SIS models for recurrent infections

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Outline

- Recurrent infections
- A simple SIS model without transmission
 - Complete-data likelihood
- Model extensions
 - Several subtypes of a pathogen
 - Transmission in small mixing groups
- Incomplete observations
 - ▶ Discrete-time Markov transition models
 - Continuous-time Markov processes with Bayesian data augmentation and reversible jump MCMC
- ➤ A computer class exercise of an SIS model without transmission and with completely observed data

Background

- Many infections can be considered recurrent, i.e., occurring as an alternating series of presence and absence of infection
 - ► Nasopharyngeal carriage of *Streptococcus pneumoniae*(Auranen et al.; Cauchemez et al.; Melegaro et al.)
 - Nasopharyngeal carriage of Neisseria meningitidis
 - multi-resistant Staphylococcus aureus (Cooper et al.)
 - ► HPV (human papilloma virus) infection
 - some parasitic infections (e.g. Nagelkerke et al.)
- Many of the above infections are asymptomatic, which means that observation requires active sampling of the underlying epidemiological states
- ► Exact acquisition and clearance times often remain unobserved ⇒ incompletely observed data

A binary Markov process

A simple model for a recurrent infection is the binary Markov process:

- ► The state of the individual alternates between "susceptible" (state 0) and "infected" (state 1)
- ▶ Hazard of acquiring infection is β :

P(acquisition in
$$[t,t+dt[|$$
 susceptible at time $t-)\simeq \beta dt$

▶ Hazard of clearing infection is μ :

P(clearance in
$$[t, t+dt[|infected at time t-) \simeq \mu dt]$$



Complete data

- For each individual *i*, the complete data include the times of acquisition and clearance during the observation period [0, *T*]:
 - Denote the ordered acquisition times for individual *i* during]0, T[by $\mathbf{t}^{(i)} = (t_{i1}, \dots, t_{iN_{o}^{(i)}})$
 - Denote the ordered clearance times for individual *i* during]0, T[by $\mathbf{r}^{(i)} = (r_{i1}, \dots, r_{iN_{10}^{(i)}})$
 - Denote the ordered acquisition and clearance times together as $u_{i1} = 0, u_{i2}, \dots, u_{i,N^{(i)}} = T$
 - Note: these include times 0 and T (so that $N^{(i)} = N_{01}^{(i)} + N_{10}^{(i)} + 2$)

Keeping track who is susceptible

- The binary indicators for individual i to be susceptible or infected at time t are denoted by $Y_0^{(i)}(t)$ and $Y_1^{(i)}(t)$, respectively
 - For the simple binary model, $Y_1^{(i)}(t) = 1 Y_0^{(i)}(t)$ for all times $t \ge 0$, i.e. the individual is always either susceptible or infected
 - ▶ Both indicators are taken to be *predictable*, i.e., their values at time *t* are determined by their initial values and the complete data observed up to time *t*−
 - In practice, this means that the values of $Y_0^{(i)}(t)$ and $Y_1^{(i)}(t)$ can be calculated from the observed data and these indicators can be used as shorthand when writing the likelihood function

Process of acquisitions

- In each individual, acquisitions (i.e. infections) occur with intensity $\beta Y_0^{(i)}(t)$
 - The intensity is β when the individual is in state 0 (susceptible) and 0 when the individual is in state 1 (infected)
- The probability density of the acquisition events is proportional to

$$\prod_{k=1}^{N^{(i)}} \left[\beta^{1}(u_{k} \text{ is time of acq.})_{e^{-\beta}Y_{0}^{(i)}(u_{k})(u_{k}-u_{k-1})} \right]$$

$$\times \beta^{N_{01}^{(i)}} \times \exp\{-\beta \sum_{k=1}^{N^{(i)}} Y_{0}^{(i)}(u_{k})(u_{k}-u_{k-1})\}$$

Process of clearances

- ▶ In each individual, clearances occur with intensity $\mu Y_1^{(i)}(t)$
 - The intensity is μ when the individual is in state 1 (infected) and 0 when then individual is in state 0 (susceptible)
- The probability density of the clearance events is proportional to

$$\begin{split} &\prod_{k=1}^{N^{(i)}} \left[\mu^{1} \big(u_{k} \text{ is time of clearance} \big)_{e^{-\mu} Y_{1}^{(i)} (u_{k}) (u_{k} - u_{k-1})} \right] \\ &= \mu^{N_{10}^{(i)}} \times \exp\{-\mu \sum_{k=1}^{N^{(i)}} Y_{1}^{(i)} (u_{k}) (u_{k} - u_{k-1})\} \end{split}$$

Complete data likelihood

▶ The likelihood function of parameters β and μ , based on the complete data from individual i:

$$\underbrace{\frac{f(\mathbf{t}^{(i)}, \mathbf{r}^{(i)} | \beta, \mu)}{L_{i}(\beta, \mu; \mathbf{t}^{(i)}, \mathbf{r}^{(i)})}}_{L_{i}(\beta, \mu; \mathbf{t}^{(i)}, \mathbf{r}^{(i)})}$$

$$= \beta^{N_{01}^{(i)}} \mu^{N_{10}^{(i)}} \times e^{-\sum_{k=1}^{N_{01}^{(i)}} (\beta Y_{0}^{(i)}(u_{k}) + \mu Y_{1}^{(i)}(u_{k}))(u_{k} - u_{k-1})}$$

$$= \beta^{N_{01}^{(i)}} \mu^{N_{10}^{(i)}} \times \exp\left(-\int_{0}^{T} \{\beta Y_{0}^{(i)}(u) + \mu Y_{1}^{(i)}(u)\} du\right)$$

▶ Likelihood based on all M individuals is $\prod_{i=1}^{M} L_i(\beta, \mu; \mathbf{t}^{(i)}, \mathbf{r}^{(i)})$

Model extension 1: Several subtypes of infection

- ► If the pathogen has *K* subtypes/strains, infections with each can be modelled as separate states
- Let the hazards from making a transition from state s to state r be α_{sr} , $s, r \in \{0, \dots, K\}$
 - This means that infection for a susceptible occurs with rate $\alpha_{0r}, r = 1, \dots, K$
 - Also direct transitions from infection with type s to infection with type r are possible if we allow $\alpha_{sr} > 0$ also when s > 0
- ► Transitions for each individual are now modelled as follows:

P(individual i makes transition from s to r in $[t, t + dt) \simeq \alpha_{sr} Y_s^{(i)}(t) dt$



Model extension 2: Modelling transmission

- ➤ The hazard of infection may depend on the presence of infected individuals in the family, day care group, school class etc.
 - The statistical unit is defined by the relevant mixing group
- ▶ Denote $H_t^{(i,fam)}$ the joint infection status of all members in the mixing group (e.g. family) of individual i at time t-
- For a single-type pathogen, infections are modeled as follows:

$$\text{P(infection for i in } [t,t+dt[|H_{t-}^{(i,\text{fam})}) \simeq \alpha_{01}^{(i)}(t) Y_0^{(i)}(t) dt \equiv \frac{\beta \, C^{(i)}(t)}{M_{\text{fam}}^{(i)}-1} Y_0^{(i)}(t) dt$$

where $C^{(i)}(t)$ is the number of infected individuals in i's family (of size $M_{fam}^{(i)}$) at time t-; note that $C^{(i)}(t)$ can be calculated from the state-indicator variables of i's family members

Complete data likelihood: the general expression

► For *M* individuals followed from time 0 to time *T*, the complete data record all transitions between states *s* and *r*:

$$x_{\text{complete}} = \{ T_{sr}^{(ik)}; \ s, r = 0, 1 \ (s \neq r), \ k = 1, \dots, N_{sr}^{(i)}(T), \ i = 1, \dots, M \}$$

The likelihood of the rate parameters θ , based on the complete (event-history) data

$$\underbrace{L(\theta; x_{\text{complete}} | \theta)}_{i} = \prod_{i}^{N} \prod_{r \neq s} \prod_{s}^{N_{sr}^{(i)}(T)} \left[\alpha_{sr}^{(i)}(T_{sr}^{(ik)}) \times \exp\left(-\int_{0}^{T} \alpha_{sr}^{(i)}(u) Y_{s}^{(i)}(u) du\right) \right]$$

Remarks

- ▶ Although the likelihood expression was written as a product of individual likelihood contributions, it is valid even if the individual processes are dependent on the infection outcomes of *other* individuals (as when modeling transmission)
- ► The likelihood is correctly normalized with respect to any number of events occurring between times 0 and *T*
 - ► This is crucial when performing MCMC computations through data augmentation with an unknown number of events
- ► These results are somewhat non-trivial and require the theory of counting processes (Andersen et al.)

Incomplete observations

- Usually we do not observe complete data (= all infection and clearance times)
- ▶ Instead, the status (infection stage) $X_j^{(i)}$ of each individual is observed at pre-defined times $t_i^{(i)}$
 - This creates incomplete data: the process is only observed at discrete times (panel data)
 - The observed data likelihood is now a complicated function of the model parameters
- How to estimate the underlying continuous process from discrete observations?
 - ► (A) Discrete-time Markov transition model
 - ▶ (B) Continous-time Markov transition model with Bayesian data augmentation

(A) Markov transition models

- Treat the problem as a <u>discrete-time</u> Markov transition model
- For simplicity, assume equal-length $(= \Delta)$ time steps indexed by $t=1,2,3,\ldots$, and time-homogeneous one-time-step transition probabilities:

$$p_{sr} \equiv P(X_{t+1}^{(i)} = r | X_t^{(i)} = s)$$
 for $t = 1, 2, ...; s, r = 0, ..., K$

This defines matrix P_{Δ} of one-step transition probabilities with entries $[P_{\Delta}]_{sr} = p_{sr}$, where $\sum_{r} p_{sr} = 1$ for each $s = 0, \dots, K$



Likelihood function under the discrete model

- ▶ Denote the observed numbers of one-step transitions in all study subjects by N_{sr} , s, r = 0, ..., K
- ▶ The likelihood of the unknown transition probabilities (i.e. the elements of matrix P_{Δ})) is now particularly simple:

$$L(P_{\Delta}) = \prod_{s,r} \left[p_{sr}(\Delta) \right]^{N_{sr}(T)} = \prod_{s,r} \left[P_{\Delta} \right]_{sr}^{N_{sr}(T)}$$

When observation are actually made at intervals $k\Delta$ (e.g. Δ = day and k=28), the likelihood is

$$L(P_{\Delta}) = \prod_{s,r} [P_{\Delta}^{k}]_{sr}^{N_{sr}(T)}$$

Modeling transmission

- In a mixing group of size M, the state space is $\chi \times \chi \times \dots \chi$, where χ is the state space for one individual
 - lacktriangle In a binary infection model, the individual state space is $\{0,1\}$
 - In a family of three individuals the state space is then $\{(0,0,0),(1,0,0),(0,1,0),(0,0,1),(1,1,0),(1,0,1),(0,1,1),(1,1,1)\}$
 - For M individuals, the dimension of the state space is 2^M
- ► Application to pneumococcal carriage in families (Melegaro et al.)
 - ► The transition probability matrix in a family of 3 (next page), assuming the same probabilities (per day) for each family member
 - Notation: $q_{ii} = 1$ (sum of the non-diagonal elements on the ith row)

Transition probability matrix

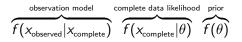
$$P_{\Delta} = \begin{pmatrix} 0.0.0 & (1.0.0) & (0.1.0) & (0.0.1) & (1.1.0) & (1.0.1) & (0.1.1) & (1.1.1) \\ q_{11} & \kappa & \kappa & \kappa & 0 & 0 & 0 & 0 \\ \mu & q_{22} & 0 & 0 & \beta/2 + \kappa & \beta/2 + \kappa & 0 & 0 \\ \mu & 0 & q_{33} & 0 & \beta/2 + \kappa & 0 & \beta/2 + \kappa & 0 \\ \mu & 0 & 0 & q_{44} & 0 & \beta/2 + \kappa & \beta/2 + \kappa & 0 \\ 0 & \mu & \mu & 0 & q_{55} & 0 & 0 & \beta + \kappa \\ 0 & \mu & 0 & \mu & 0 & q_{66} & 0 & \beta + \kappa \\ 0 & 0 & \mu & \mu & 0 & 0 & q_{77} & \beta + \kappa \\ 0 & 0 & 0 & 0 & \mu & \mu & \mu & q_{88} \end{pmatrix}$$

Potential problems

- ► The dimension of the state space
 - With M individuals and K+1 types of infection, the dimension of the state space is $(K+1)^M$
 - With 13 serotypes and 25 individuals (see Hoti et al.), the dimension is $\sim 4.5\times 10^{28}$
- Non-Markovian sojourn times
 - e.g. a Weibull duration of infection may be more realistic than the exponential one
- Handling of varying observation intervals and individuals with completely missing data are still cumbersome

(B) Bayesian data augmentation

- ▶ If we retain the continuous-time model formulation, unobserved event times of acquisition and clearance can be taken as additional model unknowns (parameters)
- Statistical inference on all model unknowns (parameters θ and event times x_{complete})



- ► The observed data $x_{observed}$ contain only the current status of infection in each study subject at predefines time points
- ► The observation model often only ensures agreement with the observed data (as an indicator function)
- The computational problem: how to sample from $f(x_{\text{complete}}|x_{\text{observed}}, \theta)$?

Sampling algorithm

- ► Initialize the model parameters and the latent processes (i.e. the unobserved event times)
- For each individual, update the unobserved event times
 - Update the current iterates of the event times using standard MH
 - Add/delete episodes of infection and non-infection using reversible jump MH
 - with 0.5 probability propose to add a new episode
 - with 0.5 probability propose to delete an existing episode
- Update the model parameters using single-step MH
- Iterate the above updating steps for a given number of MCMC iterations

Adding/deleting episodes

- Choose one interval at random from among the K sampling intervals (see page+2)
- ► Choose to add an episode (delete an existing episode) within the chosen interval with probability $\pi_{\text{add}} = 0.5$ ($\pi_{\text{delete}} = 0.5$)
 - If 'add', choose random event times $\bar{t}_1 < \bar{t}_2$ uniformly from Δ (= the length of the sampling interval). These define the new episode.
 - If 'delete', delete the two event times
- ► The 'add' move is accepted with probability (Metropolis-Hastings acceptance ratio)

$$\min \left(\frac{f(x_{\text{observed}} | x_{\text{complete}}^*) f(x_{\text{complete}}^* | \theta) q(x_{\text{complete}} | x_{\text{complete}}^*)}{f(x_{\text{observed}} | x_{\text{complete}}) f(x_{\text{complete}} | \theta) q(x_{\text{complete}}^* | x_{\text{complete}})}, 1 \right)$$

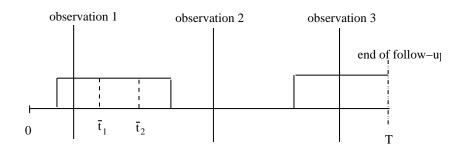
Adding/deleting episodes cont.

► The ratio of the proposal densities is

$$\frac{q(x_{\text{complete}}|x_{\text{complete}}^*)}{q(x_{\text{complete}}^*|x_{\text{complete}})} = \frac{\pi_{\text{delete}} \frac{1}{K} \frac{1}{L}}{\pi_{\text{add}} \frac{1}{K} \frac{1}{L} \frac{2}{\Delta^2}} = \frac{\Delta^2}{2}$$

- ► The ratio of the proposal densities in the 'delete' move is the inverse of the expression above
- Technically, the add/delete step relies on so called reversible jump MCMC (see page+2)
- Reversible jump types should be devised to assure irreducibility of the Markov chain
- For a more complex example, see e.g. Hoti et al.

Adding/deleting latent processes cont.



The number of sampling intervals K= 4

The number of 'sub-episodes' within the second interval L=2

Reversible jump MCMC

- "When the number of things you don't know is one of the things you don't know"
- For example, under incomplete observation of the previous (Markov) processes, the exact number of events is not observed
- This requires a joint model over 'sub-spaces' of different dimensions
- And a method to do numerical integration (MCMC sampling) in the joint state space

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