

Emerging Infectious Diseases in the Post-COVID-19 World

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I have no relevant financial relationships or affiliations with commercial interests to disclose.

Emerging Infectious Diseases as defined by the NIAID

Infectious diseases that have newly appeared in a population or have existed but are rapidly increasing in incidence or geographic range, or that are caused by one of the NIAID Category A, B, or C priority pathogens

What Do EID Look Like?

•Local, small numbers

- Alaskapox
- •Regional impact, limited numbers
 - Middle Eastern Respiratory Syndrome
- •Cross-continent, limited numbers
 - SARS
- •Pandemic
 - Limited numbers, e.g. MPOX
 - Unlimited numbers, e.g. SARS-2-CoV

Emerging Infectious Diseases

"Mama always said like was like a box of chocolates. You never know what you're gonna get."

~Forrest Gump



QuoteDiaries.com

Historical EID That Went Pandemic

Bubonic Plague

- 1st pandemic: 541 to 750 AD
- 2nd pandemic: 14th -16th century
- 3rd pandemic: 1855 early 20th century
- **Syphilis** (The Great pox) 15th-17th century
- •Smallpox 16th-18th centuries
- **Tuberculosis** 18th century
- •Cholera 19th century
- Influenza 20th century
- •HIV 20th century



Source: James Killoran et al., The Key to Understanding Global History, Jarrett Publishing (adapted)

John Snow memorial London,UK

The Triumph of Death Pieter Bruegel the Elder Copyright ©Museo Nacional del Prado

Another pandemic! What are the chances?



- A dataset of historical epidemics from 1600 to present was used to estimate the yearly probability of occurrence of extreme epidemics
- •Yearly occurrence probabilities of extreme epidemics with the intensity of the "Spanish flu" varies between 0.27 and 1.9%
- The probability of experiencing pandemics similar to COVID-19 in one's lifetime is about 38% and may double in coming decades.

How Does Emergence Happen?

- Between 60% and 80% of EID are derived from animal sources.
- Emergence involves 2 main steps
 - Introduction of a microbe into a new host population.
 - The microbe becomes established an transmitted within the population



Geography of EID Since 2003





Factors That Trigger Emergence

- Multiple factors contribute to the emergence/re-emergence of infectious diseases
- The factors often differ between '<u>newly emerging</u>', '<u>re-emerging</u>' and '<u>deliberately emerging</u>' diseases

 Microbial adaptation and change 	 International travel and commerce
 Human susceptibility to infection 	 Technology and industry
 Climate and weather 	 Breakdown of public health measures
 Changing ecosystems 	 Poverty and social inequality
 Human demographics and behavior 	 War and famine
 Economic development and land use 	 Lack of political will
	 Intent to harm

Any Vector Borne Disease Can Emerge Outside Its Region Due to Change in Vector Range

		Type of			Type of
Vector	Disease caused	pathogen	Vector	Disease caused	pathogen
Mosquito Aedes	Chikungunya	Virus	Fleas	Plague	Bacteria
	Dengue	Virus		Tungiasis	Ectoparasite
	Lymphatic filariasis	Parasite	Lice	Typhus	Bacteria
	Rift Valley fever	Virus		Louse-borne relapsing fever	Bacteria
	Yellow Fever	Virus	Sandflies	Leishmaniasis	Parasite
	Zika	Virus		Sandfly fever	Virus
Anopheles	Lymphatic filariasis	Parasite	Ticks	Crimean-	Virus
	Malaria	Parasite		Congo hemorrhagic fever	
Culex	Japanese	Virus		Lyme disease	Bacteria
	encephalitis			Relapsing fever (borreliosis)	Bacteria
	Lymphatic filariasis	Parasite		Rickettsial diseases	Bacteria
	West Nile fever	Virus		Tick-borne encephalitis	Virus
Aquatic snails	Schistosomiasis	Parasite		Tularaemia	Bacteria
Blackflies	Onchocerciasis	Parasite	Triatome bugs	Chagas disease	Parasite
			Tsetse flies	Sleeping sickness	Parasite

Ticks as Vectors of Emerging Infectious Diseases

- 1975 Lyme disease identified in Connecticut, now in 70 countries/5 continents.
- 1994 HGA, HME, and B. microti identified in humans.
- 2004 Candidatus Neoehrlichia mikurensis, identified in Japan and now reported elsewhere in Asia, Europe and Africa.
- 2007- Severe Fever with Thrombocytopenia Syndrome (STFS) – discovered in China, also found in Japan & Korea.
- 2009 Heartland virus, first identified in humans in Missouri, subsequently found in ticks is 13 states.
- 2014 Bourbon virus?

Baneth, Int. J. Parasitology. 44:591, 2014



American Dog Tick

Lone Star Tick

Black legged Tick

www.cdc.gov/ticks/life_cycle_and_hosts

Mosquitos and Emerging Infectious Diseases (Mosquitos not actually life-sized)

Ades aegypti

yellow fever virus, dengue virus, chikungunya virus, Zika virus



https://www.ecdc.europa.eu/en/disease-vectors/facts/mosquitofactsheets/aedes-albopictus

Ades albopictus

chikungunya virus, dengue virus and dirofilariasis





Reported Distributions of Emerging Arboviruses



https://doi.org/10.1146/annurev-med-050715-105122

Differences in Life Cycle Completion of *Aedes aegypti* in 1950's and 2050's Relative to 2000's



https://www.nature.com/articles/s41467-020-16010-4

Key Lessons from History and Epidemiology

- EID most commonly are zoonoses that jump species to humans
 - Often involving a mammalian intermediate
 - Often vector borne and vectors can move
 - Associated with mass movements of people
- Pandemic EID have shaped history, and will continue to do so
- Anytime, anywhere
- Frequent
- Another pandemic is inevitable, "WHEN not IF"

Emerging Infectious Diseases For Further Discussion

MPOX

- Heartland virus
- Dengue



https://en.m.wikipedia.org/wiki/File:Chevalier _Roze_%C3%A0_la_Tourette_-_1720.PNG

Chevalier Roze à la Tourette – 1720 Michel Serre

MPOX (formerly known as Monkeypox virus) A brief history

- 1958 identified in 2 colonies of laboratory monkeys with a pox-like illness
- **1970** human MPOX infection identified in Dem. Rep. of Congo (formerly Zaire).
- **1970 early 2000's** sporadic disease/epidemics in Central and W. Africa.
 - Majority of cases were found in children, case fatality rates of 1-17%
 - Considered a zoonotic infection acquired from mammals (rodents, non-human primates)
 - 2 clades, Congo Basin and West African
 - 2003 47 cases in USA linked to infected rodents imported from Ghana
- •2017- Nigeria, re-emergent outbreak in Nigeria with >100 suspected cases with epidemiological features that diverged from prior outbreaks.
- 2022 rapid pandemic spread 93,497 global cases

Natural/Competent Hosts of MPOX virus

Host (species)	Location or Country	Host (species)	Location or Country
Gambian-pouched rat	Africa	Woodchucks	USA
Rhesus macaques	Copenhagen	Short-tailed opossum	USA
Cynomolgus Macaque	Singapore/Copenhagen	Porcupines	Zaire
Asian Monkeys	Copenhagen	Giant anteaters	Rotterdam
Southern opossum	South America	Prairie dogs	USA
Sun squirrel	Zaire	Elephant shrew	DR Congo
African hedgehogs	Africa	Domestic pig	DR Congo
Jerboas	Illinois, USA	Rope squirrel	Zaire
Sooty mangabey	Côte d'Ivoire	African dormice	USA

Viruses 2020, 12(11), 1257; https://doi.org/10.3390/v12111257

Exportation of MPOX from Nigeria 2018

Case	Age	Nationality	Sex	Reported Exposure & Risks	Other
UK1	32y	Nigerian	М	None	Lesions first appeared in groin
UK2	36y	Nigerian	Μ	Consumption of bushmeat and sick contact	Lesions first appeared in groin
UK3	40y	British	F	HCW who had contact with UK2	Sequencing confirmed same virus
ISR	38y	Israeli	Μ	Disposed of 2 rodent carcasses while traveling in Nigeria	Lesions first appear on penis
SING	38y	Nigerian	Μ	Reported potentially eating BBQ bushmeat at a wedding	Lesions on penis
BAY	30y	Nigerian	Μ	Occupational (HCW) from Bayelsa state	Bayelsa is adjacent to states (visited by export cases)

 JID 2022, https://doi.org/10.1093/infdis/jiaa559
 EID 2020 10.3201/eid2608.191387

 Eurosur 2018 https://doi.org/10.3201/eid2505.190076

Human MPOX Infection: Israel 2018



EID 2019 https://doi.org/10.3201/eid2505.190076

Human MPOX: Just Before 2022

Key epidemiological points

- Animal contact diminished over time
- Intra-household spread occurs
- Contact with an active case became more relevant over time.
- Data from 2017-2019 suggest new transmission networks – potentially via sexual spread – occurs in non-endemic counties
- Genetic relatedness among cases



PLOS NTD 2019, <u>https://doi.org/10.1371/journal.pntd.0007791</u> PNAS 2010 https://doi.org/10.1073/pnas.1005769107

JID 2022, https://doi.org/10.1093/infdis/jiaa559

Human MPOX Infection 2022: The "Hockeystick"

- 7 May: UK reported 1 case in a traveler from Nigeria
- •13–16 May: London 6 cases reported in gay/ bisexual men who have sex with men (MSM)
- 17 May: Madrid 7 suspected cases at a STD clinic
- **18 May**: Portugal- 14 cases of MPOX in men
- •23 July: WHO declared Public Health Emergency of International Concern
- 5 August: HHS (USA) declares Public Health Emergency



Eurosurveillance 2022 https://doi.org/10.2807/1560-7917.ES.2022.27.27.2200471

Human MPOX Infection: Confirmed Cases Jan 1, 2022 – Jan 31, 2024



https://worldhealthorg.shinyapps.io/mpx_global/

Human MPOX Infection: Confirmed Cases Jan 1, 2022 – Jan 31, 2024



https://worldhealthorg.shinyapps.io/mpx_global/

Human MPOX Infection 2022: Clinical Features

Skin lesions

- Progress more or less uniformly from papules \rightarrow vesicles \rightarrow pustules \rightarrow scabs \rightarrow scars
- Lesions are infectious!!!!!
- 85% of individuals had \leq 20 skin lesions
- Well-controlled HIV infection does not change presentation/course

•4-13% of individuals admitted to hospital

- Pain control (anorectal)
- Super-infection of skin lesions
- Severe pharyngitis
- Corneal lesions
- Acute kidney injury
- Myocarditis
- •12 deaths out of 39,110 cases reported to WHO

Eurosurveillance 2022 https://doi.org/10.2807/1560-7917.ES.2022.27.27.2200471 NEJM 2022 DOI: 10.1056/NEJMoa2207323

Human MPOX Infection 2022: Clinical Timeline



Siegrist and Sassine, CID 2022 <u>https://doi.org/10.1093/cid/ciac622</u> https://www.cdc.gov/poxvirus/monkeypox/clinicians/technical-report.html#epi-parameters

Human MPOX Infection Treatment and Prevention

Treatment typically reserved for:

- Adults with severe disease or at risk of severe disease
- Active exfoliate skin disease
- Children (<8) and pregnant/breastfeeding women
- Tecovirimat FDA approved for treatment of smallpox in adults and children
 - Available through strategic national stockpile, https://www.cdc.gov/poxvirus/monkeypo

x/clinicians/obtaining-tecovirimat.html

- Treatment duration shorted than 14 days can lead to rebound infection
- May need to be longer in immune suppressed individuals

https://www.cdc.gov/poxvirus/mpox/clinicians/ treatment.html#anchor_1655488284069

Adjusted vaccine effectiveness (VE) of JYNNEOS vaccine against mpox by study and number of doses



https://www.cdc.gov/poxvirus/mpox/cases-data/JYNNEOSvaccine-effectiveness.html

Heartland Virus



Heartland Virus Infection First 2 Cases in the US

- 2 adult males from NW Missouri
- Sustained tick bites then illness within 1-7 days
- Fever, severe fatigue, headache, anorexia, nausea, non-bloody diarrhea, myalgia, dry cough.
- Leukopenia, thrombocytopenia
- AST/ALT elevation
- Discharged after 10-12 days



Identification of a Transmissible Virus in Patient Leukocytes

- EM revealed enveloped particles averaging 86 nm in diameter
- •Full-length genome sequences were similar to phleboviruses in the Bunyaviridae family.
- Phlebovirus A genus of RNA viruses, transmitted to people by the bite of infected insects.
 - Phleboviruses can cause hemorrhagic fevers, meningitis, and meningoencephalitis, among other illnesses
 - Genus includes Rift Valley fever virus and Toscana virus.
- Found in Lone Star tick nymphs at & around patient farms



Scale bar 500 nm

Farlex Partner Medical Dictionary. (2012).

Fatal Heartland Virus Infection in Oklahoma May 27, 2014

Health officials say the Oklahoma case was the tenth known of the tick-borne virus and the second that proved to be fatal.

- An Oklahoma man has died after contracting the Heartland virus, marking the 10th known case and second known death from the tick-borne illness.
- The OSDH confirmed the death of a Delaware County resident aged 65, due to complications from the virus.



Heartland Virus: Widespread Presence in Animals



Emerg Infect Dis. 2015 Oct . <u>http://dx.doi.org/10.3201/eid2110.150380</u>

https://doi.org/10.3389/fmicb.2023.1185829

Heartland Virus: Case counts and case definition

- 60 cases (as of Jan, 2023), 3 deaths
- ■Fever (≥100.4°F [≥38.0°C]),
- Leukopenia (white blood cell count <4,500 cells/mm³),
- Thrombocytopenia (platelet count <150,000/mm³)
- No better /more likely clinical explanation.
- Diagnosis by
 - Positive PCR of blood or tissue
 - A ≥4-fold rise in virus-specific plaque reduction neutralization antibody titers between acute and convalescent serum specimens.

Heartland Virus & <u>Severe Fever with</u> <u>Thrombocytopenia Syndrome</u> (SFTS)

- An emerging hemorrhagic fever identified in China in 2007, now also reported in Japan and Korea.
- Caused by a **phlebovirus** in the **Bunyaviridae** family, now known as STFS virus.
- ~2500 reported cases
- Average case-fatality rate of 7.3%.
- Found in a variety of ticks and mites.
- Sero-prevalance in domestic animals
 - goats (57-95%), cattle (32-80%), dogs (6-55%), chickens (1-36%)
- Found in wild animals
 - deer, weasels, hedgehogs, etc.

Dengue: A Global Disease

- Before 1970, only 9 countries had experienced severe dengue epidemics, now endemic in more than 100 countries.
- Cases reported to WHO increased from 505 430 cases in 2000 to 5.2 million in 2019
- In 2013, 2.35 million cases of dengue were reported in the Americas
- The largest number of dengue cases ever reported globally was in 2019. The American Region reported 3.1 million cases, with more than 25 000 classified as severe.
- It also spawned a pop/rock band

https://www.who.int/news-room/factsheets/detail/dengue-and-severe-dengue



Dengue Infection Change Over Time



https://ntdhq.shinyapps.io/dengue5/

Ades Mosquitos in the United States



Est. Potential Range of Ades aegypti, 2017 Est. Potential Range of Ades albopictus, 2017

https://www.cdc.gov/mosquitoes/mosquito-control/professionals/range.html

Dengue in the United States



https://www.cdc.gov/dengue/statistics-maps/historic-data.html

Locally Acquired Dengue in the United States



https://www.cdc.gov/dengue/statistics-maps/historic-data.html

Dengue: Clinical Features

- Dengue can be asymptomatic, mild, severe, or fatal
- Symptoms appear between 4 and 7 days after the patient has been bitten by the infected mosquito.
- Symptoms last 3-10 days
- Can develop hemorrhagic features
- Immunity to Dengue is serogroup specific and can worsen disease if infected by a different Dengue serogroup.

Dengue Symptoms

Fever with any of the following



An FDA-Approved Vaccine for to Prevent Dengue Virus Infection and Disease

- Tetravalent, live-attenuated vaccine that replaces several genetic sequences in a yellow fever vaccine virus genome with the homologous sequences from the four dengue virus serotypes
- Approved for children and adolescents 9–16 years old with laboratory confirmed previous dengue virus infection and living in dengue-endemic areas.

Dengvaxia efficacy among children 9–16 yo with previous dengue virus infection		
Outcome	Vaccine Efficacy (95% CI)	
Virologically confirmed disease	82% (67%–90%)	
Hospitalization	79% (69%–86%)	
Severe disease	84% (63%–93%)	

NOT INDICATED for children <9, adults, travelers

https://www.cdc.gov/dengue/vaccine/hcp/safety-efficacy.html

Lesson 1: The wide world is all about you: you can fence yourselves in, but you cannot for ever fence it out — J.R.R. Tolkien, *The Fellowship of the Ring*

Photo D. Drevets Along the Camino de Santiago near Estella, Spain

Critical Areas For The Next Emerging Infectious Disease That Goes Pandemic

Science & technology

- Resource allocation & support for low margin products, e.g. antimicrobials and vaccines
- Rapid development of diagnostics/FDA

Health care

Rapid trials network & stockpiles of PPE

Healthcare delivery

- Redundancy & reserve versus efficiency and margins
- Public health infrastructure
- State health depts. versus others, e.g. AMCs



Lesson 2: Countermeasures, e.g. Vaccines, Also Emerge, But At A Slower Rate Than Infectious Diseases



Nature 600, 580-583 (2021) doi: https://doi.org/10.1038/d41586-021-03686-x

Lesson 3: Public Acceptance of Countermeasures is a Wild Card and Not 100%

Responses to the question: "Have you gotten the vaccine, or not?"



Lesson 4: Protect Yourself



