

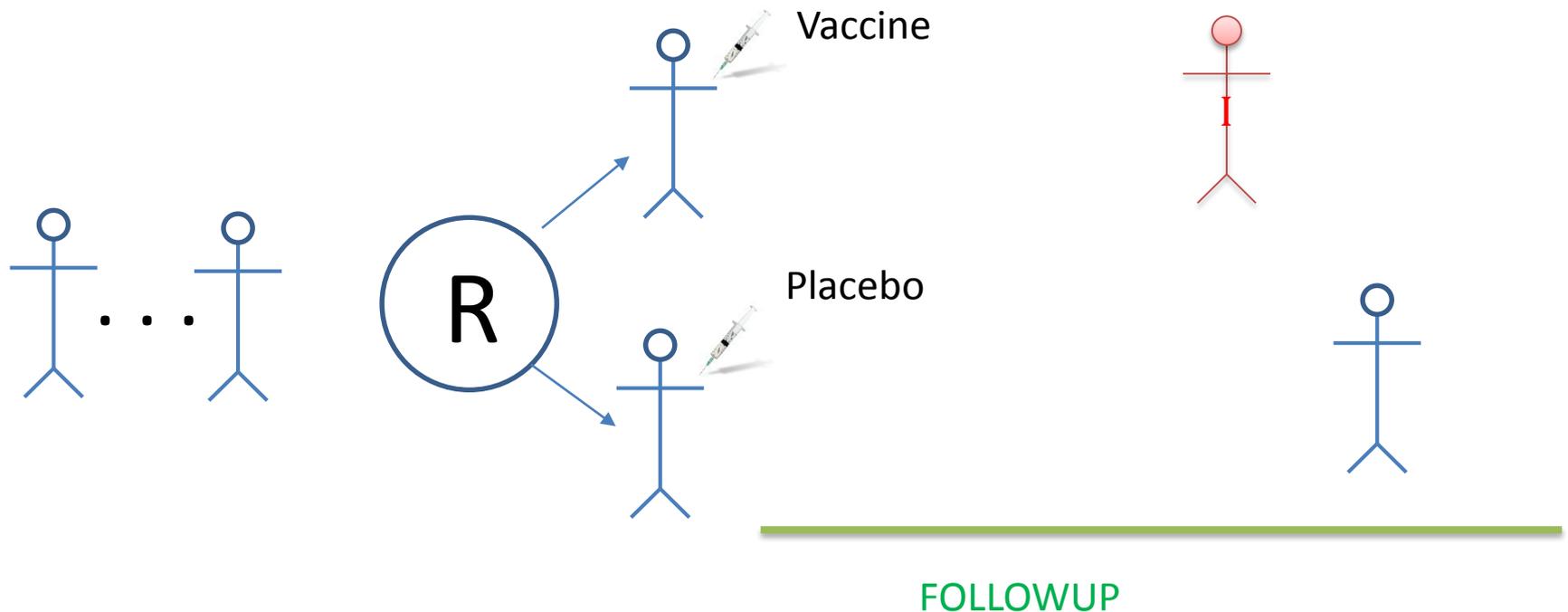
# Incorporating Infecting Pathogen Counts In Vaccine Trials

Dean Follmann

National Institute of Allergy and  
Infectious Diseases

# Vaccine Trial

- Randomize at risk healthy volunteers to vaccine or placebo
- Follow them & count significant infections

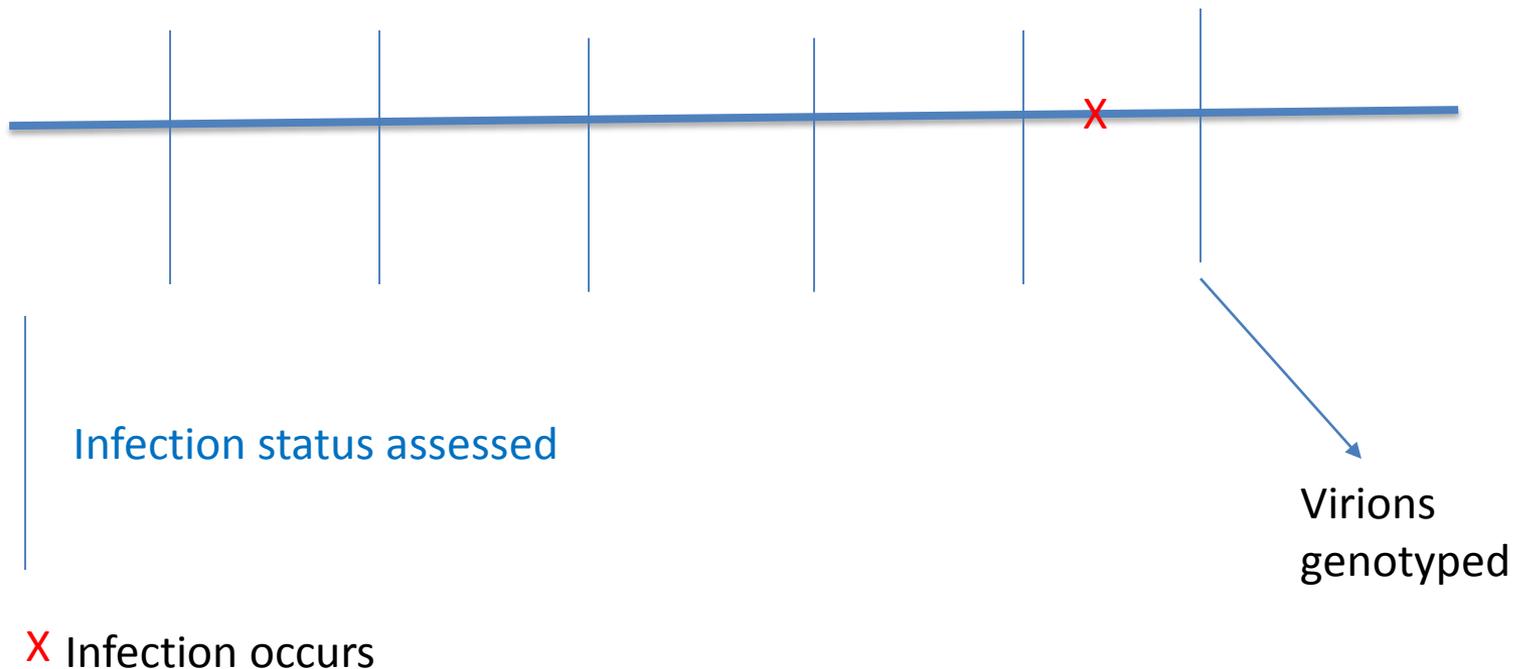


# Vaccine Efficacy (VE)

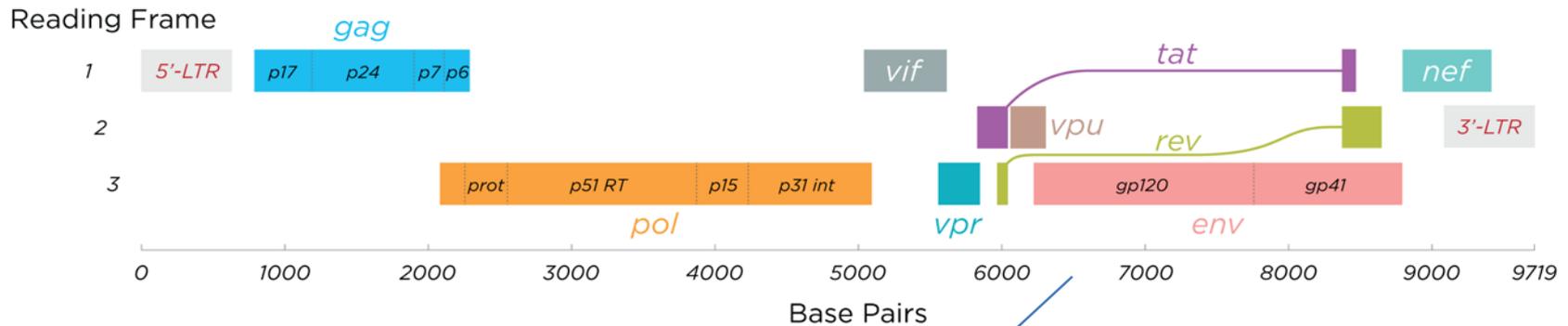
- What is the proportion reduction in some outcome on vaccine compared to placebo?
- $VE = 1 - \frac{\textit{Infection Rate on Vaccine}}{\textit{Infection Rate on Placebo}}$
- $VE = 1 - \frac{\textit{hazard rate on vaccine}}{\textit{hazard rate on placebo}}$
- Based on human infection yes/no . . .

# HIV Infection Detection

- Volunteers are followed at regular intervals (e.g. 6 months for infection)



# The swarm of HIV virions in an infected individual are not genetically identical



Virion 1      A T C T A T

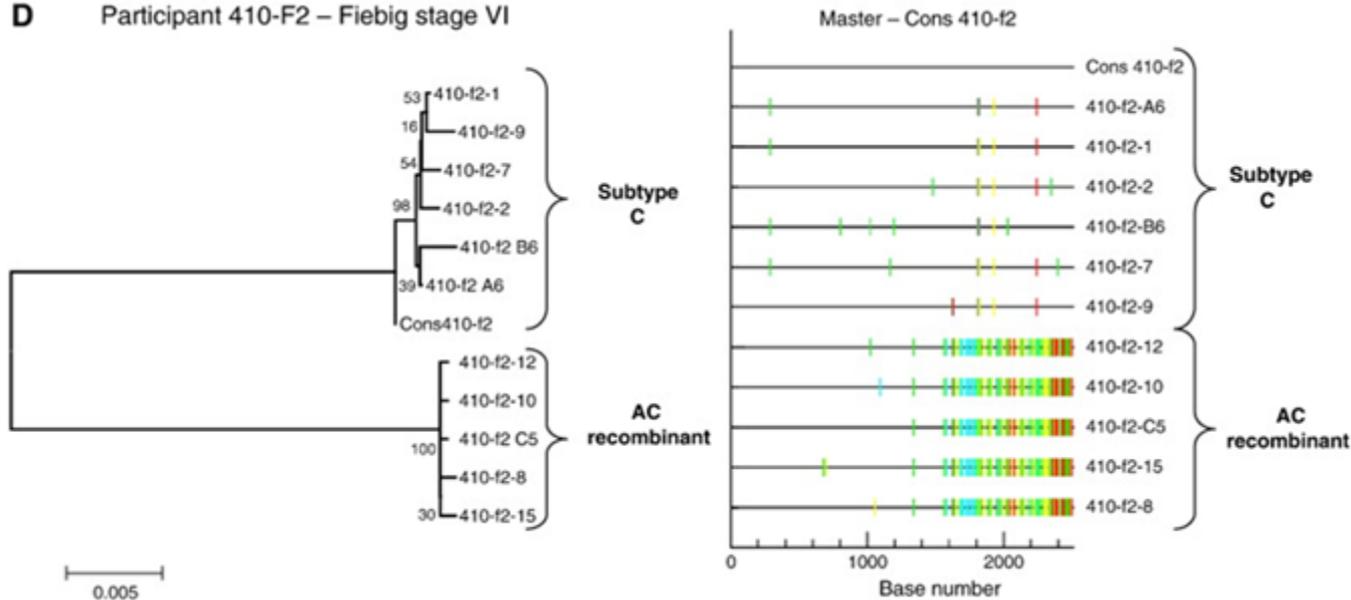
Virion 2      A T G G C T

Virion 3      T T C T A T

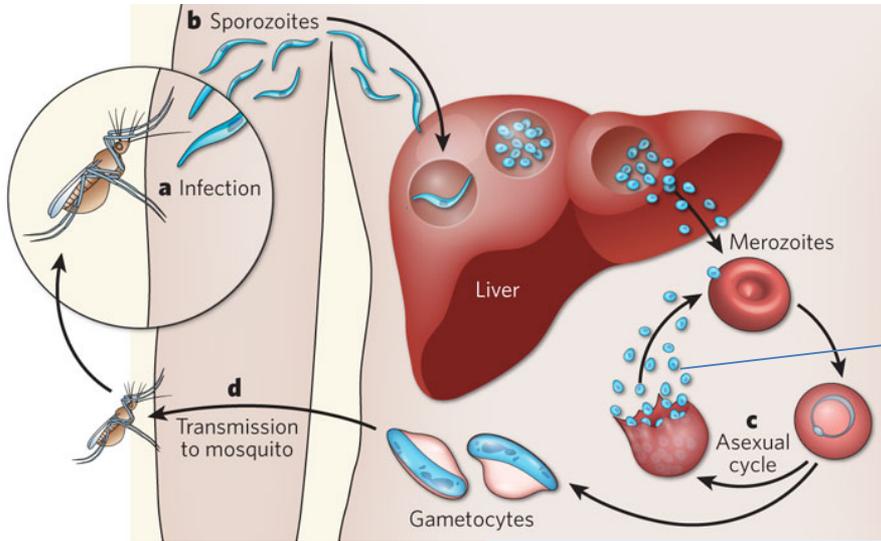
CONSENSUS    A T C T A T

# Founder Viruses Tell More Than Infection Yes/No

**D** Participant 410-F2 – Fiebig stage VI



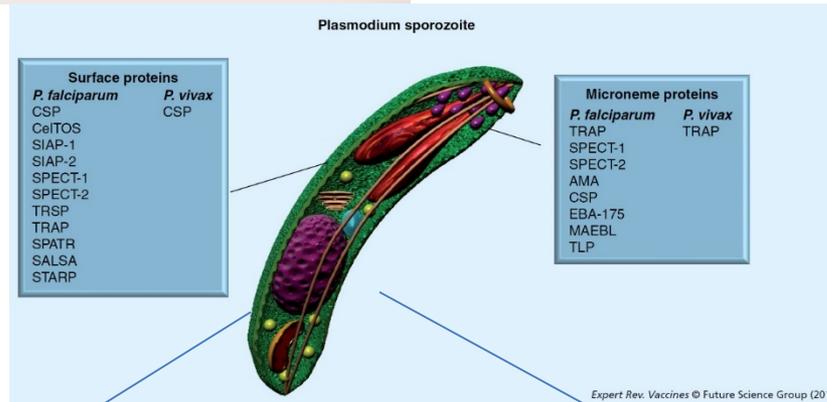
# Malaria Sampling



Malaria life cycle

Sample blood stage parasites  
 PCR amplification of CS region  
 Then Next Gen sequencing.

NRNAN ... EW  
 NRNEN ... TW



290                      300                      310                      320                      330

|                      |                      |                      |                      |

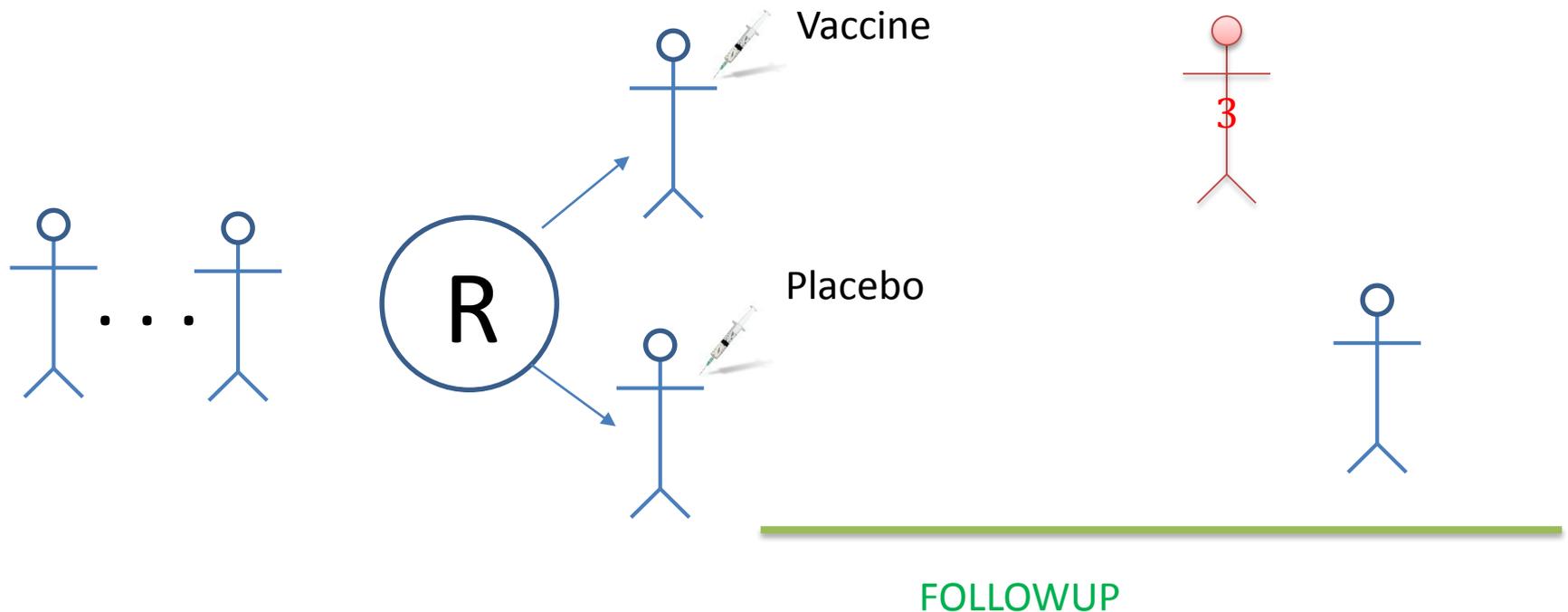
NRNVDENANANSAVKNNNNEEPSDKHIKEYLNKIQNSLSTEW

AA sequence of  
 Parasite used in  
 RTS,S/AS01 Vaccine



# Vaccine Trial Redux

- Randomize at risk healthy volunteers to vaccine or placebo
- Follow them & count # infecting pathogens



# Placebo Volunteer



2 Virions infect cells

$$X = 2$$

# Vaccine Volunteer



1 Virion infects a cell

Antibodies **Y** block infection

$$X=1$$

Both humans are infected, but the vaccine reduces founder viruses  
Useful information that the vaccine is doing something

# Mechanisms of Vaccine Protection

- All-or-none vaccine: a proportion of vaccinees are protected for *all* exposures.
- Leaky vaccine: chance of *human disease after exposure* is like flipping a coin w.p.  $Q$ 
  - $Q_v$  in vaccine arm     $Q_p$  in placebo arm
- Leaky leaky vaccine: chance of *pathogen infecting a cell* is like flipping a coin w.p.  $P$ 
  - $P_v$  in vaccine arm     $P_p$  in placebo arm

Smith et al 1984

Struchiner et al 1990

Halloran et al 1991

# Vaccine Efficacy From the Virion's View

- Exposure has  $N$  virions. Each has probability  $p$  ( $p\Delta$ ) of infecting a cell in a placebo (vaccine) recipient.
- Model  $X = \#$  founder viruses
  - Vaccine  $E(X) = N p \Delta = \mu \Delta$
  - Placebo  $E(X) = N p = \mu$
- $VE_V = 1 - \frac{E(X|Z=1)}{E(X|Z=0)} = 1 - \Delta$

Per virion reduction in probability of infection  
Holds for any mixture over  $\mu$



# Efficiency gain using $X$ in lieu of $I(X>0)$

- Suppose  $X_1, \dots, X_n \sim \text{Poisson}(\mu)$
- Dumb Method
  - Convert  $X$  to  $Y = I(X>0)$
  - Estimate  $P(X>0)$  by  $\text{avg}(Y)$
- Smart Method
  - Estimate  $\hat{\mu} = \text{avg}(X)$
  - Estimate  $P(X>0)$  by  $1 - \exp(-\hat{\mu})$
- $\text{var}(\text{smart}) / \text{var}(\text{dumb})$  --- estimates of  $P(X>0)$

$\mu = .25$	$\mu = 1$	$\mu = 3$
1.1	1.7	5.8

# Monkey Studies

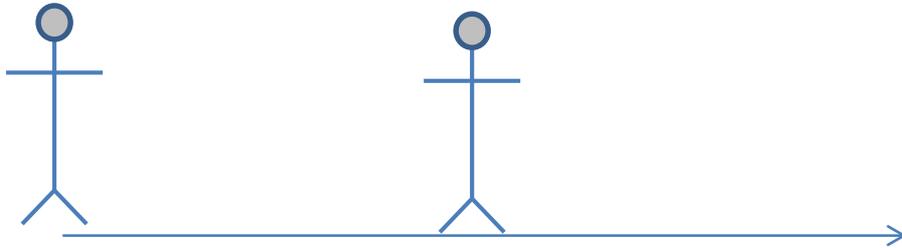
- Monkeys repeatedly *challenged* by exposing them to virus
- Assume  $X$  per challenge is Poisson( $\mu \Delta^Z$ )
- Likelihood contribution for a monkey infected on *third* challenge with 4 founder viruses.
  - $P(X=0) P(X=0) P(X=4)$
- Use maximum likelihood to estimate  $\mu \Delta$ 
  - Form  $V \widehat{E}_V = 1 - \widehat{\Delta}$

# Animal vs Human Experiments

- Animal Experiments
  - Control exposure:  $N$  virions from known pool
  - Identify all  $X$ s, even when  $X=0$
- Human Field Trials
  - $N$ =inoculum size uncontrolled and unknowable
  - Exposure not crisply defined
  - Exposures unknown unless infection occurs
    - $X=0$  never seen

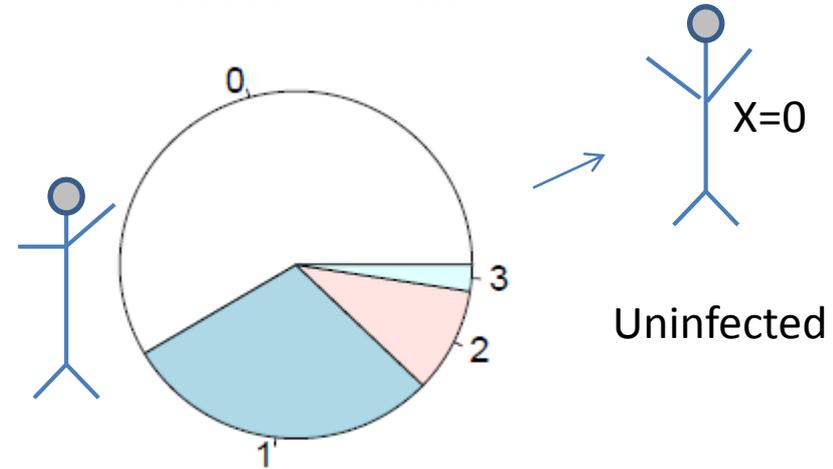
# Casino Behavior

Placebo Queue



$\omega(t)$  = Instantaneous risk of gambling

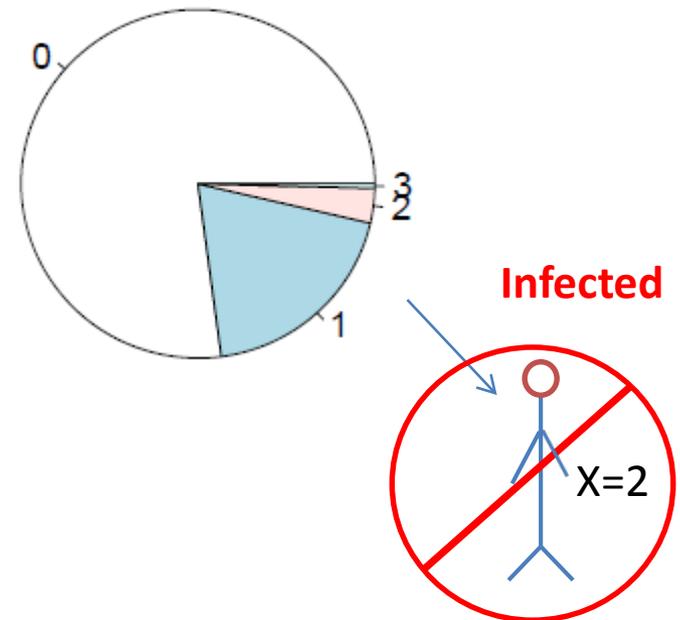
Placebo Roulette

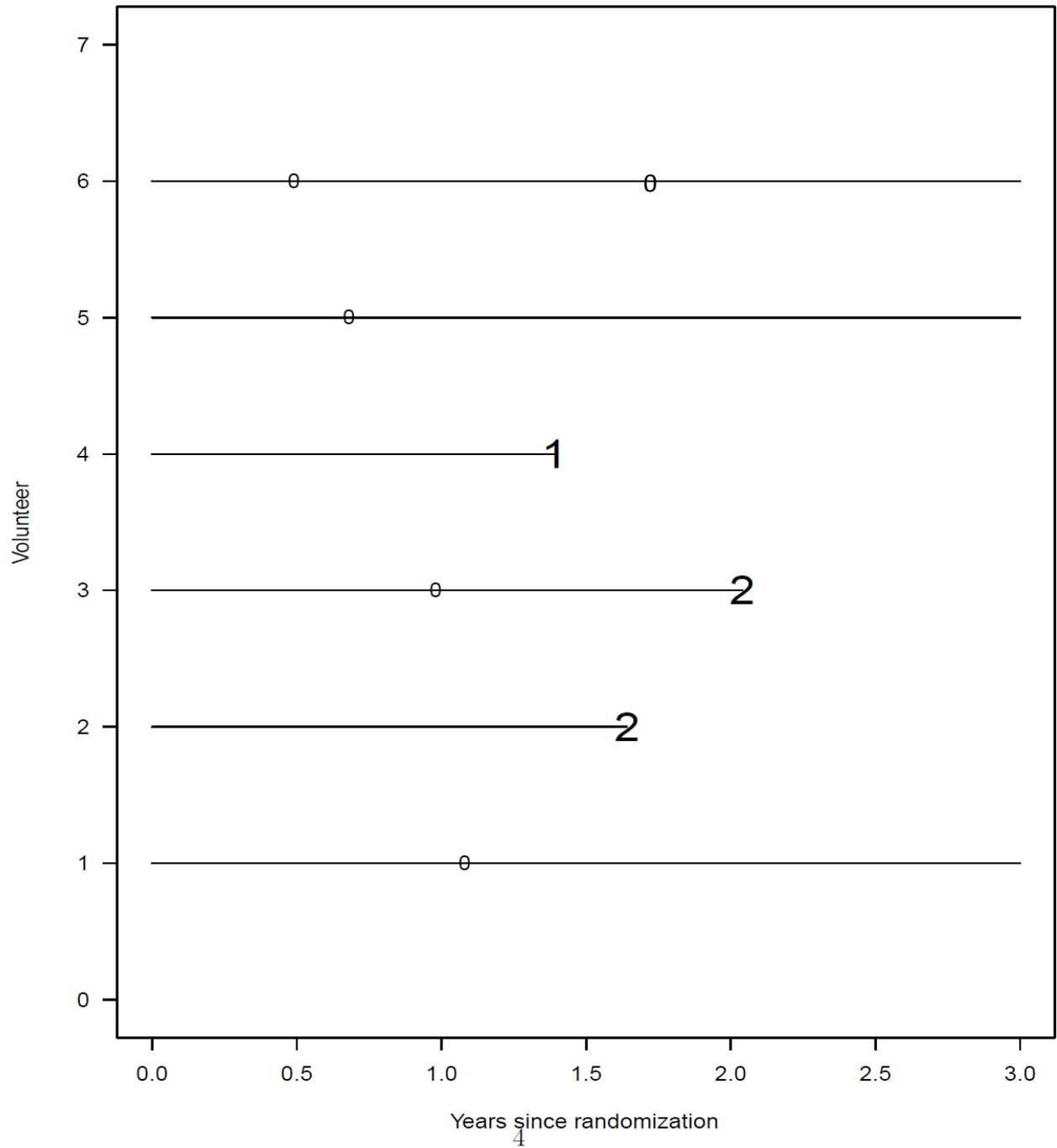


Vaccine Queue



Vaccine Roulette





# Cox Regression For Infection

- A model for the instantaneous risk of infection

$$h(t) = \omega(t) P(X>0|Z=0) \quad \text{in placebo group}$$

$$h(t) = \omega(t) P(X>0|Z=1) \quad \text{in vaccine group}$$

Probability of infection, given exposure

Risk of EXPOSURE  
*Same* in both groups

Risk of INFECTION

# Cox Regression 2

- No matter the distribution of  $X$

$$\begin{aligned}h(t) &= \omega(t) \{P_0(X>0)\} \exp\left\{\log\left(\frac{P_1(X>0)}{P_0(X>0)}\right) Z\right\} \\ &= h_0(t) \exp\{\beta Z\}\end{aligned}$$

- $\beta = \log\left(\frac{P_1(X>0)}{P_0(X>0)}\right)$
- $\exp(\beta)$  is the *per-exposure* reduction in the risk of infection

# Truncated mean proportional to Untruncated mean

- $$\begin{aligned} E(X) &= \sum_{x=0}^{\infty} xP(X = x) = \sum_{x=1}^{\infty} xP(X = x) \\ &= \sum_{x=1}^{\infty} xP(X = x) \frac{P(X > 0)}{P(X > 0)} \\ &= E(X | X > 0) P(X > 0) \end{aligned}$$

- Thus

$$E(X | X > 0) = \frac{E(X)}{P(X > 0)}$$

# Multiply

- Multiplication produces a product estimate

- $e^{\hat{\beta}} \frac{\bar{X}_1}{\bar{X}_0} \rightarrow \frac{P(X>0|Z=1)}{P(X>0|Z=0)} \frac{\frac{E(X|Z=1)}{P(X>0|Z=1)}}{\frac{E(X|Z=0)}{P(X>0|Z=1)}}$

$\bar{X}_Z$  mean number of virions on Z among infected (i.e.  $X>0$ )

# The Product Method Estimate of $\Delta$

- Multiplication produces a product estimate

- $e^{\hat{\beta}} \frac{\bar{X}_1}{\bar{X}_0} \rightarrow \frac{P(X>0|Z=1)}{P(X>0|Z=0)} \frac{E(X|Z=1)}{E(X|Z=0)} = \frac{E(X|Z=1)}{E(X|Z=0)} = \Delta$

$\bar{X}_Z$  mean number of virions on Z among infected (i.e.  $X>0$ )

- Truncated X data gets ratio of *untruncated*  $X^*$  means.
- X distribution unspecified
- Arbitrary intensity of exposure function  $\omega(t)$

# Horvitz-Thompson Estimator

- Population of  $N$  objects  $Y_1, \dots, Y_N$
- Sample the  $i$ th object with probability  $\pi_i$

$$\hat{\mu}_{HT} = \frac{1}{N} \sum_{i=1}^n \frac{Y_i}{\pi_i}$$

- Estimator is unbiased

$$\mathbb{E} \left[ \frac{1}{N} \sum_{i=1}^n \frac{Y_i}{\pi_i} \right] = \mathbb{E} \left[ \frac{1}{N} \sum_{i=1}^N I_i \frac{Y_i}{\pi_i} \right] = \frac{1}{N} \sum_{i=1}^N \cancel{E(I_i)} \frac{\cancel{E(Y_i)}}{\pi_i}$$

# Easy Asymptotics for Product Method

- $\log(\hat{\Delta}) = \log \left( e^{\hat{\beta}_{Cox}} \frac{\bar{X}_1}{\bar{X}_0} \right)$

$$\log \left( e^{\hat{\beta}_{Cox}} \frac{\bar{X}_1}{\bar{X}_0} \right) = \hat{\beta}_{Cox} + \log(\bar{X}_1) - \log(\bar{X}_0)$$

- Delta-method  $\log(\bar{X}_Z) \approx N \left( \log(\mu_Z), \frac{\sigma_Z^2}{I_Z \mu_Z^2} \right)$

- $\log(\hat{\Delta}) \sim N(\log(\Delta), \widehat{\text{var}}(\hat{\beta}_{Cox}) + \frac{S_1^2}{I_1 \bar{X}_1^2} + \frac{S_0^2}{I_0 \bar{X}_0^2})$

# Product Method w/ Exponential Dbn

- Product estimate under exponential time to infection

$$\hat{\Delta} = \left( \frac{I_1}{T_1} / \frac{I_0}{T_0} \right) \frac{\bar{X}_1}{\bar{X}_0} = \left( \frac{X_{1+}}{T_1} / \frac{X_{0+}}{T_0} \right)$$

where  $I_Z$  total number of infections on Z

$T_Z$  total follow-up time on Z

$X_{Z+}$  total number of virions on Z

$\bar{X}_Z$  mean number of virions on Z

# Monkey Studies

- 10 on placebo: 1, 2, ... ,10

$$\widehat{\mu} = \frac{8 + 0+0+2 + \dots + 0+0+7}{1+3+ \dots 3} = \frac{179}{57} = \frac{X_{0+}}{N_0}$$

- 10 on vaccine 1, 2, ... ,10

$$\widehat{\mu}_{\Delta} = \frac{0+0+4 + 0+ \dots +0 + \dots + 0+1}{3+8+ \dots 2} = \frac{75}{113} = \frac{X_{1+}}{N_1}$$

- $\widehat{\Delta} = \left( \frac{X_{1+}}{N_1} / \frac{X_{0+}}{N_0} \right)$

# Product Method Analogous to Estimator from Monkey Studies

- Product estimate under exponential time to infection

$$\hat{\Delta} = \left( \frac{I_1}{T_1} / \frac{I_0}{T_0} \right) \frac{\bar{X}_1}{\bar{X}_0} = \left( \frac{X_{1+}}{\cancel{T_1}} / \frac{X_{0+}}{\cancel{T_0}} \right)$$

where  $N_Z$  total number of challenges on Z

$N_1$

$N_0$

*Product method replaces total number of challenges with total time at risk*

# Concerns

- Same  $\omega(t)$  for all
  - Some may have more frequent exposures
- One dbn of  $X$  for all in same group
  - Some individuals have poorer mucosal barriers...more virions get in.
- Measured covariates can address concerns

# Incorporating Covariates

- Covariates for time to exposure:  $W^E$ 
  - e.g. I(>3 sexual partners last month at baseline)
  - $h(t) = h_0(t) \exp( Z \beta + \theta W^E) \dots$  *product method*
- Covariates that impact  $X$ :  $W^X$ 
  - e.g. damaged cells, immune response to vaccine, closeness of infecting virus to vaccine insert
  - Natural to have  $E(X^*) = e^{\varphi_0 + \varphi_1 Z + \varphi_2 W + \varphi_2 WZ}$

# X-weighted Cox Regression

- X-weighted Cox score equation

$$\sum_{i=1}^n \int_0^{\infty} X_i \left\{ Z_i - \frac{\sum_{i=1}^n Z_i \Delta^{Z_i} I(Y_i \geq t)}{\sum_{i=1}^n \Delta^{Z_i} I(Y_i \geq t)} \right\} dN_i(t)$$

- *Virtually identical to product method*
- Above a functional of empirical processes.  
Asymptotics for  $\hat{\Delta}$  from functional delta method.
- . . . but generalizes to handle both  $W^E$  &  $W^X$ .

# Example HIV

- VAX003 randomized 2,546 Thai IDUs to HIV vaccine AIDSVAXB/E or placebo
  - 211 infections reported 105:106 V:P
- $VE_H = 1 - e^{-.00245} = .002$

# Product Method Estimate of $VE_v$

- 39 volunteers, # founder viruses determined
  - High risk (IDU) volunteers
  - Infection detection within 100 days
- Mean X in vaccine 1.33, placebo 1.67

$$VE_v = 1 - e^{-0.00245 \frac{1.33}{1.67}} = .21$$

95% delta-method CI( -.33, .52)

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First Results of Phase 3 Trial of RTS,S/AS01 Malaria Vaccine  
in African Children

The RTS,S Clinical Trials Partnership\*

# Malaria Trial

- 15,460 children randomized to malaria vaccine versus control. Focus on 5-17 months
- Primary Analysis
  - Time to clinical malaria  
 $VE_H = .542$  95% CI (.503,.578)
- Secondary Analysis
  - Number of infecting parasites following exposure  
 $VE_V = .612$  95% CI (.574,.612)

# Undercounting

- Two nearly identical infecting pathogens may be counted as a single infecting pathogen

Amplified

– e.g. NRNVDENANANSAVKNNNNEEP

– e.g. NRNVDENANANSAVKNNNEEP

- Truly 2 founders but we only count 1
- Can show that  $VE_v$  is *conservative* if the undercounting process is the same in the vaccine and placebo groups.

# Summary

- Discussed a way to incorporate Founder virus information into vaccine trials

$$- VE_V = 1 - \frac{E(X|Z=1)}{E(X|Z=0)} = 1 - \Delta$$

- Ratio of **untruncated** means from truncated data.
  - Product: simple, minimal assumptions
  - Martingale: good for covariates that impact X
- $VE_V$  can complement not supplant  $VE_H$
- Extensions and connections are interesting

# Incorporating Infecting Pathogen Counts In Sieve Analysis

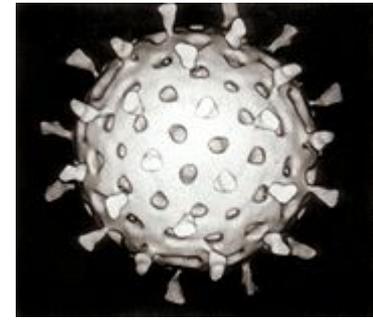
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# Pathogens are diverse

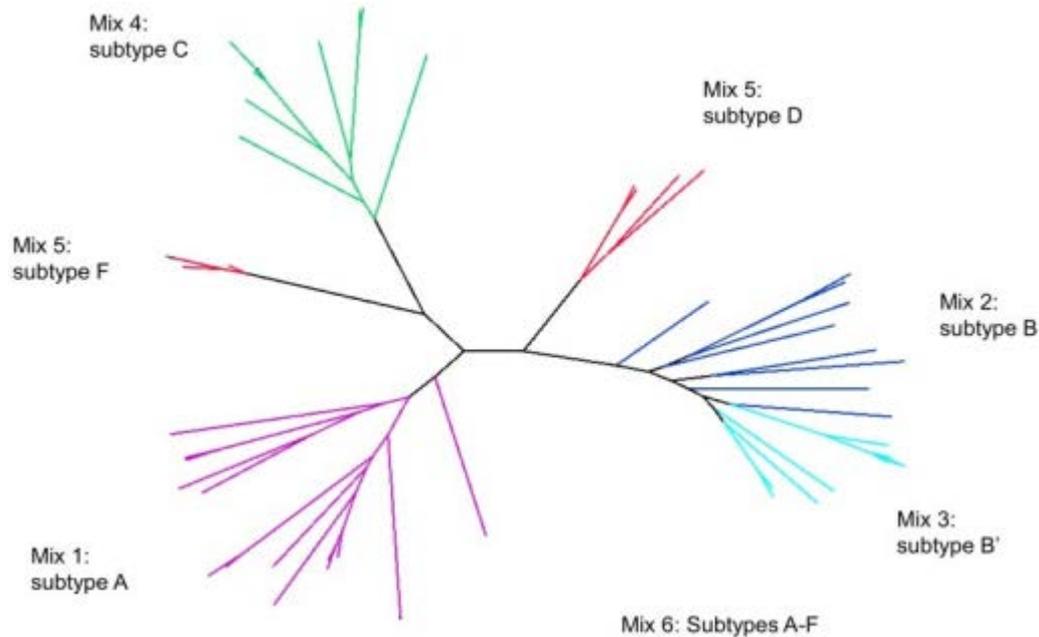
- A pathogen species can have distinct strains
  - Serotypes ---- different surface antigens
  - Genetics ---- different DNA or RNA
- Vaccines may protect differentially against the different strains
  - Vaccine induced antibodies may protect well against some strains but not others.
  - Vaccines may induce CD4 & CD8 T-cells with differential protection
    - HIV, malaria, Ebola

# Pathogens are diverse

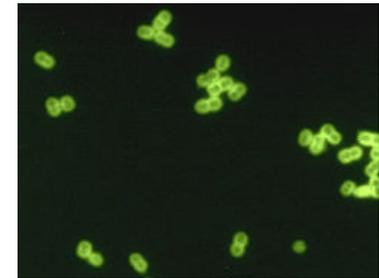


Rotavirus  
5 major serotypes

## HIV multiple genotypes



## *Streptococcus pneumoniae*



90+ serotypes

Bowles et al PLoS One 2014

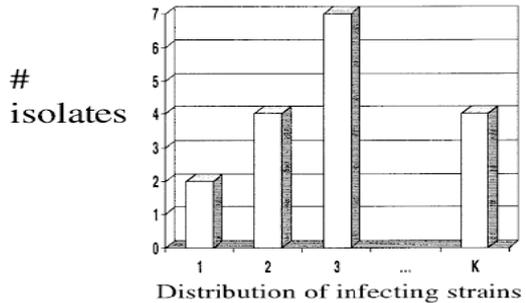
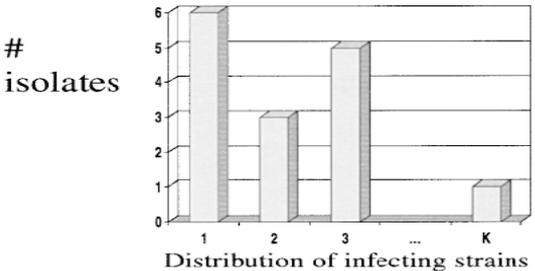
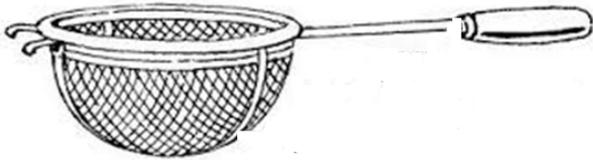


THE  
SIEVE

Pathogen strains 1,2,...,K circulating in the geographic region of the vaccine trial

Unvaccinated comparison group      Vaccinated group

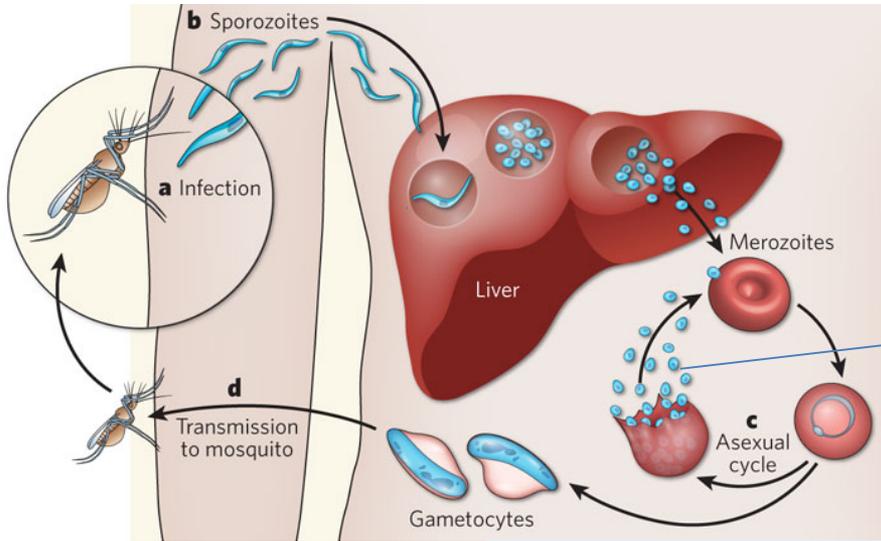
natural barrier to clinically significant infection



	1	2	3	•	•	•	K
unvaccinated	6	3	5				1
vaccinated	2	4	7				4

2 x K contingency table of infecting strains

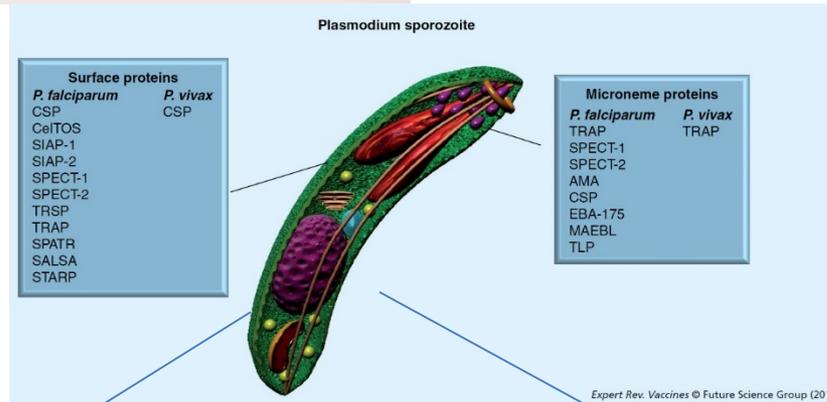
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Malaria life cycle

Sample blood stage parasites  
 PCR amplification of CS region  
 Then Next Gen sequencing.

NRNAN ... EW  
 NRNEN ... TW



290                      300                      310                      320                      330

|    \_ \_ \_ \_ \_ |    \_ \_ \_ \_ \_ |    \_ \_ \_ \_ \_ |    \_ \_ \_ \_ \_ |    \_ \_ \_ \_ \_ |

NRNVDENANANS AVKNNNNEEPSDKHIKEYLNKIQNSLSTEW

AA sequence of  
 Parasite used in  
 RTS,S/AS01 Vaccine



**Table 1**

*Partial amino acid sequence of the RTS,S vaccine immunogen along with an illustration of 4 infecting parasites that could have been recovered from an infected volunteer in a vaccine trial along with the position-wise most popular sequence, i.e. the consensus sequence.*

	Position					match	match	total		
	290	300	310	320	330	at	in	mismatches		
VACCINE	NRNV	DENANANSA	VKNNNNNEE	PSDKHIKEYL	NKIQNSL	STEW	320	293-302	290-331	
Parasite 1	...	G.....	W.....	.....	D.....	G..	G...	0	0	5
Parasite 2	E.....	.....	K.....	.....	.....	.....	K..	1	1	3
Parasite 3	E.....	.....	.....	.....	D.....	.....	.....	0	1	2
Parasite 4	E.....	.....	.....	F.....	D.....	.....	.....	0	1	3
CONSENSUS	E.....	.....	.....	.....	D.....	.....	.....	0	1	2

$X_1, X_2 = (\# \text{ match at 320}, \# \text{ mismatch at 320}) = (1, 3)$

**Table 1**

*Partial amino acid sequence of the RTS,S vaccine immunogen along with an illustration of 4 infecting parasites that could have been recovered from an infected volunteer in a vaccine trial along with the position-wise most popular sequence, i.e. the consensus sequence.*

	Position					match	match	total	
	290	300	310	320	330	at	in	mismatches	
VACCINE	NRNV	DENANAN	SAVKNNN	NNEE	PSDKHI	KEYLNK	IQNSL	STEW	320 293-302 290-331
Parasite 1	...	G.....	W.....	.....	D....	G..	G...	0 0 5	
Parasite 2	E.....	.....	K.....	.....	.....	.....	K..	1 1 3	
Parasite 3	E.....	.....	.....	.....	D.....	.....	.....	0 1 2	
Parasite 4	E.....	.....	.....	F.....	D.....	.....	.....	0 1 3	
CONSENSUS	E.....	.....	.....	.....	D.....	.....	.....	0 1 2	

$X_a$  = # of infecting pathogens with 'a' total mismatches in 290-331

$$X_0, X_1, X_2, X_3, X_4, X_5, \dots = (0, 0, 1, 2, 0, 1, 0, 0, 0, 0, 0, \dots)$$

**Table 1**

*Partial amino acid sequence of the RTS,S vaccine immunogen along with an illustration of 4 infecting parasites that could have been recovered from an infected volunteer in a vaccine trial along with the position-wise most popular sequence, i.e. the consensus sequence.*

	Position					DV10 Region		
	290	300	310	320	330	match at	match in	total mismatches
VACCINE	NRNVDENANANSAVKNNNNEEPSDKHIKEYLNKIQNSLSTEW					320	293-302	290-331
Parasite 1	...G.....W.....			...D....G..G...		0	0	5
Parasite 2	E.....K.....			.....K..		1	1	3
Parasite 3	E.....			...D.....		0	1	2
Parasite 4	E.....		F.....	...D.....		0	1	3
CONSENSUS	E.....			...D.....		0	1	2

DV10 Region

$$X_1 X_2 = (\# \text{ match DV10 region, } \# \text{ mismatch DV10 region}) = (3, 1)$$

# New type of data

- Before, used the consensus strain
  - $Y_a = 1$  if infected by `strain` a, else 0
  - e.g.  $(Y_1, Y_2) = (1,0)$  or  $(0,1)$
- Now, get # infecting pathogens of each type
  - $X_a =$  number of `strains` of type a
  - e.g.  $(X_1, X_2) = (2,0)$  or  $(3,1)$

# Analysis of New Data

- Can we *shoehorn* this data with multiple infecting strains into existing methods for a single infecting strain?
- Can we *develop* new methods that explicitly account for multiple infecting strains?

# Shoehorn: Within Cluster Resampling aka Multiple Outputation

- 1) Randomly pick a single pathogen for each infected person
  - Fred 4 unique strains: 1 match 3 mismatch
  - Pick a strain at random e.g. mismatch
- 2) Run a standard sieve analysis
  - $VE(\text{match}) = .65$       $VE(\text{mismatch}) = .51$
- 3) Repeat many many many times and average.

# Within Cluster Resampling Schematic

Resample #	Dataset	VE(match)	VE(mismatch)
1	D <sub>1</sub>	→ 65.1	42.1
2	D <sub>2</sub>	→ 51.2	53.4
3	D <sub>3</sub>	→ 71.3	38.1
4	D <sub>4</sub>	→ 61.3	47.8
9999	D <sub>9999</sub>	→ 52.1	38.9
10000	D <sub>10000</sub>	→ 63.2	54.1
<b>AVERAGE</b>		<b>63.1</b>	<b>53.9</b>

There is an easy way to get a p-value for within cluster resampling.

# Easy Inference With WCR

- Each resample gives estimates of the parameter and its variance

–  $P_1 V_1, P_2 V_2, \dots, P_{10000} V_{10000}$

- Calculate 3 Statistics

– Average the  $P_i$   $\longrightarrow \bar{P}$

– Average the  $V_i$   $\longrightarrow \bar{V}$

– Sample variance of the  $P_i$   $\longrightarrow S^2$

$\frac{\bar{P}}{\sqrt{\bar{V} - S^2}}$  is standard normal on the null

# Easy Inference With WCR

- Each resample gives estimates of the parameter and its variance

$$- P_1 V_1, P_2 V_2, \dots, P_{10000} V_{10000}$$

- Calculate 3 Statistics

$$- \text{Average the } P_i, \quad \longrightarrow \quad \bar{P}$$

$$- \text{Average the } V_i, \quad \longrightarrow \quad \bar{V}$$

$$- \text{Sample variance of the } P_i, \quad \longrightarrow \quad S^2$$

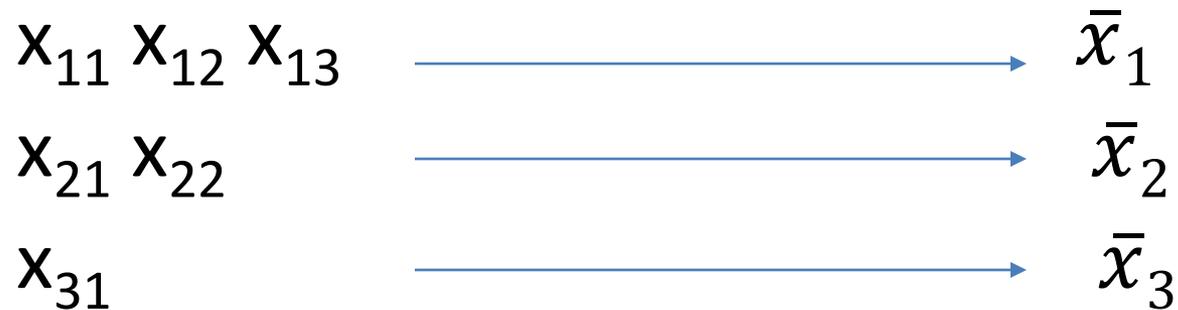
$$\frac{\bar{P}}{\sqrt{\bar{V} - S^2}} \text{ is standard normal on the null}$$

# WCR

- WCR can be used whenever you have a statistical procedure  $P$  that requires 1 outcome per person, but you have multiple outcomes.
- Can be used in lieu of GEE
  - Like exchangeable with  $\rho \rightarrow 1$ 
    - One person, one vote
  - Opposite of working independence  $\rho=0$ 
    - One pathogen, one vote

# WCR = t-test on cluster means

- Test means of two groups X vs Y



# Sieving at DV10 Region

DV10 Region	RTS,S Vaccine # Events	Control Vaccine (% Incidence)	VE
Match	90 (2.5)	86 (5.6)	63.1
Mismatch	1091 (30.8)	822 (53.7)	53.9

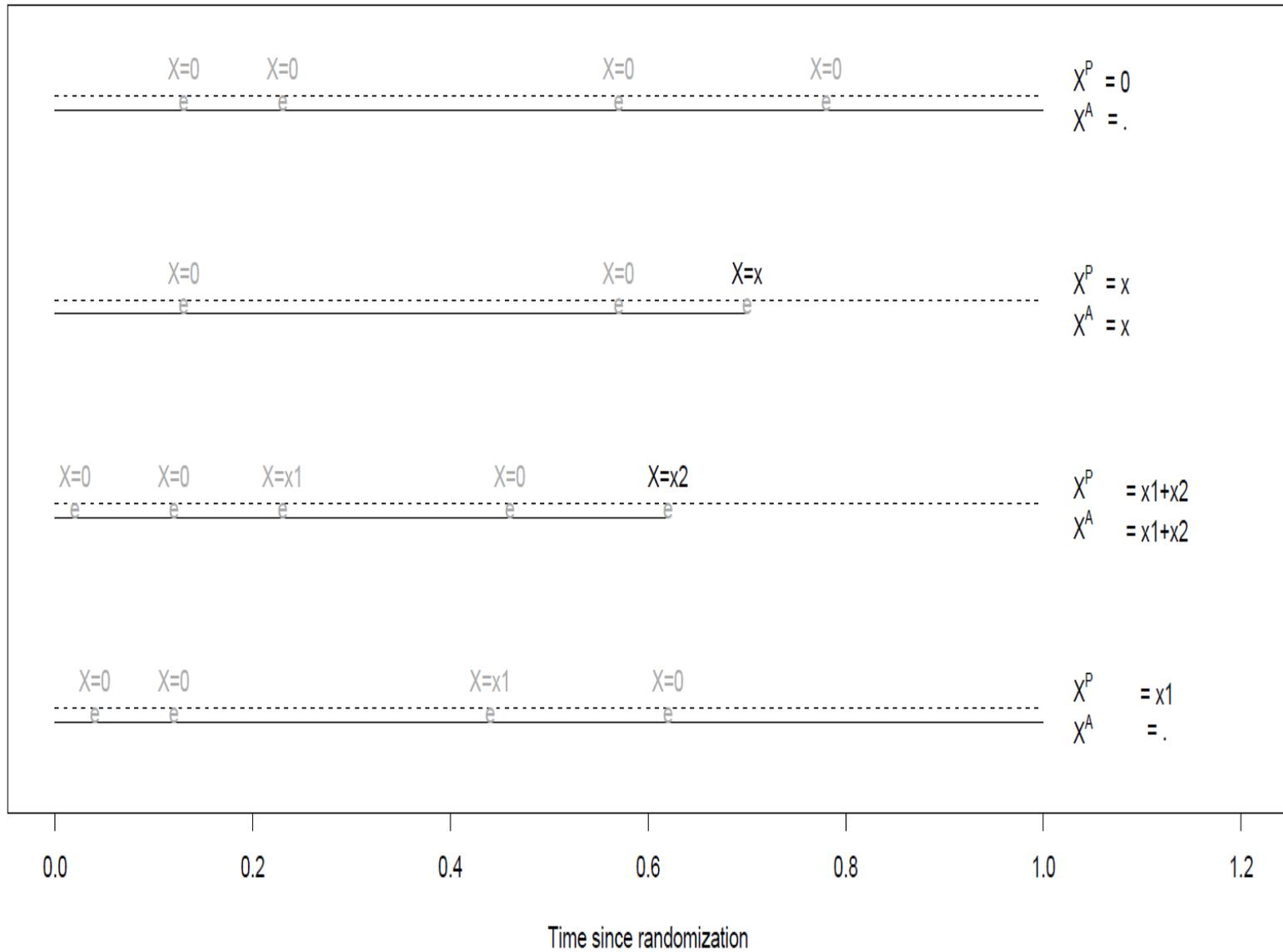
Averaged over 1000s of synthetic data sets with 1 Strain per person

- Test of equal VE has  $p=.04$
- Some evidence of sieving.

# New Methods

- Let's develop new methods that explicitly use the counts
- Passive surveillance
  - Get  $(X_1, X_2) = (0,0)$  or  $(3,1)$  or  $(2,0)$  at end of study
- Active surveillance
  - Get time of infection detection and
  - Get  $(X_1, X_2) = \cancel{(0,0)}$  or  $(3,1)$  or  $(2,0)$

# Passive and active surveillance



# Passive Surveillance: Modern Data & Analysis

Group	$X_1$	$X_2$
Vaccine	1	0
Vaccine	0	0
Placebo	3	0
Placebo	2	4
Vaccine	0	2
Placebo	0	0

**Placebo group** 5 mismatched out of 9  
**Vaccine group** 1 mismatched out of 3

# Passive Surveillance

## Single Pathogen Data & Analysis

Group	$X_1$	$X_2$
Vaccine	1	0
Vaccine	0	0
Placebo	1	0
Placebo	0	1
Vaccine	0	1
Placebo	0	0

**Placebo group** 1 mismatched out of 2  
**Vaccine group** 1 mismatched out of 2

# Passive Surveillance: Counts

- Assume *bivariate negative binomial*
  - $X_{si}$  Poisson  $\exp\{b_i + B_0 + B_1 Z + B_2 I(s=1) + B_3 Z I(s=1)\}$
  - $s=1,2$   $i=1,\dots,n$  subjects  $\exp(b_i) \sim \text{Gamma}(\mu, V)$
  - $Z$  = vaccine indicator
- Condition.  $X_0 | X_0 + X_1 = N$  follows

$$\text{Binomial}\left(N, \frac{e^{B_1}}{1 + e^{B_1}}\right) \quad \text{in placebo}$$

$$\text{Binomial}\left(N, \frac{e^{B_1 + B_3}}{1 + e^{B_1 + B_3}}\right) \quad \text{in vaccine}$$

Sieve effect if  $B_3$  is nonzero

# Passive Surveillance: Single Pathogen

- Identify most popular strain
  - $W=1$  if  $X_0 > X_1$ , or if  $X_0 = X_1$  flip a coin
- Then  $W$  follows

Binomial(1,  $\frac{e^{B_1}}{1+e^{B_1}}$ ) in placebo

Binomial(1,  $\frac{e^{B_1+B_3}}{1+e^{B_1+B_3}}$ ) in vaccine

Sieve effect if  $B_3$  is nonzero

# Simulation

- $X \sim$  bivariate negative binomial
  - $\exp(b_i) \sim \text{Gamma}(.5, v)$   $v=0,1,2$
- Counts: Binomial (= GEE-I), WCR
- Infection: Bernoulli

**SIMULATION VARIANCE OF Sieve effect B3**

V	Binomial (new)	Bernoulli (old)	WCR (shoehorn)	Binomial/ Bernoulli	Binomial/ WCR
0	.066	.139	.083	2.1	1.3
1	.072	.170	.109	2.4	1.5
2	.047	.201	.090	4.2	1.9

# Sweet but

- Simulations were based on an idealized model
  - Nice bivariate negative binomial model
  - Nice leaky leaky mechanism
- Can show if vaccine impacts  $P(X>0)$  but no effect on  $X>0$ , (i.e. non-leaky leaky) WCR is better
  - *Mechanism of protection important*

# Active Surveillance

- Let's consider field trials
  - Time to infection as endpoint
  - Count  $X_1, X_2$  once infected
- Only observe  $X_1, X_2 \mid X_1+X_2 > 0$
- Do natural modification of the product method

# The Product Method Estimate of $\Delta$

- Multiplication produces a product estimate
- $e^{\hat{\beta}} \frac{\overline{X_{1s}}}{\overline{X_{0s}}} \rightarrow \frac{E(X_s|Z=1)}{E(X_s|Z=0)} = \Delta_s$
- $\overline{X}_{Zs}$  mean number of strain  $s$  virions on  $Z$   
among infected (i.e.  $X_{Z1} + X_{Z2} > 0$ )
- Truncated  $X$  data gets ratio of *untruncated*  $X^*$  means.
- $X$  distribution unspecified
- Arbitrary intensity of exposure function  $\omega(t)$

# Sieving Effect on Counts

- Test equality of ratio of *unconditional* means

$$- \frac{E(X_1|Z=1)}{E(X_1|Z=0)} = \Delta_1 = \Delta_2 = \frac{E(X_2|Z=1)}{E(X_2|Z=0)}$$

- Equivalent to testing ratio of 'truncated' means.

$$\cancel{e^{\beta} \frac{\mu_{11}^t}{\mu_{01}^t}} = \cancel{e^{\beta} \frac{\mu_{12}^t}{\mu_{02}^t}} \quad \mu_{zS}^t = E(X_{zS} | X_{z1} + X_{z2} > 0)$$

# Sieving Effect on Infections

- Let  $Y_s = I(X_s > 0)$
- Test equality of ratio of *unconditional* means

$$\frac{E(Y_1|Z=1)}{E(Y_1|Z=0)} = \frac{E(Y_2|Z=1)}{E(Y_2|Z=0)}$$

- Equivalent to testing ratio of 'truncated' means.

~~$$e^\beta \frac{\mu_{11}^t}{\mu_{01}^t} = e^\beta \frac{\mu_{12}^t}{\mu_{02}^t}$$~~

$$\mu_{zS}^t = E(Y_{zS} | Y_{z1} + Y_{z2} > 0)$$

# Simulation Setup

- Exponential gap times to exposures
- Bivariate negative binomial at each exposure.
  - Infected if  $X_1+X_2 > 0$
- Evaluate product estimate
- Compare to WCR where we pick a pathogen at random

# Results

	WCR	VE on <i>Infection</i>	VE = 1- P(X>0 Z=1)/P(X>0 Z=0)		
Var	Mean(X)	% infected	Ln(1-VE <sub>1</sub> )	Ln(1-VE <sub>2</sub> )	Ln(1-VE <sub>1</sub> )/(1-VE <sub>2</sub> )
1	9.4	.29	-0.512	-1.030	.514
			(.042)	(.089)	(.100)
0	2.1	.30	-0.449	-0.981	.532
			(.036)	(.094)	(.106)

Product Estimate VE on # *pathogens* VE = 1- E(X|Z=1)/E(X|Z=0)

Var	Mean(X)	% infected	Ln(1-VE <sub>1</sub> )	Ln(1-VE <sub>2</sub> )	Ln(1-VE <sub>1</sub> )/(1-VE <sub>2</sub> )
1	9.4	.29	-1.660	-2.170	.508
			(.897)	(.932)	(.042)
0	2.1	.30	-1.550	-2.030	.527
			(.043)	(.091)	(.084)

New method can be more powerful

# Weighted Estimating Equations

- Covariates  $W$  for active surveillance
  - Can incorporate risk factors for exposure
- Can allow pathogen distribution  $F(X_1, X_2 | Z)$  to change over time
- Can allow sieve effect to vary with  $W$ 
  - Vaccine blocks '1' in older people & blocks '2' in younger people
- Details forthcoming . . . someday

# Beyond Mismatch

Table 1

*Partial amino acid sequence of the RTS,S vaccine immunogen along with an illustration of 4 infecting parasites that could have been recovered from an infected volunteer in a vaccine trial along with the position-wise most popular sequence, i.e. the consensus sequence.*

	Position					match	match	total	
	290	300	310	320	330	at	in	mismatches	
VACCINE	NRNV	DENANANS	AVKNNN	NEEPSDKHI	KEYLNKIQNSL	STEW	320	293-302	290-331
Parasite 1	...G.....	W.....	.....	D....G..G...	.....	0	0	5	
Parasite 2	E.....	.....K.....	.....	.....	.....K..	1	1	3	
Parasite 3	E.....	.....	.....	D.....	.....	0	1	2	
Parasite 4	E.....	.....	.....F.....	D.....	.....	0	1	3	
CONSENSUS	E.....	.....	.....	D.....	.....	0	1	2	

$X_a$  = # of infecting pathogens with 'a' total mismatches in 290-331

$X_0, X_1, X_2, X_3, X_4, X_5, \dots = (0, 0, 1, 2, 0, 1, 0, 0, 0)$   
 0 1 2 3 4 5 ..... # of mismatches

# Beyond Mismatch

- Consider the region 290-331. Assume

$$X_{z_s} \sim \text{Poisson}\{ \exp(A_s + Z^*(B_0 + B_1 s)) \}$$

# mismatches	Vaccine Rate	Placebo Rate	Count
0	$\exp(A_0 + B_0 + B_1 * 0)$	$\exp(A_0)$	7
1	$\exp(A_1 + B_0 + B_1 * 1)$	$\exp(A_1)$	3
2	$\exp(A_2 + B_0 + B_1 * 2)$	$\exp(A_2)$	0
3	$\exp(A_3 + B_0 + B_1 * 3)$	$\exp(A_3)$	1
.	.	.	.
.	.	.	.
.	.	.	.
43	$\exp(A_{43} + B_0 + B_1 * 43)$	$\exp(A_{43})$	0
Count	30	55	

Sieve effect



# Beyond Mismatch

- For a given subject, conditional on  $Z$  and the number of infecting pathogens,  $X_+$

$$X_1 X_2 \dots X_{43} \sim \text{Multinomial}(X_+ p_1 p_2 \dots p_{43})$$

$$p_s = \exp(A s + Z * (B_0 + B_1 s))$$

$$p_s = \frac{\exp(A s + Z * (B_0 + B_1 s))}{\sum_{s=1}^{43} \exp(A s + Z * (B_0 + B_1 s))}$$

- Analogous to usual sieve methods with  $X_+ = 1$
- May be hard to estimate with so many parameters
  - Redefine so there are fewer parameters
  - or

# Beyond Mismatch

- Model has 43 nuisance **parameters**
  - Want to allow arbitrary dbn of WT viruses
- Under independence of subjects can condition on rows to eliminate **them**

# mismatches	Vaccine Rate	Placebo Rate	Count	Pr(Infection in vaccine   infection)
0	$\exp(A_0 + B_0 + B_1 * 0)$	$\exp(A_0)$	7	$\exp(B_0 + B_1 * 0) / (1 + \exp(B_0 + B_1 * 0))$
1	$\exp(A_1 + B_0 + B_1 * 1)$	$\exp(A_1)$	3	$\exp(B_0 + B_1 * 1) / (1 + \exp(B_0 + B_1 * 1))$
2	$\exp(A_2 + B_0 + B_1 * 2)$	$\exp(A_2)$	0	$\exp(B_0 + B_1 * 2) / (1 + \exp(B_0 + B_1 * 2))$
3	$\exp(A_3 + B_0 + B_1 * 3)$	$\exp(A_3)$	1	$\exp(B_0 + B_1 * 3) / (1 + \exp(B_0 + B_1 * 3))$
.	.	.	.	.
.	.	.	.	.
.	.	.	.	.
43	$\exp(A_{43} + B_0 + B_1 * 43)$	$\exp(A_{43})$	0	$\exp(B_0 + B_1 * 43) / (1 + \exp(B_0 + B_1 * 43))$
Count	30	55		

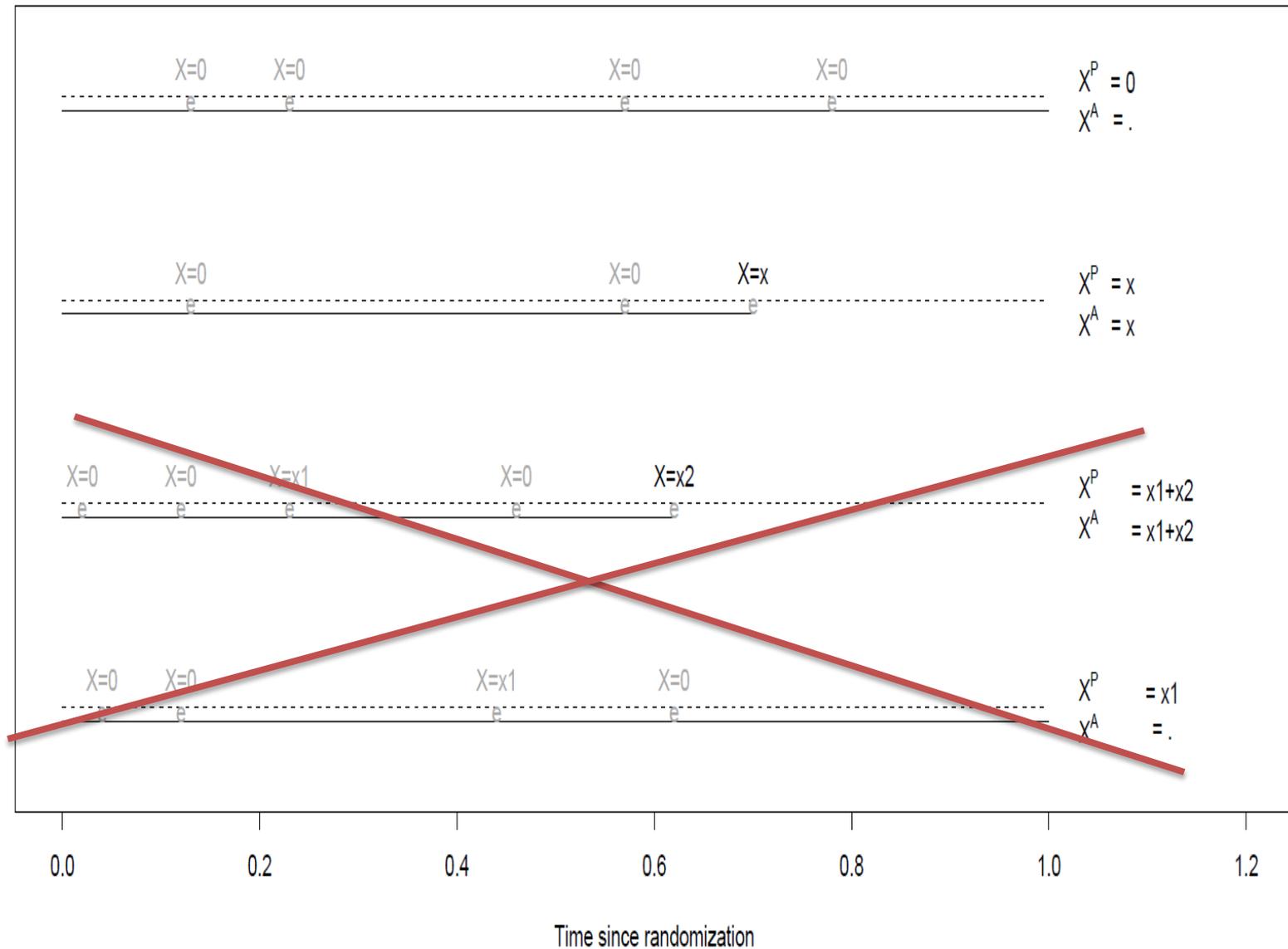
# Beyond Mismatch

- Likelihood based on product of binomials (N,Y)

N	Pr(Infection in vaccine   infection)	Y = # vaccine
7	$\exp(B_0+B_1*0)/(1+\exp(B_0+B_1*0))$	3
3	$\exp(B_0+B_1*1)/(1+\exp(B_0+B_1*1))$	1
0	$\exp(B_0+B_1*2)/(1+\exp(B_0+B_1*2))$	0
1	$\exp(B_0+B_1*3)/(1+\exp(B_0+B_1*3))$	0
.	.	
.	.	
.	.	
0	$\exp(B_0+B_1*42)/(1+\exp(B_0+B_1*42))$	0

- May be able to relax independence assumption with GEE for correlated binomial data
- Analogous results obtains for active surveillance

# Non-recurrent disease (e.g. HIV)



# Sieve Parameter

- *per exposure* sieve effect for untruncated data

$$\theta_{a,a'} = \frac{E(X_a|Z = 1)/E(X_a|Z = 0)}{E(X_{a'}|Z = 1)/E(X_{a'}|Z = 0)}$$

- Using the contingency table, we estimate ratios based on available data
  - At end of follow-up (passive)
  - At the time of infection (active)
  - *Neither are at time of exposure*

# Sieve Parameter

- Define the sieve parameters for active & passive surveillance

$$\frac{E(X_a^P|Z = 1)/E(X_a^P|Z = 0)}{E(X_{a'}^P|Z = 1)/E(X_{a'}^P|Z = 0)} \quad \frac{E(X_a^A|Z = 1)/E(X_a^A|Z = 0)}{E(X_{a'}^A|Z = 1)/E(X_{a'}^A|Z = 0)}$$

- Can show the *per-exposure* ratio of means  $\theta_{a,a'}$  equals each of the above ratios
- Analogous to work by Gilbert

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