**Category:** Letter

**West Nile virus detection in horses in three Brazilian states.**

Erica Azevedo Costa[1^], Marta Giovanetti[2,3^], Lilian Silva Catenacci[4^], Vagner

Fonseca[3,5,6^], Flavia Aburjaile[2,3^], Felipe Melo Campos Iani[7], Marcelo Adriano da

Cunha e Silva Vieira[8], Danielle Freitas Henriques[9], Daniele Barbosa de Almeida[9],

Maria Isabel Maldonado Coelho Guedes[1], Beatriz Senra Álvares da Silva Ramos[1],

Aila Solimar Gonçalves Silva[1], Tulio de Oliveira[5], Karina Ribeiro Leite Jardim

Cavalcante[10], Noely Fabiana Oliveira de Moura[10], Alessandro Pecego Martins

Romano[10], Carlos F. Campelo de Albuquerque[11], Lauro César Soares Feitosa[12],

José Joffre Martins Bayeux[13], Raffaella Bertoni Cavalcanti Teixeira[14], Osmaikon

Lisboa Lobato[15], Silvokleio da Costa Silva[15], José Lourenço[16], Luiz Carlos Junior

Alcantara[2,3*].

**Authors Affiliations**

[1]Departamento de Medicina Veterinária Preventiva, Escola de Veterinaria,

Universidade Federal de Minas Gerais, Belo Horizonte, Minas Gerais, Brazil;

[2]Laboratório de Flavivírus, Instituto Oswaldo Cruz, Fundação Oswaldo Cruz, Rio de

Janeiro, Brazil; [3]Laboratório de Genética Celular e Molecular, Universidade Federal

de Minas Gerais, Belo Horizonte, Minas Gerais, Brazil; [4]Departamento De

Morfofisiologia Veterinária, Universidade Federal do Piauí; [5]KwaZulu-Natal

Research Innovation and Sequencing Platform (KRISP), School of Laboratory

Medicine and Medical Sciences, College of Health Sciences, University of KwaZulu-

Natal, Durban, South Africa; [6]Coordenação Geral dos Laboratórios de Saúde

Pública/Secretaria de Vigilância em Saúde, Ministério da Saúde, (CGLAB/SVS-MS)

Brasília, Distrito Federal 70719-040, Brazil; [7]Laboratório Central de Saúde Pública,

Fundação Ezequiel Dias, Belo Horizonte, Brazil; [8]Piaui State Health Department,

Terezina, Brazil;

[9]Seção de Arbovirologia e Febres Hemorrágicas, Instituto Evandro Chagas,

Ministério da Saúde; [10]Coordenacao Geral das Arboviroses, Secretaria de Vigilância

em Saúde/Ministério da Saúde, Brasília, Distrito Federal, Brazil; [11]Organização Pan-

Americana da Saúde/Organização Mundial da Saúde, Brasília-DF, Brazil;

[12]Departamento de Clínica e Cirurgia Veterinária, Centro de Ciências Agrárias,

Universidade Federal do Piauí, Teresina, Piauí, Brazil; [13]UNIVAP- Universidade Vale

do Paraíba, Faculdade de Ciências da Saúde, Medicina Veterinária, Urbanova, São

José Dos Campos, SP; [14]Departamento de Clinica e Cirurgia Veterinárias, Escola de

Veterinaria, Universidade Federal de Minas Gerais, Belo Horizonte, Minas Gerais,

Brazil; [15]Laboratório de Genética e Conservação de Germoplasma, Campus Prof.ª

Cinobelina Elvas, Universidade Federal do Piauí, Bom Jesus, Piauí, Brazil;

[16]Department of Zoology, University of Oxford, Oxford OX1 3PS, UK.

**Keywords:** West Nile virus, genomic monitoring, molecular detection, Brazil

^Denotes equal contribution

* **Correspondence should be addressed to:** luiz.alcantara@ioc.fiocruz.br

## Abstract

We report genetic evidence of WNV circulation from southern and northeastern Brazilian states isolated from equine red blood cells. In the northeastern state the tenth human case was also detected, presenting neuroinvasive disease compatible with WNV infection. Our analyses demonstrate that much is still unknown on the virus' local epidemiology. We advocate for a shift to active surveillance, to ensure adequate control for future epidemics with spill-over potential to humans.

## Text

West Nile virus (WNV), a member of the *Flaviviridae* family, was first identified in the West Nile district of Uganda in 1937, but is nowadays commonly found in Africa, Europe, North America, the Middle East, and Asia [1-3].

WNV transmission is maintained in a mosquito-bird cycle, for which the genus *Culex*, in particular *Cx. pipiens*, are considered the principal vectors [4]. WNV can infect humans, equines and other mammals, but these are considered "dead-end" hosts, given their weak potential to function as amplifying hosts to spread infection onwards [5, 6]. Around 80% of WNV infections in humans are asymptomatic while the rest may develop mild or severe disease. Mild disease includes fever, headache, tiredness and vomiting [7, 8], while severe disease (neuroinvasive) is characterized by high fever, coma, convulsions and paralysis [7, 8]. Equine infections can occasionally cause neurological disease and death [7, 8], such that equines typically serve as sentinel species for WNV outbreaks with potential for spill-over into human populations.

Genome detection of WNV in South America were originally reported in horses (Argentina in 2006) and captive flamingos (Colombia, in 2012) [9, 10]. The first ever sequenced genome in Brazil was in 2019, when the virus was isolated from a horse sicked with severe neurological disease in the Espírito Santo state [11]. Despite multiple studies reporting serological evidence suggestive of WNV circulation in Brazil [11-13] and reports human WNV disease confirmed cases in the Piauí state [13], much is unknown about genomic diversity, evolution and transmission dynamics across the country.

Here, we report genetic evidence of WNV circulation in three Brazilian states extracted from equine red blood cells (RBCs) with neurological or ophthalmic disease and use a computational approach to explore the theoretical transmission potential of WNV within one of those states.

Samples (RBCs) from three horses with suspected WNV infection obtained from southern (Minas Gerais and São Paulo) and northeastern (Piauí) Brazilian states were sent for molecular diagnosis at the *Departamento de Medicina Veterinária Preventiva* at the Federal University of Minas Gerais (UFMG) (**for details see Appendix**).

RNAs were extracted from red blood cells and tested using an in-house PCR assay (**see Technical Appendix for details**). WNV-specific RT-PCR amplification products were obtained using a combination of nested and multiplex PCR scheme (**Figure 1 panel A, B**) (**see Technical Appendix for details**). A multiplex PCR

primer scheme was then designed (**Appendix Table S1**) to generate complete

genomes sequences by means of portable nanopore sequencing. The published

WNV genome from Brazil (MH643887) was used to generate a mean 98.4%

consensus sequences that formed the target for primer design. New genomes were

deposited in the GenBank with accession numbers MW420987, MW420988 and

MW420989 (**Table 1).**

We constructed phylogenetic trees to explore the relationship of the sequenced

genomes to those from elsewhere globally. We retrieved 2321 WNV genome

sequences with associated lineage date and country of collection from GenBank,

from which we generated a subset that included the highly supported (>0.9) clade

containing the newly WNV strains obtained in this study plus 29 sequences

(randomly sampled) from all lineages and performed phylogenetic analysis (**see**

**Technical Appendix for detail**). An automated online phylogenetic tool to identify

and      classify      WNV      sequences      was      developed      (available      at

http://krisp.ukzn.ac.za/app/typingtool/wnv/job/9b40f631-51c4-419c-9edf-

2206e7cd8d9c/interactive-tree/phylo-WNV.xml).

Phylogenies estimated by the newly developed WNV typing tool, along with

maximum likelihood methods (**Figure 1 panel C),** consistently placed the Brazilian

genomes in a single clade within the 1a lineage with maximum statistical support

(bootstrap = 100%) (**Supplementary Figure 1**).

Time-resolved maximum likelihood tree appeared to be consistent with previous

estimates [11] and showed that the new genomes clustered with strong bootstrap

support (97%) with a WNV strain isolated from an *Aedes albopictus* mosquito in

Washington DC, USA in 2019 (**Figure 1 panel D**). Interestingly, these new isolates

did not group with the previously sequenced genome in 2019 from the Espirito Santo

state, suggesting that inter-continental introduction events might be frequent in

Brazil.

We also explored the dynamics of suspected human WNV cases (**see Technical**

**Appendix for detail**) in the three Brazilian states for which we had sequence data.

Between late 2015 and early 2020, all states had suspected cases, suggesting

continuous circulation or recent importation from other regions of the country or

elsewhere. The state of Piauí presented sufficient reports (N=116) for an exploration

of the geo-temporal dynamics of WNV spread (**Figure 2A**), while the other two

states had a much smaller number of total reports (N=3 for MG, 18 for SP).

To estimate the transmission potential of WNV we calculated the index P, a

computational approach informed by climatic variables from Lourenço et al. recently

applied in Israel [14] (**see Technical Appendix for detail**).   In the 2015-2016

season, cases in Piauí presented a seasonal signal typical of WNV and other

mosquito-borne viruses, with a peak between February and May (late summer and

autumn). We compared suspected cases per month to the monthly mean

transmission potential across the state (**Figure 2B**). The Spearman's correlation

between the two variables was 0.66 (p-value 0.01). This correlation was smaller than

previously reported for Israel (>0.9), likely resulting from the suspected nature of the

Brazillian cases, or from averaging climatic variables (and thus the index P) across

the vast spatial dimension of the state.

We also estimated the index P in space for this season, which highlighted some geo-

patterns (**Figures 2C-F**). In summer, when reports were high, estimated

transmission potential was mainly highest in the center at the –43 longitude axis

(**Figure 2C**). Into autumn, the southern region was the first with lower transmission

potential (**Figure 2D**), followed by the northern region in the winter (**Figure 2E**). In

spring, coinciding with the trough of reporting, the lowest transmission potential was

estimated in the same central region presenting highest potential in the summer and

autumn (**Figure 2F**). These geo-temporal snapshots highlight a possible wave of

seasonal transmission potential, starting in the south-west in spring (**Figure 2F**),

moving to the north-east in summer (**Figure 2C**), and ending in the north during

autumn (**Figure 2D**).

**Conclusions**

Our analyses indicate that additional data is required to better identify routes of WNV

importation into Brazil, and to understand its local transmission dynamics. Critically,

it is still uncertain where in the country WNV is endemic. Indeed, if under reporting is

frequent, the data presented in this article is compatible with both sporadic or

endemic local transmission. Furthermore, the detection of WNV RNA from equine

whole blood presented in this study proved to be an effective diagnostic method in

horses. Shifting from passive to active WNV screening and sequencing in equines

and birds in Brazil must be implemented to better understand the virus' local

epidemiology, and to be able to act accordingly to prevent any future epidemics with

significant spill-over to humans.

**Acknowledgements**

The authors thank the important contributions of the Municipal and Piaui State

Health Department (SESAPI, FMS), Municipal and Piaui State Animal Health

Department (ADAPI), Laboratório de Saúde Pública do Piauí (LACEN-PI) and the

colleague Thiago dos Santos Silva. We also thank the sponsoring institutions: Saint

Louis Zoo WildCare Institute and Institute for Conservation Medicine (USA),

Universidade Federal do Piauí (UFPI), Fundação de Amparo a Pesquisa do Estado

do Piauí (FAPEPI). Authors also thank the Municipal and State Health Department of

São Paulo and Minas Gerais state.

**Declaration of interests**

The authors declare no competing interests.

**Data Sharing**

Newly generated WNV sequences have been deposited in GenBank under

accession numbers MW420987, MW420988 and MW420989.

**Financial Disclosure**

This work was supported by Decit/SCTIE/BrMoH/CNPq (440685/2016-8), by CAPES

(88887.130716/2016-00) and by the European Union's Horizon 2020 Research and

Innovation Programme under ZIKAlliance Grant Agreement no. 734548. MG and

LCJA is supported by Fundação de Amparo à Pesquisa do Estado do Rio de Janeiro

(FAPERJ). JL is supported by a lectureship from the Department of Zoology,

University of Oxford.

**References**

[1] Fall G, Di Paola N, Faye M, et al. Biological and phylogenetic characteristics of

West African lineages of West Nile virus (DWC Beasley, Ed.). PLoS Negl Trop Dis.

2017;11: 1-23.

[2] Smithburn KC, Hughes TP, Burke AW, et al. A neutrotropic virus isolated from the

blood of a native of Uganda. Am J Trop Med Hyg. 1940; 20: 471-2.

[3] Murgue B, Zeller H, Deubel V. The ecology and epidemiology of West Nile virus

in Africa, Europe and Asia. Curr Top Microbiol Immunol. 2002;267:195-221.

[4] Campbell GL, Marfin AA, Lanciotti RS, et al. West Nile virus. Lancet Infect Dis.

2002;2:519-29.

[5] Gamino V, Ho⬜fle U. Pathology and tissue tropism of natural West Nile virus

infection in birds: a review. Vet Res. 2013;44:46-89.

[6] Bunning ML, Bowen RA, Cropp CB, et al. Experimental infection of horses with

West Nile virus. Emerg Infect Dis. 2002;8:380-6.

[7] Hayes EB, Sejvar JJ, Zaki SR, et al. Virology, pathology, and clinical

manifestations of West Nile virus disease. Emerg Infect Dis. 2005;11:1174–1179.

[8] Kramer LD, Li J, Shi P-Y. West Nile virus. Lancet Neurol. 2007;6:171–181.

[9] Morales MA, Barrandeguy M, Fabbri C, et al. West Nile virus isolation from

equines in Argentina. Emerg Infect Dis. 2006;12:1559-61.

[10] Osorio JE, Ciuoderis KA, Lopera JG, et al. Characterization of West Nile viruses

isolated from captive American flamingoes (Phoenicopterus ruber) in Medellin,

Colombia. Am J Trop Med Hyg. 2012;87:565-72.

[11] Martins LC, Silva EVPD, Casseb LMN, et al. First isolation of West Nile virus in

Brazil. Mem Inst Oswaldo Cruz. 2019 Jan 17;114:e180332.

[12] Pauvolid-Corre□a A, Morales MA, Levis S, Figueiredo LTM, Cou- to-Lima D,

Campos Z, et al. Neutralising antibodies for West Nile virus in horses from Brazilian

Pantanal. Mem Inst Oswaldo Cruz. 2011;106:467-74.

[13] Vieira MA, Romano APM, Borba AS, et al. West Nile Virus Encephalitis: The

First Human Case Recorded in Brazil. Am J Trop Med Hyg. 2015; 93(2):377-9.

[14] Lourenço J, Thompson RN, Thézé J, et al. Characterising West Nile virus

epidemiology in Israel using a transmission suitability index. Euro Surveill. 2020;2:5-

41.

**Figures legend**

**Figure 1. Investigation of WNV infections in Brazil, between July 2018 - September 2020.**

A-B) Agarose gel electrophoresis of amplicons from assay for WNV. A) nested RT-PCR. MW-

Molecular weight marker; 1- plasm of horse from São Paulo; 2- buffy coat of horse from São Paulo; 3-

washed RBC of horse from São Paulo; 4- without sample; 5 and 6-positive control (synthetic gene);

NTC, no template control. (B) Multiplex PCR. MW-Molecular weight marker; 1- horse form Minas

Gerais (pair primers); 2- horse form Minas Gerais (impair primers); 3- horse form Sao Paulo (pair

primers); 4- horse form Sao Paulo (impair primers); 5-horse form Piaui (pair primers); 6-horse form

Piaui (impair primers); NTC, no template control. C) Midpoint rooted maximum-likelihood phylogeny of

WNV genomes, showing major lineages. The scale bar is in units of substitutions per site (s/s).

Support for branching structure is shown by bootstrap values at nodes. D) Time-resolved maximum

likelihood tree showing the WNV strains belonged to the 1a lineage. Colors indicate geographic

location of sampling. The new Brazilian WNV strains are shown in bold.

**Figure 2 - WNV reporting of suspected cases and estimated transmission potential.** (A) Time

series of suspected human WNV cases in the Brazilian states of Minas Gerais (MG, green), São

Paulo (SP, pink) and Piauí (PI, gold). (B) WNV human suspected cases and estimated monthly mean

transmission potential (index P, grey) for the state of Piauí (gold). The shaded area includes the

standard deviation. (C-F) Maps of estimated transmission potential (index P) per geo-location for four

different months in the year of 2016 (from C to F, February, April, October, December respectively).

Color legend on the right applies to all maps. The city of Parnaíba from where the Piauí sequence is

available is marked by a black, full point in the north of the state.

**A** WNV in all states

**B** WNV and transmission potential in Piauí state

**C** Piauí, Feb. 2016

**D** Piauí, Apr. 2016

**E** Piauí, Oct. 2016

**F** Piauí, Dec. 2016

**Table 1.** Epidemiological information and sequencing statistics of the 3 sequenced samples of WNV sampled in Minas Gerais, Sao Paulo, Piaui Brazilian states.

| ID | Sample | Collection date | Age | Sex | State | Municipality | Reads | Coverage (%) | Depth of coverage | Lineage Assignment | Acession Number | Clinical sign |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BC02_07 | RBCs | 11/07/2018 | 9 months | F | MG | Sabara | 343743 | 97.9 | 6527.6 | Lineage 1a | MW420989 | Chorioretinitis |
| BC03_04 | RBCs | 30/07/2019 | 13 years-old | M | SP | São Bernardo do Campo | 170980 | 97.9 | 3189.7 | Lineage 1a | MW420988 | Muscle stiffness, tremor retinal and flaccid paralysis |
| BC05_06 | RBCs | 21/08/2020 | 5 years-old | F | PI | Parnaíba | 222516 | 99.4 | 4121.4 | Lineage 1a | MW420987 | Neurological complications |

ID=study identifier; RBCs=Red Blood Cells; Collection date=Sample collection date; Municipality=Municipality of residence; State= MG-Minas Gerais; SP-Sao Paulo; PI-Piaui; Sex: M=Male; F=Female; Accession Number=NCBI accession number