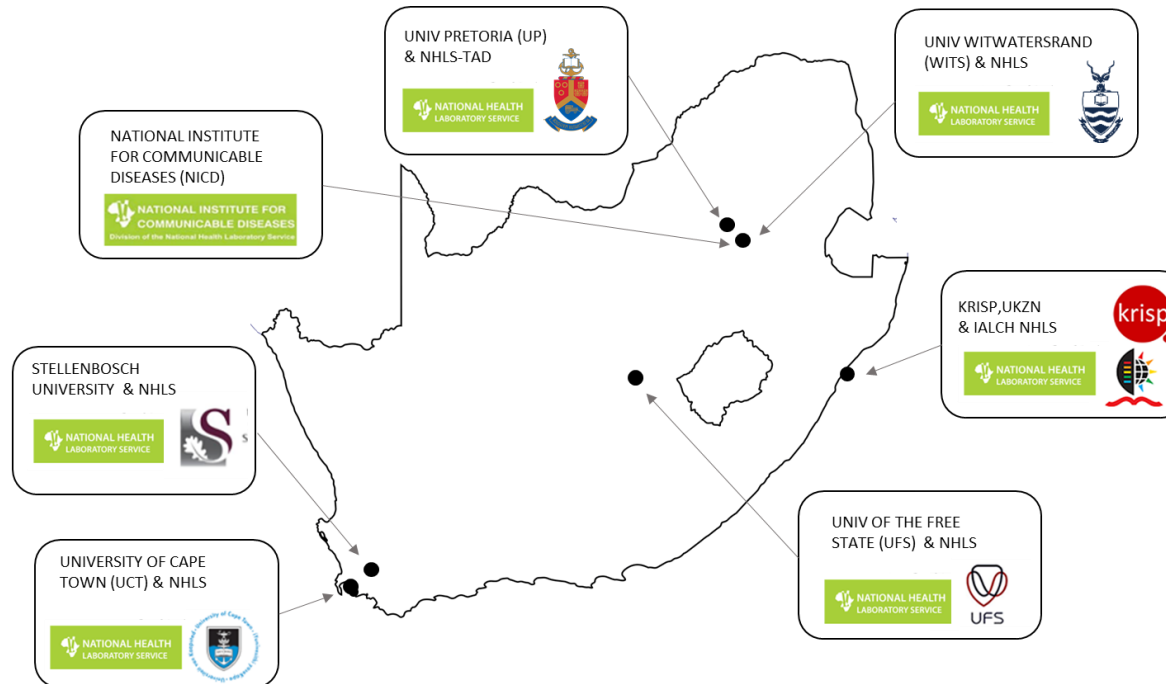


SARS-CoV-2 Sequencing Update 27 August 2021



Supported by the DSI and the SA MRC

Msomi N, Mlisana K, et al. Lancet Microbe 2020

The genomic data presented here are based on South African SARS-CoV-2 sequence data downloaded from GISAID (www.gisaid.org) on 25 August at 09h30



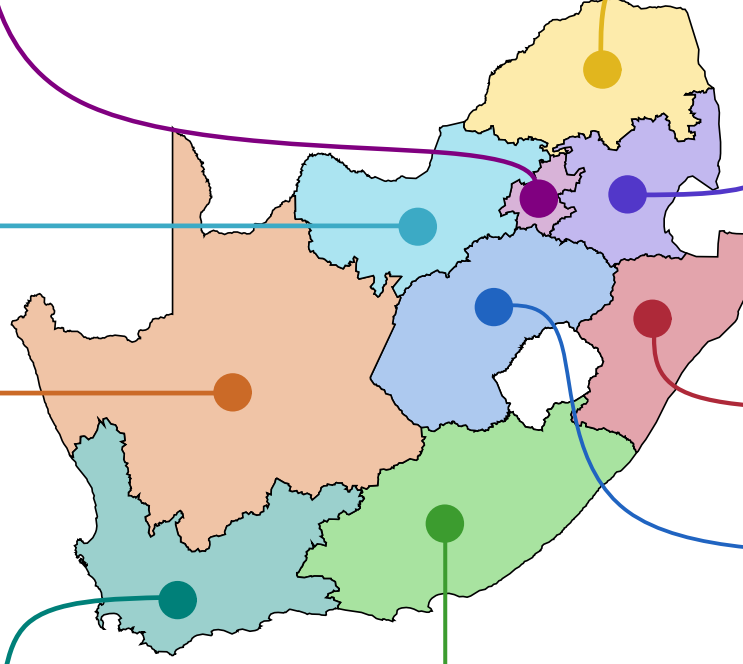
Data license: <https://www.gisaid.org/registration/terms-of-use/>

Elbe, S., and Buckland-Merrett, G. (2017) Data, disease and diplomacy: GISAID's innovative contribution to global health. *Global Challenges*, 1:33-46. DOI: 10.1002/gch2.1018 PMID: 31565258

Shu, Y., McCauley, J. (2017) GISAID: Global initiative on sharing all influenza data – from vision to reality. *EuroSurveillance*, 22(13) DOI: 10.2807/1560-7917.ES.2017.22.13.30494 PMID: PMC5388101

GENOMIC SURVEILLANCE IN THE THIRD WAVE

epiweeks 18 - 34



Gauteng

Genomes Cases
2 188 (33.6%) 473 333 (42.8%)

Genomes deposited in the last week

8 16 112 12 6 9

North West

Genomes Cases
512 (7.9%) 71 826 (6.5%)

Genomes deposited in the last week

2 69 1 1 7

Northern Cape

Genomes Cases
122 (1.9%) 36 142 (3.3%)

Genomes deposited in the last week

3

Western Cape

Genomes Cases
1 215 (18.7%) 179 384 (16.2%)

Genomes deposited in the last week

4 9 240 1 1

Eastern Cape

Genomes Cases
749 (11.5%) 58 775 (5.3%)

Genomes deposited in the last week

1 24 68 3 7 5 2

Limpopo

Genomes Cases
681 (10.5%) 54 268 (4.9%)

Genomes deposited in the last week

11 2

Mpumalanga

Genomes Cases
236 (3.6%) 61 829 (5.6%)

Genomes deposited in the last week

40 14 1 6

KwaZulu-Natal

Genomes Cases
663 (10.2%) 117 297 (10.6%)

Genomes deposited in the last week

8 44 4 1

Free State

Genomes Cases
145 (2.2%) 52 384 (4.7%)

Genomes deposited in the last week

Alpha (20I, V1) Eta (21D) 20C
Beta (20H, V2) C.1.2 (20D) 20D
Delta (21A) 20A — Cases M.1 (20C)
Kappa (21B) 20B Unassigned

Number of South African genomes deposited on GISAID, by specimen collection week, 2020 and 2021 (N=16 067*, downloaded 19 August)

Total genomes: 16 067
2020 genomes: 6 040
2021 genomes: 10 027

Sequencing data ending epi
week 33 (ending 21 August
2021)

Currently in epi week 34
(ending 28 August 2021)

Number of sequences

750
500
250
0

10

20

2020

30

40

50

Epidemiological week

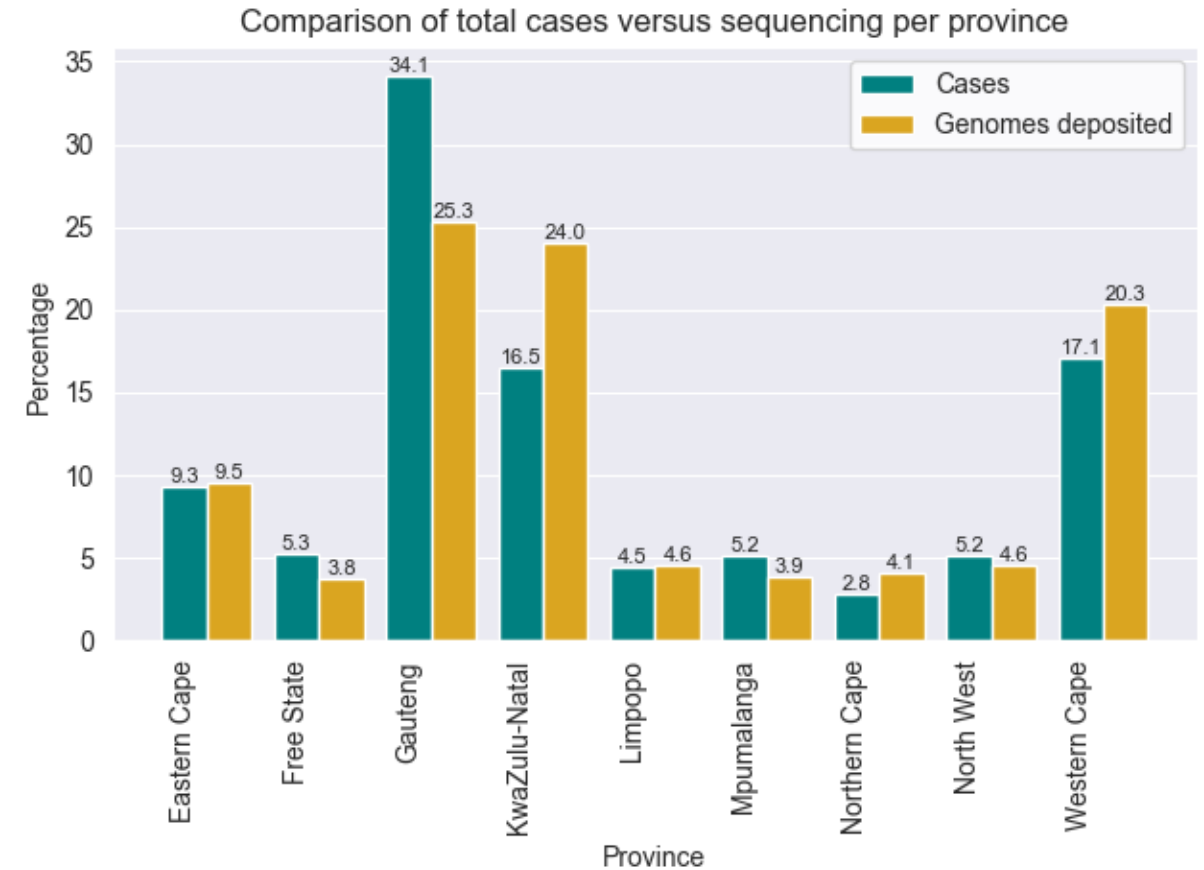
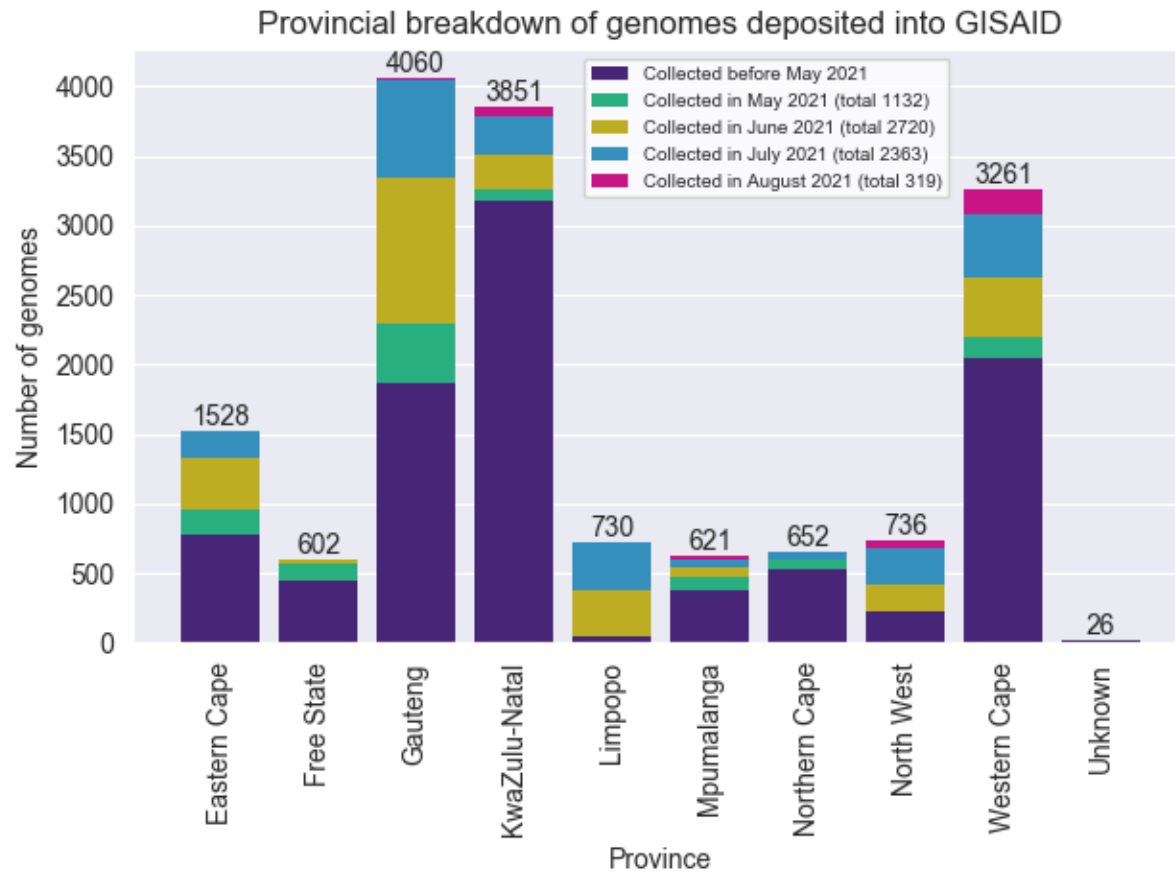
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2021

20

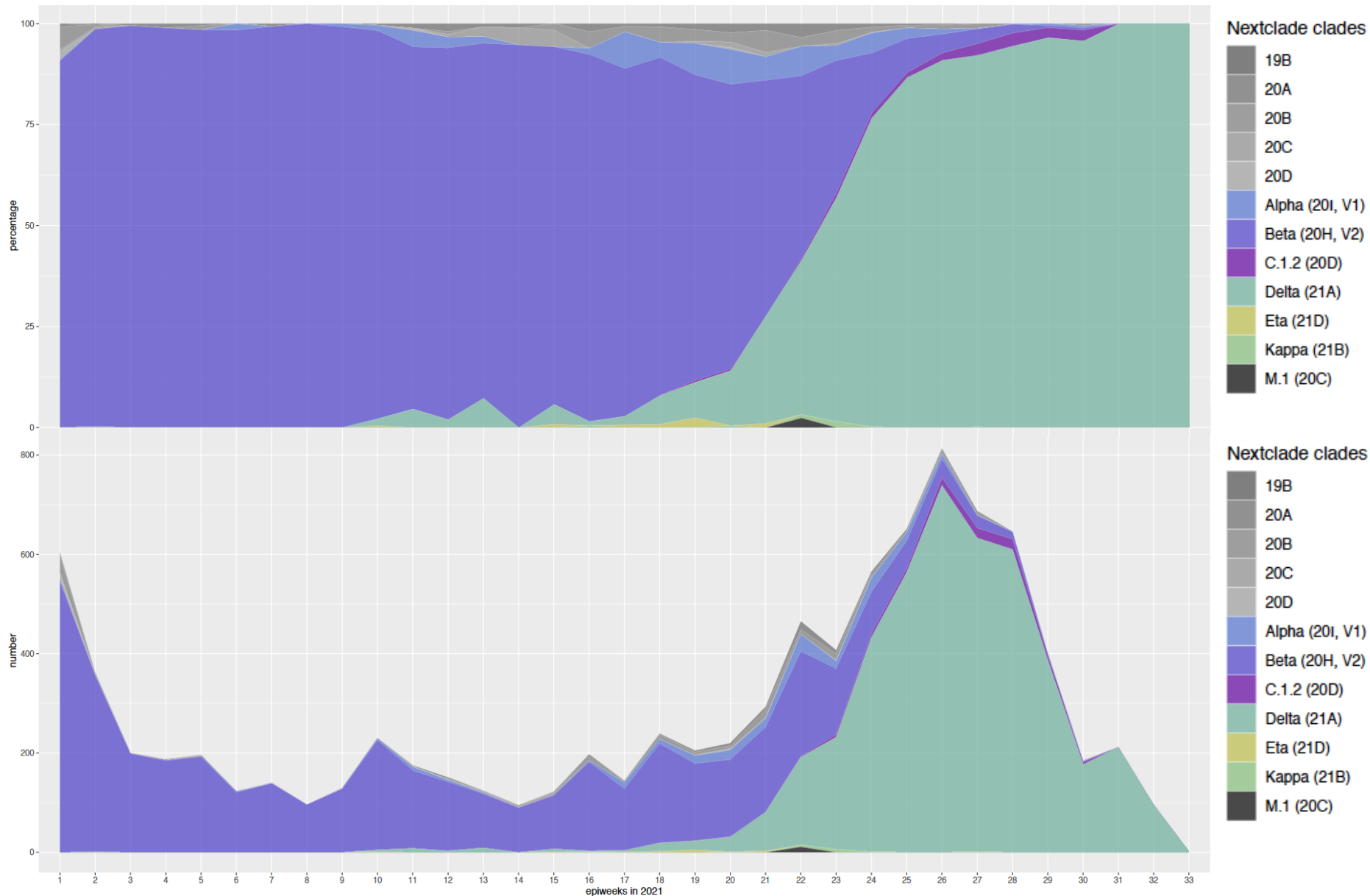
30

GISAID genomes vs total cases, 2020 and 2021 (N=16 067)



All provinces, apart from GP, KZN and WC have comparable percentage of overall cases and overall sequenced genomes

Distribution and number of clades in South Africa, 2021 (N= 10 027)

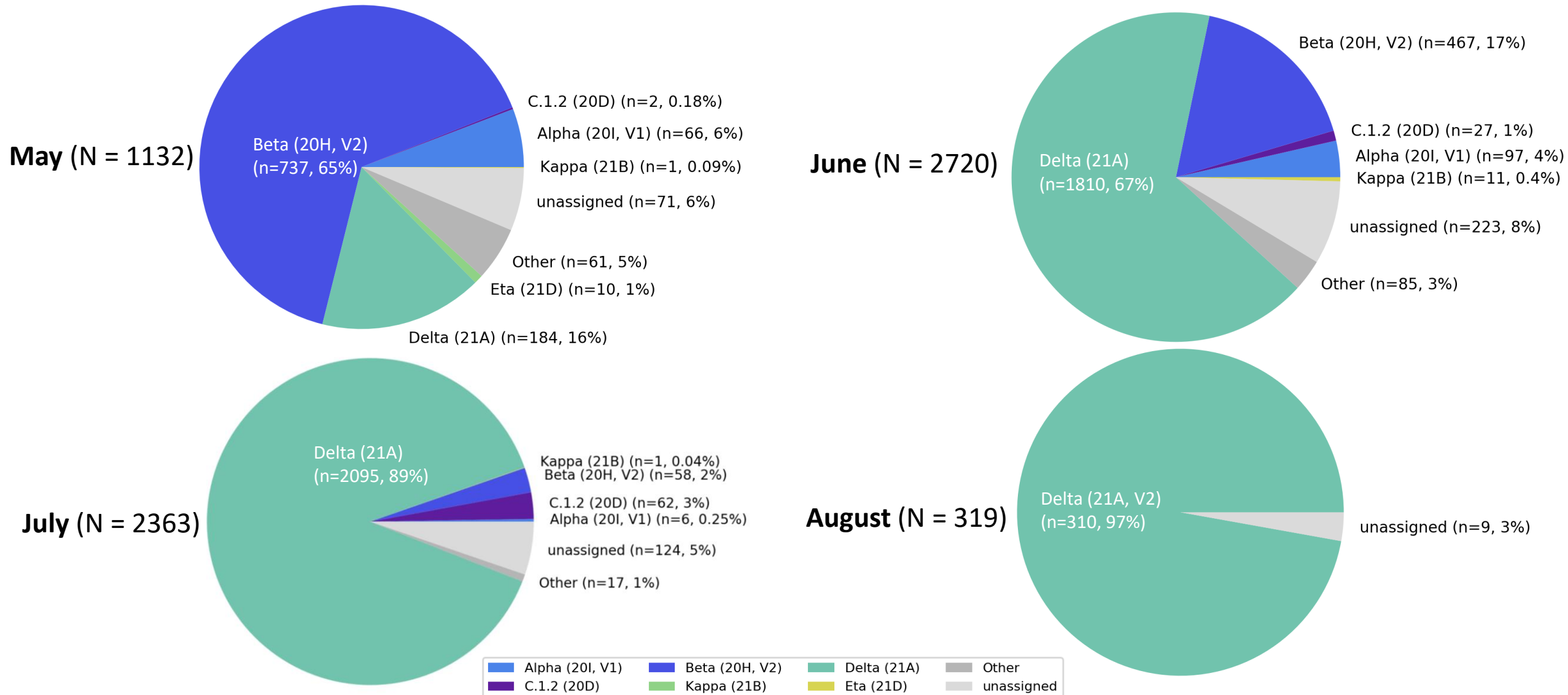


Sequencing data
ending epi week 33
(ending 21 August
2021)

Currently in epi
week 33 (ending 28
August 2021)

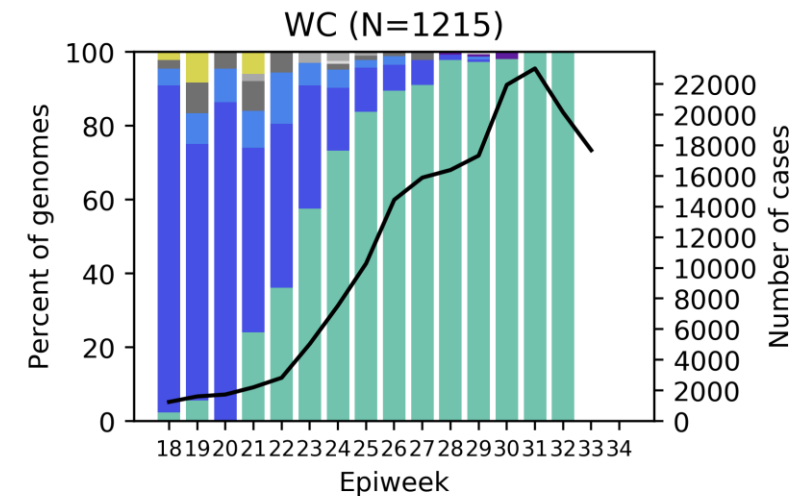
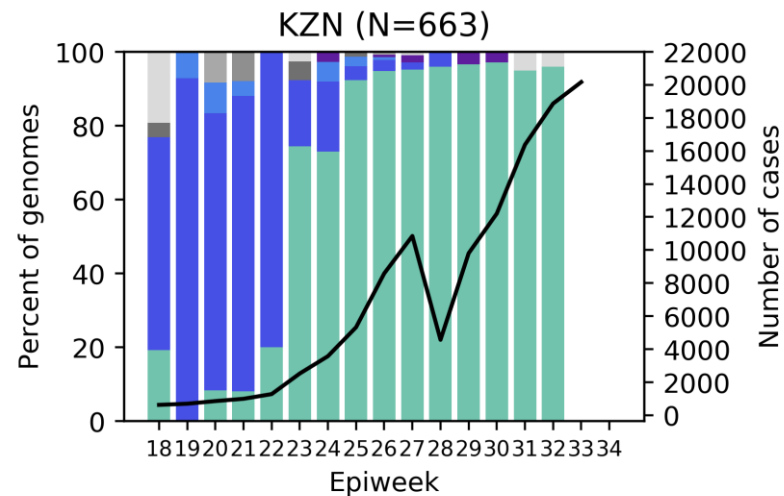
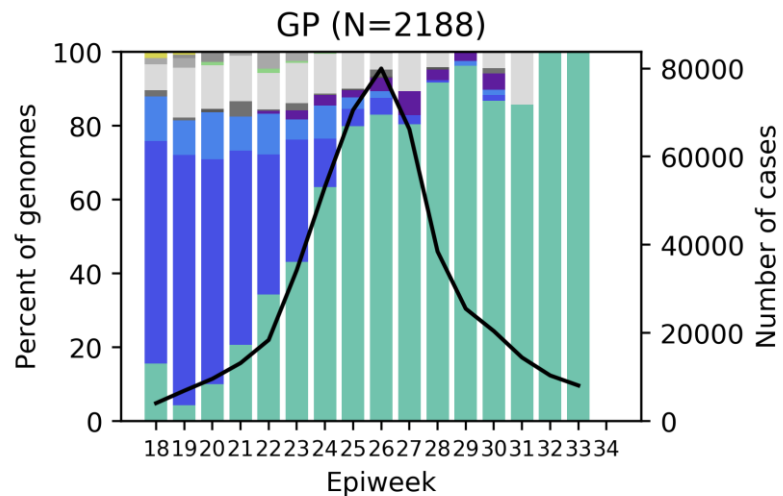
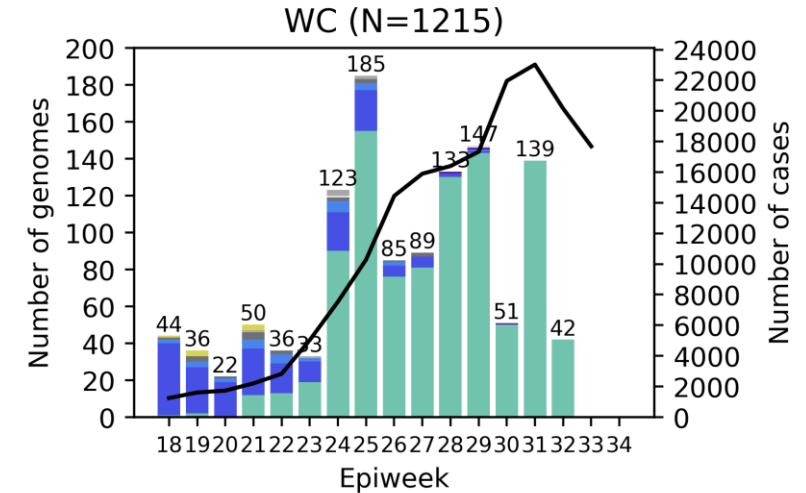
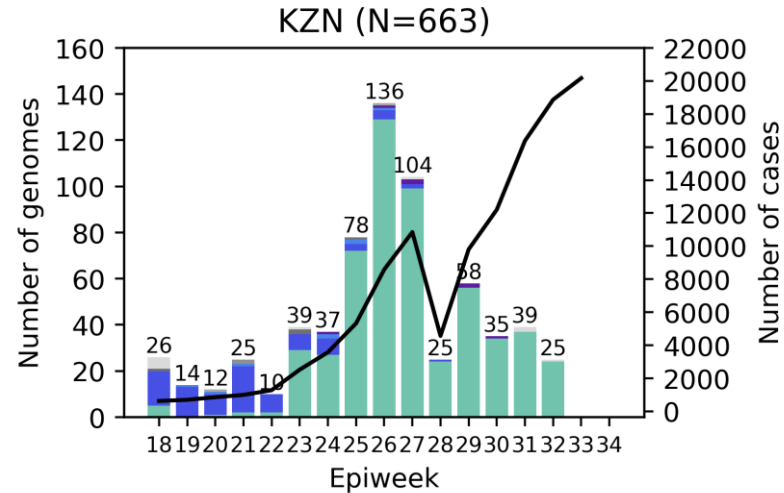
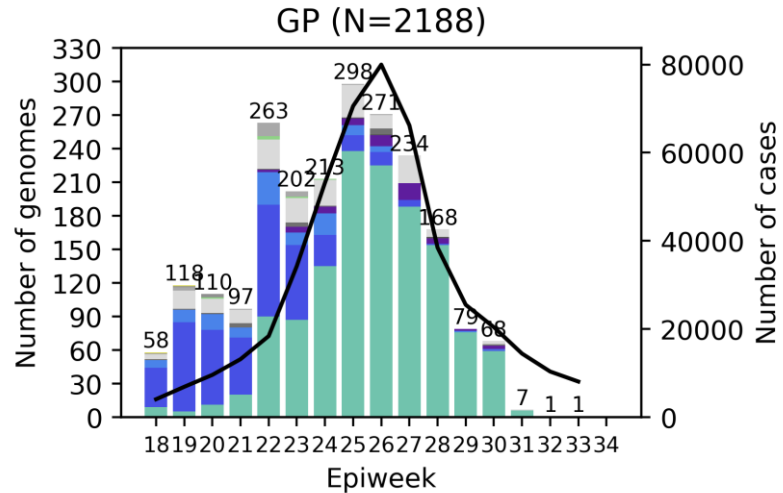
**While Alpha, Delta and Eta variant frequency increased from the beginning of May,
Delta rapidly came to dominate the third wave of infections at >75% , >85% and >90% in June, July and August respectively**

Prevalence of Variants of Concern (VOC) and Variants of Interest (VOI) in **May – August 2021** sequences, South Africa



Beta variant dominated in May, while the Delta variant dominated in June, July and August in South Africa

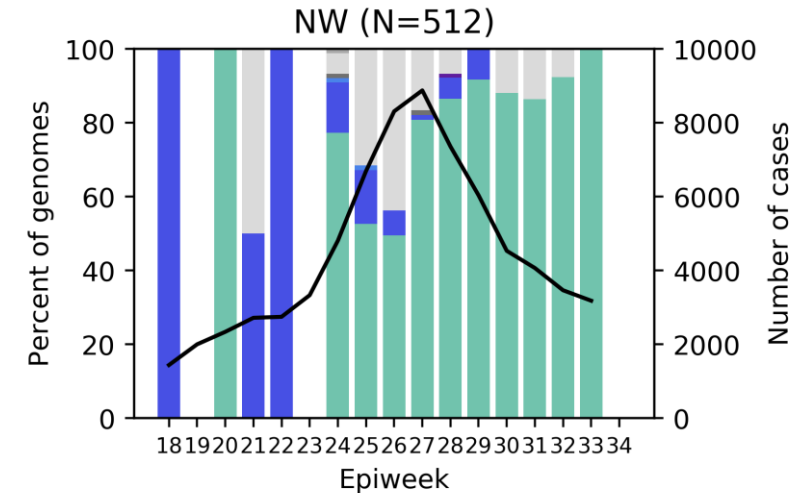
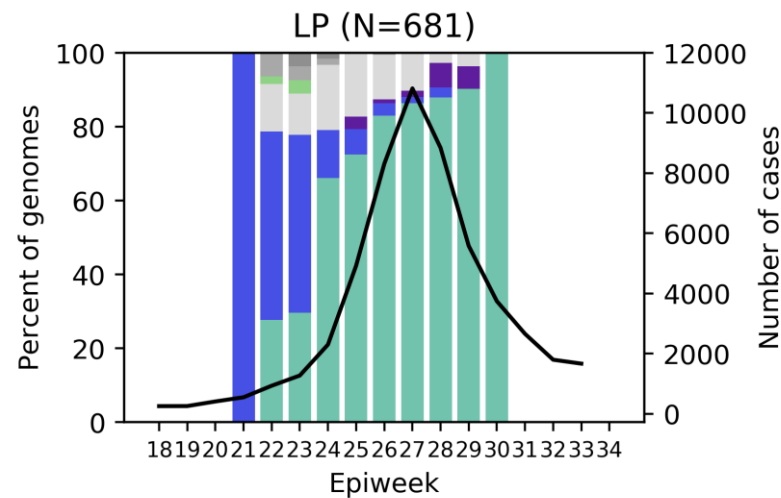
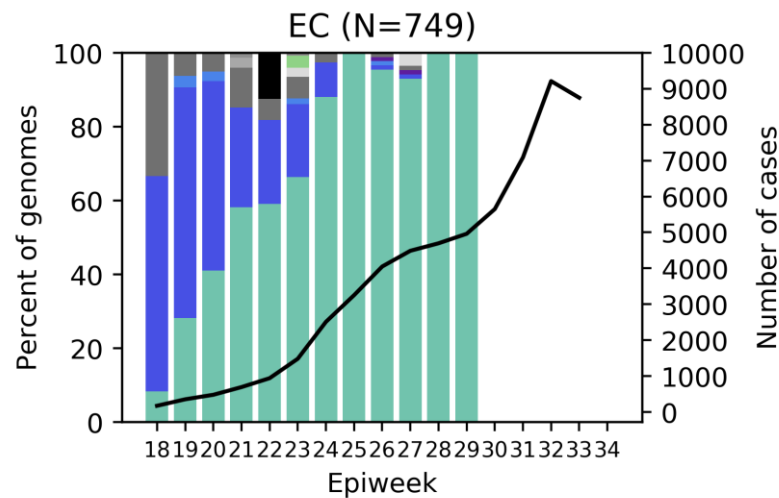
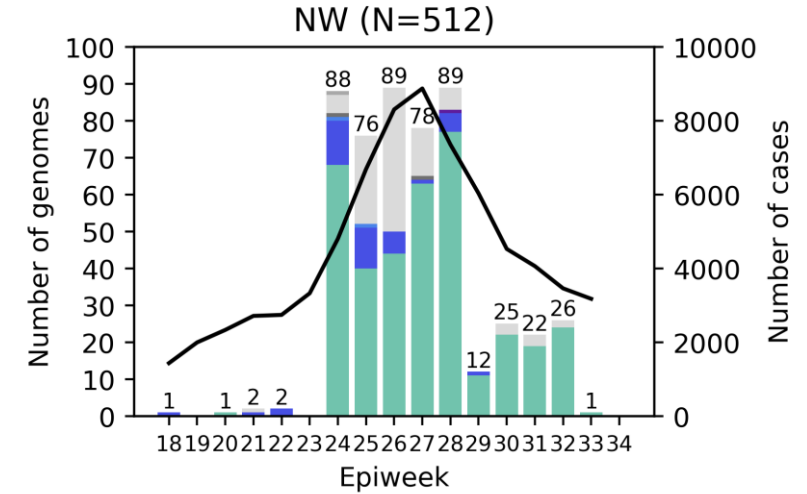
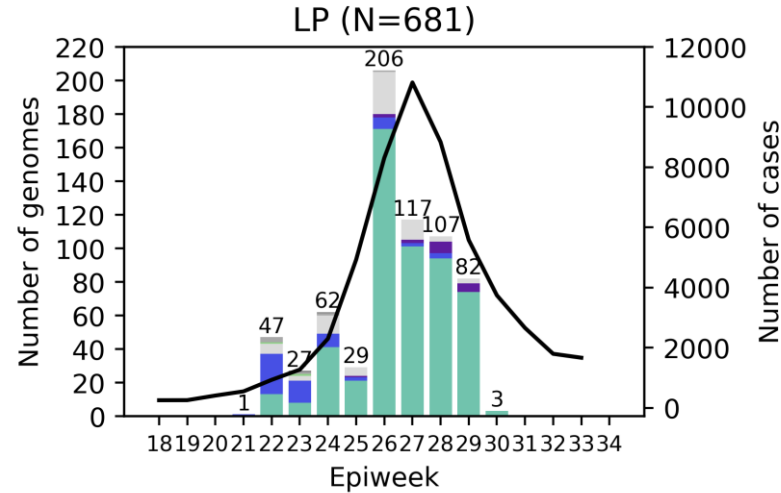
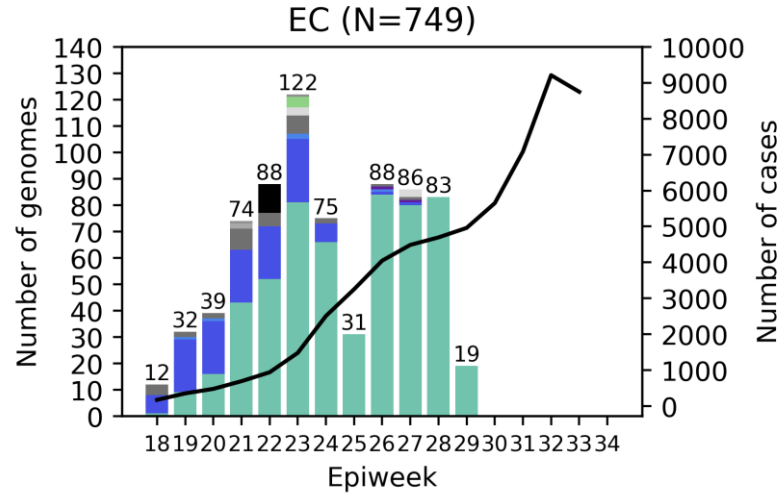
Genomes sequenced from specimens collected in May – mid-August 2021 (epiweeks 18 – 34) from KwaZulu-Natal, Gauteng, Western Cape Provinces



— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

While Beta dominated in all provinces in May, following its detection in week 18, Delta rapidly begins to dominate in all three provinces by mid-June

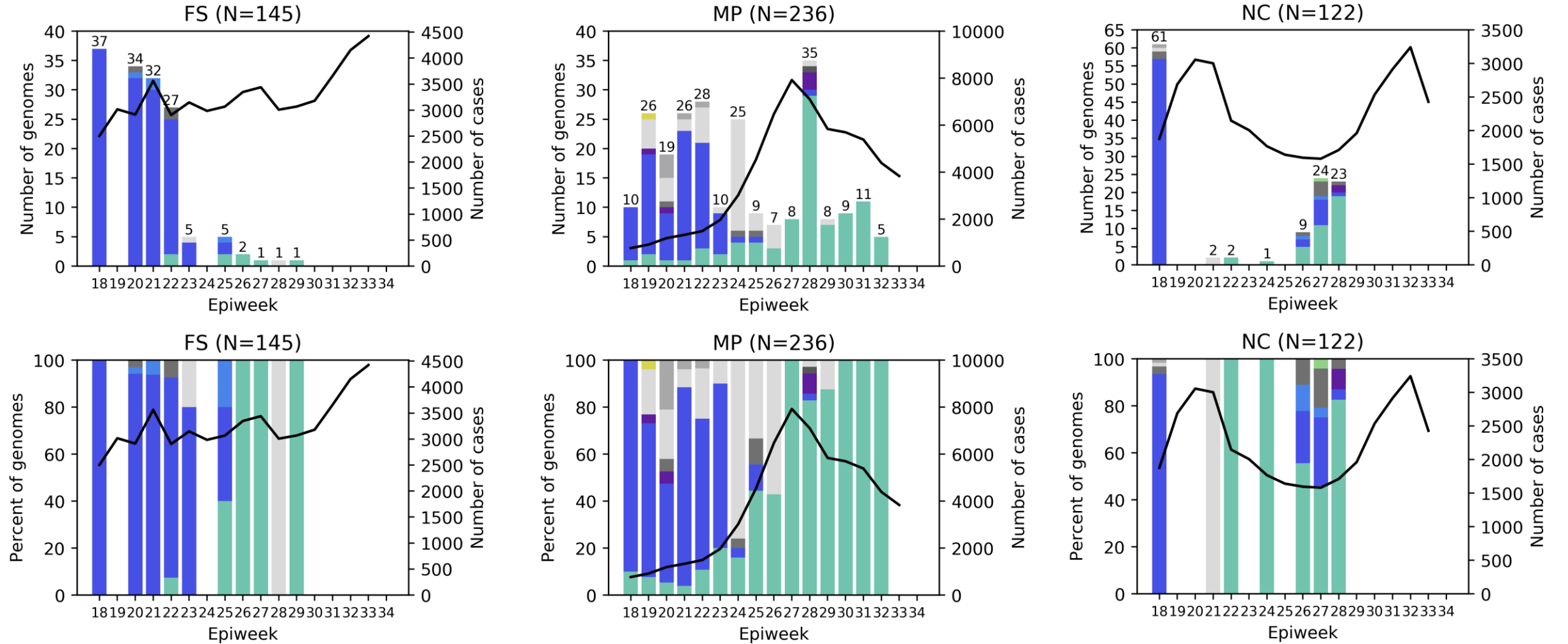
Genomes sequenced from specimens collected in May – mid-August 2021 (epiweeks 18 – 34) from Eastern Cape, Limpopo and North-West Provinces



— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

Delta variant dominating in Eastern Cape, Limpopo and North-West Provinces

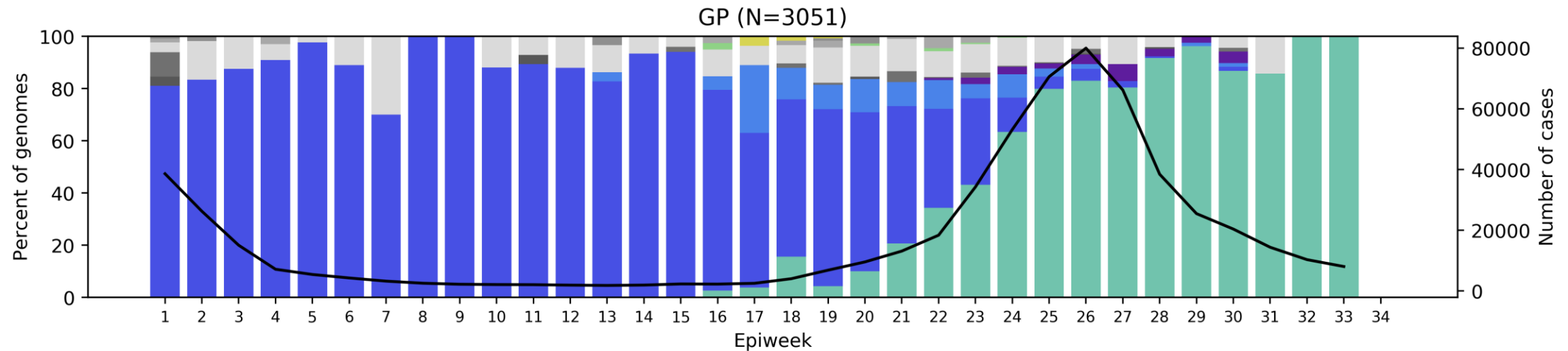
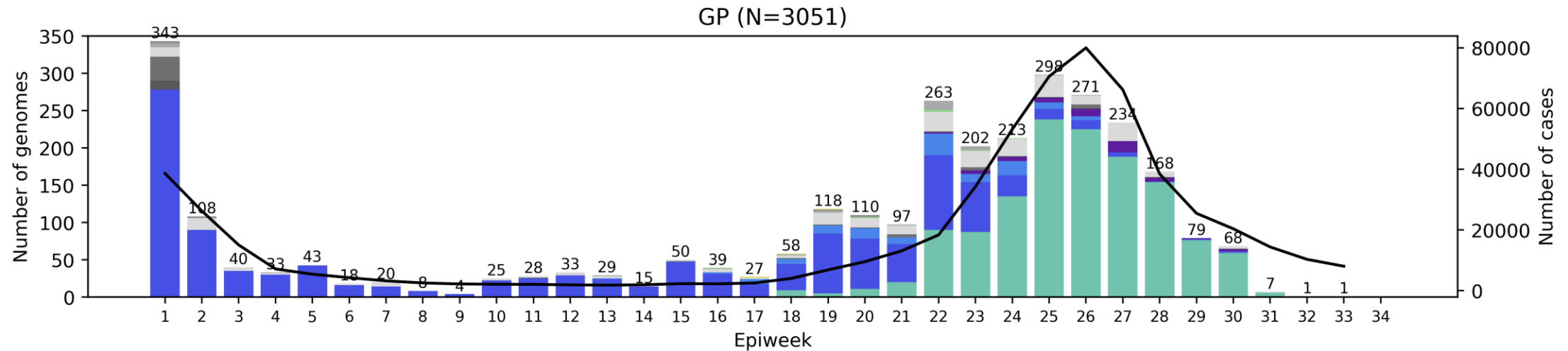
Genomes sequenced from specimens collected in May – mid-August 2021 (epiweeks 18 – 34) from Free State, Mpumalanga and Northern Cape Provinces



— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

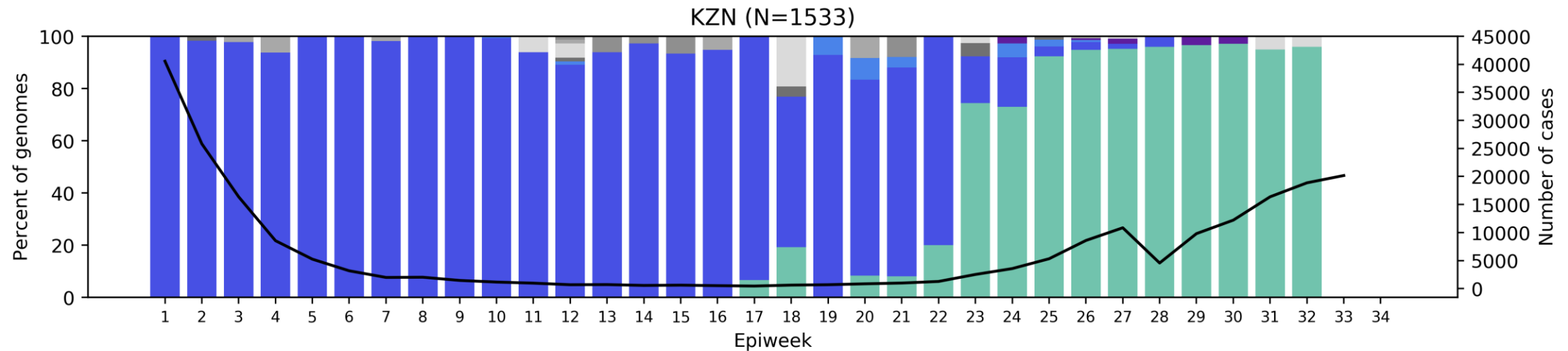
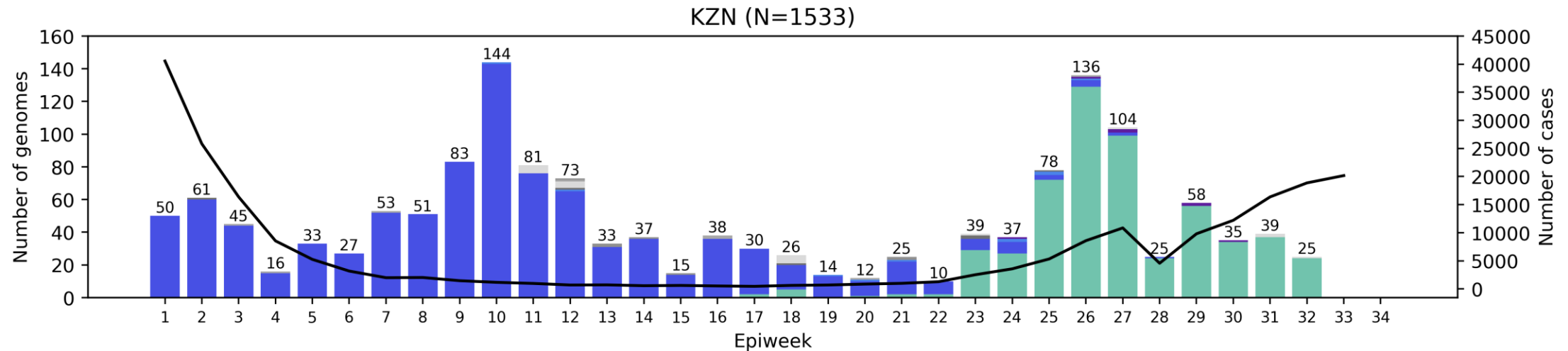
Recent data outstanding, specimens currently being sequenced to estimate the dominance of Delta

Gauteng Province, 2021, n = 3051



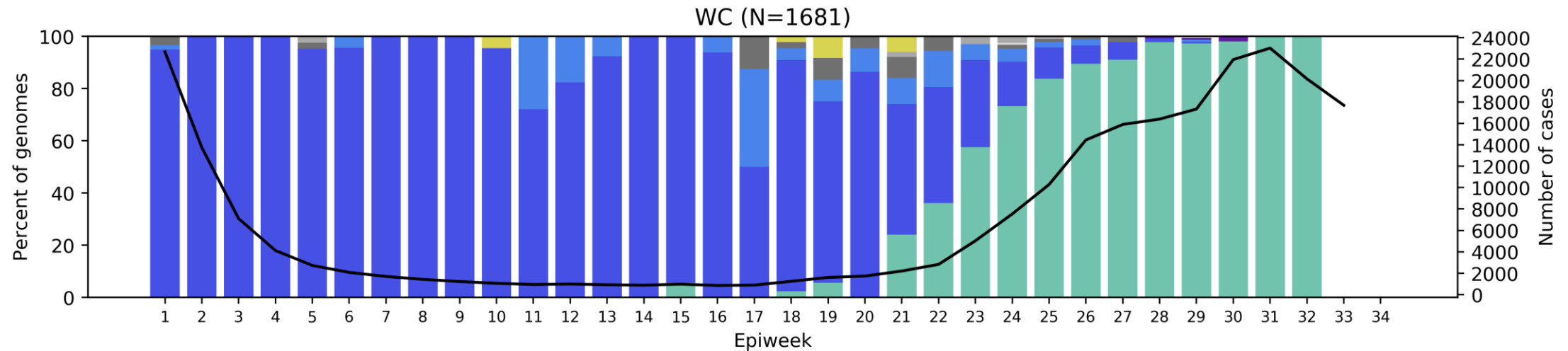
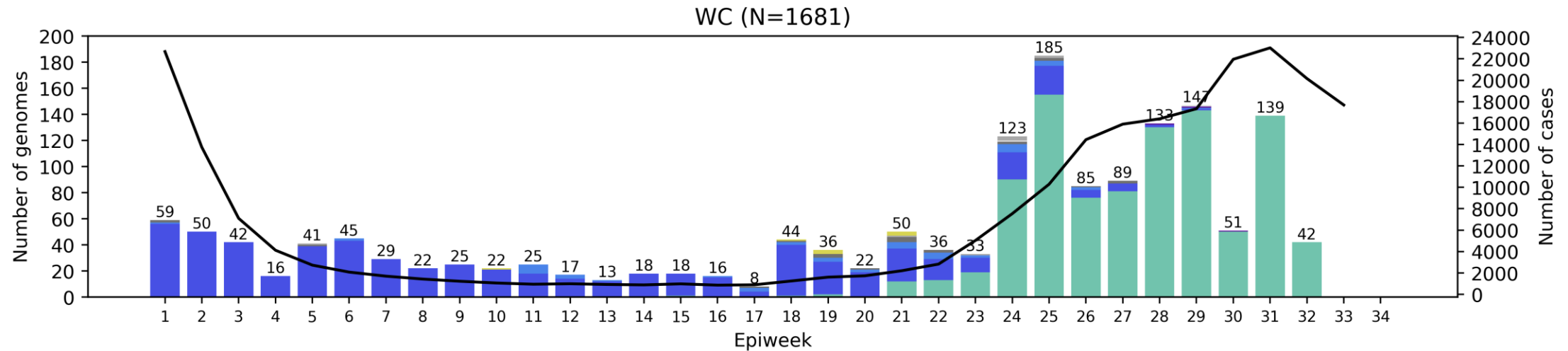
— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

KwaZulu-Natal Province, 2021, n = 1533



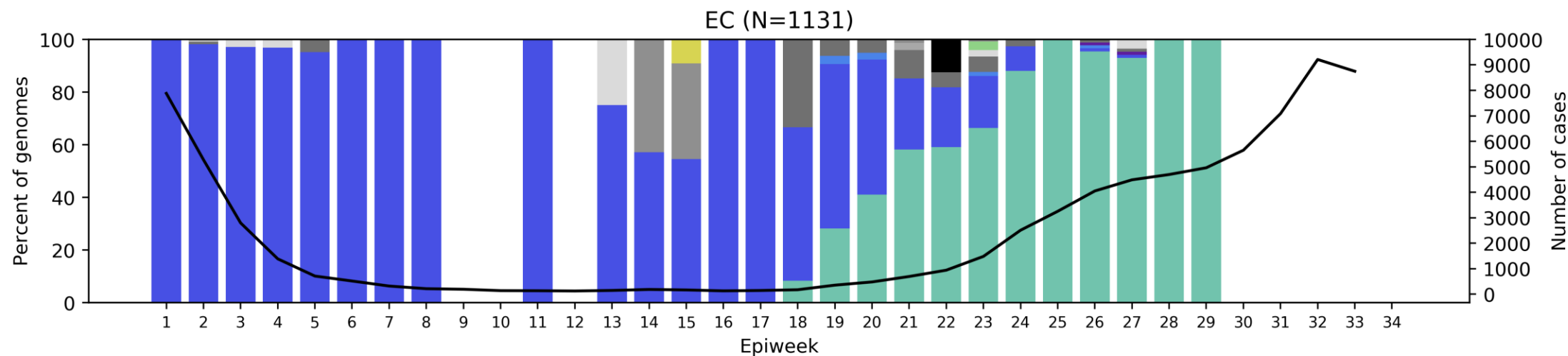
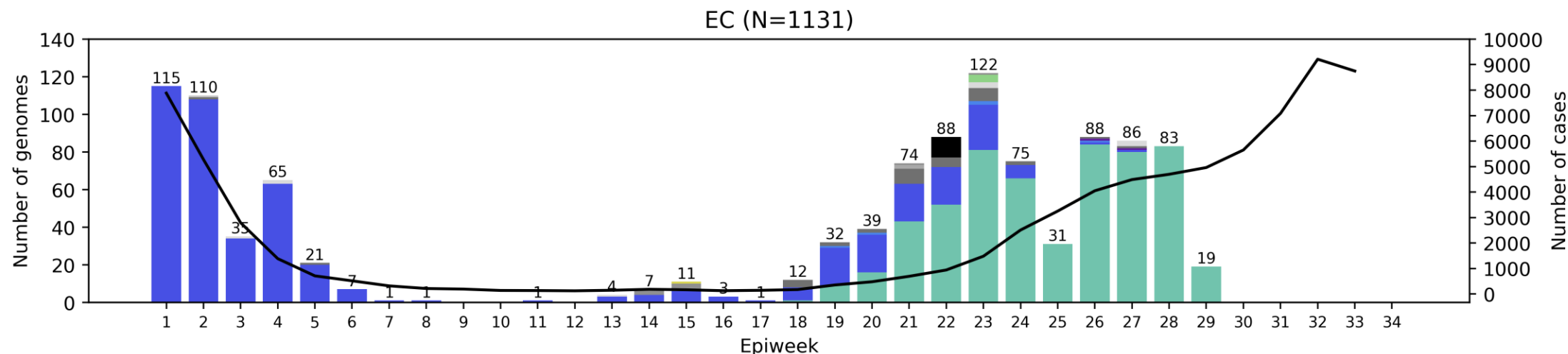
— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

Western Cape Province, 2021, n = 1681



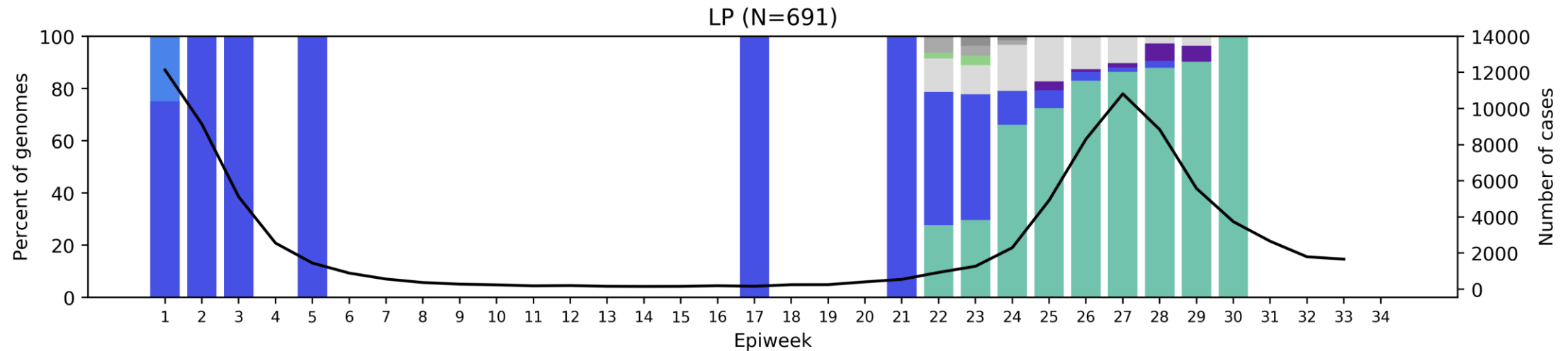
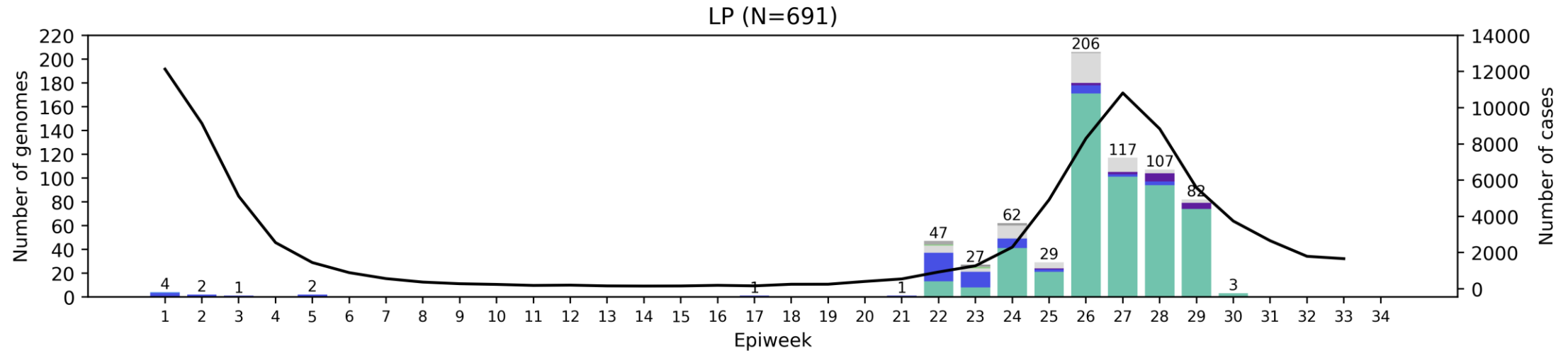
— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

Eastern Cape Province, 2021, n = 1131



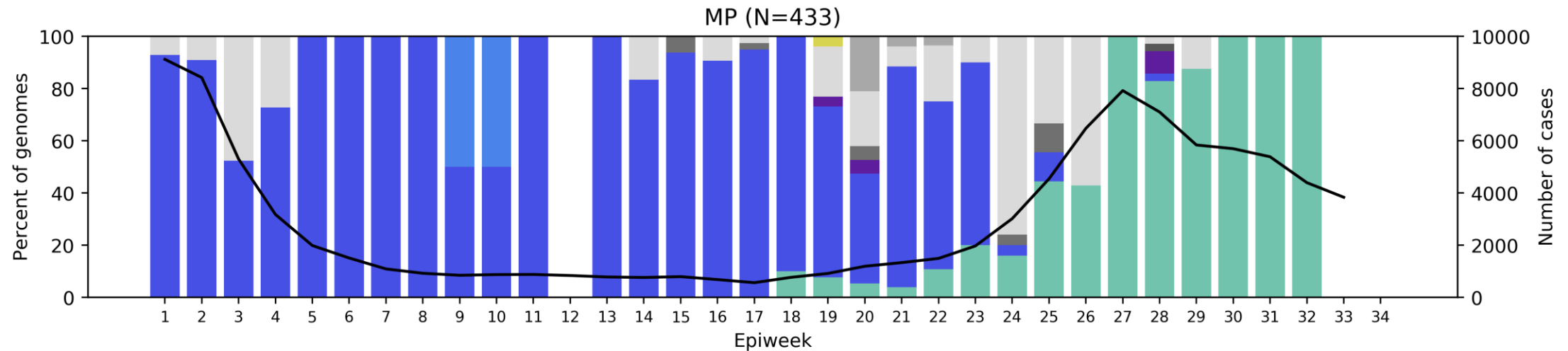
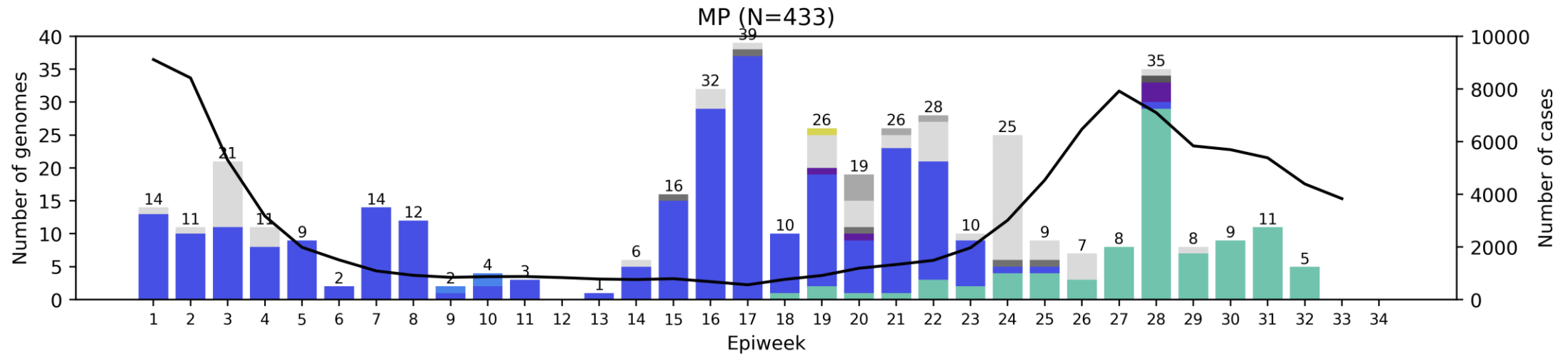
— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

Limpopo Province, 2021, n = 691



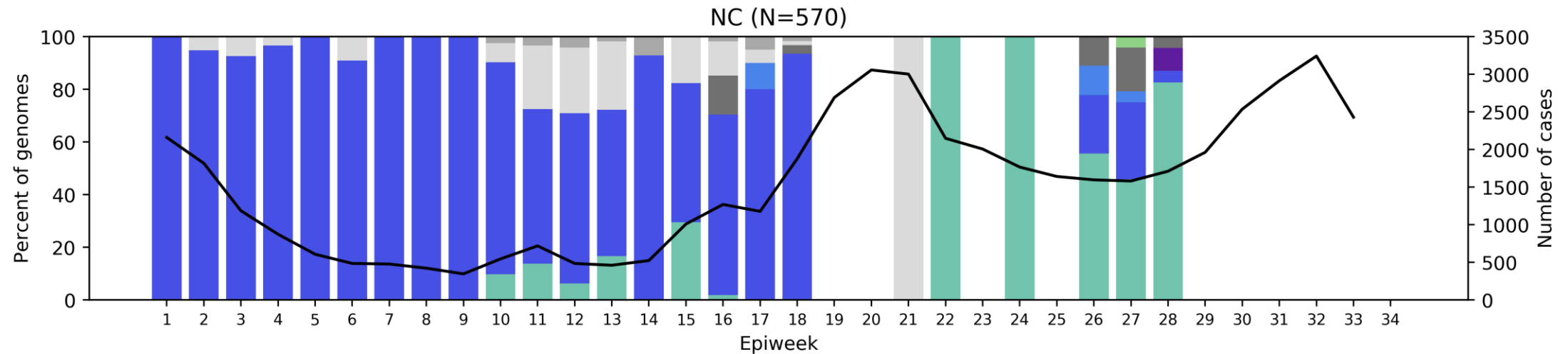
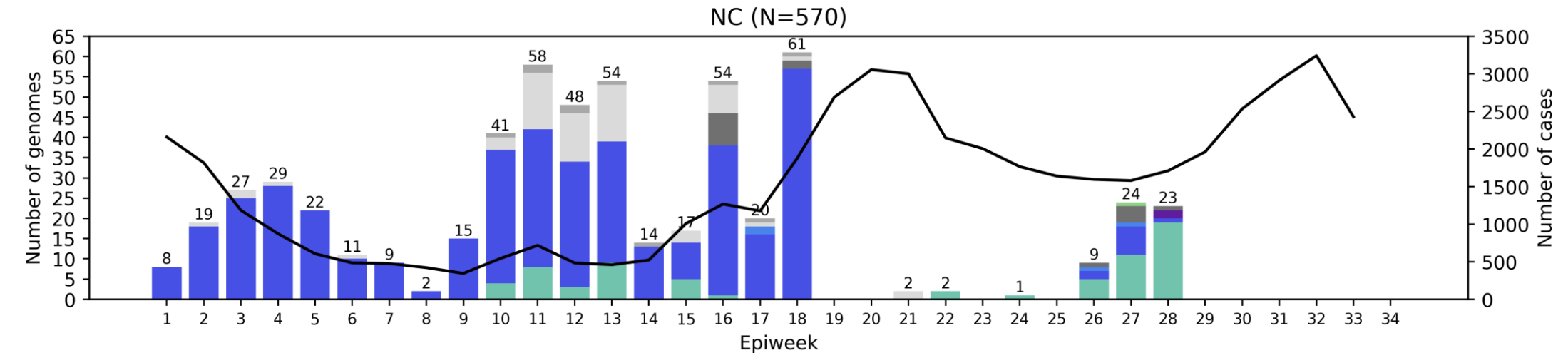
— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

Mpumalanga Province, 2021, n = 433



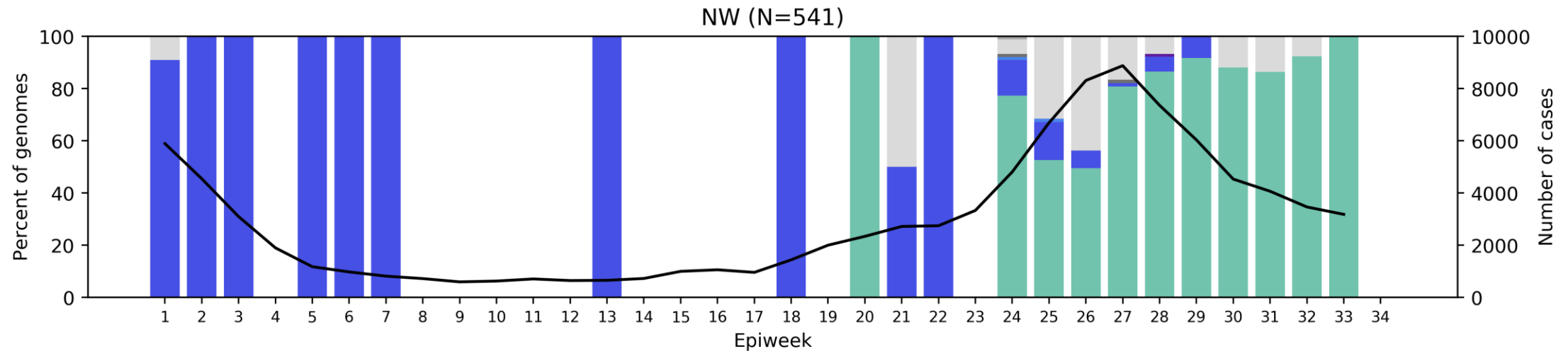
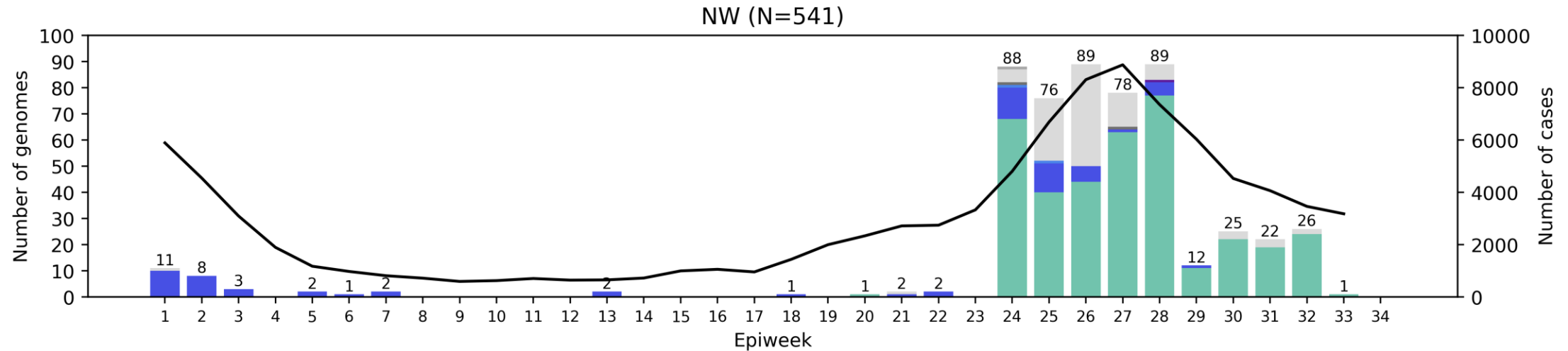
— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

Northern Cape Province, 2021, n = 570



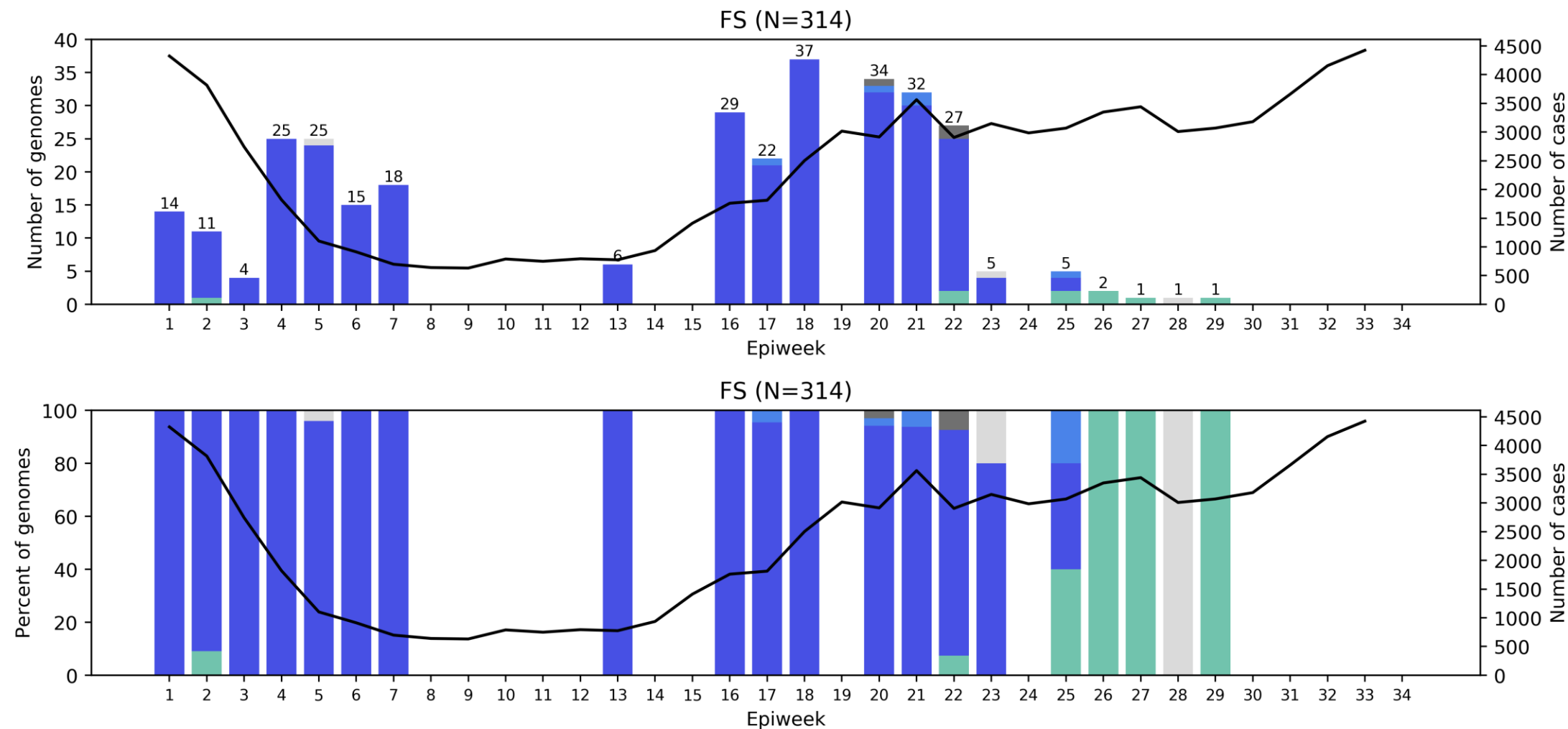
— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

North West Province, 2021, n = 541



— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

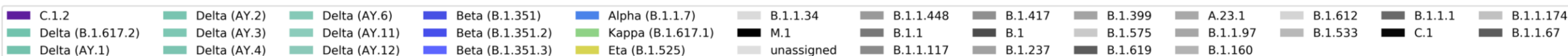
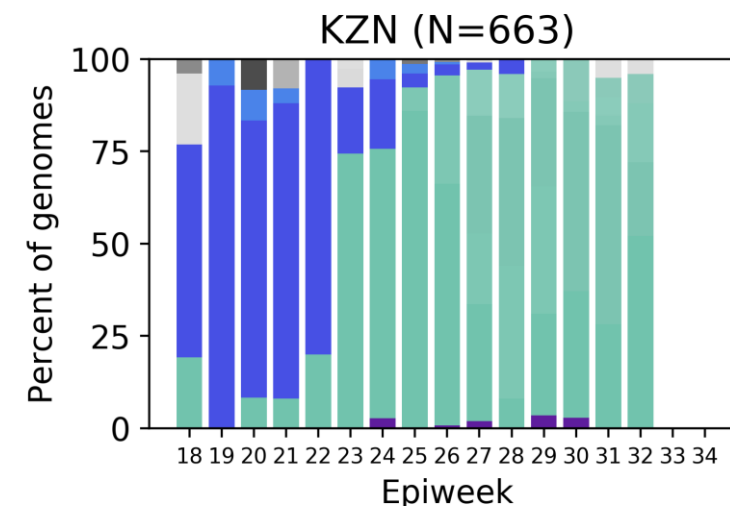
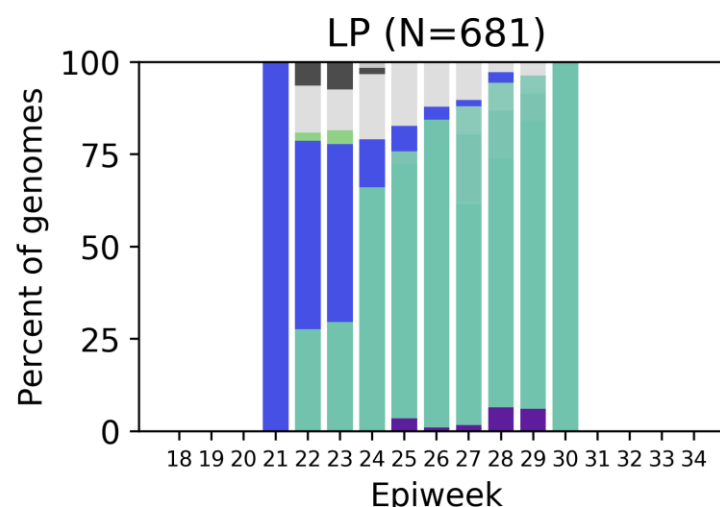
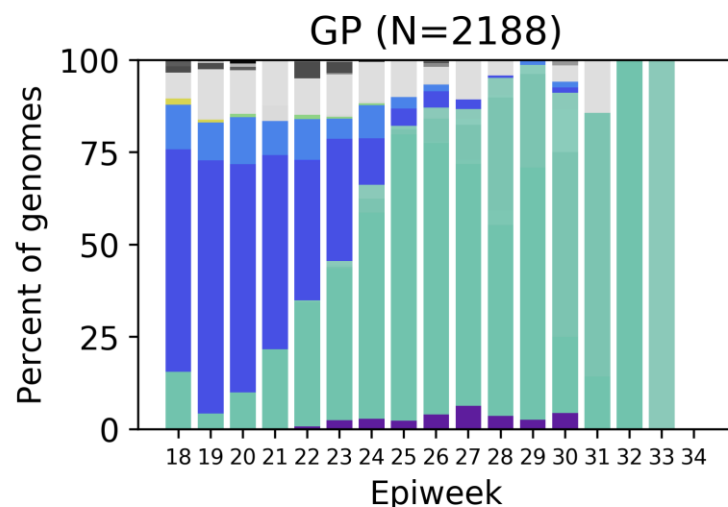
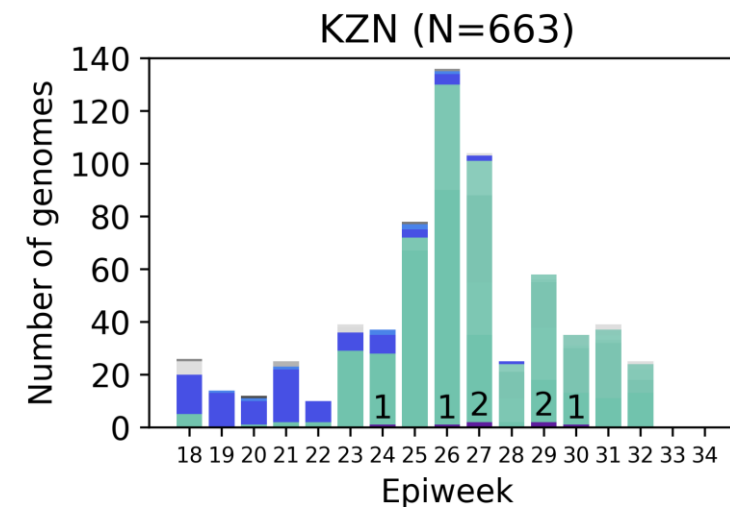
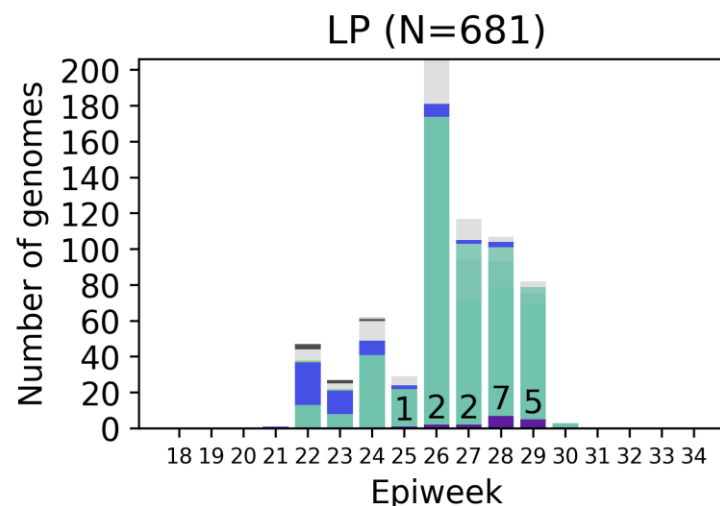
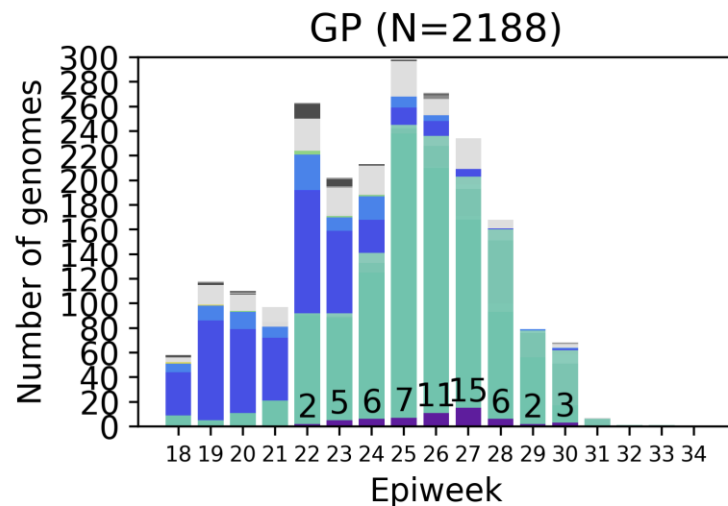
Free State Province, 2021, n = 314



— cases Delta (21A) Beta (20H, V2) Alpha (20I, V1) C.1.2 (20D) 20B M.1 (20C) unassigned 20D Kappa (21B) 20A 20C Eta (21D) 19B

C.1.2 (n=95 in SA) in May – mid-August 2021 by epiweek

Number of C.1.2 samples indicated above bar

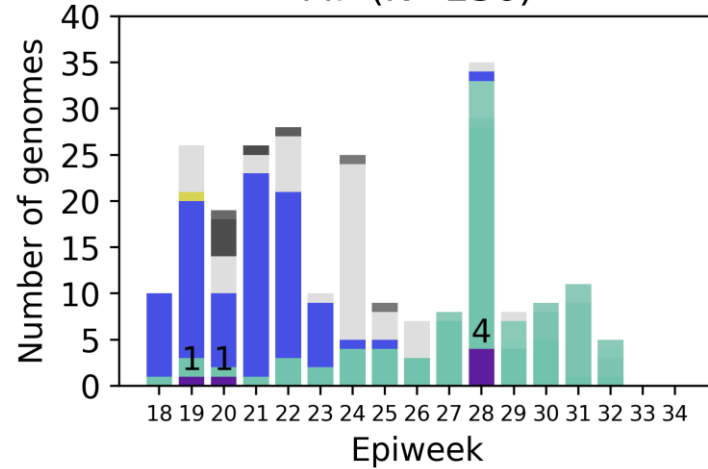


C.1.2 has now been detected in eight provinces. The majority of samples have been detected in Gauteng (n=57), followed by Limpopo (n=17) and KwaZulu-Natal (n=7).

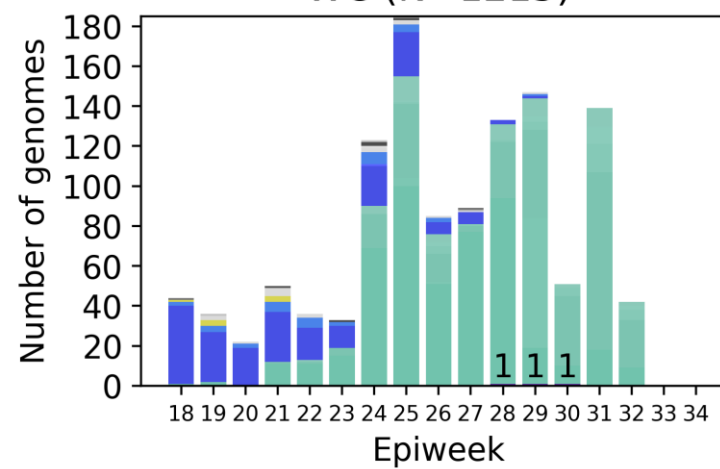
C.1.2 (n=95 in SA) in May – mid-August 2021 by epiweek

Number of C.1.2 samples indicated above bar

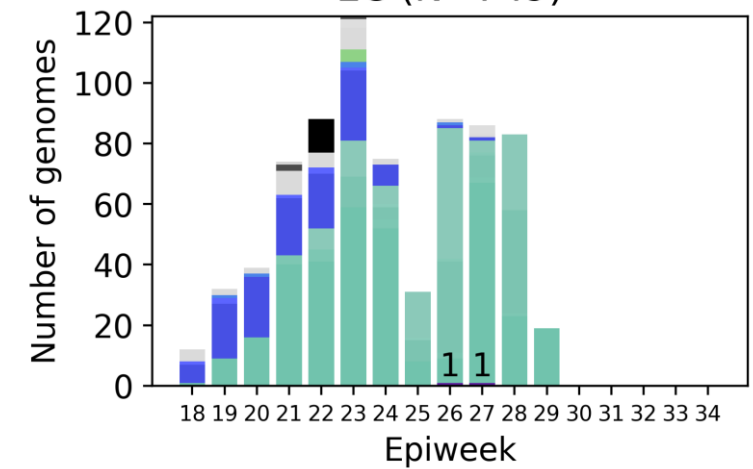
MP (N=236)



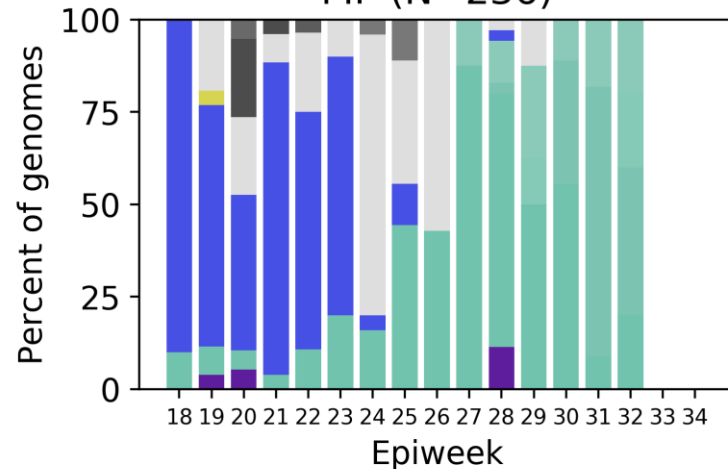
WC (N=1215)



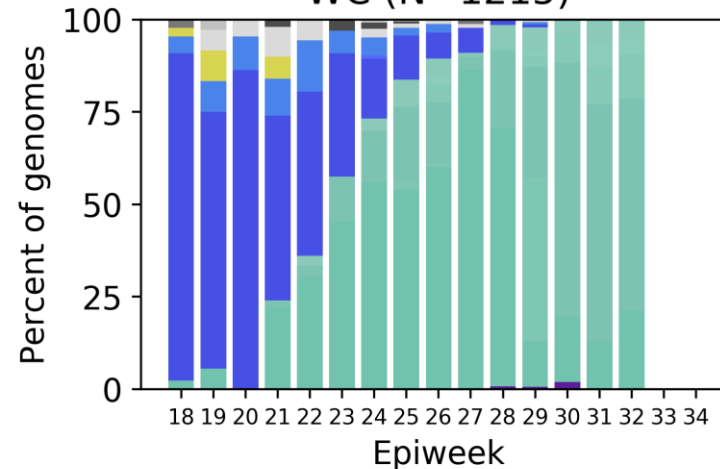
EC (N=749)



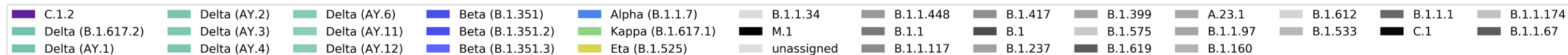
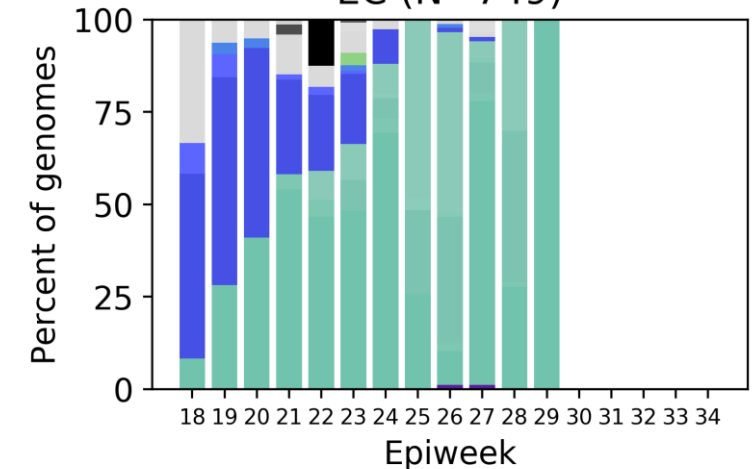
MP (N=236)



WC (N=1215)



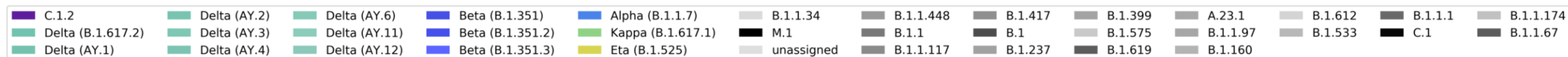
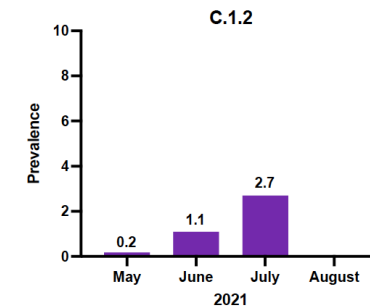
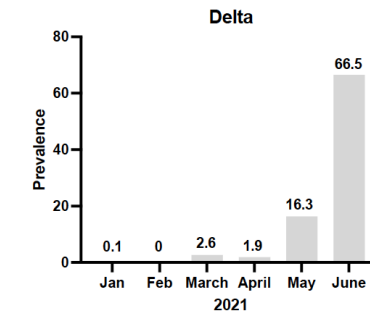
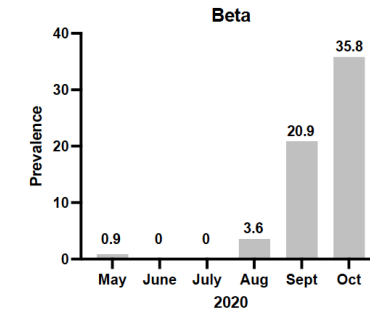
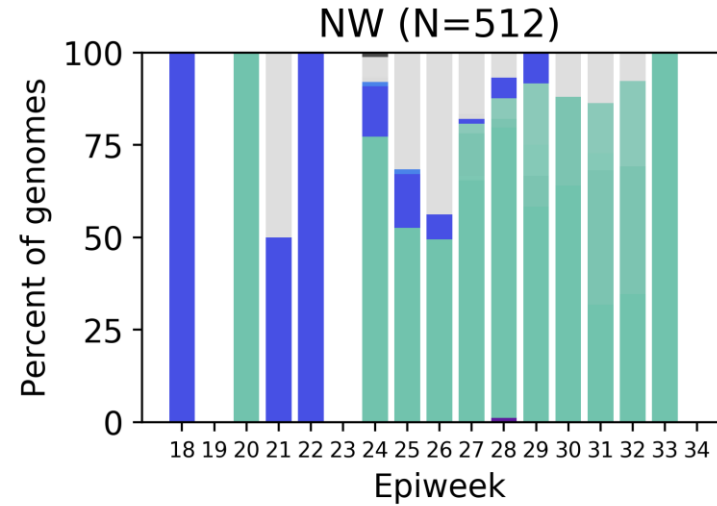
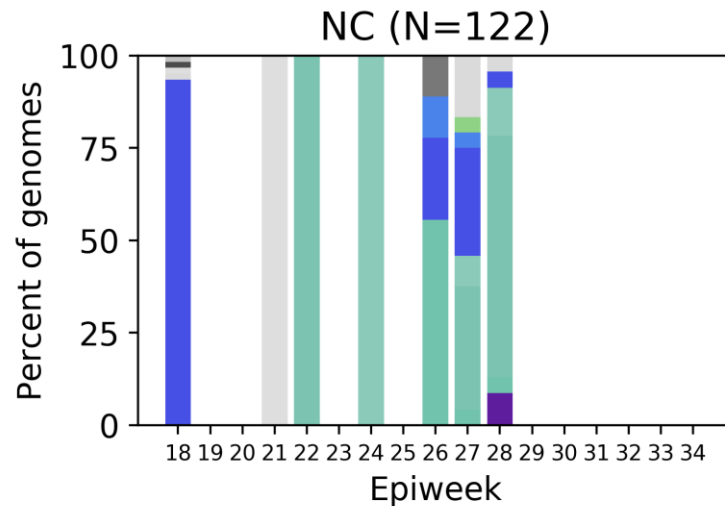
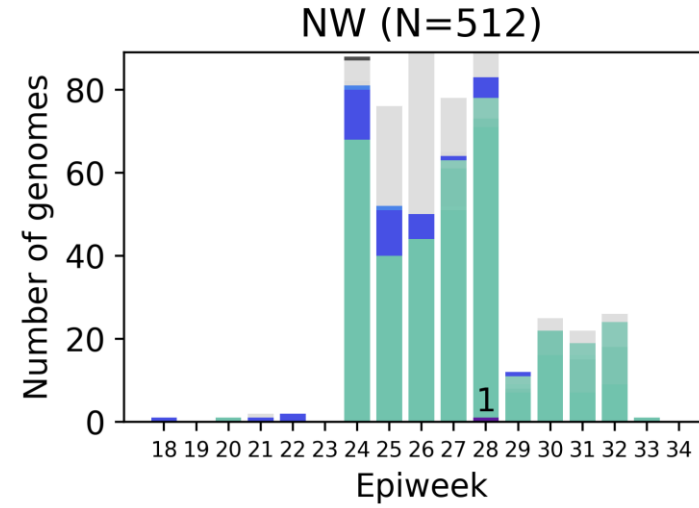
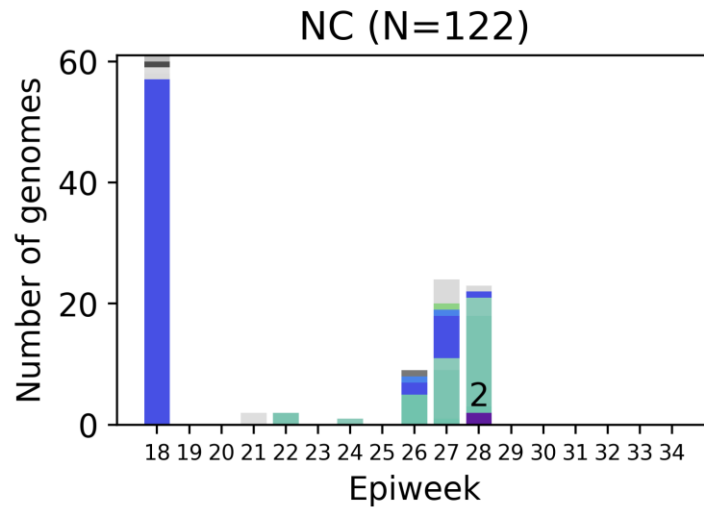
EC (N=749)



C.1.2 has now been detected in eight provinces. Mpumalanga has 6 sequences, the Western Cape 3, and the Eastern Cape two.

C.1.2 (n=95 in SA) in May – mid-August 2021 by epiweek

Number of C.1.2 samples indicated above bar



C.1.2 detected in Northern Cape (n = 2), with first detection in Northern West as of data from epiweek 28 (n=1).

Summary

- While Beta dominated infections in May, Delta rapidly began to dominate for most of the third wave in South Africa, spanning June, July and August.
- With the dominance of Delta, overall detection of other lineages decreased
- Mutated C.1 lineage has been given designation C.1.2 by Pangolin¹ and has now been detected in eight provinces in South Africa: Eastern Cape, Gauteng, Mpumalanga, Limpopo, KwaZulu-Natal, Northern Cape, North West, Western Cape.
 - C.1.2 frequency gradually increasing in each subsequent month

¹ <https://github.com/cov-lineages/pango-designation/issues/139>



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UKZN-Inkosi Albert Luthuli Central Hospital



Dr Khanyi Msomi
Dr Kerusha Govender
Dr Pravi Moodley
Dr Aabida Khan
Dr Lili Gounder
Dr Kerri Francois
Dr Cherise Naicker
Dr Joedene Chetty
Dr Neli Ngcaba
Dr Tshepiso Mosito
Mr Malcolm Ellapen
Mr Kubendran Reddy
The COVID-19 Bench team

University of KwaZulu-Natal & Africa Health Research Institute



KRISP at UKZN:

Tulio de Oliveira
Richard Lessels
Houriiyah Tegally
Eduan Wilkinson
Jennifer Giandhari
Sureshnee Pillay
Emmanuel James San



AHRI

Alex Sigal
Sandile Cele
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University of Stellenbosch & NHLS Tygerberg Virology



Susan Engelbrecht
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Shannon Wilson
Karabo Phadu
Tania Stander
Kamela Mahlakwane
Mathilda Claassen
Diagnostic laboratory staff

University of Cape Town, NHLS & WCG



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Carolyn Williamson
Nei-yuan Hsiao
Diana Hardie
Kruger Marais
Stephen Korsman
Ziyaad Valley-Omar

WCG-UCT

Mary-Anne Davies
Hannah Hussey
Andrew Boulle
Masudah Paleker
Theuns Jacobs
Erna Morden



EDCTP



UCT, IDM and CIDRI-Africa

Deelan Doolabh
Arash Iranzadeh
Lynn Tyers
Innocent Mudau
Nokuzola Mbhele
Fezokuhle Khumalo
Thabang Serakge
Bruna Galvão
Arghavan Alisoltani
(U. California)

Robert Wilkinson
Darren Martin
Nicola Mulder
Wendy Burgers
Ntobeko Ntusi
Rageema Joseph
Sean Wasserman
Linda Boloko



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University of the Free State



UFS

Dominique Goedhals
Armand Bester
Martin Myaga
Peter Mwangi
Emmanuel Ogunbayo
Milton Mogotsi
Makgotso Maotoana
Lutfiyya Mohamed



NHLS Division of Virology

Sabeegah Vawda
Felicity Burt
Thokozani Mkhize
Diagnostic laboratory staff



National Institute for Communicable Diseases



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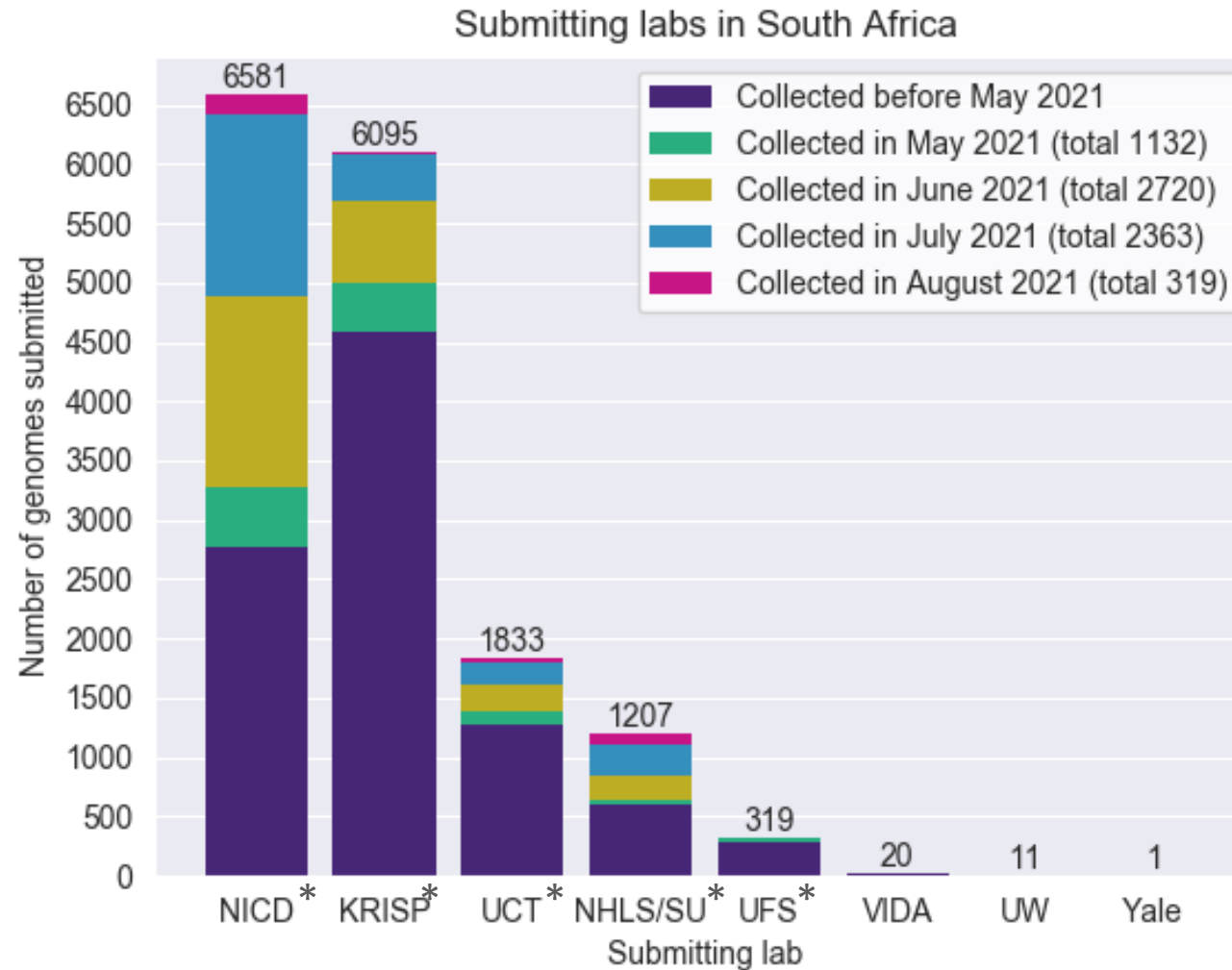
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South African genomes submitted per sequencing lab, 2020 and 2021 (N=16 067)



*NGS-SA laboratories

Multiple labs from NGS-SA are contributing to the sequencing effort.
Sequencing efforts have increased with the third wave.

Variants of Concern (VOC)

WHO label	Pango lineages ⁺	GISAID clade	Nextstrain clade	Additional amino acid changes monitored*	Earliest documented samples	Date of designation
Alpha	B.1.1.7 [#]	GRY	20I (V1)	+S:484K +S:452R	United Kingdom, Sep-2020	18-Dec-2020
Beta	B.1.351	GH/501Y.V2	20H (V2)	+S:L18F	South Africa, May-2020	18-Dec-2020
Gamma	P.1	GR/501Y.V3	20J (V3)	+S:681H	Brazil, Nov-2020	11-Jan-2021
Delta	B.1.617.2 [§]	G/478K.V1	21A	+S:417N	India, Oct-2020	VOI: 4-Apr-2021 VOC: 11-May-2021

<https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/> accessed 27 August 2021

*Notable spike (S) amino acid changes under monitoring, which are currently reported in a minority of sequenced samples

⁺Includes all descendant lineages.

[#]Includes all Q.* lineages in the PANGO nomenclature system.

[§]Includes all AY.* lineages in the PANGO nomenclature system.

Currently designated Variants of Interest (VOI)

WHO label	Pango* lineages	GISAID clade	Nextstrain clade	Earliest documented samples	Date of designation
Eta	B.1.525	G/484K.V3	21D	Multiple countries, Dec-2020	17-Mar-2021
Iota	B.1.526	GH/253G.V1	21F	United States of America, Nov-2020	24-Mar-2021
Kappa	B.1.617.1	G/452R.V3	21B	India, Oct-2020	4-Apr-2021
Lambda	C.37	GR/452Q.V1	21G	Peru, Dec-2020	14-Jun-2021

<https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/> accessed 27 August 2021

*Includes all descendant lineages.

Submission of routine specimens for sequencing

- representative of multiple geographic regions (provinces/districts/health facilities) from individuals of
 - all ages
 - over as many time periods during the SARS-CoV-2 epidemic in South Africa
- requested that testing laboratories in both the private and public sectors, submit respiratory samples to their closest NGS-SA sequencing laboratory on a routine basis (ideally every week) as follows, depending on the capacity of the testing laboratory:
 - All positives samples should be sent every week (NGS-SA laboratory will perform random sampling as described below) **OR**
 - A weekly selection of approximately 10%-20% of randomly selected positive samples should be sent every week. Number of selected samples will depend on the size of laboratory and how many other laboratories are drained by the submitting laboratory.

Submission of special interest specimens for sequencing

In addition to routine samples mentioned above, please send specimens separately to above and clearly marked if:

- Suspected vaccine breakthrough (≥ 14 days after vaccine), especially if hospitalised and clinically severe
- Suspected re-infection (≥ 90 days after previous episode), especially if hospitalised and clinically severe
- Prolonged shedding with high SARS-CoV-2 viral loads (i.e. Ct values less than 30 for more than 1 month post-primary diagnosis) in immunocompromised individuals
- Possible animal-to-human transmission
- Suspected cases of importation from another country, especially countries known to harbour SARS-CoV-2 variants of concern or countries with little available information
- Clusters of “unusual” cases (e.g., in terms of disease presentation, patient groups affected, etc.)