# Understanding SARS-CoV-2using Contact Tracing and Household Data

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- **Theory** How do disease systems likely behave under certain conditions?
- **Strategic Modeling** How will intervention *X* work given conditions *Y*? Broadly, what are the critical scenarios we should be planning for?
- Inference What do observed trends tell us about the nature of the disease and the effectiveness of our control measures?
- Forecasting What is the likely future course of the epidemic?





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## Inference for Policy

- How long do should we quarantine/monitor potential cases?
  - How long is it before cases show symptoms?
- How quickly will the disease move and how intensely must we respond?
  - How effectively does SARS-CoV-2 transmit?
  - How quickly does it move between individuals?
- What types of interventions are likely to work and who should they target?
  - Does risk differ by individual characteristics or exposure type?
  - What is the possibility of asymptomatic spread?





# The Data: Contact Tracing Studies

- Conducted as part of the public health response.
- Finds people exposed to a particular index case.
- Defines clear risk sets and bound time of infection, particularly early in an epidemic.







## Early Contact Tracing Data from Shenzen China

 26·33
26.33
34.91
69.32













et al. Lancet ID 2020

Bi





Bi et al. Lancet ID 2020





# Advantages and shortcomings of contact tracing data

#### Advantages

- Temporal information
- Detailed and timely data collection
- Fast results and ongoing results

#### Shortcomings

- Index cases almost always symptomatic
- Sampling biased towards close contacts
- Missed infections (particularly asymptomatic)
- Lose utility as epidemic becomes widespread.











## The Data: Household Serological Studies

- Serological tests of complete households late in or after an epidemic wave.
- In most cases gives more complete data on total attack rates than virologic or symptomatic information.
- Immunologic response may be heterogenous.
- No temporal information.
- Problems with recall bias.







## The Model: Chain Binomial Models



 $(\mathbf{A} + \mathbf{B}) = (\mathbf{C} + \mathbf{Q}_{AC})(\mathbf{1} - \mathbf{Q}_{BC})$ 





### The Model: Chain Binomial Models







Bi et al. medRxiv 2020







Bi et al. medRxiv 2020

## Implications for Policy and Control

- Test-trace-isolate can have some impact on spread
  - Effects limited by speed and ability to test.
- Young children are less likely to be infected
  - But not by that much
  - High exposures in schools may overwhelm
- Asymptomatic individuals are less likely to infect others
  - But still cause 15% of household infections
  - Proportion like much higher across households
- Household contacts have the highest probability of transmission
  - But community HH structure may minimize attributable fraction





## Thank You!

- Shenzhen Close Contacts: Qifang Bi, Yongsheng
  Wu, Shujiang Mei, Chenfei Ye, Xuan Zou, Zhen Zhang, Xiaojian Liu, Lan Wei, Shaun A. Truelove, Tong Zhang, Wei Gao, Cong Cheng, Xiujuan Tang, Xiaoliang Wu, Yu Wu, Binbin Sun, Suli Huang, Yu Sun, Juncen Zhang, Ting Ma, Tiejian Feng
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