

SIR vs SEIRD: Disease Transmission

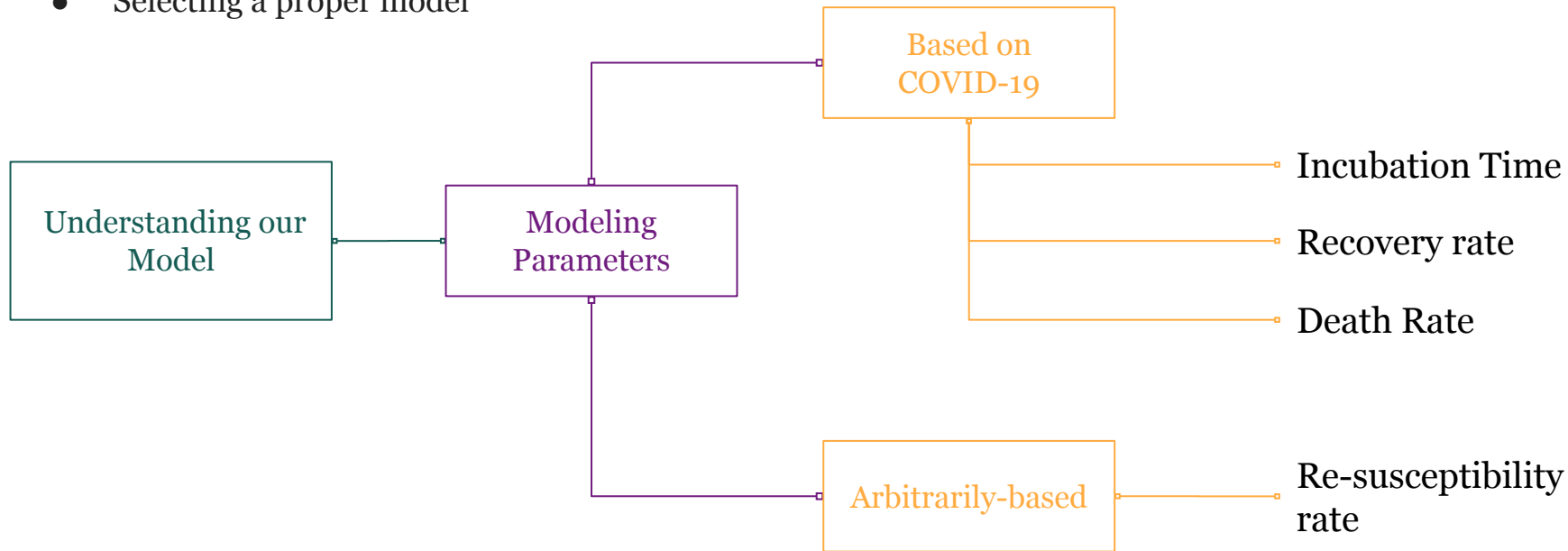
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What are the key differences between the SIR and SEIRD models for disease transmission, particularly in how they differ in predicting the time and intensity of a secondary wave, when fit to the same first wave, across a range of infectivity values?

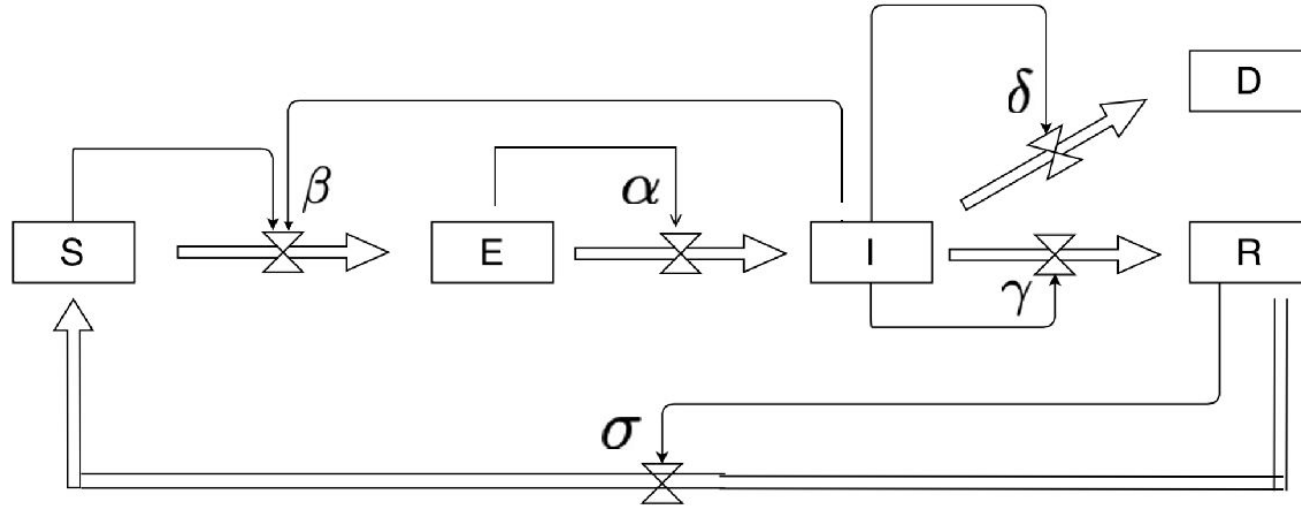
What makes it interesting and important?

Explanatory Question

- Behaviour of different models
- Selecting a proper model



SEIRD Model



Stock and flow diagram

Update state Equations

$$S_{n+1} = S_n - \beta IS + \sigma R$$

$$E_{n+1} = E_n - \alpha E + \beta IS$$

$$I_{n+1} = I_n - \gamma I - \delta I + \alpha E$$

$$R_{n+1} = R_n - \sigma R + \gamma I$$

$$D_{n+1} = D_n + \delta I$$

S: Susceptible

E: Exposed

I: Infectious

R: Recovered

D: Dead

α : Incubation time

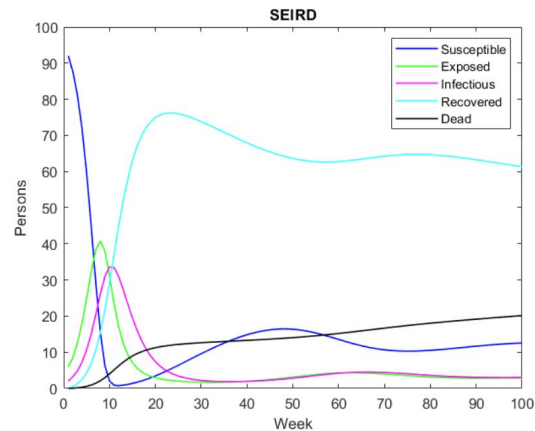
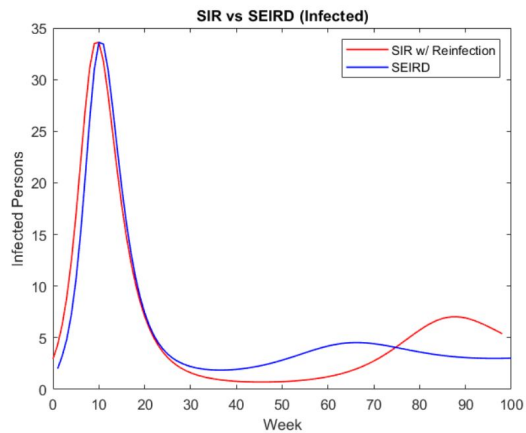
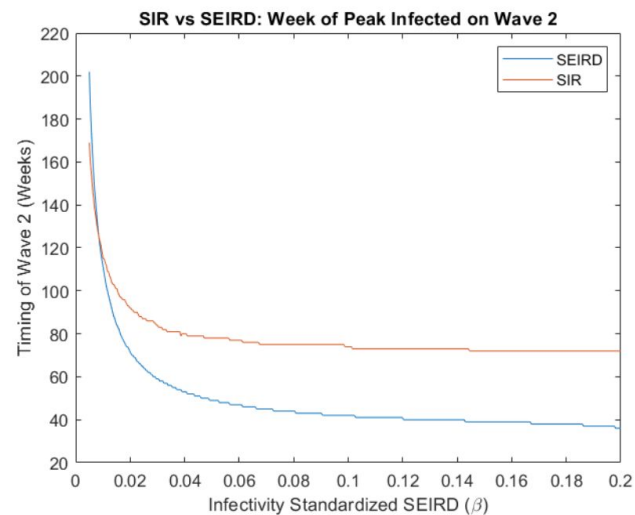
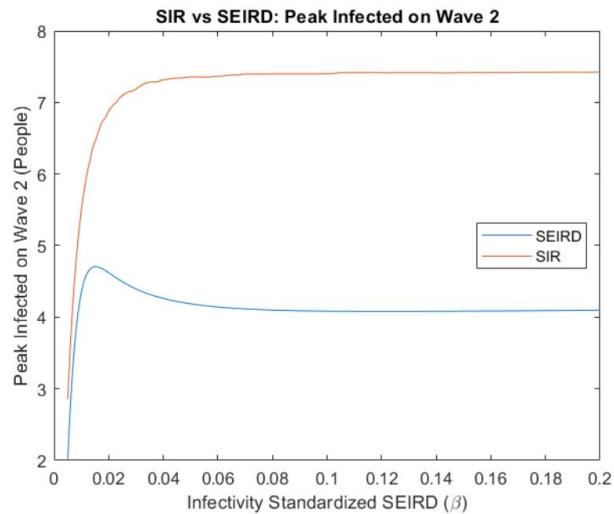
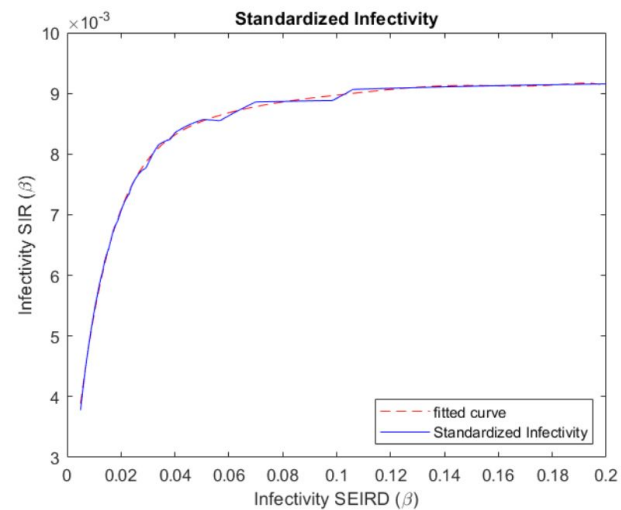
β : Infectivity

γ : Recovery

δ : Death

σ : Re-susceptibility

Results



Interpretation

Results:

- Divergence in intensity & time of the second wave due to the Exposed stock
- No change in trends without dead stock
- Making alpha larger makes the inclusion of the Exposed stock increasingly negligible

Limitations:

- Inaccuracies in the starting value of Exposed individuals
- The inability to line up the first waves perfectly horizontally

Next steps:

- Standardizing infectivity
- Running the model on a daily-basis