<table>
<thead>
<tr>
<th>Indicator</th>
<th>Red, amber or green status*</th>
<th>Confidence level</th>
<th>Assessment and rationale</th>
</tr>
</thead>
</table>
| Growth advantage                              | Red                        | High             | **Omicron is displaying a growth advantage over Delta**  
This assessment is based on analysis of UK data showing increased household transmission risk, increased secondary attack rates and increased growth rates compared to Delta.  
Omicron is likely to outcompete Delta in the UK and predominate.  
The observed growth advantage may be due to immune evasion or transmissibility. Although we now have high confidence in a component of immune evasion, the very high growth rate means that it is still plausible that an increase in transmissibility is contributing. |
| Transmissibility                              | Amber                      | Low              | **Omicron is at least as transmissible as Delta**  
Increased transmissibility compared to Delta is biologically plausible with the presence of furin cleavage site and nucleocapsid changes associated in vitro with advantages for replication, as well as extensive changes to the RBD. Structural modelling suggests that the mutations present may increase human ACE2 binding affinity to a much greater extent than that seen for any other variant. However, there is as yet no clear demonstration of transmissibility as distinct from other contributors to growth advantage. |
| Immune evasion (including natural and vaccine derived immunity) | Red                        | High             | **Omicron displays a reduction in immune protection against infection (NO data regarding severe disease)**  
This assessment is now based on neutralisation data from multiple laboratories and preliminary assessment of real world vaccine effectiveness in the UK. There are insufficient data to make any assessment of protection against severe disease. |
| Infection severity                            |                            |                  | **Insufficient data**  
There are insufficient data to assess severity, which is expected in the early period of emergence of a new variant.                                                                                                               |

* Refer to scale and confidence grading slide.