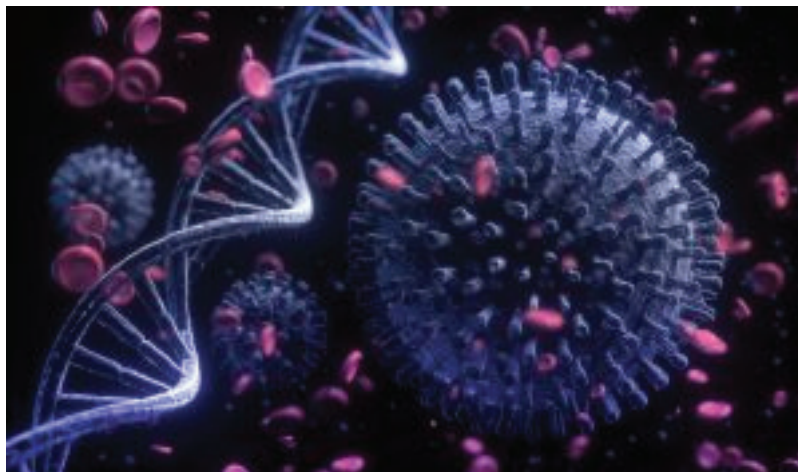


# COVID-19 Mutations: Scientists Discover That U.K. Variant B.1.1.7 Is Now Further Mutating To Include The E484K Mutation To Evade Vaccines!

**COVID-19 Mutations:** Authorities from Public Health England have reported alarming discovery this week: The B.1.1.7 variant that has brought that country to its knees appears to be further mutating to gain a mutation that could help it elude vaccines. [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/957504/Variant\\_of\\_Concern\\_VOC\\_202012\\_01\\_Technical\\_Briefing\\_5\\_England.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/957504/Variant_of_Concern_VOC_202012_01_Technical_Briefing_5_England.pdf)



The U.K B.1.1.7 variant is becoming increasingly concerning as it further mutates. Samples of the more transmissible B.1.1.7 coronavirus variant, which was first detected in the UK, have acquired a mutation, the E484K mutation that will help them evade immune protection.

The E484K mutation is already present in the B.1.351 variant in South Africa, which is now spreading worldwide.

The local transmission of the B.1.351 variant has been confirmed in the US, several European countries including the UK, Israel and much of sub-Saharan Africa. It isn't yet clear if B.1.351 is more transmissible, but it is certain that it can partly evade the immunity we develop from natural infection by other coronavirus variants and from vaccines. The big worry is that it could evolve further and completely evade immunity, undermining vaccination efforts.

Thailand Medical News suggest that there is no need for countries to close its borders and restrict travellers from countries possessing the variants to prevent the spread of this variants for a very simple reason in that the E484K mutation is not only an innovative phylogenetic event for viral evolution but is an occurrence that as strains across the world adapt and evolve, will eventually develop and if it is not the specific E484K mutation, it will be a relatively closer mutation to help it evade immune response and vaccines and might be more or less potent in that respect. Closing borders or restricting travel is not going to stop these mutations from appearing!

The introduction of convalescent plasma and monoclonal treatment protocols along with the vaccines will eventually lead to more potent mutations emerging as the virus strive to survive. The approach from the beginning of the pandemic should have been focused on antiviral drugs to halt the virus replication and not a strategy of 'playing' around with antibodies as its ultimately going to backfire badly as we had warned many times.

What is more worrisome however is that because of some stupid so called 'virology experts' in the beginning of the pandemic claiming that the virus was not mutating or that if it mutates, it would be slow and most probably less harmful, there was less monitoring of the developments of these variants, some of which cannot be detected by the RT-PCR tests currently being used worldwide. There are most probably more such variants exhibiting various kinds of mutations and deletions besides the identified ones in UK, South Africa and Brazil. It is little wonder if countries like Thailand, Cambodia, Myanmar, India and Mexico have more worrying variants that we are not even aware of or if governments are concealing that data.

Also people have to realize that all these variants can be dangerous to the human race even as some of these variants might possess mutations so that individuals do not materialize any symptoms upon initial infection. Instead as a result of being able to 'dismantle' the human host immune response, the virus is able to increase viral loads and do more damage to the human host in other ways and lead to other medical conditions materializing and even death months down the road.

The B.1.1.7 variant first came to light in December as scientists determined that it had rapidly become more common across Britain in just a couple of months. Since the discovery of B.1.1.7 in Britain, the variant has been reported in 72 other countries. The United States confirmed its first case of B.1.1.7 on Dec. 29. Since then, the U.S. Centers for Disease Control and Prevention has recorded 467 samples of the variant in 32 states.

Authorities from Public Health England said that the worrisome mutation known as E484K appears to have arisen in 11 of more than 200,000 B.1.1.7 coronavirus variant samples in the United Kingdom. Two variants in Brazil have also gained the same mutation.

Worryingly British health officials estimated that the variant's rate of infection is 25 to 40 percent higher than that of other forms of the coronavirus. Some preliminary evidence suggests that it may also cause more deaths.

It has been reported that in South Africa, where another more infectious variant is now dominant, the Novavax and Johnson & Johnson vaccines have both been less effective in trials. That variant also carries the E484K mutation, and it has been reported in 31 countries so far. In the United States, it has turned up in Maryland and in South Carolina, according to the CDC.

Local transmission has also been reported in Belgium, Austria and Israel, and in several countries in Africa including Zambia, Mozambique, Botswana and Tanzania. Additionally, a number of other countries including Australia, New Zealand, China and Japan have detected cases linked to travel, but haven't reported local spread.

With many countries doing little or no sequencing, it is likely that the B.1.351 variant is more widespread than these figures suggest. According to Björn Meyer at the Pasteur Institute in France, when the city of Cologne in Germany started doing a lot more sequencing, it found that 5 per cent of coronavirus infections were due to the B.1.351 variant, revealing that the virus was already well established.

Thailand Medical News keep on stressing that countries have to start preparing for the catastrophic Third Wave of the pandemic which is expected to start sometime around July or maybe earlier as these variants become more prevailing and dominant and as we see more cases of reinfections and also co-infections with two or more different strains and manifestations of ADE or antibody dependent enhancements, all brought about by the current wrong approaches of tackling the COVID-19 pandemic by the Western World. Hopefully it will be fun times as perhaps the smart and prepared can get a foothold of things once again.