

1 **Genomic epidemiology reveals the impact of national and international restrictions**
2 **measures on the SARS-CoV-2 epidemic in Brazil**

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4 Marta Giovanetti^{1,2,*}&, Svetoslav Nanev Slavov^{3,4*}, Vagner Fonseca^{1,5,6,7*}, Eduan Wilkinson^{6,7*},
5 Houriiyah Tegally^{6,7*}, José Salvatore Leister Patané^{4*}, Vincent Louis Viala⁴, James Emmanuel San^{6,7},
6 Evandra Strazza Rodrigues³, Elaine Vieira Santos³, Flavia Aburjaile^{2,8}, Joilson Xavier^{1,8}, Hegger
7 Fritsch^{1,8}, Talita Emile Ribeiro Adelino^{1,8}, Felicidade Pereira⁹, Arabela Leal⁹, Felipe Campos de Melo
8 Iani⁸, Glauco de Carvalho Pereira⁸, Cynthia Vazquez¹⁰, Gladys Mercedes Estigarribia Sanabria^{11,12,13},
9 Elaine Cristina de Oliveira¹⁴, Luiz Demarchi¹⁵, Julio Croda¹⁶, Rafael dos Santos Bezerra³, Loyze Paola
10 Oliveira de Lima⁴, Antonio Jorge Martins⁴, Claudia Renata dos Santos Barros⁴, Elaine Cristina
11 Marqueze⁴, Jardelina de Souza Todao Bernardino⁴, Debora Botequio Moretti⁴, Ricardo Augusto
12 Brassaloti¹⁷, Raquel de Lello Rocha Campos Cassano¹⁷, Pilar Drummond Sampaio Corrêa Mariani¹⁸, João
13 Paulo Kitajima¹⁹, Bibiana Santos¹⁹, Rodrigo Proto-Siqueira²⁰, Vlademir Vicente Cantarelli²¹, Stephane
14 Tosta^{2,9}, Vanessa Brandão Nardy⁹, Luciana Reboredo de Oliveira da Silva⁹, Marcela Kelly Astete
15 Gómez⁹, Jaqueline Gomes Lima⁹, Adriana Aparecida Ribeiro⁸, Natália Rocha Guimarães⁸, Luiz Takao
16 Watanabe¹⁴, Luana Barbosa Da Silva¹⁴, Raquel da Silva Ferreira¹⁴, Mara Patricia F. da Penha²², María
17 José Ortega¹⁰, Andrea Gómez de la Fuente¹⁰, Shirley Villalba¹⁰, Juan Torales¹⁰, María Liz Gamarra¹⁰,
18 Carolina Aquino¹⁰, Gloria Patricia Martínez Figueredo^{11,12,13}, Wellington Santos Fava¹⁶, Ana Rita C.
19 Motta-Castro¹⁶, James Venturini¹⁶, Sandra Maria do Vale Leone de Oliveira¹⁶, Crhistine Cavalheiro
20 Maymone Gonçalves²³, Maria do Carmo Debur Rossa²⁴, Guilherme Nardi Becker²⁴, Mayra Marinho
21 Presibella²⁴, Nelson Quallio Marques²⁴, Irina Nastassja Riediger²⁴, Sonia Raboni²⁵, Gabriela Mattoso
22 Coelho²⁶, Allan Henrique Depieri Cataneo²⁶, Camila Zanluca²⁶, Claudia N Duarte dos Santos²⁶, Patricia
23 Akemi Assato²⁷, Felipe Allan da Silva da Costa²⁷, Mirele Daiana Poleti²⁸, Jessika Cristina Chagas
24 Lesbon²⁸, Elisangela Chicaroni Mattos²⁸, Cecilia Artico Banho²⁹, Lívia Sacchetto²⁹, Marília Mazzi
25 Moraes²⁹, Rejane Maria Tommasini Grotto^{27,30}, Jayme A. Souza-Neto²⁷, Maurício Lacerda Nogueira²⁹,

26 Heidge Fukumasu²⁸, Luiz Lehmann Coutinho¹⁷, Rodrigo Tocantins Calado³, Raul Machado Neto⁴, Ana
27 Maria Bispo de Filippis¹, Rivaldo Venancio da Cunha³¹, Carla Freitas⁵, Cassio Roberto Leonel Peterka³²,
28 Cássia de Fátima Rangel Fernandes³³, Wildo Navegantes de Araújo³⁴, Rodrigo Fabiano do Carmo Said³⁴,
29 Maria Almiron³⁴, Carlos Frederico Campelo de Albuquerque e Melo³⁴, José Lourenço^{35,36}, Tulio de
30 Oliveira^{6,7,37,38}, Edward C. Holmes³⁹, Ricardo Haddad⁴, Sandra Coccuzzo Sampaio^{4^&}, Maria Carolina
31 Elias^{4^&}, Simone Kashima^{3^&}, Luiz Carlos Junior de Alcantara^{1,2^&}, Dimas Tadeu Covas^{3,4^&}.

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33 *These authors jointly contributed to this work

34 ^These authors jointly supervised this work

35 Corresponding Authors[&]: sandra.coccuzzo@butantan.gov.br, carolina.eliassabbaga@butantan.gov.br,

36 skashima@hemocentro.fmrp.usp.br, luiz.alcantara@ioc.fiocruz.br, dimas.covas@butantan.gov.br;

37 giovanetti.marta@gmail.com

38

39 ¹ Laboratório de Flavivírus, Fundação Oswaldo Cruz, Rio de Janeiro, Brazil; ²Laboratório de Genética Celular e
40 Molecular, Instituto de Ciências Biológicas, Universidade Federal de Minas Gerais, Belo Horizonte, Minas Gerais,
41 Brazil; ³University of São Paulo, Ribeirão Preto Medical School, Blood Center of Ribeirão Preto, Ribeirão Preto,
42 SP, Brazil; ⁴Butantan Institute, São Paulo, Brazil; ⁵Coordenação Geral de Laboratórios de Saúde Pública/Secretaria
43 de Vigilância em Saúde, Ministério da Saúde (CGLAB/SVS-MS) Brasília, Distrito Federal, Brazil; ⁶KwaZulu-Natal
44 Research Innovation and Sequencing Platform (KRISP), School of Laboratory Medicine and Medical Sciences,
45 College of Health Sciences, University of KwaZulu-Natal, Durban, South Africa; ⁷Centre for Epidemic Response
46 and Innovation (CERI), School of Data Science and Computational Thinking, Stellenbosch University;
47 Stellenbosch, South Africa; ⁸Laboratório Central de Saúde Pública do Estado de Minas Gerais, Fundação Ezequiel
48 Dias, Belo Horizonte, Minas Gerais, Brazil; ⁹Laboratorio Central de Saude Publica da Bahia-LACEN-BA,
49 Salvador, Bahia, Brazil; ¹⁰Laboratorio Central de Salud Pública, Asunción, Paraguay; ¹¹Universidad Nacional del
50 Caaguazú, Instituto Regional de Investigación en Salud; ¹²Laboratorio de Biología Molecular, Hospital Regional de
51 Coronel Oviedo; ¹³Ministerio de Salud Pública y Bienestar Social; ¹⁴Laboratório Central de Saúde Pública do Estado
52 de Mato Grosso, Cuiabá, Brazil; ¹⁵Laboratório Central de Saúde Pública do Estado de Mato Grosso do Sul, Campo

53 Grande, Mato Grosso do Sul, Brazil; ¹⁶Universidade Federal de Mato Grosso do Sul; ¹⁷University of São Paulo,
54 Centro de Genômica Funcional da ESALQ, Piracicaba, SP, Brazil; ¹⁸NGS Soluções Genômicas, Piracicaba, SP,
55 Brazil; ¹⁹Mendelics Análise Genômica; ²⁰Instituto de Biologia Molecular, Laboratório Antonello, Rio Grande do
56 Sul, Brazil; ²¹Universidade Federal de Ciências da Saúde de Porto Alegre (UFCSPA), Universidade Feevale, Grupo
57 Exame Laboratórios, Rio Grande do Sul, Brazil; ²²Vigilância em Saúde do Estado de Mato Grosso, Cuiabá, Brazil;
58 ²³Secretaria de Saúde do Estado do Mato Grosso do Sul; ²⁴Laboratório Central do Estado do Paraná (Lacen/PR);
59 ²⁵Hospital de Clínicas da Universidade Federal do Paraná, Curitiba, PR; ²⁶Laboratório de Virologia Molecular -
60 Instituto Carlos Chagas/Fiocruz PR, Curitiba, PR; ²⁷São Paulo State University (UNESP), School of Agricultural
61 Sciences, Department of Bioprocesses and Biotechnology, Botucatu, Brazil; ²⁸Department of Veterinary Medicine,
62 School of Animal Science and Food Engineering, University of Sao Paulo, Pirassununga, São Paulo, Brazil;
63 ²⁹Laboratório de Pesquisas em Virologia, Departamento de Doenças Dermatológicas, Infecciosas e Parasitárias,
64 Faculdade de Medicina de São José do Rio Preto; ³⁰Molecular Biology Laboratory, Applied Biotechnology
65 Laboratory, Clinical Hospital of the Botucatu Medical School, Brazil; ³¹Fundação Oswaldo Cruz, Bio-Manguinhos,
66 Rio de Janeiro, Rio de Janeiro, Brazil; ³²Coordenação Geral das Arboviroses, Secretaria de Vigilância em
67 Saúde/Ministério da Saúde (CGARB/SVS-MS), Brasília, Distrito Federal, Brazil; ³³Departamento de Imunização e
68 Doenças Transmissíveis/Secretaria de Vigilância em Saúde, Ministério da Saúde, Brasília, Distrito Federal, Brazil;
69 ³⁴Organização Pan-Americana da Saúde/Organização Mundial da Saúde, Brasília, Distrito Federal, Brazil;
70 ³⁵Department of Zoology, Peter Medawar Building, University of Oxford, Oxford, UK; ³⁶Biosystems and Integrative
71 Sciences Institute, Universidade de Lisboa, Lisboa, Portugal; ³⁷Centre for the AIDS Programme of Research in
72 South Africa (CAPRISA), Durban, South Africa; ³⁸Department of Global Health, University of Washington, Seattle,
73 WA, USA; ³⁹Sydney Institute for Infectious Diseases, School of Life and Environmental Sciences and School of
74 Medical Sciences, University of Sydney, Sydney, NSW, Australia.

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79

80 **Abstract**

81 Brazil has experienced some of the highest numbers of COVID-19 cases and deaths globally and
82 from May 2021 made Latin America a pandemic epicenter. Although SARS-CoV-2 established
83 sustained transmission in Brazil early in the pandemic, important gaps remain in our
84 understanding of virus transmission dynamics at the national scale. Here, we describe the
85 genomic epidemiology of SARS-CoV-2 using near-full genomes sampled from 27 Brazilian
86 states and a bordering country - Paraguay. We show that the early stage of the pandemic in
87 Brazil was characterised by the co-circulation of multiple viral lineages, linked to multiple
88 importations predominantly from Europe, and subsequently characterized by large local
89 transmission clusters. As the epidemic progressed under an absence of effective restriction
90 measures, there was a local emergence and onward international spread of Variants of Concern
91 (VOC) and Variants Under Monitoring (VUM), including Gamma (P.1) and Zeta (P.2). In
92 addition, we provide a preliminary genomic overview of the epidemic in Paraguay, showing
93 evidence of importation from Brazil. These data reinforce the usefulness and need for the
94 implementation of widespread genomic surveillance in South America as a toolkit for pandemic
95 monitoring that provides a means to follow the real-time spread of emerging SARS-CoV-2
96 variants with possible implications for public health and immunization strategies.

97

98 **Introduction**

99 At the end of 2019, a novel respiratory pathogen designated the Severe Acute Respiratory
100 Syndrome Coronavirus 2 (SARS-CoV-2) emerged in the city of Wuhan, China. Since its
101 identification, the virus has spread rapidly on a global scale causing an unprecedented
102 Coronavirus disease 2019 (COVID-19) pandemic (declared on March 11th 2020) which has

103 overwhelmed many health care systems¹. By the mid-February 2022, more than 415 million
104 cases of COVID-19, with more than 5.84 million associated deaths, have been reported
105 globally². Brazil has become the epicentre of the COVID-19 epidemic in the Americas, with a
106 total of 21.2 million cases and a death toll exceeding 591,000 reported cases by the end of
107 September of 2021, making it one of the countries hardest hit by COVID-19³. Critically,
108 however, a lack of genome sequence data from Brazil has limited our ability to fully understand
109 transmission dynamics at the national scale.

110 To assess how population restriction measures might have played a role in shaping viral
111 diversity and evolution during the SARS-CoV-2 epidemic in Brazil, we performed a
112 phylogenetic and phylogeographic analysis of genomic data from 27 Brazilian states and one
113 neighbouring country – Paraguay – collected up to September 2021. We show that the early
114 spread of SARS-CoV-2 in Brazil resulted from initial founder events associated with
115 international travel (mainly from Europe), which then spread through regional mobility pathways
116 during the recession of the first epidemic wave. From this, Brazil emerged as an exporter of
117 SARS-CoV-2 variants to other countries. We further describe the emergence and spread of key
118 viral Variants of Concern (VOCs; for example, Gamma) and Variants Under Monitoring
119 (VUMs; for example, Zeta) in Brazil, highlighting how their emergence may have contributed to
120 a more severe second wave in the country.

121

122 **Results**

123 *COVID-19 transmission dynamics in Brazil*

124 The first confirmed infection of SARS-CoV-2 in Brazil was on February 26th 2020 in the State of
125 São Paulo (SP), in a traveller returning from Italy (**Fig. 1A**). On March 17th 2020 the first

126 COVID-19-related death, a 61-year old male, was reported in the same state^{4,5}. Four days later,
127 all Brazilian states reported at least one confirmed case of COVID-19 and the Brazilian Ministry
128 of Health (BR-MoH) declared an outbreak of large-scale community transmission of the virus⁶.
129 By April 10th, 2020 the virus had already reached remote locations such as the Yanomami
130 indigenous community located in the state of Roraima, in northern Brazil⁶ (**Fig. 1A**).

131 After the World Health Organization (WHO) declared the outbreak of SARS-CoV-2 as a
132 public health emergency of international concern on January 30th 2020 the Brazilian government
133 introduced restriction measures to mitigate viral spread (**Fig. 1A**)⁷. The primary measure
134 involved social isolation, followed by the closure of schools, universities, and non-essential
135 businesses⁸. Additional measures included the mandatory use of personal protective masks⁹, the
136 cancellation of events expected to attract large numbers of people and tourists, and only services
137 considered as essential such as markets and pharmacies remained open^{8,10}. However, while the
138 epidemic was growing, restriction measures were progressively eased to mitigate negative
139 impacts on the economy. Notably, even during periods of restriction, travel between Brazilian
140 states largely remained possible, facilitating SARS-CoV-2 transmission throughout the
141 country¹¹. The latter was likely linked to the emergence of new and more contagious viral
142 lineages documented as VOC - Gamma (lineage P.1) - and VUM - Zeta (lineage P.2), which may
143 also have contributed to a more severe second wave (**Fig. 1B**)^{11,13,14,15}.

144 The COVID-19 death toll in Brazil steadily rose from March 2021. It reached a daily
145 total of 4,250 on April 2021, the highest number of daily fatalities from COVID-19 worldwide
146 (**Fig. 1B**). Signs of collapse of the health system were reported in numerous cities among
147 different regions of the country. The situation worsened considerably following the emergence of
148 multiple VOCs and VUMs in parallel with a slow progress of the vaccination campaign¹⁶.

149 Vaccination in Brazil began on January 17th 2021 when the Instituto Butantan imported the first
150 6 million doses of CoronaVac (a whole virus inactivated vaccine) in a collaboration with Sinovac
151 Biotech (**Fig. 1A**)^{17,18}. As of February 16th 2022 approximately 71.8% of the Brazilian
152 population have been vaccinated with the first dose of any of the vaccines currently available
153 (CoronaVac, AstraZeneca, Pfizer and Janssen), and only 22% had been fully vaccinated (i.e. a
154 single dose of Janssen or both doses of the other vaccines)¹⁹.

155 By analysing the total number of COVID-19 notified cases to the end of September 2021,
156 we observed that the Brazilian region with the highest population density (Southeast) also
157 contained the highest number of the cases registered in the country, with the state of São Paulo
158 documenting the largest number of cases (n=4,369,410) in that period (**Fig. 1C**). However, when
159 we consider the incidence rate (number of reported cases/population) by state, we found that the
160 Midwest, the least populated region in Brazil, had the highest incidence rate, with 13,604.23
161 cases/100K inhabitants¹.

162

163 *SARS-CoV-2 genomic data*

164 A total of 3,866 near-full genomes sequences from SARS-CoV-2 RT-qPCR positive
165 samples were obtained as part of this study. SARS-CoV-2 sequencing spanned February 2020 to
166 June 2021, sampled from 8 of the 27 Brazilian states (São Paulo=3309; Rio Grande do Sul=48;
167 Paraná=55; Minas Gerais=80; Mato Grosso do Sul=36; Mato Grosso=51; Bahia=224) and one
168 neighbouring country, Paraguay (n=63). Almost half of the sequences were from Southeast
169 Brazil, consistent with it reporting most cases nationally (**Fig. 1C**)⁶. The sequenced samples
170 were collected from 2,023 females and 1,843 males (**Table S1 and S2**) with a median age of
171 41.72 years (range: 1 to 90 years of age). All tested samples contained sufficient viral genetic

172 material ($\geq 2\text{ng}/\mu\text{L}$) for library preparation. For positive samples, PCR cycle threshold (Ct)
173 values were on average 19.93 (range: 10.75 to 30). Sequences had a median genome coverage of
174 95% (range: 80 to 99.99) and average genome coverage was typically higher for samples with
175 lower Ct values (**Fig. S1**). Epidemiological information and sequencing statistics of the
176 generated sequences from Brazil and Paraguay are detailed in **Tables S1** and **S2**, respectively.
177 Sequences were assigned to 39 different PANGO-lineages based on the proposed dynamic
178 nomenclature for SARS-CoV-2 lineages (**Fig. S1, Table S1 and S2**) and have been submitted to
179 GISAID following the WHO guidelines (**Tables S1** and **S2**) (Pangolin version 3.1.7, August
180 2021).

181

182 *Phylogenetic inference and lineage diversity*

183 The rapid spread of SARS-CoV-2, together with the reported circulation of several VOCs
184 and VUMs in Brazil prompted the intensification of genomic surveillance by the National
185 Network for Pandemic Alert of SARS-CoV-2 at the end of December 2020. As of June 30th 2021
186 some 17,135 SARS-CoV-2 genomes from Brazil had been deposited in the GISAID database
187 from all 27 Brazilian states (**Fig. 2A**). The states with the highest number of sequenced genomes
188 were São Paulo (n=9,600) and Rio de Janeiro (n=2,031). Although genomic surveillance began
189 as soon as the first confirmed infections were detected in Brazil, by the end of June 2021 there
190 was still a paucity of genomic data from some states such as Roraima (n=29), Acre (n=29),
191 Rondônia (n=37), Tocantins (n=27), Piauí (n=19) and the Federal District (n=33) (**Fig. 2A**). Half
192 of all Brazilian genomes were deposited in early 2021, suggesting intensified surveillance in the
193 second wave following the detection of Gamma (and other VOCs (e.g. Alpha/B.1.1.7) and
194 VUMs (e.g. Zeta) throughout the country (**Fig. 2B**).

195 To obtain a better understanding of the dynamics of SARS-CoV-2 spread in Brazil, we
196 coupled epidemiological data with phylodynamic analysis for a data set comprising 25,288
197 available globally representative genomes, including the new genomes obtained in this study
198 (n=3,866) sampled from December 26th, 2019 to June 28th 2021 (**Fig. 2C, Fig. S2**). A date-
199 stamped phylogeny of these data indicated that most of the Brazilian sequences were
200 interspersed with those introduced from several countries (**Fig. 2C, 2D**). This pattern further
201 indicated that the co-circulation of multiple SARS-CoV-2 lineages over time was linked to
202 multiple importations followed by large local transmissions concomitant with a high number of
203 infections (**Fig. 2C, 2D**).

204 Using an ancestral location state reconstruction on the dated phylogeny we were able to
205 infer the number of viral imports and exports between Brazil and the rest of the world, and
206 between individual Brazilian regions (hereafter referred as the North, Northeast, Midwest,
207 Southeast and South regions) (**Fig. 2D-F**). The bulk of imported introductions (estimated to be
208 114 independent ones) were largely from Europe (**Fig. 2D**), occurring before the implementation
209 of restriction measures (April 2020) when the epidemic was rapidly progressing (**Fig. 2D, E**).
210 However, at least 33 introduction events are inferred to have occurred during enforcement of
211 preventive measures up to August 2020 (**Fig. 2D, E**), and hence before those measures were
212 loosened. Finally, although Brazil was a major virus importer, there were approximately 10 times
213 more inferred exportation events out of Brazil than viral introductions into Brazil (**Fig. 2E**).

214 Our estimates of viral movement within Brazil further suggested that the Southeast region
215 was the largest contributor of viral exchanges to other regions, comprising approximately 40% of
216 viral movements from one geographical region to another, followed by the North region that
217 contributed to approximately 25% of all viral movements. Although these estimates are in line

218 with epidemiological data, this observation is also likely to be influenced by these two regions
219 having the greatest number of sequences available for analysis.

220

221 *Spatiotemporal spreading of Brazilian VOC (Gamma) and VUM (Zeta)*

222 We next focused on the two Brazilian variants that evolved from the B.1.1.28 lineage and
223 grew into large transmission clusters during the second wave of the epidemic from January 2021
224 - the VOC (Gamma/P.1) and VUM (Zeta/P.2). To assess the detailed evolution of these lineages
225 over time we performed a spatiotemporal phylogeographic analysis using a molecular clock
226 model.

227 The Gamma VOC was first sampled in Brazil in early January 2021^{12,20}. It displayed an
228 unusual number of lineage-defining mutations in the S protein, including three designated that
229 may impact transmission, immune escape, and virulence - N501Y, E484K and K417T²¹⁻²³. In
230 line with previous estimates^{12,20}, our phylogeographic analysis suggested that the Gamma variant
231 emerged around November 21st 2020 (95% highest posterior density, 12-29 November 2020) in
232 Manaus (Amazonas state) in Northern Brazil and spread extensively among Brazilian regions
233 (**Fig. 3A, C**). Our data reveals multiple introductions of this lineage from the Amazonas state to
234 Brazil's southeastern, northeastern and midwestern states (**Fig. 3A, C**). By mid-January 2021,
235 the southeastern and northern regions had also acted as source populations for the introduction of
236 this variant into the southern region (**Fig 3A, C**).

237 Zeta (P.2) is defined by the presence of the S:E484K mutation in the receptor binding
238 domain (RBD) and other lineage-defining mutations outside the S protein^{15,24}. Although it was
239 first described in samples from October 2020 in the state of Rio de Janeiro, our phylogeographic
240 reconstruction suggests that the variant originated in Paraná state in South Brazil late August

241 2020 (95% highest posterior density, 19 August 2020 to 03 September 2020) (**Fig. 4B**). Since
242 then, Zeta has spread multiple times to much of the southeastern, northeastern, midwestern and
243 northern Brazilian regions (**Fig. 4D**). Together, our results further suggest that the transmission
244 dynamics roughly followed patterns of population density, moving most often between the most
245 populous localities (**Fig. A, B**).

246 By estimating the pattern of migration flows we also examined the potential role of Brazil
247 as an exporter of the Gamma and Zeta variants to the rest of the world (**Fig. 3**). While the North
248 region seeded approximately 47% of all Gamma infections into other regions, consistent with it
249 being where this lineage originated, there is strong evidence both from phylogeographic analysis
250 (**Fig. 3A**) and ancestral state reconstruction (**Fig. 3C**) that there was considerable subsequent
251 transfer of Gamma between all regions. Zeta had a different dispersal pattern to Gamma, with
252 73% of all Zeta movements originating in the Southeast and South regions, consistent with our
253 phylogeographic reconstruction that this is the geographic source of this lineage (**Fig. 3**).

254 Our analysis further revealed that Brazil has contributed to the international spread of
255 both variants with at least 316 and 32 exportation events to the rest of the world detected for
256 Gamma and Zeta variants, respectively (**Fig. 3E**). Consistent with importations, most exports
257 were to South America (65%) and Europe (14%), followed by Asia (11%), North America (5%),
258 Africa (2.5%) and Oceania (2.5%) with an increase between January 2021 and March 2021
259 coinciding with the second wave of infections in Brazil and some relaxation of international
260 travel restrictions (**Fig. 3E**). As shown elsewhere, these results demonstrate that under relaxation
261 of travel restrictions SARS-CoV-2 lineages can spread to a diverse range of international
262 locations²⁵⁻³⁰.

263

264 *Cross-border SARS-CoV-2 transmission from Brazil to Paraguay*

265 To explore the burden of the Brazilian SARS-CoV-2 pandemic on other South American
266 countries, we provide a preliminary overview of the SARS-CoV-2 epidemic in Paraguay. The
267 first COVID-19 confirmed case was documented in Paraguay on March 7th 2020 in a 32-year-old
268 man from San Lorenzo, Central Department. Thirteen days later, the first death and the first case
269 of community transmission were also confirmed. COVID-19 cases in Paraguay rose sharply in
270 March (**Fig. 4A**) resulting in 100% occupancy of intensive care beds, prompting the government
271 to declare a strict quarantine to mitigate the spread of the virus^{31,32}. By the end of June 2021 a
272 total number of 460,000 confirmed cases and 15,000 coronavirus-related deaths had been
273 reported in Paraguay³¹.

274 The COVID-19 epidemic in Paraguay can generally be characterized by three phases:
275 phase I starting from March 10th 2020 characterized by restriction measures; phase II since May
276 4th, 2020, also called “Intelligent/Smart Quarantine” with a gradual return to work and social
277 activities; and phase III implemented since October 5th 2020, known as the “COVID way of
278 living”, characterized by the relaxation of the restrictions measures and the reopening of national
279 borders and resumption of international flights³².

280 Since the beginning of the epidemic there has been a paucity of whole genomes
281 sequences from Paraguay, with only n=165 whole genome sequences available on GISAID by
282 the end of July 2021, about 0.0003% of known cases. This seriously impacts the ability to
283 characterize the molecular epidemiology of SARS-CoV-2 at a regional level. In collaboration
284 with the Pan-American Health Organization and the National Public Health Laboratory of
285 Asunción in Paraguay we obtained a total of 63 near complete genome sequences sampled
286 between July 2020 and June 2021, representing ~ 40% of the currently available genomes from

287 this country. The selection of the samples was based on the Ct value (≤ 30) and availability of
288 epidemiological metadata, such as date of sample collection, sex, age and municipality of
289 residence. Thus, by applying these inclusion criteria only 63 positive samples were considered
290 suitable for this study. As expected, we observed the co-circulation of multiple SARS-CoV-2
291 lineages (**Fig. 4B**), linked to multiple importations and subsequently characterized by large
292 transmission clusters.

293 Importantly, our phylogenetic analysis revealed that most of the SARS-CoV-2 variants
294 currently circulating in Paraguay, including lineages (B.1.1.28; B.1.1.33; Zeta and Gamma),
295 originally emerged in Brazil (Fig. 4A and Fig.4B), thus suggesting cross-border transmission
296 from Brazil to Paraguay (**Fig. 4B, C**). This reinforces the importance of nonpharmaceutical
297 measures in containing and preventing the spread of viral strains into neighbouring countries.

298 As of July 31th, 2021 a total of 78% of available genomic sequences from Paraguay were
299 linked to infections caused by Brazilian variants, with the Gamma VOC being the most prevalent
300 lineage in the country. As genome sequencing is not widespread, it is difficult to determine how
301 widely these variants have spread within Paraguay and to other Latin American countries.
302 However, the abundant COVID-19 cases in Brazil, a country that shares borders with ten
303 countries, suggests that this risk is likely to be high.

304

305 **Discussion**

306 Genome sequencing combined with epidemiological assessment has been widely used as
307 a tool to track the spread and evolution of SARS-CoV-2, enabling public health authorities to
308 tailor their control strategies. In addition, genomic data can reveal key properties of emerging
309 viruses, including precise epidemiological behaviour that patient data alone cannot capture.

310 However, the utility of genomic data is marred by sparse sampling and geographic inequities³³.
311 Brazil is an important case study, but SARS-CoV-2 sequences from Brazil are only available
312 from a tiny fraction of the number of confirmed cases into the country, curbing their utility in a
313 public health setting and limiting effective control strategies.

314 To help overcome these limitations, we report genomic data obtained by sequencing
315 3,866 SARS-CoV-2 infection cases confirmed by RT-qPCR from patients residing in 8 of the 27
316 Brazilian federal states and the neighbouring country of Paraguay. These were analysed together
317 with n=13,328 and n=102 (up to 30, June 20th 2021) publicly available complete genomes
318 sequences from both countries, respectively. By combining epidemiological and genomic data,
319 we show how the interplay between the implementation of restriction measures and sustained
320 SARS-CoV-2 transmission have shaped the Brazilian epidemic over 20 months, including the
321 dramatic resurgences in case numbers linked with the emergence of VOCs and VUMs. In
322 particular, we show that multiple independent importations of SARS-CoV-2, predominantly
323 from Europe, had occurred in Brazil during the early phase of the epidemic (up to April 2020).
324 We further detected multiple (n=33) international introductions during periods characterized by
325 the enforcement of preventive measures, demonstrating that these can be ineffective to prevent
326 importation, as previously reported in other countries³⁴.

327 Our analysis shows that viral importations were present throughout the entirety of the
328 study period, except between May and September 2020 and further suggest that Brazil played
329 much more as a viral exporter, resulting in 10 times more inferred exportations events than viral
330 introduction into the country (**Fig. 2E**). Importantly, this was also a period linked to the
331 emergence of Brazilian VOCs and VUMs. Although we have not measured passenger traffic to
332 and from Brazil, the viral migration pattern observed appears to be in line with results obtained

333 from other studies combining viral genetic data with epidemiological and travel data, and
334 provide evidence that the dispersion of respiratory viruses is dictated by human mobility and
335 population density²⁶⁻³⁰.

336 We also provide the first preliminary overview of the SARS-CoV-2 epidemic in
337 Paraguay, revealing a high virus connectivity with Brazil. This spread was likely facilitated by
338 airplane and road networks that form major transport trails linking Brazil to other parts of South
339 America. The rapid unhampered spread of such VOCs and VUMs into South American
340 countries, such as Paraguay, indicates that the land-border controls to curb the international
341 spread of the virus have been largely ineffective and highlights the inherent challenges in
342 screening cross-border travellers to contain the spread of the virus within this region. Our data
343 further suggest that national and international travel restrictions lifted at certain points during the
344 Brazilian epidemic were likely responsible for both virus introduction from international
345 localities and within-country transmission, with infected travelers acting as carriers.

346 More broadly, our study highlights the utility of SARS-CoV-2 genome sequencing in
347 COVID-19 outbreak investigation and the need for more comprehensive country-wide studies of
348 the epidemiology and spread of emerging viral strains. Since the disproportion on the number of
349 genome sequences available for each Brazilian state/region, our results further highlight the need
350 of more public investments to strength the genomic capacity across the country.

351 Additionally, the current co-circulation of VUMs and VOCs in Brazil, together with the
352 slow vaccine rollout, has important implications for public health in this high populous and
353 regionally important country³⁵. Such epidemiological conditions create the perfect environment
354 for the continued evolution of SARS-CoV-2, potentially enabling the emergence of novel
355 variants of altered phenotype.

356

357 **Materials and Methods**

358 *Ethics statement*

359 This research was approved by the Ethics Review Committee of the Pan American Health
360 Organization (PAHOERC.0344.01), the Federal University of Minas Gerais (CEP/CAAE:
361 32912820.6.1001.5149), the University of São Paulo (CEP/FZEA: 4.780.992) and the Blood
362 Center of Ribeirão Preto (CEP/HCRP-FMRP: 50367721.7.1001.5440), and by the Paraguayan
363 Ministry of Public Health and Social Welfare (MSPyBS/ S.G. no. 0944/18). The availability of
364 these samples for research purposes during outbreaks of national concern is allowed under the
365 terms of the 510/2016 Resolution of the National Ethical Committee for Research – Brazilian
366 Ministry of Health (CONEP - Comissão Nacional de Ética em Pesquisa, Ministério da Saúde)
367 that authorizes, without the necessity of an informed consent, the use of clinical samples
368 collected in the Brazilian Central Public Health Laboratories to accelerate knowledge building
369 and contribute to surveillance and outbreak response. The samples processed in this study were
370 obtained anonymously from material exceeding the routine diagnosis in Brazilian public health
371 laboratories that belong to the public network within BrMoH.

372

373 *Genomic surveillance network*

374 As a part of the National Network for Pandemic Alert of SARS-CoV-2, we performed genomic
375 monitoring to rapidly understand the spread of SARS-CoV-2 at the national and cross border
376 levels. This was performed in collaboration with the Central Laboratory of Public Health
377 (LACEN) from the states of Bahia (BA), Mato Grosso (MT), Mato Grosso do Sul (MS), Minas
378 Gerais (MG), as well as Blood Center of Ribeirão Preto, the Fiocruz Paraná (PR), the Butantan

379 Institute from the state of São Paulo (SP) state, the University of São Paulo and the Central
380 Laboratory of Health of Paraguay.

381

382

383

384 *Sample collection and molecular diagnostic assays*

385 Convenience clinical samples from patients with suspected SARS-CoV-2 infection from patients
386 residing in 8 of the 27 Brazilian federal states and from Asunción, Paraguay, and collected
387 between July 2020 and June 2021 were provided for diagnostic and genome sequencing
388 purposes. Viral RNA was extracted from nasopharyngeal swabs using an automated protocol and
389 tested for SARS-CoV-2 by multiplex real-time PCR assays: (i) the Allplex 2019-nCoV Assay
390 (Seegene) targeting the envelope (E), the RNA dependent RNA polymerase (RdRp) and the
391 nucleocapsid (N) genes; (ii) the Charité: SARS-CoV2 (E/RP) assay (Bio-Manguinhos/Fiocruz)
392 targeting the E gene, and (iii) the GeneFinder COVID-19 Plus RealAmp Kit (Osang Healthcare,
393 South Korea) supplied by the BrMoH, Butantan Institute and the Pan-American Health
394 Organization (OPAS).

395

396 *cDNA synthesis and whole genome sequencing*

397 Samples were selected for sequencing based on the Ct value (≤ 30) and availability of
398 epidemiological metadata, such as date of sample collection, sex, age and municipality of
399 residence. The preparation of SARS-CoV-2 genomic libraries was performed using both the
400 Illumina COVIDSeq test following the manufacturer's instructions and nanopore sequencing
401 using the ARTIC Network primal scheme (<https://github.com/artic-network/artic->

402 ncov2019/tree/master/primer_schemes/nCoV-2019/V3)³⁶. The normalized libraries were loaded
403 onto a 300-cycle MiSeq Reagent Kit v2 and run on the Illumina MiSeq instrument (Illumina, San
404 Diego, CA, USA).

405 Due to regional characteristics and the accessibility of resources of the different Brazilian
406 and Paraguayan laboratories, we also applied field SARS-CoV-2 sequencing using the Oxford
407 Nanopore MinION technology. In this case the SuperScript IV Reverse Transcriptase kit
408 (Invitrogen) was initially used for cDNA synthesis following the manufacturer's instructions.
409 The cDNA generated was subjected to multiplex PCR sequencing using the Q5 High Fidelity
410 Hot-Start DNA Polymerase (New England Biolabs) and a set of specific primers designed by the
411 ARTIC Network for sequencing the complete SARS-CoV-2 genome (Artic Network version
412 3)³⁶. PCR conditions have been previously reported in³⁶. All experiments were performed in a
413 biosafety level-2 cabinet. Amplicons were purified using 1x AMPure XP Beads (Beckman
414 Coulter) and quantified on a Qubit 3.0 fluorimeter (Thermofisher Scientific) using Qubit™
415 dsDNA HS Assay Kit (Thermofisher Scientific). DNA library preparation was performed using
416 the Ligation Sequencing Kit LSK109(Oxford Nanopore Technologies) and the Native Barcoding
417 Kit (NBD104 and NBD114, Oxford Nanopore Technologies). Sequencing libraries were loaded
418 into a R9.4 flow cell (Oxford Nanopore Technologies). In each sequencing run, we used negative
419 controls to prevent and check for possible contamination with less than 2% mean coverage.

420

421 *Generation of consensus sequences from Illumina and nanopore*

422 The genome assembly pipeline for Illumina reads involved: (i) read trimming and filtering using
423 Trimmomatic³⁷; (ii) minimap2³⁸ for read mapping against the reference strain (Wuhan-Hu-1
424 genome reference - NCBI accession NC_045512.2); (iii) samtools³⁹ for sorting and indexing;

425 (iv) Pilon⁴⁰ for improving the indel detection; (v) bwa mem⁴¹ for remapping against Pilon's
426 generated consensus; (vi) samtools mpileup to generate alignment quality values; (vii) seqtk⁴² to
427 generate a quasi-final genome version; (viii) bwa mem for a 3rd round of remapping reads
428 against the quasi-final genome; and (ix) samtools depth to assess position depths given the *.bam
429 file from the previous step (nucleotide positions with read depth < 5 are denoted as "N").

430 Oxford Nanopore sequencing raw files were basecalled using Guppy v3.4.5 and barcode
431 demultiplexing was performed using qcat. Consensus sequences were generated by *de novo*
432 assembling using Genome Detective⁴³ that uses DIAMOND to identify and classify candidate
433 viral reads in broad taxonomic units, using the viral subset of the Swissprot UniRef protein
434 database. Candidate reads were next assigned to candidate reference sequences using NCBI
435 blastn and aligned using AGA (Annotated Genome Aligner) and MAFFT. Final contigs and
436 consensus sequences are then available as FASTA files.

437

438 *Data quality control and global data set collection*

439 To ensure the quality of the genome sequences generated in this study and to guarantee the
440 highest possible phylogenetic accuracy, only genomes >29,000bp and <1% of ambiguities were
441 considered (n=3,866). Multiple sequence alignment was performed with MAFFT⁴⁴ and a
442 preliminary phylogenetic tree was inferred using the maximum likelihood method in IQ-TREE2,
443 employing the GTR+I model of nucleotide substitution. Prior to further phylogenetic analysis
444 our data set was also assessed for both sequences with low data quality (e.g. with assembling
445 issues, sequencing and alignment errors, data annotation errors and sample contamination) and
446 for molecular clock signal (i.e. temporal structure) using TempEst v1.5.3⁴⁵.

447 We appended the 3,866 genome sequences newly generated under this project with an
448 extensive reference data set of SARS-CoV-2 sequences sampled globally collected since the start
449 of the outbreak, including n=13,328 near-complete genomes from Brazil and n=102 from
450 Paraguay (sampled up to June 30, 2021). A unique set of external references (n=7,992) were
451 obtained by including all the non-Brazilian and non-Paraguayan sequences from the global and
452 South American NextStrain builds (date of access; June 30th, 2021). These global references
453 were further supplemented by the inclusion of a random sample of P.1 and P.2 lineages from
454 around the world. This approach was taken to ensure we captured sufficient global sequence
455 diversity while at the same time enriching our data set with South American sequences with
456 whom Brazil and Paraguay share borders. Additionally, during our down sampling strategy, we
457 took into account that the different sequencing efforts employed by different Brazilian states
458 resulted in differing numbers of available genomes for each state/region. For this reason, we
459 selected reference sequences considering both the number of reported cases for each state and the
460 number of available genome sequences, aiming at building a more representative data set (**Fig.**
461 **S3**).

462

463 *Phylogenetic analysis*

464 Sequences were aligned using MAFFT⁴⁴ and submitted to IQ-TREE2 for maximum likelihood
465 (ML) phylogenetic analysis⁴⁶ employing the general time reversible (GTR) model of nucleotide
466 substitution and a proportion of invariable sites (+I) as selected by the ModelFinder application.
467 Branch support was assessed using the approximate likelihood-ratio test based on the bootstrap
468 and the Shimodaira–Hasegawa-like procedure (SH-aLRT) with 1,000 replicates.

469 The raw ML tree topology was then used to estimate the number of viral transmission
470 events between various Brazilian regions and the rest of the world. TreeTime⁴⁷ was used to
471 transform this ML tree topology into a dated tree using a constant mean rate of 8.0×10^{-4}
472 nucleotide substitutions per site per year, after the exclusion of outlier sequences. A migration
473 model was fitted to the resulting time-scaled phylogenetic tree in TreeTime, mapping country
474 and regional locations to tips and internal nodes⁴⁷. Using the resulting annotated tree topology
475 we were able to count the number of transitions (i.e. virus importations and exportations) within
476 different Brazilian regions and between Brazil and the rest of the world. Importantly, this
477 analysis was not dependent on a monophyletic clustering of SARS-CoV-2 in Brazil. To provide
478 a measure of confidence in the time and source of viral transitions, we performed the discrete
479 ancestral state reconstruction on 10 bootstrap replicate trees (**Fig. S4-S6**).

480

481 *Lineage classification*

482 We used the dynamic lineage classification as specified in the Phylogenetic Assignment of
483 Named Global Outbreak LINEages (Pangolin version 3.1.7) protocol⁴⁸. This was aimed at
484 identifying the most epidemiologically important lineages of SARS-CoV-2 circulating within
485 South America (Brazil and Paraguay). Both VOCs and VUMs were designated based on the
486 World Health Organization framework as of July, 2021.

487

488 *Phylogeographic reconstruction*

489 VOCs and VUMs that emerged in Brazil (i.e. P.1 and P.2) were identified as monophyletic
490 groups on the time-resolved phylogenetic trees (**Fig.2 and Fig. S7**). Genome sequences from
491 these lineages were then extracted to infer continuous phylogeography histories using the

492 Markov chain Monte Carlo (MCMC) method in BEAST v1.10.4⁴⁹, employing the HKY + Γ
493 _nucleotide substitution model and a strict molecular clock in BEAST v.1.10.4 that assumes constant
494 evolutionary rates throughout the phylogeny.

495 Due to the huge size of the largest clusters we down-sampled them to <600 taxa per clade
496 to infer phylogeographies within a manageable time frame. Accordingly, we retained the ten
497 earliest sequences from each unique sampling location within Brazil and a random distribution
498 over the remaining samples from each location (n=531 for P.1 and n=428 for P.2). Briefly,
499 sequences from the subsampled cluster were aligned using MAFFT and preliminary ML trees
500 were inferred in IQ-TREE2 as described above. Prior to phylogeographic analysis, each lineage
501 was also assessed for molecular clock signal using the root-to-tip regression method available in
502 TempEst v1.5.3⁴⁵ following the removal of potential outliers that may violate the molecular
503 clock assumption. We accepted temporal structure when the correlation coefficient was > 0.2 ⁵⁰.
504 Linear regression of root-to-tip genetic distances against sampling dates indicated that the SARS-
505 CoV-2 sequences from Gamma and Zeta evolved in a relatively clock-like manner ($r^2= 0.5$;
506 coefficient correlation= 0.45 for Gamma and $r^2= 0.5$; coefficient correlation= 0.40 for Zeta) (**Fig.**
507 **S7**).

508 We modelled the phylogenetic diffusion and spread of these lineages within Brazil by
509 analysing localized transmission (between Brazilian regions) using a flexible relaxed random
510 walk (RRW) diffusion model^{51,52} that accommodates branch-specific variation in rates of
511 dispersal with a Cauchy distribution and a jitter window size of 0.01⁵². The choice of Cauchy
512 distribution was based on recent studies demonstrating that it is successful for this kind of
513 analyses based on genomes of SARS-CoV-2 and its variants^{4,50,54-56}. For each sequence, latitude
514 and longitude coordinates were attributed. MCMC analyses were set up in BEAST v1.10.4,
515 running in duplicate for 100 million iterations and sampling every 10,000 steps in the chain.

516 Convergence for each run was assessed in Tracer v1.7.1 (ESS for all relevant model parameters
517 >200). Maximum clade credibility trees for each run were summarized using TreeAnnotator after
518 discarding the initial 10% as burn-in. While the sampling is relatively homogeneous among
519 sampled locations, the phylogeographic reconstruction will of course remain sampling-
520 dependent. Hence, differences in sampling effort may have impacted the estimated transition
521 frequencies between locations. Despite this caveat, the phylogeographic analysis still provides
522 important information on the history and dynamics of dispersal of the lineages sampled, which
523 can in turn provide insights into the connectivity of locations along the transmission network.
524 Finally, we used the R package “seraphim”⁵⁵ to extract and map spatiotemporal information
525 embedded in the posterior trees. Note that a transmission link on the phylogeographic map can
526 denote one or more transmission events depending on the phylogeographic inference.

527

528 *SARS-CoV-2 time series from Brazil*

529 Data from weekly notified and laboratory confirmed cases of infection by SARS-CoV-2 in
530 Brazil, were supplied by the Brazilian Ministry of Health, as made available by the COVIDA
531 network at <https://github.com/wcota/covid19br>. For convenience, the geographical locations
532 were aggregated by Brazilian macro regions: North, Northeast, Southeast, South, and Midwest.

533

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682

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687 Molecular screening and produced SARS-CoV-2 genomic data: MG, SNS, VLV, ESR, EVS,
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689 RPS, VVC, ST, VBN, LROS, MKAG, JQL, AAR, NRG, LTW, LBS, RSF, MPFP, MJO, SGF,
690 SV, CA, GPMG, WSF, ARMC, JV, SMVLO, CCMG, MCDR, GNB, MPG, NQM, INR, SR,
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694 CV, GMES, ECO, LD, JC; Analysed the data: MG, VF, EW, HT, JSPL, EJS, RB, JL; Helped
695 with study design and data interpretation: MG, VF, EW, HT, EH, JL, TdO, SCS, MCE, SK,
696 LCJA, DTC; Wrote the initial manuscript, which was reviewed by all authors: MG, SNS, SCS,
697 MCE, SK, LCJA, DTC.

698

699 **Competing interests:** The authors declare no competing interests.

700

701 **Data and materials availability:** All sequences that were generated and used in the present
702 study are listed in table S1-S3 (accessible on the GitHub repository) along with their GISAID
703 sequence IDs, dates of sampling, the originating and submitting laboratories and main authors.

704 All input files (e.g. alignments or XML files), all resulting output files and scripts used in the
705 study are shared publicly on GitHub

706 ([https://github.com/genomicsurveillance/Genomic epidemiology reveals how restriction meas-
707 ures shaped the SARS-CoV-2 epidemic in Brazil](https://github.com/genomicsurveillance/Genomic_epidemiology_reveals_how_restriction_measures_shaped_the_SARS-CoV-2_epidemic_in_Brazil)).

708

709 **ADDITIONAL INFORMATION**

710 **Figure S1. Sequencing statistics and lineage assignment of the SARS-CoV-2 genomes**

711 **generated in this study.** (A) Genome coverage plotted against RT-qPCR cycle threshold value.

712 Colours represent genomes obtained from Brazil (green) and Paraguay (orange), respectively.

713 (B) Number of genomes obtained in this study from Brazil and Paraguay. Colours represent

714 different lineages.

715

716 **Figure S2. Fully annotated Brazilian SARS-CoV-2 time tree.** Time resolved maximum

717 likelihood phylogeny containing 17,135 high quality Brazilian SARS-CoV-2 near-full-genome

718 sequences (n=3,866 generated in this study) analysed against a backdrop of global reference

719 sequences. Variants of interest (VUM) and concern (VOC) are highlighted.

720

721 **Figure S3.** Number of total cases plotted against the number of sequences available for each
722 location Brazilian state/region.

723

724 **Figure S4. Sensitivity of the viral introduction analysis to geographic sampling biases. A, B)**

725 Sensitivity analysis, by performing the discrete ancestral state reconstruction on 10 bootstrap

726 replicate trees, showing how the proportion of international imports and exports into and from

727 Brazil from external locations did not vary in the time and source of viral transitions. **C-K)**

728 Equivalent sensitivity analysis showing how the number of viral exchanges within Brazilian

729 regions by counting the state changes from the root to the tips did not vary in the time and source

730 of viral transitions.

731

732 **Figure S5. Sensitivity of the Gamma viral introduction analysis to geographic sampling**

733 **biases. A, B)** Sensitivity analysis, by performing the discrete ancestral state reconstruction on 10

734 bootstrap replicate trees, showing how the proportion of international imports and exports of

735 Gamma variant into and from Brazil from external locations did not vary in the time and source

736 of viral transitions. **C-K)** Equivalent sensitivity analysis showing how the number of exchanges

737 of the Gamma variant between Brazilian regions did not vary in the time and source of viral

738 transitions.

739

740 **Figure S6. Sensitivity of the Zeta viral introduction analysis to geographic sampling biases.**

741 **A, B)** Sensitivity analysis, by performing the discrete ancestral state reconstruction on 10

742 bootstrap replicate trees, showing how the proportion of international imports and exports of

743 Zeta variant into and from Brazil from external locations did not vary in the time and source of

744 viral transitions. **C-K)** Equivalent sensitivity analysis showing how the number of exchanges of
745 the Zeta variant between Brazilian regions did not vary in the time and source of viral transitions.

746

747 **Figure S7. Temporal Signal.** (A) Root-to-tip regression plots for Brazilian lineages of concern
748 and of interest (P.1 – Gamma and P.2- Zeta).

749

750 **Supplementary Table 1.** Information on the n=3803 SARS-CoV-2 Brazilian samples sequenced
751 as part of this study.

752

753 **Supplementary Table 2.** Information on the n=63 SARS-CoV-2 from Paraguay samples
754 sequenced as part of this study.

755 **Supplementary Table 3.** GISAID acknowledgment table.

756

757 **FIGURE LEGENDS**

758 **Fig. 1. Key events following the first confirmed infection of SARS-CoV-2 in Brazil.** (A)

759 Timeline of SARS-CoV-2 key events in Brazil. The Brazilian map was colored according to
760 geographical macro region: North (red), Northeast (green), Southeast (purple), Midwest (light

761 blue) South (light orange). (B) Epidemic curve showing the progression of reported daily viral
762 infection numbers in Brazil from the beginning of the epidemic (grey) and deaths (red) in the

763 same period, with restriction phases indicated along the bottom. (C) Map of cumulative SARS-
764 CoV-2 cases per 100,000 inhabitants in Brazil up to June 2021.

765

766 **Fig. 2. Phylogenetic analysis and SARS-CoV-2 lineage dynamics in Brazil.** (A) Map of Brazil
767 with the number of sequences in GISAID as of 30th June 2021. (B) Temporal sampling of
768 sequences in Brazilian states through time with VOCs highlighted and annotated according to
769 their PANGO lineage assignment. (C) Time resolved maximum likelihood phylogeny containing
770 high quality near-full-genome sequences from Brazil (n=3866) obtained from this study, analysed
771 against a backdrop of global reference sequences (n=25,288). Variants under monitoring (VUM)
772 and concern (VOC) are highlighted on the phylogeny. (D) Sources of viral introductions into
773 Brazil characterized as external introductions from the rest of the world. (E) Sources of viral
774 exchanges (imports and exports) in and outside Brazil. (F) Number of viral exchanges within
775 Brazilian regions by counting the state changes from the root to the tips of the phylogeny in
776 panel C.

777

778 **Fig. 3. Spatiotemporal spread of VOC and VUM in Brazil.** (A) Phylogeographic
779 reconstruction of the spread of the Gamma VOC in Brazil. Circles represent nodes of the
780 maximum clade credibility phylogeny and are colored according to their inferred time of
781 occurrence. Shaded areas represent the 80% highest posterior density interval and depict the
782 uncertainty of the phylogeographic estimates for each node. Differences in population density
783 are shown on a dark-white scale; B) Phylogeographic reconstruction of the spread of the Zeta
784 VUM across Brazil. Circles represent nodes of the maximum clade credibility phylogeny and are
785 colored according to their inferred time of occurrence. Shaded areas represent the 80% highest
786 posterior density interval and depict the uncertainty of the phylogeographic estimates for each
787 node. Differences in population density are shown on a dark-white scale; In both Panels (A) and
788 (B) solid curved lines denote the links between nodes and the directionality of movement is anti-

789 clockwise along the curve (as shown in the “dispersal direction” sublegends). (C) Number of
790 exchanges of the Gamma variant between Brazilian regions (N=North; NE=Northeast;
791 MD=Midwest; SE=Southeast; S=South); (D) Number of exchanges of the Zeta variant between
792 Brazilian regions; (E) Sources of viral export of the VOC and VUM from Brazil to the rest of the
793 world.

794

795 **Fig. 4. The SARS-CoV-2 epidemic in Paraguay.** (A) Epidemic curve showing the progression
796 of reported viral infection numbers in Paraguay from the beginning of the epidemic (grey) and
797 deaths (red) in the same period; (B) Progressive distribution of the top 20 PANGO lineages in
798 Paraguay over time; (C) Time resolved maximum likelihood tree containing (n=63) high quality
799 near-complete genome sequences from Paraguay obtained in this study analysed against a
800 backdrop of global reference sequences. VUM and VOCs are highlighted on the phylogeny.
801 Small circles indicate genome sequences from Brazil. Bigger circles indicate sequences from
802 Paraguay. New genomic sequences from Paraguay obtained in this study are highlighted with a
803 red border.

26 Feb
1st confirmed case
in South America,
61 yo male returning
traveller from Italy

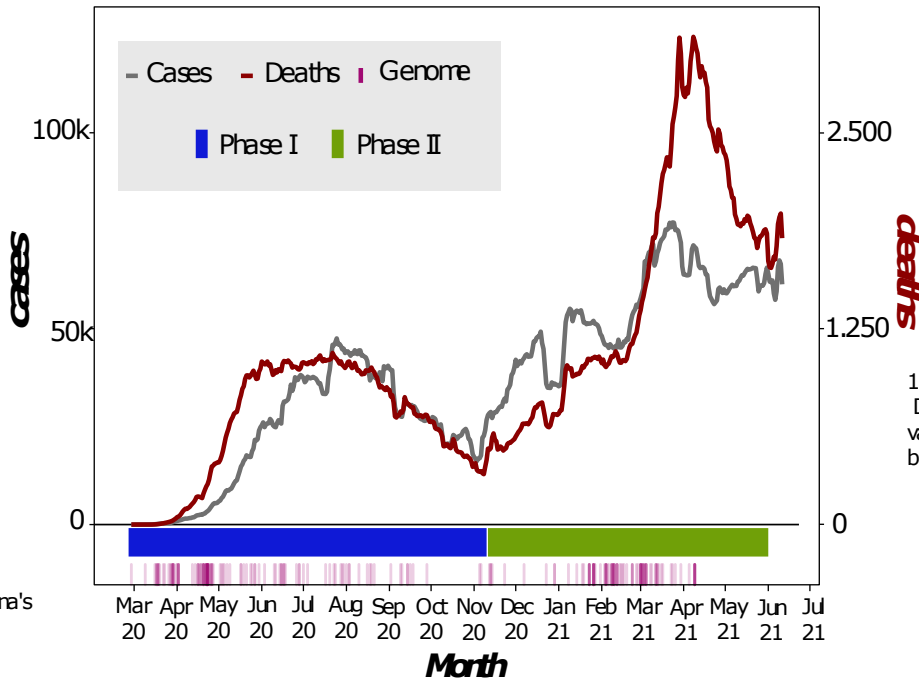
A

10 April
The virus had reached
remote locations;
a Yanomami teen died
of it in Roraima

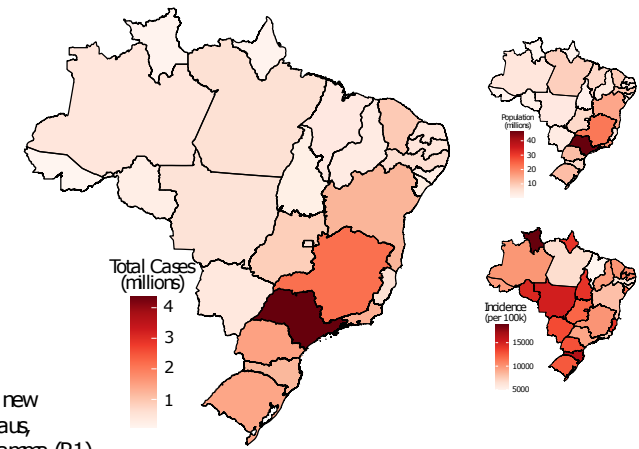
20 April
Several cities started
to ease social isolation
guidelines in favor
of contact tracing.

30 April
Brazil overtook China's
official number of
confirmed cases,
surpassing 87,000

B



C



13 January:
Discovery of a new
variant in Manaus,
being called Gamma (P.1)

17 January:
Anvisa has authorized the
emergency use of CoronaVac
and the AstraZeneca vaccines

14 May
Delta (B.1.617.2) Variant is identified
in São Paulo



2020

2021

21 Mar
All Brazilian states reported
at least one confirmed
case of COVID-19, BR-MoH
declares large-scale community
transmission in the country

17 Mar
1st confirmed death for
COVID-19, 61 yo male

11 Mar
SARS-CoV-2 confirmed as pandemic
by World Health Organization

Oct-Nov
Zeta (P.2) Variant is identified
in Rio de Janeiro

31 December:
Alpha (B.1.1.7) Variant is identified
in São Paulo

7 April:
For the first time,
Brazil has recorded
over 4,000 confirmed
COVID-19 deaths in 24 hours

9 June:
Brazil registered
50 M people vaccinated

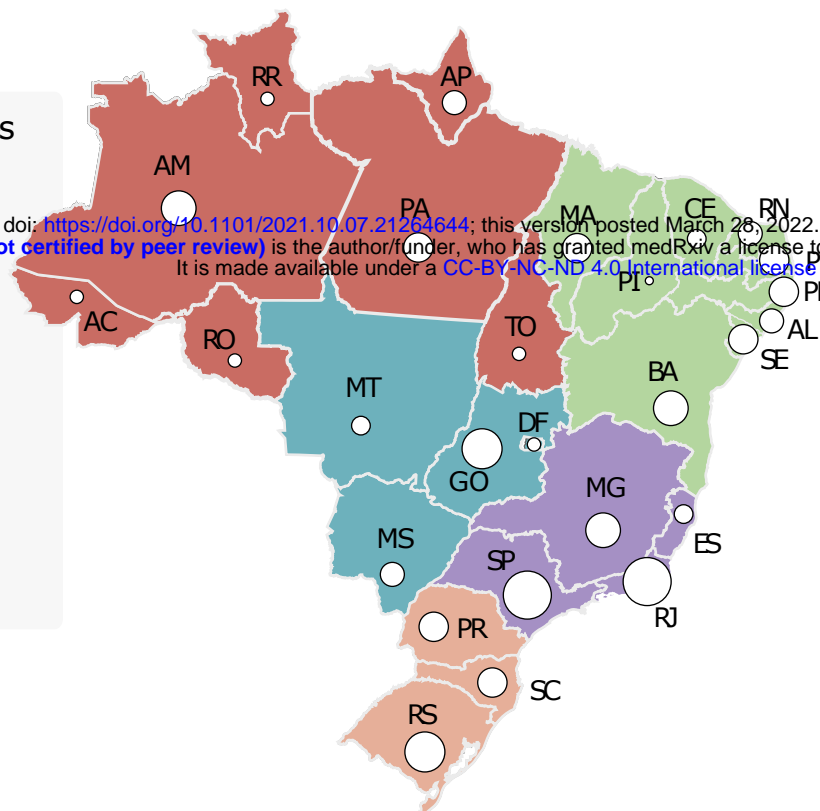
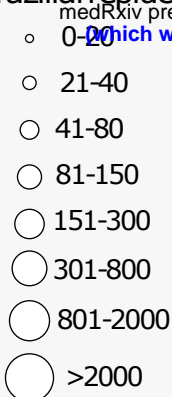
04 April
Beta (B.1.351) Variant is identified
in São Paulo

Legend

- Restriction measures
- Vaccination campaign
- First confirmed case
- First Brazilian VOI detected
- First confirmed death
- First Brazilian VOC detected

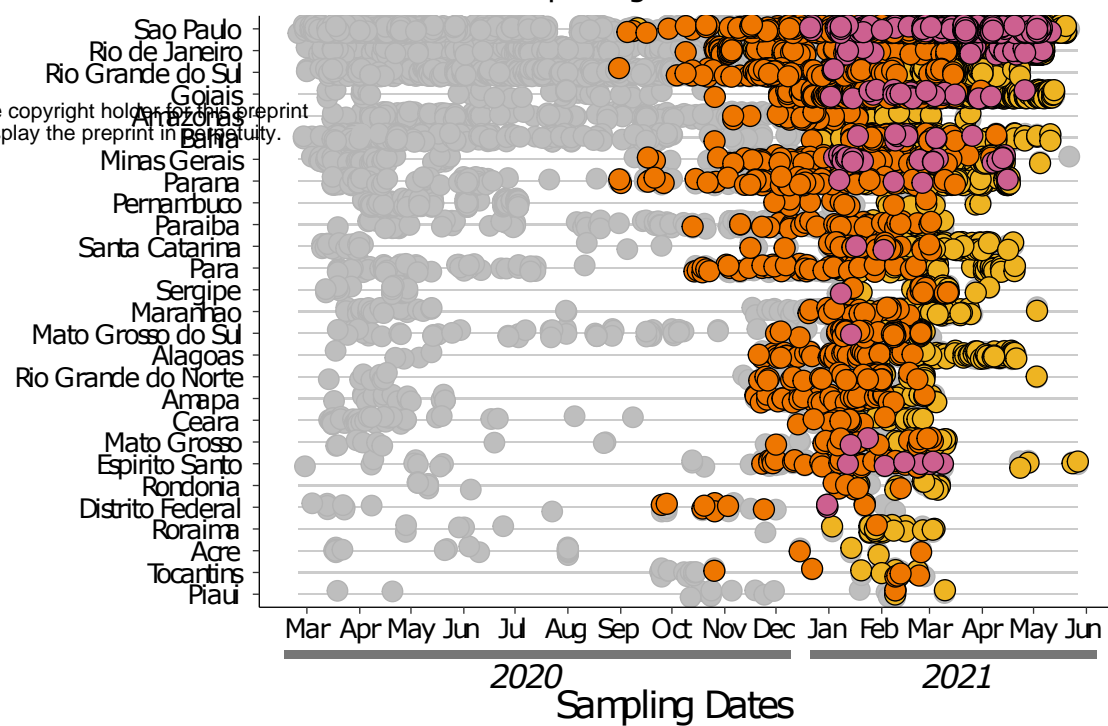
A

SARS-CoV-2 genomes from the Brazilian epidemic

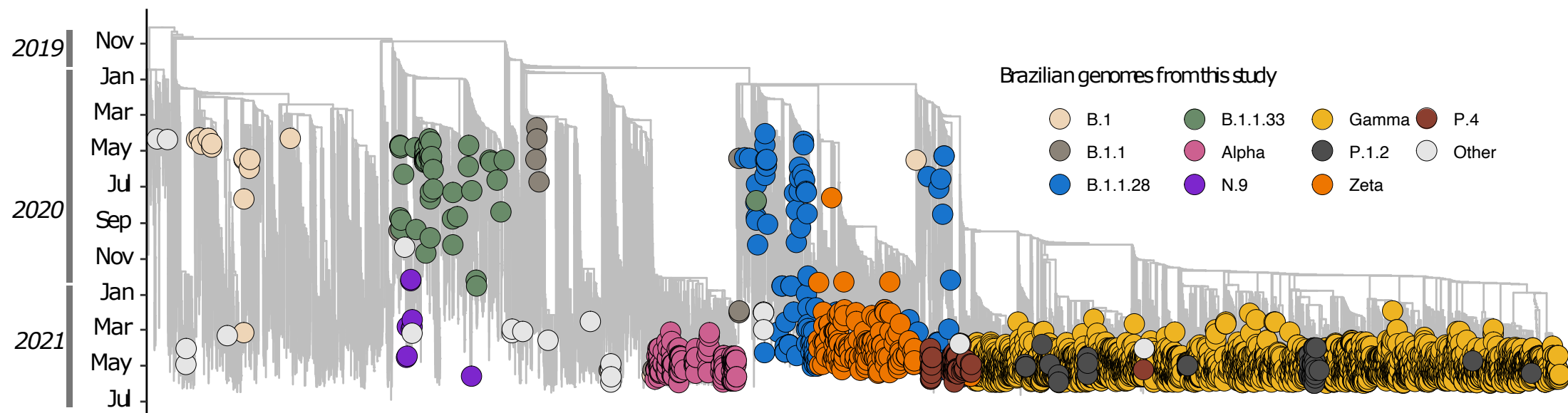


B

VOCs - VOIs Alpha Gamma Zeta Other Lineages
Brazilian states with sequencing data

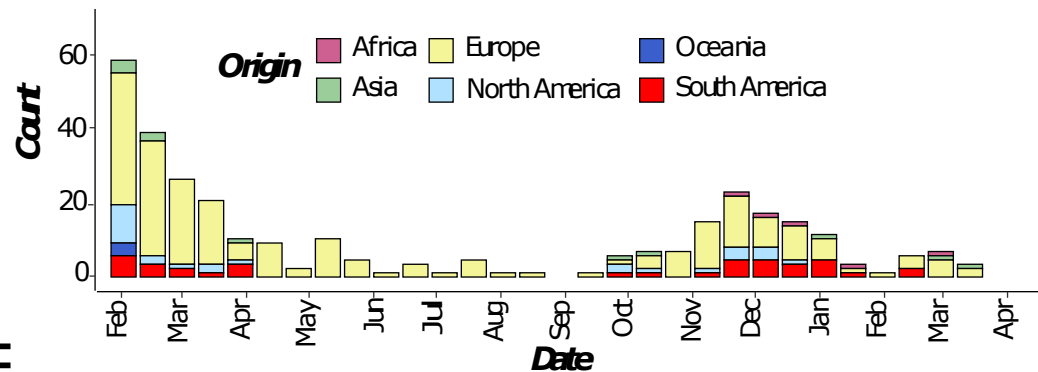


C



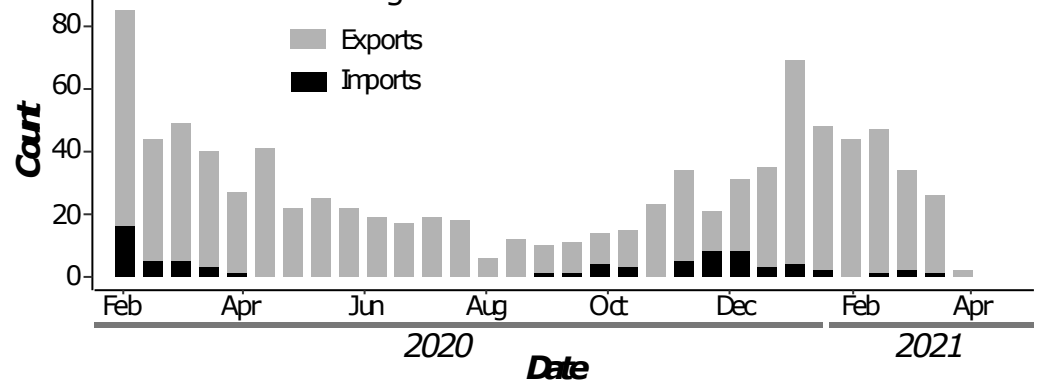
D

International introductions into Brazil



E

Source of viral exchanges



F

