

# Epidemiological and parasite-genomic evidence for selection on *Schistosoma mansoni* in the context of mass drug administration

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# Academic Background



UNIVERSITY OF  
CAMBRIDGE

**2008-11 Bachelor's Degree:**  
Biological Anthropology

LONDON  
SCHOOL of  
HYGIENE  
& TROPICAL  
MEDICINE



**2012-13 Master's Degree:**  
Medical Parasitology  
Project on diagnostics for soil-transmitted  
helminths

Imperial College  
London



**2013-17 PhD Imperial College:**  
Dept. Infectious Disease Epidemiology  
Thesis Title: Epidemiology and population  
genomics of *Schistosoma mansoni*

MORU  
Tropical Health Network

**2017- Present Postdoctoral Researcher**  
Dept. Mathematical and Economic  
Modelling (Bangkok)



*Schistosoma mansoni* adult  
worm

Photo credit:  
Gabriel Rinaldi



Schistosoma adult worm  
(zoonotic species)

Photo credit:  
Thomas Crellen

# Outline of Presentation

Part 1) Introduction to *Schistosoma mansoni* and schistosomiasis

Part 2) Epidemiological evidence for selection caused by mass drug administration (MDA)

Part 3) Parasite genomic evidence for selection caused by MDA

# Parasite Lifecycle

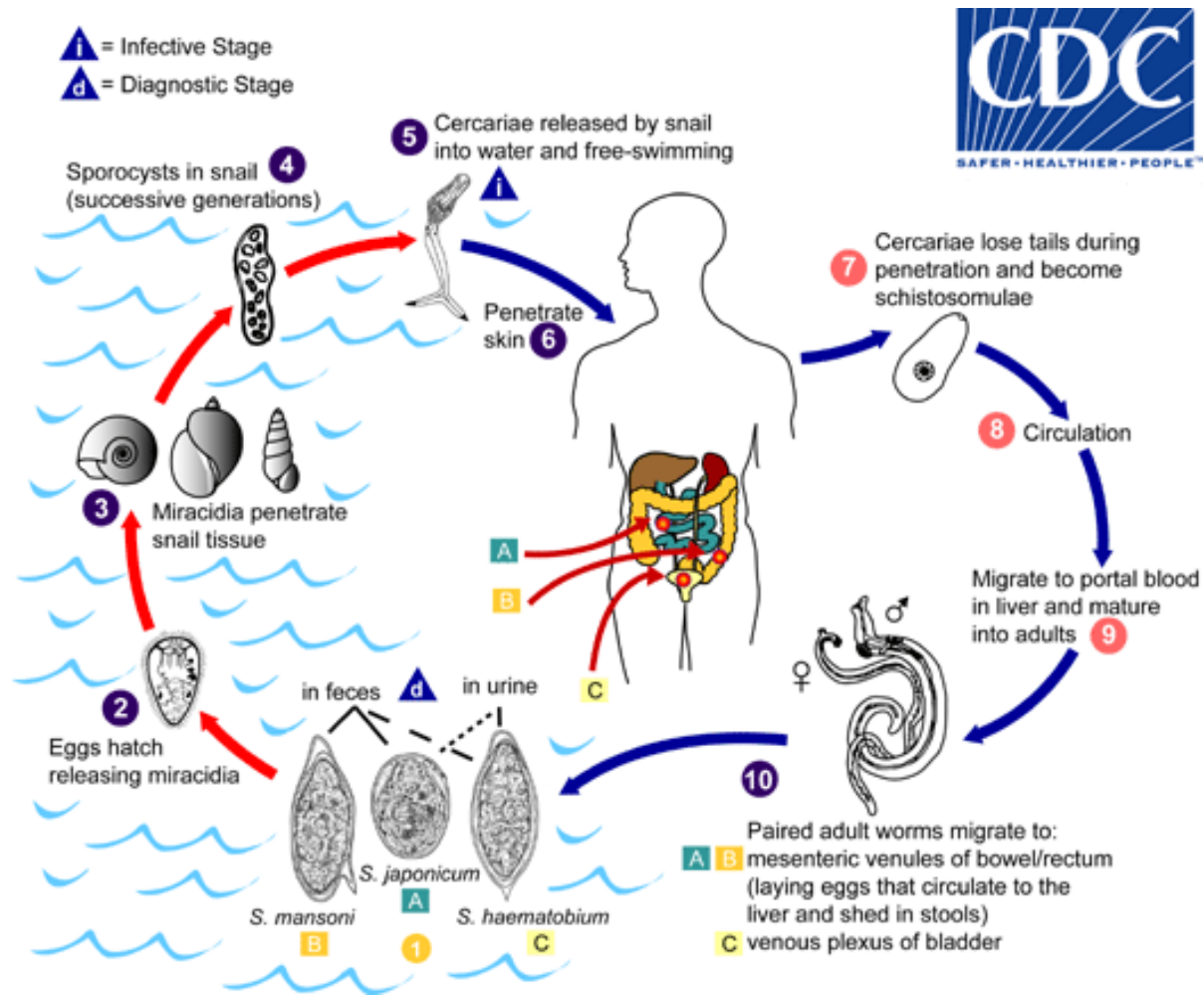
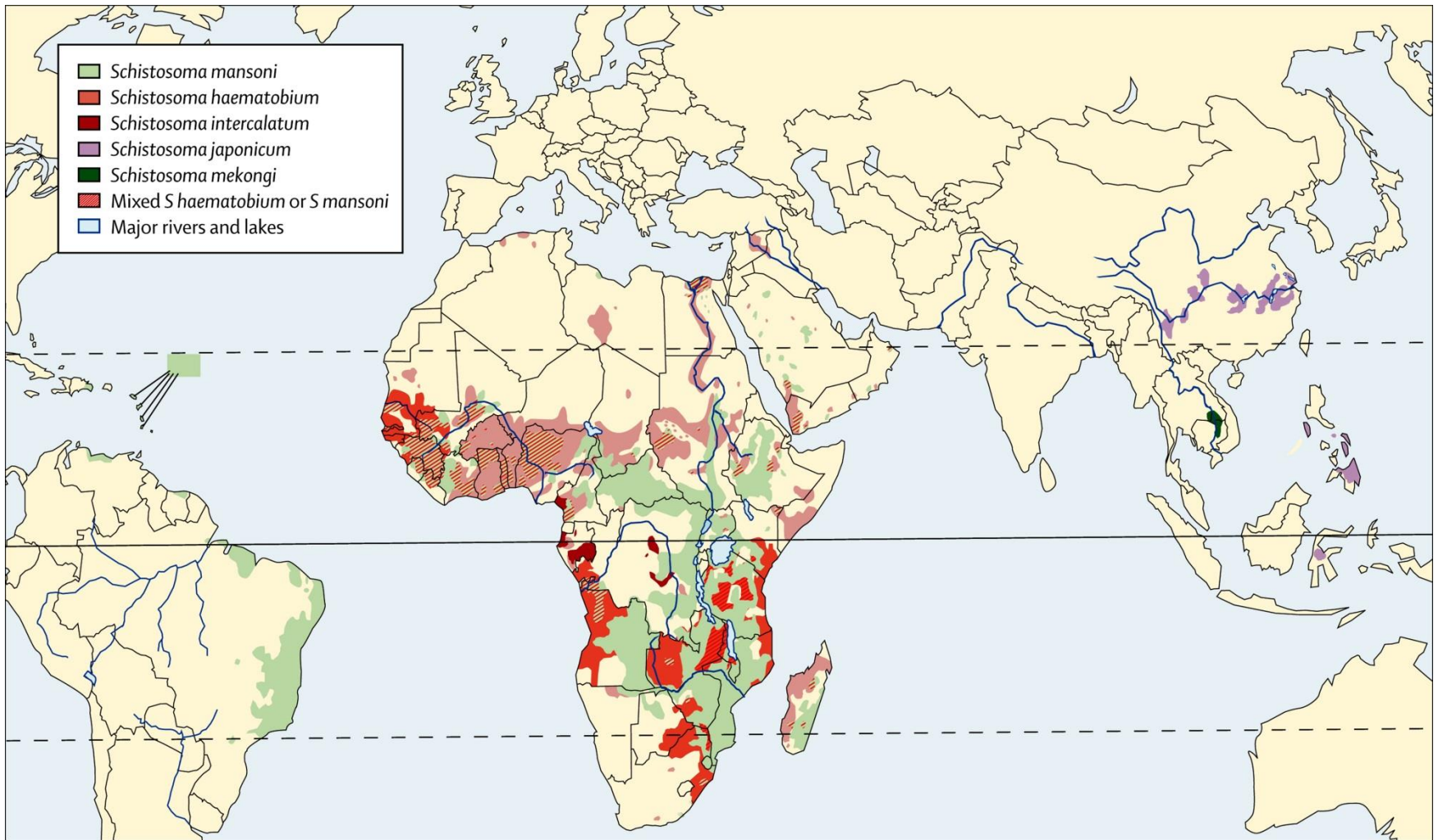


Image credit: CDC

# Spatial Distribution of Schistosomiasis

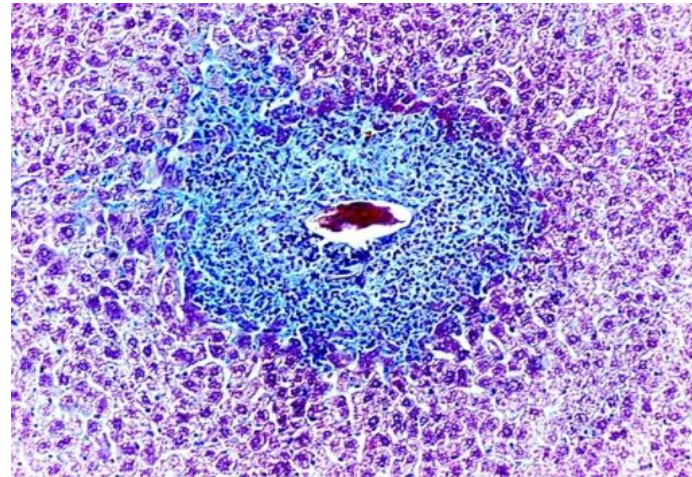


Colley, Daniel G., et al. "Human schistosomiasis." *The Lancet* 383.9936 (2014): 2253-2264.



# Morbidity from schistosomiasis

- 1) Eggs from adult worms become trapped in tissue
- 2) Leads to inflammatory immune response, and causes granuloma around the egg
- 3) Fibrous tissue in liver or spleen can cause chronic damage and organ failure



# Historical Parasite Control

**Japan:** Last human case of *Schistosoma japonicum* in 1977. Control achieved through destroying snail environments



Image credit: WHO

**Sudan and Egypt (1979-1990):** tried to eliminate *Schistosoma haematobium* through sanitation, health education and snail control. Failed due to conflict.

**Sub-Saharan Africa (2003- present):** Reliance on mass drug administration with praziquantel. Low cost as drug is donated. National programs are often supported by international NGOs (charities).



# Mass Drug Administration (MDA)

- MDA is being used to eliminate schistosomiasis by 2025
  - 61 million treated in 2014 (out of ~260 million infected)
  - Evidence that MDA can reduce prevalence in low transmission settings (Burkina Faso)
  - Praziquantel generally safe / well tolerated

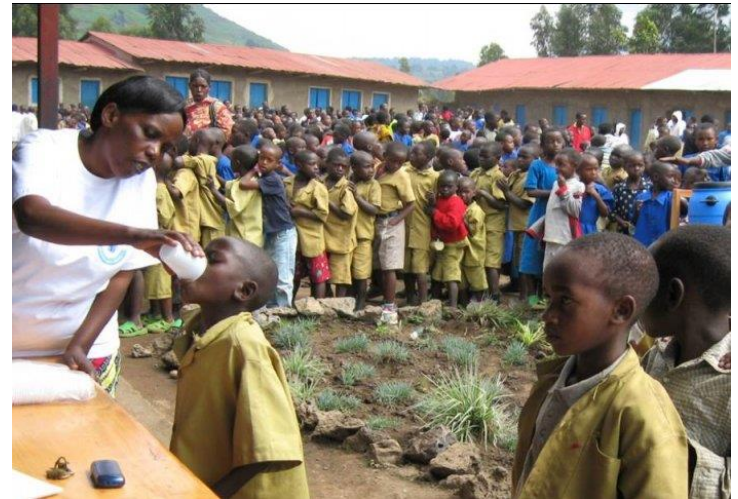
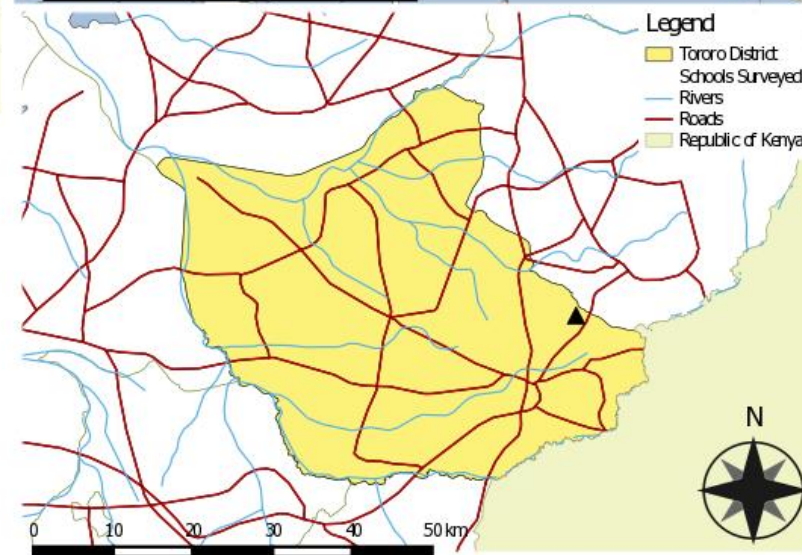
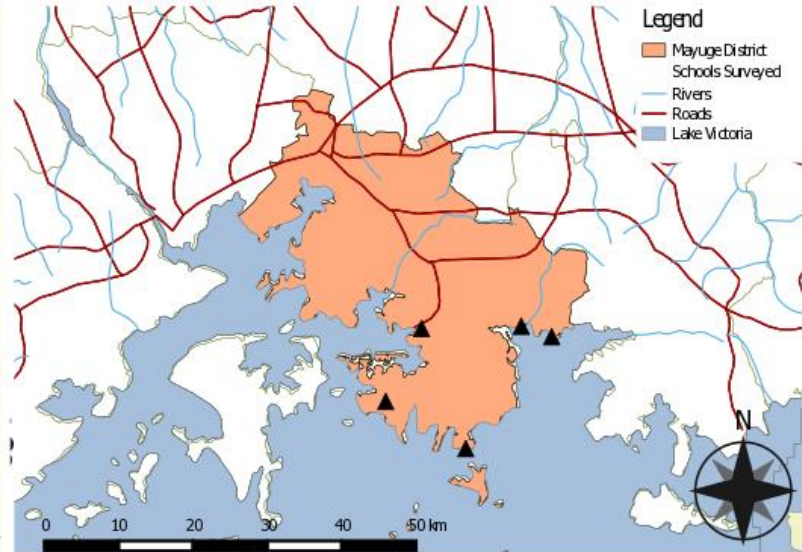
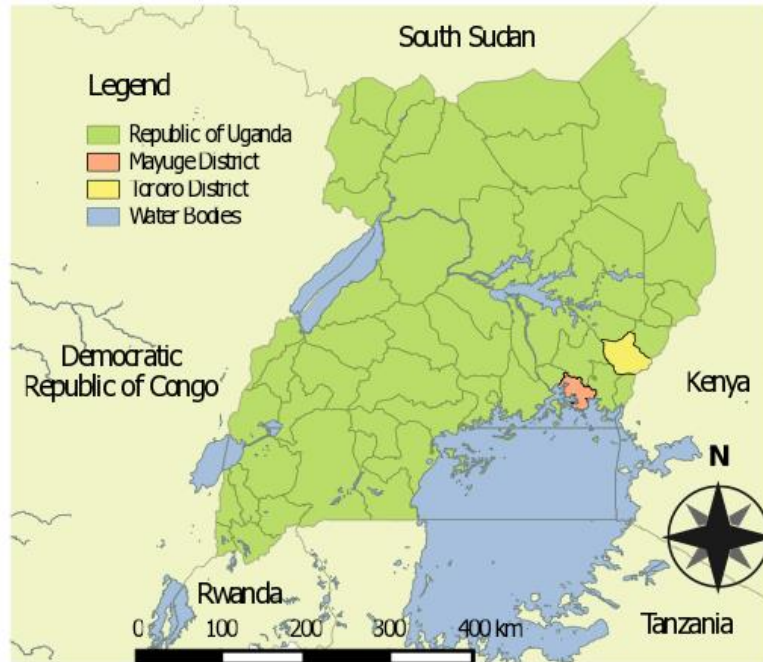


Image credits: The END Fund, Schistosomiasis Control Initiative

- **My research question – are repeated rounds of treatment leading to drug resistance or selection on the parasite genome?**

## Part 2) Epidemiological evidence for selection caused by MDA

# Sampling schools in Uganda



3 schools with 9 previous rounds of MDA (“High”)

2 schools with 5 previous rounds of MDA (“Medium”)

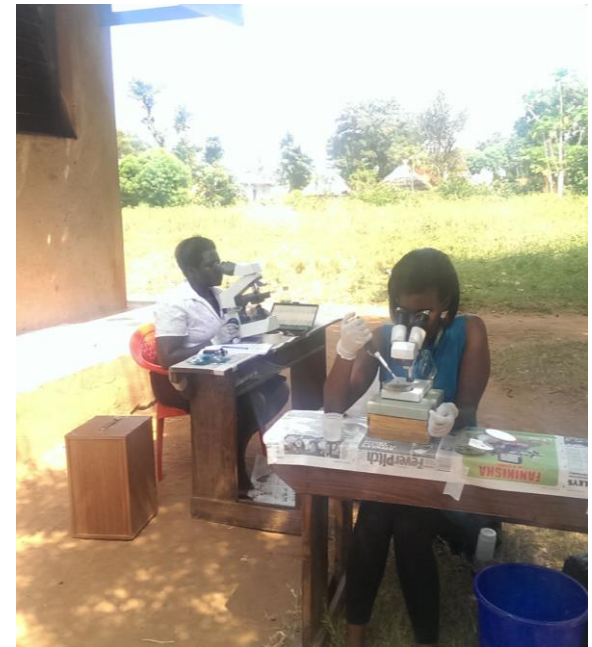
1 school with 1 previous rounds of MDA (“Low”)



# Sampling schools in Uganda



Image credits: Thomas Crellen

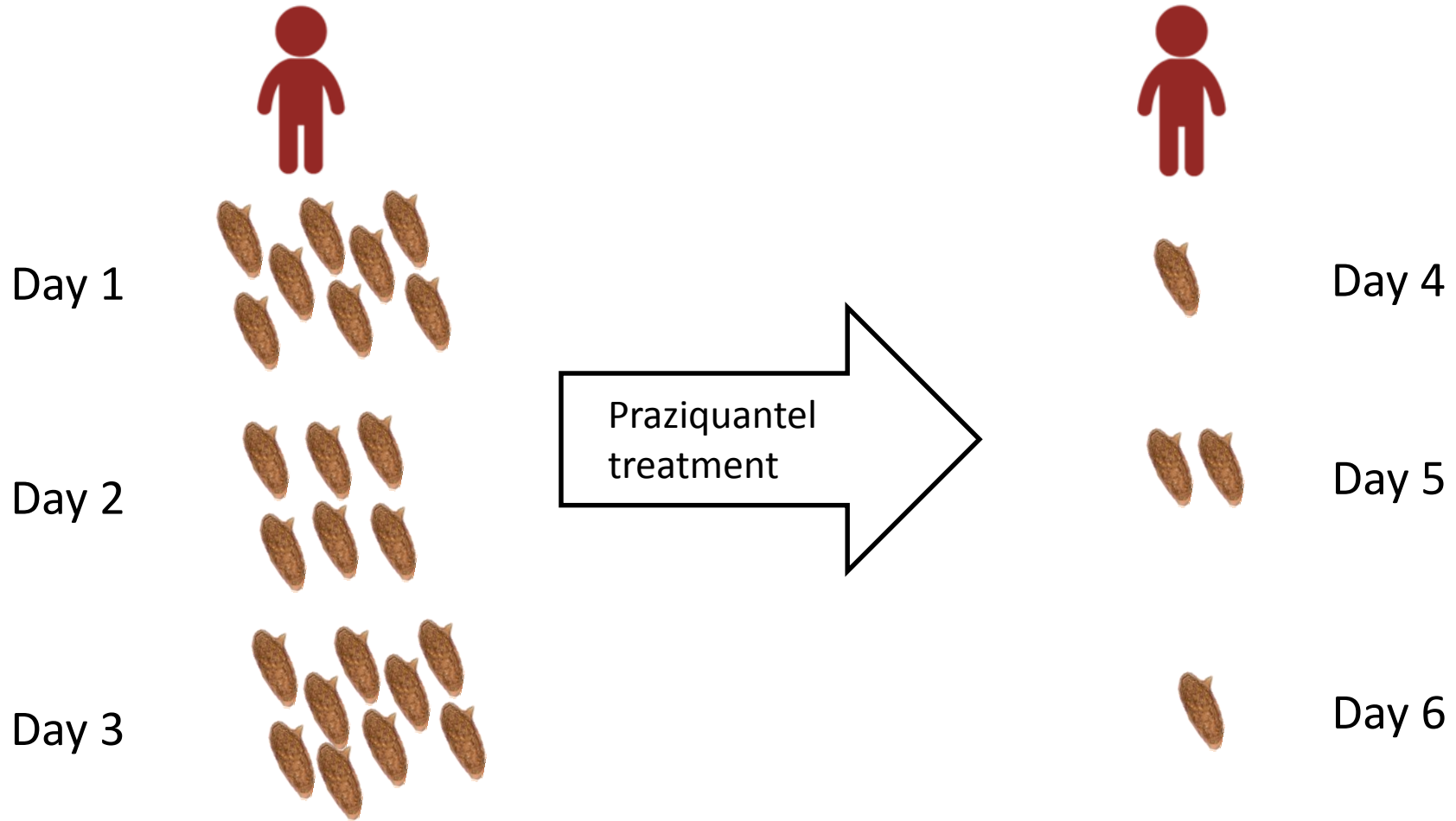


# Baseline prevalence and infection intensity

School	Recruited	Tested at Baseline	Positive for <i>S. mansoni</i> (%)	Mean EPG (95 % CI)
Bwondha	98	96	87 (90.63)	742 (518-973)
Bugoto	183	170	144 (84.71)	436 (339-534)
Musubi	128	127	120 (94.49)	465 (362-600)
Bukoba	120	118	53 (44.92)	92 (67-128)
Bukagabo	120	118	57 (48.31)	306 (197-442)
Kocoge	120	120	81 (67.50)	347 (245-456)
Total	769	749	542 (72.36)	382 (338-446)



# Statistical model for egg count reduction (1)



# Statistical model for egg count reduction (2)



# Hierarchical regression models

Statistical models that account for **repeated egg counts** and permit the estimate of egg count reduction to vary by **individuals, schools or MDA exposure** (random effects).

Review

CellPress

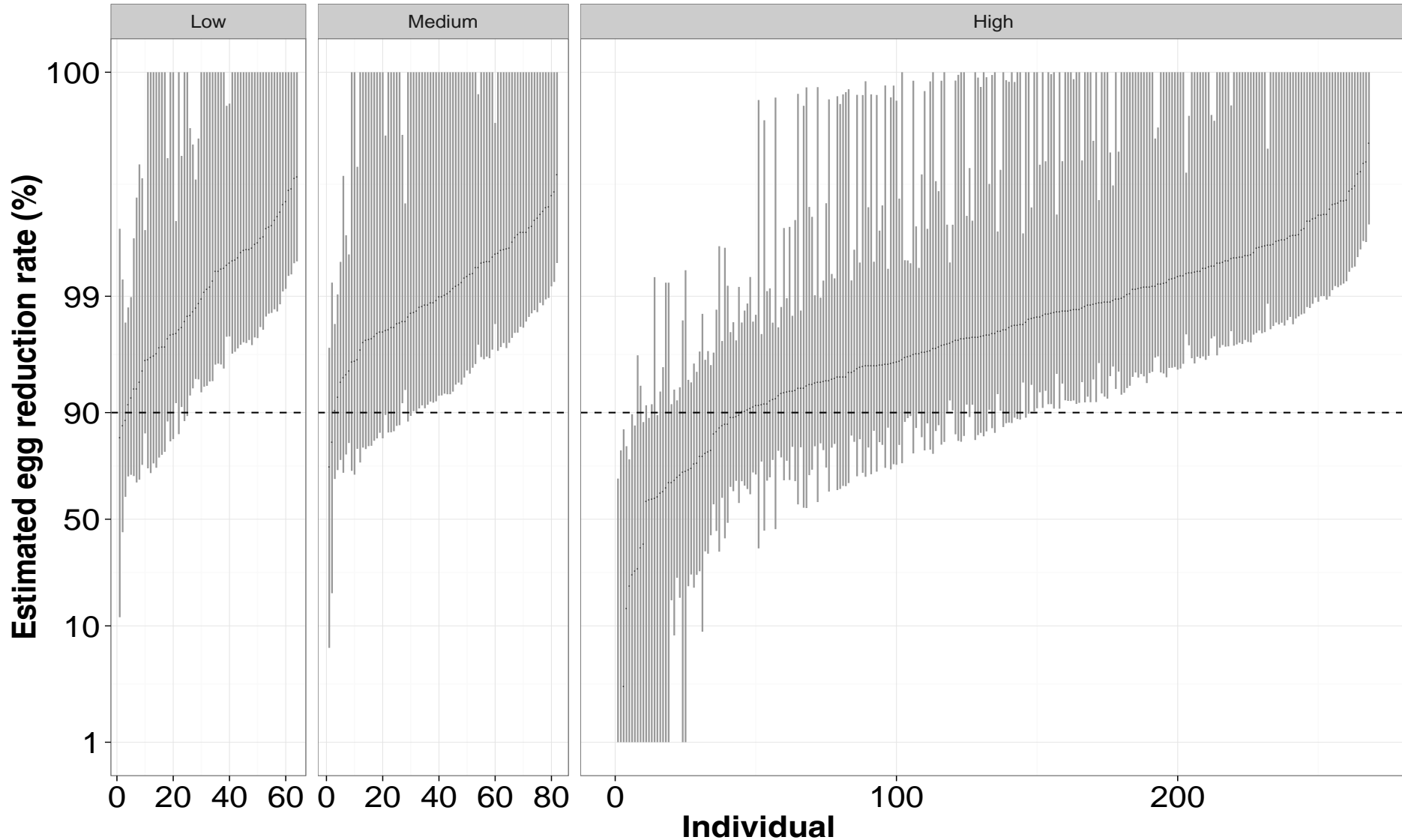
## Models for measuring anthelmintic drug efficacy for parasitologists

**Martin Walker, Thomas S. Churcher, and María-Gloria Basáñez**

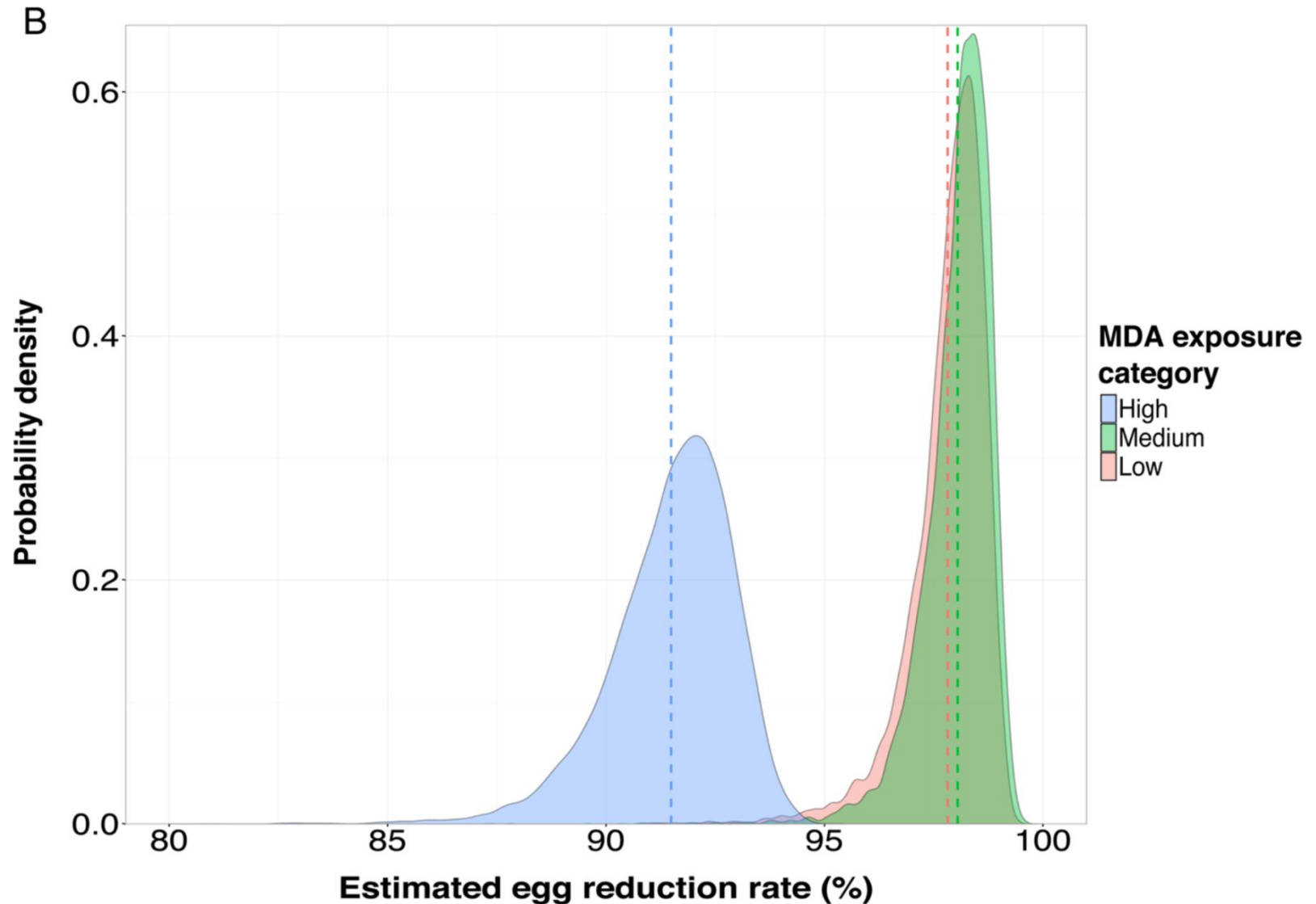
Department of Infectious Disease Epidemiology, London Centre for Neglected Tropical Disease Research, School of Public Health, Faculty of Medicine (St Mary's Campus), Imperial College London, Norfolk Place, London, W2 1PG, UK

*Trends in Parasitology* 2014 30:11

# Individual-level Egg Reduction by MDA category (414 patients)



# Posterior Distribution of Egg Reduction by MDA category





# Paper published 2016

*Clinical Infectious Diseases*

MAJOR ARTICLE



## Reduced Efficacy of Praziquantel Against *Schistosoma mansoni* Is Associated With Multiple Rounds of Mass Drug Administration

Thomas Crellen,<sup>1,2,3,a</sup> Martin Walker,<sup>1,a</sup> Poppy H. L. Lamberton,<sup>1,4</sup> Narcis B. Kabatereine,<sup>5</sup> Edridah M. Tukahebwa,<sup>5</sup> James A. Cotton,<sup>2</sup> and Joanne P. Webster<sup>1,3</sup>

<sup>1</sup>Department of Infectious Disease Epidemiology and the London Centre for Neglected Tropical Disease Research, Imperial College London, St Mary's Campus, <sup>2</sup>Wellcome Trust Sanger Institute, Hinxton, <sup>3</sup>Department of Pathology and Pathogen Biology, Royal Veterinary College, University of London, Hertfordshire, and <sup>4</sup>Institute of Biodiversity, Animal Health & Comparative Medicine and Wellcome Trust Centre for Molecular Parasitology, University of Glasgow, United Kingdom; and <sup>5</sup>Division of Vector Borne Diseases, Ministry of Health, Kampala, Uganda

**Background.** Mass drug administration (MDA) with praziquantel is the cornerstone of schistosomiasis control in sub-Saharan Africa. The effectiveness of this strategy is dependent on the continued high efficacy of praziquantel; however, drug efficacy is rarely monitored using appropriate statistical approaches that can detect early signs of wane.

**Methods.** We conducted a repeated cross-sectional study, examining children infected with *Schistosoma mansoni* from 6 schools in Uganda that had previously received between 1 and 9 rounds of MDA with praziquantel. We collected up to 12 *S. mansoni* egg counts from 414 children aged 6–12 years before and 25–27 days after treatment with praziquantel. We estimated individual patient egg reduction rates (ERRs) using a statistical model to explore the influence of covariates, including the number of prior MDA rounds.

# Part 3) Parasite genomic evidence for selection caused by MDA



- Collected >11,000 miracidia in Uganda
- Miracidia hatched from eggs in stool (process of washing and filtering stool)
- Miracidia picked by pipette and washed in “nuclease free water” before stored on FTA cards

# Generating whole-genome sequences

Miracidia collected on  
filter paper (binds DNA)

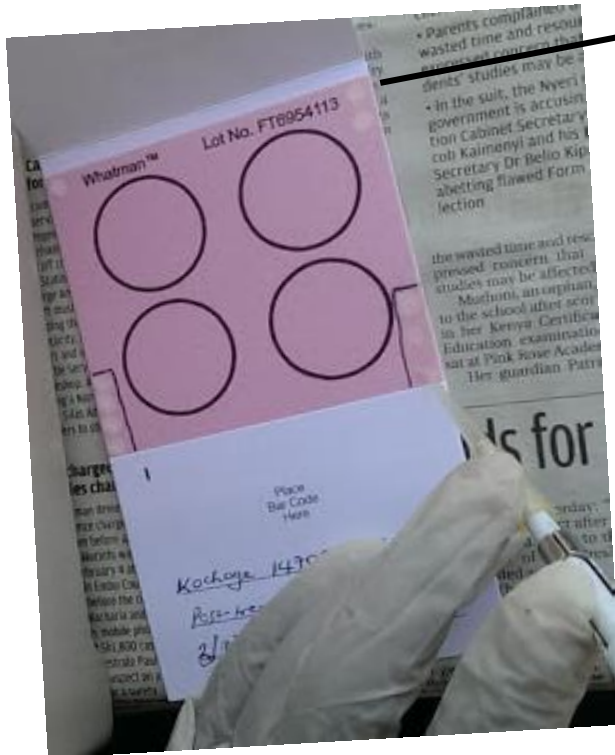


Image credit: Thomas Crellen

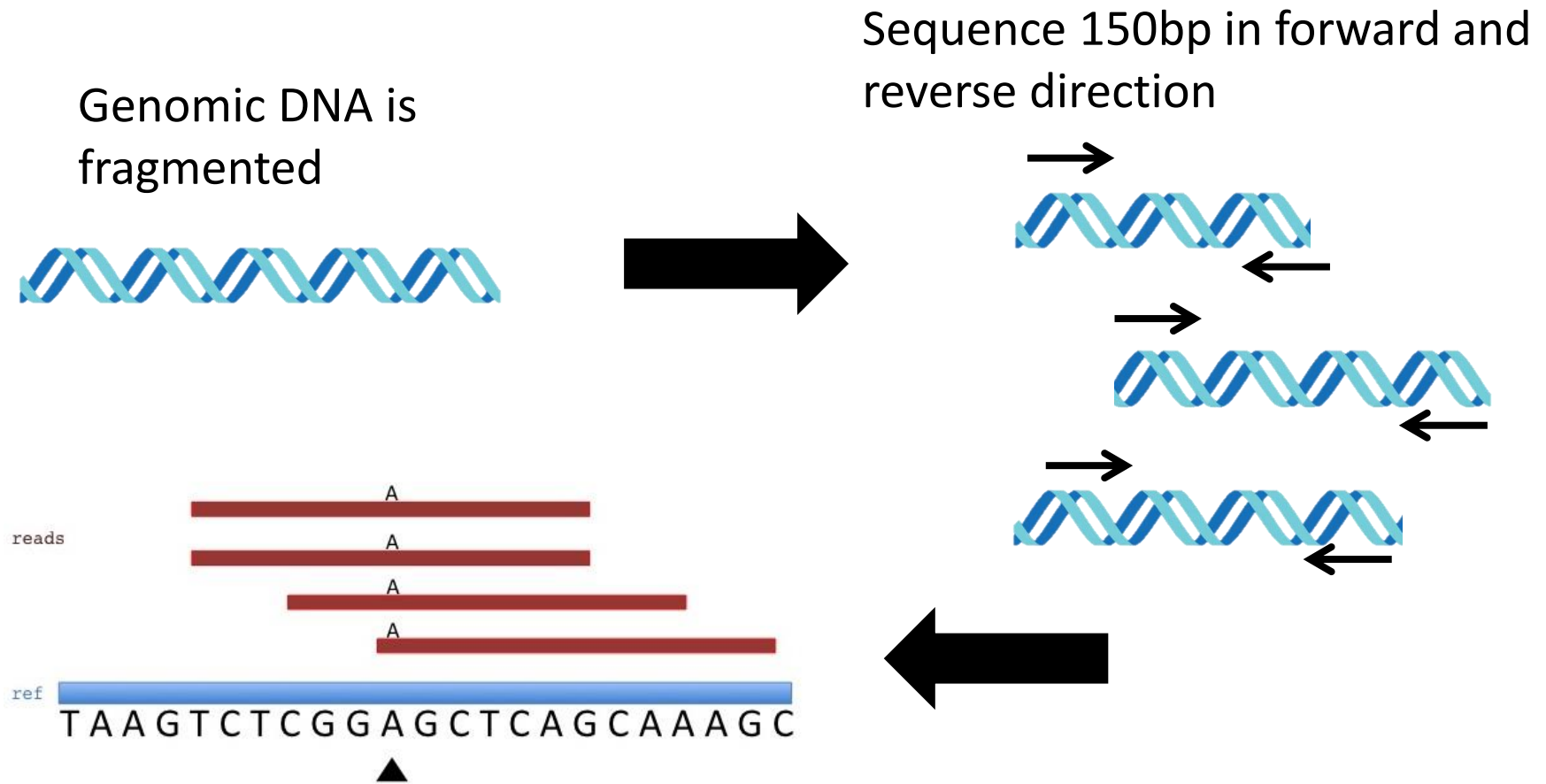
DNA extraction, purification  
and amplification

Preparation of DNA for “next  
gen” (Illumina) sequencing



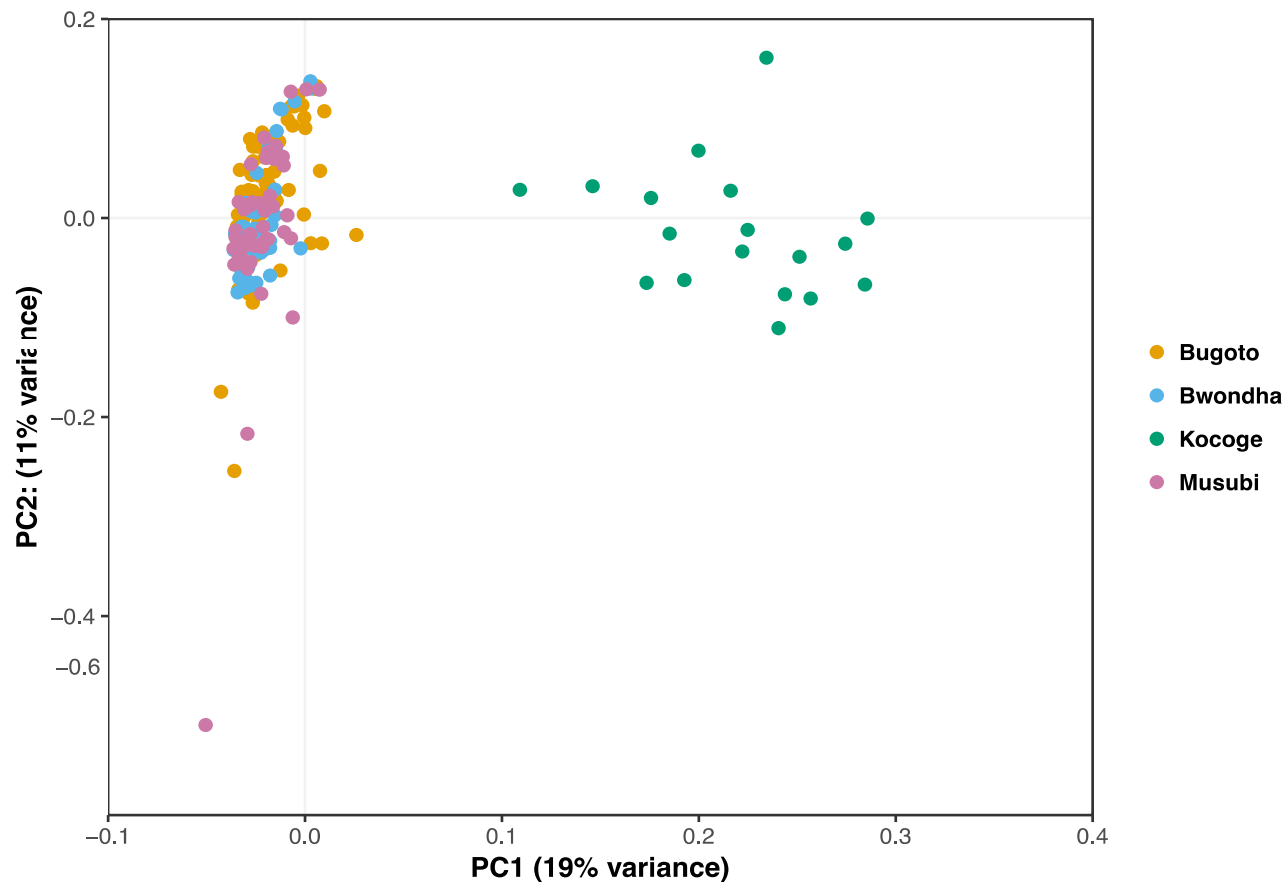
Image credit:  
Illumina

# Short read sequencing and bioinformatics



# Parasite population genomics

After filtering, we have ~4 million SNPs from 200 miracidia (taken from 38 individuals in 4 of the schools)

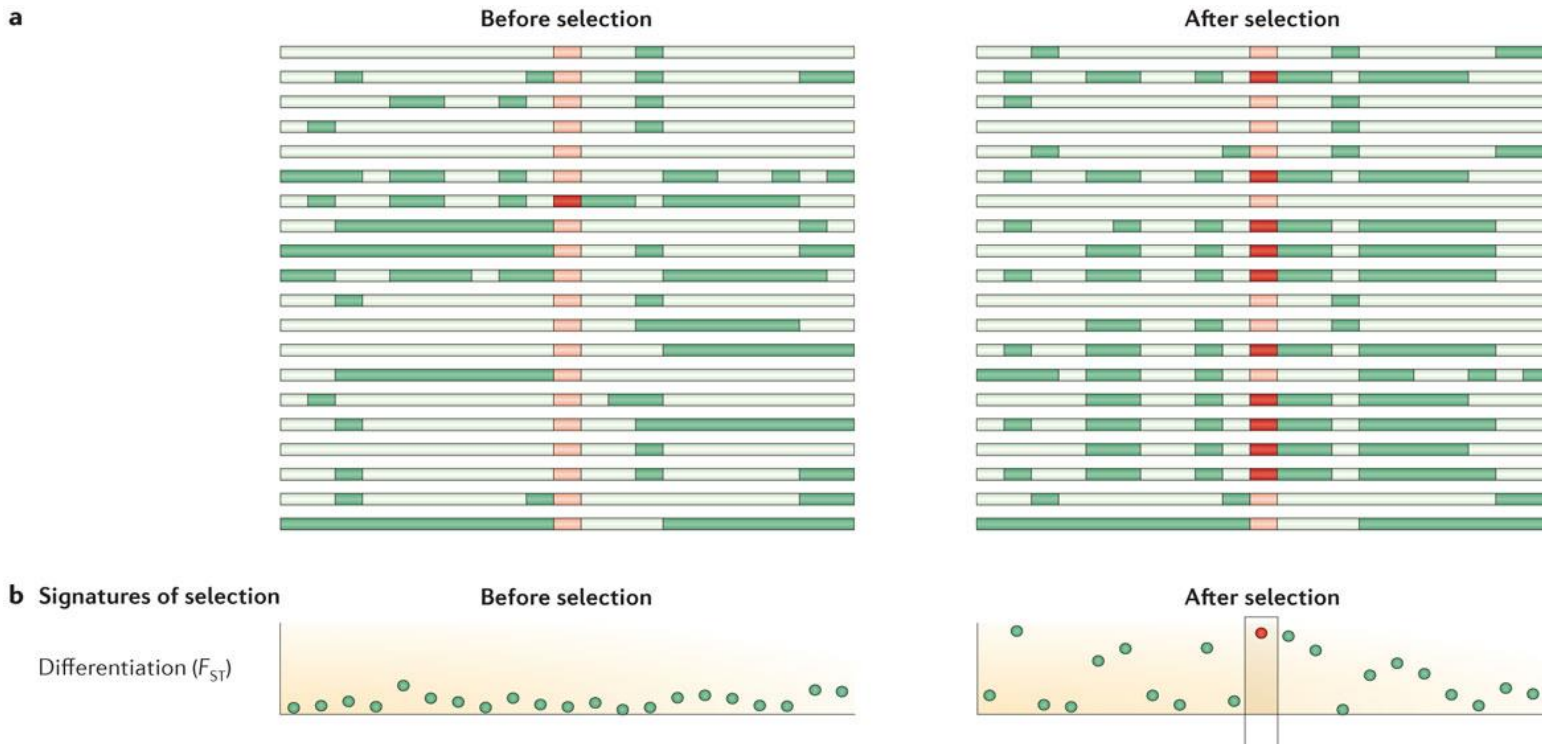


Unpublished data, Crellen, Berger et al.



# Testing for selection: Linkage Disequilibrium

In eukaryotic organisms (humans, *Plasmodium* etc) selection causes a reduction in diversity around the causal variant, which is gradually broken up by recombination



Karlsson, E.K., et al. 2014. Natural selection and infectious disease in human populations. *Nature Reviews Genetics*, 15(6), p.379.

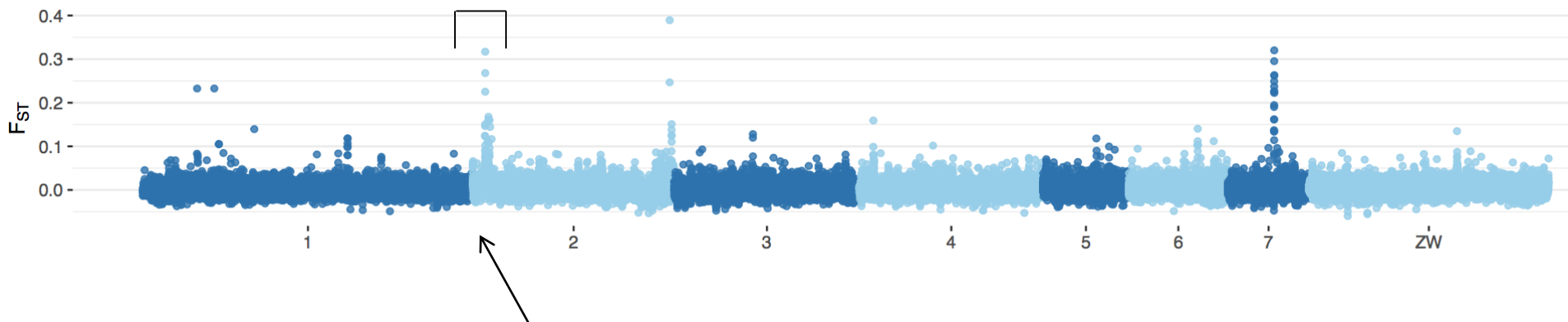
# Testing for selection: $F_{ST}$

$F_{ST}$  measures the differences between groups of samples along a genome

When  $F_{ST}$  is higher, this indicates an unusual region where selection may be occurring

We expect selection in miracidia from areas with high MDA pressure, but not in areas of low pressure

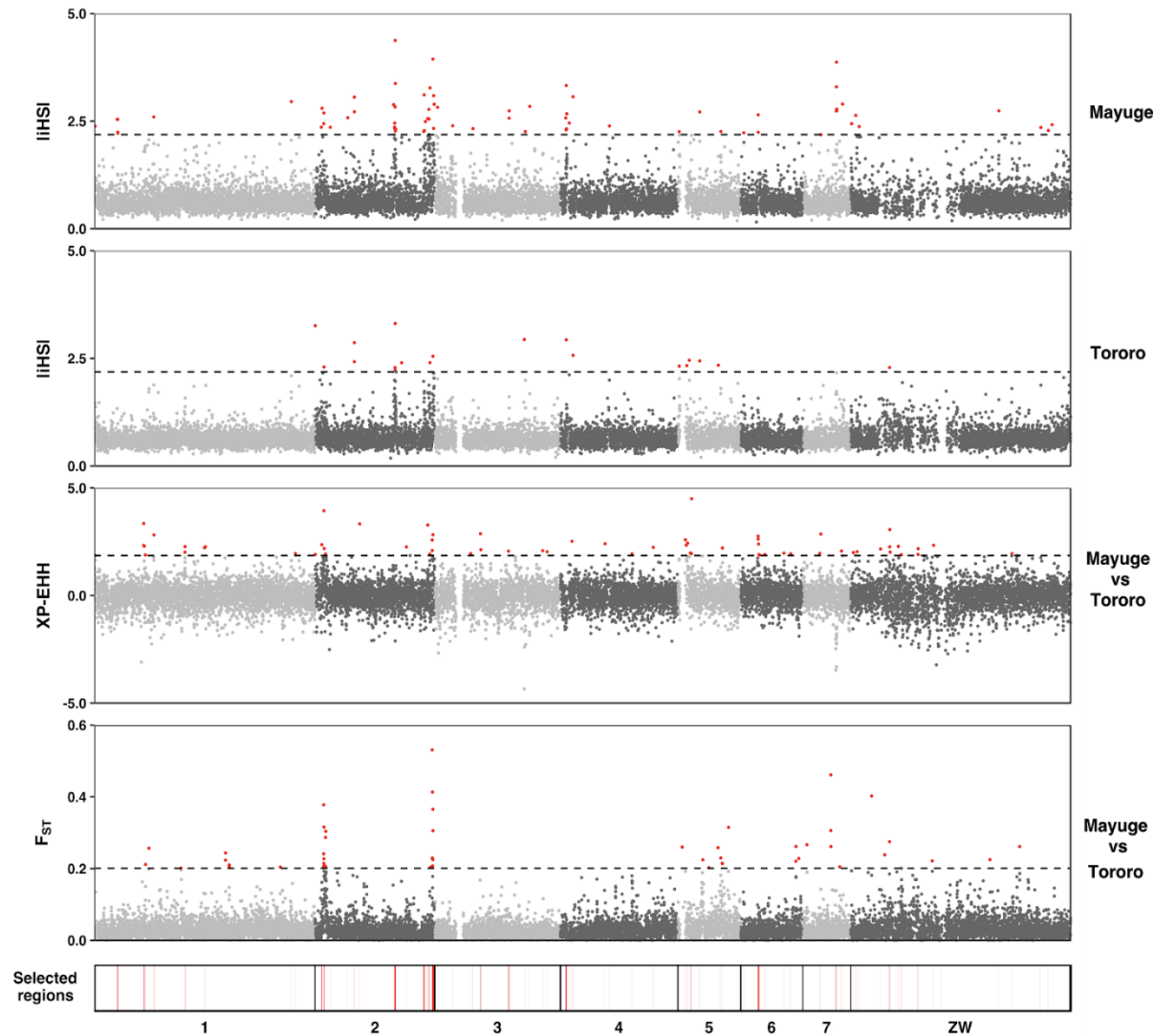
Each point represents an  $F_{ST}$  average from 100 SNPs



Unpublished data, Crellen, Berger et al.

This region contains a calcium transporter.  
Undergoing RNAi knockdown to determine function

# Testing for selection: Combining tests



Unpublished data, Crellen, Berger et al.

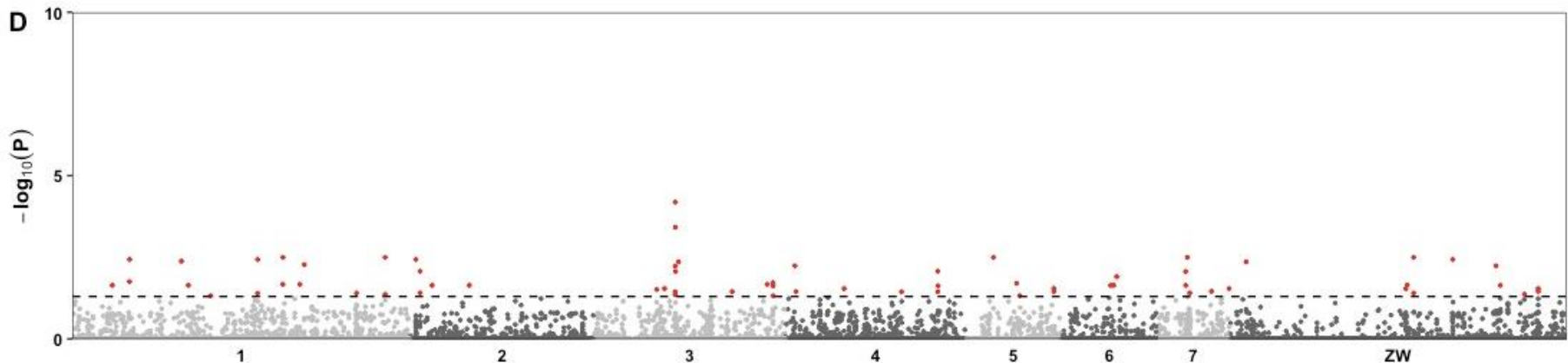
# Testing for association with egg reduction rate

An alternative is to measure the association between SNPs and a phenotype

Here we are associating variants with the egg reduction rate from the model

Also able to control for population structure. The y axis is  $-\log_{10}$  corrected  $p$  values (higher points = greater association with ERR). Each point is a SNP

A major challenge in interpretation is a lack of biological knowledge about gene function



Unpublished data, Crellen, Berger et al.

# Conclusions

- We observed prevalence of >90% and high infection intensity in schools that have been treated 9 times with MDA
  - Suggests additional strategies (sanitation, snail control) will be necessary to halt transmission
- A statistical model of egg count reduction showed that schools with higher previous MDA have significantly lower reduction rates
  - Provides evidence for emerging resistance to praziquantel
- Genomic evidence has shown signals of selection along the genome and SNPs correlated with egg reduction rate
  - These are potential candidates for praziquantel resistance and are being followed up by functional analysis (RNAi)



# Acknowledgements

**Imperial College**  
London

David Aanenson  
Poppy Lamberton



Joanne Webster  
Martin Walker



James Cotton  
Matthew Berriman  
Nancy Holroyd  
Hayley Bennett  
Duncan Berger  
Alan Tracey  
Gabriel Rinaldi



Fiona Allan



THE REPUBLIC OF UGANDA  
MINISTRY OF HEALTH

Edridah Tukahebwa  
Narcis Kabatereine  
Fieldwork team

