

# Modeling Disease Spreading on Complex Networks

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**Abstract.** Based on complex network approach, a contact network model with scale-free property is built. By analyzing the fact data of H1N1 influenza provided by Beijing Health Bureau, contact tracing mechanism is used to research H1N1 virus transmission dynamics with this model. Furthermore, the contact tracing coefficient and random checking coefficient are studied to analyze their impact on the peak value of new infections and cumulative number of infections. The simulation result fits well with the statistical data. It shows that the model built in this paper is valid and complex network model to simulate the epidemics of H1N1 influenza is feasible.

**Keywords:** complex network, disease spreading, scale-free, contact network, contact tracing.

## 1. Introduction

Network widely exists in nature and human society. If a brain neuron is seen as a node in the network, the connections between neurons are the edges, which constitute a neural network. If a power station is seen as a node in the network, the power wires between power stations are edges, which constitute a power grid. If a person is seen as a node in the network, the interaction between people is an edge, which constitutes a human social network [1], [2]. There are many similar instances. With the development of research, we will find more networks in various fields.

A complex network is an abstract of a real complex system, which is described by some nodes and some edges. Nodes represent individual object of complex system, such as neuron, computer, people, etc. Edges represent the links between these individuals. Due to the topology of the network tends to affect performance of the network, for example, electricity grid structure

influencing efficiency of power transmission, we can research the structure characteristics of the network to understand some characteristics of the complex system in the real world.

Based on the topology structure of complex network dynamics in the complex network approach, there are some quantitative and qualitative researches on the dynamic spread such as the spread of computer virus in the Internet, the spread of disease in the crowd, the diffusion of information in society. In traditional epidemiology, SI, SIS, SIR and other classic models have been established [3], [4], [5], [6].  $S$  is the at-risk group, which doesn't carry virus, but is easily infected.  $I$  is the infected group with infectious feature.  $R$  is the cured individuals with immunity. These models based on differential dynamic system, have complex computations and the equation solution is very sensitive to initial conditions, which can't be well simulated with the practical process for some unexpected and random events. However, the simulation contagion transmission based on the complex network can overcome the shortcomings.

In the past two years, the H1N1 virus has spread worldwide, influencing people's normal life. In the meantime, various strategies and effects dealing with virus spreading also cause for concern. In this paper, we establish contact network model based on the complex network theory, and adopt contact tracing mechanism to do the numerical study on the dynamic spread behaviors of H1N1 virus. We deeply analysis the effect of contact tracing coefficient, random testing coefficient in virus spreading, and reveal the importance of early detection, early isolation and early treatment in process of the disease spread.

The paper is organized as follows. In Section 2, we present the related work on complex networks. Section 3 proposes the related work on contact network model respectively. We present H1N1 propagation model in Section 4. Following that, we give and analyze the simulation result in Section 5 and Section 6 respectively. Finally, some conclusions are drawn in Section 7.

## 2. Related Work

There are various research problems with the complicated real-world systems. Some complex systems can be described in the form of the networks. In 1960, Erdos and Renyi proposed ER stochastic network model [7], in which the network structure is described as a completely random graph. In stochastic network model, the connection between two nodes is determined in a certain probability. However, with further research, there are many complex networks appearing, which cannot be described by the random model.

In 1998, Watts and Strogatz proposed the Small-World network model [8]. Small-World network is between regulation network and stochastic network. In a ring regulation network, an arbitrary edge between adjacent nodes constantly reconnects with other nodes according to certain probability.

Finally it can constitute a Small-World network. When  $P = 0$ , it is a regular network. When  $P = 1$ , it is a stochastic network. When  $0 < P < 1$ , it is a new network with highly cluster character of the regular network and less average path length of the stochastic network. In the complex network theory, a network with the two properties is called Small-World characteristics.

In 1999, Barabasi and Albert found scale-free characteristic and put forward BA scale-free network model [9]. It has the following two characteristics: (1) growth characteristics: network scale is expanding; (2) priority connection characteristics: new nodes tend to connect the nodes with large connection degree, which is called "Matthew effect". In scale-free networks, where node degree distribution obeys power-law [9], most of the nodes have only a few links and few nodes have a lot of links.

Node degree of stochastic network and Small-World network obeys Poisson distribution. The distribution is bell-shaped, and the peak value just corresponds with the average degree value of all the nodes. In both sides of peak value, distribution probability obeys exponential decline, which indicates mostly node degree distribution concentrates near average degree value. Therefore, this type of network called homogeneous network. Scale-free network's node degree distribution has the characteristics of power-law, namely  $P(k) = ck^{-\gamma}$ . There is no peak value in the degree distribution graph. There is a descending line showing the scale-free characteristics in the bi-logarithm coordinates. Therefore, scale-free network is inhomogeneous network.

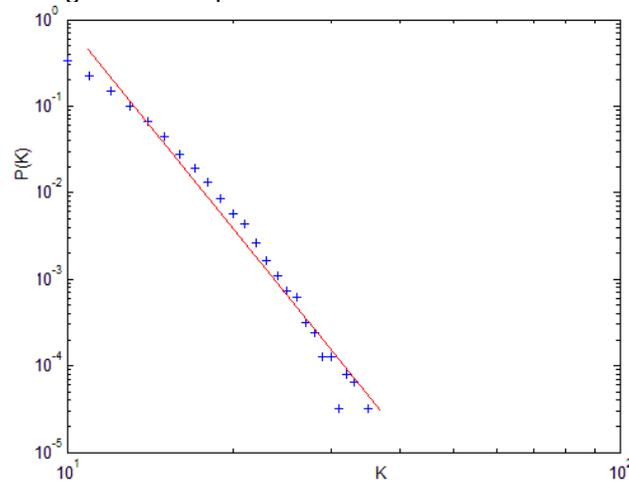
Since the complex network research with small-world networks and scale-free network appear, many scholars have adopted complex networks to study spread of diseases. Watts and Strogatz simulated spread of disease model and found that disease spreading in small world network is faster and easier than in regulation network [8]. Newman and Watts thoroughly discussed disease spreading problem in social network and proposed an improved Small-World model namely NW model [10]. Pastor-Satorras and Vespignani studied the infinite scale-free network SIS model, and they were surprised to find the propagation threshold doesn't exist [11]. That indicated disease could exist everlastingly in scale-free network, even though disease spreading strength was very small. The conclusion fundamentally changed many disease spreading conclusions of traditional theory. When Moreno and others analyzed SIR model, they also found there are no propagation threshold and a fraction of infected individuals existing in the network perpetually [12]. It can also be observed in SIS model, and it well explained the actual situations that a fraction of the virus exists in the network for a long time. Lin and others studied the spread of the SARS virus with Small-World network model [13]. Yang and others studied the spread mechanism of bird flu based on the complex network approach [14].

### 3. Contact Network Model

Infectious diseases often transmit through interpersonal interaction. If people are seen as the nodes in the network and the interpersonal contact relation as the edges in the network, it constitutes a complex network called contact network [15], [16]. Because of the individual differences, the scope of individual communication is different. Therefore, the node degree in contact network distributes within the larger scope, rather than the uniform network having the same degree of network, whose node degree concentrates in peak value nearby. The contact network is more close to scale-free network.

The contact network model in this paper evolves from the BA scale-free network model proposed by Barabasi and Albert. First, we construct a standard BA scale-free network based on growth mechanism and priority connection mechanism. Then, all nodes are put in the scale-free network into 2-d lattice bitmap  $N = n \times n$  randomly, in which each node links with 8 adjacent nodes [17].

It can be proved that contact network is a scale-free network. When the number of nodes  $N \gg 8$ , the probability of existing edge among 8 neighboring nodes tends to zero, namely  $p \rightarrow 0$ . That is equivalent to in the original BA network, each node is added 8 edges. The degree of each node is changing, but it does not affect the degree distribution of the whole network. So the improved contact network degree distribution obeys power-law. As shown in Fig. 1, the degree distribution of contact network in bi-logarithm coordinates is basically a straight line with power-law features.



**Fig. 1.** Contact network node degree probability distribution ( $N = 250 \times 250$ ).

Improved contact network model increases the node degree, thus increasing the chance of contact infection, especially in small degree nodes. In the improved model, each node is connected not only with neighboring nodes, but also a number of distant nodes, which increases the reach of the

individual to increase the speed of spread of the virus, more in line with the great personnel mobility features in the real social situation.

#### 4. H1N1 Virus Propagation Model

Influenza A H1N1 is an acute respiratory infection, whose pathogen is a new type of influenza A H1N1 influenza virus. The virus strains contain swine flu, avian flu and human influenza virus gene fragments, spreading through contacts in the crowd. Influenza A H1N1 flu was first discovered in March 2009. The "swine flu" epidemic outbreak in Mexico and quickly spread around the globe, bringing people all over the world huge economic loss.

To make the model not too complex, the following are some simplifying assumptions for the spread model of H1N1 virus:

(1). Assuming the transmission capacity of each patient is same, not considering super-spread events. This is because researches have shown that super-spread events (SSEs) which can't be completely ignored will not change the overall trend of disease spreading.

(2). Assuming the activity of the virus is constant during the evolution, taking no account of the variability behavior of the virus, ignoring the ventilation, temperature and other factors impacting H1N1 virus activity.

(3). Assuming each individual's immunity is same, not affected by age structure, ignoring the different immune system of different individuals because the model are concerned with statistical properties of the overall performance rather than specific individuals.

(4). Assuming the incubation period for each patient obeys Poisson distribution, and the incubation period has a smaller infectious probability.

(5). Assuming the patient can't infect other individuals with isolated protection measure.

(6). Assuming the transmission capacity of a patient is not changing during the time from infection to cure.

This paper adopts Contact Tracing strategy to restrain the transmission of H1N1 virus [6], [18]. Once detect an infected individual, track and isolate contacted individuals immediately. Isolated individuals no longer infect other individuals. In the H1N1 propagation model, the nodes have 5 states:

Susceptible: The individual is not infected, and has no immunity.

Latent: The individual carries virus, and shows a slight symptoms and small infectiousness.

Infected: There is an outbreak with clinical manifestation and strong infection.

Tracking: The individual is treated in isolation. Track and isolate other individuals contacted with the patient.

Removed: The individual obtains immunity or dies, and no longer affects the communication process.

Fig. 2 describes the relationship between the states. Randomly select a node  $N_i$ , marked the state I as the infection source. The node in state I

infects the neighboring node S in probability  $\alpha_I$ . The node in state of L infects the neighboring node S in probability  $\alpha_L$  ( $\alpha_I > \alpha_L$ ). The nodes in the state of I and L are respectively randomly detected in probability  $\beta_I, \beta_L$  ( $\beta_I > \beta_L$ ) entering state T. Then contact and trace the adjacent nodes of the randomly detected node in probability  $\varepsilon$ . The node which has been traced enters the state of T. Nodes in state T will enter state R in probability  $\delta$ .

Incubation period of H1N1 is generally 1 to 7 days [19], expectation  $E(Latent) \approx 4$ . Poisson distribution is a commonly used discrete probability distribution, suitable for describing the number of random events in the unit time, and the expectation of Poisson distribution  $P(\lambda)$  is  $\lambda$ . Therefore, in the model make the latency of individual obeys Poisson distribution  $\lambda = 4$ , that is  $Latent \sim P(\lambda = 4)$ .

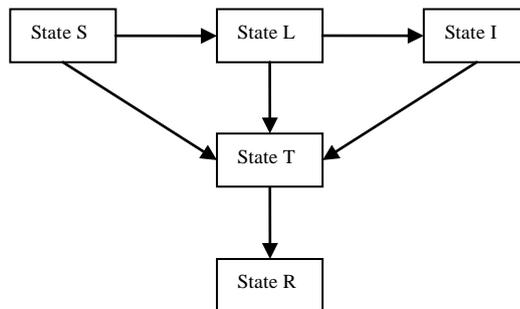


Fig. 2. H1N1 propagation model state transition graph.

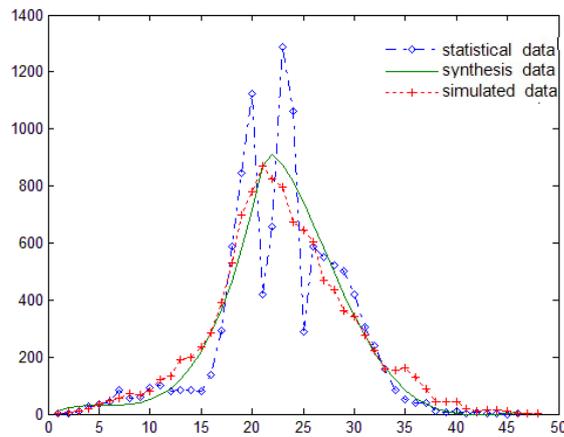
## 5. Simulation and Analysis

Table 1. Increasing H1N1 influenza confirmed cases per week in Beijing.

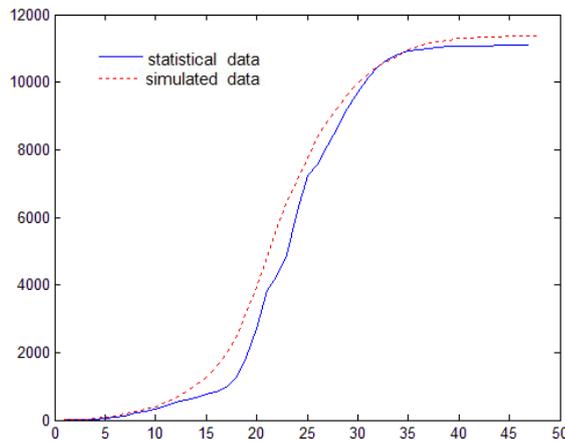
Time (week)	Cases						
1st	1	13th	80	25th	1063	37th	39
2nd	3	14th	82	26th	289	38th	37
3rd	4	15th	82	27th	587	39th	12
4th	11	16th	81	28th	551	40th	7
5th	28	17th	138	29th	521	41th	9
6th	34	18th	294	30th	501	42th	4
7th	44	19th	589	31th	419	43th	5
8th	84	20th	844	32th	306	44th	3
9th	56	21th	1124	33th	240	45th	4
10th	61	22th	418	34th	158	46th	0
11th	92	23th	659	35th	82	47th	1
12th	100	24th	1287	36th	53		

As Table.1 shows, this paper refers to H1N1 epidemic data released by Beijing Health Bureau from 2009.5.7 to 2010.4.4. We adopt the contact network model and the H1N1 virus transmission model to predict and analysis the number of new infections and the cumulative number of infections per week (Fig. 3, Fig.4).

We use optimized algorithm to simulate in the programming process based on Matlab. Optimized algorithm can greatly shorten the simulation time and improve simulation efficiency. During simulation process, the simulation algorithm was improved as follows:



**Fig. 3.** The number of new infections per week.



**Fig. 4.** The number of cumulative infections per week.

(1) When storing network topology, based on the idea of sparse matrix, store corresponding node of the each edge in the vector  $I, J$ , so that save

memory space and facilitate the establishment of large-scale networks. Using adjacent matrix directly will waste a lot of memory space. If adopting the sparse matrix  $A = \text{sparse}(N, M)$ , when  $A$  is large, the assignment statement  $A(i,j)=...$  has slow speed of execution [20] and a large number of execution cause the entire simulation process consuming a large amount of time.

(2) When finding all the adjacent nodes of the node  $N_i$ , we firstly sort  $I$ , and then exchange the order of  $J$  in the same order. Use binary search algorithm to find  $I$ , while the corresponding element in  $J$  is adjacent node of  $N_i$ . The find() function in Matlab uses the linear search algorithm. When the network size is large, searching efficiency is low.

(3) Store  $I, J$  in a Mat file, just loading them as being used. It doesn't need to re-generate network topology map in each simulation to save time.

In the simulation process, the number of established contact network nodes  $N=250 \times 250$ , parameter values are:  $\alpha_I = 0.39$ ,  $\alpha_L = 0.15$ ,  $\beta_I = 0.63$ ,  $\beta_L = 0.42$ ,  $\varepsilon = 0.9$ ,  $\delta = 0.1$ . The simulation results are shown in Fig. 3 and Fig.4. During 20th to 25th week, the number of new infections per week reaches the peak value. The number of infections at both sides of the peak value obeys an exponential distribution, and the growth rate of the left side is slightly larger than the decay rate of the right side. In the early and late period, the spread rate of influenza A H1N1 flattens off (Fig. 3). During the peak-time of the spread of the disease (20th to 25th week), the simulation data and statistical data fit well. Overall, the simulation results agree well with the trend of the actual propagation of disease. The simulation data of cumulative infections number is slightly larger than statistical data, and both growth trends are almost the same (Fig. 4).

Accuracy of the simulation results can be calculated by curve's goodness of fitting. And the squares sum of error can be used to measure the quality of the curve's goodness of fitting. Assuming that the actual measured value is  $Y$ , the average value is  $Y_1$ , the calculated theoretical value according to the fitting curve is  $Y_2$ , we can get the squares sum of error is  $\sum(Y - Y_2)^2$ , mean square variance is  $\sum(Y - Y_1)^2$ , if the ratios of the squares sum of error and mean square variance are small, it means that the observed values and estimated values are close, also the curve fitting is well. According to this we can define the determination coefficient  $R^2$ , which calculation formula is:

$$R^2 = 1 - \frac{\sum(Y - Y_2)^2}{\sum(Y - Y_1)^2}$$

Because the statistics has strong fluctuation, statistics data and real data may be quite different. Just like the statistical data in Fig. 3, there's strong fluctuation in the peak area, thus the response can not reflect the fact. Therefore, we firstly fit the statistical data (as green curve in Fig. 3 shows), then compare the simulation data and the fitted data to get the simulation accuracy. In Fig. 3, the simulation accuracy of the number of new infections

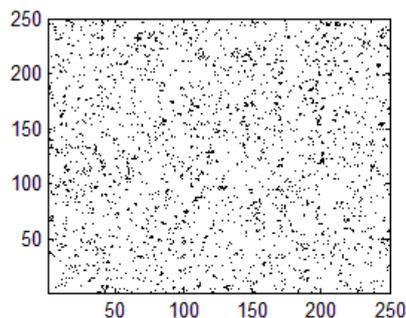
per week is  $R^2 = 0.9667$ . In Fig. 4, the actual statistical value is 11087, the simulation data is 11376, the number of cumulative infections' error is  $(11376 - 11087) / 11087 = 0.0261$ , and the simulation accuracy of the number of cumulative infections per week is  $R^2 = 0.9853$ . The high accuracy of the number of new infections and number of cumulative infections shows that the model can well describe the propagation of the virus H1N1.

## 6. Parameters of Virus Propagation Model

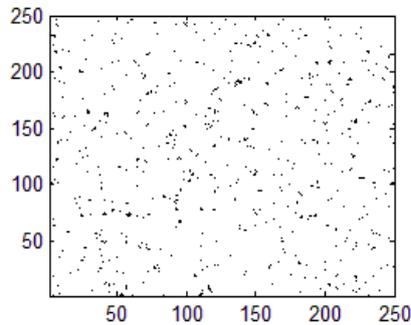
There are many parameters impacting H1N1 virus spreading in the above H1N1 spreading model. We will analyze contact tracing coefficient  $\varepsilon$  and random detection coefficient  $\beta_L$  deeply to reveal their influence in speed and level of virus spreading.

### 6.1. Contact tracing coefficient

During simulation process, we remain the other parameters same, changing the contact tracing coefficient  $\varepsilon$  to get different values of the peak number of infections (showed in Fig. 5, Fig. 6, Fig. 7), from which to analyze the impact of  $\varepsilon$  on H1N1 virus spreading. Fig. 5 and Fig. 6 show that contact tracing coefficient has a significant impact on the peak number of infections. When  $\varepsilon$  is small, the peak density of infected people is large. Otherwise, peak density of infected population is small.

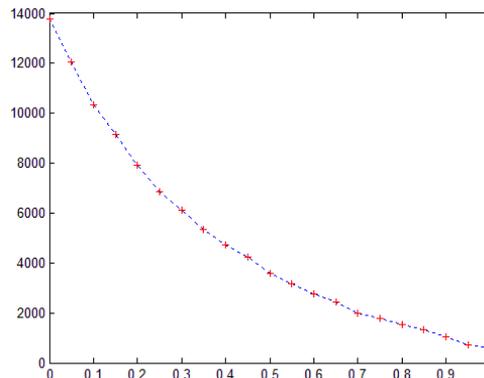


**Fig. 5.** Distribution the peak number of infected people when  $\varepsilon = 0.4$ .



**Fig. 6.** Distribution the peak number of infected people when  $\varepsilon = 0.8$ .

Fig. 7 further reveals the relationship between contact tracing coefficient and the peak number of infections: the peak number of infections has a logarithmic decreasing with  $\varepsilon$  increasing. Thus, contact tracing coefficient strongly impacts the processing of H1N1 virus spreading. When the value of  $\varepsilon$  is large, most of the close contacts can be isolated in time to reduce the probability of individuals to be infected.



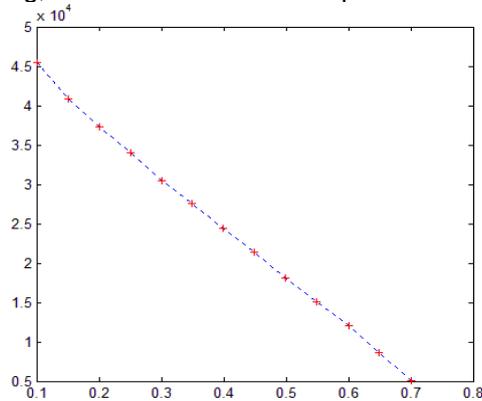
**Fig. 7.** Distribution the peak number of infected people according to different  $\varepsilon$ .

## 6.2. Random detection coefficient

In H1N1 spreading model,  $\beta_I$  and  $\beta_L$  are the same type of parameters having the similar impacts on the spread of the virus, so this article only deeply discusses  $\beta_L$ . Keeping other parameters unchanged to analyze different values of random detection coefficients  $\beta_L$  related to the number of cumulative infections. It can be seen from Fig. 8, the number of cumulative infections increases linearly with the decrease of  $\beta_L$ . When the value of  $\beta_L$  is

high, most individuals in the incubation period can be promptly detected and isolated, which reduces the probability of people around to be infected. Therefore, it will slow the rate of virus spreading and reduce the scope of the virus spreading, thus the number of cumulative infections will be reduced.

It is obvious that random detection coefficient corresponds to testing strength of test stations, and contact tracing coefficient corresponds to tracing strength of closing contact individuals in the actual situation. Therefore, when facing the widespread of virus, we should strengthen the efforts of the detection of vulnerable populations, increase the strength of tracing close contacts, and reach the target of early discovery, early isolation and early treatment. This can effectively inhibit the spread of the virus, slow down the rate of virus spreading, and reduce the virus' impacted area.



**Fig. 8** The number of cumulative infections according to different  $\beta_L$ .

## 7. Conclusions

In this paper, we use the dynamics of complex networks approach to study virus spreading. We build scale-free network model (contact network) and H1N1 virus propagation model according to the actual situation of the virus propagation in order to simulate the spread of the H1N1 virus in Beijing. Then we deeply analyze how contact tracing coefficient and random detection coefficient impact virus spreading, revealing the importance of early discovery, early isolation and early treatment during treatment in the disease spreading process based on the virus spreading model. Simulation results are similar with the actual spread trend of the virus in Beijing, which verify the validity of the model, proving that complex networks as an important tool will play a major role on study of disease spreading.

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