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Salmaan Sharif, Aamer Ikram, Adnan Khurshid, Muhammad Salman ...+22 more authors

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1 **Detection of SARs-CoV-2 in wastewater, using the existing**
2 **environmental surveillance network: An epidemiological**
3 **gateway to an early warning for COVID-19 in communities**
4

5 Salmaan Sharif¹, Aamer Ikram¹, Adnan Khurshid¹, Muhammad Salman¹, Nayab Mehmood¹,
6 Yasir Arshad¹, Jamal Ahmad², Rana Muhammad Safdar³, Mehar Angez¹, Muhammad Masroor
7 Alam¹, Lubna Rehman¹, Ghulam Mujtaba¹, Jaffar Hussain¹, Johar Ali¹, Ribqa Akthar¹,
8 Muhammad Wasif Malik¹, Zeeshan Iqbal Baig¹, Muhammad Suleman Rana¹, Muhammad
9 Usman¹, Muhammad Qaisar Ali¹, Abdul Ahad¹, Nazish Badar¹, Massab Umair¹, Sana Tamim¹,
10 Asiya Ashraf¹, Faheem Tahir¹, and Nida Ali².

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- 12 1. National Institute of Health, Islamabad, Pakistan.
13 2. World Health Organization, Islamabad, Pakistan.
14 3. National Emergency Operations Centre for Polio Eradication, Islamabad, Pakistan

15

16 **Corresponding Author**

17 Salmaan Sharif
18 Department of Virology,
19 Public Health Laboratories Division,
20 National Institute of Health,
21 Islamabad, Pakistan.
22 Email: salmaansharif@hotmail.com
23 Tel: +92-301-2005000 / +92-51-8442662 (Ext: 110)

24 Abstract

25 Background:

26 The ongoing COVID-19 pandemic caused by SARs-CoV-2 was transmitted person to person via
27 droplet infections and fecal-oral transmission. This illustrates the probability of environmentally
28 facilitated transmission, mainly the sewage.

29 Method:

30 We used existing Pakistan polio environment surveillance network to investigate presence of
31 SARs-CoV-2 using three commercially available kits and E-Gene detection published assay for
32 surety and confirmatory of positivity. A Two-phase separation method is used for sample
33 clarification and concentration. An additional high-speed centrifugation (14000Xg for 30 min)
34 step was introduced, prior RNA extraction, to increase viral RNA yield resulting a decrease in
35 *Cq* value.

36 Results:

37 A total of 78 wastewater samples collected from 38 districts across Pakistan, 74 wastewater
38 samples from existing polio environment surveillance sites, 3 from drains of COVID-19 infected
39 areas and 1 from COVID 19 quarantine center drainage, were tested for presence of SARs-CoV-
40 2. 21 wastewater samples (27%) from 13 districts turned to be positive on RT-qPCR. SARs-COV-
41 2 RNA positive samples from areas with COVID patients and COVID 19 patient quarantine
42 center drainage strengthen the findings and use of wastewater surveillance in future.
43 Furthermore, sequence data of partial ORF 1a generated from COVID 19 patient quarantine
44 center drainage sample also reinforce our findings that SARs-CoV-2 can be detected in
45 wastewater.

46 Discussion:

47 This study finding indicates that SARs-CoV-2 detection through wastewater surveillance has an
48 epidemiologic potential that can be used as early warning system to monitor viral tracking and
49 circulation in cities with lower COVID-19 disease burden or heavily populated areas where
50 door-to-door tracing may not be possible. However, attention needed on virus concentration
51 and detection assay to increase the sensitivity. Development of highly sensitive assay will be an
52 indicator for virus monitoring and to provide early warning signs.

53 Introduction:

54 Novel coronavirus pneumonia (COVID-19) caused by SARS-Cov-2 infection has become a global
55 emergency through its widespread infection with 6,189,560 confirmed cases resulting 372,469
56 deaths in 213 countries as of 1st June , 2020 (JHU 2020). In December 2019, cluster of
57 pneumonia like disease cases with symptoms including fever, difficulty in breathing, cough and
58 invasive lesion on both lungs were reported from Wuhan, China (WHO 2020a). The causative
59 agent was identified as a Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) after
60 ruling out SARS-CoV, MERS-CoV, influenza, avian influenza, adenovirus and other common
61 respiratory pathogens (WHO 2020b). Coronaviruses belonging to family *Cornaviridae* are
62 enveloped, non-segmented positive sense RNA viruses distributed in human and mammals
63 (Richman DD 2016). However, majority of human coronaviruses have mild infections but two
64 betacoronaviruses; severe acute respiratory syndrome coronavirus (SARS-CoV) and Middle East
65 respiratory syndrome coronavirus (MERS-CoV) caused outbreaks in last two decades with 10%
66 and 35.6% mortality rate respectively (de Groot et al. 2013; Hui et al. 2004; Ramadan and Shaib
67 2019).

68 . On March 11, 2020 WHO declared it as pandemic, when disease was reported in 114 countries
69 (WHO 2020c). The primary routes of viral transmission (SARS-CoV-2) was considered to be
70 through droplet infections and person to person close contact, but later it is evident from
71 various published studies that there is increasing possibility of fecal-oral transmission (Adhikari
72 et al. 2020; Cheng et al. 2004). This shows the probability of environmentally mediated
73 transmission. Since the early days of pandemic, we got interested in understanding and utilizing
74 the role of environmental sampling mainly the sewage.

75 SARS-CoV-2 resembles 82% with SARS coronavirus (SARS-CoV) which caused an outbreak in
76 2003. Studies have shown the survival of SARS-CoV in stool for up to 4 days (Hui et al. 2004).
77 Another study described the presence of SARS-CoV and its infectious nature in water and
78 sewage for days to weeks (Casanova et al. 2009). It was also described that faulty sewage
79 system contaminated with SARs-CoV in a high-rise housing estate of Hong Kong during 2003
80 was linked to SARS outbreak involving large number of residents of surrounding buildings (Peiris
81 et al. 2003). A recent study highlighted the shedding through stool of SARS-CoV-2 in cluster of 9

82 nCOVID-19 patients. It was reported that that the RNA concentration decreased from 10^7 RNA
83 copies/g to 10^3 RNA copies/g after one week of symptom onset to third week (Roman Woelfel
84 2020). Since the source of transmission of SARS-CoV-2 is still unknown therefore wastewater
85 transmission pathway can become an important mode (UNICEF 2020). Hence, the presence of
86 SARS-CoV-2 in contaminated sewage sample and its role in transmission needs to be
87 investigated. In this study, we used the existing polio environment surveillance network in
88 Pakistan through which sewage samples were collected from designated sites in different
89 districts of the country to investigate presence of poliovirus, its spread and molecular
90 epidemiology. Same samples were processed and tested for detection of SARS-CoV-2 RNA.

91 Methods

92 Untreated wastewater samples (sewage samples) selected for testing in this study were
93 collected using the grab sampling technique. Most of them were those collected for routine
94 polio environment surveillance (ES). Polio ES sites are either open drains or pumping stations
95 and are sampled routinely on monthly basis. Each sampling site represent 100,000 – 300,000
96 population (WHO 2015). Besides, wastewater from drains of some areas with recent history of
97 SARS-CoV2 cases were also collected for detection and re-confirmation of SARS-CoV-2
98 detection. Sampling personnel strictly followed the standard safety guidelines for personnel
99 protective equipment (PPE) required for wastewater sampling. One liter of sewage water was
100 collected from the mid-stream into a sterile, leak proof container at a downstream sampling
101 site during the peak morning flow. These samples were transported in properly sealed
102 container with information form, indicating sampling site, district, sampling date and sampling
103 time, to laboratory within 48 hours of collection maintaining reverse cold chain (WHO 2015).
104 Samples were processed in laboratory for virus concentration using the two-phase separation
105 method (WHO 2003).

106 500 ml of each raw sewage specimens was concentrated. Firstly, clarification of the sample
107 was done by pelleting of larger suspended solids by high speed centrifugation. The clarified
108 sewage sample was mixed with defined amounts of polymers, dextran and polyethylene
109 glycol (PEG). The homogenous mixture obtained by vigorous shaking is left to stand
110 overnight at 4°C in a separation funnel. The polymer helped to form two distinct layers

111 (phases) in the funnel which were collected and mixed with pellet formed in first step which
112 was then treated with chloroform (WHO 2003) and further used for extraction of RNA.

113 Before proceeding directly for RNA extraction, an additional step was introduced to increase
114 the yield of RNA, in contrast with direct processing. 400µl of processed sample was
115 centrifuged at high speed (14000Xg) for 30 min to pellet the suspended solid particles. Virus
116 may be partly bound to these solids. Supernatant was discarded carefully without disturbing
117 the pellet, which was later used for RNA extraction.

118 Spin star viral nucleic acid kit 1.0 (ADT Biotech, Phileo Damansara 1, Petaling Jaya Part No.
119 811803) was used to extract the viral RNA. Internal control provided with kits were added as an
120 amplification control in rRT-PCR. Pellet was dissolved with 430µl of lysis buffer supplied with
121 kit, followed by 5 min vortexing to homogenously dissolve the pallet. Further processing was
122 done as per the manufacturer's instructions. The final elution volume is 60µl. The extracted
123 viral RNA was store at -20°C till further testing.

124 Multiple qualitative reverse transcription real-time PCR kits for identification of SARS-CoV2
125 were used. These kits were already in use country wide for detection of SARS-CoV2 in human.
126 These were (Kit 1) Real-Time Fluorescent RT-PCR Kit for detecting 2019-nCoV by BGI China (IVD
127 &CE marked; Catalogue No. MFG030010), takes ORF 1ab gene as the target domain, (Kit 2) qRT-
128 PCR for Novel Coronavirus (2019-nCoV) Nucleic Acid Diagnostic Kit (PCR-Flourescence Probing,
129 IVD marked) by Sansure Biotech (Sansure Biotech Inc China, Ref No. S3102E). The kit utilizes
130 novel coronavirus (2019-nCoV) ORF-1 gene and a conserved coding nucleocapsid protein N-
131 gene as the target regions and finally (Kit 3) detection Kit for 2019 Novel Coronavirus RNA (PCR-
132 Fluorescence Probing) targeting the ORF 1ab and N gene of SARS-CoV-2/2019-nCoV by Da An
133 Gene Co., China (IVD and CE marked; Catalogue No. DA-930). Thermal cycling and results
134 interpretation were performed as per manufacturer's instruction.

135 For further confirmation these samples were also tested for envelop protein (E) gene detection
136 using the primers / probe sets that was published by Corman V. M. et. al. (Corman et al. 2020).
137 A 25µl reaction contain 5 µl RNA, 12.5 µl 2x reaction buffer provided with the Superscript III
138 one step RT-PCR with platinum Taq Polymerase (Invitrogen, Darmstadt, Germany; containing

139 0.4 mM of each deoxyribose triphosphates (dNTP) and 3.2 mM magnesium sulphate), 1 µl of
140 reverse transcriptase / Taq mixture from Kit and different concentration of primers and probes
141 (Table 1). Thermal cycling was carried out at 55°C for 10 min, followed by 95°C for 3min. Then
142 45 cycles of 95°C for 15 sec, 58°C for 30 sec on ABI 7500 real time system (Applied Bio Systems,
143 US. Cat # 4351104).

144 Genetic sequencing was based on conventional amplification of genomic RNA by using Qiagen
145 One step RT PCR kit as described by Shirato K et al (Shirato et al. 2020). The ORF 1a gene was
146 amplified, using a pair of primers NIID_WH-1_F501 (TTCGGATGCTCGAACTGCACC) and
147 NIID_WH-1_R913 (CTTTACCAGCACGTGCTAGAAGG). After 1st PCR, nested PCR was performed
148 using 2nd PCR primers (Sense: NIID_WH-1_F509(CTCGAACTGCACCTCATGG), Antisense:
149 NIID_WH-1_R854 CAGAAGTTGTTATCGACATAGC) and 1µl of 1st PCR product under the same
150 condition. PCR amplicons from 2nd round were purified by Qiaquick PCR purification Kit
151 (Qiagen, Germany) and directly sequenced by using Sequencing primers (Sense: NIID_WH-
152 1_Seq_F519 ACCTCATGGTCATGTTATGG, Antisense: NIID_WH-1_Seq_R840
153 GACATAGCGAGTGTATGCC) on ABI 3100 genetic analyzer using Big Dye Terminator kit
154 V.3.0.cycle sequencing kit (ABI Foster City Canada, USA). The nucleotide sequences were
155 assembled, edited and analyzed by Sequencher software v.4.9 (GeneCodes Incorporation, USA).
156 The nucleotide sequence obtained was blasted against the available NCBI databank
157 (<https://blast.ncbi.nlm.nih.gov/Blast.cgi>).

158 Results:

159 A total of 78 wastewater samples were collected between 12 to 18 epidemiological weeks from
160 38 districts across country and were tested for SARs-CoV-2 RNA. 21 wastewater samples (27%)
161 from 13 districts were positive on RT-qPCR (Table 2).

162 Primarily, 20 wastewater samples were collected during March 20, 2020 to April 09, 2020 from
163 17 districts of Pakistan; 18 samples from different polio environmental sites (ES) distributed
164 across 16 districts and 02 samples in areas with recent history of SARS-CoV2 cases from capital
165 city Islamabad. All these samples were tested against the three commercially available SARS-
166 CoV-2 RNA detection diagnostic kits (mentioned under materials and methods). Negative
167 control supplied with the diagnostic kits containing the internal control was added in each

168 sample during extraction to ensure none of the wastewater extracted RNA samples had RT-
169 qPCR inhibition. A total of 6 samples (30 %) were positive for SARs-CoV-2 RNA, out of these all
170 were detected on Kit 1, 2 (either one gene positive or both, results interpreted as per
171 manufacturer's instruction) and E gene method whereas only 4 were positive on Kit 3 (Table 2).
172 4 positive samples had *C_q* values between 32 to 38, whereas remaining 2 samples collected in
173 areas with history of SARs-CoV-2 cases from Islamabad were positive on all three diagnostic kits
174 and E gene method having *C_q* between 36 to 38 (Table 3).

175 A centrifugation step was also introduced before Viral RNA extraction to increase viral RNA
176 yield. A decrease in *C_q* value has been observed, describing an increase in viral RNA
177 concentration (Table 4). Furthermore, 56 samples collected and received in laboratory from
178 April 6, 2020 to April 28,2020 for polio diagnostics were also tested for detection of SARs-CoV-
179 2, out which 14 (24%) were positive. One sample was collected from the drain of a Rawalpindi
180 Institute of Urology (RIU), a COVID-19 patient quarantine center, while other from a drain
181 having catchment area with recent history of COVID-19 patients. Both collection sites are in
182 district Rawalpindi. These samples were found positive for SARs-COV-2 RNA on RT-qPCR.

183 The sample collected from the drain of RIU, Rawalpindi was also subjected for partial
184 sequencing of SARs-CoV-2 ORF-1a. Nucleotide sequence of partial SARs-CoV-2 ORF 1a is
185 submitted in gene bank under accession number MT539157.

186 Discussion:

187 The role of environmental surveillance in supporting Global Polio Eradication Initiative has
188 already been acknowledged (Kroiss et al. 2018). The environmental surveillance can be used as
189 supplemental tool for detection pathogens circulating within the community. Wastewater
190 provides a near-real-time data as it constantly collects feces, urine and traces of sputum that
191 can contain SARs-CoV-2 shed by the infected individuals. Viral load estimation in COVID-19
192 positive patients are still uncertain, however, recently N. Zhang *et al.* suggests levels as high as
193 600,000 viral genomes per ml of fecal material (Wu FQ 2020). Similarly another study reported
194 approximately 30,00,000 viral particles in a single fecal sample (Wu FQ 2020). A previously
195 published study on coronavirus reported that it remained infectious in water and sewage for days
196 to weeks. Researchers reported time required for 99% reduction of virus infectivity was several

197 days at room temperature in pure water or wastewater (Guangbo Qu 2020). This adds another
198 potential supplemental detection source of SARs-CoV-2 in communities.

199 In this study, we investigated the presence of SARs-CoV-2 RNA in wastewater using the existing
200 poliovirus environment surveillance network that can be used in future as an early warning
201 system for the dependent area. This definitely needs further evaluation and discussions;
202 however, this seems to have a very interesting utilization in epidemiology. A total of 21 out of
203 78 positive wastewater samples for SARs-CoV-2 RNA clearly indicates viral RNA shedding in
204 stool of infected individuals. Currently, there is no evidence of infection transmission of SARs-
205 COV-2 or related SARs-Corona via wastewater (Ahmed et al. 2020).

206 We used three commercially available kits and Published E-Gene detection assay for surety and
207 confirmatory of positivity. Analyzing table 3, samples collected from Quetta district at two
208 different time intervals indicates COVID-19 prevalence and surge in infected individuals. This
209 can be assumed from the decrease in *C_q* value in wastewater sample collected two weeks after.
210 Detection of SARs-COV-2 RNA in two specific wastewater samples collected from areas with
211 recent history of COVID-19 patients clearly explain that wastewater testing for COVID-19 can be
212 used as an early warning system. Likewise, SARs-COV-2 RNA positive samples from RIU,
213 Rawalpindi and an area in Rawalpindi with COVID patients further strengthen the findings and
214 use of this tool in future. This surveillance system can picks up vast majority of infected
215 individuals with SARs-CoV-2 who do not present symptoms for the disease (Ahmed et al. 2020).
216 Furthermore, sequence data of partial ORF 1a generated from ICT-04 also reinforce our findings
217 that SARs-CoV-2 can be detected in wastewater in Pakistan. Interestingly, the additional extra
218 centrifugation step before viral RNA extraction seems to be encouraging in increasing the yield
219 of viral RNA. This can be obvious from the data presented in table 4.

220 The surveillance through wastewater can be useful in remote or confined communities,
221 however, further studies are needed on virus concentration and detection assay to increase the
222 sensitivity. This has an epidemiologic potential for early detection of high burden area in
223 advance; and heavily populated areas where door-to-door tracing may not be possible. This
224 may also be more relevant to the developing countries with limited molecular testing.

225 Development of highly sensitive assay will be an indicator for virus monitoring and to provide
226 early warning signs.

227 Conclusion:

228 SARS-CoV-2 detection in wastewater using RT-qPCR assay, confirmed by sequencing, is a
229 milestone in the field of epidemiology. The study finding indicates that environmental
230 surveillance through wastewater could be used as early warning system to monitor viral
231 tracking and circulation in cities with lower COVID-19 disease burden or setting where person
232 to person testing is limited. The virus concentration and detection method in wastewater needs
233 attention to increase sensitivity of detection of SARS-CoV-2 in wastewater.

234 References:

- 235 Adhikari SP, Meng S, Wu YJ, Mao YP, Ye RX, Wang QZ, et al. 2020. Epidemiology, causes, clinical
236 manifestation and diagnosis, prevention and control of coronavirus disease (covid-19) during the early
237 outbreak period: A scoping review. *Infect Dis Poverty* 9:29.
- 238 Ahmed W, Angel N, Edson J, Bibby K, Bivins A, O'Brien JW, et al. 2020. First confirmed detection of sars-
239 cov-2 in untreated wastewater in australia: A proof of concept for the wastewater surveillance of covid-
240 19 in the community. *Sci Total Environ* 728:138764.
- 241 Casanova L, Rutala WA, Weber DJ, Sobsey MD. 2009. Survival of surrogate coronaviruses in water.
242 *Water Res* 43:1893-1898.
- 243 Cheng PK, Wong DA, Tong LK, Ip SM, Lo AC, Lau CS, et al. 2004. Viral shedding patterns of coronavirus in
244 patients with probable severe acute respiratory syndrome. *Lancet* 363:1699-1700.
- 245 Corman VM, Landt O, Kaiser M, Molenkamp R, Meijer A, Chu DK, et al. 2020. Detection of 2019 novel
246 coronavirus (2019-ncov) by real-time rt-pcr. *Euro Surveill* 25.
- 247 de Groot RJ, Baker SC, Baric RS, Brown CS, Drosten C, Enjuanes L, et al. 2013. Middle east respiratory
248 syndrome coronavirus (mers-cov): Announcement of the coronavirus study group. *J Virol* 87:7790-7792.
- 249 Guangbo Qu XL, Ligang Hu, and Guibin Jiang. 2020. An imperative need for research on the role of
250 environmental factors in transmission of novel coronavirus (covid-19). *Environmental Science &*
251 *Technology* 54:3730-3732.
- 252 Hui DS, Chan MC, Wu AK, Ng PC. 2004. Severe acute respiratory syndrome (sars): Epidemiology and
253 clinical features. *Postgrad Med J* 80:373-381.
- 254 JHU. 2020. Covid-19 dashboard by the center for systems science and engineering (csse) at johns
255 hopkins university (jhu). Available: <https://coronavirus.jhu.edu/map.html>.
- 256 Kroiss SJ, Ahmadzai M, Ahmed J, Alam MM, Chabot-Couture G, Famulare M, et al. 2018. Assessing the
257 sensitivity of the polio environmental surveillance system. *PLoS One* 13:e0208336.
- 258 Peiris JS, Chu CM, Cheng VC, Chan KS, Hung IF, Poon LL, et al. 2003. Clinical progression and viral load in
259 a community outbreak of coronavirus-associated sars pneumonia: A prospective study. *Lancet*
260 361:1767-1772.
- 261 Ramadan N, Shaib H. 2019. Middle east respiratory syndrome coronavirus (mers-cov): A review. *Germs*
262 9:35-42.
- 263 Richman DD WR, Hayden FG, eds. 2016. *Clinical virology*. 4th ed.
- 264 Roman Woelfel VMC, Wolfgang Guggemos, Michael Seilmaier, Sabine Zange, Marcel A Mueller, Daniela
265 Niemeyer, Patrick Vollmar, Camilla Rothe, Michael Hoelscher, Tobias Bleicker, Sebastian Bruenink, Julia

- 266 Schneider, Rosina Ehmann, Katrin Zwirgmaier, Christian Drosten, Clemens Wendtner. 2020. Clinical
267 presentation and virological assessment of hospitalized cases of coronavirus disease 2019 in a travel-
268 associated transmission cluster. medRxiv.
- 269 Shirato K, Nao N, Katano H, Takayama I, Saito S, Kato F, et al. 2020. Development of genetic diagnostic
270 methods for novel coronavirus 2019 (ncov-2019) in japan. Jpn J Infect Dis.
- 271 UNICEF W. 2020. Water, sanitation, hygiene, and waste management for the covid-19 virus: Interim
272 guidance.
- 273 WHO. 2003. Guidelines for environmental surveillance of poliovirus circulation. Available:
274 http://polioeradication.org/wp-content/uploads/2016/07/WHO_V-B_03.03_eng.pdf.
- 275 WHO. 2015. Guidelines on environmental surveillance for detection of poliovirus.
- 276 WHO. 2020a. Coronavirus disease (covid-19) outbreak. Available:
277 <https://www.who.int/westernpacific/emergencies/covid-19>.
- 278 WHO. 2020b. Who statement regarding cluster of pneumonia cases in wuhan, china. Available:
279 <https://www.who.int/china/news/detail/09-01-2020-who-statement-regarding-cluster-of-pneumonia-cases-in-wuhan-china>.
- 280
- 281 WHO. 2020c. Available: <https://www.who.int/dg/speeches/details/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020>.
- 282
- 283 Wu FQ XA, Zhang JB, Gu XQ, Lee WL, Kauffman K, Hanage WP, Matus M, Ghaeli N, Endo N, Duvall C,
284 Moniz K, Erickson TB, Chai PR, Thompson J, Alm EJ. 2020. Sars-cov-2 titers in wastewater are higher than
285 expected from clinically confirmed cases. medRxiv.

Table 1: Primers and probes, real time- RT-PCR for 2019 SARS-CoV2

	Oligonucleotide	Sequence ^a	Concentration / Reaction
E gene	E_Sarbeco_F	ACAGGTACGTTAATAGTTAATAGCGT	Use 400 nm
	E_Sarbeco_P1	FAM-ACACTAGCCATCCTTACTGCGCTTCG-BBQ	Use 200 nm
	E_Sarbeco_R	ATATTGCAGCAGTACGCACACA	Use 400 nm

^a FAM: 6-carboxyfluorescein; BBQ: blackberry quencher.

Table 2: Details wastewater samples tested for SARS-CoV2 at Virology Department, National Institute of Health, Islamabad, Pakistan

Lab#	Collection Site	Drainage Type	District	Date Collection	EPI Week	COVID-19 Results
186	AQILPUR & ASLAM TOWN	PUMPING STATION	RAJANPUR	20-Mar-20	Week12	NOT DETECTED
189	SUR PUL	OPEN DRAIN	QUETTA	20-Mar-20	Week12	DETECTED
197	FAQIRABAD	OPEN DRAIN	KOHAT	30-Mar-20	Week14	NOT DETECTED
198	HAZARA COLONY	OPEN DRAIN	KURRAM	30-Mar-20	Week14	NOT DETECTED
199	COMPOSITE BUS STAND & MODC	OPEN DRAIN	DIKHAN	30-Mar-20	Week14	NOT DETECTED
200	COMPOSITE SHERPAO & ZAFARABAD	OPEN DRAIN	DIKHAN	30-Mar-20	Week14	NOT DETECTED
201	BAGO ROAD & BAQIRABAD	PUMPING STATION	KAMBAR	31-Mar-20	Week14	NOT DETECTED
202	QILA SHEIKHUPURA & PS BAHRIAN WALA	PUMPING STATION	SHEIKHUPURA	2-Apr-20	Week14	NOT DETECTED
203	RAILWAY PUL	OPEN DRAIN	QUETTA	1-Apr-20	Week14	DETECTED
207	NALA BHAIR	OPEN DRAIN	SIALKOT	2-Apr-20	Week14	NOT DETECTED
204	KALAPUL MURRE ROAD	OPEN DRAIN	ABOTABAD	3-Apr-20	Week14	NOT DETECTED
205	HINJAL & NOORABAD	OPEN DRAIN	BANNU	3-Apr-20	Week14	NOT DETECTED
206	PUMPING S.36 AHMAD NAGAR	PUMPING STATION	FAISALABAD	3-Apr-20	Week14	DETECTED
208	TURWA	OPEN DRAIN	PISHIN	4-Apr-20	Week14	NOT DETECTED
209	ARMY KAZIBA	OPEN DRAIN	KABDULAH	4-Apr-20	Week14	NOT DETECTED
210	GULSHAN RAVI STATION	PUMPING STATION	LAHORE	6-Apr-20	Week15	NOT DETECTED
211	SABZI MANDI	OPEN DRAIN	DG KHAN	6-Apr-20	Week15	NOT DETECTED
212	SANGOT & THOTHAL	OPEN DRAIN	MIRPUR	6-Apr-20	Week15	NOT DETECTED
219	WALKWAY NEELUM & OLD NEELUM BRIDGE	OPEN DRAIN	MUZAFARABAD	6-Apr-20	Week15	NOT DETECTED
213	MIANI PUMPING STATION	PUMPING STATION	SUKKUR	7-Apr-20	Week15	NOT DETECTED
214	SURAJ MIANI	PUMPING STATION	MULTAN	8-Apr-20	Week15	NOT DETECTED
215	FRONTIER COLONY	OPEN DRAIN	KARACHI	8-Apr-20	Week15	DETECTED
216	ORANGI NALLA	OPEN DRAIN	KARACHI	8-Apr-20	Week15	NOT DETECTED
217	QASBA COLONY	OPEN DRAIN	KARACHI	8-Apr-20	Week15	DETECTED

218	BANGALI PARA	OPEN DRAIN	KARACHI	8-Apr-20	Week15	NOT DETECTED
221	MUHAMMAD KHAN COLONY	OPEN DRAIN	KARACHI	9-Apr-20	Week15	NOT DETECTED
222	KORANGI NALLA	OPEN DRAIN	KARACHI	9-Apr-20	Week15	NOT DETECTED
ICT-01	SECTOR I-10/4	OPEN DRAIN	Islamabad	9-Apr-20	Week15	DETECTED
ICT-02	SECTOR I-10/1	OPEN DRAIN	Islamabad	9-Apr-20	Week15	DETECTED
224	HIJRAT COLONY PIDC COLONY	OPEN DRAIN	KARACHI	10-Apr-20	Week15	NOT DETECTED
220	KONRA CHINA & SPAISHTA	OPEN DRAIN	WAZIR-S	10-Apr-20	Week15	NOT DETECTED
223	SABZI MANDI	OPEN DRAIN	Islamabad	13-Apr-20	Week16	NOT DETECTED
225	DHOKE DALLAL	OPEN DRAIN	RAWALPINDI	13-Apr-20	Week16	DETECTED
226	SAFDAR ABAD	OPEN DRAIN	RAWALPINDI	13-Apr-20	Week16	DETECTED
227	MAIN DISPOSAL	PUMPING STATION	DG KHAN	13-Apr-20	Week16	NOT DETECTED
228	OUTFALL STATION-G	PUMPING STATION	LAHORE	13-Apr-20	Week16	DETECTED
229	OUTFALL STATION-H	PUMPING STATION	LAHORE	13-Apr-20	Week16	NOT DETECTED
230	OUTFALL STATION-F	PUMPING STATION	LAHORE	13-Apr-20	Week16	NOT DETECTED
231	COMPOSITE SHERPAO & ZAFARABAD	OPEN DRAIN	DIKHAN	13-Apr-20	Week16	NOT DETECTED
232	COMPOSITE BUS STAND & MODC	OPEN DRAIN	DIKHAN	13-Apr-20	Week16	NOT DETECTED
233	RASHID MINHAS RD LAY	OPEN DRAIN	KARACHI	13-Apr-20	Week16	NOT DETECTED
234	HAJI MUREED GOTH	OPEN DRAIN	KARACHI	13-Apr-20	Week16	NOT DETECTED
235	TAWOOS ABAD	OPEN DRAIN	QUETTA	12-Apr-20	Week16	NOT DETECTED
236	TULSIDAS PUMPING STATION	PUMPING STATION	HYDERABAD	13-Apr-20	Week16	NOT DETECTED
237	KHAMISO GOTH	OPEN DRAIN	KARACHI	14-Apr-20	Week16	NOT DETECTED
238	SOHRAB GOTH	OPEN DRAIN	KARACHI	14-Apr-20	Week16	NOT DETECTED
240	MAKKA PUMPING STATION	PUMPING STATION	SUKKUR	14-Apr-20	Week16	NOT DETECTED
241	MACHAR COLONY	OPEN DRAIN	KARACHI	14-Apr-20	Week16	NOT DETECTED
242	BAGO ROAD & BAQIRABAD	PUMPING STATION	KAMBAR	14-Apr-20	Week16	NOT DETECTED
243	SADDAR PUMPING STATION	PUMPING STATION	JACOBABAD	14-Apr-20	Week16	NOT DETECTED
244	MASAN MULLAH	PUMPING STATION	DADU	14-Apr-20	Week16	DETECTED

245	LANDHI BAKHTAWAR VILLAGE	OPEN DRAIN	KARACHI	15-Apr-20	Week16	DETECTED
248	HADI PACKET	OPEN DRAIN	KILLA ABDULLAH	15-Apr-20	Week16	DETECTED
246	CHAKORA NULLA	OPEN DRAIN	KARACHI	15-Apr-20	Week16	NOT DETECTED
239	RAJKOT & SANSI ROAD & PEOPLE COLONY	OPEN DRAIN	GUJARANWALA	15-Apr-20	Week16	NOT DETECTED
252	GANJ MOHALLA	OPEN DRAIN	ZHOB	16-Apr-20	Week16	NOT DETECTED
247	CHAK & PAR HOTI	OPEN DRAIN	MARDAN	17-Apr-20	Week16	NOT DETECTED
ICT-04	RAWALPINDI INSTITUTE OF UROLOGY	OPEN DRAIN	RAWALPINDI	17-Apr-20	Week16	DETECTED
ICT-06	DHOKE KASHMIRIAN	OPEN DRAIN	RAWALPINDI	17-Apr-20	Week16	DETECTED
249	PUMPING S.36 AHMAD NAGAR	PUMPING STATION	FAISALABAD	17-Apr-20	Week16	NOT DETECTED
250	MILL COLONY	OPEN DRAIN	NOWSHERA	17-Apr-20	Week16	DETECTED
251	SHAHEEN MUSLIM TOWN	OPEN DRAIN	PESHAWAR	17-Apr-20	Week16	DETECTED
253	RASALA LINE	OPEN DRAIN	LORALAI	17-Apr-20	Week16	NOT DETECTED
254	MULTAN ROAD STATION	PUMPING STATION	LAHORE	20-Apr-20	Week17	DETECTED
255	AQILPUR & ASLAM TOWN	PUMPING STATION	RAJANPUR	20-Apr-20	Week17	NOT DETECTED
256	SUR PUL	OPEN DRAIN	QUETTA	20-Apr-20	Week17	NOT DETECTED
257	LABOUR NALA	OPEN DRAIN	DERA BUGHTI	20-Apr-20	Week17	NOT DETECTED
264	KATAN PUL	OPEN DRAIN	KHUZDAR	20-Apr-20	Week17	NOT DETECTED
258	WAPDA COLONY	OPEN DRAIN	NASIRABAD	20-Apr-20	Week17	NOT DETECTED
261	ALI TOWN	PUMPING STATION	MULTAN	22-Apr-20	Week17	NOT DETECTED
262	SILAN WALI	PUMPING STATION	SARGODAHA	24-Apr-20	Week17	NOT DETECTED
263	LARA MA	OPEN DRAIN	PESHAWAR	24-Apr-20	Week17	NOT DETECTED
265	KALAPUL MURRE ROAD	OPEN DRAIN	ABOTABAD	27-Apr-20	Week18	DETECTED
266	FAQIRABAD	OPEN DRAIN	KOHAT	27-Apr-20	Week18	DETECTED
267	SANGOT & THOTHAL	OPEN DRAIN	MIRPUR	27-Apr-20	Week18	NOT DETECTED
268	LALBAGH & TIBA BAHADUR	PUMPING STATION	BAHAWALPUR	28-Apr-20	Week18	NOT DETECTED
269	JATAK KILLI & TAKHTHANI	OPEN DRAIN	QUETTA	28-Apr-20	Week18	DETECTED
270	KOTLA ABDUL FATAH	PUMPING STATION	MULTAN	28-Apr-20	Week18	NOT DETECTED

* Collection Site name is designated as per drainage area or collection vicinity

Table 3: Wastewater samples collected during March 20, 2020 to April 09, 2020. A comparative analysis

Sample ID	Drainage Type	Epi Week	District	Date Collection	Kit 1 (ORF 1+ Ngene)	Kit 2 (ORF 1ab+ Ngene)	Kit 3 (ORF1ab)	Corman V. M. et. al Method (E Gene)	Final Results
186	PUMPING STATION	Week 12	RAJANPUR	20-Mar-20	ND	ND	ND	ND	ND
189	OPEN DRAINAGE	Week 12	QUETTA	20-Mar-20	+	+	ND	+	DETECTED
197	OPEN DRAINAGE	Week 14	KOHAT	30-Mar-20	ND	ND	ND	ND	ND
198	OPEN DRAINAGE	Week 14	KURRAM	30-Mar-20	ND	ND	ND	ND	ND
199	PUMPING STATION	Week 14	DIKHAN	30-Mar-20	ND	ND	ND	ND	ND
200	OPEN DRAINAGE	Week 14	DIKHAN	30-Mar-20	ND	ND	ND	ND	ND
201	OPEN DRAINAGE	Week 14	KAMBAR	31-Mar-20	ND	ND	ND	ND	ND
202	PUMPING STATION	Week 14	SHEIKHUPURA	1-Apr-20	ND	ND	ND	ND	ND
203	OPEN DRAINAGE	Week 14	QUETTA	1-Apr-20	+	+	+	+	DETECTED
204	OPEN DRAINAGE	Week 14	ABOTABAD	3-Apr-20	ND	ND	ND	ND	ND
205	OPEN DRAINAGE	Week 14	BANNU	3-Apr-20	+	+	+	+	DETECTED
206	PUMPING STATION	Week 14	FAISALABAD	3-Apr-20	+	+	ND	+	DETECTED
207	OPEN DRAINAGE	Week 14	SIALKOT	2-Apr-20	ND	ND	ND	ND	ND
208	OPEN DRAINAGE	Week 14	PISHIN	2-Apr-20	ND	ND	ND	ND	ND
209	OPEN DRAINAGE	Week 14	KABDULAH	4-Apr-20	ND	ND	ND	ND	ND
210	PUMPING STATION	Week 15	LAHORE	6-Apr-20	ND	ND	ND	ND	ND
211	PUMPING STATION	Week 15	DGKHAN	6-Apr-20	ND	ND	ND	ND	ND
212	OPEN DRAINAGE	Week 15	MIRPUR	6-Apr-20	ND	ND	ND	ND	ND
ICT-01	OPEN DRAINAGE	Week 15	ISLAMABAD	9-Apr-20	+	+	+	+	DETECTED
ICT-02	OPEN DRAINAGE	Week 15	ISLAMABAD	9-Apr-20	+	+	+	+	DETECTED

* Collection Site name is designated as per the drainage area or collection vicinity
 ND Not detected

Table 4: Sample preparation without and with centrifugation before viral RNA Extraction. Comparison among the Cq values

Lab#	Collection Site	District	Date Collection	EPI Week	Without Centrifugation step					With Centrifugation step				
					N-GENE	Cq	ORF-1ab	Cq	RESULT	N-GENE	Cq	ORF-1ab	Cq	RESULT
215	Frontier Colony	Karachi	8-Apr-20	Week15	+	37	+	38	+	+	35	+	37	DETECTED
217	Qasba Colony	Karachi	8-Apr-20	Week15	+	38	+	38	+	+	36	+	36	DETECTED
218	Bangali Para	Karachi	8-Apr-20	Week15	-		-		ND	-		-		NOT DETECTED
225	Dhoke Dallal	Rawalpindi	13-Apr-20	Week16	+	38	+	40	+	+	34	+	37	DETECTED
226	Safdarabad	Rawalpindi	13-Apr-20	Week16	+	36	+	36	+	+	33	+	36	DETECTED
228	Outfall Station G	Lahore	13-Apr-20	Week16	+	38	+	39	+	+	29	+	31	DETECTED
ICT-04	Rawalpindi Institute of Urology	Rawalpindi	17-Apr-20	Week16	+	38	+	39	+	+	34	+	37	DETECTED
ICT-06	Dhoke Kashmirian	Rawalpindi	17-Apr-20	Week16	+	39	+	39	+	+	36	+	38	DETECTED

Figure Legends:

Figure 1: **A.** Map indicating environmental sampling sites. Each purple dot represents a wastewater collection site **B.** Map indicating the red marked districts with SARS-CoV-2 positive wastewater samples. Each orange dot represents a positive wastewater sample

Figure 2: Graphical representation of positive samples among tested samples



