# Part 5 — Percolation approaches to disease spread

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 SIR and percolation

SIS disease

References

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#### Percolation

We are going to explore a relationship between SIR disease and percolation.

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This will lead to methods to

- predict epidemic probability from a single infection.
- predict final size of an epidemic.
- predict the dynamics of an epidemic.

#### Recall SIR behavior



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- Warning no longer assuming continuous time



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#### Percolation in different size networks

Comparison of largest (red) and second largest (blue) components in different size networks below and above percolation threshold.



- Below threshold largest and second largest in a network are about the same size as each other and similar size in both networks
- Above threshold largest is proportional to network size.

### More detailed comparison of network size



- Above the threshold, an epidemic occurs if the initial node is in the giant component.
- The entire component containing the index is infected.
- ► For a large network with given p, the giant component's size is remarkably consistent. So the probability of an epidemic equals the proportion infected.





#### 





Ν	$\mathcal{P}$	$\mathcal{A}$
100	0.237	0.423
400	0.340	0.387
1600	0.339	0.350
6400	0.365	0.366
25600	0.368	0.368

Now return back to transmitting with rate  $\beta$  and recovering with rate  $\gamma.$ 

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- Transmission is at rate β, and recovery is at rate γ. The probability of transmitting before recovering is β/(β + γ).
- Note: v transmitting to u and to w are correlated events (both depend on duration of v's infection), but transmissions from different nodes to a single node are independent.

Given a network G, I want to simulate the spread of an SIR disease with given  $\beta$  and  $\gamma$ 

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  - Once the duration is chosen, Tom decides which neighbors it will transmit to and how long it will take.
  - Then he reports those to me when I ask.
- Is it possible for me to know whether he is calculating in advance or not?





Every number that Tom gives me is a random number that is generated independently of every other number. It doesn't matter when he generates it.

#### Typical structure



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### Directed Percolation Equivalence

The following processes produce indistinguishable output:

Standard epidemic simulation:
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  - ▶ Take a network G.
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Percolation-based simulation:

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  - ▶ Take a network G.
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- Percolation-based simulation:
  - ► Take a network G.

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  - ► Take a network G.
  - Generate a new directed network *H*:

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    - For each individual u, assign a duration d of infection.
    - For each edge from u, determine delay  $\hat{t}$  until transmitting.
    - ► If t̂ < d, place directed edge into network with associated time.</p>

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    - For each edge from u, determine delay  $\hat{t}$  until transmitting.
    - If  $\hat{t} < d$ , place directed edge into network with associated time.
  - Choose an initial infected individual.
  - ► Trace the disease spread following edges in *H*, transmitting after the given time.

### Comments on directed percolation

- Directed percolation can be used more generally when there are other sources of heterogeneity in infectiousness and/or susceptibility.
- The eventually infected nodes are exactly those nodes in the out-component of the index case.
- The probability a random node is infected follows from the size of its in-component.



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- If the index case is in H<sub>IN</sub> or H<sub>SCC</sub> then all of H<sub>SCC</sub> and H<sub>OUT</sub> are eventually infected.
- ► So Epidemic Probability  $\mathcal{P} = \mathbb{E}(|H_{IN} \cup H_{SCC}|)/N$  and Attack rate  $\mathcal{A} = \mathbb{E}(|H_{SCC} \cup H_{OUT}|)/N$ .

The dynamic process of the epidemic is now encoded in a static network H. Studying H gives us some insight into what is happening.

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- ▶ Because edges <u>out</u> of a node are correlated and edges <u>in</u> to a node are not, P ≠ A.
- The probability of an epidemic is the proportion of nodes from which there is a long chain of transmissions in *H*.
- The final size of an epidemic with a very small initial proportion infected is the proportion of nodes which are the target of a long chain of transmissions in *H*.

# SIR epidemics in Configuration Model networks

- Consider a Configuration Model network in which we infect a (probably small) fraction of the population ρ.
- Allow the SIR disease to spread.
- We assume ρN is large enough that stochastic die-out does not play a major role.

# Recall our key questions

For SIR:

- $\mathcal{P}$ , the probability of an epidemic.
- ► A, the "attack rate": the fraction infected if an epidemic happens (better named the attack ratio).
- ►  $\mathcal{R}_0$ , the average number of infections caused by those infected early in the epidemic.

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I(t), the time course of the epidemic.

For SIS:

- ► P
- $I(\infty)$ , the equilibrium level of infection
- ► *R*<sub>0</sub>
- ► I(t)

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   (k − 1)<sup>β</sup>/<sub>β+γ</sub> [it cannot reinfect the source of its infection].
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$$= \frac{\beta}{\beta+\gamma} \frac{\langle K^{2} - K \rangle}{\langle K \rangle}$$

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- ►  $\mathcal{R}_0$ , the average number of infections caused by those infected early in the epidemic.
- I(t), the time course of the epidemic.

For SIS:

- $\blacktriangleright \mathcal{P}$
- $I(\infty)$ , the equilibrium level of infection
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# Changing the final size question

Instead of asking what proportion end up susceptible or recovered ask:

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Instead of asking what proportion end up susceptible or recovered ask:

What is the probability a random node does not have a transmission path to it from one of the index nodes?



 $\Theta = P(v \text{ did not transmit to } u)$ 



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Probability a random degree k test individual is susceptible at the end is

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$$(1-\rho)\Theta^k$$



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$$\frac{S}{N} = \sum_{k} P(k)(1-\rho)\Theta^{k} = (1-\rho)\psi(\Theta)$$

where

$$\psi(x) = \sum_{k} P(k) x^{k}$$

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# Finding $\Theta$



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Probability a random degree k partner never infected is

$$(1-
ho)\Theta^{k-1}$$

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Probability a random degree k partner never infected is

$$\phi_{S} = \sum_{k} P_{n}(k)(1-\rho)\Theta^{k-1}$$

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Probability a random degree k partner never infected is

$$\phi_{S} = \sum_{k} \frac{kP(k)}{\langle K \rangle} (1-\rho) \Theta^{k-1}$$
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Probability a random degree k partner never infected is

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Given  $\beta$  and  $\gamma$ , partner does not transmit to u with probability

$$\Theta = \phi_{\mathcal{S}} + \left(1 - \frac{\beta}{\beta + \gamma}\right) (1 - \phi_{\mathcal{S}})$$

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Given  $\beta$  and  $\gamma$ , partner does not transmit to u with probability

$$\Theta = \phi_{S} + \left(1 - \frac{\beta}{\beta + \gamma}\right) (1 - \phi_{S}) = 1 - \frac{\beta}{\beta + \gamma} + \frac{\beta}{\beta + \gamma} \frac{(1 - \rho)\psi'(\Theta)}{\langle K \rangle}$$

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## **Final Size**

$$\mathcal{A} = 1 - (1 - \rho)\psi(\Theta)$$

where

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A more rigorous definition would be that  $\Theta$  is the probability that the given edge isn't the final edge of a directed path from an index node to u in the percolated network H.

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I(t), the time course of the epidemic.

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Probability a random degree k test individual still susceptible is

$$(1-
ho) heta(t)^k$$



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Probability a random degree k test individual still susceptible is

$$\frac{S(t)}{N} = \sum_{k} P(k)(1-\rho)\theta(t)^{k}$$



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Probability a random degree k test individual still susceptible is

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$$\bullet \ \theta = \phi_{S} + \phi_{I} + \phi_{R}.$$
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- $\bullet \ \theta = \phi_{S} + \phi_{I} + \phi_{R}.$
- $\bullet \ \dot{\theta} = -\beta \phi_I.$
- Our goal is to find  $\phi_I$  in terms of  $\theta$ .

# Finding $\phi_R(t)$



Because derivatives are proportional,  $\phi_R = \frac{\gamma}{\beta}(1-\theta)$ 

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# Finding $\phi_S(t)$



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Probability a random degree k partner still susceptible is

$$(1-
ho) heta(t)^{k-1}$$

# Finding $\phi_{S}(t)$



Probability a random  $\frac{\text{degree } k}{\text{degree } k}$  partner still susceptible is

$$\phi_{\mathcal{S}}(t) = \sum_{k} P_n(k)(1-\rho)\theta(t)^{k-1}$$

# Finding $\phi_S(t)$



Probability a random  $\frac{\text{degree } k}{\text{degree } k}$  partner still susceptible is

$$\phi_{\mathcal{S}}(t) = \sum_{k} \frac{k P(k)}{\langle K \rangle} (1 - \rho) \theta(t)^{k-1}$$

# Finding $\phi_{S}(t)$



Probability a random  $\frac{\text{degree } k}{\text{degree } k}$  partner still susceptible is

$$\phi_{\mathcal{S}}(t) = \sum_{k} rac{k P(k)}{\langle K 
angle} (1-
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ho) rac{\psi'( heta)}{\langle K 
angle}$$



We have

$$\phi_I = \theta - \phi_S - \phi_R$$

$$\dot{\theta} = -\beta \phi_I$$

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We have

$$egin{aligned} \phi_I &= heta - \phi_S - \phi_R = heta - rac{(1-
ho)\psi'( heta)}{\langle K 
angle} - rac{\gamma}{eta}(1- heta) \ \dot{ heta} &= -eta \phi_I \end{aligned}$$

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We have

$$\phi_{I} = \theta - \phi_{S} - \phi_{R} = \theta - \frac{(1 - \rho)\psi'(\theta)}{\langle K \rangle} - \frac{\gamma}{\beta}(1 - \theta)$$
$$\dot{\theta} = -\beta\phi_{I} = -\beta\theta + \beta\frac{(1 - \rho)\psi'(\theta)}{\langle K \rangle} + \gamma(1 - \theta)$$

### **Final System**

We finally have

$$\dot{\theta} = -\beta\theta + \beta \frac{(1-\rho)\psi'(\theta)}{\langle K \rangle} + \gamma(1-\theta)$$
$$\dot{R} = \gamma I \qquad S = (1-\rho)N\psi(\theta) \qquad I = N - S - R$$

Compare with

$$\begin{split} \dot{\theta} &= -\beta\theta + \beta\theta^2 \frac{(1-\rho)\psi'(\theta)}{\langle K \rangle} - \theta\gamma \ln\theta \\ \dot{R} &= \gamma I, \qquad S = (1-\rho)N\psi(\theta), \qquad I = N - S - R \end{split}$$

More details in [1, 2, 3]



### A good exercise

Repeat this derivation for a model in which infections last for one time step and transmission occurs with probability p.

# Epidemic probability

To calculate epidemic probability, we consider a single introduced node, randomly chosen in the population.

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▶ *ρ* = 0.

# Epidemic probability

- To calculate epidemic probability, we consider a single introduced node, randomly chosen in the population.
- ▶ ρ = 0.
- ψ(x) = ∑<sub>k</sub> P(k)x<sup>k</sup> is the probability generating function for the degree distribution.



 $\Omega(D) = P(u \text{ does not transmit to a neighbor}|D) + P(u \text{ transmits, but neighbor doesn't lead to an epidemic})$ 



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#### Probability a random degree k index case whose infection duration is D does not start an epidemic is

 $\Omega(D)^k$ 

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 $\Omega(D) = P(u \text{ does not transmit to a neighbor}|D) + P(u \text{ transmits, but neighbor doesn't lead to an epidemic})$ 

Probability a random degree k index case whose infection duration is D does not start an epidemic is

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$$\sum_{k} P(k) \Omega(D)^{k}$$



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$$1-\mathcal{P} = \int_0^\infty \gamma e^{-\gamma D} \sum_k P(k) \Omega(D)^k \, \mathrm{d}D = \int_0^\infty \gamma e^{-\gamma D} \psi(\Omega(D)) \, \mathrm{d}D$$

where

$$\psi(x) = \sum_{k} P(k) x^{k}$$

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# Finding $\boldsymbol{\Omega}$



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# Finding $\Omega$



Probability a random partner of the index case having degree  $\hat{k}$  whose infection duration is  $\hat{D}$  does not start an epidemic is

$$[1 - p(D)] + p(D)\Omega(\hat{D})^{\hat{k}-1}$$

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$$\Omega(D) = [1 - p(D)] + p(D) \int_0^\infty \gamma e^{-\gamma \hat{D}} \frac{\psi'(\Omega(\hat{D}))}{\langle K \rangle} \, \mathrm{d}\hat{D}$$

 $p(D) = 1 - e^{-\beta D}$  is the probability of transmitting given infection duration of D

## Calculating epidemic probability

We arrive at

$$\begin{split} 1 - \mathcal{P} &= \int_0^\infty \gamma e^{-\gamma D} \psi(\Omega(D)) \, \mathrm{d}D \\ \Omega(D) &= e^{-\beta D} + \left(1 - e^{-\beta D}\right) \int_0^\infty \gamma e^{-\gamma \hat{D}} \frac{\psi'(\Omega(\hat{D}))}{\langle K \rangle} \, \mathrm{d}\hat{D} \end{split}$$

In general we can only solve this numerically, but it is straightforward. We start with a guess that  $\Omega(D) = 1$ , plug it in and iterate.

In fact the nth iteration will give the probability that the disease spreads at least n generations.

SIR and percolation

SIS disease

References

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It is very difficult to write down an analytic model of SIS disease in networks that accounts for partnership duration.

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- This has policy implications: how much will it reduce MRSA transmission if we clear the disease from a hospital or a prison?
- So for SIS disease simulation is likely to play a major role.

#### Percolation-like results and SIS

 It is possible to use percolation-like results to for rigorous conclusions about SIS disease.

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- It is possible to use percolation-like results to for rigorous conclusions about SIS disease.
- As a general rule, these rigorous results do not generalize if we do not assume constant infection and transmission rates.





► Find transmission events as Poisson process



- Find transmission events as Poisson process
- Find recovery events as Poisson process



- Find transmission events as Poisson process
- Find recovery events as Poisson process
- Trace out from initial infection

## Now invert the picture



## Now invert the picture



## Now invert the picture



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An infection of u at time 0 leads to an infection of v at time t iff there is a path that doesn't go through a recovery event.

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- That reversed path also works. So any node infected at time t would cause infection of the initial node at time t in the reversed process.

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- So the expected number of nodes infected at time t starting from infection of u at time 0 is equal to the probability u is infected at time t if we infect a random individual at time 0.

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- That reversed path also works. So any node infected at time t would cause infection of the initial node at time t in the reversed process.
- So the expected number of nodes infected at time t starting from infection of u at time 0 is equal to the probability u is infected at time t if we infect a random individual at time 0.
- The equilibrium size of an SIS epidemic with Poissonian transmission and recovery equals the probability that an epidemic occurs.

1000 simulations starting with a single randomly chosen node in a Configuration model network with P(1) = P(5) = 0.5.

#### SIS size vs Probability

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SIR and percolation

SIS disease

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