SIR Model with Testing and Isolation Mechanisms

November 10, 2020

1 Method

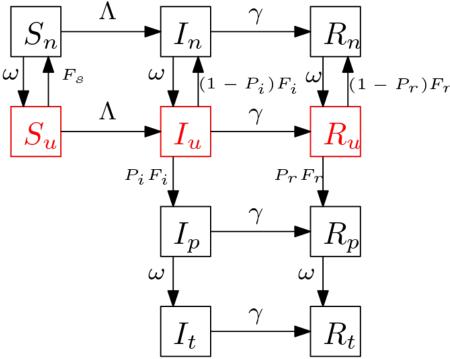
1.1 model and parameters

• Λ : force of infection defined as

$$\Lambda = \beta \frac{(I_u + \eta_w I_n + \eta_w I_p + \eta_t I_t)}{N_0},$$

where β is transmission rate, η_w and η_t are the isolation parameters for awaiting and reported individuals, respectively. We assume that $\eta_t < \eta_w$, i.e., the awaiting individuals for test results have a higher transmission probability than the reported individuals.

- ω : the rate of *onward flow* from the awaiting positive compartment, p, to reported/tested compartment, ρ , or from awaiting negative compartment, n, back to u. It has units of 1/time.
- γ : recovery rate (1/time).
- ρ : per capita testing intensity across the whole population (1/time).
- W: weighted number of people available for tests, defined as $W = W_S S_u + W_I I_u + W_R R_u$.
- σ : scaling parameter for testing defined as $\sigma = \frac{\rho N_0}{W}$.
- F_Z : Weighted testing rate defined as $F_Z = \sigma W_Z$. That is, $F_S = \sigma W_S$, $F_I = \sigma W_I$ and $F_R = \sigma W_R$.



The model is

$$dS_{u}/dt = -\Lambda S_{u} - F_{S}S_{u} + \omega S_{n}$$

$$dS_{n}/dt = -\Lambda S_{n} + F_{S}S_{u} - \omega S_{n}$$

$$dI_{u}/dt = \Lambda S_{u} - F_{I}I_{u} + \omega I_{n} - \gamma I_{u}$$

$$dI_{n}/dt = \Lambda S_{n} + (1 - p_{I})F_{I}I_{u} - \omega I_{n} - \gamma I_{n}$$

$$dI_{p}/dt = p_{I}F_{I}I_{u} - \omega I_{p} - \gamma I_{p}$$

$$dI_{t}/dt = \omega I_{p} - \gamma I_{t}$$

$$dR_{u}/dt = \gamma I_{u} - F_{R}R_{u} + \omega R_{n}$$

$$dR_{n}/dt = \gamma I_{n} + (1 - p_{R})F_{R}R_{u} - \omega R_{n}$$

$$dR_{p}/dt = \gamma I_{p} + p_{R}F_{R}R_{u} - \omega R_{p}$$

$$dR_{t}/dt = \gamma I_{t} + \omega R_{p}$$

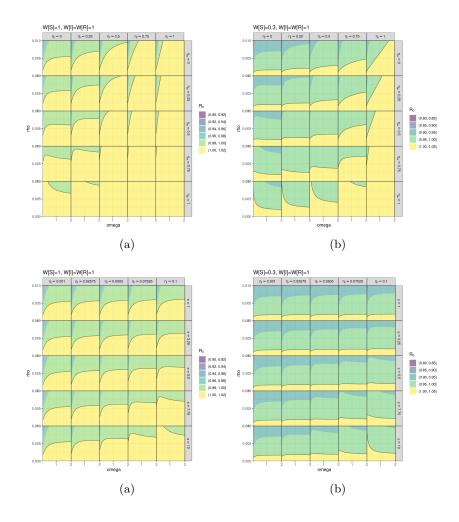
$$dN/dt = \omega (S_{n} + I_{n} + R_{n})$$

$$(1)$$

(12)

2 Results

 $dP/dt = \omega(I_p + R_p).$



3 Thoughts/Objectives

- 1. analysis of the basic SIR model with testing: analytical results as far as possible, supplemented by numerical results as necessary/for illustration. Heuristic explanations/insights of what we learn from this.
 - Maybe?? order-of-magnitude/back-of-the-envelope calculations of the magnitudes of testing and isolation necessary. (However, the model may be too simplified for even back-of-the-envelope calculations to be meaningful.)
 - \bullet Maybe?? comparison with strength-and-speed framework (since T/T/I is essentially a speed-based intervention)
- 2. extension to a SEPAIR model (i.e. including latent/exposed, presymp-

tomatic, asymptomatic) (i) analytical results will probably be out of reach (ii) but it may be possible to extend some of the insights gained in part 1 (iii) in any case, some numerical results (the space of relevant/interesting parameters will be larger: figure out a sensible way to show results from this parameter space. Are there useful dimensionless parameters that could help frame this?)

• more detailed quantitative exploration: in particular, *either* Latin hypercube *or* (nearly the same!) a sample over estimated ('prior') distributions of the parameters. Goal: answer the general question "how likely is TTI to be able to control COVID?"

4 Literature Review

4.1 Explicit models of TTI (trace/test/isolate) based on network or agent-based models

(Endo et al., 2020) [Ali: It seems to me that this is just a statistical model to estimate the parent-offspring of an infected index, not sure if it fits into agent-based group!] Used simulation on a branching process model to assess the forward and backward contact tracing efficiency. Assuming a negative-binomial branching process with a mean R, reproduction number, and overdispersion parameter k, the mean total number of generation G3 and averted G3 are estimated. The effectiveness of TTI is defined as the ratio of averted to the mean.

(Jenness et al., 2020) developed a network-based transmission model for SARS-CoV-2 on the Diamond Princess outbreak to characterize transmission dynamics and to estimate the epidemiological impact of outbreak control and prevention measures.

(Elbanna et al., 2020) [seems similar to MacPan model!]

(de Celles et al., 2020) Was discussed in the Math 747 SEIR Asymptomatic and symptomatic I_1, I_2 . Used linear chain trick Stringency index as a control force lowering β .

(Rice et al., 2020) Effect of school closures on mortality. Reproduce Report 9 results by spatial agent based CovidSim.

4.2 Models of repeated random testing of isolated populations

Bergstrom et al. (2020) (1) Model, assumptions: They developed a function, namely expected expoisour $E(C,\tau)$, to approximate trade-offs between the frequency of testing, n, the sensitivity of testing, q, and the delay between testing and results, d. This function is explicitly derived and was connected the effective reproduction number $R=R_0S$, where S is the proportion of population susciptable. assumption that transmission rates are a step function: individuals who have COVID go from non-infectious to fully infectious instantaneously, and remain fully infectious until they are no longer able to transmit disease. Test

sensitivity takes the same form over the course of infection. More sophisticated models could allow varying infectiousness and varying sensitivity over time, as in (Larremore et al., 2020).

(Lopman et al., 2020) Used a Deterministic SEIR model, incorporated TTI, applicable to a university setting. They assumed a fairly high reproductive number that is not reduced through social distancing measures. They found that community-introduction of SARS-CoV-2 infection onto campus can be relatively controlled with effective testing, isolation, contract tracing and quarantine.

(Tuite et al., 2020) used an age-structured compartmental model of COVID-19 transmission in the population of Ontario, Canada. We compared a base case with limited testing, isolation and quarantine to different scenarios.

4.3 Other maybe-related works

(Arino and Portet, 2020) developed a SLIAR compartmental model to study the spread of an epidemic, specifically COVID-19, in a population. The model incorporates an Erlang distribution of times of sojourn inincubating, symptomatically and asymptomatically infectious compartments. Basic reproduction number is derived. Also, sensitivity analysis with respect to the underlying parameters for the following two outputs was carried out; (i) the number of observable cases during the course of the epidemic and at the peak, and (ii) the timing of the peak of the outbreak. Sensitivity analysis is performed using the R package multisensi.

(Ruszkiewicz et al., 2020) novel with-in-a-minute breath testing with 80% accuracy.

References

- Arino, J. and Portet, S. (2020). A simple model for covid-19. *Infectious Disease Modelling*.
- Bergstrom, T., Bergstrom, C. T., and Li, H. (2020). Frequency and accuracy of proactive testing for covid-19. *medRxiv*.
- de Celles, M. D., Casalegno, J.-S., Lina, B., and Opatowski, L. (2020). Influenza may facilitate the spread of sars-cov-2. *medRxiv*.
- Elbanna, A., Wong, G. N., Weiner, Z. J., Wang, T., Zhang, H., Liu, Z., Tkachenko, A. V., Maslov, S., and Goldenfeld, N. (2020). Entry screening and multi-layer mitigation of covid-19 cases for a safe university reopening. *medRxiv*.
- Endo, A., Leclerc, Q. J., Knight, G. M., Medley, G. F., Atkins, K. E., Funk, S., Kucharski, A. J., et al. (2020). Implication of backward contact tracing in the presence of overdispersed transmission in covid-19 outbreaks. *Wellcome Open Research*, 5(239):239.

- Jenness, S. M., Willebrand, K. S., Malik, A. A., Lopman, B. A., and Omer, S. B. (2020). Modeling dynamic network strategies for sars-cov-2 control on a cruise ship. *medRxiv*.
- Larremore, D. B., Wilder, B., Lester, E., Shehata, S., Burke, J. M., Hay, J. A., Tambe, M., Mina, M. J., and Parker, R. (2020). Test sensitivity is secondary to frequency and turnaround time for covid-19 surveillance. *MedRxiv*.
- Lopman, B., Liu, C., Le Guillou, A., Handel, A., Lash, T. L., Isakov, A., and Jenness, S. (2020). A model of covid-19 transmission and control on university campuses. *medRxiv*.
- Rice, K., Wynne, B., Martin, V., and Ackland, G. J. (2020). Effect of school closures on mortality from coronavirus disease 2019: old and new predictions. *bmj*, 371.
- Ruszkiewicz, D. M., Sanders, D., O'Brien, R., Hempel, F., Reed, M. J., Riepe,
 A. C., Bailie, K., Brodrick, E., Darnley, K., Ellerkmann, R., et al. (2020).
 Diagnosis of covid-19 by analysis of breath with gas chromatography-ion mobility spectrometry-a feasibility study. *EClinicalMedicine*, page 100609.
- Tuite, A. R., Fisman, D. N., and Greer, A. L. (2020). Mathematical modelling of covid-19 transmission and mitigation strategies in the population of ontario, canada. *CMAJ*, 192(19):E497–E505.