

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21

Bivalent mRNA vaccine booster induces robust antibody immunity against Omicron subvariants BA.2, BA.2.12.1 and BA.5

Zhenhao Fang¹⁻³ and Sidi Chen^{1-9, @}

Affiliations

1. Department of Genetics, Yale University School of Medicine, New Haven, CT, USA
2. System Biology Institute, Yale University, West Haven, CT, USA
3. Center for Cancer Systems Biology, Yale University, West Haven, CT, USA
4. Immunobiology Program, Yale University, New Haven, CT, USA
5. Molecular Cell Biology, Genetics, and Development Program, Yale University, New Haven, CT, USA
6. MD-PhD Program, Yale University, New Haven, CT, USA
7. Comprehensive Cancer Center, Yale University School of Medicine, New Haven, CT, USA
8. Stem Cell Center, Yale University School of Medicine, New Haven, CT, USA
9. Center for Biomedical Data Science, Yale University School of Medicine, New Haven, CT, USA

@ Correspondence:

SC (sidi.chen@yale.edu)

+1-203-737-3825 (office)

+1-203-737-4952 (lab)

22 **Abstract**

23 As the immune protection conferred by first booster shot wanes over time and new Omicron subvariant
24 emerges with stronger immune evasion, the need for variant-adapted COVID vaccine booster is
25 increasingly imminent. However, the rapid replacement of dominant Omicron subvariants (from BA.1 to
26 BA.2, then BA.2.12.1 and now BA.4/5) poses a great challenge to update COVID vaccine targeting the fast-
27 evolving variants while maintaining potency against existing variants. It is a crucial question to ask which
28 variant-based antigen(s) to use in the next generation COVID vaccine to elicit potent and broad response
29 to past, present, and potential rising variants. Bivalent vaccine candidates have been under active clinical
30 testing such as Modern mRNA-1273.214. In this study, we generate a Delta + BA.2 bivalent mRNA vaccine
31 candidate and tested in animals. We compare the antibody response elicited by ancestral (wild type, WT),
32 Delta, BA.2 spike based monovalent or Delta & BA.2 bivalent mRNA boosters against Omicron BA.2,
33 BA.2.12.1 and BA.4/5 subvariants. In mice pre-immunized with two doses of WT lipid nanoparticle mRNA
34 (LNP-mRNA), all three monovalent and one bivalent boosters elevated Omicron neutralizing antibody
35 titers to various degree. The boosting effect of Delta and BA.2 specific monovalent or bivalent LNP-mRNAs
36 is universally higher than that of WT LNP-mRNA, which modestly increased antibody titer in neutralization
37 assays of Omicron BA.5, BA.2.12.1 and BA.2. The Delta & BA.2 bivalent LNP-mRNA showed better
38 performance of titer boosting than either monovalent counterparts, which is especially evident in
39 neutralization of Omicron BA.4 or BA.5. Interestingly compared to the neutralizing titers of BA.2 and
40 BA.2.12.1 pseudovirus, BA.2 monovalent but not Delta & BA.2 bivalent booster suffered a significant loss
41 of BA.4/5 neutralizing titer, indicative of broader activity of bivalent booster and strong neutralization
42 evasion of Omicron BA.4 or BA.5 even in the BA.2 mRNA vaccinated individuals. These data provide
43 evaluation of WT, Delta, BA.2 monovalent and bivalent boosters antibody potency against Omicron BA.2,
44 BA.2.12.1 and BA.4/5 subvariants.

45

46 **Key words:** COVID, variant adapted booster, bivalent mRNA vaccine, Omicron BA.5, BA.2, BA.2.12.1, Delta
47 variant, lipid nanoparticle

48

49 As the immune protection conferred by first booster shot wanes over time and new Omicron subvariant
50 emerges with stronger immune evasion, the need for variant-adapted coronavirus disease (COVID)
51 vaccine booster is increasingly imminent. On June 28, vaccine advisory committee of food and drug
52 administration (FDA) voted in favor of updating COVID booster shot to add an Omicron component¹.
53 However, the rapid displacement of dominant Omicron subvariants (from BA.1 to BA.2, then BA.2.12.1
54 and now BA.4 and BA.5) poses a great challenge to update COVID vaccine targeting the fast-evolving
55 variants while maintaining potency against circulating variants². Each former dominant Omicron strain,
56 including BA.1, BA.2 and BA.2.12.1, drastically surges and subsides in a window of 3 months or even
57 shorter³. Omicron BA.4 and BA.5 subvariants emerge in April in Southern Africa and become dominant
58 around the world since June this year³. These Omicron sublineages quickly replace its predecessors in
59 circumstances of existing herd immunity from vaccination or infection of past variants. Reinfection or
60 breakthrough infection caused by new dominant variant is not uncommon due to its strong immune
61 evasion^{4,5}, which complicates the redesign of new COVID boosters given the short time window of each
62 Omicron wave and the lead time between design, validation and deployment of new boosters.

63
64 It is a crucial question to ask that which variant based antigen(s) to use in the next generation COVID
65 boosters in order to elicit potent and broad response to past, present and emerging variants. At the time
66 we initiated this study, the then-dominant subvariant BA.2 was gradually replaced by BA.2.12.1, BA.4 and
67 BA.5. Compared to BA.2 spike, BA.2.12.1 contains two additional mutations (L452Q and S704L) while BA.4
68 and BA.5 spikes are identical and have 4 constant alterations (Del69-70, L452R, F486V, R493Q) plus one
69 mutation (N658S) seen in earlier sequences (**Fig. 1a-1b**). The L452 substitutions in BA.2.12.1 and BA.4/5
70 are associated with neutralizing antibody escape⁶ and BA.4/5 combines the L452R mutation initially
71 identified in Delta variant, highlighting one possible evolution trajectory of emerging variant by combining
72 predecessors' beneficial mutations.

73
74 Bivalent vaccine candidates have gained recent tractions due to the concept of direct targeting of two
75 variants, which may also induce broader immunity against other variants. Bivalent vaccine candidates
76 have been under active clinical testing such as Moderna's mRNA-1273.214, which is a equal mixture of two
77 spike-encoding mRNAs with 25 µg targeting ancestral SARS-CoV-2 and 25 µg targeting the original
78 Omicron Variant (B.1.1.529) (Moderna news releases June 08 2022, June 22 2022, and FDA committee
79 meeting June 28 2022), demonstrating the importance and the clinically relevance of the concept of
80 bivalent vaccination using two mRNAs. In light of this merge of variants' mutations (**Fig. 1a-1b**), we want

81 to ask if mRNA vaccine candidates based on antigens of circulating variant (BA.2) and/or former dominant
82 variant (Delta) can mediate broad antibody response to emerging variants such as BA.2.12.1, BA.4 or BA.5.
83 It is worth to explore in this direction for a few reasons. The lead time of combining boosters adapted to
84 dominant and former dominant variants will be shorter than predicting and developing boosters targeting
85 new variants. In addition, because of the rapid displacement of circulating variants, the mismatch
86 between the strain used for updated boosters and emerging strain may always exists. How to elicit broad
87 response to emerging variants using existing variant antigens is an inevitable question to answer when
88 redesigning updated COVID boosters.

89
90 To answer this question, we compared the antibody response elicited by ancestral (wild type, WT), Delta,
91 BA.2 spike based monovalent or Delta & BA.2 bivalent mRNA boosters against Omicron BA.2, BA.2.12.1
92 and BA.4/5 subvariants. In mice pre-immunized with two doses of WT lipid nanoparticle mRNA (LNP-
93 mRNA), all three monovalent and one bivalent boosters elevated Omicron binding and neutralizing
94 antibody titers to various degree in ELISA and pseudovirus neutralization assay (**Fig. 1c-1d and Figs. S1-
95 S3**), exemplifying the benefit of receiving WT or variant-adapted booster shots against circulating and
96 emerging variants. Booster-associated titer ratios quantify booster's effect on antibody titers and were
97 shown in each bar graph as post-booster titer on day 42 over pre-booster titer on day 28. Its dynamic
98 range was greater in neutralization assay (ratio ranges from 3-23) than in ELISA (ratio ranges from 2-11).
99

100 Before administered with different boosters, 24 mice in four groups received same treatment and
101 showed little or no significant difference in antibody titers measured on day 0 and day 28 (**Figs. S4-S6 and
102 S7a**). A moderate increase in Omicron neutralizing antibody titers was observed from immunization of
103 two doses of WT LNP-mRNA (**Fig. S7b**). This titer increase by WT LNP-mRNA was lowest in neutralization
104 assay of BA.4/5 (~40% increase) as compared to BA.2.12.1 and BA.2. On day 42 two weeks post booster,
105 the binding and neutralizing titers of WT booster group were frequently found lower than those of variant
106 booster groups (**Fig. S4 and S7a**), consistent with the fact that BA.4/5 have stronger evasion of existing
107 antibody therapeutics or vaccine induced immunity. Interestingly, compared to the neutralizing titers of
108 BA.2 and BA.2.12.1, BA.2 monovalent but not Delta & BA.2 bivalent booster suffered a significant loss of
109 BA.4/5 neutralizing titer (**Fig. S7c**), indicative of broader activity of bivalent booster and strong
110 neutralization escape of Omicron BA.4 or BA.5 even in the BA.2 mRNA vaccinated individuals. The RBD
111 and ECD binding antibody titers were well correlated and showed distinct linear regression models
112 between day 28 and day 42 as well as in WT, Delta (right panel in **Fig. S5**) and Omicron antigen datasets

113 (left panel). The upper right shift of day 42 linear segment suggested a titer increase by boosters while
114 the lower left shift in Omicron antigen dataset was associated with antibody evasion of Omicron antigens.
115

116 The boosting effect of Delta and BA.2 specific monovalent or bivalent LNP-mRNAs is universally higher
117 than that of WT LNP-mRNA, which only modestly increased antibody titer (~1 fold, fold change = ratio - 1)
118 in neutralization assays of Omicron BA.5, BA.2.12.1 and BA.2 (**Fig. 1d**). The Delta & BA.2 bivalent booster
119 showed superior performance of enhancing binding and neutralizing titers than either monovalent
120 counterparts, which is especially apparent in neutralization of Omicron BA.4 or BA.5. The bivalent booster
121 associated titer ratios were 23, 16 and 7 fold for neutralization of BA.2, BA.2.12.1 and BA.4/5, respectively
122 while Delta/BA.2 monovalent booster ratios were 10/12, 7/8, 4/3 respectively. The linear regression
123 models of neutralizing and binding titers showed a trend of correlation but the goodness of fit was low
124 due to deviations intrinsic in the two assays as well as heterogeneity stemmed from distinct boosters and
125 Omicron subvariants tested (**Fig. S8**).

126

127 To sum up, our data delivered a few clear messages regarding the potency of boosters against Omicron
128 subvariants: 1) either WT or variant, monovalent or bivalent boosters can improve antibody response to
129 Omicron BA.2, BA.2.12.1 and BA.4/5, demonstrating the benefit and necessity of receiving booster shots;
130 2) the variant boosters with closer antigenic distance to circulating variant perform universally better than
131 WT booster; 3) compared to monovalent booster, bivalent booster combining two genetically distant
132 variants, Delta & BA.2 showed broader and numerically stronger antibody response to Omicron BA.2,
133 BA.2.12.1 and BA.4/5 subvariants. Taken together, our study presents a direct evaluation of Delta and
134 BA.2 variant-adapted monovalent and bivalent mRNA boosters and compares their antibody response to
135 Omicron subvariants with WT booster in the context of mouse model pre-immunized with two-dose WT
136 LNP-mRNA vaccination. These data provide pre-clinical evidence and rationale for developing bivalent or
137 multi-valent variant targeted COVID boosters.

138

139 **Acknowledgement**

140 This work is supported by DoD PRMRP IIAR (W81XWH-21-1-0019) and discretionary funds to S.C. We
141 thank members from our labs for support. We thank support from Institutes of Systems Biology and
142 Cancer Biology; Yale core facilities, Department of Genetics; Dean's Office of Yale School of Medicine and
143 the Office of Vice Provost for Research.

144

145

146 **Figure legends**

147 **Figure 1. Potent antibody response to Omicron BA.2, BA.2.12.1 and BA.5 subvariants by Omicron BA.2**
148 **and Delta bivalent LNP-mRNA**

149 **a**, Vaccine design of Omicron BA.2 and Delta variant specific LNP-mRNA based on BA.2 and Delta spike
150 mutations. Unique spike mutations on BA.2.12.1 and BA.5 (not included in LNP-mRNA) are colored in
151 orange and magenta.

152 **b**, Distribution of BA.2 (Yellow), BA.2.12.1(Cyan) and BA.5 (Red) mutations in one protomer of Omicron
153 spike trimer (PDB: 7T9K).

154 **c**, Delta and BA.2 specific monovalent or bivalent LNP-mRNA boosters improved antibody response of WT-
155 vaccinated mice to Omicron BA.2, BA.2.12.1 and BA.4/5 subvariants. Comparison of binding antibody
156 titers against BA.2, BA.2.12.1 and BA.4/5 spike RBD and ECD before (D28) and after (D42) receiving 1.5 µg
157 WT, Delta, BA.2 specific monovalent or bivalent (1.5 µg Delta + 1.5 µg BA.2) LNP-mRNA boosters. Antibody
158 titers were quantified by area under curves (AUC) of ELISA response curves in Figure S1 and S2. Blood
159 samples were collected in mice immunized with two doses of 1.5 µg WT LNP-mRNA followed by 1.5 µg
160 WT, Delta, BA.2 specific monovalent or Delta & BA.2 bivalent boosters (n = 6 in each group).

161 **d**, Neutralization of Omicron BA.2, BA.2.12.1 and BA.5 pseudovirus by plasma of mice before (D28) and
162 after (D42) vaccinated with WT, Delta, BA.2 specific monovalent or Delta & BA.2 bivalent boosters. Six
163 samples collected on day 0 were included and compared to both D28 and D42 datasets.

164 Titer ratios before and after receiving boosters (D42/D28 ratios) were shown in c-d. Individual dot in dot-
165 bar plots represent value from each mouse and are shown as mean ± s.e.m.. To assess statistical
166 significance, two-way ANOVA with Tukey's or Šídák's multiple comparisons test was used. Statistical
167 significance labels: * p < 0.05; ** p < 0.01; *** p < 0.001; **** p < 0.0001. Non significant comparisons
168 are not shown.

169

170

171 **Supplementary figure legends**

172 **Figure S1. Plasma dilution-dependent ELISA response curves against WT, Delta, BA.2, BA.2.12.1 and**
173 **BA4/5 spike ECDs.** Plasma samples were collected at day 42 (a), day 28 (b) and day 0 (c) from mice
174 immunized with WT Delta, BA.2 specific monovalent or bivalent LNP-mRNA boosters

175

176 **Figure S2. Plasma dilution-dependent ELISA response curves against WT, Delta, BA.2, BA.2.12.1 and**
177 **BA4/5 spike RBDs.** Plasma samples were collected at day 42 (a) and day 28 (b) from mice immunized with
178 WT Delta, BA.2 specific monovalent or bivalent LNP-mRNA boosters.

179

180 **Figure S3. Comparison of binding antibody titers against WT (left), Delta (Mid) and BA.2 (Right) spike**
181 **RBD and ECD before (D0 and D28) and after (D42) receiving 1.5 µg WT, Delta, BA.2 specific monovalent**
182 **or bivalent (1.5 µg Delta + 1.5 µg BA.2) LNP-mRNA boosters (n = 6).** Antibody titers were quantified by
183 area under curves (AUC) of ELISA response curves in Figure S1 and S2. The comparison with day 0 samples
184 and insignificant comparison were not shown.

185

186 **Figure S4. Comparison of ELISA antibody titers of plasma samples collected on day 0, day 28 and day 42.**

187 **a-b,** ELISA antibody titers against WT, Delta, BA.2, BA.2.12.1 and BA.4/5 spike RBDs before (D28, b) and
188 after (D42, a) receiving 1.5 µg WT, Delta, BA.2 specific monovalent or bivalent (1.5 µg Delta + 1.5 µg BA.2)
189 LNP-mRNA boosters.

190 **c-e,** ELISA antibody titers against WT, Delta, BA.2, BA.2.12.1 and BA.4/5 spike ECDs by plasma samples
191 collected on (D42, c; D28, d; D0, e).

192 Antibody titers were quantified by area under curves (AUC) of ELISA response curves in Figure S1 and S2.

193

194 **Figure S5. Correlation of antibody titers against RBD and ECD of five spike antigens in ELISA.** Antibody
195 titers against ECD of Omicron BA.2, BA.2.12.1, BA.4/5 subvariants (left) or WT, Delta (right) were shown
196 on y axis as \log_{10} AUC and plotted against corresponding RBD binding antibody titers on x axis (\log_{10} AUC).
197 Titers were either shown as mean of matched vaccination group (a) or derived from individual animal (b).

198

199 **Figure S6. Neutralization titration curves of serially diluted plasma collected at indicated time points**
200 **from mice vaccinated with WT, Delta, BA.2 monovalent or bivalent LNP-mRNA boosters.**

201 **a**, Neutralization curves of BA.5, BA.2.12.1 and BA.2 pseudovirus by samples collected on day 42 from
202 mice immunized with 1.5 µg WT, Delta, BA.2 monovalent or bivalent LNP-mRNA boosters.

203 **b**, Neutralization curves of BA.5, BA.2.12.1 and BA.2 pseudovirus by samples collected on day 28 from
204 mice immunized with two doses of 1.5 µg WT LNP-mRNA.

205 **c**, Neutralization curves of BA.5, BA.2.12.1 and BA.2 pseudovirus by samples collected on day 0 from
206 vaccination naïve mice.

207 The log₁₀ relative light unit (RLU) measured by NanoLuc luciferase assay were shown as mean ± s.e.m. and
208 plotted against serial log₁₀-transformed sample dilution points.

209

210 **Figure S7. Statistical comparison of neutralizing titers of plasma samples from different vaccination**
211 **groups at same time point (a) or against different Omicron subvariant pseudoviruses at matched time**
212 **points (b).**

213 **a**, Omicron BA.2 (right), BA.2.12.1 (mid) and BA.5 (left) pseudovirus neutralization by plasma of mice
214 before (D28) and after (D42) vaccinated with WT, Delta, BA.2 specific monovalent or Delta & BA.2 bivalent
215 boosters. Six samples collected on day 0 were included and compared to both D28 and D42 datasets.

216 **b**, BA.4/5, BA.2.12.1 and BA.2 neutralizing antibody titers from samples collected on day 0 and day 28 (WT
217 x 2) were compared.

218 **c**, BA.4/5, BA.2.12.1 and BA.2 neutralizing antibody titers were compared within same vaccination groups
219 at matched time points including day 28 (pre booster) and day 42 (post booster).

220

221 **Figure S8. Correlation of antibody titers measured by pseudovirus neutralization and ELISA.** Antibody
222 titers determined by pseudovirus neutralization assay were shown on x axis as log₁₀ IC50 and plotted
223 against ELISA binding antibody titers (log₁₀ AUC) measured by RBD (left) or ECD (right) spike antigens on
224 y axis. Titer values were either derived from mean of matched vaccination group (b) or individual animals
225 (a).

226

227 **Methods**

228 **Institutional approval**

229 All animal work was performed under the guidelines of Yale University Institutional Animal Care and Use
230 Committee (IACUC) with approved protocols (Chen 2020-20358; Chen 2021-20068; Wilen 2021-20198).
231 All recombinant DNA (rDNA) and biosafety work were performed under the guidelines of Yale
232 Environment, Health and Safety (EHS) Committee with approved protocols (Chen 18–45, 20–18, and 20–
233 26).

234

235 **Molecular cloning and mRNA preparation**

236 The WT and Delta spike plasmids were cloned in our previous study^{7, 8}. BA.2 spike plasmid was cloned
237 based on the isolate sequencing data in GISAID EpiCoV (EPI_ISL_6795834.2)⁹. WT, Delta and BA.2 spike
238 plasmids were linearized by restriction enzymes and transcribed to mRNA by in vitro T7 RNA polymerase
239 (NEB, Cat # E2060S) as previously described¹⁰.

240

241 **Cell culture**

242 hACE2-293FT and 293T cells were cultured in Dulbecco's minimal essential medium (DMEM, Fisher)
243 supplemented with 10% fetal bovine serum (Hyclone) and penicillin (100 U/ml)-streptomycin (100 ug/ml).
244 Cells were split ever other day at a 1:4 ratio when confluency is over 90%.

245

246 **Lipid nanoparticle mRNA preparation**

247 In brief, lipids mixture was solubilized in ethanol and mixed with spike mRNA in pH 5.2 sodium acetate
248 buffer. The mRNA encapsulated by LNP (LNP-mRNA) was then buffer exchanged to PBS using 100kDa
249 Amicon filter (Macrosep Centrifugal Devices 100K, 89131-992). The size distribution of LNP-mRNA was
250 evaluated by dynamic light scatter (DynaPro NanoStar, Wyatt, WDPN-06). The Quant-iT™ RiboGreen™
251 (Thermo Fisher) RNA Assay was applied to determine encapsulation rate and mRNA amount.

252

253 **Animal vaccination**

254 Animal immunization was performed on 16-18 weeks female C57BL/6Ncr mice purchased from Charles
255 River. Mice were vaccinated with two doses of 1.5 µg WT LNP-mRNA on day 0 and day 14 followed by 1.5
256 µg WT, Delta, Omicron BA.2 monovalent booster or Delta & BA.2 bivalent booster on day 29. The plasma
257 samples were isolated from blood which was collected before vaccination on day 0, two weeks after WT
258 boost on day 28 and two weeks after monovalent or bivalent boosters on day 42.

259

260 **ELISA and Neutralization assay**

261 The binding and neutralizing antibody titers were determined by ELISA and pseudovirus neutralization
262 assay as previously described¹⁰. NanoGlo luciferase assay system (Promega N1120) was applied to
263 determine the pseudovirus infection level in hACE2-293FT cells. The ELISA antigens including RBDs of WT
264 (Sino 40592-V08B), Delta(Sino 40592-V08H90), Omicron BA.2(Acro SPD-C522g-100ug), BA.2.12.1(Acro
265 SPD-C522q-100ug) and BA.4/5(Acro SPD-C522r-100ug) were purchased from Sino Biological and
266 AcroBiosystems. The ELISA ECD antigens including WT (Sino 40589-V08B1), Delta (Sino 40589-V08B16),
267 Omicron BA.2 (Acro SPN-C5223-50ug), BA.2.12.1 (Acro SPN-C522d-50ug) and BA.4/5 (SPN-C5229-50ug)
268 were purchased from Sino Biological and AcroBiosystems. The pseudovirus plasmids of spike without
269 HexaPro mutations were generated based on the WT plasmid which was a gift from Dr. Bieniasz's lab.

270

271 **Data availability**

272 All source data and statistical analysis are provided in this article and its supplementary excel file.

273

274 **Code availability**

275 No custom code was used in this study.

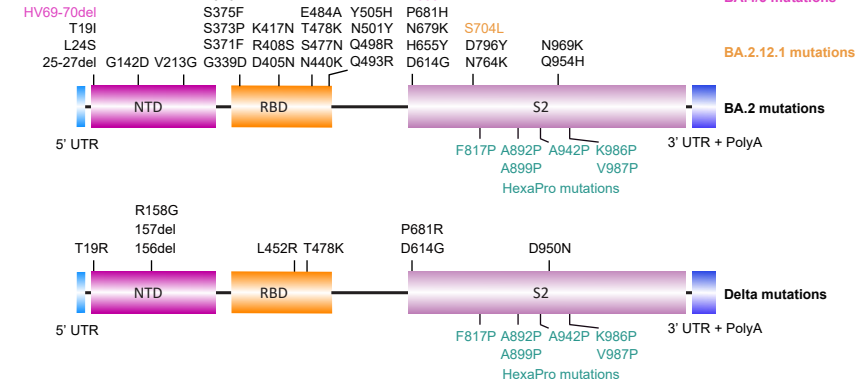
276 **References**

- 277
- 278 1 FDA. Update: COVID-19 Vaccine Booster Composition. Available from: [https://www.fda.gov/vaccines-](https://www.fda.gov/vaccines-blood-biologics/update-covid-19-vaccine-booster-composition)
- 279 [blood-biologics/update-covid-19-vaccine-booster-composition](https://www.fda.gov/vaccines-blood-biologics/update-covid-19-vaccine-booster-composition).
- 280 2 Callaway E. Fast-evolving COVID variants complicate vaccine updates. *Nature* 2022; **607**:18-19.
- 281 3 Khare S, Gurry C, Freitas L *et al*. GISAID's Role in Pandemic Response. *China CDC Wkly* 2021; **3**:1049-
- 282 1051.
- 283 4 Tuekprakhon A, Nutalai R, Djokaite-Guraliuc A *et al*. Antibody escape of SARS-CoV-2 Omicron BA.4 and
- 284 BA.5 from vaccine and BA.1 serum. *Cell* 2022; **185**:2422-2433 e2413.
- 285 5 Cao Y, Yisimayi A, Jian F *et al*. BA.2.12.1, BA.4 and BA.5 escape antibodies elicited by Omicron infection.
- 286 *Nature* 2022.
- 287 6 Wang Q, Guo Y, Iketani S *et al*. Antibody evasion by SARS-CoV-2 Omicron subvariants BA.2.12.1, BA.4, &
- 288 BA.5. *Nature* 2022.
- 289 7 Peng L, Renauer PA, Okten A *et al*. Variant-specific vaccination induces systems immune responses and
- 290 potent in vivo protection against SARS-CoV-2. *Cell Rep Med* 2022; **3**:100634.
- 291 8 Peng L, *et al*. Simultaneous and sequential multi-species coronavirus vaccination. *bioRxiv* 2022.
- 292 9 Fang Z. Heterotypic vaccination responses against SARS-CoV-2 Omicron BA.2. *bioRxiv* 2022.
- 293 10 Fang Z, Peng L, Filler R *et al*. Omicron-specific mRNA vaccination alone and as a heterologous booster
- 294 against SARS-CoV-2. *Nat Commun* 2022; **13**:3250.
- 295

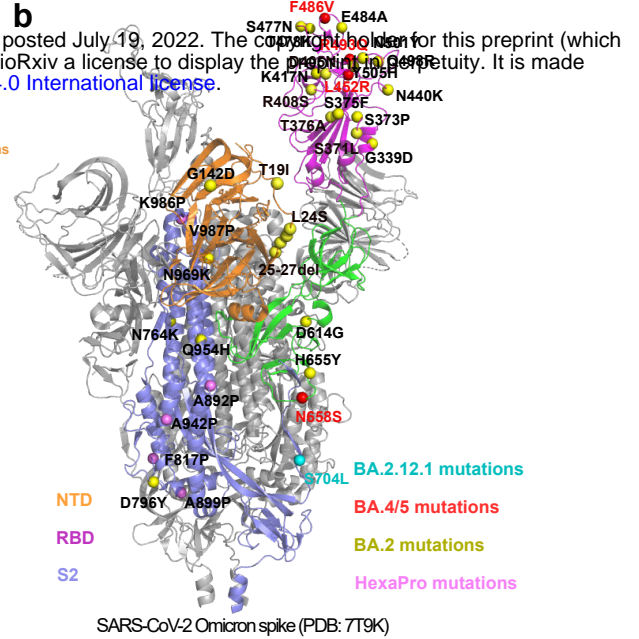
Figure 1

a

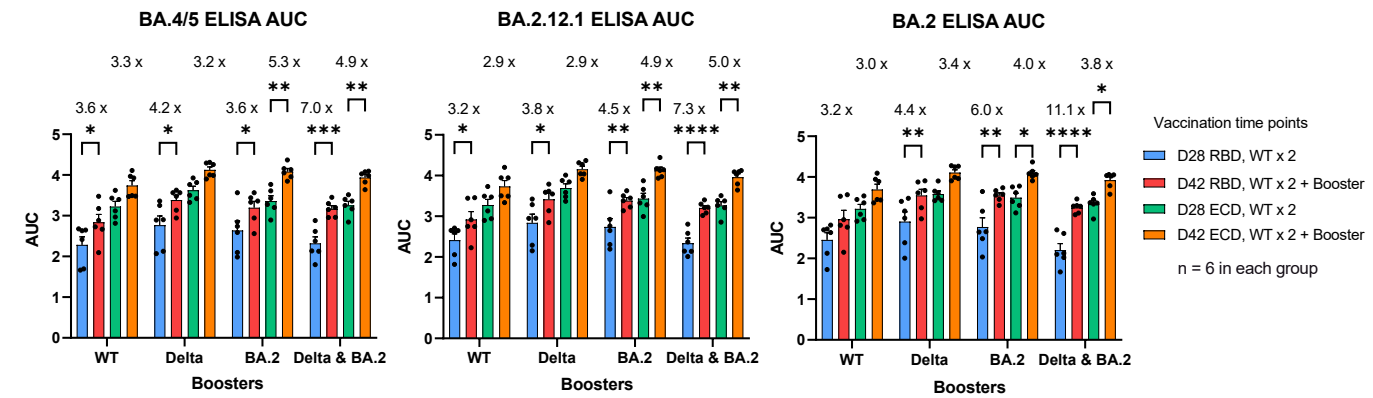
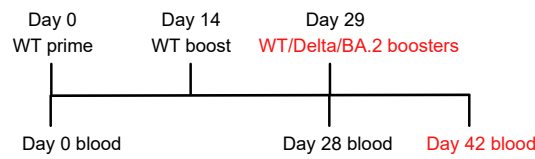
bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500616>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY-NC-ND 4.0 International license.



b



c



d

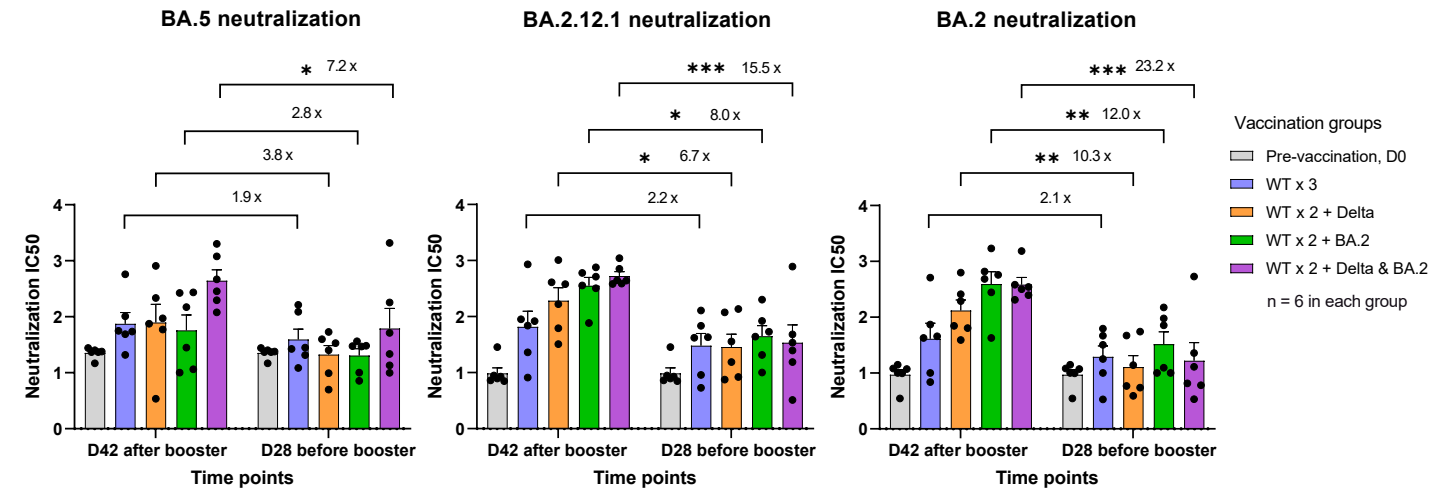
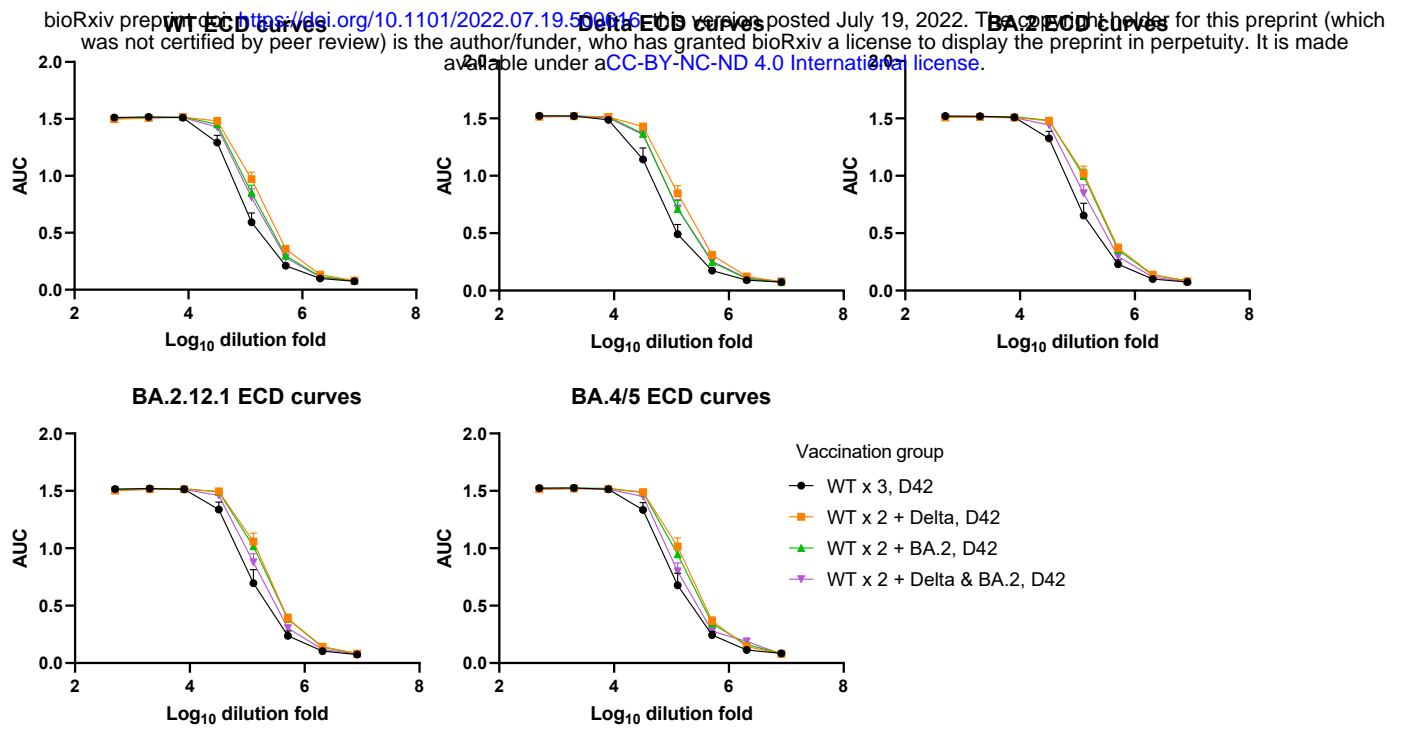
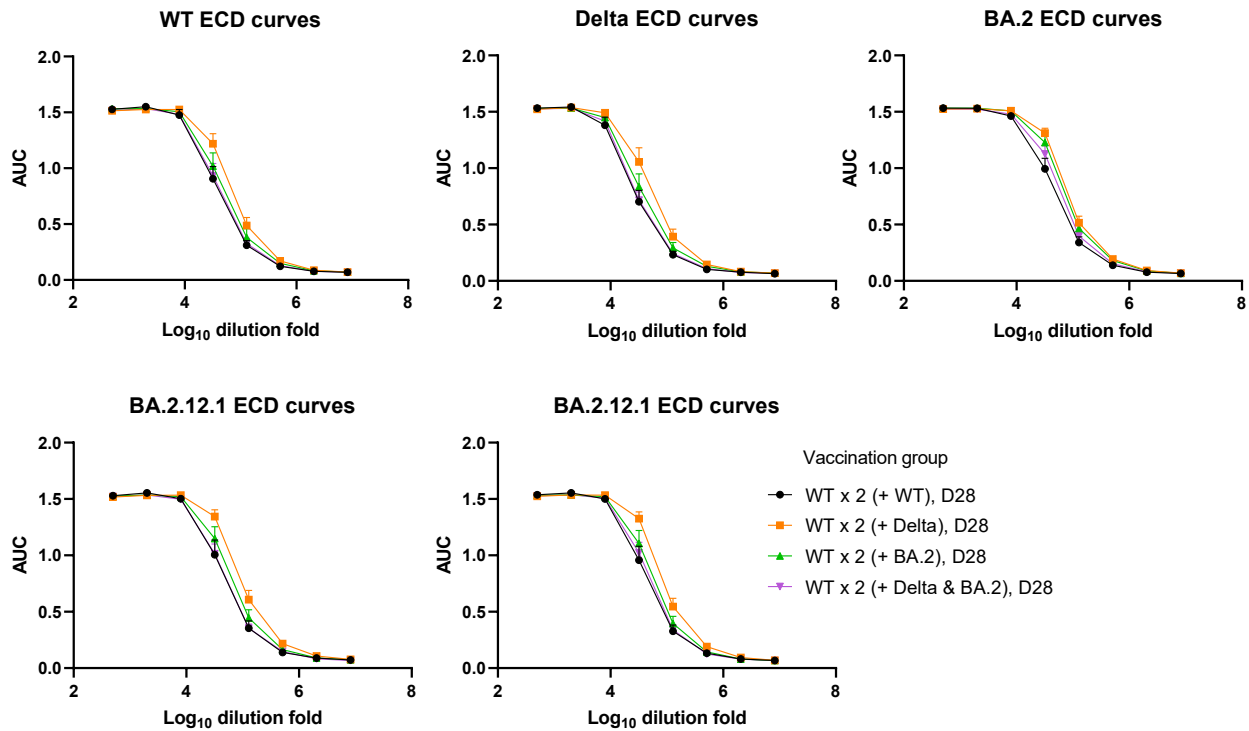


Figure S1

a



b



c

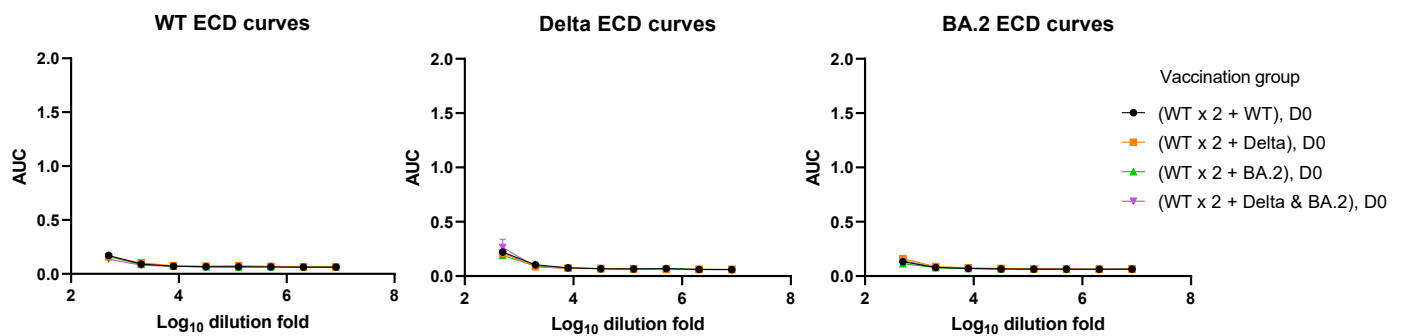
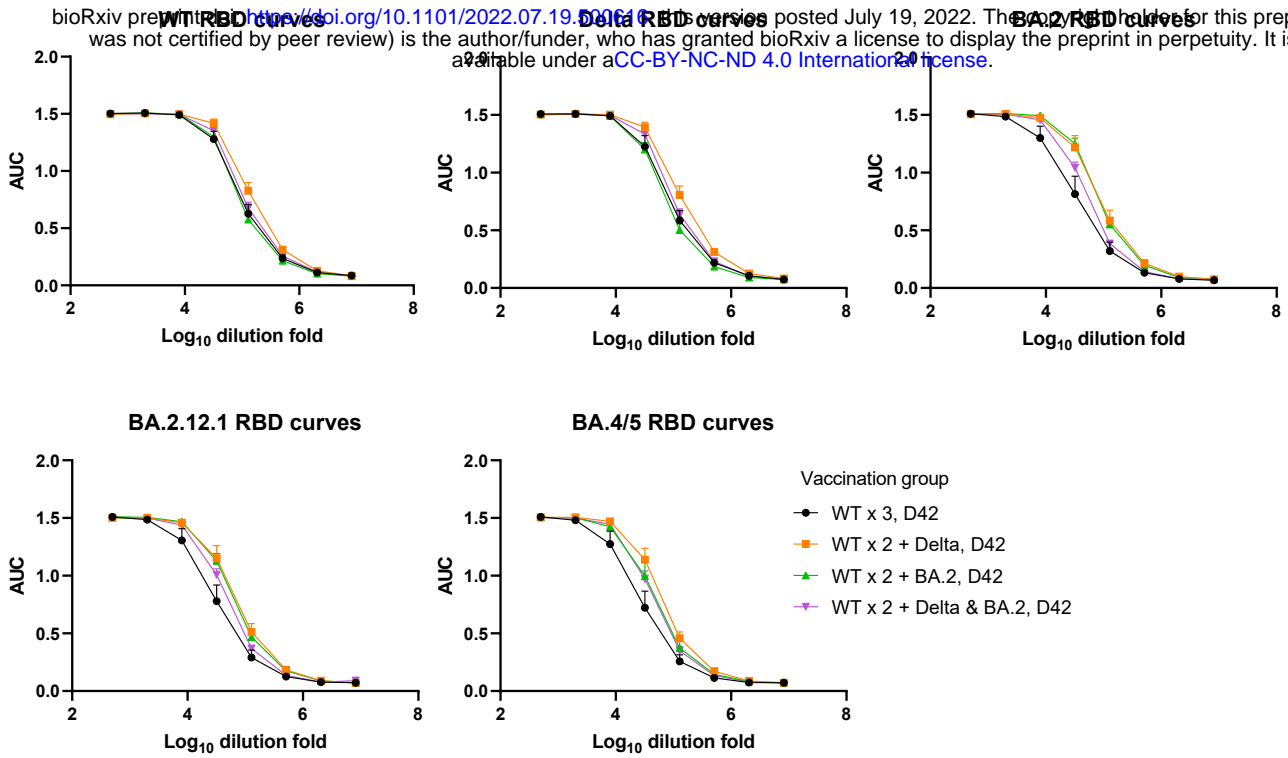


Figure S2

a

bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500149>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY-NC-ND 4.0 International license.



b

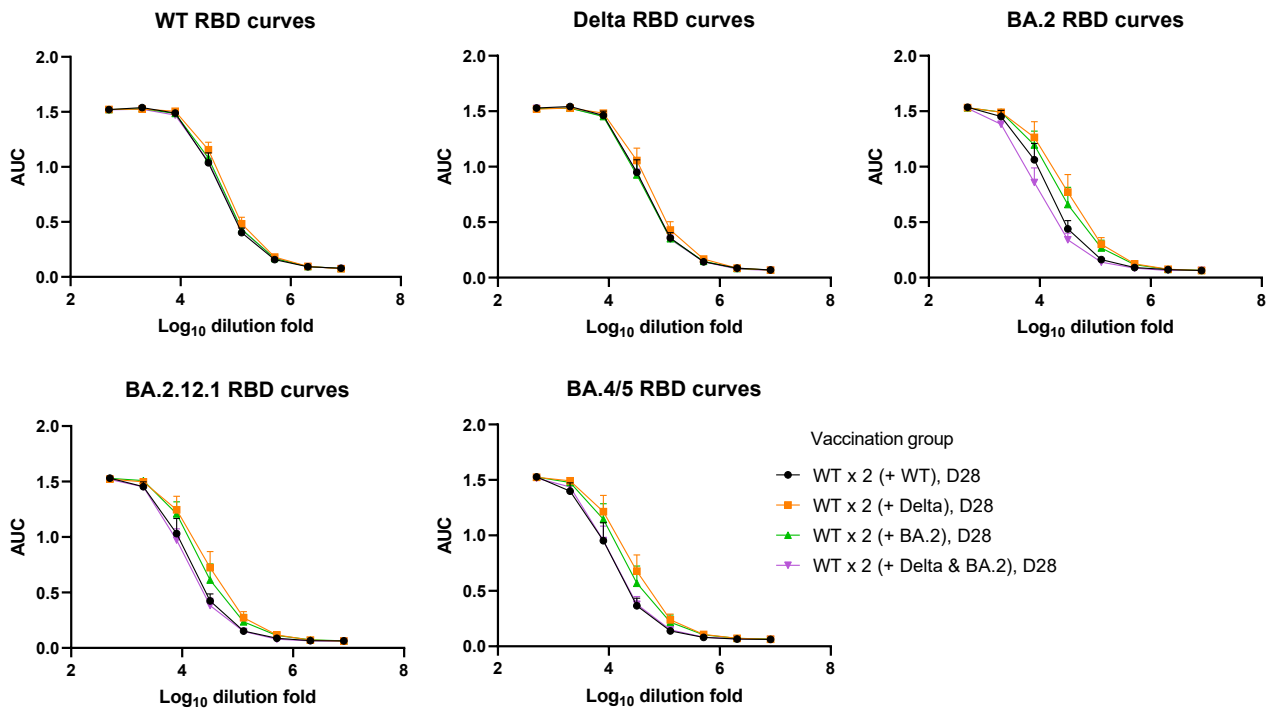


Figure S3

bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500616>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY-NC-ND 4.0 International license.

a

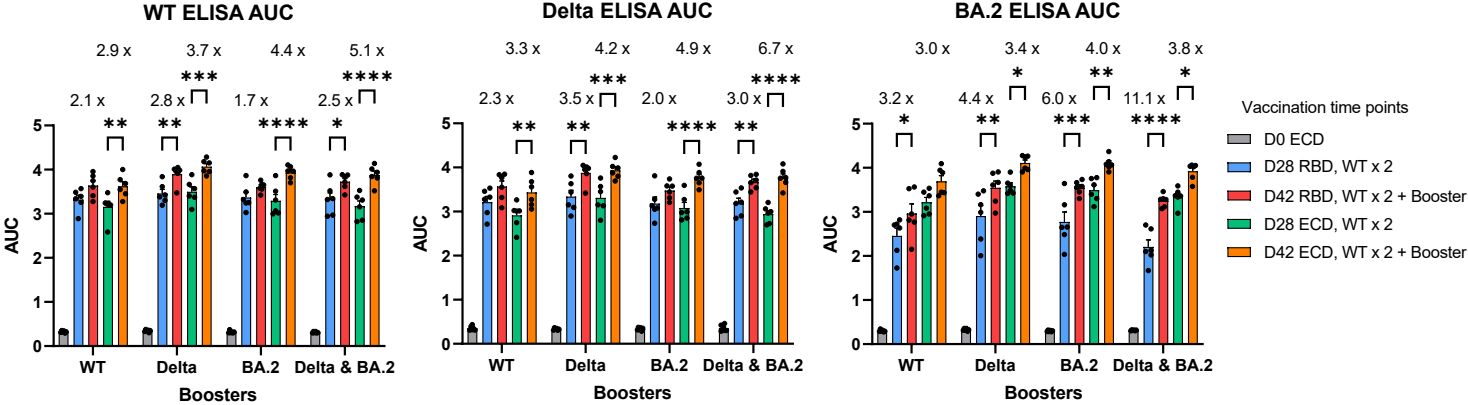
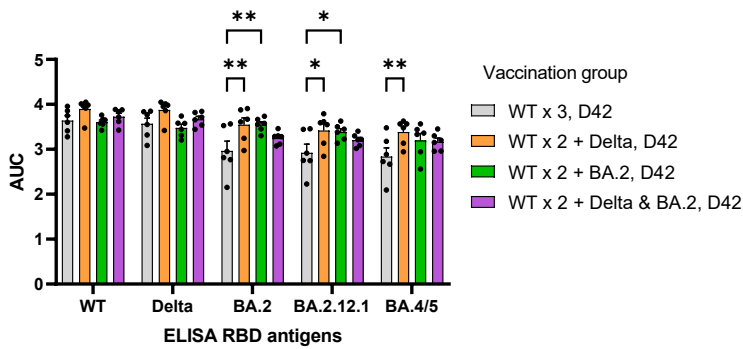


Figure S4

a

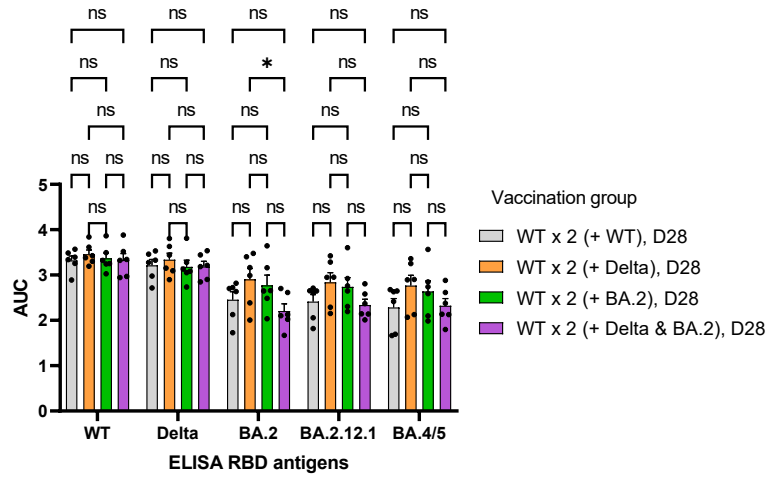
bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500616>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under a [CC-BY-NC-ND 4.0 International license](#).

Day 42 RBD AUC



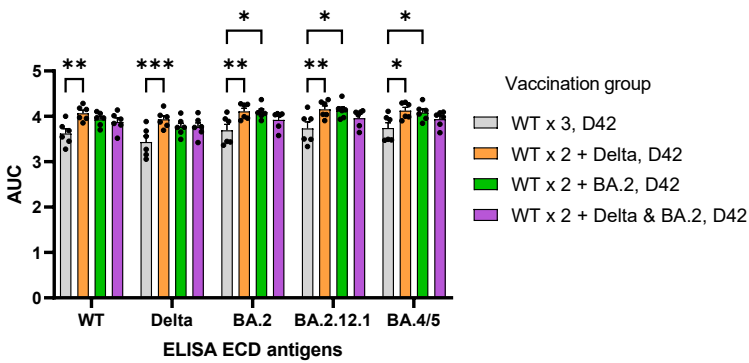
b

Day 28 RBD AUC



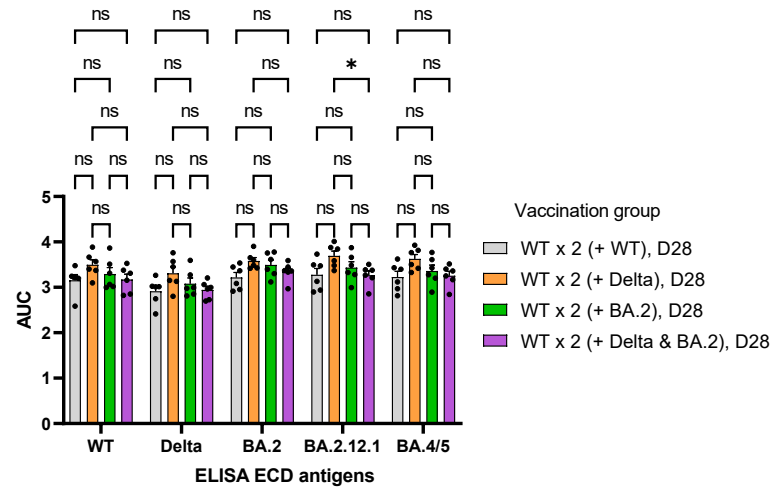
c

Day 42 ECD AUC



d

Day 28 ECD AUC



e

Day 0 ECD AUC

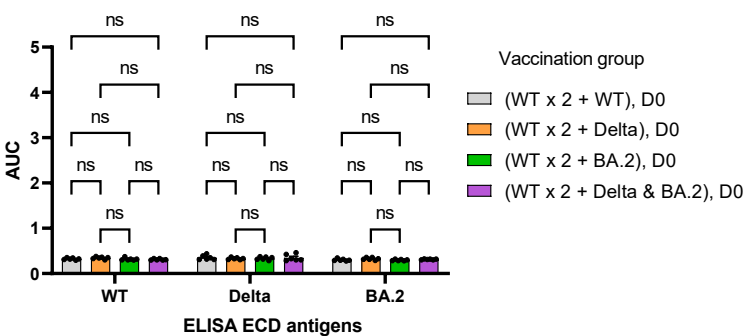
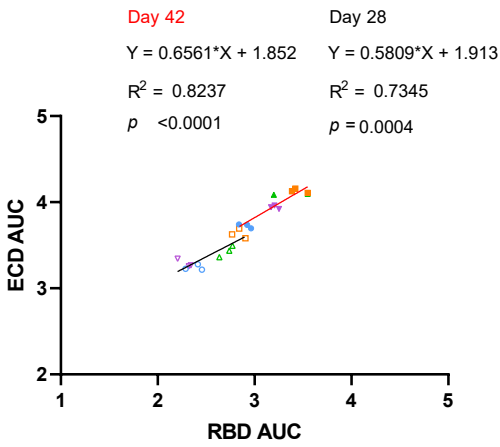


Figure S5

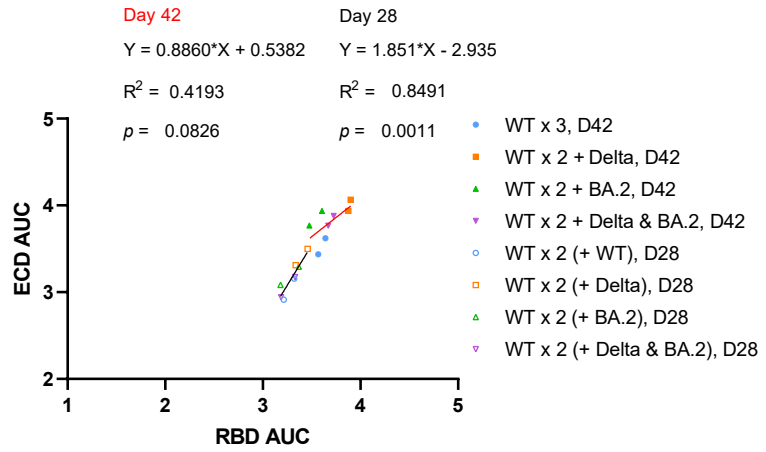
a

bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500616>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY-NC-ND 4.0 International license.

RBD ECD correlations of BA.2, BA.2.12.1, BA.4/5

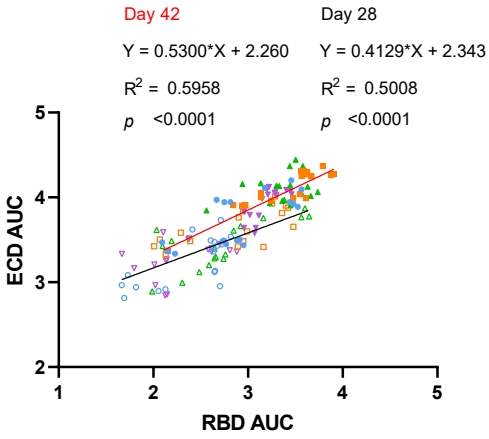


RBD ECD correlations of WT and Delta



b

RBD ECD correlations of BA.2, BA.2.12.1, BA.4/5



RBD ECD correlations of WT and Delta

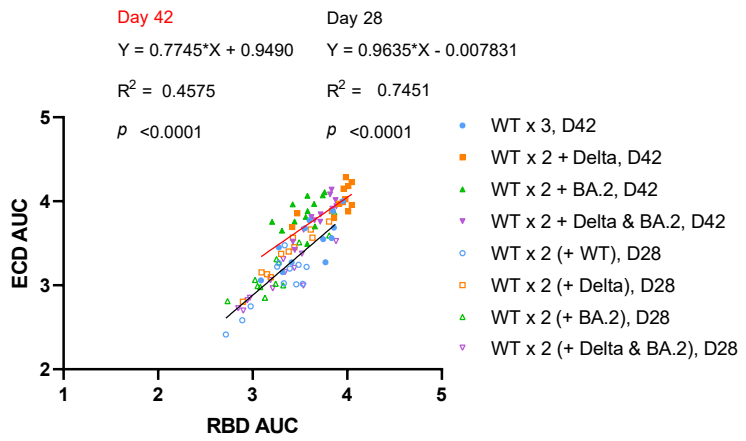
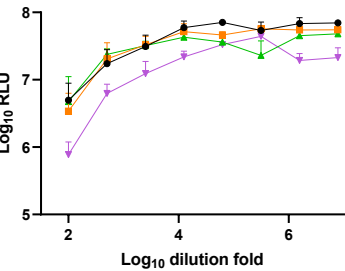


Figure S6

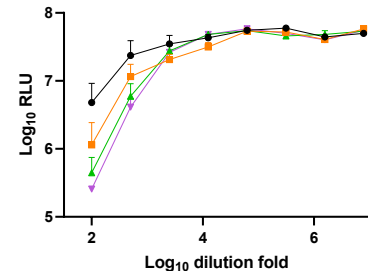
a

bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500616>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY 4.0 International license.

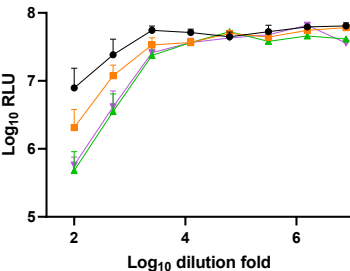
BA.5 pseudovirus neutralization, Day 42



BA.2.12.1 pseudovirus neutralization, Day 42



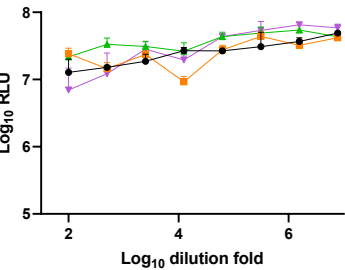
BA.2 pseudovirus neutralization, Day 42



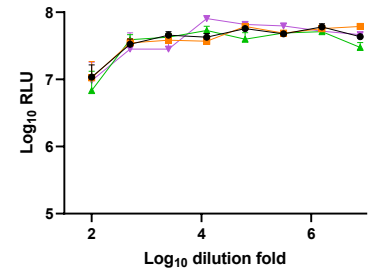
Vaccination groups
 ● WT x 3, D42
 ■ WT x 2 + Delta, D42
 ▲ WT x 2 + BA.2, D42
 ▼ WT x 2 + Delta & BA.2, D42

b

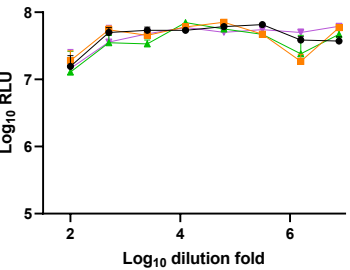
BA.5 pseudovirus neutralization, Day 28



BA.2.12.1 pseudovirus neutralization, Day 28



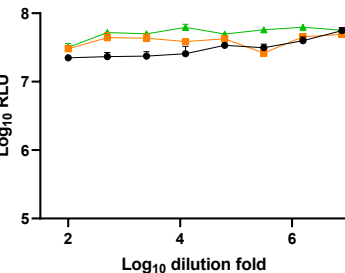
BA.2 pseudovirus neutralization, Day 28



Vaccination groups
 ● WT x 2 (+ WT), D28
 ■ WT x 2 (+ Delta), D28
 ▲ WT x 2 (+ BA.2), D28
 ▼ WT x 2 (+ Delta & BA.2), D28

c

Pseudovirus neutralization, Day 0

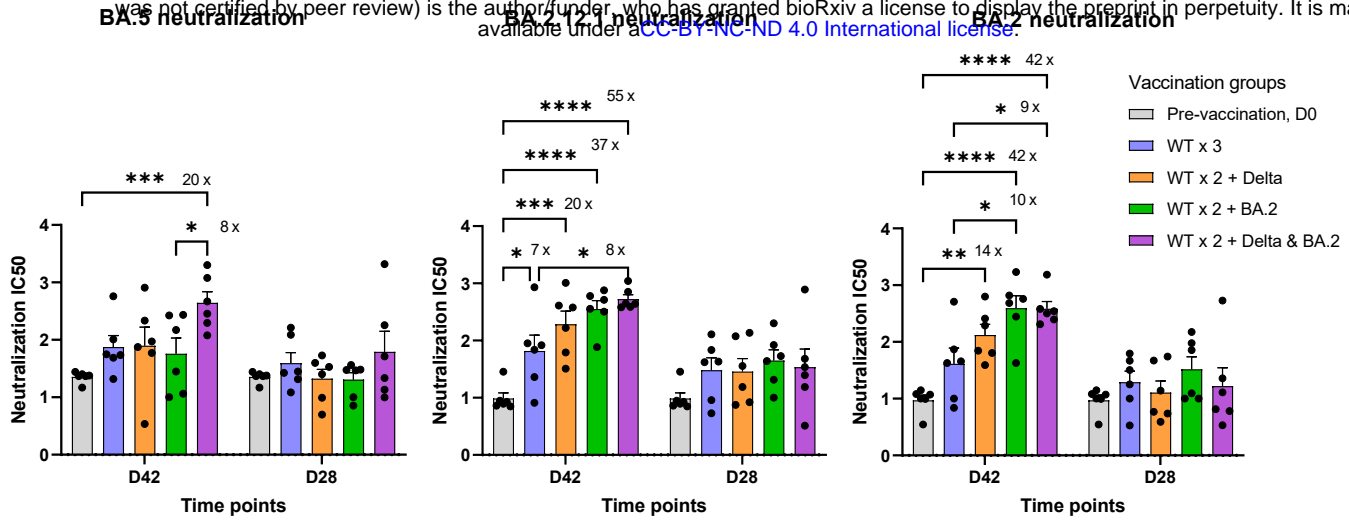


Pseudovirus tested
 ● BA.5
 ■ BA.2.12.1
 ▲ BA.2

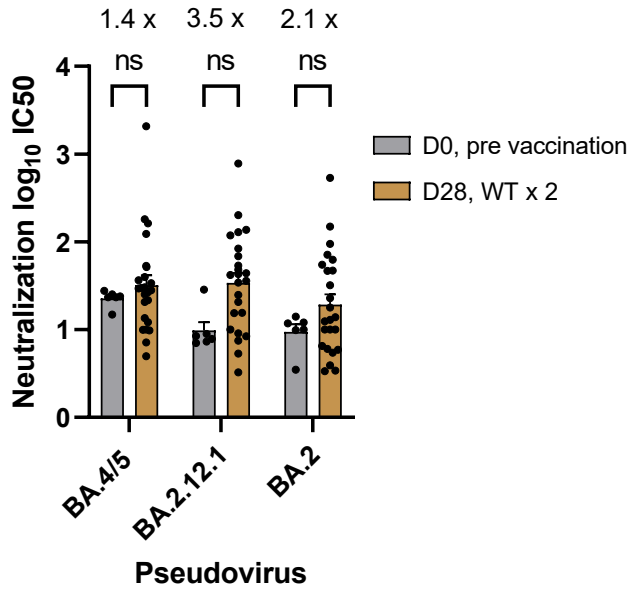
Figure S7

a

bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500616>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY-NC-ND 4.0 International license.



b



c

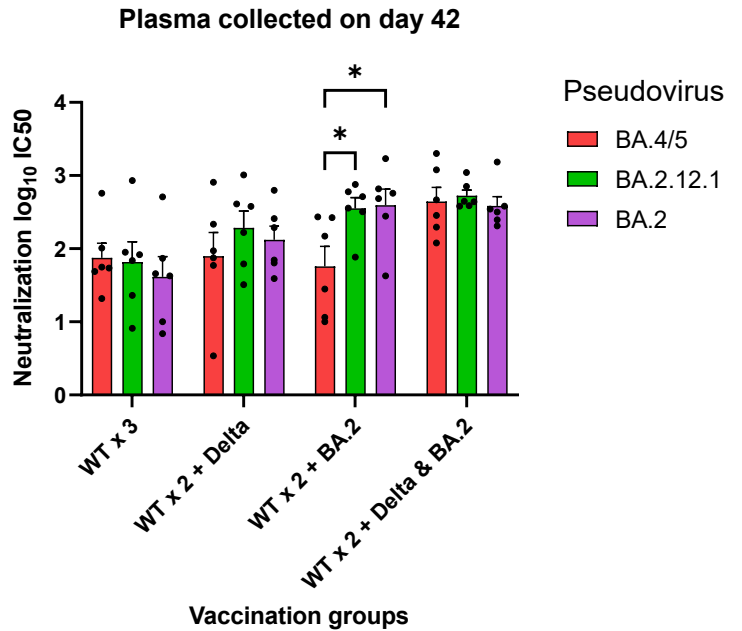
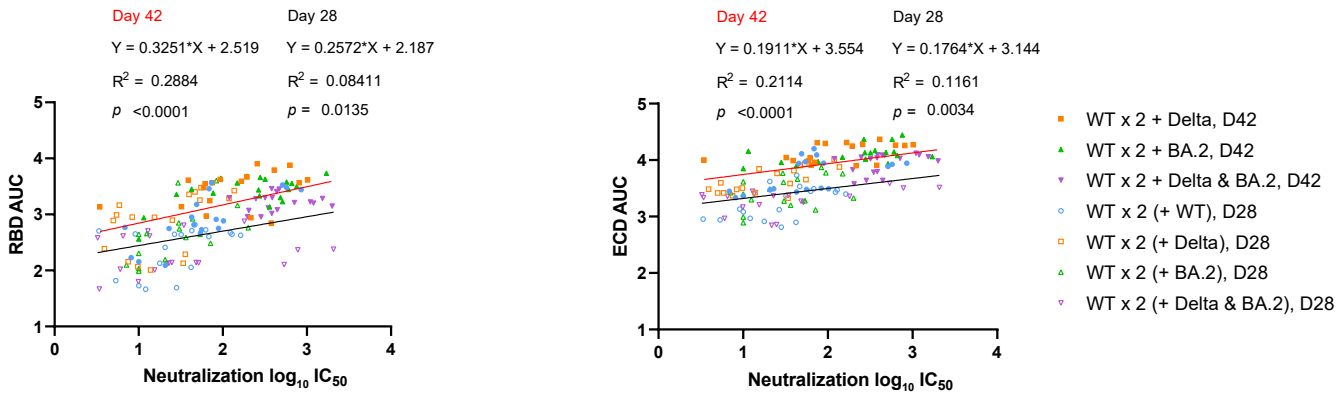


Figure S7

a

bioRxiv preprint doi: <https://doi.org/10.1101/2022.07.19.500616>; this version posted July 19, 2022. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted bioRxiv a license to display the preprint in perpetuity. It is made available under aCC-BY 4.0 International license.

RBD neutralization correlations of BA.2, BA.2.12.1, BA.4/5 **ECD neutralization correlations of BA.2, BA.2.12.1, BA.4/5**



b

RBD neutralization correlations of BA.2, BA.2.12.1, BA.4/5

ECD neutralization correlations of BA.2, BA.2.12.1, BA.4/5

