

论著

湖南省艾滋病患者抗病毒治疗后耐药性分析

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摘要:

目的了解湖南省艾滋病患者接受免费抗病毒治疗的效果以及人免疫缺陷病毒(HIV)的耐药情况,为改善该省的高效抗逆转录病毒治疗效果,指导临床医生用药提供科学的依据。方法收集湖南省衡阳市抗病毒治疗6个月以上的252例HIV感染者的血标本,进行病毒载量检测,其中32例病毒载量>103拷贝/mL,对此32份样本进行进一步的HIV基因型耐药检测。结果测得的31个序列中,发生突变的样本18份,其中13份(5.16%,13/252)对蛋白酶抑制剂(Pis)、核苷类逆转录酶抑制剂(NRTIs)以及非核苷类逆转录酶抑制剂(NNRTIs)这3类抗逆转录病毒药物有耐药突变;对Pis、NRTIs和NNRTIs均耐药者1例(0.40%),对NRTIs和NNRTIs均耐药者9例(3.57%),对NNRTIs耐药者3例(1.19%)。同时发现M184V、K103N、Y181CG、G190A引起NRTIs和NNRTIs高水平耐药的重要突变位点。结论湖南省艾滋病治疗者中,Pis耐药发生率极低,NRTIs和NNRTIs的耐药发生率相对较高;已出现NNRTIs高水平的多药耐药。但总体耐药的发生仍处于较低水平。

关键词: 艾滋病; 人免疫缺陷病毒; 高效抗逆转录病毒治疗; 抗药性 微生物; 基因突变

Drug resistance analysis on AIDS patients after highly active antiretroviral therapy in Hunan Province

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Abstract:

Objective To investigate the effect of antiretroviral (ARV) treatment on AIDS patients in Hunan Province and to analyze the drug resistance of human immunodeficiency virus (HIV), so as to improve the treatment effect of highly active antiretroviral therapy (HAART) and provide reference for clinical application of drugs. Methods Blood samples of 252 AIDS patients who had taken HAART for more than 6 months were collected for viral load test, viral load of 32 samples were >103 copies/mL, these samples were further detected HIV genotypic resistance profile. Results Among 31 HIV detected sequences, 18 samples were found the drug resistance mutations, 13 samples (5.16%, 13/252) showed drug resistance mutation to protease inhibitors (Pis), nucleoside reverse transcriptase inhibitors (NRTIs) and non nucleoside reverse transcriptase inhibitors (NNRTIs), 1 (0.40%) sample was resistant to Pis, NRTIs and NNRTIs, 9 (3.57%) were resistant to both NRTIs and NNRTIs, 3 (1.19%) were resistant to NNRTIs. M184V, K103N, Y181CG and G190A were common mutation sites which induced high level resistance to NRTIs and NNRTIs. Conclusion The prevalence of HIV drug resistance to Pis among AIDS patients is very low, and NRTIs and NNRTIs are relatively higher; high level NNRTIs multi drug resistance has emerged, the level of HIV drug resistance in AIDS patients in Hunan is still low.

Keywords: AIDS; human immunodeficiency virus highly active antiretroviral therapy drug resistance, microbial gene mutations

收稿日期 2010-03-04 修回日期 2010-06-02 网络版发布日期 2010-09-30

DOI:

基金项目:

国家十一五重大专项课题艾滋病病毒基因变异规律与耐药监测技术研究(2008ZX10001-004)
湖南省卫生厅课题(B2009-089)

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