Omicron subvariant BA.2

Two years into the pandemic, a mutated version of the omicron variant, known as BA.2, has become the latest challenge to taming Covid-19. Globally, during the week of 24 to 30 January 2022, the number of new COVID-19 cases remained similar to the number reported during the previous week, while the number of new deaths increased by 9% (figure 1). As of 30 January 2022, over 370 million confirmed cases and over 5.6 million deaths have been reported globally.

![Figure 1. COVID-19 cases reported weekly by WHO Region, and global deaths, as of 30 January 2022**](image)

**See Annex 2: Data, table, and figure notes

The subvariant, detected in at least 57 countries, appears to spread even more easily than the original. But so far it doesn’t seem to cause more severe disease and booster shots remain an effective shield. Scientists are racing to answer a number of questions about this variant as they prepare for the next one.
OMICRON TAKEOVER
Omicron has quickly spread to become the world’s dominant variant of the SARS-CoV-2 coronavirus — as shown by its prevalence in viral genomes uploaded to the GISAID database from various regions.

[Graph showing genome frequency (%)]

* Including United Kingdom.

Source: GISAID

How transmissible is BA.2?
Omicron is more transmissible than delta, the variant that became globally dominant in the middle of last year, and the new subvariant is especially infectious. Take Denmark, where BA.2 has quickly gained ground. A study based on about 8,500 households in December and January found that people infected with BA.2 spread the virus to an average of 39% of susceptible household members, versus 29% for the original omicron variant. That’s in line with preliminary U.K. data.

Is BA.2 more dangerous than omicron?
Omicron and its related strains appear less likely than earlier variants to cause serious illness, particularly in vaccinated people. The World Health Organization said this week that BA.2 doesn’t seem more severe than the original omicron variant, based on evidence from Denmark, where its spread hadn’t led to unexpected spikes in hospitalizations. In announcing the end of coronavirus restrictions late last month, the Danish government declared the disease no longer poses a threat to society, even as cases hit a record high.
How well do vaccines work against it?

The data suggest some Covid vaccines are less effective at preventing infections caused by omicron than previous variants, while still doing a good job protecting against severe disease. Although the subvariant appears to be even more contagious, Covid shots in particular booster doses are just as effective against BA.2, according to initial findings from U.K. health authorities. By 25 weeks or more after the second dose, vaccines blocked 13% of cases -- a rate that increased to 70% two weeks after a booster.

How does BA.2 differ from the original?

The latest iteration of the coronavirus represents a small minority of infections but has rapidly spread in countries such as South Africa, Denmark, India and England. The two versions differ by some 40 mutations, including a key alteration in the spike region of BA.2. While the two are related, there are enough differences to drive a change in behavior. The milder form of most omicron cases in vaccinated people may leave those who recover still vulnerable to existing virus and future variants, according to researchers.

What does it mean for the pandemic?

Virus hunters are trying to better understand the properties of BA.2 as they brace for future variants, and some believe BA.2 could prolong the omicron wave. The characteristics of the subvariant may lead to a "substantially longer tail of circulation of omicron," computational biologist Trevor Bedford of the Fred Hutchinson Cancer Research Center said in a Jan. 28 Twitter post. A potentially slower decline in cases could lead to higher hospitalizations and pose a problem for countries with lower vaccination rates.

Severity ranking of the concerns effect in the ASEAN region.

<table>
<thead>
<tr>
<th>Section</th>
<th>Ranking</th>
<th>Issues identified</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Covid-19 Omicron</td>
<td>G</td>
<td>The national assistances have observed the affected area.</td>
<td>The ACMM keep on monitoring and update medical information.</td>
</tr>
</tbody>
</table>

Remarks:

**R**: Severe Situation: Urgent intervention required.

**Y**: Situation of concern: Surveillance or assistance may or may not require, intensive monitoring

**G**: Relative normal situation or local Government can cope with the crisis, monitoring and no action required.

**N/A**: Lack of /unreliable data: Further assessment required.
ACMM Recommendations,

Although pandemic of the Omicron variant was able to displace the Delta variant, But the Omicron continued to mutate into BA.2. which tends to increase in many countries and may become the main species within 1-2 months because it can spread faster than BA.1. However, from the available information at the moment, the severity of the disease is not that different from the main omicron species and COVID-19 booster vaccines can still prevent serious illnesses and symptoms. To loosen Covid-19 restrictions should take into vaccine coverage with risk groups for severe cases such as the groups of elderly people and persons who have chronic disease. In addition, time after vaccination should be considered. People who have not been vaccinated should be vaccinated the first 2 doses of Covid-19 vaccine. For they who have received 2 doses of vaccination over 3-6 months should receive a booster vaccine. Moreover, the Covid-19 vaccine can reduce the risk of complications such as multiple systemic inflammatory syndrome in children.

Reference
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