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

INSTI Major Mutations: E138K • S147G • Q148R

INSTI Accessory Mutations: Non

IN Other Mutations: K7KR • E35EK • V54I • I72V • V79I • V88I • K111Q • I113V • T124A • T125A • G163E • I203M • I208L • L234I

## Integrase Strand Transfer Inhibitors

bictegravir (BIC) High-Level Resistance
cabotegravir (CAB) High-Level Resistance
dolutegravir (DTG) High-Level Resistance
elvitegravir (EVG) High-Level Resistance
raltegravir (RAL) High-Level Resistance

## IN comments

## Major

- E138K/A/T are common nonpolymorphic accessory resistance mutations selected in patients receiving RAL, EVG, CAB, and DTG. Alone they do not reduce INSTI susceptibility. However, they contribute to reduced susceptibility in combination with other mutations particularly those at position 148.
- \$147G is a nonpolymorphic mutation selected in patients receiving RAL, EVG, and DTG. Alone it reduces EVG susceptibility about 5-fold.
- Q148H/K/R are nonpolymorphic mutations reported in persons receiving RAL, EVG, CAB, and DTG. They nearly always occur in combination with G140A/S or E138K. In this setting they are associated with near complete resistance to RAL and EVG, high-levels of reduction in CAB susceptibility, and low-to-intermediate reductions in DTG and BIC susceptibility.
- There is evidence for high-level DTG resistance. If DTG is used, it should be administered twice daily.

Mutation scoring: IN

Drug resistance mutation scores of INSTI:

Download CSV

_						
Rule	BIC ≑	CAB ≑	DTG ÷	EVG ≑	RAL ÷	
E138K	10	10	10	15	15	
E138K + Q148R	10	20	10	0	0	
S147G	10	10	10	60	10	
5147G+Q148R	15	20	15	0	0	
Q148R	25	40	25	60	60	
Total	70	100	70	135	85	

HIVDB 9.5.1 (2023-11-05)