PatientID: HDR104

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	${f S}$	
	FPV	${f S}$	
	IDV	${f S}$	
	LPV	${f S}$	
	NFV	${f S}$	
	SQV	${f S}$	
	TPV	${f S}$	
NRTI	ABC	$_{ m LR}$	
	AZT	LR	
	D4T	${f S}$	
	DDI	LR	K70R;M184V
	FTC	HR	
	LMV	$_{ m HR}$	
	TDF	${f S}$	
NNRTI	DOR	IR	
	EFV	IR	
	ETR	IR	Y181C;H221Y;K101H
	NVP	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	K70R is a TAM that confers intermediate resistance to AZT and contributes to reduced
	ABC and TDF susceptibility in combination with other TAMs.
	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.
	H221Y is a non-polymorphic accessory mutation selected primarily by NVP, RPV, and
NNRTI	DOR. It frequently occurs in combination with Y181C.
	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.
	Y181C is a non-polymorphic mutation selected in persons receiving NVP, ETR and RPV.
	It confers high-level resistance to NVP, intermediate resistance to ETR and RPV, and
	low-level resistance to EFV. It does not significantly reduce DOR susceptibility.
INSTI	