

# Chagas Disease: the Silent Killer

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# History of Chagas disease

- Discovery by Carlos Chagas in 1909, Brazil
- Considered a neglected tropical disease
  - WHO and CDC
- Chagas disease is
  - caused by the parasite *Trypanasoma cruzi*
  - transmitted to humans and animals (reservoir) by insect vectors, mainly *Triatoma sp.* insects.



# *Triatoma sp.* Insect



0.75 to 1.25 inches in length



- Carrier of *Trypanasoma cruzi* parasite.
- Blood sucking insect
- Ingests the parasite from the blood of person or animal(reservoir) already infected
- When feeding, secretes feces containing the parasite near the bite site
- Lives in mud, thatch or adobe houses
- Feeds on faces (“kissing bugs”)

# Location of disease

South America 2004



South America 2008



# Location of disease

Central America 2004



Central America 2008



# Stages and Symptoms

Stage	Symptoms
Acute	Swelling at infection site, fever, fatigue, rash, aches, nausea, Romana's sign
Latent	Asymptomatic, test positive with blood tests
Chronic	Irregular heartbeat, congestive heart failure, cardiac arrest, enlarged esophagus, colon, and heart.



# Reservoir

- Animals that the *T. cruzi* parasite might affect
  - Are bitten by the kissing bugs and then can either
    - carry the parasite
    - become infected by it
    - transfer it to other kissing bugs
  - opossums, armadillos, raccoons, monkeys, rats, coyotes, dogs, cats, birds, reptiles, livestock, and many others.



# Prevention and Treatment

- Antibiotics available for those who are in the acute stage only, other treatments are not available
- Prevention:
  - Nets and insecticides are the most efficient
  - Avoid living in mud, thatch, and adobe houses



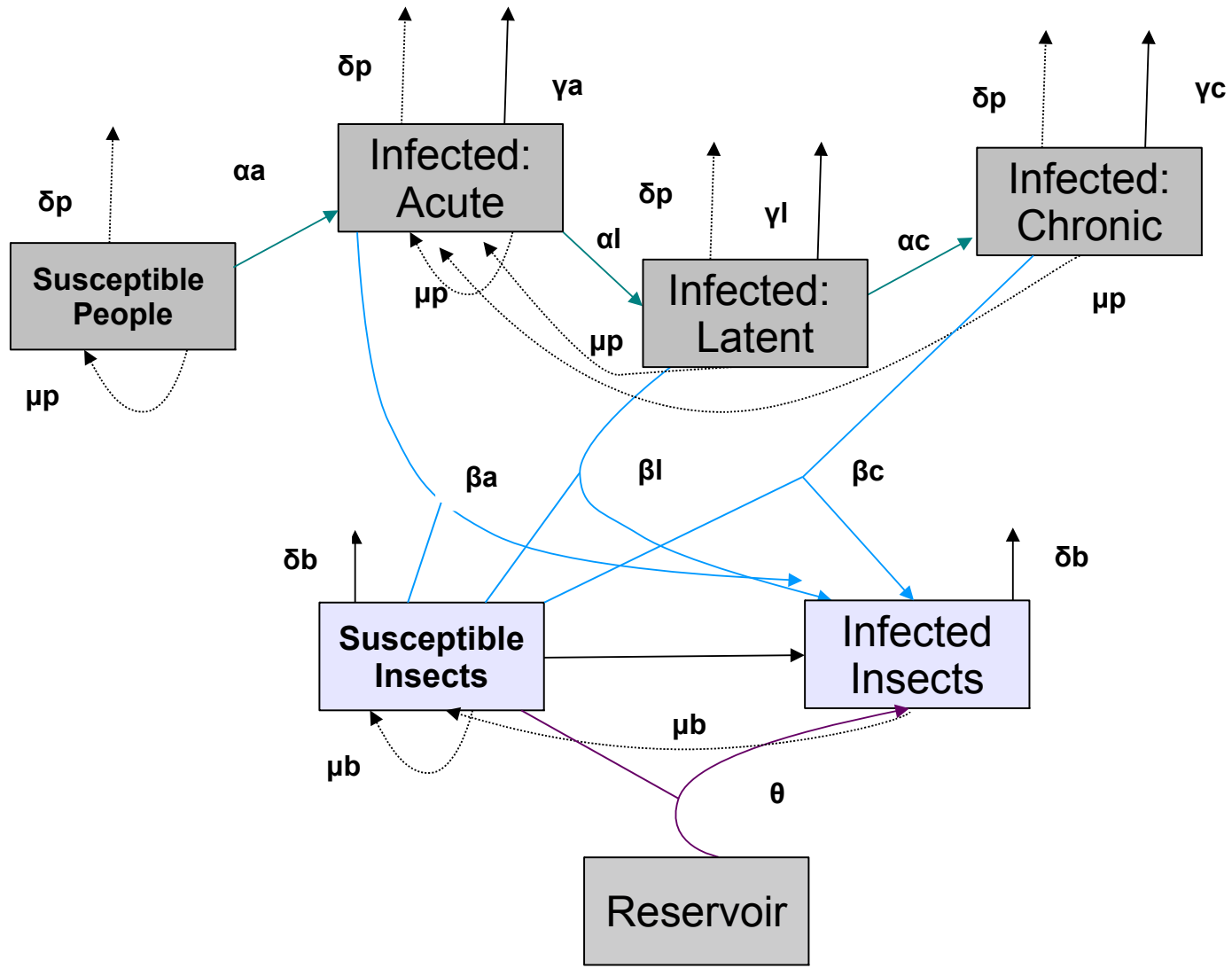


- “Neglected” status repercussions
- Lack of information
- Combining Treatments, prevention strategies, general form of the spread of the disease, etc.
- Death rates
- Devillers Model (2008)



**World Health  
Organization**

# Map of Disease



- Susceptible Insects ( $S_b$ )
- Susceptible People ( $S_p$ )
- Infected People in the Acute stage ( $I_{pa}$ )
- Infected People in the Latent stage ( $I_{pl}$ )
- Infected People in the Chronic stage ( $I_{pc}$ )
- Infected Insects ( $I_b$ )

\* These values vary but typically set at 30% for  $I_b$  and 40-44% distributed for  $I_{pa}$ ,  $I_{pl}$ , and  $I_{pc}$

# Parameters

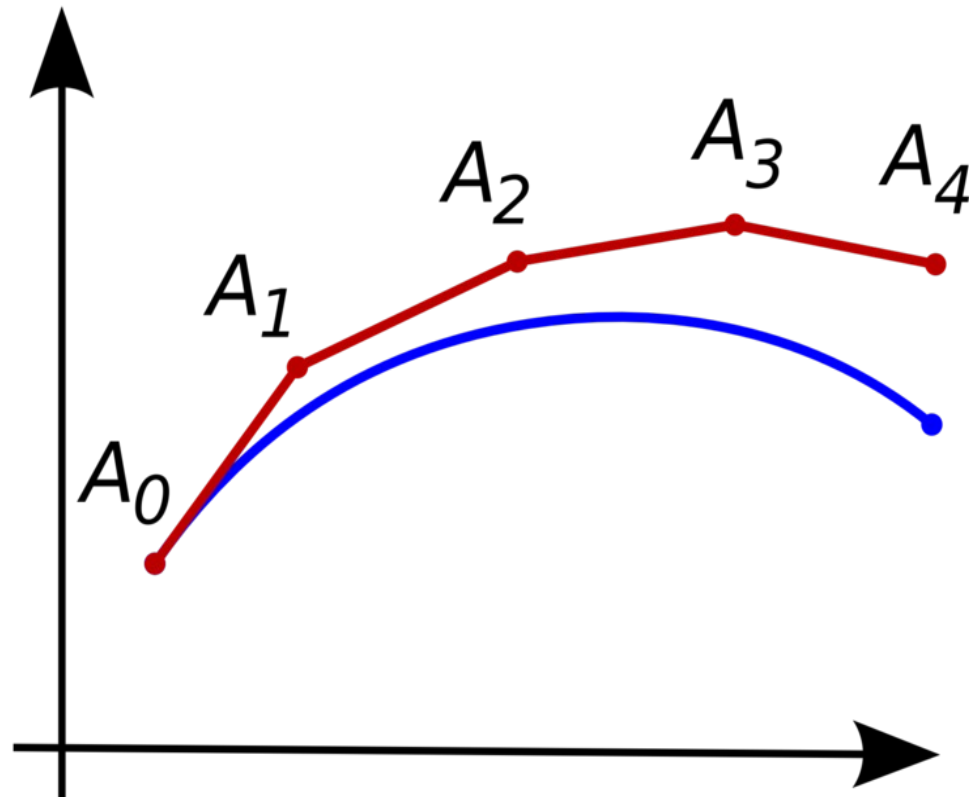
Table 1: Parameters

Parameter	Description	Value	Source
$\alpha_a$	Transmission rate from insect to human	?	This study
$\alpha_l$	Rate from acute to latent stage	0.125	Prata (2001)
$\alpha_c$	Rate from latent to chronic stage	0.0001	Prata (2001)
$\beta_a$	Transmission rate human to insect in acute stage	$\beta_c/4$	This study
$\beta_l$	Transmission rate human to insect in latent stage	$\beta_c/2$	This study
$\beta_c$	Transmission rate human to insect in chronic stage	?	This study
$\gamma_a$	Human mortality from the acute stage	0.00003	Sanchez-Guillen et al. (2006)
$\gamma_l$	Human mortality from the latent stage	0.00001	Devillers (2008)
$\gamma_c$	Human mortality from the chronic stage	0.0005	Prata (2001)
$\delta_p$	Human death rate from other causes	0.0003	Devillers (2008)
$\delta_b$	Insect death rate	0.05	Canals et al. (1991)
$\mu_p$	Human birth rate	0.000323	This study
$\mu_b$	Insect birth rate	0.05	This study
$\theta$	Transmission rate from reservoir to insect	?	This study

$$\begin{aligned}\frac{dS_p}{dt} &= -\alpha_a S_p I_b + \mu_p S_p - \delta_p S_p, \\ \frac{dI_{pa}}{dt} &= \alpha_a S_p I_b - \alpha_l I_{pa} - \delta_p I_{pa} + \mu_p (I_{pa} + I_{pl} + I_{pc}) - \gamma_a I_{pa}, \\ \frac{dI_{pl}}{dt} &= \alpha_l I_{pa} - \alpha_c I_{pl} - \delta_p I_{pl} - \gamma_l I_{pl}, \\ \frac{dI_{pc}}{dt} &= \alpha_c I_{pl} - \delta_p I_{pc} - \gamma_c I_{pc}, \\ \frac{dS_b}{dt} &= -\beta_a S_b I_{pa} - \beta_l S_b I_{pl} - \beta_c S_b I_{pc} + \mu_b (S_b + I_b) - \delta_b S_b - \theta S_b, \\ \frac{dI_b}{dt} &= \beta_a S_b I_{pa} + \beta_l S_b I_{pl} + \beta_c S_b I_{pc} - \delta_b I_b + \theta S_b.\end{aligned}$$

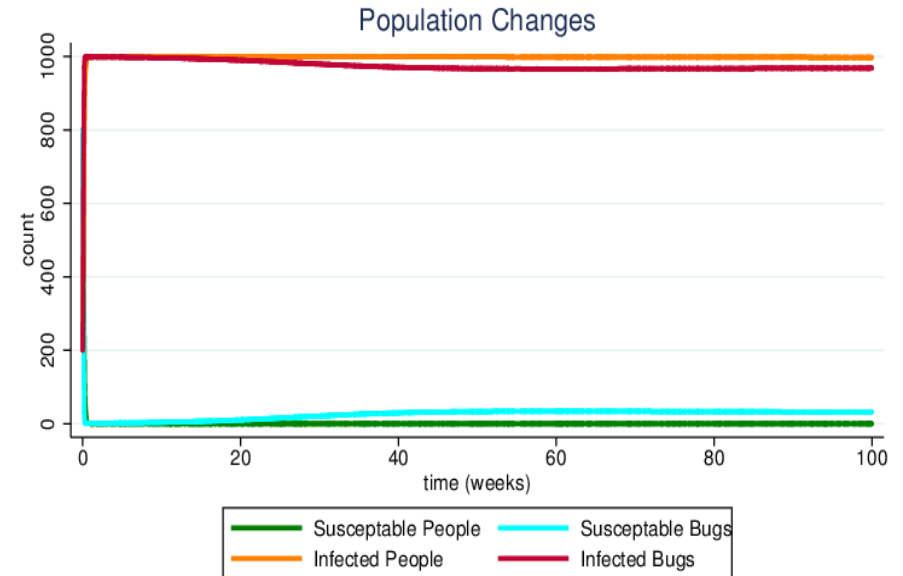
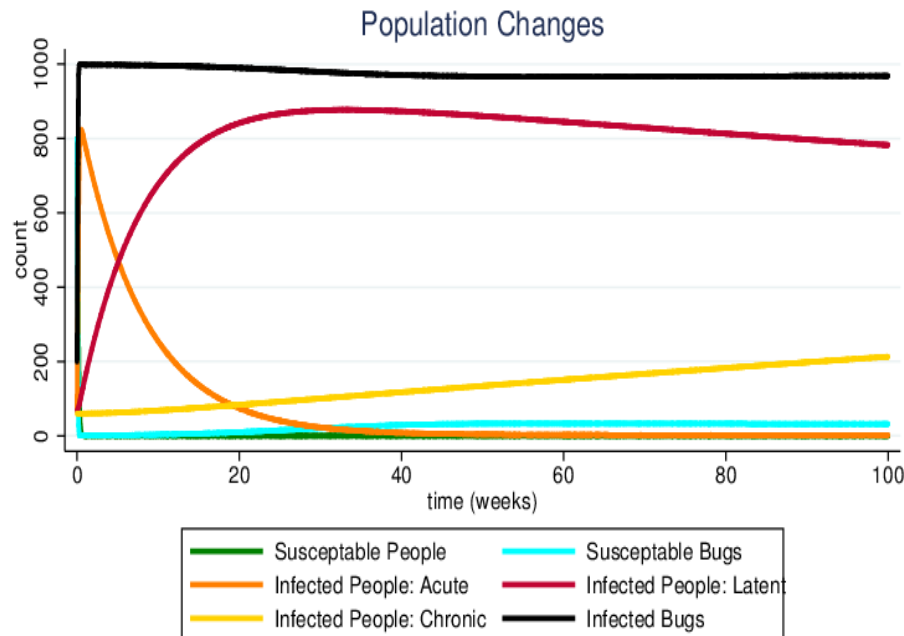
# Approximate Numerical Solutions

- Euler's Method



# Devillers' Parameters

- Problems with Devillers model
  - Unrealistic parameters



$\alpha_a=0.01$   $\alpha_l=0.125$   $\alpha_c=0.001$   
 $\beta_a=0.05$   $\beta_l=0.001$   $\beta_c=0.003$   
 $\gamma_a=0.00003$   $\gamma_l=0.00001$   
 $\gamma_c=0.0001$   $\delta_t=0.0003$   
 $\delta_b=0.05$   $\mu_p=0.003$   $\mu_b=0.05$

# Stochastic Model

Table 2: Stochastic Model Equations

Equation	Description
$a1 = \mu_p S_p$	Birth for $S_p$
$a2 = \delta_p S_p$	Death for $S_p$
$a3 = \alpha_a S_p I_b$	Transition from $S_p$ to $I_{pa}$
$a4 = \mu_p (I_{pa} + I_{pl} + I_{pc})$	Birth for $I_p$
$a5 = \delta_p I_{pa} + \gamma_a I_{pa}$	Death for $I_{pa}$
$a6 = \alpha_l I_{pa}$	Transition from $I_{pa}$ to $I_{pl}$
$a7 = \delta_p I_{pl} + \gamma_l I_{pl}$	Death for $I_{pl}$
$a8 = \alpha_c I_{pl}$	Transition from $I_{pl}$ to $I_{pc}$
$a9 = \delta_p I_{pc} + \gamma_c I_{pc}$	Death for $I_{pc}$
$a10 = \mu_b (S_b + I_b)$	Birth for $S_b$
$a11 = \delta_b S_b$	Death for $S_b$
$a12 = \beta_a S_b I_{pa} + \beta_l S_b I_{pl} + \beta_c S_b I_{pc} + \theta S_b$	Transition from $S_b$ to $I_b$
$a13 = \delta_b I_b$	Death for $I_b$



# Approximate Solution

- Gillespie Algorithm, 1977

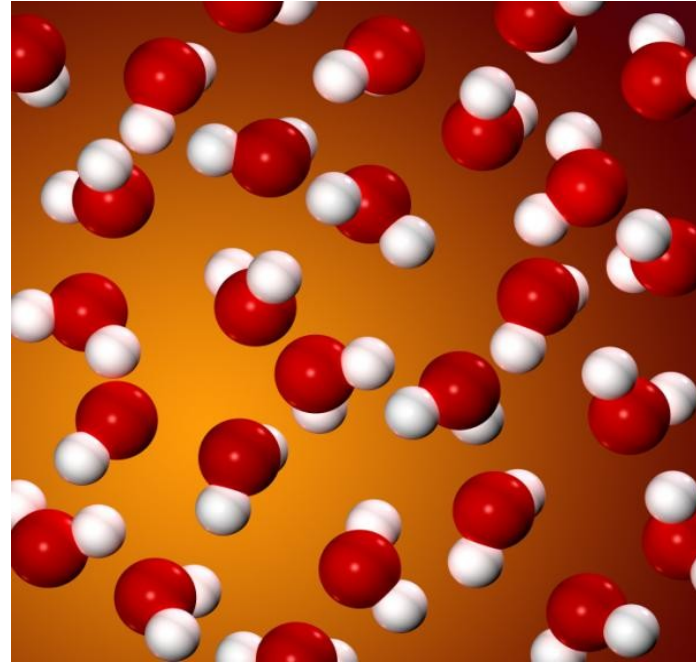
- Probabilities

$$b_1 = a_1 / a_0$$

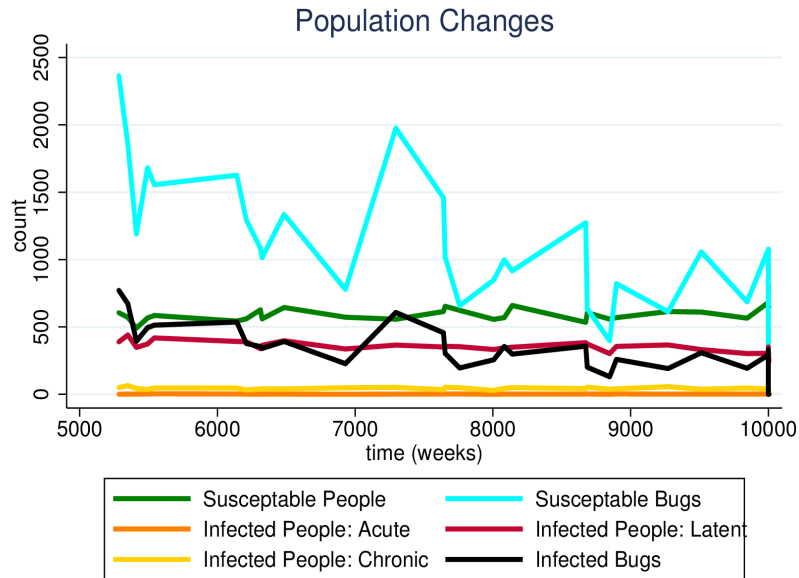
$$b_2 = (a_1 + a_2) / a_0$$

$$b_3 = (a_1 + a_2 + a_3) / a_0 \dots$$

- $a_0$  is the sum of all  $a$ 's



# Results of Continuous Time Model

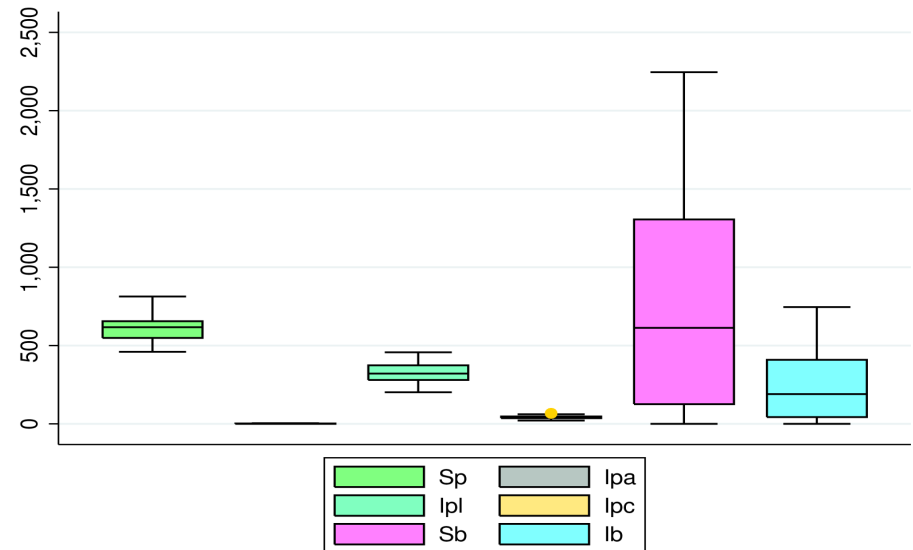


One Simulation

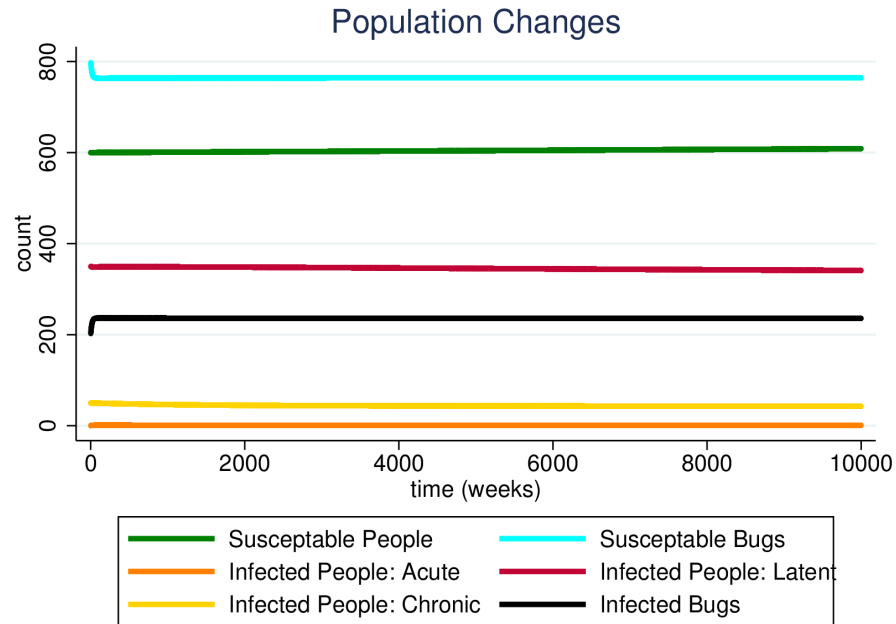
## Mean Prevalence

Insect: approx. 25%  
Human: approx. 40%

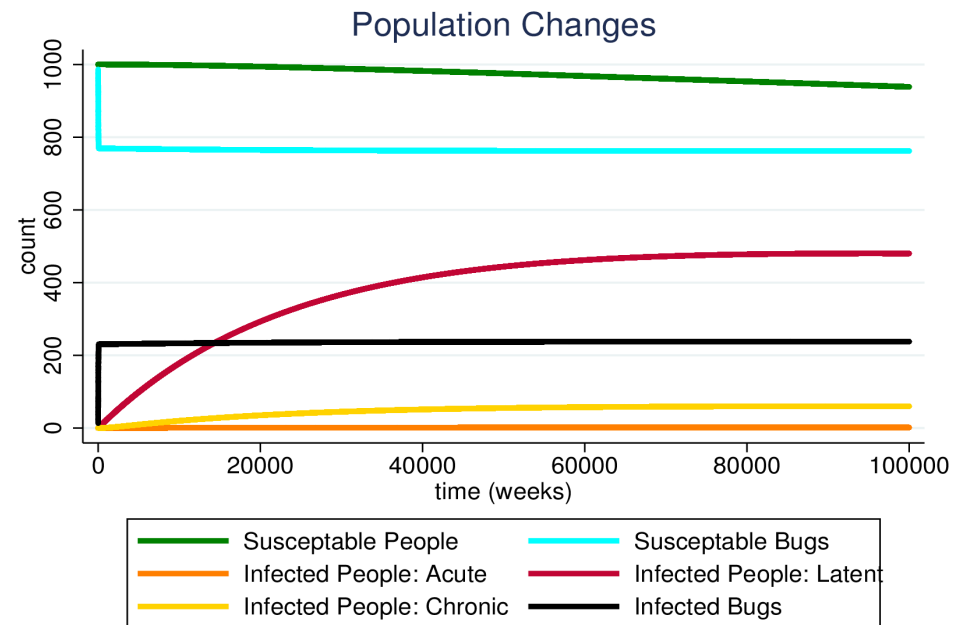
## 50 Simulations



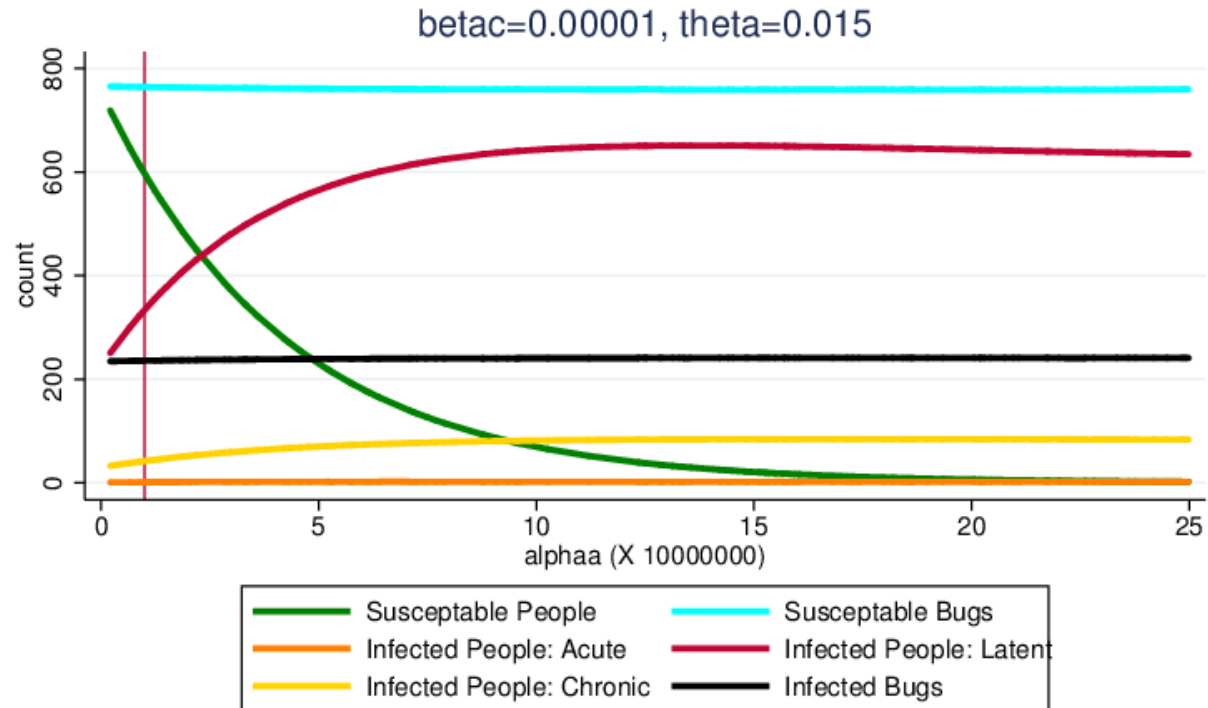
# Results of ODE Model



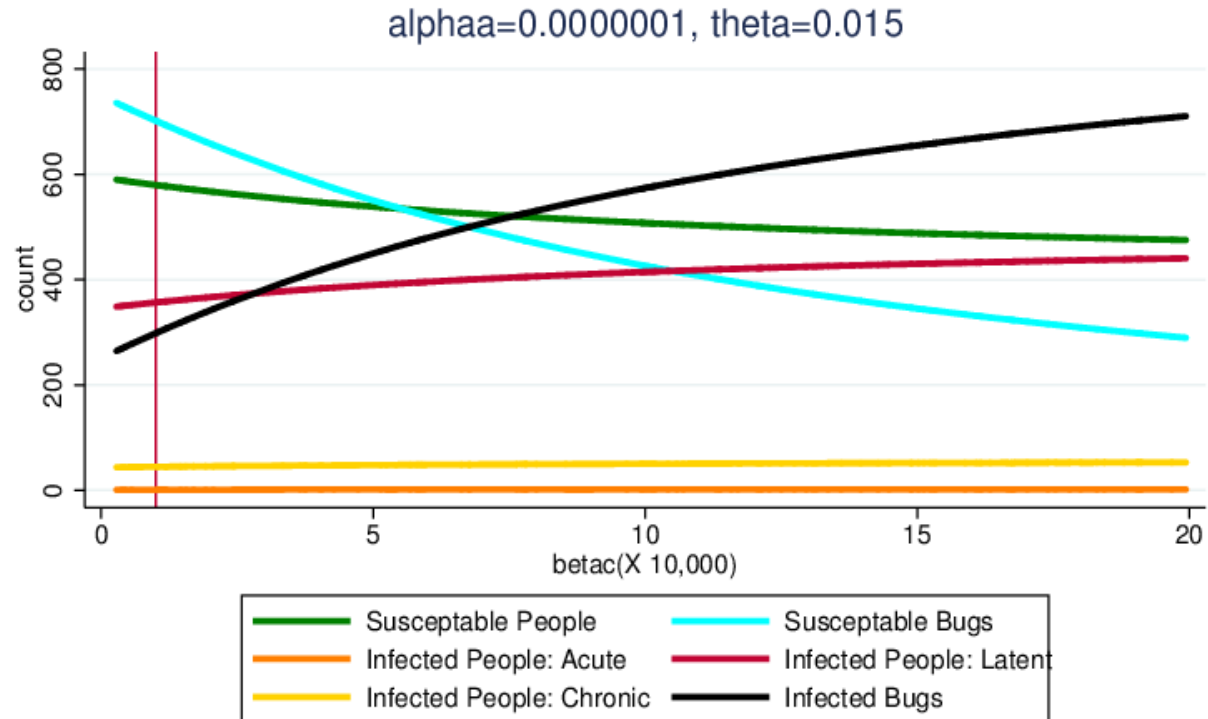
Alphaa= 0.0000001  
Betac= 0.00001  
Theta= 0.015



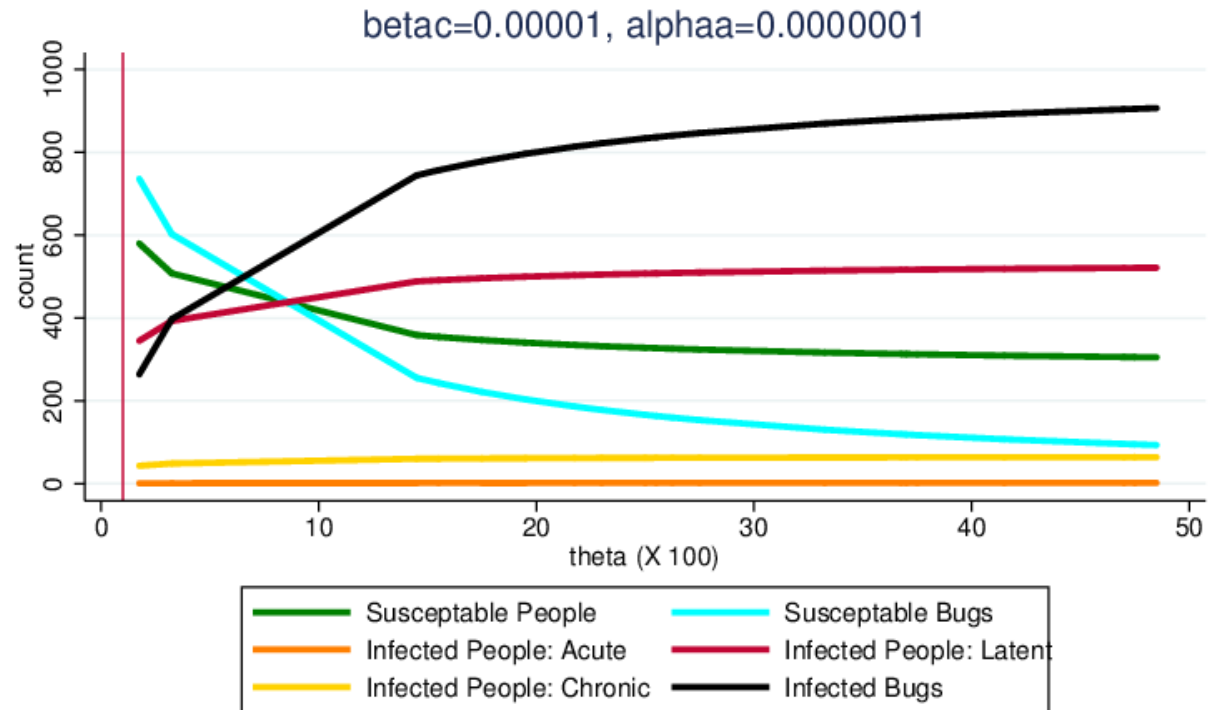
# Sensitivity Analysis for ODE Model



# Sensitivity Analysis for ODE Model



# Sensitivity Analysis for ODE Model



With this model we can include the effects of

- Making medicines available
- Available nets
- Spraying techniques



- Brenière, Simone Frédérique, Marie France Bosseno, François Noireau, Nina Yacsik, Pascale Liegeard, Christine Aznar, and Mireille Hontebeyrie. "Integrate Study of a Bolivian Population Infected by Trypanosoma Cruzi, the Agent of Chagas Disease." *Memórias Do Instituto Oswaldo Cruz* 97.3 (2002). Print.
- Canals et al., 1991 M. Canals, P.E. Cattan, R. Solis and J. Valderas, Fecundity and mortality in populations of *Triatoma infestans*, *Rev. Med. Chile* 119 (1991), pp. 979–983.
- "Chagas Disease." MayoClinic.com. Mayo Foundation for Medical Education and Research. Web. 13 June 2011. <<http://www.mayoclinic.com/health/chagas-disease/DS00956>>.
- Devillers, H., J. Lobry, and F. Menu. "An Agent-based Model for Predicting the Prevalence of Trypanosoma Cruzi I and II in Their Host and Vector Populations." *Journal of Theoretical Biology* 255.3 (2008): 307-15. Print.
- Prata, A. "Clinical and Epidemiological Aspects of Chagas Disease." *The Lancet Infectious Diseases* 1.2 (2001): 92-100. Print.
- Sánchez-Guillén et al., 2006 M.D.C. Sánchez-Guillén, A. López-Colombo, G. Ordóñez-Toquero, I. Gomez-Albino, J. Ramos-Jimenez, E. Torres-Rasgado, H. Salgado-Rosas, M. Romero-Díaz, P. Pulido-Pérez and R. Pérez-Fuentes, Clinical forms of Trypanosoma cruzi infected individuals in the chronic phase of Chagas disease in Puebla, Mexico, *Mem. Inst. Oswaldo Cruz* 101 (2006), pp. 733–739.