

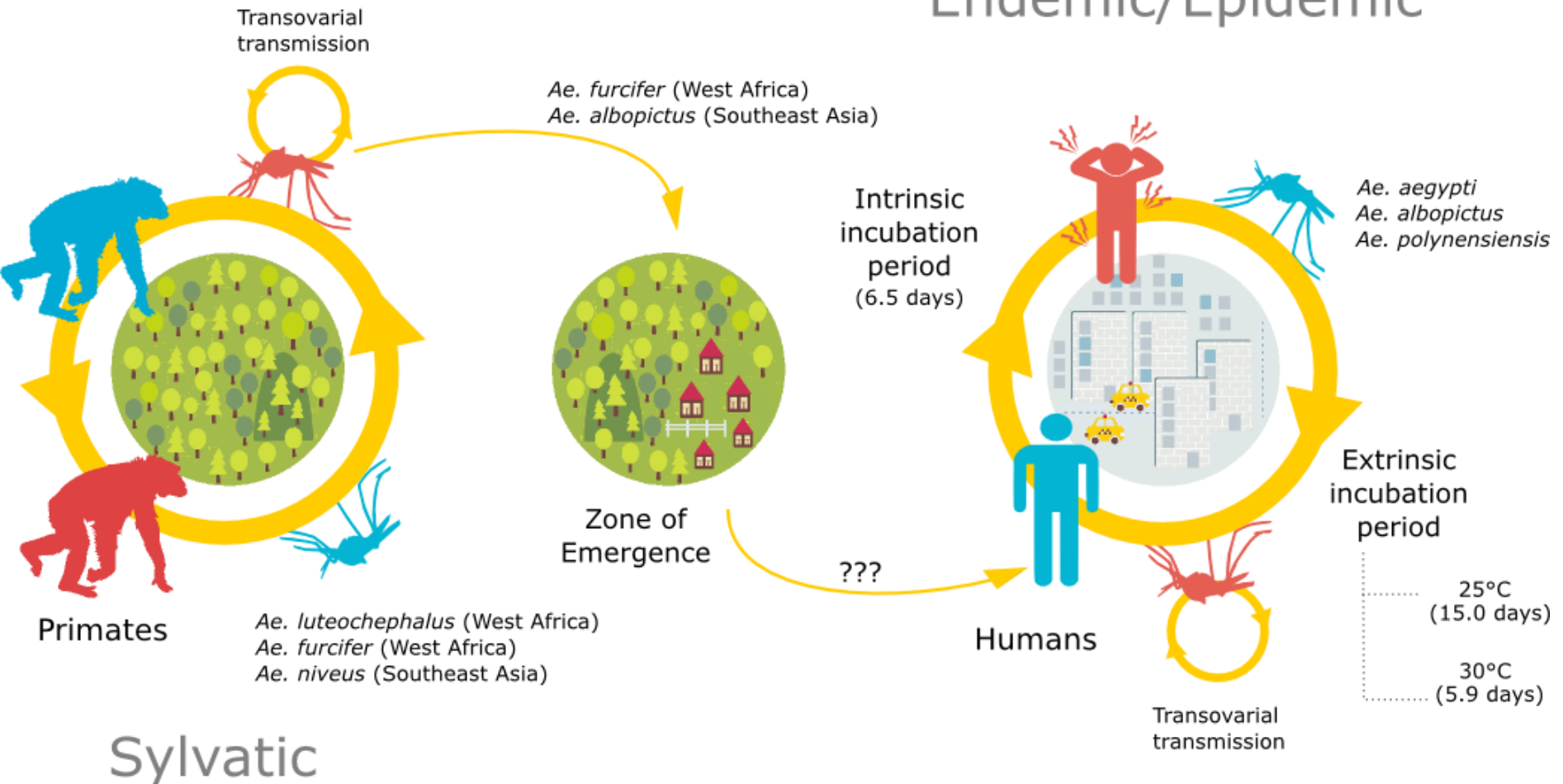
The 2013 outbreak of DENV in Guarujá



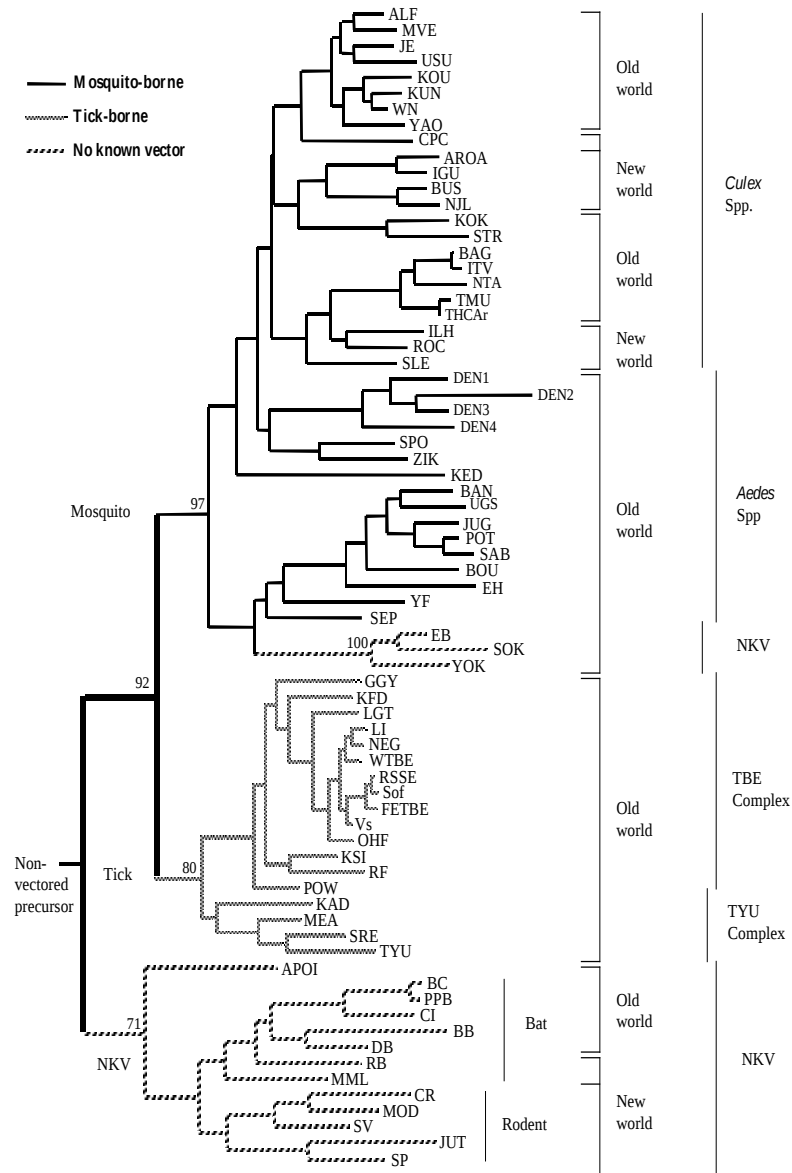


Life Cycle of DENV

Endemic/Epidemic



Flavivirus vector associations



Commentary

Evolving virus plagues

John J. Holland

Department of Biology, University of California, San Diego, 9500 Gilman Drive, La Jolla, CA 92093-0116

Recently, the AIDS pandemic and other new or emerging viruses have focused attention on emerging infectious diseases (1, 2). The factors involved in emergence are diverse and include global transportation, urban crowding and poverty, changing behavioral patterns, rapid virus evolution, human population growth, etc. Until now, no studies have clearly linked human population expansion with in-

crease of Europe and Asia are mainly zoonoses. Tick-borne encephalitis (TBE) viruses exist almost exclusively in "forest cycles" involving ticks and various vertebrate hosts. Humans play little if any role in these cycles, and human disease is accidental and dead-end (albeit sometimes severe). In work described in this issue of the *Proceedings* (pages 548–553), Zanolto *et al.* (6) have compared the molecular

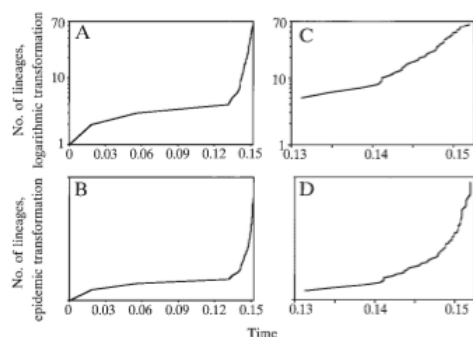


FIG. 2. (A) Lineages through time of 66 dengue viruses. The time at which each lineage division occurs on a constant-rate (KITTSCH) phylogenetic tree is plotted with the time axis scaled as the number of nucleotide substitutions from the root of the tree to the tips. (B) Epidemic transformation of the same data. This transformation of the y axis determines whether the rate of population growth has been constant through time (straight line), increasing (upward curvature, as here), or decreasing (downward curvature). (C) Lineages through time of the most recent 62 nodes of dengue viruses. (D) Epidemic transformation of the same data.

Proc. Natl. Acad. Sci. USA
Vol. 93, pp. 548–553, January 1996
Evolution

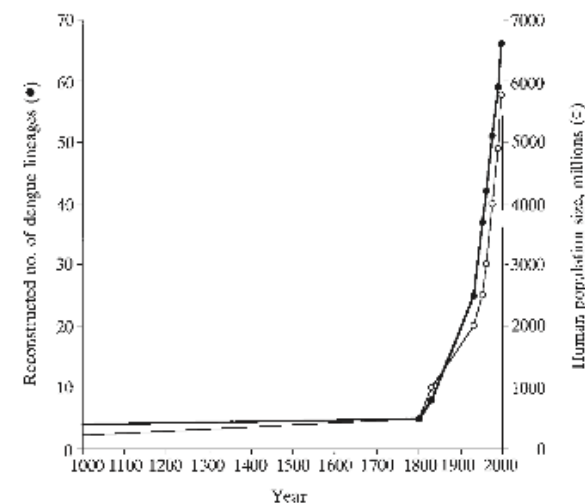
Population dynamics of flaviviruses revealed by molecular phylogenies

PAOLO M. DE A. ZANOTTO*, ERNEST A. GOULD*, GEORGE F. GAO*, PAUL H. HARVEY†, AND EDWARD C. HOLMES†‡

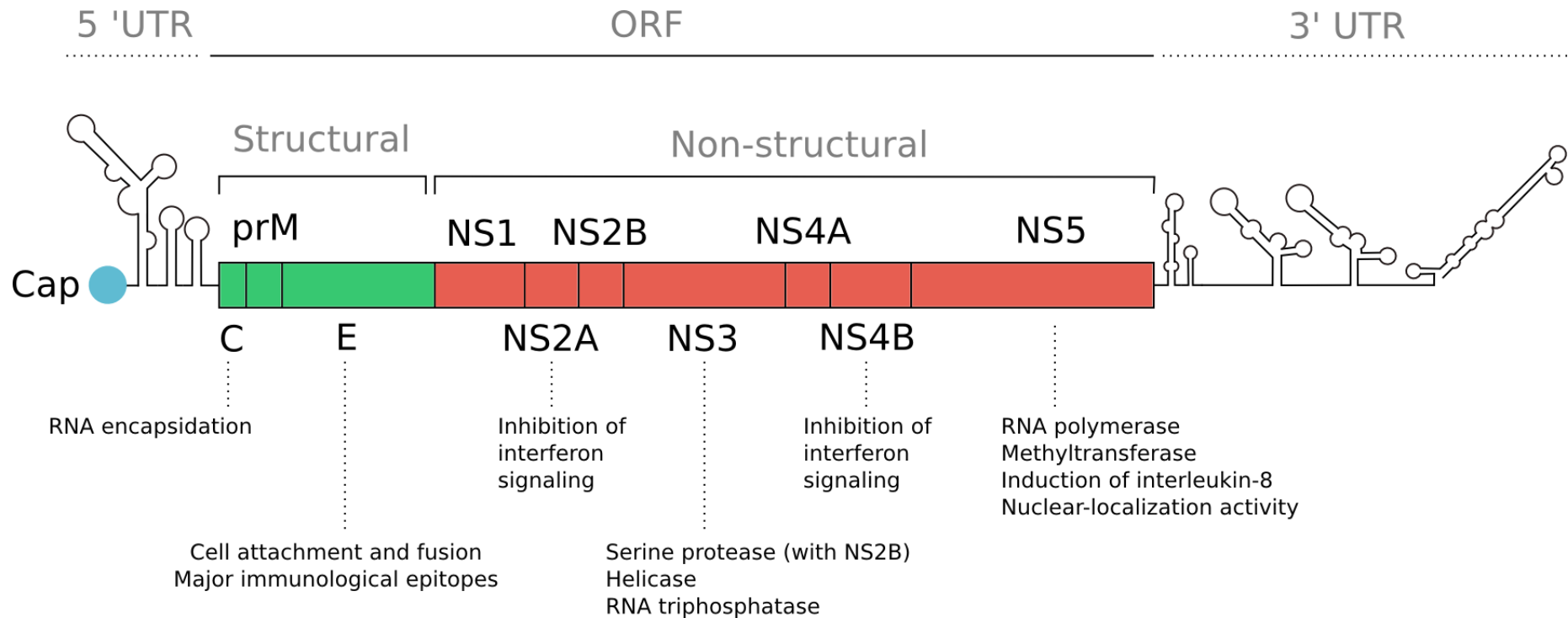
*National Environment Research Council Institute of Virology and Environmental Microbiology, Mansfield Road, Oxford, OX1 3SR, United Kingdom; and †Wellcome Centre for the Epidemiology of Infectious Disease, Department of Zoology, University of Oxford, South Parks Road, Oxford, OX1 3PS, United Kingdom

Communicated by Robert M. May, University of Oxford, Oxford, United Kingdom, October 20, 1995 (received for review August 1, 1995)

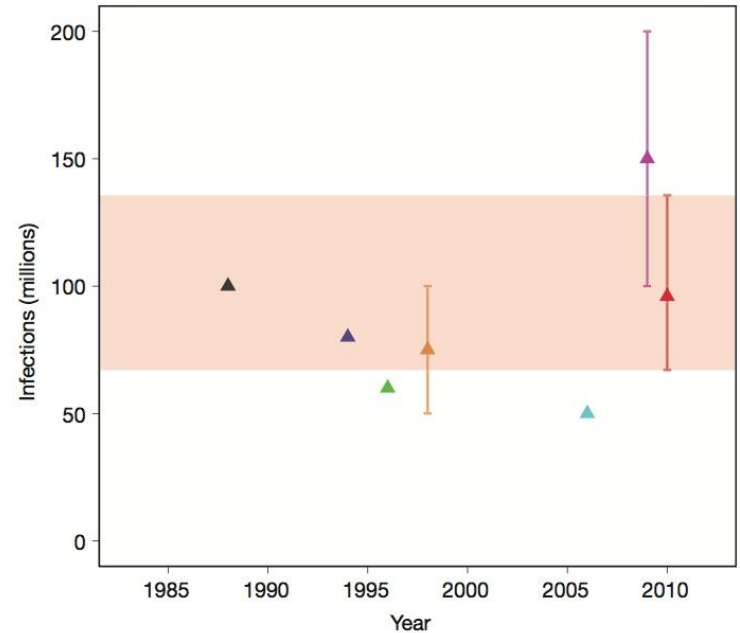
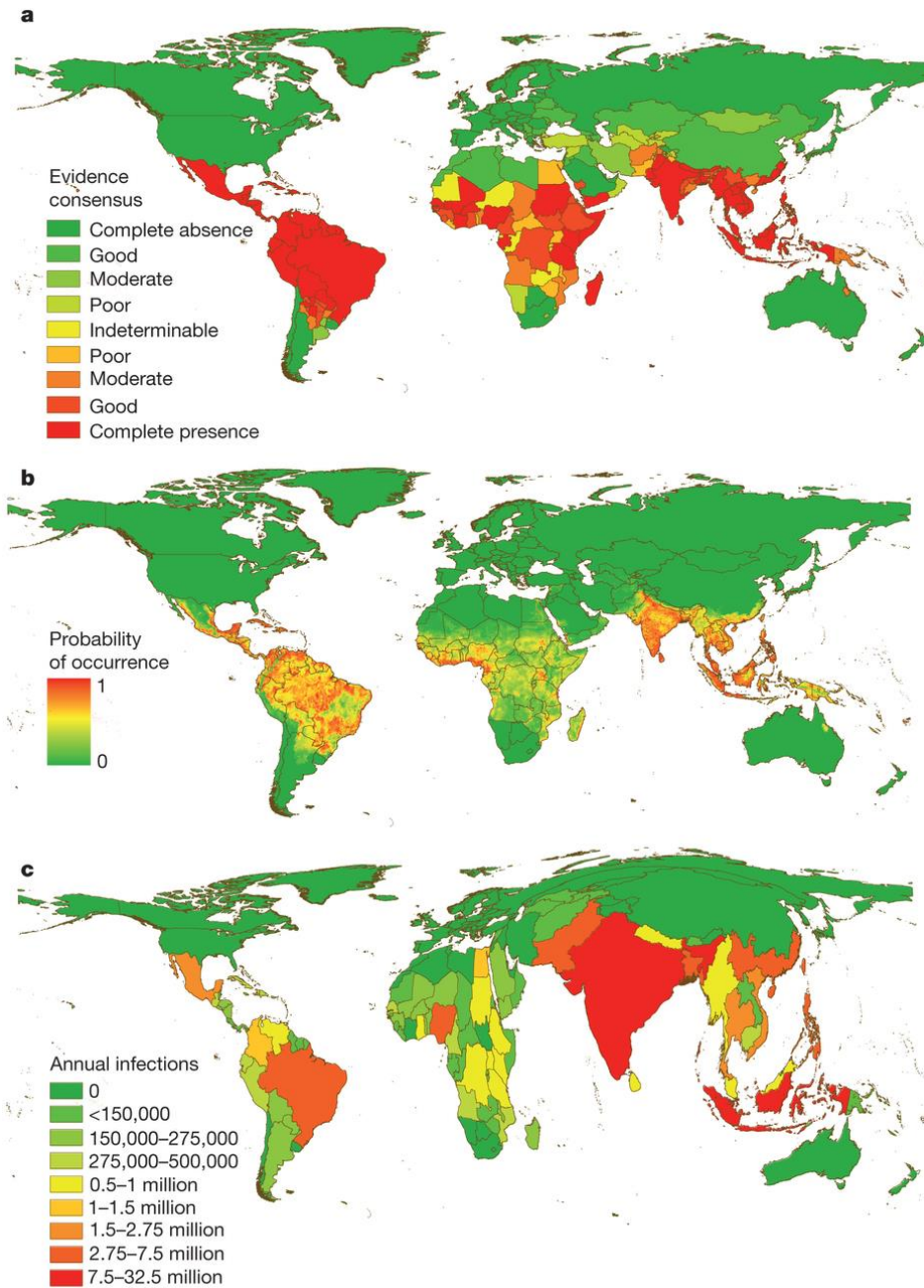
Sean Nee & Phylodynamics



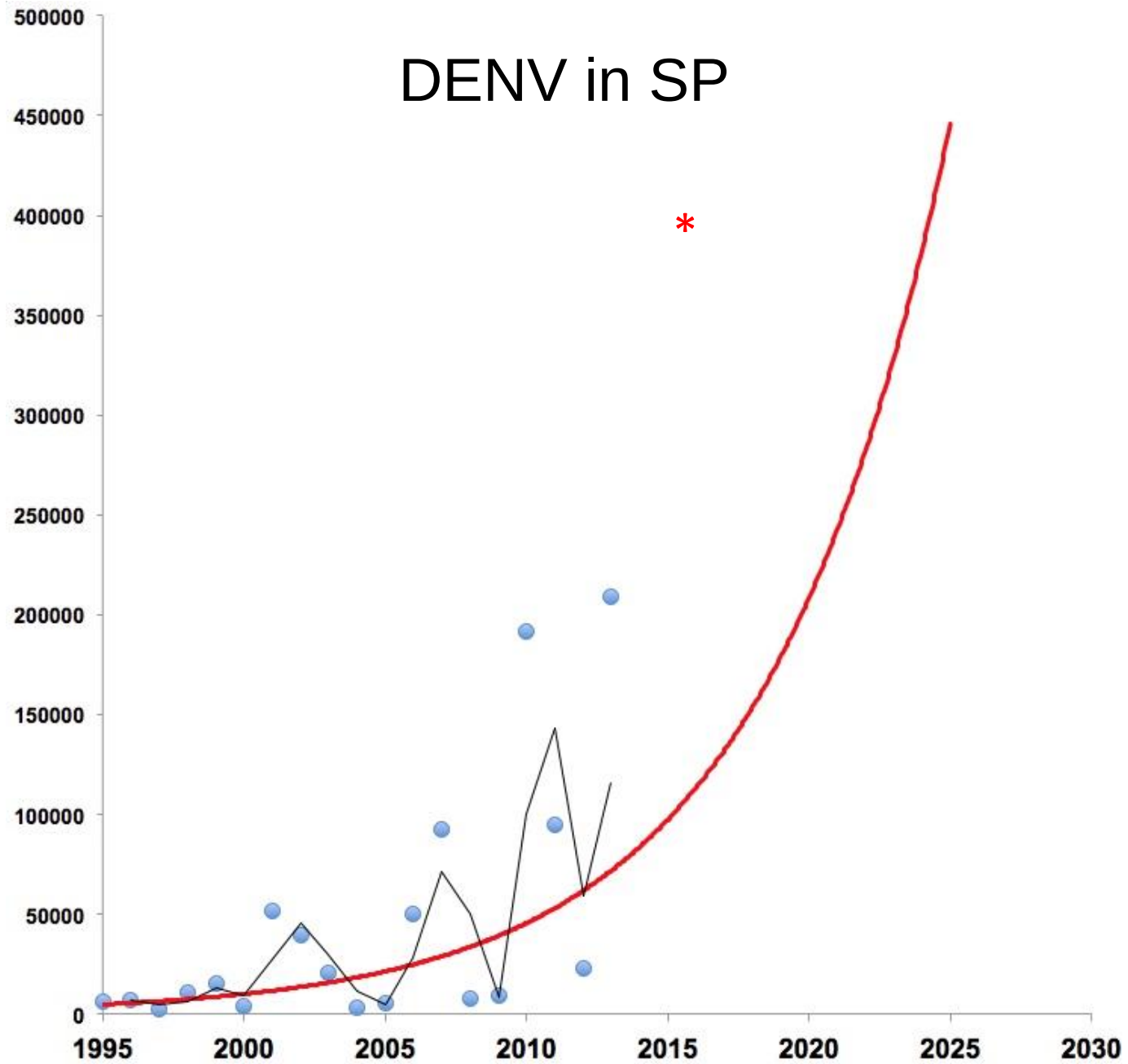
DENV Genome



DENV Burden

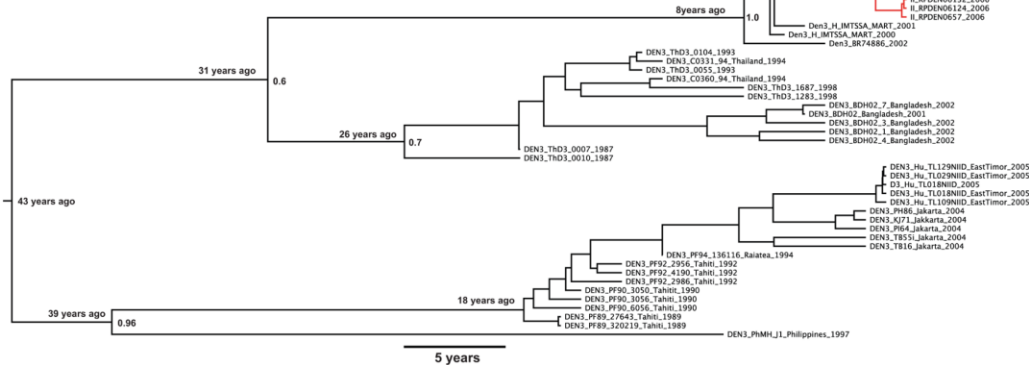
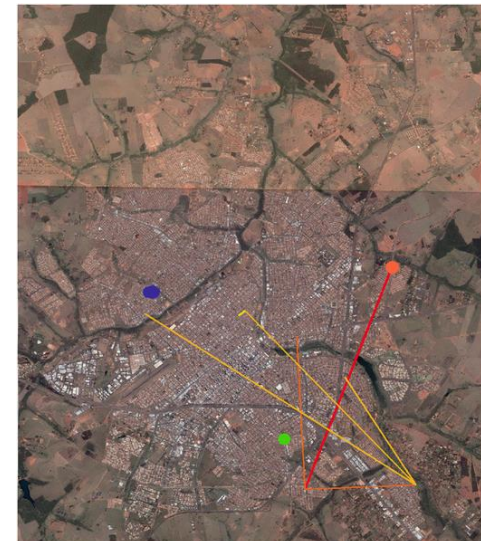
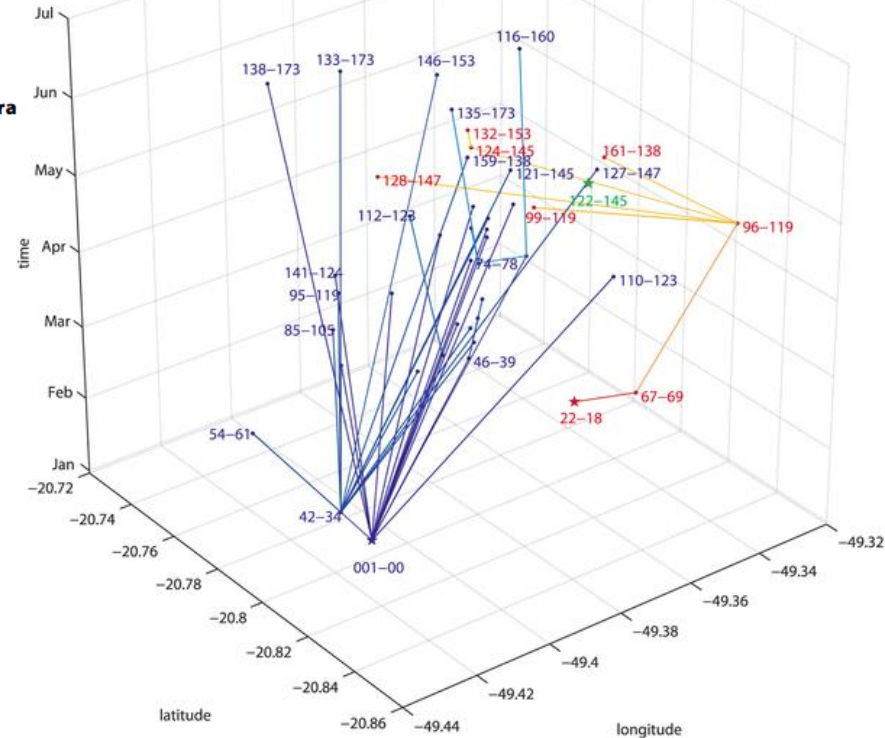
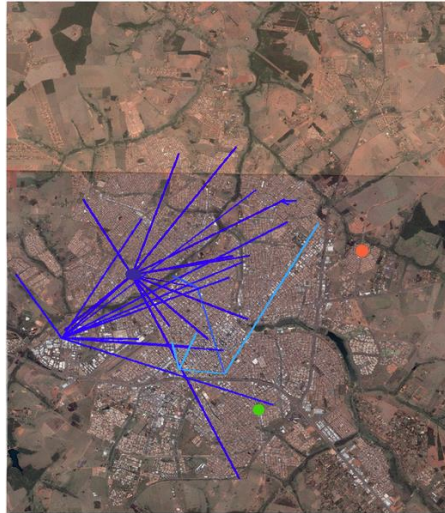


DENV in SP



Spatio-Temporal Tracking and Phylodynamics of an Urban Dengue 3 Outbreak in São Paulo, Brazil

Adriano Mondini¹, Roberta Vieira de Moraes Bronzoni¹, Silvia Helena Pereira Nunes¹, Francisco Chiaravalloti Neto^{1,2}, Eduardo Massad³, Wladimir J. Alonso⁴, Eduardo S. M. Lázaro⁵, Amena Alcântara Ferraz⁵, Paolo Marinho de Andrade Zanotto⁶, Maurício Lacerda Nogueira^{1*}



Viewpoints

Detection of Four Dengue Serotypes Suggests Rise in Hyperendemicity in Urban Centers of Brazil

Christian Julián Villabona-Arenas¹, Jessica Luana de Oliveira¹, Carla de Sousa Capra², Karime Balarini³, Mauricio Loureiro⁴, Celso Ricardo Theoto P. Fonseca³, Saulo Duarte Passos⁴, Paolo Marinho de Andrade Zanotto^{1*}

1 Laboratório de Evolução Molecular e Bioinformática, Departamento de Microbiologia, Instituto de Ciências Biomédicas, Universidade de São Paulo, São Paulo, São Paulo, Brazil, **2** Laboratório de Saúde Pública, Secretaria da Saúde, Prefeitura Municipal de Guarujá, Guarujá, São Paulo, Brazil, **3** Itapema Laboratório de Análises Clínicas, Guarujá, São Paulo, Brazil, **4** Laboratório de Infectologia Pediátrica, Faculdade de Medicina de Jundiaí, Jundiaí, São Paulo, Brazil

DENV-3 samples were from genotype V

- Genotype III has been the most prevalent in Brazil. However, genotypes I and V were associated with dengue outbreaks in Brazil.
- Cryptic circulation of DENV-3 in the region?
- A new introduction from Asia?
- Q: "What is the *A. aegypti* lineage in Santos?"
R: "Singapore!"

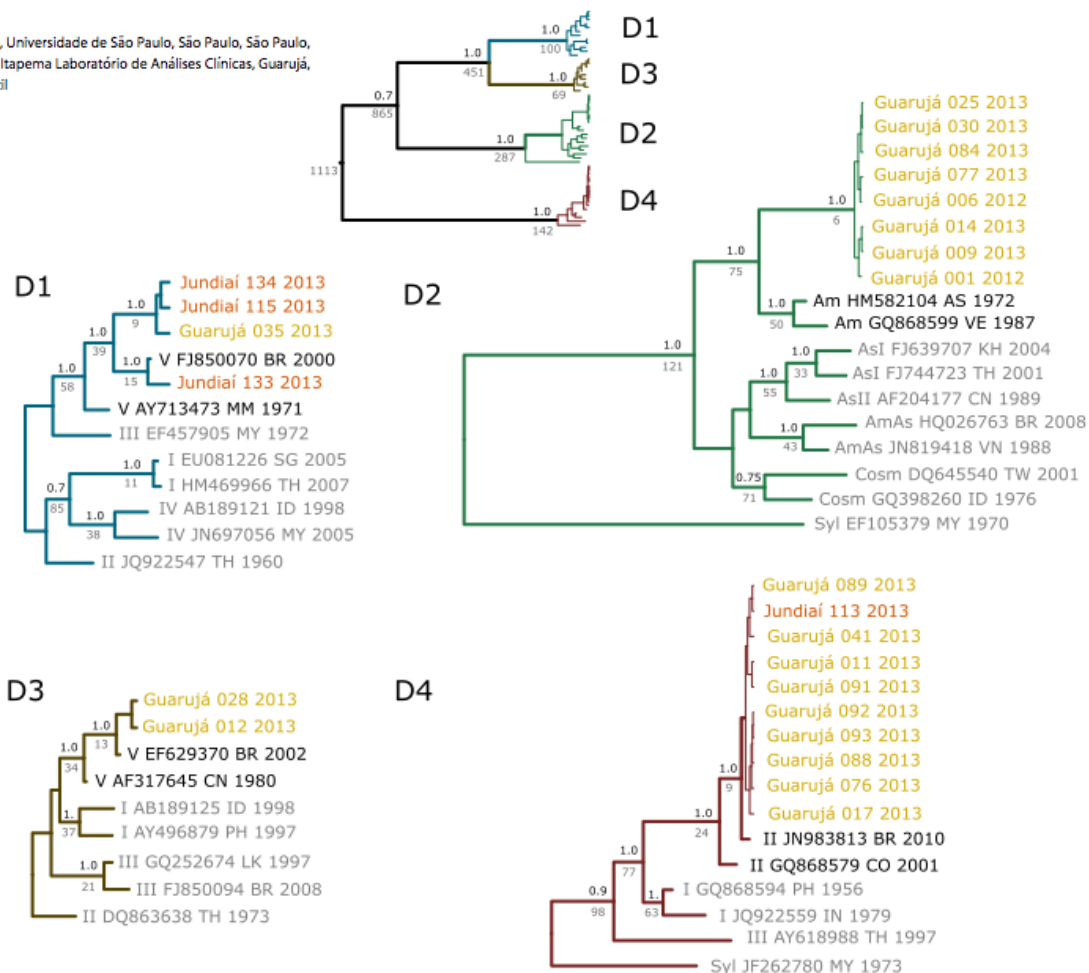


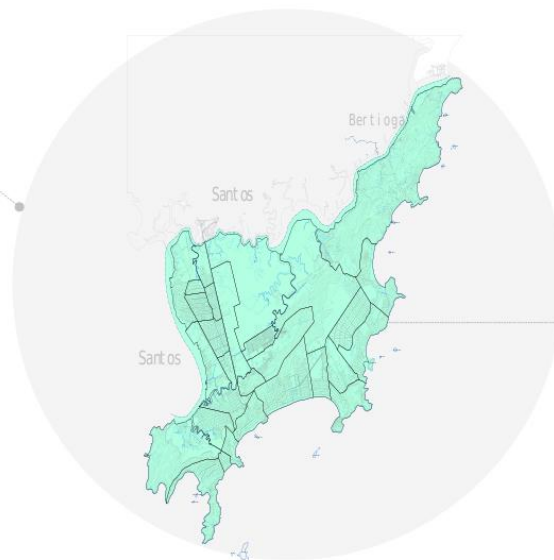
Figure 1. Maximum credibility tree (and its four serotype subtrees) showing the evolutionary relationships among the capsid/premembrane junction sequences of 55 strains. Posterior probability support values are shown over the nodes and TMRCAs values below the nodes. Reference sequences abbreviated by serotype (D1–4), genotype (Am: American, AmAs: American/Asian, As: Asian, Cosm: Cosmopolitan, Syl: Sylvatic, I, II, III, IV, or V), GenBank accession, ISO code for country, and isolation year.
doi:10.1371/journal.pntd.0002620.g001

DENV-4 Outbreak in Guarujá

- 1216 serum samples from January to June 2013.
- 879 samples were tested in our laboratory for dengue: 525 (60% of processed samples) were positive for dengue.
- 505 (96% of positive samples) were positive for DENV-4 and 20 belong to any of the other three serotypes (10 DENV-1, 8 DENV-2 and 2 DENV-3).
- 354 DENV-4 (70% of positive) were sequenced 1485 bp-long envelope gene from viral genomic RNA amplified directly.
- 285 patients (81%) geo-locate based on the addresses provided, from the cohort of 354 patients.

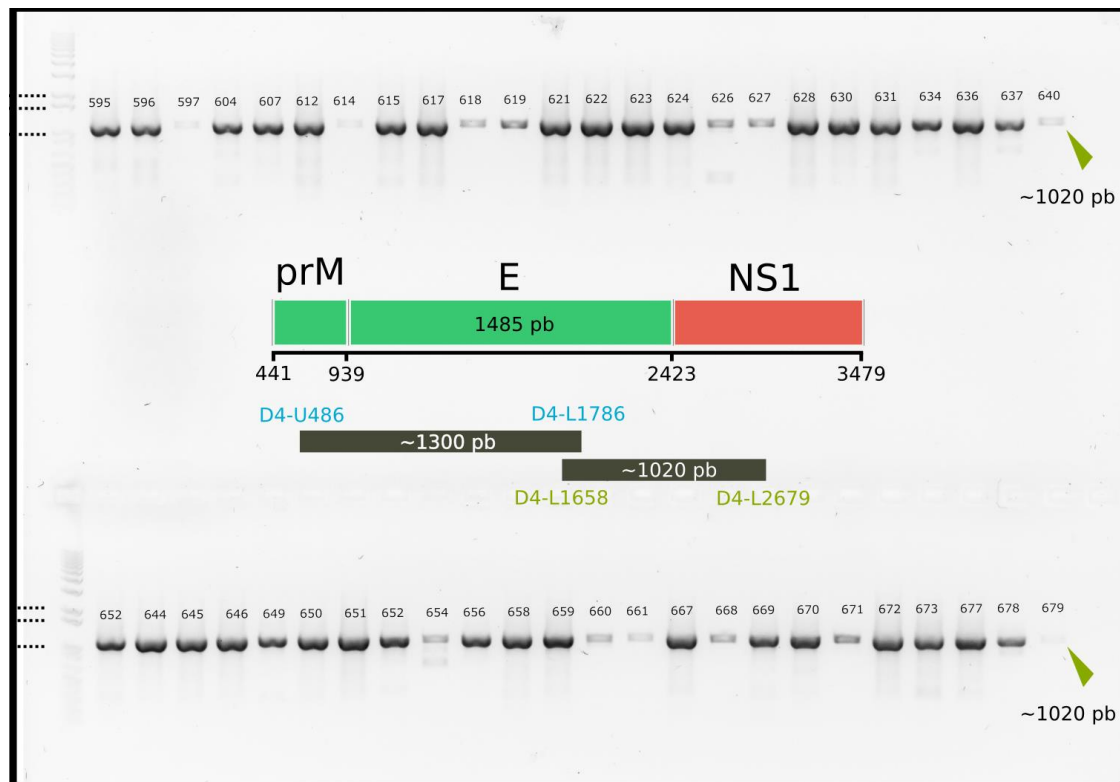
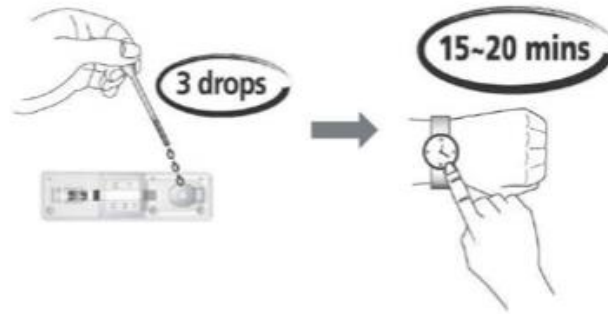


São Paulo state



Guarujá

Immunochromatography for IgM, IgG & NS1



Weekly

Month	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11	Week 12	Week 13	Week 14	Week 15	Week 16	Week 17	Week 18	Week 19	Week 20	Week 21	Week 22	Week 23	Week 24	Week 25	Week 26	Week 27	Week 28	Week 29	Week 30	Week 31
January	10	5	15	25	10	20	30	40	50	60	70	80	90	100	110	120	130	140	150	160	170	180	190	200	210	220	230	240	250	260	270
February	280	290	280	270	260	250	240	230	220	210	200	190	180	170	160	150	140	130	120	110	100	90	80	70	60	50	40	30	20	10	5
March	5	10	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90	95	100	105	110	115	120	125	130	135	140	145	150	155
April	160	170	180	190	200	210	220	230	240	250	260	270	280	290	300	310	320	330	340	350	360	370	380	390	400	410	420	430	440	450	460
May	470	480	490	500	510	520	530	540	550	560	570	580	590	600	610	620	630	640	650	660	670	680	690	700	710	720	730	740	750	760	770
June	780	790	800	810	820	830	840	850	860	870	880	890	900	910	920	930	940	950	960	970	980	990	1000	1010	1020	1030	1040	1050	1060	1070	1080

[illegible]

Daily

15

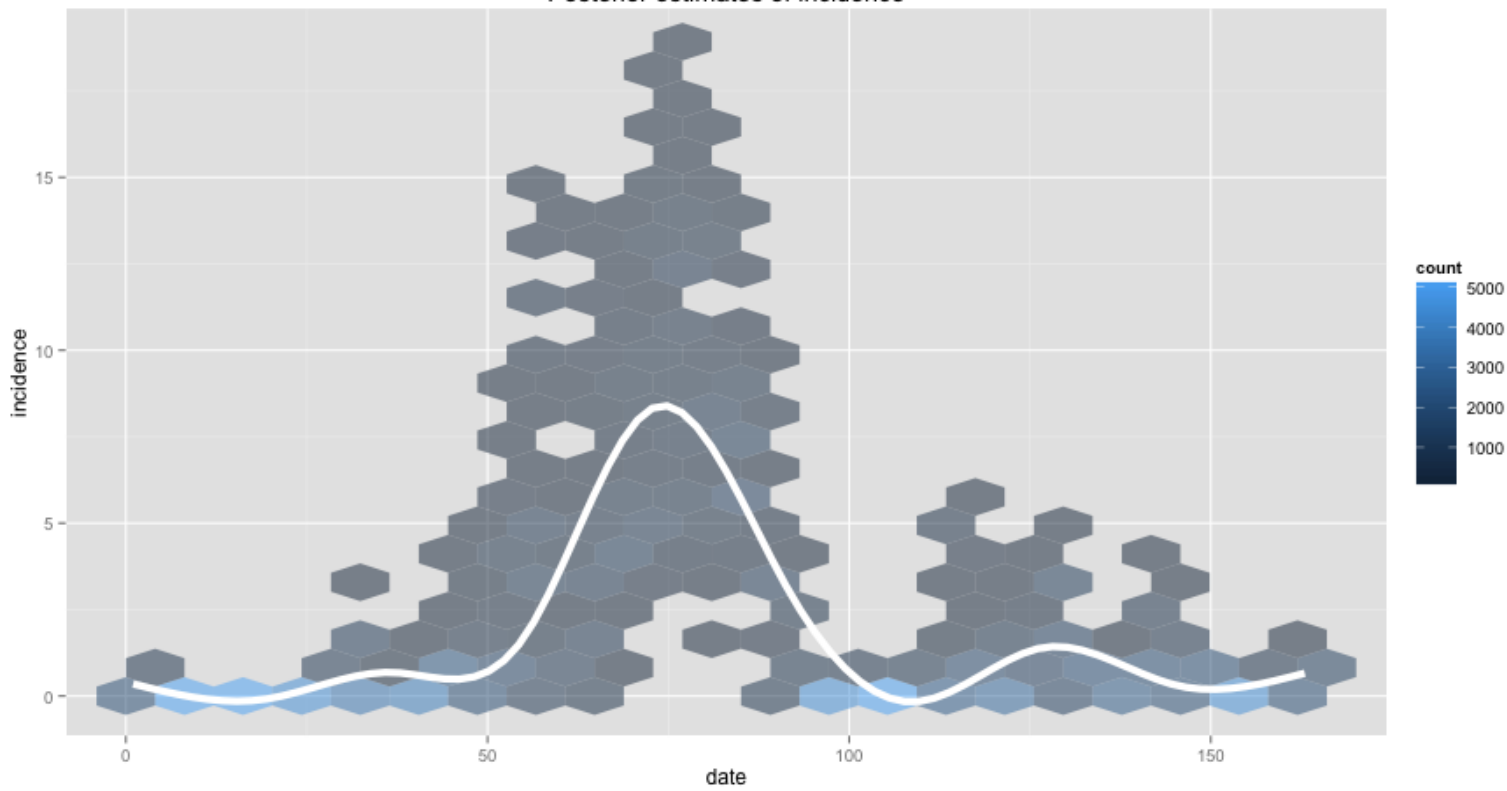
10

5

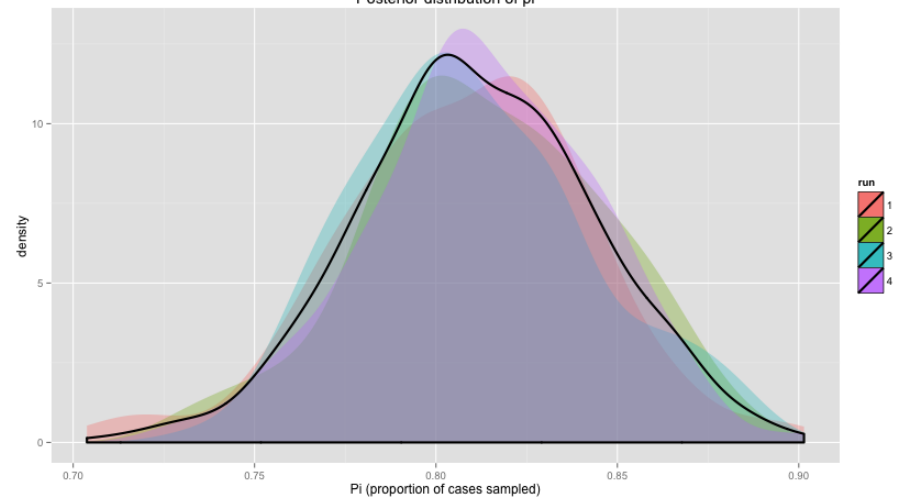
0

January February March April May June

Posterior estimates of incidence



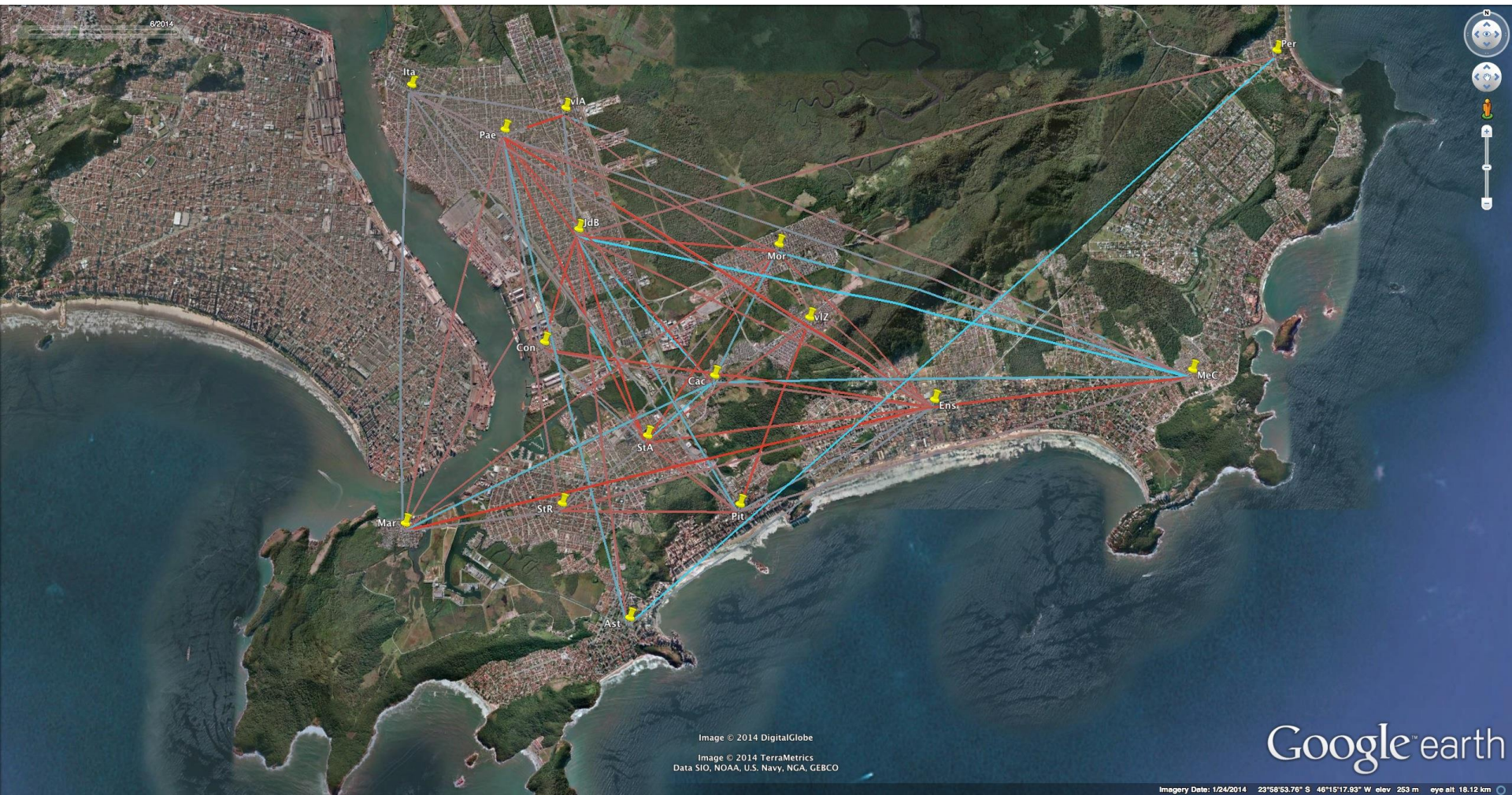
Posterior distribution of pi

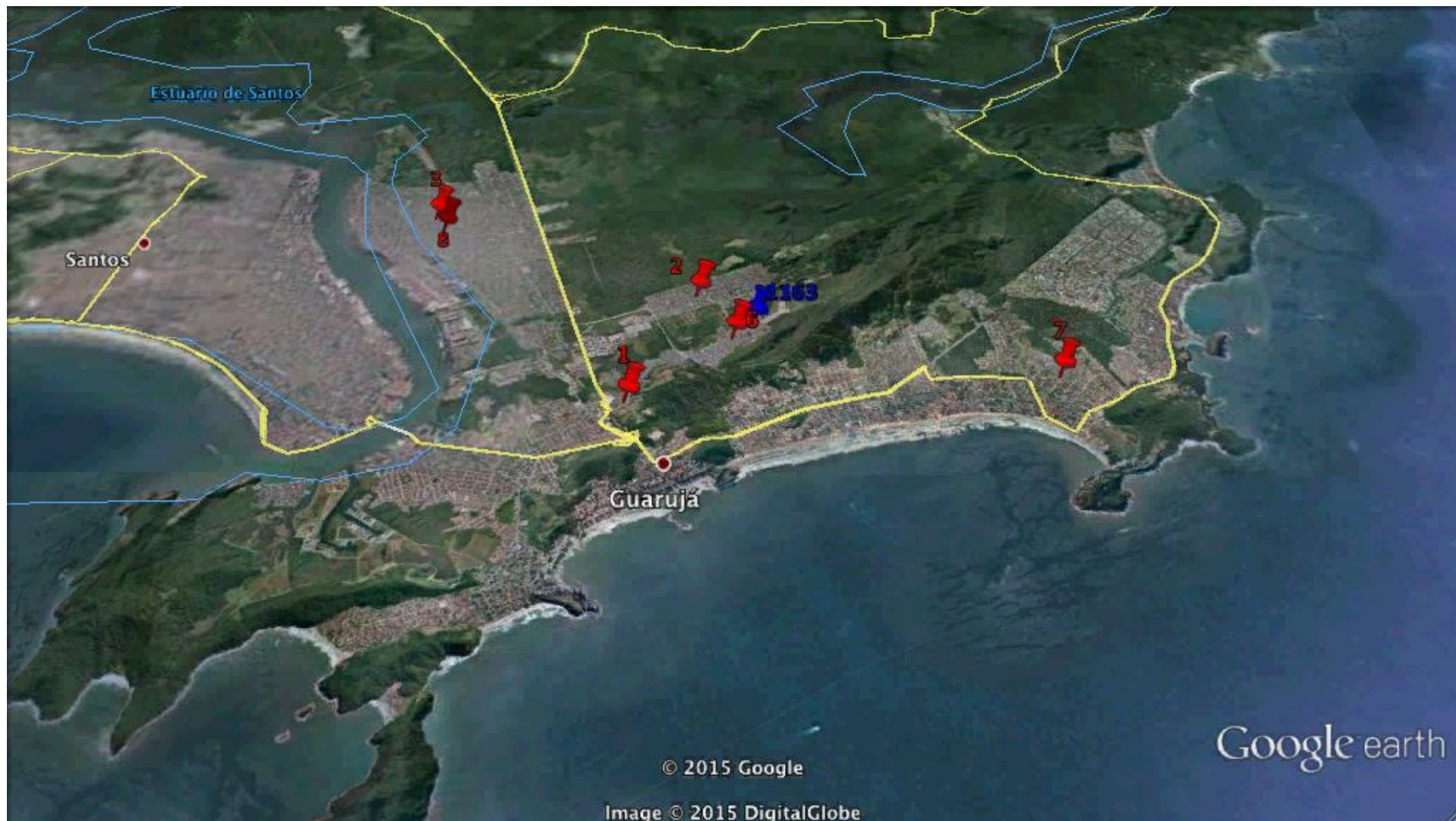


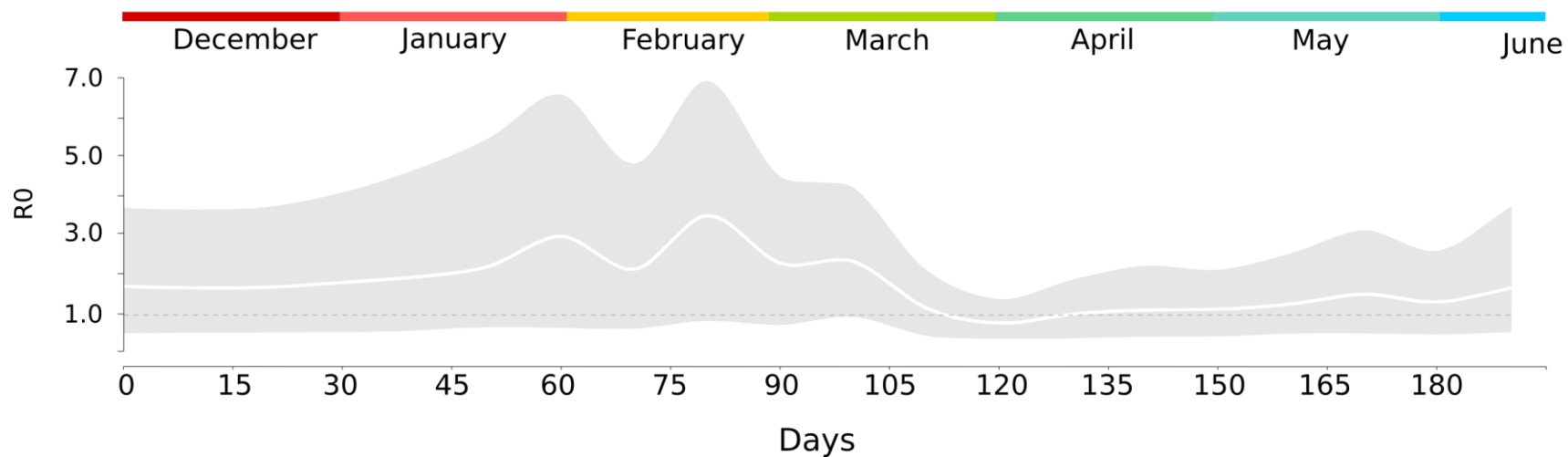
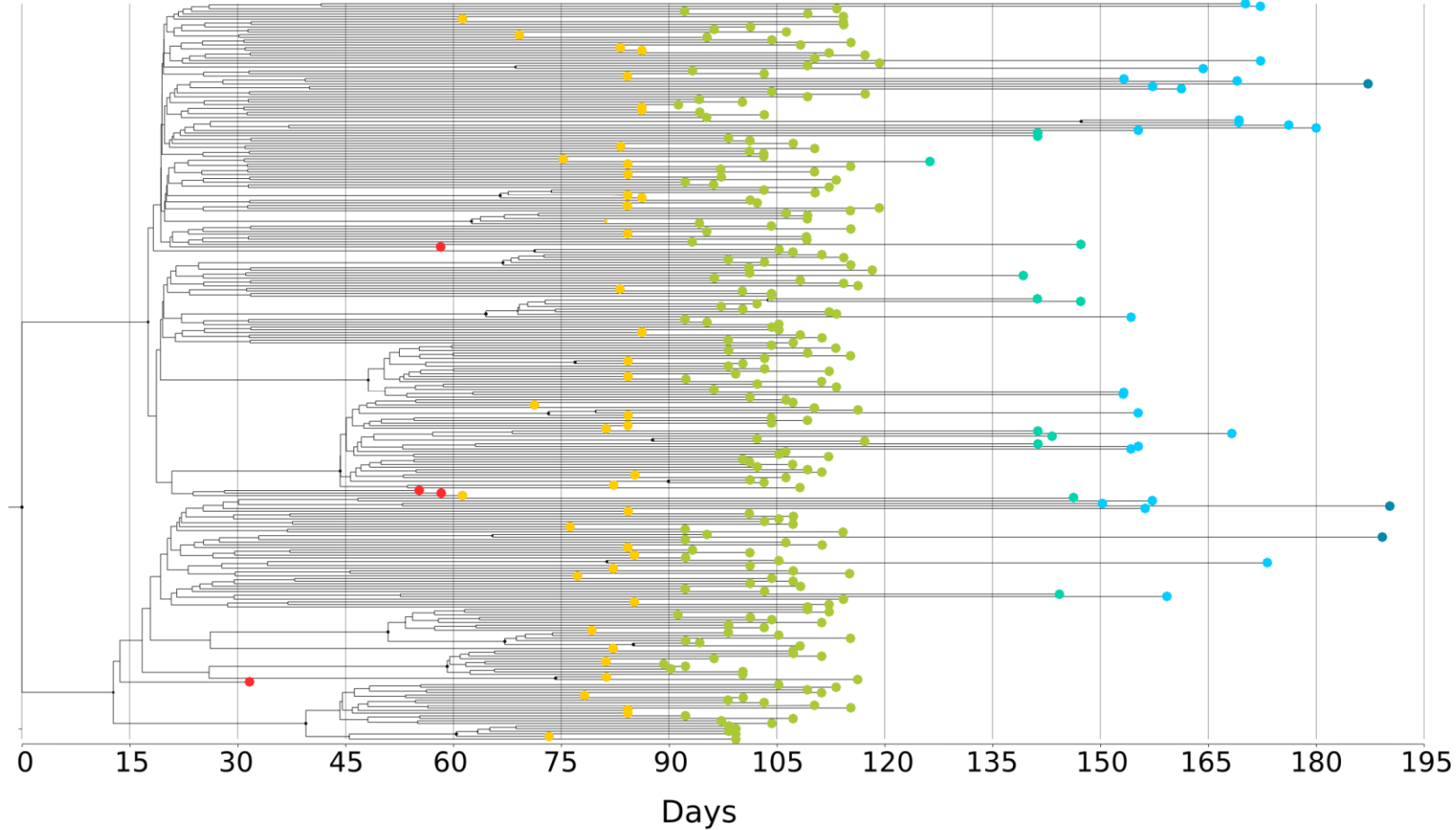
Widely dispersed “outset” of the DENV 4 Outbreak



Widely-dispersed “end” of the DENV 4 outbreak

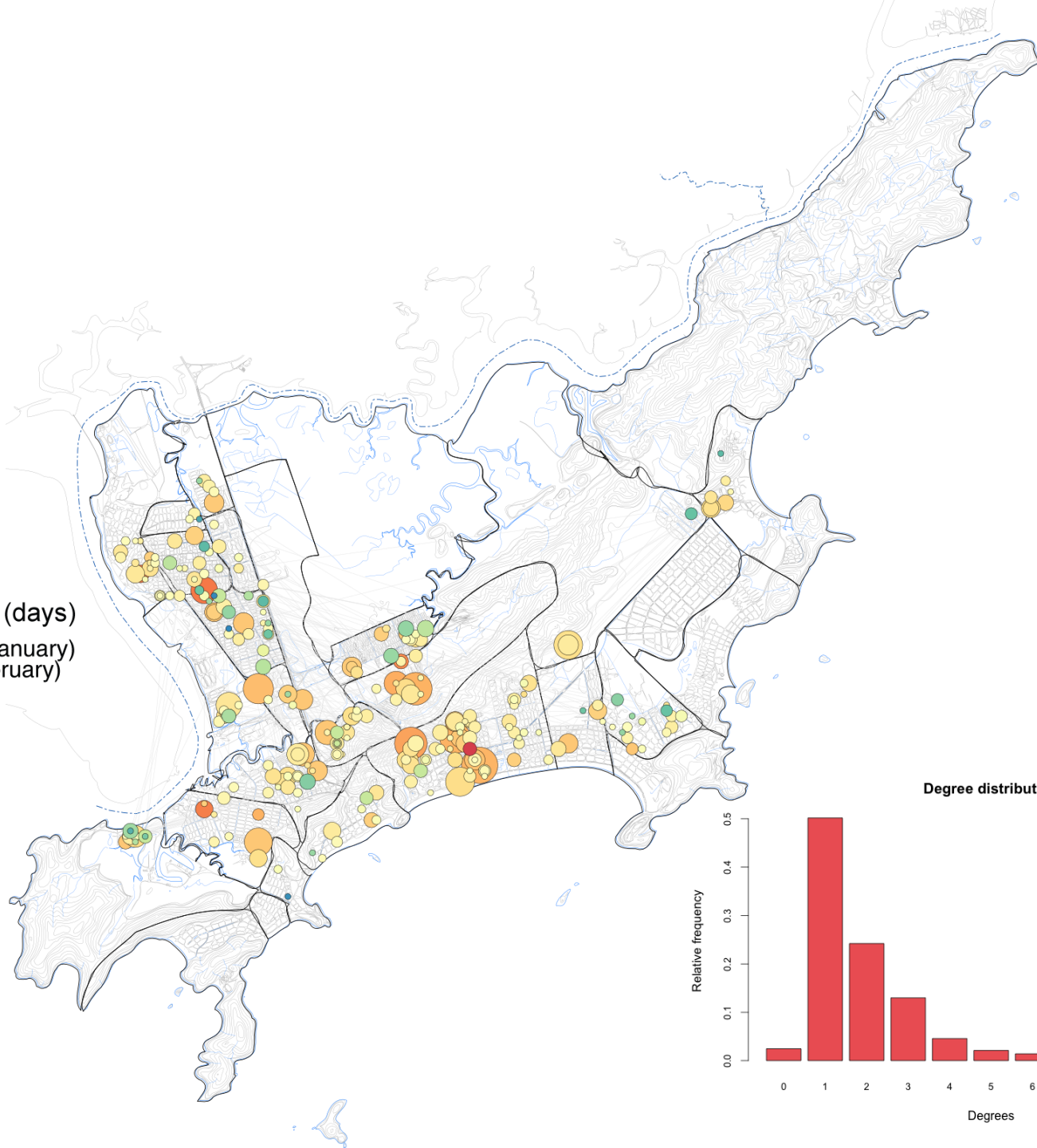




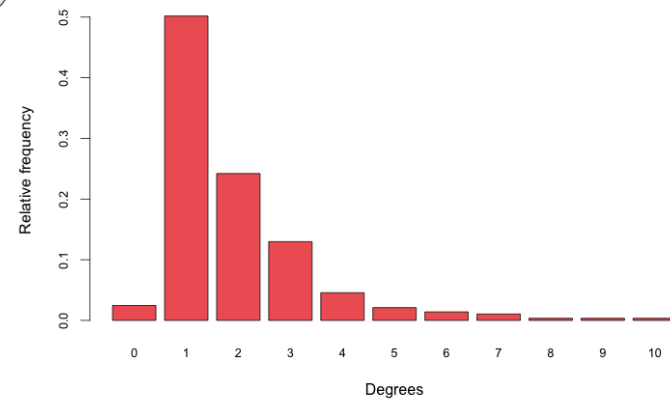


Time of Infection (days)

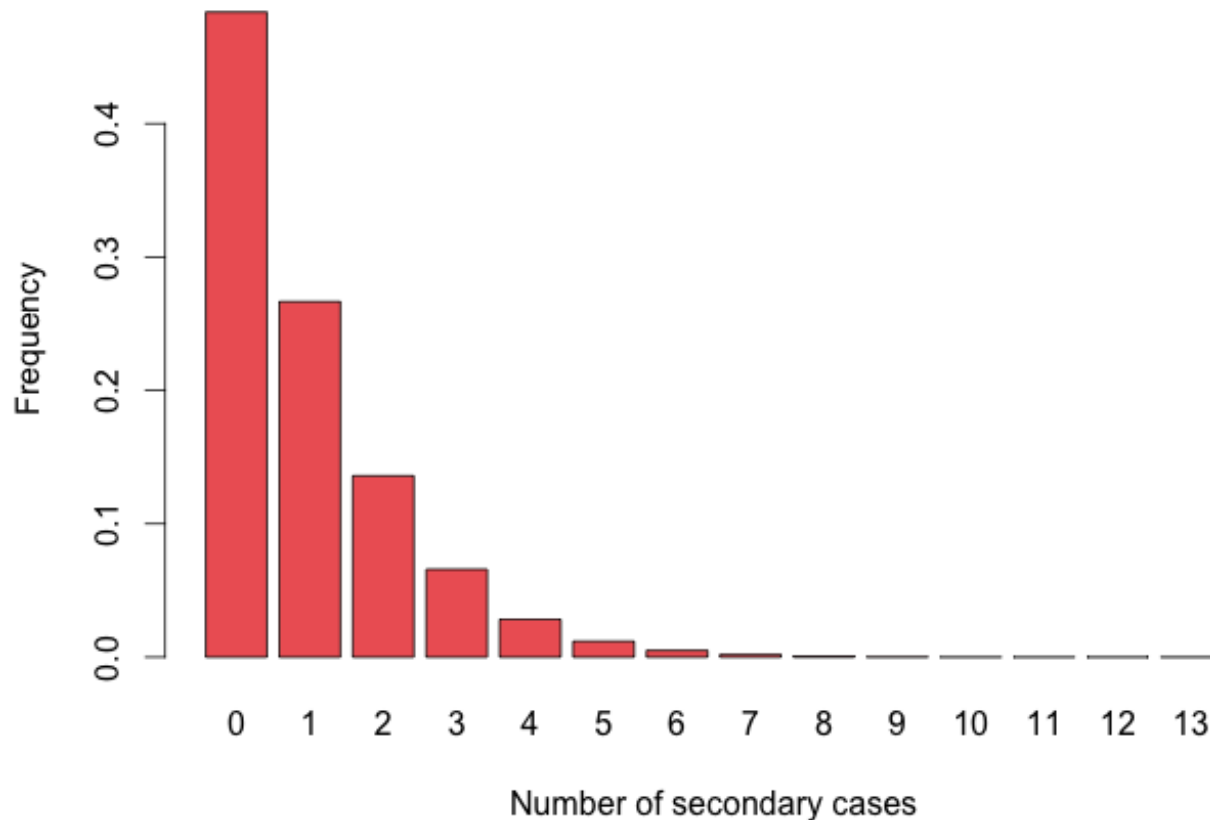
- 0 (December-January)
- 50 (January-February)
- 100 (Março-Abril)
- 150 (Abril-Maio)
- 200 (Maio-Junho)



Degree distribution

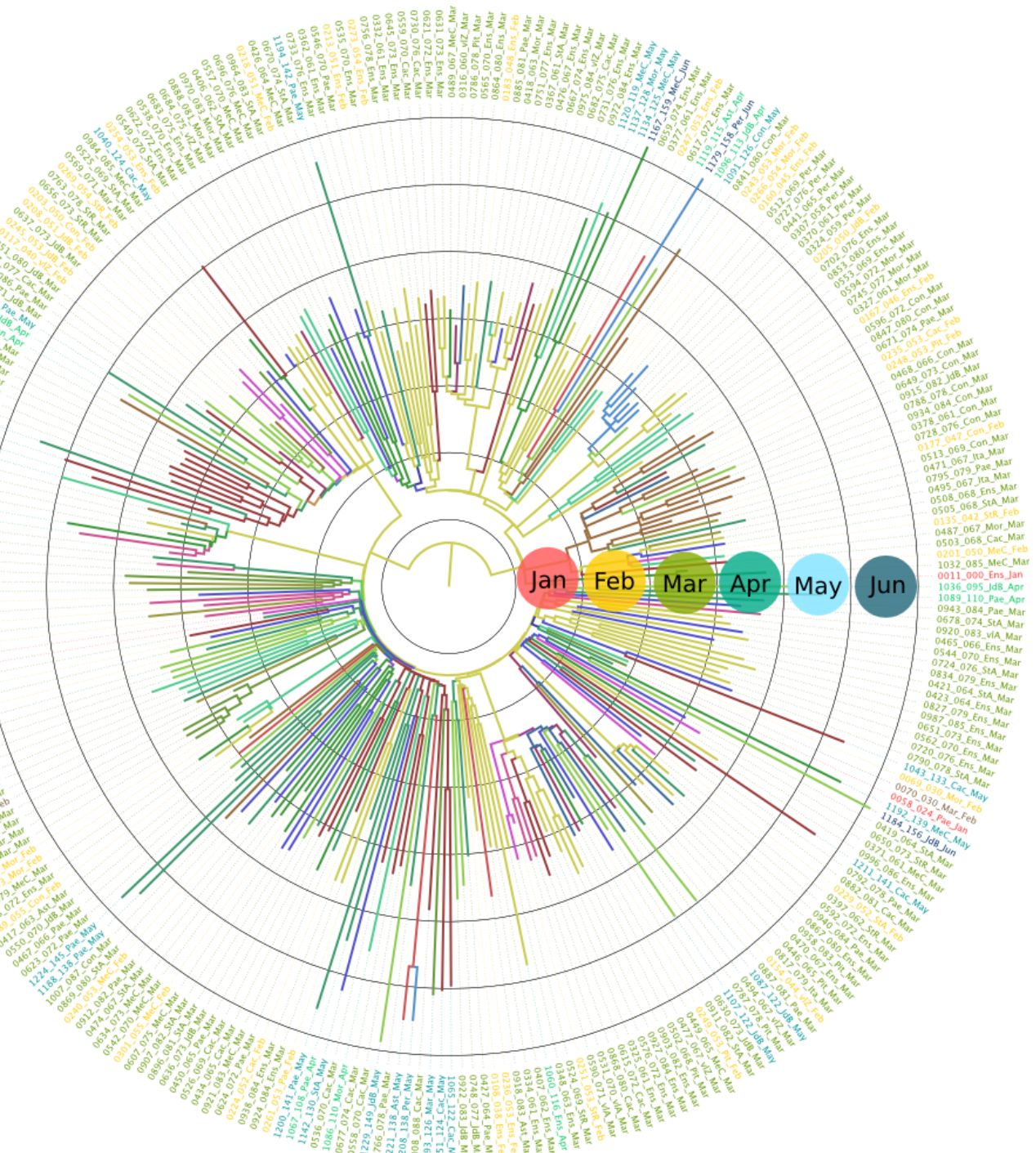


Posterior estimates of effective reproduction numbers (R)

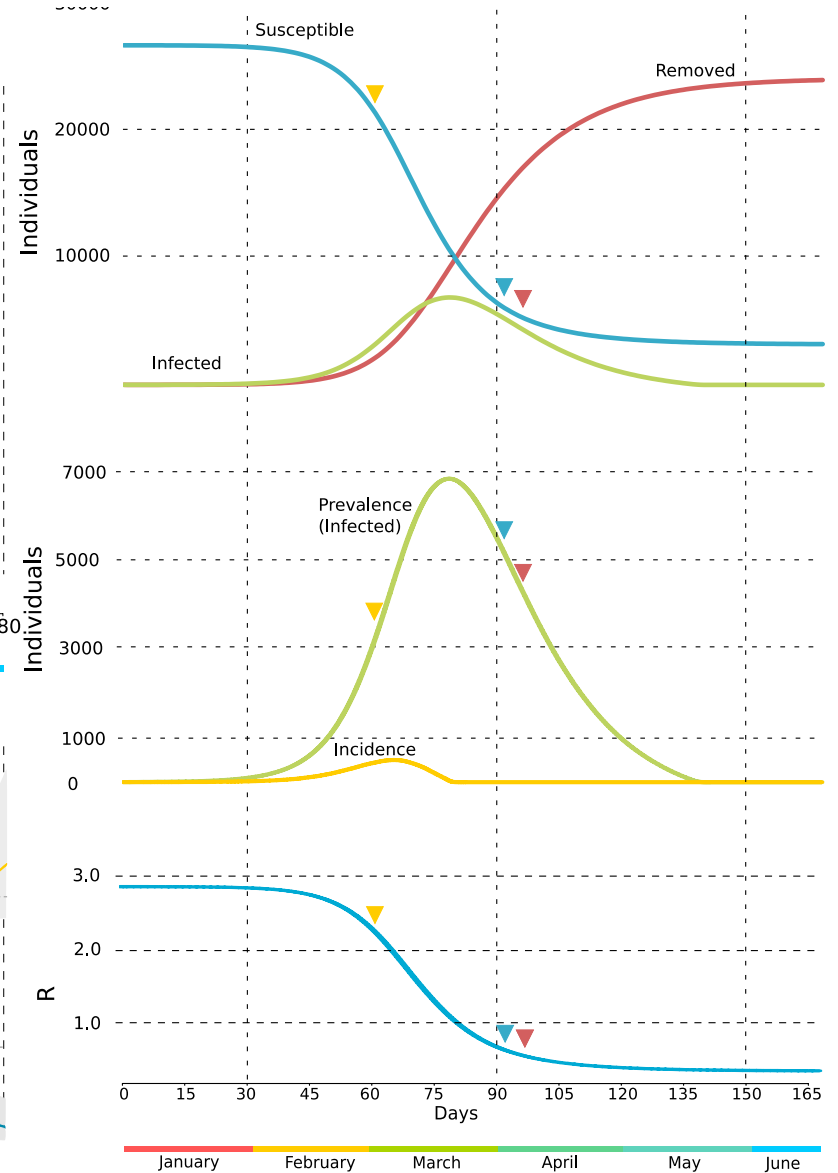
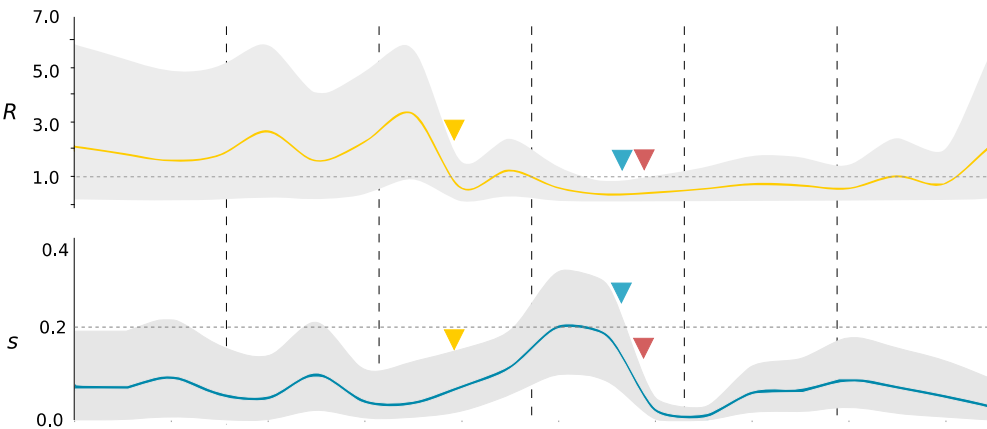
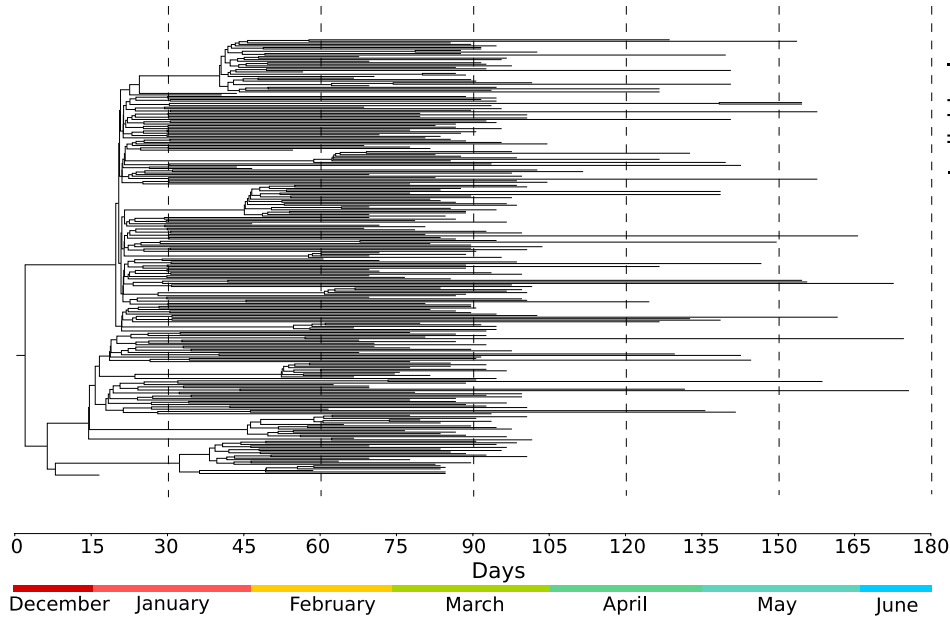


The basic reproduction number, R , is the number of secondary infections that results from a single infected human. Basic reproduction numbers estimated for dengue range between 1.33 and 11.6 (Halstead, 2008). Favier *et al.* and Massad *et al.* analyzed epidemic data from several cities in Brazil and developed values ranging from 3.8 to 5.1 and from 2.7 to 11.6, respectively.

- Location**
- Astúrias
 - Cachoeira
 - Conceiçãozinha
 - Enseada
 - Itapema
 - Jardim Boa Esperança
 - Marinas
 - Mar e Céu
 - Morrinhos
 - Pae Cará
 - Perequê
 - Pitangueiras
 - Santo Antônio
 - Santa Rosa
 - Vila Áurea
 - Vila Zilda



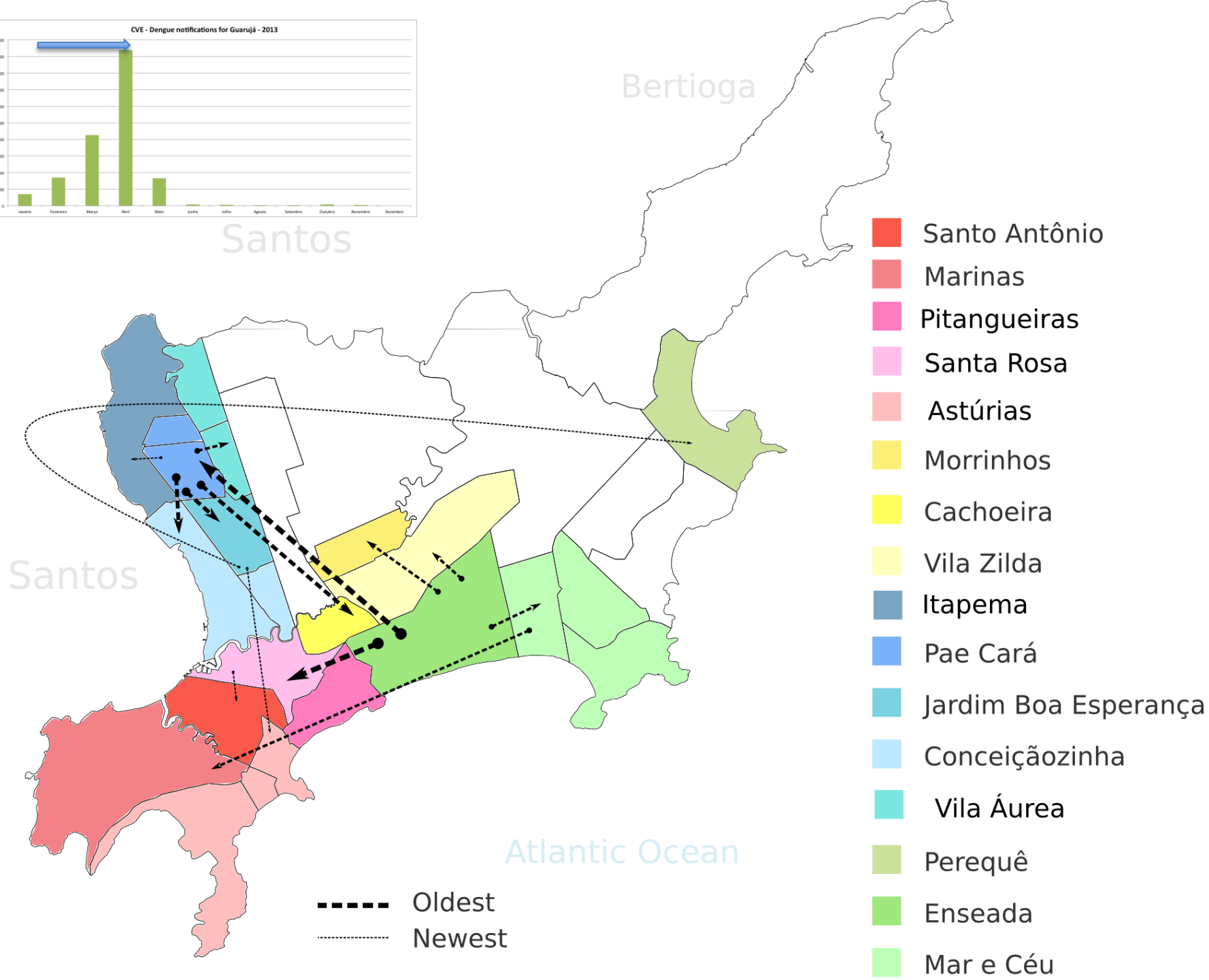
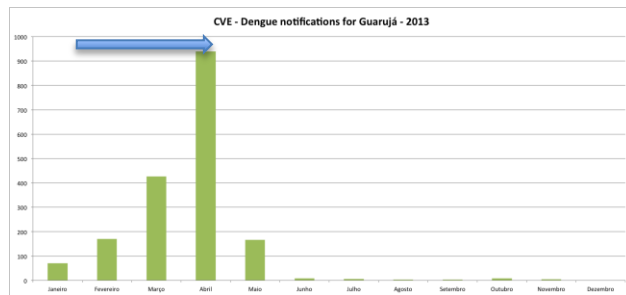
BDSKY, R & SP & SIR model

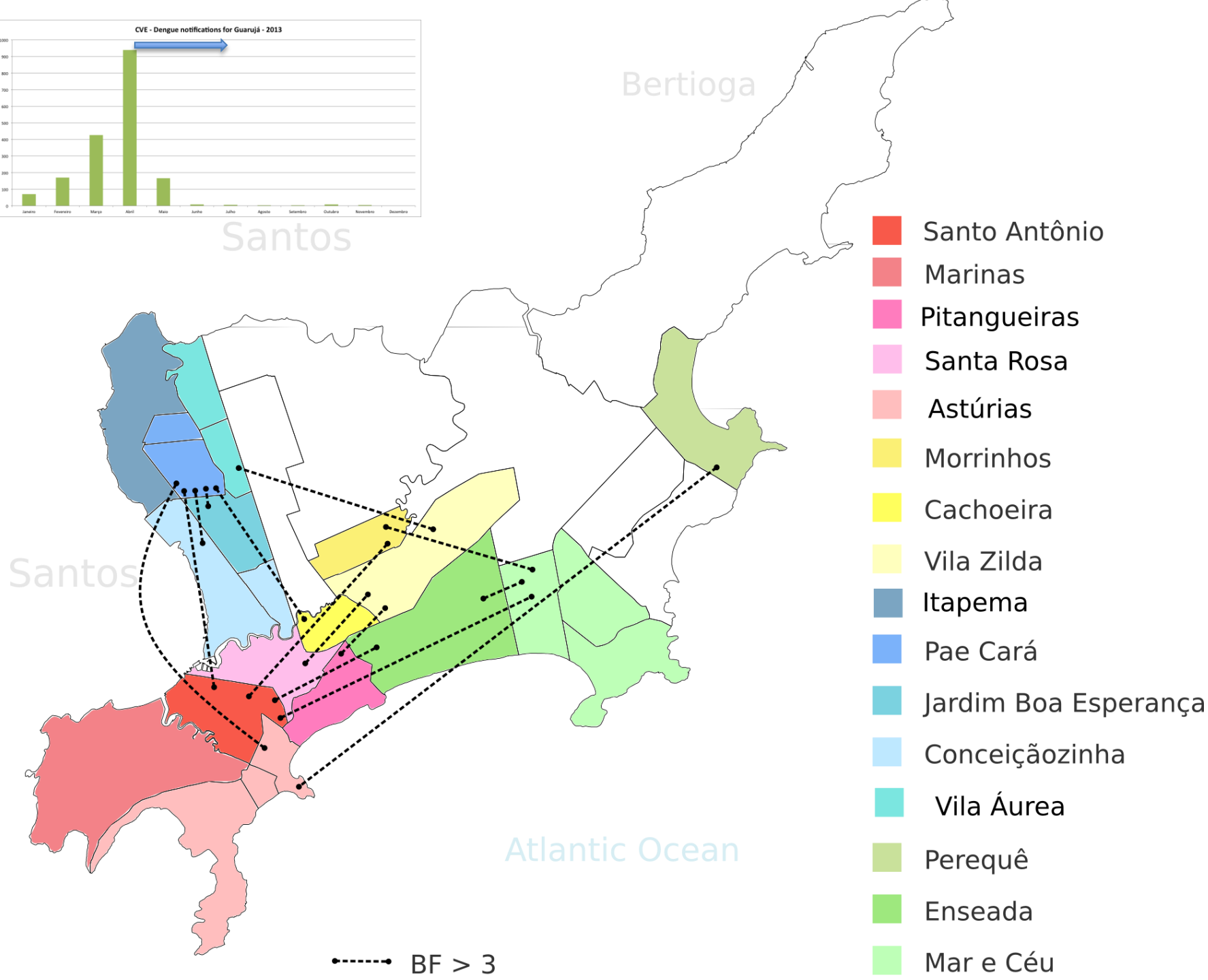
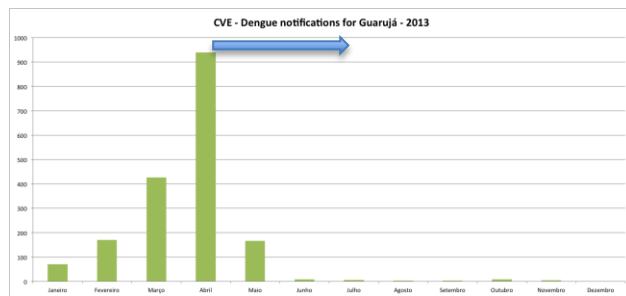


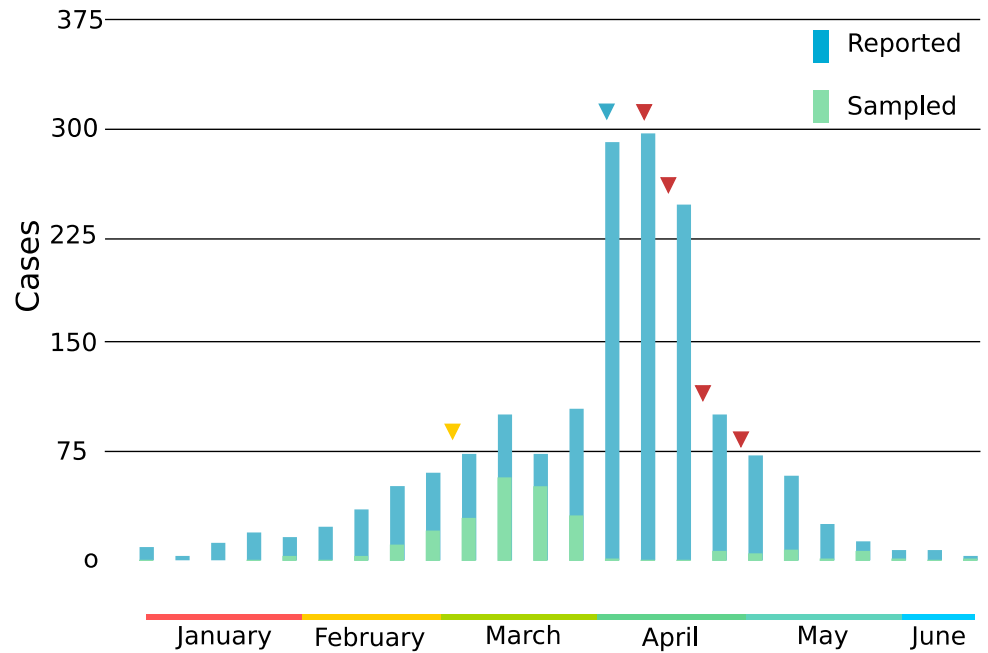
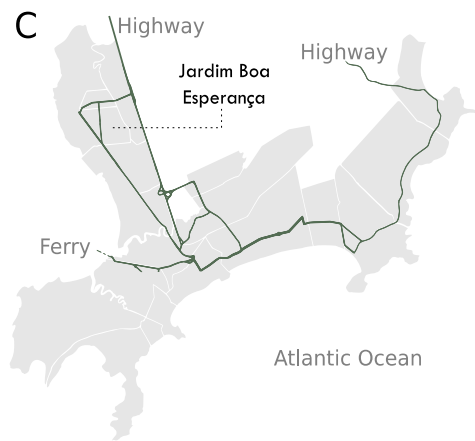
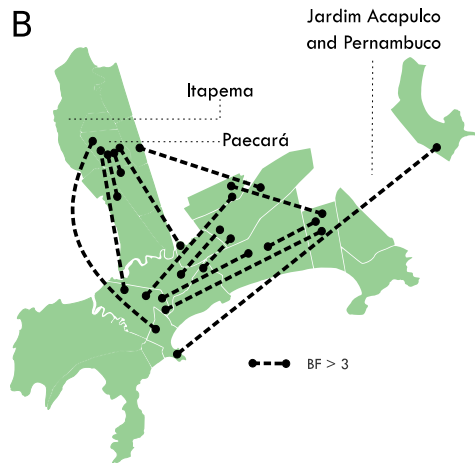
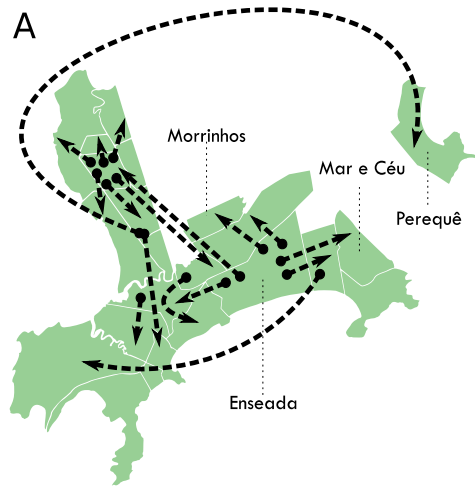
Blue: epidemiological situation.

Yellow: source reduction initiatives in shantytowns started.

Red: insecticide

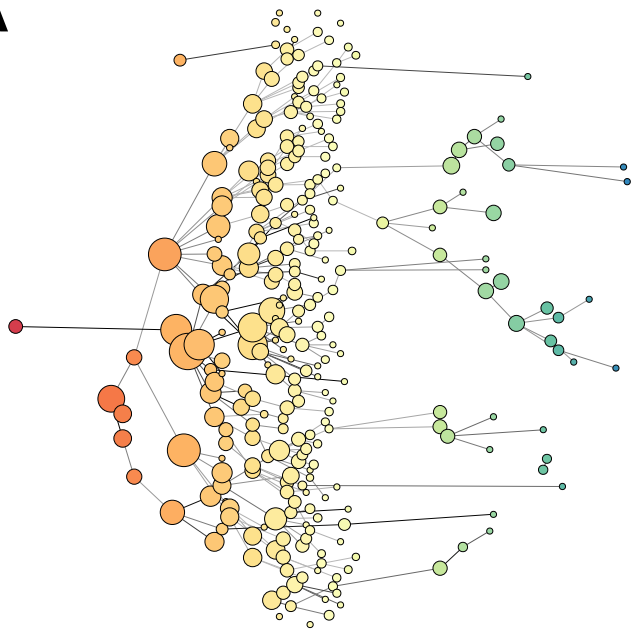




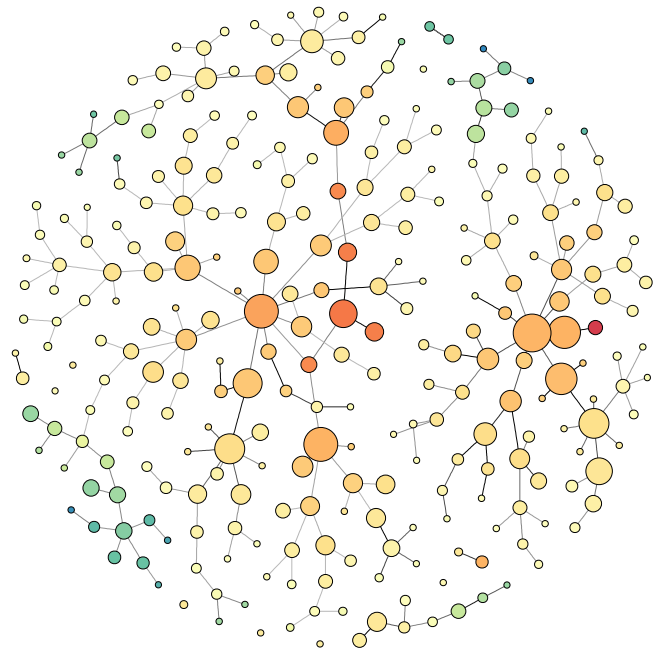


Blue: epidemiological situation.
 Yellow: source reduction initiatives in shantytowns started.
 Red: insecticide

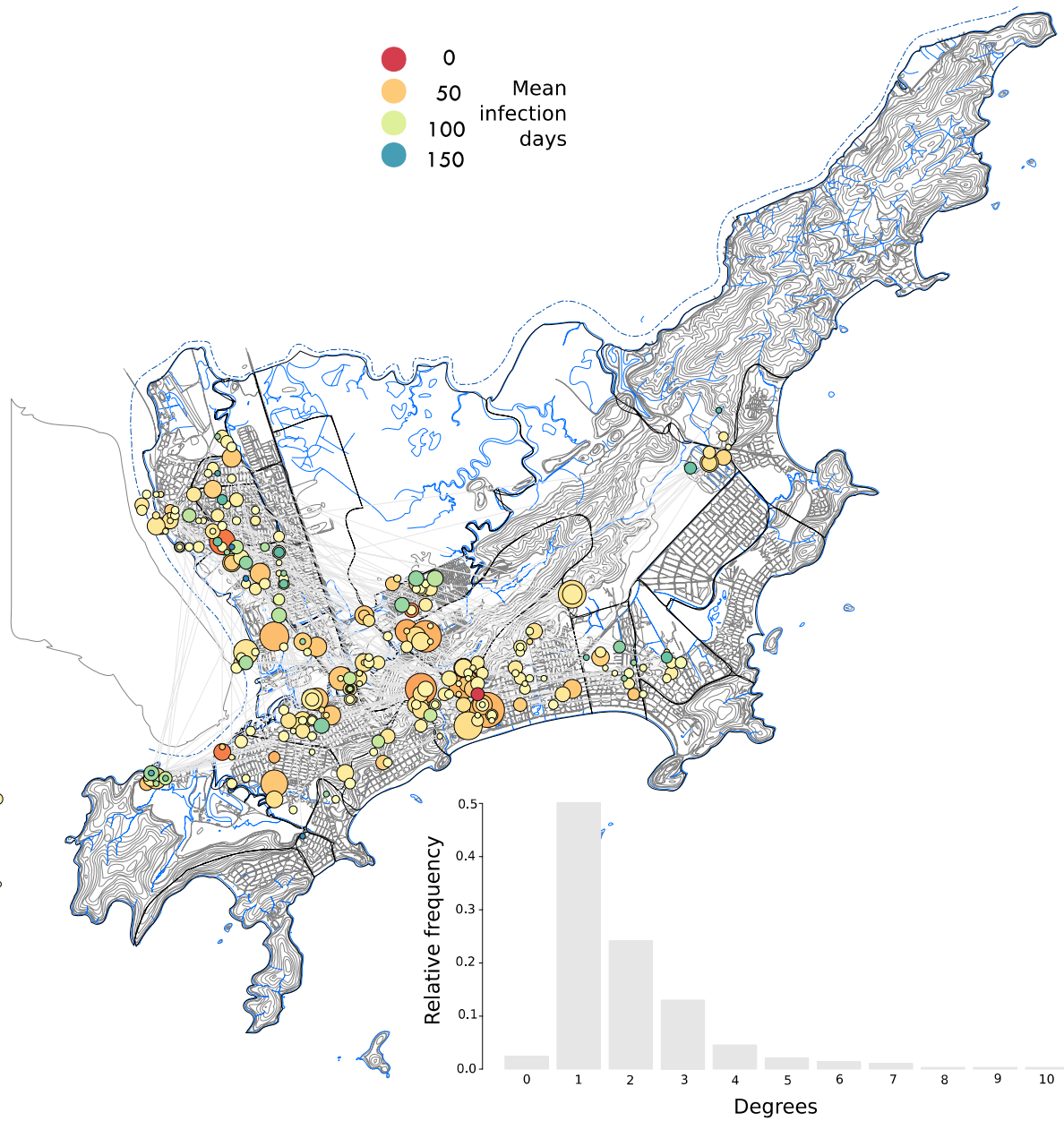
A



B



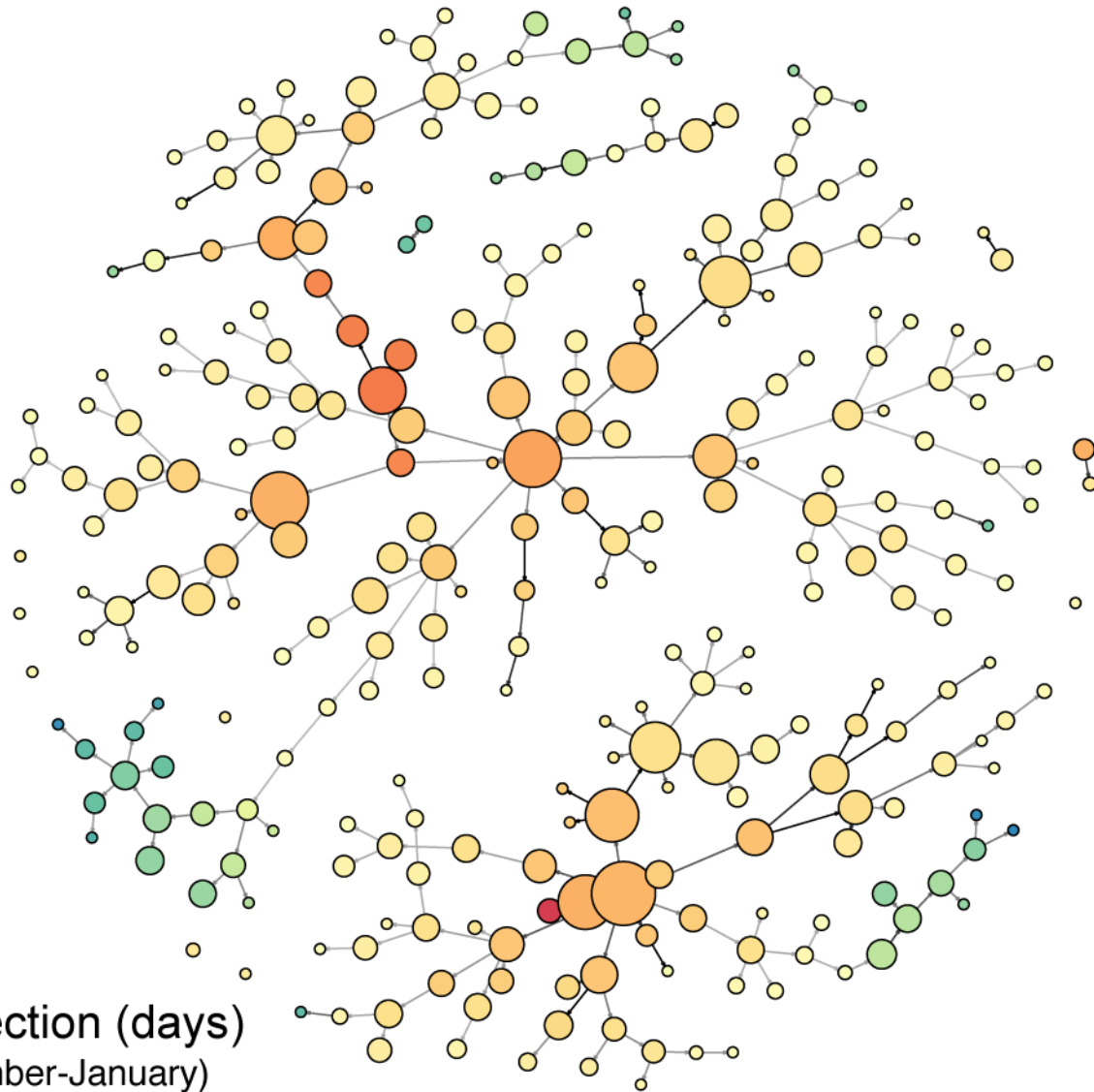
C



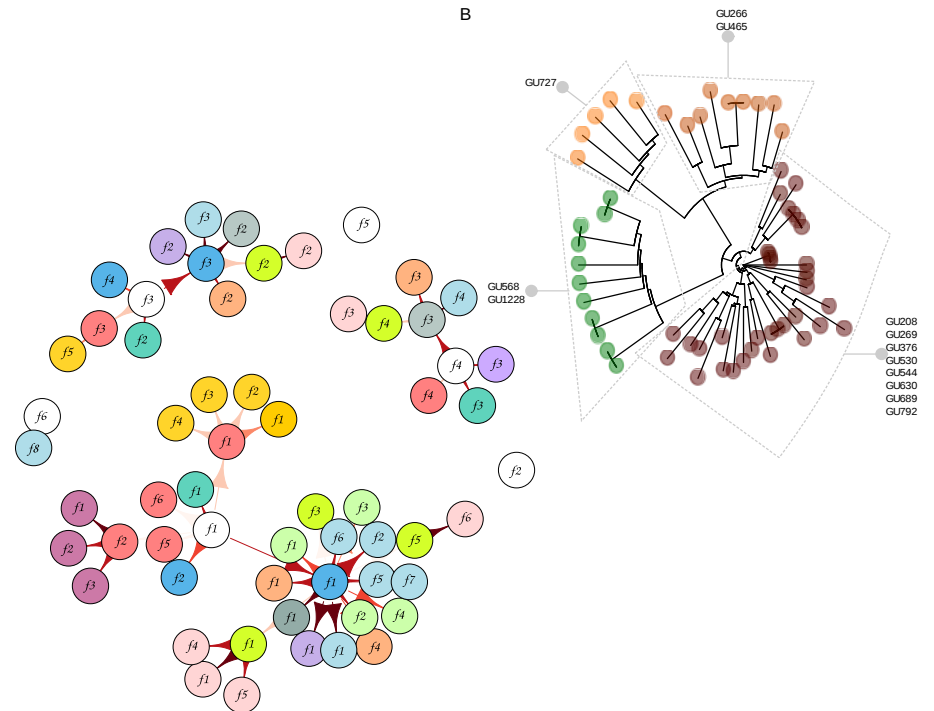
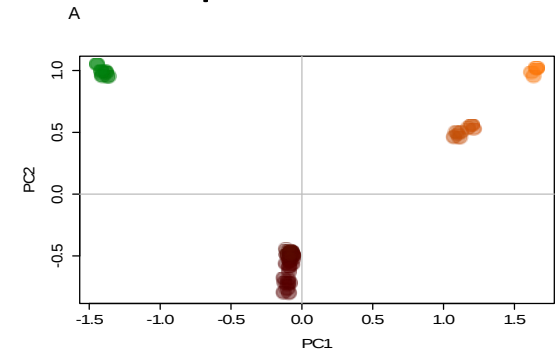
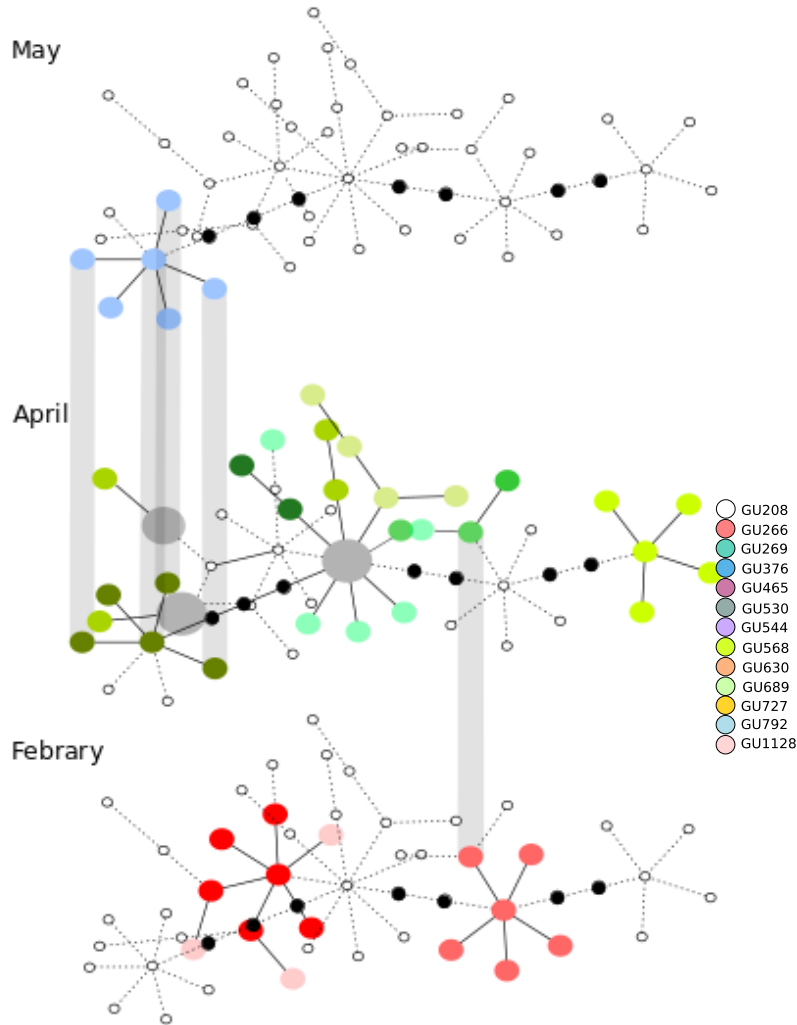
DENV4 - Transmission Network

Time of Infection (days)

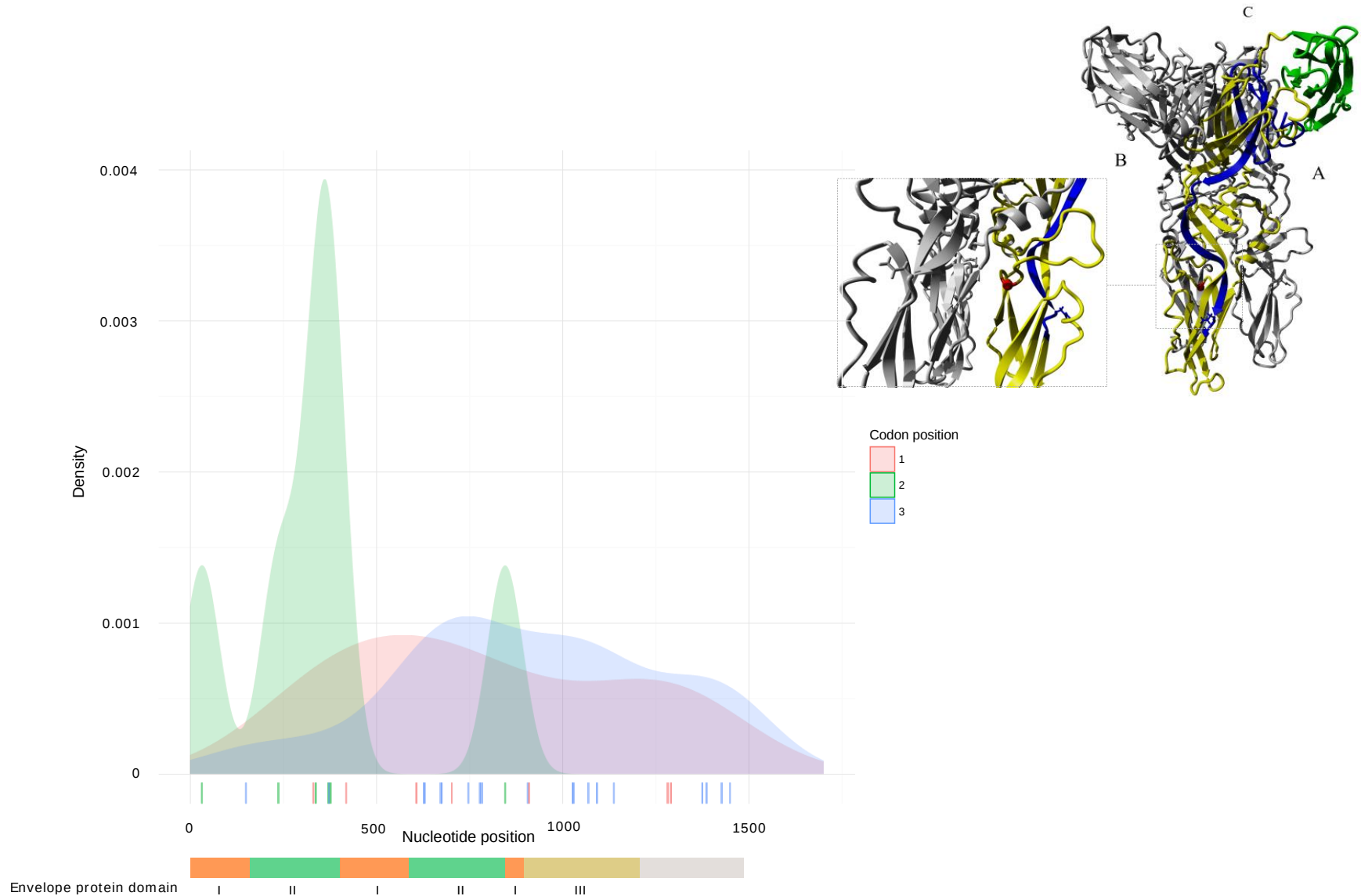
- 0 (December-January)
- 50 (January-February)
- 100 (Março-Abril)
- 150 (Abril-Maio)
- 200 (Maio-Junho)



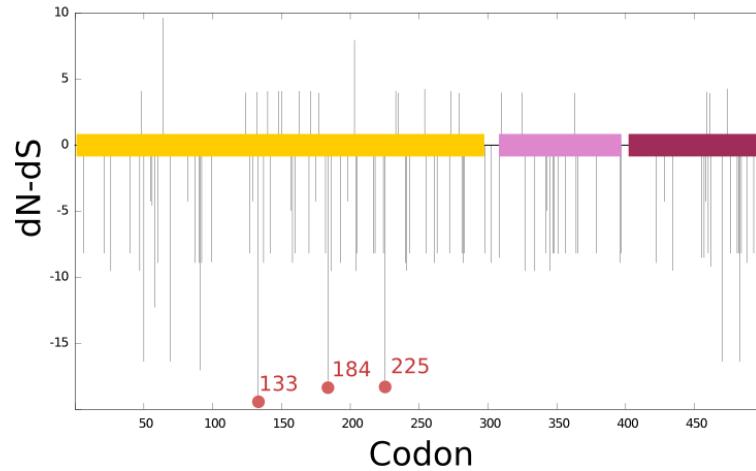
Temporal network showing the genetic relationships of intra-host variants of the DENV-4 E region from different samples



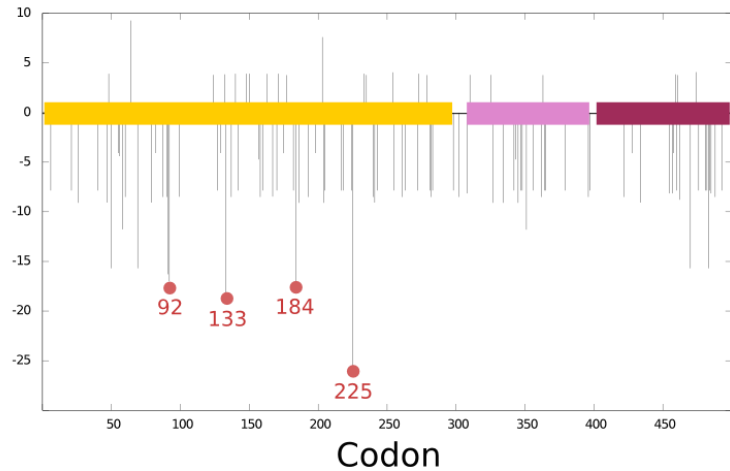
Distribution of SNPs in the envelope gene of DENV-4. Linear representation of the DENV-4 envelope is showed at the bottom. Codon positions are represented by colors (residue 235)



SLAC



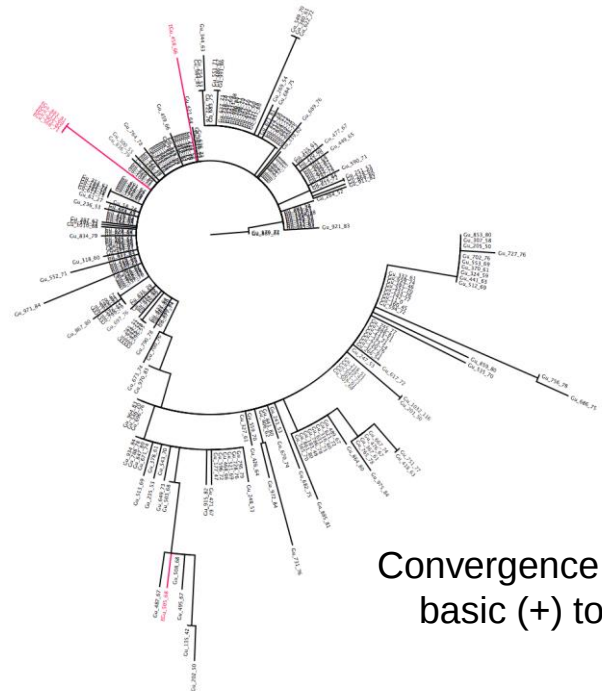
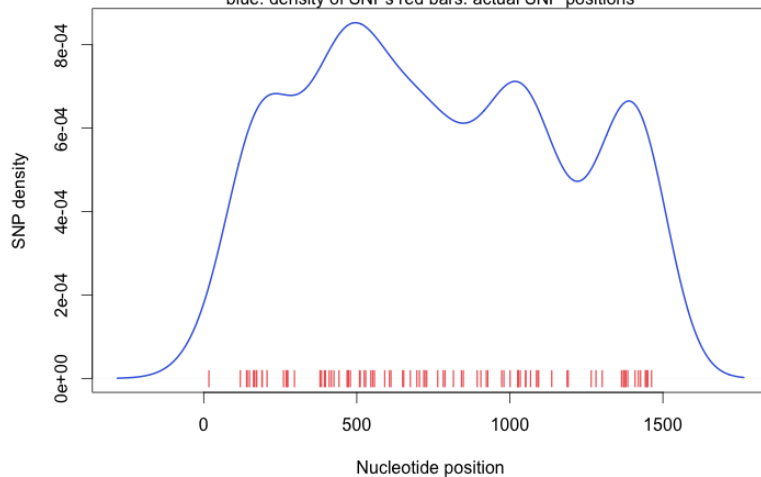
FEL

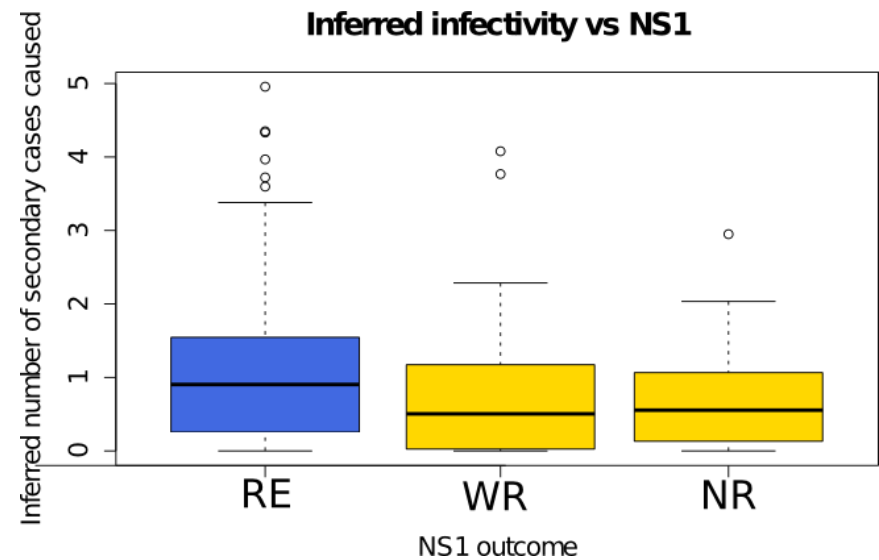
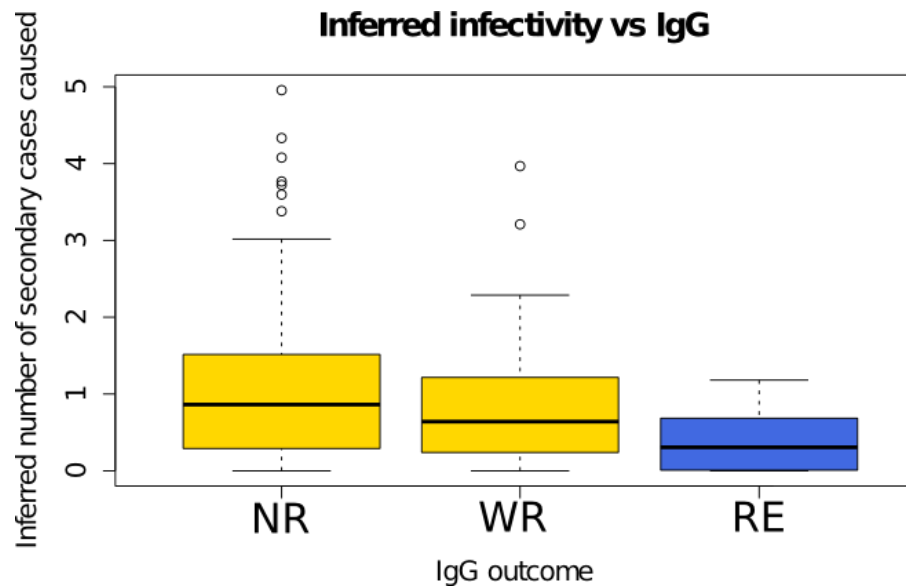
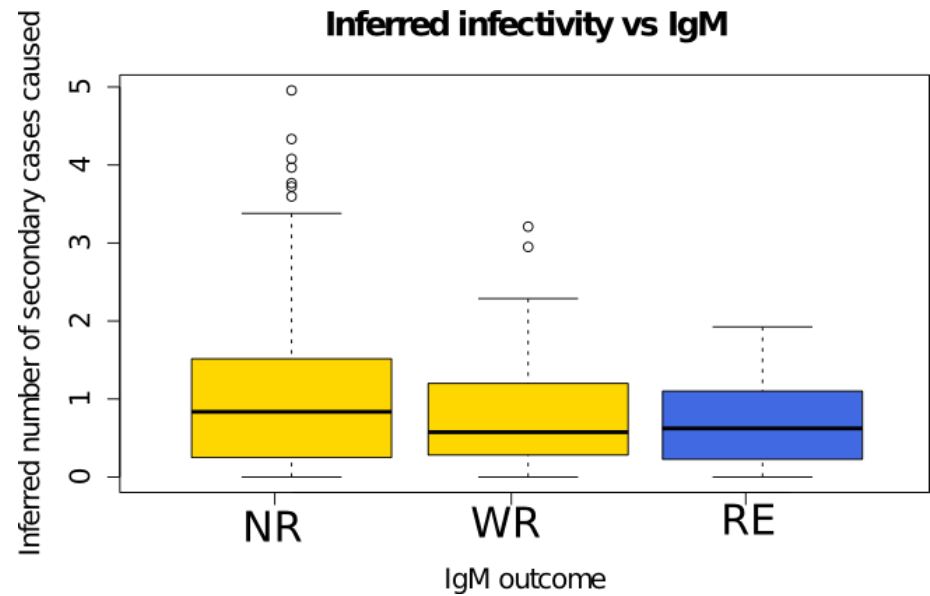
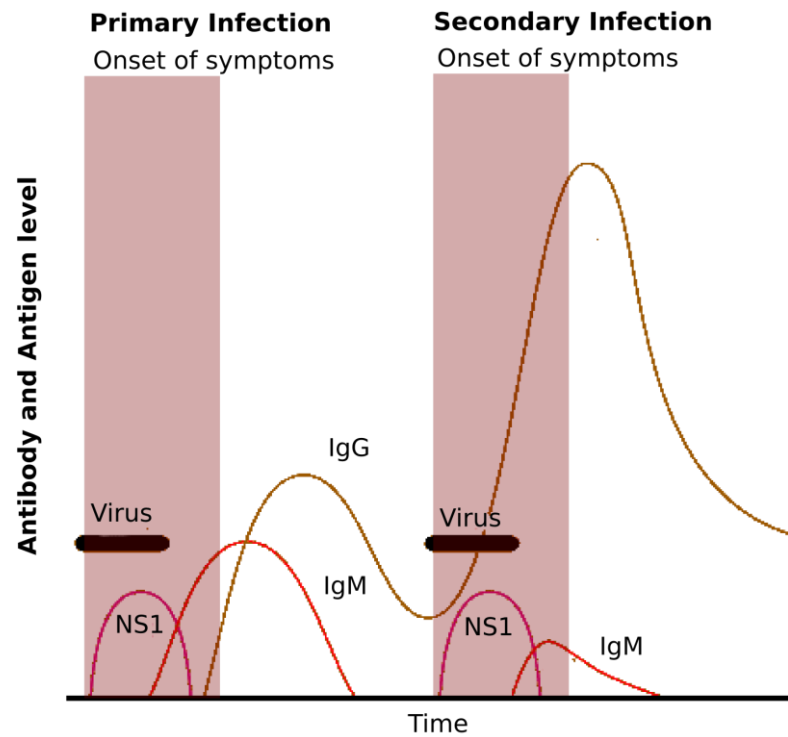


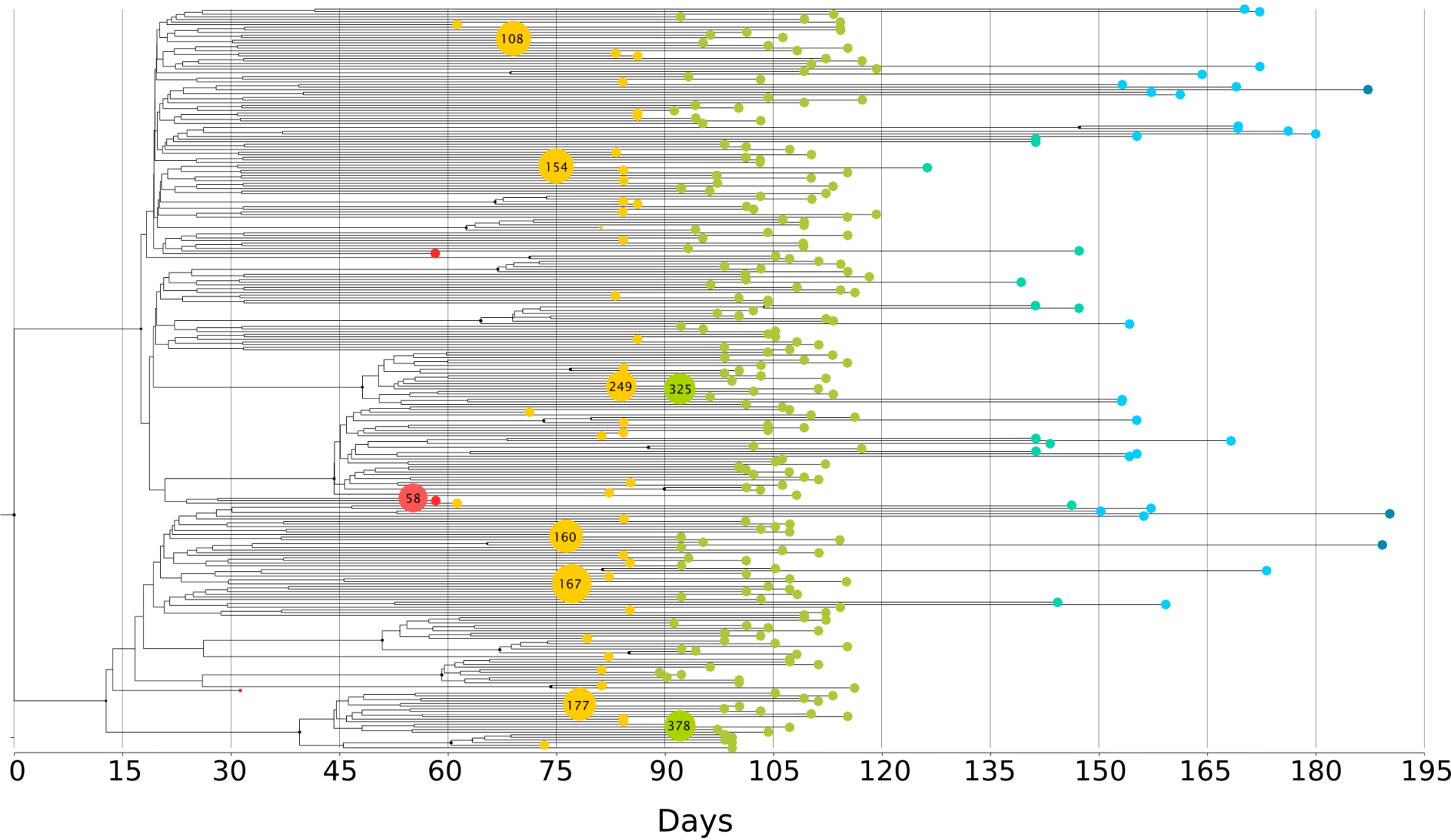
E gene domains

Location of the SNPs in the genome

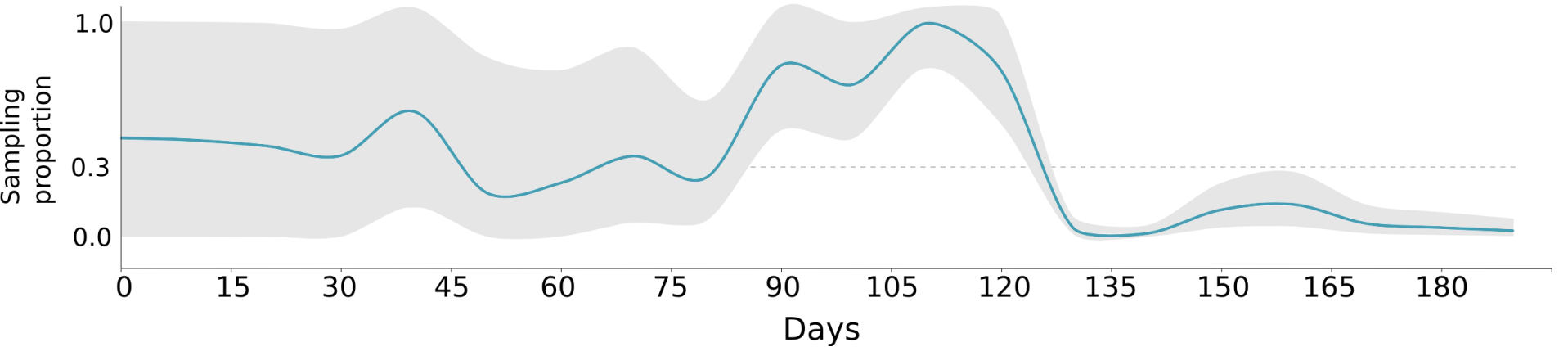
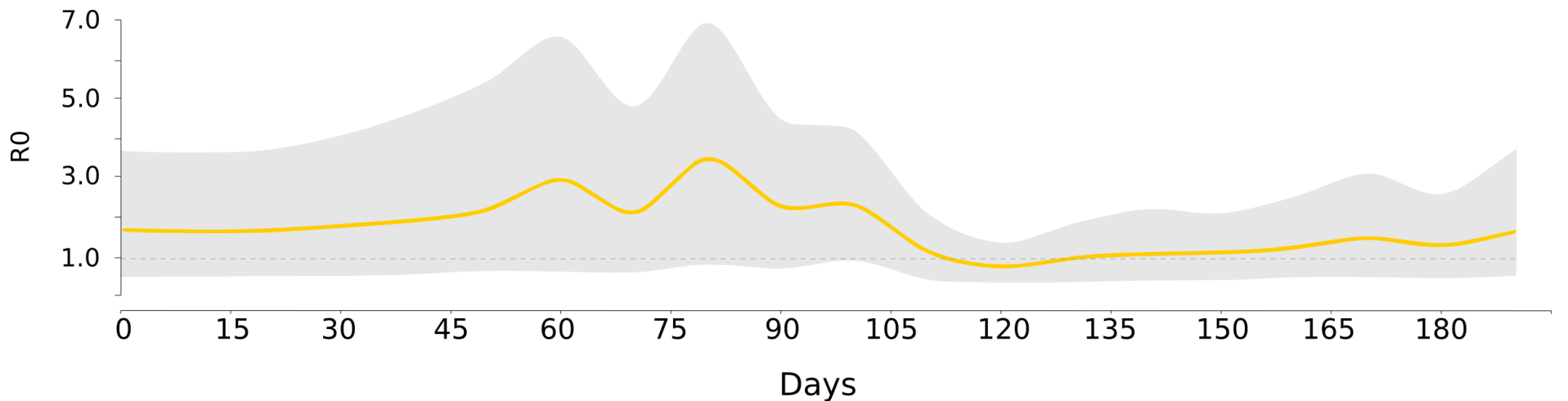
blue: density of SNPs red bars: actual SNP positions



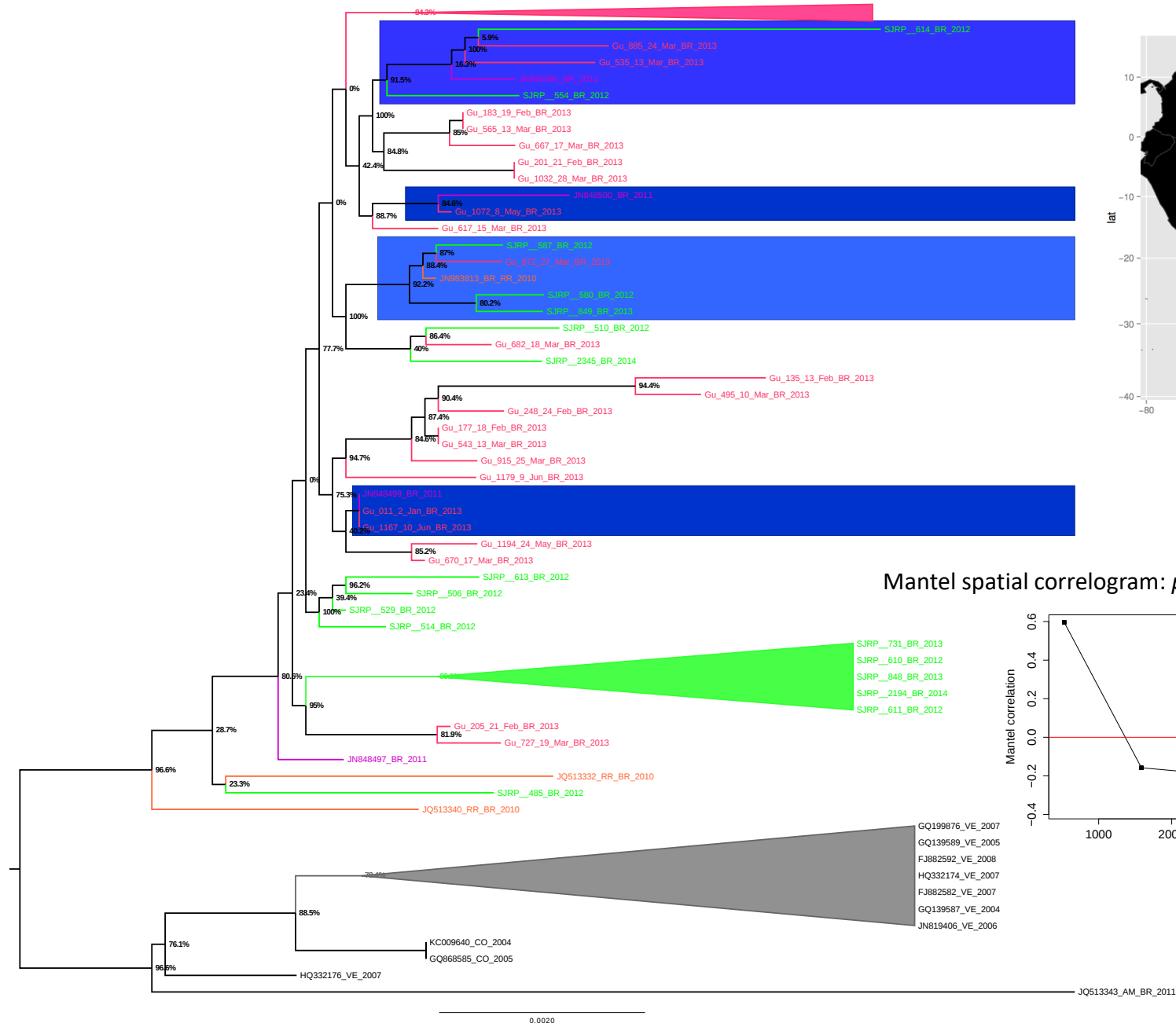
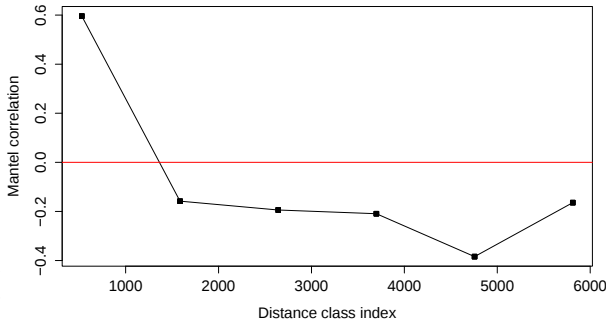
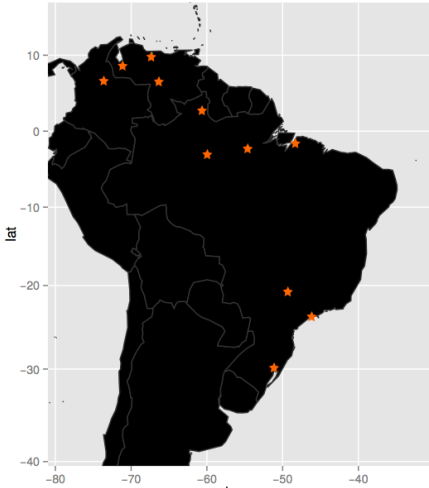




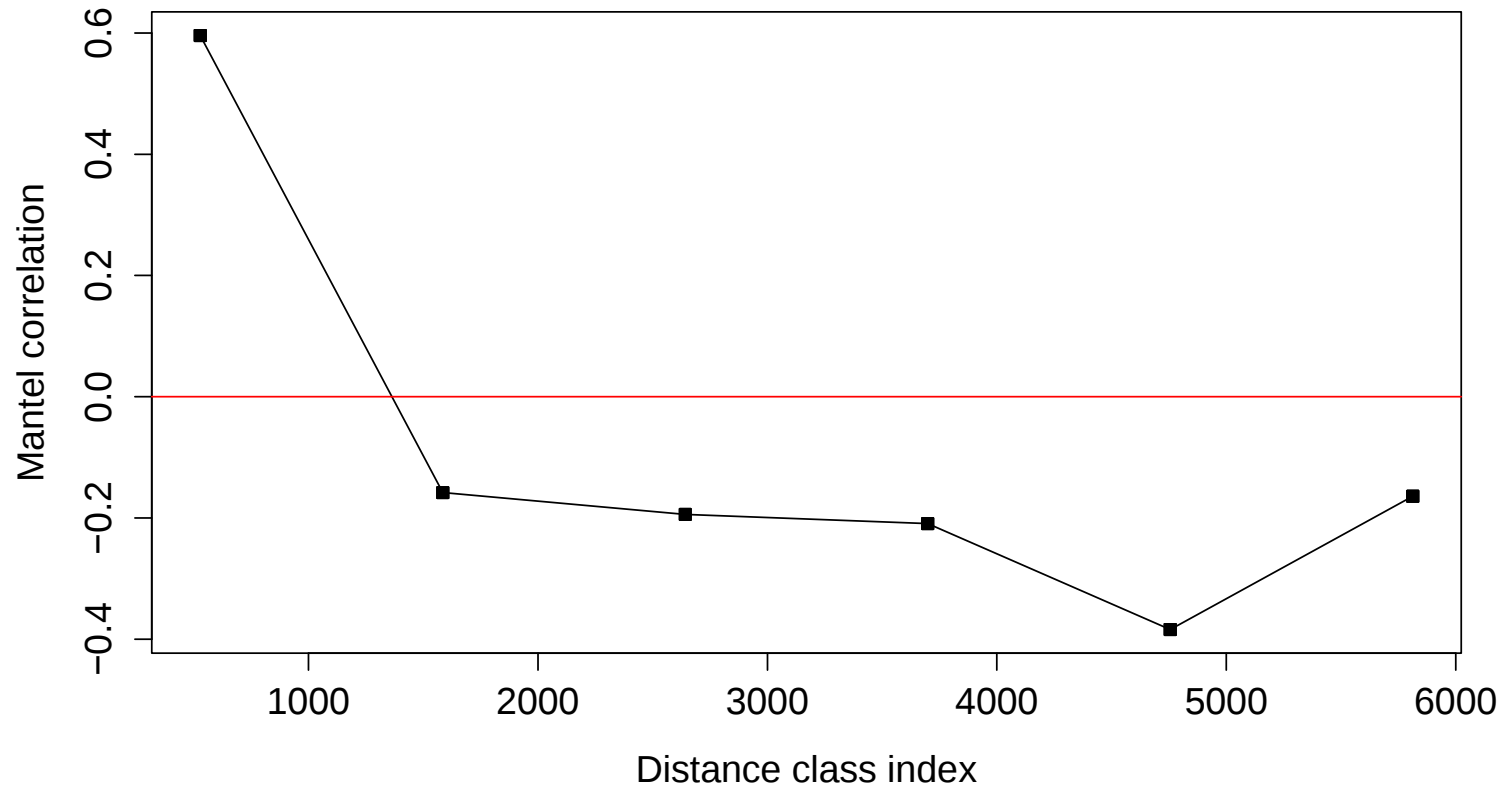
R & SP BDSKY



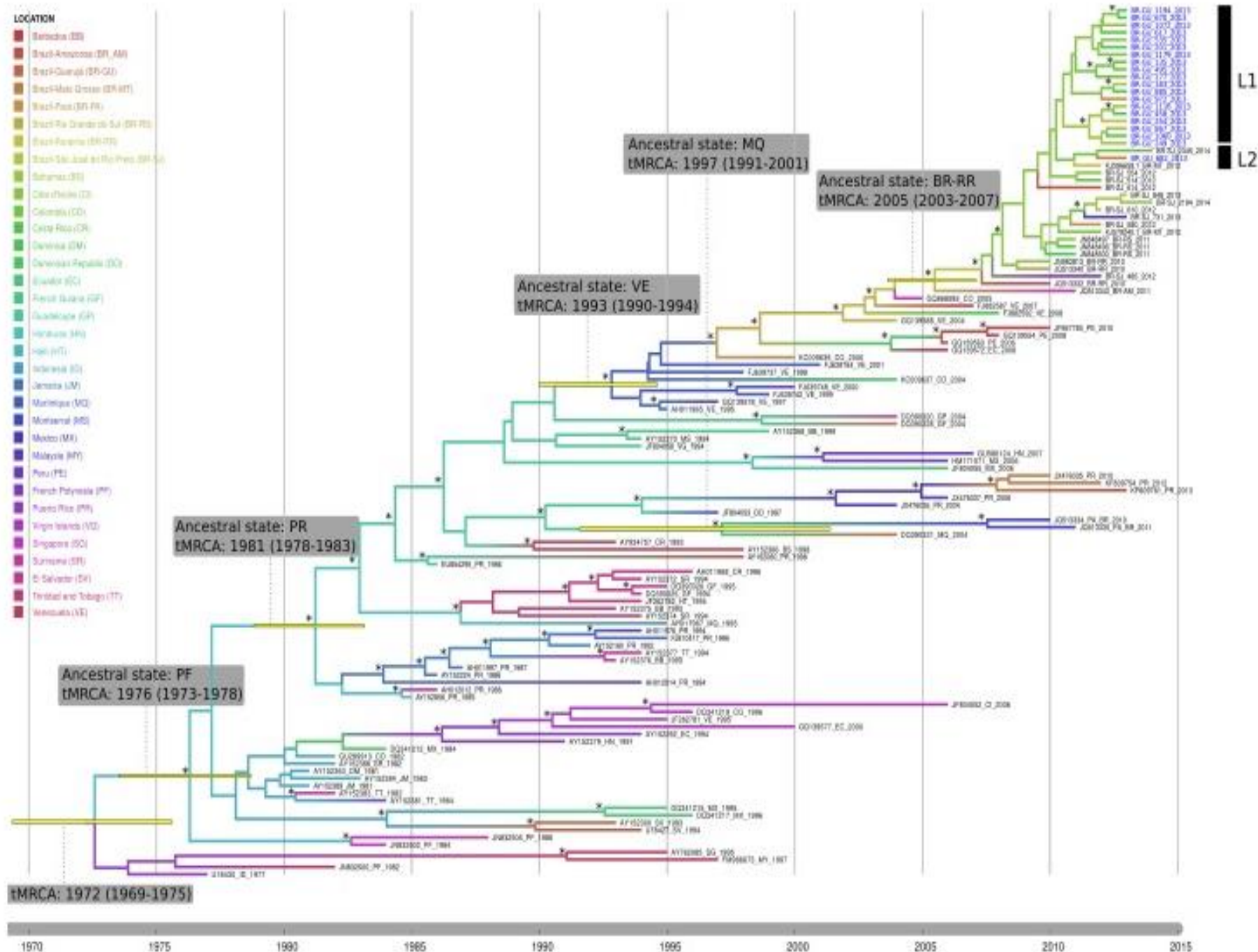
Detecting wide & fast spatial DENV dispersal



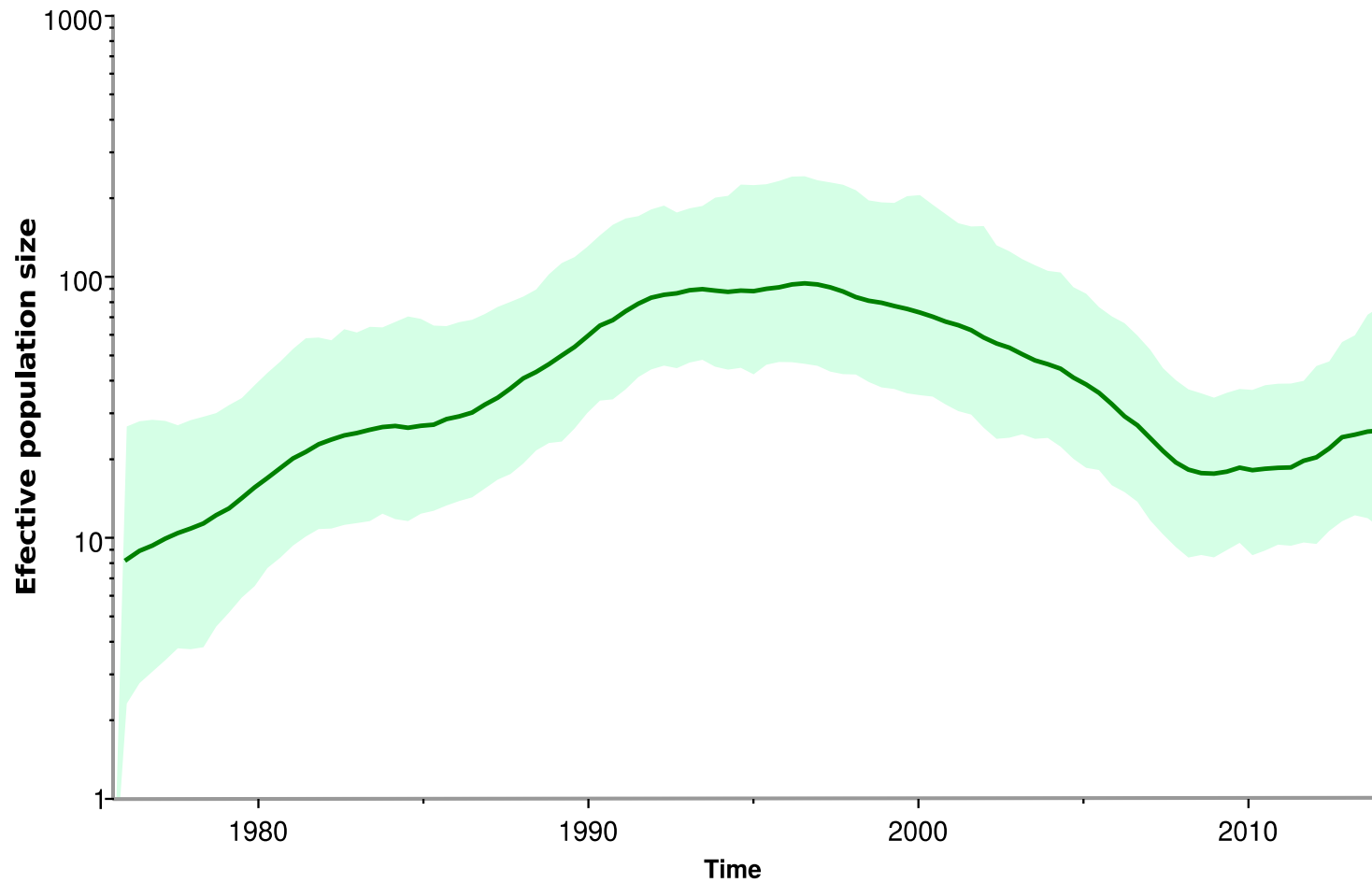
Mantel spatial correlogram: *patristic* vs *geographic* distances



Based on Carrel *et al.*, 2010



BDSKY of DENV4: recent growth in Brazil!



Conclusions

- Phylodynamics of DENV works! *i.e.*, E gene good marker, stable rates of change, stable nucleotide composition, no significant recombination systematic error.
- We need to incorporate viral genealogy & patient data to better understand the evolution of an outbreak.
- Real time follow-up of dengue outbreaks can be useful for control: Guarujá stands as a proof of concept.
- “Where there is no overlap there is gap” – Mark Miller, MD.

People & Acknowledgments

Christian Julián Villabona-Arenas

Jessica Luana de Oliveira

Suzanne Ortiz

Caio César de Melo Freire

Paolo Marinho de Andrade Zanotto

Laboratório de Evolução Molecular e Bioinformática, Departamento de Microbiologia, Instituto de Ciências Biomédicas, Universidade de São Paulo

Carla de Sousa Capra

Laboratório de Saúde Pública, Secretaria da Saúde, Prefeitura Municipal de Guarujá

Karime Balarini

Celso Ricardo Theoto P. Fonseca

Itapema Laboratório de Análises Clínicas, Guarujá

Mauricio Loureiro

Saulo Duarte Passos

Laboratório de Infectologia Pediátrica, Faculdade de Medicina de Jundiaí



Projetos FAPESP Nº 2010/19059-7 & 2010/1701-2

Bolsa PQ CNPq