Overall, T1 values at 40 min post-MnDPDP were 35.9% higher in regions of infarction compared to remote and healthy myocardium (1134±88 versus 843±28 ms, P<0.0001). All infarcts had T1 >1050 ms, whereas remote and healthy myocardium had T1 <950 ms.

Conclusion MEMRI of the myocardium with T1 mapping not only identifies myocardial infarction but also demarcates viability and delineates regions of viability within the infarct zone. This novel contrast imaging technique has exciting potential in ischaemic cardiomyopathy.

Conflict of Interest None