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# Sequences of S-surface of human COVID-19

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## ABSTRACT

Samples were collected from patients infected with the Coronavirus, according to official approvals, for the purpose of diagnosing the virus through qRT- PCR. Primers were designed based on the (NCBI) and primers of research Myungsun et al., 2020, where the two-step method was adopted, and then a s-spike of singer sequences was conducted for different samples in terms of age, gender and virus concentration where the selection of samples took place in different months of the year, where samples were taken from the April ,September and November months of 2020 year as well as the January, February, April ,June and July months of 2021 year . The number of samples that was carried out for the singer sequences about 10 samples of both selected for study . In addition, viruses that share with the including (Coronavirus, Influenza virus, Parainfluenzavirus, Rhinovirus and Metapneumovirus) were diagnosed, which were isolated from 300 human infected cases and mix cases in same sample of infected pateint.

### SAMPLE ABSTRACT:

**Aims:** Diagnosing the Coronavirus and viruses that share infection for different age groups through real time PCR, as well as using the Sanger sequencing method to homology sequence identity between local human Coronavirus isolate and NCBI-BLAST submitted Coronavirus isolate.

**Study design:**Cross section.

**Place and Duration of Study:**From the central health laboratory and quarantine centers, work was carried out in different places for the purpose of diagnosis in Al-Hakim and Al-Sadr Teaching Hospital and the Central Health Center in addition to the private laboratories, between April 2020 and July 2021.

**Methodology:**Diagnosing the virus through qRT- PCR, PCR and sangersequencing. Sample: We included 300 patients (174men, 128 women; age range 18- 83years) with from people who were infected for the first time with the Coronavirus and repeated infections with the virus with other viruses that affect the respiratory system.

**Results:**The current study showed that the number of cases of Coronavirus infection (110) case, Influenza virus (90) case, Parainfluenzavirus (65) case, Metapneumovirus (108)case and Rhinovirus (95)case for the period from 4-4-2020 up to 26-26 7-2021 all viruses were diagnosed through qReal time PCR technique by designing primers according to the location NCBIRegarding the sequences test, the results showed the percentage of similarity with the studied strains at a rate ranging between ( 99.92 - 78 %).

**Conclusion:**Most of the infections with the Coronavirus are common with respiratory viruses in different proportions, in addition to the fact that the age group (51-61) year is more infected, and (110) case of Influenza shares with the Coronavirus more infection and the results of Sanger sequences between(99.92 - 78 %).

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**Keywords:** *Middle East Respiratory Syndrome (MERS) , Severe Acute Respiratory Syndrome (SARS) , COVID-19*

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17 **1. INTRODUCTION**

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19 In December of 2019, a novel strain of coronaviruses, SARS-CoV-2, was revealed  
20 prominent to an occurrence of transmittable illness affecting a global pandemic.  
21 Coronaviruses were a great family of viruses well-known for contaminate together persons  
22 and different organisms. The persons, SARS-CoV-2 coronavirus contagions can source  
23 several infections beginning the corporate cold to other acute infections such as (middle east  
24 and severe acute respiratory Syndrome) [1].

25 A healthy cell is infected by the attachment of coronaviruses to a healthy target cell by  
26 binding to special receptors located on the membrane of an uninfected cell. The glycoprotein  
27 Spike (S) is the single membrane that helps bind to the target cells, which can fuse with the  
28 viral cells[2].

29 Through studies about appearance of new variants of the virus and the presence of the  
30 SARS-CoV-2 Spike (S) protein gene that contains one of the main mutations that have an  
31 effect on the function of the protein and its ability to infect uninfected cells [3].

32 In calculation to the variation that causes the mutation in the Spike (S) protein gene, added  
33 mutations have currently been discovered . Where all parts of the genome represent the  
34 genes that contain mutations, which are important in the preparation of the vaccine as well  
35 as the therapeutic research of the virus[4].

36 By knowing the next generation sequence of the SARS-CoV-2 viral genome, we can  
37 identify the variants that occur virus disaster and based on protocol for early ARTIC SARS-  
38 CoV-2 sequencing in January 2020 which was approved by several scientific organizations  
39 around the world and later published the original protocol in September 2020 which was  
40 considered the most common for sequencing SARS-CoV-2[4].

41 **2. MATERIAL AND METHODS / EXPERIMENTAL DETAILS / METHODOLOGY**

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43 **2.1 Quantitive Real Time PCR Technique:** This technique was relied on for the diagnosis of  
44 viral infection, and an extraction was used from (CanvaxHigherPurity™ Viral DNA/RNA  
45 Extraction Kit AN0605.UK.) .The primers designed according to NCBI by us for the purpose  
46 of diagnosing viruses including (Coronavirus, Influenza virus, Parainfluenzavirus, Rhinovirus  
47 and Metapneumovirus )are shown in the table (1).  
48

49 **Table (1): Primes design of HHV type 6&8 as well autism spectrum**  
50 **disordersdepending on the NCBI&Myungsunet al.,2020.**

| Type/subtype | Name     | Sequences            | Bases | PCR product size |
|--------------|----------|----------------------|-------|------------------|
| S-Covid-19   | Primer F | CAAATCGCTCCAGGGCAAAC | 20bp  | 516 bp           |
|              | Primer R | CTGTGGATCACGGACAGCAT | 20bp  |                  |
|              | Primer F | ACTGTTTTGCCACCTTTGCT | 20bp  |                  |

|                                    |          |                          |      |        |
|------------------------------------|----------|--------------------------|------|--------|
| S-SARS- CoV-2. IBS_m_S 2 .         | Primer R | AGCTTGTGCATTTTGGTTGA     | 20bp | 300 bp |
| <i>Myungsun et al.,2020</i>        |          |                          |      |        |
|                                    | Primer F | TTGCTAAAACCCGGAGACAC     | 20bp |        |
| HA-Influenza virus                 | Primer R | CCTGACGTATTTTGGGCACT     | 20bp | 228 bp |
| HPIV3gp4 Parainfluenzavirus type 3 | Primer F | TGCCACCATCTATCAACCAA     | 20bp | 250 bp |
|                                    | Primer R | CGTGTTCTGGGTTCCATTTT     | 20bp |        |
| HRV89gp1 Rhinovirus type A         | Primer F | GCAATGCTAAGTGCTGTCCA     | 20bp | 185 bp |
|                                    | Primer R | AGGTGGAGGAGATTGGAGG<br>T | 20bp |        |
| G - Metapneumovirus                | Primer F | AGCTCATCACCCATGGAATC     | 20bp | 214 bp |
|                                    | Primer R | TTGGTGGTGTGTGTGTGTG      | 20bp |        |

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52 **2.2 RNA Sequencing Method:** Ten samples were selected out of 110 positive for genetic  
53 Sequencing. Conventional PCR products of positive S-Covid-19 and S-SARS- CoV-2.  
54 IBS\_m\_S2 were sent to Macrogen Company in Korea by for performing the RNA  
55 sequencing by (AB RNA sequencing system). The RNA sequencing analysis for S-Covid-  
56 19 and S-SARS- CoV-2. IBS\_m\_S 2 genotyping. PCR master mix was elaborated by using  
57 GoTaq® Green Mater Mix Kit (Promega, LOT.0000401B40, USA), Iqon PCR Ladder Cat. No.:  
58 A610641 (dsDNA ladder with bands from 100 bp to 3.000 bp). All PCR products were  
59 electrophoresed on agarose gel with ethidium bromide and visualized under UV light. The  
60 multiple alignment analysis was based on Clustal alignment analysis, and NCBI-BLAST for  
61 the homology sequence identity.

### 62 3. RESULTS AND DISCUSSION

63

64 The current study showed that the number of cases of Coronavirus infection (110) case,  
65 Influenza virus (90) case, Parainfluenzavirus (65) case, Metapneumovirus (108) case and  
66 Rhinovirus (95) case for the period from 4-4-2020 up to 26-7-2021 all viruses were  
67 diagnosed through qReal time PCR technique in figure 1 and PCR technique in figure 2 by  
68 designing primers according to the location NCBI as shown in table 1. The study included six  
69 groups for different age groups (18-83), where the study showed that the age group from  
70 (51-61) year has the highest rate (80) case of infection compared to the rest of the age  
71 groups including [(18-28), (29-39), (40-50), (62-72) and (73-83)] year the number of cases of  
72 infection was, respectively [(33), (40), (70), (52) and (25)] , and the number 174 cases of  
73 males infected was higher than females 128 cases. Through our study, we noticed a  
74 difference in age groups in infection, where the age group (40-50) years was more  
75 susceptible to be infected. In the study (Russell et al., 2021) In 15 countries, we noticed that the  
76 age group (+80) years had the highest infection, while in India the age group (20-29) years in

77 addition to the recovery rates of males were higher than females in India, and the death rate  
78 also varied.

79 In Iraq, through our study, no age group is excluded, because the collection of samples did  
80 not include all governorates of Iraq and all cities. Samples were taken according to the  
81 consent of the patient or the patient for the purpose of conducting the study.

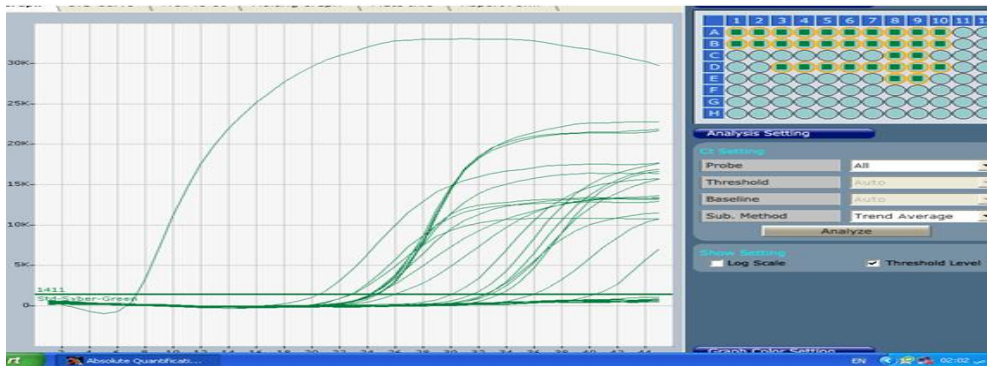
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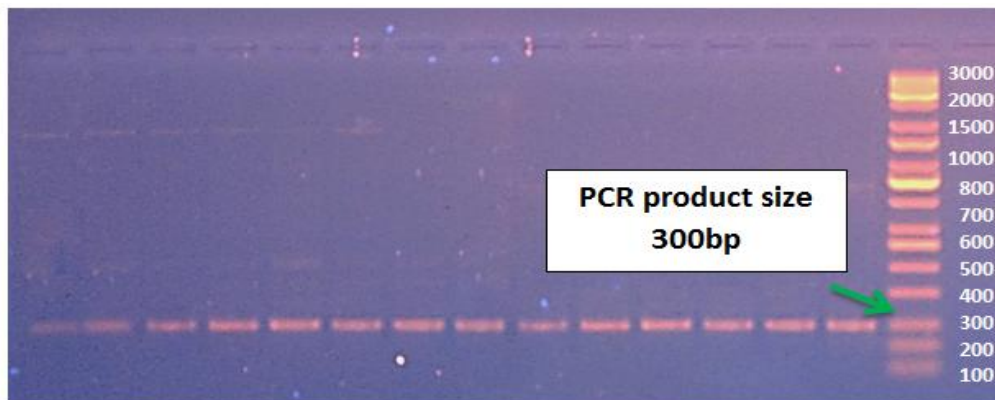
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89 **Fig. 1. Disgnosis of all virueses (Coronavirus, Influenza virus, Parainfluenzavirus,**  
90 **Rhinovirus and Metapneumovirus ) by qRT-PCR technique**

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94 **Fig. 2. Diagnosis of Human S-SARS- CoV-2 by PCR (PCR product size 300bp, 5 µl Iqon**  
95 **PCR Ladder was loaded on a 1.5 % agarose in 1x TBE and stained with ethidium**  
96 **bromide. dsDNA ladder with bands from 100 bp to 3.000 bp.**

97 Regarding the sequences test, the results showed the percentage of similarity with the  
98 studied strains at a rate ranging between ( 99.92 - 78 %) as shown in the table (2), ten

99 samples were selected based on the concentration of the virus cycles , different age groups  
100 , gender in addition to the sample source areas at the time of collection.

101 Sanger sequence analysis of the Coronavirus variants . All 10 samples that amplified with  
102 both the S-Covid-19 in 20-11-2020 and S-SARS- CoV-2 IBS\_mS 2 primers from 20 -11-  
103 2020 up to 10-3-2021 . Table 2 appear the six results were the percentage of NCBI-BLAST  
104 homology sequence identity between (99.92 – 95.32 %), while the S-SARS- CoV-2 IBS\_mS  
105 from (7-10) samples , the percentage ranged between (89.19 – 78 %), and all samples were  
106 sent to the NCBI for the purpose of recording it.

107

108

109 **Table 1. The NCBI-BLAST homology sequence identity (99.92-78%) between local**  
110 **human Coronavirus isolate and NCBI-BLAST submitted Coronavirus isolate**

111

113 According to the official approvals for the purpose of diagnosing the virus through qReal  
 114 Time PCR , samples were collected from patients infected with the Coronavirus, and then a  
 115 s-spike singer sequencing was conducted for different samples of age, gender and virus

| Local isolate No.               | NCBI-BLAST Homology Sequence identity (%)  |                          |              |
|---------------------------------|--|--------------------------|--------------|
|                                 | NCBI-BLAST identical Genotypes   | Genbank Accession number | Identity (%) |
| Human Coronavirus isolate No.1  | SARS coronavirus isolate CUHKtc53L spike glycoprotein (S) gene, complete cds   | DQ412628.1               | 99.92%       |
| Human Coronavirus isolate No.2  | SARS coronavirus ExoN1, complete genome  | FJ882930.1               | 99%          |
| Human Coronavirus isolate No.3  | Severe acute respiratory syndrome coronavirus 2 isolate SARS-CoV-2/human/USA/NM-CDC-ASC210522675/2021, complete genome | OL946799.1               | 99%          |
| Human Coronavirus isolate No.4  | Select seq NC_000012.12 Homo sapiens chromosome 12, GRCh38.p13 Primary Assembly  | NC_000012.12             | 95.32%       |
| Human Coronavirus isolate No.5  | Select seq NC_000013.11 Homo sapiens chromosome 13, GRCh38.p13 Primary Assembly  | NC_000013.11             | 89.19%       |
| Human Coronavirus isolate No.6  | Select seq NC_000023.11 Homo sapiens chromosome X, GRCh38.p13 Primary Assembly.  | NC_000023.11             | 89%          |
| Human Coronavirus isolate No.7  | Severe acute respiratory syndrome coronavirus 2 isolate SARS-CoV-2/human/USA/MD-MDH-0567/2020, complete                | MW484816.1               | 85%          |
| Human Coronavirus isolate No.8  | Select seq NC_000014.9 Homo sapiens chromosome 14, GRCh38.p13 Primary Assembly.  | NC_000014.9              | 80%          |
| Human Coronavirus isolate No.9  | Homo sapiens isolate CHM13 chromosome 15   | CP068263.2               | 79%          |
| Human Coronavirus isolate No.10 | Select seq NC_000016.10 Homo sapiens chromosome 16, GRCh38.p13 Primary Assembly  | NC_000016.10             | 78%          |

116 concentration. The fourth, ninth and eleventh of 2020 year , as well as the month of the first,  
117 second, fourth, sixth and seventh of 2021 year, and the analysis of the results was  
118 conducted according to the (NCBI), and the results were compared, as well as the  
119 percentages of similarity with the strains that appeared according to the four variables so far  
120 of the virus. The study was conducted for the first time in Najaf/Iraq.

121 Where more than 172 countries have shared the genome sequences of the Corona virus,  
122 the viral evolutionary geneticist at the Fred Hutchinson Cancer Research Center in Seattle,  
123 Washington explained the importance of these sequences as not being transformative on  
124 22 June [6].

125 During Bloom's study from May 2020 after searching for genetic data for the early stages  
126 of the epidemic, the linkage of sequences through the nuclear sequencing technology for the  
127 purpose of revealing the genetic material of different samples of infected people, as this  
128 study was published in the journal Small in June 2020 [7].

129 Sanger Sequence analysis of the Human Coronavirus variants. All 10 samples that  
130 amplified with both the S-Covid-19 and S-SARS- CoV-2 IBS\_mS 2 primers clustered with  
131 genotype in table (2). In our study, the Sanger Sequence analysis was used the NCBI-  
132 BLAST homology sequence identity (99.92-78%) , while in other studies, whole genomes  
133 were used Maria et al ., 2 020 the B1.1 variant was isolated in Europe and is considered to  
134 be more dominant, as the sequence showed the presence of a mutation in the spike protein  
135 due to a change in the amino acid sequence of SARS-CoV-2 Siena-1/2020 has been placed  
136 in GenBank underneath the succession no. MT531537. The rare Nanopore delivers were  
137 placed in the sequence beneath BioProject agreement no. PRJNA658490 with no.  
138 SRX8982904 [direct RNA sequencing] and SRX8982905 (amplicon sequencing). ; Anna et  
139 al ., 2021 the complete genome (100%) of SARS-CoV-2 was positively gained for 21/27  
140 samples. Jonathan et al ., 2021 appear whole analysis (>98%) of the viral genome ; while  
141 study Nihad et al ., 2021 IlluminaMiSeq technique was used to identify a D614G mutation  
142 in spike protein-coding sequence. Studies are continuing until now Tables should be  
143 explanatory enough to be understandable without any text reference. Double spacing should  
144 be maintained throughout the table, including table headings and footnotes. Table headings  
145 should be placed above the table. Footnotes should be placed below the table with  
146 superscript lowercase letters. Sample table format is given below.

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#### **4. CONCLUSION**

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150 The number of cases of Coronavirus infection (110) case, Influenza virus (90) case,  
151 Parainfluenzavirus (65) case, Metapneumovirus (108)case and Rhinovirus (95)case, and the  
152 age group (51-61) year has the highest infection rate, and the incidence of males 174 cases  
153 is higher than females 128 cases.

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156

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166 **COMPETING INTERESTS DISCLAIMER:**

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168 Authors have declared that no competing interests exist. The products used for this  
169 research are commonly and predominantly use products in our area of research and  
170 country. There is absolutely no conflict of interest between the authors and producers  
171 of the products because we do not intend to use these products as an avenue for any  
172 litigation but for the advancement of knowledge. Also, the research was not funded  
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