

# 1 SARS-CoV-2 genome sequencing with Oxford Nanopore Technology and Rapid PCR

## 2 Barcoding in Bolivia

3 Oscar M. Rollano-Peñaloza<sup>1,2\*</sup>, Carmen Delgado Barrera<sup>3</sup>, Aneth Vasquez Michel<sup>2</sup>

4 1. Laboratorio de Genética Molecular, Instituto de Investigaciones Químicas, Universidad  
5 Mayor de San Andrés, La Paz, Bolivia

6 2. Laboratorio de Microbiología Molecular, Instituto SELADIS, Universidad Mayor de  
7 San Andrés, La Paz, Bolivia

8 3. Laboratorio de Biología Molecular, Hospital San Pedro Claver, Sucre, Bolivia

9 \*Corresponding authors: [oscarmiguel\\_rp@hotmail.com](mailto:oscarmiguel_rp@hotmail.com), [amvasquez1@umsa.bo](mailto:amvasquez1@umsa.bo)

## 10 Abstract

11 SARS-CoV-2 genomic surveillance has Illumina technology as the golden standard. However,  
12 Oxford Nanopore Technology (ONT) provides significant improvements in accessibility,  
13 turnaround time and portability. Characteristics that gives developing countries the opportunity  
14 to perform genome surveillance. The most used protocol to sequence SARS-CoV-2 with ONT  
15 is an amplicon-sequencing protocol provided by the ARTIC Network which requires DNA  
16 ligation. Ligation reagents can be difficult to obtain in countries like Bolivia. Thus, here we  
17 provide an alternative for library preparation using the rapid PCR barcoding kit (ONT). We  
18 mapped more than 3.9 million sequence reads that allowed us to sequence twelve SARS-CoV-2  
19 genomes from three different Bolivian cities. The average sequencing depth was 324X and the  
20 average genome length was 29527 bp. Thus, we could cover in average a 98,7% of the reference  
21 genome. The twelve genomes were successfully assigned to four different nextstrain clades  
22 (20A, 20B, 20E and 20G) and we could observe two main lineages of SARS-CoV-2 circulating  
23 in Bolivia. Therefore, this alternative library preparation for SARS-CoV-2 genome sequencing  
24 is effective to identify SARS-CoV-2 variants with high accuracy and without the need of DNA  
25 ligation. Hence, providing another tool to perform SARS-CoV-2 genome surveillance in  
26 developing countries.

27 **Keywords**

28 SARS-CoV-2, Genomic Surveillance, Next-Generation Nanopore Sequencing, Tagmentation,  
29 Rapid PCR Barcoding

30 **Introduction**

31 Coronavirus (CoV) are virus with the largest known single-strand RNA genomes (Yin and  
32 Wunderink 2018). Coronavirus are enveloped virus with several trimeric-spikes on their surface  
33 which altogether form a crown or “corona” (V’kovski et al. 2021; Zhang and Kutateladze 2020).

34 Coronavirus can cause respiratory and enteric infections in humans and are one of the main  
35 agents of the severe acute respiratory syndrome (SARS) (Cheng et al. 2007). The first  
36 coronavirus that caused a mayor pandemic of SARS (SARS-CoV) emerged on November 2002  
37 in Guangdong, China (Peiris et al. 2003; Skowronski et al. 2004). Ten years later, another  
38 mayor pandemic was caused by the Middle East respiratory syndrome-CoV (MERS-CoV) with  
39 its first patient reported on June 2012 in Jeddah, Saudi Arabia (Zaki et al. 2012). SARS-CoV  
40 and MERS-CoV infected more than ten thousand people with approximately 1600 deaths (Yin  
41 and Wunderink 2018). Both outbreaks marked the possibility of a SARS-CoV reemergence if  
42 we wouldn’t maintain the barriers between natural Coronavirus reservoirs and human society  
43 (Cheng et al. 2007; Cui et al. 2019).

44 All the conditions were finally met again on December 2019, when another Coronavirus  
45 (SARS-CoV-2) emerged on Wuhan, China (Zhou et al. 2020), causing the third and largest  
46 coronavirus outbreak. SARS-CoV-2 is the causal agent of the Coronavirus disease-19 (COVID-  
47 19) that has spread throughout the whole planet. SARS-CoV-2 has caused more than 3 million  
48 deaths worldwide at the time of writing (Ortiz-Prado et al. 2020). Coronavirus have higher  
49 mutation rates than DNA viruses which can result in a high viral genetic diversity and  
50 adaptability (Duffy 2018). The unstoppable spreading of the virus allows opportunities for viral  
51 replication and mutations that have already driven the emergence of SARS-CoV-2 variants of  
52 concern, which may scape the scope of protection from vaccines and natural immunity.

53 Emergence of variants can drive the outcome of the pandemic in unpredicted ways. For  
54 example, in Manaus (Brazil) where more than 76% of the population was already infected and  
55 reached herd immunity (Buss et al. 2021), a new outbreak occurred by the appearance of a new  
56 SARS-CoV-2 lineage P1, also known as 501Y.V3 lineage inside the 20J clade (Sabino et al.  
57 2021). Therefore, there is a need to surveil the emergence of new SARS-CoV-2 variants as  
58 frequent as possible and with all the tools available.

59 Although Illumina technology is the gold standard for SARS-CoV-2 genome sequencing  
60 Oxford Nanopore technology (ONT) has contribute to outbreak surveillance all over the world  
61 (Chiara et al. 2020), especially in countries with low GDP. For example, Rwanda a country with  
62 similar population to Bolivia and a GDP 4-times lower performs SARS-CoV-2 genome  
63 surveillance biweekly across the country (Butera et al. 2021).

64 The most used protocol to sequence SARS-CoV-2 with nanopore technology has been the  
65 SARS-CoV-2-v3-LoCost amplicon-sequencing protocol provided by the ARTIC Network  
66 (González-Recio et al. 2021; Tyson et al. 2020). Library preparation in this protocol requires  
67 DNA ligation, which can be cumbersome, and its reagents are difficult to get in countries like  
68 Bolivia. Thus, here we provide an alternative for library preparation using the rapid PCR  
69 barcoding kit (ONT) and we report the first SARS-CoV-2 genomes sequenced in Bolivia.

## 70 **Methods**

### 71 *Sample collection*

72 Purified RNA from nasopharyngeal samples positive for SARS-CoV-2 were remitted to  
73 Hospital San Pedro Claver, Chuquisaca, Bolivia. Sample information was removed to avoid  
74 patient identification except for sample location and technical data (Detection Cycle threshold  
75 (Ct) and extraction method). Sample selection criteria was high viral load (Ct<25).

76 RNA samples were obtained from three PCR diagnostic labs approved by the Health Minister of  
77 Bolivia to detect SARS-CoV-2. Hospital San Pedro Claver (HSPCI), Sucre; Laboratorio de  
78 referencia Departamental para la Vigilancia Epidemiológica – SEDES-Potosí (LDVEP), Potosí

79 and Clin & Gen Lab, La Paz. RNA at HSPCI was extracted with the Viral Nucleic Acid  
80 Extraction Kit (IBI Scientific, IA, USA). RNA at Clin & Gen and LDVEP was extracted with  
81 the Viral RNA Extraction from Respiratory Specimens kit (Biomiga, CA, USA).

#### 82 *Library preparation and Nanopore sequencing*

83 RNA was reverse-transcribed using the RevertAid H minus First Strand cDNA Synthesis kit  
84 (Invitrogen, CA, USA) with random hexamer primers following the manufacturer's instructions.

85 SARS-CoV-2 genome amplification was done based on Nanopore protocols described before  
86 for Ebola (Quick et al. 2016), Zika (Quick et al. 2017) and SARS-CoV-2 (Tyson et al. 2020).

87 SARS-CoV-2 enrichment was done with the V3 primer pool (IDT, NJ, USA) designed by the  
88 ARTIC Network and Itokawa et al. (2020) using a Phusion High-Fidelity PCR Polymerase  
89 (Thermo Scientific, CA, USA). Multiplex PCR conditions were 1 cycle of: 98°C, 30 s; 30  
90 cycles of 98° C, 15 s; 65°C, 5 min; 1 final cycle of 72°C for 7 min. For the protocol  
91 standardization we tried the following change in annealing and extension: 63°C, 1 min; 72°C,  
92 4min.

93 Sample barcoding for the sequencing libraries was done with the Rapid PCR Barcoding Kit  
94 (SQK-RPB004) (Oxford Nanopore Technologies, United Kingdom) according to the  
95 manufacturer's instructions with the following modifications: Fragmentation was done by 5 min  
96 at 30°C.

97 Sequencing libraries were quantified with Qubit (Thermo Scientific, CA, USA) and purified  
98 with the Magnetic beads AxyPrep: MAG PCR Clean-Up Kit (Axygen-Corning, AZ, USA). All  
99 barcoded samples were pooled together (~15ng DNA) and prepared to be loaded onto a R9.4.1  
100 flowcell (Nanopore technologies, Oxford, UK) according to the manufacturer's instruction.  
101 Samples were sequenced in a MinIon device for a total of 18 hours.

102 Basecalling was performed with Guppy v3.2.1 using the fast module. Consensus genomes were  
103 generated with the ARTIC Network bioinformatic pipeline ([https://artic.network/ncov-](https://artic.network/ncov-2019/ncov2019-bioinformatic.sop.html)  
104 [2019/ncov2019-bioinformatic.sop.html](https://artic.network/ncov-2019/ncov2019-bioinformatic.sop.html)) using the Medaka tool for calling variants.

105 Sequences whose depth was less than 10x were annotated as missing data (“Ns”) in the  
106 consensus sequences (Table 1). Consensus genome sequences were deposited at the GISAID  
107 database with the following accessions: EPI\_ISL\_1250842, EPI\_ISL\_1278275-1278284 and  
108 EPI\_ISL\_1363787.

### 109 *Genome assessment, variant identification and phylogenomic analysis*

110 Genome consensus sequences from Bolivia were assessed and assigned to their respective  
111 PANGO lineages with Pangolin v3.1 version 2021-06-15. Nextstrain clades were assigned with  
112 the web app NextClade v1.4.0 (Hadfield et al. 2018). For the phylogenomic analysis, all  
113 complete SARS-CoV-2 genome sequences from neighboring regions of countries that surround  
114 Bolivia available on January, 2021 were downloaded from the GISAID repository (Acre, Mato  
115 Grosso, Mato Grosso do Sul and Rondônia from Brasil, and all sequences available from  
116 Argentina, Chile, Paraguay and Peru).

117 Genomic alignments were made using Muscle (Edgar 2004). Nucleotide and aminoacid  
118 substitution models were evaluated by MEGA X (Kumar et al. 2018). The phylogenetic tree  
119 was performed by maximum likelihood using the General Time Reversible model (Tavaré  
120 1986). Total sequences in the exploratory dataset were 427 and the final dataset had 47  
121 nucleotide sequences and had a total of 29903 positions (Table S1). Bootstrap testing was  
122 conducted with 50 replicates for exploratory analysis and with 1000 replicates for the final  
123 dataset. Bioinformatic analyses were computed at Centro Nacional de Computación Avanzada  
124 en Genómica y Bioinformática ([www.cncabo.umsa.bo](http://www.cncabo.umsa.bo)).

### 125 *Results*

126 This work is the first Coronavirus (SARS-CoV-2) genome sequencing carried out in Bolivia.  
127 We selected twelve samples of positive patients for Covid-19 from three different cities: 4  
128 samples from Sucre, 4 samples from Potosí and 4 samples from La Paz (Fig. 1).

129 We evaluated two annealing temperatures (65°C and 63°C) for the Multiplex PCR step given we  
130 used a different enzyme from the original protocol developed by the ARTIC network. However,

131 the Multiplex PCR at 63°C did not amplified several regions resulting in a low genome  
132 coverage, with only 22 % coverage of the whole genome.

133 **Table 1.** Nanopore sequencing genomic summary of 12 SARS-CoV-2 samples from Bolivia

<i>Sample</i>	<i>Mapped Reads<sup>a</sup></i>	<i>Depth</i>	<i>Length (bp)</i>	<i>Ns (Missing)</i>	<i>PANGO Lineage</i>
La Paz-1	233.733	389 X	29.782	132	B.1.1.348
La Paz-2	332.735	390 X	29.782	415	B.1.1.348
La Paz-3	141.075	272 X	29.494	1.336	B.1.1.348
La Paz-4	243.159	363 X	29.782	398	B.1.177
Sucre-1	634.401	320 X	29.323	1.972	B.1.1.348
Sucre-2	447.325	331 X	29.457	2.197	B.1.1.274
Sucre-3	432.514	286 X	29.456	3.216	B.1.2
Sucre-4	465.285	296 X	29.323	3.226	B.1.1
Potosi-1	398.489	339 X	29.494	1.075	B.1.1.348
Potosi-2	208.357	301 X	29.442	1.075	B.1.1.274
Potosi-3	145.561	327 X	29.494	651	B.1.1.274
Potosi-4	276.495	340 X	29.494	550	B.1.1
<i>Average</i>	<i>329.927</i>	<i>324,4 X</i>	<i>29.526,9</i>	<i>1.353,58</i>	
<i>Total</i>	<i>3.959.129</i>				

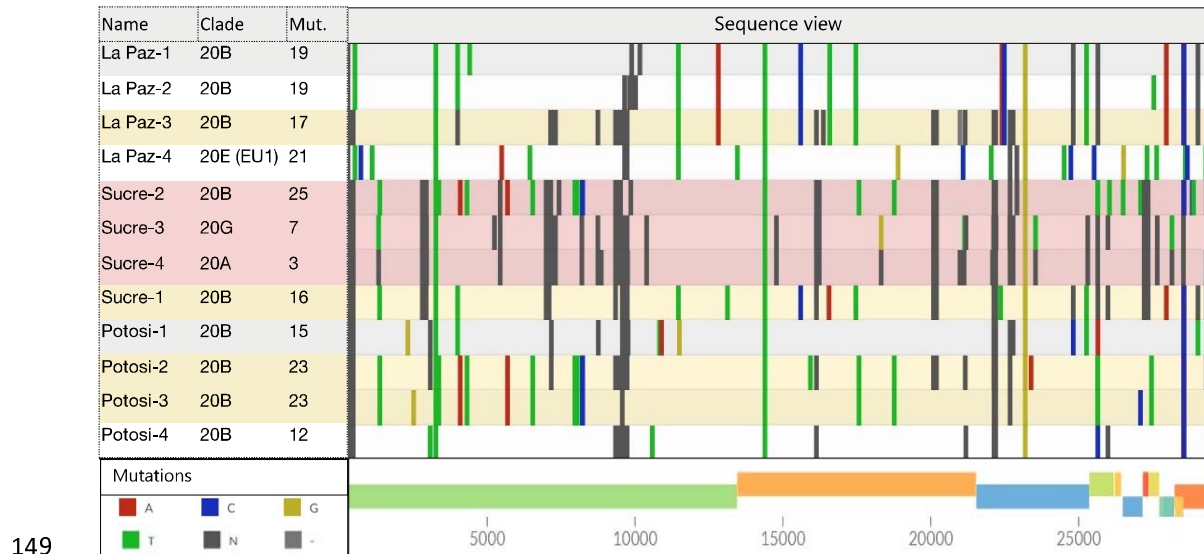
134 <sup>a</sup>Total reads mapped to the SARS-CoV-2 Wuhan-hu reference genome

135 The library preparation was done with the Rapid PCR Barcoding kit which introduces barcode  
136 reads through tagmentation without the need of ligation. Given that several amplicons must be  
137 barcoded to cover the whole SARS-CoV-2 genome we extended the incubation time designed in  
138 the original protocol from ONT at the tagmentation step from 1 to 5 minutes. This library  
139 preparation allowed us to cover in average 98,7 % of the whole SARS-CoV-2 genome.  
140 However, the coverage was not uniform and 4 regions were not successfully amplified (Fig. 1).

#### 141 **Genome sequencing of SARS-CoV-2**

142 Samples were sequenced for 18 h. and we obtained more than 6 million reads that passed  
143 quality control and we successfully mapped a total of 3,9 million reads with an average of 329  
144 thousand reads per sample. The average sequencing depth was 324,4X allowing to cover in  
145 average a 98,7% of the SARS-CoV-2 Wuhan-Hu reference genome (Table 1). The number of  
146 nucleotide mutations observed ranged from 3 to 25. Missing data accounted in average a 4,53%

147 of the reads, distributed in different regions where the coverage was not deep enough to  
 148 generate a consensus sequence (Fig. 1).



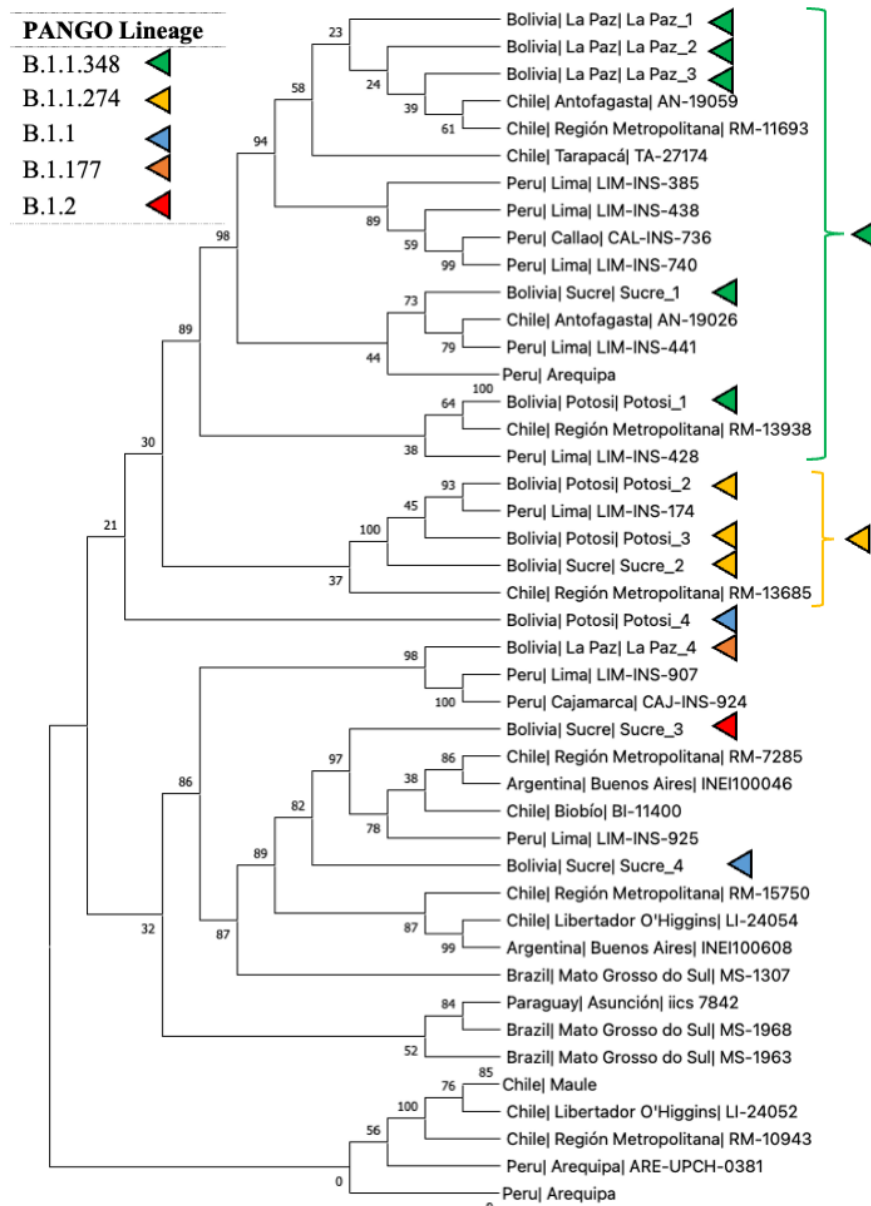
150 **Fig. 1.** SARS-CoV-2 genome sequence visualization of samples from Bolivia. Colored line  
 151 markers represent mutations from the Wuhan-Hu reference genome. Mutations color legend can  
 152 be found at the left-bottom corner. Dark grey regions represent missing data.

### 153 *Variant identification and Phylogenomic analysis*

154 The analyzed genomes were assigned to 4 nextstrain clades. In the city of Sucre, clades 20A,  
 155 20B and 20G were observed. In La Paz, clades 20B and 20E were observed, while in Potosi,  
 156 only variants belonging to the 20B clade were observed. Further, the twelve genomes were  
 157 assigned to five different lineages B.1.1, B.1.177, B.1.1.274, B.1.1.348, B.1.2. (Table 1).

158 In order to evaluate regional clusters in Western-central South America, we first aligned 415  
 159 genomes from Argentina, Brazil, Chile, Peru and Paraguay together with 12 samples from  
 160 Bolivia. The best substitution model for phylogenomic analysis was the General Time  
 161 Reversible (GTR) and with such model we created an exploratory maximum-likelihood tree with  
 162 a bootstrap of 50 iterations. Clusters that included Bolivian samples together with representative  
 163 genome sequences from provinces of neighboring countries were selected to further investigate  
 164 the possible regional clusters. A total of 47 genomes (Table S1) were selected for constructing a

165 new phylogenomic tree that will have a better focus of the clusters present in Bolivia. The  
166 results suggested 2 mayor clusters of SARS-CoV-2 variants circulating in Bolivia (Fig. 2). The  
167 first cluster includes 3 samples from La Paz, one from Sucre and one from Potosi, that all  
168 belong to the B.1.1348 lineage. The second cluster includes two samples from Potosi and one  
169 from Sucre, all of which belong to the lineage B.1.1.274. One sample from Potosi and one from  
170 Sucre belongs to the lineage B.1.1. The other two samples were part of external clades that  
171 involves variants not commonly present in South America, like the 20E from La Paz and the  
172 20G from Sucre.





174 **Fig. 2.** Phylogenomic relationships of SARS-CoV-2 genomes from Bolivia in January-February  
175 2021. The evolutionary history of 12 genome sequences from Bolivia together with 35 public  
176 genomes from South America are inferred by the Maximum Likelihood method and General  
177 Time Reversible model with 1000 iterations. The two main SARS-CoV-2 clusters circulating in  
178 Bolivia are defined by curly brackets. Colors represent current PANGO lineages. Bootstrap  
179 values are given in percentage (%). Branches with two samples from the same region and  
180 country are collapsed.

## 181 **Discussions**

182 Complete SARS-CoV-2 genomes are defined by genome lengths longer than 29,000 bp  
183 according to GISAID. Thus, we achieved to sequence complete genomes for the 12 samples  
184 analyzed. However, the number of missing data (Ns) was variable among samples. Missing data  
185 in the sequences from our workflow have two sources. The first source, which can be observed  
186 mostly in two samples from Sucre (Sucre-3 and Sucre-4) (Fig. 1), both which contain more than  
187 3000s nucleotides missing is due to inhibition or unsuccessful amplification of certain PCR  
188 products in the Multiplex PCR step. This issue can be resolved by picking samples with higher  
189 Cts after the reverse transcription. The second source, observed in 4 regions commonly to all  
190 samples, is due to the uneven barcode insertion by Tagmentation and PCR. This uneven  
191 amplification might be due to mismatches in primer-binding sites of the barcode primers with  
192 certain DNA templates (O'Donnell et al. 2016). Another reason could be the affinity of the  
193 transposome complex with certain DNA regions because it is known that transposases have  
194 some sequence biases but the reason is not yet determined (Goryshin et al. 1998; Reznikoff  
195 2003). This issue might be resolved by linear amplification which produces less bias and errors  
196 (Li et al. 2020) or genetically engineered transposases (Kia et al. 2017). This issue was not  
197 observed when applying library preparation with ligation instead of Tagmentation (Tyson et al.  
198 2020).

199 The variant assignment results are expected because there was a predominance of the 20A and  
200 20B (which includes the lineages B.1.1, B.1.1.274 and B.1.1.348) SARS-COV-2 variants

201 circulating in South America (Camacho et al. 2021; Muñoz et al. 2021). The five different  
202 lineages (Table 1) found in this study are correlated with the clusters observed in the  
203 phylogenomic tree (Fig. 2). The two main clusters observed in the evolutionary analysis reveals  
204 the circulation of at least two SARS-CoV-2 lineages in Bolivia in February, 2021. Both lineages  
205 were present in Potosi and Sucre. Due to the location of Sucre, situated in between the  
206 mountainous Andean region and the lowlands we can presume that two different SARS-CoV-2  
207 lineages were introduced independently and they evolve convergently as observed in the  
208 Metropolitan Region of Chile and Lima, the capital of Peru (Fig. 2). Although more data is  
209 needed, we can observe that only one lineage (B.1.1.348) was established in the governmental  
210 city La Paz. This lineage is one of the most common lineages found in South America  
211 ([https://cov-lineages.org/lineages/lineage\\_B.1.1.348.html](https://cov-lineages.org/lineages/lineage_B.1.1.348.html)). Lineage B.1.1.348 accounted for  
212 3,6% of the total SARS-CoV-2 variants of Peru until March-2021 (Camacho et al. 2021).

213 The other lineage (B.1.1.274) still has an unknown origin, especially in Bolivia, given that the  
214 highest prevalence reported of this lineage is in the United Kingdom (44%) and the second  
215 highest is from Russia (15%) ([https://cov-lineages.org/lineages/lineage\\_B.1.1.274.html](https://cov-lineages.org/lineages/lineage_B.1.1.274.html)). The  
216 spreading of this variant reveals multiple SARS-CoV-2 introductions in Bolivia. This is  
217 expected because genomic surveillance in other south American countries have revealed this  
218 possibility before, for example in Colombia 11 different lineages were detected (Ramírez et al.  
219 2021).

220 The sample from La Paz identified as 20E (EU1) is expected to be part of an external group  
221 given its presence was mostly observed in Europe (Hodcroft et al. 2021b). Similarly, sample  
222 20G from Sucre is part of this external group because its presence was mostly observed in North  
223 America (Hodcroft et al. 2021a; Zhang et al. 2021). Both findings could be isolated events that  
224 did not spread enough to become established variants. However, more genomic data is needed to  
225 reach a stronger deduction.

226 In conclusion, the alternative library preparation for SARS-CoV-2 genome sequencing using the  
227 ARTIC protocol presented here is effective to identify SARS-CoV-2 variants with high

228 accuracy and without the need of DNA ligation. Therefore, this can be an alternative tool to  
229 perform SARS-CoV-2 genome surveillance in developing countries.

### 230 **Additional files**

231 Supplementary Table 1. Public genomes available from GISAID that were considered for the  
232 final dataset of the evolutionary history of SARS-CoV-2 variants circulating in Bolivia

233 Supplementary Table 2. Acknowledgements to all authors who deposited public genomes on  
234 GISAID that were considered for the exploratory dataset of the evolutionary history of SARS-  
235 CoV-2 circulating in Bolivia.

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248 Table 2).

### 249 **Contributors' statement**

250 OMRP and AV designed the study. OMRP, CD and AV performed the experiments. OMRP  
251 analyzed the data. OMRP and AV wrote the paper with input from all authors who reviewed  
252 and approved the final manuscript.

253 **Competing interests statement**

254 The authors declare there are no competing interests.

255 **Data availability**

256 Consensus genome sequences were deposited at the Global Initiative on Sharing All Influenza

257 Data (GISAID) repository.

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