SIS models for recurrent infections

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Outline

- Recurrent infections
- ➤ A simple Susceptible—Infected—Susceptible (SIS) model without transmission
 - ► Complete-data likelihood
- Modeling transmission
- Incomplete observations
 - Continuous-time Markov processes with Bayesian data augmentation and reversible jump MCMC
- ► A computer class exercise of an SIS model without transmission and with completely observed data

Background

- Many infections can be considered recurrent, i.e., occurring as an alternating series of presence and absence of infection
 - Nasopharyngeal carriage of Streptococcus pneumoniae

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(Auranen et al.; Cauchemez et al.; Melegaro et al.)
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- Nasopharyngeal carriage of Neisseria meningitidis
- ► multi-resistant *Staphylococcus aureus* (Cooper et al.)
- ► HPV (human papilloma virus) infection
- some parasitic infections (e.g. Nagelkerke et al.)
- Many of the above infections are asymptomatic, which means that observation requires active sampling to record the current epidemiological states of the study subjects
- ► Exact acquisition and clearance times of infection often remain unobserved ⇒ incompletely observed data

A binary Markov process

A simple model for a recurrent infection is the binary Markov process:

- ► The state of the individual alternates between "susceptible" (state 0) and "infected" (state 1)
- For a susceptible individual, the rate of acquiring infection is β:
 - P(acquisition in [t, t+dt[| susceptible at time $t-)\simeq \beta dt$
- lacktriangle For an infected individual, the rate of clearing infection is μ :
 - P(clearance in $[t, t+dt[|infected at time t-) \simeq \mu dt]$



Complete data

- ► For each individual *i*, the complete data include the times of acquisition and clearance during the observation period [0, *T*]:
 - Denote the ordered acquisition times of individual i during]0, T[by $\mathbf{t}^{(i)} = (t_{i1}, \dots, t_{iN_{01}^{(i)}})$
 - Denote the ordered clearance times of individual i during]0, T[by $\mathbf{r}^{(i)} = (r_{i1}, \dots, r_{iN_{10}^{(i)}})$
 - ▶ Denote the ordered sequence of all acquisition and clearance times of individual i as $u_{i1} = 0, u_{i2}, u_{i3}, \dots, u_{i,N^{(i)}} = T$
 - Note: these include times 0 and T, so that the total number of observation times for individual i is $N^{(i)} = N_{01}^{(i)} + N_{10}^{(i)} + 2$

Keeping track who is susceptible

- ▶ The binary ("yes/no") indicators for individual i to be susceptible or infected at time t are denoted by $Y_0^{(i)}(t)$ and $Y_1^{(i)}(t)$, respectively
 - For the simple binary model, $Y_1^{(i)}(t) = 1 Y_0^{(i)}(t)$ for all times $t \ge 0$, i.e. the individual is always either susceptible or infected
 - ▶ Both indicators are taken to be predictable, i.e., their values at time t are determined by their initial values and the complete data observed up to time t – (i.e. time just before t)
 - In practice, this means that the values of $Y_0^{(i)}(t)$ and $Y_1^{(i)}(t)$ can be calculated from the observed data and these indicators can be easily used as shorthand when writing the likelihood function
 - Note also that the indicators $Y_0^{(i)}(t)$ and $Y_1^{(i)}(t)$ are defined such that they denote the state of susceptibility or infection *just before* time t (e.g. for someone who gets infected at time t, the indicator $Y_0^{(i)}(t) = 1$)



Process of acquisitions

- For each individual i, acquisitions (i.e. new infections) occur with rate $\beta Y_0^{(i)}(t)$
 - The rate is β when the individual is in state 0 (susceptible) and 0 when the individual is in state 1 (infected)
- ▶ The probability density of the acquisition events of individual i is

$$\prod_{k=1}^{N^{(i)}} \left[\beta^{1(u_k \text{ is a time of acq.})} e^{-\beta Y_0^{(i)}(u_k)(u_k-u_{k-1})} \right]$$

total time spent susceptible for ind. i

$$\propto \beta^{N_{01}^{(i)}} \times \exp\{-\beta \times \sum_{k=1}^{N_{0}^{(i)}} Y_0^{(i)}(u_k)(u_k - u_{k-1}) \}$$
 (1)

N₀₁⁽ⁱ⁾ is the total number of infections that occur for individual i during the study period



Process of clearances

- For each individual i, clearances of infection occur with rate $\mu Y_1^{(i)}(t)$
 - The rate is μ when the individual is in state 1 (infected) and 0 when then individual is in state 0 (susceptible)
- ▶ The probability density of the clearance events of individual i is

$$\prod_{k=1}^{N^{(i)}} \left[\mu^{1}(u_{k} \text{ is a time of clearance}) e^{-\mu Y_{1}^{(i)}(u_{k})(u_{k}-u_{k-1})} \right]$$

$$= \mu^{N_{10}^{(i)}} \times \exp\{-\mu \times \sum_{k=1}^{N^{(i)}} Y_{1}^{(i)}(u_{k})(u_{k}-u_{k-1})\}$$
(2)

N₁₀⁽ⁱ⁾ is the total number of clearances that occur for individual i during the study period

Complete data likelihood

▶ The contribution to the likelihood function of parameters β and μ , based on the complete data from individual i, is obtained by multiplying the likehood expressions (1) and (2):

$$\underbrace{\frac{f(\mathbf{t}^{(i)}, \mathbf{r}^{(i)}|\beta,\mu)}{L_{i}(\beta,\mu; \mathbf{t}^{(i)}, \mathbf{r}^{(i)})}}_{L_{i}(\beta,\mu; \mathbf{t}^{(i)}, \mathbf{r}^{(i)})} = \beta^{N_{01}^{(i)}} \mu^{N_{10}^{(i)}} \times e^{-\sum_{k=1}^{N_{01}^{(i)}} (\beta Y_{0}^{(i)}(u_{k}) + \mu Y_{1}^{(i)}(u_{k}))(u_{k} - u_{k-1})}_{= \beta^{N_{01}^{(i)}} \mu^{N_{10}^{(i)}} \times \exp\left(-\int_{0}^{T} \{\beta Y_{0}^{(i)}(u) + \mu Y_{1}^{(i)}(u)\} du\right)$$

► The likelihood based on all M individuals is a product over individual likelihood contributions: $\prod_{i=1}^{M} L_i(\beta, \mu; \mathbf{t}^{(i)}, \mathbf{r}^{(i)})$

Modeling transmission

- ► The rate of infection may depend on the presence of infected individuals in the family, day care group, school class etc.
 - ► The statistical unit is then determined by the relevant mixing group
- Let $H_t^{(i,fam)}$ denote the joint infection status of all members in the mixing group (e.g. family) of individual i at time t-
- For a single-type pathogen, the rate of infections can now be modeled as follows:

P(infection for
$$i$$
 in $[t, t + dt]|H_{t-}^{(i,fam)}) \simeq \alpha_{01}^{(i)}(t)Y_0^{(i)}(t)dt \equiv \frac{\beta C^{(i)}(t)}{M_{fam}^{(i)} - 1}Y_0^{(i)}(t)dt$

where $C^{(i)}(t)$ is the number of infected individuals in i's family (of size $M_{fam}^{(i)}$) at time t-; note that $C^{(i)}(t)$ can be calculated from the state-indicator variables of the family members

Complete data likelihood: the general expression

► For *M* individuals followed from time 0 to time *T*, the complete data record all transitions between states 0 and 1:

$$x_{\text{complete}} = \{ T_{sr}^{(ik)}; \ s, r = 0, 1 \ (s \neq r), \ k = 1, \dots, N_{sr}^{(i)}(T), \ i = 1, \dots, M \}$$

► The likelihood of the rate parameters $\theta = (\beta, \gamma)$, based on the complete data, is

$$\underbrace{\widehat{L(\theta; x_{\text{complete}} | \theta)}}_{I(\theta; x_{\text{complete}})} = \prod_{i}^{N} \prod_{r \neq s} \prod_{k}^{N_{sr}^{(i)}(T)} \left[\alpha_{sr}^{(i)}(T_{sr}^{(ik)}) \times \exp\left(-\int_{0}^{T} \alpha_{sr}^{(i)}(u) Y_{s}^{(i)}(u) du\right) \right]$$

Remarks

- ▶ Although the likelihood expressions above were constructed as a product of individual likelihood contributions, they are valid even when the individual processes are dependent on the infection outcomes of *other* individuals (as when modeling transmission)
- ► The likelihood is correctly normalized with respect to any number of events occurring between times 0 and *T*
 - ► This is crucial when performing MCMC computations through data augmentation with an unknown number of events
- ► These results are somewhat non-trivial and require the theory of counting processes (Andersen et al.)

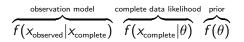
Incomplete observations

- Usually we do not observe complete data (= all infection and clearance times for each study subject)
- ▶ Instead, the status (infection stage) $X_j^{(i)}$ of each individual is observed only at some pre-defined times $t_i^{(i)}$
 - This creates incomplete data: the process is only observed at discrete times (panel data)
 - The observed data likelihood is now a complicated function of the model parameters
- How to estimate the rate parameters of the underlying continuous process from discrete observations?
 - We can apply a similar approach that we already saw in the SIR model with incomplete observations
 - ► This means that the unknown event times are treated as additional model unknowns (data augmentation)
 - Another option would be to discretize the model (see e.g. Melegaro et al.)



- Bayesian data augmentation

 If we retain the continuous-time model formulation, unobserved event times of acquisition and clearance can be taken as additional model unknowns (parameters)
 - Statistical inference is performed on all model unknowns (parameters θ and event times x_{complete}), based on the joint probability model of all model quantities:



- The observed data x_{observed} contain only the current status of infection in each study subject at the predefined observation times
- ▶ The model of the observations model ensures agreement with the observed data; in practice, this part of the model is based on simple indicator functions for the agreement
- A specific computational problem: how to sample from $f(x_{\text{complete}}|x_{\text{observed}},\theta)$?

Sampling algorithm

- ► Initialize the model parameters and the latent processes (i.e. the unobserved event times)
- For each individual, update the unobserved event times
 - Update the current iterates of the event times using standard MH
 - Add/delete episodes of infection and non-infection using reversible jump MH
 - with 0.5 probability propose to add a new episode
 - ▶ with 0.5 probability propose to delete an existing episode
- ▶ Update the model parameters using single-step MH (or when taking Gamma priors for the rate parameters, a Gibbs step can often be applied due to the Poisson-type complete-data likelihood)
- Iterate the above updating steps for a given number of MCMC iterations



Adding/deleting episodes

- ► Choose one interval at random from among the K sampling intervals (see page+2)
- ► Choose to add an episode (delete an existing episode) within the chosen interval with probability $\pi_{\text{add}} = 0.5 \; (\pi_{\text{delete}} = 0.5)$
 - If 'add', choose random event times $\bar{t}_1 < \bar{t}_2$ uniformly from Δ (= the length of the sampling interval). These define the new episode.
 - If 'delete', delete the two event times
- ► The 'add' move is accepted with probability (Metropolis-Hastings acceptance ratio)

$$\min \left(\frac{f(x_{\text{observed}} | x_{\text{complete}}^*) f(x_{\text{complete}}^* | \theta) q(x_{\text{complete}} | x_{\text{complete}}^*)}{f(x_{\text{observed}} | x_{\text{complete}}) f(x_{\text{complete}} | \theta) q(x_{\text{complete}}^* | x_{\text{complete}})}, 1 \right)$$

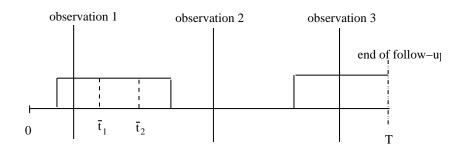
Adding/deleting episodes cont.

The ratio of the proposal densities is

$$\frac{q(x_{\text{complete}}|x_{\text{complete}}^*)}{q(x_{\text{complete}}^*|x_{\text{complete}})} = \frac{\pi_{\text{delete}} \frac{1}{K} \frac{1}{L}}{\pi_{\text{add}} \frac{1}{K} \frac{1}{L} \frac{2}{\Delta^2}} = \frac{\Delta^2}{2}$$

- ► The ratio of the proposal densities in the 'delete' move is the inverse of the expression above
- Technically, the add/delete step relies on so called reversible jump MCMC (see page+2)
- Reversible jump types should be devised to assure irreducibility of the Markov chain
- ► For a more complex example, see e.g. Hoti et al.

Adding/deleting latent processes cont.



The number of sampling intervals K= 4

The number of 'sub-episodes' within the second interval L=2

Reversible jump MCMC

- "When the number of things you don't know is one of the things you don't know"
- For example, under incomplete observation of the previous (Markov) processes, the exact number of events is not observed
- This requires a joint model over 'sub-spaces' of different dimensions
- And a method to do numerical integration (MCMC sampling) in the joint state space

References

- [1] Andersen et al. "Statistical models based on counting processes", Springer, 1993
- [2] Auranen et al. "Transmission of pneumococcal carriage in families a latent Markov process model for binary data. J Am Stat Assoc 2000; 95:1044-1053.
- [3] Melegaro et al. Estimating the transmission parameters of pneumococcal carriage in families. Epidemiol Infect 2004; 132:433-441.
- [4] Cauchemez et al. Streptococcus pneumoniae transmission according to inclusion in cojugate vaccines: Bayesian analysis of a longitudinal follow-up in schools. BMC Infectious Diseases 2006, 6:14.
- [5] Nakelkerke et al. Estimation of parasitic infection dynamics when detectability is imperfect. Stat Med 1990; 9:1211-1219.
- [6] Cooper et al. "An augmented data method for the analysis of nosocomial infection data. Am J Epidemiol 2004; 168:548-557.
- [7] Bladt et al. "Statistical inference for disceretly observed Markov jump processes. J R Statist Soc B 2005;
- 67:395-410.
- [8] Andersen et al. Multi-state models for event history analysis. Stat Meth Med Res 2002; 11:91-115.
- [9] Hoti et al. Outbreaks of Streptococcus pneumoniae carriage in day care cohorts in Finland implications to elimination of carriage. BMC Infectious Diseases, 2009 (in press)
- [10] Green P. Reversible jump Markov chain Monte Carlo computation and Bayesianmodel determination. Biometrika 1995; 82:711-732.