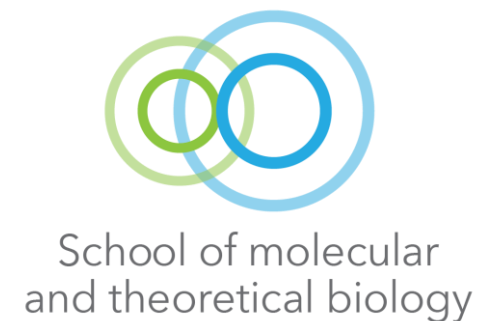
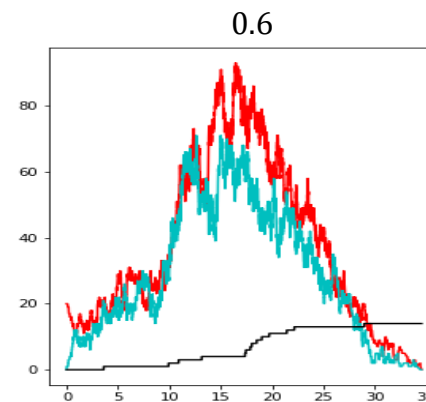
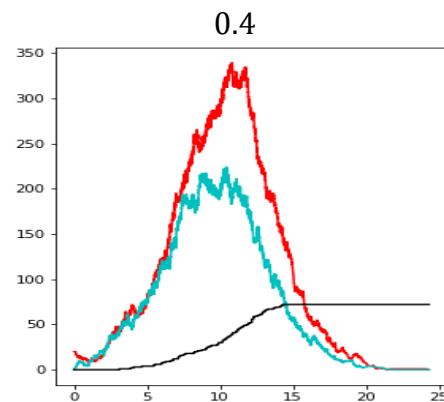
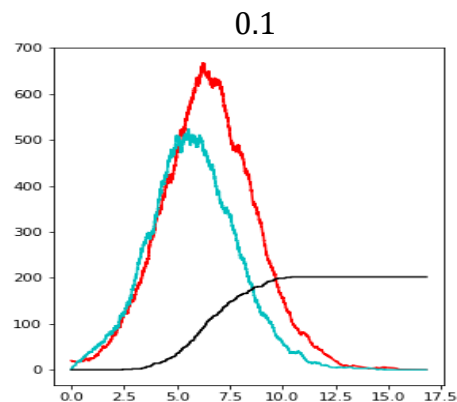


Epidemic Modelling

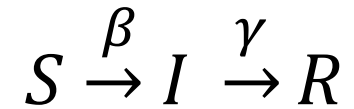
Henry Nguyen

Mentors: Max Wolf + Yuri Wolf

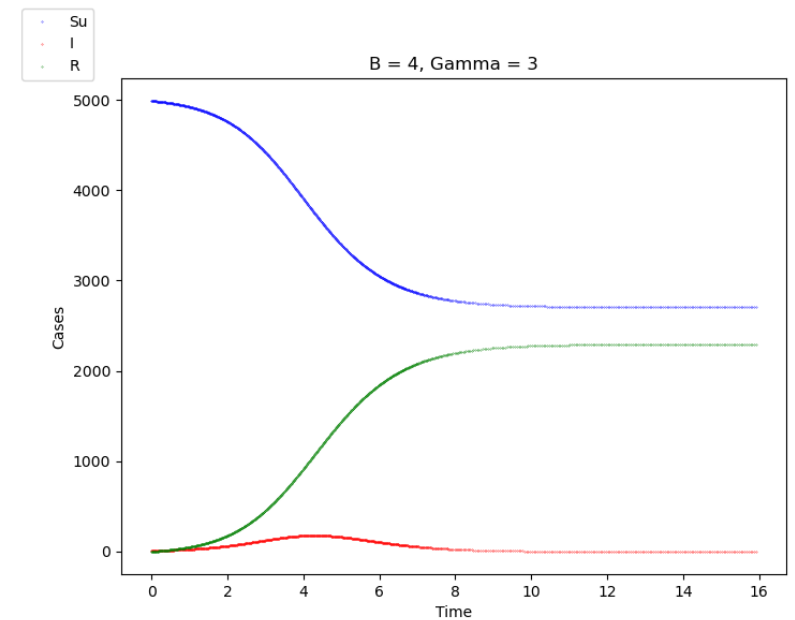
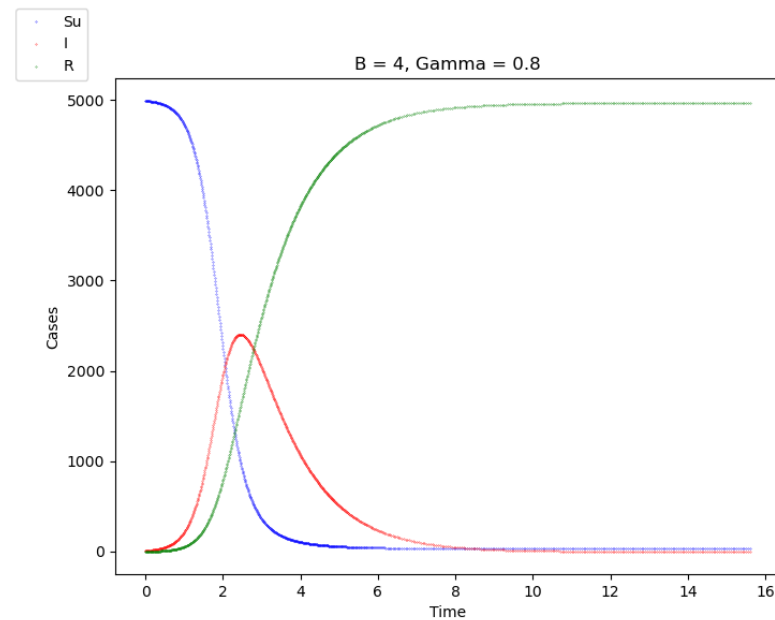
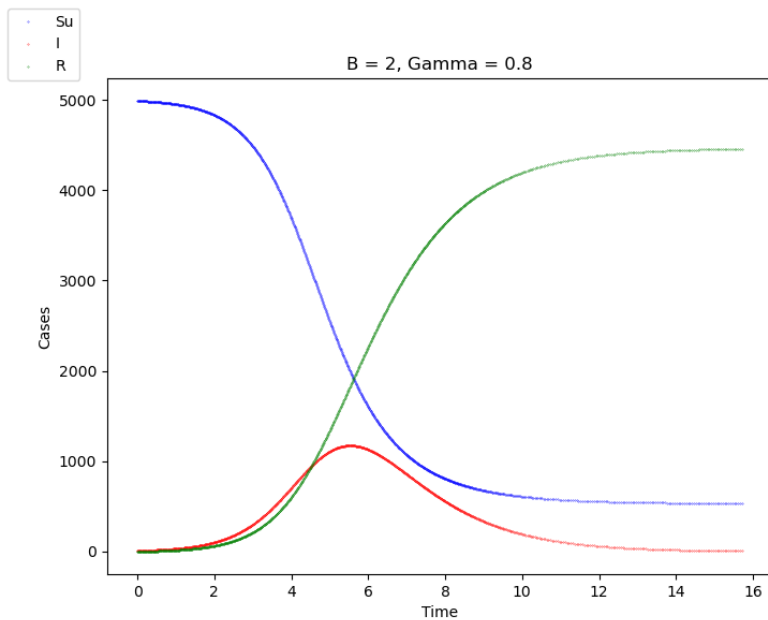


Differential Equations to Model Epidemics

S – Susceptible
I – Infectious
R – Recovered



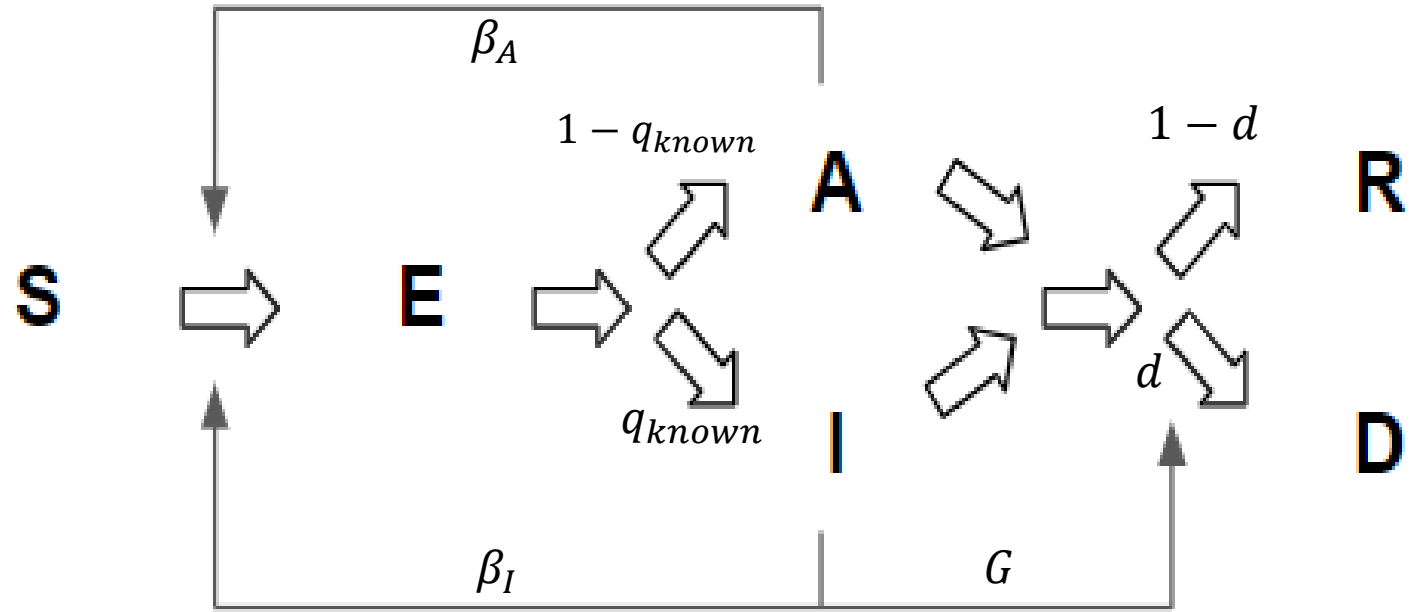
$$\frac{dS}{dt} = -\beta I \left(\frac{S}{N} \right) \quad \frac{dI}{dt} = \beta I \left(\frac{S}{N} \right) - \gamma I \quad \frac{dR}{dt} = \gamma I$$



Assumptions of DE model

- Continuously, uniformly mixed
- Natural birth and death rates are negligible (small epidemic timeframe)
- Sufficiently large population (imagine chemical systems)
- All individuals have the same infectivity
- Incubation/infectious period is small

- S = Susceptible
- E = Exposed (Incubation period, does not spread)
- A = Asymptomatic (or Unknown)
- I = Infected
- R = Recovered
- D = Dead



d is calculated by $d = \min\left(d_0 + m\left(\frac{I}{total}\right), d_1\right)$

d_0 is death rate with best possible medical care

d_1 is death rate without any medical care

m shows dependence of medical care quality on proportion of infected

q_{known} is the proportion of infected individuals that go to I

$$d_0 = 0.001; d_1 = 0.1; m = 0.5$$

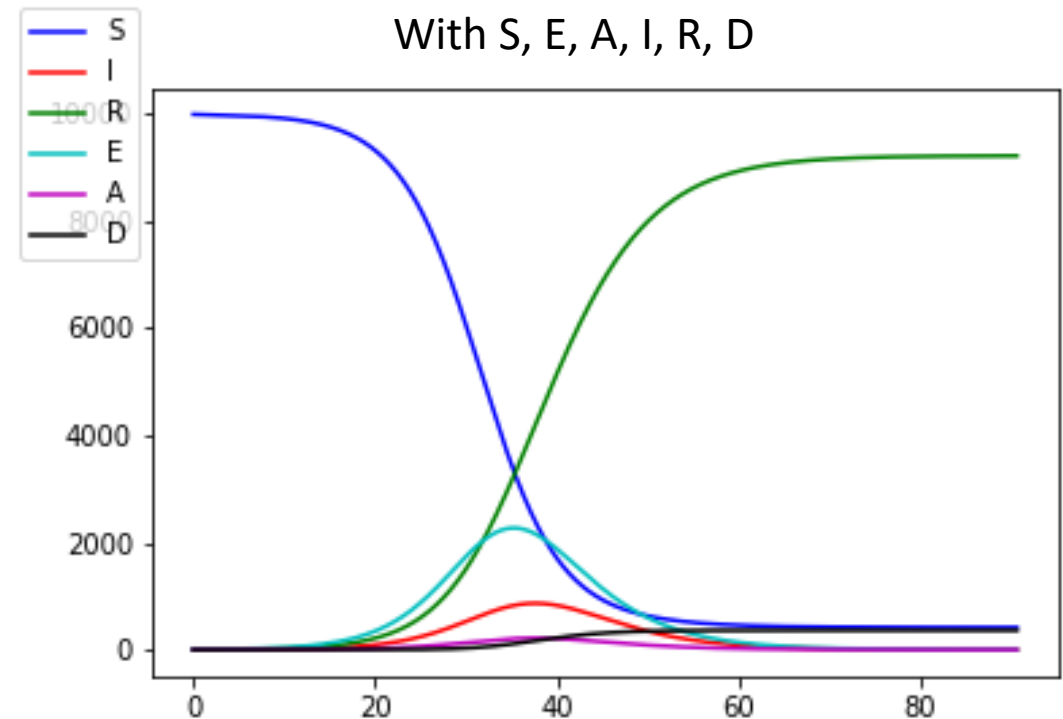
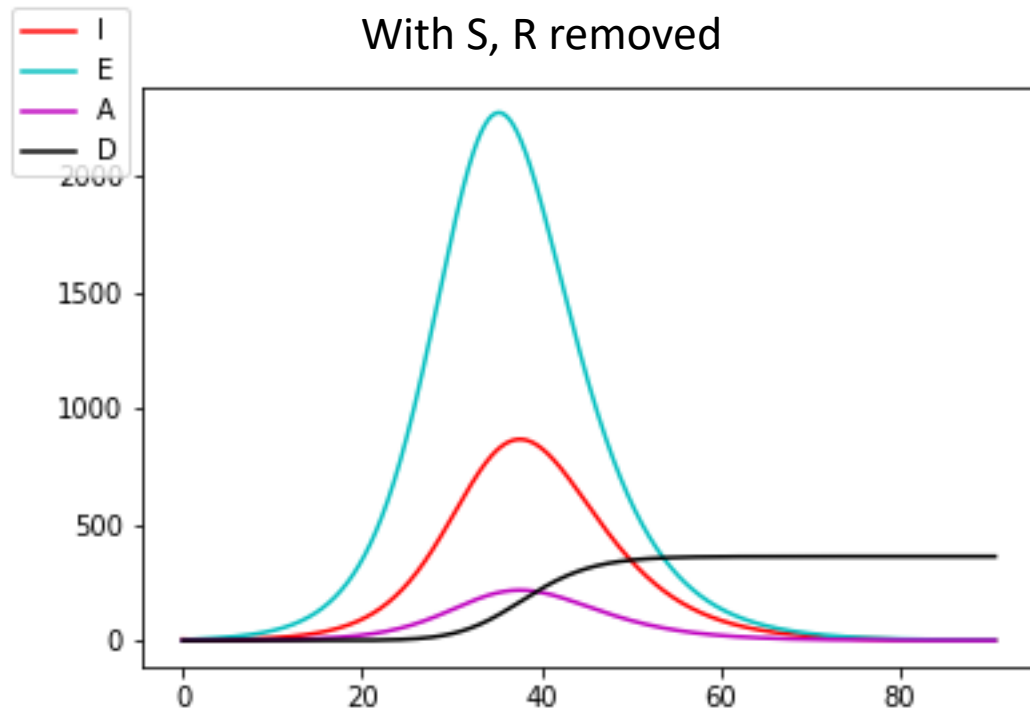
Example Curve

$$\begin{aligned}G &= 0.4 \\ q_{known} &= 0.4 \\ B_A &= 2.5 \\ B_I &= 1\end{aligned}$$

With no birth/death, E, I, A have a single peak.

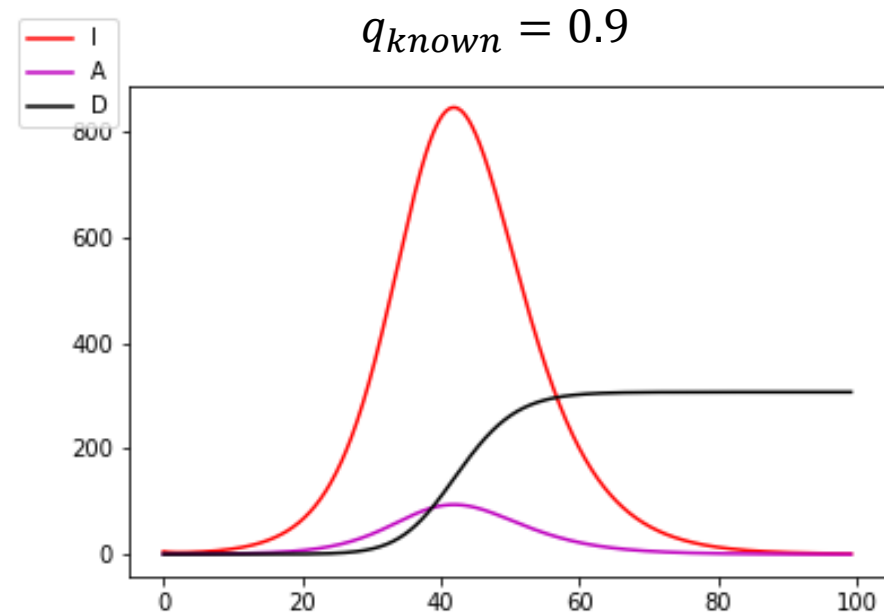
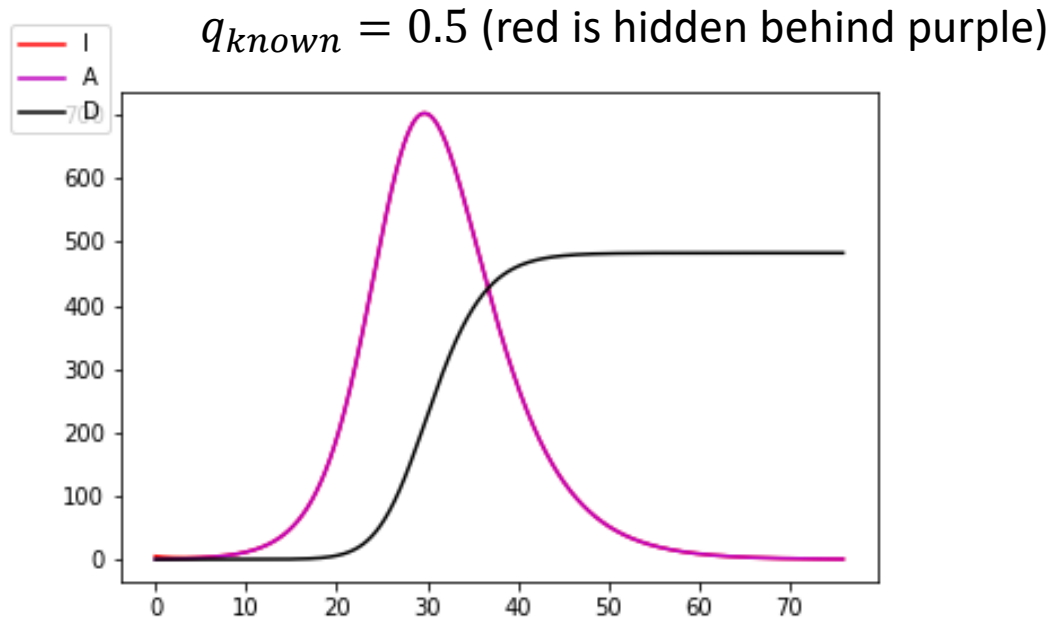
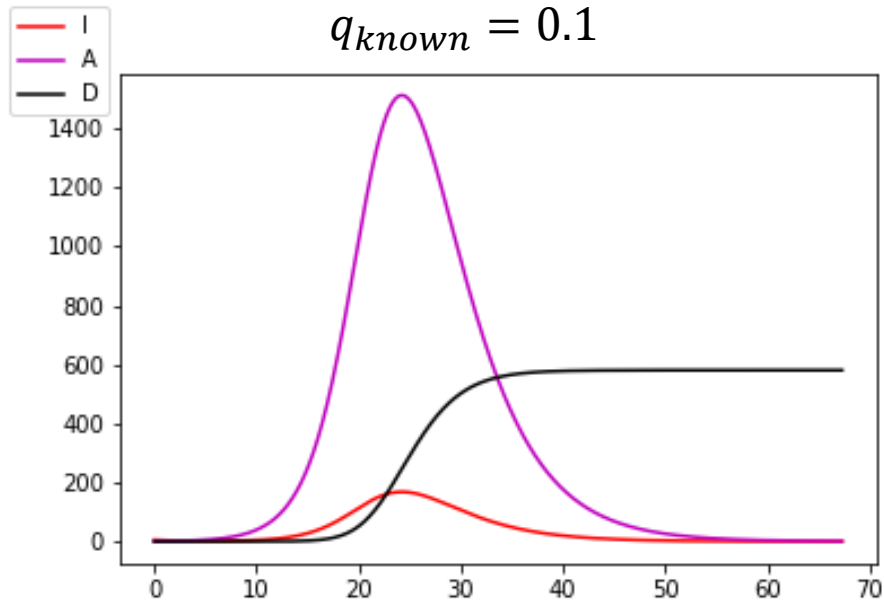
A and I have the same shape

D and R have the same shape



The effect of q_{known}

Example I and A graphs for $\frac{B_A}{B_I} = 2.5$



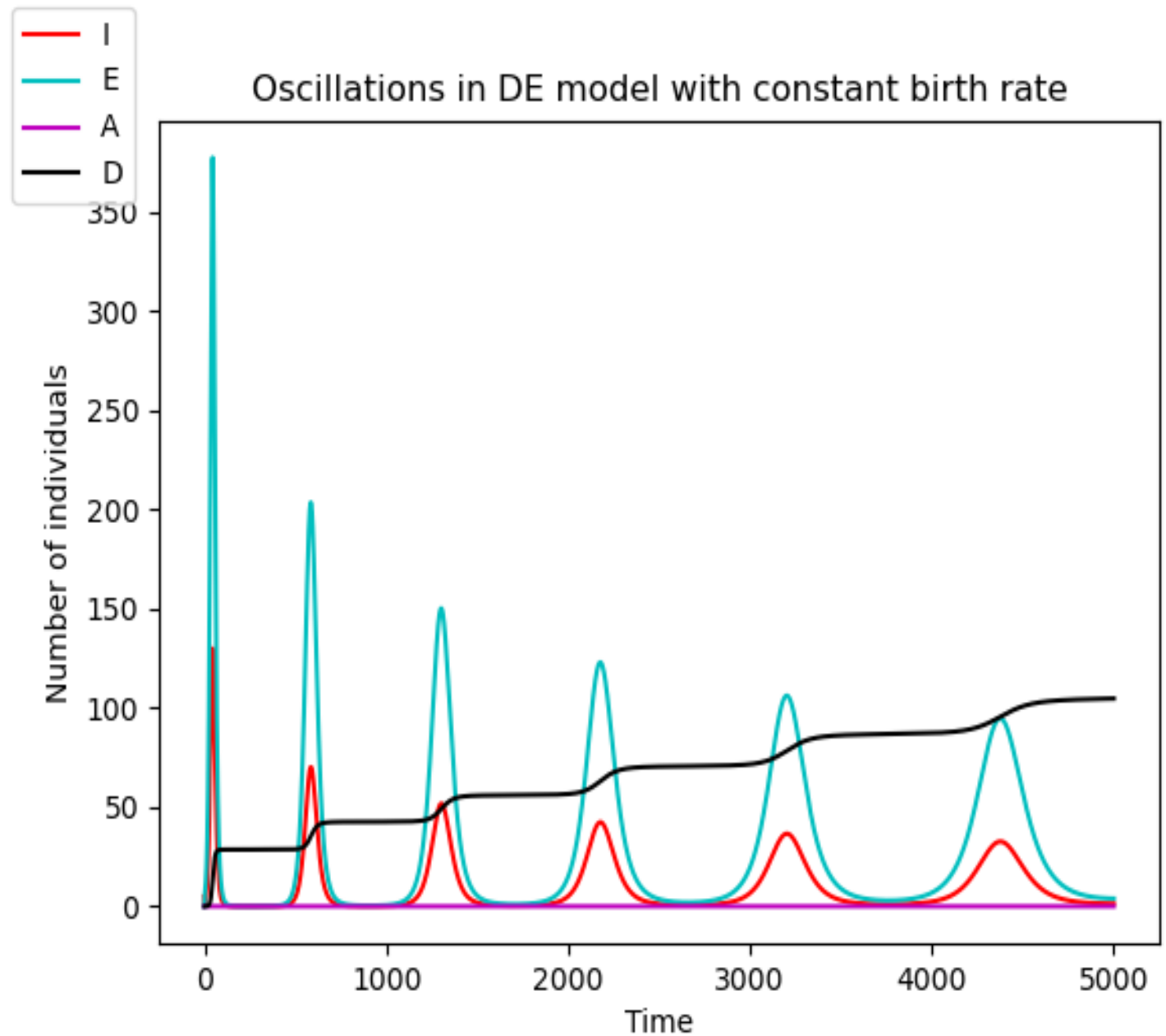
Population Flux, Oscillations

All populations die at a constant rate

$$\frac{dx}{dt} = -\mu x$$

New births into S population balanced to match natural deaths

$$\frac{dS}{dt} = \mu N$$



Deaths and Time to Completion based on q_{known} and m

B_A is infectivity of asymptomatic (unknown)

B_I is infectivity of symptomatic (known)

q_{known} is proportion of unknown cases

m is the linear burdening of the healthcare system

Heatmaps from different rows are not directly comparable due to different B_{avg} .

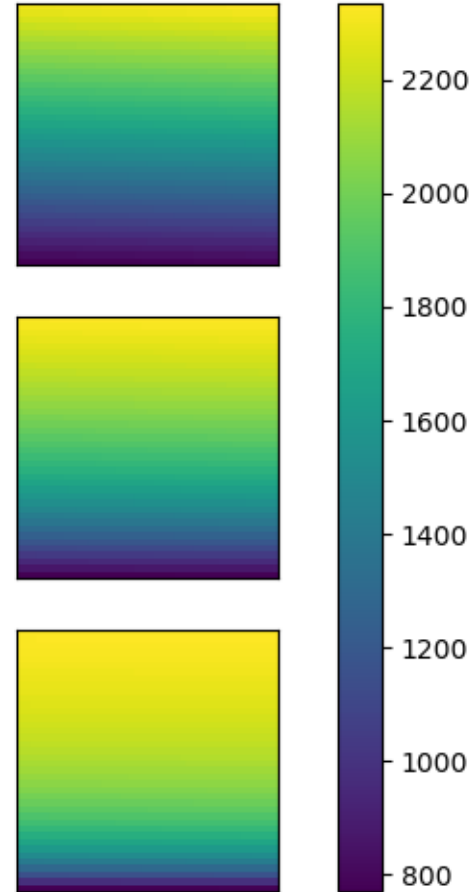
$$\frac{B_A}{B_I} = 1.5$$

$$\frac{B_A}{B_I} = 3.5$$

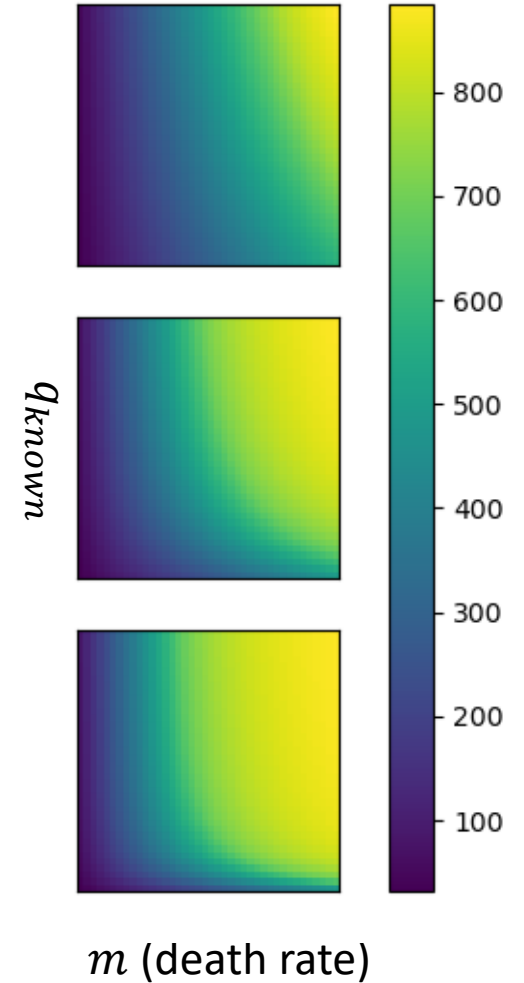
$$\frac{B_A}{B_I} = 9.0$$

q_{known}

Maximum Infected (A + I)



Total Deaths

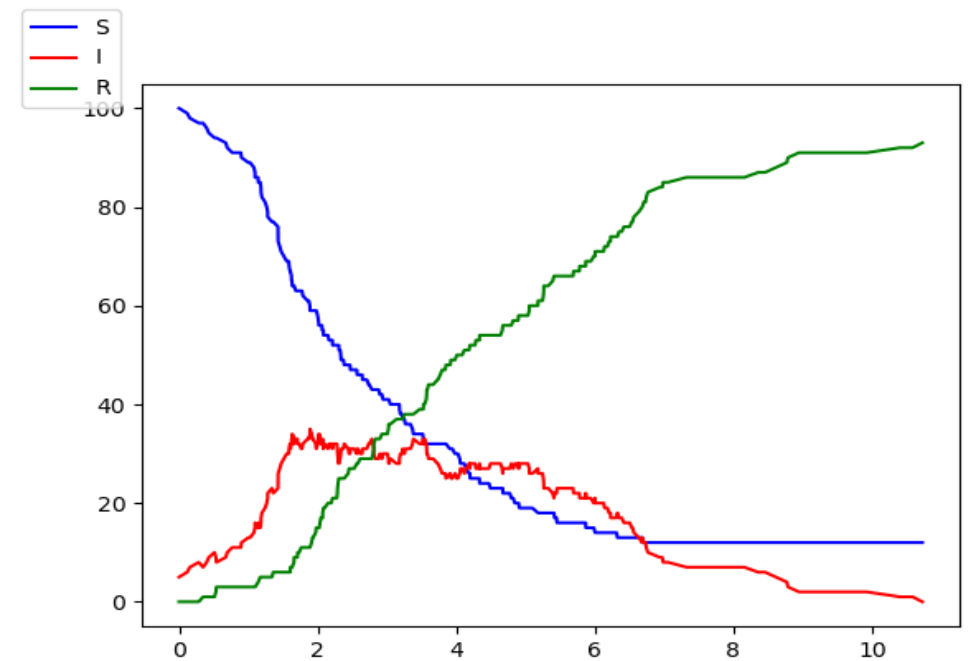


Stochastic Models

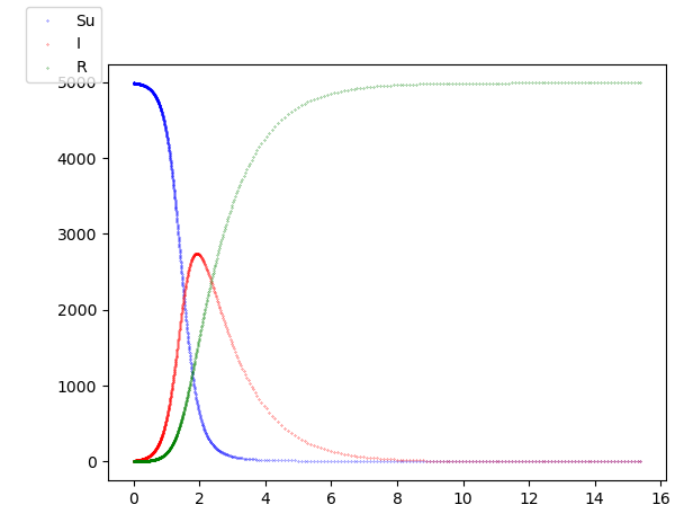
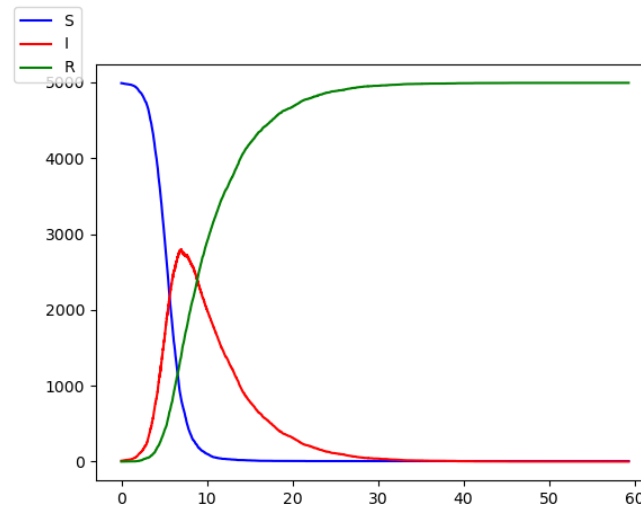
- Instead of continuous changes (e.g. it is possible for $I = 0.5$ to start an epidemic), stochastic predicts based on discrete changes.
 - More realistic for smaller populations
- Uses random number generator, so simulations with same parameters might produce different results (false for large populations)

Advantages:

- Can model individuals with different characteristics
 - **Mask-wearing**
 - **Geographic location**
 - Closely connected hubs, small communities, ...
 - Different individual Betas (infectivity)
 - Communities with occasional contact
 - Age, socioeconomic status, infectivity, death rate, travel, ...



SIR model with discrete changes, simulated using Gillespie algorithm



Left: Stochastic, Right: DE; same rate constants, SIR model

At sufficiently large populations, stochastic models have the same result as DE

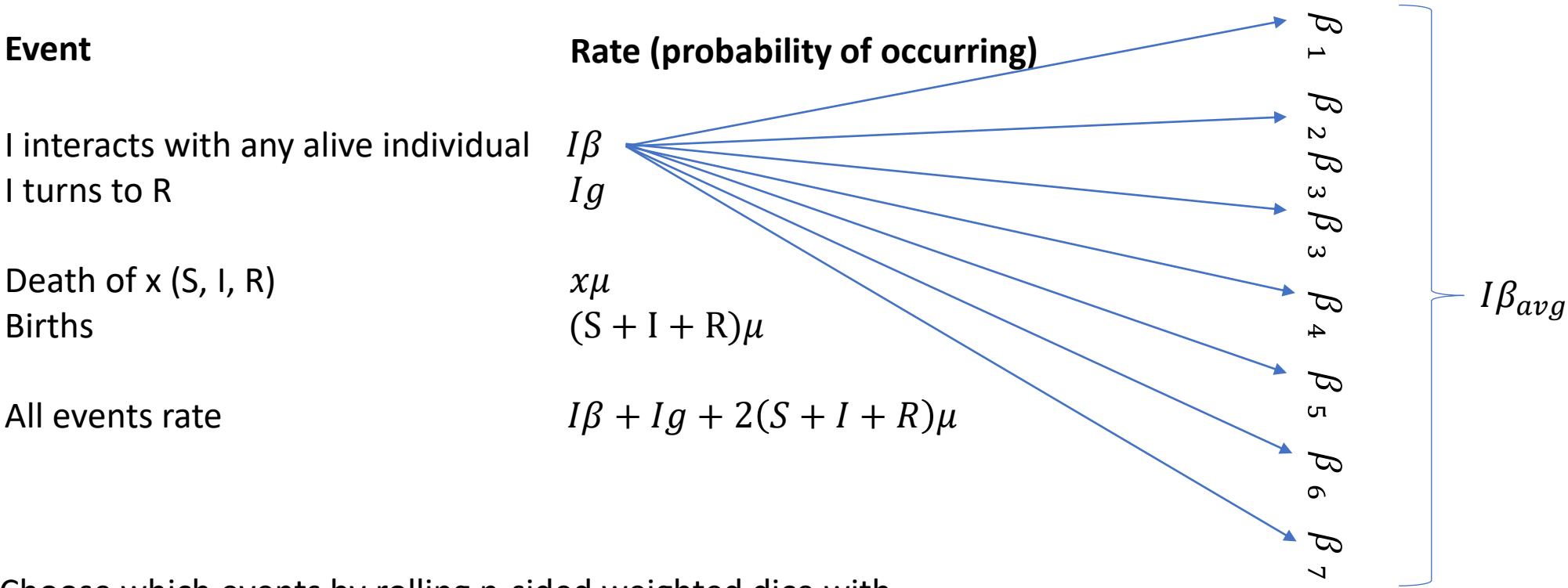
Implementation based on discrete events

SIR

| Event | Rate (probability of occurring) | Action |
|---------------------------------------|---|---|
| I interacts with any alive individual | $I\beta$ | <ul style="list-style-type: none">• If I interacts with S, then that S turns to I, else nothing |
| I turns to R | Ig | <ul style="list-style-type: none">• I turns to R |
| Death of x (S, I, R) | $x\mu$ | <ul style="list-style-type: none">• Individual turns to D |
| Births | $(S + I + R)\mu$ | <ul style="list-style-type: none">• One individual is added to S collection |
| All events rate | $I\beta + Ig + 2(S + I + R)\mu = r$ | |

For total event rate r , the times between events is given by distribution $t = -\frac{\ln(1-x)}{r}$, x is random in $[0 \dots 1)$

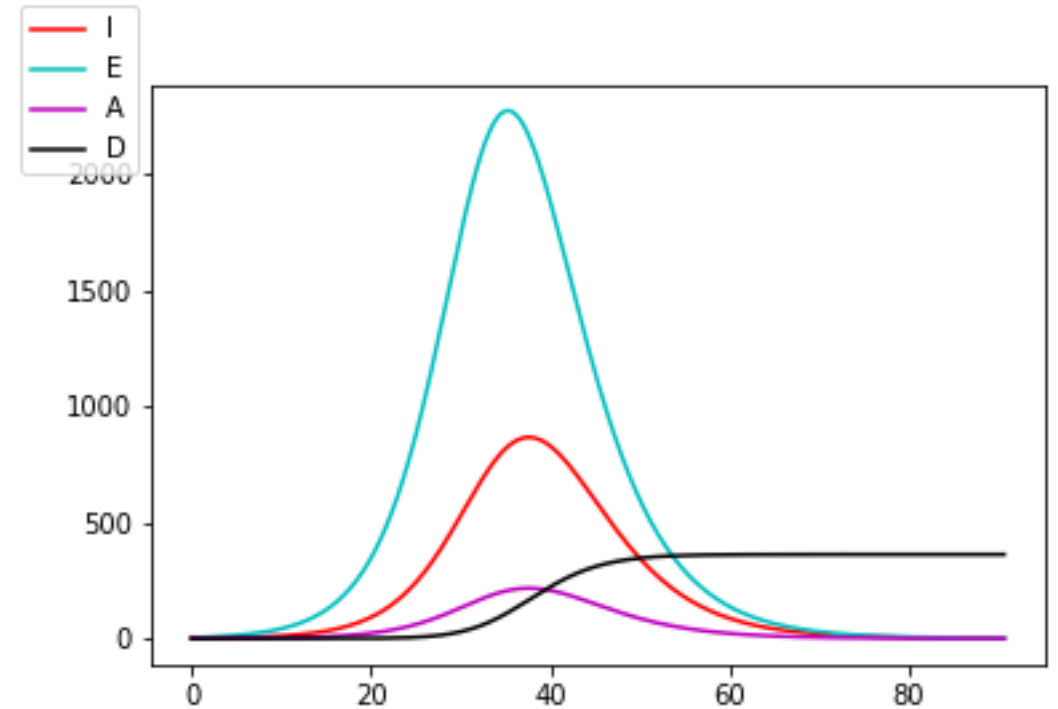
Implementation based on discrete events, with individual beta
SIR



Why?
Allows us to model every individual

Measurements

- Total deaths
- Length of epidemic (when the population of Infected is 0)
- Peak of infected population
- Time to peak of infected population



Simulating mask wearing (5000 individuals)

Infectious
Mask status

0

1

0

1

Susceptible
Mask status

0

0

1

1

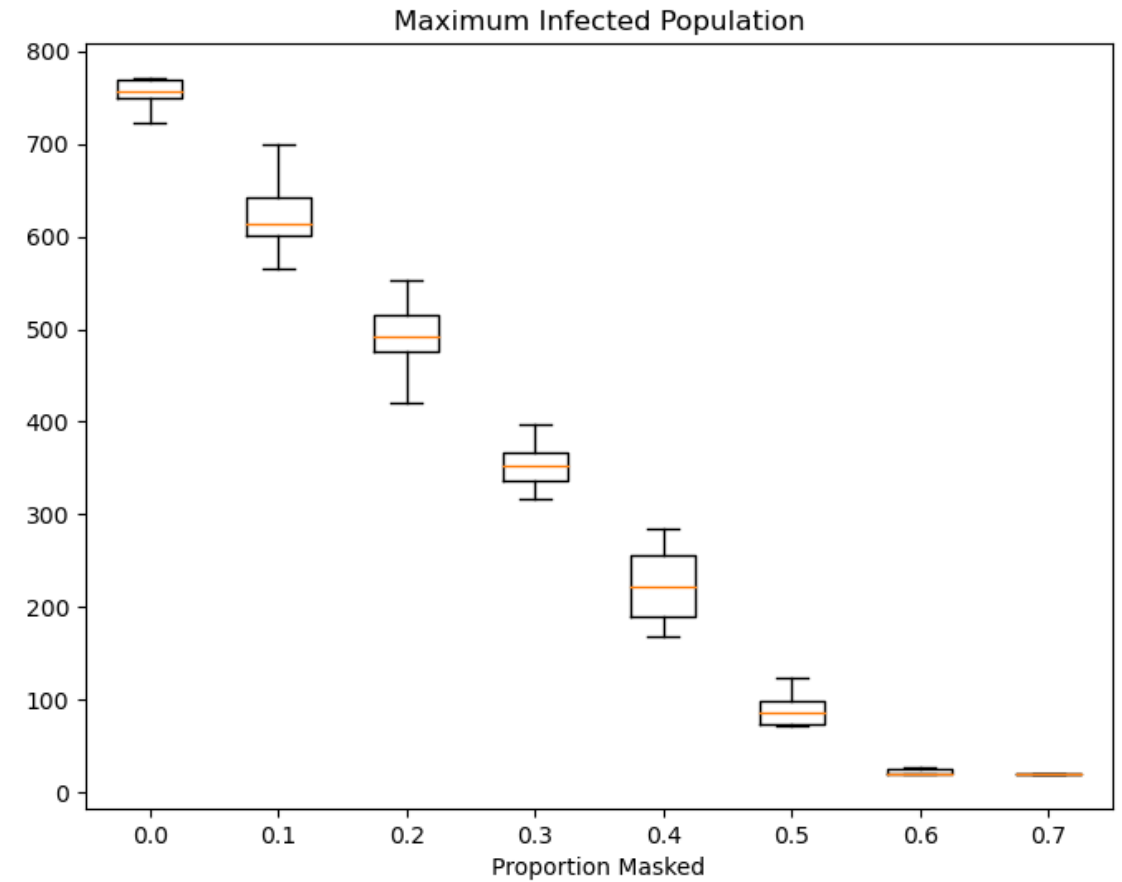
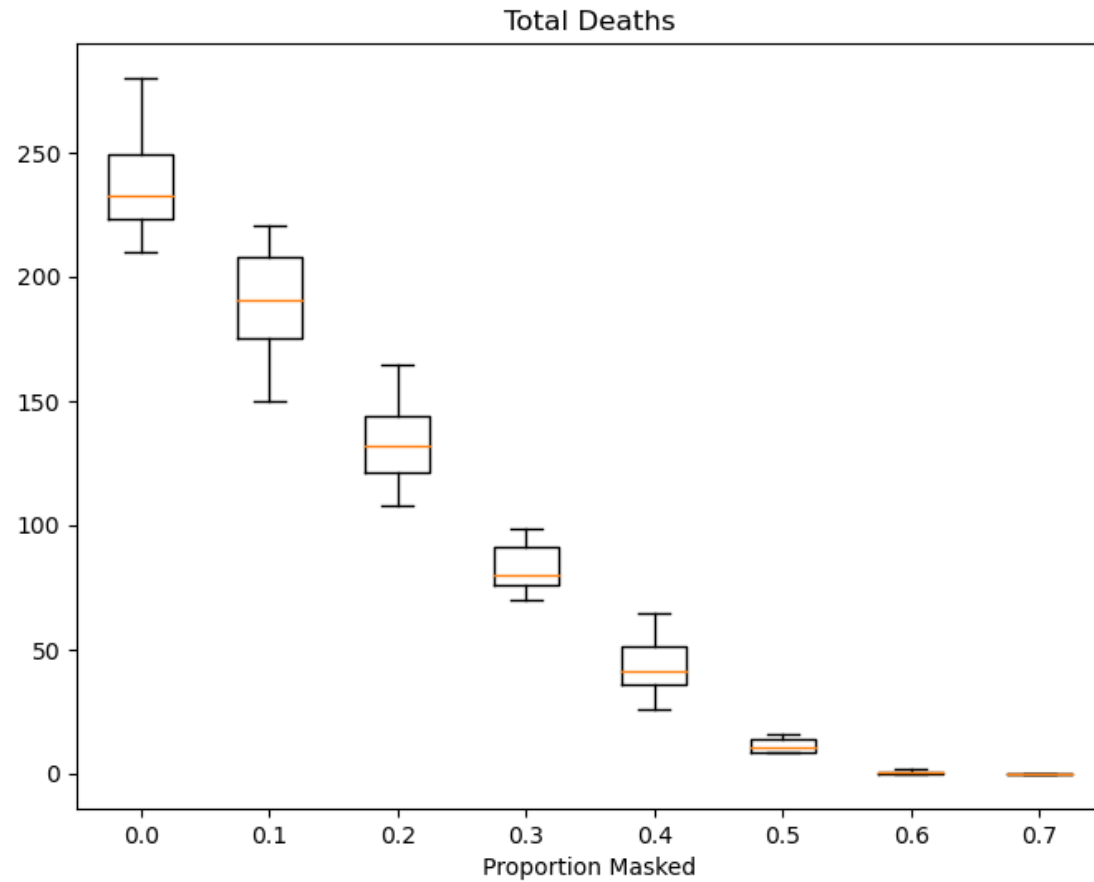
Chance of infection in
interaction

1

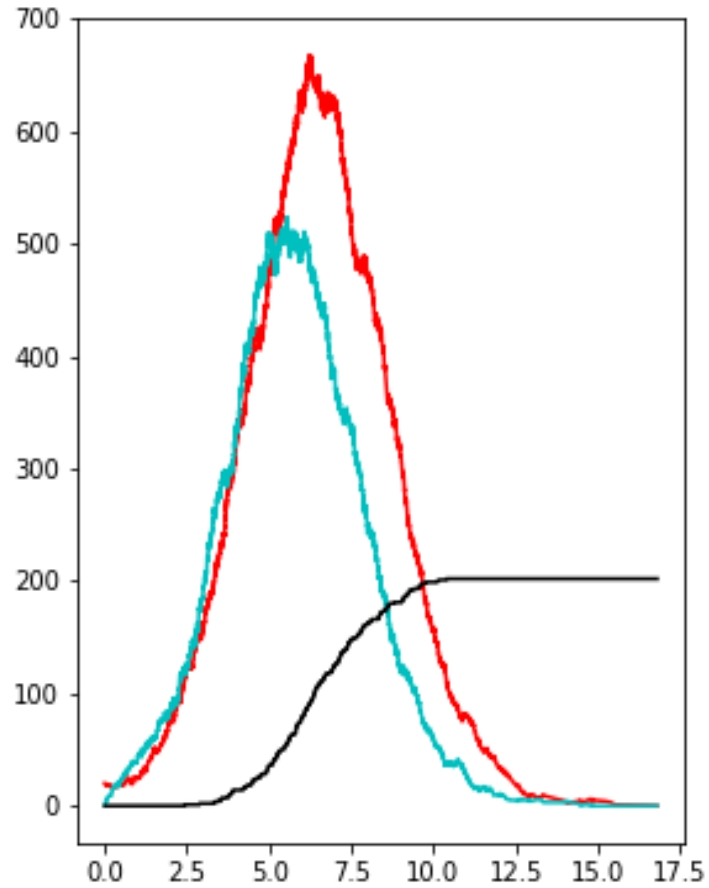
0.1

0.6

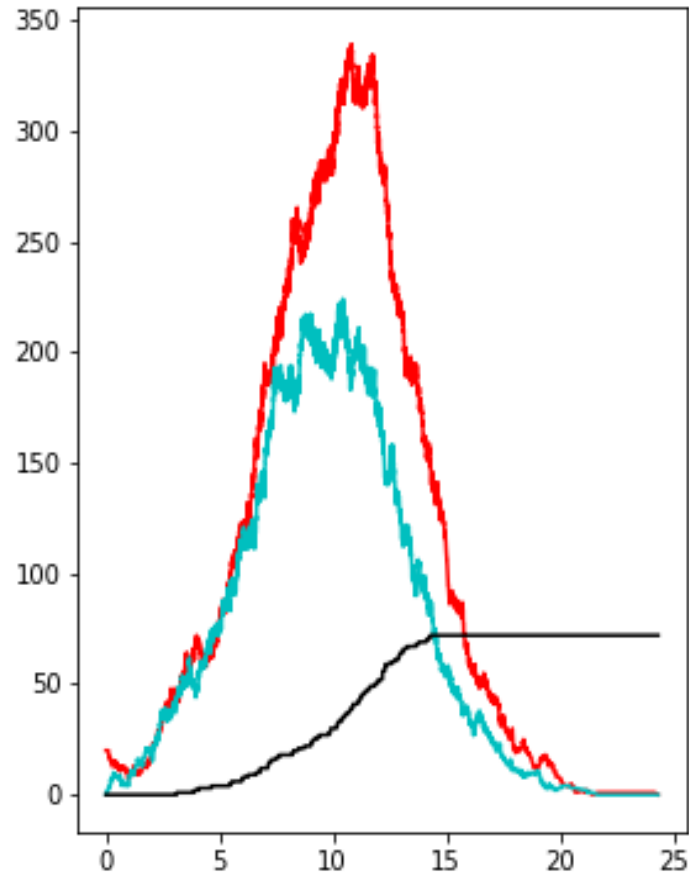
0.05



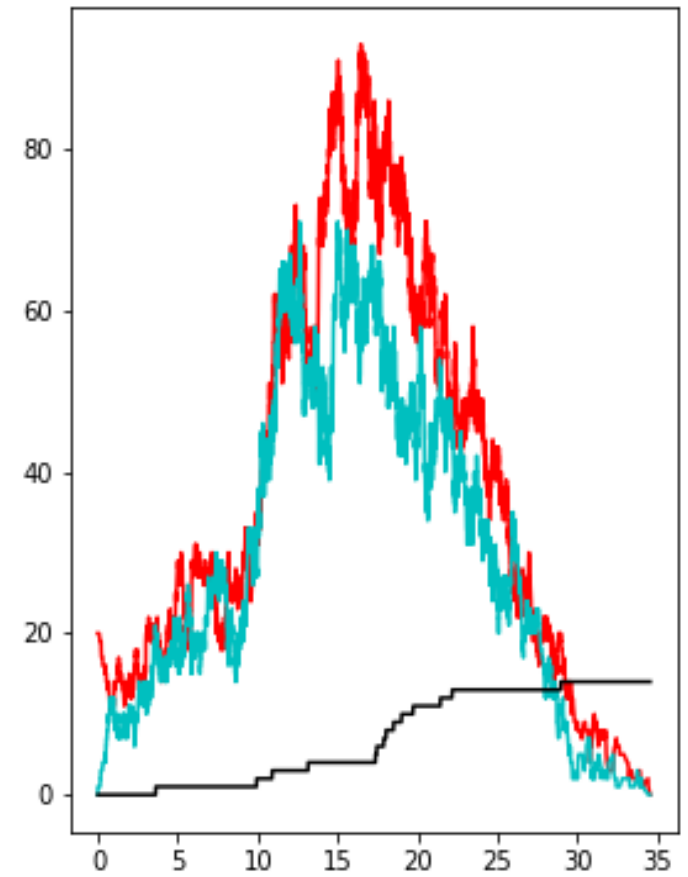
Proportion masked: 0.1



0.4



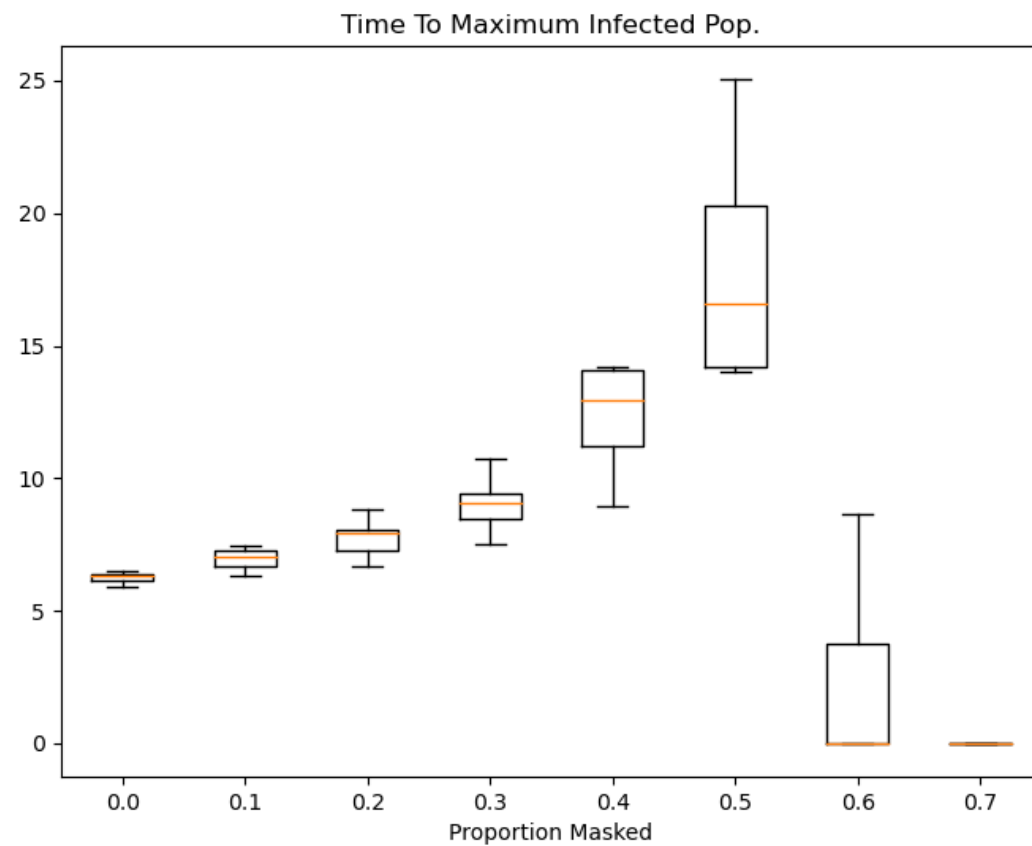
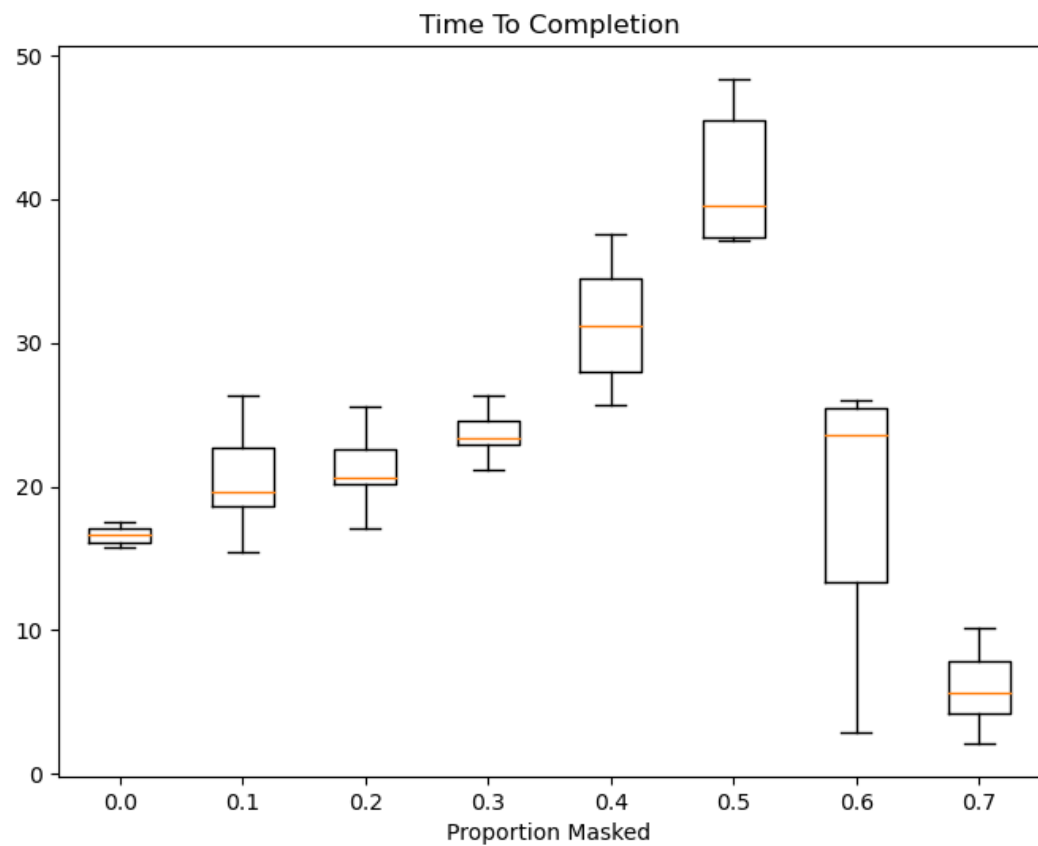
0.6



Masks:

- Increase length of epidemic (17 to 25 to 35)
- Increase time to peak of infection
- Decrease peak of infection

Red: Infected
Cyan: Exposed
Black: Dead



Aside: implementing masks with DE?

| Infectious Mask status | Susceptible Mask status | Chance of infection in interaction | |
|---------------------------|----------------------------|--|-------|
| 0 | 0 | 1 | k_1 |
| 1 | 0 | 0.1 | k_2 |
| 0 | 1 | 0.6 | k_3 |
| 1 | 1 | 0.05 | k_4 |

Reason:

Masked and unmasked populations don't interchange

$$\begin{aligned} S_m &\rightarrow I_m \rightarrow R \\ S_{um} &\rightarrow I_{um} \rightarrow R \end{aligned}$$

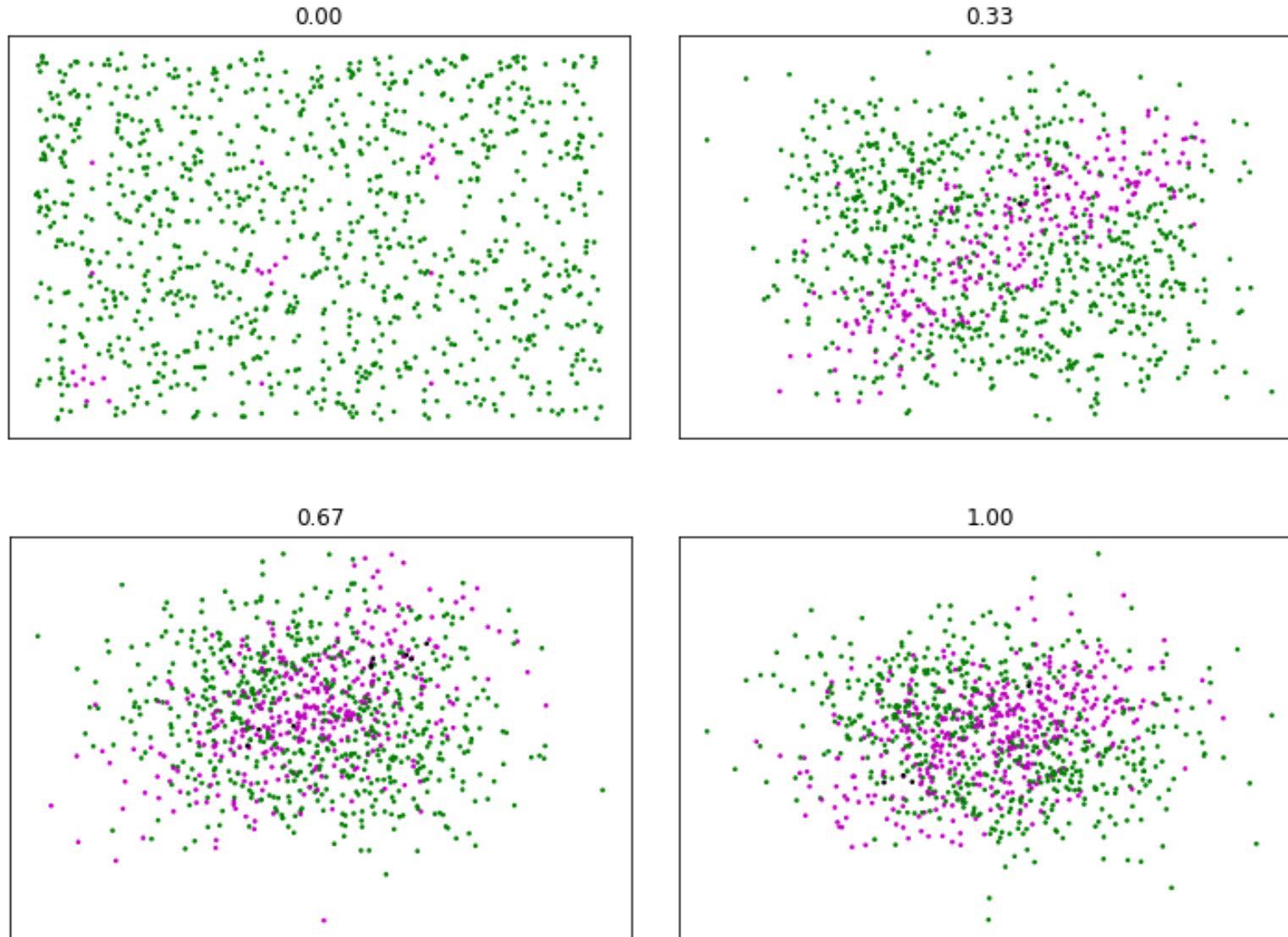
Sample equations for I_m and S_m

$$\frac{dS_m}{dt} = -\frac{\beta S_m}{N} (k_3 I_{um} + k_4 I_m)$$

$$\frac{dI_m}{dt} = \frac{\beta I_m}{N} (k_2 S_{um} + k_4 S_m) - \gamma I_m$$

$$\frac{dR}{dt} = \gamma (I_m + I_{um})$$

Non-uniform mixing

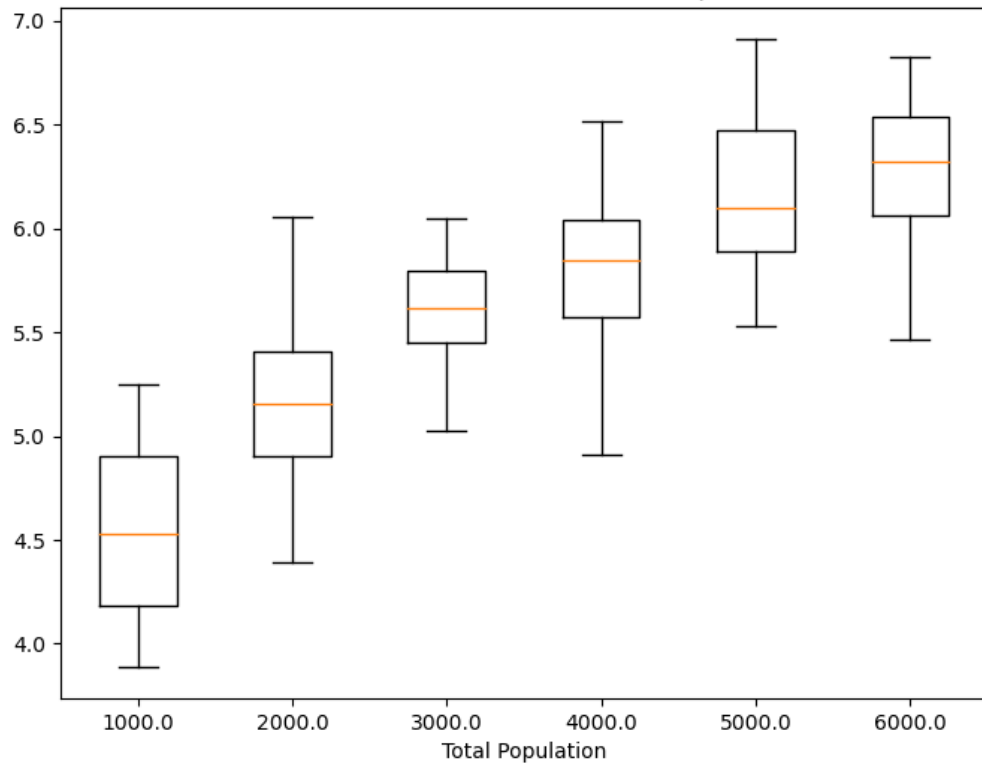


Green – Susceptible
Purple – Recovered
Black – Dead

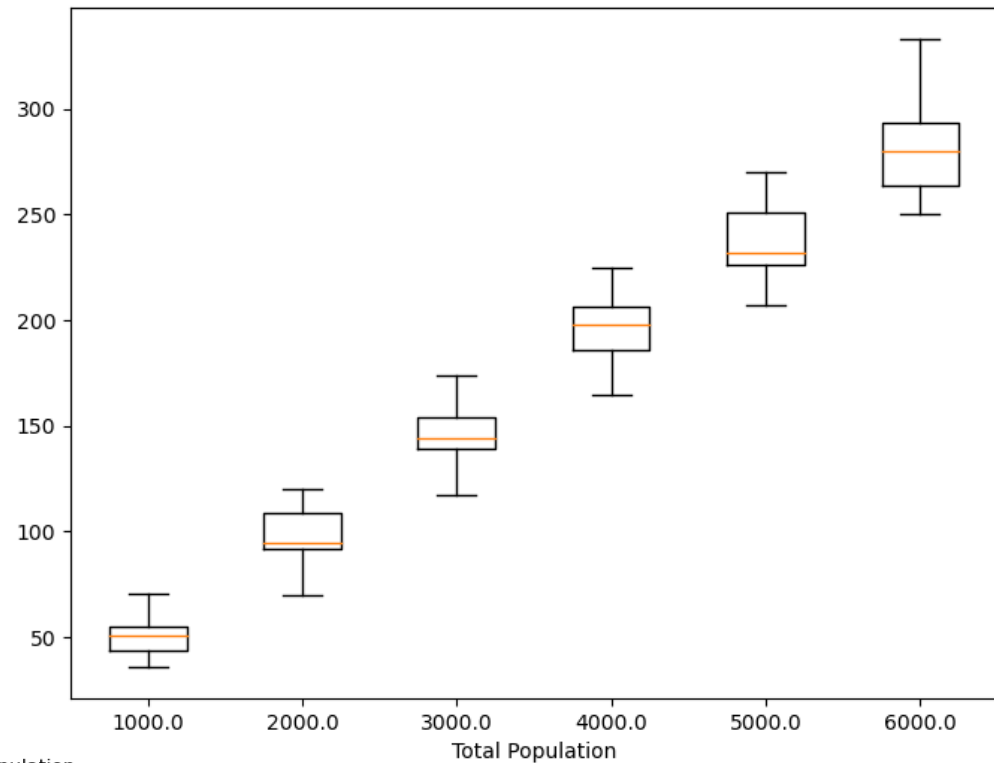
Infectious individuals infect all
within a certain radius.

Plot Title - Proportion of population
moving per iteration
Simulates travel restrictions, stay at
home

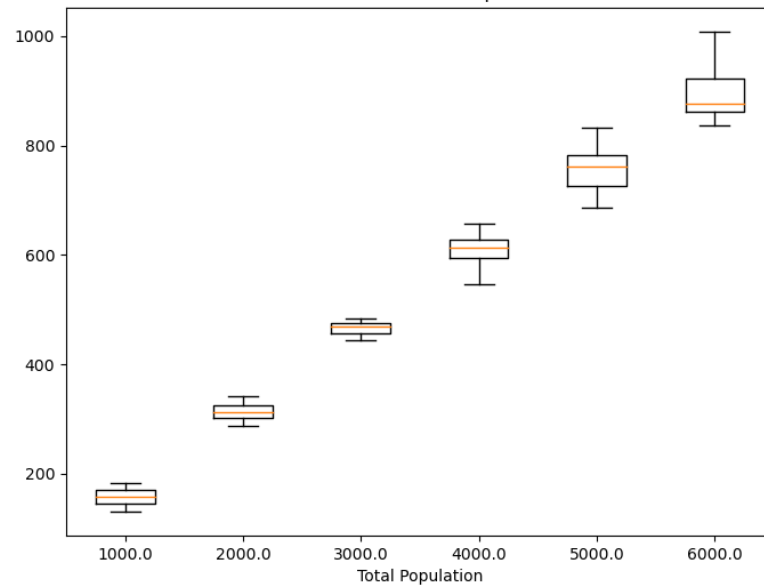
Time To Maximum Infected Pop.



Total Deaths

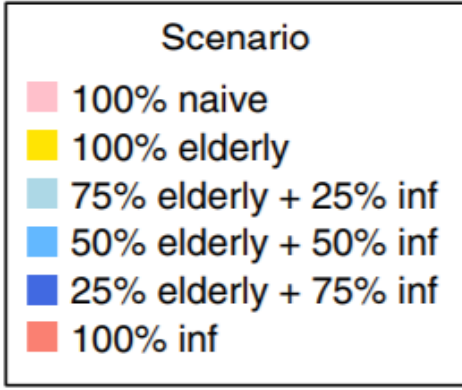
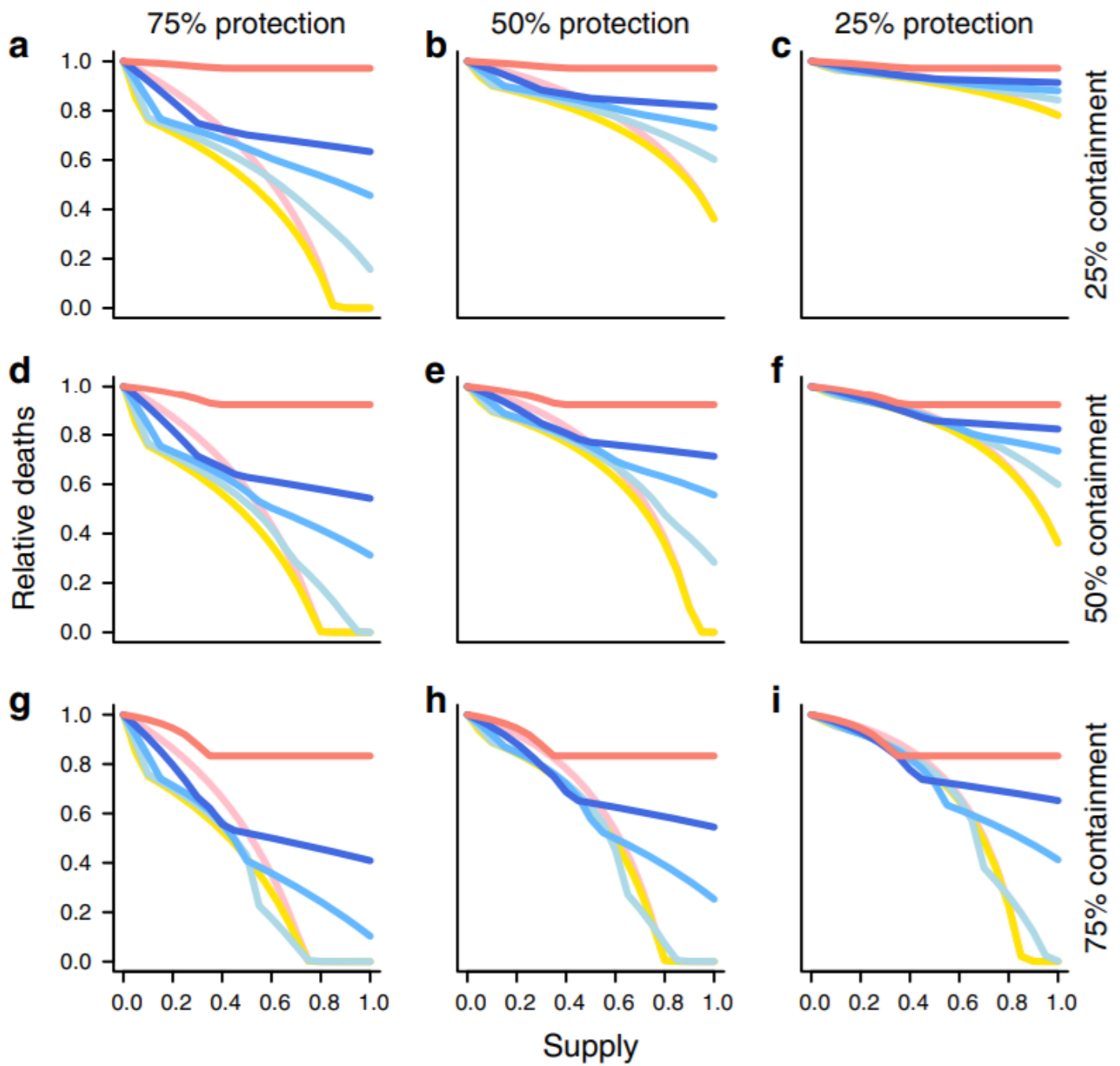


Maximum Infected Population



Protection – chance of being infected

Containment – chance of spreading infection



Worby, C.J., Chang, H. Face mask use in the general population and optimal resource allocation during the COVID-19 pandemic. *Nat Commun* **11**, 4049 (2020). <https://doi.org/10.1038/s41467-020-17922-x>