

IMMUNIZATION

By Austin Egri

Outline

- Random Immunization
 - *Random Networks*
 - *Heterogeneous Networks*
- How to Halt an Epidemic
- Vaccination strategies in Scale-Free Networks
 - *Immunizing the Hubs*
 - *Robustness and Immunization*
 - *Selective Immunization for Scale-Free Networks*
 - *Random Immunization*
 - *Selective Immunization*
- Can Pathogens be Eradicated?

Immunization Strategies

- Method specifying how vaccines, treatments, drugs distributed
 - Ideal: distributed to everyone
- Aim to minimize pandemic threat by effective distribution
- Pathogen spreading rate: λ
- Pathogen critical threshold: λ_c
 - If $\lambda < \lambda_c$, the virus naturally dies out
- Epidemic threshold vanishes In Scale-free network models
 - Is this strategy valid?

Random Immunization

- Immunization Objectives:
 - Primary: protect immunized persons from disease
 - Secondary: reduce speed at which pathogen spreads in population
- SIS (Susceptible-Infected Susceptible) Model
 - β = *rate at which an individual becomes infected*
 - μ = *rate at which infected individuals recover*
 - $\lambda = \frac{\beta}{\mu}$
- g Nodes immunized to pathogen, $(1-g)$ nodes susceptible
- Degree of susceptible nodes changes from $\langle k \rangle$ to $\langle k \rangle(1-g)$
- Spreading rate changes from $\lambda = \beta/\mu$ to $\lambda' = \lambda(1-g)$

Random Immunization

■ Random Networks

- λ' could fall below epidemic threshold
- $$g_c = 1 - \frac{\mu}{\beta} \frac{1}{\langle k \rangle + 1}$$
- Note how vaccinations lower the rate of spreading and also make it easier for the disease to become eradicated

Random Immunization

■ Heterogenous Networks

- $g_c = 1 - \frac{\mu}{\beta} \frac{\langle k \rangle}{\langle k \rangle^2}$ new immunization rate for λ' to fall below the epidemic threshold
- In a scale free with $\gamma < 3$, $\langle k^2 \rangle \rightarrow \infty$, so $g_c = 1$
 - This implies that virtually every person would have to be immunized
 - 80%-100% in practice (95% for disease such as measles)

Random Immunization

- An example
 - *Digital Virus spreading on email network*
 - *Random, undirected*
 - $\langle k \rangle = 3.26$
 - $\lambda = 1$ (spreading rate)
 - *Solve for $g_c = 0.76$*
 - So 76% of computers would need the anti-virus software
 - Since email network is actually scale-free, with $\langle k^2 \rangle = 1,271$, $g_c = 0.997$ for $\lambda = 1$
 - This means virtually all computers must have the antiviral software
 - Impractical in practice

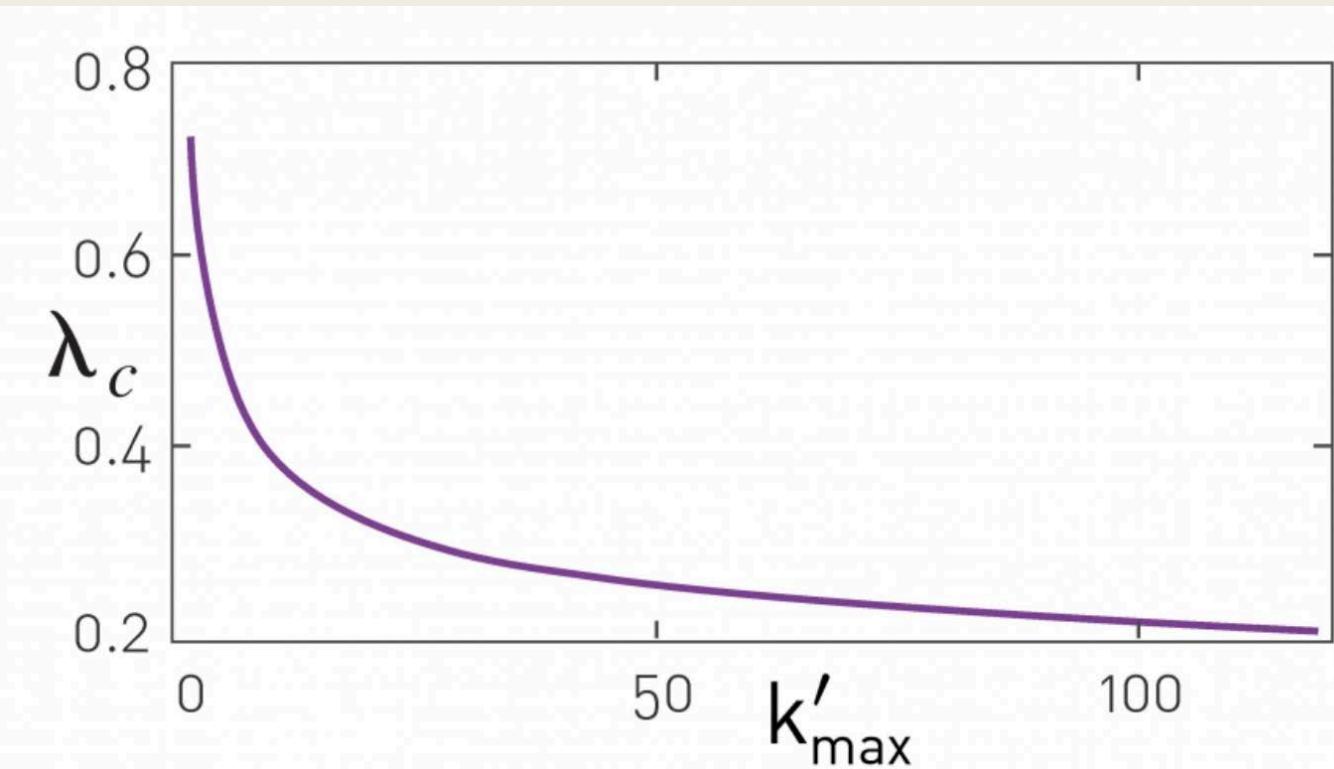
How to Halt an Epidemic

- Interventions to control/delay epidemic outbreak
 - *Transmission-Reducing Interventions*
 - Face masks, gloves, hand washing
 - *Contact-Reducing Interventions*
 - Patient quarantine, school closings, mall/movie theater closings
 - Make network more sparse
 - *Vaccinations*
 - Permanently remove vaccinated nodes from the network

Vaccination Strategies in Scale-Free Networks

Random Immunization is ineffective. How can we minimize the network?

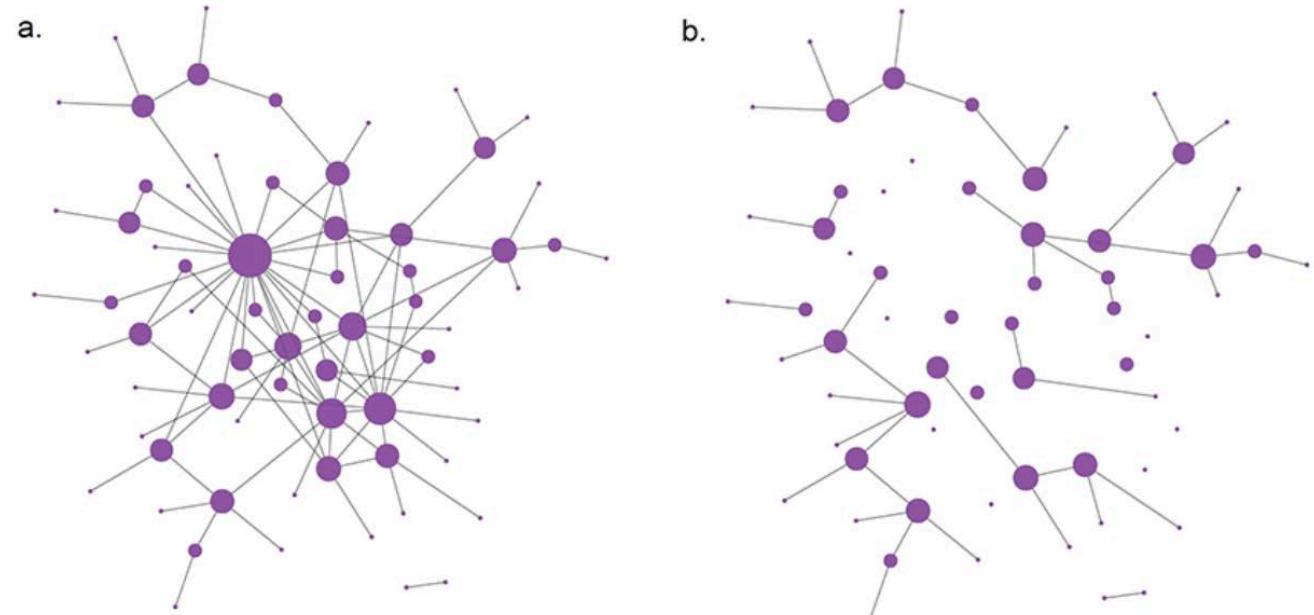
A: Reduce variance $\langle k^2 \rangle$ of underlying contact network (Scale-Free Network)



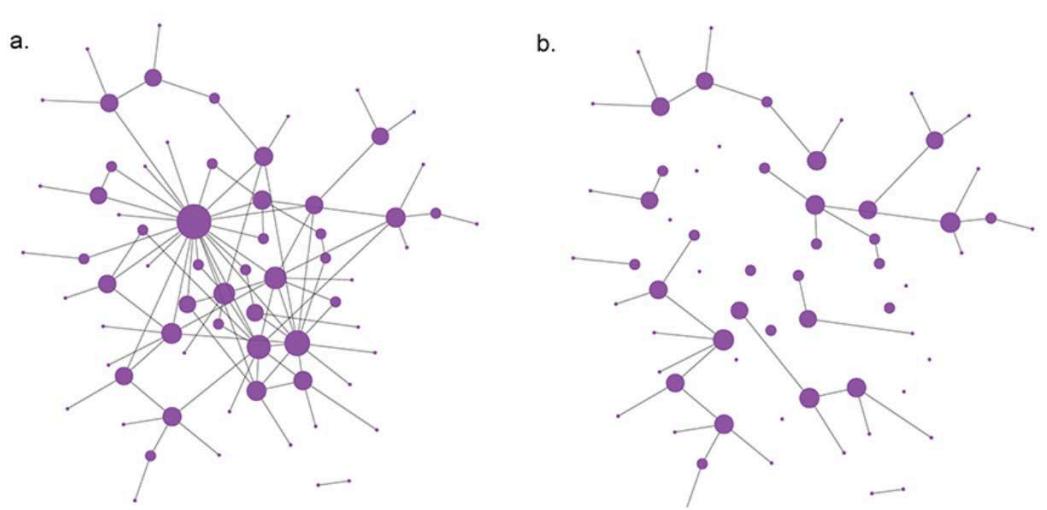
Immunize the Hubs

Immunizing all nodes with degree $> k'_{max}$

The more hubs that are immunized, the larger λ_c becomes, thus increasing the chance the disease dies out

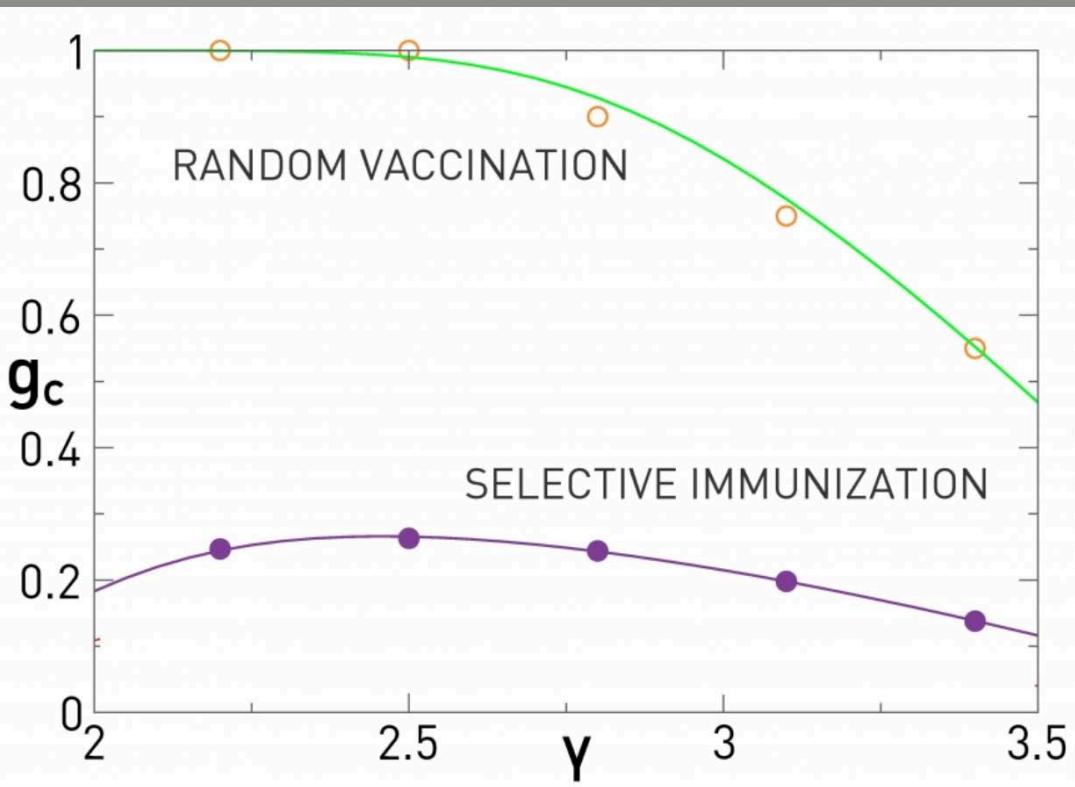


Robustness & Immunization



- Scale-free networks are robust to random node/link failures, but removing hubs/nodes with highest connectivity, they fall apart
- This problem similar to attack problem on scale-free networks
- See network (a)
 - *5 largest hubs removed (b)*
 - *Network is shattered*
- Issue
 - *Hub identification difficult due to minimal network map knowledge*
 - *Friendship Paradox:*
 - Average neighbors of a node have higher degree than node itself
 - Algorithm:
 - *take fraction of infected people*
 - *Immunize a single random individual the infected individual had contact with*

Selective Immunization of Scale-free Networks



- g_c on the left as a function of the degree exponent γ .
- Random Immunization
 - For heterogeneous networks (small γ) $g_c \cong 1$, but in high γ networks, immunizing a smaller portion eradicates the disease
- Selective Immunization
 - Using the biased strategy, g_c is $< 30\%$
 - Immunize random neighbor of 30% of the nodes, to eradicate disease
 - MUCH more efficient

Can Pathogens be Eradicated?

- Eradication: the complete elimination of a pathogen from a population
- Smallpox started w/ mass vaccination strategy, but was unsuccessful in high population areas
- Eventually developed network based vaccination (treat anyone in contact with infected individual), and smallpox became first disease to become officially eradicated
- Process:
 - Select disease with only human carriers
 - Vaccination exists
 - Mixed success
 - Smallpox, rinderpest successful
 - Hookworm, malaria, yellow fever unsuccessful
- Right: Rahima Banu, last smallpox patient (1976)



Conclusion

- Immunization increases the difficulty for a disease to spread
- Random networks/Scale-free networks with high γ require near total immunization
- Effective vaccination and immunization strategy prevents disease outbreak
 - *Eradication occurs when effective strategy combined with effective vaccine works well*

References

- Barabási, Albert-László, and Márton Pásfai. *Network Science*. Cambridge University Press, 2016.