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# The MOCOS COVID - 19 model

# Epidemic models on networks (agent based models)

- agents with individual properties
- agent type dependent contact structure
- random, individual progression of disease
- time and process dependent change of environment
- Targetet complex counter-measures (NPI's e.g. contact tracing)

# Output MOCOS model group

## Forecasts

- Short time forecast < 4 weeks
- Scenario forecast: several months

## Effect of intervention scenarios

- Non-pharmaceutical interventions: testing, contact tracing, contact restrictions, quarantine
- Vaccination

## Structural insights

- Identifying structural socio-economic risk factors
- Impact and estimation of key medical parameters
- Epidemic thresholds
- Mathematical analysis

# Epidemic takes place on network of contacts

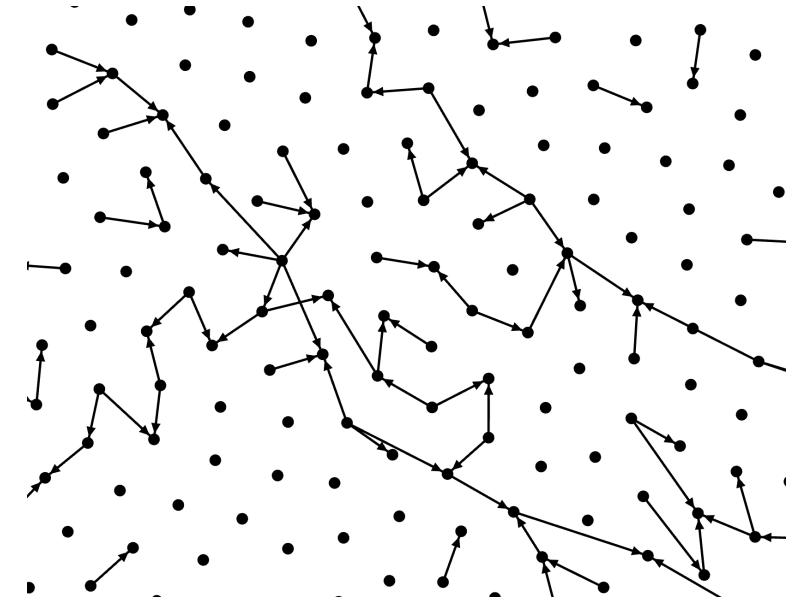
one needs:

- a network  $G(V, E)$  on which process takes place
  - note: the infection process might change the network

- specification of the states of infection:

- $\left\{ \begin{array}{l} 0 \triangleq \text{susceptible (noninfected)} \\ 1 \triangleq \text{infected (sub-states } 1a, 1b\ldots), 2 \triangleq \text{recovered, immune,..} \end{array} \right\}$

- state can also be a continuos variable e.g. the infectivity changes continuously over time (example HIV)



**Infection graph is a subgraph of the contact graph**

# Epidemic models on networks (agent based models)

- types  $x \in S$ ,
- infection states of individuals  $\chi(i, t, x_i) \in A$
- contacts:  $\kappa(x_i, y_j)$  defines probability of contact between individual  $i$  and  $j$
- transmission probability (depending on infection states of individuals)
- both state and contacts could be time dependent

# MOCOS model in a pill

- Event driven microsimulation model of COVID 19 epidemics
- Continuous-time distributions of disease progression  
(developing symptoms, self-quarantine)
- Disease progression on the synthetic population based on available statistical data
- Random and varied structure of intra-household and out-household contacts
- Assessing social intervention measures:  
quarantine, targeted testing, contact tracing, contact reduction, contact tracking app
- Extendable and adjustable to specific scenarios.

## Input parameters

- Population with basic features: age, gender, household assignment
- Special features: social competence, workplace, high-risk profession, ( comorbidity , region assignment, geolocation )

There is no hard limit on population size

- VM with 32GB RAM can simulate pandemics on Poland – size population)
- Configuration JSON specifying kernel intensities, initial conditions, detection delays, path to the generated population file
- Disease progression distributions

Example attributes:

- Basic features:
  - Agent id: 102564
  - Age: 23 yo
  - Gender: male
  - Household: id 410256  
(Living with 4 other household members:  
47 yo female, 42 yo male, 19 yo female,  
15 yo female)
- (Optional) Other features:
  - Social competence: friendly (factor 3.32)
  - Workplace: id 5 (coworking with 20 other people with ids: [...])
  - High-risk profession: No
  - Comorbidity diseases: No
  - Smoking status: No
  - Region assignment: Pomerania
  - Geolocation: 54.372158, 18.638306



# More technically about events

## Event structure

- Time (4 bytes)
- subject\_id (4 bytes)
- source\_id (4 bytes)
- event\_kind (1 byte)
- event\_sub\_kind (1 byte)

## Types of events

- Contact  
(Infection contact through one of kernels)
- Disease Progression
  - Become Infectious
  - Mild Symptoms
  - Severe Symptoms
  - Recovery
  - Death
- Home Treatment
- Hospitalization
- Detection
- Quarantine extension
- Tracking

## Precomputing disease progression times to optimize the simulation

- For each person in the sample population, following random delay times are calculated in advance:
  - T0 – incubation time
  - T1 – developing mild symptoms/contact with healthcare
  - T2 – developing severe symptoms/hospitalization
  - $T^*$  - death time realized with death probability correlated with age
  - TR – recovery time according to WHO

Above delay times will be realized under the condition that the infection will happen for a specific person

## Overview of kernels

We model potential infections as easy-to-interpretable stochastical kernels that are generating induced infection-contact networks during the simulation

- ▶ Household kernel (modelling in-household contacts)
- ▶ Sporadic contact kernel (e.g. contacts via shopping or in public transport)
- ▶ Friendship kernel (modelling contacts within a group of friends or out- household family)
- ▶ Hospital kernel (modelling contacts in hospitals)
- ▶ Age dependent kernel ( e.g. contacts in schools)
- ▶ Workplace kernel
- ▶ Geographical kernel (taking into account distance dependence of contact structure)

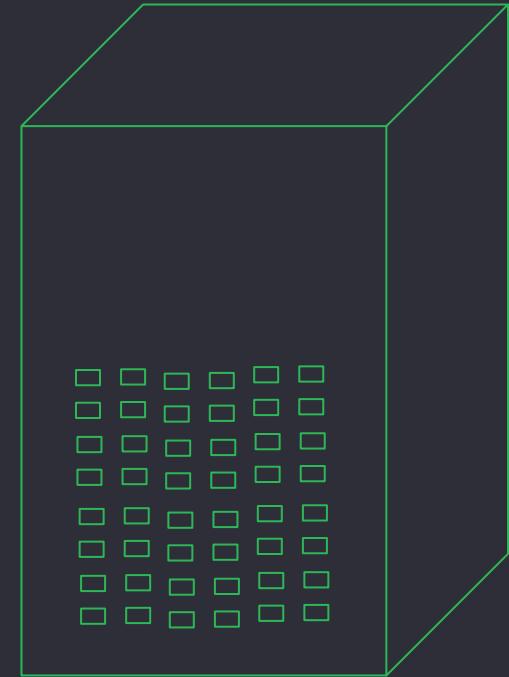
# Kernels as a way of describing local spread of the epidemics

We model potential infections as easy-to-interpretable stochastical kernels that are generating induced infection-contact networks during the simulation



# Infrastructure: Wroclaw Supercomputing and Networking Center (WCSS)

- Cluster BEM: 860 TFLOPS, 74.6GB memory, 1600 Intel Xeon processors with ~22k cores
- Running tasks through global queue manager PBS
  - WCSS team has created a dedicated priority queue “*-q covid-19*” exclusively for our team



# Infrastructure: Wrocław Supercomputing and Networking Center (WCSS)

- Resources of typical task

generating 100 trajectories for single set of parameters

- Simulation for Wrocław – 1CPU, 4GB memory, processing time up to 15min, artifacts up to 500MB
- Simulation for Poland – 1CPU, 32GB memory, processing time up to 16h, artifacts up to 32GB

- Typical experiment

861 tasks – 2d “grid” evaluating each combination of two parameters

e.g. probability of contact tracking & probability of detecting mild cases

- Full artifacts from a single typical experiment weigh up to 7TB – require postprocessing on-site

## Output from the model

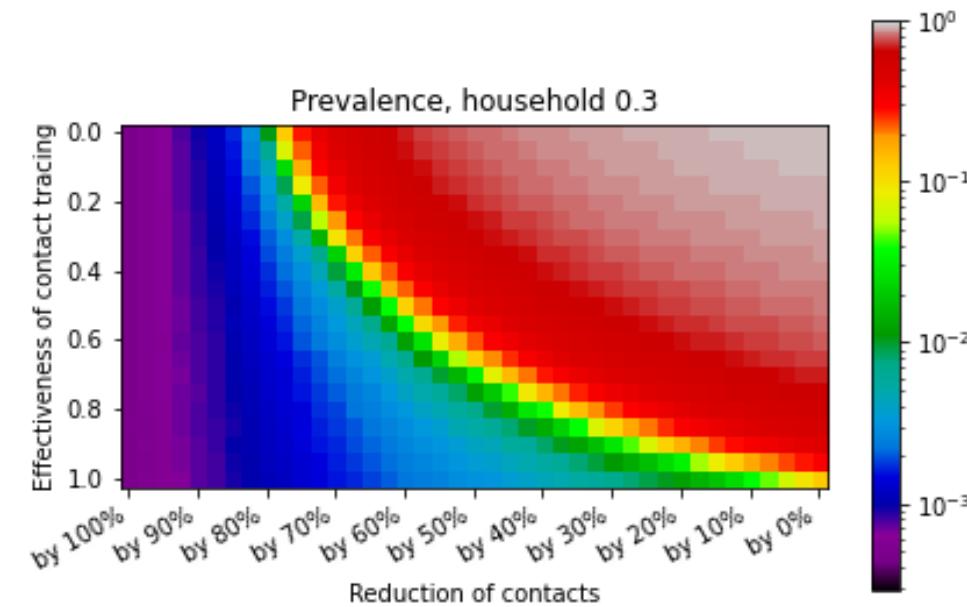
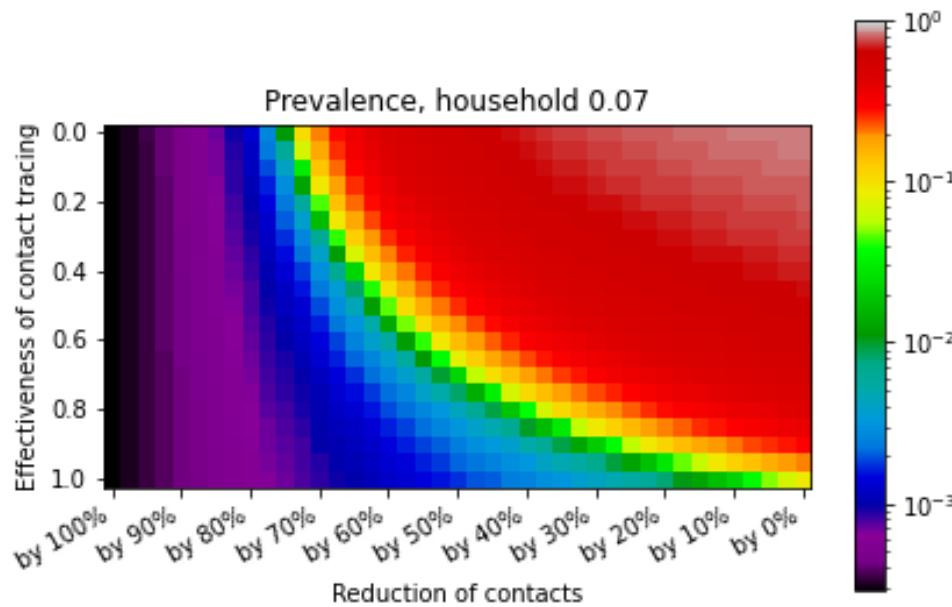
- Trajectories: infections, detections, number of hospitalized, number of active cases, number of quarantined (Possibility to fit stochastic trajectories with observed data)
- Age or gender specific trajectories or histograms,
- Disease progressions and outcome,
- Whether specific ICU limit was surpassed within a specific timeframe,
- Confidence intervals for number of reported cases or daily deaths
- The full forest of infections to recreate infection clusters along with infection ways (names of clusters)

# Output: structural heat maps (Poland)

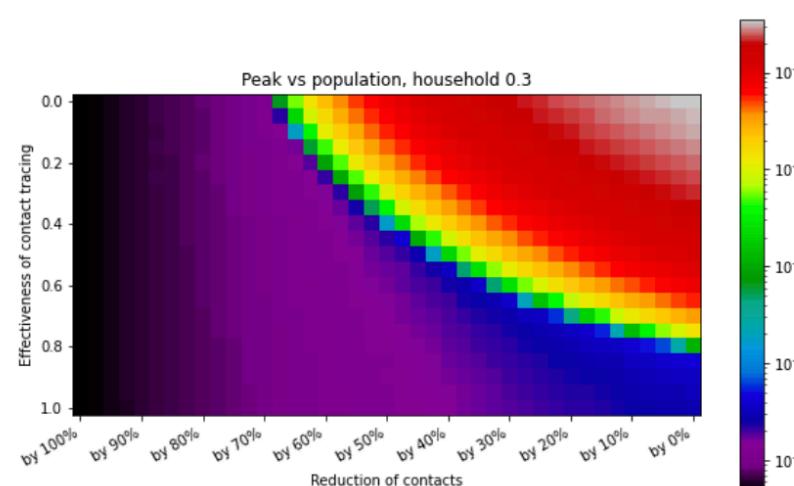
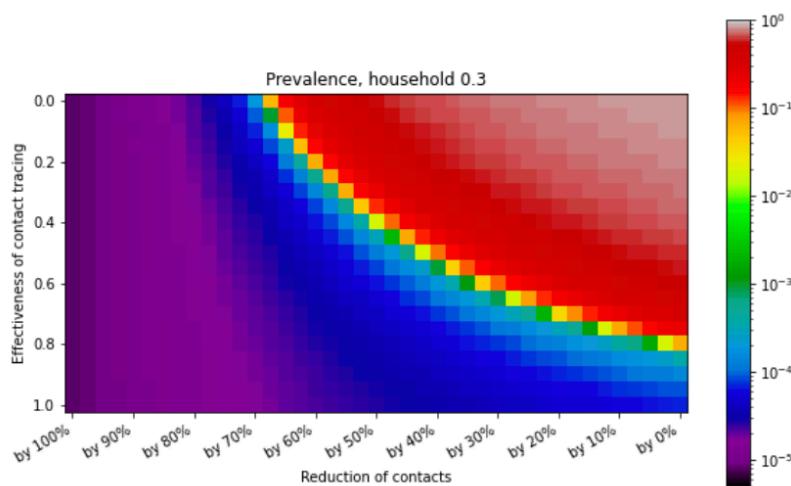
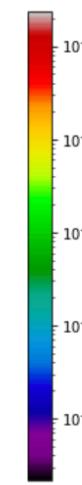
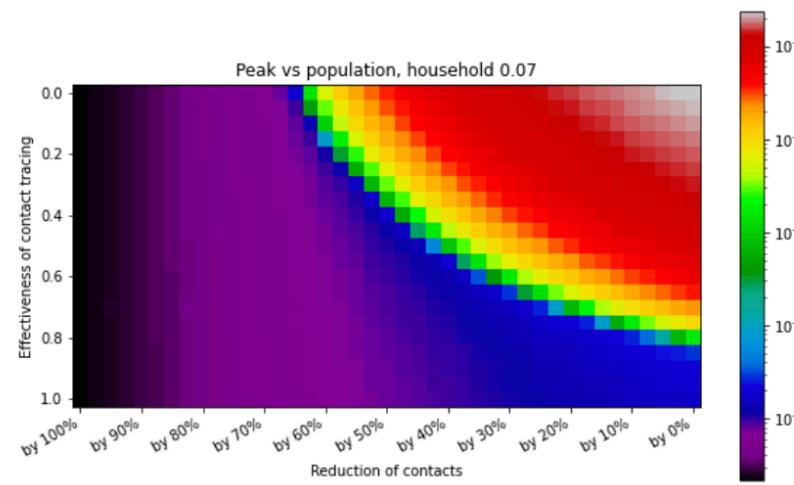
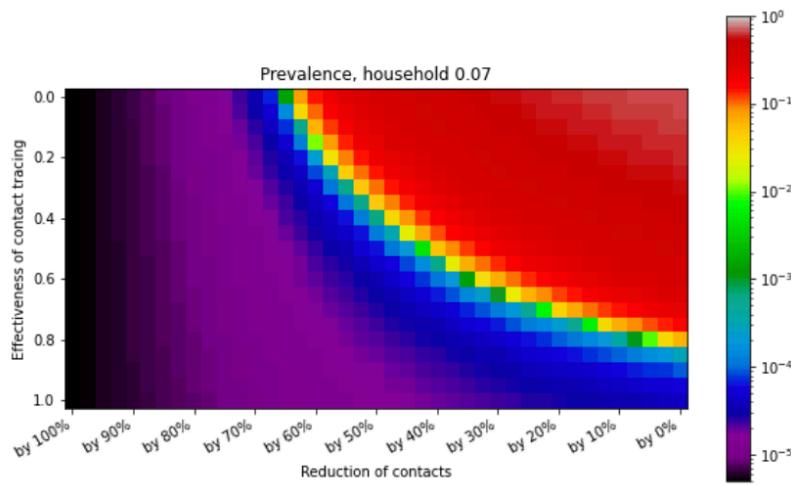
Heatmaps show epidemic outcomes (the color) as function of parameters relevant in controlling epidemics

Key parameters are :

$f$  : degree of contact reduction  
 $q'$  : probability to uncover mild cases  
 $b$  : success probability in contact tracing  
 $D$  : time delays for testing and tracing



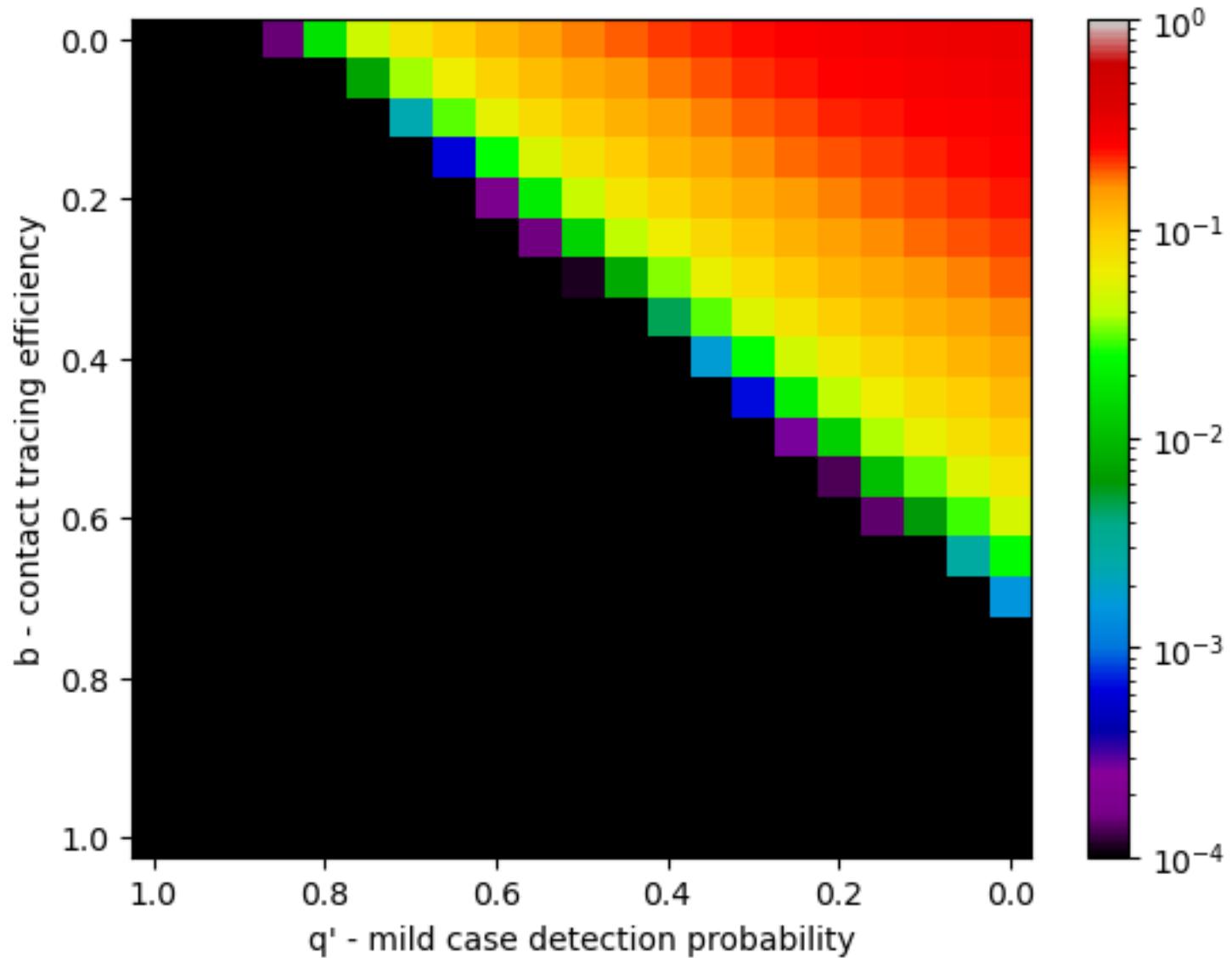
# Similar heat map as before but for more efficient testing ( $q'=0.6$ instead of 0.3)



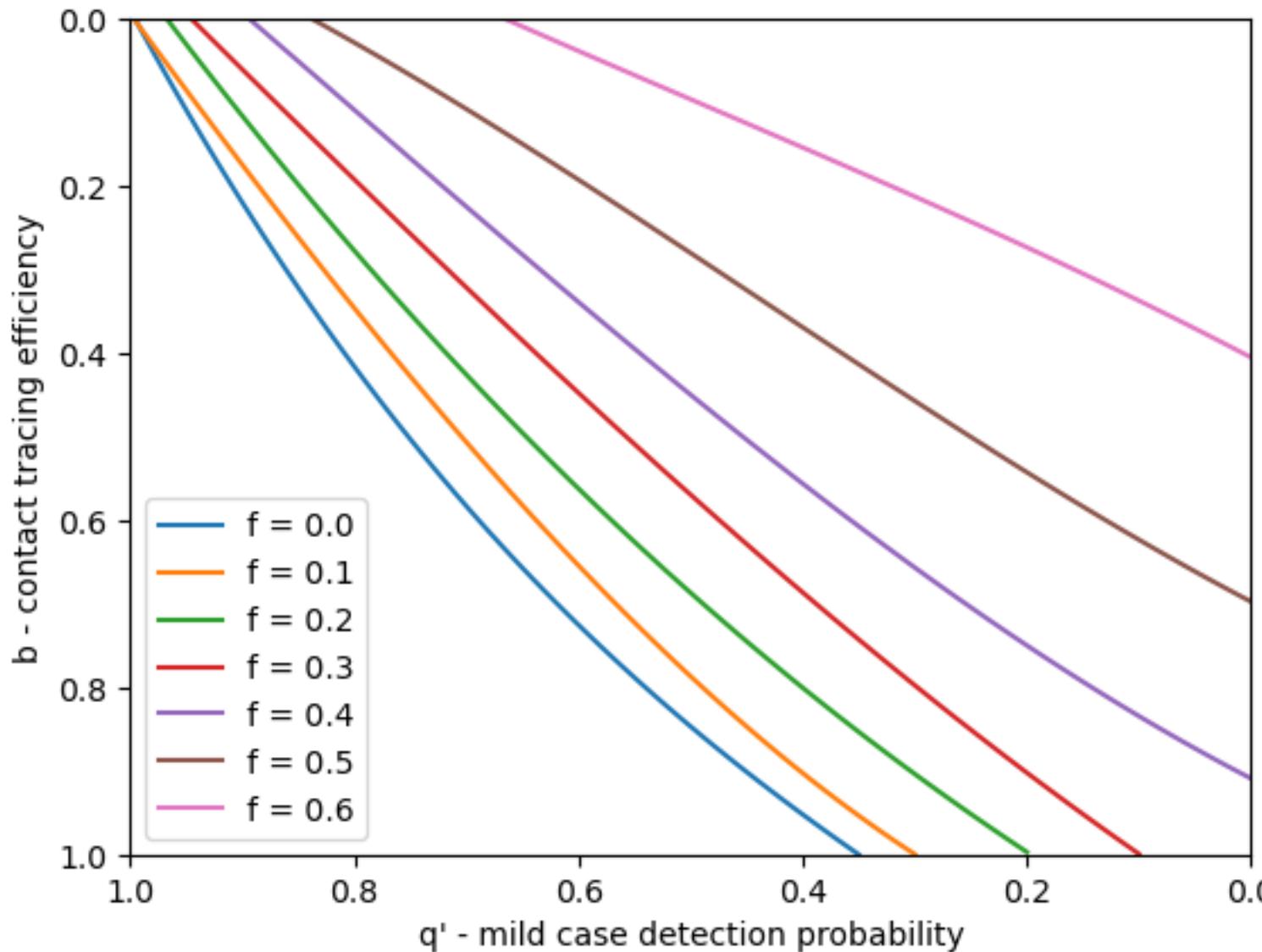
The inner part of the melon is the dangerous regime :  $R>1$

The outside of the melon is the subcritical regime:  $R<1$

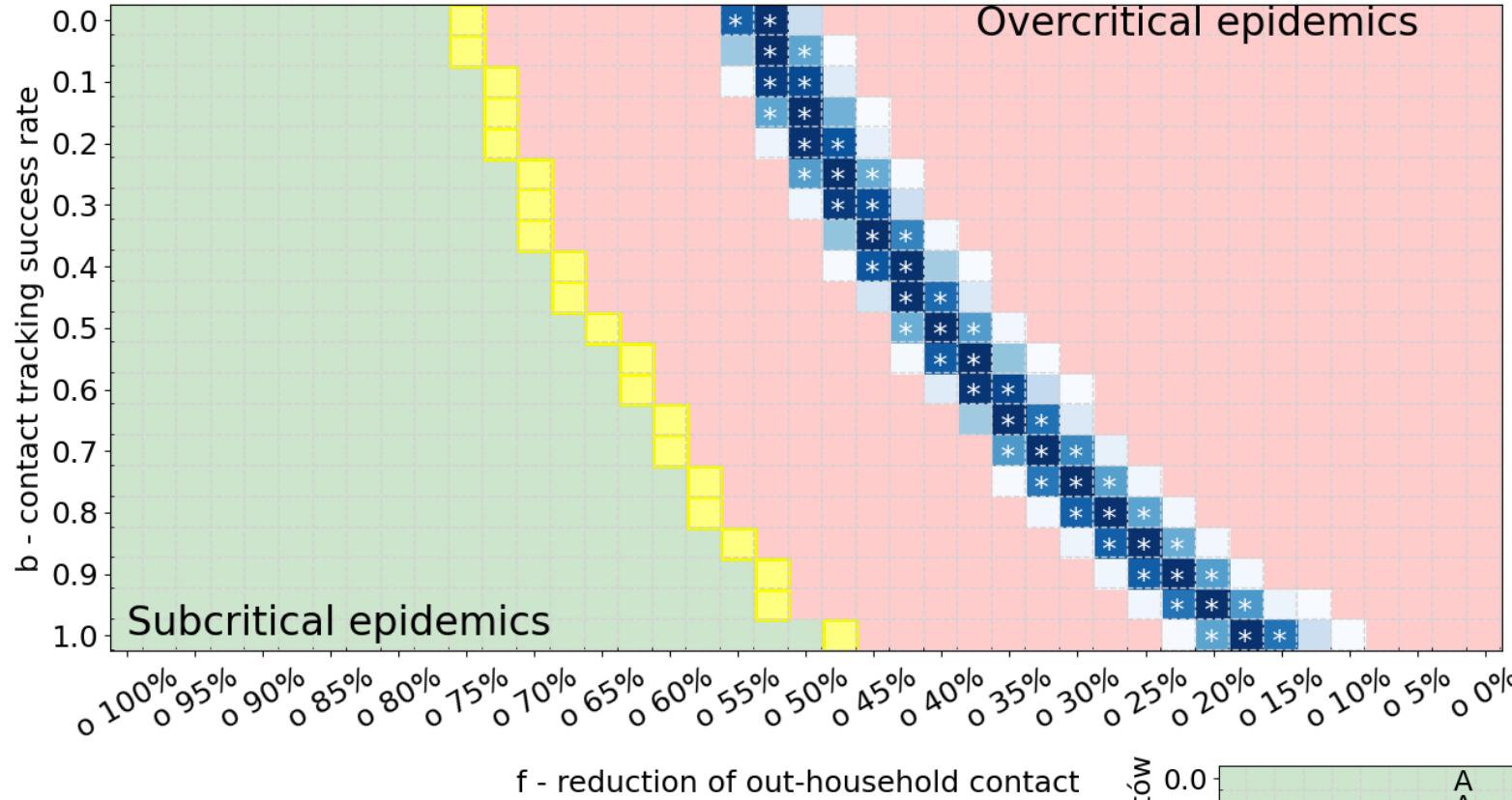
# Tracing versus testing for 50% restriction and 40% vaccination (British variant)



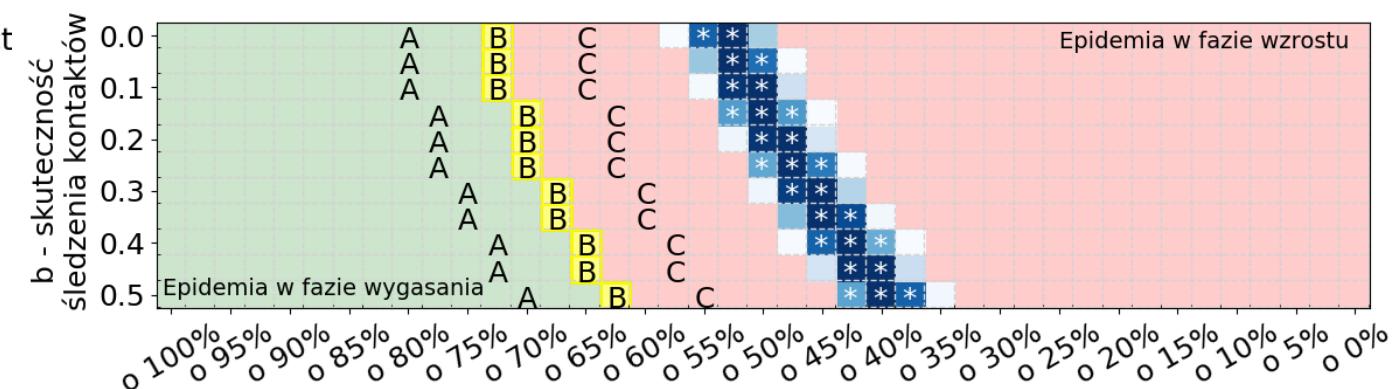
# Epidemic thresholds for tracing versus testing for different levels of restriction and 40% vaccination (British variant)



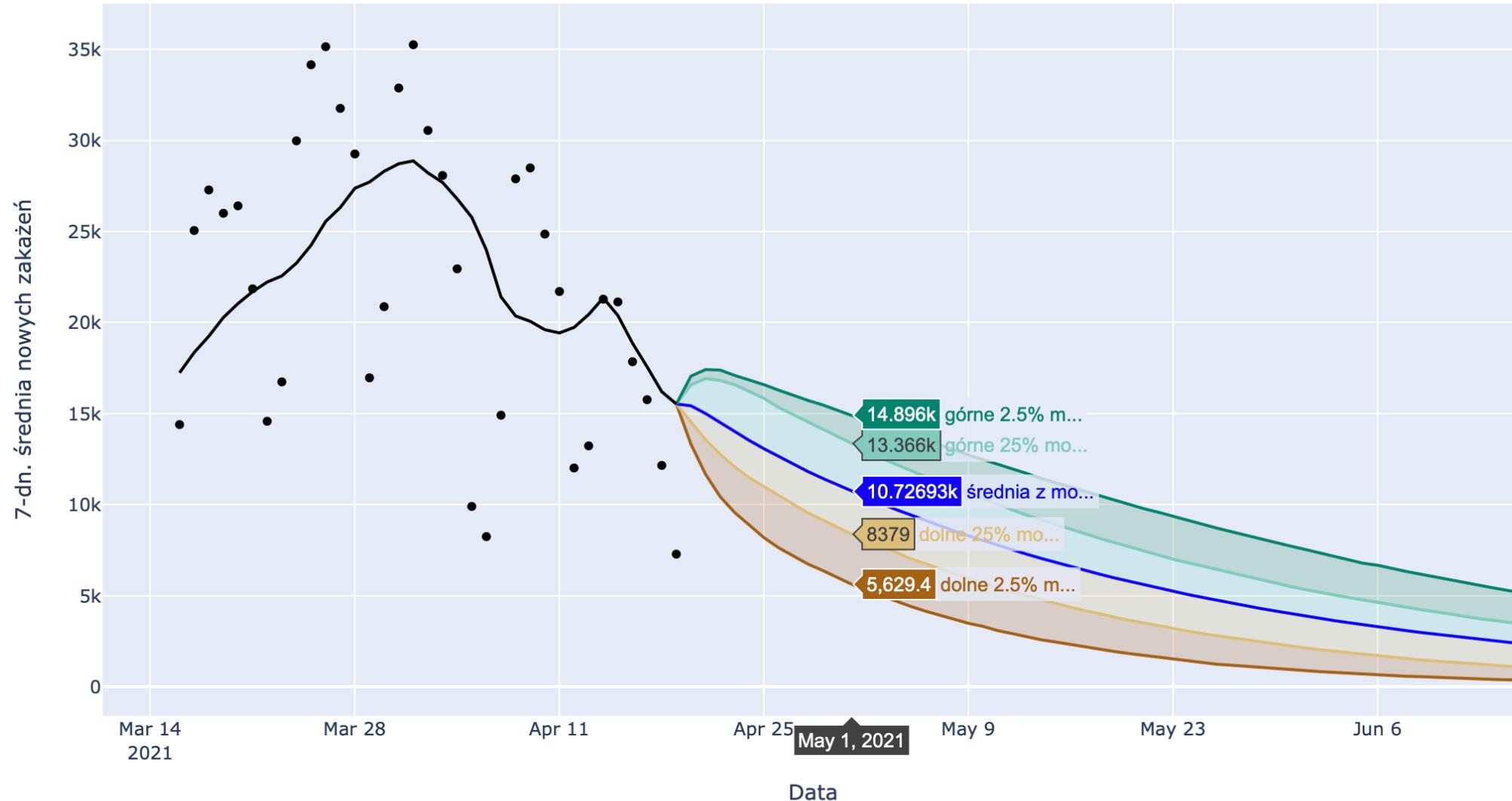
# Output: localisation within heat maps



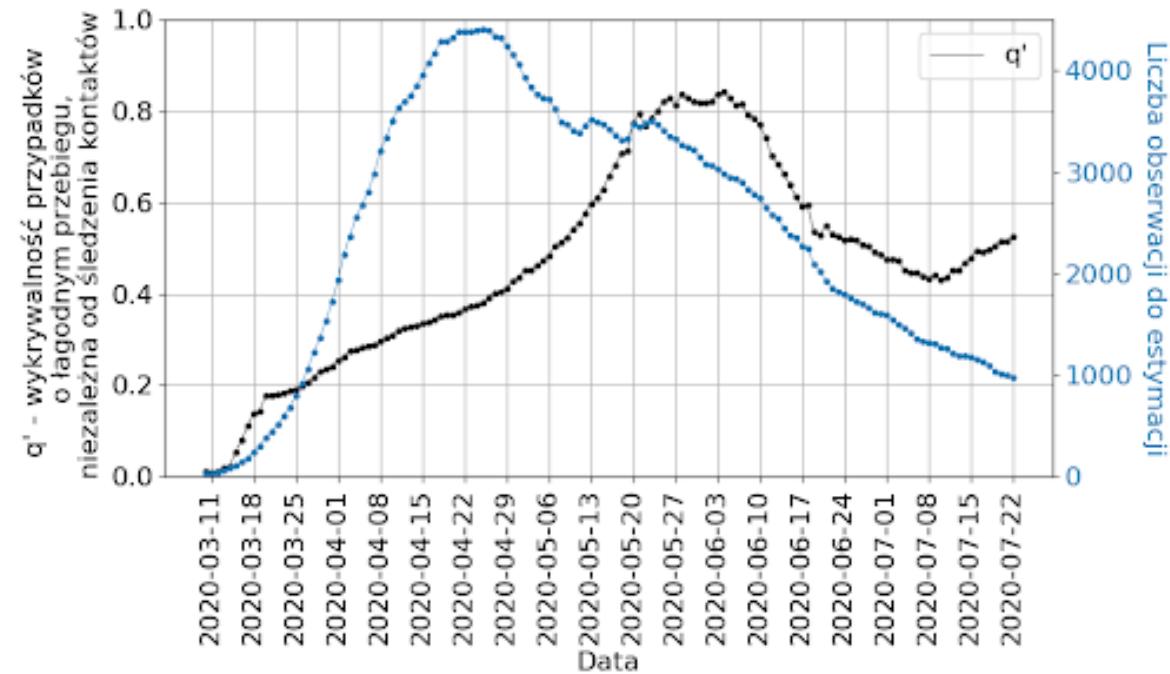
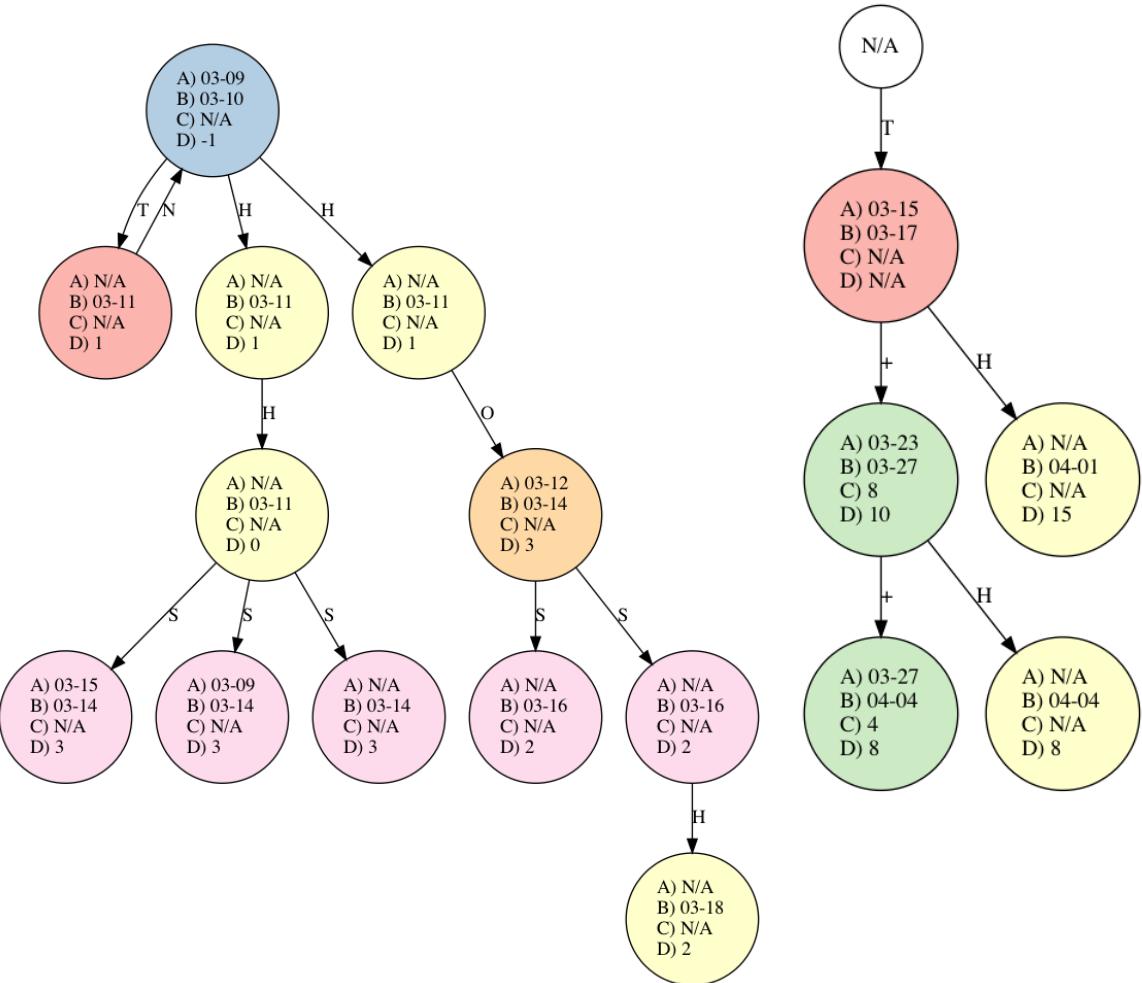
A: strong lockdown  
B: soft lockdown  
C: actual lockdown  
\* : actual localisation



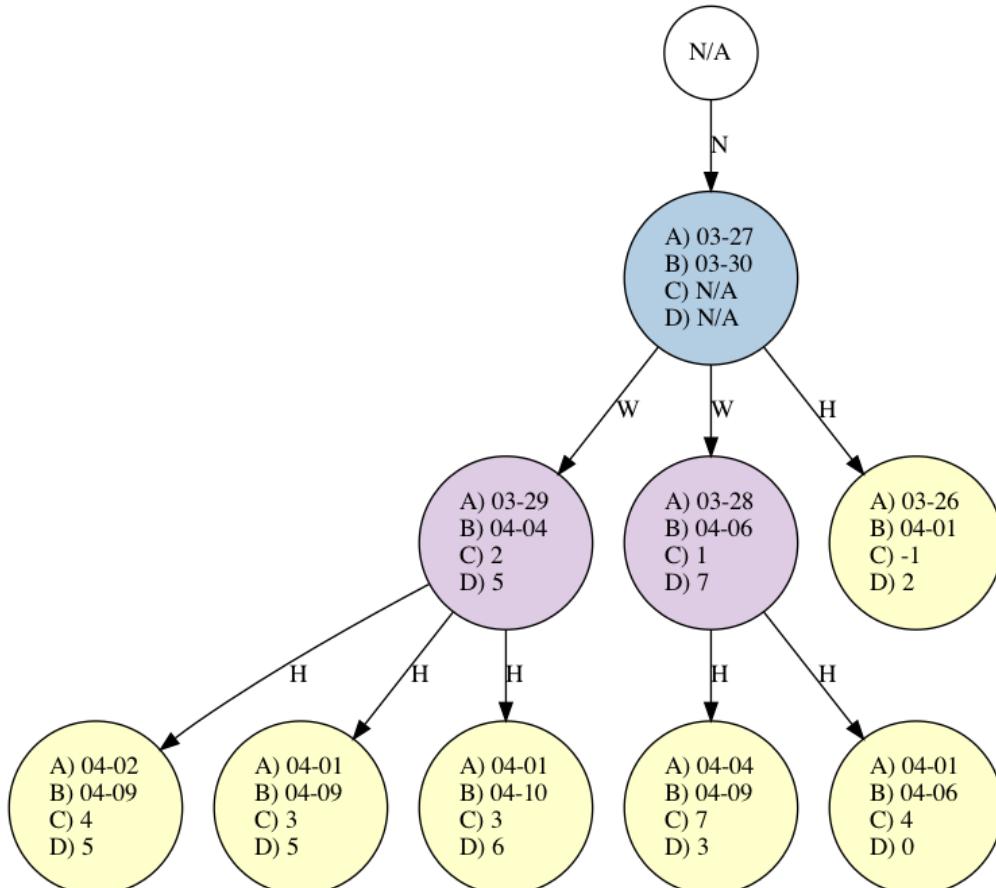
# Output: forecasts as weighted ensemble of sample paths



# Testing success rate $q'$ , tracking probabilities $b$ , delay times $D$ and $R^*$ (out-household reproduction number ) can be estimated from linked patient data

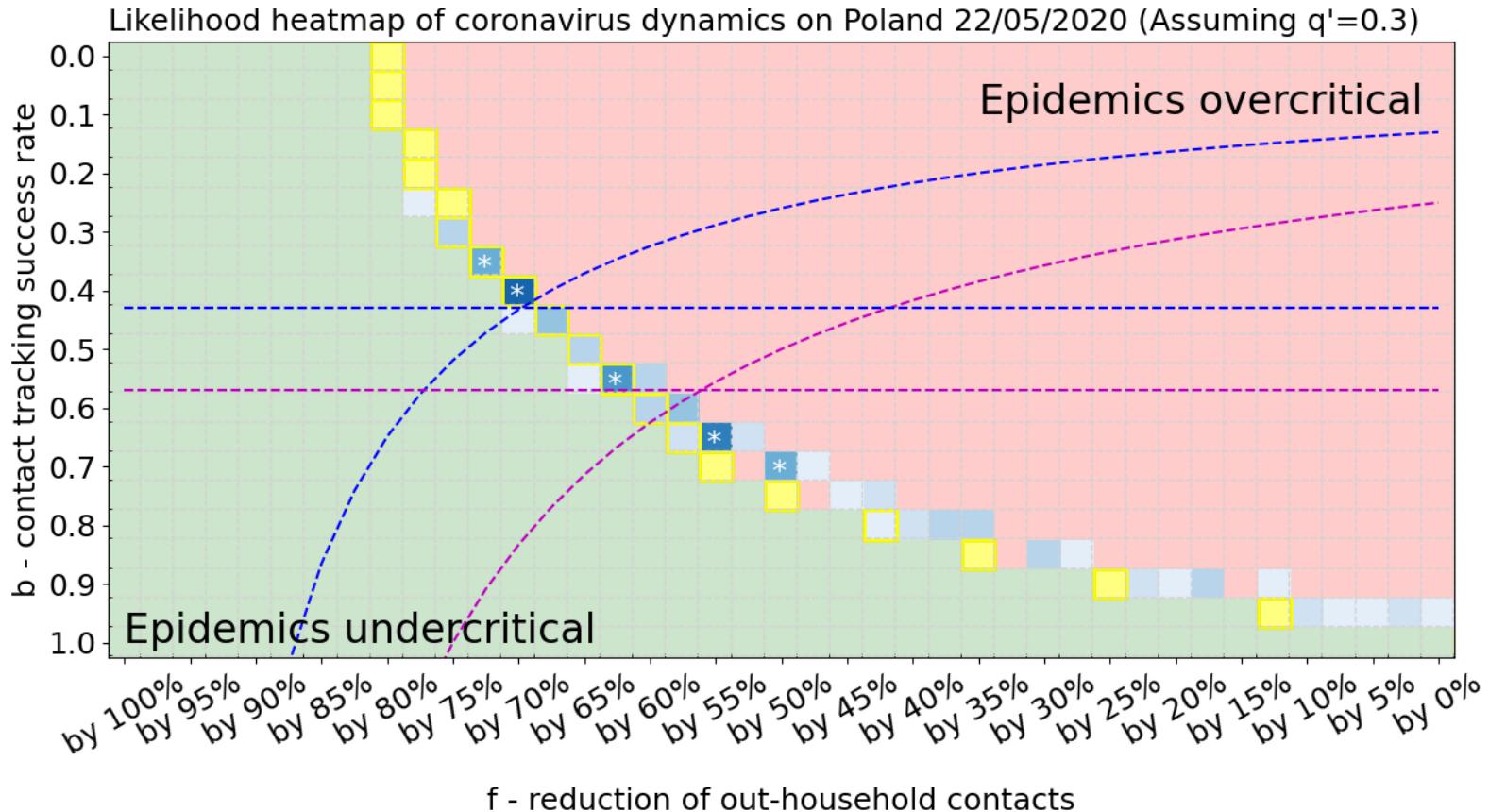


# Problems with data: assignment of link structure can be wrong, missing data

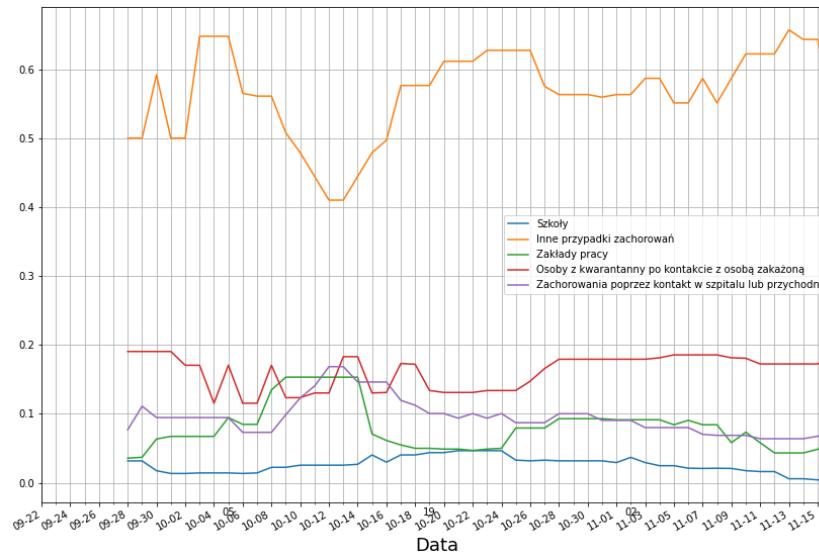
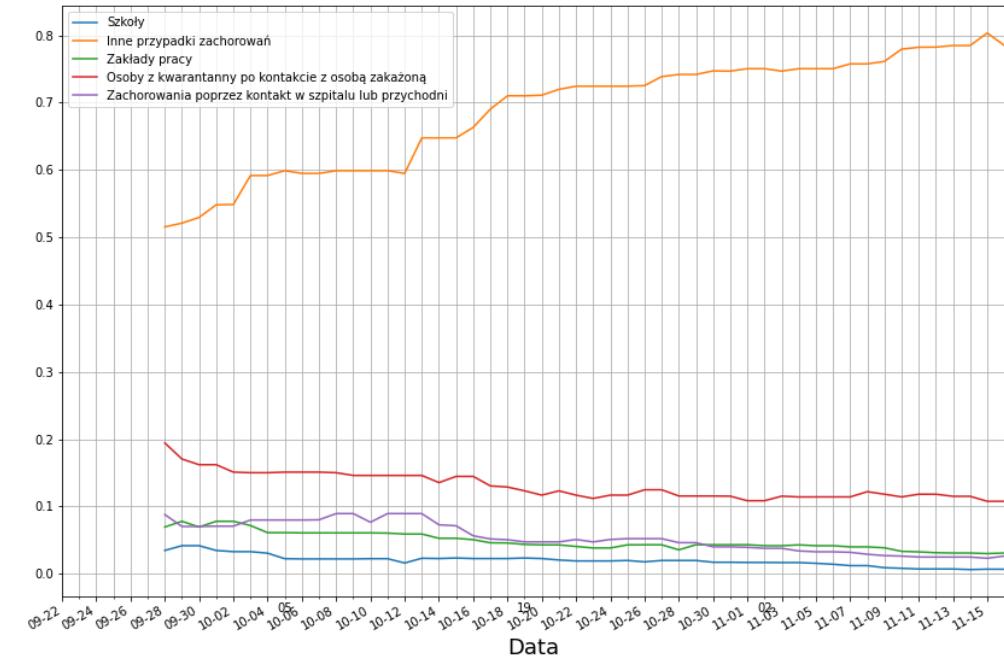
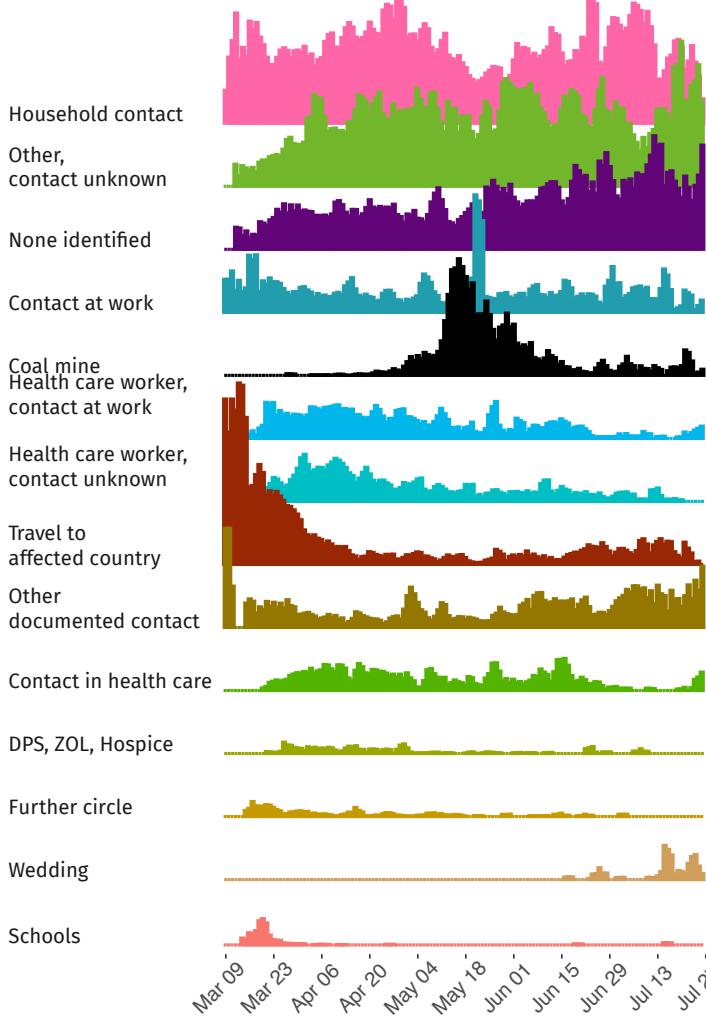


- Whole time to detect the cluster took 11 days
- Order of in- household links is often doubtful

# Estimation of tracking probabilities



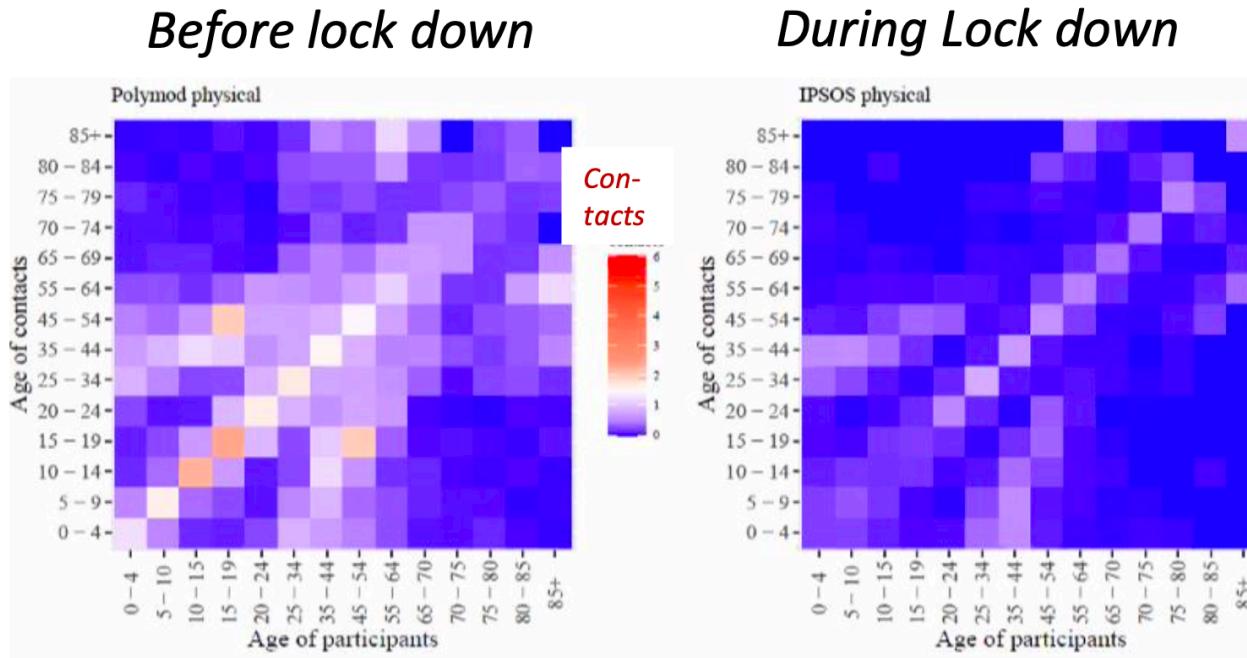
# Good knowledge of sources of infections is key for targeted social distancing and



# Behavioural Questionnaire: Contact Matrices

(Veronika Jäger, Münster)

ALL PHYSICAL CONTACTS



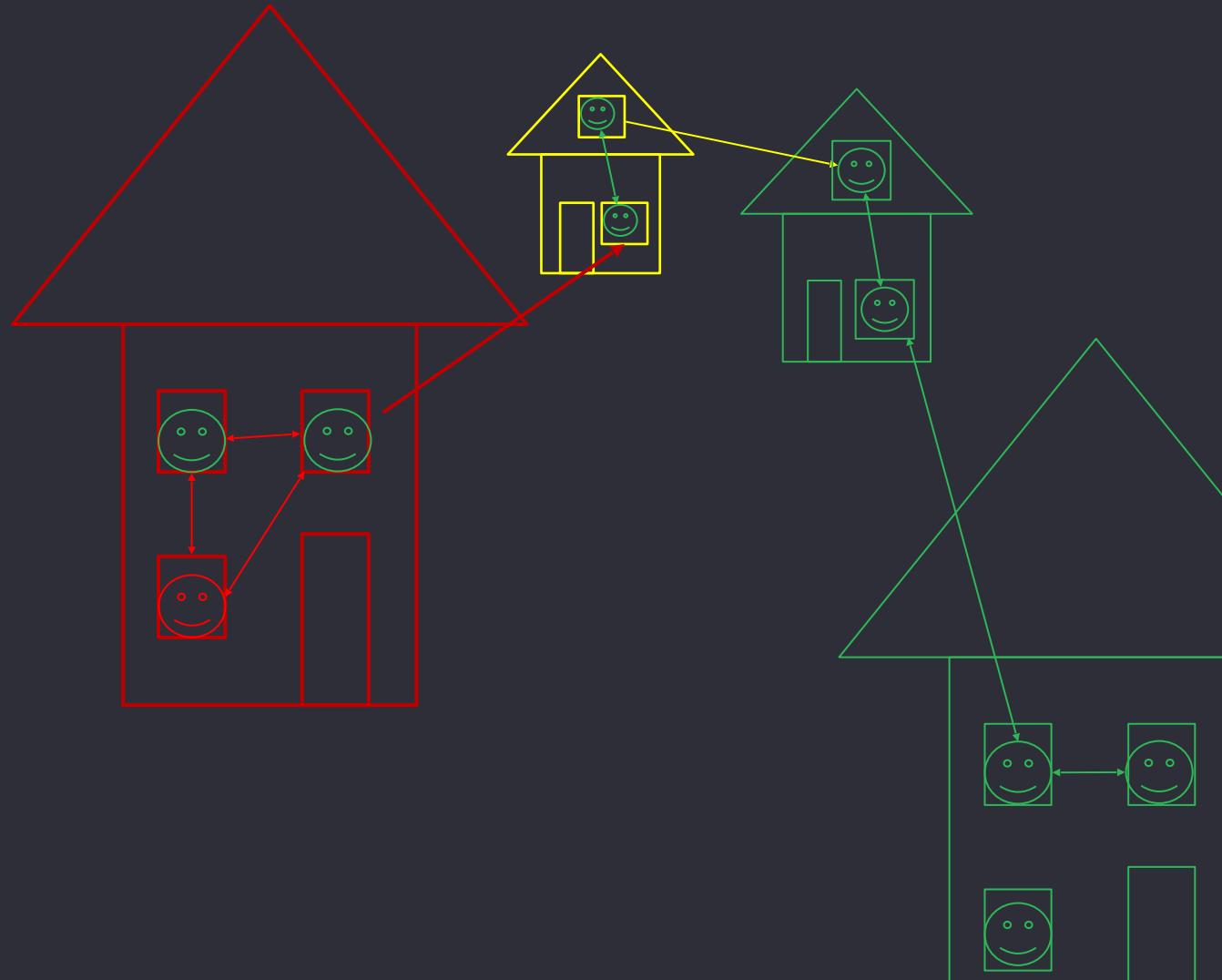
**Required:** Time-series of  
Contacts, age-stratified

**Example shown:** Effects of  
1st Lock-down

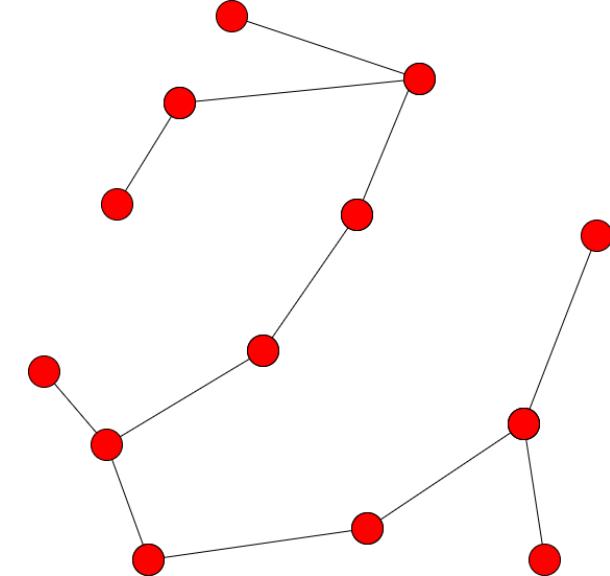
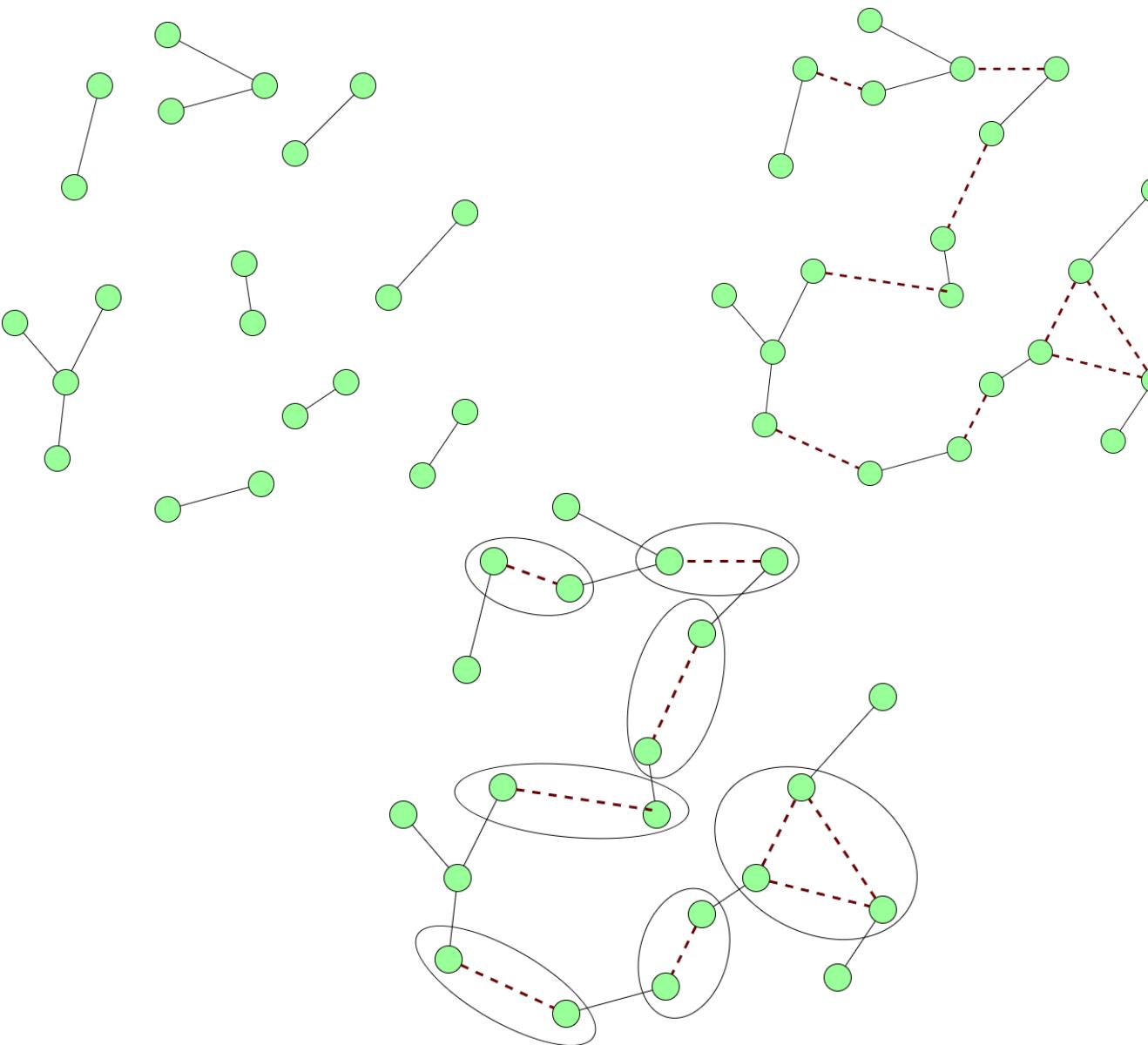
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Household structure plays significant role in epidemics spreading

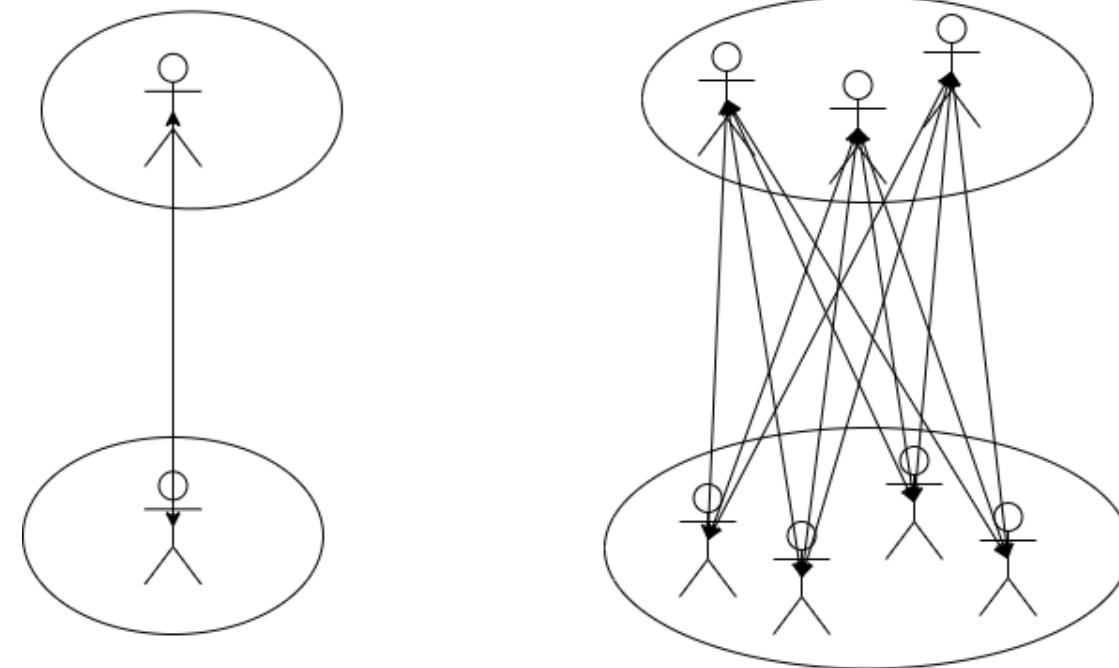


# Structural insights: Households are a key factor for epidemic dynamics



**From network between  
individuals to network  
between households**

Large households have catalytic effect on the spread because link probability between two households is proportional to the product of their sizes



# Household graphs : simple example of constant attack rate a

$a_H$

- household kernel defining the link structure between households of size  $x$  and size  $y$  :

$$\frac{c}{E} (1 + a_H (x - 1)) \cdot y \quad (2)$$

- Transfer operator:
- spectral norm of the associated household transfer operator is given by :

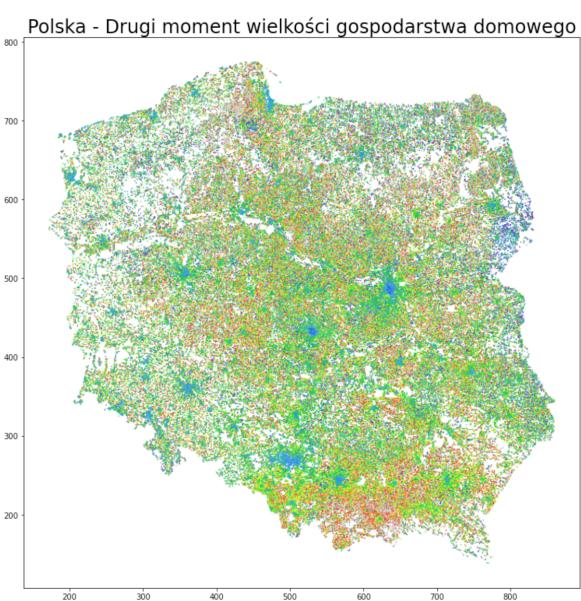
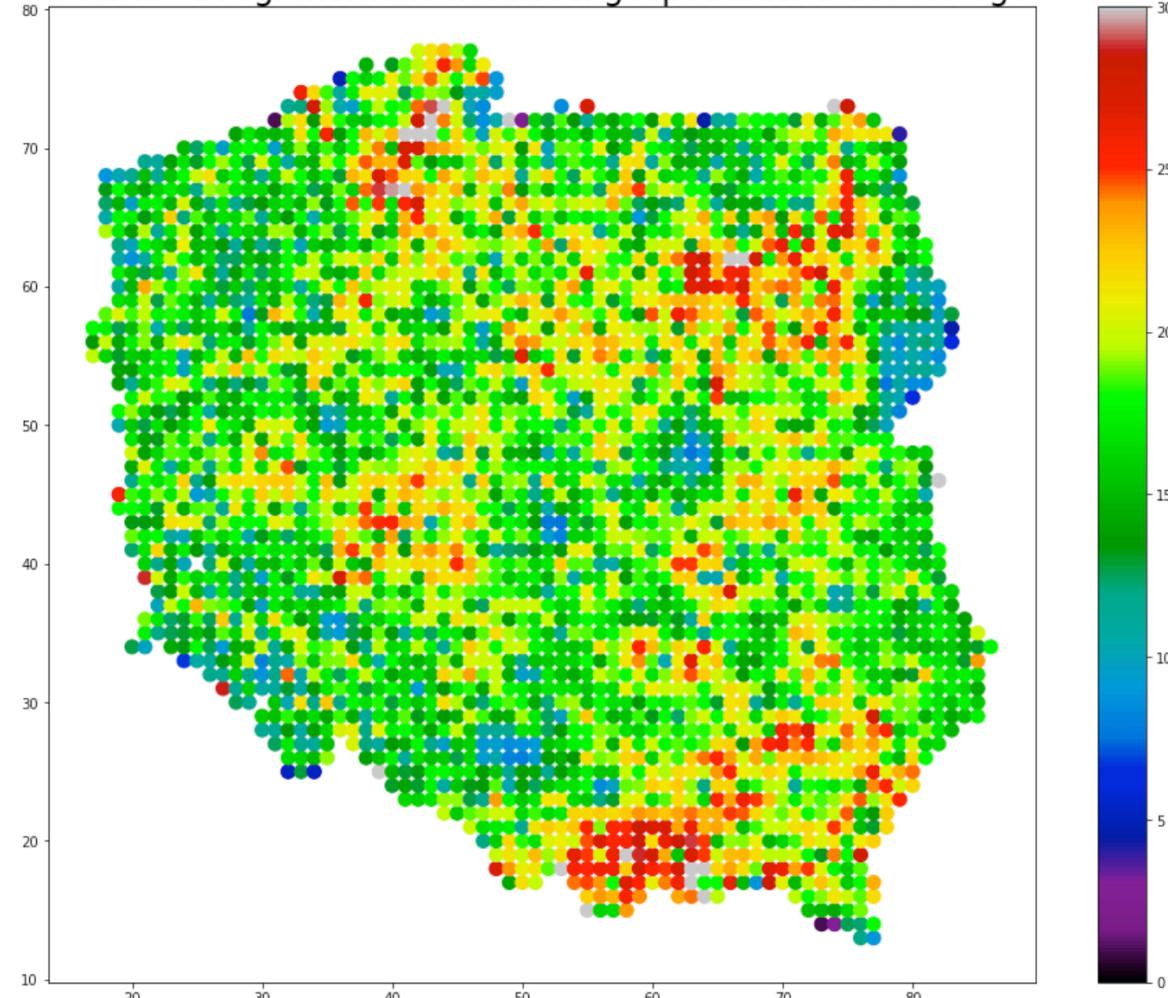
$$\frac{c}{E} \sum_{k \geq 1} (1 + a_H (k - 1)) \cdot k \cdot \eta(k) \quad (3)$$

$$= c \left( 1 + a_H \left( \frac{m_2}{E} - 1 \right) \right); \text{ } m_2 \text{ second moment of } \eta \quad (4)$$

where  $\eta(k)$  is the fraction of households of size  $k$

- $T$  is a rank one, non-symmetric linear operator

Polska - Drugi moment wielkości gospodarstwa domowego



## References 1/2

- Mocos webpage <https://mocos.pl>
- Github repository <https://github.com/MOCOS-COVID19>
- Github repository of the forecast hub  
<https://github.com/KITmetricslab/covid19-forecast-hub-de>
- Forecast website <https://kitmetricslab.github.io/forecasthub/forecast>

## References 2/2

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Available at: <https://www.medrxiv.org/content/10.1101/2020.03.25.20043109v2.full>
- Adamik, Barbara, et al. "Bounds on the total number of SARS-CoV-2 infections: The link between severeness rate, household attack rate and the number of undetected cases." (2020).  
Available at: [https://www.researchgate.net/profile/Wolfgang-Bock-2/publication/343295720\\_Bounds\\_on\\_the\\_total\\_number\\_of\\_SARS-CoV-2\\_infections\\_The\\_link\\_between\\_severeness\\_rate\\_household\\_attack\\_rate\\_and\\_the\\_number\\_of\\_undetected\\_cases/links/5f21e28392851cd302c8764a/Bounds-on-the-total-number-of-SARS-CoV-2-infections-The-link-between-severeness-rate-household-attack-rate-and-the-number-of-undetected-cases.pdf](https://www.researchgate.net/profile/Wolfgang-Bock-2/publication/343295720_Bounds_on_the_total_number_of_SARS-CoV-2_infections_The_link_between_severeness_rate_household_attack_rate_and_the_number_of_undetected_cases/links/5f21e28392851cd302c8764a/Bounds-on-the-total-number-of-SARS-CoV-2-infections-The-link-between-severeness-rate-household-attack-rate-and-the-number-of-undetected-cases.pdf)
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Available at: <https://www.medrxiv.org/content/10.1101/2020.12.24.20248826v2>

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