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with thanks to Dr. Steve Bellan and the Alachua County Control Flu Program.

Title: Simplification for generalization 1 – Intuitive aspects of dynamics and introduction to model worlds

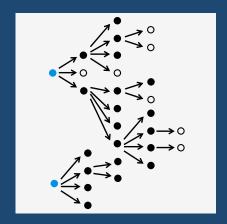
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Source URL: <a href="http://daidd2014.ici3d.org/Lectures/Pulliam\_S4G1.pdf">http://daidd2014.ici3d.org/Lectures/Pulliam\_S4G1.pdf</a>

For further information please contact Dr. Juliet Pulliam (pulliam@ufl.edu).

#### Simplification for Generalization 1:

intuitive aspects of dynamics and introduction to model worlds



Clinic on Dynamical Approaches to Infectious Disease Data December 15, 2014

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University of Florida

#### School-located Influenza Vaccination

#### **Alachua County Control Flu Program**

- Community-supported
- 2006/07; 2009-Present
- K-8th; Pre-K to 12th
- Live-attenuated vaccine at school
- Inactivated vaccine at provider
- 300 volunteers, 27 community partners
- Recognized by AMA/CDC & IOM



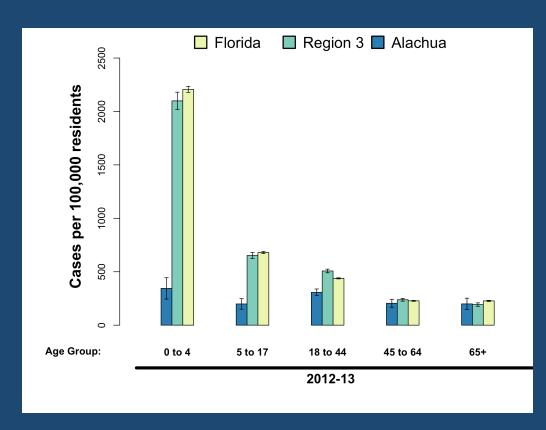


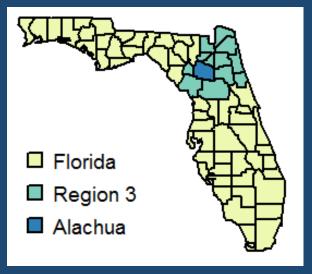
## Alachua County Control Flu Program Coverage

	8 States Averaged <sup>+</sup>	Alachua County						
	08/09	06/07	07/08	08/09	09/10	10/11	11/12	12/13
Preschool	~26%	-	-	-	12%	16%	16%	16%
Elementary	16%	>25%	-	-	67%	67%	63%	65%
Middle	13%	>24%	-	-	43%	41%	43%	49%
High	9%	-	-	-	6%	23%	24%	30%
School-Aged	-	>25%	-	-	42%	48%	47%	50% (13,579)

## Alachua County Control Flu Program

## Impact 2011-2012 season

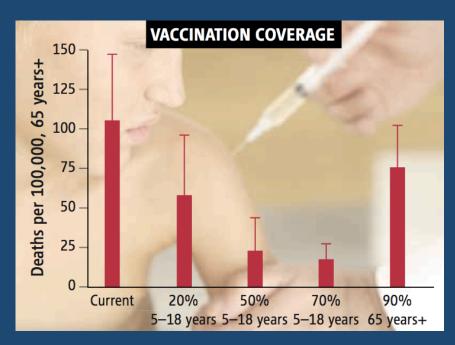




Tran et al. 2014

# Alachua County Control Flu Program Why did they think it would work?

## Alachua County Control Flu Program Why did they think it would work?



Halloran & Longini 2006 Science

Model-based prediction...

#### What are models?

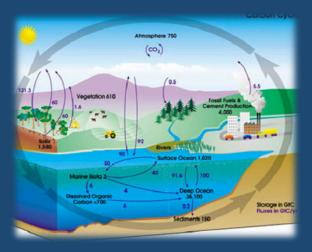
Physical







Conceptual



Mathematical

$$\frac{\partial a}{\partial a} \ln f_{a,\sigma^{2}}(\xi_{1}) = \frac{(\xi_{1} - a)}{\sigma^{2}} f_{a,\sigma^{2}}(\xi_{1}) = \frac{1}{\sqrt{2\pi\sigma^{2}}} \int_{\mathbb{R}^{n}} T(x) \cdot \frac{\partial}{\partial \theta} f(x,\theta) dx = M \left[ T(\xi) \cdot \frac{\partial}{\partial \theta} \ln L(\xi,\theta) \right] \int_{\mathbb{R}^{n}}^{\theta} \int_{\mathbb{R}^{n}} T(\xi) \cdot \frac{\partial}{\partial \theta} \ln L(\xi,\theta) dx$$

## What are dynamical models?

#### **Statistical Models**

- Account for bias and random error to find correlations that may imply causality.
- Often the first step to assessing relationships.
- Assume independence of individuals (at some scale).

#### **Dynamical Models**

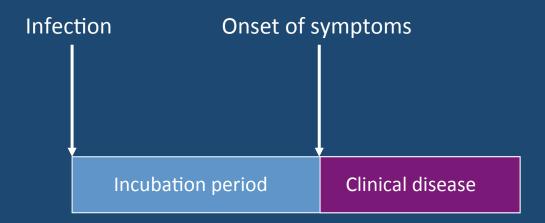
- Systems Approach:

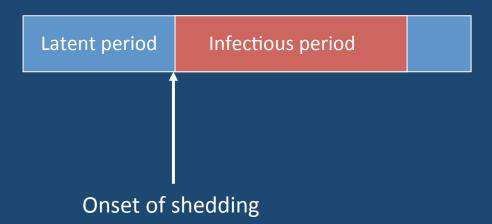
   Explicitly model multiple
   mechanisms to understand
   their interactions.
- Link observed relationships at different scales.
- Explicitly focus on dependence between individuals

## Dynamical models

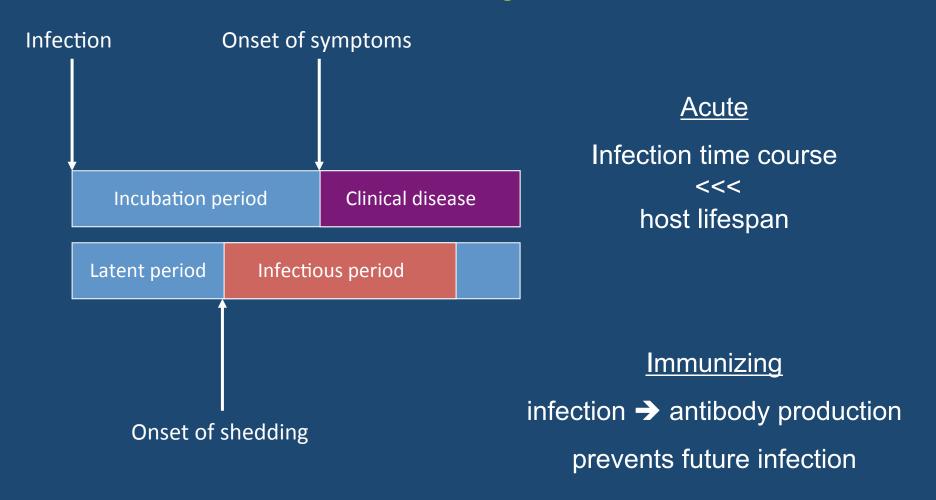
Explicitly account for the dependence between individual outcomes that is inherent in the transmission process for communicable diseases

Can be used to describe the evolution of a system through time – such as changes in disease incidence that result from the interaction between transmission and immunity





Acute, immunizing infections



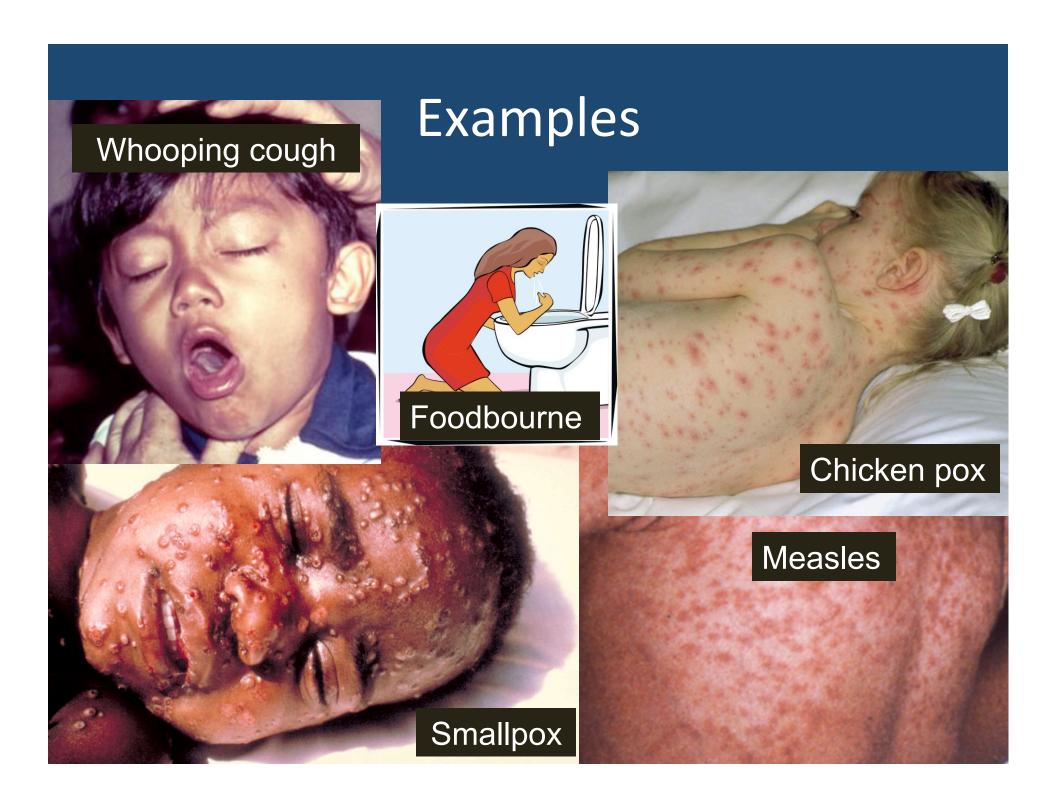
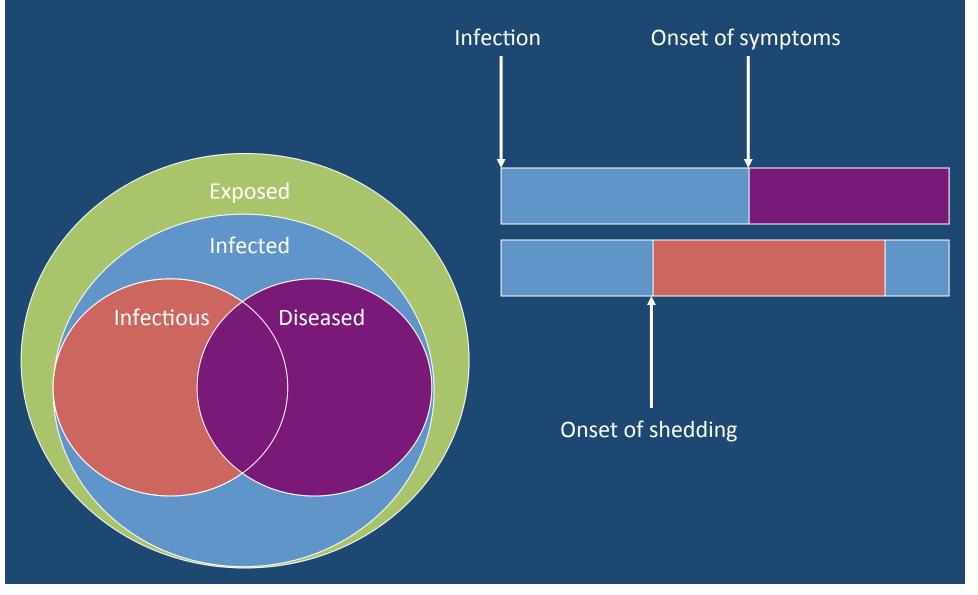


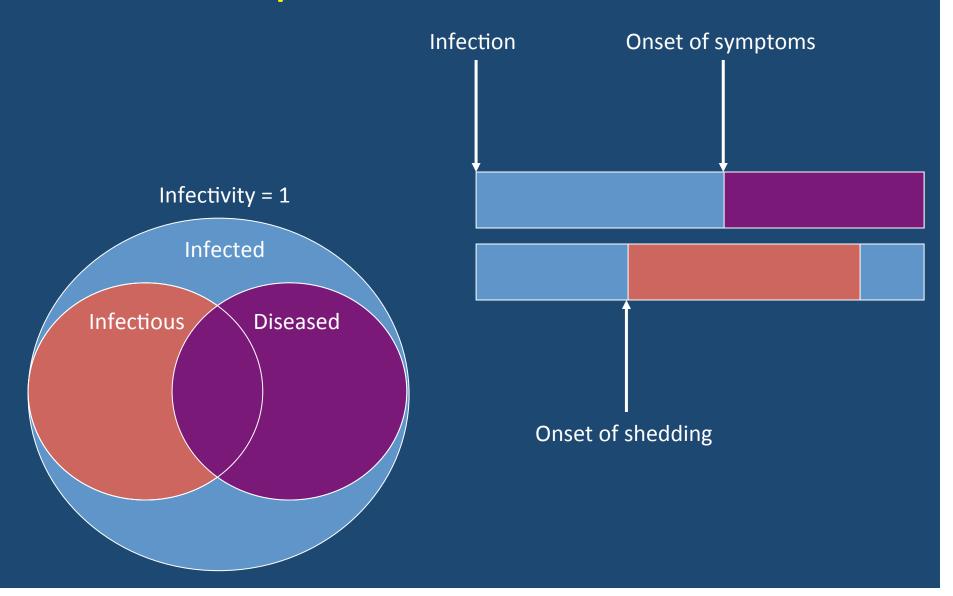
Table 3.1 Incubation, latent and infectious periods (in days) for a variety of viral and bacterial infections. Data from Fenner and White (1970), Christie (1974), and Benenson (1975)

Infectious disease	Incubation period	Latent period	Infectious period
Measles	8–13	6–9	6–7
Mumps	12-26	12-18	4–8
Whooping cough (pertussis)	6–10	21-23	7–10
Rubella	14-21	7–14	11-12
Diphtheria	2-5	14-21	2-5
Chicken pox	13-17	8-12	10-11
Hepatitis B	30-80	13-17	19-22
Poliomyelitis	odf 107-12 disease	out 1-3	14-20
Influenza	tere of 1–3 and odd	1-3	2-3
Smallpox	10-15	8-11	2-3
Scarlet fever	2–3	1-2	14–21

## Terminology

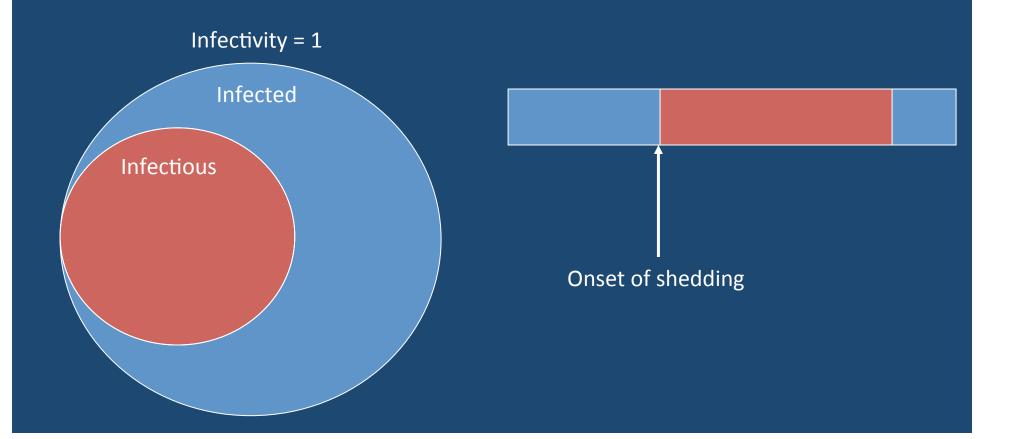


## A simple view of the world

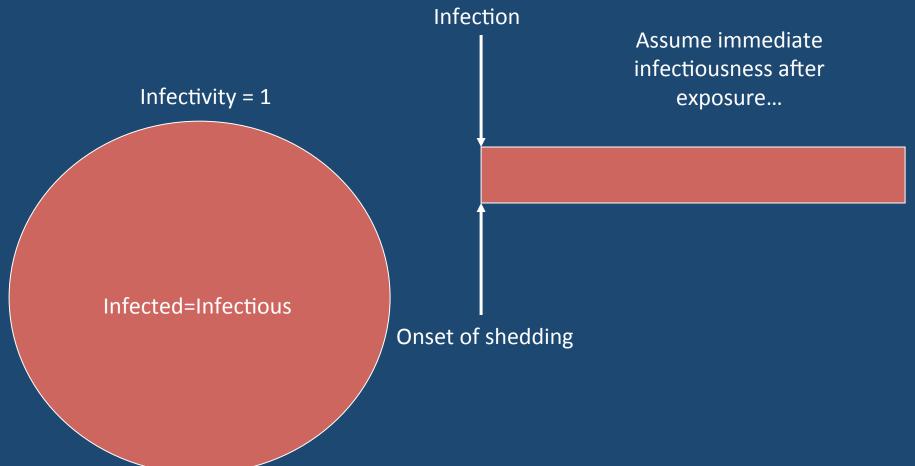


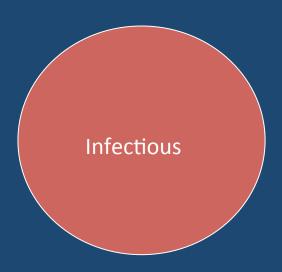
## A simpler view of the world

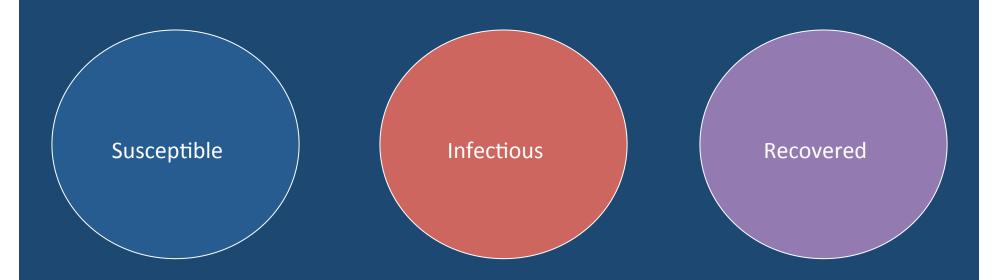
Don't worry about symptoms and disease!

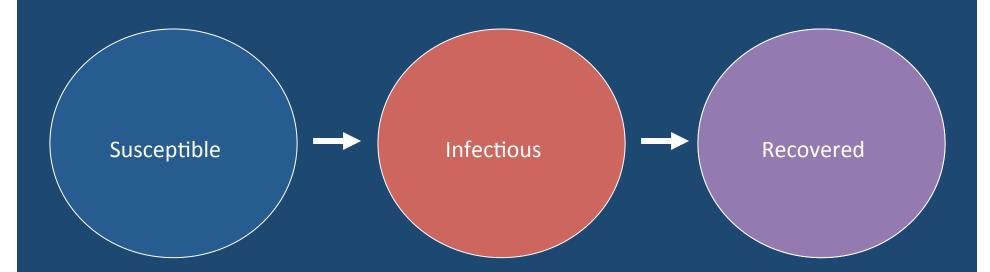


Don't worry about symptoms and disease!

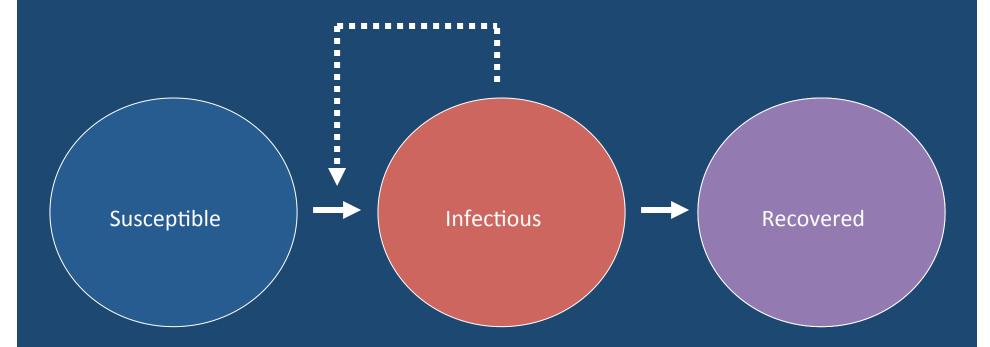






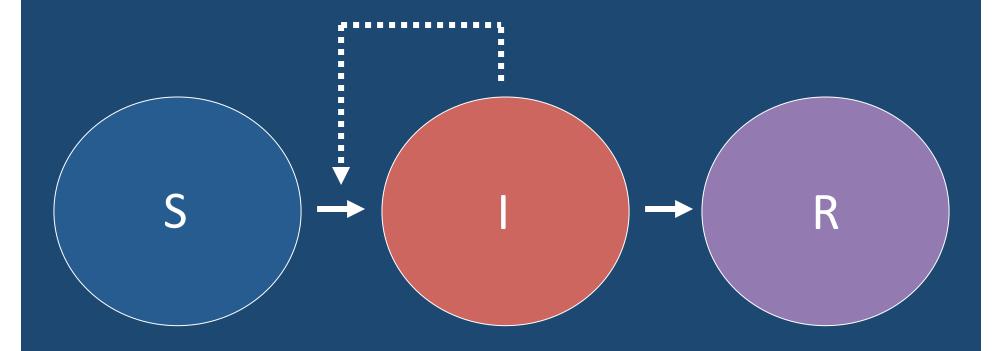


#### Health-related States

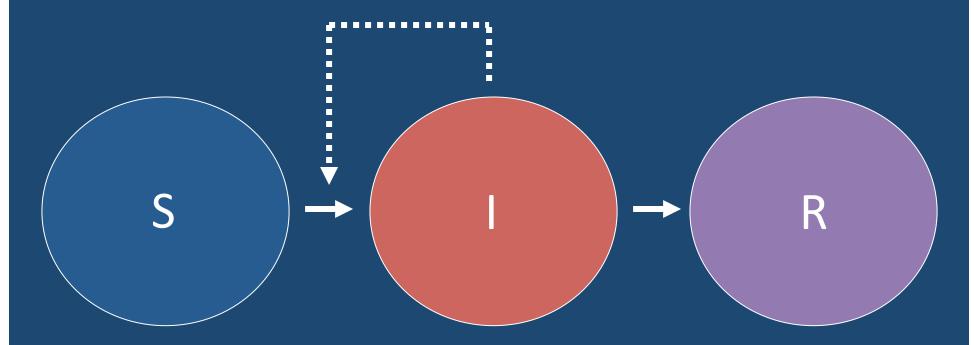


The rate at which susceptible individuals become infected depends on how many infectious people are in the population

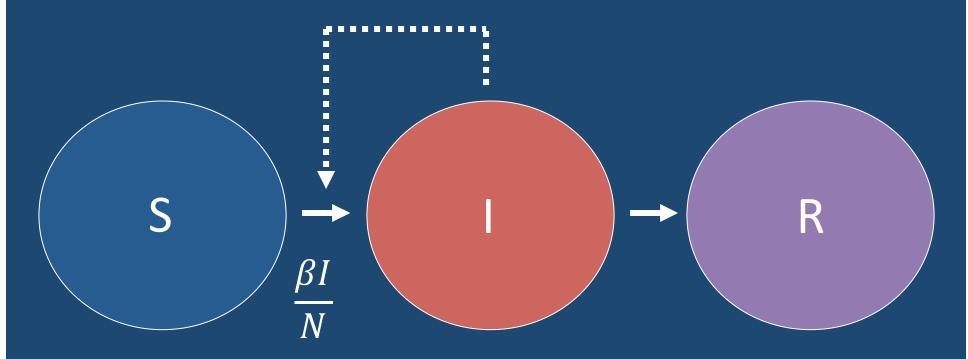
## State variables



#### State variables

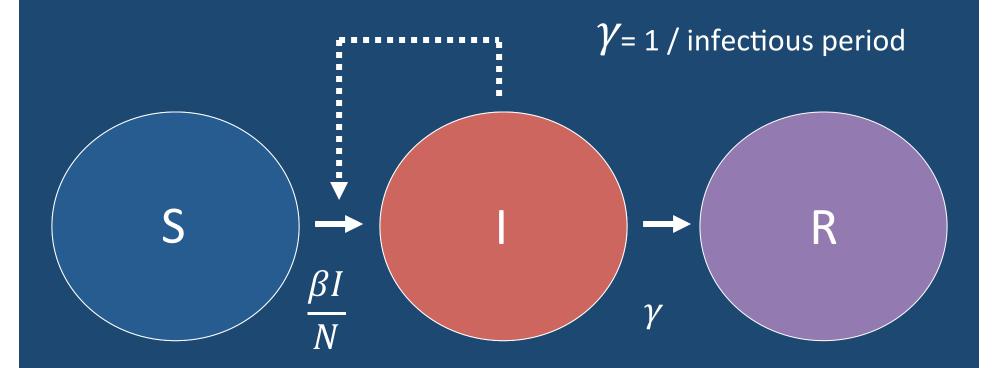


We can use equations to describe the rate at which individuals flow between states



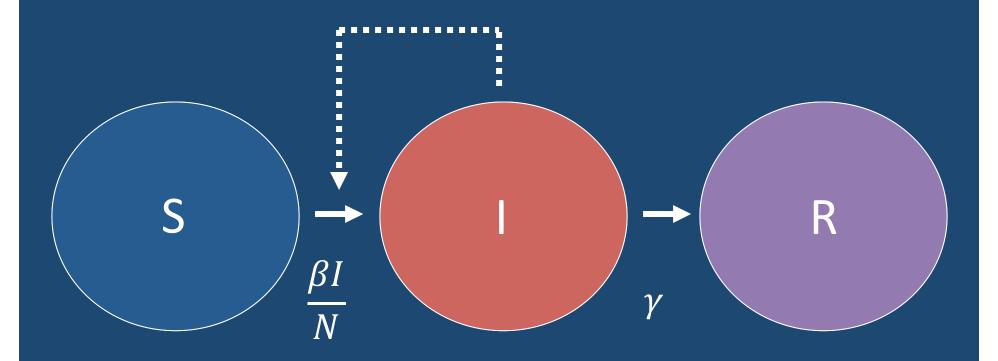
- R = transmission coefficient
  - = per capita contact rate \* infectivity
  - = per capita contact rate (infectivity = 1)

 $\frac{I}{N}$  proportion of contacts that are with an infectious individual



If infectious people recover at a rate of 0.5 / day,

the average time they spend infectious is 1 / 0.5 = 2 days

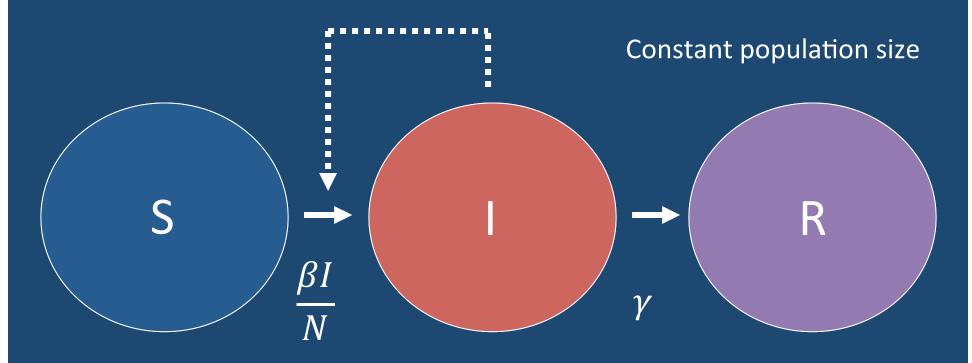


$$\frac{dS}{dt} = -\frac{\beta SI}{N}$$

$$\frac{dI}{dt} = \frac{\beta SI}{N} - \gamma I$$

$$\frac{dR}{dt} = \gamma I$$

$$N = S + I + R$$



$$\frac{dS}{dt} = -\frac{\beta SI}{N}$$

$$\frac{dI}{dt} = \frac{\beta SI}{N} - \gamma I$$

$$\frac{dR}{dt} = \gamma I$$

$$\frac{dS}{dt} = -\frac{\beta SI}{N}$$

$$\frac{dI}{dt} = \frac{\beta SI}{N} - \gamma I$$

$$\frac{dR}{dt} = \gamma I$$

N population size

 $\gamma$  recovery rate

 $oldsymbol{eta}$  transmission coefficient

$$\frac{dS}{dt} = -\frac{\beta SI}{N}$$

$$\frac{dI}{dt} = \frac{\beta SI}{N} - \gamma I$$

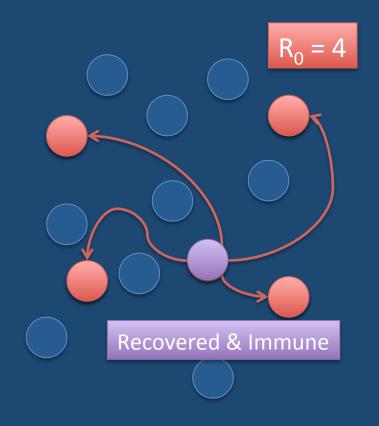
$$\frac{dR}{dt} = \gamma I$$

$$R_0 =$$

# infections produced by1 infectious individualin a fully susceptible population.

#### R<sub>0</sub>: The Basic Reproductive Number

Average # of secondary infections an infected host produces in a population with no pre-existing immunity



$$R_0 =$$

$$\frac{\beta SI}{N} \xrightarrow{N \text{ large}} \beta$$

Rate at which an infected individual produces new infections in a naïve population

X

Proportion of new infections that become infectious

X

Average duration of infectiousness

1

 $1/\gamma$ 

$$R_0 =$$

$$R_0 = \frac{\beta}{\gamma}$$

Rate at which an infected individual produces new infections in a naïve population

X

Proportion of new infections that become infectious

X

Average duration of infectiousness

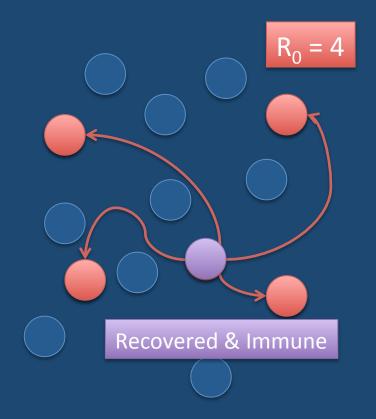
#### R<sub>0</sub>: The Basic Reproductive Number

 Average # of secondary infections an infected host produces in a susceptible population.

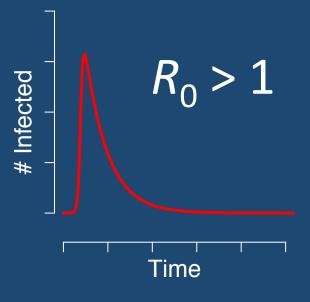
Threshold criteria:

If  $R_0 < 1$ , disease dies out

If  $R_0 > 1$ , disease persists



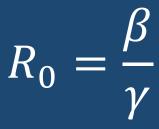
## SIR Model: $R_0$ as a Threshold



# Infected

$$R_0 \le 1$$

Time

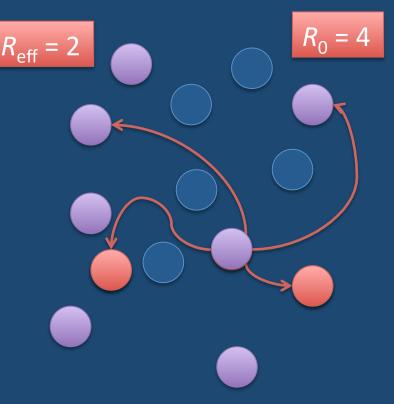


Disease Introduction:

Epidemic occurs if  $R_0 > 1$ .

# $R_{\text{eff}}$ : The Effective Reproductive Number

The average # of secondary infections that an infected host produces in a population



Example: 50% Recovered & Immune

# Reff: Effective Reproductive Number

 $\frac{\beta S}{N}$ 

Rate at which an infected individual produces new infections in a general population

Proportion of new infections that become infectious

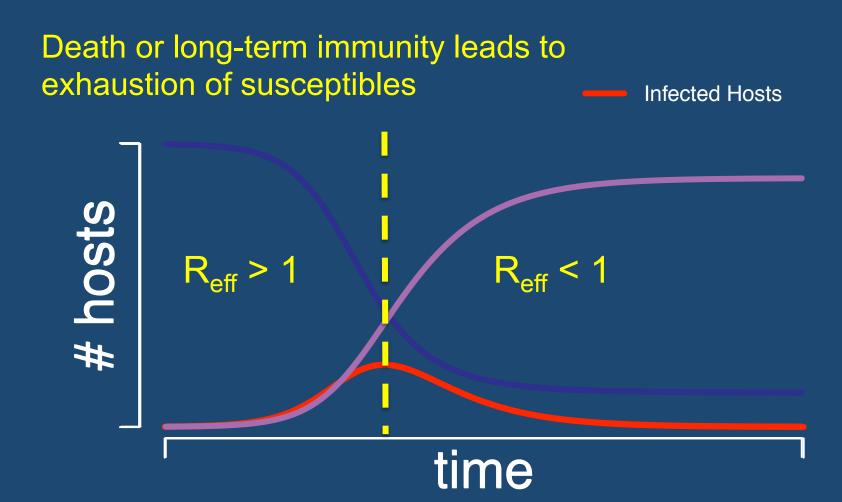
 $1/\gamma$ 

Average duration of infectiousness

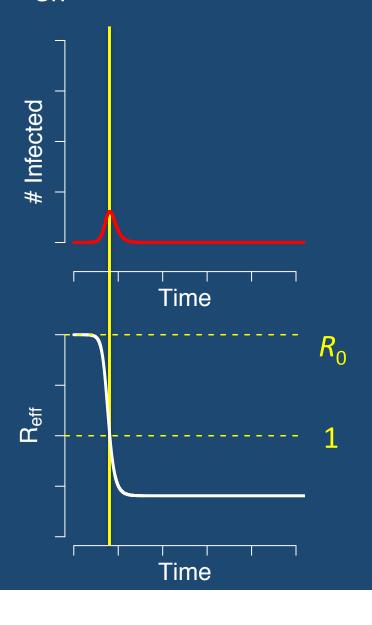
X

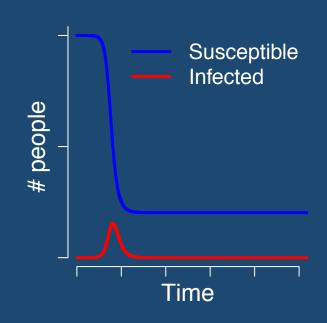
$$R_{eff} = R_0 \frac{S}{N}$$

# Why do epidemics peak?



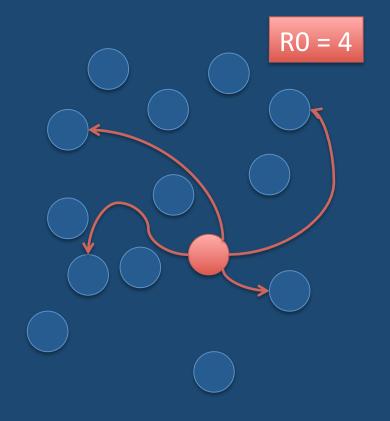
# R<sub>eff</sub>: The Effective Reproductive Number





$$R_{eff}(t) = R_0 \frac{S(t)}{N}$$

 So what % of the population must be vaccinated to eliminate transmission in a population?

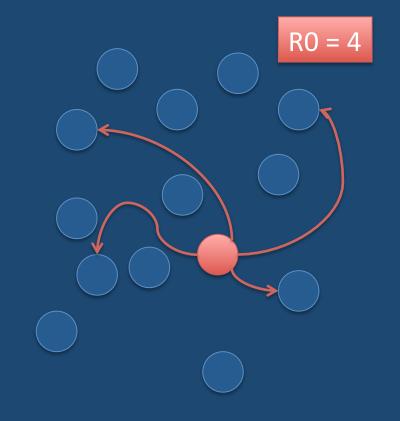


$$R_{eff} = R_0 \frac{S}{N}$$

For a disease to die out,  $R_{eff} \leq 1$ 

$$R_0 \frac{S}{N} \le 1$$

$$\frac{S}{N} \le \frac{1}{R_0}$$

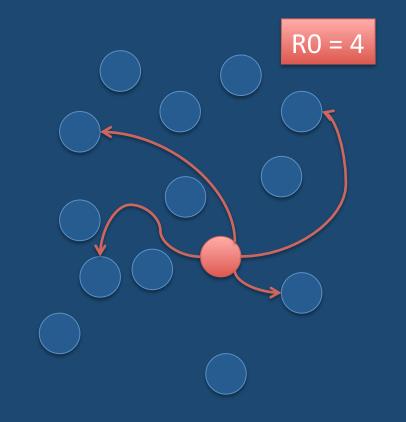


$$\frac{S}{N} \le \frac{1}{R_0}$$

Proportion immune =  $P_V$  = 1 – proportion susceptible

$$P_V \ge 1 - \frac{1}{R_0}$$

$$P_V \ge \frac{R_0 - 1}{R_0}$$

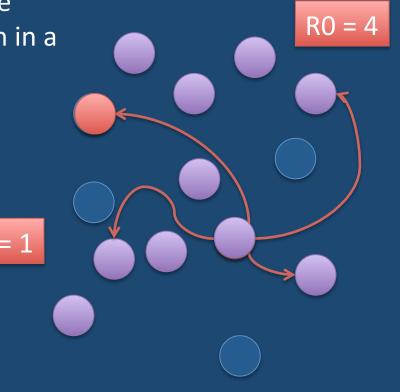


You don't have to vaccinate everyone to eliminate transmission!!!

 So what % of the population must be vaccinated to eliminate transmission in a population?

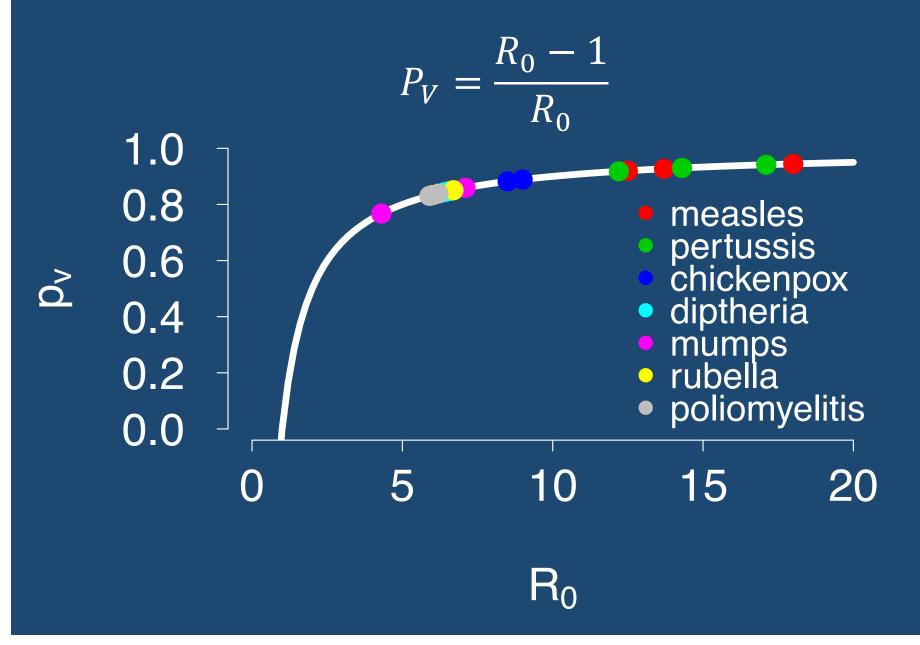
$$P_V \ge \frac{R_0 - 1}{R_0}$$

$$P_V \ge \frac{4-1}{4} = \frac{3}{4}$$

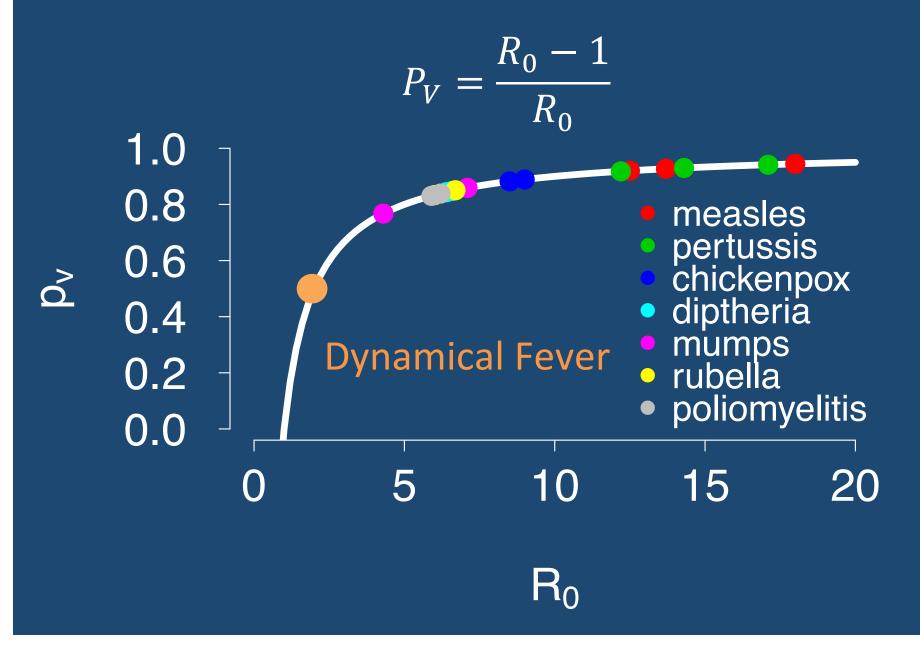


75% Recovered & Immune

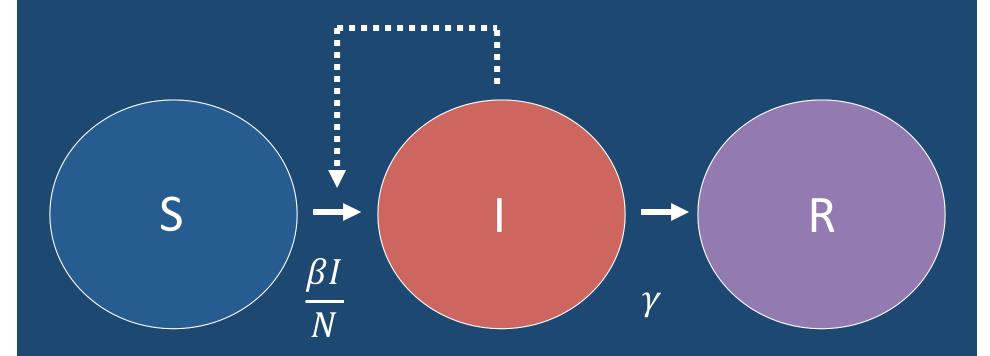
# **Elimination Thresholds**

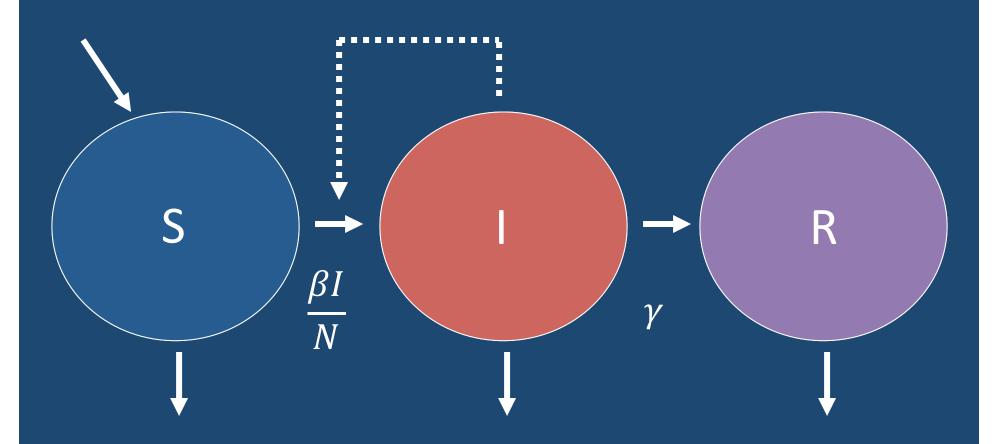


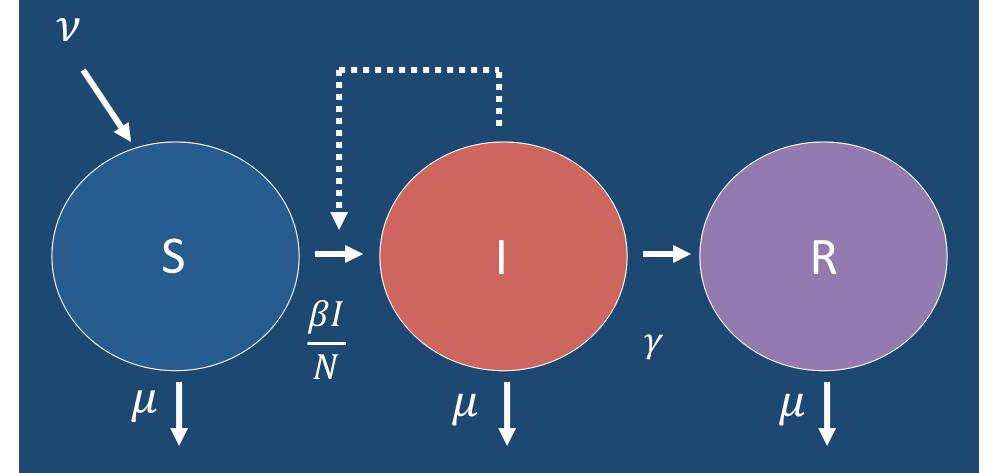
## Elimination Thresholds

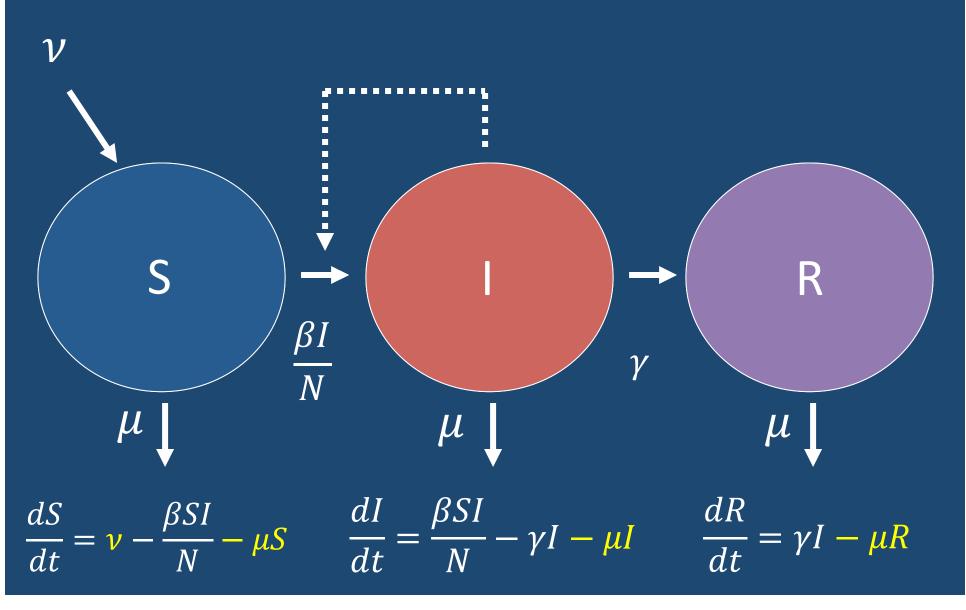


# SIR Model









$$\frac{dS}{dt} = \nu - \frac{\beta SI}{N} - \mu S$$

$$\frac{dI}{dt} = \frac{\beta SI}{N} - \gamma I - \mu I$$

$$\frac{dR}{dt} = \gamma I - \mu R$$

$$N = S + I + R$$

SO

$$\frac{dN}{dt} = \nu - \mu N$$

$$\frac{dS}{dt} = \nu - \frac{\beta SI}{N} - \mu S$$

$$\frac{dI}{dt} = \frac{\beta SI}{N} - \gamma I - \mu I$$

$$\frac{dR}{dt} = \gamma I - \mu R$$

$$N = S + I + R$$

$$\frac{dN}{dt} = \nu - \mu N$$

$$\nu = \mu N$$

$$R_0 =$$

$$\frac{\beta SI}{N} \xrightarrow{N \text{ large}} \beta$$

Rate at which an infected individual produces new infections in a naïve population

X

Proportion of new infections that become infectious

X

Average duration of infectiousness

1

 $\frac{1}{\gamma + \mu}$ 

$$R_0 =$$

$$R_0 = \frac{\beta}{\gamma + \mu}$$

Rate at which an infected individual produces new infections in a naïve population

X

Proportion of new infections that become infectious

X

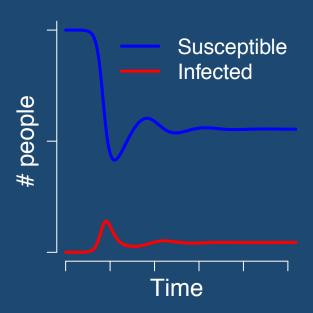
Average duration of infectiousness

Dynamics upon introduction:

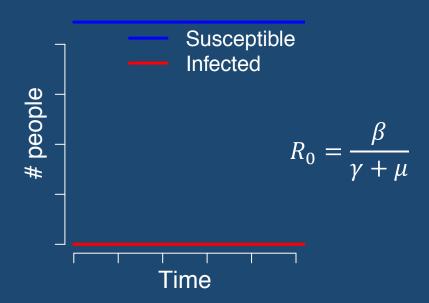
Epidemic if  $R_0 > 1$ 

No epidemic if  $R_0 \le 1$ 

#### **Endemic state**



#### No endemic state



# Reff: Effective Reproductive Number

 $\frac{\beta S}{N}$ 

Rate at which an infected individual produces new infections in a non-fully susceptible population

1

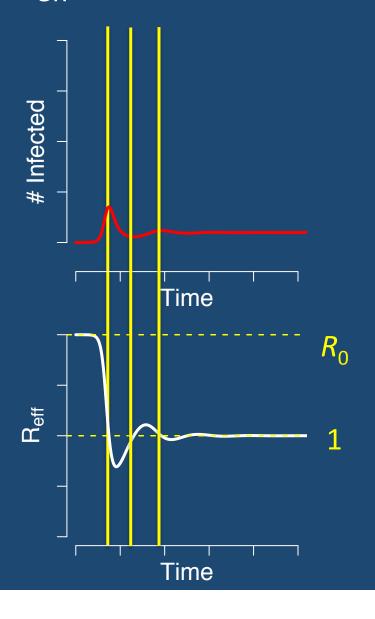
Proportion of new infections that become infectious

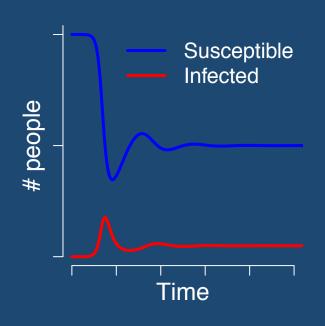
Average duration of infectiousness

X

$$R_{eff} = R_0 \frac{S}{N}$$

# R<sub>eff</sub>: The Effective Reproductive Number



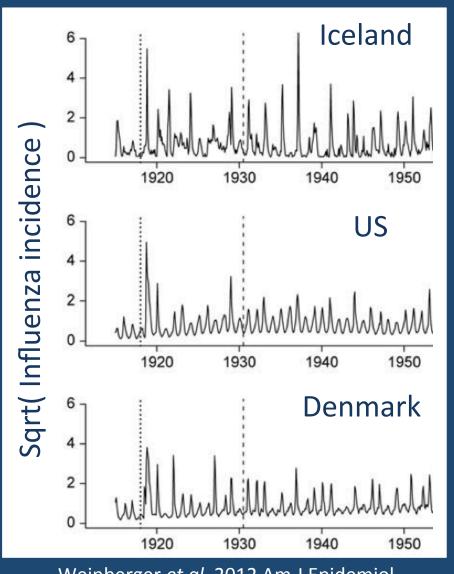


$$R_{eff}(t) = R_0 \frac{S(t)}{N}$$

$$R_{eff}(t) = \frac{\beta S(t)}{(\gamma + \mu)N}$$

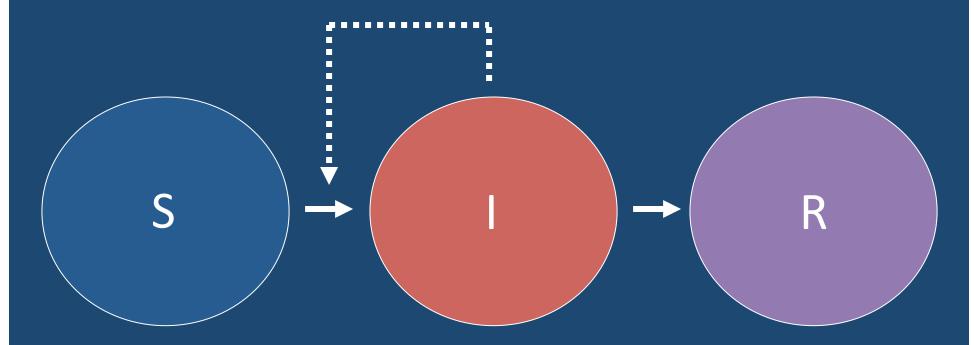
# Why do recurrent epidemics happen?

- Susceptibles exhausted from an epidemic
- Disease does not completely die out (or is reintroduced).
- Susceptibles
   replenished through
   birth, pathogen
   evolution, or loss of
   immunity



Weinberger et al. 2012 Am J Epidemiol

## State variables



We can use equations to describe the rate at which individuals flow between states

### Features of models discussed so far:

#### **Ordinary differential equations**

- Deterministic
- Well-mixed
- All individuals are identical (except in disease status)
- Continuous time with exponential waiting times
- State variables are continuous quantities

# Extremely simple models...

- Important insights
  - Why and when epidemics peak
  - What determines the endemic level of infection in a population
  - The level of effort needed to eliminate transmission
- Lots of assumptions

# Extremely simple models...

- Important insights
  - Why and when epidemics peak
  - What determines the endemic level of infection in a population
  - The level of effort needed to eliminate transmission
- Lots of assumptions

These assumptions rarely hold in the real world...

# So, what did the influenza transmission model that motivated the Alachua County SLIV program look like?

- Stochastic
- Contacts based on population structure
  - households
  - neighborhoods
  - work/school groups
- Each individual is a discrete entity with identifying features
- Discrete time

# So, what did the influenza transmission model that motivated the Alachua County SLIV program look like?

- Synthetic population
- Influenza outcomes
- Transmission patterns
- Vaccination options

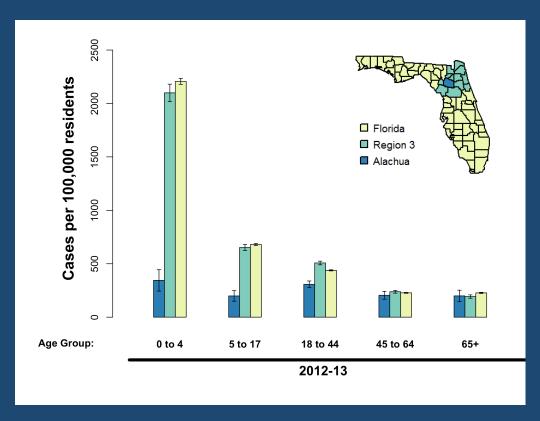
# So, what did the influenza transmission model that motivated the Alachua County SLIV program look like?

- Synthetic population
- Influenza outcomes
- Transmission patterns
- Vaccination options

#### **Details:**

Weycker et al. 2005 Vaccine; Halloran et al. 2006 Science; Germann et al. 2006 PNAS; Basta et al. 2009 AJE; Longini 2012 Pediatrics

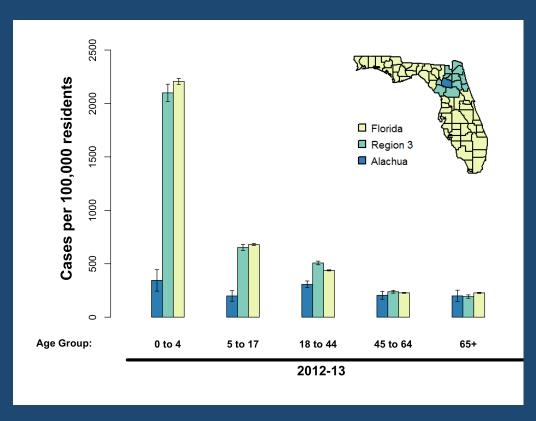
# Were the predictions borne out?



Tran et al. Submitted

Not entirely

## Were the predictions borne out?



Tran et al. Submitted

- Not entirely
- Is the model still valuable?

#### Acknowledgements

#### Alachua County Control Flu Program

#### **Funding**

**University of Florida** 

Cuc Tran & Parker Small

For sharing materials used in this presentation

#### ICI3D Program

#### **Faculty**

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   Travis Porco, & Jim Scott
- John Hargrove, Alex Welte, & Brian Williams

#### **Program Evaluation**

Gavin Hitchcock (SACEMA)

NIH/FIC-DHS/S&T Research and Policy for Infectious Disease Dynamics (RAPIDD) Program





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**UF Emerging Pathogens Institute** 

