Antigenic characterization of the SARS-CoV-2 Omicron subvariant BA.2.75

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In brief
Wang et al. have systematically evaluated the antigenic properties of the new SARS-CoV-2 Omicron subvariant BA.2.75. They found that BA.2.75 exhibits greater neutralization resistance to monoclonal antibodies and vaccine- and infection-induced sera than previous Omicron subvariant BA.2, while showing a higher binding affinity for human ACE2.
Brief Report

Antigenic characterization of the SARS-CoV-2 Omicron subvariant BA.2.75

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SUMMARY

The severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) Omicron subvariant BA.2.75 emerged recently and appears to be spreading. It has nine mutations in spike compared with the currently circulating BA.2, raising concerns that it may further evade vaccine-elicited and therapeutic antibodies. We found BA.2.75 to be moderately more neutralization resistant to sera from vaccinated/boosted individuals than BA.2 (1.8-fold), similar to BA.2.12.1 (1.1-fold), but more neutralization sensitive than BA.4/5 (0.6-fold). Relative to BA.2, BA.2.75 showed heightened resistance to class 1 and class 3 monoclonal antibodies targeting the spike-receptor-binding domain while gaining sensitivity to class 2 antibodies. Resistance was largely conferred by G446S and R460K mutations. BA.2.75 was slightly resistant (3.7-fold) to bebtelovimab, a therapeutic antibody with potent activity against all Omicron subvariants. BA.2.75 also exhibited a higher binding affinity to host receptor ACE2 than other Omicron subvariants. BA.2.75 provides further insight into SARS-CoV-2 evolution as it gains transmissibility while incrementally evading antibody neutralization.

The coronavirus disease 2019 (COVID-19) pandemic is currently dominated by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) Omicron subvariant BA.5. Yet, another subvariant known as BA.2.75 has recently emerged from India, where it has spread rapidly, displacing the predominant BA.2 subvariant locally. Moreover, BA.2.75 has now been identified in at least 27 countries worldwide (Shu and McCauley, 2017) (Figure S1A). Though a descendent from BA.2, it contains a distinct set of mutations in its spike protein, including five substitutions in the N-terminal domain (NTD), K147E, W152R, F157L, I210V, and G257S, and four substitutions in the receptor-binding domain (RBD), D339H, G446S, N460K, and R493Q (Figure S1B). Many of these mutations are located at sites targeted by neutralizing antibodies and may also affect the binding affinity of the spike to its receptor, angiotensin-converting enzyme 2 (ACE2). In particular, two RBD mutations, D339H and N460K, are noteworthy because they have not been identified in previous SARS-CoV-2 variants and their impacts are not yet known. Newfound variants such as BA.2.75 that are increasing in frequency raise the concern that the viruses have developed additional mechanisms to escape from neutralization by antibodies elicited by vaccination or previous infection, as well as by therapeutic monoclonal antibodies (mAbs) in clinical use. Therefore, we have evaluated the antibody evasion properties of BA.2.75, and our findings are reported here.

We first set out to profile the antigenic differences of BA.2.75 from the wild-type SARS-CoV-2 D614G and the other currently circulating Omicron subvariants BA.2, BA.2.12.1, and BA.4/5 (note that BA.4 and BA.5 share an identical spike). Vesicular stomatitis virus (VSV)—pseudotyped viruses of each variant—were produced and then assessed for their neutralization sensitivity to sera from three different clinical cohorts: those who had received three doses of a COVID-19 mRNA vaccine (boosted) and patients with either BA.1 or BA.2 breakthrough infection after vaccination. We did not include sera from persons immunized with only two doses of COVID-19 mRNA vaccines as we had previously observed that they lacked neutralization capacity against earlier Omicron subvariants (Iketani et al., 2022; Liu et al., 2022b). The clinical information for our cohorts is described in Table S1, and the serum neutralization profiles are shown in Figure 1A. Consistent with previous reports (Iketani et al., 2022; Liu et al., 2022b; Wang et al., 2022b), neutralization ID50 (the 50% inhibitory dose) titers of the “boosted” sera were substantially lower against BA.2, BA.2.12.1, and BA.4/5 (4.9-, 7.8-, and 14.8-fold, respectively), compared with D614G. Neutralization titers against BA.2.75 were similar to those against BA.2.12.1,
8.7-fold lower than D614G, 1.8-fold lower than BA.2, but 1.7-fold higher than BA.4/5. A similar trend was observed in the "BA.1 and BA.2 breakthrough" cohorts.

We also investigated the impact of new point mutations found in BA.2.75 on serum antibody evasion by conducting serum neutralization assays with pseudoviruses containing each point mutation in the background of BA.2 (Figure 1B). The mutations W152R, F157L, I210V, G257S, D339H, and N446K each only slightly (0.8- to 1.3-fold) altered the neutralization titers of sera from all three cohorts against BA.2. By contrast, K147E and N460K impaired the neutralization activity of sera significantly, by 1.6- to 1.8-fold and 1.5- to 2.4-fold, respectively, whereas the R493Q reversion mutation modestly enhanced the neutralization by 1.8- to 3.0-fold, as was observed previously (Wang et al., 2022b).

We next assessed the neutralization resistance of BA.2.75 to a panel of 23 mAbs directed to known neutralizing epitopes on the viral spike. Among these, 21 target the four epitope classes in the RBD (Barnes et al., 2020), including REGN10987 (imdevimab) (Hansen et al., 2020), REGN10933 (casirivimab) (Hansen et al., 2020), COV2-2196 (tixagevimab) (Zost et al., 2020), COV2-2130 (cilgavimab) (Zost et al., 2020), LY-CoV555 (bamlanivimab) (Jones et al., 2020), CB6 (etesevimab) (Shi et al., 2020), Brii-196 (amubarvimab) (Ju et al., 2020), Brii-198 (romlusevimab) (Ju et al., 2020), S309 (sotrovimab) (Pinto et al., 2020), CAB-A17 (Sheward et al., 2022), ZCB11 (Zhou et al., 2022), Omi-3 (Nutalai et al., 2022), Omi-18 (Nutalai et al., 2022), XGv282 (Wang et al., 2022a), XGv347 (Wang et al., 2022a), S2E12 (Starr et al., 2021), A19-46.1 (Wang et al., 2021), 35B5 (Wang et al., 2022c), and JMB2002 (Yin et al., 2022), as well as 10-40 (Liu et al., 2022a) from our group. The other two mAbs, C1717 (Wang et al., 2022d) and S3H3 (Hong et al., 2022), target NTD-SD2 and SD1, respectively. Many of the recently isolated mAbs were chosen because they could neutralize earlier Omicron subvariants (Figure S1 and Table S1).
The results are presented in Figure 2A and Table S2. Unlike BA.2.12.1, which was largely similar in its antigenic profile to BA.2, BA.2.75 differed from BA.2 across a wide range of the mAbs tested. Antibodies across multiple classes were impaired against BA.2.75 compared with BA.2, including some in class 1 (CAB-A17, Omi-3, and Omi-18) and class 3 (XGv282, LY-CoV1404, JMB2002, COV2-2130, and REGN10987). Simultaneously, several antibodies showed neutralization sensitivity against BA.2.75 relative to BA.2, all within class 2 (S2E12, COV2-2196, and REGN10933). These data suggest that BA.2.75 has evolved to extend resistance toward some class 1- and class 3-directed antibodies over BA.2 yet has regained sensitivity for a subset of class 2 antibodies. Such differences may help to interpret the observations made on polyclonal serum neutralization (Figure 1).

Of particular note, BA.2.75 is the first SARS-CoV-2 variant that has demonstrated resistance to bebtelovimab (LY-CoV1404), which demonstrated heightened resistance to class 2 and class 3 antibodies over BA.2. Moreover, even within the resistance to class 3 antibodies, BA.2.75 and BA.4/5 only overlapped with additional resistance toward one antibody, JMB2002. The other impaired antibodies differed, with 35B5 and Brii-198 losing further activity against BA.4/5 over BA.2. These data suggest that BA.2.75 has evolved to extend resistance toward some class 1- and class 3-directed antibodies over BA.2 yet has regained sensitivity for a subset of class 2 antibodies. Such differences may help to interpret the observations made on polyclonal serum neutralization (Figure 1).

Of particular note, BA.2.75 is the first SARS-CoV-2 variant that has demonstrated resistance to bebtelovimab (LY-CoV1404),
albeit modestly at a 3.7-fold loss in neutralization (Figure 2A). Nevertheless, it remained the only clinical mAb that retained potent neutralizing activity against all the Omicron subvariants with an IC_{50} (the 50% inhibitory concentration) below 0.01 μg/mL. All other clinically authorized or approved antibodies or antibody combinations showed a substantial loss of activity in vitro against BA.2.75.

As we observed that BA.2.75 was resistant to mAbs in a unique way, we set out to identify the mutations within BA.2.75 that conferred the observed antibody resistance profile. We generated pseudoviruses carrying each of the point mutations in the background of D614G or BA.2 and tested their neutralization sensitivity to the aforementioned panel of mAbs and combinations. These data are shown in Figure 2B and Table S2. G446S impaired or abolished the neutralizing activity of class 3 mAbs (XGv282, JMB2002, and REGN10987), as previously observed in our BA.1 studies (Liu et al., 2022b). That this mutation did not result in a significant loss in polyclonal serum neutralization (Figure 1B) suggests that such antibodies may be rare in a polyclonal response. The N460K substitution conferred resistance to all of the class 1 RBD mAbs tested, as well as one class 2 mAb (ZCB11). However, this resistance was only observed in the context of BA.2 for three of the class 1 antibodies (CAV-A17, Omi-3, and Omi-18) and the class 2 antibody ZCB11 but not in the context of D614G. By contrast, R493Q, also found in BA.4/5 (Wang et al., 2022b), sensitized BA.2 to neutralization by several class 1 and 2 RBD mAbs, which is consistent with our previous study (Wang et al., 2022b). We note that although the NTD mutation K147E had a significant impact on polyclonal sera (Figure 1B), we did not observe an effect by this mutation against the panel of mAbs tested here, suggesting that this mutation may be acting through non-RBD antibodies.

We conducted structural modeling to further investigate the impact of the G446S and N460K mutations (Figure 2C). Analysis of G446S revealed steric hindrance to binding by class 3 RBD mAbs (XGv282 and JMB2002), as we reported previously (Liu et al., 2022b). In addition, structural modeling of N460K revealed that K460 abolished a common hydrogen bond between RBD-N460 and S56 in CDRH2 of VH3-S3 class antibodies (Barnes et al., 2020), such as CB6, Omi-3, and Omi-18, although it is not immediately clear why the loss in activity for Omi-3 and Omi-18 was only apparent in the background of BA.2 but not D614G.

Finally, as receptor-binding affinity may play a role in transmissibility, we investigated this property for BA.2.75. The binding affinity of purified spike trimer proteins of D614G, BA.2, BA.4/5, and BA.2.75 to dimeric human ACE2 (hACE2) was quantified using surface plasmon resonance (SPR). We found that BA.2.75 exhibited the highest receptor-binding affinity, with a K_{D} value 7.0- and 2.4-fold lower than values for BA.2 and BA.4/5, respectively (Figure 2D). To validate these results, we tested pseudoviruses bearing these spikes for neutralization by dimeric hACE2 (Figure S2). A comparison of IC_{50} values suggested that BA.2.75 was slightly more sensitive to hACE2 than the other pseudoviruses tested, in line with what was observed in the SPR. To probe the role of the mutations in BA.2.75 for ACE2 binding, we tested the neutralization by hACE2 of each of the point mutants in the background of BA.2. R493Q was the most sensitive to hACE2 neutralization, and N460K was the most resistant. These results parallel our previous studies in which we found R493Q could serve to restore the lost receptor-binding affinity due to a resistance-conferring mutation in BA.4/5 (Wang et al., 2022b). A similar mechanism in which R493Q acts to balance the compromised affinity caused by N460K may be in action for BA.2.75.

In summary, we have systematically evaluated the antigenic properties of the new SARS-CoV-2 Omicron subvariant BA.2.75, which is spreading throughout the world. Our data suggest that BA.2.75 exhibits higher resistance to vaccine-induced and infection-induced serum neutralizing activity than BA.2 (Figure 1A). It is reassuring that BA.2.75 does not show greater immune evasion from polyclonal sera than the BA.4/5 subvariant (Figure 1A). The resistance profile of BA.2.75 to sera can be largely attributed to the K147E and N460K mutations (Figure 1B). The latter mutation is consistent with findings from deep mutational scanning of the RBD (Greaney et al., 2021b). The impact of the former mutation is puzzling in that previous Omicron subvariants have already abolished the activity of the antibodies directed to the NTD antigenic supersite (Ikemizu et al., 2022; Liu et al., 2022b; Wang et al., 2022b), and yet, this new variant evolved to contain five additional NTD mutations. Why is SARS-CoV-2 doing so when NTD antibodies contribute only a small portion of the serum virus-neutralizing activity (Garrett et al., 2021; Greaney et al., 2021a)?

BA.2.75 exhibits a unique neutralizing profile for mAbs, with heightened resistance over BA.2 to class 1 and class 3 RBD antibodies while gaining sensitivity toward class 2 RBD antibodies (Figure 2A). Although the impairment is slight, BA.2.75 is the first SARS-CoV-2 variant to show discernible resistance to betelovimab (LY-CoV1404). The profiling of the individual mutations within BA.2.75 revealed that G446S and N460K could contribute to the resistance (Figure 2B). These mutations appear to be acting through steric hindrance or abrogation of a hydrogen bond (Figure 2C). More importantly, these findings on BA.2.75 demonstrate that our one remaining therapeutic antibody with potent activity to treat COVID-19 is now under threat. Another mutation proximal to residue 446 of the spike could knock out the current arsenal of therapeutic monoclonals. Although numerous mAbs have been isolated and shown to neutralize the new Omicron subvariants (Hong et al., 2022; Nutalai et al., 2022; Sheward et al., 2022; Starr et al., 2021; Wang et al., 2021, 2022a, 2022c, 2022d; Yin et al., 2022; Zhou et al., 2022), their development pathway to prove clinical efficacy has become rather daunting with the availability of effective vaccines and antiviral drugs.

Finally, our data demonstrate that BA.2.75 has enhanced binding affinity to its receptor ACE2, which may enhance its transmission (Figure 2D). However, it is still unclear whether BA.2.75 could outcompete BA.5, today’s dominant form globally. The features of BA.2.75 that diverged from other Omicron subvariants serve to underscore the ability of SARS-CoV-2 to evolve, incrementally gaining transmissibility and antibody evasion, and to reinforce the importance of vaccination and booster campaigns as well as epidemiologic surveillance to detect the emergence of new SARS-CoV-2 variants.

**STAR METHODS**

Detailed methods are provided in the online version of this paper and include the following:

- **KEY RESOURCES TABLE**
Brief Report

Nature SARS-CoV-2 neutralizing antibody structures inform therapeutic strategies. H.B., Malyutin, A.G., Sharaf, N.G., Huey-Tubman, K.E., Lee, Y.E., et al. (2020).

REFERENCES

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D.D.H. is a co-founder of TaiMed Biologics and RenBio, described in this manuscript. Both sets of applications are under review.

Columbia University for a number of SARS-CoV-2 neutralizing antibodies (WO2021236998) or provisional patent applications (63/271,627) filed by S.I., J.Y., Y.H., L.L., and D.D.H. are inventors on patent applications supervised the project. Q.W., S.I., Y.G., L.L., and D.D.H. analyzed the results and conducted the pseudovirus neutralization experiments. Q.W., Z.L., A.Y.Y., and L.L. purified the SARS-CoV-2 spike and ACE2 proteins and performed spike expression plasmids and produced pseudoviruses. Q.W., S.I., and L.L. conceived this project. Q.W., A.Y.Y., and L.L. constructed the spike-binding antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 392–401.e7.

Hansen, J., Baum, A., Pascall, K.E., Russo, V., Giordano, S., Wloga, E., Fulton, B.O., Yan, Y., Koon, K., Patel, K., et al. (2020). Studies in humanized mice and convalescent humans yield a SARS-CoV-2 antibody cocktail. Science 369, 1010–1014.

Chen, K.K., Dorosky, D., Sharma, P., Abbasi, S.A., Dye, J.M., Kranz, D.M., Herbert, A.S., and Procko, E. (2020). Engineering human ACE2 to optimize binding to the spike protein of SARS coronavirus 2. Science 369, 1261–1265.

Garrett, M.E., Galloway, J., Chu, H.Y., Itell, H.L., Stoddard, C.J., Wolf, C.R., Logue, J.K., McDonald, D., Weight, H., Matsen, F.A., 4th, and Overbaugh, J. (2021). High-resolution profiling of pathways of escape for SARS-CoV-2 spike-binding antibodies. Cell 184, 2927–2938.e11.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.

Greeaney, A.J., Loes, A.N., Crawford, K.H.D., Starr, T.N., Malone, K.D., Chu, H.Y., and Bloom, J.D. (2021a). Comprehensive mapping of mutations in the SARS-CoV-2 receptor-binding domain that affect recognition by polyclonal human plasma antibodies. Cell Host Microbe 29, 463–476.e6.
Wang, K., Jia, Z., Bao, L., Wang, L., Cao, L., Chi, H., Hu, Y., Li, Q., Zhou, Y., Jiang, Y., et al. (2022a). Memory B cell repertoire from triple vaccinees against diverse SARS-CoV-2 variants. Nature 603, 919–925.

Wang, L., Zhou, T., Zhang, Y., Yang, E.S., Schramm, C.A., Shi, W., Pegu, A., Oلونiniyi, O.K., Henry, A.R., Darko, S., et al. (2021). Ultrapotent antibodies against diverse and highly transmissible SARS-CoV-2 variants. Science 373, eabh1766.

Wang, Q., Guo, Y., Iketani, S., Nair, M.S., Li, Z., Mohri, H., Wang, M., Yu, J., Bowen, A.D., Chang, J.Y., et al. (2022b). Antibody evasion by SARS-CoV-2 Omicron subvariants BA.2.12.1, BA.4 and BA.5. Nature 608, 603–608.

Westendorf, K., Zentelis, S., Wang, L., Foster, D., Vaillancourt, P., Wiggin, M., Lovett, E., van der Lee, R., Hendle, J., Pustlinik, A., et al. (2022). LY-CoV1404 (bebtelovimab) potently neutralizes SARS-CoV-2 variants. Cell Rep. 39, 110812.

Wrapp, D., Wang, N., Corbett, K.S., Goldsmith, J.A., Hsieh, C.L., Abiona, O., Graham, B.S., and McLellan, J.S. (2020). Cryo-EM structure of the 2019-nCoV spike in the prefusion conformation. Science 367, 1260–1263.

Yin, W., Xu, Y., Xu, P., Cao, X., Wu, C., Gu, C., He, X., Wang, X., Huang, S., Yuan, Q., et al. (2022). Structures of the Omicron spike trimer with ACE2 and an anti-Omicron antibody. Science 375, 1048–1053.

Zhou, B., Zhou, R., Tang, B., Chan, J.F., Luo, M., Peng, Q., Yuan, S., Liu, H., Mok, B.W., Chen, B., et al. (2022). A broadly neutralizing antibody protects Syrian hamsters against SARS-CoV-2 Omicron challenge. Nat. Commun. 13, 3589.

Zost, S.J., Gilchuk, P., Case, J.B., Binshtein, E., Chen, R.E., Nkolola, J.P., Schafer, A., Reidy, J.X., Trivette, A., Nargi, R.S., et al. (2020). Potently neutralizing and protective human antibodies against SARS-CoV-2. Nature 584, 443–449.
## STAR METHODS

### KEY RESOURCES TABLE

| REAGENT or RESOURCE | SOURCE | IDENTIFIER |
|---------------------|--------|------------|
| Antibodies          |        |            |
| C1717               | Wang et al., 2022d | N/A |
| S3H3                | Hong et al., 2022 | N/A |
| CAB-A17             | Sheward et al., 2022 | N/A |
| CB6                 | Shi et al., 2020 | N/A |
| Provided by P. Kwong (NIH) | |
| Brii-196            | Ju et al., 2020 | N/A |
| Omi-3               | Nutalai et al., 2022 | N/A |
| Omi-18              | Nutalai et al., 2022 | N/A |
| XGv347              | Wang et al., 2022a | N/A |
| ZCB11               | Zhou et al., 2022 | N/A |
| Provided by Z. Chen (HKU) | |
| S2E12               | Starr et al., 2021 | N/A |
| A19-46.1            | Wang et al., 2021 | N/A |
| COV2-2196           | Zost et al., 2020 | N/A |
| Provided by Regeneron Pharmaceuticals | |
| LY-CoV555           | Jones et al., 2021 | N/A |
| REGN10933           | Hansen et al., 2020 | N/A |
| Provided by Regeneron Pharmaceuticals | |
| XGv282              | Wang et al., 2022a | N/A |
| LY-CoV1404          | Westendorf et al., 2022 | N/A |
| S309                | Pinto et al., 2020 | N/A |
| 3SB5                | Wang et al., 2022c | N/A |
| JMB2002             | Yin et al., 2022 | N/A |
| COV2-2130           | Zost et al., 2020 | N/A |
| Provided by Regeneron Pharmaceuticals | |
| REGN10987           | Hansen et al., 2020 | N/A |
| Provided by Regeneron Pharmaceuticals | |
| Brii-198            | Ju et al., 2020 | N/A |
| 10-40               | Liu et al., 2022a | N/A |
| Bacterial and virus strains | | |
| VSV-G pseudotyped ΔG-luciferase | Kerafast | Cat#EH1020-PM |
| Biological samples  |        |            |
| Boosted sera        | Wang et al., 2022b | N/A |
| BA.1 breakthrough sera | Wang et al., 2022b | N/A |
| BA.2 breakthrough sera | Wang et al., 2022b | N/A |
| Chemicals, peptides, and recombinant proteins | | |
| Polyethylenimine (PEI) | Polysciences Inc. | Cat#23966-100 |
| hACE2               | This paper | N/A |
| SARS-CoV-2 D614G S2P | Wang et al., 2022b | N/A |
| SARS-CoV-2 BA.2 S2P  | Wang et al., 2022b | N/A |
| SARS-CoV-2 BA.4/5 S2P | Wang et al., 2022b | N/A |
| SARS-CoV-2 BA.2.75 S2P | This paper | N/A |

(Continued on next page)
**Critical commercial assays**

| REAGENT or RESOURCE | SOURCE | IDENTIFIER |
|---------------------|--------|------------|
| Luciferase Assay System | Promega | Cat#E4550 |
| QuikChange Lightning Site-Directed Mutagenesis Kit | Agilent | Cat#210518 |
| Series S sensor chip CM5 | Cytiva | Cat#BR100530 |
| His-capture kit | Cytiva | Cat#28995056 |

**Experimental models: cell lines**

| HEK293T | ATCC | Cat#CRL-3216; RRID: CVCL_0063 |
| Vero-E6 | ATCC | Cat#CRL-1586; RRID: CVCL_0574 |
| Exp293 cells | Thermo Fisher Scientific | Cat#A14527; RRID: CVCL_D615 |

**Recombinant DNA**

| pCMV3-D614G | Wang et al., 2022b | N/A |
| pCMV3-BA.2 | Wang et al., 2022b | N/A |
| pCMV3-BA.2.12.1 | Wang et al., 2022b | N/A |
| pCMV3-BA.4/5 | Wang et al., 2022b | N/A |
| pCMV3-BA.2.75 | This paper | N/A |
| pCMV3-D614G-K147E | This paper | N/A |
| pCMV3-D614G-W152R | This paper | N/A |
| pCMV3-D614G-F157L | This paper | N/A |
| pCMV3-D614G-I210V | This paper | N/A |
| pCMV3-D614G-G257S | This paper | N/A |
| pCMV3-D614G-G339H | This paper | N/A |
| pCMV3-D614G-G446S | This paper | N/A |
| pCMV3-D614G-N460K | This paper | N/A |
| pCMV3-BA.2-K147E | This paper | N/A |
| pCMV3-BA.2-W152R | This paper | N/A |
| pCMV3-BA.2-F157L | This paper | N/A |
| pCMV3-BA.2-I210V | This paper | N/A |
| pCMV3-BA.2-G257S | This paper | N/A |
| pCMV3-BA.2-D339H | This paper | N/A |
| pCMV3-BA.2-G446S | This paper | N/A |
| pCMV3-BA.2-N460K | This paper | N/A |
| pCMV3-BA.2-R493Q | This paper | N/A |
| paH-D614G S2P | Wang et al., 2022b | N/A |
| paH-BA.2 S2P | Wang et al., 2022b | N/A |
| paH-BA.4/5 S2P | Wang et al., 2022b | N/A |
| paH-BA.2.7S S2P | This paper | N/A |
| pcDNA3-sACE2-WT(732)-IgG1 | Chan et al., 2020 | RRID: Addgene_154104 |

**Software and algorithms**

| GraphPad Prism 9 | GraphPad Software Inc | https://www.graphpad.com/ scientific-software/prism/ |
| PyMOL v.2.3.2 | Schrödinger, LLC | https://pymol.org/2/#page-top |
| Biacore T200 Evaluation Software (Version 1.0) | Cytiva | NA |
RESOURCE AVAILABILITY

Lead contact
Further information and requests for resources and reagents should be directed to and will be fulfilled by the Lead Contact Author David D. Ho (dh2994@cumc.columbia.edu).

Materials availability
All reagents generated in this study are available from the Lead Contact with a completed Materials Transfer Agreement.

Data and code availability
- Data reported in this paper will be shared by the lead contact upon request.
- This paper does not report original code.
- Any additional information required to reanalyze the data reported in this paper is available from the lead contact upon request.

EXPERIMENTAL MODEL AND SUBJECT DETAILS

Patients and vaccinees
Sera from individuals who received three doses of the mRNA-1273 or BNT162b2 vaccines were collected at Columbia University Irving Medical Center (referred to as “boosted” in the text). Sera from individuals who were infected by an Omicron subvariant (BA.1 or BA.2) following vaccinations were collected from December 2021 to May 2022 at Columbia University Irving Medical Center (referred to as “BA.1 or BA.2 breakthrough” in the text). All samples were confirmed for prior SARS-CoV-2 infection status by anti-nucleoprotein (NP) enzyme-linked immunosorbent assay (ELISA), and the variant involved in breakthrough cases was determined by sequencing. All collections were conducted under protocols reviewed and approved by the Institutional Review Board of Columbia University. All participants provided written informed consent. Clinical information on the different cohorts of study subjects is provided in Table S1.

Cell lines
Expi293 cells were obtained from Thermo Fisher Scientific (A14527); Vero-E6 cells were obtained from the ATCC (CRL-1586); HEK293T cells were obtained from the ATCC (CRL-3216). Expi293 cells were maintained in Expi293™ Expression Medium, supplemented with 0.5% penicillin-streptomycin (Thermo Fisher Scientific, Cambridge, MA), and were incubated at 37°C, 8% CO₂, 125 rpm. Vero-E6 and HEK293T cells were cultured in Dulbecco modified Eagle medium (DMEM) supplemented with 10% fetal bovine serum (FBS) and 1% penicillin-streptomycin at 37°C, 5% CO₂. HEK293T cells and Expi293 cells are of female origin. Vero-E6 cells are from African green monkey kidneys. Cells were purchased from authenticated vendors and morphology was confirmed visually before use. All cell lines tested mycoplasma negative.

METHOD DETAILS

Monoclonal antibodies
Antibodies were expressed in-house as previously described (Liu et al., 2020). For each of the antibodies in this study, heavy chain variable (VH) and light chain variable (VL) genes were synthesized (GenScript), cloned into an expression vector, transfected into Expi293 cells (Thermo Fisher Scientific), and purified from the cellular supernatant by affinity purification using rProtein A sepharose (GE). REGN10987, REGN10933, COV2-2196, and COV2-2130 were provided by Regeneron Pharmaceuticals; Brii-196 and Brii-198 were provided by Brii Biosciences; CB6 was provided by B. Zhang and P. Kwong (NIH); and ZCB11 was provided by Z. Chen (HKU).

Construction of SARS-CoV-2 spike plasmids
Spike expression constructs for D614G, BA.2, BA.2.12.1, and BA.4/5 were previously generated (Iketani et al., 2022; Liu et al., 2022b; Wang et al., 2022b). Expression constructs encoding the BA.2.75 spike, as well as the individual mutations found in BA.2.75, were generated using the QuikChange II XL site-directed mutagenesis kit according to the manufacturer’s instructions (Agilent). For expression of stabilized soluble S2P spike trimer proteins, 2P substitutions (K986P and V987P in WA1) and a “GSAS” substitution of the furin cleavage site (682-685aa in WA1) were introduced into the spike-expressing plasmids for stabilization as previously described (Wrapp et al., 2020), and then the ectodomain (1-1208aa in WA1) of the spike was fused with a C-terminal 8x His-tag and cloned into the pAh vector. All constructs were confirmed by Sanger sequencing prior to use.

Expression and purification of SARS-CoV-2 stabilized spike trimers and human ACE2
Stabilized SARS-CoV-2 spike trimer proteins of D614G and the Omicron subvariants were generated by transfecting Expi293 cells with each of the stabilized spike trimer expression constructs using 1 mg mL⁻¹ polyethylenimine (PEI), and then purifying the spike trimer from the supernatants five days post-transfection using nickel-nitrilotriacetic acid (Ni-NTA) resin (Invitrogen) according to the manufacturer’s instructions (Liu et al., 2020). Dimeric human ACE2-IgG1 (hACE2) was generated by transfecting Expi293 cells with
pcDNA3-sACE2-WT(732)-IgG1 (Chan et al., 2020) (Addgene plasmid #154104, gift from Erik Procko) using 1 mg mL⁻¹ PEI and then purifying from the supernatant five days post-transfection using rProtein A sepharose (GE) according to the manufacturer's instructions. All proteins were confirmed for purity and size by sodium dodecyl-sulfate polyacrylamide gel electrophoresis (SDS-PAGE) prior to use.

**Surface plasmon resonance (SPR)**

Surface plasmon resonance binding assays for hACE2 binding to SARS-CoV-2 stabilized spike trimers were performed using a Biacore T200 biosensor equipped with a Series S CM5 chip (Cytiva), in a running buffer of 10 mM N-2-hydroxyethylpiperazine-N'2-ethanesulfonic acid (HEPES) pH 7.4, 150 mM NaCl, 3 mM ethylenediaminetetraacetic acid (EDTA), 0.05% P-20 (Cytiva) at 25 °C. Spike proteins were captured through their C-terminal His-tag over an anti-His antibody surface. These surfaces were generated using the His-capture kit (Cytiva) according to the manufacturer’s instructions, resulting in approximately 10,000 resonance units (RU) of anti-His antibody over each surface. An anti-His antibody surface without antigen was used as a reference flow cell to remove bulk shift changes from the binding signal. For each spike, binding to hACE2 was tested using a three-fold dilution series with concentrations ranging from 2.46 nM to 200 nM. The association and dissociation rates were each monitored for 60 s and 600 s respectively, at 30 °C. The bound spike/hACE2 complex was regenerated from the anti-His antibody surface using 10 mM glycine pH 1.5. Blank buffer cycles were performed by injecting running buffer instead of hACE2 remove systematic noise from the binding signal. The resulting data was processed and fit to a 1:1 binding model using Biacore Evaluation Software.

**Pseudovirus production**

Pseudotyped SARS-CoV-2 (pseudoviruses) were produced in the vesicular stomatitis virus (VSV) background, in which the native VSV glycoprotein was replaced by that of SARS-CoV-2 and its variants, as previously described (Liu et al., 2020). HEK293T cells were transfected with the appropriate spike expression construct using 1 mg mL⁻¹ PEI and cultured overnight at 37 °C under 5% CO₂, and then infected with VSV-G pseudotyped ΔG-luciferase (ΔG-luciferase, Kerafast) 24 h post-transfection. After 2 h of infection, cells were washed three times, changed to fresh medium, and then cultured for approximately another 24 h before the supernatants were collected, clarified by centrifugation, and aliquoted and stored at -80 °C until further use.

**Pseudovirus neutralization assay**

Prior to use in the neutralization assay, all pseudoviruses were first titrated to equilibrate the viral input between assays. Five-fold serial dilutions of heat-inactivated sera, antibodies, or hACE2 were prepared in media in 96-well plates in triplicate, starting at 1:100 dilution for sera and 10 μg mL⁻¹ for antibodies and hACE2. Pseudoviruses were then added to wells and the virus–sample mixture was incubated at 37 °C for 1 h, except for hACE2, where no incubation was conducted. Control wells with the virus only were included on all plates. Vero-E6 cells were then added at a density of 3 × 10⁴ cells per well and the plates were incubated at 37 °C for approximately 10 h. Cells were then lysed and luciferase activity was quantified using the Luciferase Assay System (Promega) according to the manufacturer's instructions with SoftMax Pro v.7.0.2 (Molecular Devices). Neutralization curves and IC₅₀ values were derived by fitting a nonlinear five-parameter dose-response curve to the data in GraphPad Prism v.9.2.

**Structural modeling of RBD mutations**

The structures of antibody-spike complexes for modeling were obtained from PDB (PDB: 7WLC (XGv282), PDB: 7XOD (JMB2002), PDB: 7C01 (CB6), PDB: 7ZF3 (Omi-3), and PDB: 7ZFB (Omi-18)). PyMOL v.2.3.2 was used to perform mutagenesis, to identify steric clashes and hydrogen bonds between RBD and antibodies, and to generate structural plots (Schrödinger, LLC).

**QUANTIFICATION AND STATISTICAL ANALYSIS**

Serum neutralization ID₅₀ values and antibody and hACE2 neutralization IC₅₀ values were calculated using a five-parameter dose-response curve in GraphPad Prism v.9.2. Evaluations of statistical significance were performed employing two-tailed Wilcoxon matched-pairs signed-rank tests using GraphPad Prism v.9.2 software. Levels of significance are indicated as follows: ns, not significant; *, P < 0.05; **, P < 0.01; ***, P < 0.001; and ****, P < 0.0001. The SPR data was processed and fit to a 1:1 binding model using Biacore Evaluation Software.