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

PI Major Mutations: Non

PI Accessory Mutations: None

PR Other Mutations: L10X • V11M • T12Y • I13R • K14P • I15E • G16R • G17I • Q18D • L19S • K20P • E21R • A22E • L24T • D25S • T26S • M36X • L38V • R41K • I50S • L63P • I72V

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

PR comments

Other

- L24I is a non-polymorphic mutation selected by IDV and LPV. It contributes reduced susceptibility to ATV and LPV. L24F/M are uncommon non-polymorphic PI-selected mutations. L24F has a susceptibility profile similar to L24L L24T is a highly unusual mutation at this position.
- 150V is a nonpolymorphic mutation selected by FPV, LPV and DRV. It reduces susceptibility to LPV and DRV. 150L is a non-polymorphic mutation selected by ATV. It causes high-level resistance to ATV and increases susceptibility to LPV and DRV. 150E is a highly unusual mutation at this position.

Mutation scoring: PR

No drug resistance mutations were found for PI.

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

HIVDB 9.5.1 (2023-11-05)

NRTI Mutations: D67N • T69D • K70R • M184V NNRTI Mutations: V179T • G190A • P225H

RT Other Mutations: K20R • E28A • V35T • T39M • E40D • K49R • V60I • K101L • K103T • K104S • S105N • V106C • T107V • V108N • L109S • D110L • V111G • G112E • D113P • A114K • Y115H • F116T • S117Q • K122S • D123N • F124T • R125T • K126D • Y127K • T128R • A129S • F130R • T131I • 1132R • P133T • 1135R • N137R • T139I_LKEP • P140T • G141W • I142S • R143V • Y144L • Q145T • V146P • N147I • V148T • P150T • Q151N • G152R •

W153K - 5156A - P157N - A158S - 1259F - 5162R - M164L - E169D - K173S - Q258R - K259Q - L260* - V261W - G262K - K263A - L264K - N265W - W266P

Nucleoside Reverse Transcriptase Inhibitors abacavir (ABC) zidovudine (AZT) Intermediate Resistance stavudine (D4T) Intermediate Resistance didanosine (DDI) Intermediate Resistance emtricitabine (FTC) High-Level Resistance lamivudine (3TC) High-Level Resistance tenofovir (TDF) Susceptible

doravirine (DOR) Low-Level Resistance efavirenz (EFV) High-Level Resistance etravirine (ETR) Potential Low-Level Resistance nevirapine (NVP) High-Level Resistance

Non-nucleoside Reverse Transcriptase Inhibitors

rilpivirine (RPV) Low-Level Resistance

RT comments

NRTI

- D67N is a non-polymorphic TAM associated with low-level resistance to AZT.
- T69D is a nonpolymorphic mutation selected by early NRTIs that does not appear to reduce AZT, ABC, or TDF susceptibility
- K70R is a TAM that confers intermediate resistance to AZT and contributes to reduced ABC and TDF susceptibility in combination with other TAMs.
- M184V/I cause high-level in vitro resistance to 3TC and Iow/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

- V179T is a rare non-polymorphic mutation occasionally selected in persons receiving NNRTIs. It is associated with minimal, if any, reduction in ETR and RPV susceptibility.
- 6190A is a non-polymorphic mutation that causes high-level resistance to NVP and intermediate resistance to EFV. It does not significantly reduce susceptibility to RPV, ETR, or DOR.
- P225H is a non-polymorphic EFV-selected mutation that usually occurs in combination with K103N. The combination of P225H and K103N synergistically reduces NVP, EFV and DOR susceptibility.

Other

- 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, it contributes reduces susceptibility to these NNRTIs. K101P is a non-polymorphic mutation that confers high-level resistance to NVP, EFV, RPV, and ETR. Its does not appear to reduce DOR susceptibility. K101Q is a relatively non-polymorphic mutation at this position.
- V106A is a non-polymorphic mutation that confers high-level resistance to NVP and DOR, and intermediate resistance to NVP and DOR, and intermediate resistance to NVP and EFV. It is selected in vitro and in vivo by DOR and preliminary data suggests it reduces DOR susceptibility about 3-fold. It is commonly selected in vitro and in vivo by DOR. V106C is a highly unusual mutation at this position.
- 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.
- Y113F causes intermediate resistance to ABC and low-level resistance to TDF. Y115H is a highly unusual mutation at this position.
- Q151M causes intermediate/high-level resistance to AZT and ABC, and intermediate resistance to TDF, 3TC and FTC. In combination with two or more accessory mutations at positions 62, 75, 77, and 116, it confers high-level resistance to TDF, 3TC and FTC. In combination with two or more accessory mutations at positions.
- L234I is a nonpolymorphic mutation selected in persons receiving NVP and EFV. It is also selected in vitro by ETR and DOR. In combination with V106A, it is associated with high-level DOR resistance. Its effect on susceptibility when it occurs alone has not been well characterized. L234T is a highly unusual mutation at this position.
- P236L is a rare mutation selected commonly by DLV, which appears to have little if any effect on current NNRTIs. P236D is a highly unusual mutation at this position.
- K238T/N are uncommon non-polymorphic mutations selected in persons receiving NVP and EFV usually in combination with K103N. Alone, K238T/N appear to have minimal effects on NNRTI susceptibility. K238del is a highly unusual mutation at this position.
- This virus is predicted to have low-level reduced susceptibility to RPV. The use of the combination of CAB/RPV should be considered to be relatively contraindicated.

Mutation scoring: RT

Total 25 35 30 55 60 60 0

ETR ≑

20 90 10 105 15

NVP

45

Download CSV

Download CSV

RPV ÷

HIVDB 9.5.1 (2023-11-05)

resistance mutation scores of NNRT1:			
ule	DOR ÷	EFV ÷	ETF

Total

20