Drug resistance interpretation: IN

HIVDB 9.5.1 (2023-11-05)

INSTI Major Mutations: N155H INSTI Accessory Mutations: G163R

IN Other Mutations: V32I • S39C • M50I • T112I • I113V • T124N • V201I • L234V • S255R

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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

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

G163R/K are nonpolymorphic in all subtypes except subtype F. They are accessory resistance mutations as they usually occur in combination with other INSTI-resistance mutations particularly N155H.

Other

- M50I is a highly polymorphic mutation, which has a prevalence of 3% to 34% in INSTI-naïve persons depending on subtype. It has been selected in vitro by DTG and BIC in combination with R263K. It may contribute to reduced DTG and CAB susceptibility in combination with R263K.
- 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 |
| G163R | 0 | 0 | 0 | 15 | 15 |
| Total | 10 | 25 | 10 | 75 | 75 |