



*A unified stochastic modelling framework for the
spread of nosocomial infections*

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Outline I

- 1 Hospital-acquired (nosocomial) infections: a short overview
- 2 Existing models in the literature
- 3 A general stochastic framework
- 4 Quantities of Interest
- 5 Results



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Nosocomial infections: a short overview

- Hospital-acquired infections (HAI, or nosocomial infections), are infections that are acquired in healthcare facilities.
- These infections can be viral or bacterial, and can be spread in many different ways:
 - 1 By means of the contaminated hands of healthcare workers (vectors)
 - 2 Airborne transmission,
 - 3 Contaminated clinical equipment,
 - 4 Contaminated surfaces (hand-to-surface and surface-to-hand contacts)
- They can be specially problematic due to many reasons:
 - 1 Opportunities for bacteria to infect open wounds,
 - 2 Immunocompromised and aged individuals,
 - 3 Link to antibiotic resistance due to high exposure levels to antibiotics,
 - 4 Healthcare workers can act as *super-spreaders* just by contaminated hands.



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Nosocomial infections: a short overview

- Particularly problematic are multi-drug resistant bacteria (MDRB). In Europe, MDRB cause around 33,000 deaths per year, where around 75% of this burden of disease is due to hospital-acquired infections.¹
- Control strategies usually implemented:
 - 1 Isolation of infected patients (screening policies to detect them)
 - 2 Specific protocols to improve hand-hygiene level HCWs,
 - 3 Patient cohorting,
 - 4 Environmental cleaning of contaminated hospital wards,
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¹Cassini et al. (2019) The Lancet Infectious Diseases, 19: 56-66.



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Nosocomial infections: a short overview

- Mathematical models have recently shown the potential to analyse these outbreaks.
- To assess the efficacy of each control strategy
- To identify the most probable routes of spread for these infections
- But we need to note:
 - 1 Very small populations (5 – 100 patients & HCWs in a hospital ward)
 - 2 Highly heterogeneous populations (healthy vs. immunocompromised individuals, patients in different rooms, airflow dynamics affecting the airborne spread in different ways at different rooms, patient cohorting, isolation of individuals,...),

⇒ Stochastic approaches



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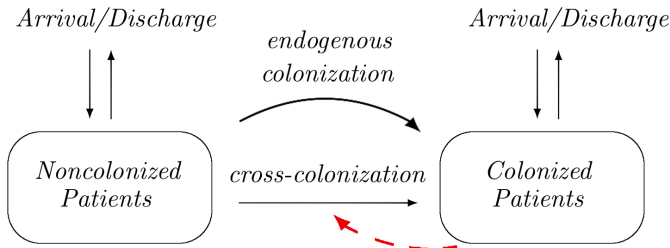


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Simple models only with patients

Pelupessy et al. (2002)

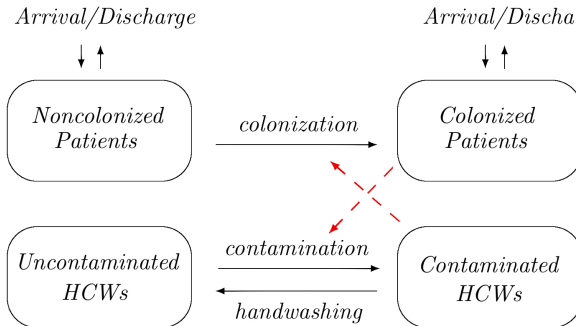


$I(t)$ = Number of colonized patients at time t

- Spontaneous colonization: α
- Cross-colonization: $\frac{\theta I(t)}{N}$
- Discharge of non-colonized: $\frac{1}{d}$
- Discharge of colonized patients: $\frac{1}{d'}$
- Probability of colonized admitted patient: q

Models that explicitly incorporate HCWs

Austin et al., Cooper et al. (1999), Chamchod & Ruan (2012), Artalejo (2014)

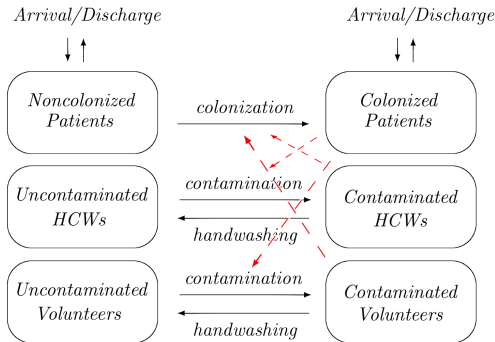


- N patients
- N' healthcare workers (HCWs)
- Discharge of patients: rate μ
- Colonization probability of admitted patients: σ
- Patient-to-HCW contamination: β'
- HCW-to-patient colonization: β
- Handwashing: rate μ'
- Detection of each patient: γ



Models that include additional agents. E.g., volunteers

Wang et al. (2011)



- N_p patients
- N_{HCW} HCWs
- N_V volunteers
- Patients admission: λ
- Admitted patients colonized with probability φ
- HCW-patient contact: β_{PH}
- Volunteer-patient contact: β_{PV}
- Hygienic level during contacts for HCWs: $\eta \in (0, 1)$
- Hygienic level during contacts for volunteers: $\xi \in (0, 1)$

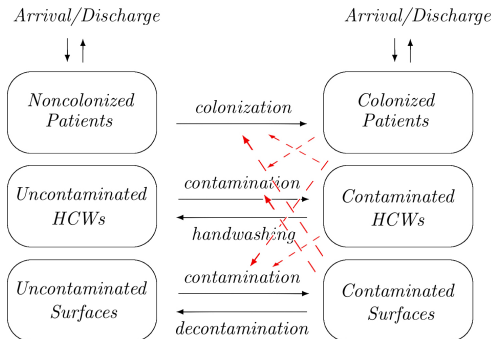
- HCWs hand-washing: γ_H
- Volunteers hand-washing: γ_V

- Discharge of colonized pat.: δ_C
- Discharge of non-colonized pat.: δ_U



Addressing other factors: environmental contamination

Wolkewitz et al. (2008)



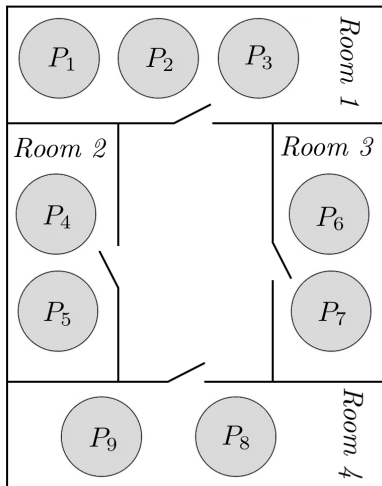
- N_p patients
- N_s HCWs
- N_e surfaces
- Discharge of colonized patients: γ'
- Discharge of non-colonized pat.: γ
- Colonization probability of admitted pat.: ϕ
- HCW decontamination: μ
- Surface decontamination: κ

- Staff-to-patient transmission: β_{sp}
- Patient-to-staff transmission: β_{ps}
- Surface-to-patient transmission: β_{ep}
- Patient-to-surface transmission: β_{pe}
- Staff-to-surface transmission: β_{se}
- Surface-to-patient transmission: β_{es}



Incorporating room configuration

López-García (2016)

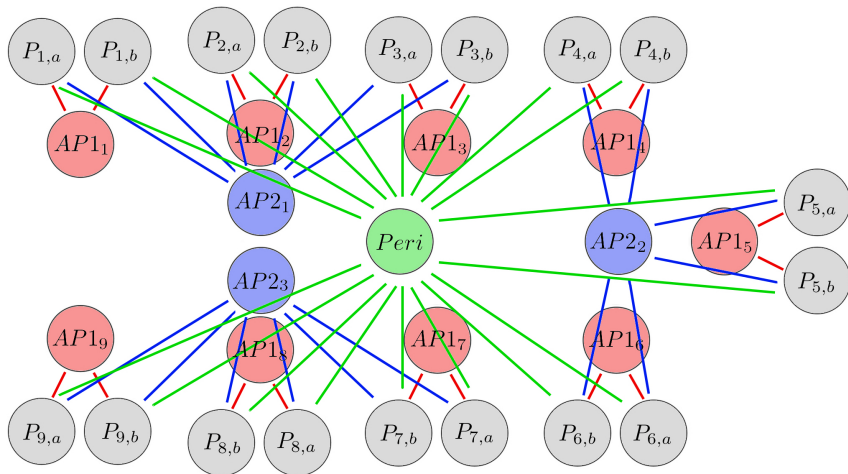


- 9 patients located among 4 different rooms
- Patients in the same room have transmission rate β
- Patients in different rooms have transmission rate β'
- Patients are discharged with rate γ , and immediately replaced by new ones



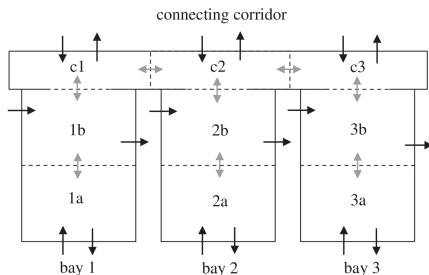
Patient cohorting

Temime et al. (2009)





Airborne transmission: incorporating airflow dynamics



Noakes & Sleight (2009)

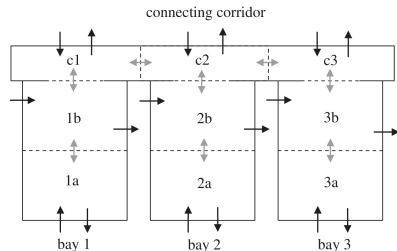
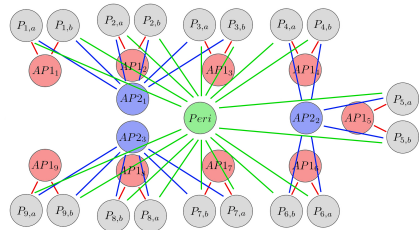
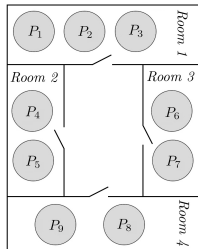
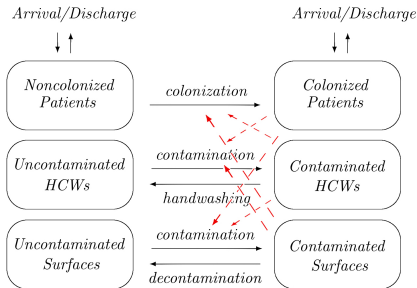
$$\begin{pmatrix} \frac{\beta_1}{p_1} \\ \frac{\beta_2}{p_2} \\ \vdots \\ \frac{\beta_M}{p_M} \end{pmatrix} = \mathbf{V}^{-1} \begin{pmatrix} q_1 l_1 \\ q_2 l_2 \\ \vdots \\ q_M l_M \end{pmatrix},$$

- Patients are distributed among M different rooms, and pathogen spreads through air. For $1 \leq i \leq M$,

C_i = "Pathogen concentration at ventilation zone i ",

$$V_i \frac{dC_i}{dt} = q_i l_i - Q_i C_i - \sum_{k=1}^M \beta_{ik} C_i + \sum_{k=1}^M \beta_{ki} C_k,$$

- Each time (i_1, \dots, i_M) changes \Rightarrow Compute steady-state concentration of pathogen at each room
- Infection rate of an individual at room j : $\beta_j = f_j(i_1, \dots, i_M)$

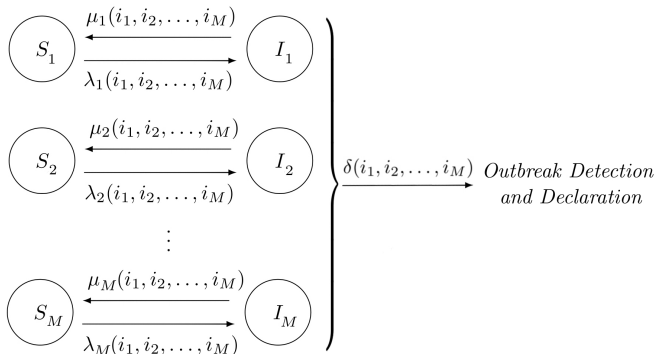




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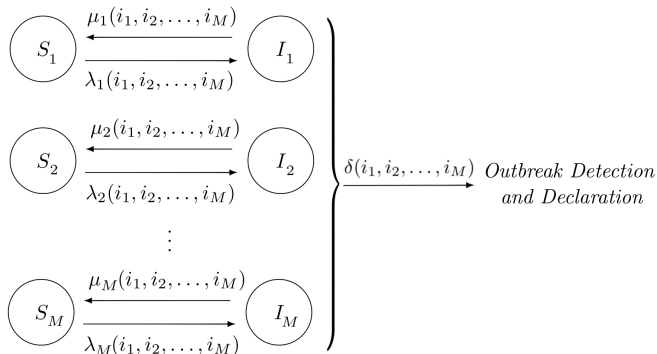
A general stochastic framework



- Individuals are distributed among M different compartments
- At each compartment j , the number of individuals is constant, N_j
- Infection/Contamination of an individual at compartment i : $\lambda_i(i_1, i_2, \dots, i_M)$
- Removal of an individual at compartment i : $\mu_i(i_1, i_2, \dots, i_M)$
- Detection of the outbreak: $\delta(i_1, \dots, i_M)$



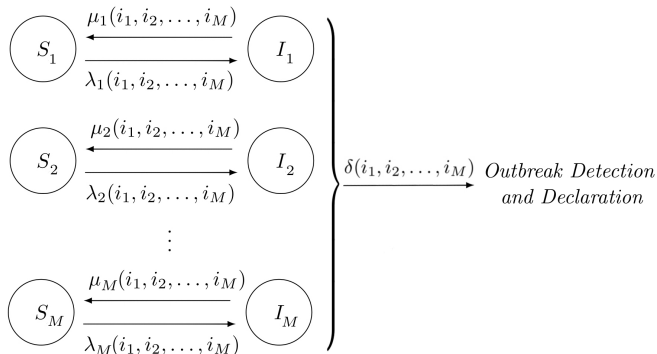
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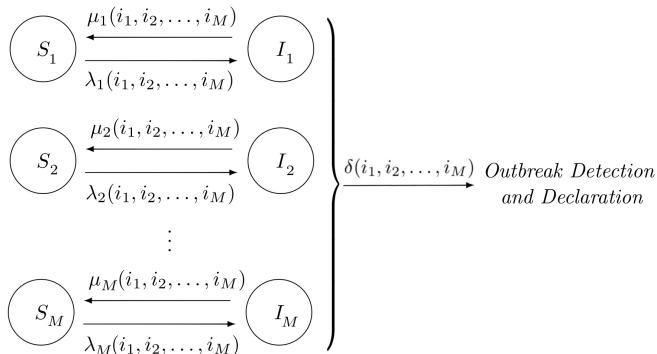
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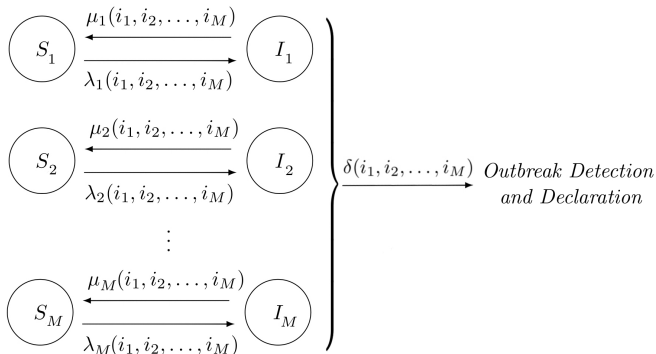
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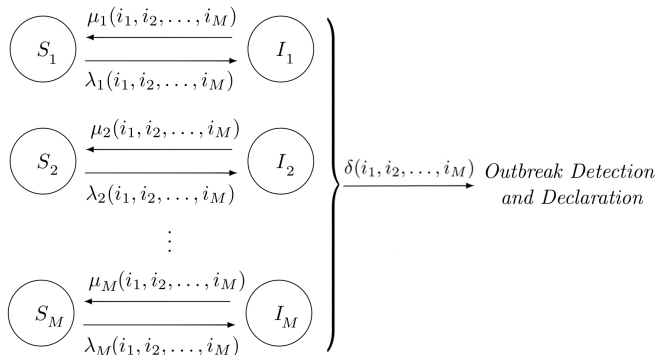
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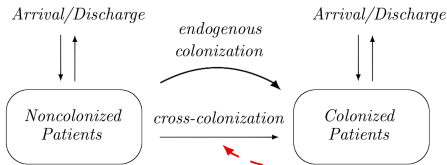


Continuous-time stochastic process: $\mathcal{X} = \{(i_1(t), i_2(t), \dots, i_M(t)) : t \geq 0\}$

- $(i_1, i_2, \dots, i_j, \dots, i_M) \rightarrow (i_1, i_2, \dots, i_j + 1, \dots, i_M)$, with rate $\lambda_j(i_1, i_2, \dots, i_M)$
- $(i_1, i_2, \dots, i_j, \dots, i_M) \rightarrow (i_1, i_2, \dots, i_j - 1, \dots, i_M)$, with rate $\mu_j(i_1, i_2, \dots, i_M)$
- $(i_1, i_2, \dots, i_j, \dots, i_M) \rightarrow \text{Detection}$, with rate $\delta(i_1, i_2, \dots, i_M)$



Model as in Pelupessy et al. (2002)

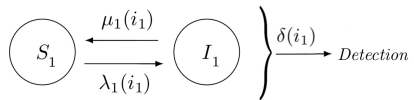


$I(t)$ = Number of colonized patients at time t

- Each patient can be spontaneously colonized at rate α
- Cross-colonization occurs at rate $\frac{\theta I(t)}{N}$
- Colonized patients are discharged at rate $\frac{1}{d'}$
- Noncolonized patients are discharged at rate $\frac{1}{d}$
- New patient immediately arrives after discharge, being colonized with probability q

Equivalent representation in our framework

$M = 1, N_1 = N$



$I_1(t)$ = Number of colonized patients at time t

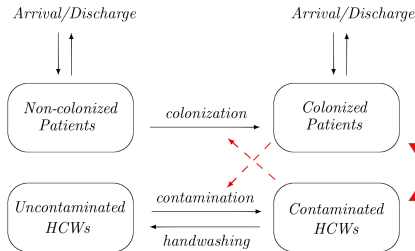
$$\lambda_1(i_1) = \left(\frac{q}{d} + \alpha + \frac{\theta i_1}{N} \right) (N_1 - i_1)$$

$$\mu_1(i_1) = \frac{1-q}{d'} i_1$$

$$\delta(i_1) = \delta$$

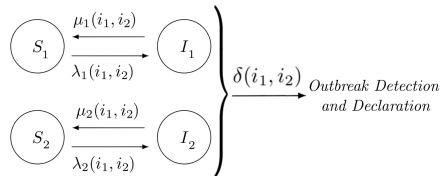


Model as in Artalejo (2014)



Representation in our framework

$$M = 2, N_1 = N_p, N_2 = N_{HCW}$$



$I_1(t)$ = Number of colonized patients at time t

$I_2(t)$ = Number of contaminated HCWs at time t

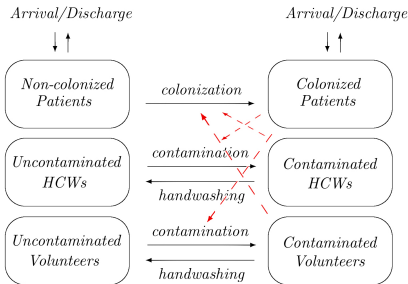
$$\lambda_1(i_1, i_2) = (\sigma\mu + \beta i_2)(N_1 - i_1) \quad \mu_1(i_1, i_2) = (1 - \sigma)\mu i_1$$

$$\lambda_2(i_1, i_2) = \beta' i_1(N_2 - i_2) \quad \mu_2(i_1, i_2) = \mu' i_2$$

$$\delta(i_1, i_2) = \gamma i_1$$

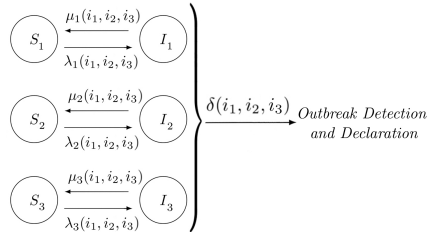


Model as in Wang et al. (2011)



Representation in our framework*

$$M = 3, N_1 = N_P, N_2 = N_{HCW}, N_3 = N_V$$



$I_1(t)$ = Number of colonized patients at time t

$I_2(t)$ = Number of contaminated HCWs at time t

$I_3(t)$ = Number of contaminated volunteers at time t

$$\lambda_1(i_1, i_2, i_3) = \left(\frac{1-\eta}{N_P} \beta_{PH} i_2 + \frac{1-\xi}{N_P} \beta_{PV} i_3 + \delta_U \varphi \right) (N_1 - i_1)$$

$$\lambda_2(i_1, i_2, i_3) = \frac{1-\eta}{N_P} \beta_{PH} i_1 (N_2 - i_2) \quad \mu_1(i_1, i_2, i_3) = \delta_C i_1 (1 - \varphi)$$

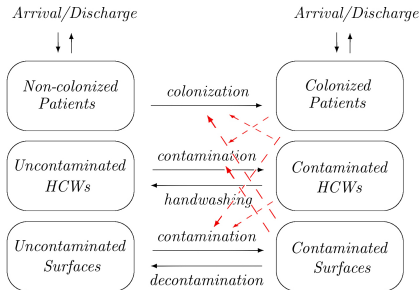
$$\lambda_3(i_1, i_2, i_3) = \frac{1-\xi}{N_P} \beta_{PV} i_1 (N_3 - i_3) \quad \mu_2(i_1, i_2, i_3) = \gamma_H i_2$$

$$\mu_3(i_1, i_2, i_3) = \gamma_V i_3 \quad \delta(i_1, i_2, i_3) = 0$$

* Immediate arrival assumed ($\lambda \rightarrow \infty$)

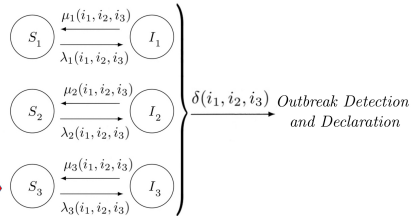


Model as in Wolkewitz et al. (2008)



Representation in our framework

$$M = 3, N_1 = N_p, N_2 = N_s, N_3 = N_e$$



$I_1(t)$ = Number of colonized patients at time t

$I_2(t)$ = Number of contaminated HCWs at time t

$I_3(t)$ = Number of contaminated surfaces at time t

$$\lambda_1(i_1, i_2, i_3) = \left(\gamma\phi + \frac{i_2\beta_{sp}}{N_s} + \frac{i_3\beta_{ep}}{N_e} \right) (N_1 - i_1)$$

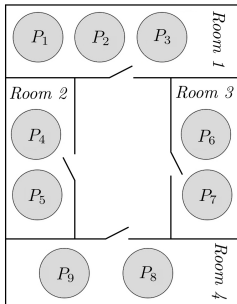
$$\lambda_2(i_1, i_2, i_3) = \left(\frac{i_1\beta_{ps}}{N_p} + \frac{i_3\beta_{es}}{N_e} \right) (N_2 - i_2) \quad \mu_1(i_1, i_2, i_3) = \gamma' i_1 (1 - \phi)$$

$$\lambda_3(i_1, i_2, i_3) = \left(\frac{i_2\beta_{se}}{N_s} + \frac{i_1\beta_{pe}}{N_p} \right) (N_3 - i_3) \quad \mu_2(i_1, i_2, i_3) = \mu i_2$$

$$\mu_3(i_1, i_2, i_3) = \kappa i_3 \quad \delta(i_1, i_2, i_3) = 0$$

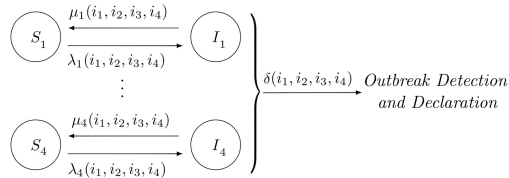


Hospital ward room configuration from
 López-García (2016)



Representation in our framework*

$$M = 4, N_1 = 3, N_i = 2 \quad 2 \leq i \leq 4$$



$I_j(t)$ = Number of colonized patients at room j at time t , $1 \leq j \leq 4$

ν = discharge rate p_C = probability of admission of colonized patient

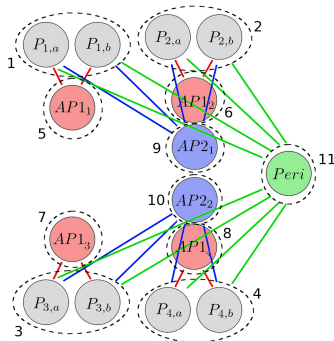
$$\mu_j(i_1, i_2, i_3, i_4) = \nu(1 - p_C) i_j, \quad 1 \leq j \leq 4 \quad \delta(i_1, i_2, i_3, i_4) = 0$$

$$\lambda_j(i_1, i_2, i_3, i_4) = \left(\nu p_C + \beta_{DR} \sum_{k \neq j} i_k + \beta_{SR} i_j + \lambda \right) (N_j - i_j), \quad 1 \leq j \leq 4$$

*Discharge and arrival of patients considered, instead of recovery

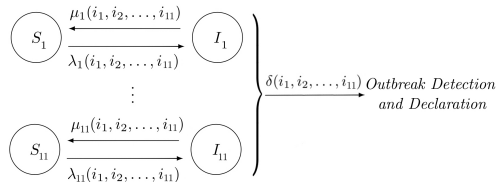


Hospital ward contact network from Temime et al. (2009)



Representation in our framework

$$M = 11, N_i = 2 \ 1 \leq i \leq 4, N_j = 1 \ 5 \leq j \leq 11$$



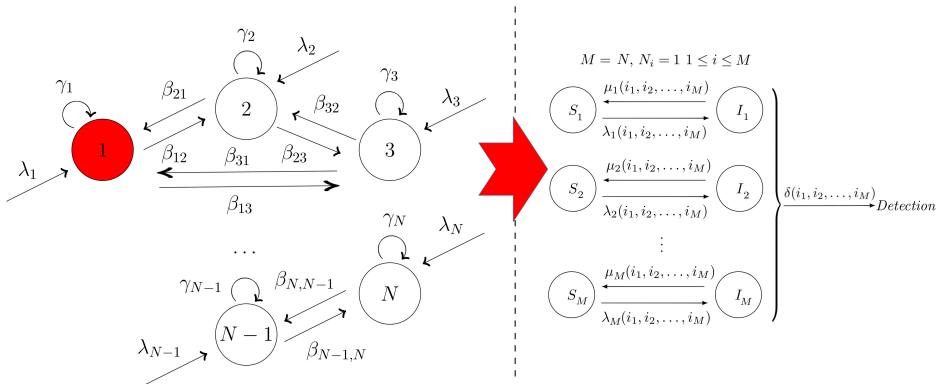
$I_i(t)$ = Number (0, 1 or 2) of colonized patients treated by $AP1_i$ at time t , $1 \leq i \leq 4$

$I_{4+j}(t)$ = Number (0 or 1) of contaminated $AP1_j$ at time t , $1 \leq j \leq 4$

$I_{8+k}(t)$ = Number (0 or 1) of contaminated $AP2_k$ at time t , $1 \leq k \leq 2$

$I_{11}(t)$ = Number (0 or 1) of contaminated $Peri$ at time t

Epidemics on networks



Stochastic descriptors in an SIR epidemic model for heterogeneous individuals in small networks

M. López-García^a

^a Department of Applied Mathematics, School of Mathematics, University of Leeds, Leeds LS2 9JT, United Kingdom

A stochastic SIS epidemic model with heterogeneous contacts

A. Economou^{a,*}, A. Gómez-Corral^{b,c}, M. López-García^d

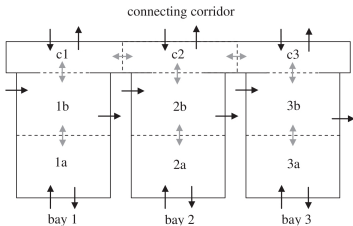
^a Section of Statistics and Operations Research, Department of Mathematics, University of Athens, Panepistimiopolis, Athens 15704, Greece

^b ICMAT – Institute of Mathematical Sciences, Calle Nicolás Cabrera, 13-15, Madrid 28049, Spain

^c Department of Statistics and Operations Research, Faculty of Mathematics, Complutense University of Madrid, Madrid 28040, Spain



Model as in Noakes & Sleigh (2009)

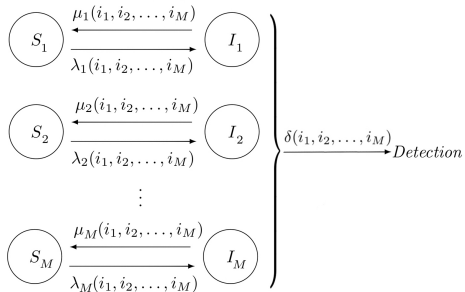


C_i = "Pathogen concentration at ventilation zone i ",

$$V_i \frac{dC_i}{dt} = qI_i - Q_i C_i - \sum_{k=1}^M \beta_{ik} C_i + \sum_{k=1}^M \beta_{ki} C_k,$$

$$\begin{pmatrix} \beta_1 \\ \beta_2 \\ \vdots \\ \beta_M \end{pmatrix} = \rho \mathbf{V}^{-1} \begin{pmatrix} qI_1 \\ qI_2 \\ \vdots \\ qI_M \end{pmatrix}$$

Equivalent representation in our framework



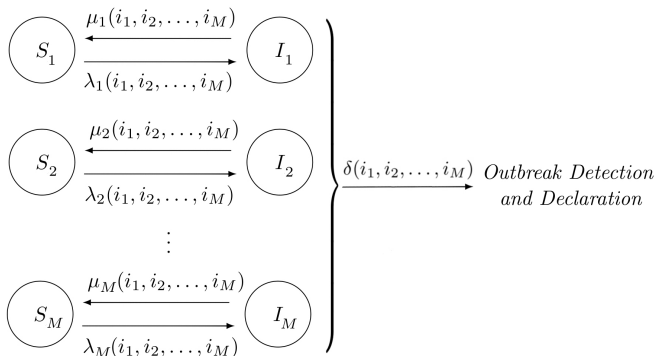
$$\begin{pmatrix} \lambda_1(i_1, \dots, i_M) \\ \lambda_2(i_1, \dots, i_M) \\ \vdots \\ \lambda_M(i_1, \dots, i_M) \end{pmatrix} = \rho \mathbf{V}^{-1} \begin{pmatrix} qI_1 \\ qI_2 \\ \vdots \\ qI_M \end{pmatrix}$$



Outline I

- 1 Hospital-acquired (nosocomial) infections: a short overview
- 2 Existing models in the literature
- 3 A general stochastic framework
- 4 Quantities of Interest**
- 5 Results

A general stochastic framework



Continuous-time stochastic process: $\mathcal{X} = \{(I_1(t), I_2(t), \dots, I_M(t)) : t \geq 0\}$

- $(i_1, i_2, \dots, i_j, \dots, i_M) \rightarrow (i_1, i_2, \dots, i_j + 1, \dots, i_M)$, with rate $\lambda_j(i_1, i_2, \dots, i_M)$
- $(i_1, i_2, \dots, i_j, \dots, i_M) \rightarrow (i_1, i_2, \dots, i_j - 1, \dots, i_M)$, with rate $\mu_j(i_1, i_2, \dots, i_M)$
- $(i_1, i_2, \dots, i_j, \dots, i_M) \rightarrow \text{Detection}$, with rate $\delta(i_1, i_2, \dots, i_M)$



Summary statistics

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doi:10.1098/rsif.2007.1106
Published online 17 July 2007

On methods for studying stochastic disease dynamics

M. J. Keeling^{1,*} and J. V. Ross²

¹*Department Biological Sciences and Mathematics Institute, and* ²*Mathematics Institute,
University of Warwick, Gibbet Hill Road, Coventry CV4 7AL, UK*

- Instead of stochastic simulations, one can explore the transient solutions from the Kolmogorov forward differential equations
 - Even better, there are *exact* methods for analysing quantities of interest (*summary statistics*) of the epidemic:
- | | |
|---|--|
| ① Time until epidemic extinction | ③ Reproduction number |
| ② Costs functions related to the outbreak | ④ Size of the outbreak, peak of the outbreak,... |



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Quantities of interest

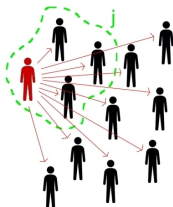
Reproductive number of an individual at compartment j :

$R^{(j)}$ = *Number of infections caused by an infective individual located at compartment j until detection of the outbreak or removal of this individual*

Reproductive number of an individual at compartment j among individuals at compartment k :

$R^{(j)} = \sum_{k=1}^M R^{(j)}(k)$, $R^{(j)}(k)$ = *Number of infections caused by an infective individual*

located at compartment j , among individuals at compartment k , until detection of the outbreak or removal of this individual





Quantities of interest

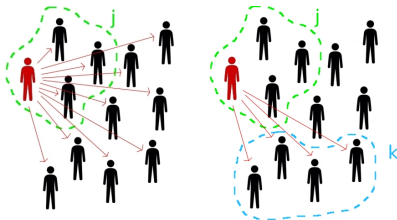
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Quantities of interest: first-step argument

The analysis of these random variables is carried out in terms of a first-step argument:

$$\nu_{(i_1, \dots, i_M)}^{(j)}(n) = \mathbb{P}(R^{(j)} = n \mid (I_1(0), \dots, I_M(0)) = (i_1, \dots, i_M)), \quad n \geq 0,$$

$$\begin{aligned} \theta_{(i_1, \dots, i_M)} \nu_{(i_1, \dots, i_M)}^{(j)}(n) &= \sum_{k=1, k \neq j, i_k > 0}^M \mu_k i_k \nu_{(i_1, \dots, i_k-1, \dots, i_M)}^{(j)}(n) + \mu_j (i_j - 1) \nu_{(i_1, \dots, i_j-1, \dots, i_M)}^{(j)}(n) \\ &+ \sum_{k=1, i_k < N_k}^M (N_k - i_k) \left((\lambda_k + \sum_{l=1, l \neq j}^M \beta_{lk} i_l + \beta_{jk} (i_j - 1)) \nu_{(i_1, \dots, i_k+1, \dots, i_M)}^{(j)}(n) \right. \\ &\left. + 1_{n>0} \beta_{jk} \nu_{(i_1, \dots, i_k+1, \dots, i_M)}^{(j)}(n-1) \right) + (\mu_j + \delta(i_1, \dots, i_M)) 1_{n=0}, \quad n \geq 0, \end{aligned}$$

$$\theta_{(i_1, \dots, i_M)} = \delta(i_1, i_2, \dots, i_M) + \sum_{j=1}^M (\mu_j(i_1, i_2, \dots, i_M) + \lambda_j(i_1, i_2, \dots, i_M))$$

System of linear equations: $\prod_{j=1}^M (N_j + 1)$ equations per each value of $n \geq 0$

$$\mathbf{D}^{(j)}(n) \boldsymbol{\nu}^{(j)}(n) = \mathbf{e}^{(j)}(n),$$



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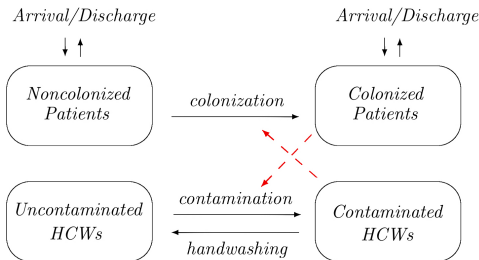
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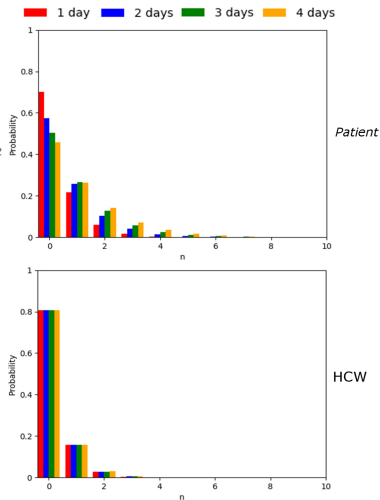
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Model as in Artalejo (2014)

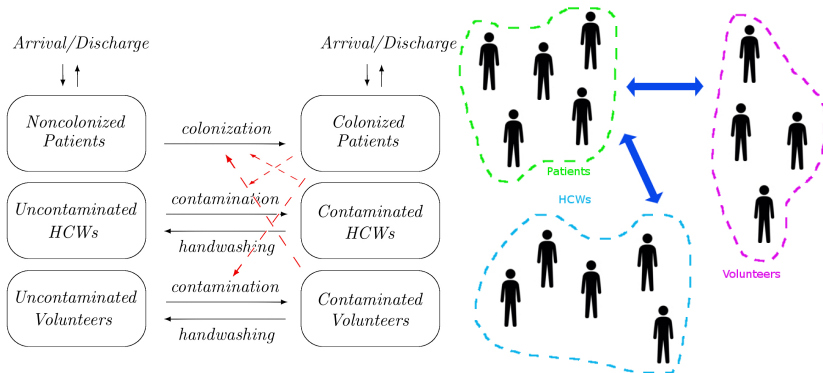


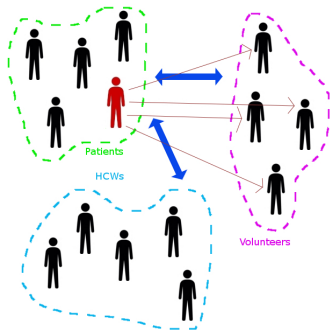
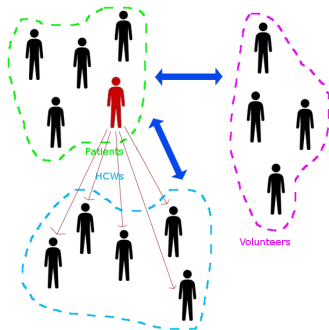
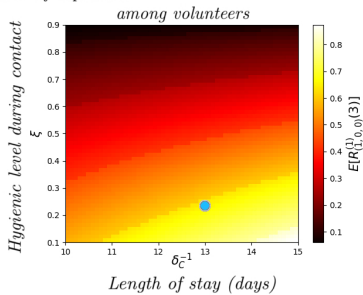
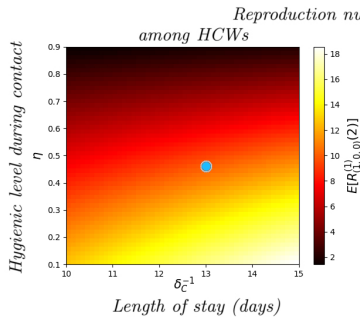
Average outbreak detection time

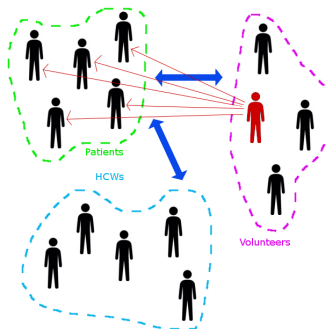
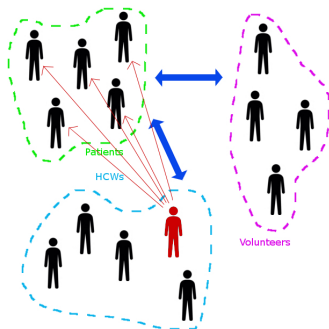
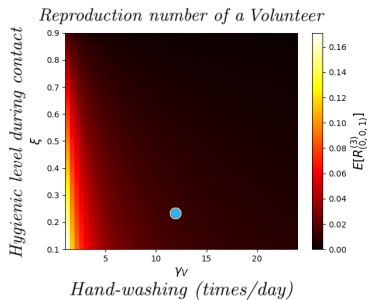
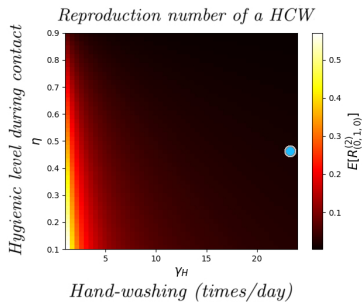




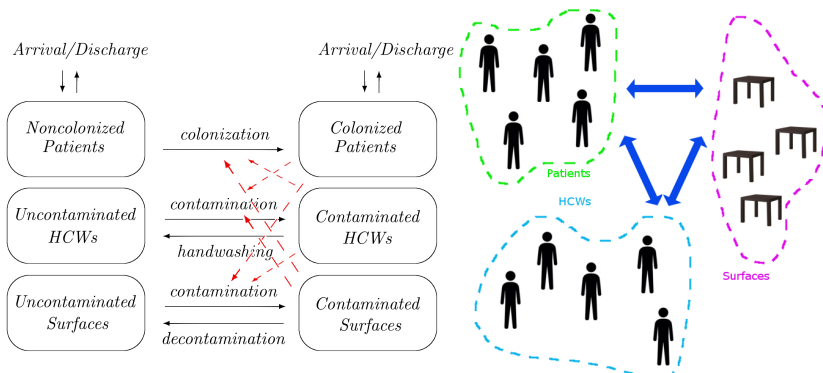
Respiratory Intensive Care Unit at Beijing Tongren Hospital

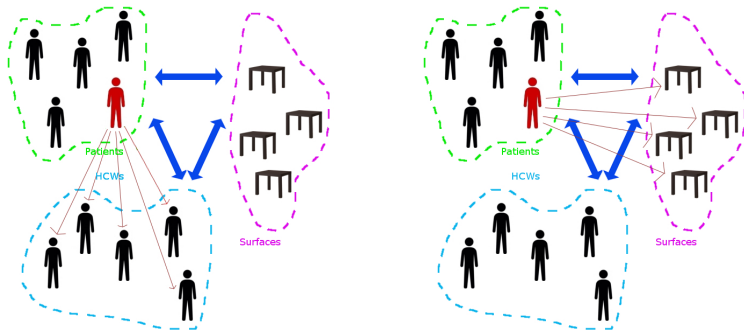
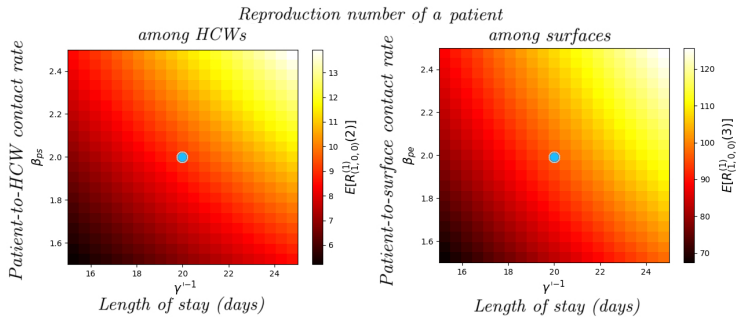




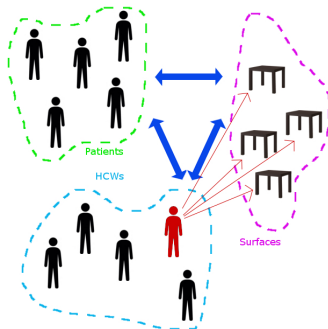
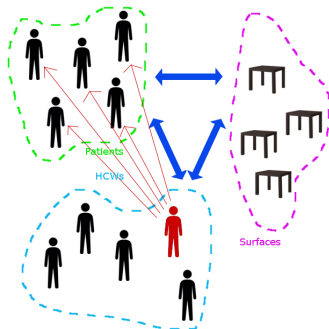
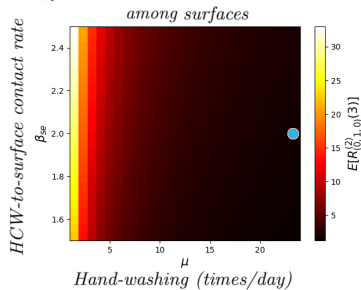
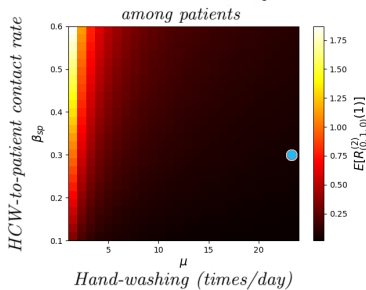


Onco-haematological unit at UMC in Germany

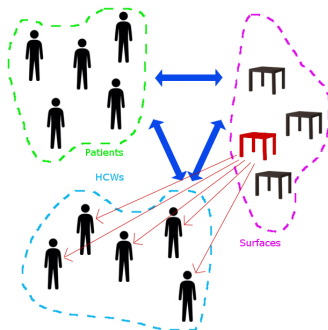
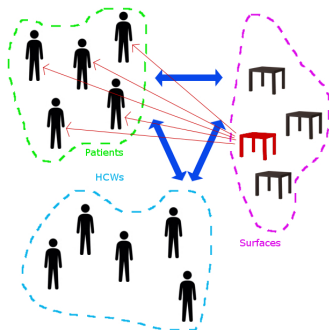
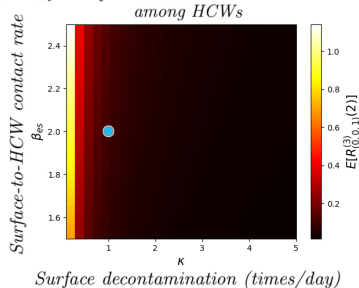
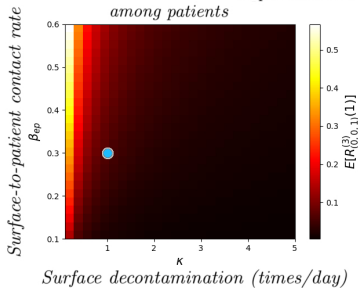




Reproduction number of a HCW



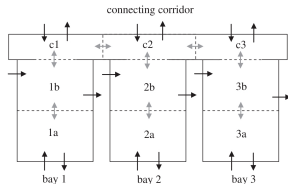
Reproduction number of a surface



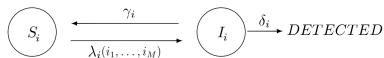


Airborne transmission: incorporating airflow dynamics

Noakes & Sleigh (2009), López-García & King & Noakes (2019)



Infection spread dynamics in each zone:



Patients are distributed among M different zones, and pathogen spreads through air. If one has (I_1, I_2, \dots, I_M) infective individuals in each zone at any time, the concentration of pathogen in the air among the different zones can be modelled as

$$V_i \frac{dC_i(t)}{dt} = qI_i - Q_i C_i(t) - \sum_{k=1}^M \beta_{ik} C_i(t) + \sum_{k=1}^M \beta_{ki} C_k(t), \quad 1 \leq i \leq M$$

$$C_i(t) = \text{Pathogen concentration at ventilation zone } i, \quad 1 \leq i \leq M$$

$$V_i = \text{Volume of zone } i, \quad 1 \leq i \leq M$$

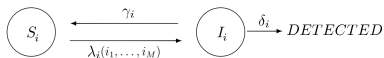
$$q = \text{generation rate of infectious quanta per infected individual,}$$

$$Q_i = \text{extract ventilation rate in zone } i, \quad 1 \leq i \leq M,$$

and $\sum_{k=1}^M \beta_{ik} C_i$ and $\sum_{k=1}^M \beta_{ki} C_k$ represent pathogen spread between zones k and i .



Infection spread dynamics in each zone:



By assuming steady-state conditions for the concentration of pathogen in the air between infection dynamics events, one gets

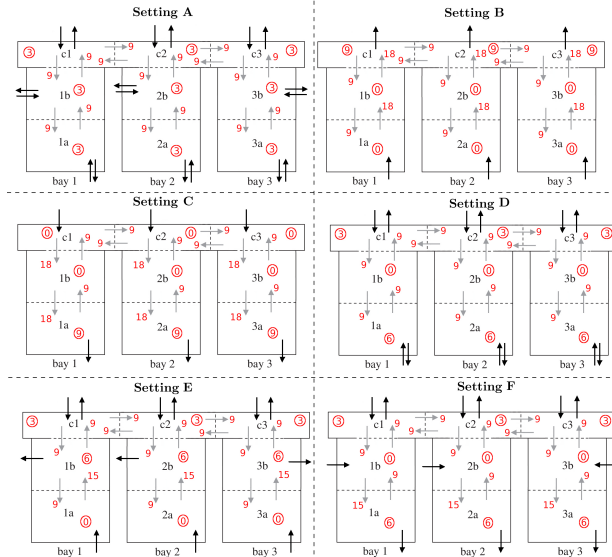
$$\begin{pmatrix} \lambda_1(i_1, \dots, i_M) \\ \lambda_2(i_1, \dots, i_M) \\ \vdots \\ \lambda_M(i_1, \dots, i_M) \end{pmatrix} = p\mathbf{V}^{-1} \begin{pmatrix} qi_1 \\ qi_2 \\ \vdots \\ qi_M \end{pmatrix},$$

where p is the pulmonary rate of individuals in the ward, and \mathbf{V} is the *ventilation matrix*

$$\mathbf{V} = \begin{pmatrix} Q_{o,1} + \sum_k \beta_{1k} & -\beta_{21} & \dots & -\beta_{M-1,1} & -\beta_{M1} \\ -\beta_{12} & Q_{o,2} + \sum_k \beta_{2k} & \dots & -\beta_{M-1,2} & -\beta_{M2} \\ -\beta_{13} & -\beta_{23} & \dots & -\beta_{M-1,3} & -\beta_{M3} \\ \vdots & \vdots & \ddots & \vdots & \vdots \\ -\beta_{1M} & -\beta_{2M} & \dots & -\beta_{M-1,M} & Q_{o,M} + \sum_k \beta_{Mk} \end{pmatrix}$$



Comparing between ventilation regimes





Summary statistic: number of infections until detection

R = *Number of infections in the ward until detection of the outbreak,*

$$p_{(i_1, \dots, i_M)}(n) = \mathbb{P}(R = n \mid (I_1(0), \dots, I_M(0)) = (i_1, \dots, i_M)), \quad n \geq 0, \quad \text{any } (i_1, \dots, i_M).$$

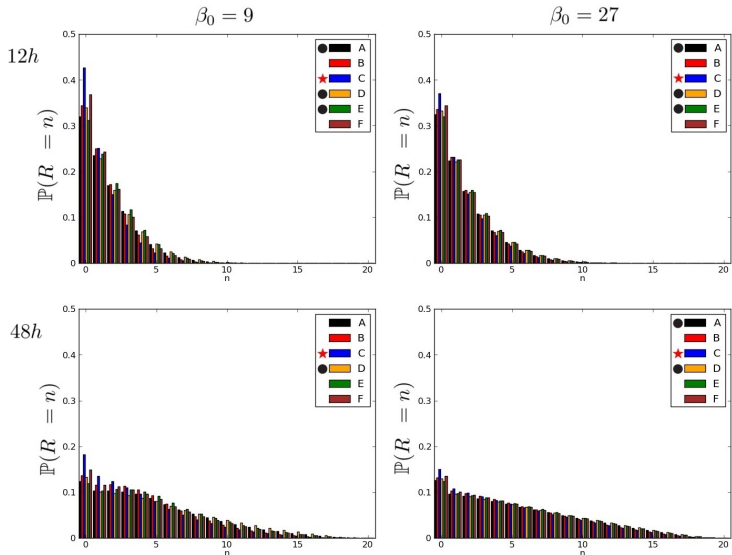
One can analytically (and exactly) compute this distribution by solving a (finite) system of linear equations

$$p_{\mathbf{i}}(n) \sum_{j=1}^M (\lambda_j(\mathbf{i})(N_j - i_j) + (\gamma_j + \delta_j)i_j) = \sum_{k=1}^M \left(\gamma_k i_k p_{\mathbf{i}-(k)}(n) + \lambda_k(\mathbf{i})(N_k - i_k) p_{\mathbf{i}+(k)}(n-1) \right),$$

for all $n \geq 0$, and any possible $\mathbf{i} = (i_1, \dots, i_M)$.

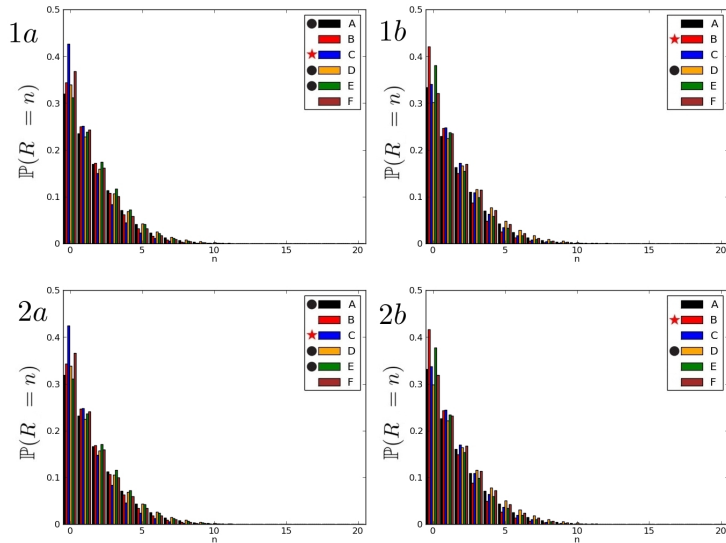


Detection dominates ventilation



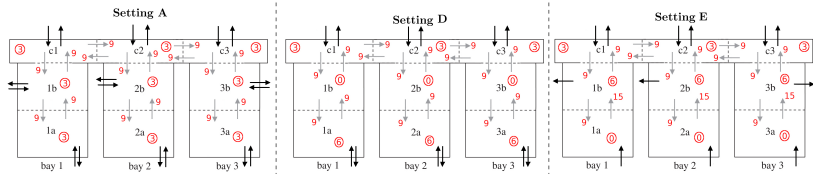


Interplay between ventilation and location of individual starting the outbreak





Decreasing hospital ward infection spread risk might increase risk at specific bays



$$R = R(1) + R(2) + R(3)$$

Regime	$E[R]$	$E[R(1)]$	$E[R(2)]$	$E[R(3)]$
A	5.01	2.65	1.34	1.02
D	5.20	2.56	1.47	1.17
E	4.86	2.69	1.25	0.92

Mean values of $E[R]$, $E[R(1)]$, $E[R(2)]$, and $E[R(3)]$, for $\delta^{-1} = 48h$ and ventilation settings A, D, and E; initially infective individual in zone 1a



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“Mathematical modelling of the emergence and spread of antibiotic resistant bacteria in healthcare settings: a stochastic approach”

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References

INTERFACE

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A unified stochastic modelling framework for the spread of nosocomial infections

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A Multicompartment SIS Stochastic Model with Zonal Ventilation for the Spread of Nosocomial Infections: Detection, Outbreak Management, and Infection Control

Martín López-García✉, Marco-Felipe King, Catherine J. Noakes

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