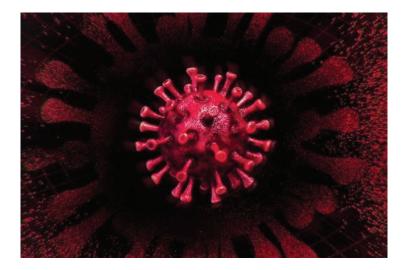
U.S. CDC Indicates That Vaccines Might Not Protect Against New UK Variant B.1.1.7! New Details Show New Variant Could Be The Expected Super Strain

The U.S. CDC updated its site with details of the emerging SARS-CoV-2 Variant VOC 202012/01 (Also known as B.1.1.7) along with possible implications.

The CDC site indicated that the current COVID-19 Vaccines approved by the U.S. FDA ie Pfizer's and Moderna's vaccines might not be able to offer protection against this new variant! https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-emerging-variant.html



To quote the CDC site directly that was updated the last few hours," What implications could the emergence of new variants have?-Ability to evade vaccine-induced immunity. FDA-authorized vaccines are "polyclonal," producing antibodies that target several parts of the spike protein. The virus would likely need to accumulate multiple mutations in the spike protein to evade immunity induced by vaccines or by natural infection."

Meanwhile we have vaccine developers and even certain WHO officials trying to downplay the situation by making statements that the new COVID-19 vaccines might not be affected by the new variants or in the case of BioNtech CEO, Turkish origin Uğur Şahin now saying that perhaps the antibodies produced, although not specific to this new variant could still perhaps offer protection!

We also have certain journalist and so called 'experts' in the last 24 hours again trying to downplay on the seriousness of the new emerging variant in UK that is fast spreading to the rest of the world (As they did during the start of the COVID-19 crisis and also on the issue of SARS-CoV-2 mutations).

New data appearing on this strain also contradicts Thailand Medical News earlier coverage about the strain. https://www.thailandmedical. news/news/emerging-sars-cov-2-variants-in-uk-like-the-b-1-1-7-strain-and-the-501-v2-strain-in-south-africa-and-elsewhere-will-changecourse-of-covid-19-badly

In our earlier coverage we said that the strain had 14 mutations on it but latest emerging data indicate that it has a record of 23 mutations on it! (Source: COVID-19 Genomics UK Consortium).

Importantly what is concerning researchers and scientists about lineage 1.1.7 is that, alongside six mutations that don't change any protein, there are 17 (14 mutations and three deletions) that do!

A preliminary genomic analysis of lineage 1.1.7 shows that several of these mutations have been described before in other lineages, and have been found to change the way that the virus behaves. https://virological.org/t/preliminary-genomic-characterisation-of-anemergent-sars-cov-2-lineage-in-the-uk-defined-by-a-novel-set-of-spike-mutations/563

The 501Y mutation on it has been shown to increase how tightly the protein binds to a receptor on the surface of human cells. This helps to increase infectivity and transmissions. https://www.thailandmedical.news/news/coronavirus-news-new-sars-cov-2-variant-with-n501y-mutation-in-receptor-binding-motif-of-the-spike-protein-fast-becoming-prevalent-in-uk

Another significant spike deletion mutations Δ H69/ Δ V70 has been identified in viruses that evolved to evade the natural immune response in some immunocompromised patients. https://www.thailandmedical.news/news/new-mutations-exhibiting-sars-cov-2-spike-deletion-h69-v70-that-can-escape-immune-recognition-fast-becoming-prevalent

What this means is that while the virus might most probably make you asymptomatic or to suffer only mild symptoms, you will diplay viral persistence and viral shedding longer and also while the virus damages you internally, you might or possible die eventually due to organ failure as was witnessed in past cases.

https://www.thailandmedical.news/news/covid-19-fallacies-woman-still-sheds-sars-cov-2-virus-after-more-than-4-months-of-getting-infected, -challenging-current-misconceptions

https://www.thailandmedical.news/news/breaking-covid-19-news-immunocompromised-individuals-contracting-covid-19-can-exhibit-prolonged-sars-cov-2-shedding-for-weeks-to-months

Another significant mutation P681H is immediately adjacent to the furin cleavage site, a known location of biological significance. (Again indicating better infection and transmission)

Another important mutation is the ORF8 stop codon (Q27stop): This mutation is not in the spike protein but in a different gene (in open reading frame 8), the function of which is unknown. Similar mutations have occurred in the past. In Singapore, one strain with this type of mutation emerged and disappeared. https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-emerging-variant.html

However what is not mentioned was that those patients who had these mutations in Singapore displayed disease severity and died!

Other identified mutations found on it include deletion 144, A570D, D614G, T716I, S982A, D1118H, S982A, SGF 3675-3677 deletion, A1708D, T1001I, TR52I, Y73C, D3L and S235F.

A few of these mutations are suspected to be antibody resistant mutations because of their locations and are being investigated.

There are speculations by study teams that there might also be more mutations that are being investigated.

With the number of mutations especially on the spike protein, the chances of it evading the vaccine induced polyclonal antibodies are extremely high.

None of the monoclonal or cocktail antibody treatments by Eli Lily or Regeneron will be able to work against the new variant.

The U.S. CDC also warned of the variant's ability to evade detection by specific diagnostic tests. Most commercial polymerase chain reaction (PCR) tests have multiple targets to detect the virus, such that even if a mutation impacts one of the targets, the other PCR targets will still work. But considering the number of mutations on this variant, it most probably escaped detection that resulted in its spread. It was only picked up by genomic sequencing. (PCR technicians and manufacturers have already started to remedy the situation)

Even if this new variant is not the expected Super variant of the SARS-CoV-2 coronavirus that many scientist speculate will ultimately emerge in the next few months to wipe out a large percentage of the global population, it shows that the virus is well on its way to becoming one and it is only a matter of time.

There is also another issue that many people are being complacent or ignorant about, even if more people are infected faster by the new variant but are asymptomatic, as a result of the variant having the ability to evade human host immune response, it does not mean that this is good news. Rather this will ensure longer viral persistence that could result in worst health and medical outcomes and even death eventually.