PatientID: HIVDR-1759-23

Sebuttemba 27, 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	$^{ m HR}$		
	DRV	$\mathbf{S}$		
	FPV	IR		
	IDV	$^{ m HR}$	M46L;V82A;N88S;L33F	
	LPV	IR		
	NFV	$_{ m HR}$		
	SQV	IR		
	TPV	$_{ m LR}$		
	ABC	$_{ m LR}$		
	AZT	${f S}$	M184V	
	D4T	${f S}$		
NRTI	DDI	$\operatorname{PLR}$		
	FTC	$_{ m HR}$		
	LMV	$_{ m HR}$		
	TDF	${f S}$		
NNRTI	DOR	$_{ m LR}$		
	EFV	$_{ m LR}$	K101E;E138A	
	ETR	$\operatorname{LR}$		
	NVP	IR		
	RPV	$_{ m HR}$		
INSTI	BIC	${f S}$		
	CAB	${f S}$		
	DTG	$\mathbf{S}$		
	EVG	$\mathbf{S}$		
	RAL	${f S}$		

## 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		
	L33F is a relatively non-polymorphic accessory mutation selected by each of the PIs. In		
	combination with other PI-resistance mutations, it is associated with reduced susceptibility		
	to LPV, ATV, and DRV.		
	M46I/L are relatively non-polymorphic PI-selected mutations. In combination with other		
	PI-resistance mutations, they are associated with reduced susceptibility to each of the PIs		
	except DRV.		
PI	N88S is a non-polymorphic mutation usually selected by NFV, ATV, and IDV. It confers		
	high-level resistance to ATV and increases susceptibility to DRV.		
	V82A is a non-polymorphic mutation selected primarily by IDV and LPV. It is associated		
	with reduced susceptibility to LPV and to a lesser extent ATV. It increases DRV		
	susceptibility.		
NRTI	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.		

NNRTI	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.  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.
INSTI	