# The Bathtub Model of Epidemiology

Modeling Incidence, Prevalence, Recurrence, and Mortality

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# Introduction to the Bathtub Model of Epidemiology

#### The Bathtub Model of Epidemiology: A Simple Analogy for a Complex Reality:

- The Bathtub analogy is a widely used analogy that helps to visualize and understand the relationship between the incidence and prevalence of a disease within a population.
- It simplifies complex epidemiological concepts by comparing the burden of a disease to the amount of water in a bathtub.
- This model is particularly useful for explaining how the number of existing cases is influenced by the rate of new cases and the rate at which people either recover or die.
- By adding a simple modification, the model can also effectively illustrate the impact of disease recurrence.

# The Bathtub Analogy in Epidemiology

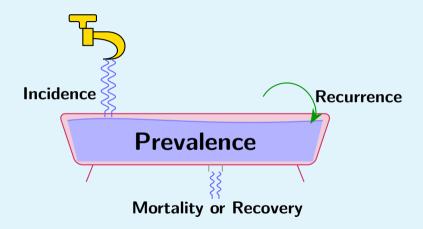


Figure 1: The Bathtub Model of Epidemiology (Epidemiological Bathtub)

### The Components of the Bathtub Model

The analogy consists of several components that represent key epidemiological concepts:

- **1** The Bathtub: a specific population or community.
- **② The Water in the Tub:** Prevalence (total existing cases).
- **The Faucet (Inflow):** Incidence (brand new cases).
- The Drains (Outflow): Recovery or death.
- **The Recycling Pump:** Recurrence (recovered individuals who become sick again).

#### **Scenarios with Recurrence**

The total inflow is now **Incidence** + **Recurrence**. The prevalence changes based on this new balance:

• Prevalence Increases when:

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(Incidence + Recurrence) > (Recovery Rate + Mortality Rate)
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• Prevalence Decreases when:

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(Incidence + Recurrence) < (Recovery Rate + Mortality Rate)
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• Prevalence is Stable (Endemic State) when:

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(Incidence + Recurrence) = (Recovery Rate + Mortality Rate)
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# The Expanded Dynamic Relationship

- With the inclusion of recurrence, the level of water in the tub (prevalence) is now determined by two inflows—the faucet (new cases) and the recurrence pipe (relapsed or reinfected cases)—and one outflow (the drain).
- The relationship can now be understood as:

# Prevalence is influenced by (Incidence + Recurrence) $\times$ Duration of Disease

- This more nuanced view shows that a high prevalence (a full bathtub) can be caused by:
  - ▶ High incidence of new cases (a gushing faucet).
  - ▶ A high rate of recurrence (a powerful pump sending recovered individuals back into a diseased state).
  - ▶ A long duration of the disease (a partially clogged drain).

### The Basic Dynamic System

- The number of existing cases (Prevalence) is a balance between new cases (Incidence) flowing in and cases leaving through recovery or death.
- For many diseases, "recovery" is not permanent. Recurrence acts as a second inflow, refilling the tub with former cases.

### **Applications in Public Health with Recurrence**

This expanded model is critical for public health professionals as it highlights the need for a wider range of interventions:

- **Primary Prevention**: These efforts, like vaccination or health education, are aimed at **turning down the faucet** to reduce the incidence of completely new cases.
- Treatment and Care: Effective treatments and therapies widen the drain by increasing the rate of recovery and reducing mortality.
- Secondary and Tertiary Prevention: These interventions are aimed at blocking or slowing the recurrence pipe.
  - ► This could include longer-term follow-up care, rehabilitation programs, or secondary preventive medications to prevent a relapse or reinfection.
  - ► For many conditions, from substance abuse to cancer and infectious diseases like tuberculosis, preventing recurrence is a key strategy for managing the overall disease burden.

#### Limitations of the Model

- While the Bathtub Model is a useful educational tool, it is a simplification and has its limitations.
- The model assumes a stable population and doesn't easily account for factors like migration (people moving in or out of the "bathtub") or changes in disease diagnostic criteria.
- It also treats all individuals with the disease as a homogenous group, without considering variations in severity or duration of illness.
- However, even in its simple form, the model effectively communicates the fundamental dynamics of disease in a population.

### **Summary**

- **Epidemiological Bathtub** provides a powerful framework for understanding the dynamic relationship between incidence, prevalence, recovery, and mortality.
- A high prevalence might be due to high incidence, long disease duration, or a **high rate** of recurrence.
- This expanded model is crucial for planning public health interventions for diseases without lifelong immunity.
- It forces us to ask: should we focus on preventing new cases (faucet), developing better treatments (drains), or improving long-term immunity (plugging the recurrence pump)?
- It clearly illustrates that controlling a disease often requires a multi-pronged approach: not only preventing new cases and treating existing ones but also actively working to keep recovered individuals healthy.

#### References



Incidence vs prevalence and the epidemiologist's bathtub https://www.publichealth.hscni.net/node/5277



https://s4be.cochrane.org/blog/2020/11/06/prevalence-vs-incidence-what-is-the-difference/



Amorim LD, Cai J. Modelling recurrent events: a tutorial for analysis in epidemiology. Int J Epidemiol. 2015 Feb;44(1):324-33. doi: 10.1093/ije/dyu222. Epub 2014 Dec 9. PMID: 25501468; PMCID: PMC4339761.

# Thank You !!!

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