Drug resistance interpretation: PR

HIVDB 9.5.1 (2023-11-05)

PI Major Mutations:	None
PI Accessory Mutations:	None
PR Other Mutations:	T12I • I13* • K14* • K20X • M36I • R41K • L63C • I64V • V82I

Protease Inhibitors	
atazanavir/r (ATV/r)	Susceptible
darunavir/r (DRV/r)	Susceptible
fosamprenavir/r (FPV/r)	Susceptible
indinavir/r (IDV/r)	Susceptible
lopinavir/r (LPV/r)	Susceptible
nelfinavir (NFV)	Susceptible
saquinavir/r (SQV/r)	Susceptible
tipranavir/r (TPV/r)	Susceptible

PR comments

Other

- **V82I** is a highly polymorphic mutation that is not selected by PIs. It is the consensus amino acid in subtype G viruses.

Mutation scoring: PR

HIVDB 9.5.1 (2023-11-05)

No drug resistance mutations were found for PI.

Drug resistance interpretation: RT

HIVDB 9.5.1 (2023-11-05)

NRTI Mutations:	K65R
NNRTI Mutations:	L100I • K103N
RT Other Mutations:	V35T • K49R • E53D • V60I • T84P • K122E • D177E • I178M • M184* • T200I • Q207N • H208I • R211K • T216I • P217L • P225L • P226Y • P236S • L246T • P247A • D250E • A272L • C280L

Nucleoside Reverse Transcriptase Inhibitors	
abacavir (ABC)	Intermediate Resistance
zidovudine (AZT)	Susceptible
stavudine (D4T)	High-Level Resistance
didanosine (DDI)	High-Level Resistance
emtricitabine (FTC)	Intermediate Resistance
lamivudine (3TC)	Intermediate Resistance
tenofovir (TDF)	Intermediate Resistance

Non-nucleoside Reverse Transcriptase Inhibitors	
doravirine (DOR)	Intermediate Resistance
efavirenz (EFV)	High-Level Resistance
etravirine (ETR)	Intermediate Resistance
nevirapine (NVP)	High-Level Resistance
rilpivirine (RPV)	High-Level Resistance

RT comments

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.

NNRTI

- **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.
- **K103N** is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.

Other

- 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. **P225L** 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.

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

Drug resistance mutation scores of NRTI: Download CSV

Rule	ABC	AZT	D4T	DDI	FTC	3TC	TDF
K65R	45	-10	60	60	30	30	50

Drug resistance mutation scores of NNRTI: Download CSV

Rule	DOR	EFV	ETR	NVP	RPV
L100I	15	60	30	60	60
L100I + K103N	15	0	0	0	0
K103N	0	60	0	60	0
Total	30	120	30	120	60