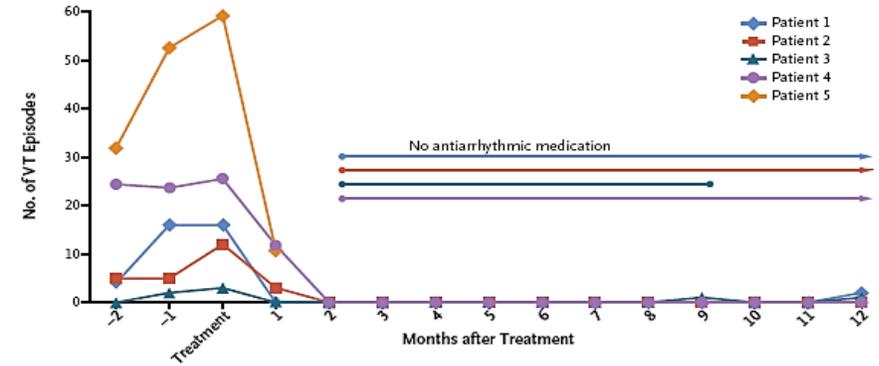


Noninvasive Cardiac Radiation for Ablation of Ventricular Tachycardia

Phillip S. Cuculich, M.D., Matthew R. Schill, M.D., Rojano Kashani, Ph.D., Sasa Mutic, Ph.D., Adam Lang, M.D., Daniel Cooper, M.D., Mitchell Faddis, M.D., Ph.D., Marye Gleva, M.D., Amit Noheria, M.B., B.S., Timothy W. Smith, M.D., D.Phil., Dennis Hallahan, M.D., Yoram Rudy, Ph.D., and Clifford G. Robinson, M.D.

Monthly Assessment of All VT Episodes per Patient



Stereotactic body radiotherapy for ventricular tachycardia (cardiac radiosurgery)

First-in-patient treatment in Germany

David Krug¹ · Oliver Blanck¹ · Thomas Demming² · Matthias Dottermusch³ · Karoline Koch⁴ · Markus Hirt¹ · Laura Kotzott² · Adrian Zaman² · Lina Eidinger^{1,2} · Frank-Andre Siebert¹ · Jürgen Dunst¹ · Hendrik Bonnemeier²

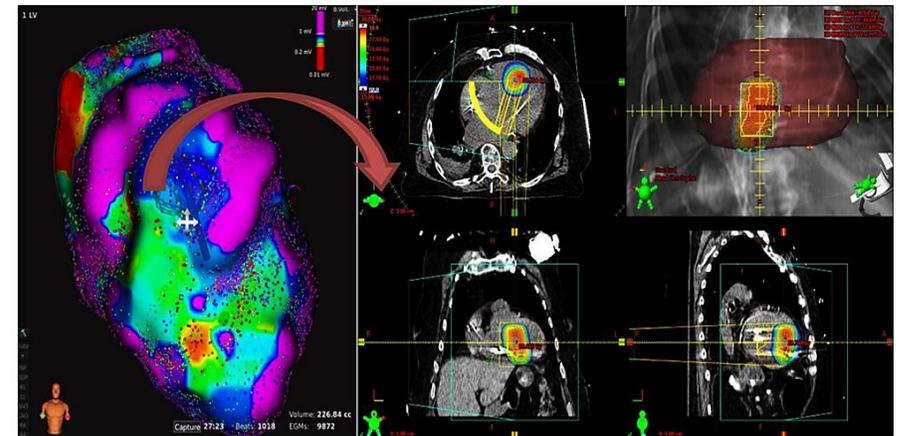
Strahlentherapie bei Ventrikulären Tachykardien: Wann, wie und für wen?

PD Dr. Oliver Blanck

Koordinator STOPSTORM (EU-H2020 Grant 945119)
UKSH, Campus Kiel, Klinik für Strahlentherapie

Leiter Operatives Geschäft, Medizinphysik, Forschung und Entwicklung Saphir Radiochirurgie (Frankfurt am Main, Kiel)

Disclosures: None



Stereotactic Arrhythmia Radioablation (STAR): EHRA/HRS

EHRA/HRS Expert consensus statement and EHRA survey

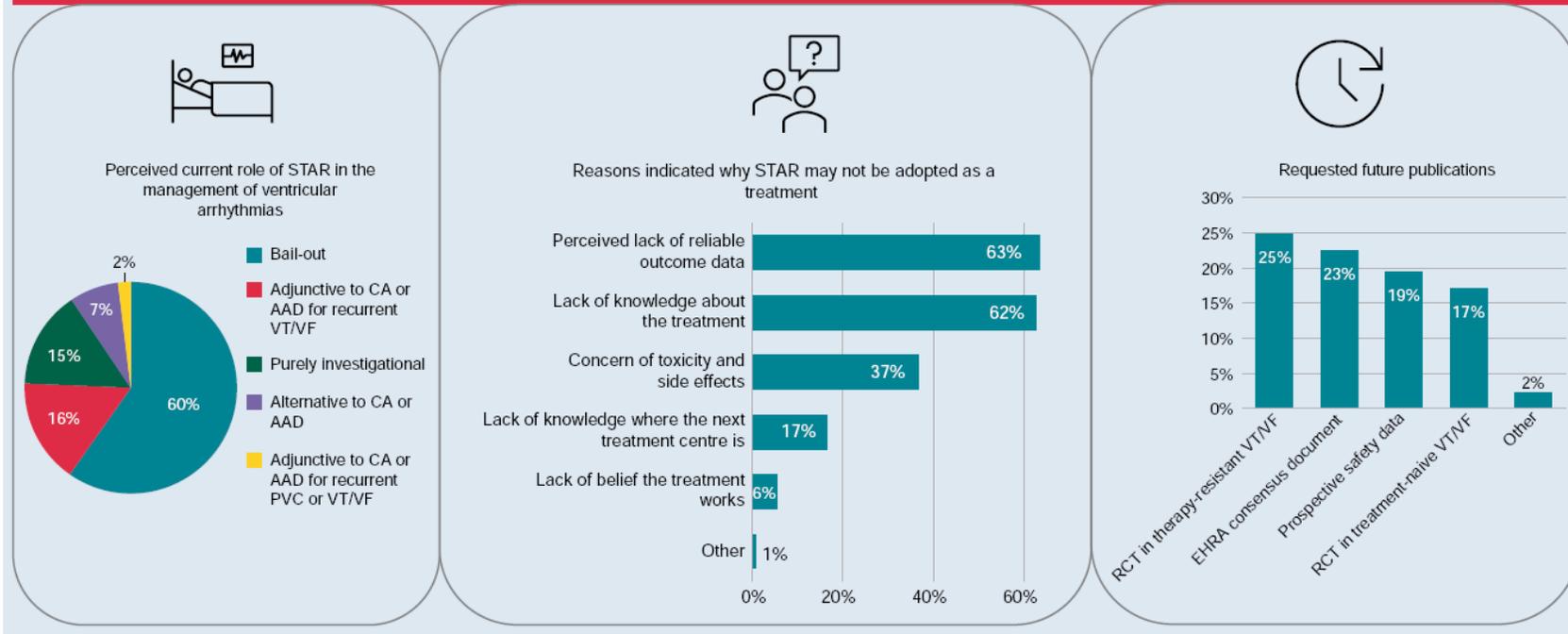
Patient selection, ventricular tachycardia substrate delineation, and data transfer for stereotactic arrhythmia radioablation: a clinical

Stereotactic arrhythmia radioablation and its implications for modern cardiac electrophysiology: results of an EHRA survey

Boldizsar Kovacs^{1,2*}, Helge Immo Lehmann^{1,3}, Martin Manning⁴, Ardan Muammer Saguner², Piotr Futyma⁵, David Duncker⁶, and Julian Chun⁷

Stereotactic arrhythmia radioablation and its place in modern cardiac electrophysiology

129 survey participants 16% female 60% electrophysiologists 52% experience with STAR



m is heart



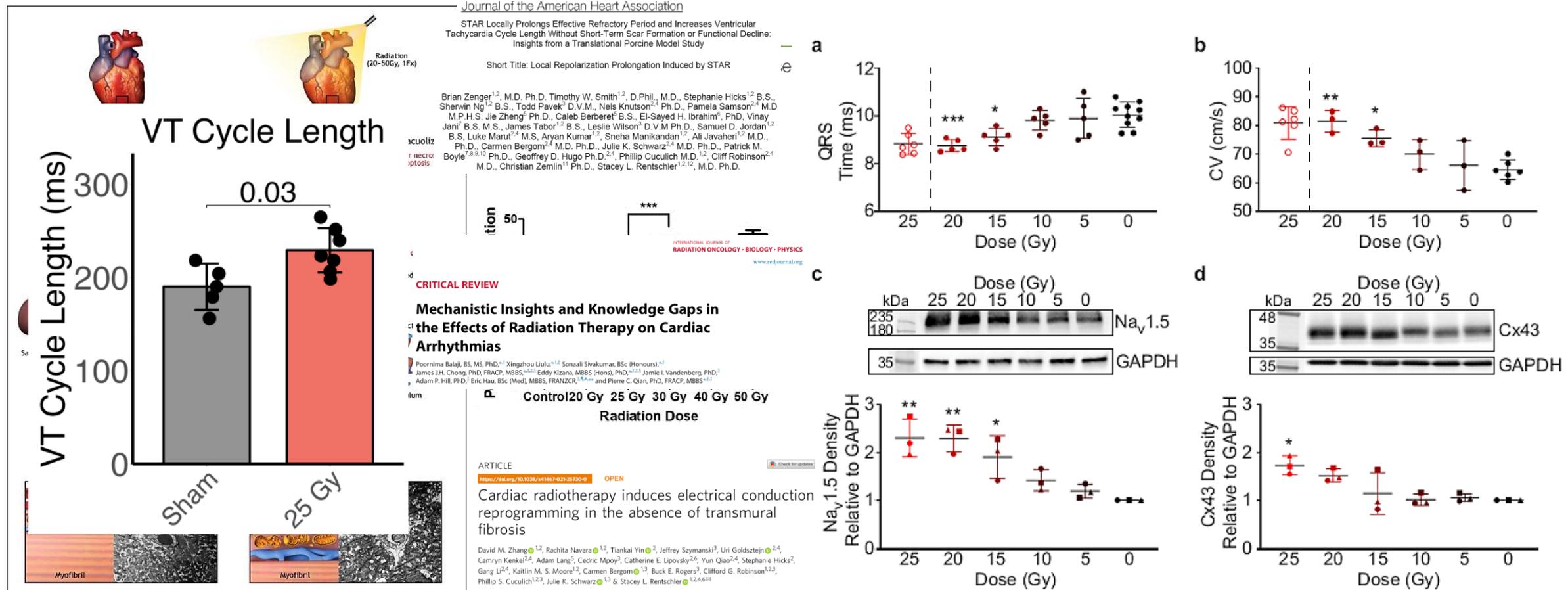
own, e.g. the



Radiation Biological Effects of High Single Doses in Cardiac Tissue

Doses >30 Gy: Vacuolation and edema, then fibrosis and cell death > 4-6 weeks

Doses 20-25 Gy: Increase in conduction velocity through protein overexpression (Cx43, Na_v1.5) and Notch activation without fibrosis



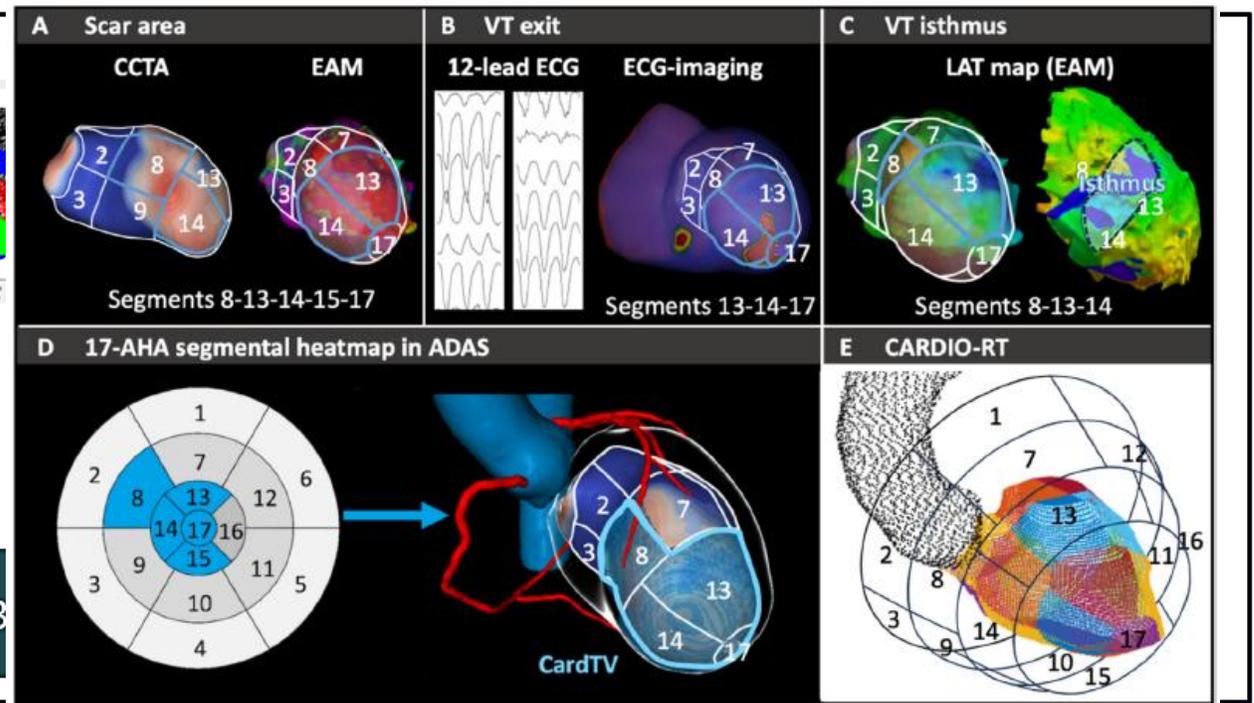
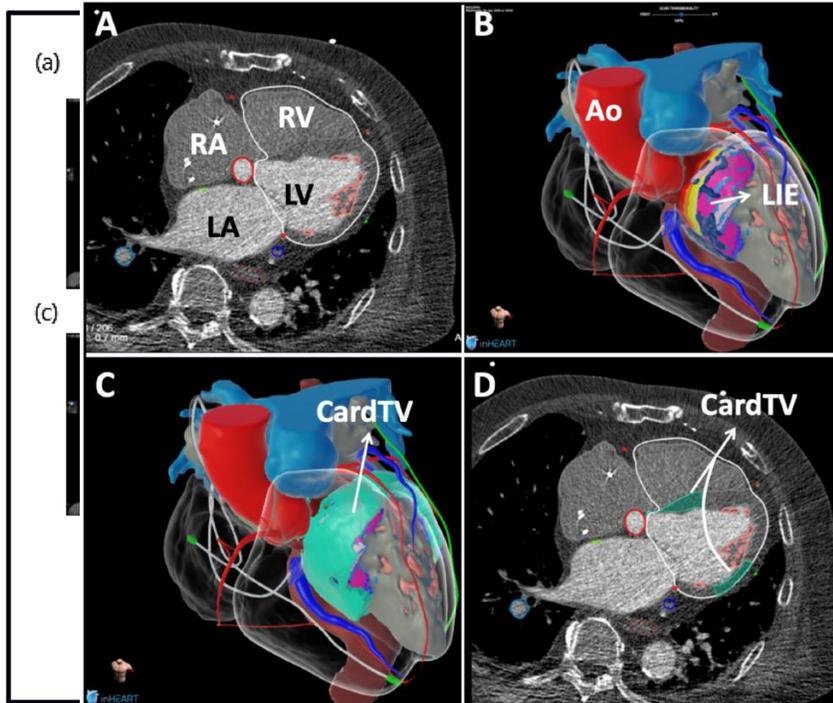
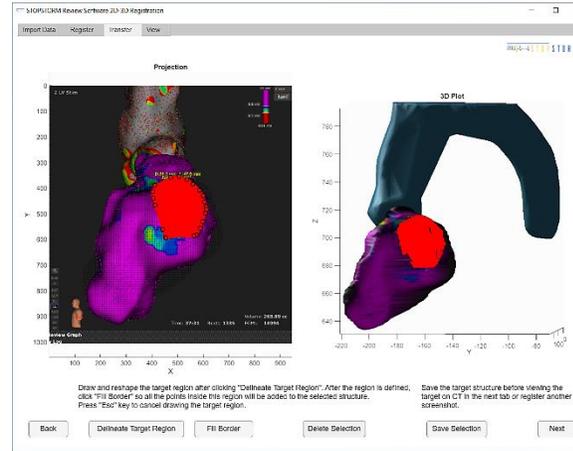
Target Definition and Transport to Radiation Oncology



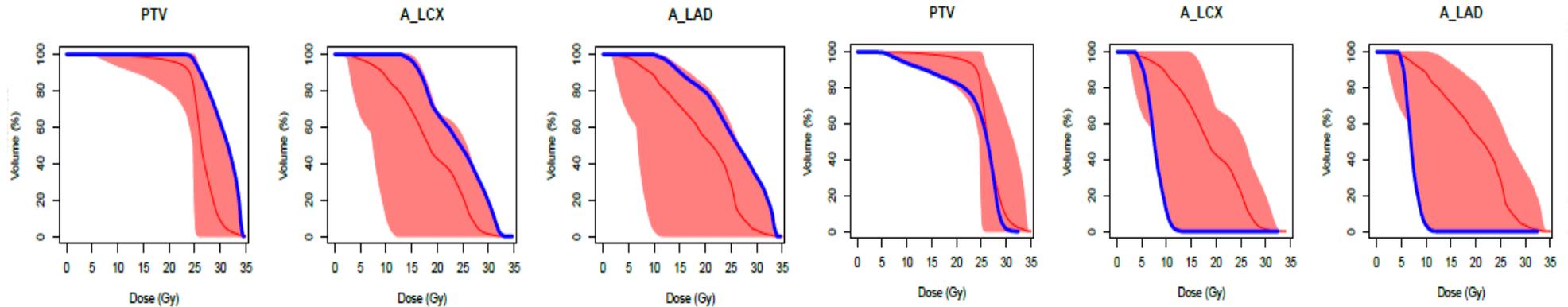
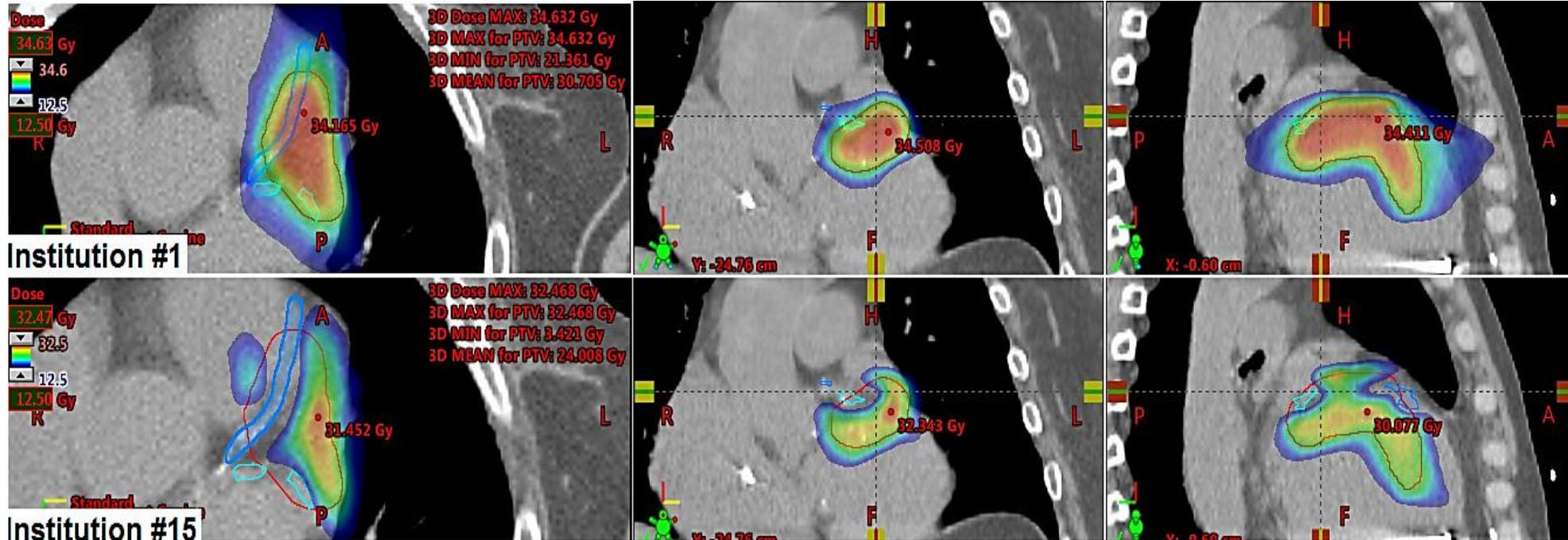
Review Article

Transfer of arrhythmia substrate targets from the cardiac electroanatomical and imaging modalities to the planning computed tomography scan for stereotactic arrhythmia radioablation for refractory ventricular tachycardia – a state-of-the-art review on software developments on behalf of the STOPSTORM.eu consortium

Rachel M.A. ter Bekke^{a,*}, Stephan Hohmann^b, Jingyang Xie^c, Melanie Grehn^d, Karolien Verhoeven^e, Paul G.A. Volders^f, Casper Mihl^f, Yeşim Selma Kaya^g, Martin Manninger^h, Daniel Scherrⁱ, Stefanie Corradini^h, Achim Schweikard^c, Robert Rademaker^g, Wiert F. Hoeksma^{j,k}, Luis Schiappacasse^g, Lukáš Knybel^m, Etienne Pruvot^l, Pieter G. Postema^{j,k}, Petr Pechl^h, Jakub Cvek^m, Katja Zeppenfeld^l, Oliver Blanck^{d,l}, Judit Boda-Heggemann^{o,p,1}



Radiation Treatment Planning: Target Coverage vs. OAR Sparing

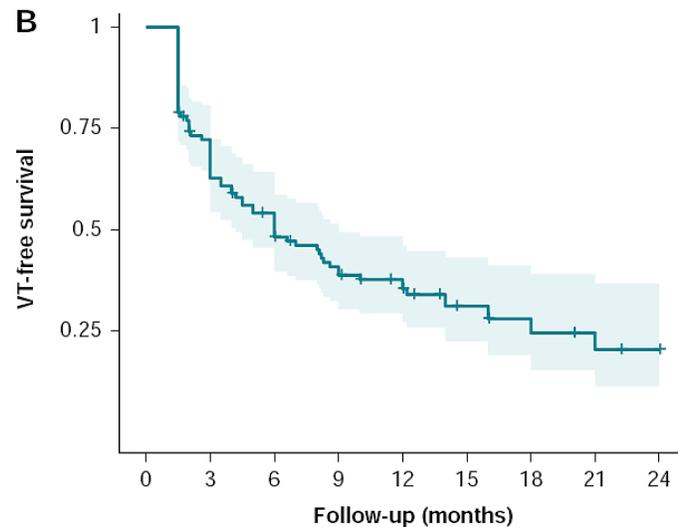


Stereotactic Arrhythmia Radioablation (STAR): Growing Evidence

Growing Evidence: Increasing number of clinical studies / meta-analyses are published

Stereotactic cardiac radiotherapy for refractory ventricular tachycardia in structural heart disease patients: a systematic review

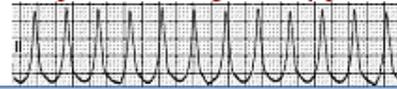
Amulya Gupta^{1†}, Zeeshan Sattar^{2†}, Nourhan Chaaban^{3†}, Sagar Ranka⁴, Cameron Carlson⁵, Farhad Sami⁶, Clifford G. Robinson⁷, Phillip S. Cuculich⁸, Seth H. Sheldon¹, Madhu Reddy¹, David Akhavan⁹, and Amit Noheria^{1*}



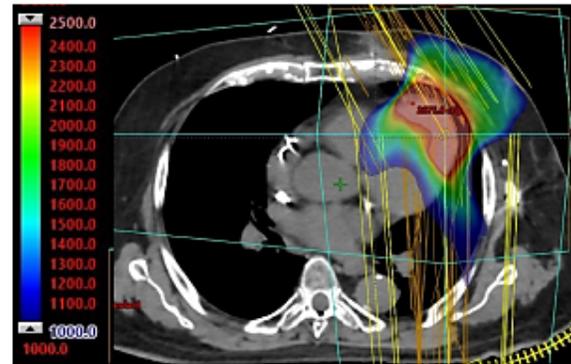
International Journal of Radiation Oncology • Biology • Physics
Is Stereotactic Arrhythmia Radiotherapy (STAR) a valid alternative to repeated invasive ablation for refractory ventricular tachycardia?

In regard of: "Stereotactic Arrhythmia Radiotherapy (STAR) vs. Repeat Catheter Ablation for High-Risk Refractory Ventricular Tachycardia: 3-Year Safety and Efficacy Outcomes"

Refractory ventricular tachycardia
Failed antiarrhythmic drug therapy/catheter ablation

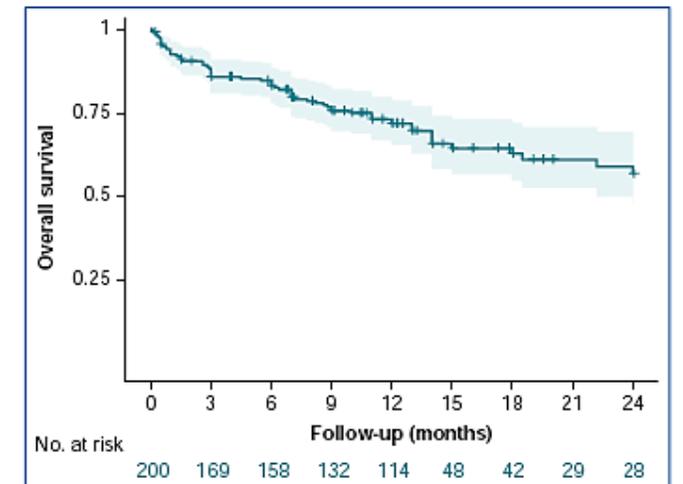
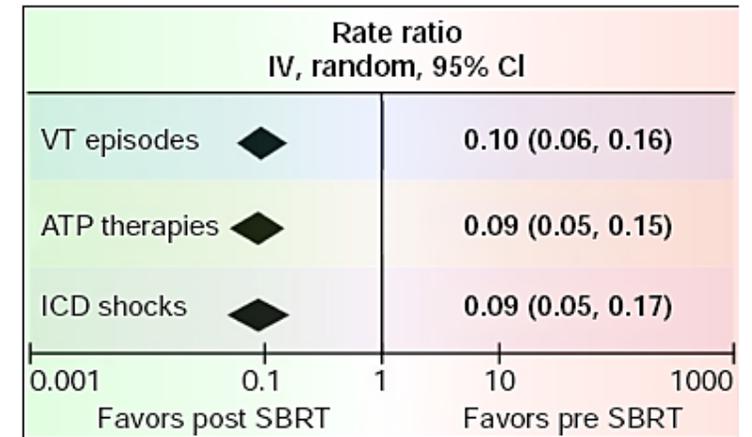


Rescue cardiac SBRT



Pooled analysis of 21 studies shows ≥90% reduction in VT and ICD therapies compared to pre-SBRT.

Mortality remained high with 3-, 12-, 24-month survival 86%, 72% and 57%, respectively.

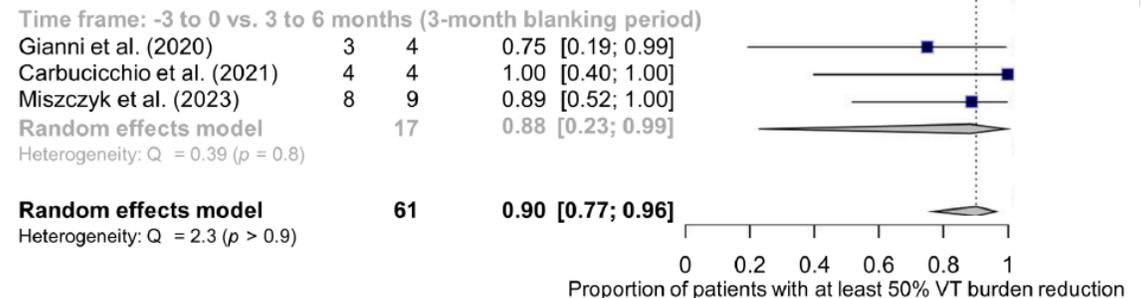
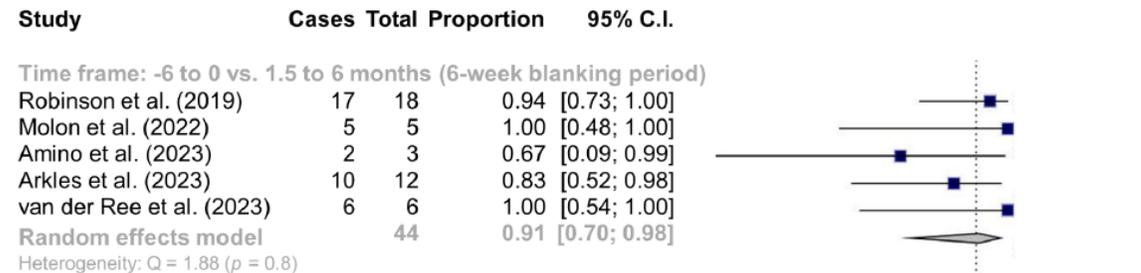
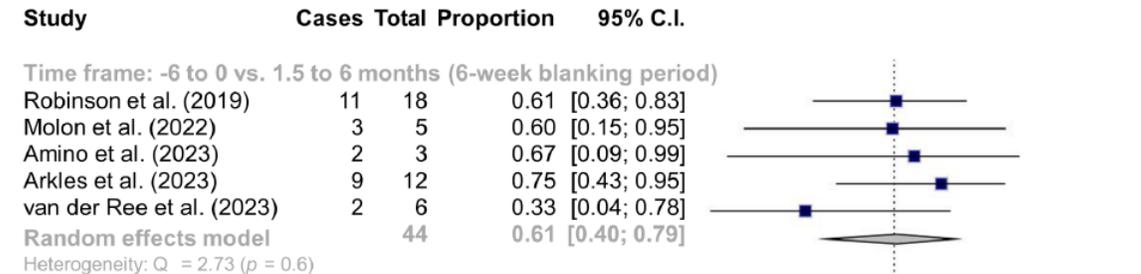
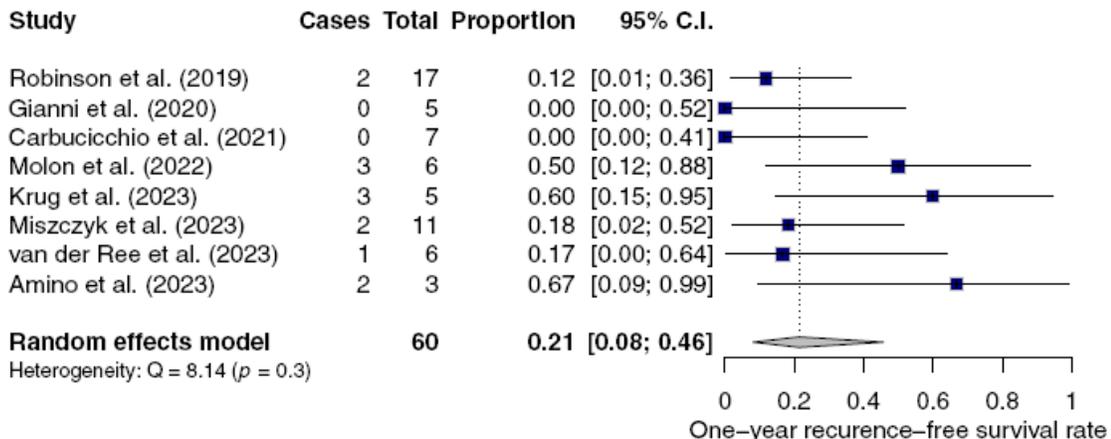
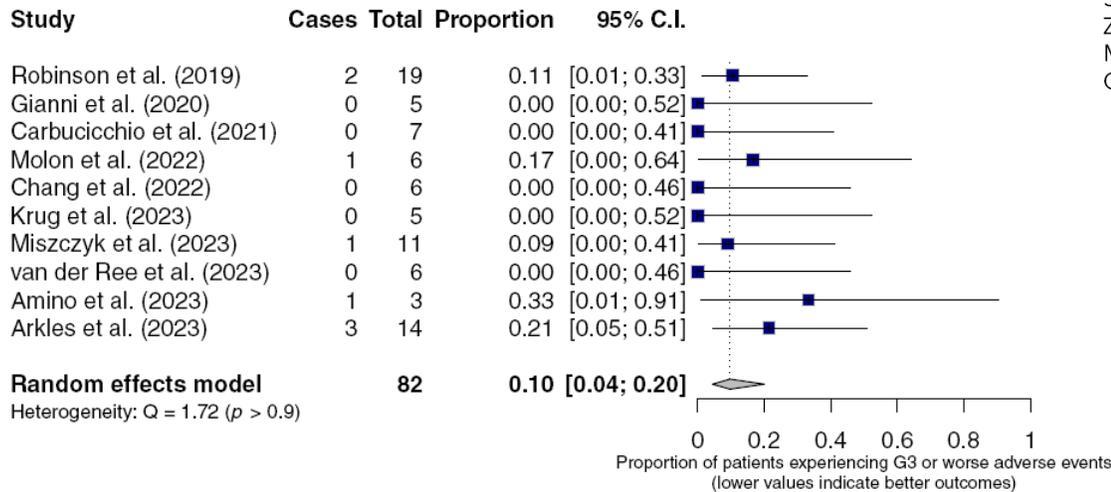


Stereotactic Arrhythmia Radioablation (STAR): Clinical Trials

STAR: Highest clinical evidence so far

Stereotactic arrhythmia radioablation (STAR)—A systematic review and meta-analysis of prospective trials on behalf of the STOPSTORM.eu consortium

Marcin Miszczyk, MD, PhD,^{1,2,13} Wiert F. Hoeksema, MD,^{3,13} Kasper Kuna, MD,⁴ Sławomir Blamek, MD, PhD,⁵ Phillip S. Cuculich, MD,⁶ Melanie Grehn, MS,⁷ Giulio Molon, MD,⁸ Zuzanna Nowicka, MD,⁴ Martijn H. van der Ree, MD,³ Clifford G. Robinson, MD,⁶ Mateusz Sajdok, MD,^{9,10,11} Joost J.C. Verhoeff, MD, PhD,¹² Pieter G. Postema, MD, PhD,^{3,14} Oliver Blanck, PhD^{7,14}

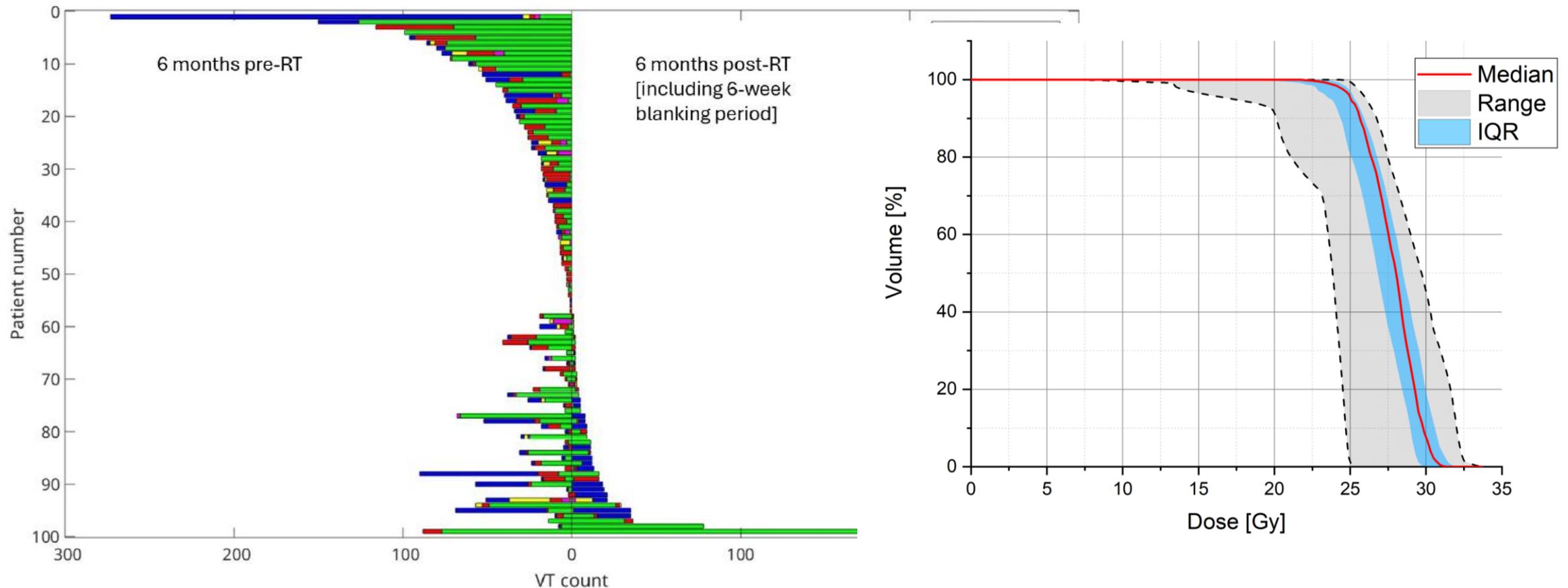


Stereotactic Arrhythmia Radioablation (STAR): STOPSTORM

STOPSTORM: Real-life Umbrella STAR registry with >50 partners and >18 clinical trials

Unpublished Interim Results: 193 prospective patients (> 300 total patients)

→ 12 related SAE (6.2%): Cardiac decompensation, pericardial effusion, Incessant VT



When is the Radiotherapy/-modulation/-ablation ready for clinical routine practice?

- STAR with harmonized methodology is safe and can be highly effective
- Full deterministic radiation biological mechanisms of STAR are still unclear
- Definition of target volume and dose is being standardized and optimized
- Criteria for optimal patient selection are being established
- Larger cohorts and RCTs will be evaluated soon

So, STAR is on the path to clinical routine practice!

Radiation Oncology is ready as a reliable partner!

