

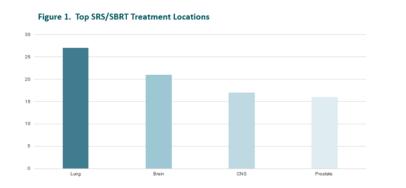
the Radiosurgery Society® April 2022 Volume XIII

Patient Centered Care/Precision Therapies RSSearch® Patient Registry Newsletter

2021 RSSearch Registry Update

A review of the aggregate data was conducted on patients enrolled in <u>RSSearch</u> <u>Patient Registry</u> between 2005—December 30, 2021. The total number of enrolled cases in RSSearch was 31,562. In 2021, there were 2,164 new cases enrolled, well over double the cases that were added in 2020. We are grateful for the diligence of our participating centers in getting their cases caught up in 2021 and for their continued support of the RSSearch Patient Registry.

As of December 30, 2021, the most common treatment locations reported in RSSearch were lung/bronchus (27%), brain (21%), spinal cord/cranial nerves/other parts of the central nervous system (17%) and prostate (16%)(Figure 1). Bones and joints and liver ranked 5th and 6th for the most common treatment locations, respectively. Men continue to be enrolled at a slightly higher rate (54%) compared to women (46%).



The most frequent referrals for SRS/SBRT treatments were from medical oncologists (36%) and neurosurgeons (15%), followed by urologists (13%), radiation oncologists (10%), and pulmonologists (7%) making up the top 5 referral sources. A complete analysis of the 15 year trends in SRS/SBRT treatments from RSSearch is currently being prepared for publication.



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Special Points of Interest

- RSSearch is the largest SRS/SBRT dedicated patient registry managed by a non-profit medical professional society.
- More than 30,000 cases currently enrolled
- Global participation.
- Accepting new participating centers.
- New Data Import Tool for automated data entry.

RSSearch Registry Benefits

Why You Should Participate in the RSSearch Registry

Did you know the RSSearch[®] Patient Registry is the longest established patient registry dedicated to SRS/SBRT managed by a professional society? The multiplatform research and data sharing registry opened in 2005 and now includes more than 30,000 cases!

The RSSearch Registry has become a critical resource for radiosurgical investigators world-wide in a wide range of specialties, as well as hospitals, teaching institutions and researchers engaged in the field. It's served as the foundation for peerreviewed publications and research; improved quality of patient care; elevated medical decision making; provided access to novel treatments and approaches; and advanced the science of SRS/SBRT. Data mined from the RSSearch Registry also contributes to the industry-wide development of clinical and quality guidelines.



Here are the top 10 reasons you should participate in the RSSearch Registry:

- 1. It's a secure, web-based patient management portal serving the global SRS/ SBRT patient population, including intracranial and extracranial sites.
- 2. It includes more than 200 data fields including screening, treatment and follow-up information, as well as patient-reported quality of life information.
- 3. You'll have access to aggregate data on over 30,000 cases upon application and approval.
- 4. There's a huge cost savings compared to purchasing software for managing patient data.
- 5. It features a new Data Import Tool that allows for automated data uploads with data transfer from an electronic medical record.
- 6. Easily track patient follow-up and patient-reported outcomes.
- 7. You can generate a wide variety of standard and customized reports.
- 8. You'll have convenient and real-time access to your screening, treatment and outcomes data for publication and presentation.
- 9. It's HIPAA and EU compliant.
- 10. You'll be joining the ranks of over 50 clinicians from institutions around the world.

All participating centers need to have a designated Principal Investigator who is an RSS member in good standing, must receive approval of the RSSearch Registry Protocol at a local IRB/Ethics Committee and execute a Data Usage Agreement.

For more information or to participate in the RSSearch Registry please email

registry@therss.org.

2021 Statistics

31,562 Enrolled Cases

25

Participating Centers

54%

Of cases enrolled are men

27%

Of lesions are located in the lung/ bronchus

21%

Of cases are located in the brain

16%

Of cases are located in the prostate

36%

Of cases were referred by medical oncologists

15%

Of cases were referred by neurosurgeons

Top 10 Enrolling Centers for 2021



- 1. Memorial Hospital West
- 2. Sir Charles Gairdner Hospital
- 3. Acibadem University, Istanbul
- 4. Henry Ford Health System
- 5. Montefiore Medical Center
- 6. NJ CyberKnife at Community Medical Center
- 7. St. Mary's Medical Center
- 8. Franklin Square Hospital Center
- 9. Doctor's Hospital of Augusta
- 10. Allegheny Health Network

RSSearch® Patient Registry Data Entry Just Got Easier

Learn How the Automated Data Entry Tool is Simplifying Participation

Early in 2021 Vision Tree introduced an automated system with the RSSearch Patient Registry database that would allow users to "dump" data into the RSSearch Patient Registry from their EMR and their treatment planning system and eliminate the need for manual data entry.

Since that time, the RSS has successfully implemented this process at three centers and all three are in the top five enrolling centers for 2021.

Getting the system set up takes some effort on the part of the site, working with Vision Tree, but once it is done transferring the data into the Registry can be an automatic process that takes place as often as you want to schedule it.



Here is what one of our users had to say.

"Previously it took more than 20 minutes to manually enter one patient's data into the database, which also resulted in manual entry errors. After using this program, uploading the data of more than 20 patients to the database takes less than 20 minutes. This tool not only improves the efficiency, but it also reduces human entry errors."

- Ping Yan, Ph.D., Montefiore Medical Center, New York City, NY

For more information about participating in the registry, please contact registry@therss.org.

RSSearch® Patient Registry Highlights

RSSearch Registry Data Featured at 2021 ASTRO Annual Meeting

This year's Annual Meeting of the American Society for Radiation Oncology (ASTRO) featured two presentations of data from the RSSearch Registry.

The first, a poster titled, "<u>Stereotactic Radiosurgery (SRS) for Spinal Metastatic Disease: Outcomes From the RSSearch</u> <u>Patient Registry</u>," presented by Raj Singh, M.D., Resident Physician in Radiation Oncology at VCU Health System in VA.



The RSSearch Patient Registry was queried for patients with spinal metastatic disease treated with Single fraction stereotactic radiosurgery (SF-SRS) or multi-faction stereotactic radiosurgery (MF-SRS). Potential predictive factors of local control (LC) and overall survival (OS) were evaluated. Pre-treatment and post-treatment visual analog scores (VAS) were analyzed to examine both initial (i.e. within 3 months of RT) and durable pain responses (i.e. at last follow-up > 3 months) in addition to complete response (CR) rates with patients with VAS scores < 3 excluded from analysis. Logistic regression was utilized to examine potential correlations between pain response, fractionation, and prescription dose.

The study found that patients with spinal metastases treated with either SF-SRS or MF-SRS had encouraging palliative responses. Greater than 80 percent of patients had an initial pain response and close to 50% an initial CR with durable pain response achieved for roughly 60 percent of patients.

The second was a presentation given by Michael Chuong, M.D., titled "<u>Long-Term Multi-Institutional Outcomes of 5-</u> <u>Fraction Ablative Stereotactic MR-Guided Adaptive Radiation Therapy (SMART) for Inoperable Pancreas Cancer With Me-</u> <u>dian Prescribed Biologically Effective Dose of 100 Gy10".</u>



The presentation highlighted results from 148 patients treated with MRIdian SMART at three institutions – Miami Cancer Institute, Henry Ford Medical Center and Acibadem Healthcare Group – using a biologically effective dose of 100 Gy delivered in 5 fractions. Median follow up was 16 months from diagnosis. Local control of the tumor at 1-year and 2-years was 94.6 percent and 83 percent respectively. Median overall survival was 26 months. Outcomes with MRIdian SMART were achieved with low rates of major adverse events, which were no higher than those reported with standard radiation therapy.

This study abstract was also published in the International Journal of Radiation Oncology * Biology * Physics as part of the 2021 Proceedings of the ASTRO 63rd Annual Meeting (November 01, 2021, Volume 111 Issue 3 Supplement).

RSS Resident Research Sponsorship

The RSS has a new initiative underway to promote research and publication efforts resulting from the RSSearch® Patient Registry through the RSS® Residents Association: an active RSS Committee with motivated medical and physics residents committed to research and advancing the field of SRS and SBRT. This initiative aims to connect medical and physics residents within the RSS with clinicians participating in the RSSearch Patient Registry to collaborate and conduct research on SRS/SBRT. Data from the RSSearch Patient Registry would be used to answer research questions, generate publications and support evidence-based clinical practice data on SRS/SBRT. Medical and physics residents would work directly with the RSSearch Patient Registry investigator to complete defined projects. If you're interested in participating, please contact registry@therss.org.

List of RSSearch® Patient Registry Publications to Date

For a full list of RSSearch publications, go to <u>www.therss.org/rssearch-patient-registry</u>

- The RSSearch[™] Registry: Patterns of Care and Outcomes Research on Patients Treated with Stereotactic Radiosurgery and Stereotactic Body Radiotherapy
- Best of the Radiosurgery Society[®] Scientific Meeting 2014: Stereotactic Radiosurgery / Stereotactic Body Radiotherapy Treatment of Extracranial and Intracranial Lesions
- Stereotactic Body Radiotherapy for Early-stage Non-Small Cell Lung Cancer: Clinical Outcomes from a National Patient Registry
- Stereotactic Body Radiotherapy for Centrally Located Early-stage Non-Small Cell Lung Cancer or Lung Metastases from the RSSearch[®] Patient Registry
- Stereotactic Radiosurgery for Trigeminal Neuralgia: A Retrospective Multi-Institutional Examination of Treatment Outcomes
- Lung Metastases Treated with Stereotactic Body Radiotherapy: the RSSearch[®] Patient Registry's Experience
- Clinical Outcomes following Stereotactic Body Radiation Therapy (SBRT) for Non-Resectable Pancreatic Adenocarcinoma
- Participating in an International Stereotactic Radiotherapy Patient Registry: The Establishment of Data Collection Pathways
- Stereotactic Body Radiation Therapy for Stage I Non-Small Cell Lung Cancer: The Importance of Treatment Planning Algorithm and Evaluation of a Tumor Control Probability Model.
- Stereotactic Body Radiotherapy (SBRT) for Liver Metastasis Clinical Outcomes from the International Multi-Institutional RSSearch[®] Patient Registry
- Salvage Stereotactic Body Radiation Therapy (SBRT) for Locally-Recurrent Previously Irradiated Head and Neck Squamous Cell Carcinoma: What is the Appropriate Dose?
- Stereotactic Radiosurgery and Fractionated Stereotactic Radiosurgery for Vestibular Schwannomas: A Comparison of Clinical Outcomes from the RSSearch Patient Registry
- Clinical Outcomes Following Stereotactic Body Radiation Therapy (SBRT) for Stage I Medically-Inoperable Small-Cell Lung Carcinoma: A Multi-Institutional Analysis from the RSSearch Patient Registry
- Stereotactic Body Radiation Therapy (SBRT) for Metastatic Renal Cell Carcinoma: A Multi-Institutional Experience
- A Multi-Institutional Analysis of Outcomes following Stereotactic Body Radiation Therapy for Management of Metastases from Squamous Cell Carcinomas of the Head and Neck

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