FIRST CONFIRMED CASE OF OMICRON VARIANT DETECTED IN THE UNITED STATES
KEY MESSAGES AND TALKING POINTS

- **As of December 1, 2021, Omicron has been identified in the United States.**
  Omicron (B.1.1.529) is reported now in more than 20 countries (including the United States and Australia, Austria, Belgium, Botswana, Brazil, Canada, Czech Republic, Denmark, France, Germany,

- Hong Kong, Israel, Italy, Japan, Netherlands, Nigeria, Norway, Portugal, Saudi Arabia, South Africa, Spain, Sweden and the United Kingdom).

- There is still a lot to learn about Omicron. We don't yet know the transmissibility or the severity of disease it causes, but we are working with international partners to learn more.

- As we've said since this new variant was first detected, we expected to see cases here in the United States. Although we are still learning about Omicron, we've been fighting COVID-19 since last year and we know what people can do to protect themselves.
  - If you're not yet vaccinated – now is the time.
  - In areas of high and substantial transmission, regardless of vaccination status, wear a mask indoors.
  - Remember to stay 6 feet away from people and avoid crowds and poorly ventilated areas.

- Despite the detection of this new variant, Delta remains the dominant variant and represents more than 99% of circulating strains.

- CDC works with international partners to learn about variants and will continue to monitor all sources of data closely to detect any emergence of Omicron in the United States.

- We are working with international partners to get more people vaccinated. To-date, we have sent 275 million doses to 110 countries.

FREQUENTLY ASKED QUESTIONS

What does CDC know about this case?
On December 1, 2021 the California and San Francisco Departments of Public Health confirmed that a recent case of COVID-19 among an individual in California was caused by the Omicron variant (B.1.1.529).

The individual was a traveler who returned from South Africa on November 22, 2021. The individual, who had mild symptoms that are improving, is self-quarantining and has been since testing positive. All close contacts have been contacted and have tested negative.

Genomic sequencing was conducted at the University of California, San Francisco and the sequence was confirmed at CDC as being consistent with the Omicron variant. This will be the first confirmed case of COVID-19 caused by the Omicron variant detected in the United States.

Is public health working fast enough to detect and control the spread of Omicron in the U.S.?
CDC is working with state and local public health officials to quickly identify Omicron in the U.S. CDC has continuously monitored variants and vastly expanded our capacity for genomic sequencing over the past 9 months. We have increased our genomic sequencing capability from 8,000 samples per week earlier this year to approximately 80,000 samples per week – more than any other country – and about 1 in every 7 PCR

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positive cases. CDC has received specimens from all 50 states plus Guam, Northern Mariana Islands, Puerto Rico, the Virgin Islands and the District of Columbia. We are sequencing samples from these jurisdictions and from geographically diverse areas around the country, collaborating with state labs, academia and industry partners. Right now, the Delta variant remains the predominant circulating strain, representing 99.9 percent of all sequences sampled.

How is CDC doing surveillance for variants?
National SARS-CoV-2 genomic surveillance is a multifaceted system that has reliably detected new variants in the United States. CDC established multiple pipelines to connect genomic sequence data from CDC, public health laboratories, and commercial diagnostic laboratories within publicly accessible databases maintained by the National Center for Biotechnology Information (NCBI) and the Global Initiative on Sharing Avian Influenza Data (GISAID).

How does Omicron compare to Delta?
CDC is following the details of this new variant closely. Omicron is not derived directly from Alpha, Delta or other Variants of Concern.

- [Therapeutics] The Omicron variant has several genetic changes (mutations). Scientists are working to determine if these changes have implications for the benefits provided by existing COVID-19 therapeutic treatments. Based on the genetic changes in the spike protein, reduction in the susceptibility to certain treatments is likely.
- [Transmissibility] It is not yet known how easily Omicron spreads compared to the highly transmissible Delta variant. Research efforts are underway to better understand this issue.
- [Disease Severity] More data are needed to know if Omicron breakthrough infection or reinfections cause more severe illness or death than other variants. Based on preliminary information from South Africa, no unusual symptoms have been reported following infection with the Omicron variant

Do current vaccines continue to be effective?
Vaccination remains the best public health measure to protect from disease, slow the spread of SARS-CoV-2, and reduce the likelihood of new variants emerging. Scientists are currently investigating Omicron, including how protected fully vaccinated people will be against infection, hospitalization, and death. CDC recommends that everyone 5 years and older protect themselves from COVID-19 by getting fully vaccinated. CDC encourages a COVID-19 vaccine booster dose for those who are eligible.

Is Omicron evading treatment (monoclonal antibodies)?
The Omicron variant has several genetic changes (mutations). Scientists are working to determine if these changes have implications for the benefits provided by existing COVID-19 therapeutic treatments. Based on the genetic changes in the spike protein, reduction in the susceptibility to certain treatments is likely.

What is the U.S. doing to get more vaccines to other countries?

- We have sent 275 million doses to the world – more than every country combined. This includes:
    - 94 million to the continent of Africa
    - 13 million to Southern Africa
    - 8 million to South Africa

How is CDC supporting Africa?
CDC works closely with public health authorities in the southern African region, including Ministries of Health. CDC also supports critical multilateral partners, including the World Health Organization (WHO), WHO AFRO Regional Office, Africa CDC and UNICEF.

CDC support to southern Africa has included range of activities to meet the following goals and objectives:

- Strengthen capacity to prevent, detect, and respond to local COVID-19 cases, including getting timelier and more accurate data to inform public health decision-making and strengthening the public health workforce globally
- Mitigate COVID-19 transmission in the community, across borders, and in healthcare facilities; prevent transmission of COVID-19 in healthcare facilities, among healthcare workers and public health personnel and minimize disruptions to essential health services
- Contribute to the scientific understanding of COVID-19 and address crucial unknowns regarding clinical severity, extent and pathways of transmission, and infection with support for special investigations
- Ensure readiness to implement and evaluate vaccination programs and use therapeutics when available
- Of particular importance related to detection of and response to the Omicron variant and in addition to ongoing efforts, CDC has partnered with Bill and Melinda Gates Foundation, Africa CDC, and Ilumina in the Pathogen Genomics Initiative to develop sequencing capacity in southern Africa.
- In southern Africa, including South Africa, Botswana, Eswatini, Lesotho, Namibia, Mozambique, Malawi, and Zimbabwe, CDC has provided technical assistance to support expansion of capacity to conduct PCR and other diagnostic testing, including procurement of equipment, reagents, and supplies, and training.