

PI Major Mutations:None

PI Accessory Mutations:None

PR Other Mutations:[V11Q](#) • [T12C](#) • [I13*](#) • [K14*](#) • [I15N](#) • [G16R](#) • [Q18T](#) • [E35D](#) • [M36I](#) • [R41K](#) • [K45R](#) • [R57K](#) • [L63T](#) • [E65K](#) • [H69K](#) • [L89M](#)

Protease Inhibitors	
atazanavir/r (ATV/r)	Susceptible
darunavir/r (DRV/r)	Susceptible
fosamprenavir/r (FPV/r)	Susceptible
indinavir/r (IDV/r)	Susceptible
lopinavir/r (LPV/r)	Susceptible
nelfinavir (NFV)	Susceptible
saquinavir/r (SQV/r)	Susceptible
tipranavir/r (TPV/r)	Susceptible

No drug resistance mutations were found for PI.

NRTI Mutations:[K65R](#) • [V75M](#) • [M184V](#) • [K219N](#)

NNRTI Mutations:[K103N](#) • [V106I](#) • [V179T](#) • [G190A](#)

RT Other Mutations:[E6N](#) • [V8I](#) • [V35T](#) • [V60I](#) • [S68K](#) • [K122E](#) • [D123N](#) • [I135T](#) • [K173L](#) • [Q174K](#) • [D177E](#) • [T200A](#) • [I202V](#) • [Q207A](#) • [R211S](#) • [K238X](#) • [V245Q](#) • [P247X](#) • [Δ263-264](#) • [W266*](#) • [A267M](#) • [S268G](#) • [Q269S](#) • [I270Q](#) • [Y271F](#) • [A272M](#) • [G273Q](#) • [I274D](#) • [Q278H](#) • [L279W](#) • [K281X](#) • [T286A](#) • [L289P](#) • [T290N](#) • [E291R](#) • [V292R](#) • [I293W](#)

Nucleoside Reverse Transcriptase Inhibitors		Non-nucleoside Reverse Transcriptase Inhibitors	
abacavir (ABC)	High-Level Resistance	doravirine (DOR)	Potential Low-Level Resistance
zidovudine (AZT)	Susceptible	efavirenz (EFV)	High-Level Resistance
stavudine (D4T)	High-Level Resistance	etravirine (ETR)	Low-Level Resistance
didanosine (DDI)	High-Level Resistance	nevirapine (NVP)	High-Level Resistance
emtricitabine (FTC)	High-Level Resistance	rilpivirine (RPV)	Low-Level Resistance
lamivudine (3TC)	High-Level Resistance		
tenofovir (TDF)	Intermediate Resistance		

RT comments

NRTI

- K65R** confers intermediate reductions in susceptibility to TDF, ABC, and 3TC/FTC. It increases AZT susceptibility. In NRTI-experienced, INSTI-naïve patients with **K65R**, TDF+3TC+DTG is usually highly effective and more effective than AZT/3TC/DTG. However, in patients receiving TDF+3TC+DTG, there is a risk of emergent DTG resistance that does not arise in NRTI-naïve patients receiving TDF+3TC+DTG.
- V75T/M/A/S** are nonpolymorphic accessory NRTI-selected mutations. They appear to have minimal phenotypic effects on AZT, ABC, and TDF.
- M184V/I** cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). **M184V/I** are not contraindications to continued treatment with 3TC or FTC because they increase susceptibility to AZT and TDF and are associated with clinically significant reductions in HIV-1 replication.
- K219E/Q/N/R** are accessory TAMS that usually occur in combination with multiple other TAMS.

NNRTI

- K103N** is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.
- V106I** occurs in 1% to 2% of viruses from untreated persons. It contributes to reduced NNRTI susceptibility only in combination with other NNRTI-resistance mutations. It is commonly selected in persons receiving DOR in combination with mutations at position 227.
- V179T** is a rare non-polymorphic mutation occasionally selected in persons receiving NNRTIs. It is associated with minimal, if any, reduction in ETR and RPV susceptibility.
- G190A** is a non-polymorphic mutation that causes high-level resistance to NVP and intermediate resistance to EFV. It does not significantly reduce susceptibility to RPV, ETR, or DOR.

- This virus is predicted to have low-level reduced susceptibility to **RPV**. The use of the combination of CAB/**RPV** should be considered to be relatively contraindicated.

Drug resistance mutation scores of NRTI:

Download CSV



Rule	ABC ↕	AZT ↕	D4T ↕	DDI ↕	FTC ↕	3TC ↕	TDF ↕
K65R	45	-10	60	60	30	30	50
M184V	15	-10	-10	10	60	60	-10
K219N	5	10	10	5	0	0	5
V75M	0	10	30	15	0	0	0
Total	65	0	90	90	90	90	45

Drug resistance mutation scores of NNRTI:

Download CSV



Rule	DOR ↕	EFV ↕	ETR ↕	NVP ↕	RPV ↕
V106I	10	0	10	10	10
K103N	0	60	0	60	0
G190A	0	45	10	60	15
Total	10	105	20	130	25

Drug resistance interpretation: PR	HIVDB 9.5.1 (2023-11-05)
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PI Major Mutations: None

PI Accessory Mutations: None

PR Other Mutations: T12M • I13* • K14* • E21X • E35D • M36I • R41K • R57K • L63P • H69K • K70R • L89M

Protease Inhibitors	
atazanavir/r (ATV/r)	Susceptible
darunavir/r (DRV/r)	Susceptible
fosamprenavir/r (FPV/r)	Susceptible
indinavir/r (IDV/r)	Susceptible
lopinavir/r (LPV/r)	Susceptible
nelfinavir (NFV)	Susceptible
saquinavir/r (SQV/r)	Susceptible
tipranavir/r (TPV/r)	Susceptible

Mutation scoring: PR HIVDB 9.5.1 (2023-11-05)

No drug resistance mutations were found for PI.

Drug resistance interpretation: RT HIVDB 9.5.1 (2023-11-05)

NRTI Mutations: M184V

NNRTI Mutations: K101H • G190A • F227I

RT Other Mutations: K11T • K20R • V21I • V35T • T39R • K122E • D123N • I135T • I142T • K173S • D177G • V179I • Q207N • R211X • Δ220 • H221X • Q222H • K223Q • E224K • P225N • L228S • P236S • D237* • K238Q • V245Q • P247Q • E248T • K249R • D250E • S251L • W252T • T253V • V254M • N255I • D256Y • I257R

Nucleoside Reverse Transcriptase Inhibitors		Non-nucleoside Reverse Transcriptase Inhibitors	
abacavir (ABC)	Low-Level Resistance	doravirine (DOR)	High-Level Resistance
zidovudine (AZT)	Susceptible	efavirenz (EFV)	High-Level Resistance
stavudine (D4T)	Susceptible	etravirine (ETR)	Low-Level Resistance
didanosine (DDI)	Potential Low-Level Resistance	nevirapine (NVP)	High-Level Resistance
emtricitabine (FTC)	High-Level Resistance	rilpivirine (RPV)	Low-Level Resistance
lamivudine (3TC)	High-Level Resistance		
tenofovir (TDF)	Susceptible		

RT comments
<p>NRTI</p> <ul style="list-style-type: none"> ▪ M184V/I cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). M184V/I are not contraindications to continued treatment with 3TC or FTC because they increase susceptibility to AZT and TDF and are associated with clinically significant reductions in HIV-1 replication. <p>NNRTI</p> <ul style="list-style-type: none"> ▪ K101H is a non-polymorphic accessory mutation selected by NVP, EFV and ETR. When present with other NNRTI-resistance mutations, it contributes reduces susceptibility to these NNRTIs. ▪ G190A is a non-polymorphic mutation that causes high-level resistance to NVP and intermediate resistance to EFV. It does not significantly reduce susceptibility to RPV, ETR, or DOR. ▪ F227L is a non-polymorphic mutation that usually occurs in combination with V106A. It is selected in vivo and in vitro with both NVP and DOR. In this context it is associated with high-level reductions in NVP and DOR susceptibility and intermediate reductions in EFV susceptibility. F227I/V are extremely rare mutations that have been selected in vitro by DOR. <p>Other</p> <ul style="list-style-type: none"> ▪ V179I is a polymorphic mutation that is frequently selected in persons receiving ETR and RPV. However, it has little, if any, direct effect on NNRTI susceptibility. ▪ P225H is a non-polymorphic EFV-selected mutation that usually occurs in combination with K103N. The combination of P225H and K103N synergistically reduces NVP, EFV and DOR susceptibility. P225N is a highly unusual mutation at this position. ▪ P236L is a rare mutation selected commonly by DLV, which appears to have little if any effect on current NNRTIs. P236S is a highly unusual mutation at this position. ▪ K238T/N are uncommon non-polymorphic mutations selected in persons receiving NVP and EFV usually in combination with K103N. Alone, K238T/N appear to have minimal effects on NNRTI susceptibility. K238Q is a highly unusual mutation at this position. ▪ This virus is predicted to have low-level reduced susceptibility to RPV. The use of the combination of CAB/RPV should be considered to be relatively contraindicated.

Drug resistance mutation scores of NRTI:

Download CSV

Rule	ABC	AZT	D4T	DDI	FTC	3TC	TDF
<u>M184V</u>	15	-10	-10	10	60	60	-10

Drug resistance mutation scores of NNRTI:

Download CSV

Rule	DOR	EFV	ETR	NVP	RPV
<u>F227I</u>	60	10	0	30	0
<u>K101H</u>	0	10	10	15	10
<u>G190A</u>	0	45	10	60	15
Total	60	65	20	105	25

PI Major Mutations:None

PI Accessory Mutations:None

PR Other Mutations:[L10G](#) • [V11*](#) • T12V • I13S • K14N • [I15D](#) • G16R • Q18M • K20Q • L33V • M36I • R41K • L63P • I64V • I72V

Protease Inhibitors	
atazanavir/r (ATV/r)	Susceptible
darunavir/r (DRV/r)	Susceptible
fosamprenavir/r (FPV/r)	Susceptible
indinavir/r (IDV/r)	Susceptible
lopinavir/r (LPV/r)	Susceptible
nelfinavir (NFV)	Susceptible
saquinavir/r (SQV/r)	Susceptible
tipranavir/r (TPV/r)	Susceptible

PR comments

Other

- L10F is a common non-polymorphic, PI-selected accessory mutation associated with reduced in vitro susceptibility to LPV and DRV. L10I/V are polymorphic, PI-selected accessory mutations that increase the replication of viruses with other PI-resistance mutations. L10R/Y are rare, non-polymorphic PI-selected mutations. Their effects on PI susceptibility have not been well studied. **L10G** is a highly unusual mutation at this position.
- L33I/V** are minimally polymorphic mutations that do not appear to be selected by PIs or to reduce their susceptibility.

No drug resistance mutations were found for PI.

NRTI Mutations:[K70Q](#) • [M184I](#)

NNRTI Mutations:[K101E](#) • [K103N](#) • [G190A](#)

RT Other Mutations:V35I • T39E • V60I • V90I • S105T • D121Y • K122E • I135K • Q174R • D177E • I178V • T200I • Q207E • R211K • [K219X](#) • [P225X](#) • P226S • L228R • P236S • [L246T](#) • P247A • E248R • D250E • [N255M](#) • [D256I](#) • [I257Y](#) • Q258R • [K259V](#) • L260V • [V261E](#) • [G262N](#) • [L264W](#)

Nucleoside Reverse Transcriptase Inhibitors		Non-nucleoside Reverse Transcriptase Inhibitors	
abacavir (ABC)	Intermediate Resistance	doravirine (DOR)	Low-Level Resistance
zidovudine (AZT)	Susceptible	efavirenz (EFV)	High-Level Resistance
stavudine (D4T)	Low-Level Resistance	etravirine (ETR)	Intermediate Resistance
didanosine (DDI)	Low-Level Resistance	nevirapine (NVP)	High-Level Resistance
emtricitabine (FTC)	High-Level Resistance	rilpivirine (RPV)	High-Level Resistance
lamivudine (3TC)	High-Level Resistance		
tenofovir (TDF)	Low-Level Resistance		

RT comments

NRTI

- K70E/Q/N/T/S/G** cause low-leve resistance to ABC and TDF.
- M184V/I** cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). **M184V/I** are not contraindications to continued treatment with 3TC or FTC because they increase susceptibility to AZT and TDF and are associated with clinically significant reductions in HIV-1 replication.

NNRTI

- K101E** is a non-polymorphic accessory mutation that confers intermediate resistance to NVP and RPV and low-level reductions in susceptibility to EFV, ETR, and DOR when it occurs with other NNRTI-resistance mutations.
- K103N** is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.
- G190A** is a non-polymorphic mutation that causes high-level resistance to NVP and intermediate resistance to EFV. It does not significantly reduce susceptibility to RPV, ETR, or DOR.

Other

- V90I** is a polymorphic accessory mutation weakly selected by each of the NNRTIs. It is associated with minimal, if any, detectable reduction in NNRTI susceptibility.
- P236L is a rare mutation selected commonly by DLV, which appears to have little if any effect on current NNRTIs. **P236S** is a highly unusual mutation at this position.

Drug resistance mutation scores of NRTI:

Download CSV

Rule	ABC	AZT	D4T	DDI	FTC	3TC	TDF
<u>K70Q</u>	15	0	15	15	10	10	15
<u>M184I</u>	15	-10	-10	10	60	60	-10
<u>K70Q + M184I</u>	0	0	10	0	0	0	10
Total	30	-10	15	25	70	70	15

Drug resistance mutation scores of NNRTI:

Download CSV

Rule	DOR	EFV	ETR	NVP	RPV
<u>K101E</u>	15	15	15	30	45
<u>K101E + G190A</u>	5	0	5	0	0
<u>K103N</u>	0	60	0	60	0
<u>G190A</u>	0	45	10	60	15
<u>K101E + M184I</u>	0	0	0	0	15
Total	20	120	30	150	75

PI Major Mutations:None

PI Accessory Mutations:**K20T**

PR Other Mutations:**L10G** • **V11N** • **T12F** • I13S • **G16C** • G17R • Q18K • E35D • M36I • R41K • K45R • R57K • H69K • L89M

Protease Inhibitors	
atazanavir/r (ATV/r)	Susceptible
darunavir/r (DRV/r)	Susceptible
fosamprenavir/r (FPV/r)	Susceptible
indinavir/r (IDV/r)	Susceptible
lopinavir/r (LPV/r)	Susceptible
nelfinavir (NFV)	Low-Level Resistance
saquinavir/r (SQV/r)	Susceptible
tipranavir/r (TPV/r)	Susceptible

PR comments

Accessory

- K20T** is a non-polymorphic accessory PI-selected mutation associated with reduced susceptibility to ATV and LPV.

Other

- L10F is a common non-polymorphic, PI-selected accessory mutation associated with reduced in vitro susceptibility to LPV and DRV. L10I/V are polymorphic, PI-selected accessory mutations that increase the replication of viruses with other PI-resistance mutations. L10R/Y are rare, non-polymorphic PI-selected mutations. Their effects on PI susceptibility have not been well studied. **L10G** is a highly unusual mutation at this position.

Drug resistance mutation scores of PI:

Download CSV



Rule	ATV/r ⚖	DRV/r ⚖	FPV/r ⚖	IDV/r ⚖	LPV/r ⚖	NFV ⚖	SQV/r ⚖	TPV/r ⚖
<u>K20T</u>	5	0	5	5	0	15	5	0

NRTI Mutations:**M184V**

NNRTI Mutations:**K103N**

RT Other Mutations:P4Q • K11T • K20R • V21I • E28K • K32E • V35T • T39N • V60I • K101A • K122E • D123N • I135T • K173A • Q174K • **I195X** • T200A • Q207E • R211K • **K219X** • P236S • **D237*** • K238Q • V245Q • P247Q • D250E • S251C • T253N • **V254C** • **N255H** • **L260S** • **V261S** • L264I • **N265X** • **A267V** • A272P • **I274S** • K275S • **V276K** • **K277A** • **Q278L** • **L279C** • **C280R** • **K281T** • **L283S** • **R284D** • **G285R** • T286S • **K287L** • A288K • **L289P** • **T290L** • E291N • **V292R** • **I293M**

Nucleoside Reverse Transcriptase Inhibitors	
abacavir (ABC)	Low-Level Resistance
zidovudine (AZT)	Susceptible
stavudine (D4T)	Susceptible
didanosine (DDI)	Potential Low-Level Resistance
emtricitabine (FTC)	High-Level Resistance
lamivudine (3TC)	High-Level Resistance
tenofovir (TDF)	Susceptible

Non-nucleoside Reverse Transcriptase Inhibitors	
doravirine (DOR)	Susceptible
efavirenz (EFV)	High-Level Resistance
etravirine (ETR)	Susceptible
nevirapine (NVP)	High-Level Resistance
rilpivirine (RPV)	Susceptible

RT comments

NRTI

- **M184V/I** cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). **M184V/I** are not contraindications to continued treatment with 3TC or FTC because they increase susceptibility to AZT and TDF and are associated with clinically significant reductions in HIV-1 replication.

NNRTI

- **K103N** is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.

Other

- **K101N/A/T** are uncommon non-polymorphic NNRTI-selected mutation of uncertain phenotypic and clinical significance.
- P236L is a rare mutation selected commonly by DLV, which appears to have little if any effect on current NNRTIs. **P236S** is a highly unusual mutation at this position.
- K238T/N are uncommon non-polymorphic mutations selected in persons receiving NVP and EFV usually in combination with K103N. Alone, K238T/N appear to have minimal effects on NNRTI susceptibility. **K238Q** is a highly unusual mutation at this position.

Mutation scoring: RT

HIVDB 9.5.1 (2023-11-05)

Drug resistance mutation scores of NRTI:

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Rule	ABC ↕	AZT ↕	D4T ↕	DDI ↕	FTC ↕	3TC ↕	TDF ↕
<u>M184V</u>	15	-10	-10	10	60	60	-10

Drug resistance mutation scores of NNRTI:

Download CSV



Rule	DOR ↕	EFV ↕	ETR ↕	NVP ↕	RPV ↕
<u>K103N</u>	0	60	0	60	0

PI Major Mutations:None

PI Accessory Mutations:None

PR Other Mutations:

V11W

 • T12L • I13A • K14Q • I15S • G16R • Q18K • L19I •

K20H

 • E35D • M36I • R41K • R57K • H69K • L89M

Protease Inhibitors	
atazanavir/r (ATV/r)	Susceptible
darunavir/r (DRV/r)	Susceptible
fosamprenavir/r (FPV/r)	Susceptible
indinavir/r (IDV/r)	Susceptible
lopinavir/r (LPV/r)	Susceptible
nelfinavir (NFV)	Susceptible
saquinavir/r (SQV/r)	Susceptible
tipranavir/r (TPV/r)	Susceptible

No drug resistance mutations were found for PI.

NRTI Mutations:

M41L

 •

E44D

 •

S68G

 •

L74I

 •

M184V

 •

L210W

 •

T215Y

 •

K219N

NNRTI Mutations:

A98G

 •

K103N

 •

V108I

 •

H221Y

RT Other Mutations:E6D • K20R • V35T • V60I • V118I • K122E • D123N • I142V • S162N • K166R • F171Y • K173A • Q174K • D177E • I178M • V179I • T200A • I202V • E203D • Q207A • R211N •

K223X

 •

P226H

 •

L234X

 • P236S •

K238X

 •

T240D

 •

V241S

 • P243S • V245Q • P247Q • K249Q •

N255M

 •

D256I

 •

I257Y

 • Q258R • K259N •

L260S

 • V261G •

G262K

 •

K263L

 •

L264M

 •

Δ265-266

 •

A267X

 •

S268Q

 •

Q269S

 • A272S •

K277E

 • Q278A • L279T •

C280G

 •

K281V

 •

L282N

 • L283F •

R284F

 •

G285K

Nucleoside Reverse Transcriptase Inhibitors		Non-nucleoside Reverse Transcriptase Inhibitors	
abacavir (ABC)	High-Level Resistance	doravirine (DOR)	Intermediate Resistance
zidovudine (AZT)	High-Level Resistance	efavirenz (EFV)	High-Level Resistance
stavudine (D4T)	High-Level Resistance	etravirine (ETR)	Low-Level Resistance
didanosine (DDI)	High-Level Resistance	nevirapine (NVP)	High-Level Resistance
emtricitabine (FTC)	High-Level Resistance	rilpivirine (RPV)	Intermediate Resistance
lamivudine (3TC)	High-Level Resistance		
tenofovir (TDF)	High-Level Resistance		

RT comments

NRTI

- **M41L** is a TAM that usually occurs with T215Y. In combination, **M41L** plus T215Y confer intermediate / high-level resistance to AZT and d4T and contribute to reduced ddl, ABC and TDF susceptibility.
- **E44D** is a relatively non-polymorphic accessory mutation; E44A is a nonpolymorphic accessory mutation. Each usually occurs with multiple TAMs.
- **S68G** is a polymorphic mutation that is often selected in combination with K65R. It partially restores the replication defect associated with K65R.
- L74V causes intermediate ABC resistance. **L74I** causes low-level ABC resistance.
- **M184V/I** cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). **M184V/I** are not contraindications to continued treatment with 3TC or FTC because they increase susceptibility to AZT and TDF and are associated with clinically significant reductions in HIV-1 replication.
- **L210W** is a TAM that usually occurs in combination with M41L and T215Y. The combination of M41, **L210W** and T215Y causes high-level resistance to AZT and intermediate resistance to ABC and TDF.
- **T215Y/F** are TAMs that causes intermediate/high-level resistance to AZT and potentially low-level resistance to ABC and TDF.
- **K219E/Q/N/R** are accessory TAMS that usually occur in combination with multiple other TAMs.

NNRTI

- **A98G** is a non-polymorphic accessory mutation associated with low-level reduced susceptibility to each of the NNRTIs.
- **K103N** is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.
- **V108I** is a relatively non-polymorphic accessory mutation selected in vitro and/or in vivo with each of the NNRTIs. It appears to contribute to reduced susceptibility to most NNRTIs only in combination with other NNRTI-resistance mutations.
- **H221Y** is a non-polymorphic accessory mutation selected primarily by NVP, RPV, and DOR. It frequently occurs in combination with Y181C.

Other

- **V118I** is a polymorphic accessory NRTI-resistance mutation that often occurs in combination with multiple TAMs.
- **V179I** is a polymorphic mutation that is frequently selected in persons receiving ETR and RPV. However, it has little, if any, direct effect on NNRTI susceptibility.
- P236L is a rare mutation selected commonly by DLV, which appears to have little if any effect on current NNRTIs. **P236S** is a highly unusual mutation at this position.

- This virus is predicted to have intermediate-level reduced susceptibility to **RPV**. The use of the combination of CAB/**RPV** should be considered to be contraindicated.

Mutation scoring: RT

HIVDB 9.5.1 (2023-11-05)

Drug resistance mutation scores of NRTI:

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Rule	ABC ⚡	AZT ⚡	D4T ⚡	DDI ⚡	FTC ⚡	3TC ⚡	TDF ⚡
<u>M41L</u>	5	15	15	10	0	0	5
<u>M41L + E44D + L210W + T215Y</u>	5	5	5	5	0	0	5
<u>M41L + M184V + T215Y</u>	10	0	0	0	0	0	0
<u>M41L + L210W</u>	10	10	10	10	0	0	10
<u>M41L + L210W + T215Y</u>	10	0	0	0	15	15	10
<u>M41L + T215Y</u>	10	10	10	10	5	5	10
<u>L74I</u>	15	0	0	60	0	0	5
<u>M184V</u>	15	-10	-10	10	60	60	-10
<u>L210W</u>	5	15	15	10	0	0	5
<u>L210W + T215Y</u>	10	10	10	10	0	0	10
<u>T215Y</u>	10	60	40	15	0	0	10
<u>K219N</u>	5	10	10	5	0	0	5
Total	110	125	105	145	80	80	65

Drug resistance mutation scores of NNRTI:

Download CSV



Rule	DOR ⚙	EFV ⚙	ETR ⚙	NVP ⚙	RPV ⚙
<u>A98G</u>	15	15	10	30	15
<u>V108I</u>	10	10	0	15	0
<u>H221Y</u>	10	10	10	15	15
<u>K103N</u>	0	60	0	60	0
Total	35	95	20	120	30

Drug resistance interpretation: PR

HIVDB 9.5.1 (2023-11-05)

PI Major Mutations:

None

PI Accessory Mutations:

None

PR Other Mutations:

V11G • T12S • I13S • K14R • L33V • M36I • N37D • P39Q • R41K • R57K • D60E • I62V • L63P • I64V

Protease Inhibitors

atazanavir/r (ATV/r)

Susceptible

darunavir/r (DRV/r)

Susceptible

fosamprenavir/r (FPV/r)

Susceptible

indinavir/r (IDV/r)

Susceptible

lopinavir/r (LPV/r)

Susceptible

nelfinavir (NFV)

Susceptible

saquinavir/r (SQV/r)

Susceptible

tipranavir/r (TPV/r)

Susceptible

PR comments

Other

•

L33I/V are minimally polymorphic mutations that do not appear to be selected by PIs or to reduce their susceptibility.

Mutation scoring: PR	HIVDB 9.5.1 (2023-11-05)
No drug resistance mutations were found for PI.	

Drug resistance interpretation: RT		HIVDB 9.5.1 (2023-11-05)
NRTI Mutations:	L74I • M184V	
NNRTI Mutations:	K103N • E138G • V179L • H221Y	
RT Other Mutations:	K20R • V35I • K49R • V60I • K102H • D121Y • K122E • I135T • S162C • D177E • I178L • T200A • R206K • Q207G • R211K • D237E • Δ245 • L246H • P247C • E248R • D250E • N255X • G262X • A272P	

Nucleoside Reverse Transcriptase Inhibitors		Non-nucleoside Reverse Transcriptase Inhibitors	
abacavir (ABC)	Intermediate Resistance	doravirine (DOR)	Potential Low-Level Resistance
zidovudine (AZT)	Susceptible	efavirenz (EFV)	High-Level Resistance
stavudine (D4T)	Susceptible	etravirine (ETR)	Intermediate Resistance
didanosine (DDI)	High-Level Resistance	nevirapine (NVP)	High-Level Resistance
emtricitabine (FTC)	High-Level Resistance	rilpivirine (RPV)	Intermediate Resistance
lamivudine (3TC)	High-Level Resistance		
tenofovir (TDF)	Susceptible		

RT comments	
NRTI	
• L74V causes intermediate ABC resistance. L74I causes low-level ABC resistance.	
• M184V/I cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). M184V/I are not contraindications to continued treatment with 3TC or FTC because they increase susceptibility to AZT and TDF and are associated with clinically significant reductions in HIV-1 replication.	
NNRTI	
• K103N is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.	
• E138Q/G are non-polymorphic accessory mutations selected by ETR occasionally NVP and EFV. They cause low-level reductions in susceptibility to NVP, RPV, and ETR.	
• V179L is a rare non-polymorphic mutation listed as a RPV-associated resistance mutation by the FDA package insert. Its effects on NNRTI susceptibility have not been well studied.	
• H221Y is a non-polymorphic accessory mutation selected primarily by NVP, RPV, and DOR. It frequently occurs in combination with Y181C.	
• This virus is predicted to have intermediate-level reduced susceptibility to RPV. The use of the combination of CAB/RPV should be considered to be contraindicated.	

RT comments

NRTI

- L74V causes intermediate ABC resistance. **L74I** causes low-level ABC resistance.
- **M184V/I** cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). **M184V/I** are not contraindications to continued treatment with 3TC or FTC because they increase susceptibility to AZT and TDF and are associated with clinically significant reductions in HIV-1 replication.

NNRTI

- **K103N** is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.
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- This virus is predicted to have intermediate-level reduced susceptibility to **RPV**. The use of the combination of CAB/**RPV** should be considered to be contraindicated.

Mutation scoring: RT

HIVDB 9.5.1 (2023-11-05)

Drug resistance mutation scores of NRTI:

Download CSV



Rule	ABC ↕	AZT ↕	D4T ↕	DDI ↕	FTC ↕	3TC ↕	TDF ↕
L74I	15	0	0	60	0	0	5
M184V	15	-10	-10	10	60	60	-10
Total	30	-10	-10	70	60	60	-5

Drug resistance mutation scores of NNRTI:

Download CSV



Rule	DOR ↕	EFV ↕	ETR ↕	NVP ↕	RPV ↕
H221Y	10	10	10	15	15
K103N	0	60	0	60	0
E138G	0	10	10	10	15
V179L	0	10	10	10	15
Total	10	90	30	95	45