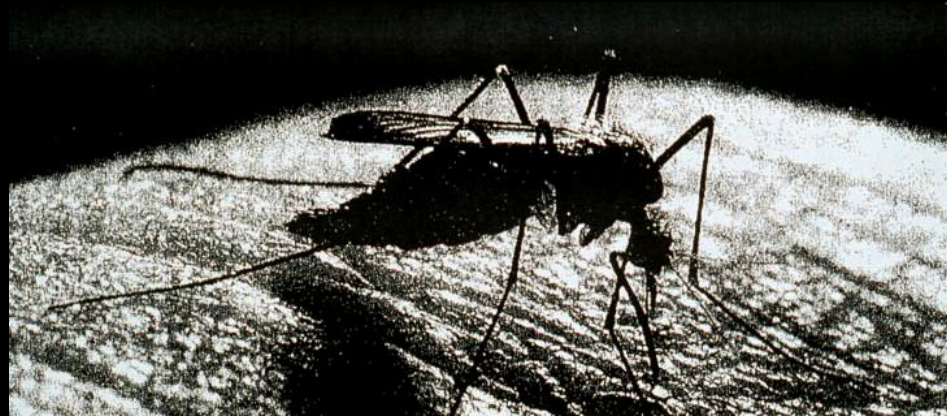


Impact of climate change on vector-borne diseases



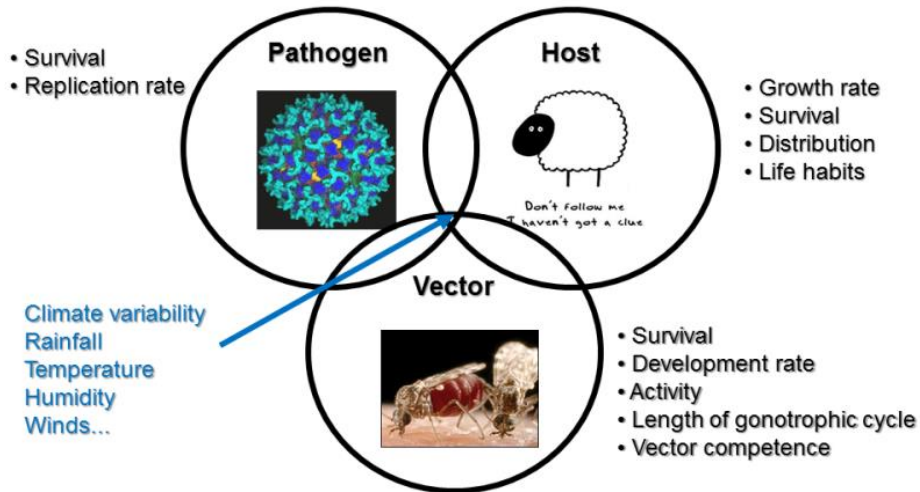
Climate change and Infectious Diseases
CHE webinar, 05 Dec 2019

Dr Cyril Caminade
Institute of Infection and Global Health, University of Liverpool
Cyril.Caminade@liverpool.ac.uk

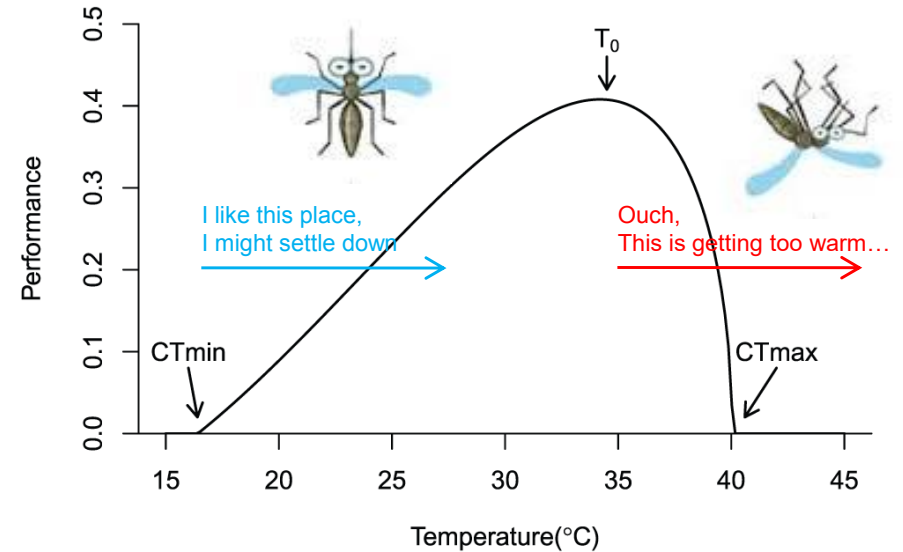
Climate change impacts on VBDs

VBDs are climate sensitive

Diseases transmitted by blood sucking arthropods



Vectorial capacity = $f(T^{\circ})$

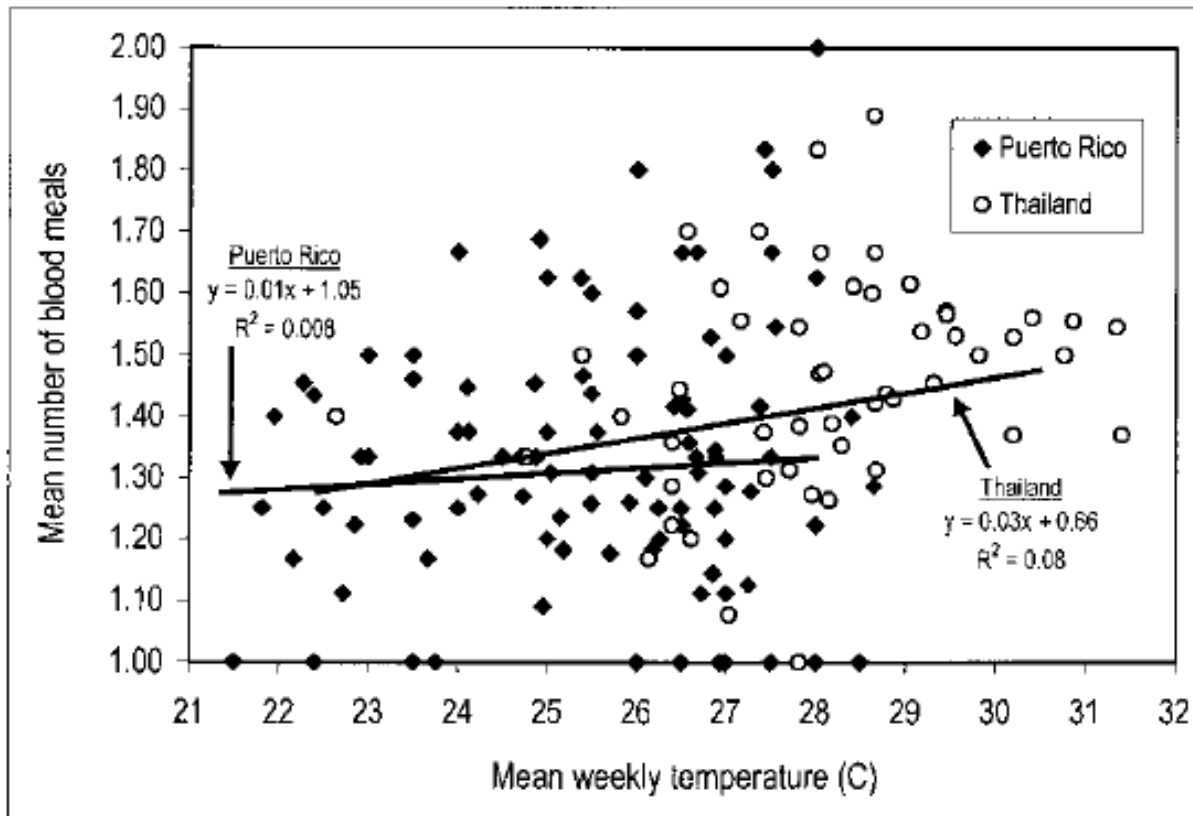


Lafferty KD and Mordecai EA 2016 - [F1000Research 2016, 5:2040](#)

Modelling the impact of climate variability on VBD burden, development of early warning systems (seasonal to climate change time scales).

Temperature effect on vector biting rates (b)

Scott et al., 2000, J Med Entomol 37(1):89–101



Biting rates:

Number of mosquito bites per day per host.

When temperature **increases**, biting rate **increases**.

Left:

*Biting rates of *Ae. aegypti*, the yellow fever mosquito; it can transmit dengue, Zika & yellow fever viruses.*

Fig. 5. Relationship between temperature and blood-feeding frequency of female *Ae. aegypti* collected weekly in Thailand (1990–1992) and Puerto Rico (1991–1993). Linear regression lines and equations for each site are included.

Temperature effect on vector development & mortality (μ)

Brady et al., 2013, Parasite and Vectors 6:351

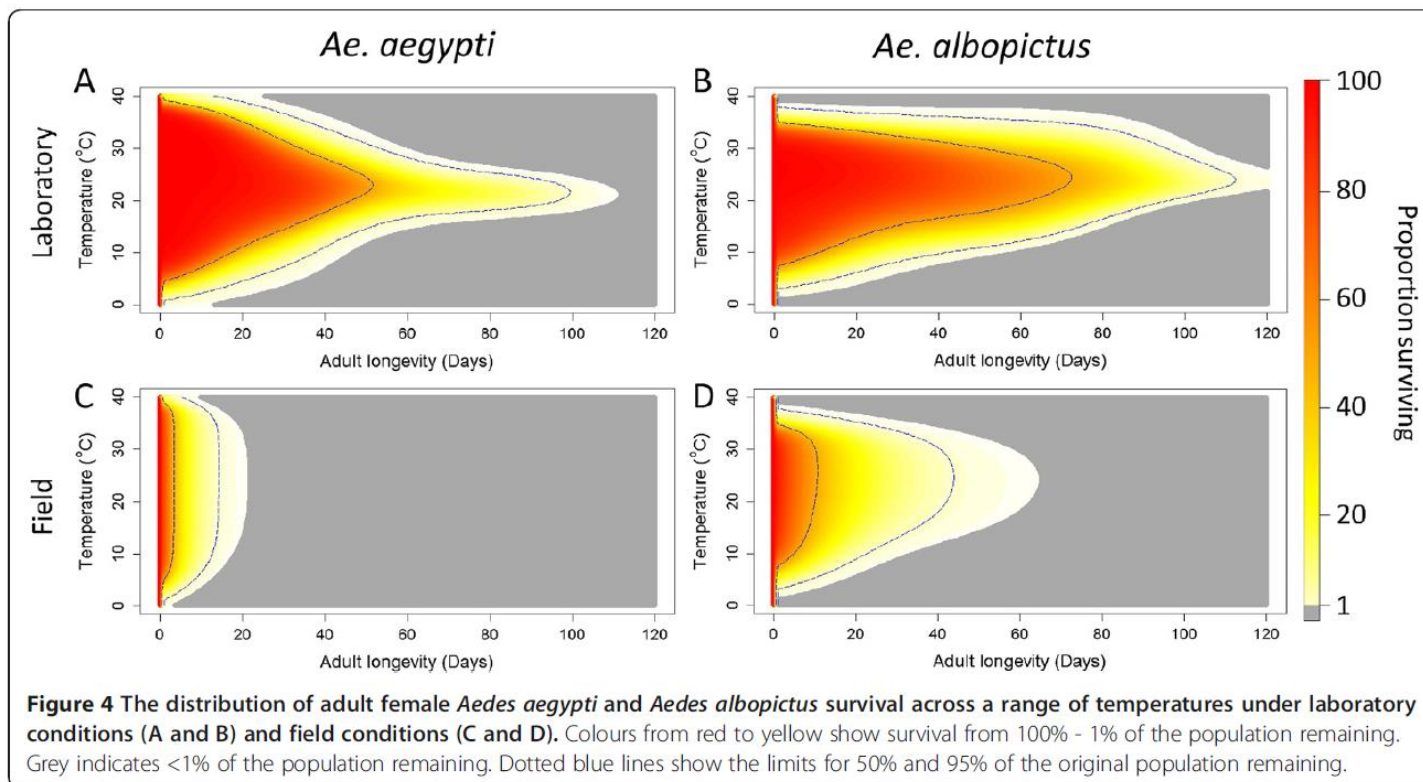
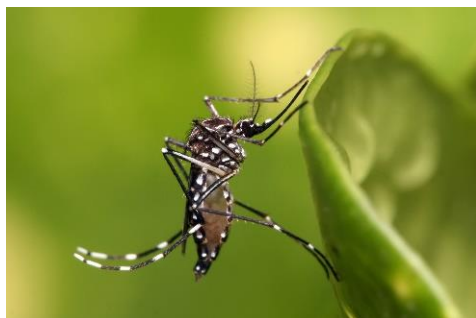


Figure 4 The distribution of adult female *Aedes aegypti* and *Aedes albopictus* survival across a range of temperatures under laboratory conditions (A and B) and field conditions (C and D). Colours from red to yellow show survival from 100% - 1% of the population remaining. Grey indicates <1% of the population remaining. Dotted blue lines show the limits for 50% and 95% of the original population remaining.



Ae. aegypti, the yellow fever mosquito



Ae. albopictus, the Asian tiger mosquito

Development rate and mortality:

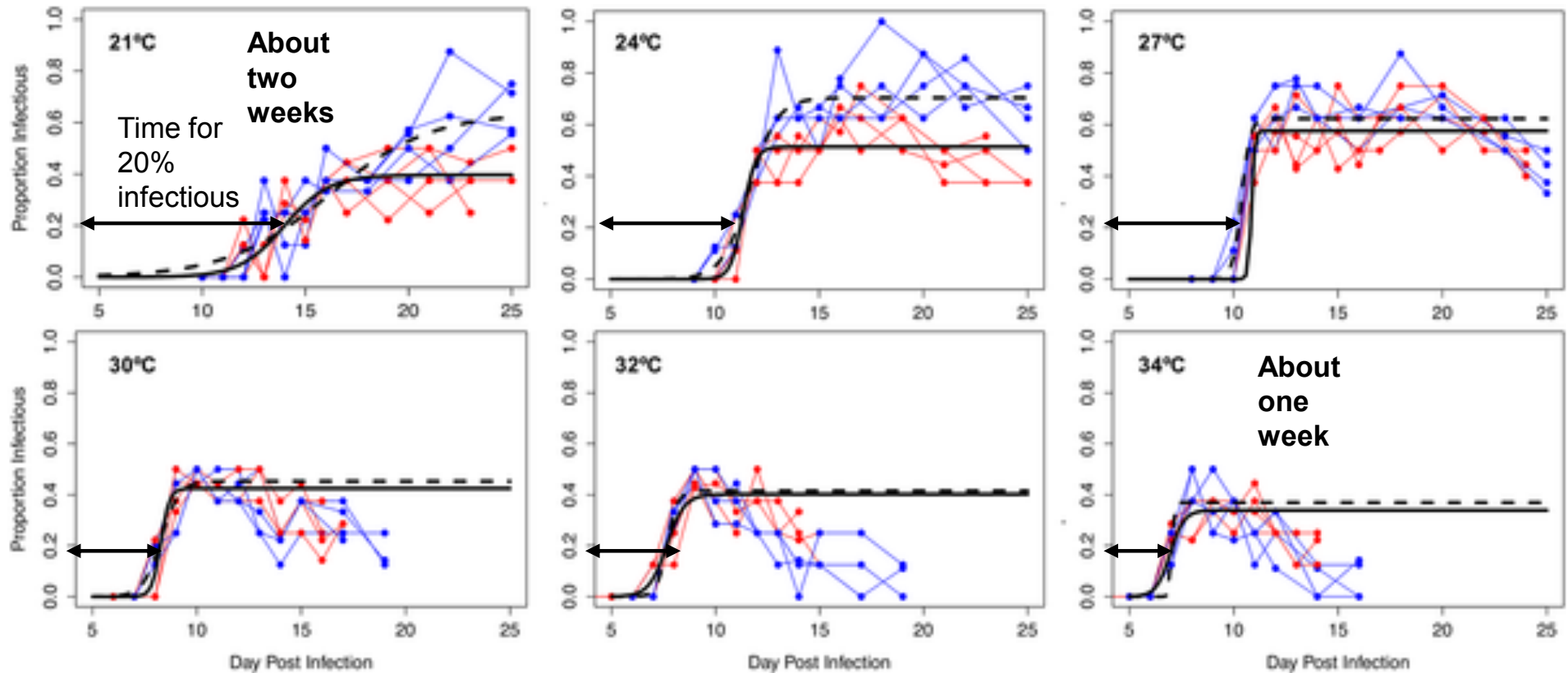
Mosquitoes develop faster at high temperature - if temperature exceeds about 35-37°C mortality tends to increase. Eggs can overwinter &/or resist desiccation.

Water is needed for breeding sites.

Significant differences between the lab and the field!

Temperatures effect on Extrinsic Incubation Period (EIP)

Shapiro et al., 2017, Plos Biology 15(10)



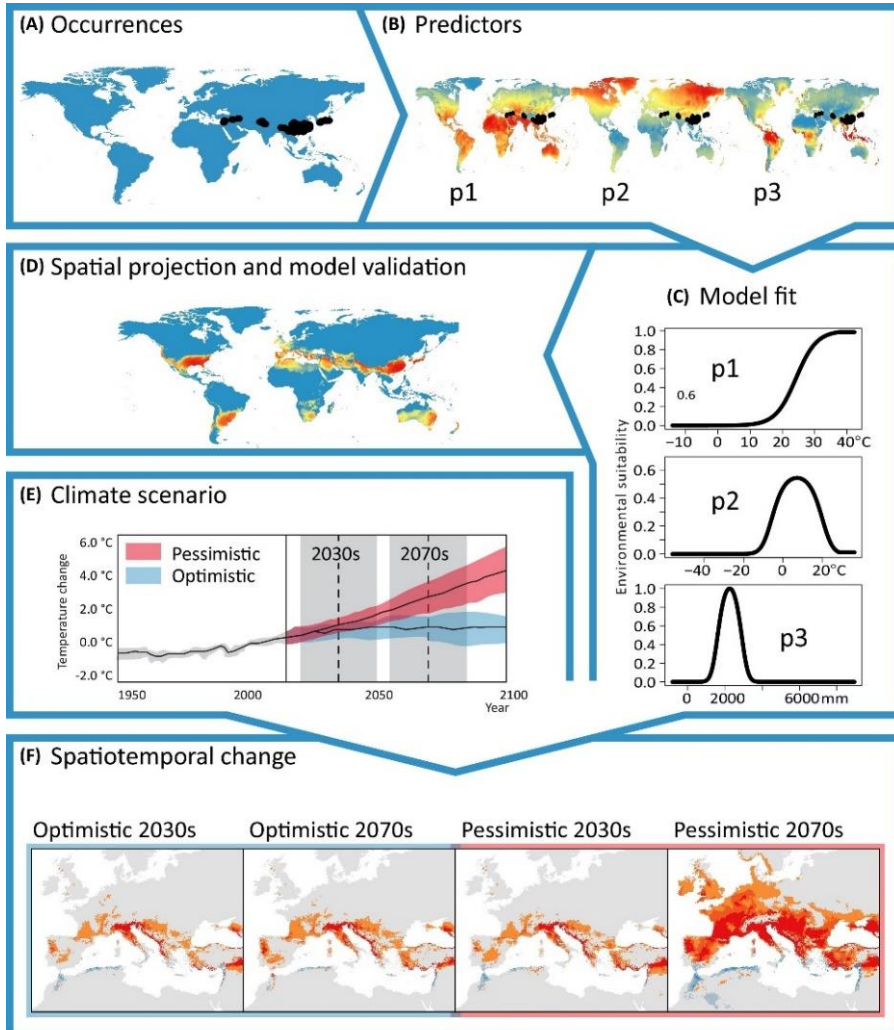
The Extrinsic Incubation Period (EIP) - example for *P. falciparum* and *An. gambiae*: time required for the pathogen to develop inside the mosquito vector before it becomes infectious (when the pathogen is detected in their salivary glands).

When temperature **increases**, the EIP **decreases e.g. it shortens**.

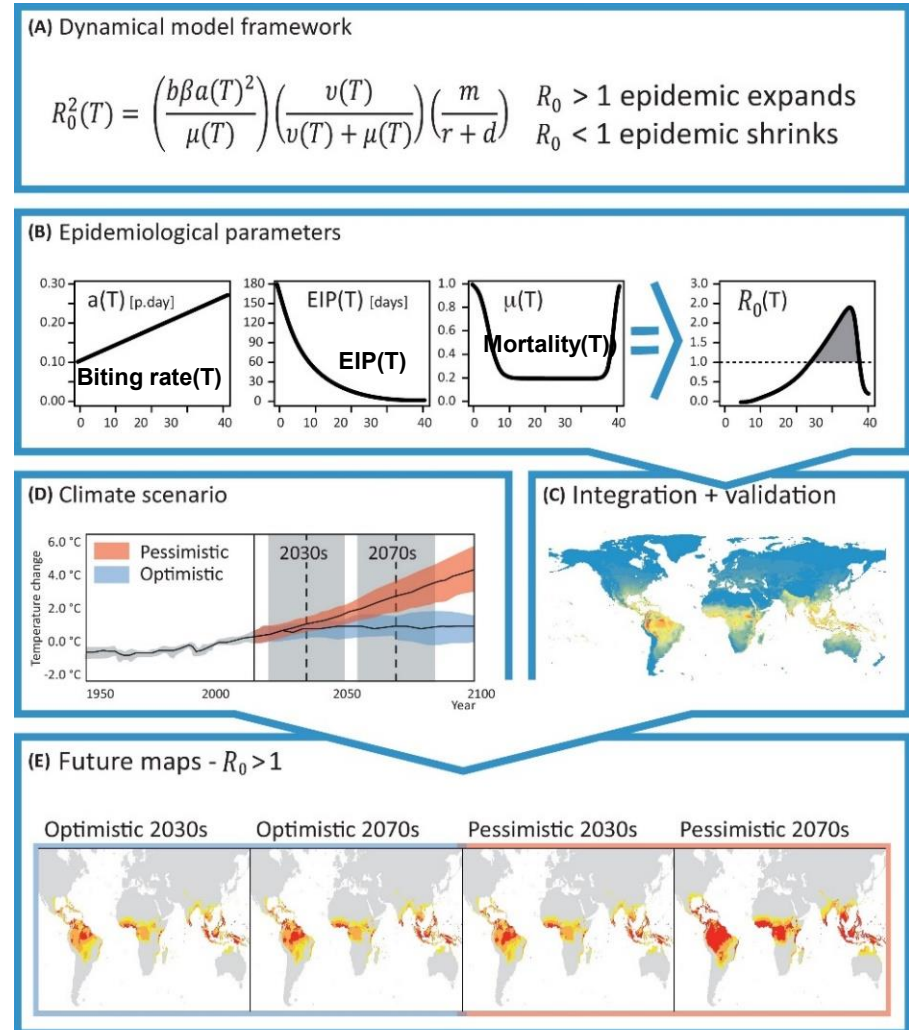
If the temperature is too low, mosquito dies before the pathogen can replicate in their body e.g. before becoming infectious (about 30days life span in the field).

Methods to model the impact of climate on VBDs

Statistical models



Mechanistic models



Stat models: Maxent, BRTs, Bayesian models, Mahalanobis distance...

Mechanistic models: SEIR/SIR, R_0 , Fuzzy logic, climate envelope...

Tjaden et al. (2018). *Trends in Parasitology* 34(3): 227-245. <http://dx.doi.org/10.1016/j.pt.2017.11.006>

Disclaimer: many factors affect VBDs

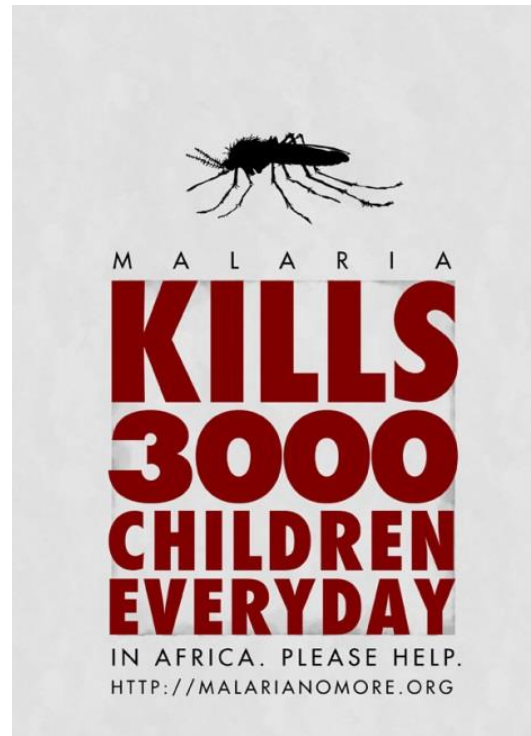
Rank*	Driver
1	Changes in land use or agricultural practices
2	Changes in human demographics and society
3	Poor population health (e.g., HIV, malnutrition)
4	Hospitals and medical procedures
5	Pathogen evolution (e.g., antimicrobial drug resistance, increased virulence)
6	Contamination of food sources or water supplies
7	International travel
8	Failure of public health programs
9	International trade
10	Climate change

Woolhouse and Gowtage-Sequeria, EID, CDC 2005

Impacts of VBDs



2nd Plague pandemic 15th century



Malaria in Africa



Zika outbreak in Latin America 2015-2016

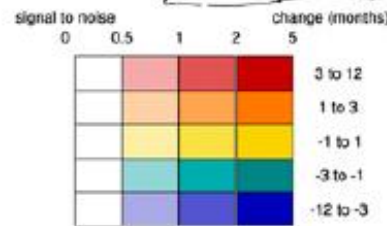
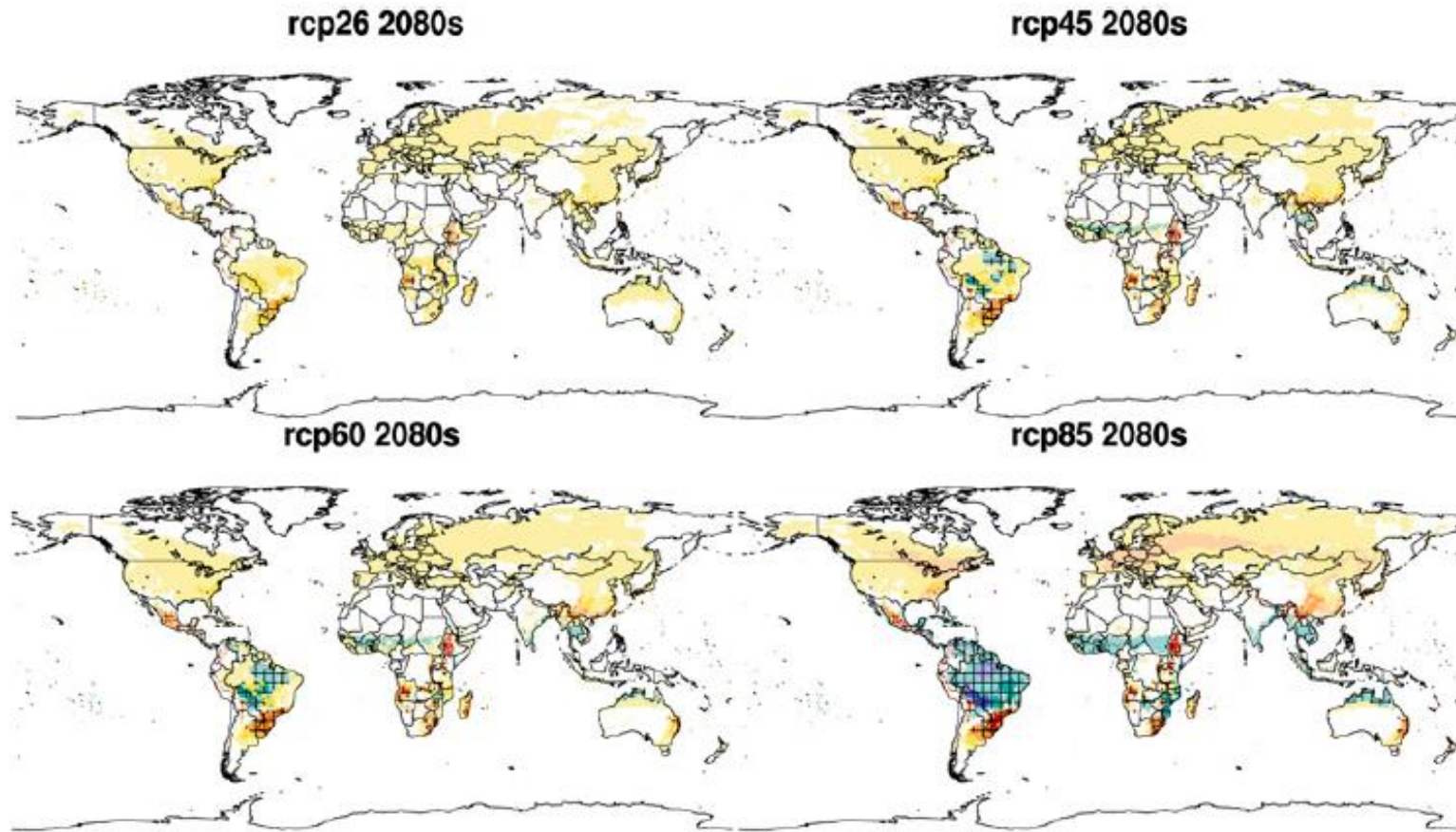
Bluetongue outbreak in Northern Europe Aug-Sep-Oct 2006



Yellow fever outbreak – Angola, DRC 2015-2016



Climate change impact on malaria



5 Malaria models
 5 Climate models
 4 emission scenarios
 SSP2 population scenario

Climatic suitability increases for all malaria models over Tropical highlands and decreases over low altitude regions (extreme RCP8.5 emission scenario – 2080s).

Caminade et al. (2014). PNAS 111(9): 3286-3291. [doi: 10.1073/pnas.1302089111](https://doi.org/10.1073/pnas.1302089111).

Is malaria moving to higher altitude & latitude?

Altitudinal Changes in Malaria Incidence in Highlands of Ethiopia and Colombia

A. S. Siraj,^{1*} M. Santos-Vega,^{2*} M. J. Bouma,³ D. Yadeta,⁴ D. Ruiz Carrascal,^{5,6} M. Pascual^{2,7†}

The impact of global warming on insect-borne diseases and on highland malaria in particular remains controversial. Temperature is known to influence transmission intensity through its effects on the population growth of the mosquito vector and on pathogen development within the vector. Spatiotemporal data at a regional scale in highlands of Colombia and Ethiopia supplied an opportunity to examine how the spatial distribution of the disease changes with the interannual variability of temperature. We provide evidence for an increase in the altitude of malaria distribution in warmer years, which implies that climate change will, without mitigation, result in an increase of the malaria burden in the densely populated highlands of Africa and South America.

Dhimal et al. *Malaria Journal* 2014, **13**(Suppl 1):P26
<http://www.malariajournal.com/content/13/S1/P26>



POSTER PRESENTATION

Open Access

Altitudinal shift of malaria vectors and malaria elimination in Nepal

Meghnath Dhimal^{1,2*}, Bodo Ahrens^{2,3}, Ulrich Kuch⁴

From Challenges in malaria research: Core science and innovation
Oxford, UK. 22-24 September 2014

Acta Tropica xxx (2013) xxx–xxx



Contents lists available at SciVerse ScienceDirect

Acta Tropica

journal homepage: www.elsevier.com/locate/actatropica



A first report of *Anopheles funestus* sibling species in western Kenya highlands

Eliningaya J. Kweka^{a,b,*}, Luna Kamau^c, Stephen Munga^b, Ming-Chieh Lee^d, Andrew K. Githeko^b, Guiyun Yan^d

^a Tropical Pesticides Research Institute, Division of Livestock and Human Health Disease Vector Control, P.O. Box 3024, Arusha, Tanzania
^b Centre for Global Health Research, Kenya Medical Research Institute, P.O. Box 1578, Kisumu, Kenya
^c Centre for Biotechnology Research and Development, Kenya Medical Research Institute, P.O. Box 54840, Nairobi 00200, Kenya
^d Program in Public Health, University of California, Irvine, CA 92697, USA

Dhimal et al. *Parasites & Vectors* 2014, **7**:540
<http://www.parasitesandvectors.com/content/7/1/540>



RESEARCH

Open Access

Species composition, seasonal occurrence, habitat preference and altitudinal distribution of malaria and other disease vectors in eastern Nepal

Meghnath Dhimal^{1,2,3,4*}, Bodo Ahrens^{2,3} and Ulrich Kuch⁴

OPEN ACCESS Freely available online



First Evidence and Predictions of *Plasmodium* Transmission in Alaskan Bird Populations

Claire Loiseau^{1*}, Ryan J. Harrigan², Anthony J. Cornel³, Sue L. Guers⁴, Molly Dodge¹, Timothy Marzec¹, Jenny S. Carlson³, Bruce Seppi⁵, Ravinder N. M. Sehgal¹

The Asian tiger mosquito *Ae. albopictus*

Ae. albopictus



Rapid spread worldwide



blue: original distribution, cyan: areas where introduced in the last 30 years.

Main introduction routes



Figure 2. Main *Aedes albopictus* introduction routes: (A) Used tyres. (B),(C) Lucky Bamboo (*Dracaena* spp.).

Scholte & Schaffner, 2007

Rapid spread in Europe

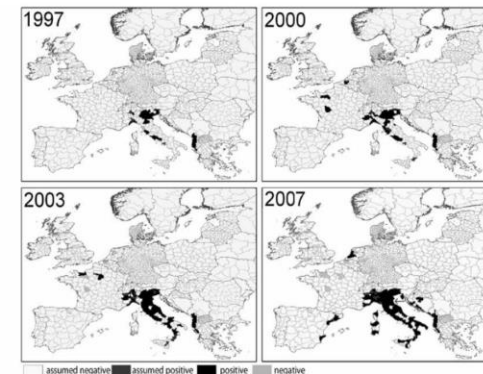
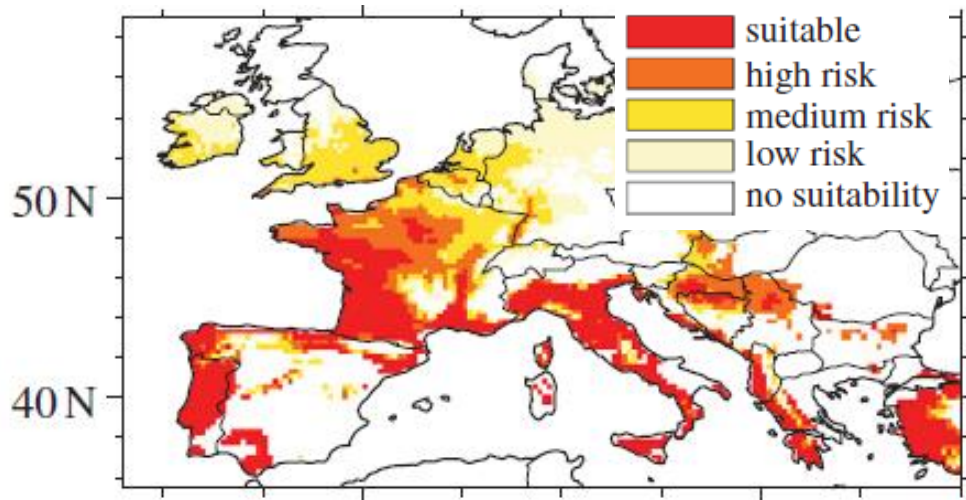


Figure 3. Presence of *Aedes albopictus* in Europe per province for the years 1997-2007. Data to complete this figure were kindly made available by Roberto Romi (Italy), Roger Eritja and David Roiz (Spain), Eleonora Flacio (Switzerland), Charles Jeannin (France), Anna Klobučar (Croatia), Zoran Lukac (Bosnia and Herzegovina), Igor Pajovic and Dusan Petrić (Serbia and Montenegro), Bjoern Pluskota (Germany), Anna Samanidou-Voyadjoglou (Greece). The map was made by Patrizia Scarpulla. The 2007 outbreak of Chikungunya virus in Italy is indicated with an arrow in the 2007 box.

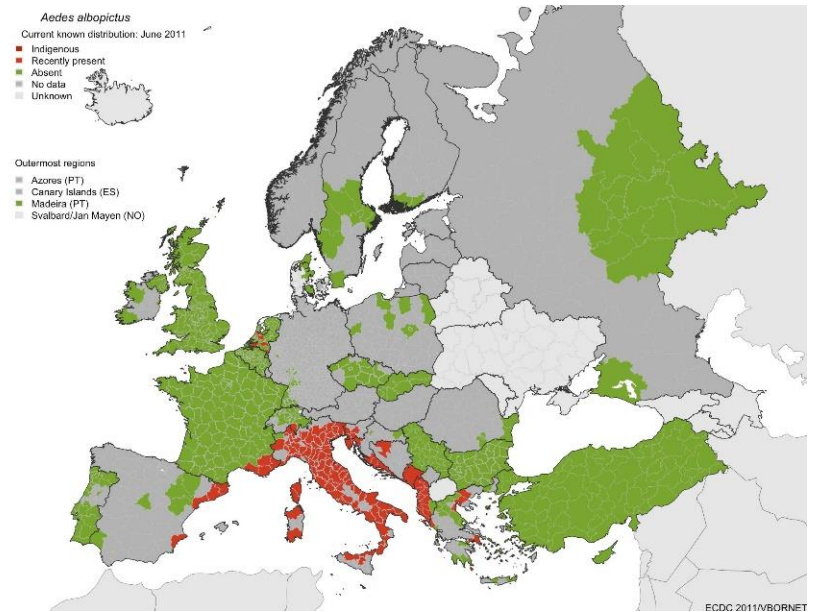
Scholte & Schaffner, 2007

Ae. albopictus: model scenarios vs observations

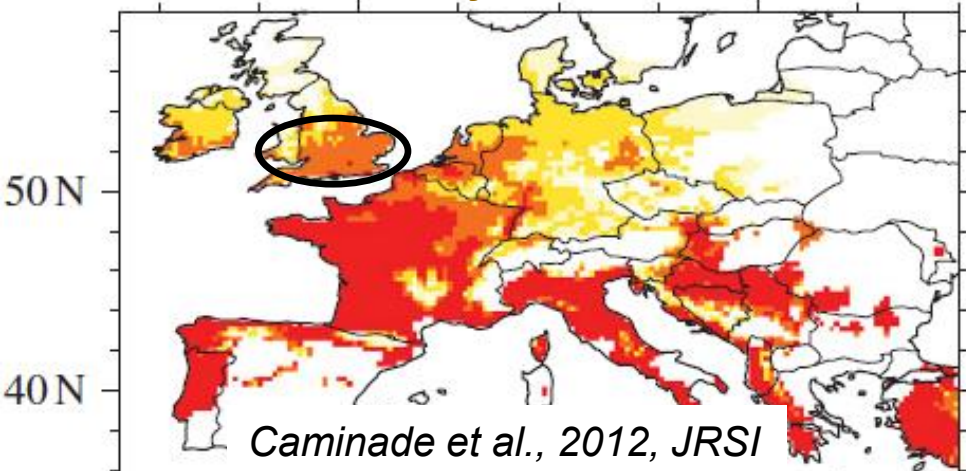
Model driven by climate obs (EOBS) 1990-2009



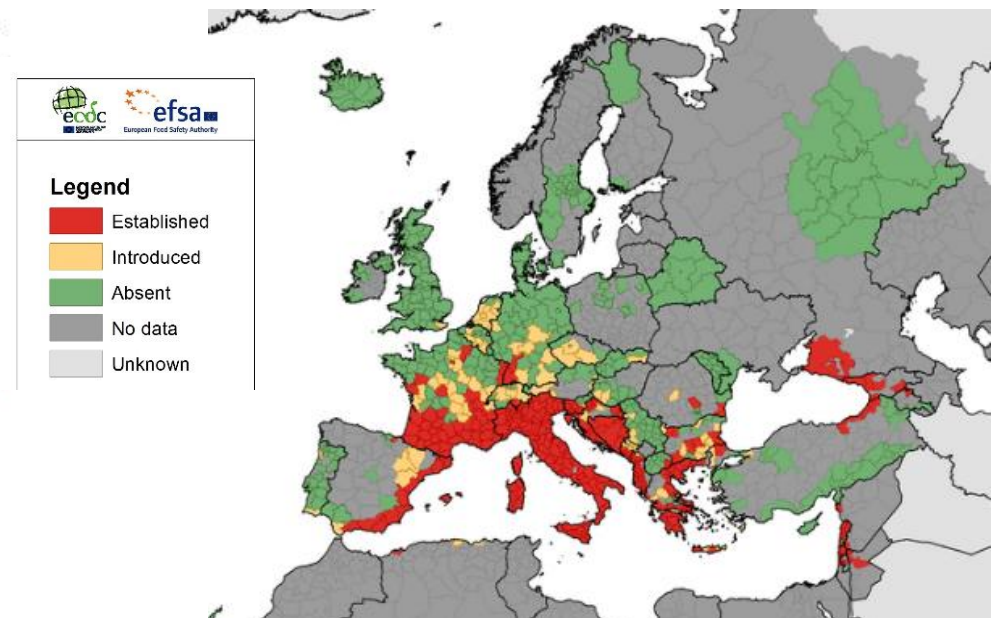
ECDC Obs – June 2011



Model driven by 11 RCMS 2030-2050



ECDC Obs – Aug 2019



Model based on an overwintering criterion ($T_{\text{January}} > 0\text{C}$, $\text{Rain}_{\text{annual}} > 500\text{mm}$) and different thresholds in annual Temperature:

suitable	$12\text{C} < T_{\text{annual}}$
high risk	$11\text{C} < T_{\text{annual}} < 12\text{C}$
medium risk:	$10\text{C} < T_{\text{annual}} < 11\text{C}$
low risk:	$9\text{C} < T_{\text{annual}} < 10\text{C}$
no suitability:	$T_{\text{annual}} < 9\text{C}$

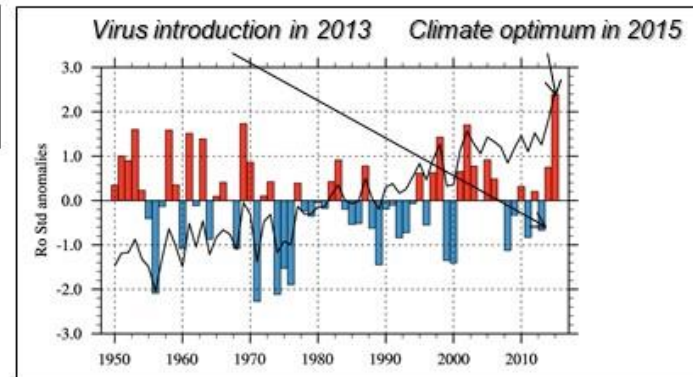
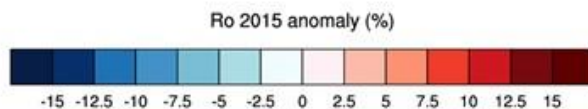
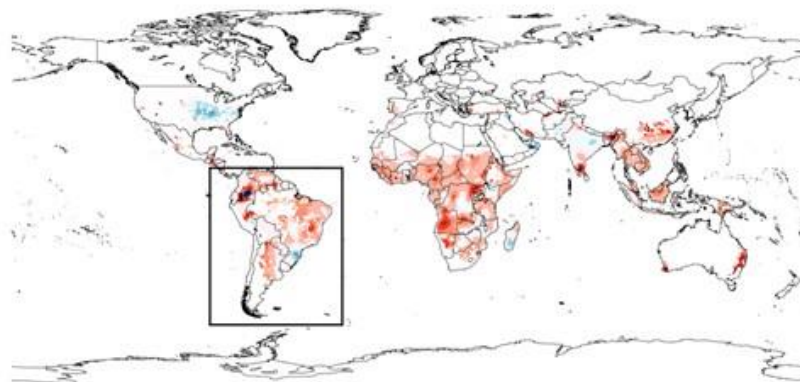
Future risk increase: Benelux, Balkans, western Germany, the southern UK
 Future risk decrease: Spain and Mediterranean islands

Zika outbreak in Latin America and El Niño

NIHR Health Protection Research Unit in Emerging and Zoonotic Infections

Global risk model for vector-borne transmission of Zika virus reveals the role of El Niño 2015

Cyril Caminade^{a,b,1}, Joanne Turner^a, Soeren Metelmann^{b,c}, Jenny C. Hesson^{a,d}, Marcus S. C. Blagrove^{a,b}, Tom Solomon^{b,e}, Andrew P. Morse^{b,c}, and Matthew Baylis^{a,b}



“temperature conditions related to the 2015 El Niño climate phenomenon were exceptionally conducive for mosquito-borne transmission of ZIKV over South America”

Caminade et al., PNAS 2017



INSTITUTE OF INFECTION
AND GLOBAL HEALTH



Climate and the outbreak of Zika virus in 2015-16



Global warming leads to much quicker spread of the Zika virus because the increased temperature, "makes mosquitoes mature faster, . . . bite more due to having a higher metabolism, and makes the Zika virus inside of them incubate faster."

— Al Gore on Tuesday, October 11th, 2016 in a speech



El Niño and Global Warming Blamed for Zika Spread

Mosquito-borne diseases like Zika can be extremely sensitive to climatic changes

By Kavya Balaraman. E&E News on December 21, 2016. Véalo en español



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Global risk model for vector-borne transmission of Zika virus reveals the role of El Niño 2015

Cyril Caminade^{1,2}, Joanne Turner³, Soeren Metelmann^{4,5}, Jenny C. Hesson^{6,7}, Marcus S. C. Blagrove^{8,9}, Tom Solomon¹⁰, Andrew P. Morse¹¹, and Matthew Baylis¹²

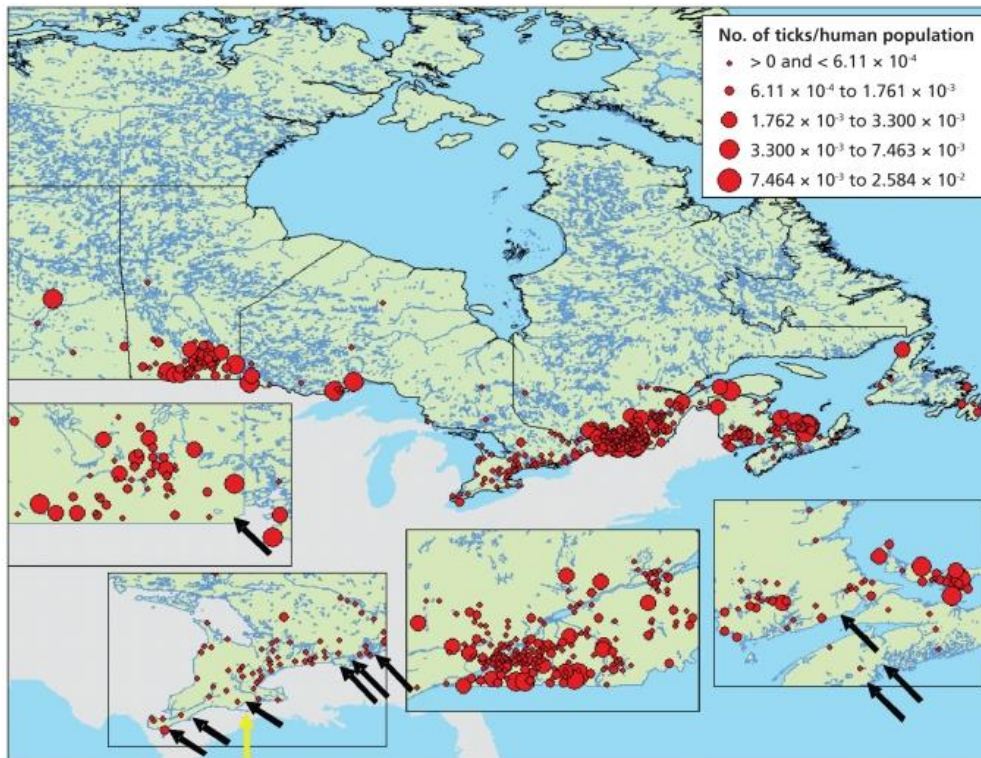
¹Department of Epidemiology and Population Health, Institute of Infection and Global Health, University of Liverpool, Liverpool L69 7YE, United Kingdom; ²Health Protection Research Unit in Emerging and Zoonotic Infections, University of Liverpool, Liverpool L69 3GL, United Kingdom; ³Department of Geography and Planning, School of Environmental Sciences, University of Liverpool, Liverpool L69 7ZT, United Kingdom; ⁴Department of Medical Virochemistry and Microbiology, Zoonosis Science Center, Uppsala University, Uppsala 751 23, Sweden; and ⁵Department of Clinical Infection, Microbiology and Immunology, Institute of Infection and Global Health, University of Liverpool, Liverpool L69 7BE, United Kingdom



“There’s a window of temperature that’s ideal, and when you look at 2015, the numbers were in the right range,” said Cyril Caminade, research associate with the university’s Institute of Infection and Global Health and author of the study.

<https://www.scientificamerican.com/article/el-nino-and-global-warming-blamed-for-zika-spread/>
<http://www.pnas.org/content/early/2014/01/30/130208911.abstract>

Other VBDs examples

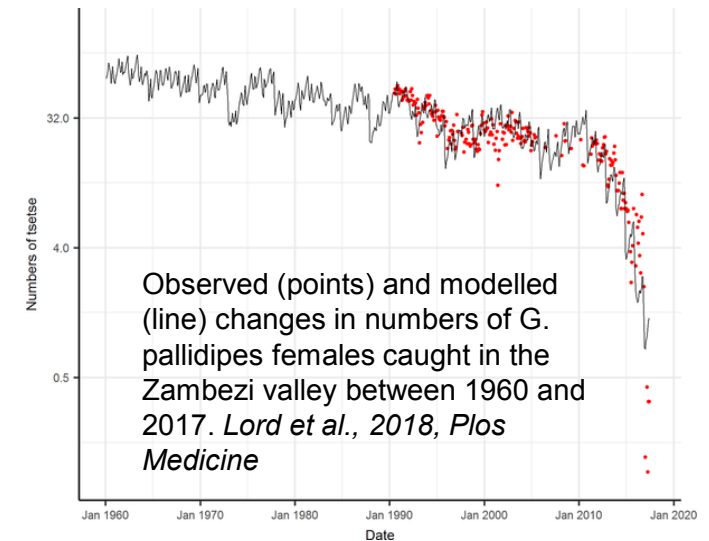


The distribution of *Ixodes scapularis*, reflecting information submitted to provincial and federal public health agencies from January 1990 to December 2003 and to the Lyme Disease Association of Ontario for 1993 to 1999

Ogden et al., 2008

Caminade C., K.M. McIntyre and A.E. Jones (2018). *Ann. of the New York Acad. of Sc.*, <http://dx.doi.org/10.1111/nyas.13950>

African Trypanosomiasis in Zambezi valley



Observed (points) and modelled (line) changes in numbers of *G. pallidipes* females caught in the Zambezi valley between 1960 and 2017. Lord et al., 2018, *Plos Medicine*

Tick-borne encephalitis northern Russia

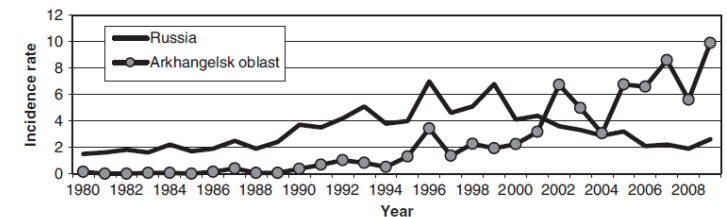


Fig. 3. TBE incidence in AO and in Russia as a whole in 1980–2009. Tokarevich et al., 2011

ANNALS OF THE NEW YORK ACADEMY OF SCIENCES
Special Issue: *Climate Sciences*
REVIEW

Impact of recent and future climate change on vector-borne diseases

Cyril Caminade, ^{1,2} K. Marie McIntyre, ^{1,2} and Anne E. Jones ³

¹Department of Epidemiology and Population Health, Institute of Infection and Global Health, University of Liverpool, Liverpool, UK. ²NiHR Health Protection Research Unit in Emerging and Zoonotic Infections, Liverpool, UK. ³Department of Mathematical Sciences, University of Liverpool, Liverpool, UK

Other infectious diseases affected by climate change...

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Comment la bilharziose, maladie tropicale, s'est invitée en Corse

Par Guillaume Mollaret | Publié le 17/05/2016 à 12:10



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Russia

Anthrax outbreak triggered by climate change kills boy in Arctic Circle

Seventy-two nomadic herders, including 41 children, were hospitalised in far north Russia after the region began experiencing abnormally high temperatures



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Yemen cholera cases pass 300,000 as outbreak spirals - ICRC

10 July 2017 | Middle East




TheDailyClimate | SUSTAINABILITY

Has Climate Change Made Lyme Disease Worse?

As Lyme disease spreads across the U.S., those in its path cope with a debilitating, bewildering array of maladies, misery and afflictions

By Marianne Lavelle on September 22, 2014



High-quality footage from the renowned Hollywood-based MRC Studios. Add these royalty-free videos to your project and wow your viewers. All in 4K and HD.


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Mothers May Pass Lyme Disease to Children in the World

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Brain-eating amoeba claims year's third life in Sindh



Naegleria fowleri, the brain-eating amoeba, has claimed another life in Karachi: a young man of around 29 years of age who died due to infection caused by the deadly microorganism at a private hospital on June 28, the Sindh Health Department disclosed on Tuesday.

"Ali Amjad, a teacher by profession and a resident of KDA Scheme No.1 in Karachi, was admitted to the Aza Khan

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In This Story

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- Naegleria fowleri
- Sindh
- Health

Conclusions

- Climate impacts vector borne diseases distribution (breeding sites – development and survival of vectors, pathogen development rate inside the vector e.g. EIP...)
- Increasing evidences that climate change already played a role in the background over the past 20 years: worrying trends have been observed in different temperate, arctic and highland regions.
- Many factors to consider to anticipate the real future of infectious diseases (socio-economic, demography, land use changes, drug and insecticide resistance, technological break through...).
- Need to use different disease modelling approaches and ensemble of climate models, emission & population scenarios to assess uncertainties, and these can be quite large!
- Model validation is critical but difficult - validation relies on the quality of health and climate data!
- Climate change is already affecting our health directly (climatic extremes: heat waves, floods, air pollution...) and will have significant indirect effects from macro to micro scale e.g. on freshwater and oceanic resources, agriculture, livelihoods, population migration... It only started...