

Bayesian spatio-temporal estimation of dengue fever: when areas are few



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Introduction

- Spatio-temporal modelling when there are few (<20) small areas can be challenging. Bayesian methods can be beneficial in this situation due to the ease of specifying structure and additional information through priors. However, care is needed as there are often fewer neighbours and more edges, which may influence results.
- Dengue fever is still a serious health problem in several countries including Indonesia. Makassar, Indonesia had 6882 new cases of dengue registered from 2002 to 2015, and there have been fluctuations over time. Previous Bayesian spatiotemporal modelling approaches for dengue fever when there were few areas included incorporating a linear temporal trend component. Here we investigate Bayesian spatial and spatio-temporal model specification when there are few areas.

Methods

- Annual dengue fever incidence data for Makassar, Indonesia (14 geographic areas) during 2002-2015 were obtained from the City Health Department of Makassar, South Sulawesi Province.
- A range of Bayesian model specifications were considered, including the following:

Model-1: Independent model with only an unstructured (iid) random effect (v_i) $y_i \sim \text{Poisson}(e_i \theta_i)$ $log(\theta_i) = \alpha + v_i$

Model-2: BYM model [2] with both an intrinsic conditional autoregressive (CAR) prior on spatially structured (u_i) and iid random effects (v_i)

$$y_i \sim \text{Poisson}(e_i \theta_i)$$

 $log(\theta_i) = \alpha + u_i + v_i$

Model-3: Linear temporal trend model [3]

 $y_{it} \sim \text{Poisson}(e_{it}\theta_{it})$

$$log(\theta_{it}) = \alpha + u_i + v_i + (\beta + \delta_i)t$$

 β is the main linear trend

 δ_i is the difference between the global trend β and the area-specific trend

 $\delta_i \sim \text{Normal} (0, 1/\tau_\delta)$

Model-4: Nonparametric dynamic trend model [4]

$$y_{it} \sim \text{Poisson}(e_{it}\theta_{it})$$

 $log(\theta_{it}) = \alpha + u_i + v_i + \gamma_t + \phi_t$

 γ_t is a temporally structured effect using a random walk of order 2

and ϕ_t an unstructured temporal effect

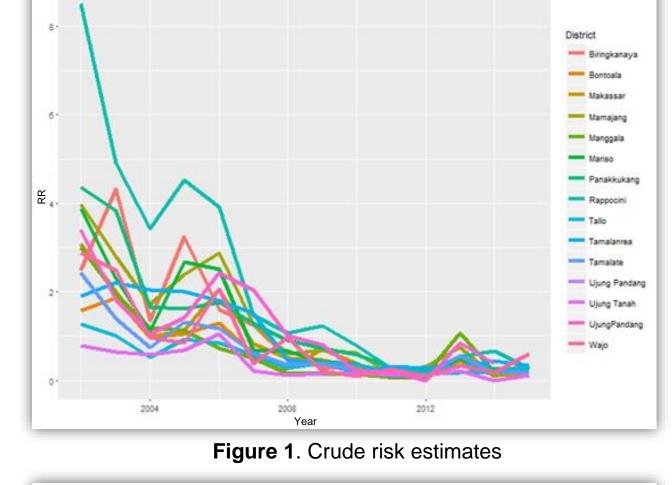
 Models were run using R-INLA and compared using goodness-of-fit measures, such as Deviance Information Criterion (DIC) and Conditional Predictive Ordinate (CPO), as well as comparing the obtained estimates and their precision for each area.

Results

Table 1. DIC and CPO for four models

Model	DIC	-mean(log(CPO))
Model – 1	7101.03	18.25931
Model – 2	7101.01	18.25911
Model – 3	2075.85	5.532935
Model – 4	1526.63	4.149736

- The nonparametric dynamic trend spatiotemporal model had substantially better model fit.
- Using adjacent boundaries to define neighbours, the maximum number of neighbours was 6 and the minimum number was 1.



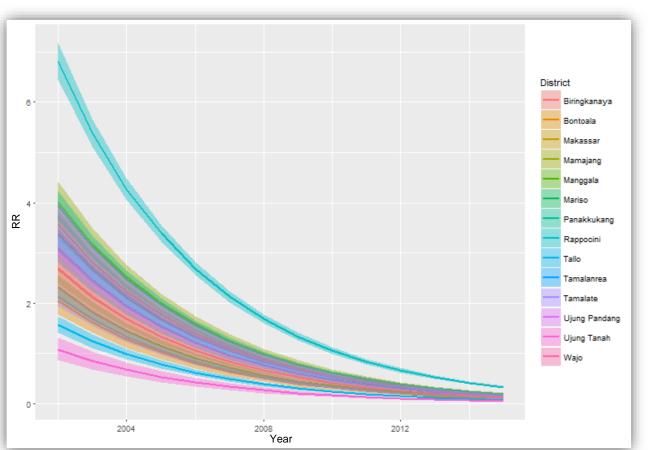


Figure 2. Linear temporal trend model

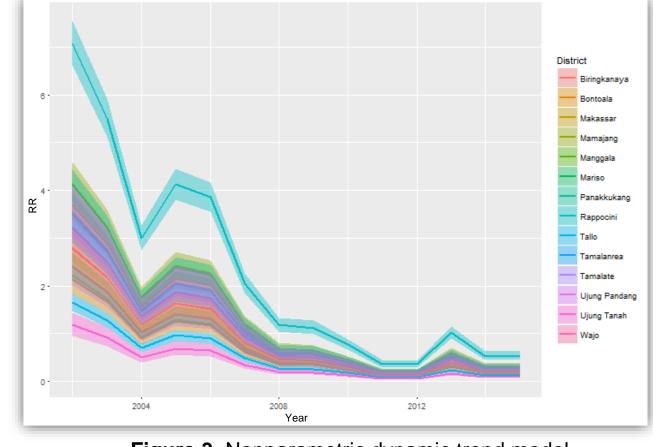
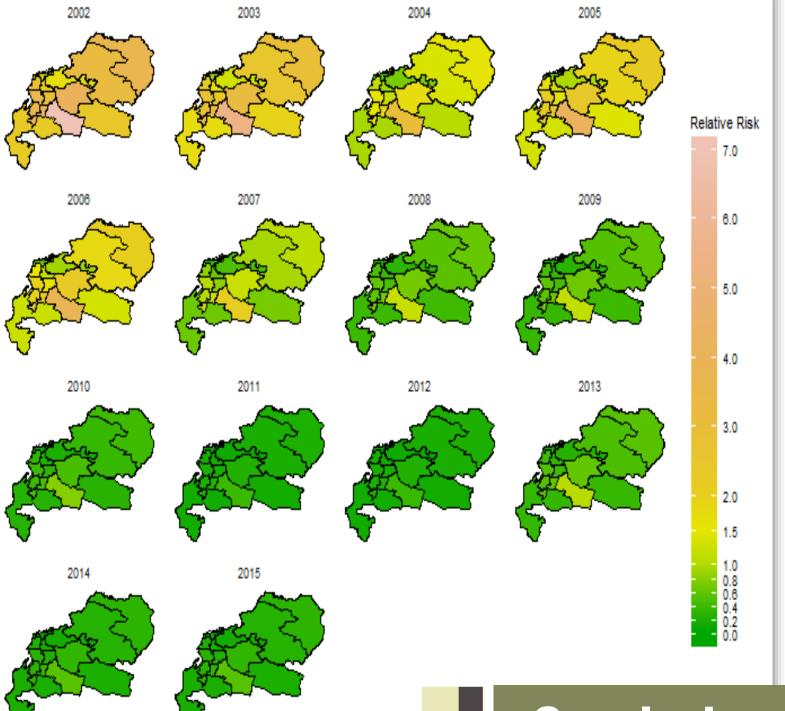


Figure 3. Nonparametric dynamic trend model



• The median annual number of cases observed in a district was 16 (range: 0 - 419). Across all models, the highest relative risk (RR) was observed in Rappocini in 2002 and the estimate ranged from 2.12 to 7.07 between models.

 The RR in each area and year from the dynamic model had wider 95% Cls than the linear time trend spatiotemporal model.

Conclusions

Model choice had a large impact on results, and the nonparametric dynamic trend spatio-temporal model had a much better fit than other options. To ensure results are valid and reliable, careful exploration of a range of models is important, especially when there are few areas.

legend

Acknowledgements

Figure 4. Relative risk maps obtained

under the nonparametric dynamic

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References

trend model

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