



# The relevance of Zika epidemiological modelling studies in informing public health policies during the first wave of the Zika epidemic

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# Introduction



- Unusual increase of cases of microcephaly among newborns in the state of Pernambuco (Oct 2015) and Public Health Emergency of International Concern (Feb 2015)
- Outstanding increase of Zika virus disease research : pathogenesis, epidemiology, risk and infectious disease modelling, diagnostics, therapeutics and vaccines
- Challenges for public health to translate scientific knowledge into Zika virus prevention and control

## Objectives

- Review epidemiology and especially on infectious disease modelling research published in the “acute phase” of Zika epidemic
- Relevance for public health

# Methods: Literature search

Systematic search “Zika” on biomedical literature database (Pubmed and Embase)  
and preprint servers  
Period: Nov 2015 to Jan 2017  
**n= 3176**



Selection on title and abstracts, **n= 157**  
Inclusion: epidemiological studies and infectious disease modelling  
Exclusion: genetic study, literature review, cell biology, laboratory diagnostic and  
vaccine development



Second review on full text , **n= 114**  
Data extraction metadata (study design, publication date, PH relevance)

# Results: outline of selected studies

## Observational studies

Descriptive

Surveillance data and case-series 23

Ecological 10

Analytical

RO estimation (estimated from ZIKV epi. data) 8

Case-control 5

Time-series 4

Ecological niche modelling (using ZIKV epi. data) 3

Cohort 2

Cross-sectional 1

## Experimental studies

Theoretical simulation

Compartmental models 29

Forecast 8

Multicriteria analysis 8

Decision-tree model 3

## Mixed design studies

Mixed design (observational and experimental) 10

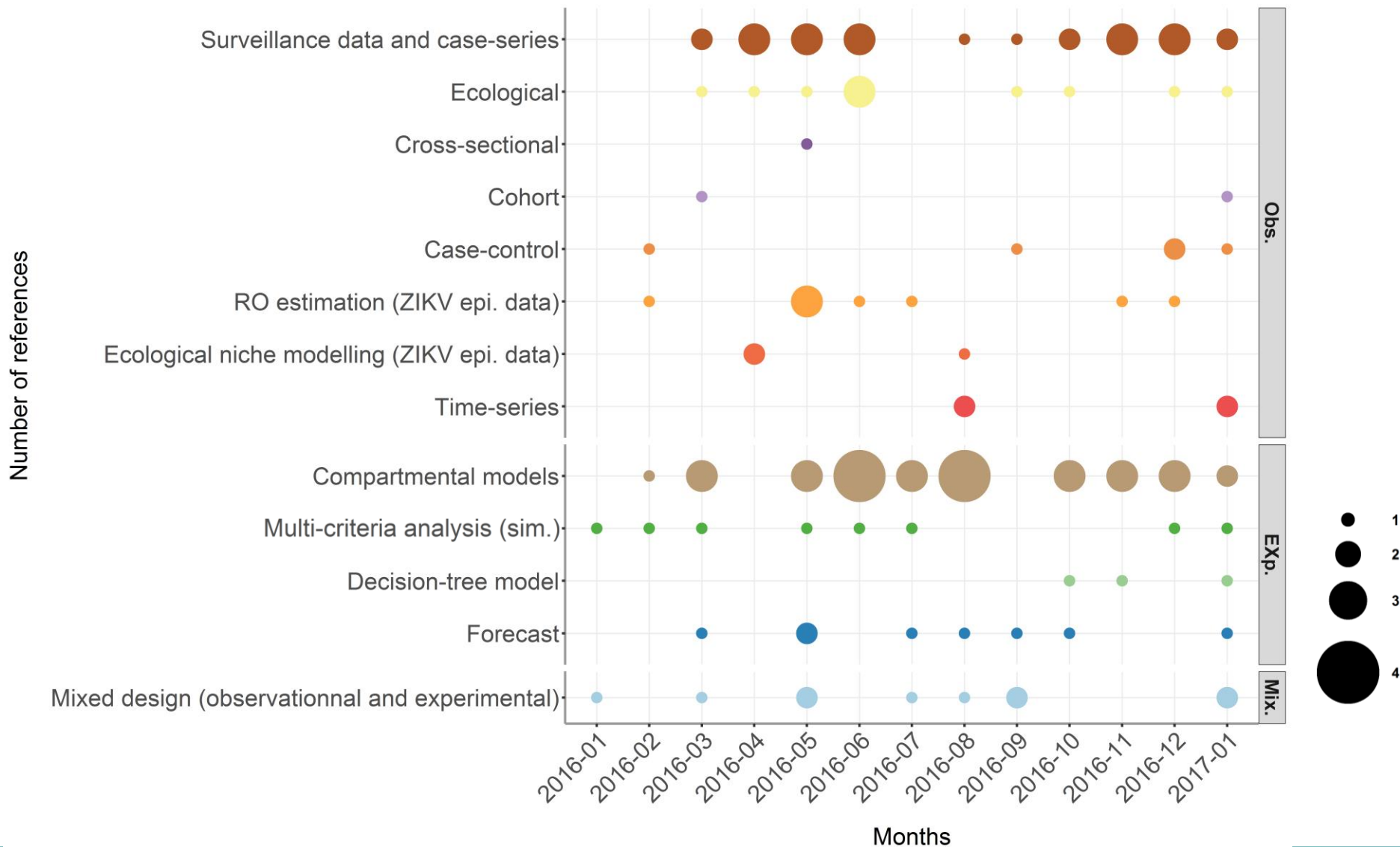
**Total 114**

# Results: time trend

## Articles by month (Period: Jan 2016 - Jan 2017)



# Results: time trend by study design



# Results

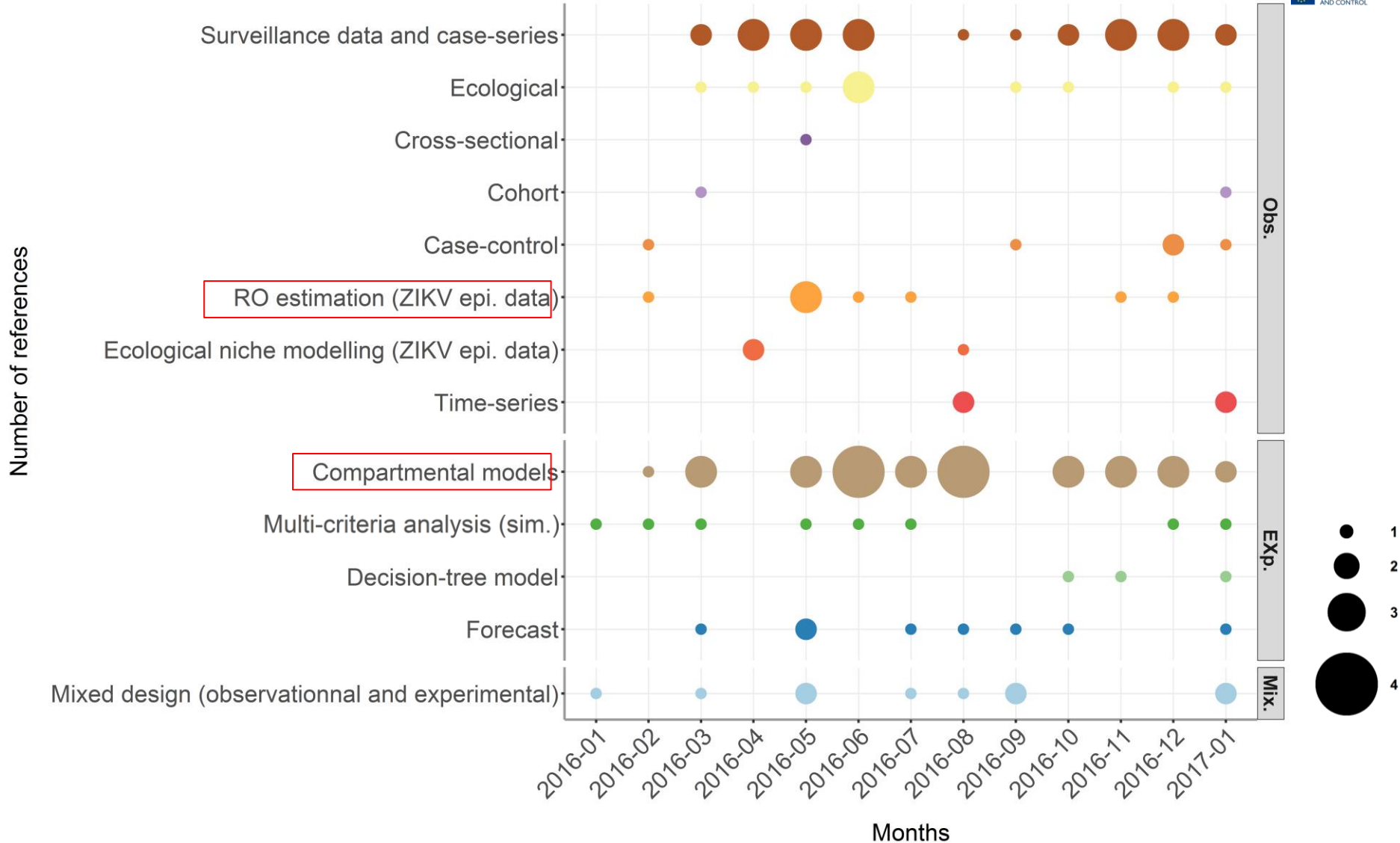
- Descriptive studies: surveillance data
- Observational analytical studies: risk assessment
  - Delays for specific target group (adverse outcomes during pregnancy and neonates follow-up)
  - standardized research protocols<sup>1</sup>
- Ecological studies remains of interest (co-factors)
- Experimental (theoretical simulations)
  - Spread into specific settings/group and epidemic pattern
  - Multi-criteria analysis and comprehensive study with mixed design: relevant but not standardized

## Relevance

- Paramount importance for public health early phase of an a PHEIC
- Period at risk and co-factors

1: <http://www.who.int/reproductivehealth/zika/en/>

# Results: reproductive number





# Results: reproductive number

- Large number of articles (n=37, 27%): preprint servers and peer-review publications
- Estimated from epi-data vs compartmental models
- Complexity increase over time

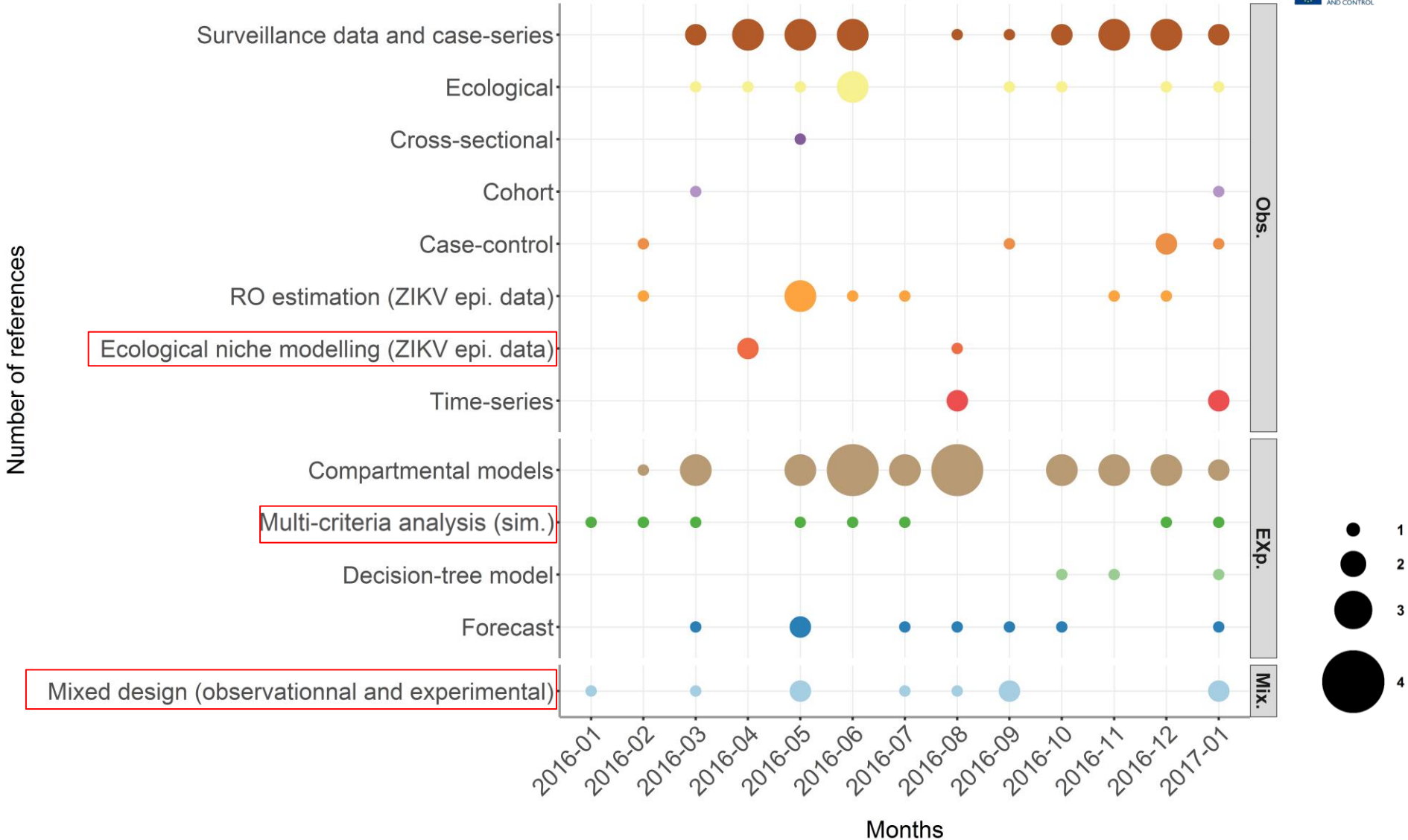
## Limitations

- Initially limited knowledge on
  - entomological parameters (EIP, vector competence & vectorial capacity, vertical transmission, temperature dependence)
  - epidemiological parameters (ratio asymptomatic/symptomatic, transmissibility person-to-person ...)

## Relevance

- Assets for public health in an early phase of any PH emergency
- Challenge in assessing methods used and subsequent limitations
- Still limited number of compartmental models with a comprehensive assessment combining different modes of transmission

# Results: ENM, multi-criteria and mixed design



# Results: ENM and multi-criteria analysis



- Ecological niche models (ENM): ZIKV disease vs *Aedes* vectors
- Integration of multi-criteria approach (relevant covariates)
- Spatial model with vectorial capacity (expected epidemic behaviour)

## Limitations

- Difference with reference to methods among studies: standardization
- Spatial resolution and time variations

## Relevance

- Added-value to delineate of area(s): circulation is on-going or can be expected
- Spatially explicit epidemic model: front wave/outbreak forecast under climate forcing

# Results: prevention and control



- Few observational and modelling studies on :
  - Cost-effectiveness
  - Vector control strategy effect on health outcomes (vector population)
  - Enzootic cycle and level of transmission modelling after outbreak
  - End-points for disease prevention, outbreak control, and risk assessment

## Limitations

- Time to collect data on vector control strategy & health outcomes
- Multidisciplinary approach required
- Limited knowledge in the eco-epidemiology of Zika virus (vector and host)

## Relevance

- Optimal vector control
- Integration of uncertainties and scenario

# Conclusions

- Outstanding research outcomes replying to Zika virus disease emergence
- “PH priority list” of relevant studies
  - Observational analytical studies
  - Specificity of mosquito-borne disease and infectious disease modelling
    - reliable knowledge on entomological and ecological parameters (e.g. vector competence, reservoir)
    - epidemiological parameters (ratio symptomatic/asymptomatic, herd immunity, sexual transmission)
  - Include assessment of strategies and vector control interventions in outbreak settings
  - Mixed design: theoretical simulation and multi-criteria approach including scenario and uncertainties

# Future research topics linked to Zika and public health



## **Observational studies**

- Descriptive: regional ecological studies (additional co-factors at population level)
- Analytical : case-control and pregnancy and newborns follow-up (strength of the association, risk per trimester and risk factor(s))

## **Experimental studies: infectious disease modelling**

- Vector-borne/not vector borne transmission (compartmental and network)
- Future transmission pattern and possible scenario taking into account different potential drivers of endemicity (vector(s), host(s) herd immunity, meta-stability)
- Levels of transmission post-invasion & endemic setting under different scenario