

1 **Inactivation of SARS-CoV-2 by  $\beta$ -propiolactone Causes Aggregation of Viral**  
2 **Particles and Loss of Antigenic Potential**

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## 19 **ABSTRACT**

20 Inactivated viral preparations are important resources in vaccine and antisera industry.  
21 Of the many vaccines that are being developed against COVID-19, inactivated whole-  
22 virus vaccines are also considered effective.  $\beta$ -propiolactone (BPL) is a widely used  
23 chemical inactivator of several viruses. Here, we analyze various concentrations of BPL  
24 to effectively inactivate SARS-CoV-2 and their effects on the biochemical properties of  
25 the virion particles. BPL at 1:2000 (v/v) concentrations effectively inactivated SARS-  
26 CoV-2. However, higher BPL concentrations resulted in the loss of both protein content  
27 as well as the antigenic integrity of the structural proteins. Higher concentrations also  
28 caused substantial aggregation of the virion particles possibly causing undesirable  
29 outcomes including a potential immune escape by infectious virions, and a loss in  
30 antigenic potential. We also identify that the viral RNA content in the culture  
31 supernatants can be a direct indicator of their antigenic content. Our findings may have  
32 important implications in the vaccine and antisera industry during COVID-19 pandemic.

## 33 **INTRODUCTION**

34 The ongoing COVID-19 pandemic caused by the coronavirus SARS-CoV-2 is  
35 devastating the human lives across the globe [1, 2]. As of the middle of April 2021, the  
36 virus is estimated to have infected about 140 million people, killing over 3 million of  
37 them worldwide. The disease is characterized by acute respiratory illness resulting in  
38 severe breathing difficulties very similar to the common flu accompanied by severe  
39 cough in the infected people forcing several of them to be hospitalized. In addition, there  
40 have been several reports of sepsis, blood clotting and multi-organ failure in several  
41 persons infected by the virus. The severity of the disease is significantly higher in

42 persons with co-morbid conditions such as diabetes, hypertension, cancer and  
43 respiratory problems [2, 3]. Currently, there are no drugs that can cure COVID-19.  
44 Vaccines are the best hopes for ending this pandemic. Antibody-based interventional  
45 therapies are of great importance in treating severe cases. Some of these projects  
46 utilize inactivated virus particles that are used for immunization along with adjuvants.  
47 Large-scale viral cultures and antigens are essential for successful generation of  
48 vaccines and antisera that are based on whole virus-derived antigens. This requires  
49 complete inactivation of the virus particles while causing minimum damage to their  
50 structural and antigenic properties. Therefore, these projects are dependent on the  
51 availability of viral samples that are totally inactivated while retaining their antigenicity  
52 sufficient to induce antibody response.

53 Several methods have been adapted historically to inactivate the viral stocks that are  
54 used for vaccine and antisera development. They include physical methods such as  
55 heat [4] and  $\gamma$ -rays [5] or chemical agents such as formaldehyde and  $\beta$ -propiolactone  
56 (BPL) [6-8]. SARS-CoV-2 is reported to be inactivated by temperatures starting from  
57 56 °C [9, 10]. BPL mediated inactivation of SARS-CoV and SARS-CoV-2 has been  
58 demonstrated [7, 9, 11, 12]. Heating is known to denature the proteins that might  
59 negatively impact their antigenicity [4].  $\gamma$  -irradiation has been employed in several  
60 vaccine studies, but they are also known to damage the antigens if not properly  
61 optimized [13]. Formaldehyde, despite being one of the oldest and most easily available  
62 chemical agents to inactivate viruses, also causes loss in protein antigenicity and hence  
63 is less desirable. BPL has emerged as a very popular chemical agent in various vaccine  
64 initiatives due to its high inactivation potency and relatively low damage of antigens.

65 BPL has also been used in SARS-CoV-2 inactivation at various concentrations.  
66 However, a comprehensive analysis of its potency and impact on the integrity of viral  
67 antigen is not available. In this study, we attempt to optimize the concentration of BPL  
68 for SARS-CoV-2 for efficient inactivation and protection of antigenicity. We demonstrate  
69 that BPL at 1:2000 concentrations (v/v) is enough to inactivate SARS-CoV-2 and  
70 increasing the BPL concentration above 1:1000 leads to significant drop in the antigenic  
71 potential of viral proteins, probably caused by the modifications on their amino acids.  
72 Our investigation also identified a lack of correlation between viral RNA titer and  
73 infectious viral units in the supernatant. However, the viral RNA titer showed strong  
74 correlation with the antigenic content in the sample. Our studies also demonstrate that  
75 SARS-CoV-2 particles tend to form larger aggregates with increasing concentrations of  
76 BPL above 1:1000 which could possibly lead to reduced epitope exposure thereby  
77 deleteriously affecting the antigenic potential of the sample.

## 78 **MATERIALS AND METHODS**

### 79 **Cell culture and reagents**

80 Vero cells were cultured in DMEM with 10% FBS (Hyclone, SH30084.03) and penicillin-  
81 streptomycin cocktail (Gibco, 15140-122) at 37°C and 5% CO<sub>2</sub>. Anti-Spike antibody was  
82 procured from Novus Biologicals (NB100-56578) while anti-Nucleocapsid was procured  
83 from Thermo Fisher (MA5-29982). HRP-conjugated anti-rabbit secondary antibody was  
84 purchased from Jackson ImmunoResearch (111-035-003). BPL was procured from  
85 Himedia Laboratories (TC223-100). The zinc staining kit was from G Biosciences  
86 (Reversible Zinc Stain; 786-32ZN).

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## 88 **Virus culturing**

89 The oro- and nasopharyngeal patient swabs transported in VTM were screened using  
90 SARS-CoV-2 specific primers (LabGenomics; Labgun COVID-19 RT-PCR kit;  
91 CV9032B) and the samples with low Ct (less than 20) values were chosen to culture  
92 virus. VTMs were filter-sterilized and added to Vero monolayers in 96-well plate. Three  
93 hours post-infection, the media was replaced with fresh serum sufficient media. The  
94 infected cells were further incubated at 37°C with 5% CO<sub>2</sub> in a humidified chamber and  
95 cytopathic effects (CPE) were examined every 24 hours. Cells along with the  
96 supernatants were collected from those wells displaying CPE and transferred to fresh  
97 12-well plate containing Vero monolayers for further propagation. This process was  
98 repeated until the cell culture supernatant showed a Ct value lesser than 20. The  
99 supernatants were titrated for infectious particle count by plaque-forming assay. In the  
100 case of dry-swab sample, the swab was first soaked in TE buffer for 30 minutes [14]  
101 and further stored at -80°C freezers. Later the sample was used as inoculum for  
102 infection similar to VTM.

## 103 **Virus quantification, titration, and sequencing**

104 RNA from VTMs or swab-immersed TE buffer or cell culture supernatant was isolated  
105 using viral RNA isolation kit (MACHEREY-NAGEL GmbH & Co. KG; 740956.250). The  
106 SARS-CoV2 RNA was quantified using (LabGun™ COVID-19 RT-PCR Kit) following  
107 the manufacturer's protocol or following WHO guidelines using SuperScript™ III  
108 Platinum™ One-Step qRT-PCR Kit (ThermoFisher) and Taqman probes against CoV-2  
109 E, and RdRP (Eurofins Scientific). The isolates that were established in cultures were  
110 sequenced by next-generation sequencing and compared with Wuhan SARS-CoV-2

111 genome as reference S. The sequence of isolates used for all the experiments here  
112 were submitted to GISAID public database (GISAID ID: EPI\_ISL\_458075; virus ID-  
113 hCoV-19/India/TG-CCMB-O2-P1/2020, and EPI\_ISL\_458046; virus ID- hCoV-  
114 19/India/TG-CCMB-L1021/2020). Subsequently, the CCMB\_O2 isolate was scaled up  
115 and used for the experiments. All the virus cultures were titrated for infectious particle  
116 count using plaque forming assay (PFU/mL) before use. Briefly, the supernatant was  
117 log-diluted from  $10^{-1}$  to  $10^{-7}$  in serum-free media and was added to a 100% confluent  
118 monolayer of Vero cells. Two hours post-infection the infection inoculum was replaced  
119 with agar media (one part of 1% LMA mixed with one part of 2 × DMEM with 5% FBS  
120 and 1% Pen-Strep). 6-7 days post-infection cells were fixed with 4% formaldehyde in 1×  
121 PBS and stained with 0.1% crystal violet. The dilution which had 5-20 plaque was used  
122 for calculating PFU/mL.

### 123 **Virus infection and inactivation**

124 Cells were infected with SARS-CoV2 at 90% confluency in serum-free media at 1MOI  
125 for two hours and subsequently, the inoculum was replaced with fresh serum-free  
126 media. Three days post-infection, cell culture supernatant was collected and the debris  
127 was removed by centrifugation and stored until further use. Later, the infectious viruses  
128 in the supernatants were inactivated using BPL at varying concentrations (1:250, 500,  
129 1000, 2000 (v/v to the culture-media). In brief, the supernatant with BPL was incubated  
130 at 4°C for 16 hours followed by 4-hour incubation at 37°C to hydrolyze the remaining  
131 BPL. The inactivation of the virus was confirmed by the absence of CPE in three  
132 consecutive rounds of infections. To study the effect of BPL on viral antigenicity, either

133 live infectious or inactivated viral samples were concentrated to 10 × using centrifugal  
134 filter units with 100 kDa cut-off.

### 135 **Zinc Staining**

136 All the reagents provided by the manufacturer (Reversible Zinc Stain; G Biosciences)  
137 were diluted to working concentration using deionized water. Zinc staining was done  
138 after performing SDS-PAGE under reducing conditions. Viral supernatants concentrated  
139 either by ultracentrifugation or by centrifugal filters were lysed with equal volume of 2  
140 × lysis buffer (containing 2% NP40, 100 mM Tris-HCl, 300 mM NaCl, 2 mM sodium  
141 orthovanadate, 2 mM phenylmethylsulphonyl fluoride, 20 mM sodium pyrophosphate,  
142 and protease inhibitor cocktail) [15], mixed with 6 × Laemmli buffer, boiled and loaded  
143 onto the gels after cooling. Gels were washed with distilled water after electrophoresis  
144 followed by incubation in 25 mL washing buffer (Reagent I) for 5 minutes on a shaking  
145 platform. Subsequently, the gel was incubated with 25 mL of Reagent II containing  
146 imidazole for 15 minutes. Finally, the gel was stained in zinc sulfate-containing Reagent  
147 III for 45-60 seconds followed by immediate transfer to distilled water. The gel image  
148 was scanned against a dark background and was then destained using destaining  
149 solution provided by the manufacturer followed by three 5-minute washes using distilled  
150 water. The destained gel was used for subsequent western blot transfer procedures.

### 151 **Immunoblotting**

152 Fresh gels or the destained gels after zinc staining were transferred onto PVDF  
153 membranes for 16 hours at 30 V. Membranes were blocked in 5% BSA and were  
154 subsequently probed with SARS-CoV-2-specific Nucleocapsid (1:8000) or SARS Spike  
155 (1:2000) antibodies. HRP-conjugated goat anti-rabbit secondary antibody was used at

156 1:20000 dilutions. Blots were then developed with ECL reagents (Clarity ECL Western  
157 Blotting; Bio-Rad) using ChemiDoc MP system (Bio-Rad). All densitometric analyses  
158 were performed using ImageJ software [16].

### 159 **Dynamic light scattering spectroscopy**

160 The particle size of virions from BPL inactivated viral samples was measured using a  
161 dynamic light scattering instrument (SpectroSize 300; Nabitec). The instrument uses a  
162 laser diode and operates at a wavelength of 660 nm at 90° scattering angle and  
163 detection was done by an avalanche photodiode detector. Each BPL inactivated sample  
164 was subjected to twenty measurements to obtain the particle size. The data obtained  
165 was analyzed using SpectroSize 300 software that provided the average hydrodynamic  
166 size distribution profiles. The average size of the particles from each sample was plotted  
167 against the dilution of BPL used. The experiment was repeated in triplicate using  
168 samples with different Ct values.

### 169 **Statistical analysis**

170 Viral supernatants used in DLS were independently inhibited with BPL and were  
171 considered as biological replicates. At least three independent replicates were used. *c*  
172 to generate mean  $\pm$  SEM, which are plotted graphically. To calculate statistical  
173 significance, two-tailed unpaired student *t*-test was performed and the resultant *p* values  
174 were represented as \*, \*\*, \*\*\* indicating *p* values  $\leq$  0.05, 0.005, and 0.0005 respectively.

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## 178 **RESULTS**

### 179 **Establishment of SARS-CoV-2 cultures**

180 Several other articles have described methods for the establishment of SARS-CoV-2  
181 cultures [17-20]. Here, the key is to have access to patient oro- or nasopharyngeal  
182 samples in viral transport medium (VTM) that display low Ct values in the quantitative  
183 real time RT-PCR assays. The association of the viral load estimated by qRT-PCR with  
184 COVID severity is controversial [21, 22], and qRT-PCR-generated Ct values of viral  
185 genes are not true indicators of the viral load owing to a large number of variables in  
186 sample collection and processing and hence could be deceptive at times. Therefore it is  
187 important to try several VTM samples that display Ct values below 30. Even though  
188 lower Ct values are indicators of high viral load, several samples with low Ct values  
189 could not establish a culture. This could primarily be determined by the infectious viral  
190 load in the sample that is dependent on the collection process and the post-collection  
191 storage conditions. Samples that did show signs of infection in a small scale (96-well set  
192 up) were then gradually expanded to larger scale to maintain a constant  
193 viral culture for further experiments. Each passage of virus was tested for viral load and  
194 titer to ensure the retention of infectivity (Table 1).

195 Recently, RNA extraction from the swab samples was shown to be dispensable thereby  
196 enabling direct processing of the samples for qRT-PCR in COVID-19 screening [14] as  
197 well as in other respiratory viral infections [23, 24]. Collecting the samples in dry-swab  
198 form has been demonstrated to be effective in preserving the viral content and also  
199 much more bio-safe [23, 24]. The dry swabs were immersed in TE buffer before using

200 directly in qRT-PCR. However, the dry-swab method has a potential risk of inactivating  
201 the virus due to long-term dry conditions. We tested if virus cultures can be established  
202 from the dry-swab samples resuspended in TE buffer stored at -80°C. As in the case of  
203 VTM, the potential samples were incubated with Vero cells for infection. Interestingly, as  
204 demonstrated in Table 1, we successfully isolated SARS-CoV-2 from dry-swab  
205 collection sample, indicating that virus particles derived from dry-swab method can be  
206 viable and can indeed establish infection.

### 207 **Ct values do not correlate with infectivity, but with protein content**

208 Several studies have used Ct values as a measure of viral titer in the culture  
209 supernatants [25, 26]. During our studies, we encountered numerous instances where  
210 low Ct values do not really translate into a high viral titer (Figure 1A). Supernatants with  
211 Ct values differing significantly, displayed comparable viral titers. We often came across  
212 samples with low Ct values and low infectious titers and also those with relatively higher  
213 Ct but with high viral titers. Large majority of the established culture supernatants had  
214 infectious titers around  $10^7$  PFU/mL but their Ct values ranged from 10-28, clearly  
215 pointing to a substantially large fraction of viral RNA contributed by non-infectious viral  
216 particles or non-virion associated viral RNA. However, samples with low Ct values  
217 corresponded to high viral protein content (Figure 1B) suggesting that the samples with  
218 low Ct values and low titers contained larger amounts of defective and noninfectious  
219 viral particles that contributed to the higher protein content. Thus, the samples with low  
220 Ct values are ideal for the preparation of antigens irrespective of their infectious viral  
221 units.

### 222 **Inactivation of SARS-CoV-2 by BPL**

223 BPL is a common reagent used for chemical inactivation of viruses [6, 27, 28]. We  
224 titrated the optimal concentration of BPL required for inactivation of SARS-CoV-2. BPL  
225 was added to viral supernatants with known infectious titer (PFU/mL) to make final  
226 dilutions of 1:2000, 1:1000, 1:500 and 1:250 (all v/v). Infectivity of the supernatants was  
227 measured by CPE. Our results demonstrate that BPL was consistently effective in  
228 inactivating the virus completely even at 1:2000 dilutions. Three consecutive rounds of  
229 infection confirmed total inactivation of virus at these concentrations (Table 2; Figure 2).  
230 These results indicate that BPL at 1:2000 concentrations is strong enough to inactivate  
231 SARS-CoV-2 efficiently.

### 232 **BPL inactivation causes damage to SARS-CoV-2 antigens**

233 One of the major requirements of BPL inactivation is in vaccine studies. However, BPL  
234 treatment consistently interfered with the quantification of viral protein. BPL is known to  
235 damage the genetic content, but its influence on the proteins of the virions is less  
236 understood [29]. In addition, if BPL damages structural proteins of the virions, this could  
237 be less desirable for vaccine studies. To address this issue, we tested the epitope  
238 integrity of SARS-CoV-2 virions inactivated with BPL. Viral supernatants treated with  
239 BPL at 1:250 dilutions were concentrated 10 x by filters with 100kDa cut-off  
240 membranes. Protein lysates prepared from these concentrates were electrophoresed by  
241 SDS-PAGE following which the gels were zinc stained to visualize antigens. BPL  
242 treatment caused minimal drop in the total protein content in the samples as  
243 demonstrated in Figure 3 A and B. Next, we studied the effect on antigenicity by  
244 detecting structural proteins spike (S) and nucleocapsid (N) by immunoblotting.  
245 Immunoblotting against S and N was used as a proxy measure of the antigenic integrity

246 of the virions. Any drop in the band intensity would be considered as the outcome of  
247 potential damage to the epitopes. The immunoblots revealed a substantial loss of  
248 signals in BPL treated samples against the untreated, infectious samples (Figure 3 C  
249 and D) suggested that BPL treatment is causing the loss of antigenic integrity in addition  
250 to causing loss in the protein content.

251 In order to further substantiate this point, we treated the viral supernatants with varying  
252 concentrations of BPL at 1:2000, 1:1000, 1:500 and 1:250 dilutions. Supporting our  
253 initial observations, loss in the signal was the most striking in sample with 1:250 BPL  
254 concentrations followed by 1:500 (Figure 4A). BPL caused much less loss at 1:1000  
255 and 1:2000 dilutions. This was further strengthened by immunoblotting where a gradual  
256 loss of antigenic integrity was remarkably captured in 1:250 dilutions (Figure 4B). This  
257 could be caused either by a possible chemical modification of amino acids in the  
258 epitopes or by the potential loss of exposure of epitopes caused by aggregation. These  
259 results collectively demonstrate that BPL treatment causes loss in protein content and  
260 also a further loss in antigenicity and suggest that using 1:2000 or 1:1000 dilutions  
261 would be more appropriate for vaccine studies.

### 262 **BPL treatment causes aggregation of SARS-CoV-2**

263 Earlier studies have demonstrated that BPL treatment causes aggregation of virus  
264 particles [6]. To test whether SARS-CoV-2 undergoes aggregation during BPL  
265 treatment, we used dynamic light scattering (DLS) that can study particle size  
266 distribution in a suspension. Viral supernatants treated with varying concentrations of  
267 BPL were analyzed by DLS. Interestingly, increasing concentrations of BPL induced the  
268 formation of larger aggregates as demonstrated in Figure 5 A-D. While the viral particles

269 in the supernatant with BPL at 1:2000 dilutions had an average size of about 160nm  
270 their size gradually increased to over 500nm with 1:250 concentration of BPL (Figure  
271 5E). These results demonstrate that BPL causes aggregation of SARS-CoV-2 particles  
272 in a concentration-dependent manner. Increased aggregation of virions could result in  
273 significant loss in the exposure of the epitopes and hence would render them less  
274 suitable for antibody response. Additionally, filtration of the mixture post-BPL treatment  
275 is not advisable as it might cause significant loss of virion aggregates. Increased  
276 aggregation coupled with lower exposure of viral proteins indicates that higher  
277 concentrations of BPL are not optimal for inactivation of virus.

## 278 **DISCUSSION**

279 In this study, we focused on characterizing the methods for preparation of large  
280 volumes of inactivated SARS-CoV-2 cultures for therapeutic purposes such as vaccine  
281 and antisera production. Since BPL is the mode of choice for inactivation of several  
282 microbes, we optimized the concentration and studied the impact of the treatment on  
283 the epitopes and virus aggregation. We demonstrate that BPL at 1:2000 (v/v) dilutions  
284 in the culture supernatant is sufficient to totally inactivate the virus. Our studies suggest  
285 that BPL negatively impacts the antigenic potential of the virus thereby potentially  
286 affecting the immune response when used as antigens. However, lower concentration  
287 of BPL at 1:2000 concentrations had minimal impact on the antigenic integrity in  
288 comparison with higher concentration suggesting that at this concentration, antigenic  
289 response should be robust.

290 Since BPL treatment impacted the antigenic potential of S and N, we speculate that it  
291 must be causing chemical modifications of amino acids. Similar reports have been

292 made in the case of influenza and coxsackie viruses [6, 30] suggesting that BPL might  
293 be interfering with the integrity of the structural proteins of the virion. In agreement with  
294 this data, protein quantitation of the BPL treated viral samples always failed to show  
295 reproducible results (data not shown). Highly sensitive BCA method detected proteins in  
296 the viral samples, albeit in highly irreproducible manner. We demonstrate that viral  
297 proteins from such samples could be detected by the Zinc negative staining in SDS-  
298 PAGE and could be used for relative quantitation.

299 Our study demonstrates a clear dichotomy between the Ct values and infectious viral  
300 count in any given stock. While the Ct values are representatives of the levels of viral  
301 RNA, the plaque assays are direct indicators of the infectivity of the stocks. Our studies  
302 demonstrate a lack of correlation between the Ct and PFU values, and a strong  
303 correlation between low Ct values and high viral antigens, pointing to the possibility of  
304 the presence of a large fraction of non-infectious virus particles in these samples.  
305 Having lower infectious titer may not necessarily be a deterrent for samples used in  
306 immunizations given that they have high antigenic content. Our results suggest that  
307 samples with low Ct and low infectious titers can therefore be used for immunization  
308 purposes provided they have good antigenic contents.

309 While cytopathic effect (CPE) is a clear indication of the viral replication, we observed  
310 that several cultures that harbored very high titer virus did not display a CPE during the  
311 early part of viral culturing. On the other hand, a few cultures that displayed CPE could  
312 not establish viral cultures. Therefore, it is important to monitor the presence of the virus  
313 in the supernatant by qRT-PCR. If the cultures do not display CPE, qRT-PCR could be  
314 optimally performed at a week from the time of infection.

315 Our finding on the aggregation of SARS CoV-2 particles has significance in the vaccine  
316 and antisera industry. Studies have reported an association between aggregation and  
317 loss of antigenicity [31-33]. Another concern is the incomplete inactivation due to  
318 aggregation and the potential escape of virus from inactivation resulting in the presence  
319 of infectious viruses in vaccine with a potential for infection [34]. However, our studies  
320 could not detect any traces of infectious virus after three rounds of consecutive  
321 infections. Nevertheless, total inactivation is achieved even at 1:2000 concentrations  
322 and hence higher concentrations of BPL are well avoidable.

## 323 **CONCLUSION**

324 We have successfully established culturing of multiple isolates of SARS-CoV-2 from  
325 patient samples including the modified dry-swab method of collection. We optimized the  
326 optimal concentrations of BPL for complete inactivation of SARS-CoV-2. Our studies  
327 identified those concentrations of BPL higher than 1:1000 results in aggregation of viral  
328 particles and also loss in the antigenic potential of the sample. Our studies would  
329 provide a good guiding material for antisera and vaccine studies.

## 330 **Author Contributions**

331 D.G. optimized large-scale SARS-CoV-2 virus propagation, BPL inactivation and  
332 microneutralization assay. D.G., and D.T propagated, quantified and inactivated large-  
333 scale SARS-CoV-2 cultures and performed DLS experiments. D.V. and V.S.  
334 established SARS-CoV-2 cultures used in this study. H.P. performed immunoblotting.  
335 V.S. performed zinc staining. K.H.H. conceptualized the study and wrote the  
336 manuscript.

337 **Institutional ethics clearance:** Institutional ethics clearance (IEC-82/2020) was  
338 obtained for the patient sample processing for virus culture.

339 **Institutional biosafety:** Institutional biosafety clearance was obtained for the  
340 experiments pertaining to SARS-CoV-2.

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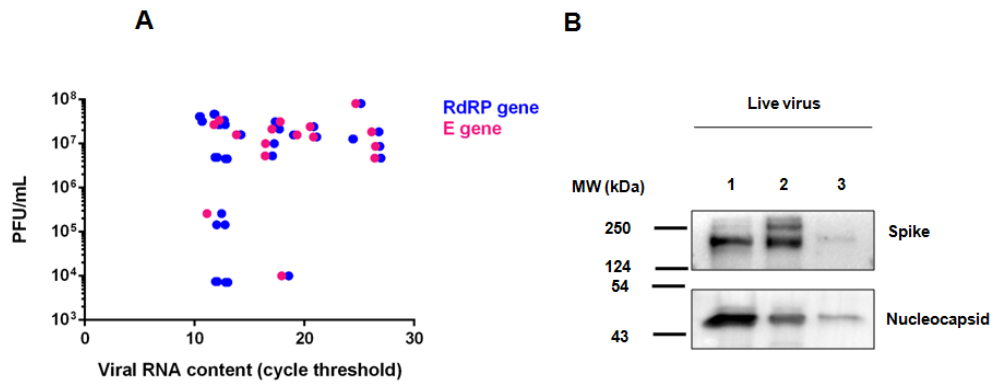
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448 Figure 1

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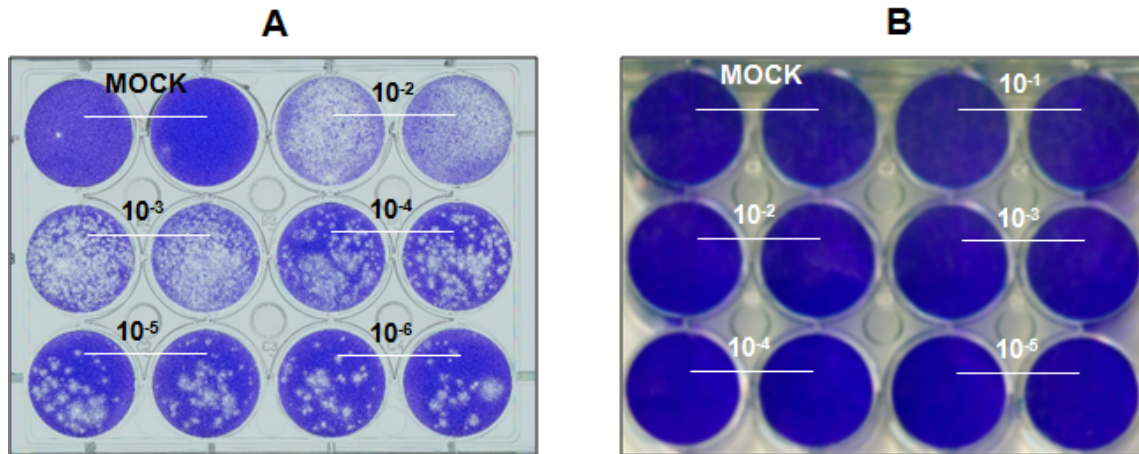
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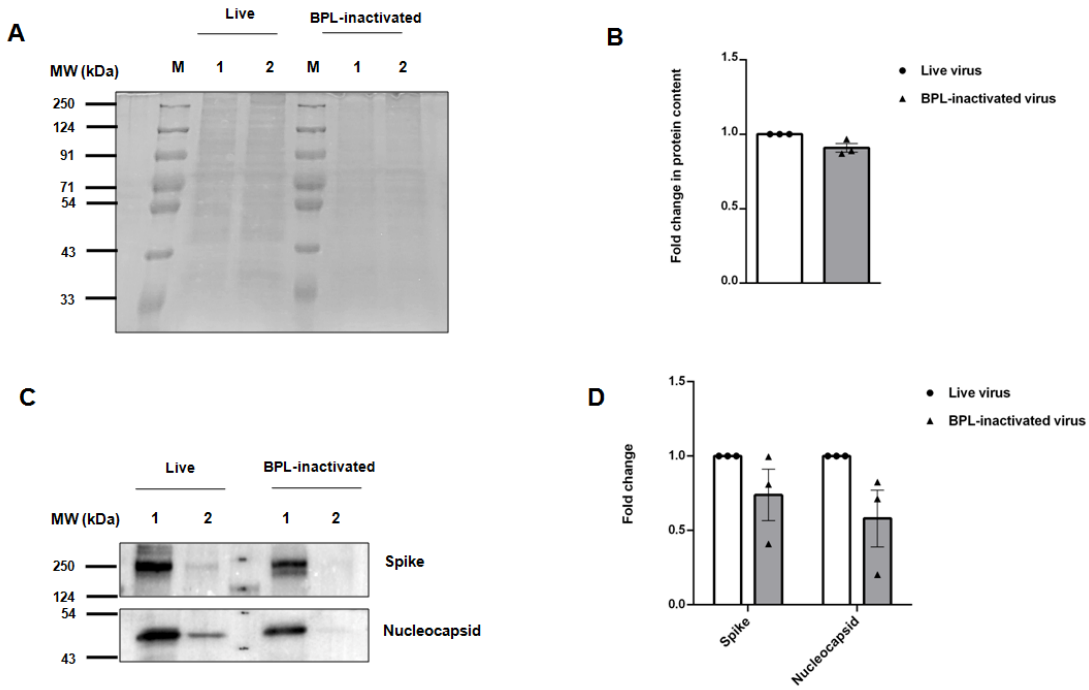
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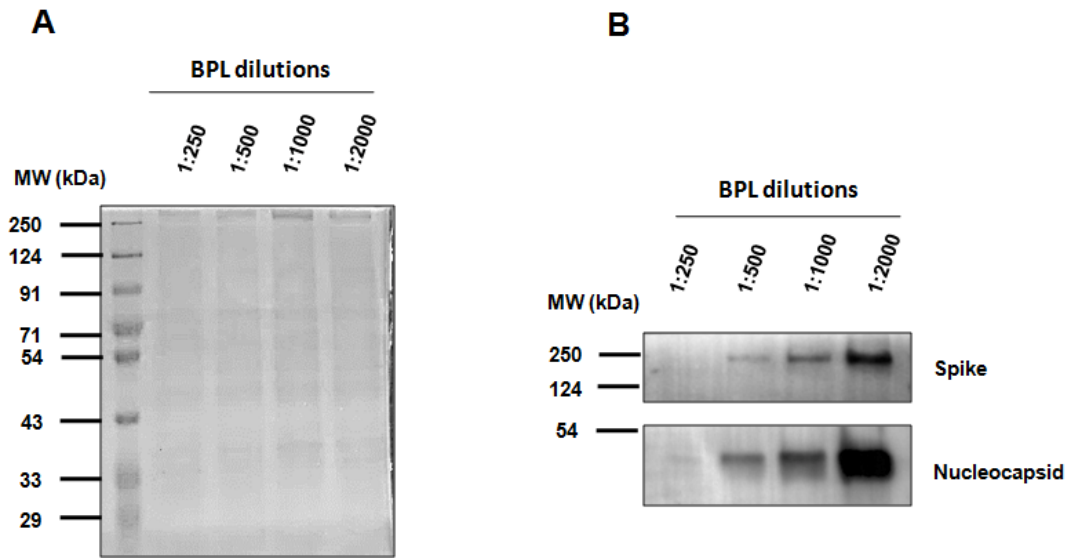
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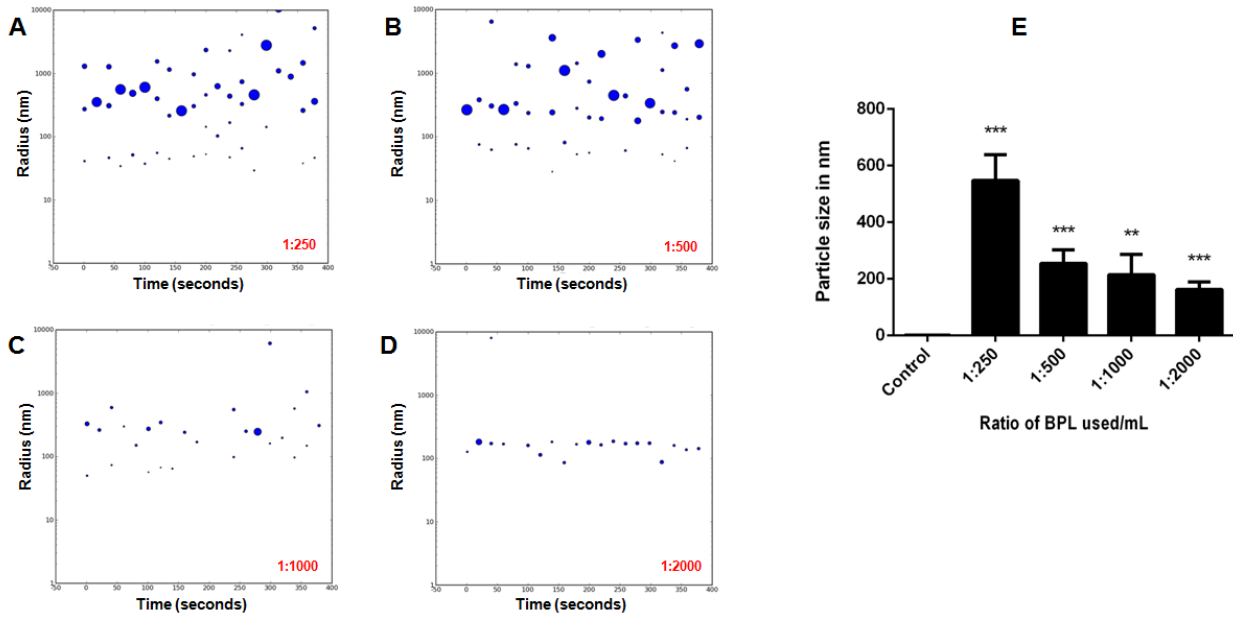
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513 Table 1

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Isolate number	GISAID	Passage number	Ct value (E gene)	PFU/mL <sup>516</sup> 517
1	EPI_ISL_458075	P1	20.61	NA <sup>518</sup>
		P2	17.34	3.14*10 <sup>7</sup> <sup>519</sup>
		P3	19.01	1.57*10 <sup>7</sup> <sup>520</sup>
2	EPI_ISL_458046	P1	10.52	4.1*10 <sup>7</sup> <sup>521</sup>
		P2	12.19	2.7*10 <sup>7</sup> <sup>522</sup>
3 (Dry Swab)	NA	P1	20.95	NA <sup>524</sup>
		P2	18.58	1*10 <sup>4</sup> <sup>525</sup>
		P3	11.85	4.88*10 <sup>6</sup> <sup>526</sup>

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528 **Table 1:** Viral RNA contents and titers of three independent SARS-CoV-2 preparations isolated  
 529 from patient swab samples and passage to larger formats. “P” indicates the passage number.  
 530 The culture in which Vero cells were incubated with the patient sample was designated as P1.  
 531 The third sample was isolated by the dry swab method as mentioned.

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538 Table 2

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Sample ID	Before Inactivation		Inactivated virus infectious titer after three rounds of consecutive culturing			
	Ct (E gene)	Infectious titer (PFU/mL)	1:250	1:500	1:1000	1:2000
Sample 1	12.79	$2.71 \times 10^7$	-	-	-	-
Sample 2	17.72	$2.14 \times 10^7$	-	-	-	-
Sample 3	25.16	$2.71 \times 10^7$	-	-	-	-

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542 Table 2. Demonstration of complete inactivation of virus particles by BPL after three  
543 rounds of consecutive culturing.

544

## 545 LEGENDS

546 **Figure 1.** RNA content of the virus cultures need not be correlated with the infectious  
547 titers, but with the antigenic content. (A) Viral RNA content in cultures by qRT-PCR of E  
548 and RdRP genes were plotted against the infectious titers of the same cultures. RNA  
549 samples prepared from the supernatants were subjected to qRT-PCR for the detection  
550 of SARS-CoV-2 E and RdRP genes. Infectious titers of the cultures were determined by  
551 plaque forming assays. (B) Analysis of the relative protein content of three viral  
552 supernatants with different viral RNA contents by immunoblotting of viral proteins.  
553 Sample 1, 2 and 3 had Ct values of 12.8, 14 and 17.7, respectively as determined by  
554 qRT-PCR of E gene. Immunoblotting was performed using specific antibodies.

555 **Figure 2.** Confirmation of the presence of infectious SARS-CoV-2 particles in the  
556 supernatant of the cultures. (A) Representative PFU assay plate showing consistent  
557 drop in the plaques with logarithmic dilution of the sample. (B) Confirmation of the  
558 inhibition of infectious virus particles with BPL treatment. Viral supernatant treated with  
559 BPL at 1:250 concentrations were inoculated with Vero cells and CPE was monitored  
560 for six days. Untreated supernatants were used in the control experiments. After six  
561 days, the supernatants were further inoculated with fresh cells and this was repeated for  
562 a third round of infection. The image is from the third round of repeated infection  
563 demonstrating the absence of CPE, confirming total inactivation of infectious virus  
564 particles.

565 **Figure 3.** Qualitative analysis of the BPL inactivated virus samples with the infectious  
566 control samples. (A) Zinc stain of SDS-PAGE with samples from two individual live  
567 infectious or their corresponding inactivated samples. M indicates protein molecular  
568 weight marker and the numbers indicate two individual samples. Inactivation was  
569 performed by BPL at 1:250 concentrations. The concentrated samples were lysed in  
570 equal volumes of 2 × protein lysis buffer, mixed with 6 × Laemmli buffer, boiled and  
571 loaded into the gels. After electrophoresis, the gels were stained following the  
572 instructions provided by the manufacturer. (B) Relative protein contents in the active  
573 and inactivated samples by ImageJ analysis. (C) Immunoblots for SARS-CoV-2 Spike  
574 and Nucleocapsid proteins. Concentrated samples separated on SDS-PAGE were  
575 transferred onto PVDF membrane and subsequently immunoblotted using specific  
576 antibodies against the proteins. (D) Relative antigenic integrity in infectious and BPL

577 inactivated virus samples. Immunoblot images were analyzed by ImageJ software for  
578 quantification.

579 **Figure 4.** Confirmation of the loss of antigenic integrity by BPL (A) Viral supernatants  
580 were treated with varying concentrations of BPL as mentioned in the figure and  
581 subsequently concentrated before separating on SDS-PAGE. As in Figure 3A, the gel  
582 was zinc stained to visualize the protein bands. (B) Immunoblotting of the viral proteins  
583 in samples treated with varying concentrations of BPL. Samples were separated on  
584 SDS-PAGE after which they were transferred onto PVDF membrane and  
585 immunoblotted.

586 **Figure 5.** BPL causes aggregation of SARS-CoV-2 particles. (A-D) Representative  
587 images of analysis of the particle size of SARS-CoV-2 inactivated with BPL at 1: 250,  
588 1:500, 1:1000 and 1: 2000 concentrations (v/v) by dynamic light scattering. (E) Average  
589 size of the virus particles treated with varying concentrations of BPL as mentioned.