

PI Major Mutations:

PI Accessory Mutations:

PR Other Mutations:

184IV

100%

100%

1.21%

100%

1.26%

L10LF

100%

100%

1.22%

100%

1.04%

K20T

100%

100%

1.5%

100%

1.03%

L89T

100%

100%

1.03%

I13V

100%

100%

1.21%

100%

1.04%

K14R

100%

100%

1.54%

G17D

100%

100%

1.74%

E35D

100%

100%

2.05%

M36I

100%

100%

2.05%

R41K

100%

100%

2.02%

K43R

100%

100%

1.34%

R57K

100%

100%

1.71%

L63P

100%

100%

1.61%

H69K

100%

100%

1.60%

A71GI

100%

100%

1.17%

100%

1.60%

I72IV

100%

100%

1.14%

100%

1.51%

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

- PR comments
- Major
- 184V

is a nonpolymorphic substrate-cleft mutation selected by each of the PIs. 184V reduces susceptibility to LPV, ATV, and DRV.
- Accessory
- L10F

is a common non-polymorphic, PI-selected accessory mutation associated with reduced in vitro susceptibility to LPV and DRV.

K20T

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

L89V

is a nonpolymorphic accessory mutation weakly selected by each of the PIs. It appears to be minimally associated with reduced PI susceptibility. L89T is an uncommon non-polymorphic PI-selected mutation selected primarily by ATV.
- Other
- A71I/L

are non-polymorphic, PI-selected accessory mutations that appear to increase the replication of viruses with other PI-resistance mutations.

There is evidence for low-level DRV resistance. If DRV is administered it should be used twice daily.

Drug resistance mutation scores of PI:

Download CSV

Rule	ATV/r	DRV/r	FPV/r	IDV/r	LPV/r	NFV	SQV/r	TPV/r
K20T	5	0	5	5	0	15	5	0
184IV	60	15	60	60	30	60	60	30
L10LF	0	5	15	10	5	15	0	0
Total	65	20	80	75	35	90	65	30

NRTI Mutations:

NNRTI Mutations:

RT Other Mutations:

V35T

100%

100%

1.03%

100%

1.04%

T39A

100%

100%

1.05%

A554S

100%

100%

1.22%

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

No drug resistance mutations were found for NRTI.

No drug resistance mutations were found for NNRTI.

INSTI Major Mutations:

INSTI Accessory Mutations:

IN Other Mutations:

G140S100%  
from 6,291

•

Q148H100%  
from 15,847

T97A100%  
from 2,323

K14R100%  
from 1,221

•

P30PS100%  
P: 80%  
S: 17%  
from 328

•

V31I100%  
from 13,84

•

D35N100%  
from 17,32

•

I60V100%  
from 5079

•

L63I100%  
from 12,121

•

L74I100%  
from 1,899

•

L101I100%  
from 2,296

•

T112L100%  
from 1,800

•

T124A100%  
from 1,541

•

T125A100%  
from 1,541

•

K136Q100%  
from 1,655

•

K160R100%  
from 1,512

•

D167E100%  
from 1,829

•

V201I100%  
from 2,280

•

L234I100%  
from 2,705

•

S283G100%  
from 2,801

Integrase Strand Transfer Inhibitors	
bictegravir (BIC)	High-Level Resistance
cabotegravir (CAB)	High-Level Resistance
dolutegravir (DTG)	High-Level Resistance
elvitegravir (EVG)	High-Level Resistance
raltegravir (RAL)	High-Level Resistance

IN comments

Major

- G140S/A/C are non-polymorphic mutations that usually occur with Q148 mutations. Alone, they have minimal effects on INSTI susceptibility. However, in combination with Q148 mutations they are associated with high-level resistance to RAL and EVG and intermediate reductions in DTG and BIC susceptibility.
- Q148H/K/R are nonpolymorphic mutations reported in persons receiving RAL, EVG, CAB, and DTG. They nearly always occur in combination with G140A/S or E138K. In this setting they are associated with near complete resistance to RAL and EVG, high-levels of reduction in CAB susceptibility, and low-to-intermediate reductions in DTG and BIC susceptibility.

Accessory

- T97A is a polymorphic INSTI-selected mutation that, depending on subtype, occurs in 1% to 3% of viruses from untreated persons. Alone, it has minimal effects on INSTI susceptibility but in combination with other major resistance mutations, it synergistically reduces susceptibility to each of the INSTIs.

Other

- L74I is a highly polymorphic mutation with a prevalence of 3% to 30% depending on subtype. It is the consensus amino acid in subtype A viruses belonging to the A6 clade. It does not appear to be selected by any of the INSTIs or to reduce their susceptibility.
- There is evidence for high-level DTG resistance. If DTG is used, it should be administered twice daily.

Drug resistance mutation scores of INSTI:

Download CSV

Rule	BIC	CAB	DTG	EVG	RAL
L74I + Q148H	15	15	15	15	15
T97A + Q148H	15	20	15	0	0
G140S	10	10	10	30	30
G140S + Q148H	10	20	10	0	0
Q148H	25	30	25	60	60
T97A	0	0	0	10	10
Total	75	95	75	115	115