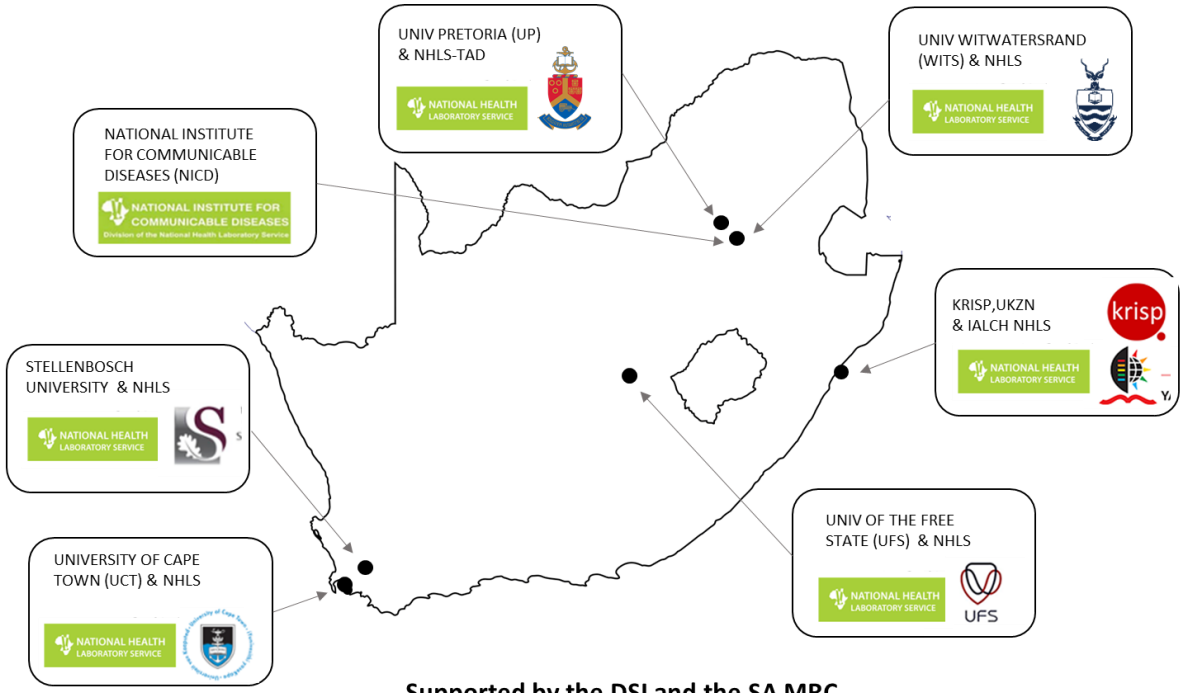
Network for Genomic Surveillance in South Africa (NGS-SA)

SARS-CoV-2 Sequencing Update
02 June 2023



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)

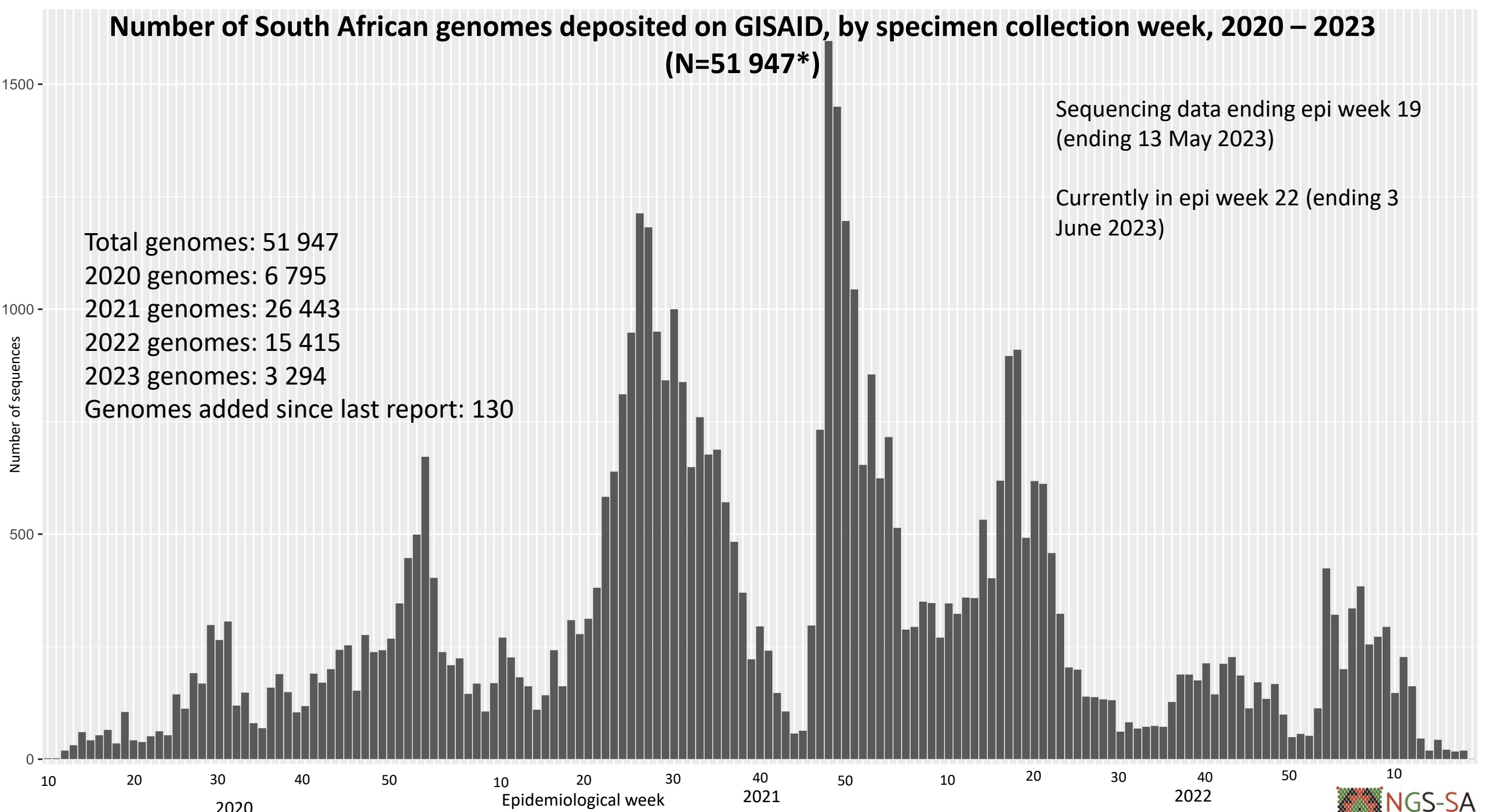
The genomic data presented here are based on South African SARS-CoV-2 sequence data downloaded from GISAID (www.gisaid.org) on 02 June 2023 at 08h26

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

Number of South African genomes deposited on GISAID, by specimen collection week, 2020 – 2023 (N=51 947*)



*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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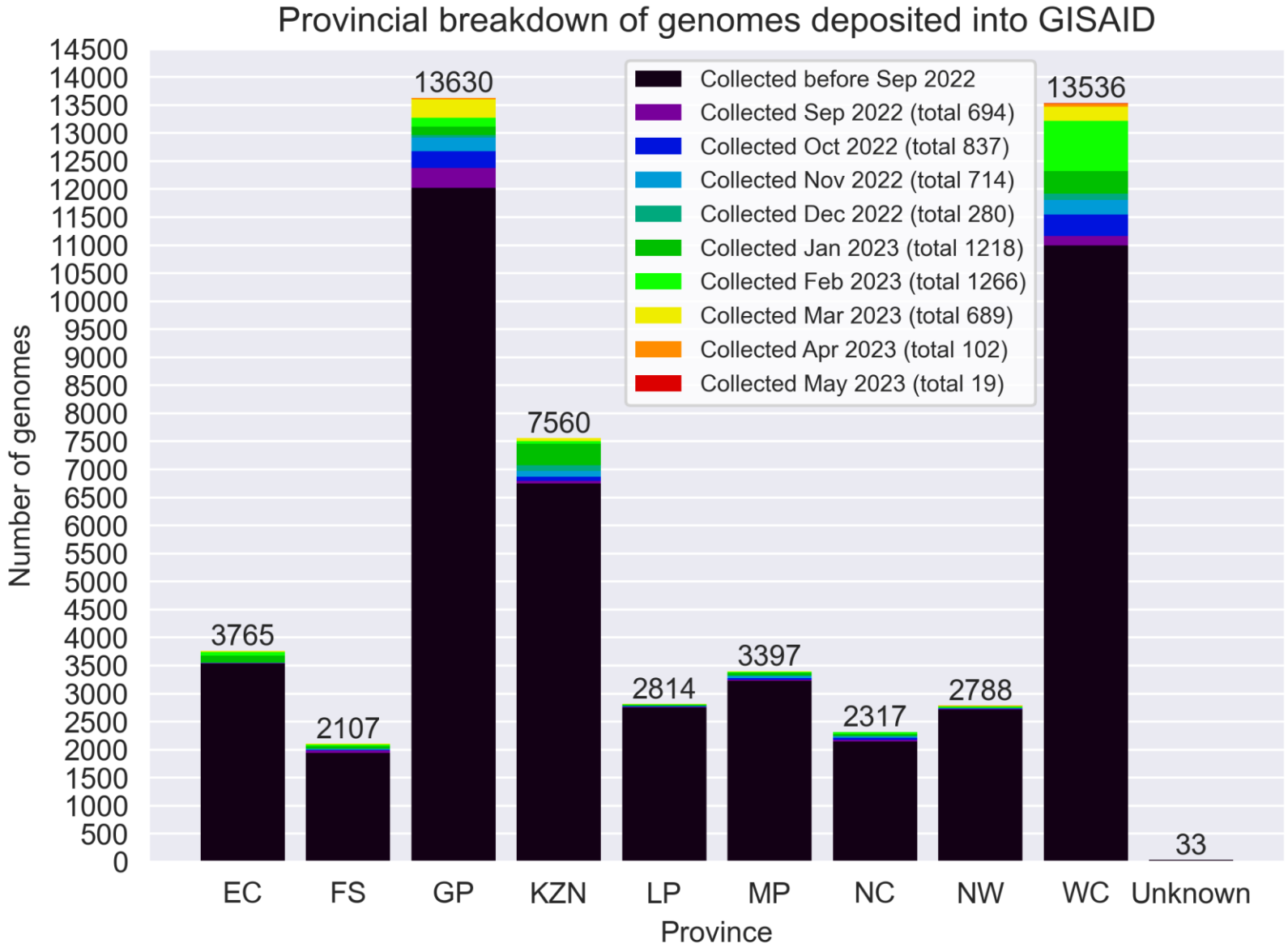
GISAID genomes vs total cases, 2020 – 2023 (N= 51 947)



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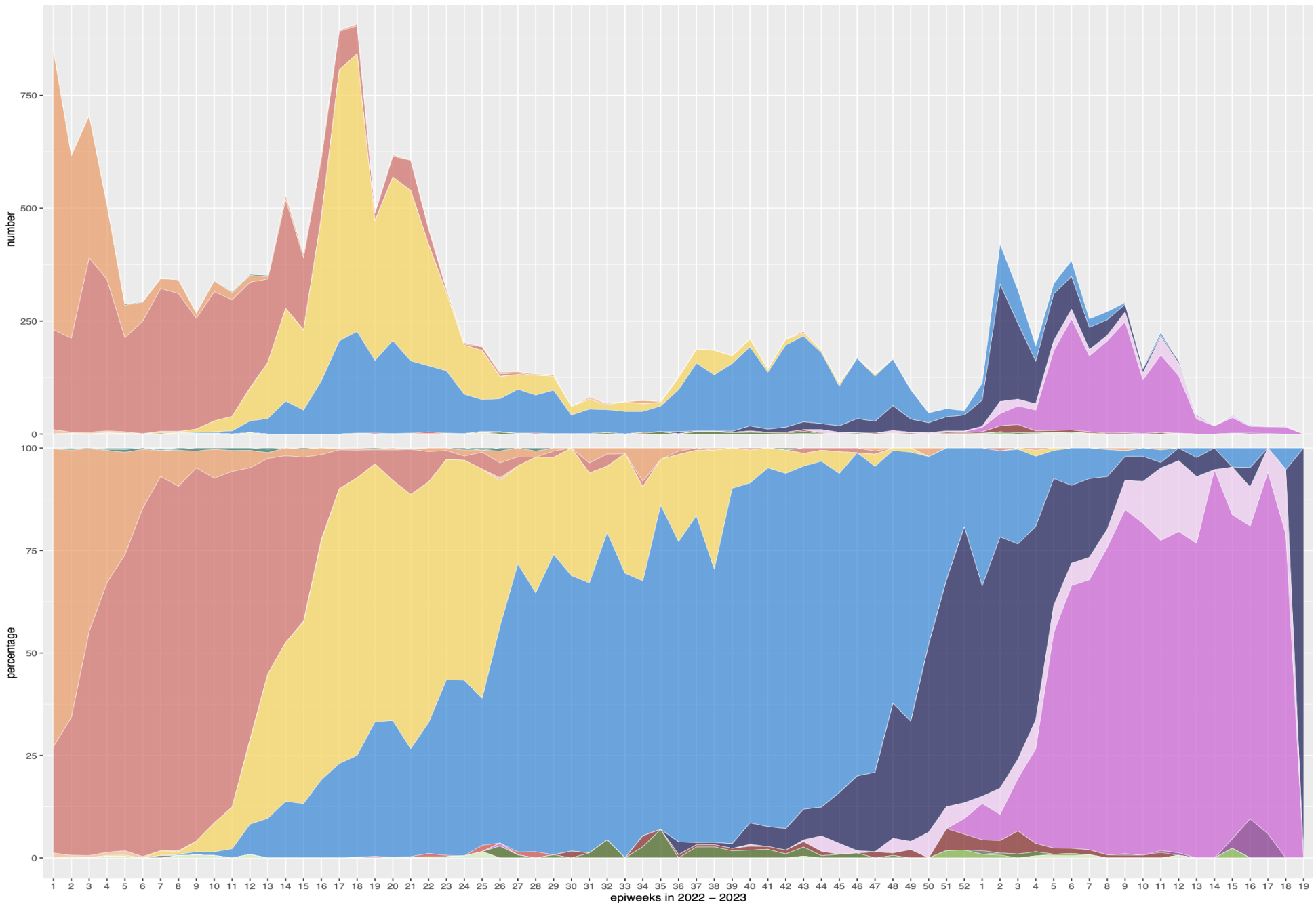
Number and percentage of clades by epiweek in South Africa, 2022-2023 (18 666*)



Sequencing data ending epi week 19 (ending 13 May 2023)

Currently in epi week 22 (ending 3 June 2023)

*Excludes sequences missing collection dates, as well as those collected January 1st 2022 as they are part of epiweek 52 of 2021.

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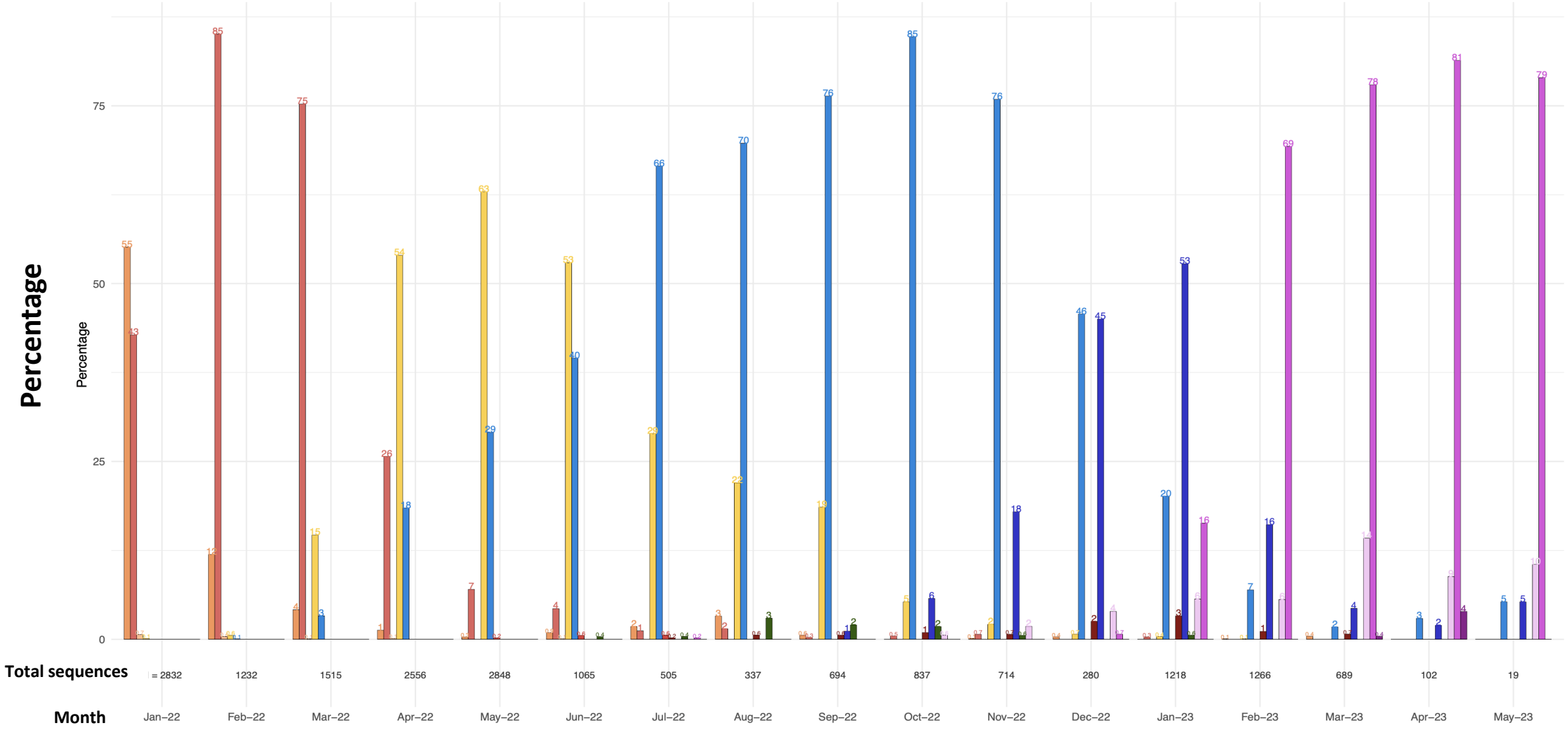
Detection Rates: Omicron and recombinants



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

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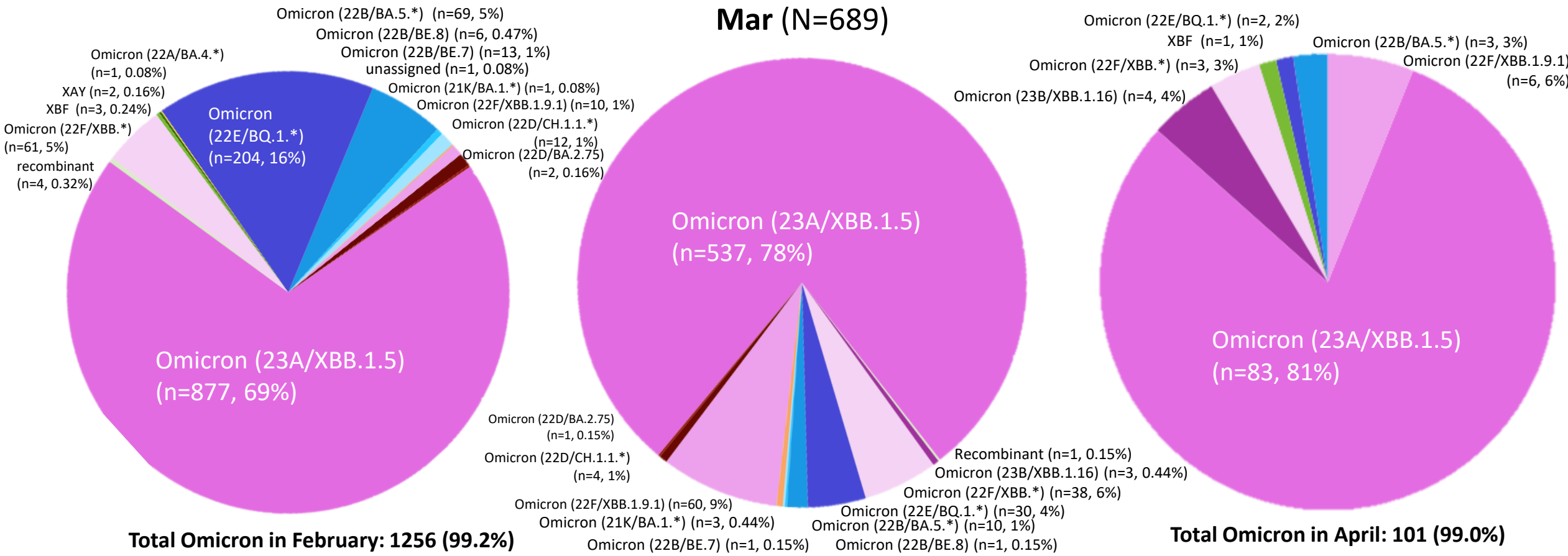
Prevalence of Variants of Concern (VOC) and Variants of Interest (VOI) in Feb – Apr 2023

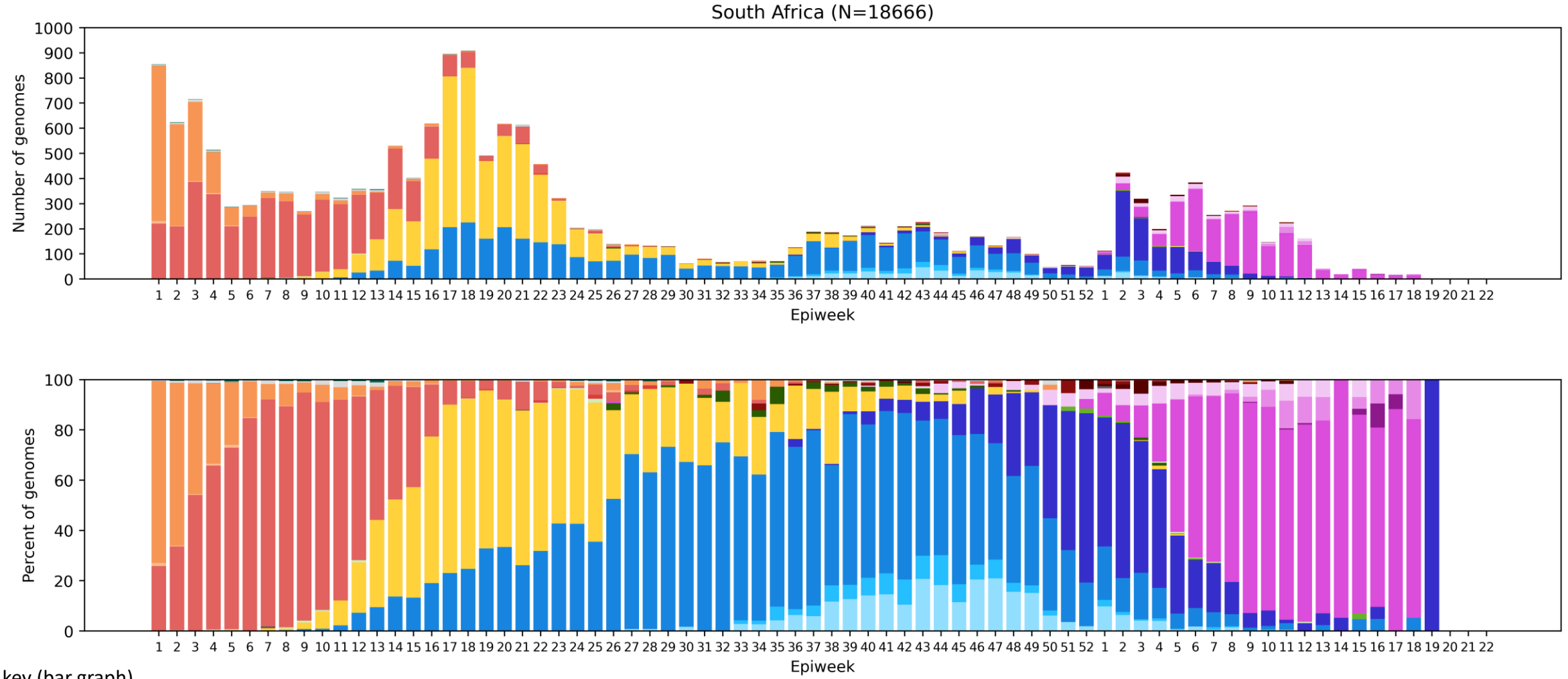


Clade key (bar graph)

XAY	Omicron (23B/XBB.1.16)	Omicron (22F/XBB.*)	Omicron (22C/BA.2.12.1)	Omicron (21M/BA.3)	Omicron (22B/BE.8)	Alpha (20I, V1)	C.1.2 (20D)
XBF	Omicron (23A/XBB.1.5)	Omicron (21K/BA.1.*)	Omicron (22D/BA.2.75)	Omicron (22A/BA.4.*)	Omicron (22B/BA.5.*)	Beta (20H, V2)	20B
recombinant	Omicron (22F/XBB.1.9.1)	Omicron (21L/BA.2.*)	Omicron (22D/CH.1.1.*)	Omicron (22B/BE.7)	Omicron (22E/BQ.1.*)	Delta (21A, 21I, 21J)	unassigned

Note: XBF is an Omicron-Omicron recombinant and so is counted in the total number of Omicrons.

South Africa, 2022-2023, n = 18 666*



Clade key (bar graph)

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*Excludes sequences missing collection dates. Lineages of particular interest (mainly WHO Omicron subvariants under monitoring) are separate from the main clade groupings.

#Recombinants include all recombinant lineages (viruses consisting of segments of two different lineages) detected in South Africa at low levels. Currently it consists of XT, XAS, XAZ, XBA, XBF.

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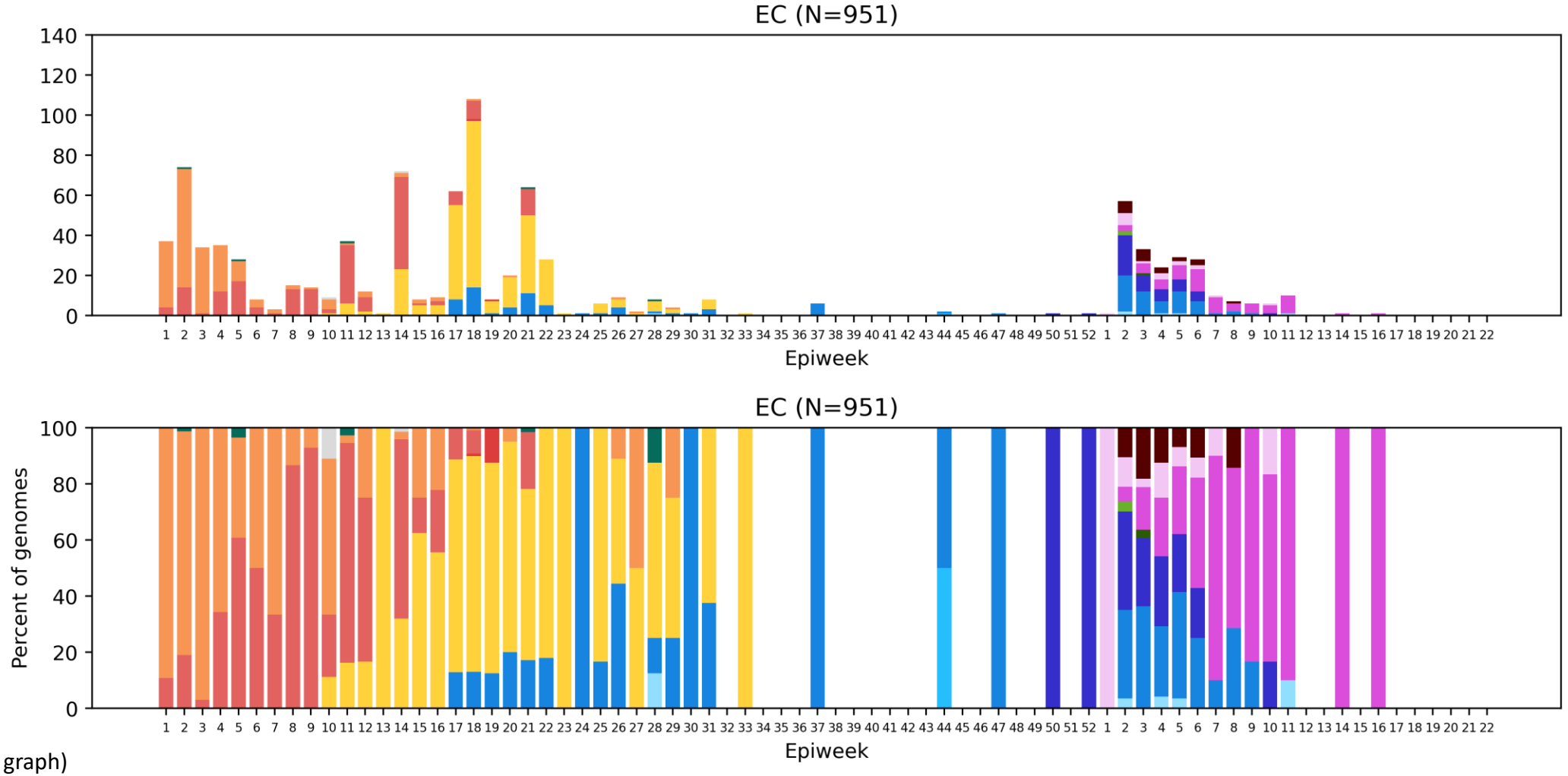
Eastern Cape Province, 2022-2023, n = 951

Genomes added since last report: 3*



*May include genomes from 2020 and 2021 which are not pictured here and are not included in the slide total.

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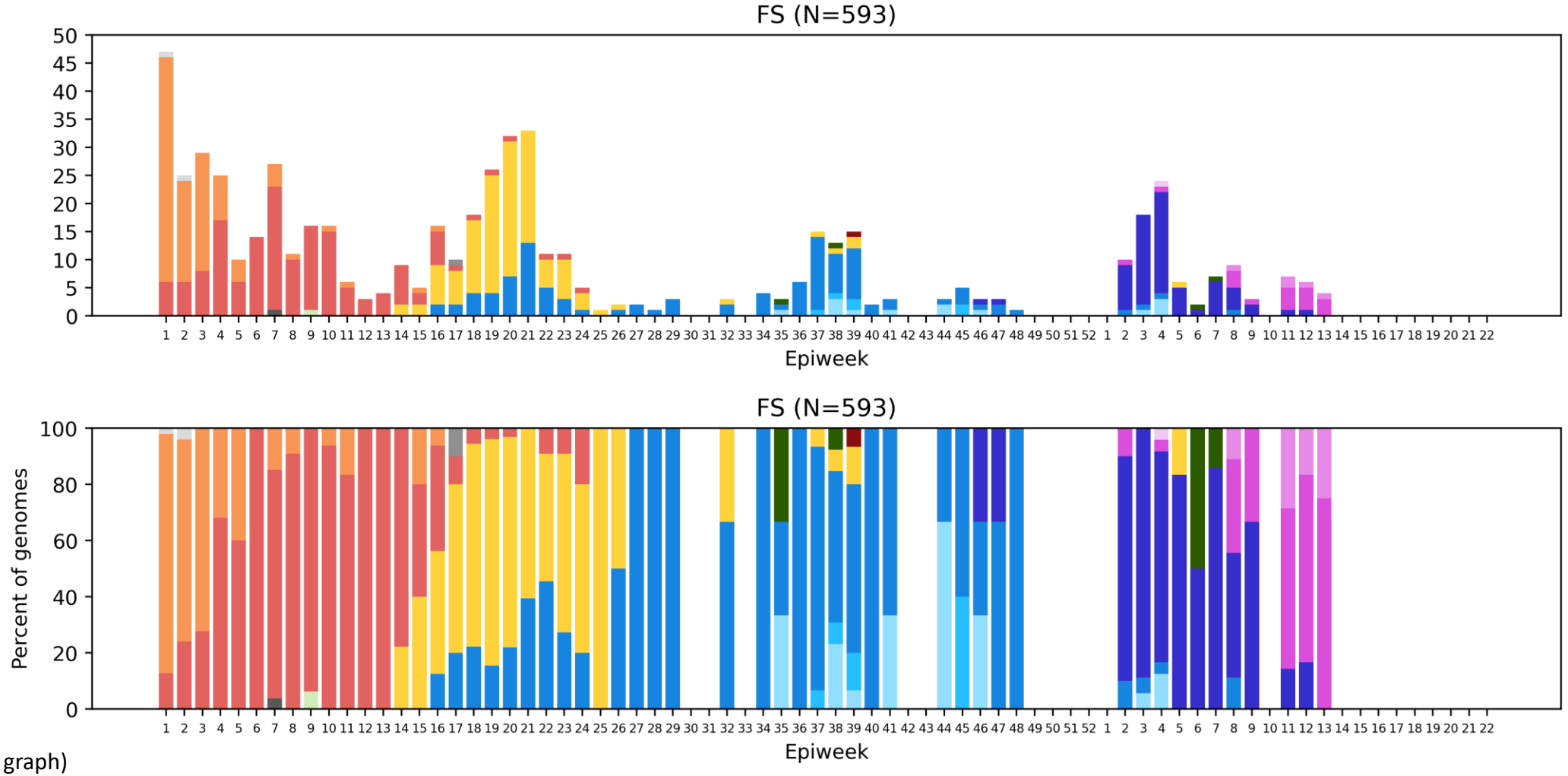
Free State Province, 2022-2023, n = 593

Genomes added since last report: 6*



Clade key (bar graph)

XAY	Omicron (23B/XBB.1.16)	Omicron (22F/XBB.*)	Omicron (22C/BA.2.12.1)	Omicron (21M/BA.3)	Omicron (22B/BE.8)	Alpha (20I, V1)	C.1.2 (20D)
XBF	Omicron (23A/XBB.1.5)	Omicron (21K/BA.1.*)	Omicron (22D/BA.2.75)	Omicron (22A/BA.4.*)	Omicron (22B/BA.5.*)	Beta (20H, V2)	20B
recombinant	Omicron (22F/XBB.1.9.1)	Omicron (21L/BA.2.*)	Omicron (22D/CH.1.1.*)	Omicron (22B/BE.7)	Omicron (22E/BQ.1.*)	Delta (21A, 21I, 21J)	unassigned

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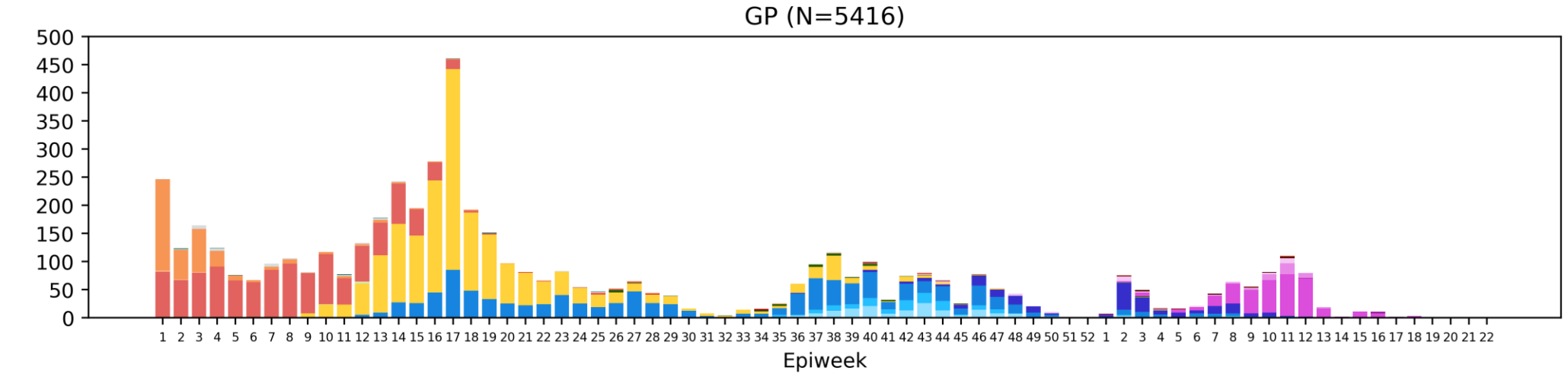
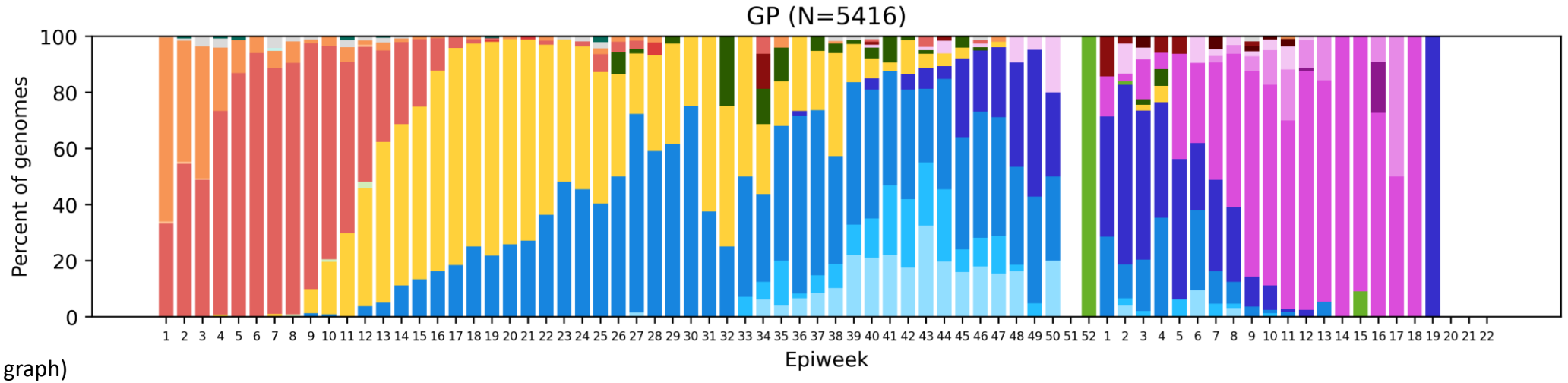
Gauteng Province, 2022-2023, n = 5416

Genomes added since last report: 45*





Clade key (bar graph)

XAY	Omicron (23B/XBB.1.16)	Omicron (22F/XBB.*)	Omicron (22C/BA.2.12.1)	Omicron (21M/BA.3)	Omicron (22B/BE.8)	Alpha (20I, V1)	C.1.2 (20D)
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recombinant	Omicron (22F/XBB.1.9.1)	Omicron (21L/BA.2.*)	Omicron (22D/CH.1.1.*)	Omicron (22B/BE.7)	Omicron (22E/BQ.1.*)	Delta (21A, 21I, 21J)	unassigned

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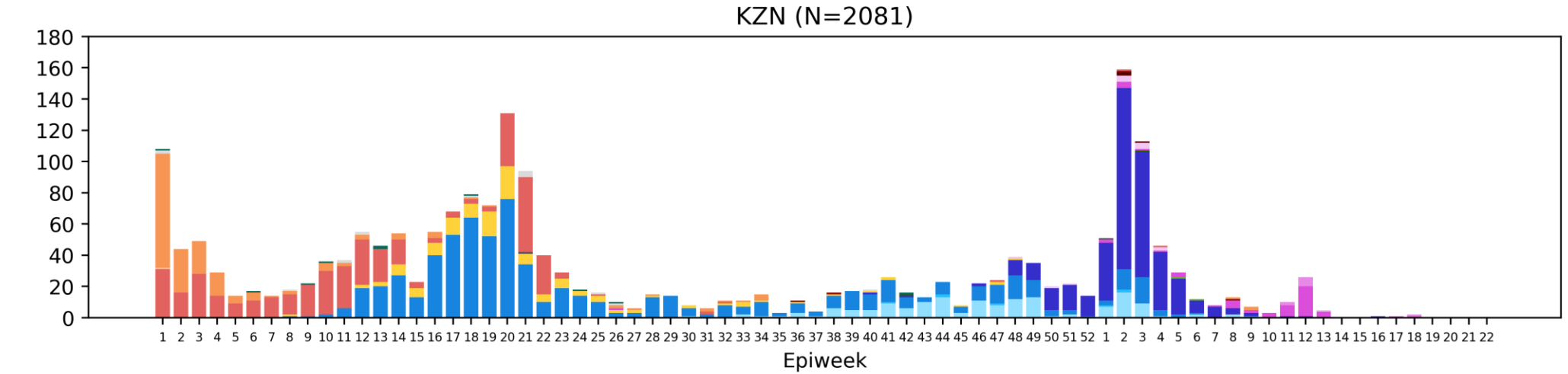
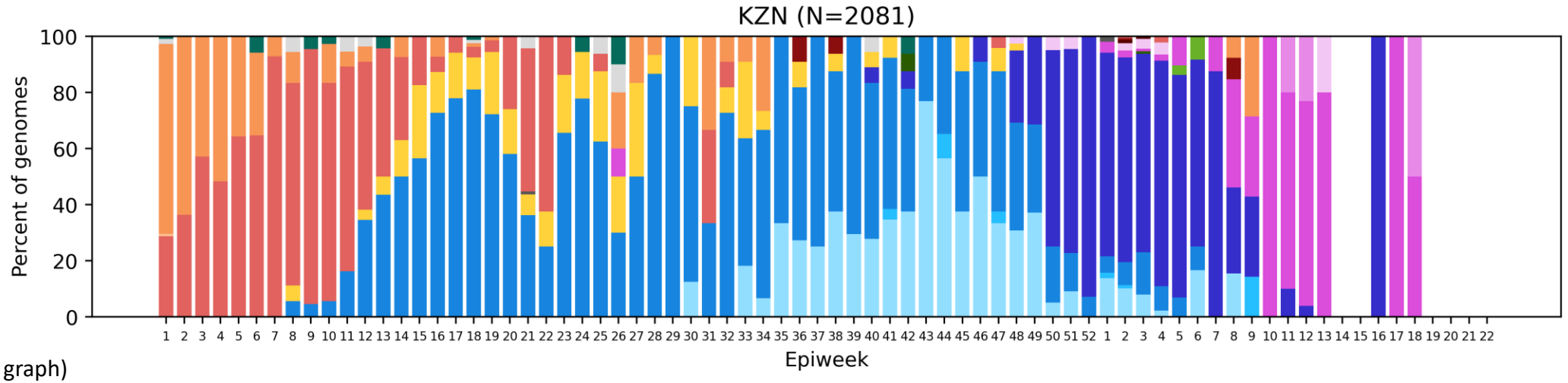
KwaZulu-Natal Province, 2022-2023, n = 2081

Genomes added since last report: 18*





Clade key (bar graph)

XAY	Omicron (23B/XBB.1.16)	Omicron (22F/XBB.*)	Omicron (22C/BA.2.12.1)	Omicron (21M/BA.3)	Omicron (22B/BE.8)	Alpha (20I, V1)	C.1.2 (20D)
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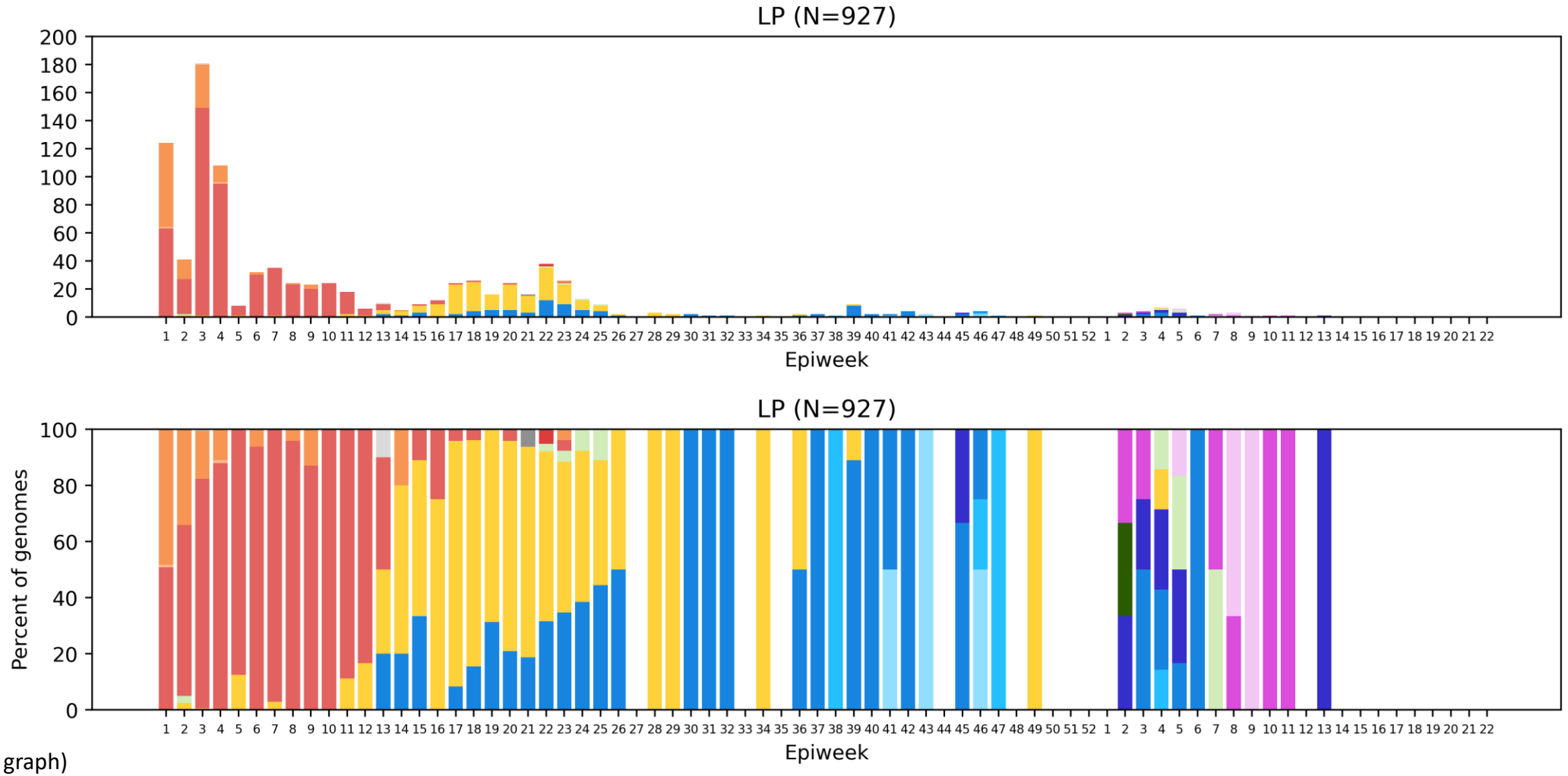
Limpopo Province, 2022-2023, n = 927

Genomes added since last report: 8*



Clade key (bar graph)

XAY	Omicron (23B/XBB.1.16)	Omicron (22F/XBB.*)	Omicron (22C/BA.2.12.1)	Omicron (21M/BA.3)	Omicron (22B/BE.8)	Alpha (20I, V1)	C.1.2 (20D)
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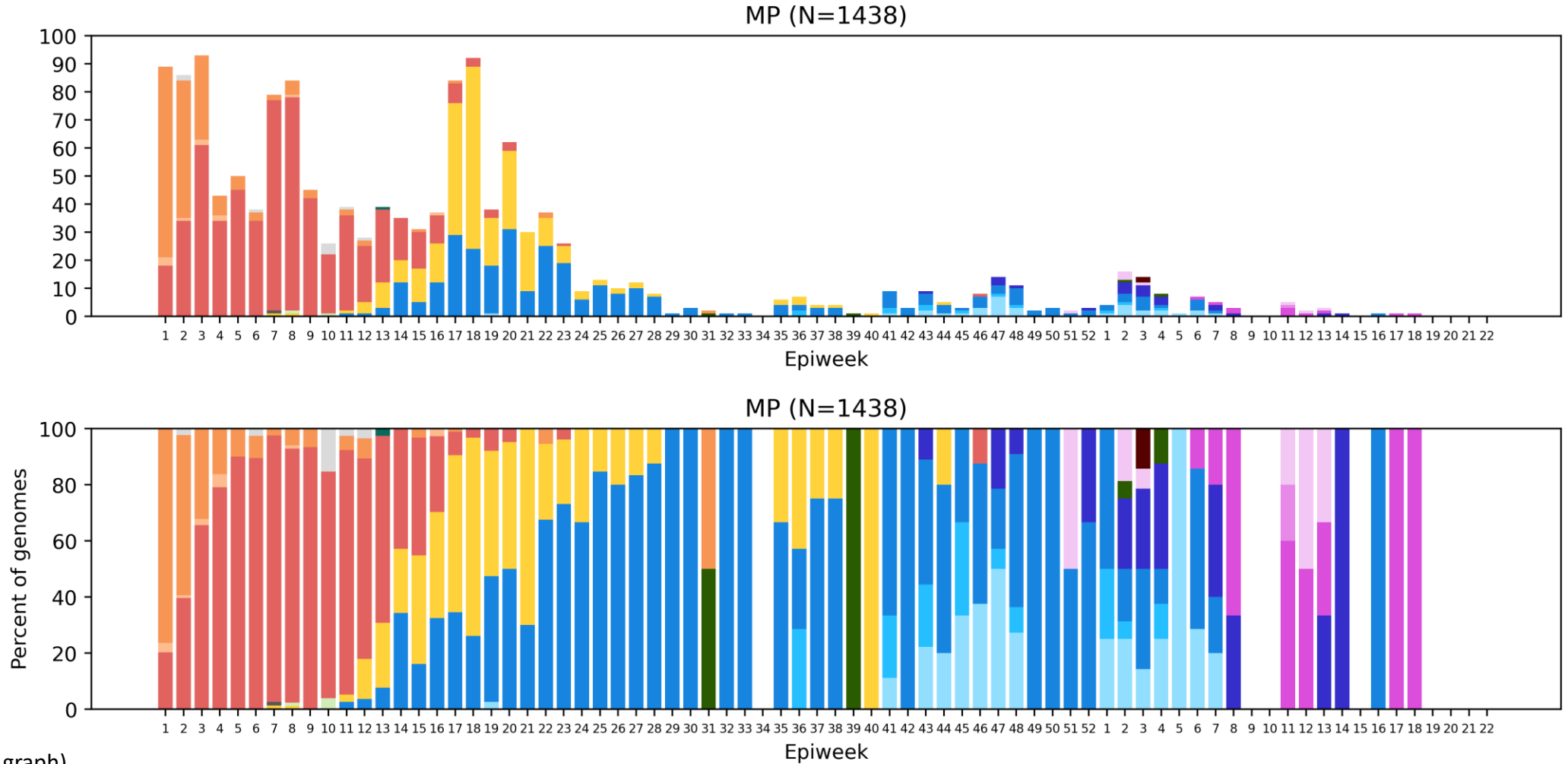
Mpumalanga Province, 2022-2023, n = 1438

Genomes added since last report: 6*



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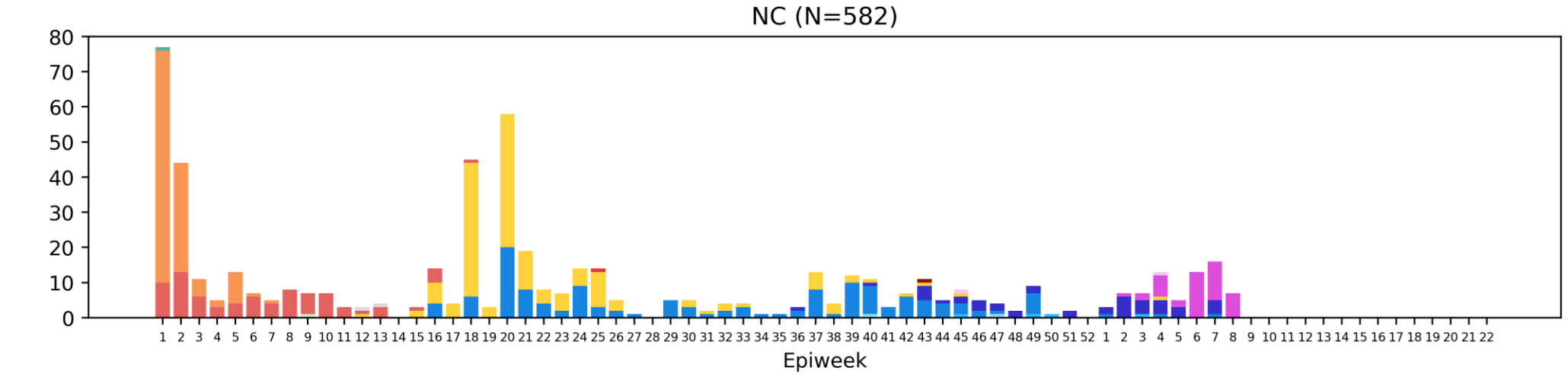
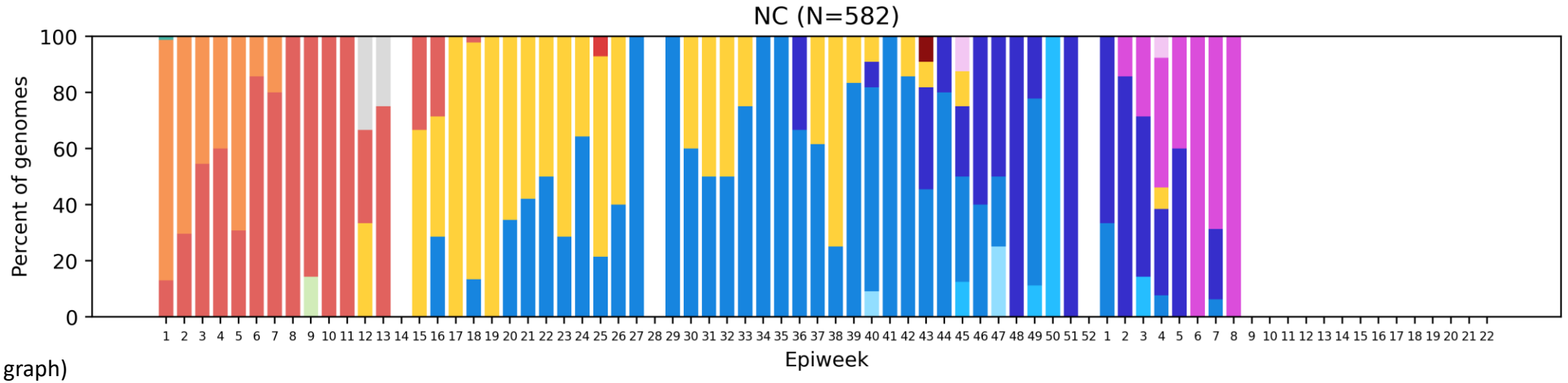
Northern Cape Province, 2022-2023, n = 582

Genomes added since last report: 0*





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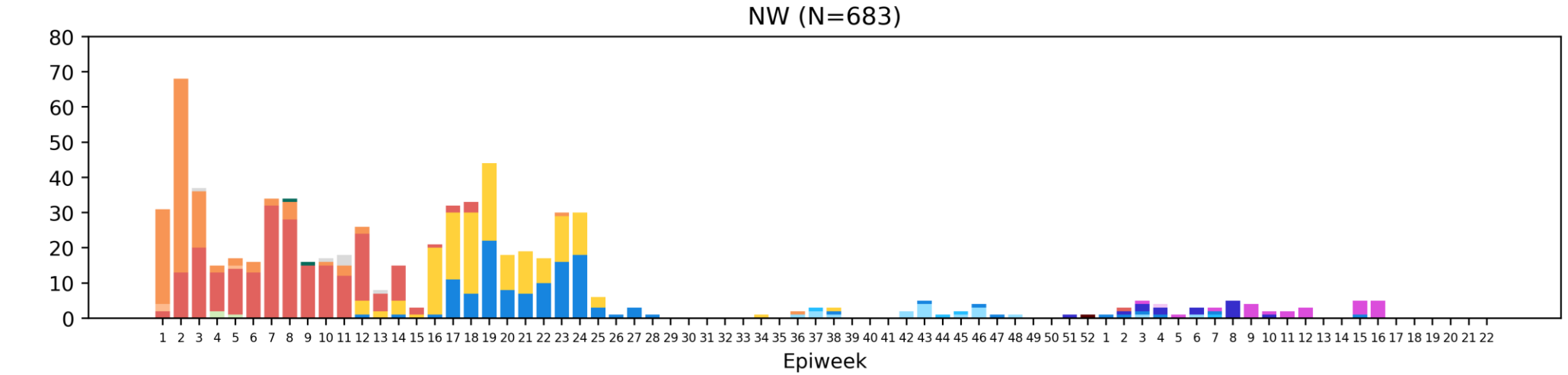
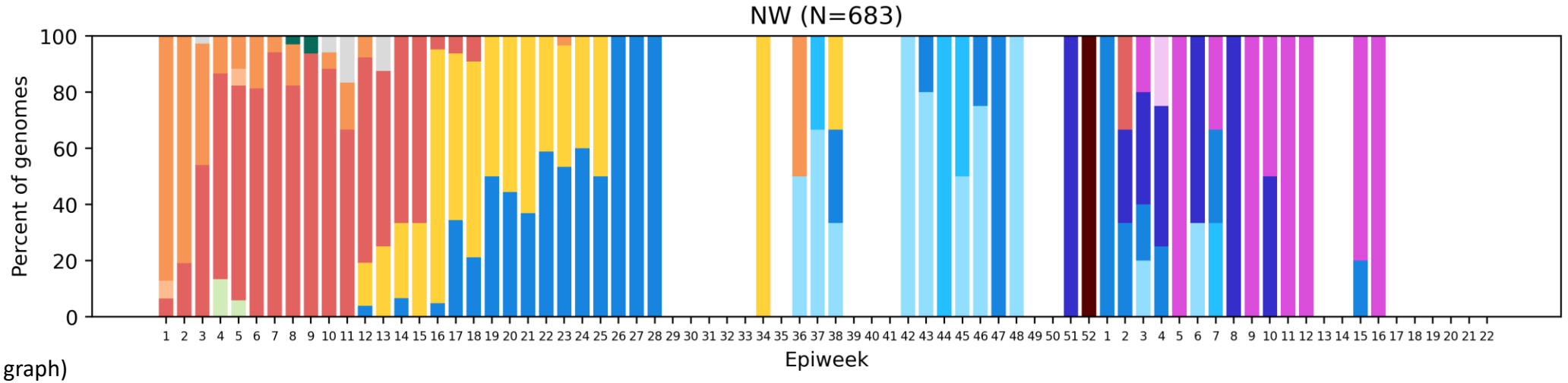
North West Province, 2022-2023, n = 683

Genomes added since last report: 16*





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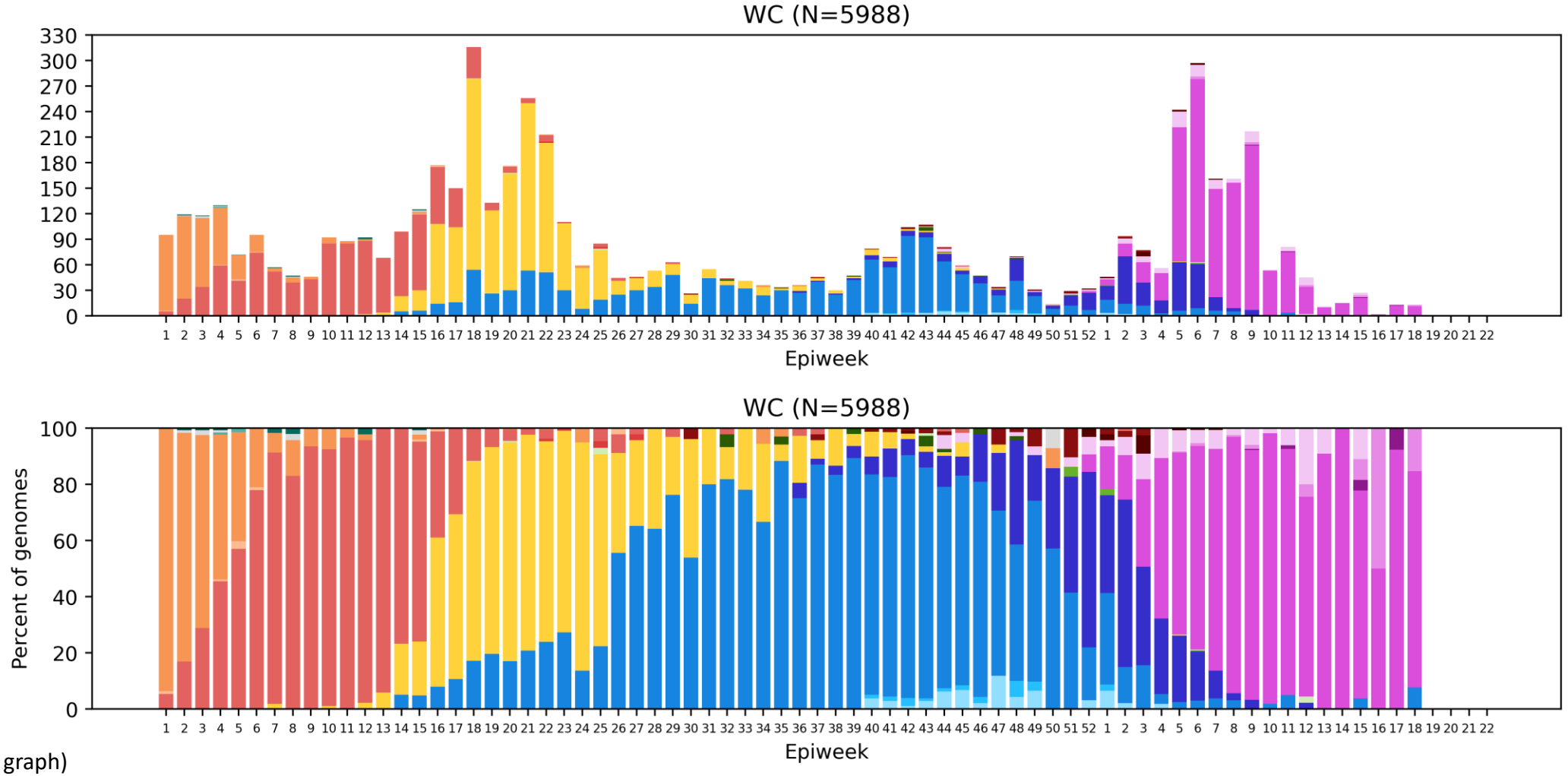
Western Cape Province, 2022-2023, n = 5988

Genomes added since last report: 28*



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Summary

- **Sequencing update**
  - All provinces have sequences for February 2023. March sequences are from all provinces, except the Northern Cape. April sequence data are from six provinces (excluding the Free State, Limpopo and the Northern Cape) and May sequence data are from Gauteng, KwaZulu-Natal, Mpumalanga and the Western Cape

- **Variant of Concern Omicron in South Africa**
  - Omicron continued to dominate in February (99.2%), March (99.9%) and April (99.0%)
  - XBB.1.5 was the dominant lineage in February (69%), March (78%) and April (81%). It is currently dominant in May (79%), although this is based on low numbers (n=19)
  - XBB.1.16 has been detected at a low prevalence in March and April (<5%) in Gauteng (n=3) and the Western Cape (n=4)

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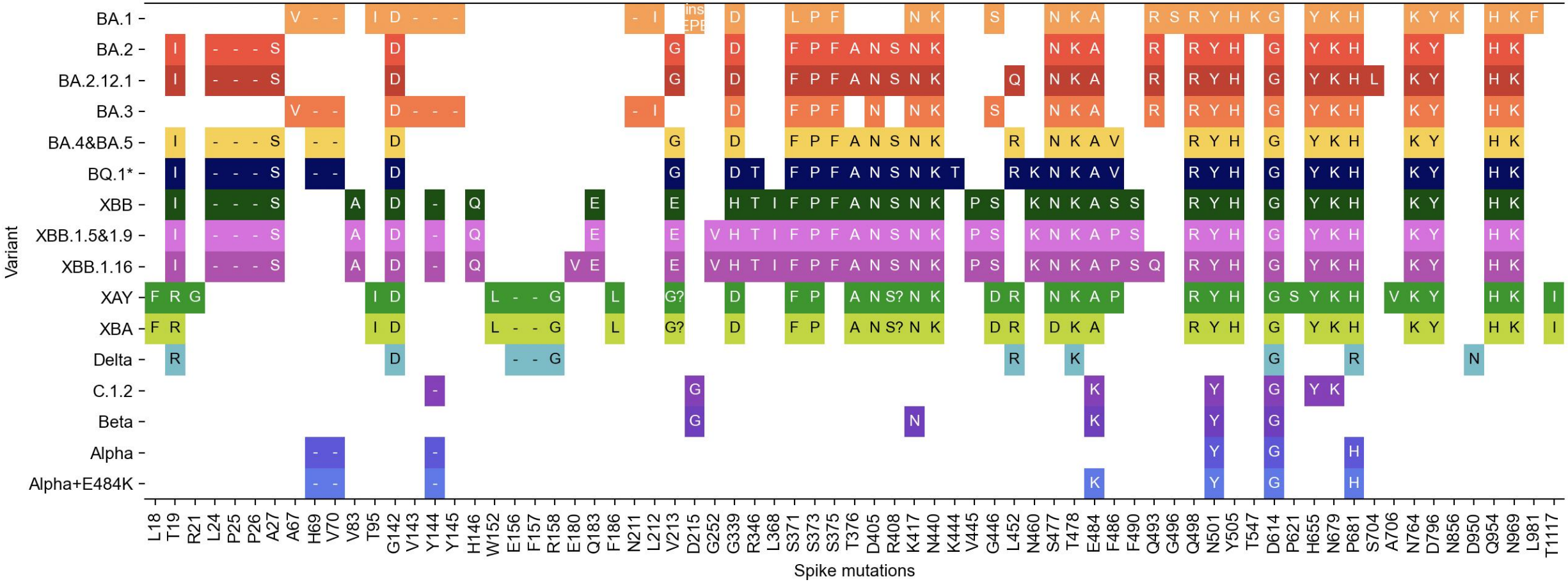
Spike protein mutation* profile of Variants of Interest and Concern



- 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

*Only mutations present in Omicron, Delta, or recombinant sequences are pictured

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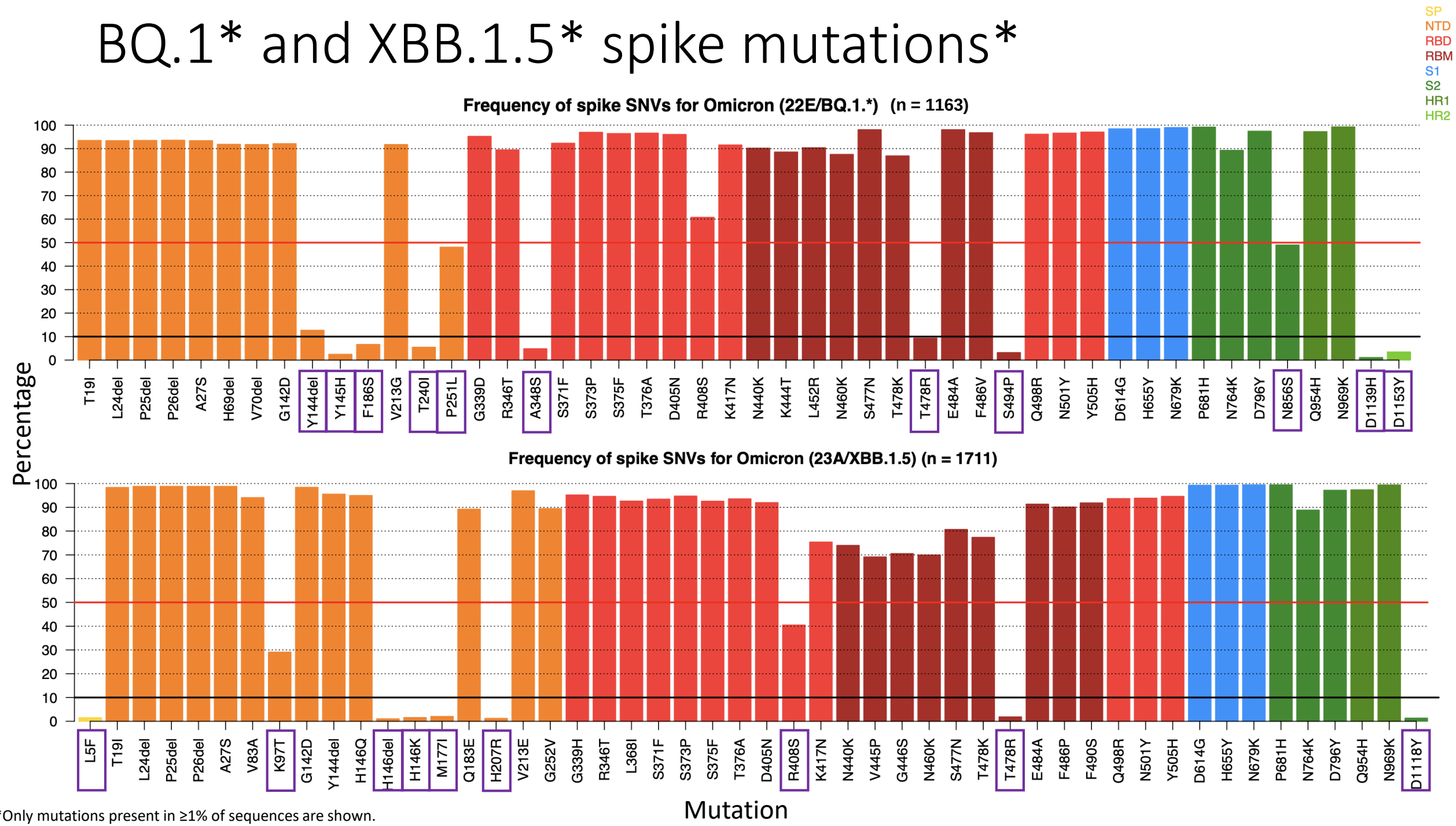
BQ.1* and XBB.1.5* spike mutations*



*Only mutations present in ≥1% of sequences are shown.

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Mr Malcolm Ellapen
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NHLS Tshwane
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National Institute for Communicable Diseases

Centre for Respiratory Diseases & Meningitis
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Boitshoko Mahlangu
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NICD SARS-CoV-2 Sequencing Group

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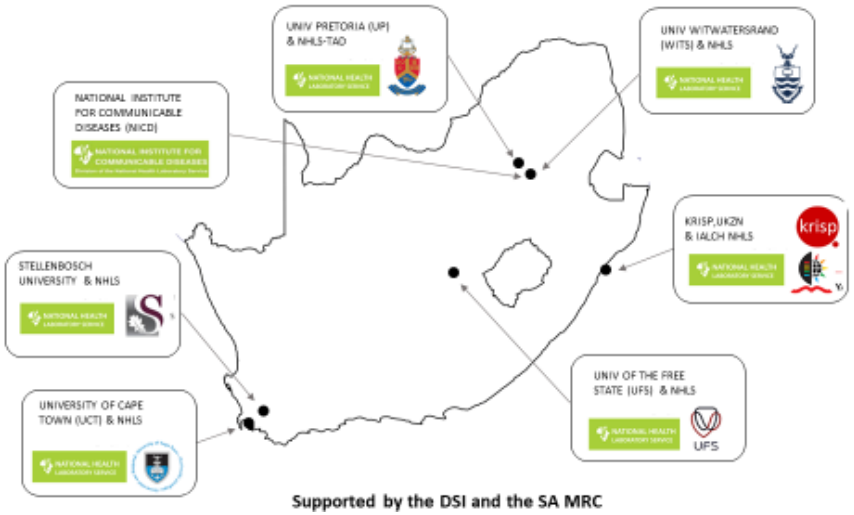
NGS-SA

Network for Genomic Surveillance in South Africa



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EDCTP

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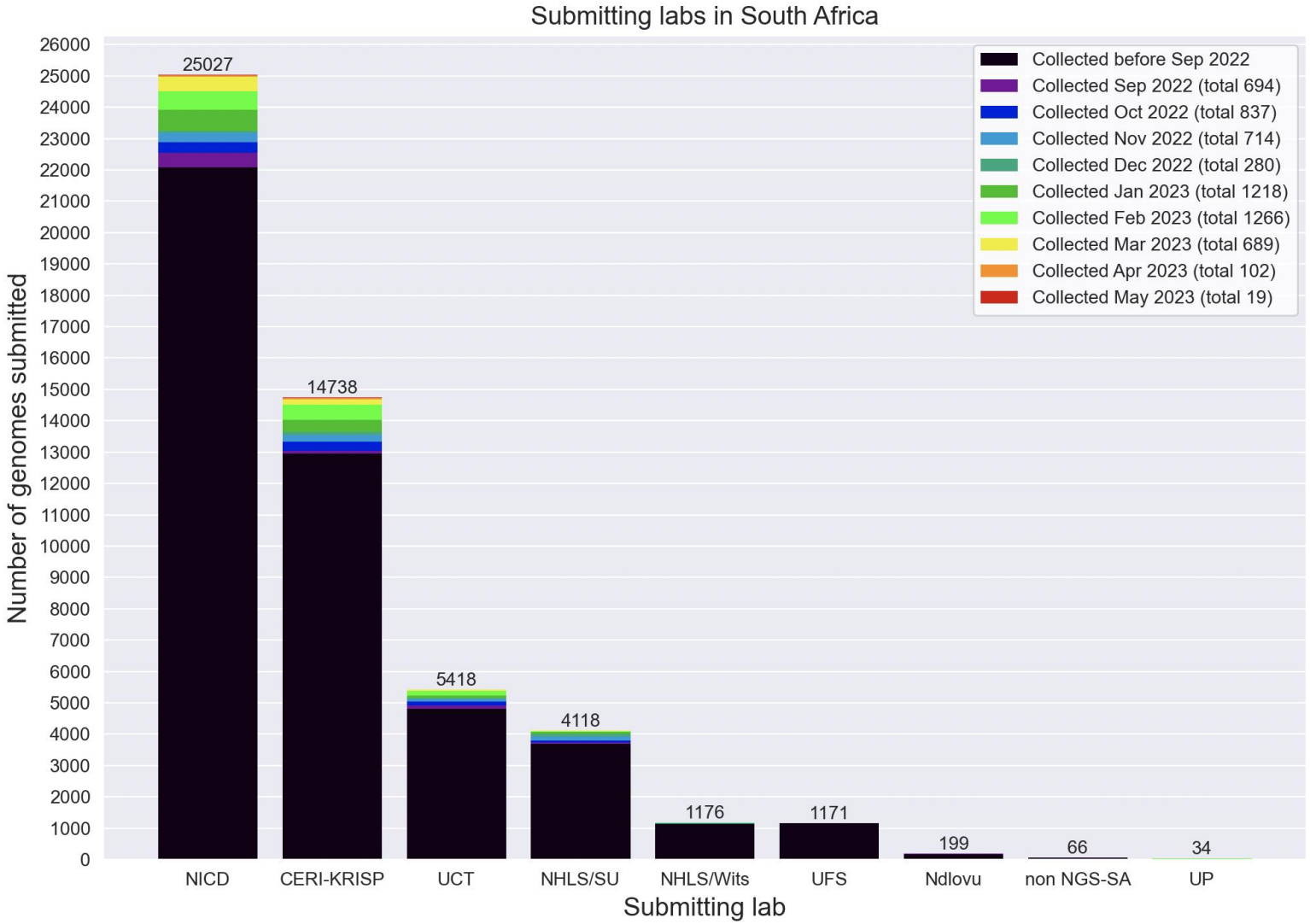
NATIONAL HEALTH LABORATORY SERVICE

South African genomes submitted per submitting lab, 2020 - 2023 (N=51 947)



NGS-SA Labs

CERI: Centre for Epidemic Response and Innovation

KRISP: KZN Research Innovation and Sequencing Platform

NDLOVU: Ndlovu Research Laboratories

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.

NGS-SA
Network for Genomic Surveillance in South Africa

Currently circulating Variants of Interest (VOI) as of 15 March 2023

Pango lineage	Nextstrain clade	Genetic features	Earliest documented samples	Date of designation
XBB.1.5	23A	Recombinant of BA.2.10.1 and BA.2.75 sublineages, i.e. BJ1 and BM.1.1.1, with a breakpoint in S1. XBB.1 + S:F486P (similar Spike genetic profile as XBB.1.9.1)	05-01-2022	11-01-2023 XBB.1.5 Rapid Risk Assessment, 11 January 2023 XBB.1.5 Updated Rapid Risk Assessment, 25 January 2023 XBB.1.5 Updated Risk Assessment, 24 February 2023
XBB.1.16	23B	Recombinant of BA.2.10.1 and BA.2.75 sublineages, i.e. BJ1 and BM.1.1.1 XBB.1 + S:E180V, S:K478R and S:F486P	09-01-2023	17-04-2023 XBB.1.16 Initial Risk Assessment 17 April 2023

https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/ accessed 18 April 2023

Currently circulating variants under monitoring (VUMs)

Pango lineage[#] (+ mutation)	Nextstrain clade	Spike genetic features	Earliest documented samples	Date of designation and risk assessments
BA.2.75	22D	BA.2 + S:K147E, S:W152R, S:F157L, S:I210V, S:G257S, S:D339H, S:G446S, S:N460K, S:Q493R reversion	31-12-2021	06-07-2022
CH.1.1	22D	BA.2.75 + S:L452R, S:F486S	27-07-2022	08-02-2023
BQ.1	22E	BA.5 + S:R346T, S:K444T, S:N460K	07-02-2022	21-09-2022
XBB*	22F	BA.2+ S:V83A, S:Y144-, S:H146Q, S:Q183E, S:V213E, S:G252V, S:G339H, S:R346T, S:L368I, S:V445P, S:G446S, S:N460K, S:F486S, S:F490S	13-08-2022	12-10-2022
XBB.1.9.1	Not assigned	Recombinant of BA.2.10.1 and BA.2.75 sublineages, i.e. BJ1 and BM.1.1.1 XBB.1 + S:F486P (similar Spike genetic profile as XBB.1.5)	05-12-2022	30-03-2022
XBB.1.9.2	Not assigned	Recombinant of BA.2.10.1 and BA.2.75 sublineages, i.e. BJ1 and BM.1.1.1 XBB.1 + S:F486P, S:Q613H	05-12-2022	26-04-2023
XBB.2.3	Not assigned	Recombinant of BA.2.10.1 and BA.2.75 sublineages, i.e. BJ1 and BM.1.1.1 XBB + S:D253G, S:F486P, S:P521S	09-12-2022	17-05-2023

* Excludes XBB sublineages listed here as VOIs and VUMs

https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/ accessed 21 April 2023

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.)