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Rhynchosporium leaf scald disease incidence: seed source and spatial pattern

Topp, CFE; Hughes, G; Nevison, IM; Butler, Adam; Oxley, S; Havis, ND

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3	C. F. E. Topp ^a , G. Hughes ^{a*} , I. M. Nevison ^b , A. Butler ^b , S. J. P. Oxley ^{ac} , N. D. Havis ^a
4	
5	^a Crop & Soil Systems, SRUC, West Mains Road, Edinburgh, EH9 3JG
6	^b Biomathematics and Statistics Scotland, James Clerk Maxwell Building, Peter Guthrie Tait
7	Road, The Kings Buildings, EH9 3FD
8	^c Agriculture and Horticulture Development Board, Stoneleigh Park, Warwickshire, CV8
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^{*} Corresponding author: E-mail <u>gareth.hughes@sruc.ac.uk</u> C.F.E. Topp (E-mail <u>kairsty.topp@sruc.ac.uk</u>) is the submitting author.

19 A programme of field trials for the study of the winter barley – *Rhynchosporium commune* pathosystem is reported. The associated seed-borne disease Rhynchosporium leaf scald is 20 regarded as having an important impact on barley yields. The analysis reported here relates to 21 22 the impact of the seed source (commercial or farm-saved seed) on disease incidence, and to the spatial pattern of Rhynchosporium leaf scald disease incidence. Disease incidence data 23 were calculated from field data recorded as disease severity. Mean disease incidence was 24 25 higher in the crops grown from farm-saved seed than in the crops grown from commercial seed, although we cannot attach great agronomic significance to this result. The spatial 26 27 pattern of Rhynchosporium leaf scald disease incidence was characterized in terms of the binary power law (BPL), and was indicative of an aggregated pattern. Programme-wide BPL 28 results were described using a novel phytopathological application of a random coefficients 29 30 model. These results have application in field sampling for Rhynchosporium leaf scald 31 disease.

32

33 Introduction

Rhynchosporium leaf scald is an important global disease of barley crops in cool temperate 34 35 countries. Epidemics have been reported as far afield as Northern Europe (Shipton et al, 1974; Avrova & Knogge, 2012; Polley et al., 1993), North Africa (Bouajila et al., 2007), 36 37 North and South America (Penner et al., 1998; Carmona et al., 1997) and Australia (Brown, 1985). The disease, caused by the fungal pathogen *Rhynchosporium commune* (formerly *R*. 38 39 secalis), appreciably reduces barley yields. Estimates of economic damage can vary but losses of over 60% have been recorded in Africa (Semeane, 1995) and up to 35% in North 40 41 America (Buchannon & Wallace, 1962; Webster, 1980). From a survey of farmer attitudes covering the period 2011 - 2015, Stetkiewicz et al. (2018) reported that most farmers 42

43 believed foliar diseases of spring-sown barley were important or very important in determining crop yield. Rhynchosporium leaf scald was cited by the majority of farmers 44 45 questioned as being the most common of the three diseases covered by the survey 46 (Rhynchosporium leaf scald, Ramularia leaf spot caused by Ramularia collo-cygni and powdery mildew caused by Blumeria graminis f. sp. hordei), as well as having the greatest 47 impact on yield. These survey results are indicative of the contemporary relevance of the 48 49 analysis of previous studies of the Rhynchosporium leaf scald pathosystem, including those reported by Stetkiewicz (2017) on spring barley, and those reported here on winter barley. An 50 51 extremely useful review of the Rhynchosporium leaf scald pathosystem (Avrova & Knogge, 52 2012) manages to be both comprehensive and concise, and readers are referred there for full details including the pathogen life cycle, disease symptomatology, fungicidal control and host 53 54 resistance. Rather than repeat this material en bloc, we will refer to it as required in the 55 context of the work reported here.

R. commune is a seed-borne pathogen. Thus the initial inoculum may be infected seed, 56 57 although the pathogen may also survive on debris from previous crops, on stubble of previous crops and on volunteers infected from previous crops. The primary inoculum for R. commune 58 is considered to arise from crop debris and seed-borne infection with secondary infection due 59 60 to the release of rain splash spores from infected lesions (Zhan et al., 2008; Fountaine et al., 2010). The disease is polycyclic and secondary spread occurs via spore dispersal from 61 infected leaves. The name Rhynchosporium leaf scald refers to the foliar symptoms 62 63 characteristic of the disease (see Avrova & Knogge, 2012; AHDB 2016). In the work reported here, Rhynchosporium leaf scald was recorded in the field by visual assessment of 64 foliar symptoms on winter-sown barley crops in an experimental programme carried out over 65 a five-year period. Here, we investigate the significance of seed source for the level of 66 disease and present an analysis of the spatial pattern of Rhynchosporium leaf scald. The 67

- latter uses a novel phytopathological application of a random coefficients model to provide astatistical overview of results from programme-wide spatial analysis.
- 70

71 Materials and methods

72 Outline of experimental programme

73 The basic unit of the winter-sown barley experimental programme was a field trial. Trials

took place at four centres in Scotland, UK, over a period of five years (harvest years 2005 –

75 2009) as follows: Aberdeen (two trial sites), Bush (two trial sites near Edinburgh),

76 Perth/Dundee, and Lanark/Lockerbie (see Table 1 for full details). Initially (2005 – 2006),

trials included three treatments: farm-saved seed (no fungicide applied), commercial seed (no

fungicide applied), and commercial seed (fungicide applied). The commercial seed (fungicide

applied) treatment was discontinued after the first two years. Trials were either first- or

second-barley in rotation. In total, there were 26 trials potentially available for analysis

81 (Table 1). A detailed description of the use of the trial data in the statistical analyses of

82 treatment effects and of spatial pattern is given for each analysis below.

The basic unit of a trial was a plot, the area to which treatments were applied. All trials comprised four replicate plots of the treatments applied. Thus trials comprised either 12 plots (2005 - 2006) or 8 plots (2007 - 2009). Plots were $12m \times 12m$ in size. For the purpose of data collection, plots were divided into 576 'quadrats', each $0.5m \times 0.5m$ in size.

88 Disease assessment

89 The quadrat was the basic sampling unit for disease assessment. In each plot of each trial, disease symptoms were visually assessed on a continuous severity scale (0 - 100%) in each 90 91 quadrat. Here, we consider only a single disease assessment for each trial, specifically the one made at or close to GS (growth stage) 31. Figure 1 illustrates such a % severity disease 92 93 assessment from a 2005 trial. For data analysis, quadrat-level disease severity values were 94 converted to disease incidence, using a detection threshold of 0.5% severity. Thus for quadrat-level disease severity $\leq 0.5\%$, quadrat-level disease incidence was coded "0", and for 95 quadrat-level severity > 0.5%, quadrat-level incidence was coded as "1". 96

97

98 Statistical analysis of treatment effects

The statistical analysis of treatment effects reported here is a simple comparison of farm-99 100 saved seed (no fungicide applied) with commercial seed (no fungicide applied). In two trials, 101 no recorded disease data were available for such a comparison, so the analysis reported here has been carried out on the basis of data from 24 out of the 26 trials (Table 1). Data for a third 102 treatment, commercial seed (fungicide applied), were collected in 10 trials. In five of these 103 trials the fungicide was applied earlier than the date on which the disease assessment under 104 consideration here was made, and in the other five, later. For the five trials in which the plots 105 designated for the commercial seed (fungicide applied) treatment were untreated at the time 106 of the disease assessment, the data are effectively extra replications of data for the 107 108 commercial seed (no fungicide applied) treatment, and were incorporated in the analysis on that basis. For the five trials in which the plots designated for the commercial seed (fungicide 109 applied) treatment were already treated at the time of the disease assessment, % severity data 110 from the plots for the farm-saved seed (no fungicide applied) treatment and the commercial 111

seed (no fungicide applied) treatment were still available for the analysis but the data fromthe commercial seed (fungicide applied) treatment were excluded.

A generalized linear mixed model (GLMM) with the logit link function, binomial error structure and dispersion fixed at unity (Brown & Prescott, 2015) was fitted to the number of quadrats per plot with disease incidence in order to compare treatment effects on mean disease incidence. Individual trials, the trial × treatment interaction and between-plotwithin-trial variation were fitted as random effects while the seed source 'treatment' (commercial or farm-saved) was fitted as a fixed effect. Thus the model was of the form

120
$$\begin{cases} y_{jkl} \sim Binomial(p_{jkl}, n_{jkl}) \\ \ln\left(\frac{p_{jkl}}{1 - p_{jkl}}\right) = \alpha + \tau_j + \gamma_k + \delta_{jk} + \varepsilon_{jkl} \\ \gamma_k \sim N(0, \sigma_{trial}^2), \, \delta_{jk} \sim N(0, \sigma_{trial \times treatment}^2), \, \varepsilon_{jkl} \sim N(0, \sigma_{individualploterror}^2) \end{cases}$$

$$\end{cases}$$

$$(1)$$

121 in which the subscript *j* refers to the *j*th treatment (*j*=1,2), the subscript *k* refers to the *k*th trial 122 (*k*=1,...,24), and the subscript *l* refers to the *l*th plot (*l*=1,...,12). *y_{jkl}* is the number of quadrats 123 with disease incidence out of the n_{jkl} quadrats in that plot, and p_{jkl} is the probability of 124 incidence in an individual quadrat in the corresponding plot. α is the grand mean, and τ_j is the 125 treatment *j* fixed effect. γ_k , δ_{jk} and ε_{jkl} are the trial, trial × treatment and the individual plot 126 error random effects.

127 Treatments were applied to entire plots and hence it is appropriate to model plot-level 128 totals without explicitly needing to model spatial pattern within plots. Formal statistical 129 comparisons of treatment effects, using the model (1), must be made on the logit scale and 130 accordingly that is how means and the standard error of difference are presented in the 131 Results section.

To aid understanding, treatment means on the incidence scale have also been 132 presented. In principle, for each of the treatments the mean proportion of disease incidence 133 can be averaged across plots for each trial and then the mean and standard error of these trial 134 means can be computed. An adjustment to this calculation is needed to account for the fact 135 that the number of plots varies between trials and treatments, leading to a lack of balance. We 136 adjust by finding the minimum number of plots per trial \times treatment combination (u) and 137 then, for each of a large number of simulations (R), randomly subsampling exactly u values 138 from each trial × treatment combination in order to simulate a balanced design. For each 139 simulation r = 1, ..., R we then calculate the observed mean m_r and associated standard error s_r 140 for each treatment group in the same way that we would calculate these values for a balanced 141 dataset. An overall estimate of the mean for each treatment group, \overline{m} , is then given by the 142 mean of the values m_1, \dots, m_R , and an overall estimate of the associated standard error by 143

144
$$\sqrt{(1/R)} \cdot \sum_{r=1}^{R} \left(s_r^2 + (m_r - \overline{m})^2 \right).$$

145

146 Statistical analysis of spatial pattern

The analysis of spatial pattern of *R. commune* presented here is based on the Binary Power 147 Law (BPL) (Hughes & Madden, 1992; Madden et al., 2018). The basic unit for the analysis 148 of spatial pattern is the trial (e.g. Figure 1). For each trial, spatial pattern is determined within 149 plots. No reference is made in this analysis to the treatments applied to the plots in a trial. The 150 assumption here is that treatments may affect disease intensity rather in the way that 151 "artificial" methods are used to manipulate levels of disease in experiments designed to study 152 the relationship between crop yield loss and disease intensity (e.g. Sah & MacKenzie, 1987). 153 Thus we are interested, initially, in the variation in disease intensity (recorded as mean 154

disease incidence) at the plot scale over a trial and, subsequently, the extension of thisanalysis across trials.

157	A BPL analysis describes the logarithm of the observed variance of disease incidence
158	as a linear function of the logarithm of the variance of the corresponding random distribution
159	(the binomial distribution). For the analysis described here, we take the variance of the
160	binomial distribution as $p \cdot (1-p)/n$, in which p is estimated by observed mean disease
161	incidence at the plot scale and n is the number of quadrats grouped to form the within-plot
162	sampling unit. Within three trials (2006 Lockerbie, 2009 Aberdeen 1, and 2009 Aberdeen 2,
163	see Table 1) observed mean incidence at the disease assessment reported here was in each
164	case equal to zero in all the trial plots. Within a further three trials (2006 Perth, 2007 Perth,
165	and 2008 Perth, see Table 1), observed mean incidence at the disease assessment reported
166	here was equal to one in all plots for two of the trials, and equal to one in seven out of eight
167	of the trial plots for the third. Data from all these six trials are therefore unsuitable for use in a
168	BPL analysis and have been excluded from further consideration in this context. On that
169	basis, the BPL analysis reported here has been carried out using data from 20 out of the 26
170	trials (see Table 1).

We motivate our application of BPL methodology by means of an illustration, built on the disease assessment shown in Figure 1. Each of the 12 plots in the trial consists of 24×24 quadrats (each $0.5m \times 0.5m$), for which Figure 1 shows the observations of % disease severity (appropriately binned). As outlined above, these disease severity data were converted to disease incidence for further analysis.

Now consider a single plot. The following description adopts the notation of Madden *et al.* (2018). Suppose we merge groups of n = 4 adjacent quadrats (in a 2 × 2 arrangement); in such a group, $X_i = 0, 1, 2, 3$ or 4 represents the number of diseased units (quadrats coded 179 "1") and $x_i (= X_i/n)$ is the proportion of diseased units on a 5-point scale between zero and 180 one. The entire plot comprises N = 144 such groups. We can calculate the proportion of 181 diseased units in a plot (mean disease incidence) as

182
$$\hat{p} = \frac{\sum X_i}{n \cdot N} = \frac{\sum x_i}{N}$$
 $(i = 0, 1, ..., N).$ (2)

where the notation indicates that mean disease incidence calculated at the plot scale is an
estimate of the probability of disease incidence at that scale, *p*. Then the plot-scale *observed variance* of disease incidence is estimated as

186
$$\hat{v} = \frac{\sum (x_i - \hat{p})^2}{N - 1}.$$
 (3)

187 Suppose that the disease status of a group (of n = 4 adjacent quadrats in a 2 × 2 arrangement) 188 is independent of the disease status of other groups in the same plot; then *x* has a binomial 189 distribution with variance $v_{bin} = p \cdot (1 - p) / n$. Then the plot-scale *binomial variance* of 190 disease incidence is estimated as

191
$$\hat{v}_{bin} = [\hat{p} \cdot (1 - \hat{p})]/n.$$
 (4)

192 The binomial distribution is the random distribution for proportions, so for the purpose of an 193 analysis of spatial pattern, a comparison of \hat{v} and \hat{v}_{bin} is of interest. Aggregation (extra-194 binomial variation, overdispersion) is indicated by $\hat{v} > \hat{v}_{bin}$.

Now, for the trial illustrated in Figure 1, there are 12 plots, each of which yields a value of \hat{v} and \hat{v}_{bin} . The BPL can be characterized by $v = A_p \cdot [p \cdot (1-p)/n]^b$, in which in practice *v* and *p* are replaced by their estimates and the resulting graphical plot has logarithmic scales on both axes (Hughes & Madden, 1992; Madden *et al.*, 2018). Then, as illustrated in Figure 2A, there is typically a linear relationship from which the parameters *b* (slope) and $\ln(A_p)$ (intercept) may be estimated by linear regression based on

201
$$\ln(\hat{v}) = \ln(A_p) + b \cdot \ln(\hat{v}_{bin}).$$
 (5)

We have used natural (i.e. base *e*) logs in BPL equations, although base 10 [i.e. $\log_{10}(\bullet)$] or any other base can be used. The choice of log base has no effect on the slope parameter, but it does affect the intercept.

Figure 2 shows four different versions of the analysis described above, resulting from four different ways of internally dividing up each of the 12 plots in the trial. These are described by *n* (the number of adjacent quadrats merged to form a group, always in a square arrangement) and *N* (the number of groups, each of *n* quadrats), such that $n \times N = 576$ (the total number of quadrats in a plot). Thus we have, in order of increasing group size, BPL analyses denoted: G4Q (*n*=4, *N*=144, groups are 1m × 1m), G9Q (*n*=9, *N*=64, 1.5m × 1.5m), G16Q (*n*=16, *N*=36, 2m × 2m), G36Q (*n*=36, *N*=16, 3m × 3m) (Figure 2).

212	When $b = 1$ and $A_p = 1$ (i.e. $\ln(A_p) = 0$), then the BPL reduces to $\hat{v} = \hat{v}_{bin}$; that is, the
213	observed variance equals the binomial variance. The "binomial line" representing this
214	situation is shown in Figure 2 for reference. We now have a basis for interpreting graphical
215	plots such as Figure 2 in relation to spatial randomness of disease incidence (and,
216	particularly, deviations from spatial randomness in the direction of aggregation) for a single
217	trial at the within-plot scale. Estimates of $b = 1$ and $A_p > 1$ (i.e. $\ln(A_p) > 0$) are indicative of
218	aggregation that does not depend on the level of disease incidence. Estimates of $b > 1$ are
219	indicative of aggregation that systematically varies with the level of disease incidence.
220	Typically, most of the observed values are above the reference line. Sometimes observed
221	values may be close to, or even below, the reference line when mean disease incidence is

close to 0 or 1 (i.e. towards the left end of the horizontal axis). At such values, the spatialpattern of disease incidence is indistinguishable from random.

What we require now is a method of extending such analysis across the series of trials 224 available for spatial analysis (Table 1). At each of the four quadrat groupings (G4Q, G9Q, 225 G16Q and G36Q) a random coefficients model (Brown & Prescott, 2015) was fitted across 226 trials for the relationship (after natural log transformation) between the individual plot-level 227 228 observed variances and the corresponding theoretical variances based on the binomial distribution. This assumes that for each trial that the intercept and slope of the relationship 229 follows a bivariate normal distribution. Thus the model takes into account not only the lack of 230 231 fit within individual trials but also that the relationship may vary from trial to trial. The random coefficients model is written as 232

$$\left\{ \begin{array}{c} \ln\left(\hat{v}_{kl}\right) = \ln\left(A_{p}\right) + \ln\left(A_{p,k}\right) + \left(b + b_{k}\right) \cdot \ln\left(\hat{v}_{bin,kl}\right) + e_{kl} \\ \\ 233 \\ \left(\begin{array}{c} A_{p,k} \\ b_{k} \end{array}\right) \sim N\left(\begin{array}{c} 0 \\ 0 \end{array}\right), \left(\begin{array}{c} \sigma_{A_{p,k}}^{2} & \sigma_{A_{p,k}}b_{k} \\ \sigma_{A_{p,k}}b_{k} & \sigma_{b_{k}}^{2} \end{array}\right) \right) \\ \end{array} \right\}$$

$$(6)$$

where $\ln(A_p)$ and *b* are the fixed effect population intercept and slope, while $\ln(A_{p,k})$ and b_k are the corresponding intercept and slope random effects for the k^{th} trial. The trial-specific intercepts and slopes respectively are derived by summing their population fixed effect and trial-specific random effect.

238

239 Results

240 Statistical analysis of treatment effects

241 Based on the fitted GLMM, mean disease incidence was significantly different in the crops

242 grown from farm-saved seed compared with the crops grown from commercial seed (P =

243 0.012) (see Table 2). The finding that Rhynchosporium leaf scald mean disease incidence was higher in the crops grown from farm-saved seed than in the crops grown from 244 245 commercial seed (Table 2) is consistent with what might be expected for a disease caused by a pathogen for which seed-borne inoculum is an important component of the life-cycle, but 246 we cannot attach too much agronomic significance to this result. There are no records of the 247 initial level of seed infection for the two treatments, so in effect the result merely bolsters an 248 249 assumption about the comparative levels of seed hygiene in farm-saved and commercial seed lots, rather than providing firm evidence. 250

251

252 Statistical analysis of spatial pattern

253 To facilitate illustration of the application of the BPL at four different quadrat groupings we first considered disease incidence data derived from the disease assessment shown in Figure 254 1. Working at the plot scale, for each grouping, the natural logarithms of the observed and 255 256 binomial variances were plotted against each other in Figure 2. The fitted relationships 257 between log-transformed variances are shown along with a reference line representing the situation in which the observed variance equals the binomial variance. For the selected trial it 258 259 is clear from slopes b > 1 and intercepts $\ln(A_p) > 0$ that aggregation varied with mean disease incidence (see Madden et al., 2018). There was also an apparent relationship between the 260 quadrat size and both the slope and intercept, both increasing as quadrat groupings became 261 larger. 262

While Figure 2 serves to illustrate typical BPL relationships between observed and binomial variances, it does so only for a single trial. Applying the principle of estimating parameters of the BPL to the relationship between observed and binomial variances but now

considering all 20 trials available for analysis (see Table 1), the fitted random coefficients model (6) at each quadrat grouping gave estimates of the population averages (fixed effect estimates) of *b* and $\ln(A_p)$. These are shown in Table 3, from which a relationship between quadrat size and both the slope and intercept is again apparent. In all four cases it can be seen that the estimates of the slope parameter *b* were statistically significantly greater than 1. It is also evident that the parameter estimates for *b* increased as quadrat groupings increased in size.

For the four different quadrat groupings, each individual trial has its own estimated slopes and intercepts, which are a combination of the population average (fixed effects) and trial-specific deviations (random effects). Key aspects of the respective distributions of the trial-specific slopes and trial-specific intercepts are depicted graphically in Figure 3.

277

278 Discussion

279 Large-scale field experimentation of the kind on which the analysis reported here is based is 280 highly resource intensive. It is therefore advantageous if the results of such experimentation can be applied to aspects of routine crop management that are themselves resource intensive, 281 of which disease surveillance is a prime example. Looking again at Figure 1, it represents a 282 disease assessment recorded by intensive mapping. All the Rhynchosporium leaf scald 283 disease assessments that contributed to the analysis reported here were similarly recorded by 284 intensive mapping. This is feasible for a research project, but not a practical proposition for 285 disease assessments made in the context of crop protection decision making, where data will 286 typically be collected by some kind of sparse sampling. 287

288 For the study reported here, Rhynchosporium leaf scald disease intensity was measured in terms of disease severity, but converted to disease incidence for the purpose of statistical 289 analysis of treatment effects and of spatial pattern. As noted by Paul et al. (2005), lack of 290 knowledge of the statistical distribution of disease severity as a continuous random variable 291 limits its analytical usefulness, by comparison with disease incidence. The conversion from 292 severity to incidence was carried out at the level of the individual units of disease assessment, 293 294 so a relationship between mean severity and mean incidence (e.g. Seem (1984), McRoberts et al. (2003)) is not required here. In Germany, Rhynchosporium leaf scald intensity is 295 296 measured as disease incidence in the context of crop protection decision making (Institut für 297 Pflanzenschutz, 2018). In passing, we note that the GS31 (or near) disease assessments reported here show a wide range of disease, whether on a severity scale (Figure 1) or an 298 299 incidence scale (Table 1). The implication is that GS31 assessments would likely be too late 300 in the winter barley growing season for use in a decision process relating to management of Rhynchosporium leaf scald, at least for cultivars lacking good resistance. 301

302 Since it was introduced by Hughes & Madden (1992), the Binary Power Law has been used to characterize aggregation of disease incidence in a large number of pathosystems 303 304 (Madden *et al.*, 2018), although not previously for Rhynchosporium leaf scald of barley. 305 Typically, BPL analyses are illustrated by a graphical plot of the observed variance of disease incidence against the corresponding theoretical binomial variance, with logarithmic scales on 306 both axes. Aggregation varying with mean disease incidence is indicated for slope b > 1 and 307 308 intercept $\ln(A_p) > 0$. Here, this is shown for a single trial in Figure 2, where there is a relationship between quadrat size and both the slope and intercept of the BPL regression. 309

When it comes to the experimental programme as a whole (comprising 20 trials available for spatial analysis), we used a random coefficients model to obtain an estimated BPL slope and intercept for each trial based on the sum of a population fixed effect and a

trial-specific random effect. To the best of our knowledge, the deployment of a random coefficients model in the context of a programme-wide BPL analysis is a novel phytopathological application. The results (summarized in Figure 3) further illustrate the apparent relationship between quadrat size and both the slope and intercept of the BPL regression, and thus, the correlation between *b* and $\ln(A_p)$.

The apparent relationship between quadrat size and both the slope and intercept of the 318 319 BPL regression has also been noted in previous field studies (e.g. Bassanezi et al., 2002; Dallot et al., 2003; Humeau et al., 2006; Batista et al., 2008). Although these results are 320 clear, field studies that provide a basis for characterizing observed patterns of disease do not 321 322 necessarily elucidate the process(es) underlying those patterns. In this respect, a simulation study by Xu & Ridout (2000) is enlightening. The spatiotemporal spread of plant diseases 323 was simulated using a stochastic model to study the effects of initial conditions (number of 324 325 plants initially infected and their spatial pattern), spore dispersal gradient, and the dimensions of sampling quadrats, on spatial summary statistics (including BPL parameter estimates) for 326 327 simulated epidemics. Such simulations show BPL parameter estimates increasing with quadrat size (see, for example, Figure 10 in Madden et al., 2018). The effects of the size of 328 the sampling unit *n* arise as a result of the relationship of the BPL parameters *b* and A_p to the 329 330 index of dispersion and the intracluster correlation coefficient (measures of spatial aggregation for incidence data), as illustrated in Figure 4 of Madden et al. (2018). 331

The BPL analysis reported here contributes to the design of sampling in two ways. We consider the intensive mapping in terms of *N* groups of *n* sampling units (quadrats) each, and use this as a basis to estimate parameters of the BPL describing aggregation of disease incidence. Such analysis allows the specification of cluster sampling designs in which disease incidence may be estimated with a pre-specified level of precision (Madden & Hughes, 1999a). Further, we have considered a range of sizes of sampling unit in our analysis, which

338 together constitute a spatial hierarchy. Such hierarchies have application in epidemiological research (e.g. Hughes et al., 1997; Turechek & McRoberts, 2013; Madden et al., 2018), and 339 also in practical disease assessment for crop protection decision making, where hierarchical 340 sampling of groups of sampling units saves on resources devoted to sampling while taking 341 account of the spatial pattern of disease incidence (Madden & Hughes, 1999a;b; Arnold et 342 al., 2017). Thus we have an analytical basis for field sampling of barley crops for 343 344 Rhynchosporium leaf scald disease incidence that can contribute to a process for disease management decision making. 345

346

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442 FIGURE LEGENDS

443

444 Figure 1 The diagram shows the outcome of the Rhynchosporium leaf scald disease

445 assessment on 8 April for the 2005 Bush (2) trial (for further details see Table 1). The key

446 indicates % disease severity in 0.5×0.5m quadrats. Graphic prepared by Alasdair Sykes.

447

Figure 2 Relationships between observed and binomial variances of disease incidence on 448 449 natural logarithm axes (equation 1) at the plot scale, from the disease assessment on 8 April for the 2005 Bush (2) trial (see also Figure 1). Based on Equation 5, ordinary least squares 450 (OLS) regression lines fitted to the data are shown (as solid lines) for four different quadrat 451 452 groupings within plots: (a) G4Q (144 groups of 4 quadrats), $\ln(A_p) = 1.233$ (SE = 0.312), b =1.177 (0.0755); (b) G9Q (64 groups of 9 quadrats), $\ln(A_p) = 1.687$ (0.456), b = 1.207453 (0.0927); (c) G16Q (36 groups of 16 quadrats), $\ln(A_p) = 2.335$ (0.679), b = 1.278 (0.124); and 454 (d) G36Q (16 groups of 36 quadrats), $\ln(A_p) = 3.457$ (0.991), b = 1.374 (0.158). On each 455 graph, the dashed line is the reference line with $\ln(A_p) = 0$, b = 1 which represents the 456 457 situation in which the observed variance equals the binomial variance.

458



- 466 lower vertical line from a box extends to the lowest data value within $Q1 1.5 \cdot (Q3 Q1)$,
- 467 and individual data values falling beyond the range delimited by the upper and lower vertical
- 468 lines are indicated by filled circles. Results are shown for four different quadrat groupings
- within plots: G4Q (144 groups of 4 quadrats), G9Q (64 groups of 9 quadrats), G16Q (36
- 470 groups of 16 quadrats) and G36Q (16 groups of 36 quadrats).

Year	Centre	Ordnance	Cultivar	Disease	Growth	Minimum	Maximum	Treatments	Spatial
	(trial site)	survey grid	(resistance	assessment	stage	recorded	recorded	analysis	analysis
		reference	rating) ^a	date		incidence ^b	incidence ^c	$(\bullet = yes)^d$	$(\bullet = yes)^e$
2005	Bush (1)	NT 253 652	Sumo (5)	22-Mar ^f	24 - 29	0.0156	0.5278	•	•
2005	Bush (2) ^g	NT 246 650	Sumo (5)	08-Apr ^f	31	0.0035	0.9167	•	•
2005	Lockerbie	NY 115 806	Sumo (5)	13-Apr ^f	31	0.9965	1.0000	•	•
2005	Perth	NO 082 179	Sumo (5)	12-Apr ^f	31	0.8819	1.0000	•	•
2006	Aberdeen (1)	NJ 904 252	Sumo (5)	09-May ^h	31	0.2309	0.2674	Х	•
2006	Aberdeen (2)	NJ 775 275	Sumo (5)	17-May ^h	32	0.0625	0.5816	Х	•
2006	Bush (1)	NT 243 649	Sumo (5)	25-Apr ^h	31	0.9965	1.0000	•	•
2006	Bush (2)	NT 247 653	Sumo (5)	25-Apr ^h	31	0.0087	0.7951	•	•
2006	Lockerbie	NY 113 799	Sumo (5)	18-Apr ^f	26	0.0000	0.0000	•	Х
2006	Perth	NO 055 235	Sumo (5)	24-Apr ^h	31	1.0000	1.0000	•	Х
2007	Bush (1)	NT 250 659	Haka (5)	24-Apr	32	0.3986	0.9130	•	•
2007	Bush (2)	NT 251 660	Haka (5)	24-Apr	32	0.8021	0.9462	•	•
2007	Lanark	NS 907 384	Haka (5)	16-Apr	31	0.9844	1.0000	•	•
2007	Perth	NO 045 238	Haka (5)	12-Apr	31	1.0000	1.0000	•	Х
2008	Aberdeen (1)	NJ 874 107	Haka (5)	06-Mar	26	0.7413	1.0000	•	•
2008	Aberdeen (2)	NJ 874 107	Haka (5)	06-Mar	26	0.8837	0.9965	•	•
2008	Bush (1)	NT 253 656	Haka (5)	23-Apr	30	0.0000	0.0139	•	•
2008	Bush (2)	NT 253 656	Haka (5)	01-May	31	0.9740	1.0000	•	•
2008	Lanark	NS 904 383	Haka (5)	22-Apr	29	0.9774	1.0000	•	•
2008	Perth	NO 048 235	Haka (5)	21-Apr	30	0.9983	1.0000	•	Х
2009	Aberdeen (1)	NJ 874 107	Saffron (6)	11-May	31	0.0000	0.0000	•	Х
2009	Aberdeen (2)	NJ 874 107	Saffron (6)	12-May	31	0.0000	0.0000	•	Х
2009	Bush (1)	NT 246 650	Saffron (6)	30-Apr	30	0.0017	0.7205	•	•
2009	Bush (2)	NT 246 649	Saffron (6)	20-Apr	31	0.8941	0.9983	•	•
2009	Lanark	NS 906 381	Saffron (6)	15-Apr	26	0.0417	0.4983	•	•
2009	Dundee	NO 303 332	Saffron (6)	24-Apr	31	0.0035	0.0816	•	•

Table 1 Winter barley experimental programme details.

^g See Figure 1.

^h Trial in which the plots designated for the commercial seed (fungicide applied) treatment were fungicide treated before the date of the disease assessment. These plots were excluded from the analysis of treatment effects.

^a See the Recommended List archive at <u>https://cereals.ahdb.org.uk/varieties/ahdb-recommended-lists.aspx</u>. The varieties Sumo, Haka and Saffron were sown in 2005-2006, 2007-2008, and 2009, respectively. All three varieties had similar disease resistance ratings.

^b Minimum mean disease incidence at the plot scale (based on the smallest number of quadrats coded "1" out of 576).

^c Maximum mean disease incidence at the plot scale (based on the largest number of quadrats coded "1" out of 576).

^d In this column, X indicates a trial in which only plots for the commercial seed (fungicide applied) treatment were assessed, and that fungicide had been applied prior to the disease assessment. These trials were excluded from the analysis of treatment effects.

^e In this column, X indicates a trial in which the range of mean disease incidence at the plot scale was insufficient for spatial analysis.

^f Trial in which the plots designated for the commercial seed (fungicide applied) treatment were fungicide treated after the date of the disease assessment. These plots were included in the analysis of treatment effects as extra replicates of the commercial seed (no fungicide applied) treatment.

Table 2 Comparison of treatment effects on disease incidence.

	Seed source			
	Commercial	Farm-saved		
Mean (logit scale)	1.086	1.988		
	$SED^{a} = 0.322$			
Mean (incidence scale)	0.615	0.649		
SEM ^b	0.0881	0.0840		

^a standard error of the difference, 17 d.f.

^b standard error of the mean

	Coefficient				
	Intercept	Slope			
Quadrat grouping	Estimate (standard error)	Estimate (standard error)			
G4Q	1.166 (0.102)	1.148 (0.016)			
G9Q	1.818 (0.141)	1.215 (0.021)			
G16Q	2.583 (0.213)	1.290 (0.028)			
G36Q	3.433 (0.293)	1.350 (0.036)			

 Table 3 Binary power law coefficients from random coefficients model fitted across trials.







