PatientID: HDR107

Okitobba 06, 2023

Color Code

HR: High-Level Resistance
LR: Low-Level Resistance
IR: Intermediate Resistance

S: Susceptible

DRUG.CLASS	DRUG	RESISTANCE.PROFILE	DRMS.above.20.percent.prevalence
PI	ATV	S	
	DRV	\mathbf{S}	
	FPV	\mathbf{S}	
	IDV	${f S}$	
	LPV	${f S}$	
	NFV	${f S}$	
	SQV	\mathbf{S}	
	TPV	${f S}$	
NRTI	ABC	$_{ m HR}$	
	AZT	\mathbf{S}	
	D4T	IR	
	DDI	$_{ m HR}$	K65R;L74I;M184V
	FTC	$_{ m HR}$	
	LMV	$_{ m HR}$	
	TDF	IR	
NNRTI	DOR	IR	
	EFV	$_{ m HR}$	
	ETR	IR	L100I;Y188H;K103N
	NVP	$_{ m HR}$	
	RPV	$_{ m HR}$	

Appendix

Drug abbreviations in full

DRUG.CLASS	ABBREVIATION	DRUG.NAME
	ATV	Atazanavir
	DRV	Darunavir
	FPV	Fosamprenavir
PI	IDV	Indinavir
11	LPV	Lopinavir
	NFV	Nelfinavir
	SQV	Saquinavir
	TPV	Tipranavir
	ABC	Abacavir
	AZT	Azidothymidine
	DFT	Stavudine
NRTI	DDI	Didanosine
	FTC	Emtricitabine
	LMV	Lamivudine
	TDF	Tenofovir
	DOR	Doravirine
	EFV	Efavirenz
NNRTI	ETR	Etravirine
	NVP	Nevirapine
	RPV	Rilpivirine
	BIC	Bictegravir
	CAB	Cabotegravir
INSTI	DTG	Dolutegravir
	EVG	Elvitegravir
	RAL	Raltegravir

Comments

DRUG.CLASS	COMMENTS
PI	
NRTI	K65R confers intermediate reductions in susceptibility to TDF, ABC, and 3TC/FTC. It increases AZT susceptibility. In NRTI-experienced, INSTI-naive 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-naive patients receiving TDF+3TC+DTG. 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.
	K103N is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM. L100I is a non-polymorphic mutation that usually occurs in combination with K103N. In this setting it confers high-level resistance to NVP, EFV, and RPV and intermediate resistance to ETR and DOR.

NNRTI

11111111	
	Y188H is a non-polymorphic mutation selected in persons receiving NVP and EFV. It
	causes about 5 to 10-fold reduced susceptibility to NVP and EFV. It appears to cause little
	if any reduction in susceptibility to RPV, ETR, or DOR.
INSTI	