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Case Study

Vaccine Free, Natural Broad 'Immune Booster' Effect Following 24 Months of Severe COVID-19 Infection could be Correlated to Massive Cytokine Storm and High C-Reactive Protein Level

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Abstract

As of Nov. 12, 2022, 6.61 million people or 0.084% of the world's population have died from COVID that originated from China and then mutated into multiple variants and subvariants. The total number of documented cases around the world has been 635 million; almost 8% of the world's population was confirmed positive cases for COVID with a mortality rate of almost 1%. Those, who were confirmed positive and survived, had a range of symptoms ranging from mild to severe. Those with underlying conditions like diabetes, hypertension and genetic or acquired immunodeficiencies had more severe symptoms and some required hospitalization and even care in an ICU. We are reporting a stringently recorded such severe case confirmed positive for COVID on Nov. 12, 2020 and optimally treated to clear COVID when tested on Dec. 12, 2020 and then was in rehab to receive care from speech therapist, occupational therapist and a physical therapist followed by a team of specialists to monitor any long COVID. The case has had no reinfection, never subsequently tested positive and never received any vaccine against COVID. The antibody level was monitored subsequently for 22 months and astonishingly the antibody levels against spike protein of COVID have been higher than the previous measurements. We conclude that there is phenomenal long lasting natural "booster effect" being reported for the first time, following any viral infection.

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Clinical Case Study

Pulmonologists in Louisville, KY, Infectious Diseases experts from UMass Medical School and Chief Immunologist from the Lab Corp have examined the lab results of antibody levels generated by Lab Corp of a subject over 22 months, who had very severe coronavirus disease (COVID-19) in Nov. 2020 requiring ICU hospitalization and rehabilitation and cleared the virus in December 2020. The subject, post-recovery, tested positive for antibodies to the spike protein and nucleocapsid protein of COVID-19 as was expected. However, after monitoring of the antibody levels for 22 months, it was astonishing to observe that the natural antibodies keep significantly increasing each time [1,2] plus table 1 and summary in figure 1, as would be expected in a vaccinated person who received several boosters.

Ordered Items: SARS-CoV-2 Semi-Quant Total Ab

Date Collected: 09/09/2022 Date Received: 09/13/2022 Date Reported: 09/13/2022 Fasting: Not Given

General Comments & Additional Information

A courtesy copy of this report has been sent to

SARS-CoV-2 Semi-Quant Total Ab

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
SARS-CoV-2 Semi-Quant Total Ab	See Dilution	See Dilution* 03/31/2022	U/mL	Negative<0.8
SARS-CoV-2 Spike Ab Dilution	2472	2141 03/31/2022	U/mL	Negative<0.8
SARS-CoV-2 Spike Ab Interp	Positive	Positive 03/31/2022		

Antibodies against the SARS-CoV-2 spike protein receptor binding domain (RBD) were detected. It is yet undetermined what level of antibody to SARS-CoV-2 spike protein correlates to immunity against developing symptomatic SARS-CoV-2 disease. Studies are underway to measure the quantitative levels of specific SARS-CoV-2 antibodies following vaccination. Such studies will provide valuable insights into the correlation between protection from vaccination and antibody levels.
Roche Elecsys Anti-SARS-CoV-2 S

* Previous Reference Interval: (SARS-CoV-2 Semi-Quant Total Ab: Negative<0.8)

Disclaimer
The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Comments
A: This test has not been FDA cleared or approved. This test has been authorized by FDA under an Emergency Use Authorization (EUA). This test is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Act, 21 U.S.C. 360bbb-3(b)(1), unless the authorization is terminated or revoked sooner. This test has been authorized only for detecting the presence of antibodies against SARS-CoV-2, not for any other viruses or pathogens.

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Table 1: Lab Report.

The best explanation that experts could come up with is that the subject may have been exposed several times during the period after testing negative for COVID-19 by RT-PCR. The subject was never vaccinated or boosted and that is what makes it baffling to interpret. Normally antibody levels decrease with time and NOT increase. The testing was carried out independently by the LabCorp and due to the suspicion that the numbers don't make sense, at least one data point

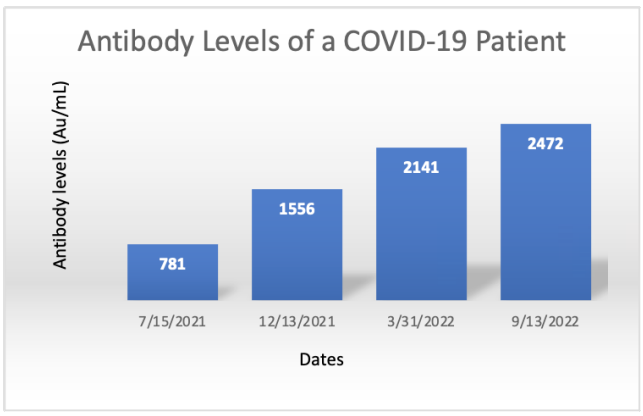

Figure 1: The antibody levels of a severely ill in ICU, hospitalized and rehabilitated COVID-19 patient.

was repeated, and the result confirmed. The subject has tested negative by RT-PCR for the COVID-19 RNA since Dec. 2020. The subject never had fever since clearing the COVID-19 infection and made an informed decision to not get the vaccine but continue to monitor antibody levels against COVID-19 as an indication of possible protection against emerging COVID-19 variants and sub variants [1,2]. The subject, a career virologist trained at the NIAID, NIH Bethesda, MD, USA, did have a massive cytokine storm, just after 10 days of testing positive for COVID, as a test result of IL-6, was observed on November 22, 2020, to be 876-fold, compared to the normal levels. In addition, the level of C-Reactive Protein (CRP), an indication of inflammation was 20-fold higher than the normal levels on Nov. 24, 2020. The authors think that there is an in built long-term natural "immune booster effect" from the initial immunological memory and it is time to enlist the expertise from around the world to come up with an explanation and possibly a way to examine possible booster effects triggered by severe COVID-19 that may be causing this never before reported phenomenon even from the very large studies from clinical scientists reported in NEJM and other medical journals [3-5]. Natural enveloped virus neutralizing compounds (EVNCs) could in the future provide additional protection to those recovering from severe viral infection [6,7].

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