**ANTICOAGULATION AND ATRIAL FIBRILLATION: ANTITHROMBOTICS STATE OF THE ART**

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Atrial fibrillation (AF) is the most common form of cardiac arrhythmias and its incidence is rising as the population ages. AF is the arrhythmia of the elderly. The most important question is whether or not to anticoagulate, as it is a growing source of morbidity and mortality due to thromboembolic complications. Vitamin K antagonist therapy targeting an INR 2-3 reduces the risk of stroke by two-thirds of patients. Oral anticoagulation therapy has been limited to vitamin K antagonists for more than 60 years. Novel oral antithrombotic drugs have been developed and evaluated clinically. These include direct thrombin inhibitors (dabigatran) and oral factor Xa inhibitors (rivaroxaban, apixaban, edoxaban). Most of these new drugs have demonstrated promising safety and outcome results. They are convenient in use and do not require monitoring. The disadvantages are the lack of antidotes or specific blood assays to monitor anticoagulation effect. This overview reveals traditional and novel approaches to reduce thromboembolic complications in patients with AF.