## **Notes from the Field**

## Genome Characterization of COVID-19 Lineage B.1.1.7 Detected in the First Six Patients of a Cluster Outbreak — Shenzhen City, Guangdong Province, China, May 2021

Yaqing He<sup>1,2,&</sup>; Peihua Niu<sup>3,&</sup>; Bo Peng<sup>1,2</sup>; Ying Sun<sup>1,2</sup>; Ziquan Lyu<sup>4</sup>; Renli Zhang<sup>1,2</sup>; Xiang Zhao<sup>3</sup>; Yang Song<sup>3</sup>; Yenan Feng<sup>3</sup>; Xiujuan Tang<sup>5</sup>; Dongfeng Kong<sup>5</sup>; Xinyi Wei<sup>1,2</sup>; Can Zhu<sup>1,2</sup>; Qingju Lu<sup>1,2</sup>; Shimin Li<sup>1,2</sup>; Xiaoliang Xiao<sup>1,2</sup>; Weiwen Liu<sup>4</sup>; Junjia He<sup>4</sup>; Junjia Xia<sup>6</sup>; Long Chen<sup>1,2,#</sup>; Xuan Zou<sup>6,#</sup>; Tiejian Feng<sup>1,6,#</sup>

2019 for coronavirus disease Screening (COVID-19) virus, also known as SARS-CoV-2, infection every seven days was performed for high-risk populations who worked at the Yantian Port in Yantian District, Shenzhen City, Guangdong Province. On May 20, 2021, an oropharyngeal swab from a 44year-old male (Case A) tested preliminarily positive for COVID-19 by a quantitative real-time reverse transcription polymerase chain reaction (RT-qPCR) method in a third-party laboratory. On May 21, 2021, types of specimens (nasopharyngeal swab, oropharyngeal swab, and anal swab) from this case were collected by Yantian CDC and were confirmed positive for COVID-19 virus by a RT-qPCR method simultaneously implemented in two commercial kits (Daan, Guangzhou, China and Bojie, Shanghai, China) in the virology laboratory of Shenzhen CDC (Table 1). Then, screening was initiated for employees from the Yantian Port and close contacts. A total of 5 cases were confirmed with COVID-19 infections between May 22, 2021 and May 24, 2021 (Table 1). These cases were transported immediately to the Shenzhen Third People's Hospital for isolated treatment by ambulance after COVID-19 virus infection was confirmed. Specimens from the cases above collected by the Shenzhen Third People's Hospital were sent to the virology laboratory of Shenzhen CDC for discharge assessment.

High-throughput sequencing was performed for six COVID-19 virus strains from this study. First, viral RNA was extracted directly from 200-μL swab samples with the lowest Ct value in RT-qPCR tests using a High Pure Viral RNA Kit (Roche, Germany). Second, libraries were prepared using a Nextera® XT Library Prep Kit (Illumina, USA), and the resulting DNA libraries were sequenced on a MiSeq platform (Illumina) using a 300-cycle reagent kit (1). Last, mapped assemblies were generated using the COVID-

19 virus/SARS-CoV-2 reference sequence Wuhan-Hu-1 (GenBank no. NC\_045512.2). Nucleotide (nt) and amino acid (AA) differences between the six virus genome sequences from this study and the reference sequence Wuhan-Hu-1 were analyzed using the programs BioEdit 7.19 and MEGA version7 (2).

The 6 strains from Case A, Case B, Case C, Case D, Case E, and Case F were designated as hCoV-19/ hCoV-19/Guang Guangdong/IVDC-05-01-2/2021, dong/IVDC-05-02-2/2021, hCoV-19/Guangdong/ IVDC-05-03/2021, hCoV-19/Guangdong/IVDC-05-04/2021, hCoV19/Guangdong/IVDC-05-05/2021, and hCoV-19/Guangdong/IVDC-05-06/2021, respectively, in this study. The genome sequences of these 6 strains were 29,844 nt, 29,867nt, 29,808 nt, 29,846 nt, 29,760 nt, and 29,832nt in length, respectively. Based on the "Pango lineages" rule (3), the 6 virus strains from this study were assigned to lineage B.1.1.7, which was also known as Variant of Concern 202012/01 (VOC-202012/01) or 20B/501Y.V1. The lineage B.1.1.7 was first identified in the UK in September 2020 and had 24 characteristic mutations (ORF1a: T1001I, A1708D, I2230T, del3675-3677; ORF1b: P314L; S: del69/70, del144, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H; ORF8:Q27stop, R52I, Y73C; N: D3L, R203K, G204R, S235F).

Compared with the reference genome sequence (hCoV-19/Guangdong/ Wuhan-Hu-1, 5 strains IVDC-05-01-2/2021, hCoV-19/Guangdong/IVDC-05-02-2/2021, hCoV-19/Guangdong/IVDC-05-03/2021, hCoV-19/Guangdong/IVDC-05-04/2021, hCoV-19/Guangdong/IVDC-05-06/2021) and displayed 38 nucleotide variation sites (C241T, C643T, C913T, C2536T, A2784G, C3037T, C3267T, C5388A, C5986T, T6954C, C7851T, G13975T, C14408T, C14676T, T15096C, C15279T, T16176C, C17430T, G17944T,

TABLE 1. Demographic characteristics of the cases and specimen testing information.

| Case   | Age (year) | Date of first positivedetection of COVID-19 virus | Ct value (ORF1ab/N) by RT-qPCR  |  |             |
|--------|------------|---|---|--|-------------|
|        |            |   | Specimen type   | Daan   | Bojie       |
|        |            |   | Nasopharyngeal swab   | 17/20  | 18/19       |
| Case A | 44         | May 21, 2021                                      | Oropharyngeal swab  | 19/22  | 20/22       |
|        |            |   | Anal swab   | 40/37  | Undet/36    |
|        |            |   | 9 virus     Specimen type     Da       Nasopharyngeal swab     17/<br>Oropharyngeal swab     19/<br>Anal swab       Anal swab     40/<br>Nasopharyngeal swab     18/<br>Oropharyngeal swab       Anal swab     37/<br>Nasopharyngeal swab     25/<br>Oropharyngeal swab       Anal swab     Undet       Nasopharyngeal swab     37/<br>Oropharyngeal swab     37/<br>Oropharyngeal swab       Anal swab     Undet       Nasopharyngeal swab     22/<br>Anal swab       Anal swab     Undet       Nasopharyngeal swab     22/<br>Anal swab       Anal swab     Undet       Nasopharyngeal swab     24/<br>Anal swab       Nasopharyngeal swab     17/<br>Anal swab | 18/16  | 17/18       |
| Case B | 46         | May 22, 2021                                      | Oropharyngeal swab  | 23/20  | 22/23       |
|        |            |   | Anal swab   | 37/35  | Undet/37    |
|        |            |   | Nasopharyngeal swab   | 18/16 swab 23/20 37/35 swab 25/20 swab 35/30 Undet/Undet swab 37/34 swab 31/26 | 21/22       |
| Case C | 49         | May 23, 2021                                      | Oropharyngeal swab  | 35/30  | 30/31       |
|        |            |   | Anal swab   | Undet/Undet  | Undet/Undet |
|        |            |   | Nasopharyngeal swab   | 37/34  | 32/34       |
| Case D | 48         | May 23, 2021                                      | Oropharyngeal swab  | 31/26  | 27/28       |
|        |            |   | Anal swab   | Undet/Undet  | Undet/Undet |
| C F    | 33         | May 23, 2021                                      | Nasopharyngeal swab   | 22/16  | 19/19       |
| Case E |            |   | Anal swab   | Undet/Undet  | Undet/Undet |
|        |            |   | Nasopharyngeal swab   | 17/16  | 16/17       |
| Case F | 44         | May 24, 2021                                      | Oropharyngeal swab  | 37/33  | 34/34       |
|        |            |   | Anal swab   | 39/34  | Undet /35   |

Note: All the reported cases were male. The reported Ct value was the lowest value of several tests as of May 27, 2021. Abbreviations: Undet=Undetected; RT-qPCR=quantitative real-time reverse transcription PCR.

| G21578T,   | A23063T, | C23271A, | A23403G, |  |  |  |  |  |
|--|----------|----------|----------|--|--|--|--|--|
| C23604A,   | C23709T, | T24506G, | G24914C, |  |  |  |  |  |
| C27972T,   | G28048T, | A28111G, | G28280C, |  |  |  |  |  |
| A28281T,   | T28282A, | G28739T, | G28881A, |  |  |  |  |  |
| G28882A, G28883C, and C28977T) and 18 deletion     |          |          |          |  |  |  |  |  |
| mutations (ORF1a: del11288-11296/TCTGGTTTT;        |          |          |          |  |  |  |  |  |
| S: del21766-21771/ACATGT, del21994-21996/          |          |          |          |  |  |  |  |  |
| TTA). Except for the mutations above, other two    |          |          |          |  |  |  |  |  |
| variation sites (ORF1a: C884T and S: A23898T) were |          |          |          |  |  |  |  |  |
| observed in genome of the strain hCoV-19/Guang     |          |          |          |  |  |  |  |  |
| dong/IVDC-05-05/2021 (Case E).                     |          |          |          |  |  |  |  |  |

By comparing deduced amino acid sequences, the 5 SARS-CoV-2 strains (hCoV-19/Guangdong/IVDC-05-01-2/2021, hCoV-19/Guangdong/IVDC-05-02hCoV-19/Guangdong/IVDC-05-03/2021, 2/2021, hCoV-19/Guangdong/IVDC-05-04/2021, and hCoV-19/Guangdong/IVDC-05-06/2021) displayed 24 AA variation sites (ORF1a: N840S, T1001I, A1708D, I2230T, A2529V; ORF1b: G170C, P314L, V1493L; S: V6F, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H; ORF8: Q27stop, R52I, Y73C; N: D3L, A156S, R203K, G204R, and S235F) and 6 deletion mutations (ORF1a: S3675del, G3675del, and F3677 del; S: H69del, V70del, and Y144del). Except for the mutations above, 2 other variation sites (ORF1a: R207C; S: Q779L) were observed in amino

acid sequence of the strain hCoV-19/Guangdong/IVDC-05-05/2021 (Case E). All of the characteristic mutations belonging to SARS-CoV-2 variant B.1.1.7 were found in genomes of the 6 SARS-CoV-2 strains from this study.

Whole-genome sequencing (WGS) confirmed that all SARS-CoV-2 strains from this study were VOC 202012/01-lineage B.1.1.7, suggesting a common source of exposure at the Yantian Port. SARS-CoV-2 lineage B.1.1.7 is of growing concern because it has shown to be significantly more transmissible than other variants (4–7). As of now, the 4 SARS-CoV-2 VOCs (B.1.1.7, B.1.351, P.1, and B.1.617.2) have been imported into mainland China (8–11). There is a high risk that imported SARS-CoV-2 VOCs may cause local outbreaks and epidemics.

In this study, we focused on laboratory testing and genome characterization of the pathogen. Detailed epidemiological investigation is essential in a follow-up report.

**Data availability:** The six SARS-CoV-2 genome sequences determined in this study have been deposited in GISAID (www.gisaid.org) under the accession numbers EPI\_ISL\_2405168, EPI\_ISL\_2405170, EPI\_ISL\_2405171, and EPI\_ISL\_2405172.

**Acknowledgements**: Yantian CDC and Shenzhen Third People's Hospital for specimen collection.

Conflicts of interest: No conflicts of interest.

Funding: Shenzhen Science and Technology Innovation Commission Key project JSGG20200225152648408) and the Shenzhen Science and Technology Innovation Commission COVID-19 Special Fund (No. JSGG20200207161926465), and Project of Medicine Shenzhen Sanming in (No.SZSM202011008).

doi: 10.46234/ccdcw2021.129

Submitted: June 04, 2021; Accepted: June 04, 2021

## REFERENCES

- Ma HL, Zhang JQ, Wang J, Qin Y, Chen C, Song Y, et al. COVID-19 outbreak caused by contaminated packaging of imported cold-chain products — Liaoning Province, China, July 2020. China CDC Wkly 2021;3(21):441 – 7. http://dx.doi.org/10.46234/ccdcw2021.114.
- 2. Kumar S, Stecher G, Tamura K. MEGA7: molecular evolutionary

- genetics analysis version 7.0 for bigger datasets. Mol Biol Evol 2016;33(7):1870 4. http://dx.doi.org/10.1093/molbev/msw054.
- 3. Rambaut A, Holmes EC, O'Toole Á, Hill V, McCrone JT, Ruis C, et al. A dynamic nomenclature proposal for SARS-CoV-2 lineages to assist genomic epidemiology. Nat Microbiol 2020;5(11):1403 7. http://dx.doi.org/10.1038/s41564-020-0770-5.
- Davies NG, Abbott S, Barnard RC, Jarvis CI, Kucharski AJ, Munday JD, et al. Estimated transmissibility and impact of SARS-CoV-2 lineage B.1.1.7 in England. Science 2021;372(6538):eabg3055. http://dx. doi.org/10.1126/science.abg3055.
- Volz E, Mishra S, Chand M, Barrett JC, Johnson R, Geidelberg L, et al. Assessing transmissibility of SARS-CoV-2 lineage B.1.1.7 in England. Nature 2021;593(7858):266 – 9. http://dx.doi.org/10.1038/s41586-021-03470-x.
- Davies NG, Jarvis CI, CMMID COVID-19 Working Group, Edmunds WJ, Jewell NP, Diaz-Ordaz K, et al. Increased mortality in community-tested cases of SARS-CoV-2 lineage B.1.1.7. Nature 2021;593(7858):270 – 4. http://dx.doi.org/10.1038/s41586-021-034 26-1.
- Grabowski F, Preibisch G, Giziński S, Kochańczyk M, Lipniacki T. SARS-CoV-2 variant of concern 202012/01 has about twofold replicative advantage and acquires concerning mutations. Viruses 2021;13(3):392. http://dx.doi.org/10.3390/v13030392.
- 8. Chen HY, Huang XY, Zhao X, Song Y, Hao P, Jiang H, et al. The first case of new variant COVID-19 originating in the United Kingdom detected in a returning student—Shanghai Municipality, China, December 14, 2020. China CDC Wkly 2021;3(1):1 3. http://dx.doi.org/10.46234/ccdcw2020.270.
- Cheng C, Wang L, Lyu Z, Peng B, Li YH, Kong DF, et al. Four COVID-19 cases of new variant B.1.351 first emerging in South Africa in Chinese passengers on same flight — Shenzhen, China, January 2021. China CDC Wkly 2021;3(8):175 - 7. http://dx.doi.org/10. 46234/ccdcw2021.049.
- Ye S, Zhang YJ, Zhao X, Yu Z, Song Y, Tan ZP, et al. Emerging variants of B.1.617 lineage identified among returning Chinese employees working in India Chongqing Municipality, China, April 2021. China CDC Wkly 2021;3(19):409 10. http://dx.doi.org/10.46234/ccdcw2021.109.
- Hu Y, Zhao X, Song Y, Li ZC, Kang M, Deng XL, et al. Two imported cases of new variant COVID-19 first emerging from Brazil Guangdong Province, China, April 30, 2021. China CDC Wkly 2021;3(21):456 8. http://dx.doi.org/10.46234/ccdcw2021.110.

<sup>&</sup>lt;sup>#</sup> Corresponding authors: Long Chen, chen\_l\_2011@163.com; Xuan Zou, 914494557@qq.com; Tiejian Feng, fengtiej@126.com.

<sup>&</sup>lt;sup>1</sup> Shenzhen Center for Infectious Disease Control and Prevention, Chinese Academy of Medical Sciences, Shenzhen, Guangdong Province, China; <sup>2</sup> Institute of Pathogen Biology, Shenzhen Center for Disease Control and Prevention, Shenzhen, Guangdong Province, China; <sup>3</sup> National Institute for Viral Disease Control and Prevention, Chinese Center for Disease Control and Prevention, Beijing, China; <sup>4</sup> Laboratory of Molecular Epidemiology, Shenzhen Center for Disease Control and Prevention, Shenzhen, Guangdong Province, China; <sup>5</sup> Department of Communicable Diseases Control and Prevention, Shenzhen, Guangdong Province, China; <sup>6</sup> Shenzhen Center for Disease Control and Prevention, Shenzhen, Guangdong Province, China; <sup>6</sup> Shenzhen Center for Disease Control and Prevention, Shenzhen, Guangdong Province, China. <sup>&</sup>