

# EMERGENCE AND EVOLUTION OF THE SARS-CoV-2 PANDEMIC

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ETE team, MIVEGEC, CNRS, IRD, Université de Montpellier  
[covid-ete.ouvaton.org](https://covid-ete.ouvaton.org)

XXXIe Congrès National de la Société Française d'Hygiène Hospitalière, 10 Juin 2021



# DISCLAIMER & ACKNOWLEDGMENTS

- I am a research director at the CNRS in epidemiology & evolution.
- I do not own shares in any company and did not receive any personal money for this work.
- The ETE team is composed of Thomas Bénéteau, Corentin Boennec, Marc Choisy, Gonché Danesh, Ramsès Djidjou-Demasse, Baptiste Elie, Yannis Michalakis, Bastien Reyné, Quentin Richard, Christian Selinger, Mircea T. Sofonea
- CHU Montpellier, CERBA laboratory and the SFM shared data and expertise on RT-PCRs.
- Santé Publique France and the Agences Régionales de Santé compiled and shared data.
- GISAID participants shared sequence data.
- The iTrop cluster from IRD Montpellier (<http://bioinfo.ird.fr>) and France Bioinformatique host our applications.
- We received 120k€ from the Région Occitanie (ANR PhyEpi).



# FRENCH RESEARCH IS DROWNING...

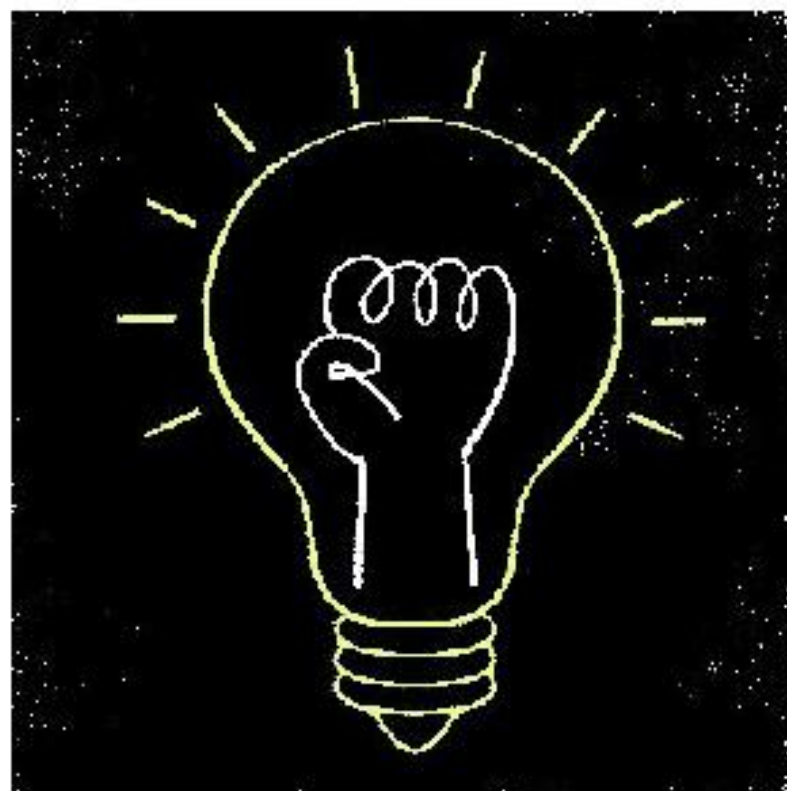
LES AVIS DU CESE



Avis du CESE sur la programmation  
budgétaire du projet de loi  
de programmation pluriannuelle  
de la recherche

Sylviane Lejeune

128 10 100 2024



for detailed analyses, see [www.lecese.fr](http://www.lecese.fr)

# EMERGENCE OF INFECTIOUS DISEASES

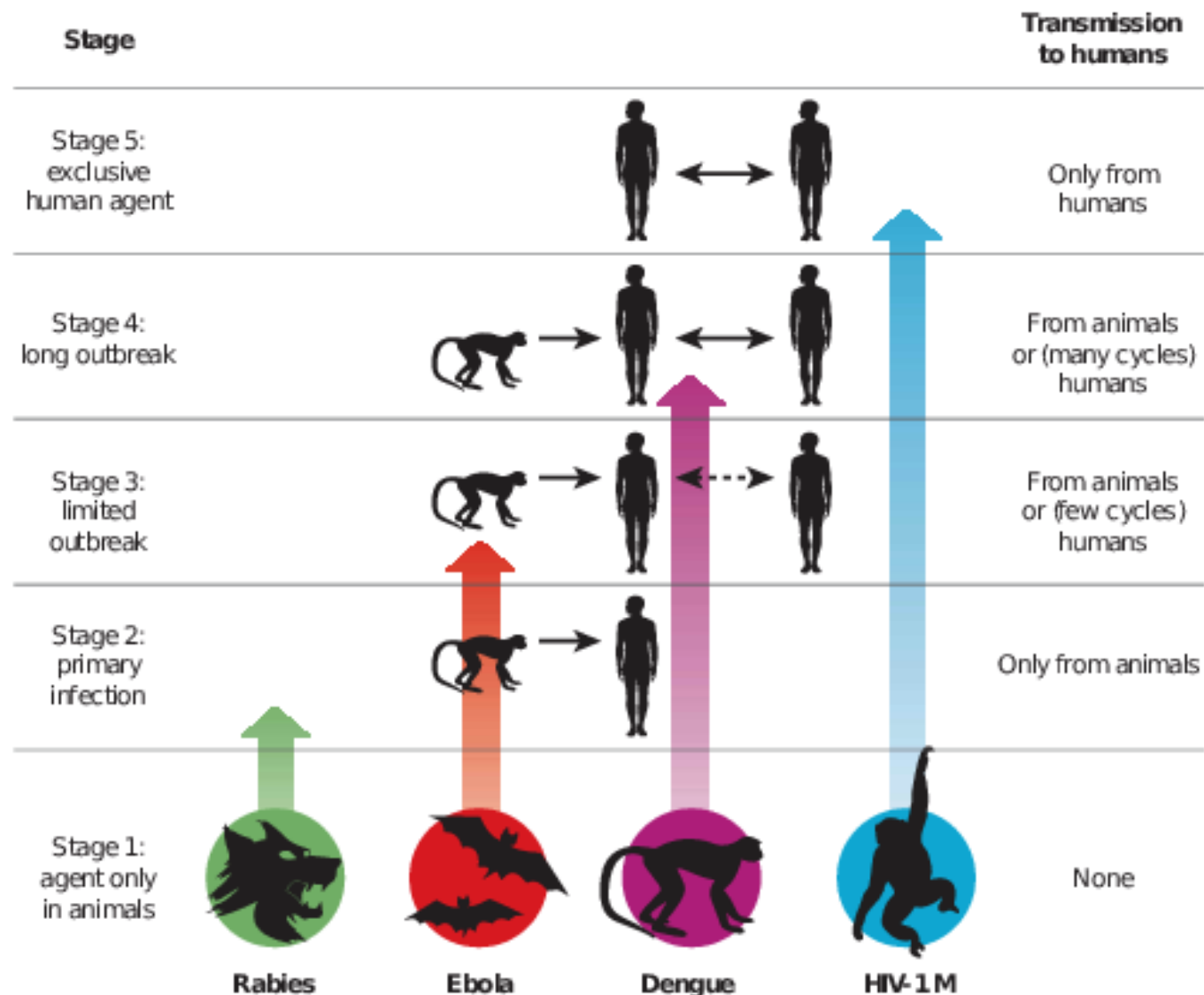
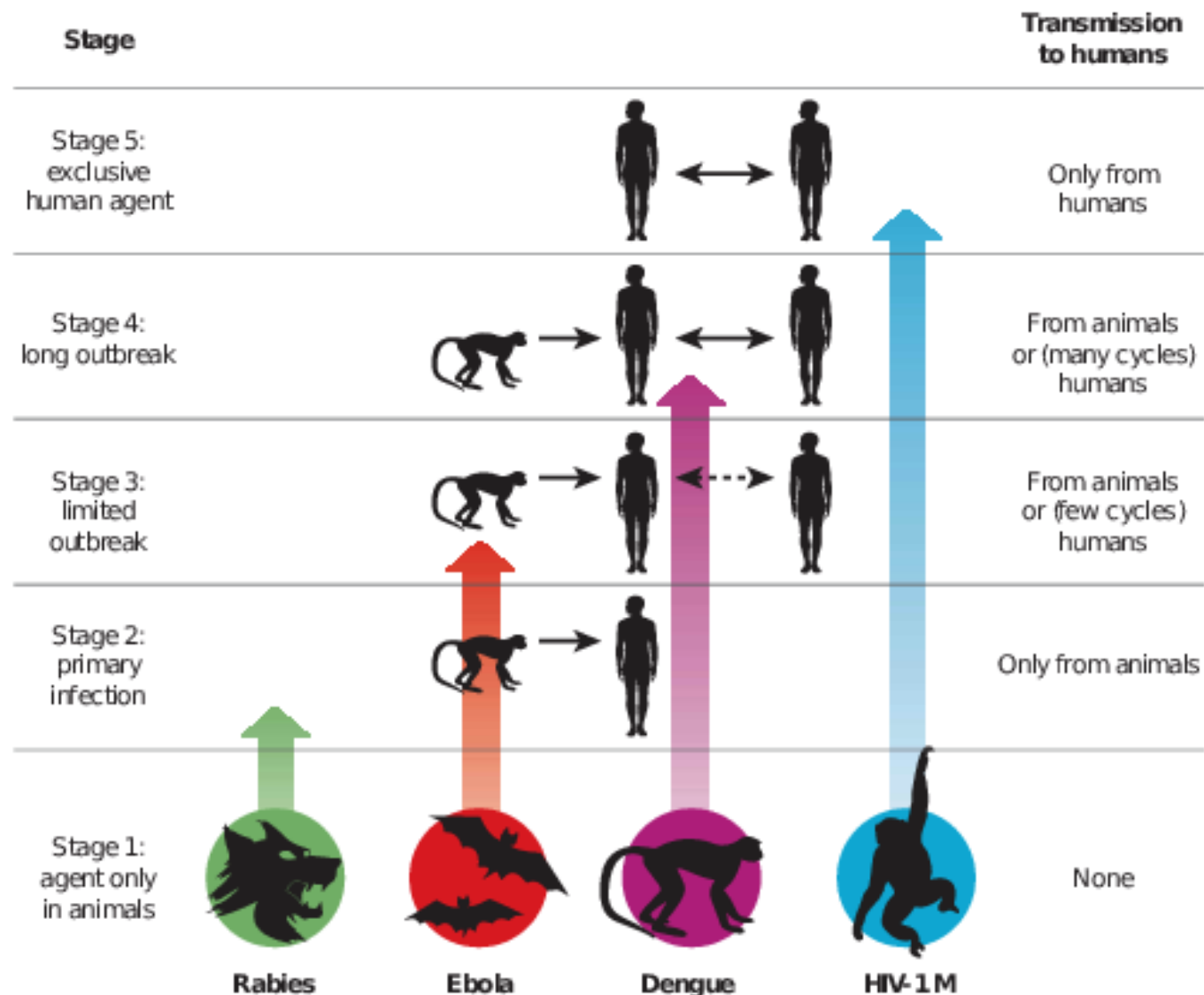


figure from Wolfe *et alii* (2007, *Nature*)

# EMERGENCE OF INFECTIOUS DISEASES



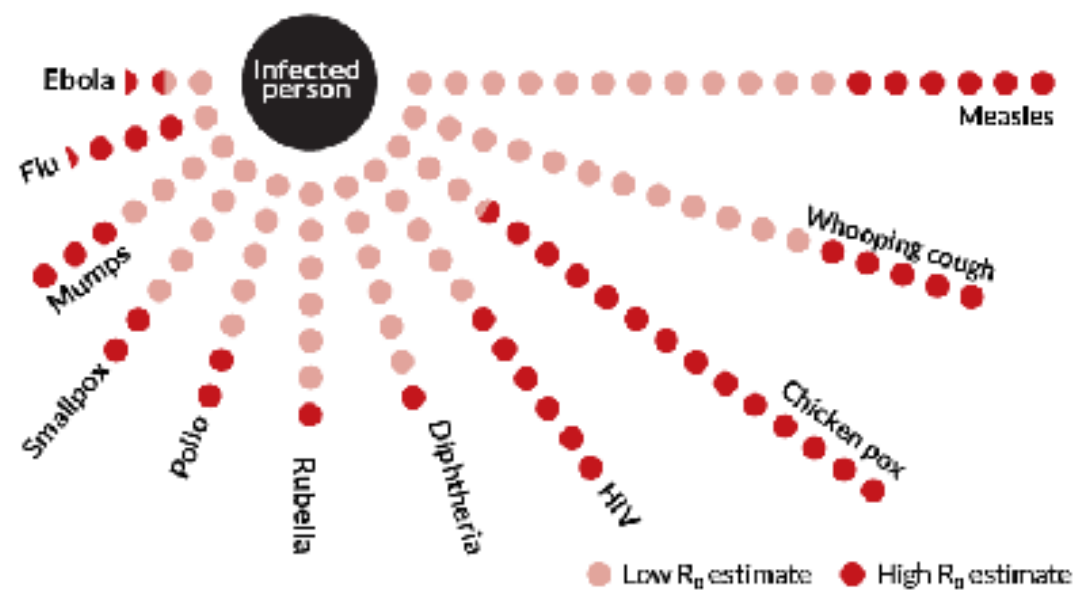
Risk factors such as:

- contacts between humans and wild animals
- contacts between cattle and wild animals
- wild landscape fragmentation
- individual and goods movements
- poor public health systems

figure from Wolfe *et alii* (2007, *Nature*)

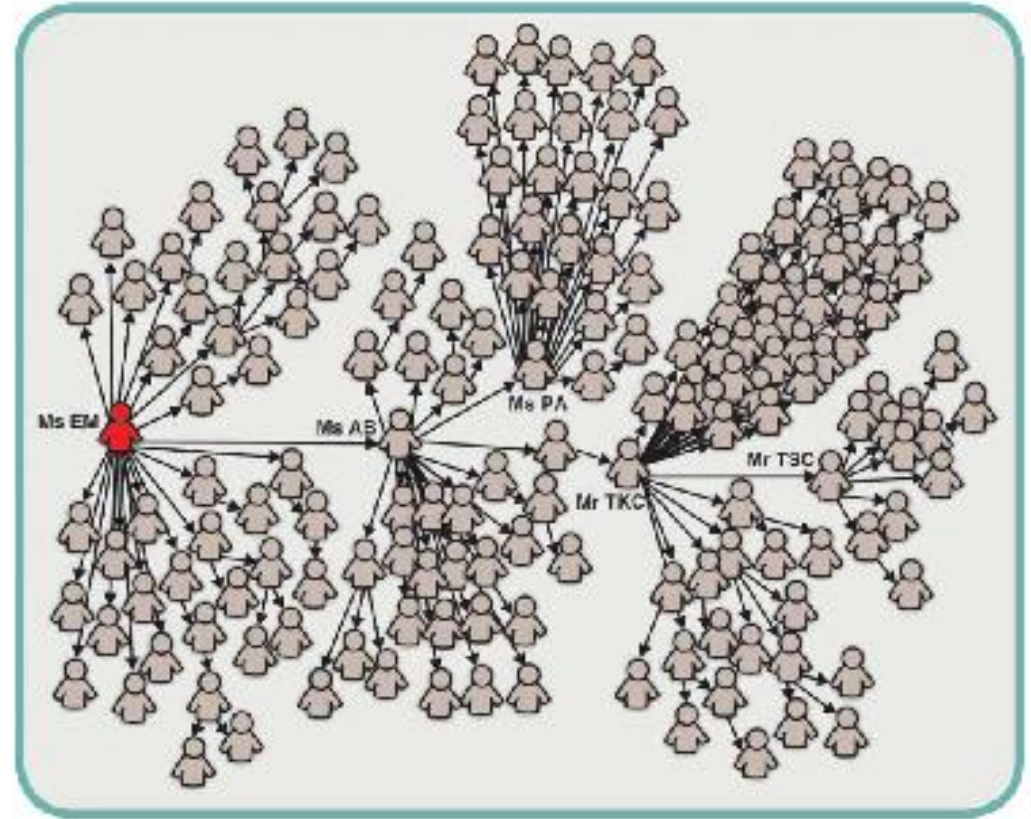
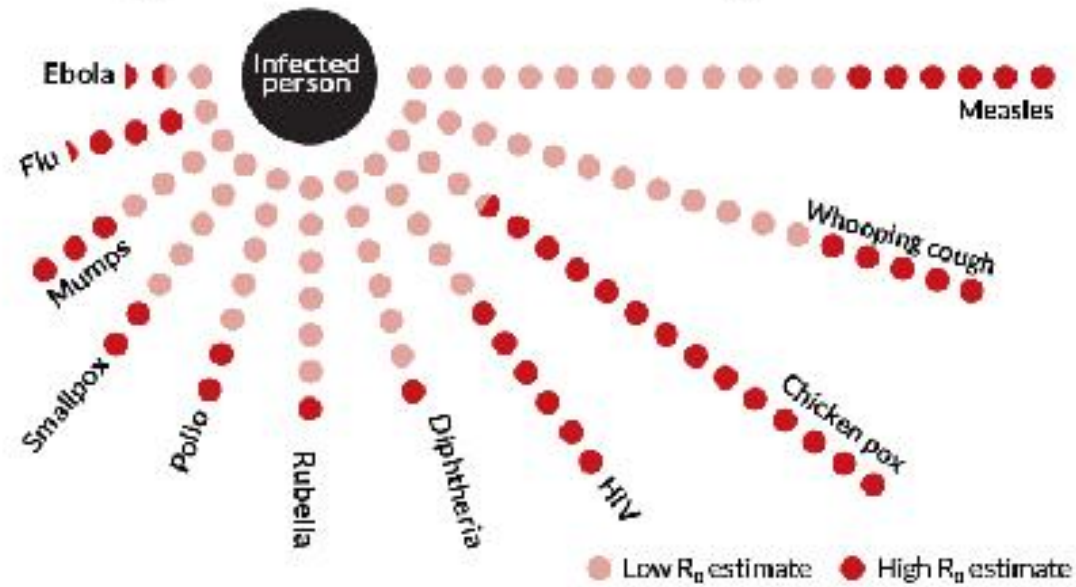
$R_0$

Average number of secondary infections:



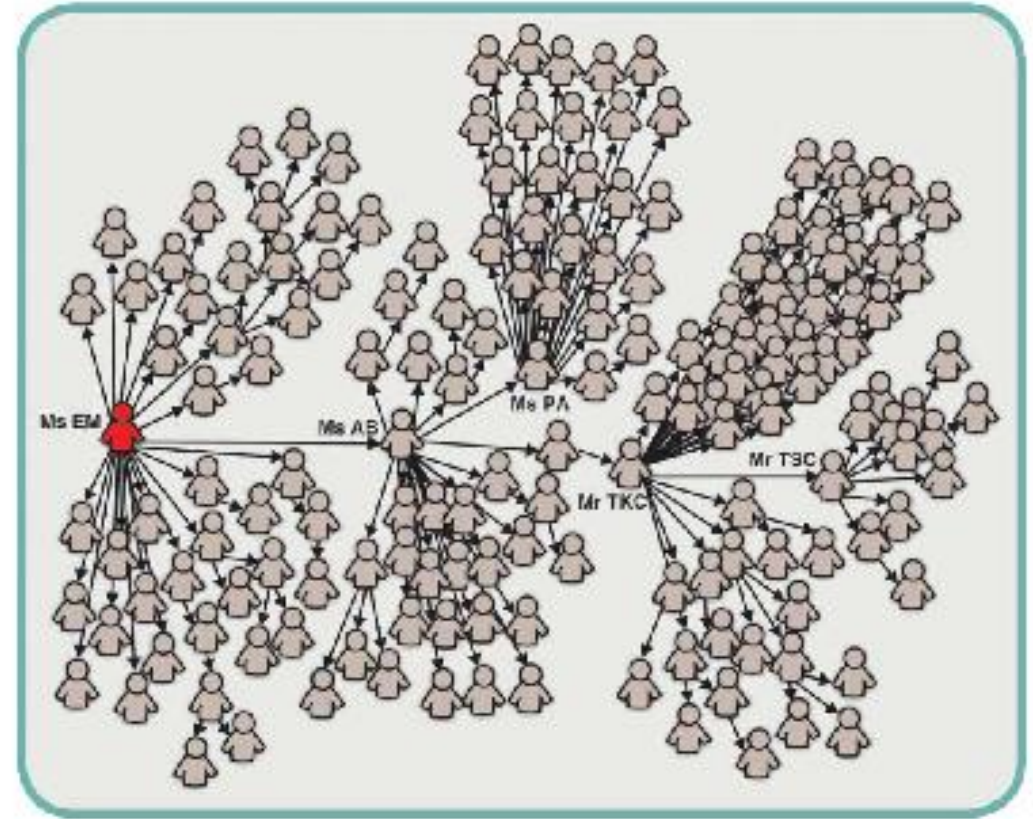
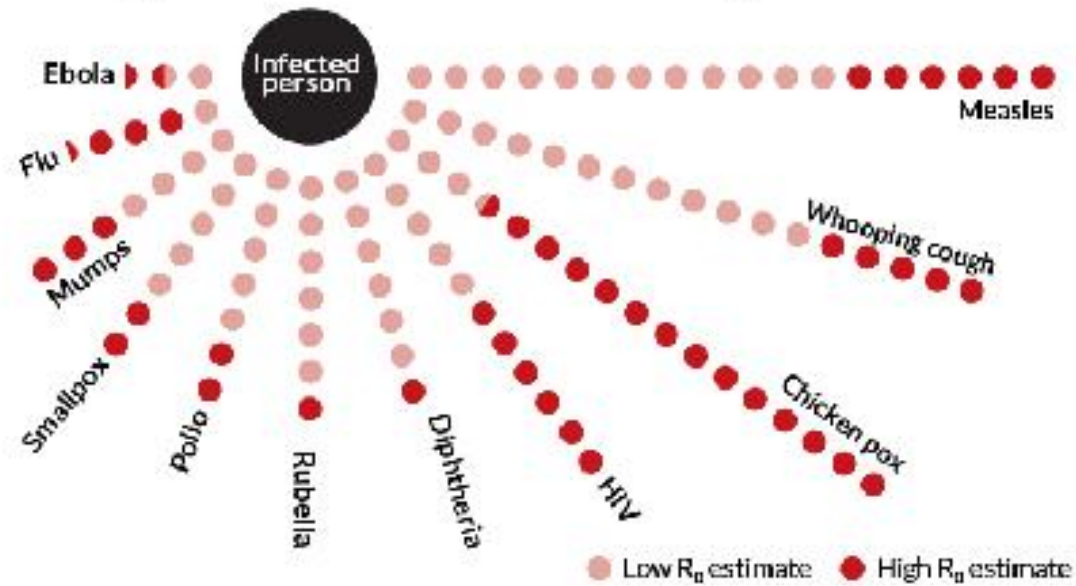
$R_0$

Average number of secondary infections:



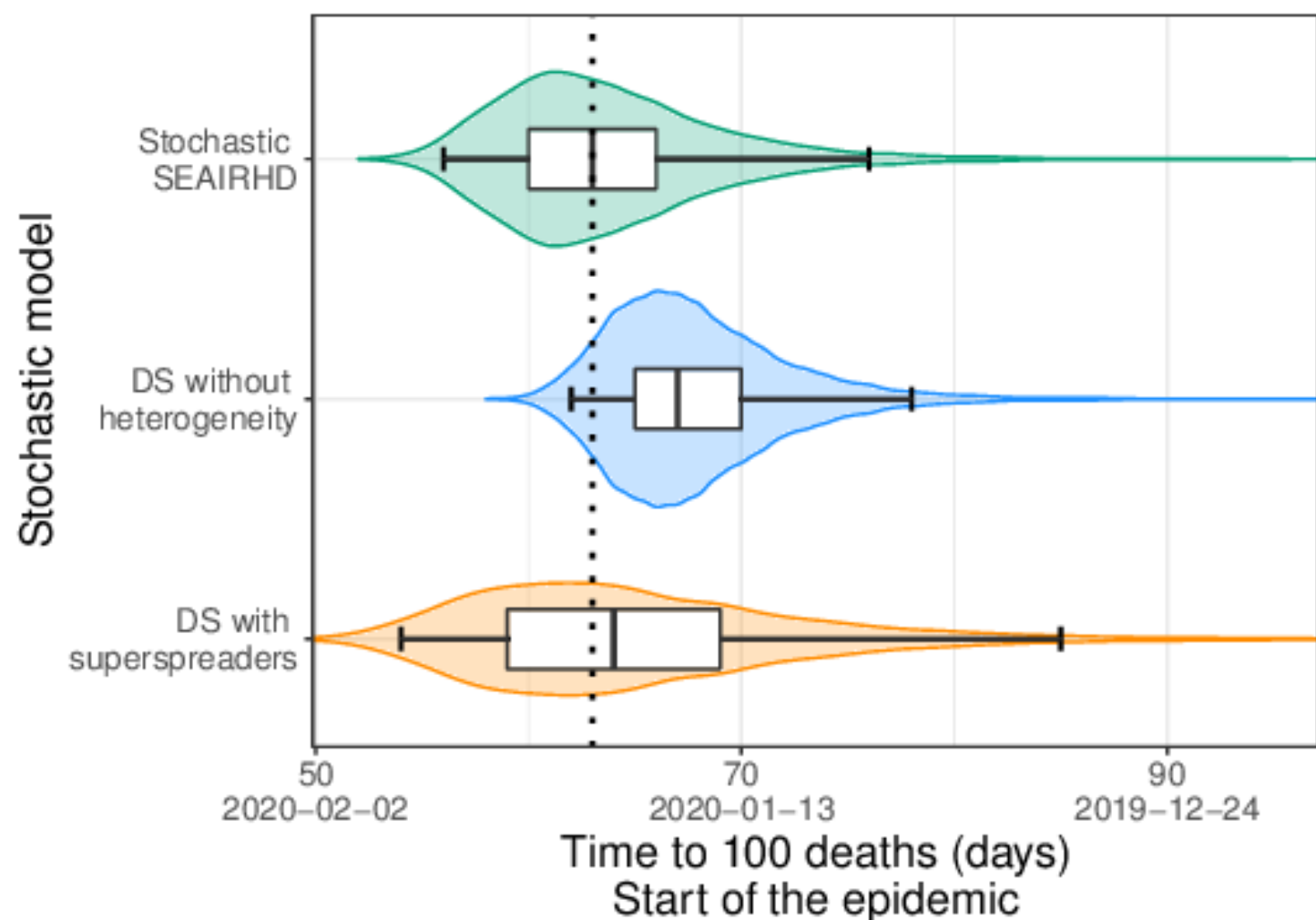
$R_0$

Average number of secondary infections:



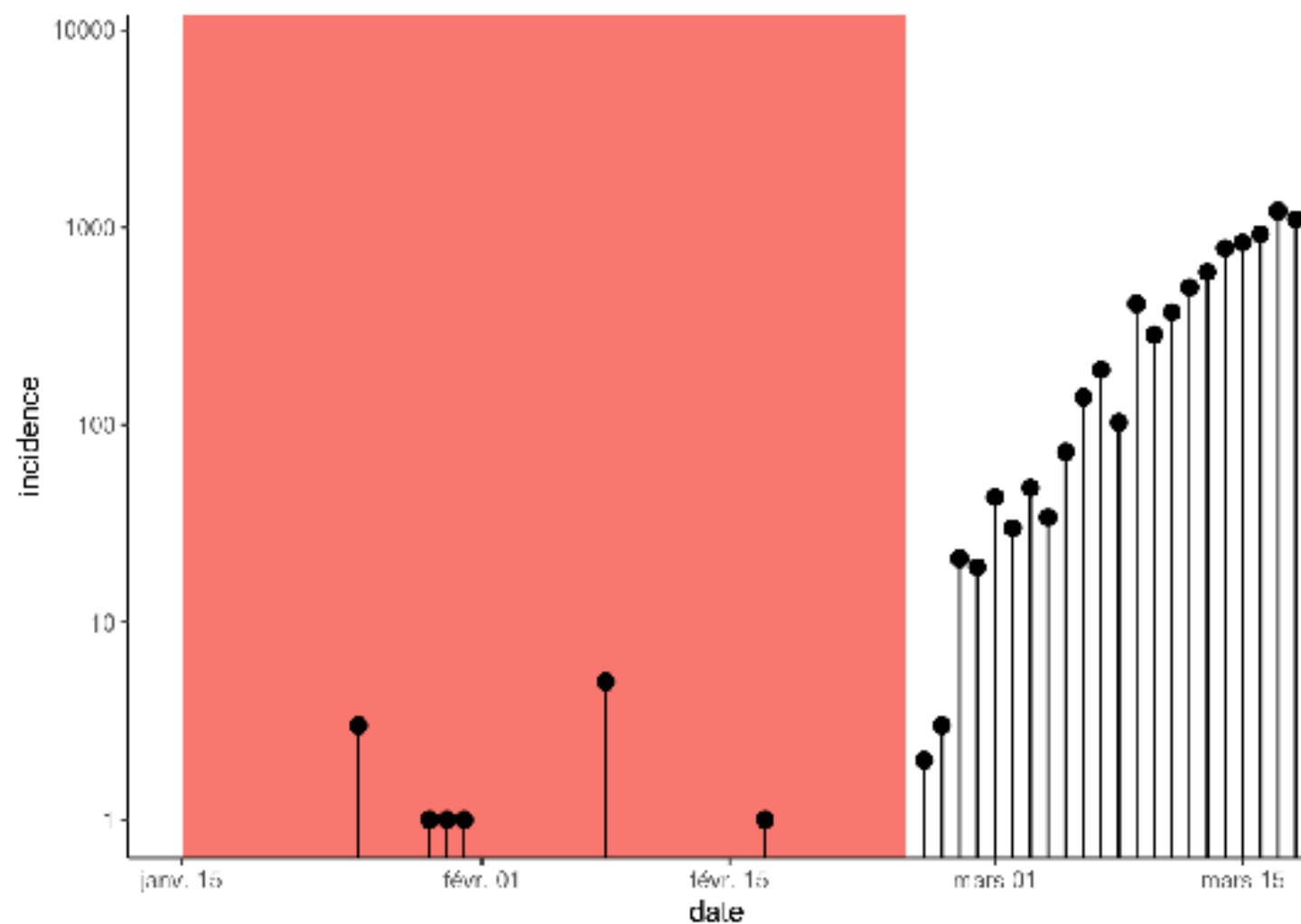
In simple models, the probability of emergence is proportional to  $1 - \frac{1}{R_0}$ .

# DATING AN OUTBREAK ORIGIN (AND END)

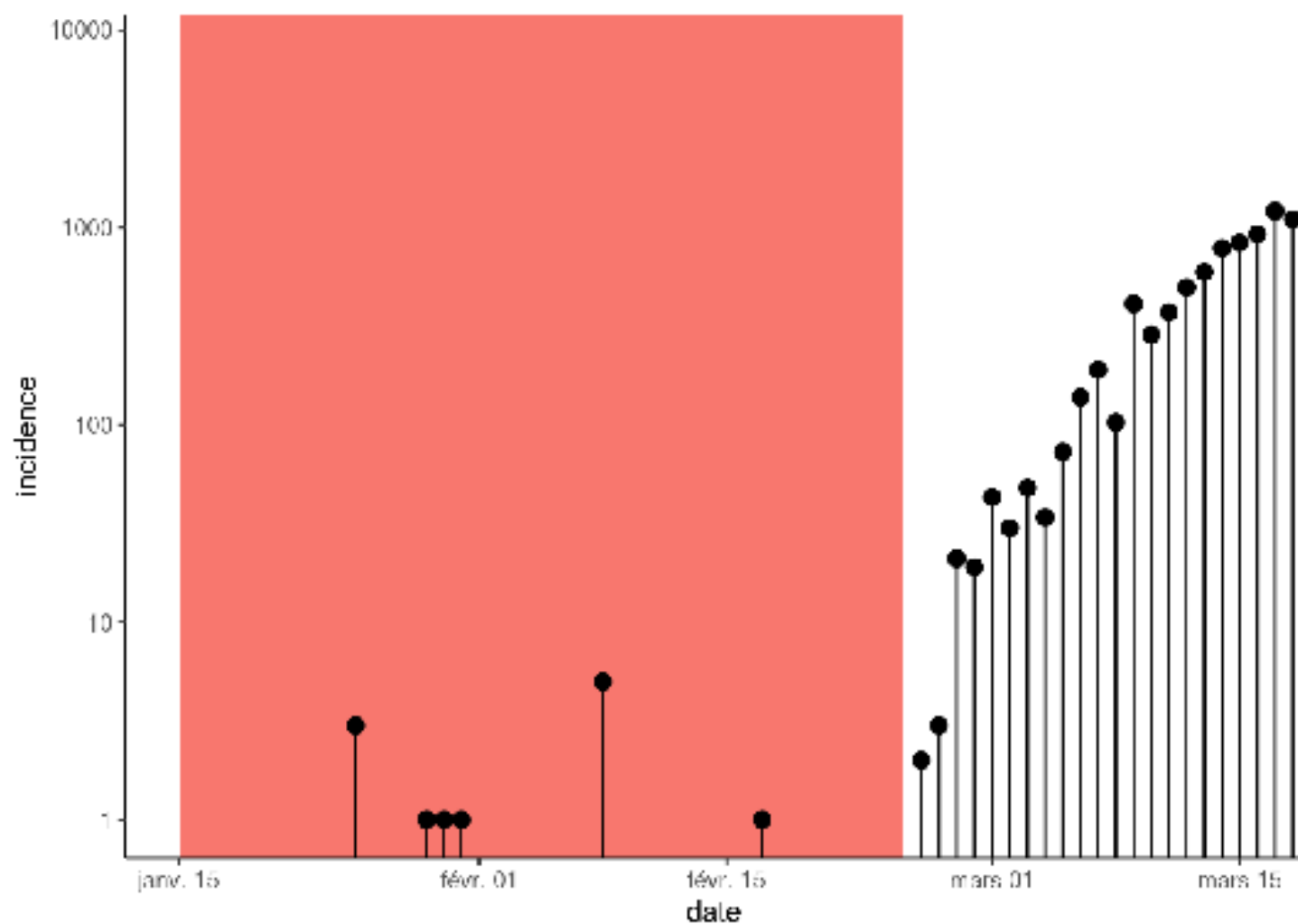


Bénéteau *et alii*  
(Peer Community In Journal, in press)

# STOCHASTIC VS. DETERMINISTIC

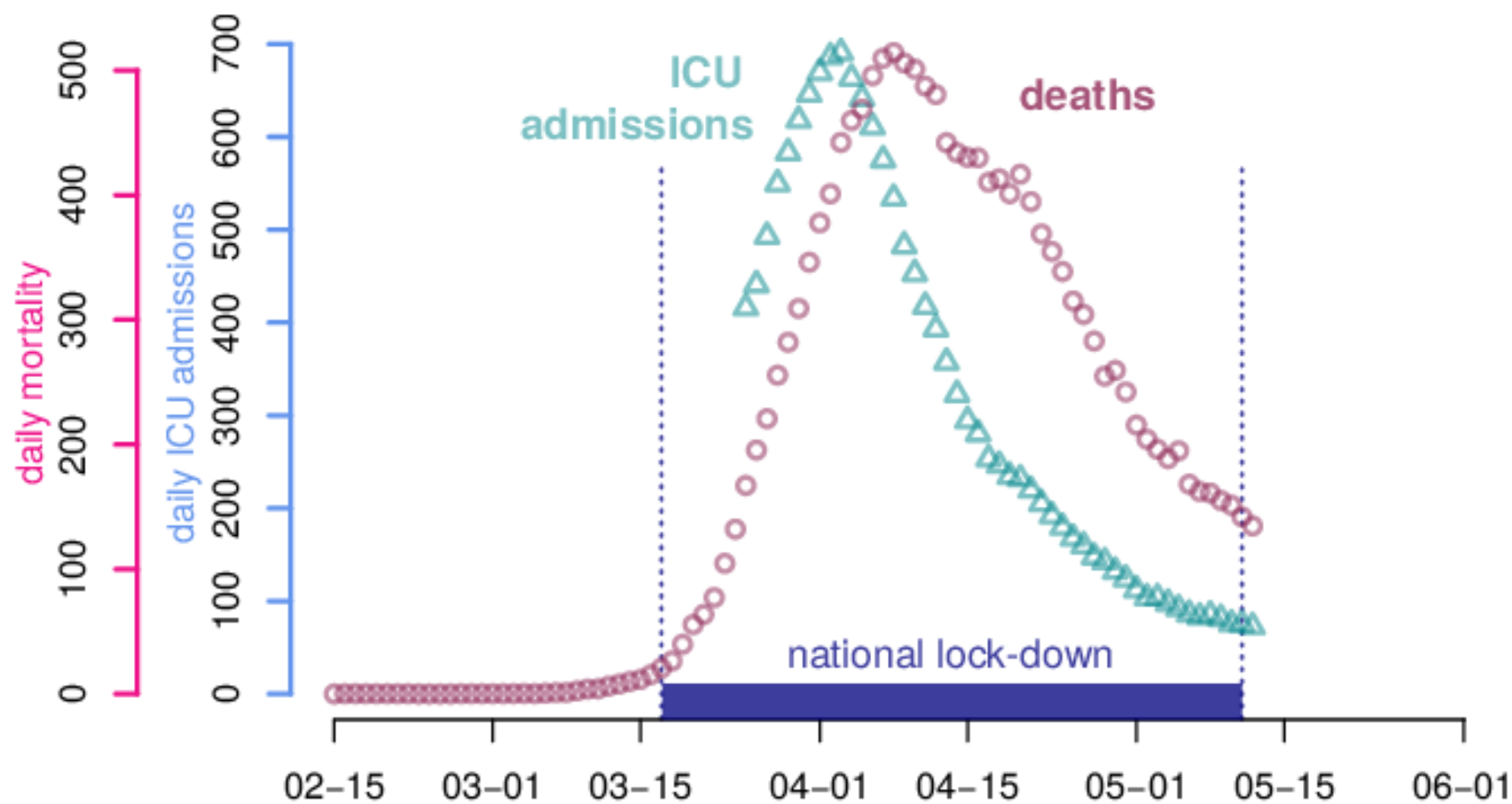


# STOCHASTIC VS. DETERMINISTIC

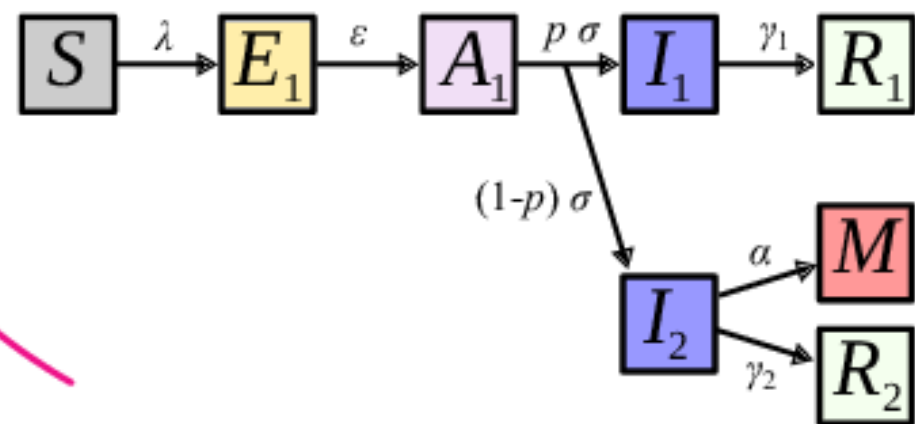
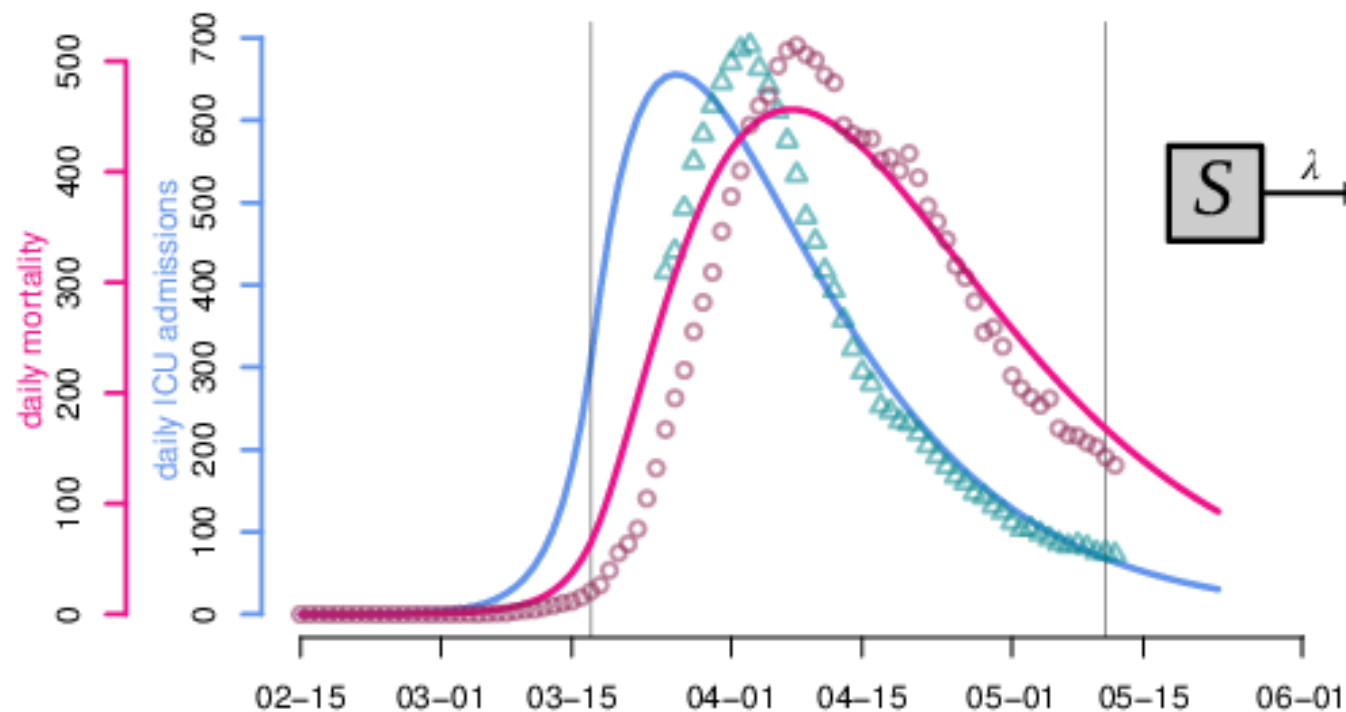


- doubling time:  
 $t_D = \frac{r}{\ln(2)} \approx 3$  days
- $\mathcal{R}_0 = 2.49$  [2.39 ; 2.58]

# GOAL: PREDICT ICU ADMISSIONS



# CLASSICAL 'MEMORYLESS' MODELS FAIL

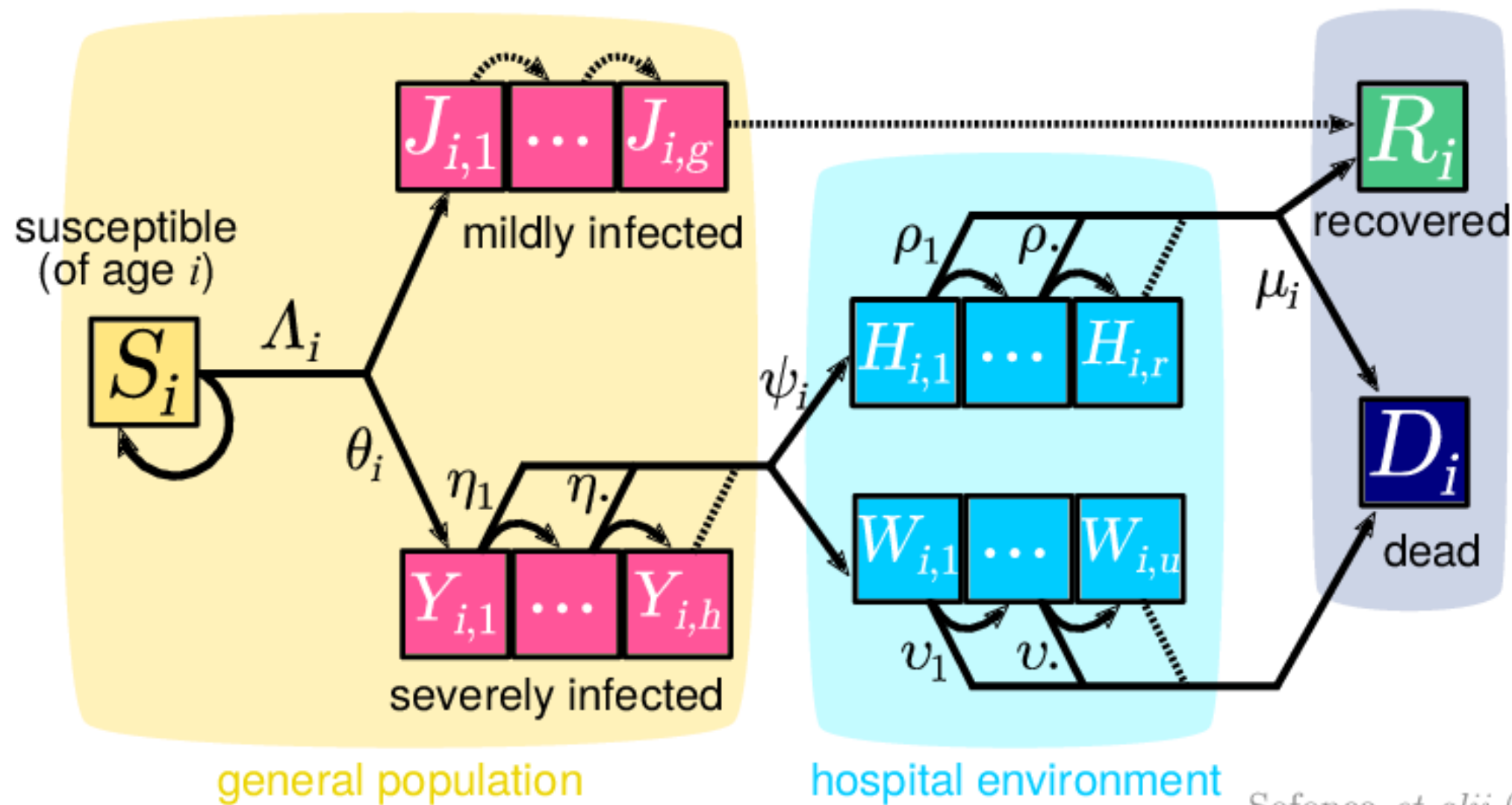


# DATA'S THE KEY

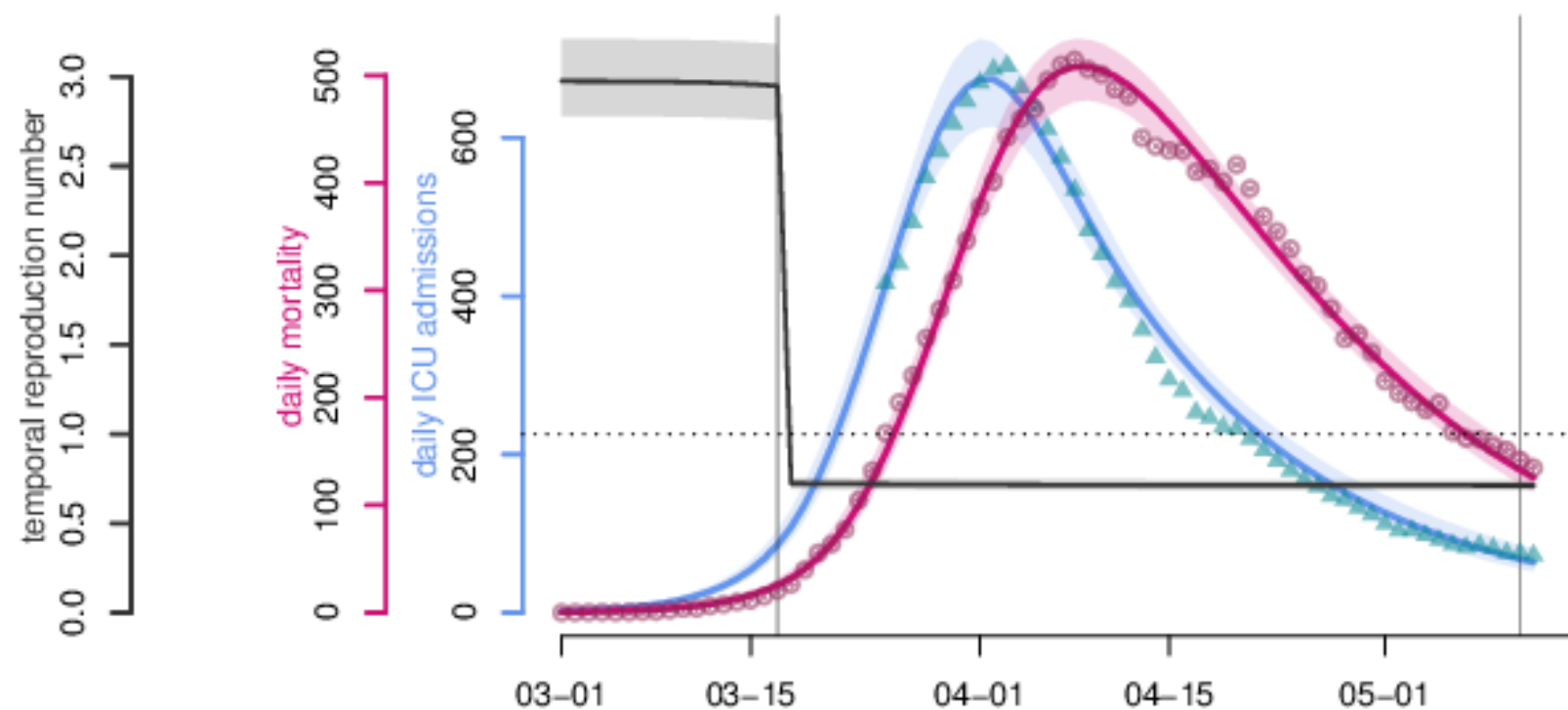


- Mar 27: sharing of hospital ICU data
- Apr 2: sharing of nursing homes data
- Apr 23: publication of lengths of stay in ICUs

# DISCRETE TIME MODEL

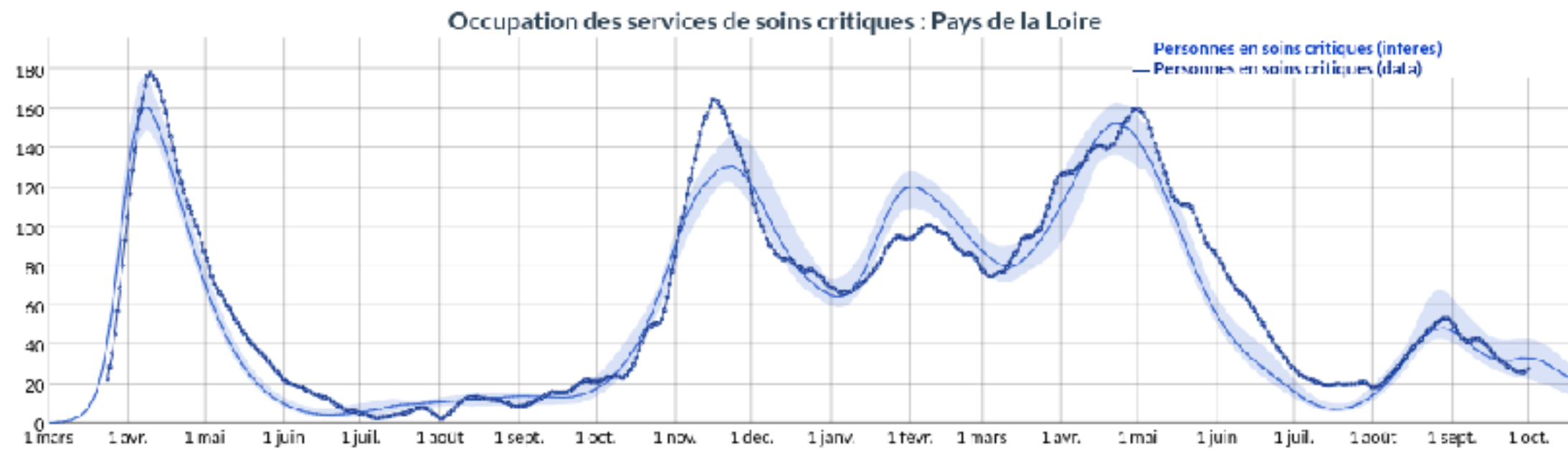


# CAPTURING HOSPITAL DYNAMICS



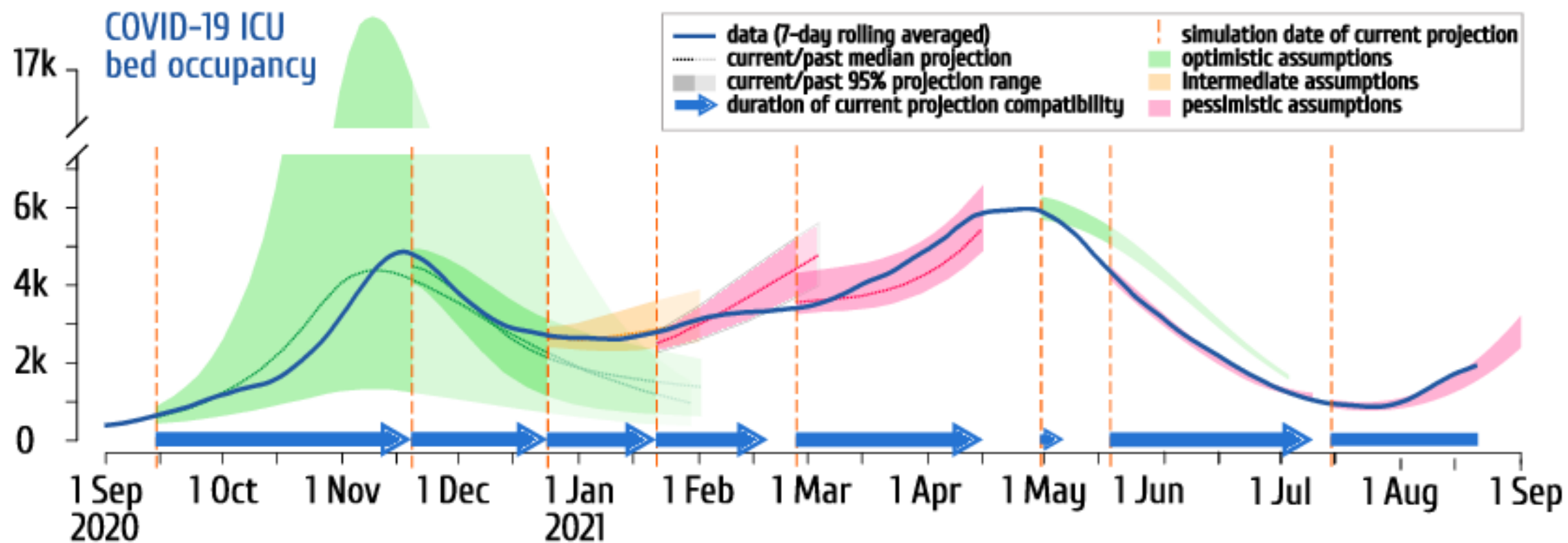
- statistical challenge
- $\mathcal{R}_0 = 3.0$  [2.6, 3.4]
- origin: 20 jan [12-28 jan]
- lock-down effect:  $\mathcal{R}_t = 0.71$  [0.69, 0.74]
- $\approx 3, 2$  % pop. infected on May 11

# COVIDICI



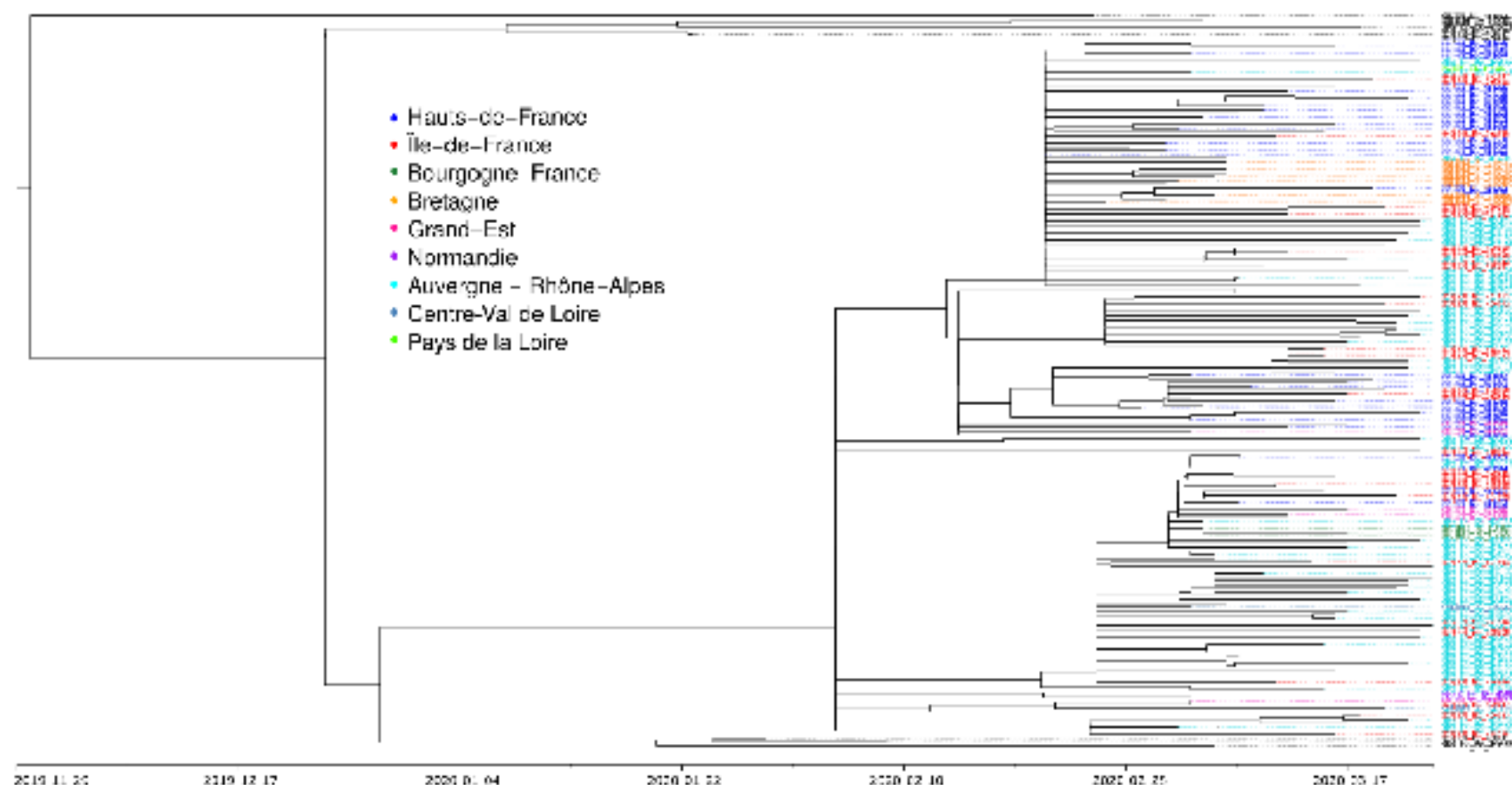
Boennec, Alizon, Sofonea (*in prep.*)  
<https://cloudapps.france-bioinformatique.fr/covidici/>

# 5 WEEKS INSIGHTS ON PROSPECTIVE TRENDS





# FRENCH SARS-CoV-2 PHYLOGENY

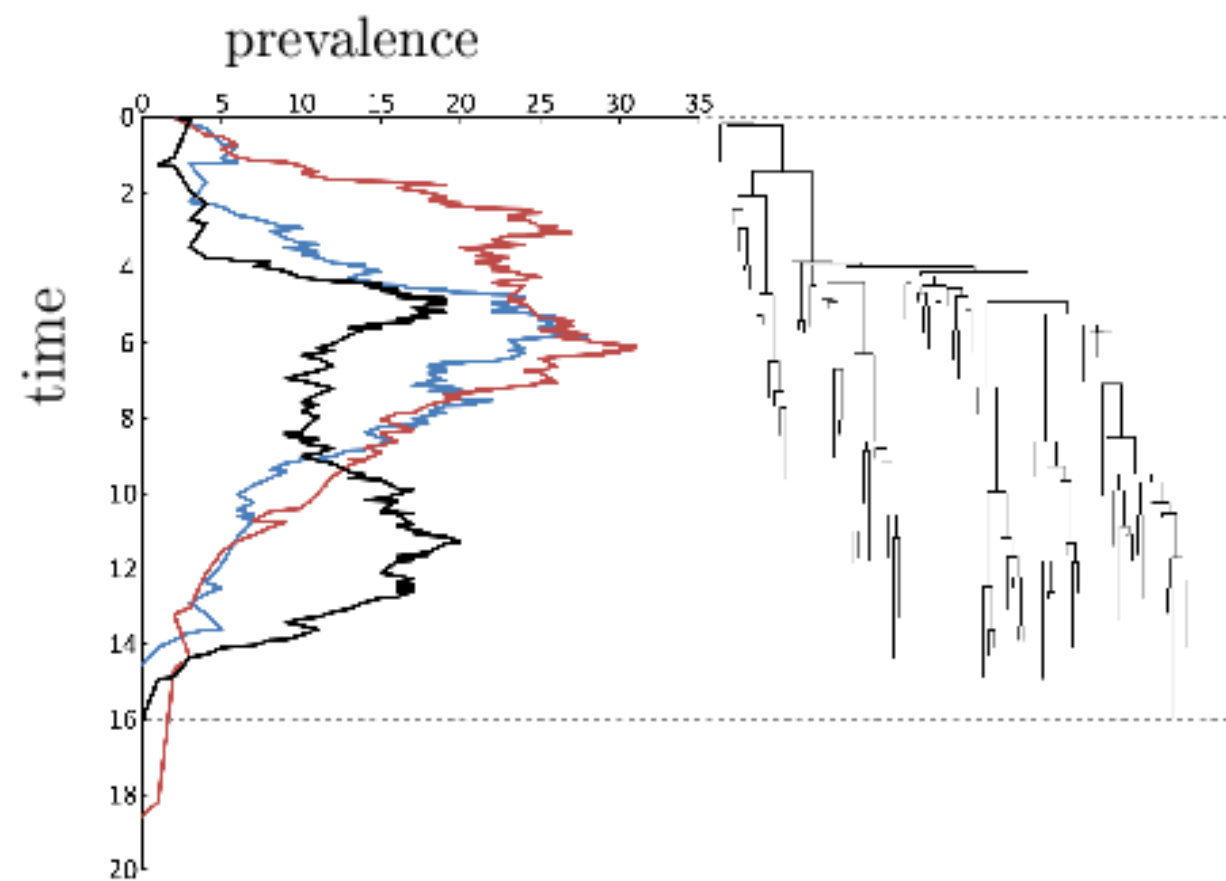


- 196 sequences
- 186 in the epidemic wave clade
- origin between Jan 19 and Feb 15

Report 6 (Apr 9, 2020)

Danesh *et alii* (*Peer Community In Journal, in press*)

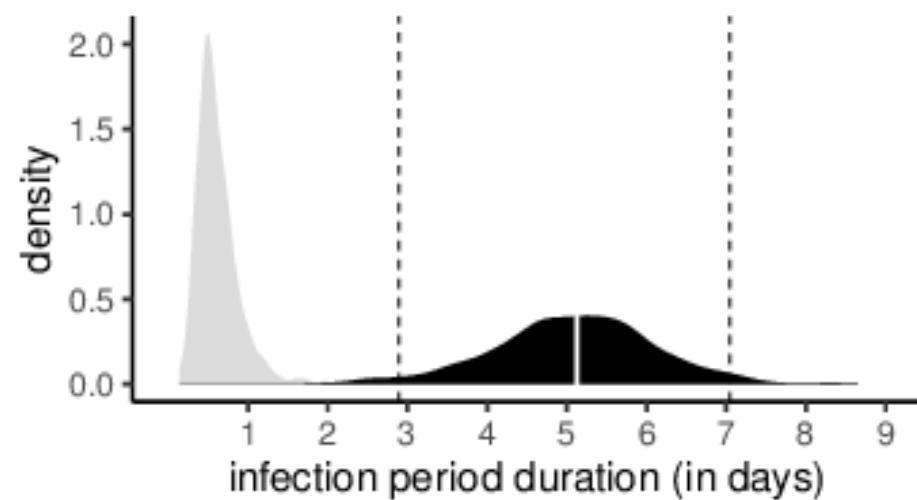
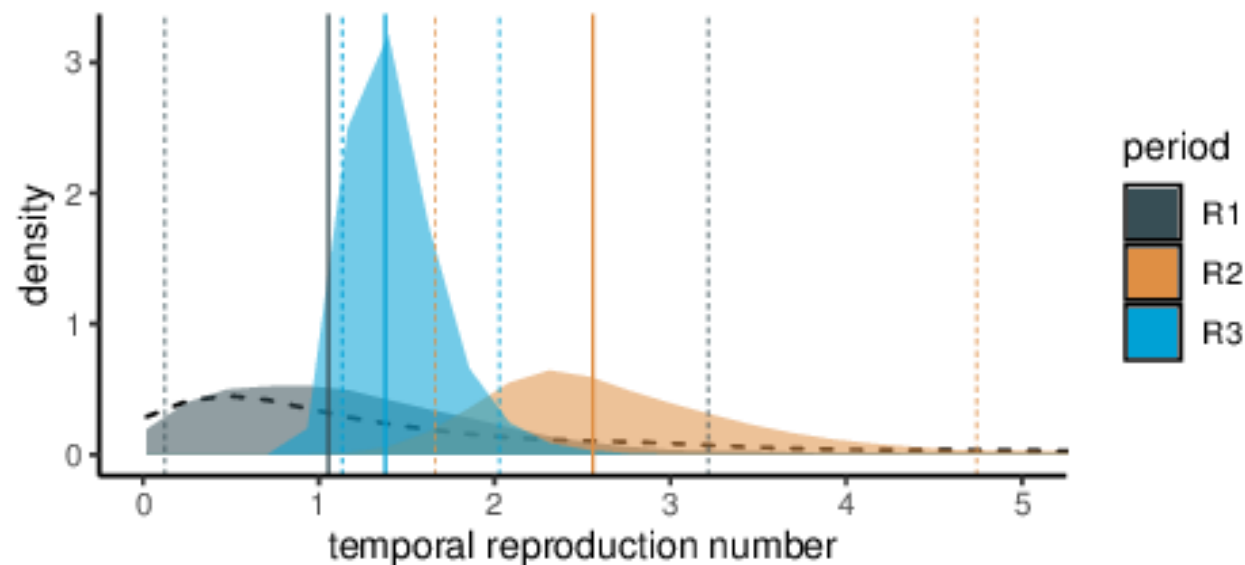
# VIRAL PHYLODYNAMICS



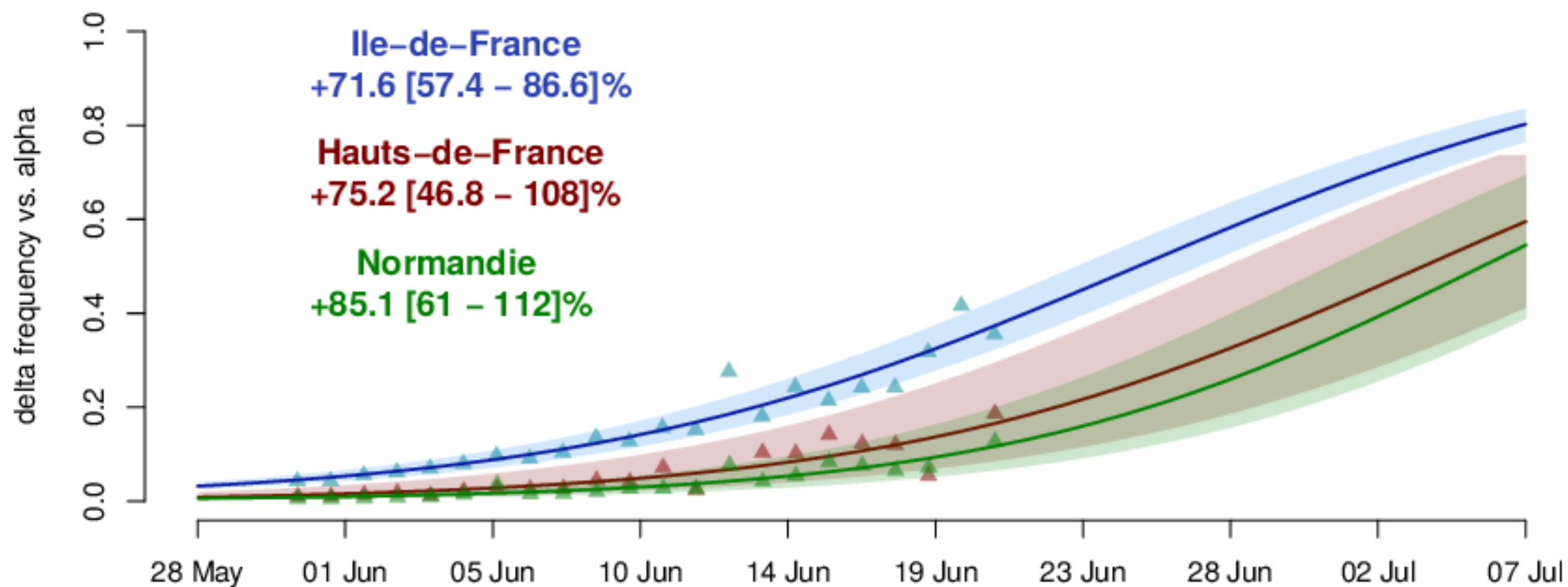
- **dating** common ancestors
- measure **spreading** ( $r, \mathcal{R}_t$ )
- estimate infection **durations**
- uncover spatial **structure**

# FRENCH PHYLODYNAMICS

Using a *birth-death skyline plot* model (BDSKY):



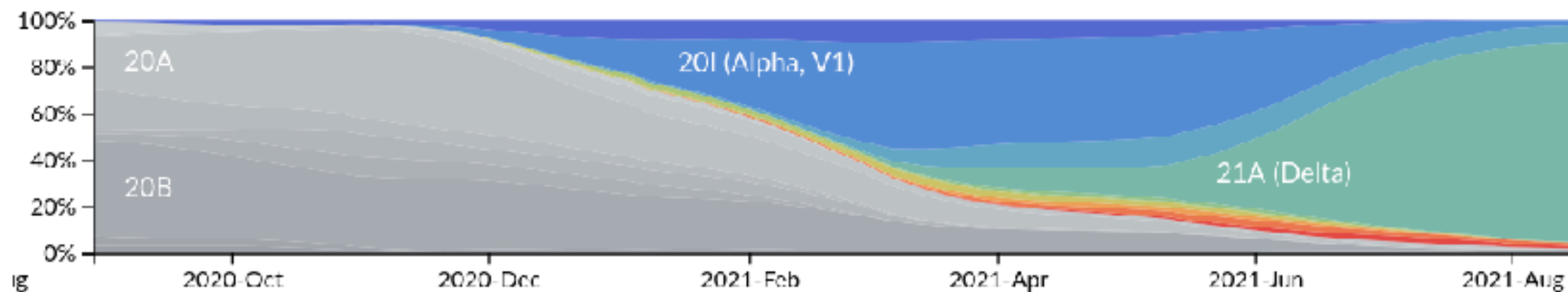
# PHENOTYPIC EVOLUTION



# PHENOTYPIC EVOLUTION

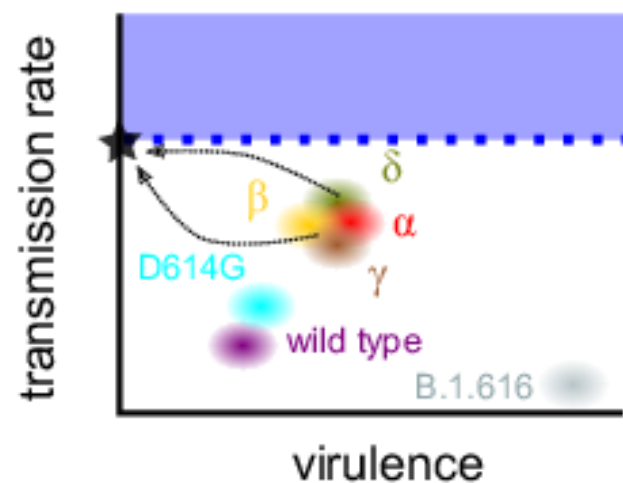
Since 2021, we see “variants” with one (or more) properties:

- increased virulence (Alpha, Beta, Delta)
- increased contagiousness (Alpha, Beta, Gamma, Delta)
- immune escape (Beta, Gamma)
- resistance to treatments (?)

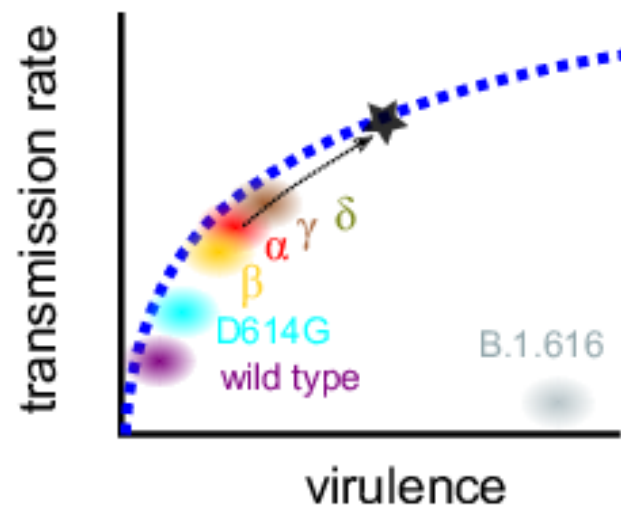


# EVOLUTIONARY SCENARIOS

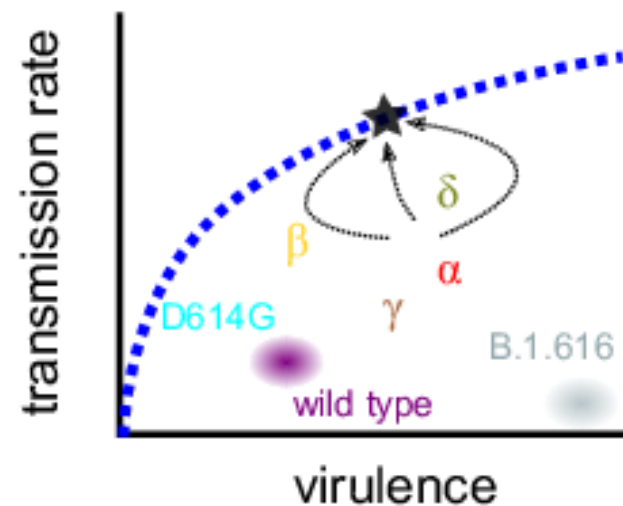
avirulence



trade-off



maladapted



# LONG-TERM HOPE

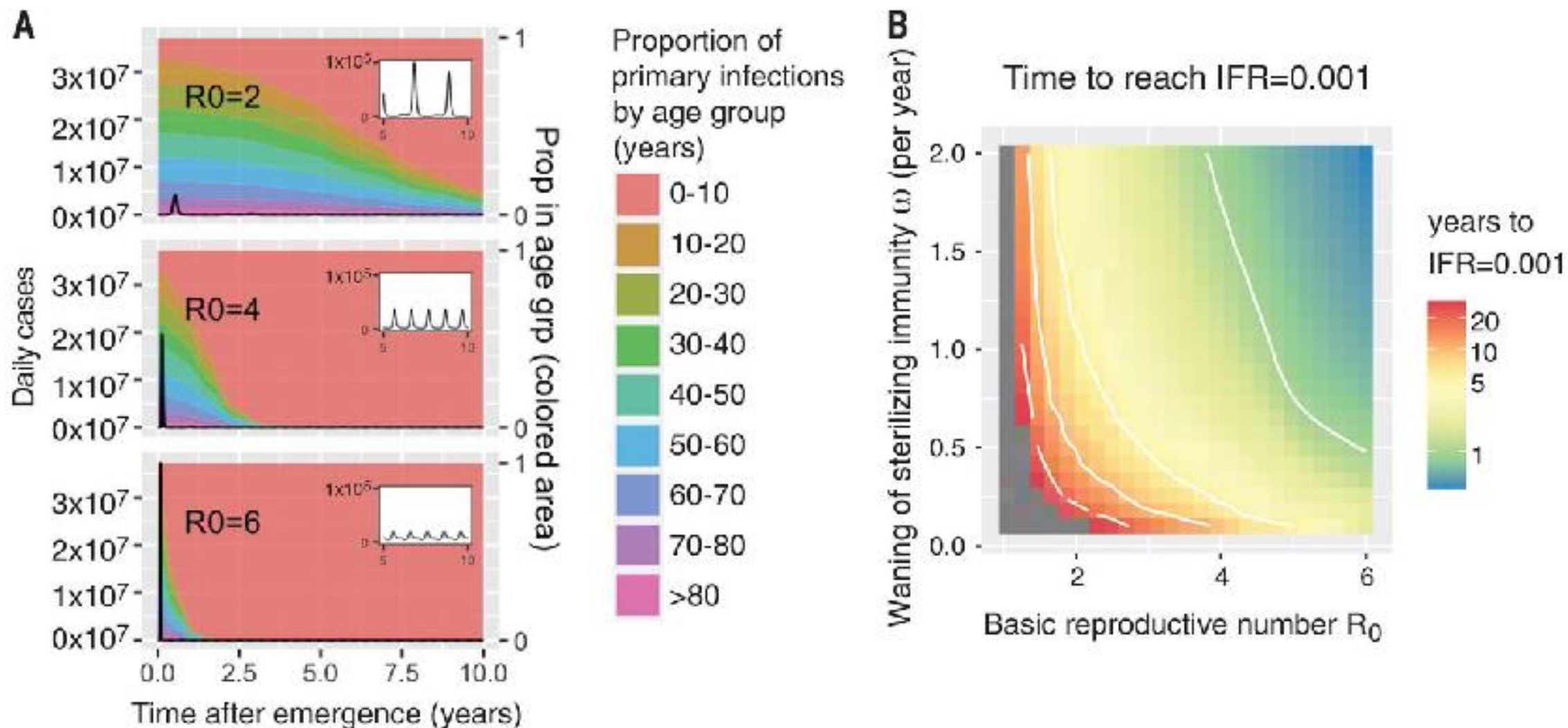


figure from Lavine *et alii* (2021, *Science*)



# SARS-CoV-2 EMERGENCE AND EVOLUTION

- Early (and final) outbreak dynamics are **stochastic**.
- We can **anticipate** hospital dynamics to some extent (5 weeks).
- Neutral evolution can be used to track the epidemic (**phylodynamics**).
- Phenotypic evolution ('**variants**') threatens epidemic control
- **Vaccination** is probably not enough (to control and to let a wave pass)



# APPENDIX

2. ICU modelling

3. Phylodynamics

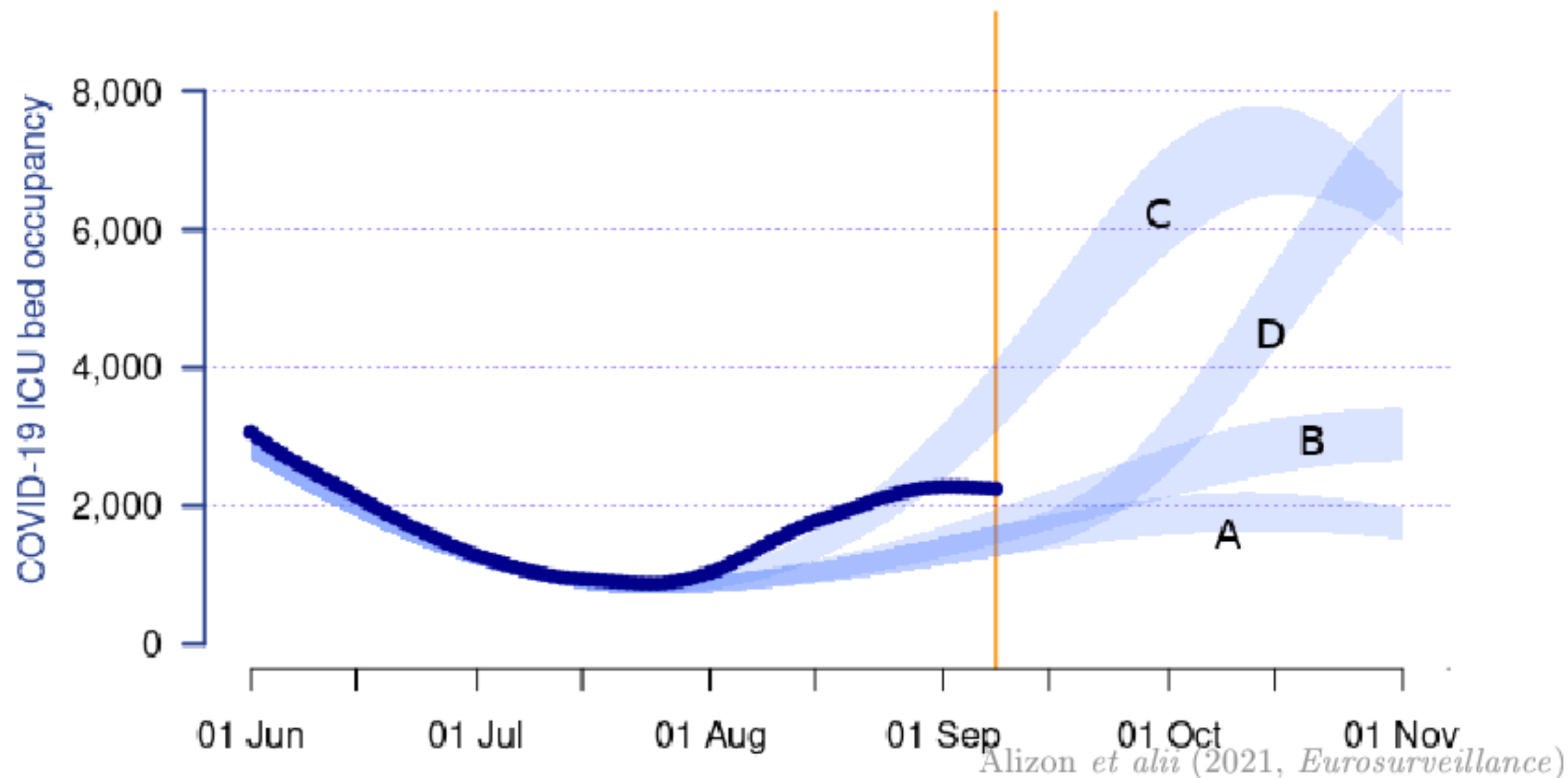
4. EPIDEMAP

5. Optimal age-based control

6. Within-host kinetics

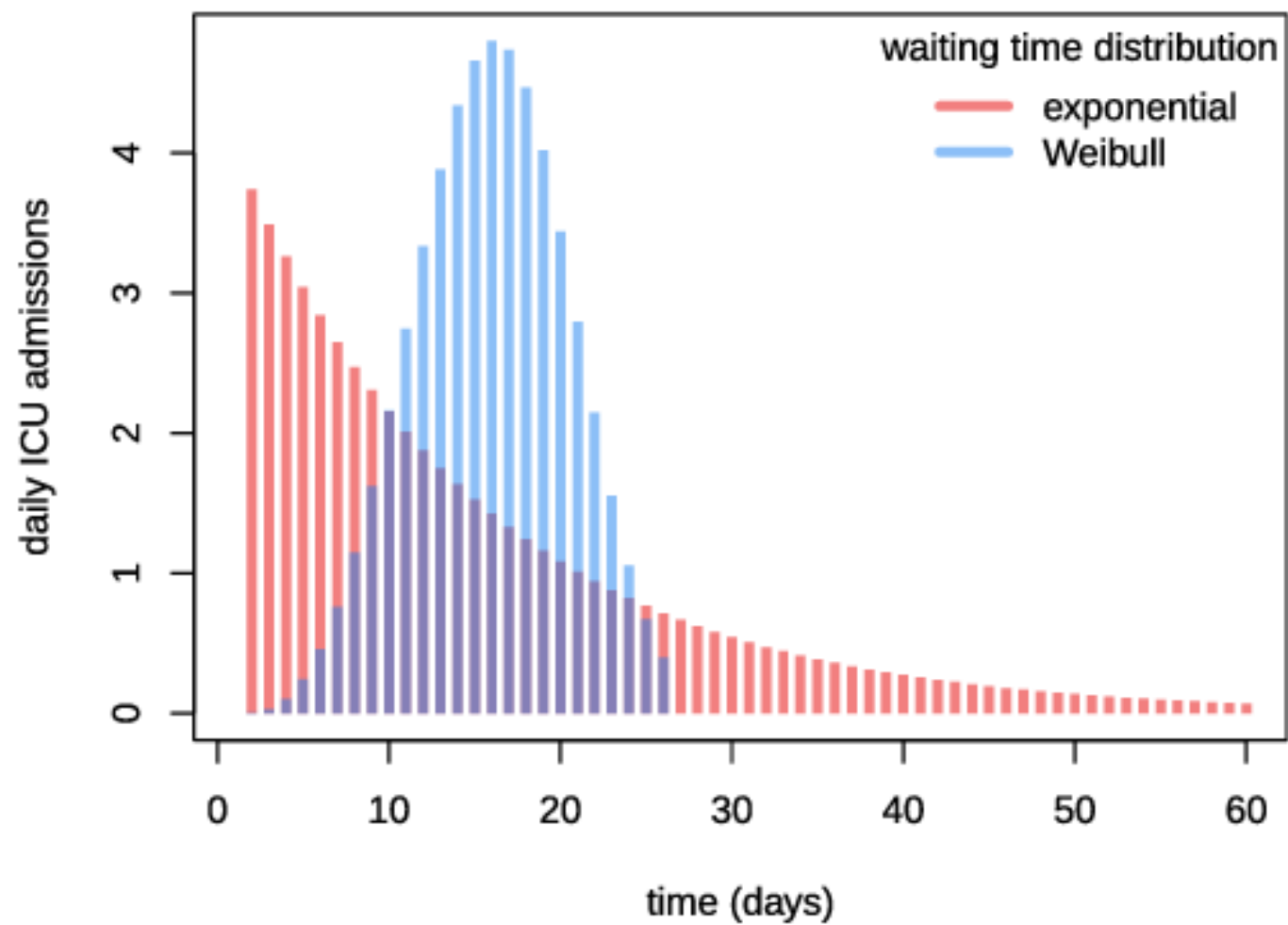
7. Variant transmission advantage

# PROSPECTIVE SCENARIOS



# DELAYS IN ICU DYNAMICS

ICU inflow from a 100 critical case cohort



# BAYESIAN PHYLODYNAMICS

- data: dated sequences
- $T$ : phylogenetic tree
- $\eta$  : parameters from the epidemiological model
- $\theta$  : parameters from the evolutionary model (substitutions)
- $f[\text{data}|T, \theta]$ : phylogenetic likelihood
- $f[T|\eta]$ : **transmission model (coalescent, birth-death model)**
- $f[\eta, \theta]$ : prior distribution
- $f[\text{data}]$ : normalisation term

Posterior probability distribution:

$$f[T, \eta, \theta | \text{data}] = \frac{f[\text{data}|T, \theta] f[T|\eta] f[\eta, \theta]}{f[\text{data}]}$$

Drummond *et alii* (2002, *Genetics*)  
for a review, see Kühnert *et alii* (2011, *Inf Genet Evol*)

# FRENCH COVID MODELLING

2. ICU modelling

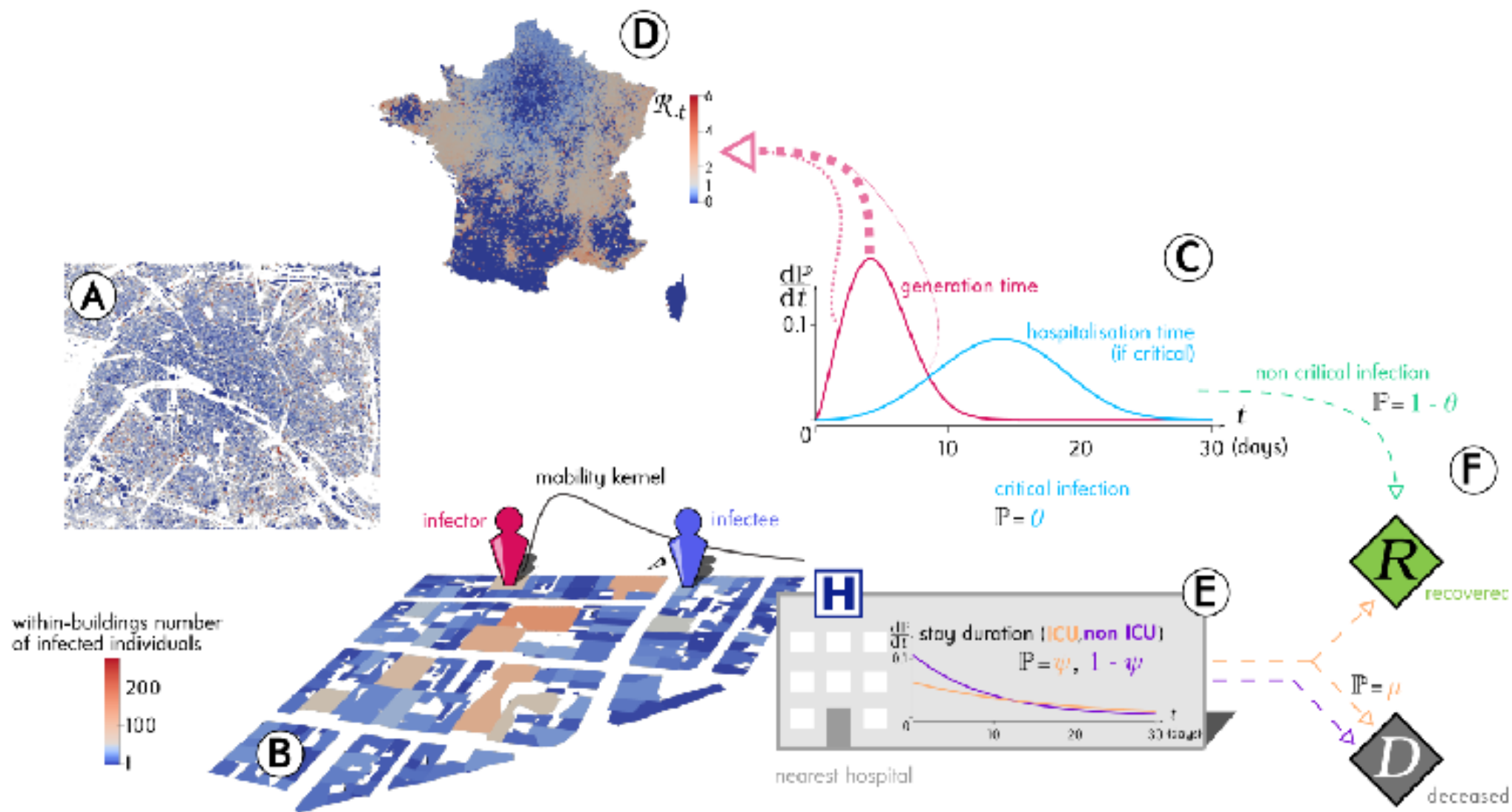
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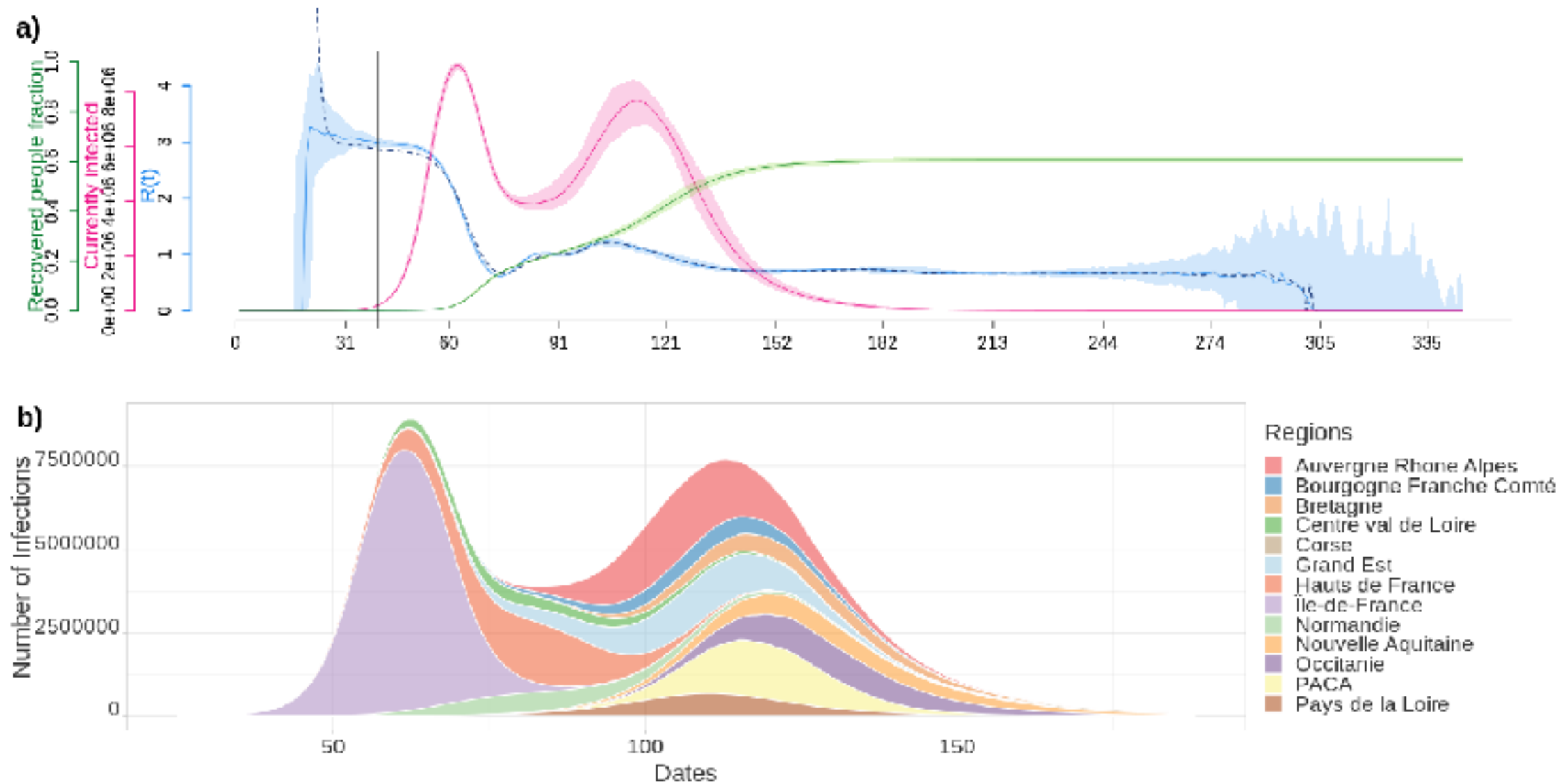
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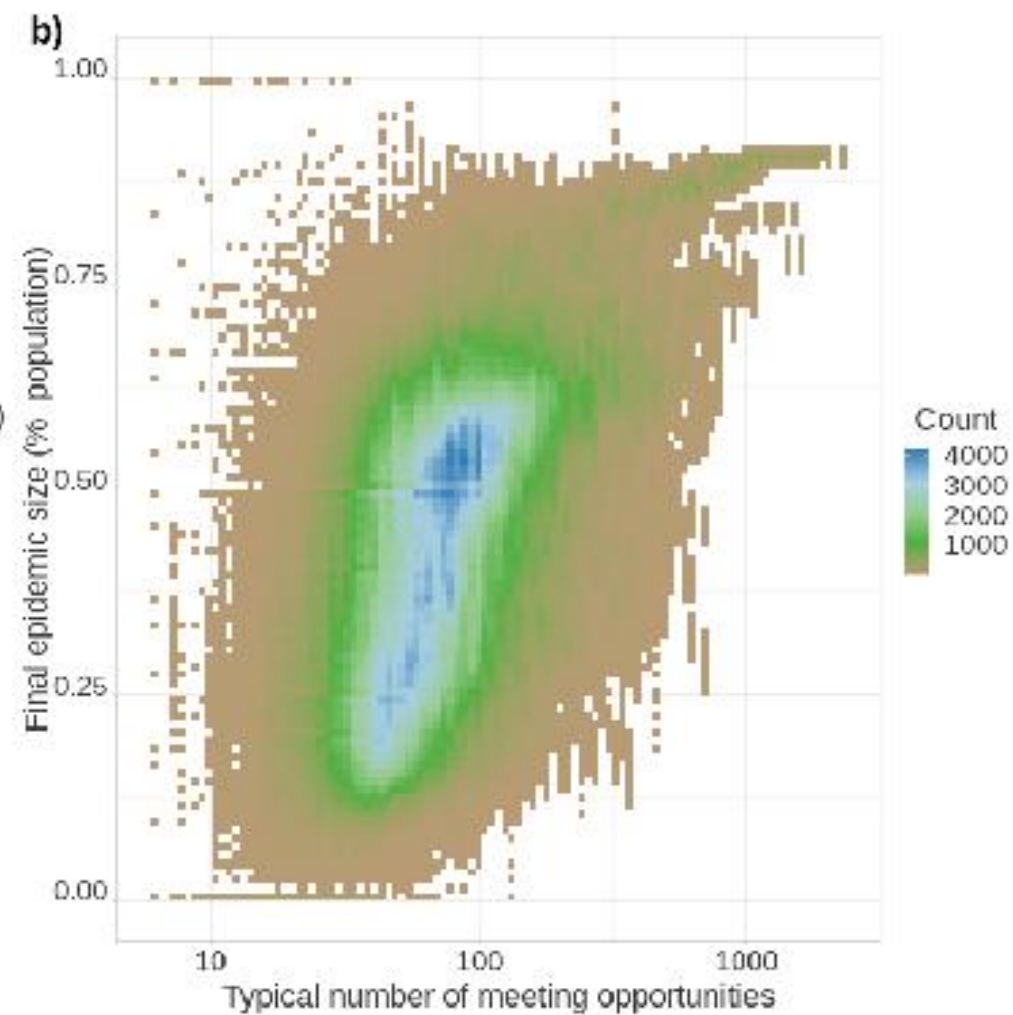
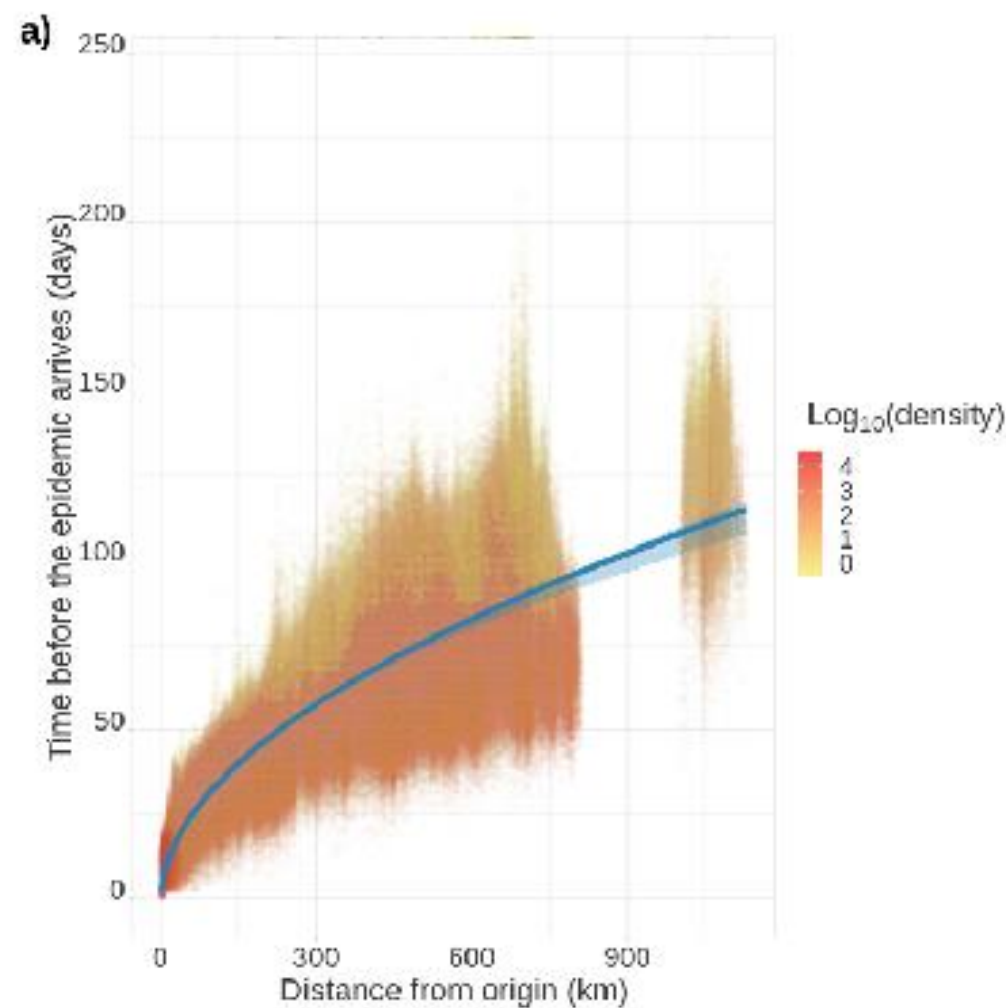


# EPIDEMAP

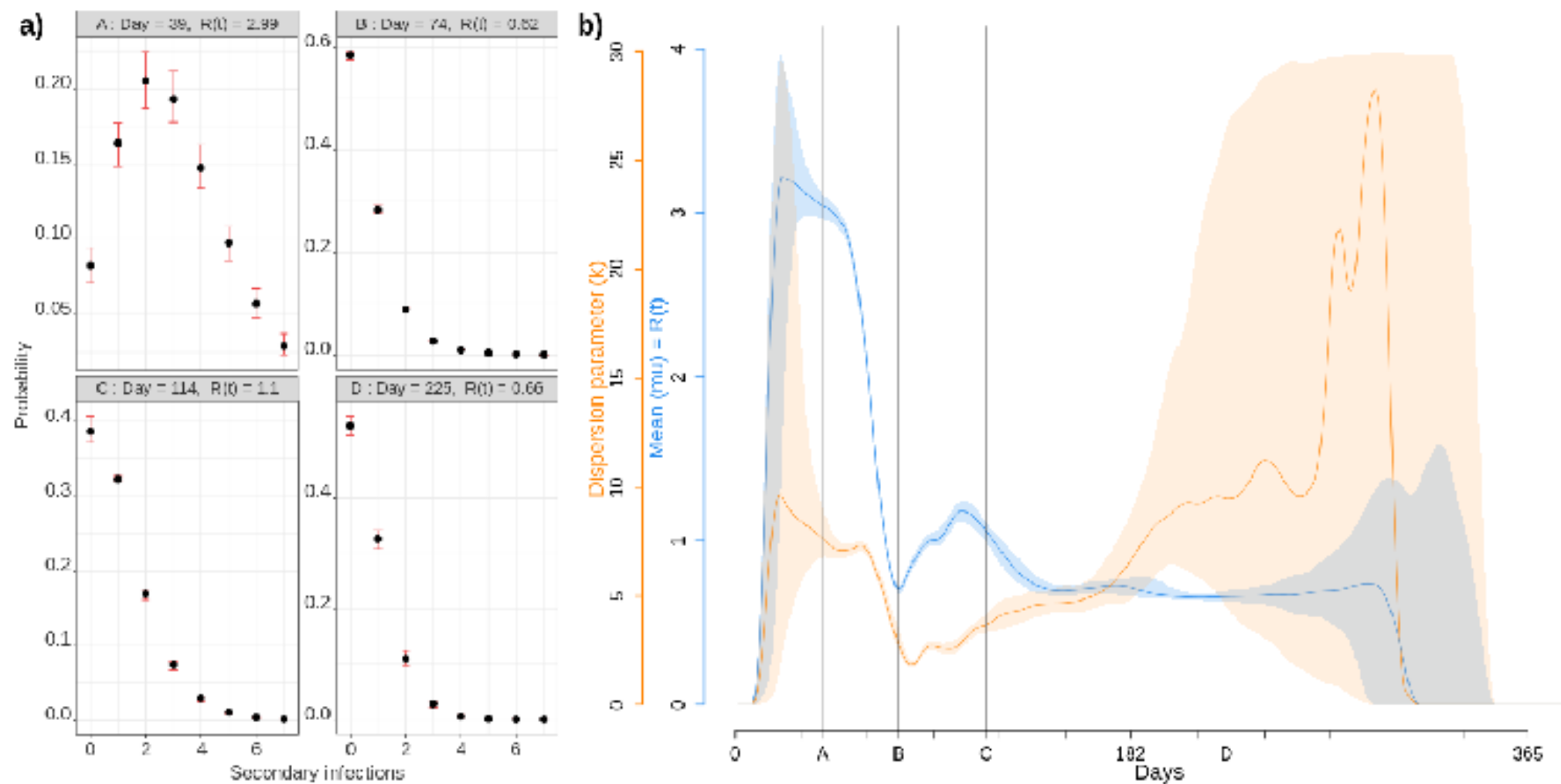
# EPIDEMIC COURSE



# SPATIAL RESOLUTION



# TRANSMISSION CHAINS



# FRENCH COVID MODELLING

2. ICU modelling

3. Phylodynamics

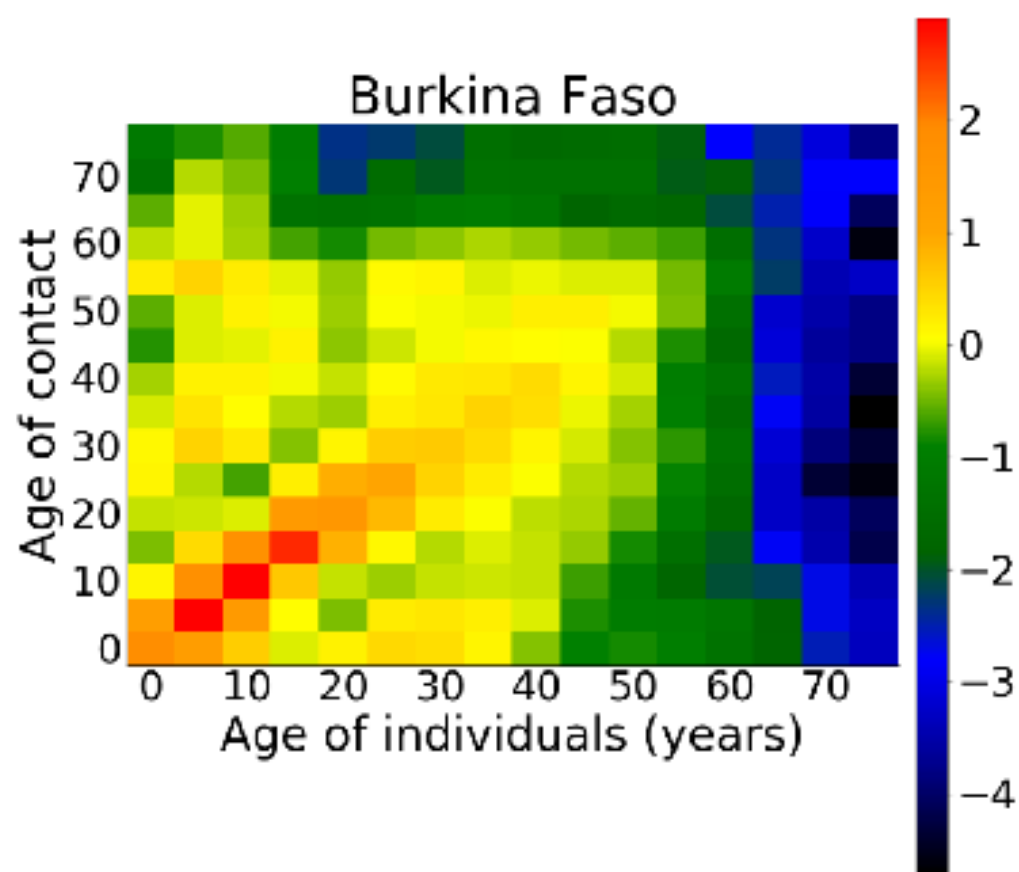
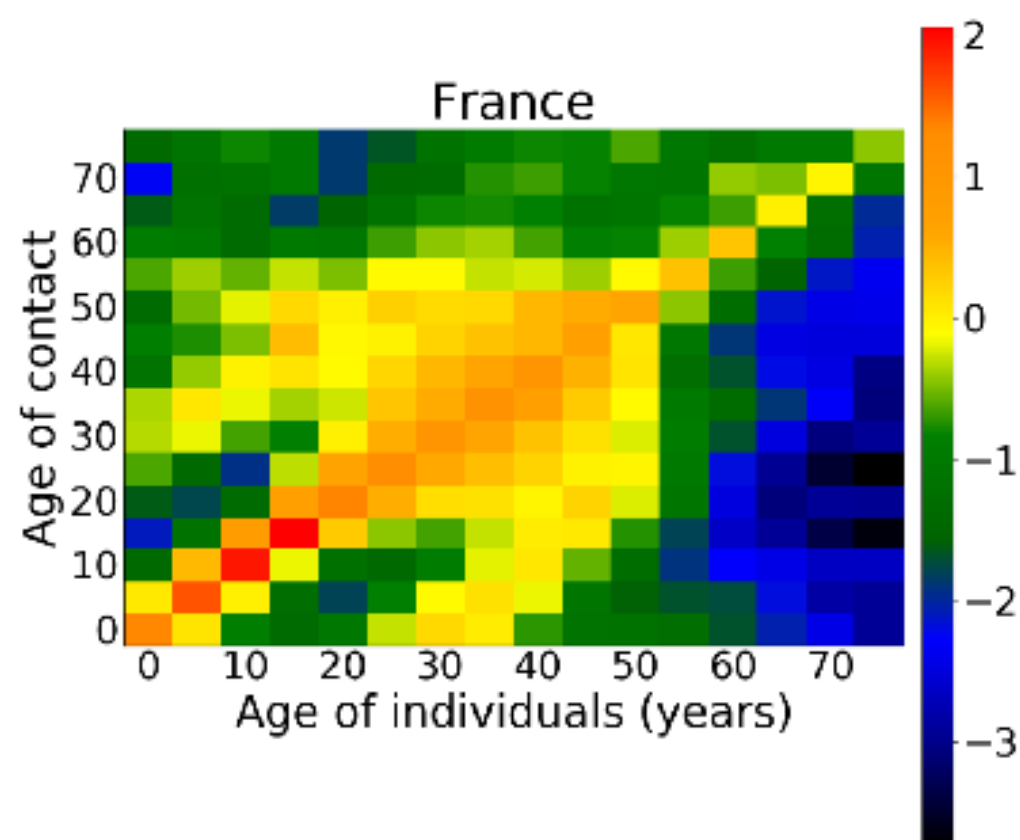
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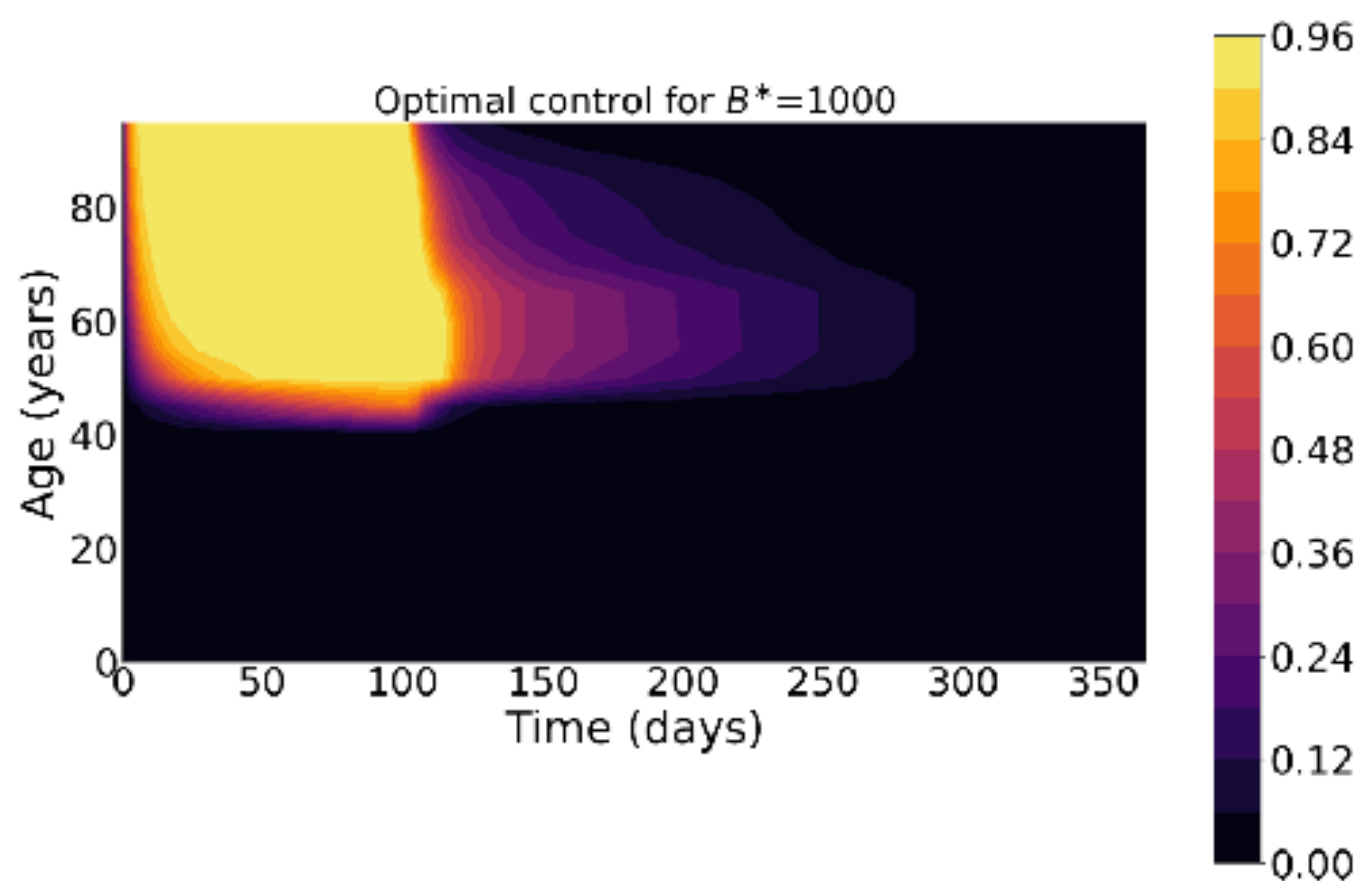
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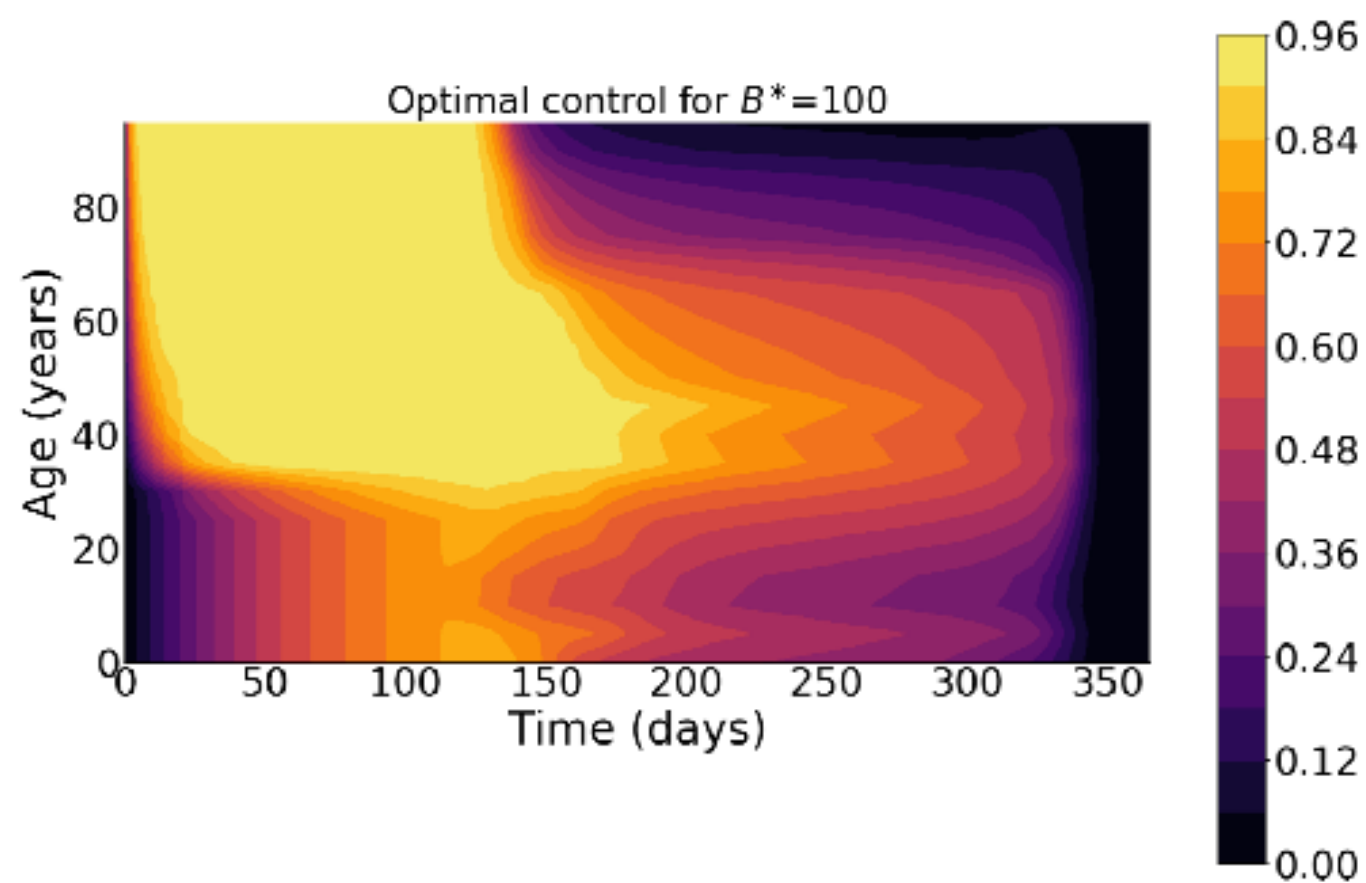
# AGE-STRATIFIED CONTACT MATRIX



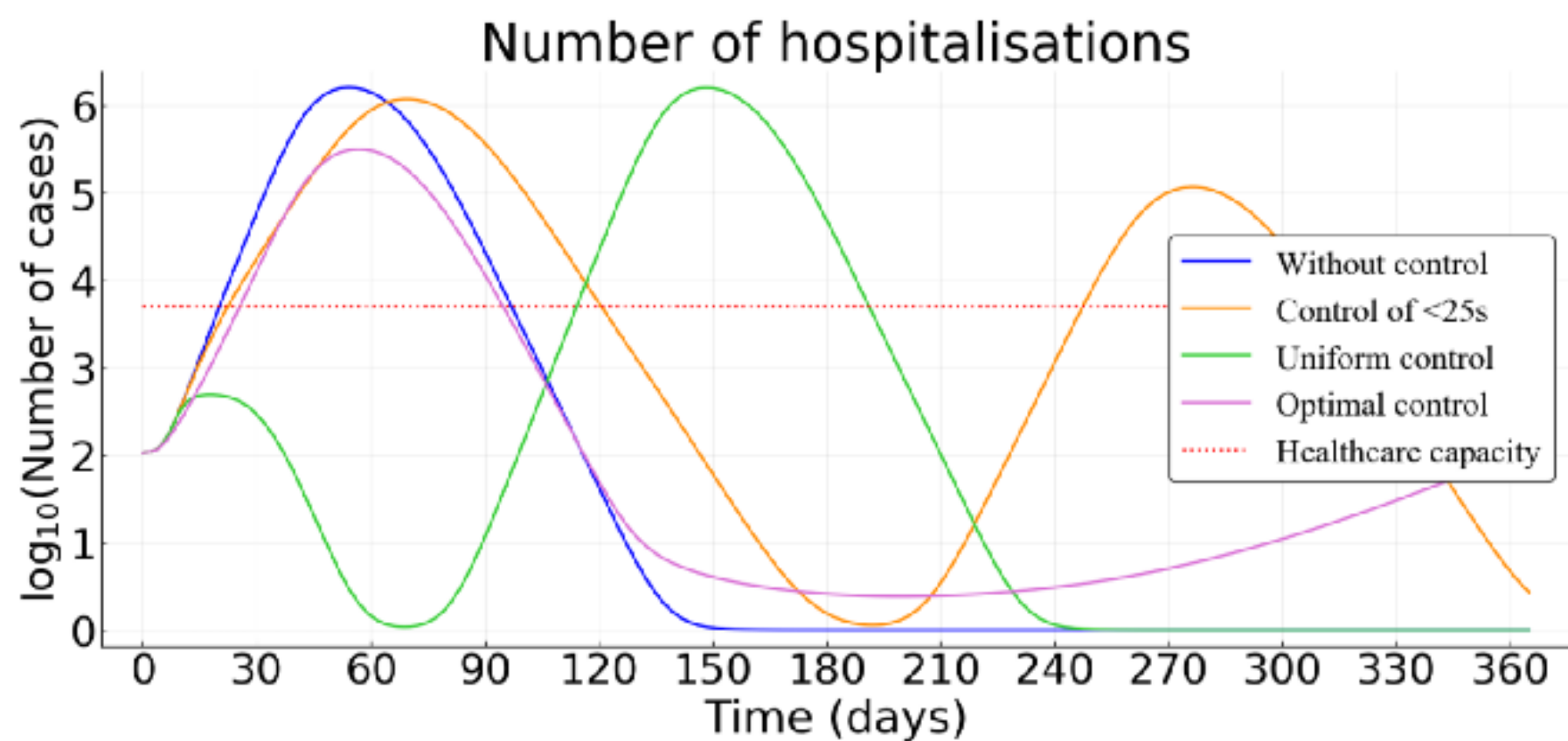
# OPTIMAL CONTROL (COSTLY)



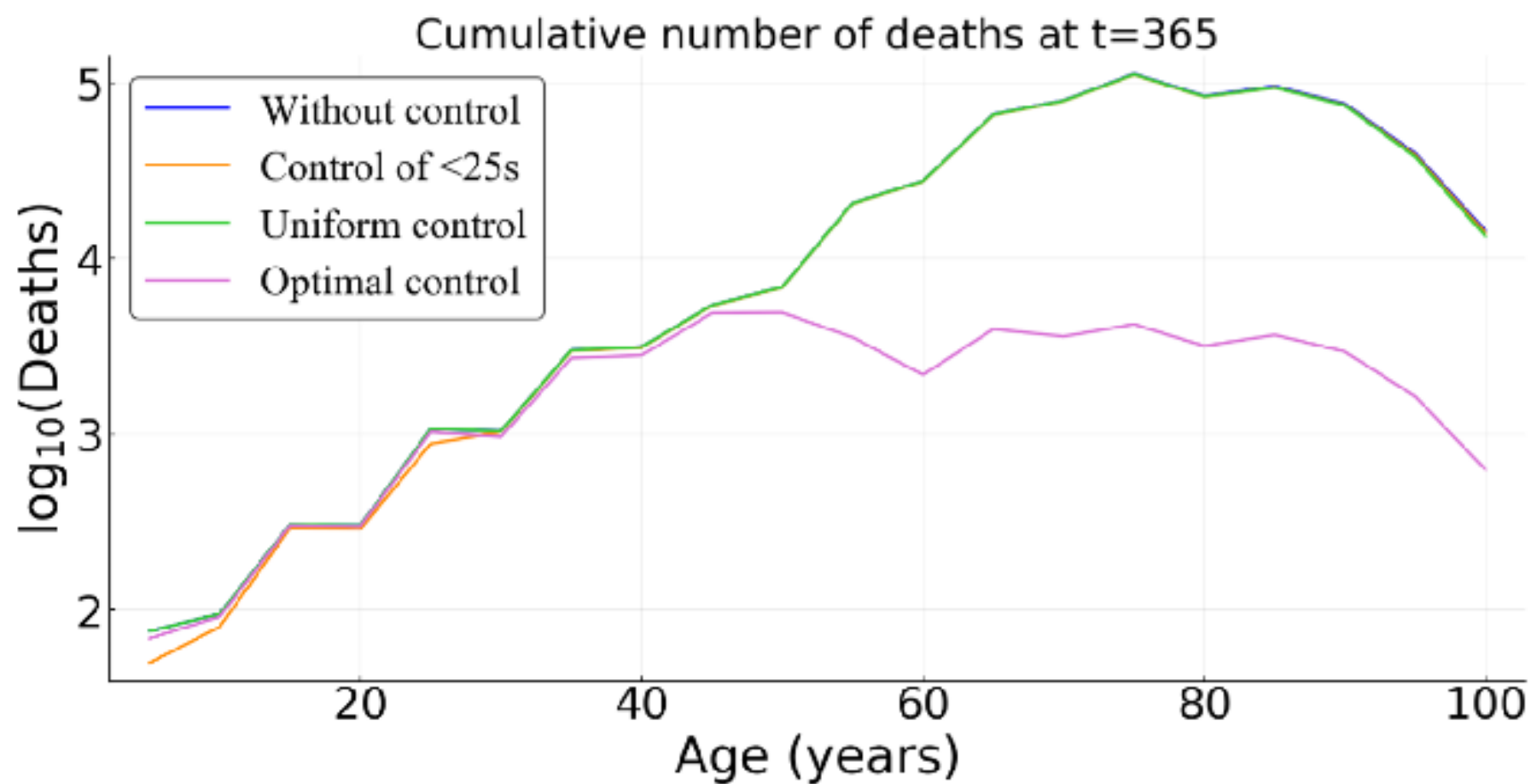
# OPTIMAL CONTROL (CHEAP)



# COMPARING CONTROL SCENARIOS



# COMPARING CONTROL SCENARIOS



# FRENCH COVID MODELLING

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**6. Within-host kinetics**

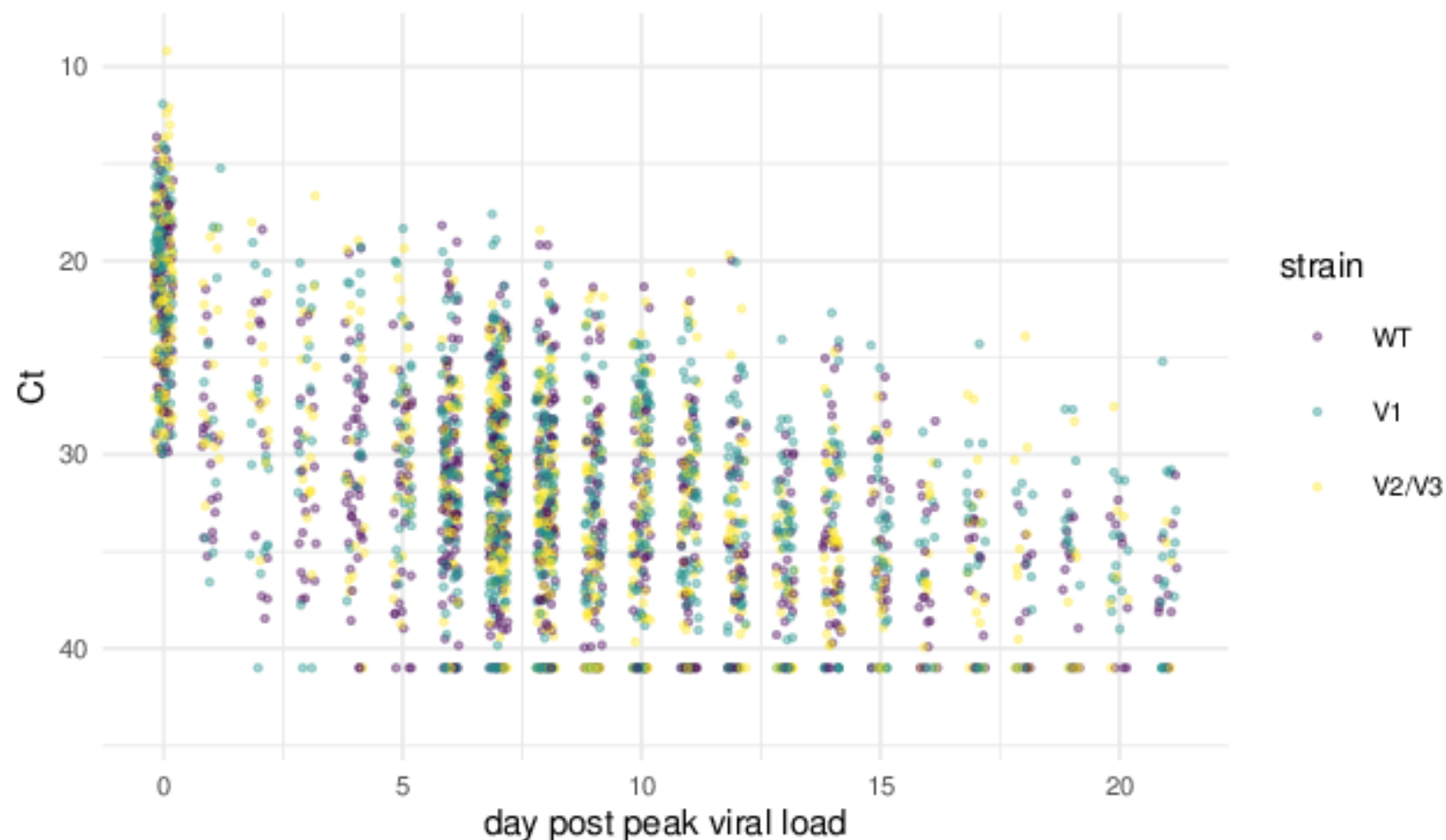
7. Variant transmission advantage

Elie, Lecorche, Sofonea, Trombert-Paolantoni,  
Foulongne, Guedj, Haim-Boukoba, Roquebert, Alizon (2021, medRxiv)

# DATA ANALYZED (N=8,006)

Variable	Value	Median (IQR or n %)
sampling context	<i>general population (ref)</i>	7510 (94%)
	<i>hospital</i>	496 (6%)
age		42 [26-59] years
follow up duration		8 [6-12] days
date of first swab (in 2021)		Mar 7 [Feb 19-Mar 20]
lineage	<i>wildtype (ref)</i>	1643 (21%)
	<i>B.1.1.7 (V1)</i>	5874 (73%)
	<i>B.1.351 or P.1 (V2/V3)</i>	489 (6%)
samples per individual	<i>2</i>	7091 (88%)
	<i>3</i>	774 (10%)
	<i>&gt;3</i>	141 (2%)
sampling region	<i>Ile-de-France (ref.)</i>	5124 (64%)
	<i>other</i>	2882 (36%)
infection phase observed	<i>viral load increase</i>	734 (9%)
	<i>viral load decrease</i>	7363 (92%)
	<i>both</i>	91 (1%)

# SARS-CoV-2 KINETICS



- Collaboration with CERBA and CHU de Montpellier
- >40,000 variant-specific RT-PCR performed between Feb 8 and Mar 20, 2021
- 8,006 individuals with longitudinal follow-up

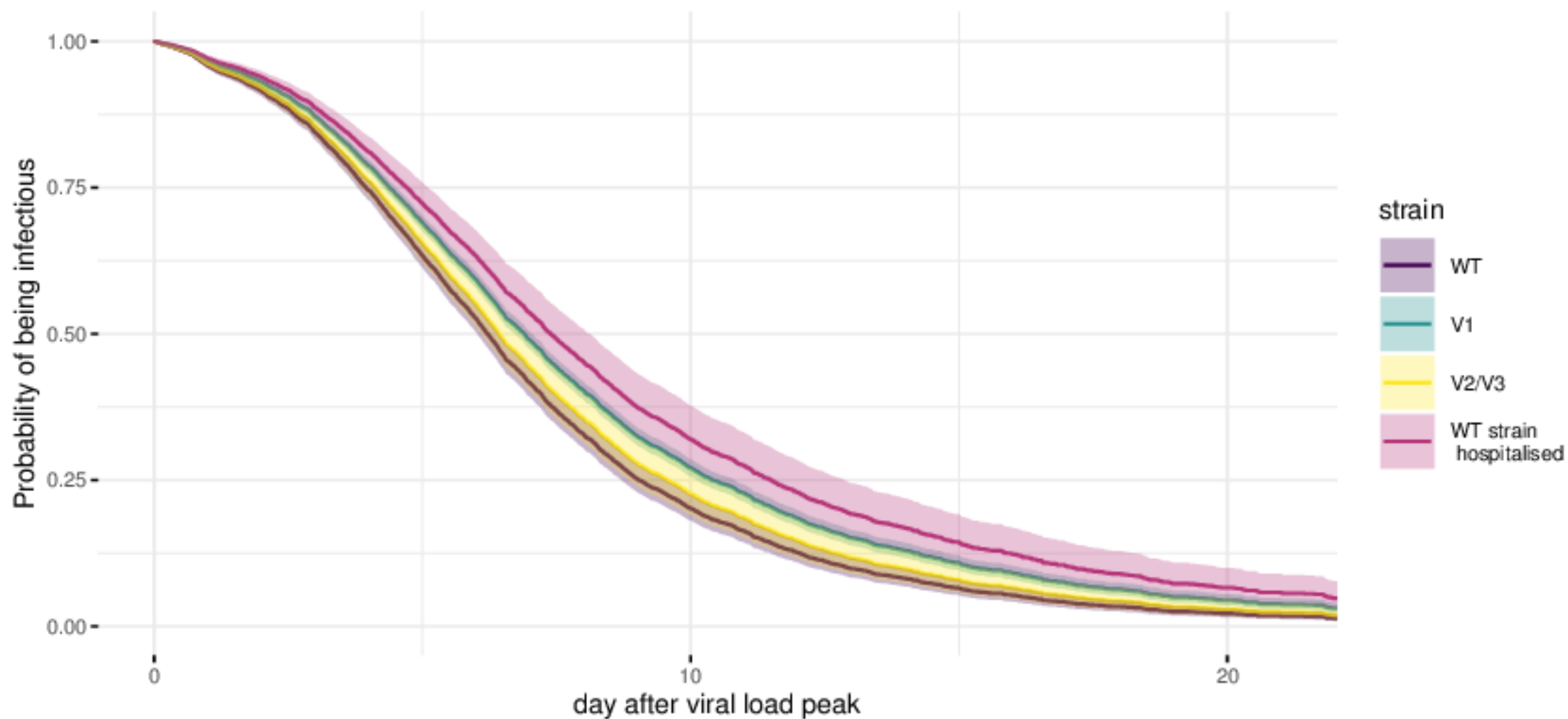
# LINEAR MIXED MODELS

- We consider main effects (age, strain, day, date, region, hospital),
- interactions (strain:age, strain:hospital, day:strain, day:age, day:hospital),
- a random effect on the intercept (`lmer` function in the `lme4` R package),
- and perform model selection on all the combinations (BIC criterion).

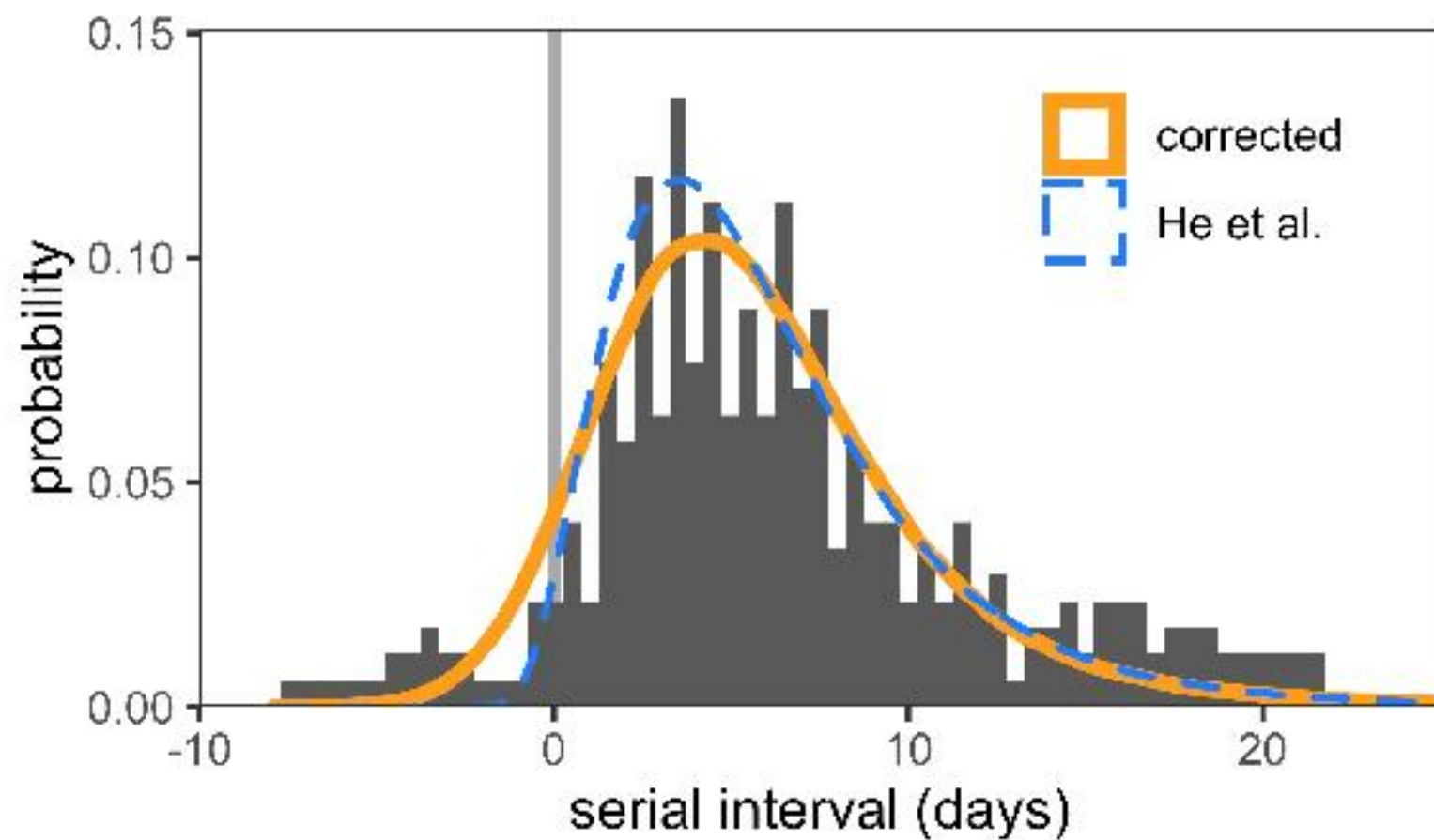
# BEST MODEL

Predictor		Estimate	95% CI
<b>Intercept</b>		<b>23.4</b>	<b>(22.9,23.9)</b>
<b>day</b>		<b>1.19</b>	<b>(1.15,1.23)</b>
strain	<i>wildtype</i>	ref	—
	<i>V1</i>	-0.452	(-0.974,0.0702)
	<b><i>V2/V3</i></b>	<b>-1.27</b>	<b>(-2.21,-0.332)</b>
hospital	<i>no</i>	ref	—
	<b><i>yes</i></b>	<b>-1.01</b>	<b>(-1.46,-0.551)</b>
age		-0.00575	(-0.0143,0.00284)
region	<i>Ile-de-France</i>	ref	—
	<b><i>Normandie</i></b>	<b>-1.01</b>	<b>(-1.3,-0.713)</b>
<b>date</b>		<b>0.0066</b>	<b>(0.000851,0.0124)</b>
age:strain	<i>V1</i>	-0.014	(-0.0234,-0.00456)
	<i>V2/V3</i>	0.0123	(-0.00626,0.0308)
day:strain	<i>V1</i>	-0.0481	(-0.0795,-0.0166)
	<i>V2/V3</i>	0.0246	(-0.033,0.0823)
<b>day:hospital</b>		<b>-0.0725</b>	<b>(-0.125,-0.0201)</b>
<b>day:age</b>		<b>-0.00358</b>	<b>(-0.00415,-0.003)</b>

# SURVIVAL ANALYSIS APPROACH

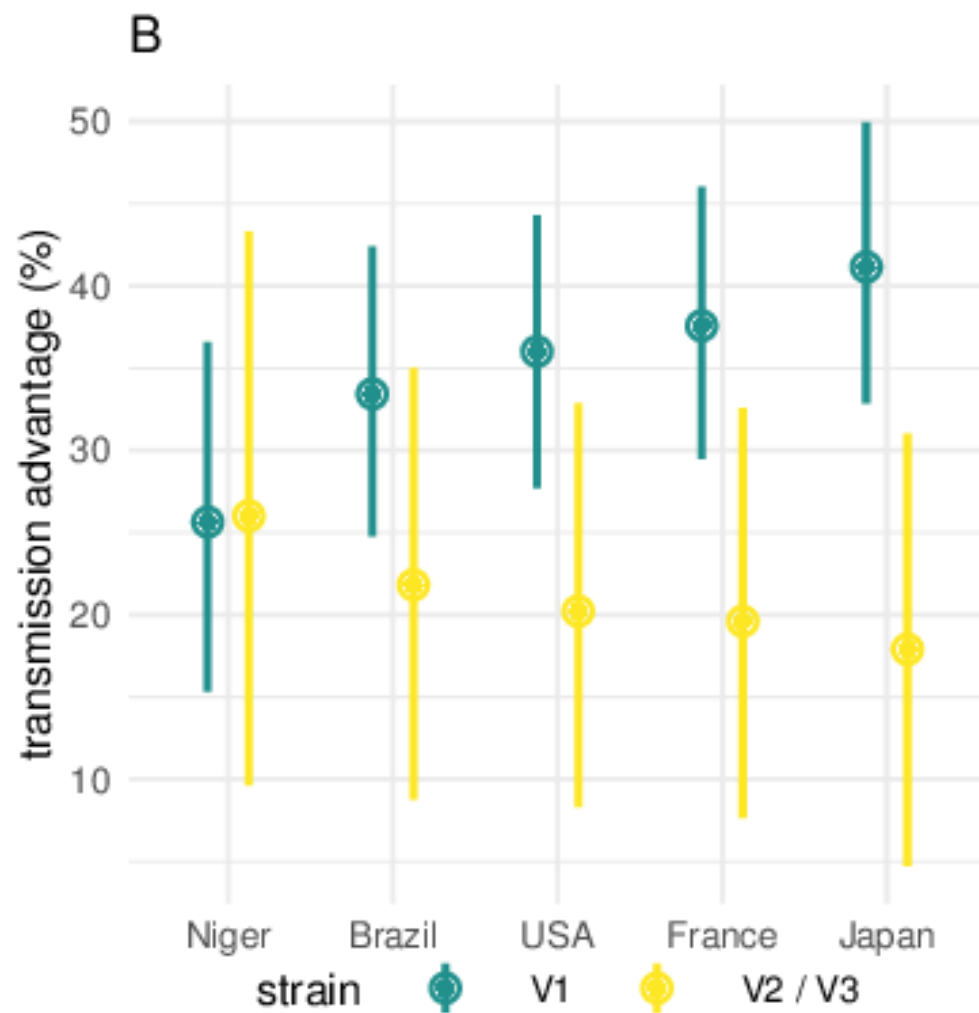
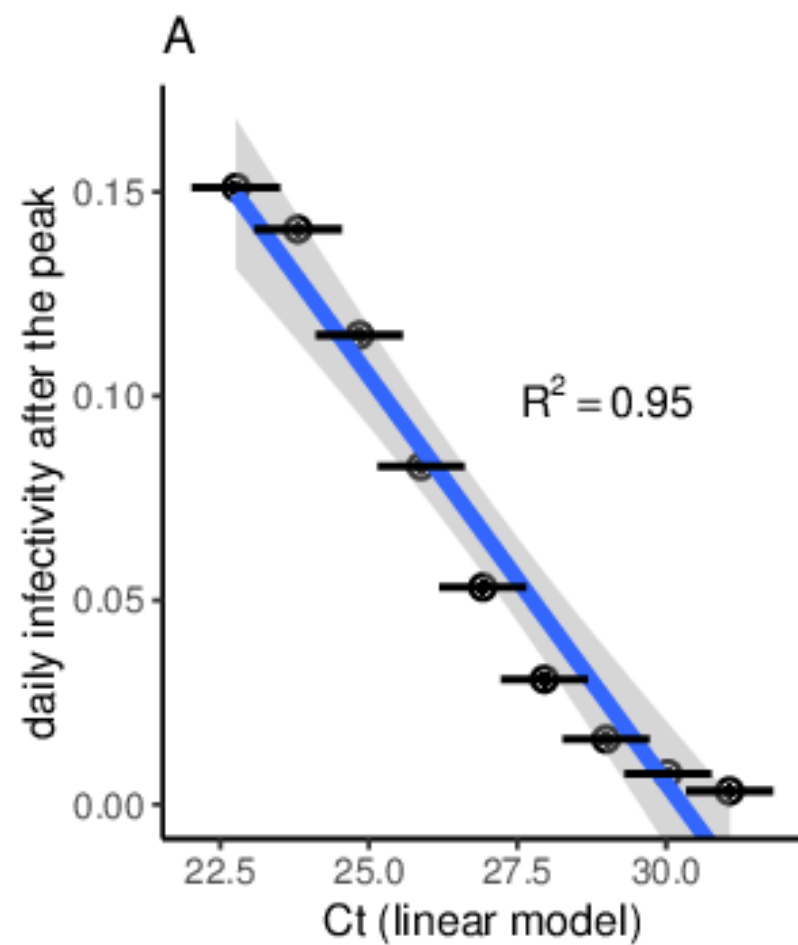


# EPIDEMIOLOGICAL IMPACT



Ashcroft *et alii* (2020, *Swiss Med Wkly*) correcting He *et alii* (2020, *Nat Med*)

# EPIDEMIOLOGICAL IMPACT



## VARIANT-SPECIFIC KINETICS

- V1 and V2/V3 have a higher virus load peak than WT (with a correlation with age for V1)
- V1 causes longer infections than WT
- V1's transmission advantage could depend on population demography

# FRENCH COVID MODELLING

2. ICU modelling

3. Phylodynamics

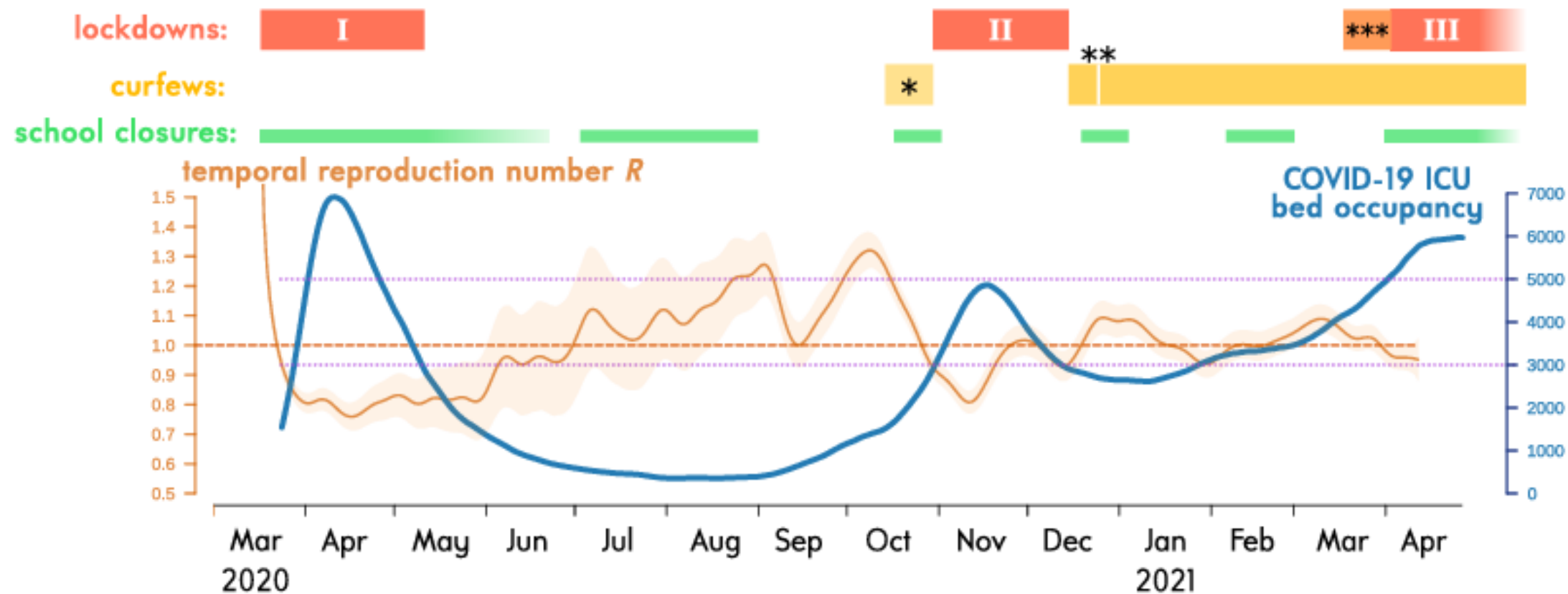
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# TWO WAVES AND A HIGH TIDE



# TRANSMISSION ADVANTAGE

The selection advantage  $s$  of a variant in frequency  $p$  in the population is

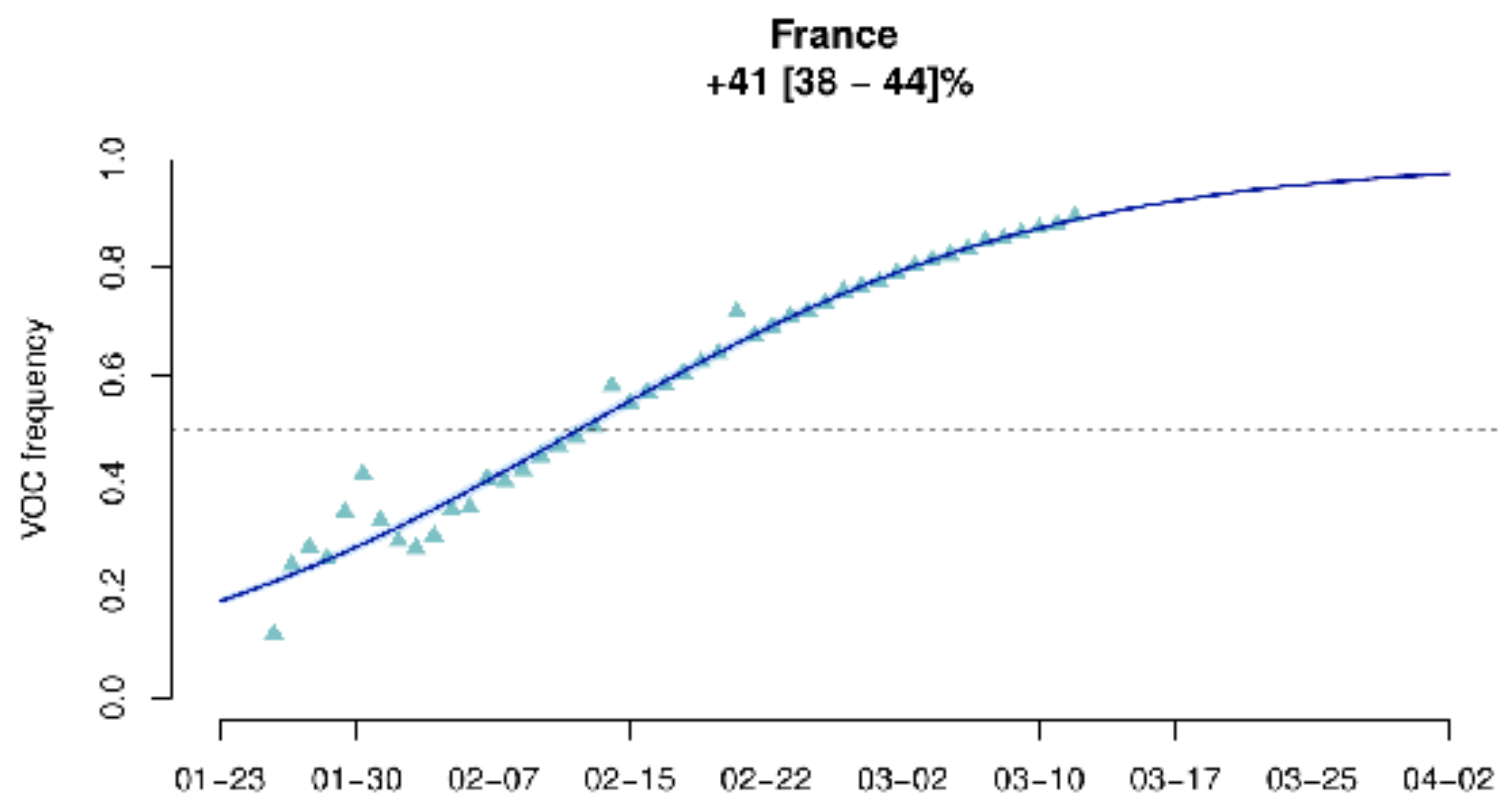
$$s = \frac{d}{dt} \log \left( \frac{p(t)}{1 - p(t)} \right)$$

If  $V(t)$  is the number of variants and  $W(t)$  the number of wild types, then

$$\begin{aligned} s &= \frac{d \log(V)}{dt} - \frac{d \log(W)}{dt} \\ &= r_V - r_W \\ &= \Delta r \end{aligned}$$

Finally, if  $T$  is the generation time we get  $s_T = s \times T$

# VARIANT ADVANTAGE



# VARIANT REPLACEMENT

