#### 8 Epidemic Data

#### 9 Epidemic Data II

#### 10 Epidemic Data III

Instructor: David Earn Mathematics 4MB3/6MB3 Mathematical Biology

1/62



# Mathematics and Statistics

$$\int_{M} d\omega = \int_{\partial M} \omega$$

# Mathematics 4MB3/6MB3 Mathematical Biology

Instructor: David Earn

Lecture 8 Epidemic Data Wednesday 24 January 2018

#### Announcements

- Thanks everyone for doing the contributions survey for Assignment 1.
- Don't stress about the ratings about each other's contributions. The issue is whether some group members did not pull their weight. If somebody didn't try and others had to pick up the slack, that person should be penalized. I will not penalize somebody because they tried but felt they didn't contribute as much to the final document as they could have. Do try to even out the work across the assignments.
- Make sure everyone in your group gets a chance to be in control of the LATEX for one assignment.

### More Announcements!

#### Assignment 2:

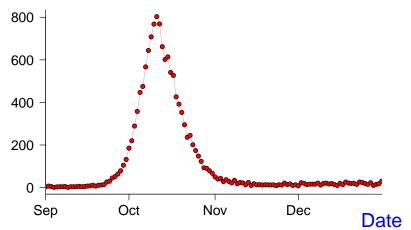
Due Monday 5 February 2018 in class (and by e-mail) at 11:30am.

#### Midterm test:

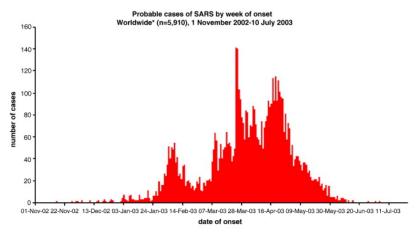
- Date: week of 5–9 March? or 12–16 March?
- Time: TBA
- Location: TBA

### P&I Mortality, Philadelphia, 1918

# **P&I** Deaths

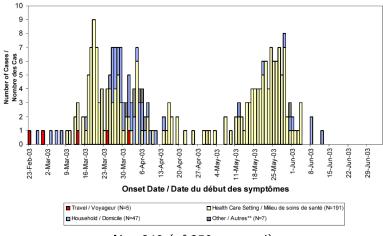


# SARS in 2003 (Worldwide)



\*This graph does not include 2,527 probable cases of SARS (2,521 from Beijing, China), for whom no dates of onset are currently available.

# SARS in 2003 (Toronto)



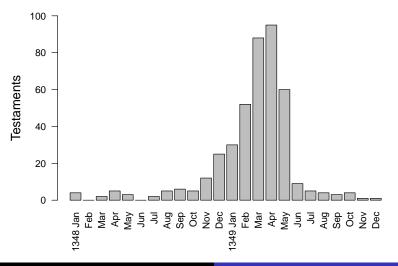
#### N = 249 (of 250 reported)

#### Some SARS Facts

High case fatality

- 1918 flu < 3%
- SARS > 10%
- Long hospital stays
  - Mean time from admission to discharge or death:  $\sim 25$  days in Hong Kong
- 8098 probable cases, 774 deaths
- How bad would it have been if it had not been controlled?

### The Black Death in London, England, 1348–1349

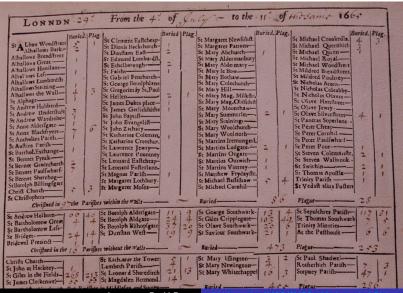


#### London Bill of Mortality, 26 Sept to 3 Oct 1665

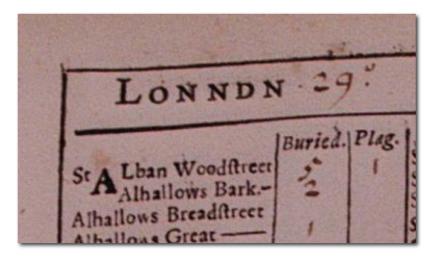
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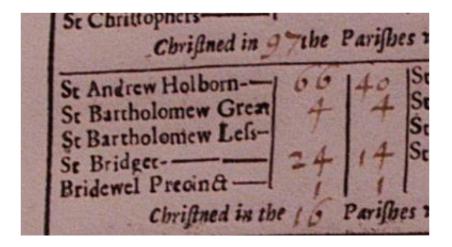
Instructor: David Earn

#### Mortality Bills are typically handwritten

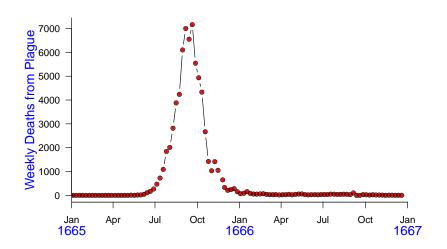


Instructor: David Earn

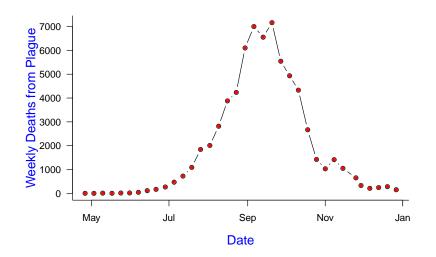




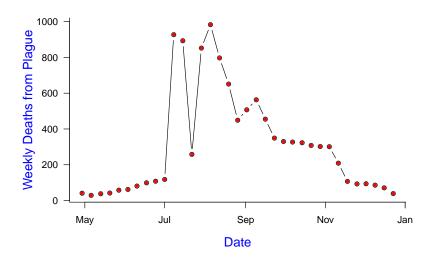
#### The Great Plague of London, 1665



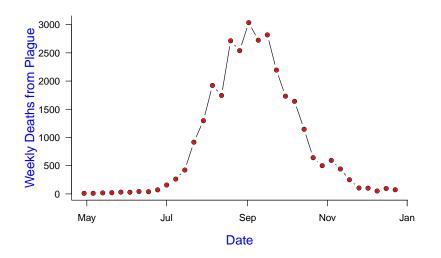
## The Great Plague of London, 1665



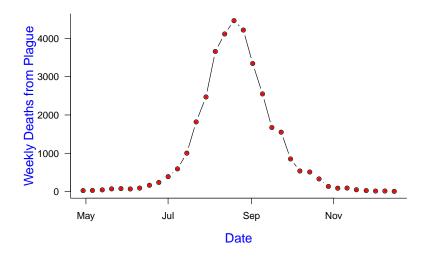
#### London Plague of 1593



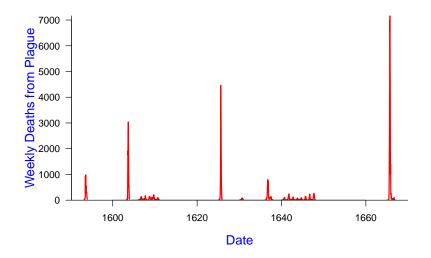
#### London Plague of 1603



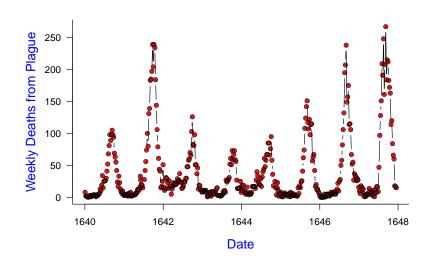
#### London Plague of 1625



#### Weekly Deaths from Plague in London, 1592–1666



# Weekly Plague in London, 1640–1648



#### Some Plague Facts

- Plague epidemics recorded from Roman times to early 1900s.
- $\label{eq:last} \mathbf{I}/3 \mbox{ Europe's population died in "Black Death" of 1348} \\ \mathbf{I} \sim 300 \mbox{ years for the population to reach the same level.}$
- Recently (2011) established (at McMaster!) that the pathogen that caused The Black Death was Yersinia pestis

[Bos et al. 2011, Nature 478, 506-510]

 More recently (2014) established (again at McMaster!) that the pathogen that caused The Plague of Justinian (541–543 AD) was Yersinia pestis

[Wagner et al. 2014, Lancet Infectious Diseases 14, 319-326]

Y. pestis still a concern?

Yes: Rodent reservoir, antibiotic-resistant strains, bioterrorism

**Spatial data** for any plagues? Yes, for London in 1665...

#### Visualization of spatial structure of Great Plague

- GIS encoding of parish boundaries
- Overlay parish boundaries on more modern map for reference
- Colour parishes as they become infected
- Is there evidence for spatial spread or was the spatial pattern random?
- DE low-tech animation...
- CBC high-tech animation...
  - The Nature of Things, 21 August 2014. http://www.cbc.ca/natureofthings/episodes/ secrets-in-the-bones-the-hunt-for-the-black-death-killer



# Mathematics and Statistics

$$\int_{M} d\omega = \int_{\partial M} \omega$$

# Mathematics 4MB3/6MB3 Mathematical Biology

Instructor: David Earn

Lecture 9 Epidemic Data II Friday 26 Jan 2018

#### Announcements

#### Assignment 2:

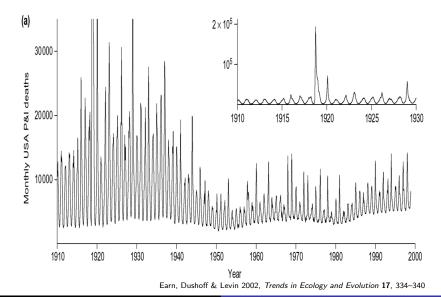
Due Monday 5 February 2018 in class (and by e-mail) at 11:30am.

- Midterm test: We agreed on:
  - Date: Thursday 8 March 2018
  - Time: 7:00pm to 9:00pm
  - Location: TBA

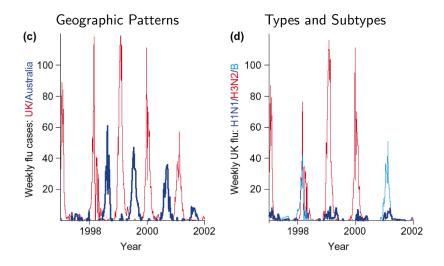
#### Visualization of entire course of the Great Plague

- What happenned after initial spatial spread?
- Visualize full spatial epidemic structure
- Show magnitude of epidemic in each parish with cylinder.
- Epidemic Visualization (EpiVis) software by Junling Ma.

### P&I mortality in U.S.A., 1910–1998



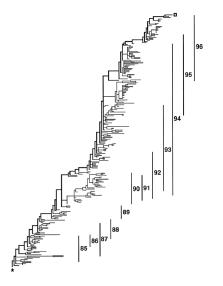
Instructor: David Earn Mathematics 4MB3/6MB3 Mathematical Biology



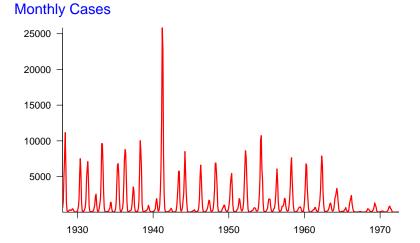
Earn, Dushoff & Levin 2002, Trends in Ecology and Evolution 17, 334-340

#### Influenza Evolution

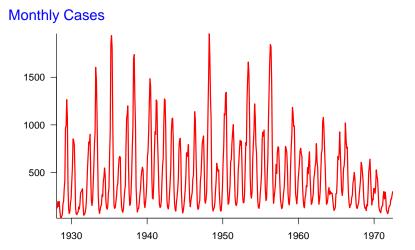
Molecular phylogenetic reconstruction of influenza A/H3N2 evolution, 1985–1996 (Fitch *et al.* 1997)



#### Measles in New York City, 1928–1972

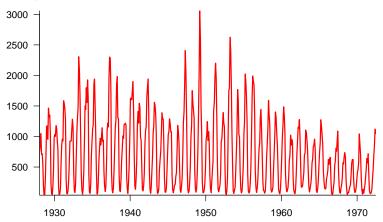


## Mumps in New York City, 1928–1972

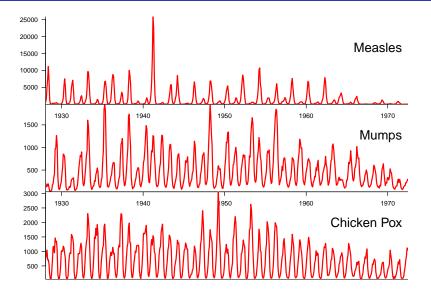


#### Chicken Pox in New York City, 1928–1972

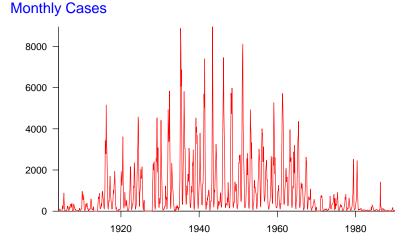
**Monthly Cases** 



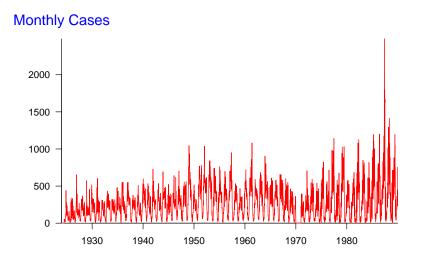
#### Childhood diseases in New York City, 1928–1972



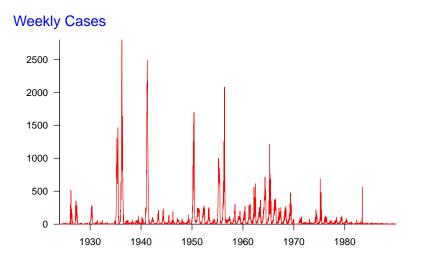
#### Measles in Ontario, 1904–1989



#### Chicken Pox in Ontario, 1924–1989

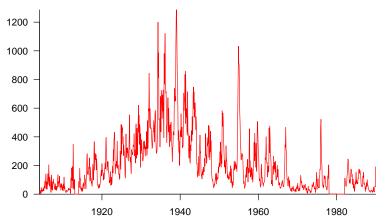


#### Rubella in Ontario, 1924–1989

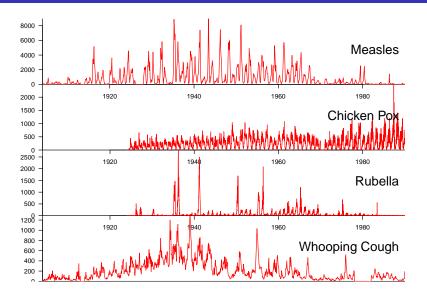


#### Whooping Cough in Ontario, 1904–1989





#### Childhood diseases in Ontario, 1904–1989



## Ontario Disease Notification Data

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## Dominion Bureau of Statistics Disease Notification Data

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Instructor: David Earn

athematics 4MB3/6MB3 Mathematical



## Mathematics and Statistics

$$\int_{M} d\omega = \int_{\partial M} \omega$$

## Mathematics 4MB3/6MB3 Mathematical Biology

Instructor: David Earn

Lecture 10 Epidemic Data III Monday 29 Jan 2018 Comment from TA on Assignment 1:

"For a few of the groups, I would recommend that they look over the work that their group members have done. Question 2c and 2d in particular were closely related and there were a few obvious cases where the students had not communicated with each other"

#### Assignment 2:

Due Monday 5 February 2018 in class (and by e-mail) at 11:30am.

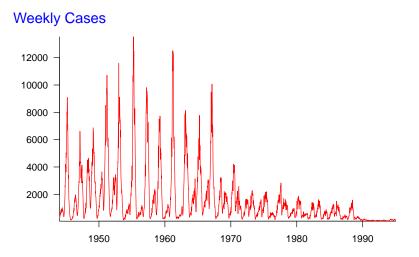
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- Date: Thursday 8 March 2018
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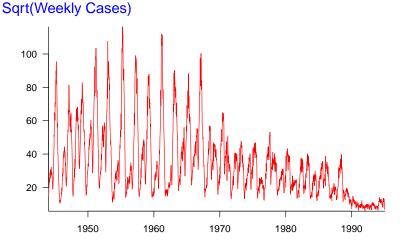
### Recurrent epidemics of childhood infections

- Childhood diseases in New York City, 1928–1972
- Childhood diseases in Ontario, 1904–1989

## Measles incidence in England and Wales, 1944–1995



## Measles incidence in England and Wales, 1944–1995



## Why study measles epidemics?

- ~ 90,000 children died from measles in 2016.
- A major cause of vaccine-preventable deaths.
- Potential impact in developed countries during vaccine scares (e.g., MMR scare in UK in 1990s).
- Understand past patterns
- Predict future patterns
- Manipulate future patterns
- Develop vaccination strategy that can...



### Other reasons to model infectious disease epidemics

Mathematical models make hypotheses and inferences precise

- Give better advice to policymakers
- Make better predictions
- Host-pathogen dynamics are important aspects of ecosystem dynamics
  - Infectious disease models more likely to be successful than predator-prey models
- Excellent data for human infectious diseases
  - Models can be tested!

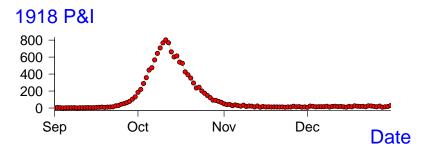
## Modelling population dynamics childhood infections

- The basic SIR model cannot explain recurrent epidemics.
- What should we do?...
  - **1** Get depressed, drop the course.
  - 2 Keep developing models until we can explain recurrent epidemics.
- First, let's talk about tools that allow us to make our questions about time series data more precise.

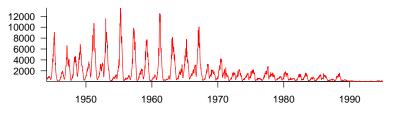
# Epidemic Data Analysis

Instructor: David Earn Mathematics 4MB3/6MB3 Mathematical Biology

## Time Plots of Temporal Epidemic Patterns

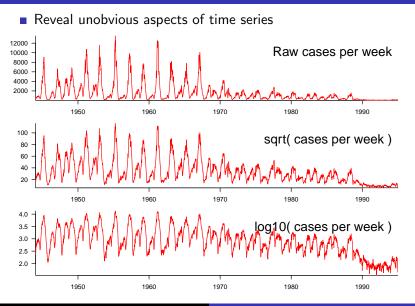


#### Weekly Measles in England and Wales



#### 50/62

### Time Plots of Transformed Data



Instructor: David Earn Mathematics 4MB3/6MB3 Mathematical Biology

- Reveal trends clouded by noise or seasonality
- Moving Average:

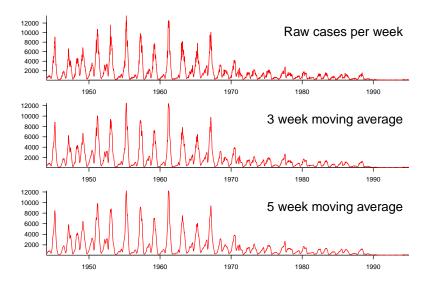
$$x_t \to \frac{1}{2a+1} \sum_{i=-a}^{a} x_{t+i}$$

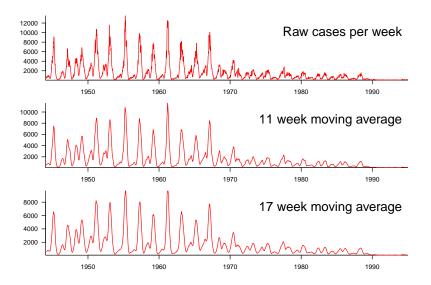
• Replace original data points  $x_t$  with averages of nearby points.

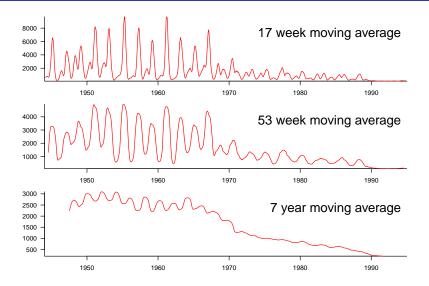
Linear filter:

$$x_t o \sum_{i=-\infty}^{\infty} \lambda_i x_{t+i}$$

- Generalization of moving average.
- Weights  $\lambda_i$  can be nonlinear functions of *i*.







- Recurrent epidemics with number of cases in the past and the future.
- Given *N* pairs of observations of different quantities, {(*x<sub>i</sub>*, *y<sub>i</sub>*) : *i* = 1,..., *N*}, the *correlation coefficient* is defined to be

$$r = \frac{\sum_{i=1}^{N} (x_i - \bar{x})(y_i - \bar{y})}{\sqrt{\sum_{i=1}^{N} (x_i - \bar{x})^2 \sum_{i=1}^{N} (y_i - \bar{y})^2}}$$

where  $\bar{x}$  and  $\bar{y}$  are the means of  $\{x_i\}$  and  $\{y_i\}$ , respectively.

## Correlation

#### Properties of the correlation coefficient:

- $-1 \le r \le 1$  (Proof? Cauchy-Schwarz inequality)
- r = 1 ⇐⇒ all points lie on a line with positive slope ("complete positive correlation")
- $r = -1 \iff$  all points lie on a line with negative slope ("complete negative correlation")
- $r \simeq 0 \implies$  "uncorrelated"
- Interpretation: r<sup>2</sup> is the proportion of the variance in y explained by a linear function of x.

#### Derivations and discussions:

- MathWorld on  $r^2$ , Wikipedia on  $r^2$
- Wikipedia on general coefficient of determination

- Given a single sequence of observations {*x<sub>t</sub>* : *t* = 1,...,*N*}, we can compute the correlation of each observation with the observation *k* time steps in the future.
- Thus, we consider the pairs of observations
   {(x<sub>t</sub>, x<sub>k+t</sub>) : t = 1,..., N k} and define the *autocorrelation coefficient at lag k* to be

$$r_{k} = \frac{\sum_{t=1}^{N-k} (x_{t} - \bar{x}_{1,N-k}) (x_{k+t} - \bar{x}_{k+1,N})}{\sqrt{\sum_{t=1}^{N-k} (x_{t} - \bar{x}_{1,N-k})^{2} \sum_{t=1}^{N-k} (x_{k+t} - \bar{x}_{k+1,N})^{2}}}$$

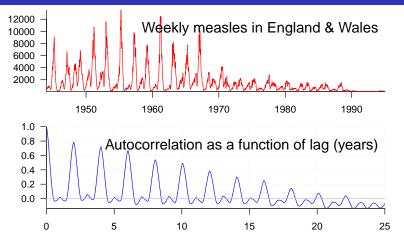
where  $\bar{x}_{1,N-k}$  and  $\bar{x}_{k+1,N}$  are the means of first and last N-k observations, respectively.

If number of observations N is large and lag  $k \ll N$  then

$$r_k \simeq rac{\sum_{t=1}^{N-k} (x_t - ar{x})(x_{k+t} - ar{x})}{\sum_{t=1}^{N} (x_t - ar{x})^2}$$

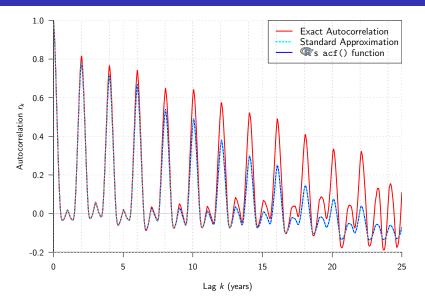
- Approximation of  $r_k$  is worse for larger lags k
- Plot of autocorrelation r<sub>k</sub> as a function of lag k is called the correlogram.

## Correlogram



Peaks in correlogram ⇒ periodicities in original time series.
 Correlograms of temporal segments are often informative.

## Correlogram: exact vs. approximate $r_k$



## Spectral Density

- Can we compute the dominant periods in the time series? (Rather than estimating them by eye from the correlogram.)
- Express the time series as a Fourier series:

$$x_t = a_0 + \left(\sum_{p=1}^{(N/2)-1} \left(a_p \cos \omega_p t + b_p \sin \omega_p t\right)\right) + a_{N/2} \cos \pi t \,,$$

where  $\omega_p = 2\pi p/N$ .

Compute the *Fourier coefficients* {a<sub>p</sub>}, {b<sub>p</sub>} by taking inner products with cos ω<sub>p</sub>t and sin ω<sub>p</sub>t.

## Spectral Density

Fourier coefficients of x<sub>t</sub> are:

$$a_0 = \bar{x} = \frac{1}{N} \sum_t x_t ,$$
  

$$a_p = \frac{2}{N} \sum_t x_t \cos \omega_p t , \qquad b_p = \frac{2}{N} \sum_t x_t \sin \omega_p t ,$$
  

$$a_{N/2} = \frac{1}{N} \sum_t (-1)^t x_t ,$$

where sum is over observation times.

• Estimated power spectral density (PSD) at frequency  $\omega_p$  is\*:

$$I(\omega_p) = rac{N}{4\pi} \left( a_p^2 + b_p^2 
ight)$$

\*The normalization by  $N/4\pi$  is the convention chosen by Chatfield (2004, "Analysis of Time Series: An Introduction"). Other normalization conventions are also in common use.