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SARS-CoV2 genome sequencing from the first patient identified with COVID-19 in Quito, Ecuador

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A broncho-alveolar lavage (BAL) sample was received from a 57-year-old patient of Dutch origin who presented symptoms in the Sucumbios province and then transferred to Quito. The Ecuadorian Ministry of Public Health and INSPI officially reported the positivity for SAR-CoV2 using the standard RT-PCR approach in public media. The BAL sample was collected on 03/10/2020 in DNA / RNA Shield (Zymo) to ensure virus inactivation and to conserve the genetic material and transported immediately at 4°C in a sealed container with all the biosecurity and containment measures recommended by the CDC of the USA (<https://www.fda.gov/media/134922/download>).

The genetic material of the sample was extracted in a biosafety type 2 chamber with HEPA filters in the Virology Laboratory of the IM of the USFQ. The QIAamp® Viral RNA Extraction Kit from Qiagen was used. Retranscription of RNA to cDNA was carried out using a superscript II platinum One Step PCR retrotranscriptase (invitrogen). The quality and concentration of the genetic material was quantified using QuBit obtaining 2.46 ng / ul of total cDNA. cDNA sequencing was performed according to the RNA Viral Metagenomics MinION One-Pot Sequencing Protocol of Public Health England, Genomics Lab at the USFQ Bioinformatics Center.

Bioinformatic analysis used the PoreChop algorithm to assign the sequences to their genetic barcodes, and the Kaiju and Kraken platforms to assign the taxonomy to the sequences found.

The metagenomic analysis found a total of 206,111 DNA sequences with 43,603,091 bases, of which 0.3% corresponded to Coronavirus sequences, 83% were not assigned and 17% were identified as SARS coronaviruses (Figure 1).

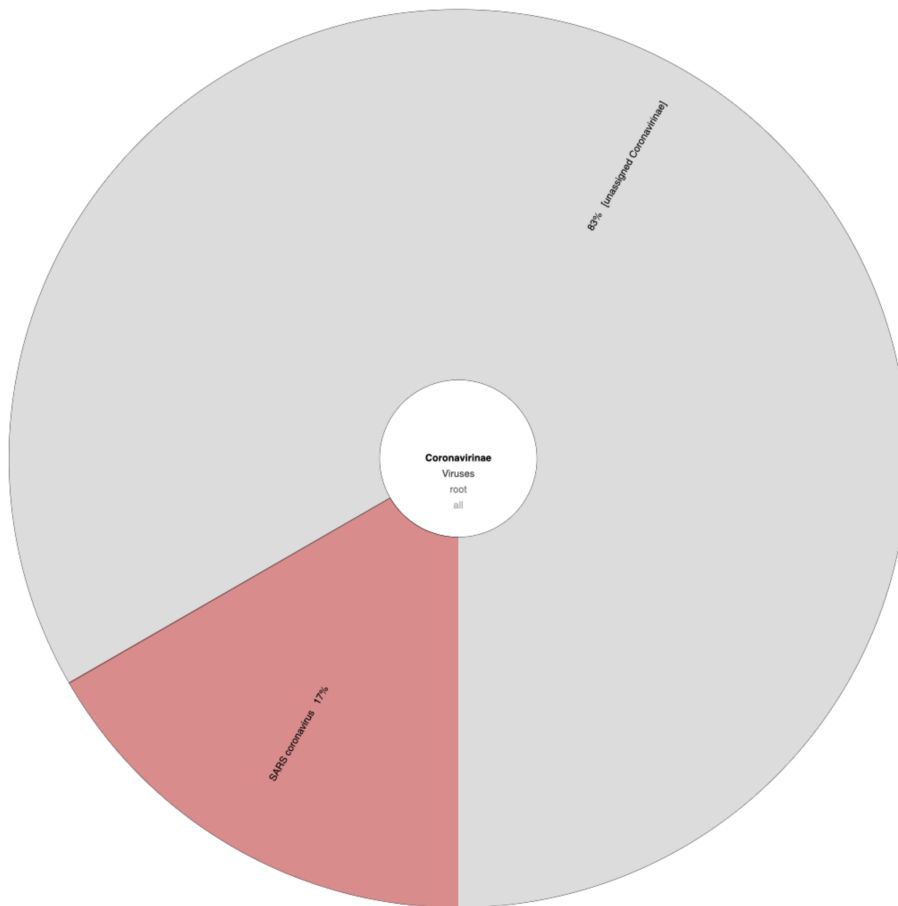


Figure 1. Krona chart summarizing the percentage of sequences assigned to Coronavirus in the metagenome.

The sequences assigned to Coronavirus were extracted and mapped using the Wuhan-Hu-1 reference genome (GenBank accession number MN908947). A sequence similarity of 99.68% was found with this sequence with 100% query coverage. Additionally, it was performed a phylogenetic tree with the sequences found and the reference strains used in GenBank NCBI. The phylogenetic alignment grouped the query sequence with the ORF1AB segment of the virus polyprotein (it encodes replication genes). It was determined that the virus genome is grouped with those of the strains previously described in the USA and China (Figure 2).

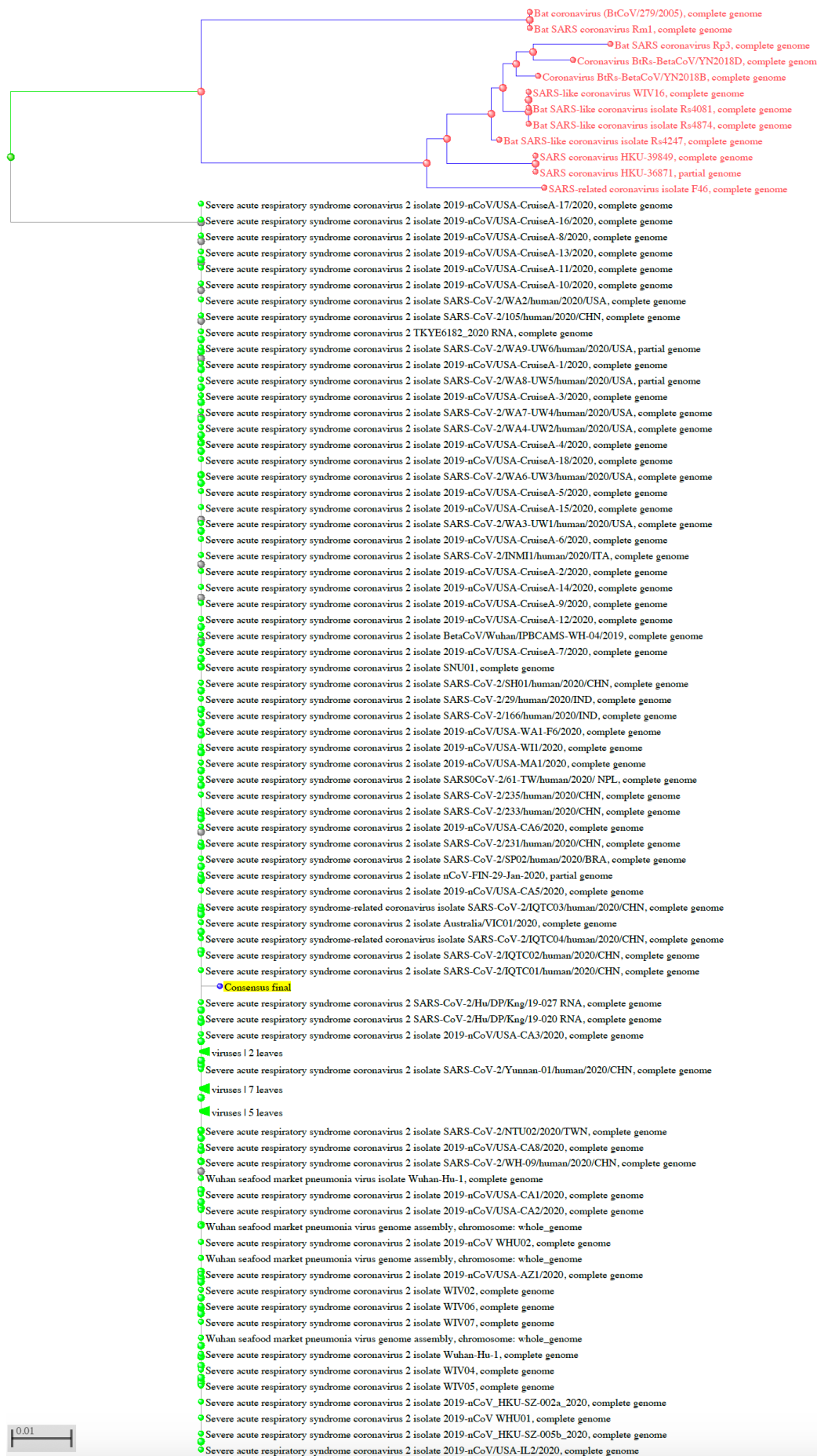


Figure 2. Maximum likelihood phylogenetic tree using the closest 100 BLASTx results with the HEE patient sequence (highlighted in yellow).

Conclusion: It was possible to sequence the orf1ab segment of the SARS-CoV-2 virus genome, which is grouped with strains from the USA and China using a metagenomic approach. The sequence didn't clustered with the European strains (which could be caused by the sequence region alignment). In order to identify a precise genotype, the entire virus genome must be sequenced (we are currently performing the sequencing using the ARTIC project database).

Additional information: bacterial sequences related to the patient's respiratory microbiota were identified by metagenomics (Figure 3).

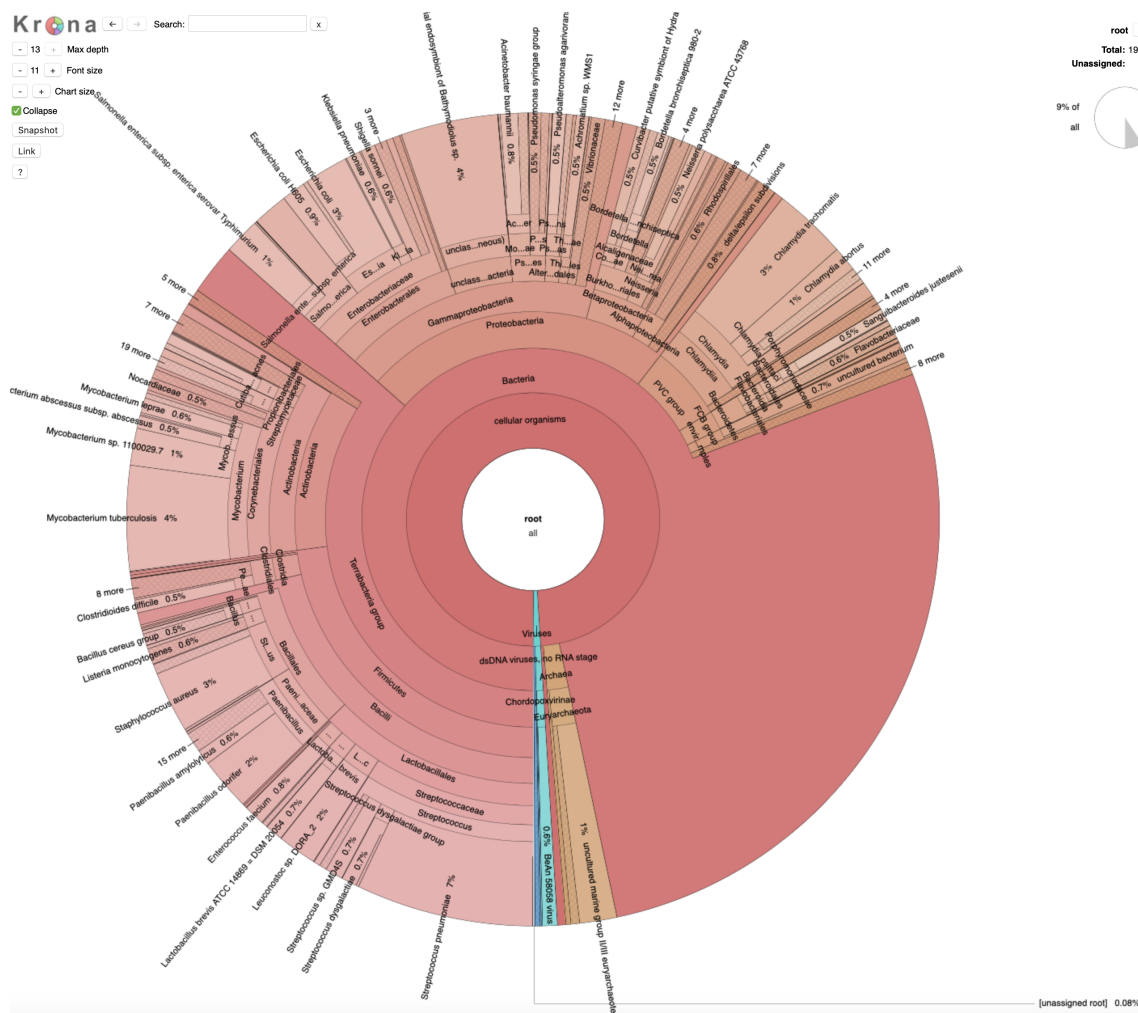


Figure 3. Krona chart summarizing the percentage of sequences assigned to bacteria and eukaryotes from the patient's respiratory microbiota.