Vacamole

This example is taken from the documentation of the R package epidemics.

```
library(epidemics)
library(data.table)
library(ggplot2)
library(colorspace)
library(scales)
```

Prepare population and initial conditions

Prepare population and contact data.

```
# load contact and population data from socialmixr::polymod
polymod <- socialmixr::polymod
contact_data <- socialmixr::contact_matrix(
   polymod,
   countries = "United Kingdom",
   age.limits = c(0, 20, 65),
   symmetric = TRUE
)</pre>
```

Using POLYMOD social contact data. To cite this in a publication, use the 'cite' function

Removing participants that have contacts without age information. To change this behaviour,

```
# prepare contact matrix
contact_matrix <- t(contact_data$matrix)</pre>
```

```
# prepare the demography vector
demography_vector <- contact_data$demography$population
names(demography_vector) <- rownames(contact_matrix)</pre>
```

Prepare initial conditions for each age group. The Vacamole model has 11 compartments and therefore requires a matrix with 11 columns.

```
# initial conditions
initial_i <- 1e-6</pre>
# // 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10
# // S|V1|V2|E|EV|I|IV|H|HV|D|R
# make initial conditions - order is important
initial_conditions <- c(</pre>
  S = 1 - initial_i,
  V1 = 0, V2 = 0,
  E = 0, EV = 0,
  I = initial_i, IV = 0,
  H = 0, HV = 0, D = 0, R = 0
initial_conditions <- rbind(</pre>
  initial_conditions,
  initial_conditions,
  initial_conditions
)
# assign rownames for clarity
rownames(initial_conditions) <- rownames(contact_matrix)</pre>
```

Prepare the time in days over which to model the epidemic, with the outbreak beginning at day zero.

```
epidemic_days <- 300
```

Prepare a population as a population class object.

```
uk_population <- population(
  name = "UK",
  contact_matrix = contact_matrix,
  demography_vector = demography_vector,</pre>
```

```
initial_conditions = initial_conditions
)
```

Prepare pathogen parameters

```
# make infection class for Vacamole model
# note extra arguments passed as ...
infect <- infection(
  name = "covid", r0 = 3, infectious_period = 10,
  preinfectious_period = 5,
  eta = 1 / 1000, omega = 1 / 1000,
  susc_reduction_vax = 0.5,
  hosp_reduction_vax = 0.5,
  mort_reduction_vax = 0.5
)</pre>
```

Prepare a two dose vaccination campaign

We prepare a two-dose vaccination campaign by concatenating two single dose vaccination regimes, i.e., applying the function c() to two vaccination objects.

```
# prepare a two dose vaccination regime for a single age group
# prepare the first dose
dose_1 <- vaccination(
   name = "two-dose vaccination", # name given to first dose
   nu = matrix(1e-2, nrow = 3),
   time_begin = matrix(30, nrow = 3),
   time_end = matrix(epidemic_days, nrow = 3)
)

# prepare the second dose with a 30 day interval in start date
dose_2 <- vaccination(
   name = "two-dose vaccination", # name given to first dose
   nu = matrix(1e-2, nrow = 3),
   time_begin = matrix(60, nrow = 3),
   time_end = matrix(epidemic_days, nrow = 3)
)

# use `c()` to combine the two doses</pre>
```

```
double_vaccination <- c(dose_1, dose_2)</pre>
  # print to visualise
  double_vaccination
<vaccination>
Vaccination name: "two-dose vaccination"
Time begin:
     dose_1 dose_2
[1,]
         30
                 60
[2,]
         30
                 60
[3,]
         30
                 60
Time end:
     dose_1 dose_2
[1,]
        300
                300
[2,]
        300
                300
[3,]
        300
                300
Vaccination rate:
     dose_1 dose_2
[1,]
       0.01
               0.01
[2,]
       0.01
               0.01
[3,]
       0.01
               0.01
```

We prepare a dummy vaccination regime of no vaccination against which to compare the two-dose vaccination campaign. This is done by using the no_vaccination() function and specifying the number of doses (here, 2 doses).

```
# prepare a null vaccination regime with two doses
# use the convenience function `no_vaccination()`
no_vaccination <- no_vaccination(population = uk_population, doses = 2)</pre>
```

Model epidemic using Vacamole

First, we run the model with no vaccination.

```
data <- epidemic(
   model_name = "vacamole",
   population = uk_population,
   infection = infect,
   vaccination = no_vaccination, # note custom no_vaccination object
   time_end = epidemic_days
)</pre>
```

Next we run the model with a two dose vaccination regime.

```
data_vaccination <- epidemic(
  model_name = "vacamole",
  population = uk_population,
  infection = infect,
  vaccination = double_vaccination, # note custom object for two doses
  time_end = epidemic_days
)</pre>
```

Visualise model outcomes

First, we calculate the total number of infections resulting in recoveries and deaths over the course of the simulation; this is the epidemic's final size.

```
# collect data from the two scenarios
data_scenarios <- list(data, data_vaccination)

# get deaths and recoveries from infection
data_scenarios <- Map(
   data_scenarios, c("no_vax", "vax"),
   f = function(df, sc) {
      df_ <- unique(df[, "demography_group"], by = "demography_group")
      # get total deaths per group
      df_$total_deaths <- df[time == max(time) & compartment == "dead", ]$value

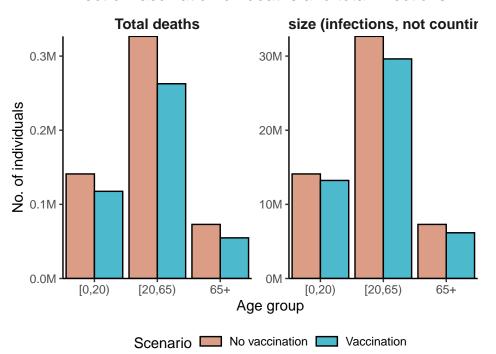
# get total recoveries per group using helper function `epidemic_size()`
      df_$total_recovered <- epidemic_size(df, deaths = FALSE) # do not count dead

# add scenario information
      df_$scenario <- sc</pre>
```

```
# return data
    df_
  }
)
# collect data
data_scenarios <- rbindlist(data_scenarios)</pre>
# transform to long format
data_scenarios <- melt(</pre>
 data_scenarios,
  id.vars = c("demography_group", "scenario")
)
ggplot(data_scenarios) +
  geom_col(
    aes(demography_group, value, fill = scenario),
    position = "dodge",
    colour = "black"
  ) +
  facet_wrap(
    ~variable,
    scales = "free_y",
    labeller = labeller(
      variable = c(
        "total_deaths" = "Total deaths",
        "total_recovered" = "Epidemic size (infections, not counting deaths)"
      )
    )
  scale_fill_discrete_qualitative(
   palette = "Dynamic",
    labels = c("No vaccination", "Vaccination"),
    name = "Scenario",
    na.value = "lightgrey"
  ) +
  scale_y_continuous(
    labels = label_comma(
      scale = 1e-6, suffix = "M"
  ) +
```

```
theme_classic() +
theme(
  legend.position = "bottom",
  legend.key.height = unit(2, "mm"),
  strip.background = element_blank(),
  strip.text = element_text(
    face = "bold",
    size = 11
  )
) +
expand_limits(
  x = c(0.5, length(unique(data_scenarios$demography_group)) + 0.5)
coord_cartesian(
  expand = FALSE
labs(
  x = "Age group",
  y = "No. of individuals",
  title = "Effect of vaccination on deaths and total infections"
)
```

Effect of vaccination on deaths and total infections



Finally, we can compare the peak of hospital bed occupancy in each scenario — this can be a rough indication of how much hospital capacity would be required if a pandemic of these characteristics were to occur, as well as another way to examine the effect of vaccination in reducing this requirement.

```
# collect data from the two scenarios
  data_scenarios <- list(data, data_vaccination)</pre>
  peak_hospital_occupancy <- vapply(data_scenarios, function(df) {</pre>
    # get highest hospital occupancy
    # first get total hospitalisations among vaccinated and un- or part-vacc.
    df <- dcast(</pre>
      df[compartment %like% "hospitalised", ],
      time + demography_group ~ compartment,
      value.var = "value"
    )
    df[, total_hosp := hospitalised + hospitalised_vaccinated]
    # sum all age groups
    df <- df[, list(total_hosp = sum(total_hosp)), by = "time"]</pre>
    df[total_hosp == max(total_hosp), ]$total_hosp
  }, FUN.VALUE = numeric(1))
  # set names for comprehensibility
  names(peak_hospital_occupancy) <- c("No vaccination", "Vaccination")</pre>
  # show peak hospital occupancy in a readable format
  format(peak_hospital_occupancy, big.mark = ",", digits = 1)
No vaccination
                  Vaccination
      "95,063"
                      "69,827"
```

This example demonstrates that implementing vaccination can substantially reduce peak hospital occupancy (by about 27%) compared to a scenario in which no vaccines are deployed.