Complete Genome Characterization and Phylogenetic Analysis of WU Polyomavirus in Thai Pediatric Patients with Respiratory Tract Infections in 2013

Prangwalai Chanchaem MSc*, Yong Poovorawan MD**, Sunchai Payungporn PhD***

* Medical Science, Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand

** Center of Excellence in Clinical Virology, Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand

*** Department of Biochemistry, Faculty of Medicine, Chulalongkorn University, Bangkok, Thailand

Background: The WU polyomavirus (WUPyV) is a small DNA virus (family Polyomaviridae) that contains a circular double-stranded DNA genome, approximately 5 kb in length. WUPyV was first discovered in the respiratory tract of children with acute respiratory symptoms.

Objective: This study focuses on the complete genome characterization and phylogenetic analysis of WUPyV obtained from Thai patients with respiratory diseases in 2013.

Material and Method: DNA was extracted from nasopharyngeal (NP) suction specimens (n = 614) from patients with respiratory tract infections. WUPyV was detected by using semi-nested PCR and then characterized by whole genome sequencing. The nucleotides and deduced amino acid sequences were analyzed by multiple sequences alignment and phylogenetic tree.

Results: Analysis revealed that 0.16% (1/614) of the sample was positive for WUPyV. Phylogenetic trees demonstrated that WUPyV (isolate CU_Chonburi 3) was closely related to previously described WUPyV. Moreover, whole genome sequences alignment of WUPyV showed several nucleotide variations within non-coding regions and amino acid changes in VP1 (position S347T); VP2 (positions L40V, G120R, Y121I, P123R, G127S, L137F, Q287R, and A327V); LTAg (positions Q357P, V369E, E377K, D378V, A381T, R382E, R383G, and D389G); and, STAg (positions R139S, K141E, R148K, and W153C).

Conclusion: Nucleotide variations within non-coding regions and critical amino acid substitutions in viral proteins may affect the rate of viral replication and viral adaptation; factors that may be linked to the susceptibility and severity of viral infection. Data obtained from this study may be useful in better understanding the genetic characterization and mutation patterns of WUPyV.

Keywords: WU polyomavirus, Characterization, Phylogenetic, Thailand

J Med Assoc Thai 2015; 98 (Suppl. 1): S29-S35 Full text. e-Journal: http://www.jmatonline.com

Respiratory tract infection is a major cause of hospitalization in infants and young children. The common respiratory viruses include influenza viruses, parainfluenza virus, rhinovirus, respiratory syncytial virus, coronaviruses, adenoviruses, and metapneumovirus⁽¹⁾. Novel viruses that may cause respiratory illness have recently been identified. In 2007, WU (Washington University) polyomavirus (WUPyV) was first discovered in the respiratory tract of children with acute respiratory symptoms⁽²⁾. WUPyV is a small DNA virus belonging to the *Polyomaviridae* family. It

Correspondence to:

Payungporn S, Department of Biochemistry, Faculty of Medicine, Chulalongkorn University, Rama IV Road, Patumwan, Bangkok 10330, Thailand.

Phone & Fax: 0-2256-4482

 $E{\text{-}mail: sp.medbiochemcu@gmail.com}$

contains a circular double-stranded DNA genome that is 5,229 bp in length⁽³⁾. The genome consists of three functional regions, including early, late, and non-coding regions. The early region encodes regulatory proteins, including large T antigen (LTAg) and small T antigen (STAg), which are responsible for viral DNA replication and gene expression. The late region encodes three capsid proteins: VP1, VP2, and VP3. The non-coding region encompasses the origin of replication and transcription control elements⁽³⁾. Accordingly, this virus contains 5 functional proteins: LTAg, STAg, VP1, VP2, and VP3. The large T-antigen is required for viral DNA replication, virion assembly, and transcription. The small T-antigen protein is also able to activate several cellular pathways that stimulate cell proliferation. The three capsid proteins include a major coat protein, VP1, and two minor coat proteins, VP2 and VP3.

WU polyomavirus was observed in clinical specimens obtained from children with respiratory tract infection in several countries, including Australia (2.97%)⁽²⁾, United Kingdom (1.02%)⁽⁴⁾, France (2.42%)⁽⁵⁾, China (2%)⁽⁶⁾, Thailand (6.29%)⁽⁷⁾, South Korea (6.99%)⁽⁸⁾, and Canada (6.41%)⁽⁹⁾. The prevalence and molecular characterization of WUPyV in Thai patients were previously reported in 2008⁽⁷⁾. However, mutations in the viral genome may have occurred since that time. Therefore, this study focused on the complete genome characterization of WUPyV obtained from Thai pediatric patients with respiratory disease in 2013. Those findings were then compared with previously described characterizations of WUPyV. The comparative findings may provide insights into the viral mutation and genetic variability of WUPyV that may be responsible for the virulence and pathogenesis of this virus.

Material and Method

Clinical samples

Nasopharyngeal (NP) suction samples (n = 614) were collected from patients with influenza-like illness at King Chulalongkorn Memorial Hospital and Chonburi Hospital, Thailand. The protocol for this study was approved by the Institutional Review Board (IRB No. 457/56), Faculty of Medicine, Chulalongkorn University.

Detection of WUPyV by semi-nested PCR amplification

DNA was extracted from 100 µL of NP suction using a HiYieldTM Viral Nucleic Acid Extraction kit (Real Genomics, USA), according to manufacturer protocol. Semi-nested PCR amplification within LTAg of WUPyV was performed using specific primers. The first round of PCR was amplified by WU_4337F: 5′-CATTATTAACWCCTTTACARAATAA-3′ and WU_4585R: 5′-TGTC WCAWGCTGTATTTAGTAA TA-3′; whereas, the second PCR was performed by WU_4390F: 5′-AAGTTATTAAYAGCACTAACTCTA TG-3′ and WU_4585R.

The expected semi-nested PCR product of WUPyV was approximately 215 bp. Moreover, amplification of the GAPDH gene (199 bp) using GAPDH_F404: 5'-CTTCACCACCATGGAGAAGG-3' and GAPDH_R603: 5'-GTTGTCATGGATGACC TTGGC-3' served as the internal control for detection.

Whole genome amplification of WUPyV

The complete genome of WUPyV was amplified directly from clinical samples, using 4 primer

pairs in order to generate overlapping PCR products of the circular genome. All primers used for whole genome amplification were designed from nucleotide conserved regions from different strains of WUPyV, as previously described⁽⁷⁾.

PCR conditions

The PCR reaction mixture comprised 1 μ l of DNA, 2.5 μ l of 10xPCR buffer minusMg, 0.5 μ l of 10 mM dNTPs mixture, 0.75 μ l of 50 mM MgCl₂, 0.5 μ M of each primer, and 19.25 μ l of distilled water for a final volume of 25 μ l. Thermal profiles are described, as follows: initial denaturation at 94°C for 3 minutes; followed by, 40 amplification cycles consisting of 94°C for 30 seconds, 55°C for 30 seconds, and 72°C for 1.30 minutes; and, a final extension at 72°C for 7 minutes. Positive and negative controls were included in each run to ensure suitable detections.

Gel electrophoresis and nucleotide sequencing

PCR products were separated by 2% agarose gel electropholysis and then visualized by ethidium bromide staining under UV transillumination. The PCR amplified products were then purified using HiYield $^{\mathsf{TM}}$ Gel Extraction (RBC Bioscience, Taiwan). Nucleotide sequencing was then performed by First BASE Laboratories Sdn Bhd, Selangor, Malaysia.

Nucleotide sequences analysis

Nucleotide sequences were analyzed using the BLAST analysis tool (http://www.ncbi.nlm.gov/ BLAST). Complete genome sequences were assembled using the contig assembly program (CAP) and aligned using ClustalW software, and implemented using the BioEdit Sequence Alignment Editor (version 7.0.4.1). The complete genome sequence of WU polyomavirus obtained from the present study was submitted to the GenBank database and assigned accession number: KJ725028. Other genome sequences of WUPyV analyzed in this study were obtained from the GenBank database, including: WUPyV reference strain (NC_009539); USA (EF444554 and FJ794068); Thailand (EU358768 and EU358769); China (EU296475, GQ926980, and FJ890981); Germany (EU711058); and, Australia (GU296363, GU296405, and GU296408). Nucleotide sequences were selected according to year and country of isolation. Redundant sequences were excluded from this analysis. The similarity of genome sequences between sample and WUPyV reference sequence were analyzed by Simplot version 3.5.1 (http:// sray.med.som.jhmi.edu/SCRoftware/simplot).

Phylogenetic analysis

Phylogenetic trees were constructed by neighbor-joining (NJ) method with bootstrap (1000) and Tamura-Nei nucleotide substitution model implemented in Molecular Evolutionary Genetics Analysis (MEGA) program version 5.2 (http://www.mybiosoftware.com/phylogenetic-analysis/2334). All WUPyV genome sequences described above were included in the phylogenetic tree.

Results

Detection of WUPyV

The detection of WUPyV from Thai patients with respiratory diseases in 2013 revealed that 0.16% (1/614) of the sample was positive for WUPyV. BLAST analysis confirmed that this positive sample was closely related to WUPyV. This sample was assigned as WUPyV isolate CU_Chonburi 3 and the complete genome was further characterized. Other samples were negative for WUPyV, but were positive for GAPDH internal control; a result indicating appropriate sample collections and DNA extraction processes.

Complete genome analysis of WU polyomavirus

The genome of WUPyV (isolate CU_Chonburi 3) was closely related to the reference sequence of WUPyV (NC_009539), with 99% similarity. The genomes were then further compared by using the SimPlot software program (public domain). The result revealed that WUPyV (CU_Chonburi 3) was slightly different from WUPyV (NC_009539), as follows: noncoding region (positions 100-350); VP2 (positions 850-1,000); LTAg (positions 3,500-3,700); STAg (positions 4,650-4,800). The complete genome of WUPyV (CU_Chonburi 3) was then aligned with several WUPyV whole genome sequences from several countries, including Australia, USA, Germany, China, and Thailand during the timeframe of 2007-2011. Table 1 describes several nucleotide variations within noncoding regions, to include positions 37, 67, 73, 95, 130, 152, 173, 177, 180, 181, 206, 275, 293, 294, 350, 451, 499, 4522, and 5211. Table 2 illustrates amino acid changes in VP1 (position S347T); VP2 (positions L40V, G120R, Y121I, P123R, G127S, L137F, Q287R, and A327V); LTAg (positions Q357P, V369E, E377K, D378V, A381T, R382E, R383G, and D389G); and, STAg (positions R139S, K141E, R148K, and W153C).

Phylogenetic analysis

Phylogenetic trees were constructed based on analysis of nucleotide sequences within VP1, VP2,

LTAg, and STAg (Fig. 2). The phylogenetic tree of the VP1 gene (Fig. 2A) demonstrated that WUPyV (isolate CU_Chonburi 3) was closely related to previously described WUPyV, such as WUPyV reference sequence (NC 009539), isolate MN 2726 from Australia in 2010 (GU296405), and isolate CLFF from China in 2008 (EU296475). Conversely, phylogenetic trees obtained from the analysis of VP2 (Fig. 2B), LTAg (Fig. 2C), and STAg (Fig. 2D), revealed that WUPyV (isolate CU_Chonburi 3) was quite unrelated to other strains of WUPyV.

Discussion

According to the previous study, the prevalence of WUPyV in Thailand in 2008 was 6.29% (19/302)⁽⁷⁾. However, the present study observed a prevalence of only 0.16% (1/614) in Thai patients with respiratory disease during 2013. When comparing the current and previous studies, there was no difference in specimen type (NP suction) or detection technique (semi-nested PCR). Moreover, the sample size used in this study was double the sample size used in the previous report. Accordingly, type of specimen, detection method, and sample size were not responsible for the low prevalence of WUPyV observed in the present study. A possible explanation may be a difference in antibody response against WUPyV. WUPyV contains VP1 as a major coated protein to target cell receptors; as such, VP1 protein becomes the main target of host neutralizing antibodies. According to the analysis in the present study, the VP1 gene of WUPyV (isolate CU_Chonburi 3) was relatively conserved (only one amino acid change: S347T), consistent with the previous descriptions of WUPyV (Fig. 1 and 2A). This finding implies that WUPyV in 2013 should be neutralized by antibodies against the VP1 protein. Consequently, the prevalence of WUPvV in 2013 should be very low, as compared to prevalence rates reported in the previous studies (2,4-15).

Phylogenetic analysis based on the VP1 gene revealed that WUPyV isolated from several countries, including Australia, USA, Germany, China, and Thailand, from 2007 to 2013 were closely related. The phylogenetic trees of WUPyV (isolate CU_Chonburi 3) based on VP2, LTAg, and STAg were located a considerable distance from other strains of WUPyV. However, additional WUPyV genome sequences from several countries should be chronologically investigated in order to understand better the evolution of this virus.

Mutations within viral proteins (LTAg, STAg,

Table 1. Nucleotide variations within non-coding regions

	Country	Year						Nucl	eotide	variat	ons w	Nucleotide variations within non-coding regions*	on-coc	ing re	;ions*						Accession
			37	29	73	95	130	152	173	177	180 181		206 2	275 29	293 294	1 350	451	499	4522	5211	.00.
WU Ref strain Aust	Australia	2007	مح	مع	ad	50	ပ	۵۵	ာ	ິ ວ	50	g	B	t	B	၁	c	c	а	5.0	NC_009539
		2007	مه	ad	50	οo	၁	ad	၁	<i></i> ن	50	g	B	t	В	၁	၁	၁	۵۵	а	EF444554
CU-295 Thai		2008	مه	ad	50	οo	၁	ad	၁	<i></i> ن	50	g	B	t	В	၁	၁	၁	۵۵	а	EU358768
		2008	۵۵	ac	50	ac	c	ac	၁	<i></i> ن	50	g	g	t	В	c	၁	၁	۵۵	۵۵	EU358769
		2008	۵۵	ac	50	ac	c	ac	၁	<i></i> ن	80	g	g	t	В	c	၁	၁	В	۵۵	EU296475
GD-WU709 Chin	China	2009	0.0	۵۵	50	50	၀	ad	c	S2 C	50	g	В	t	а	c	၁	၁	۵۵	а	GQ926980
7029		2009	50	50	مه	مه	c	50	°	Si C	50	g	В	t	а	c	c	c	ρū	а	FJ794068
zburg	Germany 2	5009	50	50	50	50	၀	0.0	o o	Si C	8	g	a	t	а	၀	၁	၁	۵۵	а	EU711058
		2010	50	50	ρū	۵۵	၀	50	°	C	50	g	а	t	а	၀	၁	၁	ρū	а	GU296363
MN2726 Aust		2010	مه	ad	50	ac	၁	ad	၁	." ၁	a g	g	В	t	В	၀	၁	၁	ρū	а	GU296405
O3 Aust	Australia	2010	50	50	ρū	50	c	50	°	C	00	g	B	t	а	၀	c	c	ρū	а	GU296408
FZ18 China		2011	50	50	ρū	۵۵	၀	50	c	C	00	g	а	t	а	၀	၁	၁	ρū	а	FJ890981
CU_Chonburi 3 Thai	Thailand	2013	c	c	а	c	а	t	a	a		а	مه	ac	ac	а	t	t	ad	t	KJ725028

^{*} Position refers to NC_009539 (WU Ref strain)

Table 2. Amino acid changes in VP1, VP2, LTAg, and STAg

Isolate name	Country	Year									Aı	Amino acid changes*	cid cha	nges*									Accession
			VP1					VP2							LTAg					STAg	81		O
			347	40	120	120 121	123	127	127 137 287	87 3	327 3:	357 36	369 377	l	378 381	1 382	2 383	3 389	9 139	9 141	148	153	
WU Ref strain	Australia	2007	S	L	G	>	Ъ	G	г (A A		>	E	D	A	R	~	Ω	~	X	~	×	NC_009539
SS	USA	2007	S	Γ	Ü	Υ	Ь	Ŋ) T	A	0	>	Щ	Ŋ	A	ĸ	R	О	R	K	R	\geqslant	EF444554
CU-295	Thailand	2008	S	Γ	Ü	Y	Ь	Ŋ)]	A .	ن	>	П	Ω	A	R	R	Ω	R	X	R	\geqslant	EU358768
CU-302	Thailand	2008	S	Γ	Ü	\times	Ь	Ŋ) T	A	ن	>	田	Ω	A	R	R	Ω	R	K	ĸ	\geqslant	EU358769
CLFF	China	2008	S	Γ	Ü	Υ	Ь	Ŋ) T	A	0	>	Щ	Ω	A	ĸ	R	О	R	K	R	\geqslant	EU296475
GD-WU709	China	2009	S	Γ	Ü	Υ	Ь	Ŋ) T	A >	0	>	田	Ω	A	R	R	О	R	K	R	\geqslant	GQ926980
Rochester-7029 USA	S USA	2009	S	Γ	Ü	Υ	Ь	G) T	A .	0	>	Щ	Ω	A	ĸ	×	Ω	ĸ	K	R	\geqslant	FJ794068
Wuerzburg	Germany	2009	Т	Γ	Ü	Υ	Ь	G	L E	E	ن	>	Щ	Ω	∢	R	R	Ω	R	X	×	\geqslant	EU711058
091	Australia	2010	L	Γ	Ü	Υ	Ь	Ŋ	T T	A	ن	>	Щ	Ω	A	ĸ	R	О	R	K	×	\geqslant	GU296363
MN2726	Australia	2010	S	Γ	Ċ	Υ	Ь	Ü)]	A >	0	>	田	О	A	R	R	Ω	R	K	R	\geqslant	GU296405
03	Australia	2010	Т	Γ	Ü	Υ	Ь	G	L L	A >		>	Щ	Ω	∢	R	R	Ω	R	X	R	\geqslant	GU296408
FZ18	China	2011	Т	Γ	Ü	Y	Ь	Ü	L L	A >	0	>	Ш	Ω	A	R	R	Q	R	X	R	\geqslant	FJ890981
CU_Chonburi 3 Thailand	Thailand	2013	Т	>	R	Ι	R	S	F. R	R V		П	×	>	Τ	Щ	Ü	Ü	S	Щ	X	C	KJ725028

^{*} Position refers to NC_009539 (WU Ref strain)

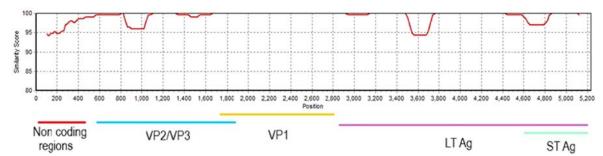


Fig. 1 Similarity plot of complete genome sequences between WUPyV (CU_Chonburi 3) and WUPyV reference sequence (NC_009539).

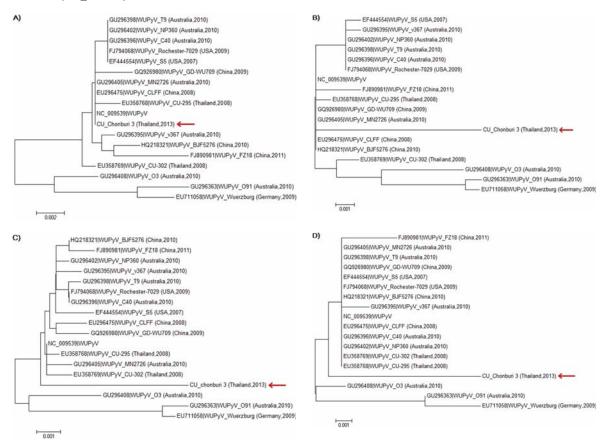


Fig. 2 Phylogenetic analysis of WUPyV based on (A) VP1, (B) VP2, (C) LTAg, and (D) STAg genes.

VP1, and VP2) were determined by whole genome comparison. Amino acid changes can be divided into 2 groups, including non-critical and critical amino acid changes. Changes in non-critical amino acids may not affect the function of the proteins, because the properties of amino acids are similar (including: VP1 (position S347T); VP2 (positions L40V, Q287R, and A327V); and, STAg (position R148K)). On the other hand, changes in critical amino acids may influence the function of the proteins by triggering properties specific

to individual amino acids, to include: charge, ring structure, glycosylation site, and disulfide linkage. The critical amino acid changes observed in this study include: VP2 (positions G120R, Y121I, P123R, G127S, and L137F); LTAg (positions Q357P, V369E, E377K, D378V, A381T, R382E, R383G, and D389G); and, STAg (positions R139S, K141E, and W153C).

Conclusion

Nucleotide variations within non-coding

regions and critical amino acid substitutions in viral proteins may affect the rate of viral replication and viral adaptation, which may be linked to susceptibility and severity of viral infection. However, further experimental investigation is required in order to confirm the impact of each non-synonymous mutation on the characteristics of WUPyV and the specific immune response to this particular virus.

Acknowledgement

The authors of the present study wish to acknowledge with gratitude the Department of Biochemistry, Faculty of Medicine, Chulalongkorn University and the Center of Excellence in Clinical Virology, Faculty of Medicine, Chulalongkorn University for their invaluable contribution to the success of the present study.

Funding disclosure

Funding for this study was provided by the Thailand Research Fund (TRF: RSA5680031) and the Ratchadapiseksompotch Fund, Faculty of Medicine, Chulalongkorn University.

Potential conflicts of interest

None.

References

- Kleines M, Hausler M, Kruttgen A, Scheithauer S. WU Polyomavirus (WUPyV): A Recently Detected Virus Causing Respiratory Disease? Viruses 2009; 1: 678-88.
- Gaynor AM, Nissen MD, Whiley DM, Mackay IM, Lambert SB, Wu G, et al. Identification of a novel polyomavirus from patients with acute respiratory tract infections. PLoS Pathog 2007; 3: e64.
- Allander T, Andreasson K, Gupta S, Bjerkner A, Bogdanovic G, Persson MA, et al. Identification of a third human polyomavirus. J Virol 2007; 81: 4130-6.
- 4. Norja P, Ubillos I, Templeton K, Simmonds P. No evidence for an association between infections with WU and KI polyomaviruses and respiratory disease. J Clin Virol 2007; 40: 307-11.

- Foulongne V, Brieu N, Jeziorski E, Chatain A, Rodiere M, Segondy M. KI and WU polyomaviruses in children, France. Emerg Infect Dis 2008; 14:523-5.
- 6. Ren L, Gonzalez R, Xu X, Li J, Zhang J, Vernet G, et al. WU polyomavirus in fecal specimens of children with acute gastroenteritis, China. Emerg Infect Dis 2009; 15: 134-5.
- Payungporn S, Chieochansin T, Thongmee C, Samransamruajkit R, Theamboolers A, Poovorawan Y. Prevalence and molecular characterization of WU/KI polyomaviruses isolated from pediatric patients with respiratory disease in Thailand. Virus Res 2008; 135: 230-6.
- Han TH, Chung JY, Koo JW, Kim SW, Hwang ES. WU polyomavirus in children with acute lower respiratory tract infections, South Korea. Emerg Infect Dis 2007; 13: 1766-8.
- Abed Y, Wang D, Boivin G. WU polyomavirus in children, Canada. Emerg Infect Dis 2007; 13: 1939-41.
- Goh S, Lindau C, Tiveljung-Lindell A, Allander T. Merkel cell polyomavirus in respiratory tract secretions. Emerg Infect Dis 2009; 15: 489-91.
- 11. Csoma E, Sapy T, Meszaros B, Gergely L. Novel human polyomaviruses in pregnancy: higher prevalence of BKPyV, but no WUPyV, KIPyV and HPyV9. J Clin Virol 2012; 55: 262-5.
- Abedi KB, Vallely PJ, Corless CE, Al Hammadi M, Klapper PE. Age-related pattern of KI and WU polyomavirus infection. J Clin Virol 2008; 43: 123-
- Bialasiewicz S, Whiley DM, Lambert SB, Wang D, Nissen MD, Sloots TP. A newly reported human polyomavirus, KI virus, is present in the respiratory tract of Australian children. J Clin Virol 2007; 40: 15-8.
- Bialasiewicz S, Whiley DM, Lambert SB, Nissen MD, Sloots TP. Detection of BK, JC, WU, or KI polyomaviruses in faecal, urine, blood, cerebrospinal fluid and respiratory samples. J Clin Virol 2009; 45: 249-54.
- Babakir-Mina M, Ciccozzi M, Campitelli L, Aquaro S, Lo CA, Perno CF, et al. Identification of the novel KI Polyomavirus in paranasal and lung tissues. J Med Virol 2009; 81: 558-61.

การศึกษาจีโนมและการจำแนกสายพันธุ์ของ WU polyomavirus ในผู้ป่วยติดเชื้อระบบทางเดินหายใจในประเทศไทยปี พ.ศ. 2556

ปรางวลัย จันทร์แจ่ม, ยง ภู่วรวรรณ, สัญชัย พยุงภร

ภูมิหลัง: เชื้อ WU polyomavirus (WUPyV) เป็นดีเอ็นเอไวรัสที่มีขนาดเล็กจัดอยู่ใน family Polyomaviridae ซึ่งมีสารพันธุกรรมเป็นดีเอ็นเอสายคู่ ขนาดประมาณ 5 kb ถูกค*้*นพบครั้งแรกจากเด็กที่มีการติดเชื้อในระบบทางเดินหายใจ

วัสดุและวิธีการ: งานวิจัยนี้ศึกษาลักษณะทางพันธุกรรมของเชื้อ WU polyomavirus ในประเทศไทยปี พ.ศ. 2556 โดยตรวจสอบเชื้อ WU polyomavirus ด้วยวิธี semi-nested PCR และหาลำดับสารพันธุกรรมทั้งจีโนมจากนั้นทำการวิเคราะห์ multiple sequences alignment และ Phylogenetic tree

ผลการศึกษา: จากการศึกษาระบาดวิทยานั้นพบวามีการระบาดของ WU polyomavirus (WUPyV) คิดเป็น 0.16% (1/614) เท่านั้น จากการศึกษา Phylogenetic tree พบวา WUPyV (isolate CU_Chonburi 3) มีความสัมพันธ์ใกล้เคียงกับ WUPyV ที่มีรายงานก่อนหน้านี้ (ความเหมือน 99%) นอกจากนี้สารพันธุกรรมทั้งจีโนมของ WUPyV (isolate CU_Chonburi 3) นั้นมีการเปลี่ยนของลำดับนิวคลีโอไทด์บริเวณ non-coding regions หลายตำแหน่งและมีการเปลี่ยนของกรดอะมิโนของโปรตีน VP1 (ตำแหน่ง S347T), VP2 (ตำแหน่ง L40V, G120R, Y121I, P123R, G127S, L137F, Q287R และ A327V), LTAg (ตำแหน่ง Q357P, V369E, E377K, D378V, A381T, R382E, R383G และ D389G) และ STAg (ตำแหน่ง R139S, K141E, R148K และ W153C)

สรุป: ข้อมูลที่ใคจากการศึกษานี้สามารถใชเป็นข้อมูลพื้นฐานทางค้านระบาควิทยาและการจำแนกสายพันธุ์ระคับโมเลกุลของเชื้อฮิวแมนโพลีโอมาไวรัส ซึ่งอาจมีประโยชน์ต[่]อไปในอนาคต