

3 Epidemic Data



Mathematics
and Statistics

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

Mathematics 4MB3/6MB3 Mathematical Biology

Instructor: David Earn

Lecture 3
Epidemic Data
Monday 23 September 2019

Announcements

- You should have received an invitation to do the [contributions survey for Assignment 1](#). Please do it TODAY (e.g., during the mid-class break).
- 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 7 October 2019 by e-mail before class.

- **Midterm test:**

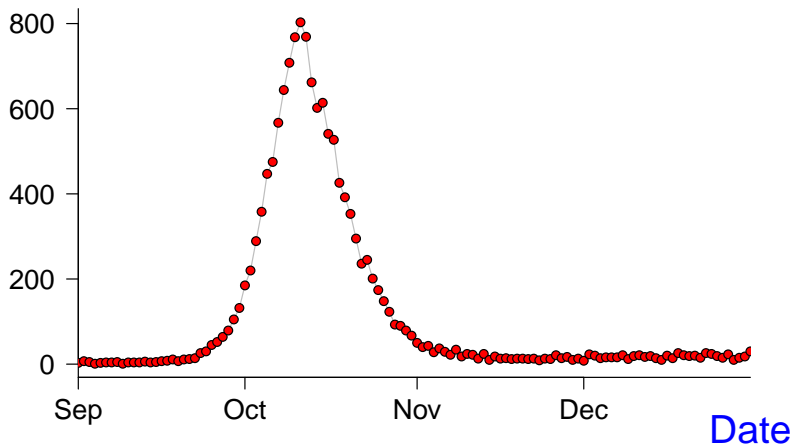
- *Date:* Monday 4 November 2019
- *Time:* 11:30am–1:30pm
- *Location:* in class, ETB-237

Attendance

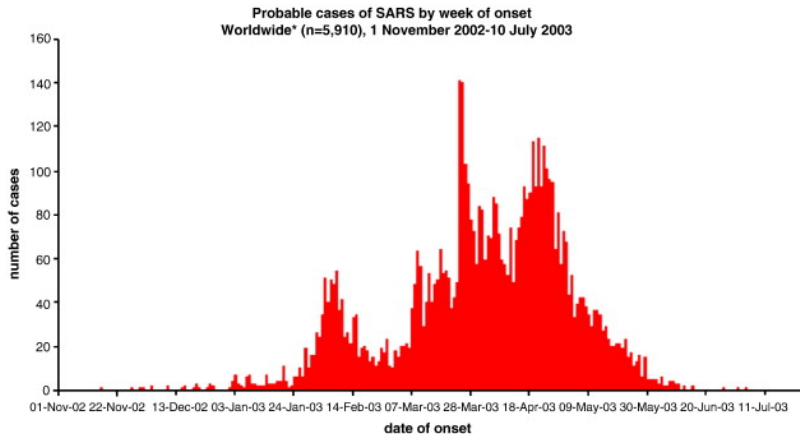
Who is here?

P&I Mortality, Philadelphia, 1918

P&I Deaths

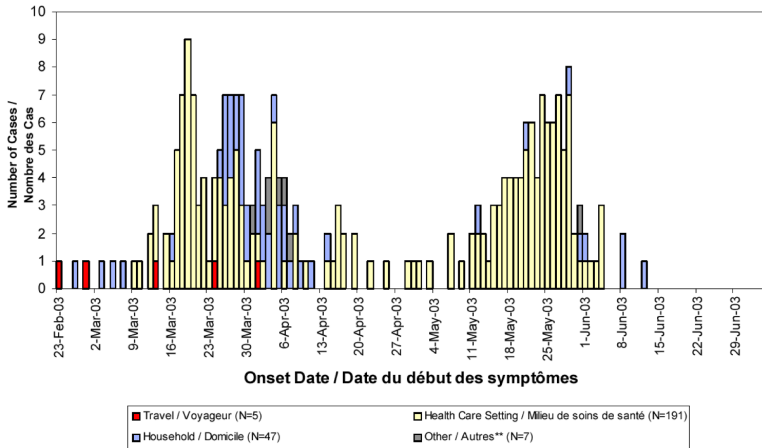


SARS in 2003 (Worldwide)



*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)

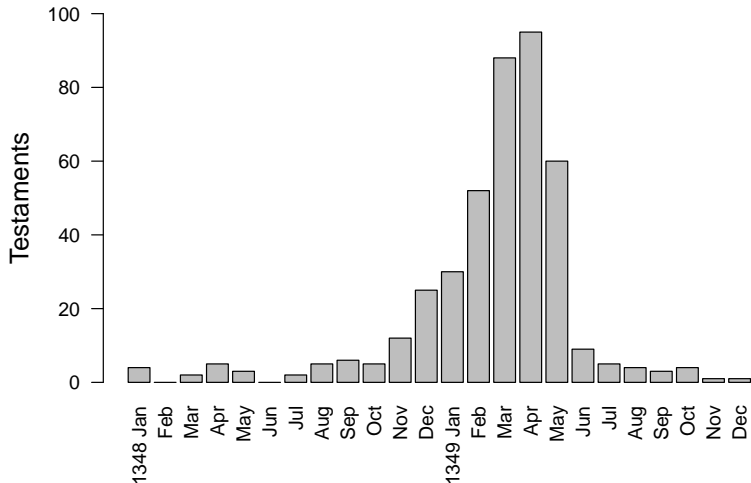


$N = 249$ (of 250 reported)

Some SARS Facts

- High case fatality
 - 1918 flu $< 3\%$
 - SARS $> 10\%$
- Long hospital stays
 - Mean time from admission to discharge or death:
~ 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

A handwritten table from the London Bill of Mortality, 26 Sept to 3 Oct 1665. The table lists various ailments and their corresponding counts. The ailments are listed on the left, and the counts are listed on the right. The ailments are: Frighted, Gowt, Grief, Griping in the Guts, Jaundies, Imposthume, Infants, Kingsevil, Meagrome, Plague, Purples, and Rickets. The counts are: 1, 1, 3, 35, 2, 8, 9, 2, 2, 5533, and 2.

Frighted	1
Gowt	1
Grief	3
Griping in the Guts	35
Jaundies	2
Imposthume	8
Infants	9
Kingsevil	2
Meagrome	2
Plague	5533
Purples	2
Rickets	

Mortality Bills are typically handwritten

LONDON 29 th From the 4 th of July to the 11 th of August 1665			
Buried.	Plag.	Buried.	Plag.
St Alban Woodstreet	2	1	
Alhallows Bark			
Alhallows Breadstreet	1		
Alhallows Great			
Alhallows Honilane	1		
Alhallows Lumbardstr	1		
Alhallows Staining	4	3	
Alhallows the Wall	1		
St Alphage			
St Andrew Hubbard	3		
St Andrew Underthafe	1		
St Andrew Wardrobe	7		
St Anne Aldersgate	1		
St Anne Blackfyers	7	6	
St Antholiers Parish	7		
St Austins Parish			
St Barthol. Exchange	1		
St Bennet Fynck			
St Bennet Gracechurch	7		
St Bennet Paulwharf			
St Bennet Sherchog			
St Borolgh Billingsgate			
Christ Church	5	3	
St Christophers			
Buried. Plag.		Buried. Plag.	
St Clement Eastcheap		1	
St Dionis Backchurch		2	
St Dunstons East		2	
St Edmund Lumbardstr		1	
St Ethelborough		2	
St Faiths		1	
St Gabriel Fenchurch		1	
St George Botolphlane		2	1
St Gregories by St. Paul		1	
St Hellen		1	
St James Dukes place		1	
St James Garlickhithe		1	
St John Baptist			
St John Evangelist			
St John Zichary			
St Katharine Coleman		1	
St Katharine Creechur			
St Lawrence Jewry			
St Lawrence Pountney			
St Leonard Eastcheap			
St Leonard Fosterlane			
St Magnus Parish		1	
St Margaret Lothbury			
St Margaret Moses			
St Margaret Newfishst			
St Margaret Pattons			
St Mary Abchurch	1		
St Mary Aldermanbury			
St Mary Alde mary			
St Mary le Bow			
St Mary Bothaw			
St Mary Colechurch			
St Mary Hill			
St Mary Mag. Milkstr.			
St Mary Mag. Oldfishst			
St Mary Mounthaw			
St Mary Summerset	2	1	
St Mary Staining			
St Mary Woolchurch			
St Mary Woolnoth			
St Martins Iremongerl			
St Martins Ludgate	2	1	
St Martins Orgars			
St Martins Outwich	1		
St Martins Vintrey	1		
St Matthew Frydaystr.			
St Michael Bassishaw	5	4	
St Michael Cornhil			
St Michael Crookedla	4	3	
St Michael Queenhit	1		
St Michael Quern			
St Michael Royal			
St Michael Woodstreet			
St Mildred Breadstreet			
St Mildred Poultry			
St Nicholas Acons			
St Nicholas Coleabby			
St Nicholas Olaves			
St Olave Hartstreet			
St Olave Jewry			
St Olave Silverstreet	4	1	
St Pancras Soperlane			
St Peter Cheap			
St Peter Cornhil			
St Peter Paulwharf			
St Peter Poor			1
St Steven Colemanstr.			2
St Steven Walbrook			1
St Swithin			2
St Thomas Apottle			1
Trinity Parish			1
St Vedast alias Fosters			
Buried. Plag.		Buried. Plag.	
86		28	
Christened in the 7 th the Parishes within the walls			
St Andrew Holborn	66	40	
St Bartholomew Great	7	4	
St Bartholomew Leli			
St Bridget	24	17	
Bridewell Precinct	1		
St Borolgh Aldergate	11	9	
St Borolgh Aldgate	24	4	
St Borolgh Bishopsgate	37	20	
St Dunstan West	19	9	
St Giles Southwark	13	4	
St Giles Cripplegate	105	49	
St Olave Southwark	20	6	
St Saviour Southwark	21	1	
St Sepulchres Parish			117
St Thomas Southwark			7
Trinity Minorities			6
At the Pesthouse			6
Buried		Buried	
473		273	
Christened in the 15 th Parishes without the walls			
Christ's Church			
St John at Hackney	1		
St Giles in the Fields	208	215	
St James Clerkenwell	8	43	
St Kath. near the Tower	7	1	
Lambeth Parish	7		
St Leonar d Shoreditch	21	13	
St Magdalen Bermond.	14		
St Mary Islington	3	2	
St Mary Newington	7		
St Mary Whitechappel	16	3	
St Paul Shadwell			7
Rotherhithe Parish			3
Stepney Parish			47
Buried		Buried	
455		280	

But handwriting is usually very clear



LONDON 29th

	Buried.	Plag.
St Alban Woodstreet	2	1
Alhallows Bark.	2	
Alhallows Breadstreet	1	
Alhallows Great		

But handwriting is usually very clear

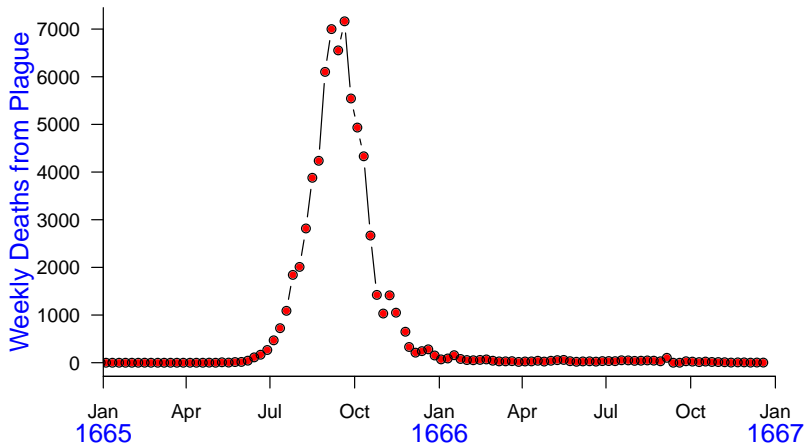
St Christophers

Christned in 97 the Parishes

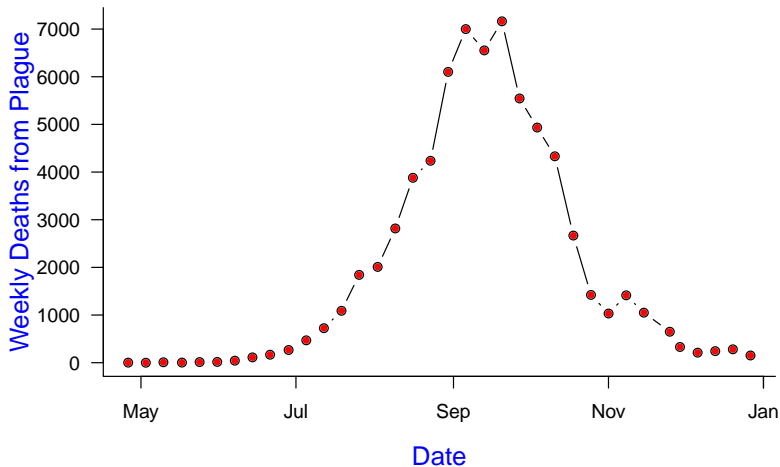
St Andrew Holborn	66	40	St
St Bartholomew Great	7	4	St
St Bartholomew Less			St
St Bridget	24	17	St
Bridewel Precinct	1	1	

Christned in the 16 Parishes

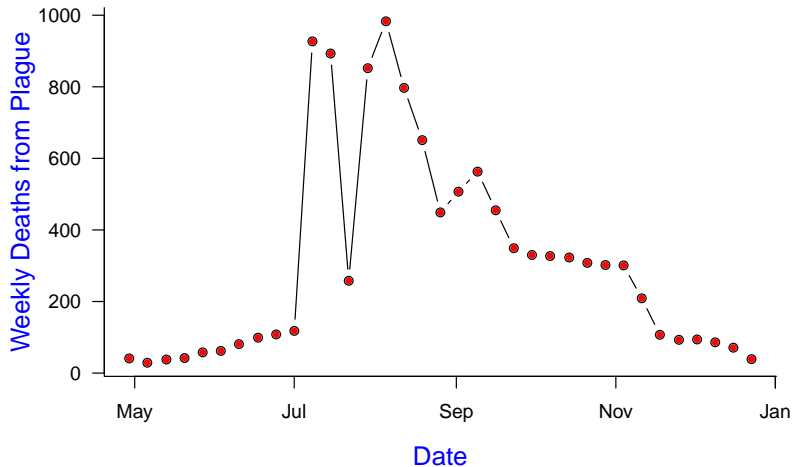
The Great Plague of London, 1665



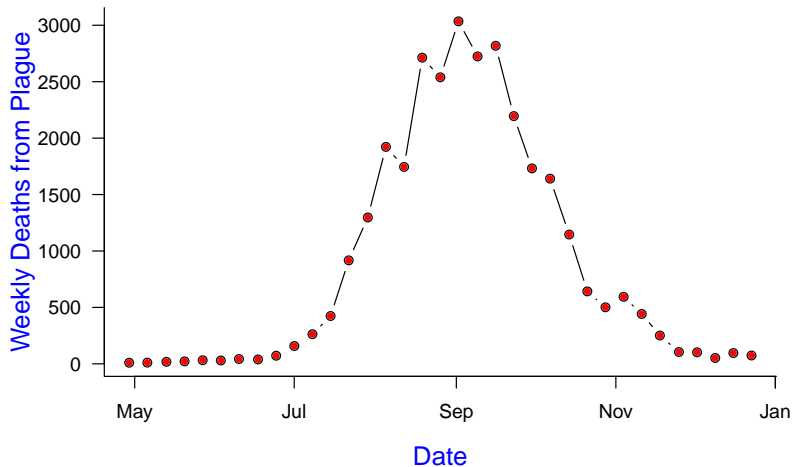
The Great Plague of London, 1665



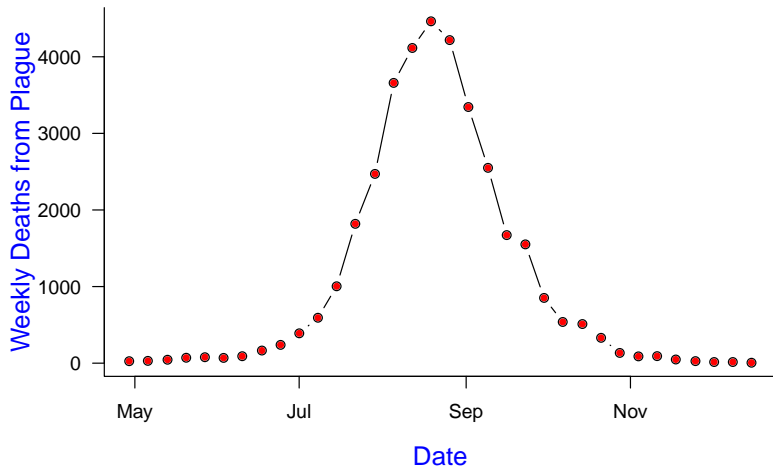
London Plague of 1593



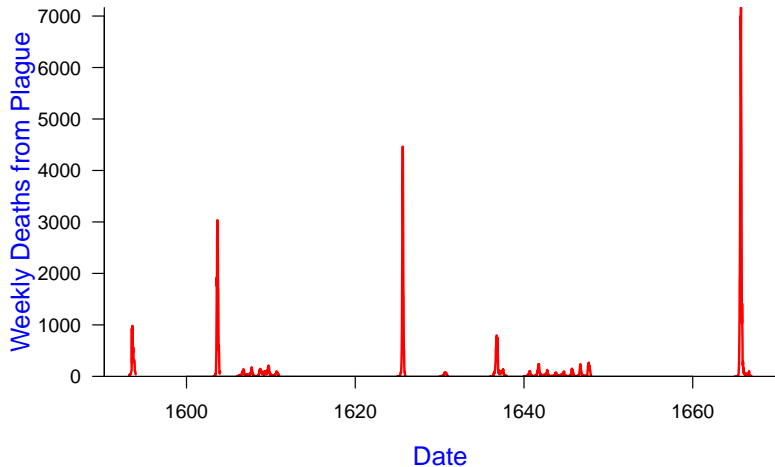
London Plague of 1603



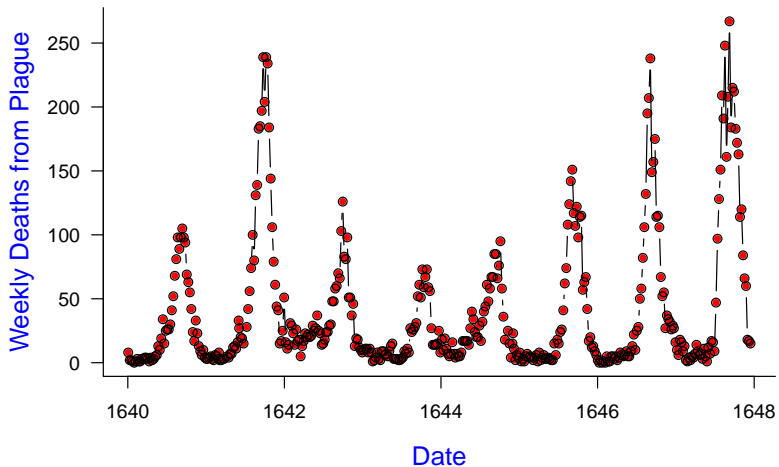
London Plague of 1625



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.
- $\gtrsim 1/3$ Europe's population died in "Black Death" of 1348
 - ~ 300 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>

Please consider. . .

5 minute *Student Respiratory Illness Survey:*

<https://surveys.mcmaster.ca/limesurvey/index.php/893454>

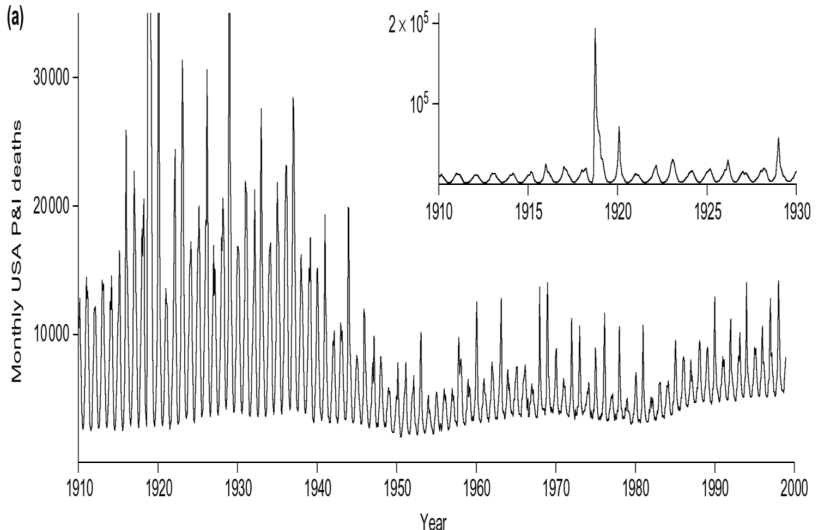
Please complete this anonymous survey to help us monitor the patterns of respiratory illness, over-the-counter drug use, and social contact within the McMaster community. There are no risks to filling out this survey, and your participation is voluntary. You do not need to answer any questions that make you uncomfortable, and all information provided will be kept strictly confidential. Thanks for participating.

–Dr. Marek Smieja (Infectious Diseases)

Visualization of entire course of the Great Plague

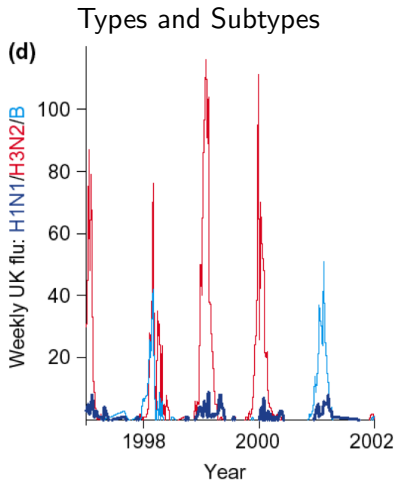
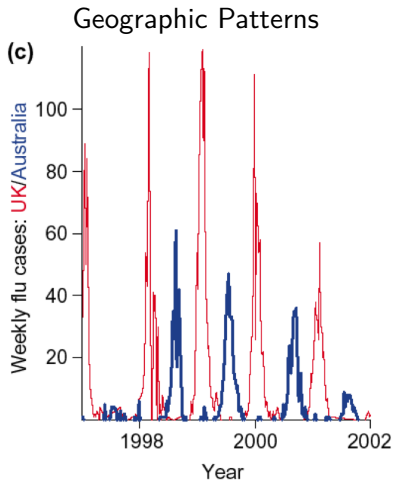
- What happened after initial spatial spread?
- Visualize full spatial epidemic structure
- Show magnitude of epidemic in each parish with cylinder.
- [Epidemic Visualization](#) (EpiVis) software by Junling Ma.

P&I mortality in U.S.A., 1910–1998



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

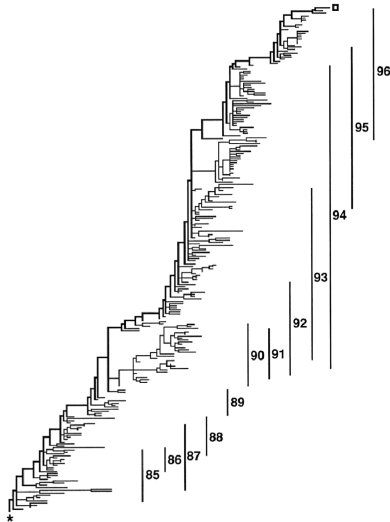
Influenza Incidence Patterns (lab confirmed)



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

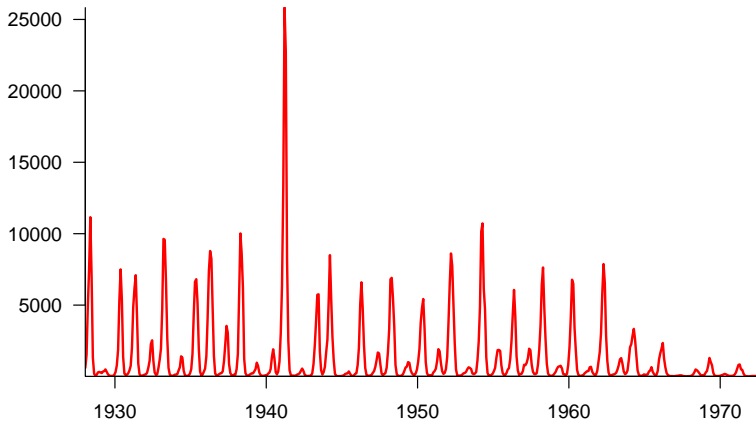
Influenza Evolution

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



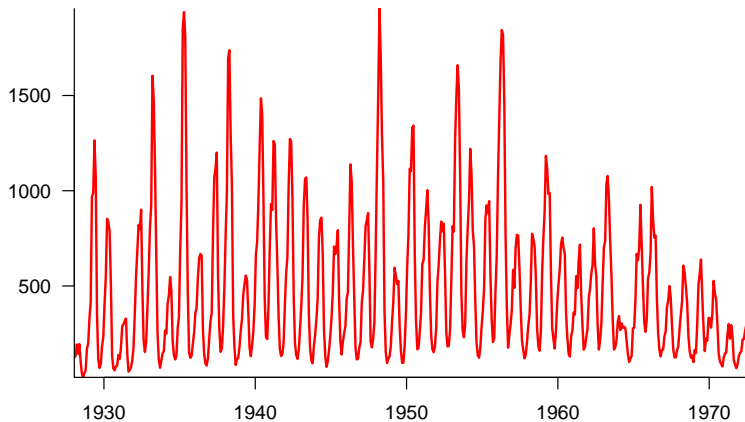
Measles in New York City, 1928–1972

Monthly Cases



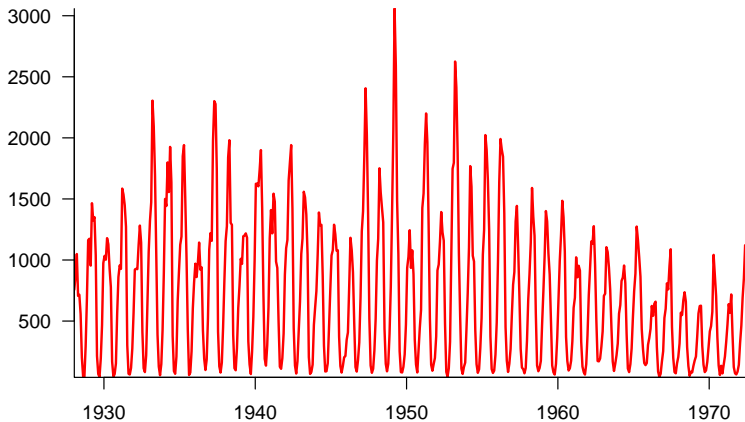
Mumps in New York City, 1928–1972

Monthly Cases

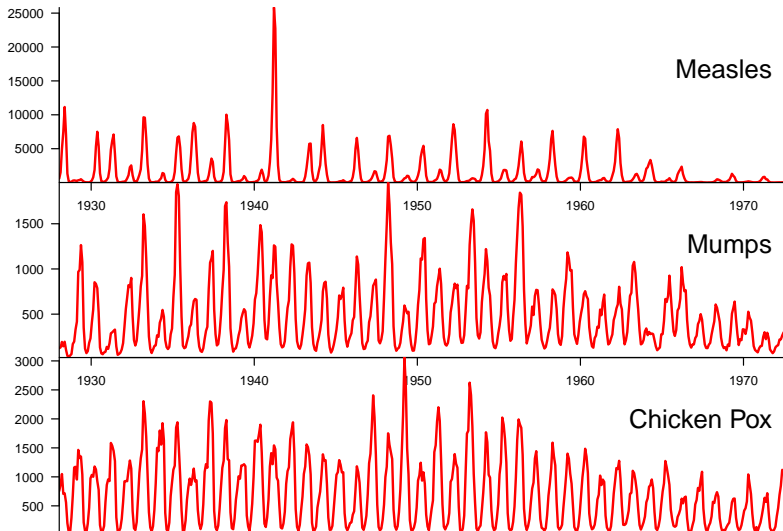


Chicken Pox in New York City, 1928–1972

Monthly Cases

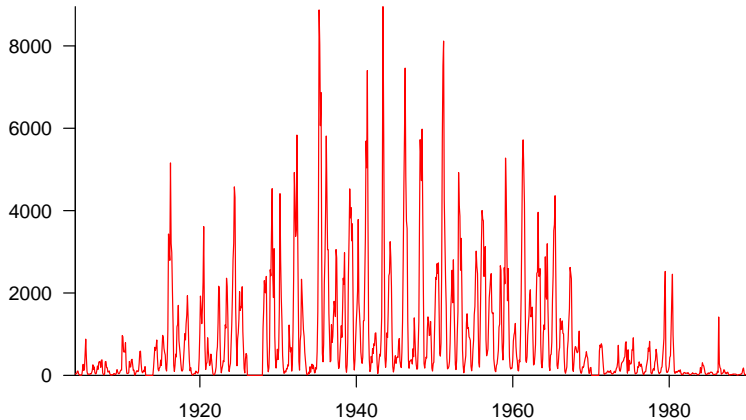


Childhood diseases in New York City, 1928–1972



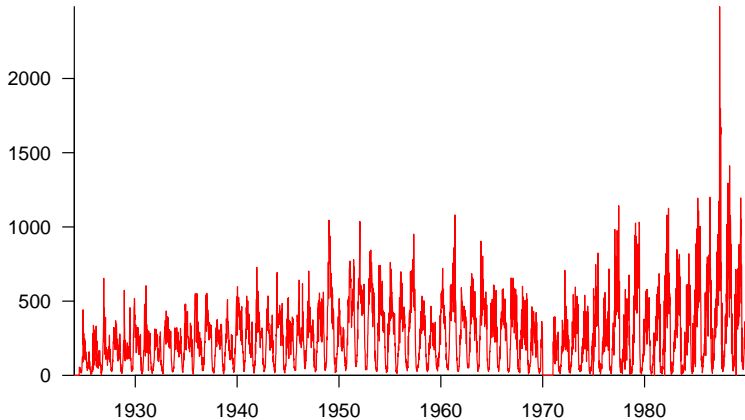
Measles in Ontario, 1904–1989

Monthly Cases



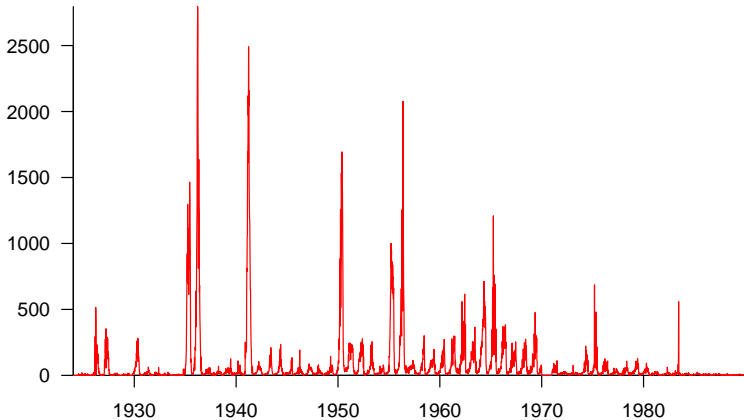
Chicken Pox in Ontario, 1924–1989

Monthly Cases



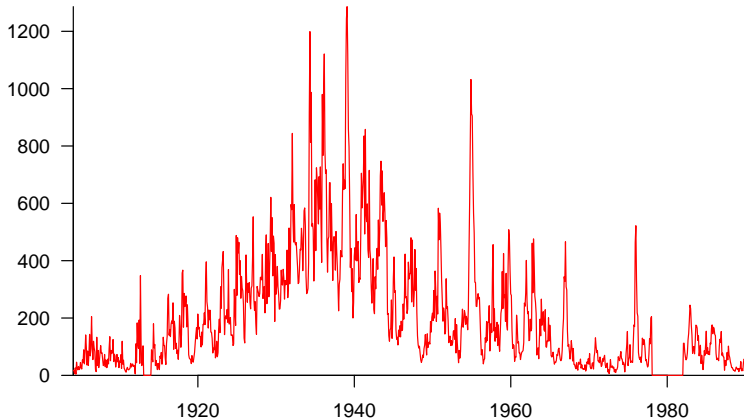
Rubella in Ontario, 1924–1989

Weekly Cases

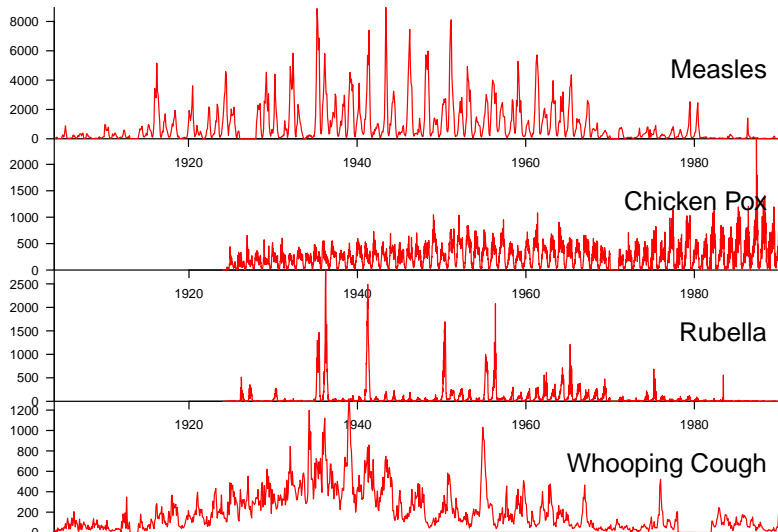


Whooping Cough in Ontario, 1904–1989

Monthly Cases



Childhood diseases in Ontario, 1904–1989



Ontario Disease Notification Data

Province of O

YEAR: 1939 * COUNTY..... MUNICIPALITY.....

Month	Week End.	CSM		C.P.		DIP.		DYS. A/B		EN. LETH.		ERY.S.		G.C.		FLU.		INF. JAUN.		G.M.		MEAS.		MUMPS		PARA. TYPH.	
		C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D	C	D
		Jan.	7	1		452	1	3	0	1	0			5	1	101	0	8	1	17	0	17	0	670	1	56	0
	14	2	2	1490	0	8	0					5	0	82	0	21	1	18	0	18	0	850	0	92	0	1	0
	21	3	2	1511	0	9	3			0	1	5	0	89	0	16	2	26	0	22	0	932	0	98	0		
	28	4	1	0384	0	2	0					2	0	73	0	164	0	10	0	28	0	933	1	24	0		
	Total	5	2	1937	1	22	3	1	0	0	1	17	1	343	0	208	4	71	0	85	0	3385	2	210	0	3	0
Feb.	4	5		355	0	7	1	1	0			3	0	83	0	57	1	24	0	25	0	1335	1	110	0	2	0
	11	6	2	1363	0	1	0	1	0			7	0	82	0	27	1	47	1	29	0	1033	0	91	0	1	0
	18	7	2	1354	1	2	0					4	1	68	0	103	1	35	0	44	0	1161	0	59	0		
	25	8	1	1308	0	2	0					9	0	56	0	177	0	19	0	28	0	999	0	73	0		
	Total	5	3	1388	1	14	1	2	0			23	1	349	0	367	3	19	1	126	0	5788	1	338	0	2	0
Mar.	4	9	1	271	0	7	1	3	1			7	0	93	0	114	19	21	0	40	0	1131	2	109	0	1	0
	11	10		239	0	7	0	2	0			8	1	61	0	137	8	31	0	32	0	845	0	91	0	2	0
	18	11		166	0							6	0	66	0	122	6	5	0	59	0	969	2	69	0	1	0
	25	12	1	236	0	1	0	1	0			7	0	63	0	306	16	9	0	20	0	879	0	170	0	2	0
	Total	4	3	912	0	15	1	6	1			28	1	283	0	623	49	66	0	151	0	3824	4	383	0	34	0
Apr.	1	13	2	0139	0	3	0	1	0			8	0	95	0	667	6	1	0	24	0	950	0	89	0	3	0
	8	14	2	0162	0	1	0	1	0			5	0	67	0	731	22			14	0	790	0	65	0	1	0
	15	15	2	0108	0	1	0			0	1	11	0	41	0	529	16	2	0	16	0	745	0	56	0		
	22	16	5	1134	0	2	0	1	0	1	1	6	0	64	0	245	8	2	0	26	0	845	0	54	0		
	29	17	1	1167	0	4	0	2	0	2	1	3	0	55	0	124	9	2	1	13	0	746	1	120	0		
	Total	6	2	710	0	11	0	5	0	3	3	33	0	372	0	234	61	7	1	99	0	4016	1	384	0	4	0
	6	18	2	0104	0	1	0	2	0			4	0	71	0	76	3	1	0	14	0	877	0	63	0	3	0

Dominion Bureau of Statistics Disease Notification Data

VITAL STATISTICS BRANCH - COMMUNICABLE DISEASE SECTION

Cases of *H. Hooping Cough* Reported by Provincial Health Departments, Year *1924*

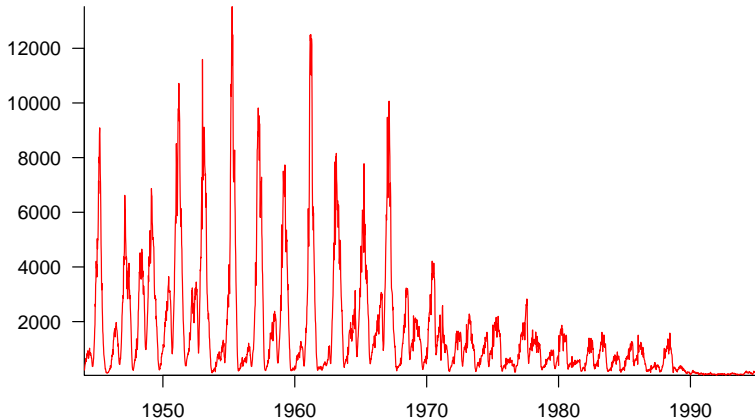
WEEK ENDING	P.E.I.		N.S.		N.B.		QUE.		ONT.		MAN.		SASK.		ALTA.		B.C.		CANADA	
	WHS	NOT	WHS	NOT	WHS	NOT	WHS	NOT	WHS	NOT	WHS	NOT	WHS	NOT	WHS	NOT	WHS	NOT	WHS	NOT
1 JAN 5			11										1							12
2 12			29										18							49
3 19			37										32							69
4 26			75	52			68	181	36	13	64			97		4			88	602
5 FEB 2			12		1								53							66
6 9			5										40							45
7 16			31										14							45
8 23			2	50	1	2	267	202	48	4	111			116		1			7	797
9 MAR 1			2										21							23
10 8													9							9
11 15			3										11							14
12 22			60										34							94
13 29			2	61			144	140	52	15	90			15		7			17	515
14 APR 5			9										11							20
15 12			1										12							13
16 19			26		1								8							35
17 26			14	50	3	4	42	140	37	16	47			67		5			33	394
18 MAY 3			26										2							28

Recurrent epidemics of childhood infections

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

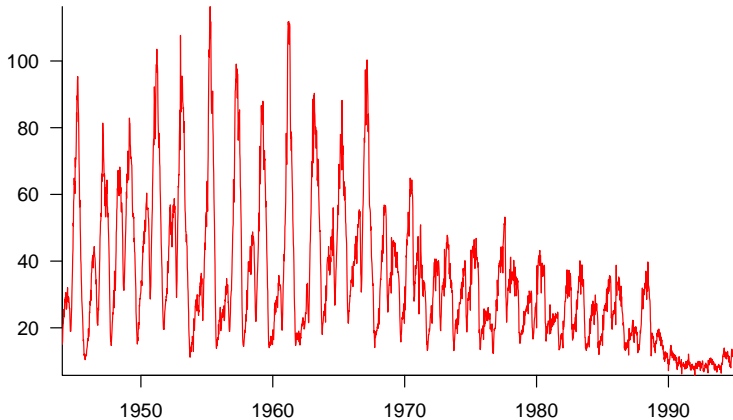
Measles incidence in England and Wales, 1944–1995

Weekly Cases



Measles incidence in England and Wales, 1944–1995

Sqrt(Weekly Cases)



Why study measles epidemics?

- In 2017, $\sim 110,000$ deaths from measles
- 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...

**BRING
MEASLES
TO ITS
KNEEZLES!**



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 of childhood infections

- The basic SIR model cannot explain recurrent epidemics.
- What should we do? . . . The usual options:
 - 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.

Please consider. . .

5 minute *Student Respiratory Illness Survey:*

<https://surveys.mcmaster.ca/limesurvey/index.php/893454>

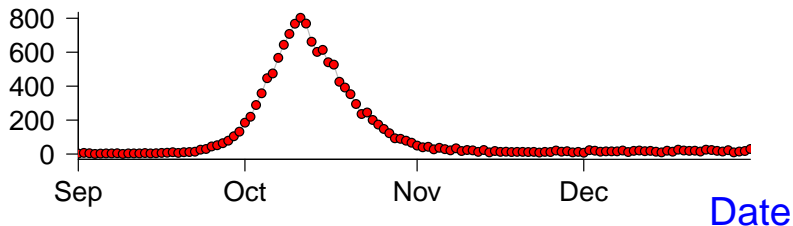
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–Dr. Marek Smieja (Infectious Diseases)

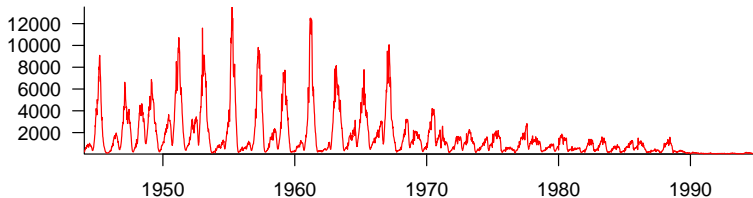
Epidemic Data Analysis

Time Plots of Temporal Epidemic Patterns

1918 P&I

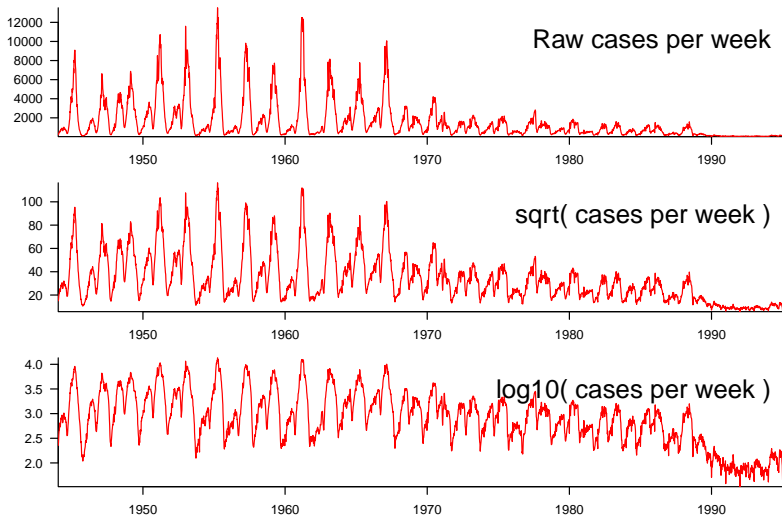


Weekly Measles in England and Wales



Time Plots of Transformed Data

- Reveal unobvious aspects of time series



Times Plots of Smoothed Data

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

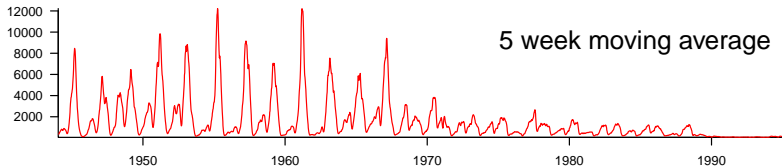
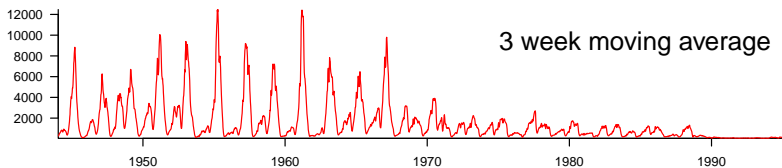
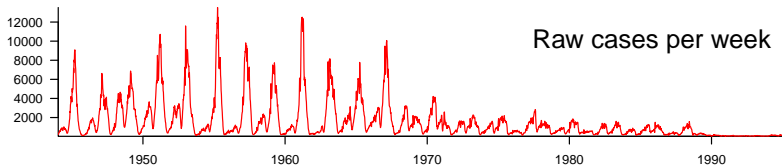
$$x_t \rightarrow \frac{1}{2a+1} \sum_{i=-a}^a x_{t+i}$$

- Replace original data points x_t with averages of nearby points.
- *Linear filter:*

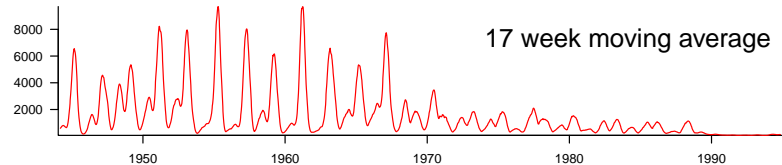
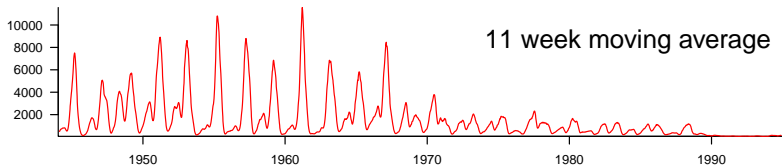
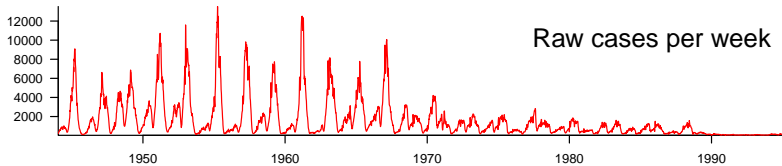
$$x_t \rightarrow \sum_{i=-\infty}^{\infty} \lambda_i x_{t+i}$$

- Generalization of moving average.
- *Weights* λ_i can be nonlinear functions of i .

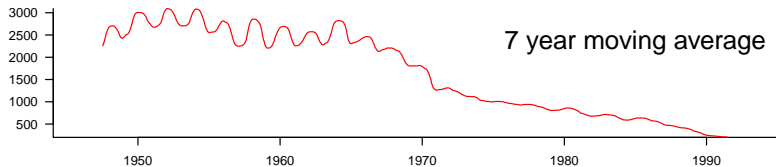
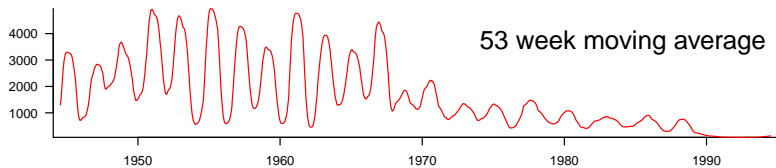
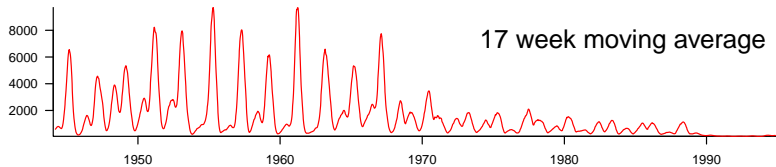
Times Plots of Smoothed Data



Times Plots of Smoothed Data



Times Plots of Smoothed Data



Correlation

- Recurrent epidemics \implies number of cases now is correlated with number of cases in the past and the future.
- Given N pairs of observations of different quantities, $\{(x_i, y_i) : i = 1, \dots, N\}$, 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:

- $-1 \leq r \leq 1$ (Proof? [Cauchy-Schwarz inequality](#))
- $r = 1 \iff$ 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^2 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](#)

Autocorrelation

- Given a single sequence of observations $\{x_t : t = 1, \dots, N\}$, we can compute the correlation of each observation with the observation k time steps in the future.
- Thus, we consider the pairs of observations $\{(x_t, x_{k+t}) : t = 1, \dots, N - k\}$ 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.

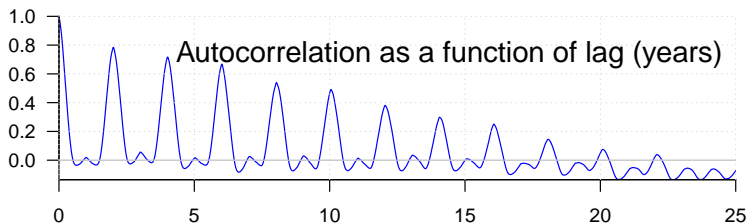
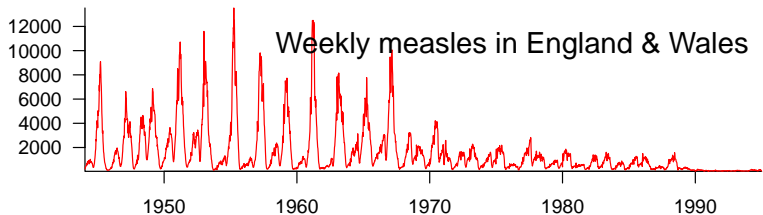
Autocorrelation

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

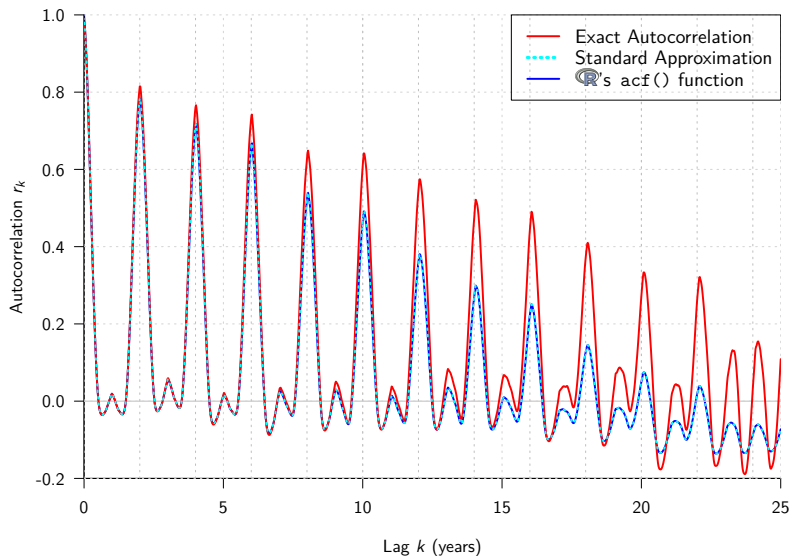
$$r_k \simeq \frac{\sum_{t=1}^{N-k} (x_t - \bar{x})(x_{k+t} - \bar{x})}{\sum_{t=1}^N (x_t - \bar{x})^2}$$

- Approximation of r_k is worse for larger lags k
- Plot of autocorrelation r_k as a function of lag k is called the *correlogram*.

Correlogram



- Peaks in correlogram \implies 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](#):

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

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

- Compute the [Fourier coefficients](#) $\{a_p\}$, $\{b_p\}$ by taking inner products with $\cos \omega_p t$ and $\sin \omega_p t$.

Spectral Density

- Fourier coefficients of x_t are:

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

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

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

where sum is over observation times.

- Estimated **power spectral density (PSD)** at frequency ω_p is^{*}:

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

^{*}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.

Please consider. . .

5 minute *Student Respiratory Illness Survey:*

<https://surveys.mcmaster.ca/limesurvey/index.php/893454>

Please complete this anonymous survey to help us monitor the patterns of respiratory illness, over-the-counter drug use, and social contact within the McMaster community. There are no risks to filling out this survey, and your participation is voluntary. You do not need to answer any questions that make you uncomfortable, and all information provided will be kept strictly confidential. Thanks for participating.

–Dr. Marek Smieja (Infectious Diseases)

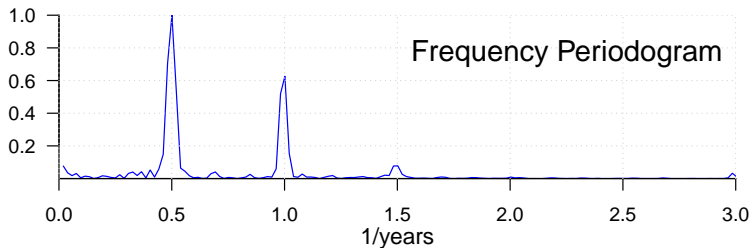
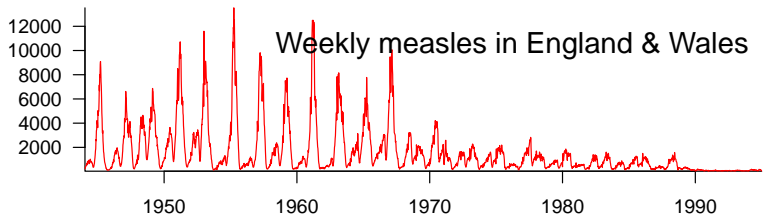
Spectral Density

- There are many different ways to express the **power spectral density** (aka **power spectrum**).
- Most common/useful equivalence is that the power spectrum is the **discrete Fourier transform** of the **correlogram**:

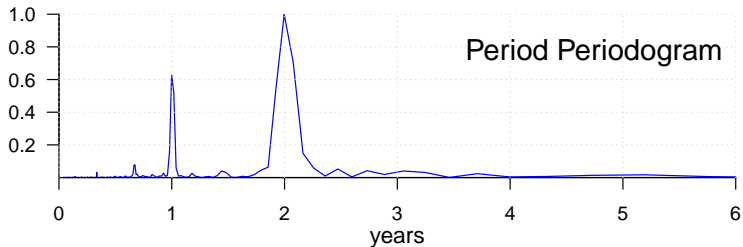
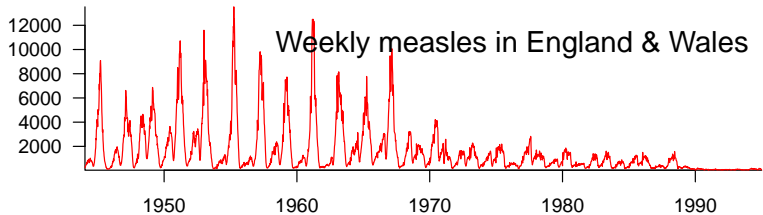
$$I(\omega_p) = \frac{1}{\pi} \left(r_0 + 2 \sum_{k=1}^{N-1} r_k \cos \omega_p k \right)$$

- Plot of estimated power spectrum as a function of frequency ω_p is called the **frequency periodogram** or just the **periodogram**.

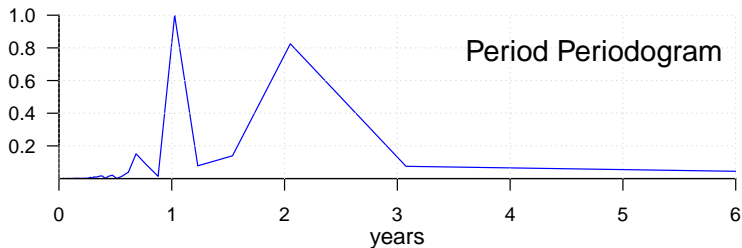
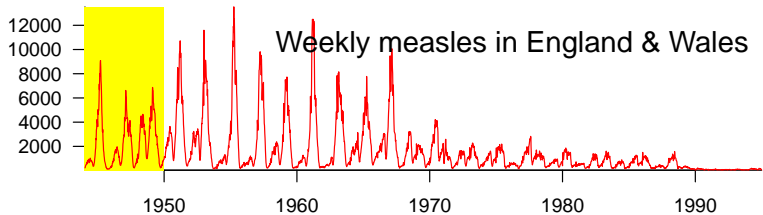
Spectral Density



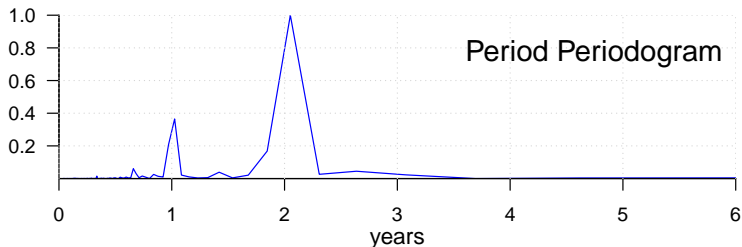
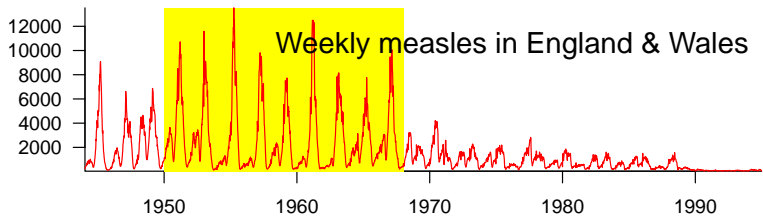
Spectral Density



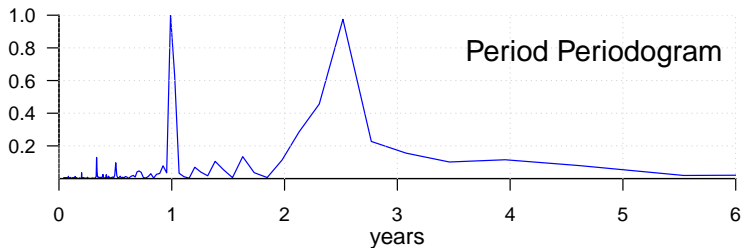
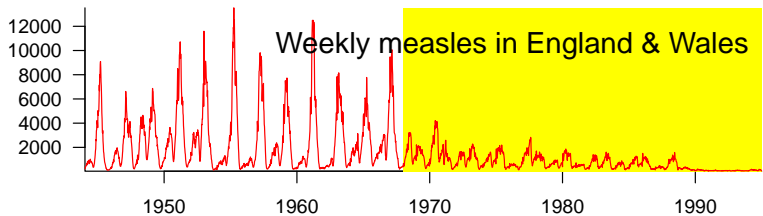
Spectral Density of Temporal Segments



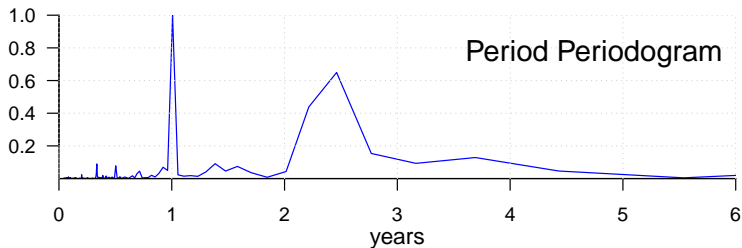
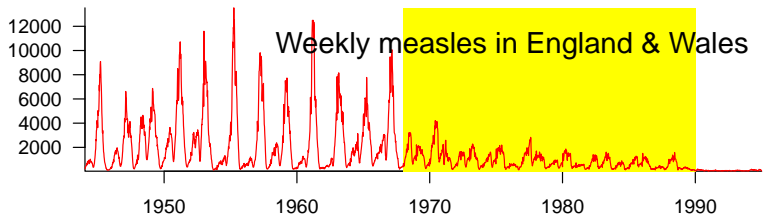
Spectral Density of Temporal Segments



Spectral Density of Temporal Segments



Spectral Density of Temporal Segments



Spectral Density Properties

- Periodogram is discrete Fourier transform of correlogram
- Same information in correlogram and periodogram
- Periodogram usually easier to interpret
- In \mathbb{R} , calculate power spectrum with `spectrum()`
- The power spectrum $I(\omega_p)$ partitions the variance in the time series with respect to frequency ω_p .
 - Parseval's theorem implies $\frac{1}{N} \sum_t (x_t - \bar{x})^2 = \frac{1}{2\pi N} \sum_{p>0} I(\omega_p)$.
But $\frac{1}{N} \sum_t (x_t - \bar{x})^2 = \text{Var}\{x_t\}$, hence $I(\omega_p)/(2\pi N)$ is the proportion of the variance in the time series associated with period $2\pi/\omega_p$.
[For details, see [Chatfield \(2004\)](#).]

Basic Time Series Analysis of Epidemic Data

