Reviewer's report

**Title:** Improved clinical outcome after invasive management of patients with recent myocardial infarction and proven myocardial viability: Primary results of a randomized controlled trial (VIAMI-trial)

**Version:** 1  **Date:** 7 October 2011

**Reviewer:** Michel Hoenig

**Reviewer's report:**

This is a small but well-designed study and the authors ought to be congratulated on undertaking this work. The authors focus on a population where there is reason to believe that viability testing and revasc might be beneficial instead of a 'blanket approach'.

I am just a bit confused in the abstract where it states:

Revascularization procedures were performed in 6.6% (7/106) in the invasive group and 31.8% (35/110) in the conservative group (Hazard ratio 0.18; 95% CI 0.13-0.43; p<0.0001).

But in the text the rates of revasc (PCI or CABG) are much higher in the invasive strategy (as they would be expected to be in patients with positive DSE and at-risk myocardium). Please revise this part of the abstract so that the figures match those in the text.

A minor comment that the authors might consider would be to have an imaging substudy looking at remodeling. In this instance, the patients with evidence of myocardium at risk who are not revascularized will 'lose' the myocardium. MRI with contrast would be ideal but it might be feasible with echo despite the poorer reproducibility of the sample size were large enough.

Nice work.

**Level of interest:** An article of outstanding merit and interest in its field

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

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

None