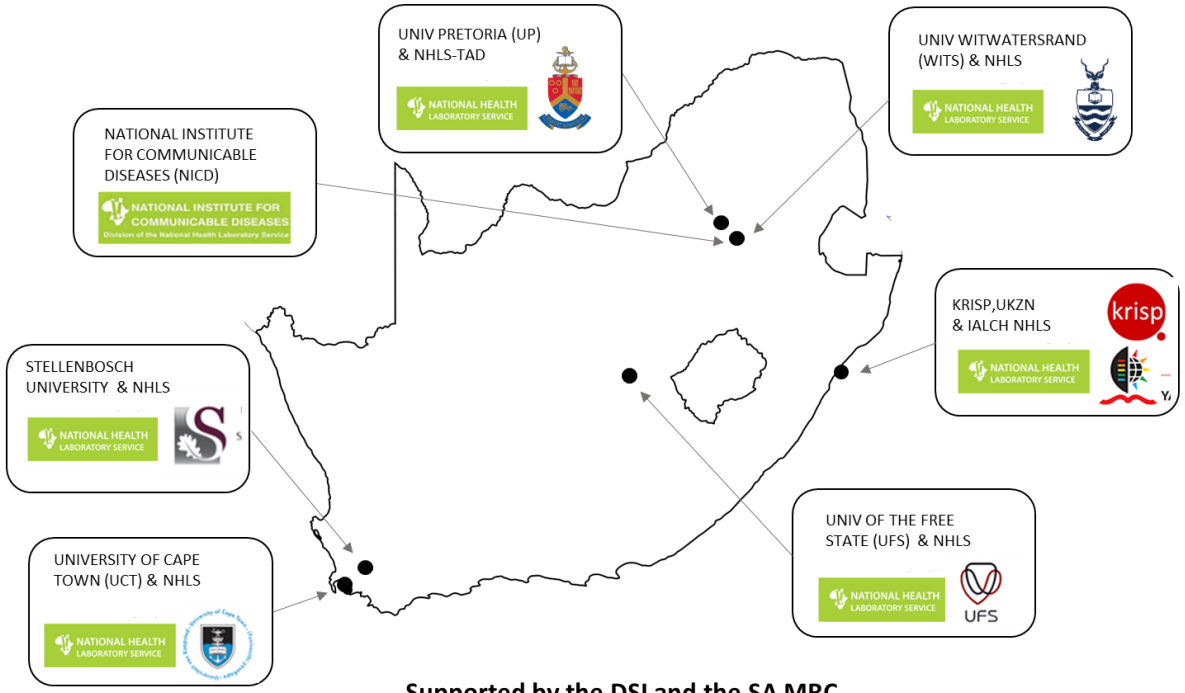
Network for Genomic Surveillance in South Africa (NGS-SA)

SARS-CoV-2 Sequencing Update
4 March 2022



Supported by the DSI and the SA MRC

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

Prepared by the National Institute for Communicable Diseases (NICD) of the National Health Laboratory (NHLS) on behalf of the Network for Genomics Surveillance in South Africa (NGS-SA)

The genomic data presented here are based on South African SARS-CoV-2 sequence data downloaded from GISAID (www.gisaid.org) on 4 March 2022 at 14h16

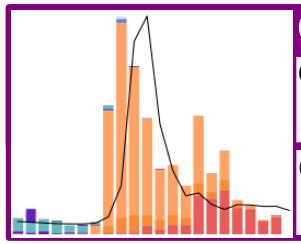
Data license: https://www.gisaid.org/registration/terms-of-use/

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 PMCID: 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 PMCID: PMC5388101

Case data is based on specimen collection date. Cases from https://www.nicd.ac.za/diseases-a-z-index/disease-index-covid-19/surveillance-reports/weekly-epidemiological-brief/
Test data gives weekly percentage testing positive rates, from https://www.nicd.ac.za/diseases-a-z-index/disease-index-covid-19/surveillance-reports/weekly-testing-summary/

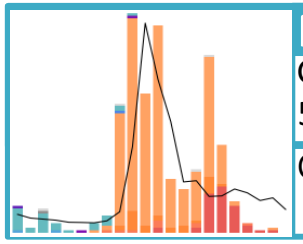
SARS-CoV-2
GENOMIC SURVEILLANCE
epiweeks 39 (2021) - 8 (2022)



Gauteng ↓ PTP: 8.6%

Genomes	Cases
2 396 (26.2%)	268 481 (35.6%)

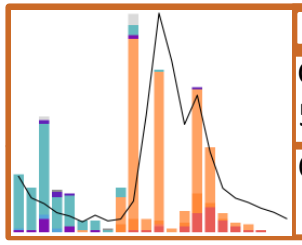
Genomes deposited in the last week: 77 | 8 | 116 | 1



North West ↓ PTP: 10.5%

Genomes	Cases
520 (5.7%)	39 283 (5.2%)

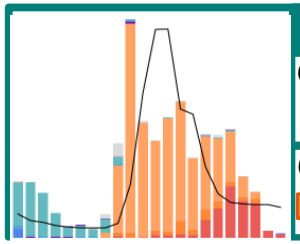
Genomes deposited in the last week: 78 | 6 | 19 | 1 | 1



Northern Cape ↓ PTP: 9.0%

Genomes	Cases
548 (6.0%)	17 748 (2.4%)

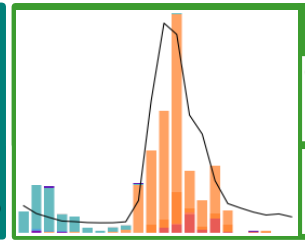
Genomes deposited in the last week: 34 | 3 | 17 | 4 | 5



Western Cape ↓ PTP: 12.6%

Genomes	Cases
1 741 (19.0%)	127 748 (16.9%)

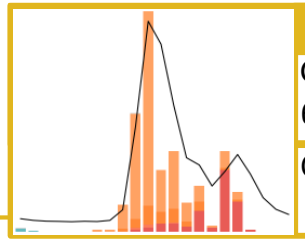
Genomes deposited in the last week: 57 | 10 | 80 | 3 | 1 | 1 | 1 | 1 | 15 | 107 | 1 | 1 | 6



Eastern Cape ↓ PTP: 5.8%

Genomes	Cases
821 (9.0%)	53 182 (7.0%)

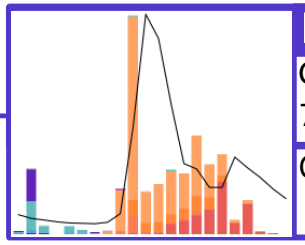
Genomes deposited in the last week: 30 | 2 | 8 | 2 | 14 | 57 | 3



Limpopo ↓ PTP: 8.4%

Genomes	Cases
691 (7.6%)	31 591 (4.2%)

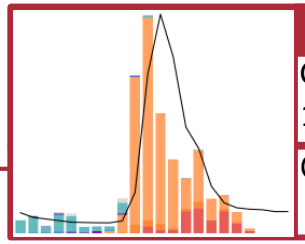
Genomes deposited in the last week: 102 | 13 | 33 | 2



Mpumalanga ↓ PTP: 14.0%

Genomes	Cases
795 (8.7%)	39 462 (5.2%)

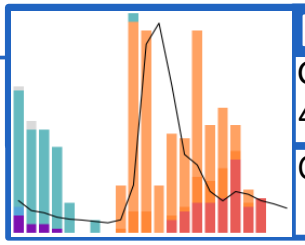
Genomes deposited in the last week: 36 | 3 | 51 | 1



KwaZulu-Natal ↑ PTP: 7.8%

Genomes	Cases
1 208 (13.2%)	139 016 (18.4%)

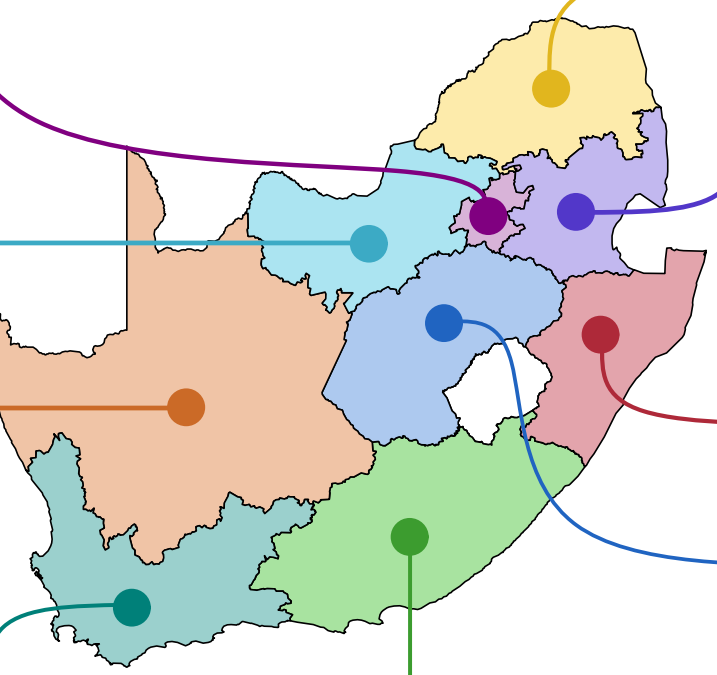
Genomes deposited in the last week: 1



Free State ↓ PTP: 8.2%

Genomes	Cases
423 (4.6%)	38 448 (5.1%)

Genomes deposited in the last week: 11 | 1 | 27



Omicron (BA.1) | Omicron (BA.1.1) | Omicron (BA.2) | Omicron (BA.3) | Beta (20H, V2) | Alpha (20I, V1) | Delta (21A) | Delta (21I) | C.1.2 | Delta (21J) | 20A | 20B | 20C | 20D | Unassigned | Cases

1 072 genomes deposited in the past week

Bar graphs represent genomes sequenced per epiweek, with lines representing cases by collection date (weeks 39 [2021] – 8 [2022])
Genomes and cases presented as provincial total (percentage of national total) for epiweeks 39 (2021) – 8 (2022)
PTP: percentage testing positive in week 8 (20 Feb 2022 – 26 Feb 2022); the arrow indicates direction of change since the previous week (13 Feb 2022 – 19 Feb 2022)

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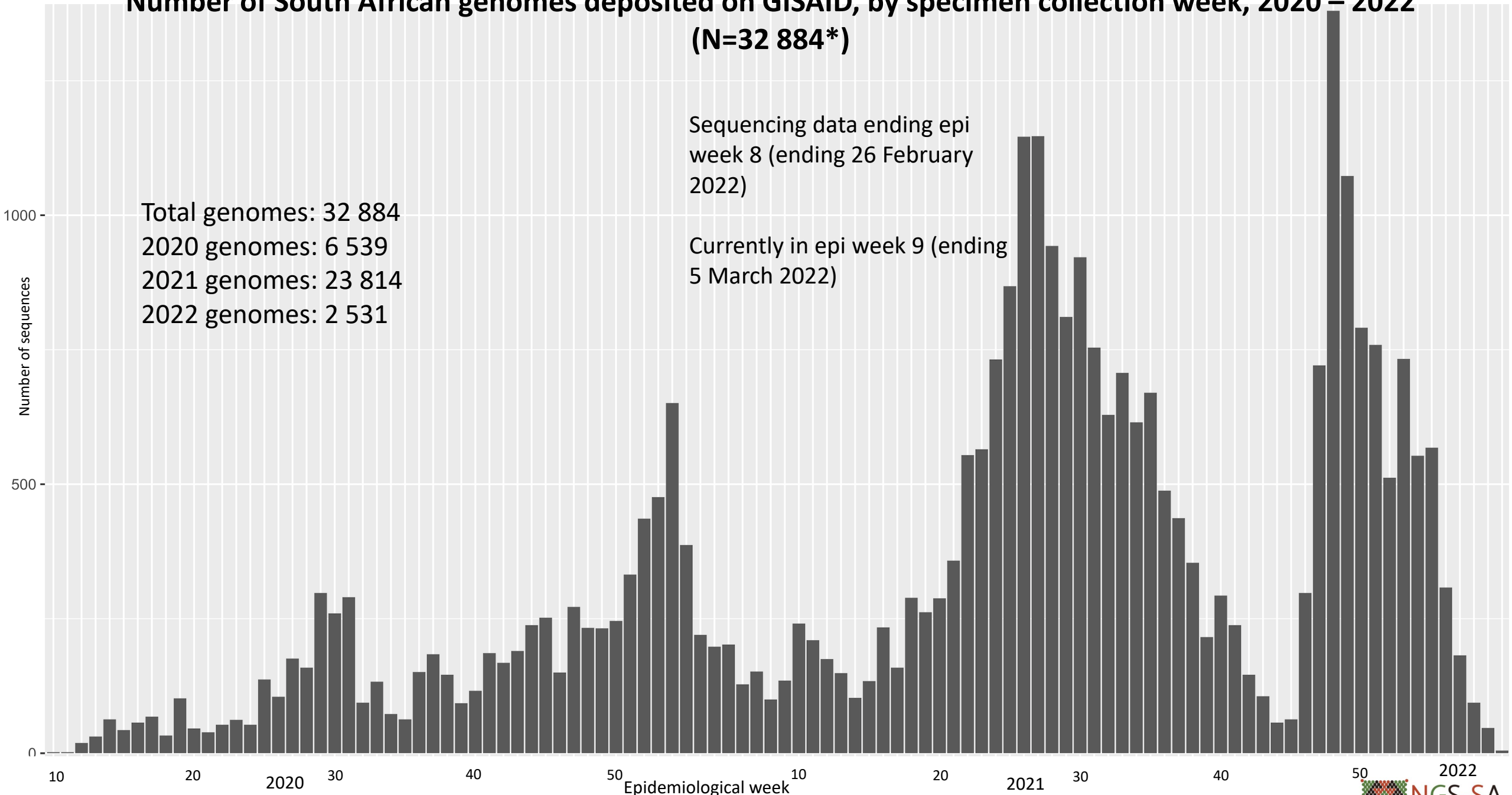
Number of South African genomes deposited on GISAID, by specimen collection week, 2020 – 2022 (N=32 884*)



*This represents the cleaned, de-duplicated dataset of unique **National and Pneumonia Surveillance** sequences. This dataset will be used for all further figures.

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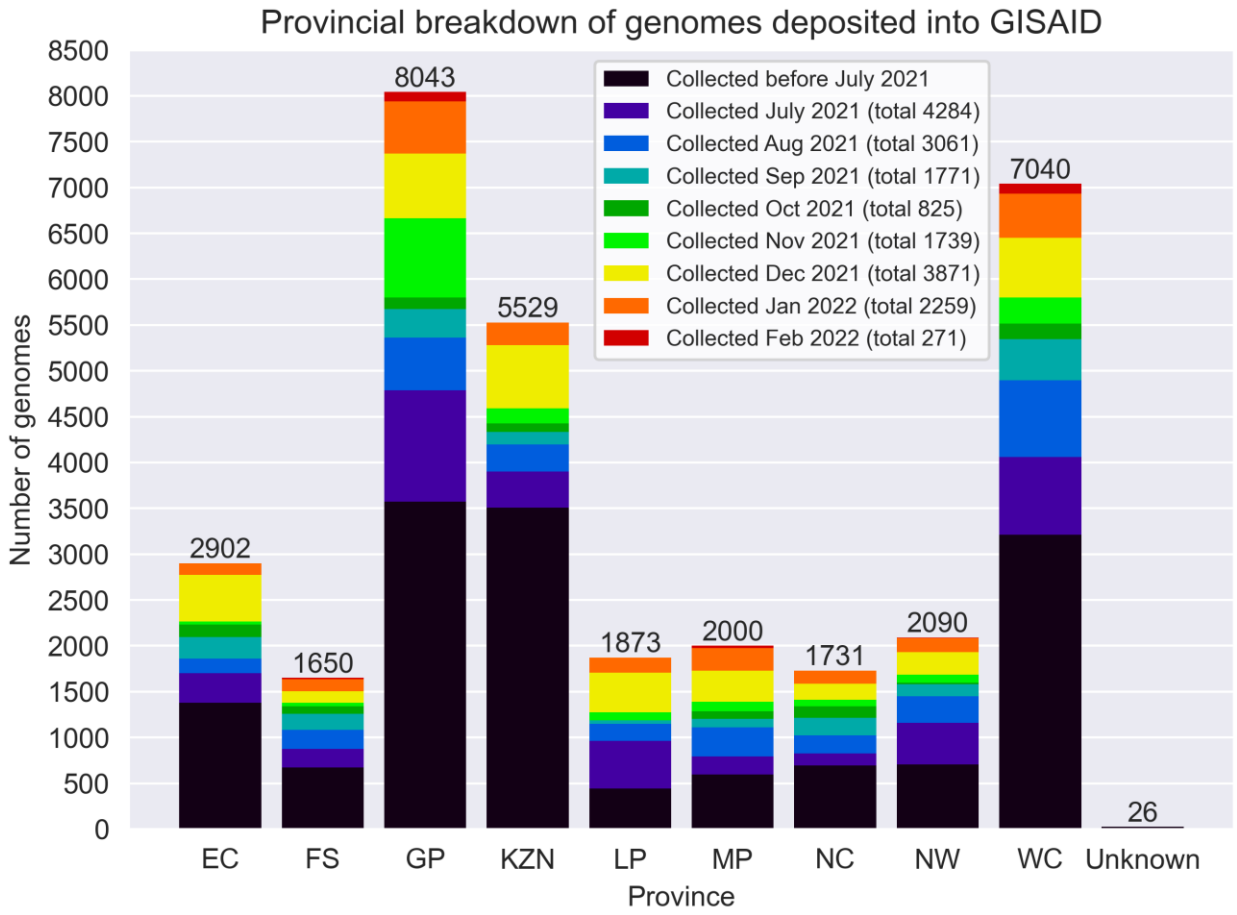
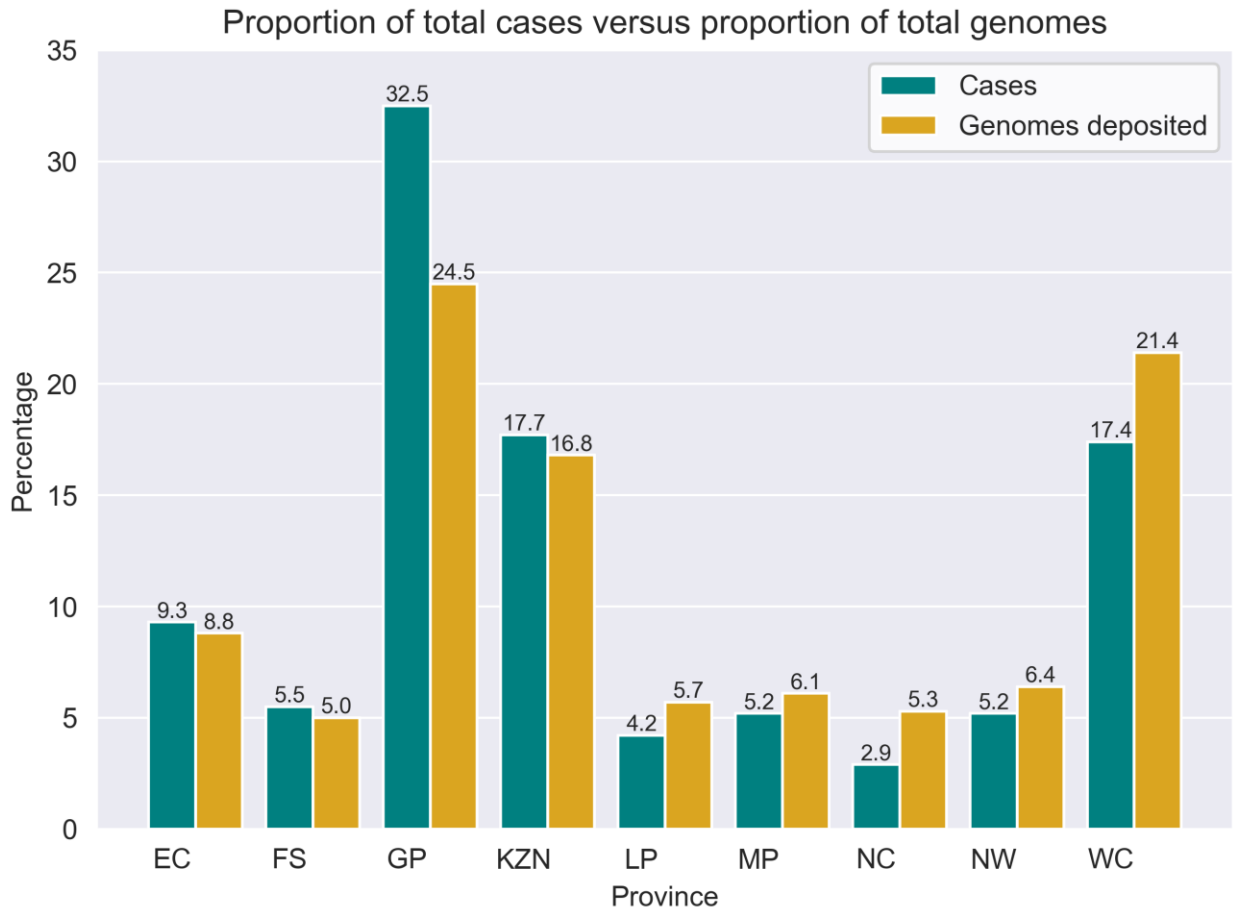
GISAID genomes vs total cases, 2020 – 2022 (N=32 884)





All provinces, apart from GP, LP, NC and WC, have comparable percentages of overall cases and overall sequenced genomes.

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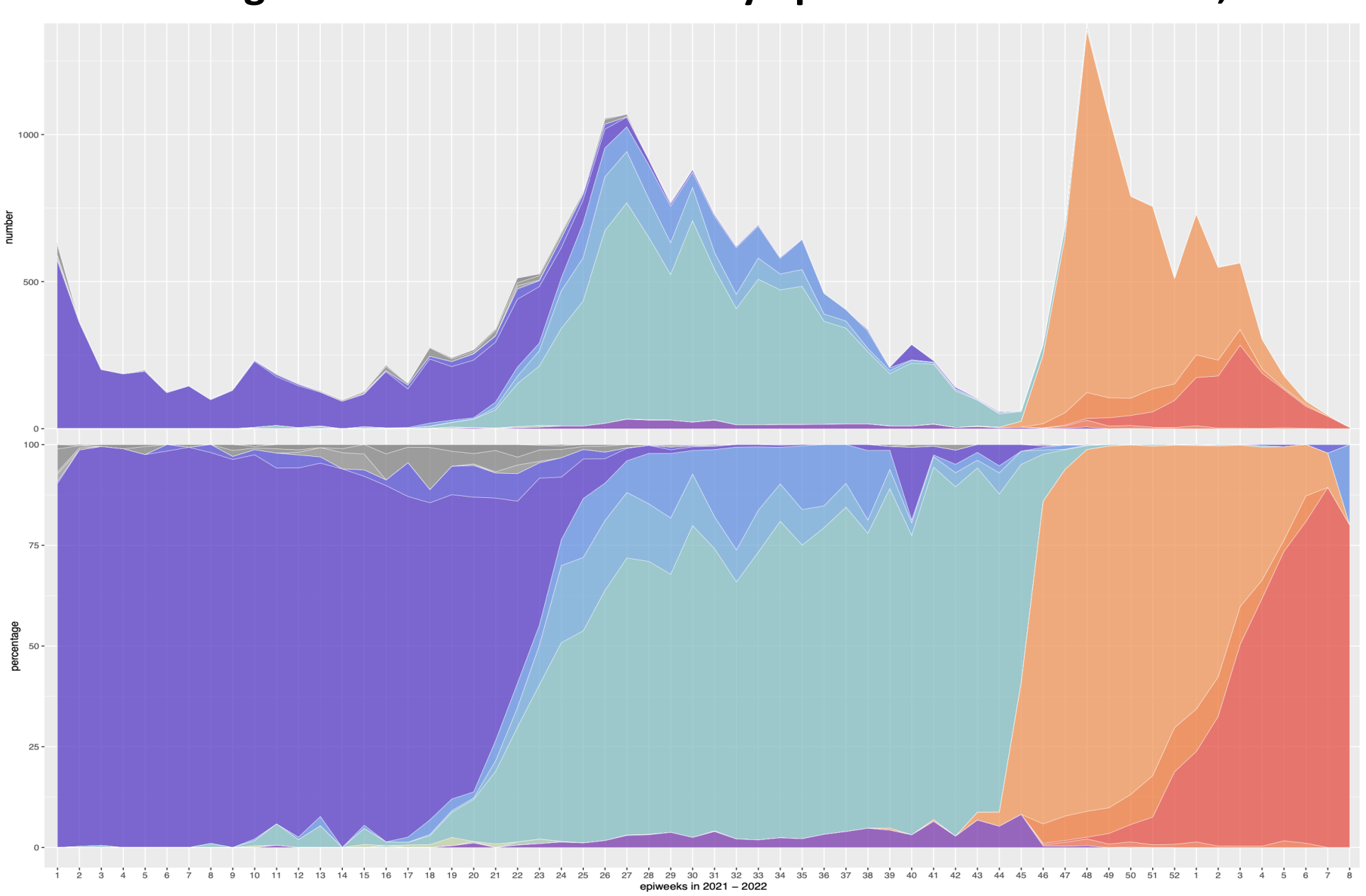
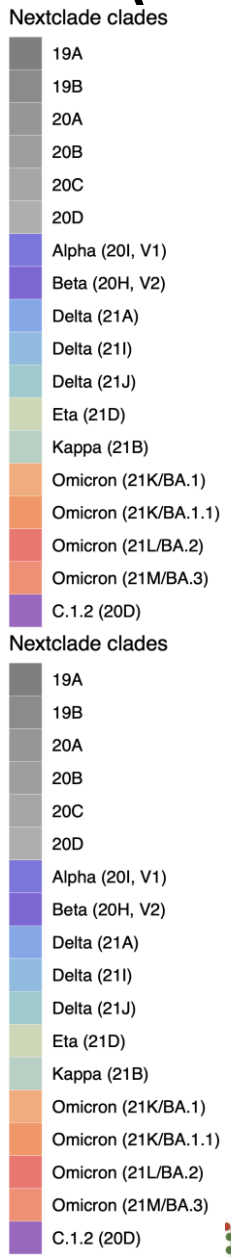
Percentage and number of clades by epiweek in South Africa, 2021 - 2022 (N=26 345)





Sequencing data ending epi week 8 (ending 26 February 2022)

Currently in epi week 9 (ending 5 March 2022)

Delta dominated in South Africa until October at >80%. Omicron has dominated from November onwards.

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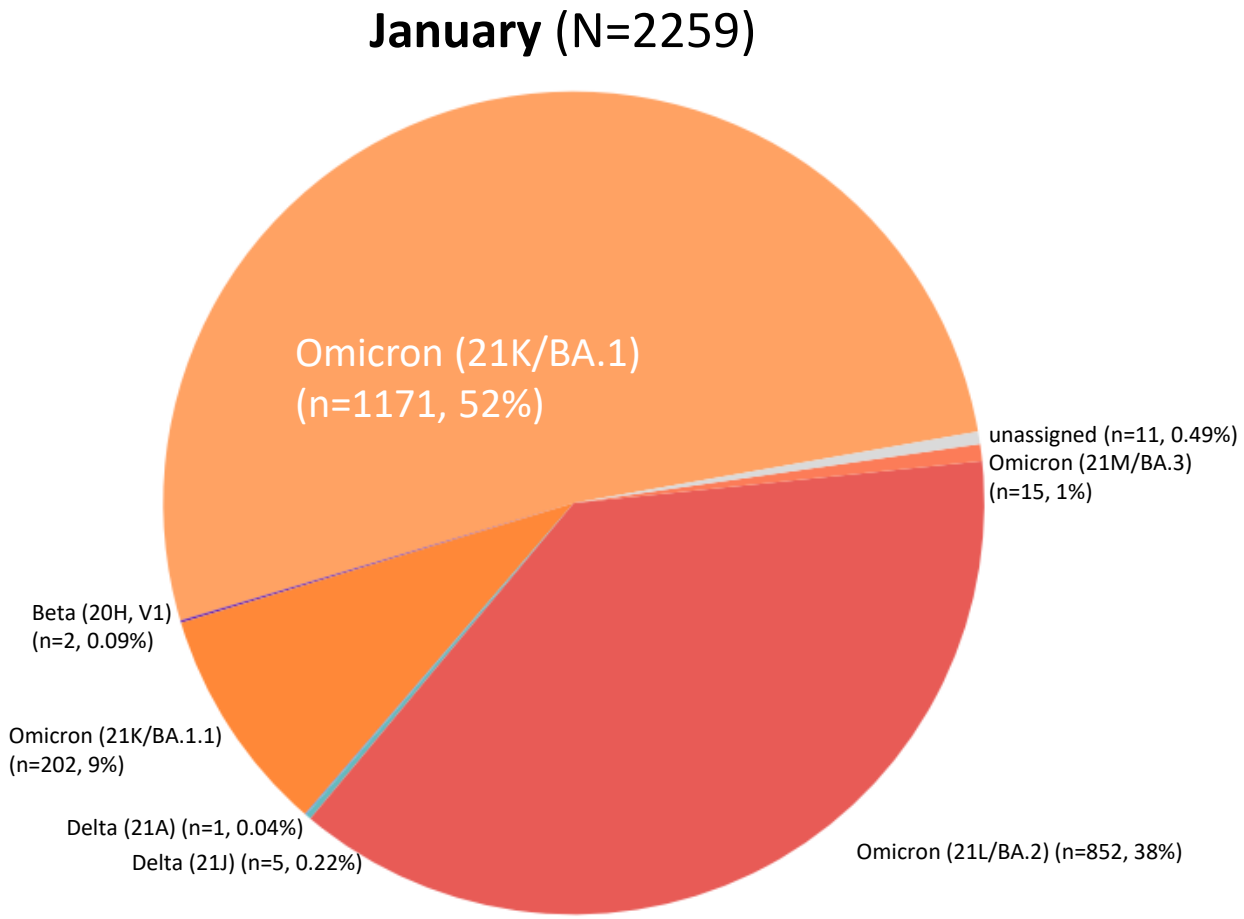
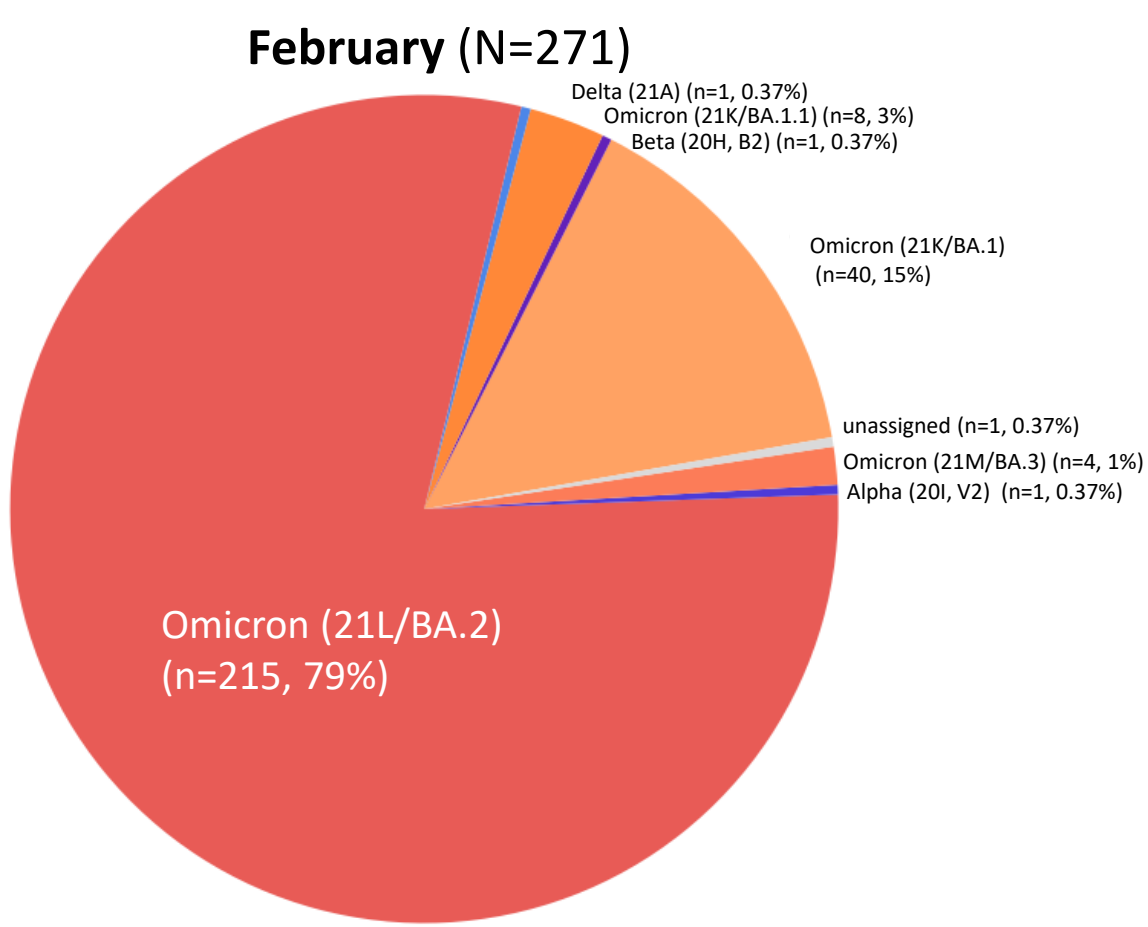
Prevalence of Variants of Concern (VOC) and Variants of Interest (VOI) in Jan 2021 – Feb 2022



Total Omicron in Jan: 2240 (99.2%)



Total Omicron in Feb: 267 (98.5%)

Omicron (21K/BA.1) | Omicron (21L/BA.2) | C.1.2 (20D) | Alpha (20I, V1) | Delta (21I) | Delta (21J) | Kappa (21B) | Eta (21D) | Other | unassigned
Omicron (21K/BA.1.1) | Omicron (21M/BA.3) | Beta (20H, V2) | Delta (21A)

Omicron dominated in January (99%, 2240/2259), and continues to dominate in February (98%, 267/271) with sub-lineage BA.2 increasing in prevalence. Very low levels (<1% each) of Alpha, Beta and Delta have also been detected.

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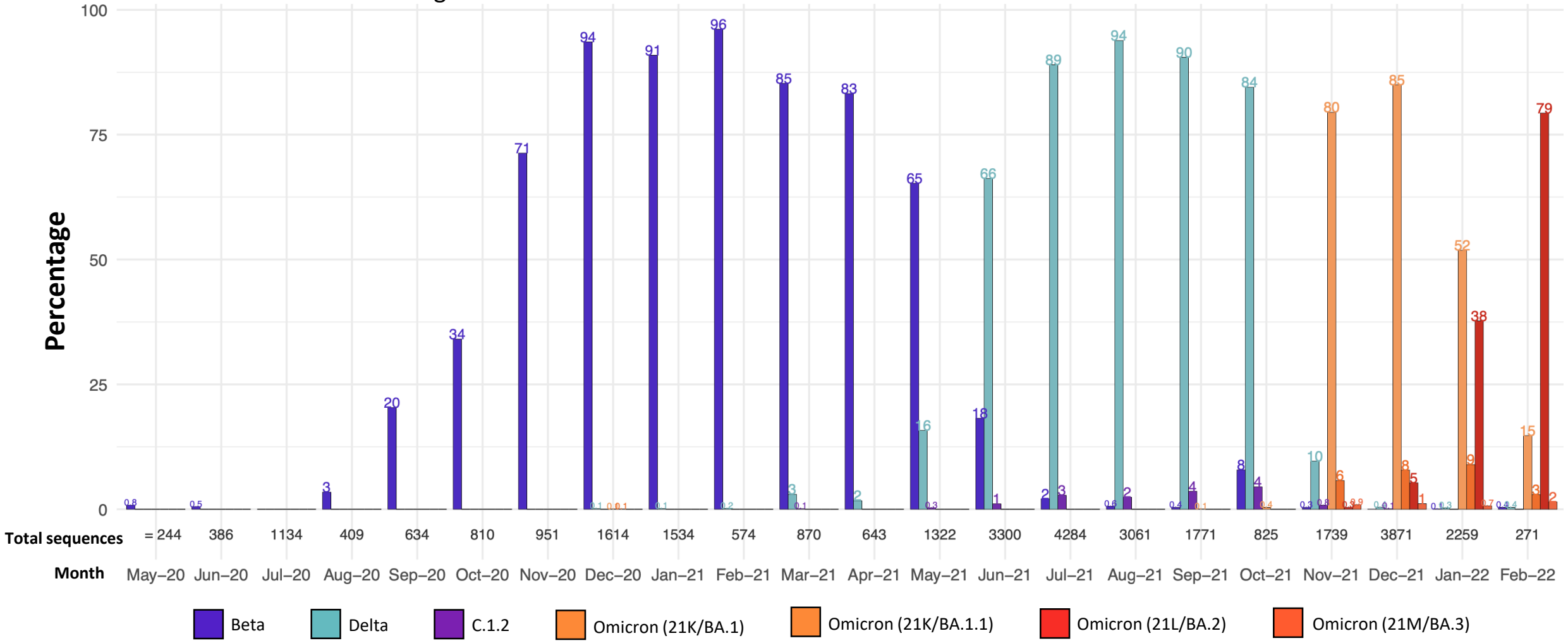
Detection Rates: Beta, Delta, C.1.2 and Omicron

Detection rates of variants being monitored in South Africa*



*Bars represent percentage prevalence of variant for the month; total sequences collected for the month are given below

Omicron has been dominant since November (>80% in November, >99% in December and January). BA.2 increased in frequency in January, making up 38% of genomes. BA.2 dominates in February (79%).
BA.3 continues to be present at low levels.

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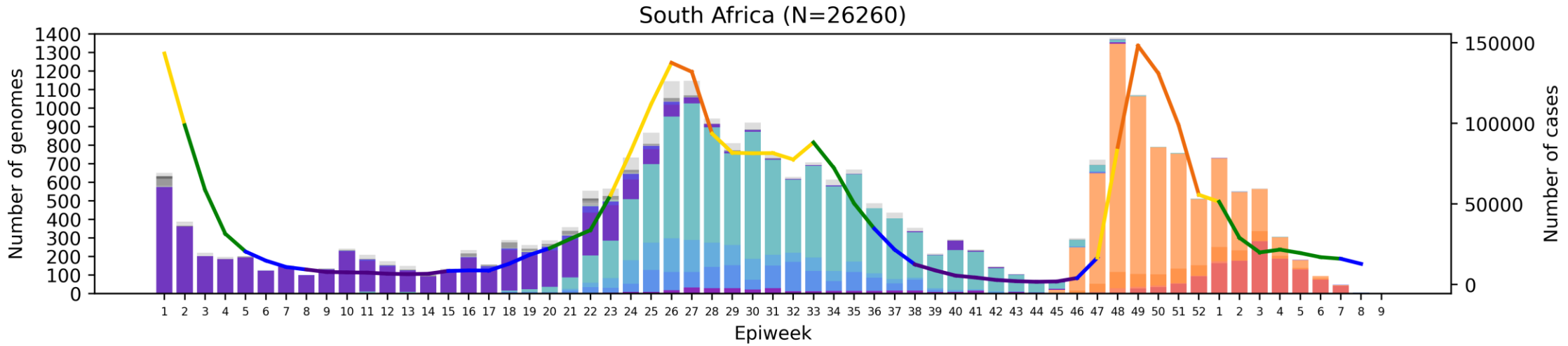
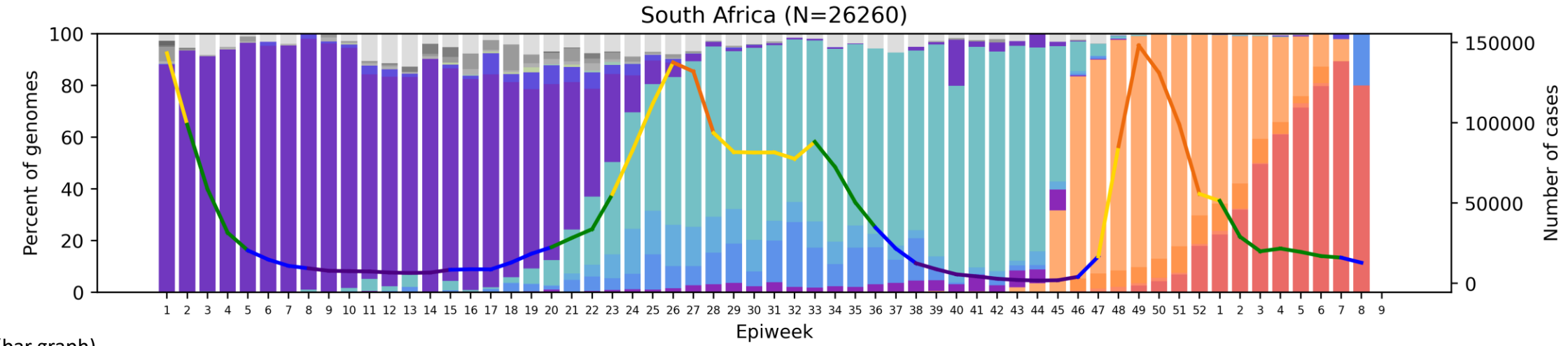
South Africa, 2021-2022, n = 26260*





Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

*Excludes sequences missing collection dates, as well as those collected January 1st and 2nd 2021 as they are part of epiweek 53 of 2020.

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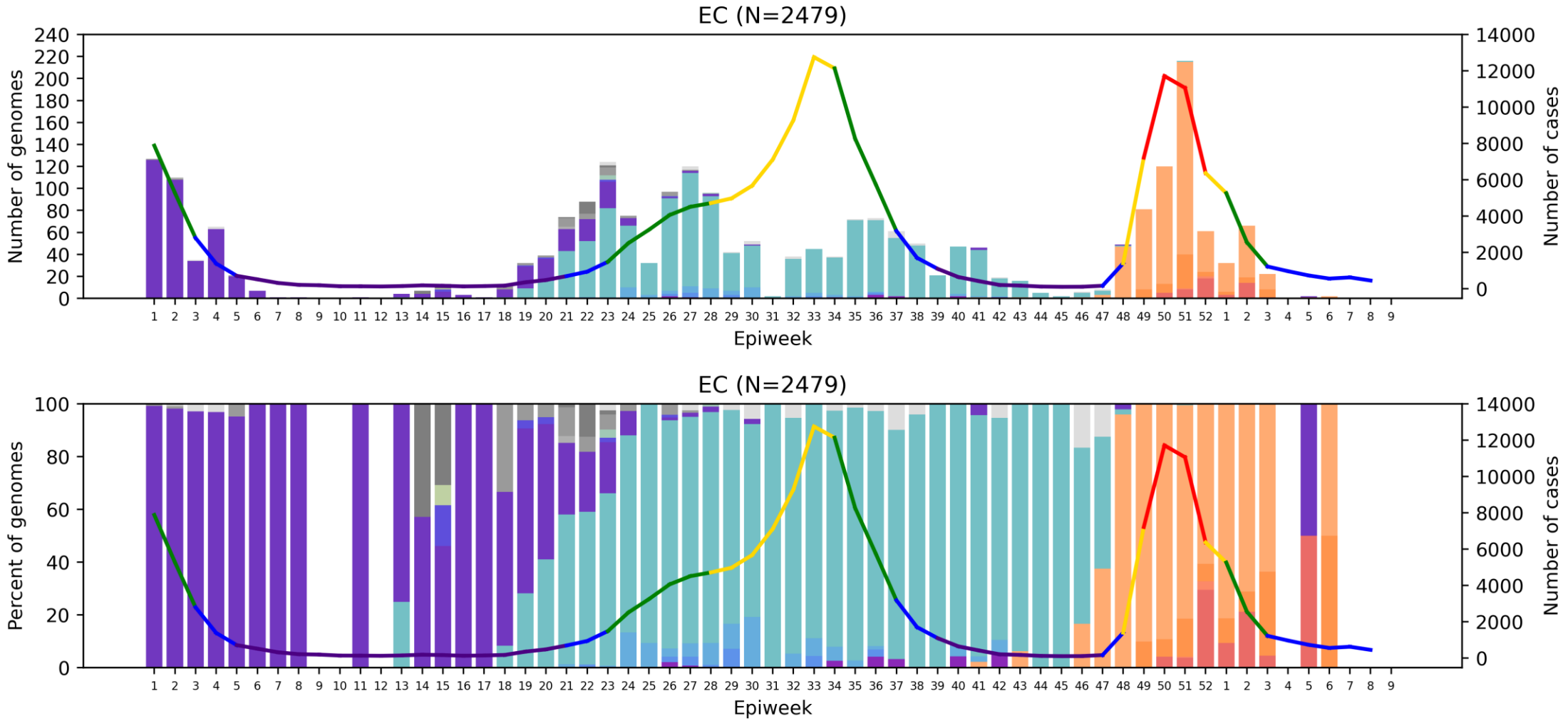
Eastern Cape Province, 2021-2022, n = 2479



Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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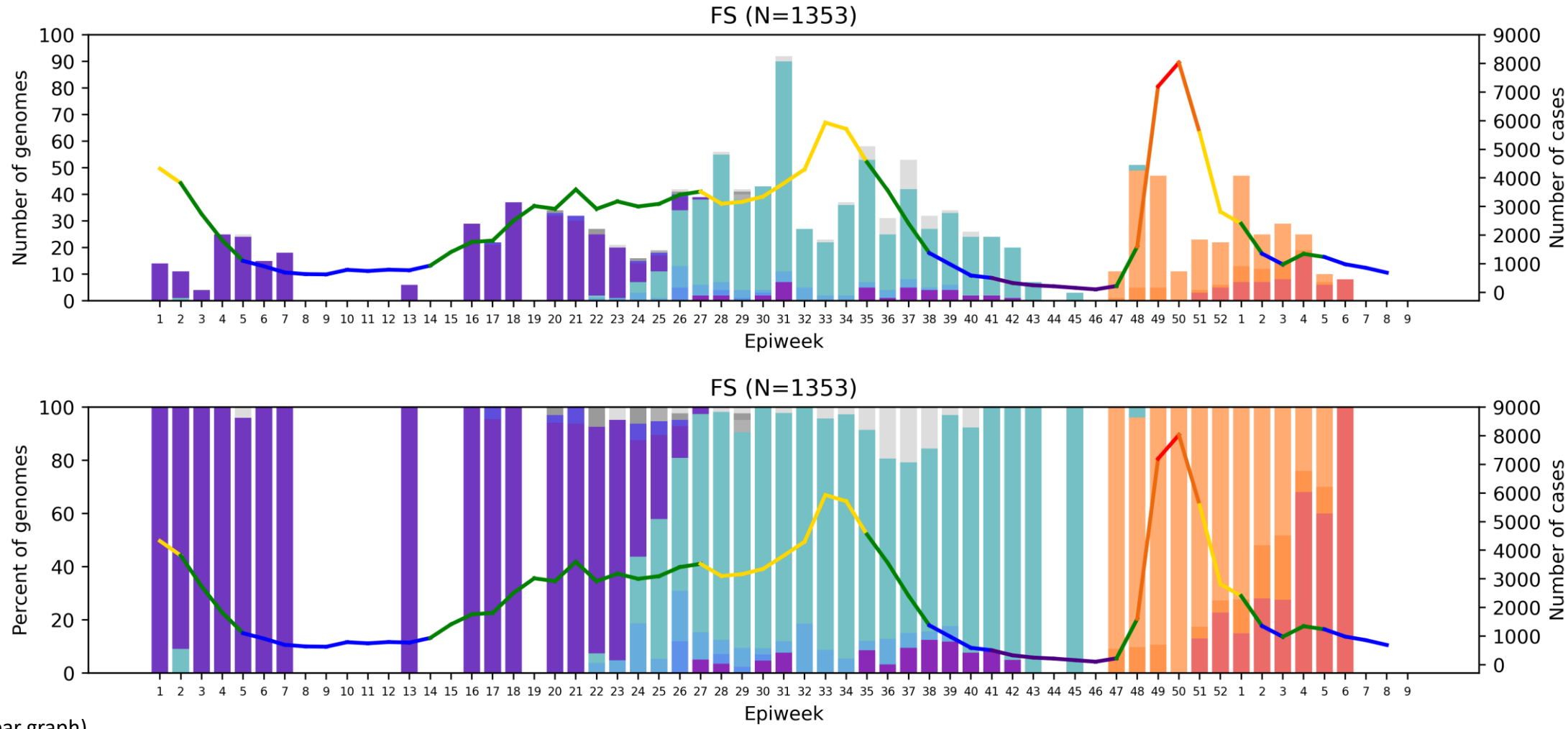
Free State Province, 2021-2022, n = 1353



Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B | Cases

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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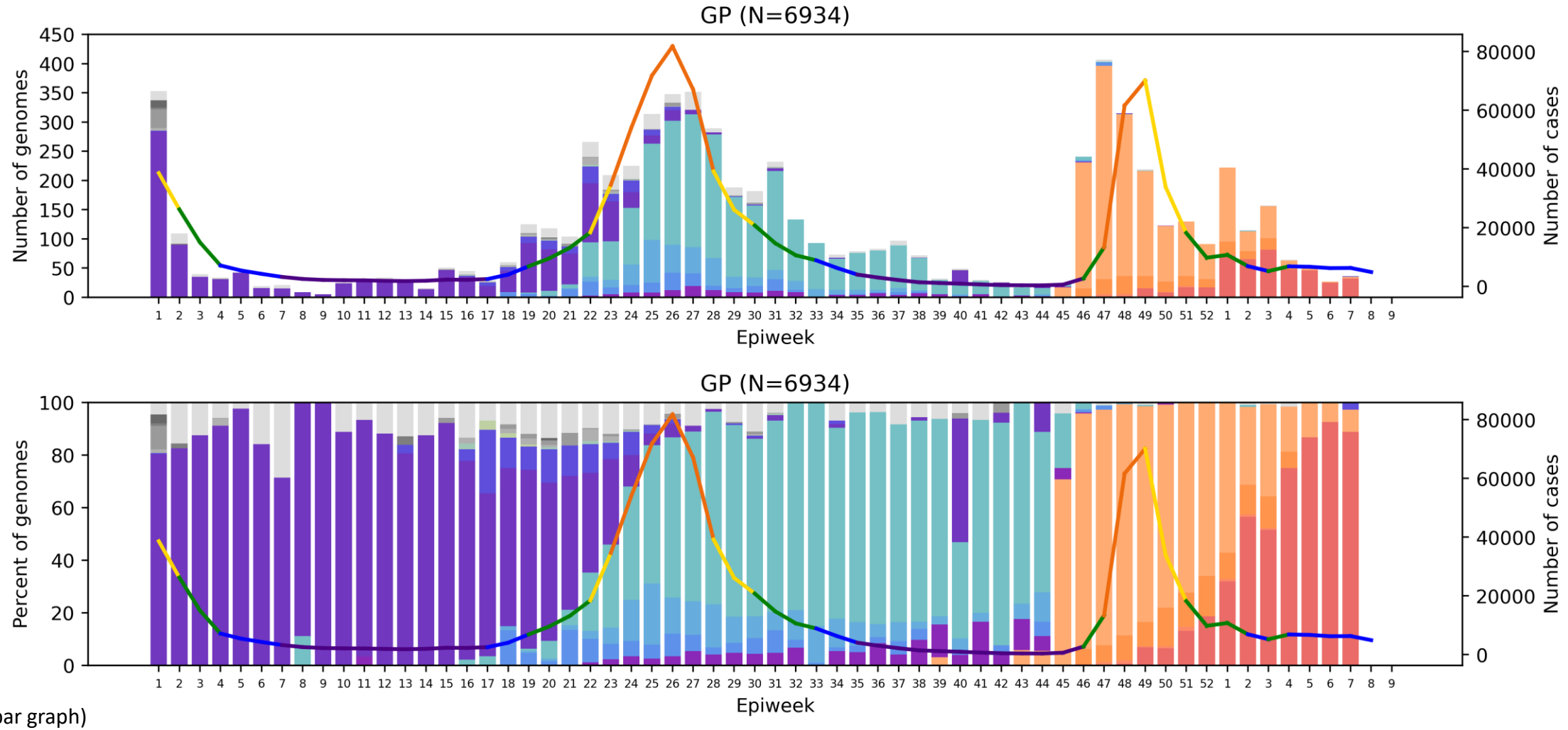
Gauteng Province, 2021-2022, n = 6934



Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B | Cases

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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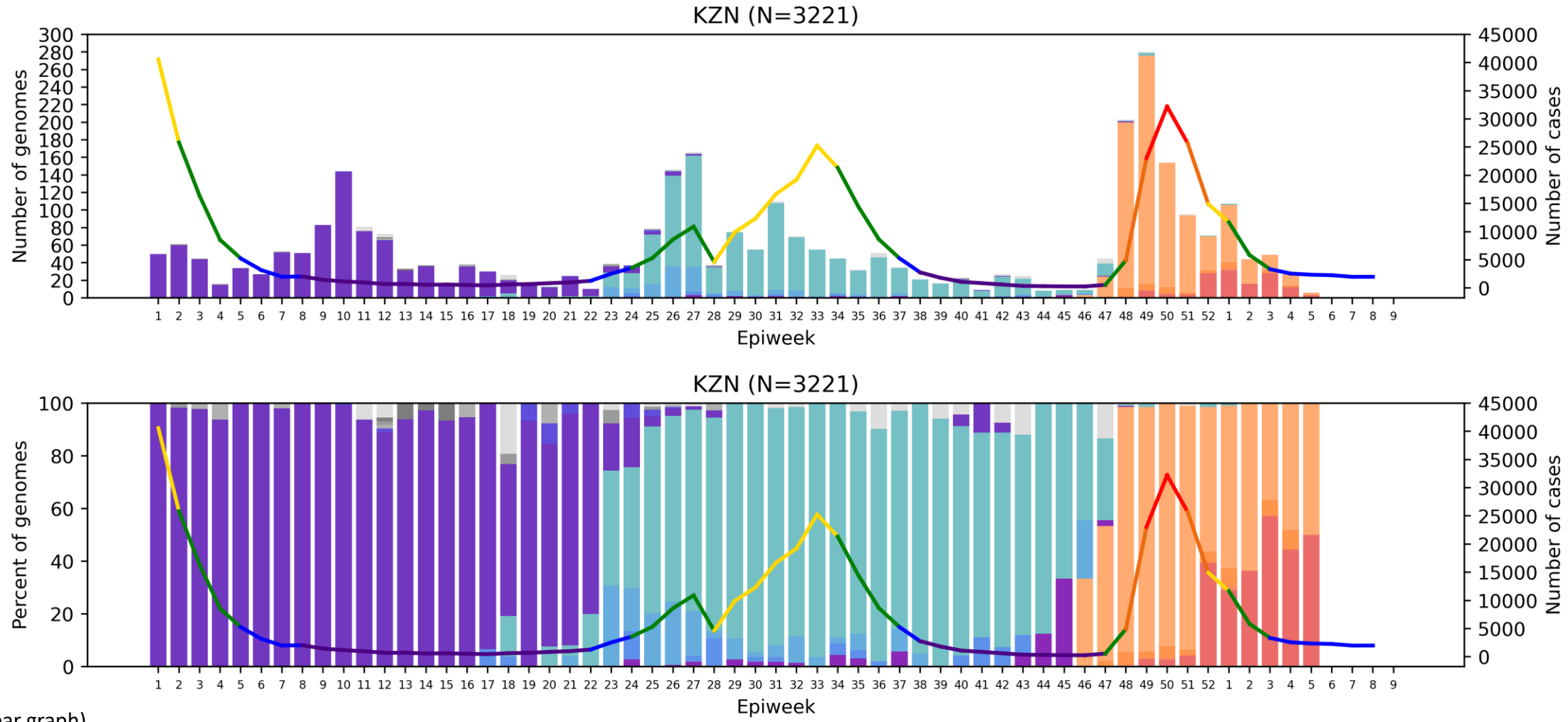
KwaZulu-Natal Province, 2021-2022, n = 3221



Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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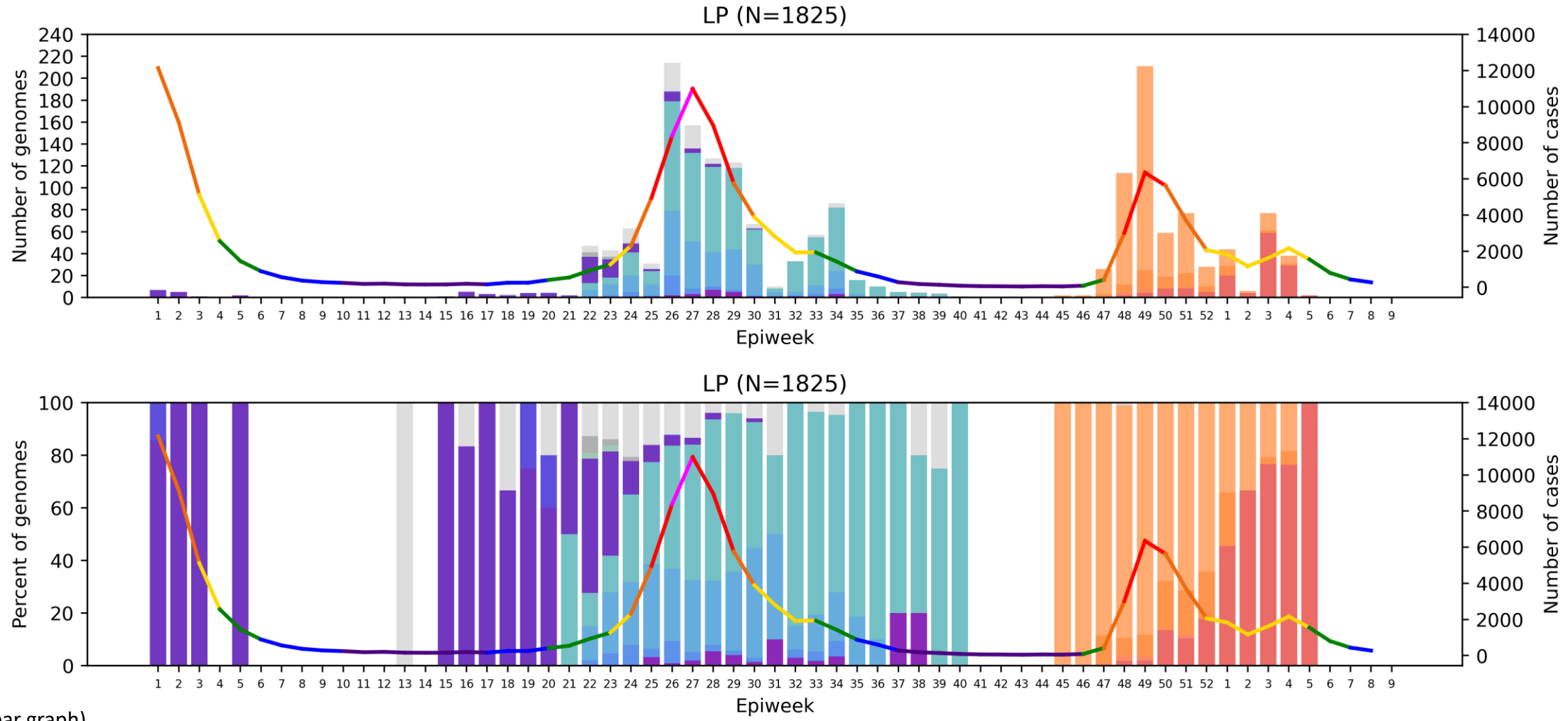
Limpopo Province, 2021-2022, n = 1825



Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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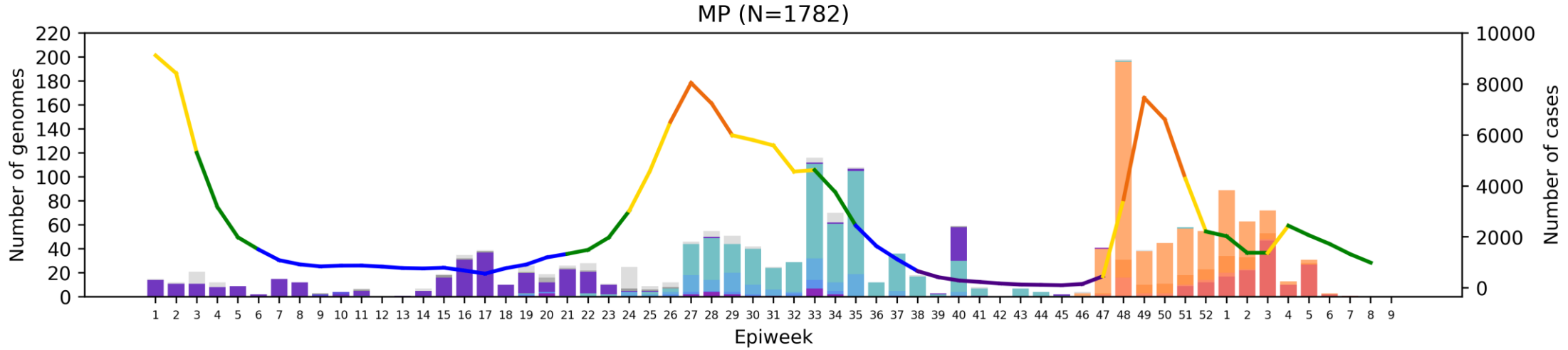
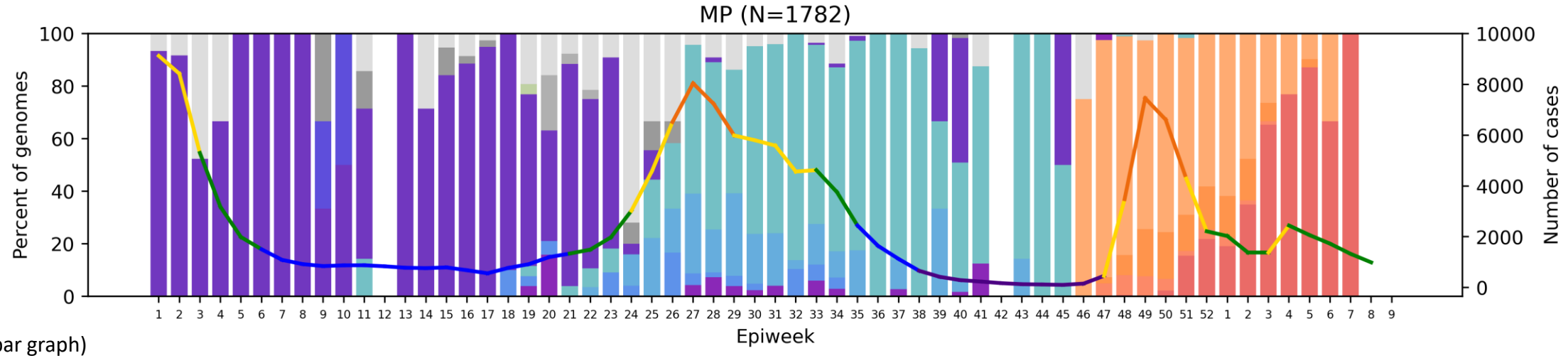
Mpumalanga Province, 2021-2022, n = 1782





Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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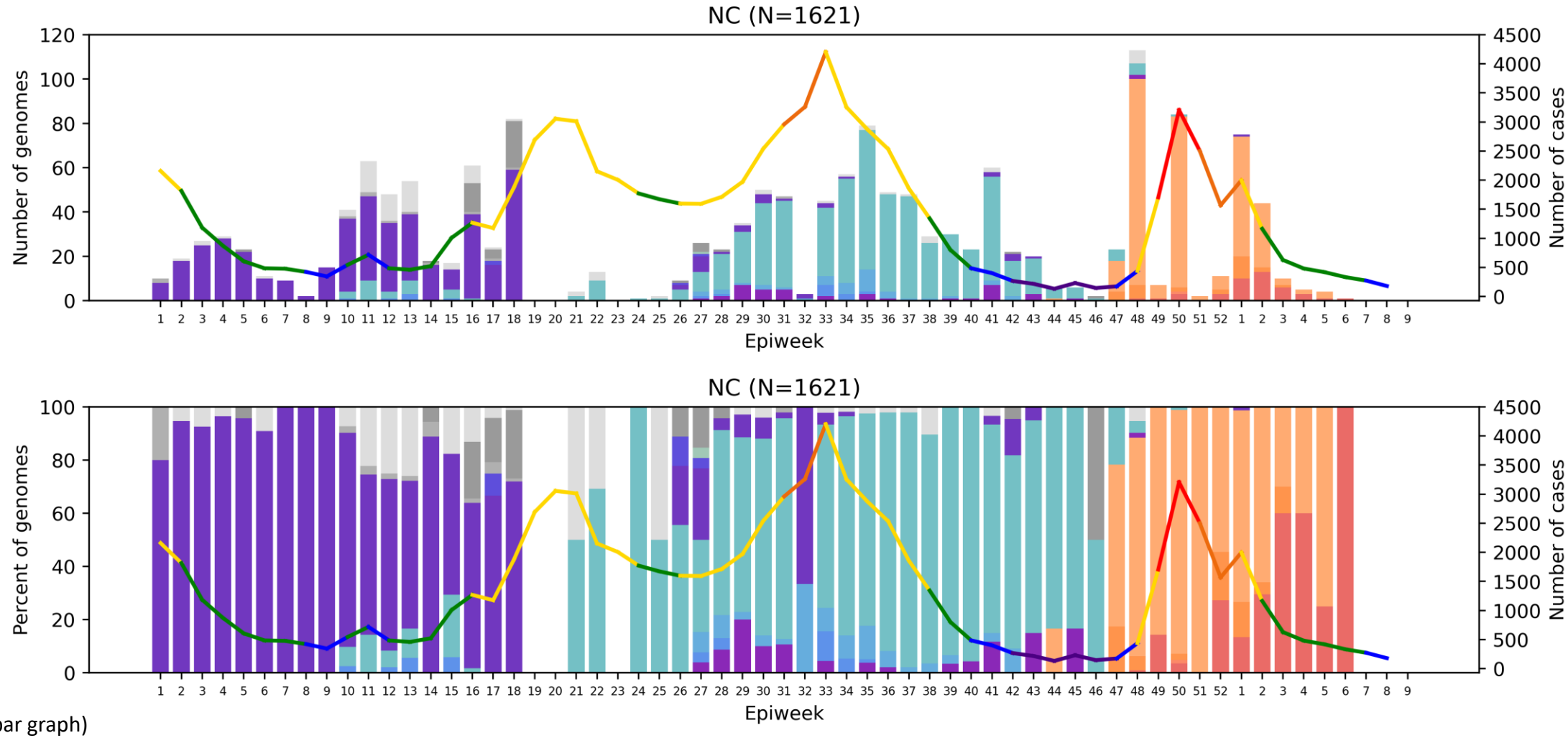
Northern Cape Province, 2021-2022, n = 1621



Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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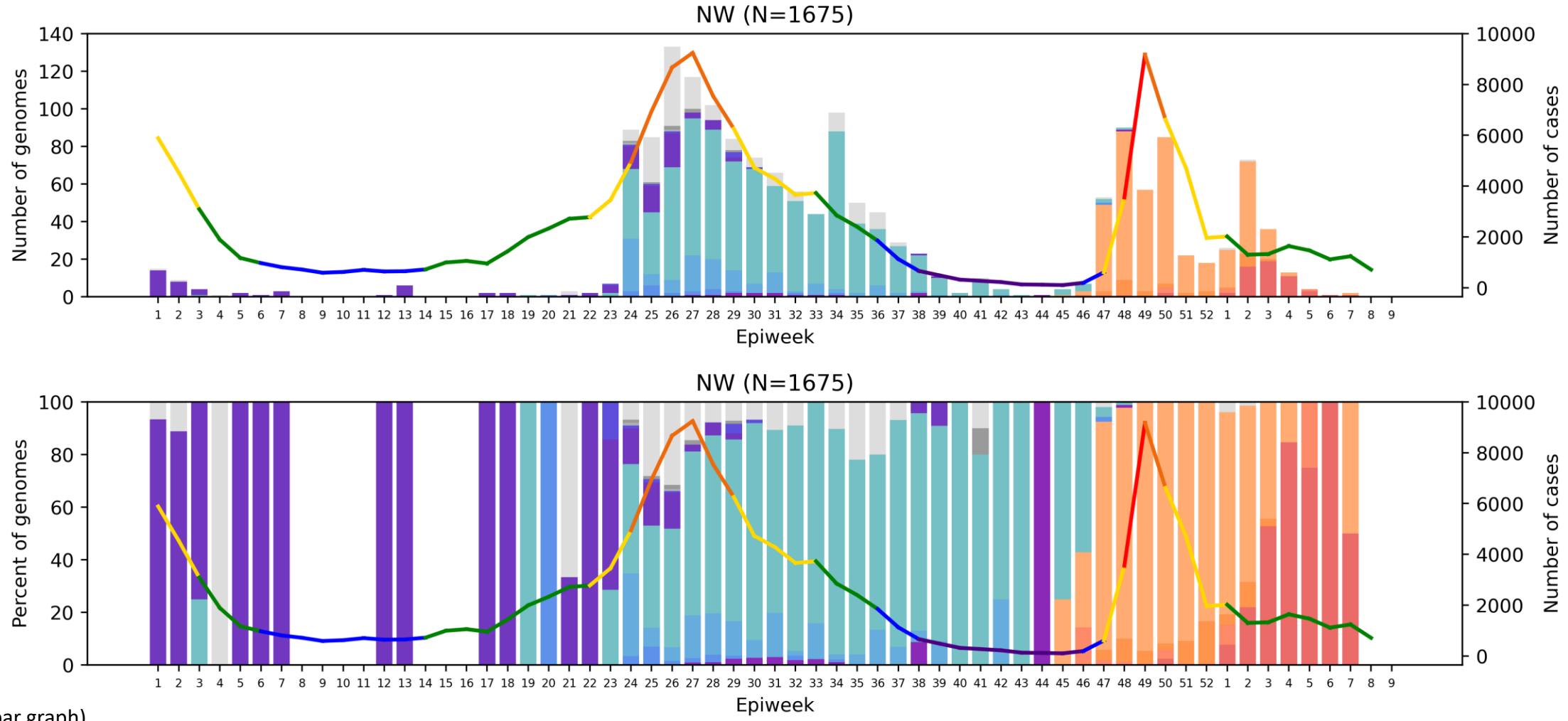
North West Province, 2021, n = 1675



Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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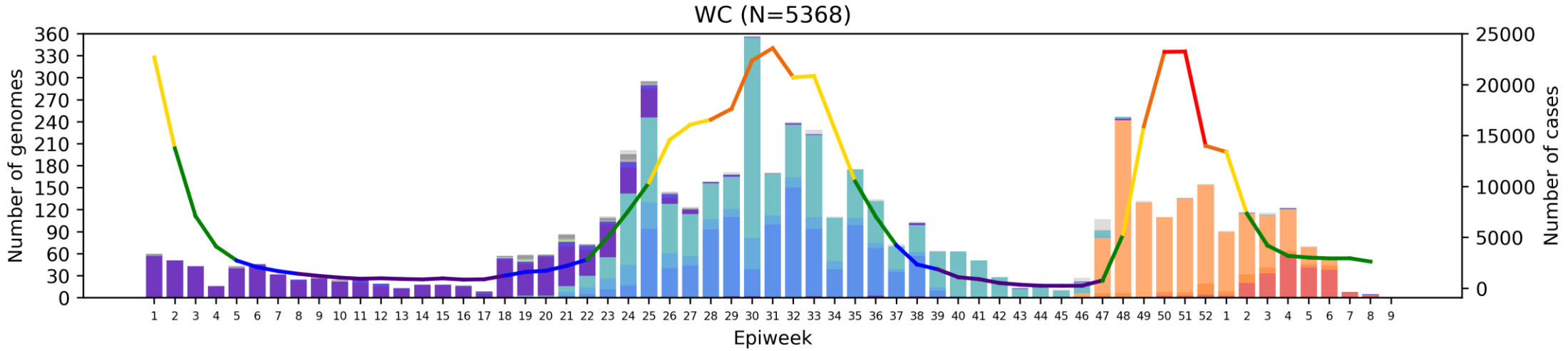
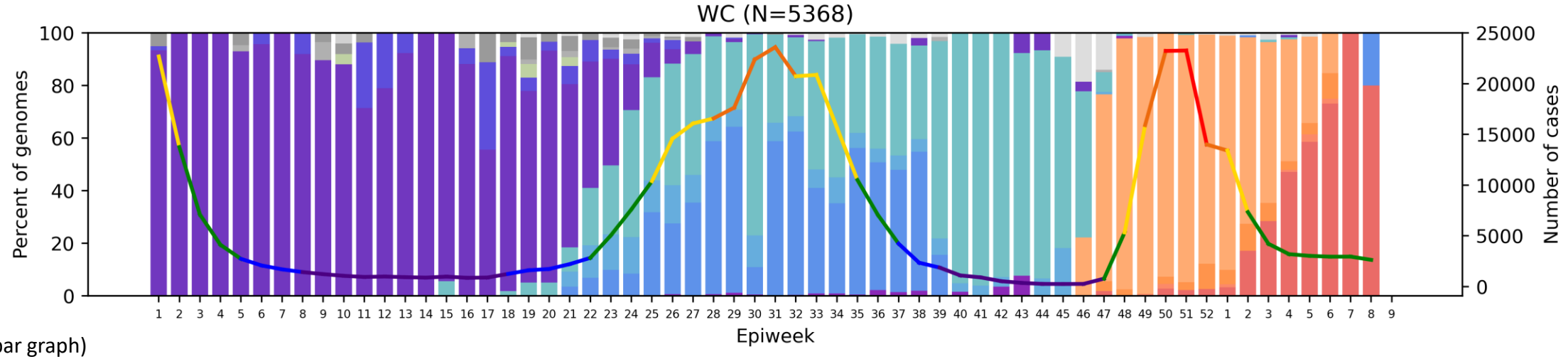
Western Cape Province, 2021-2022, n = 5368





Clade key (bar graph)

Omicron (21L/BA.2) | Omicron (21M/BA.3) | Omicron (21K/BA.1.1) | Omicron (21K/BA.1) | C.1.2 (20D) | Delta (21A) | Delta (21I) | Delta (21J) | Beta (20H, V2) | Cases | Alpha (20I, V1) | Kappa (21B) | Eta (21D) | 20A | 20B | 20C | 20D | unassigned | 19A | 19B

Weekly percentage testing positive key (line graph)

≤ 5 | 6 - 10 | 11 - 20 | 21 - 30 | 31 - 40 | 41 - 50 | 51 - 55

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Summary

- **Variant of Concern Omicron**
  - Detected in at least 153 countries and dominating globally
  - Split into different lineages based on different mutational profiles. Predominant lineages currently BA.1 (21K), BA.1.1 (21K, BA.1+spike R346K), BA.2 (21L), BA.3 (21M). More lineages are being assigned but defining mutations are not yet available.

  - South Africa (detected in all provinces):
    - Dominated December, January and February sequencing data at >99% of genomes
    - While BA.1 was the predominant sub-lineage in December (85%) and January (52%), the proportion of BA.2 increased from 5% in December and 38% in January to 79% in February
    - BA.3 continues to be detected at low levels
- Low frequency of previously circulating variants such as Delta and Beta still detected in recent data

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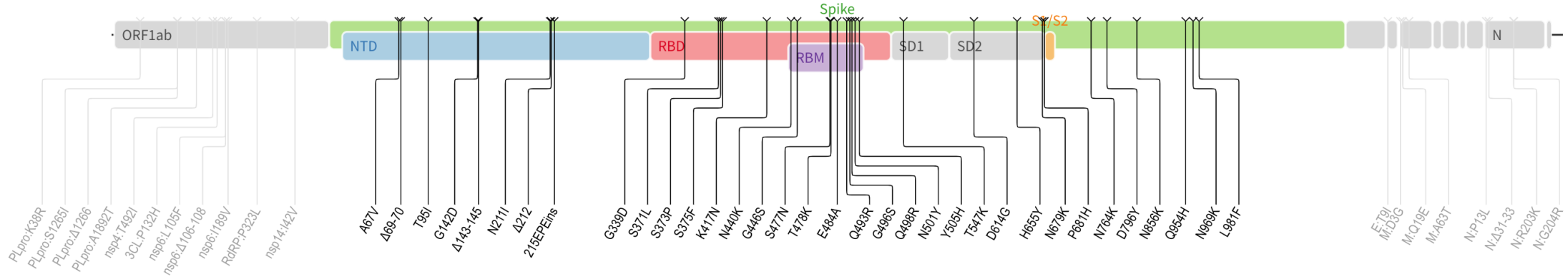
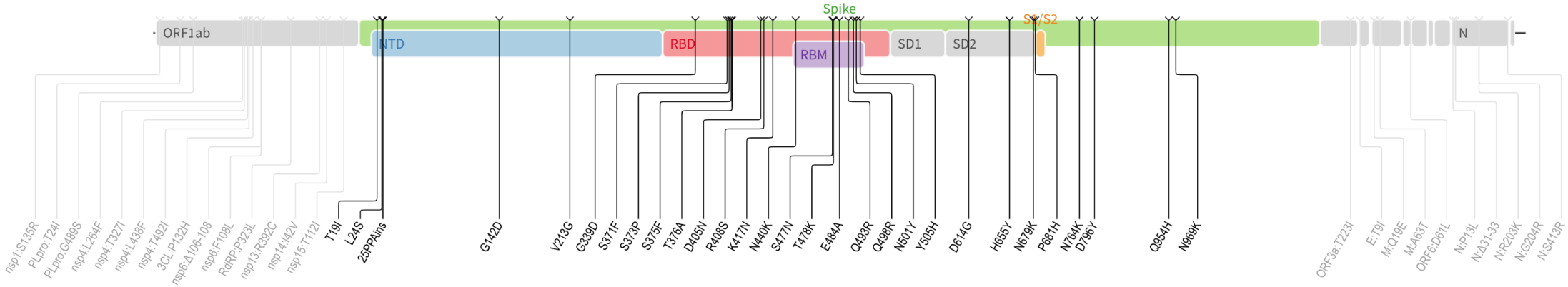
Omicron sub-lineage spike mutation profiles

BA.1
21K

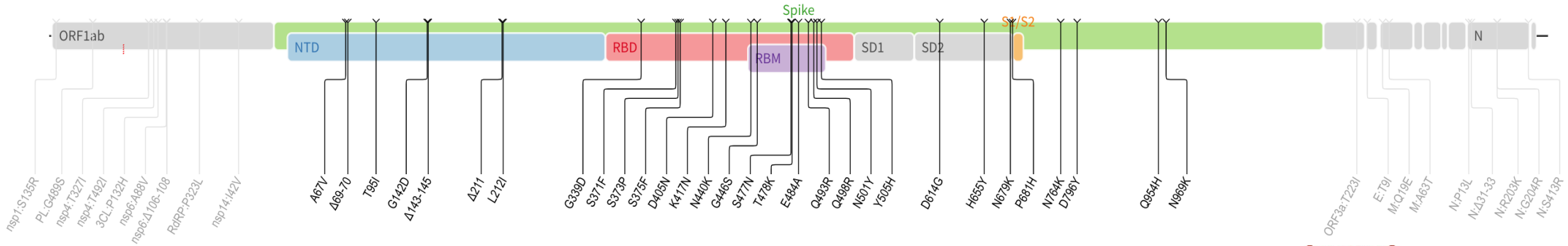


BA.2
21L

Lacks 69-70del
Not detectable by
S-Gene Target
Failure



BA.3
21M



Lineage definitions based on https://github.com/cov-lineages/pango-designation/issues/367
Images from https://covdb.stanford.edu/page/mutation-viewer/

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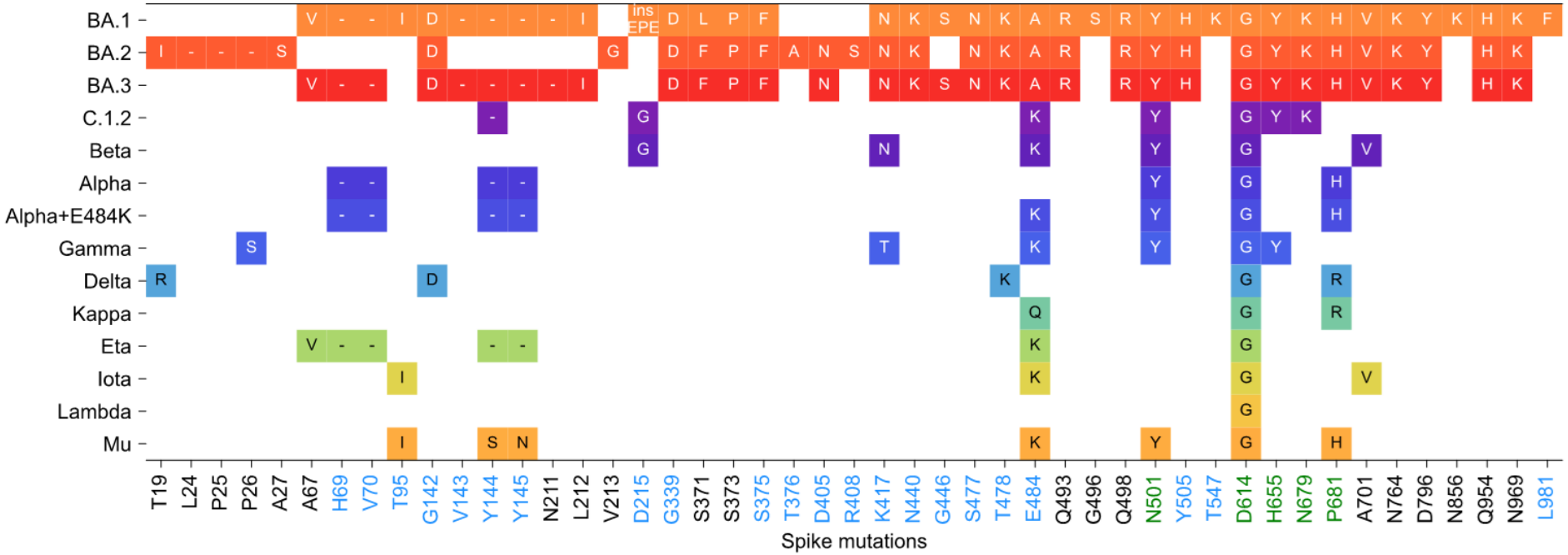
Omicron spike mutations compared to other VOC/VOIs



Only lineage-defining mutations are pictured here. Low prevalence mutations can be seen on the following slide.

Mutation impact key

- Unknown or unconfirmed impact
- Known/predicted immune escape
- Enhanced infectivity

- Multiple changes within the two immunogenic regions in S1 (NTD and RBD)
  - including a three amino acid insertion
- Accumulation of mutations surrounding the furin cleavage site
  - Including combination of N679K and P681H
- Effect of most spike S2 subunit changes have not been defined, but may be linked to immune escape

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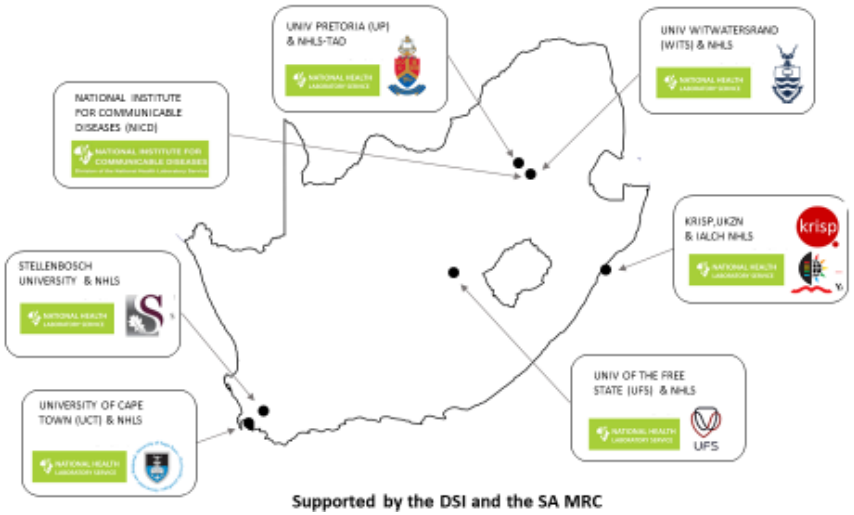

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Division of the National Health Laboratory Service

EDCTP

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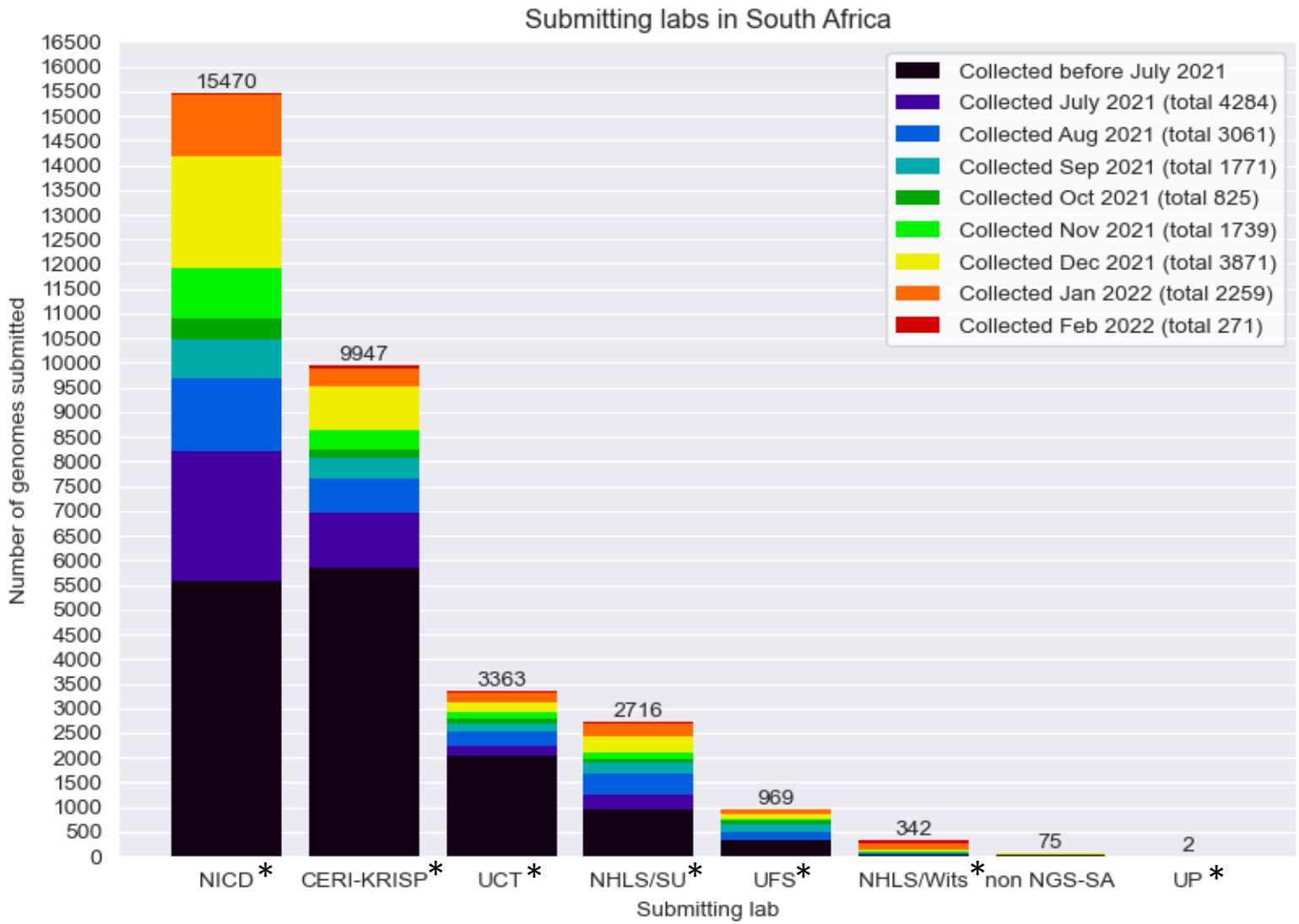
South African genomes submitted per submitting lab, 2020 - 2022 (N=32 884)



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CERI: Centre for Epidemic Response and Innovation

KRISP: KZN Research Innovation and Sequencing Platform

NICD: National Institute for Communicable Diseases

NHLS: National Health Laboratory Service

SU: Stellenbosch University

UCT: University of Cape Town

UFS: University of the Free State

UP: University of Pretoria

Multiple labs from NGS-SA and collaborating public and private laboratories are contributing to sequencing, both as originating and as submitting (pictured here) laboratories.

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Variants of Concern (VOC)

WHO label	Pango lineage•	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 +S:E484K	India, Oct-2020	VOI: 4-Apr-2021 VOC: 11-May-2021
Omicron*	B.1.1.529	GRA	21K, 21L, 21M	+S:R346K	Multiple countries, Nov-2021	VUM: 24-Nov-2021 VOC: 26-Nov-2021

https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/ accessed 14 January 2022

•Includes all descendant lineages. See the cov-lineages.org and the Pango network websites for further details.

* See TAG-VE statement issued on 26 November 2021

° Only found in a subset of sequences

Currently designated Variants of Interest (VOI)

WHO label	Pango lineage*	GISAID clade	Nextstrain clade	Earliest documented samples	Date of designation
Lambda	C.37	GR/452Q.V1	21G	Peru, Dec-2020	14-Jun-2021
Mu	B.1.631	GH	21H	Colombia, Jan-2021	30-Aug-2021

https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/ accessed 17 December 2021

*Includes all descendant lineages. See the cov-lineages.org and the Pango network websites for further details.

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.)