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2 **Absence of SARS-CoV-2 neutralizing activity in pre-pandemic sera from**
3 **individuals with recent seasonal coronavirus infection**
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34 **Abstract**

35 Cross-reactive immune responses elicited by seasonal coronaviruses might impact SARS-CoV-2
36 susceptibility and disease outcomes. We measured neutralizing activity against SARS-CoV-2 in
37 pre-pandemic sera from patients with prior PCR-confirmed seasonal coronavirus infection.
38 While neutralizing activity against seasonal coronaviruses was detected in nearly all sera, cross-
39 reactive neutralizing activity against SARS-CoV-2 was undetectable.

40

41

42 **Introduction**

43 Since the initial description in December 2019 of a novel human coronavirus SARS-CoV-2,
44 there has been a global effort to identify underlying the underlying causes for the great range of
45 disease severity observed, from mild or even asymptomatic infection to severe respiratory
46 distress and death. One hypothesis is that cross reactive immune responses, elicited by prior
47 infection with seasonal coronaviruses impacts the course of SARS-CoV-2 infection, perhaps
48 providing a degree of protection against severe COVID-19 disease.

49
50 The endemic seasonal human coronaviruses (HCoVs)—HCoV-HKU1, HCoV-OC43, HCoV-
51 NL63, and HCoV-229E—cause, mild or subclinical respiratory infections, with severe disease
52 being exceptionally rare [1]. Although there is low overall sequence homology between the
53 SARS-CoV-2 Spike (S) protein and those of the endemic HCoVs, overlapping T-cell epitopes
54 have been reported, particularly in the S2 subunit [2,3]. It is possible that neutralizing antibodies
55 induced by seasonal HCoV infection could cross-react with similar epitopes in SARS-CoV-2 S.
56 Such antibodies could potentially afford some level of protection against and perhaps contribute
57 to the wide range of outcomes of SARS-CoV-2 infection. To investigate this possibility, we
58 analyzed sera that had been collected prior to the COVID-19 pandemic from patients with a
59 recent PCR-confirmed diagnosis of HCoV-OC43, HCoV-NL63, or HCoV-229E infection. Such
60 samples should contain neutralizing antibodies against the respective seasonal HCoV, without
61 the possibility of prior SARS-CoV-2 infection, allowing us to specifically test whether
62 antibodies elicited by seasonal HCoV infection can neutralize SARS-CoV-2. Our results indicate
63 a lack of SARS-CoV-2 cross-neutralization activity between the seasonal HCoVs and SARS-
64 CoV-2.

65

66 **Methods**

67 *Identification of Patient Samples:* The thirty-seven prepandemic serum samples selected for
68 inclusion in this study were all collected as part of routine clinical care prior to 2020 from
69 patients in Edinburgh, Scotland, effectively excluding the possibility of prior SARS-CoV-2
70 infection. All samples were from symptomatic inpatients with PCR-confirmed diagnosis of
71 HCoV-OC43, HCoV-NL63, or HCoV-229E infection, 11-291 days prior to collection of the
72 serum sample. Ten positive control COVID-19 serum samples were collected in April-May 2020
73 from patients with mildly symptomatic, PCR-diagnosed SARS-CoV-2 infection, 24-61 days
74 prior to serum collection. All samples were anonymized and ethical approval to utilize these
75 patient samples was obtained through the NHS Lothian BioResource and the Rockefeller
76 University IRB

77

78 *Viruses:* The seasonal coronaviruses HCoV-OC43 (ATCC VR-759) and HCoV-229E (ATCC
79 VR-740) were obtained from Zeptomatrix, and HCoV-NL63 (Amsterdam I) was obtained from
80 BEI resources. Viral stocks were generated by propagation on Huh7.5 cells. The replication-
81 competent chimeric recombinant vesicular stomatitis virus encoding SARS-CoV-2 Spike and
82 GFP (rVSV/SARS-2/GFP_{2E1}) has been described previously and was propagated on
83 293T/ACE2cl.22 cells [4].

84

85 *Neutralization assays:* Sera were initially diluted 1:12.5, and then serially diluted 5-fold over 7
86 dilutions in 96 well plates. Thereafter, approximately 4×10^3 infectious units of either
87 rVSV/SARS-2/GFP, HCoV-OC43, HCoV-NL63, or HCoV-229E were mixed with the serum

88 dilutions and incubated at 37°C for 1 hour. Virus serum mixtures were subsequently transferred
89 to 96-well plates containing 1×10^4 293T/ACE2cl.22 (for rVSV/SARS-2/GFP and HCoV-OC43)
90 or HT1080/ACE2cl.14 (for HCoV-NL63 and HCoV-229E) target cells/well. Infection was
91 allowed to proceed for 16 hours (rVSV/SARS-2) or 24 hours (HCoV-OC43, HCoV-NL63,
92 HCoV-229E). The numbers of rVSV/SARS-2/GFP was assessed by flow cytometric detection of
93 GFP expression as described previously [4]. For HCoV-OC43, HCoV-NL63, and HCoV-229E,
94 cells were trypsinized and immunostained to detect nucleoprotein antigen expression in infected
95 cells. For HCoV-OC43, Sigma MAB9013 was used, for HCoV-NL63, Eurofins
96 M.30.HCoV.B2D4 was used, for HCoV-229E: Eurofins M.30.HCoV.B1E7 was used. A secondary
97 antibody conjugate Alexa Fluor® 488 Goat anti-Mouse IgG (H+L) (Thermo) was then used to
98 and infected cells enumerated by flow cytometry.

99
100 *Data analysis:* All flow cytometry data was analyzed using FlowJo software version 10.6.1. All
101 graphs and corresponding NT₅₀ values were generated using GraphPad Prism version 8.

102

103 **Results**

104 To assess whether prior infection by seasonal coronaviruses could elicit antibodies with
105 neutralization activity against SARS-CoV-2, we identified 37 serum samples collected prior to
106 the COVID19 pandemic from patients who were diagnosed using PCR with a seasonal
107 coronavirus 11-291 days (median 80 = days) prior to serum sample collection. Of these 20 were
108 diagnosed with HCoV-OC43 infection, 10 were diagnosed with HCoV-NL63 infection and 7
109 were diagnosed with HCoV-229E infection. We also developed flow cytometry-based
110 coronavirus neutralization assays based on the detection of nucleocapsid expression in HCoV-

111 OC43, HCoV-NL63, or HCoV-229E infected cells. Using these neutralization assays, we
112 confirmed that neutralizing antibodies targeting the seasonal coronaviruses were present in the
113 pre-pandemic samples. Indeed, all sera from individuals diagnosed with recent infection by a
114 seasonal coronavirus neutralized that same virus. Nevertheless, the neutralization titers varied
115 between viruses. For example, while samples collected from HCoV-OC43 infected individuals
116 typically exhibited potent neutralization of HCoV-OC43, sera collected from HCoV-229E
117 infected individuals had comparatively weak neutralization activity against HCoV-229E. Most
118 sera exhibited neutralizing activity against multiple seasonal coronaviruses. Indeed, some
119 samples collected from individuals with recent HCoV-229E infection neutralized HCoV-OC43 with
120 higher titers than HCoV-229E. Collectively, 73% of samples had an $NT_{50} > 500$ for HCoV-
121 OC43 and while 57% of samples $NT_{50} > 500$ for HCoV-229E, regardless of the virus detected at
122 the time of sample collection. Neutralizing activity against HCoV-NL63 was typically of lower
123 titer. Nevertheless all but one serum sample from individuals with recently diagnosed HCoV-
124 NL63 infection had neutralizing activity against HCoV-NL63 with NT_{50} values of $>1:50$.
125 Overall, this collection of serum samples had extensive neutralizing activity against several
126 seasonal coronaviruses including, particularly, the betacoronavirus HCoV-OC43, that is the most
127 closely related to SARS-CoV-2 of the viruses tested. Indeed, some of the sera had potent
128 neutralizing activity against HCoV-OC43 with NT_{50} values in excess of 10,000.

129

130 In contrast, none of the very same 37 serum samples tested had any detectable neutralization
131 activity against rVSV/SARS-CoV-2/GFP. Importantly, rVSV/SARS-CoV-2/GFP is at least as,
132 or more, sensitive to neutralization by COVID-19 plasma analysis as SARS-CoV-2 [4]. Indeed,
133 sera collected from ten individuals with recently diagnosed SARS-CoV-2 infection could

134 neutralize rVSV/SARS-CoV-2/GFP with NT₅₀ values ranging from 96 to 5400. Overall these
135 data strongly suggest that only pandemic sera, and not pre-pandemic sera have neutralizing
136 activity against SARS-CoV-2, and further suggest that pre-existing serological immunity to
137 seasonal coronaviruses is not a major driver of the diverse outcome of SARS-CoV-2 infection.

138

139 **Discussion**

140 These data demonstrate that neutralization activity against seasonal coronaviruses is nearly
141 ubiquitous in sera collected from individuals with PCR-confirmed pre-pandemic seasonal
142 coronavirus infection. Indeed, most sera had neutralizing activity against multiple seasonal
143 coronaviruses and some sera had greater neutralization potency against different coronaviruses
144 than the one detected at the time of sample collection. This may be due to inherent differences in
145 neutralization sensitivity among the seasonal coronaviruses, and is most likely the result of prior,
146 undocumented infection with different seasonal coronaviruses. That we observed more potent
147 antibody responses to HCoV-OC43 and regardless of PCR result may suggest recent infection
148 with this virus is more common, which is in line with previous observations suggesting that
149 reinfection with HCoV-OC43 and HCoV-229E occurs at a greater frequency than HCoV-
150 NL63[5–8] and that infection with HCoV-OC43 is common this geographic locale.

151 While we cannot exclude the possibility that that seasonal coronavirus elicit cross-neutralizing
152 antibodies, the divergence between seasonal coronaviruses S proteins would suggest limited
153 cross reactivity (HCoV-OC43 S shares 22.6 and 24.5% identical amino acids with and HCoV-
154 229E and HCoV-NL63 S respectively, while HCoV-NL63 and HCoV-229E S share 55%
155 identical amino acids) Accordingly, none of the samples tested had any neutralization activity
156 against SARS-CoV-2 whose spike protein shares 24%-29% amino acid identity with the seasonal

157 coronaviruses. In agreement with the notion that there is little cross reactivity between seasonal
158 HCoV neutralizing antibodies and SARS-CoV-2, many of the monoclonal antibodies cloned
159 from SARS-CoV-2 infected individuals contain very low levels of somatic hypermutation [9],
160 suggesting that they arise from *de novo* rather than recall B-cell responses. However, instances of
161 cross-reactive antibodies with high levels of somatic hypermutation have been reported,
162 indicating that in some cases memory B cells evoked by prior seasonal HCoV infection may be
163 recalled during infection with a SARS-like coronavirus [10].

164 While other groups have reported the existence of SARS-CoV-2 cross-reactive neutralizing
165 antibodies in sera from individuals that were not infected SARS-CoV-2, the neutralization
166 activity observed appears low [11,12]. Unlike other reports the pre-pandemic sera used in our
167 study that have undetectable neutralization activity against SARS-CoV-2 can neutralize seasonal
168 HCoVs, in some cases quite potently. While it is possible that there are rare instances of
169 individuals possessing antibodies from prior seasonal HCoV infection may be able to also target
170 SARS-CoV-2 S, our data argues against a broad role for pre-existing protective humoral
171 immunity against SARS-CoV-2.

172

173 **Author Contributions**

174 HW, SJ, YW, TH, and PDB conceived and designed the study. DP performed the neutralization
175 assays. DP, TH, and PDB wrote the manuscript with input from all authors.

176

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184

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213 CoV-2 in humans. *BioRxiv* **2020**;

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215

216 **Figure legend**

217 **Figure 1 Coronavirus neutralizing activity in sera from individuals with recent coronavirus**
218 **infection**

219 **(A)** Infection by HCoV-OC43 (blue), HCoV-NL63 (purple) and HCoV-229E (green) in the
220 presence of the indicated dilutions of pre-COVID-19-pandemic sera, from individuals recently
221 diagnosed by PCR with HCoV-OC43, HCoV-NL63, or HCoV-229E infection, as indicated.
222 Infected cells were enumerated by flow cytometry and the number of infected cells is plotted a
223 percentage of the number of infected cells (~30%) obtained in the absence of serum.

224
225 **(B)** Infection by rVSV/SARS-CoV-2 in the presence of the indicated dilutions of pre-COVID-
226 19-pandemic sera from individuals recently diagnosed by PCR with HCoV-OC43, HCoV-NL63,
227 or HCoV-229E infection (left panel), or COVID-19 convalescent sera (right panel). Infected
228 cells were enumerated by flow cytometry and the number of infected cells is plotted a percentage
229 of the number of infected cells (~30%) obtained in the absence of serum.

