



Leaders in radiation therapy
Partners in care

May 20, 2008

Contact: Lois Griffiths, (602) 240-3375
LGriffitts@AzOncology.com

Liz Dowling, (800) 386-0157
LizDowling@aol.com

Medical Directors

Burton L. Speiser, MD, MS
David C. Beyer, MD

Physicians

Jonathan B. Ashman, MD
Christopher A. Biggs, MD, PhD
David G. Brachman, MD
Thomas P. Canty, MD
Luci M. Chen, MD
Nicholas E. Flores, MD
Timothy B. Galang, MD
Emily J. Grade, MD
John J. Kresl, MD, PhD
Robert R. Kuske Jr., MD
Terry T.K. Lee, MD
Gerald L. Lucas, MD
Kenneth H. Luk, MD
Gregory A. Maggass, MD
Hiroki Mitsuyama, MD
Coral A. Quiet, MD
Diane C. Recine, MD
Daniel R. Reed, DO
Lauren D. Stegman, MD, PhD
Irene K. Taw, MD
Alice F. Tsai, MD
Thomas J. Taylor, MD
Farley E. Yang, MD

Corporate Center

300 W. Clarendon
Ste. 350
Phoenix, AZ 85013

602 274.4484 tel
602 287.9406 fax
800 360.6371 toll free

www.azoncology.com

SAVI Applicator Outperforms Competing Devices, Study Concludes

PHOENIX – A study conducted at Arizona Oncology Services (AOS) found important advantages for the SAVI™ applicator over other radiation devices used for accelerated partial breast irradiation (APBI). The study and one other also conducted at AOS were presented as posters at the recent 2008 World Congress of Brachytherapy.

SAVI is a single-entry, multi-catheter device that delivers radiation as part of breast conservation therapy. It is the only APBI single-entry device that can customize the dose according to patient-specific anatomy. By more precisely targeting radiation therapy, SAVI treats the tissue where the cancer is most likely to recur, while minimizing the exposure of healthy tissue such as the skin, heart, lungs and ribs.

In the first study, SAVI was compared to two balloon applicators. The researchers noted that SAVI's multiple peripheral catheters, each of which can be individually loaded with a radiation source, enabled them to significantly lower the radiation dose delivered to the skin while maintaining full coverage of the target volume. When compared to the other devices, this capability provided better protection to the skin and chest wall.

“This new study indicates SAVI may provide dosimetric advantages over competing forms of breast brachytherapy,” said Salih Gurdalli, Ph.D., a physicist for AOS who led the study. “The ability to conform the catheters to the target area and modulate the dosing makes it possible to deliver radiation treatment more precisely,” said Coral Quiet, M.D., a radiation oncologist at AOS, who was a co-author of the study.

The second study presented by AOS evaluated the performance and clinical utility of the SAVI applicator when used as the sole radiation treatment for patients with early-stage breast cancer. The study involved 15 patients who were treated with the device. Consistent with the results of the first poster, this study showed that SAVI allowed the radiation oncologist to deliver an optimal dosage to the target area while still shaping the dose to avoid the skin and chest wall.

The researchers found that skin dose values with the applicator were 10 percent to 13 percent lower than published values for the most common balloon applicator.

“Partial breast irradiation (PBI) delivers dose-dense treatment to the site within the breast at greatest risk for recurrence. It shows great promise of reducing local failure,

minimizing radiation exposure to surrounding organs, and shortening the treatment time to 5 days. Some methods of PBI, however, may deliver unacceptably high doses of radiation to the skin or chest wall. Those patients who are not candidates for certain PBI methods can be safely treated by Strut-Adjusted Volume Implant (SAVI),” said AOS radiation oncologist Robert Kuske, M.D., one of the study’s co-authors.

Arizona Oncology Services was the first medical facility in the nation to offer SAVI as part of breast conservation therapy.

The SAVI applicator is a recent advance in APBI, which is a shortened course of high-dose radiation therapy for early-stage breast cancer patients following lumpectomy surgery. Breast brachytherapy is a type of APBI in which radiation is delivered from within the breast. All APBI approaches reduce treatment time from six or seven weeks -- which is generally required with conventional whole-breast irradiation -- to just five days.

The World Congress of Brachytherapy was cosponsored by the American Brachytherapy Society and was held May 4-6 in Boston.

About Arizona Oncology Services

Arizona Oncology Services is a radiation oncology practice that was formed in 1981. With a team of over 20 physicians and 13 locations in the greater Phoenix area and Yuma, AOS is a nationally recognized leader in numerous radiation techniques including accelerated partial breast therapy, brachytherapy, prostate seed implants, stereotactic radiosurgery, and monoclonal antibody radiation therapy. AOS physicians and staff partner with patients, families, and referring physicians to provide superior radiation oncology care with a focus on leading edge treatment, empathy and compassion. For more information, call 602-274-4484 or access www.azoncology.com

- End -