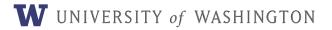


Applied Simulation Modeling for Interrupting Malaria Transmission on Bioko Island

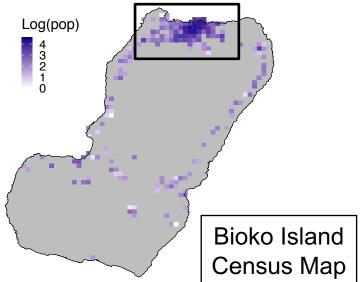
Daniel T. Citron April 15, 2019



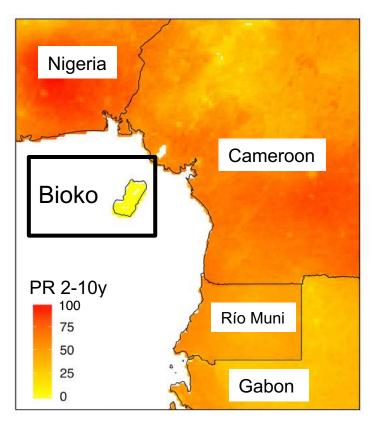
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Bioko Island

- Island Population: ~250,000
- Malabo Population: ~190,000 ۲

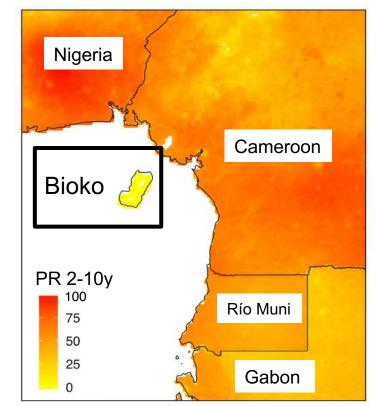






Malaria on Bioko Island

- PR = Parasite Rate, a measure of prevalence
- High risk region
- 2004 Bioko PR ~ 40%
- 15-year control program, including:
 - Extensive surveillance
 - Extensive vector control
 - Freely available treatment
 - Capacity building
- Since 2015 Bioko PR ~ 10%



Bioko Island Malaria Elimination Program

- Program managed by MCDI
- Collect data in Malaria Indicator Survey:
 - Annual survey of ~15,000 residents
 - Parasite Rate
 - Travel history
- Close collaboration was crucial for understanding transmission environment

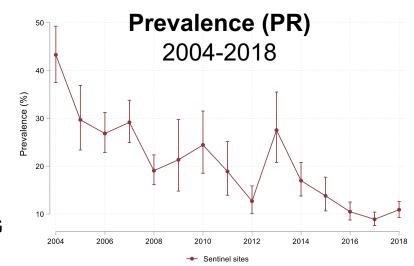




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Key Questions

- The conundrum:
 - No reduction in PR since 2015
 - o Why has progress stalled?
- What to do next?
 - Will adding vaccination to the current intervention package halt transmission on Bioko Island?
- What is the role of off-island transmission?
 - High risk among travelers from mainland EG
 - Few vectors in Malabo, yet malaria persists

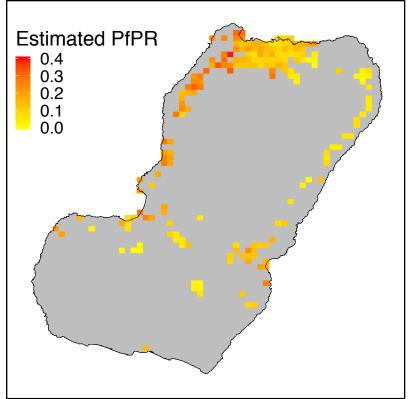


Modeling Methodology

- Begin with aggregated MIS data, 2015-2017
- Create geostatistical maps:
 - PR estimates
 - Travel behavior
- Use mechanistic models, calibrated to MIS and geostatistical maps
 - Geospatially explicit model of transmission
 - Include human travel between Bioko Island and Mainland EG
- Analysis:
 - Assess influence of cases acquired off-island with simple dynamical model
 - Simulate vaccination deployment scenarios

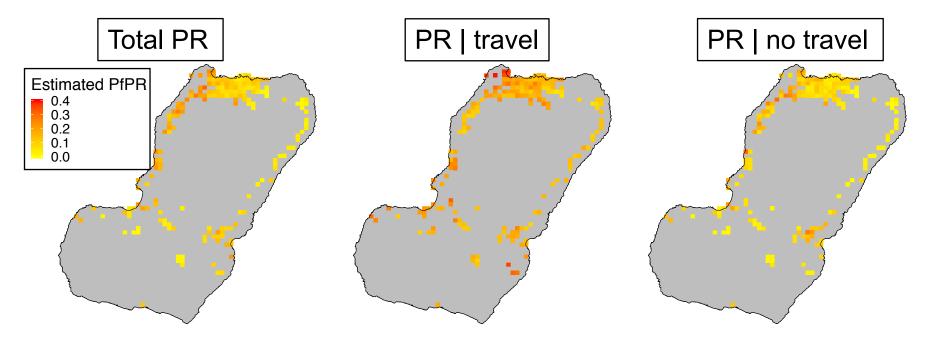
Mapping Malaria Prevalence

- Geostatistical prevalence mapping
 - Census
 - Survey data
 - Environmental covariates
- Estimate prevalence in each map-area
 - Captures km²-scale variability in PR
 - Highest PR along northwest coast
 - ~10-14% in Malabo



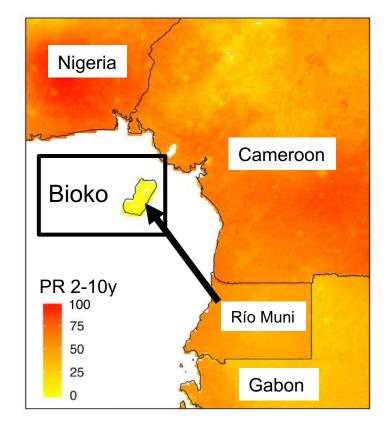
Prevalence Conditioned on Travel History

- Map PR, this time conditioning on recent travel
- Higher risk of malaria among those who traveled off-island



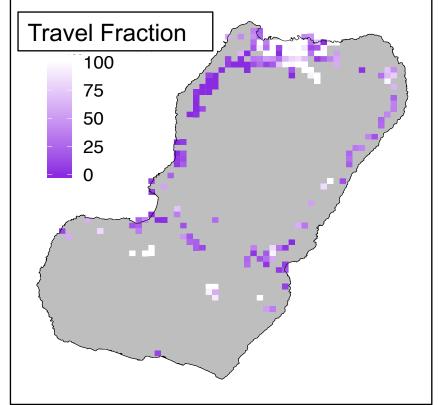
Influence of Off-Island Transmission

- Mainland EG has very high transmission risk
- Frequent off-island travel from Malabo
- How much of the prevalence seen on the island is attributable to travel?
- Use simple dynamical model
 - Ross-Macdonald
 - Include off-island infections
 - Calibrate based on PR + travel survey



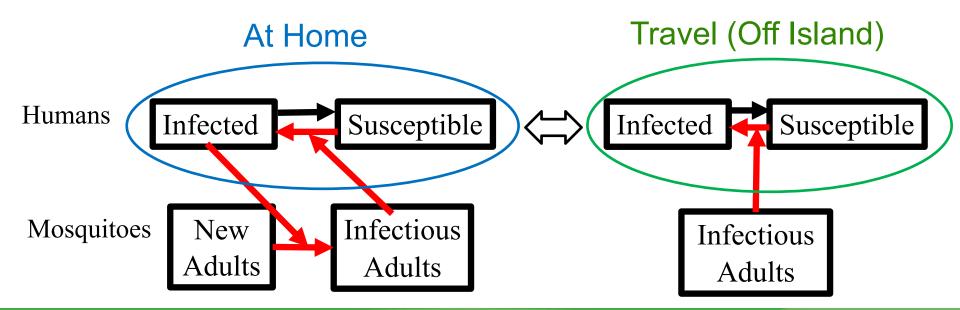
Influence of Off-Island Transmission

- Travel Fraction: % cases attributable to off-island transmission
- Malabo
 - High travel fraction (white)
 - Infections not occurring locally
 - Explains high prevalence and few viable vectors in urban area
- Malaria cases acquired off-island maintain PR in parts of Bioko



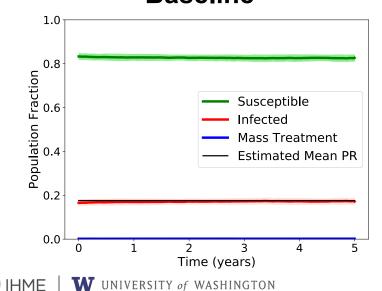
Effect of Additional Interventions

- Agent-based simulation model of malaria transmission
 - Allow individuals to travel, calibrated to travel survey data
 - o Individuals come in contact with mosquitoes, transmit parasites



Simulation Modeling Results

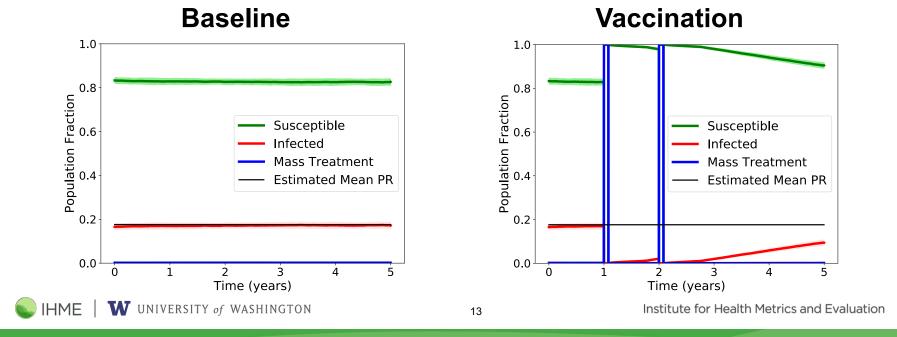
- Baseline: what would happen with no additional interventions
- Red: tracking mean prevalence over time



Baseline

Simulation Modeling Results

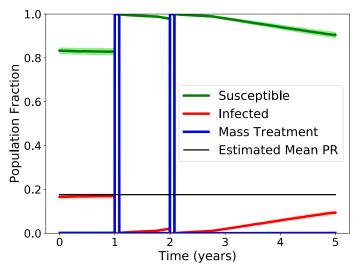
- Adding vaccine + treatment, as a best-case scenario
- Malaria returns after a few years unlikely to eliminate



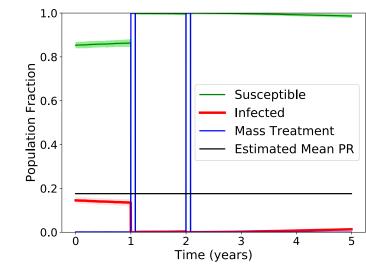
Simulation Modeling Results

- Simulated reducing risk of acquiring infections off-island
- Results robust to varying vaccine coverage and efficacy
- Addressing risk of returning with malaria may be more effective

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Vaccination



Reduced Off-Island Risk

Conclusion

- Bioko Island malaria transmission reduced in many areas
- Continued elevated PR maintained by infections acquired off-island
- Vaccination + Mass Treatment campaign ineffective in long run
- Reducing off-island infections may be more effective

Next Steps

- Augmenting travel model with highly detailed 2018 MIS data
- Improving transmission model
- Extending sensitivity analysis to show robustness of results to data inputs

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