SMDS Final Project

Covid-19 case study, Veneto's ICUs

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Introduction

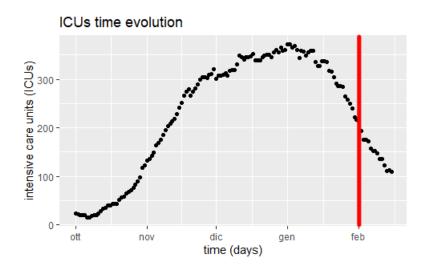
- This project aims to study the trend of the intensive care units (ICUs) in Veneto during the Covid-19 Second Wave, in particular during the period from October 1st 2020 to February 1st 2021, in order to obtain a model able to reproduce the dynamics of the number of ICUs.
- The intended outcome is to predict the total number of occupied ICUs over a 1-2 week period to ideally try to provide a useful tool for the healthcare professionals to optimally allocate the available units.
- In this process, we have deployed different techniques learned during the course and tried different approaches to the problem from standard linear models to generalized linear models (GLM) and time-series models like ARIMA, an Auto-Regression(AR) and Moving Average(MA) model.

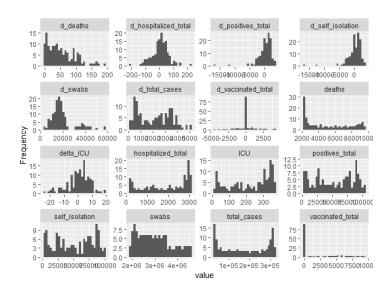
The Dataset

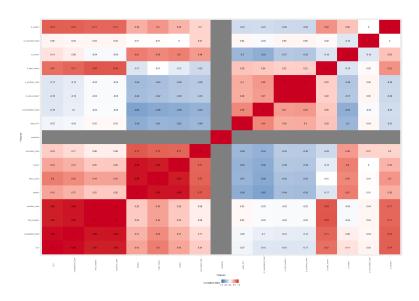
We merged different datasets coming from three different sources. We filtered it for the period of interest, we dropped columns carrying many missing values and we took also the differences of each variable, to allow us modelling them in addition to their levels.

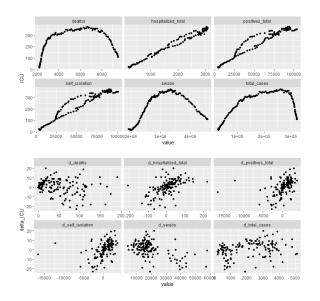
```
tibble (696 \times 19) (S3: tbl df/tbl/data.frame)
                      : Date[1:696], format: "2020-02-24" "2020-02-25" "2020-02-26" "2020-02-27"
S date
S TCII
                      : num [1:696] 4 7 8 8 9 11 13 14 19 23 ...
$ hospitalized total : num [1:696] 16 19 24 27 33 35 64 67 68 99 ...
$ self isolation
                      : num [1:696] 16 23 45 82 116 154 197 204 229 246 ...
$ positives total
                            [1:696] 32 42 69 109 149 189 261 271 297 345 ...
$ total cases
                            [1:696] 33 43 71 111 151 191 263 273 307 360 ...
$ swabs
                            [1:696] 2200 3780 4900 6164 7414 ...
 vaccinated total
$ residents
                            [1:696] 4879133 4879133 4879133 4879133 ...
$ days
$ delta ICU
$ d hospitalized total: num [1:696] 16 3 5
$ d self isolation : num
$ d positives total
$ d total cases
$ d swabs
  d vaccinated total : num [1:696] 0 0 0 0 0 0 0 0 0 ...
  d deaths
                      : num [1:696] 1 0 1 0 0 0 0 0 1 3 ...
```

Sources: • COVID-19 Data • Vaccines data • ISTAT Data









Feature engineering

- We split the dataset into two chunks in order to train our different models on the first one and to test the prediction on the second to evaluate which are the pros and the cons of each model.
- Secondly, we set up also leave-one-out cross-validation (LOOCV) on the train data in order to make models' estimates more robust.
- After these passages, we tried different transformations for the three families of models and their supposed predictors such as:
 - Different lags (e.g. from 1 to 15 days) on some regressors.
 - Different degrees of orthogonal polynomials (poly function).
 - Natural logarithm and base 10-logarithm.
 - Centering and rescaling of some/all variables.
 - Normalization of some covariates.
 - Other...
- Moreover, we evaluated the inclusion of the interaction terms between the different variables.

Linear models

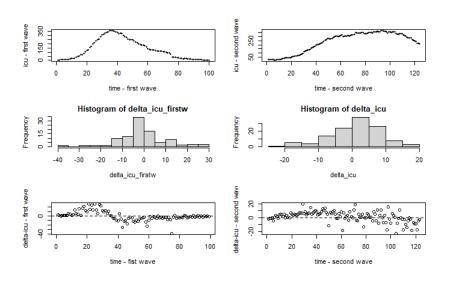
We started our modeling part from the simplest family of models: the linear regression models (LMs). We performed a series of differences regressions, using mainly two approaches:

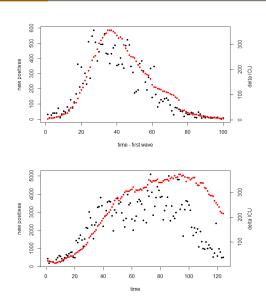
- A "direct modeling", which means we tried to formulate the most parsimonious model possible via a top-down approach including all the variables which are deemed to be the fundamental ones, by common sense.
- A "data-driven" one, where the discovery of the predictors to include
 is fully left to a process which encompasses first a manual backward/forward selection of single predictors based on ANOVA F-tests
 and the p-values of each predictor; then a second step aiming at selecting the best combination of predictors (i.e. a model) structured
 on another automatic backward/forward and bi-directional selection,
 grounded in their AIC value.

We consider a variable transformation, given by the daily difference of the ICU patients. We analyze:

- the first wave to identify characteristics of the phenomenon that support the modeling of the second wave.
- the trend of the variables that can reasonably be considered as lagged predictors of the evolution of the ICU curve. The biological phenomenon evolves in fact, from the onset of symptoms to hospitalization and finally to critical ICU conditions (at least for most part of ICU patients). The number of new positives provides then information on the assumption of stationarity.

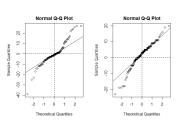
What we want to do is basically to model a stationary phenomenon for the period of the extrapolation.

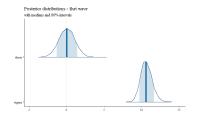




The first wave supports the idea of using the new positives to control for the stationarity of the ICU curve. The data also show similarities between the first and the second wave.

We also tried to model Δ ICU with a probability distribution. The normal approximation provided reasonable results except for the tails. We estimated a posterior distribution using Rstan with a normal distribution, which suggests a mean approximately equal to zero.



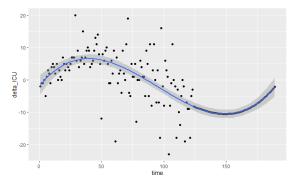


Supported by the experimental findings, we decided to model the stationary wave using a polynomial of order 3:

- the 3 roots allow to model the basic wave behaviour but also to control a potentially asymmetric shape of the descending phase of the curve.
- higher order degrees didn't provide better results.

In order to model the entire wave, we need to estimate the end of the descending phase. Data are especially noisy around the peak, so we use a moving average to estimate the peak which is set at $\Delta t = 95$ from the start of the period of interest. The end of the descending phase consequently falls at t_peak+95 days.

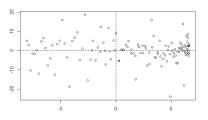
The graphical representation of the stationary second wave is reported below



Despite the simplicity of the model, the residuals plot and the summary of the model provide indications of reasonable results. The results will be commented further at the end of the presentation, in comparison with the other models. Here we provide just a quick overview.

The experiment with the direct modeling, which used just the time variable, provided also evidence of the importance of this variable for the more complex models, as well as for first difference of the ICU data.

```
lm(formula = delta icu extr ~ polv(index extr. 3. raw = TRUE).
   data = delta_icu_extr_df)
Residuals:
              10 Median
-23.9174 -2.4877 0.2343 3.0176 18.7902
Coefficients:
                                 Estimate Std. Error t value Pr(>|t|)
                                -1.876e+00 2.067e+00 -0.907 0.366
(Intercept)
poly(index_extr, 3, raw = TRUE)1 4.667e-01 1.059e-01 4.407 2.30e-05 ***
poly(index_extr, 3, raw = TRUE)2 -7.420e-03 1.441e-03 -5.149 1.04e-06 ***
poly(index_extr, 3, raw = TRUE)3 2.615e-05 5.546e-06 4.716 6.55e-06 ***
Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
Residual standard error: 6.511 on 120 degrees of freedom
Multiple R-squared: 0.3264, Adjusted R-squared: 0.3096
F-statistic: 19.39 on 3 and 120 DF, p-value: 2.574e-10
```



Coming to the second approach, the first step was defining which would be the probable predictors of our linear model starting from a wide list composed by the original predictors, their transformed versions and all the possible interactions among them (many hundreds). We report here just an example of the many different takes we tried, performing an ANOVA(F-Test)-based backward/forward selection of single predictors, dropping those with lesser significant p-value.

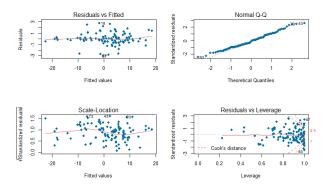
```
delta ICU ~ residents + d hospitalized total + d self isolation +
   d positives total + d total cases + d swabs + d vaccinated total +
   lag 1 d swabs + days ns 1 + days ns 2 + days ns 3
                    Df Sum of So RSS AIC F value Pr(>F)
                                 4561.0 464.41
                          0.000 4561.0 464.41
d hospitalized total 0
d positives total
d total cases
d swahs
                          76.557 4637.6 464.46 1.8967 0.171169
d vaccinated total 1
lag 1 d swabs
                     1 171,975 4733,0 466,97 4,2607 0,041293
days ns 1
days ns 2
                          2.026 4563.0 462.47 0.0502 0.823120
days ns 3
```

Once selected some promising predictor-candidates, a second layer has been the adoption of an automatic algorithm for model backward / forward / bidirectional selection, based on the Akaike information criterion (AIC): the routine stopped when finding the sequence of predictors with the lowest AIC among all possible combinations, here below again a glimpse into our attempts:

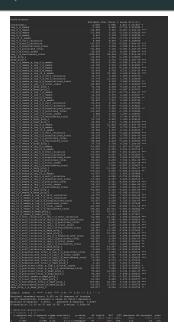
```
tep: AIC-469.66
                               0.686 4328.9 467.68
                              12.302 4340.5 468.00
                                      4328.2 469.66
```

```
Step: AIC=448.93
                              267.95 4868.9 453.67
   days ns 3, data - veneto train preprocessed lm)
             10 Median
lag 3 d positives total -3.467e-02 1.358e-02 -2.554 0.0120 *
```

Eventually, we settled for this model given the overall very good level of fit testified by the low AIC, the high adjusted R-squared and the significance of the F-test. Anyway are already apparent: a possible problem with the interpretation of predictors (in particular the interactions), the very high number of predictors which poses many challenges in the prediction phase, even when using a simple polynomial fit, and the high risk of overfitting.







GLM Poisson

- The second family of models we decided to adopt are the Poisson Generalized Linear Models (GLMs) with canonical (log) link: now our response variable (ICUs) is taken in levels as this kind of model is often used to represent count data.
- This time, the choice of predictors was based on an ANOVA step-wise selection based on the drop in deviance by means of a Chi-square test. Chi-square distribution was used here, since regular Poisson regression does not require the estimation of a dispersion parameter.
- The parameters selected were the natural cubic spline of time, the natural log of cumulative number of lagged (1 day) swabs and their interactions plus the log of lagged (1 day) self-isolation, so to keep a quite parsimonious approach, in line with the results of [1].

GLM Poisson

We settled for this model, which is a compromise between the use of few reasonable predictors and a quite good fit even if with a slightly higher AIC compared with other models tried, to try avoiding the risk of overfitting.

```
data = data)
Deviance Residuals:
                                          Max
-1.24174 -0.30504 -0.00793 0.33501 1.15213
                      Estimate Std. Error z value Pr(>|z|)
                                 2.81438 -0.922 0.35643
lag 1 self isolation 0.13344
                                 0.09007 1.481 0.13848
lag_1_swabs
                                 1.58453 -2.042 0.04119 *
days ns 1
                                 2.28079 2.365 0.01802 *
days ns 2
                      15.38331
                                 5.21555 2.950 0.00318 **
days ns 3
                                 1.34376 1.974 0.04837 *
lag 1 swabs x days ns 1 3.59382
                                 1.33073 2.701 0.00692 **
lag 1 swabs x days ns 2 5.48245
                                 2.25363 2.433 0.01499 *
lag 1 swabs x days ns 3 2.15425
                                 1.21019 1.780 0.07506 .
Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
(Dispersion parameter for poisson family taken to be 1)
   Null deviance: 9846.924 on 122 degrees of freedom
Residual deviance: 25.525 on 114 degrees of freedom
(1 osservazione eliminata a causa di un valore mancante)
AIC: 907.76
Number of Fisher Scoring iterations: 4
 null.deviance df.null logLik AIC BIC deviance df.residual nobs
                              908. 933.
```

GLM Poisson with offset

Trying to generalize the results of this model along possibly diverse regions and time frames (i.e. at different times, population count is different), we introduced as an offset term the natural log of the most recent number of Veneto's residents available [Istat], with respect to our period of interest. Consequently, there is a change in the intercept coefficient here reported:

```
stats::qlm(formula = ICU ~ . - residents, family = stats::poisson(link = "loq"),
Deviance Residuals:
                       Estimate Std. Error z value Pr(>|z|)
lag 1 self isolation 0.13344
lag 1 swabs
                                  1.58453 -2.042 0.04119 *
days ns 1
                      15.38331
                                  5.21555 2.950 0.00318 **
                                  1.34376 1.974 0.04837
lag 1 swabs x days ns 1 3.59382
lag 1 swabs x days ns 2 5.48245
                                  2.25363 2.433 0.01499
lag 1 swabs x days ns 3 2.15425
                                          1.780 0.07506 .
Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
(Dispersion parameter for poisson family taken to be 1)
   Null deviance: 9846.924 on 122 degrees of freedom
Residual deviance: 25.525 on 114 degrees of freedom
(1 osservazione eliminata a causa di un valore mancante)
ATC: 907.76
Number of Fisher Scoring iterations: 4
 null.deviance df.null logLik AIC BIC deviance df.residual nobs
                                            25.5
```

GLM Quasi-Poisson with offset

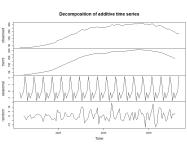
As a final improvement to our GLM, we opted for a Quasi-Poisson version of the model, keeping the same predictors and the offset as before. This is a remedy to the underdispersion we noticed in the previous models' summaries. The overall outcome is a better fit along all predictors.

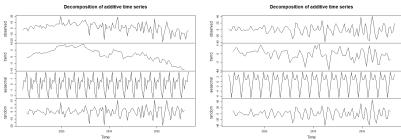
```
stats::glm(formula = ICU ~ . - residents, family = stats::guasipoisson(link = "log")
   data - veneto train preprocessed glm pois, offset - log(residents))
Deviance Residuals:
-1.24174 -0.30504 -0.00793 0.33501
                       Estimate Std. Error t value Pr(>|t|)
                      -17.99585
                                   1.32775 -13.554 < 2e-16 ***
lag 1 swabs
                                   0.74754 -4.327 3.25e-05 ***
days ns 1
                                 1.07601 5.013 1.98e-06 ***
days ns 2
                       15.38331
                                 2.46055 6.252 7.26e-09 ***
days ns 3
                                 0.63395 4.184 5.64e-05 ***
lag 1 swabs x days ns 1 3.59382
                                 0.62780 5.724 8.54e-08 ***
lag 1 swabs x days ns 2 5.48245 1.06320 5.157 1.07e-06 ***
lag 1 swabs x days ns 3 2.15425
(Dispersion parameter for quasipoisson family taken to be 0.2225689)
   Null deviance: 9846.924 on 122 degrees of freedom
Residual deviance: 25.525 on 114 degrees of freedom
 (1 osservazione eliminata a causa di un valore mancante)
ATC: NA
Number of Fisher Scoring iterations: 4
 null.deviance df.null logLik AIC BIC deviance df.residual nobs
```

ARIMA

- The last family of models we used is the ARIMA one, a special type of regression model in which the dependent variable has been stationarized and the independent variables are all lags of the dependent variable and/or lags of the errors.
- This seems to us a natural solution to address the problem we are investigating, as its nature is that of a typical timeseries and this method allows us to be both effective and more parsimonious in our choice of covariates, as just the response variable and time are strictly necessary.
- As a first step, we need to plot the characteristics of our time series along three different dimensions which are namely trend, seasonality and random behaviour to check for potential non-stationarity of our time-series.

ARIMA





ARIMA

 As you can see from the previous slide, we need to differentiate the series at least two times to have an approximately stationary series.

```
Augmented Dickey-Fuller Test
data:
Dickey-Fuller = -8.5345, Lag order = 0, p-value = 0.01
alternative hypothesis: stationary
```

```
KPSS Test for Level Stationarity

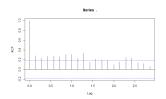
data:

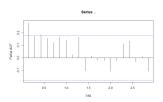
RFSS level = 0.092732, Truncation lag parameter = 4, p-value = 0.1

Warning message:

Rts testicalippointest(,) : p-value greater than printed p-value
```

 Now we can focus on understanding which are the best parameters to feed our model, in particular the p-order and q-order of non seasonal auto-regressive (NSAR) and moving average (NSMA) respectively.





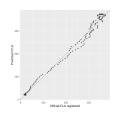
• On the left side we plot the auto-correlation function to help us choosing the q-parameter, while on the right side we have partial auto-correlation to provide hints on the value of p.

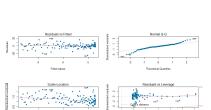
ARIMA: 2 different approaches

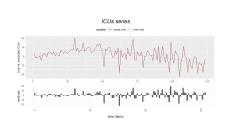
From the previous qualitative considerations, we ended up deciding to set a first ARIMA model with p=6, d=2, q=2, in short ARIMA(6,2,2). Here below the results of model fitting:

To compare and contrast the previous findings, we also adopted a
parameters' automatic tuning approach, by means of the auto.arima
function. The ending result is the following ARIMA(1,2,2) model,
which slightly improves the AIC of the fit:

Results: LM in sample

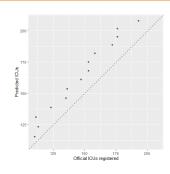


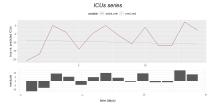




LM Train Error Table transf_metrics real_metrics			
rsq	0.323	0.985	
mae	4.47	12.05	
mape	170	7.55%	
mase	0.668	1.945	
smape	96.66%	7.28%	

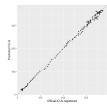
Results: LM out-of-sample

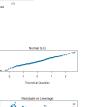


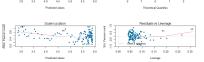


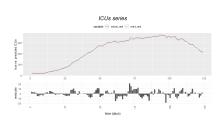
LM Test Error Table					
transf_metrics real_metrics					
rmse	6.87	16.89			
rsq	0.152	0.977			
mae	5.71	15.86			
mape	-	11.31%			
mase	0.762	2.337			
smape	89.69%	10.30%			

Results: GLM Poisson in sample



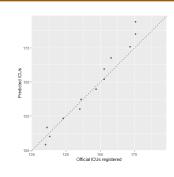


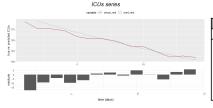




GLM Poisson Train Error Table					
transf_metrics real_metrics					
rmse	0.06	6.39			
rsq	0.995	0.997			
mae	0.04	4.95			
mape	0.92%	3.67%			
mase	0.888	0.795			
smape 0.92% 3.60%					

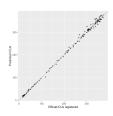
Results: GLM Poisson out-of-sample

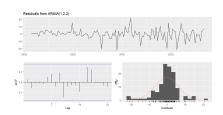


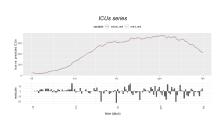


GLM Poisson Test Error Table						
trans	transf_metrics real_metrics					
rmse	0.044	7.15				
rsq	0.970	0.969				
mae	0.04	5.48				
mape	0.73%	3.69%				
mase	0.861	0.940				
smape	0.73%	3.63%				

Results: ARIMA in sample

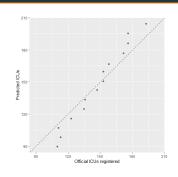


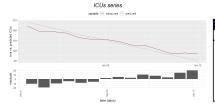




ARIMA Train Error Table			
transf_metrics real_metrics			
rmse		6.59	
rsq	2	0.997	
mae		4.59	
mape		3.07%	
mase	-	0.740	
smape	-	3.14%	

Results: ARIMA out-of-sample





ARIMA Test Error Table				
transf_metrics real_metrics				
rmse	-	10.62		
rsq		0.978		
mae	17	9.05		
mape	(2)	6.44%		
mase	-	1.353		
smape	-	6.59%		

Conclusions

As expected, one of the main results coming from this experiment is that each model offers some pros and some cons. In short, for LMs we appreciate the simplicity of their formulation which provides a deeper understanding of the model for the end user, and eases the communication of its results. On the downside, it yields to slightly higher errors of prediction producing less reliable estimates.

	LM Test Error Table	GLM Test Error Table	ARIMA Test Error Table		
	real_metrics	real_metrics	real_metrics		
rmse	16.89	7.15	10.62		
rsq	0.977	0.969	0.978		
mae	15.86	5.48	9.05		
mape	11.314%	3.691%	6.442%		
mase	2.337	0.940	1.353		
smape	10.299%	3.629%	6.600%		

For the GLMs here analysed, we value their overall higher quality of prediction out-of-sample, and their design which favours their re-usability in different contexts. On the other hand, the interpretation of some covariates' interactions may be more difficult to explain and, it seems to us that the benefit of adding further features may have a somewhat limited upside in performance. Finally, ARIMAs bring a different framework where we do not need to predict other covariates (or lag existing ones) to formulate a prediction, leading anyway to satisfying results; as for GLM, there may arise some issues related to its interpretability due to its intrinsic bootstrapping nature in prediction.

Table of predictions - ICUs values

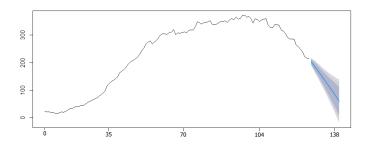
Below you can find the forward predictions for Veneto's ICUs on the period starting from February, 2nd to February 15, 2021: on the left we present the point estimates for one of our 2 models of choice (ARIMA) and, moving to the right, the respective upper and lower bounds for increasing confidence intervals (80%, 90%, 95%).

Dates	Point Forecast	Lower 80%	Higher 80%	Lower 90%	Higher 90%	Lower 95%	Higher 95%
02/02/2021	204	195	213	192	215	190	217
03/02/2021	193	180	206	177	209	174	212
04/02/2021	183	167	198	163	202	159	206
05/02/2021	171	154	189	149	194	144	199
06/02/2021	160	140	181	135	186	130	191
07/02/2021	150	127	172	120	179	115	184
08/02/2021	139	113	164	106	171	100	178
09/02/2021	127	99	156	91	164	84	171
10/02/2021	116	84	148	75	157	67	165
11/02/2021	105	69	141	59	151	50	160
12/02/2021	93	54	133	42	144	33	154
13/02/2021	82	38	126	25	139	14	149
14/02/2021	70	22	119	8	133	0	145
15/02/2021	59	5	112	0	128	0	141

Note that a floor of zero has been put for negative predictions (highlighted).

Table of predictions - a visual interpretation

Finally, we provide a qualitative plot to allow appreciating the 3 different prediction-ranges along with point predictions: it is easy to notice that for increasing confidence levels (i.e. from 80% to 95%) the prediction bands become larger; secondly, the more time passes, the further we move out-of-sample so we get bands increasingly larger (less precise estimates). All this suggests that for a higher precision it would be better to re-fit model frequently and focus on shorter term predictions (e.g. 1-4 days).



References

- [1] https://www.proquest.com/docview/2528274421
- [2] https://statgroup-19.blogspot.com/2020/03/why-go-for-poisson-regression-and-not.html?m=0
- [3] https://onlinelibrary.wiley.com/doi/10.1002/bimj.202000189
- [4] https://github.com/ImperialCollegeLondon/covid19model/blob/master/Technical_description_of_Imperial_COVID_19_Model.pdf
- [5] https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30627-9/fulltext
- [6] https://www.mdpi.com/2075-4426/11/5/343