

## **Outline**

- 1. Representing vaccination in dynamic models
- 2. Herd immunity and the critical vaccination threshold
- 3. Dynamics of vaccine introduction
- 4. Age-specific effects and age-targeted vaccination
  - (Sometimes) perverse effects of vaccination
- 5. Waning immunity

# Vaccine-related questions that may be addressed by mathematical models

- •What is acceptable vaccine product profile?
- •What coverage must be achieved?
- •What should be the target population?
- •What should the vaccine schedule be?
- •What is the appropriate trial design and sample size?
- Interpretation of post-introduction dynamics

## **Recall: the SIR model**



$$\frac{dS}{dt} = -\lambda_t S$$

$$\frac{dI}{dt} = \lambda_t S - I\sigma$$

$$\frac{dR}{dt} = I\sigma$$

## The SIR model + vaccination

$$\frac{dS}{dt} = -\lambda_t S - xS$$

$$\frac{dI}{dt} = \lambda_t S - I\sigma$$

$$\frac{dR}{dt} = I\sigma + xS$$

x = proportion successfully immunized = proportion receiving vaccine \* vaccine efficacy = p \* VE

### The SIR model - WITH DEMOGRAPHY

$$\frac{dS}{dt} = -\lambda_t S - \mu S + \mu N$$

$$\frac{dI}{dt} = \lambda_t S - I \sigma - \mu I$$

$$\frac{dR}{dt} = I \sigma - \mu R$$

## A general model of vaccination

$$\frac{dS}{dt} = -\lambda S - \mu S + (1-p_1 v)\mu N - p_2 v S$$

$$\frac{dI}{dt} = \lambda S - \sigma I - \mu I$$

$$\frac{dR}{dt} = \sigma \mathbf{I} - \mu \mathbf{R}$$

$$\frac{dV}{dt} = p_1 v \mu N + p_2 v S - \mu V$$

#### Infection

#### Recovery

#### **Vaccination**

p<sub>1</sub> - fraction vaccinated at birth

p<sub>2</sub> - fraction susceptibles (in S)

vaccinated, at random

v - vaccine efficacy

Draw it!

# A model of leaky vaccination

$$\frac{dS_u}{dt} = -\lambda_u S_u - \mu S_u + (1-p_1)\mu N$$

$$\frac{dS_v}{dt} = -\lambda_v S_v - \mu S_v + (p_1)\mu N$$

$$\frac{dI}{dt} = \lambda_u S_u + \lambda_v S_v - \sigma I - \mu I$$

$$\frac{dR}{dt} = \sigma I - \mu R$$

$$\frac{dV}{dt} = p_1 \mu N$$

### Key

#### Infection

Recovery

Vaccination

p<sub>1</sub> - fraction vaccinated at birth

v - vaccine efficacy

Where does v (VE) come in?

Vaccinated and unvaccinated subject to different force of infection.

Unvaccinated 
$$\lambda_u(t) = \beta \frac{I(t)}{N}$$

Vaccinated 
$$\lambda_v(t) = (1 - v)\beta * \frac{I(t)}{N}$$

How many to vaccinate to slow an epidemic?: the herd immunity threshold (HIT)

s = proportion susceptible

To stop epidemic,  $R_e$  must be < 1

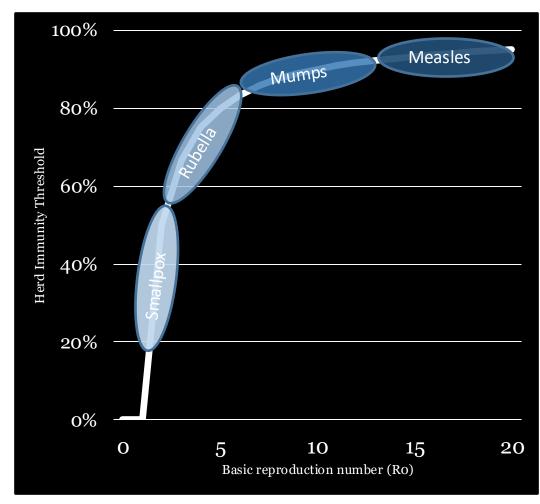
means  $R_0 * s < 1$ 

Rearranging, s must be  $< 1/R_0$ 

#### In words:

fraction of susceptibles in population must be lower than  $1/R_0$  to slow transmission

• HIT =  $1 - 1/R_0$ 



# How many to vaccinate to slow an epidemic?: critical vaccine coverage (p<sub>c</sub>)

#### Vaccines are not perfect!

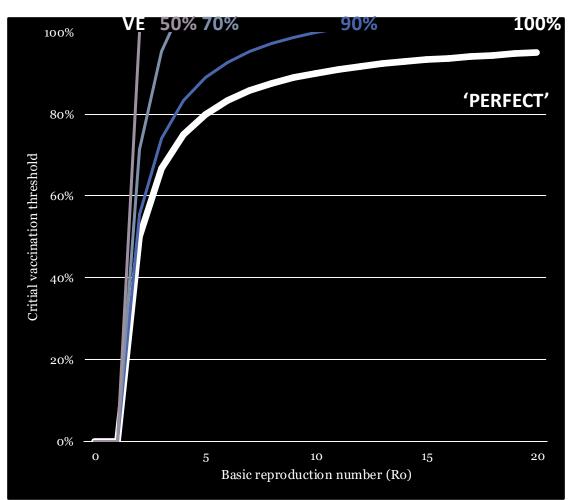
Proportion of the population that must be vaccinated to achieve herd immunity threshold

assuming that vaccination takes place at random

Fraction immune by vaccination = fraction vaccinated \* VE

$$HIT = 1 - 1/R_0$$

$$p_c = (1 - 1/R_0) / VE$$

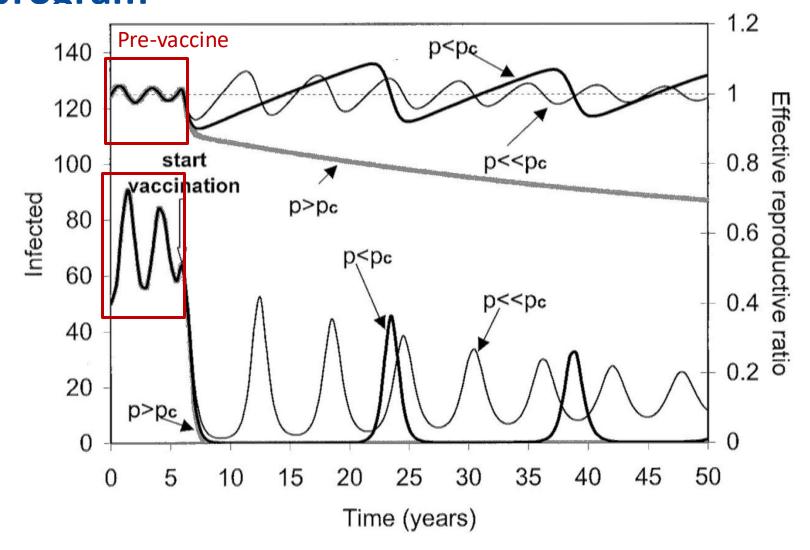


\*If VE = 100%, p<sub>c</sub> = HIT, but lower VE means p<sub>c</sub> is <u>higher</u>

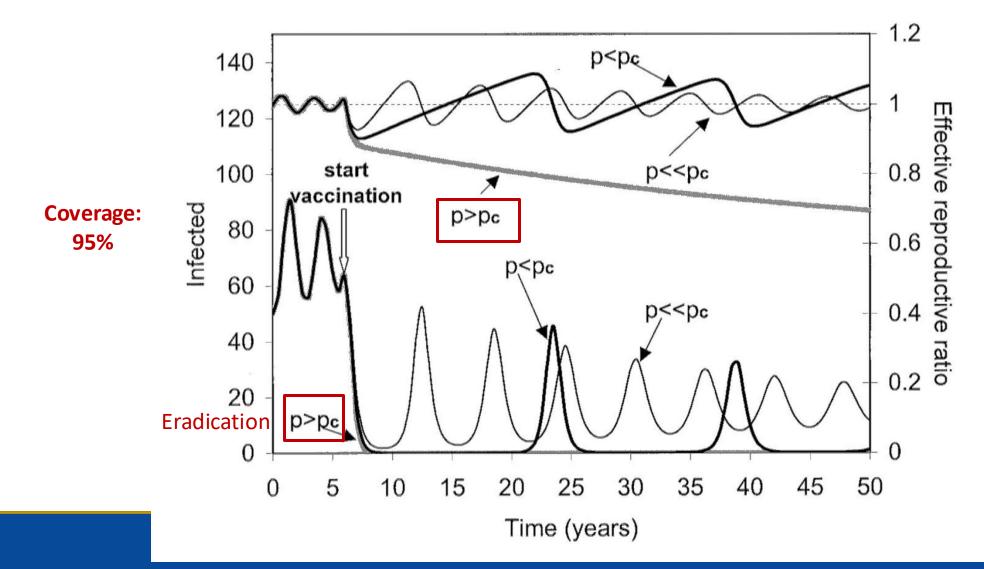
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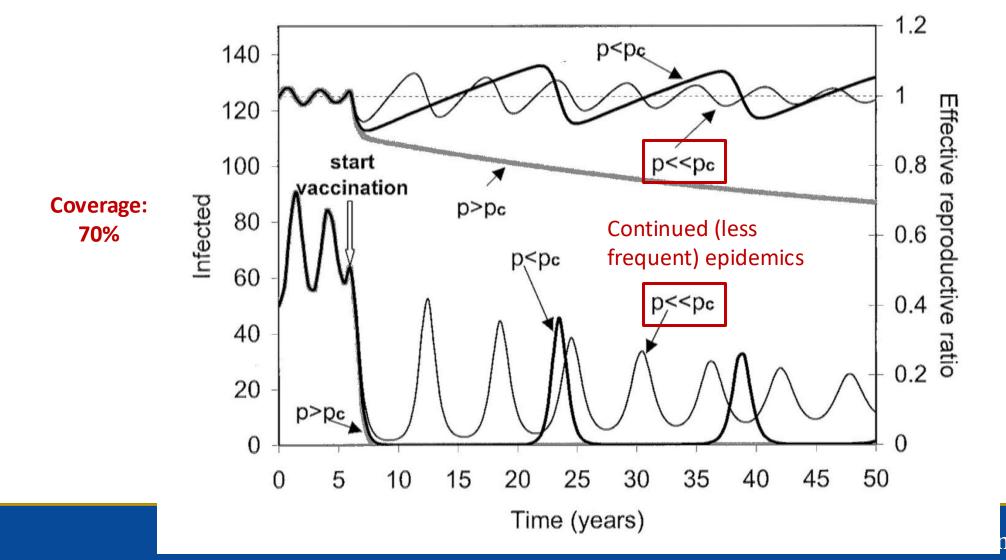
# Dynamics of vaccine introduction: the effect of a vaccine program



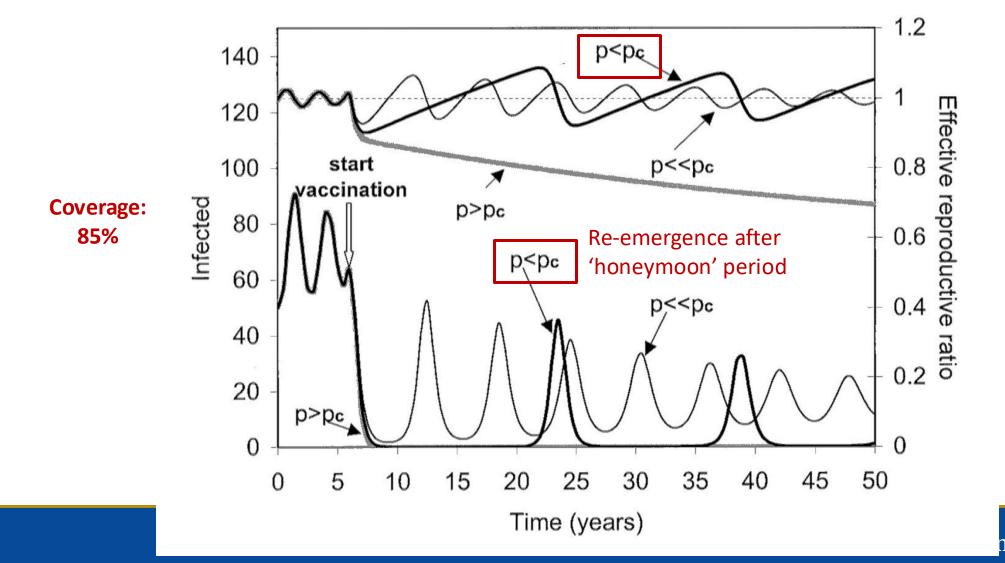
## Dynamics of vaccine introduction: scenario 1



## **Dynamics of vaccine introduction: scenario 2**



## **Dynamics of vaccine introduction: scenario 3**



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# Infant vaccination always\* acts to increase mean age of infection

Higher incidence -> earlier in life infection occurs

Quantifying this: in an unvaccinated population

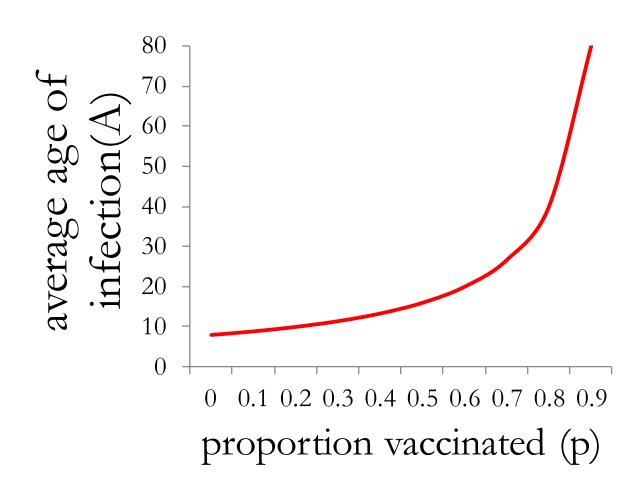
average age of infection, A

$$A \approx L / R_0$$

When a proportion, x, is vaccinated at birth

$$A \approx L/R_E = L/R_0(1-x)$$

For many childhood infections, a shift in the age distribution will shift burden into older, less vulnerable children



<sup>\*</sup>except when infection is eliminated

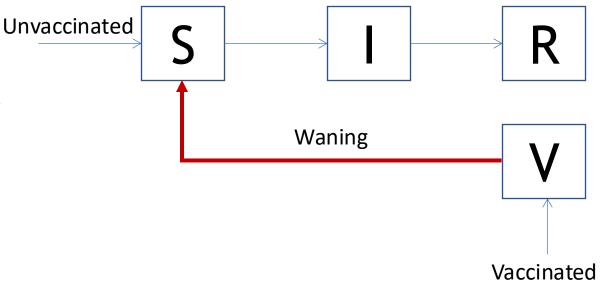
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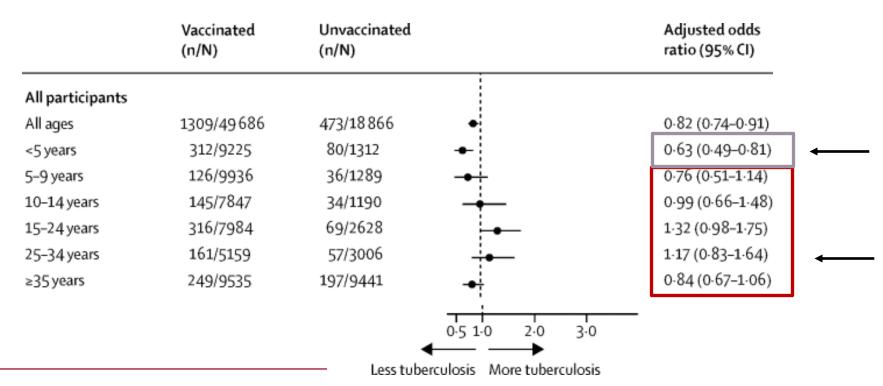
## 5. Waning immunity

## Waning immunity ('secondary vaccine failure')

- Models we have discussed so far, vaccine protection is considered lifelong
- To represent loss of immunity with time, need to allow for flow back to 'S'
- Hard to observe/measure directly
- BUT important!



# Measuring waning vaccine immunity: in years



Infant BCG vaccination and risk of pulmonary and extrapulmonary tuberculosis throughout the life course: a systematic review and individual participant data meta-analysis

# Measuring waning vaccine immunity: in months

#### JOURNAL ARTICLE

Waning Vaccine Effectiveness Against Influenza-Associated Hospitalizations Among Adults, 2015– 2016 to 2018–2019, United States Hospitalized Adult Influenza Vaccine Effectiveness Network

Jill M Ferdinands 🗷, Manjusha Gaglani, Emily T Martin, Arnold S Monto, Donald Middleton, Fernanda Silveira, H Keipp Talbot, Richard Zimmerman, Manish Patel

Clinical Infectious Diseases, Volume 73, Issue 4, 15 August 2021, Pages 726–729, https://doi.org/10.1093/cid/ciab045

Influenza Type/Subtype	Influenza Seasons Included	No. of Cases/Controls	Estimated VE Decline per Month, Absolute % (95% CI)	<i>P</i> Value <sup>a</sup>
Influenza A(H3N2) <sup>b</sup>				
Aged ≥18 y	2016–2017, 2017–2018	754/2262	7.5 (.3–16.3)	.05
Aged ≥65 y	2016–2017, 2017–2018	395/1185	10.8 (2.6–23.8)	.02

# A model of vaccination with waning vaccine immunity

$$\frac{dS}{dt} = -\lambda S - \mu S + (1-p_1)\mu N - p_2 S + \omega V$$

$$\frac{dI}{dt} = \lambda S - \sigma I - \mu I$$

$$\frac{dR}{dt} = \sigma I - \mu R$$

$$\frac{dV}{dt} = p_1 \mu N + p_2 S - \mu V - \omega V$$

#### Key

Infection

Recovery

Vaccination

p<sub>1</sub> - fraction vaccinated at birth

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vaccinated, at random

Loss of (waned) immunity

# The reproductive number with waning immunity $(R_v)$

#### Where:

- $\omega$  is average duration of (vaccine) protection
- $\mu$  is death rate (inverse of average life expectatncy)
- *e* is vaccine efficacy
- p is proportion vaccinated

$$R_v = (1 - e \frac{\mu}{(\mu + \omega)} p) R_0$$

the fraction of a lifetime for which an individual is protected by a vaccine