SARS-CoV-2 Omicron-specific mRNA vaccine

induces potent and broad antibody responses in vivo

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Abstract

The Omicron variant of SARS-CoV-2 has high transmissibility and recently been sweeping the globe, dominating new infection cases in the US and many regions in the world. Due to its extensive number of mutations, this variant has high level of immune evasion, which drastically reduced the efficacy of existing antibodies and vaccines. Thus, it is important to develop an Omicron-specific vaccine and test if it can induce immune responses against Omicron and broadly against other variants. Here, we generated an Omicron-specific lipid nanoparticle (LNP) mRNA vaccine candidate, and tested its potency of antibody induction in animals, both alone and as a booster to existing mRNA vaccine designed against the ancestral reference virus (WA-1). This Omicron-specific LNP-mRNA vaccine elicited strong and specific antibody response in vaccination-naïve mice. Consistent with recent reports, mice that received two-dose WA-1 LNP-mRNA, the one mimicking the commonly used Pfizer/Moderna mRNA vaccine administered in the general population, showed a 41-fold reduction in neutralization potency against Omicron variant as compared to WA-1 two weeks post second dose, which further reduced to background level 3.5 months post second dose. As a booster for WA-1 mRNA vaccination, a single dose Omicron LNP-mRNA induced potent antibody response against the Omicron variant, with over 1,000-fold increase at two weeks post injection as compared to the blood samples right before booster. The Omicron-specific antibody level of the Omicron-boosted samples is numerically similar to WA-1 vaccine against WA-1 variant. This boost also elicited broader antibody responses against WA-1 and Delta variants, restoring these activities of the WA-1 vaccinated animals that also dropped over time. A consecutive second dose of Omicron LNP-mRNA 2 weeks following the first dose did not significantly increased the level of antibodies. These *in vivo* animal data provided a timely proof-of-concept for Omicron-specific mRNA vaccination, alone and as a booster to the existing widely-used mRNA vaccine form.

Key words

Introduction

Since its first identification in specimen collected in November 2021[1], the Omicron variant (B.1.1.529) of SARS-CoV-2 has been rapidly spreading across the globe, reported in many countries and regions[2-5]. The Omicron variant was associated with increased risk of reinfection according to a population-level evidence in South Africa[6]. Two days after its initial report to World Health Organization (WHO), Omicron was designated as a variant of concern (VoC) by WHO on November 26[7]. Population-level data indicated that Omicron has become the dominant variant in South Africa in mid-November[8], only one week after the first traceable case. Similarly in January 2022, Omicron variant has dominated newly diagnosed cases in many states of the US[9], Canada[10] and UK[4]. Omicron variant has started to drive the fourth wave of COVID-19 in South Africa[11] and around the world[12]. Its case doubling time is faster than previous waves[12], hinting its increased transmissibility and/or immune evasion. A number of urgent questions on Omicron have quickly become central concerns, which include whether Omicron can evade immunity from therapeutic antibodies, past infection or vaccination, whether Omicron-caused disease is more severe or infectious, and whether and when Omicron-specific vaccine or antibody will be available against Omicron variant.

Mounting clinical and laboratory evidence have shown that most of therapeutic and natural antibodies for COVID-19 failed to retain potency against Omicron variant[13-18]. The Omicron variant has 60 mutations compared to the ancestral variant's reference sequence (also referred to as prototypic virus / variant, reference, wildtype (WT), Wuhan-1, or WA-1)[5]. There are 50 nonsynonymous, 8 synonymous, and 2 non-coding mutations, of which many are not observed in any other variants. There are a total of 32 mutations in the spike protein, which is the main antigen target of therapeutic antibodies and of many widely administered vaccines, including 30 amino acid changes, three small deletions, and one small insertion, of which 15 are within the receptor-binding domain (RBD)[19]. Due to its extensive number of mutations, this variant has high level of immune evasion, which drastically reduced the efficacy of existing antibodies and vaccines. Omicron spike mutations are concerning as they cluster on known neutralizing antibody epitopes[15] and some of them have well-characterized consequences such as immune evasion and higher infectivity. In fact, recent reports showed that the vast majority of the existing monoclonal antibodies developed against SARS-CoV-2 have dramatic reduction in effectiveness against the

Omicron variant[13-18], leading to recall or exclusion of recommended use of certain therapeutic

antibodies under emergency authorization[20].

The mRNA vaccine has achieved immense success in curbing the viral spread and reducing the

risk of hospitalization and death of COVID-19, for the past variants[21,22]. However, a significant

drop of mRNA vaccine's effectiveness against Omicron has been reported from clinical[8] and

laboratory studies of samples of vaccinated individuals[23,24]. In light of the heavily altered antigen

landscape of Omicron spike, assessing the efficacy of Omicron-specific mRNA vaccine is urgently

needed. However, to date, there is no clinical or preclinical data of Omicron-specific mRNA

vaccine publicly available. A number of critical questions regarding Omicron-specific mRNA

vaccine need to be addressed. For examples: What is the immunogenicity of Omicron spike used

in a vaccine form? Whether potent antibody immunity can be induced by an Omicron-specific

mRNA vaccine, and how well does that neutralize the Omicron variant? If, and how, does the

immune response induced by the Omicron-specific mRNA vaccine react to other variants, such as

WA1 or Delta? Finally, because a large existing population in the world received authorized

Pfizer/BioNTech or Moderna mRNA vaccines that encodes the reference (WA-1) spike antigen,

it is important to know whether an Omicron mRNA vaccine can boost the reduced or waning

immunity associated with this existing vaccination.

To answer some of these questions, we directly generated an Omicron-specific lipid nanoparticle

(LNP) mRNA vaccine candidate that encodes an engineered full-length Omicron spike with

HexaPro mutations, and evaluated its effect alone, and as booster shots after SARS-CoV-2 WA-1

mRNA vaccine *in vivo* in animal models.

Results

Design, generation and physical characterization of an Omicron-specific LNP-mRNA

vaccine candidate

We designed an Omicron-specific LNP-mRNA vaccine candidate based on the full-length spike

sequence of the Omicron variant from two North America patients identified on Nov23rd, 2021.

The spike coding sequence of WA-1 and Omicron variant was flanked by 5' UTR, 3' UTR and 3'

PolyA tail (**Figure 1A**). Six Proline mutations (HexaPro) were introduced to spike sequence, as

they were reported to improve spike protein stability and prefusion state [25]. The furin cleave site

(RRAR) in spike was replaced with GSAS stretch to keep integrity of S1 and S2 unit. We then

encapsulated the transcribed spike mRNA into lipid nanoparticles to produce WA-1 and Omicron

LNP-mRNAs, and characterized the quality and biophysical properties by downstream assays

including dynamic light scattering, transmission electron microscope and receptor binding assay.

The dynamic light scattering and transmission electron microscope were applied to evaluate the

size distribution and shape of Omicron LNP-mRNA, which showed a monodispersed sphere shape

with an average radius of 52 nm and polydispersity index of 0.17 (**Figure 1C-1E**). To evaluate the

effectiveness of LNP-mRNA mediated Omicron spike expression in cells as well as the receptor

binding ability of the designed Omicron HexaPro spike, Omicron LNP-mRNA was directly added

to HEK293T cells 16 hours before subjecting cells to flow cytometry. Evident surface expression

of functional Omicron HexaPro spike capable of binding to hACE2 was observed by staining cells

with human ACE2-Fc fusion protein and PE anti-Fc secondary antibody (**Figure 1F**). These data

showed that the Omicron spike sequence was successfully encoded into an mRNA, encapsulated

into the LNP, can be introduced into mammalian cells efficiently without additional manipulation,

and express functional spike protein that binds to human ACE2.

Specific binding and neutralizing antibody response elicited by Omicron LNP-mRNA

against the Omicron variant

After ensuring functional spike expression mediated by Omicron LNP-mRNA, we proceeded to

characterizing the immunogenicity of Omicron LNP-mRNA *in vivo*. In order to test rapid immune

elicitation against Omicron variant, we performed the following vaccination and testing schedule.

Two doses of 10 μg Omicron LNP-mRNA, as prime and boost two weeks apart were

intramuscularly injected into five C57BL/6Ncr (B6) mice (Figure 1G). Retro-orbital blood was

collected prior to immunization on day 0, 13 and 21, i.e. two weeks post prime (one day before

boost), and one week post boost. We then isolated plasma from blood, which was used in ELISA

and neutralization assay to quantify binding and neutralizing antibody titers. A significant increase

in antibody titers against Omicron spike RBD was observed in ELISA assay from plasma samples

post prime and boost (**Figure 1H-1I**). These data showed that the Omicron LNP-mRNA induced

strong and specific antibody responses in vaccinated mice *in vivo*.

Omicron LNP-mRNA boosted waning immunity of WA-1 LNP-mRNA immunized mice

In light of the wide coverage of the ancestral WA-1-based LNP-mRNA vaccine (to model those

widely administered in the current general population), we sought to test: (i) the effect of WA-1

LNP-mRNA vaccination against Omicron variant, (ii) the immunity induced by WA-1 LNP-

mRNA over time, and (iii) whether Omicron LNP-mRNA could boost the waning immunity

against Omicron variant, WA-1 and/or Delta variant. To gain initial answers to these questions in

animal models, we sequentially vaccinated B6 mice with two doses of WA-1 and Omicron LNP-

mRNA with a 106-day interval between last dose of WA-1 and first dose of Omicron LNP-mRNA

(**Figure 2A**). We collected blood samples of these animals in a rational time series, including day

35 (2 weeks post two doses of WA-1 LNP-mRNA vaccination), day 127 (3.5 months post two

doses of WA-1 LNP-mRNA vaccination, immediately before Omicron LNP-mRNA vaccination),

day 140 (~2 weeks post the first booster dose of Omicron LNP-mRNA vaccination, one day before

the second Omicron dose), and day 148 (1 week post two doses of Omicron LNP-mRNA

vaccination).

Plasma samples were purified from blood samples and analyzed in ELISA and neutralization

assays against SARS-CoV-2 Omicron, Delta or WA-1. Comparing to the titers against WA-1 and

Delta RBD, the binding antibody titers against Omicron RBD elicited by WA-1 mRNA-LNP were

significantly weaker in samples from both day 35 and 127 (**Figures 2B and S1**). The group average

Omicron RBD reactivity is 20 fold (day 35) and 11 fold (day 127) lower than that of WA-1 RBD,

and 18 fold (day 35) and 10 fold (day 127) lower than Delta (**Figure S2**). A steep drop (two to

three orders of magnitude) of antibody titers from mice immunized with WA-1 LNP-mRNA was

observed after three months (day 35 vs. day 127) from all three RBD datasets. It is worth noting

that the antibody titers on day 127 (3.5 months post WA-1 boost, prior to Omicron booster)

decreased to a level that is near-baseline (PBS controls), particularly for titers against Omicron

RBD.

A single dose of Omicron LNP-mRNA booster shot drastically increased the antibody titers of
mice vaccinated with WA-1 LNP-mRNA, by over 2,000 fold as compared to the sample right
before boost (**Figure 2B**), which reached a level numerically comparable to the post-boost titer by
Omicron LNP-mRNA alone (**Figure 1I**). Interestingly, the Omicron LNP-mRNA shot boosted not
only titers against Omicron RBD, but also titers against Delta and WA-1 RBD, although the extent
of titer increase was more drastic in the Omicron RBD data (**Figure 2B**). The antibody titers did
not increase one week after a second boost of Omicron LNP-mRNA.

Because pseudovirus neutralization is a relatively safer and widely-used assay that strongly
correlates with live virus results and has been regarded as a standard proxy by the field [24,26-28], we
set out to use pseudovirus neutralization assay to measure the neutralizing antibody responses
induced by Omicron LNP-mRNA booster in these animals. We first generated HIV-1 based
Omicron pseudovirus system. Interestingly, we found that under exactly the same virus production
and assay conditions, the Omicron pseudovirus has substantially higher infectivity than both WA-
1 (8x increase) and Delta (4x) pseudoviruses (**Figure S3A-C**), consistent with its higher infectivity
reported previously[24,29,30]. We then normalized the pseudoviruses by functional titers (number of
infected cells / volume), and used this system to perform pseudovirus neutralization assays on all
the plasma samples collected (**Figure S3D**). The neutralization results showed a consistent overall
pattern as ELISA results, with a striking contrast among titers against Omicron pseudovirus
(**Figure 2C**). On day 35 and 127, the mice post boost of WA-1 LNP-mRNA showed significantly
lower neutralizing antibody titers against Omicron variant than titers against Delta variant or WA-
1 (**Figure S4**). For the samples two weeks post boost (day 35), the group average Omicron RBD
neutralization reactivity is 41 fold lower than that of WA-1 RBD, and 11 fold lower than Delta.
When comparing samples collected on day 35 and 127, around two orders of magnitude (10s~100s
of fold change) time-dependent titer reduction was unequivocally observed in all three pseudovirus
neutralization data (**Figure 2C**). The Omicron-neutralization activity of WA-1 vaccinated mice
3.5 months post boost (day 127) was as low as undetectable (**Figure 2C**). These data suggested
that there was severe waning antibody immunity in the standard two-dose WA-1 vaccinated
animals, which completely lost neutralization ability against the Omicron variant pseudovirus.

A single booster shot of Omicron LNP-mRNA vaccine drastically enhanced the antibody titers

against Omicron variant two weeks after the injection, of which the surge was over 1000-fold (log

IC50 changed from below 0.5 to nearly 4) (**Figure 2C**). The neutralizing titer after this surge by

Omicron vaccine surpassed the titer two weeks post WA-1 vaccine boost (day 35). Interestingly,

the Omicron mRNA vaccine also rescued the antibody titers against Delta and WA-1

pseudoviruses, with a two orders of magnitude increase in both ELISA titers and neutralization

activity (**Figure 2B-2C**). A second booster shot two weeks after the first of Omicron mRNA

vaccine yielded little increase in titers or neutralization activity against Omicron, WA-1 or Delta

variants at the time measured (day 148, 1 week after the second dose) (**Figure 2C**). Overall, the

ELISA titers and neutralization activity significantly correlated with each other across all samples

and animals tested (**Figure 2D**). These data suggested that a single dose Omicron LNP-mRNA

induced potent antibody response against the Omicron variant, along with broader activity against

the ancestral WA-1 and the recent Delta variant, in mouse models at the timepoints measured.

Discussion

The rapid spread of Omicron variant around the world, especially in countries with wide coverage

of vaccines designed based on the ancestral antigen (e.g. WA-1 mRNA vaccine), is particularly

concerning. The extensive mutations in Omicron spike mark a dramatic alteration in its

antigenicity[15]. Omicron variant has high transmissibility and high level of immune evasion from

WA-1 mRNA vaccine induced immunity, which was reported from various emerging literature

[6,14-17]. Omicron's strong association with reinfection[6] or breakthrough infection[8,12] and its heavily

altered antigenicity prompted the idea of developing Omicron-specific mRNA vaccine.

In this study, we generated a HexaPro-version Omicron spike LNP-mRNA vaccine candidate. In

mouse models, we validated that it can induce potent Omicron-specific antibody response, and

tested its boosting effect to animals previously received two-dose WA-1 mRNA vaccine shots. An

encouraging observation is that potent antibody immunity can be achieved by a single dose of

Omicron LNP-mRNA. The titer of single dose Omicron LNP-mRNA vaccinated mouse plasma

was numerically similar to the antibody titer against Omicron observed 2 weeks post boost of WA-

1 LNP-mRNA (log10 AUC around 3 in **Figure 1I and 2B**), although it is still unclear whether the

potency of the Omicron mRNA vaccine is associated with the high number of mutations of the

antigen. Because of the high starting titers post prime, the titer change post boost by Omicron

LNP-mRNA was less prominent (**Figure 1I**).

To date (as of Jan 9, 2022), 4.6 billion people, i.e. 60% of the global population, received COVID-

19 vaccination (Our World in Data[31]). Almost all those vaccines were designed based on the

antigen from the ancestral virus, including the two approved mRNA vaccine BNT162b2 [21] and

mRNA-1273 [22], both of which were based on the reference / WA-1 spike sequence. Individuals

receiving existing vaccines have waning immunity overtime, reported for multiple approved or

authorized vaccines including the two mRNA vaccines[32-35]. Thus, it is important to test the effect

of Omicron-specific vaccine candidate as booster shots in the context of WA-1 mRNA vaccine.

Consistent with past reports, we observed a dramatic time-dependent decrease (around 100-fold

decrease) of binding and neutralizing antibody titers against Omicron, Delta variants and WA-1

strain 3.5 months after the second dose of WA-1 mRNA vaccine. This observed waning immunity

is particularly concerning in the scenario of rapid spreading of Omicron variant, which largely

escapes the humoral immune response elicited by WA-1 mRNA vaccines as evident in published

studies[14-16,18] as well as in our current data. While a limitation of our study is that these are animal

data, although the antibody responses to vaccination is highly conserved between mouse and

human (and that the mouse is a widely used preclinical model by major vaccine makers[36,37]). In

fact, a very recent report showed waning immunity in vaccinated individuals[24] and that a booster

shot using the original WA-1 based mRNA vaccine helps recover partial immunity. However, the

neutralizing antibody titers even after the boost with a WA-1 based vaccine titer were still

significantly lower against Omicron as compared to WA-1 and other variants, urging for

development and testing of an Omicron-specific vaccine not studied before.

We tested the Omicron-specific LNP-mRNA vaccine candidate in the context of WA-1 vaccinated

animals. While animals almost completely lost antibody protection against Omicron even though

they received two doses of WA-1 mRNA vaccine 3.5 months ago, our results showed that a single

dose of Omicron mRNA vaccination boosted neutralizing antibody titers over 1000-fold against

Omicron. In addition, the Omicron-specific vaccine also brought back neutralizing titers against

WA-1 and Delta variants to a level comparable to peak titers by WA-1 mRNA vaccine. The

Omicron booster shot provided superior protection against Omicron variant and comparable

humoral defense against WA-1 and Delta variants. Such surge of antibody titer by Omicron booster

shot, and the neutralization activities against WA-1 and Delta, two of the once-dominant variants,

suggest that the Omicron-specific LNP-mRNA can provide broader activities, and may therefore

be worth considering over the WA-1 LNP-mRNA booster. These animal model results provided

timely initial data in reference for further development of Omicron-specific vaccine and potential

testing as a booster.

Acknowledgments

We thank various members from our labs for discussions and support. We thank staffs from various Yale core facilities (Keck, YCGA, HPC, YARC, CBDS and others) for technical support. We thank Drs. Tsemperouli, Karatekin, and others for providing equipment and related support. We thank various support from Department of Genetics; Institutes of Systems Biology and Cancer Biology; Dean's Office of Yale School of Medicine and the Office of Vice Provost for Research.

Funding

This work is supported by DoD PRMRP IIAR (W81XWH-21-1-0019) and discretionary funds to SC. The TEM core is supported by NIH grant GM132114 to CL.

Institutional Approval

This study has received institutional regulatory approval. All recombinant DNA (rDNA) and biosafety work were performed under the guidelines of Yale Environment, Health and Safety (EHS) Committee with approved protocols (Chen 18-45, 20-18, 20-26). All animal work was performed under the guidelines of Yale University Institutional Animal Care and Use Committee (IACUC) with approved protocols (Chen-2020-20358; Chen 2021-20068).

Figure legends

Figure 1. Omicron-specific LNP-mRNA vaccine elicited binding antibodies against SARS-

CoV-2 Omicron variant.

A, Illustration of mRNA vaccine construct expressing SARS-CoV-2 WA-1 and Omicron spikes.

The spike open reading frame were flanked by 5' untranslated region (UTR), 3' UTR and polyA

tail. The Omicron mutations (red) and HexaPro mutations (black) were numbered based on WA-

1 spike residue number.

B, Distribution of Omicron spike mutations (magenta) were displayed in one protomer of spike

trimer of which NTD, RBD, hinge region and S2 were colored in purple, blue, green and orange

respectively (PDB: 7SBL). The HexaPro mutations in S2 were colored in cyan.

C, Schematics illustrating the formulation and biophysical characterization of LNP-mRNA.

D, Dynamic light scattering derived histogram depicting the particle radius distribution of Omicron

spike LNP-mRNA.

E, Omicron LNP-mRNA image collected on transmission electron microscope.

F, human ACE2 receptor binding of LNP-mRNA encoding Omicron spike expressed in 293T cells

as detected by human ACE2-Fc fusion protein and PE-anti-human Fc antibody on Flow cytometry.

G, Immunization and sample collection schedule. Retro-orbital blood were collected prior

Omicron LNP-mRNA vaccination on day 0, day 13 and day 21. Five mice (n=5) were

intramuscularly injected with 10 µg Omicron LNP-mRNA on day 0 (prime, Omicron x 1) and day

14 (boost, Omicron x 2). The plasma and peripheral blood mononuclear cells (PBMCs) were

separated from blood for downstream assays. The slight offset of the labels reflects the fact that

each of the blood collections were perform prior to the vaccination injections.

H, ELISA titration curves over serial $\log_{10}$-transformed dilution points of plasma collected from

mice before and after immunization with Omicron LNP-mRNA at defined time points.

I, Binding antibody titers of plasma from mice vaccinated with Omicron LNP-mRNA against

Omicron spike RBD as quantified by area under curve of $\log_{10}$-transformed titration curve ($\log_{10}$

AUC) in Figure 1H. Each dot in bar graphs represents value from one mouse.

Data on dot-bar plots are shown as mean ± s.e.m. with individual data points in plots. One-way

ANOVA with Tukey's multiple comparisons test was used to assess statistical significance.

Statistical significance labels: * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$; **** $p < 0.0001$. Non-

significant comparisons are not shown, unless otherwise noted as n.s., not significant.

Figure 2. Omicron specific LNP-mRNA booster shots greatly improved waning immunity of

mice vaccinated with SARS-CoV-2 WA-1 LNP-mRNA against both SARS-CoV-2 Delta and

Omicron variants.

A, Schematics showing the immunization and blood sampling schedule of mice (n=3) administered

with 1 µg WA-1 LNP-mRNA prime (WA-1 x 1) and boost (WA-1 x 2) as well as additional 10 µg

Omicron-specific LNP-mRNA booster shots. The plasma and PBMCs were separate from blood

for downstream assays. The slight offset of the labels reflects the fact that each of the blood

collections were perform prior to the vaccination injections.

B, Bar graph comparing binding antibody titers of mice administered with PBS or WA-1 and

Omicron LNP-mRNA against Omicron, Delta and WA-1 RBD (ELISA antigens). The antibody

titers were quantified as area under curve of $\log_{10}$-transformed titration curve ($\log_{10}$ AUC) in

Extended Data Figure 1. PBS sub-groups (n=3 each) collected from different matched time points

showed no statistical differences between each other, and were combined as one group (n=12).

C, Neutralizing antibody titers in the form of $\log_{10}$-transformed reciprocal IC50 calculated from

fitting the titration curve with a logistic regression model.

D, Correlation of neutralization titers ($\log_{10}$ reciprocal IC50, y axis) and ELISA titers ($\log_{10}$ AUC,

x axis) from matched vaccination group (left panel) or individual mouse (right panel). PBS samples

from different timepoints were shown as one group in correlation map and were not included in

linear regression model. Each dot in bar graphs represents value from one group average (left

panel), or one individual mouse (right panel).

Data on dot-bar plots are shown as mean ± s.e.m. with individual data points in plots. Two-way

ANOVA with Tukey's multiple comparisons test was used to assess statistical significance.

Statistical significance labels: * $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$; **** $p < 0.0001$. Non-

significant comparisons are not shown, unless otherwise noted as n.s., not significant.

Extended Data Figures

Extended Data Figure 1 (Figure S1). ELISA titration curves over serial dilution of plasma

collected at different timepoints from mice administered with PBS or WA-1 and/or Omicron

LNP-mRNA.

ELISA curves of serial $\log_{10}$-transformed dilution points of plasma collected from mice before and

after immunization with Omicron LNP-mRNA, against spike receptor binding domain (RBD)

antigens of Omicron variant (left), Delta (mid) and WA-1 (right) were shown.

Extended Data Figure 2 (Figure S2). Binding antibody titers of mice administered with PBS

or WA-1 and Omicron LNP-mRNA against Omicron, Delta and WA-1 RBD (ELISA

antigens), were grouped by vaccination timepoints to compare titers against different RBD

antigens. The antibody titers were quantified as area under curve of $\log_{10}$-transformed titration

curve (Log_{10} AUC) in Extended Data Figure 1.

Extended Data Figure 3 (Figure S3). Omicron, Delta and WA-1 pseudovirus production,

characterization and neutralization assay.

A. Functional titration curves of Omicron, Delta and WA-1 pseudoviruses in hACE2+ cells.

B. Representative Flow Cytometry plots of infectivity of Omicron, Delta and WA-1 pseudoviruses

in hACE2+ cells.

C. Quantification of infectivity of Omicron, Delta and WA-1 pseudoviruses in hACE2+ cells.

D. Neutralization titration curves of plasma from mice administered with PBS or WA-1 and

Omicron LNP-mRNA against Omicron (left), Delta (mid) and WA-1 (right) pseudovirus.

Pseudovirus infection rate was calculated from percent of GFP positive cells and was plotted

against plasma dilution ($\log_{10}$ transformed) as titration curve.

Extended Data Figure 4 (Figure S4). Neutralizing antibody titers in the form of $\log_{10}$-

transformed reciprocal IC50 were grouped by vaccination timepoints to compare titers

against different pseudoviruses. The neutralization titers were quantified as $\log_{10}$-transformed

reciprocal IC50 values (Log_{10} reciprocal IC50, or Log_{10} IC50,) in Extended Data Figure 3.

Extended Data Figure 5 (Figure S5). Representative flow cytometry gating strategy for

detecting Omicron spike binding to human ACE2 receptor.

Methods

Molecular cloning

The Omicron spike amino acid sequence was derived from two Omicron cases identified in Canada

on Nov.23rd, 2021 (EpiCoV, EPI_ISL_6826713 and EPI_ISL_6826714). Omicron spike cDNA

were codon optimized, synthesized as gblocks (IDT) and cloned to mRNA vector with 5', 3'

untranslated region (UTR) and poly A tail. The furin cleave site (RRAR) was replaced with a

GSAS short stretch in the mRNA vector. HexaPro mutations were introduced in the WA-1 and

Omicron variant spike sequence of mRNA vector to improve expression and prefusion state[25]. The

accessory plasmids for pseudovirus assay including pHIVNLGagPol and pCCNanoLuc2AEGFP

were from Dr. Bieniasz' lab[38]. The C-terminal 19 amino acids were deleted in the SARS-CoV-2

spike sequence for the pseudovirus assay.

Cell Culture

HEK293T, HEK293FT (Thermo Fisher) and 293T-hACE2 (gifted from Dr Bieniasz' lab) cell lines

were maintained in Dulbecco's modified Eagle's medium (DMEM, Thermo fisher) supplemented

with 10% Fetal bovine serum (Hyclone) and 1% penicillin-streptomycin (Gibco), which is denoted

as complete growth medium. Cells were split every 2 days at a split ratio of 1:4 when the

confluency reached over 80%.

In vitro mRNA transcription and vaccine formulation

A Hiscribe™ T7 ARCA mRNA Kit (with tailing) (NEB, Cat # E2060S) was used to in vitro

transcribe codon-optimized mRNA encoding HexaPro spikes of SARS-CoV-2 WT and Omicron

variant with 50% replacement of uridine by N1-methyl-pseudouridine. The DNA template was

linearized before mRNA transcription and contained 5′ UTR, 3′ UTR and 3′ polyA tail as

flanking sequence of spike open reading frame.

The purified mRNA was generated by following NEB manufacturer's instructions and kept frozen

at -80 °C until further use. The lipid nanoparticles mRNA was assembled using the

NanoAssemblr® Ignite™ instrument (Precision Nanosystems) according to manufacturers'

guidance. In brief, lipid mixture was mixed with prepared mRNA in 25mM sodium acetate at pH

5.2 on Ignite instrument at a molar ratio of 6:1 (LNP : mRNA), similar to previously described[36,39].

The LNP encapsulated mRNA (LNP-mRNA) was buffer exchanged to PBS using 100kDa Amicon

filter (Macrosep Centrifugal Devices 100K, 89131-992). Sucrose was added as a cryoprotectant.

The particle size of mRNA-LNP was determined by DLS device (DynaPro NanoStar, Wyatt,

WDPN-06) and TEM described below. The encapsulation rate and mRNA concentration were

quantified by Quant-iT™ RiboGreen™ RNA Assay (Thermo Fisher).

434   **Validation of LNP-mRNA mediated spike expression in vitro and receptor binding**

435   **capability of expressed Omicron HexaPro spikes**

On day 1, HEK293T cells were seeded at 50% confluence in 24-well plate and mixed with 2 µg

Omicron LNP-mRNA. After 16 hours, the cells were collected for flow cytometry. The spike

expression on cell surface were detected by staining cells with human ACE2–Fc chimera (Sino

Biological, 10108-H02HG) in MACS buffer (D-PBS with 2 mM EDTA and 0.5% BSA) for 20

min on ice. Cells were washed twice after the primary stain and incubated with PE–anti-human Fc

antibody (Biolegend, 410708) in MACS buffer for 20 min on ice. During secondary antibody

staining, live/Dead aqua fixable stain (Invitrogen) was used to assess cell viability. Data was

collected on BD FACSAria II Cell Sorter (BD) and analyzed using FlowJo software.

445   **Negative-stain TEM**

Formvar/carbon-coated copper grid (Electron Microscopy Sciences, catalog number FCF400-Cu-

50) was glow-discharged and covered with 6 µl of the sample for 1 min before blotting away the

sample. The sample was double-stained with 6 µl of 2% (w/v) uranyl formate (Electron

Microscopy Sciences, catalog number 22450) for 5 seconds (first stain) and 1 min (second stain),

blotting away after each stain. Images were collected using a JEOL JEM-1400 Plus microscope

with an acceleration voltage of 80 kV and a bottom-mount charge-coupled device camera (4k by

3k, Advanced Microscopy Technologies).

454   **Mouse vaccination**

Vaccine immunogenicity study used 6 weeks old female C57BL/6Ncr (B6) mice purchased from

Charles River. The mice-housing condition was maintained at regular ambient room temperature

(65-75°F, or 18-23°C), 40-60% humidity, and a 14 h:10 h day/night cycle. Each mice cage was

individually ventilated with clean food, water, and bedding. Two sets of immunization experiments

were performed: vaccination with Omicron LNP-mRNA, and sequential vaccination with WA-1

and Omicron LNP mRNA. For the Omicron LNP-mRNA vaccination experiment, five mice were

immunized with 10 µg Omicron LNP-mRNA on day 0 (prime) and day 14 (boost). Retro-orbital

blood was collected prior to vaccine injection on day 0, day 13 and day 21. For WA-1 and Omicron

LNP-mRNA sequential vaccination experiment, three mice were administered with either 100 µl

PBS or two-dose 1 µg WA-1 (21 days apart) and 10 µg Omicron LNP-mRNA (14 days apart).

Retro-orbital blood was collected prior to vaccine injection on day 35, day 127, day 140 and day

148.

Isolation of plasma and PBMCs from blood

At the defined time points, retro-orbital blood was collected from mice. The isolation of PBMCs

and plasma was achieved via centrifugation using SepMate-15 and Lymphoprep gradient medium

(StemCell Technologies). 200 µl blood was immediately diluted with 800 µl PBS with 2% FBS.

The blood diluent was then added to SepMate-15 tubes with 6ml Lymphoprep (StemCell

Technologies). Centrifugation at 1200 g for 20 minutes was used to isolate RBCs, PBMCs and

plasma. 250ul diluted plasma was collected from the surface layer. The remaining solution at the

top layer was poured to a new tube to isolate PBMCs, which were washed once with PBS + 2%

FBS. The separated plasma was used in ELISA and neutralization assay. And PBMCs were kept

frozen for future use.

ELISA

3 µg/ml of spike antigens were coated onto the 384-well ELISA plates (VWR, Cat # 82051-300)

overnight at 4 degree. The antigen panel used in the ELISA assay includes RBDs of 2019-nCoV

WA-1 (Sino Biological 40592-V08B), Delta variant B.1.617.2 (Sino Biological 40592-V08H90)

and Omicron variant B.1.1.529 (Sino Biological 40592-V08H121). Plates were washed with PBST

(PBS plus 0.5% Tween 20) three times in the 50TS microplate washer (Fisher Scientific,

NC0611021) and blocked with 0.5% BSA in PBST at room temperature for one hour. Plasma was

fourfold serially diluted starting at a 1:500 dilution. Diluted plasma samples were added to the

plates and incubated at room temperature for one hour, followed by washes with PBST five times.

Anti-mouse secondary antibody (Fisher, Cat# A-10677) at 1:2500 dilution in blocking buffer was

incubated at room temperature for one hour. Plates were washed five times and developed with

tetramethylbenzidine substrate (Biolegend, 421101). The reaction was stopped with 1 M

phosphoric acid after 20 min at room temperature, and OD at 450 nm was measured by multimode

microplate reader (PerkinElmer EnVision 2105). The binding response (OD450) was plotted

against the dilution factor in log10 scale as the dilution-dependent response curve. The area under

curve of the dilution-dependent response (Log10 AUC) was calculated to quantify the potency of

the plasma antibody binding to spike antigens. The fold change of antibody titer was estimated

using this equation: fold change = $10 \wedge (AUC1 - AUC2)$

Omicron, WA-1 and Delta pseudovirus production and characterization

For the neutralization assay, HIV-1 based SARS-CoV-2 WT, B.1.617.2 (Delta) variant, and

B.1.1.529 (Omicron) variant pseudotyped virions were packaged using a coronavirus spike

plasmid, a reporter vector and a HIV-1 structural protein expression plasmid. The reporter vector,

pCCNanoLuc2AEGFP, and plasmid expressing HIV-1 structural proteins (pHIVNLGagPol) were

gifts from Dr Bieniasz's lab. The spike plasmid for SARS-CoV-2 WA-1 pseudovirus truncated C-

terminal 19 amino acids (denoted as SARS-CoV-2-Δ19) and was from Dr Bieniasz' lab. Spike

plasmids expressing C-terminally truncated SARS-CoV-2 B.1.617.2 variant S protein (Delta

variant-Δ19) and SARS-CoV-2 B.1.1.529 variant S protein (Omicron variant-Δ19) were made

based on the pSARS-CoV-2-Δ19. All pseudoviruses were produced under the same conditions.

Briefly, 293FT cells were seeded in 150 mm plates, and transfected with 21 µg pHIVNLGagPol,

21 µg pCCNanoLuc2AEGFP, and 7.5 µg of corresponding plasmids, in the presence of 198 µl

PEI (1mg/ml, PEI MAX, Polyscience). At 48 h after transfection, the supernatant was filtered

through a 0.45-µm filter, and frozen in -80°C.

To characterize the tilter of WA-1, Delta, and Omicron pseudoviruses packaged, 0.01 x10^6 293T-

hACE2 cells were plated in each well of a 96-well plate. In the next day, different volumes of

pseudovirus supplemented with culture medium to a total volue of 100 µL were added into 96-

well plates with 293T-hACE2. Plates were incubated at 37°C for 24 hr. Then cells were washed

with MACS buffer once and the percent of GFP-positive cells were counted by Attune NxT

Acoustic Focusing Cytometer (Thermo Fisher). To normalize pseudovirus tilter, 0.01 x10^6 293T-

hACE2 cells were plated in each well of a 96-well plate. In the next day, 50 µL pseudovirus was

mixed with 50 µL culture medium to 100 µL. The mixture was incubated for 1 hr in the 37 °C

incubator, supplied with 5% CO2, and added into 96-well plates with 293T-hACE2. Plates were

incubated at 37°C for 24 hr. Then cells were washed with MACS buffer once and the percent of

GFP-positive cells were counted by Attune NxT Acoustic Focusing Cytometer (Thermo Fisher).

Delta pseudovirus and Omicron pseudovirus were diluted accordingly to match the functional tilter

of WA-1 pseudovirus for neutralization assay of plasma samples.

Pseudovirus neutralization assay

The SARS-CoV-2 pseudovirus assays were performed on 293T-hACE2 cells. One day before

infection, 0.01×10^6 293T-hACE2 cells were plated in each well of a 96-well plate. In the next day,

plasma collected from mice were serially diluted by 5 fold with complete growth medium at a

starting dilution of 1:100. 55 μL diluted plasma was mixed with the same volume of SARS-CoV-

2 WA-1, Delta variant, or Omicron variant pseudovirus and was incubated for 1 hr in the 37 °C

incubator, supplied with 5% CO2. 100 μL of mixtures were added into 96-well plates with 293T-

hACE2. Plates were incubated at 37°C for 24 hr. Then cells were washed with MACS buffer once

and the percent of GFP-positive cells were counted by Attune NxT Acoustic Focusing Cytometer

(Thermo Fisher). The 50% inhibitory concentration (IC50) was calculated with a four-parameter

logistic regression using GraphPad Prism (GraphPad Software Inc.). If the fitting value of IC50 is

negative (i.e. negative titer), which suggested undetectable neutralization activity, the value was

set to baseline (1, 0 in log scale).

Standard statistics

Standard statistical methods were applied to non-high-throughput experimental data. The

statistical methods are described in figure legends and/or supplementary Excel tables. The

statistical significance was labeled as follows: n.s., not significant; * $p < 0.05$; ** $p < 0.01$; *** p

< 0.001; **** $p < 0.0001$. Prism (GraphPad Software) and RStudio were used for these analyses.

Additional information can be found in the supplemental excel tables.

Schematic illustrations

Schematic illustrations were created with Affinity Designer or BioRender.

Replication, randomization, blinding and reagent validations

Biological or technical replicate samples were randomized where appropriate. In animal

experiments, mice were randomized by littermates.

Experiments were not blinded.

Commercial antibodies were validated by the vendors, and re-validated in house as appropriate.

Custom antibodies were validated by specific antibody - antigen interaction assays, such as ELISA.

Isotype controls were used for antibody validations.

Cell lines were authenticated by original vendors, and re-validated in lab as appropriate.

All cell lines tested negative for mycoplasma.

Data, resources and code availability

All data generated or analyzed during this study are included in this article and its supplementary

information files. Specifically, source data and statistics for non-high-throughput experiments are

provided in a supplementary table excel file. Additional information related to this study are

available from the corresponding author(s) upon reasonable request.

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Figure 1

Figure 2

A

B

C

D

ELISA and Pseudovirus assay correlation

Figure S1

Figure S2

Figure S3

Figure S4

Figure S5

Gating strategy