

*To Wuhan doctor Li Wenliang,
who despite the power ban warned of the danger
and was killed by coronavirus*

SIR-simulation of Corona pandemic dynamics in Europe

Igor Nesteruk

Institute of Hydromechanics. National Academy of Sciences of Ukraine
National Technical University of Ukraine "Igor Sikorsky Kyiv Polytechnic Institute".
inesteruk@yahoo.com

ABSTRACT

The SIR (susceptible-infected-removed) model, statistical approach to the parameter identification and the official WHO daily data about the confirmed cumulative number of cases were used to estimate the characteristics of COVID-19 pandemic in Italy, Spain, Germany, France, Austria and Moldova. The final sizes and durations of epidemic outbreaks in these countries are calculated.

Keywords: coronavirus pandemic, epidemic outbreak in Italy, Spain, Germany, France, Austria and Moldova, coronavirus COVID-19, mathematical modeling of infection diseases, SIR model, parameter identification, statistical methods.

Introduction

Here we consider the development of epidemic outbreak in Italy, Spain, Germany, France, Austria and the Republic of Moldova caused by coronavirus COVID-19 (2019-nCoV) (see e.g., [1]). For an epidemic of an infectious disease, the SIR model, connecting the number of susceptible S , infected and spreading the infection I and removed R persons, can be used [2-4]. The unknown parameters of this model can be estimated with the use of the cumulative number of cases $V=I+R$ and the statistics-based method of parameter identification developed in [5, 6].

This approach was used in [6-12] to estimate the Corona pandemic dynamics in China, Republic of Korea, Italy, Austria and Ukraine. Usually the number of cases registered during the initial period of an epidemic is not reliable, since many infected persons are not detected. That is why the correct estimations of epidemic parameters can be done with the use of data sets obtained for later periods of the epidemic when the number of detected cases is closer to the real one. This fact necessitates a periodic reassessment of the epidemic's characteristics and forecasts for its final size and duration. In this paper we will recalculate the pandemic parameters for Italy and Austria, provide estimations for Spain, Germany, France and Moldova, and compare with the further pandemic development.

NOTE: This preprint reports new research that has not been certified by peer review and should not be used to guide clinical practice.

Data

Day in February and March, 2020	Time moments In days t_j	Number of cases in Italy	Number of cases in Spain	Number of cases in Germany	Number of cases in France	Number of cases in Austria	Number of cases in the Republic of Moldova
21	-1	9	2	16	12	0	0
22	0	76	2	16	12	0	0
23	1	124	2	16	12	0	0
24	2	229	2	16	12	0	0
25	3	322	2	18	12	2	0
26	4	400	12	21	18	2	0
27	5	650	25	26	38	4	0
28	6	888	32	57	57	5	0
29	7	1128	45	57	100	10	0
1	8	1689	45	129	100	10	0
2	9	2036	114	157	191	18	0
3	10	2502	151	196	212	24	0
4	11	3089	198	262	282	37	0
5	12	3858	257	534	420	47	0
6	13	4636	374	639	613	66	0
7	14	5883	430	795	706	104	1
8	15	7375	589	1112	1116	112	1
9	16	9172	1024	1139	1402	131	1
10	17	10149	1639	1296	1774	182	3
11	18	12462	2140	1567	2269	302	4
12	19	15113	2965	2369	2860	361	4
13	20	17660	4231	3062	3640	504	8
14	21	21157	5753	3795	4469	800	12
15	22	24747	7753	4838	5380	959	23
16	23	27980	9191	6012	6573	1132	29
17	24	31506	11178	7156	7652	1332	30
18	25	35713	13716	8198	9043	1646	36
19	26	41035	17147	10999	10877	1843	49
20	27	47021	19980	18323	12475	2649	66
21	28	53578	24926	21463	14296	3024	80
22	29	59138	28572	24774	15821	3631	94
23	30	63927	33089	29212	19615	4486	109
24	31	69176	39673	31554	22025	5282	125
25	32	74386	47610	36508	24920	5888	149
26	33	80539	56188	42288	28786	7029	177
27	34	86498	64059	48582	32542	7697	199

Table 1. Official cumulative numbers of confirmed cases in Italy, Spain, Germany, France, Austria and Moldova during the initial stage of epidemics used only for comparison with SIR curves, [1]

The official data about the accumulated numbers of confirmed COVID-19 cases V_j in Italy, Spain, Germany, France, Austria and in the republic of Moldova from WHO daily situation reports (numbers 33-87), [1] are presented in Tables 1 and 2. The corresponding moments of time t_j (measured in days) are also shown in these tables. The data sets presented in Table 1 were used only for comparison with corresponding SIR curves. Table 2 was used for calculations and verifications of predictions.

Day in March and April, 2020	Time moments in days t_j	Number of cases in Italy	Number of cases in Spain	Number of cases in Germany	Number of cases in France	Number of cases in Austria	Number of cases in the Republic of Moldova
28	35	92472	72248	52547	37145	8291	231
29	36	97689	78797	57298	39642	8813	263
30	37	101739	85195	61913	43977	9618	298
31	38	105792	94417	67366	51477	10182	353
1	39	110574	102136	73522	56261	10711	423
2	40	115242	110238	79696	58327	11129	591
3	41	119827	117710	85778	63536	11525	591
4	42	124632	124736	91714	67757	11766	752
5	43	128948	130759	95391	69607	11983	864
6	44	132547	135032	99225	73488	12297	965
7	45	135586	140510	103228	77226	12640	1056
8	46	139422	146690	108202	81095	12969	1174
9	47	143626	152446	113525	85351	13248	1289
10	48	147577	157022	117658	89683	13560	1438
11	49	152271	161852	120479	92787	13807	1560
12	50	156363	166019	123016	94382	13937	1662
13	51	159516	169496	125098	97050	14043	1712
14	52	162488	172541	127584	102533	14234	1934
15	53	165155	177633	130450	105155	14370	2049
16	54	168941	182816	133830	107778	14448	2154
17	55	172434	188068	137439	108163	14603	2264
18	56	175925	191726	139897	110721	14662	2351
19	57	178972	195944	141672	111463	14710	2472
20	58	181228	200210	143457	113513	14783	2548

Table 2. Official cumulative numbers of confirmed cases in Italy, Spain, Germany, France, Austria and Moldova used for calculations and verifications of predictions, [1]

SIR model

The SIR model for an infectious disease [2-5] relates the number of susceptible persons S (persons who are sensitive to the pathogen and **not protected**); the number of infected is I (persons

who are sick and **spread the infection**; please don't confuse with the number of still ill persons, so known active cases) and the number of removed R (persons who **no longer spread the infection**; this number is the sum of isolated, recovered, dead, and infected people who left the region); α and ρ are constants.

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

$$\frac{dI}{dt} = \alpha SI - \rho I \quad (2)$$

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

To determine the initial conditions for the set of equations (1–3), let us suppose that at the moment of the epidemic outbreak t_0 , [5, 6]:

$$I(t_0) = 1, R(t_0) = 0, S(t_0) = N - 1, N = S + I + R \quad (4)$$

The analytical solution for the set of equations (1–3) was obtained by introducing the function $V(t) = I(t) + R(t)$, corresponding to the number of victims or cumulative confirmed number of cases, [5, 6]:

$$F_1(V, N, \nu) = \alpha(t - t_0) \quad (5)$$

$$F_1 = \int_1^V \frac{dU}{(N - U)[\nu \ln(N - U) + U - \nu \ln(N - 1)]}, \quad \nu = \frac{\rho}{\alpha} \quad (6)$$

Thus, for every set of parameters N, ν, α, t_0 and a fixed value of V the integral (6) can be calculated and the corresponding moment of time can be determined from (5). Then functions $I(t)$ and $R(t)$ can be easily calculated with the of formulas, [5, 6].

$$I = \nu \ln S - S + N - \nu \ln(N - 1), \quad S = N - V, \quad R = V - I. \quad (7)$$

Function I has a maximum at $S = \nu$ and tends to zero at infinity, see [2, 3]. In comparison, the number of susceptible persons at infinity $S_\infty > 0$, and can be calculated from the non-linear equation, [5, 6]:

$$S_\infty = (N - 1)e^{\frac{S_\infty - N}{\nu}} \quad (8)$$

The final number of victims (final accumulated number of cases) can be calculated from:

$$V_\infty = N - S_\infty \quad (9)$$

To estimate the duration of an epidemic outbreak, we can use the condition:

$$V(t_{final})=1 \quad (10)$$

which means that at $t > t_{final}$ less than one person still spread the infection.

Parameter identification procedure

In the case of a new epidemic, the values of this independent four parameters are unknown and must be identified with the use of limited data sets. A statistical approach was developed in [5] and used in [6-12] to estimate the values of unknown parameters. The registered points for the number of victims V_j corresponding to the moments of time t_j can be used in order to calculate $F_{1j} = F_1(V_j, N, \nu)$ for every fixed values N and ν with the use of (6) and then to check how the registered points fit the straight line (5). For this purpose the linear regression can be used, e.g., [13], and the optimal straight line, minimizing the sum of squared distances between registered and theoretical points, can be defined. Thus we can find the optimal values of α , t_0 and calculate the correlation coefficient r .

Then the F-test may be applied to check how the null hypothesis that says that the proposed linear relationship (5) fits the data set. The experimental value of the Fisher function can be calculated with the use of the formula:

$$F = \frac{r^2(n-m)}{(1-r^2)(m-1)} \quad (11)$$

where n is the number of observations, $m=2$ is the number of parameters in the regression equation, [13]. The corresponding experimental value F has to be compared with the critical value $F_C(k_1, k_2)$ of the Fisher function at a desired significance or confidence level ($k_1 = m-1$, $k_2 = n-m$), [14]. When the values n and m are fixed, the maximum of the Fisher function coincides with the maximum of the correlation coefficient. Therefore, to find the optimal values of parameters N and ν , we have to find the maximum of the correlation coefficient. To compare the reliability of different predictions (with different values of n) it is useful to use the ratio $F / F_C(1, n-2)$ at fixed significance level, [15]. We will use the level 0.001; corresponding values $F_C(1, n-2)$ can be taken from [14]. The most reliable prediction yields the highest $F / F_C(1, n-2)$ ratio.

Results

Usually the number of cases during the initial period of an epidemic outbreak is not reliable. To avoid their influence on the results, only V_j values for the period March 28 – April 10, 2020 ($35 \leq t_j \leq 48$; $n=14$; $F_C(1, n-2) = 18.6$; see Table 2) were used to calculate the epidemic characteristics in every country. Since during the quarantine, the international people exchange is quite limited, we can apply the SIR model for every country assuming its parameters to be constant

(but different for every country) during the fixed period of time. The results of calculations are shown in Tables 3 and 4. To illustrate the influence of data on the results of SIR simulations, other time periods: April 5 – 18, 2020 ($43 \leq t_j \leq 56$; $n=14$; $F_C(1, n-2) = 18.6$; France, Moldova) and March 29-April 18 ($36 \leq t_j \leq 56$; $n=21$; $F_C(1, n-2) = 15.2$; Italy, Spain) were used for second series of calculations for France and Moldova. The results are shown in Table 5.

Country	Italy, prediction 5	Spain, prediction 1	Germany
N	984556.8	736000	1023648
ν	882151.283536331	636763.648000000	946949.046049997
α	9.4016573087e-07	1.68916214450361e-06	1.9664814010e-06
t_0	-67.283729213432	-22.8563373560822	-22.835511732975
ρ	0.8293684062279	1.07559704919762	1.86215768681056
$1/\rho$	1.20573679017765	0.929716198780932	0.53701145025627
r	0.9996573802724	0.999378854391215	0.99904312352174
F , eq. (11)	17503.1269829749	9650.57175588669	6261.40324472474
$F / F_C(1, n-2)$	941.028332418004	518.847943864876	336.634583049717
S_∞ , eq (8)	787098	546870	874169.368888300
V_∞ , eq (9)	197459	189130	149479
t_{final} , eq (10)	148.5	105.6	104.8

Table 3. Epidemic characteristics for Italy, Spain and Germany. Optimal values of parameters, final sizes and durations (last two rows).

Country	France, pred. 1	Austria, pred. 4	Moldova, pred. 1
N	548182.4	75176.032	2911.36
ν	488472.457423422	67343.8674559792	1322.03320401920
α	2.601817507993e-06	1.924971386379e-05	0.0001386860412
t_0	-21.1949054853200	-15.8059189609884	12.9079807669692
ρ	1.27091619189685	1.29635017900866	0.18334755141242
$1/\rho$	0.786833944185958	0.771396507049289	5.45412247012025
r	0.996770038705090	0.996465578483694	0.99726948597323
F , eq. (11)	1848.61225180740	1688.59570093583	2188.39255686532
$F / F_C(1, n-2)$	99.3877554735161	90.7847151040770	117.655513809963
S_∞ , eq. (8)	433257	60068	453
V_∞ , eq. (9)	114925	15108	2458
t_{final} , eq. (10)	106.2	86.5	109.9

Table 4. Epidemic characteristics for France, Austria and the Republic of Moldova. Optimal values of parameters, final sizes and durations (last two rows).

Country	Spain, pred.2	Italy, pred. 6	France, pred. 2	Moldova, pred. 2
N	760152,448	1125589,888	688720	6079,36
ν	643334,866338	1008518,7886	621554,6679951	4055,26811705
α	1,06816546e-06	6,759461602e-07	1,970170995e-06	7,641517427e-05
t_0	-43,8057685	-88,26304932	-29,7952392	4,3218081122
ρ	0,6871880836	0,681704402658	1,2245689787	0,30988401
$1/\rho$	1,455205676	1,46691145913	0,81661385959	3,2270137723
r	0,997926053	0,99969602932	0,997453623886	0,998814863
F , eq. (11)	4566,3928836	31238,7652767	2347,293599	5053,707894
$F/F_C(1, n-2)$	300,420584	2055,181926	126,1985806	271,7047254
S_∞ , eq. (8)	539142	899854	558897	2539
V_∞ , eq. (9)	221011	225736	129823	3541
t_{final} , eq. (10)	135.3	177.8	119.1	114.5

Table 5. Results of second series of calculations with the use data from period April 5 – 18, 2020 for France and the Republic of Moldova, and March 29-April 18, 2020 for Italy and Spain. Optimal values of parameters, final sizes and durations (last two rows).

The SIR curves and markers representing the V_j values taken for calculations (“circles”); for comparisons (“triangles”) and verifications of predictions (“stars”) are shown in Figs. 1-6. For Italy, Spain, France and Moldova, the second sets of optimal parameters (from Table 5) were used to calculate SIR curves.

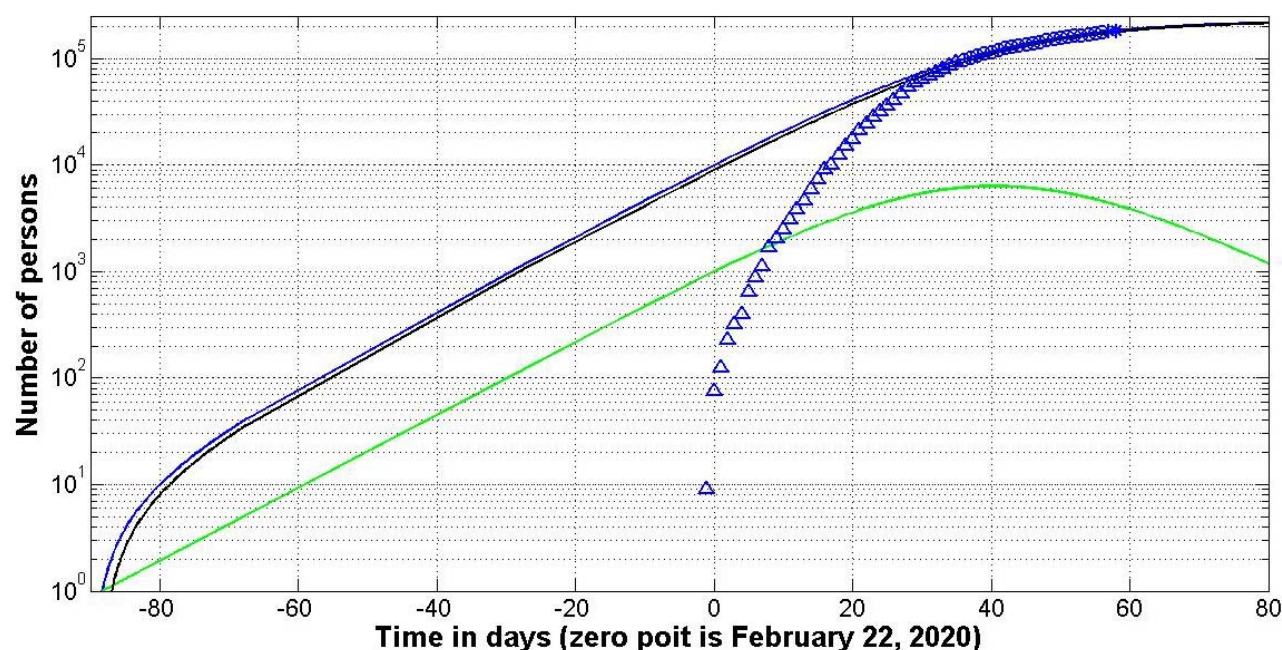


Fig. 1. Italy, prediction 6: SIR curves (lines) and accumulated number of cases (markers) versus time. Numbers of infected I (green), removed R (black) and victims $V=I+R$ (blue line).

It can be seen that the previous predictions for Italy and Austria [11] were more optimistic. Fresh data sets has showed that the final number of cases in Italy could reach 226,000 and their appearance can stop only after August 18, 2020 (see Table 5, prediction 6). The epidemic stop in Austria is expected after May 21, 2020 (see Table 4). These estimations are valid only when the quarantine measures, isolation rate and the coronavirus activity will be same as for the periods taken for calculations.

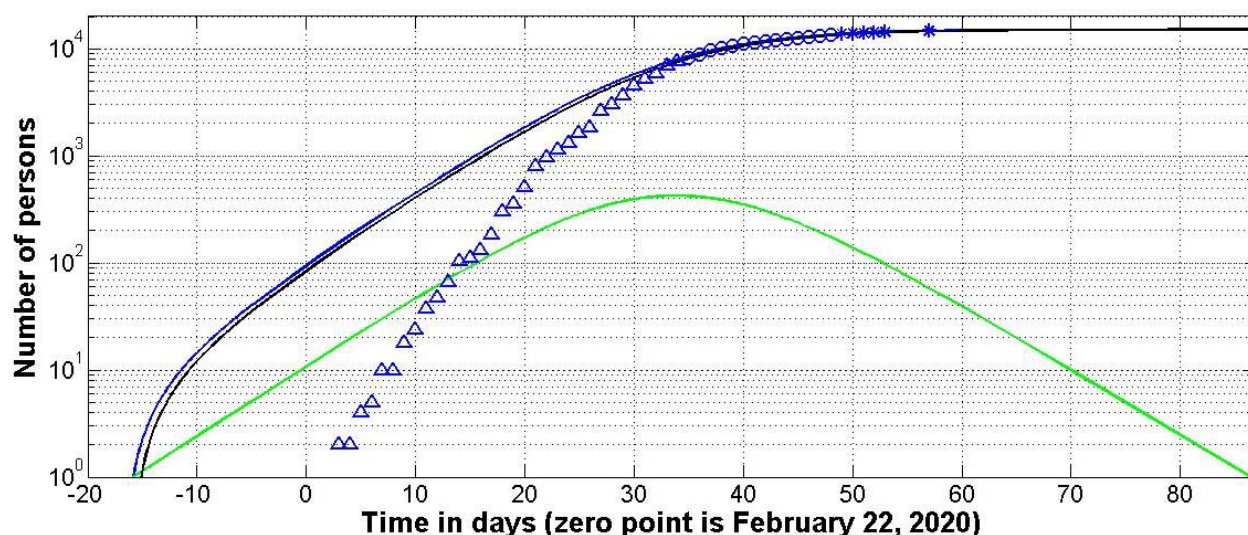


Fig. 2. Austria, prediction 4: SIR curves (lines) and accumulated number of cases (markers) versus time. Numbers of infected I (green), removed R (black) and victims $V=I+R$ (blue).

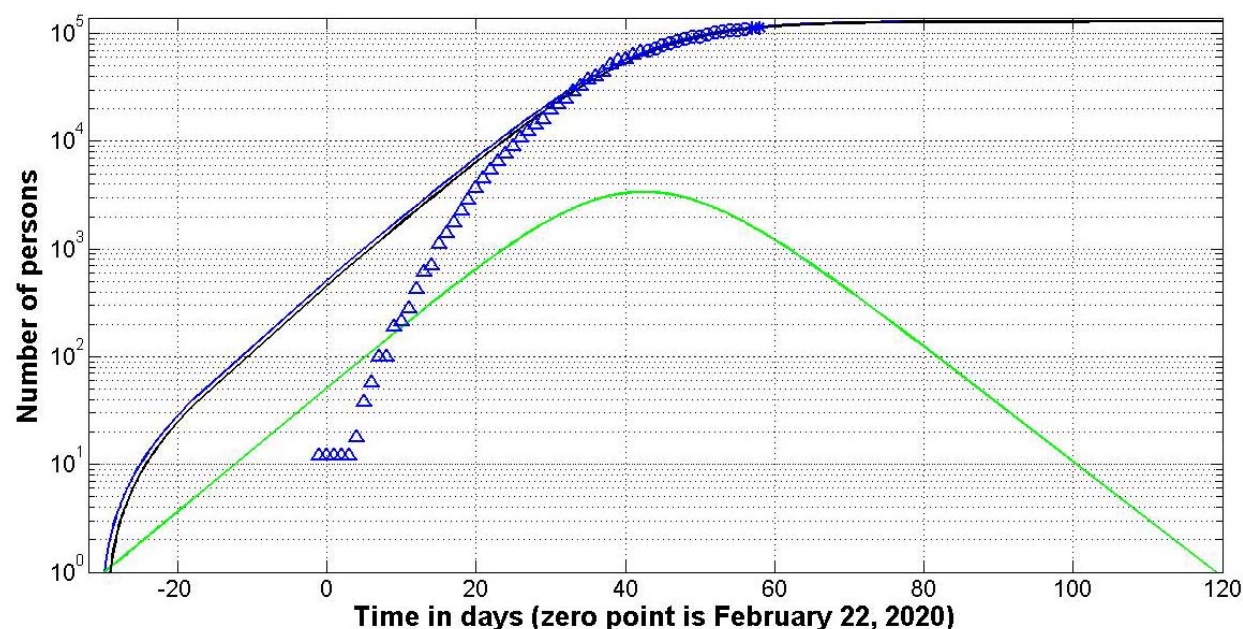


Fig. 3. France, prediction 2: SIR curves (lines) and accumulated number of cases (markers) versus time. Numbers of infected I (green), removed R (black) and victims $V=I+R$ (blue).

Tables 3-5 and Figs. 1, 2 illustrate that the estimations of parameter t_0 values are very different from the results published in [11]. In particular, according to the prediction in Italy the first COVID-19 cases could happen even after November 27, 2019. This results correlates with the

information from Giuseppe Remuzzi, director of the Mario Negri Institute for Pharmacological Research that “virus was circulating before we were aware of the outbreak in China”, [16]. Table 5 and Fig. 3 show that the epidemic outbreak in France could happen around January 25, 2020. This estimation correlates with the results of paper [17], where the first COVID-19 cases with 5 Chinese tourists are described. They were from Wuhan and arrived in Europe on January 17-22, 2020.

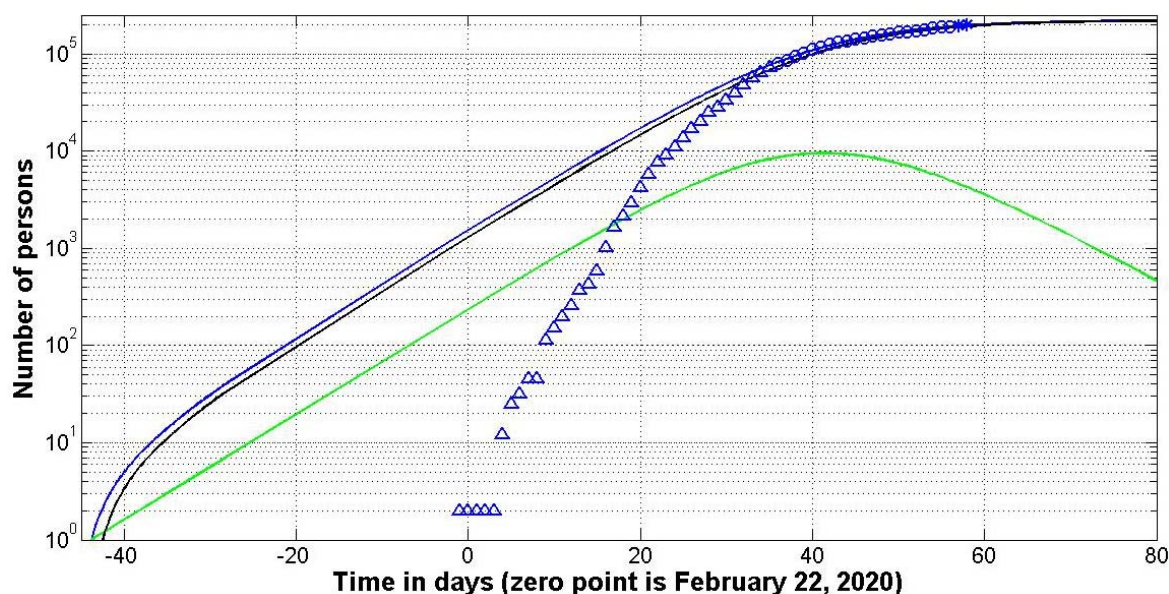


Fig. 4. Spain, prediction 2: SIR curves (lines) and accumulated number of cases (markers) versus time. Numbers of infected I (green), removed R (black) and victims $V=I+R$ (blue).

Fig. 4 illustrates that even second prediction for Spain looks too optimistic (“stars” deviate from the blue line more than for other countries). The second prediction for this country has lower value of $F/F_C(1, n-2)$ in comparison with the first one (see Tables 3 and 5), but for the first prediction the deviations are even larger. Probably the final size and the duration of the epidemic in Spain have to be re-estimated after obtaining new data.

The V and R curves are very close in Fig. 5. It means that the time of spreading infection in Germany is very short (in comparison, for example, with Moldova, see Fig. 6). SIR model allows calculating the average time of spreading infection $1/\rho$. For Germany this value could be estimated as 0.54 days; for Austria and France approximately 0.8 days; for Italy and Spain – 1.5 days and 3.2 days for the Republic of Moldova (see Table 3-5). By comparison, in South Korea this time was approximately 4.3 hours, [8].

Discussion

Figs. 1-6 illustrate that close to the epidemic outbreaks, the information about number of cases is not complete, since it is difficult to detect all the infected persons, especially those with mild illness. As a result, SIR simulation using data sets from the initial epidemic period has limited

accuracy, and predictions of final size and duration are too optimistic (see [10-12]). The data quality may be very different and unpredictable. The only way to obtain the reliable results is to compare the $V(t)$ curve with V_j data obtained after day of calculations. If the discrepancy after some days of observation is too large, new calculations must be performed with the use of fresh data. “Stars” in Figs. 1-3, 5,6 illustrate that the accuracy of calculations is good enough. Probably, the prediction for Spain is too optimistic and can be updated later.

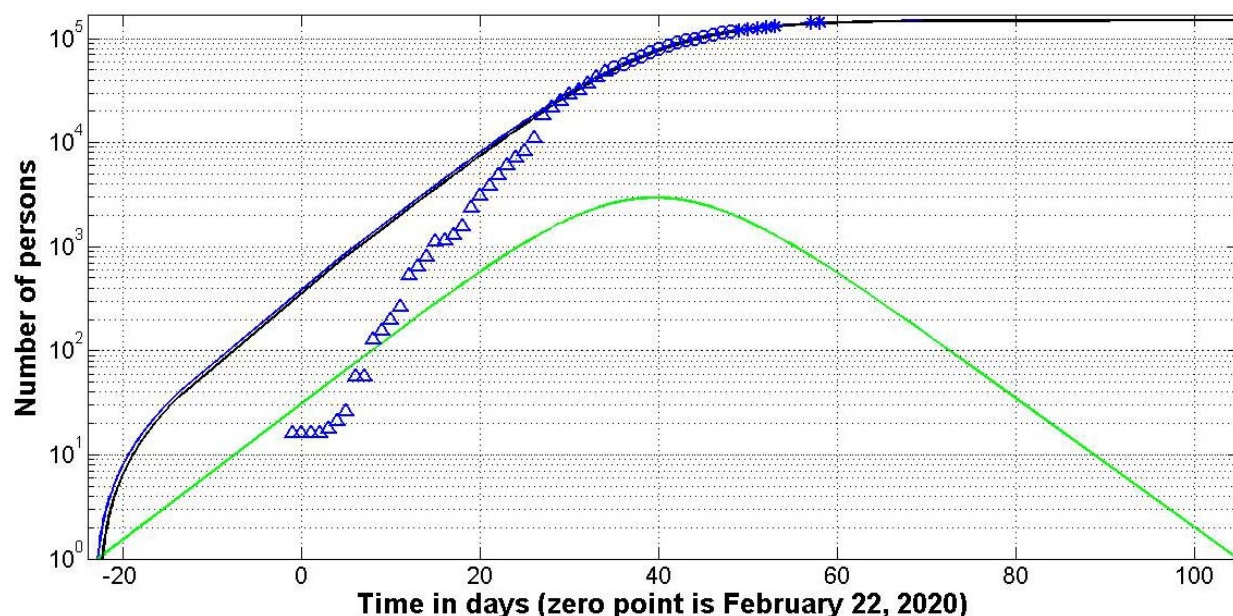


Fig. 5. Germany: SIR curves (lines) and accumulated number of cases (markers) versus time Numbers of infected I (green), removed R (black) and the number of victims $V=I+R$ (blue line).

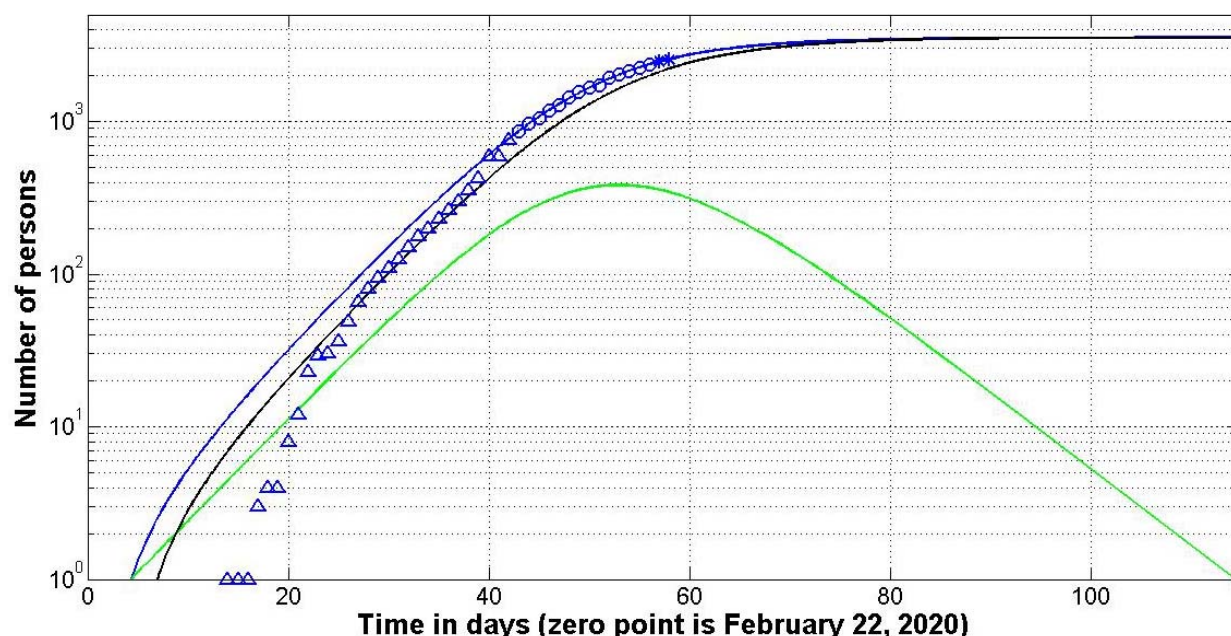


Fig. 6. Moldova, prediction 2: SIR curves (lines) and accumulated number of cases (markers) versus time. Numbers of infected I (green), removed R (black) and victims $V=I+R$ (blue line).

It looks, that SIR model can determine the real time of epidemic outbreak. Due to the data incompleteness, the “hidden” period could be very long. For example, the real epidemic outbreaks

in Italy and Spain probably happened in November, 2019 and January, 2020 respectively (see Table 5 and Figs. 1, 4). There is no reason to think that the “hidden” period in China was shorter. According to [18], the first laboratory confirmed case was recorded on December 8, 2019. Therefore the real “zero” patient could get infection in October-November, 2019 and probably had no connection with the Wuhan fish market. Chinese authorities notified WHO about the epidemic outbreak only on January 3, 2020 (see [18]). This delay and obstacles to the dissemination of truthful information (an example is doctor Li Wenliang) has led to tragic consequences in Europe and other parts of the world.

SIR curves could be useful to estimate the number of persons who are still spreading the infection, so known “hidden” patients (see green lines in Figs. 1-6). These information could be useful to plan the relaxation of quarantine measures. If medical and other services are able to quickly isolate persons who have contacted, for example, with 100 “hidden” patients, then there is no need to wait until the number of patients on the green curve reaches the value of unity. On the other hand, such attenuations may extend the time of occurrence of new cases and the number of deaths. A compromise between medicine and economic interests must be found here.

Conclusions

The SIR (susceptible-infected-removed) model and statistical approach to the parameter are able to make some reliable estimations for the epidemic dynamics, e.g., the real time of the outbreak, final size and duration of the epidemic and the number of persons spreading the infection versus time. This information may be useful to regulate the quarantine activities and to predict the medical and economic consequences of the pandemic. Unfortunately, the number of patients in Europe already exceeds one million. The risk of catching the infection will persist until at least mid-August, 2020. Such fatal consequences could have been avoided if timely and truthful information came from China.

Acknowledgements

I would like to express my sincere thanks to Gerhard Demelmair and Ihor Kudybyn for their help in collecting and processing data.

References

1. World Health Organization. “Coronavirus disease (COVID-2019) situation reports”. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>.
2. Kermack. W. O. & McKendrick. A. G. “A contribution to the mathematical theory of epidemics.” *Proceedings of the Royal Society. Ser. A.* vol. 115. pp. 700–721. 1927.
3. Murray. J. D. *Mathematical biology*. 3rd ed. 2 v. New York : Springer. 2002–2003.

4. Langemann. D., Nesteruk. I. & Prestin. J. “Comparison of mathematical models for the dynamics of the Chernivtsi children disease.” *Mathematics in computers and simulation*. vol. 123. pp. 68–79. 2016. doi:10.1016/j.matcom.2016.01.003.
5. Nesteruk. I. “Statistics based models for the dynamics of Chernivtsi children disease.” AMMODIT Conference. Kyiv. Ukraine. January 2017. *Naukovi visti NTUU KPI*. 2017. no. 5. pp. 26–34. doi:10.20535/1810-0546.2017.5.108577.
6. Nesteruk, I. “Statistics-based predictions of coronavirus epidemic spreading in mainland China.” *Innovative biosystems and bioengineering*. vol. 4, no. 1, pp. 13–18, 2020. doi:10.20535/ibb.2020.4.1.195074.
7. Nesteruk, I. “Characteristics of coronavirus epidemic in mainland China estimated with the use of official data available after February 12, 2020.” [Preprint.] *ResearchGate*. 2020 Mar. doi:10.13140/RG.2.2.19667.32804.
8. Nesteruk, I. “Estimations of the coronavirus epidemic dynamics in South Korea with the use of SIR model” [Preprint.] *ResearchGate*. 2020 Mar. doi: 10.13140/RG.2.2.15489.40807.
9. Nesteruk, I. “Comparison of the coronavirus epidemic dynamics in Italy and mainland China” [Preprint.] *ResearchGate*. 2020 March. doi:10.13140/RG.2.2.19152.87049.
10. Nesteruk, I. “Stabilization of the coronavirus pandemic in Italy and global prospects” [Preprint.] *ResearchGate*. 2020 March. doi: 10.13140/RG.2.2.13832.98561
11. Nesteruk, I. “Long-term predictions for COVID-19 pandemic dynamics in Ukraine, Austria and Italy” [Preprint.] *MEDRXIV*, 2020 Apr. doi: 10.13140/RG.2.2.31170.53448
<https://www.medrxiv.org/content/10.1101/2020.04.08.20058123v1>
12. Nesteruk, I. “Як довго українці сидітимуть на карантині? How long will the Ukrainians stay in quarantine?” (in Ukrainian) [Preprint.] *ResearchGate*. 2020 April. doi: 10.13140/RG.2.2.15732.71046
13. N.R. Draper and H. Smith. *Applied Regression Analysis (3rd ed.)*. John Wiley. 1998.
14. <https://onlinepubs.trb.org/onlinepubs/nchrp/cd-22/manual/v2appendixc.pdf>
15. I. Nesteruk. “Maximal speed of underwater locomotion”. *Innov Biosyst Bioeng*. 2019. vol. 3. no. 3. pp. 152–167. Doi: <https://doi.org/10.20535/ibb.2019.3.3.177976>
16. <https://www.scmp.com/news/china/society/article/3076334/coronavirus-strange-pneumonia-seen-lombardy-november-leading>
17. F.-X. Lescure et al. Clinical and virological data of the first cases of COVID-19 in Europe: a case series. www.thelancet.com/infection Published online March 27, 2020
[https://doi.org/10.1016/S1473-3099\(20\)30200-0](https://doi.org/10.1016/S1473-3099(20)30200-0)
18. 1. Qun Li, Xuhua Guan, Peng Wu et. al. Early Transmission Dynamics in Wuhan, China, of Novel Coronavirus–Infected Pneumonia. *The new england journal of medicine*. January 29, 2020 DOI: 10.1056/NEJMoa2001316