



## Research Article

# Characteristics of replication and pathogenicity of SARS-CoV-2 Alpha and Delta isolates

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## ABSTRACT

The continuously arising of SARS-CoV-2 variants has been posing a great threat to public health safety globally, from B.1.17 (Alpha), B.1.351 (Beta), P.1 (Gamma), B.1.617.2 (Delta) to B.1.1.529 (Omicron). The emerging or re-emerging of the SARS-CoV-2 variants of concern is calling for the constant monitoring of their epidemics, pathogenicity and immune escape. In this study, we aimed to characterize replication and pathogenicity of the Alpha and Delta variant strains isolated from patients infected in Laos. The amino acid mutations within the spike fragment of the isolates were determined via sequencing. The more efficient replication of the Alpha and Delta isolates was documented than the prototyped SARS-CoV-2 in Calu-3 and Caco-2 cells, while such features were not observed in Huh-7, Vero E6 and HPA-3 cells. We utilized both animal models of human ACE2 (hACE2) transgenic mice and hamsters to evaluate the pathogenesis of the isolates. The Alpha and Delta can replicate well in multiple organs and cause moderate to severe lung pathology in these animals. In conclusion, the spike protein of the isolated Alpha and Delta variant strains was characterized, and the replication and pathogenicity of the strains in the cells and animal models were also evaluated.

## 1. Introduction

The COVID-19 pandemic is being persistent by the emerging variants of concern (VOC). The SARS-CoV-2 mutant strains have elevated disease-causing capacity compared to the prototype, for example higher transmissibility, faster replication and reduced neutralization (Tao et al., 2021; Harvey et al., 2021). These mutations mainly occurred in the spike

protein that mediates viral attachment and entry into host cells via the ACE2 receptor. The D614G mutation of the spike protein remarkably increased binding to the host hACE2 receptor early in the pandemic (Zhang et al., 2020) and was quick to become a dominant variant circulating around the world. Several potential variant strains like B.1.621 (Mu) (Xie et al., 2021) were monitored and, however, did not cause severe pandemic globally. Subsequently, B.1.1.7 (Alpha)

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variant was initially identified in the United Kingdom in September 2020 and fast got transmitted globally in early 2021 (Kraemer et al., 2021; van Loon et al., 2021). Another two VOCs called B.1.351 (Beta) and P.1 (Gamma) were first identified in South Africa and Japan/Brazil, respectively (da Silva et al., 2021; Tegally et al., 2021), and were greatly concerned initially because both demonstrated unprecedented ability to diminish efficacy of COVID-19 vaccines at that time (Charmet et al., 2021; Hall et al., 2021; Hitchings et al., 2021; Madhi et al., 2021; Sadoff et al., 2021; Shinde et al., 2021). Alpha and Beta strains harbor the N501Y mutations in their spike protein and have also been reported to result in more severe symptoms in humans (Grint et al., 2021; Patone et al., 2021) and animal models (Liu et al., 2022b; Bayarri-Olmos et al., 2021; Radvak et al., 2021) including human ACE2 (hACE2) transgenic mice and hamsters.

When Alpha, Beta and Gamma strains were continuously circulating globally, B.1.617.2 (Delta) was initially identified in India (Singh et al., 2021) and caused a sharp rise of COVID-19 cases from India to the rest of the world. It was frustrating at that time that Delta was capable of resulting in breakthrough infection for those who, despite, were fully vaccinated before, largely by compromising the protective efficacy of several prevalent COVID-19 vaccines such as ChAdOx1, mRNA-1273 and BNT162b2 (Bernal et al., 2021; Dagan et al., 2021; Sheikh et al., 2021; Tang et al., 2021). Thus, different from previous circulating variants, Delta posed a great threat to both unvaccinated and vaccinated populations, further adding the uncertainty in global fight against COVID-19. The occurrence of highly transmission and pathogenicity of Delta relied on the critical mutations in its spike protein, which were partially shared with other VOC (Deng et al., 2021; Greaney et al., 2021). These key mutations markedly endowed Delta strain with increased transmissibility and reduced antibody neutralization (Planas et al., 2021). In addition to the D614G substitution, P681R mutation in Delta spike protein was proven to promote binding affinity to ACE2 receptor and cellular entry (Saito et al., 2022). A new SARS-CoV-2 variant B.1.1.529 (Omicron) was documented on November 24 in 2021 from Botswana and South Africa and classified as the fifth VOC just two days later. Omicron strain possesses an unprecedented 30 amino acid substitutions in its spike protein compared with the prototype and 15 of these mutations occurred in the receptor-binding domain (RBD) (Lin et al., 2022; Zhao et al., 2022), suggesting the possibility of biological changes of Omicron. Unsurprisingly, Omicron has been reported to robustly escape from multiple vaccines and therapeutic neutralization antibodies (Andrews et al., 2022; Wang et al., 2022; Muik et al., 2022) although with attenuated replication and pathogenicity in animal models.

The emergence or re-emergence of the VOC strains internally requires the persistent monitoring of SARS-CoV-2 variants in clinic. In this study, we isolated two SARS-CoV-2 variant strains from patients infected in Laos and identified the Alpha and Delta variants by decoding the mutations of the spike protein. Both variant isolates can replicate efficiently in multiple cells and organs and cause moderate to severe lung pathology in hACE2 transgenic mice and hamsters.

## 2. Materials and methods

### 2.1. Cell culture

Huh-7, HPA-3, Caco-2, and Vero E6 cells were introduced from Kunming Cell Bank and Calu-3 was purchased from Procell Life Science & Technology Co., Ltd. Cells were grown in Dulbecco's Modified Eagle medium (DMEM) high glucose (Gibco, Beijing) supplemented with 10% fetal bovine serum (FBS) (Gibco, New Zealand), 1% penicillin/streptomycin (Solarbio, Beijing), and kept in a humidified 5% CO<sub>2</sub> incubator at 37 °C.

### 2.2. Virus isolation and identification

The suspected SARS-CoV-2-containing clinical specimens (nasopharyngeal swabs) were used for virus isolation. The nasopharyngeal swabs

were inoculated in Vero E6 cell lines and cultured in DMEM supplemented with 2% FBS and final concentrations of penicillin 100 units/mL, streptomycin 100 µg/mL. The culture was checked for cytopathic effect (CPE) daily. Once the CPE was observed, 200 µL cell culture supernatant was used for total nucleic acid extraction and Sanger sequencing for the confirmation of the presence of SARS-CoV-2. Furthermore, the virus was passaged three more times to obtain a working stock.

As for the whole genome sequencing of the variant isolates, the viral genomic RNA was extracted from viral culture supernatant using a high pure viral RNA kit (Roche, 11858882001, Germany) and purified according to the manufacturer's instructions. After that, the next-generation sequencing (NGS) library was prepared using a MultipSeq® Custom Panel (A186XV7) for BGI Platform (iGeneTech). The sequencing was performed using a NovaSeq 6000 Sequencing System (Illumina). All sequencing reads were mapped to the SARS-CoV-2 reference genome (MN908947.3) using Minimap2 (v2.1) (Li, 2018), and alleles with a frequency greater than 70% were designated as the consensus. The average sequencing depth on the viral genome was higher than 36,000-fold, and over 99.8% of the genomic region was covered by at least five-folds for the two samples. Mutations were called at positions with a minimum sequencing depth of 5-folds and a minimum frequency of 70% was required. Sequences alignment was done by Mafft (v7.453) (Katoh and Standley, 2013). The phylogenetic reconstruction was performed using 3087 representative global sequences retrieved from Nextstrain (<https://nextstrain.org>; as of 8<sup>th</sup> February 2022) and the two consensus genomes obtained in the current study using IQTREE (v1.6.12) (Nguyen et al., 2015).

The infectious titers of the variant isolates were quantified by an endpoint titration assay. Briefly, serial 10-fold dilutions of cultured SARS-CoV-2 stock were prepared using viral culture media and added into seeded 96-well plates. The 96-well plates were cultured at 37 °C (5% CO<sub>2</sub>) for 5–6 days and then observed for CPE. The 50% tissue culture infectious dose (TCID<sub>50</sub>) was finally calculated by the Reed-Muench method (Reed and Muench, 1938).

The prototyped SARS-CoV-2 strain was kindly provided by Guangdong Provincial Center for Disease Control and Prevention, Guangdong Province of China and was described in our previous studies (Xu et al., 2020; Song et al., 2020). The virus was propagated and titrated in Vero E6 cells, which were cultured in DMEM supplemented with 2% FBS. The viral sequence is accessible in the China National Microbiology Data Center (Accession No. NMDCN0000HUI).

### 2.3. Viral growth curves

The replication kinetics of the two isolated SARS-CoV-2 variants were evaluated in a growth curve and compared with the prototyped strain. In brief, Vero E6, Calu-3, Caco-2, Huh-7, HPA-3 and Vero E6 cells were infected with the two variant isolates and prototyped strain at a multiplicity of infection 0.1 (MOI 0.1), respectively, and the viral replication was evaluated every 12 h for 72 h post-inoculation using a quantitative real-time PCR (qRT-PCR) method.

### 2.4. Animal models

Twenty-four male hACE2 transgenic mice [C57BL/6-Tgtn(CAG-human ACE2-IRES-Luciferase-WPRE-polyA)Smoc] (8–12 weeks old) from the Shanghai Model Organisms and 24 golden hamsters (6–8 weeks old, male) from Beijing Vital River Laboratory Animal Technology Co., Ltd were maintained in the Experimental Animal Core Facility of the Kunming Institute of Zoology (KIZ), Chinese Academy of Sciences (CAS). The hACE2 mouse model used in our experiments was driven by CAG promoter and established via random transgenic technologies, which had a stable expression of hACE2 in multiple organs. For SARS-CoV-2 infections, all these animals were maintained at the ABSL-3 animal core facility of the KIZ on a 12-h light/dark cycle, with free access to food and water. After anesthetization with isoflurane (RWD Life Science,

Shenzhen), each group of mice or hamsters ( $n = 6$ ) were intranasally infected with a total of 20  $\mu\text{L}$  viral stock containing  $1 \times 10^4$  TCID<sub>50</sub> of SARS-CoV-2 prototype or variants. Body temperature and weight of all mice were recorded daily until sacrifice at three days post infection. Blood samples were collected for routine blood tests before infection and just before sacrifice. Tissue samples were collected from animals after euthanasia and stored in  $-80^\circ\text{C}$  freezer (for quantification of mRNA and protein levels) or in 4% paraformaldehyde (PFA; for histological analysis and immunofluorescence) until use, as described in our previous studies (Xu et al., 2020; Xie et al., 2021).

### 2.5. Quantitative real-time PCR (qRT-PCR)

Total RNA was extracted from homogenized mouse tissues using a TRIzol reagent (ThermoFisher Scientific, America). SARS-CoV-2 RNAs were detected by one-step RT-PCR using a THUNDERBIRD Probe One-Step qRT-PCR (TOYOBO, Japan) following the manufacturer's protocols. The total viral genomic RNA (gRNA) gene primers targeting the N protein described in our previous studies (Xu et al., 2020; Zeng et al., 2022) were used, including 5'-GGGGAAGTCTCCTGCTAGAAT-3', 5'-CAGACATTTT GCTCTCAAGCTG-3', probe 5'-FAM-TTGCTGCTGCTTGACAGATT-TRMR A-3'. The viral sub-genomic RNA (sgRNA) gene primers targeting the E protein were used, including 5'-CGATCTCTGTAGATCTGTTCTC-3', 5'-ATATTGCAGCAGTACGCACACA-3', probe 5'-FAM-ACACTAGCCATCCTT ACTGCGTTCG-TAMRA-3'. Serial dilutions of the SARS-CoV-2 RNA reference standard (National Institute of Metrology, China) were used in each run, in parallel to calculate copy numbers in each sample on ViiA 7 Real-Time PCR System (Applied Biosystems).

### 2.6. Histological analysis

We followed the same histological approach as described in our previous studies (Song et al., 2020; Xu et al., 2020). In brief, lung and brain tissues from SARS-CoV-2-infected mice or hamsters were fixed in 4% PFA (Biosharp) for at least 7 days, and then were paraffin embedded (ThermoFisher Scientific) and cut into 3- $\mu\text{m}$  sections following the standard procedure (RWD Life Science). The tissue slides were stained with H&E (Solarbio, Beijing) and imaged by the Leica DM 6B light microscopy.

### 2.7. Immunofluorescence

Immunofluorescence was performed as described in our previous studies (Zeng et al., 2019, 2020; Xu et al., 2020). Briefly, the sections were deparaffinized in xylene and rehydrated through a graded ethanol series. For antigen retrieval, sections immersed in saline sodium citrate buffer were microwave heated for 10 min three times. After cooled to room temperature, the sections were washed by  $1 \times$  phosphate-buffered saline (PBS) and blocked with 5% bovine serum albumin (BSA) in  $1 \times$  PBST (0.3% Triton-X 100 in PBS) at  $37^\circ\text{C}$  for 60 min. The commercial anti-nucleocapsid antibody (1:500, Catalog # A20021, ABclonal, Wuhan) were diluted in 3% BSA in  $1 \times$  PBST (0.2% Triton-X 100) and incubated overnight at  $4^\circ\text{C}$ . The sections were then washed, and immunoreactivity was detected using Donkey anti-Rabbit IgG Highly Cross-Adsorbed Secondary Antibody, Alexa Fluor Plus 555 (1:500; Thermo Fisher Scientific) for 1 h at room temperature. The sections were counterstained with 5  $\mu\text{g}/\text{mL}$  4',6-diamidino-2-phenylindole (DAPI; Thermo Fisher Scientific) for 10 min at room temperature and washed with  $1 \times$  PBST (0.2% Triton-X 100) three times. Slides were visualized using ZEISS LSM880 confocal microscope.

### 2.8. Statistical analysis

All appropriate data were analyzed using GraphPad Prism 8 (GraphPad Software Inc.). All hypothesis tests were performed as two-tailed tests. Specific statistical analysis methods are described in the

figure legends where results are presented. Values were considered statistically significant for  $P$  values  $< 0.05$ .

## 3. Results

### 3.1. Identification of the spike mutations of the SARS-CoV-2 Alpha and Delta isolates

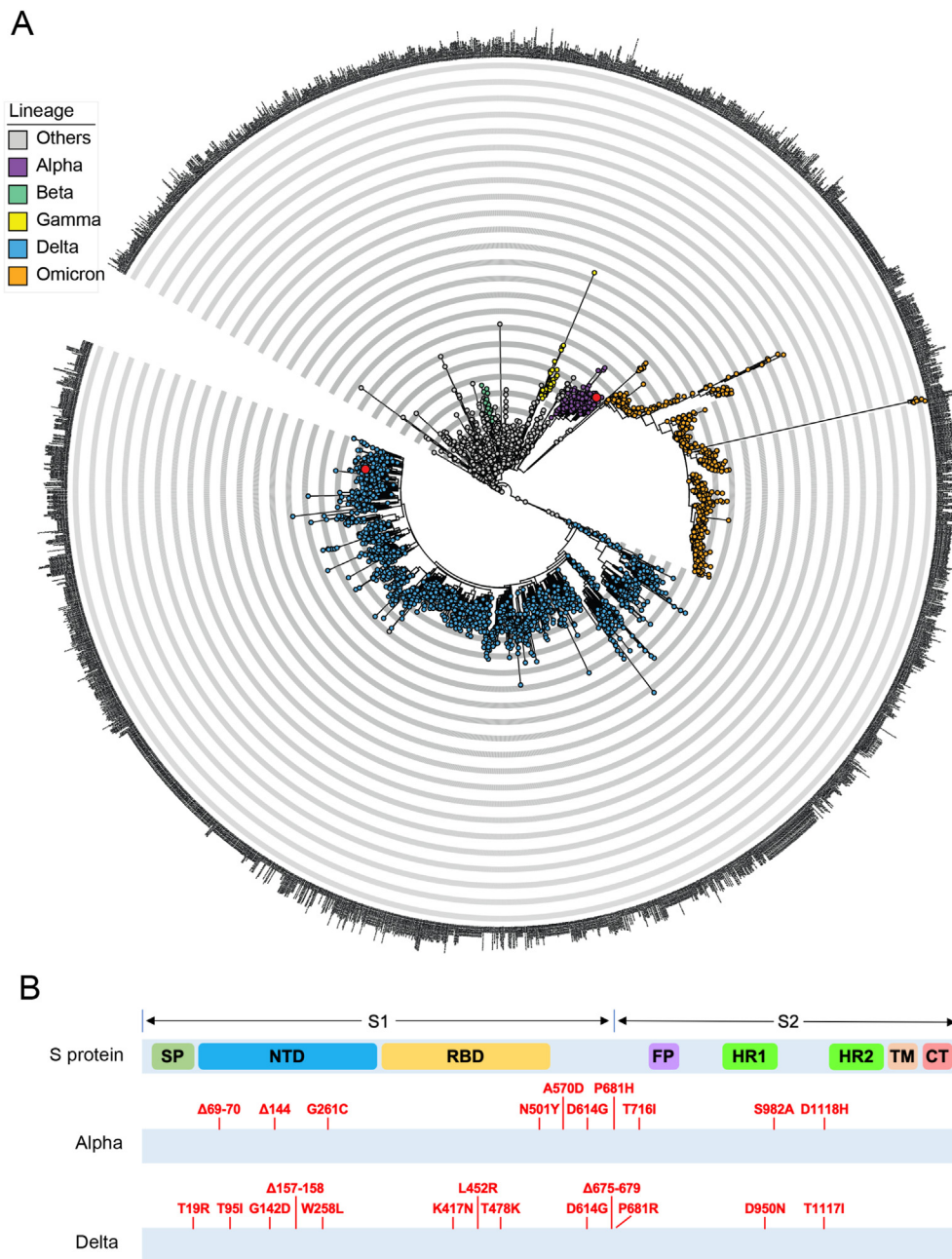
To monitor the epidemic features of SARS-CoV-2 variants, we tentatively isolated the variants in suspected SARS-CoV-2-containing nasopharyngeal swabs from patients infected in Laos. With the observation of the CPE in Vero E6 cells inoculated with two samples, total cellular RNA of each sample was purified and subjected to deep sequencing. The sequencing data (3087 genomes) were assembled and aligned with viral genomes of the existed SARS-CoV-2 variants by Nextstrain (<https://nextstrain.org/>) on Feb 8, 2022. As a result, two isolates were identified to belong to Alpha and Delta variants, respectively (Fig. 1A). Phylogenetic tree analysis within Nextstrain database (<https://nextstrain.org/>) showed that the Alpha (DWS1216) and Delta (DWSJ070) isolates were most close to one isolated from Cambodia (KHM B117 2021) (Supplementary Fig. S1) and from Georgia (USA GA GPHL 2509 2021) and Utah (USA UT CDC ASC210489950 2021) (Supplementary Fig. S2), respectively. Furthermore, nucleotide alignment analysis revealed that spike (S) protein of the Alpha isolate included three amino acid deletions at 69 and 70 ( $\Delta 69-70$ ) and 144 ( $\Delta 144$ ) sites, and five amino acid substitutions (G261C, N501Y, A570D, D614G and P681H) in the S1 subunit, and three amino acid substitutions (T716I, S982A and D1118H) in the S2 subunit (Fig. 1B). Two amino acid deletions at 157 and 158 ( $\Delta 157-158$ ), five amino acid deletions from 675 to 679 ( $\Delta 675-679$ ) sites, and nine amino acid substitutions (T19R, T95I, G142D, W258L, K417N, L452R, T478K, D614G and P681R) in the S1 subunit, and two amino acid substitutions (D950N and T1117I) in the S2 subunit were identified in the S protein of the Delta isolate (Fig. 1B). Taken together, we isolated two SARS-CoV-2 variants from the nasopharyngeal samples and identified them as Alpha and Delta variants, respectively.

### 3.2. The Alpha and Delta isolates are replicated differentially in multiple cells

To evaluate the replication capacity of the SARS-CoV-2 isolates, we performed a viral growth curve by examining viral titers in multiple cells that have been most used in SARS-CoV-2 infection at an MOI of 0.1 (Sasaki et al., 2021; Shuai et al., 2022). In lung Calu-3 cells, the Alpha and Delta isolates replicated faster than the prototyped SARS-CoV-2 that was described in our previous studies (Zeng et al., 2022; Xu et al., 2020) within initial 12 h post-infection (hpi), and thereafter replication of the Alpha and Delta isolates slowed down compared to the prototype (Fig. 2A). Similar replication features of the Alpha and Delta isolates were also observed in Caco-2 cells (Fig. 2B). In Huh-7 cells, the prototype showed a higher replication capacity than the Alpha and Delta isolates from 12 to 72 hpi (Fig. 2C). The Delta isolate replicated faster especially from 36 to 60 hpi than the prototype and Alpha isolate that were indistinguishable regarding replication capacity in Vero E6 cells (Fig. 2D). However, we did not observe the replication of the prototype and the Alpha and Delta isolates since 12 hpi in HPA-3 cells (Fig. 2E). Taken together, the Alpha and Delta isolates replicated differentially in the multiple cells.

### 3.3. Viral replication of Alpha and Delta isolates in multiple organs of hACE2 transgenic mice and hamsters

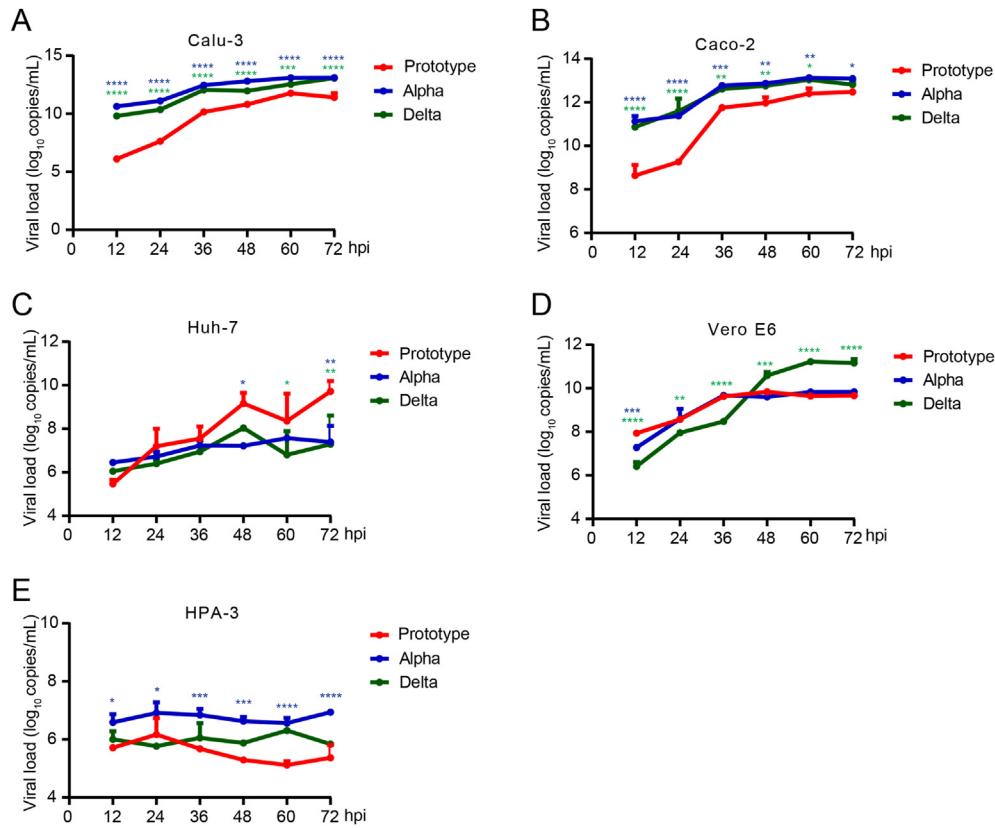
To examine replication of the Alpha and Delta isolates *in vivo*, we intranasally infected hACE2 transgenic mice and hamsters with a titer of  $1 \times 10^4$  TCID<sub>50</sub> for each isolate. Animals were euthanized three days after infection. We observed that body weight of the hACE2 transgenic mice infected with the prototype and Delta isolates decreased compared to the



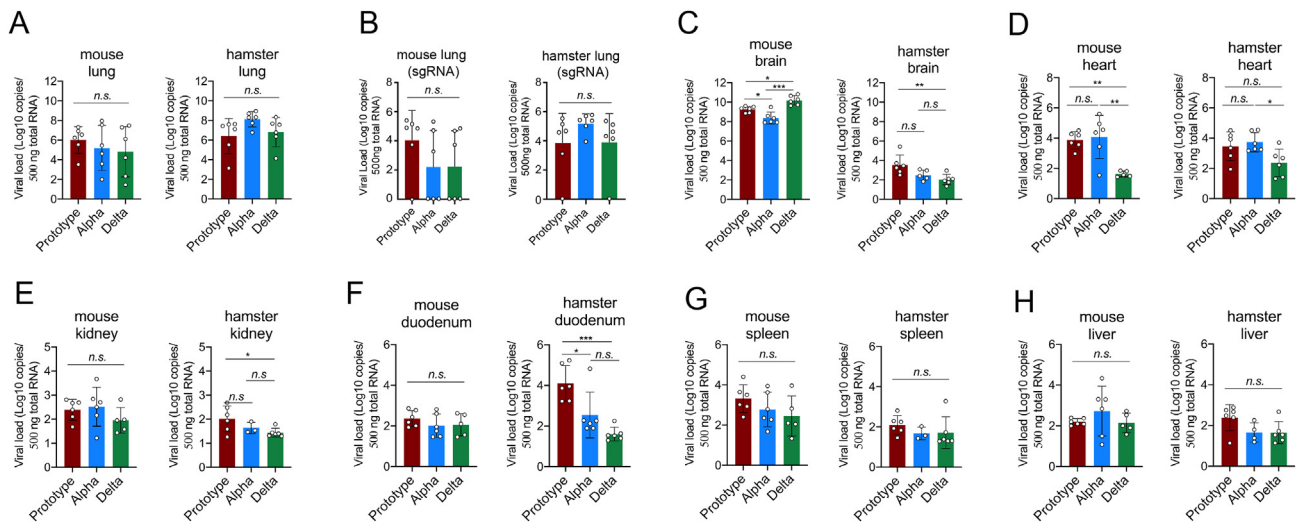
**Fig. 1.** Identification of the spike (S) mutations in the SARS-CoV-2 isolates. **A** Phylogenetic analysis of the spike sequences of the SARS-CoV-2 isolates within the existed SARS-CoV-2 variants by Nextstrain (<https://nextstrain.org/>). Red circles indicate the SARS-CoV-2 isolates in this study. **B** Schematic diagram showing the spike mutations in the Alpha and Delta isolates compared to the prototyped SARS-CoV-2. SP, signal peptide; NTD, N-terminal domain; RBD, receptor-binding domains; FP, fusion peptide; HR1, heptapeptide repeat sequence 1; HR2, heptapeptide repeat sequence 2; TM, transmembrane domain; CT, cytoplasmic domain.

uninfected mice at 3 dpi, while body weight of the Alpha isolate-infected mice kept unchanged (Supplementary Fig. S3A). Nevertheless, body weight of hamsters that were infected with the prototype and the Alpha and Delta isolates was indistinguishable compared to the uninfected ones at 3 dpi (Supplementary Fig. S3B). We next quantified the SARS-CoV-2 genomic RNA (gRNA) or sub-genomic RNA (sgRNA) within multiple organs of hACE2 transgenic mice and hamsters. The Alpha and Delta isolates showed an identical replication capacity with a comparable gRNA and sgRNA to the prototype in the lungs of the mice and hamsters (Fig. 3A and B). However, we observed a differentiated replication dynamics in the brains of the mice and hamsters, whereas the Alpha and Delta isolates showed decreased and increased viral load, respectively,

compared to the prototype in the mice. The Delta isolate, but not the Alpha, showed reduced replication compared to the prototype in the hamsters (Fig. 3C). In heart, we observed a similar replication feature that the Delta isolate replicated lower than either the prototype or the Alpha in the mice and hamsters (Fig. 3D). Additionally, we did not observe the difference of the replication between the Alpha and Delta isolates and the prototype in the kidney and duodenum of the mice. The Delta isolate had a decrease of viral load compared to the prototype in the hamsters, while such decrease was also observed for the Alpha isolate only in the duodenum but not in kidney (Fig. 3E and F). However, viral load of the Alpha and Delta isolates was similar to the prototype in both liver and spleen of the mice and hamsters (Fig. 3G and H).



**Fig. 2.** Viral growth curves of the SARS-CoV-2 isolates in multiple cells. A–E The Calu-3 (A), Caco-2 (B), Huh-7 (C), Vero E6 (D) and HPA-3 (E) cells were infected with the prototype SARS-CoV-2, the Alpha or Delta isolate at an MOI of 0.1. Total cellular RNAs were collected at the indicated timepoints to quantify the SARS-CoV-2 genome. Data were shown as mean ± standard deviation (n = 2). Statistical analysis was performed by two-way ANOVA with Bonferroni's *post hoc* test. \**P* < 0.05, \*\**P* < 0.01, \*\*\**P* < 0.001, \*\*\*\**P* < 0.0001. The *P* values marked in green color refer to the comparisons between the prototype SARS-CoV-2 and the Delta isolate, and the values marked in blue refer to the comparisons between the prototype SARS-CoV-2 and the Alpha isolate.



**Fig. 3.** Viral loads of Alpha and Delta isolates in multiple organs of hACE2 transgenic mice and hamsters. A–H Viral load (gRNA) of the Alpha and Delta isolates in lung (A), brain (C), heart (D), kidney (E), duodenum (F), spleen (G) and liver (H) tissues in infected hACE2 transgenic mice (left panel) and hamsters (right panel) at 3 dpi, as determined by quantitative real time-PCR. B Quantification of SARS-CoV-2 subgenomic RNA (sgRNA) in lung tissues of the prototype SARS-CoV-2, Alpha- and Delta-infected hACE2 transgenic mice (left panel) and hamsters (right panel). Values are presented as mean ± standard deviation; n = 6 (with exclusion of some samples in certain group having missing data, so that the dots in each bar showed inconsistent numbers). Statistical analysis was performed by one-way ANOVA with Bonferroni's *post hoc* test. n.s., not significant, \**P* < 0.05, \*\**P* < 0.01, \*\*\**P* < 0.001.

### 3.4. Pathology of the Alpha and Delta isolates in hACE2 transgenic mice and hamsters

We first determined SARS-CoV-2 replication by examining the viral nucleocapsid protein via immunofluorescence assay. The results showed that, similar to the prototype, expression of the nucleocapsid protein of the Alpha and Delta isolates was abundantly present in lung cells (Fig. 4), demonstrating that the Alpha and Delta isolates can replicate efficiently in lungs. To further examine pathogenicity of the Alpha and Delta isolates *in vivo*, we performed hematoxylin and eosin (H&E) staining for histopathology in lung sections of the infected mice and hamsters. Compared to the uninfected mice, severe interstitial pneumonia with thickened alveolar septa, severe infiltration of inflammatory immune cells, and moderate interstitial congestion were observed in lungs of the prototype-infected mice, while the Alpha isolate-infected lungs showed relative moderate interstitial pneumonia but severe interstitial congestion. Infection of the Delta isolate caused severe interstitial pneumonia with thickened alveolar septa and infiltration of inflammatory immune cells, and obviously more severe interstitial congestion than the prototype and Alpha isolate in the lungs of the mice (Fig. 5A). In hamsters, severe interstitial pneumonia with thickened alveolar septa, severe infiltration of inflammatory immune cells, and severe interstitial congestion were observed in the prototype-, the Alpha-, and the Delta-infected lungs, and the severity was overall indistinguishable between them (Fig. 5B). These results demonstrated that the Alpha and Delta isolates could infect lung tissues and cause detectable lung pathology in hACE2 transgenic mice and hamsters.

We also evaluated whether the infection of the prototype, the Alpha, and the Delta isolates would cause potential brain pathologies in addition to lung pathology in the hACE2 transgenic mice and hamsters. The H&E staining for the brain sections of the infected animals did not show very severe brain pathologies. Yet we observed a few pathological features related to neuronal degeneration in some brain sections (Fig. 5C). Furthermore, we found the occurrence of neuroinflammation as indicated by gliosis in some brain sections of prototype- and Alpha-infected mice, but not in the Delta-infected mice (Fig. 5D). These preliminarily pathological results suggest that long-term outcome of SARS-CoV-2 infection on brain deserves to be further evaluated.

## 4. Discussion

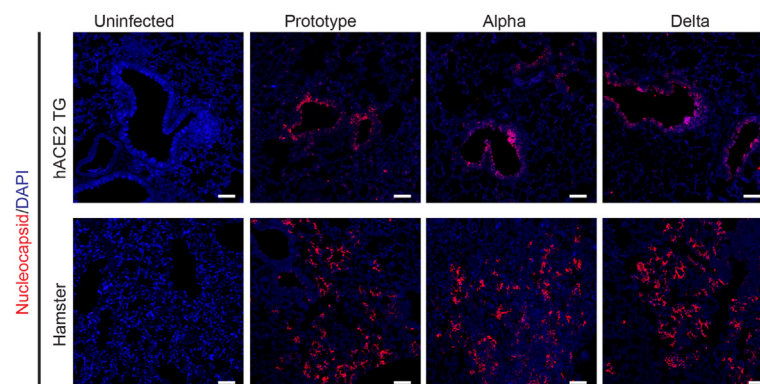
With the persistent mutations of the spike protein responsible for cell entry and immune escape under the evolutionary pressure from host (Shu et al., 2021; Castiglione et al., 2021), it is important to monitor SARS-CoV-2 variants globally (Tao et al., 2021). In the present study, the Alpha and Delta variants that were isolated from

nasopharyngeal samples in Laos were characterized by replication kinetics in multiple cells and pathogenicity in both hACE2 transgenic mice and hamsters. Our live virus infection assays revealed that the replication of the Alpha and Delta isolates was dramatically increased in Calu-3 and Caco-2 cells. This result is in agreement with the previous reports and preprints that demonstrated an enhanced infectivity of Alpha- and Delta-pseudovirus or live Alpha and Delta variants in Calu-3 and Caco-2 cells (de Souza et al., 2022; Lubinski et al., 2022; Rajah et al., 2021). However, such impact was not similarly observed for the Alpha and Delta isolates in Huh-7, Vero E6 and HPA-3 cells. These results suggested that the SARS-CoV-2 variants possessed different replication kinetics between cells.

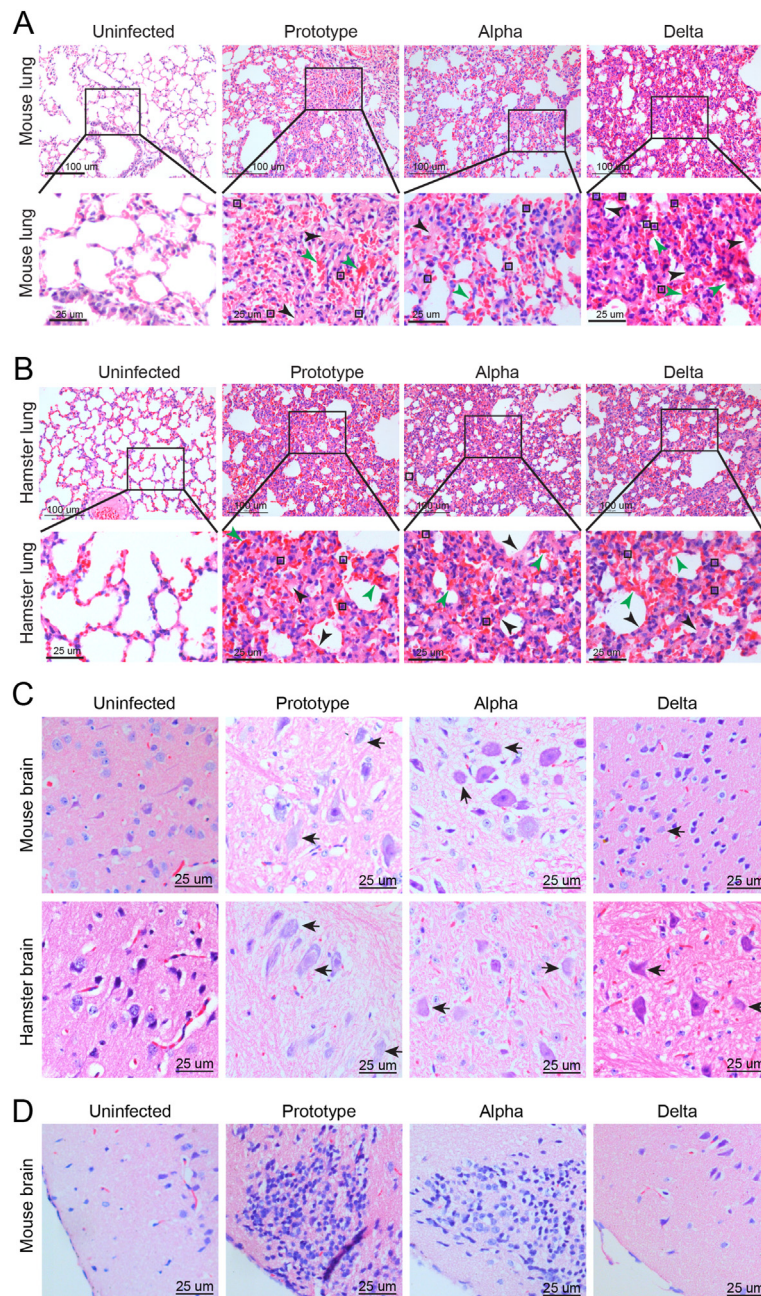
The Alpha and Delta isolates that we identified in the present study showed several different mutation features of the spike protein from the corresponding reference variants from the WHO. Compared to the referenced Alpha variant, where the deletion or mutations of the spike protein includes  $\Delta 69-70$ ,  $\Delta 144$ , N501Y, A570D, D614G, P681H, T716I, S982A and D1118H, the newly mutation of G261C was present in the Alpha isolate. In addition, the Delta isolate had the newly mutations of T95I, G142D, W258L, K417N and T1117I in the spike protein compared to the referenced Delta variant (Planas et al., 2021). Although it is now in details unknown whether these newly mutations have an effect on viral biological features such as the binding affinity to ACE2 receptor and the resistance to neutralizing antibody, the Alpha and Delta isolates showed similar replication kinetics in Calu-3 and Caco-2 cells and pathogenicity in animal models as described in the present study when compared to the previous studies on their referenced counterparts (de Souza et al., 2022; Lubinski et al., 2022; Rajah et al., 2021). These results suggested that both SARS-CoV-2 variant isolates would be appropriate to be used in the evaluation of anti-viral drugs or vaccines in cells and animals.

Studies have shown that K417N mutation is present in spike of a sub-lineage of Delta variant, called Delta plus (Delta+) (Moyo-Gwete et al., 2022). Further, this mutation also exists within spike of Beta (B.1.351) (Liu et al., 2022a) and all Omicron variants including BA.1, BA.2, BA.4, BA.5, and BA.2.12.1 (Kumar et al., 2022) (Supplementary Fig. S4). Previous studies have shown K417N mutation led to reduced cellular immune responses (Zhang et al., 2021) while might moderately decrease the binding affinity to human ACE2 (Han et al., 2022). Another preprint reported that several Omicron spike mutations including K417N were very disruptive to therapeutic monoclonal antibodies (Chen and Wei, 2022). These existing clues suggest that K417N mutation could confer the Delta isolate in our current study with known biological function, which should be noted when it will be used to evaluate COVID-19 vaccines.

SARS-CoV-2 Alpha and Delta variants that we isolated can effectively replicate in the cell lines and multiple organs of infected animal models



**Fig. 4.** Viral protein of the SARS-CoV-2 isolates in infected hACE2 transgenic mice and hamsters. Immunofluorescence assay examined the SARS-CoV-2 nucleocapsid protein of lung tissues in the prototype-, Alpha- and Delta-infected hACE2 transgenic mice (upper panel) and hamsters (bottom panel) at 3 dpi. The uninfected lung tissues were used as control. Scale bar, 100  $\mu$ m. Nuclei were stained by DAPI.



**Fig. 5.** Histopathology of lung and brain tissues in the Alpha- and Delta-infected hACE2 transgenic mice and hamsters. **A, B** Histopathology of lung tissues from the prototype SARS-CoV-2, the Alpha isolate, or the Delta isolate infected hACE2 transgenic mice (**A**) and hamsters (**B**) at 3 dpi. The uninfected lung tissues were used as control. Histopathological observations indicated the presence of interstitial pneumonia with thickened alveolar septa (black arrow), interstitial congestion (green arrow), and infiltration of lymphocytes (black frames). Scale bar, 25 or 100  $\mu\text{m}$  as indicated. **C, D** H&E staining for brains of hACE2 transgenic mice and hamsters infected with the indicated viruses showed neuronal degeneration as indicated by black arrows (**C**) and gliosis (**D**). Scale bar, 25  $\mu\text{m}$ .

and consequently cause detectable lung pathology. For *in vitro* infection assay, we found that the Alpha and Delta variants replicated more effectively than the prototype in Calu-3 and Caco-2 cells, likely due to higher affinity between their spike and human ACE2 (Saito et al., 2022). This observation is consistent with the results from the recent study (Shuai et al., 2022) where several SARS-CoV-2 variants including Alpha and Delta were evaluated in the same cells. Furthermore, we performed *in vivo* assay and found no significant difference regarding sgRNA copies and pathology of lung tissues between Alpha and Delta and the prototype in hACE2 transgenic mice and hamsters. Such phenotypes were similarly

observed in K18-hACE2 transgenic mice (Shuai et al., 2022) in which a comparable viral sgRNA copies were documented between Delta and the wild-type virus in nasal turbinate and lung.

## 5. Conclusions

In conclusion, we isolated the Alpha and Delta variants from Laos and their key features of the spike protein sequences have been decoded. Both variant isolates can replicate efficiently in multiples cells and cause moderate to severe lung pathology in the models of mice and hamsters.

## Data availability

The sequencing data of the Alpha and Delta isolates were deposited in the National Microbial Data Center (NMDC) with accession number NMDC60042792 and NMDC60042793.

## Ethics statement

All experiments with live SARS-CoV-2 were conducted in the animal biosafety level 3 (ABSL3) facility in the KIZ, CAS. The Institutional Animal Care and Use Committee of KIZ, CAS, approved all experimental procedures and protocols used in this study (Approval No. IACUC-RE-2021-12-007).

## Author contributions

Xiao-Li Feng: formal analysis, methodology, investigation, visualization, writing-review & editing. Dandan Yu: investigation, visualization. Mi Zhang: resources. Xiaohong Li: investigation. Qing-Cui Zou: formal analysis, methodology, investigation, visualization. Wentai Ma: formal analysis, visualization. Jian-Bao Han: investigation. Ling Xu: investigation, visualization. Cuixian Yang: resources. Wang Qu: supervision. Zhong-Hua Deng: supervision. Junyi Long: investigation, supervision. Yanghaopeng Long: investigation, supervision. Mingkun Li: resources. Yong-Gang Yao: conceptualization, funding acquisition, writing-review & editing. Xing-Qi Dong: resources. Jianxiong Zeng: investigation, visualization, writing-original draft. Ming-Hua Li: conceptualization, investigation, validation, project administration.

## Conflict of interest

The authors declare no competing interests.

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## Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.virs.2022.09.007>.

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