



**SPSAS** Epidemic  
Preparedness

# Statistical modelling for infectious diseases

## Part 1: Surveillance data and modelling foundation


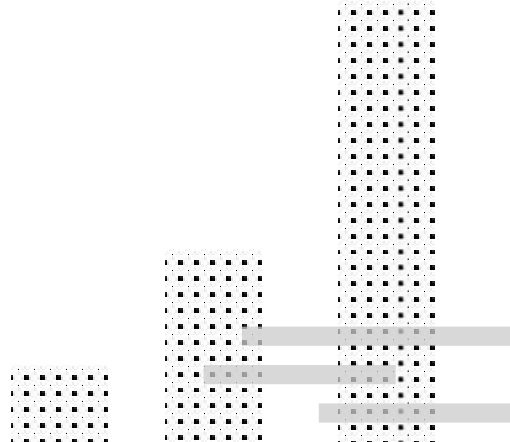
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# Summary

- Epidemiological Surveillance data
    - Descriptive analyses
  - Foundation
    - Reporting uncertainty
    - Bayesian approach
  - Predictive models
    - Usual model assumptions
- 
- 

# Epidemiological Surveillance data



## Time series

- Aggregated disease cases indexed by time (day, **week**, month)
- Sometimes extratified according to age groups and sex.



## Spatial data

- Aggregated disease cases indexed by region (neighbourhoods, cities, states, countries)
- Spatio-temporal data is not unusual.



## Individual level

- Information for each notified case might be available
- Usually administrative data (limited information)
- Missing information

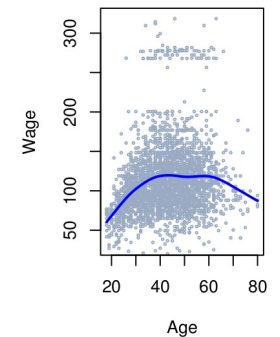
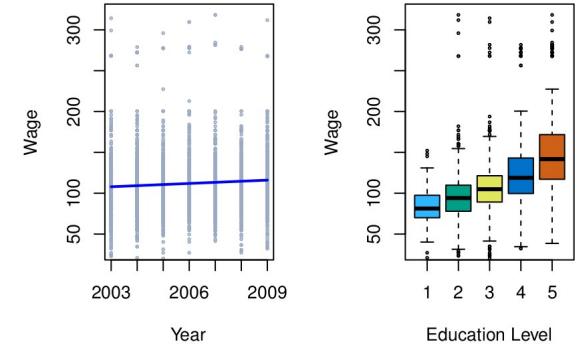
# Individual level data

## Exploratory data analysis (Stats 101)

James et al. (2022, ISLR)

Variable	Overall, $N = 2501$	B.1.1.44, $N = 884$	Zeta, $N = 518$	Gamma, $N = 644$	Delta, $N = 455$
Median age in years (IQR)	21 (8-37)	19 (5-37)	25 (8-37)	22 (9-38)	17 (8-34)
Age categories	N (%)	N (%)	N (%)	N (%)	N (%)
0 to 4 years	408 (16%)	191 (22%)	79 (15%)	79 (12%)	59 (13%)
5 to 11 years	503 (20%)	167 (19%)	96 (19%)	126 (20%)	114 (25%)
12 to 17 years	250 (10.0%)	74 (8.4%)	37 (7.1%)	76 (12%)	63 (14%)
18 to 59 years	1192 (48%)	397 (45%)	268 (52%)	326 (51%)	201 (44%)
60 and older	148 (5.9%)	55 (6.2%)	38 (7.3%)	37 (5.7%)	18 (4.0%)
Female	1512 (60%)	544 (62%)	308 (59%)	379 (59%)	281 (62%)
SARS-COV-2 positive by RT-PCR	744 (12%)	139 (12%)	200 (17%)	287 (14%)	118 (7%)
SARS-CoV-2 seropositive	1479 (34%)	339 (33%)	199 (21%)	318 (21%)	623 (73%)

**Table 1: Sociodemographic and virologic characteristics of the study participants ( $N = 2501$ ). IQR = interquartile range.**



Carvalho et al. (2022, The Lancet Regional Health)

\* Rarely available.

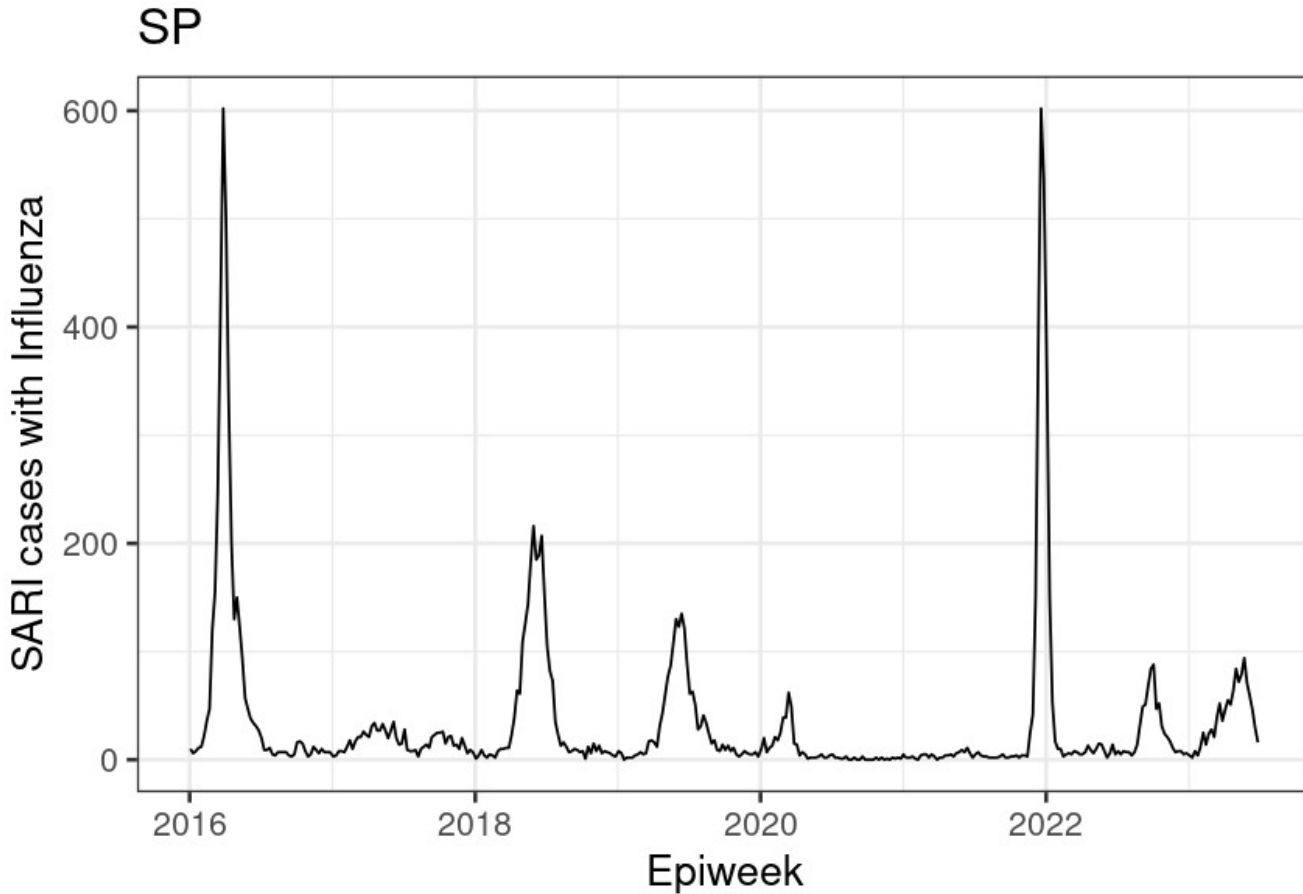
# Time series

- Number of disease cases per unit of time

$$Y_t, X_t, N_t, \dots \quad t = 1, 2, \dots, T.$$

- Time could be **days**, **weeks**, months, years, ?
- There is some dependence among consecutive observations
- Most frequent (available) type of surveillance data

# Time series



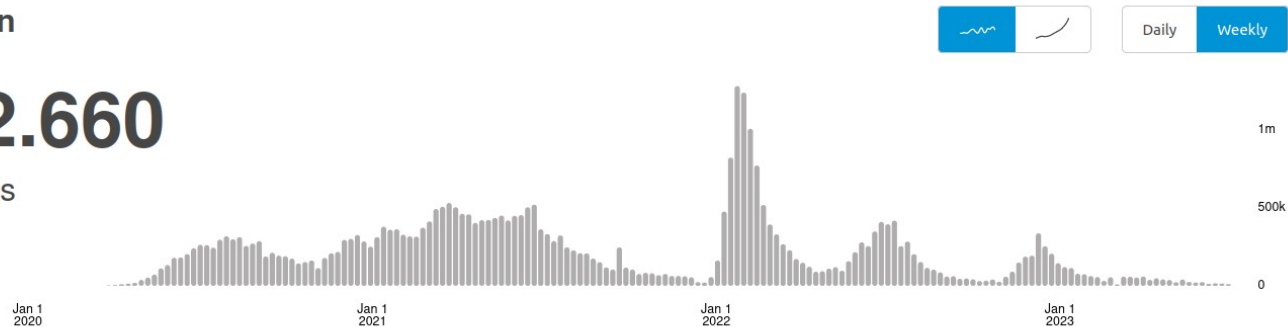
# Time series

In **Brazil**, from **3 January 2020** to **12:14pm CEST, 12 July 2023**, there have been **37.682.660 confirmed cases** of COVID-19 with **704.159 deaths**, reported to WHO. As of **2 June 2023**, a total of **513.329.718 vaccine doses** have been administered.

## Brazil Situation

**37.682.660**

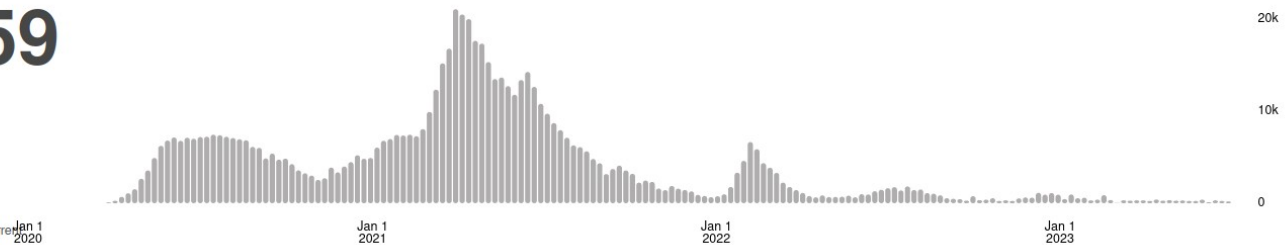
confirmed cases



**704.159**

deaths

Source: World Health Organization  
Data may be incomplete for the current day or week.



<https://covid19.who.int>

# Time series

In **Japan**, from **3 January 2020** to **12:14pm CEST, 12 July 2023**, there have been **33.803.572 confirmed cases** of COVID-19 with **74.694 deaths**, reported to WHO. As of **6 June 2023**, a total of **392.346.325 vaccine doses** have been administered.

## Japan Situation

**33.803.572**

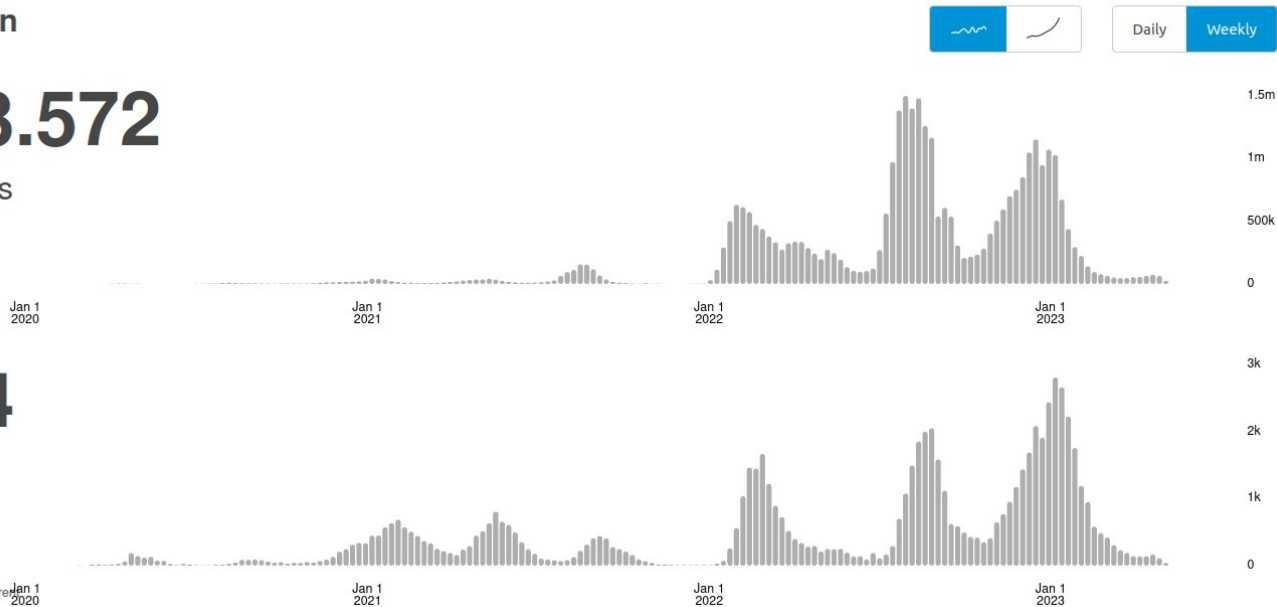
confirmed cases

**74.694**

deaths

Source: World Health Organization

Data may be incomplete for the current day or week.



<https://covid19.who.int>

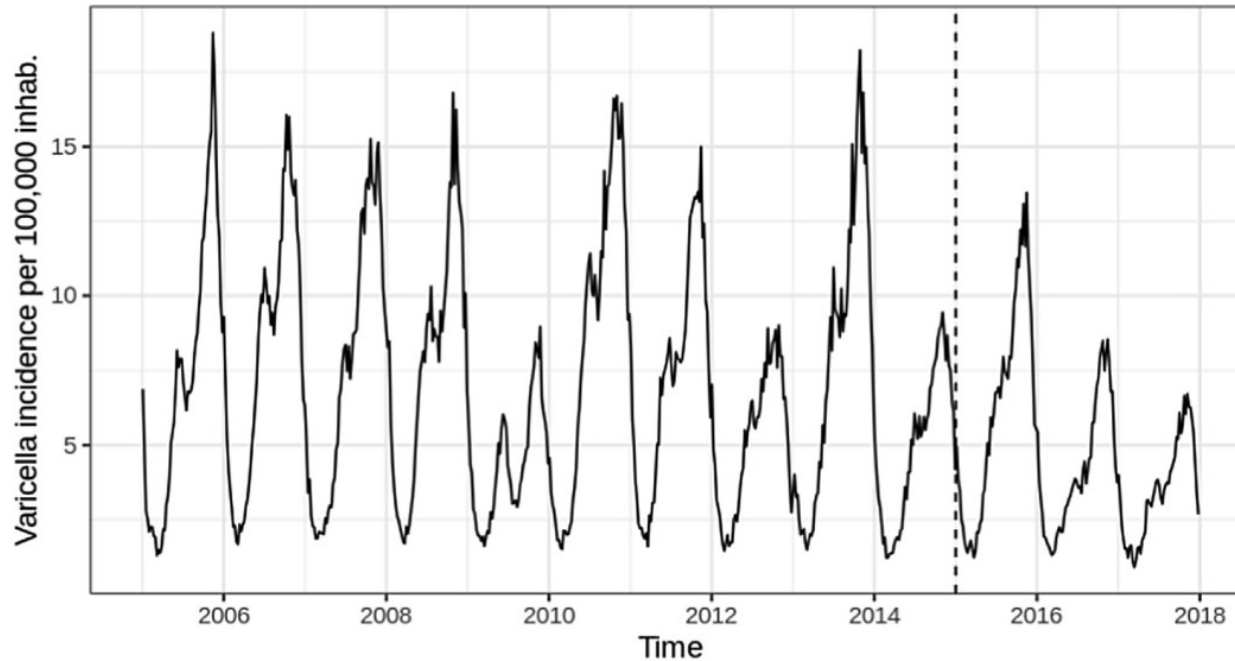




# Time series

- TS can be used to describe disease dynamics
- We may also help us to identify patterns
  - Seasonality
  - Trends
  - Disease natural history (e.g. TS by age groups)

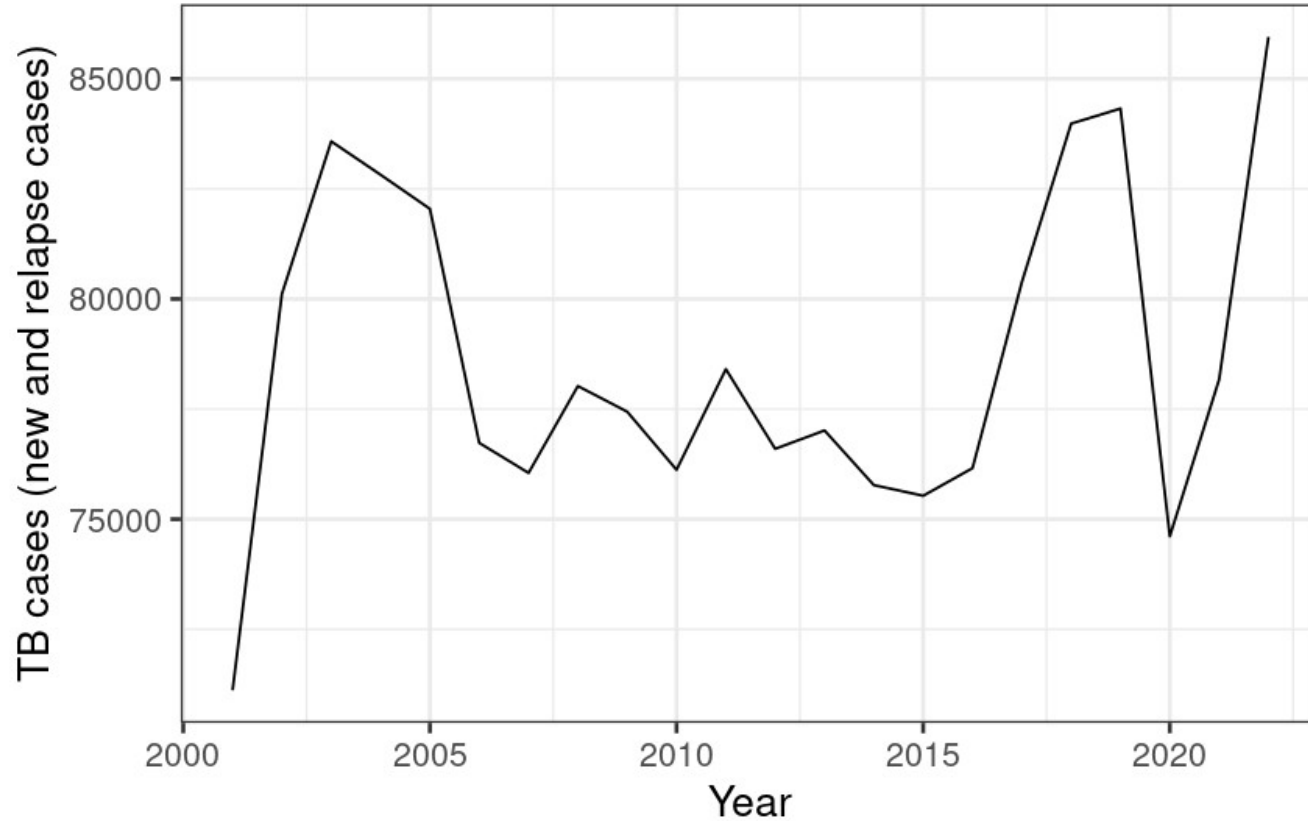
# Time series



**Fig. 1.** Weekly varicella reported cases in Argentina from 2005 to 2017. The vertical dotted line indicates the beginning of the period when a single dose varicella vaccine become universally available to 15 month old children.

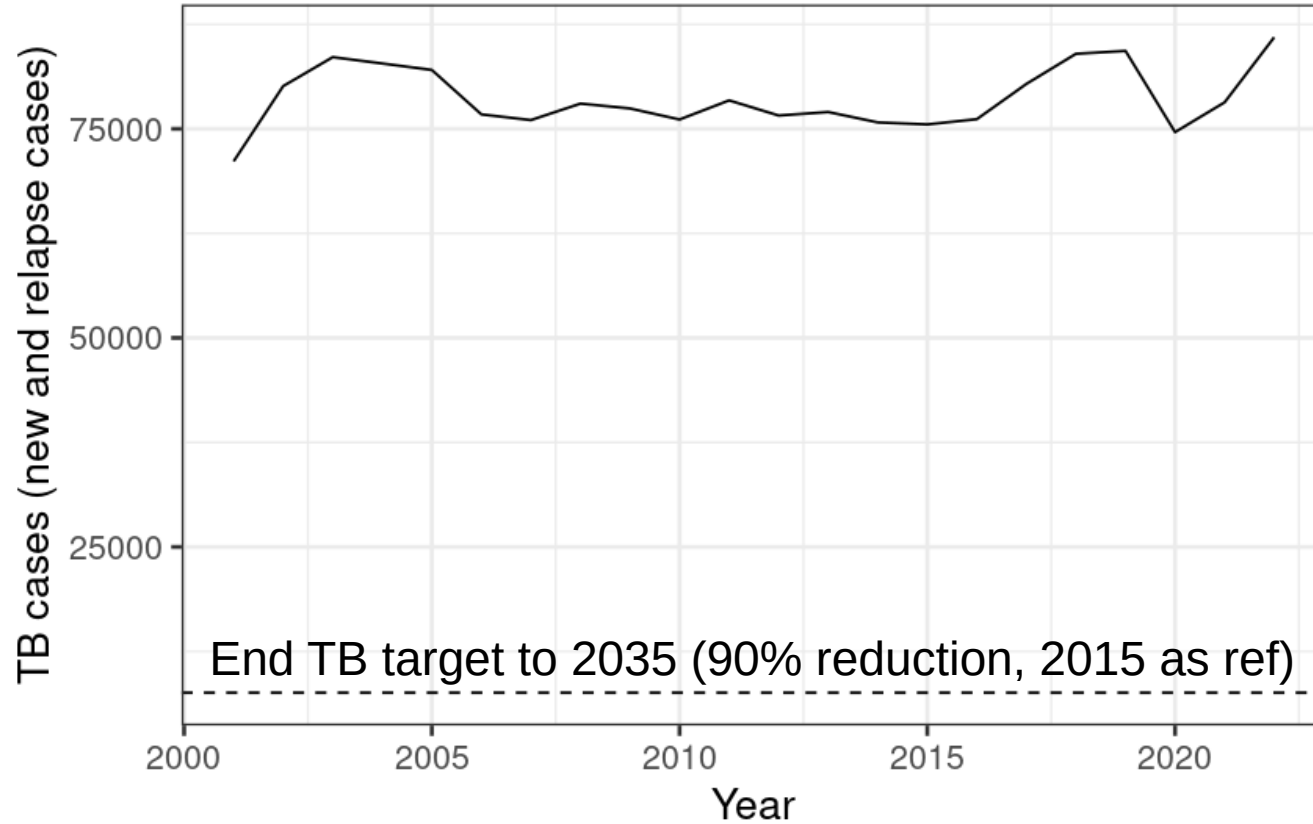
# Time series

TB in Brazil



# Time series

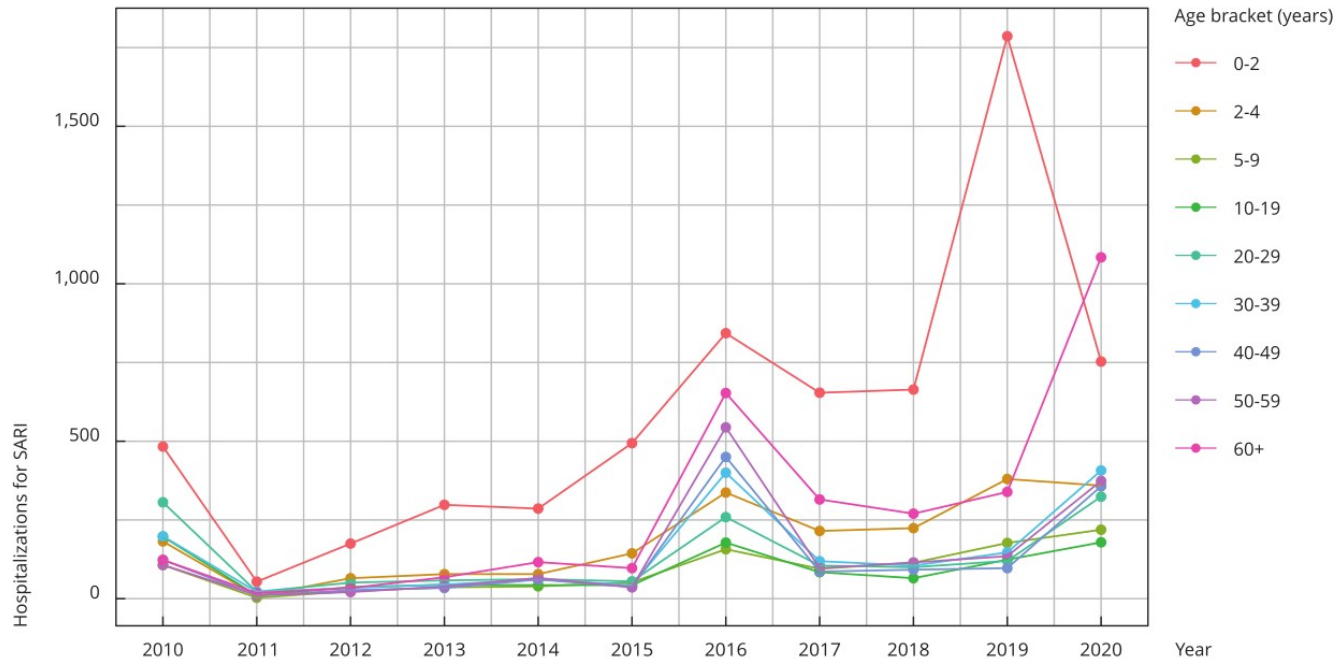
TB in Brazil



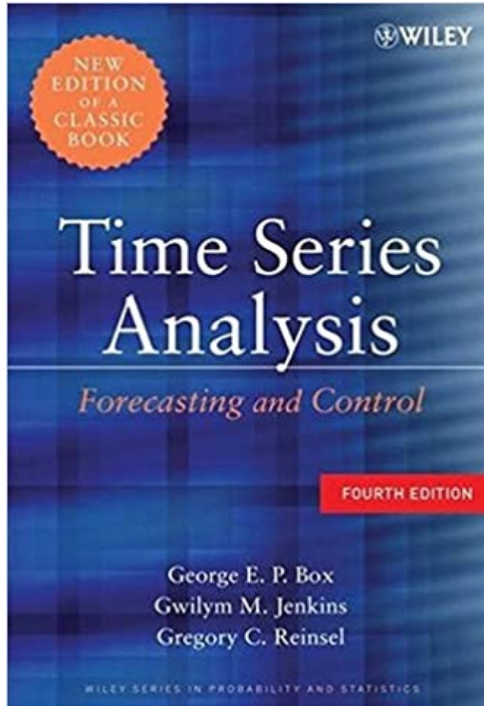
# Time series

Figure 2

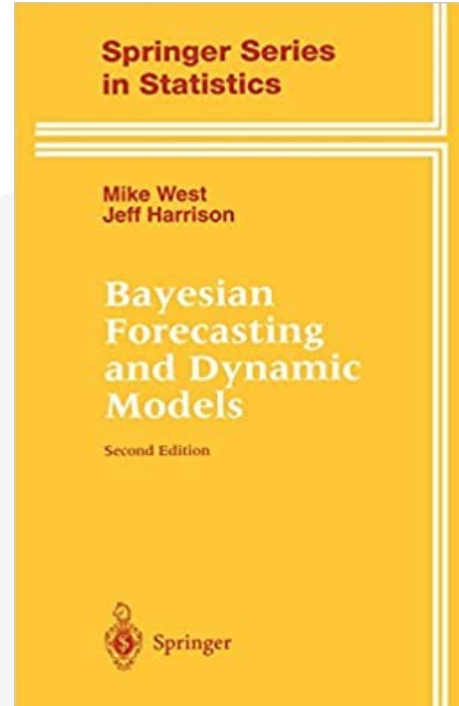
Absolute numbers of cases of hospitalizations for severe acute respiratory illness (SARI) in Brazil from the 9th to 12th epidemiological weeks in years 2010 through 2020, stratified by age brackets.



# Time series books



Box, Jenkins, and Reinsel



West and Harrison

$$Y_t \sim F(\mu_t, \phi)$$

$$\mu_t = s(t, x_t, \theta)$$

$$t = 1, 2, \dots, T$$

# Spatial surveillance data

- Number of disease cases per region

$$Y_r, X_r, N_r, \dots \quad r = 1, 2, \dots, R.$$

- Regions are usually neighbourhoods, **cities**, countries
- “Everything is related to everything else, but near things are more related than distant things” – Tobler

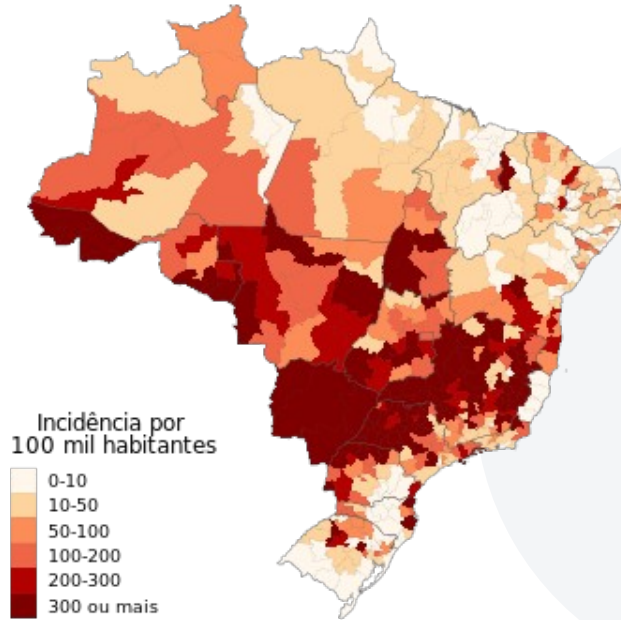
# Spatial surveillance data

- There are three types of spatial data:
  - **Discrete area data** (The variable of interest occur in a well-defined region)
  - Continuous spatial data (The variable of interest can be measured anywhere over the region of interest)
  - Point process (We are interested in where the event occur)

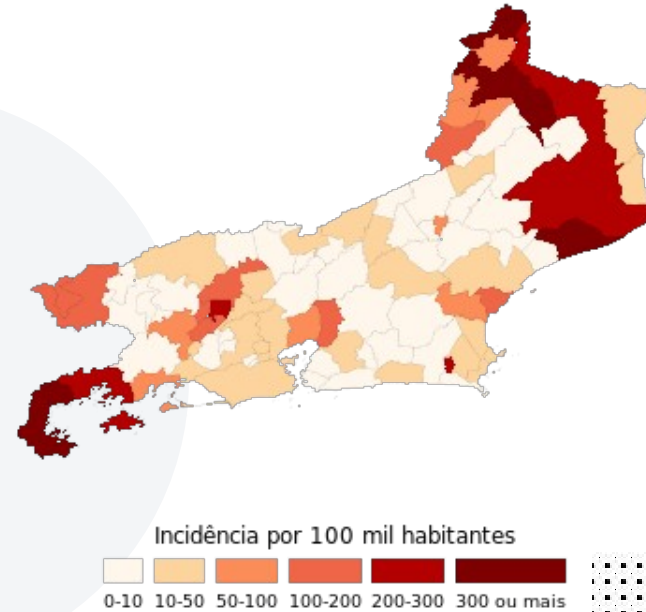


# Spatial surveillance data

Dengue  
SE 08-11/2023



Dengue  
SE 08-11/2023



# Spatial surveillance data

- In area data, is common to use the neighbourhood matrix, usually a binary matrix in the form:

$$W_{i,j} = \begin{cases} 1, & \text{if } i \sim j, \\ 0, & \text{otherwise.} \end{cases}$$

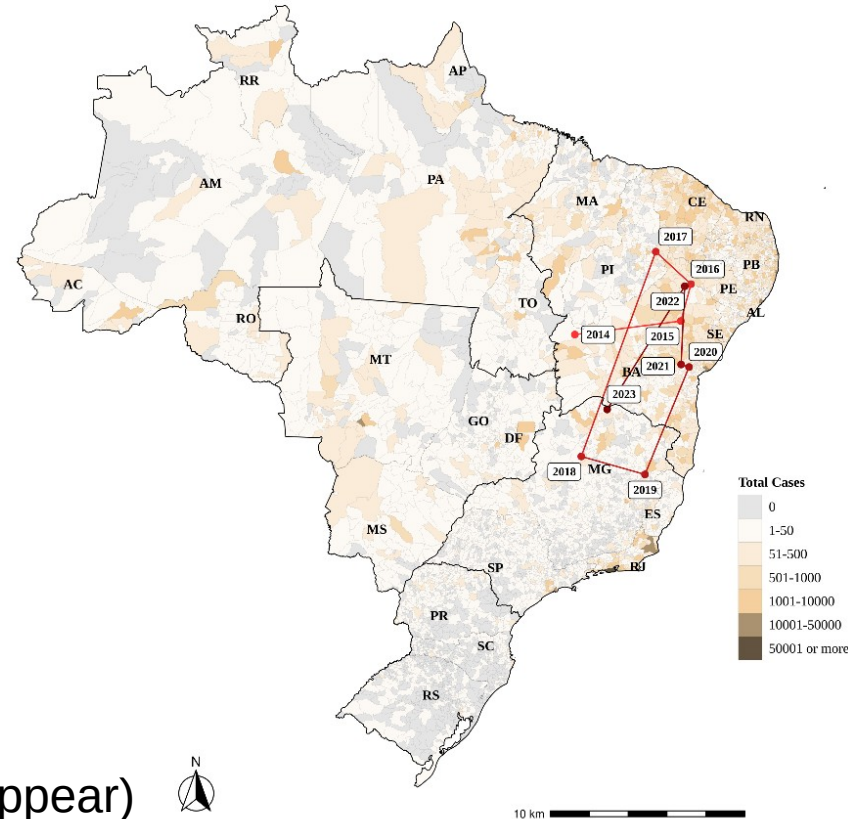
The  $W$  matrix could be used to smooth estimates or induce dependence in a model

# Spatial surveillance data

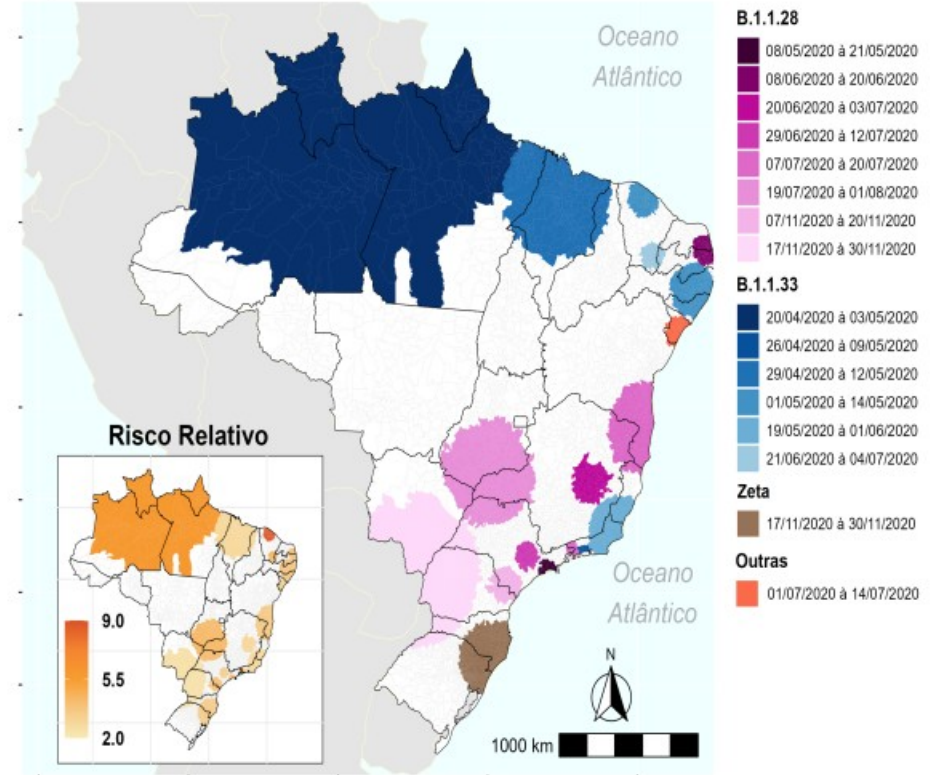
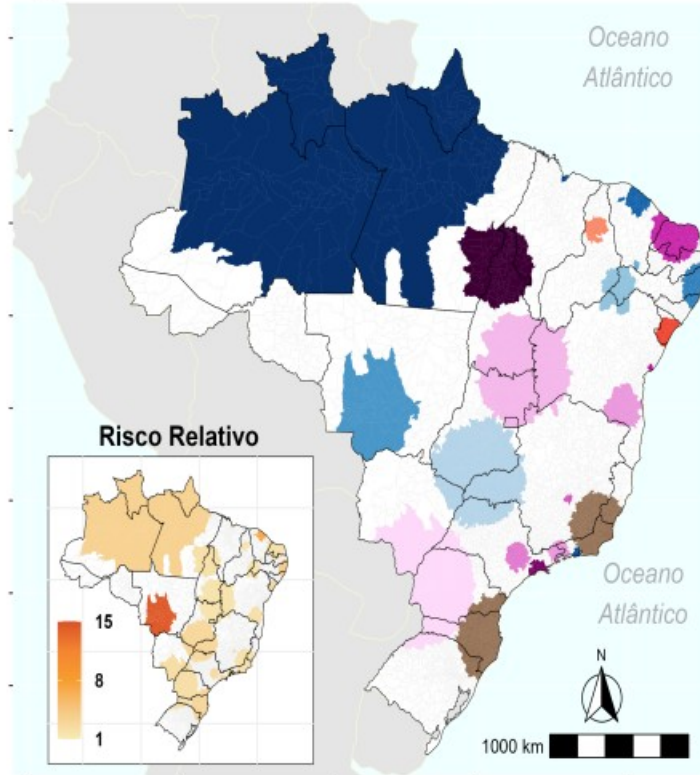
- A different approach would be consider each region as a point in space, and analyse as point processes.
- E.g. calculating centroids or finding clusters

# Spatial surveillance data

Chikungunya cases in Brazil, 2014-2023

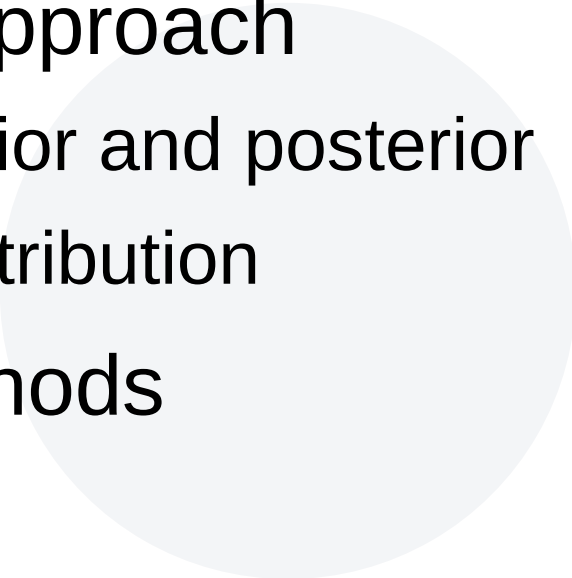
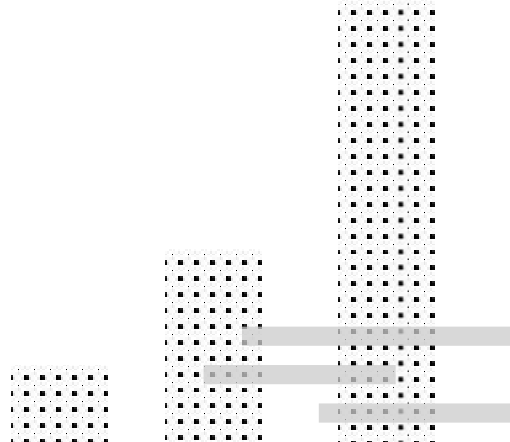


# Spatial surveillance data





# Foundation

- Managing uncertainty
  - Probabilistic approach
    - Likelihood, prior and posterior
    - Predictive distribution
  - Inference methods
- 
- 



# Managing uncertainty

- In surveillance data, there is plenty of uncertainty sources
  - What is/was/will be the number of cases of disease  $x$  at time  $t$  in region  $r$ ?
  - Are we facing an epidemic? How far we are from the expected?
  - What was the impact of an intervention  $I$ ? Did it reduce the number of deaths?



# Managing uncertainty

- Those question are uncertain, and we can (try to) answer them with aid of probability methods.
- In a probabilistic perspective, everything that is unknown can be represented using a probability distribution.
- This perspective is also called Bayesian perspective.

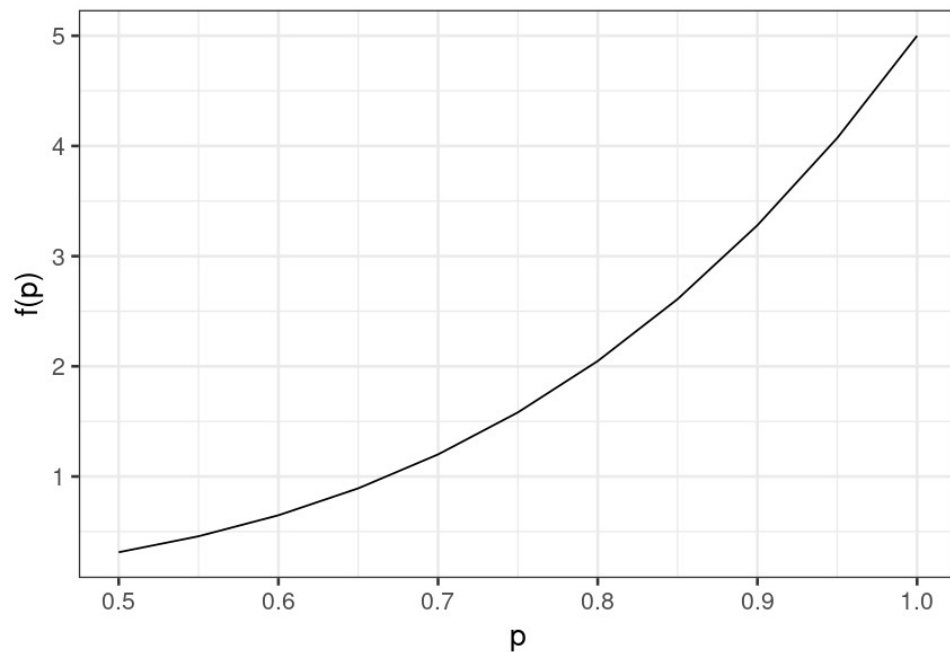


# Example: COVID-19 prevalence

- I am going to elicit (built a probability distribution) of the COVID-19 prevalence of people in this room,  $p$ .
  - How likely it is? Can I define some probabilities?
    - $P(p < 0.1)$
    - $P(p < 0.5)$
    - $P(p < 0.9)$

What about mode? Mean?

# Example: COVID-19 prevalence



$$P(p < 0.1) \sim 0$$

$$P(p < 0.5) = 0.03$$

$$P(p < 0.9) = 0.57$$

$$\text{Mode} = 1$$

$$\text{Mean} = 5/6$$

$$p \sim \text{Beta}(5, 1)$$

# Prior

- We built a prior distribution for the COVID-19 prevalence for this audience
- We can build/elicit prior distributions for any numerical quantities that are unknown
- There are non-informative or weakly informative priors when we know little about a quantity

# Likelihood / the model

- We usually try to describe our main outcome as a parametric probability distribution
- For number of cases (a counting process), we may use:

$$Y_t \sim \text{Poisson}(\theta_t)$$

$$g(\theta_t) = x_t^T \beta$$

$$Y_t \sim \text{NegBinom}(\theta_t, \phi)$$

$$g(\theta_t) = x_t^T \beta + \delta_t$$

# Likelihood / the model

- The most commonly used statistical models assume independence among observations
- Then in a Poisson model

$$Y_t \sim \text{Poisson}(\theta_t) \quad g(\theta_t) = x_t^T \beta$$

$$L(\beta) = \prod_t p(y_t | x_t, \beta)$$

# Likelihood / the model

- However, independence may be a very strong assumption (specially in the context of infectious disease)
- So we should try a different model that takes into account the dependence structure

# The model

- We could use a property called conditional independence
- Given some parameter the  $Y$ s can be independent.
- So, one possible model is

$$Y_t \sim \text{Poisson}(\theta_t)$$

$$g(\theta_t) = x_t^T \beta + \delta_t$$

$$L(\beta, \delta) = \prod_t p(y_t | x_t, \beta, \delta_t)$$

$$\delta_t \sim N(\delta_{t-1}, \tau_\delta^2)$$
$$p(\delta_0, \tau_\delta^2)$$

# The model

- That model is a Random effects Poisson model
- A particular case of a Bayesian generalised linear mixed model, GLMM

$$Y_t \sim \text{Poisson}(\theta_t)$$

$$g(\theta_t) = x_t^T \beta + \delta_t$$

$$\delta_t \sim N(\delta_{t-1}, \tau_\delta^2)$$

$$L(\beta, \delta) = \prod_t p(y_t | x_t, \beta, \delta_t)$$

$$p(\delta_0, \tau_\delta^2)$$



# Posterior

- Combining the prior distributions and the likelihood leads to a distribution called posterior distribution
- Bayes theorem, assume two events A and B, in stats 101 we learn that

$$P(B | A) = \frac{P(A|B)P(B)}{P(A)} = \frac{P(A|B)P(B)}{P(A|B)P(B) + P(A|B^c)P(B^c)}$$

# Posterior

- Lets suppose the sample space of B could be partitioned in  $M+1$  events  $C_i$ , and B is just one of them, for simplicity lets say  $B = C_0$ .

$$P(B | A) = \frac{P(A|B)P(B)}{P(A)} = \frac{P(A|B)P(B)}{\sum_{i=0}^M P(A|C_i)P(C_i)}$$

# Posterior

- If  $\theta$  is our unknown parameter, and  $y$  is our observed data. Then

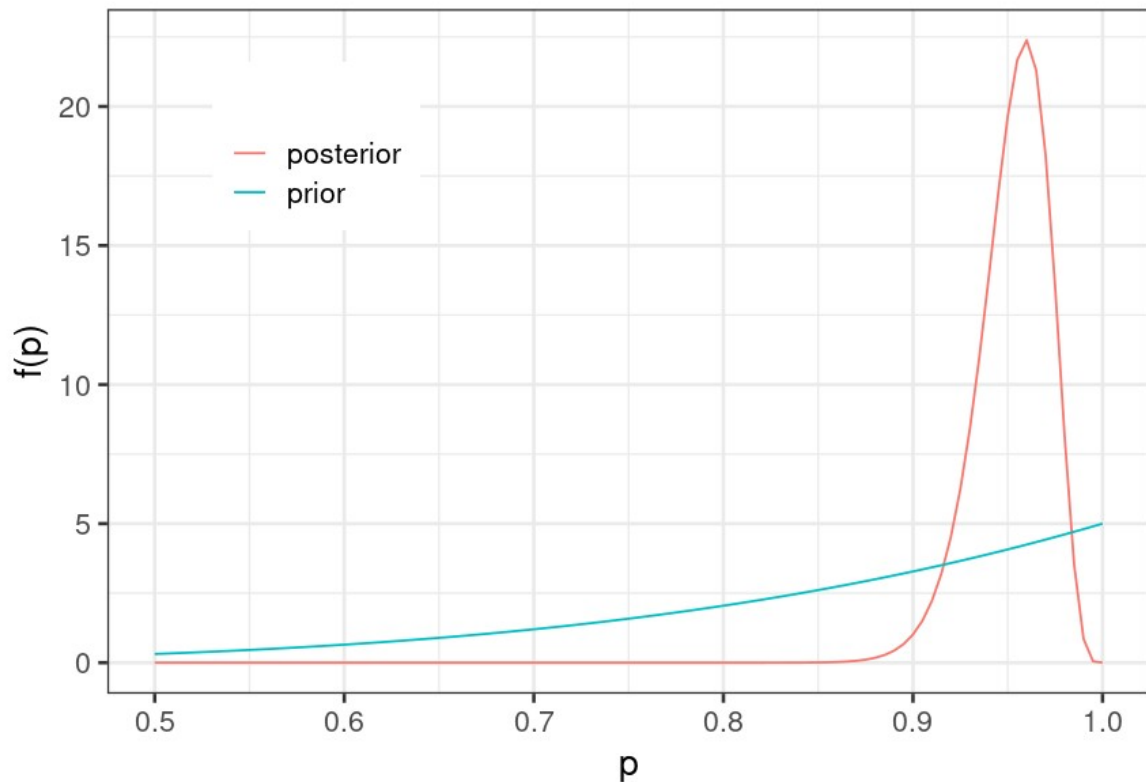
$$P(\theta | y) = \frac{P(y|\theta)P(\theta)}{P(y)} = \frac{P(y|\theta)P(\theta)}{\sum_{\theta} P(y|\theta)P(\theta)}$$

# Posterior

- Our unknown parameter is usually continuous, and we have a sample of observed data

$$p(\theta | y) = \frac{p(\theta) \prod_i p(y_i | \theta)}{\int_{\theta} p(\theta) \prod_i p(y_i | \theta) d\theta}$$
$$\propto p(\theta) \prod_i p(y_i | \theta)$$

# Example: COVID-19 prevalence



My guess:  $n = 120$ ;  $y = 5$

$$P(p < 0.1 \mid y) \sim 0$$

$$P(p < 0.5 \mid y) \sim 0$$

$$P(p < 0.9 \mid y) = 0.01$$

$$\text{Mode} = 0.960$$

$$\text{Mean} = 0.952$$

$$p \mid y \sim \text{Beta}(5 + y, n - y + 1)$$

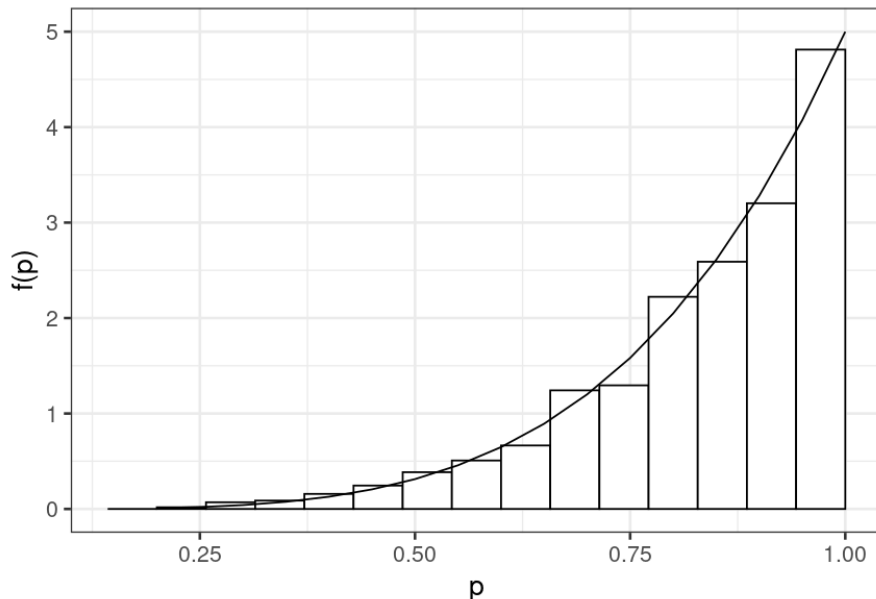
# So what?

- How can we learn about the parameters?
- Can we solve that integral for complex models?
- Yes<sup>2</sup>. Using Bayesian computation!

$$p(\theta | y) = \frac{p(\theta) \prod_i p(y_i | \theta)}{\int_{\theta} p(\theta) \prod_i p(y_i | \theta) d\theta}$$

# Bayesian comp: Monte Carlo

- Basic idea, solve integral by sampling from the target distribution



$$\mathbb{E}[p] = \int_{p=0}^1 p f(p) dp$$

$$\mathbb{E}[p] = \frac{5}{5+1} = 5/6 = 0.833$$

$$\mathbb{E}[p] \approx \sum_{k=1}^M \frac{p_k}{M} = 0.840$$

# Bayesian comp: MCMC

- Basic idea: we don't know how to sample directly so we sample from the **full conditionals** iteratively using Markov chain properties
- The samples eventually converge to samples from the full posterior.



# Bayesian comp: MCMC

Initialize the chain  $(\theta_1^{(0)}, \theta_2^{(0)}, \dots, \theta_P^{(0)})$

For k in 1:M (Monte Carlo step){

For j in 1:P (Parameter space){

Sample  $\theta_p^{(k)}$  from  $p(\theta_p \mid \theta_1^{(k)}, \dots, \theta_{p-1}^{(k)}, \theta_{p+1}^{(k-1)}, \dots, \theta_P^{(k-1)})$

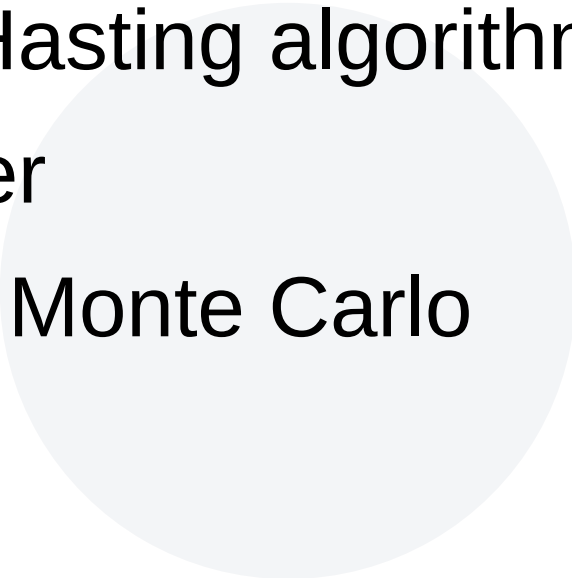
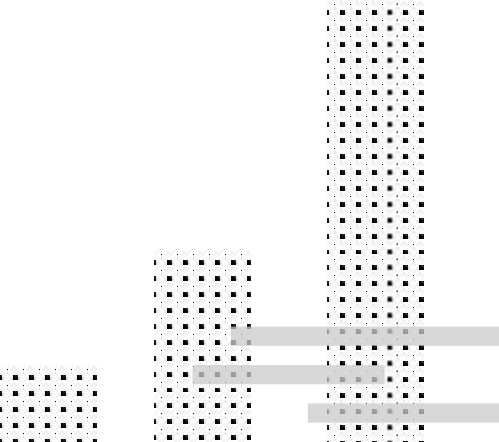
}

}

Set a **BurnIn** and a **lag** to get your final MCMC sample



# Bayesian comp: MCMC

- Gibbs sampling
    - Metropolis-Hasting algorithm
    - Slice sampler
    - Halmitonian Monte Carlo
- 
- 

# Bayesian comp: MCMC

- But, there are some good news!
- Those methods are already implemented in a set of MCMC packages/software



<https://mc-stan.org/>



<https://r-nimble.org/>

**JAGS**

<https://mcmc-jags.sourceforge.io/>

Old ones:

- WinBUGS
- OpenBUGS

# Bayesian comp: MCMC

- PROS

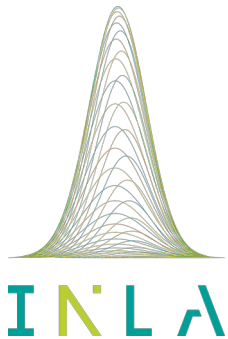
- Just need data, priors and likelihood (the model)
- Works for simple to very complex models
- Can answer using probabilities

- CONS

- Computational cost\*

# Bayesian comp: No MCMC

- There are other approximations
  - Variational Bayesian methods
  - Integrated Nested Laplace Approximation (INLA)



<https://www.r-inla.org/>

$$p(\theta | y) \approx \tilde{p}(\theta | y)$$

# Predictions

- Can we make predictions?
- In this probabilistic approach, the values to be predicted are unknown, so they are treated as unknown parameters.
- Essentially we want

$$p(y^{(new)} | y^{(obs)})$$

# Predictions

- Mathematically

$$\begin{aligned} p(y^{(new)} | y^{(obs)}) &= \int_{\theta} p(y^{(new)}, \theta | y^{(obs)}) d\theta \\ &= \int_{\theta} p(y^{(new)} | \theta, y^{(obs)}) p(\theta | y^{(obs)}) d\theta \\ &= \int_{\theta} p(y^{(new)} | \theta) p(\theta | y^{(obs)}) d\theta \end{aligned}$$

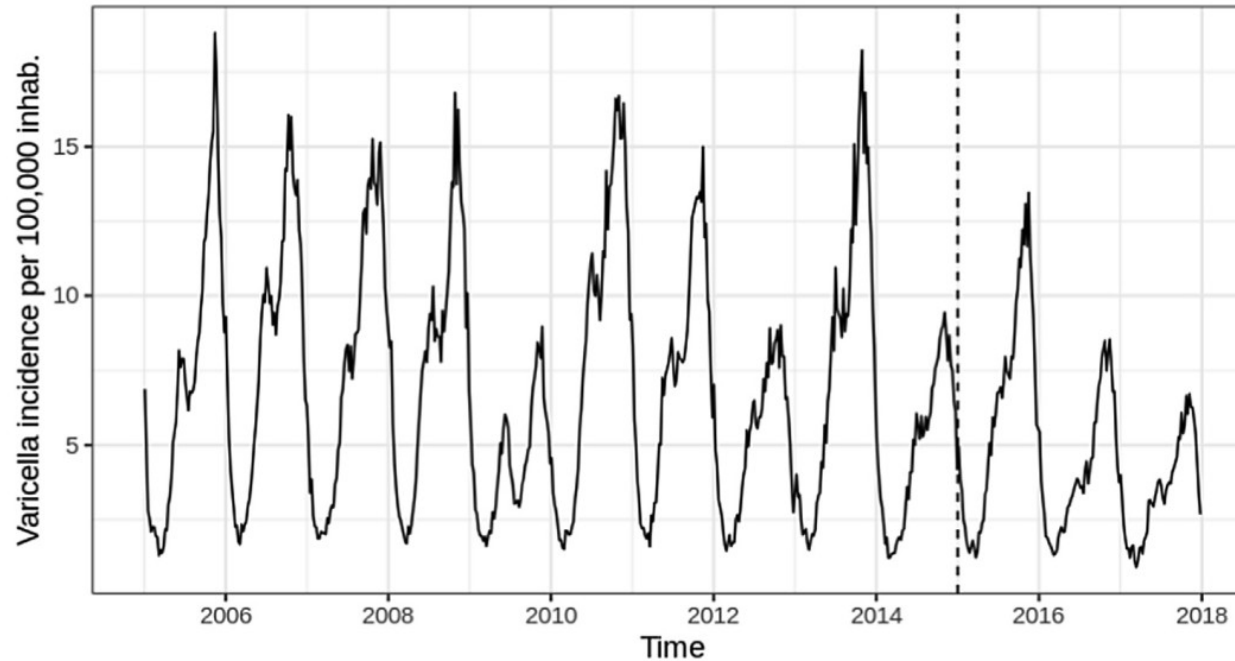
# COVID-19 prevalence example

- A new participant has just arrived, what is the probability of he/she being a prevalent COVID-19 case?

$$\begin{aligned} p(y^{(new)} = 1 \mid y^{(obs)}) &= \int_0^1 p(y^{(new)} = 1 \mid 1, p) p(p \mid 120, 6) dp \\ &= 0.952 \end{aligned}$$



# Varicella in Argentina



**Fig. 1.** Weekly varicella reported cases in Argentina from 2005 to 2017. The vertical dotted line indicates the beginning of the period when a single dose varicella vaccine become universally available to 15 month old children.

# Varicella in Argentina

$$Y_t \mid \lambda_t, \phi \sim \text{NegBin}(\lambda_t, \phi)$$

$$\log(\lambda_t) = \alpha_{\text{week}[t]} + \beta_{\text{year}[t]}$$

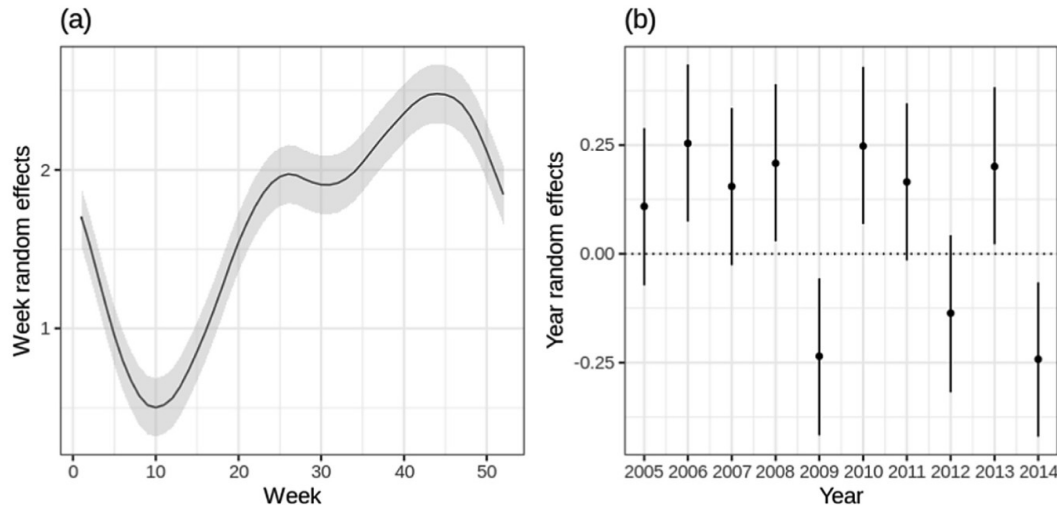


Fig. 2. Estimated random effects. (a) Week random effects; (b) Year random effects.

# Varicella in Argentina

$$p(y_1^{new}, y_2^{new}, \dots, y_{52}^{new} | data)$$

