

# The Effects of Culling and Quarantine on Reducing Antibiotic Resistance in a Cohort of Beef Cattle

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## Abstract

Antibiotic resistance is a global health concern that involves animals as well as humans. In zoonotic diseases, not generally fatal to humans, antibiotic resistance provides a reservoir from which pathogenic bacteria can gain resistance. Reducing antibiotic resistance in bovine infections is a key part of any plan to slow resistance in human diseases. A two-stage mathematical model is constructed in order to find the most ideal combination of isolation, treatment, and culling that reduces the number of beef cattle with antibiotic resistance at the time of maturity. New legislation, starting in 2017, will restrict the use of antibiotics in cattle feed to veterinary prescription. To compare the impact of this legislation with current practices, an additional set of parameter values is used to simulate the dynamics of antibiotic resistance among beef cattle populations. Culling rates are shown to have a negligible effect, but quarantine rates of 0.5-1 per week lead to a decreased ABR rate. We find that under the new legislation the proportion of cattle with ABR at slaughter decreases by a statistically significant amount. In addition, the number of cattle colonized with antibiotic susceptible bacteria increases. However, the proportion of sellable cattle at the time of slaughter remains roughly the same.

# 1 Introduction

When Alexander Fleming received the Nobel Prize in 1945, for his discovery of penicillin, he acknowledged antibiotic resistance (ABR) as a potential problem [3]. Today, we are faced with that reality. The Center for Disease Control recognizes ABR as a growing public health problem, and estimates that more than 23,000 people die each year due to antibiotic resistant infections [8].

Anytime antibiotics are used, regardless of the species to which they are given, resistant bacteria can evolve [19]. In the United States, over 24 million pounds of antibiotics are given to food animals each year [23]. The 2015 President’s Council of Advisors on Science and Technology report stated that “the risks to human health posed by the agricultural use of antibiotics is [sic] appropriately a matter of very serious concern” [29]. In beef cattle, antibiotics are used in three main ways: therapeutically (to treat disease), prophylactically (to prevent sickness), and for growth promotion (to improve feed efficiency and maximize weight gain) [43]. Because cattle are kept in groups, antibiotics are often given collectively, in food and water. Antibiotics play an important role in keeping cattle healthy and in ensuring that meat is safe for human consumption. However, the development of drug resistant infections undeniably necessitates that every precaution be taken when distributing antibiotics to animals as well as people [11, 21, 39].

While the link between ABR in humans and animals is complex, it clearly exists [42, 43]. Many zoonotic diseases are not fatal to humans. However, ABR creates a reservoir of bacteria maintained within cattle and the environment from which other harmful bacteria may gain resistance through horizontal gene transfer. This is cause for great concern, especially since there are multiple antibiotics which are used to treat both human and animal conditions [42].

To combat this problem, the United States has allocated over \$1.2 billion for 2016 [1]. As part of the National Action Plan for Combating Drug-Resistant Bacteria, the Veterinary Feed Directive (VFD) will no longer allow antibiotics used for growth-promotion in cattle and other food animals beginning January 1, 2017. Furthermore, any antibiotics administered through feed will require a prescription by a veterinarian [29]. This will be a major change for the cattle industry, as currently 17% of antibiotics used in food animals are for growth promotion [24].

In the past, to determine whether growth promoters are a significant cause of ABR in bacteria, researchers have employed mathematical models. Volkova *et al.* found stochastic differential equations (SDE) conceptually beneficial when modeling underlying dynamics of antimicrobial resistant *E. coli* [40]. Zaheer *et al.* concluded that subtherapeutic levels of antimicrobial drugs are not a significant cause of ABR *Mannheimia haemolytica*, although, in the development of their mathematical model, they found data that suggested the opposite [44]. This discrepancy shows further work in modeling ABR in *M. haemolytica* is needed.

*Mannheimia haemolytica* is the primary cause of Bovine Respiratory Disease (BRD), a condition which is responsible for 70% of morbidity and 50% of mortality in beef cattle [5, 22]. Additional bacterial causes of BRD include *Pasteurella multocida*, and *Histophilus somni*, as well as several viruses [5]. Nyamusika *et al.*, one of the few papers that addresses population dynamics of beef cattle with respect to BRD, looks at how vaccination lowers the incidence of BRD by *M. haemolytica*. The authors discover that vaccination is most effective if administered

once cattle are brought to the feedlot [28]. However, there is no consideration of the impact of prolonged exposure to antibiotics throughout the life of cattle.

The topic of ABR in population dynamics has been studied in humans repeatedly [9, 12] and numerous researchers have demonstrated the need for a connection between ABR in humans and food animals [11, 39, 43]. Smith *et al.* used a mathematical model to reveal that antibiotic use in animals has an impact on ABR in humans [34]. Therefore, it is worthwhile to pursue reducing ABR in food animals.

While certain strains of bacteria present in beef cattle have been modeled at a molecular level, this report focuses on an entire cohort of cattle throughout their lifetime at the population level. Using a mathematical model, we compare strategies to reduce ABR in cattle with and without the use of growth promoters. We also utilize a combination of isolation, treatment, and culling to reduce ABR in cattle at the time of slaughter. This model is analyzed in the context of Bovine Respiratory Disease (BRD) and focuses on resistant and nonresistant strains of *M. haemolytica*.

This paper addresses the question of what is the best combination of culling and quarantine to reduce ABR in beef cattle? Also, how will the Veterinary Feed Directive affect ABR? The remainder of this paper is organized as follows: biological considerations are explained in Section 2 along with the model development, details of the mathematical model and other methods are included in Section 3, and details of parameter estimation are outlined in Section 4. The results of numerical simulations are in Section 5. Section 6 contains the discussion, and additional outputs are included in the Appendix.

## 2 Model Development

### *Compartments and Stages*

We develop a two-stage model which tracks the development of antibiotic resistant (ABR) bacteria in a cohort of cattle from birth in a cow-calf operation through weaning at seven months (Stage 1), to a feedlot until slaughter at 22 months of age (Stage 2). It is becoming increasingly common to see a cow's life divided into these two distinct phases, as it limits transportation of cattle and therefore reduces stress, which makes cattle more susceptible to illness [14]. The model consists of six compartments, which are shown in Figure 1. We assume that all cattle are born healthy, and enter the model through compartment  $H$ . They may then become colonized with either antibiotic resistant or susceptible (ABR or ABS) *M. haemolytica*, and enter latent compartments  $L_r$  or  $L_w$ , respectively [25]. From there, they may develop symptoms and enter infectious compartments  $I_r$  or  $I_w$ . At any time, cattle from  $L_w$  and  $I_w$  may develop resistant bacteria, and move into  $L_r$  and  $I_r$  respectively [41]. Cattle in  $I_r$  are taken to the quarantine compartment  $Q$  or leave the system. Cattle exit the model through culling (the equivalent of slaughter without profit) at  $I_r$  and  $Q$ ; at 22 months of age, the cattle are slaughtered. Stage 1 is run from birth to 7 months; it is then stopped, and the outputs are used as initial conditions for Stage 2, which is run from 7 to 22 months. We assume that all cattle are born into Stage 1 at a specific time, move to Stage 2 collectively, and are culled or slaughtered before natural

death can occur. Therefore, natural birth and death are not accounted for in the model.

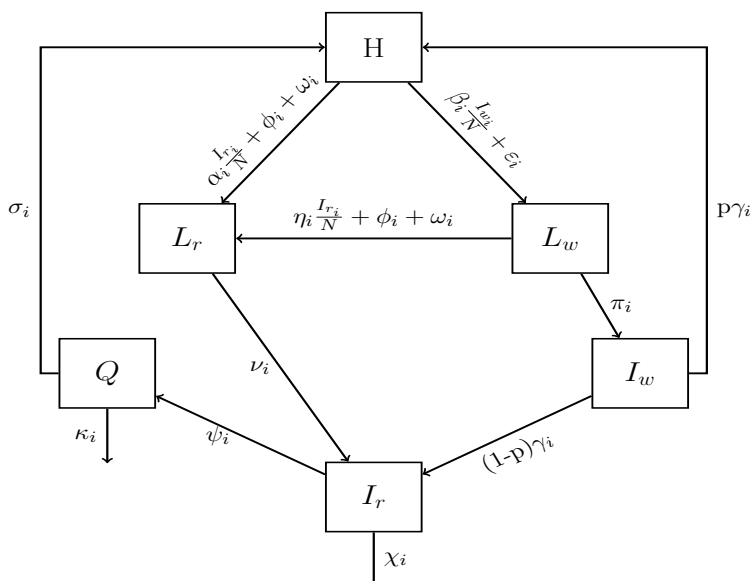


Figure 1: Movement and rates of change between cattle sub-populations with varying levels of infection. Here  $i = 1, 2$  denotes the stage.

Com.	Meaning
$H$	Healthy cattle colonized with harmless amounts of bacteria.
$L_r$	Asymptomatic cattle colonized with ABR bacteria.
$L_w$	Asymptomatic cattle colonized with ABS bacteria.
$I_r$	Symptomatic, infectious cattle colonized with ABR bacteria.
$I_w$	Symptomatic, infectious cattle colonized with ABS bacteria.
$Q$	Quarantined cattle, infected with antibiotic resistant bacteria.

Table 1: Description of state variables

### ***Bacteria Types***

After birth, cattle become colonized with a variety of bacteria, generally nonpathogenic. *M. haemolytica* is commonly found in healthy cattle. There are three main serotypes (S1, S2, and S6); each of these may cause Bovine Respiratory Disease (BRD), especially when cattle are exposed to stress or viruses. Roughly 2-18% of *M. haemolytica* bacteria is antibiotic resistant [17, 22], and, of the three serotypes, S1 is the most prone to developing resistance. Cattle become

colonized with ABR bacteria through contact with other cattle,  $\alpha$  and  $\eta$ , the environment  $\phi$ , and selective pressure from antibiotics in the feed  $\omega$ . Cattle become colonized with ABS bacteria through contact with other cattle  $\beta$ , and the environment  $\varepsilon$ .

### ***Antibiotic Use***

Cattle receive subtherapeutic levels of antibiotics in their food continually. These antibiotics serve to inhibit the growth of bacteria, as well as to help the cattle process their feed more efficiently (growth promotion). However, constant exposure to antibiotics causes selective pressure which may lead to the development of antibiotic resistant bacteria. If cattle develop symptoms, they are treated with therapeutic levels of antibiotics, but due to the cost and time involved, cattle are not tested before treatment [37]. Thus, all symptomatic cattle, regardless of whether the infection is resistant or not, are treated with the same antibiotic. A proportion of cattle ( $p$ ) from  $I_w$  respond to this treatment at rate  $\gamma$  and will return to  $H$ . Cattle from  $I_r$  will not recover from this treatment, and it is at this point that their resistance status will be "discovered." From this point, they will either be taken to  $Q$  for further treatment, or culled.

### ***Horizontal Transmission***

Whether the cattle are on a farm or a feedlot, they are always exposed to other cattle and environmental factors from which they may develop ABR. Therefore, at any time, cattle from  $H$  and  $L_w$  may transfer to  $L_r$ . A proportion of cattle from  $I_w$  may not respond to treatment, and instead develop an ABR infection and transfer into  $I_r$ , at rate  $(1 - p)\gamma$ .

### ***Bovine Respiratory Disease (BRD)***

BRD is the leading cause of morbidity and mortality in cattle. It is a complex disease and highly infectious. Because stress is a major catalyst, BRD is most commonly seen after major events such as weaning and transport to a feedlot (which may involve sale at a cattle auction and cross-country travel). BRD can affect cattle at any time, but the first 30 days after transport are the most critical [15]. Signs and symptoms of BRD progress from depression, decreased appetite, increased respiratory rate, fever, and lung lesions. Cattle with BRD should be treated as early as possible; if roughly 10% of the cattle are sick, mass medication may be given to the entire herd [16]. The time to develop symptoms varies from several days to two weeks from exposure [8, 27]. In our model, a proportion of cattle in  $L_r$  and  $L_w$  pass to  $I_r$  and  $I_w$  at this rate, represented by  $\nu$  and  $\pi$ , respectively. At this point, all symptomatic cattle ( $I_r$  and  $I_w$ ) are treated with therapeutic doses of the same antibiotic used prophylactically in the general population. Cattle who remain sick, or who quickly relapse, will be assumed to carry ABR bacteria. It is assumed that cattle in  $L_w$  may develop ABR in all of the same ways as members of  $H$ .

### *Quarantine*

Many feedlots have a hospital, or quarantine pen where sick cattle are kept for treatment. We assume that once a cow needs more than a standard round of antibiotics, it is either culled, or moved to this pen ( $Q$ ), where further treatment can be administered without the risk that the disease will be spread to other cattle. From  $Q$ , a proportion of cattle recover and rejoin  $H$ , or, if treatment fails, they may be culled.

### *Culling*

Antibiotic treatment is expensive, especially if the entire herd requires treatment. For this reason and to reduce the spread of antibiotic resistant bacteria, cattle may be culled from either  $I_r$  or  $Q$ . Conservative estimates list the mortality rate of BRD at 5-10% of those infected [22]. In addition, the rancher may decide to cull an especially sick cow, or a cow who has already suffered multiple infections, as these cattle are not worth as much at slaughter [33]. The rate of cows culled for either of these reasons will be reflected in the culling terms  $\chi$  and  $\kappa$ .

## **3 Methods**

### *Stage Structure*

We track a single cohort of beef cattle through the two stages of the model, which is summarized by the flow chart in Figure 2, and given by differential equations (1 - 6). The state variables are summarized in Table 1, and parameter definitions summarized in Table 2.

**Time Line**

Birth  
0 months

↓

Transport  
7 months

↓

Slaughter  
22 months

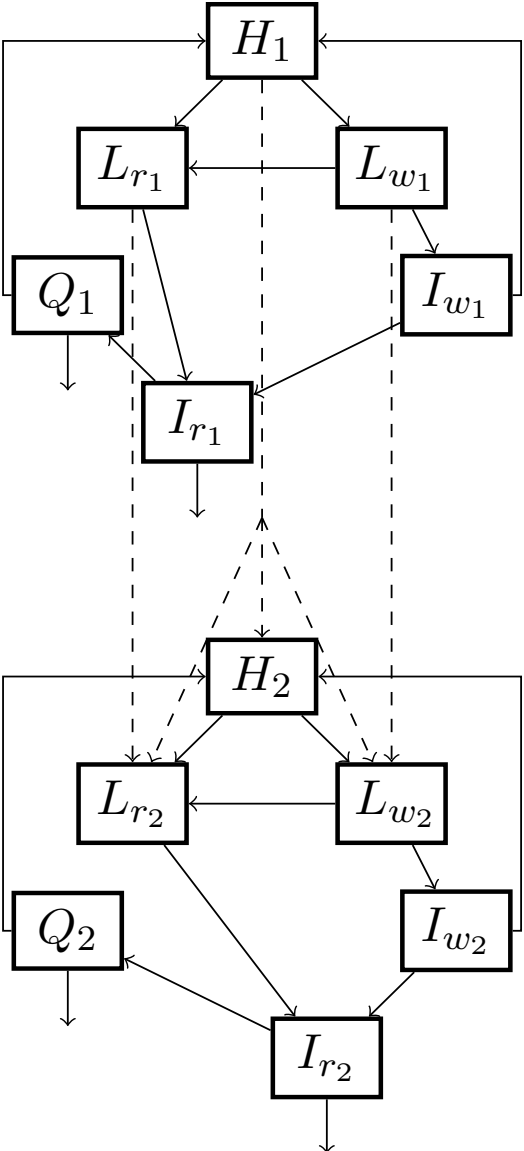


Figure 2: Flow chart illustrating stage structure

The following system of ordinary differential equations (ODEs) is used to examine the change in ABR *M. haemolytica* infected cattle:

$$\dot{H}_i = -\alpha_i H_i \frac{I_{r_i}}{N_i} - H_i(\phi_i + \omega_i) - \beta_i H_i \frac{I_{w_i}}{N_i} - \varepsilon_i H_i + p_i \gamma_i I_w + \sigma_i Q_i \quad (1)$$

$$\dot{L}_{r_i} = \alpha_i H_i \frac{I_{r_i}}{N_i} + H_i(\phi_i + \omega_i) + \eta_i L_{w_i} \frac{I_{r_i}}{N_i} + L_{w_i}(\phi_i + \omega_i) - \nu_i I_{r_i} \quad (2)$$

$$\dot{L}_{w_i} = \beta_i H_i \frac{I_{w_i}}{N_i} + \varepsilon_i H_i - \eta_i L_{w_i} \frac{I_{r_i}}{N_i} - L_{w_i}(\phi_i + \omega_i) - \pi_i I_{w_i} \quad (3)$$

$$\dot{I}_{r_i} = \nu_i I_{r_i} + (1 - p_i) \gamma_i I_w - I_{r_i}(\psi_i + \chi_i) \quad (4)$$

$$\dot{I}_{w_i} = \pi_i L_{w_i} - \gamma_i I_{w_i} \quad (5)$$

$$\dot{Q}_i = \psi_i I_{r_i} - Q_i(\sigma_i + \kappa_i) \quad (6)$$

where  $i = 1, 2$  for Stage 1 and Stage 2 respectively, and  $N = H + L_r + L_w + I_r + I_w + Q$ . At the beginning of the system ( $t = 0$ ) the population enters the system healthy, therefore  $N(0) = H$ . Both stages use the same set of six equations but with differing parameter values to account for the change in conditions from the breeder farm to the feedlot. At the end of Stage 1 ( $t = 28$  weeks), the visibly healthy cows from  $H$ ,  $L_r$ , and  $L_w$  will be transported to the feedlot, while the cattle in  $I_r$ ,  $I_w$ , and  $Q$  will not [35]. The transition from cow-calf operation to feedlot is stressful on the cattle, and as a result, a proportion of healthy cattle contract BRD. The initial conditions for Stage 2 are given by:

$$\begin{aligned} H_2(t_1) &= (1 - \delta)H_1(t_1) \\ L_{r_2}(t_1) &= L_{r_1}(t_1) + z\delta H_1(t_1) \\ L_{w_2}(t_1) &= L_{w_1}(t_1) + (1 - z)\delta H_1(t_1) \end{aligned}$$

where  $\delta$  is the proportion of  $H$  that develop BRD due to the stress of transport, and  $z$  is the proportion of infections with ABR *M. haemolytica*. The duration of Stage 2 is 68 weeks, at the end of which the cattle are slaughtered at 22 months ( $t_2$ ) of age [35].

Because the system runs for a fixed time, not indefinitely, usual techniques of finding equilibrium points, stability analysis, and other analytical techniques are unnecessary. Instead, numerical techniques such as uncertainty quantification, graphical displays, and perturbation of parameters are used to determine the characteristics of the system.

### ***Addition of Natural Variation***

In a biological system such as a cattle feedlot, there is a lot of natural variation. This occurs in the form of farming practices, immune systems of individual cows, weather and seasonal changes, among other things. ODE systems provide information on how average behavior changes over time. However, slight changes in parameters will result in different deterministic outputs. Therefore, an ODE system may show differences that are not significant once demographic variation is taken into account [20]. In order to expand upon the results from our



deterministic model and ensure that observed differences are meaningful, a system of stochastic differential equations (SDE) is used. The stochastic equations are created from a combination of the ordinary differential equations and additional terms comprised of a random proportion of the standard deviation of each transition rate in the system [2]. Each drift term, calculated using Wiener processes, encompasses all expected variations in a given transition. The stochastic differential equations are as follows:

$$\begin{aligned} \dot{H}_i = & -\alpha_i H_i \frac{I_{r_i}}{N_i} - H_i(\phi_i + \omega_i) - \varepsilon_i H_i - \beta_i H_i \frac{I_{w_i}}{N_i} + p_i \gamma_i I_w + \sigma_i Q_i - \sqrt{\alpha_i H_i \frac{I_{r_i}}{N_i}} W_1 \\ & - \sqrt{H_i(\phi_i + \omega_i)} W_2 - \sqrt{\varepsilon_i H_i} W_3 - \sqrt{\beta_i H_i \frac{I_{w_i}}{N_i}} W_4 + \sqrt{p_i \gamma_i I_w} W_4 + \sqrt{\sigma_i Q_i} W_6 \end{aligned} \quad (7)$$

$$\begin{aligned} \dot{L}_{r_i} = & \alpha_i H_i \frac{I_{r_i}}{N_i} + H_i(\phi_i + \omega_i) + \eta_i L_{w_i} \frac{L_{r_i}}{N_i} + L_{w_i}(\phi_i + \omega_i) - \nu_i I_{r_i} + \sqrt{\alpha_i H_i \frac{I_{r_i}}{N_i}} W_1 \\ & + \sqrt{H_i(\phi_i + \omega_i)} W_2 + \sqrt{\eta_i L_{w_i} \frac{I_{r_i}}{N_i}} W_7 + \sqrt{L_{w_i}(\phi_i + \omega_i)} W_8 - \sqrt{\nu_i I_{r_i}} W_9 \end{aligned} \quad (8)$$

$$\begin{aligned} \dot{L}_{w_i} = & \beta_i H_i \frac{I_{w_i}}{N_i} + \varepsilon_i H_i - \eta_i L_{w_i} \frac{I_{r_i}}{N_i} - L_{w_i}(\phi_i + \omega_i) - \pi_i I_{w_i} + \sqrt{\beta_i H_i \frac{I_{w_i}}{N_i}} W_4 \\ & + \sqrt{\varepsilon_i H_i} W_3 - \sqrt{\eta_i L_{w_i} \frac{I_{r_i}}{N_i}} W_7 - \sqrt{L_{w_i}(\phi_i + \omega_i)} W_8 - \sqrt{\pi_i I_{w_i}} W_{10} \end{aligned} \quad (9)$$

$$\begin{aligned} \dot{I}_{r_i} = & \nu_i I_{r_i} + (1 - p_i) \gamma_i I_{w_i} - I_{r_i}(\psi_i + \chi_i) + \sqrt{\nu_i I_{r_i}} W_9 + \sqrt{(1 - p_i) \gamma_i I_{w_i}} W_{11} \\ & - \sqrt{I_{r_i}(\psi_i)} W_{12} - \sqrt{\chi_i I_{r_i}} W_{13} \end{aligned} \quad (10)$$

$$\dot{I}_{w_i} = \pi_i L_{w_i} - \gamma_i I_{w_i} + \sqrt{\pi_i L_{w_i}} W_{10} - \sqrt{\gamma_i I_{w_i}} W_6 \quad (11)$$

$$\dot{Q}_i = \psi_i I_{r_i} - Q_i(\sigma_i + \kappa_i) + \sqrt{\psi_i I_{r_i}} W_{13} - \sqrt{\sigma_i Q_i} W_6 - \sqrt{\kappa_i Q_i} W_{14} \quad (12)$$

where  $i = 1, 2$  for Stage 1 and Stage 2, and  $j = 1, 2, \dots, 14$  for the Wiener trajectories where each transition rate has a corresponding  $W$ . See Table 4 in the appendix for a layout of the transitions for each random event. Each  $W_j$  corresponds to a random number from a *iid*  $W_j \sim N(0, 1)$ . For a more complete theoretical discussion of the stochastic process used in this paper, refer to Allen *et al.* [2].

## 4 Parameter Estimation

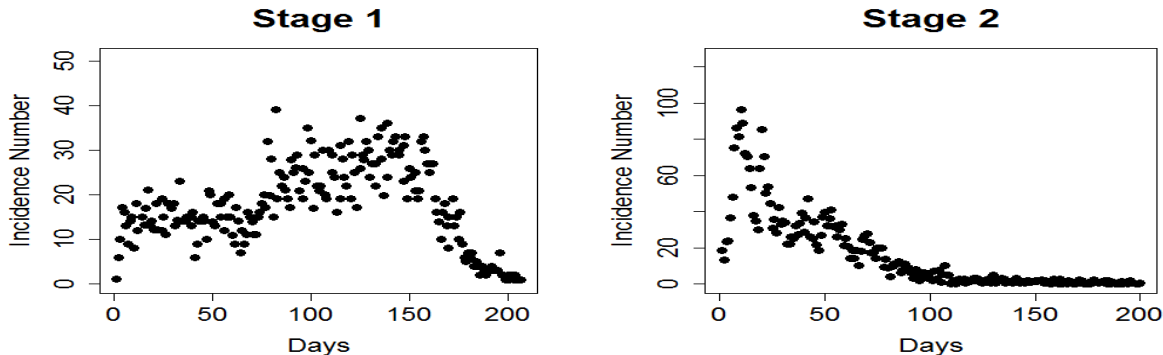


Figure 3: Daily incidence of BRD for 31,243 calves and 18,112 feedlot cattle (data from [36, 37])

Parameter values were found primarily in literature. Those that were not found were estimated using the data provided in Snowden *et al.* (2005) and (2006) for Stage 1 and 2 respectively [36, 37]. All values were assumed to be the same for Stage 1 and Stage 2 unless otherwise stated.

Terms  $\alpha$ ,  $\beta$  and  $\eta$  represent effective contact rates between infectious and healthy or latent cattle respectively. *M. haemolytica* is not directly contagious between cattle [38]. Instead, Bovine Respiratory Disease (BRD) is spread through a population via the contagiousness of viruses. Viruses associated with BRD have a 30% chance of causing enough damage for *M. haemolytica* to develop into BRD [30]. We assume that 1 contact per week per cow is sufficient to transmit the virus. Therefore, assuming that each cow comes into contact with at least 1 other cow once per week and that proportions of sick cattle are similar in each pen,  $\alpha$ ,  $\beta$  and  $\eta$  will be represented by:  $(\frac{3 \text{ BRD cases}}{10 \text{ contacts}})(1 \frac{\text{contacts}}{\text{week}}) = 0.3 \frac{\text{BRD cases}}{\text{week}}$ .

The rate at which cattle develop antibiotic resistance (ABR) due to selective pressure by medicated feed ( $\omega$ ) was calculated by observing the change in antibiotic susceptibilities over several years. Based on these changes, rate of developing ABR ranges from  $\frac{0.0002}{\text{week}}$  to  $\frac{0.001}{\text{week}}$  [17]. An arbitrary value of  $\frac{0.0005}{\text{week}}$  was selected.

The proportion of successful treatments,  $p$ , was found to range from 0.71 to 0.86 with a best estimate of 0.86 [17, 41]. Average duration of treatment ranges from 3 days to 2 weeks [4, 8, 26]. A recommended treatment duration of 2 weeks was selected, resulting in a value of  $\frac{1}{2 \text{ weeks}}$  for  $\gamma$  [27]. This value was also used for  $\psi$  as it is assumed that after 1 round of treatment fails, cattle will be brought to quarantine.

Average amount of time spent in quarantine was found to be 30 days [31] while the probability of successful treatment was found to be 0.389 [41]. A value of  $\sigma$  was calculated to be:  $(0.389)(\frac{7}{30 \text{ weeks}}) = \frac{0.091}{\text{weeks}}$  while the  $\kappa$  was calculated to be  $(1 - 0.389)(\frac{7}{30 \text{ weeks}}) = \frac{0.142}{\text{weeks}}$ .

The culling rate from  $I_r$ ,  $\chi$ , varies greatly as it is up to a farmer's discretion whether or not a cow should be quarantined or killed. A minimal value of  $\frac{0.001}{\text{weeks}}$  was arbitrarily selected.

Data fitting using least square analysis was used to estimate values for  $\phi$ ,  $\varepsilon$ , and  $\pi$ . Rates

of developing symptoms from the latent classes  $\pi$  and  $\nu$ , were assumed to be equal. Parameter estimation for Stage 1 revealed the following:  $\pi = \nu = \frac{0.1156}{\text{week}}$ ,  $\phi = \frac{0.0000175}{\text{week}}$  and  $\varepsilon = \frac{0.0089}{\text{week}}$ . For Stage 2, the values were estimated to be:  $\pi = \nu = \frac{0.00429}{\text{week}}$ ,  $\phi = \frac{0.000492}{\text{week}}$  and  $\varepsilon = \frac{0.00967}{\text{week}}$ . Values were fitted to data shown in Figure 3.

Alternative values of  $\omega$  and  $\varepsilon$  were also estimated to predict changes in incidences of ABR and illness that will occur after 2017 legislation is put into action.  $\hat{\omega}$  was set to  $\frac{0}{\text{weeks}}$  as it would be ideal that selective pressures would be completely removed once antibiotics are no longer included in feed. Additionally,  $\varepsilon$  is increased by a factor of 1.3 as that is the estimated rate increase for developing bacterial infections in the absence of daily antibiotics. Therefore,  $\hat{\varepsilon}_i = 1.3 \varepsilon_i$  [18].

<b>Parm.</b>	<b>Definition</b>	<b>Estimate</b>	<b>Reference</b>
$\alpha_1, \alpha_2$	Effective rate of contact from $L_r$ to $H$	0.3/week	[30, 38]
$\beta_1, \beta_2$	Effective rate of contact from $L_r$ to $L_w$	0.3/week	[30, 38]
$\eta_1, \eta_2$	Effective rate of contact from $I_w$ to $H$	0.3/week	[30, 38]
$\phi_1$	Rate of contracting ABR infection from environment	.0000175/week	
$\phi_2$		.000492/week	
$\omega_1, \omega_2$	Rate of spontaneous development of resistance due to interaction with antibiotics	0.0005/week	[17]
$\varepsilon_1$	Rate of developing ABS infection due to environment, stress, etc (amplification of bacteria)	.0089/week	
$\varepsilon_2$		.00967/week	
$\gamma_1, \gamma_2$	Rate of treatment in $I_w$	0.5/week	[4, 8, 26, 27]
$p_1, p_2$	Proportion of successful treatment in $I_w$	0.86	[17, 41]
$\sigma_1, \sigma_2$	Rate of successful treatment in $Q$	0.091/week	[31, 41]
$\nu_1$	Rate of developing symptoms from $L_r$	.1156/week	
$\nu_2$		.00429/week	
$\pi_1$	Rate of developing symptoms from $L_w$	.1156/week	
$\pi_2$		.00429/week	
$\psi_1, \psi_2$	Rate of going to $Q$ from $L_r$	0.5/week	[4, 8, 26, 27]
$\chi_1, \chi_2$	Culling rate from $I_r$	0.001/week	
$\kappa_1, \kappa_2$	Culling rate from $Q$	0.142/week	[31, 41]
<b>Transition to Stage 2</b>			
$\delta$	Proportion of cattle infected due to travel	0.105	[10, 32]
$z$	Proportion of travel-induced ABR infections	0.02	[17, 22]
<b>2017 Legislation</b>			
$\hat{\omega}$	Rate of spontaneous development of resistance due to interaction with antibiotics	0/week	
$\hat{\varepsilon}_1$	Rate of developing ABS infection due to environment, stress, etc (amplification of bacteria)	1.3 $\varepsilon_1$ /week	[18]
$\hat{\varepsilon}_2$		1.3 $\varepsilon_2$ /week	

Table 2: Parameter Descriptions and Values

## 5 Numerical Simulations

### *ODE Results*

Figure 4 shows the number of cattle in each compartment over time using parameter values representative of current practices (Table 2). This pattern is compared to Figure 5, which displays the predicted number of cattle in each compartment after the new legislation is put into place. Comparisons between the two figures predict an increase in the number of cattle colonized with latent antibiotic susceptible (ABS) bacteria along with a drop in the number of healthy cattle and cattle colonized with latent antibiotic resistant (ABR) bacteria. An increase in the latent class size indicates an increased risk of cattle developing ABS infection after 2017. These results are consistent with previous predictions that after new legislation is implemented, the number of cattle with some level of bacterial colonization will increase [24].

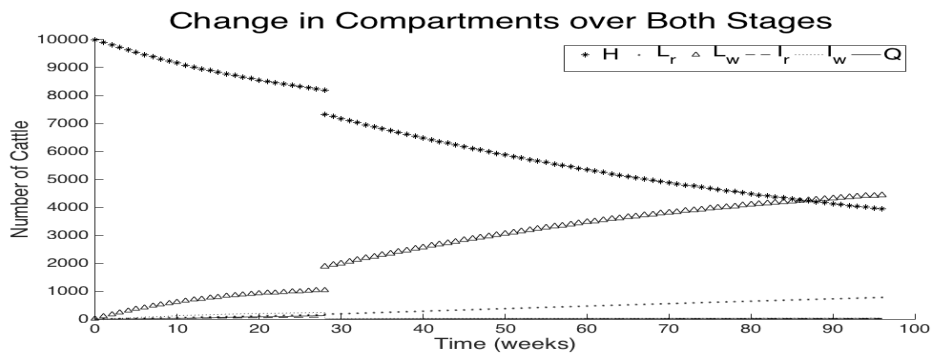


Figure 4: Change in classes during current practices

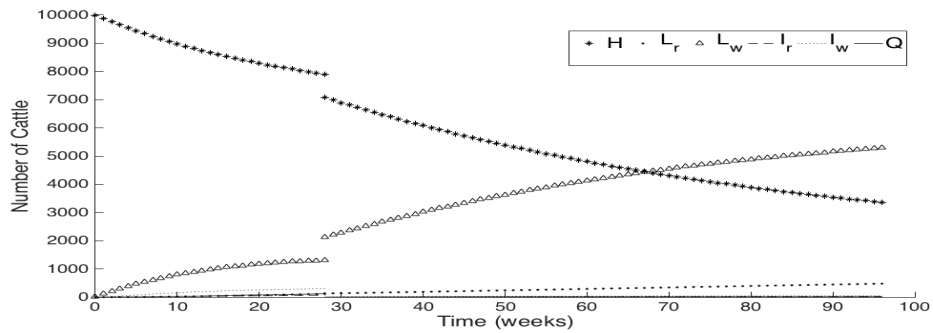


Figure 5: Change in classes under new legislation

Additional numerical analysis of the model focused on the proportion of observably healthy cattle colonized by ABR *M. haemolytica*,  $\Omega$ , the ratio of cattle with ABR to the observably healthy cattle,  $\Lambda$ ; and the proportion of the total herd that appear healthy,  $\Theta$ .

$$\begin{aligned}\Omega &= \frac{L_r}{H + L_r + L_w} \\ \Lambda &= \frac{L_r + I_r + Q}{H + L_r + L_w} \\ \Theta &= \frac{H + L_r + L_w}{H + L_r + L_w + I_r + I_w + Q}\end{aligned}$$

Minimizing  $\Omega$  at  $t_1$  (28 weeks) results in the fewest number of cattle colonized with ABR bacteria that are moved to the feedlot. At  $t_2$  (96 weeks), minimizing  $\Omega$  results in the smallest proportion of ABR bacteria to possibly get into food. Minimizing  $\Lambda$  reduces the contribution of cattle to the reservoir of ABR. Because fewer than 1% of cattle are in both the  $I_r$  and  $Q$  classes at any point in time, the difference between  $\Lambda$  and  $\Omega$  is negligible; therefore, results focus only on  $\Omega$ . In Stage 1,  $\Theta$  is the proportion of cattle that move to the feedlot at time  $t_1$ , and in Stage 2  $\Theta$  is the proportion of cattle that get slaughtered at time  $t_2$ . Maximizing  $\Theta$  at  $t_1$  and  $t_2$  results in the highest proportion of profitable cattle, but not necessarily the highest number as minimizing death is not taken into account. Furthermore, each proportion is relative to the stage and number of other cattle in the system at each point in time and not to the initial number of cattle entered into the system. Therefore, all graphical representations of  $\Theta$  are analyzed in the context of  $\Omega$ .

Under current antibiotic use, the objective functions reveal that over 22 months, the proportion of cattle with ABR increases while the proportion of observably healthy cattle decreases slightly (Fig. 6). Additionally, comparing outputs of objective functions under current legislation to predictions for 2017 reveals a drop in the proportion of cattle with ABR bacteria at slaughter ( $\Omega$ ) after legislation is put into place. However, the proportion of observably healthy cattle ( $\Theta$ ) only shows a slight difference in Stage 1, with no discernible differences in Stage 2 when comparing 2016 to 2017.

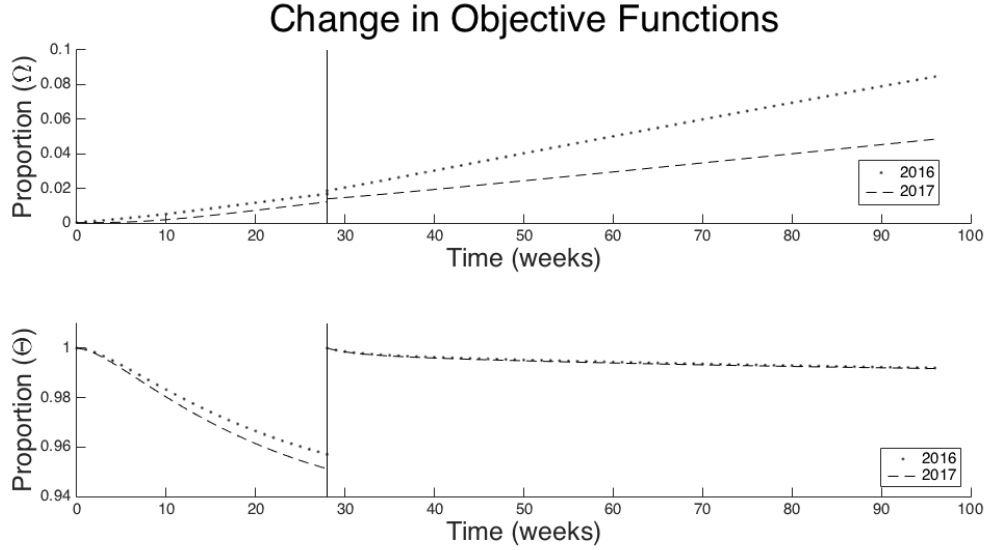


Figure 6: Outputs of ODE Solved Numerically

### ***Uncertainty Quantification & Sensitivity Analysis***

Uncertainty Quantification (UQ) is a global sensitivity analysis that assesses the impact of variation in each parameter on the output of interest. This report uses Latin Hypercube Sampling (LHS) along with Partial Rank Correlation Coefficient (PRCC) to analyze how sensitive  $\Omega$  and  $\Theta$  are to a change in each parameter [6, 7]. Intervals of  $\pm 10\%$  of nominal values found in Table 2 were used for the LHS and assumed to be uniformly distributed.

UQ reveals that under current legislation, the proportion of slaughtered cattle colonized by antibiotic resistant (ABR) bacteria ( $\Omega$ ) is most sensitive to the probability of successful treatment ( $p$ ), the rate at which infectious cattle are brought into quarantine ( $\psi$ ), and the rate of developing ABR *M. haemolytica* through feed and the environment ( $\omega$  and  $\phi$ ) (Fig. 7). Therefore, the most meaningful changes would result from decreasing parameters  $\phi$ , and  $\omega$  and increasing  $p$  and  $\psi$  (Fig. 7).

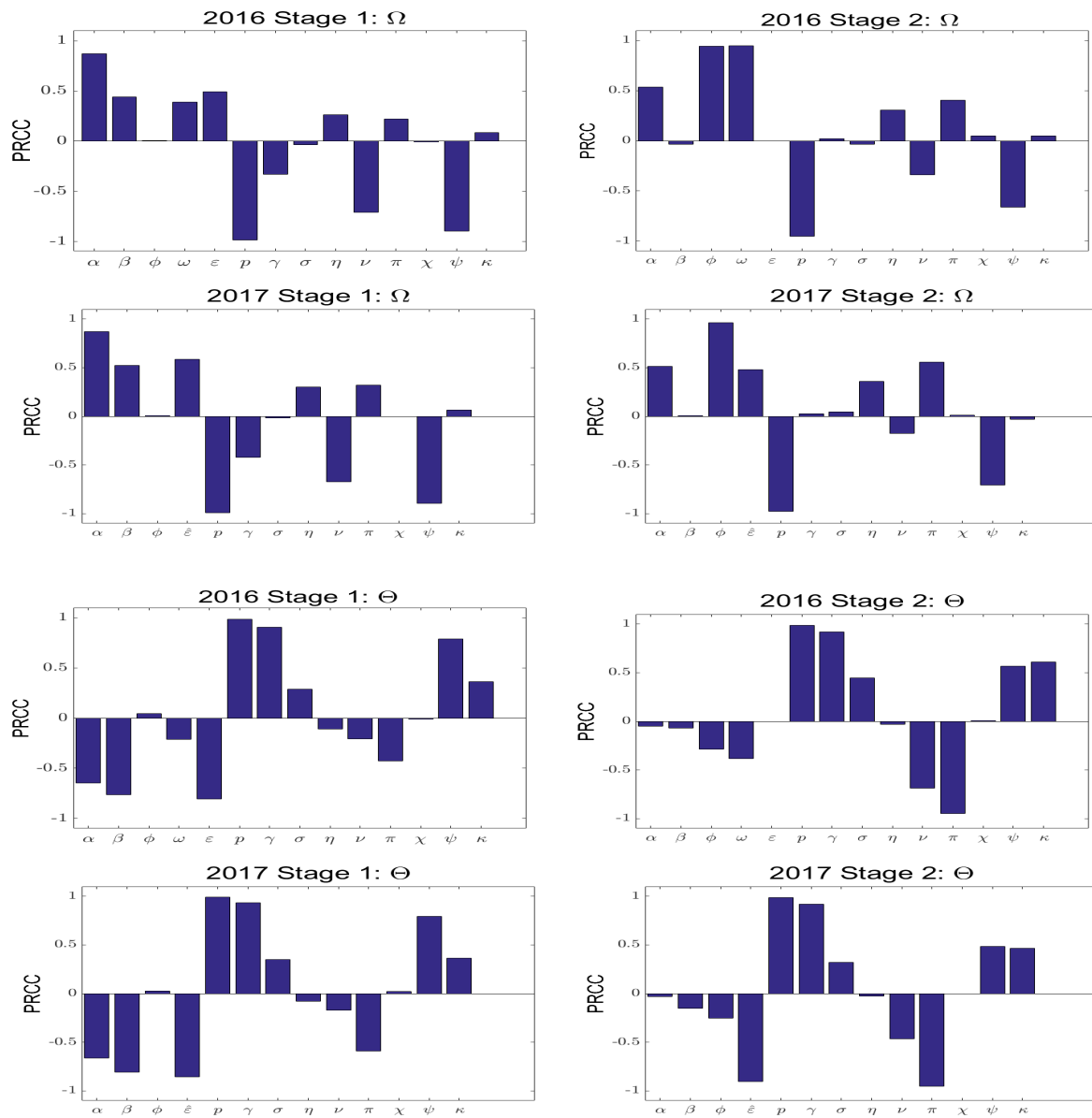


Figure 7: Uncertainty Quantification for  $\Omega$  and  $\Theta$  for 2016 and 2017, specific PRCC values can be found in the Appendix in Tables 5, 6, 7, and 8



Normalized Sensitivity Analysis (SA) shows changes in the output’s sensitivity over time as a result of a 1% change in one input parameter. Observed parameters include:  $\varepsilon, \phi, \psi, \chi$  and  $\kappa$  (Fig. 8). These values were selected due to their ability to be biologically manipulated through sanitation, changes in quarantine rates or capacity, as well as culling rates. SA values show at what point measures to reduce ABR would be most effective. In Stage 1, environment ( $\varepsilon$ ) and quarantine ( $\psi$ ) have the largest impact on  $\Omega$ . After the 2017 legislation is put into place,  $\varepsilon$  is predicted to influence the cattle earlier and with greater impact. Therefore, efforts to decrease rates of ABR from the environment via sanitation should be directed towards cow-calf operations, especially after 2017. In Stage 2, ABR bacteria from the environment ( $\phi$ ) and quarantine ( $\psi$ ) have the largest impact on  $\Omega$ .

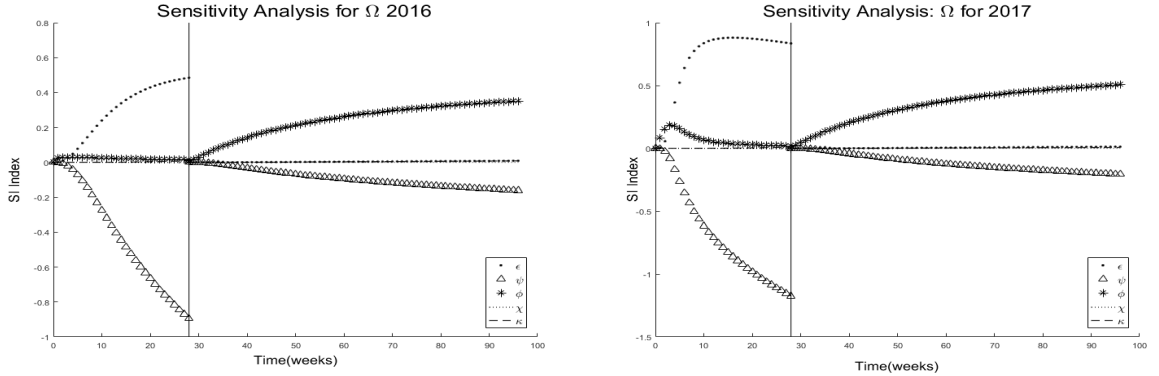


Figure 8: Sensitivity analysis for  $\Omega$  in both 2016 and 2017

### ***Parameter Perturbation***

The practice of quarantine and culling are arguably the most simple parameters to alter as both are already in practice at cow-calf operations and feedlots. In order to examine their influence on the system, parameters  $\psi$  and  $\chi$  are varied while numerically analyzing the changes in  $\Omega$  and  $\Theta$ . The minimum value of each function is then estimated to find the rates of  $\psi$  and  $\chi$  that result in the most ideal outputs.

Figure 9 reveals that culling and quarantine rates have an effect on reducing  $\Omega$ . The proportion of slaughtered cattle with ABR decreases as  $\psi$  increases; for values of  $\psi < 0.5$  per week a sharp decrease is observed. The decrease is less dramatic for  $\psi > 1$  per week. Similar patterns are observed for  $\chi$ . Therefore, values between 0.5 and 1 per week would be ideal for maximizing efficiency in reducing incidences of ABR in cattle.

After new legislation is enacted, parameter perturbations predict an overall drop in  $\Omega$ . Values between 0.5 and 1 per week are still most efficient for  $\psi$  and  $\chi$ . However, values below 0.5 per week show marked improvement over current scenarios. This is beneficial because risk of infection with antibiotic susceptible *M. haemolytica* is increased without suppression of bacterial growth by antibiotics. Therefore, while increased rates of quarantine or culling may not

be realistic, the ratio of cattle with latent ABR bacteria at slaughter should still decrease in comparison to current practices.

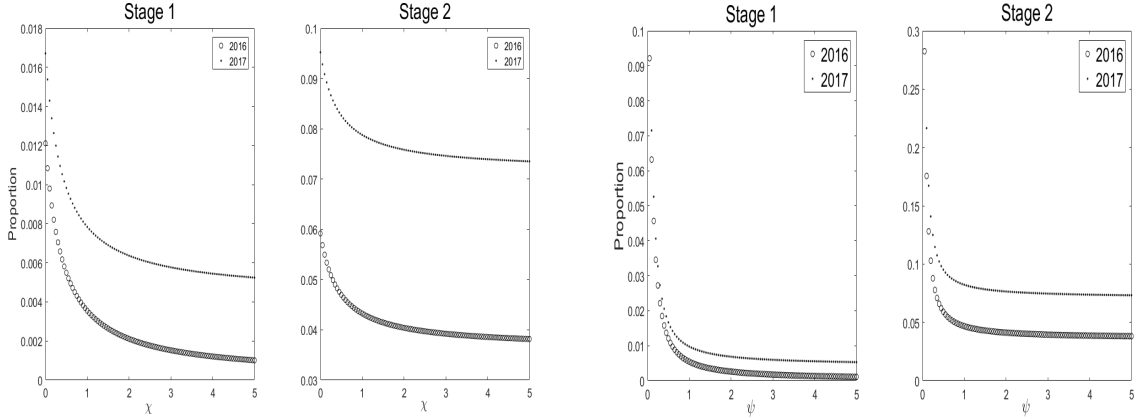


Figure 9: Parameter perturbations and changes in  $\Omega$  over time

### ***SDE Results***

Cattle are often exposed to the elements; thus, changes in weather and seasons affect the health of the cattle. To account for this variation in circumstances, and therefore to ensure that the differences in results obtained using the ODE system are meaningful, and not due to random chance, an SDE system is employed. The model is run through both stages for each iteration of the stochastic process, and the initial conditions for the second stage are obtained via the same method used for the ODE system. The distribution of both outputs at  $t_2$  (Fig. 10) allows for assessment of the difference between outputs before and after new legislation. Along with the distribution of  $\Omega$  and  $\Theta$ , Table 3 gives the summary statistics for each output for both years. The Kolmogorov-Smirnov (KS) two-sample test is employed to test the differences [13]. The difference between the distributions  $\Omega$  before and after 2017 legislation significantly differ ( $D = 1, p = 2.2E-16$ ). However, for  $\Theta$ , no statistical or practical differences are found ( $D = 0.12, p = .8693$ ). Similar results can be obtained through other statistical tests such as a t-test for differences between the means of each distribution.

The proportion of slaughtered cattle with antibiotic resistant (ABR) bacteria ( $\Omega$ ) significantly decreased from 2016 to 2017. The model also predicts that the proportion of observably healthy cattle does not decrease after legislation is implemented, and thus profit may not decrease due to health of cattle.

Variable	Year	Mean	Std. Dev.	Min.	Med.	Max.
$\Omega$	2016	0.0847	0.0031	0.0747	0.0847	0.0928
	2017	0.0524	0.0027	0.0433	0.0523	0.0605
$\Lambda$	2016	0.0886	0.0032	0.0779	0.0886	0.0974
	2017	0.0558	0.0029	0.0457	0.0558	0.0656
$\Theta$	2016	0.9919	0.0009	0.9889	0.9920	.9955
	2017	0.9917	0.0010	0.9883	0.9917	0.9943
N			1000			

Table 3: SDE output summary statistics for 2016 and 2017, where N is the number of different stochastic runs.

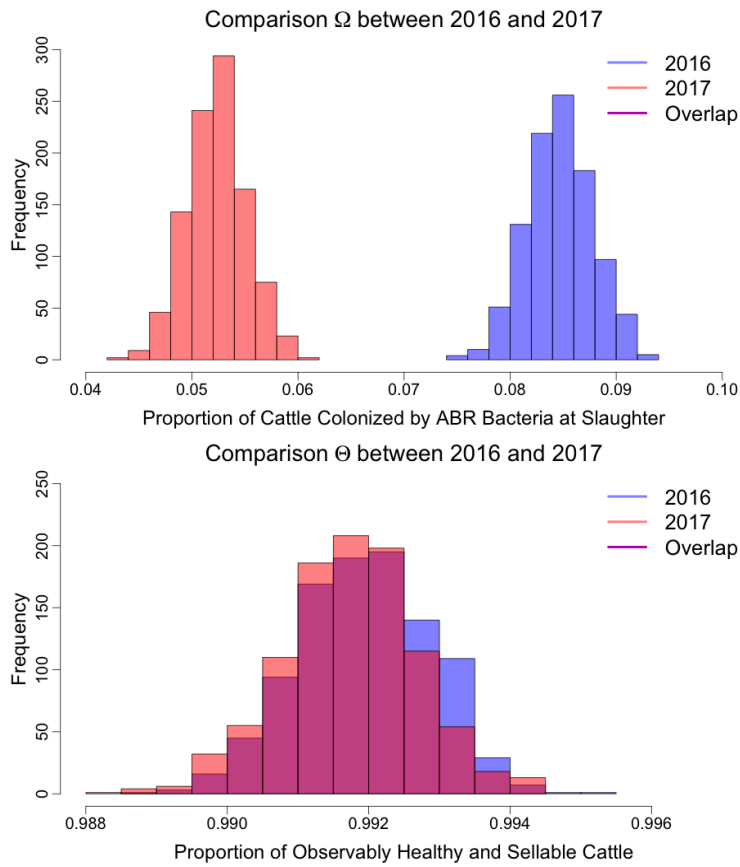


Figure 10: Comparison of distributions of  $\Omega$ , and  $\Theta$  at  $t_2$  between 2016 and 2017.

## 6 Discussion

Antibiotic resistance and the potential spread of ABR bacteria between humans and animals is an important but complex issue. ABR *M. haemolytica* in beef cattle is just one small part of the issue. However, using mathematical models, it is possible to better understand the spread of resistance and formulate targeted strategies to combat the issue. After January 1, 2017, the Veterinary Feed Directive (VFD) will restrict the use of antibiotics to prescription by a veterinarian. This model shows that decreasing or eliminating antibiotics in cattle feed will successfully reduce the proportion of cattle with ABR at slaughter by an average of 3.2%. However, this change comes with the possibility of increased levels of infection throughout the cattle population. This model predicts that after 2017, efforts to reduce ABR in cattle will be most effectively placed in improving successful treatment rates, detecting infectious cattle earlier, and increasing sanitation of the environment.

The ideal rate of isolation occurs within two weeks of cattle showing symptoms. After the VFD is put into place, ideal quarantine rates will continue to be 0.5 to 1 per week, with an overall drop in the proportion of cattle with ABR at slaughter. Distributions of the proportions of cattle with ABR at slaughter in 2016 and 2017 are statistically different, with 2017 being visibly lower. Our model predicts that not only will the VFD significantly reduce the spread of ABR bacteria within a cattle population, but that overall health of herd will not significantly decline.

Accuracy of this model could be improved by better parameter estimations. Biological accuracy of parameters were affected by the lack of data. Inclusion of a spontaneous recovery rates could help provide a more accurate picture. Because cattle spend a majority of their lives outdoors, environmental factors such as weather and seasonal conditions play a major role in BRD. Additionally, the majority of cattle with asymptomatic BRD are not discovered until after slaughter. While current options are cost prohibitive, testing cattle for ABR periodically during the two stages of life would provide a basis for understanding the progression of resistance through the cohort. Future directions may include incorporating reinfection history as well as profit according to the number of times cattle have been infected.

Although this model is a simplification of reality, results indicate that isolation and culling, as well as early detection of disease and sanitation, are effective in slowing ABR in beef cattle. These strategies make a significant difference, not just in the cattle population, but in the environment which affects humans. This conclusion provides motivation to continue efforts to better understand and address BRD and antibiotic use in cattle. By diligent and deliberate care of food animals, the spread of antibiotic resistant bacteria can be slowed, saving antibiotics for the life-saving measures for which they were first designed.

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## References

- [1] *FACT SHEET: President's 2016 Budget Proposes Historic Investment to Combat Antibiotic-Resistant Bacteria to Protect Public Health*, public statement. 2015. <https://www.whitehouse.gov/the-press-office/2015/01/27/fact-sheet-president-s-2016-budget-proposes-historic-investment-combat-a> (Accessed 2016-07-24).
- [2] E. J. ALLEN, L. J. ALLEN, A. ARCINIEGA, AND P. E. GREENWOOD, *Construction of equivalent stochastic differential equation models*, *Stochastic Analysis and Applications*, 26 (2008), pp. 274–297.
- [3] R. I. AMINOV, *A brief history of the antibiotic era: lessons learned and challenges for the future*, *Frontiers in Microbiology*, 1 (2010), p. 134.
- [4] M. D. APLEY, *Susceptibility testing for bovine respiratory and enteric disease*, *Veterinary Clinics of North America: Food Animal Practice*, 19 (2003), pp. 625–646.
- [5] M. D. APLEY, S. A. BROWN, P. J. FEDORKA-CRAY, S. FERENC, J. HOUSE, J. RIVIERE, L. RICE, C. THORNSBERRY, AND J. WADDELL, *Role of veterinary therapeutics in bacterial resistance development: animal and public health perspectives*, *Journal of the American Veterinary Medical Association*, 212 (1998), pp. 1209–1213.
- [6] L. ARRIOLA AND J. M. HYMAN, *Sensitivity analysis for uncertainty quantification in mathematical models*, in *Mathematical and Statistical Estimation Approaches in Epidemiology*, Springer, 2009, pp. 195–247.
- [7] L. M. ARRIOLA AND J. M. HYMAN, *Being sensitive to uncertainty*, *Computing in Science & Engineering*, 9 (2007), pp. 10–20.
- [8] BCRC, *Bovine Respiratory Disease*, webpage. 2016. <http://www.beefresearch.ca/research-topic.cfm/bovine-respiratory-disease-38> (Accessed 2016-07-10).
- [9] C. T. BERGSTROM, M. LO, AND M. LIPSITCH, *Ecological theory suggests that antimicrobial cycling will not reduce antimicrobial resistance in hospitals*, *Proceedings of the National Academy of Sciences of the United States of America*, 101 (2004), pp. 13285–13290.
- [10] N. D. BEUS C, SMITH S, *Management Approaches to Reduce Transportation Stress Risk For BRD: Bovine Respiratory Disease Complex Series*, report. 2013. WSU Animal Science and Veterinary Medicine Extension. <https://articles.extension.org/sites/default/files/Management%20Approaches%20to%20Reduce%20Transportation%20Stress%20Risk%20for%20BRD.pdf> (Accessed 12-11-2016).
- [11] Q. CHANG, W. WANG, G. REGEV-YOCHAY, M. LIPSITCH, AND W. P. HANAGE, *Antibiotics in agriculture and the risk to human health: how worried should we be?*, *Evolutionary Applications*, 8 (2015), pp. 240–247.

- [12] K. CHOW, X. WANG, R. CURTISS III, AND C. CASTILLO-CHAVEZ, *Evaluating the efficacy of antimicrobial cycling programmes and patient isolation on dual resistance in hospitals*, *Journal of Biological Dynamics*, 5 (2011), pp. 27–43.
- [13] G. W. CORDER AND D. I. FOREMAN, *Nonparametric statistics: A step-by-step approach*, John Wiley & Sons, 2014.
- [14] P. CUNEO DVM. personal communication. (2016).
- [15] J. CURRIN AND W. D. WHITTIE, *Recognition and Treatment of Bovine Respiratory Disease Complex*, 2009. Virginia Cooperative Extension. [https://pubs.ext.vt.edu/400/400-008/400-008\\_pdf.pdf](https://pubs.ext.vt.edu/400/400-008/400-008_pdf.pdf) (Accessed 2016-07-18).
- [16] J. F. CURRIN, *Strategic Use of Antibiotics in Stocker Cattle*, 2005. Virginia Cooperative Extension. [http://pubs.ext.vt.edu/400/400-307/400-307\\_pdf.pdf](http://pubs.ext.vt.edu/400/400-307/400-307_pdf.pdf) (Accessed 2016-07-18).
- [17] K. DEDONDER AND M. APLEY, *A literature review of antimicrobial resistance in pathogens associated with bovine respiratory disease*, *Animal Health Research Reviews*, 16 (2015), pp. 125–134.
- [18] G. C. DUFF AND M. L. GALYEAN, *Board-invited review: recent advances in management of highly stressed, newly received feedlot cattle*, *Journal of Animal Science*, 85 (2007), pp. 823–840.
- [19] T. FRIEDEN, *House Committee on Energy and Commerce, Subcommittee on Health Antibiotic Resistance and the Threat to Public Health*, CDC report. 2010. <http://www.cdc.gov/drugresistance/pdf/friedentestimony42810.pdf> (Accessed 2016-07-11).
- [20] P. E. GREENWOOD AND L. F. GORDILLO, *Stochastic epidemic modeling*, in *Mathematical and Statistical Estimation Approaches in Epidemiology*, Springer, 2009, pp. 31–52.
- [21] A. H. HOLMES, L. S. MOORE, A. SUNDSFJORD, M. STEINBAKK, S. REGMI, A. KARKEY, P. J. GUERIN, AND L. J. PIDDOCK, *Understanding the mechanisms and drivers of antimicrobial resistance*, *The Lancet*, 387 (2016), pp. 176–187.
- [22] C. L. KLIMA, T. W. ALEXANDER, S. HENDRICK, AND T. A. MCALLISTER, *Characterization of mannheimia haemolytica isolated from feedlot cattle that were healthy or treated for bovine respiratory disease*, *Canadian Journal of Veterinary Research*, 78 (2014), pp. 38–45.
- [23] T. F. LANDERS, B. COHEN, T. E. WITTUM, AND E. L. LARSON, *A review of antibiotic use in food animals: perspective, policy, and potential*, *Public health reports*, (2012), pp. 4–22.
- [24] S. A. MCEWEN AND P. J. FEDORKA-CRAY, *Antimicrobial use and resistance in animals*, *Clinical Infectious Diseases*, 34 (2002), pp. S93–S106.

- [25] N. MUGGLI-COCKETT, L. CUNDIFF, AND K. GREGORY, *Genetic analysis of bovine respiratory disease in beef calves during the first year of life.*, Journal of Animal Science, 70 (1992), pp. 2013–2019.
- [26] R. NICHOLAS, *Bovine mycoplasmosis: silent and deadly*, Veterinary Record-English Edition, 168 (2011), p. 459.
- [27] NUFLOR, *Bovine Respiratory Disease: A New Look at Causes and Signs of Disease*, webpage. 2016. <http://www.nuflor.com/diseases/brd-nlac.asp> (Accessed 2016-07-11).
- [28] N. NYAMUSIKA, T. H. SPREEN, O. RAE, AND C. MOSS, *A bioeconomic analysis of bovine respiratory disease complex*, Review of Agricultural Economics, 16 (1994), pp. 39–53.
- [29] PCAST, *Report to the President on Combating Antibiotic Resistance*, presidential report. 2014. [https://www.whitehouse.gov/sites/default/files/microsites/ostp/PCAST/pcast\\_amr\\_jan2015.pdf](https://www.whitehouse.gov/sites/default/files/microsites/ostp/PCAST/pcast_amr_jan2015.pdf) (Accessed 2016-07-11).
- [30] J. RIDPATH, *The contribution of infections with bovine viral diarrhoea viruses to bovine respiratory disease*, Veterinary Clinics of North America: Food Animal Practice, 26 (2010), pp. 335–348.
- [31] B. RUTHERFORD, *Handling Sick Cattle in the Feedyard*, webpage. 2010. <http://beefmagazine.com/health/handling-sick-cattle-in-feedyard-0901> (Accessed 2016-07-14).
- [32] M. W. SANDERSON, D. A. DARGATZ, AND B. A. WAGNER, *Risk factors for initial respiratory disease in united states’ feedlots based on producer-collected daily morbidity counts*, Canadian Veterinary Journal, 49 (2008), pp. 373–378.
- [33] M. SCHNEIDER, R. TAIT, W. BUSBY, AND J. REECY, *An evaluation of bovine respiratory disease complex in feedlot cattle: Impact on performance and carcass traits using treatment records and lung lesion scores*, Journal of Animal Science, 87 (2009), pp. 1821–1827.
- [34] G. SMITH AND C. CHEESEMAN, *A mathematical model for the control of diseases in wildlife populations: culling, vaccination and fertility control*, Ecological Modelling, 150 (2002), pp. 45–53.
- [35] S. SNEERINGER, J. MACDONALD, N. KEY, W. MCBRIDE, K. MATHEWS, ET AL., *Economics of antibiotic use in us livestock production*, USDA Economic Research Service Report, 200 (2015).
- [36] G. SNOWDER, L. D. VAN VLECK, L. CUNDIFF, AND G. BENNETT, *Influence of breed, heterozygosity, and disease incidence on estimates of variance components of respiratory disease in preweaned beef calves*, Journal of animal science, 83 (2005), pp. 1247–1261.



- [37] G. SNOWDER, L. D. VAN VLECK, L. CUNDIFF, AND G. BENNETT, *Bovine respiratory disease in feedlot cattle: environmental, genetic, and economic factors*, Journal of Animal Science, 84 (2006), pp. 1999–2008.
- [38] E. TIMSIT, H. CHRISTENSEN, N. BAREILLE, H. SEEGER, M. BISGAARD, AND S. ASSIÉ, *Transmission dynamics of mannheimia haemolytica in newly-received beef bulls at fattening operations*, Veterinary Microbiology, 161 (2013), pp. 295–304.
- [39] A. E. VAN DEN BOGAARD AND E. E. STOBBERINGH, *Epidemiology of resistance to antibiotics: links between animals and humans*, International Journal of Antimicrobial Agents, 14 (2000), pp. 327–335.
- [40] V. V. VOLKOVA, Z. LU, C. LANZAS, H. M. SCOTT, AND Y. T. GRÖHN, *Modelling dynamics of plasmid-gene mediated antimicrobial resistance in enteric bacteria using stochastic differential equations*, Scientific Reports, 3 (2013).
- [41] J. L. WATTS AND M. T. SWEENEY, *Antimicrobial resistance in bovine respiratory disease pathogens: measures, trends, and impact on efficacy*, Veterinary Clinics of North America: Food Animal Practice, 26 (2010), pp. 79–88.
- [42] H. WEGENER, *A15 antibiotic resistance—linking human and animal health*, in Institute of Medicine (US). Improving Food Safety through a One Health Approach: Workshop Summary. National Academies Press, Washington, DC, USA, 2012.
- [43] H. C. WEGENER, *Antibiotics in animal feed and their role in resistance development*, Current Opinion in Microbiology, 6 (2003), pp. 439–445.
- [44] R. ZAHEER, S. COOK, C. KLIMA, K. STANFORD, T. ALEXANDER, E. TOPP, R. READ, AND T. MCALLISTER, *Effect of subtherapeutic vs. therapeutic administration of macrolides on antimicrobial resistance in mannheimia haemolytica and enterococci isolated from beef cattle*, Frontiers in microbiology, 4 (2013), p. 133.

## Appendix

Event	Transition	Rate	Wiener Trajectory
$H \rightarrow L_r$	(-1 1 0 0 0 0)	$\alpha \frac{I_r}{N}$	$W_1$
$H \rightarrow L_r$	(-1 1 0 0 0 0)	$\phi + \omega$	$W_2$
$H \rightarrow L_w$	(-1 0 1 0 0 0)	$\eta \frac{I_w}{N}$	$W_3$
$H \rightarrow L_w$	(-1 0 1 0 0 0)	$\varepsilon$	$W_4$
$I_w \rightarrow H$	(1 0 0 0 -1 0)	$p\gamma$	$W_5$
$Q \rightarrow H$	(1 0 0 0 -1 0)	$\sigma$	$W_6$
$L_w \rightarrow L_r$	(0 1 -1 0 0 0)	$\beta \frac{I_r}{N}$	$W_7$
$L_w \rightarrow L_r$	(0 1 -1 0 0 0)	$\phi + \omega$	$W_8$
$L_w \rightarrow I_w$	(0 0 -1 0 1 0)	$\pi$	$W_9$
$L_r \rightarrow I_r$	(0 -1 0 1 0 0)	$\nu$	$W_{10}$
$I_w \rightarrow I_r$	(0 0 0 1 -1 0)	$(1 - p)\gamma$	$W_{11}$
$I_r \rightarrow Q$	(0 0 0 -1 0 1)	$\psi$	$W_{12}$
$I_r \rightarrow out$	(0 0 0 -1 0 0)	$\chi$	$W_{13}$
$Q \rightarrow out$	(0 0 0 0 0 -1)	$\kappa$	$W_{14}$

$(H \ L_r \ L_w \ I_r \ I_w \ Q)$

Table 4: Description of transitions including rates and random Wiener trajectory used in the stochastic differential equations. For a more theoretical discussion of the transitions and breakdown of the stochastic process, look to Allen et al. (2008) [2]

$\Omega$			$\Lambda$			$\Theta$		
Par.	PRCC	P-Value	Par.	PRCC	P-Value	Par.	PRCC	P-Value
$\alpha$	-0.6497	$1.9920e - 119$	$\alpha$	0.8556	$5.3596e - 284$	$\alpha$	0.8733	$6.3284e - 310$
$\beta$	-0.7676	$1.7584e - 192$	$\beta$	0.5634	$9.6252e - 84$	$\beta$	0.4420	$1.8414e - 48$
$\phi$	0.0430	$1.7679e - 01$	$\phi$	-0.0089	$7.7908e - 01$	$\phi$	0.0050	$8.7570e - 01$
$\omega$	-0.2127	$1.4501e - 11$	$\omega$	0.3630	$4.2024e - 32$	$\omega$	0.3894	$4.3109e - 37$
$\epsilon$	-0.8080	$1.4052e - 228$	$\epsilon$	0.6109	$5.1195e - 102$	$\epsilon$	0.4940	$7.4433e - 62$
$p$	0.9849	$0.0000e + 00$	$p$	-0.9908	$0.0000e + 00$	$p$	-0.9846	$0.0000e + 00$
$\gamma$	0.9036	$0.0000e + 00$	$\gamma$	-0.4695	$2.9209e - 55$	$\gamma$	-0.3297	$1.8908e - 26$
$\sigma$	0.2889	$1.9747e - 20$	$\sigma$	-0.2307	$2.1457e - 13$	$\sigma$	-0.0349	$2.7308e - 01$
$\eta$	-0.1084	$6.4638e - 04$	$\eta$	0.2380	$3.5642e - 14$	$\eta$	0.2650	$2.4920e - 17$
$\nu$	-0.2085	$3.6791e - 11$	$\nu$	-0.3799	$3.1217e - 35$	$\nu$	-0.7114	$4.6930e - 153$
$\pi$	-0.4263	$7.5035e - 45$	$\pi$	0.2893	$1.7797e - 20$	$\pi$	0.2200	$2.7549e - 12$
$\chi$	-0.0123	$6.9996e - 01$	$\chi$	0.0086	$7.8698e - 01$	$\chi$	-0.0073	$8.1883e - 01$
$\psi$	0.7903	$9.7871e - 212$	$\psi$	-0.9047	$0.0000e + 00$	$\psi$	-0.8974	$0.0000e + 00$
$\kappa$	0.3623	$5.6053e - 32$	$\kappa$	-0.2358	$6.1072e - 14$	$\kappa$	0.0865	$6.5486e - 03$

Table 5: Uncertainty quantification for Stage 1 in 2016

$\Omega$			$\Lambda$			$\Theta$		
Par.	PRCC	P-Value	Par.	PRCC	P-Value	Par.	PRCC	P-Value
$\alpha$	-0.6650	$3.7333e - 127$	$\alpha$	0.8469	$1.1728e - 272$	$\alpha$	0.8708	$2.6626e - 306$
$\beta$	-0.8101	$7.5661e - 231$	$\beta$	0.6125	$8.6387e - 103$	$\beta$	0.5233	$1.5171e - 70$
$\phi$	0.0281	$3.7833e - 01$	$\phi$	0.0176	$5.7982e - 01$	$\phi$	0.0074	$8.1584e - 01$
$\epsilon$	-0.8564	$2.2181e - 285$	$\epsilon$	0.6842	$2.5185e - 137$	$\epsilon$	0.5862	$2.9639e - 92$
$p$	0.9902	$0.0000e + 00$	$p$	-0.9935	$0.0000e + 00$	$p$	-0.9900	$0.0000e + 00$
$\gamma$	0.9336	$0.0000e + 00$	$\gamma$	-0.5407	$4.3898e - 76$	$\gamma$	-0.4219	$6.4494e - 44$
$\sigma$	0.3510	$4.9933e - 30$	$\sigma$	-0.2332	$1.1512e - 13$	$\sigma$	-0.0162	$6.1126e - 01$
$\eta$	-0.0804	$1.1518e - 02$	$\eta$	0.2605	$8.7320e - 17$	$\eta$	0.3011	$3.8018e - 22$
$\nu$	-0.1727	$4.6647e - 08$	$\nu$	-0.3583	$2.7200e - 31$	$\nu$	-0.6731	$2.4827e - 131$
$\pi$	-0.5896	$1.5381e - 93$	$\pi$	0.3878	$8.3678e - 37$	$\pi$	0.3187	$9.2152e - 25$
$\chi$	0.0214	$5.0080e - 01$	$\chi$	-0.0047	$8.8190e - 01$	$\chi$	-0.0014	$9.6569e - 01$
$\psi$	0.7936	$5.5007e - 215$	$\psi$	-0.8992	$0.0000e + 00$	$\psi$	-0.8971	$0.0000e + 00$
$\kappa$	0.3629	$3.9900e - 32$	$\kappa$	-0.2382	$3.2646e - 14$	$\kappa$	0.0668	$3.5843e - 02$

Table 6: Uncertainty quantification for Stage 1 in 2017

$\Omega$			$\Lambda$			$\Theta$		
Par.	PRCC	P-Value	Par.	PRCC	P-Value	Par.	PRCC	P-Value
$\alpha$	-0.0519	1.0288e - 01	$\alpha$	0.5103	1.5036e - 66	$\alpha$	0.5363	1.3418e - 74
$\beta$	-0.0712	2.5373e - 02	$\beta$	-0.0375	2.3974e - 01	$\beta$	-0.0356	2.6355e - 01
$\phi$	-0.2879	2.7304e - 20	$\phi$	0.9374	0.0000e + 00	$\phi$	0.9454	0.0000e + 00
$\omega$	-0.3832	6.9694e - 36	$\omega$	0.9400	0.0000e + 00	$\omega$	0.9478	0.0000e + 00
$\epsilon$	NaN	NaN	$\epsilon$	NaN	NaN	$\epsilon$	NaN	NaN
$p$	0.9880	0.0000e + 00	$p$	-0.9663	0.0000e + 00	$p$	-0.9514	0.0000e + 00
$\gamma$	0.9170	0.0000e + 00	$\gamma$	0.0105	7.4160e - 01	$\gamma$	0.0220	4.9037e - 01
$\sigma$	0.4479	7.2597e - 50	$\sigma$	-0.0967	2.3661e - 03	$\sigma$	-0.0351	2.7070e - 01
$\eta$	-0.0316	3.2097e - 01	$\eta$	0.2841	8.7907e - 20	$\eta$	0.3055	8.9933e - 23
$\nu$	-0.6870	8.9231e - 139	$\nu$	-0.1858	4.0672e - 09	$\nu$	-0.3372	1.1473e - 27
$\pi$	-0.9470	0.0000e + 00	$\pi$	0.4613	3.6316e - 53	$\pi$	0.4037	5.6643e - 40
$\chi$	0.0085	7.8980e - 01	$\chi$	0.0524	9.9931e - 02	$\chi$	0.0482	1.3043e - 01
$\psi$	0.5674	3.6619e - 85	$\psi$	-0.6776	1.3282e - 133	$\psi$	-0.6646	8.5915e - 127
$\kappa$	0.6120	1.7853e - 102	$\kappa$	-0.0639	4.4734e - 02	$\kappa$	0.0479	1.3303e - 01

Table 7: Uncertainty quantification for Stage 2 in 2016

$\Omega$			$\Lambda$			$\Theta$		
Par.	PRCC	P-Value	Par.	PRCC	P-Value	Par.	PRCC	P-Value
$\alpha$	-0.0322	3.1213e - 01	$\alpha$	0.4988	2.8516e - 63	$\alpha$	0.5151	4.6606e - 68
$\beta$	-0.1525	1.4580e - 06	$\beta$	0.0119	7.0938e - 01	$\beta$	0.0089	7.7944e - 01
$\phi$	-0.2540	5.1392e - 16	$\phi$	0.9565	0.0000e + 00	$\phi$	0.9603	0.0000e + 00
$\epsilon$	-0.9056	0.0000e + 00	$\epsilon$	0.5419	1.7617e - 76	$\epsilon$	0.4783	1.2856e - 57
$p$	0.9889	0.0000e + 00	$p$	-0.9853	0.0000e + 00	$p$	-0.9774	0.0000e + 00
$\gamma$	0.9210	0.0000e + 00	$\gamma$	0.0276	3.8585e - 01	$\gamma$	0.0274	3.8989e - 01
$\sigma$	0.3228	2.1557e - 25	$\sigma$	-0.0313	3.2532e - 01	$\sigma$	0.0474	1.3651e - 01
$\eta$	-0.0249	4.3349e - 01	$\eta$	0.3572	4.2058e - 31	$\eta$	0.3601	1.2654e - 31
$\nu$	-0.4661	1.9930e - 54	$\nu$	-0.0706	2.6511e - 02	$\nu$	-0.1775	1.9484e - 08
$\pi$	-0.9512	0.0000e + 00	$\pi$	0.6391	1.6253e - 114	$\pi$	0.5574	1.0248e - 81
$\chi$	-0.0026	9.3533e - 01	$\chi$	0.0079	8.0442e - 01	$\chi$	0.0105	7.4277e - 01
$\psi$	0.4850	1.9564e - 59	$\psi$	-0.7216	1.1346e - 159	$\psi$	-0.7047	3.9121e - 149
$\kappa$	0.4678	7.2265e - 55	$\kappa$	-0.1362	1.7318e - 05	$\kappa$	-0.0293	3.5806e - 01

Table 8: Uncertainty quantification for Stage 2 in 2017