E²M²: Ecological and Epidemiological Modeling in Madagascar

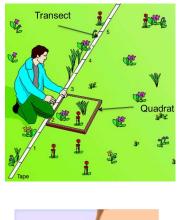
Study Design in Epidemiology and Ecology

Centre ValBio Ranomafana National Park, Madagascar December 2022

Data: Sources of x and y

Observational

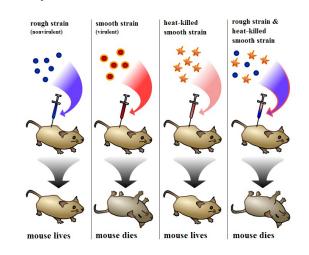
- Just measure x and y





Experimental

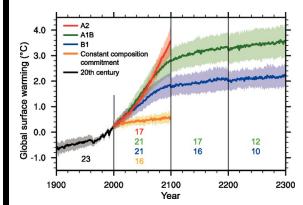
 Interfere with x or the relationship between x and



Empirical data

Simulated

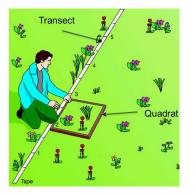
- Create a relationship between x and y



Data: Sources of x and y

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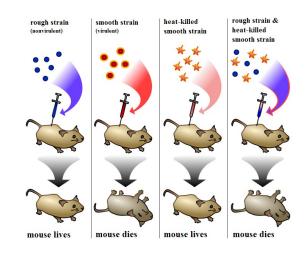
- Just measure x and y





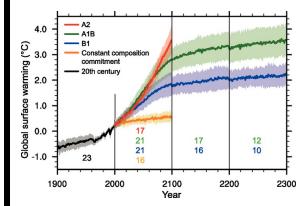
Experimental

Interfere with x or the relationship between x and



Simulated

- Create a relationship between x and y



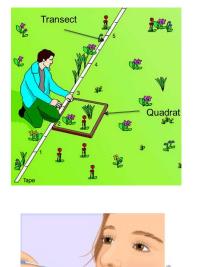
How do we choose the best method of data collection?

Empirical data

Data: Sources of x and y

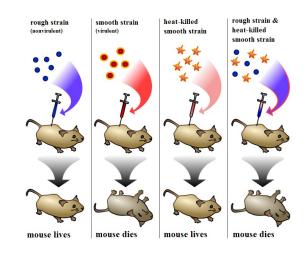
Observational

- Just measure x and y



Experimental

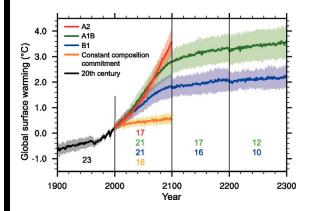
Interfere with x or the relationship between x and



Empirical data

Simulated

- Create a relationship between x and y

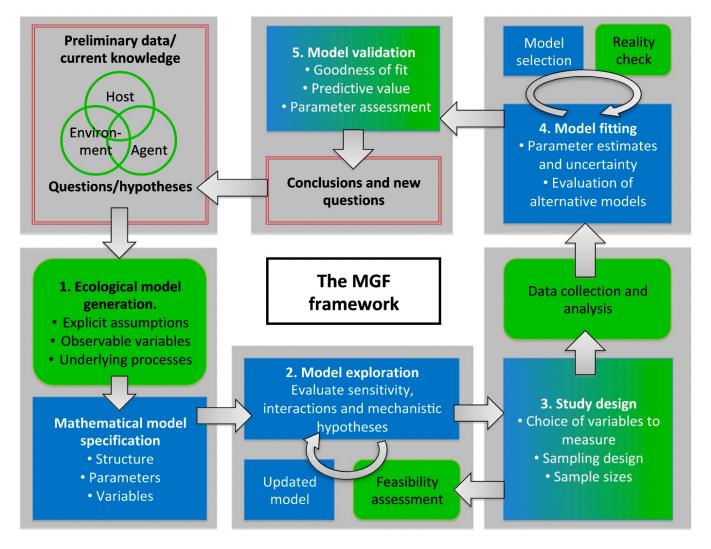


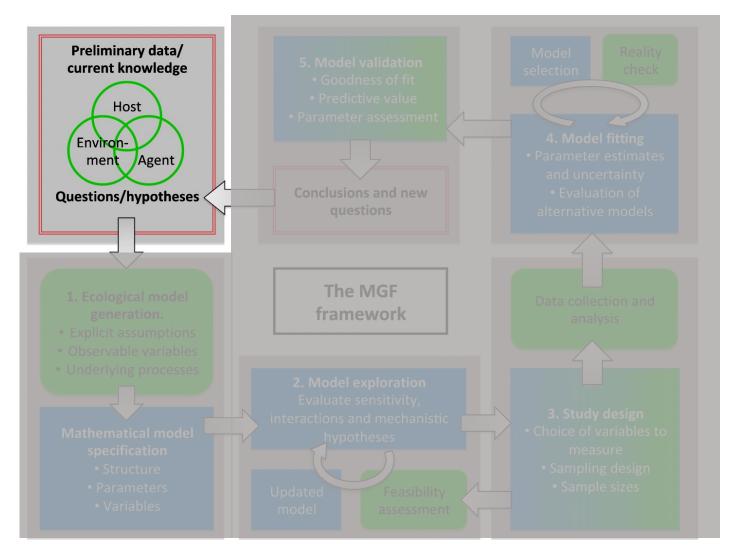
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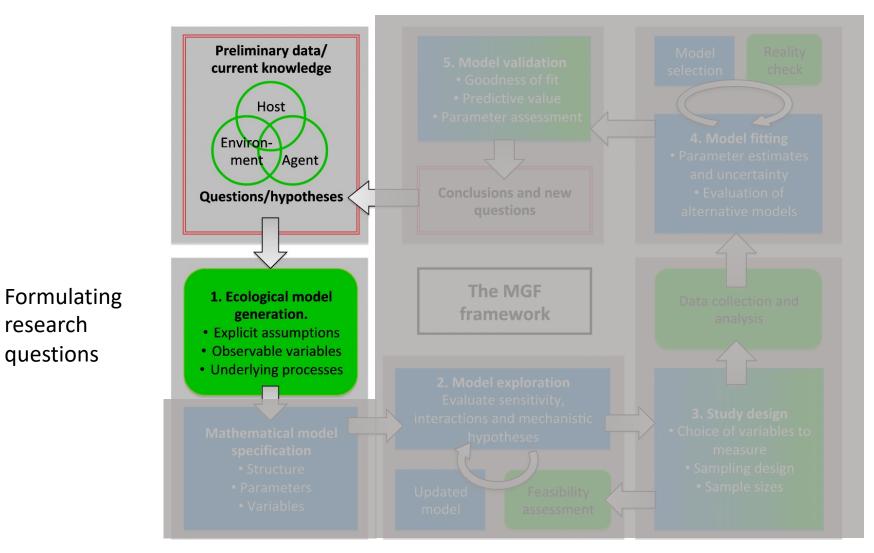
The 'best method' will depend on the question!

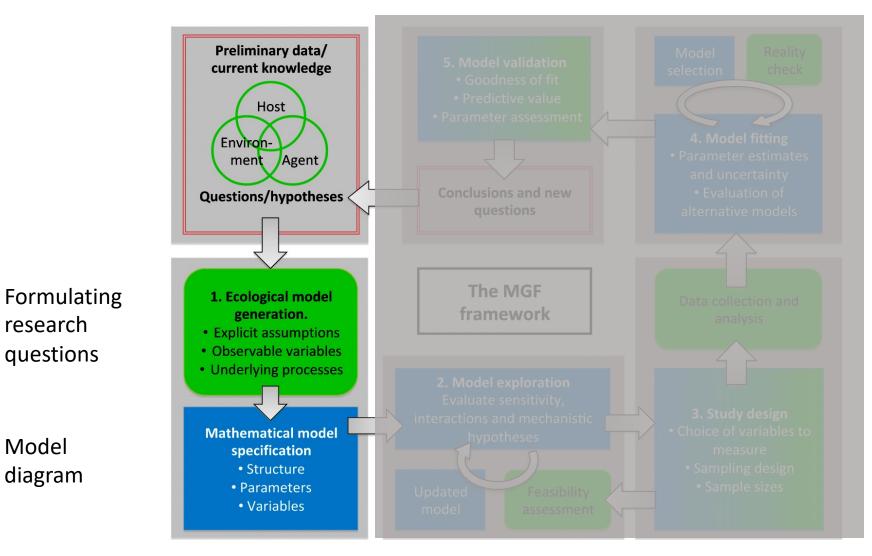
 a rational dialogue between researchers from multiple disciplines through a series of iterative steps, ultimately leading to improved causal inference and predictive power.

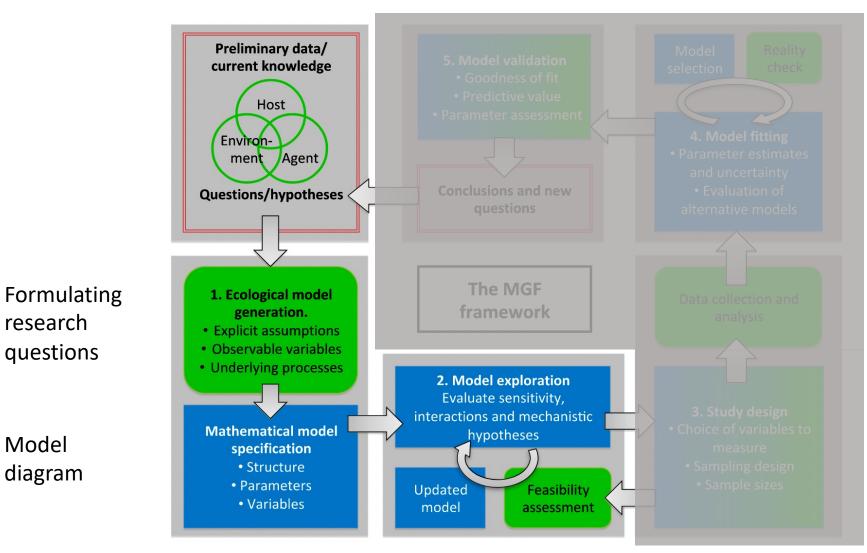
- a rational dialogue between researchers from multiple disciplines through a series of iterative steps, ultimately leading to improved causal inference and predictive power.
- biologists and modellers collaborate at all stages of the study, from initial model formulation and field study design, to data collection and analysis.



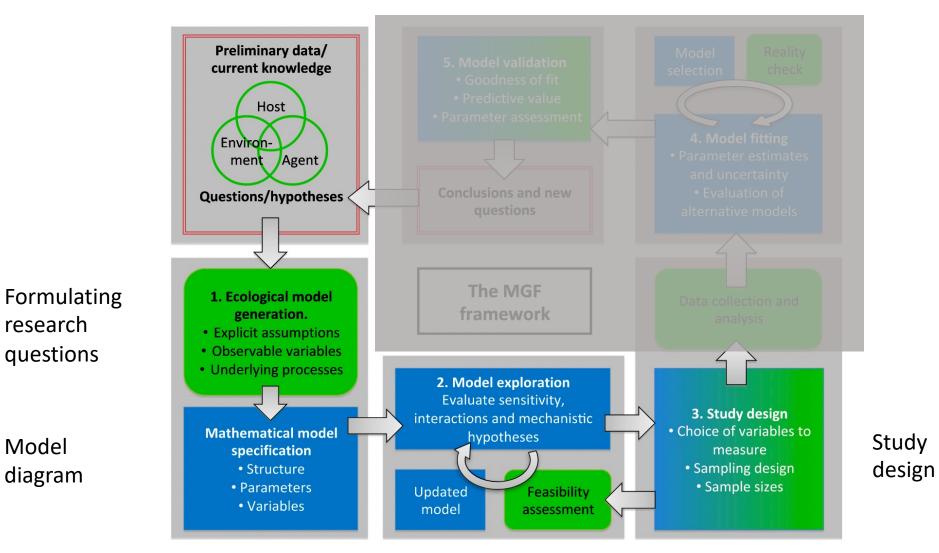




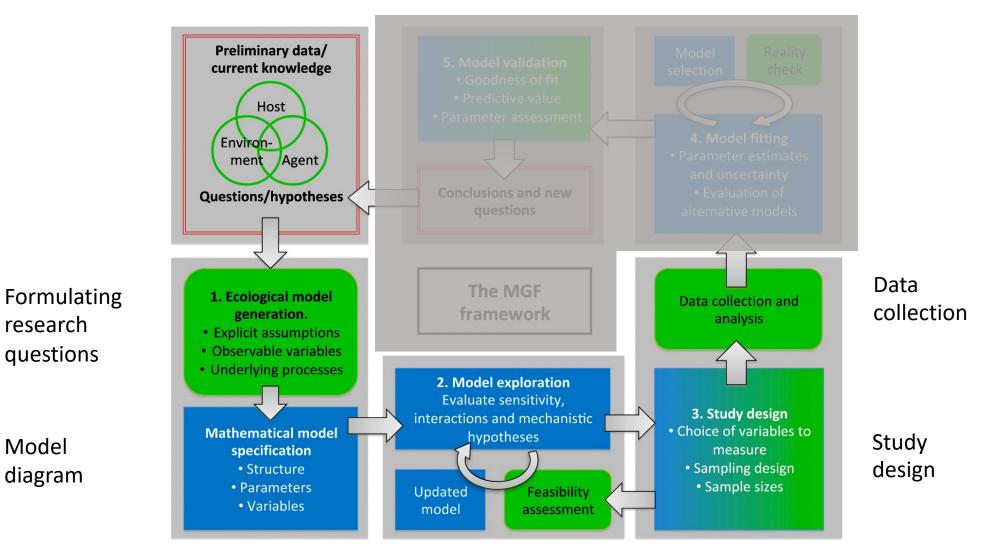




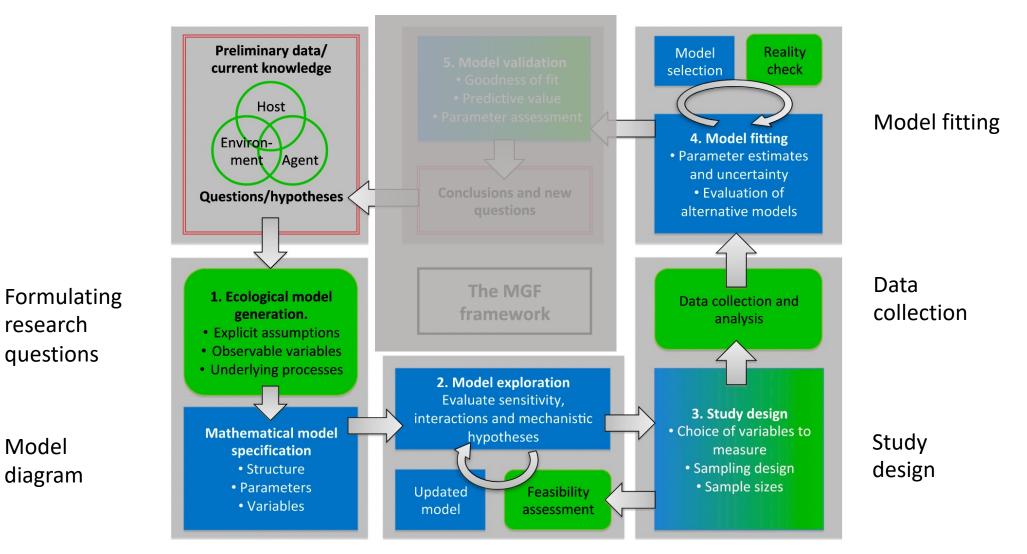
Model simulation



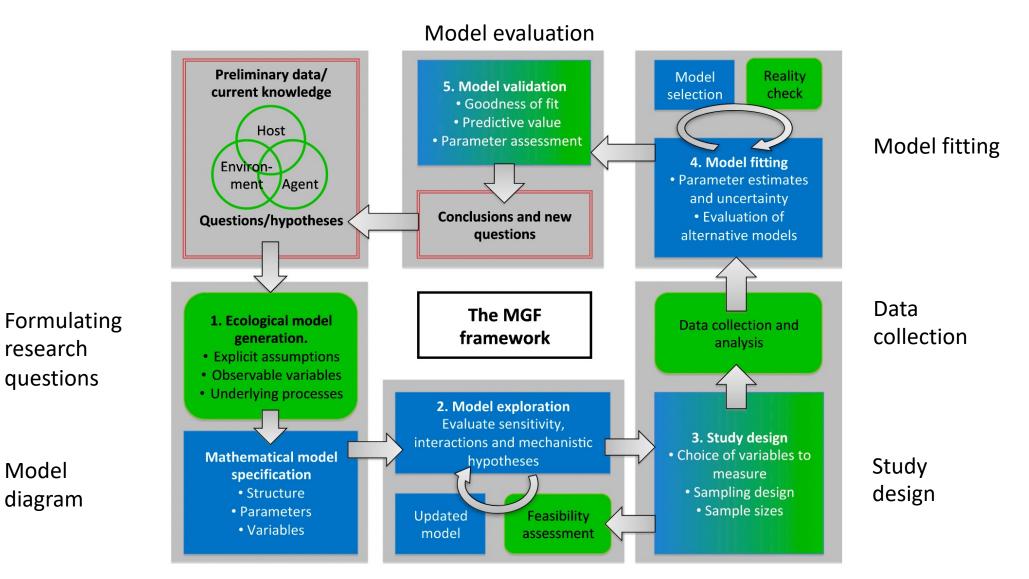
Model simulation



Model simulation



Model simulation



Model simulation

- a rational dialogue between researchers from multiple disciplines through a series of iterative steps, ultimately leading to improved causal inference and predictive power.
- biologists and modellers collaborate at all stages of the study, from initial model formulation and field study design, to data collection and analysis.
- applicable in both ecology AND epidemiology!

Target Population

Target: Population to which it *might* be possible to extrapolate results of the study

Target Population

Source Population

Target: Population to which it *might* be possible to extrapolate results of the study

Source: Population from which study participants are drawn

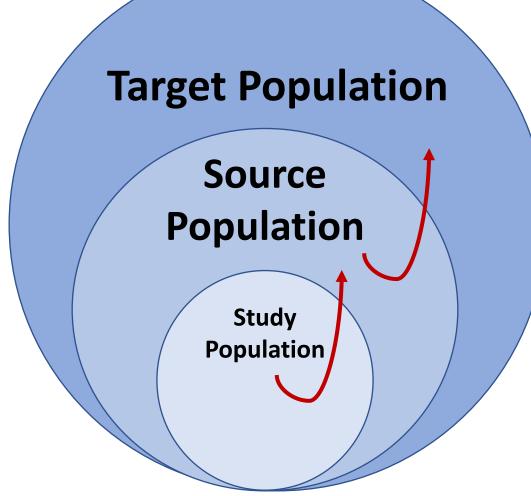
Target Population

Source Population

Study Population *Target:* Population to which it *might* be possible to extrapolate results of the study

Source: Population from which study participants are drawn

Study: Actual sampled population



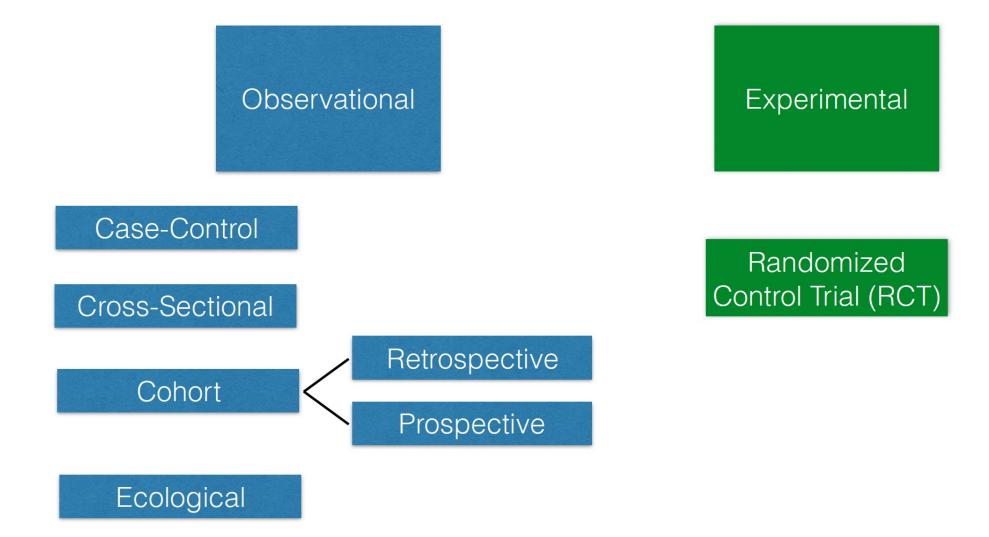
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Study: Actual sampled population

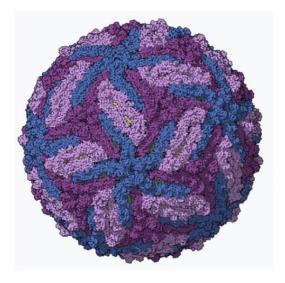
Well-designed studies allow us to make inferences about the target population

Different Study Types in Epidemiology









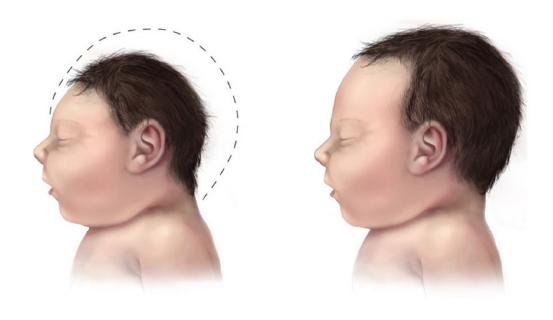


Virus in the family *Flaviviridae* (related to dengue, yellow fever)

Spread by Aedes mosquitoes

Multiple routes of transmission: vector, sexual, vertical

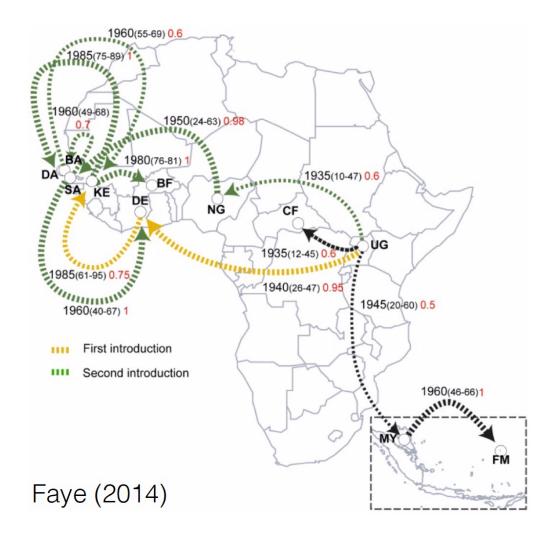




Often causes no or mild symptoms But can spread from pregnant women to their fetuses and result in microcephaly, severe brain malformations, other birth defects

Currently cannot be prevented by medications or vaccines (current vaccine trials)





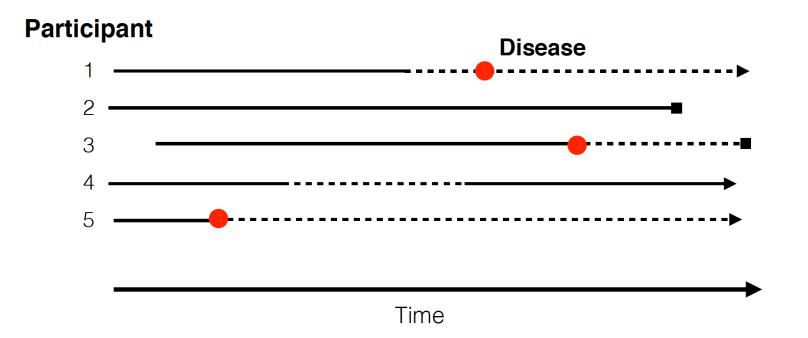
Originally isolated in 1947 (Ziika Forest, Uganda)

Sporadic outbreaks in Africa and Asia Large outbreak in 2015-2016 (Americas, SE Asia, Pacific Islands, Brazil)

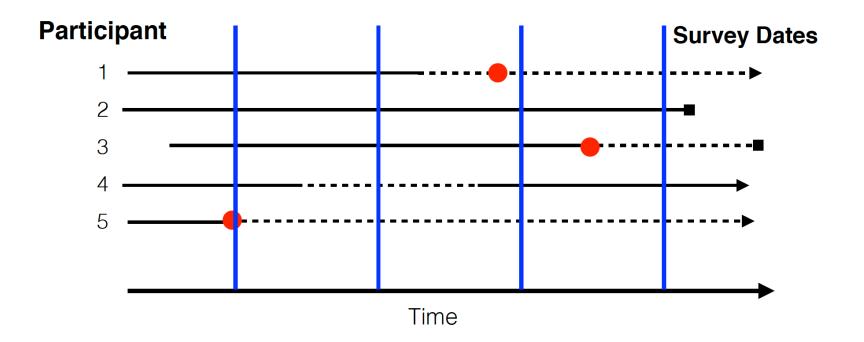


- Examines relationship between diseases and other variables of interest (e.g. geographic distribution)
- Presence/absence of disease is determined for all members of a population
- Commonly used to estimate prevalence (rather than incidence)
- A single snapshot of the population at a moment in time
- Exposure and outcome are assessed simultaneously

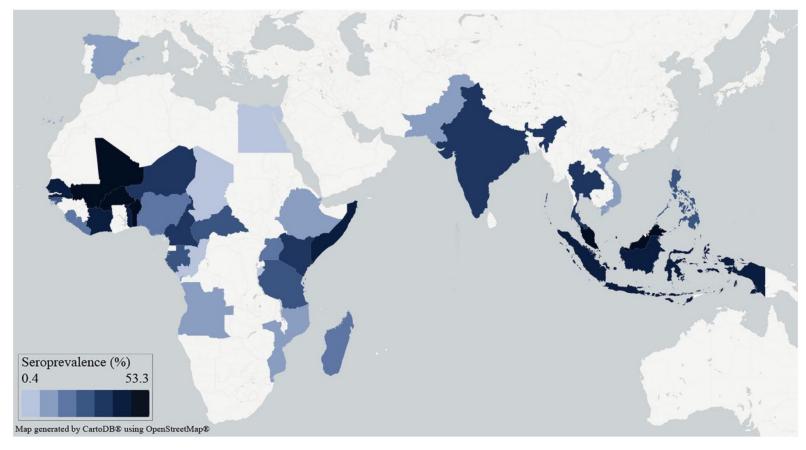




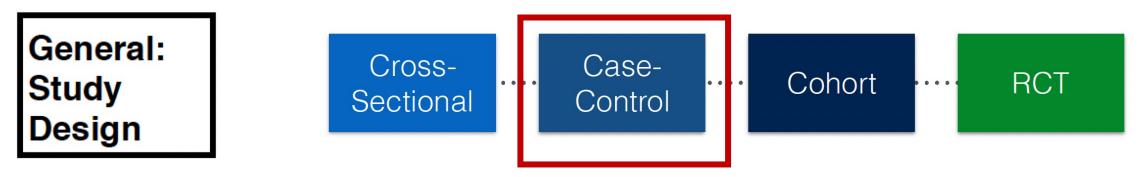






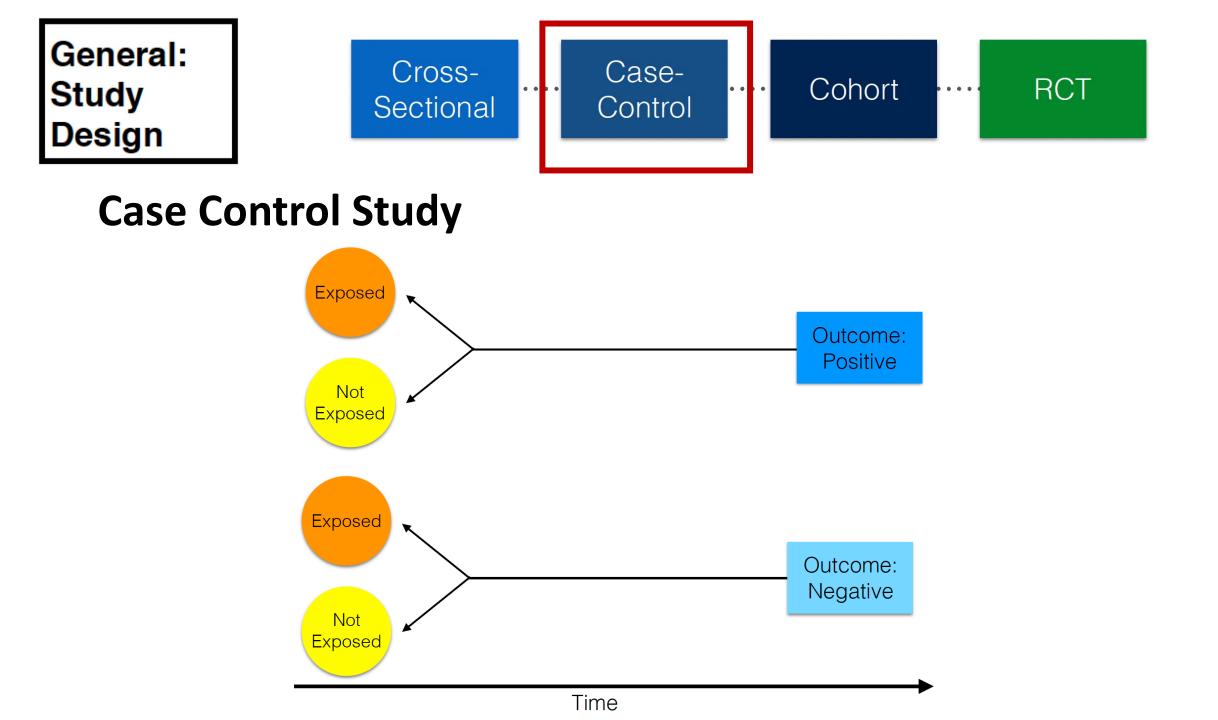


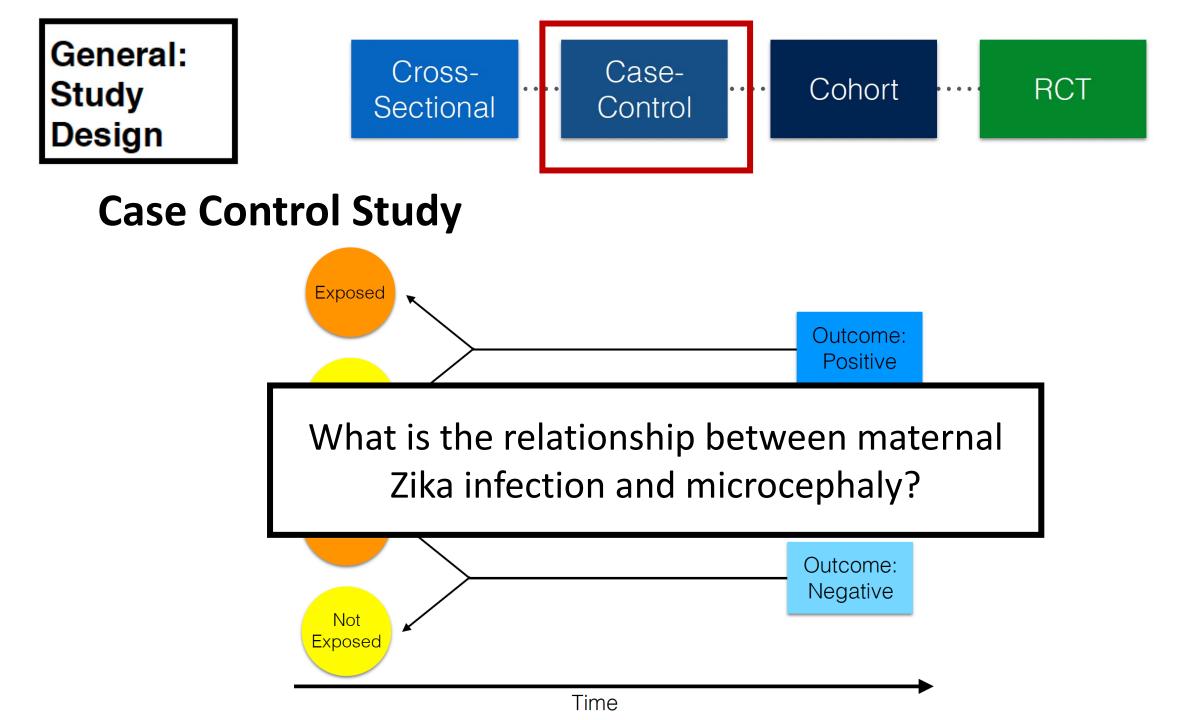
Posen (2016)

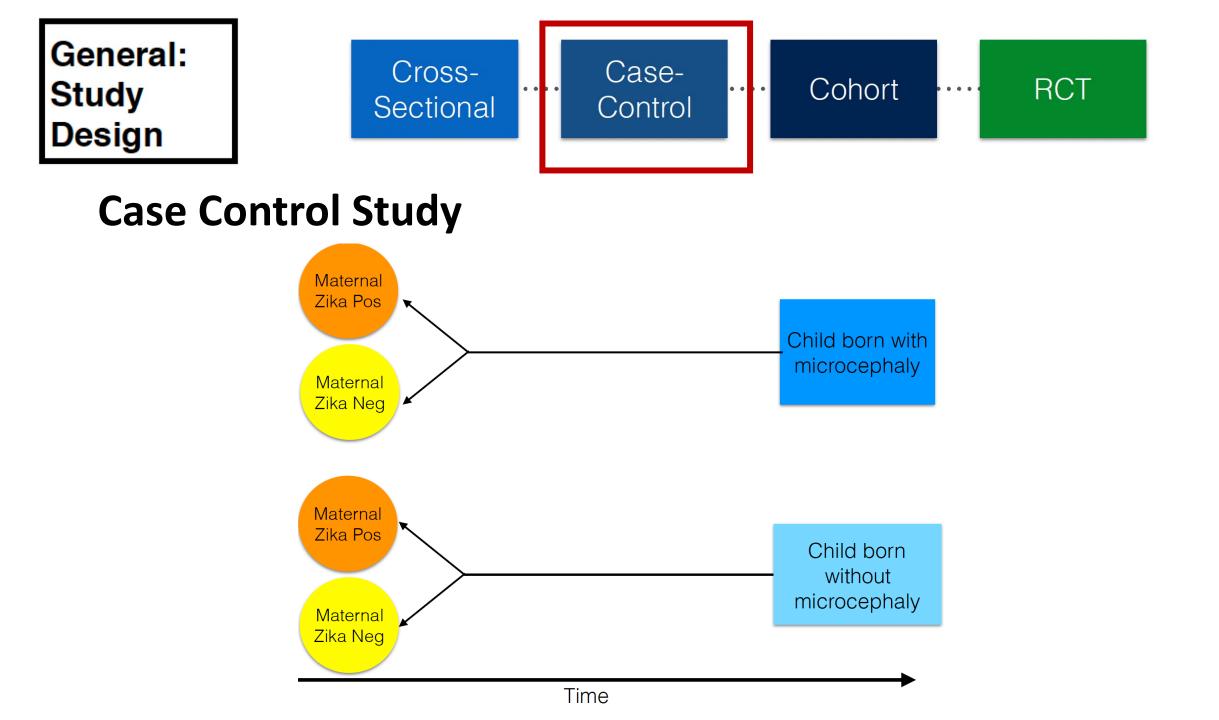


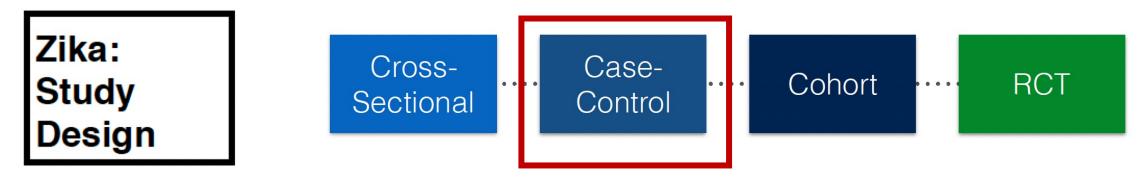
Case Control Study

- The observational epidemiological study of **persons with a disease of interest** and a suitable **control group of persons without the disease**
- Potential relationship of a suspected risk factor or an attribute to the disease is examined by comparing the the disease and non-diseased subjects with regard to how frequently the factor or attribute is present in each of these groups.



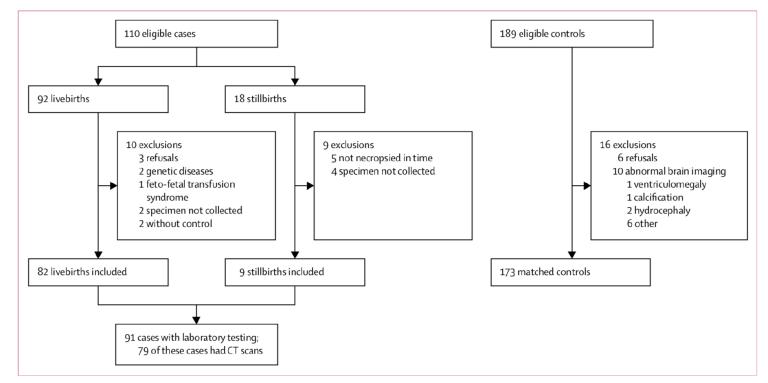






Case Control Study

Case-Control study - 8 Brazilian hospitals



de Araujo (2018)





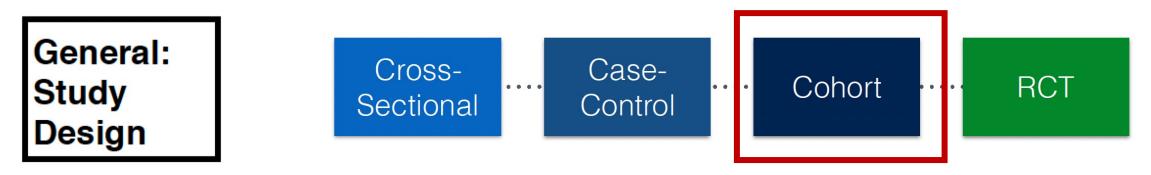
Case-Control study - 8 Brazilian hospitals

	Cases*	Controls*	Matched odds ratio (95% CI)
Serum, CSF samples, or macerated tissue			
Zika-positive, of total cases or controls	32/91 (35%)	0/173	87.0 (15.6–∞)
Zika-positive, of total cases or controls, adjusted†			73·1 (13·0–∞)
Cases, categorised by severity of microcephaly‡			
Severe	19/26 (73%)	0/51	52∙4 (9•1–∞)
Not severe	13/65 (20%)	0/122	33∙7 (5∙6–∞)

*Data are the number of all cases or controls who were positive for Zika virus, assessed by qRT-PCR or Zika virus-specific IgM/total number of patients (%). †Odds ratio when adjusted by smoking during pregnancy, maternal vaccination against tetanus, diphtheria, and acellular pertussis during pregnancy, and skin colour. ‡Severe is defined as a head circumference of more than 3 SD smaller than the mean for their sex and gestational age.^{10,14} Not severe was defined as a head circumference of 2–3 SD smaller than the mean for their sex and gestational age. Matched odds ratios in this subgroup are crude because of small numbers.

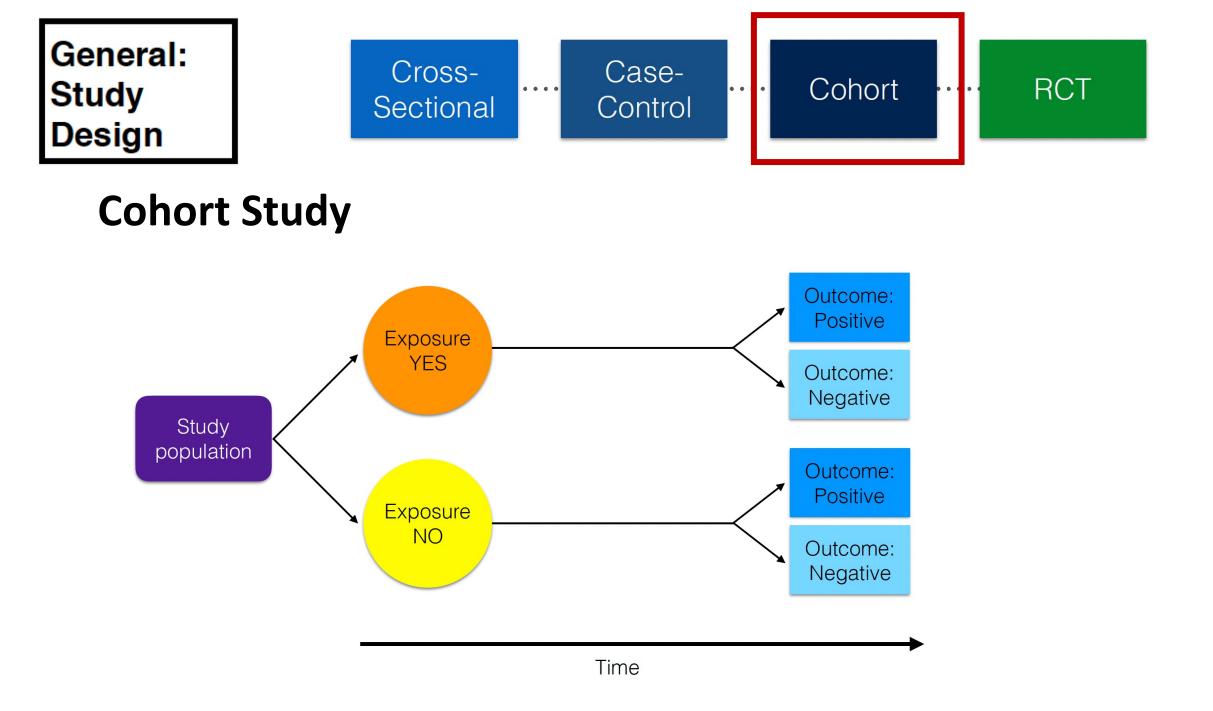
Table 5: Association between microcephaly and Zika virus infection

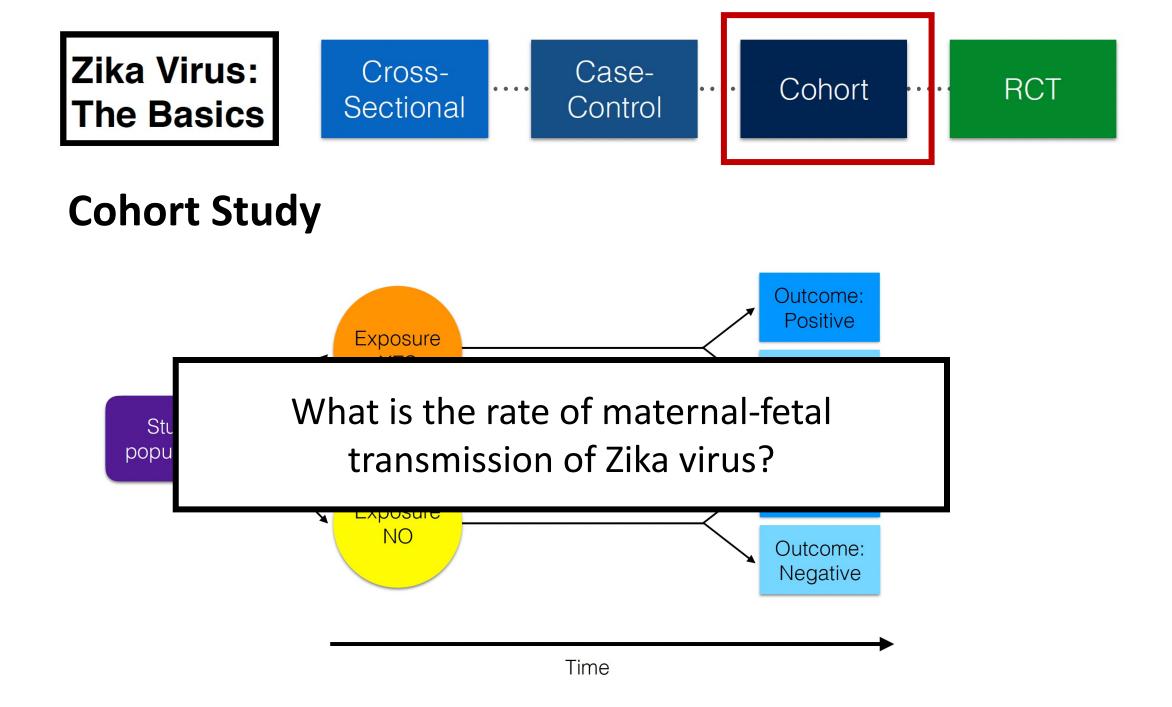


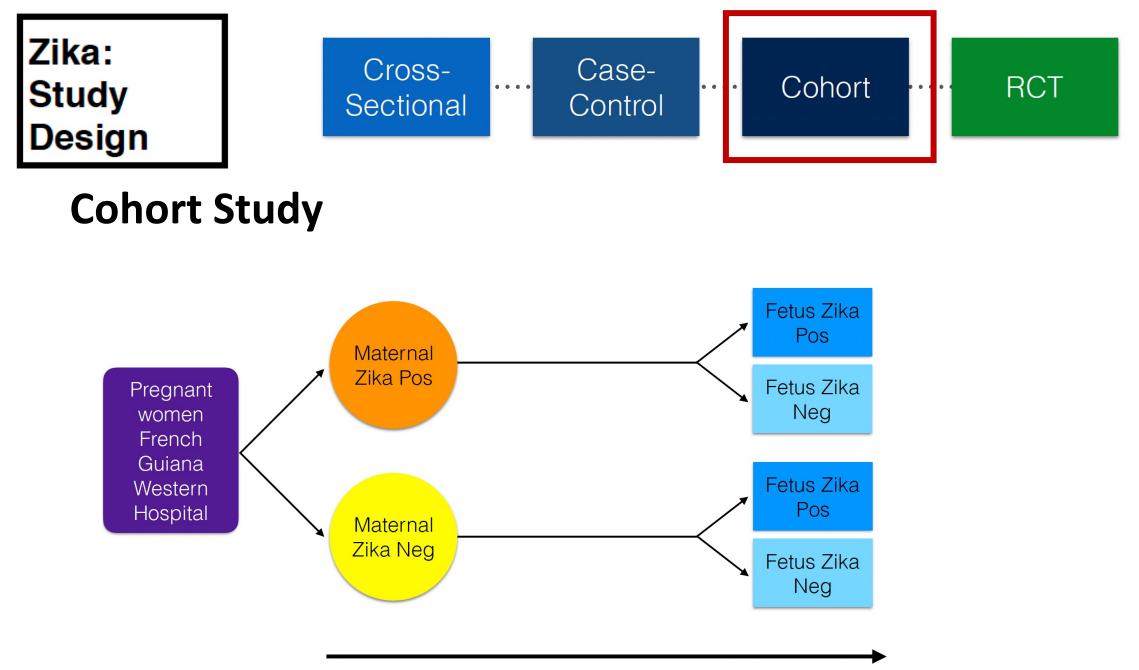


Cohort Study

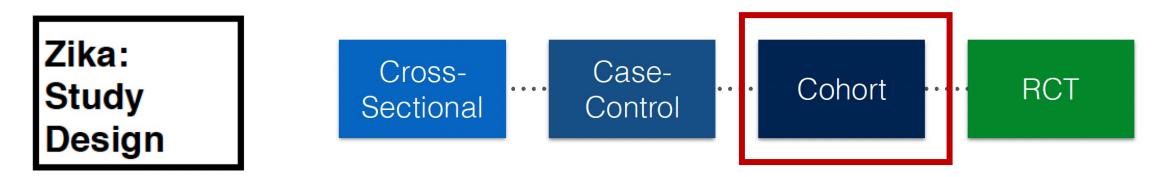
- Enrolled group of people who have a common experience or grouping.
- Age cohort, risk cohort
- General population sample
- Clinic based
- Prospective or retrospective



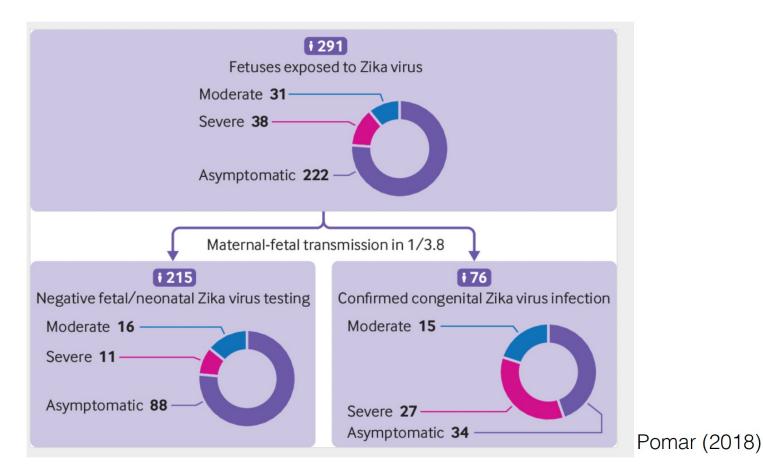


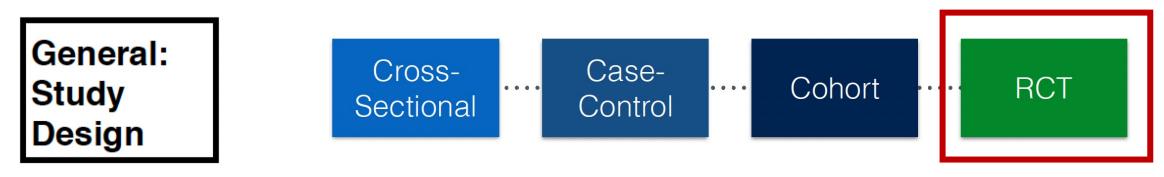


Time

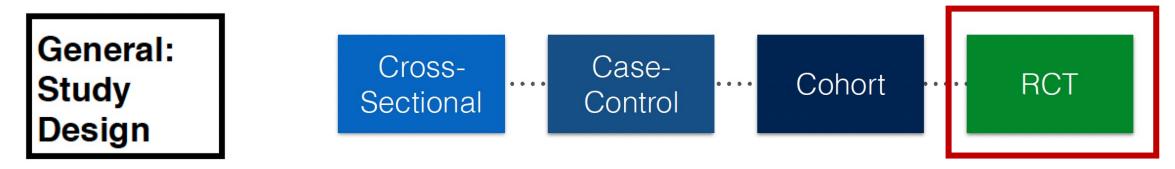


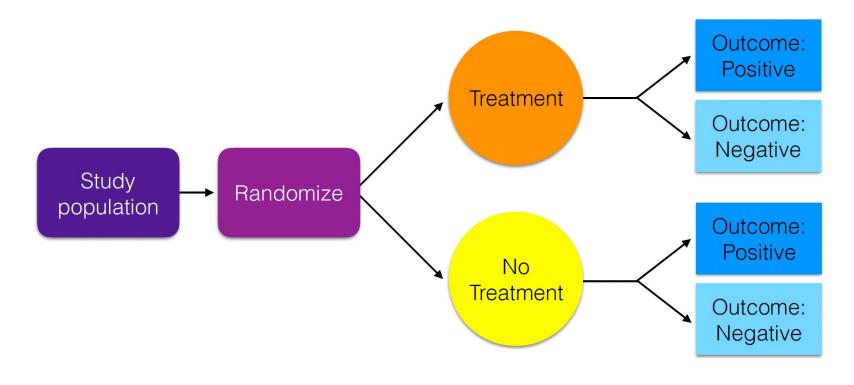
Cohort Study

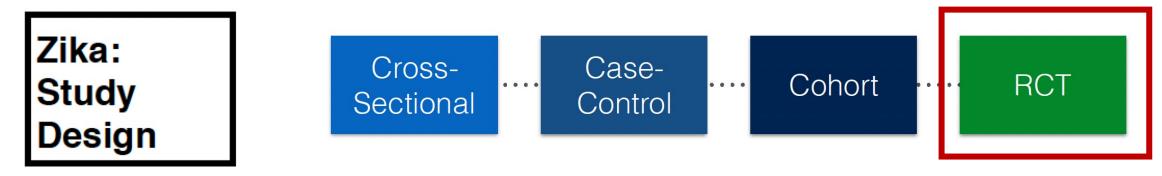


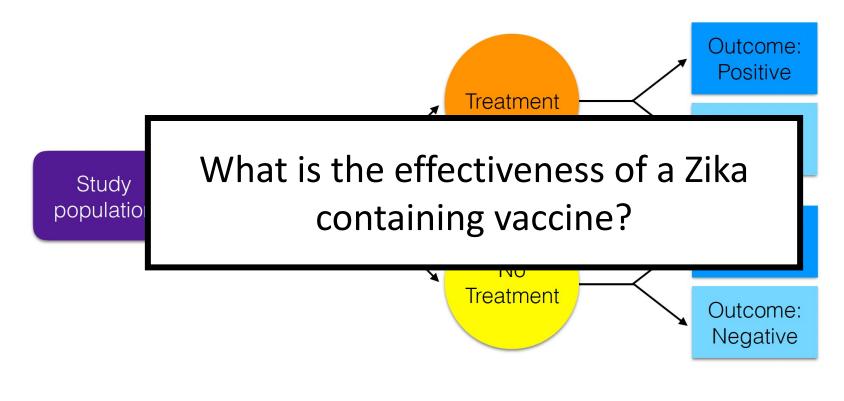


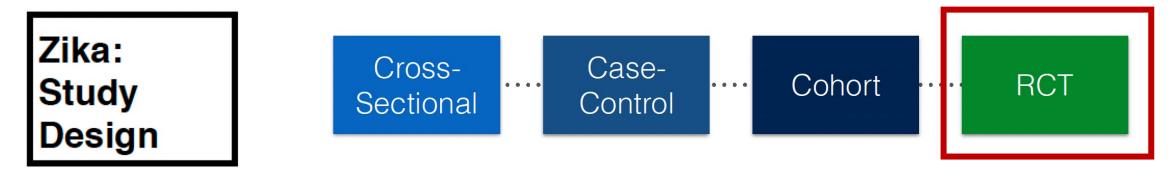
- Experiment in which subjects are **randomly allocated into groups** (test and control that are comparable) **to receive or not to receive** a preventative or a therapeutic procedure or intervention.
- Results are assessed by **comparison of rates** of disease, death, recovery, or other outcome **in the study groups**.
- Generally thought of as the most rigorous method of hypothesis testing.
- Randomization should be blinded!

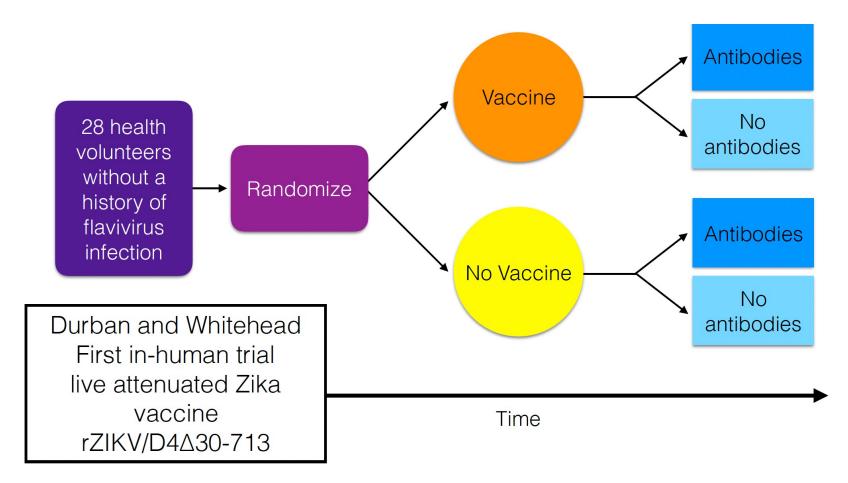




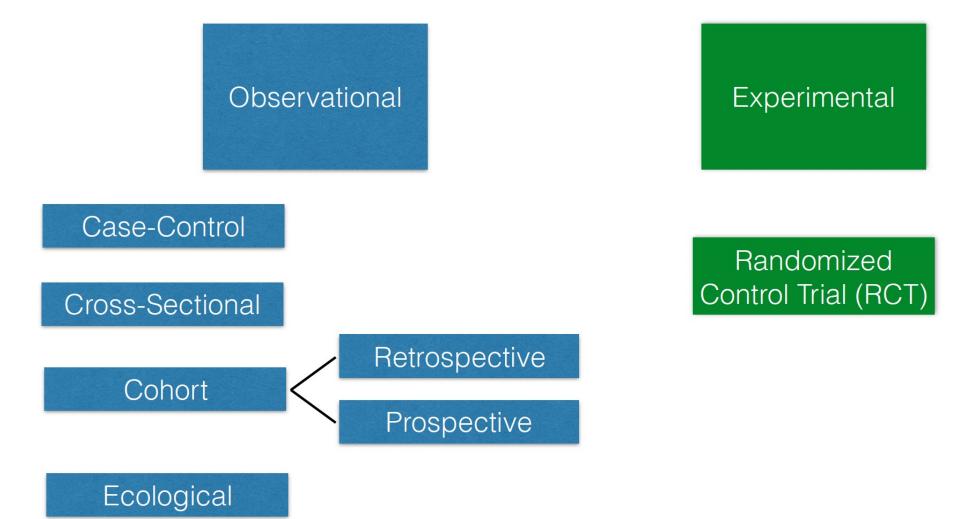




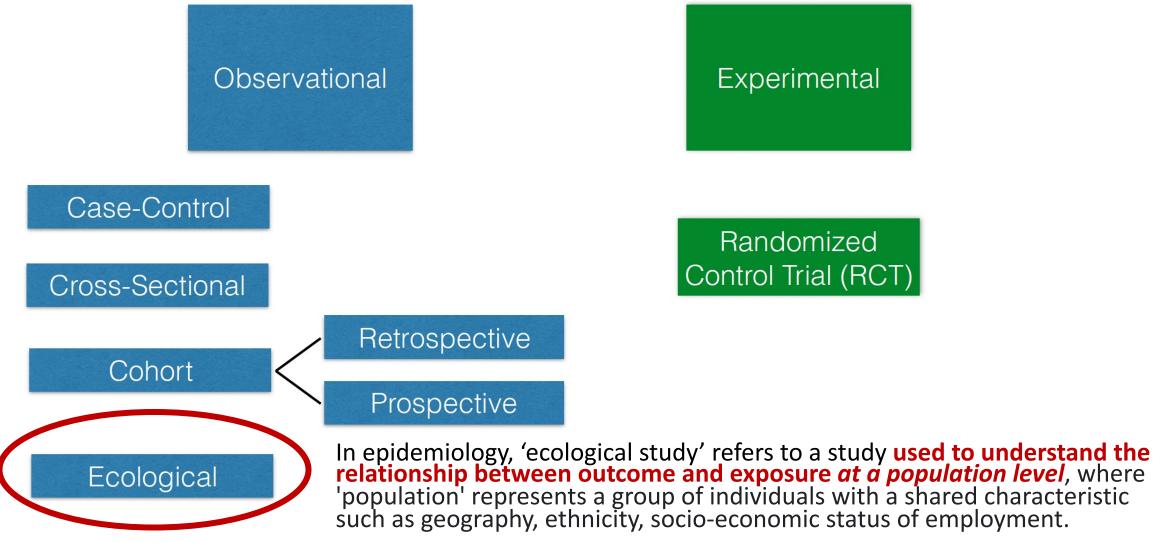




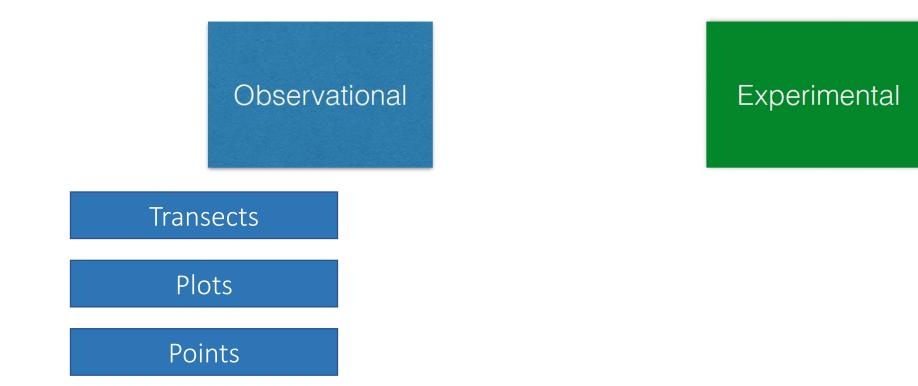
Different Study Types in Epidemiology

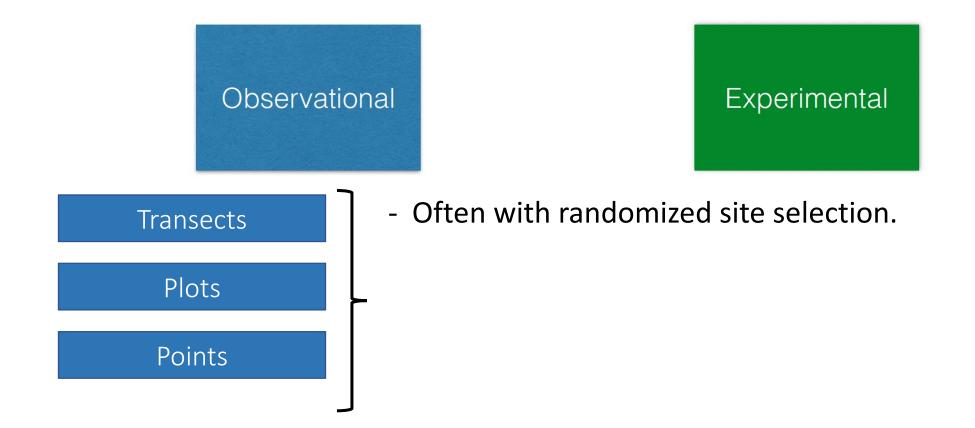


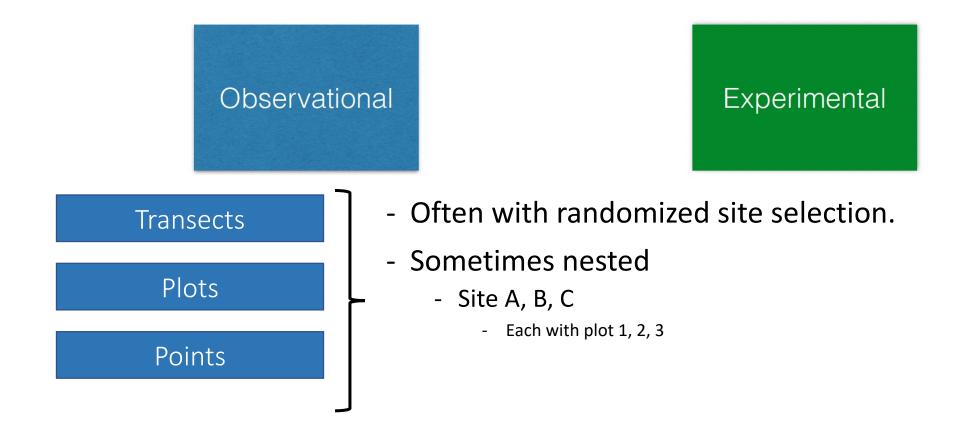
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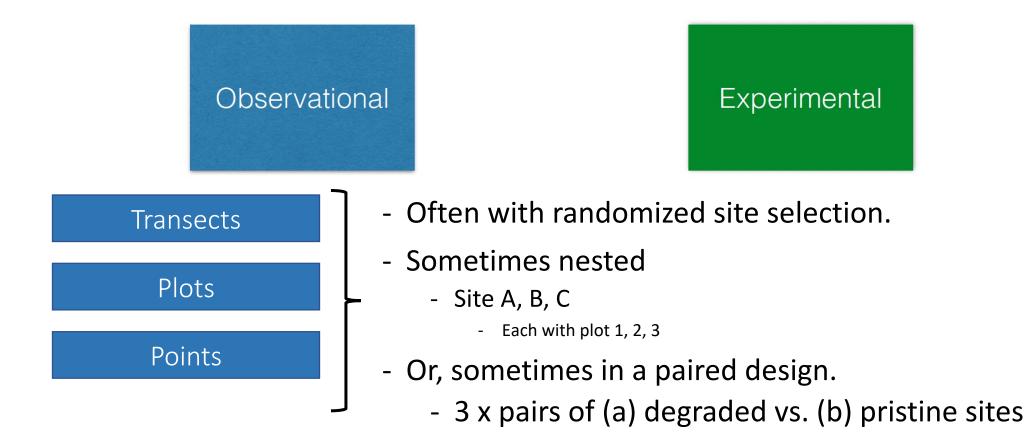


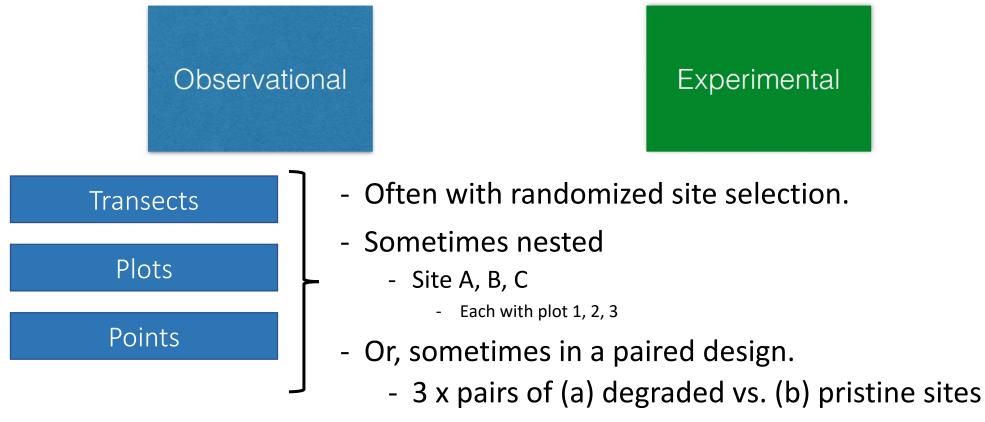
Ex: What is the correlation between prevalence of TB and country-level GDP?











- Replication is key!

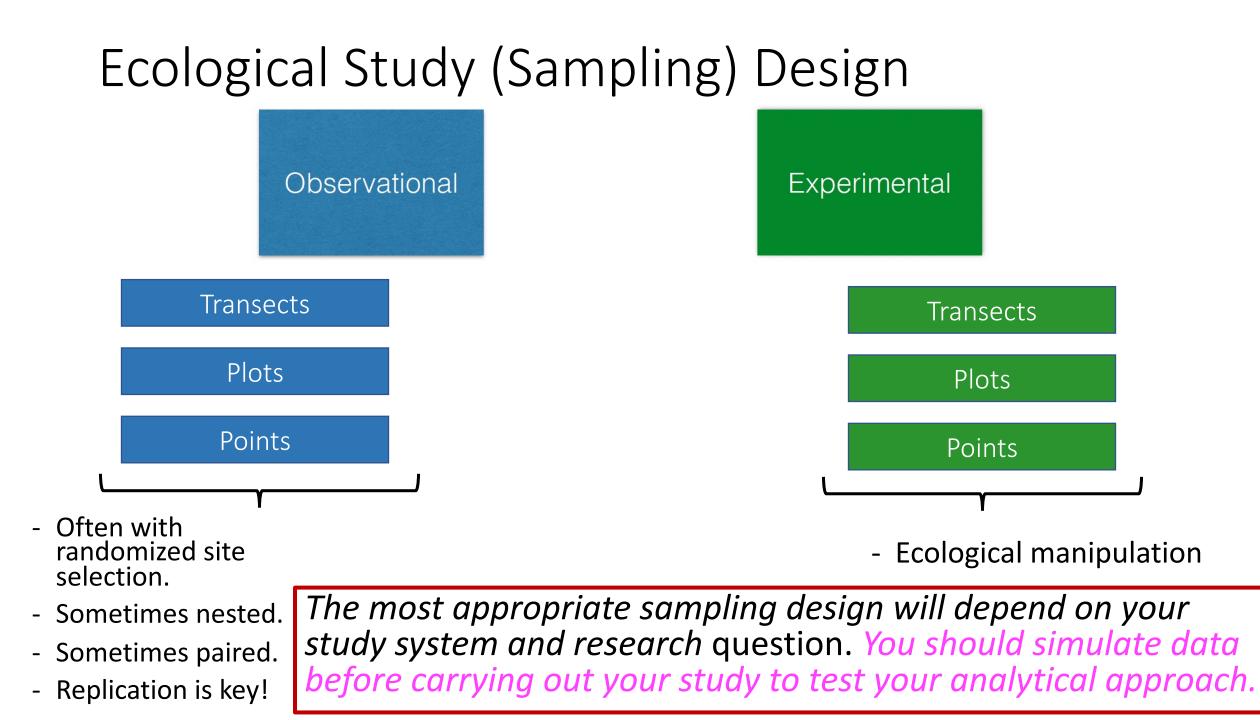


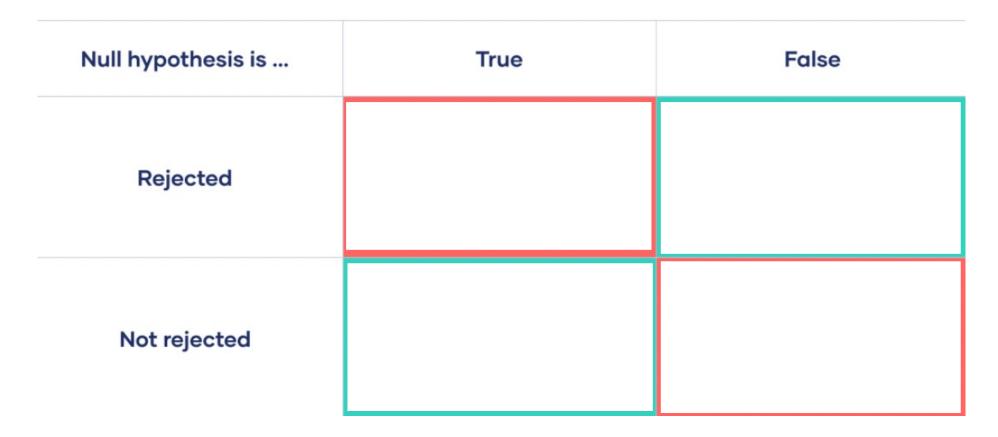
- Ecological manipulation

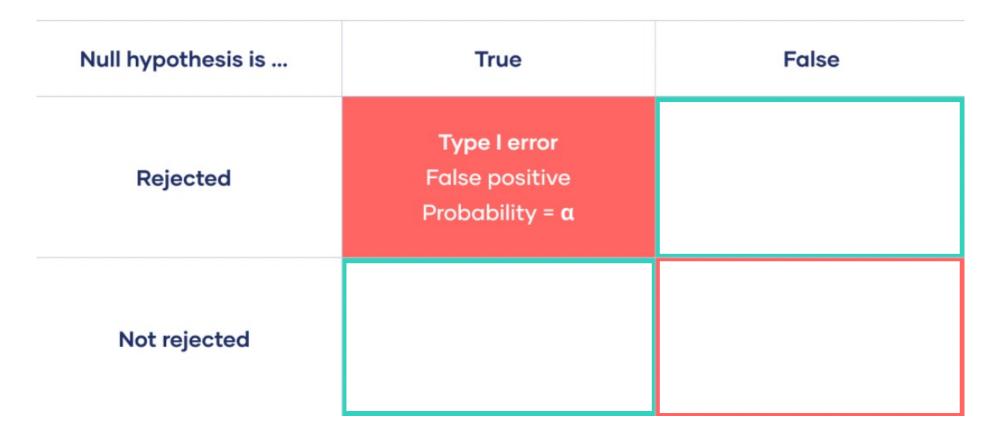
- Sometimes paired.

- Sometimes nested.

- Replication is key!





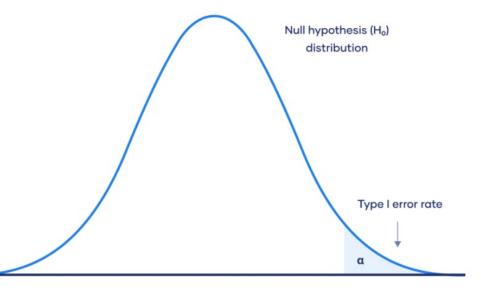


Null hypothesis is	True	False
Rejected	Type I error False positive Probability = α	
Not rejected		Type II error False negative Probability = β

Null hypothesis is	True	False
Rejected	Type I error False positive Probability = α	Correct decision True positive Probability = 1 - β
Not rejected	Correct decision True negative Probability = 1 - a	Type II error False negative Probability = β

- Type I error =false positive
 - rejecting the null hypothesis when it's actually true.
 - the test result says you have coronavirus, but you actually don't.

Probability of making a Type I error

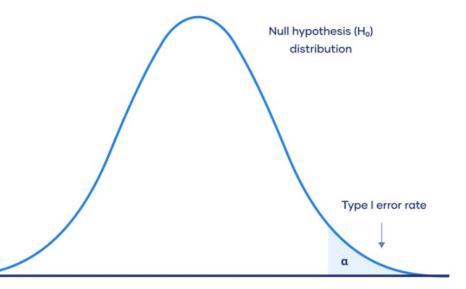


Probability of making a Type II error

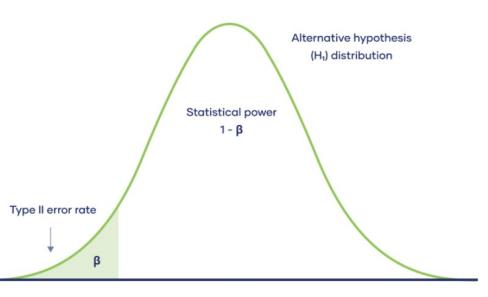
- Type I error =false positive
 - rejecting the null hypothesis when it's actually true.
 - the test result says you have coronavirus, but you actually don't.

- Type II error = false negative
 - failing to conclude there was an effect when there actually was
 - the test result says you don't have coronavirus, but you actually do.

Probability of making a Type I error

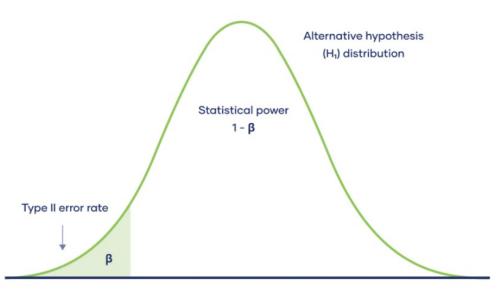


Probability of making a Type II error



Power analysis investigates the probability of detecting an effect if it is actually there.

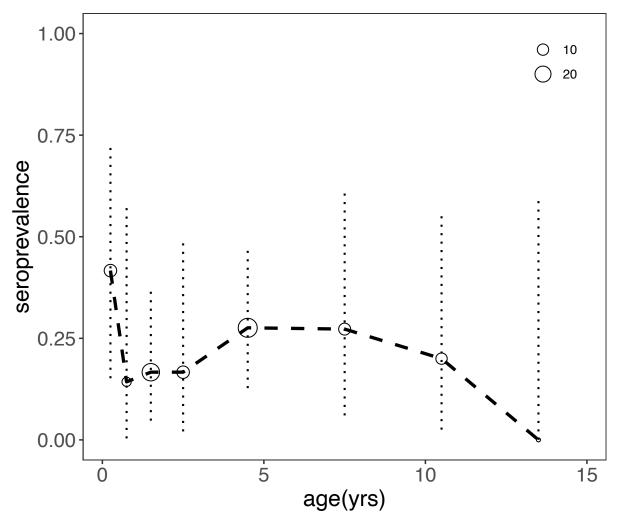
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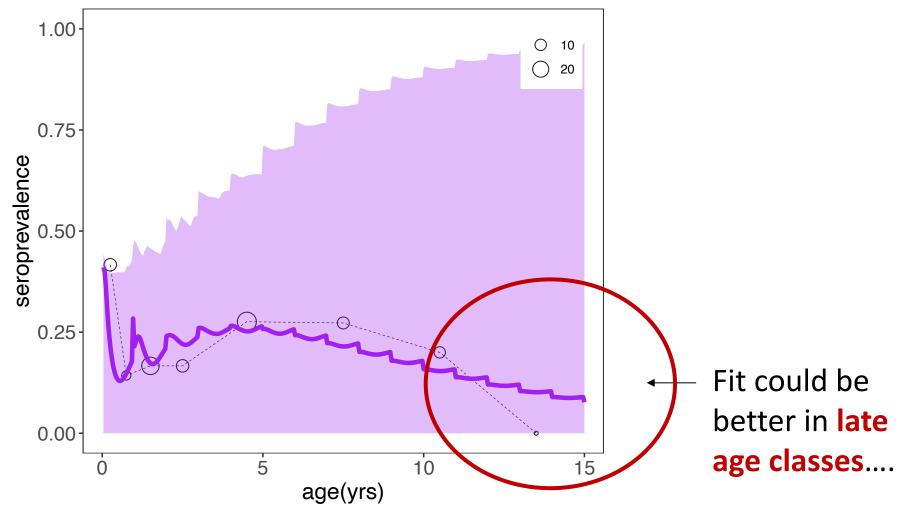
Power Analysis in R

- Program 'pwr' for statistical models
- Simulation and evaluation for mechanistic models

age-seroprevalence data for E. dupreanum Nipah virus

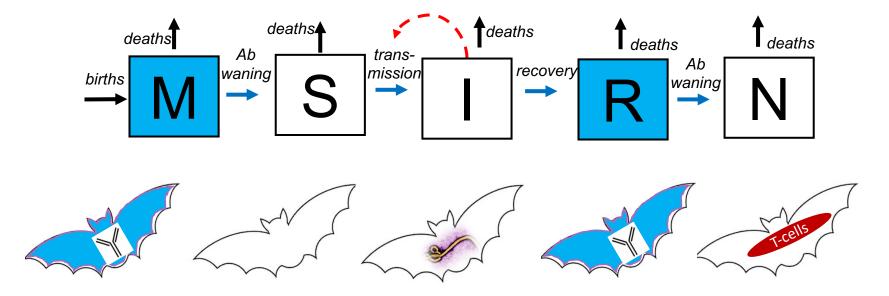


fitted model to age-seroprevalence data for E. dupreanum Nipah virus

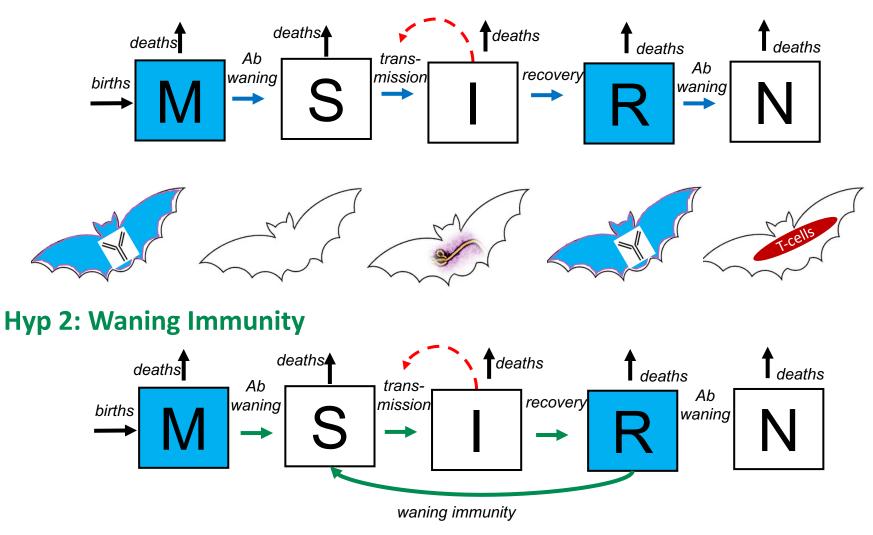


Brook et al. 2019 J of Animal Ecology

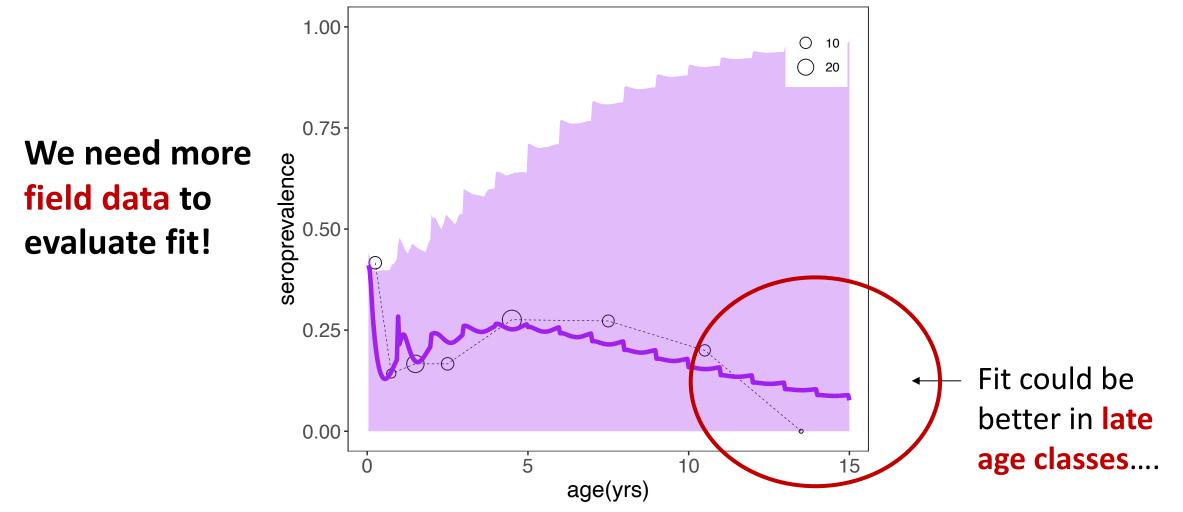
Hyp 1: Lifelong Immunity



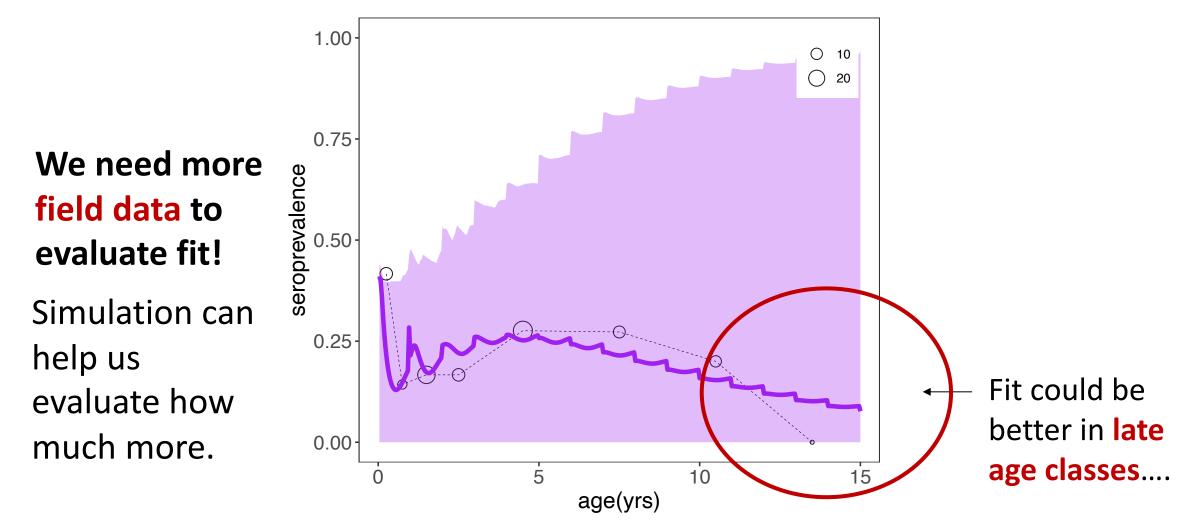
Hyp 1: Lifelong Immunity



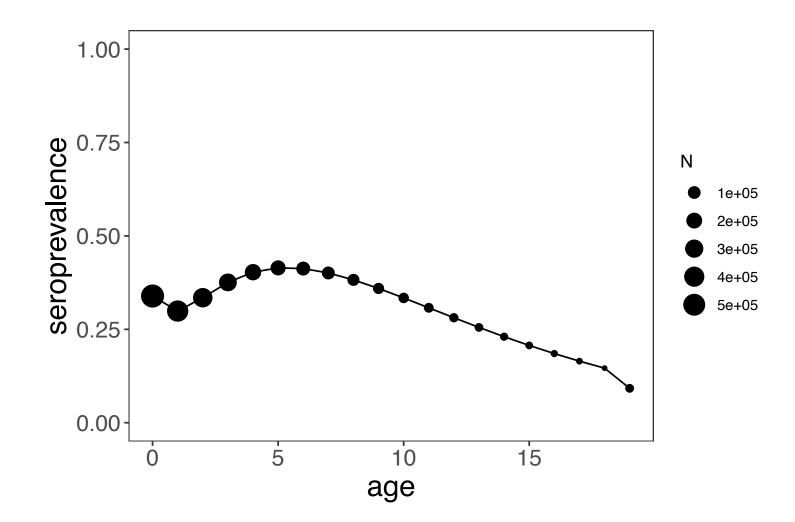
fitted model to age-seroprevalence data for E. dupreanum Nipah virus



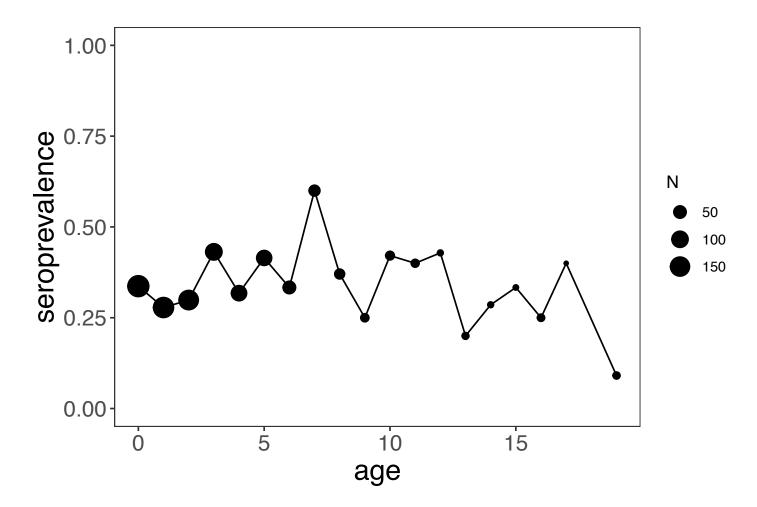
fitted model to age-seroprevalence data for E. dupreanum Nipah virus



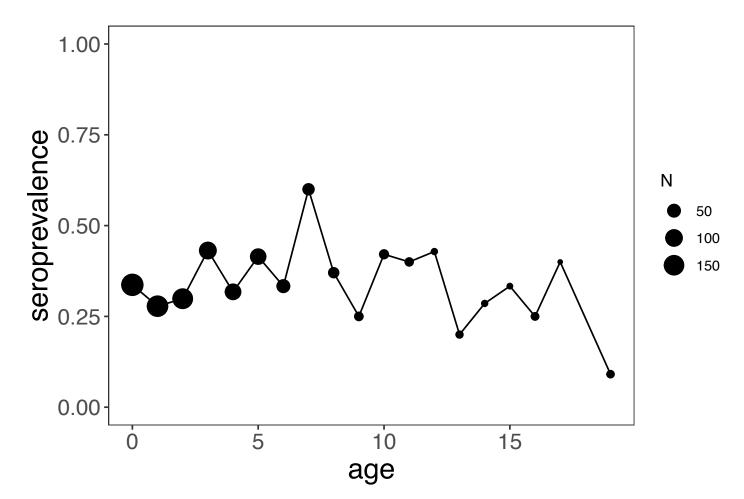
simulated data at full population size



simulated data after sub-sampling to 1000 bats

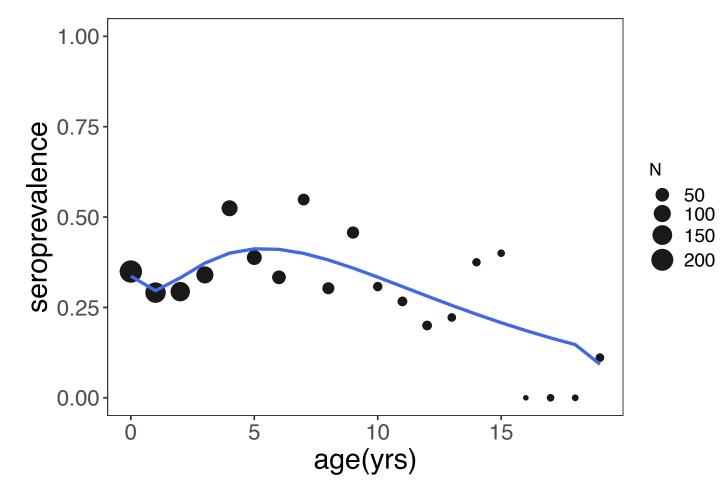


simulated data after sub-sampling to 1000 bats



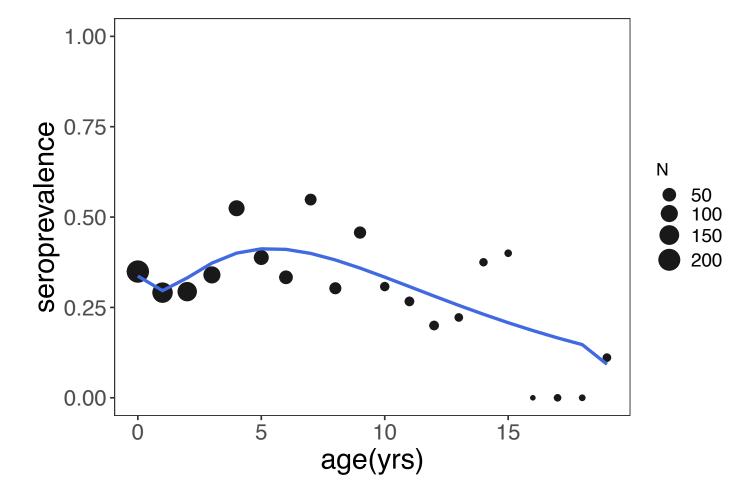
Would this plot look the same if we sub-sampled a second time?

fitted lifelong immunity model (hyp1) to data subsample



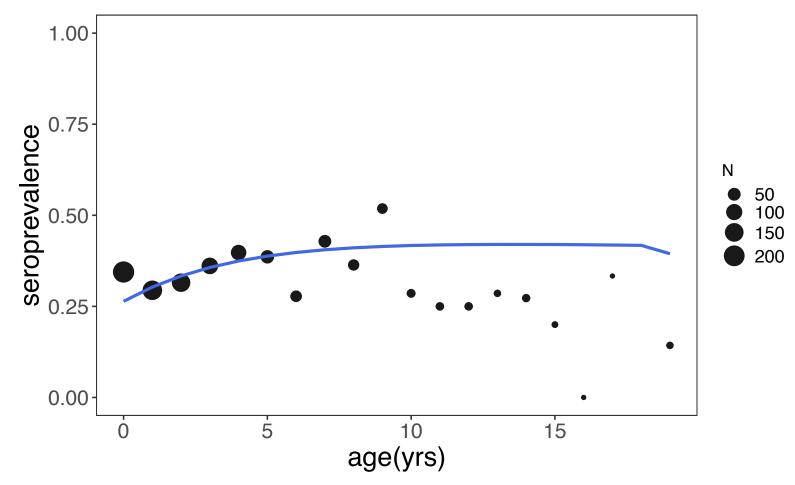
AIC = 1277

fitted lifelong immunity model (hyp1) to data subsample



AIC = 1277 What would change if we sub-sampled more data?

fitted waning immunity model (hyp2) to data subsample



AIC = 1291