Acute liver failure (ALF), formerly known as fulminant hepatic failure, is an uncommon condition with potentially devastating consequences, including an increased rate of short-term morbidity and mortality.

It has been estimated that the incidence of ALF is less than five cases per million population per year in the developed world, with approximately 2000 cases per year in the United States. It is noted that the incidence of ALF is poorly defined, which could lend itself to lower number of cases reported annually.

The clinical presentation can vary; some cases have shown a very rapid deterioration. It is imperative for the clinician to be aware of this entity, to seek expert opinion with potential transfer to centers that have experts in liver disease on staff and can offer liver transplantation as a backup.

It is noteworthy to mention that the cause of ALF varies worldwide; for example, in the United States and Europe, patients present with drug-induced liver injury, predominantly due to acetaminophen toxicity, while in other parts of the world, viral hepatitis is the main cause.

Due to increased immigration and travel worldwide, when a patient presents with ALF, clinicians must be vigilant in ascertaining the cause of ALF. They must delve not just into the patients’ medical history but also into their recent travel history, as a rare disease could be the cause of ALF.

Tremendous strides have been made in successfully treating various liver diseases; however, our therapeutic momentum in treating patients with ALF has been suboptimal. Several attempts have been made in formulating prognostication formulas, especially in the pretransplant evaluation setting.

In this issue of *Clinics and Liver Disease*, expert clinicians and researchers collaborated to provide a multispectrum view of this topic.

Topics reviewed and detailed in this issue include the mechanism of the disease and its epidemiologic aspects, along with clinical manifestation, prognostic models, and
various causes. Therapeutic modalities, including liver transplantation and potential future approaches, have been comprehensively overviewed.

I am honored to be a part of this issue, and I would like to express my gratitude to the distinguished authors of these articles, who shared their experiences and expertise on this significant topic in an outstanding manner. Finally, I would like to express my appreciation to Dr Norman Gitlin for allowing me this opportunity and to Ms Kerry Holland and Ms Meredith Madeira for their tremendous assistance.

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