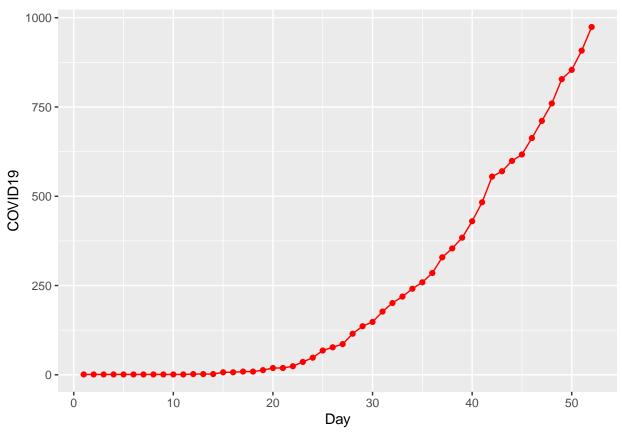
Suitability of the SIR Model to the Macedonian COVID-19 Epidemic

Stefan Petrevski

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To date, very few epidemiological models have been applied to the Macedonian epidemic of the novel coronavirus. Through the media, the general public has been informed of two main prediction. The first is due to the team of the Macedonian health minister, Dr. Venko Filipce, who has publicly announced that linear growth (rather than exponential) is to be expected throughout the outbreak, with a peak of 2000-2500 infections sometime in the next few months. The second prediction was made by the Macedonian Academy of Sciences and Arts (MANU), through the paper of Dr. Ljupco Kocarev (http://manu.edu.mk/wp-content/uploads/2020/04/%D0%9F%D1%80%D0%B8%D0%BB%D0%BE%D0%B3-%D0%B1%D1%80%D0%BE%D1%98-1.pdf). This analysis, conducted with data as of April 8th, 2020, predicted a maximum of 1100 cases somewhere in May.

```
library(ggplot2)
library(pomp)
## Welcome to pomp!
## As of version 2.7.1.0, important changes have been made to the
## default settings of the particle filtering algorithms in
## 'pfilter', 'mif2', 'pmcmc', 'bsmc2'.
## These changes are not backward compatible.
## See the package NEWS for the details.
##
## For information on upgrading your pomp version < 2 code, see the
## "pomp version 2 upgrade guide" at https://kingaa.github.io/pomp/.
library(plyr)
library(reshape2)
## Attaching package: 'reshape2'
## The following object is masked from 'package:pomp':
##
##
       melt
corona <- read.csv("macedoniadata.csv")</pre>
ggplot(corona,mapping=aes(x=Day,y=COVID19))+
  geom_line(color='red')+geom_point(color='red')
```



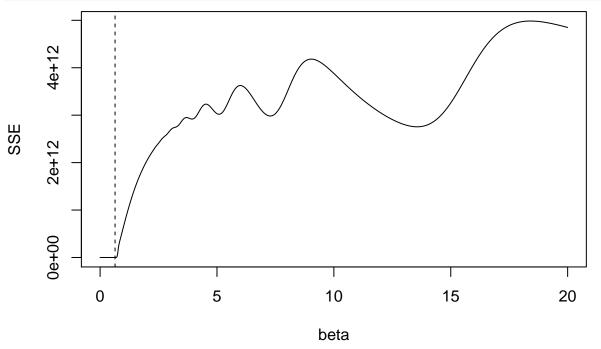
We will apply the SIR model to the epidemic. The reason for this is that it represents the simplest compartmental model - one which divides the population into separate groups which dynamically interact under a set of assumptions. The basic SIR model features three compartments: susceptible individuals (S), infected individuals (I), and individuals who are removed from the epidemic, either by death, immunity, or recovery (R). The usual main assumptions of the SIR model are as follows: 1. The total duration of the epidemic is short enough, so that the total number of individuals is constant. 2. Incubation periods are negligible. 3. Contracting the disease and then recovering results in immunity; it is impossible to contract the same disease twice. 4. The rate of new infections is proportional to the contacts between the infectives and susceptibles. 5. The rate of recovery/death of infectives occurs at a constant rate (i.e. there are no technological/healthcare breakthroughs or evolution of the disease that would increase/decrease this rate, respectively).

```
sse <- function (params) {
    x <- trajectory(coronaA,params=params)
    discrep <- x["I",,]-obs(coronaA)
    sum(discrep^2)
}

f1 <- function (beta) {
    params <- c(Beta=beta,gamma=0.5,N=20000000,S_0=1999999,I_0=1)
    sse(params)
}

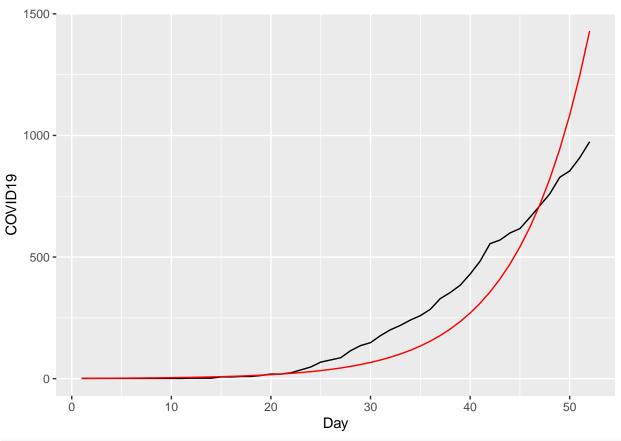
beta <- seq(from=0,to=20,by=0.01)
SSE <- sapply(beta,f1)

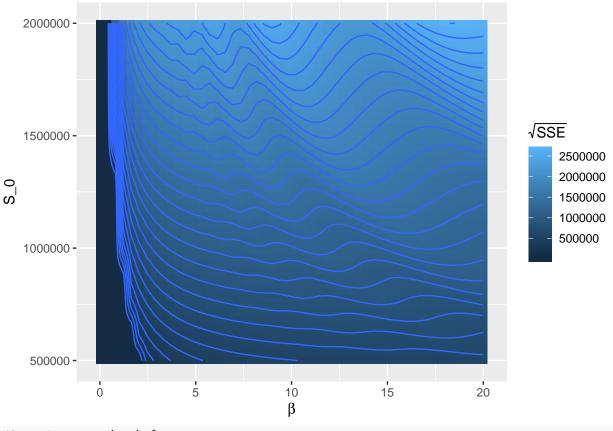
plot(beta,SSE,type='l')
beta.hat <- beta[which.min(SSE)]
abline(v=beta.hat,lty=2)</pre>
```



beta.hat

```
## [1] 0.64
```





```
f2 <- function (par) {
   params <- c(Beta=par[1],gamma=par[2],N=2000000,S_0=1999999,I_0=1)
   sse(params)
}
optim(fn=f2,par=c(0.01,0.1)) -> fit2
SSE2 <- sapply(beta,f2)
beta.tilde <- beta[which.min(SSE2)]
beta.tilde</pre>
```

numeric(0)