

## **Introduction to Communicable**

# **Disease Epidemiology**

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### Objectives

- Define communicable disease, control, elimination and eradication
- Draw the cycle of infection
- Give examples of different types of infectious agents associated with diseases in humans
- List types of reservoir of infection
- Classify carriers and explain their public health importance in disease transmission
- Illustrate with examples the different modes of transmission of communicable diseases
- Define incubation period
- Classify and differentiate types of immunity
- Outline the measures for prevention and control of communicable diseases

#### **COMMUNICABLE DISEASES**

An illness caused by an infectious agent or its toxic product which can be transmitted directly or indirectly or through vector from the reservoir to a susceptible host.

### **Definition of Terms**

Control: Refers to the activities conducted to bring a disease or a

health problem at a very low level till it becomes no longer a public health problem.

• Elimination: Termination of all modes of transmission to a reduction

of the incidence of the disease to the zero in a confined or specific

geographic locality as a result of deliberate efforts yet, continued

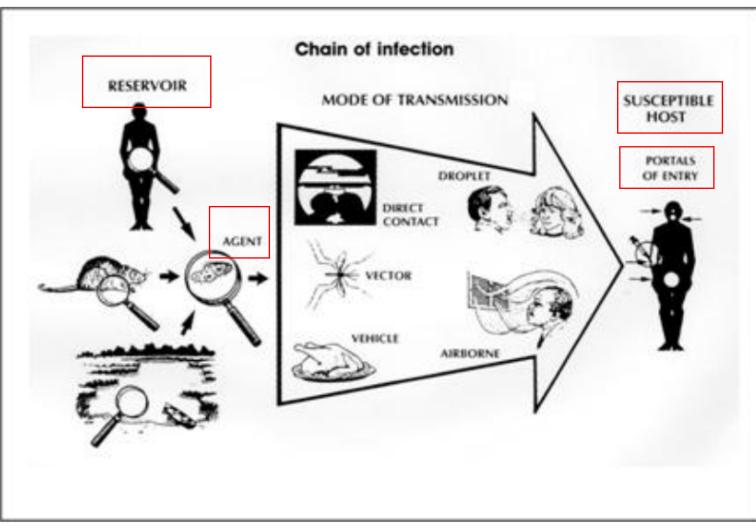
intervention methods are required.

### **Definition of Terms**

• Eradication: Termination of all modes of transmission of infection by extermination of the infectious agent. The concept of eradication is a global one. Small pox is the only disease that has been eradicated to date is small pox.

# Chain of infection





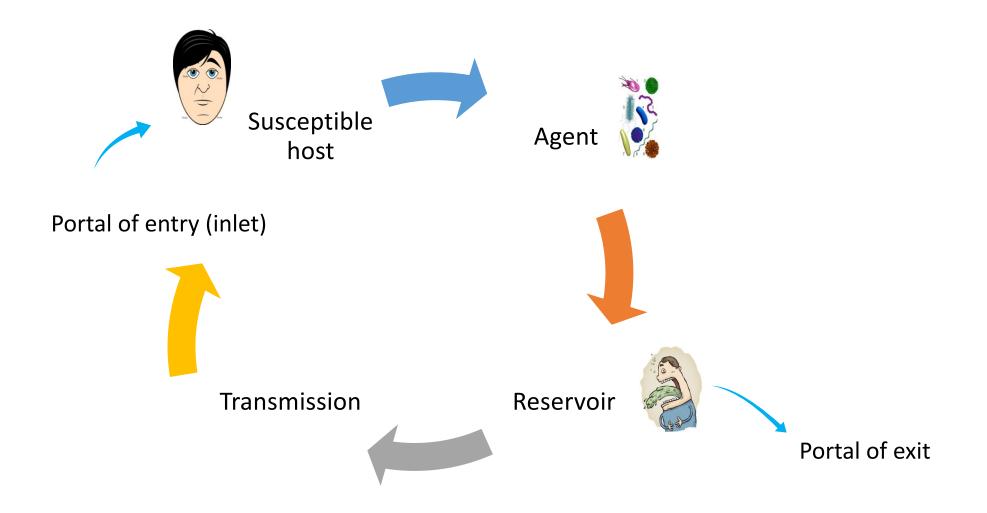
#### **Image Description**

Source: Centers for Disease Control and Prevention. Principles of epidemiology, 2nd ed.

Atlanta: U.S. Department of Health and Human Services;1992.

- The reservoir of an infectious agent is the habitat in which the agent normally lives, grows, and multiplies. Reservoirs include humans, animals, and the environment.
- Portal of exit is the path by which a pathogen leaves its host. For example, influenza viruses and *Mycobacterium tuberculosis* exit the respiratory tract, schistosomes through urine, cholera vibrios in feces.
- An infectious agent may be transmitted from its natural reservoir to a susceptible host in different ways.
- The portal of entry refers to the manner in which a pathogen enters a susceptible host.
- The final link in the chain of infection is a susceptible host. Susceptibility of a host depends on genetic or constitutional factors, specific immunity, and nonspecific factors that affect an individual's ability to resist infection or to limit pathogenicity.

#### The cycle of infection



# Examples of infectious agents associated with diseases in humans

Neisseria gonorrhea -Source = humans -Reservoir = humans

Salmonella typhi -Source = food/water -Reservoir = humans

Hepatitis C -Source = transfusion, blood products -Reservoir = humans

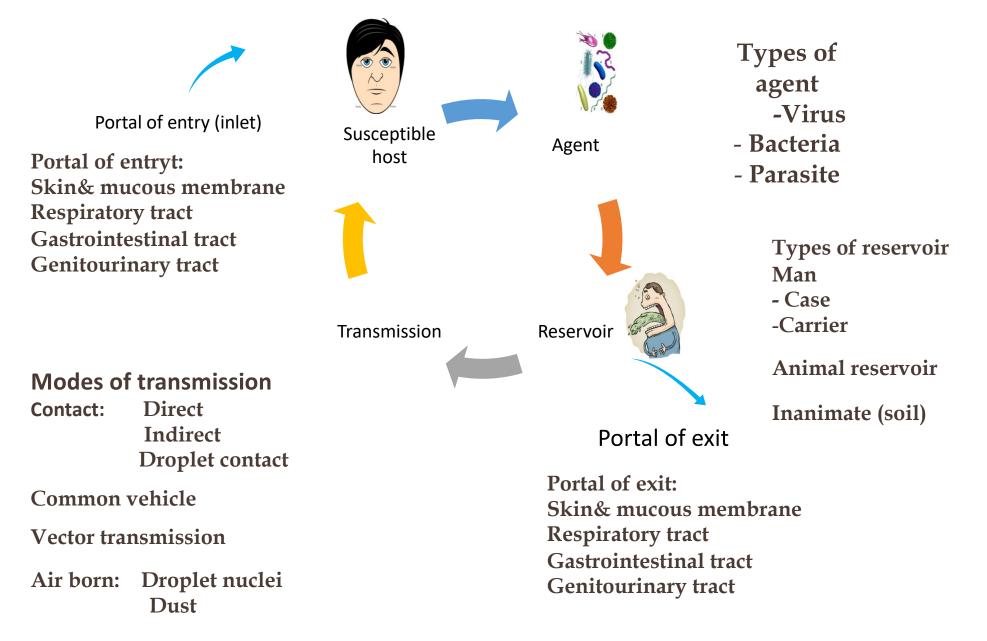
Rabies virus -Source = saliva of the dog -Reservoir = the dog

#### PRE-REQUISITES FOR THE TRANSMISSION OF COMMUNICABLE DISEASES

The six pre-requisites for the transmission of communicable diseases are

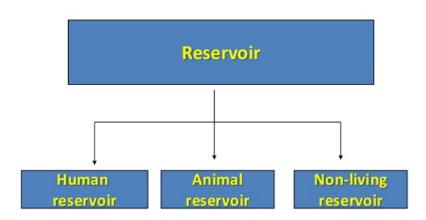
- 1. Presence of microbiological agent
- 2. Presence of reservoir of infection
- 3. Portal of exit through which the microbiological agent leaves the reservoir
- 4. Mode of transmission
- 5. Portal of entry (inlet) through which the microbiological enters the host
- 6. Presence of susceptible host

# PRE-REQUISITES FOR THE TRANSMISSION OF COMMUNICABLE DISEASES



### **Types of reservoir of infection**

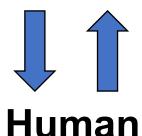
#### Types of reservoirs

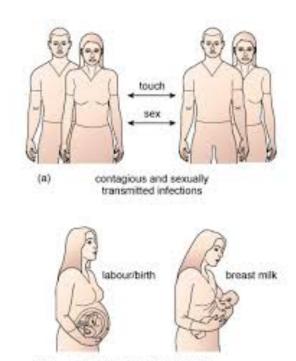


## **Reservoir of Infection**

1. Human to Human

### Human





mother-to-child transmission

 $(\mathbf{b})$ 

Most viral and bact. RTIs

- Most staph and strept.
- STD
- Human reservoir could be cases or carriers

# Carriers and their public health importance in disease transmission

- Hosts without obvious illness
- Continue to spread the pathogen even though they have recovered from illness.
- Unless the family and other close contacts of the sick person or even the whole population can be treated, carriers will remain a threat to the health of those surrounding them.

Table 2.2. Examples of infections with asymptomatic carriers			
Infection	Asymptomatic infections		
Bacillary dysentery Cholera (El Tor) Giardiasis Polio Typhoid fever Schistosomiasis Hookworm Yellow fever Japanese Encephalitis Filariasis Malaria River blindness Plague	common $^{(3)}$ only 1 in 30-50 infections develops illness $^{(16)}$ 1 in 2-4 infections develops illness $^{(44)}$ very common $^{(73)}$ very common $^{(16)}$ very common $_{(3)}$ only 1 in 1,000 infections develops illness $^{(44)}$ very common $^{(3)}$ common $^{(3)}$ common $^{(2)}$ common during epidemics $^{(73)}$		

#### **Importance of carriers**

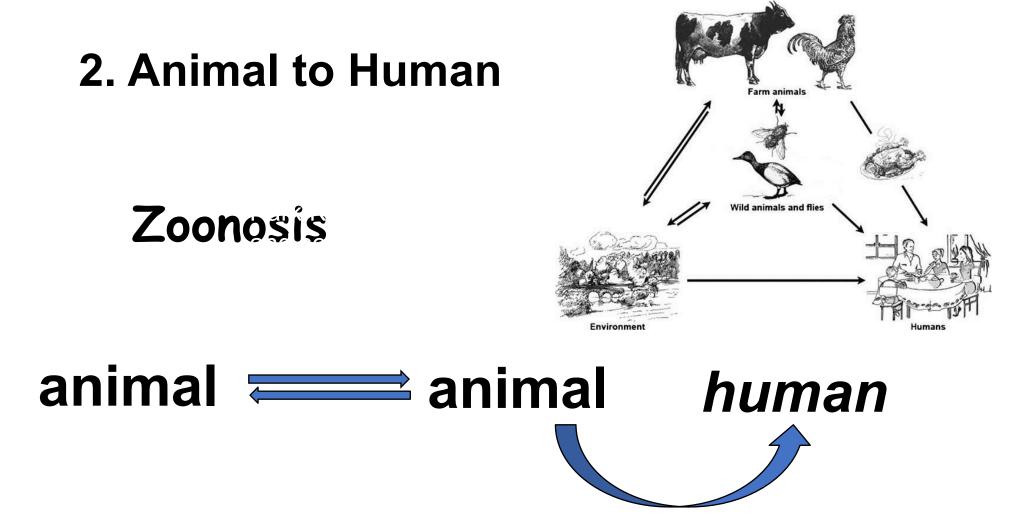
- *Number* carriers may outnumber cases
- **Difficulty in recognition** carriers don't know that they are infected
- *Mobility* carriers are mobile, cases are restricted
- *Chronicity* carriers re-introduce infection and contribute to endemicity

#### Effect of carriers on disease transmission

• *Ice-berg effect* in temperate zone

These are the fact that carriers constitute a hidden reservoir of infection and that they may outnumber actual cases

### **Reservoir of Infection**



## **Reservoir of Infection**

# 3. Non-living reservoir

# Soil, water...

- Tetanus
- Botulism
- Fungi (ringworm and hookworm)



# AGENT FACTORS RELATED TO DEVELOPMENT OF A DISEASE

**Pathogenicity:** Ability of the organism to produce disease or damage to the host/ specific clinical picture

**Virulence:** Ability to produce severe pathological reaction. Measured by the ratio of clinical to subclinical disease and case fatality rate

**Dose of infection (inoculum):** high probability of severe disease with higher dose of infection

Viability of the organism (resistance): Ability of the organism to live outside the body

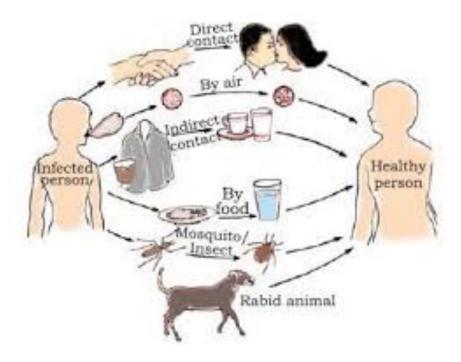
**Spore formation:** Maintain viability for a long period in unfavorable environmental conditions

Antigenic power of the organism: Ability to stimulate the immune system to produce antibodies or antitoxin with subsequent immunity. Measured by the second attack frequency

**Ease of communicability** is measured by the secondary attack rate, which is the number of secondary cases, occurring within the range of incubation period following exposure to a primary case expressed as a percentage of susceptible.



# Modes of transmission of communicable diseases



### Modes of transmission

Mode of transmission Sub-types of trans	
Direct	Touching
	Sexual intercourse
	Biting
	Direct projection of droplets
	Across the placenta
Indirect	Airborne
	Vehicle-borne
	Vector-borne



#### **Direct transmission**

refers to the transfer of an infectious agent from an

infected host to a new host, without the need for intermediates such as air, food,

water or other animals. Direct modes of transmission can occur in two main ways:





#### **Direct transmission**

Person to person: through touching, biting, kissing, sexual intercourse or direct projection of respiratory droplets into another person's nose or mouth during coughing, sneezing or talking. A familiar example is the transmission of HIV from an infected person to others through sexual intercourse. Transplacental transmission: This refers to the transmission of an infectious

agent from a pregnant woman to her fetus through the placenta.

An example is MTCT of HIV.

#### **Indirect modes of transmission**

**Indirect transmission** is when infectious agents are transmitted to new hosts through intermediates such as air, food, water, objects or substances in the environment, or other animals.

#### **Indirect transmission**

#### 1- Airborne transmission:

The infectious agent may be transmitted in dried secretions from the respiratory tract, which can remain suspended in the air for some time. For example, the infectious agent causing tuberculosis can enter a new host through airborne transmission.

# 1- Air-borne

- Droplet infection (direct spread):
   Whooping cough
- Droplet nuclei (indirect air-borne): TB, histoplasmosis
- Dust particles (indirect air-borne): Fungal spores



#### **Indirect transmission**

#### 2- Vehicle-borne transmission:

A **vehicle** is any non-living substance or object that can be contaminated by an infectious agent, which then transmits it to a new host. **Contamination** refers to the presence of an infectious agent in or on the

vehicle.

# 2- Food and Drink-borne



- Food and drink borne illnesses are caused by the consumption of drinks that are contaminated with organism causing disease.
- The most commonly recognized are: campylobacter, Salmonella and Escherichia coli bacteria
- Human hands or/and flies



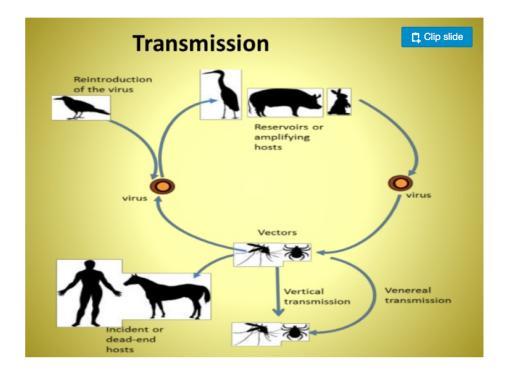
#### **Indirect transmission**

3- Vector-borne transmission: A vector is an organism, usually an *arthropod*, which transmits an infectious agent to a new host.
Arthropods which act as vectors include houseflies, mosquitoes, lice and ticks.

## 3- Arthropod-borne

Group of infectious agents that are transmitted by

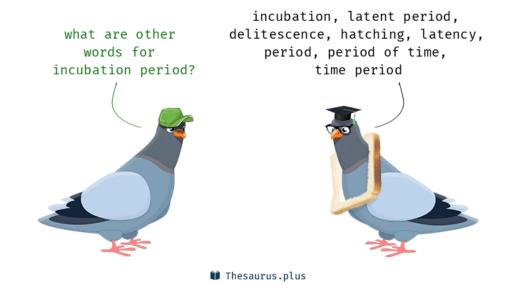
bloodsucking arthropods from one vertebrate host to another.



## Examples

Virus	Reservior	Vector	Disease
Chikungunya	Monkeys	Mosquito	Chikungunya fever
Dengue	Monkeys, Man	Mosquito	Dengue hemorrhagic fever
Japanese B Encephalitis	Wild birds, Pigs	Mosquito	Encephalitis
Kyasunur Forest Disease	Forest birds, animals	Tick	Hemorrhagic fever
Sindbis	birds	Mosquito	Sindbis fever

### **INCUBATION PERIOD**



#### **INCUBATION PERIOD**

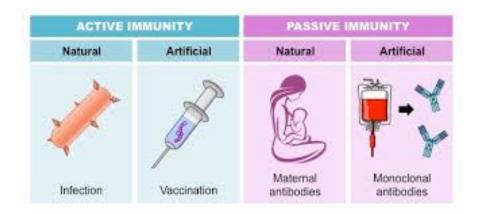
It is the period between the entry of the organism and the appearance of the first symptom of the disease

Knowledge of the incubation period is important for

- Surveillance and quarantine in some diseases
- Application of preventive measures to abort or modify the attack.

Identification of the source of infection

## Types of immunity



### SUSCEPTIBLE HOST AND IMMUNITY

A person or other living animal, that afford subsistence or lodgment to an infectious agent under natural condition. Susceptibility to infection is universal but susceptibility to disease depends immunity and resistance.

#### Immunity

Natural resistance of the body offered by skin, gastric acidity

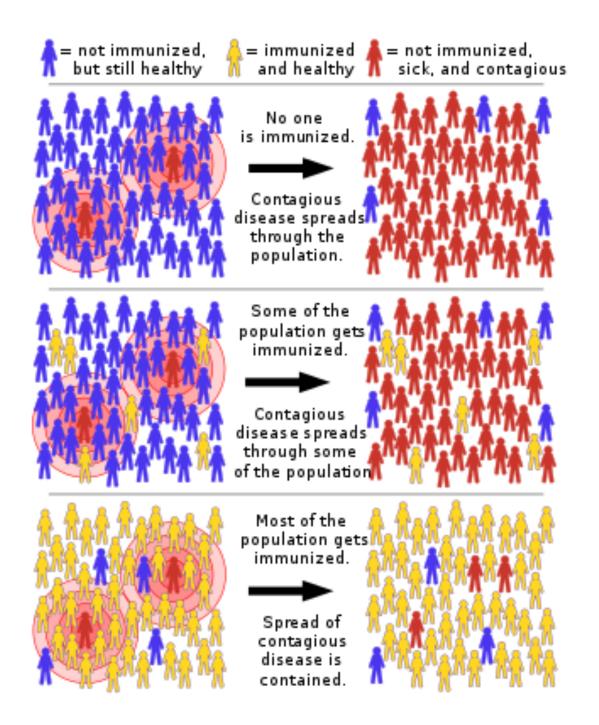
#### Acquired immunity

**Passive**: acquired through transferred antibodies from mother to infant (**natural**) or by administration of immunoglobulin or antisera (**artificial**)

Active: post infection immunity (natural) or following vaccination (artificial)

### **Herd immunity**

 Herd immunity, also known as community immunity, refers to the protection offered to everyone in a community by high vaccination rates. With enough people immunized against a given disease, it's difficult for the disease to gain a foothold in the community. This offers some protection to those who are unable to receive vaccinations



http://vk.ovg.ox.ac.uk/vk/herd-immunity

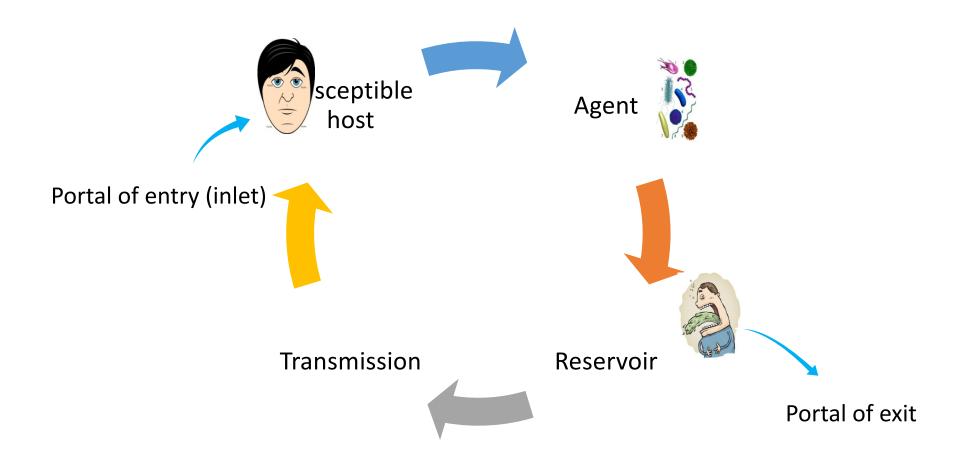
# People who depend on herd immunity

- Some people in the community rely on herd immunity to protect them. These groups are particularly vulnerable to disease, but often cannot safely receive vaccines:
- People without a fully-working immune system, including those without a working spleen
- People on chemotherapy treatment whose immune system is weakened
- People with HIV
- Newborn babies who are too young to be vaccinated
- Elderly people
- Many of those who are very ill in hospital

# Prevention and control of communicable diseases



# PREVENTION AND CONTROL OF COMMUNICABLE DISEASES



#### BREAKING THE CYCLE AT ITS WEAKEST POINT

# MEASURES FOR THE PREVENTION OF COMUNICABLE DISEASES

Measures applied to disease agents: Sterilization and disinfection





# MEASURES FOR THE PREVENTION OF COMUNICABLE DISEASES

#### Measures applied to reservoir of infection

•Cases: Case finding, reporting to the local health authority in order to apply the appropriate control measures for contact and the environment, isolation (strict isolation or discharge/body fluid isolation) for the whole period of communicability and treatment.

•Carriers: Identification of carriers in the community, treatment and exclusion from work till the organism is eliminated especially if food handlers or working with children. Its cost effectiveness depends on the proportion of carrier in the community as well as the sensitivity of their occupation.

•Animal reservoir: Adequate animal husbandry, immunization (if vaccine is available), treatment of infected animals and killing if treatment is not feasible.

# MEASURES FOR THE PREVENTION OF COMUNICABLE DISEASES

**Measures applied to contact:** Enlistment, surveillance for the longest incubation period of the disease, isolation (if indicated) as well as increase resistance by immunization or chemoprophylaxis.

**Measures applied to the host:** Health education, adequate personal hygiene, sound nutrition, immunization and chemoprophylaxis.

**Measures applied to the environment:** sanitation (water/food/sewage)

