PatientID: FJ538990

Okitobba 06, 2023

## Color Code

HR: High-Level Resistance

PLR: Potential Low-Level F
IR: Intermediate Resistance PLR: Potential Low-Level Resistance

S: Susceptible

DRUG.CLASS	DRUG	RESISTANCE.PROFILE	DRMS.above.20.percent.prevalence	
INSTI	BIC	IR		
	CAB	HR	Q148R;N155H	
	DTG	IR		
	EVG	$^{ m HR}$		
	RAL	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	
NNRTI	
INSTI	N155H is a common nonpolymorphic INSTI-resistance mutations. It has been reported in a high proportion of persons developing VF and HIVDR while receiving RAL, EVG, DTG, and CAB. Alone, it reduces RAL and EVG susceptibility about 10 and 30-fold, respectively. It has minimal effect on susceptibility to DTG, BIC, and CAB.  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.