



Updated July 2021 – QIAGEN response to the SARS-CoV-2 variants with increased infectivity

It is well established that RNA viruses frequently mutate due to erroneous or ineffective replication of the viral genome (1). Coronaviruses, including SARS-CoV-2, sustain fewer mutations than most RNA viruses because they encode an enzyme that corrects some of the errors made during replication. In most cases, the fate of a new mutation in the viral genome is determined by natural selection. Those that confer a competitive advantage for viral replication, transmission, or escape from immunity will increase in frequency, and those that reduce viral fitness tend to be removed from the population of circulating viruses. However, mutations can also increase and decrease in frequency due to chance events. A variant is defined by one or more mutations that differentiate it from the reference **variant** and other variants in circulation. As expected, multiple variants of SARS-CoV-2 have been documented globally since the start of the COVID-19 pandemic.

SARS-CoV-2 variant classification

Although multiple viral variants have been detected throughout the pandemic, most appear to have little if any biological significance. However, since late 2020 a small number of variants have been classified as variants of interest (VOI) or variants of concern (VOC) by international health organizations like WHO (2), CDC (3) and ECDC (4).

Variants of concern (VOC) (2-5) are defined as **those for which evidence has been found** of an increase in transmissibility, more severe disease (increased hospitalizations or deaths), significant reduction in neutralization by antibodies generated during previous infection or vaccination, reduced effectiveness of treatments or vaccines, or diagnostic detection failures.

Variants of interest (VOI) (2-4) / **variant under investigation (VUI)** (5) are defined as those containing mutations that have been associated with changes to receptor binding, reduced neutralization by antibodies generated against previous infection or vaccination, reduced efficacy of treatments, potential diagnostic impact, or predicted increase in transmissibility or disease severity.

In silico assessment of the impact of mutations present in VOC and VOI/VUI

To address the possible impact of VOC and VOI/VUI mutations on assay performance, QIAGEN continuously assesses available sequences available from public databases (GISAID) by mapping primer designs of all available products against the mutated sequences of identified variants. This analysis allows for any potential impact on sensitivity to be immediately recognized for any of the QIAGEN assays currently used in the fight against COVID-19: the QIAstat-Dx[®] Respiratory SARS-CoV-2 Panel*, the NeuMoDx[™] SARS-CoV-2 Assay*, the NeuMoDx Flu A-B/RSV/SARS-CoV-2 Vantage Assay*, and the *artus* SARS-CoV-2 Prep&Amp UM Kit*.

Upon the in silico analysis of available sequences of the VOC and VOI/VUI designated by the WHO (2), the CDC (3), the ECDC (4), and PHE (5) in their epidemiological updates (listed on the table below), we conclude that none of the recorded mutations present in the listed strains affects the sensitivity of the QIAGEN assays detecting SARS-CoV-2 to date (6).

| Type of variant (VOC/VOI/VUI) | | | | | | | | | Impact on sensitivity of SARS-CoV-2 detection by | | | |
|-------------------------------|------------------|-----------------------|-----|-----------|------------------------|----------------------------------|--|--|--|--------------------------|---|----------------------------------|
| CDC | ECDC | Public Health England | WHO | WHO label | Pango lineage | Name (Nextstrain clade) | Key Spike Mutations | First detected | QIAstat-Dx Respiratory SARS-CoV-2 Panel | NeuMoDx SARS-CoV-2 Assay | NeuMoDx Flu A-B/ RSV/SARS-CoV-2 Vantage Assay | artus SARS-CoV-2 Prep&Amp UM Kit |
| VOC | VOC | VOC-20DEC-01 | VOC | Alpha | B.1.1.7 | 20I/501Y.V1 (also VOC 202012/01) | Δ69/70, Δ144, (E484K†), (S494P†), N501Y, A570D, D614G, P681H, T716I, S982A, D1118H (K1191N†) | United Kingdom (Sept. 2020) | No impact | No impact | No impact | No impact |
| VOC | VOC | VOC-20DEC-02 | VOC | Beta | B.1.351 | 20H/501.V2 (also VOC 202012/02) | D80A, D215G, Δ241/242/243, K417N, E484K, N501Y, D614G, A701V | South Africa (May 2020) | No impact | No impact | No impact | No impact |
| VOC | VOC | VOC-21JAN-02 | VOC | Gamma | B.1.1.28.1 (P.1) | 20J/501Y.V3 (also VOC 202101/02) | L18F, T20N, P26S, D138Y, R190S, K417T, E484K, N501Y, D614G, H655Y, T1027I | Japan/Brazil (Nov. 2020) | No impact | No impact | No impact | No impact |
| VOC | VOI | n/a | VOI | Epsilon | B.1.427 | 20C/S:452R | L452R D614G | US-California (Mar. 2020) | No impact | No impact | No impact | No impact |
| VOC | VOI | n/a | VOI | Epsilon | B.1.429 | 20C/S:452R | S13I W152C L452R D614G | US-California (Mar. 2020) | No impact | No impact | No impact | No impact |
| VOI | VOI | VUI-21FEB-03 | VOI | Eta | B.1.525 | 20A/S:484K | A67V, Δ69/70, Δ144, E484K, D614G, Q677H, F888L | United Kingdom and Nigeria (Dec. 2020) | No impact | No impact | No impact | No impact |
| VOI | Under monitoring | VUI-21JAN-01 | VOI | Zeta | B.1.1.28.2 (alias P.2) | 20J / 20B/S:484K | E484K, (F565L†), D614G, V1176F | Brazil (Apr. 2020) | No impact | No impact | No impact | No impact |
| n/a | VOI | VUI-21MAR-02 | VOI | Theta | B.1.1.28.3 (alias P.3) | 21E | 141-143 deletion; E484K; N501Y; and P681H | Philippines and Japan (Jan. 2021) | No impact | No impact | No impact | No impact |
| VOI | Under monitoring | n/a | VOI | Iota | B.1.526 | 20C/S:484K | (L5F†), T95I, D253G, (S477N†), (E484K†), D614G, (A701V†) | USA - New York (Nov. 2020) | No impact | No impact | No impact | No impact |

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| CDC | ECDC | Public Health England | WHO | WHO label | Pango lineage | Name (Nextstrain clade) | Key Spike Mutations | First detected | QIAstat-Dx Respiratory SARS-CoV-2 Panel | NeuMoDx SARS-CoV-2 Assay | NeuMoDx Flu A-B/ RSV/SARS-CoV-2 Vantage Assay | artus SARS-CoV-2 Prep&Amp UM Kit |
| n/a | VOI | n/a | n/a | - | B.1.616 | 20C | G142 deletion; D66H; Y144V; D215G; V483A; D614G; H655Y; G669S; Q949R; and N1187D | France (Feb. 2021) | No impact | No impact | No impact | No impact |
| n/a | Under monitoring | VUI-21FEB-01 | n/a | - | A.23.1 with E484K | - | F157L, V367F, Q613H, P681R, R102I | England, UK | No impact | No impact | No impact | No impact |
| n/a | VOC | VOC-21FEB-02 | n/a | - | B.1.1.7 with E484K | - | Δ69/70, Δ144, E484K, (S494P†), N501Y, A570D, D614G, P681H, T716I, S982A, D1118H (K1191N†) | England, UK (Sept. 2020) | No impact | No impact | No impact | No impact |
| n/a | Under monitoring | VUI-21FEB-04 | n/a | - | B.1.1.318 | - | T95I, Δ144, E484K, P681H, D796H | UK | No impact | No impact | No impact | No impact |
| VOI | n/a | VUI-21APR-01 | n/a | - | B.1.617 | 20A | L452R, E484Q, D614G | India (Feb. 2021) | No impact | No impact | No impact | No impact |
| VOI | VOI | n/a | VOI | Kappa | B.1.617.1 | 20A/S:154K | (T95I), G142D, E154K, L452R, E484Q, D614G, P681R, Q1071H | India (Dec. 2020) | No impact | No impact | No impact | No impact |
| VOI | VOC | VOC-21APR-02 | VOC | Delta | B.1.617.2 AY.1 AY2 | 20A/S:478K 21A | T19R, (G142D), 156del, 157del, R158G, L452R, T478K, D614G, P681R, D950N | India (Dec. 2020) | No impact | No impact | No impact | No impact |
| VOI | VOI | VUI-21APR-03 | n/a | - | B.1.617.3 | 20A | T19R, G142D, L452R, E484Q, D614G, P681R, D950N | India (Oct. 2020) | No impact | No impact | No impact | No impact |
| n/a | Under monitoring | VUI-21MAY-01 | n/a | - | AV.1 | - | D80G, T95I, G142D, 144del, N439K, E484K, D614G, P681H, I1130V, D1139H | UK (Mar 2021) | No impact | No impact | No impact | No impact |

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| CDC | ECDC | Public Health England | WHO | WHO label | Pango lineage | Name (Nextstrain clade) | Key Spike Mutations | First detected | QIAstat-Dx Respiratory SARS-CoV-2 Panel | NeuMoDx SARS-CoV-2 Assay | NeuMoDx Flu A-B/ RSV/SARS-CoV-2 Vantage Assay | artus SARS-CoV-2 Prep&Amp UM Kit |
| n/a | VOI | n/a | n/a | - | B.1.620 | - | S477N, E484K, D614G, P681H | Unclear (Feb 2021) | No impact | No impact | No impact | No impact |
| n/a | VOI | n/a | n/a | - | B.1.621 | - | R346K, E484K, N501Y, D614G, P681H | Colombia (Jan. 2021) | No impact | No impact | No impact | No impact |
| n/a | Under monitoring | VUI-21JUN-01 | VOI | Lambda | C.37 | 20D | L452Q, F490S, D614G | Peru (Dec 2020) | No impact | No impact | No impact | Potential impact in vitro tests ongoing |
| n/a | Under monitoring | VUI-21MAY-02 | n/a | - | C.36+L4 52R | - | L452R, D614G, Q677H | Egypt (2020) | No impact | No impact | No impact | No impact |

† Detected in some sequences but not all.

The majority of the listed variants above concentrate the highest incidence of genetic variability in the S-gene that encodes for the Spike protein. None of the assays included in the QIAGEN products target the S-gene to detect SARS-CoV-2. Most of the few mutations that occur within the nucleocapsid and other ORF regions are not predicted to alter the annealing efficiency of the oligonucleotides used in the assays. One mutation, however, characteristic to Lambda variant (C.37 lineage), can potentially impact detection of N1 target of *artus* SARS-CoV-2 Prep&Amp UM Kit.

| | QIAstat-Dx Respiratory SARS-CoV-2 Panel | NeuMoDx SARS-CoV-2 Assay | NeuMoDx Flu A-B RSV/SARS-CoV-2 Vantage Assay | artus SARS-CoV-2 Prep&Amp UM Kit |
|---|---|--|--|--|
| Genomic regions targeted by the QIAGEN products | E-gene & Orf1ab gene | N- gene & Nsp2 gene | Nsp2 gene | N1 and N2 gene |
| Relevant mutations identified in current variants | Eta variant (B.1.525 lineage) contains one identified mismatch in gene E assay binding region. This mutation located in a non-critical position and no impact on annealing efficiency or assay performance is predicted. | Alpha variant (B.1.1.7 lineage) contains one identified mismatch in gene Nsp2 assay binding region. This mutation located in a non-critical position and no impact on annealing efficiency or assay performance is predicted. B.1.616 lineage contains one identified mismatch in gene N assay binding region. This mutation is located on a non-critical position and no impact on annealing efficiency or assay performance is predicted. | | B.1.616 lineage contains one identified mismatch in gene N1 assay binding region. This mutation is located on a non-critical position and no impact on annealing efficiency or assay performance is predicted. B.1.620 lineage contains one identified mismatch in gene N1 assay binding region. This mutation is located in a non-critical position and no impact on annealing efficiency or assay performance is predicted. Lambda variant (C.37 lineage) contains one identified mismatch in gene N1 assay binding region. This mutation is located in a critical position and its impact on assay's performance is going to be checked experimentally. |

Genetic variability alignment and impact assessment using all sequences available on public databases

In addition to this assessment of publicly identified VOCs and VOIs/VUIs of SARS-CoV-2, QIAGEN also performs a thorough surveillance activity. This includes the analysis of all sequences of SARS-CoV-2 available from public databases (GISAID) to ensure designs utilized on available products remain unaffected by mutations found with any significant frequency. Regulatory Authorities/Agencies recommendations are strictly followed to perform both *in-silico* and *in vitro* testing when required.

After performing the analysis following our published methodology (6,7) for all QIAGEN assays currently used in the fight against COVID-19: the QIAstat-Dx Respiratory SARS-CoV-2 Panel, the NeuMoDx SARS-CoV-2 Assay, the NeuMoDx Flu A-B/RSV/SARS-CoV-2 Vantage Assay, and the *artus* SARS-CoV-2 Prep&Amp UM Kit, it was concluded that over 98.5% of the genomes analyzed and so far contained either no mismatches or no mismatches located in critical positions of the oligonucleotide binding sites.

The small number of sequences that contained any mutations in critical positions of the binding sites of the oligonucleotides have been assessed based on their prevalence and increased frequency. The few mutations for which some level of criticality has been encountered will be tested *in vitro* to ensure the sensitivity of the QIAGEN assays is kept as specified.

From the onset of the novel coronavirus outbreak, QIAGEN's dedicated global teams have been working around the clock to support the worldwide fight against COVID-19. We will continue with our genetic variation surveillance on a regular basis. Please do not hesitate to reach out to your local QIAstat-Dx, NeuMoDx, or *artus* specialist with questions.

References:

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