

Drug resistance interpretation: PR

PI Major Mutations:

PI Accessory Mutations:

PR Other Mutations:

None

None

I13V 100%  
pos:45 • K14R 100%  
pos:45 • G16A 97%  
pos:45 • E35D 99%  
pos:122 • M36I 99%  
pos:122 • R41K 100%  
pos:132 • K43R 99%  
pos:132 • R57K 99%  
pos:132 • L63N 97%  
pos:131 • H69K 97%  
pos:131 • L89M 99%  
pos:161

Protease Inhibitors

atazanavir/r (ATV/r)

Susceptible

darunavir/r (DRV/r)

Susceptible

fosamprenavir/r (FPV/r)

Susceptible

indinavir/r (IDV/r)

Susceptible

lopinavir/r (LPV/r)

Susceptible

nelfinavir (NFV)

Susceptible

saquinavir/r (SQV/r)

Susceptible

tipranavir/r (TPV/r)

Susceptible

Mutation scoring: PR

HIVDB 9.5.1 (2023-11-05)

No drug resistance mutations were found for PI.

Drug resistance interpretation: RT

HIVDB 9.5.1 (2023-11-05)

NRTI Mutations:

NNRTI Mutations:

RT Other Mutations:

M184V 97%  
pos:118

Y181F 100%  
pos:51 • H221Y 100%  
pos:52

K11A 99%  
pos:101 • K20R 99%  
pos:82 • V35T 99%  
pos:82 • E36D 99%  
pos:82 • T39E 99%  
pos:82 • K49R 100%  
pos:73 • P55PL 0  
pos:65 100%  
pos:65 L 127%  
pos:65 • K122E 100%  
pos:87 • D123N 97%  
pos:87 • T139R 99%  
pos:81 • S162A 99%  
pos:100 • F171Y 100%  
pos:111 • K173S 100%  
pos:122 • D177G 99%  
pos:100 • V179I 99%  
pos:100 • T200A 100%  
pos:79 • I202V 100%  
pos:71 • Q207A 100%  
pos:102 • R211K 100%  
pos:102

Nucleoside Reverse Transcriptase Inhibitors

abacavir (ABC)

Low-Level Resistance

zidovudine (AZT)

Susceptible

stavudine (D4T)

Susceptible

didanosine (DDI)

Potential Low-Level Resistance

emtricitabine (FTC)

High-Level Resistance

lamivudine (3TC)

High-Level Resistance

tenofovir (TDF)

Susceptible

Non-nucleoside Reverse Transcriptase Inhibitors

doravirine (DOR)

Potential Low-Level Resistance

efavirenz (EFV)

Low-Level Resistance

etravirine (ETR)

Low-Level Resistance

nevirapine (NVP)

High-Level Resistance

rilpivirine (RPV)

Intermediate Resistance

RT comments

NRTI

NNRTI

Other

- M184VIt cause high-level in vitro resistance to 3TC and FTC and low/intermediate resistance to ABC (3-fold reduced susceptibility). M184VIt 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.

- Y181F/S/G are rare non-polymorphic NNRTI-associated mutations that are usually present as part of an electrophoretic mixture. They are likely to represent transitional mutations between Y and I or V.
- H221Y is a non-polymorphic accessory mutation selected primarily by NVP, RPV, and DOR. It frequently occurs in combination with Y181C.

- 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.

- This virus is predicted to have intermediate-level reduced susceptibility to RPV. The use of the combination of CAB/RPV should be considered to be contraindicated.

Mutation scoring: RT

HIVDB 9.5.1 (2023-11-05)

Drug resistance mutation scores of NRTI:

Download CSV

Rule	ABC ↕	AZT ↕	D4T ↕	DDI ↕	FTC ↕	3TC ↕	TDF ↕
M184V	15	-10	-10	10	60	60	-10

Drug resistance mutation scores of NNRTI:

Download CSV

Rule	DOR ↕	EFV ↕	ETR ↕	NVP ↕	RPV ↕
H221Y	10	10	10	15	15
Y181F	0	15	15	60	30
Total	10	25	25	75	45