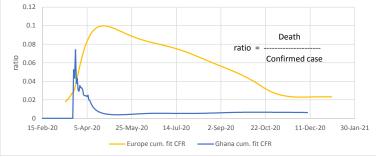
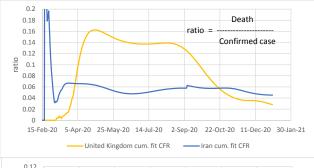
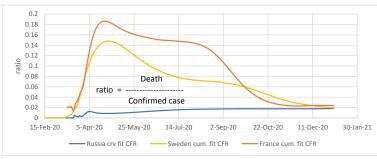
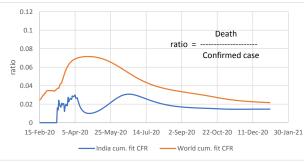
Experimental page: ratios of curve fit deaths to curve fit confirmed cases (CFR)

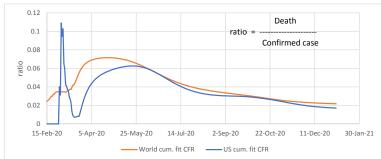


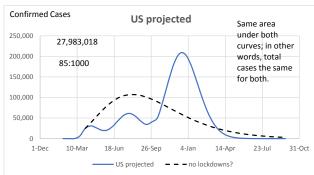


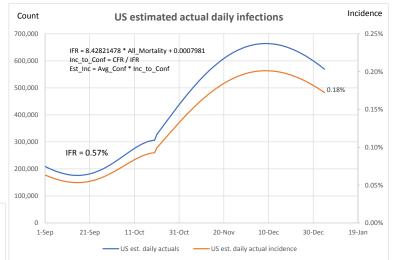












Demonstration of SIR model where $R_{\,e}$ is linearly reduced to 0.75 at the end of the sequence:

Re_1 beta_1 gamma **USA** final Re = 0.75 0.176892 5-Jan 5.7 days 300,000 67:1000 rsq = 0.880 250,000 200,000 reduced Re: 150,000 59:1000 100,000 50,000 13% reduction 26-Sep 4-Jan 23-Feb 14-Apr 11-Sep 15-Nov 3-Jun 23-Jul

False Positives Demonstration

Use 0.18% from US est. incidence above as estimated daily incidence *Prevalence* estimated as avg. infected period of 2 weeks X incidence

0.18% X 14 = 2.520%

 99% accuracy of test

 Positive
 Negative

 test pos
 2.495% 0.975% 3.47%

 test neg
 0.025% 96.505% 96.505% 96.53%

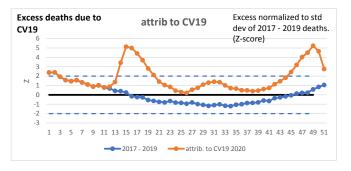
 2.520% 97.480% 100.00%

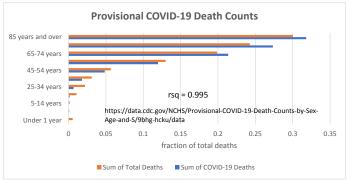
Reducing the R $_{\it e}$ while keeping gamma constant is the same as reduc	ing
contact rate. Contact rate is reduced through isolation, lockdowns, an	ıd
vaccinations.	

False pos. is a bit over 1/4 of total positives!

TRUE + 2.495%/3.47% 71.9% FALSE + 0.975%/3.47% 28.1% 100.00%

Counter-act this tendency by increasing test sensitivity. However this may increase false negatives, the recipients of which may be positive, think they're negative, and go spread it around some more.





USA Excess Deaths (from CDC data):

Annualized on 51 weeks

	All Cause	All Cause, excl. CV19	CV19
3 yr average before 2020	858:100,000	858:100,000	-
2020	988:100,000	892:100,000	-
Diff.	130:100,000	34:100,000	96:100,000

3 yr average 859:100,000

26% of All-Cause excess deaths are non-CV19

278,610,004

https://data.cdc.gov/NCHS/Excess-Deaths-Associated-with-COVID-19/xkkf-xrst/data

 $R > [1 - 1/R_0]/N$

gamma = 0.171 K = 0.318 gamma=0.286 $R_o = \exp(K/\text{gamma}) = 6.421$ = 6.421 = 6.421 = 6.421 = 6.421 = 6.421

