

**Table 1: Types of HIV Resistance Tests****Table 3: Genotypic Resistance Testing Based on Viral Load**

<b>Table 1: Types of HIV Resistance Tests [a]</b>		
<b>Test</b>	<b>Description</b>	<b>Use</b>
Genotype	<ul style="list-style-type: none"> <li>Assesses mutations in the HIV RNA genes that encode enzymes targeted by ARVs: reverse transcriptase, protease, integrase</li> <li>Algorithms interpret the effect of mutations on ARV efficacy</li> </ul>	<ul style="list-style-type: none"> <li>At diagnosis, when a patient has incomplete virologic response to ART, or when viral rebound occurs</li> <li>Has maximal utility if plasma HIV-1 RNA level (viral load) is <math>\geq 500</math> to 1,000 copies/mL</li> <li>May not detect all RAMs</li> </ul>
Phenotype	<ul style="list-style-type: none"> <li>Assesses the effect of HIV genes on the ARV concentration required to inhibit viral growth compared with wild-type (nonmutant) virus</li> <li>Estimates a fold change</li> </ul>	<ul style="list-style-type: none"> <li>Historically used to help assess the effect of the interplay of multiple RAMs on viral growth</li> <li>Supplanted by more comprehensive genotypic interpretation algorithms</li> </ul>
Proviral DNA genotype (archived DNA genotype)	<ul style="list-style-type: none"> <li>Assesses mutations in HIV proviral DNA genes that encode enzymes targeted by ARVs: reverse transcriptase, protease, integrase</li> <li>Algorithms interpret the effect of mutations on ARV efficacy</li> </ul>	<ul style="list-style-type: none"> <li>In patients who have detectable HIV viral load <math>&lt; 500</math> to 1,000 copies/mL or below the limit of quantification</li> <li>When changing an ART regimen for simplification or intolerance in patients with no prior resistance test results</li> <li>In patients who have stopped taking ART for <math>&gt; 4</math> weeks with no or incomplete prior resistance test results</li> <li>May not detect all RAMs in proviral DNA, or may report RAMs from non-replication-competent viruses [Li, et al. 2021]</li> <li>Use an assay that accounts for host APOBEC-generated hypermutation patterns</li> </ul>
Tropism test	Assesses the effect of HIV RNA (or proviral DNA) gp120 on the coreceptor(s) used for viral attachment: CCR5, CXCR4, or mixed/dual	<ul style="list-style-type: none"> <li>Treatment-experienced patients for whom a coreceptor antagonist is being imminently considered</li> <li>RNA tropism test can be used with viral loads <math>\geq 1,000</math> copies/mL; proviral DNA test can be used for viral loads <math>&lt; 1,000</math> copies/mL</li> </ul>
<b>Abbreviations:</b> ART, antiretroviral therapy; ARV, antiretroviral medication; gp120, envelope glycoprotein 120; RAM, resistance-associated mutation.		
<b>Note:</b> <ol style="list-style-type: none"> <li>All resistance assays are affected by limitations of detection; minor variants may not be present at high enough concentrations to be amplified by the assay.</li> </ol>		

**Table 3: Genotypic Resistance Testing Based on Viral Load**

<b>HIV RNA (Viral Load)</b>	<b>Indicated Genotypic Resistance Test</b>
0 to 500 copies/mL	HIV proviral DNA genotype (RT, PR, INT) or phenotype (tropism)
500 to 1,000 copies/mL	HIV RNA genotype (RT, PR, INT) or phenotype (tropism) at assay amplification threshold; may use HIV proviral DNA test if nonamplifiable
$\geq 1,000$ copies/mL	HIV RNA genotype if currently or recently (within 4 weeks) on ART; DNA proviral genotype may be considered for patients who are currently not taking ART but have in the past

**Abbreviations:** ART, antiretroviral therapy; INT, integrase; PR, protease; RT, reverse transcriptase.

## References

Li Y, Etemad B, Dele-Oni R, et al. Drug resistance mutations in HIV provirus are associated with defective proviral genomes with hypermutation. *AIDS* 2021;35(7):1015–20. [PMID: 33635848] <https://pubmed.ncbi.nlm.nih.gov/33635848>