

To: [redacted] [redacted] [redacted] @rivm.nl
Cc: [redacted] [redacted] [redacted] @rivm.nl; [redacted] [redacted] [redacted] [redacted] @rivm.nl; [redacted] [redacted] [redacted] @rivm.nl
From: [redacted] [redacted]
Sent: Fri 3/26/2021 10:28:05 AM
Subject: RE: PRO/AH/EDR> COVID-19 update (112): new double mutation variants, AstraZeneca, WHO, global
Received: Fri 3/26/2021 10:28:05 AM

Hoi,

Het is geen VOI en geen VOC volgens laatste update WHO. Ook werd gisteren besproken dat het nog maar helemaal de vraag is of er hier iets zorgwekkends aan de hand is. Er zijn veel varianten met dubbel mutaties in circulatie.

Wij hebben deze in iig nog niet gevonden. Wel een paar keer de L452 mutatie (4x in totaal).

Ik zou wachten op beoordeling van WHO. Vooral nog geen enkel bewijs voor concern (dwz negatieve impact op volksgezondheid qua besmettelijkheid, therapien; grensoverschrijdende aanwezigheid). Er wordt momenteel veel geroepen in de pers en er zijn veel landen die zelf maar van alles uit roepen tot VOI of VOC. Dat is niet handig en niet nodig.

Mbt sequenzen: wel geïnteresseerd om pos reizigers uit India te sequenzen (en andere exoïsche bestemmingen) maar om dit systematisch te gaan doen is meteen een officieel signaal? Is het sub-officieel te regelen?

Mbt BCO: we doen geen intensief BCO op andere pos met deze mutaties en andere mutaties (E484Q nog niet aangetroffen overigens).

We houden alles nauwlettend in de gaten via Sabiena mbt EWRS (ik hoop dat we die allemaal krijgen idd), WHO, ECDC meetings, promed en seq.

Helpt dit?

Gr [redacted]

-----Original Message-----

From: [redacted] [redacted] <[redacted]@rivm.nl>
Sent: vrijdag 26 maart 2021 10:48
To: [redacted] [redacted] [redacted] [redacted] @rivm.nl
Cc: [redacted] [redacted] [redacted] [redacted] @rivm.nl
Subject: FW: PRO/AH/EDR> COVID-19 update (112): new double mutation variants, AstraZeneca, WHO, global
Importance: High

Beste [redacted]

Zie onderstaande bericht uit Promed dat is opgepikt door VWS en tot vragen heeft geleid.

India meldt een nieuwe combinatie van mutaties die hier wordt aangegeven als een VOC. Ik heb hier verder helemaal niets nog van de WHO van gehoord, maar hoorde van [redacted] dat dit wel in het overleg met de WHO van gisteren ter sprake is gekomen. VWS vraagt nu hoe zorgelijk dit is?

In de sitrep van gisteren zie ik dat er bij 8 mensen in Nederland met een recente reisgeschiedenis naar India COVID is vastgesteld Vragen nu:

- Is dit echt al een VOC of alleen een VOI?
- Is er reden om nu voorlopig een inreisverbod (vliegverbod) vanuit India af te kondigen?
- Vinden jullie het interessant of nodig om COVID uit India te sequenzen?
 - Samples van de 8 reizigers van afgelopen week uit India op te vragen?
 - Een bericht uit te laten gaan om COVID bij reizigers uit India te laten sequensen en intensief BCO te doen?

VWS is nu bezig met het verlengen van de bestaande vliegverboden en wil dit graag meenemen als dat mogelijk of nodig is.

Wat is wijsheid? Graag jou inzichten en advies.

Groet

[redacted]

-----Oorspronkelijk bericht-----

Van: [redacted] [redacted] [redacted] [redacted] [redacted] @minvws.nl

Verzonden: vrijdag 26 maart 2021 10:02

Aan: [REDACTED] <[REDACTED]> <[REDACTED]> @rivm.nl>

Onderwerp: FW: PRO/AH/EDR> COVID-19 update (112): new double mutation variants, AstraZeneca, WHO, global

-----Oorspronkelijk bericht-----

Van: [REDACTED] <[REDACTED]> <[REDACTED]> @minvws.nl>

Verzonden: vrijdag 26 maart 2021 07:42

Aan: [REDACTED] <[REDACTED]> <[REDACTED]> @minvws.nl>

Onderwerp: FW: PRO/AH/EDR> COVID-19 update (112): new double mutation variants, AstraZeneca, WHO, global

Een double mutant

India staat vast al op een 'wees heel voorzichtig mee' lijst, toch?

-----Oorspronkelijk bericht-----

Van: [REDACTED] <[REDACTED]> @promedmail.org <[REDACTED] <[REDACTED] @promedmail.org> Namens [REDACTED] <[REDACTED] @promedmail.org

Verzonden: donderdag 25 maart 2021 23:46

Aan: [REDACTED] <[REDACTED] @promedmail.org>; [REDACTED] <[REDACTED] @promedmail.org>; [REDACTED] <[REDACTED] @promedmail.org

Onderwerp: PRO/AH/EDR> COVID-19 update (112): new double mutation variants, AstraZeneca, WHO, global

CORONAVIRUS DISEASE 2019 UPDATE (112): NEW 'DOUBLE MUTATION' VARIANTS, ASTRAZENECA TRIALS, WHO, GLOBAL

A ProMED-mail post

<<http://www.promedmail.org>>

ProMED-mail is a program of the

International Society for Infectious Diseases <<http://www.isid.org>>

In this update:

[1] 'Double mutation' variants

[2] AstraZeneca vaccine trial results

[3] WHO: daily new cases reported (as of 24 Mar 2021) [4] Global update: Worldometer accessed 24 Mar 2021 21:10 EST (GMT-5)

[1] 'Double mutation' variants

Date: Wed 24 Mar 2021

Source: Yahoo News [edited]

<<https://in.news.yahoo.com/combo-two-covid-mutations-know-134600628.html>>

While several part of the world, including in India, have been dealing with new waves of the coronavirus, one of the big challenges have also been new strains. The government on [Wed 24 Mar 2021] announced that a new coronavirus variant has been detected in India.

This comes amid a new surge of COVID-19 cases across several states in the country. The Indian SARS-CoV-2 Consortium on Genomics (INSACOG), a grouping of 10 national laboratories that was established by Ministry of Health and Family Welfares, found the variant while carrying out genomic sequencing and analysis of circulating COVID-19 viruses.

The INSACOG said that it found an increase in samples with E484Q and L452R mutations -- a double mutant variant. This means 2 mutations coming together in the same variant creating a new one. Both the E484Q and L452R mutations have been detected earlier, but the 'double mutant variant' is novel to India.

The E484Q has been detected in 11 countries earlier including US, UK, Denmark, and Switzerland. The L452R mutation has also been detected previously in 22 countries including New Zealand, Sweden, Australia.

The new variant has been categorised as a 'variant of concern' or VOC.

The new 'double mutant variant' and 771 VOCs were found in samples collected from 18 states across the country.

Hindustan Times quoted the National Centre for Disease Control's director [REDACTED] <[REDACTED]> as saying, "We have seen this double mutant E484Q and L452R. This is the double mutant which has been observed in 206 samples in Maharashtra and then in a varied number in Delhi, 9 samples, and so on." He also said the variant was seen in samples from Nagpur.

While the new Indian variant of the COVID-19 virus has been detected, the experts have said there was not enough evidence or numbers to show that this was behind the latest rise in COVID-19 cases in India.

The INSACOG tested a total of 10 787 positive samples from states and union territories among which 771 VOCs were found. Data shared by the government showed that among the samples, 736 were positive for the UK variant, 34 for the South African variant, and one for the Brazilian variant.

Experts have suggested a public health response of "increased testing, comprehensive tracking of close contacts, prompt isolation of positive cases and contacts, as well as treatment as per National Treatment Protocol" by the states/UTs as standard procedure to tackle the situation.

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[Such [double] mutations could potentially confer immune escape and increased infectivity.

Are double mutants more worrisome? Does this mean that there may be an ongoing emergence of separate lineage developing in India with the L452R and E484Q mutations?

That is not so surprising. Viruses mutate all the time, but there are questions that need answering: Does the presence of this double mutation change how the virus behaves? Will this variant be more infectious now, or cause more severe disease? And importantly, will current vaccines still work well against it? The proportion of tests that have shown this double mutation is currently low, with nothing to suggest this is the cause behind the current surge in cases. However, even though this double mutation means a possible new VOC, the situation requires the same public health response. Increased testing, tracking of close contacts, the prompt isolation of cases, as well as masks and social distancing.

As for the vaccines, so far, for many variants of concern around the world, they have been shown to be effective, though sometimes less so when compared to the original viruses they were designed against.

Scientists are confident that, if needed, existing vaccines can be modified to target new mutations. - Mod.UBA]

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