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

PI Major Mutations: None
PI Accessory Mutations: None

PR Other Mutations: L10V -- • 113V -- • 115V -- • 616E -- • • K20R -- • E35D -- • M36I -- • R41K -- • R57K -- • L63V -- • H69K -- • 172V -- • L89M --

Protease Inhibitors

 atazanavir/r (ATV/r)
 Susceptible

 darunavir/r (DRV/r)
 Susceptible

 lopinavir/r (LPV/r)
 Susceptible

PR comments

Other

- . L10(V are polymorphic, PI-selected accessory mutations that increase the replication of viruses with other PI-resistance mutations.
- K20R is a highly polymorphic PI-selected accessory mutation that increases replication fitness in viruses with PI-resistance mutations.

Mutation scoring: PR

No drug resistance mutations were found for PI.

Drug resistance interpretation: RT

NRTI Mutations: LT4V*** Y115F*** • M184V *** • K219N ***

NNRTI Mutations: L100I etc. K103N etc.

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

RT comments

NRTI

- L74V causes intermediate ABC resistance. L74I causes low-level ABC resistance.
- Y115F causes intermediate resistance to ABC and low-level resistance to TDF.
- 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.
- K219E/Q/N/R are accessory TAMS that usually occur in combination with multiple other TAMs.

NNRTI - L10

- 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 V179

V179I is a polymorphic mutation that is frequently selected in persons receiving ETR and RPV. However, it has little, if any, direct effect on NNRTI susceptibility.

Mutation scoring: RT

Drug resistance mutation scores of NNRTI:

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Drug resistance mutation scores of NRTI:				
ABC ≑	AZT ≑	FTC ÷	3TC ≑	TDF ÷
30	0	0	0	0
15	0	0	0	0
30	0	0	0	15
15	0	0	0	5
15	-10	60	60	-10
5	10	0	0	5
110	0	60	60	15
	ABC 0 30 15 30 15 15 5	ABC 30 0 15 0 30 0 15 0 15 0 15 0 15 -10 5 10	ABC ÷ AZT ÷ FTC ÷ 30 0 0 15 0 0 30 0 0 15 0 0 15 0 0 15 -10 60 5 10 0	ABC \$\phi\$ AZT \$\phi\$ FTC \$\phi\$ 3TC \$\phi\$ 30 0 0 0 15 0 0 0 30 0 0 15 0 0 0 15 0 0 0 15 -10 60 60 5 10 0 0

2					
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