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INTRODUCTION

Background

- SARS-CoV-2, responsible for the COVID-19 pandemic, has caused significant global morbidity and mortality.
- Enhanced genomic surveillance efforts since 2020 have noted the continued emergence of novel SARS-CoV-2 variants with mutations that confer selective advantage in hosts.
- CDC categorizes circulating variants as \bullet variants being monitored (VBM), variants of interest (VOI), variants of concern (VOC), and variants of high consequence (VOHC).
- Changing variant landscape is concerning and highlights the need for continued molecular monitoring of SARS-CoV-2 variants in order to understand the clinical and public health impact of COVID-19.

Objective

- To describe statewide genomic surveillance efforts and characterize circulating SARS-CoV-2 variants in Rhode Island (RI) from the start of the COVID-19 pandemic.
- (See QR codes at the lower right of the poster for published reports of the presented data).

METHODS

- Deidentified RI SARS-CoV-2 sequences since the first case in the state in 2/2020, generated at authors, other academic settings, CDC, and commercial laboratories, were extracted from https://www.gisaid.org.
- Genomic and phylogenetic analyses including quality control were conducted with standard tools and custom python scripts. Sequences were classified per CDC definitions.
- Specific mutations that are characteristic of the most recent VBM Delta and VOC Omicron were explored outside of their designated lineages.

the current CDC definitions. changing over time (Figure 2).

Delta, and Omicron variants, respectively (**Figure 3**).

variants **(Figure 4)**.

mutations are not exclusive to those specific variants (Figure 5).



Statewide Genomic Surveillance of SARS-CoV-2 Variants in Rhode Island

Enhanced statewide genomic surveillance allowed characterization of the RI variant landscape, capturing the clinical and public health impacts of COVID-19. SARS-CoV-2 has continued to evolve since its emergence, with or without epidemiologic impact, despite substantial scientific advances and mitigation efforts. • Most recently, the VOC Omicron has become the predominant lineage in RI, the United States, and globally, attributed to its increased transmissibility compared to previous SARS-CoV-2 variants. The impact of continued SARS-CoV-2 genomic and mutational evolution beyond Omicron on public health remains to be determined.

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| Table 1. SARS-CoV-2 VOC and VBM in RI | | | |
|---------------------------------------|----------------------|----------------------|------------------------------|
| | Country of Origin | Total Cases in RI | Range of Sampling Dates |
| and BA lineages) | South Africa | 5313 | Nov 30, 2021 to Apr 30, 2022 |
| tored | Country of Origin | Total Cases in RI | Range of Sampling Dates |
| d AY lineages) | India | 7567 | Apr 20, 2021 to Feb 04, 2022 |
| Q lineages) | UK | 1415 | Jan 19, 2021 to Jul 27, 2021 |
| ub-lineages) | South Africa | 7 | Mar 16, 2021 to May 25, 2021 |
| b-lineages) | Brazil | 286 | Mar 03, 2021 to Sep 27, 2021 |
| d B.1.429) | California, USA | 156 | Jan 06, 2021 to May 04, 2021 |
| | New York, USA | 57 | Feb 03, 2021 to Apr 27, 2021 |
| | New York, USA | 1051 | Jan 07, 2021 to Jun 28, 2021 |
| | India | 0 | - |
| | India | 0 | - |
| 1.1) | USA | 26 | May 22, 2021 to Aug 10, 2021 |
| | Brazil | 0 | - |

