







To Aid in First-line Therapy Decisions

- The Department of Health and Human Services guidelines for antiretroviral use in patients with HIV-1 recommend genotypic testing as the preferred resistance testing in treatment-naïve patients.¹
- GenoSure PRIme is the first assay to provide genotypic resistance information on all DHHS-preferred first-line treatment options, including those containing integrase inhibitors.
- Recent studies have demonstrated the transmission of drug-resistant viruses in up to 16% of treatment-naïve patients.¹
- Testing for integrase strand transfer inhibitors (INI) may be warranted² and should be obtained if there is a concern for resistance to this class of drugs.¹

Consider GenoSure PRIme for baseline resistance testing and detection of transmitted drug resistance.

To Aid in Therapy Decisions for Treatment-experienced Patients

- The DHHS guidelines recommend genotypic testing as the preferred resistance test for patients experiencing virologic failure while on first- or second-line antiretroviral therapy.¹
- In patients failing integrase inhibitor-based regimens, genotypic testing for integrase inhibitor resistance should be considered.¹
- Genotypic testing using GenoSure PRIme provides an assessment of viral susceptibility to every commercially available PI, NRTI, NNRTI, and INI in a single assay.

Consider GenoSure PRIme when contemplating changes to your patient's course of therapy.

Features of GenoSure PRIme

- GenoSure PRIme is the first HIV-1 genotype to provide susceptibility information for four drug classes in a single report: NRTIs, NNRTIs, PIs, and INIs.
- GenoSure PRIme evaluates the HIV-1 polymerase (pol) region including the complete protease and integrase coding regions and amino acids 1-400 of reverse transcriptase.
- GenoSure PRIme uses Monogram's proprietary database of more than 100,000 matched HIV-1 genotype-phenotype results.

A single assay providing a comprehensive picture of resistance to PIs, NRTIs, NNRTIs, and INIs.

Genos V drug resistance			ne		BIOSCIENCES						
amuel H. Pepkowitz, 15 Ovster Point Blvd	MD, Medical Dir	ector							— Lists muta	key resistance-associated ations.	
outh San Francisco,	CA 94080 - Te	el: (800) 777	' -0177								
atient Name			DOB	Pat	tient ID/Medical Record #	Gender	Monogram Acc	cession #			
ate Collected			Date Received	Dat	te Reported	Mode	Report Status				
ferring Physician						Reference La	b ID/Order #				
omments							tuno. R				
						HIV-1 SUL	itype: D	1 10 10 10 10 10 10 10 10 10 10 10 10 10			
Drug GenoSure P				PRIme	RIme Assessment* Comments						
Generic Name	Brand Name	Drug Resistance Associated		nce Associated	Jutations Detected Drug						
Abacavir	Ziagen	L74V, Y115F, M184V		ABC Resistant							
Didanosine	Videx	L74V, Y1	L74V, Y115F, M184V		ddl Resistant						
Emtricitabine	Emtriva	M184V	M184V			FTC		Resistant		Provides an assessment	
Lamivudine	Epivir	M184V				ЗТС	Resistant		— of su	usceptibility: sensitive,	
Stavudine	Zerit	None 				d4T	Sensitive	1	resis	tant, or resistance possible.	
Zidovurdino	Viread	None				TEV	Sensitive	2			
Zidovudine	Retrovir					ZDV	Sensitive	2			
Efavirenz	Sustiva	None				EFV	Sensitive				
Etravirine	Intelence	None				ETR	Sensitive				
Nevirapine	Viramune	None								Monogram	
Rilpivirine	Edurant	None			GenoSur	PRI	me ^r			RIOSCIENCES	
Dolutegravir	Tivicay	T97A, Y1	43R		HIV DRUG RESISTANCE ASSAV	PR RT IN				LabCorp Specialty Testing Group	
Elvitegravir	Elvitegravir	T97A, Y1	43R		-						
Raltegravir	Isentress	T97A, Y1	43R								
		K20T E3	5D M46L 184V		Samuel H. Pepkowitz, MD, M 345 Oyster Point Blvd	ledical Director					
Atazanavir	Reyataz	K20T, E35D, M46I, 184V		South San Francisco, CA 94080 - Tel: (800) 777 -0177 Patient Name DOB			Patient ID/Medical Record #	Gender Monogram Accession #			
Darupavir	Reyataz / r	K20T, M46I, I84V			Date Collected		Date Received	Date Reported	Mode	Report Status	
Fosamprenavi	r Lexiva / r	E35D, M46I, I84V			Date collected		Date neceived	Date Reported	Mode	neport status	
Indinavir	Crixivan / r	K20T, M46I, A71T, I84V		Assessment of drug susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using an advanced propri Interpreted using a susceptibility is based upon detected mutations and interpreted using a susceptibility of a susceptibility of a susceptibility of advanced propri Interpreted upon advanced propriet advanced propri advanced propriet				etary algorithm (version 15).			
Lopinavir	Kaletra *	K20T, M4	46I, A71T, I84V		Interpretation algorithms for intonavir-boosted protease inhibitors appropriate for the following dosages: AMP/r 800mg/200mg BID; LPV/r 400mg/100mg BID; SQV/r 1000mg BID; TPV/r 500mg/200mg BID; and DRV/r 6 * Mixtures are indicated by amino acids separated by a slash. Deletions in the amino acid sequence are indicated				00mg/100mg BID. 00mg/100mg BID. d by a ^ symbol.		
Nelfinavir	Viracept	K20T, E3	5D, M46I, A71T,	184V	Summany of M	utations (Observed				
Ritonavir	Norvir	K20T, E3	5D, A71T, I84V		RT L74V, Q102K, Y115F, K12	22A, K166K/R, E169E	G, D177E, I178L, M184V, T200	JR, E203E/G, V245E, A272P, V293I, P294Q, E2	97K, Q334L, M357T, K	358R, T377M, A400T	
Saquinavir	Invirase / r 🔹	K20T, E3	5D, A71T, I84V		IN L45Q, V72I, T97A, V113I, PR G16A, K20T, F35D, N37D	IN L45Q, V72I, T97A, V113I, T124A, Y143R, V234L DP G16A, K20T, F35D, N37D, M46L, I63P, A2TT, I22R, V77L, IR4V, I93I					
Tipranavir	Aptivus / r	K20T, E3	5D, 184V		Genotype Com	iments (cl	inical significa	ance may vary)			
					1 Assessment for this drug	g was derived consid	lering the sensitizing effect of	mutation M184V.			
					2 Assessment for this drug	g was derived consid	ering the sensitizing effect of	mutations L/4V and M184V.			
							Assay Pe	rformance Characterist	CS .		
					- hereit	in blabby many	advalles and sufficient	other statements and the second	buckless of sold	ant suspense with	
comprehei	nsive sum	marv o	of all muta	ations	 viral k 	oads as low as	500 copies/ml.	may sensitive enough to allow	second or back	cirit samples with	
served in (each regio	on is pr	ovided. T	his may	 Detect 	ts mixtures	of wild-type and dru	presistant viruses when prese	nt at levels as	low as 10% of	
useful for	tracking	ongitu	idinal cha	nges and	Die a	ocar populatoo	and the second second			the set of the	
evelopmen	t of novel	resista	nce muta	tions.	Uses 1	Monogram's H	riptase. IV genotyping algori	thm, which is based on a larg	e database of a	www.100,000	
					* Inclu treats	ides HIV-1 su merit strategy	bitype which provide and genotype interp	war and is reviewed and upda is information that can be imp relation.	ortant for long-	term drug	
								1416-1968			
					For more information of hours of 6:30am to 5:00	on interpreting t	his report, please visi / through Fridav.	t www.MonogramHIV.com or cal	I Customer Serv	vice at 800-777-0177 between the	
					GenoSure PRIme is a DNA sequen 1-288) coding regions in HIV-1. S	nce assay based on pri subtype is determined	mer extension and chain termin using the protease and reverse	ation that analyzes the protease (amino acids 1 transcriptase sequence information. This assay	-99), reverse transcript meets the standards for	ase (amino acids 1-400) and integrase (amino acids r performance characteristics and all other quality	

Summary

For Treatment-naïve Patients

DHHS panel recommendations include more than 20 drug combinations as initial treatment options for treatment-naïve patients.¹ These include members of the PI, NRTI, NNRTI, and INI classes of antiretrovirals.

For Treatment-experienced Patients

The management of patients on antiretroviral therapy is complex. As many as 20% of patients on antiretroviral therapy experience treatment failure due to drug resistance.³

GenoSure PRIme provides a complete picture of resistance to PIs, NRTIs, NNRTIs, and INIs to aid in selecting the optimal therapy for each patient.

Test Name	HIV-1 GenoSure PRIme				
LabCorp Test Number	551700				
Specimen Collection	5 mL plasma in a an EDTA or PPT tube, shipped frozen				
Limitation	This procedure may not be successful when the HIV viral load is <500 copies/mL. If there is insufficient virus to produce results, HIV-1 RNA Quantitation will be performed to confirm viral load, resulting in a separate CPT code.				

For full test information, visit LabCorp's online test menu at www.LabCorp.com/testmenu.

References

1. Panel on Antiretroviral Guidelines for Adults an Adolescents. Guidelines for the use of antiretroviral agents in HIV-1-infected adults and adolescents. Department of Health and Human Services. March 27, 2012;1-239. Available at: http://www.aidsinfo.nih.gov/ContentFiles/AdultandAdolescentGL.pdf. Accessed March 29, 2012.

2. Hurt CB. Transmitted resistance to HIV integrase strand-transfer inhibitors: right on schedule. Antiviral Therapy. 2011;16: 137-140.

3. World Health Organization. HIV drug resistance fact sheet. April 2011. Available at http://www.who.int/hiv/facts/drug_resistance/en/index.html. Accessed March 29, 2012.



