

Multi-omics in COVID-19: Seeing the unseen but  
overlooked in the clinic

COVID-19的多组学研究，照亮被忽视的角落

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## Background

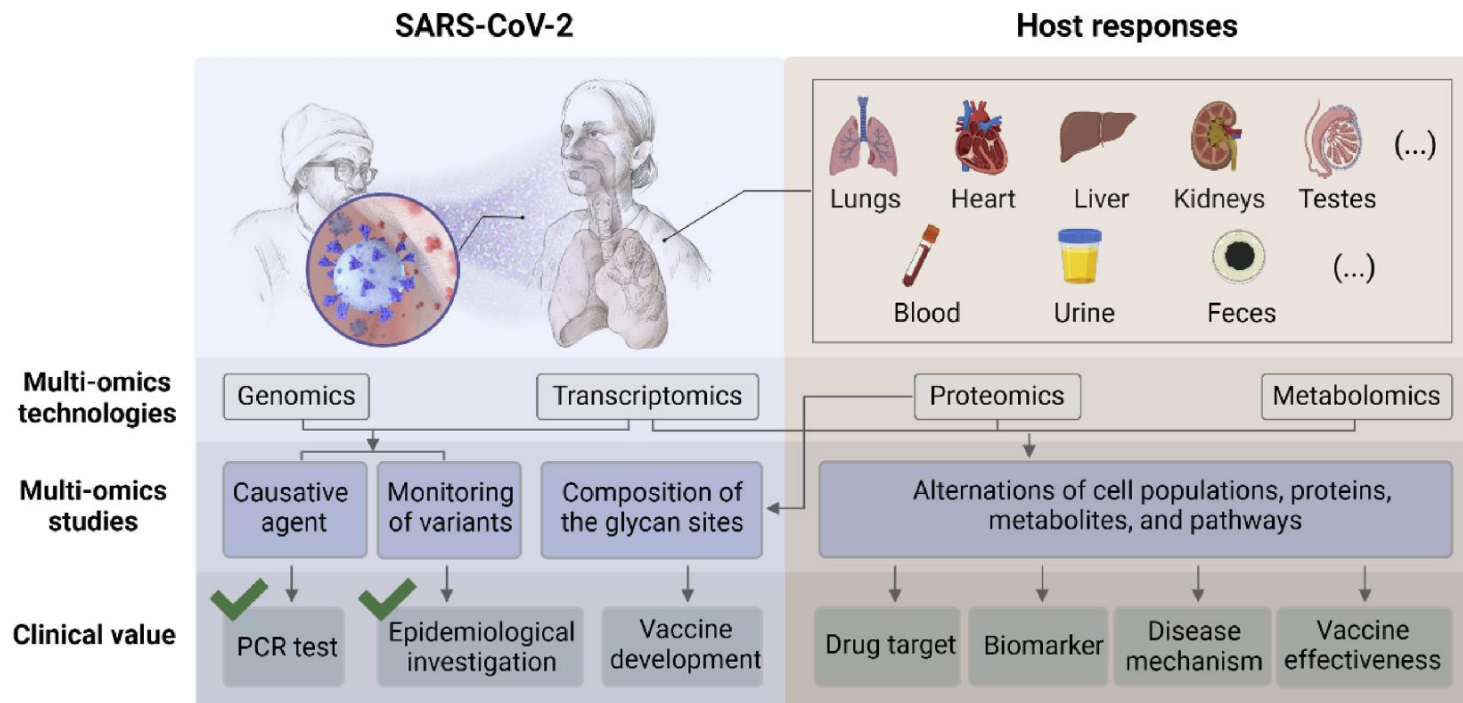
As of February 12, 2022, more than **200 countries** and territories have reported over **405 million** confirmed cases of COVID-19, and **5.8 million** recorded deaths.

While vaccinations have not stopped the spread of SARS-CoV-2, they have reduced the risk of serious disease and death in adults and children.

Investigations deploying multi-omics technologies reveal **the underlying molecular structure of the pathogen** and **molecular host responses to the virus and vaccines**.

# Main points

- 1) The pathogen
- 2) Host responses to the pathogen
- 3) Host responses to vaccines
- 4) Why are proteomics and metabolomics largely overlooked in the clinic?
- 5) Other challenges



## The pathogen

1. The virus causing COVID-19 was first identified by metagenomic RNA sequencing → PCR-based assays (diagnose)
2. The discovery of mutations provides crucial information to track the spread of these variants.
3. Mass-spectrometry (MS)-based characterization of the spike (S) glycoprotein of the virus → vaccines

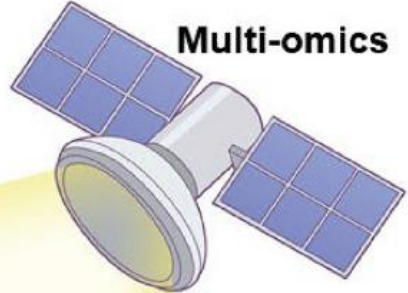
## Host responses to the pathogen

1. Expanded our views on circulating molecular changes → biomarkers
  - A) Sera
  - B) Urine
2. Local responses in multiple solid organs → mechanism
3. Identification of target cells of the virus

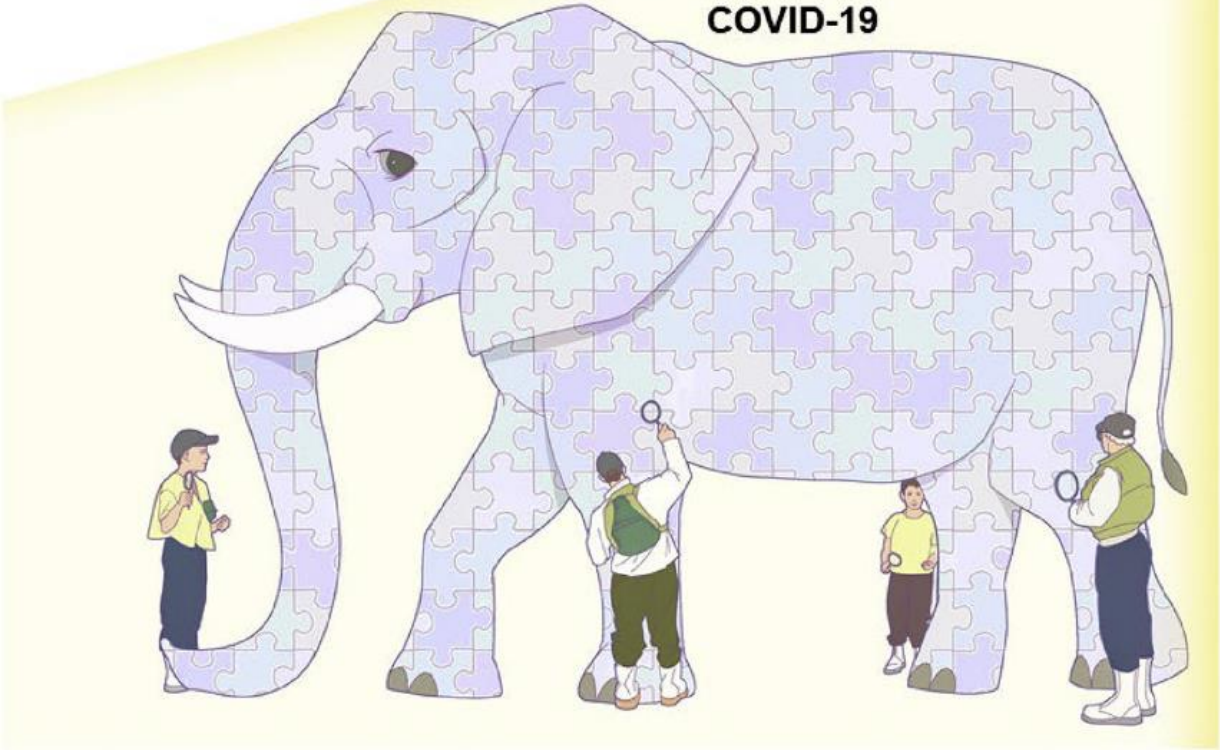
## Host responses to vaccines

1. mRNA vaccines showed 80% efficacy against symptomatic infection even after only one dose in the absence of detectable neutralizing antibodies.
2. Up to 6% of recipients are seronegative after the second injection.
3. More than 0.004% of recipients experienced severe side effects
4. Breakthrough infections occur in vaccinated individuals
5. Timely monitoring of serological host responses is theoretically informative for epidemiological tracking in a population and could potentially offer useful information to guide vaccine dosage and dose spacing





Multi-omics



## Why are proteomics and metabolomics largely overlooked in the clinic?

1. Reproducible?
2. Robust?
3. Cost?
4. The lack of standardization



## Other challenges

1. It is inherently not straightforward to integrate multi-omics data by algorithms
2. Collection of potentially infectious samples during the pandemic poses additional challenges.



**THANK YOU**

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