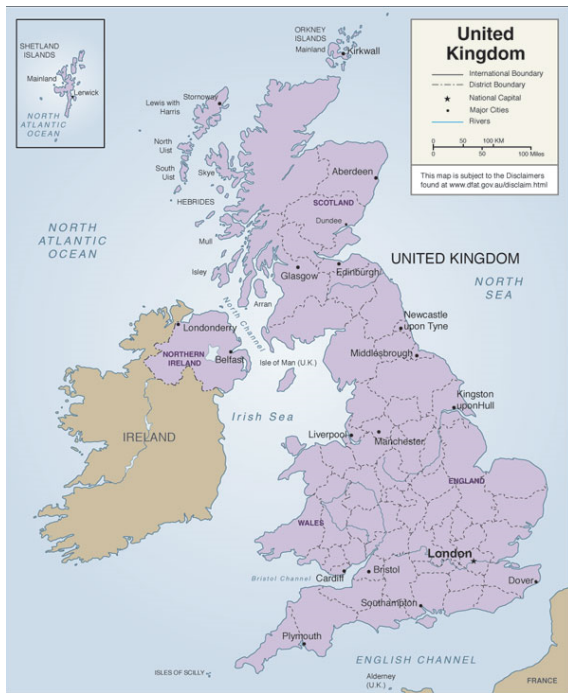


Collaborative Learning  
at the Interface of  
Mathematics and Biology



# The MMR vaccine scare and human behavior: Why does measles persist in the United Kingdom?

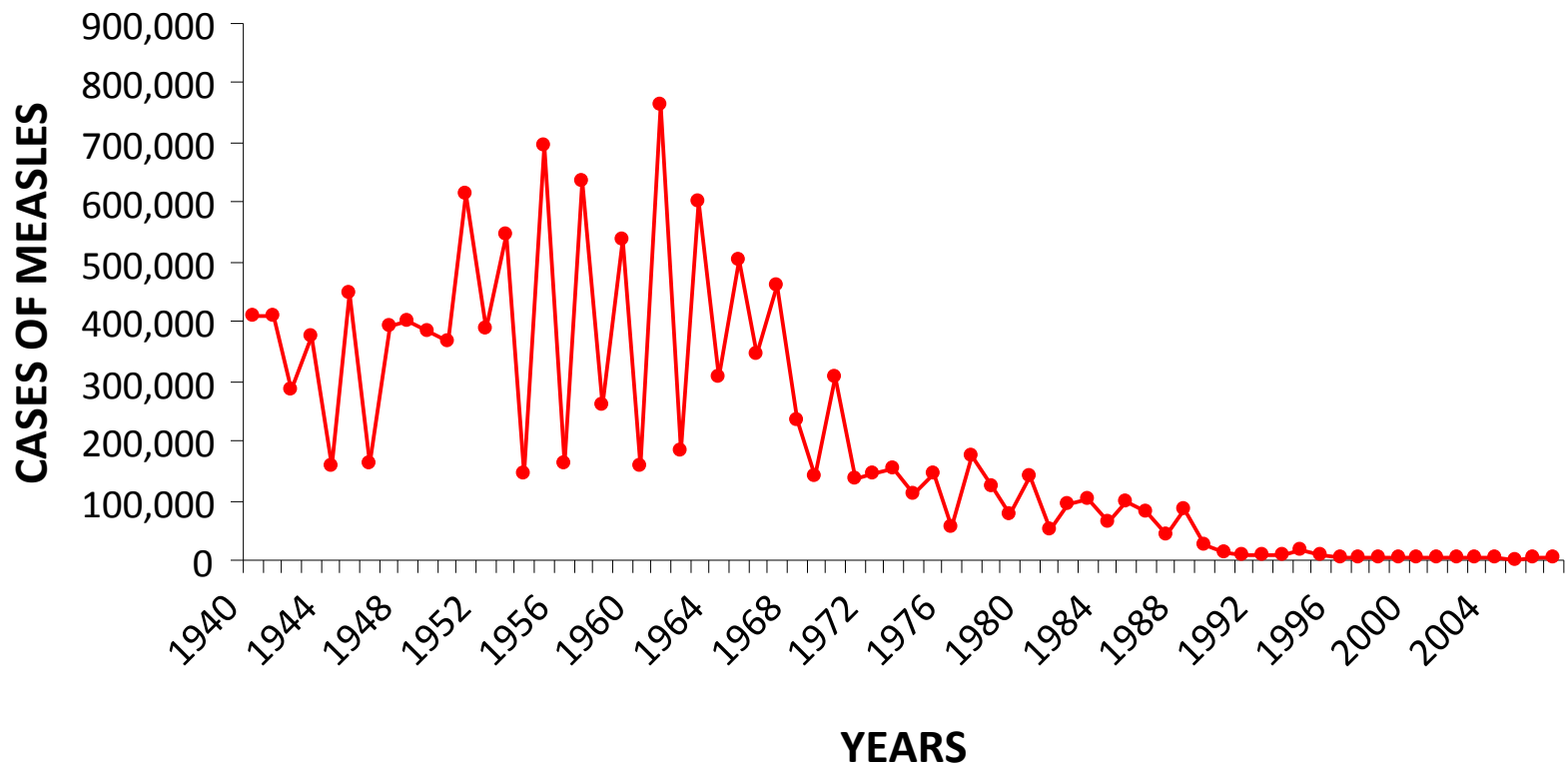
*Taruna Aggarwal, Angela N. Kaczmarczyk, Ricky Kwok, Miran Park, Florentine Rutaganira, Joshua Schraiber, Rachel Silverstein*



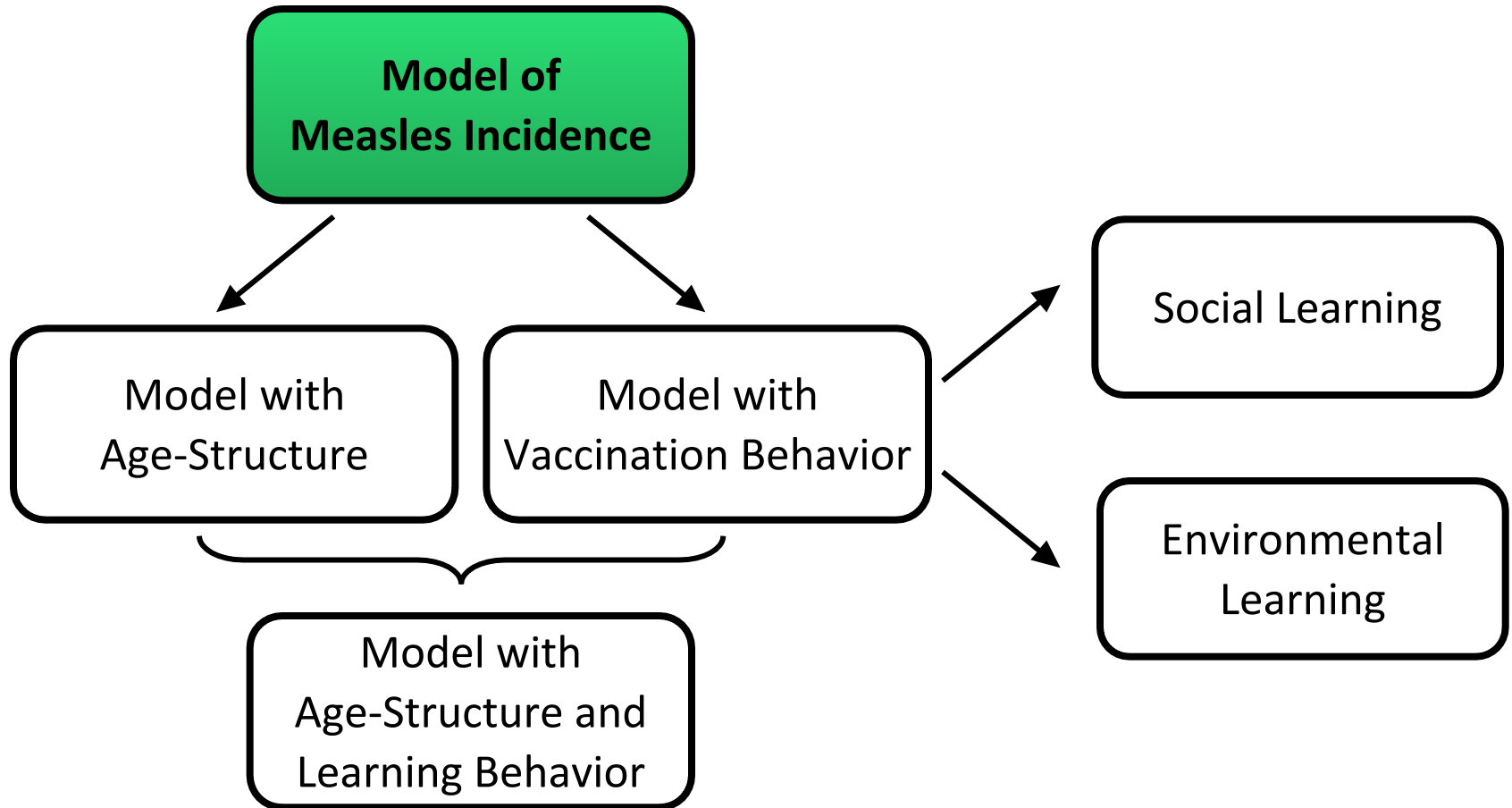
What are the consequences of voluntary vaccination on the spread of measles in the UK?



# Reported Measles Cases in England & Wales 1940-2007

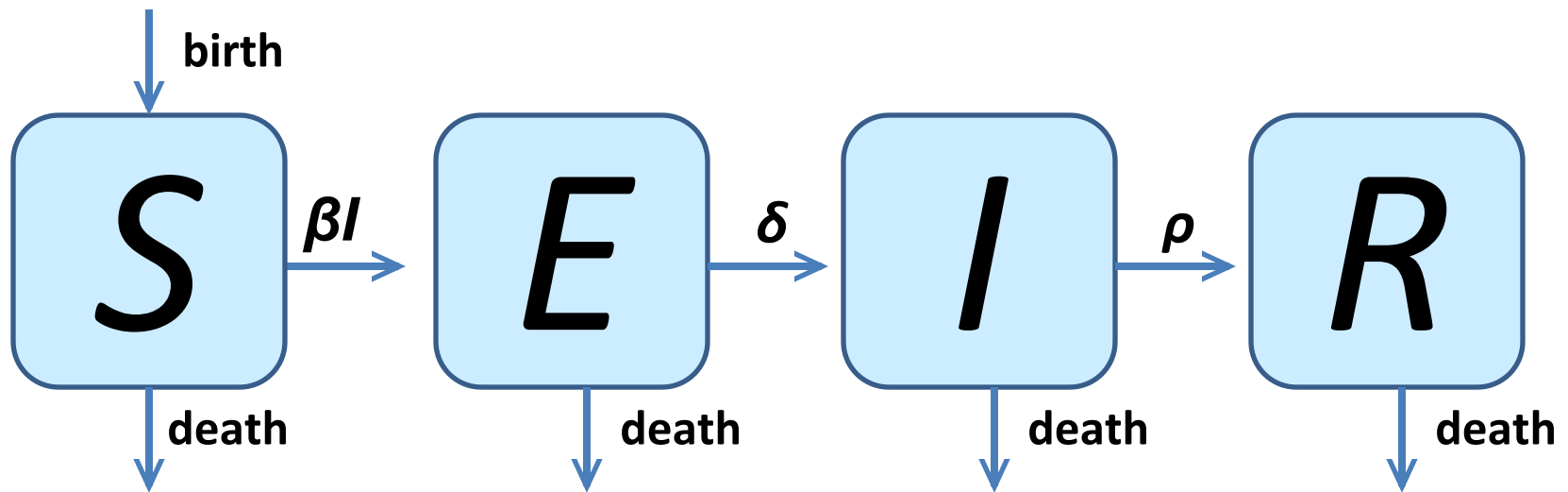


# Building a model



# An SEIR model for disease dynamics

Susceptible, Exposed, Infected, Recovered

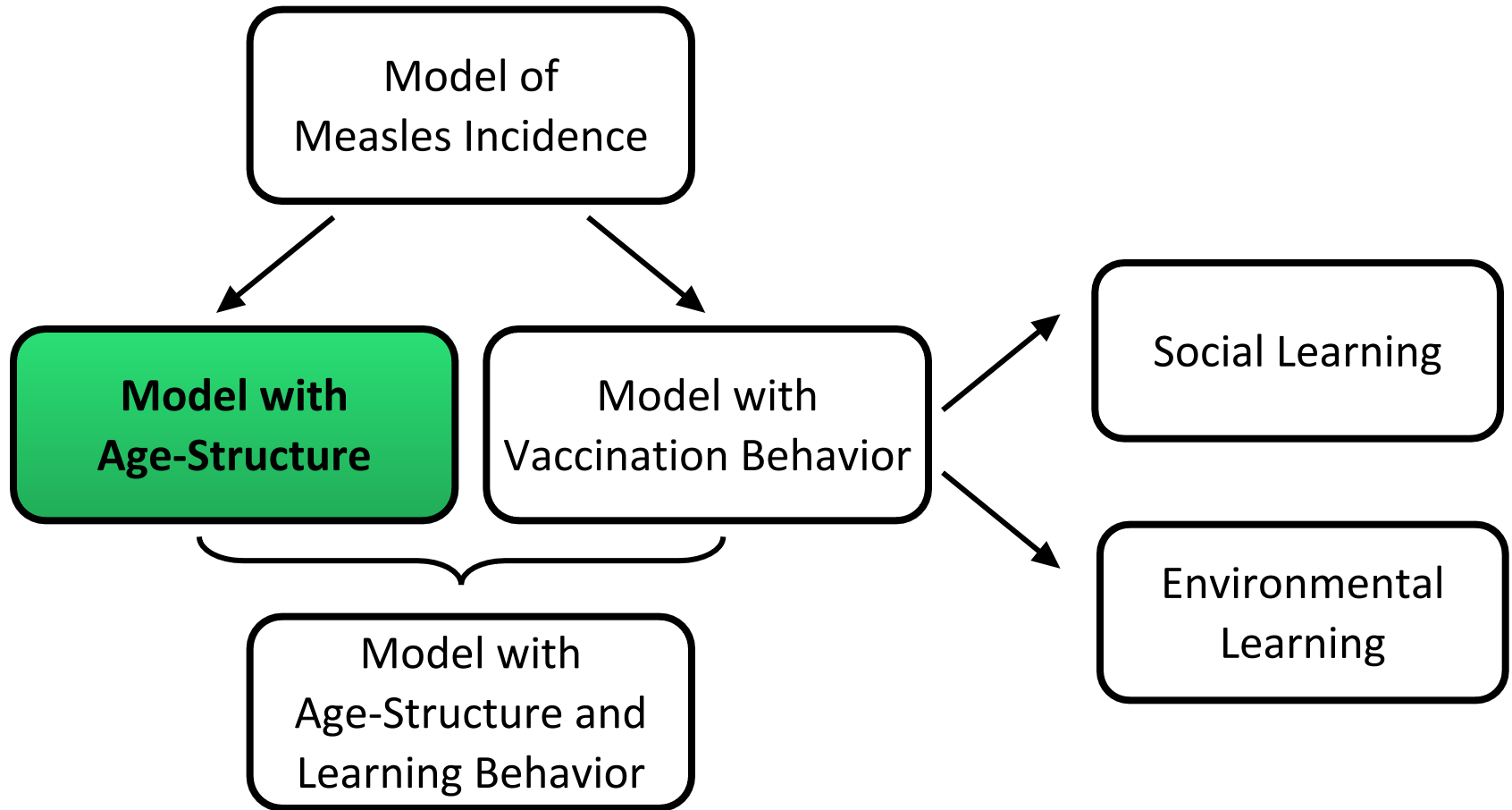


$\beta I$  = contact rate x level of infection

$\delta$  = latent transition rate

$\rho$  = recovery rate

# The transmission of measles is highly age-dependent



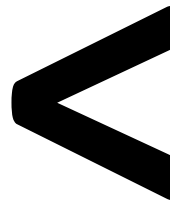
# Schenzle (1984): Age-Specific Contact Rates



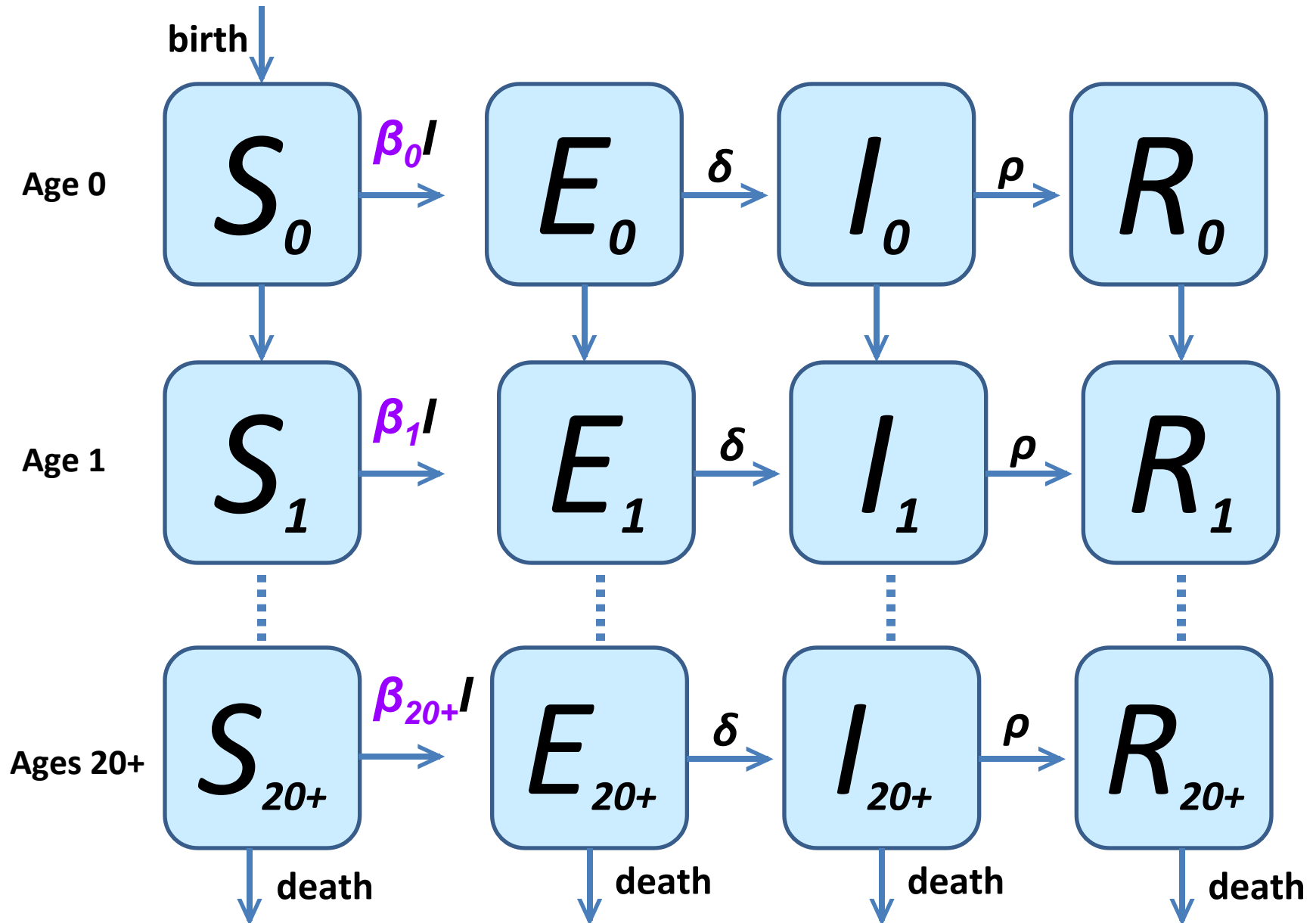
Contact rates  
for adults



Contact rates  
for children

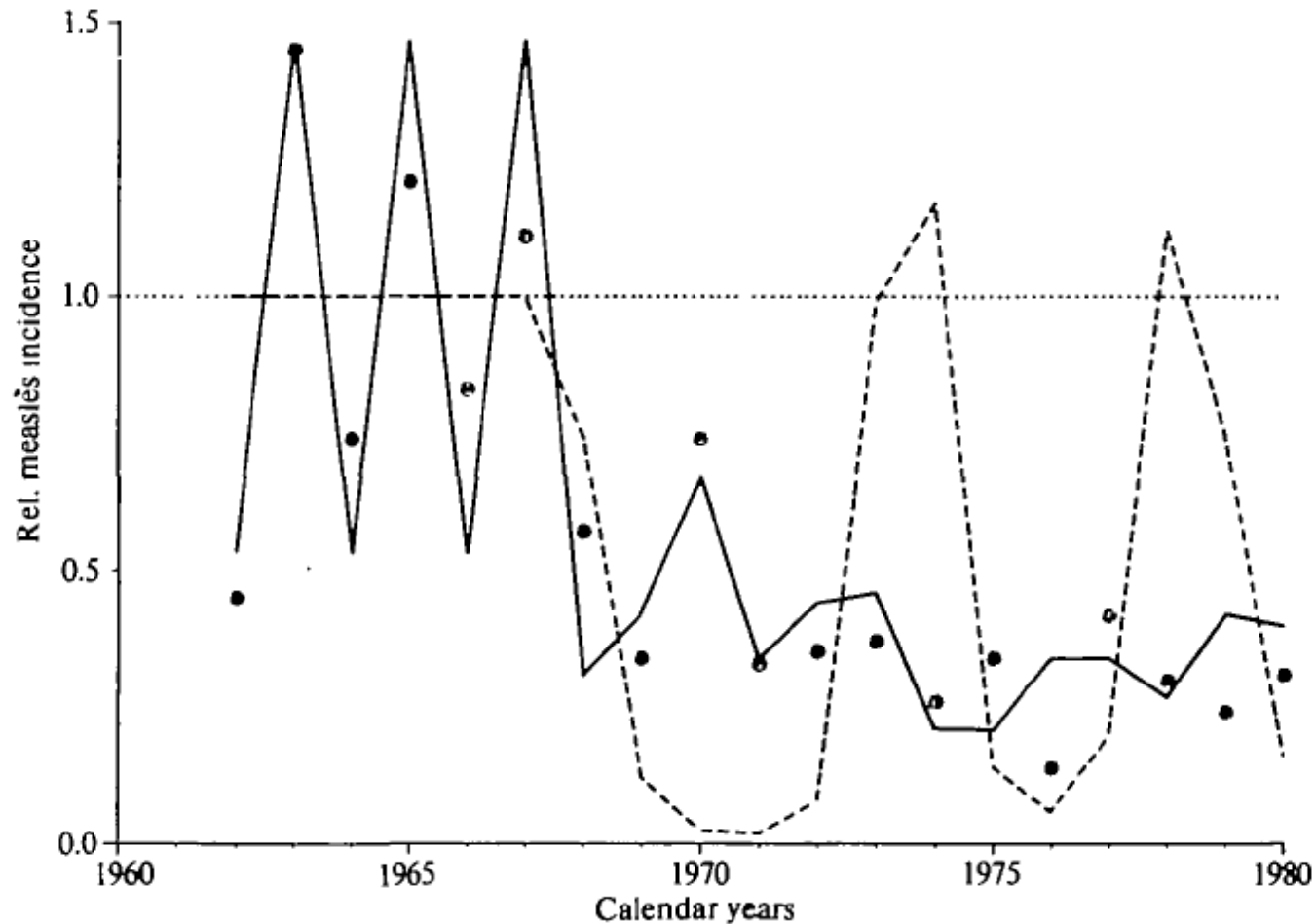


# Schenzle (1984): Age-Specific Contact Rates



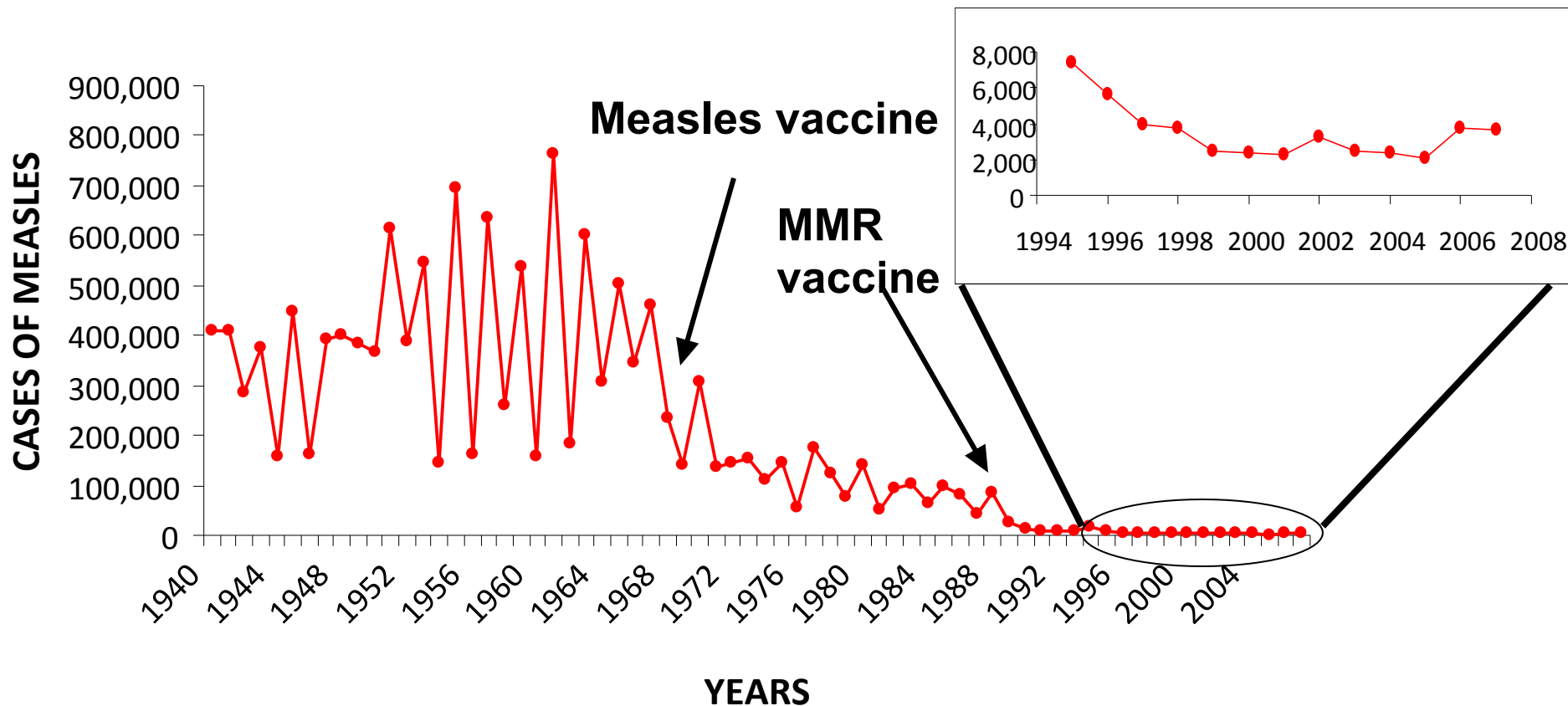


# Results of Schenzle (1984)

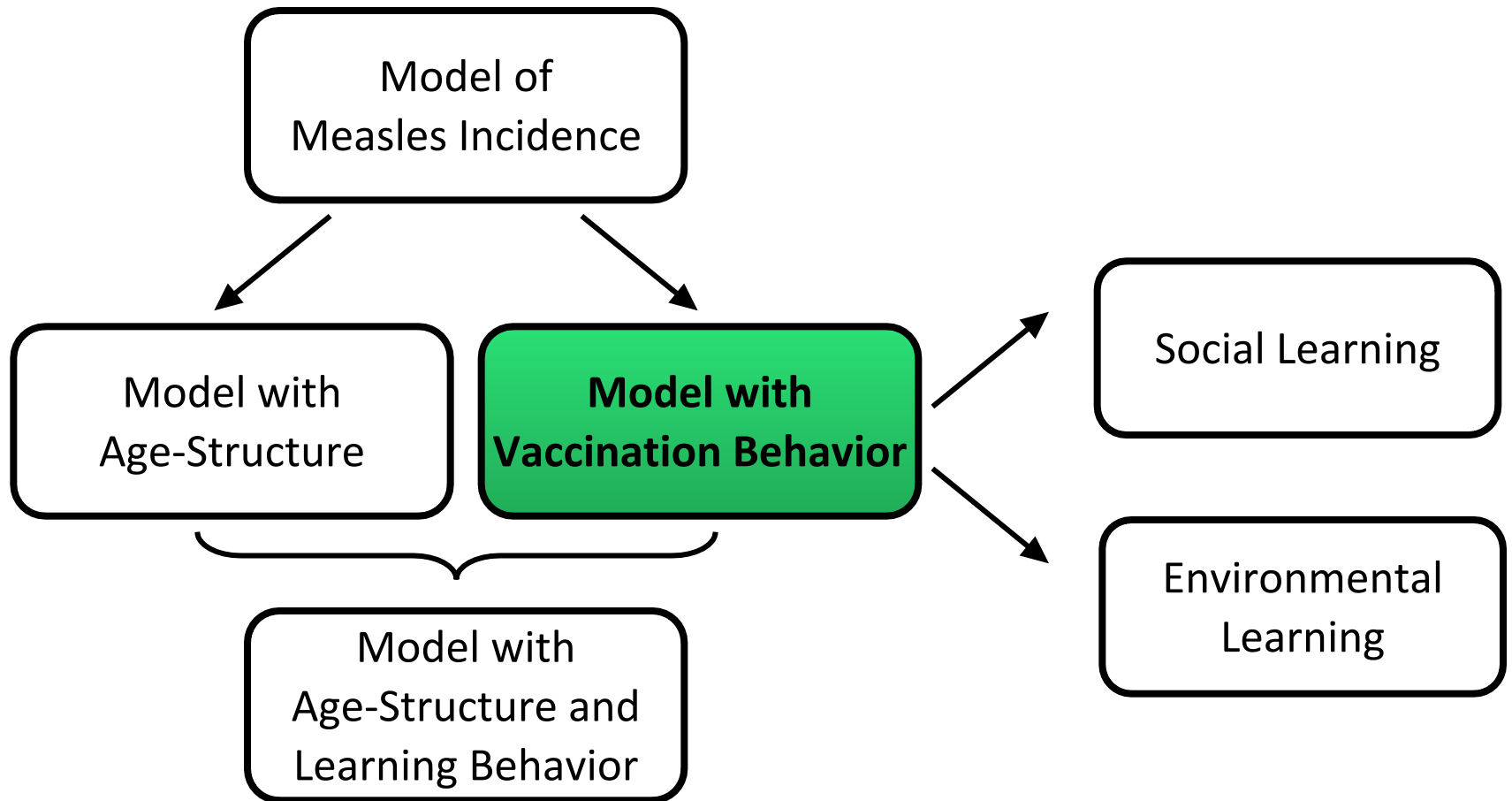


**model yields a biennial measles cycle**

# Reported Measles Cases in England & Wales 1940-2007

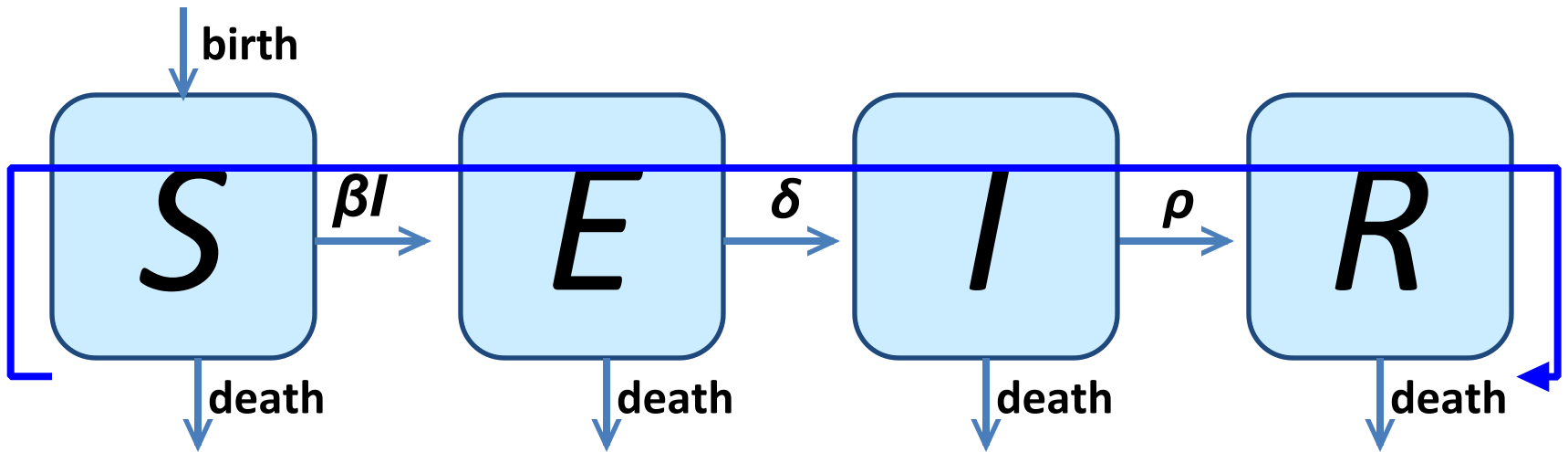


# Compulsory Vaccination

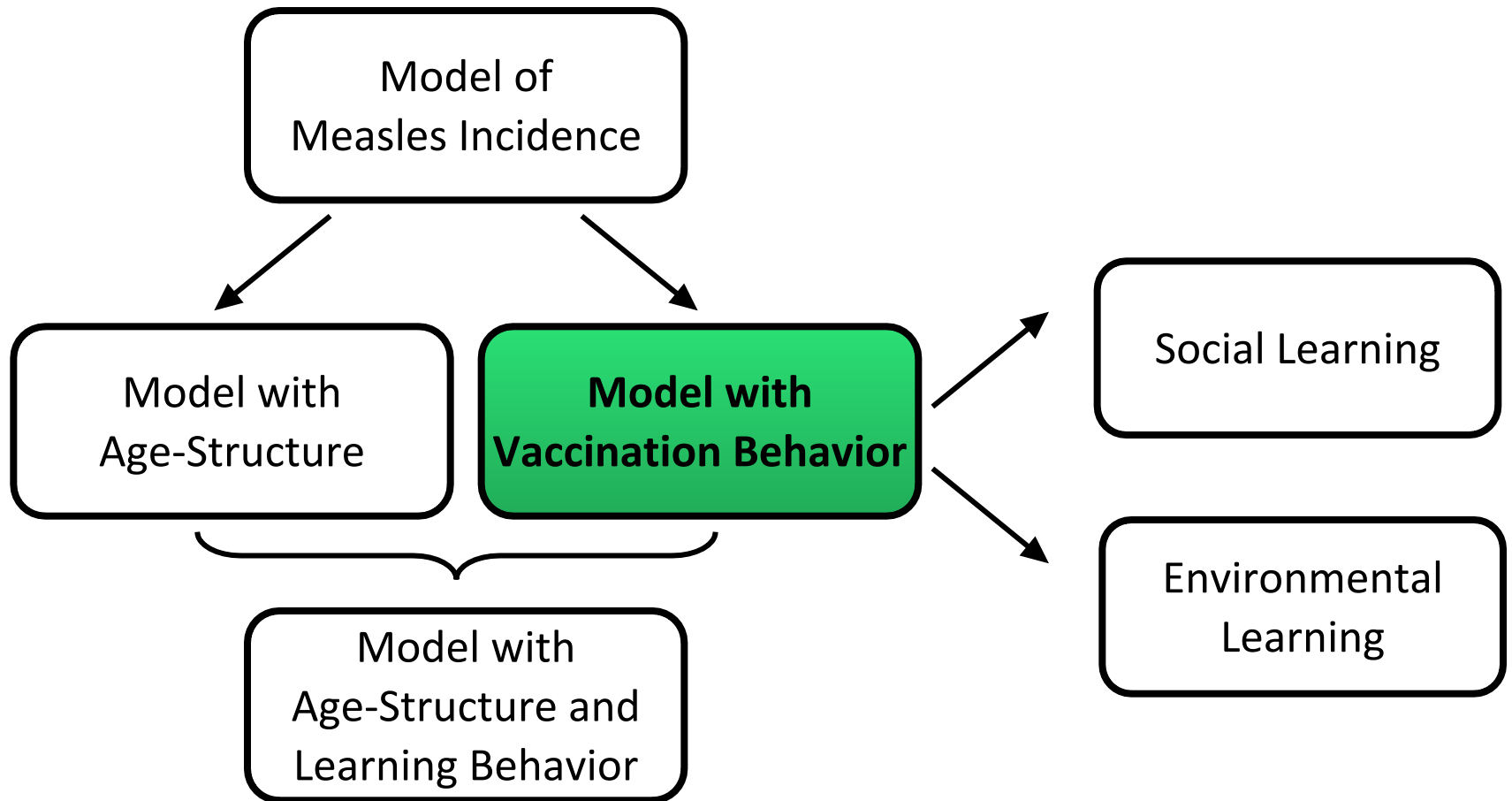


# Incorporating Vaccination

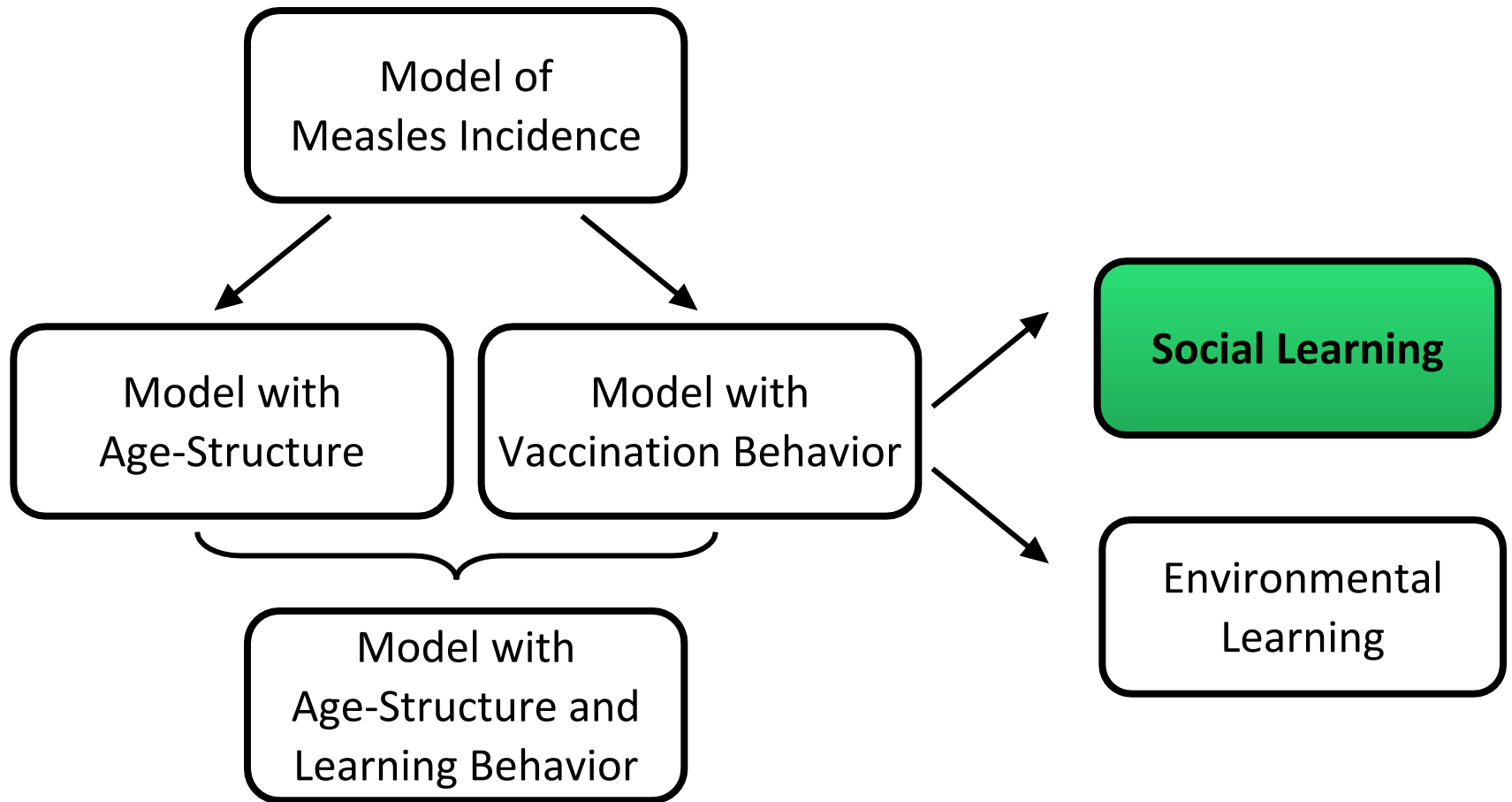
fraction immunized with MMR vaccine ( $x$ )



# Vaccination Programs



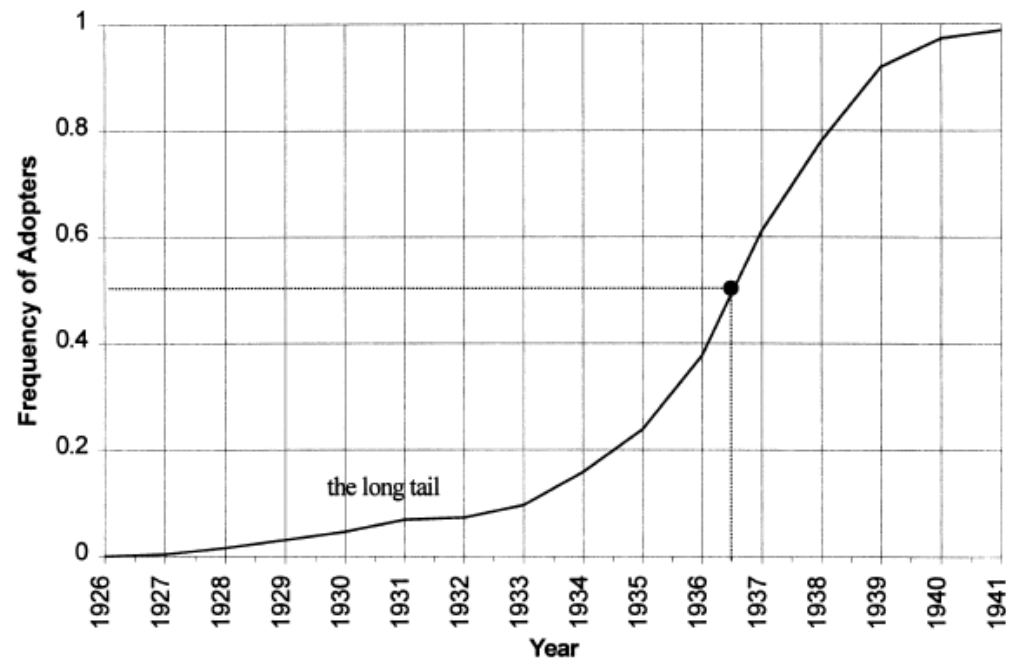
# Vaccination is Voluntary in the UK



# Social Learning

Henrich (2001): “Cultural Transmission and the Diffusion of Innovations”

- Innovation spread by contact between individuals is characterized by an s-shaped curve
- Potential adopters of an idea initially resist change
- There is an exponential growth phase and a leveling off phase



Diffusion of hybrid corn seed in two Iowa farming communities

# Social Learning

Bauch (2005): “Imitation Dynamics  
Predict Vaccination Behavior”

- Individuals adopt vaccination strategies according to an imitation dynamic
- Vaccination decision based on disease prevalence and perceived risk of vaccine and disease



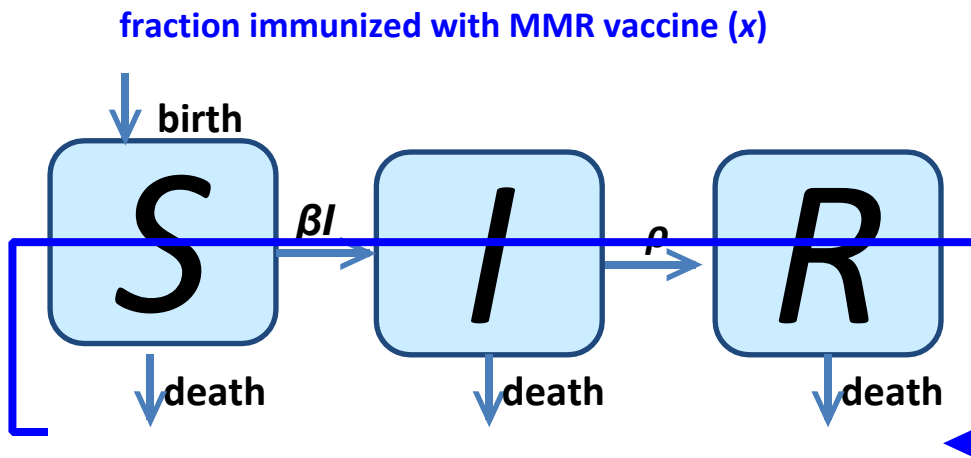


# Bauch's Model

$$dx/dt = \kappa x(1-x) [\omega I - 1]$$

$dx/dt$  = change in proportion of vaccinators over time

$x(1-x)$  = frequency at which vaccinators contact non-vaccinators and vice versa



## Model parameters

$\kappa$

Rate at which individuals sample others and switch vaccination strategies

$\frac{1}{\omega}$

Level of infection necessary before social learners can become convinced to vaccinate

## Two Ways to Understand $\omega$

$$dx/dt = \kappa x(1-x) [\omega I - 1]$$

$\frac{1}{\omega}$  = Level of infection necessary before social learners can become convinced to vaccinate

$$\omega = \frac{\text{Perceived risk of infection}}{\text{Perceived risk of the vaccine}}$$

$\frac{1}{\omega}$  = Level of infection necessary  
before social learners can become  
convinced to vaccinate



If  $\omega = 10,000$  (a high value)

$\frac{1}{\omega}$  = Level of infection necessary  
before social learners can become  
convinced to vaccinate

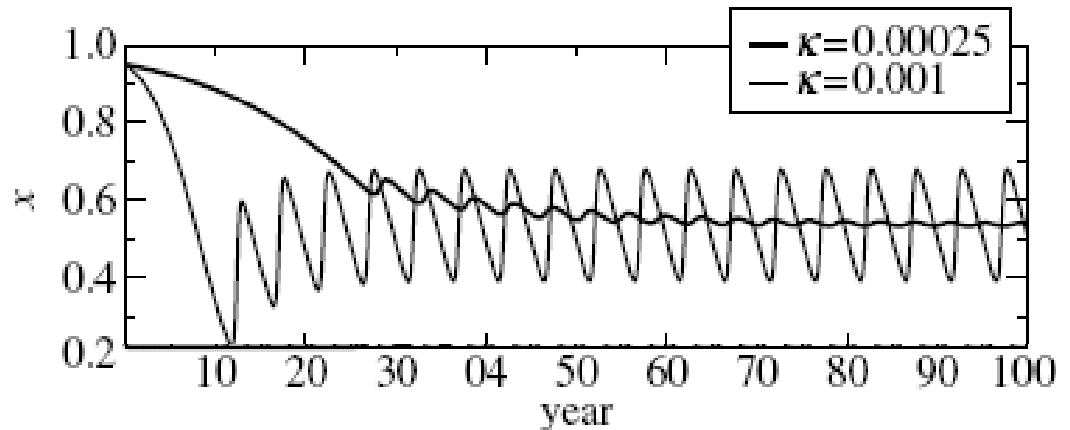


If  $\omega = 3,000$  (a low value)

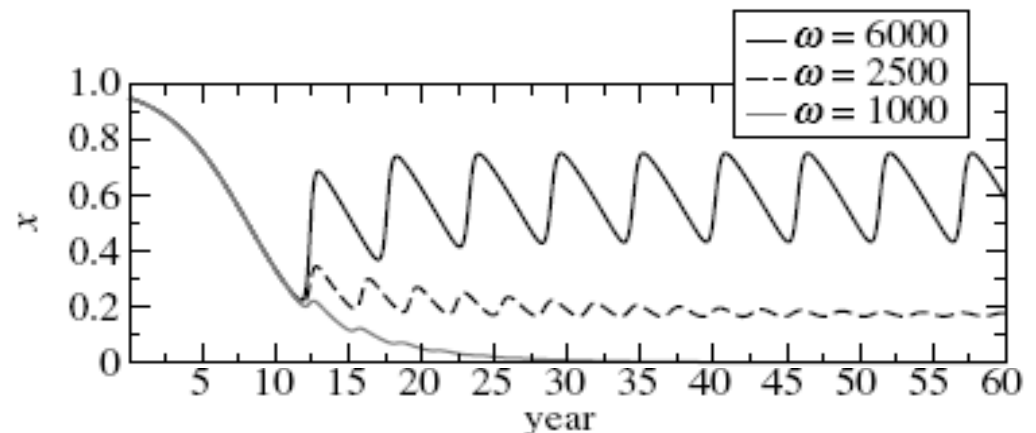
# Results of Bauch (2005)

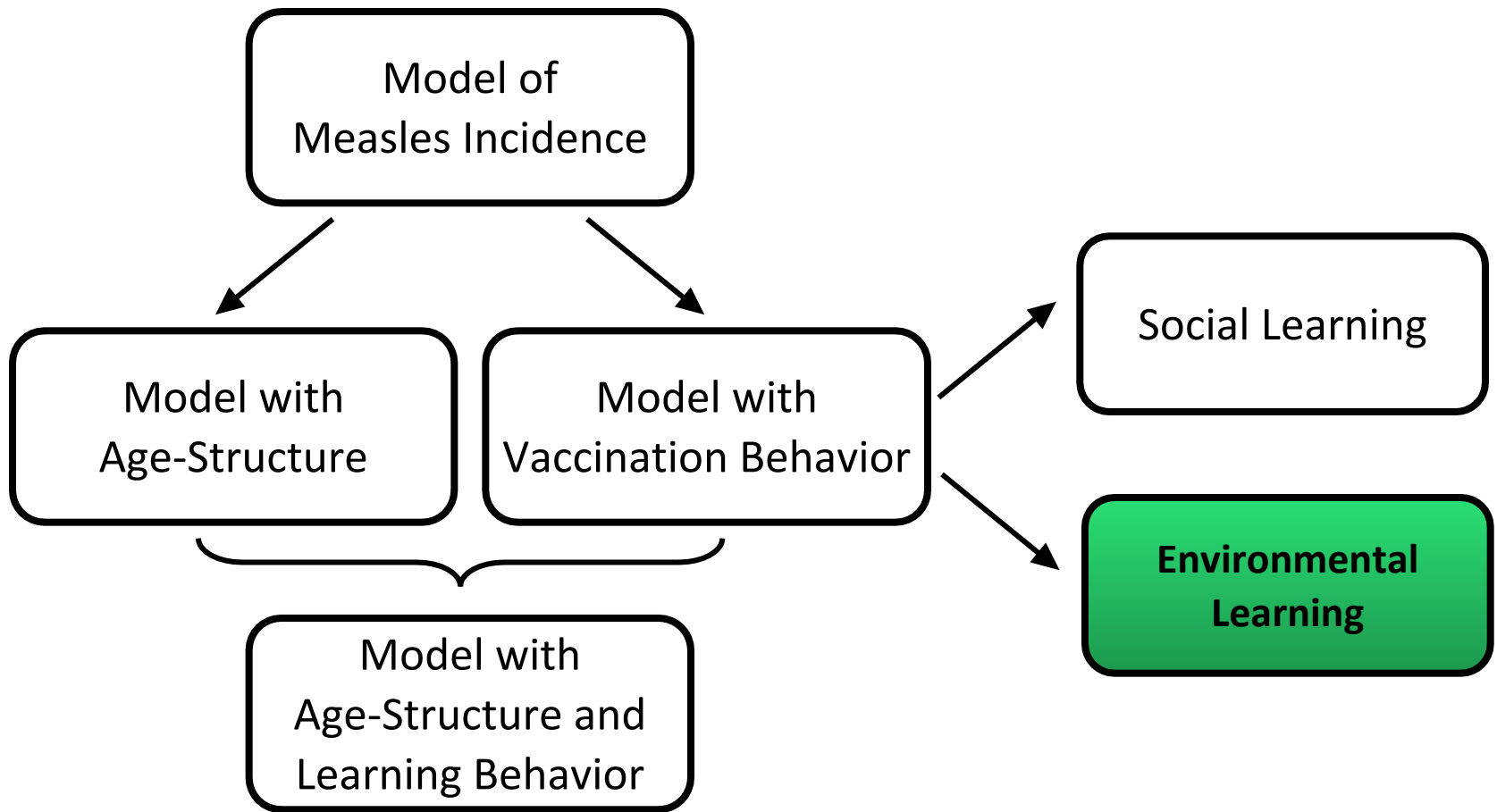
- oscillations occur in vaccine uptake when

individuals imitate  
each other more



Individuals react more  
quickly to disease  
prevalence

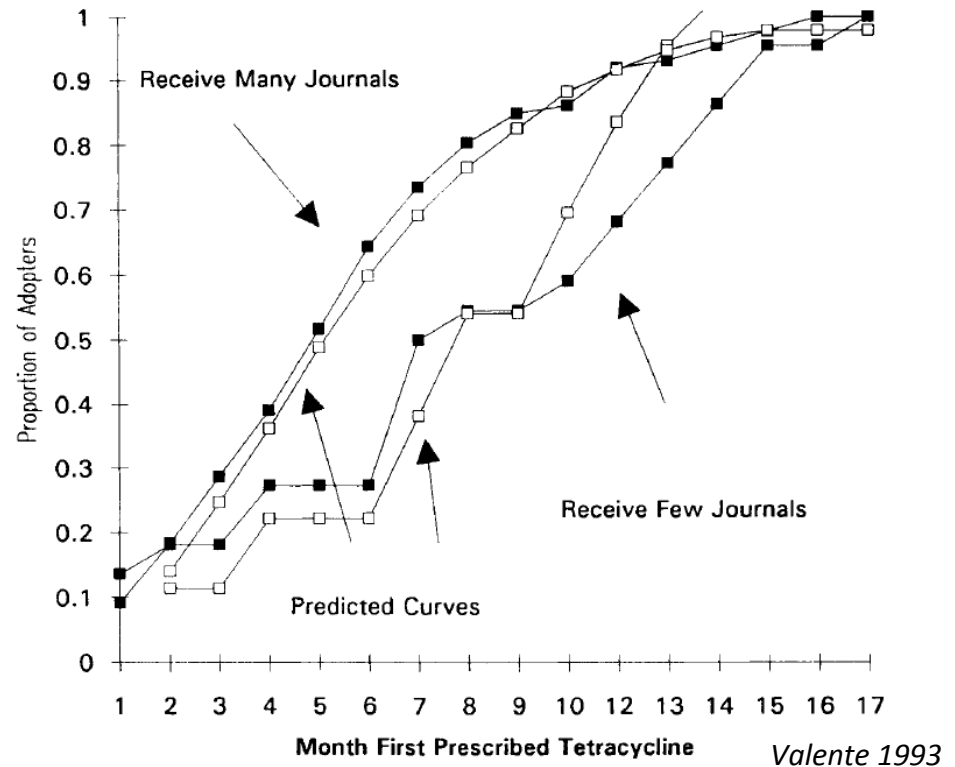




# Environmental Learning

Henrich (2001): “Cultural Transmission and the Diffusion of Innovations”

- Individual has complete knowledge of payoff gains of the innovation
- Individual chooses to adopt the innovation if it has a larger payoff



Actual and predicted curves for the diffusion of tetracycline prescriptions among Illinois doctors who receive many and few journals

# Different Messages from Environmental Learning

## ARE WE OVER-VACCINATING OUR KIDS?

Since 1983, the number of vaccines the Centers for Disease Control recommends for our kids has more than tripled. During this same time period, we've seen an explosion in neurological disorders like ADHD and autism, particularly with our boys, who represent 4 out of 5 cases.

Are these increases related? Can there be too much of a good thing? Until now, no one could know for sure,

because no study had ever been done to compare the rate of neurological disorders between vaccinated and unvaccinated children.

**CDC Mandatory Vaccine Schedule Comparison**  
*(Children birth to 6 years, by year (in recommended month))*

USA 1983	USA 2007
DTP (12)	Influenza (granuloh)
OPV (12)	Hep B (12m)
DTaP (14)	Hep B (15)
OPV (14)	DTaP (12)
DTaP (16)	MM (12)
MMR (15)	IPV (2)
DTaP (18)	PCV (12)
OPV (18)	Rotavirus (2)
DTaP (18)	Hep B (14)
OPV (18)	DTaP (14)
	MM (14)
	IPV (14)
	PCV (14)
	Rotavirus (14)
	Hep B (16)
	DTaP (16)
	MM (16)
	IPV (16)
	PCV (16)
	Influenza (16)
	Rotavirus (16)
	MM (12)
	MMR (12)
	Varicella (12)
	PCV (12)
	Hep A (12)
	DTaP (15)
	Hep A (15)
	Influenza (10)
	Influenza (10)
	Influenza (12)
	MMR (14)
	DTaP (14)
	IPV (14)
	Influenza (15)
	Influenza (16)

18      36

We commissioned a market research firm to survey more than 17,000 children in California and Oregon. We found that vaccinated boys had more than a 2.5-times greater rate of neurological disorders than unvaccinated boys. We believe a national study must be done to further explore these disturbing results.

Visit our site and read the results of our survey, as well as find helpful information on how to vaccinate your child more safely. **Learn more at** [www.generationrescue.org](http://www.generationrescue.org)

**A NEW SURVEY OF KIDS IN CALIFORNIA AND OREGON SAYS WE MAY WELL BE.**



The number of children catching measles is rising. To be protected they need to be immunised with the MMR vaccine.

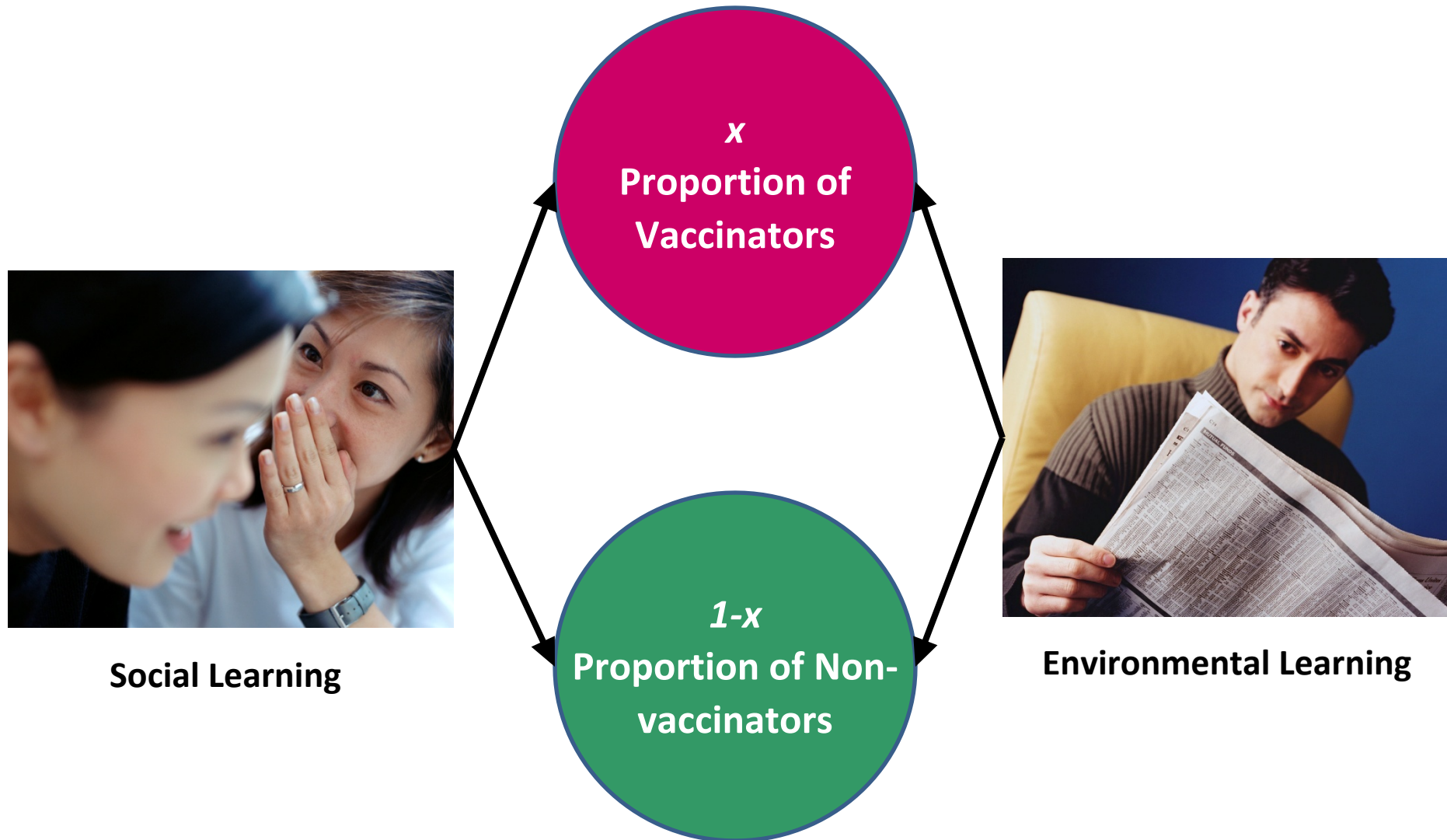
It's never too late to be vaccinated.

For more information contact your local GP surgery or visit:

[www.immunisation.nhs.uk](http://www.immunisation.nhs.uk)



# How do we model voluntary vaccination?



# Incorporating Environmental Learning into Vaccination Behavior

$$dx/dt = \underbrace{L_s x(1-x) [\omega - 1]}_{\text{Social learning}} + \underbrace{L_e (1 - x/c)}_{\text{Environmental learning}}$$



Learning parameters	
$L_s$	Rate of social learning
$L_e$	Rate of environmental learning
$c$	Proportion of time that environmental learners switch to a vaccinating strategy

# Summary of Previous Work



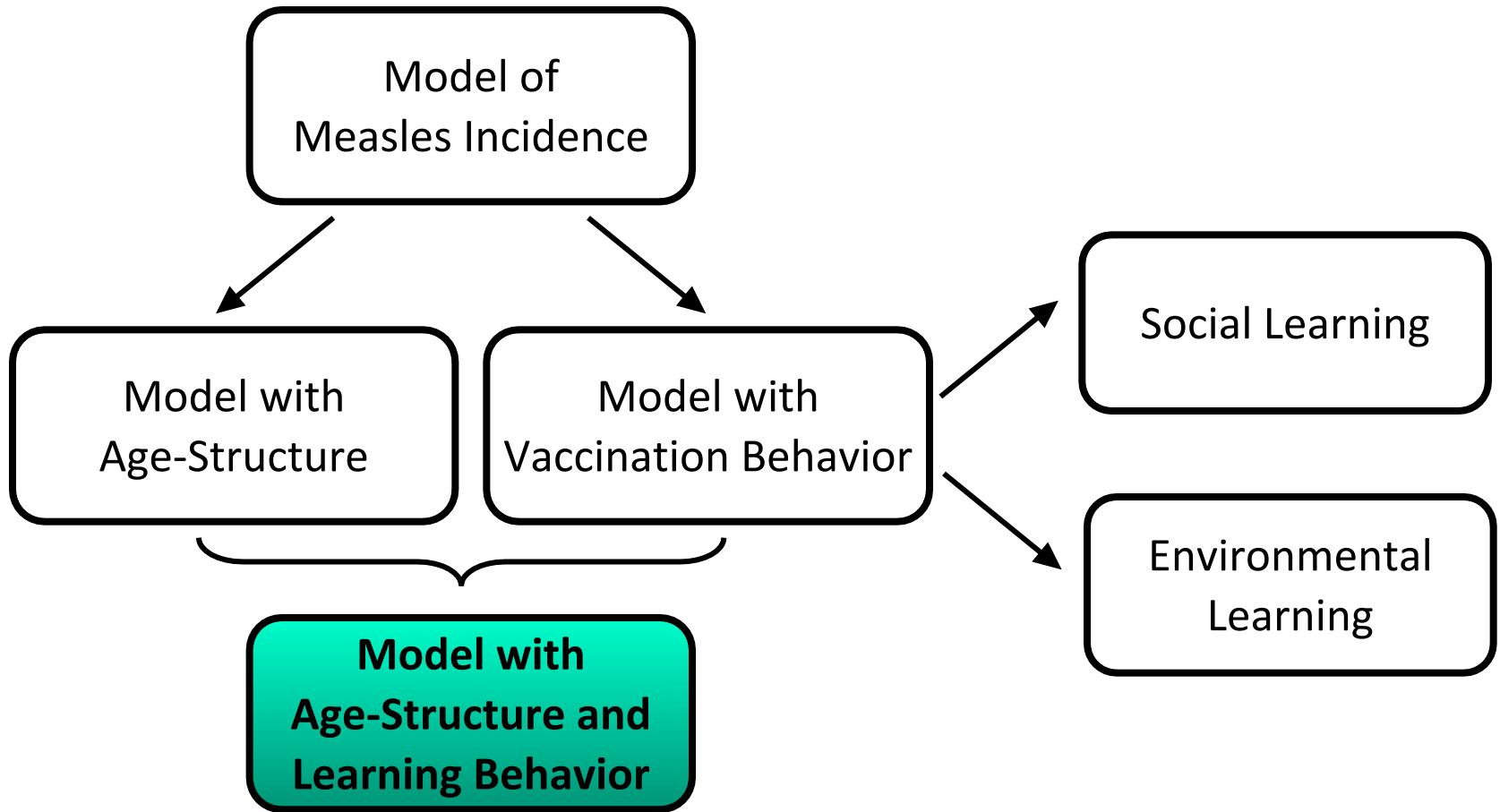
Age-Structure



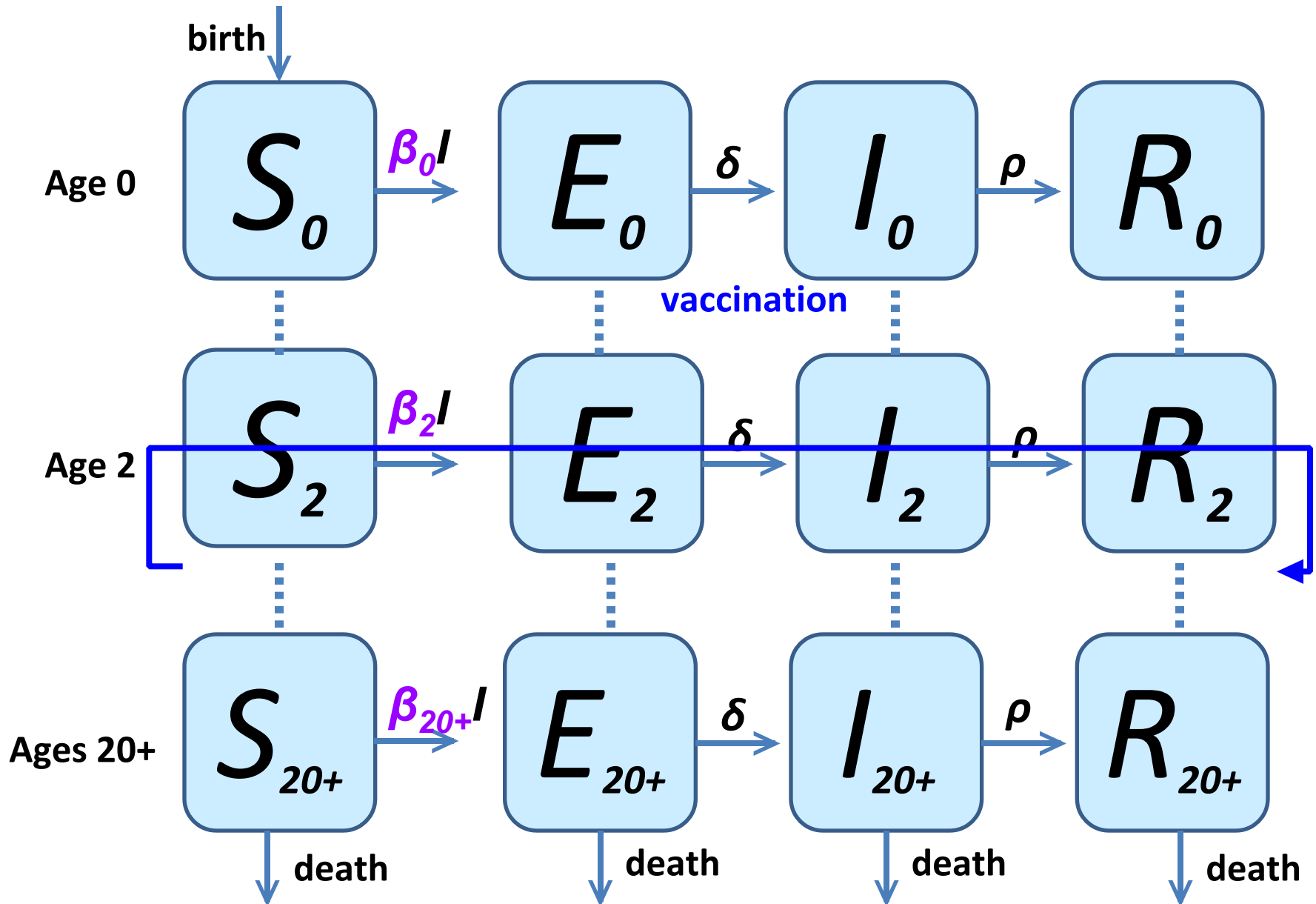
Voluntary Vaccination

- Schenzle (1984): accurately captured measles pre-vaccine incidence by incorporating age-structure but did not include voluntary vaccination
- Bauch (2005): modeled disease dynamics with vaccination behavior but did not include age-structure
- In our model we include both age-structure and voluntary vaccination

# The Big Picture



# Model with Age-Structure and Vaccination



# Our Model

## 1. AGE-SPECIFIC SEIR EQUATIONS

$N = 50$  million,  $\nu = 666,666$ ,  $\mu = 1/55$ ,  
 $\delta = 1/8$ ,  $\rho = 1/5$ ,  $\Sigma =$  summation over  $j = 1, 2, \dots, 20$   
 $\beta$  = matrix of age-specific contact rates.

Age 0

$$\begin{aligned}\frac{dS_0}{dt} &= \nu - \Sigma \beta_{0j}(\tau) S_0, & \frac{dE_0}{dt} &= \Sigma \beta_{0j}(\tau) S_0 - \delta E_0, \\ \frac{dI_0}{dt} &= \delta E_0 - \rho I_0, & \frac{dR_0}{dt} &= \rho I_0\end{aligned}$$

Age  $k$ , where  $k = 1, 2, \dots, 19$

$$\begin{aligned}\frac{dS_k}{dt} &= -\Sigma \beta_{kj}(\tau) S_k, & \frac{dE_k}{dt} &= \Sigma \beta_{kj}(\tau) S_k - \delta E_k, \\ \frac{dI_k}{dt} &= \delta E_k - \rho I_k, & \frac{dR_k}{dt} &= \rho I_k\end{aligned}$$

Age  $n$ , where  $n = 20+$

$$\begin{aligned}\frac{dS_n}{dt} &= -[\Sigma \beta_{nj}(\tau) + \mu] S_n, & \frac{dE_n}{dt} &= \Sigma \beta_{nj}(\tau) S_n - (\delta + \mu) E_n, \\ \frac{dI_n}{dt} &= \delta E_n - (\rho + \mu) I_n, & \frac{dR_n}{dt} &= \rho I_n - \mu R_n\end{aligned}$$

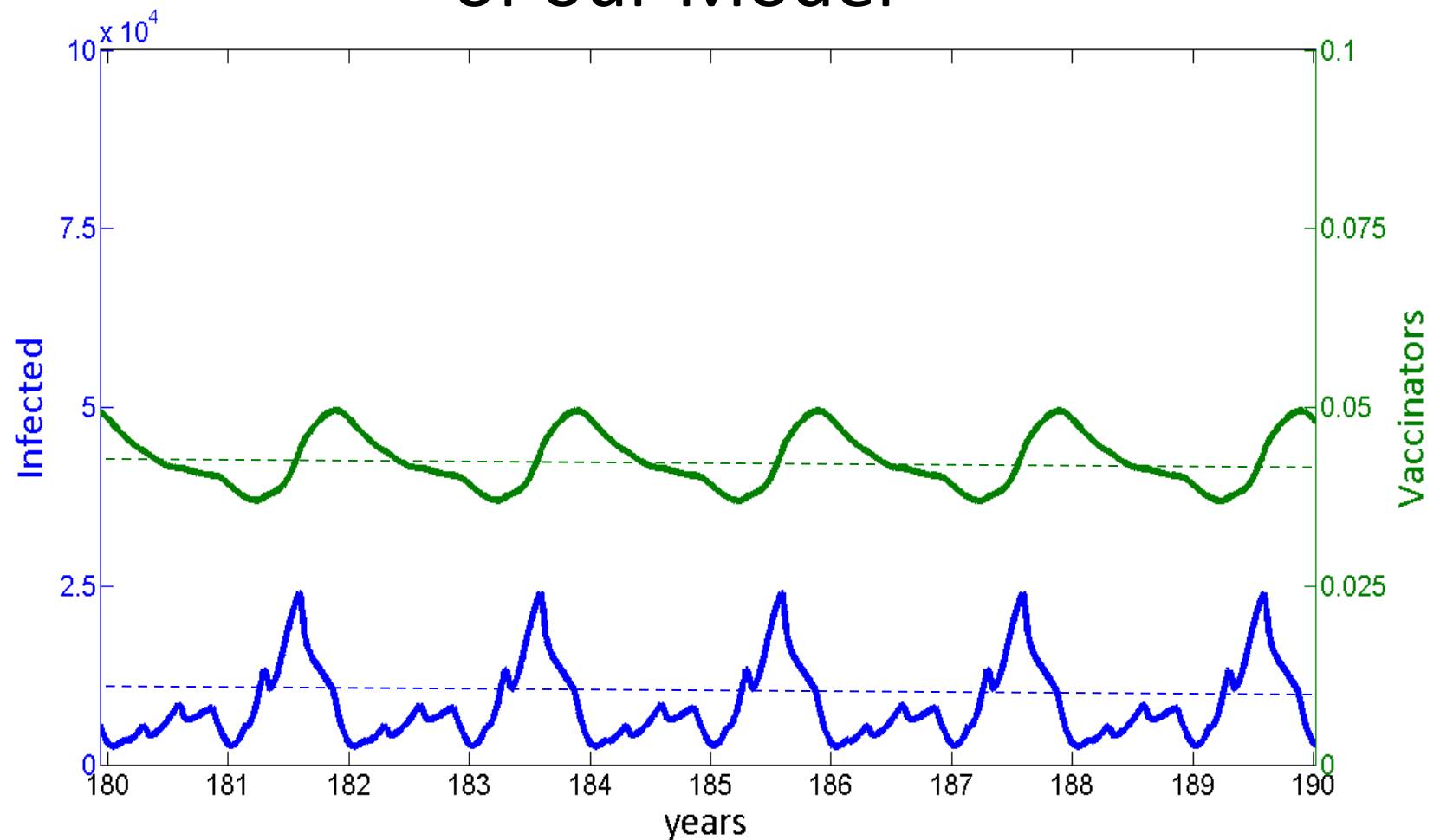
## 2. VACCINATION DYNAMICS

$$\frac{dx}{dt} = L_s x(1-x)[\omega I - 1] + L_e [1 - x/c]$$

# Methods

- Fixed a population size of 50 million
- Chose constants for births, death rate, latent transition rate, recovery rate, and contact rate from measles data
- Ran simulations in the programming language MATLAB to examine both short and long term vaccination and disease dynamics
- Studied three scenarios
  - Social learning dominates
  - Mixture of social and environmental learning
  - Vaccine scare

# An Example of a MATLAB Output of our Model



Measure average



# Results

- Studied three scenarios
  - *Social learning dominates*
  - Mixture of social and environmental learning
  - Vaccine scare

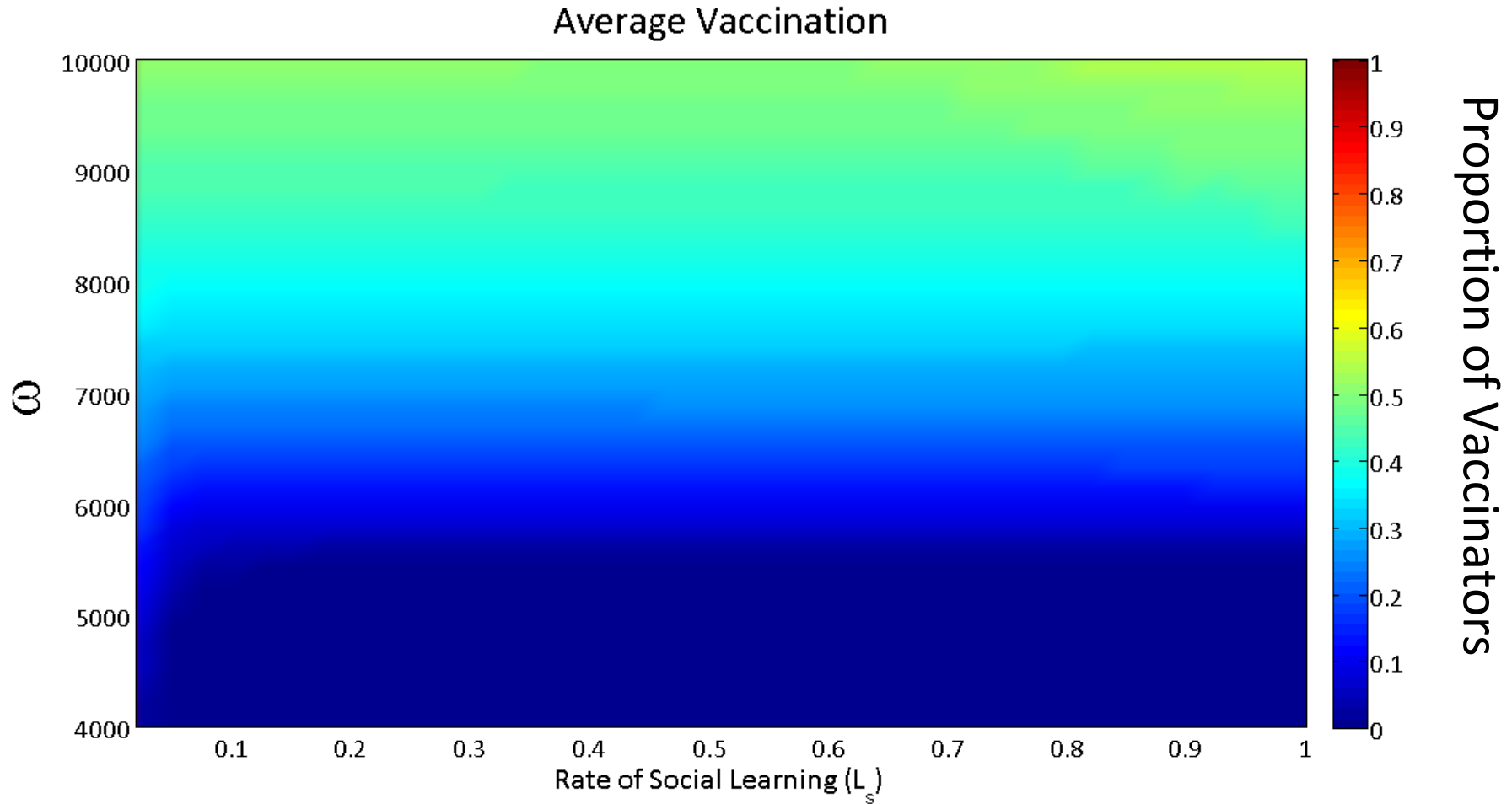
# Only Social Learning

$$dx/dt = L_s x(1-x) [\omega I - 1]$$

How do various parameter values influence vaccination and disease dynamics?



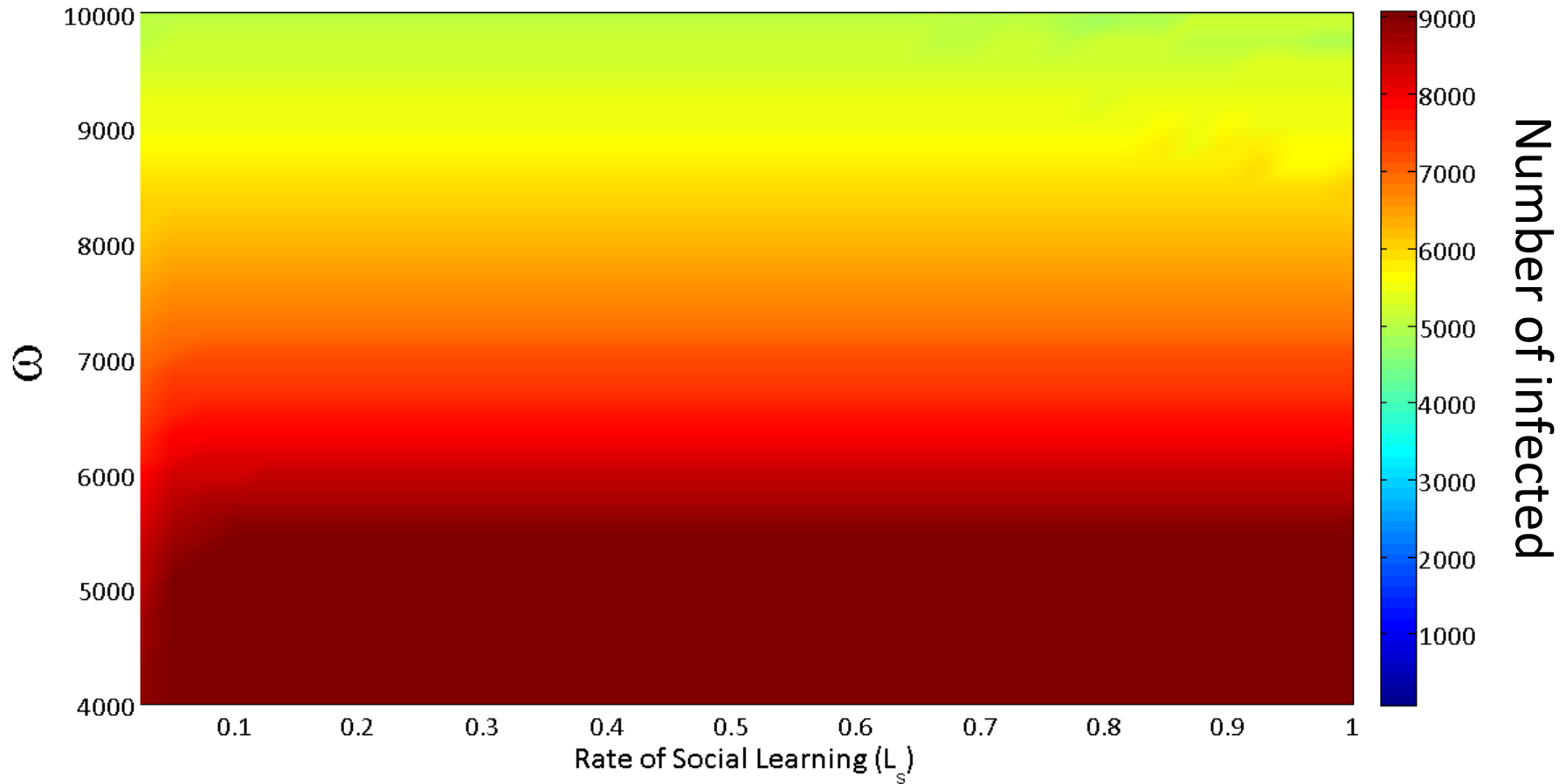
# Effects of Social Learning on Vaccination



- Average vaccination increases with sensitivity to level of infection.
- Average vaccination is independent of the social learning rate.

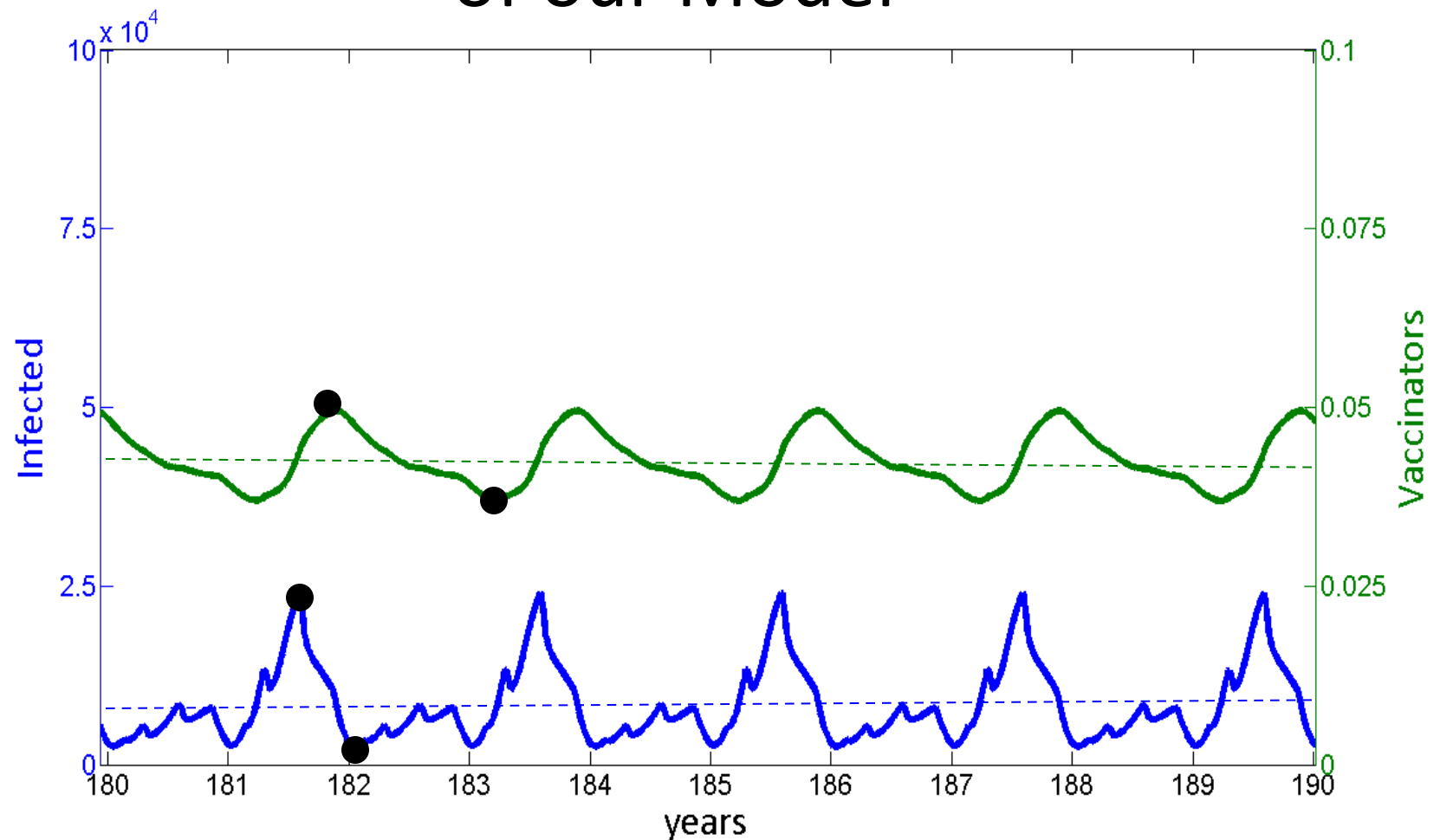
# Effects of Social Learning on Infection

Average Infection



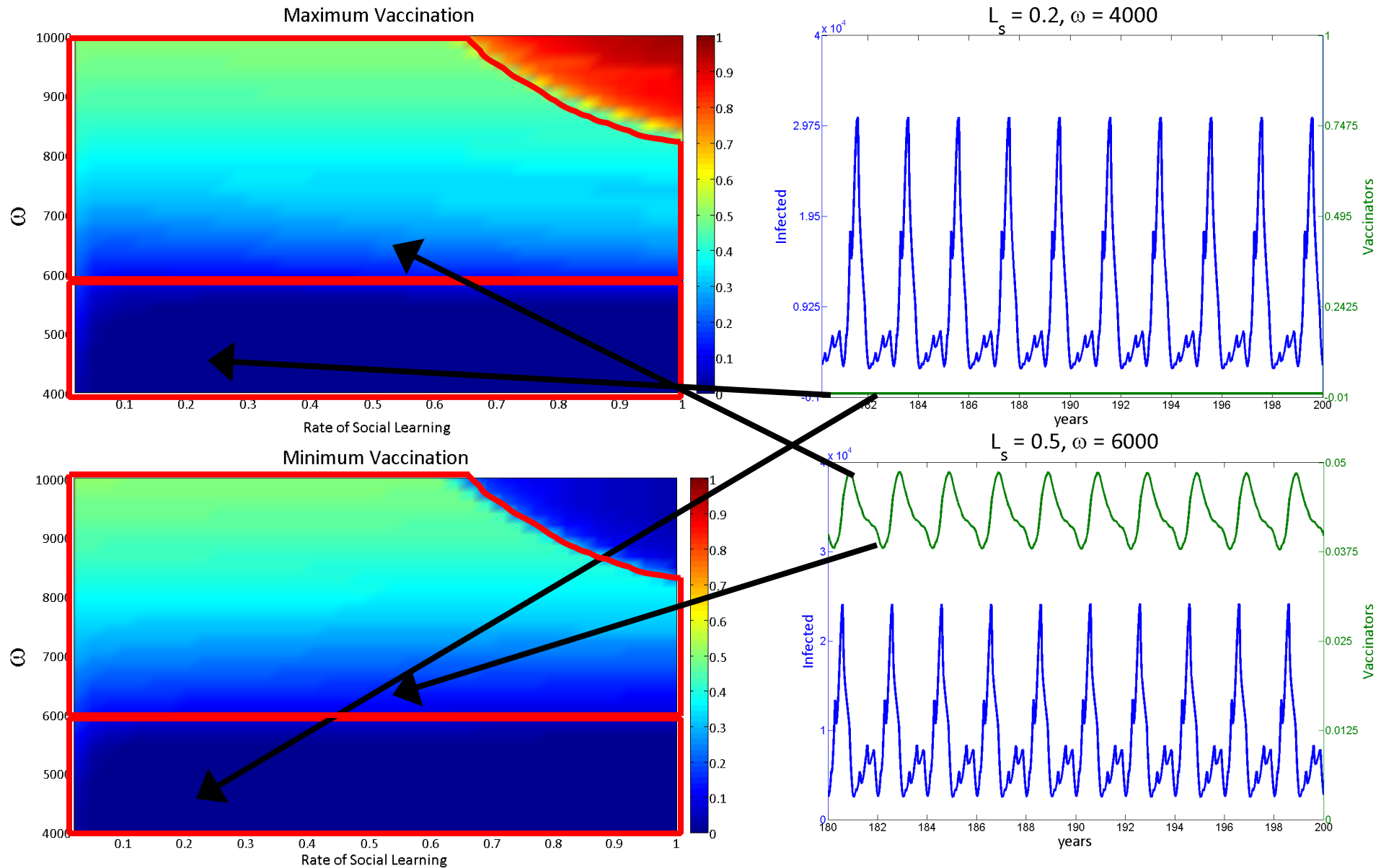
- Average infection decreases with sensitivity to level of infection.
- Average infection is independent of the social learning rate.

# An Example of a MATLAB Output of our Model

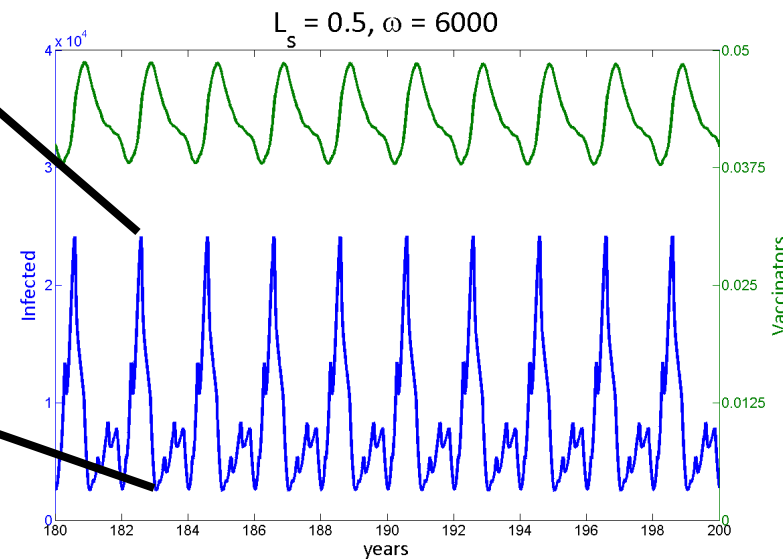
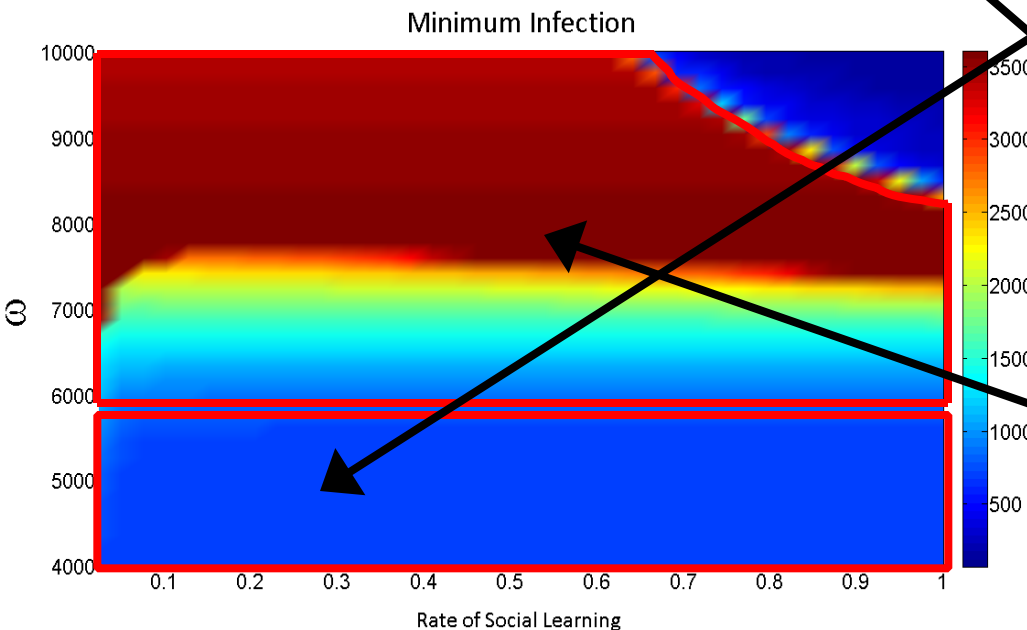
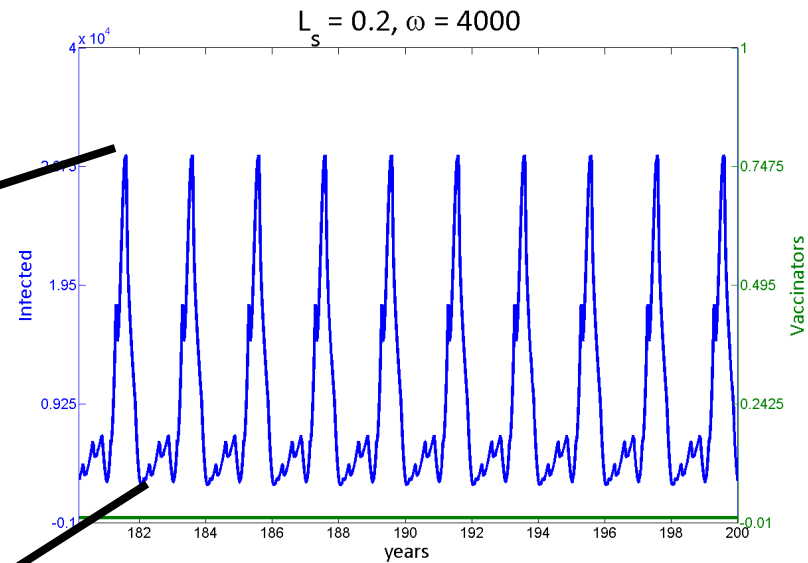
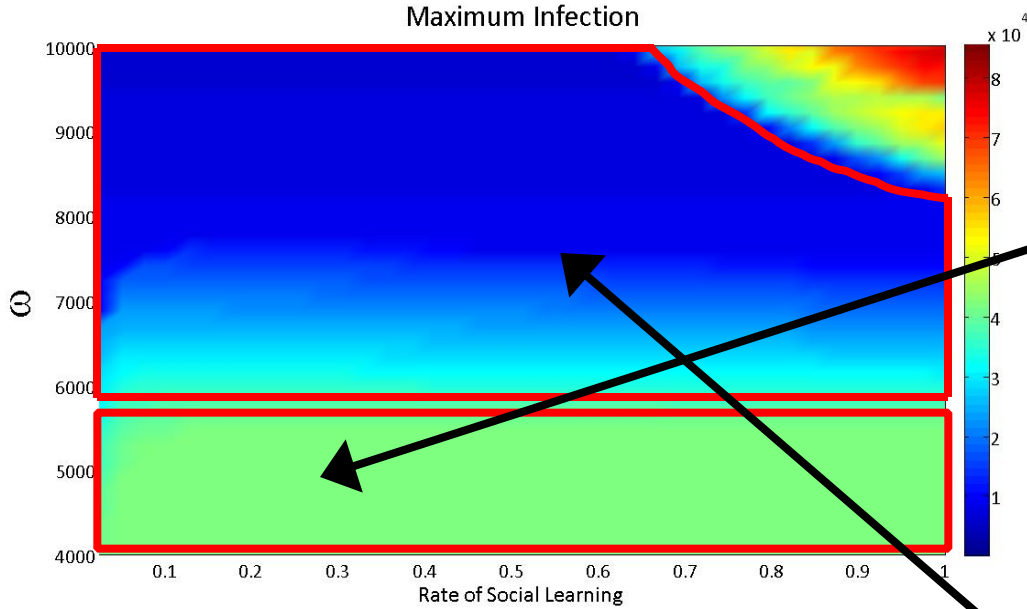


Measure average, maximum, and  
minimum

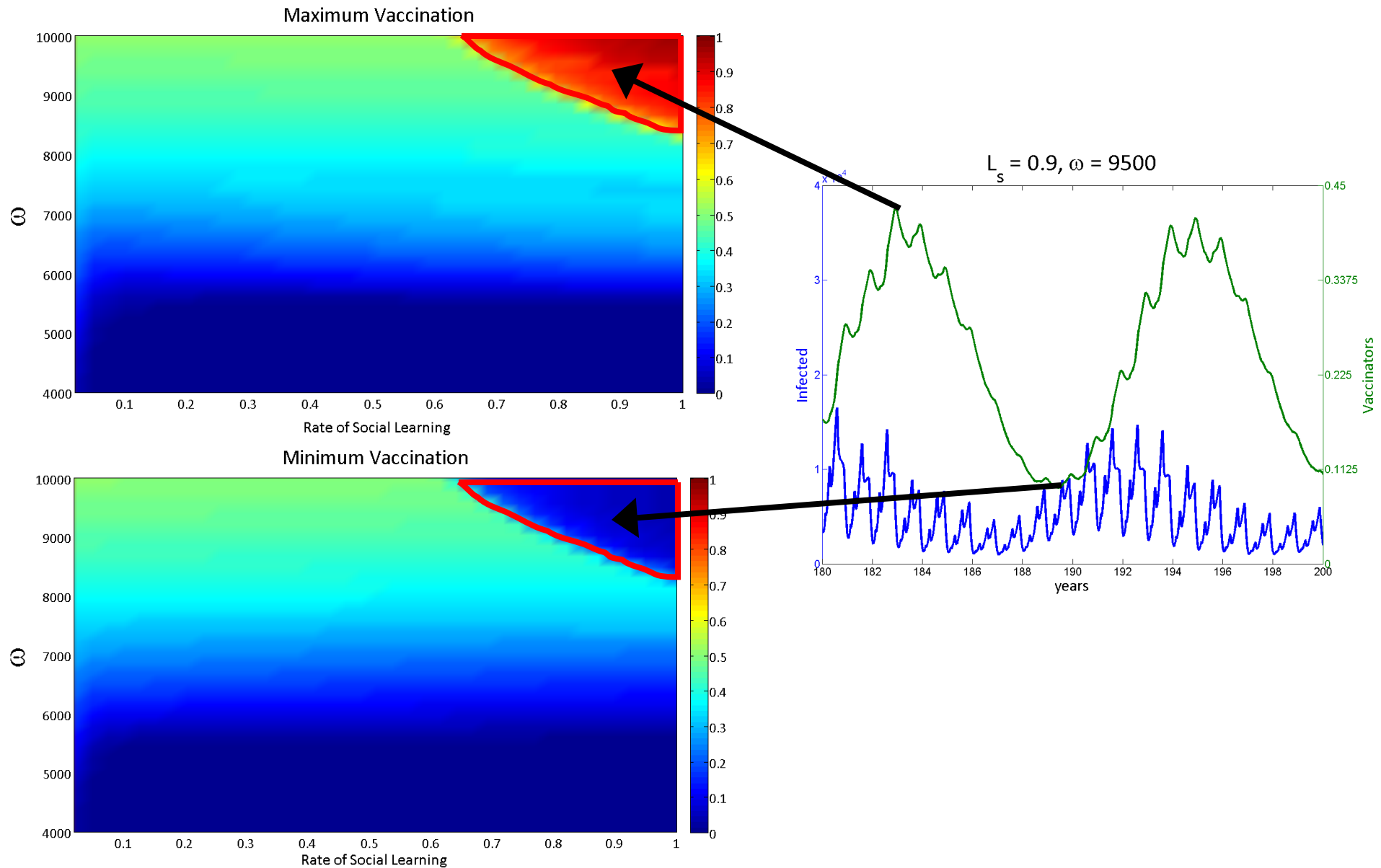
# Max. and Min. Vaccination



# Max. and Min. Infection

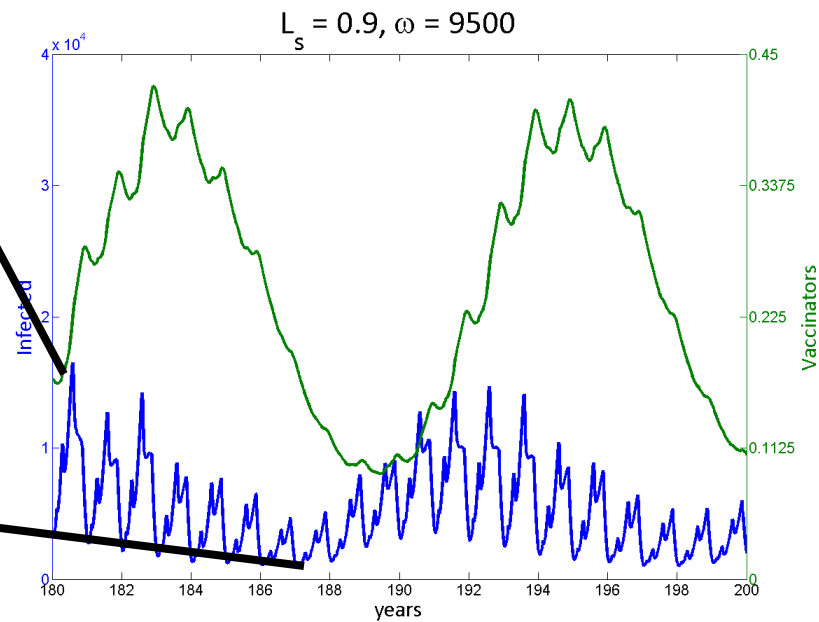
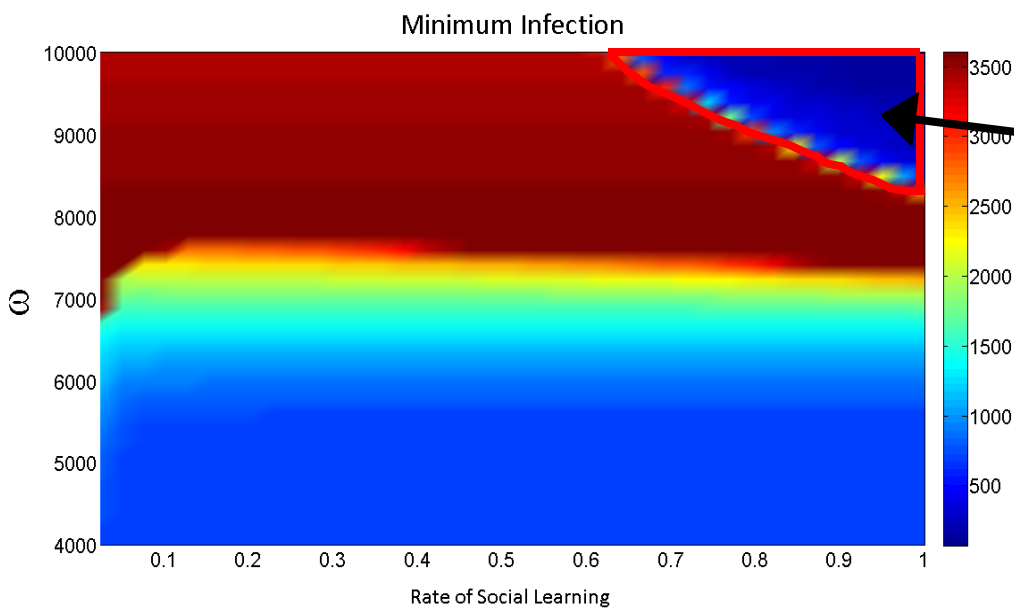
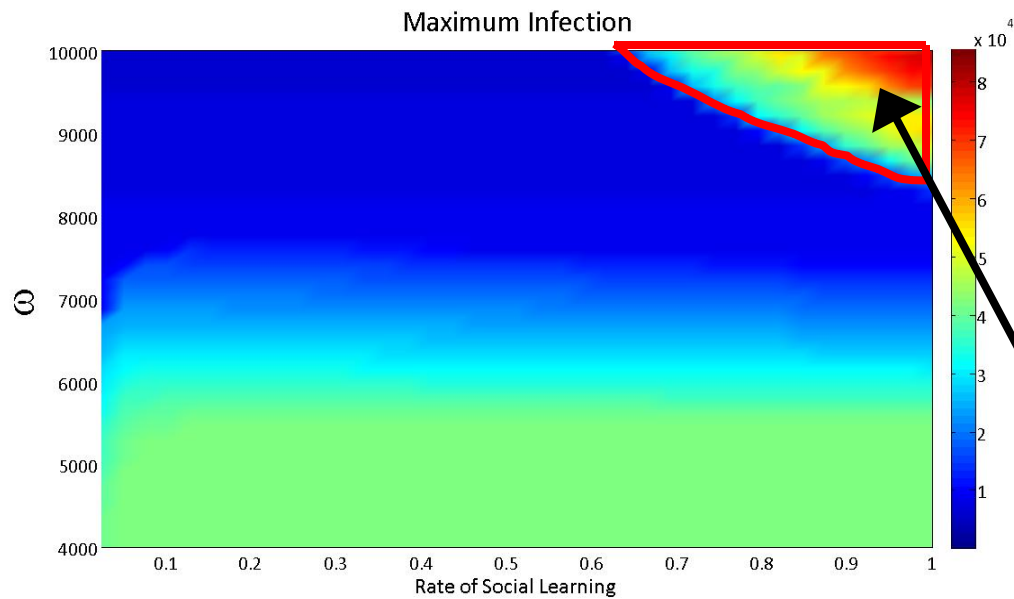


# Max. and Min. Vaccination





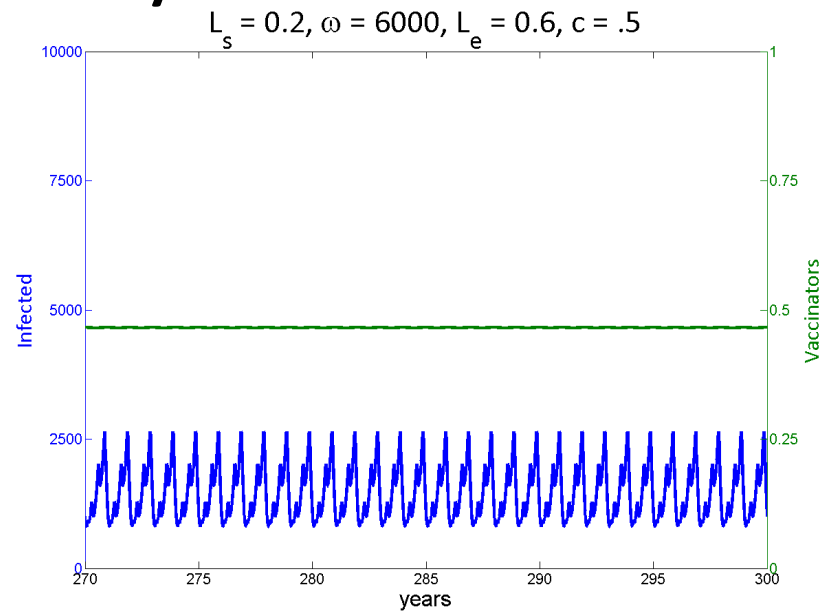
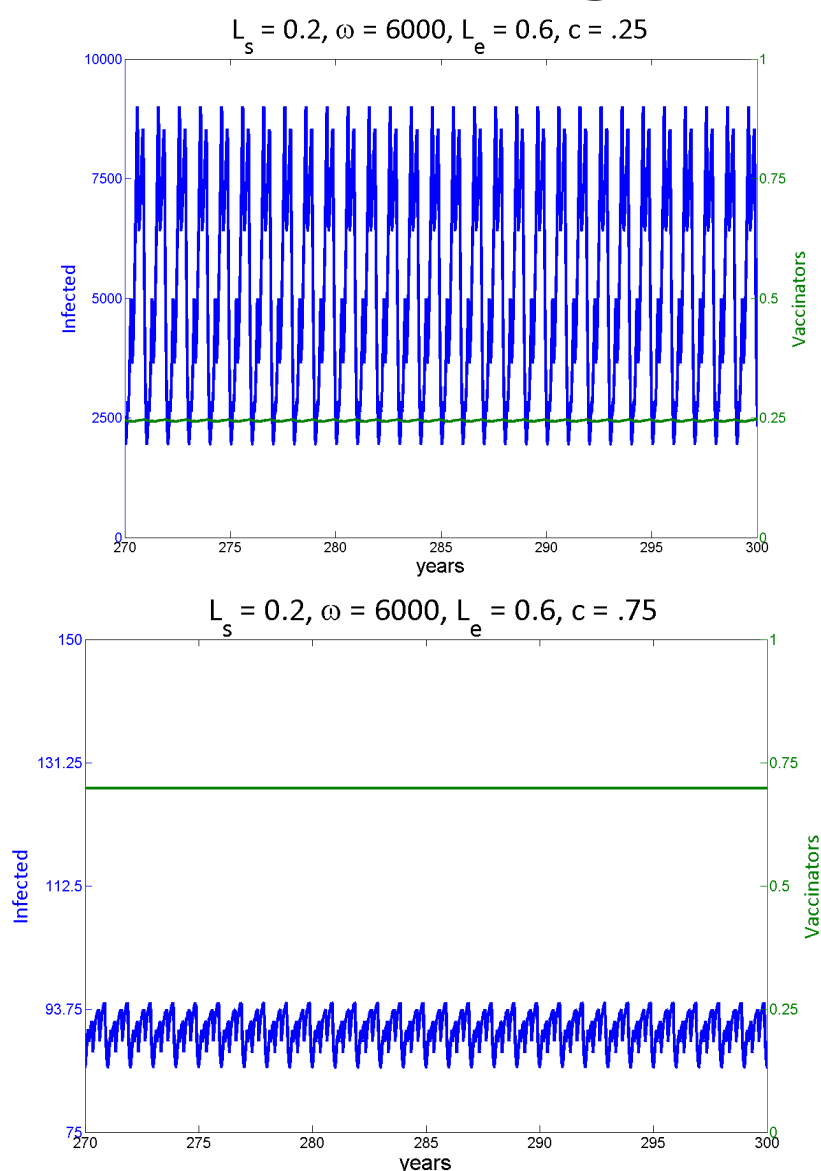
# Max. and Min. Infection



# Results

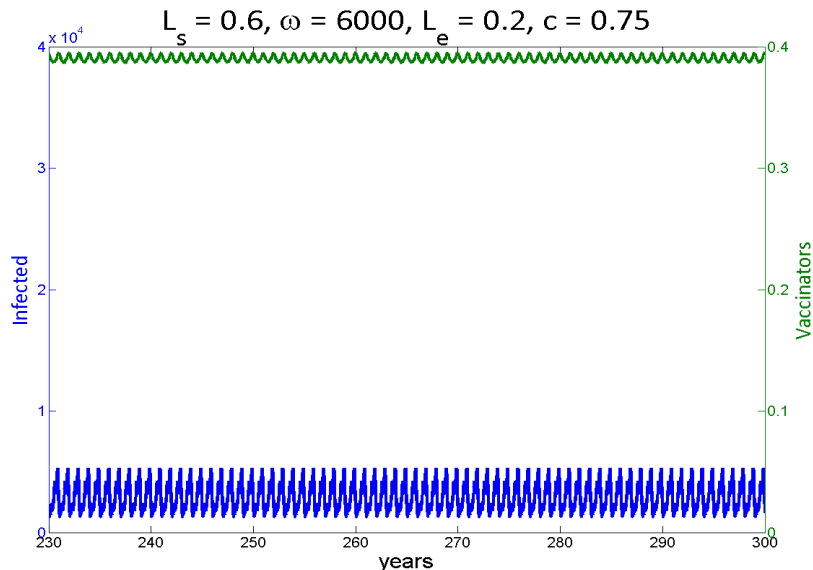
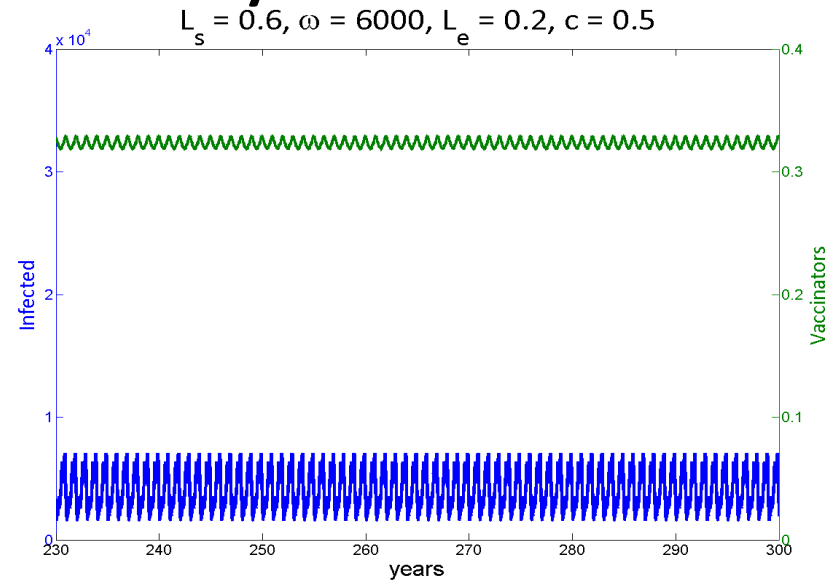
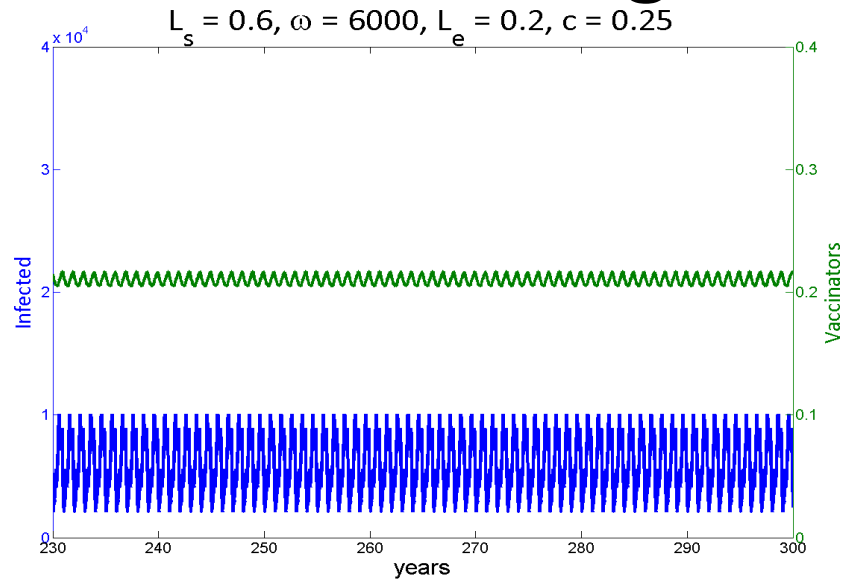
- Studied three scenarios
  - Social learning dominates
  - *Mixture of social and environmental learning*
  - Vaccine scare

# Mixture of social and environmental learning effects on dynamics



- Higher vaccination decreases maximum infection
- The average vaccination is approximately the probability a person switching to a vaccinating strategy.

# Mixture of social and environmental learning effects on dynamics

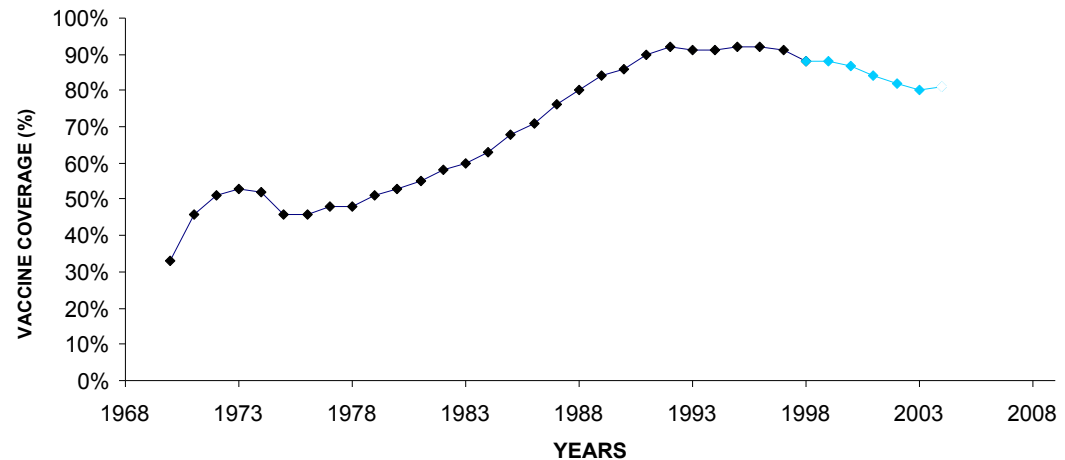


- Higher probability does not correspond to a high level of vaccinators
- Infection does not decrease as low levels.

# Results

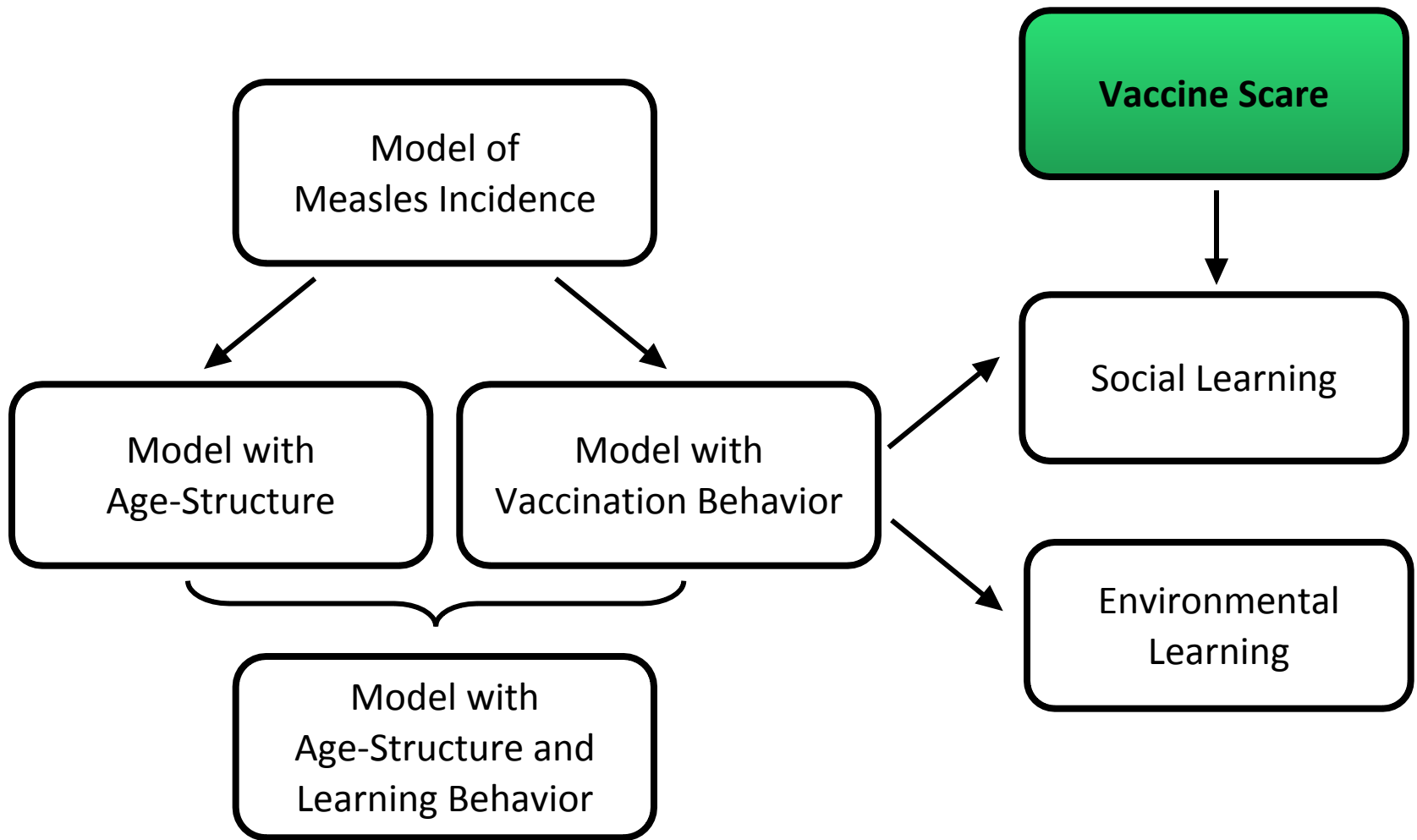
- Studied three scenarios
  - Social learning dominates
  - Mixture of social and environmental learning
  - *Vaccine scare*

# Vaccine Scares

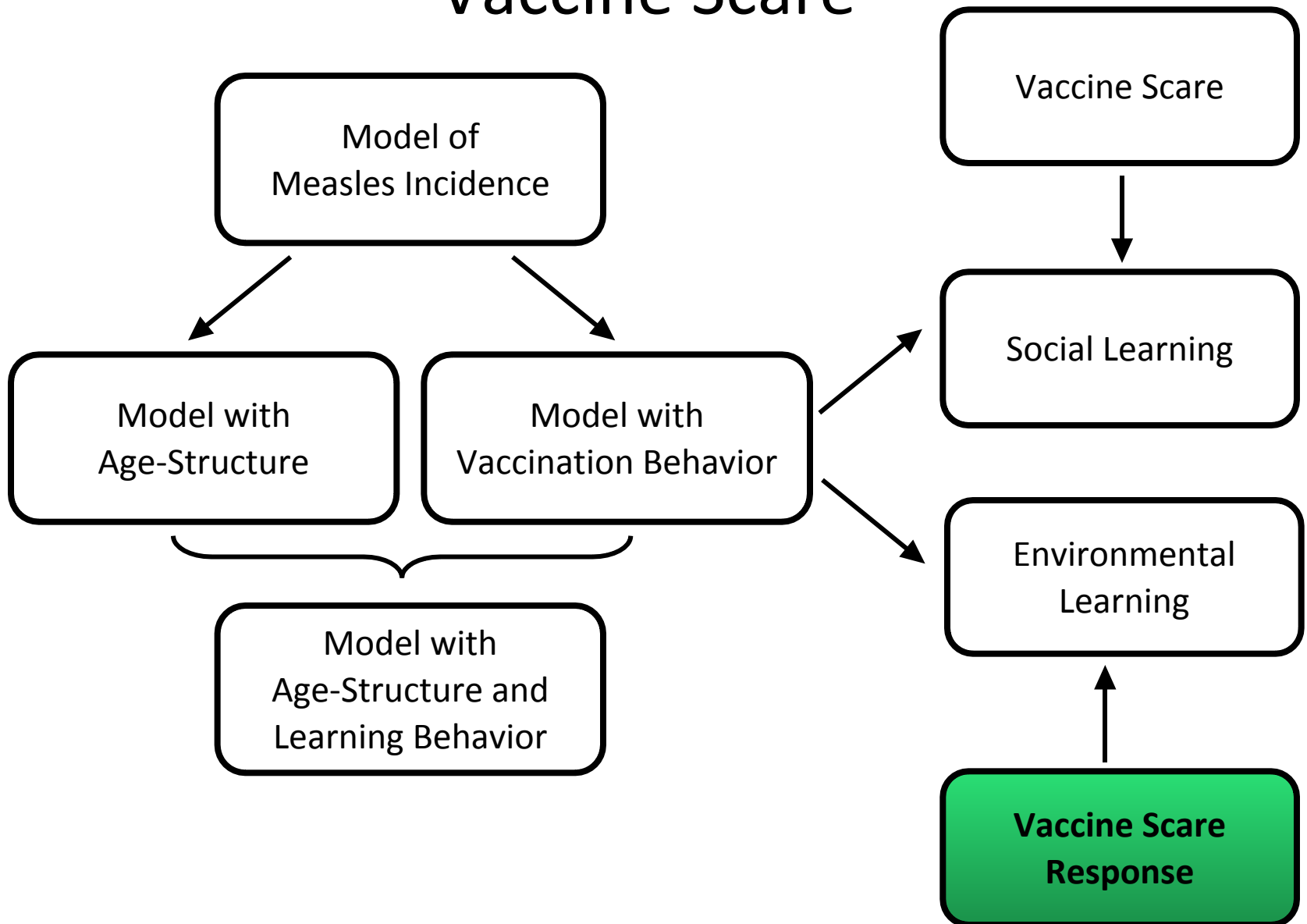


- Individuals are concerned over adverse side effects associated with the vaccine
- Low MMR vaccine uptake levels following the publication of Wakefield et al. 1998

# Modeling a Vaccine Scare



# Modeling a Response to a Vaccine Scare





# Simulating a Vaccine Scare

Risk of vaccination increased  $n$ -fold for a duration of time

- People interact with each other and switch to non-vaccinating strategies due to the increased risk of the vaccine.



→  
increase



# Responding to a Vaccine Scare

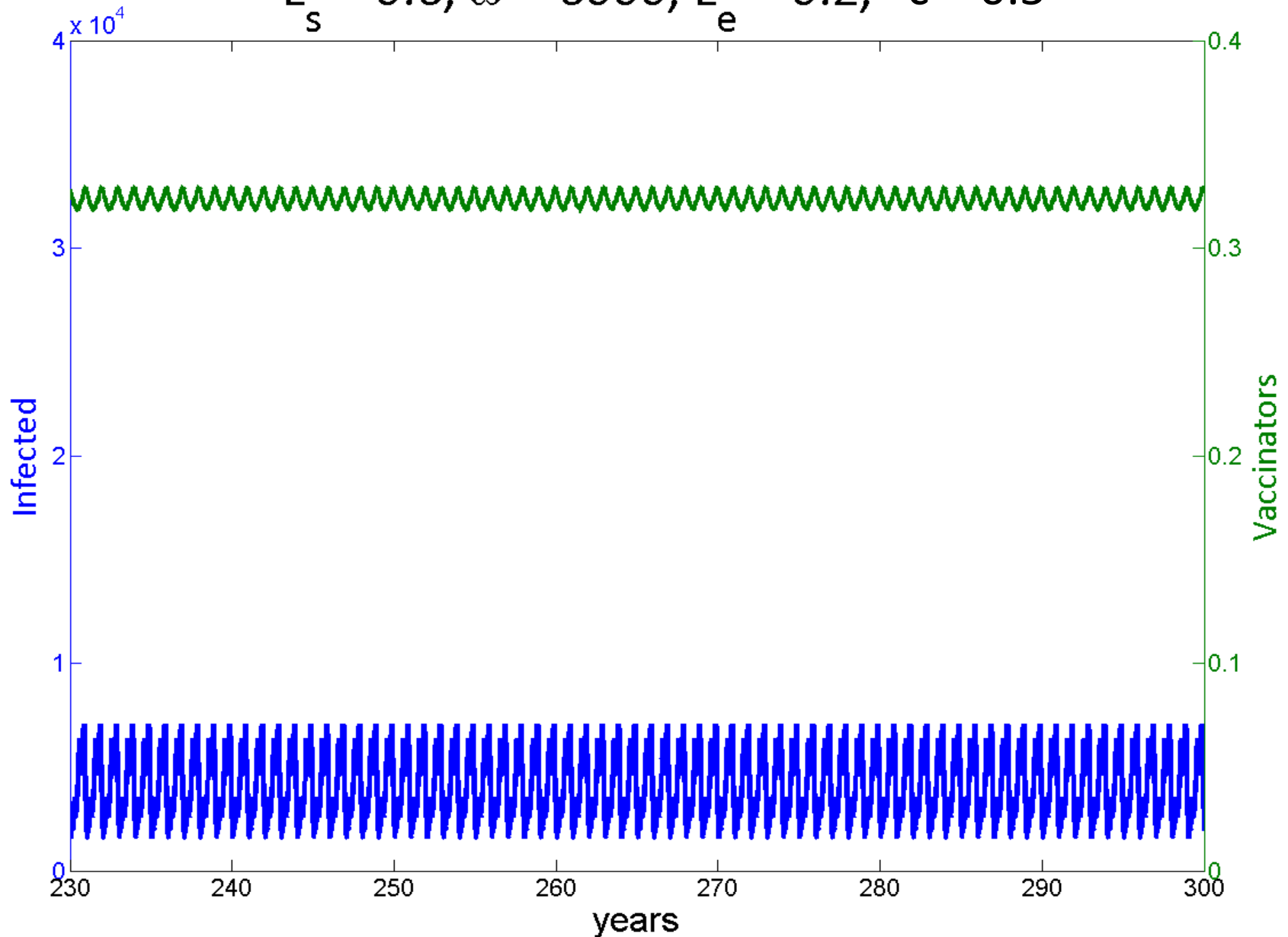
## Counteract with environmental learning

- Public outreach campaigns encourage vaccination and the switching to vaccinating rate increases  $m$ -fold.



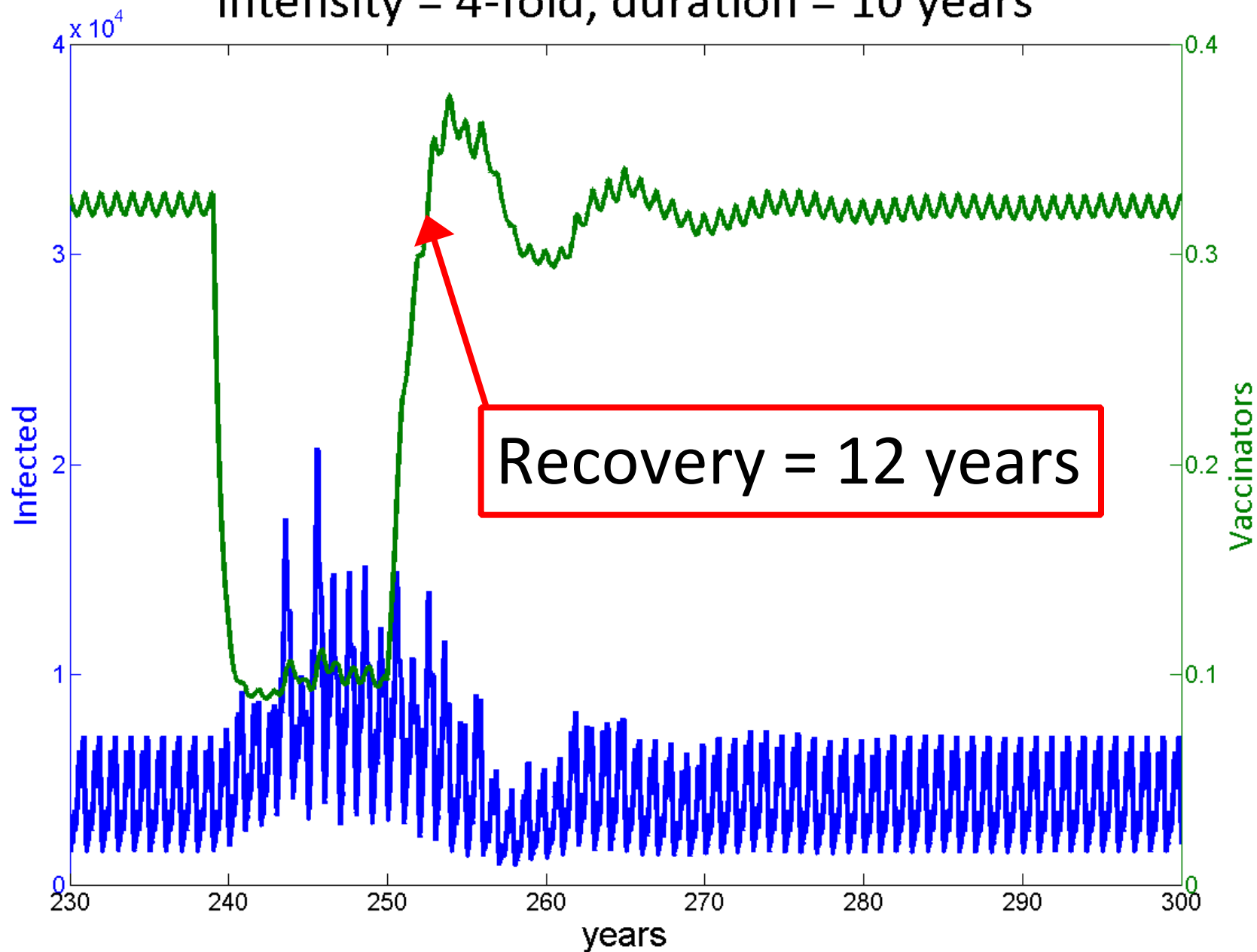
# Before a scare

$$L_s = 0.6, \omega = 6000, L_e = 0.2, c = 0.5$$



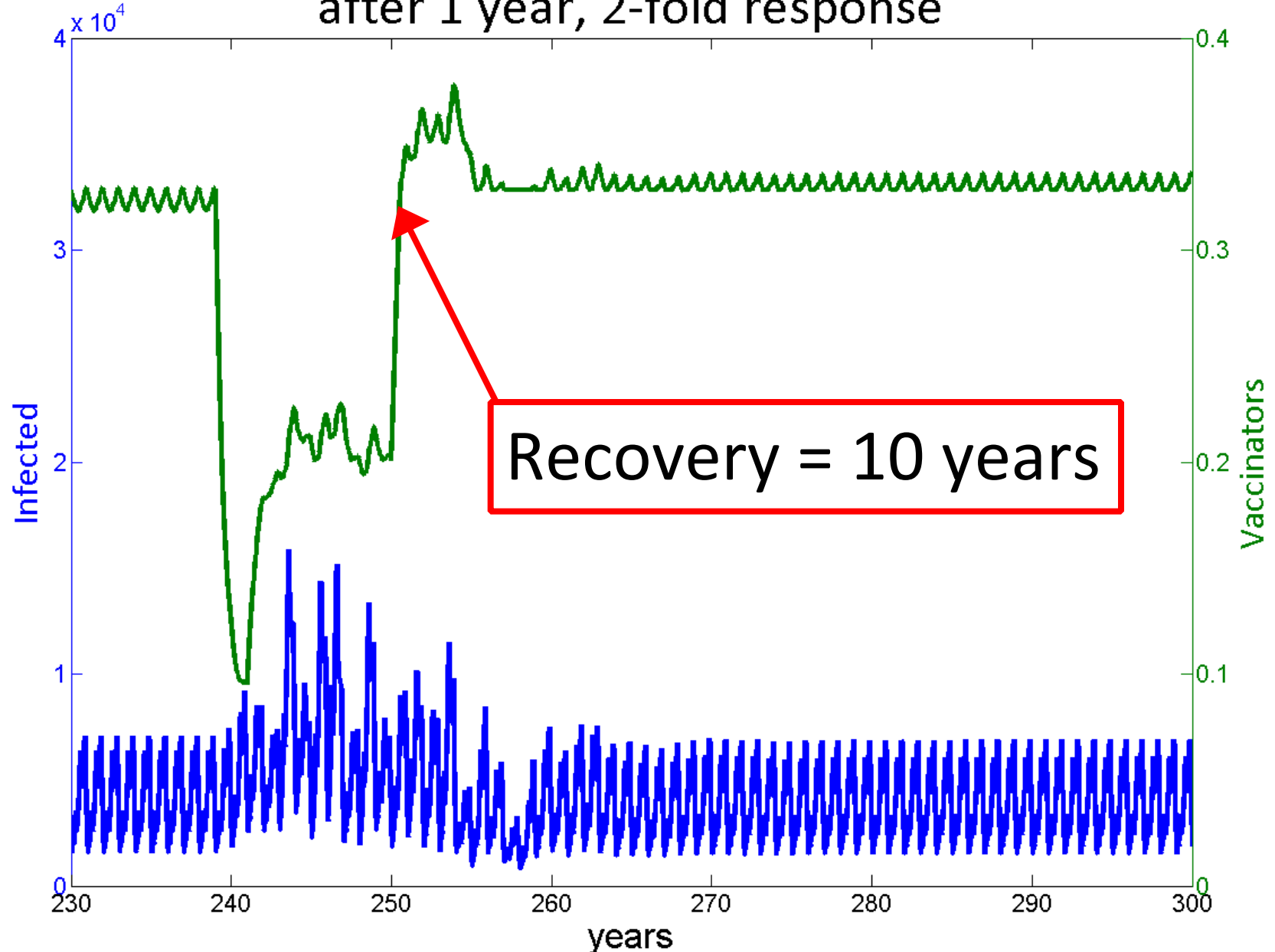
# A Vaccine Scare

intensity = 4-fold, duration = 10 years



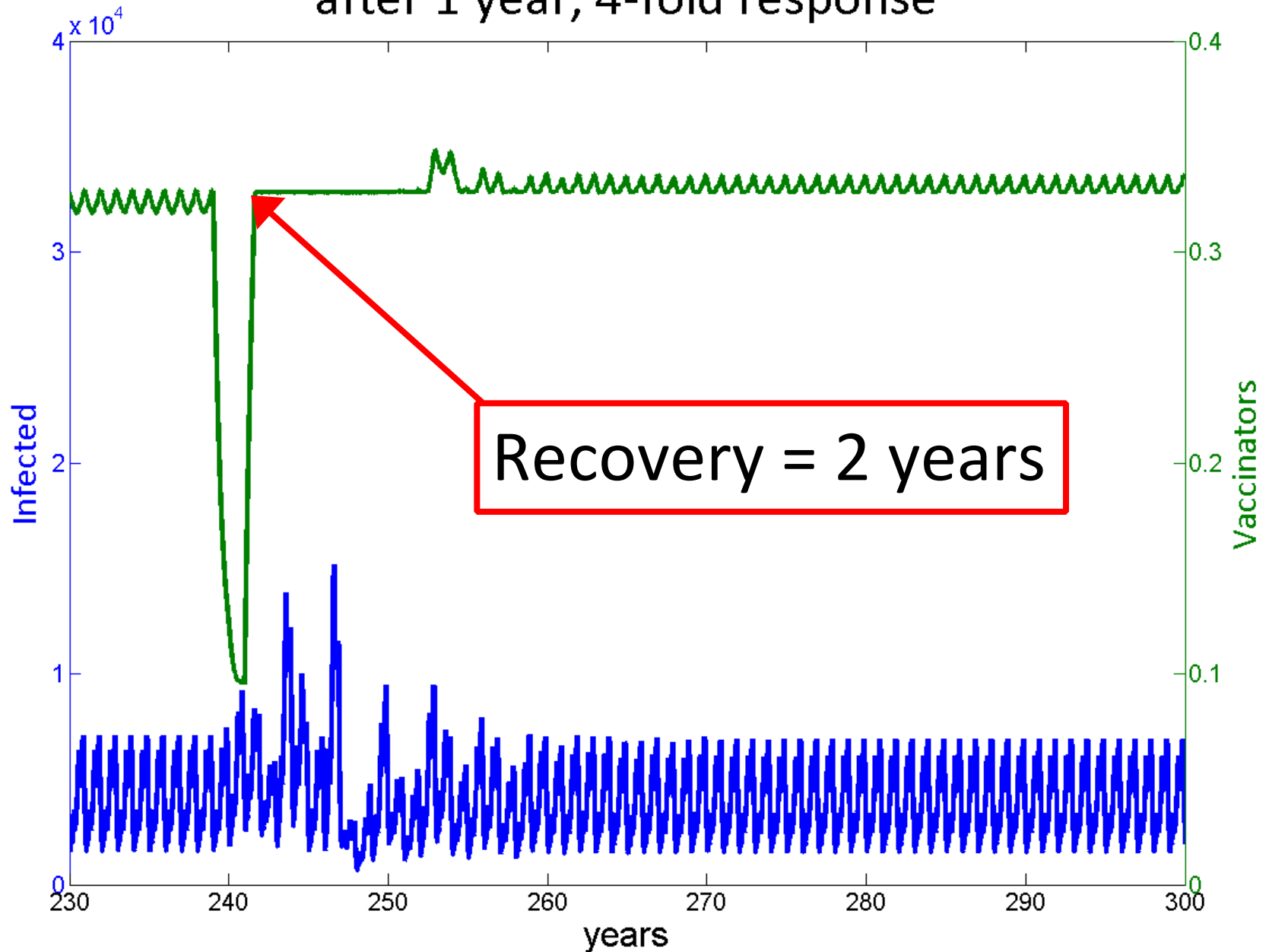
# Responding to a Vaccine Scare

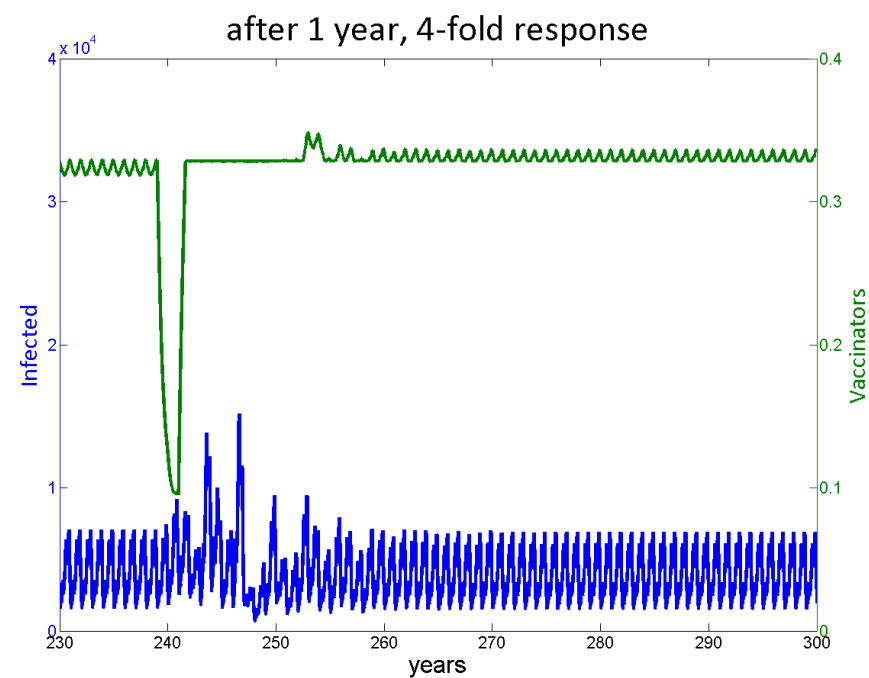
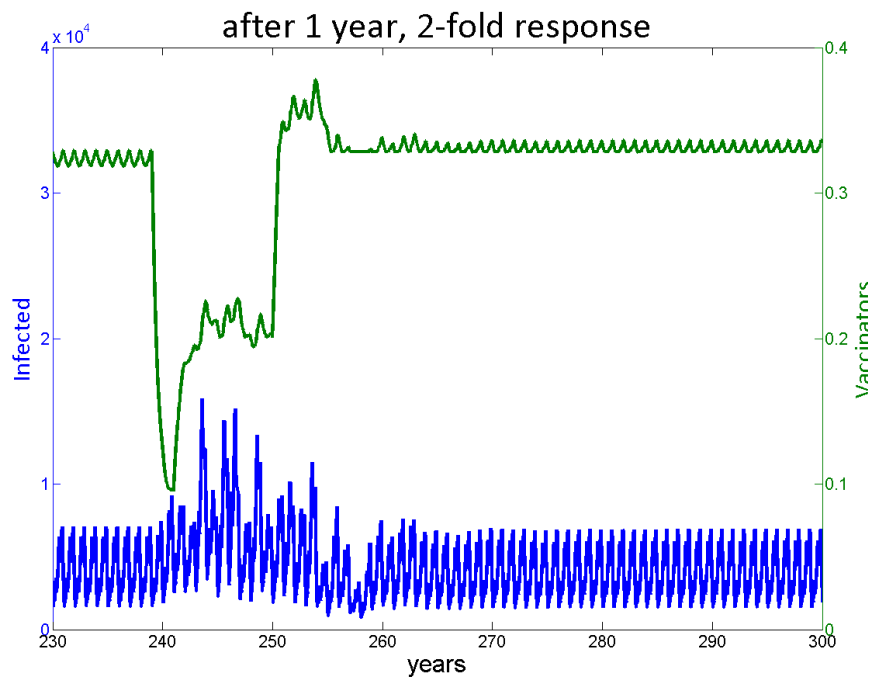
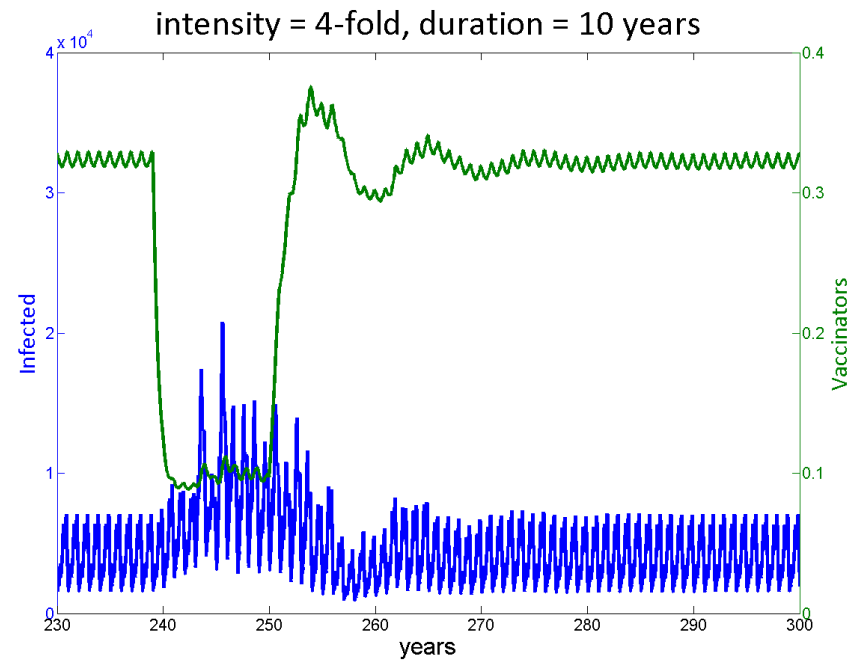
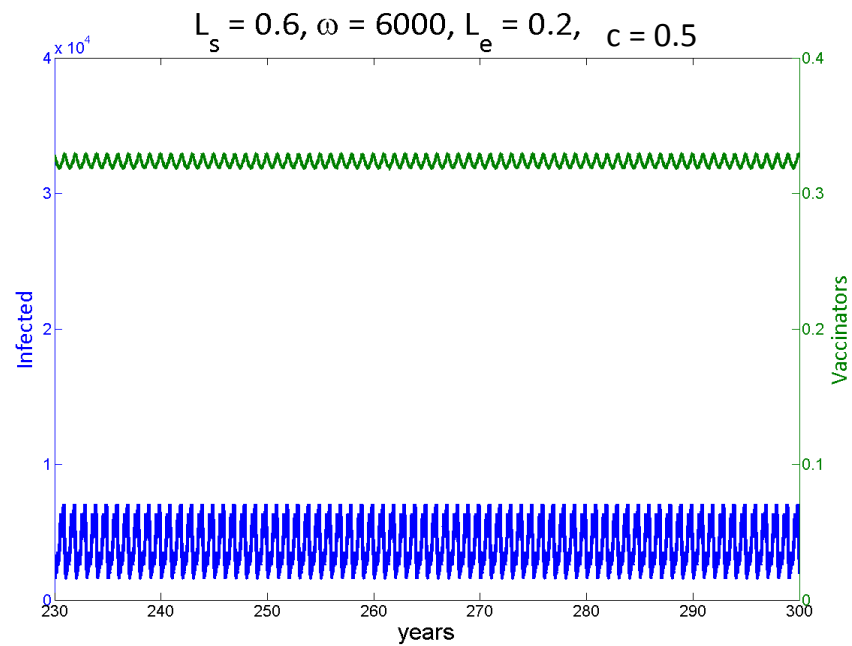
after 1 year, 2-fold response



# Responding to a Vaccine Scare

after 1 year, 4-fold response





# Summary of Vaccine Scares

- Vaccine scares
  - A lag time between vaccination rates dropping and a rise infection → due to age-dependence
  - A quick, strong response can mitigate many of the effects
    - Non-linear increase in response: twice the response causes a recovery that is five times as fast



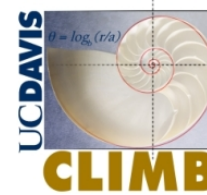
# General Conclusions

- Voluntary vaccination causes oscillations in levels of vaccinators and disease prevalence
- Social learning does not affect the average but does has an effect on epidemic maxima and minima
- Social learning can greatly decrease vaccination levels (such as in a vaccine scare)
- Environmental learning has a strong effect on the level of vaccinators
- Environmental learning can counteract vaccine scares

# Future Research

- Quantitative vs. qualitative results
- Parameter values
- The non-linear relationship between vaccine scare response and recovery
- Catch-up vaccine programs

# Acknowledgements



Collaborative Learning  
at the Interface of  
Mathematics and Biology

- We would like to thank:
  - Rick Grosberg
  - Sebastian Schreiber
  - Carole Hom
  - Richard McElreath
  - Mike Schwemmer
  - Julia Svoboda
  - Chris Bauch
  - NSF (Grant #0531935)

