

# Minocycline

**Source:** <http://sci.tech-archive.net/Archive/sci.med.diseases.lyme/2004-12/0705.html>

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Minocycline versus doxycycline in the treatment of Lyme neuroborreliosis:  
<http://www.journals.uchicago.edu/CID/journal/issues/v30n1/990522/990522.html>

"Minocycline is even more highly lipid soluble than doxycycline and has excellent CSF penetration making it potentially useful in treating Lyme neuroborreliosis." [...] Because minocycline is so highly lipid soluble, 100 mg orally q12h is comparable with 400-mg daily doses of doxycycline in terms of CNS concentrations which are also in excess of the MIC90 for *B. burgdorferi*."

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Adverse effects of minocycline versus doxycycline in the treatment of Lyme neuroborreliosis:  
<http://www.journals.uchicago.edu/CID/journal/issues/v30n2/991132/991132.html>

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New uses for older antibiotics  
The 'rediscovery' of four beneficial and cost-effective antimicrobials  
[http://www.postgradmed.com/issues/1997/04\\_97/cunha\\_1.htm](http://www.postgradmed.com/issues/1997/04_97/cunha_1.htm)

"Minocycline is a second-generation, long-acting tetracycline that was introduced in the same era as doxycycline. The two drugs have many common attributes: long half-life, once- or twice-daily administration, excellent bioavailability, and equivalent blood and tissue levels whether administered intravenously or orally. However, the two drugs differ in several important respects.

## CNS infection

Pharmacokinetically, minocycline and doxycycline are both highly lipid-soluble. However, compared with conventional tetracycline, minocycline is ten times more lipid-soluble whereas doxycycline is only five times more lipid-soluble. The clinical importance of this characteristic is that minocycline has particularly good tissue penetration and excellent CNS penetration; although doxycycline does penetrate the CNS, it does not do so to the degree that is achievable with minocycline."

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A Review – Dosing issues when using Minocin/Minocycline to treat Sarcoidosis  
<http://www.sarcinfo.com/minocin.htm>

"Minocycline is one of the most effective antibiotics for attacking these CWD bacteria. Dr Burke Cuhna wrote an excellent online tutorial contrasting Minocycline and Doxycycline. This explains that Minocycline has twice the tissue penetration of Doxycycline. It is therefore to be preferred for attacking these cell-dwelling microbes."

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Lancet Neurol. 2004 Dec;3(12):744–51.

The promise of minocycline in neurology.

Yong VW, Wells J, Giuliani F, Casha S, Power C, Metz LM.

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The capacity of minocycline to alleviate disease for several neurological disorders in animals is increasingly being recognised. Indeed, that one drug alone can attenuate the severity of disease in stroke, multiple sclerosis, spinal-cord injury, Parkinson's disease, Huntington's disease, and amyotrophic lateral sclerosis is astounding. In this review, we describe the evidence for the efficacy of minocycline in several animal models of neurological disease, discuss the mechanisms by which minocycline affects a range of neurological diseases with diverse causes, and introduce the emerging investigation of minocycline in clinical neurology. The encouraging results of minocycline in experimental neurology bode well for its therapeutic use in human neurological diseases.