

About me









– Merton College



Which diseases do we have vaccines for?





All about measles







ILLUSTRATION BY ALISSA ECKERT/CDC (NATIONAL GEOGRAPHIC)

What about flu?



So why do we have to get a new flu jab every year?

The influenza A virus is not like measles – its immunogenic regions are **NOT highly conserved**

Instead they are subject to a lot of variation, leading to new strains that can evade acquired host immunity

What we see with flu is different strains dominating in the population year on year in an unpredictable way

Classical theories can't explain this!

Can we build a mathematical model that can reproduce this behaviour?



The multi-locus model

- For a given antigen, there are k different immunogenic regions or *loci*
- Each locus *i* can display one of a choice of n_i different *alleles* or *variants*
- Any given combination of alleles defines a *strain*
- How many strains in total....? $N = n_1 n_2 \cdots n_k$

eg $k = 2, n_1 = n_2 = 2, N = 4$

Locus 1 Locus 2 Variant 1 a b y

4 strains: ax, bx, ay, by

How does transmission work?

every strain

ay and bx

Everyone starts off totally susceptible to

If you are infected with strain ax, you are

and become immune to that strain

infectious for some time, and then recover

If you have been infected with strain ax, you

not only gain immunity to ax but also some

partial 'cross protective' immunity to strains

We're going to build a differential equation model to understand how the different strains evolve in the population





And our parameters: β : transmission coefficient γ : strength of cross-protective response $1/\mu$: life expectancy $1/\sigma$: infectious period

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contact occurs between someone infectious with ax and someone not immune to ax...

$$\frac{d}{dt}z_{ax} = \beta y_{ax}(1-z_{ax}) - \mu z_{ax}$$

...and that contact leads to a transmission



 Z_{ay}

 Z_{hv}





Reminder of notation:

 y_{ax} - proportion of population currently infectious with strain ax z_{ax} - proportion of population (completely) immune to strain ax w_{ax} - proportion of population with SOME (full or partial) immunity to strain ax

 β : transmission coefficient γ : strength of cross-protective response $1/\mu$: life expectancy

 $1/\sigma$: infectious period

contact and transmission occurs between someone infectious with ax, ay or bx and someone not already partially immune to ax

 $\frac{d}{dt}w_{ax} = \sum_{pq\sim ax} \beta y_{pq}^{\dagger} (1 - w_{ax}) - \mu w_{ax}$

summing over any strains sharing alleles with ax (i.e. pq=ax, ay or bx)







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So our model is:

For $i \in \{a, b\}$ and $j \in \{x, y\}$ $\frac{d}{dt}z_{ij} = \beta y_{ij}(1-z_{ij}) - \mu z_{ij}$ $\frac{d}{dt}w_{ij} = \sum_{\alpha} \beta y_{pq} (1 - w_{ij}) - \mu w_{ij}$ $\frac{d}{dt}y_{ij} = \beta y_{ij} \left[\left(1 - w_{ij} \right) + \left(1 - \gamma \right) \left(w_{ij} - z_{ij} \right) \right] - \sigma y_{ij}$



Disease specific parameters (known)





It's not very nice to solve analytically – so we'll get a computer to do it for us 🙂

What we have to put in:

- The number of different loci and variants
- The system of differential equations we just wrote down
- Our choice of epidemiological parameters (β , μ , σ)
- Our choice of γ
- Some initial conditions
- Some other computational information eg how long do we want to run the simulation for



What we get out:

 Time series for each of our variables (information on how each of them changes over the whole period of time we've considered



Low cross protective response



If $\gamma = 0$, there is no partial immunity

- → you can only gain any immunity to strain ax by being infected with ax
- → Being infected with ax doesn't give you any immunity to anything else
- ightarrow No competition between strains

Same if γ is 'small enough' (what does this mean? We'll come back to that...) → Strains aren't competing with each other → They can all coexist happily! ☺

'No Strain Structure' (NSS)



High cross protective response

If $\gamma = 1$, there is total cross-protection

- → Being infected by strain ax gives you total immunity not only to ax, but also to ay and bx
- → Being infected with ax doesn't give you any immunity to by because they don't share any alleles
- → Strains segregate into 'discordant sets' that don't share any alleles (ax-by, and ay-bx)
- ightarrow These sets compete with each other

Same if γ is 'large enough' (again, we'll come back to that...)

- \rightarrow Discordant sets are competing with each other
- ightarrow They can't all coexist $\ensuremath{\mathfrak{S}}$
- ightarrow One set dominates, the other goes extinct

'Discrete Strain Structure' (DSS)





Medium cross protective response

What if γ is somewhere in between?

- → Being infected by strain ax gives you total immunity to ax, and some partial immunity to ay and bx
- → We observe **chaotic behaviour** in which individual strains sequentially dominate over the others
- → Immunological interference between strains means they cannot coexist and instead continually replace one another in an unpredictable sequence

'Chaotic Strain Structure' (CSS)

This is exactly what we observe with flu!!!





Single Strain Dominance (SSD)





Very cool, but why is it important?



When designing a vaccine, you want to target regions that are strongly immunogenic, but have low variability – and this kind of modelling could help us find them!









Biotechnology and Biological Sciences Research Council