Reviewer's report

Title: Adding attenuation corrected images in myocardial perfusion imaging reduces the need for a rest study

Version: 1 Date: 4 June 2012

Reviewer: Lode Goethals

Reviewer's report:

Major Compulsory Revisions

The added value of this manuscript is relatively low, confirmed by reference 13. Since diagnostic accuracy of MPI is known to improve when incorporating AC data, it seems logical that a number of rest studies will reduce the number of unnecessary rest studies. The authors should compare their work to reference 13 and highlight their added value. Their population number is relatively large, but no new conclusion can be made compared with reference 13.

Minor Essential Revisions

In the abstract, please use 99m in superscript

In the abstract: conclusion is a bit light: if in the results “the number of no-rest-study-required is significantly higher, conclusion should be that “Adding AC to stress only images the number of unnecessary rest studies is reduced substantially.”

If MPI is the abbreviation for myocardial perfusion imaging, no need for “MPI imaging”, just MPI will suffice.

“the physician in charge evaluates”

Discretionary Revisions

This paper only incorporates Attenuation Correction. What would be the added value of combined attenuation and scatter correction, for example scatter from the liver activity in the inferior heart border?

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests'