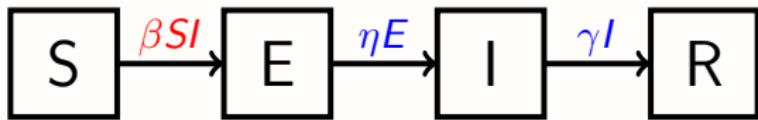


# Parameterizing Epidemic Models

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## SEIR epidemic model



$$S' = -\beta SI$$

$$E' = \beta SI - \eta E$$

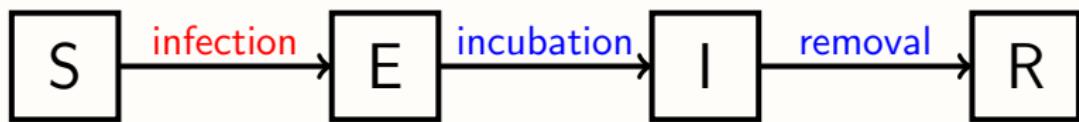
$$I' = \eta E - \gamma I$$

$$R' = \gamma I$$

- ▶ Let  $N = S + E + I + R$ . Then  $N' = 0$ , so  $N$  is constant.
  - The  $R$  equation is not needed because  $R = N - S - E - I$ .

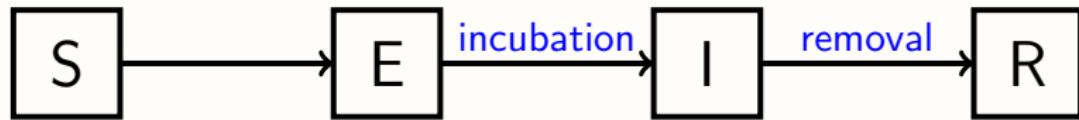
## Processes

- ▶ Processes are either **transmissions** or **transitions**.



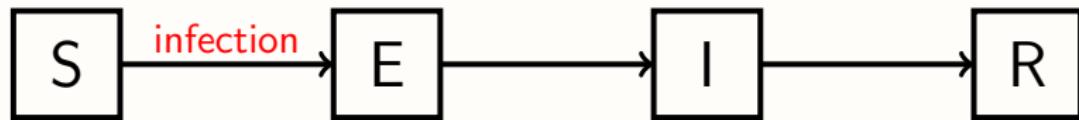
- **Transmissions** require interaction with another class.
  - Susceptibles are infected by Infectives.
- **Transitions** happen without any interaction.
  - Incubation of Latent individuals and removal of Infectious individuals happen spontaneously.

## Processes – Transitions



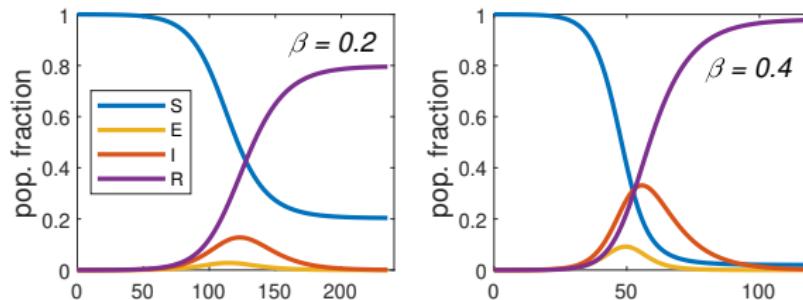
- ▶ Transition rates are (assumed to be) proportional to the **leaving class**
  - incubation rate =  $\eta E$
  - removal rate =  $\gamma I$
- ▶ Transition times are then exponentially distributed.
- ▶ **Rate constants are reciprocals of average time in class.**
  - Average removal time 10 days →  $\gamma = 0.1$

## Processes – Transmissions



- ▶ Transmission rates are proportional to the **leaving** class size
  - infection rate = force of infection \*  $S = \lambda S$
- ▶ The force of infection is proportional to the sum of the **transmitting** classes (just  $I$  for SEIR)
  - force of infection =  $\beta I$
- ▶  $\beta$  is the product of the encounter rate and transmission probability, neither easily measured.

# How Does $\beta$ Affect Outcomes?



- ▶ It changes the peak  $I$  value.
- ▶ It changes the final  $S$  value.

# SEIR Final Size Relation

- We can relate  $S$  to  $R$ , independent of time.

$$\frac{dR}{dS} = \frac{R'}{S'} = \frac{\gamma I}{-\beta SI} = -\frac{1}{\mathcal{R}_0} \frac{1}{S}.$$

1. Integrate from time 0 to infinity and nondimensionalize:

- Let  $s = S/N$ ,  $r = R/N$ ,  $s_0 = S(0)/N$ ,  $r_0 = R(0)/N$ .

$$\ln \frac{s_0}{s_\infty} = \mathcal{R}_0(r_\infty - r_0). \quad (1)$$

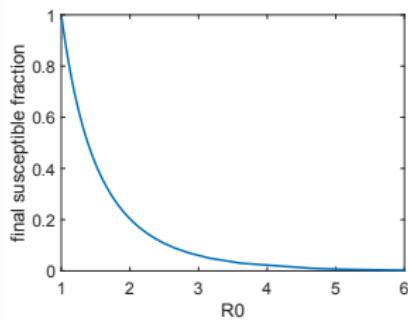
2. We can show that  $e_\infty = i_\infty = 0$ , so  $s_\infty + r_\infty = 1$ .

$$\ln \frac{s_0}{s_\infty} = \mathcal{R}_0(1 - r_0 - s_\infty). \quad (2)$$

## SEIR Model – Final size relation

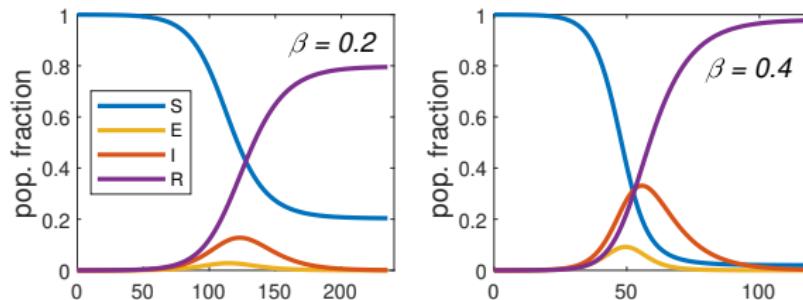
- ▶ Assume nearly everyone is susceptible, so  $s_0 \approx 1$  and  $r_0 = 0$ .

$$\ln \frac{1}{s_\infty} = \mathcal{R}_0(1 - s_\infty). \quad (3)$$



- ▶ This works great if  $\mathcal{R}_0 < 4$  and the epidemic ended without intervention. Then  $\beta = \gamma\mathcal{R}_0$ .

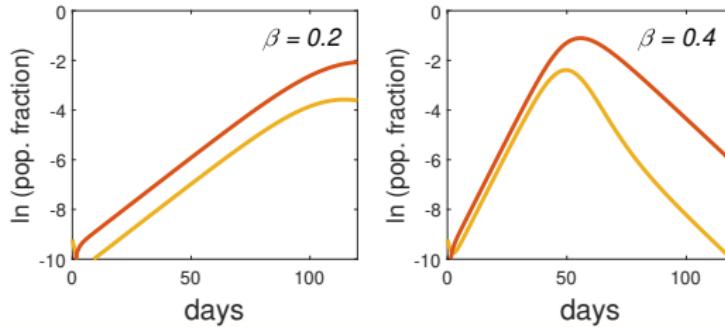
# How Does $\beta$ Affect Outcomes?



- ▶ It changes the peak  $I$  value.
- ▶ It changes the final  $S$  value.
- ▶ **Maybe it does something we can't see in these graphs.**

## How Else Does $\beta$ Affect Outcomes?

- ▶ Plot the logarithms of the infected populations  $E$  and  $I$ .



- ▶ There is an extended period of exponential growth.

$$\ln I = \ln I_0 + \lambda t, \quad \ln E = \ln I + \ln \rho$$

for some  $I_0, \rho$ .

$$I = I_0 e^{\lambda t}, \quad E = \rho I.$$

## SEIR epidemic model – exponential phase

$$E' = \beta S_0 I - \eta E.$$

$$I' = \eta E - \gamma I.$$

With

$$E = \rho I, \quad I' = \lambda I, \quad E' = \rho \lambda I,$$

we get

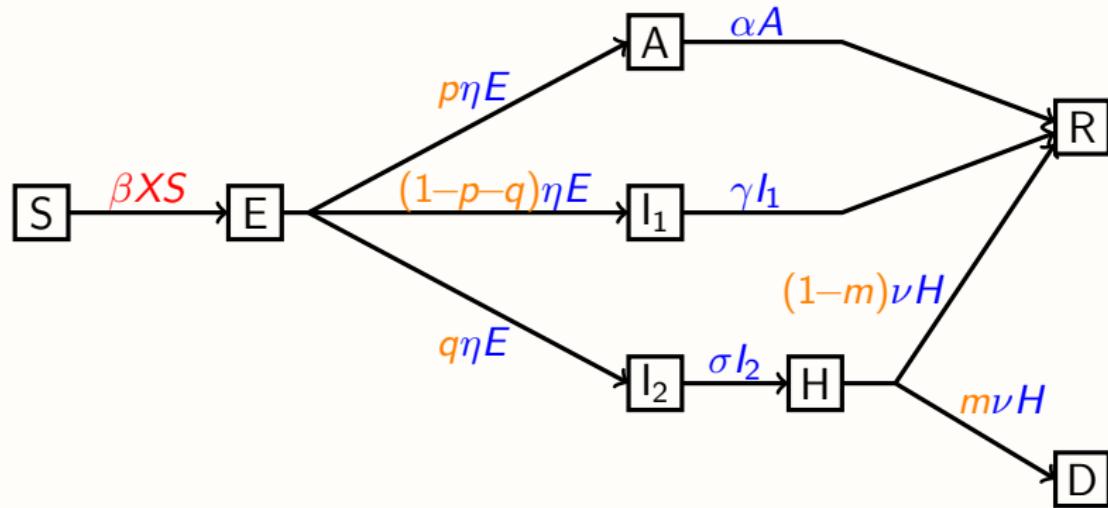
$$\beta = \frac{(\lambda + \eta)(\lambda + \gamma)}{S_0 \eta}.$$

The growth rate  $\lambda$  comes from the doubling time of class I:

$$\lambda = \frac{\ln 2}{t_d}.$$

So the doubling time gives us  $\beta$ .

## SEAIHRD Epidemic Model – March 2020 Scenario



transition rates, probabilities, transmission rates

## SEAIHRD Transmission Details (March 2020)



$$X = f_c c_i I + \delta [(1 - c_i)I + f_a A] \quad (4)$$

- ▶  $c_i$  is the fraction of confirmed cases for symptomatic infectives.<sup>1</sup>
- ▶  $f_c$  and  $f_a$  are the infectivities of confirmed and asymptomatic cases, relative to an unconfirmed symptomatic infective.
- ▶  $\delta$  is a ‘contact factor’ that incorporates physical distancing and mask use for unconfirmed cases.

<sup>1</sup>There was no testing of asymptomatic people in spring 2020.

## Transition Rate and Infectivity Parameters

- ▶  $\eta, \alpha, \gamma, \sigma, \nu$  are the reciprocals of the mean durations for classes E, A,  $I_1$ ,  $I_2$ , and  $H$ .
- ▶ Best estimates from data for these times are
  - 5 days for incubation
  - 8 days for asymptomatic infectiousness
  - 10 days for symptomatic infectiousness
  - 6 days for transition to hospitalization
  - 8 days for hospitalization
- ▶ Best estimate for infectivity of asymptomatics is  $f_a = 0.75$ .

## Probability Parameters

- ▶ An antibody study of a random sample of people estimated about 40% of asymptomatic cases, so  $p = 0.4$ .
- ▶ About 25% of hospitalized patients died, so  $m = 0.25$ .
- ▶ There is no direct data for the fraction of patients who required hospitalization.
  - One study estimated that roughly 1 of 11 total cases was confirmed by testing (counting both asymptomatic and untested symptomatics), with 12% of confirmed cases leading to hospitalization.
  - From this data, we can estimate that about 1.8% of symptomatic cases required hospitalization, so  $q = 0.018$ .
- ▶ The combination  $q = 0.018$  and  $m = 0.25$  results in a fatality rate of just under 0.5%, which would be 1.6M Americans, assuming everyone gets infected and there is no treatment.

## $\beta$ and Initial Conditions (and $\mathcal{R}_0$ )

Assume exponential phase at start with hospitalization fraction  $H_0$ .

$$\frac{dE}{dt} = \beta S_0 X S - \eta E, \quad E(0) = e_0 H_0; \quad (5)$$

$$\frac{dA}{dt} = p\eta E - \alpha A, \quad A(0) = a_0 H_0; \quad (6)$$

$$\frac{dl_1}{dt} = (1 - p - q)\eta E - \gamma l_1, \quad l_1(0) = i_{10} H_0; \quad (7)$$

$$\frac{dl_2}{dt} = q\eta E - \sigma l_2, \quad l_2(0) = i_{20} H_0; \quad (8)$$

$$\frac{dH}{dt} = \sigma l_2 - \nu H, \quad H(0) = H_0; \quad (9)$$

$$X = I + f_a A \quad (10)$$

## $\beta$ and Initial Conditions (and $\mathcal{R}_0$ )

- ▶ Unknowns  $\beta$ ,  $e_0$ ,  $a_0$ ,  $i_{10}$ ,  $i_{20}$  can be given in terms of  $\lambda$  and the other parameters.
- ▶ A history of estimates for  $\mathcal{R}_0$ :
  - December 2019: Published value of  $\mathcal{R}_0 = 2.6$  based on statistical analysis of data from China.
  - January 2020 through March 2020: Numerous published values, most between 2.5 and 3.5, but one over 5.
  - April 8, 2020: Value  $\mathcal{R}_0 = 5.0$  published on UNL COVID modeling web page and used in teaching modules for Math 203 and elsewhere. Based on hospitalization data from New York City.
  - July 2020: ‘Definitive’ result  $\mathcal{R}_0 = 5.7$  published by Los Alamos research group (Sanche et al — similar method to mine, but better data).

## Public Health Parameters

- ▶ The public health parameters are difficult to estimate and highly variable.
- ▶ The testing fraction for symptomatic patients  $c_i$  was probably in the range 0.1 to 0.6. This parameter is a good choice for a parameter study showing the impact of testing.
- ▶ The infectivity of isolation can only be guessed. I use  $f_c = 0.1$ .
- ▶ The contact factor  $\delta$  is another good choice for a parameter study. Cell phone data suggests values from 0.2 to 0.6.

## Some Conclusions

- ▶ Looking at data in different ways can yield insights that you might have missed.
- ▶ 'Nobody believes a model except the person who created it; everyone believes data except the person who collected it.'<sup>2</sup>
  - We should be equally sceptical of models and data.
- ▶ It is often easier to measure a parameter by its effect than by direct measurement.
- ▶ If you get bad results from a good model, then at least one parameter value is wrong.

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<sup>2</sup>Paraphrase of a quotation from Albert Einstein.