



PHE Briefing Note

Serial number 2020/064

Date 24 December 2020

Event SARS-CoV-2 Variant of Concern 202012/2 (South African origin)

Notified by PHE Incident Director

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PHE NIERP Level Enhanced

Incident Lead Will Welfare

Background and Interpretation:

On Friday 18 December South African Health Minister Mkhize announced that a new Covid-19 variant (named 501.V2) has been detected in South Africa. Sampling suggested that the new variant is present in 80-90% of new cases and was likely behind South Africa's second wave. It has now been identified in 196 samples collected from over 50 different health facilities in Eastern Cape, Western Cape and Kwazulu-Natal.

The variant is designated VOC-202012/02 (the second Variant Of Concern in December 2020), it is also known as B.1.351 or 501Y.V2. This variant was first detected in South Africa in samples at the beginning of October although molecular dating suggests that it arose at the end of August.

There continues to be significant travel between South Africa and UK despite it not being on the travel corridors and the FCDO advising against all but essential travel. Over the past 10 days, there have been approximately 4500 arrivals from South Africa. There have been 11 COVID cases reported to the UK IHR National Focal Point team with travel from South Africa in December.

Based on the above, there is highly likely to have been multiple undetected imports of this variant and subsequent spread.

Cases

Two cases with VOC 202012/2 (South African origin) were detected from routine genomic sequencing. PHE became aware that they were on 22 December. Neither case had travelled to South Africa but both had contacts who had travelled and had tested positive for COVID-19.

When future cases of this variant are identified, HPTs may be asked to review contact tracing and arrange repeat testing.

Risk Assessment

Over time all viruses mutate, and several different strains of SARS-CoV-2 have already emerged.

Currently there is no modelling data available from South Africa for this variant. However, within 4 weeks of detection, the new lineage rapidly became the dominant lineage in sampled locations. South African authorities report there may be increased



transmissibility based on the rapid displacement of other lineages to date. Additional epidemiological investigations, continued surveillance and phenotypic studies are required in South Africa to increase the confidence in this finding.

We currently have no evidence that this strain causes greater morbidity or mortality. The existence of the variant is unlikely to affect vaccine efficacy, but further laboratory studies are required.

Guidance

From 9AM on 24th December, non-EEA national visitors, and EEA nationals without a right to reside in the UK will be denied entry to the UK if, in the 10 days before their arrival in the UK they have been in or transited through South Africa.

From 9pm on 23rd December all other people who have been in or transited through South Africa in that period will be required to self-isolate until 10 days have passed since the day after the date on which they left South Africa. Members of their household are also required to self-isolate.

IAS are contacting all returnees from South Africa in the last 10 days to reinforce the advice to self-isolate, to encourage testing even if asymptomatic and inform anyone treating/testing them of the recent travel to South Africa.

Guidance for the NHS on IPC will be issued as a CAS alert shortly and will be shared with teams.

Implications for PHE Regions

PHE Regions may receive questions from partners.

HPTs may be contacted about confirmed cases of this variant and requested to support review of contact tracing and additional testing.

HPTs will be contacted by hospitals with possible cases related to travel from South Africa or contact with an individual who has travelled to South Africa.

Implications for PHE sites and services

Recommendations to PHE Regions

References/ Sources of information

Regulations

https://www.legislation.gov.uk/ukxi/2020/1644/pdfs/ukxi_20201644_en.pdf
