PatientID: FJ538976

Okitobba 06, 2023

## Color Code

HR: High-Level Resistance PLR: Potential Low-Level Resistance

LR: Low-Level Resistance IR: Intermediate Resistance

S: Susceptible

DRUG.CLASS	DRUG	RESISTANCE.PROFILE	DRMS.above.20.percent.prevalence
	BIC	IR	
	CAB	$^{ m HR}$	
INSTI	DTG	IR	E92Q;N155H
	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	E92Q is a common non-polymorphic mutation selected in persons receiving RAL and EVG. It reduces RAL susceptibility 5 to 10-fold and EVG susceptibility ~30-fold. It does not reduce susceptibility to BIC, CAB, and DTG.
	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.