Drug resistance interpretation: PR HIVDB 9.5.1 (2023-11-05)

PI Major Mutations: None
PI Accessory Mutations: None

PR Other Mutations: I13V 98% - I15IV v. 68% - R41K 98% - L63P 98% - I64V 91% - V77I 98% copr-36,544

Protease Inhibitors

 atazanavir/r (ATV/r)
 Susceptible

 darunavir/r (DRV/r)
 Susceptible

 lopinavir/r (LPV/r)
 Susceptible

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

No drug resistance mutations were found for Pl.

Drug resistance interpretation: RT HIVDB 9.5.1 (2023-11-05)

NRTI Mutations: S68N 91% - L74I 85% - M184I 95%

NNRTI Mutations: K101E 50% K103N 95% E138A 50% P225H 50% 139

RT Other Mutations: V35T 000 - V90I 010 - V9

F346FY 1: 70%, F: 24%

Susceptible

Nucleoside Reverse Transcriptase Inhibitors Non-nucleoside Reverse Transcriptase Inhibitors abacavir (ABC) Intermediate Resistance doravirine (DOR) Intermediate Resistance zidovudine (AZT) Susceptible efavirenz (EFV) High-Level Resistance emtricitabine (FTC) High-Level Resistance etravirine (ETR) Low-Level Resistance lamivudine (3TC) High-Level Resistance nevirapine (NVP) High-Level Resistance

RT comments

tenofovir (TDF)

NRTI

- L74V causes intermediate ABC resistance. L74I causes low-level ABC resistance.
- M184V/I cause high-level in vitro 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.

High-Level Resistance

NNRTI

. K101E is a non-polymorphic accessory mutation that confers intermediate resistance to NVP and RPV and low-level reductions in susceptibility to EFV, ETR, and DOR when it occurs with other NNRTI-resistance mutations.

rilpivirine (RPV)

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

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- E138A is a common polymorphic accessory mutation weakly selected in persons receiving ETR and RPV. It reduces ETR and RPV susceptibility ~2-fold. Its effect on ETR- and RPV-containing regimens is likely to be minimal.
- 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.

Other

V90I is a polymorphic accessory mutation weakly selected by each of the NNRTIs. It is associated with minimal, if any, detectable reduction in NNRTI susceptibility.

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

Drug resistance mutation scores of NRTI:

ag residence matation scores or min.				Dominous CST	
Rule	ABC ≑	AZT ÷	FTC ÷	зтс ≑	TDF ÷
<u>L741</u>	15	0	0	0	5
M184I	15	-10	60	60	-10
Total	30	-10	60	60	-5

esistance mutation scores of NNRTI:							
Rule	DOR \$	EFV \$	E				
K101E	15	15					
3N + P225H	10	0					

Drug resistance muto				
	Rule			
	<u>K101E</u>			
	K103N + D22EH			