PatientID: HDR85

Okitobba 06, 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	\mathbf{S}	
	SQV	\mathbf{S}	
	TPV	\mathbf{S}	
NRTI	ABC	$^{ m HR}$	
	AZT	${f S}$	
	D4T	$_{ m HR}$	
	DDI	$_{ m HR}$	M41ML;K65R;M184V
	FTC	$_{ m HR}$	
	LMV	$_{ m HR}$	
	TDF	IR	
NNRTI	DOR	IR	
	EFV	$_{ m HR}$	
	ETR	IR	L100I;K103N
	NVP	$_{ m HR}$	
	RPV	$_{ m HR}$	

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					
	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.				
	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				
NRTI	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.				
	M41L is a TAM that usually occurs with T215Y. In combination, M41L plus T215Y confer				
	intermediate / high-level resistance to AZT and d4T and contribute to reduced ddI, ABC				
	and TDF susceptibility.				
NNRTI	K103N is a non-polymorphic mutation that confers high-level reductions in NVP and EFV				
	susceptibility. It is the most commonly transmitted DRM.				
	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.				

INSTI	