

Article

Criticality and information dynamics in epidemiological models

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Abstract: Understanding epidemic dynamics has always been a challenge. As witnessed from the ongoing Zika or the seasonal Influenza epidemics, we still need to improve our analytical methods to better understand and control epidemics. While the emergence of complex sciences in the turn of the millennium have resulted in their implementation in modelling epidemics, there is still a need for improving our understanding of critical dynamics in epidemics. In this study, using agent-based modelling, we simulate a Susceptible-Infected-Susceptible (SIS) epidemic on a homogeneous network. We use transfer entropy and active information storage from information dynamics framework to characterise the critical transition in epidemiological models. Our study shows that both (bias-corrected) transfer entropy and active information storage maximise after the critical threshold ($R_0 = 1$). This is the first step toward an information dynamics approach to epidemics. Understanding the dynamics around the criticality in epidemiological models can provide us insights about emergent diseases and disease control.

Keywords: epidemiology; criticality; information dynamics; phase transitions; agent-based simulation

1. Introduction

The mathematical modelling of epidemics dates back to mid-18th century [1], while it was Kermack and McKendrick [2] who studied Susceptible-Infected-Recovered (SIR) model, being the first to use the formal models of epidemics, known generally as compartmental mean-field models [3]. In these models, the population is categorised into distinct groups, depending on their infection status: susceptible individuals are the ones who has never had the infection and can have it upon contact with infected individuals, infected individuals have the infection and can transmit it to the susceptible individuals, and recovered individuals are those have recovered from the infection and are immune since then. This baseline model is captured mathematically by the following set of ODEs:

$$\frac{dS}{dt} = -\beta SI \quad (1)$$

$$\frac{dI}{dt} = \beta SI - \gamma I \quad (2)$$

$$\frac{dR}{dt} = \gamma I \quad (3)$$

16 where β is the transmission rate, γ is the recovery rate, and S , I and R are the number (or proportion)
 17 of susceptible, infected and recovered individuals respectively. These equations can be further
 18 modified to account for various other factors (e.g. pathogen-induced mortality) by the inclusion of
 19 more parameters in the ODEs, or they can be adapted to reflect different infectious dynamics (e.g.,
 20 waning immunity).

21 Compartmental mean-field models are simplistic: for instance, they do not account for the
 22 contact structure in the population, which can influence epidemic dynamics (e.g. [4,5]). However,
 23 they were crucial in understanding the epidemic threshold: an epidemic with the dynamics as
 24 described in equations 1–3 can invade a population only if the initial fraction of the susceptible
 25 population is higher than γ/β [2,3,6]. The inverse of this value is called ‘basic reproductive ratio’
 26 (R_0) which is defined as “the expected number of secondary cases produced by a typical infected
 27 individual during its entire infectious period, in a population consisting of susceptibles only” [7]. An
 28 infection will cause an epidemic only if $R_0 > 1$ (*endemic equilibrium*) and will die out if $R_0 < 1$
 29 (*disease-free equilibrium* or *extinction*) [8]. This is rather intuitive: if each individual transmits the
 30 disease to less than one other individual on average, the infected individuals will be removed from
 31 the population (for instance, due to recovery) faster than they transmit the disease to the susceptible
 32 individuals [9]. However, due to the occurrence of repeated contacts taking place between a typical
 33 infective individual and other individuals already infected before, R_0 may overestimate the average
 34 number of secondary infections, and so more exact measures may sometimes be required [10].

35 The epidemic threshold is a well-known result in epidemiology, and can be related to the
 36 concepts of phase transitions and critical thresholds in statistical physics [11]. A phase transition
 37 is “a sharp change in the properties (state) of a substance (system)” that happens when “there is
 38 a singularity in the free energy or one of its derivatives” and occurs through changing a control
 39 parameter λ [11,12]. It is observed in various systems, such as fluid or magnetic phase transitions
 40 [12]. The phases are distinguished by the order parameter ρ , which is typically zero in one phase and
 41 attains a non-zero value in the other [11]. When the control parameter takes the value λ_c , known as
 42 critical point, the phase transition occurs such that when $\lambda \leq \lambda_c$, $\rho = 0$ while $\lambda > \lambda_c$, $\rho > 0$ [11].
 43 For instance, in the case of liquid-gas transition, the difference between the densities of liquid and
 44 gas becomes zero as the temperature increases above the critical temperature [12]. Relating back to
 45 the analogy in epidemiology, we see that an epidemic occurs only if $R_0 > 1$, as shown in Figure 1.
 46 The control parameter, in this case, is R_0 , while $\lambda_c = 1$ and the order parameter is the final size of the
 47 epidemic (which can alternatively be the density of the infected individuals or prevalence [11]).

48 The basic reproductive ratio is widely used for modelling, predictions and control of epidemics
 49 (see [9] for examples). Furthermore, understanding the dynamics when a pathogen is near the
 50 epidemic threshold is crucial. A maladapted pathogen with $R_0 < 1$ can cause an epidemic if its
 51 R_0 exceeds 1 (due to, for instance, mutations or changes in the host population), which is how new
 52 pathogens can emerge by crossing the species barrier [13]. From a phase transition point-of-view, [14]
 53 have studied the change in epidemiological quantities while approaching the critical point, in order to
 54 see if they can be used for anticipating the emergence of criticality and potential elimination of such
 55 dynamics. Their results suggest that theoretically, we can predict critical thresholds in epidemics
 56 [14], which could be of a substantial value in health care. In practice, one of the challenges lies in
 57 pinpointing such critical thresholds in finite-size systems, where a precise identification of phase
 58 transitions requires an estimation of the rate of change of the order parameter, often from finite and/or
 59 distributed data [15,16].

60 Information dynamics [17–21] is a recently-developed framework based on information theory
 61 [22], which shows promise in characterising phase transitions in dynamical systems. For instance,
 62 in studies of the order-chaos phase transitions in random Boolean networks (driven by changes in

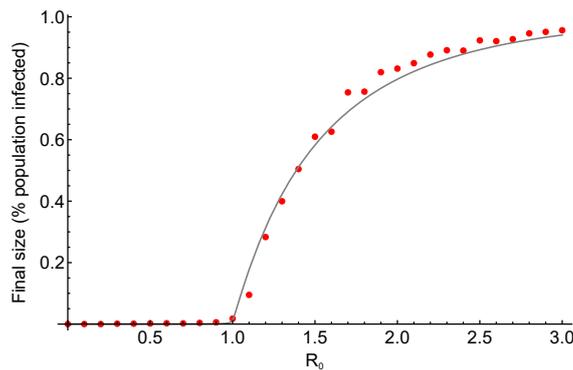


Figure 1. Epidemic phase transition. Final size of an epidemic as a function of its basic reproductive ratio R_0 , for an SIR model with a homogeneous network structure, with a number of connections (k) of 4 for each individual. Transmission rate β varies between 0 and 3 with recovery rate $\gamma = 1$, resulting in R_0 ranging between 0 and 3. The line depicts the analytical results whereas the red dots show the results from stochastic simulations with a population size of 10^4 . The epidemic does not occur for $R_0 < 1$, whereas the final size increases as a function of R_0 for values higher than 1. The analytical results and the simulations are in good agreement.

63 activity [23] and/or network structure [24]), information storage has been shown to peak just on
 64 the ordered side, whereas information transfer was found to maximise on the other (chaotic) side of
 65 the critical threshold. Information transfer, from a collection of sources, has also been measured to
 66 peak prior to the phase transition in the Ising model, when the critical point is approached from the
 67 disordered (high-temperature) side [25]. And similarly, both information storage and transfer were
 68 measured to be maximised near the critical state in echo-state networks (a type of recurrent neural
 69 network) [47], where such networks are argued to be best placed for general-purpose computation.

70 Furthermore, one of the features of complex computation is a coherent information structure
 71 defined as a pattern appearing in a state-space formed by information-theoretic quantities, such
 72 as transfer entropy and active information storage [26]. The “information dynamics” state-space
 73 diagrams are known to provide insights which are not immediately visible when the measures are
 74 considered in isolation [27]. For example, critical spatiotemporal dynamics of Cellular Automata
 75 (CA) were characterised via state-space diagrams formed by transfer entropy and active information
 76 storage. These state-space diagrams highlighted how the complex distributed computation carried
 77 out by CA interlinks the communication and memory operations [26].

78 Local information dynamics were also shown to have maxima that relate to the spread of
 79 cascading failures in energy networks [28]. We, therefore, expect that this framework will prove
 80 to be applicable not only to explaining epidemic dynamics around the critical threshold, but also
 81 in developing new predictive methods during emergence of diseases, evolution of pathogens and
 82 spillage from zoonotic reservoirs, as well as applications of stochastic epidemiological models to
 83 computer virus spreading and other similar scenarios [29].

84 Here we study the phase transition in a SIS model of epidemics using the information dynamics
 85 framework. We model a homogeneous network where a pathogen can spread through contact
 86 between the neighbours. Changing the transmissibility of the pathogen between different realisations
 87 of the same network while keeping the recovery rate fixed, we use basic reproductive ratio as the
 88 control parameter. We track the prevalence of the infection as our order parameter and use the
 89 infection status of individuals to calculate the transfer entropy and active information storage.

90 2. Materials and Methods

91 2.1. Model description

92 We focus on Susceptible-Infected-Susceptible (SIS) dynamics [30] which were originally defined
93 using the following ODE mean-field model:

$$\frac{dS}{dt} = -\beta SI + \gamma I \quad (4)$$

$$\frac{dI}{dt} = \beta SI - \gamma I \quad (5)$$

94 where β is the transmission rate, γ is the recovery rate.

95 As described in Section 1 however, such ODE models do not account for contact structure in
96 the population, and so we use the following network model. We simulate a population of $N = 10^4$
97 individuals, where each is connected to four neighbours (randomly selected from the network), and
98 assume the network is undirected. Susceptible (S) individuals can become infected through contact
99 with their infected (I) neighbours with transmission rate β and infected individuals can recover with
100 recovery rate γ . Each individual has the same rate of transmission and recovery. We scale the
101 transmission rate by c to calculate per contact transmission rate in the event-based simulations. It
102 is a closed population, therefore for the total population $S(t) + I(t) = N$. Also, we assume there
103 is no mortality due to infection and N remains constant through the simulations (i.e. we neglect
104 births and deaths in the population). At the beginning of the simulation one random individual gets
105 infected and the epidemiological process is simulated using the Gillespie's Direct Algorithm [31].
106 For each parameter set (summarised in Table 1), we ran either 500 replicates or 10 complete runs
107 (i.e. simulations that ran for 10^3 time steps), depending on whichever is attained first. We binned
108 the continuous time to discrete time steps for our information dynamic analysis and recorded the
109 infectious status of each individual and their four neighbours once in every time step.

Table 1. Simulation parameters

Parameter	Value
Time steps (t)	10^3
Population size (N)	10^4
Number of contacts	4
Transmission rate (μ)	0.7-2.0 (with step size 0.1)
Coefficient for per contact transmission rate (c)	0.33..
Recovery rate (μ)	1.0

110 2.2. Information dynamics

Disease spreading could be considered as a computational process by which a population "computes" how far a disease will spread, and what the final states (susceptible or recovered) of the various individuals will be once the disease has run its course. The framework of local information dynamics [17–21] studies how information is intrinsically processed within a system while it is "computing" its new state. Specifically, the information dynamics framework measures how information is stored, transferred and modified within a system during such a computational process. It is a recently-developed framework, based on information theory [22], and involving a well-established quantity for measuring the uncertainty of a random variable X , known as Shannon entropy, which is written as:

$$H(X) = - \sum_{i=1}^N p_i \log p_i \quad (6)$$

111 where p_i is the probability that X takes the state i . This quantity has been used to derive other
 112 measures such as joint entropy, which quantifies uncertainty of joint distribution of random variable
 113 X and Y , or mutual information, which is the expression of the amount of information that can be
 114 acquired concerning one random variable by observing another [32].

115 Once we begin to consider how to predict disease spread, we naturally turn to measuring
 116 uncertainties and uncertainty reduction using information theory. Information theory has previously
 117 been used to study the uncertainty (and conversely, the predictability) of disease spreading dynamics
 118 using the permutation entropy of the total number of infections in the population [33]. Another
 119 related study analysed the dynamics of an infectious disease spread by formulating the maximum
 120 entropy solutions of the SIS and SIR stochastic models, exploiting the advantage offered by the
 121 Principle of Maximum Entropy in introducing the minimum additional information beyond what
 122 is implied in the original available mean constraints [34].

123 Our investigation will focus on measuring information dynamics of an epidemic process within
 124 the population, seeking to relate the spread of the disease to information-processing (computational)
 125 primitives such as information storage and transfer. Moreover, while these quantities are defined for
 126 studying averages over all observations, the corresponding local measures – specific to each sample
 127 of a state i of X – can provide us with more suitable tools to study phase transitions in finite-size
 128 systems (e.g. [35]).

The information dynamics framework quantifies information transfer, storage and modification, and focusses on their local dynamics at each sample. Information storage is defined as “the amount of information in [an agent’s] past that is relevant to predicting its future” while the local active information storage [19] is the local mutual information between an agent’s next state (x_{n+1}) and its semi-infinite past $x_n^{(k)}$ expressed as:

$$a_x(n+1) = \lim_{k \rightarrow \infty} \log \frac{p(x_n^{(k)}, x_{n+1})}{p(x_n^{(k)})p(x_{n+1})}. \quad (7)$$

The average active information storage is the expectation value over the ensemble:

$$A_X = \langle a_x(n+1) \rangle. \quad (8)$$

On the other hand, information transfer is defined via the transfer entropy [36] as the information provided by the source about the destination’s next state in the context of the past of the destination [23], whereas local information transfer from a source Y to a destination X is “the local mutual information between the previous state of the source and the next state of the destination conditioned on the semi-infinite past of the destination”, expressed as:

$$t_{y \rightarrow x}(n+1) = \lim_{k \rightarrow \infty} \log \frac{p(x_{n+1}|x_n^{(k)}, y_n)}{p(x_{n+1}|x_n^{(k)})} \quad (9)$$

following [17]. The (average) transfer entropy is the expectation value of the local term over the ensemble:

$$T_{Y \rightarrow X} = \langle t_{y \rightarrow x}(n+1) \rangle. \quad (10)$$

129 Transfer entropy was recently analysed on SIS dynamics (generated on brain network structures) in
 130 order to investigate information flows on different temporal scales [48].

In order to determine which embedding length k is most suitable for our analysis, we seek to set k so as to maximise the average active information storage, as per the criteria presented in [37]. Importantly though, for this criteria to work we need to maximise the *bias-corrected* active information storage rather than its raw value. Bias-correction pertains to removing the bias in our estimation of A_X , i.e. the systematic over- or under-estimation of that quantity as compared to the true value.

Typically, as a mutual information quantity, A_X will be overestimated from a finite amount of data, particularly when our embedding length k starts to increase the dimensionality of our state space beyond a point that we have adequately sampled. We can estimate this bias by computing the mutual information between surrogate variables with the same distribution as those we originally consider, but without their original temporal relationship to each other [38]. For A_X , one surrogate measurement A_X^s is made with a shuffled version of the x_{n+1} samples (but keeping the $x_n^{(k)}$ samples fixed), and then repeating to produce a population of surrogate measurements. We label the mean of these surrogate measurements $\overline{A_X^s}$, and our effective or bias-corrected active information storage as:

$$A'_X = A_X - \overline{A_X^s}. \quad (11)$$

Subtracting out bias using surrogates was proposed earlier for the transfer entropy as the “effective transfer entropy” [39], simply referred to as “bias-corrected transfer entropy” here. Computing the bias-corrected transfer entropy $T'_{Y \rightarrow X}$ is performed in a similar fashion to A'_X : first, surrogates $T^s_{Y \rightarrow X}$ are computed using a shuffled version of the source samples y_n while holding the destination time series fixed (to retain the destination past–next relationship via $p(x_{n+1}|x_n^{(k)})$), then the mean of the surrogate measurements $\overline{T^s_{Y \rightarrow X}}$ is computed, before computing the effective or bias-corrected transfer entropy as:

$$T'_{Y \rightarrow X} = T_{Y \rightarrow X} - \overline{T^s_{Y \rightarrow X}}. \quad (12)$$

131 To perform the information dynamics calculations in this study we used the Java Information
132 Dynamics Toolkit (JIDT) [38].

133 2.3. Measuring information dynamics in the SIS model

134 We analysed three simulation runs of the SIS model for each parameter combination and
135 required these runs to be at least 14 time steps of length for $R_0 \leq 1.0$ (as these runs did not have
136 sustained transmission of infection for 10^3 time steps, 14 being the number of time steps in the third
137 longest run for $R_0 = 0.7$).

138 We used the past and current status of individuals (1 if infected, 0 if susceptible) and that of
139 their neighbours at a given time to determine x_{n+1} , y_n , and the $x_n^{(k)}$ vectors for calculations of active
140 information storage and transfer entropy. For instance, if the focal individual is infected and its
141 neighbours are all susceptible at a given time, then x_n was equal to one and y_n was equal to zero
142 for all the neighbours. We then calculated the individual’s local transfer entropy by averaging the
143 pairwise transfer entropy (with a given k) between itself and each of its neighbours. We then averaged
144 the local transfer entropy across the population to determine the average transfer entropy. For active
145 information storage, we calculated the local values for each individual (with a given embedding
146 length k) and averaged these across all the individuals in the population.

147 To determine the value of k to use, we calculated the bias-corrected active information storage
148 as per equation 11 for each run, and then averaged the values across runs for each R_0 . Subsequently,
149 we calculated the mean for each embedding length k across all R_0 values. The bias-corrected active
150 information storage maximises for $k = 7$ (Figure 2) and decreases sharply after $k = 8$. As such,
151 applying the criteria discussed above, we select $k = 7$ for the embedding length to be used.

152 3. Results and Discussion

153 In our simulations, the epidemic dies out without any sustained transmission when $R_0 < 1.0$,
154 whereas the number of infected individuals reaches an equilibrium when $R_0 > 1.0$, and the epidemic
155 becomes endemic in the population. We use the mean number of infected individuals throughout the
156 simulation runs to calculate the prevalence for each R_0 value, shown in Figure 3.

157 The average transfer entropy is highest after the critical transition (in the supercritical regime),
158 as shown in Figure 3, reaching its peak at $R_0 = 1.8$ for $k = 7$. This result aligns well with the peak in

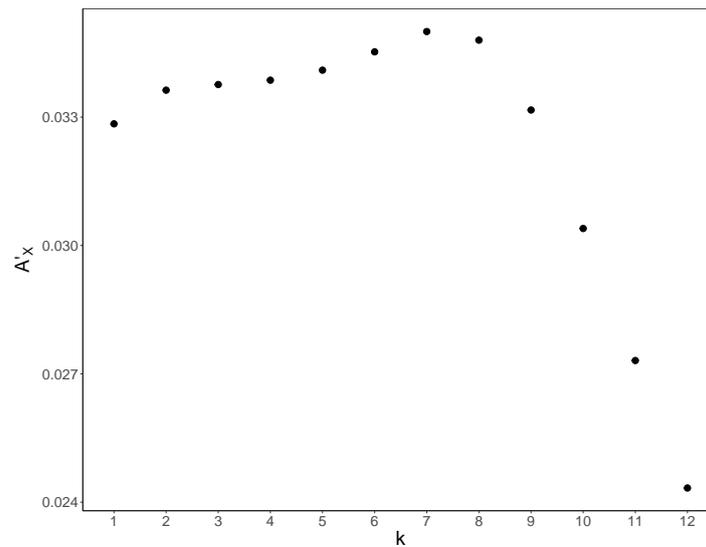


Figure 2. Bias-corrected active information storage A'_X in our simulations as a function of embedding length k . A'_X was calculated and then averaged for all three replicates for each R_0 . The mean value (shown in y-axis) was then determined for each k (shown in x-axis) across the R_0 values. The difference increases as the k increases, maximising at $k = 7$, and decreasing subsequently.

159 (collective) transfer entropy slightly in the super-critical regime in the Ising model [25]. In alignment
 160 with results in the Ising model, here once the disease dynamics reach criticality, we observe strong
 161 effects of one individual on a connected neighbour (measured by the transfer entropy). However,
 162 as the dynamics become supercritical, the target neighbour becomes more strongly bound to all of
 163 its neighbours collectively, and it becomes more difficult to predict its dynamics based on a single
 164 source neighbour alone; as such, the transfer entropy begins to decrease. We also note that the peak
 165 in average transfer entropy shifts toward lower R_0 values when the embedding time is shorter (not
 166 shown).

167 We see that (raw or non-bias-corrected) average active information storage A_X increases after
 168 the critical transition, reaching to its peak at $R_0 = 1.3$ (Figure 3).

169 To check whether what we observe for $T_{Y \rightarrow X}$ and A_X was a real effect or due to increased bias as
 170 the time-series activity increased (with R_0), we examined the bias-corrected average transfer entropy
 171 $T'_{Y \rightarrow X}$ and average active information storage A'_X . This is shown in Figure 4 for embedding length
 172 $k = 7$. The bias-corrected average active information storage shows a similar pattern to A_X , however
 173 with a sharper peak closer $R_0 = 1.2$ to the phase transition. This shows that most of what was
 174 measured as A_X at larger R_0 values was indeed due to increased bias. This is even more striking
 175 for the bias-corrected transfer entropy, as we observe a sharp peak at $R_0 = 1.2$, similar to A'_X and
 176 much earlier than $T_{Y \rightarrow X}$ ($R_0 = 1.8$). Therefore, these results suggest that once the disease dynamics
 177 reach criticality, the state of each individual first exhibits a large amount of self-predictability from its
 178 past (information storage). However, as the dynamics become supercritical, the increasingly chaotic
 179 nature of the interactions are reflected in the subsequent decrease in self-predictability.

180 We argue that the transfer entropy captures the extent of the distributed communications of the
 181 network-wide computation underlying the epidemic spread, while the active information storage
 182 corresponds to its distributed memory. Crucially, the peak of both these information-processing
 183 operations (measured with the bias correction) occurs at $R_0 = 1.2$, rather than the canonical $R_0 = 1.0$.
 184 As mentioned earlier, previous studies of distributed computation and its information-processing
 185 operations [23–26], concluded that the active information storage peaks just on the ordered side,
 186 while transfer entropy maximises on the disordered side of the critical threshold. Therefore, in our
 187 case, it may be argued that the concurrence of both bias-corrected peaks, as detected by the maximal

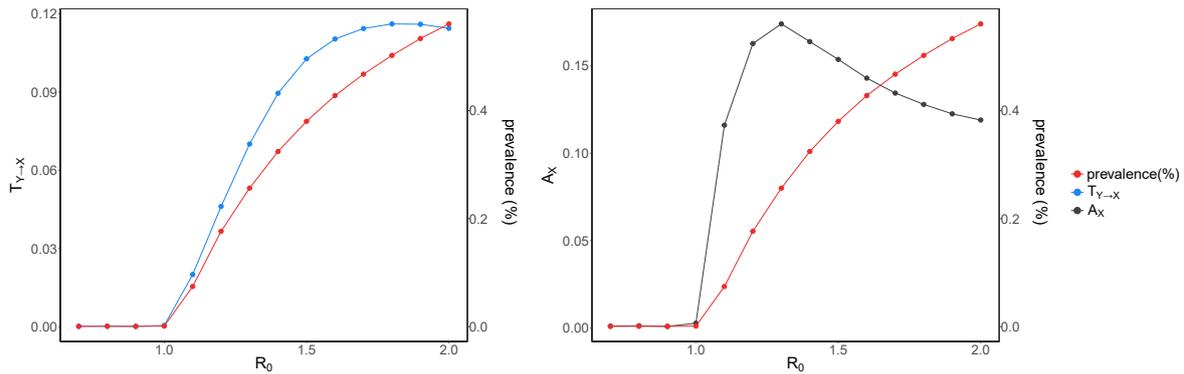


Figure 3. Raw average transfer entropy and average active information storage versus R_0 . Transfer entropy (left) calculated by averaging local transfer entropy for each individual across the network and active information storage (right) calculated by averaging local active information storage for each individual across the network. For both measures, the embedding time is $k = 7$. The average transfer entropy ($T_{Y \rightarrow X}$) is shown in blue, the average active information storage (A_X) is shown in gray, and prevalence is shown in red (note the different y-axes). R_0 is shown on the x-axis. After the critical transition both $T_{Y \rightarrow X}$ and A_X increase and reach to a peak (at $R_0 = 1.8$ and $R_0 = 1.3$, respectively), and subsequently lower down.

188 information-processing “capacity” of the underlying computation, at $R_0 = 1.2$, indicates an upper
 189 bound for the critical threshold in the studied finite-size system.

190 In the proper thermodynamic limit, as the size of the system goes to infinity, the canonical
 191 threshold may well be re-established, but in finite-size systems an additional care may be needed
 192 to forecast epidemic spread for intermediate values of the basic reproductive ratio, for instance,
 193 $1.0 \leq R_0 \leq 1.2$ as in the presented study. In other words, in finite-size systems one may consider
 194 a critical *interval* rather than an exact critical threshold.

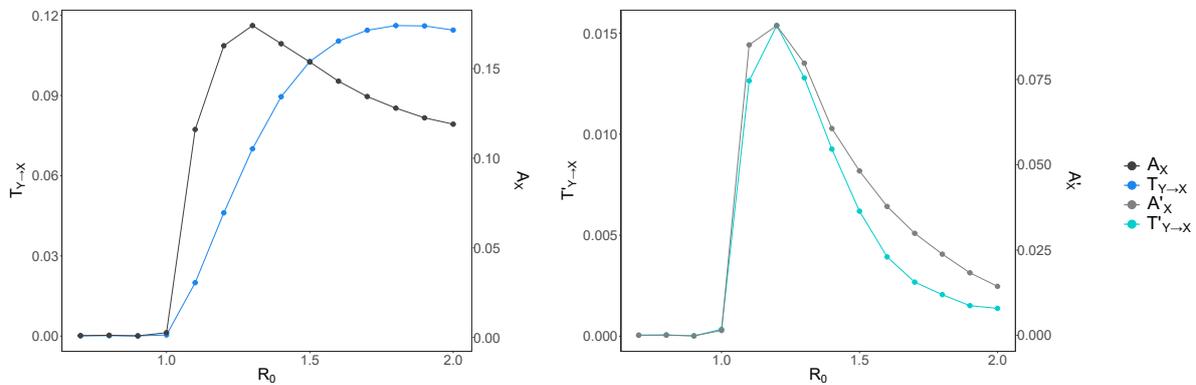


Figure 4. Raw and bias-corrected average transfer entropy and average active information storage versus R_0 . Raw average transfer entropy $T_{Y \rightarrow X}$ and average active information storage A_X are shown in dark blue and black, respectively (left panel); bias-corrected average transfer entropy $T'_{Y \rightarrow X}$ and average active information storage A'_X are shown in light blue and gray, respectively (right panel). Note the different y-axes for both graphs. R_0 is shown on the x-axis. Both A_X and A'_X increase and reach a peak right after the critical transition, and subsequently decrease. $T'_{Y \rightarrow X}$ also increases at the same R_0 value ($R_0 = 1.2$) as A'_X and plummets thereafter, whereas $T_{Y \rightarrow X}$ reaches its highest value later, at $R_0 = 1.8$

195 Furthermore, in addition to identifying the peak of information-processing capacity of the
 196 underlying computation, which pinpointed an upper bound on the critical basic reproductive ratio
 197 $R_0 = 1.2$, we studied patterns of coherent information structure, via state-space diagrams formed

198 by transfer entropy and active information storage shown in Figure 5. It is evident that both
 199 information-processing operations (communications and memory) are tightly interlinked in the
 200 underlying computation, suggesting that the studied epidemic process is strongly coherent.

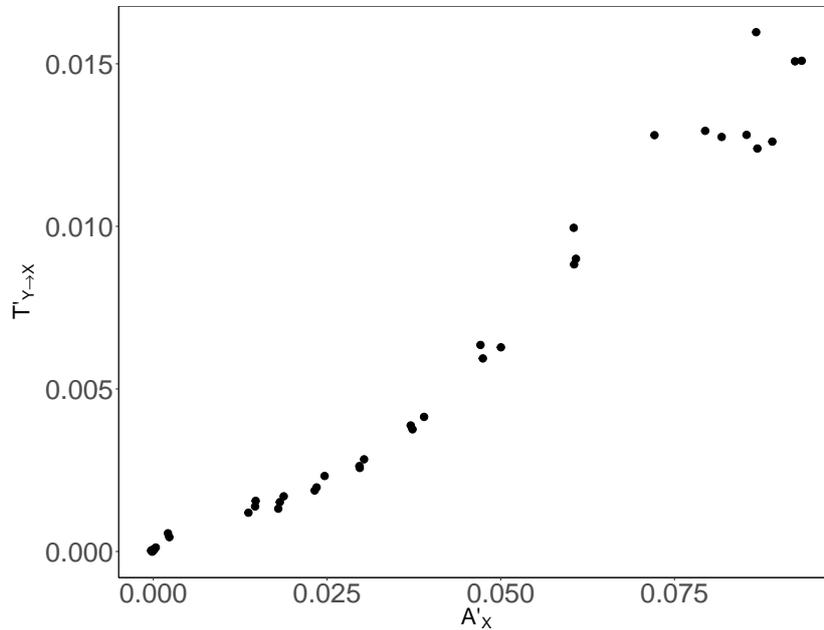


Figure 5. Bias-corrected average transfer entropy $T'_{Y \rightarrow X}$ versus bias-corrected average active information storage A'_X . Bias-corrected transfer entropy $T'_{Y \rightarrow X}$ (shown in the y-axis) and average active information storage A'_X (shown in the x-axis) are calculated separately for three replicates.

201 4. Conclusion

202 In this paper, we studied the criticality in an SIS epidemic within an information dynamics
 203 framework. We argued that the transfer entropy captures the extent of the distributed
 204 communications of the network-wide computation and showed that it peaks in the super-critical
 205 regime. Similarly, we considered the active information storage as a measure of the distributed
 206 memory, observing that its maximum is also attained after the canonical critical transition ($R_0 > 1.0$).
 207 To our knowledge, this is the first study to use information dynamics concepts to characterise
 208 critical behaviour in epidemics. Crucially, the concurrence of both peaks, which reflect the maximal
 209 information-processing capacity of the underlying coherent computation, at $R_0 = 1.2$, indicates an
 210 upper bound for the critical threshold in the studied finite-size system. This supports a conjecture
 211 that in finite-size systems a critical interval (rather than an exact critical threshold) may be a relevant
 212 notion.

213 At the time of our study, continuous-time measures of information dynamics were not available.
 214 Recently, transfer entropy in continuous-time was formalised with a novel approach [40]. One
 215 future avenue for improving our analysis would be using continuous-time measures of information
 216 dynamics. Our continuous-time simulation results were binned into discrete time steps in order to
 217 conduct an information-dynamic analysis. Therefore, using continuous time measure could reveal
 218 novel insights that we missed by the discretisation.

219 We used a very simplistic network topology in this study, where each individual had the same
 220 number of undirected connections that were assigned randomly. However, in real-life, a disease
 221 can spread in interaction networks that are heterogeneous in terms of the number of contacts (e.g.
 222 [41]) or structured differently (e.g. [5,42]). The heterogeneity and the type of the network can
 223 influence not only epidemic dynamics but also disease emergence [4]. Therefore, in future, it would

224 be interesting to expand our analysis to different network topologies and relate the insights from
 225 information-dynamic analysis to epidemic dynamics and disease emergence probabilities in these
 226 networks.

227 Finally, we note the wider interest in critical dynamics on complex networks in general. This is
 228 particularly the case in complex systems and network approaches to computational neuroscience,
 229 where it is conjectured that the brain is in or near a critical state so as to advantageously use
 230 maximised computational properties here [43–47]. (Indeed, as noted earlier, SIS dynamics have been
 231 used to model dynamics on brain networks [48]). Our results in this paper regarding SIS dynamics
 232 continue to add to the quantitative evidence regarding the maximisation of information storage and
 233 transfer as intrinsic computational properties at or near critical states, as previously found in a diverse
 234 range of dynamics and network structures including the Ising model [25], recurrent neural networks
 235 [47], gene regulatory network (GRN) models [23], and regular–small-world–random transitions in
 236 structure [24]. In this way, we have provided another important link for epidemic spreading models
 237 to complex networks, criticality and information dynamics.

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 241 and conducted the simulations; J.L. contributed analysis tools; E.Y.E., Mh.P., J.L. and Mi.P. analysed the data;
 242 E.Y.E., Mh.P., J.L., and Mi.P. wrote the paper.

243 **Conflicts of Interest:** The authors declare no conflict of interest.

244 Bibliography

- 245 1. Bernoulli, D. Essai d’une nouvelle analyse de la mortalité causée par la petite vérole et des avantages de
 246 l’inoculation pour la prévenir. *Histoire de l’Acad. Roy. Sci.(Paris) avec Mém. des Math. et Phys. and Mém*
 247 *1760*, pp. 1–45.
- 248 2. Kermack, W.O.; McKendrick, A.G. A contribution to the mathematical theory of epidemics. Proceedings
 249 of the Royal Society of London A: mathematical, physical and engineering sciences. The Royal Society,
 250 1927, Vol. 115, pp. 700–721.
- 251 3. Keeling, M.J.; Rohani, P. *Modeling infectious diseases in humans and animals*; Princeton University Press,
 252 2008.
- 253 4. Leventhal, G.E.; Hill, A.L.; Nowak, M.A.; Bonhoeffer, S. Evolution and emergence of infectious diseases
 254 in theoretical and real-world networks. *Nature communications* **2015**, *6*.
- 255 5. Bauer, F.; Lizier, J.T. Identifying influential spreaders and efficiently estimating infection numbers in
 256 epidemic models: A walk counting approach. *Europhysics Letters* **2012**, *99*, 68007+.
- 257 6. Anderson, R.M.; May, R.M.; Anderson, B. *Infectious diseases of humans: dynamics and control*; Vol. 28, Wiley
 258 Online Library, 1992.
- 259 7. Heesterbeek, J.; Dietz, K. The concept of R_0 in epidemic theory. *Statistica Neerlandica* **1996**, *50*, 89–110.
- 260 8. Artalejo, J.; Lopez-Herrero, M. Stochastic epidemic models: New behavioral indicators of the disease
 261 spreading. *Applied Mathematical Modelling* **2014**, *38*, 4371–4387.
- 262 9. Heffernan, J.; Smith, R.; Wahl, L. Perspectives on the basic reproductive ratio. *Journal of The Royal Society*
 263 *Interface* **2005**, *2*, 281–293, [<http://rsif.royalsocietypublishing.org/content/2/4/281.full.pdf>].
- 264 10. Artalejo, J.R.; Lopez-Herrero, M.J. On the Exact Measure of Disease Spread in Stochastic Epidemic
 265 Models. *Bulletin of Mathematical Biology* **2013**, *75*, 1031–1050.
- 266 11. Pastor-Satorras, R.; Castellano, C.; Van Mieghem, P.; Vespignani, A. Epidemic processes in complex
 267 networks. *Rev. Mod. Phys.* **2015**, *87*, 925–979.
- 268 12. Yeomans, J.M. *Statistical mechanics of phase transitions*; Clarendon Press, 1992.
- 269 13. Antia, R.; Regoes, R.R.; Koella, J.C.; Bergstrom, C.T. The role of evolution in the emergence of infectious
 270 diseases. *Nature* **2003**, *426*, 658–661.
- 271 14. O’Regan, S.M.; Drake, J.M. Theory of early warning signals of disease emergence and leading indicators
 272 of elimination. *Theoretical Ecology* **2013**, *6*, 333–357.

- 273 15. Wang, X.R.; Lizier, J.T.; Prokopenko, M. Fisher Information at the Edge of Chaos in Random Boolean
274 Networks. *Artificial Life* **2011**, *17*, 315–329.
- 275 16. Prokopenko, M.; Lizier, J.T.; Obst, O.; Wang, X.R. Relating Fisher information to order parameters.
276 *Physical Review E* **2011**, *84*, 041116.
- 277 17. Lizier, J.T.; Prokopenko, M.; Zomaya, A.Y. Local information transfer as a spatiotemporal filter for
278 complex systems. *Physical Review E* **2008**, *77*, 026110+.
- 279 18. Lizier, J.T.; Prokopenko, M.; Zomaya, A.Y. Information modification and particle collisions in distributed
280 computation. *Chaos* **2010**, *20*, 037109+.
- 281 19. Lizier, J.T.; Prokopenko, M.; Zomaya, A.Y. Local measures of information storage in complex distributed
282 computation. *Information Sciences* **2012**, *208*, 39–54.
- 283 20. Lizier, J.T. *The Local Information Dynamics of Distributed Computation in Complex Systems*; Springer Theses,
284 Springer: Berlin / Heidelberg, 2013.
- 285 21. Lizier, J.T.; Prokopenko, M.; Zomaya, A.Y. A Framework for the Local Information Dynamics of
286 Distributed Computation in Complex Systems. In *Guided Self-Organization: Inception*; Prokopenko, M.,
287 Ed.; Springer Berlin Heidelberg, 2014; Vol. 9, *Emergence, Complexity and Computation*, pp. 115–158.
- 288 22. Shannon, C.E. A mathematical theory of communication. *The Bell Syst Tech J* **1948**, *27*.
- 289 23. Lizier, J.T.; Prokopenko, M.; Zomaya, A.Y. The Information Dynamics of Phase Transitions in Random
290 Boolean Networks. *Artificial Life* **2008**, *11*, 374.
- 291 24. Lizier, J.T.; Pritam, S.; Prokopenko, M. Information dynamics in small-world Boolean networks. *Artificial*
292 *life* **2011**, *17*, 293–314.
- 293 25. Barnett, L.; Harré, M.; Lizier, J.; Seth, A.K.; Bossomaier, T. Information Flow in a Kinetic Ising Model
294 Peaks in the Disordered Phase. *Phys. Rev. Lett.* **2013**, *111*, 177203.
- 295 26. Lizier, J.T.; Prokopenko, M.; Zomaya, A.Y. Coherent information structure in complex computation.
296 *Theory in Biosciences* **2012**, *131*, 193–203.
- 297 27. Cliff, O.M.; Lizier, J.T.; Wang, P.; Wang, X.R.; Obst, O.; Prokopenko, M. Quantifying Long-Range
298 Interactions and Coherent Structure in Multi-Agent Dynamics. *Artificial Life* **2017**, *23*, 34–57.
- 299 28. Lizier, J.T.; Prokopenko, M.; Cornforth, D.J. The information dynamics of cascading failures in energy
300 networks. Proceedings of the European Conference on Complex Systems (ECCS), Warwick, UK. Citeseer,
301 2009, p. 54.
- 302 29. Amador, J.; Artalejo, J.R. Stochastic modeling of computer virus spreading with warning signals. *Journal*
303 *of the Franklin Institute* **2013**, *350*, 1112 – 1138.
- 304 30. Anderson, R.M.; May, R.M. *Infectious diseases of humans*; Vol. 1, Oxford university press Oxford, 1991.
- 305 31. Gillespie, D.T. Exact stochastic simulation of coupled chemical reactions. *The journal of physical chemistry*
306 **1977**, *81*, 2340–2361.
- 307 32. Cover, T.M.; Thomas, J.A. *Elements of information theory*; Wiley: New York, 1991.
- 308 33. Scarpino, S.V.; Petri, G. On the predictability of infectious disease outbreaks, 2017, [[1703.07317](https://arxiv.org/abs/1703.07317)].
309 arXiv:1703.07317.
- 310 34. Artalejo, J.; Lopez-Herrero, M. The {SIS} and {SIR} stochastic epidemic models: A maximum entropy
311 approach. *Theoretical Population Biology* **2011**, *80*, 256–264.
- 312 35. Lizier, J.T. Measuring the Dynamics of Information Processing on a Local Scale in Time and Space. In
313 *Directed Information Measures in Neuroscience*; Wibral, M.; Vicente, R.; Lizier, J.T., Eds.; Understanding
314 Complex Systems, Springer: Berlin/Heidelberg, 2014; pp. 161–193.
- 315 36. Schreiber, T. Measuring Information Transfer. *Physical Review Letters* **2000**, *85*, 461–464.
- 316 37. Garland, J.; James, R.G.; Bradley, E. Leveraging information storage to select forecast-optimal parameters
317 for delay-coordinate reconstructions. *Physical Review E* **2016**, *93*, 022221+.
- 318 38. Lizier, J.T. JIDT: An Information-Theoretic Toolkit for Studying the Dynamics of Complex Systems.
319 *Frontiers in Robotics and AI* **2014**, *1*, 11+, [[1408.3270](https://doi.org/10.3389/frobs.2014.00011)].
- 320 39. Marschinski, R.; Kantz, H. Analysing the information flow between financial time series. *The European*
321 *Physical Journal B* **2002**, *30*, 275–281.
- 322 40. Spinney, R.E.; Prokopenko, M.; Lizier, J.T. Transfer entropy in continuous time, with applications to jump
323 and neural spiking processes. *Physical Review E* **2017**, *95*, 032319.
- 324 41. Lloyd-Smith, J.O.; Schreiber, S.J.; Kopp, P.E.; Getz, W.M. Superspreading and the effect of individual
325 variation on disease emergence. *Nature* **2005**, *438*, 355–359.

- 326 42. Schneeberger, A.; Mercer, C.H.; Gregson, S.A.; Ferguson, N.M.; Nyamukapa, C.A.; Anderson, R.M.;
327 Johnson, A.M.; Garnett, G.P. Scale-free networks and sexually transmitted diseases: a description
328 of observed patterns of sexual contacts in Britain and Zimbabwe. *Sexually transmitted diseases* **2004**,
329 *31*, 380–387.
- 330 43. Beggs, J.M.; Plenz, D. Neuronal avalanches in neocortical circuits. *Journal of Neuroscience* **2003**,
331 *23*, 11167–11177.
- 332 44. Priesemann, V.; Munk, M.; Wibral, M. Subsampling effects in neuronal avalanche distributions recorded
333 in vivo. *BMC Neuroscience* **2009**, *10*, 40+.
- 334 45. Priesemann, V.; Wibral, M.; Valderrama, M.; Pröpper, R.; Le Van Quyen, M.; Geisel, T.; Triesch, J.; Nikolić,
335 D.; Munk, M.H.J. Spike avalanches in vivo suggest a driven, slightly subcritical brain state. *Frontiers in*
336 *Systems Neuroscience* **2014**, *8*, 108+.
- 337 46. Rubinov, M.; Sporns, O.; Thivierge, J.P.; Breakspear, M. Neurobiologically Realistic Determinants
338 of Self-Organized Criticality in Networks of Spiking Neurons. *PLoS Computational Biology* **2011**,
339 *7*, e1002038+.
- 340 47. Boedecker, J.; Obst, O.; Lizier, J.T.; Mayer, M.; Asada, M. Information processing in echo state networks at
341 the edge of chaos. *Theory in Biosciences* **2012**, *131*, 205–213.
- 342 48. Meier, J.; Zhou, X.; Hillebrand, A.; Tewarie, P.; Stam, C.J.; Miegheem, P.V. The Epidemic Spreading Model
343 and the Direction of Information Flow in Brain Networks. *NeuroImage* **2017**, *152*, 639–646.

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