**INDICATIONS AND USAGE**

Clindamycin Injection, USP is indicated in the treatment of serious infections caused by susceptible aerobic and anaerobic bacteria. 

**WARNING**

Because of the risk of antibiotic-associated pseudomembranous colitis, as described in the BOXED WARNING, before selecting clindamycin the physician should consider the nature of the infection and the suitability of less toxic alternatives (e.g., erythromycin).

**ADVERSE REACTIONS**

**Benzyl Alcohol Toxicity in Pediatric Patients (“Gasping Syndrome”)**

A report of 13 cases of “gasping syndrome” in infants treated with benzyl alcohol-containing solutions has been published. (See Benzyl Alcohol.)

**Associated Diarrhea**

Clindamycin phosphate has been reported to cause diarrhea, including bloody diarrhea and pseudomembranous colitis, usually associated with the association of the causative agent with *Clostridium difficile*. 

**SUPERSENSITIVITY REACTIONS**

**Skin**

Anaphylactic and Severe Hypersensitivity Reactions

Anaphylactic shock and anaphylactoid reactions have been reported (see ADVERSE REACTIONS). These reactions may occur following the injection of clindamycin, particularly if the antibiotic is administered intravenously (see ADVERSE REACTIONS).

**Respiratory System**

**Sedation**

**Special Populations**

Children:

Clindamycin Injection, USP is not recommended for routine use in neonates and infants. 

**PREGNANCY**

There are no adequate and well-controlled studies in pregnant women. Use of clindamycin in pregnant women should be limited to those instances where no safer drug can be used.

**NURSING MOTHERS**

There are no adequate studies in pregnant women. Use of clindamycin in pregnant women should be limited to those instances where no safer drug can be used.

**Geriatric Use**

The pharmacokinetic parameters for clindamycin were determined in elderly volunteers (18 to 30 years old). The mean elimination half-life of clindamycin and its active metabolite was 3 to 5 hours in the elderly compared to 2.5 hours in younger adults. The plasma elimination half-life of clindamycin and its active metabolite was 3 to 5 hours in the elderly compared to 2.5 hours in younger adults. The half-life of clindamycin and its active metabolite was 2.5 hours in the elderly compared to 2.5 hours in younger adults. 

**CLINICAL PHARMACOLOGY**

**Resistance**

Resistance to clindamycin in streptococci is often caused by modification of specific bases of the 23S ribosomal RNA. Cross-resistance is sometimes observed among streptococci, pneumococci, and streptomyces. Most isolates of resistant organisms exhibit superinfection to clindamycin. 

**Mechanism of Action**

Clindamycin is a semisynthetic antibiotic produced by a fermentation of the 2-methyl-4-nitrophenyl group of the parent compound lincomycin. 

**PHARMACOKINETICS**

**Elderly Patients**

Clindamycin half-life is increased in patients with renal impairment. 

**Reno-Hepatic Impairment**

Clindamycin is rapidly metabolized and excreted in the urine. 

**Known Sensitivity**

Clindamycin and lincomycin have cross-sensitivity with certain streptococci, pneumococci, and other bacteria. 

**Hepatic Disease**

Clindamycin is almost completely bound to plasma proteins. 

**Renal Disease**

In the treatment of serious infections, it should be administered at the usual dosage schedule of 900 mg IV in 30 min q8h. 

**CLINDAMYcin Injection, USP**

**Dosage and Administration**

Clindamycin Injection, USP is indicated in the treatment of serious infections caused by susceptible aerobic and anaerobic bacteria. 

**CLINDAMYcin Injection, USP**

**DOSAGE AND ADMINISTRATION**

Clindamycin Injection, USP is indicated in the treatment of serious infections caused by susceptible aerobic and anaerobic bacteria. 

**SIDE EFFECTS**

Clindamycin Injection, USP is not recommended for routine use in neonates and infants. 

**PHARMACOKINETICS**

Clindamycin Injection, USP is indicated in the treatment of serious infections caused by susceptible aerobic and anaerobic bacteria. 

**CLINDAMYcin Injection, USP**

**DOSAGE AND ADMINISTRATION**

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**SIDE EFFECTS**

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**DOSAGE AND ADMINISTRATION**

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**PHARMACOKINETICS**

Clindamycin Injection, USP is indicated in the treatment of serious infections caused by susceptible aerobic and anaerobic bacteria. 

**CLINDAMYcin Injection, USP**

**DOSAGE AND ADMINISTRATION**

Clindamycin Injection, USP is indicated in the treatment of serious infections caused by susceptible aerobic and anaerobic bacteria. 

**SIDE EFFECTS**

Clindamycin Injection, USP is not recommended for routine use in neonates and infants.
Usage in Neutrophils and Lymphocytes
- They can produce a specific type of reactive oxygen species required for bacterial killing.

Usage in Monocytes
- They can produce a specific type of reactive oxygen species required for the protection of the host against infection.

Usage in Endothelial Cells
- They can produce a specific type of reactive oxygen species required for the regulation of blood flow.