I-131 RADIOIODINE THERANOSTICS FOR DIFFERENTIATED THYROID CANCER PERSONALISED PREDICTIVE DOSIMETRY FOR I-131 MOLECULAR RADIOTHERAPY v230623

Predictive Calculator © Dr Y.H. Kao MBBS MRCP FAMS FRACP FAANMS

Date of Analysis **First Name** Surname

01 January 2023	
Example	
EXAMPLE	

ID Number Date of Birth Gender (use list)



1 January 2002

Female

Lifetime cumulative Marrow I-131 absorbed dose limit	2
Marrow absorbed dose rate constraint per fraction (#)	0.2
Cumulative I-131 activity administered to date	3.
Cumulative I-131 Marrow absorbed dose to date	0.8
The next I-131 therapy shall be the patient's	Sec
Predicted remaining Marrow absorbed dose tolerance	1.1
Predicted whole body TIAC for the next I-131 fraction	28
Predicted % of whole body TIAC attributed to Blood	1
Predicted TIAC per ml of Blood for the next I-131 fraction	0.001
Predicted Blood absorbed dose per GBq of I-131	0.168
Predicted Blood TIAC for the next I-131 fraction	4.
Predicted maximum safe Marrow absorbed dose per #	1.1
Predicted cumulative lifetime Marrow I-131 tolerance	10

	-	
2.0	Gy	Blood is Marrow surrogate
0.265	Gy/h per #	normalised to Ao
3.76	GBq	
0.835	Gy	
Second	fraction (#) of	high activity I-131
1.165	Gy	
28.0	h	
15	%	
0.00163583	h/ml	
0.16880904	Gy/GBq	
4.20	h	normalised to Ao
1.113	Gy	constrained by dose rate
10.66	GBq	

PREDICTIVE I-131 PRESCRIPTION BY MARROW CONSTRAINT					
Predicted tolerance per # by marrow dose rate (Gy/h)	6.59	GBq per #			
Predicted remaining lifetime Marrow I-131 tolerance	6.90	GBq			
PREDICTIVE I-131 PRESCRIPTION BY LUNG CONSTRAINT					
Predicted tolerance per # by marrow dose rate (Gy/h) 6.59 GBq		GBq per #			
Predicted remaining lifetime Lung I-131 tolerance	9.53	GBq			



Date of I-131	1 January 2023				BLOOD	OLUME ESTIMATE
Age at I-131	21.0	years old			Height	148 cm
I-131 fraction	First fraction				Weight	43 kg
Preparation	Thyroid Hormone Withdrawal	(use list)			if Male	3,450.1 ml
I-131 Administered	3.76	GBq			if Female	2,567.5 ml
		•			Blood Vol	2,567.5 ml
	MARROW DOSIMETRY					
	% of Whole Body Residence Time att	ributed to E	Blood	16.0	% (see Te	echnical Guidance)
					_	
x-axis	Time (h)	0	23	47	71	1680
	I-131 exposure rate (µSv/h@3m)		-			(10 week)
	1st measurement	1.04	0.47	0.30	0.07	
	2nd measurement	0.91	0.54	0.31	0.09	
	Average rate (µSv/h@3m)	0.98	0.51	0.31	0.08	
y-axis	Retained I-131 activity (GBq)	3.76	1.95	1.18	0.31	1.0E-20
	1 μSv/h of I-131 @ 3m represents	3.86	GBq			
	Whole Body Decay Constant, $oldsymbol{\lambda}$	0.0282	209934	h⁻¹	i.e. from	Curve equation
	I-131 Effective Half-Life, T e	24.6	h	i.e. ln2 / 7	λ	
	Whole Body Residence Time, $ au$	35.45	h	i.e. 7 = 1 ,	/λ	
				. ~ .		
	Whole Body Cumulative Activity, A	133,286	MBq.h	i.e. A = A o	oxτ	
	Whole Body self irradiation S value	4.2E-06	Gy/MBq.	h		
	Residence Time per ml of Blood	0.00221	h/ml			
	Blood Absorbed Dose per GBq	0.22214	Gy/GBq			
	Marrow Absorbed Dose	0.835	Gy	assuming	blood as r	marrow surrogate
	Whole Body Absorbed Dose	0.559	Gy	assuming	WB as ma	arrow surrogate
	Lung cafety threshold scaled by beig	ht (cm)		y avic	10	h
	Lung safety threshold, scaled by heig			X-dxis	40	II CPa at 19h
		y-axi		y-axis	2.7	GDY at 4011
	whole Body Decay Constant, A	nole Body Decay Constant, λ 0.02		0.0282	209934	
	Whole Body Activity at 48h			1.0	GBq at 48h	
	Remaining lung tolerance after 1st fraction				1./	GBQ at 48h
	Predicted Whole Body Residence Tim	Lieu whole Body Residence Time for next fraction			28	n 1
	Predicted Whole Body Decay Constar	nt for next f	fraction	0.0357	714286	h ⁻⁺
	Predicted I-131 prescription contraine	ed by lung			9.53	GBq

TECHNICAL GUIDANCE

FOR EDUCATION, TRAINING AND RESEARCH PURPOSES ONLY. ALL SUGGESTED I-131 ACTIVITIES ARE ONLY ESTIMATES AND MUST BE CONSIDERED IN CONJUNCTION WITH ALL OTHER CLINICAL, IMAGING AND BIOCHEMICAL INFORMATION, DOSIMETRIC AND REAL LIFE UNCERTAINTIES.

- 1. Only key into the YELLOW boxes.
- 2. Low activity I-131 administrations for diagnostic whole body scans are assumed negligible and excluded from dosimetric analysis.
- 3. Zero hour is the time of I-131 administration. Set the y-intercept to the administered I-131 activity.
- 4. See Tables 1 and 2 for guidance on predicted whole body TIAC and % of whole body TIAC attributed to blood.
- 5. Consider the contraints by marrow, lung and dose rate and select the **LOWEST** activity to prescribe. *<u>References:</u>*
- [1] Kao YH. Asia Ocean J Nucl Med Biol. 2023;11:158-167
- [2] Lassmann et al. Eur J Nucl Med Mol Imaging. 2008;35:1405-1412
- [3] Hanscheid et al. Endocr Relat Cancer. 2009;16:1283-1289
- [4] Taprogge et al. Eur J Nucl Med Mol Imaging. 2023. doi: 10.1007/s00259-023-06295-0.