



# Peer-to-Peer Networks

## 17 Kelips and Epidemic Algorithms

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- Indranil Gupta, Ken Birman, Prakash Linga, Al Demers, Robbert van Renesse
  - Cornell University, Ithaca, New York
- Kelip-kelip
  - malay name for synchronizing fireflies
- P2P Network
  - uses DHT
  - constant lookup time
  - $O(n^{1/2})$  storage size
  - fast and robust update

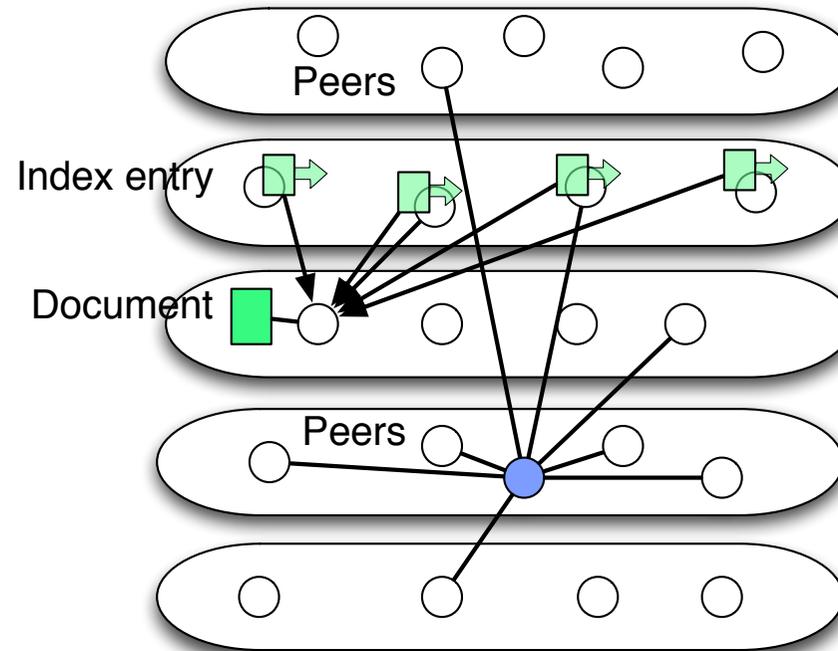


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# Kelips Overview

- Peers are organized in  $k$  affinity groups
  - peer position chosen by DHT mechanism
  - $k$  is chosen as  $n^{1/2}$  for  $n$  peers
- Data is mapped to an affinity group using DHT
  - all members of an affinity group store all data
- Routing Table
  - each peer knows all members of the affinity group
  - each peer knows at least one member of each affinity group
- Updates
  - are performed by epidemic algorithms

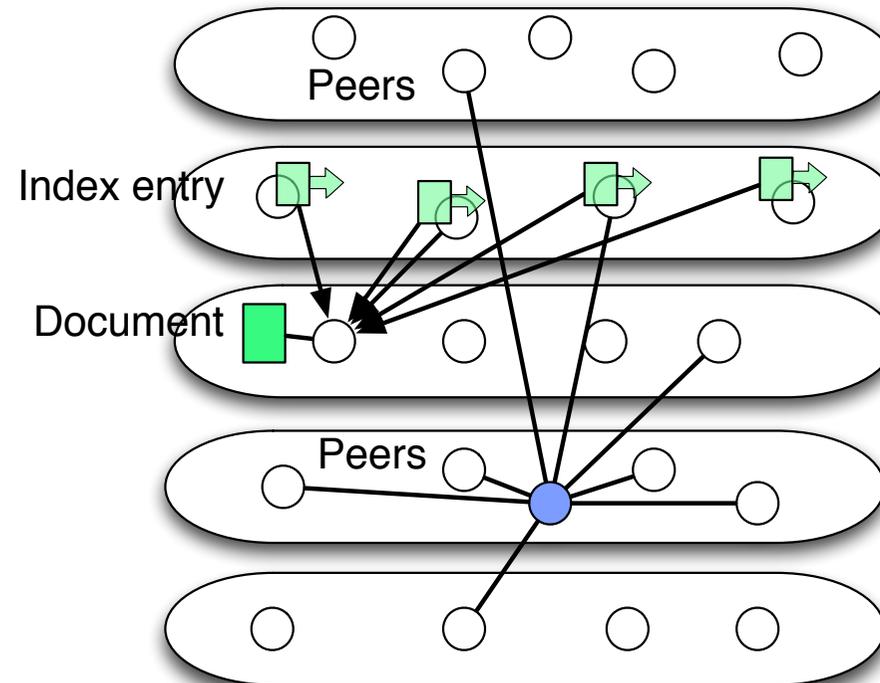
Affinity Groups



# Routing Table

- Affinity Group View
  - Links to all  $O(n/k)$  group members
  - This set can be reduced to a partial set as long as the update mechanism works
- Contacts
  - For each of the other affinity group a small (constant-sized) set of nodes
  - $O(k)$  links
- Filetuples
  - A (partial) set of tuples, each detailing a file name and host IP address of the node storing the file
  - $O(F/k)$  entries, if  $F$  is the overall number of files
- Memory Usage:  $O(n/k + k + F/k)$ 
  - for  $k = O(\sqrt{n + F})$

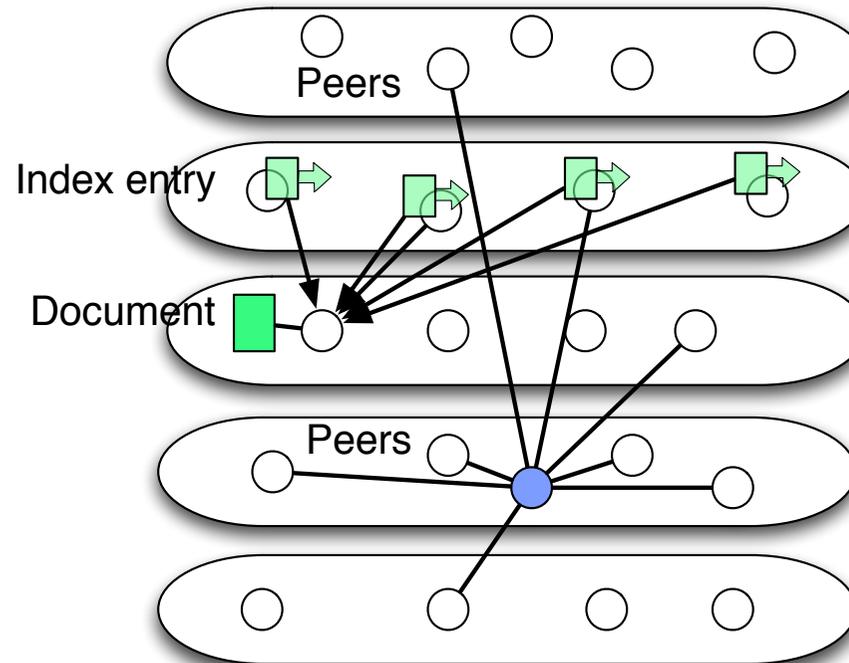
## Affinity Groups



$$O(\sqrt{n + F})$$

- Lookup-Algorithm
  - compute index value
  - find affinity group using hash function
  - contact peer from affinity group
  - receive index entry for file (if it exists)
  - contact peer with the document
- Kelips needs four hops to retrieve a file

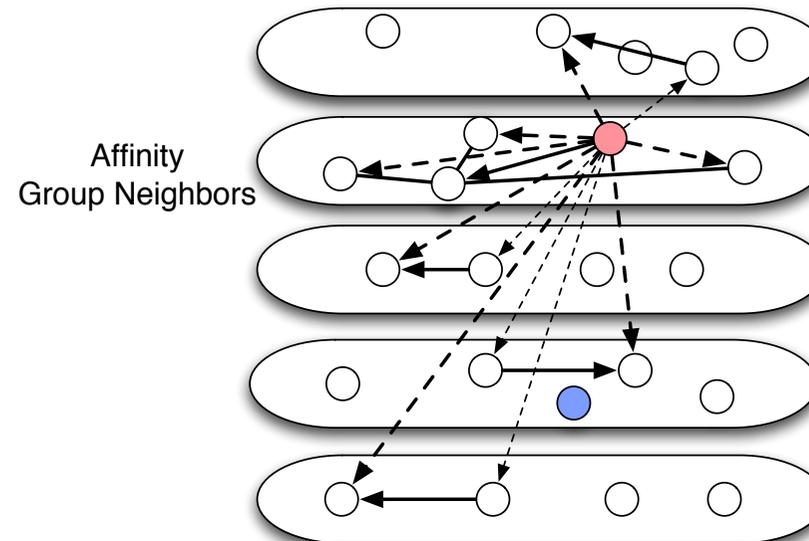
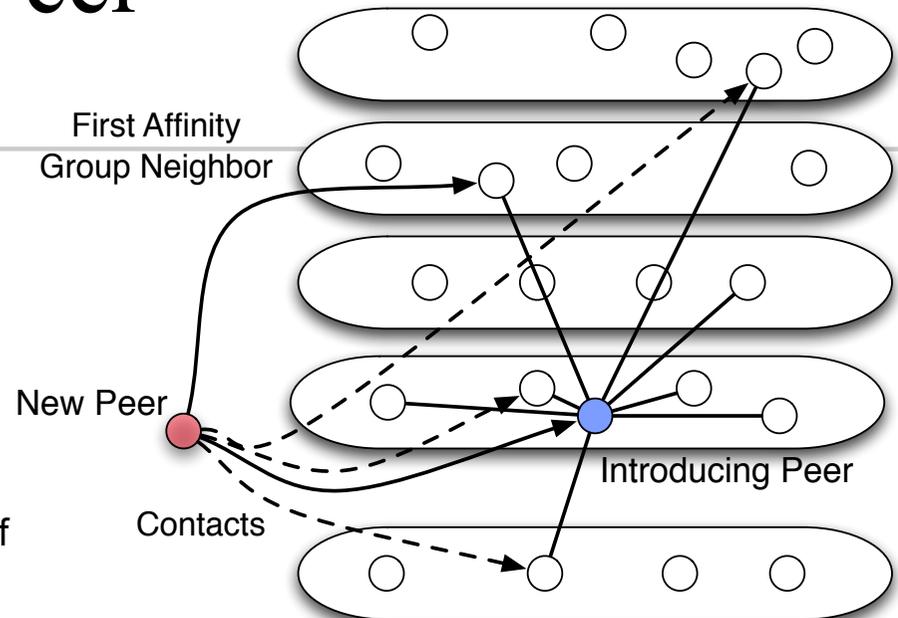
Affinity Groups



# Inserting a Peer

## Algorithm

- Every new peer is introduced by a special peer, group or other method,
    - e.g. web-page, forum etc.
  - The new peer computes its affinity group and contacts any peer
  - The new peer asks for one contact of the affinity group and copies the contacts of the old affinity group
  - By contacting a neighbor node in the affinity group it receives all the necessary contacts and index file tuples
  - Every contact is replaced by a random replacement (suggested by the contact peer)
  - The peer starts an epidemic algorithm to update all links
- Except the epidemic algorithm the runtime is  $O(k)$  and only  $O(k)$  messages are exchanged



# How to Add a Document

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- Start an Epidemic Algorithm to Spread the news in the affinity group
- Such an algorithm uses  $O(n/k)$  messages and needs  $O(\log n)$  time
- We introduce Epidemic Algorithms later on

# How to Check Errors

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- Kelip works in heartbeats, i.e. discrete timing
- In every heartbeat each peer checks one neighbor
- If a neighbor does not answer for some time
  - it is declared to be dead
  - this information is spread by an epidemic algorithm
- Using the heartbeat mechanisms all nodes also refresh their neighbors
- Kelips quickly detects missing nodes and updates this information

- Kelips has lookup time  $O(1)$ , but needs  $O(n^{1/2})$  sized Routing Table
  - not counting the  $O(F/n^{1/2})$  Filetuples
- Chord, Pastry & Tapestry use lookup time  $O(\log n)$  but only  $O(\log n)$  memory units
- Kelips is a reasonable choice for medium sized networks
  - up to some million peers and some hundred thousands index entries

- What is an Epidemic Algorithm

# Epidemic Spread of Viruses

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- Observation
  - most viruses do not prosper in real life
  - other viruses are very successful and spread fast
- How fast do viruses spread?
- How many individuals of the population are infected?
- Problem
  - social behavior and infection risk determine the spread
  - the reaction of a society to a virus changes the epidemic
  - viruses and individuals may change during the infection

- SI-Model (rumor spreading)
  - susceptible  $\rightarrow$  infected
- SIS-Model (birthrate/deathrate)
  - susceptible  $\rightarrow$  infected  $\rightarrow$  susceptible
- SIR-Model
  - susceptible  $\rightarrow$  infected  $\rightarrow$  recovered
- Continuous models
  - deterministic
  - or stochastic
- Lead to differential equations
- Discrete Models
  - graph based models
  - random call based
- Lead to the analysis of Markov Processes

- SI-Model (rumor spreading)
  - susceptible  $\rightarrow$  infected
  - At the beginning one individual is infected
  - Every contact infects another individual
  - In every time unit there are in the expectation  $\beta$  contacts
- SIS-Model (birthrate/deathrate)
  - susceptible  $\rightarrow$  infected  $\rightarrow$  susceptible
  - similar as in the SI-Model, yet a share of  $\delta$  of all infected individuals is healed and can receive the virus again
  - with probability  $\delta$  an individual is susceptible again
- SIR-Model
  - susceptible  $\rightarrow$  infected  $\rightarrow$  recovered
  - like SI-Model, but healed individuals remain immune against the virus and do not transmit the virus again

- Variables
  - $n$ : total number of individuals
    - remains constant
  - $S(t)$ : number of (healthy) susceptible individuals at time  $t$
  - $I(t)$ : number of infected individuals
- Relative shares
  - $s(t) := S(t)/n$
  - $i(t) := I(t)/n$
- At every time unit each individual contacts  $\beta$  partners
- Assumptions:
  - Among  $\beta$  contact partners  $\beta s(t)$  are susceptible
  - All  $I(t)$  infected individuals infect  $\beta s(t) I(t)$  other individuals in each round
- Leads to the following recursive equations:
  - $I(t+1) = I(t) + \beta s(t) I(t)$
  - $i(t+1) = i(t) + \beta i(t) s(t)$
  - $S(t+1) = S(t) - \beta s(t) I(t)$
  - $s(t+1) = s(t) - \beta i(t) s(t)$

- $i(t+1) = i(t) + \beta i(t) s(t)$
- $s(t+1) = s(t) - \beta i(t) s(t)$
- Idea:

- $i(t)$  is a continuous function
- $i(t+1)-i(t)$  approximate first derivative

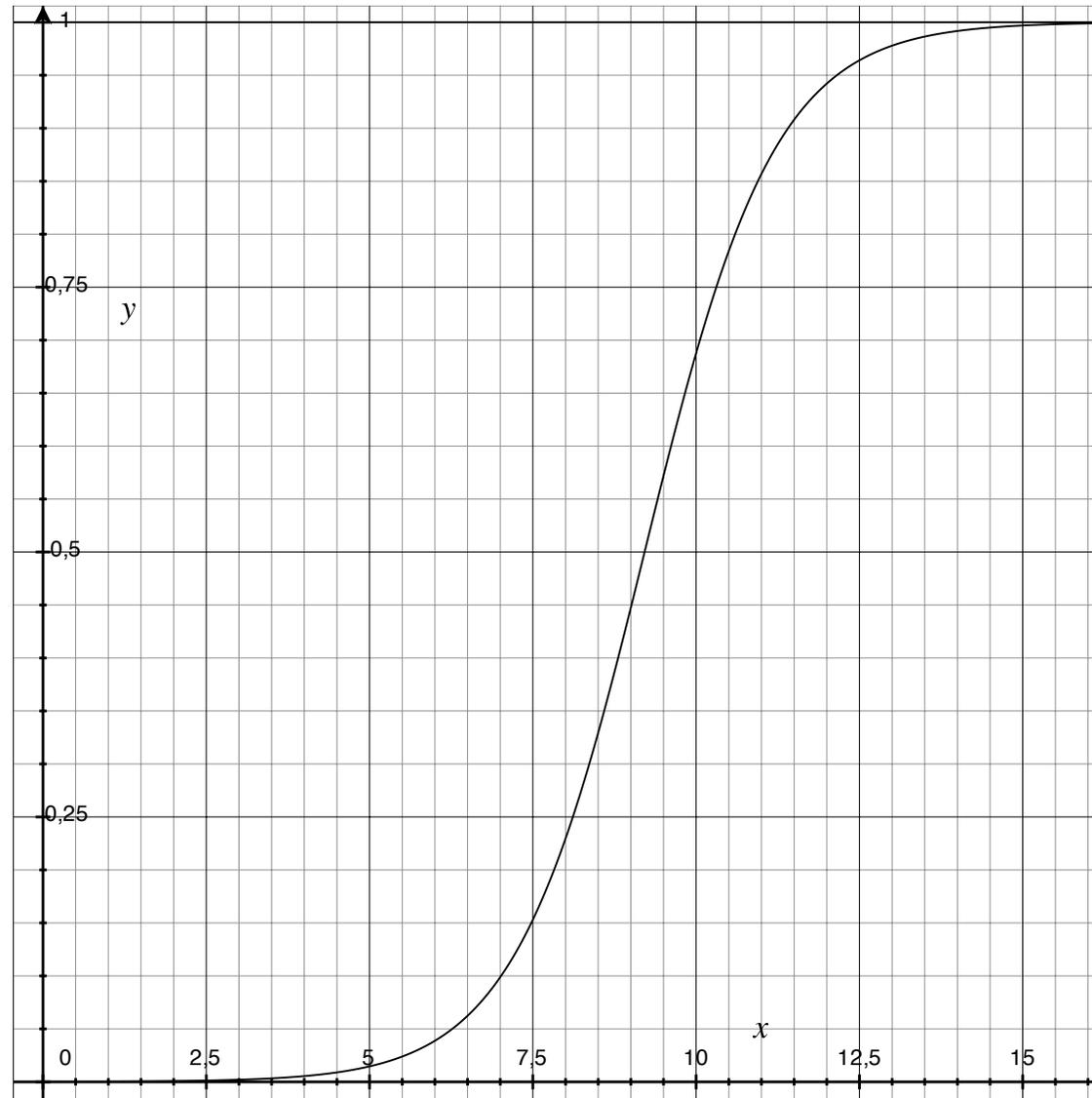
$$\frac{i(t+1) - i(t)}{1} \approx \frac{di(t)}{dt}$$

$$\frac{di(t)}{dt} = \beta \cdot i(t)(1 - i(t))$$

- Solution:

$$i(t) = \frac{1}{1 + \left(\frac{1}{i(0)} - 1\right) e^{-\beta t}}$$

- The number of infected grows exponentially until half of all members are infected
- Then the number of susceptible decrease exponentially



## ■ Variables

- $n$ : total number of individuals
  - remains constant
- $S(t)$ : number of (healthy) susceptible individuals at time  $t$
- $I(t)$ : number of infected individuals

## ■ Relative shares

- $s(t) := S(t)/n$
- $i(t) := I(t)/n$

## ■ At every time unit each individual contacts $\beta$ partners

## ■ Assumptions:

- Among  $\beta$  contact partners  $\beta s(t)$  are susceptible
- All  $I(t)$  infected individuals infect  $\beta s(t) I(t)$  other individuals in each round
- A share of  $\delta$  of all infected individuals is susceptible again

## ■ Leads to the following recursive equations:

- $I(t+1) = I(t) + \beta i(t) S(t) - \delta I(t)$
- $i(t+1) = i(t) + \beta i(t) s(t) - \delta i(t)$
- $S(t+1) = S(t) - \beta i(t) S(t) + \delta I(t)$
- $s(t+1) = s(t) - \beta i(t) s(t) + \delta i(t)$

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- Idea:

- $i(t)$  is a continuous function
- $i(t+1)-i(t)$  approximate first derivative

$$\frac{i(t+1) - i(t)}{1} \approx \frac{di(t)}{dt}$$

$$\frac{di(t)}{dt} = \beta \cdot i(t)(1 - i(t)) - \delta i(t)$$

- Solution:
  - for  $\rho = \frac{\delta}{\beta}$

$$i(t) = \frac{1 - \rho}{1 + \left( \frac{1 - \rho}{i(0)} - 1 \right) e^{-(\beta - \delta)t}}$$

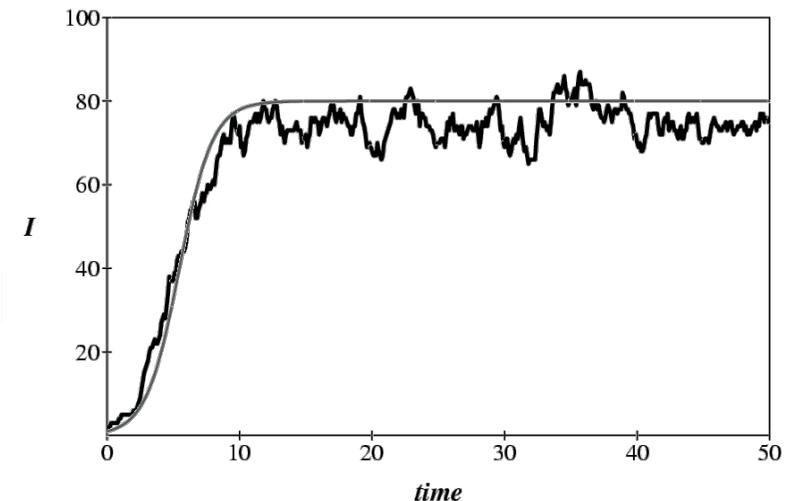
# SIS-Model

## Interpretation of Solution

$$i(t) = \frac{1 - \rho}{1 + \left( \frac{1 - \rho}{i(0)} - 1 \right) e^{-(\beta - \delta)t}}$$

$$\rho = \frac{\delta}{\beta}$$

- If  $\beta < \delta$ 
  - then  $i(t)$  is strictly decreasing
- If  $\beta > \delta$ 
  - then  $i(t)$  converges against  $1 - \rho = 1 - \delta/\beta$
- Same behavior in discrete model has been observed
  - [Kephart, White'94]



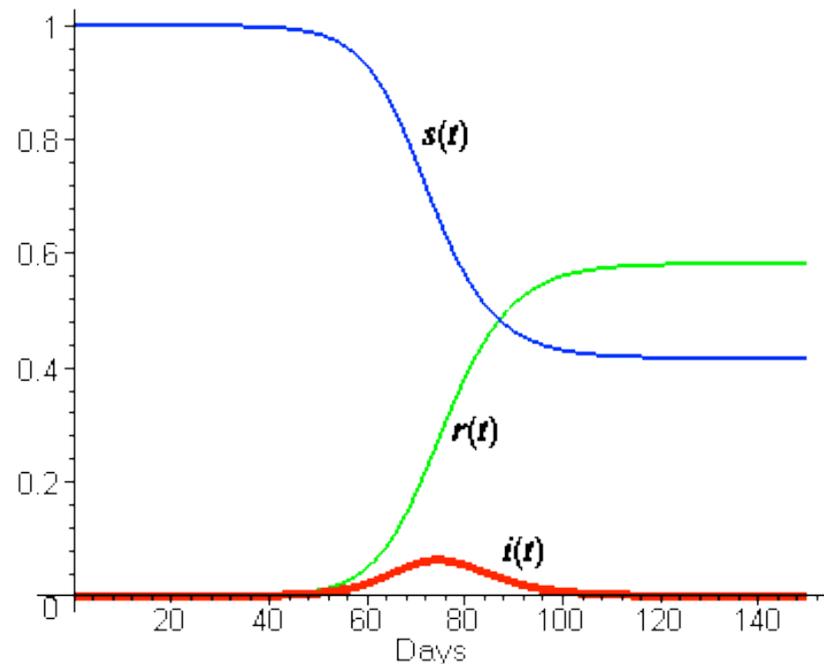
- Variables
  - $n$ : total number of individuals
    - remains constant
  - $S(t)$ : number of (healthy) susceptible individuals at time  $t$
  - $I(t)$ : number of infected individuals
  - $R(t)$ : number of recovered individuals.
- Relative shares
  - $s(t) := S(t)/n$
  - $i(t) := I(t)/n$
  - $r(t) := R(t)/n$
- At every time unit each individual contacts  $\beta$  partners
- Assumptions:
  - Among  $\beta$  contact partners  $\beta s(t)$  are susceptible
  - All  $I(t)$  infected individuals infect  $\beta s(t) I(t)$  other individuals in each round
  - A share of  $\delta$  of all infected individuals is immune (recovered) and never infected again
- Leads to the following recursive equations:
  - $I(t+1) = I(t) + \beta i(t) S(t) - \delta I(t)$
  - $i(t+1) = i(t) + \beta i(t) i(t) - \delta i(t)$
  - $S(t+1) = S(t) - \beta i(t) S(t)$
  - $s(t+1) = s(t) - \beta i(t) s(t)$
  - $R(t+1) = R(t) + \delta I(t)$
  - $r(t+1) = r(t) + \delta i(t)$

- The equations and its differential equations counterpart
  - $i(t+1) = i(t) + \beta i(t) i(t) - \delta i(t)$
  - $s(t+1) = s(t) - \beta i(t) s(t)$
  - $r(t+1) = r(t) + \delta i(t)$
- No closed solution known
  - hence numeric solution
- Example
  - $s(0) = 1$
  - $i(0) = 1,27 \cdot 10^{-6}$
  - $r(0) = 0$
  - $\beta = 0,5$
  - $\delta = 0,3333$

$$\frac{ds(t)}{dt} = -\beta \cdot i(t)s(t)$$

$$\frac{di(t)}{dt} = \beta \cdot i(t)s(t) - \delta i(t)$$

$$\frac{dr(t)}{dt} = \delta i(t)$$



# Replicated Databases

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- Same data storage at all locations
  - new entries appear locally
- Data must be kept consistently
- Algorithm is supposed to be decentral and robust
  - since connections and hosts are unreliable
- Not all databases are known to all
- Solutions
  - Unicast
    - New information is sent to all data servers
  - Problem:
    - not all data servers are known and can be reached
  - Anti-Entropy
    - Every local data server contacts another one and exchanges all information
    - total consistency check of all data
  - Problem
    - communication overhead
- Epicast ...

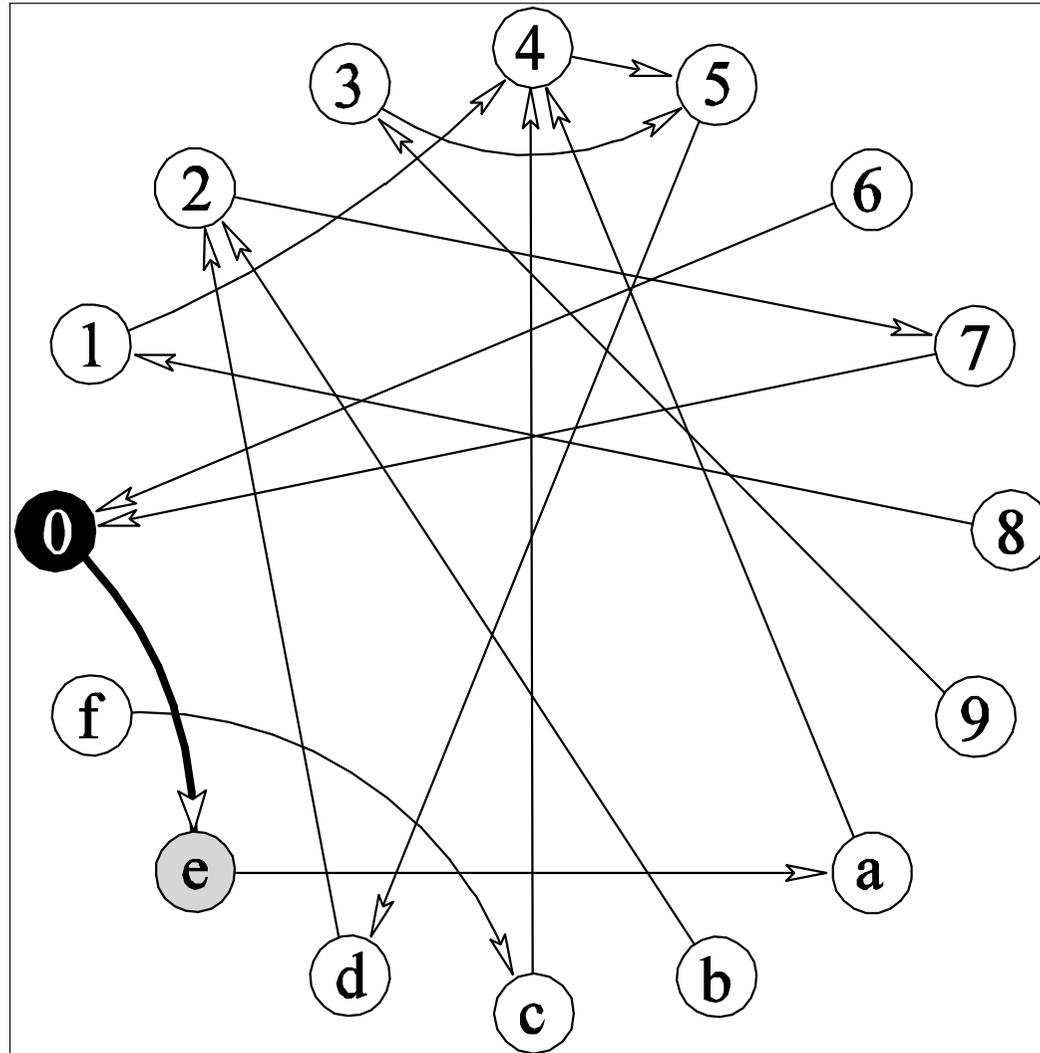
- Epicast
  - new information is a rumor
  - as long the rumor is new it is distributed
  - Is the rumor old, it is known to all servers
- Epidemic Algorithm [Demers et al 87]
  - distributes information like a virus
  - robust alternative to BFS or flooding
- Communication method
  - Push & Pull, d.h. infection after  $\log_3 n + O(\log \log n)$  rounds with high probability
- Problem:
  - growing number of infections increases communication effort
  - trade-off between robustness and communication overhead

- Given a contact graph  $G=(V,E)$ 
  - $n$ : number of nodes
  - $I(t)$  := number of infected nodes in round  $t$
  - $i(t) = I(T)/n$
  - $S(t)$  := number of susceptible nodes in round  $t$ 
    - $I(t)+S(t)=n$
  - $s(t) = S(T)/n$
- Infection:
  - If  $u$  is infected in round  $t$  and  $(u,v) \in E$ , then  $v$  is infected in round  $t+1$
- Graph determines epidemics
- Complete graph:
  - 1 time unit until complete infection
- Line graph
  - $n-1$  time units until complete infection

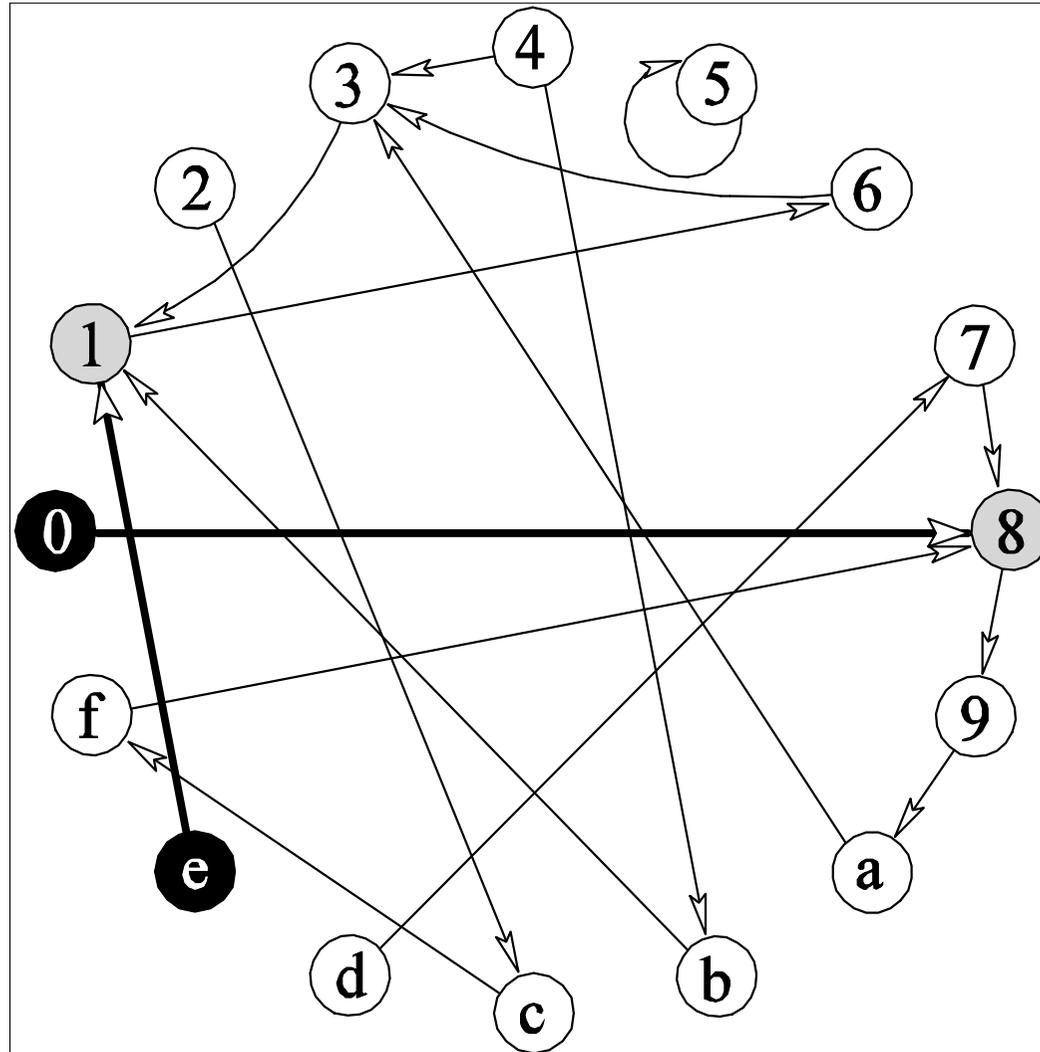
- Random graph  $G_{n,p}$ 
  - $n$  nodes
  - Each directed edge occurs with independent probability  $p$
- Expected indegree  $\gamma = p(n-1)$
- How fast does an epidemic spread in  $G_{n,p}$ , if  $\gamma \in O(1)$  ?
- Observation für  $n > 2$ :
  - With probability  $\geq 4^{-\gamma}$  and  $\leq e^{-\gamma}$ 
    - a node has in-degree 0 and cannot be infected
    - a node has out-degree 0, and cannot infect others
- Implications:
  - Random (static) graph is not a suitable graph for epidemics

- In each round a new contact graph  $G_t=(V,E_t)$ :
  - Each node in  $G_t$  has out-degree 1
    - chooses random node  $v$  out of  $V$
- Infection models:
  - Push-Model
    - if  $u$  is infected and  $(u,v) \in E_t$ , then  $v$  is infected in the next round
  - Pull-Modell:
    - if  $v$  is infected and  $(u,v) \in E_t$ , then  $u$  is infected in the next round

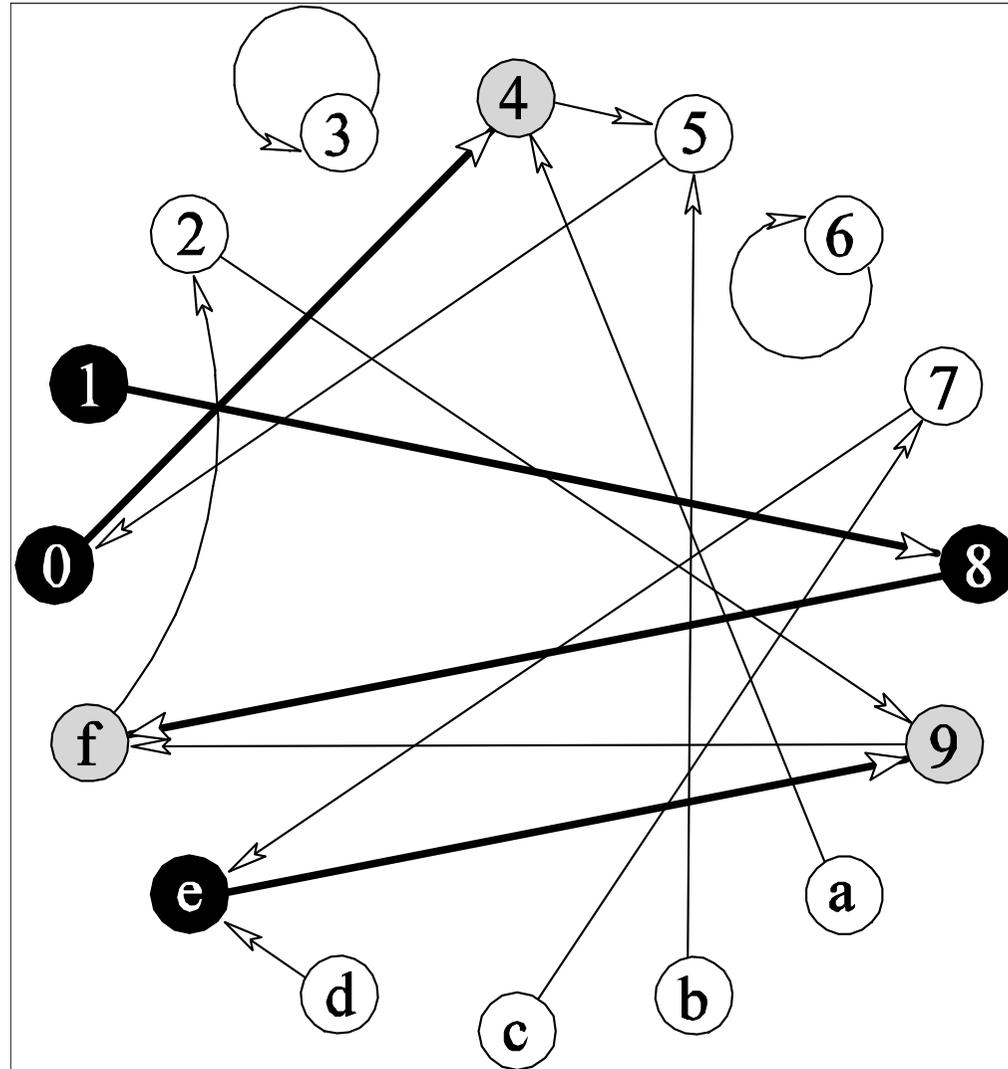
# Push Model



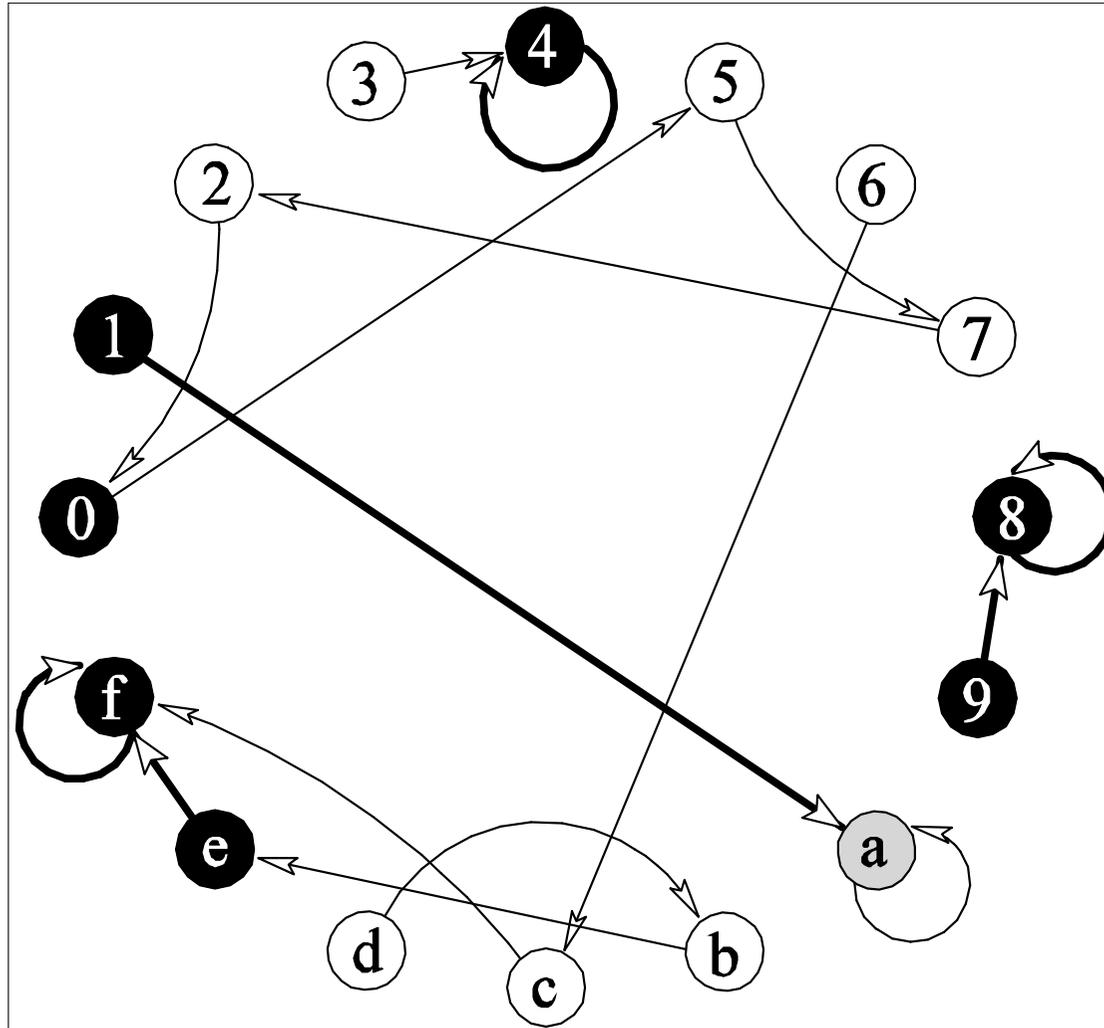
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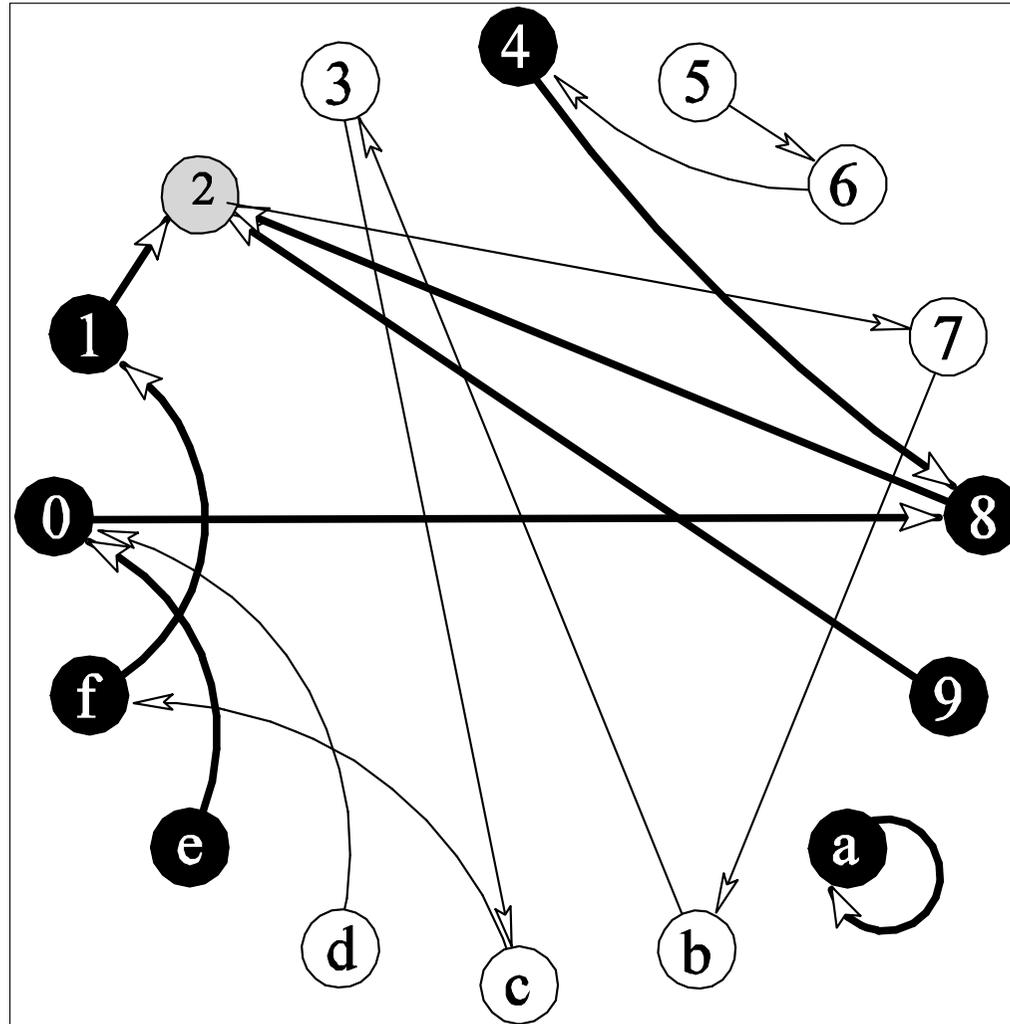
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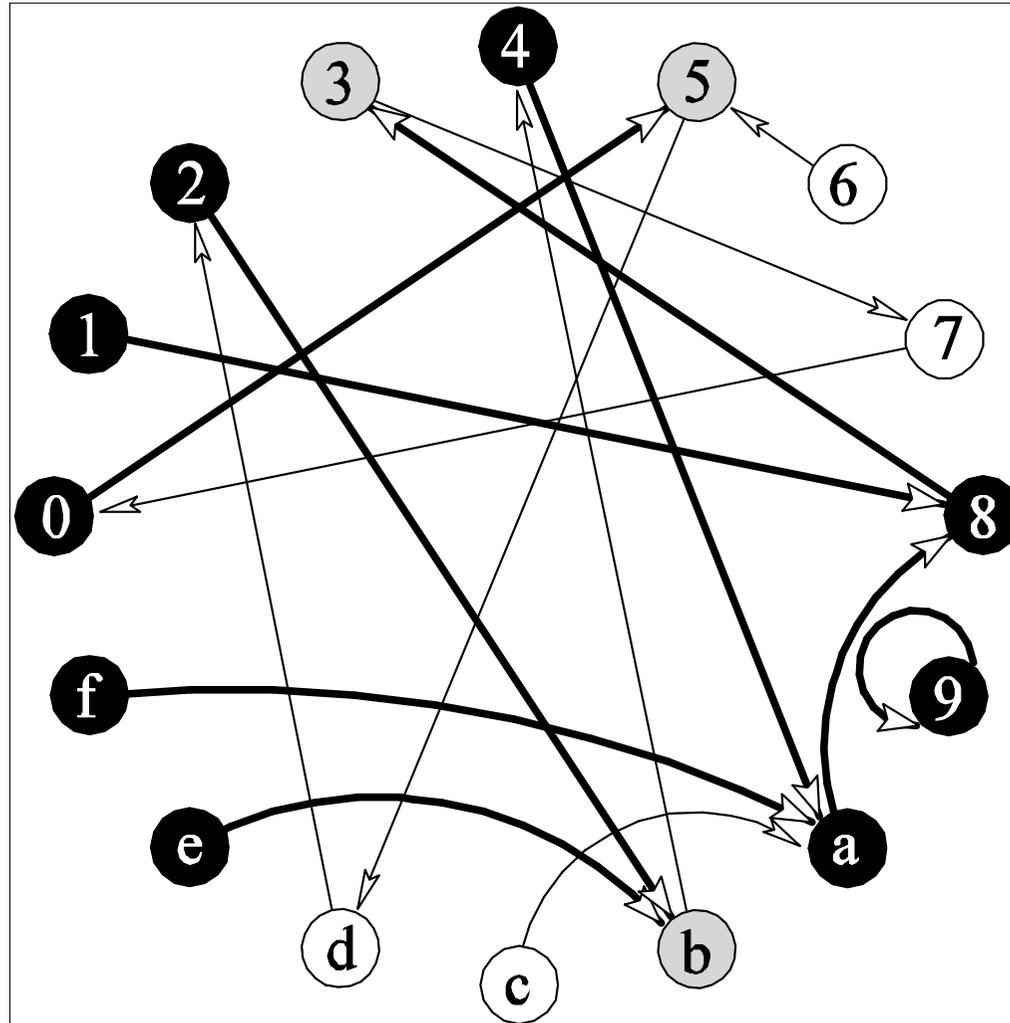
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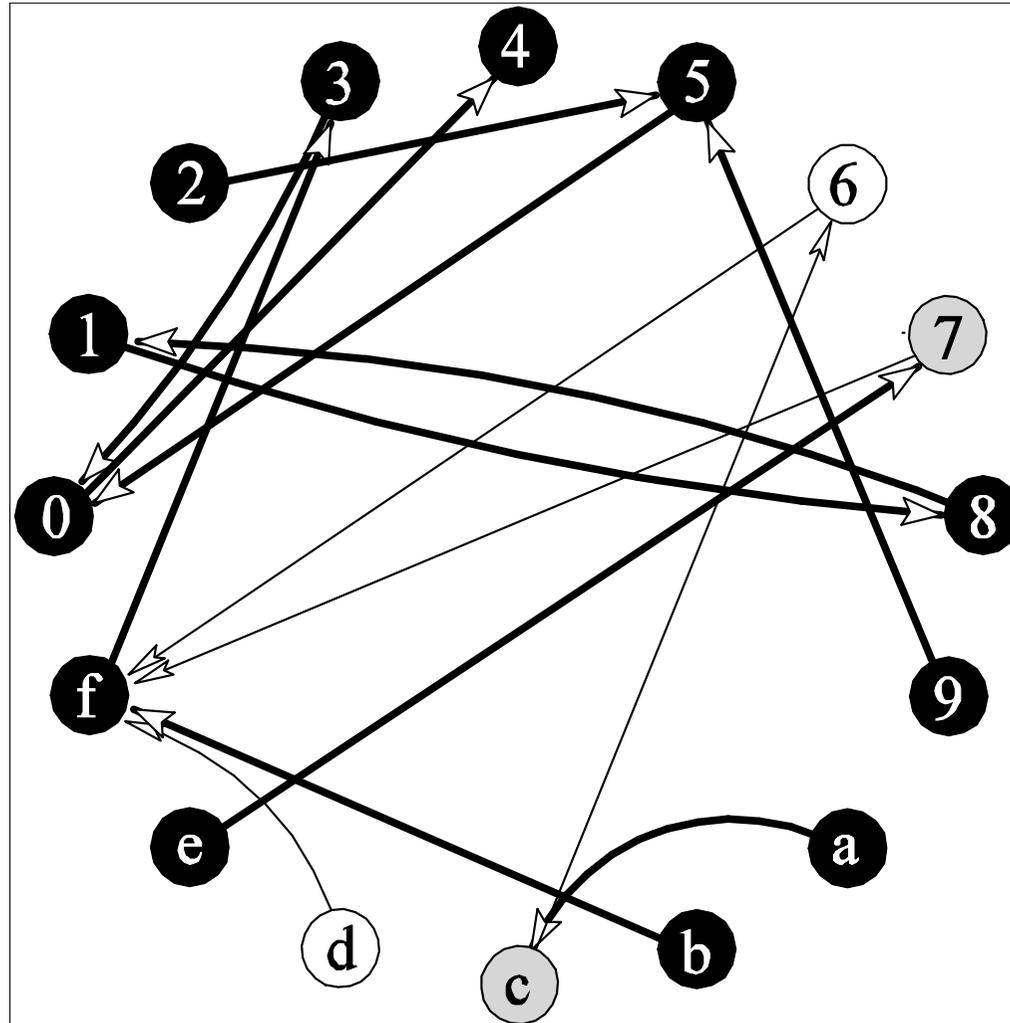
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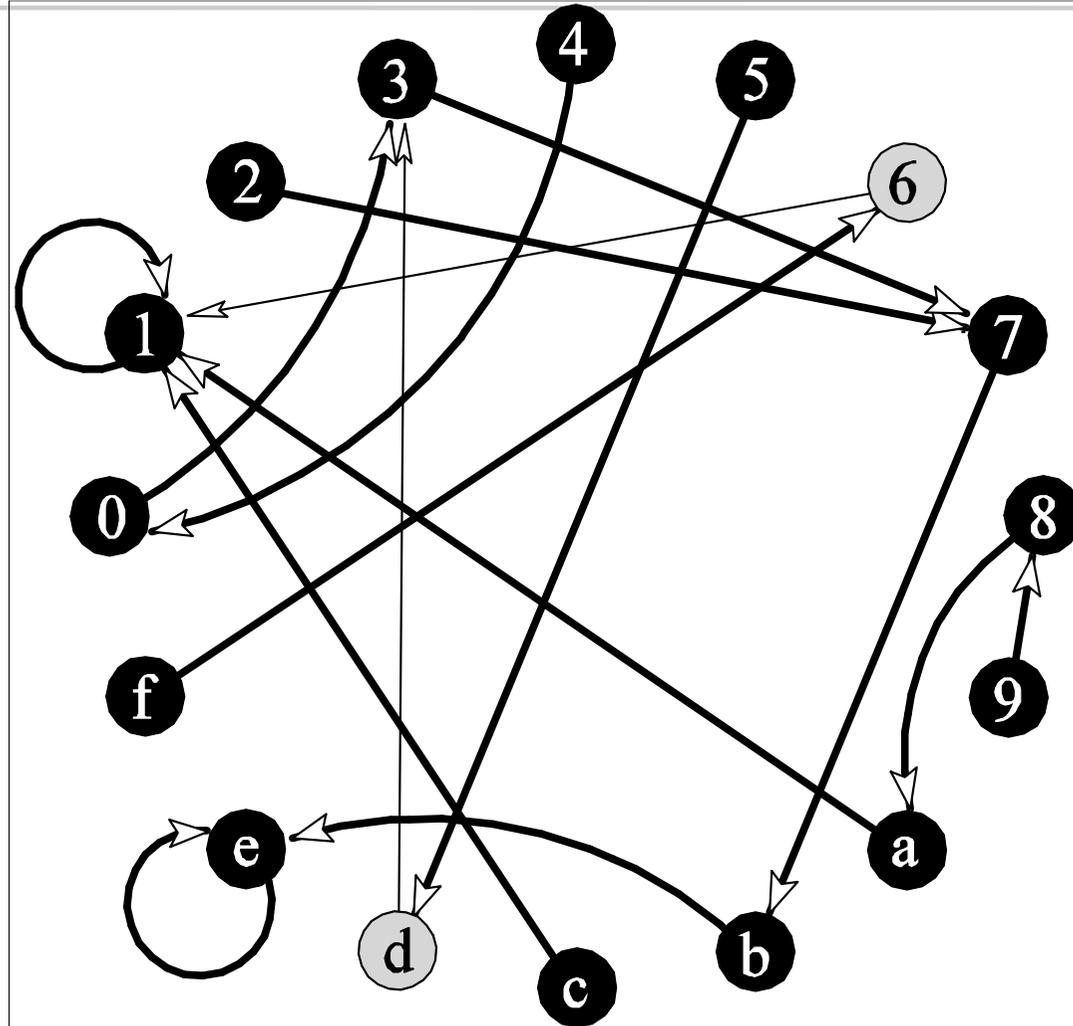
# Push Model



# Push Model



# Push Model



- 3 cases for an infected node
  1. it is the only one infecting a new node
  2. it contacts an already infected node
  3. it infects together with other infected nodes a new node
    - this case is neglected in the prior deterministic case
  
- Probability for 1st or 3rd case  $s(t) = 1 - i(t)$
- Probability for 2nd case  $i(t)$
- Probability for 3rd case is at most  $i(t)$ 
  - since at most  $i(t)$  are infected
- Probability of infection of a new node, if  $i(t) \leq s(t)/2$ :
  - at least  $1 - 2i(t)$
- $E[i(t+1)] \geq i(t) + i(t)(1 - 2i(t)) = 2i(t) - 2i(t)^2 \approx 2i(t)$

# Push Model

## Start phase & Exponential Growth

- If  $i(t) \leq s(t)/2$ :
  - $E[i(t+1)] \geq 2 i(t) - 2i(t)^2 \approx 2 i(t)$
- Start phase:  $I(t) \leq 2 c (\ln n)^2$ 
  - Variance of  $i(t+1)$  relatively large
  - Exponential growth starts after some  $O(1)$  with high probability
- Exponential growth:
 

$I(t) \in [2 c (\ln n)^2, n/(\log n)]$

  - Nearly doubling of infecting nodes with high probability, i.e.  $1 - O(n^{-c})$

### ■ Proof by Chernoff-Bounds

- For independent random variables  $X_i \in \{0, 1\}$  with  $X_m = \sum_{i=1}^m X_i$
- and any  $0 \leq \delta \leq 1$

$$P[X_m \leq (1 - \delta)\mathbf{E}[X_m]] \leq e^{-\delta^2 \mathbf{E}[X_m]/2}$$

- Let  $\delta = 1/(\ln n)$
- $\mathbf{E}[X_m] \geq 2 c (\ln n)^3$
- Then  $\delta^2 \mathbf{E}[X_m] / 2 \geq c \ln n$
- This implies

$$P[X_m \leq (1 - \delta)\mathbf{E}[X_m]] \leq e^{-\delta^2 \mathbf{E}[X_m]/2} \leq n^{-c}$$

# Push Model

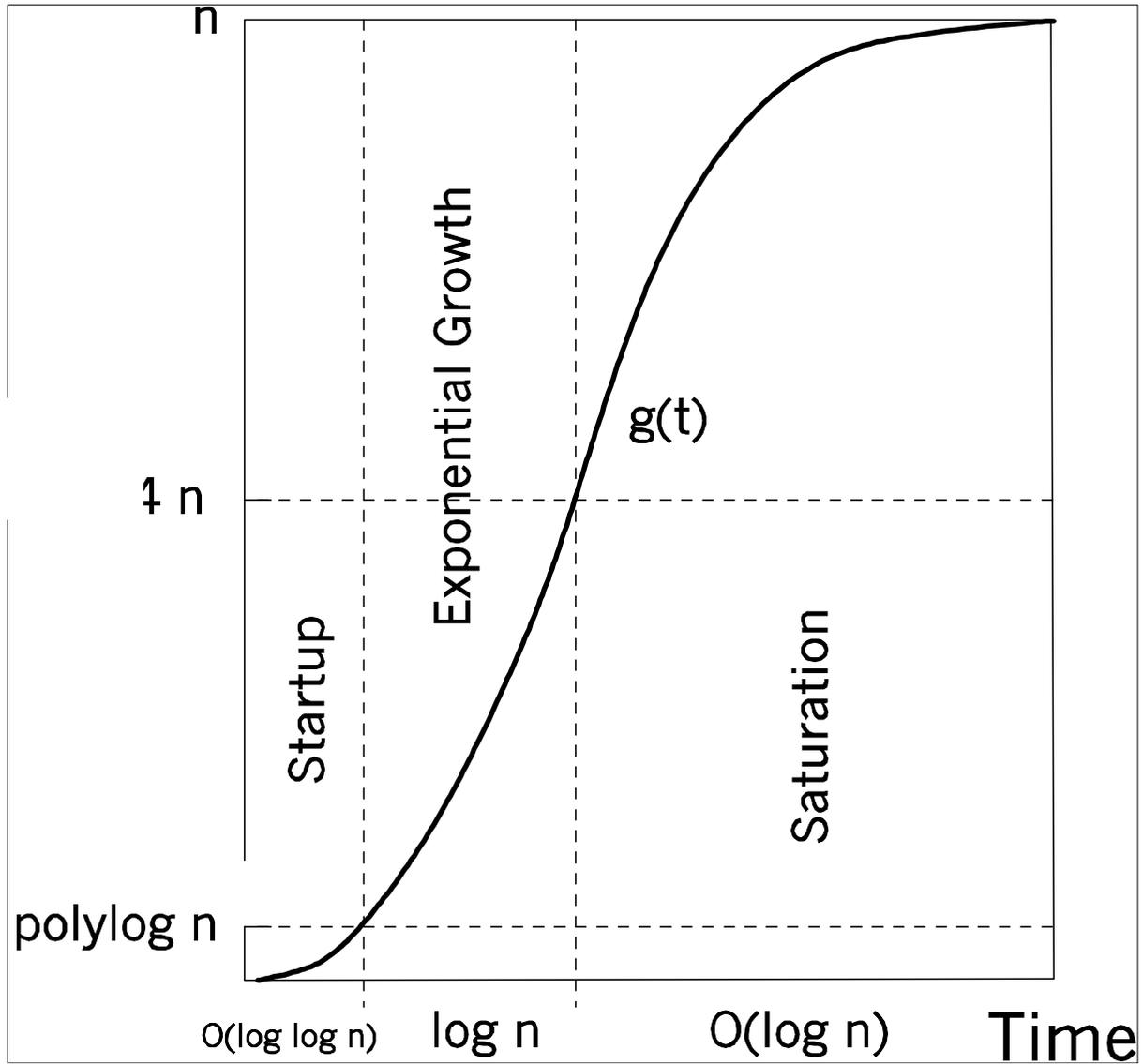
## Middle Phase & Saturation

- Probability of infections of a new node if  $i(t) \leq s(t)/2$ :  $1 - 2i(t)$ 
  - $E[i(t+1)] \geq 2i(t) - 2i(t)^2 \approx 2i(t)$
- Middle phase  $I(t) \in [n/(\log n), n/3]$ 
  - term  $2i(t)^2 \geq 2i(t)/(\log n)$  cannot be neglected anymore
  - Yet,  $2i(t) - 2i(t)^2 \geq 4/3 i(t)$  still implies exponential growth, but with base  $< 2$
- **Saturation:  $I(t) \geq n/3$** 
  - Probability that a susceptible node is not contacted by  $I(t) = c$   $n$  infected nodes:

$$\left(1 - \frac{1}{n}\right)^{cn} = \left(\left(1 - \frac{1}{n}\right)^n\right)^c \leq \frac{1}{e^c}$$

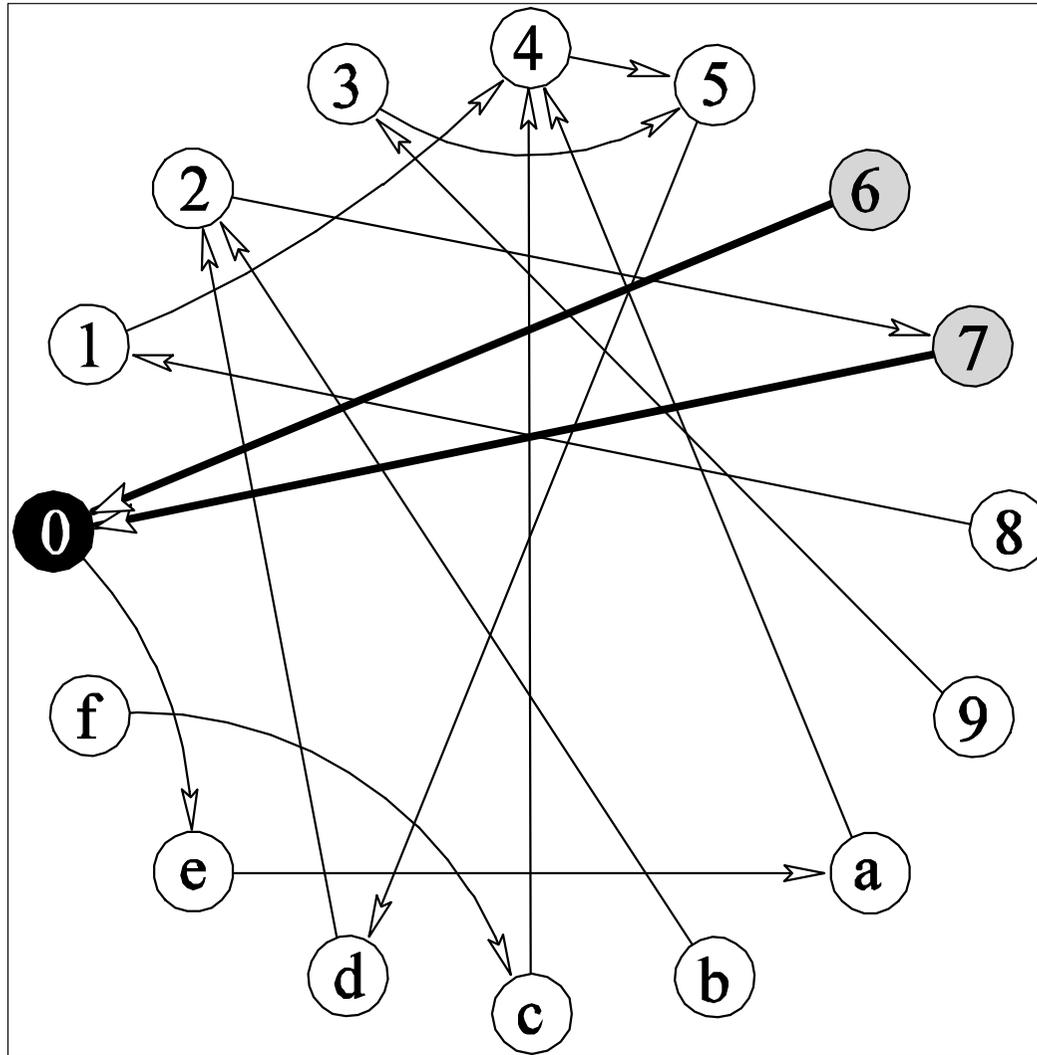
- This implies a constant probability for infection  $\geq 1 - e^{-1/3}$  und  $\leq 1 - e^{-1}$
- Hence  $E[s(t+1)] \leq e^{-i(t)} s(t) \leq e^{-1/3} s(t)$
- Chernoff-bounds imply that this holds with high probability
- Exponential shrinking of susceptible nodes
- Base converges to  $1/e$

# Push Model

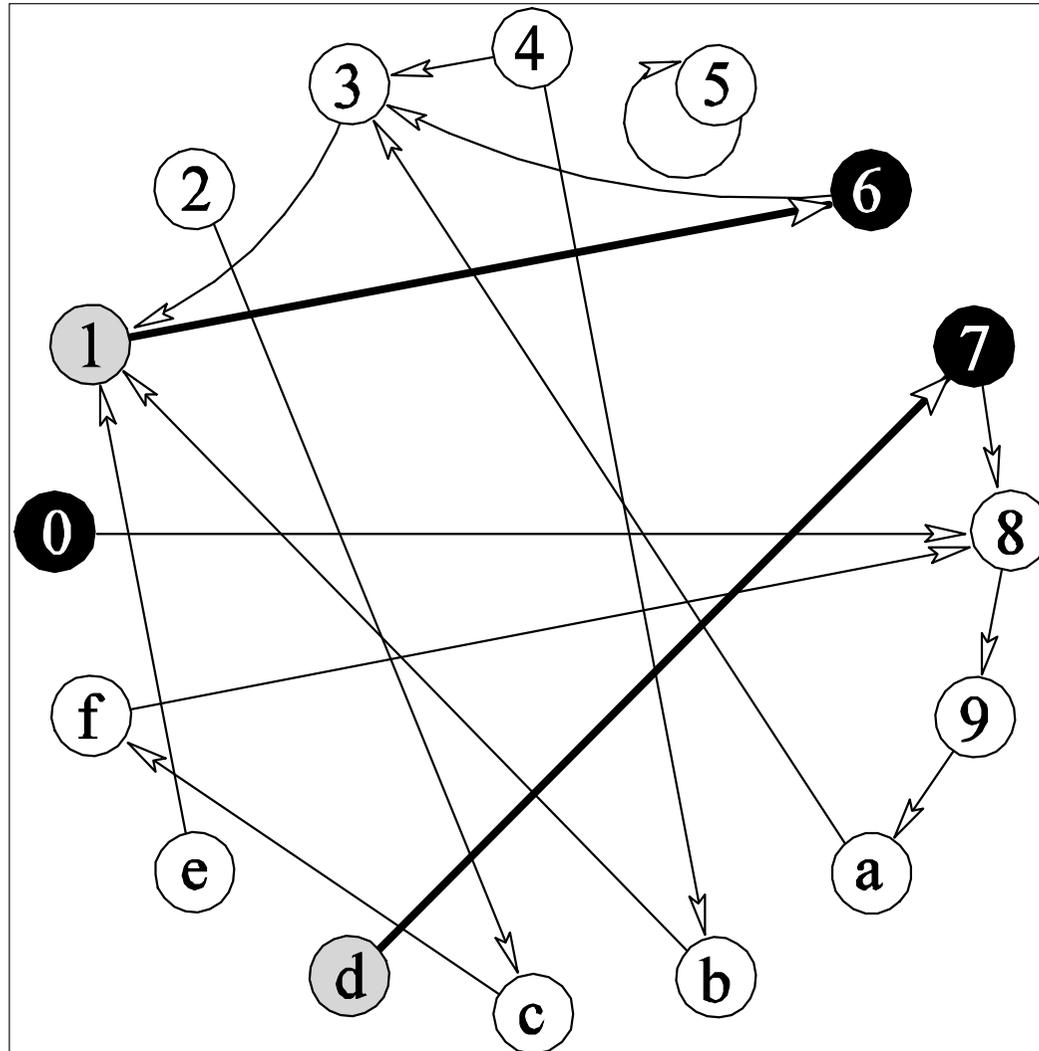


- Infection models:
  - Push Model
    - if  $u$  is infected and  $(u,v) \in E_t$ , then  $v$  is infected in the next round
  - Pull Model
    - if  $v$  is infected and  $(u,v) \in E_t$ , then  $u$  is infected in the next round

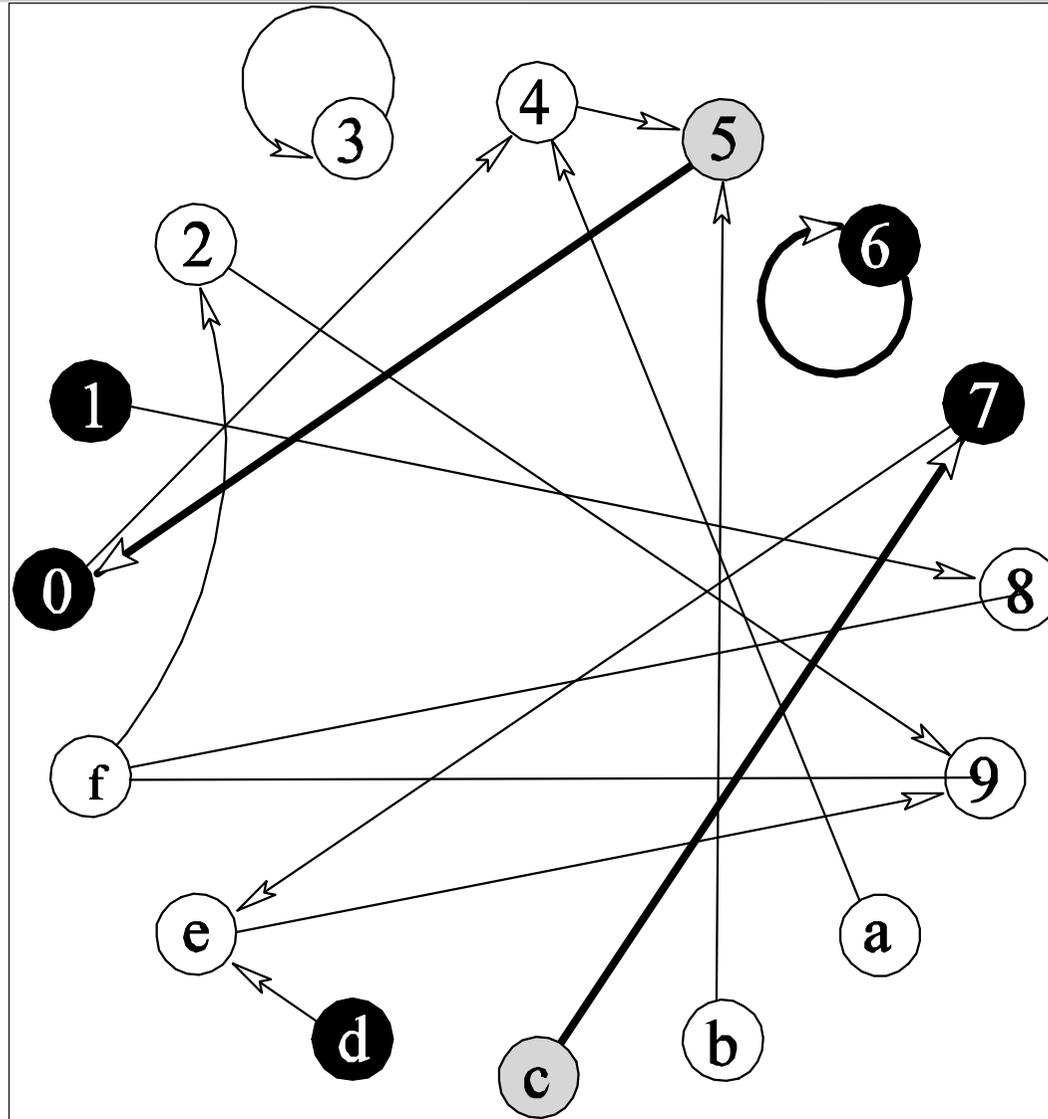
# Pull Model



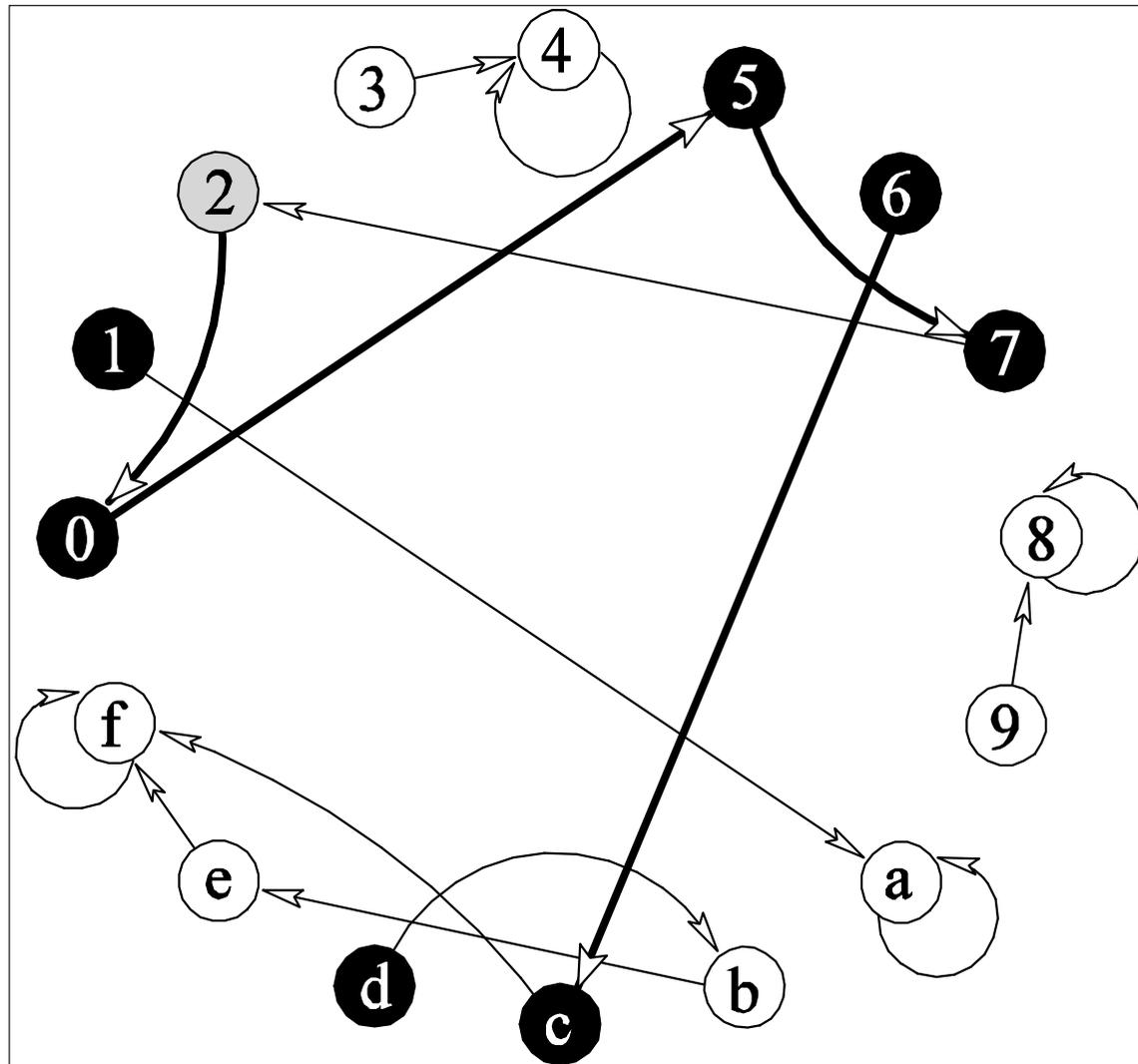
# Pull Model



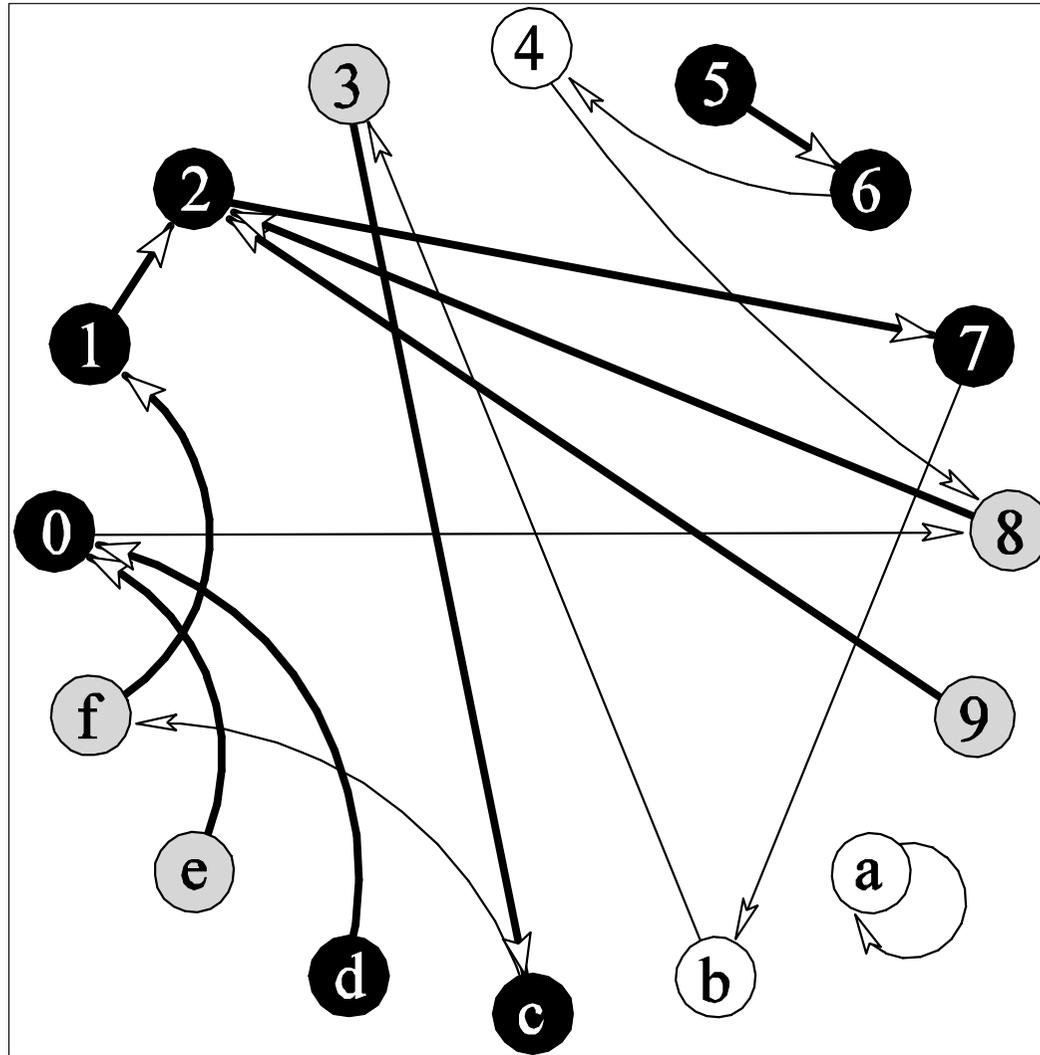
# Pull Model



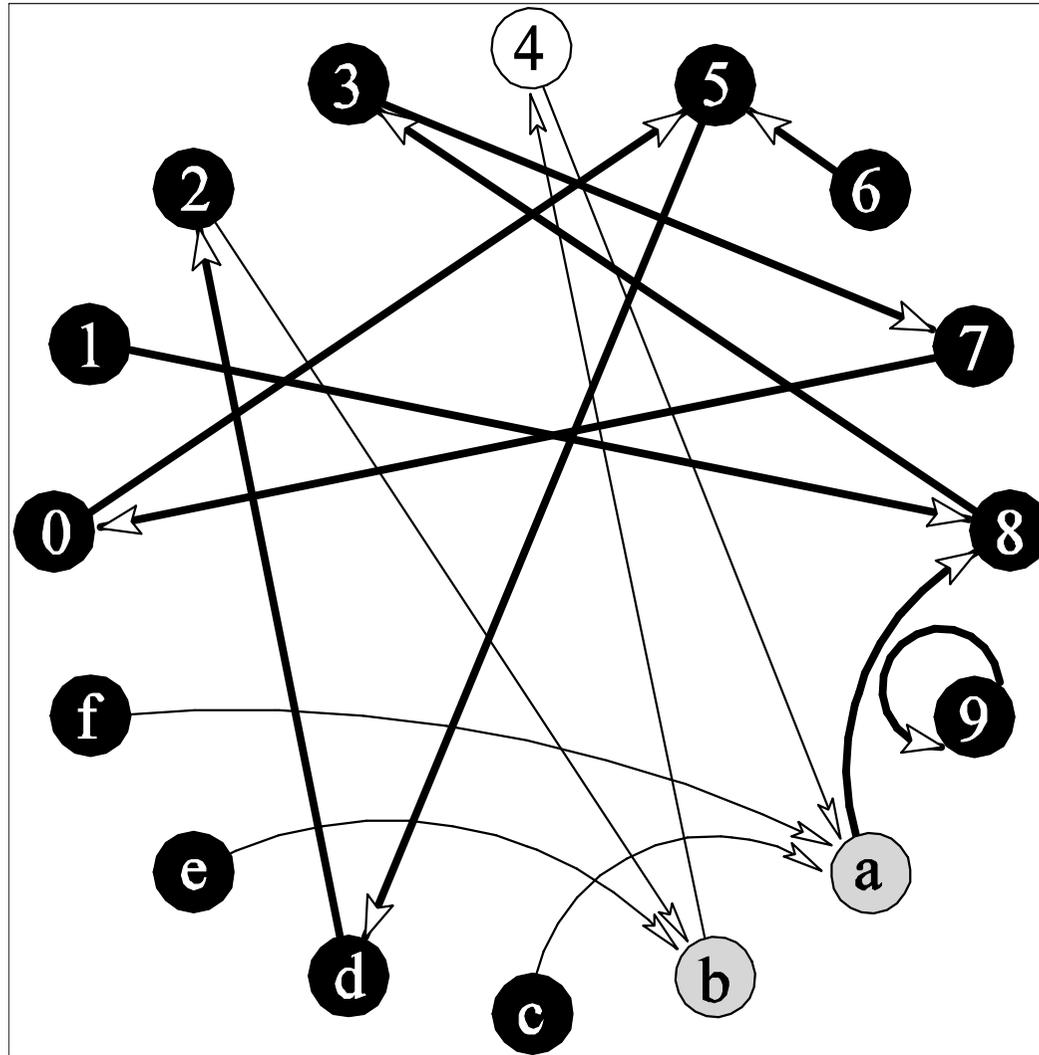
# Pull Model



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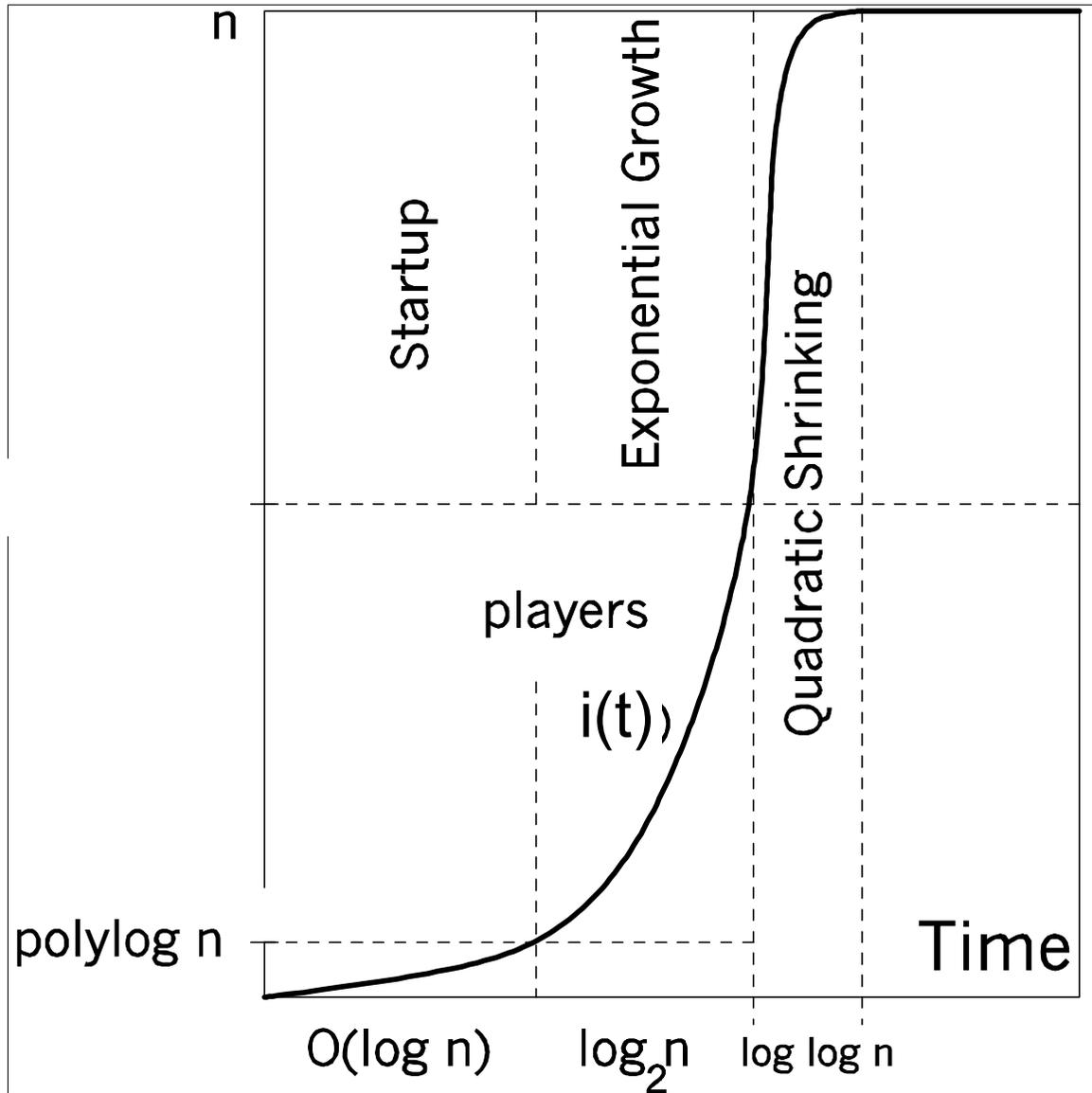


# Pull Model



- Consider
  - an susceptible node and  $I(t)$  infected nodes
- Probability that a susceptible node contacts an infected node:  $i(t)$ 
  - $E[s(t+1)]$ 
    - $= s(t) - s(t) i(t)$
    - $= s(t) (1 - i(t)) = s(t)^2$
  - $E[i(t+1)]$ 
    - $= 1 - s(t)^2$
    - $= 1 - (1 - i(t))^2$
    - $= 2 i(t) - i(t)^2 \approx 2 i(t)$ 
      - for small  $i(t)$
- Problem
  - if  $i(t) \leq (\log n)^2$  then exponential growth is not with high probability
  - $O(\log n)$  steps are needed to start eh growth with high probability
    - yet in the expectation it grows exponentially
- After this phase
  - If  $s(t) \leq \frac{1}{2}$ 
    - then the share of susceptible nodes is squared in each step
  - This implies  $E[s(t+ O(\log \log n))] = 0$ ,
  - If  $i(t) \geq \frac{1}{2}$  then after  $O(\log \log n)$  steps all nodes are infected with high probability

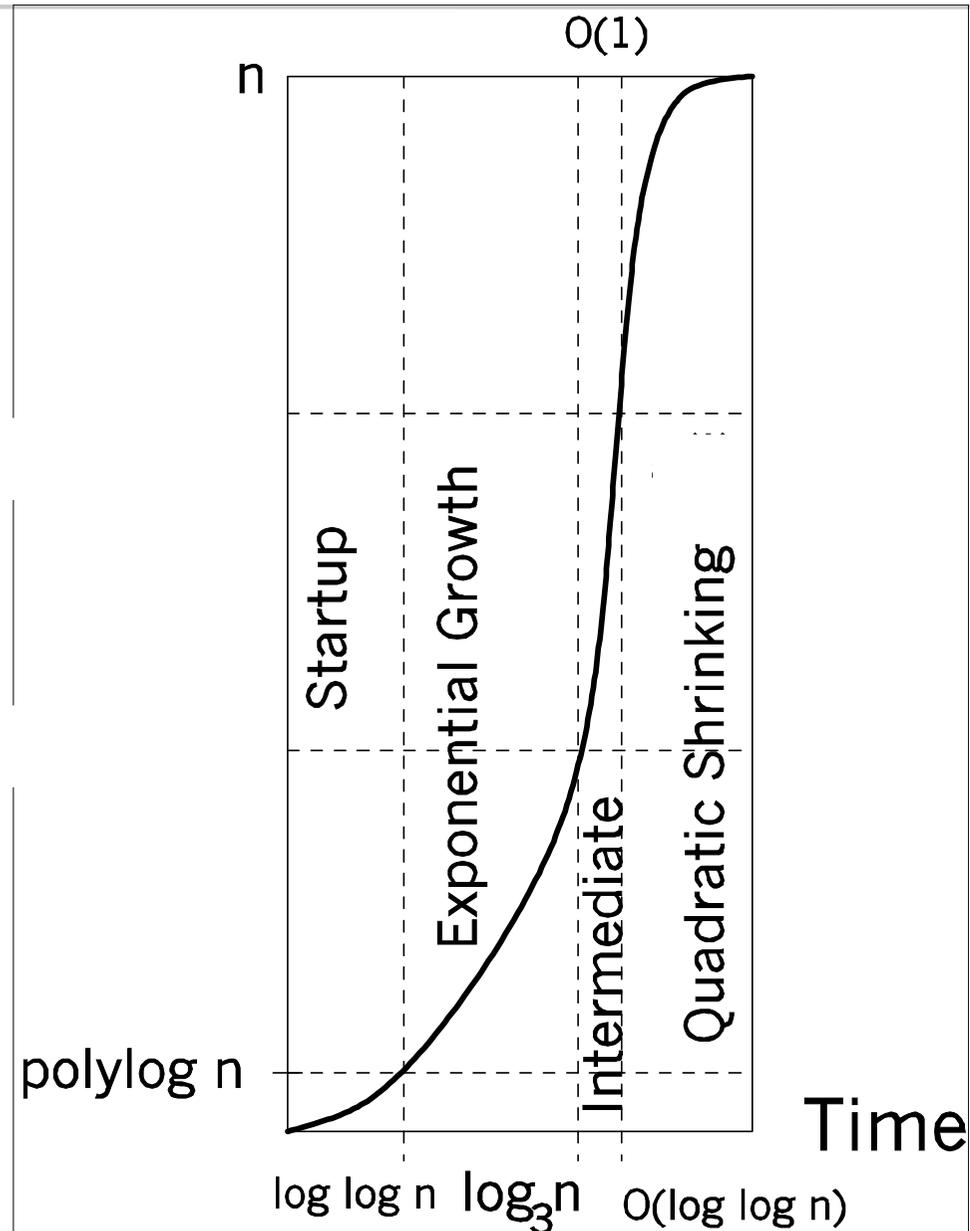
# Pull Model



# Push&Pull Model

- Combines growth of Push and Pull
- Start phase:  $i(t) \leq 2 c (\ln n)^2$ 
  - Push causes doubling of  $i(t)$  after  $O(1)$  rounds with high probability
- Exponential growth:  
 $I(t) \in [2 c (\ln n)^2, n/(\log n)]$ 
  - Push and Pull nearly triple in each round with high probability:
    - $i(t+1) \geq 3 (1-1/(\log n)) i(t)$
- Middle phase:  $I(t) \in [n/(\log n), n/3]$ 
  - Push and Pull
    - slower exponential growth
- Quadratic shrinking:  $I(t) \geq n/3$ 
  - caused by Pull:
    - $E[s(t+1)] \leq s(t)^2$
    - The Chernoff bound implies with high probability
    - $s(t+1) \leq 2 s(t)^2$
    - so after two rounds for  $s(t) \leq 1/2^{1/2}$ 
      - $s(t+2) \leq s(t)^2$  w.h.p.

# Push&Pull Model



# Max-Counter Algorithm

- Simple termination strategy
  - If the rumor is older than  $\max_{\text{ctr}}$ , then stop transmission
- Advantages
  - simple
- Disadvantage
  - Choice of  $\max_{\text{ctr}}$  is critical
  - If  $\max_{\text{ctr}}$  is too small then not all nodes are informed
  - If  $\max_{\text{ctr}}$  is too large, then the message overhead is  $\Omega(n \max_{\text{ctr}})$
- Optimal choice for push-communication
  - $\max_{\text{ctr}} = O(\log n)$
  - Number of messages:  $O(n \log n)$
- Pull communication
  - $\max_{\text{ctr}} = O(\log n)$
  - Number of messages:  $O(n \log n)$
- Push&Pull communication
  - $\max_{\text{ctr}} = \log_3 n + O(\log \log n)$
  - Number of messages:  $O(n \log \log n)$

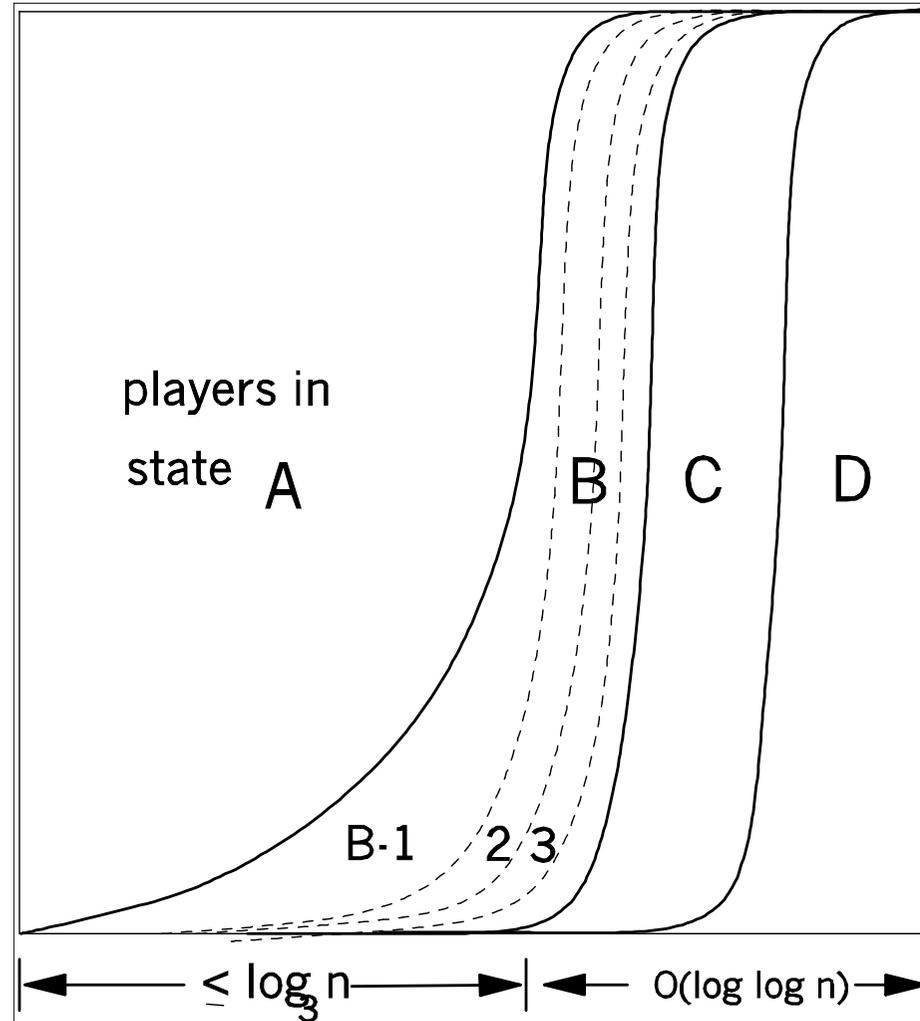
# Shenker's Min-Counter Algorithm

- Only if the rumor is seen as old then contact partners increase the age-counter
- Shenker's Min-Counter-Algorithmus für  $\max_{ctr} = O(\log \log n)$ 
  - Every player  $P$  stores age-variable  $ctr_R(P)$  for each rumor  $R$
  - A: player  $P$  does not know the rumor:
    - $ctr_R(P) \leftarrow 1$
  - B: If player  $P$  sees rumor for the first time
    - $ctr_R(P) \leftarrow 1$
  - B: If partners  $Q_1, Q_2, \dots, Q_m$  communicate with  $P$  in a round
  - If  $\min_i \{ctr_R(Q_i)\} \geq ctr_R(P)$  then
    - $ctr_R(P) \leftarrow ctr_R(P) + 1$
  - C: If  $ctr_R(P) \geq \max_{ctr}$  then
    - tell the rumor for  $\max_{ctr}$  more rounds
    - then D: stop sending the rumor
- Theorem
  - Shenker's Min-Counter algorithm informs all nodes using Push&Pull-communication in  $\log_3 n + O(\log \log n)$  rounds with probability  $1 - n^{-c}$ , using at most  $O(n \log \log n)$  messages.

# Shenker's Min-Counter-Algorithm

- Theorem

- Shenker's Min-Counter algorithm informs all nodes using Push&Pull-communication in  $\log_3 n + O(\log \log n)$  rounds with probability  $1 - n^{-c}$ , using at most  $O(n \log \log n)$  messages.





# Peer-to-Peer Networks

## 17 Kelips and Epidemic Algorithms

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