

# RSView

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# Respiratory syncytial virus (RSV) is an important cause of viral infections



In healthy adults and children, RSV causes cold-like symptoms lasting 1-2 wks

RSV can cause severe infections:



Infants



Immunocompromised



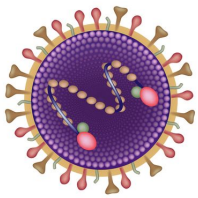
Elderly

# RSV causes high global burden of disease in children under 5

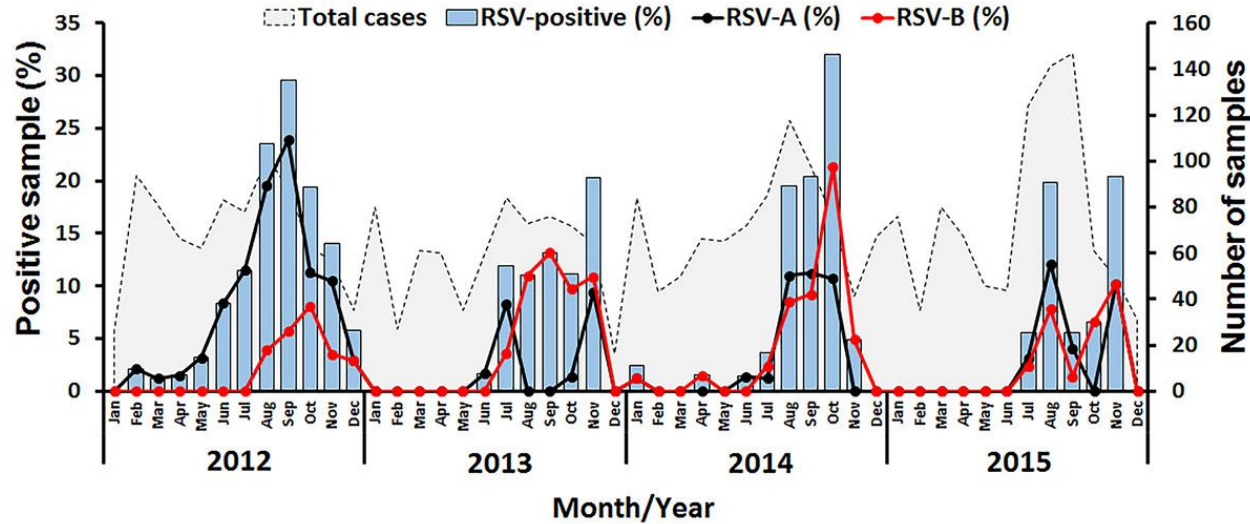


RSV-associated acute respiratory infection causes more than **3 million hospital admissions** and **~100,000 deaths** in children less than 5 each year.

RSV-immunity is short-lived and individuals can be re-infected throughout their lives.



RSV is a genetically diverse virus that circulates seasonally



There are 2 main subtypes - A and B - and several genotypes characterized by the sequence of the attachment glycoprotein, G.

Different viral subtypes and genotypes are thought to replace each other over time.

Evidence for this is generally based on isolated studies (such as Thailand, above).

# Goals of project

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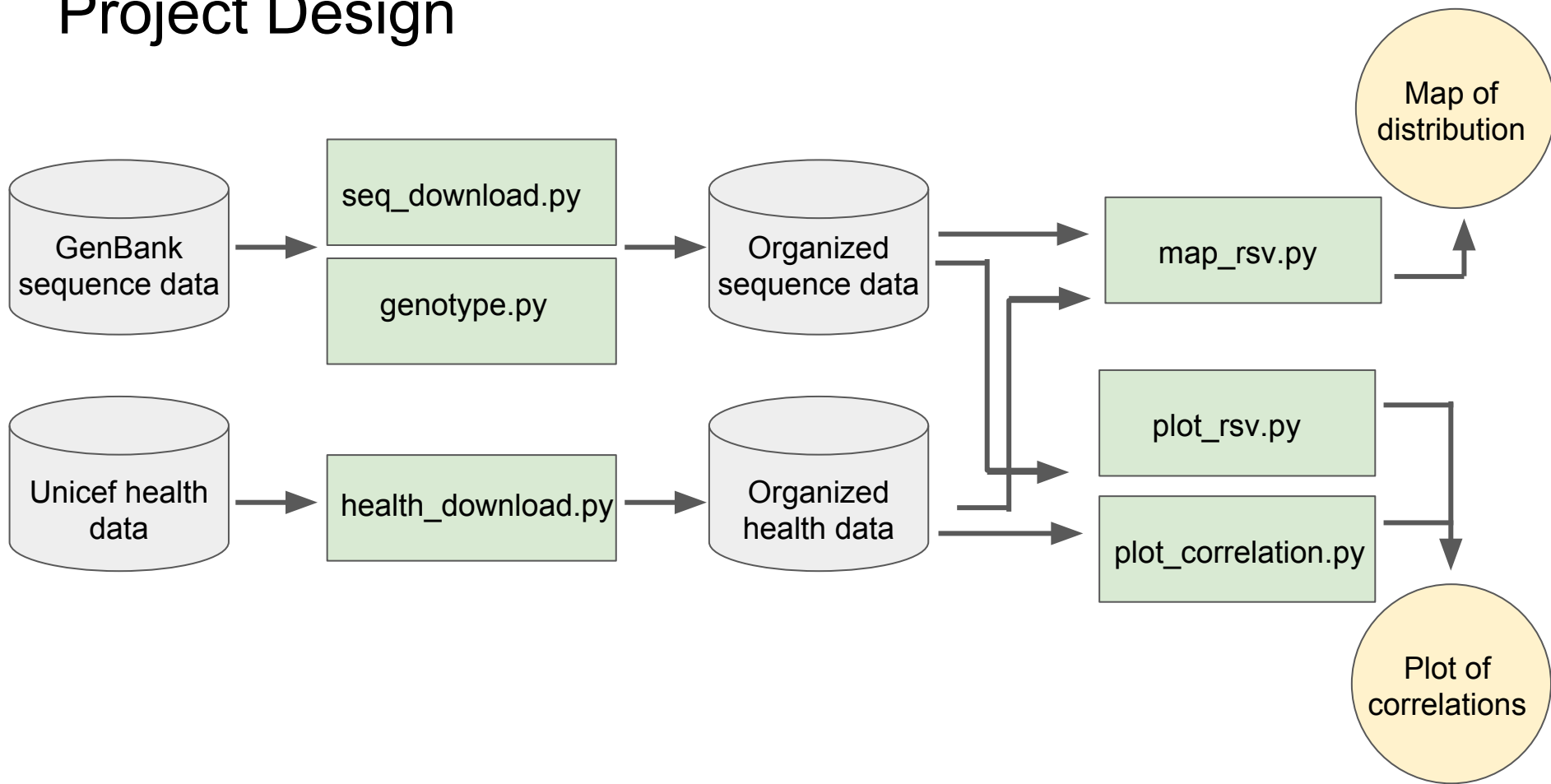
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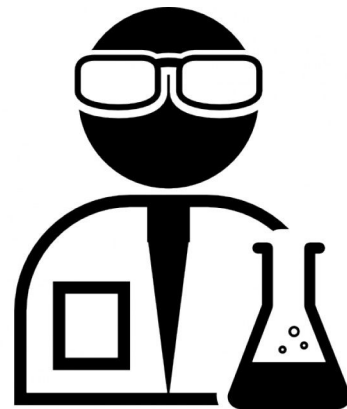
3. Write a program that could be easily expanded to examine other viral sequences downloaded from GenBank.

# Project Design





# User profile



Physicians and scientists studying treating patients with or studying RSV

Need to be able to clone git repos and have some comfort running python packages. Need not be able to code.

Future work could make this transferrable to other virus datasets given ability to code in python

# Data sources

## GenBank:

NCBI Resources How To

Nucleotide Nucleotide human respiratory syncytial virus G

Create alert Advanced

Items: 1 to 20 of 18466

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- ☐ [Human respiratory syncytial virus nonstructural protein \(1C\), nonstructural protein \(1B\), major nucleocapsid \(N\), phosphoprotein \(P\), protein \(M\), 1A \(1A\), G \(G\), protein \(E\) and envelope-associated protein \(22K\) gene, complete cds](#)

8,510 bp linear RNA

Accession: M11486.1 GI: 333925

[Protein](#) [PubMed](#) [Taxonomy](#)

[GenBank](#) [FASTA](#) [Graphics](#)

- ☐ [Human respiratory syncytial virus \(MON-1-87\) subgroup A, G gene for glycoprotein](#)

922 bp linear RNA

Accession: Z33421.1 GI: 485905

[Protein](#) [PubMed](#) [Taxonomy](#)

[GenBank](#) [FASTA](#) [Graphics](#)

## Unicef:



Estimates of child cause of death, Acute Respiratory Infection 2018

Last update: February 2018

Stats on neonatal, post-natal, and under 5 deaths from acute respiratory infection.

Data from 2000-2016 for 194 countries

# GenBank data is deposited in various forms from many scientists

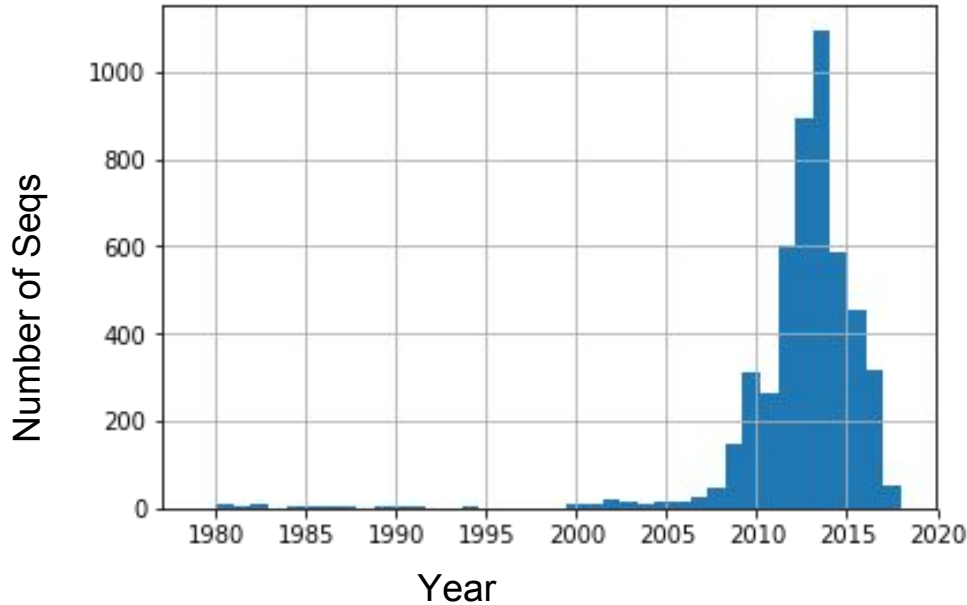
FEATURES	Location/Qualifiers
source	1..15277 /organism="Human orthopneumovirus" /mol_type="viral cRNA" /isolate="B05" /isolation_source="tracheal rinse" /host="Homo sapiens" /db_xref="taxon: <a href="#">11250</a> " /country="United Kingdom" /collection_date="06-Jan-2005" /note="subgroup: B; genotype: BA"
<a href="#">gene</a>	46..577 /gene="NS1"
<a href="#">mRNA</a>	46..577

Whole genome vs. full G vs. partial G

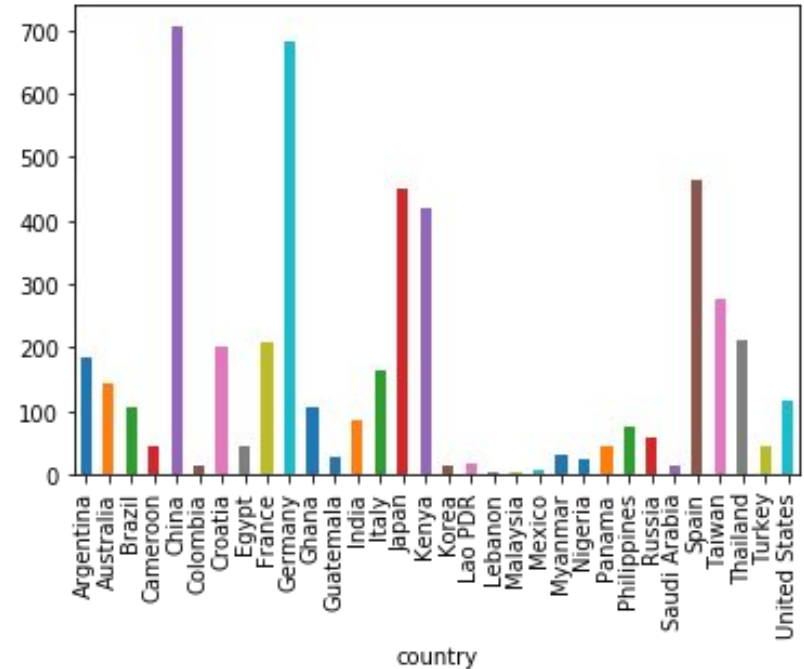
Different degrees of subtype and genotype information

# Sequences are not distributed evenly

Sequences per year



Sequences per country



Sequences are only a small sample of circulating RSV - not surveillance

Lack of good RSV surveillance sequencing limits the power of our analyses

# Data is incomplete, but useable despite caveats

>18,000 RSV G sequences to download

~90% of sequences had subtype information from GenBank

~33% had genotype information from GenBank

Need to download and clean data

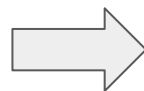
Call additional genotypes

Download and genotype demo in notebook.

# Health Data Processing and Integrating Datasets

The data was mostly clean but we had to:

- Re-format numbers to create summary dataset
- Convert a variety of 'country' input styles to integrate with the genotype dataset



**country converter**

iso3	Country/area	year	nnd	pnd	neo9	post9	ufive9	rneo9	rpost9	rufive9	fneo9	fpost9	fufive9
	Global	2000	4,003,141	6,047,778	307,725	1,466,299	1,774,025	2	11	14	8%	24%	18%
	Global	2001	3,902,504	5,851,905	294,644	1,406,326	1,700,971	2	11	13	8%	24%	17%
	Global	2002	3,800,435	5,547,240	282,158	1,348,396	1,630,553	2	10	12	7%	24%	17%
	Global	2003	3,699,679	5,421,280	270,859	1,291,699	1,562,558	2	10	12	7%	24%	17%
	Global	2004	3,601,737	5,163,989	259,239	1,241,529	1,500,768	2	9	11	7%	24%	17%
	Global	2005	3,505,159	4,928,527	246,933	1,192,271	1,439,204	2	9	11	7%	24%	17%
	Global	2006	3,415,328	4,660,282	235,214	1,155,132	1,390,346	2	9	10	7%	25%	17%
	Global	2007	3,323,929	4,409,248	223,953	1,107,225	1,331,178	2	8	10	7%	25%	17%
	Global	2008	3,236,930	4,265,929	214,501	1,056,833	1,271,334	2	8	9	7%	25%	17%
	Global	2009	3,153,926	4,115,455	205,889	1,013,537	1,219,426	1	7	9	7%	25%	17%
	Global	2010	3,070,191	3,943,044	197,625	972,561	1,170,186	1	7	8	6%	25%	17%

# Mapping demos

## Basic maps:

```
$ map_rsv.py subtype data
```

```
$ map_rsv.py genotype data
```

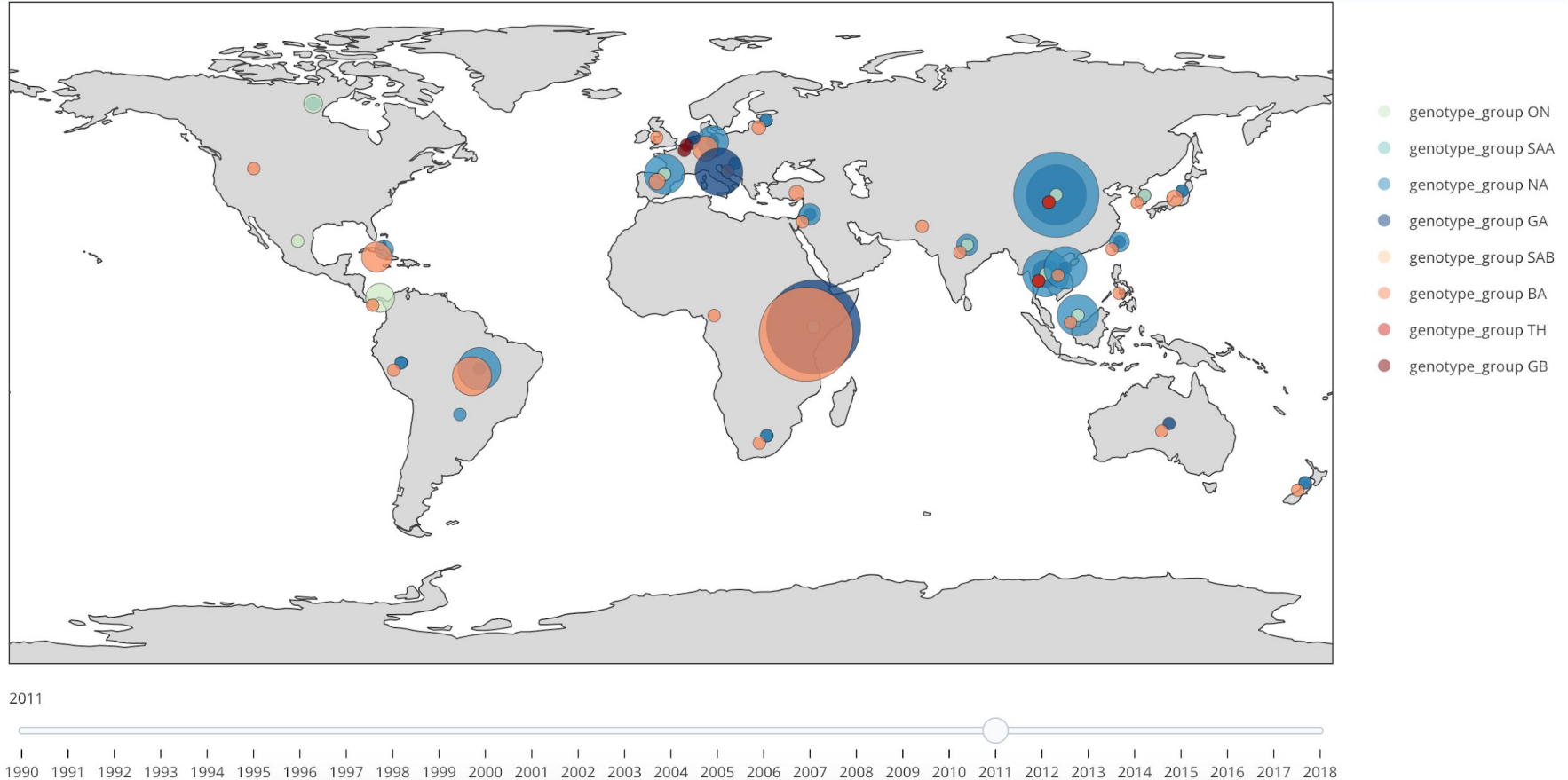
## Optional arguments:

```
$ map_rsv.py subtype data --years all
```

```
$ map_rsv.py genotype data --genotype_level all
```

# Analyze global distribution of RSV genotypes

\$ map\_rsv.py genotype data





# Biological observations from maps

\$ map\_rsv.py subtype data

1. Subtype A/B replacement on regional, not global, scale
  - a. Previous evidence from isolated studies only
2. No clear evidence of correlation between ARI and dominant subtype
3. Inferences limited by sampling
  - a. Support for: Ratio of A to B for a given country
  - b. No support for: Absolute number of A vs B between countries

# Plotting demos

## Health data:

```
$ plot_rsv.py all rufive9          (optional: --highlight_country)
```

```
$ plot_rsv.py country rufive9      (optional: --country)
```

## Health vs Subtype data:

```
$ plot_correlation.py all rufive9
```

```
$ plot_correlation.py year rufive9
```

# Health Data Variables

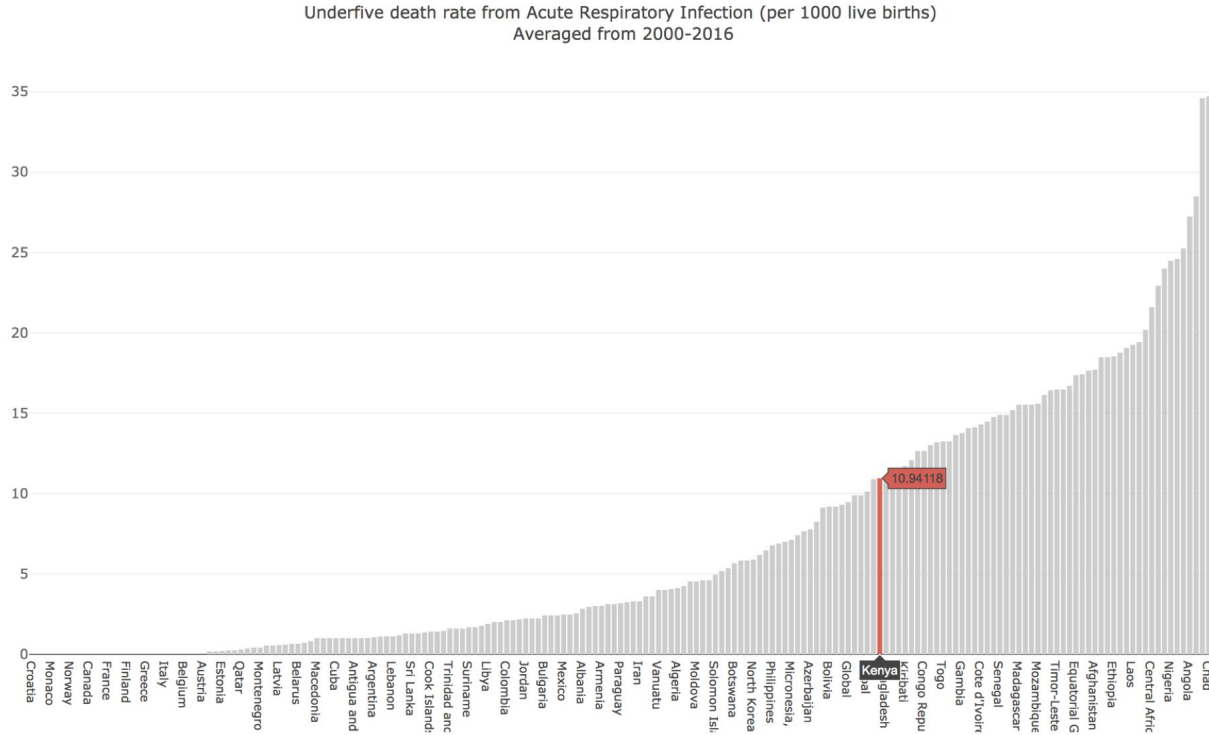
Specify which category of data to plot:

- nnd : Total Neonatal Deaths
- pnd : Total Post-Neonatal Deaths
- neo9 : Neonatal deaths due to Acute Respiratory Infection
- post9 : Post-neonatal deaths due to Acute Respiratory Infection
- ufive9 : Underfive deaths due to Acute Respiratory Infection
- rneo9 : Neonatal death rate from Acute Respiratory Infection (per 1000 live births)
- rpost9 : Post-neonatal death rate from Acute Respiratory Infection (per 1000 live births)
- rufive9 : Underfive death rate from Acute Respiratory Infection (per 1000 live births)
- fneo9: Percent Neonatal deaths due to Acute Respiratory Infection
- fpost9: Percent Post-neonatal deaths due to Acute Respiratory Infection
- fufive9: Percent Underfive deaths due to Acute Respiratory Infection

# Analyze health impact of acute respiratory infections around the world

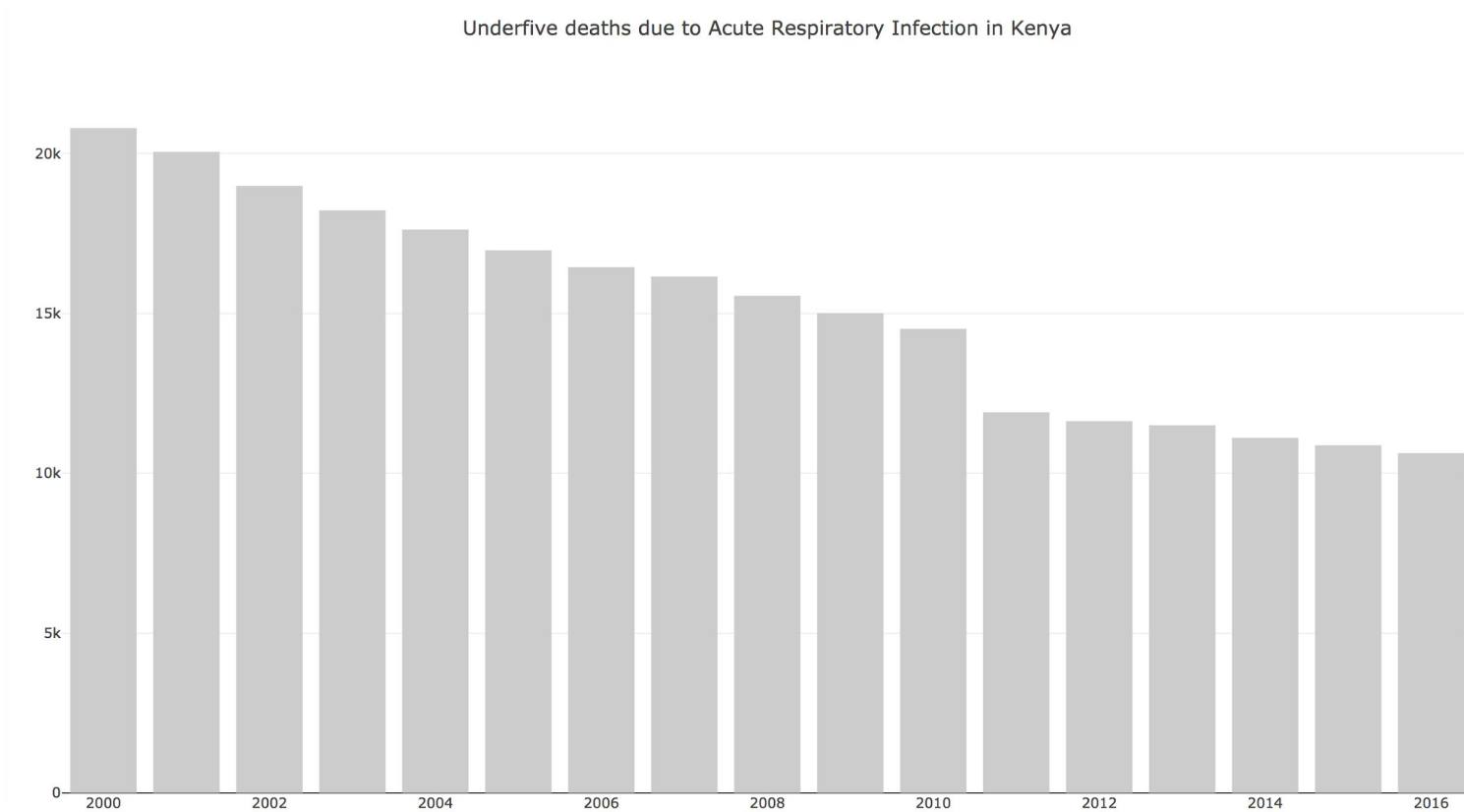
```
$ plot_rsv.py all rufive9
```

```
(optional: --highlight_country)
```



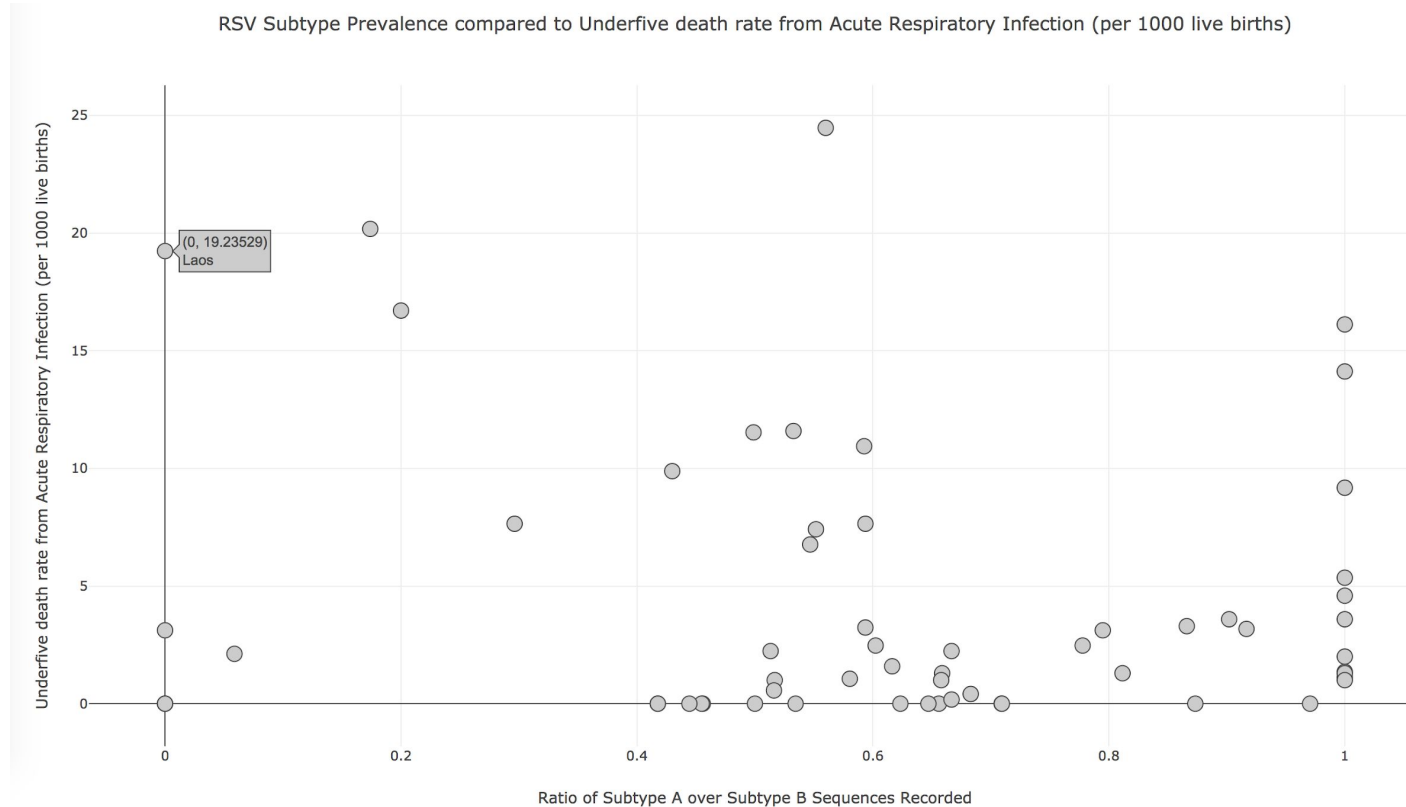
# Analyze health impact trends in a specific country over time

\$ plot\_rsv.py country rufive9 (optional: --country)

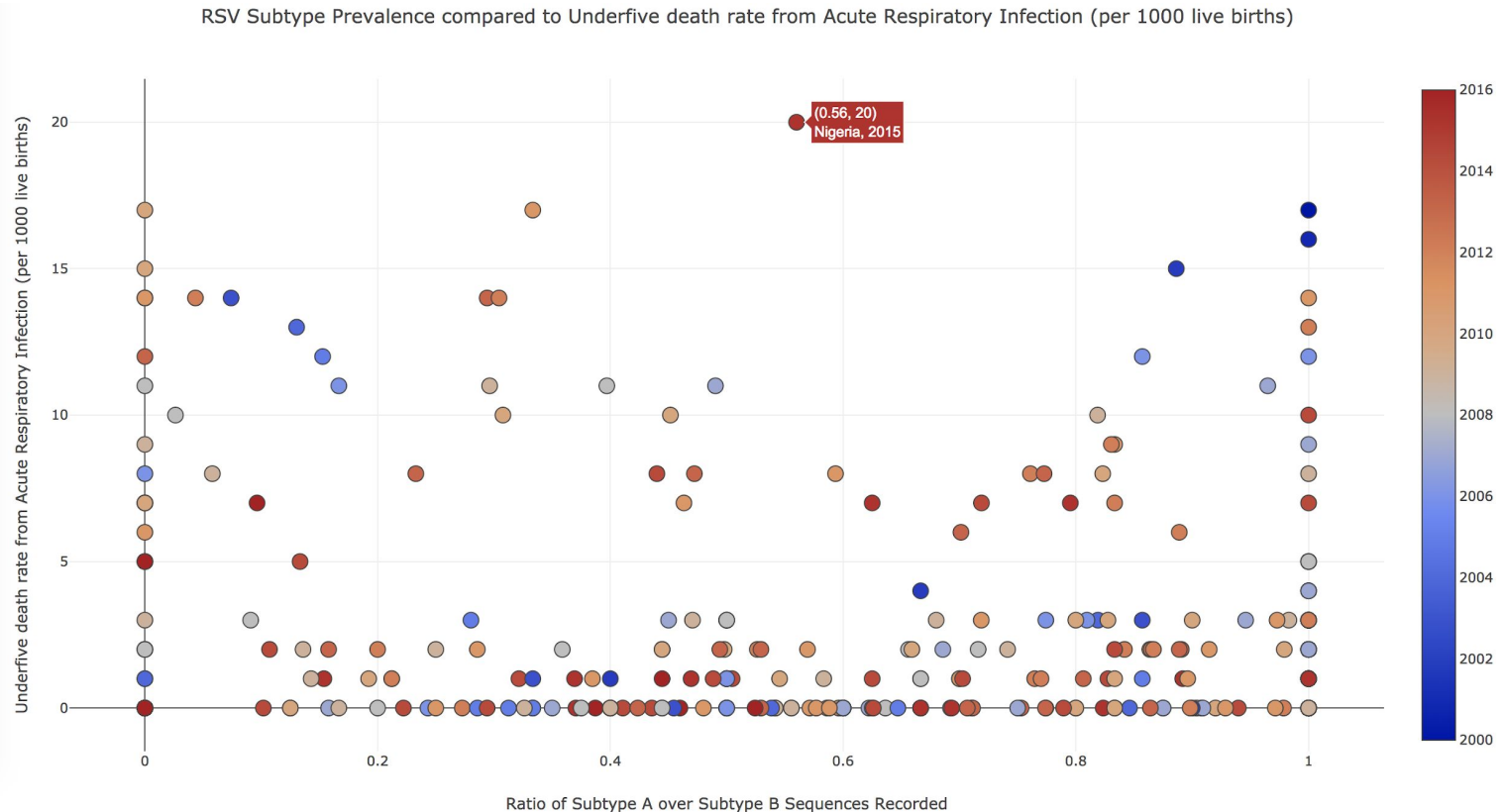


# Analyze the correlation between RSV subtype prevalence and health impact

\$ plot\_correlation.py all rufive9



```
$ plot_correlation.py year rufive9
```



# Future work (post-quarter)

1. Improve genotype classification
2. Integrate more specific health outcome data
3. Investigate correlation between subtype cycling and disease severity
4. Address sampling issues
5. Expand RSView to other viruses