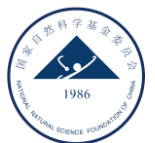




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# What relevant knowledge did we have before the COVID-19 pandemic?

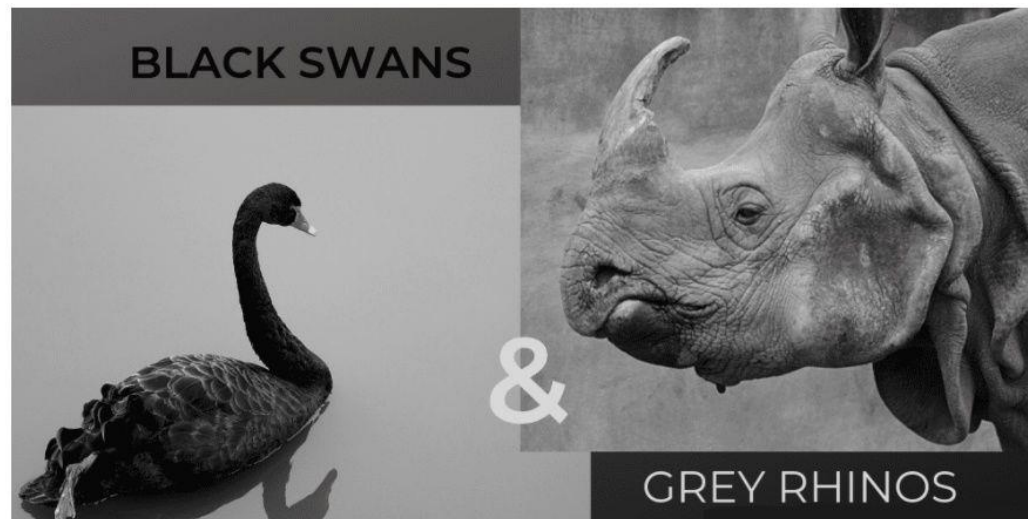
George Fu Gao

Institute of Microbiology, Chinese Academy of Sciences  
Chinese Center for Disease Control and Prevention

Aug 29<sup>th</sup>, 2022



# Black Swan or Grey Rhino?



**GPMB 2019  
Annual Reports:  
Flu, Coronavirus**

**Not ready  
We cannot work together**



# A global pandemic exercise

## CAPS

### Coronavirus Associated Pneumonia Syndrome



- Event 201 was a pandemic tabletop exercise.
- October 18, 2019, Friday, New York, US
- <https://www.centerforhealthsecurity.org/event201/about>



# A novel coronavirus outbreak of global health concern

Chen Wang, Peter W Horby, Frederick G Hayden, George F Gao

In December, 2019, Wuhan, Hubei province, China, became the centre of an outbreak of pneumonia of unknown cause, which raised intense attention not only within China but internationally. Chinese health authorities did an immediate investigation to characterise and control the disease, including isolation of people suspected to have the disease, close monitoring of contacts, epidemiological and clinical data collection from patients, and development of diagnostic and treatment procedures. By Jan 7, 2020, Chinese scientists had isolated a novel coronavirus (CoV) from patients in Wuhan. The genetic sequence of the 2019 novel coronavirus (2019-nCoV) enabled the rapid development of point-of-care real-time RT-PCR diagnostic tests specific for 2019-nCoV (based on full genome sequence data on the Global Initiative

on Sharing All Influenza Data [GISAID] platform). Cases of 2019-nCoV are no longer limited to Wuhan. Nine exported cases of 2019-nCoV infection have been reported in Thailand, Japan, Korea, the USA, Vietnam, and Singapore to date, and further dissemination through air travel is likely.<sup>1-5</sup> As of Jan 23, 2020, confirmed cases were consecutively reported in 32 provinces, municipalities, and special administrative regions in China, including Hong Kong, Macau, and Taiwan.<sup>3</sup> These cases detected outside Wuhan, together with the detection of infection in at least one household cluster—reported by Jasper Fuk-Woo Chan and colleagues<sup>6</sup> in *The Lancet*—and the recently documented infections in health-care workers caring for patients with 2019-nCoV indicate human-to-human transmission and thus the risk of much wider spread of the disease. As of

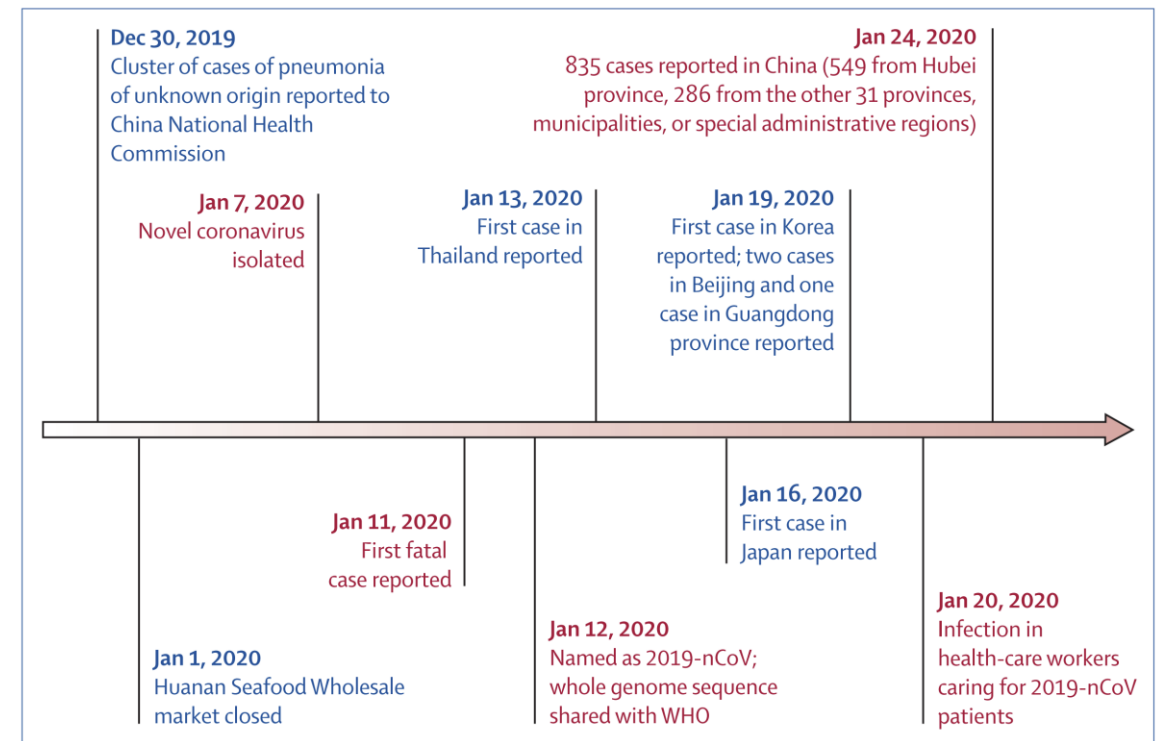
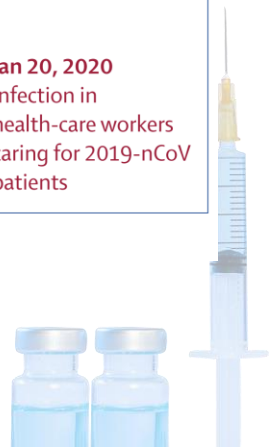


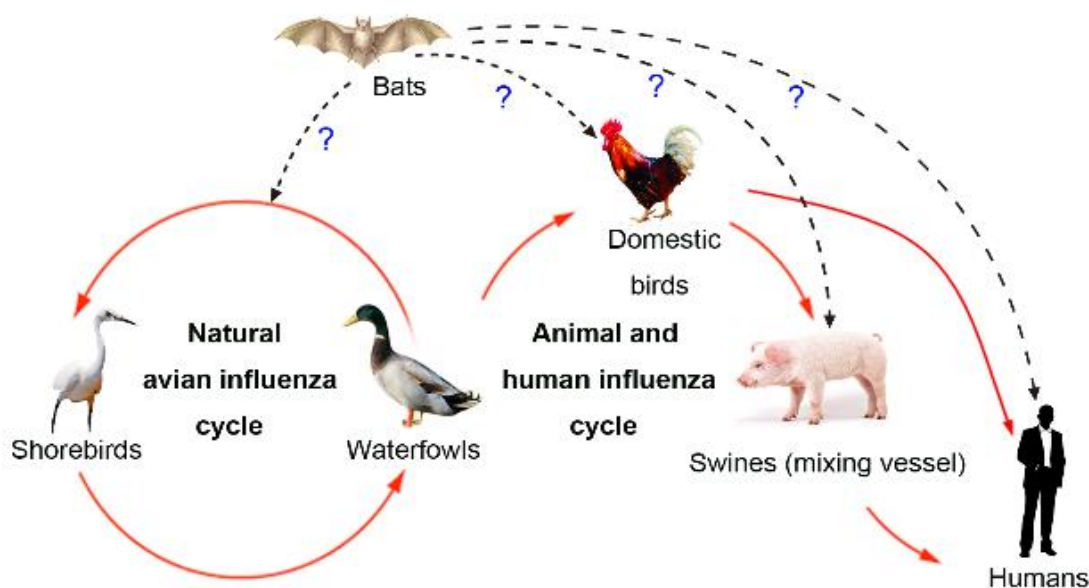
Figure: Timeline of early stages of 2019-nCoV outbreak

**Global Concern**  
**Published: January 24, 2020**

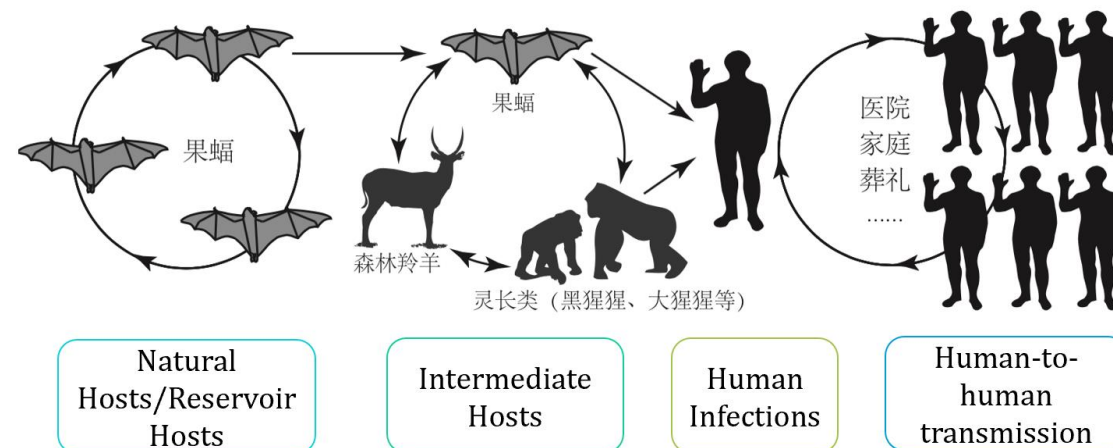




# Previous knowledge on the zoonotic viruses and spillover events



## Natural Cycle of the Influenza viruses



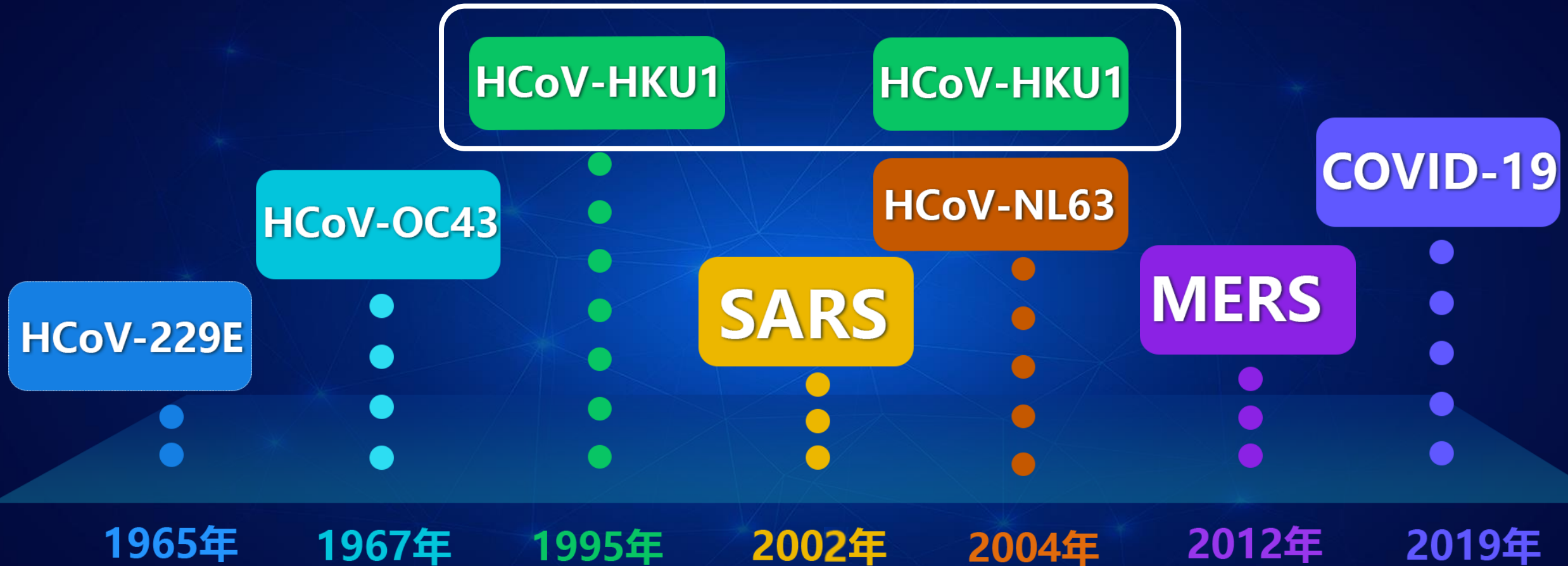
EMERGING INFECTIOUS DISEASES  
**Link to MERS Virus Underscores Bats' Puzzling Threat**

## Ecology of Ebola



# Seven coronaviruses can infect human beings

## Two newly discovered

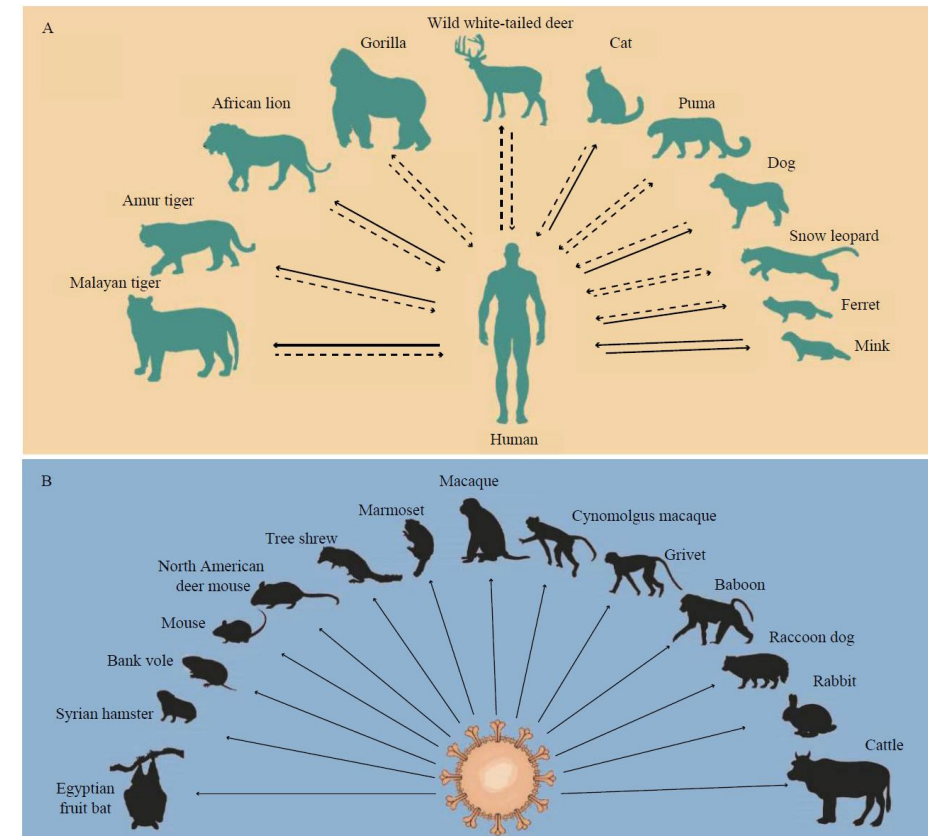
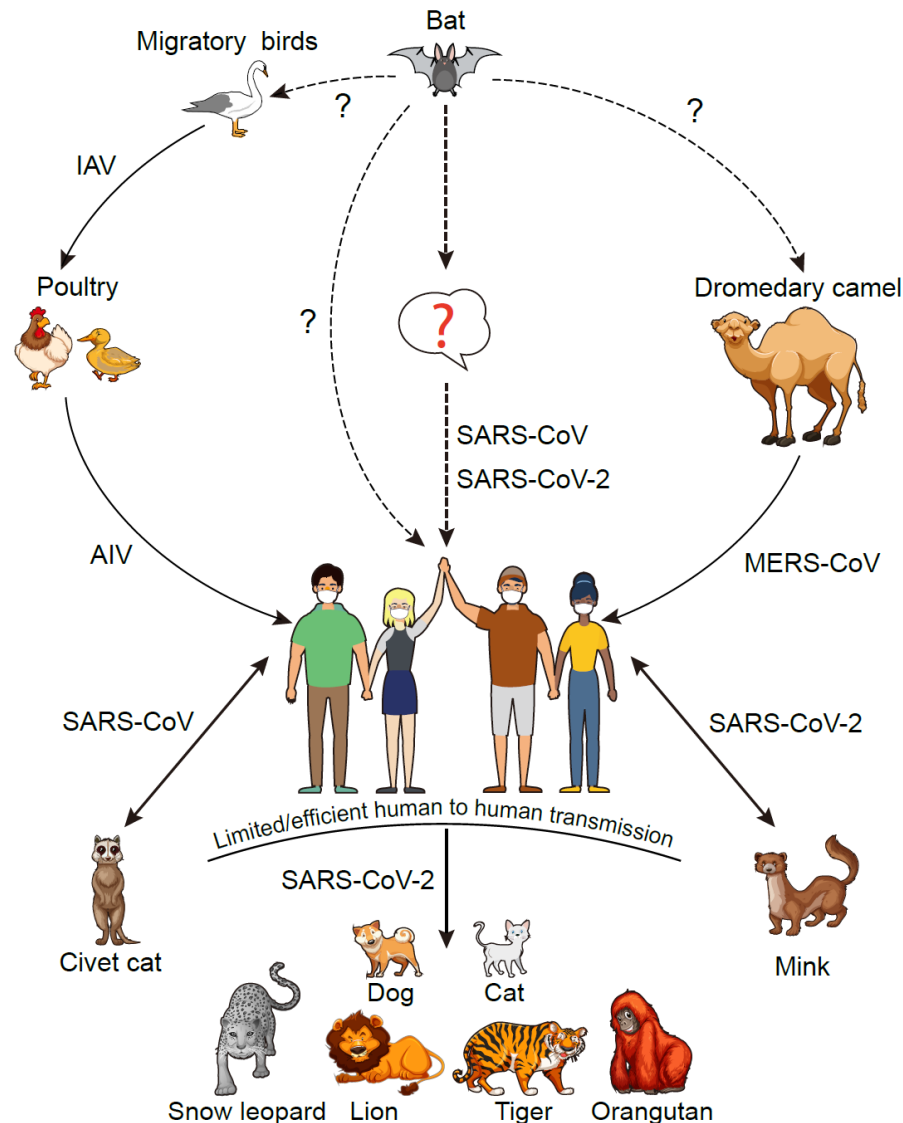


# Current SARS-CoV-2 is expanding the territories

## Perspectives

### COVID-19 Expands Its Territories from Humans to Animals

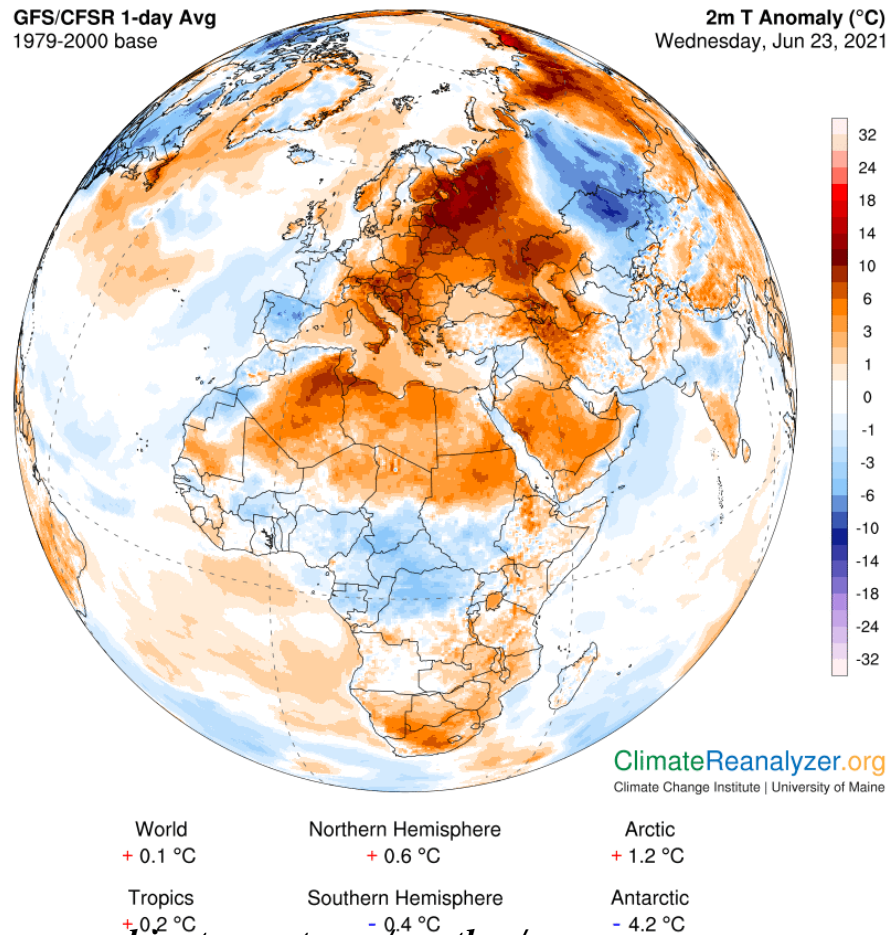
George F. Gao<sup>1,2,\*</sup>; Liang Wang<sup>2</sup>





# Why do we have so many emerging viruses?

## Climate and ecological changes



## Human behavior changes







# It is likely not a matter of if, but when

Trends in Microbiology

CellPress

## Review

### Epidemiology, Genetic Recombination, and Pathogenesis of Coronaviruses

Shuo Su,<sup>1,\*</sup> Gary Wong,<sup>2,3,4</sup> Weifeng Shi,<sup>5</sup> Jun Liu,<sup>4,6</sup>  
Alexander C.K. Lai,<sup>7</sup> Jiyong Zhou,<sup>1</sup> Wenjun Liu,<sup>3,4</sup>  
Yuhai Bi,<sup>2,3,4,\*</sup> and **George F. Gao**<sup>2,3,4,6,8,9,\*</sup>

## Concluding Remarks

The result from a high frequency of recombination events in CoVs is the generation of novel viruses with a high genetic diversity, with unpredictable changes in virulence during human infections. With multiple species of CoVs circulating in the wild amongst different animal species that may constantly interact with one another, it is likely not a matter of if, but when, the next recombinant CoV will emerge and cause another outbreak in the human population. As such, some crucial future areas of investigation include: (i) the prevalence of HCoV already circulating within the animal population, (ii) the commonality of coronavirus recombination in animals, (iii) animals which may potentially serve as mixing vessels for the generation of novel recombinant CoVs, and (iv) a surveillance network to monitor and predict the potential emergence of a highly virulent, recombinant CoV from animals (see Outstanding Questions). Furthermore, lessons from the SARS-CoV and MERS-CoV outbreaks must be urgently learned in advance to effectively prepare for the next CoV outbreak.

**..., it is likely not a matter of if, but when, the next recombinant CoV will emerge and cause another outbreak in the human population.**

**Trends in Microbiology**  
**2016 June**  
**Vol. 24, No 6: 490-502**





# Discovery of SARS-CoV-2

**2<sup>nd</sup> Jan. 2020**

Obtaining the RT-PCR results 3 hours after receiving the samples.

**3<sup>rd</sup> Jan. 2020**

Obtaining the full genome sequences of SARS-CoV-2

**7<sup>th</sup> Jan. 2020**

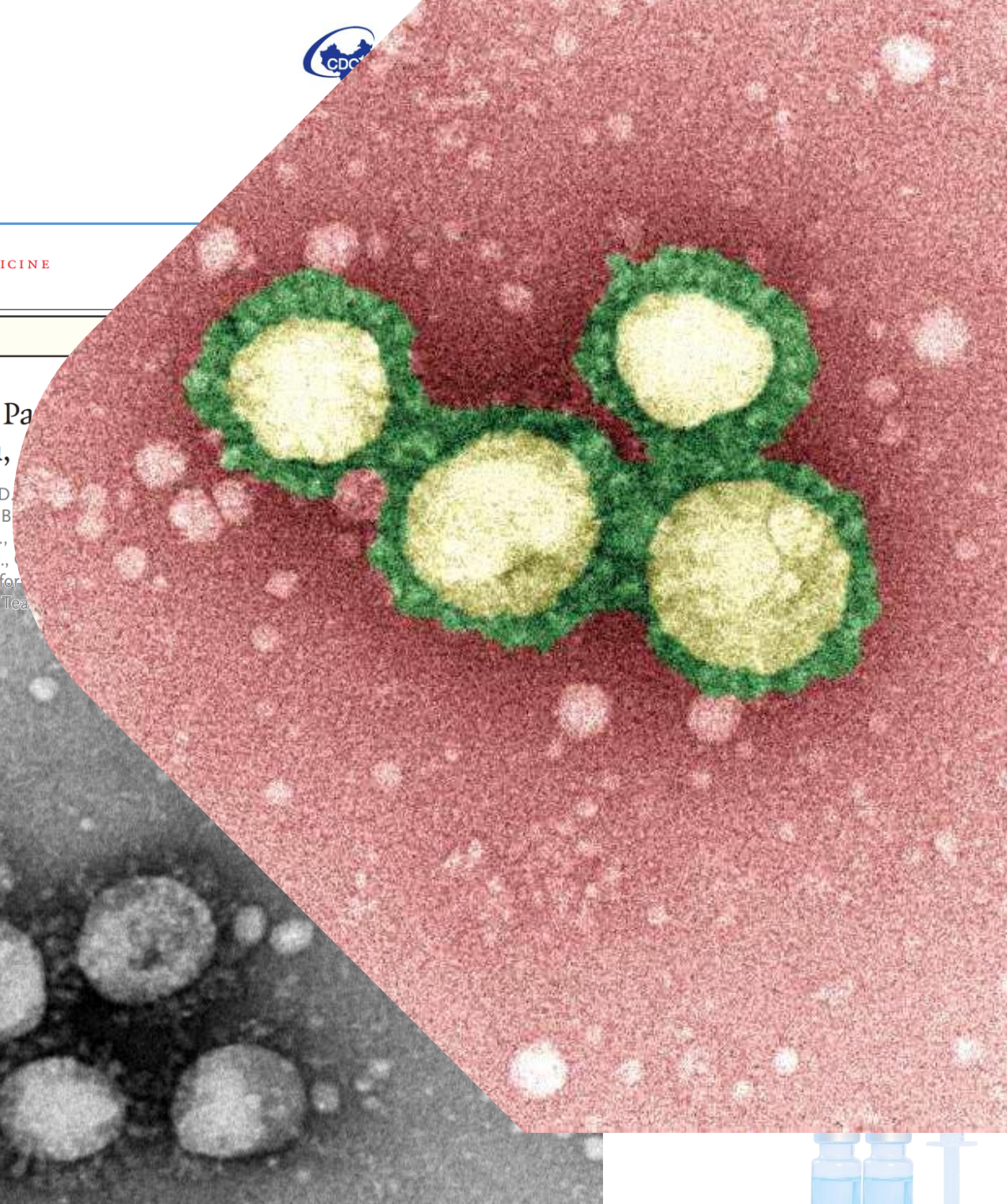
Isolation of SARS-CoV-2

*The NEW ENGLAND JOURNAL of MEDICINE*

## BRIEF REPORT

### A Novel Coronavirus from Patients with Pneumonia in China, 2019

Na Zhu, Ph.D., Dingyu Zhang, M.D., Wenling Wang, Ph.D., Bo Yang, M.S., Jingdong Song, Ph.D., Xiang Zhao, Ph.D., Bo Weifeng Shi, Ph.D., Roujian Lu, M.D., Peihua Niu, Ph.D., Xuejun Ma, Ph.D., Dayan Wang, Ph.D., Wenbo Xu, M.D., George F. Gao, D.Phil., and Wenjie Tan, M.D., Ph.D., for the Coronavirus Investigating and Research Team









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# 4 Stages in China Containment Suppression Accurate Mitigation/Suppression Local transmission again

# China's Contribution to Modern Public Health



# ***Lancet Public Health***

## ***Zhongjie Li, \*George F Gao***

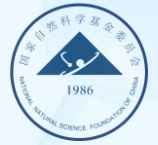
Acceptance analysis and interpretation

2019ph3669

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Comment

## Strengthening public health at the community-level in China



An unprecedented pandemic, COVID-19 is currently hitting the world.<sup>1,2</sup> After the initial outbreak in the city of Wuhan, Hubei province, COVID-19 is under control in China, with a few small waves caused by imported cases,<sup>3,4</sup> all of which have been stopped in China in 2–4 weeks, with between several cases and hundreds of cases per wave. We have seen clear peak–valley intervals with these small waves. It is crucial to understand why and how China has reached such success because it might help other countries. For COVID-19, we believe that active recognition at the community level has

CDC. Regional stations have been kept and renamed as local CDCs, from province to prefecture to county levels, which is different from the US CDC system. Since then, a four-level CDC system has been well built with large capacity and workforce. This system has proven to be the basis for the effective prevention and control of COVID-19. During the pandemic, community-level public health practice has supported health promotion and public understanding of science, leading to strong and intense public involvement in disease control and prevention. A good example is the effective practice of

**Strengthening Public Health at Community-level!**

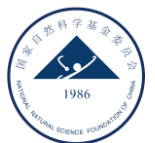




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# Saturated vaccine development Esp. in China



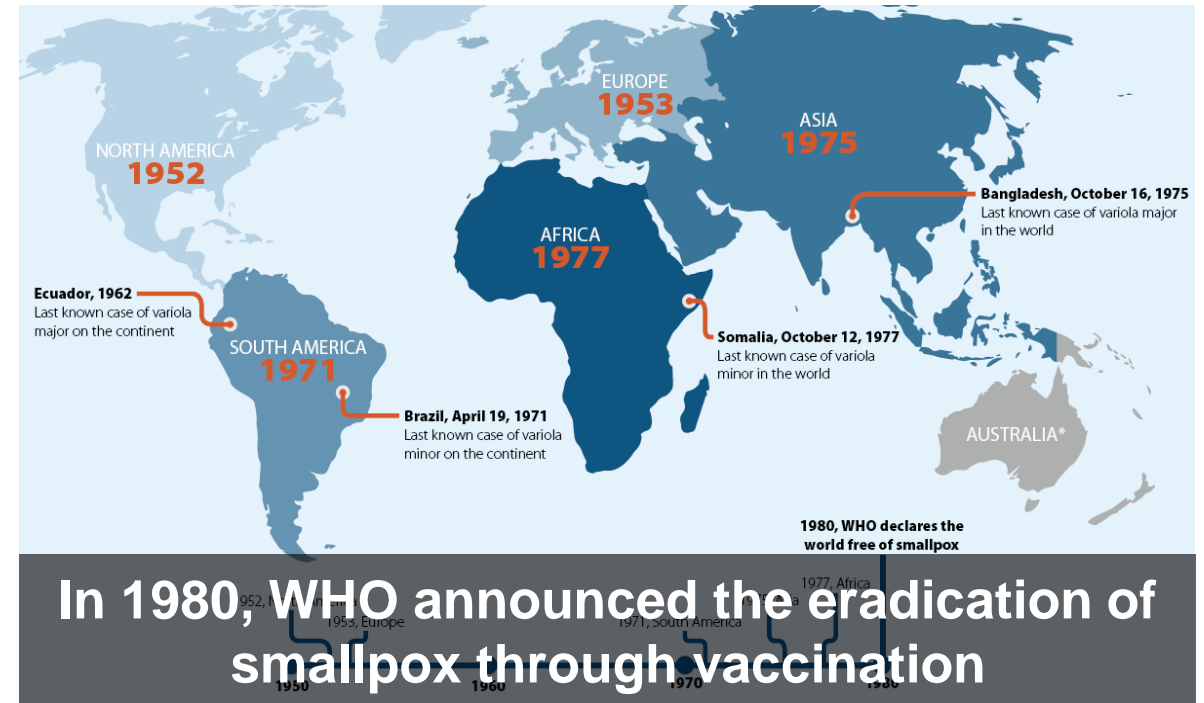
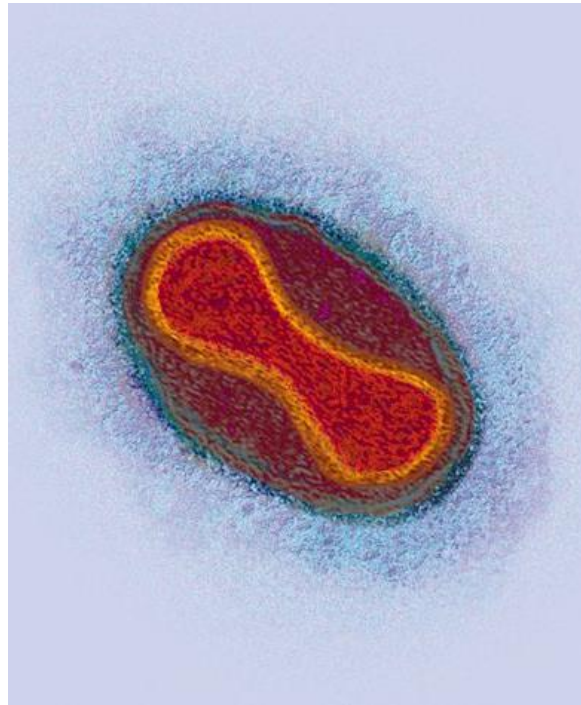
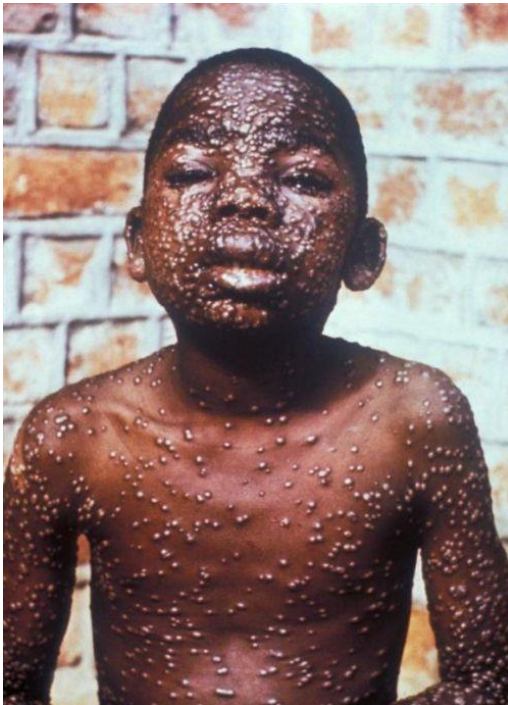
# The vaccine: Smallpox virus eradication



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# Rinderpest is Another Virus that was Eradicated by vaccination



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# Disease X ???

## From “A”IV to “Z”IKV: Attacks from Emerging and Re-emerging Pathogens

George F. Gao<sup>1,2,\*</sup>

<sup>1</sup>Chinese Center for Disease Control and Prevention (China CDC), China

<sup>2</sup>CAS Key Laboratory of Pathogenic Microbiology and Immunology, Institute of Microbiology, Chinese Academy of Sciences (CAS), China

\*Correspondence: gao@im.ac.cn

<https://doi.org/10.1016/j.cell.2018.02.025>

100 years after the infamous “Spanish flu” pandemic, the 2017–2018 flu season has been severe, with numerous infections worldwide. In between, there have been continuous, relentless attacks from (re-)emerging viruses. To fully understand viral pathogenesis and develop effective medical countermeasures, we must strengthen current surveillance and basic research efforts.

This year marks the centenary of the “Spanish flu” pandemic, the most devastating viral pandemic in history caused by an H1N1 influenza A virus that infected over 500 million and killed between 50 and 100 million people. We know to expect a flu season every year; the question is always how severe it will be. With high numbers of influenza infections reported worldwide during this season, we are again reminded of the public health threat stemming from a potential influenza pandemic. The US Centers for Disease Control and Prevention (CDC) reported that this is the first time in the past 15 years that all states in the entire continental USA have reported widespread flu activity during the same week. In China, the reported number of flu cases have increased over 2-fold compared to the flu seasons in the past several years—the second-highest recorded number, just after the 2009 pandemic H1N1 (pH1N1)—and many patients have been hospitalized with severe clinical symptoms. These events have raised concerns that we are in danger of another flu pandemic. Circulating flu viruses are quite diverse this year—including the “swine flu” 2009-pH1N1, H3N2, and influenza B/Victoria and B/Yamagata—and are spread across various geographical locations. The H3N2 subtype is dominant in the UK and the USA, but a mixed pool of pH1N1, H3N2, and influenza B/Yamagata, with a small portion of B/Victoria, have been reported in China. A universal influenza vaccine to combat such mutation-prone viruses is urgently needed yet still far from reach, despite the global efforts. Despite best efforts to anticipate

the emergent strains, vaccines vary from year to year in terms of efficacy, with this year’s providing only moderate protection.

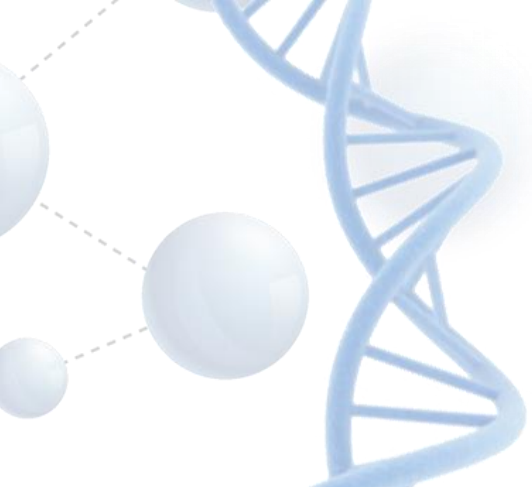
Human infections with different subtypes of avian influenza A viruses (AIVs) have been consistently reported since H5N1 AIV was reported in Hong Kong during 1997 (Yuen et al., 1998). Infections with AIV typically result in high case fatality rates (CFRs) ranging from ~30% to ~70%, and at least 14 influenza A virus subtypes—including the three seasonal flu viruses, H1N1, H2N2, and H3N2—have reportedly infected humans to date (Figure 1). Of note, influenza A virus has a segmented genome with 8 genomic segments encoding at least 10–16 proteins, two of which are hemagglutinin (HA) and neuraminidase (NA). There are currently 16 (+2) HA genes and 9 (+2) NA genes (+2 means two more HA or NA from bat-derived influenza-like viruses, for which only genomic sequences are available, but no alive virus has yet been isolated; Wu et al., 2014). The combination of HA and NA would theoretically yield 144 subtypes of HxNy viruses. Due to the migratory birds’ travel and live poultry trade, which includes the transport of poultry and operation of live poultry markets (LPMs) throughout China and Southeast Asia (Gao, 2014), we should expect more human infections with AIVs in the future. AIVs may supply genomic segments for reassortment with circulating seasonal influenza viruses to generate a novel pathogen with high CFR and pandemic potential. As we can’t yet eradicate seasonal flu, efforts to change the traditional live

poultry trade—for example, the traditional LPMs—in order to restrict the flow of domestic poultry migration may help decrease the probability of the emergence of novel AIV subtypes, even the potential pandemic viruses.

Flu isn’t alone. Coronavirus is another family of emerging pathogens with public health concern. A devastating but quickly conquered outbreak of severe acute respiratory syndrome coronavirus (SARS-CoV) during 2003 transformed China’s approach to outbreak control. A sophisticated surveillance system has since been put into place. While primarily government led, there is extensive collaboration with various institutes in the academic, industry, and healthcare fields to produce a wide-ranging, comprehensive network that issues warnings of an impending outbreak at the earliest opportunity. As exemplified by the Chinese Academy of Sciences Center for Influenza Research and Early-warning (CASCIRE) network, in addition to Chinese National Influenza Center/WHO Collaborating Center for Reference and Research on Influenza under China CDC, such a system can drive basic, applied, and translational research on infectious disease control and prevention (Bi et al., 2017). A related coronavirus, the Middle East respiratory syndrome coronavirus (MERS-CoV), emerged in the Middle East during 2012 and has on occasion caused sporadic infections with imported cases from returning travelers, some of which go on to infect others. One such instance was the importation of a MERS-CoV case into China from South Korea during 2015 (Su et al., 2015), in which the traveler was promptly

# Attacks by EID Gao, Cell, 2018

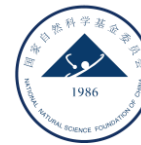




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# THANK YOU!

