Virus isolation from India - another false study!

Saeed A. Qureshi, Ph.D. (principal@pharmacomechanics.com)

During the beginning phase of the so-called pandemic, I evaluated two studies, one from Australia (link) and the other from the USA (CDC, link), describing that studies made false claims of virus isolation. But unfortunately, everyone likes to be on the bandwagon, as it pays high financial and personal rewards. Therefore, others make similar claims that SARS-COV-2 (COVID-19 virus) exists and has been isolated.

A similar study from India is also making a stir – promoted as evidence for SASR-COV-2 isolation in India (First isolation of SARS-CoV-2 from clinical samples in India, link). But, in short, it is also as false as others, including those two mentioned above. For example, the following from the Indian study clearly indicates misrepresenting experiments/science and their conclusion.

- 1. "In the current pandemic situation, the isolation of SARS-CoV-2 is important for developing and evaluating diagnostic reagents, for antiviral studies and for screening of vaccine candidates." Comment: The article clearly means obtaining (isolating/extracting) a pure sample/specimen of the virus (SAR-COV-2) from the swab sample.
- 2. "We describe here the successful isolation and characterization of SARS-CoV-2 from clinical samples in India using Vero CCL-81 cells by observing cytopathic effects"

Comment: Vero cells provide culture to grow the virus if it exists. The isolation step comes after culturing. Culturing and isolation are two separate steps. Culturing helps grow the virus. Isolation is to extract or isolate the virus from the medium/culture/gunk to have the virus in a test tube or vial. The intent and claim of the study are clearly to have the pure virus in a container, but as the isolation step was never performed, the virus could not be obtained either.

3. "Vero CCL-81 cells infected with SARS-CoV-2 strain NIV-2020-770 and uninfected cells (CC) were transferred onto microcavity slides and fixed with acetone."

Comment: This is an irrelevant point to confuse or mislead the readers. The study objective is to isolate the virus, not to study the cytotoxic or cytopathic effect in culture.

4. "Next-generation sequencing was performed on SARS-CoV-2 positive clinical samples (100 μ l) included in the study and the tissue culture fluid (50 μl) of virus isolates"

> Comment: This is also an irrelevant point. The study objective is to isolate the virus, not the sequencing—another statement to confuse/mislead the audience.

5. "BLAST

(https://blast.ncbi.nlm.nih.gov/Blast.cgi) identification of the viral genome sequences retrieved from the clinical samples and their isolates had 99.98 per cent identity with the SARS-CoV-2 isolate Wuhan-Hu-1 (Accession No. NC_045512)."

Comment: The SARS-CoV-2 **isolate**, which in simple language is gunk or sewage, is not the "isolated virus." Please see here (<u>link</u>) for an accurate interpretation of the isolated virus and the virus isolate. Again, the publication's objective is not to sequence but to isolate the virus to obtain a virus sample, which may be used for sequencing later, if needed.

 "This is the first successful virus isolation of SARS-CoV-2 in the Vero CCL-81 cells in India from nasal and throat swabs of persons with a travel,"

Comments: but no isolated virus was obtained. Absolutely a false statement – no virus (sample) has been isolated/obtained.

7. "Isolation of the virus in such a pandemic situation would help to develop indigenously designed reagents such as positive controls, virus antigen and antibodies, which could lead to the indigenous development of serodiagnostic assays."

Comments: Indeed, such uses of viruses are desirable, hence the study.

- However, no sample of the virus has been obtained in the study.
- 8. One of the figures from the publication (below) clearly indicates the use of the word isolate, not the virus or isolated virus. The picture only shows that the authors worked with isolate and did not isolate the virus.

Conclusion: Referring to virus isolate as the virus is the height of ignorance and incompetency of the subject matter (<u>link</u>). Therefore, such publications should immediately be retracted, and authors should be considered liable for conducting fraudulent science and making false and deceptive claims.

In the future, such work must be conducted and/or evaluated by a third party (external to medicine areas), particularly with specialization in separation, isolation, and characterization of substances, preferably with a chemical science background.

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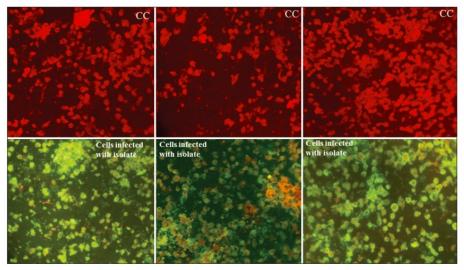


Fig. 1. Immunofluorescence images (red panel) showing uninfected Vero CCL-81 cells probed by positive patient serum samples after post infection day of 13th (left), 11th (middle) and seventh (right) and with SARS-CoV-2 strain NIV-2020-770 infected Vero CCL-81 cells probed by positive patients serum (green panel) showing the reactivity of virus and antibody.