Climate change induces demographic resistance to disease in novel coral assemblages

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Edited by David M. Karl, University of Hawaii, Honolulu, HI, and approved December 15, 2010 (received for review October 14, 2010)

Climate change is reshaping biological communities and has already generated novel ecosystems. The functioning of novel ecosystems could depart markedly from that of existing systems and therefore obscure the impacts of climate change. We illustrate this possibility for coral reefs, which are at the forefront of climatic stress. Disease has been a principal cause of reef degradation and is expected to worsen with increased future thermal stress. However, using a field-tested epizoological model, we show that high population turnover within novel ecosystems enhances coral resistance to epizootics. Thus, disease could become a less important driver of change in the future. We emphasize the need to move away from projections based on historic trends toward predictions that account for novel behavior of ecosystems under climate change.

Climate change is altering ecosystems (1, 2) and causing unprecedented degradation in sensitive systems such as coral reefs. For millennia, Caribbean coral reefs were built by large, long-lived corals whose life history strategy tolerated disturbance and only rarely allowed colonization of new space (3). However, proliferation of coral epizootics over the last few decades has led to a massive decline of the reef-building corals (4). The increased disease incidence has been linked to rising sea temperatures that may simultaneously stress the coral host and enhance virulence of the pathogens (5, 6). The strong link between infectious disease outbreaks and rising sea temperature has inevitably led to projections of increased epizootics in the future (7). Indeed, the overwhelming current trend in ecosystems science emphasizes additive or synergistic deleterious effects of climate change (2, 8).

However, climate change has resulted in the emergence of novel coral assemblages, whose ecological properties are in marked contrast to those seen in previous millennia (9). Whereas the Caribbean coral assemblages were once dominated by large, long-lived species (e.g., Acropora cervicornis and Montastraea annularis), they now increasingly comprise small-bodied, fast-growing species that brood their larvae and recruit frequently (e.g., Porites astreoides and Agaricia agaricites) (10) (Fig. 1). By investigating changes in coral demography, likely borne of climate change, we discover mechanisms that counter the current projections of climate impacts on coral epizootics. We find that allowing for a more dynamic population turnover in an epizoological model of coral disease not only gives a superior fit to empirical data, but also suggests that emerging coral assemblages could be far less prone to epizootics. In challenging current understanding of the importance of disease in coral reefs of the future, our analysis highlights the necessity of considering novel functionality of the novel ecosystems resulting from climate change and other anthropogenic effects.

Results and Discussion

Even our highly generalized expression for infection (*Methods*) offers insight into patterns of disease among coral reefs. Observations of epizootics constrained by threshold levels of coral cover (6) represent a classic epidemiological phenomenon. For an outbreak of disease with transmission rate β to occur, the following condition must be met (11):

$$S^* > \frac{\mu}{\beta}.$$
 [1]

The general observation within the Caribbean that coral species with high population turnover rates are naturally more resistant to epizootics is explained by the direct proportionality between the coral coverage necessary for an outbreak (S^*) and the coral population mortality rate (μ). In this way, higher infection transmission rates (β) necessitate lower densities of susceptible corals for an epizootic to occur. Conversely, populations with a high turnover (thus, high μ) require higher densities of susceptible corals to counter the fact that individual colonies tend not to persist long enough to become infected and to pass on the infection.

The reduced disease susceptibility of postepizootic coral populations is normally attributed to adaptive immunological resistance in surviving individuals (12, 13). An additional explanation for this phenomenon arises when underlying ecological processes are considered. For undisturbed populations of large reef builders, there is negative skewing in the colony size structure (14), meaning the population is dominated by large coral colonies with inherently low turnover rates. Whereas such populations are primed for epizootics (because of a lowered critical threshold coral density, Eq. 1), the opposite is true for positively skewed coral populations that have recently experienced severe perturbations.

We fit our simple model (Eqs. 3a and 3b) to the best time series of coral epizootics available: an outbreak of White Plague type II in a population of Dichocoenia stokesi in the Florida Keys (Fig. 2). The model offers a parsimonious explanation for the observed reduction in secondary disease outbreaks. Coral mortality from the first disease outbreak reduces the average size of a colony in the postoutbreak population. Because smaller colonies have a higher rate of mortality, the average turnover of the postoutbreak population is higher than that before the outbreak. This increase in population turnover makes it more difficult for a second epizootic to occur. For an outbreak to occur, a colony must survive long enough to become infected and then infect, on average, more than one additional colony. This outcome becomes decreasingly likely for a population consisting of small, ephemeral colonies. In short, whereas coral might exhibit adaptive immunological responses (13), we show that higher demographic rates naturally reduce the ability of the disease to spread within a population consisting of diminutive colonies under high flux. A previous model (15), which had greater complexity but lacked the life history dynamism included here, was unable to resolve the secondary epizootic and achieved a poorer fit to the data (Fig. 2). Inclusion of dynamism in demographic rates not only generates a better model fit but also does so with fewer parameters and without explicit space.

Author contributions: L.Y. and P.J.M. designed research; L.Y. and P.J.M. performed research; L.Y. contributed new reagents/analytic tools; L.Y. analyzed data; and L.Y. and P.J.M. wrote the paper.

The authors declare no conflict of interest.

This article is a PNAS Direct Submission.

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Fig. 1. The recent switch in the dominant coral species within Caribbean reefs. Species with low demographic rates, *Acropora cervicornis (Upper Left)* and *Montastraea annularis (Lower Left)*, have been replaced by species with high demographic rates, *Agaricia* spp. (*Upper Right*) and *Porites asteroides* (*Lower Right*).

We conclude that climate change has antagonistic influences on epizoology. First, it has a positive effect on coral susceptibility to infection at an individual level because of rising stress upon hosts and perhaps elevated pathogen abundance or virulence (7). Set against this effect are changes at the assemblage and population level that reduce the risk of epizootics through increased average population turnover. These effects are not confined to novel ecosystems because the elevated mortality rate of corals anticipated under more frequent coral bleaching (8) will also elevate population turnover, attenuating the risk of epizootics. Overall, the net outcome of these conflicting mechanisms depends on the relative magnitudes of the antagonists (Fig. 3), which are currently unclear and will doubtless vary over time and space.

The results of our model also provide a unique perspective to explain the contrasting patterns of coral epizootics in different oceans. In the Caribbean, outbreaks have primarily affected coral species with slow natural turnover rates (16). However, in the Indo-Pacific, epizootics are most common in acroporids that actually exhibit relatively rapid population dynamics (17). On the basis of the conflicting mechanisms illustrated in Fig. 3, we hypothesize that disease transmission rates are higher in the Indo-Pacific to counter the demographic resistance of rapid turnover coral species.

Biotic and abiotic causes of ecosystem novelty have been described (18, 19) but a formal framework is needed. To place our



Fig. 2. White Plague type II prevalence data (circle markers with SE bars) from *Dichocoenia stokes* coral in the Florida Keys. Parameter values are r = 0.25, $\mu_1 = 0.2125$, $\mu_2 = 0.05$, $\beta = 1$, and $\sigma = 0.5$ [sum of squared residuals 0.36, our model (red line) vs. 0.48, previous model (black dashed line)] (15).



Fig. 3. The effects of climate change on the coral population turnover and the transmission rate of infectious disease act antagonistically on the probability of epizootics. The epizootic threshold occurs at R0 = 1, where R0 is calculated as β/μ_1 . Different scenarios of the net effect are illustrated and depend on the relative influence of competing mechanisms.

results in a generic context, we categorized the mechanisms that can potentially give rise to novel ecosystems (Table 1). Our coral reef case study highlights a variety of possible routes to ecosystem novelty. The Caribbean Sea constitutes a novel environment in that it is warmer now than in the recent past (20) and species have responded asymmetrically to change, thereby nullifying the likelihood that such assemblages are merely an early successional state of the original ecosystem (i.e., type 2.2 with a novel ecosystem, Table 1). Alternatively, if the pathogen is a novel biotic agent (21), then a novel ecosystem could arise through both abiotic and biotic drivers (type 3). Our classification also allows us to distinguish an unfamiliar local environment, which is not unprecedented for the biome, from an environment that is completely novel. Distinguishing such changes is important because ecosystem novelty is more likely to occur under a novel environment (19). Our results imply that projecting the future of a novel ecosystem from trends in the recent past may have misleading results. The net outcome of biotic and abiotic change may not be easily generalizable; however, armed with the view of a dynamic and adapting system, predictive efforts can at least be expected to improve.

Methods

In the simplest case, corals (C) are recruited into a susceptible class (S) and become infected (I) with disease transmission rate β . Using the classic mass action approach (22), the rates of change in the susceptible and infected classes are

$$\frac{dS}{dt} = rC - \beta SI - \mu_1$$
 [2a]

$$\frac{dl}{dt} = \beta S l - (\mu_1 + \mu_2) l, \qquad [2b]$$

where *r* represents new coral recruitment, and μ_1 and μ_2 are the respective natural mortality rate and the disease-induced mortality rate of coral. Following disturbance-associated mortality (e.g., epizootic induced), coral coverage is reduced and colony size structure becomes more positively skewed (23). Recruitment rates increase as more free space is made available (24) and average colony mortality rates will be increased with a greater proportion of smaller colonies (25). This life history dynamism can easily be incorporated into our framework:

$$\frac{dS}{dt} = (S + \sigma I) r \left(1 - \frac{C}{K} \right) - S\mu_1 \left(1 - \frac{C}{K} \right) - \beta S I$$
 [3a]

$$\frac{dI}{dt} = \beta SI - I\left(\mu_1\left(1 - \frac{C}{K}\right) + \mu_2\right).$$
[3b]

	Table 1.	Typology of	of ecosystem	responses t	to anthropogenic	changes in	biotic and	abiotic en	vironments
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Туре	Primary driver	Subtype	Examples of mechanism	Ecosystem outcome
Type 1	Biotic	1.1: Invasive species	Direct anthropogenic disturbance	Novel ecosystem
		1.2: Species loss	Direct anthropogenic disturbance	Novel ecosystem
Type 2	Abiotic	2.1: Locally unfamiliar environment	Species resist change	No change
			Symmetrical response of species to change	Ecosystem migration
			Asymmetrical response of species to change	Novel ecosystem
		2.2: Novel environment	Species resist change	No change (unlikely)
			Either symmetrical or asymmetrical response to change	Novel ecosystem
Туре 3	Biotic and abiotic	3.1: Biotic driver does not have abiotic cause	Direct anthropogenic disturbance	Novel ecosystem
		3.2: Abiotic change causes biotic driver	Species range shift	Novel ecosystem

Here, K is the carrying capacity: the level of coral coverage for which new recruitment and natural mortality are effectively zero. $0 \le \sigma \le 1$ allows for reduced recruitment associated with infected colonies.

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ACKNOWLEDGMENTS. We thank Sonia Bejarano Chavarro for her illustrations used in Fig. 1 and Alastair Harborne and two anonymous referees for their useful comments. We thank the Natural Environment Research Council and the Australian Research Council (Laureate Fellowship) for funding.

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