

COMMUNIQUE ON THE SUDDEN INCREASE IN COVID-19 CASES DRIVEN BY THE OMICRON BF.7 VARIANTS

Date/Time	22 December 2020
Incident/Event title/ Name	Sudden increase in COVID-19 cases driven by the Omicron BF.7 variants
Notification	Alert
From	Africa Centres for Disease Control and Prevention (Africa CDC)
To	AU Member States

Key Messages

- BF.7 is one of the Omicron subvariants under monitoring by the Africa CDC and the World Health Organization
- Preliminary reports from China indicate BF.7 has increased transmissibility with a shorter incubation period, and greater capacity to infect people who have had a previous COVID-19 infection, or been vaccinated, or both
- The symptoms of an infection with BF.7 are similar to those associated with other Omicron subvariants. No reports on the severity of disease caused by BF.7 were identified for inclusion in this communique
- AU Member States should continue to **enhance COVID-19 genomic surveillance** efforts to monitor the presence of variants and the spread and continuous evolution of the virus

Situation Summary

COVID-19 infections in Africa continue to be dominated by the SARS-COV-2 Omicron Variant. Since its emergence, Omicron has rapidly evolved into multiple subvariants. One subvariant, BF.7 also known as BA.5.2.1.7, has recently been identified as the main variant spreading in Beijing, driving the current surge of COVID-19 infections in China. The variant is currently being monitored by the health authorities in other regions. BF.7 has been detected in several other countries around the world including India, the U.S., the UK and several European countries such as Belgium, Germany, France and Denmark. In Africa, the BF.7 variant was detected in 67 samples collected between 03 May - 14 October 2022 from Algeria, Cabo Verde, Cameroon, The Gambia, Guinea, Mauritius, Morocco, Senegal, and South Africa.

The rising prevalence and mutational profile of BF.7 are raising concern over the potential for this variant to be more transmissible and more evasive to immunity acquired from vaccination and/or prior COVID-19 infection. Recent reports from China indicated that the BF.7 variant is characterized by increased immune escape, a shorter incubation period and faster transmission rate. Despite BF.7's immune-evasive characteristics, and worrying signs about its growth in China, the variant seems to be remaining fairly steady elsewhere.

Implications for Public Health Practice

Early evidence indicates the BF.7 is associated with a rapid surge in COVID-19 infections, therefore, the spread of BF.7 warrants a cautious approach and expanded genomic surveillance in Africa

Recommendations for the Member States

While additional evidence is needed to determine the possible impact of BF.7 in Africa, this communique is being sent out to increase Member State awareness of the situation. In line with this, Africa CDC advises Member States and Health Authorities as follows:

1. Africa CDC strongly recommends the AU Member States to expand COVID-19 vaccination campaigns to increase vaccine coverage. Member States should also address vaccine misinformation with effective community-based risk communication and vaccine promotion activities.
2. AU Member States should continue to **enhance COVID-19 testing and genomic surveillance** efforts including incorporation of SARS-CoV-2 testing and genome sequencing into the Influenza-like illness/Severe Acute Respiratory syndrome (ILI/SARI) surveillance to monitor the presence of variants and the spread and continuous evolution of the virus. Request for assistance on genomic sequencing can be directed to SofoniasT@africa-union.org.
1. All AU Member States should notify and routinely share data with Africa CDC on confirmed COVID-19 cases, deaths, recoveries, vaccination status, tests conducted and infected healthcare workers to support data for action. Notify Africa CDC by emailing: AfricaCDCEBS@africa-union.org

Additional resources

1. Enhanced neutralization resistance of SARS-CoV-2 Omicron subvariants BQ.1, BQ.1.1, BA.4.6, BF.7, and BA.2.75.2. *Cell Host Microbe*. 2022 Nov 22;S1931-3128(22)00568-6. doi: 10.1016/j.chom.2022.11.012 (PMID: 36476380)
2. <https://www.globaltimes.cn/page/202211/1280588.shtml>
3. Omicron BQ.1 and BQ.1.1 escape neutralisation by omicron subvariant breakthrough infection. *Lancet Infect Dis*. 2023 Jan;23(1):28-30. doi: 10.1016/S1473-3099(22)00805-2 (PMID: 36543471)
4. Rapid emergence of omicron sublineages expressing spike protein R346T. *Lancet Reg Health Eur*. 2023 Jan;24:100564. doi: 10.1016/j.lanepe.2022.100564 (PMID: 36533118)

