

1 **TITLE PAGE**

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3 **Full-length title:**

4 **Emergence in Southern France of a new SARS-CoV-2 variant of probably Cameroonian**
5 **origin harbouring both substitutions N501Y and E484K in the spike protein**

6

7 **Short title (for the running head):**

8 **A new SARS-CoV-2 variant with spike substitutions N501Y and E484K**

9

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NOTE: This preprint reports new research that has not been certified by peer review and should not be used to guide clinical practice.

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ABSTRACT

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SARS-CoV-2 variants have become a major virological, epidemiological and clinical concern, particularly with regard to the risk of escape from vaccine-induced immunity. Here we describe the emergence of a new variant. For twelve SARS-CoV-positive patients living in the same geographical area of southeastern France, qPCR testing that screen for variant-associated mutations showed an atypical combination. The index case returned from a travel in Cameroon. The genomes were obtained by next-generation sequencing with Oxford Nanopore Technologies on GridION instruments within ≈ 8 h. Their analysis revealed 46 mutations and 37 deletions resulting in 30 amino acid substitutions and 12 deletions. Fourteen amino acid substitutions, including N501Y and E484K, and 9 deletions are located in the spike protein. This genotype pattern led to create a new Pangolin lineage named B.1.640.2, which is a phylogenetic sister group to the old B.1.640 lineage renamed B.1.640.1. Both lineages differ by 25 nucleotide substitutions and 33 deletions. The mutation set and phylogenetic position of the genomes obtained here indicate based on our previous definition a new variant we named “IHU”. These data are another example of the unpredictability of the emergence of SARS-CoV-2 variants, and of their introduction in a given geographical area from abroad.

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TEXT

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55 SARS-CoV-2 has emerged in China in December 2019 and has been declared a
56 pandemic 21 months ago [1]. We have shown since the summer of 2020 that several SARS-
57 CoV-2 variants have emerged in our geographical area and caused distinct epidemics, either
58 successive or superimposed [2,3]. In addition, we described that the origin of these variants
59 was often their introduction from abroad but could also be mink. This was observed by
60 genotyping, as of 09/12/2021, SARS-CoV-2 from almost 40,000 patients using next-
61 generation sequencing (NGS) of complete genomes for more than 22,000 patients and
62 implementing multiple qPCR specific of each variant for a more exhaustive assessment of
63 their spread. Since then and with the emergence of the Alpha variant at the end of 2020,
64 SARS-CoV-2 variants have become a major virological, epidemiological, and clinical
65 concern, particularly with regard to the risk of escape from vaccine-induced immunity [4-7].
66 Here we describe the emergence in south-eastern France of a new variant of probably
67 Cameroonian origin.

68

69 The index case was an adult first diagnosed as infected with SARS-CoV-2 by real-
70 time reverse transcription PCR (qPCR) performed in a private medical biology laboratory on
71 a nasopharyngeal sample collected mid-November 2021 (Table 1). He was vaccinated against
72 SARS-CoV-2 and returned from a travel to Cameroon three days before. He developed mild
73 respiratory symptoms the day before diagnosis. He lives in a small town of southeastern
74 France. Subsequent detection by qPCR of three mutations in the spike gene to screen for
75 variants, as systematically performed in France in case of SARS-CoV-2 positivity, revealed
76 an atypical combination with L452R-negativity, E484K-positivity, and E484Q-negativity
77 (Pentaplex assay, ID Solution, France) that did not correspond to the pattern of the Delta

78 variant involved in almost all SARS-CoV-2 infections at that time (Table 1). Respiratory
79 samples collected from seven other SARS-CoV-2-positive patients living in the same
80 geographical area exhibited the same combination of mutations screened by qPCR. They were
81 two adults and five children (<15 years of age) (Table 1). The respiratory samples from these
82 eight patients were sent to university hospital institute Méditerranée Infection for SARS-CoV-
83 2 genome sequencing as recommended by French public health authorities. A rapid NGS
84 procedure was launched overnight. It allowed obtaining SARS-CoV-2 genotype identification
85 in \approx 8 hours. Briefly, viral RNA was extracted from 200 μ L of nasopharyngeal swab fluid
86 using the KingFisher Flex system (Thermo Fisher Scientific, Waltham, MA, USA) following
87 the manufacturer's instructions. Extracted RNA was reverse-transcribed using SuperScript IV
88 (Thermo Fisher Scientific) and cDNA second strand was synthesized with LunaScript RT
89 SuperMix kit (New England Biolabs) then amplified using a multiplex PCR protocol
90 according to the ARTIC procedure (<https://artic.network/>) with ARTIC nCoV-2019 V3 panel
91 of primers (IDT, Coralville, IA, USA). Finally, NGS was performed with the ligation
92 sequencing kit and a GridION instrument of Oxford Nanopore Technologies (Oxford, UK)
93 following manufacturer's instructions. Subsequently, fastq files were processed using the
94 ARTIC field bioinformatics pipeline (<https://github.com/artic-network/fieldbioinformatics>).
95 NGS reads were basecalled using Guppy (4.0.14) and aligned to the Wuhan-Hu-1 reference
96 genome GenBank accession no. MN908947.3 using minimap2 (v2.17-r941)
97 (<https://github.com/lh3/minimap2>) [8]. The ARTIC tool align_trim was used to softmask
98 primers from read alignment and to cap sequencing depth at a maximum of 400. The
99 identification of consensus-level variant candidates was performed using the Medaka (0.11.5)
100 workflow developed by ARTIC (<https://github.com/artic-network/artic-ncov2019>). This
101 strategy allowed assembling the complete genome from NGS reads obtained within 30 min
102 of run for cycle threshold values (Ct) of qPCR comprised between 15 and 27. SARS-CoV-2

103 genomes were classified into Nextclade and Pangolin lineages using web applications
104 (<https://clades.nextstrain.org/>;<https://cov-lineages.org/pangolin.html>) [10,11,13]. They were
105 deposited in the GISAID sequence database (<https://www.gisaid.org/>) [14] (Table 1).
106 Phylogenies were reconstructed with the nextstrain/ncov tool
107 (<https://github.com/nextstrain/ncov>) then visualized with Auspice
108 (<https://docs.nextstrain.org/projects/auspice/en/stable/>).

109 The analysis of viral genomes revealed the presence of 46 nucleotide substitutions and
110 37 deletions, resulting in 30 amino acid substitutions and 12 deletions (Figure 1a;
111 Supplementary Tables S1 and S2). Fourteen amino acid substitutions and 9 amino acid
112 deletions are located in the spike protein. Substitutions N501Y and E484K are combined as in
113 the Beta, Gamma, Theta and Omicron variants [5,15]. Substitution F490S is present as in the
114 Lambda variant, and substitution P681H is present as in the Lambda and Omicron variants. In
115 other structural proteins than the spike, amino acid changes include two substitutions in the
116 nucleocapsid protein and one in the membrane protein. In non-structural proteins, amino acid
117 changes include one substitution in proteins Nsp2, Nsp3, Nsp4, Nsp6, Nsp12 (RNA-
118 dependent RNA polymerase), and Nsp13 (helicase); two substitutions in Nsp14 (3'-
119 5'exonuclease); four substitutions in Nsp8 (which is part of the replication complex with
120 Nsp7 and Nsp12); and three deletions in Nsp6. Finally, in regulatory proteins, amino acid
121 changes include four substitutions in ORF3a, one in ORF9b and one in ORF8. In addition,
122 codon 27 of ORF8 gene is changed into a stop codon, as in the Alpha variant [16]; some
123 members of the Marseille-4 variant (B.1.160) that predominated in our geographical area
124 between August 2020 and February 2021 also exhibit a stop codon in ORF8 gene but at
125 another position [3].

126 Nextclade identified a 20A lineage. Pangolin identified a B.1.640 lineage in primary
127 analysis but a B.1 lineage with the -usher (Ultrafast Sample placement on Existing tRee;

128 <https://genome.ucsc.edu/cgi-bin/hgPhyloPlace>) option, which showed the phylogenetic
129 placement of the genomes we obtained as an outgroup of the B.1.640 lineage and their
130 clustering with a genome obtained late October in France (Ile-de-France)
131 (EPI_ISL_5926666). The B.1.640 lineage corresponds to a variant first identified in France in
132 April 2021, in Indonesia in August 2021, and in Republic of the Congo (Brazzaville) in
133 September 2021, and it was involved in a cluster of cases in Brittany, France around mid-
134 October 2021 [17]. As of 09/12/2021, 157 genomes were available from the GISAID database
135 including 92 from France and 36 from the Republic of the Congo. The sets of spike mutations
136 of the B.1.640 lineage and of genomes obtained here are similar, with 11 common nucleotide
137 substitutions and 1 common deletion of 9 codons (Supplementary Figure S1, Tables S1-2).
138 However, spike genes of both lineages differ by 7 mutations. In addition, 25 nucleotide
139 substitutions and 33 nucleotide deletions located elsewhere in the genomes differ between the
140 two genotypes. The pattern of mutations of present genomes hence indicates a new variant,
141 which we named “IHU” (in reference to our institute), based on our previous definition [3].
142 Phylogeny performed with nextstrain/ncov tool (<https://github.com/nextstrain/ncov>) also
143 showed that B.1.640 and IHU variants were most closely related between each other but
144 comprised two divergent branches (Figure 1b). Their last common ancestor is estimated to
145 date from January 2021 but no genome is currently available from GISAID that corresponds
146 to it. Accordingly, a new Pangolin clade corresponding to the IHU variant was created on
147 07/12/2021 that was named B.1.640.2, the old B.1.640 clade being renamed B.1.640.1
148 (<https://github.com/cov-lineages/pango-designation/issues/362>). It encompasses present
149 genomes and three other genomes comprising a sister group including the one recovered late
150 October 2021 in France (Ile-de-France) (EPI_ISL_5926666) and two additional genomes
151 obtained from samples collected late November in England (EPI_ISL_7181977) and Wales
152 (EPI_ISL_7402094). As the index case was probably infected with the IHU variant during his

153 stay in Cameroon, we sought for this variant in GISAID among genomes from this country
154 but as of 09/12/2021 none of the 556 available genomes belong to the B.1.640.1 or B.1.640.2
155 lineages.

156 We analyzed a complete structure of the spike protein of the IHU variant generated by
157 incorporating its specific mutational profile to the original 20B SARS-CoV-2 (Wuhan-Hu-1
158 isolate with D614G substitution) [18] and fixing all gaps in the pdb file by incorporating the
159 missing amino acids with the Robetta protein structure prediction tool
160 [<https://robetta.bakerlab.org/>], followed by energy minimization with the Polak-Ribière
161 algorithm as previously reported (Figure 1c) [19]. In the N-terminal domain (NTD), the 134-
162 145 amino acid deletion is predicted to significantly affect the neutralizing epitope. Other
163 changes involve amino acids at positions 96 and 190: in Wuhan-Hu-1 isolate, E96 and R190
164 induce a turn in NTD secondary structure through electrostatic interactions between each
165 other. This interaction is conserved between substituted amino acids 96Q and 190S, which
166 suggests the co-evolution of these changes. In the receptor binding domain (RBD), aside the
167 well-known substitutions N501Y and E484K, several changes were predicted to significantly
168 affect the neutralizing epitopes. Particularly, P681H is located in the cleavage site of S1-S2
169 subunits of the spike and is observed in other variants including the recently emerging
170 Omicron [15]. Besides, D1139H substitution implies an amino acid involved in the fusion
171 between the virus and the infected cell. Also, D614G is combined with T859N in the IHU
172 variant. Interestingly, in the Wuhan-Hu-1 isolate, amino acids D614 and T859 from two
173 subunits of the trimeric spike are face to face and lock the trimer in a closed conformation.
174 Substitution D614G allows unlocking the trimer conformation, but this is predicted to be still
175 easier in case of additional presence of substitution T859N.

176 Respiratory samples collected until end of November 2021 from four other SARS-
177 CoV-2 positive patients living in the same city or borough than the index case could be

178 identified as containing the IHU variant by NGS within 24 hours after their reception (Table
179 1). All 12 IHU variant-positive samples showed the same combination of spike mutations as
180 screened by real-time qPCR techniques: negativity for 452R and 484Q; positivity for 484K,
181 501Y [20], and 681H [3]. We also used the TaqPath COVID-19 kit (Thermo Fisher Scientific,
182 Waltham, USA) that provided positive signals for all three genes targeted (ORF1, S, and N).
183 Thus, the IHU variant can be distinguished by screening with qPCR assays from the Delta
184 (L452R-positive) and Omicron (L452R-negative and negative for S gene detection by the
185 TaqPath COVID-19 assay) variants that currently co-circulate in our geographical area.
186 Finally, scanning electron microscopy using a SUV 5000 microscope (Hitachi High-
187 Technologies Corporation, Tokyo, Japan) [21] allowed a quick visualization of the virus from
188 a respiratory sample (Figure 1d).

189
190 Overall, these observations show once again the unpredictability of the emergence of
191 new SARS-CoV-2 variants and their introduction from abroad, and they exemplify the
192 difficulty to control such introduction and subsequent spread. They also warrant the
193 implementation of genomic surveillance of SARS-CoV-2 that we started from the very
194 beginning of the pandemic in our geographical area as soon as we diagnosed the first SARS-
195 CoV-2 infection [21] and that we expanded during summer 2020 [2,3]. This surveillance has
196 been implemented at the country scale in 2021 through the French Emergen consortium
197 (<https://www.santepubliquefrance.fr/dossiers/coronavirus-covid-19/consortium-emergen>). It is
198 too early to speculate on virological, epidemiological or clinical features of this IHU variant
199 based on these 12 cases. For this purpose, respiratory samples from infected patients were
200 inoculated on Vero E6 cells as previously described [22] to be able assessing the sensibility to
201 neutralization by anti-spike antibodies elicited by vaccine immunization, or by prior infection
202 [23].

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204

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211

212 **Author contributions**

213 Conceived and designed the experiments: PC, DR, JF, BLS. Contributed materials/analysis

214 tools: PC, JDe, EB, JDa, AJ, FF, NY, JF. Analyzed the data: PC, DR, BLS, JD, EB, JF, NY.

215 Wrote the paper: PC, JF, DR. All authors approved the last version of the manuscript.

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224

225 **Conflicts of interest**

226 DR has a conflict of interest being a consultant for Hitachi High-Technologies Corporation,

227 Tokyo, Japan from 2018 to 2020. All other authors have no conflicts of interest to declare.

228 Funding sources had no role in the design and conduct of the study; collection, management,
229 analysis, and interpretation of the data; and preparation, review, or approval of the
230 manuscript.

231

232 **Ethics**

233 This study has been approved by the ethics committee of University Hospital Institute (IHU)
234 Méditerranée Infection (N°2021-029). Access to the patients' biological and registry data
235 issued from the hospital information system was approved by the data protection committee
236 of Assistance Publique-Hôpitaux de Marseille (APHM) and was recorded in the European
237 General Data Protection Regulation registry under number RGPD/APHM 2019-73.

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REFERENCES

241

- 242 1. Cucinotta D, Vanelli M (2020) WHO Declares COVID-19 a Pandemic. *Acta Biomed*
243 91: 157-160.
- 244 2. Colson P, Levasseur A, Delerce J, Chaudet H, Bossi V, Ben Khedher M, Fournier PE,
245 Lagier JC, Raoult D (2020) Dramatic increase in the SARS-CoV-2 mutation rate and
246 low mortality rate during the second epidemic in summer in Marseille. *IHU pre-prints*
247 <https://doi.org/10.35088/68c3-ew82> (accessed 10 December 2021).
- 248 3. Colson P, Fournier PE, Chaudet H, Delerce J, Giraud-Gatineau A, Houhamdi L,
249 Andrieu C, Brechard L, Bedotto M, Prudent E, Gazin C, Beye M, Burel E, Dudouet P,
250 Tissot-Dupont H, Gautret P, Lagier JC, Million M, Brouqui P, Parola P, Drancourt M,
251 La Scola B, Levasseur A, Raoult D (2021) Analysis of SARS-CoV-2 variants from
252 24,181 patients exemplifies the role of globalisation and zoonosis in pandemics.
253 *medRxiv* doi: <https://doi.org/10.1101/2021.09.10.21262922> (accessed 10 December
254 2021).
- 255 4. Hastie KM, Li H, Bedinger D, Schendel SL, Dennison SM, Li K, Rayaprolu V, Yu X,
256 Mann C, Zandonatti M, Diaz Avalos R, Zyla D, Buck T, Hui S, Shaffer K, Hariharan C,
257 Yin J, Olmedillas E, Enriquez A, Parekh D, Abraha M, Feeney E, Horn GQ; CoVIC-
258 DB team1, Aldon Y, Ali H, Aracic S, Cobb RR, Federman RS, Fernandez JM, Glanville
259 J, Green R, Grigoryan G, Lujan Hernandez AG, Ho DD, Huang KA, Ingraham J, Jiang
260 W, Kellam P, Kim C, Kim M, Kim HM, Kong C, Krebs SJ, Lan F, Lang G, Lee S,
261 Leung CL, Liu J, Lu Y, MacCamy A, McGuire AT, Palser AL, Rabbitts TH,
262 Rikhtegaran Tehrani Z, Sajadi MM, Sanders RW, Sato AK, Schweizer L, Seo J, Shen
263 B, Snitselaar JL, Stamatatos L, Tan Y, Tomic MT, van Gils MJ, Youssef S, Yu J, Yuan
264 TZ, Zhang Q, Peters B, Tomaras GD, Germann T, Saphire EO (2021) Defining variant-

- 265 resistant epitopes targeted by SARS-CoV-2 antibodies: A global consortium study.
266 Science 374: 472-478.
- 267 5. Harvey WT, Carabelli AM, Jackson B, Gupta RK, Thomson EC, Harrison EM, Ludden
268 C, Reeve R, Rambaut A (2021) COVID-19 Genomics UK (COG-UK) Consortium,
269 Peacock SJ, Robertson DL. SARS-CoV-2 variants, spike mutations and immune escape.
270 Nat Rev Microbiol 19: 409-424.
- 271 6. Tao K, Tzou PL, Nouhin J, Gupta RK, de Oliveira T, Kosakovsky Pond SL, Fera D,
272 Shafer RW (2021) The biological and clinical significance of emerging SARS-CoV-2
273 variants. Nat Rev Genet 22: 757-773.
- 274 7. Wilder-Smith A (2021) What is the vaccine effect on reducing transmission in the
275 context of the SARS-CoV-2 delta variant? Lancet Infect Dis S1473-3099(21)00690-3.
276 doi: 10.1016/S1473-3099(21)00690-3. Epub ahead of print. PMID: 34756187; PMCID:
277 PMC8554481.
- 278 8. Li H (2018). Minimap2: pairwise alignment for nucleotide sequences. Bioinformatics
279 34: 3094-3100.
- 280 9. Li H, Handsaker B, Wysoker A, Fennell T, Ruan J, Homer N, Marth G, Abecasis G,
281 Durbin R, 1000 Genome Project Data Processing Subgroup (2009). The Sequence
282 Alignment/Map format and SAMtools. Bioinformatics 25: 2078-2079.
- 283 10. Hadfield J, Megill C, Bell SM, Huddleston J, Potter B, Callender C, Sagulenko P,
284 Bedford T, Neher RA (2018). Nextstrain: real-time tracking of pathogen evolution.
285 Bioinformatics 34: 4121-4123.
- 286 11. Aksamentov I, Roemer C, Hodcroft EB, Neher RA (2021). Nextclade: clade
287 assignment, mutation calling and quality control for viral genomes. Zenodo
288 <https://doi.org/10.5281/zenodo.5607694>.

- 289 12. Garrison E, Marth G (2012). Haplotype-based variant detection from short-read
290 sequencing. arXiv.org. <https://arxiv.org/abs/1207.3907> (accessed 10 December 2021).
- 291 13. Rambaut A, Holmes EC, O'Toole \tilde{A} , Hill V, McCrone JT, Ruis C, du Plessis L, Pybus
292 OG (2020). A dynamic nomenclature proposal for SARS-CoV-2 lineages to assist
293 genomic epidemiology. *Nat. Microbiol* 5: 1403-1407.
- 294 14. Alm E, Broberg EK, Connor T, Hodcroft EB, Komissarov AB, Maurer-Stroh S,
295 Melidou A, Neher RA, O'Toole A, Pereyaslov D, WHO European Region sequencing
296 laboratories and GISAID EpiCoV group; WHO European Region sequencing
297 laboratories and GISAID EpiCoV group (2020) Geographical and temporal distribution
298 of SARS-CoV-2 clades in the WHO European Region, January to June 2020. *Euro.*
299 *Surveill* 25: 2001410.
- 300 15. Karim SSA, Karim QA (2021) Omicron SARS-CoV-2 variant: a new chapter in the
301 COVID-19 pandemic. *Lancet* 398: 2126-2128.
- 302 16. Rambaut A, Loman N, Pybus O, Barclay W, Barrett J, Carabelli A, Connor T, Peacock
303 T, Robertson DL, Volz E, on behalf of COVID-19 Genomics Consortium UK (CoG-
304 UK) (2020) Preliminary genomic characterisation of an emergent SARS-CoV-2 lineage
305 in the UK defined by a novel set of spike mutations. *Virological Pre-print*.
306 [https://virological.org/t/preliminary-genomic-characterisation-of-an-emergent-sars-cov-](https://virological.org/t/preliminary-genomic-characterisation-of-an-emergent-sars-cov-2-lineage-in-the-uk-defined-by-a-novel-set-of-spike-mutations/563)
307 [2-lineage-in-the-uk-defined-by-a-novel-set-of-spike-mutations/563](https://virological.org/t/preliminary-genomic-characterisation-of-an-emergent-sars-cov-2-lineage-in-the-uk-defined-by-a-novel-set-of-spike-mutations/563)
- 308 17. Le Page M (2021) New variant gains ground. *New Sci* 252: 8.
- 309 18. Benton DJ, Wrobel AG, Roustan C, Borg A, Xu P, Martin SR, Rosenthal PB, Skehel JJ,
310 Gamblin SJ (2021). The effect of the D614G substitution on the structure of the spike
311 glycoprotein of SARS-CoV-2. *Proc. Natl. Acad. Sci. U S A*. 118:e2022586118.

- 312 19. Fantini J, Yahi N, Azzaz F, Chahinian H (2021) Structural dynamics of SARS-CoV-2
313 variants: A health monitoring strategy for anticipating Covid-19 outbreaks. *J Infect* 83:
314 197-206.
- 315 20. Bedotto M, Fournier PE, Houhamdi L, Colson P, Raoult D (2021) Implementation of an
316 in-house real-time reverse transcription-PCR assay to detect the emerging SARS-CoV-2
317 N501Y variants. *J Clin Virol* 140: 104868.
- 318 21. Colson P, Lagier JC, Baudoin JP, Bou Khalil J, La Scola B, Raoult D (2020) Ultrarapid
319 diagnosis, microscope imaging, genome sequencing, and culture isolation of SARS-
320 CoV-2. *Eur J Clin Microbiol Infect Dis* 39: 1601-1603.
- 321 22. Wurtz N, Penant G, Jardot P, Duclos N, La Scola B (2021) Culture of SARS-CoV-2 in
322 a panel of laboratory cell lines, permissivity, and differences in growth profile. *Eur J*
323 *Clin Microbiol Infect Dis* 40: 477-484.
- 324 23. Jaafar R, Boschi C, Aherfi S, Bancod A, Le Bideau M, Edouard S, Colson P, Chahinian
325 H, Raoult D, Yahi N, Fantini J, La Scola B (2021) High individual heterogeneity of
326 neutralizing activities against the original strain and nine different variants of SARS-
327 CoV-2. *Viruses* 13: 2177.
- 328

329

FIGURE LEGENDS

330

331 **Figure 1. Virological features and scanning electron microscopy image of the SARS-**

332 **CoV-2 IHU variant**

333 a: Map of the IHU variant genome showing amino acid substitutions and deletions.

334 b: Phylogeny reconstruction performed using the nextstrain/ncov tool

335 (<https://github.com/nextstrain/ncov>) then visualized with Auspice

336 (<https://docs.nextstrain.org/projects/auspice/en/stable/>). The genome of the original Wuhan-

337 Hu-1 SARS-CoV-2 isolate (GenBank accession no. NC_045512.2) was added as outgroup, in

338 addition to SARS-CoV-2 genomes of Pangolin lineages B.1.640.1 and B.1.640.2. X-axis

339 shows time.

340 c: Representations of the spike of the IHU variant showing the location of all its amino acid

341 substitutions. N-terminal domain (NTD) mutations are in blue; receptor binding domain

342 (RBD) mutations are in red; mutations involved in ACE-2 unmasking are in yellow;

343 mutations at S1-S2 cleavage site are in green; mutations at fusion region are in cyan.

344 d: Scanning electron microscopy image obtained using a SUV 5000 microscope from a

345 respiratory sample positive for the SARS-CoV-2 IHU variant (Hitachi High-Technologies

346 Corporation, Tokyo, Japan).

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TABLES

350

351 **Table 1. Main epidemiological and virological features of cases identified with infection with the SARS-CoV-2 IHU variant**

Case no.	Age	Diagnostic qPCR Ct	Results of qPCR used to screen for the presence of SARS-CoV-2 spike substitutions	Results of the TaqPath COVID-19 qPCR assay (Targets: ORF1, S, and N genes)	Genome GISAID Id.
1 *	Adult	27	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7156955
2	Child	21	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7314302
3	Child	15	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7381031
4	Child	18	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7381062
5	Adult	15	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7156959
6	Adult	17	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7314417
7	Child	19	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7314514
8	Child	26	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-pos.; P681H-pos.	Pos. for all three genes	EPI_ISL_7314471
9	Adult	15	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-n.t.; P681H- n.t.	Pos. for all three genes	EPI_ISL_7552465
10	Adult	16	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-n.t.; P681H- n.t.	Pos. for all three genes	EPI_ISL_7552470
11	Adult	22	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-n.t.; P681H- n.t.	Pos. for all three genes	EPI_ISL_7552483
12	Adult	15	L452R-neg.; E484K-pos.; E484Q-neg.; N501Y-n.t.; P681H- n.t.	Pos. for all three genes	EPI_ISL_7601710

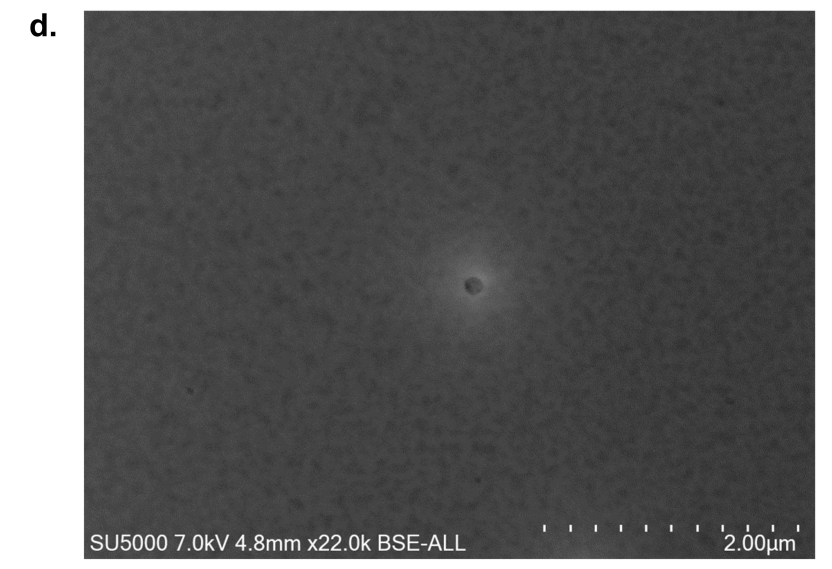
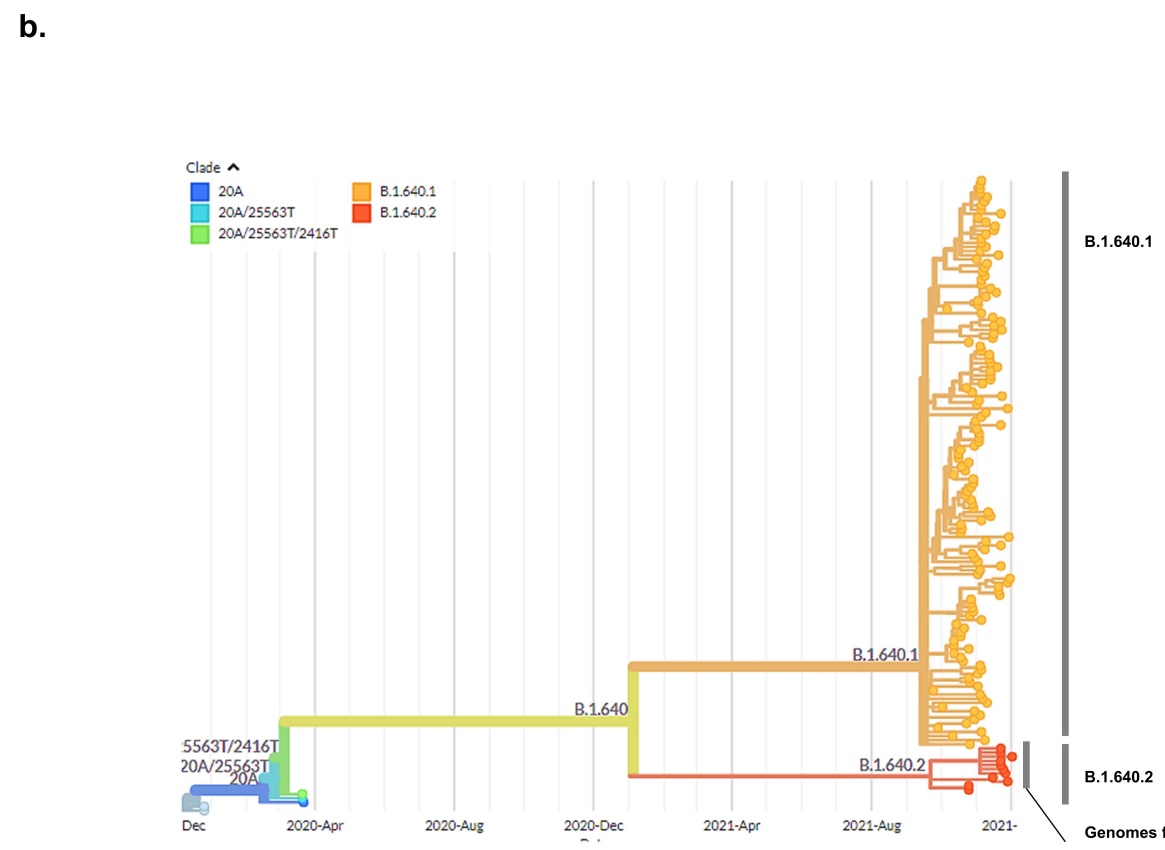
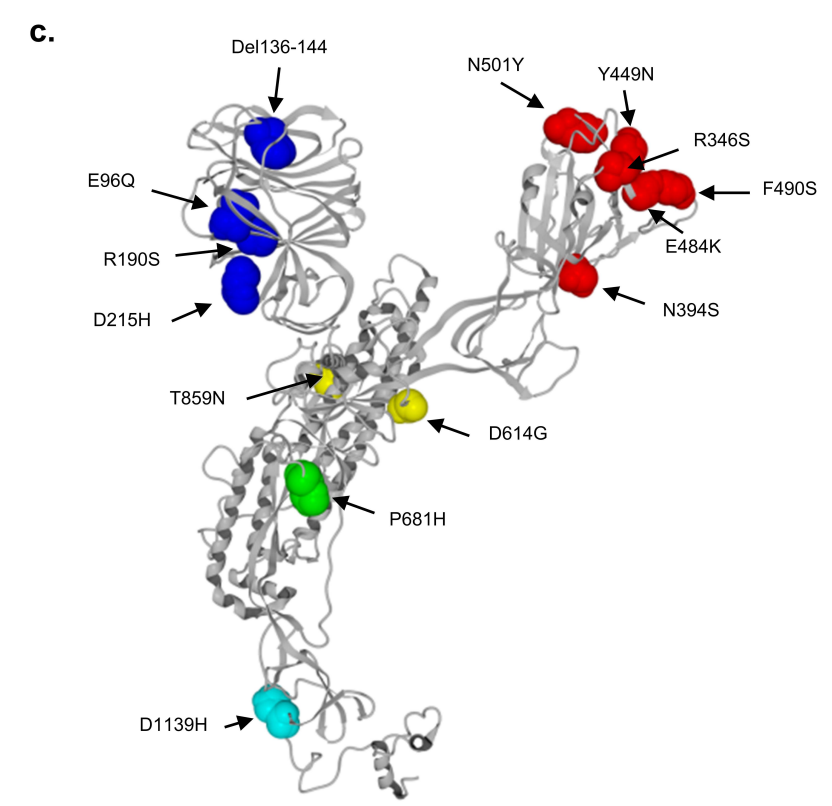
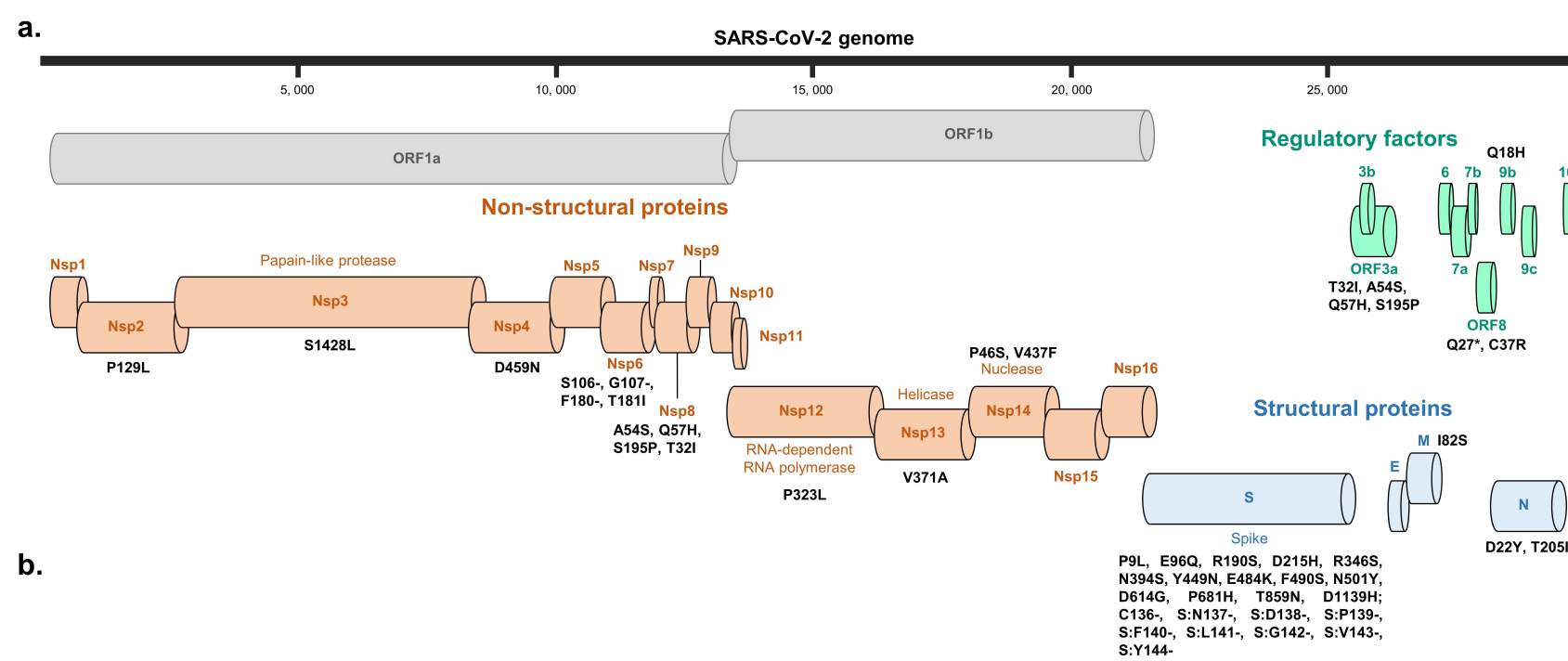
352 * Index case; travelled to Cameroon

353 Ct, cycle threshold; Id., identifier; neg., negative; N, nucleocapsid; no., number; n.t., not tested; ORF1, open reading frame 1; pos., positive;
354 qPCR, real-time reverse-transcription PCR; S, spike.

355 All 12 respiratory samples were collected between mid and end of November 2021.

356

357



SUPPLEMENTARY MATERIAL

1

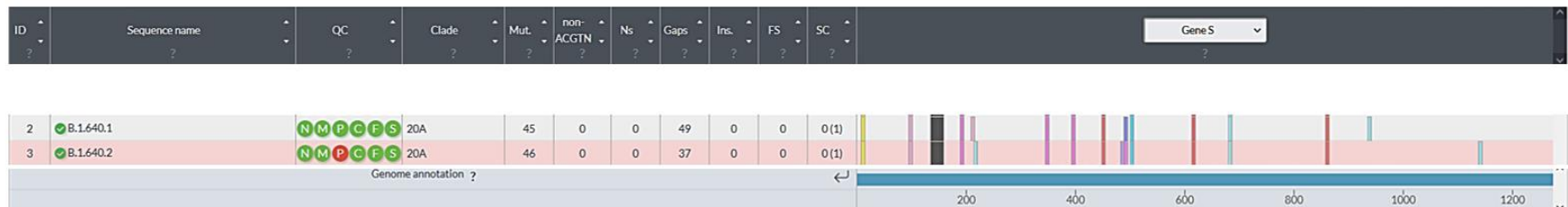
2

SUPPLEMENTARY FIGURE LEGENDS

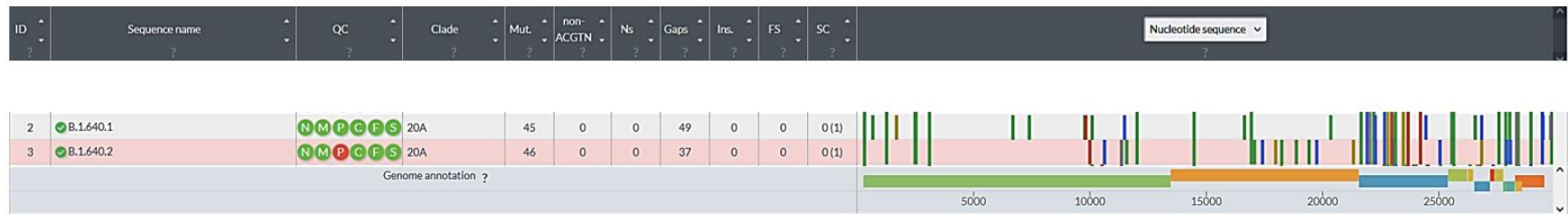
4

5 **Supplementary Figure S1. Microarray showing the distribution along the SARS-CoV-2 genome and in viral genes of nucleotide changes**
6 **observed in comparison with the genome of the Wuhan-Hu-1 isolate for the Pangolin B.1.640.1 and B.1.640.2 (IHU variant) lineages.**

a.



b.



7

8 Genomes were analyzed using the Nextstrain web-tool (<https://clades.nextstrain.org/>) [1,2]. Representation is adapted from Nextclade sequence
9 analysis web application output (<https://clades.nextstrain.org/>).

10 **SUPPLEMENTARY TABLES**

11

12 **Supplementary Table S1. Comparison of nucleotide mutational patterns of the B.1.640.1**

13 **and B.1.640.2 lineages**

B.1.640.1	B.1.640.2 (IHU variant)
C241T	C241T
C601T	-
C1191T	C1191T
A1620G	-
C2416T	C2416T
C2455T	C2455T
C3037T	C3037T
G6622T	-
G7328T	-
C9711T	-
G9756A	-
-	G9929A
C10029T	-
-	T10561C
-	Deletion 11288-11296
T11418C	-
-	C11514T
C11956T	C11956T
C14408T	C14408T
C16575T	-
C16869T	C16869T
-	C17004T
-	T17348C
-	A17916G
-	C18175T
-	C18804T
-	G19348T
-	T19680C
C20283T	-
-	A21258G
C21588T	C21588T
G21848C	G21848C
Deletion 21968-21994	Deletion 21968-21994
G22132T	G22132T
T22191C	-
-	G22205C
A22600C	A22600C
A22743G	A22743G
T22907A	T22907A
-	G23012A
T23030C	-
T23031G	T23031C
A23063T	A23063T
A23403G	A23403G
C23604A	C23604A
C24138A	C24138A
G24368C	-
-	G24977C
C25487T	C25487T
G25563T	G25563T
A26492T	-
T26767C	T26767G
C27513T	C27513T
C27807T	C27807T
-	T27833C
C27972T	C27972T
-	T28002C
Deletion 28271	Deletion 28271
T28297C	C28312T
G28337T	G28337T
C28887T	C28887T
T29377C	T29377C
G29405C	-
Deletion 29738-29758	-
G29779T	G29779T

14

15 Genomes were analyzed using the Nextstrain web-tool (<https://clades.nextstrain.org/>) [1,2].

16 Spike region is indicated by a grey background.

17

18 **Supplementary Table S2. Comparison of amino acid mutational patterns of the**

19 **B.1.640.1 and B.1.640.2 lineages**

B.1.640.1	B.1.640.2 (IHU variant)
M:I82T	M:I82S
N:D22Y	N:D22Y
N:T205I	N:T205I
N:E378Q	-
ORF1a:P309L	ORF1a:P309L
ORF1a:E452G	-
ORF1a:L2119F	-
ORF1a:A2355S	-
ORF1a:S3149F	-
ORF1a:R3164H	-
-	ORF1a:D3222N
ORF1a:T3255I	-
-	Deletions ORF1a:S3675-, ORF1a:G3676-, ORF1a:F3677-
ORF1a:V3718A	-
-	ORF1a:T3750I
ORF1b:P314L	ORF1b:P314L
-	ORF1b:V1294A
-	ORF1b:P1570S
-	ORF1b:V1961F
ORF3a:T32I	ORF3a:T32I
ORF3a:Q57H	ORF3a:Q57H
ORF8:Q27*	ORF8:Q27*
ORF9b:I5T	-
ORF9b:Q18H	-
-	ORF8:C37R
-	ORF9b:P10L
-	ORF9b:Q18H
S:P9L	S:P9L
S:E96Q	S:E96Q
Deletions S:C136-, S:N137-, S:D138-, S:P139-, S:F140-, S:L141-, S:G142-, S:V143-, S:Y144-	Deletions S:C136-, S:N137-, S:D138-, S:P139-, S:F140-, S:L141-, S:G142-, S:V143-, S:Y144-
S:R190S	S:R190S
S:I210T	-
-	S:D215H
S:R346S	S:R346S
S:N394S	S:N394S
S:Y449N	S:Y449N
-	S:E484K
S:F490R	S:F490S
S:N501Y	S:N501Y
S:D614G	S:D614G
S:P681H	S:P681H
S:T859N	S:T859N
S:D936H	-
-	S:D1139H

20

21 Genomes were analyzed using the Nextstrain web-tool (<https://clades.nextstrain.org/>) [1,2].

22 Spike region is indicated by a grey background.

23 **REFERENCES**

- 24 1. Hadfield J, Megill C, Bell SM, Huddleston J, Potter B, Callender C, Sagulenko P,
25 Bedford T, Neher RA (2018). Nextstrain: real-time tracking of pathogen evolution.
26 *Bioinformatics* 34: 4121-4123.
- 27 2. Aksamentov I, Roemer C, Hodcroft EB, Neher RA (2021). Nextclade: clade
28 assignment, mutation calling and quality control for viral genomes. Zenodo
29 <https://doi.org/10.5281/zenodo.5607694>.

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