

Supplementary Materials For

Laderoute MP. Trained immunity of M1-like foamy macrophages: A key role of human endogenous retrovirus K102 particles

Table S1.

These ONS data were used to support Table 1 and Figure 5. ONS Age-Standardized Monthly Mortality Rates Per 100,000 Person-Years for the Vaccinated (Vaxed) and Non-vaccinated (Unvaxed) January 1, 2021 to May 31, 2023. Note for the vaxed the totals reported by the ONS were corrected based on the addition of the individual monthly mortality rate subcategories of doses as explained elsewhere. ^[98] CC-by 4.0.

ENGLAND ONS Data		Monthly Mortality Rates per 100,000 person-years							
		UNVAXED				VAXED			
		non C19	C19	Non-C19/C19 ratio		non C19	C19	Non-C19/C19 ratio	
2021	Jan	1320	1187	1.11		1958	1526	1.28	
	Feb	3087	2174	1.42		2689	457	5.89	
	Mar	2716	592	4.59		3909	284	13.77	
	Apr	2153	146	14.77		4855	184	26.39	
	May	1673	46	36.77		8426	85	99.72	
	Jun	1534	56	27.59		9916	88	113.07	
	Jul	1392	218	6.38		9960	225	44.29	
	Aug	1307	404	3.23		9266	403	23.00	
	Sep	1297	368	3.53		7884	520	15.16	
	Oct	1302	322	4.04		11845	569	20.83	
	Nov	1287	421	3.05		14155	721	19.63	
	Dec	1358	521	2.61		15501	1121.9	13.82	
av 2021		1702	538	3.16		8364	515	16.23	

2022	Jan	1227	585	2.10		16417	2311	7.10
	Feb	1126	259	4.35		11346	1128	10.05
	Mar	1048	184	5.71		9445	764	12.37
	Apr	1000	205	4.89		11622	801	14.51
	May	795	78	10.24		7914	262	30.23
	Jun	1063	63	16.87		12789	294	43.50
	Jul	1175	168	6.99		12660	787	16.09
	Aug	1050	97	10.82		9598	276	34.78
	Sep	1033	46	22.46		9227	237	38.93
	Oct	1097	124	8.85		9783	515	19.00
	Nov	1129	65	17.37		9576	323	29.65
	Dec	1538	114	13.49		12489	388	32.19
Av 2022		1107	166	6.69		11072	674	16.43

2023	Jan	1315	122	10.79		10216	388	26.32
	Feb	1177	83	14.20		7601	267	28.50
	Mar	1073	96	11.15		5659	329	17.21
	Apr	1024	83	12.36		5264	223	23.66
	May	902	46	19.56		4696	82	57.20
Av 2023		1098	86	12.77		6687	258	25.96

ONS England Datasets Released 25 August 2023 and 6 July 2022.
<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/deathsbyvaccinationstatusengland>
 NB: Data used for **Figure 5** and **Table 1**.

Table S2. VAERS Mortality DATA used for plotting Figure 6. [99] (From <https://wonder.cdc.gov/vaers.html>) CC-by 4.0.

Monovalent mRNA				Reported Deaths to VAERS				Monovalent mRNA				Reported Deaths to VAERS					
2025 10 16				CDC VAERS				2025 10 16				CDC VAERS					
				Data to 2025 08 30								Data to 2025 08 30					
				Moderna								Pfizer-BioNTech					
Year	Month	Total	unknown onset	known onset	A: 60-120	B: 120 +	A + B	% 60+ (A + B)/D x 100	Year	Month	Total	unknown onset	known onset	A: 60-120	B: 120 +	A + B	% 60+ (A + B)/D x 100
2020	December	16	2	14	0	0	0	0	2020	December	91	17	74	0	0	0	0
2021	Jan	426	17	409	1	3	4	0.98%	2021	Jan	1314	128	1186	0	1	1	0.08%
	Feb	743	22	721	0	2	2	0.28%		Feb	1378	100	1278	2	2	4	0.31%
	Mar	937	31	906	12	2	14	1.55%		Mar	1426	117	1309	25	4	29	2.22%
	April	844	35	809	73	0	73	9.02%		April	1644	134	1510	111	11	122	8.08%
	May	619	28	591	115	8	123	20.81%		May	1476	112	1364	207	37	244	17.89%
	June	353	18	335	87	28	115	34.33%		June	1267	91	1176	89	55	144	12.24%
	July	375	14	361	50	82	132	36.57%		July	1087	100	987	95	159	254	25.73%
	Aug	603	29	574	71	311	382	66.55%		Aug	1234	100	1134	129	536	665	58.64%
	Sept	716	27	689	43	460	503	73.00%		Sept	1189	83	1106	72	644	716	64.74%
	Oct	547	24	523	31	354	385	73.61%		Oct	1051	85	966	47	427	474	49.07%
	Nov	539	21	518	13	290	303	58.49%		Nov	915	67	848	42	293	335	39.50%
	Dec	619	28	591	25	262	287	48.56%		Dec	984	90	894	65	303	368	41.16%
2021	Totals	7321	294	7027	521	1802	2323	33.06%	2021	Totals	14965	1207	13758	884	2472	3356	24.39%
2022	Jan	795	36	759	59	466	525	69.17%	2022	Jan	1127	57	1070	155	540	695	64.95%
	Feb	582	18	564	90	331	421	74.65%		Feb	820	37	783	101	409	510	65.13%
	Mar	281	10	271	57	137	194	71.59%		Mar	410	27	383	29	214	243	63.45%
	April	164	11	153	18	83	101	66.01%		April	234	31	203	30	58	88	43.35%
	May	146	7	139	8	73	81	58.27%		May	198	16	182	12	81	93	51.10%
	June	173	9	164	9	106	115	70.12%		June	211	19	192	13	92	105	54.69%
	July	190	11	179	15	126	141	78.77%		July	229	15	214	22	115	137	64.02%
	Aug	219	7	212	16	167	183	86.32%		Aug	258	13	245	21	175	196	80.00%
	Sept	167	5	162	3	129	132	81.48%		Sept	207	18	189	12	129	141	74.60%
	Oct	134	2	132	6	111	117	88.64%		Oct	217	22	195	3	112	115	58.97%
	Nov	115	1	114	6	98	104	91.23%		Nov	194	18	176	5	87	92	52.27%
	Dec	92	4	88	6	68	74	84.09%		Dec	196	15	181	6	90	96	53.04%
2022	Totals	3058	121	2937	293	1895	2188	74.50%	2022	Totals	4301	288	4013	409	2102	2511	62.57%

Table S3. VAERS Mortality Data by COVID-19 (Bioweaponized SARS-CoV-2) and Non-COVID-19 Deaths (associated with Shedding) for interpretation of Figure 6 According to Months Viewed.

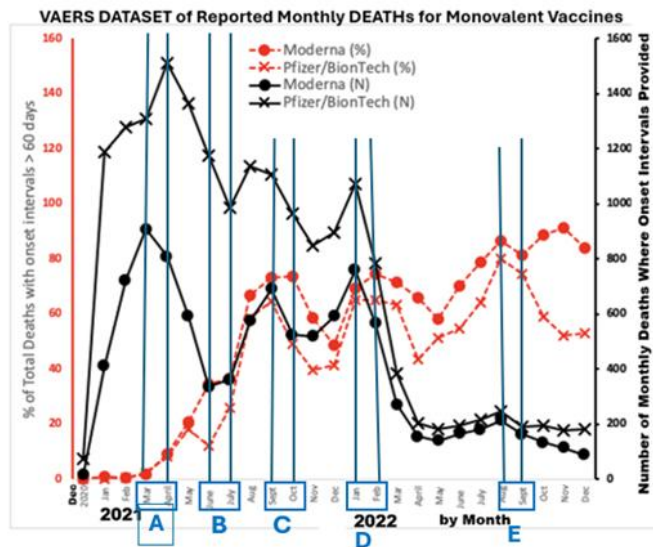
Image for Supplemental Table 3 to Support Interpretation of Figure 6 (VAERS data).

For Raw data pulled on January 20, 2026 from the National Vaccine Information Center portal (data cutoff on June 2, 2026) to support interpretation of Figure 6, please see:

<https://hervk102.substack.com/p/nvic-raw-data-on-deaths-following>.

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These supplemental Tables were used to assist in the interpretation of Figure 6.



VAERS Reported Deaths for mRNA Vaccines Involving COVID-19 or SARS-CoV-2 Test Positive (2020 to 2025)												
Cutoff date Jan 2, 2026 NVIC portal ; mono and bivalent Vaccines												
Selected Months	Particulars About the Period Studied	Total Deaths	Portion of ALL Deaths (2020 to 2025) Reported During the Period	Pfizer-BioNTech Reported Total Deaths	Pfizer COVID-19 Deaths	Moderna Total Deaths	Moderna C19 deaths	% Total Deaths Involving C19 (I)	% of Total Deaths with Onset Intervals > 60 Days	% of Total Deaths with Onset Intervals 0-2 days J	% of Total Deaths with Onset Intervals 0-60 days K	NON-C19 Deaths i.e., ALL Shedding Deaths 100% - I
VAERS Section 2 Coding					10084268		10084268			Putative Vaccinator Shedding		
2020 to 2025	Average	28,728	100.00%	18819	4082	9909	2725	36.17%	34.51%	29.88%	65.49%	63.83%
Age of Deceased												
% of total 65+		77.75%		78.17%	84.00%	77.25%	84.86%					
<50		7.58%		7.92%	3.05%	7.16%	2.65%					
<18		0.56%		0.93%	0.43%	0.12%	0.00%					

VAERS Reported Deaths for mRNA Vaccines Involving COVID-19 or SARS-CoV-2 Test Positive (2020 to 2025)												
Cutoff date Jan 2, 2026 NVIC portal ; mono and bivalent Vaccines												
Selected Months	Particulars About the Period Studied	Total Deaths	Portion of ALL Deaths (2020 to 2025) Reported During the Period	Pfizer-BioNTech Reported Total Deaths	Pfizer COVID-19 Deaths	Moderna Total Deaths	Moderna C19 deaths	% Total Deaths Involving C19 (I)	% of Total Deaths with Onset Intervals > 60 Days	% of Total Deaths with Onset Intervals 0-2 days J	% of Total Deaths with Onset Intervals 0-60 days K	NON-C19 Deaths i.e., ALL Shedding Deaths 100% - I
VAERS Section 2 Coding					10084268		10084268			Putative Vaccinator Shedding		

B June/July 2021	Putative Shedding Peak	2,835	9.87%	2188	188	647	197	7.97%	23.09%	38.38%	76.91%	92.03%
Age of Deceased												
% of total 65+		75.13%		78.36%	84.87%	68.20%	82.14%					
<50		9.77%		7.90%	3.36%	13.77%	1.79%					
<18		0.55%		0.81%	0.84%	0.00%	0.00%					

E Aug/Sept 2022	High Peak for Deaths with Onset Intervals >60 Days	685	2.38%	381	188	304	197	56.20%	73.25%	16.02%	26.75%	43.80%
Age of Deceased												
% of total 65+		78.31%		77.13%	80.66%	79.46%	84.18%					
<50		6.61% a		9.21%	4.96%	4.04%	1.02%					
<18		1.53% a		2.73%	1.65%	0.34%	0.00%					

RAW data available at <https://hervk102.substack.com/p/nvic-raw-data-on-deaths-following>

The VAERS reported total and COVID-19 associated deaths (% of total over 2020 to 2025) following spike mRNA vaccination are also provided to help interpret Figure 6.

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Table S4.

Supplemental Table 4.						
Myocarditis and/or Pericarditis CASES VAERS (via NVIC Portal)						
No restrictions on time period scanned.	Cutoff at January 2, 2026					
Parameter	Pfizer-BioNTech			Moderna		
	Total	Male %	Female %	Total	Male %	Female %
Cases	20,666	59%	41%	5,912	67%	33%
AGE Affected (years of age)	6+			6+		
Majority Age	18-29			18-49		
Majority Onset Interval	0 days			1 day		
Cases with Onset Interval of 0 to 2 days	7238			1721		
% Onset Period of 0-2 days	35%	58%	42%	29%	64%	36%
Onset Intervals >60 days	1156	56%	44%	450	59%	41%
% Onset Intervals >60 days	5.60%			7.61%		
Cases with concurrent COVID-19	17	65%	35%	13	62%	38%
% Concurrent COVID-19	0.01%			0.20%		
% without COVID-19	99.99%			99.80%		
DEATHS	380	66%	34%	116	66%	34%
% of CASES with Deaths	1.80%			1.96%		

Cases and Deaths following administration of COVID-19 monovalent and bivalent mRNA vaccines.

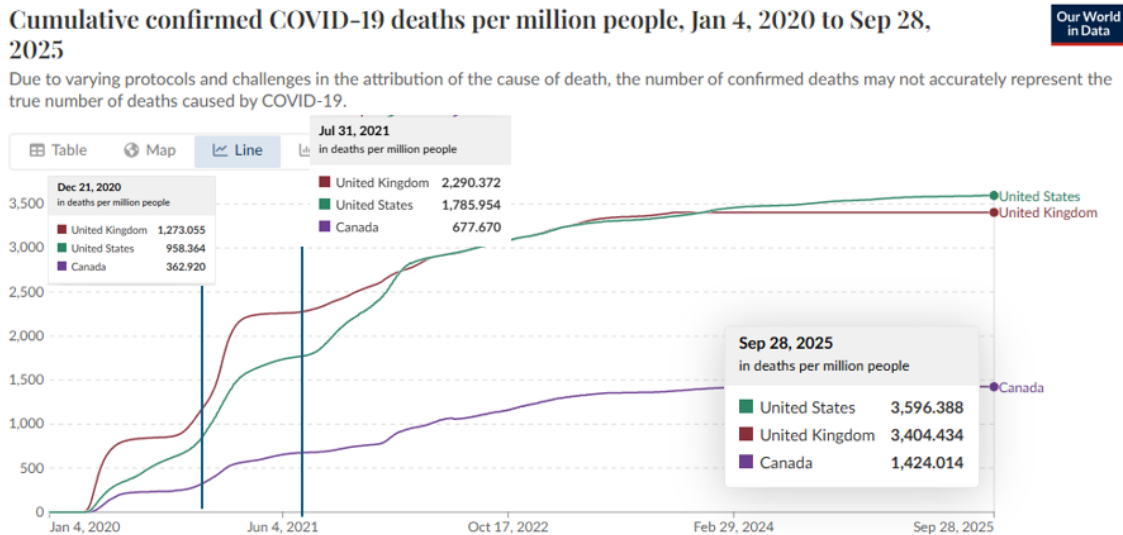
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Table S5. Summary of spike mRNA gene therapy product associated deaths reported to VAERS by year with proportions of deaths cited with COVID-19.

Supplemental Table 5. Summary of spike mRNA gene therapy product associated deaths reported to VAERS by year with proportions coded with COVID-19.*					
YEAR	Number of Deaths	% of Total Deaths (2020-2025)	Number of Deaths Citing COVID-19	COVID-19 Cases % of Total Deaths (2020-2025)	% of Total Yearly Deaths Citing COVID-19
2020	111	0.39%	5	0.02%	4.50%
2021	20313	70.70%	3684	12.82%	18.14%
2022	6222	21.66%	2802	9.75%	45.03%
2023	1443	5.02%	279	0.97%	19.33%
2024	418	1.46%	26	0.09%	6.22%
2025	221	0.77%	11	0.04%	4.98%
Total	28728	100.00%	6807	23.69%	N/A
* For monovalent and bivalent spike mRNA gene therapy products up to January 2, 2026. The National Vaccine Information Center portal to VAERS data was accessed at https://medalerts.org on January 19, 2026.					
N/A = not applicable.					

[illegible]

Figure S2. Evidence that postponing the second COVID-19 Vaccine dose in Canada by 4 months, flattened the overall COVID-19 death curve when compared with the USA (no delay) and the UK (initial 3 month delay).



Suppl. Figure 2. Canada Flattened the Curve by Postponing the Second Dose for 4 Months. [99]

Canada, on the advice of **Dr. Danuta Skowronski** at the British Columbia Centre for Disease Control wisely postponed the second dose of the spike mRNA gene therapy shots for up to 4 months (due to shortages of supply), which would have RETAINED innate immunity (1st dose), natural immunity, and HERD IMMUNITY for much longer potentially flattening the curve to control the pandemic. A main benefit would have been the establishment of trained immunity in third parties (not vaccinated and not exposed) by HERV-K102 protector particles allegedly shed from the URT for 3 to 4 months from those who received the first dose only. Data from Our World in Data CC by 4.0. Author retains the copyrights from the sworn testimony (reference [99]).