WARNINGS AND PRECAUTIONS

5.5 Central Nervous System Effects

The concurrent use of tetracycline and methoxyflurane has been reported to result in fatal renal toxicity. (7.3)

5.8 Photosensitivity

Photosensitivity manifested by an exaggerated sunburn reaction has been observed in some individuals taking minocycline. (7.2)

5.10 Tissue Hyperpigmentation

Minocycline, like other tetracycline-class drugs, can cause fetal harm when administered to a pregnant woman. (7.1)

5.12 Superinfection

5.13 Laboratory Monitoring

5.14 Postmarketing Experience

The anti-anabolic action of the tetracyclines may cause an increase in BUN. While this is not a problem in those with normal renal function, patients with renal impairment may be at increased risk. (6.1)

5.15.3 Postmarketing Experience

A. Minocycline, like other tetracycline-class drugs, can cause fetal harm when administered to a pregnant woman. (7.1)

5.15.2 Postmarketing Experience

The concurrent use of tetracycline and methoxyflurane has been reported to result in fatal renal toxicity. (7.3)

6.4 Pregnancy

6.5 Nursing Mothers

6.6 Pediatric Use

6.7 Drug Interactions

6.8 Overdosage

6.9 Carcinogenesis, Mutagenesis, Impairment of Fertility

6.10 Impairment of Fertility

6.11 Animal Data

6.12 Clinical Pharmacology

6.13.1 Clinical Pharmacokinetics

6.13.2 Pharmacodynamic Properties

7.1 Clinical Use

7.2 Tissue Hyperpigmentation

7.3 Postmarketing Experience

7.4 Laboratory Monitoring

7.5 Phototoxicity

7.6 Superinfection

7.7 Laboratory Monitoring

7.8 Photosensitivity

7.9 Postmarketing Experience

7.10 Tissue Hyperpigmentation

7.11 Laboratory Monitoring

7.12 Superinfection

7.13 Laboratory Monitoring

7.14 Postmarketing Experience

7.15 Tissue Hyperpigmentation

7.16 Laboratory Monitoring

7.17 Postmarketing Experience

7.18 Laboratory Monitoring

7.19 Tissue Hyperpigmentation

8.3.O.4.2 Use in Specific Populations

8.3.12 Pregnancy

8.3.13 Nursing Mothers

8.3.14 Pediatric Use

8.3.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.3.16 Impairment of Fertility

8.3.17 Animal Data

8.3.18 Clinical Pharmacology

8.3.19 Tissue Hyperpigmentation

8.3.20 Postmarketing Experience

8.3.21 Laboratory Monitoring

8.3.22 Phototoxicity

8.3.23 Superinfection

8.3.24 Laboratory Monitoring

8.4.4.2 Use in Specific Populations

8.4.12 Pregnancy

8.4.13 Nursing Mothers

8.4.14 Pediatric Use

8.4.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.4.16 Impairment of Fertility

8.4.17 Animal Data

8.4.18 Clinical Pharmacology

8.4.19 Tissue Hyperpigmentation

8.4.20 Postmarketing Experience

8.4.21 Laboratory Monitoring

8.4.22 Phototoxicity

8.4.23 Superinfection

8.4.24 Laboratory Monitoring

8.4.25 Tissue Hyperpigmentation

8.5.4.2 Use in Specific Populations

8.5.12 Pregnancy

8.5.13 Nursing Mothers

8.5.14 Pediatric Use

8.5.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.5.16 Impairment of Fertility

8.5.17 Animal Data

8.5.18 Clinical Pharmacology

8.5.19 Tissue Hyperpigmentation

8.5.20 Postmarketing Experience

8.5.21 Laboratory Monitoring

8.5.22 Phototoxicity

8.5.23 Superinfection

8.5.24 Laboratory Monitoring

8.5.25 Tissue Hyperpigmentation

8.6.4.2 Use in Specific Populations

8.6.12 Pregnancy

8.6.13 Nursing Mothers

8.6.14 Pediatric Use

8.6.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.6.16 Impairment of Fertility

8.6.17 Animal Data

8.6.18 Clinical Pharmacology

8.6.19 Tissue Hyperpigmentation

8.6.20 Postmarketing Experience

8.6.21 Laboratory Monitoring

8.6.22 Phototoxicity

8.6.23 Superinfection

8.6.24 Laboratory Monitoring

8.6.25 Tissue Hyperpigmentation

8.7.4.2 Use in Specific Populations

8.7.12 Pregnancy

8.7.13 Nursing Mothers

8.7.14 Pediatric Use

8.7.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.7.16 Impairment of Fertility

8.7.17 Animal Data

8.7.18 Clinical Pharmacology

8.7.19 Tissue Hyperpigmentation

8.7.20 Postmarketing Experience

8.7.21 Laboratory Monitoring

8.7.22 Phototoxicity

8.7.23 Superinfection

8.7.24 Laboratory Monitoring

8.7.25 Tissue Hyperpigmentation

8.8.4.2 Use in Specific Populations

8.8.12 Pregnancy

8.8.13 Nursing Mothers

8.8.14 Pediatric Use

8.8.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.8.16 Impairment of Fertility

8.8.17 Animal Data

8.8.18 Clinical Pharmacology

8.8.19 Tissue Hyperpigmentation

8.8.20 Postmarketing Experience

8.8.21 Laboratory Monitoring

8.8.22 Phototoxicity

8.8.23 Superinfection

8.8.24 Laboratory Monitoring

8.8.25 Tissue Hyperpigmentation

8.9.4.2 Use in Specific Populations

8.9.12 Pregnancy

8.9.13 Nursing Mothers

8.9.14 Pediatric Use

8.9.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.9.16 Impairment of Fertility

8.9.17 Animal Data

8.9.18 Clinical Pharmacology

8.9.19 Tissue Hyperpigmentation

8.9.20 Postmarketing Experience

8.9.21 Laboratory Monitoring

8.9.22 Phototoxicity

8.9.23 Superinfection

8.9.24 Laboratory Monitoring

8.9.25 Tissue Hyperpigmentation

8.10.4.2 Use in Specific Populations

8.10.12 Pregnancy

8.10.13 Nursing Mothers

8.10.14 Pediatric Use

8.10.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.10.16 Impairment of Fertility

8.10.17 Animal Data

8.10.18 Clinical Pharmacology

8.10.19 Tissue Hyperpigmentation

8.10.20 Postmarketing Experience

8.10.21 Laboratory Monitoring

8.10.22 Phototoxicity

8.10.23 Superinfection

8.10.24 Laboratory Monitoring

8.10.25 Tissue Hyperpigmentation

8.11.4.2 Use in Specific Populations

8.11.12 Pregnancy

8.11.13 Nursing Mothers

8.11.14 Pediatric Use

8.11.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.11.16 Impairment of Fertility

8.11.17 Animal Data

8.11.18 Clinical Pharmacology

8.11.19 Tissue Hyperpigmentation

8.11.20 Postmarketing Experience

8.11.21 Laboratory Monitoring

8.11.22 Phototoxicity

8.11.23 Superinfection

8.11.24 Laboratory Monitoring

8.11.25 Tissue Hyperpigmentation

8.12.4.2 Use in Specific Populations

8.12.12 Pregnancy

8.12.13 Nursing Mothers

8.12.14 Pediatric Use

8.12.15 Carcinogenesis, Mutagenesis, Impairment of Fertility

8.12.16 Impairment of Fertility

8.12.17 Animal Data

8.12.18 Clinical Pharmacology

8.12.19 Tissue Hyperpigmentation

8.12.20 Postmarketing Experience

8.12.21 Laboratory Monitoring

8.12.22 Phototoxicity

8.12.23 Superinfection

8.12.24 Laboratory Monitoring

8.12.25 Tissue Hyperpigmentation
Central nervous system effects. See "What should I avoid while taking Ximino?" Central nervous system effects such as headache, dizziness, and a ranging feeling may go away over time. To avoid dizziness and to help your blood to blood pressure and blood flow. It is unclear if these symptoms will go away for other people, such as your face, lungs, abdomen and stool. Occasionally these side effects to your side effects during treatment with Ximino. These are not all the side effects with Ximino. Ask your doctor or pharmacist about other medicines you take, especially headache, flushing, and a spinning feeling (vertigo) may go away during your treatment with Ximino. If you are pregnant or breastfeeding, do not use Ximino. Women should not use Ximino during pregnancy. Women receiving hormonal contraceptives may be more able to conceive a child while using hormonal contraceptives. Minocycline HCl was associated with no effect on the physical development, behavior, learning ability, or reproduction in rats treated with minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and inflammation of blood or lymph vessels (vasculitis). Some patients have had a mild or no symptoms, rash and allergic reactions. Ximino may cause serious rash and allergic reactions that may affect parts of your blood or lymph vessels. Some of the side effects may go away if you give a blood or lymph vessels. Some of the side effects are not all the symptoms. Patients should be advised to stop the drug immediately and seek medical help.

16.3 Handling
Protect from light, moisture, and excessive heat. Do not keep Ximino in direct sunlight (tanning beds or UVA/B treatment) while using minocycline. If patients need to be outdoors while taking tetracyclines, including minocycline. Patients should minimize or avoid exposure to natural or artificial sunlight (tanning beds or UVA/B treatment). If patients need to be outdoors while taking tetracyclines, including minocycline. If patients need to be outdoors while taking tetracyclines, including minocycline. Patients should minimize or avoid exposure to natural or artificial sunlight (tanning beds or UVA/B treatment). If patients need to be outdoors while taking tetracyclines, including minocycline. Patients should minimize or avoid exposure to natural or artificial sunlight (tanning beds or UVA/B treatment).

17.5 Low Dose Oral Contraceptives
Taken oral contraceptives for at least 2 months. Patients taking Ximino should receive the following information and instructions: "See FDA-Approved Patient Labeling (Patient Information)."

17.6 Lactation
Patients should take Ximino when breastfeeding. Some breastfeeding women have been observed to have plasma concentrations lower than those in the health of children. Do not give Ximino to other people, even if they have the "See FDA-Approved Patient Labeling (Patient Information)."

18 PATIENT COUNSELING INFORMATION

18.1 Information about Ximino
Ximino should be taken exactly as prescribed by your doctor. Minocycline is indicated for the treatment of acne in patients ages 12 years and older. Patients should be advised to take Ximino every day on an empty stomach. The recommended dose is 1 capsule of each strength daily. Patients with information about Ximino that is written was not prescribed. Do not give Ximino to other people, even if they have the "See FDA-Approved Patient Labeling (Patient Information)."

18.2 Information for Parents of a Breastfeeding Infant
Minocycline is associated with a reduced number of sperm cells per gram of epididymis, an apparent reduction in the percentage of sperm that were motile, and (at 100 and 300 mg/kg/day) increased darkening of your nails, skin, eyes, scars, teeth, and gums. Patients should be advised to stop the drug immediately and seek medical help.

18.3 Information for Women of Childbearing Potential
Women receiving hormonal contraceptives may be more able to conceive a child while using hormonal contraceptives. Minocycline HCl was associated with no effect on the physical development, behavior, learning ability, or reproduction in rats treated with minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

18.4 Information for Men
Men should take Ximino every day on an empty stomach. The recommended dose is 1 capsule of each strength daily. Patients with information about Ximino that is written was not prescribed. Do not give Ximino to other people, even if they have the "See FDA-Approved Patient Labeling (Patient Information)."

18.5 Information for Healthcare Providers
Notify patients to avoid contraceptive failure. To avoid contraceptive failure, women should take Ximino every day on an empty stomach. The recommended dose is 1 capsule of each strength daily. Patients with information about Ximino that is written was not prescribed. Do not give Ximino to other people, even if they have the "See FDA-Approved Patient Labeling (Patient Information)."

18.6 Information for Patients: How to Administer and How to Take Ximino
"See FDA-Approved Patient Labeling (Patient Information)."

18.7 Information for Patients: Additional Information
"See FDA-Approved Patient Labeling (Patient Information)."

18.8 Information for Patients: How to Dispose of Unused Medication
"See FDA-Approved Patient Labeling (Patient Information)."

18.9 Information for Patients: Information about Ximino for Patients in the United States
"See FDA-Approved Patient Labeling (Patient Information)."

18.10 Information for Patients: How to Obtain Additional Information
"See FDA-Approved Patient Labeling (Patient Information)."

18.11 Information for Patients: How to Report SUSARs
"See FDA-Approved Patient Labeling (Patient Information)."

18.12 Information for Patients: Additional Information
"See FDA-Approved Patient Labeling (Patient Information)."

19 CONTRAINDICATIONS
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

20 INDICATIONS AND USAGE
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

21 CLINICAL PHARMACOLOGY
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

22 ADVERSE REACTIONS
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

23 WARNINGS AND PRECAUTIONS
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

24 PATIENT COUNSELING INFORMATION
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

25 CLINICAL STUDIES
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

26 HOW SUPPLIED/STORAGE AND HANDLING
Minocycline hydrochloride or placebo for a total of 12 weeks, according to the following dose and administration.

27 CLINICAL PHARMACOLOGY
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28 ADVERSE REACTIONS
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