

Intentional infection as a method of population level disease control

Newborn infection

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 - ▶ In history, the mechanisms and benefits of intentional infection on a population level was not quite understood.
 - ▶ New application to disease control: transmissible vaccines

Method

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$$\begin{aligned}\frac{dS}{dt} &= \mu - \beta SI - \mu S, \\ \frac{dI}{dt} &= \beta SI - \gamma I - \mu I, \\ \frac{dR}{dt} &= \gamma I - \mu R,\end{aligned}\tag{1}$$

where S , I and R represent susceptible, infected and recovered.

- μ is birth/death rate (total population size N is constant)
- β is transmission rate
- γ is recovery rate

Assumptions:

- No difference between intentionally infected and naturally infected individuals.
- No disease induced mortality (in first version of model)
- Latent period (time from infection to becoming infectious) is short enough to be ignored.
- All susceptible individuals are equally likely to be infected, and all infected individuals are equally infectious.

Method

With intentional infection of newborns,

$$\begin{aligned}\frac{dS}{dt} &= \mu(1 - p) - \beta SI - \mu S, \\ \frac{dI}{dt} &= \beta SI + \mu p - \gamma I - \mu I, \\ \frac{dR}{dt} &= \gamma I - \mu R,\end{aligned}\tag{2}$$

where

p = proportion of newborns intentionally infected

Non-dimensionalize the above system by scaling time, by

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Dimensionless system is:

$$\frac{dS}{d\tau} = \epsilon(1 - p) - \mathcal{R}_0 SI - \epsilon S, \quad (4a)$$

$$\frac{dI}{d\tau} = \mathcal{R}_0 SI + \epsilon p - I, \quad (4b)$$

where

$$\epsilon = \frac{\mu}{\gamma + \mu} \quad (\text{infectious period as proportion of lifetime}), \quad (5a)$$

$$\mathcal{R}_0 = \frac{\beta}{\gamma + \mu} \quad (\text{basic reproduction number}). \quad (5b)$$

Equilibria

Solving equations above to find equilibria, we obtain only one solution,

$$\hat{S} = \frac{1}{\mathcal{R}_0} - \frac{2p}{(\mathcal{R}_0 - 1) + \sqrt{(\mathcal{R}_0 - 1)^2 + 4\mathcal{R}_0 p}}, \quad (6a)$$

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- $\hat{I} \neq 0$ for all p between 0 and 1.
- This equilibrium is an **Endemic Equilibrium (EE)**.
- Without intentional infection ($p = 0$) EE reduces to

$$\hat{S} = \frac{1}{\mathcal{R}_0}, \quad \hat{I} = \epsilon\left(1 - \frac{1}{\mathcal{R}_0}\right). \quad (7)$$

Stability of Equilibria

Jacobian Matrix,

$$\mathcal{J} = \begin{bmatrix} -\mathcal{R}_0 I - \epsilon & -\mathcal{R}_0 S \\ \mathcal{R}_0 I & \mathcal{R}_0 S - 1 \end{bmatrix}. \quad (8)$$

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 - ▶ But variolation had lower CFP \implies revise model to include different CFP for intentional infections.
- We need to divide I into two separate infective classes. V for intentionally infected class, I for naturally infected class.

Model with disease induced mortality rate

Therefore, our model becomes,

$$\frac{dS}{d\tau} = \epsilon(1 - p) - \mathcal{R}_0 S(V + I) - \epsilon S, \quad (9a)$$

$$\frac{dV}{d\tau} = \mathcal{R}_0 S V + \epsilon p - V, \quad (9b)$$

$$\frac{dI}{d\tau} = \mathcal{R}_0 S I - I, \quad (9c)$$

$$\frac{dM}{d\tau} = p_V(1 - \epsilon)V + p_I(1 - \epsilon)I, \quad (9d)$$

$$\frac{dR}{d\tau} = (1 - p_V)(1 - \epsilon)V + (1 - p_I)(1 - \epsilon)I - \epsilon R, \quad (9e)$$

where p_V and p_I represent the case fatality proportion (CFP) for intentionally infected and naturally infected cases, respectively.

Equilibria

If $p \neq 0$, the only equilibrium is,

$$\hat{S} = \frac{1}{\mathcal{R}_0} - \frac{2p}{(\mathcal{R}_0 - 1) + \sqrt{(\mathcal{R}_0 - 1)^2 + 4\mathcal{R}_0 p}}, \quad (10a)$$

$$\hat{V} = \frac{\epsilon(\mathcal{R}_0 - 1) + \epsilon\sqrt{(\mathcal{R}_0 - 1)^2 + 4\mathcal{R}_0 p}}{2\mathcal{R}_0}, \quad (10b)$$

$$\hat{I} = 0. \quad (10c)$$

- No naturally infected cases at endemic equilibrium (EE).
 - ▶ Helpful for disease eradication.

Effect of intentional infection on total mortality

Smallpox

Table: Model parameters and smallpox values.

| Symbol | Meaning | Value |
|--------------------|----------------------------|----------|
| $\frac{1}{\mu}$ | Average lifespan | 50 years |
| $\frac{1}{\gamma}$ | Mean infectious period | 22 days |
| \mathcal{R}_0 | Basic reproduction number | 4.5 |
| p_V | Intentionally infected CFP | 0.01 |
| p_I | Naturally infected CFP | 0.3 |

Effect of intentional infection on total mortality

Mortality rate at EE

$$\left. \frac{dM}{d\tau} \right|_{EE} = \frac{p_V(1-\epsilon)\epsilon(\mathcal{R}_0 - 1) + p_V(1-\epsilon)\epsilon\sqrt{(\mathcal{R}_0 - 1)^2 + 4\mathcal{R}_0\rho}}{2\mathcal{R}_0}, \quad (11)$$

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Mortality rate at EE

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- Mortality rate at EE increases as proportion intentionally infected (p) increases.
- In the long run, a larger p will lead to more deaths.

Initial state near equilibrium

In history, intentional infection was introduced when the population was endemic, so near the equilibrium for $p = 0$.

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$$\hat{S} = \frac{1}{\mathcal{R}_0}, \quad (12a)$$

$$\hat{V} = 0, \quad (12b)$$

$$\hat{I} = \epsilon(1 - \frac{1}{\mathcal{R}_0}) \quad (12c)$$

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- What is the time it takes to reach the new EE?
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Initial state near equilibrium

- What is the time it takes to reach the new EE?
 - ▶ Need to define a threshold.
 - ▶ Since the new equilibrium has $\hat{I} = 0$, define reaching equilibrium by $I \leq 10^{-6}$.

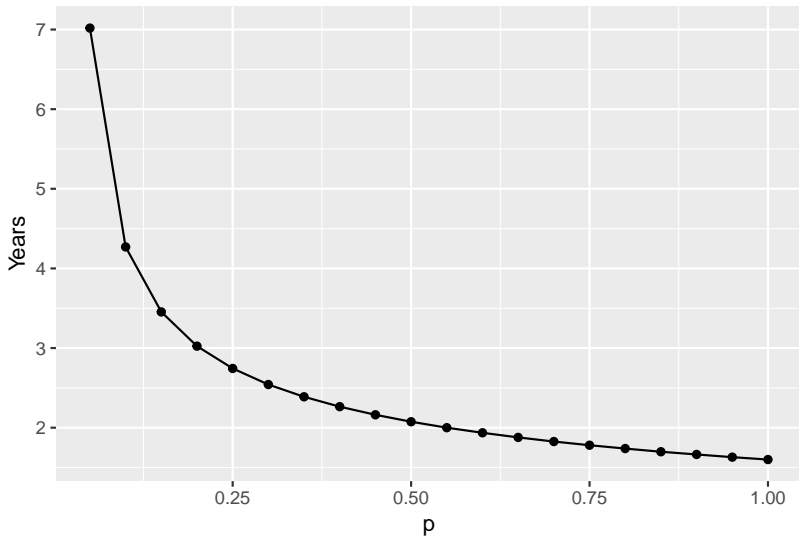


Figure: Determination of time taken to reach equilibrium

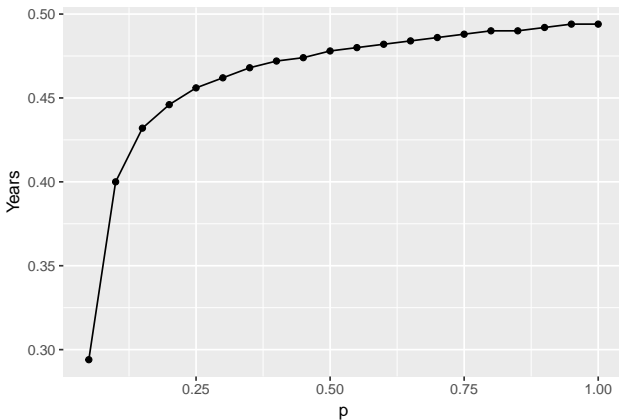


Figure: Time to advantage, as a function of p

With a lower proportion of intentional infection, we can gain advantages relatively faster.

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- For intentionally infected cases, if we stop intentional infection after we reach EE, can they burn out?
 - ▶ Not enough susceptible present in population for disease to effectively transmit.
 - ▶ Size of infected decreases.

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If S remains below this threshold until V goes extinct, then we can achieve complete eradication of this disease.

Possibility of disease eradication

Example: $p = 1$ initially, stop intentional infection after reaching EE,

Increase of S after we stop intentional infection

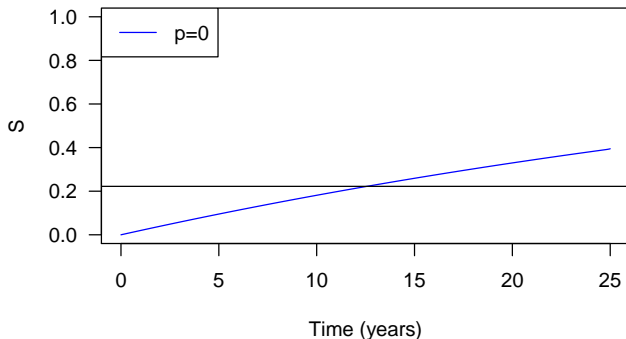


Figure: For more than 10 years after we stop intentional infection, $S < \frac{1}{R_0}$

Possibility of disease eradication

V as a function of time, after we stop intentional infection

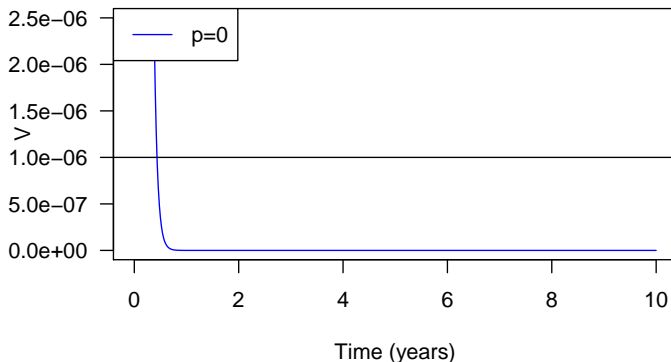


Figure: It takes less than 1 year for V to fall below 1×10^{-6}

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- Other approaches for intentional infection

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Challenges to this method

- Identify susceptible individuals

Conclusion

- Intentional infection has positive effects on population level disease control.
- Further study is required for determining intentional infection strategies to optimize this method.

References

-  Pauline van den Driessche *Reproduction numbers of infectious disease models*, Infectious Disease Modelling, Volume 2, Issue 3, August 2017, Pages 288-303.
-  R.M. Anderson, R.M. May *Infectious diseases of humans: Dynamics and control*, Oxford University Press, Oxford, UK (1991)