Review Article

Recent research progress and current understanding of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)

Running title: Current understanding of SARS-CoV-2

Abstract

Coronaviruses (CoVs) are a large group of enveloped viruses with a positive-sense RNA that have characteristic spikes that project from their surface. CoVs are well known for their large RNA genome (26-32 kb). They primarily affect mammals and birds, causing infections of the respiratory and gastrointestinal tracts. The emergence of human CoVs (HCoVs) has been reported once every ten years for the last three decades. The most recent emergence occurred in December 2019, when a new strain of CoVs named SARS-CoV-2 caused the coronavirus disease 2019 (COVID-19) pandemic, leaving a devastating impact on the global healthcare. The early cases were associated with the Huanan seafood market in Wuhan, although the exact origin of the virus is still being debated. Phylogenetic analysis reveals bats to be the reservoir hosts, but the intermediate host responsible for spill-over into the human population remains unknown. Accumulating evidence cites pangolins based on the similarity of receptor binding domain in spike protein; however, the search for a conclusive intermediate host that aided in the inter-species crossover is still underway. Advances have been made in our understanding of the functions of each structural protein, but certain nonstructural proteins and accessory proteins are yet to be characterised. Owing to the large genetic diversity of CoVs that arise through recombination, genetic variation, or gene gains/losses, future reemergence of CoVs are most likely. In this review, we provide an introduction to CoVs and discuss the origin, virology, genetics, phylogeny, and pathogenesis of SARS-CoV-2 based on relevant

Keywords: 2019-nCoV, coronavirus, HCoV, SARS-CoV-2

Introduction

Coronaviruses (CoVs) belong to a family that contain the largest known RNA viral genome. They are spherical and enveloped viruses, whose size ranges between 80-120 nm in diameter[1]. CoVs primarily affect mammals causing infections of the respiratory and gastrointestinal tracts. They are usually known to cause the seasonal common cold in humans and were not given much importance until the outbreaks of the severe acute respiratory syndrome (SARS) in 2003, middle eastern respiratory syndrome (MERS) in 2012, and the most recent coronavirus disease in 2019 (COVID-19)[2]. A new strain of CoVs called the '2019 novel coronaviruses' (2019-nCoV) or more formally, 'severe acute respiratory syndrome coronavirus 2' (SARS-CoV-2) was found to be causative of the COVID-19 outbreak[3].

The first cases of COVID-19 were found to be associated with a seafood market in Wuhan city, Hubei Province of China[4][5]. What started as a cluster of patients with idiopathic pneumonia in the local hospitals in Wuhan soon resulted in a massive explosion in the number of cases globally. To date, the aetiology of the infection remains unclear, as there are controversies circling the origin of SARS-CoV-2 and the intermediate host responsible for their spill-over to the human population. Phylogenetic analysis revealed a close similarity of SARS-CoV-2 to a bat CoV (RaTG13)[6]. As of August 31, 2020, SARS-CoV-2 has infected 20.1 million people across 188 countries, causing 819,934 deaths. This review aims to provide an overview on our current understanding of the SARS-CoV-2 virus, by covering various aspects such as the origin, virology, phylogeny, genetics, and pathogenesis based on the existing relevant literature.

Origin

The early cases of SARS-CoV-2 outbreak were reported to have occurred in late December, but retrospective analyses have identified the first patient to have shown symptoms as early as December 1, 2019. Since then, the number of confirmed cases has been on a steady incline. However, the total number of reported cases is expected to be markedly lower than the actual number, as many presymptomatic and asymptomatic cases are likely to be unintentionally excluded from the final count. The unforeseen emergence and sudden worldwide spread of SARS-CoV-2 provides a clue to their origin from a family of viruses that has the propensity to cross species barrier. Human coronaviruses (HCoVs) are generally zoonotic in nature and bats are the reservoir for all known HCoVs[7]. Phylogenetic analysis validated the zoonotic origin of SARS-CoV-2 and bats were found to be the natural host, based on the 96.3% nucleotide homology of SARS-CoV-2 with RaTG13, a Rhinolophus affinis bat CoV[6]. Based on such close similarity, researchers suggested bats could have been responsible for the direct transmission to humans. However, SARS-CoV-2 and RaTG13 were later reported to differ in crucial spike receptor-binding domain (RBD) that is critical for viral entry into the cell, suggesting that they may not bind efficiently to the human receptor[8]. Since then several studies have attempted to identify the intermediate host responsible for the spill-over to the human population. A study reported that the RBD of SARS-CoV-2 resembled closely to pangolin-CoVs differing in only one amino acid, when tested against Manis javanica[9]. Another study identified a high similarity of codon usage of SARS-CoV-2 with that of snakes[10], but the results were mostly overlooked as this method of determining the host was questionable. To check if domestic animals may have played a role in the transmission, a study analysed the replication of SARS-CoV-2 in dogs, ferrets, cats, pigs, ducks, and chickens[11]. Of these, ferrets and cats were found to effectively host viral replication compared to other tested animals. Moreover, cats were highly susceptible to the airborne transmission of SARS-CoV-2. Despite several studies, there is no conclusive identification and efforts are still underway since the early days of the outbreak to identify the intermediate host that helped in the transmission of SARS-CoV-2 to humans.

Virology

Comment [L1]: As the authors discuss the viruses in the text, maybe they could give a little more details about MERS and SARS in the introduction

SARS-CoV-2 is an enveloped virus that is sized between 80-120 nm diameter, carrying a large RNA genome. The most characteristic feature of this virus is the presence of spikes (~20 nm in length) that projects from the surface[12]. SARS-CoV-2 contains four main structural proteins - spike surface glycoprotein (S), an envelope glycoprotein (E), nucleocapsid (N), and membrane/matrix protein (M) (Fig 1)[13]. Spike glycoprotein is a transmembrane protein that forms a homotrimer, but is predominantly seen in the outer surface of the virus. They have a molecular weight of ~150 kDa. One major function of S protein of SARS-CoV-2 is to bind to the angiotensin-converting enzyme 2 (ACE2) host receptor mostly seen in respiratory and gastrointestinal tracts; the binding facilitates the entry of the virus into the host cell. The N-terminal domain (NTD) of S protein harbours a S1 sub-unit and the C-terminal domain (CTD) hosts a highly conserved S2 sub-unit. S1 has the RBD and, therefore, functions to determine host tropism while S2 has two tandem domains (Heptad repeats (HR) 1 and 2) and is responsible for the fusion of viral and host membranes[14]-[16]. The second structural protein, envelope (E), is the smallest of the four. They have a molecular weight of about ~8-10 kD consisting of 110 amino acids. They are an integral protein with a hydrophobic domain[17]. They play an established role in the assembly and maturation of SARS-CoV-2 post-replication[18]. Some in-vitro studies also indicate that E protein of CoVs can inhibit the stress response of host cell to ensure successful establishment of infection[19]. Another structural protein is the highly-conserved nucleocapsid (N) protein has a molecular weight of ~46 kDa and have over 400 amino acids[20]. The main function of N is to dynamically bind to the RNA to form a highly ordered conformation[21]. The NTD of CoV N protein has many positively charged amino acids that was found to help in RNAbinding, while the CTD is predicted to function in nuclear localisation[20]. The N protein of CoVs is crucial for processes associated with replication and transcription. Finally, the M protein is the most structured of all four proteins. Having 3 transmembrane domains, the M protein is considered to give CoVs their shape[22]. It also plays an important role in stabilising the nucleocapsid-RNA complex[23]. Fig. 2 shows the S, E, and N structural proteins. Apart from the four structural proteins, SARS-CoV-2 also has 15 non-structural proteins (NSPs 1-10 and 12-16) and 8 accessory proteins[13]. The function of the 15 NSPs of SARS-CoV-2 and their similarity to SARS-CoV are given in Table 1[24]-[26].

Genome characterisation

CoVs are a large group of viruses that are part of order *Nidovirales*. SARS-CoV-2 belongs to the *Coronaviridae* family of the *Nidovirales* order and is a member of the *Orthocoronavirinae* subfamily[5], [27]. Based on the genomic composition, the sub-family is further classified into four genera: Alphacoronavirus (α CoV), Betacoronavirus (β CoV), Gammacoronavirus (α CoV), and Deltacoronavirus (α CoV). The members of the α CoV and α CoV primarily infect mammals, whereas α CoV and α CoV are known pathogens of avian species[28]. Since the early 1960s, six types of HCoVs have been reported. Four of these are mild pathogens (NL63, 229E, OC43, and HKU1) that belong to α CoV, while the other two (SARS-CoV and MERS-CoV) belong to α CoV and are highly pathogenic[29], [30]. SARS-CoV-2, is also a member of the α CoV genera[13]. α CoVs like infectious bronchitis coronavirus (IBV) truly affect avian species, while α CoV like the porcine delta coronavirus (PdCV) can affect both avian and mammalian species[31].

In early January, the genome of SARS-CoV-2 was sequenced with samples from nine patients in the Chinese Centre for Disease Control and Prevention (CCDC)[27]. The sequencing showed that SARS-CoV-2 is a single-stranded positive-sense RNA genome with a 5' cap and a 3' poly A tail that is approximately 29.8 kb in size. A 99.98% sequence similarity was observed between the eight complete genomes from nine patients, with differences in only 4 nucleotides (nt) of the ~30kb long sequence. Such near-identical sequence homology is suggestive of a recent species-crossover event. Apart from the 5' and 3' untranslated regions (UTRs) that constitute 265nt and 229nt respectively, the genome has 11 open reading frames (ORFs) that encode 27 proteins. The orf1a/b is a little over 20 kb and constitutes about 67% of the viral genome, encoding 15 NSPs. The rest of the genome (~10 kb) is annotated to code for 4 structural proteins and 8 accessory proteins[13], [24], [32] (Fig 3).

Each of the structural and accessory genes have a transcription regulatory sequence (TRS) at the beginning of their sequences, which helps in the expression of these genes. The structural proteins are the S, E, M, and N and the accessory proteins are the orf3a, orf3b, orf6, orf7a, orf7b, orf8b, orf9b, and orf14[13]. The ORF located near the 5' end (orf1a/b) codes for pp1ab and pp1a proteins that constitute the 15 NSPs. The expression of these NSPs happen by ribosomal frameshifting. The order of the genome is highly conserved throughout *Nidovirales* with the ORF1ab gene preceding the structural and accessory genes[33].

The single-stranded nature of CoVs makes them more susceptible to mutation, despite having NSP14 for their basic proofreading ability[34]. Owing to their high susceptibility to mutations, there have been concerns revolving the strains of SARS-CoV-2; whether more than a single strain has led to COVID-19. In a network-based phylogenetic analysis of 160 complete SARS-CoV-2 genomes from the GISAID NCBI database (www.gisaid.org), three main variants (A, B, and C) differing in their amino acid sequences were noted[35]. The RaTG13 bat CoV was chosen to be the outgroup. The cluster of lineages directly under this outgroup were labelled A (for ancestral) and were mostly seen in the United States, Europe, and Australia. Type B genomes were found predominantly in East Asia and were mutationally derived from Type A. Type C was found to be a derivative of Type B by nonsynonymous mutations and was majorly found across Europe and some parts of America (California and Brazil). However, apart from the three primary variants studied from the viral network in the early stages of the outbreak, SARS-CoV-2 may have evolved further and may be responsible for the difference in spread and severity of the disease between countries. In another study, 86 complete or partially complete genomes of SARS-CoV-2 were analysed[36]. The samples included viral strains from the 12 countries. Among the 86 genomes, 3 deletions (3nt, 10nt, and 24nt) and 93 substitution mutations were observed in the samples from the United States, Japan, and Australia. The deletions, notably the 3nt and 24nt, occurred in the orf1a/b polyprotein. Their effects on the functions of the proteins remain to be studied. The third deletion (10nt) occured near the 3' end. Among the 93 substitutions, 42 missense mutations were present in all major structural proteins (excluding E) and NSPs. Three mutations occurred in the RBD of S protein and these may induce conformational changes that can, in turn, lead to a changed antigenicity of the virus[37].

Evolution and phylogenetic analysis

Zoonotic HCoVs emerging from wild animals rapidly evolve through various mechanisms such as genetic variations, recombination, or even gene gains/losses altogether[31]. The large genomic size of CoVs predisposes them to frequent recombination, making it a common method of evolution. Recombination has been reported in both SARS-CoV and MERS-CoV. An in-silico analysis revealed recombination in the orf1ab region and S protein of SARS-CoV with 6 other CoVs[38]. In MERS-CoV, recombination was seen in 28 regions with other camel CoVs[39]. However, recombination in SARS-CoV-2 still remains to be studied. Gene gains/losses is another mechanism that accounts for the divergence of CoVs[31]. As an example of gene loss, SARS-CoV-2 completely lacks the haemagglutinin-esterase (HE) and orf8a genes present in SARS-CoV, with which it shares ~80% homology. There were also minor changes seen at amino acid level. For example, orf3b has over 100 amino acids in SARS-CoV, but only 22 amino acids in SARS-CoV-2[13], although the importance of these in pathogenesis remains to be studied. To understand the origin of SARS-CoV-2 and better trace its evolution, many phylogenetic analyses were conducted by several groups of researchers. Based on one such analysis by whole genome sequence clustering, SARS-CoV-2 clustered with members of sub-genus Sarbecovirus, being ~80% identical with SARS-CoV, ~89% with ZXC21, a SARS-like CoV, and ~96% with bat SARS-like viruses[3][5]. Since the S protein is primarily responsible for viral entry into the host cell, the difference in S gene was studied by aligning sequenced samples of SARS-CoV-2 and SARS-CoV against the reference S gene of SARS-CoV-2[6]. On analysis, it was found that SARS-CoV-2 aligned with a near 100% identity and a complete 100% coverage with the reference gene, and SARS-CoV aligned with 74.5% identity and 91% coverage. Furthermore, 76.5-83% identity was shared between the S protein gene of bat SARS and

SARS-like coronavirus with SARS-CoV-2. Having such a high similar identity and coverage possibly suggest a recent common ancestor for SARS-CoV-2. In another study, SARS-CoV-2 samples from 18 countries were phylogenetically studied in comparison with MERS-CoV, SARS-CoV, bat SARS-CoV, bat SARS-like CoV, and other HCoVs[40]. The study showed that in all samples, SARS-CoV-2 clustered closely with bat SARS and other SARS-like CoVs, especially with Wuhan bat CoV RaTG13 and bat SARS-like CoVs (bat-SL-CoVZC45 and bat-SL-CoVZXC21), supporting the findings of a similar study conducted earlier[27]. MERS-CoV was found to be closely clustered with HCoVs - HKU4 and HKU5, but were distant from SARS-CoV-2.

Emergence of SARS-CoV and MERS-CoV

Owing to the large genomic size of CoVs that facilitate recombination, it is no surprise that new strains of CoV emerge from time to time[31]. The first outbreak of HCoVs that gained a lot of scientific attention was the SARS epidemic of 2002-03 that occurred in Guangdong province, China. The causative agent was identified to be SARS-CoV, a member of Clade IIb in the βCoV genera. Affecting 8096 people and causing 774 deaths in 29 countries, SARS had a mortality rate of ~9%[41]. Comparative genomic analysis showed that SARS-CoV was highly similar to a bat SARS-like CoV (SL-CoV) from Chinese horseshoe bats[42]. Apart from the similarity in genome sequences, the bat SL-CoV was also found to use the same host receptor ACE2 like SARS-CoV[43]. This provided further confirmatory evidence of the origin of SARS-CoV. Analysis of other closely related viruses from Himalayan palm civets and racoons confirmed *Paguma larvata* civet to be the 'amplifying' or intermediate host as they had differences in regions coding for S and orf8 and could not possibly be the reservoir for SARS-CoV[44], [45]. The virus primarily affected epithelial cells in the lungs and their transmission was not as efficient as SARS-CoV-2. The SARS epidemic was controlled successfully in 2003 and there has been no recurrence of SARS-CoV since then.

Ten years after the SARS epidemic, a highly virulent respiratory pathogen emerged in the Saudi Arabia and other Middle East countries in 2012. Early genome sequencing identified the pathogen to be MERS-CoV, a member of Clade IIc in the βCoV genera. The MERS epidemic affected more than 2519 individuals, causing close to 866 deaths and had a mortality rate of 34.3%[41]. Genome analysis revealed that MERS-CoV were quite similar to two bat CoVs – HKU4 and HKU5[46]. Therefore, bats were considered to be the likely reservoir. However, the natural separation between bats and human population indicated the presence of an intermediate host. Further studies revealed that MERS-CoV were closely related to CoV of dromedary camels and the replication of MERS-CoV in camel cell-lines provided additional evidence[47], [48]. MERS-CoV did not spread quite widely and the number of cases did not, therefore, accelerate considerably.

Less than a decade after the MERS epidemic, the emergence of a new strain of highly infectious HCoV sent shock waves across the globe. This new member of CoVs, SARS-CoV-2, has caused the COVID-19 outbreak. The number of confirmed cases is continuously accelerating, six months after the first onset. As of August 31, 2020, SARS-CoV-2 has infected 20.1 million people. Although the mortality rate to date is markedly lower (~3%) than SARS-CoV and MERS-CoV, SARS-CoV-2 has the capacity to spread undetected within the population[49], placing a massive burden on the global healthcare. Table 2 represents the differences and similarity between SARS-CoV, MERS-CoV, and SARS-CoV-2 with respect to origin, genetics, phylogeny, and mortality rate.

Pathogenesis

SARS-CoV-2 is thus far the most infectious HCoV known; the number of confirmed cases dwarf the infection caused by SARS-CoV and MERS-CoV. The highly infective potential of SARS-CoV-2 is determined by the establishment of successful infection in the host cell and is partly responsible for the rapid spread of the virus. The first step for a successful pathogenesis is the entry of virus into the cell, for which CoVs bind to the cell surface receptor in the host cell with their S protein. There are

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several studies focusing on the viral entry mechanisms of SARS-CoV and SARS-CoV-2[3], [50], [51]. Both viruses bind to the human ACE2 receptors (hACE2)[52]. However, there were subtle differences in the RBD of S protein between the two, which increased the affinity of RBD binding of SARS-CoV-2 to ACE2[53]. The RBD in both SARS-CoV and SARS-CoV-2 is quite dynamic, as they switch between two conformational states - a vertical position (the 'standing-up' phase) for binding to the host receptor and a horizontal position (the 'lying-down' phase) which is a feature of immune evasion[54], [55]. S proteins are typically class I viral fusion proteins and proteolytic cleavage of S into S1 and S2 is crucial for their activation[56]. A hallmark of the S protein of SARS-CoV-2 is the presence of an insert of four amino acids (PRRA) between the S1 and S2 sub-units[57]. While this was not present in SARS-CoV, it was found in a bat-derived CoV RmYN02[58]. This insert in SARS-CoV-2 has been shown to act as a cleavage site for furin protease. MERS-CoV has a furin activation mechanism to mediate membrane fusion. Other proteases like TMPRSS2 or cathepsins also play an important role in the proteolytic process of SARS-CoV and SARS-CoV-2[57], [59].

Once the S protein is proteolytically cleaved, membrane fusion follows. Generally, fusion occurs within endosomes, and in SARS-CoV-2, it happens along with an internalisation of ACE2 receptors that causes a downregulation of available ACE2 receptors on the cell surface. Once the virus is inside the cell, the nucleocapsid is released and the viral genome is translated by ribosomal frameshifting to produce polyproteins pp1a and pp1ab[60]. Following this, the polyproteins are processed by papainlike protease (PLpro) and a main serine-like protease (MPro) encoded by NSPs 3 and 5. These proteases cause cleavage events to produce other NSPs[61]. The 15 NSPs along with other viral proteins and possibly, host proteins, form the replication-transcription complex (RTC) which accumulate in double-membrane vesicles. This is followed by the synthesis of mRNAs that code for structural proteins (S, E, M, N). Once they are produced, the membrane-bound structural proteins (S, E, and M) are integrated into the endoplasmic reticulum (ER). The NTD of S protein is heavily glycosylated and the signal sequence is used for accessing the ER. Along with the S protein, E and M proteins also move to ER-Golgi intermediate compartment (ERGIC) which is a site of viral assembly. While M protein regulates interaction between proteins for viral assembly, they are not solely responsible for producing envelopes and forming virions. They work in conjunction with E protein to produce viral envelopes, although the exact mechanism underlying this step is unclear. Concurrently, genome replication occurs to produce a full-length positive-sense single-strand RNA. Once they are produced, the N protein gets encapsulated onto the RNA to form a nucleocapsid, which then enters the ERGIC complex. By the time this happens, the membrane formed by M and E proteins are readily available in the complex. Once the RNA-nucleocapsid is inside the ERGIC, the M protein binds to them to stabilise the genome and the S proteins attach to the virions. The ability of S proteins to interact with M proteins fuels this step. After the viral particles are assembled, they are carried in smooth-walled vesicles to the plasma membrane, where they are released by exocytosis[16] (Fig 4). However, whether the virus uses the conventional export pathway from Golgi or if they have their own mechanism is unknown.

Immune response against SARS-CoV-2

The anti-viral response in the host typically begins when the virus enters the host cell. While research on immune response against SARS-CoV-2 is still in its infancy, studies on anti- SARS-CoV and MERS-CoV response will help in understanding the plausible mechanisms. Once the virus enters the cell using the host cell receptor, their antigenic peptides are presented by major histocompatibility complex (MHC, or the human leukocyte antigen (HLA) in humans). These are then recognised by the cytotoxic T lymphocytes (CTLs). For SARS-CoV, the MHC I predominantly presents the antigen[62], and for MERS-CoV, MHC II presents the antigenic peptides[63]. Some polymorphisms in the HLA gene, such as HLA-DR0301 and HLA-A*0201, protect against SARS infection[64], while variants like HLA-DRB1*11:01 modulates the susceptibility to MERS infection[63]. Once the presented antigen is

recognised by CTL, humoral and cell-mediated immunity are stimulated. SARS-CoV and SARS-CoV-2 elicit a characteristic IgM and IgG response pattern. In SARS infection, IgM antibodies typically decline after week 12 of first infection[65] and IgG, particularly anti-S and anti-N IgG, continue to stay elevated[66]. On the other hand, the cellular immunity is characterised by a sharp drop in CD4+ and CD8+ cells in both SARS-CoV and SARS-CoV-2 infected individuals[67], [68]. Despite the magnitude of anti-viral immune response, SARS-CoV, MERS-CoV, and most likely SARS-CoV-2, have developed strategies to circumvent them. For example, the orf4a, orf4b, and orf5 of MERS-CoV interfere with the interferon regulatory factor 3 (IRF3), a protein which usually increases the type 1 interferon (T1IFN) and mitigates viral infection[69]. Additionally, the viruses can induce the formation of double-membrane vesicles and replicate within them to avoid being recognised by pattern recognition receptors[70]. Future studies focusing on understanding the immune evasion mechanisms of SARS-CoV-2 may provide important insights for developing effective therapeutics against COVID-19.

Conclusion

Over the last century, CoVs have rapidly evolved and several different strains emerged that caused a range of diseases in mammals and avian species. CoVs have the potential to infect multiple species and cell types, which in combination with their large genome makes them more likely to re-emerge in the future. The outbreak of SARS-CoV-2 that started in December 2019 in Wuhan, China has rapidly spread across the globe placing a massive burden on healthcare. Phylogenetic analysis confirmed the zoonotic origin of the outbreak, with bats identified to be the reservoir host. The search an intermediate host is still underway, but recently accumulating evidence points to pangolins to be the potential intermediate host responsible for the species crossover. Rapid advances have been made in our understanding of SARS-CoV-2 characteristics, but we are only beginning to understand the pathogenesis and the anti-SARS-CoV-2 immune response in the host. For example, some NSPs and accessory proteins remain uncharacterised and studying their function and the role they play in viral replication will help in better understanding of the pathogenesis. Studies on the anti-viral response against SARS-CoV-2 will also help in identifying potential therapeutic targets for controlling COVID-19. Furthermore, as bats are the reservoir for all known HCoVs, determining how they do not exhibit clinical infection while harbouring HCoVs will aid in gaining a complete picture of the intricate mechanisms involved. Additionally, completely understanding the ability of CoVs to cross species barrier will drastically help in predicting such outbreaks in the future.

Consent to participate

Not applicable

Ethical approval

Not applicable

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Table 1: A comprehensive table enlisting the function, mechanism of action of non-structural proteins (NSPs) of SARS-CoV-2, and their nucleotide homology to SARS-CoV[24]–[26], [71].

NSPs	Function	Mechanism	Nucleotide similarity to SARS-CoV[72]
NSP 1	Suppresses immune response	Degrades mRNA and inhibits translation, blocking innate immune response	82.2%
NSP 2	Unknown	Unknown	68.3%
NSP 3	Cleaves viral polyprotein	Papain-like protease (PLpro)	72.7%
NSP 4	Suspected to act as scaffolding for transmembrane proteins	Unknown	74.8%
NSP 5	Cleaves viral polyprotein	Main protease domain (MPro)	83.6%
NSP 6	Suspected to act as scaffolding for transmembrane proteins	Unknown	79%
NSP 7	Acts as primase with NSP 8. Also processes RNA polymerase.	Forms hexadecameric complex with NSP 8	79.9%
NSP 8	Acts as primase with NSP 7. Also processes RNA polymerase.	Forms hexadecameric complex with NSP 7	86.1%
NSP 9	Acts as RNA binding protein	-	84.9%
NSP 10	Supports NSPs 14 and 16	Forms heterodimer with NSPs 14 and 16. Stimulates formation of ExoN	88.2%
NSP 12	RNA-dependent RNA polymerase (RdRP)	-	88.5%
NSP 13	RNA helicase	-	88.4%
NSP 14 ^a	3'-5' exoribonuclease (ExoN)	Adds 5' cap to RNA. ExoN helps in proofreading viral genome after replication.	83.3%

NSP 15 ^a	PolyU-specific endoribonuclease	-	82%
NSP 16	Immune evasion	Protects RNA from being detected by MDA5	85.1%

^aNSPs 14 and 15 are highly conserved and considered genetic markers of viruses under Order *Nidovirales*[73].

Table 2: A comprehensive comparison table outlining the origin, taxonomic classification, genetics, host receptor characteristics, and certain epidemiological parameters of SARS-CoV, MERS-CoV, and SARS-CoV-2[13], [27], [47], [74], [75], [76].

	SARS-CoV	MERS-CoV	SARS-CoV-2
Emergence	2002	2012	2019
Reservoir	Bats	Bats	Bats
Reservoir species	Rhinolophus sinicus	Taphozous perforatus	Rhinolophus affinis
Intermediate host	Palm civets	Dromedary camels	Unknown (pangolins?)
Genus	Betacoronavirus	Betacoronavirus	Betacoronavirus
Sub-genus	Sarbecovirus	Marbecovirus	Sarbecovirus
Genome size	~28.7 kb	~30.1 kb	~29.8 kb
Genome	ssRNA (+ sense)	ssRNA (+ sense)	ssRNA (+ sense)
Closest relative Host cell receptor	Bat-SARS-like CoV (Bat-SLCoV) (GenBank: FJ588686.1)	Taper/CII_KSA_287/Bisha/ Saudi Arabia/2012 (RdRP) (GenBank: KF493885.1)	batCoV-RaTG13 (Overall) (GenBank: MN996532) pangolin-SARSr-CoV (RBD)
nost cell receptor	ACE2 (Angiotensin- converting enzyme 2)	DPP4 (Dipeptidyl peptidase 4)	ACE2 (Angiotensin- converting enzyme 2)
No. of cases	8096	2519	9.1 million (by 22/06/2020)
Mortality rate	9.6%	34.3%	2-3%

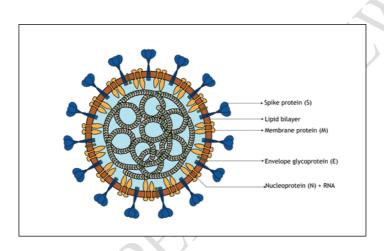


Fig 1 Schematic representation of the structure of SARS-CoV-2

This illustration depicts the location of the structural proteins, where each protein plays a critical role at various stages of events. The Spike protein (S) located on the outer surface of the virus facilitates the binding to the transmembrane ACE2 host receptor; the envelope protein (E) aids in the assembly and maturation of SARS-CoV-2 post-replication events; the nucleocapsid (N) protein plays a vital role in replication and transcription processes; the M protein promotes the stabilisation process of the nucleocapsid-RNA complex

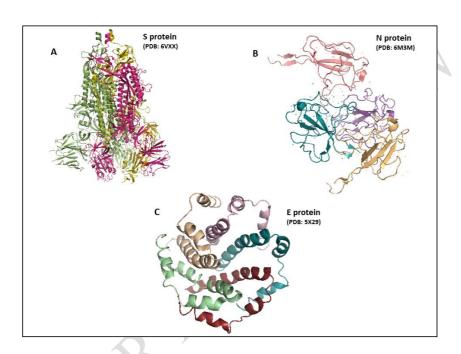


Fig 2 Cartoon representation of SARS-CoV-2 structural proteins (S,N) and SARS-CoV (E) protein.

(A) Spike glycoprotein (PDB: 6VXX) of SARS-Cov-2 is a transmembrane protein that forms a homotrimer (depicted by three different colors), but is predominantly seen in the outer surface of the virus. (B) Nuclecapsid protein (PDB: 5X29) of SARS-CoV-2 is highly conserved and the amino acids residues present in the N-terminal domain of the protein plays a crucial role in RNA binding. (C) Envelope protein (PDB: 5X29) of the SARS-CoV is a small membrane protein that aids in ion channel formation. The above figures were illustrated using Pymol

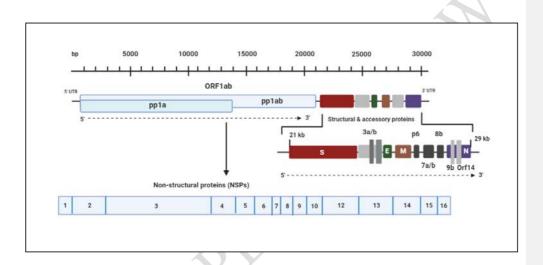


Fig 3 Genome organisation of SARS-CoV-2

The genome of SARS-CoV-2 is 29.8 kb in size. The schematic representation shows regions encoding the different structural, non-structural, and accessory proteins. Towards the 5' end are the pp1a/ab proteins that produce NSPs and towards the 3' end are the structural proteins and accessory proteins

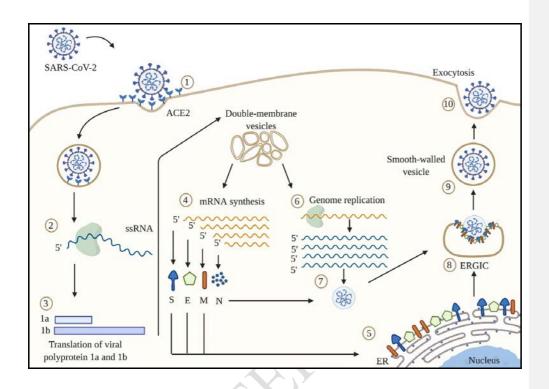


Fig 4 Potential pathogenesis of SARS-CoV-2

1. Viral entry into the host using ACE2 receptor. 2. Release of the viral genome. 3. Translation of the genome to produce polyproteins 1a and 1ab. 4. Synthesis of mRNA to produce structural proteins. 5. Integration of S, E, and M proteins into ER and entry into the site of viral assembly. 6. Replication of genome to produce full-length ssRNA. 7. Encapsulation of N protein on the newly produced RNA. 8. Movement of nucleocapsid to ERGIC to gain membrane proteins. 9 and 10. Release of newly formed viral particles by exocytosis