Heterogeneity, contact patterns and modeling options

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The resilience of infectious disease

1967: It's time to close the book on infectious diseases







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Pathogen evolution





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Human heterogeneity





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Outline

Homogeneous disease models

The importance of heterogeneity

Effects of heterogeneity

Modeling approaches



Homogeneous disease models

- Homogeneous models assume everyone has the same:
 - disease characteristics (e.g. susceptibility, tendency to transmit)

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- mixing rate
- probability of mixing with each person

The basic reproductive number

R₀ is the number of people who would be infected by an infectious individual *in a fully susceptible population*.

$$\blacktriangleright \mathcal{R}_0 = \beta / \gamma = \beta D = (cp)D$$

- c: Contact Rate
- p: Probability of transmission (infectivity)
- D: Average duration of infection
- A disease can invade a population if and only if $\mathcal{R}_0 > 1$.

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Equilibrium



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Equilibrium analysis

R_{eff} is the number of people who would be infected by an infectious individual in a general population.

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$$\blacktriangleright \mathcal{R}_{eff} = \mathcal{R}_0 \frac{S}{N} = pcD \frac{S}{N}$$

• At equilibrium:
$$\mathcal{R}_{eff} = \mathcal{R}_0 \frac{S}{N} = 1$$
.

• Thus:
$$\frac{S}{N} = 1/R_0$$
.

• Proportion 'affected' is $V = 1 - S/N = 1 - 1/R_0$.

Homogeneous endemic curve



endemic equilibrium

- Threshold value
- Sharp response to changes in factors underlying transmission

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Works – sometimes

Proportion affected and disease prevalence

- ► For diseases with no recovery, V is the disease prevalence
- For other diseases, the equilibrium value of P = I/N will be equal to V times the ratio of time spent sick to the time spent immune.

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Example: measles before vaccination

•
$$\bar{P} = 0.95 \times (2 \text{wk}/60 \text{yr}).$$

Disease dynamics



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R0 = 4.00

Year

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R0 = 5.66

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Beyond homogeneity

Flavors of heterogeneity

- among hosts
- spatial
- demographic (discreteness of indviduals)

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- temporal
- others

Heterogeneity in TB



- **Tuberculosis Notifications in USA, 1980s**
- Progression: Nutrition, stress

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- Contact: Overcrowding, poor ventilation
- Cure: Access to medical care

Heterogeneity in other diseases

- STDs: Sexual mixing patterns, access to medical care
- Influenza: Crowding, nutrition
- Malaria: Attractiveness to biting insects, geographical location, immune status

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Every disease!

Large-scale heterogeneity



- For schistosomiasis, the worldwide average $\mathcal{R}_0 < 1$
- Disease persists because of specific populations with $\mathcal{R}_0 > 1$.
- This effect operates at many scales.

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Equilibrium calculations

Assume p = στ has a susceptibility component and a transmission component:

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- $\mathcal{R}_0 = \sigma \tau c D$
- $\mathcal{R}_{eff} = \sigma \tau c DS / N$

Equilibrium calculations with heterogeneity

- τD applies to infectious individuals $\rightarrow \tau_I D_I$
- σ applies to susceptible individuals $\rightarrow \sigma_S$

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• c is complicated $\rightarrow c_S c_I / \bar{c}$

Example

- Imagine a disease spread by people who differ only in their effective mixing rates
- If the disease has just started spreading in the population, how do c_S and c_l compare to c̄?

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• $c_S \approx \bar{c}; c_l > \bar{c}.$

If the disease is very widespread in the population?

► $C_S < \overline{C}; C_I \rightarrow \overline{C}.$

Simpson's paradox



What happens when a peanut farmer is elected to the US Senate?

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The average IQ goes up in both places!

The basic reproductive number

- When the disease invades:
 - The susceptible population \approx the general population
 - The infectious population is likely to have higher values of c, D and/or \(\tau\)

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*R*₀ is typically greater than you would expect from a homogeneous model

Equilibrium analysis

- As disease prevalence goes up:
 - Susceptible pool is the most resistant, or least exposed group

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- Infectious pool moves looks more like the general population.
- ▶ → lower proportion affected for a given value of \mathcal{R}_0 .

Homogeneous endemic curve



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endemic equilibrium

Heterogeneous endemic curves





Heterogeneity and disease



endemic equilibrium

- Heterogeneity has a double-edged effect
 - Effects of disease are *lower* for a given value of R₀.
 - But R₀ is *higher* for given mean values of factors underlying transmission

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Heterogeneous endemic curves





 Heterogeneity makes the endemic curve flatter

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How diseases reach equilibrium

- Diseases that invade have high values of R₀
- \mathcal{R}_{eff} must be 1 at equilibrium
 - Potentially infectious contacts are wasted
 - Many potential contacts are not susceptible (affected by disease)

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- Those not affected less susceptible than average
- Infectious pool less infectious

Spatial and network models

- Individual-level, or spatial, heterogeneity also usually increases wasted contacts
- Infectious people meet:
 - people with similar social backgrounds
 - people with similar behaviours
 - people who are nearby geographically or in the contact network

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More wasted contacts further flatten the endemic curve

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Phenomenological



- You can simply make β go down as prevalence goes up
 - Need to choose a functional form

Multi-group models

Divide the population into groups.

- cities and villages
- rich and poor
- high and low sexual activity

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- age, gender
- ▶ ...

Individual-based models



- Allow many possibilities:
 - vary individual characteristics
 - add a network of interactions
 - let the network change
- Individual-based approaches require stochastic models

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Summary





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