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

INSTI Major Mutations: N155H INSTI Accessory Mutations: D232N

IN Other Mutations: D6E • E10D • A23S • V31I • L101I • T124A • V151I • K156N • V201I • M275V

Integrase Strand Transfer Inhibitors

bictegravir (BIC) Potential Low-Level Resistance

cabotegravir (CAB) Low-Level Resistance

dolutegravir (DTG) Potential Low-Level Resistance

elvitegravir (EVG) High-Level Resistance raltegravir (RAL) High-Level Resistance

IN comments

Major

N155H is a common nonpolymorphic INSTI-resistance mutations. It has been reported in a high proportion of persons developing VF and HIVDR while receiving RAL, EVG, DTG, and CAB. Alone, it reduces RAL and EVG susceptibility about 10 and 30-fold, respectively. It has minimal effect on susceptibility to DTG, BIC, and CAB.

Accessory

D232N is a common nonpolymorphic accessory mutation selected in persons receiving RAL and EVG. Alone, it has little effect on INSTI susceptibility.

Other

- V151I is an accessory INSTI selected mutation that occurs in 1% to 3% of viruses from ART-naive persons depending on subtype. Alone, it appears to have little or no effect on INSTI susceptibility.
- This virus is predicted to have low-level reduced susceptibility to CAB. The use of the combination of CAB/RPV should be considered to be relatively contraindicated.

Mutation scoring: IN

Drug resistance mutation scores of INSTI:

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Rule	BIC ÷	CAB ≑	DTG ‡	EVG ≑	RAL
N155H	10	25	10	60	60
D232N	0	0	0	10	10
Total	10	25	10	70	70

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