



Testing, Testing, 1, 2, 3 (And What's Up with the New Vaccine, Anyways?)

Tuesday, March 23

Featuring: Kristin M. Omberg, PhD

Group Leader, Chemical & Biological Signatures
PNNL-SA-160743

DEMYSTIFYING COVID:

A Special Edition
Seminar Series



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50+ years developing goodwill



Historical

FY 2019

\$28.5M

\$0.52M

Philanthropic Investments



Historical

FY 2019

347,000

30,000

Team Battelle Volunteer Hours



Historical

FY 2019

>120

56

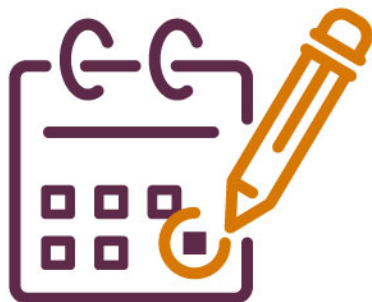
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DEMYSTIFYING COVID: A Special Edition Seminar Series



EVERY TUESDAY
IN MARCH
5:00-6:00 P.M.



MARCH02

**Hindsight is 2020: The Science
Behind COVID-19**

Presented by Steve Wiley

What lessons have we learned over the last few months? What's left for us to uncover? And seriously what is the difference between a cold, a flu, and COVID symptoms?



MARCH09

What Do Bats Have to Do with It?

Presented by Amy Sims

Bats, pangolins, and humans—oh my! This talk will explore the role wild animals play in the emergence of new diseases.



MARCH16

**Behind the Mask: The Science on
Stopping the Spread**

Presented by Katrina Waters

What measures keep our communities safe? And why do some strange, sometimes serious health effects linger even after COVID-19 has gone, including a loss of taste and smell or COVID toe? Join us to find out.



MARCH23

**Testing, Testing, 1, 2, 3 (And What's Up
With The New Vaccine, Anyways?)**

Presented by Kristin Omberg

If you're confused about COVID-19 testing and vaccines, you're not alone. This talk will explore the science behind the 400+ diagnostic tests and 200+ vaccine candidates produced over the last year.



MARCH30

**Model Me This: COVID-19 Scientific
Predictions and Where We Go from Here**

Presented by Tim Scheibe

Using mathematical models, scientists across the globe are beginning to arrive at a more complete picture of how and why COVID-19 spread across geographical locations and human populations.

COMMUNITY REPRESENTATIVES



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5:00-6:00 P.M.



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Mid-Columbia
Mastersingers



Martin Valadez
Interim Executive Director
Tri-Cities Hispanic
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TODAY'S SPEAKER



EVERY TUESDAY
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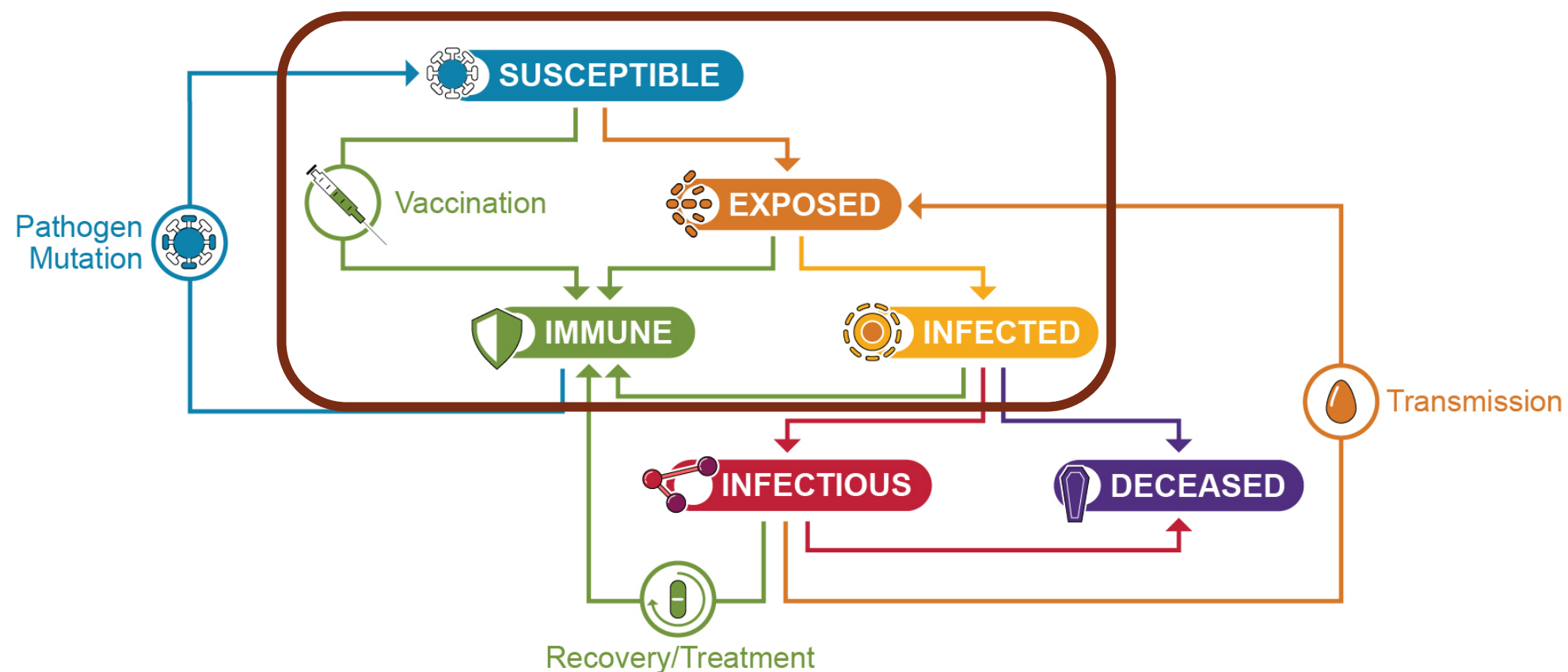


Kristin Omberg

Group Leader
Chemical and Biological
Signatures

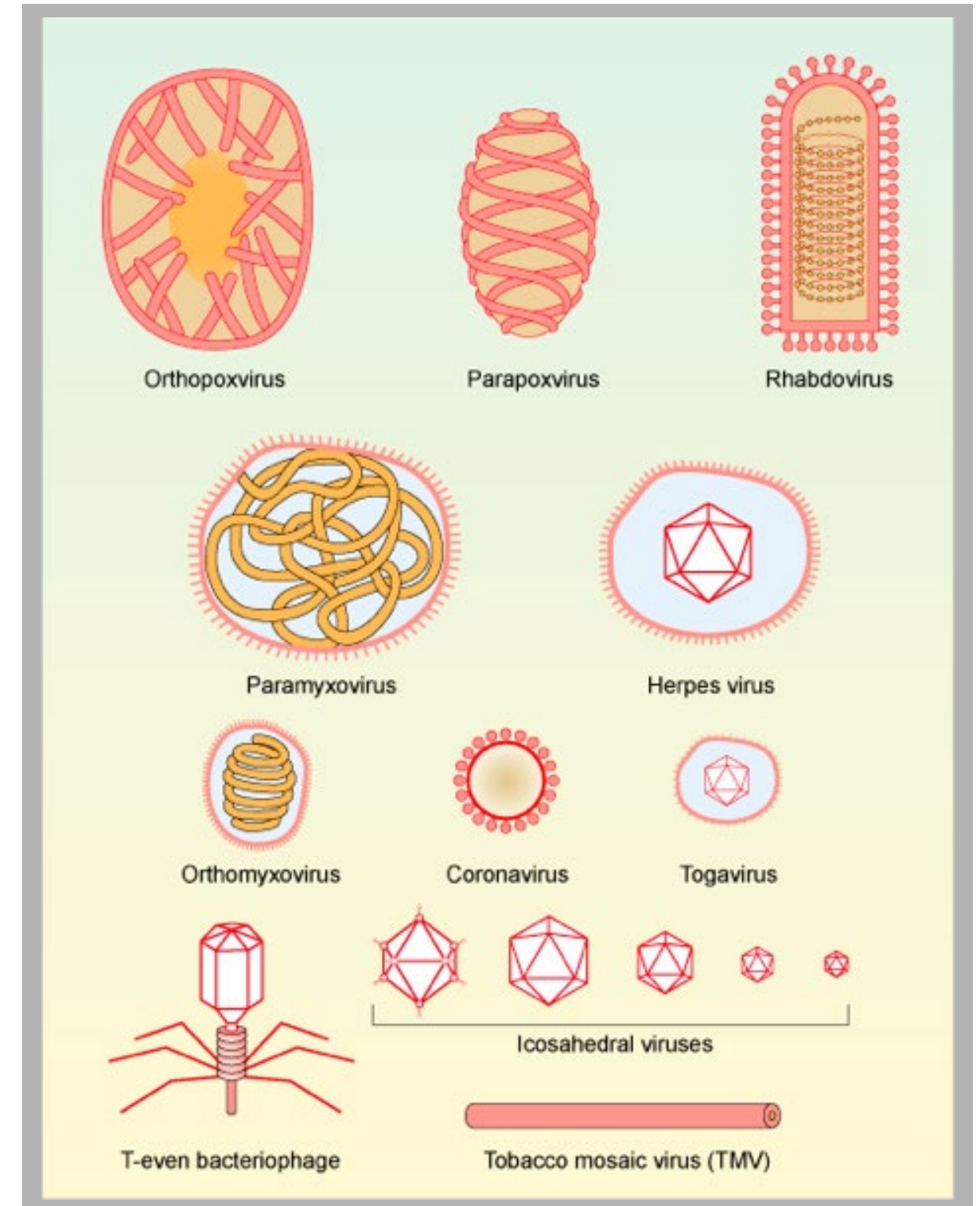
Today's discussion: detection of infection and vaccination

VIRAL INFECTION OVERVIEW



What is a virus?

- Non-living particle of genetic material
- Your immune system recognizes viruses based on proteins on the virus' surface
- Immune system tags viruses with complementary proteins to disable or destroy
- Virus genetic material and proteins are the basis for both testing and vaccination



Terminology

Pandemic

- An outbreak of a disease that is prevalent over a continent or the world

NOTE: An **epidemic** is more localized

Transmission

- Spreading a disease

Mutation

- Changes to the genome of a pathogen or organism that may affect transmission, symptoms, or prior immunity

Infectious/Contagious

- The state of being able to transmit a disease to another person

Vaccine

- A preventative measure to build immunity against a specific disease

Model

- A representation of a disease or process that can recapitulate key aspects

Reservoir

- Any person, animal, plant, soil, or substance in which an infectious agent normally multiplies

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The Food & Drug Administration has approved 41 tests for influenza. About how many are currently authorized for COVID-19?

10
40
190
340

Talk overview

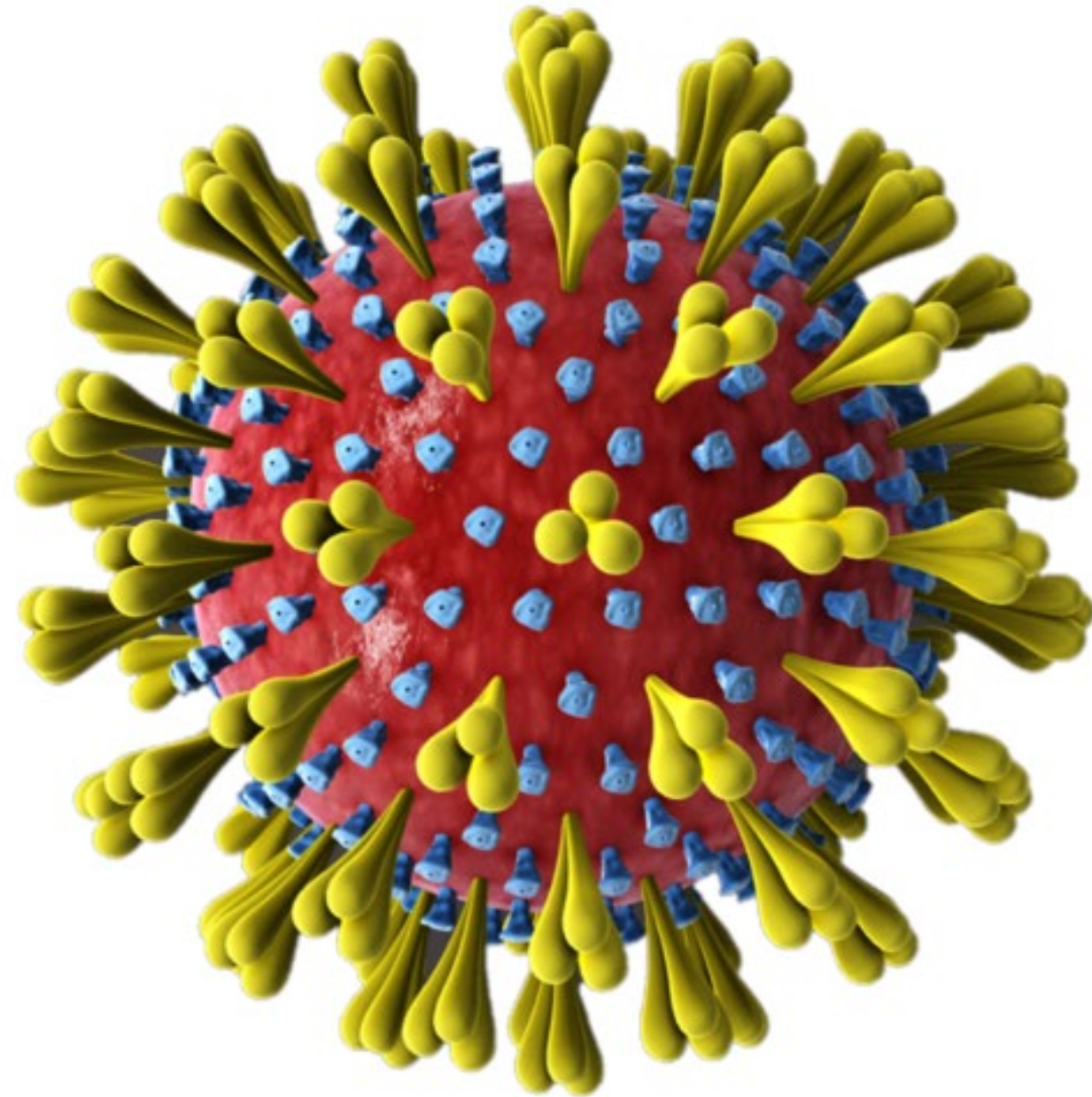
- Components of the coronavirus
- Common testing methods
 - Diagnostic tests
 - Immunoassay tests
 - Home tests
 - Why swab? Or, can't I just spit?
- COVID-19 vaccines
 - The four types of vaccines
 - What about the variants?
- Where do we go from here?

Talk overview

- **Components of the coronavirus**
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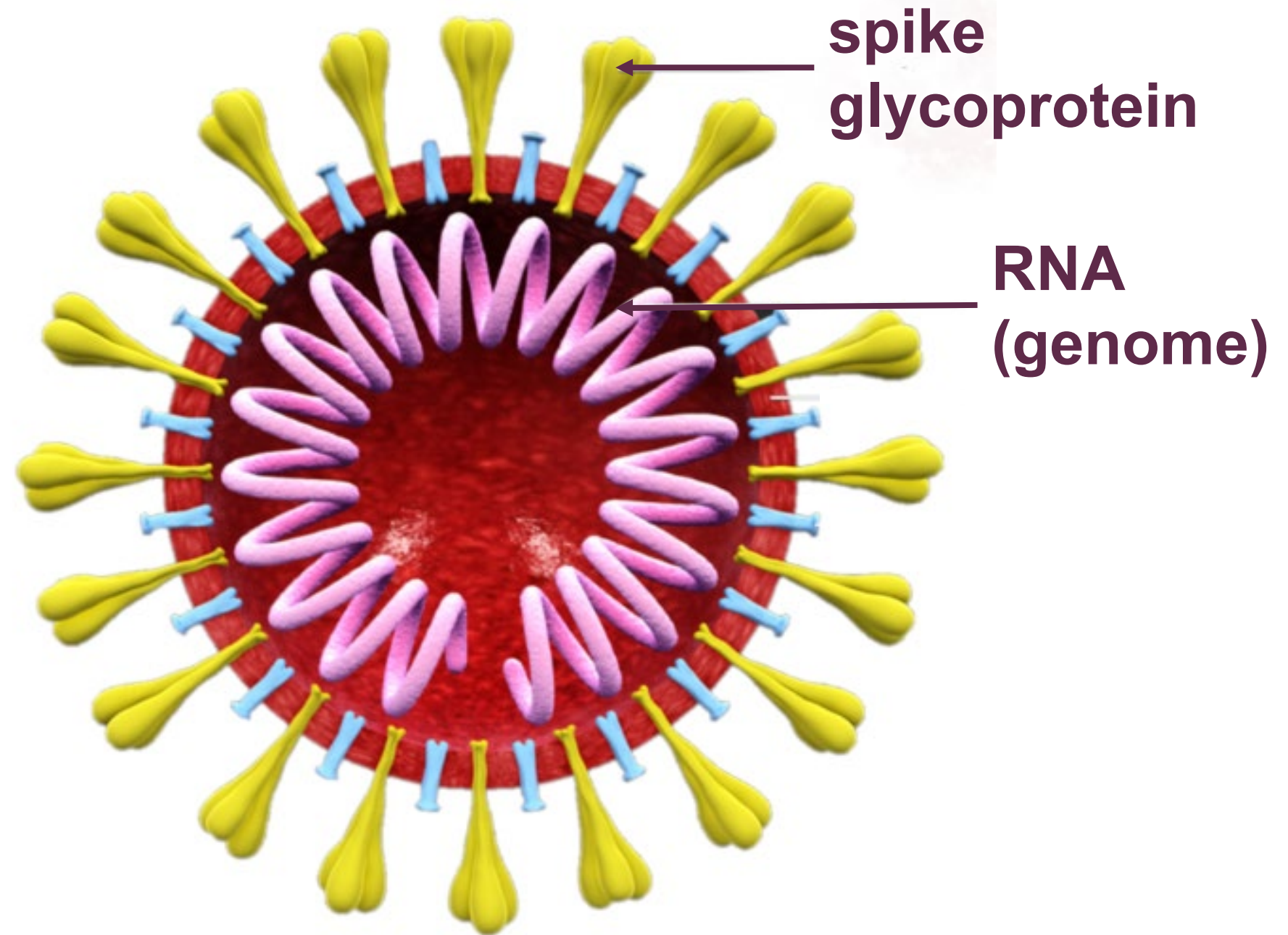
Components of the coronavirus

- Coronaviruses are enveloped, single-stranded RNA viruses



Components of the coronavirus

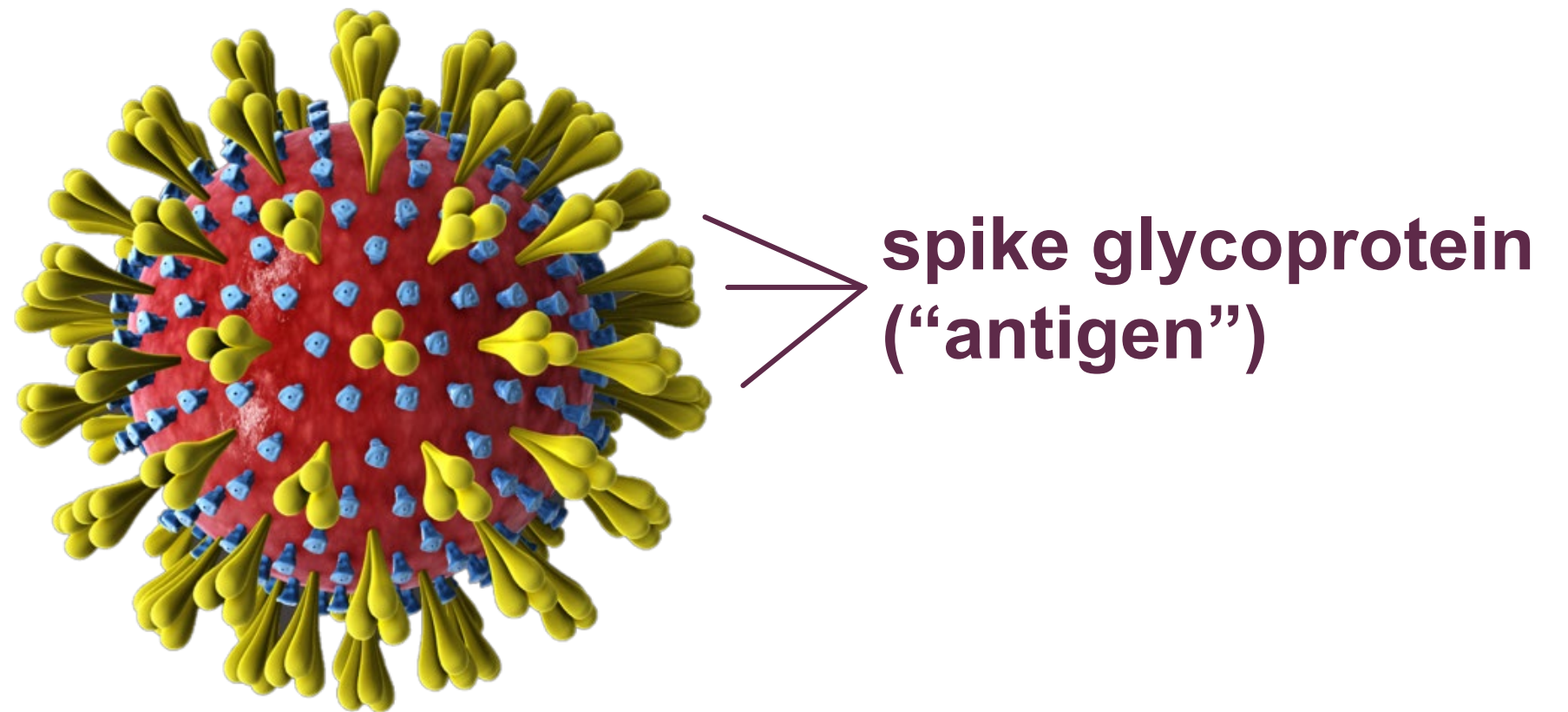
- Spike protein (S) helps the virus get its RNA into human cells so it can replicate
- Diagnostic tests detect either S or the RNA



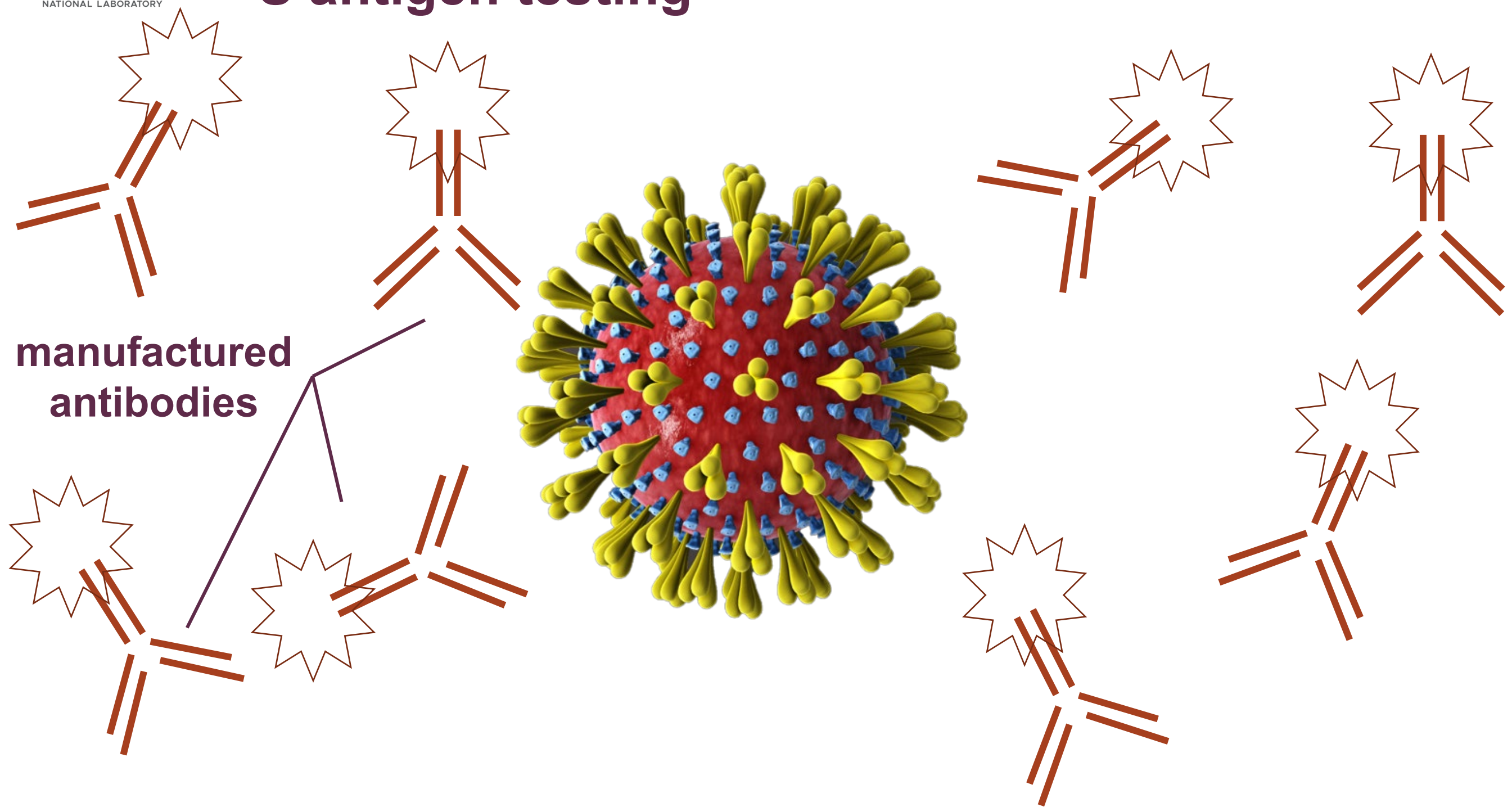
Talk overview

- Components of the coronavirus
- **Common testing methods**
 - **Diagnostic tests**
 - **Immunoassay tests**
 - **Home tests**
 - **Why swab? Or, can't I just spit?**
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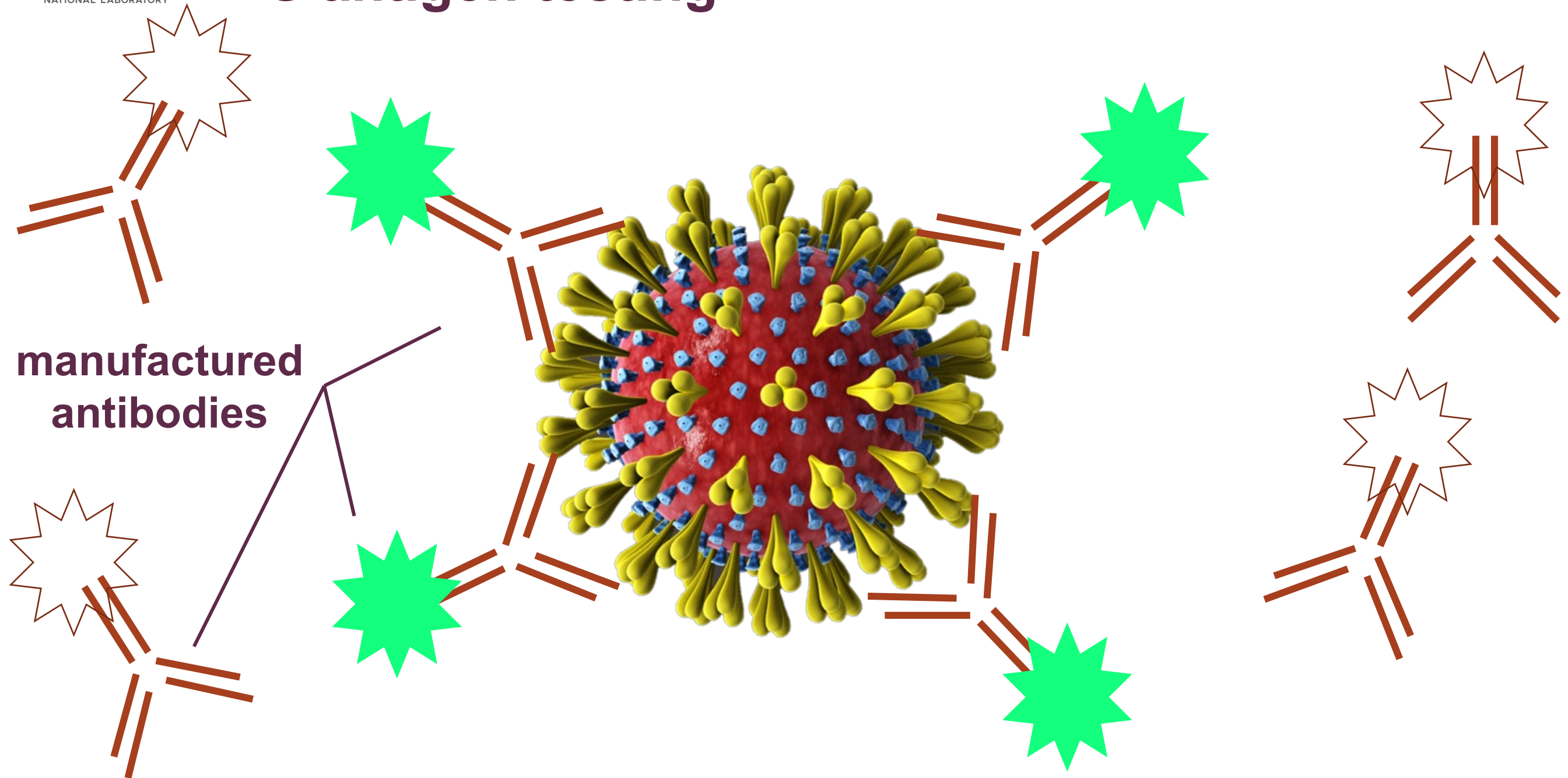
Most rapid/point-of-care tests detect S antigen



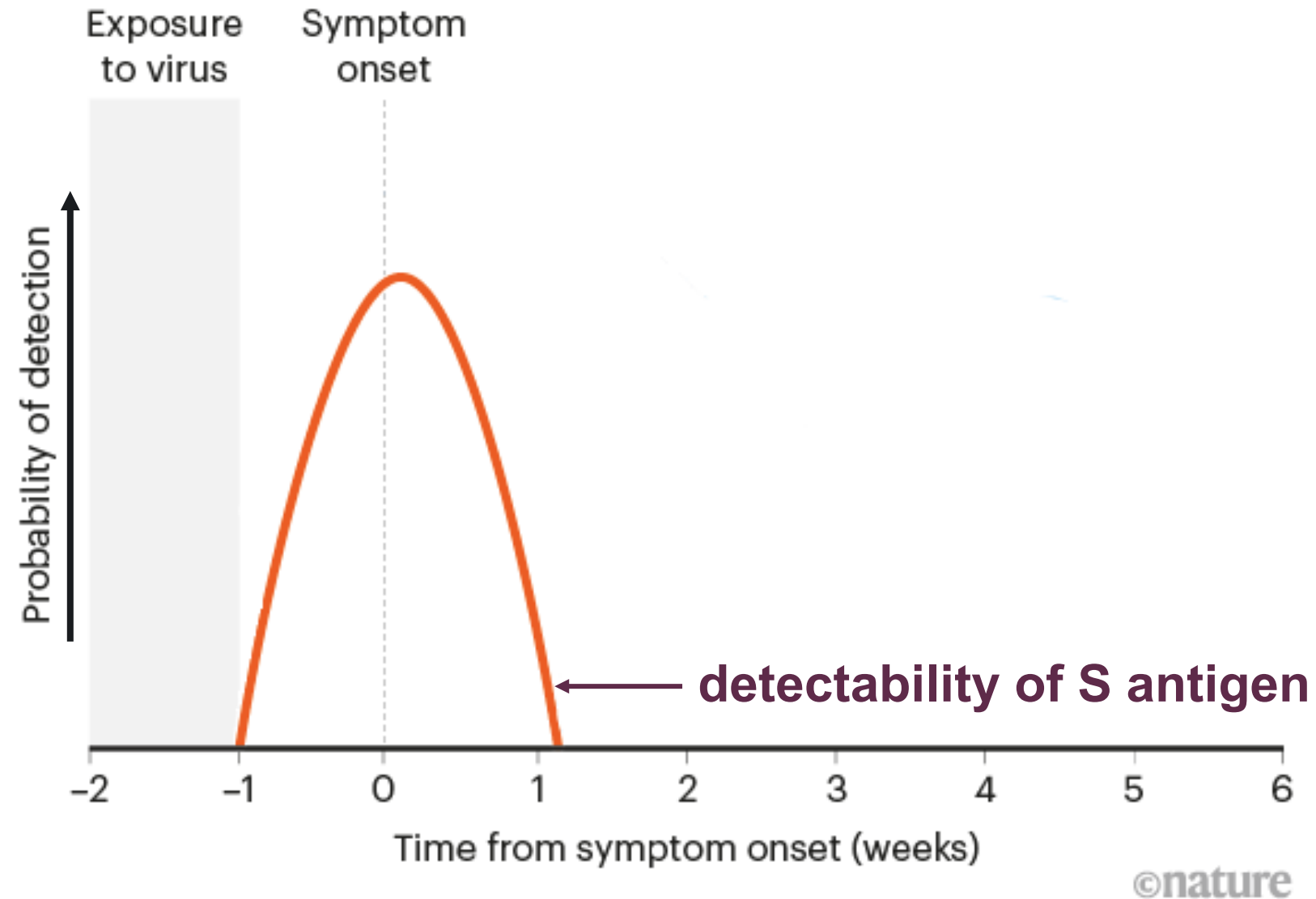
S antigen testing



S antigen testing



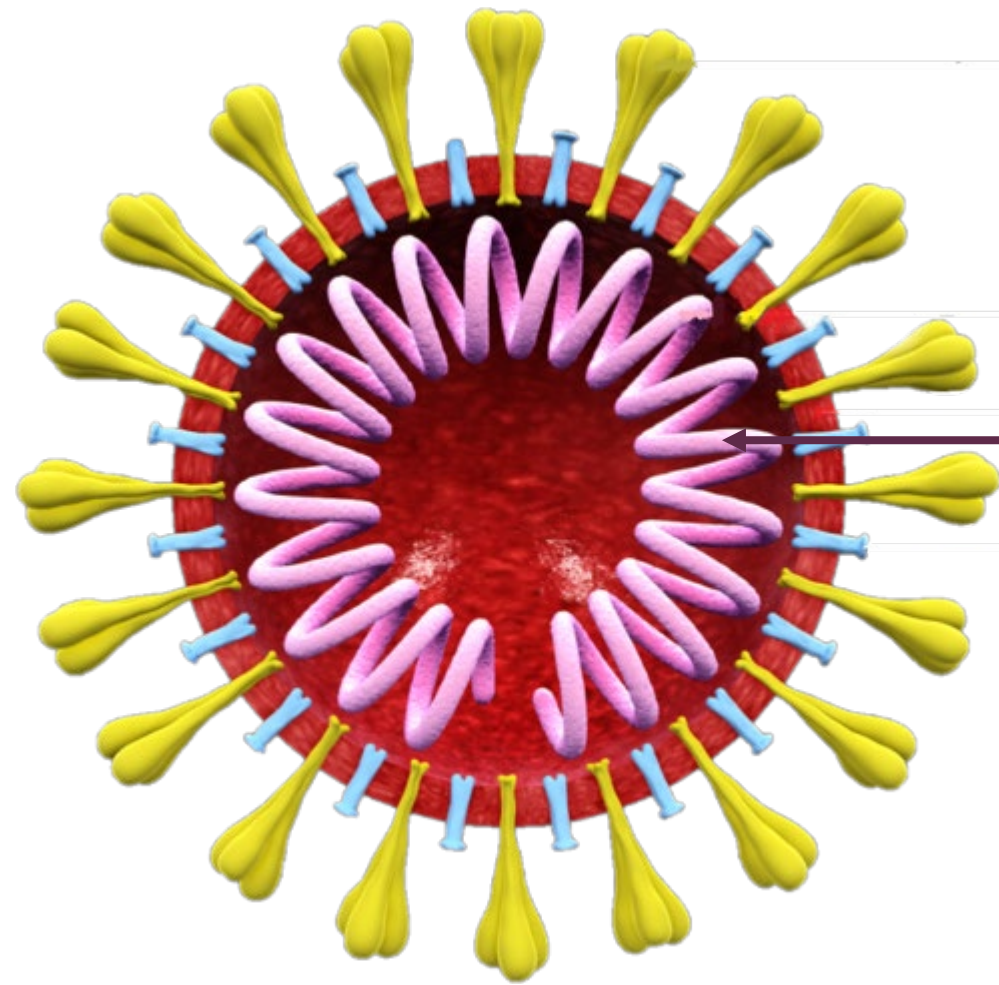
S antigen can be detected just before symptoms start and up to a week after



S antigen diagnostic tests

- Benefits
 - Can be run in a doctor's office
 - 15 minutes from swab to result
 - Positive result indicates current infection
- Drawbacks
 - Relatively insensitive
 - ✓ Infected people may still receive negative results
 - Narrow window of detection
 - ✓ Unlikely to detect pre- or late-symptomatic people

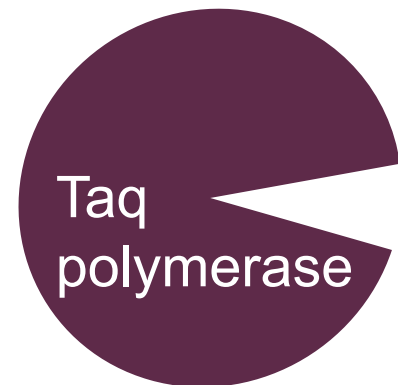
Most laboratory-based tests detect RNA



**RNA (ribonucleic acid)
("genome" or "nucleic acid")**

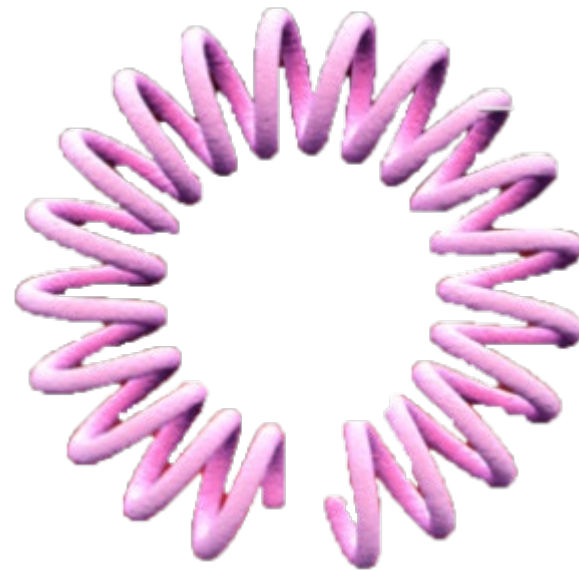
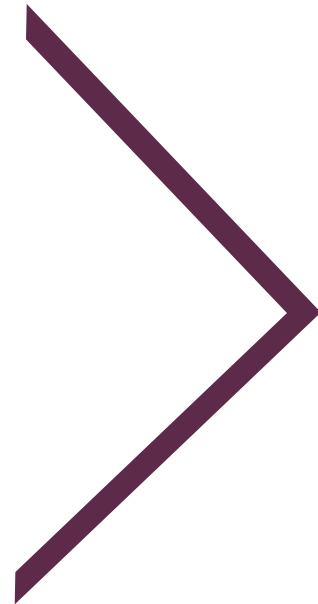
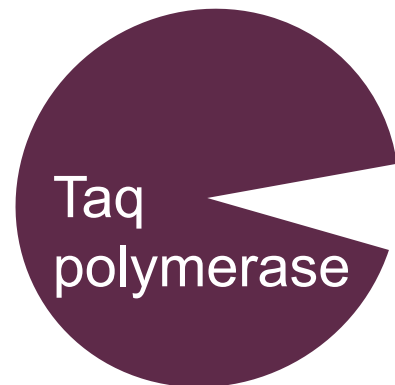


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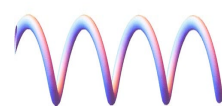




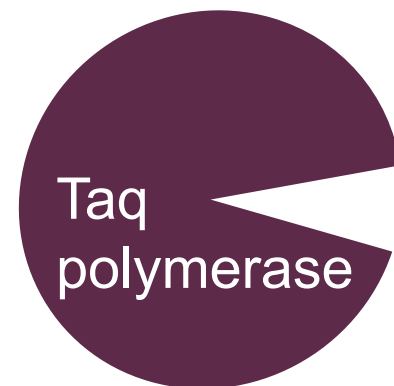
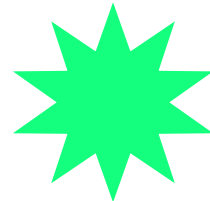
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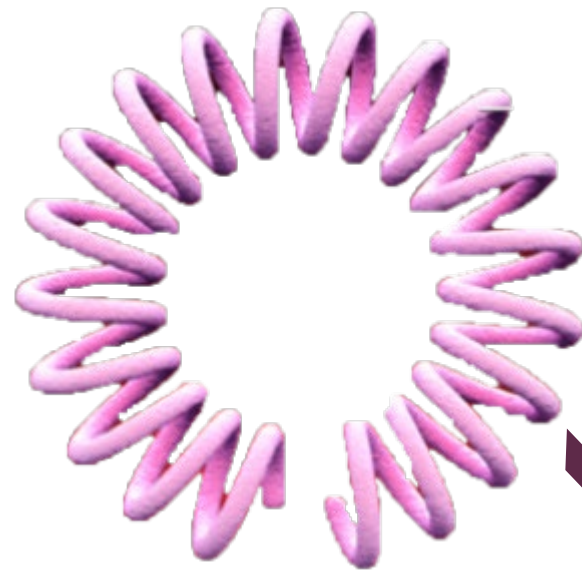
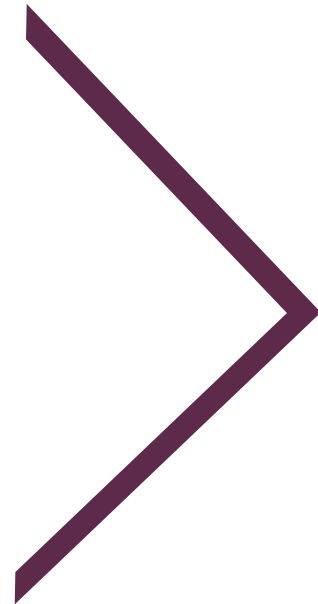
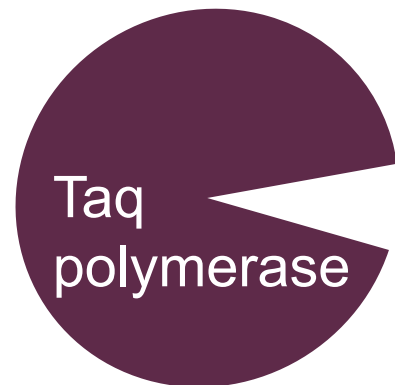


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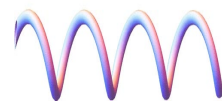




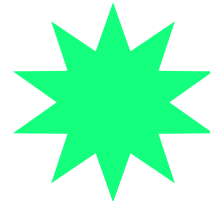
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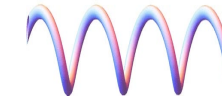
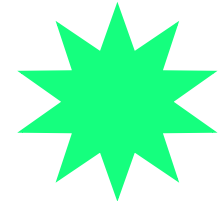
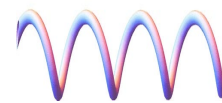
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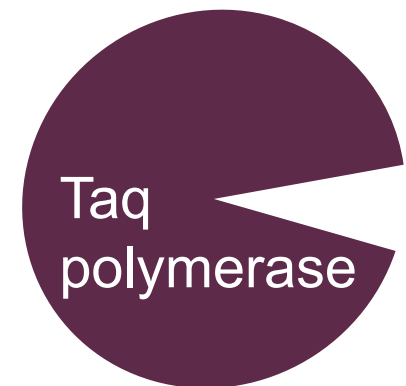
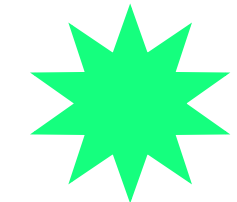
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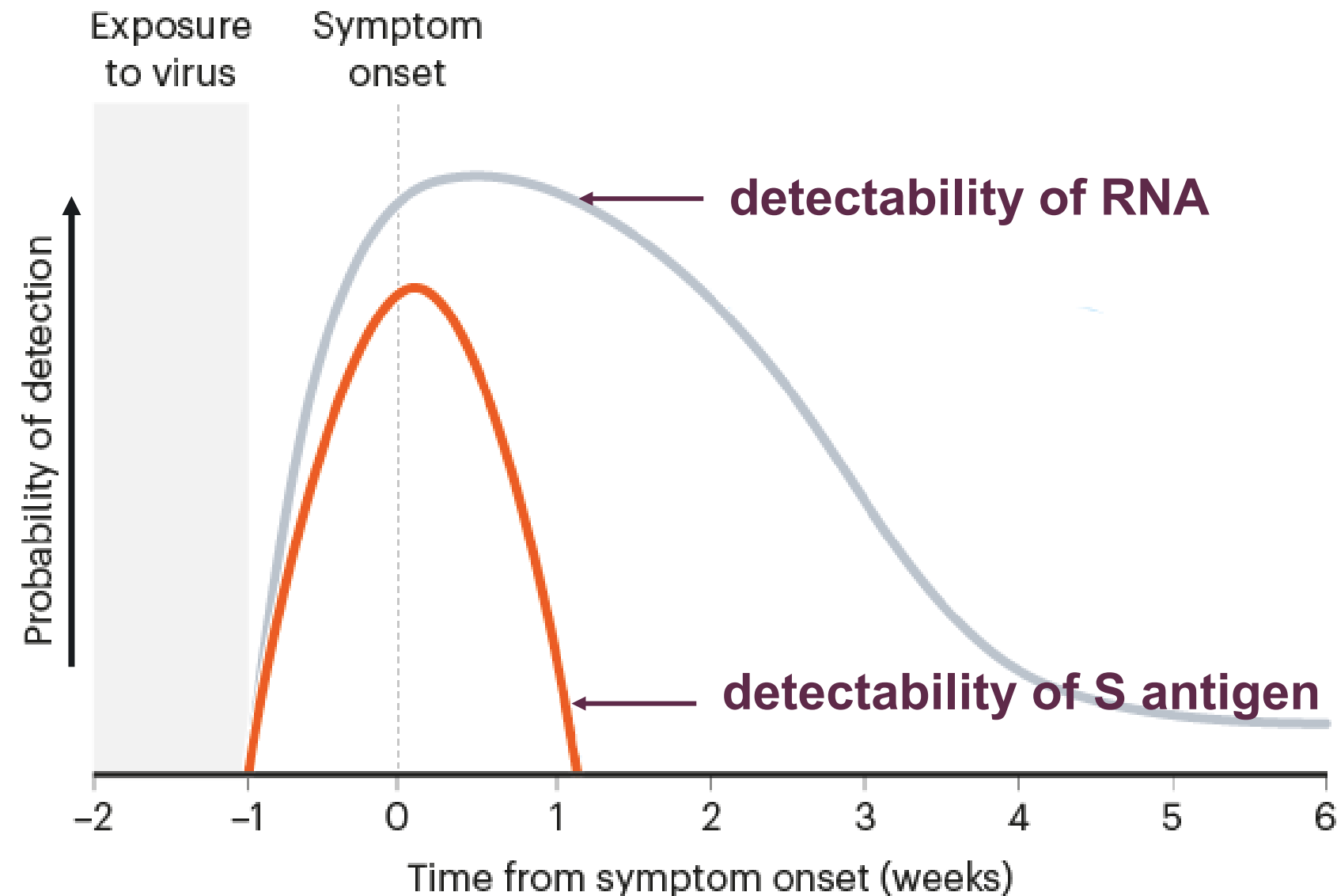
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RNA (nucleic acid) is detectable several days before symptoms start and many weeks after

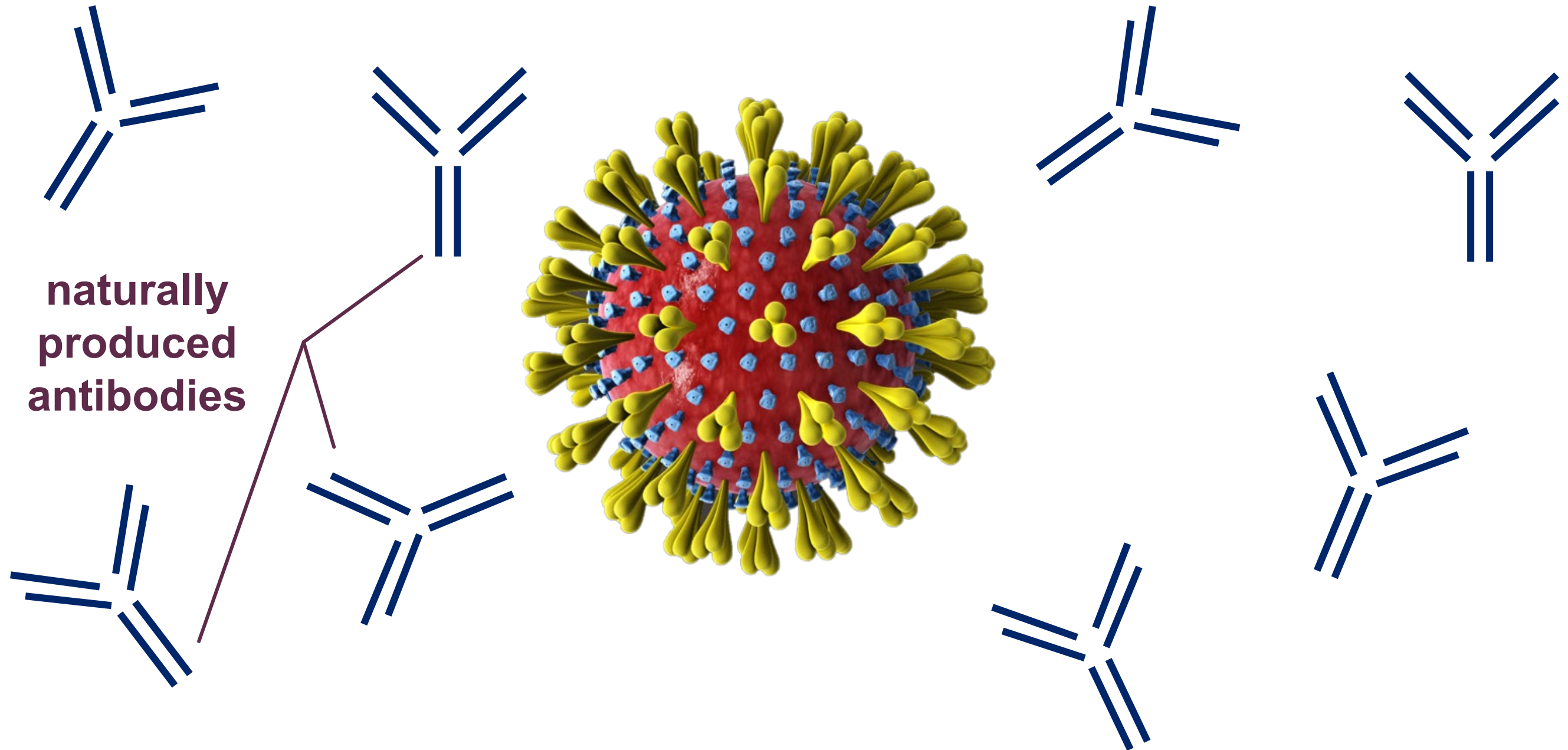


©nature

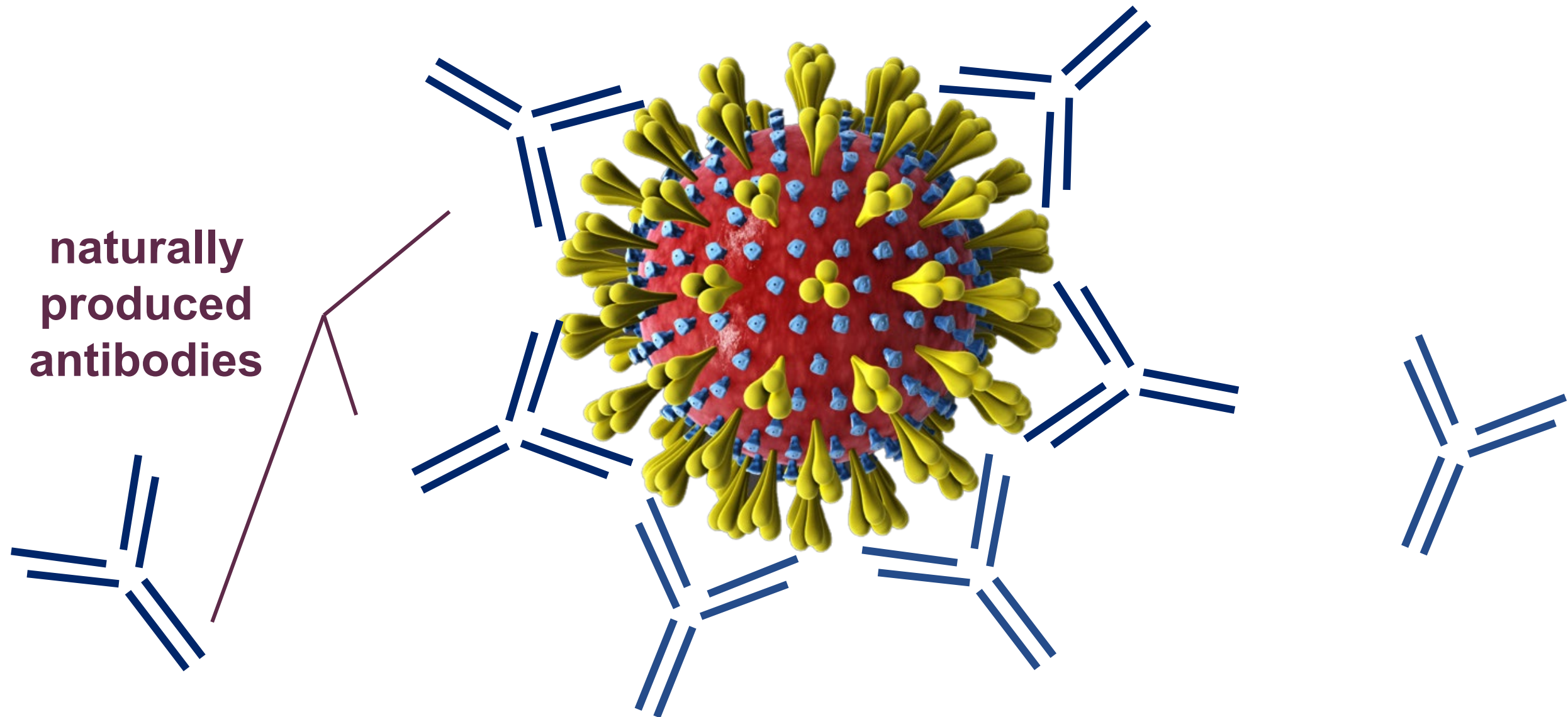
Nucleic acid diagnostic tests

- Also known as “nucleic acid amplification tests” (NAAT) or polymerase chain reaction (PCR)
- Benefits
 - Gold standard of diagnostic tests
 - Extremely sensitive
 - Extremely specific; unlikely to detect anything other than the 2019 strain
 - May identify people who are infected but pre-symptomatic
- Drawbacks
 - Usually takes 4–6 hours in a laboratory to get results
 - Results indicate current or recent infection
 - Infected people may test positive for months after symptoms subside

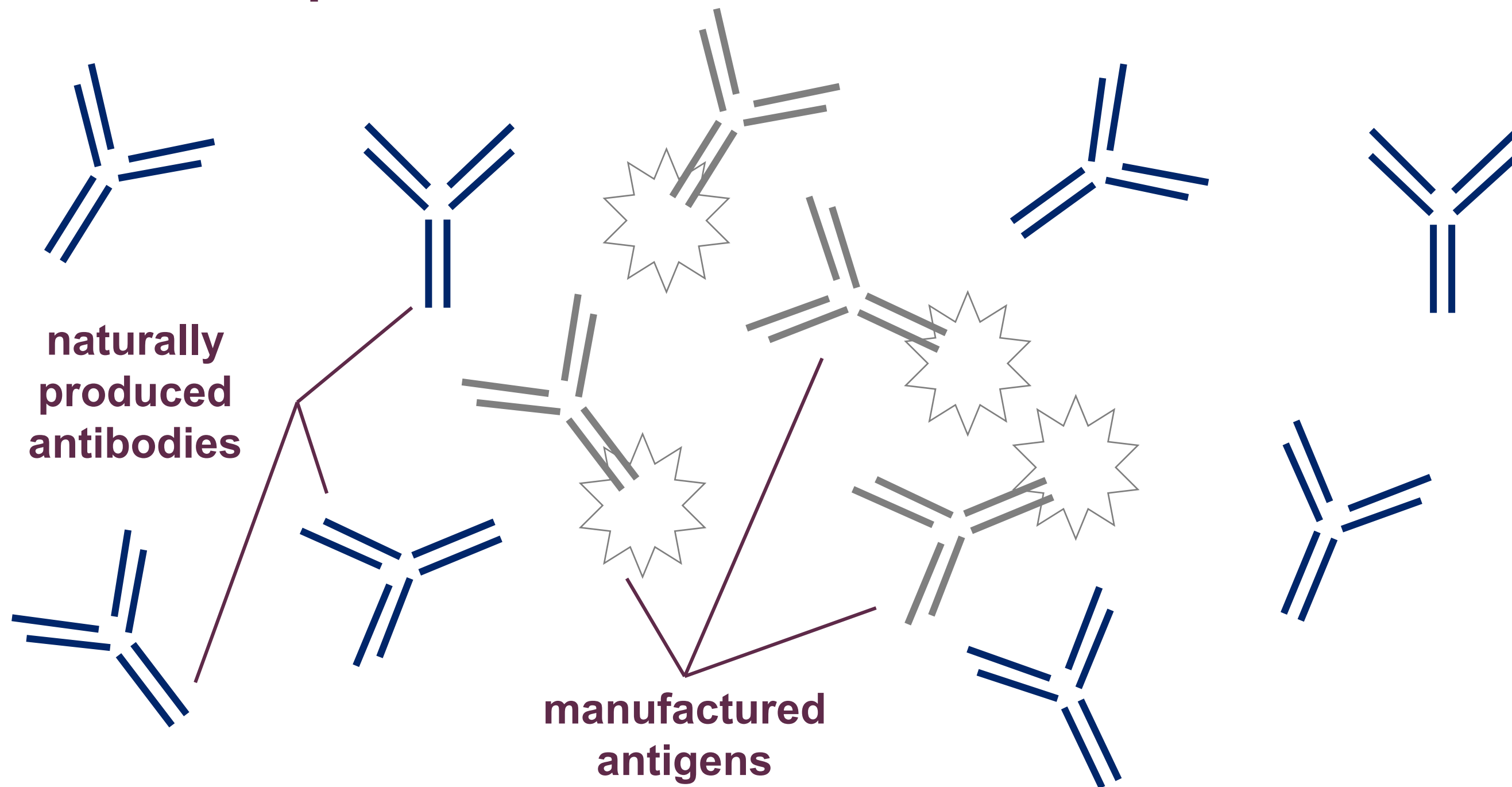
Antibody tests determine whether you were exposed



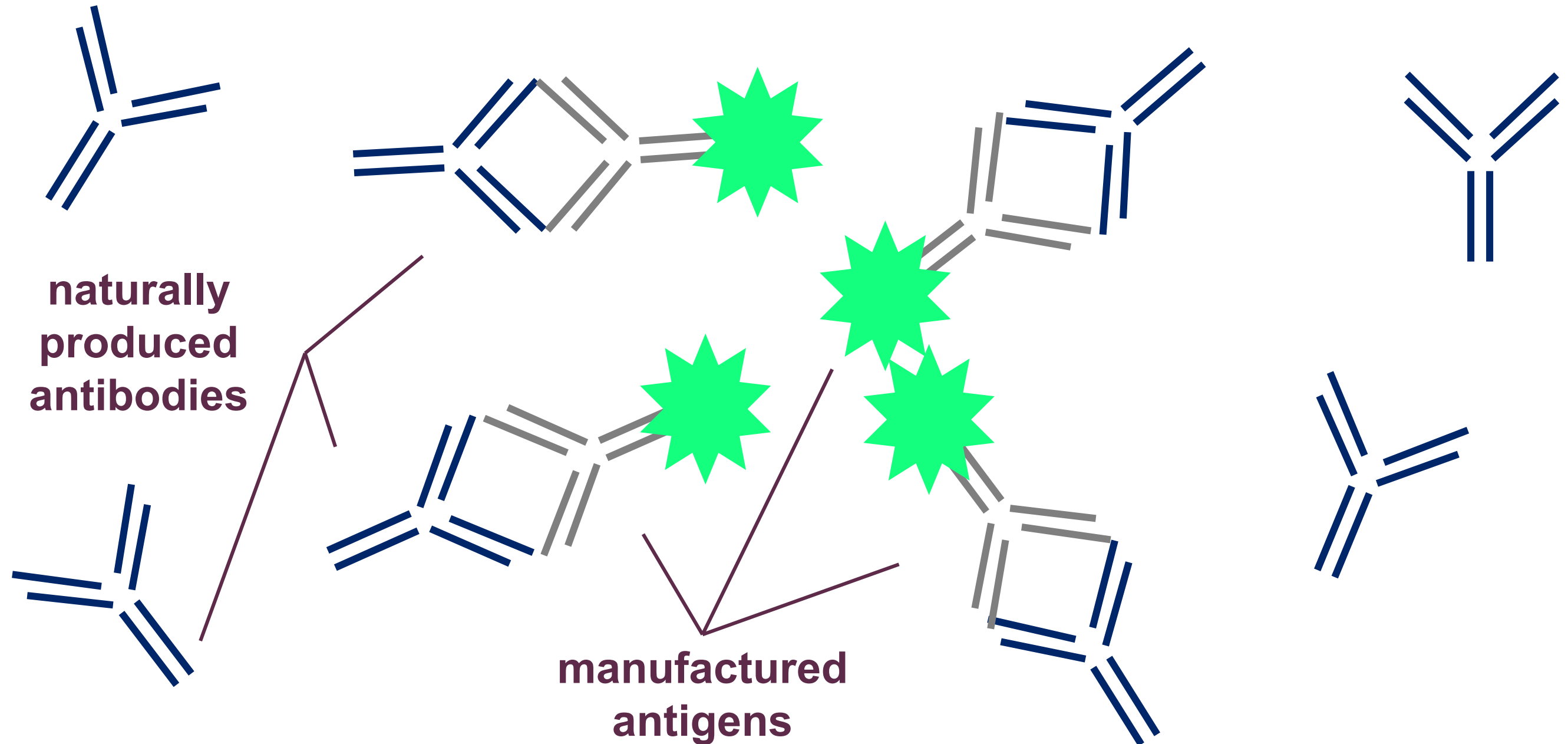
Your immune system makes antibodies to stop a virus from attaching to cells or to destroy it



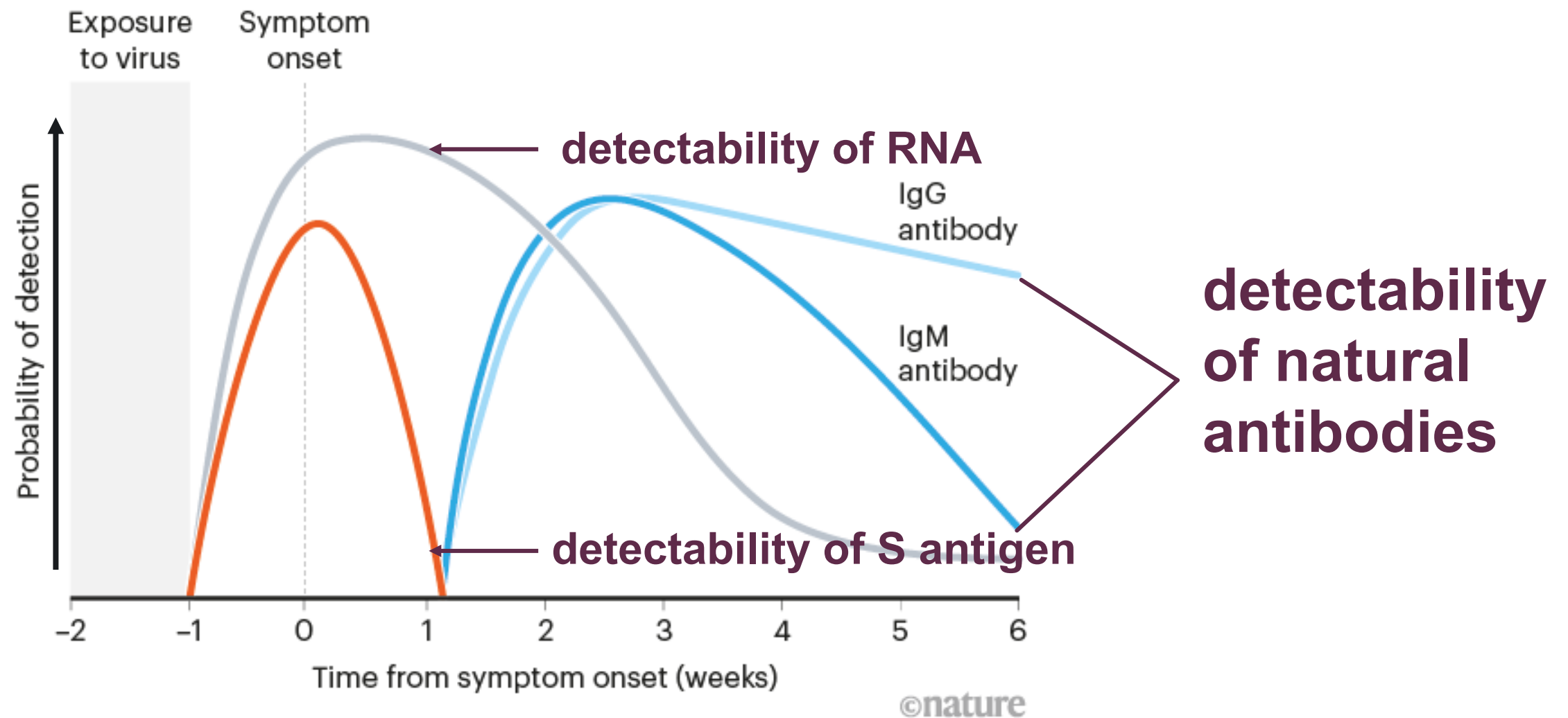
Antibody tests determine whether you were exposed



Antibody tests determine whether you were exposed



Natural antibodies are detectable about a week after symptoms start and decline over time



Immunoassay tests

- Benefits
 - Allows identification of potential plasma donors to help treat patients fighting infection
 - May provide retrospective information on the presence of disease in a community
- Drawbacks
 - Not likely to detect infectious people
 - Not very sensitive, which can lead to false negative results
 - Prone to detect antibodies from other, milder human coronaviruses (cross-reactivity), can lead to false positive results

Home tests

- FDA has authorized about 10 home diagnostic tests
- All are molecular (nucleic acid) tests

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About 70 COVID-19 antibody tests are currently authorized for use in the U.S. How many antibody tests has the FDA removed from the U.S. market?

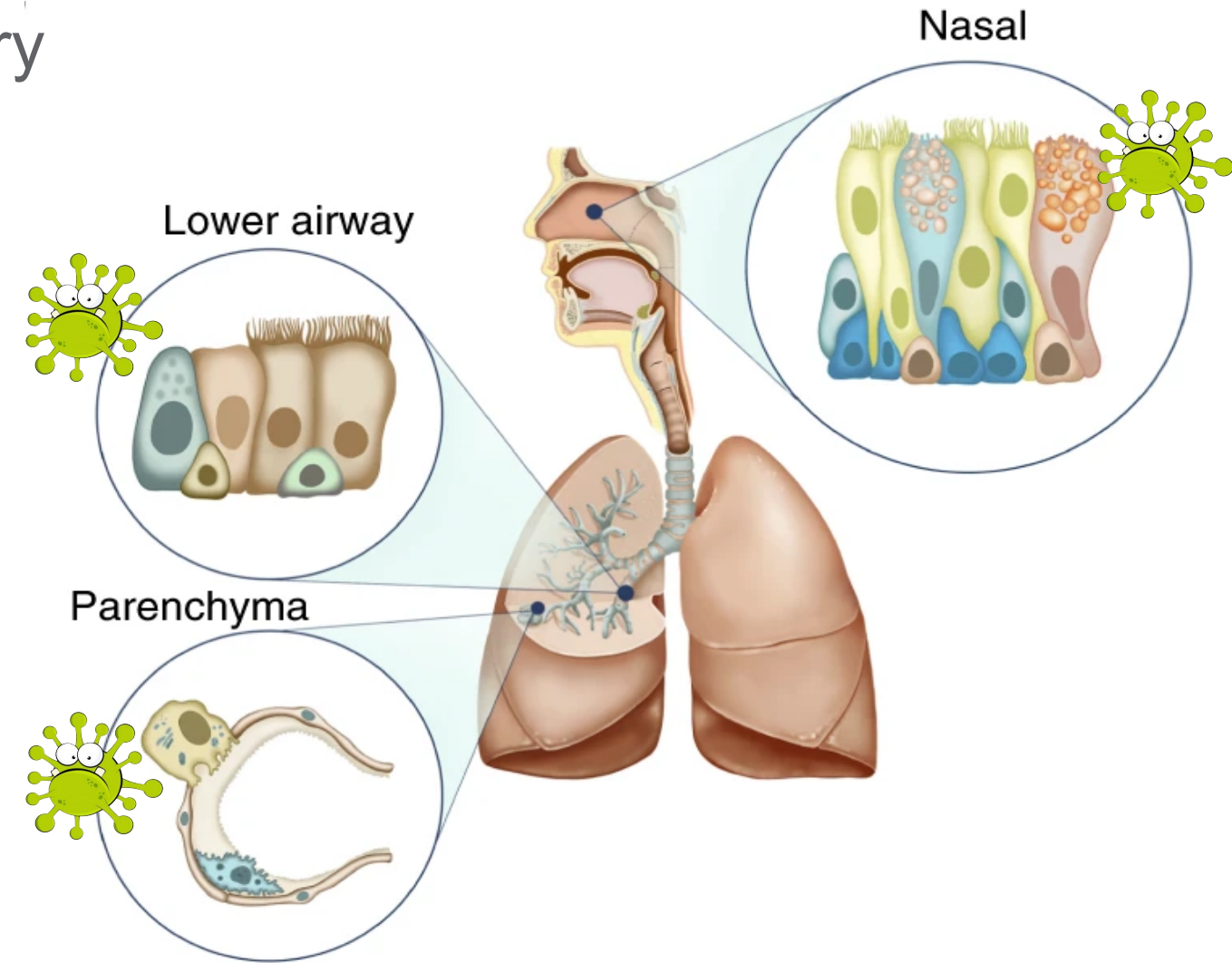
5
50
250
500

Summary of common test methods

Antigen diagnostic tests	Molecular diagnostic tests (NAAT, PCR)	Immunoassay tests
<ul style="list-style-type: none"> • Detects current infections • Unlikely to detect pre- or late-symptomatic infections 	<ul style="list-style-type: none"> • Gold standard to detect current infections • Can identify pre- and late-symptomatic infections 	<ul style="list-style-type: none"> • Identifies previous infections
<ul style="list-style-type: none"> • Relatively insensitive • Infected people may still test negative 	<ul style="list-style-type: none"> • Extremely sensitive • Infected people may test positive for months after symptoms subside 	<ul style="list-style-type: none"> • Prone to false positive and negative results
<ul style="list-style-type: none"> • Takes about 15 minutes in a doctor's office 	<ul style="list-style-type: none"> • Takes 4–6 hours in a lab 	<ul style="list-style-type: none"> • Takes about 15 minutes in a lab
<ul style="list-style-type: none"> • Often used in settings where tests are repeated frequently 	<ul style="list-style-type: none"> • All authorized home tests are molecular 	

Why swab?

- SARS-CoV-2 replicates in the respiratory tract
 - Test results are more sensitive from respiratory tract samples (sorry!)
- Can't I just spit?
 - Many common things interfere with molecular diagnostics
 - ✓ Toothpaste, mouthwash
 - ✓ Caffeine
 - ✓ Fruit
 - ✓ Milk
 - ✓ Chocolate
 - Fasting before a saliva test may improve results



Where do we go from here scientifically?

- Defining the correlation between detection and infectiousness
- Making diagnostic tests less expensive, faster, and more convenient
- Increasing specificity and sensitivity so immunoassay tests become reliable and meaningful

Talk overview

- Components of the coronavirus
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 - **The four types of vaccines**
 - **What about the variants?**
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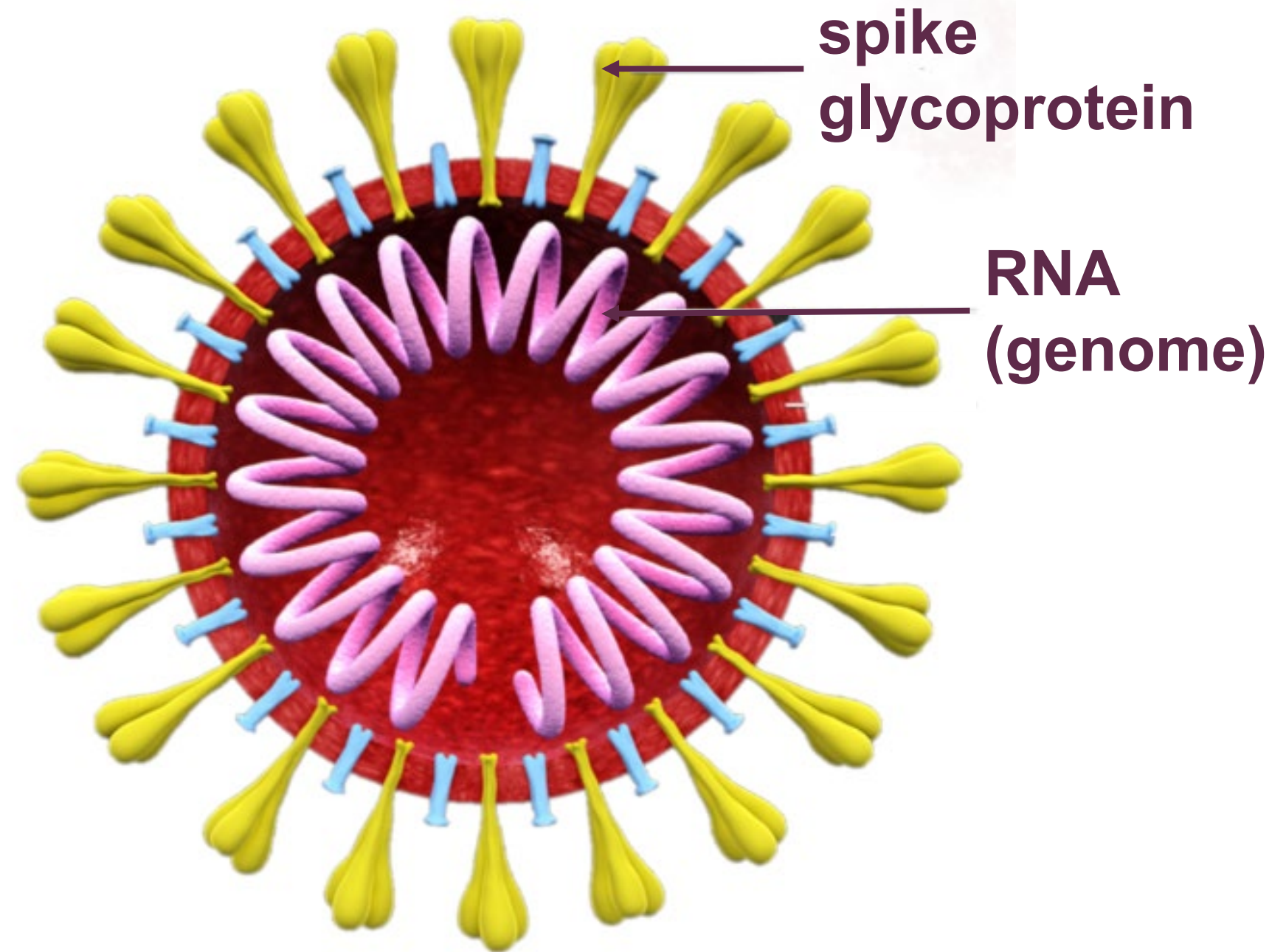
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26 different flu vaccines are available in the U.S. About how many COVID-19 vaccines are available or in development?

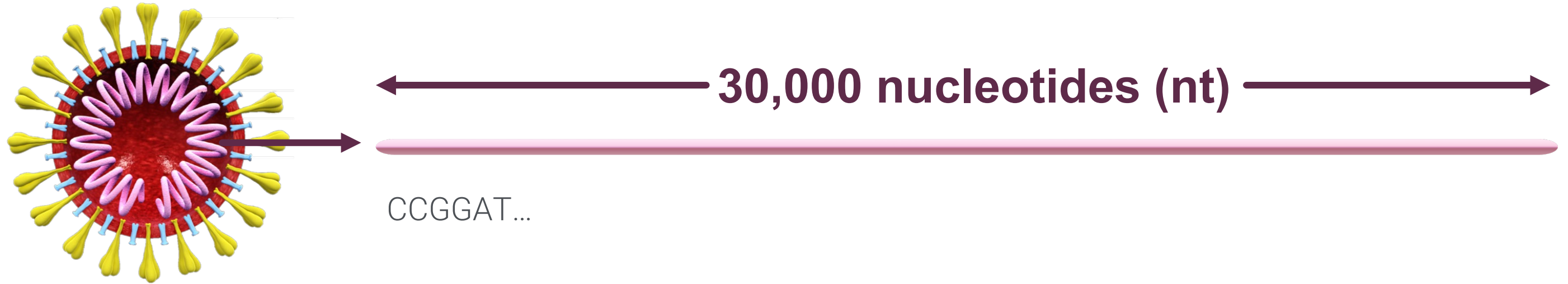
12
57
70
100

Components of the coronavirus

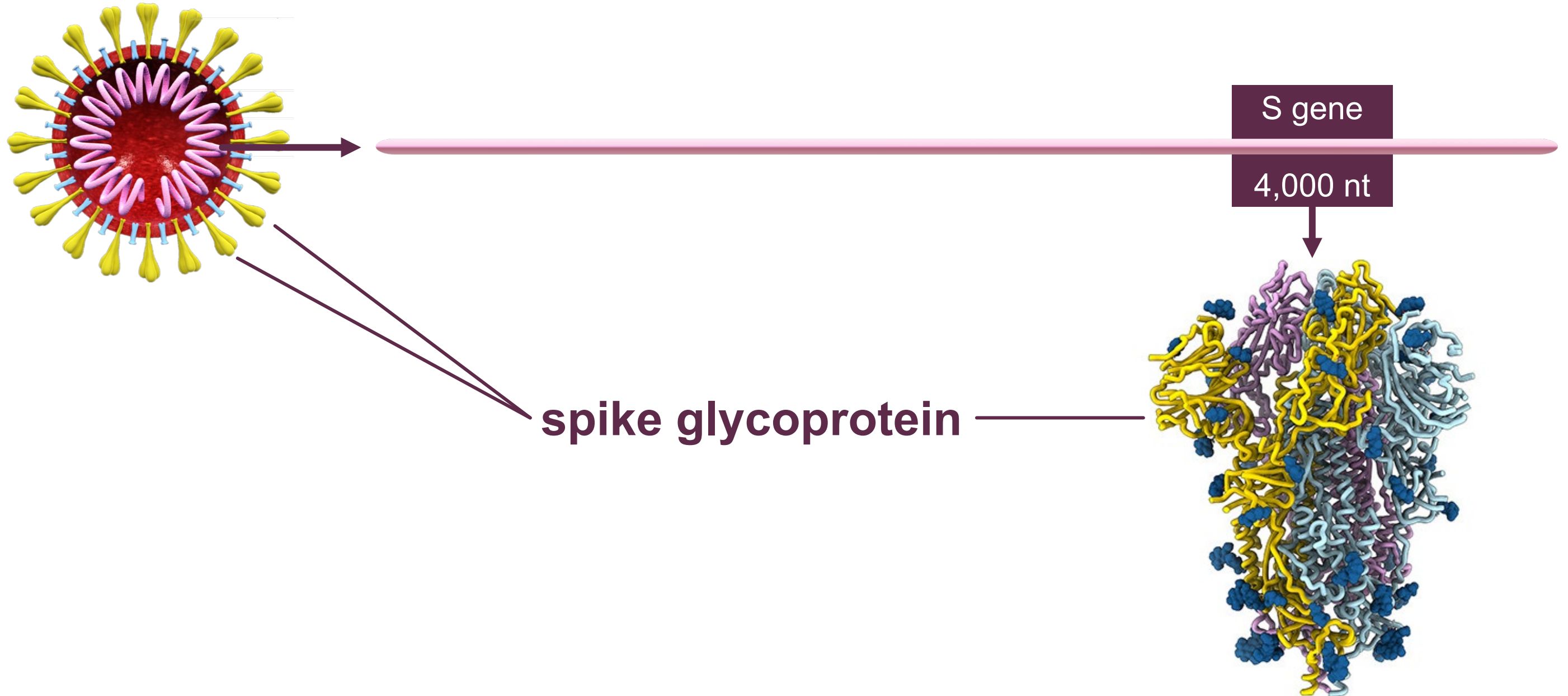
- Spike protein (S) helps the virus get its RNA into human cells so it can replicate
- RNA is a code that tells the cell what to make



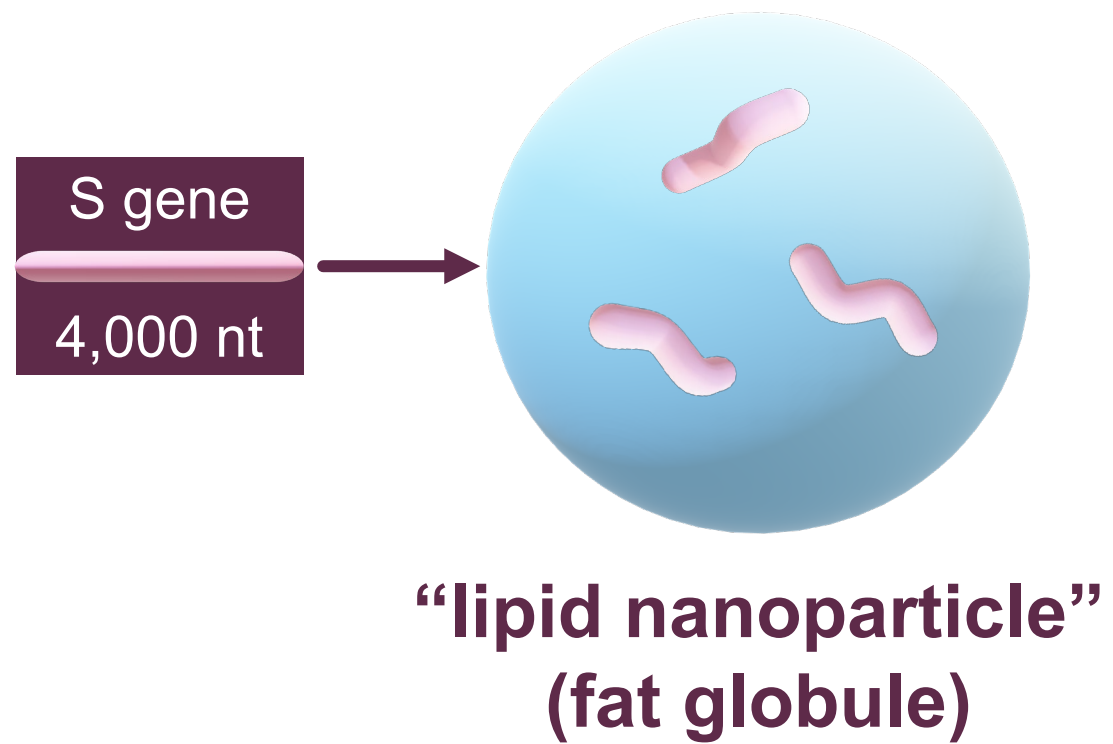
mRNA vaccines



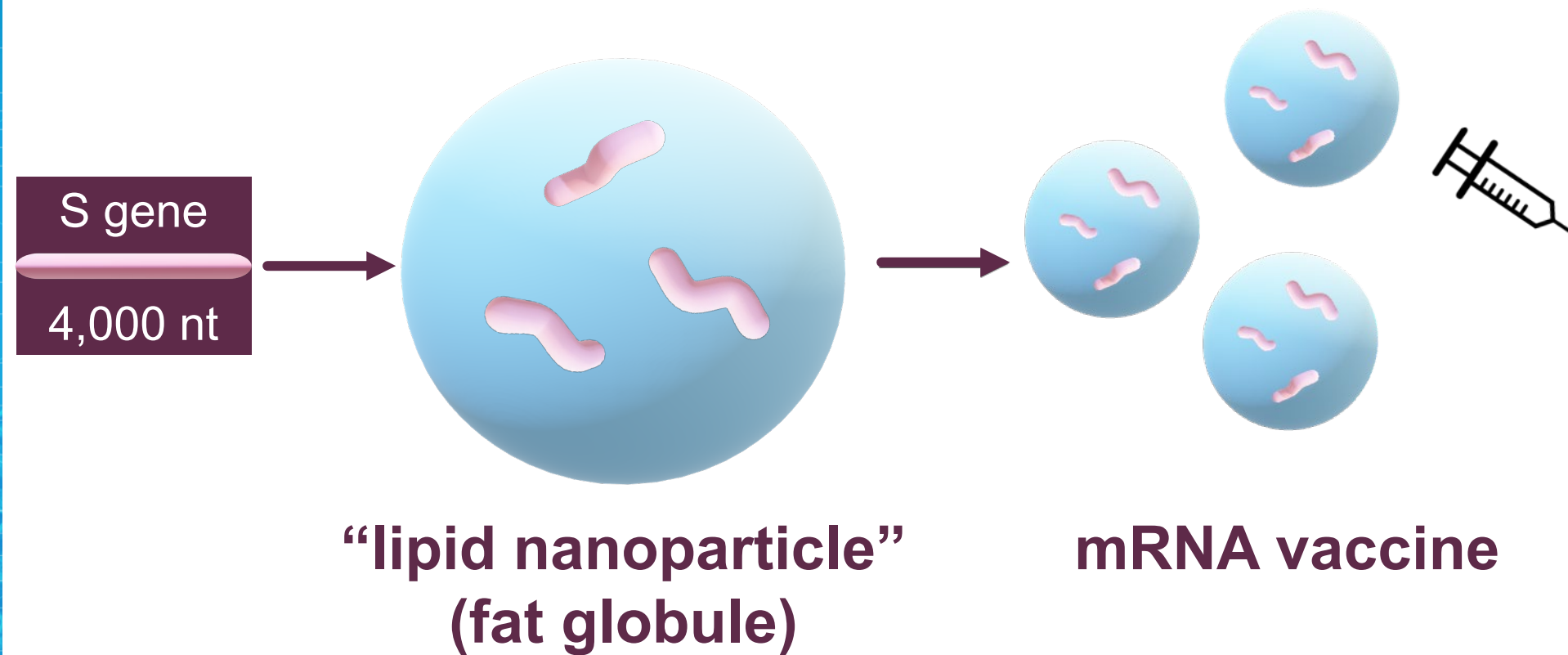
mRNA vaccines



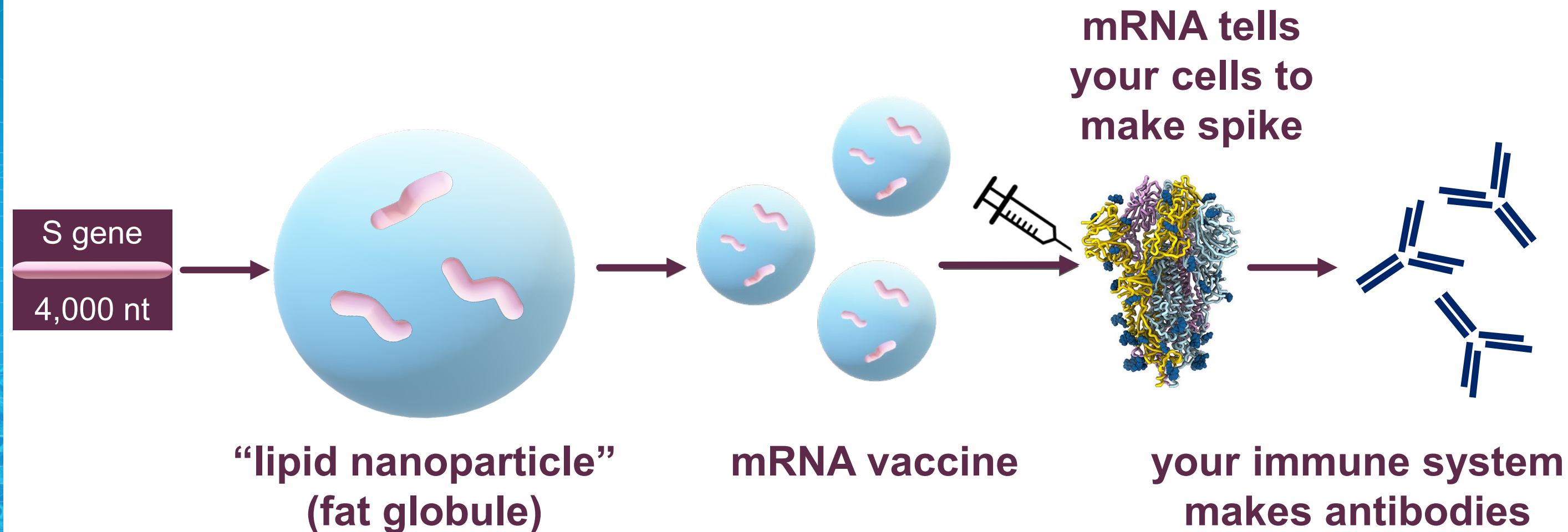
mRNA vaccines



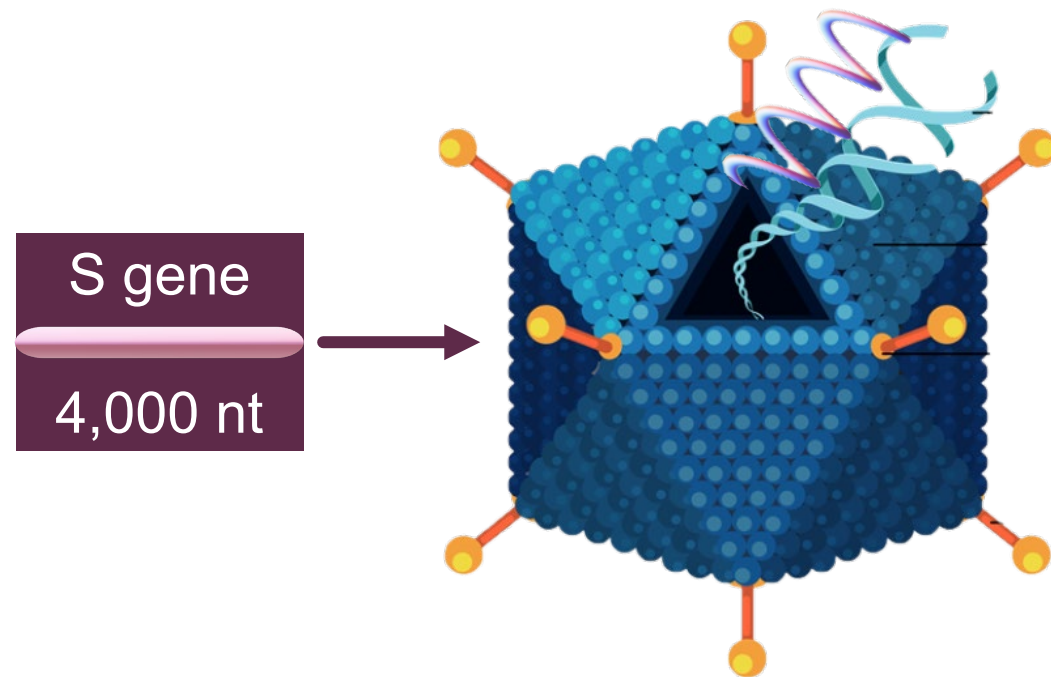
mRNA vaccines



mRNA vaccines

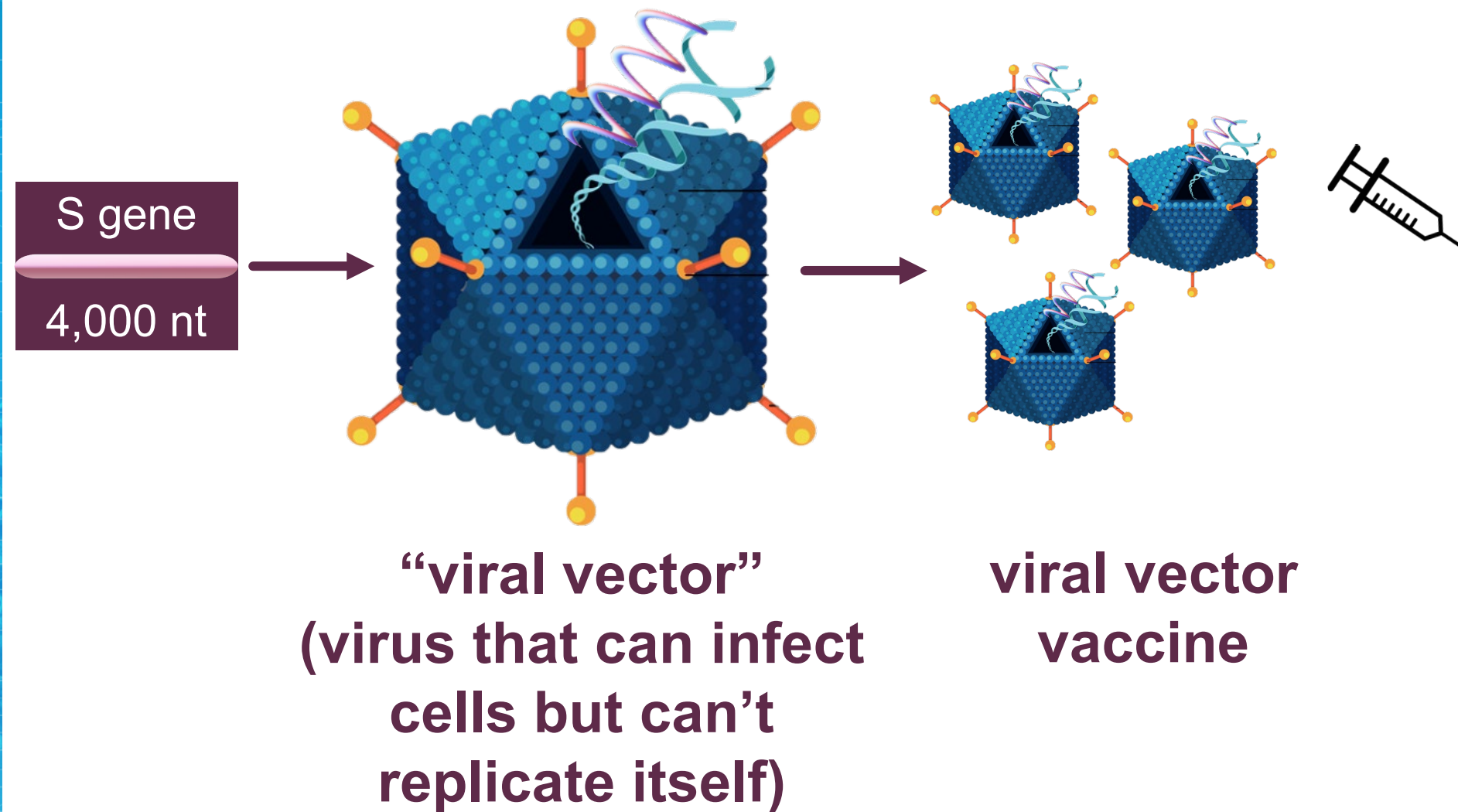


Viral vector vaccines

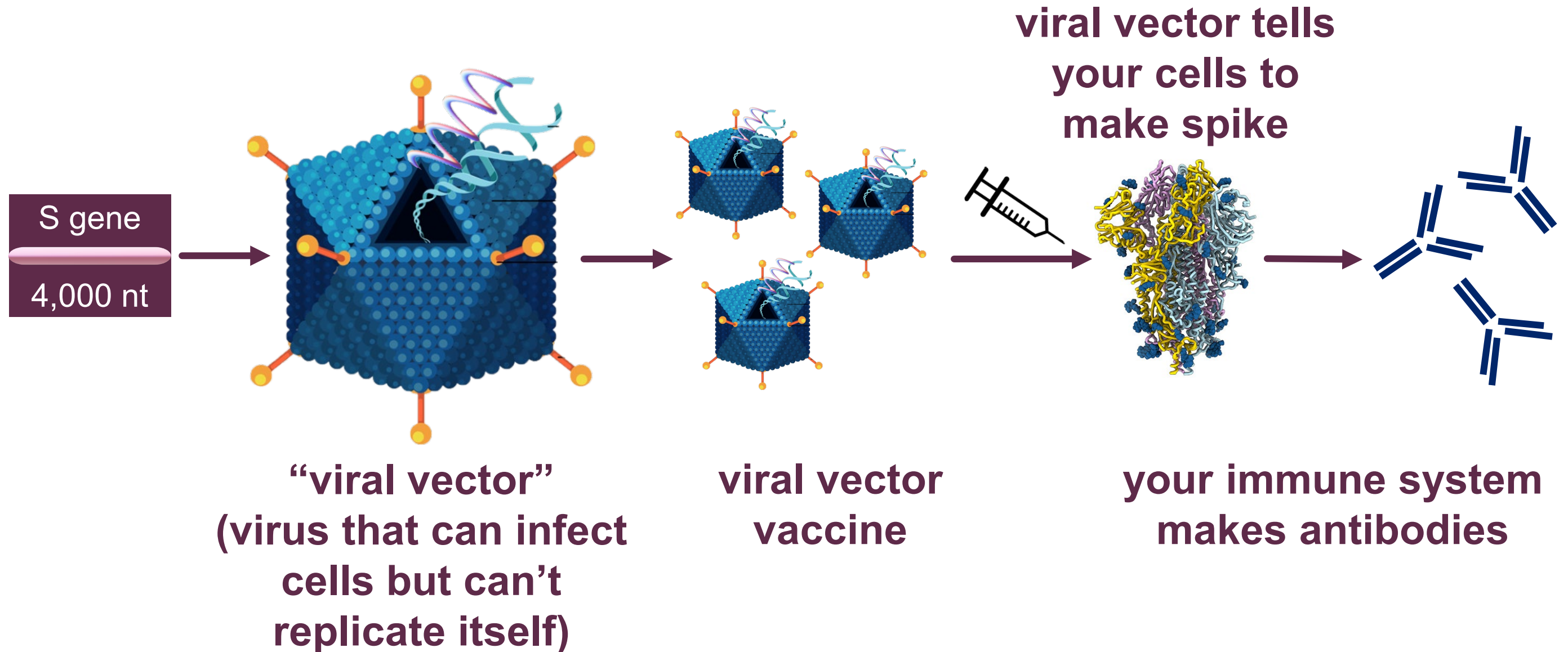


**“viral vector”
(virus that can infect
cells but can’t
replicate itself)**

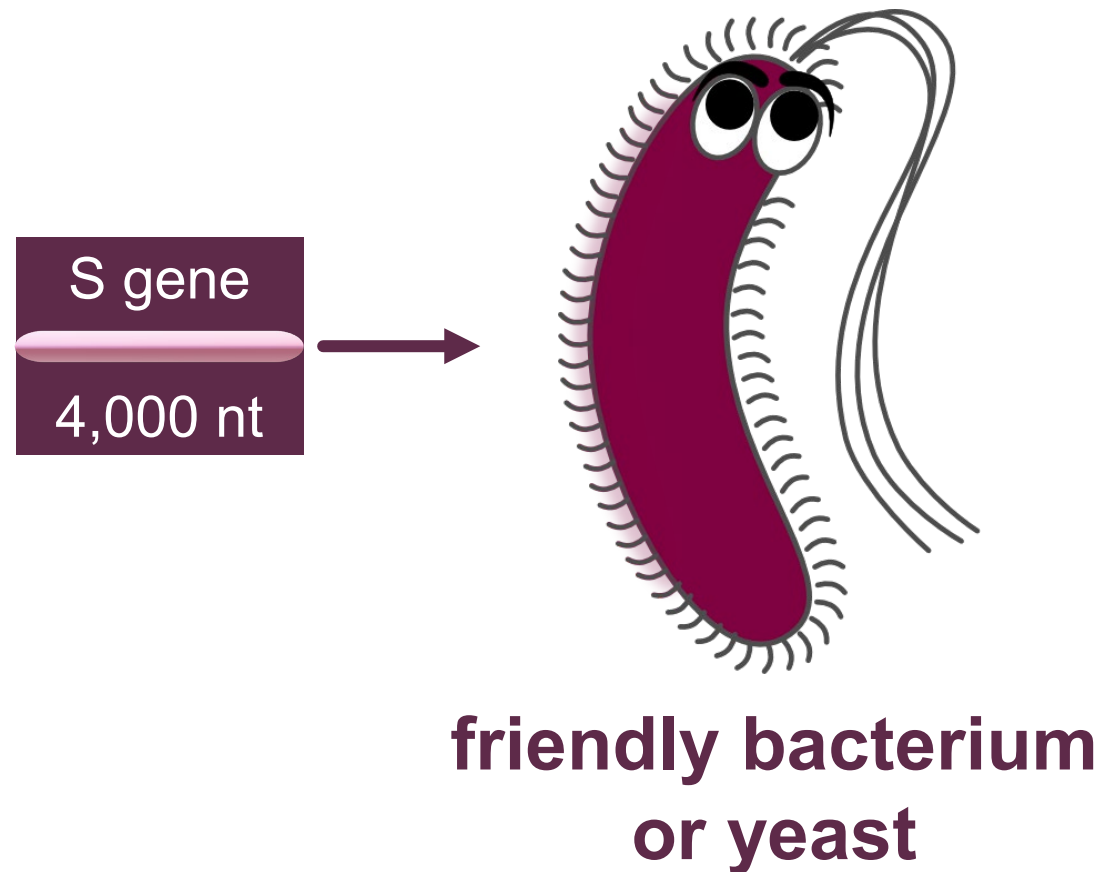
Viral vector vaccines



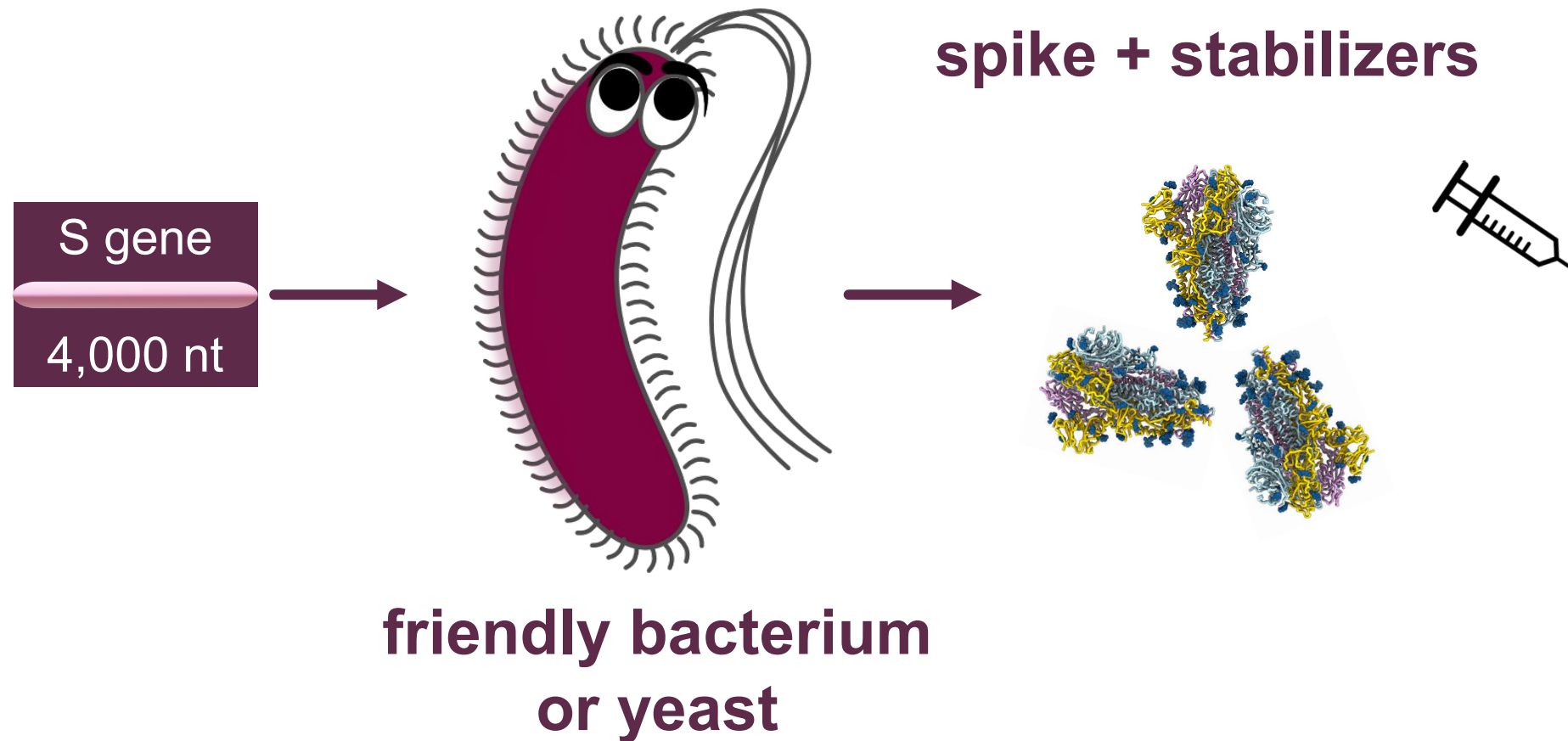
Viral vector vaccines



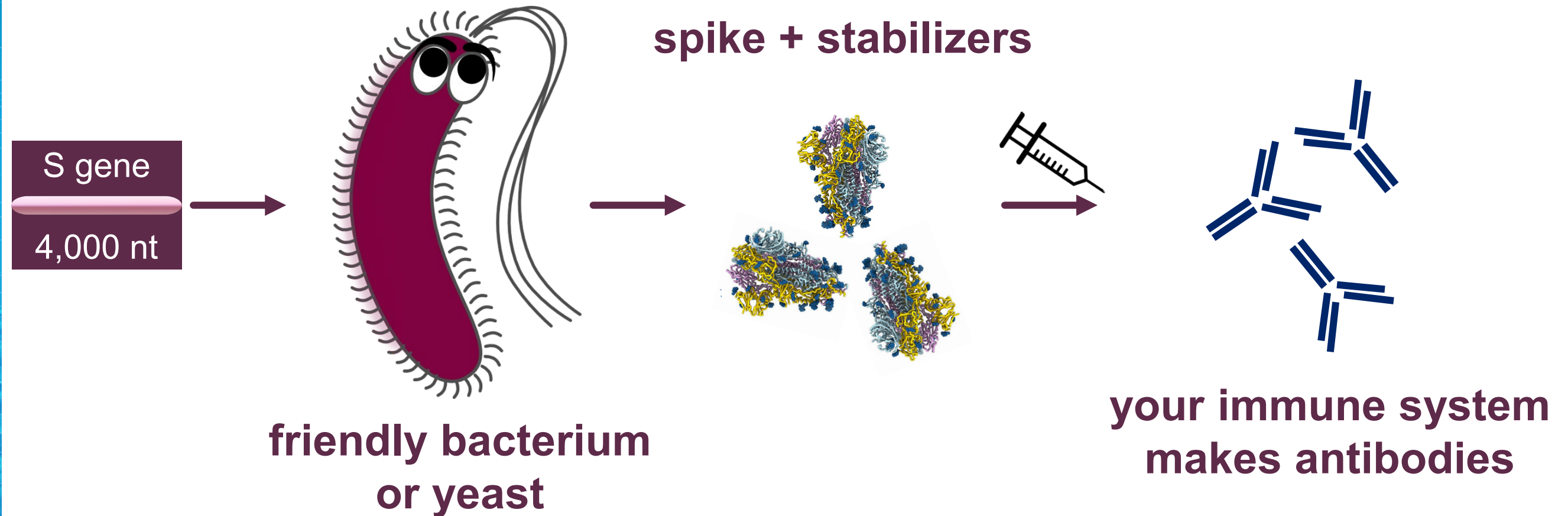
Subunit or peptide vaccines



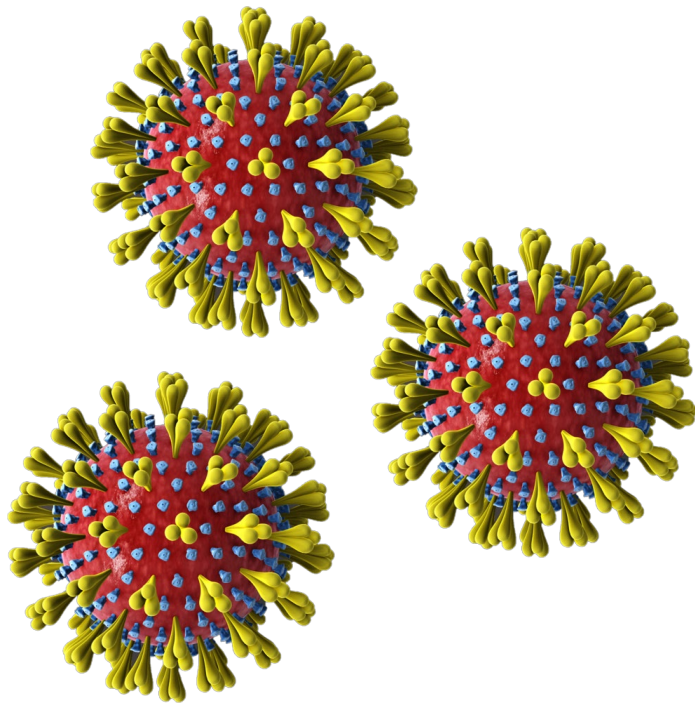
Subunit or peptide vaccines



Subunit or peptide vaccines

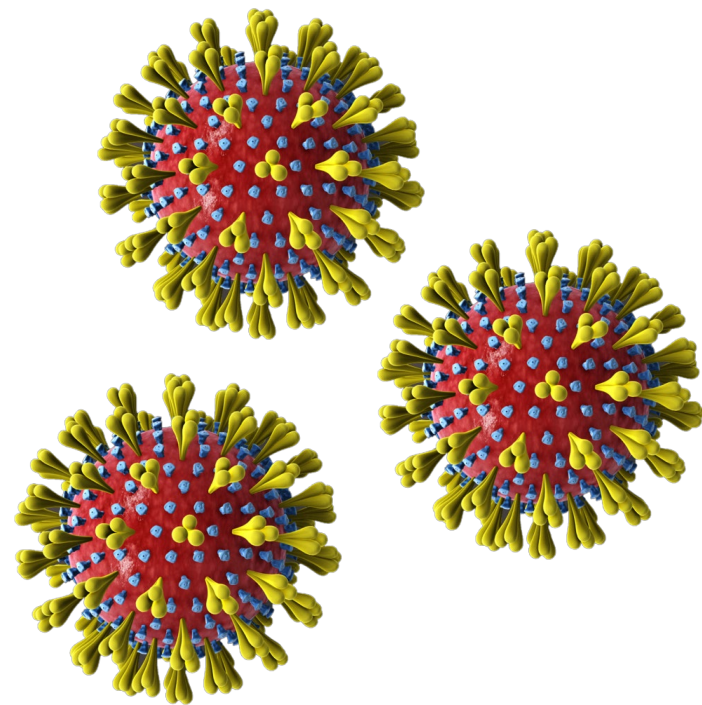


Inactivated or attenuated virus vaccines

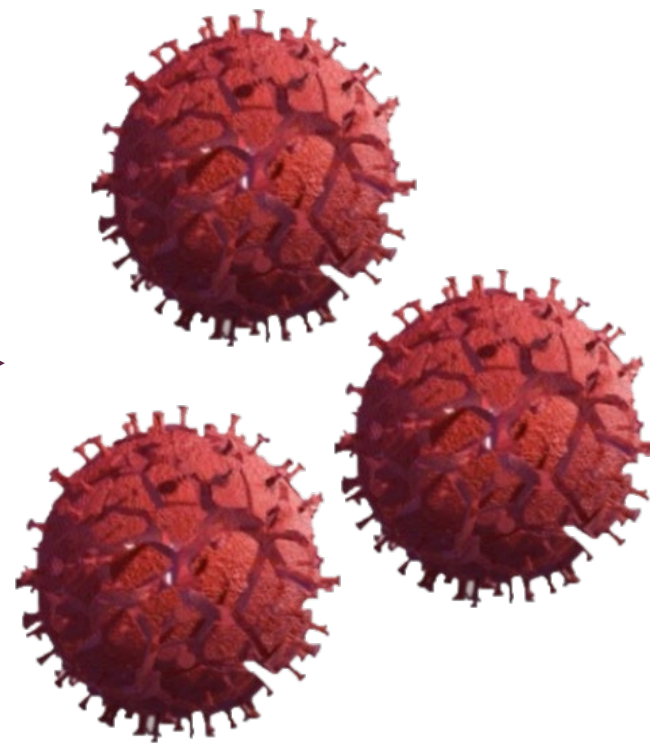


**virus + heat,
radiation or
chemicals**

Inactivated or attenuated virus vaccines



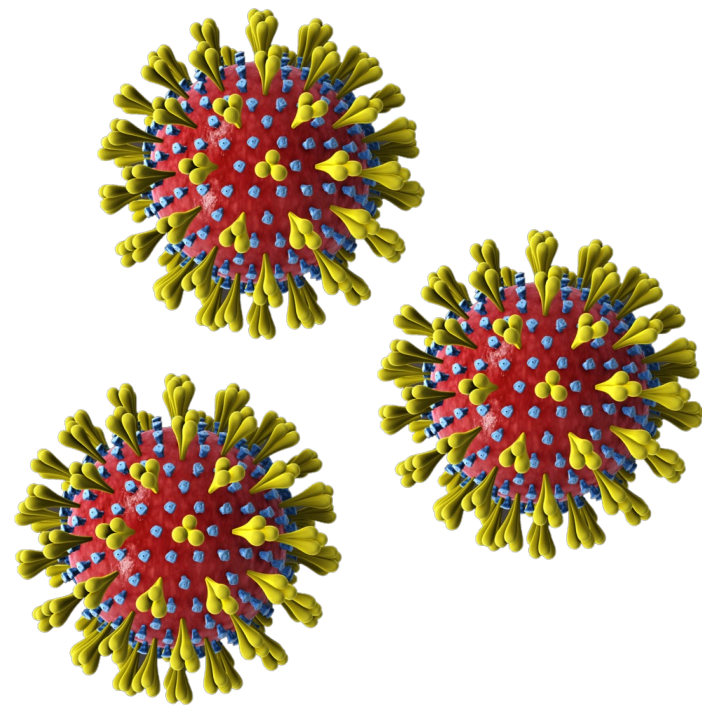
**virus + heat,
radiation or
chemicals**



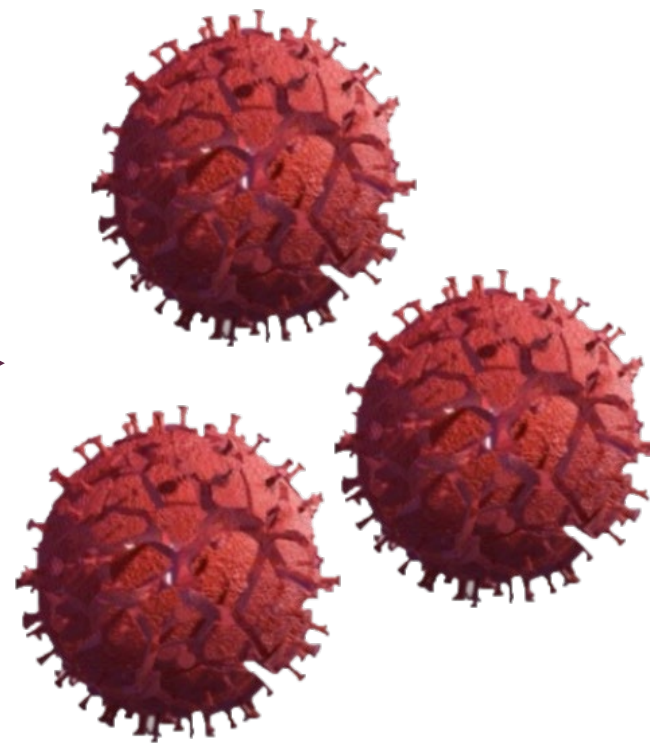
**inactivated
("killed") virus**



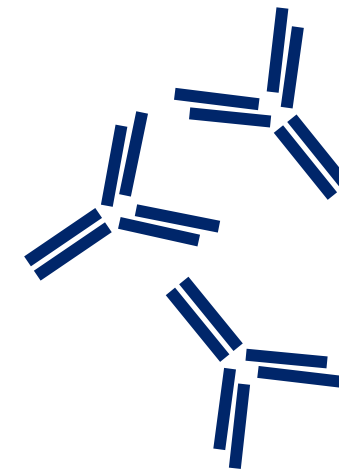
Inactivated or attenuated virus vaccines



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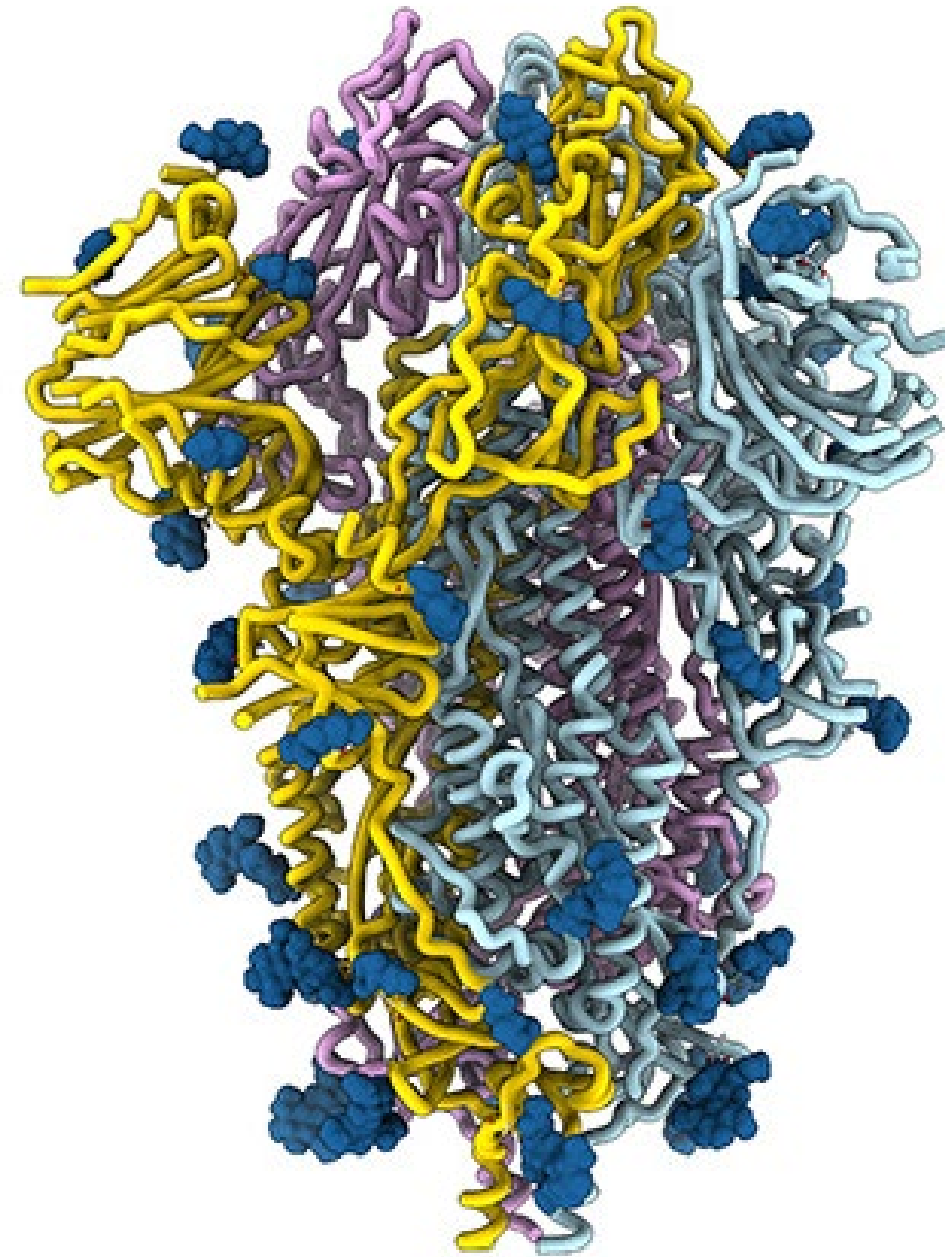
**your immune system
makes antibodies**

Summary of the four types of vaccines

- mRNA (Moderna, Pfizer-BioNTech)
- Viral vector (Oxford-AstraZeneca, Johnson & Johnson)
- Subunit or peptide
- Inactivated or attenuated virus
- All four types trigger an immune response leading to production of antibodies
 - Pain and swelling at the vaccine site
 - Low-grade fever
 - Chills
 - Fatigue
 - Headache
- An immune response to a vaccine doesn't mean you're infected or infectious

What about the variants?

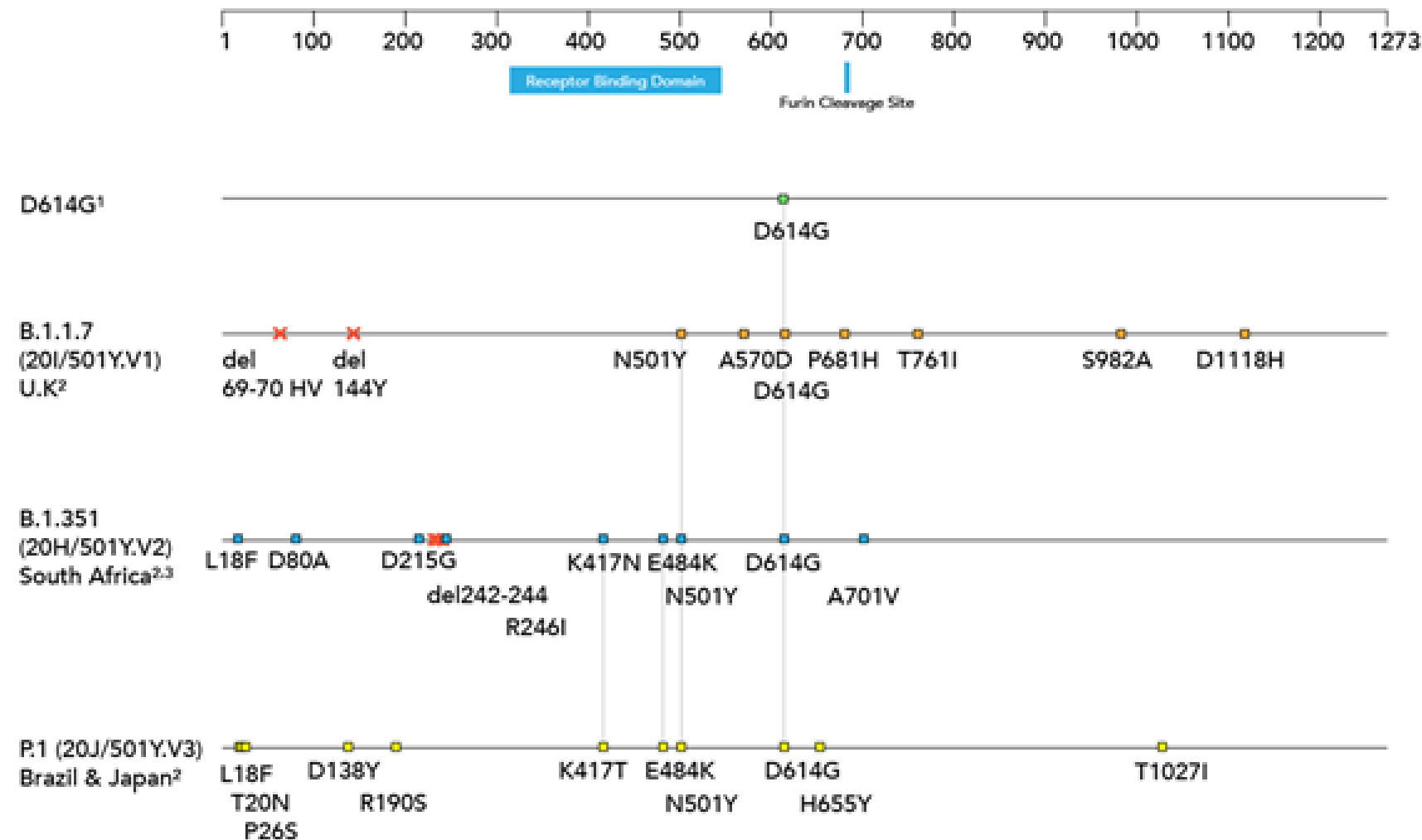
- spike glycoprotein contains 1,273 amino acids



What about the variants?



Amino Acid Changes to the Spike (S) Protein in SARS-CoV-2 Variants



UK strain – 9 changes in 1,273 amino acids

S. Africa strain – 11 changes in 1,273 amino acids

Brazil strain – 10 changes in 1,273 amino acids

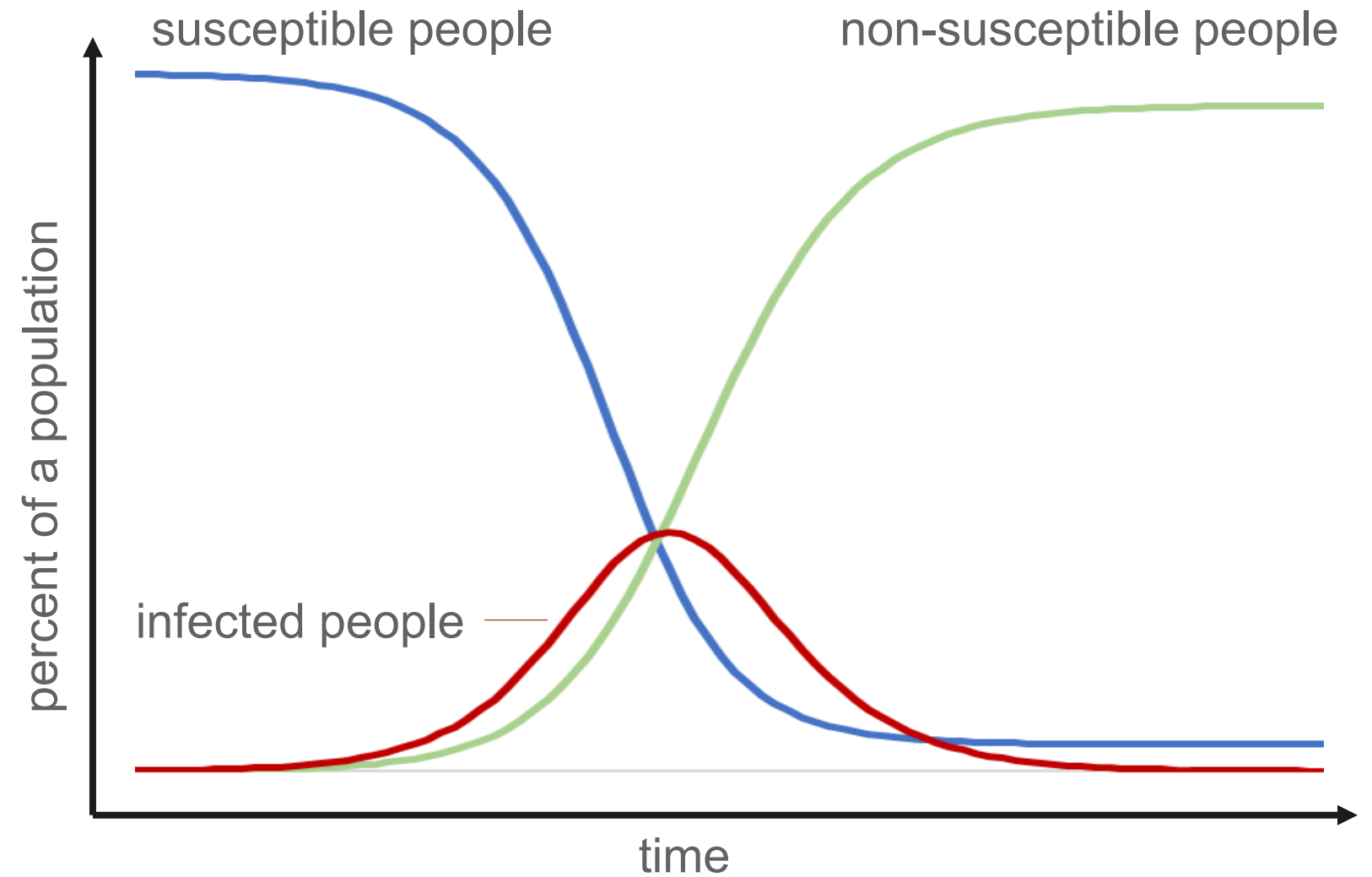
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- **Where do we go from here?**

Where do we go from here scientifically?

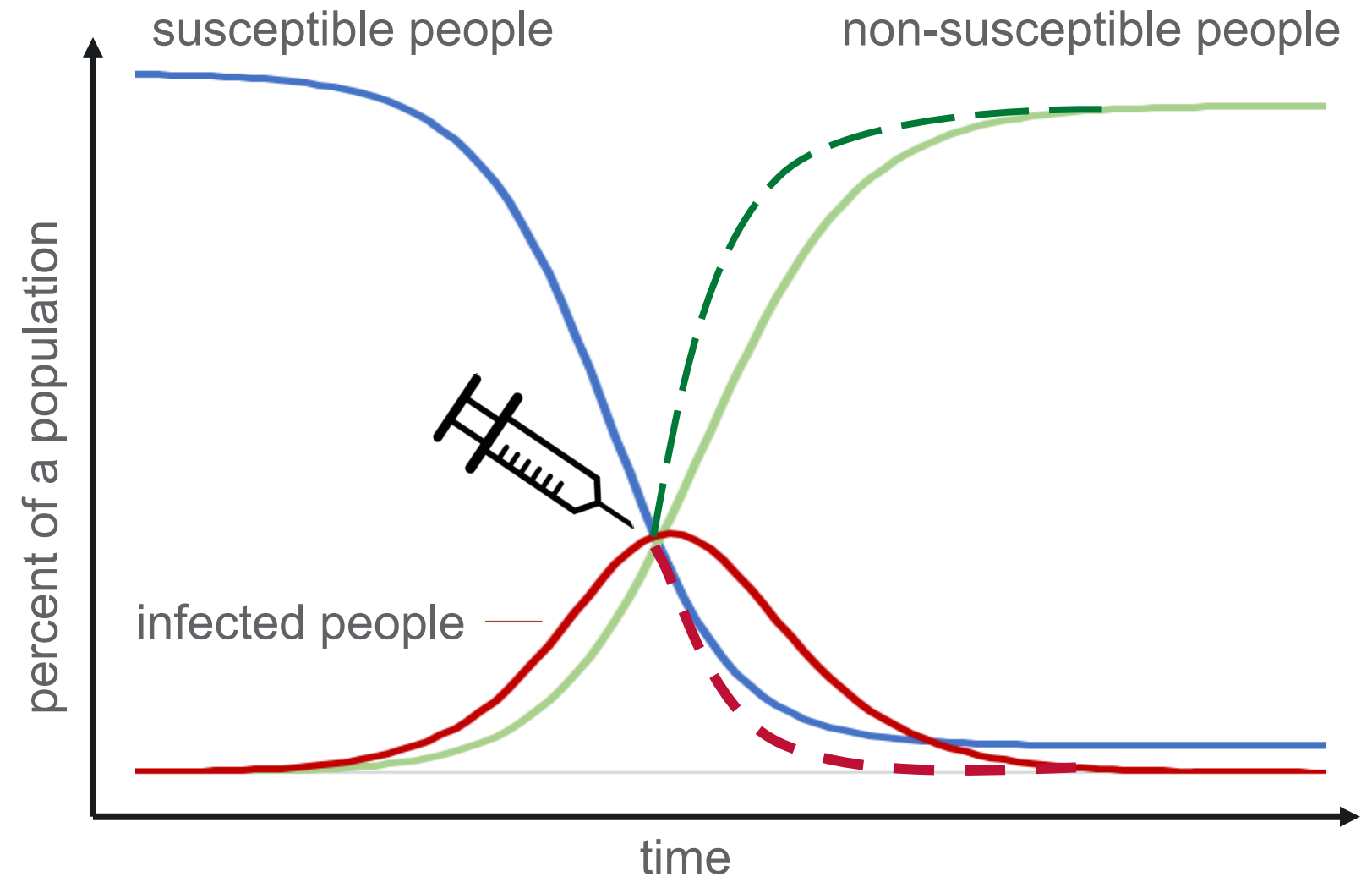
- Defining the correlation between detection and infectiousness
- Making diagnostic tests less expensive, faster and more convenient
- Increasing specificity and sensitivity so immunoassay tests become reliable and meaningful
- Determining how many amino acids in spike can change before the virus starts to evade vaccines
- Expanding the mRNA and adenovirus vaccine platforms
 - Viral vector vaccines are relatively new
 - ✓ Ebola virus and tuberculosis vaccines in development
 - mRNA vaccines are brand new
 - ✓ Zika and Epstein-Barr virus vaccines in development

**Where do we go
from here in
general?**



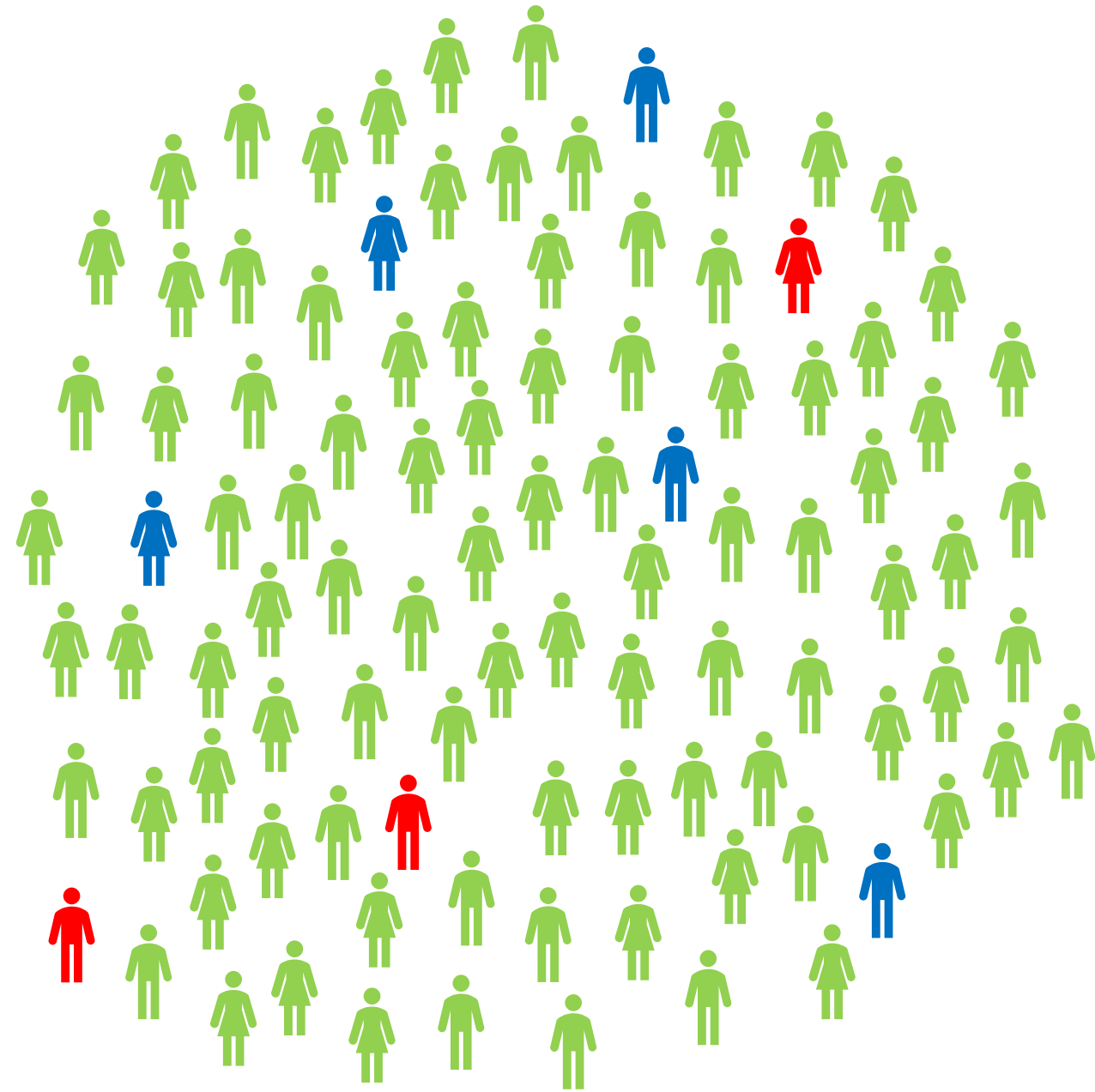
Where do we go from here in general?

- Vaccination moves people directly from susceptible to non-susceptible
- By reducing the number of susceptible people, the chance of transmission is lower

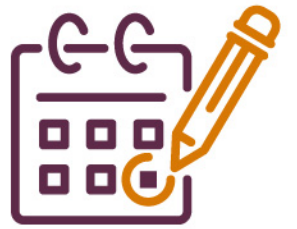


Where do we go from here in general?

- “Herd immunity”



SUBMIT YOUR QUESTIONS VIA THE DISCUSSION CHAT



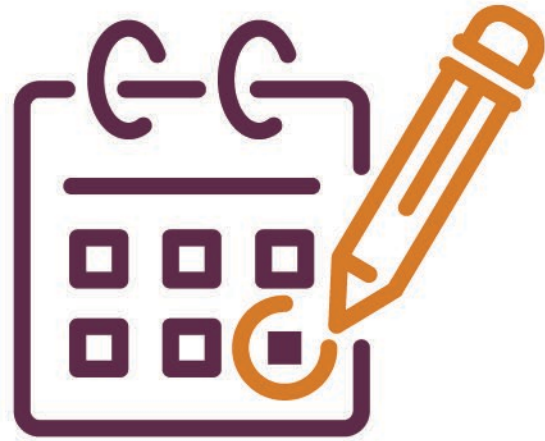
EVERY TUESDAY
IN MARCH
5:00-6:00 P.M.



Your questions?

- Send questions via the discussion chat





UPCOMING EVENTS

EVERY TUESDAY IN MARCH
5:00-6:00 P.M.



**Model Me This: COVID-19 Scientific
Predictions and Where We Go
from Here**

Tim Scheibe

Lead Scientist
River Corridor Scientific Focus Area Project



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Thank you

