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Ventilation–perfusion SPECT *versus* CTPA in young adult females with suspected pulmonary embolism

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Ventilation–perfusion SPECT should be preferred over CTPA in young adult females with suspected pulmonary embolism <https://bit.ly/2XYWdJ7>

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To the Editor:

We read with interest the “2019 ESC Guidelines for the diagnosis and management of acute pulmonary embolism” developed by the European Society for Cardiology (ESC) in collaboration with the European Respiratory Society [1]. An important question addressed in the 2019 ESC Guidelines, which is also discussed in the recently updated guideline on ventilation–perfusion (VQ) scintigraphy from the European Association of Nuclear Medicine (EANM) [2], is whether computed tomography pulmonary angiography (CTPA) or VQ scintigraphy should be the diagnostic method of choice in suspected pulmonary embolism. This quandary is notably pertinent in young female adults who are at an increased risk of pulmonary embolism due to oral contraceptive use or pregnancy, and we would like to add to the discussion in relation to this patient group by raising specific points relating to the diagnostic performance and radiation exposure of VQ scintigraphy *versus* CTPA.