

PI Major Mutations:	None
PI Accessory Mutations:	None
PR Other Mutations:	I13V ^{95%} _{cons:53,141} • K14KR ^{95%} _{cons:58,252} • I155V ^{95%} _{cons:58,287} • L19I ^{95%} _{cons:63,143} • E35D ^{95%} _{cons:71,309} • M36I ^{95%} _{cons:71,303} • R41K ^{95%} _{cons:72,411} • R57K ^{95%} _{cons:88,327} • H69K ^{95%} _{cons:83,373} • L89M ^{95%} _{cons:92,442}
Protease Inhibitors	
atazanavir/r (ATV/r)	Susceptible
darunavir/r (DRV/r)	Susceptible
lopinavir/r (LPV/r)	Susceptible

No drug resistance mutations were found for PI.

NRTI Mutations:	M41L ^{95%} _{cons:102,417} • E44D ^{95%} _{cons:48,104} • S68G ^{95%} _{cons:48,380} • L74I ^{95%} _{cons:38,111} • M184V ^{95%} _{cons:12,145} • L210W ^{95%} _{cons:7,301} • T215Y ^{95%} _{cons:8,234} • K219N ^{95%} _{cons:8,103}
NNRTI Mutations:	A98G ^{95%} _{cons:28,266} • K103N ^{95%} _{cons:27,402} • V108I ^{95%} _{cons:26,171} • H221Y ^{95%} _{cons:8,103}
RT Other Mutations:	E6D ^{95%} _{cons:11,108} • K20R ^{95%} _{cons:42,705} • V35T ^{100%} _{cons:50,087} • V50I ^{100%} _{cons:44,814} • V118I ^{95%} _{cons:27,362} • K122E ^{95%} _{cons:20,047} • D123N ^{95%} _{cons:23,050} • I142V ^{95%} _{cons:20,062} • S162SD ^{95%} _{cons:10,276} • K166KR ^{95%} _{cons:17,388} • F171Y ^{95%} _{cons:14,717} • K173A ^{95%} _{cons:14,784} • Q174K ^{95%} _{cons:14,784} • D177E ^{95%} _{cons:10,276} • I178M ^{95%} _{cons:11,271} • V179I ^{95%} _{cons:11,268} • T200A ^{95%} _{cons:9,008} • I202N ^{95%} _{cons:9,084} • E203ED ^{95%} _{cons:9,005} • Q207A ^{95%} _{cons:7,812} • R211NS ^{95%} _{cons:7,388} • V245Q ^{95%} _{cons:8,374} • E248D ^{95%} _{cons:9,145} • A272P ^{95%} _{cons:9,107} • K277R ^{95%} _{cons:10,014} • R284K ^{95%} _{cons:9,105} • E291D ^{95%} _{cons:9,119} • I293V ^{95%} _{cons:9,145} •
	P294A ^{95%} _{cons:3,141} • E312D ^{95%} _{cons:9,075} • G335E ^{100%} _{cons:1,103} • M357K ^{100%} _{cons:1,125} • G359S ^{95%} _{cons:1,125} • T369V ^{100%} _{cons:141} • A371V ^{100%} _{cons:141} • I375V ^{100%} _{cons:885} • T377M ^{100%} _{cons:885}

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

RT comments

NRTI

- 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.
- E44D is a relatively non-polymorphic accessory mutation; E44A is a nonpolymorphic accessory mutation. Each usually occurs with multiple TAMs.
- S68G is a polymorphic mutation that is often selected in combination with K63R. It partially restores the replication defect associated with K63R.
- L74V causes intermediate ABC resistance. L74I causes low-level ABC resistance.
- 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.
- L210W is a TAM that usually occurs in combination with M41L and T215Y. The combination of M41, L210W and T215Y causes high-level resistance to AZT and intermediate resistance to ABC and TDF.
- T215Y/F are TAMs that causes intermediate/high-level resistance to AZT and potentially low-level resistance to ABC and TDF.
- K219E/Q/N/R are accessory TAMs that usually occur in combination with multiple other TAMs.

NNRTI

- A98G is a non-polymorphic accessory mutation associated with low-level reduced susceptibility to each of the NNRTIs.
- K103M is a non-polymorphic mutation that confers high-level reductions in NVP and EFV susceptibility. It is the most commonly transmitted DRM.
- V108I is a relatively non-polymorphic accessory mutation selected in vitro and/or in vivo with each of the NNRTIs. It appears to contribute to reduced susceptibility to most NNRTIs only in combination with other NNRTI-resistance mutations.
- H221Y is a non-polymorphic accessory mutation selected primarily by NVP, RPV, and DOR. It frequently occurs in combination with Y181C.

Other

- V118I is a polymorphic accessory NRTI-resistance mutation that often occurs in combination with multiple TAMs.
- 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.

Drug resistance mutation scores of NRTI:

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Rule	ABC ⚡	AZT ⚡	FTC ⚡	3TC ⚡	TDF ⚡
M41L	5	15	0	0	5
M41L + E44D + L210W + T215Y	5	5	0	0	5
M41L + M184V + T215Y	10	0	0	0	0
M41L + L210W	10	10	0	0	10
M41L + L210W + T215Y	10	0	15	15	10
M41L + T215Y	10	10	5	5	10
L74I	15	0	0	0	5
M184V	15	-10	60	60	-10
L210W	5	15	0	0	5
L210W + T215Y	10	10	0	0	10
T215Y	10	60	0	0	10
K219N	5	10	0	0	5
Total	110	125	80	80	63

Drug resistance mutation scores of NNRTI:

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Rule	DOR ⚡	EFV ⚡	ETR ⚡	NVP ⚡	RPV ⚡
<u>A98G</u>	15	15	10	30	15
<u>V108I</u>	10	10	0	15	0
<u>H221Y</u>	10	10	10	15	15
<u>K103N</u>	0	60	0	60	0
Total	35	95	20	120	30