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Delta-1 variant of SARS-COV-2 acquires spike V1264L and drives the pandemic in Indonesia, Singapore and Malaysia

Xiang-Jiao Yang (🖾 xiang-jiao.yang@mcgill.ca)

Rosalind and Morris Goodman Cancer Institute, Department of Medicine, McGill University, Montreal, Quebec, Canada

Research Article

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$\delta 1$ variant of SARS-COV-2 acquires spike V1264L and drives the pandemic in Indonesia, Singapore and Malaysia

Xiang-Jiao Yang^{1,2,3,4,*}

¹The Rosalind & Morris Goodman Cancer Institute, ²Department of Medicine and ³Department of Biochemistry, McGill University, Montreal, Quebec H3A 1A3, Canada ⁴Department of Medicine, McGill University Health Center, Montreal, Quebec H4A 3J1, Canada

*Corresponding contact: <u>xiang-jiao.yang@mcgill.ca</u>; Tel: 514-398-5883

ABSTRACT

Since April 2021, δ variant of SARS-COV-2 has gradually overtaken all other variants and become a dominant pandemic driver around the world. It has evolved and yielded four subvariants: $\delta 1$, $\delta 2$, $\delta 3$ and $\delta 4$. While trying to understand how these subvariants drive the pandemic in Southeast Asia, I noticed that many $\delta 1$ genomes from Indonesia encode an extra spike substitution, V1264L. Coincidentally, this confers an acidic dileucine motif because residues 1157-1262 are acidic and residue 1265 is leucine. Such a motif may affect subcellular trafficking of the resulting spike protein. Alarmingly, this V1264L-encoding $\delta 1$ subvariant (referred to as $\delta 1L$) has become the dominant pandemic driver in Indonesia, Singapore, Malaysia and East Timor. Moreover, it has acquired additional spike substitutions: L1234L in Singapore and D215Y/N in Malaysia. On the average, the resulting sublineages carry 46-48 mutations per genome, making them some of the most mutated variants identified so far. Moreover, a $\delta 1$ sublineage from the United Kingdom has acquired V1264L along with spike Y145H and A222V, a signature substitution of a SARS-COV-2 clade that was a major pandemic driver in Europe during the summer of 2020. A222V improves an extensive hydrophobic interaction network at the N-terminal domain of spike protein and may make this sublineage more virulent than $\delta 1$ and $\delta 1L$. Some $\delta 2$ subvariant genomes identified in the United States of America and other countries also encode V1264L. Thus, V1264L is a recurrent spike substitution frequently acquired by δ subvariants during convergent evolution. This recurrence also suggests that V1264L is one key mechanism by which δ variant adopts to expand its 'evolutionary cage.'

Running Title: Evolutionary cage of SARS-COV-2 Keywords: Coronavirus, virus entry, B.1.1.7, B.1.351, P.1, B.1.617.2, L452R, E484Q, P681R, endocytosis, AP2 receptor, clathrin, cytoplasmic tail

INTRODUCTION

Coronavirus disease 2019 (COVID-19) has caused the pandemic for almost two years, which has not only led to tragic loss of life but also crippled the economy around the world. Although successful development of multiple vaccines has brought great hope, we still do not know very little about where this pandemic is heading and when it will end. Thus, it is important to fully understand severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the culprit virus that causes this contagious disease [1]. Genomic surveillance has revealed that its evolution is key to driving waves of cases around the world. For genomic surveillance, the global initiative on sharing avian influenza data (GISAID) has played a critical role and as of October 10, 2021, over 4.25 million SARS-COV-2 genomes have been deposited into the database [2]. From the genomes, it is clear that the virus has yielded many variants, including four variants of concern as designated by the WHO: α (B.1.1.7) [3], β (B.1.351) [4], γ (P.1) [5] and δ (B.1.617.2) [6]. Astonishingly, these variants all emerged from complete obscurity and then rapidly rose to the status of major pandemic drivers. This raises two important questions: 1) how they have been evolving and 2) what future potential variants of concern will look like.

Related to these two questions, I wondered whether there are any simple rules that govern evolution of this virus. If so, such rules will help us predict its evolutionary trajectory and identify potential future variants of concern. Obviously, as the genetic material, the \sim 29,700-nucleotide viral genome is the key determinant. In theory, every nucleotide of this genome could be altered during SARS-COV-2 evolution. In reality, many such changes, however, are non-functional or even detrimental and thus offer no evolutionary advantage. As a result, just like what occurs with cancer mutations, only favorable or gain-of-function ones are selected during SARS-COV-2 evolution. In cancer biology, mutations are grouped into two categories, known as 'driver' and 'facilitator' mutations. A third category is 'passenger' mutations because they are apparently selected due to association with the first two categories. One thumb of rule is that 'driver' and 'facilitator' mutations are recurrent whereas 'passenger' mutations are often not. I reasoned that such concepts can be used to understand and annotate SARS-COV-2 mutations. I also envisaged that there are genomic elements limiting SARS-COV-2 evolution and such elements form an 'evolutionary cage' demarcating the space within or around which SARS-COV-2 evolves and generates new variants. I believe that the recurrent nature of 'driver' and 'facilitator' mutations will help identify the genomic elements and map out the shape of this invisible cage.

With these considerations as the simple guide, I have tracked genomes in the GISAID database closely. As a result, I have recently found that δ variant has evolved actively and yielded four subvariants (δ 1, δ 2, δ 3 and δ 4) in India [7]. Among them, δ 1 has emerged as the major pandemic driver and δ 2 plays a much less important role, whereas δ 3 and δ 4 have gradually faded away [7]. This emerging theme about δ variant is also true in Europe [7] and

the USA [8], with $\delta 1$ becoming almost the sole pandemic driver in the United Kingdom and Spain. Thus, a relevant question is how the four subvariants have contributed to the pandemic in other continents and countries around the world.

Related to this question, I tried to understand how the subvariants have driven the pandemic in Southeast Asia. I noticed that many $\delta 1$ genomes from Indonesia encode an extra spike substitution, V1264L, along with an extra NSP3 substitution (T678I). Alarmingly, this $\delta 1$ sublineage, $\delta 1L$, has become the predominant pandemic driver in Indonesia, Singapore, Malaysia and East Timor. Mechanistically, V1264L confers an acidic dileucine motif. This is significant as such motifs are known to regulate endocytosis and subcellular trafficking of membrane-associated receptors and viral envelope proteins [9-12]. Here, I describe how $\delta 1L$ has evolved and driven the pandemic in Southeast Asia, and demonstrate that V1264L has also been acquired by $\delta 1$ and $\delta 2$ subvariants identified in the United Kingdom and USA, respectively.

RESULTS AND DISCUSSION

$\delta 1$ and $\delta 2$ subvariants drive the pandemic in Indonesia

The epidemiological curve from Indonesia indicates that the country managed relatively well in 2020 (Fig. 1A). The first wave started at the end of 2020. The variant B.1.466.2 accounts for a third of COVID-19 cases from the first wave (Fig. 1A). This variant carries one small deletion (H69V70del) and four spike substitutions, N439K, G614G, P681R and P809S. After April 2021, δ variant has gradually become the predominant driver (Fig. 1A-B). In support for high virulence of δ variant, the second wave is much more powerful than the first one. Vaccination was initiated at the beginning of 2021 and reached a full vaccination rate of ~17% in September 2021 (Fig. 1A). Temporal distribution of δ variant and its subvariants, δ 1 and δ 2, indicated that $\delta 1$ is the dominant driver whereas $\delta 2$ has played a less important role (Fig. 1B). This is similar to what has occurred in India, Europe and the USA [7,8]. Then I utilized Coronapp [13,14] for mutation profiling δ genomes identified in Indonesia after July 16, 2021. The results showed that a majority of the genomes encode two extra substitutions, spike V1264L (Fig. 1C) and NSP3 T678I (Fig. 1D). Importantly, these two substitutions are associated with each other and belong to a $\delta 1$ sublineage, which is referred to $\delta 1L$ (with the letter L denoting L1264). Thus, δ1 has evolved and yielded a new sublineage encoding two extra substitutions. Consistent with this, the average mutation load in the δ -genomes analyzed is 42 per genome (Fig. 2A), which is 1-2 mutations more than $\delta 1$ genomes identified in India after August 01, 2021 [7].

As for the origin of δ 1L, the first such genome from Indonesia was identified on January 19, 2021 (EPI_ISL_3315002, GISAID). It is quite puzzling is that the major δ 1L wave only took off in the country 4-5 months later (Fig. 1A). In India, the first δ 1L genome was only reported on April 06, 2021, so it is unlikely that δ 1 gave rise to δ 1L in India. Multiple genomes

with the collection dates of January 08 and 09, 2021 were deposited into the GISAID database from East Timor and Slovakia in October and September 2021, respectively. Out of 2,257 δ genomes from Slovakia, there are only 12 δ 1L genomes (GISAID, accessed on October 06, 2021). One complication is that some early genomes in the database appear to have incorrect sample collection date information, perhaps due to typos and book-keeping errors. The geological proximity of East Timor to Indonesia suggests that δ 1 may have yielded δ 1L in one of these two countries. But this possibility will need to be verified.

δIL is a major pandemic driver and acquires spike L1234I in Singapore

During the pandemic, Singapore has taken strict public health measures. Such measures have been highly effective in blocking α [3], β [4], γ [5] and many other variants from causing outbreaks in the country from September 2020 through June 2021 (Fig. 1B). In the summer of 2021, the four subvariants (δ 1, δ 2, δ 3 and δ 4) led to some small outbreaks in the country, but it managed to control them successfully. By contrast, these subvariants have led to major waves in the rest of the world. The situation took a sharp turn in Singapore at the beginning of August 2021, followed by a surging wave that is still ongoing (Fig. 1B). This epidemiological prognosis raises an important question about the SARS-COV-2 variants that have been driving this surging wave. Troublingly, this surging wave occurred when the country was reaching a high level of vaccination (Fig. 2B). Since April 2021, the vaccination rate has increased rapidly to an impressive level of ~80% (Fig. 1B). Other public control measures have been similar during the pandemic in the country. Thus, this raises an intriguing possibility that the variant(s) behind this surging wave may be much more virulent than many other variants that had spread to the country before the summer of 2020. If so, it would be important to identify the variant(s).

As described above (Fig. 1), during the summer of 2021, $\delta 1L$ was a key driver of a surging wave in Indonesia, a neighboring country of Singapore. The geological proximity suggests that $\delta 1L$ may also be one major driver of the surging wave in Singapore. Indeed, as shown in Fig. 2B, $\delta 1L$ was a major variant in July 2021 and became almost the sole pandemic driver one month later. In support of this, $\delta 1L$ genomes were identified in almost all 828 COVID-19 cases analyzed (Fig. 2C). Unexpectedly, almost 40% genomes from September belong to a sublineage (referred to as $\delta 1L1$) that encodes an extra spike substitution (L1234I) and a silent mutation (P217P, Fig. 2C). Consistent with this, the average mutation load of the genomes from Singapore is 46 per genome, which is 4 mutations more than what was identified in the genomes from Indonesia (Fig. 2A). Alarmingly, since July 2021, $\delta 1L1$ genomes have rapidly risen to the current level of almost 40% (Fig. 2C). Thus, spike L1234I may confer evolutionary advantage to $\delta 1L1$. Related to this, L1234 is in at the border of the transmembrane domain and cytoplasmic tail. Coincidentally, this is close to V1264, so L1234I may synergize

with V1264L. Although L1234I is a rather conserved substitution at the physicochemical level, it may finetune spike protein function and regulation.

In Singapore, the first $\delta 1L1$ case was identified on August 22, 2021. Over one month earlier, a related case (EPI_ISL_4254882, GISAID) was identified in Indonesia on July 03, 2021, suggesting that $\delta 1L1$ might have arisen in Indonesia and then spread to Singapore. Now there are 884 genomes in the GISAID database, with 881 from Singapore and the remaining three from Indonesia, Australia and Hong Kong. Thus, $\delta 1L1$ remains largely localized to Singapore. This offers a narrow opportunity to control the spread of this new variant.

δIL drives the pandemic and acquires spike D215Y/N in Malaysia

Having established that $\delta 1L$ is a major pandemic driver in Indonesia and Singapore, I next investigated whether this variant has spread to neighboring countries and driven the pandemic there. To address this, I analyzed the situation in Malaysia. As shown in Fig. 3A, the country has experienced three waves of COVID-19 cases, with the latest one starting in July 2021 and being the most powerful. Epidemiological curve and immunization progress in Malaysia. Vaccination progress has been reached an impressive level compared to many other countries in Asia (Fig. 3A). Despite this vaccination progress, the third wave is much more powerful than the first two. As occurred in Singapore, this epidemiological prognosis suggests that the variants behind the third wave may be highly virulent. The geological proximity to Indonesia and Singapore suggests that $\delta 1L$ may be one key driver of the third wave in Malaysia. Indeed, $\delta 1L$ has been a major driver since July 2021 (Fig. 3B). It was detected in ~50% cases in August 2021 (Fig. 3B). Thus, $\delta 1L$ has contributed significantly to the latest surging wave of COVID-19 cases in Malaysia.

To understand how $\delta 1L$ has evolved in the country, I performed mutation profiling via Coronapp [13,14]. As shown in Fig. 3C-D, multiple new spike and NSP3 mutations have been detected in 5-20% of the 446 $\delta 1L$ -genomes analyzed, suggesting that $\delta 1L$ have given rise to different sublineages in Malaysia. Consistent with this, the mutation load is 45-46 per genome (Fig. 4A), which is similar to what observed with the genomes from Singapore (Fig. 2D) but 3-4 mutations more than that observed with the genomes from Indonesia (Fig. 2A). This suggests that there are extra mutations in the $\delta 1L$ genomes from Malaysia. Mutation profiling uncovered two notable substitutions are D215Y and D215N, which alters the same residue, D215. It should be noted, however, that due to its low abundance (~10% each, Fig. 2C), these two substitutions do not account fully for the higher mutation load (Fig. 4A) than those genomes identified in Indonesia (Fig. 2A). These two substitutions could be used to identify two subgroups of genomes. Analysis of these two subgroups revealed average mutations loads of 48 and 46-47 per genomes for the D215Y- and D215N-encoding subgroups, respectively (Fig. 4B-C). Such mutation loads make both sublineages two of the most mutated SARS-COV- 2 variants identified so far. Related to this, the most mutated variant is 49 mutations per genome [7]. While D215Y is associated with spike A845S in some genomes, D215N-encoding genomes carry a small deletion spanning the codons of H69 and V70 (Fig. 4D-E). Therefore, δ 1L has yielded two highly mutated sublineages in Malaysia.

V1264L-encoding δ genomes identified around the world form different groups

Having established that $\delta 1L$ has been a major pandemic driver in Indonesia, Singapore and Malaysia, I asked how it has spread to other countries. Related to this, $\delta 1L$ appears to be a major driver in East Timor: out of 33 δ -genomes identified there, 17 encode $\delta 1L$ (GISAID, accessed on October 05, 2021). Thus, $\delta 1L$ is a key pandemic driver in East Timor.

For the rest of the world, I searched $\delta 1L$ genomes the GISAID database (accessed on October 07, 2021). For this, T678I of NSP3 was also used to identify $\delta 1L$ variant originated from Southeast Asia. This is because in the United Kingdom, there is a $\delta 1L$ variant that encodes A1711V instead of T678I of NSP3 (see below). This research identified 1,554 $\delta 1L$ -T678I genomes from Europe. There are 129 such genomes identified in North America, with 19 in Canada (16 of them from British Columbia). In Asia, 200, 118 and 2 such genomes have been identified in Japan, South Korea and China, respectively. None have been identified in South America and only one has been found in Africa. Therefore, the spread of $\delta 1L$ -T678I around the world is still at the very early stage. But this may change soon, so it will be necessary to watch out the spread of this variant due to its higher virulence than $\delta 1$ itself.

Then I carried put phylogenetic analysis of $\delta 1L$ genomes identified in the world by May 31, 2021. As shown in Fig. 5, $\delta 1L$ genomes from Indonesia form one large group. Within this group are only one genome identified in Singapore and several from the U.K. Strikingly, the genomes from the U.K. encode A1711V instead of T678I of NSP3, suggesting that they are from a distinct root. A majority of $\delta 1$ genomes identified in country encode A1711V [7], so $\delta 1$ subvariant has acquired V1264L in the U.K., independently from $\delta 1L$ identified in Indonesia, Singapore and Malaysia. Thus, there are two distinct groups of $\delta 1L$ genomes, encoding T678I or A1711V of NSP3. Intriguingly, phylogenetic analysis revealed that both $\delta 2$ and $\delta 3$ subvariants have also acquired spike V1264L, yielding new $\delta 2L$ and $\delta 3L$ sublineages, respectively (Fig. 5). Thus, V1264L is a recurrent spike substitution that has been acquired by different δ subvariants as they evolve to yield new sublineages.

A spike A222V-encoding δl sublineage acquires spike V1264L in the U.K.

Then I utilized Coronapp [13,14] to analyze the mutation profile of $\delta 1L$ genomes identified in the U.K. Shown in Fig. 6A are spike substitutions encoded by 963 V1264L-encoding δ genomes identified in the country during the first weeks of September 2021. It is surprising to notice that in addition to typical $\delta 1L$ substitutions, about 80% of the genomes carry two extra

spike substitutions, Y145H and A222V (Fig. 6A). In the country, there is a δ 1 sublineage, δ 1V, that encodes these two substitutions, but not V1264L [15]. Thus, it is likely that δ 1V has acquired V1264L and given rise to a new sublineage, which has been referred to as δ 1V1 [15].

Moreover, almost all genomes carry A1711V of NSP3 (Fig. 6B), with an average mutation load of 43-44 per genome (Fig. 6C). They do not encode T678I (Fig. 6C) as those δ 1L genomes identified in Southeast Asia (Fig. 1D). A1711V is a signature substitution of δ 1 subvariant identified in the U.K. [15], so it is conceivable that δ 1-NSP3_A1711V has acquired V1264L in the U.K. in a manner completely independent of δ 1L identified in Southeast Asia.

Shown in Fig. 6D are the monthly genomes corresponding to $\delta 1V1$ and the total V1264L-encoding δ genomes (i.e. the sum of $\delta 1L$ and $\delta 1V1$). Since July 2021, the $\delta 1V1$ genome number has increased exponentially, suggesting that Y145H, A222V and V1264L confer evolutionary advantage to $\delta 1V1$. A222V is a signature substitution of the SARS-COV-2 GV clade that was a major pandemic driver in Europe during 2020. A222V improves an extensive hydrophobic interaction network [15]. Thus, $\delta 1V1$ may be even more virulent than $\delta 1L$.

Analysis of V1264L-encoding δ 2-genomes

Like $\delta 1V1$, $\delta 2$ genomes encode spike A222V [15]. Phylogenetic analysis identified two large groups of $\delta 2$ genomes encoding V1264L (Fig. 5). One such group contains genomes mainly from the USA, and the other possesses genomes from Europe and Africa. By analogy to $\delta 1L$, $\delta 2$ V1264L-encoding $\delta 2$ subvariant is referred to as $\delta 2L$. Mutation profiling of 1,047 $\delta 2L$ genomes identified in the USA during September 2021 revealed an extra spike substitution N1074S (Fig. 7A). As shown in Fig. 7B, N1074S-encoding $\delta 2L$ genomes carry an average of 40-41 mutations per genome. This is much lower than what is observed with different $\delta 1L$ sublineages (e.g. Figs 2B & 4B-C). As shown in Fig. 7C, N1074S does confer viral fitness to $\delta 2L$. As described previously, $\delta 2$ is typically less virulent than $\delta 1$ [15]. Indeed, the growth of $\delta 2L$ or its N1074S-encoding sublineage is less dramatic than $\delta 1L$ and its sublineages. Thus, $\delta 2L$ or its N1074S-encoding sublineage may be less dangerous than $\delta 1L$ and its sublineages described above.

Mechanistic impact of V1264L and other spike substitutions

As shown in Fig. 8A-B, V1264 is located at the C-terminal cytoplasmic tail, which is important for cytoplasmic trafficking [16,17]. A recent study showed that the cytoplasmic tail of spike protein facilitates its expression on cell surface and promotes syncytia formation between infected cells [18]. Coincidentally, V1264L confers an acidic dileucine motif to spike protein because residues 1157-1262 are acidic and residue 1265 is leucine. Such a motif may affect endocytosis of many membrane-associated receptors of the resulting protein [9,10,12].

Moreover, a conserved dileucine motif mediates clathrin- and AP2-dependent endocytosis of the HIV-1 envelope protein [11]. Thus, V1264L may finetune the function of spike protein.

Notably, L1234I encoded in δ 1L is located at the border between the transmembrane domain and the cytoplasmic tail (Fig. 8A). L1234I may synergize with V1264L in finetuning the function and regulation of spike protein. H69 and Y145 are within a super antigenic site in the N-terminal domain (Fig. 8A), so their alterations (H69del and Y145H, respectively; Fig. 4) may confer immune evasions. A222 is part of an extensive hydrophobic network (Fig. 8D) [7], so A222V should improve this network. Spike A845 is in proximity to Q836 (Fig. 8E). Both residues are part of a region C-terminal from the fusion peptide (Fig. 8A). This region is important for spike function in promoting cell-cell fusion [19].

The cartoon in Fig. 8F summarizes evolutionary relationship between δ variant and its subvariants described herein. Two other studies of δ variant genomes from India, Europe and the U.S.A. supports a model in which this variant yields mainly four subvariants [7,8]. Alarmingly, δ 1 sublineages such as δ 1L, δ 1L1, δ 1V and δ 1V1 appear to be even more virulent than δ 1 itself. Moreover, δ 1L1 and δ 1V1 may be more virulent than δ 1L. This is alarming. Therefore, we will need to track evolution of these sublineages very closely and map their evolutionary trajectory in a precise and timely fashion, which will help us adopt the best public health measures and develop the new generation of vaccines.

Identification of δ 1L and its sublineages herein also provides support for a continuously branching model on SARS-COV-2 evolution [7,8]. Moreover, according to the 'evolutionary cage' hypothesis, there are genomic elements limiting the evolution and such elements form an 'evolutionary cage' that demarcate the space within which SARS-COV-2 evolves and generates new variants. Thus, the recurrent nature of spike V1264L suggests that V1264 is one such element and not optimal for SARS-COV-2. If so, V1264L is a driver or facilitator mutation that optimizes the function of the cytoplasmic tail of spike protein. Of relevance, spike P681R, P681H and V1176F are also such types of mutations [20,21]. Thus, acquisition of V1264L is an important mechanism by which δ 1 subvariant expands its evolutionary cage. Because V1264L is expected to finetune the cytoplasmic tail of spike protein and modulate its role in endocytosis, subcellular trafficking and cell-cell fusion, these results highlight the need to characterize other substitutions that also alter the cytoplasmic tail of spike protein.

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DECLARATION OF INTERESTS

The author has completed the ICMJE uniform disclosure form at www.icmje.org/coi_disclosure.pdf and declare: He have received grants from Canadian Institutes of Health Research (CIHR) and Natural Sciences and Engineering Research Council of Canada (NSERC) for the submitted work; no financial relationships with any organizations that might have an interest in the submitted work in the previous three years; no other relationships or activities that could appear to have influenced the submitted work.

MATERIALS AND METHODS

SARS-COV-2 genome sequences, mutational profiling and phylogenetic analysis

The genomes were downloaded the GISAID database on the dates specified in the figure legends. The CoVsurver (https://www.gisaid.org/epiflu-applications/covsurver-mutations-app/) was used to analyze mutations on representative SARS-COV-2 genomes. Fasta files containing specific groups of genomes were downloaded from the GISAID database. During downloading, each empty space in the Fasta file headers was replaced by an underscore because such a space makes the files incompatible for subsequent mutational profiling, sequence alignment and phylogenetic analysis, as described with details in another study [7]. The Fasta headers were shortened and modified further [7]. The cleaned Fasta file was used for mutational profiling via Coronapp (http://giorgilab.unibo.it/coronannotator/), a web-based mutation annotation application [13,14]. The cleaned Fasta file was also uploaded onto SnapGene (version 5.3.2) for multisequence alignment via the MAFFT tool. RAxML-NG version 0.9.0 [22] was used for phylogenetic as described [7].

Defining different variant genomes using various mutation markers

Genomes of α , β , γ , δ and other SARS-COV-2 variants were downloaded from the GISAID database as defined by the server. δ subvariant genomes were defined as described [7]. Briefly, the nucleocapsid substitutions G215C and R385K were used as mutation markers for δ 1 or δ 3 genomes, respectively. Spike substitutions A222V and K77T were used as markers for δ 2 or

 $\delta4$ genomes, respectively. In Europe, there are many $\delta1V$ genomes that also encode spike A222V, so the NSP3 substitution P822L was used together with spike A222V to identify $\delta2$ genomes. As discussed previously [7], there are several limitations with these markers. But they should not affect the overall conclusions.

PyMol structural modeling

The PyMol molecular graphics system (version 2.4.2, https://pymol.org/2/) from Schrödinger, Inc. was used for downloading structure files from the PDB database for further analysis and image generation. Structural images were cropped via Adobe Photoshop for further presentation through Illustrator.

Pandemic and vaccination data

Pandemic and vaccination data were downloaded from the Our World in Data website as described [7].

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FIGURE LEGENDS

Figure 1. SARS-COV-2 evolution drives the pandemic in Indonesia. (**A**) Epidemiological curve and immunization progress in Indonesia. While B.1.466.2 is a variant that accounted for a third of cases during the first wave in the country, δ variant is the predominant driver of the second wave. Despite up to ~17% full vaccination, the second wave is much more powerful than the first one, supporting high virulence of δ variant. For preparation of this panel, the Our World in Data website (https://ourworldindata.org/) was accessed on September 26, 2021. (**B**) Monthly distribution of δ variant and its subvariants. δ 1 and δ 2 subvariants are defined as in two other studies [7,8]. δ 1L is a δ 1 sublineage that encodes an extra spike substitution, V1264L. For the analysis, the GISAID SARS-COV-2 genome sequence database was accessed on September 27, 2021. (**C-D**) Mutation profile of 904 SARS-COV-2 genomes identified in Indonesia after July 15, 2021. The genomes were downloaded from the GISAID database on September 27, 2021 for mutation profiling via Coronapp [13,14]. Shown here are spike (C) and NSP3 substitutions (D).

Figure 2 Mutation profiles of SARS-COV-2 genomes identified in Indonesia and Singapore. (A) Mutation load in 904 SARS-COV-2 genomes identified in Indonesia after July 15, 2021. The analysis was carried out with Coronapp as Fig. 1C-D, but the mutation load is shown here. (B) Epidemiological curve and vaccination progress in Singapore. Since April 2021, different δ subvariants have been detected in imported and local COVID-19 cases, but δ 1L has been the main pandemic driver since July 2021 (see panel B). Alarmingly, although Singapore is now one of the top vaccinated countries (reaching almost 80% of the population), the current wave is the worst that the country has experienced since the beginning of the pandemic. This suggests a potential high breakthrough rate by $\delta 1L$ subvariant. For preparation of this panel, the Our World in Data website was accessed on September 26, 2021. (B) Monthly distribution of δ variant and its subvariants. For the analysis, the GISAID website was accessed on September 26, 2021. δ 1L1 is a new δ 1L sublineage that encodes spike L1234I (see panel E). (**D-E**) Mutational profiling of SARS-COV-2 genomes from 828 COVID-19 cases identified in Singapore in September 2021. The genomes were downloaded from the GISAID database on September 22, 2021 for mutation profiling via Coronapp. Shown in (B) is the mutation load among the genomes, whereas shown in (D) and (E) are substitutions in spike and NSP3 proteins, respectively. The average mutation load of $\delta 1L1$ is 46 per genome.

Figure 3. Mutation profile of δ -genomes identified in Malaysia. (A) Epidemiological curve and immunization progress in Malaysia. While AU.2 and B.1.524 drove the first wave in the country, δ variant has been the predominant driver of the latest wave that started in the summer of 2021. Despite some vaccination, the third wave is much more powerful than the first two. For preparation of this panel, the Our World in Data website was accessed on September 27, 2021. (**B**) Monthly distribution of δ variant and its δ 1L subvariant. For the analysis, the GISAID website was accessed on September 27, 2021. Note incomplete data (indicated with an asterisk) for September 2021 when the website was accessed (**C-D**) Mutation profile of SARS-COV-2 genomes from 446 δ 1L-genomes identified in Malaysia. The genomes were downloaded from the GISAID SARS-COV-2 sequence database on September 27, 2021 for mutation profiling via Coronapp [13,14]. Shown here are spike (C) and nucleocapsid substitutions (D). Note that a small deletion (H69V70del) is only detected as H69del by Coronapp.

Figure 4 Mutation profiles of δ 1L-genomes identified in Malaysia. (A) Mutation load in 446 δ 1L genomes identified in the country. The distribution was generated via Coronapp as Fig. 3C-D, but the mutation load is shown here. (**B-D**) Mutational profiling of δ 1L genomes that also encode spike D215Y (B & D) or D215N (C & E). The genomes were downloaded from the GISAID database on September 27, 2021 for mutation profiling via Coronapp. Shown in (B) is the mutation load among the genomes, whereas shown in (B-C) and (D-E) are the mutation loads and spike substitutions, respectively. Note that a small deletion (corresponding to H69V70del) is only detected as H69del by Coronapp.

Figure 5. Phylogenetic analysis of 473 δ 1L-genomes identified around the world by May 31, 2021. The genomes were downloaded from the GISAID database on September 26, 2021. Only high-coverage genomes with complete date information on sample collection were used for phylogenetic analysis. The package RAxML-NG was used to generate this bestTree and 20 maximum likelihood trees for presentation via FigTree. The strain names and GISAID accession numbers of the genomes are provided in Figure S1.

Figure 6. Mutation profile of δ 1L-genomes identified in the U.K. (**A-B**) Mutation profile of 963 δ 1L-genomes identified in the country in September 2021. The genomes were downloaded from the GISAID SARS-COV-2 sequence database on September 27, 2021 for mutation profiling via Coronapp [13,14]. Shown are spike (A) and NSP3 (B) substitutions. δ 1L from Indonesia encodes T678I of NSP3 (Fig. 1D), but δ 1L originated from the U.K. encodes A1711V of NSP3 (panel B). δ 1V1 carries spike Y145H, A222V and V1264L [7]. Its parental strain is δ 1V, encoding spike Y145H and A222V [7], indicating that spike V1264L has been independently acquired by different variants. (**C**) Mutation load in δ 1L-genomes identified in the U.K. The analysis was performed via Coronapp as panels A-B, but the mutation load is shown here. δ 1V1 genomes carry an average of 43-44 mutations per genome. (**D**) Temporal distribution of δ variant and its δ 1L subvariant. For the analysis, the GISAID website was

accessed on September 27, 2021. δ 1L3 encodes NSP3 and spike V1264L, whereas δ 1L4 encodes an additional spike substitution, A222V.

Figure 7. Mutation profile of δ 1L-genomes identified in the USA. (**A-B**) Mutation profile of 1,047 V1264L-encoding δ -genomes identified in the country in September 2021. The genomes were downloaded from the GISAID database on September 27, 2021 for mutation profiling via Coronapp [13,14]. Shown in (A) and (B) are the mutation loads and spike substitutions, respectively. (**C**) Monthly distribution of δ 2L subvariant and its N1074S-encoding sublineage. For the analysis, the GISAID website was accessed on September 28, 2021.

Figure 8. Mechanistic impact of V1264L and other substitutions. (A) Domain organization of spike protein. Some key substitutions of δ variant are shown in black and new substitutions described herein are in red. NTD, N-terminal domain; RBD, receptor-binding domain; S1/S2, boundary of S1 and S2 domains after furin cleavage between residues R685 and S686; FP, fusion peptide; FPR, fusion peptide C-terminal proximal region; HR1 and HR2, heptad-repeat regions 1 and 2, respectively; S2', cleavage site between residues R815 and S816 in S2 domain; TM, transmembrane motif; CT, C-terminal cytoplasmic tail. Adapted from a published study [19]. (B) Sequence alignment of spike proteins from SARS-COV-2 and five other coronaviruses. Only the cytoplasmic tail is shown along with a portion of the transmembrane domain. (C-D) Structural details of spike H69, D215, Y145 and A222. H69 and Y145 are part of a super antigenic site in the N-terminal domain (Fig. 8A). A222 is part of a hydrophobic core [7]. (E) Structural details of spike A845 and a neighboring residue, Q836. The structural models (C-E) were adapted from PyMol presentation of the spike protein structure 6XR8 from the PDB database. (E) Cartoon summarizing evolutionary relationship between δ variant and its subvariants described herein. Two other studies of δ variant genomes from India, Europe and the USA supports a similar model in which this variant branches out and yields mainly four subvariants [7,8].

SUPPLEMENTAL INFORMATION

This section includes one supplementary figure with detailed information on a phylogenetic tree and six acknowledgement tables for the GISAID genomes used in this work.

SUPPLEMENTAL FIGURE LEGENDS

Figure S1. Phylogenetic analysis of 473 δ1L-genomes identified around the world by May 30, 2021. The genomes were downloaded from the GISAID SARS-COV-2 genome sequence database on September 26, 2021 for phylogenetic analysis. Only high-coverage genomes with complete date information on sample collection were used. The software package RAxML-NG was used to generate 20 maximum likelihood trees and the bestTree for presentation via Figtree as in Fig. 5.

Figure 1



Figure 2









Figure 6







Figure 8







Supplementary Files

This is a list of supplementary files associated with this preprint. Click to download.

- TableS1IndonesiaV1264LJul16Sept272021904.pdf
- TableS2SingaporeSept01222021828.pdf
- TableS3MalaysiaV1264LSept272021446.pdf
- TableS4DeltaL1tilMay302021473.pdf
- TableS5UKV1264LSept1262021963.pdf
- TableS6USV1264LSept12620211407.pdf