

# COVID-19 Variant of Concern (VOC) Case Report

December 6, 2021

Cases reported here include cases with specimens sequenced at the Scientific Laboratory Division (SLD), University of New Mexico, Centers for Disease Control and Prevention (CDC), Aegis, LabCorp, Fulgent, Gravity, and Helix Genetics.

Variants of concern (VOC) are defined by Centers for Disease Control and Prevention:

<https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/variant-surveillance/variant-info.html>.

## COVID-19 Genomic Surveillance

Monitoring COVID-19 variants is an important part of epidemiologic surveillance to track the accumulation of SARS-CoV-2 mutations, which naturally occur over time. As the virus evolves, many variants will emerge and be identified; however, only a small minority will be classified as variants being monitored (VBM), variants of interest (VOI), or variants of concern (VOC). Variants are classified in these groups depending on whether the new mutations cause changes in transmissibility (i.e., how well the virus spreads between people), disease severity, detection by current diagnostic tests, or ability to evade monoclonal antibody treatments, natural immunity, or vaccine-induced immunity. Only a small proportion of COVID-19 cases have been sequenced since readily available diagnostic tests do not test for specific variant strains and must be sent to a lab for sequencing. Genetic sequencing requires coordinated effort and time, therefore there is a lag time from specimen collection to reporting of approximately 3-4 weeks.

CDC is monitoring two VOCs currently in the US, Delta and Omicron. All other VOCs and VOIs are now classified as VBMs due to their low prevalence including Alpha, Beta, Gamma, Epsilon, Eta, Iota, Kappa, Zeta, and Mu. The week of November 1, 2021, Delta represented approximately 98% of sequenced samples in New Mexico. CDC designated B.1.1.529 (Omicron) a VOC on November 30, 2021. To date, Omicron has not been observed in NM. Sequenced specimens reported from November 8-29, 2021 are incomplete but do indicate a continued predominance of Delta. CDC currently classifies all AY sublineage variants in combination with B.1.617.2 as Delta. Studies indicate that vaccines authorized for use in the US are effective at preventing transmission, severe illness, and death caused by VOCs and are the recommended measure to slow the emergence of new variants. Beginning August 20, 2021, NMDOH reinstated wearing masks in all indoor public settings to slow the spread of emerging variants of COVID-19.

## NM COVID-19 Variant Epidemiologic Interpretation

CDC VARIANTS OF CONCERN (VOC)			
Name	First Identified	Attributes <sup>1</sup>	New Mexico <sup>2</sup>
<b>Delta</b> <b>(B.1.617.2 and AY</b> <b>sublineages)</b>	India	-Increased transmissibility -May reduce effectiveness of antibody treatments -May cause more severe illness in unvaccinated persons -May reduce natural and vaccine immunity	-Since 6/28/21, Delta has remained the dominant variant, and represented 98% of sequences reported on 10/25/21. -Proportion of deaths is currently 2%.
<b>Omicron</b> <b>(B.1.1.529)</b>	South Africa	-Potential increased transmissibility -May reduce effectiveness of antibody treatments -May reduce natural and vaccine immunity	-Has not been observed in NM

<b>CDC VARIANTS BEING MONITORED (VBM)</b>			
<b>Name<sup>3</sup></b>	<b>First Identified</b>	<b>Attributes<sup>1</sup></b>	<b>New Mexico<sup>2</sup></b>
<b>Alpha (B.1.1.7 and Q lineages)</b>	United Kingdom	-50% more transmissible -Potential to cause more severe cases and deaths	-Alpha has proportionally declined from 79% the week of 5/24/21 to 2% of samples collected the week of 7/19/21. -Has not been observed in NM since 8/16/21.
<b>Beta (B.1.351 and descendent lineages)</b>	South Africa	-50% more transmissible -Reduced effectiveness of antibody treatments -Reduced response of natural and vaccine induced immunity	- Least reported VOC in NM. -Has not been observed in NM since 7/19/21.
<b>Gamma (P.1 and descendent lineages)</b>	Japan/Brazil	-Reduced effectiveness of some antibody treatments -Reduced response of natural and vaccine immunity	-First case sequenced in NM the week of 3/22/21 and has not been observed since 8/9/2021; Gamma peaked at 10% of sequenced NM specimens the week of 6/21/2021. -Currently has the highest proportion of hospitalizations (24%); oversampling of severe cases may skew these results.
<b>Epsilon (B.1.427, and B.1.429)</b>	California	-Downgraded from a VOI on September 21, 2021	-First case sequenced in NM the week of 10/12/20 and has not been observed since 6/7/21; Epsilon peaked at 26% of sequenced NM specimens the week of 3/15/21.
<b>Iota (B.1.526)</b>	U.S.	-Downgraded from a VOI on September 21, 2021	-First case sequenced in NM the week of 2/08/21 and has not been observed since 6/28/21; Iota peaked at 15% of sequenced NM specimens the week of 5/10/21
<b>Mu (B.1.621, and B.1.621.1)</b>	Colombia	-Designated a VBM on September 21, 2021	-First case sequenced in NM the week of 5/24/21 and has not been observed since 7/26/21; Mu peaked at 7% of sequenced NM specimens the week of 6/7/21.

<sup>1</sup><https://www.cdc.gov/coronavirus/2019-ncov/variants/variant-info.html>

<sup>2</sup>NM interpretations based on data collected >4 weeks ago to allow for lag in genomic sequencing.

<sup>3</sup>All other VBMs have either not been observed in NM or have had <10 sequenced specimens and are not included in this table.

## Cumulative number of Specimens Sequenced and Matched to Case Investigations

Lineage	Sequenced Cases	Matched Cases*	Percent Matched
<b>B.1.617.2 (Delta)</b>	8570	5028	59%
<b>B.1.1.7 (Alpha)</b>	1836	1539	84%
<b>B.1.351 (Beta)</b>	8	3	38%
<b>P.1 (Gamma)</b>	109	93	85%
<b>B.1.427/B.1.429 (Epsilon)</b>	521	417	80%
<b>B.1.525 (Eta)</b>	4	4	100%
<b>B.1.526 (Iota)</b>	191	162	85%
<b>B.1.617.1 (Kappa)</b>	2	2	100%
<b>P.2 (Zeta)</b>	3	2	67%
<b>B.1.621/B.1.621.1 (Mu)</b>	38	29	76%
<b>Other lineage</b>	4476	3199	71%
<b>Total</b>	15758	10478	66%

\*Cases are matched to NMDOH case investigation data to provide demographic, disease outcome, and other clinical information. This table includes 190 sequences from patients who were tested at New Mexico facilities but reside outside New Mexico. These have been removed from the subsequent tables and figure

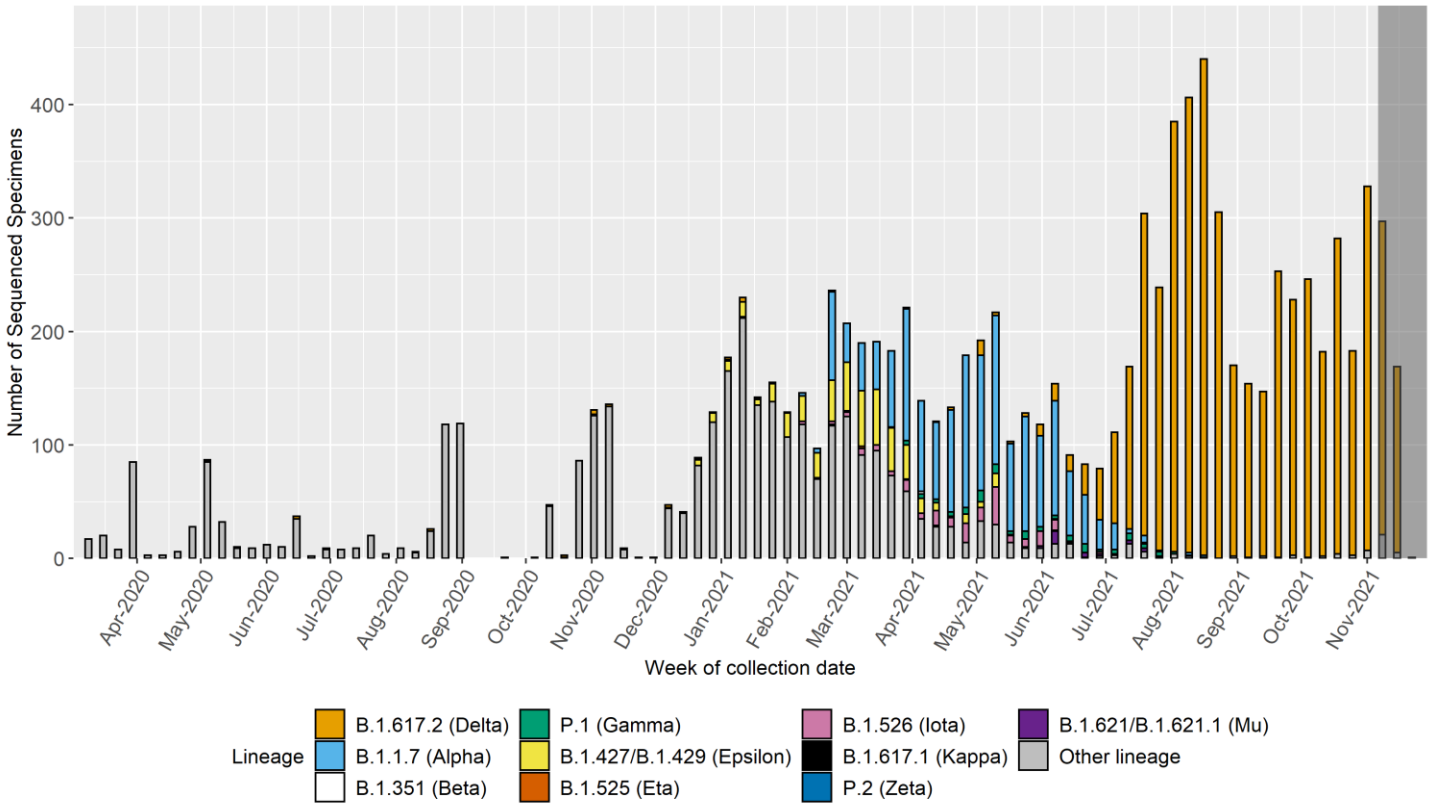
## Cumulative number of variant cases, hospitalizations, and deaths

Lineage	Total Cases	Number Hospitalized	Percent Hospitalized	Number Died	Percent Died	Vaccine Breakthrough Cases*
<b>Delta</b>	5015	519	10%	118	2%	1604
<b>Alpha</b>	1539	158	10%	20	1%	94
<b>Beta</b>	3	0	0%	0	0%	0
<b>Gamma</b>	93	22	24%	2	2%	3
<b>Epsilon</b>	417	9	2%	2	0%	8
<b>Eta</b>	4	0	0%	0	0%	0
<b>Iota</b>	162	5	3%	1	1%	8
<b>Kappa</b>	2	0	0%	0	0%	0
<b>Zeta</b>	2	0	0%	0	0%	0
<b>Mu</b>	29	2	7%	0	0%	3
<b>Other lineage</b>	3196	209	7%	65	2%	40

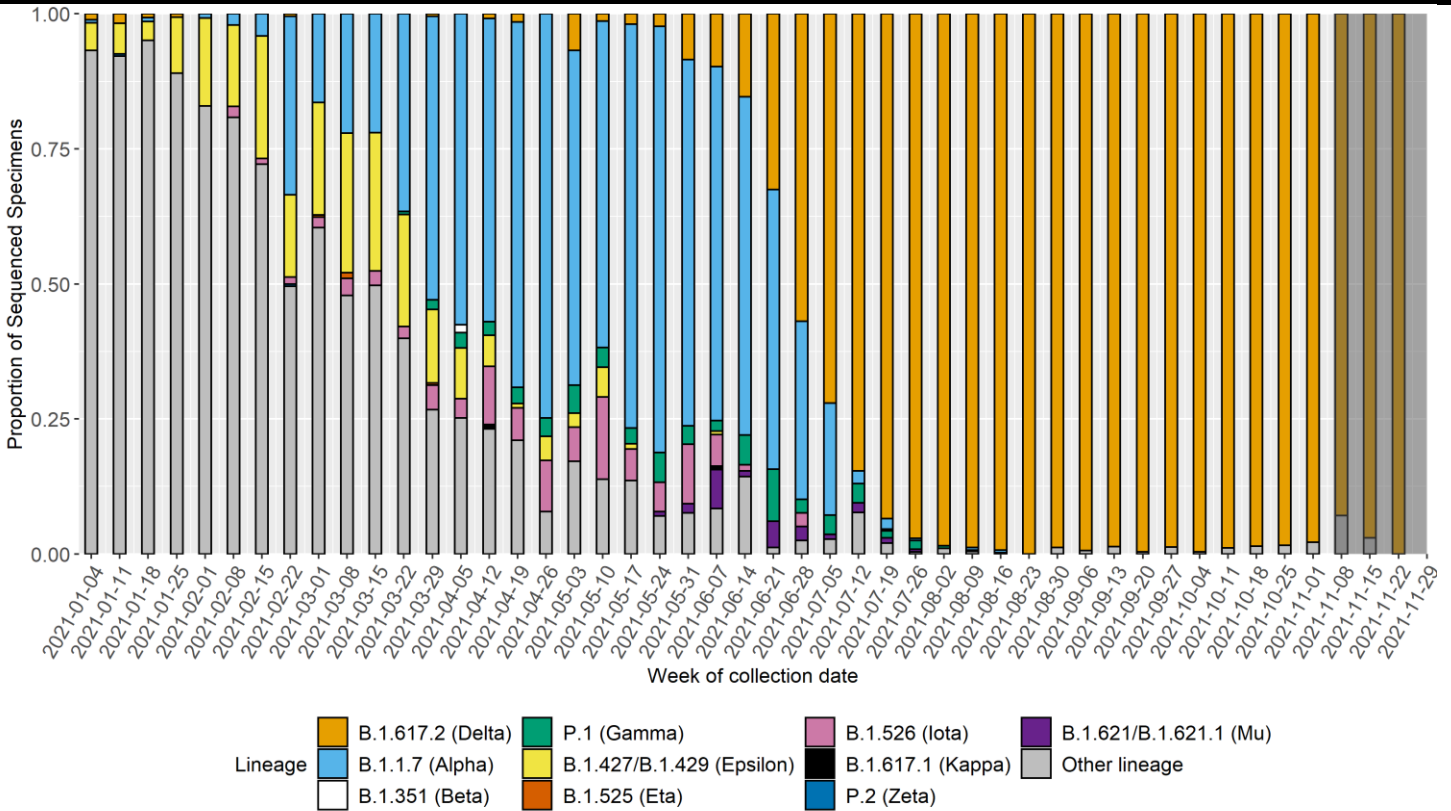
\*A vaccine breakthrough (VBT) case is defined as a person who tests positive  $\geq 14$  days after completing the full series of an FDA-authorized COVID-19 vaccine and has not tested positive the prior 89 days. Because samples collected from VBT cases are more frequently sequenced compared to samples from other COVID-19 cases, these counts should not be used to evaluate the frequency with which VOCs cause vaccine breakthrough.

\*\*The specimen submission process for sequencing is not representative. A large proportion of P.1 (Gamma) cases were collected from a single hospital in San Juan County that submitted specimens on hospital admissions, rather than on a representative set of cases in the county. This is likely increasing the apparent severity of this VOC.

## Identified SARS-CoV-2 lineages by week

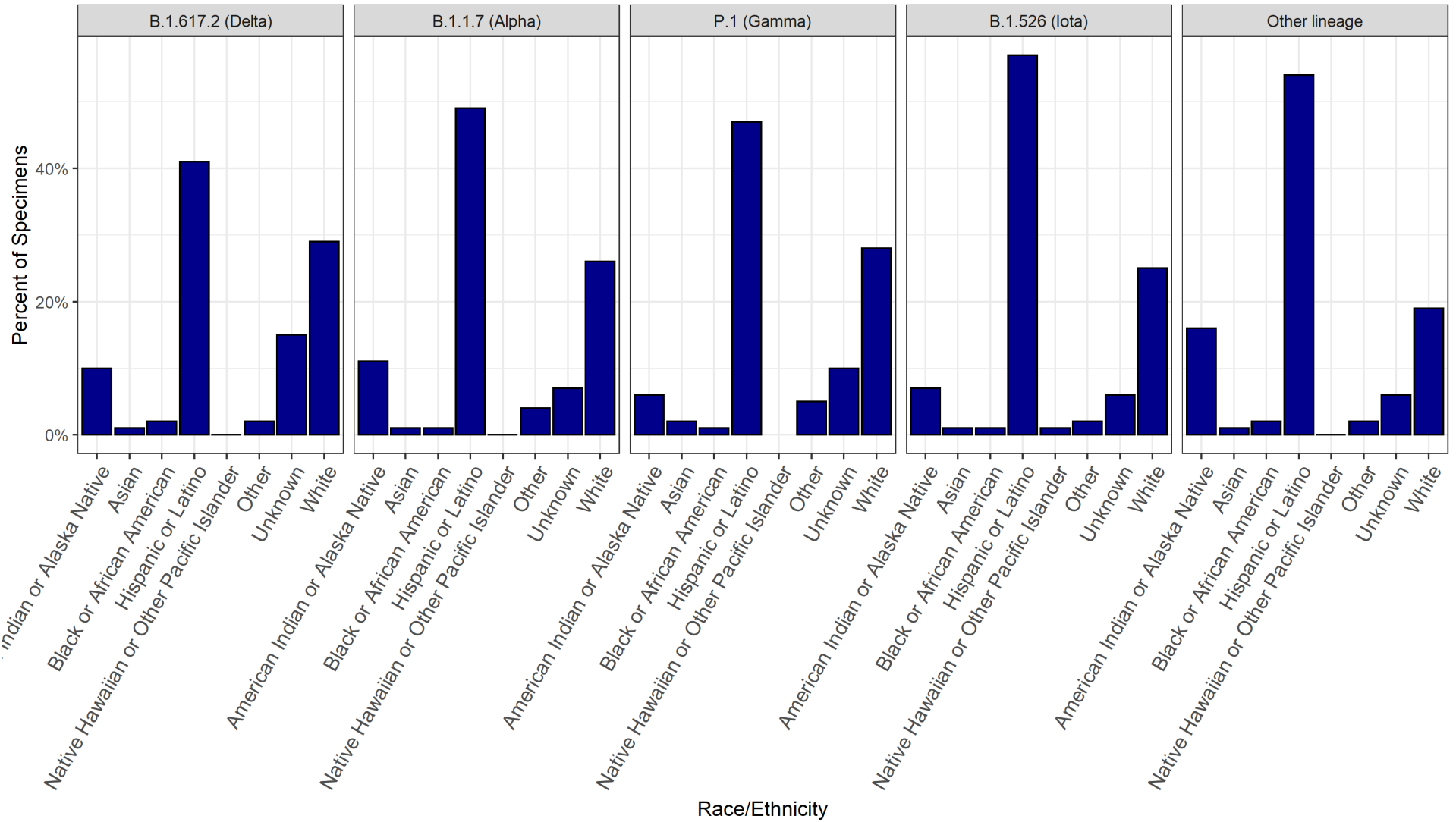


## Proportion of identified SARS-CoV-2 lineages by week



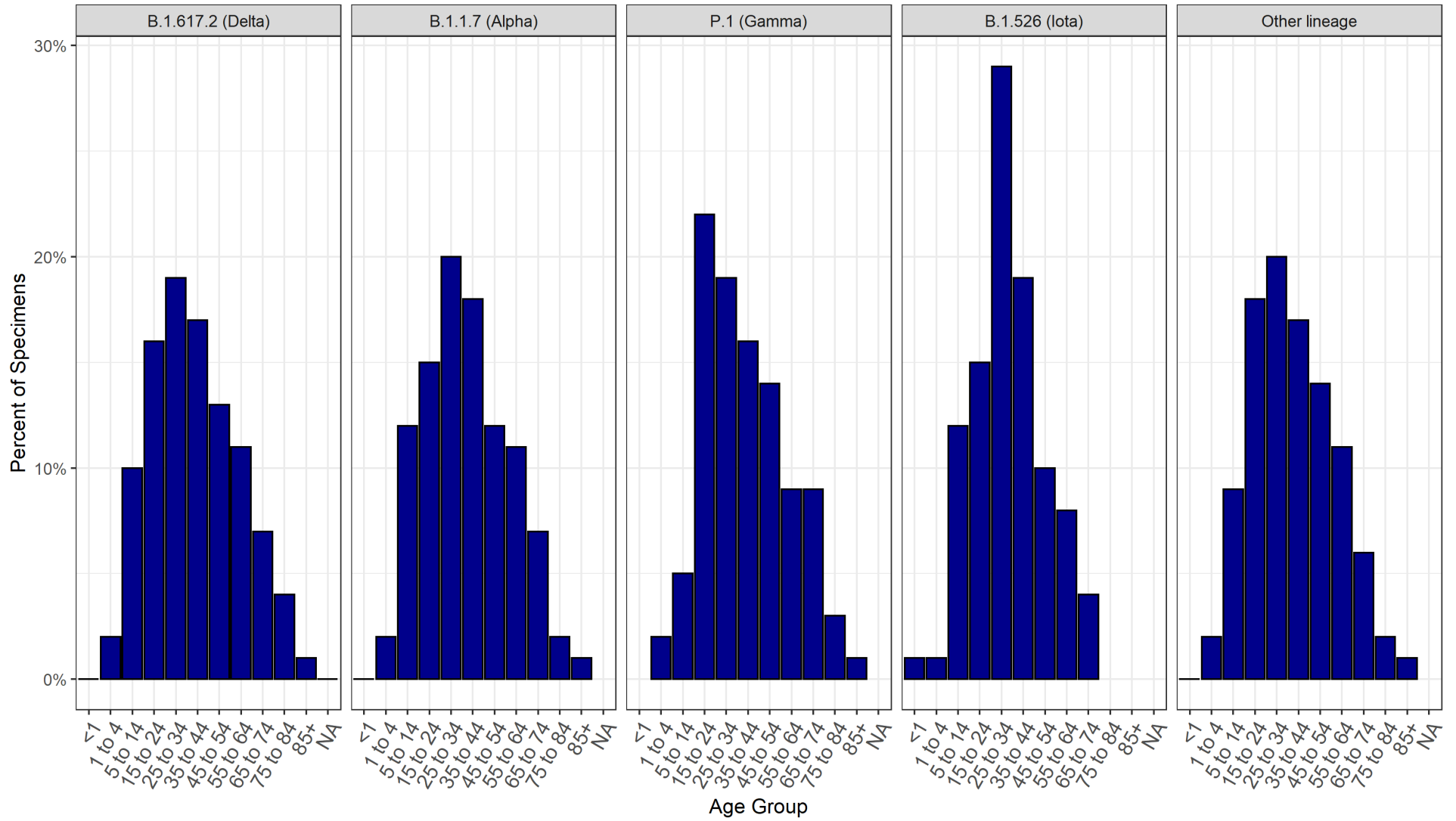
\*The dark grey shaded region in each of the figures on this page represents the lag period between specimen collection and genomic sequencing results such that the results may look different when all specimens available for sequencing have been reported.

## Cumulative proportion of variant cases by Race/Ethnicity



\*Only VOCs and VBMs with greater than 50 sequenced specimens in NM are reported and excludes Epsilon due to its diminishing proportion over time.

## Cumulative proportion of variant cases by Age Group



\*Only VOCs and VBMs with greater than 50 sequenced specimens in NM are reported and excludes Epsilon due to its diminishing proportion over time.

## Cumulative number of variant cases by county of residence\*

Counties with less than 5 matched sequenced cases are not included in the table below.

County	Delta	Alpha	Gamma	Iota	Other lineage
Bernalillo	1364	450	17	50	1064
Chaves	188	13	0	1	61
Cibola	149	13	0	7	108
Colfax	109	24	0	4	26
Curry	114	24	0	10	28
Dona Ana	425	81	6	2	429
Eddy	240	19	0	5	99
Grant	30	13	2	1	34
Guadalupe	52	1	0	0	19
Hidalgo	10	0	0	0	1
Lea	128	16	1	0	114
Lincoln	31	5	4	1	58
Los Alamos	28	9	0	0	24
Luna	11	14	0	0	21
McKinley	96	19	0	2	128
Otero	410	25	2	1	155
Quay	22	3	1	2	0
Rio Arriba	96	92	1	1	40
Roosevelt	5	0	0	1	11
San Juan	344	320	28	3	298
San Miguel	94	10	0	0	55
Sandoval	241	75	6	11	233
Santa Fe	351	97	0	6	302
Sierra	10	5	0	0	5
Socorro	38	9	0	0	31
Taos	80	16	0	0	40
Torrance	69	16	1	50	23
Union	5	1	0	0	0
Valencia	265	70	5	4	128

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## Percentage of variant cases reporting any symptoms

Lineage	No Symptoms	Unknown Symptoms	Yes Symptoms	Total Cases	Percent Symptomatic
Delta	148	2548	2332	5028	46%
Alpha	104	367	1068	1539	69%
Gamma	10	16	67	93	72%
Iota	10	61	91	162	56%
Other lineage	395	849	2412	3656	66%

## Percentage of specific symptoms reported by symptomatic variant cases

The table below includes data ONLY from symptomatic cases.

Symptom	Delta	Alpha	Gamma	Iota	Other lineage
Fever (Measured or Subjective)	55% (1266)	46% (488)	50% (33)	47% (42)	43% (1019)
Chills	48% (1098)	46% (481)	58% (38)	53% (48)	44% (1059)
Muscle Aches	56% (1289)	57% (596)	55% (36)	58% (52)	56% (1322)
Runny Nose	55% (1266)	53% (553)	45% (30)	58% (52)	53% (1261)
Sore Throat	45% (1040)	45% (470)	47% (31)	51% (46)	42% (1004)
Cough	75% (1723)	74% (772)	83% (55)	72% (65)	64% (1518)
Shortness of Breath	31% (707)	29% (308)	39% (26)	33% (30)	24% (572)
Nausea/Vomiting	26% (611)	27% (285)	33% (22)	33% (30)	23% (539)
Headache	65% (1506)	66% (693)	50% (33)	82% (74)	65% (1545)
Abdominal Pain	14% (334)	16% (164)	15% (10)	20% (18)	14% (328)
Diarrhea	30% (684)	28% (299)	26% (17)	36% (32)	26% (625)
Fatigue	68% (1574)	70% (737)	67% (44)	80% (72)	66% (1564)
Loss of Appetite	39% (908)	40% (420)	35% (23)	47% (42)	36% (849)
Loss of Taste or Smell	48% (1117)	39% (411)	35% (23)	54% (49)	44% (1037)

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## Percentage of variant cases reporting underlying conditions

Lineage	No	Unknown	Yes	Total Cases	Percent with underlying conditions
<b>Delta</b>	1686	2657	685	5028	14%
<b>Alpha</b>	597	372	570	1539	37%
<b>Gamma</b>	39	17	37	93	40%
<b>Iota</b>	55	61	46	162	28%
<b>Other lineage</b>	1668	936	1052	3656	29%

## Percentage of specific underlying conditions reported by variant cases

Data below includes ONLY cases who report having a pre-existing condition.

Condition	Delta	Alpha	Gamma	Iota	Other lineage
<b>Chronic Lung Disease</b>	26% (152)	25% (130)	26% (8)	28% (12)	26% (246)
<b>Chronic Liver Disease</b>	4% (25)	3% (17)	0% (0)	0% (0)	4% (38)
<b>Chronic Renal Disease</b>	11% (62)	4% (20)	6% (2)	0% (0)	5% (44)
<b>Diabetes Mellitus</b>	31% (182)	19% (98)	13% (4)	12% (5)	22% (203)
<b>Cardiovascular Disease</b>	36% (206)	32% (164)	29% (9)	19% (8)	28% (265)
<b>Autoimmune Disease</b>	6% (37)	8% (40)	6% (2)	2% (1)	5% (45)
<b>Neurological Disability</b>	8% (46)	6% (31)	13% (4)	2% (1)	9% (81)
<b>Current or Former Smoker</b>	41% (239)	53% (274)	74% (23)	53% (23)	50% (468)

\* Note: One P.1 variant case reported an underlying condition that is not included on the list above.

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## Data Sources

- **COVID-19 data**
  - **New Mexico Electronic Disease Surveillance System (NM-EDSS)**, Infectious Disease Epidemiology Bureau, Epidemiology and Response Division, New Mexico Department of Health.
  - **Salesforce/MTX COVID-19 Case Investigation Platform.**
- **Sequencing data**
  - New Mexico Department of Health (NMDOH) receives sequencing data for specimens sequenced at the NMDOH Scientific Laboratory Division (SLD), University of New Mexico, Centers for Disease Control and Prevention (CDC), Aegis, LabCorp, Fulgent Genetics, Gravity, and Helix Genetics.
- **Variants of concern (VOC)** are defined by Centers for Disease Control and Prevention:  
<https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/variant-surveillance/variant-info.html>.

## Data Notes

- **The data reported in this weekly update may not match the daily numbers that are reported in the New Mexico Department of Health (NMDOH) press releases and/or the NMDOH COVID-19 data dashboard. This may be due to variation in the date and time of data extraction from NM-EDSS, corrections after quality assurance review, and differences in the exclusion criteria.**
- **New Mexico Electronic Disease Surveillance System (NM-EDSS).** Disease incidence data are derived from reports of notifiable infectious diseases. NMDOH relies on health care providers, laboratories, hospitals, clinics, institutions, and individuals to report suspected and confirmed notifiable infectious diseases in accordance with New Mexico Administrative Code 7.4.3.13. Under-reporting can occur due to lack of awareness about reporting requirements or lack of compliance with those requirements. Not all cases of infectious diseases can be detected for various reasons including lack of access to health care services, lack of laboratory testing or concerns about confidentiality. Specific and standardized national case definitions are used to classify disease reports by case status.
- **Race/Ethnicity.** Race/Ethnicity are reported as a single variable according to the selection of the case. Any case who is Hispanic is in the Hispanic category and all other races are non-Hispanic.