

A combined statistical-dynamical approach to modelling spatio-temporal variations of malaria risk



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Malaria in Malawi

✈ Malaria leading cause of morbidity/mortality (>6 million episodes per year), >85% *Plasmodium falciparum*.

✈ Direct costs: treatment. Indirect costs: workdays lost agriculture/industry, absenteeism school.

✈ RBM Objective: under 5 and pregnant women access to personal and community protective measures.

✈ National Malaria Control Programme established in 2002 to coordinate control measures.

- Insecticide-treated mosquito nets (ITNS)
- Effective case management (diagnosis and treatment of illness within 24 hours)
- Access to intermittent preventive treatment (IPT) for pregnant women.



Malaria transmission

 CLIMATE

 Temperature

 Precipitation

 Humidity



Mosquito biology and
breeding sites

 NON-CLIMATE

 Urbanisation

 Poverty

 Level of education



Human vulnerability and
vector habitat



Malawi tourism



CDC



National Geographic



UNICEF

Research Questions

 To what extent can variations in malaria be account for by climate?

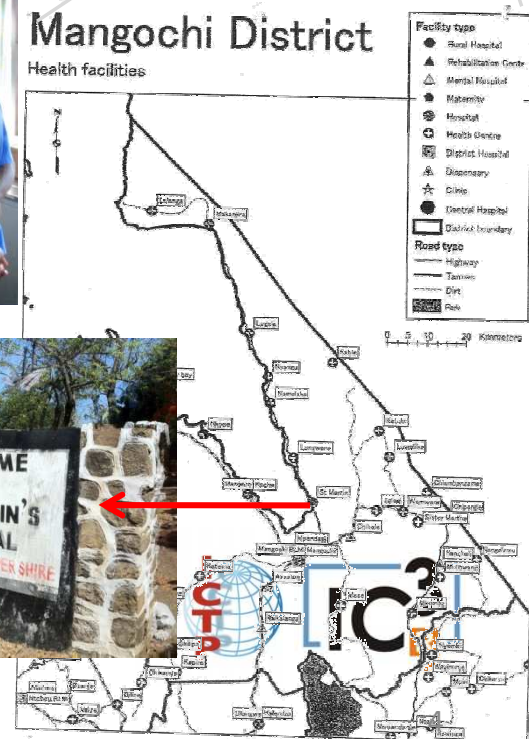
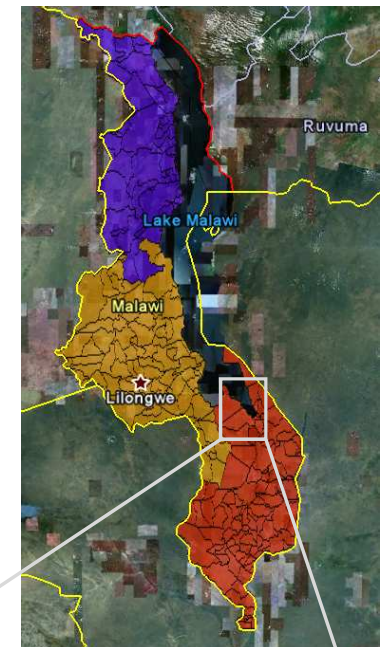
 Which non-climatic factors are important?

 Does inclusion of non-linear relationships between climate and the vector, captured by the dynamical model equations, improve model predictions in space and time?

 How can malaria early warnings be effectively disseminated to decision makers?

Malaria Risk

-  Low
-  Medium
-  High



Malaria, demographic and socio-economic data

 Counts of malaria cases for under 5 and 5 years and over July 2004 – June 2011 (84 months).

 Annual population and density estimates.

 Number of health facilities per 1000 population.

 Yearly estimates of ITN distribution for each district by different agencies: UNICEF, PMI

 Proportion of population in district

–Urban areas

–One room for sleeping

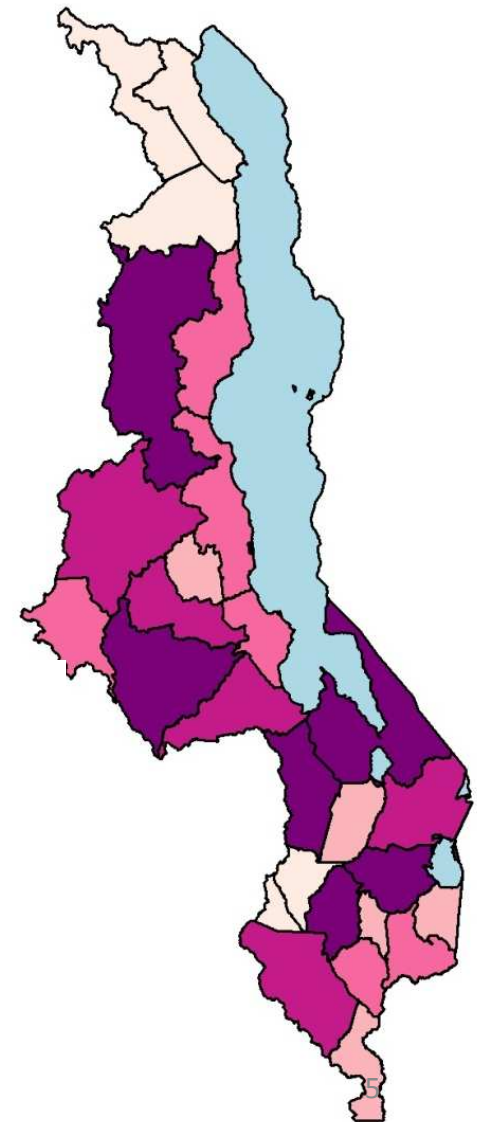
–No toilet

–Living in traditional housing

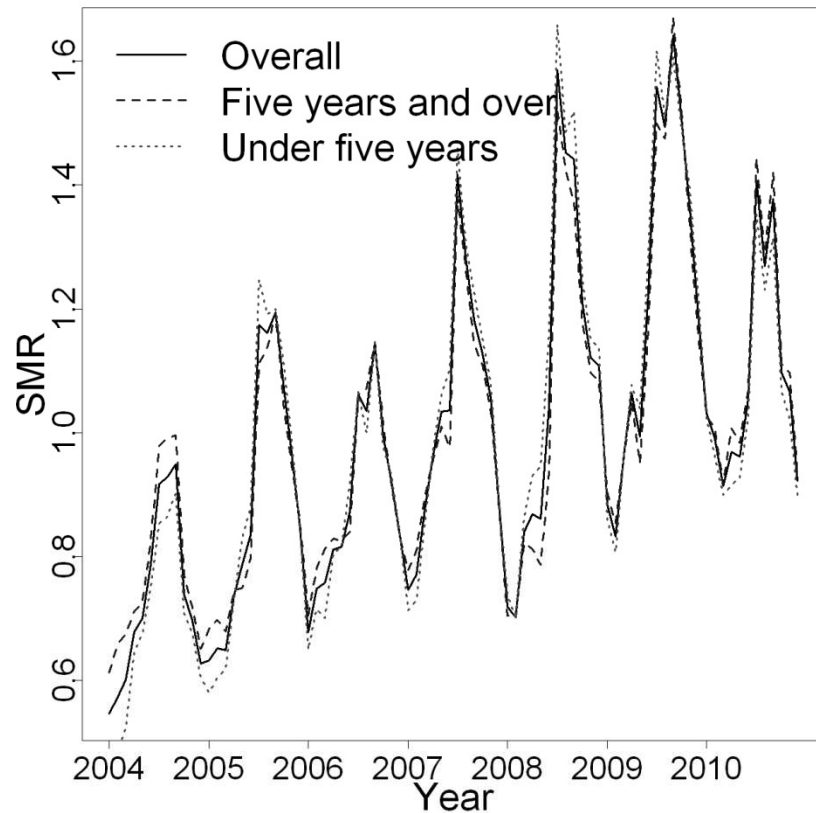
–Literate

–Do not attend school

Cases (1000)



Standardised Morbidity Ratio (SMR)



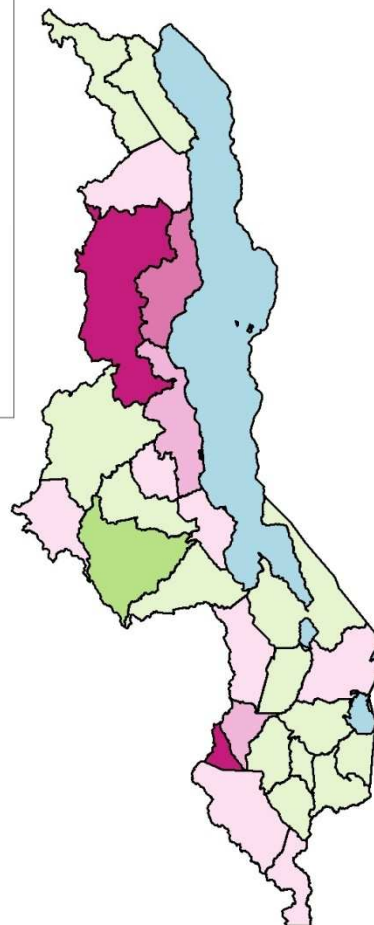
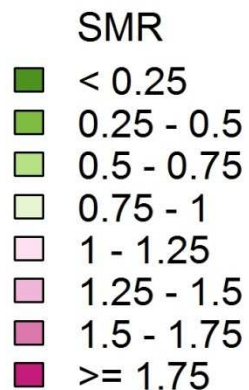
 SMR ratio of observed to expected cases

 Excess risk when $SMR > 1$

$$SMR_{st} = \frac{y_{st}}{e_{st}},$$

$$e_{st} = p_{st} \pi,$$

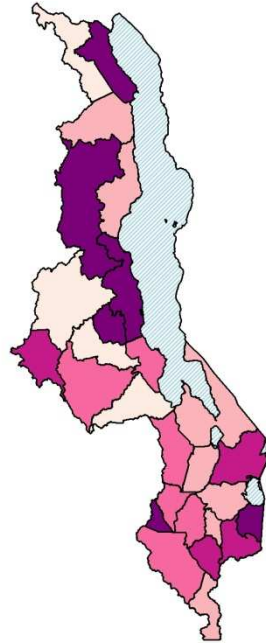
$$\pi = \frac{\sum y_{st}}{\sum p_{st}}.$$



Poverty indicators

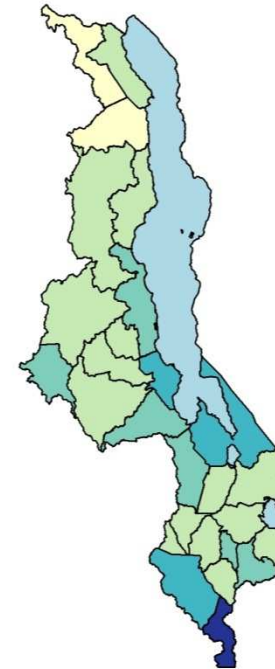
ITN

- < 66
- 66 - 78
- 78 - 91
- 91 - 102
- >= 102



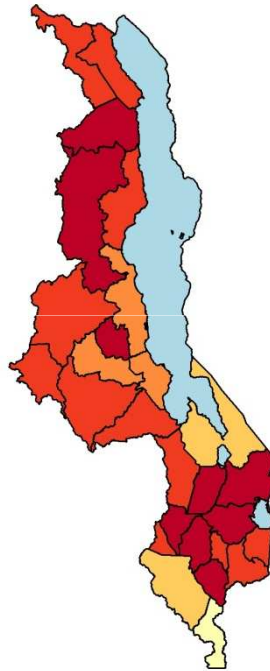
% no school

- < 10
- 10 - 20
- 20 - 30
- 30 - 40
- 40 - 50
- >= 50



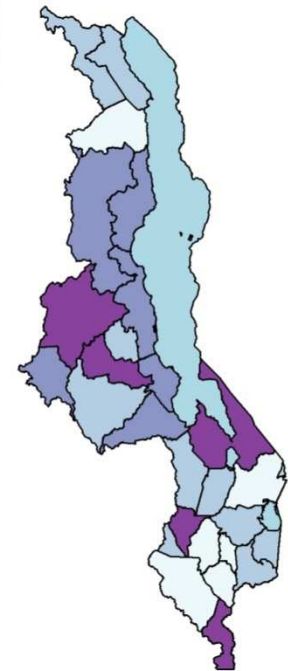
% literate

- < 65
- 65 - 70
- 70 - 75
- 75 - 80
- >= 80



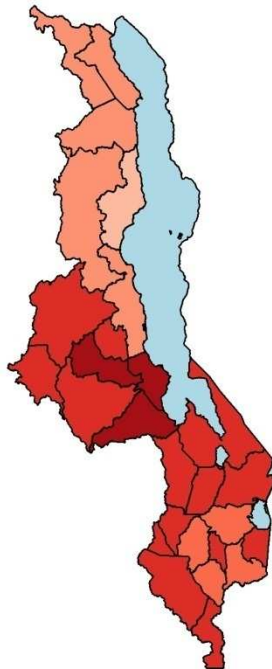
% trad house

- < 10
- 10 - 20
- 20 - 30
- >= 30



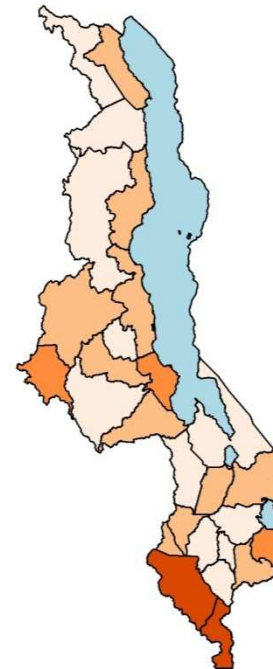
% one room

- < 10
- 10 - 20
- 20 - 30
- 30 - 40
- 40 - 50
- >= 50



% no toilet

- < 10
- 10 - 20
- 20 - 30
- >= 30

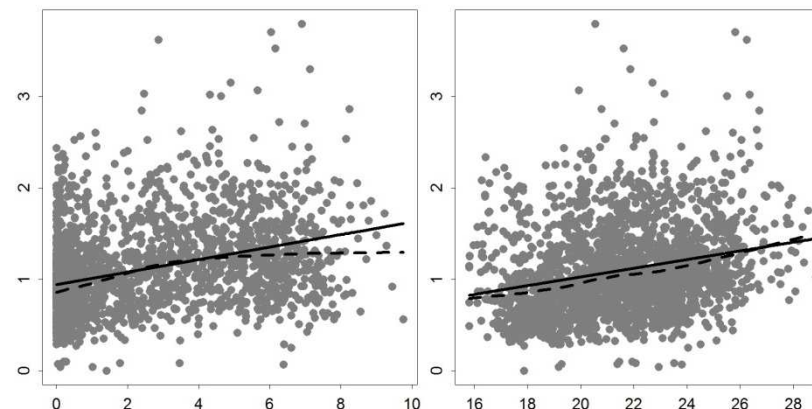


Climate information

 CPC FEWS-Net rainfall estimates based on satellite and rain gauge data

 ERA-Interim Reanalysis temperature data

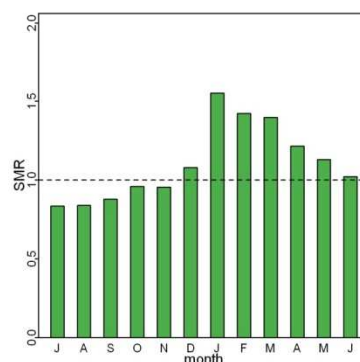
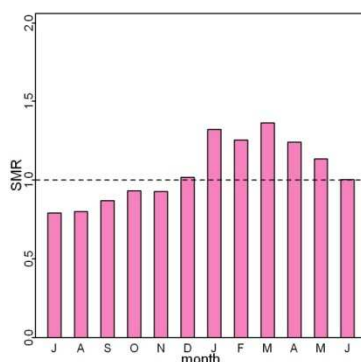
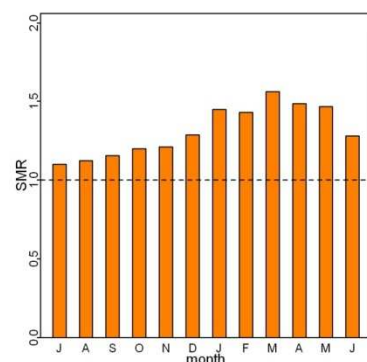
log(SMR)



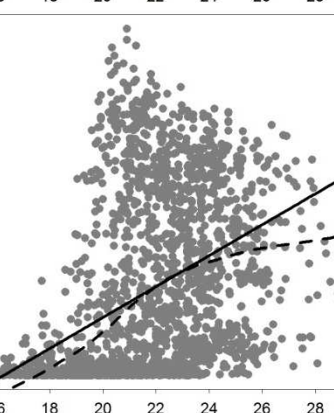
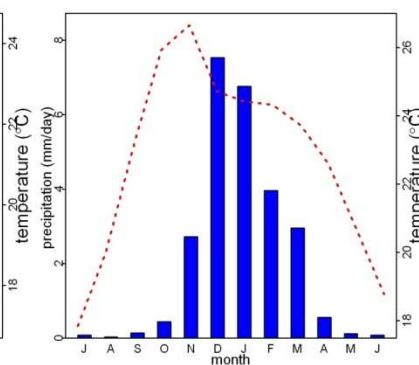
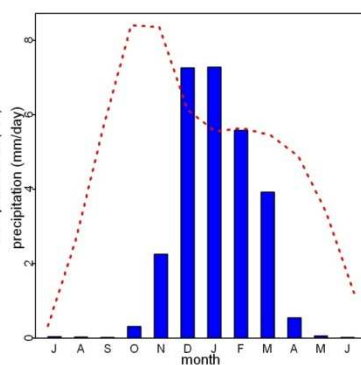
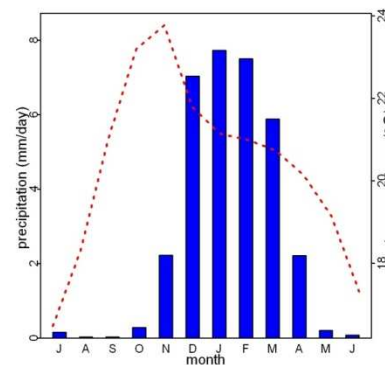
North

Central

South



MEAN
PRECIPITATION
(3 MONTHS BEFORE)

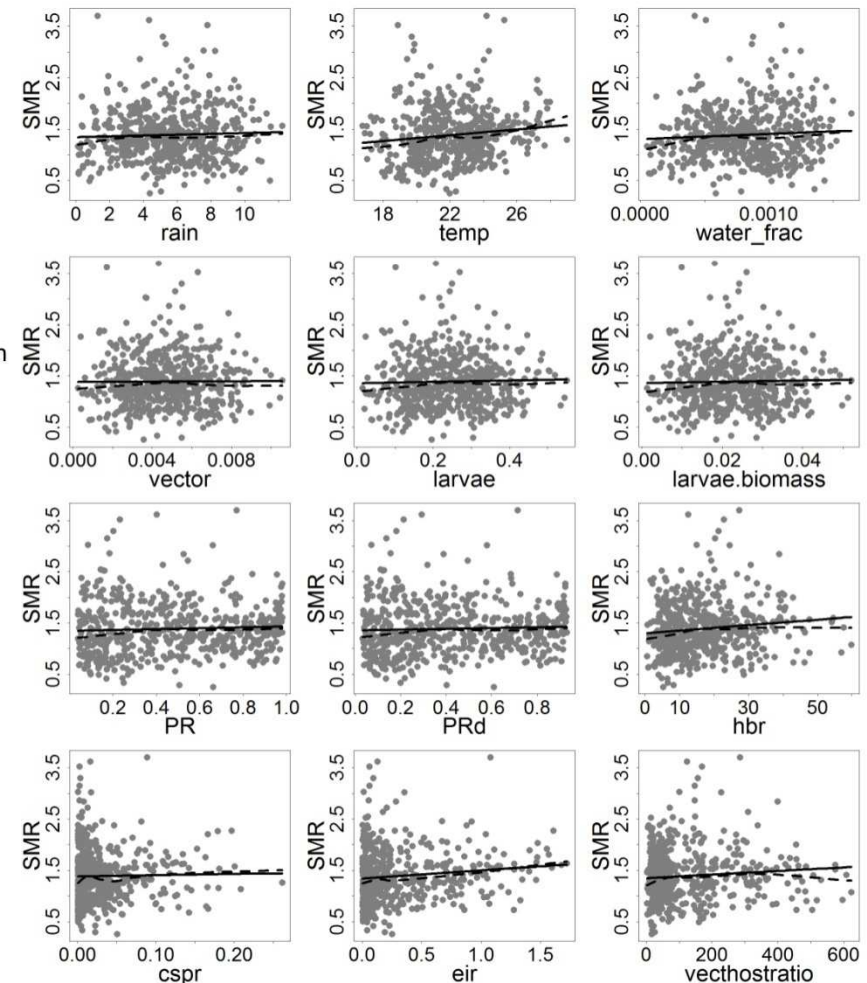
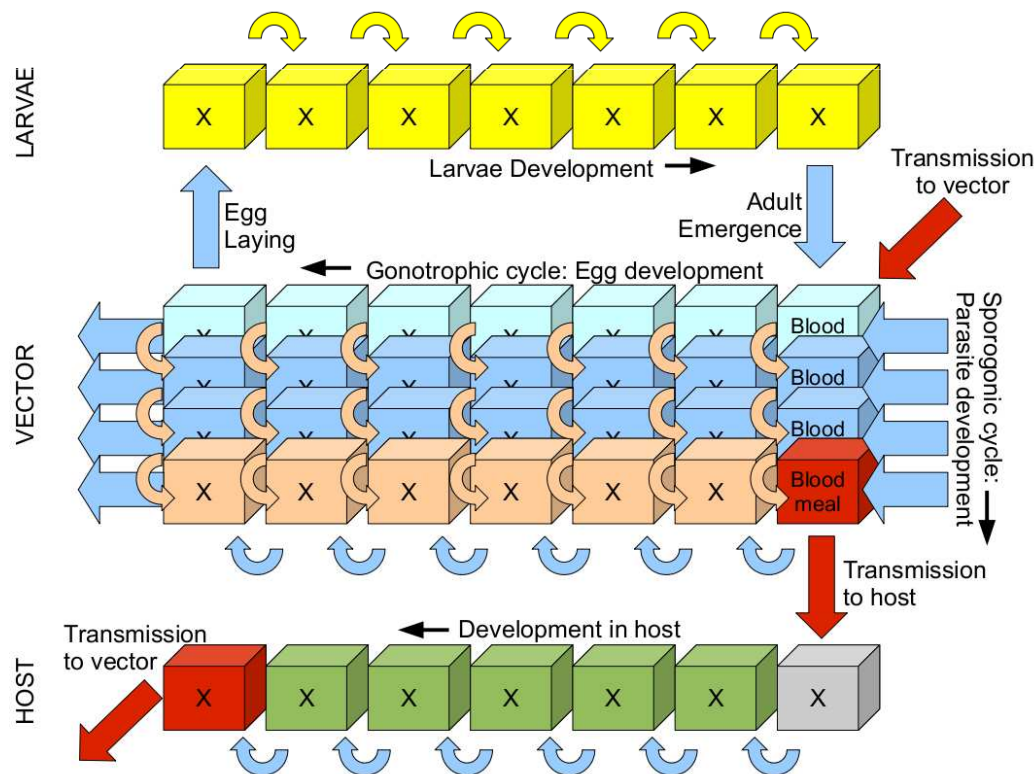


MEAN
TEMPERATURE
(3 MONTHS BEFORE)



How does climate impact malaria?

- ✈️ VECTRI: VECToR-borne disease community model of ICTP.
- ✈️ Incorporation of VECTRI output into model framework. Does this better represent climate influence on *Anopheles* mosquitoes than raw climate data?
- ✈️ Model output: water fraction, vector-host ratio, larvae, human bite rate, parasite ratio, Entomological Inoculation Rate,...



Model framework

 Negative Binomial Generalised linear model framework used to test and select spatial, temporal variables, factors, interactions and polynomial terms.

$$y_{stj} \sim \text{NegBin}(\mu_{stj}, \kappa)$$

$$\log \mu_{stj} = \log e_{stj} + \log \rho_{stj}$$

 Stepwise model selection using Akaike Information Criterion (AIC).

 **Categorical variables:** age group (under and over 5), region (north, central, south), zone (lowland, lake shore, highland and combinations), annual cycle.

 **Non-climate information:** Altitude, longitude and latitude (quadratic), demographic: urbanisation, population density, housing condition: one room for sleeping, no toilet, health facilities per population, education level.

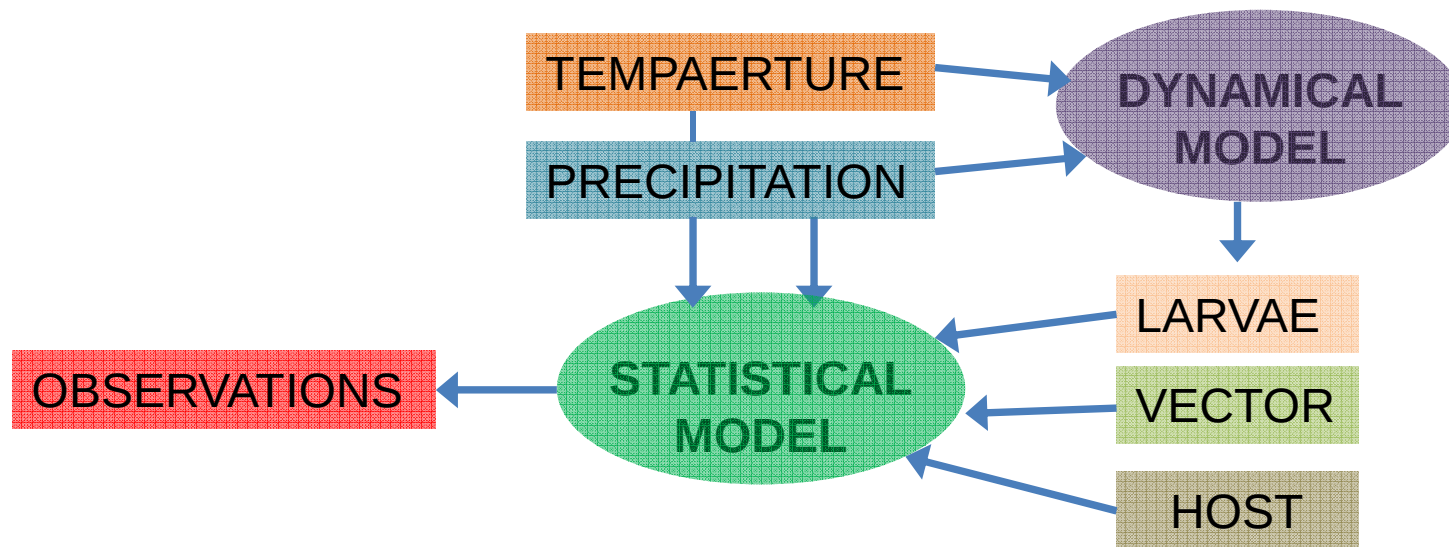
 **Climate information:** temperature and precipitation (averaged over previous 3 months – precipitation: quadratic association).

 **Dynamical model output:** vector density, larvae density, human bite ratio, proportion of infective vectors, Entomological Incubation Rate, vector to host ratio



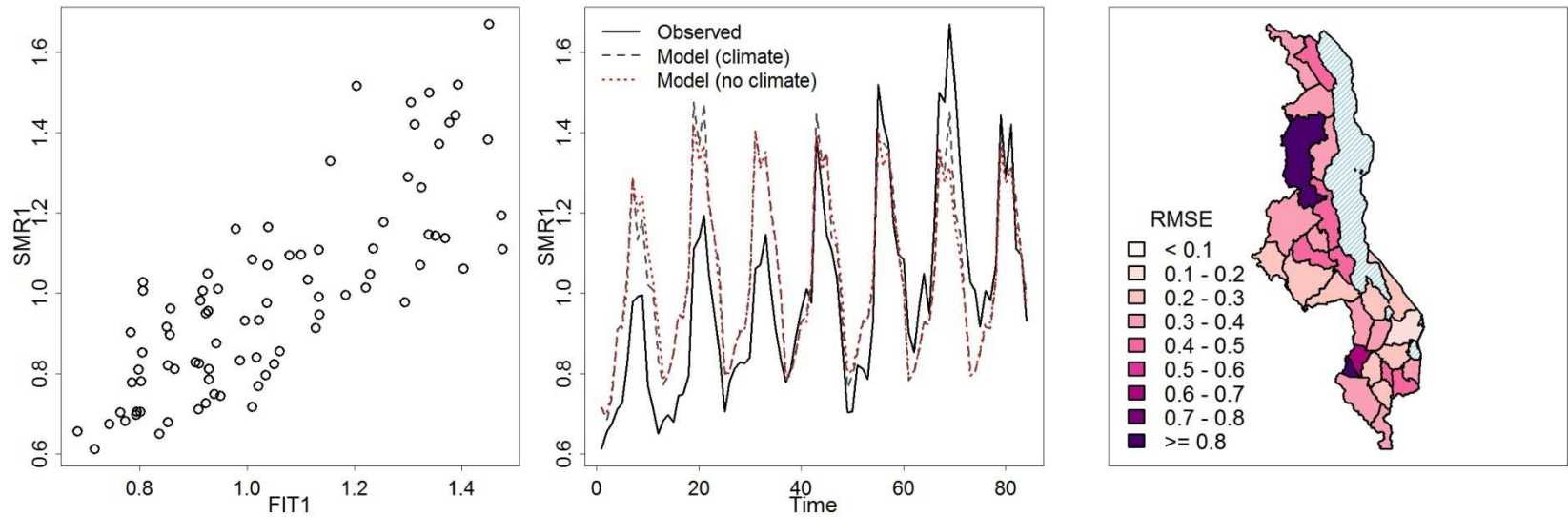
Does the use of a physically based non-linear operator for climate information improve model?

Model	AIC	R^2_{ad}
non-climate	82501	0.395
+climate	82450	0.402
+dynamical	82434	0.404
combined	82384	0.411

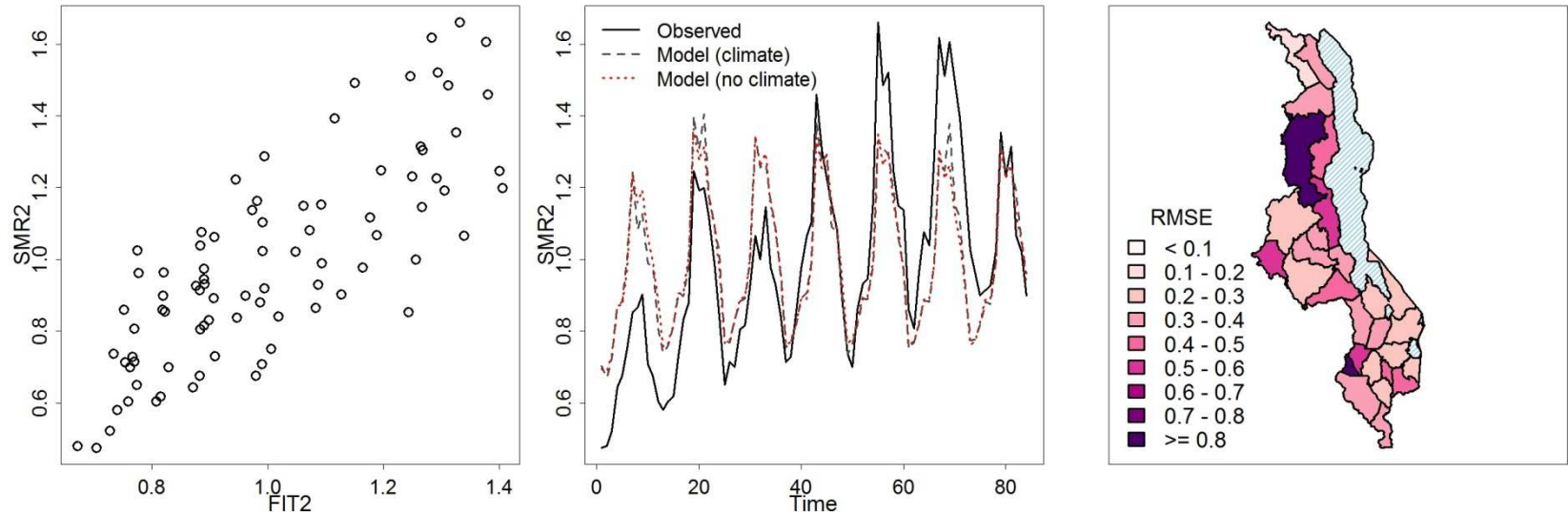


Model results

Over five



Under five

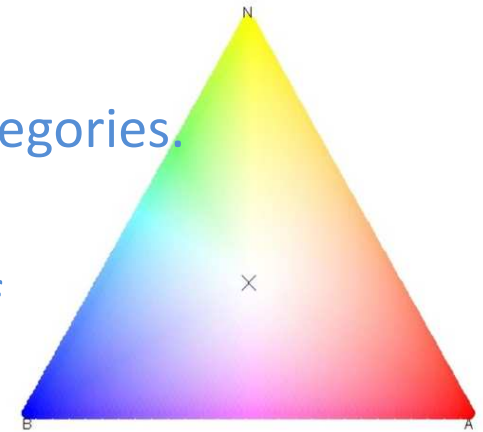


Communicating probabilistic predictions to decision makers

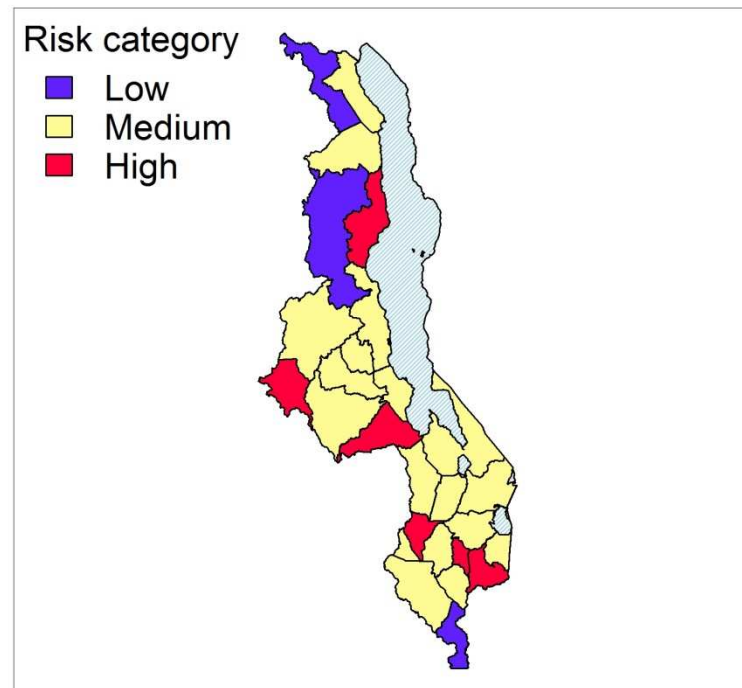
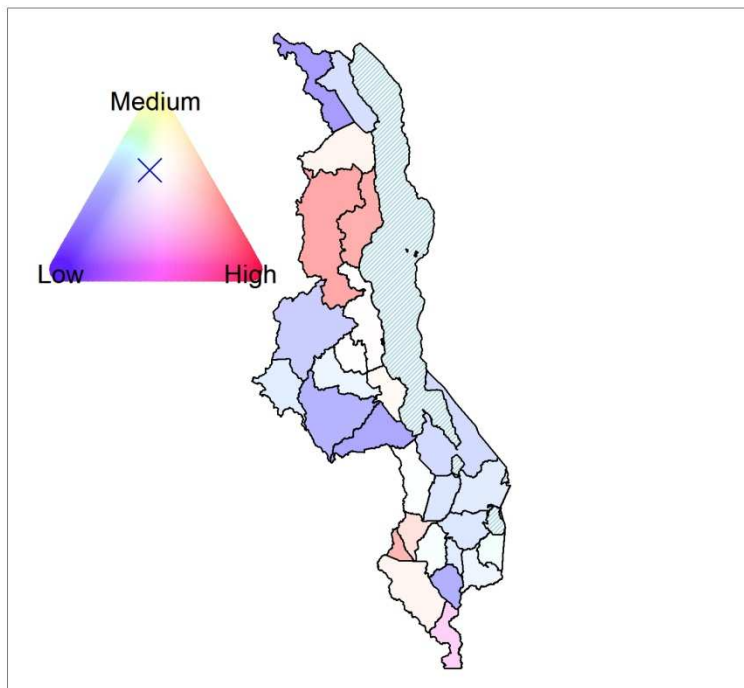
 Visualisation technique (Jupp et al., 2012) to convey probability of malaria risk falling within pre-defined risk categories.

 **NEW:** R package 'ternvis'

<http://cran.r-project.org/web/packages/ternvis/ternvis.pdf>



Probability map January 2010, category boundaries: SMR=1 and SMR=2



Conclusions

-  Climate significant predictor of malaria in space and time, explains very small % inter-annual variability.
-  Important consider other spatio-temporal factors that influence malaria.
-  Incorporating dynamical model input, to capture non-linear effects of climate on the vector and disease marginally improves the model fit.

Further work

-  Continue test usefulness dynamical model output in statistical models.
-  Identify missing information using structure of random effects.
-  Bayesian framework: provide probabilistic predictions of malaria risk (Lowe *et al.*, 2011, Lowe *et al.*, in press).
-  Extent to which climate forecasts extend predictive lead time.
-  Integrate ensemble of QWeCI disease models to predict malaria.
-  Test model framework more fully in other locations.



Merci beaucoup

