatments for a wide range of cancers and functional disorders, without sacrificing patients’ quality of life.

RADIXACT® TREATMENT DELIVERY SYSTEM
Expands patient-first treatment like no other system in the world.

Patients reeling from diagnoses need precise and effective treatment to get their lives back. Treatment teams need precision and efficiency to treat a broad range of indications with improved patient outcomes cost-effectively. The Radixact® Treatment Delivery System enables all of this with a fully-integrated helical platform for intelligent treatment planning, data management and treatment delivery. Using a refined x-ray beamline and fast Cirue™ imaging technology, the system delivers versatility and highly effective treatments for patients with a variety of individual treatment needs.

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