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REPLY: Dr. Ham's comments regarding the need to perform background correction when processing krypton 81m (^{81m}Kr) right ventricular radionuclide angiograms (1) are quite correct and we appreciate the chance to address this issue. We have incorporated a background correction protocol which utilizes a small (3 by 3 pixel) region of interest placed in the area of the left ventricle where, in theory, only scatter or background activity should be present. Our experience has been closer to that of Knapp et al. (2) than to that of Dr. Ham (3), in that our background counts have consistently been less than 10% of the activity in the right ventricular region of interest. We have never observed background counts on the orders of

the 20-60% cited by Ham (3).

Dr. Ham's study examined the effects of background correction in only five patients and his data show significant changes in right ventricular ejection fraction (RVEF) only in the 30° RAO projection, while the anterior view RVEF was essentially unaffected. In our study, a 15° RAO view was utilized and our observations in over 100 subjects to date show a small, but not negligible, effect of background correction.

We share Dr. Ham's enthusiasm for ^{81m}Kr as a right ventricular imaging agent and thank him for pointing out the need for background correction.

References

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