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

PI Major Mutations: M46I • I54V • L76V • V82A

PI Accessory Mutations: L33

PR Other Mutations: L10X • V11N • T12A • I13S • K14T • I15D • G16R • L19V • K20Q • R41K • K55R • R57K • L63V • I64V • T74A • V77I • L89M • T91S

Protease Inhibitors

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

PR comments

Major

- . M46I/L are relatively non-polymorphic PI-selected mutations. In combination with other PI-resistance mutations, they are associated with reduced susceptibility to each of the PIs except DRV.
- 154V is a non-polymorphic PI-selected mutation that contributes reduced susceptibility to each of the PIs except DRV.
- . L76V is a non-polymorphic mutation selected by IDV, LPV and DRV and reduces susceptibility to LPV and DRV.
- . V82A is a non-polymorphic mutation selected primarily by IDV and LPV. It is associated with reduced susceptibility to LPV and to a lesser extent ATV. It increases DRV susceptibility.

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Accessory

- . L33F is a relatively non-polymorphic accessory mutation selected by each of the PIs. In combination with other PI-resistance mutations, it is associated with reduced susceptibility to LPV, ATV, and DRV.
- There is evidence for low-level DRV resistance. If DRV is administered it should be used twice daily.

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

Drug resistance mutation scores of PI:

Rule	ATV/r \$	DRV/r \$	FPV/r \$	IDV/r ‡	LPV/r \$	NFV \$	sqv/r ‡	TPV/r \$
L33F	5	5	10	5	5	10	5	10
M461	10	0	10	10	10	30	10	5
M46I + V82A	10	0	10	10	10	10	10	0
<u>154V</u>	15	0	10	15	15	20	15	20
154V + V82A	10	0	10	10	10	10	10	0
<u>V82A</u>	15	0	15	30	30	30	15	0
<u>L76V</u>	0	20	60	30	30	10	0	-5
M46I + L76V	0	0	10	10	10	10	0	0
Total	65	25	135	120	120	130	65	30

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

NRTI Mutations: M41L • D67N • K70R • V75M • L210W • T215Y

NNRTI Mutations: V108I - Y188L

RT Other Mutations: V8T • V35M • K49R • N57H • V60I • D121H • K122E • Q145P • K166H • E169S • F171L • R172E • Q174E • N175T • P176Q • D177N • V179G • Q182H • Y183M • M184W • D185M • D186I • I195X • T200* • K201N • Δ202 • L205D • R206* • Q207G • R211K • Δ219 • K220X • H221* • Q222H • K223Q • E224K • R206* • Q207G • R211K • Δ219 • K220X • H221* • Q222H • K223Q • E224K • R206* • Q207G • R211K • Δ219 • K220X • H221* • Q222H • K223Q • E224K • R206* • Q207G • R211K • Δ219 • K220X • H221* • Q222H • K223Q • E224K • R206* • Q207G • R211K • Δ219 • K220X • H221* • Q222H • K223Q • E224K • R206* • Q207G • R206*

P225N • P226S • L228H • Y232M • \(\textit{\D233} \) • L234X • H235S • P236S • \(\textit{\D237}^* \) • K238Q • P243R • V245I • P247L • \(\textit{\C249}^* \) • D250K • \(\textit{\S251L} \) • W252D • T253C • V254H • N255D • \(\textit{\D256Y} \) • I257R • Q258R • K259S

Nucleoside Reverse Transcriptase Inhibitors

abacavir (ABC)	High-Level Resistance
zidovudine (AZT)	High-Level Resistance
stavudine (D4T)	High-Level Resistance
didanosine (DDI)	High-Level Resistance
emtricitabine (FTC)	Low-Level Resistance
lamivudine (3TC)	Low-Level Resistance
tenofovir (TDF)	High-Level Resistance

Non-nucleoside Reverse Transcriptase Inhibitors

doravirine (DOR)	High-Level Resistance
efavirenz (EFV)	High-Level Resistance
etravirine (ETR)	Potential Low-Level Resistance
nevirapine (NVP)	High-Level Resistance
rilpivirine (RPV)	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.
- D67N is a non-polymorphic TAM associated with low-level resistance to AZT.
- K70R is a TAM that confers intermediate resistance to AZT and contributes to reduced ABC and TDF susceptibility in combination with other TAMs.
- V75T/M/A/S are nonpolymorphic accessory NRTI-selected mutations. They appear to have minimal phenotypic effects on AZT, ABC, and TDF.
- 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.

NNRTI

- 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.
- Y188L is a non-polymorphic mutation that confers high-level resistance to NVP, EFV, RPV, and DOR, and potentially low-level resistance to ETR.

Other

- V179D/E are somewhat polymorphic accessory NNRTI-selected mutation. In combination with other NNRTI DRMs, they appear to contribute low-levels of reduced susceptibility to each of the NNRTIs. In particular, the combinations of K103R/V179D and V106I/V179D act synergistically to reduce NVP and EFV susceptibility. V179F is a non-polymorphic mutation selected in combination with Y181C in persons receiving ETR. Alone it has little effect on NNRTI susceptibility. 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. V179L is a rare non-polymorphic mutation by the FDA package insert. Its effects on NNRTI susceptibility have not been well studied. V1796 is an unusual mutation at this position.
- 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. M184W is a highly unusual mutation at this position.
- K219E/Q/N/R are accessory TAMS that usually occur in combination with multiple other TAMs. K219W is an uncommon NRTI-selected mutation. K219del is an unusual mutation at this position.
- 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.

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 ÷	зтс ≑	TDF =
M41L	5	15	15	10	0	0	5
M41L + D67N + T215Y	5	5	5	5	0	0	5
M41L + L210W	10	10	10	10	0	0	10
M41L + L210W + T215Y	10	0	0	0	15	15	10
M41L + T215Y	10	10	10	10	5	5	10
<u>D67N</u>	5	15	15	5	0	0	5
<u>K70R</u>	5	30	15	10	0	0	5
<u>L210W</u>	5	15	15	10	0	0	5
L210W + T215Y	10	10	10	10	0	0	10
<u>T215Y</u>	10	60	40	15	0	0	10
<u>V75M</u>	0	10	30	15	0	0	0
K70R + T215Y	0	0	5	5	0	0	0
Total	75	180	170	105	20	20	75

Drug resistance mutation scores of NNRTI:

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Rule	DOR \$	EFV \$	ETR \$	NVP \$	RPV \$
<u>V108I</u>	10	10	0	15	0
<u>Y188L</u>	60	60	10	60	60
Total	70	70	10	75	60