The Importance of being Uncertain:

quantification of uncertainty in epidemic prediction

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Background

Mathematical modelling is common place in the study of epidemic diseases. Although it has been shown that such approaches can be used to make qualitative statements about the effect of control strategies on the likely outcome of an epidemic, their main weakness is in a lack of rigorously estimated parameters. This poster outlines a Bayesian methodology for making inference on parameters from data in order to make simulation models more quantitatively predictive.

- Covariates are obtained on a farm-level basis during peacetime. This allows us to study the relationships between farms in space, and commerce.
- Epidemic data is taken from the field during a disease outbreak. For each farm, we have a pair of detection and notification times, together with any contact tracing data that might be available.

Why uncertainty?

Quantitative risk predictions for epidemics require simulations driven by **formally** estimated parameters.

Threshold theorem: (homogeneous large population)

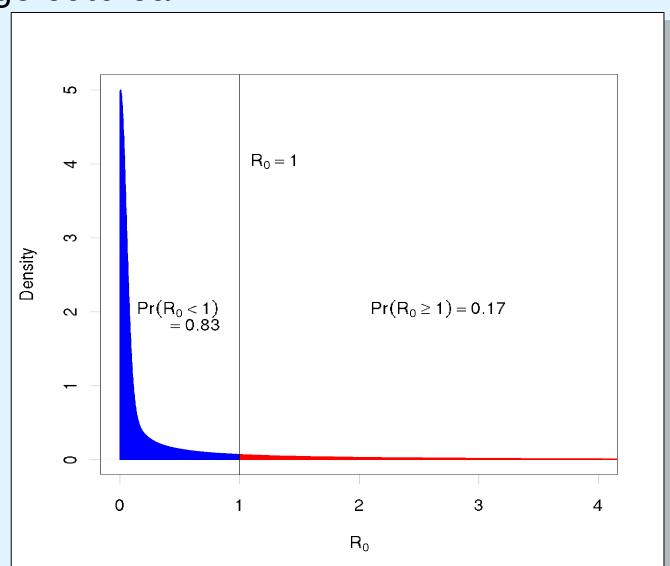
If $R_0 < 1$ — epidemic dies out with probability 1

If $R_0 \ge 1$ — epidemic able to take hold and dies out with probability less than 1

Example:

R_o is estimated to be 0.999

- If a point value is used, we predict that the epidemic will not take off.
- Introducing uncertainty allows R_o to exceed 1 with some probability, increasing the chance of a large outbreak



Introducing uncertainty into R_o – the density plot shows that R_o has a significant probability of being greater than 1

What is uncertainty?

Uncertainty is a reflection of confidence in a parameter taking a particular value.

The amount of uncertainty depends on the amount of data available – sample size.

Frequentist: A parameter takes a point estimate, the mean, with a standard error (Normal assumption)

Bayesian: Represents a parameter as a probability distribution.

Parameter

Inference

Parameter

Estimates

(with uncertainty)

Simulation

Prediction

(with uncertainty)

Expert

Opinion

Data

Obtained by talking to

industry experts, analysing

data from previous epidemics

in the same or other species.

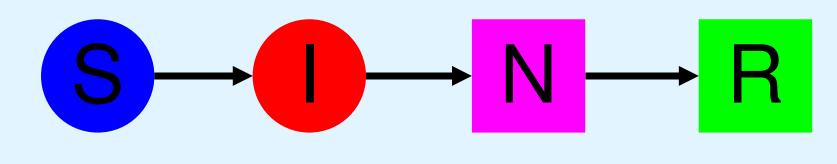
Incorporated as Bayesian

prior information

The Approach

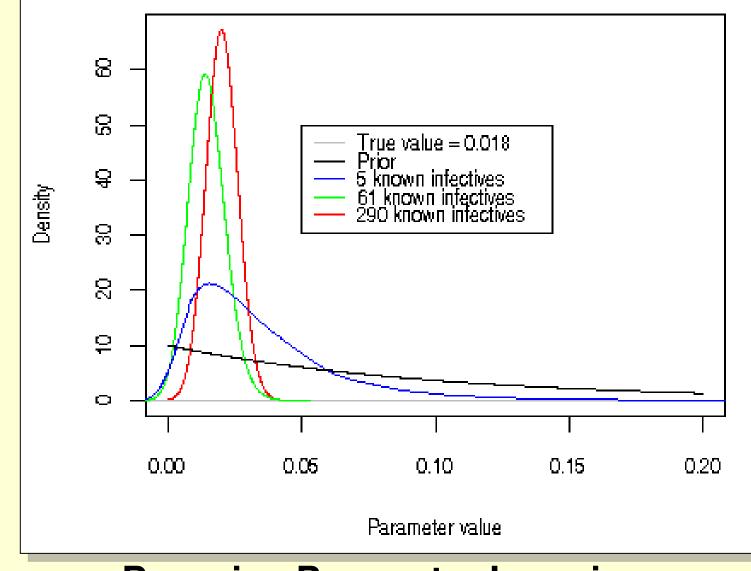
AIM: To use field data from an epidemic to capture in *real time* the values of parameters in a *specified epidemic model*. These are then used to simulate from *the same model* to provide a *quantitative* risk-prediction at any point during an epidemic.

- Fully Bayesian approach
- The epidemic is modelled at the *individual* (eg farm) level
- SINR model:
 - Individuals can be *susceptible*, *infected*, *detected*, and *removed*



Reversible Jump Markov Chain Monte Carlo

- Continuous time inhomogeneous Poisson process for infection and notifications
- Posterior distributions of the parameters of interest are obtained
- Missing data:
 - Unobserved infection times
 - > Presence of undetected infections in the population.
 - Posterior distributions of the parameters of interest are obtained
 - At the start of the epidemic, there is little field data and the posterior estimates are highly influenced by the *prior* information
 - As the epidemic progresses, we *learn* from field data which *updates* the prior information to give *posterior* estimates of the parameters



Bayesian Parameter Learning

- Stochastic simulations are then used to *predict* the future course of the epidemic:
 - > Same model as parameter inference
 - ➤ Many simulations are used, with parameters drawn from the posterior distributions
 - This naturally incorporates the *uncertainty* in the parameter estimates

Quantities such as:

- Probabilities of individuals becoming infected (right)
- Individual specific R the danger that an individual would pose to the population if it were infected
- The presence and spatial location of undetected infections
- Who started the epidemic?
- Quantification of uncertainty on the above

From a simulated Avian Influenza outbreak in UK poultry: *probability of farms becoming infected* at day 10 given the current epidemic: without uncertainty (left), with uncertainty (right)

References

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