

Human mobility and strain dynamics

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CIRM Probability and Biological Evolution

Marseille, France

29 June 2018





Disease and Mobility: A Neglected Factor in Epidemiology*

R. MANSELL PROTHERO¹ INTERNATIONAL JOURNAL OF EPIDEMIOLOGY, 1977

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INTERNATIONAL JOURNAL OF EPIDEMIOLOGY

(for example the spread of smallpox in the past by the movement of refugees; the risks of typhoid in crowded insanitary refugee camps).

- 3. Physical stress may result from movement:
 - (i) lowering resistance and so increasing susceptibility to infection (for example movements over distance, especially when these are enforced as a result of natural hazard or political disruption);
- (ii) problems of under-nutrition and malnutrition occurring in new environments; the former through difficulties in making economic adjustments, with periods of unemployment and thus limited means of acquiring food; the latter through the difficulty of adjusting to new kinds of food (for example movement from cereal staple to root staple areas), and/or difficulties associated with the preparation of foods (such as movements which are sex selective so that men move without their wives to support them).
- 4. Psychological stress may result from movement because of sociocultural-economic pressures in adjusting to new environments (especially in rural/urban movements where there are marked differences between the personal contacts in small homogenous rural communities and the impersonal nature of large heterogenous urban communities). However adjustment mechanisms operate in urban communities to assist newcomers, and rural/ urban/rural circulation allows the maintenance of contacts with places of origin which are socially and economically stabilizing.

CONCLUSION

In each cell of the typology it is possible to show an association between a particular group of people involved in that type of mobility and one or more of the health hazards. It is evident that in epidemiological studies where it is important to identify and classify different pathogens, and possibly different vectors, it is also necessary to recognize the variety of human factors involved with particular reference to mobility. The attention and expertise required for the understanding of human factors is comparable to that required for pathogens and vectors. The forms of mobility outlined have spatial and temporal dimensions which are susceptible to quantitative geographical analysis, comparable for example to the statistical analysis of parasite/vector relationships in malaria developed initially by Macdonald and extended by others (23, 24, 25). These analyses of mobility cannot be done in isolation but should be in association with medical and, if relevant, entomological analyses. All are parts of a complex whole which must be fully understood if satisfactory measures are to be devised for the alleviation, control and eradication of disease and the improvement of health.

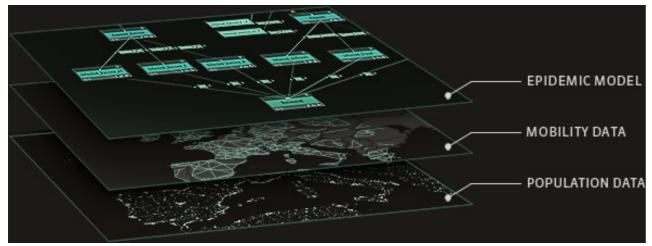
On a macro-scale the association of disease and human mobility can only be neglected at considerable risk (26). This paper demonstrates the importance of the association on a greater variety of scales and in greater detail than have been recognized in the past.

REFERENCES

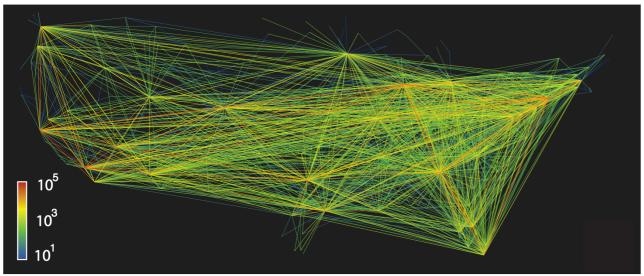
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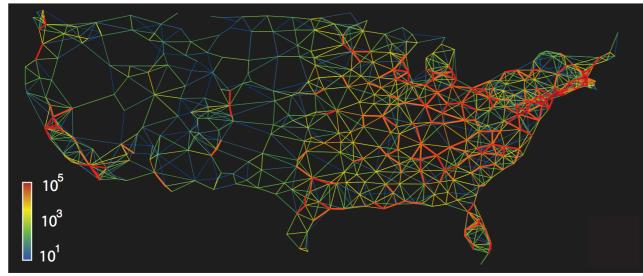
Human mobility affects how pathogens spread



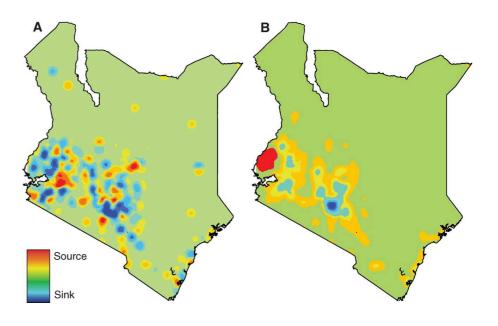




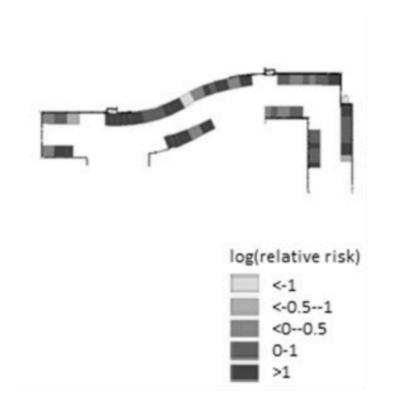
Balcan et al., PNAS (2009)



Balcan et al., PNAS (2009)



Wesolowski et al., Science (2012)

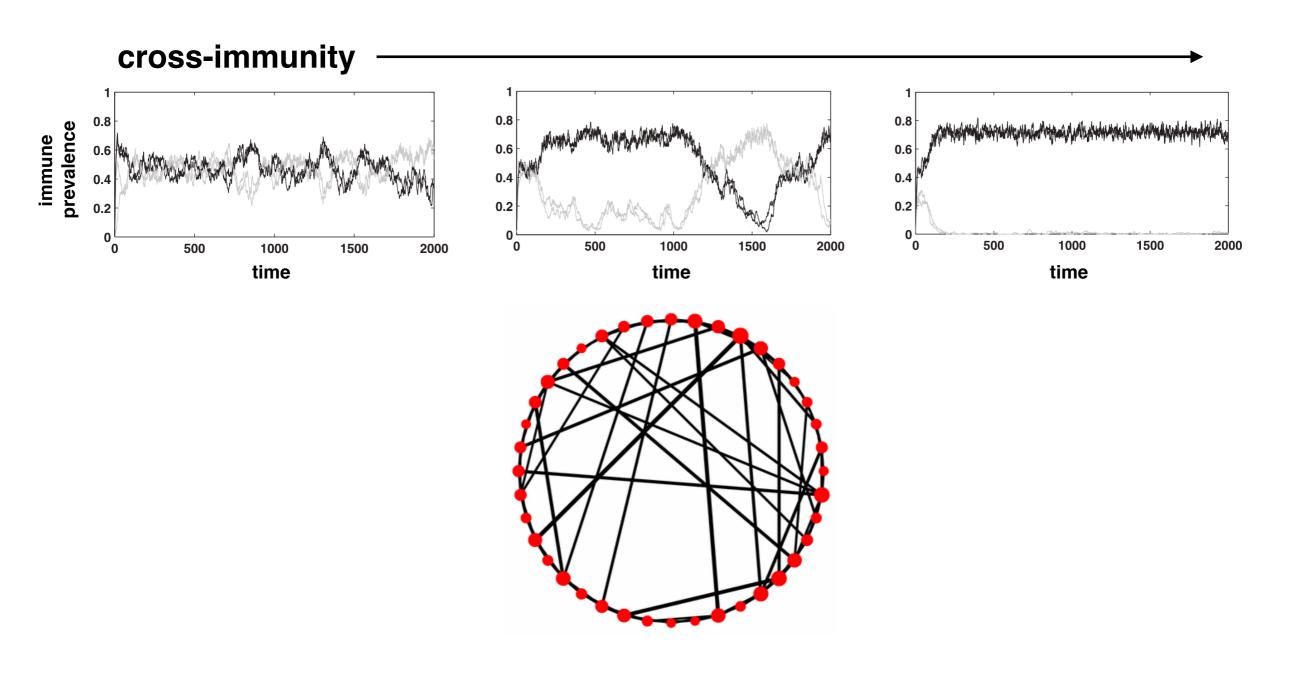


Kong et al., BMC ID (2013)

Human mobility affects how pathogens evolve

The effects of host contact network structure on pathogen diversity and strain structure

Caroline O'F. Buckee*†, Katia Koelle†, Matthew J. Mustard†¶, and Sunetra Gupta*



But... how do humans move?

Bulk movement

The 'gravity model'

$$T_{i,j} = \frac{N_i^{\alpha} N_j^{\beta}}{f(d_{i,j})}$$

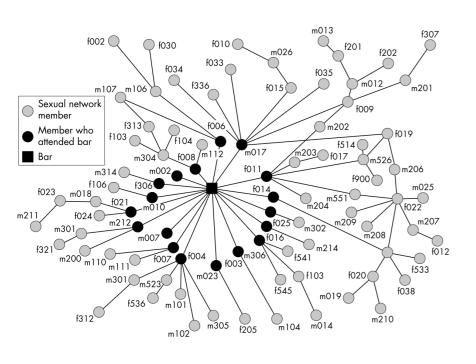
Zipf, Am Soc Rev (1946)

The 'radiation model'

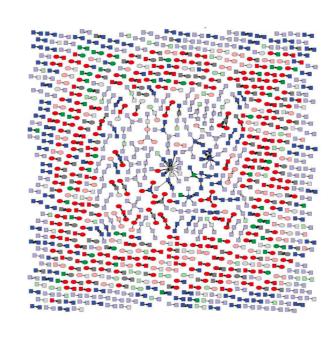
$$\langle T_{i,j} \rangle = T_i \frac{N_i N_j}{(N_i + s_{i,j})(N_i + N_j + s_{i,j})}$$

Simini et al., Nature (2012)

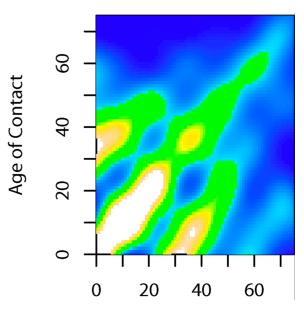
Interpersonal mixing



De et al., STI (2004)



Wertheim et al., PLoS Pathogens (2017)



Mossong et al., PLoS Medicine (2008)

introduction

national study

haslemere study

strain dynamics

Contributors

Production team:











Maths team:



Julia Gog Maria Tang (me)



Petra Klepac



Andrew Conlan

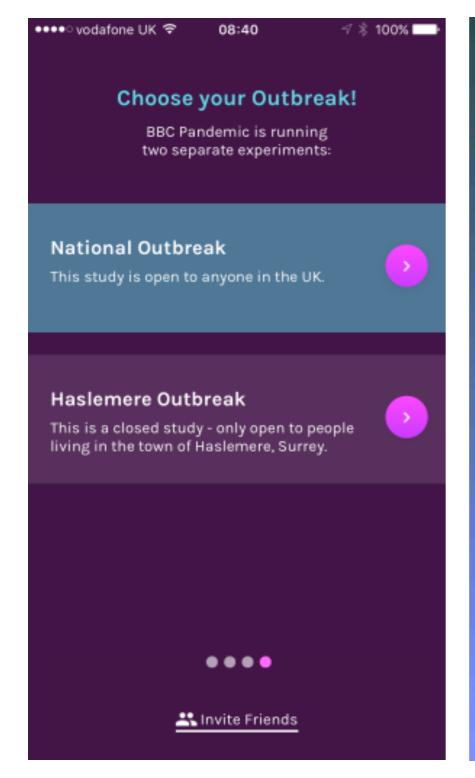


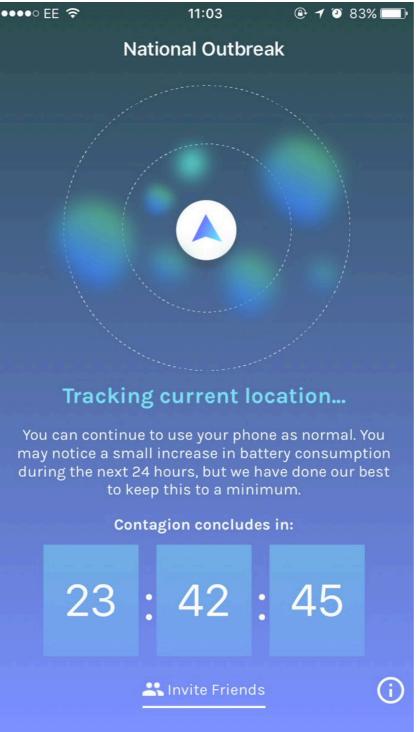
Adam Kucharski

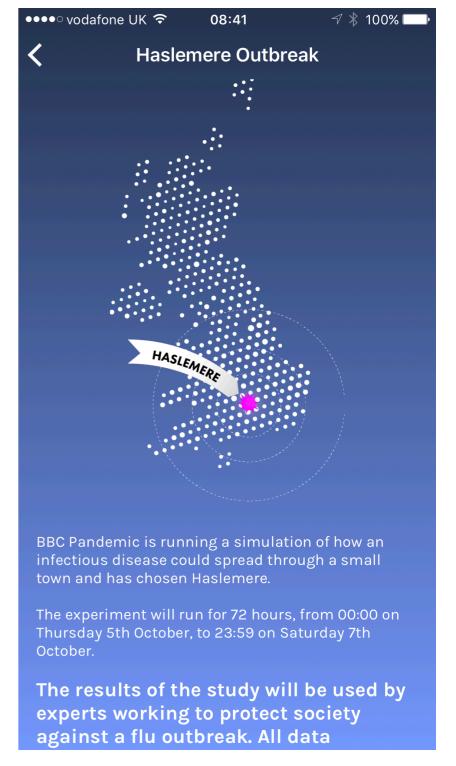


Hannah Fry



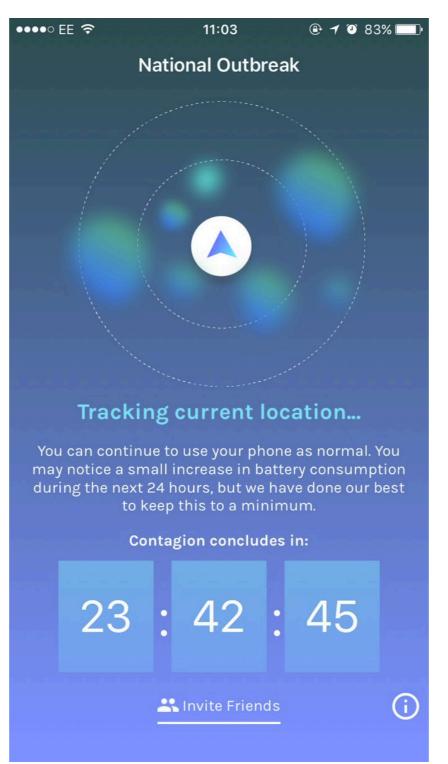


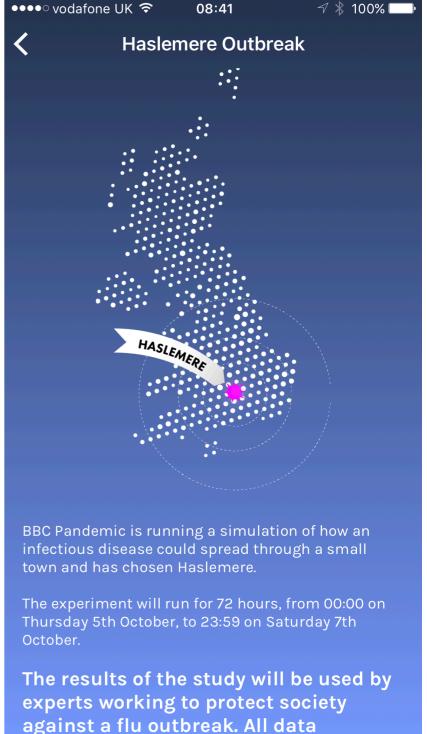






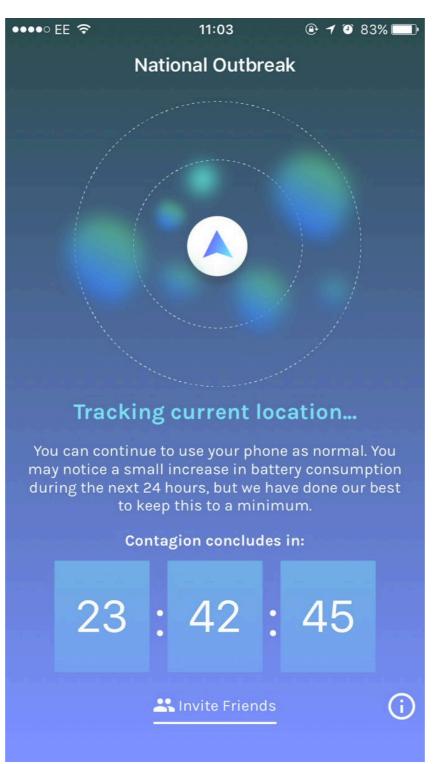
- vodafone UK 08:40 √ 🖄 100% l Choose your Outbreak! BBC Pandemic is running two separate experiments: National Outbreak This study is open to anyone in the UK. Haslemere Outbreak This is a closed study - only open to people living in the town of Haslemere, Surrey. $\bullet \bullet \bullet \bullet$ 🚢 Invite Friends
- Social contacts
- Geographic location (>1km)
- UK-wide







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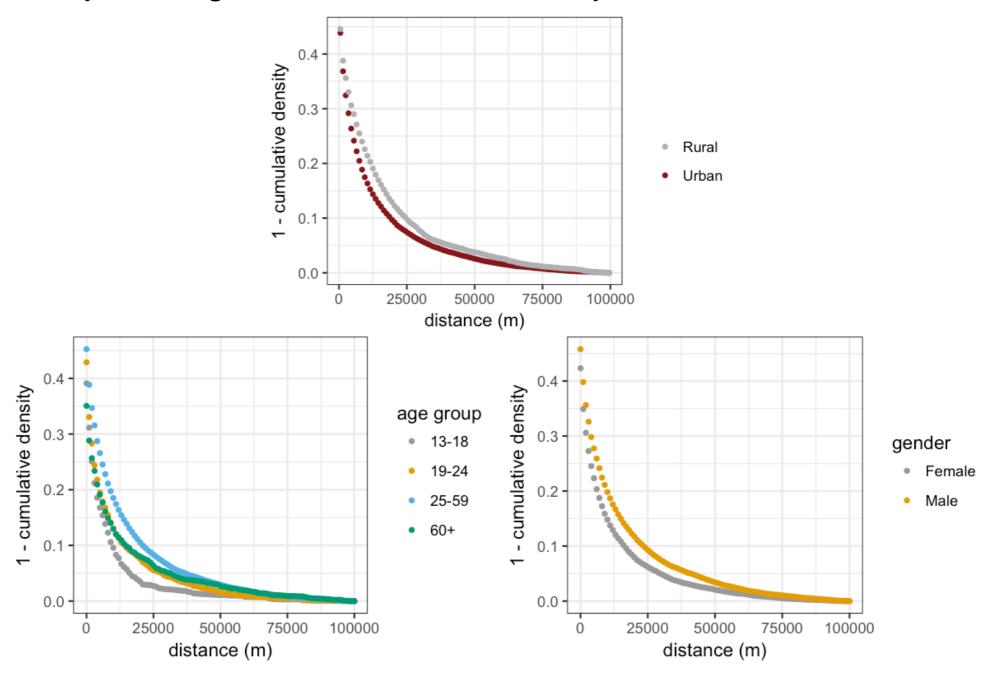


- Geographic location (>1m)
- Haslemere only



The National study

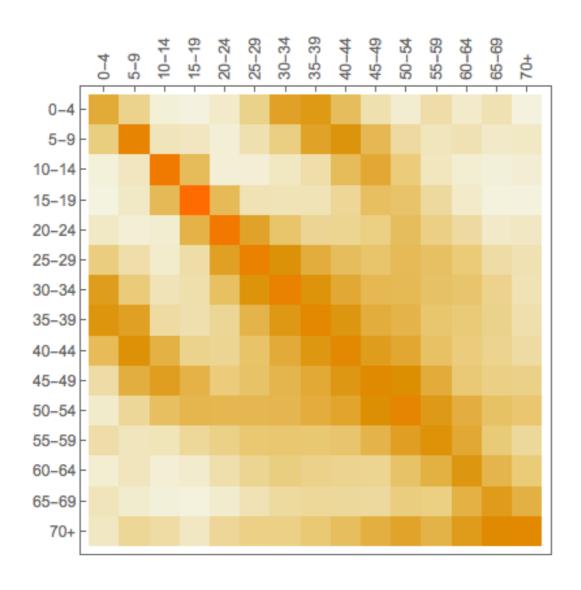
Probability of being more than 'x' meters away from the first recorded location



Klepac *et al.*, Epidemics (2018) *strain dynamics*

The National study

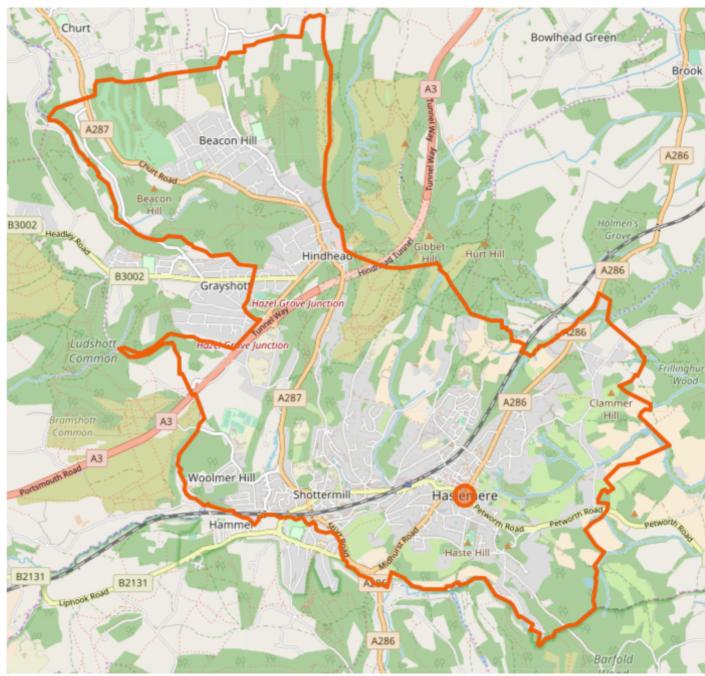
Age distribution of contacts



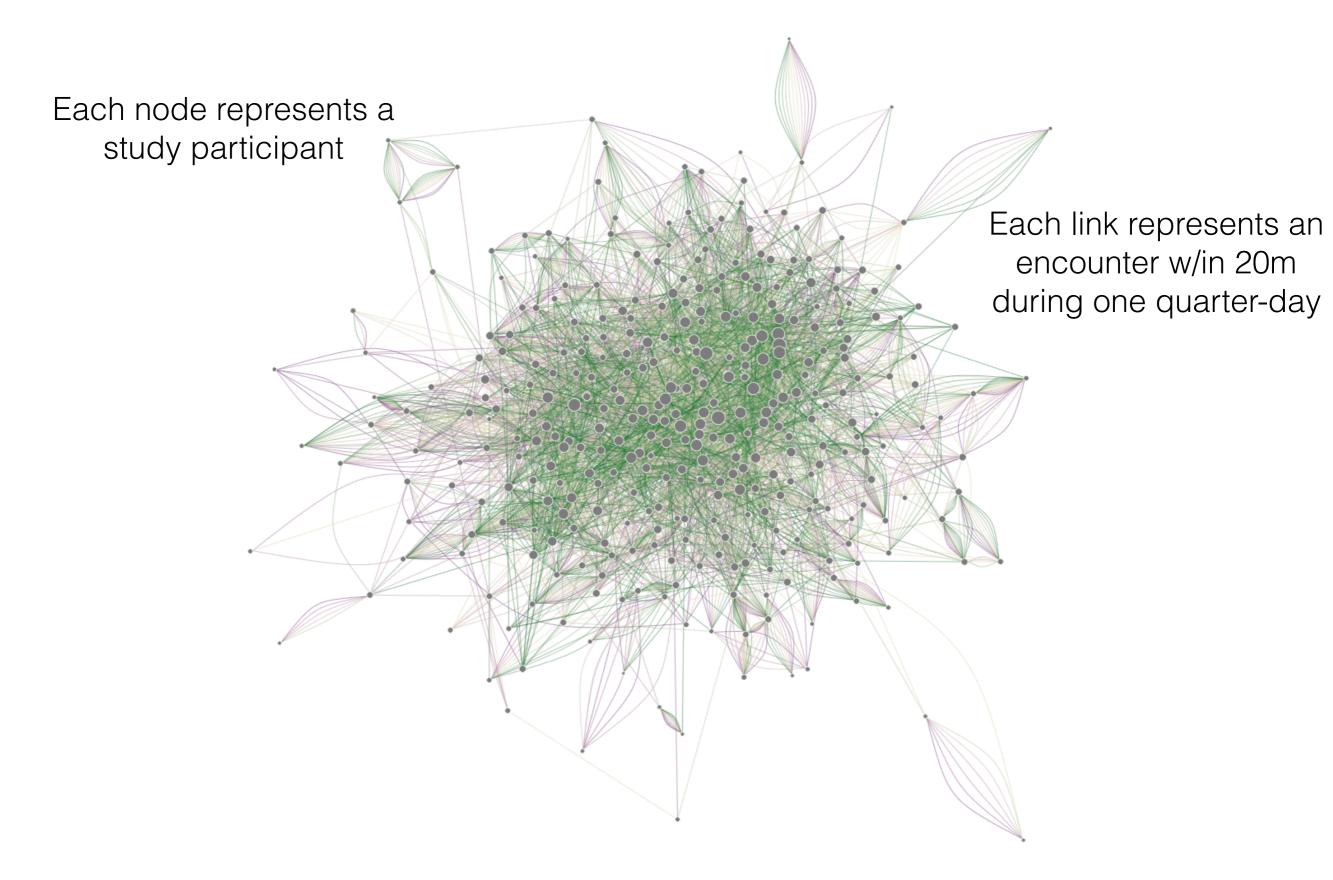


The Haslemere study

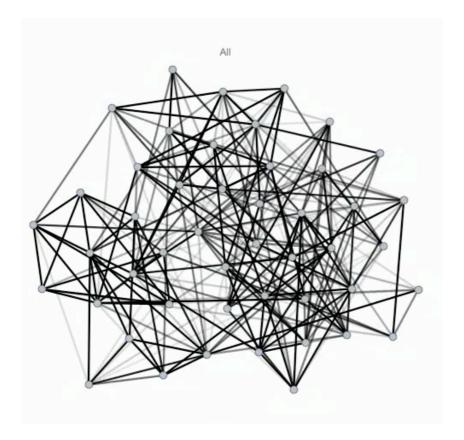




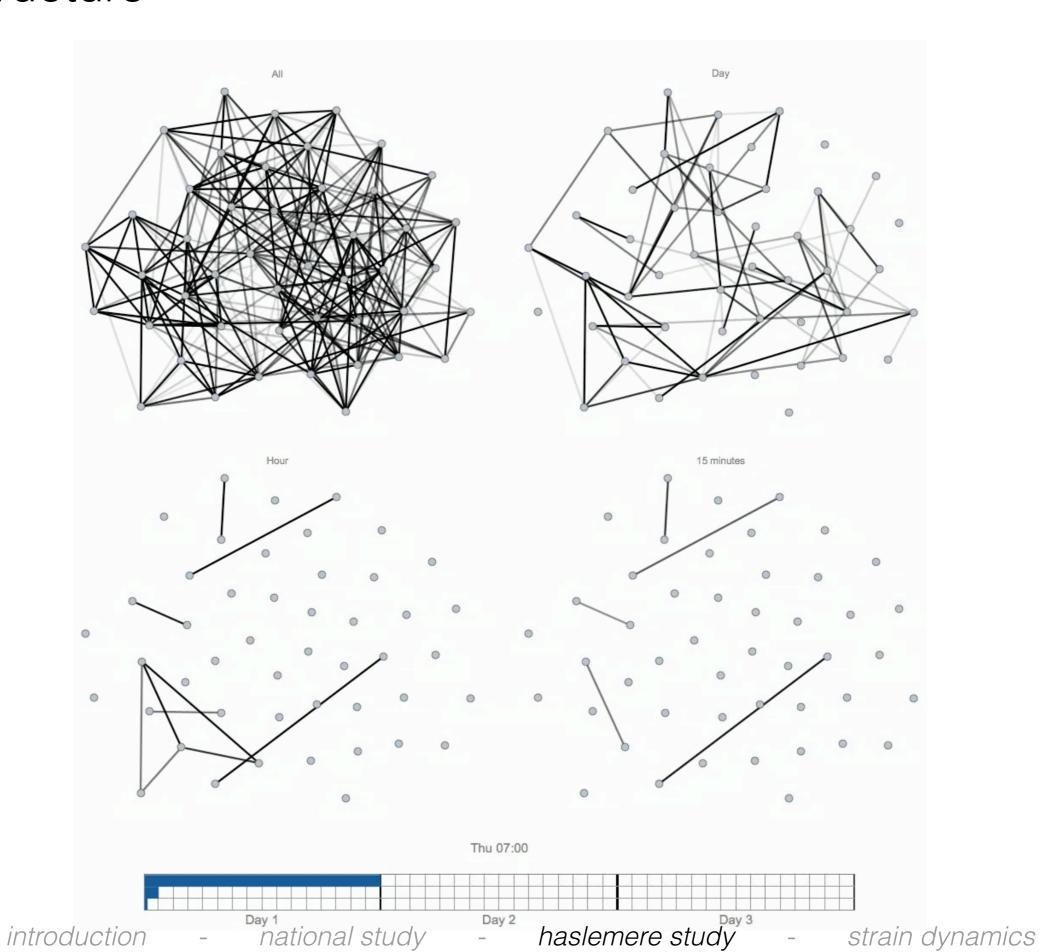
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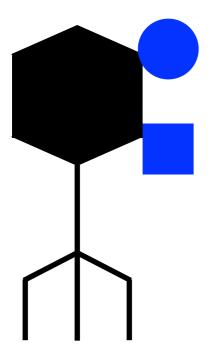


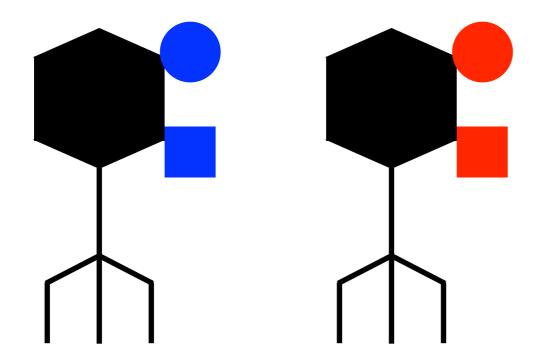
Host structure

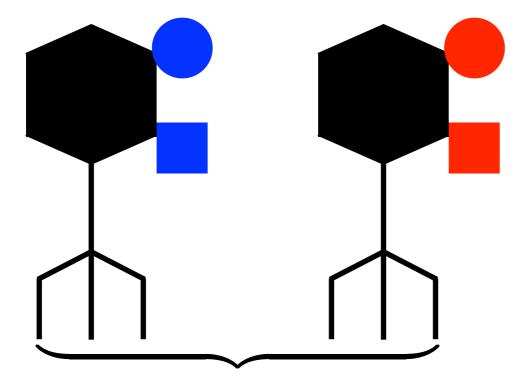


Host structure

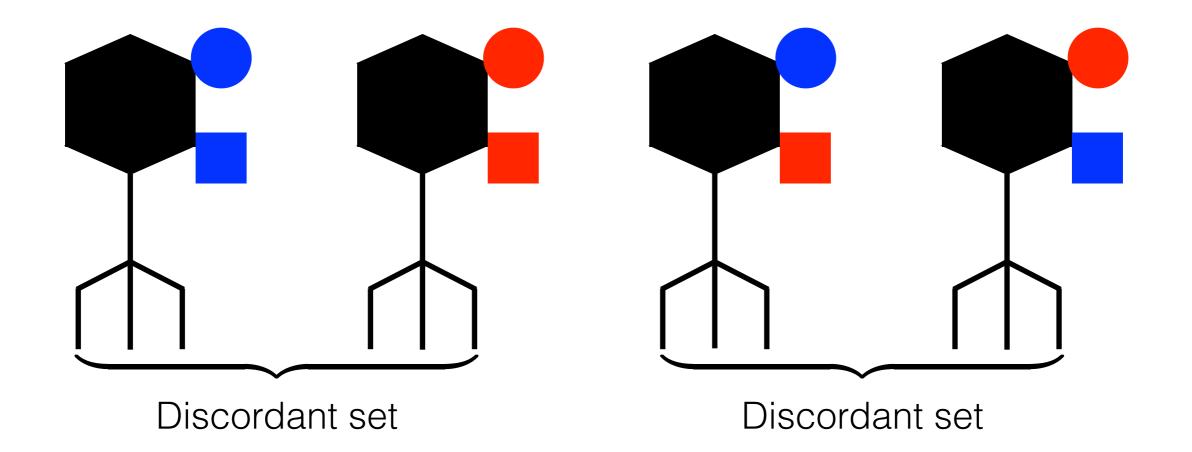


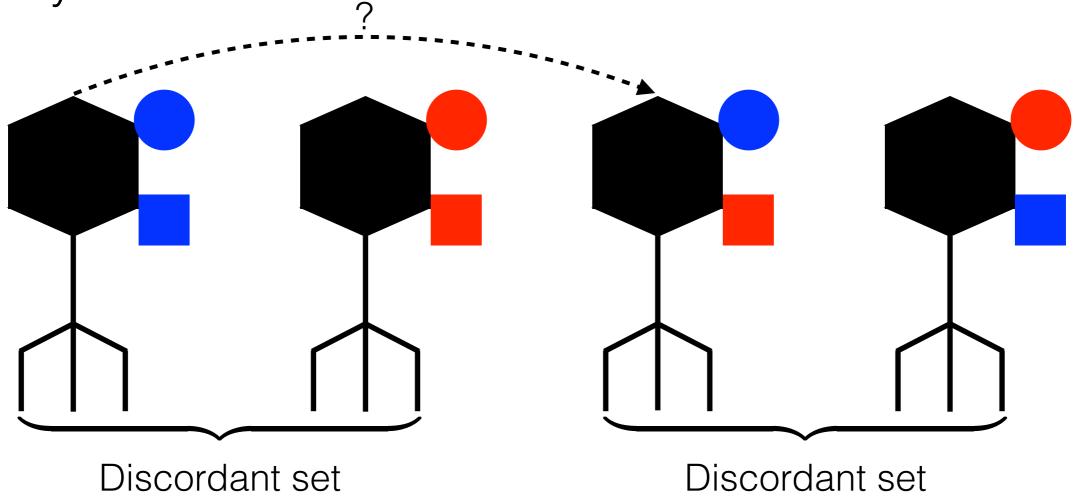


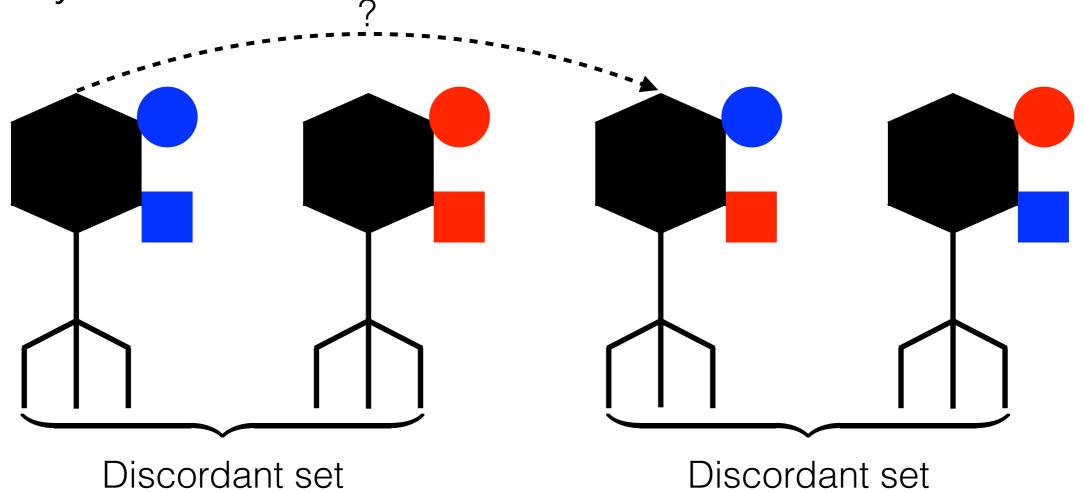


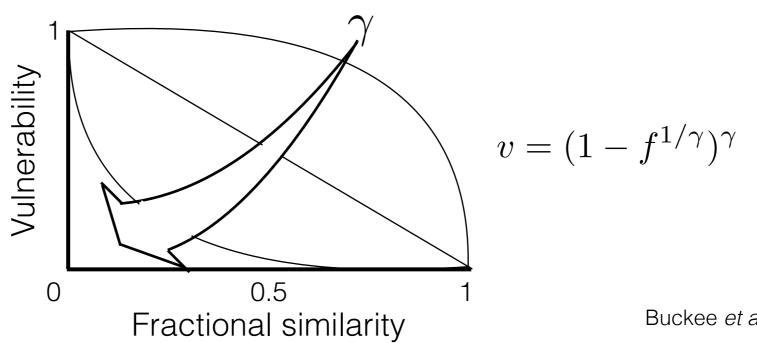


Discordant set









Buckee et al., PNAS (2004)

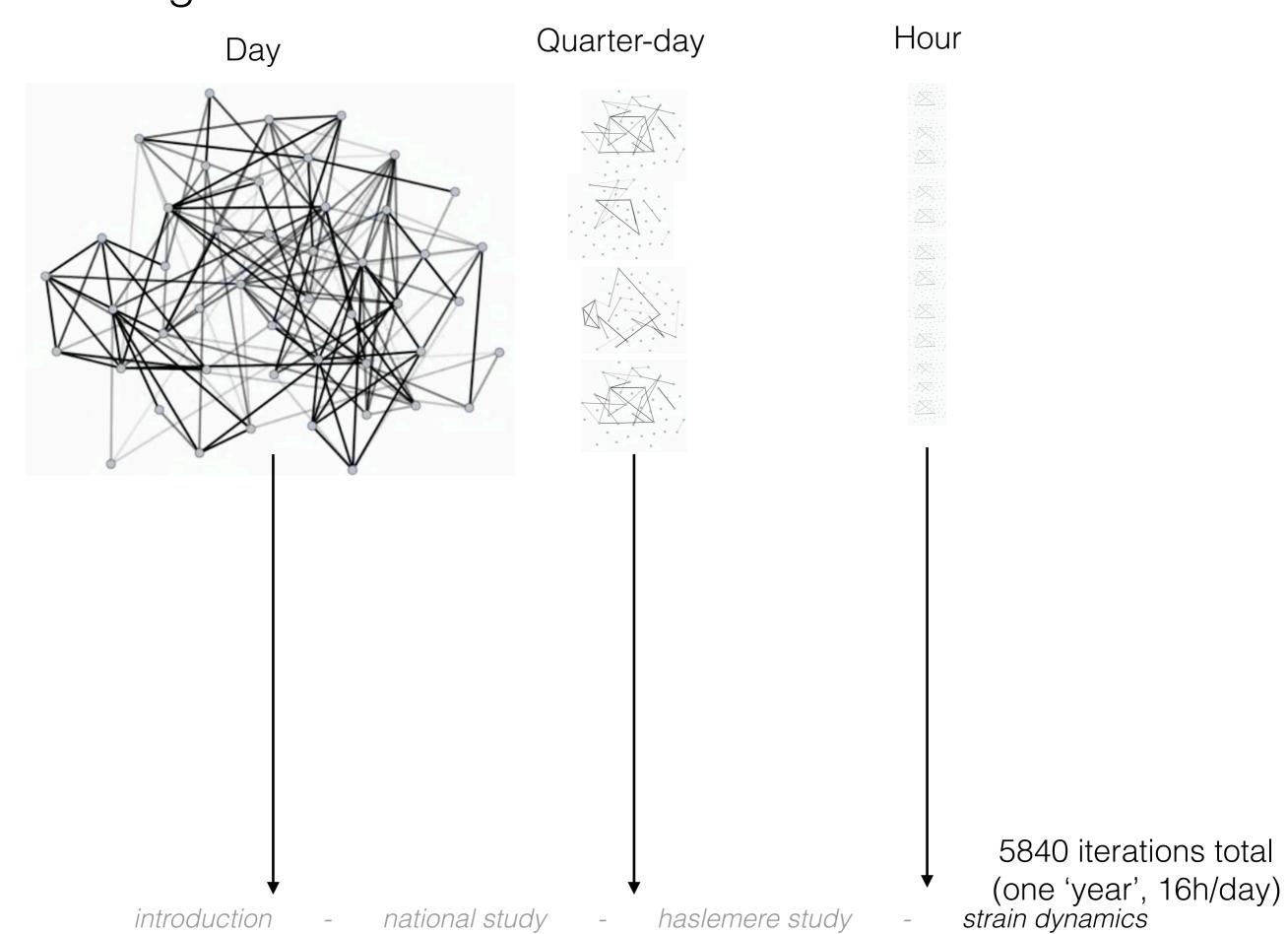
introduction

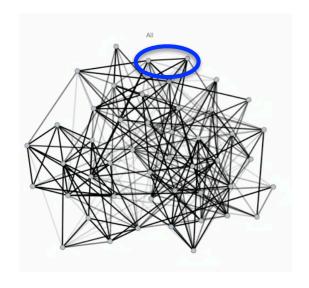
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national study

haslemere study

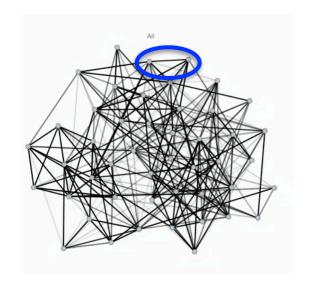
strain dynamics

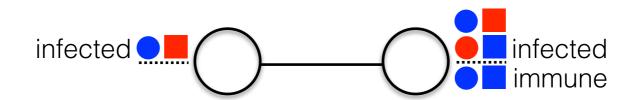




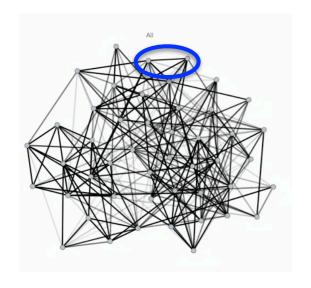


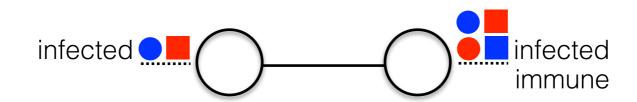
Event	Probability
Infection	$v\beta$
Lose immunity	σ
Clear infection	μ
Mutation	au



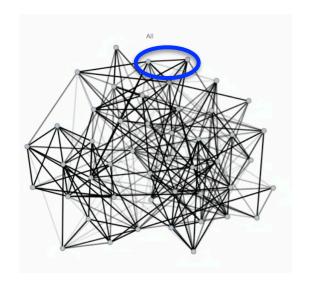


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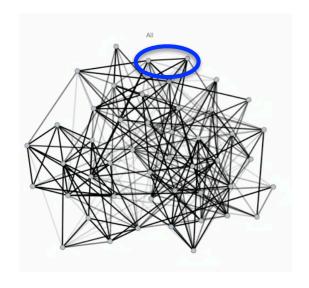


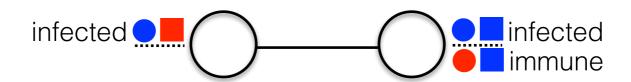
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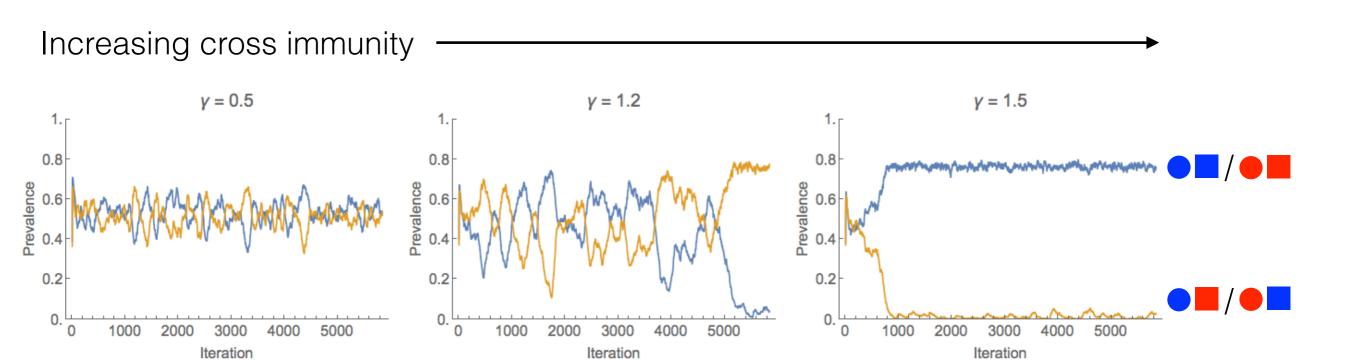
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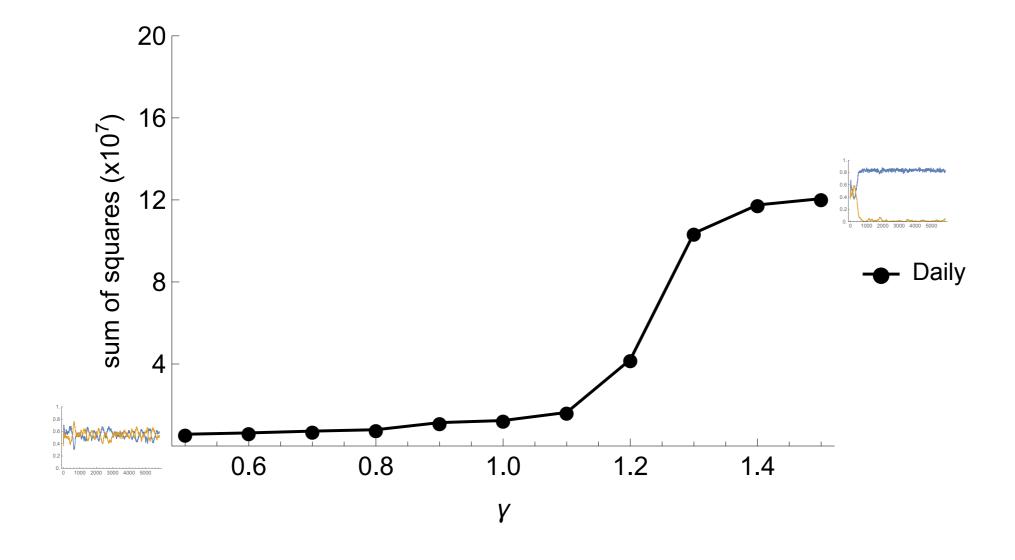


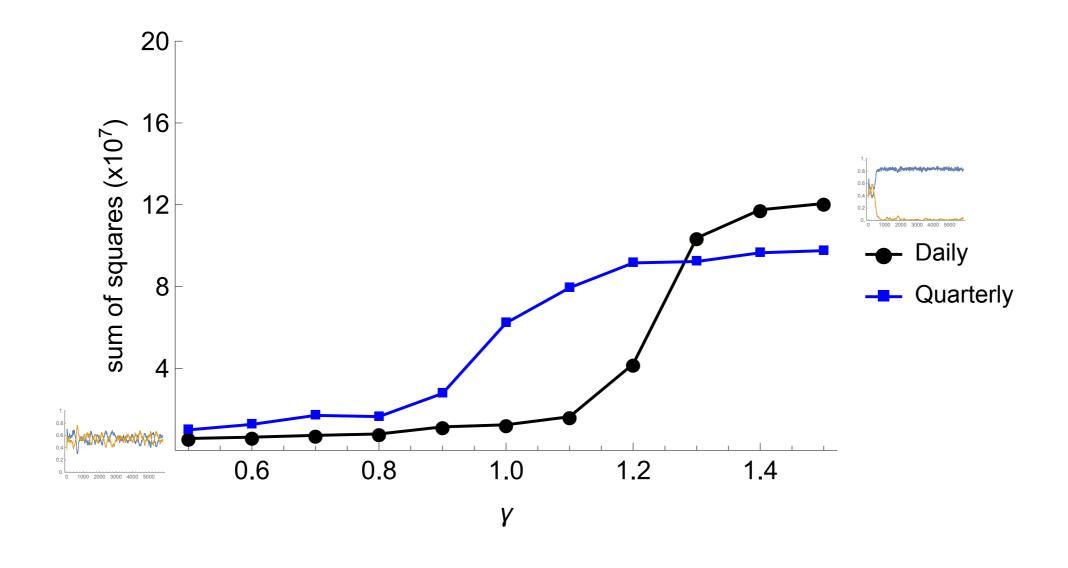


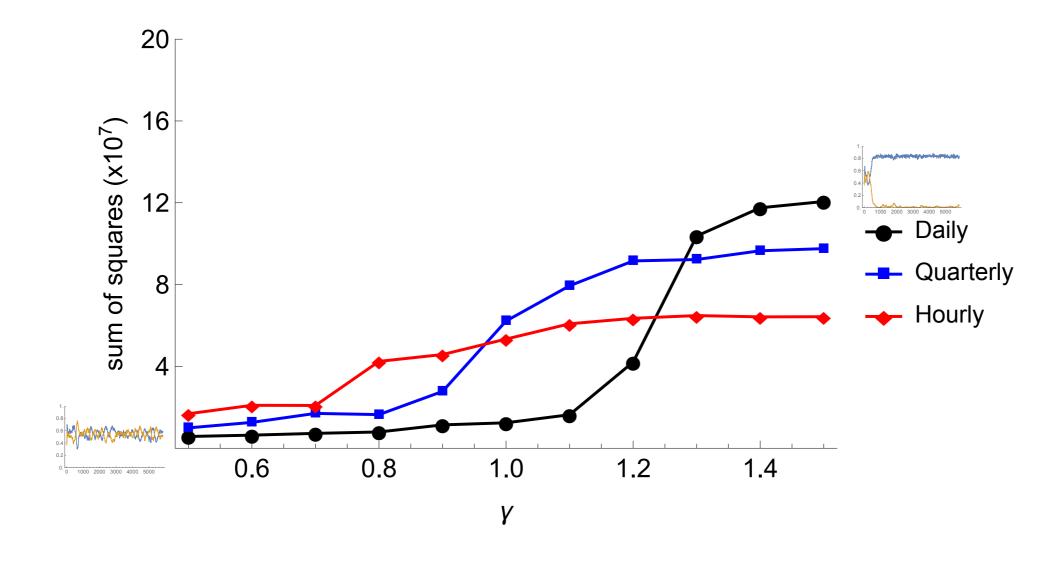
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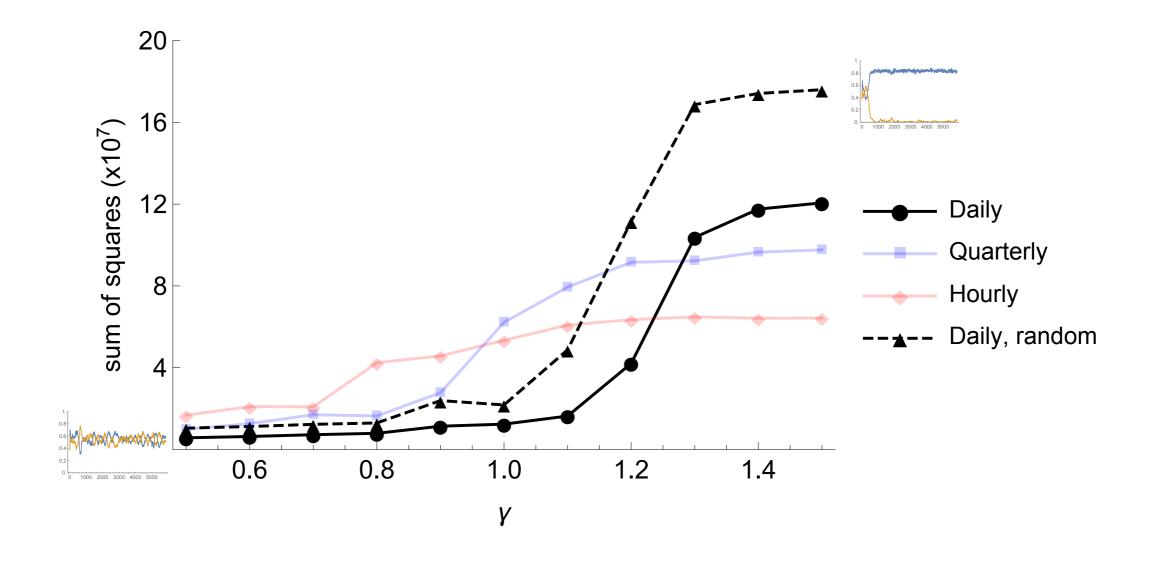
Typical output

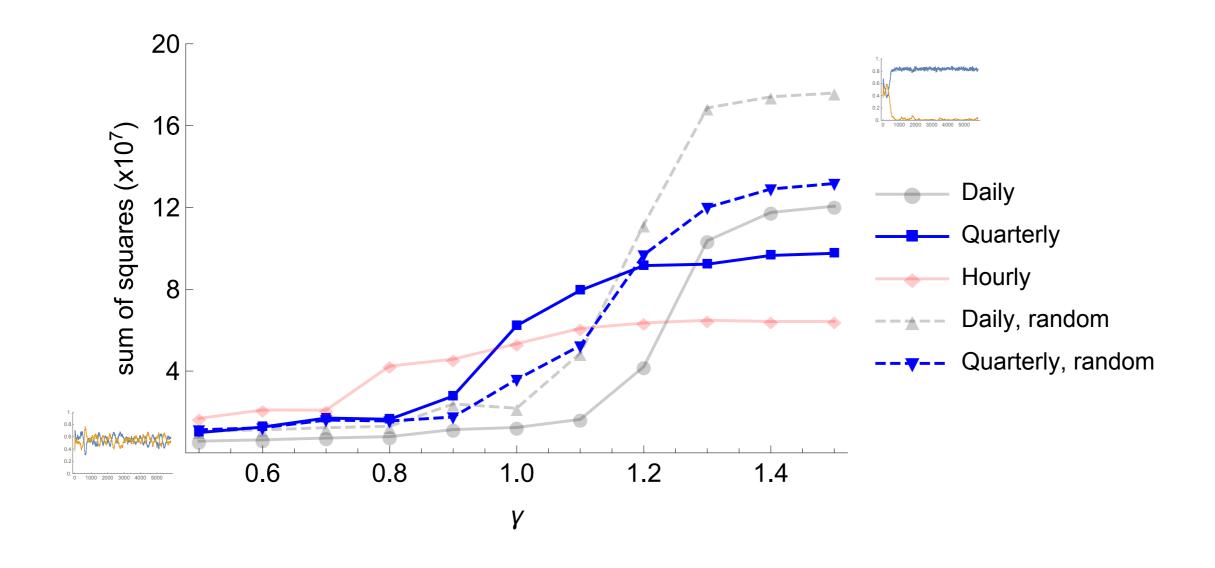


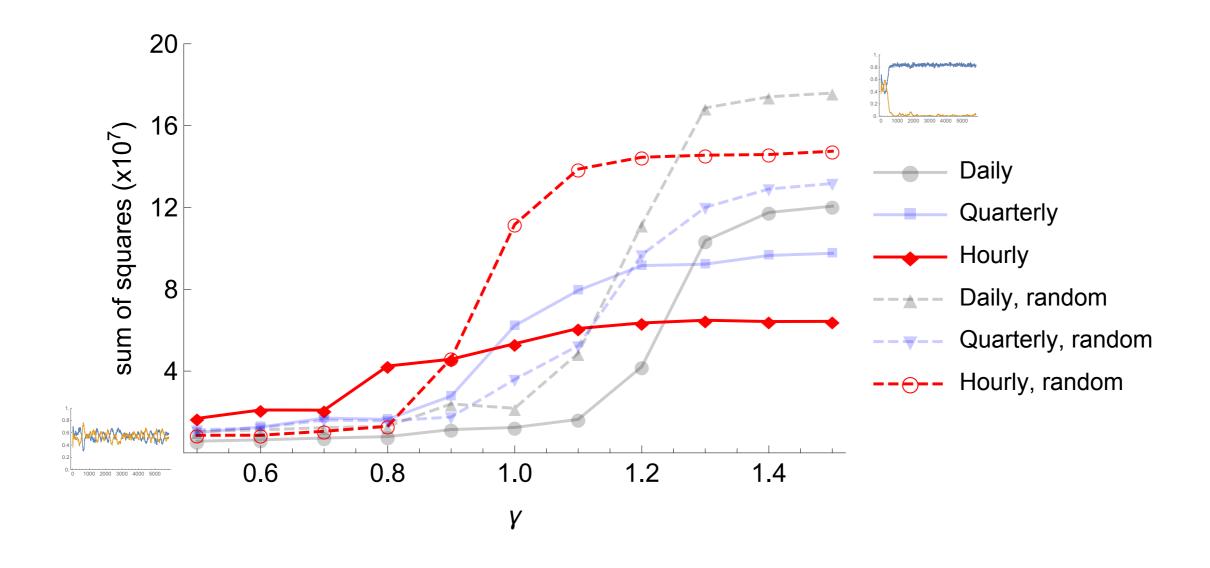






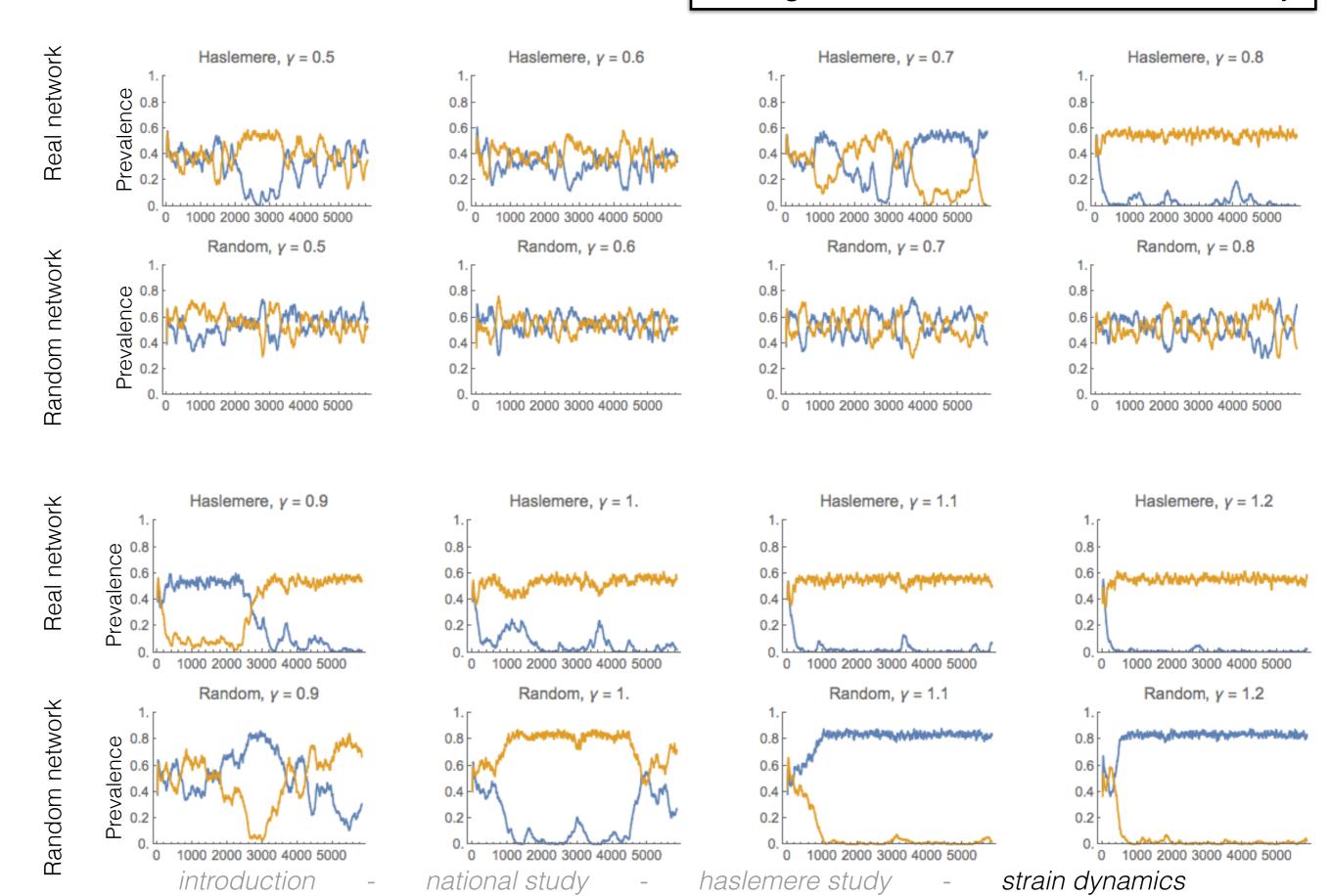






Immunity over time

For the real network, strain structure emerges at lower levels of cross immunity



Thank you!











