***N*-Acetylcysteine in non-acetaminophen-induced acute liver failure**

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Dear sir,

I did read with a great interest the recently published article by Mumtaz et al. [1]. The article has important favorable results supporting the use of *N*-acetylcysteine (NAC) in non-acetaminophen-induced acute liver failure. The authors reported a significantly higher survival rate of 47% without liver transplantation in patients given NAC [1]. One of the major concerns with this study is the complete neurological recovery rate of these patients. Direct measurement of cerebral perfusion and intracranial pressures was not provided, and 68.1% of the patients in this group had grade 3–4 encephalopathy [2]. As all the physicians who treat these patients agree, the prediction of spontaneous recovery in fulminant hepatic failure without transplantation is the major challenge. That is why, some discriminatory factors of spontaneous recovery should be

defined by authors, for example, Clichy criteria (factor V level <50%), before the conclusion can be drawn [3].

Sincerely,
Levent Filik

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