



ISRS INTERVIEW

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INTERNATIONAL STEREOTACTIC RADIOSURGERY SOCIETY



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Excerpts

Which kind of future do you envision for body radiosurgery?

For an increasing number of indications, SBRT is being used in medically inoperable patients. In fact, maybe except for liver metastases, where there are many competitive treatment options, for most of the situations where surgery cannot be performed due to the patients' condition, SBRT is being considered. So exciting new indications are pancreatic and kidney cancer. Especially with Stereotactic MRI guided and Adaptive Radiation Therapy, a technique which we call SMART, these challenging indications can be treated effectively and safely.

How important has multi-discipline been for you, and has the fact of being part of a multi-disciplinary society like ISRS turned out to be useful for your job?

Multidisciplinarity has always been crucial in radiation therapy. For most indications, we work very closely with the referring specialists. It is important to show and discuss our treatment options, be it conventional or stereotactic radiotherapy, in multidisciplinary teams. Similarly, study results and improvements of our techniques should also be presented at multidisciplinary meetings such as ISRS. Radiation oncologists in larger centers focus their work on only one to three body sites and typically attend the multidisciplinary conferences in those areas. ISRS is a good example of collaboration between neurosurgeons, physicists and radiation oncologists in the fields of radiosurgery of the brain and spine. It has been a good experience to work with colleagues with different backgrounds but with one goal within the ISRS.