**NEW ANTICOAGULANTS IN ATRIAL FIBRILLATION: ARE ALL THE SAME?**

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Atrial fibrillation increases mortality and morbidity. In addition, the prevalence of the arrhythmia is growing. Current therapeutic options aim to relieve symptoms and only achieve poor compromises. Existing antiarrhythmic drugs are also associated with toxicities and do not improve clinical outcomes. Invasive curative approaches are expanding and might change the scenario. However, universal coverage is unlikely to occur during next years. Therefore, this arrhythmia causes important health costs and its prevention and management is of crucial importance for patients, for physicians and for any sanitary system. Dicumarine derivates are useful but have important limitations for clinical practice. Recently, new oral anticoagulation drugs have been presented and diverse clinical data are already available. Two major strategies exist including anti factor Xa and antithrombin drugs. Since controversies in antithrombotic therapy remain present, this presentation analyzes the pharmacological and clinical data of the new anticoagulants for stroke or systemic embolism prevention in patients with atrial fibrillation with emphasis in the clinically obtained results and the differences between these drugs. Although some advantages with these novel pharmacological approaches are already known, some open questions or unmet needs exist. Thus, the usefulness of these drugs in specific patient subsets is analyzed from theory to clinical practice.