PatientID: HIVDR-1785-23

Sebuttemba 27, 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	\mathbf{S}	
	LPV	\mathbf{S}	
	NFV	S	
	SQV	\mathbf{S}	
	TPV	\mathbf{S}	
NRTI	ABC	$_{ m LR}$	
	AZT	$_{ m LR}$	
	D4T	${f S}$	
	DDI	$_{ m LR}$	K70KR;M184V
	FTC	$_{ m HR}$	
	LMV	$_{ m HR}$	
	TDF	${f S}$	
NNRTI	DOR	$_{ m PLR}$	
	EFV	$_{ m HR}$	
	ETR	PLR	
	NVP	$_{ m HR}$	
	RPV	LR	
INSTI	BIC	$_{ m HR}$	
	CAB	$_{ m HR}$	
	DTG	$_{ m HR}$	E138K;G140A;S147G;Q148K
	EVG	$_{ m HR}$	
	RAL	$_{ m HR}$	

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.
NNRTI	
	E138K/A/T are common nonpolymorphic accessory resistance mutations selected in
	patients receiving RAL, EVG, CAB, and DTG. Alone they do not reduce INSTI
	susceptibility. However, they contribute to reduced susceptibility in combination with other
	mutations particularly those at position 148.
	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.

INSTI	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. S147G is a nonpolymorphic mutation selected in patients receiving RAL, EVG, and DTG.
	Alone it reduces EVG susceptibility about 5-fold.