SARS-CoV-2 An evolving pandemic

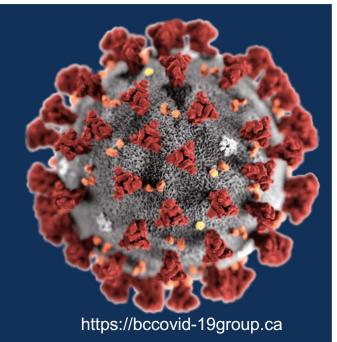
Sarah (Sally) Otto Department of Zoology University of British Columbia



BC COVID-19 Modelling Group

The BC COVID-19 Modelling Group works on rapid response modelling of the COVID-19 pandemic, with a special focus on British Columbia and Canada.

The interdisciplinary group, working independently from Government, includes experts in epidemiology, mathematics, and data analysis from UBC, SFU, UVic, and the private sector, with support from the <u>Pacific Institute for the Mathematical Sciences</u>.



Weekly meetings

- Review relevant articles
- Expert presentations
- Present new models for feedback
- Request help with projects
- Provide advice

Slack channel

- News updates
- Communications channel
- Community building

Public reports

• https://bccovid-19group.ca

Independent and freely offered advice, using a diversity of modelling approaches.





Réseau de réponse rapide aux variants du coronavirus

A year later, a broader network of Canadian scientists launched CoVaRR-Net (Coronavirus Variants Rapid Response Network, https://covarrnet.ca) with the goal of tracking and assessing the impact of variants.

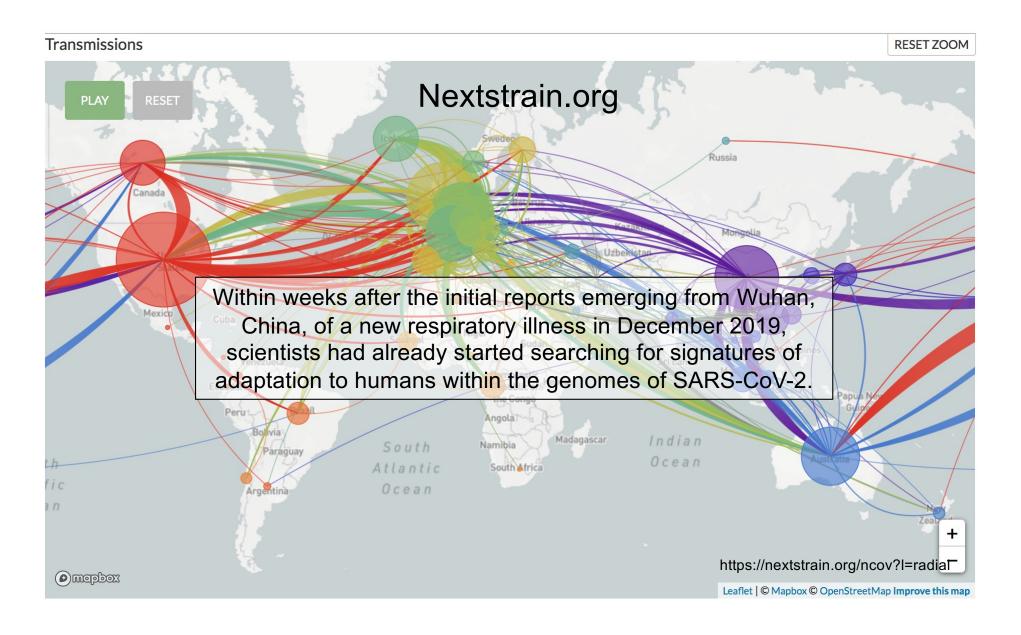
Network brings together immunologists, bioinformaticians, molecular & cellular biologists, public health experts, and evolutionary biologists.



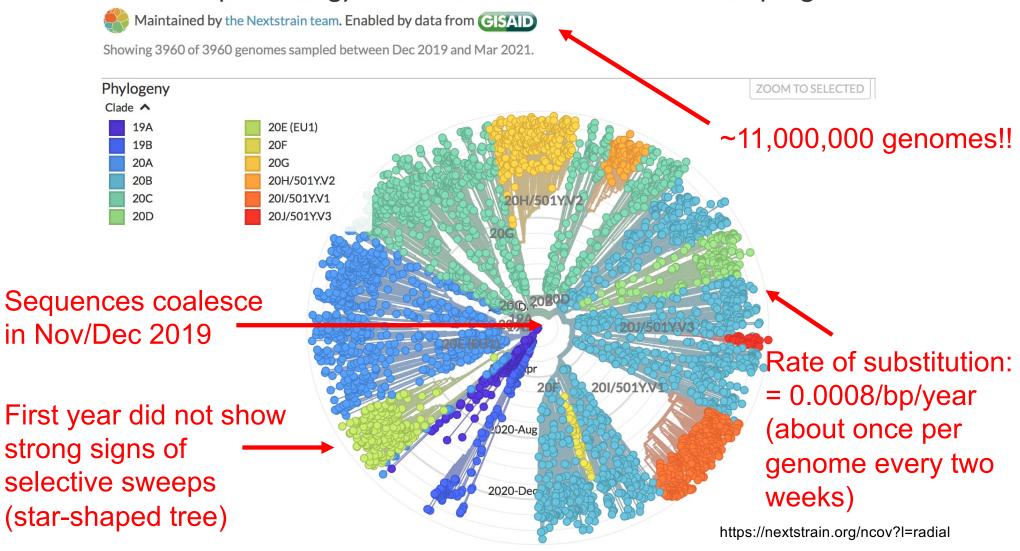
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Evolution...of how we conduct science to aid action





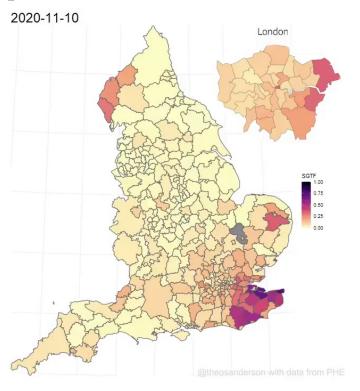


Variants of Concern

Public Health England (Dec. 21, 2020) reported a Variant of Concern (VOC)

B.1.1.7 that had increased in frequency across multiple weeks and across

multiple health authorities.

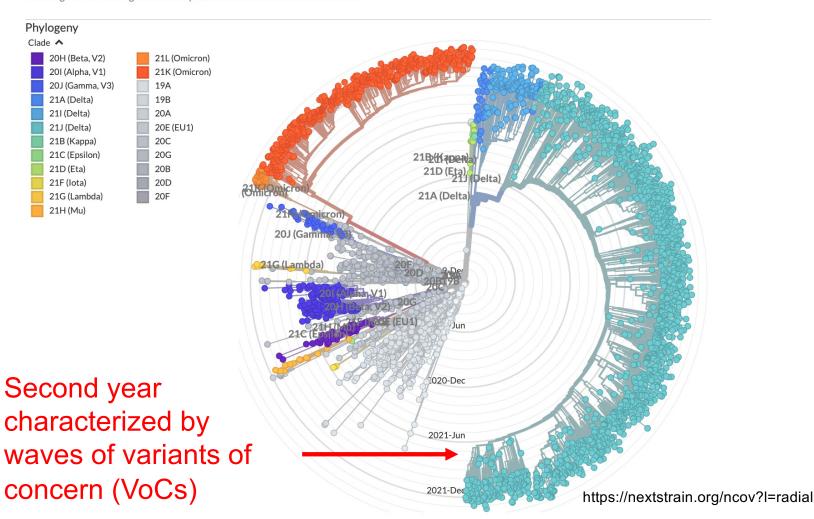


Data from Public Health England (visual from Theo Sanderson)

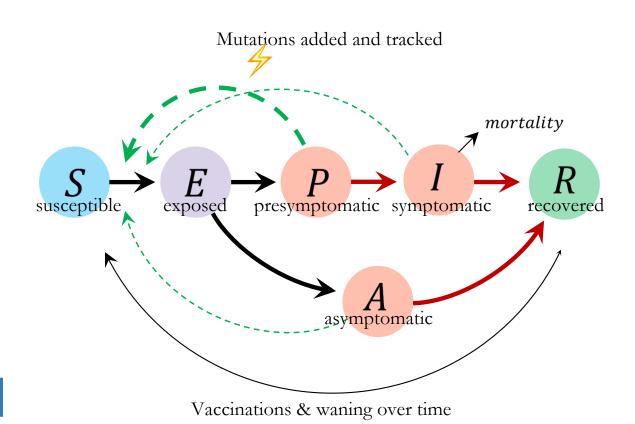
Genomic epidemiology of novel coronavirus - Global subsampling

Built with nextstrain/ncov. Maintained by the Nextstrain team. Enabled by data from GISAID.

Showing 3044 of 3044 genomes sampled between Dec 2019 and Feb 2022.



Modelling selection on SARS-CoV-2

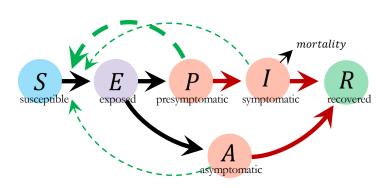


Current Biology

Day et al. (2020)

Otto et al. (2022)

Non-linear set of equations is approximately linear when susceptible class is not changing rapidly ($S\sim$ constant)



$$\frac{dS}{dt} = -S \sum_{*} (\beta_{P}^{*} P^{*} + \beta_{I}^{*} I^{*} + \beta_{A}^{*} A^{*})$$

$$\frac{dE^*}{dt} = S(\beta_P^* P^* + \beta_I^* I^* + \beta_A^* A^*) - \kappa_E^* E^*$$

$$\frac{dA^*}{dt} = f^* \kappa_E^* E^* - \kappa_A^* A^*$$

$$\frac{dP^*}{dt} = (1 - f^*)\kappa_E^* E^* - \kappa_P^* P^*$$

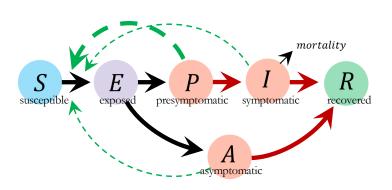
$$\frac{dI^*}{dt} = \kappa_P^* P^* - (\alpha^* + \kappa_I^*) I^*$$

$$\frac{dR}{dt} = \sum_{*} (\kappa_I^* I^* + \kappa_A^* A^*)$$

Non-linear set of equations is approximately linear when susceptible class is not changing rapidly ($S\sim$ constant)



Add mutations (*) and track spread of new lineage



$$\frac{dS}{dt} = -S \sum_{*} (\beta_{P}^{*} P^{*} + \beta_{I}^{*} I^{*} + \beta_{A}^{*} A^{*})$$

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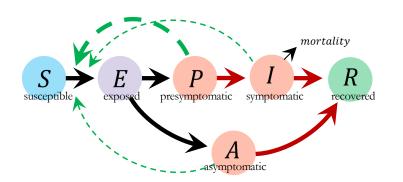
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Add mutations (*) and track spread of new lineage

Calculate selection on life-history traits by effect of mutations on the spread of the disease (λ , leading eigenvalue):

$$\frac{d\lambda}{dz} = \vec{v}^T \frac{d\mathbf{M}}{dz} \vec{u}$$



$$\frac{dS}{dt} = -S\sum_{*}(\beta_P^*P^* + \beta_I^*I^* + \beta_A^*A^*)$$

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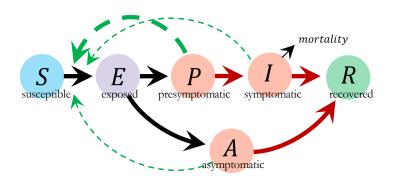
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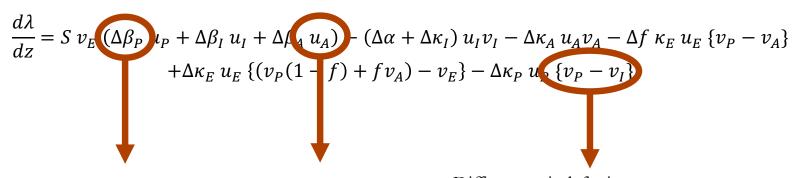
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What selection pressures are acting on SARS-CoV-2?

$$\frac{d\lambda}{dz} = S v_E (\Delta \beta_P u_P + \Delta \beta_I u_I + \Delta \beta_A u_A) - (\Delta \alpha + \Delta \kappa_I) u_I v_I - \Delta \kappa_A u_A v_A - \Delta f \kappa_E u_E \{ v_P - v_A \} + \Delta \kappa_E u_E \{ (v_P (1 - f) + f v_A) - v_E \} - \Delta \kappa_P u_P \{ v_P - v_I \}$$



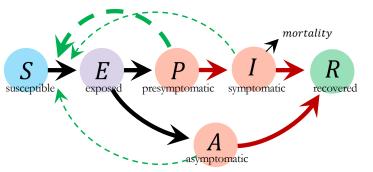
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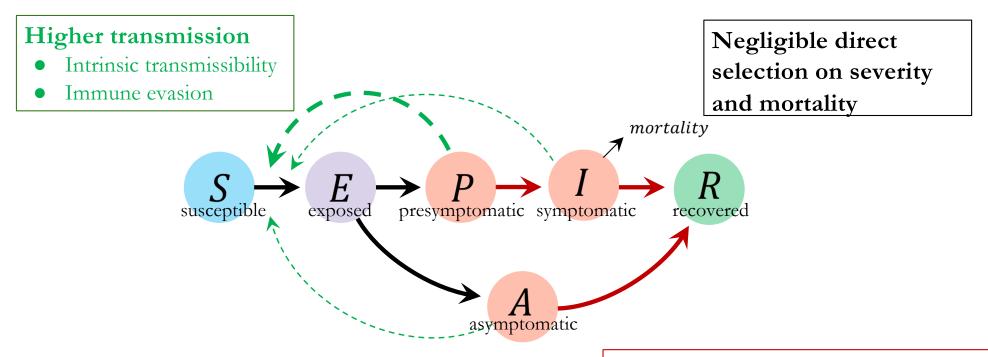


Mutant effects

Right eigenvector (strictly positive)

Differences in left eigenvectors Compares "reproductive values"





Current Biology

Day et al. (2020)

Prolonged infectivity:

- Earlier infectivity favoured if cases rising
- Later infectivity favoured if cases declining

Higher transmission

- Intrinsic transmissibility
- Immune evasion

Antibody response to SARS-Cov-2 viral load wild moderate illness

Cevik et al. BMJ (2020)

SARS-Cov-2 viral load wild moderate illness

Covik et al. BMJ (2020)

Time since symptom onset (days)

Negligible direct selection on severity and mortality

Current Biology

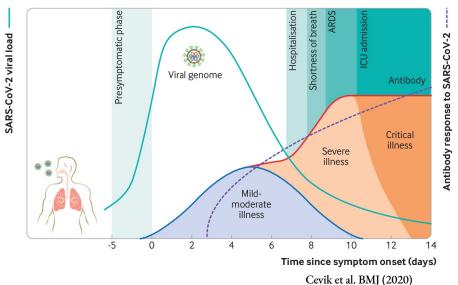
Day et al. (2020)

Prolonged infectivity:

- Earlier infectivity favoured if cases rising
- Later infectivity favoured if cases declining

"Virulence evolution will be driven largely by the indirect effects of pleiotropy..."

- Mutations might "couple a higher transmission rate with higher mortality (positive pleiotropy)...if mutations increase viral replication rates."
- Alternatively, mutations might alter "tissue tropism such that the disease tends to preferentially infect cells of the upper respiratory tract, rather than the lower respiratory tract. Such infections could lead to a higher transmission rate but be less virulent (negative pleiotropy)"

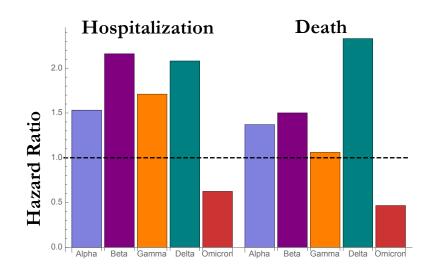


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Day et al. (2020)

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Current Biology

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Based on:

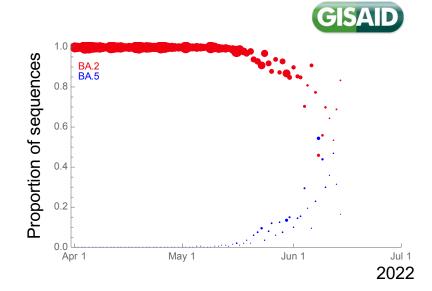
Lin et al. (2022) for Alpha, Beta, Gamma, Delta vs wildtype Nyberg et al. (2022) for Omicron vs Delta (rescaled using above to wildtype)

We can estimate selection using classical population genetics models for the change in frequency (p) of a variant due to selection (s):

$$\frac{dp}{dt} = s \ p \ (1 - p)$$

which can be solved:

$$p_t = \frac{e^{st} \, p_0}{1 - p_0 + e^{st} \, p_0}$$



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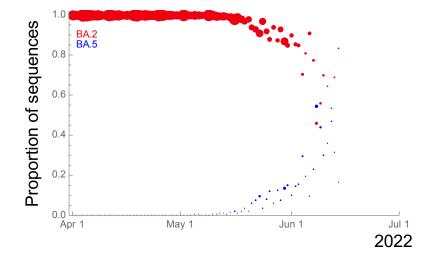
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with n_t sequences at time t and an observed number of each type (j, k), the likelihood of observing the data is binomial:

likelihood
$$(data_t) = \binom{n_t}{j} p_t^j (1 - p_t)^k$$

$$lnL(all\ data) \propto \sum_t j \ln(p_t) + k \ln(1 - p_t)$$



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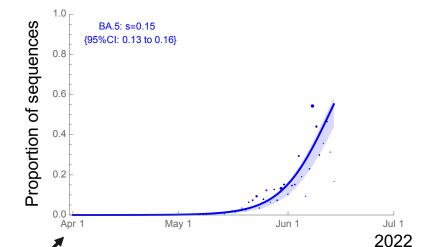
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Estimate selection by maximizing the likelihood

Plus: get CI & allow for multiple variants

We can estimate selection using classical population genetics models for the change in frequency (p) of a variant due to selection (s):

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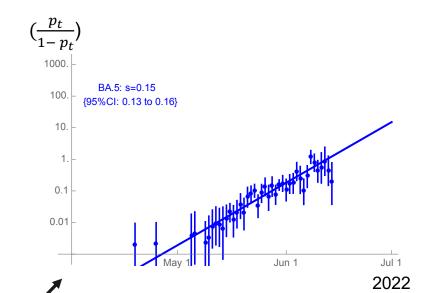
which can be solved:

$$p_t = \frac{e^{st} \, p_0}{1 - p_0 + e^{st} \, p_0}$$

Or rearrange:

Step 1:
$$\frac{p_t}{1-p_t} = \frac{e^{st} p_0}{1-p_0}$$

Step 2:
$$\ln(\frac{p_t}{1-p_t}) = s t + \ln(\frac{p_0}{1-p_0})$$

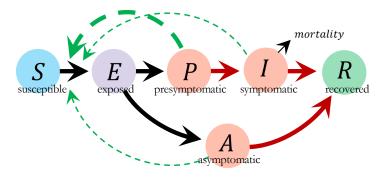


Predicts a linear relationship with constant slope *s* if selection is constant

What selection pressures are acting on SARS-CoV-2?

$$\frac{d\lambda}{dz} = S v_E \left(\Delta \beta_P u_P + \Delta \beta_I u_I + \Delta \beta_A u_A \right) - \left(\Delta \alpha + \Delta \kappa_I \right) u_I v_I - \Delta \kappa_A u_A v_A - \Delta f \kappa_E u_E \left\{ (v_P (1 - f) + f v_A) - v_E \right\} - \Delta \kappa_P u_P \left\{ v_P - v_I \right\}$$

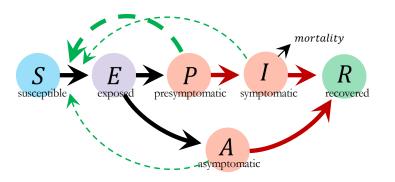
Selection should weaken for a variant that increases transmission if susceptibles are protected and/or transmission is limited.

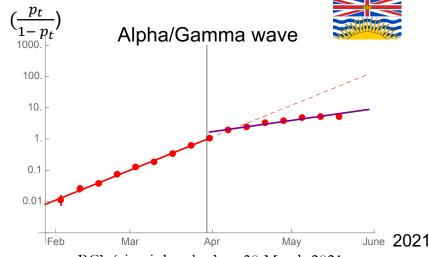


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Selection should weaken for a variant that increases transmission if susceptibles are protected and/or transmission is limited.





BC's 'circuit breaker' on 30 March 2021

(vertical line: closing indoor dining, gym closures, travel within the province restricted; See Otto et al. 2022 Current Biology)

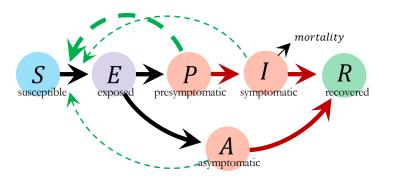
 $\left(\frac{p_t}{1-p_t}\right)$ 1000. Before Dec 25: s=0.286
After Dec 25: s=0.07

BC

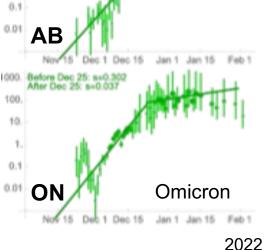
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Selection should weaken for a variant that increases transmission if susceptibles are protected and/or transmission is limited.



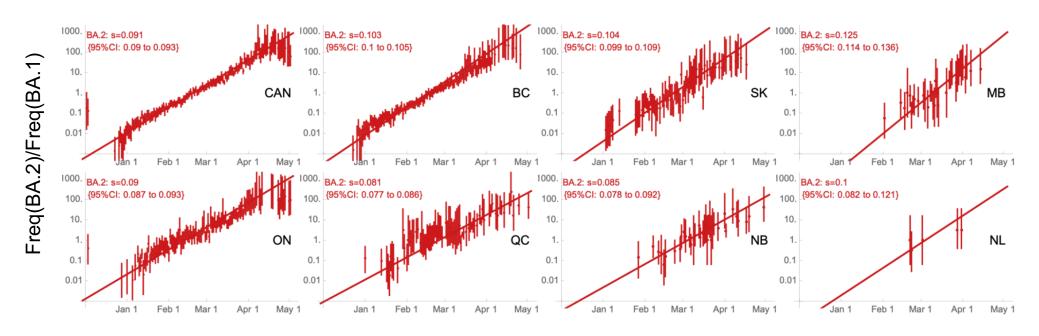
Collective concern



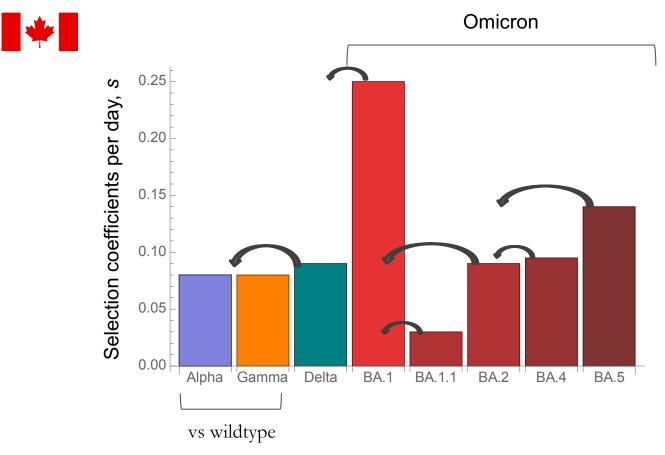
BC COVID-19 Modelling Report (Feb 17, 2022)

Omicron's BA.2 vs BA.1

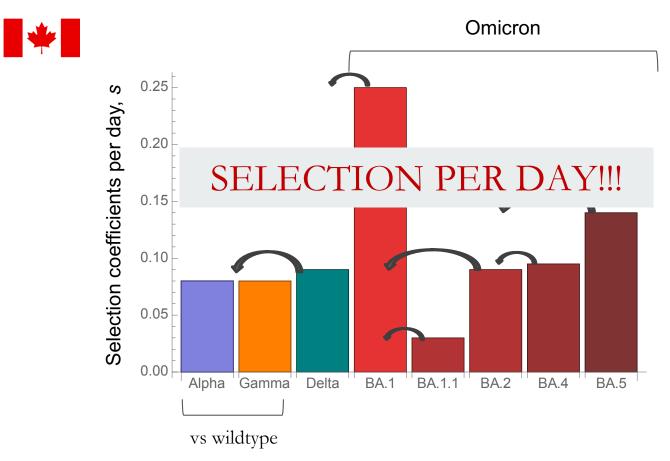




2022

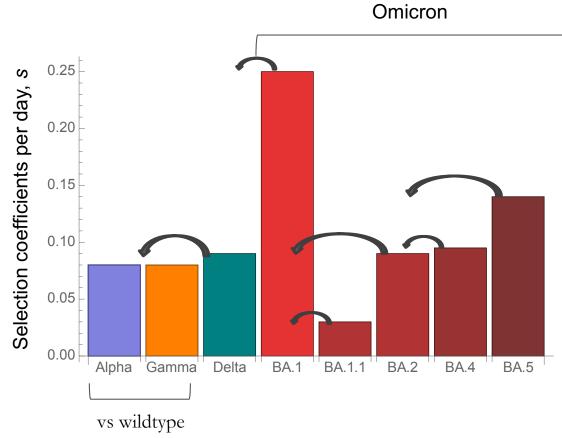


BC COVID-19 Modelling Report (2June2021, 6August2021, 17Feb2022, 18May2022, next one)



BC COVID-19 Modelling Report (2June2021, 6August2021, 17Feb2022, 18May2022, next one)





Days to double in frequency relative to reference strain

$$s = 25\% \rightarrow 2.7 \text{ days}$$

$$s = 15\% \rightarrow 4.6 \text{ days}$$

$$s = 10\% \rightarrow 7 \text{ days}$$

$$s = 5\% \rightarrow 14 \text{ days}$$

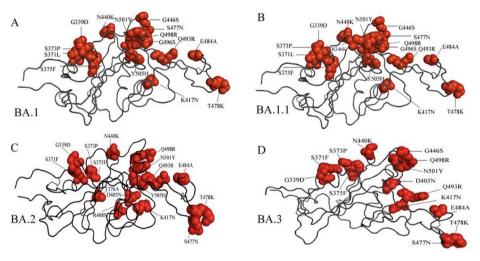
$$s = 1\% \rightarrow 70 \text{ days}$$

BC COVID-19 Modelling Report (2June2021, 6August2021, 17Feb2022, 18May2022, next one)

Omicron: First major VOC to evade immunity

Three times more spike mutations than all other VOC had when they arose.

Many mutations are known or predicted to reduce efficacy of neutralizing antibodies and increase ACE2 binding.



Receptor Binding Domain

with residue mutated relative to the wild-type

Kumar et al. (2022) J Med Vir

The key mutations that shape Omicror Side-on view 1 6

- 1 The combination of mutations at K417N, S477N, Q498R and N501Y is thought to be an antibody-evasion strategy
- 2 Deletions at positions 69 & 70 mean the variant can be detected using some PCR tests without the need for full genomic sequencing
- 3 Four new mutat S371L, S373P and S create additional ob for certain antibodic

Insertion/deletion

Mutation

Three mutations cleavage site at H65 P681H may be asso increased transmissi

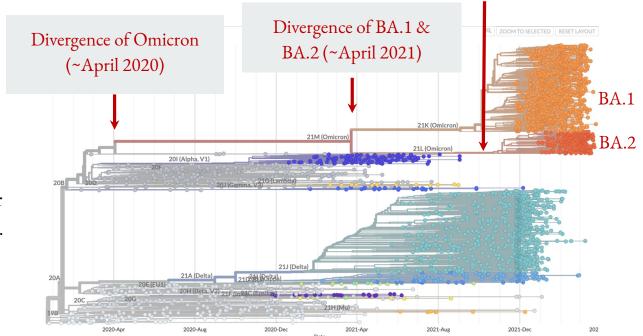
Sources: Ulrich Elling; Björn Meyer; Kevin Mccarthy; covariants.org

Financial Times

Omicron

Divergence of BA.4 & BA.5 (~October 2021)²

First detected in mid-November 2021¹, Omicron shows a substantially older evolutionary history, diverging from other VOC near the beginning of the pandemic.





¹ <u>Viana et al. (2022)</u>

² Tegally et al. (2022)

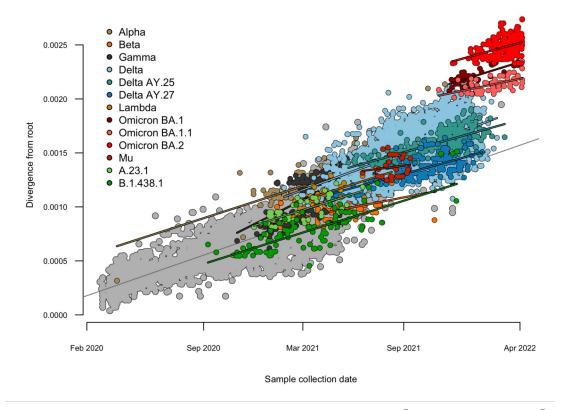
Omicron Sub-Lineages

The mutation rates per unit time (slopes) are similar, but Omicron appears to have had a history of elevated mutation (a pulse raising the intercept).

Unusual evolutionary features of Omicron:

- more than expected number of mutations
- disproportionate number of changes in spike
- a long period of evolutionary divergence "out of sight" of global surveillance
- evidence that recombination was involved^{1,2} in the generation of at least one of BA.1-BA.5



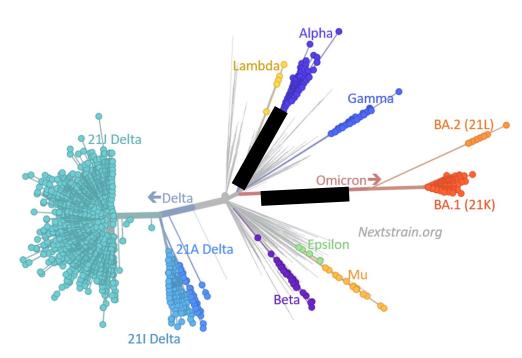


[Source: Art Poon]

¹ Viana et al. (2022)

²Tegally et al. (2022)

Unusual evolutionary features of VOC



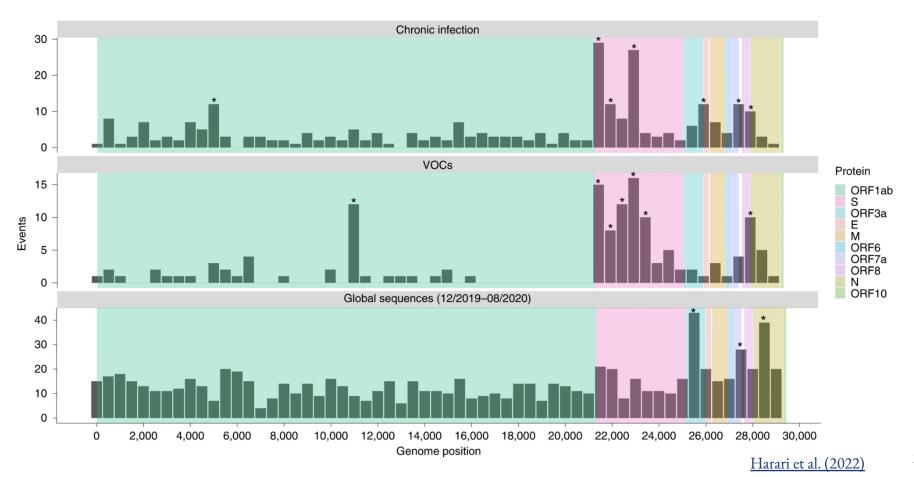
Black box: Passage through immunocompromised individual(s) with persistent infections¹ may account for these unusual features:

- High and prolonged viral replication (more mutations)
- Relaxed and/or altered immune environment, allowing mutations to accumulate in antigenic regions
- Hidden from surveillance efforts
- Higher potential for recombination²

¹ e.g., 335 days <u>in a lymphoma patient;</u> >9 months in an <u>HIV patient</u>

² Recombination detected in a lymphoma patient infected for 14 months, initially infected with B.1.160 then with Alpha (Burel et al.)

Unusual evolutionary features of VOC



Unusual evolutionary features of VOC

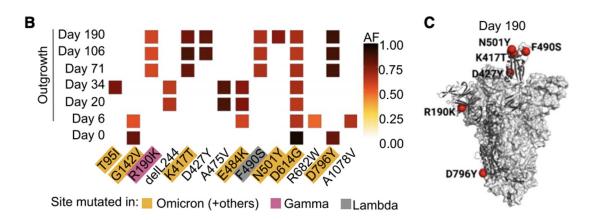


Cell Host & Microbe

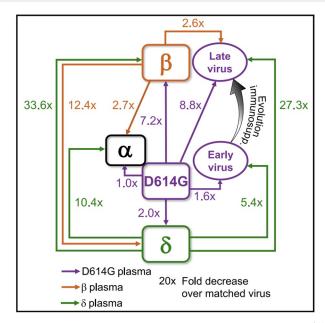
Brief Report

SARS-CoV-2 prolonged infection during advanced HIV disease evolves extensive immune escape

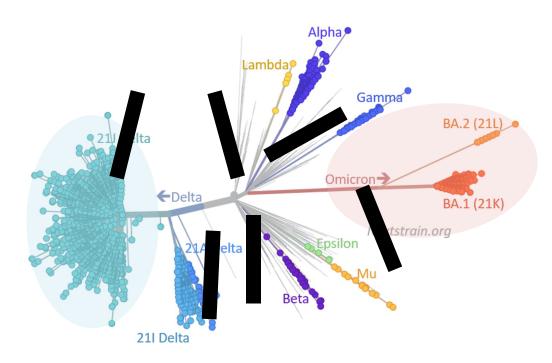
Sandile Cele, ^{1,2} Farina Karim, ^{1,2} Gila Lustig, ³ James Emmanuel San, ⁴ Tandile Hermanus, ^{5,6} Hourilyah Tegally, ^{4,7} Jumari Snyman, ^{1,8} Thandeka Moyo-Gwete, ^{5,6} Eduan Wilkinson, ^{4,7} Mallory Bernstein, ¹ Khadija Khan, ^{1,2} Shi-Hsia Hwa, ^{1,9} Sasha W. Tilles, ¹⁰ Lavanya Singh, ⁴ Jennifer Giandhari, ⁴ Ntombifuthi Mthabela, ¹ Matilda Mazibuko, ¹ Yashica Ganga, ¹ Bernadett I. Gosnell, ¹¹ Salim S. Abdool Karim, ^{3,12} Willem Hanekom, ^{1,9} Wesley C. Van Voorhis, ¹⁰ Thumbi Ndung'u, ^{1,8} COMMIT-KZN Team, ¹⁶ Richard J. Lessells, ^{2,3,4} Penny L. Moore, ^{3,5,6,13} Mahomed-Yunus S. Moosa, ¹¹ Tulio de Oliveira, ^{2,3,4,7,14} and Alex Sigal^{1,2,15,*}



Example of an immunocompromised patient with persistent (190 day) COVID infection, which evolved substantial escape from neutralization.



Evolution: Emergence of new variants



Globally: Since May 1, 2022, Delta (37), Alpha (2), and a variety of other non-VOC lineages remain in circulation (0.2%).

Most mutations will arise in prevailing lineages:

• Increases in transmissibility & immune escape (e.g., BA.4 & BA.)

Major shifts may well arise outside of these lineages (less likely to elicit an immune response)

- Immunosuppressed individuals
- Human -> animal -> human zoonoses

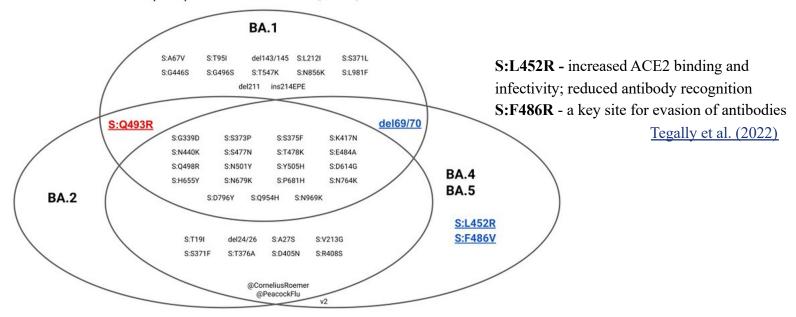
New variants may be more (e.g., Alpha and Delta) or less (e.g., Omicron) severe.



Sub-variants BA.4 & BA.5

→ Very similar to BA.2, but called BA.4 and BA.5 because they lack some of the mutations characteristic of BA.2 (like S:Q493, NSP4 L438 and Orf6 D61). Diverged earlier?

Shared and unique Spike mutations in BA.1, BA.2, and BA.4/BA.5

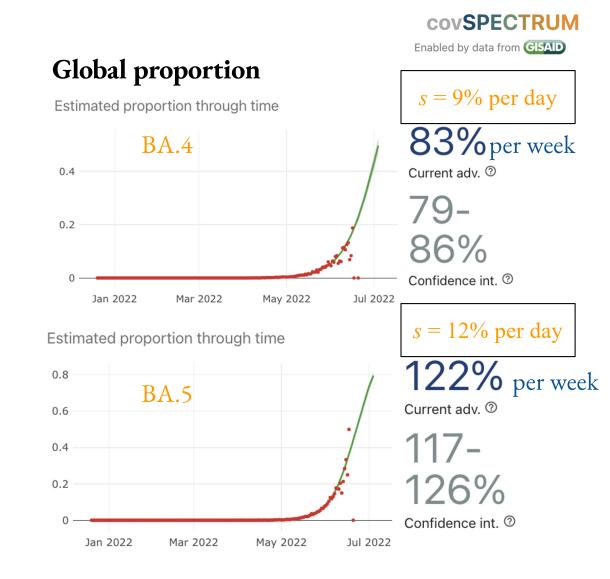


Omicron Sub-Lineages

Early data from South Africa suggests an 8% per day selective advantage for BA.4 and 12% for BA.5 (Tegally et al. 2022), relative to BA.2.

Spread may result from a combination of **higher** inherent transmissibility and immune evasion (Khan et al. 2022; Hachmann et al.).

Together, BA.4 & BA.5 are estimated to comprise >70% of global sequences by today



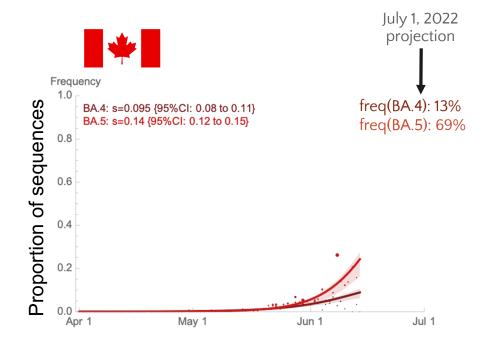
Omicron sub-lineages in Canada

GISAID data shared by Public Health labs across Canada allow us to track the spread of Omicron sublineages over time.

 \rightarrow BA.4 is spreading rapidly at a rate of s=9.5% per day relative to BA.2#

 \rightarrow BA.5 is spreading slightly faster with s=14% per day relative to BA.2#

These lineages should now (or soon) dominate the COVID-19 picture in Canada.



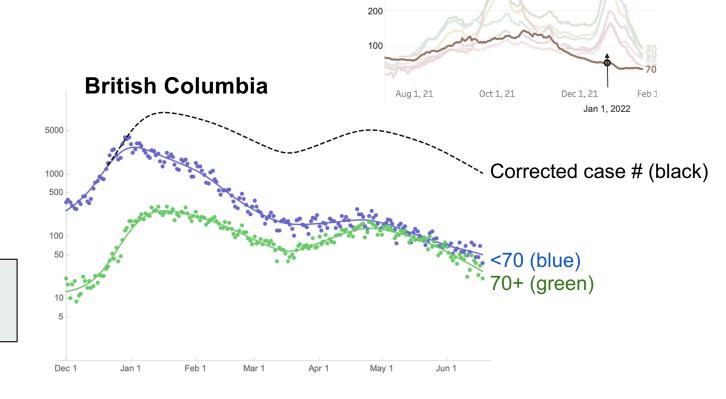


Source (S. Otto) Canadian metadata was downloaded from GISAID for the Omicron GRA clades (Alberta sequences were removed as AB first identifies variants and preferentially sequences some subtypes). A model of selection was fit to the numbers of each type using maximum likelihood based on a trinomial distribution given the expected frequencies on each day. Hessian matrix used to obtain confidence intervals.

What does this imply for case numbers?

We'll use case numbers observed in individuals aged 70+ to assess trends, as they have been more consistently tested.

Cases among the 70+ age group are **significantly decreasing***.



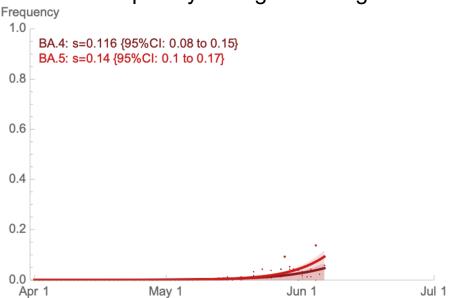
Testing rates per 100,000 vaccinated

Steep drop in testing < 70

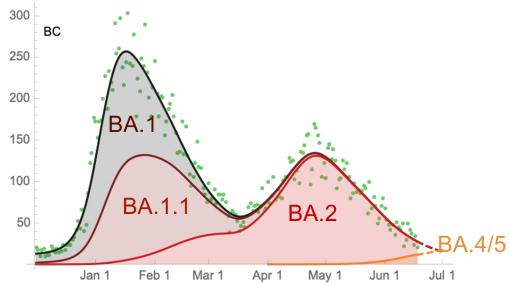
Source (S. Otto) New cases per day in 10-year age groups were downloaded from the **BCCDC COVID-19 data portal.** Cubic spline fits to log-case data were obtained (curves) for those 70+ (green) or <70 (blue). *Linear regression through log case counts among 70+ from last 14 days of data.

What does this imply for case numbers?

Fitting models of selection allows us to estimate frequency changes among variants.

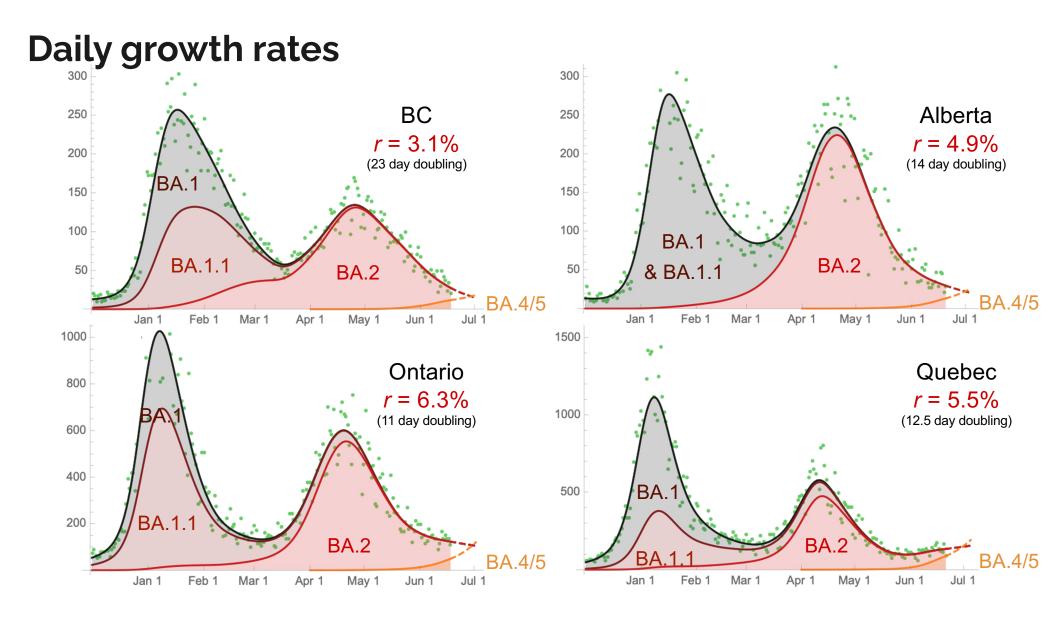


Multiplying by the # of cases in those over 70 allows us to **estimate** growth in numbers of each Omicron sublineage.



 \rightarrow While numbers of BA.1 and BA.2 are declining, **estimated numbers of BA.4 & BA.5** (grouped together) are rising (r = +3.1%) in British Columbia.

Source (S. Otto) Canadian metadata was downloaded from GISAID for the Omicron GRA clades. A model of selection was fit to the numbers of each type using maximum likelihood based on a trinomial distribution given the expected frequencies on each day. Hessian matrix used to obtain confidence intervals.

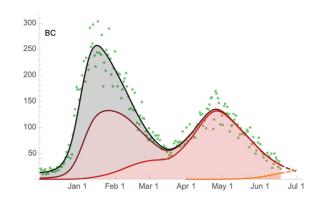


The Third Omicron Wave

The above projections indicate that **case numbers should start rising around July 1**, driven by a BA.4 & BA.5 wave.

This third Omicron wave should peak about 4-8 weeks afterwards.

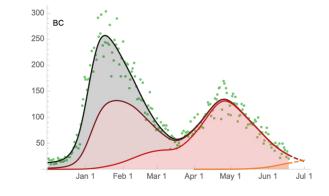
Fairly high confidence



The Third Omicron Wave

The above projections indicate that case numbers should start rising around July 1, driven by a BA.4 & BA.5 wave.

This third Omicron wave should **peak about 4-8 weeks** afterwards.



Fairly high confidence

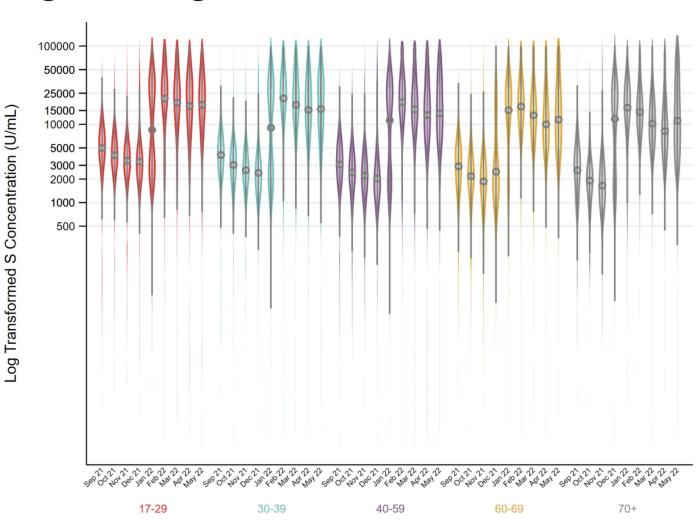
The height & impact of this peak is challenging to predict, depending on the interplay of many factors:

- 1. Antibody levels
- 2. Efficacy of neutralizing antibodies
- 3. Virulence of BA.4 & BA.5
- 4. Public health measures

No confidence

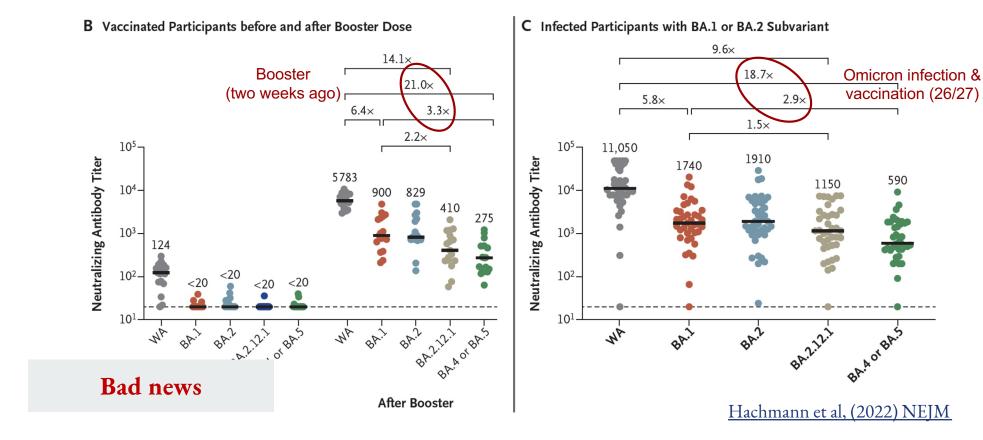
1. Antibody levels

The COVID-19 Immunity Task Force & Canadian Blood Services data suggests high standing levels of spike antibodies in all age groups (blood donations through mid-May 2022).



Good news

2. Efficacy of neutralizing antibodies: The ability of these antibodies to neutralize SARS-CoV-2 and prevent infection is substantially compromised for BA.4 & BA.5.



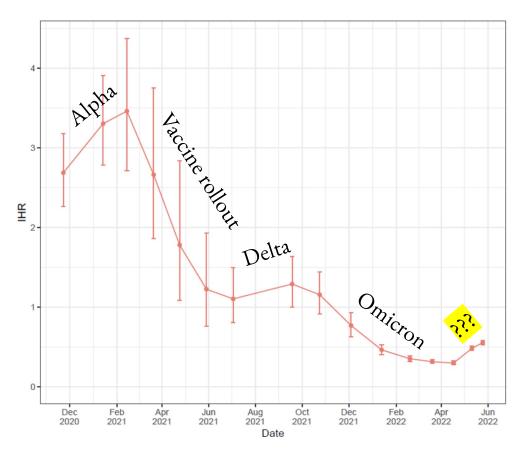
47

3. Virulence: Currently have no clear indication of the relative virulence of BA.1-BA.5

In its <u>43 technical briefing</u>, the UK Health Security Agency reported model estimates of hospitalization rate per infection (IHR) over time.

Recent data shows an uptick:

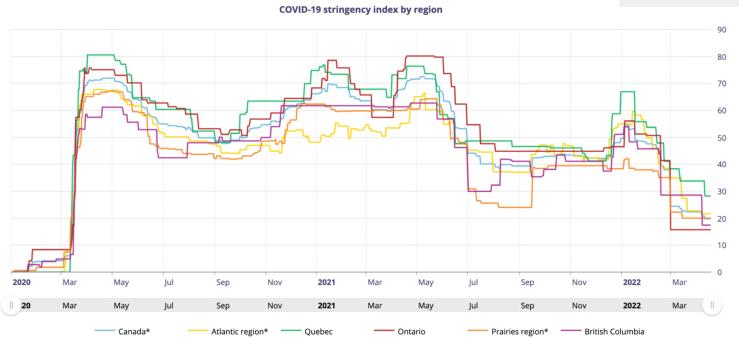
BA.4 & BA.5 or waning immunity?



Uncertain news

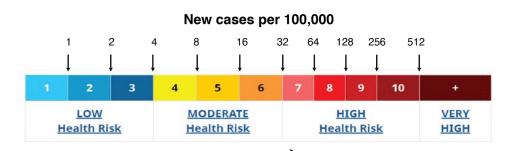
4. Public health measures: Lowest since the pandemic began and little appetite





Not great news





Prepare the public: We are at the start of the BA.4/BA.5 wave

Encourage boosters: Don't wait for the bivalent vaccines (Wuhan & Omicron)

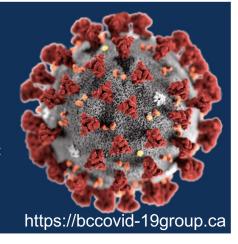
- Omicron-specific booster from Moderna shows just a **slight** difference relative to prototype booster, which may have little real-world relevance to vaccine effectiveness (e.g., only 1.75 difference in neutralizing geometric mean titer ratio between boosting with mRNA-1273.214 vs mRNA-1273 [Moderna June 8 2022 press release].
- Prioritize bivalent vaccine for immunologically naive individual

Globally prioritize treatment of those suffering persistent infections

- 2-3% of population immunosuppressed
- 40M+ living with <u>HIV/AIDS</u>

The BC COVID-19 Modelling Group works on rapid response modelling of the COVID-19 pandemic, with a special focus on British Columbia and Canada.

The interdisciplinary group, working independently from Government, includes experts in epidemiology, mathematics, and data analysis from UBC, SFU, UVic, and the private sector, with support from the Pacific Institute for the Mathematical Sciences.



Thank you





Coronavirus Variants Rapid Response Network



Réseau de réponse rapide aux variants du coronavirus