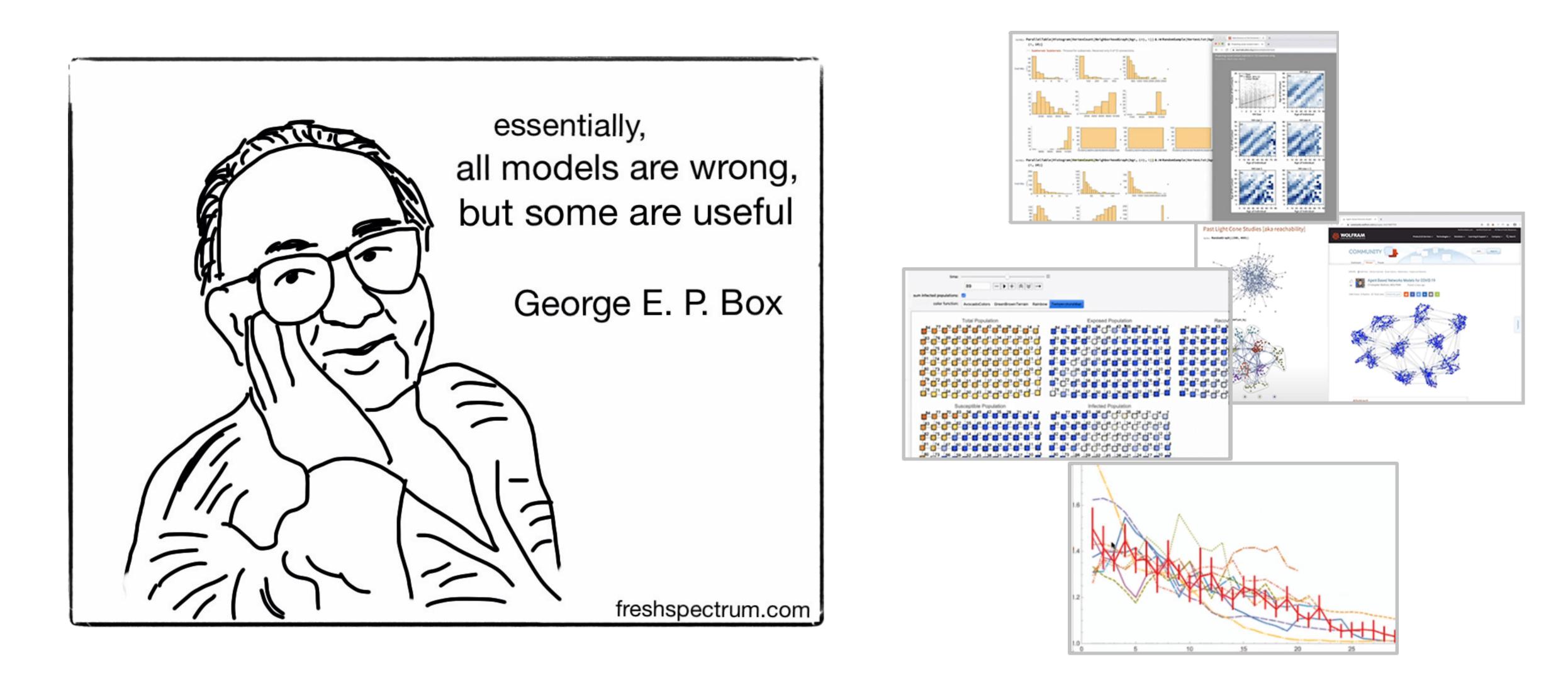
## Mathematical Epidemiology for ... just in case

#### Tomáš Rosa

Cryptology and Biometrics Competence Centre of Raiffeisen BANK International in Prague

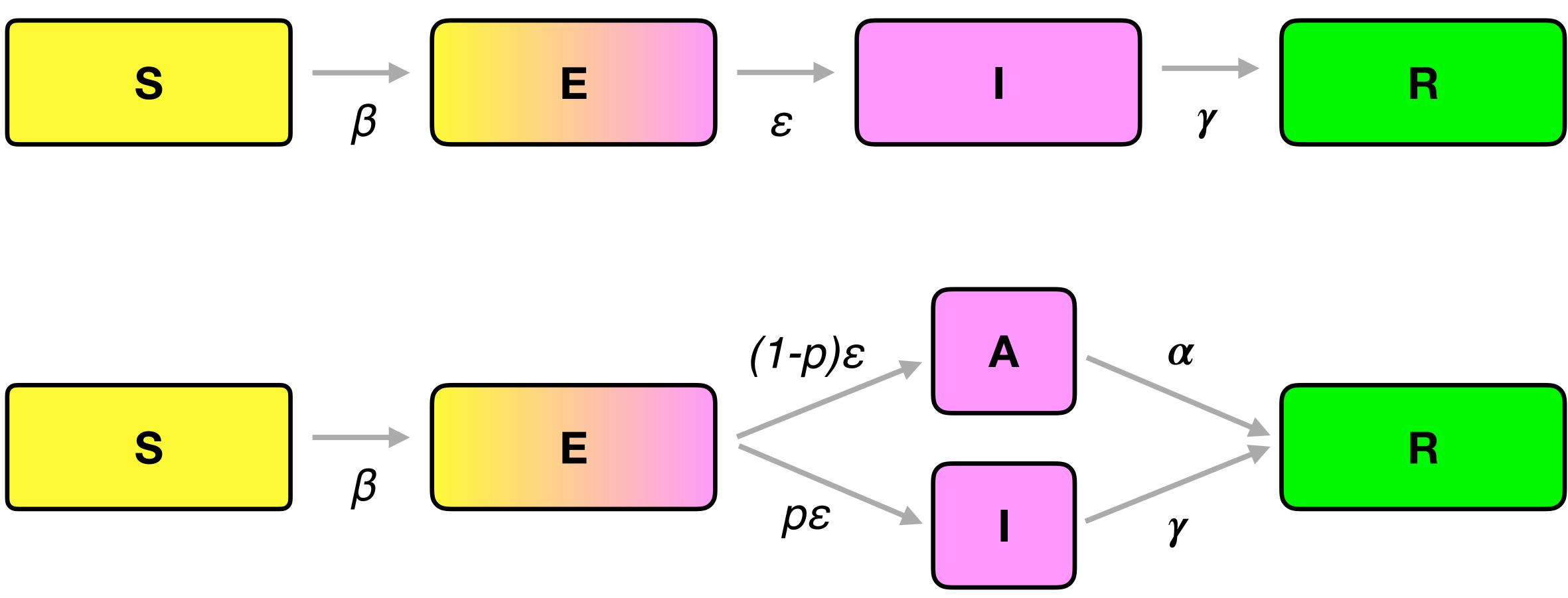
#### Have you said "modelling"?

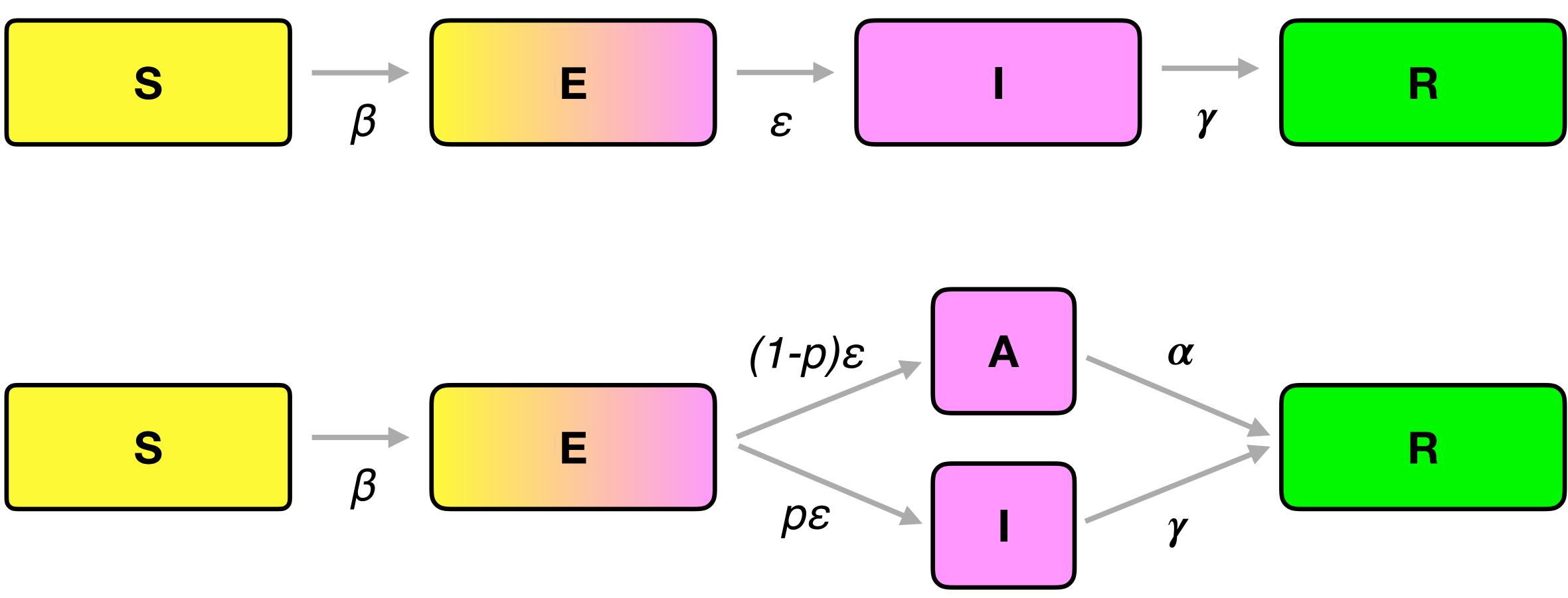


## SIR Compartmental Epidemic Model - based on Kermack-McKendrick theory since 1927

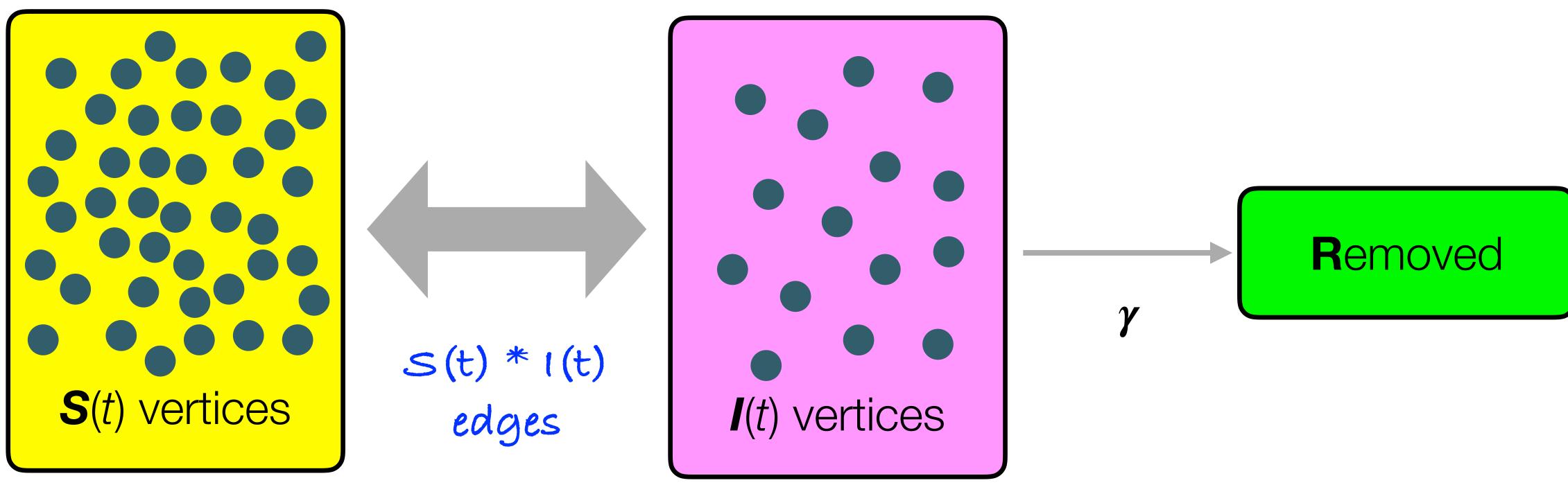


### Towards COVID-19 Quantitative Realities - SEIR and SEAIR





## SIR Compartmental Epidemic Model - zooming on the mass action mechanism

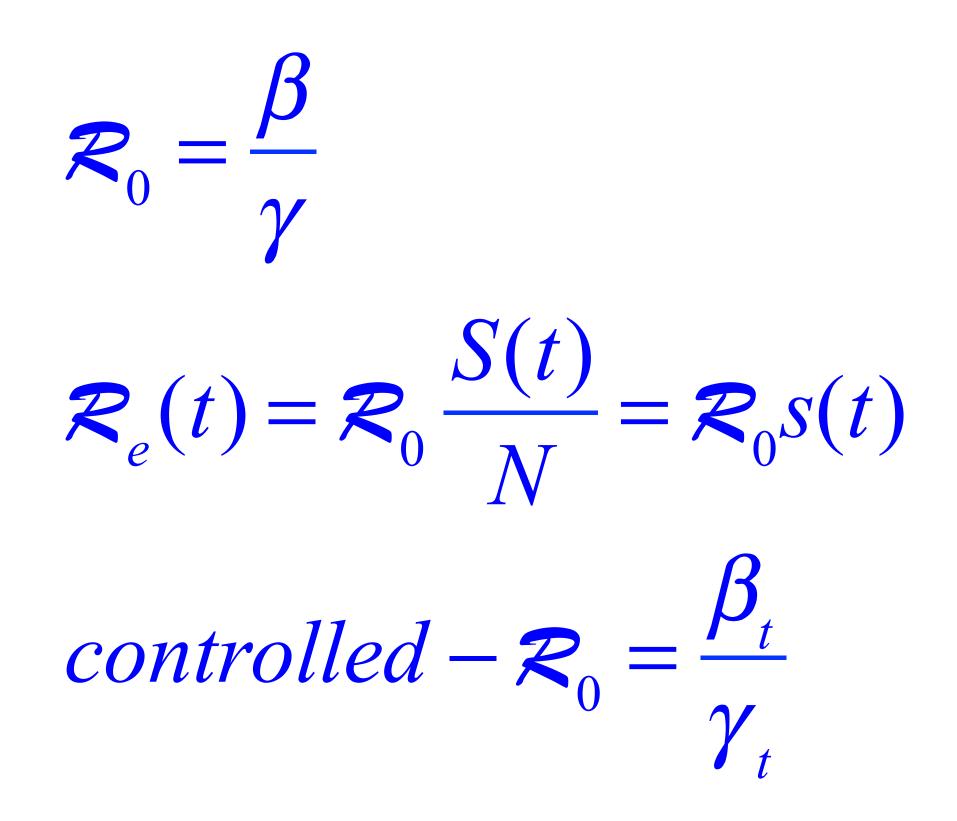


 $\frac{dS(t)}{dt} = -\frac{\beta}{N}I(t)S(t)$ 

 $\frac{dI(t)}{dt} = \frac{\beta}{N}I(t)S(t) - \gamma I(t)$ 

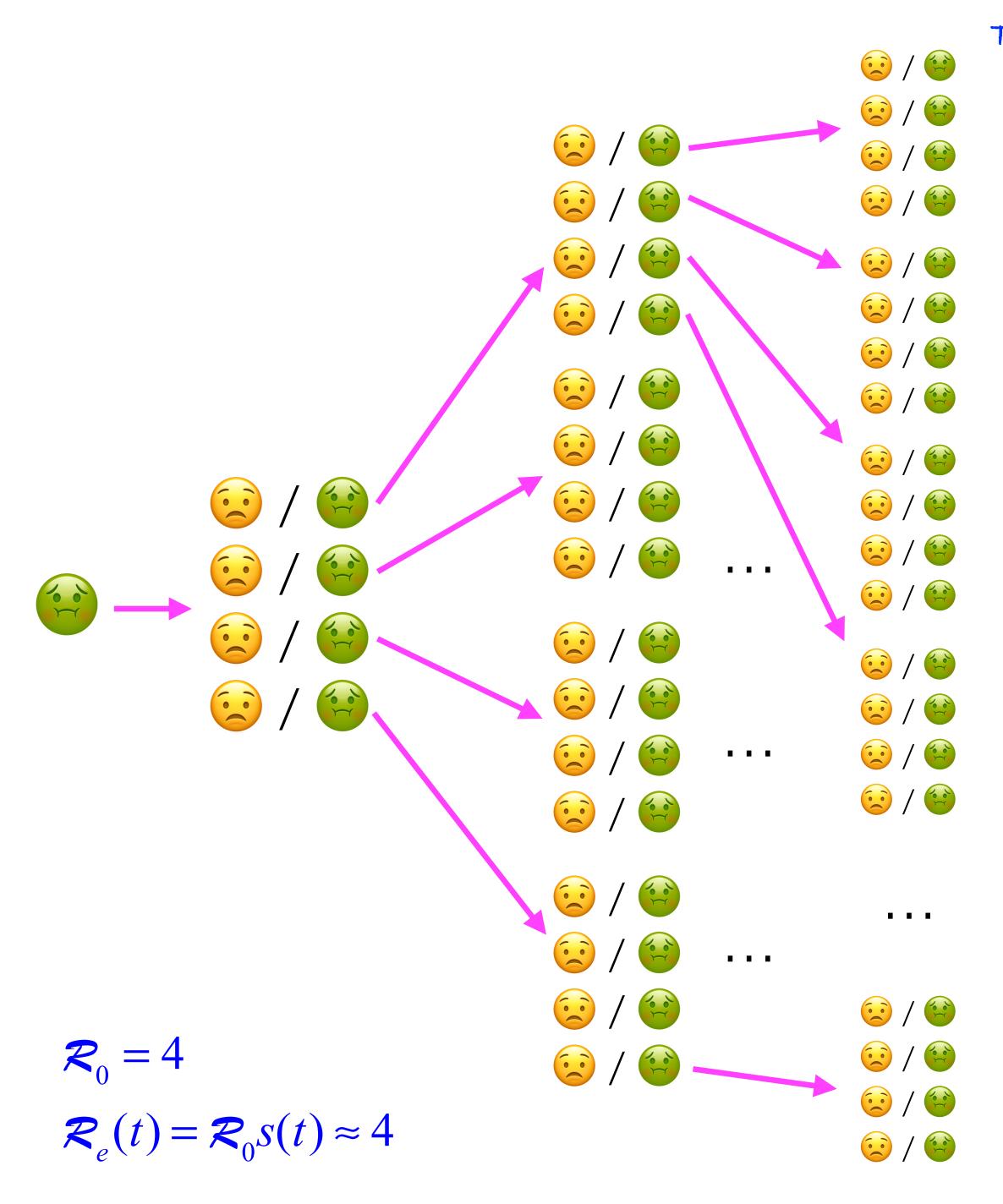


#### All Those "R"s

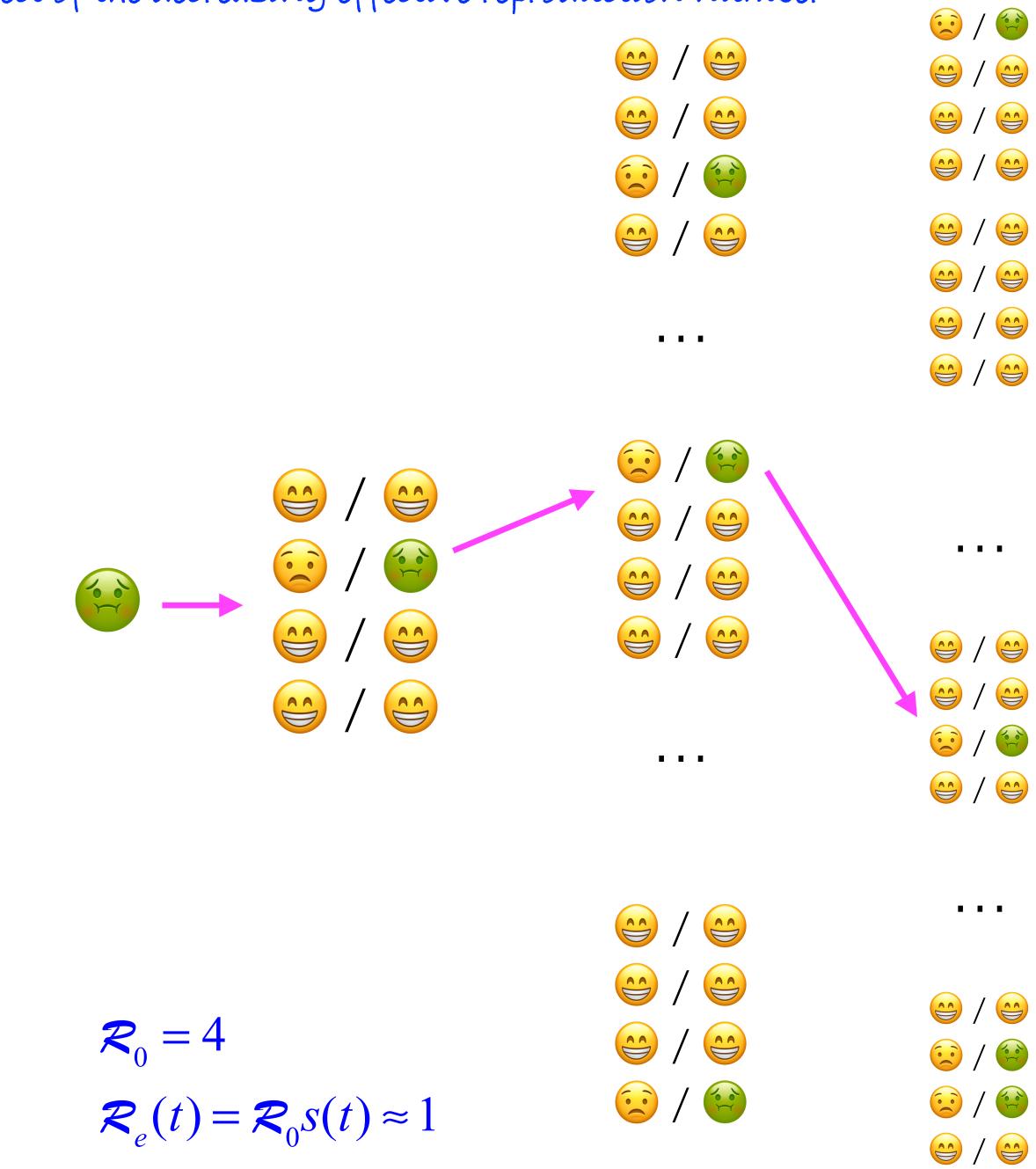


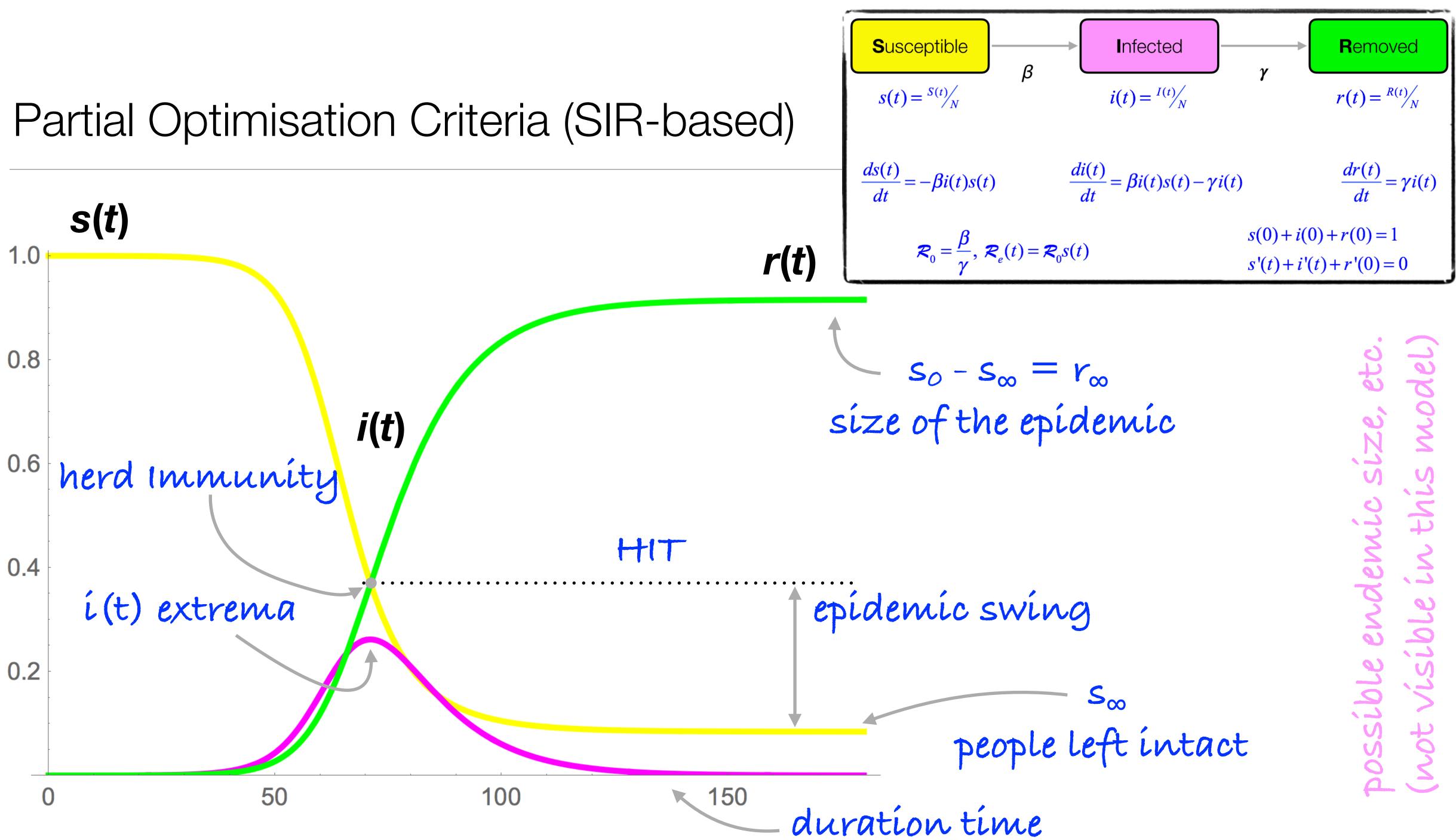
\*) In this particular model

- Basic reproduction number  $\mathbf{R}_0$ 
  - inherent model constant, describes important qualitative aspects, e.g. equilibria and their stability
- Effective reproduction number  $\mathbf{R}_{e}(t)$ 
  - what we observe in daily experience
- Controlled reproduction number  $\mathbf{R}_{0,t}$ 
  - what we aim for with our interventions



The effect of the decreasing effective reproduction number

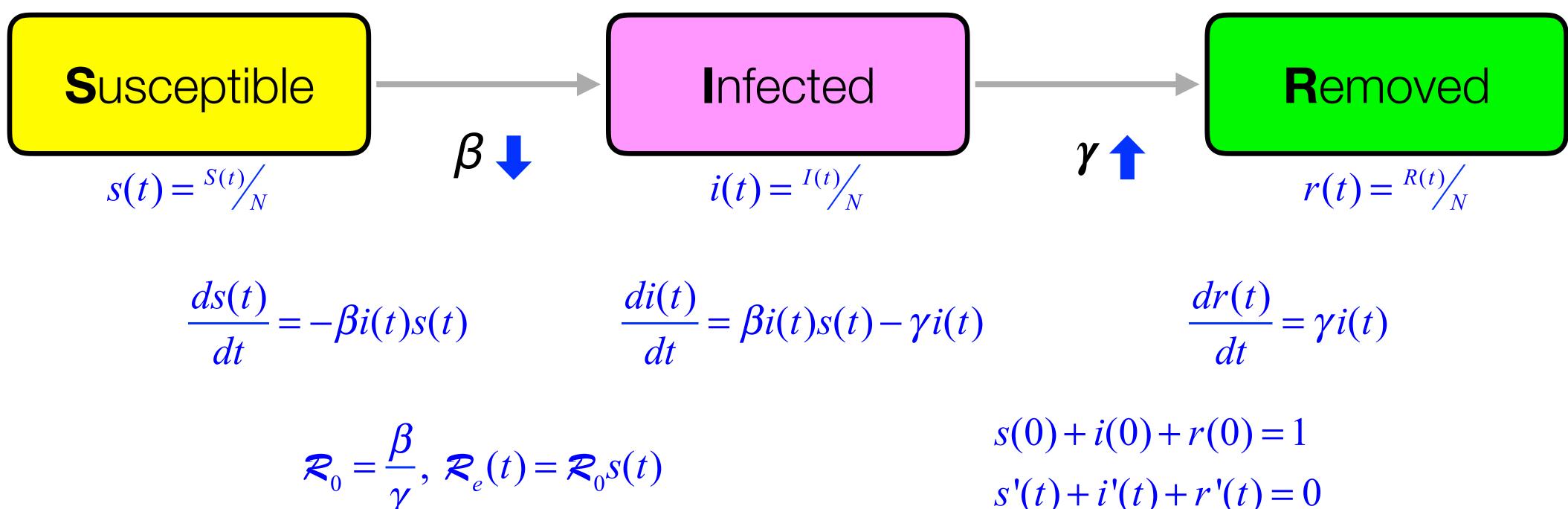




#### Anti-Epidemic Interventions

transmission rate intervention 4

- moderating contact rate
- decreasing infection probability



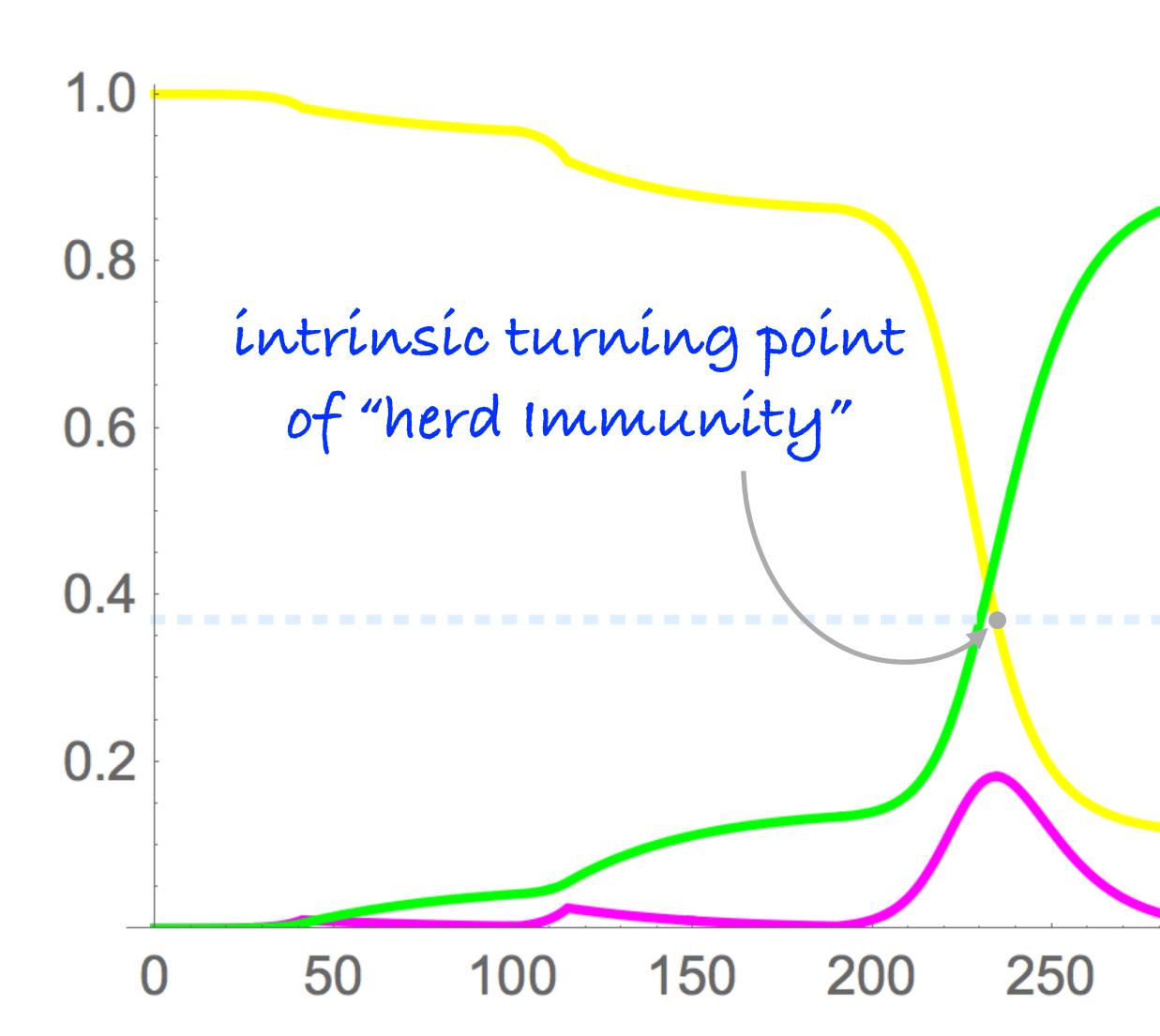
#### removal rate intervention 1

- broad testing
- contact tracing
- vaccination

$$\frac{dr(t)}{dt} = \gamma i(t)$$

s'(t) + i'(t) + r'(t) = 0

## Example: Qualitative Study of Two Ideal Consecutive Lockdowns



locked for days: 41-101, 115-190 equivalent rep. no. reduced to 0.81

> S(susceptible) I(infected) R(removed) 80 R0





# Real-World Lockdown Serious Modelling Example (UK)

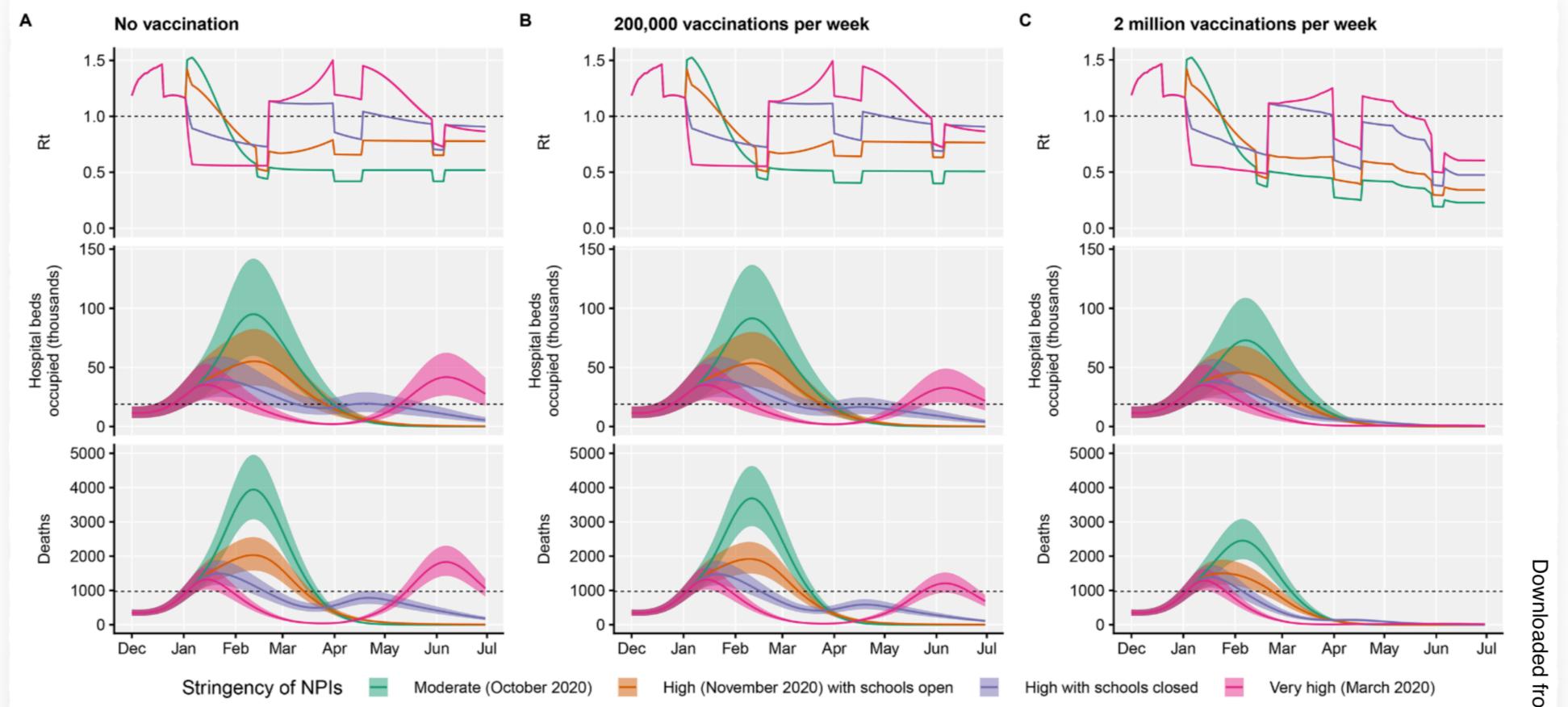
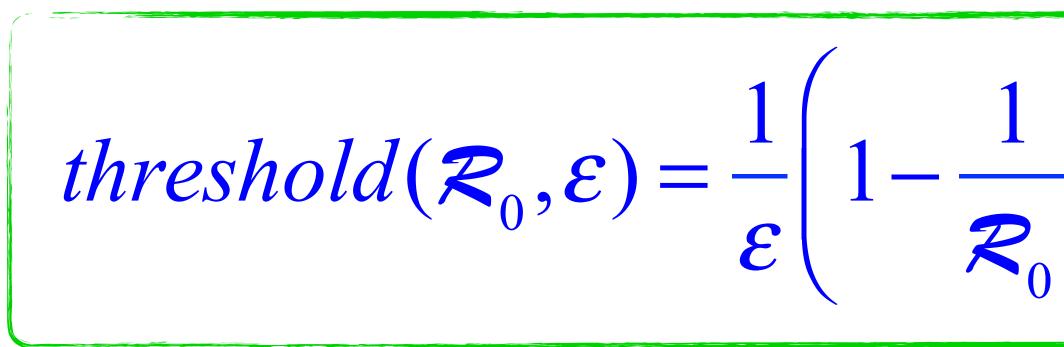


Fig. 4. Projections of epidemic dynamics under different control measures. We compare four alternative scenarios for non-pharmaceutical interventions from 1 January 2021: (i) mobility returning to levels observed during relatively moderate restrictions in early October 2020; (ii) mobility as observed during the second lockdown in England in November 2020, then gradually returning to October 2020 levels from 1 March to 1 April 2021, with schools open; (iii) as (ii), but with school



# Basic Vaccination Equation Revisited for HIT

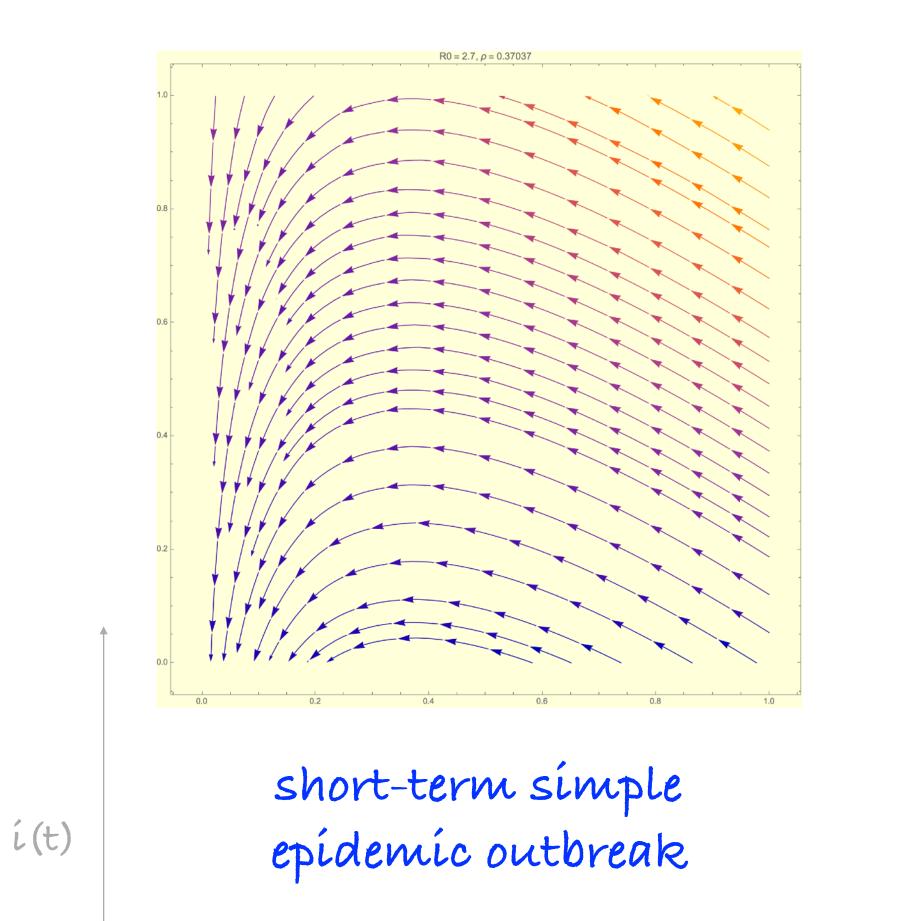


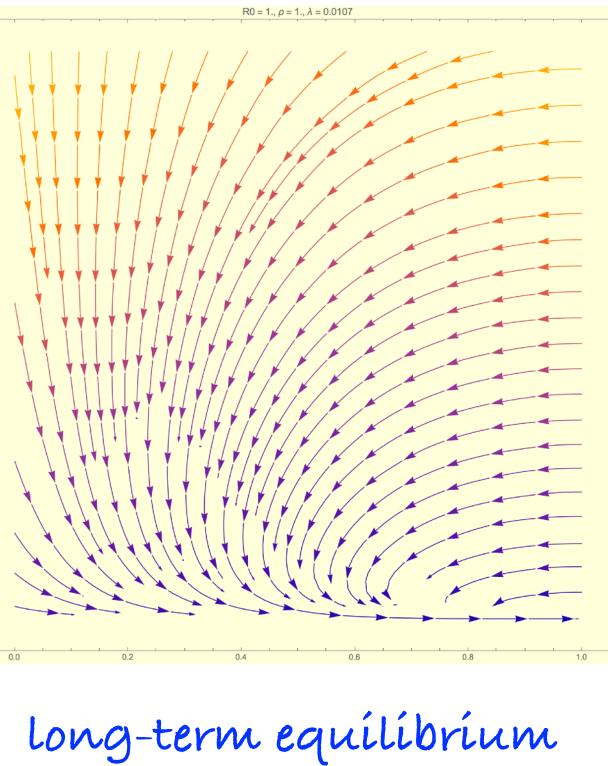
В	R <sub>0</sub>				
	2.7	3.5	4.5	5.5	6
92 %	68 %	78 %	85 %	89 %	92
86 %	73 %	83 %	90 %	95 %	98
80 %	79 %	89 %	97 %	—	
63 %	100 %				

.45				
2	%			
8	%			
_	-			
_	_			

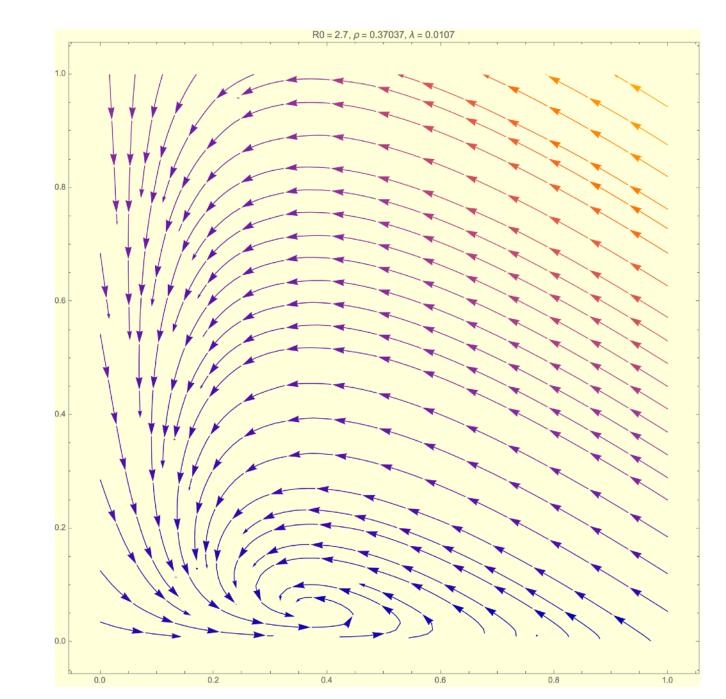
- Assumptions:
  - vaccine distributed *uniformly among* yet-susceptible people
  - vaccine efficacy  $\varepsilon$  for spreading
  - immunity does not vanish in near time (circa one year, at least)
- Recovered people fraction bearing natural immunity then sums up with the vaccinated fraction
  - not shown here for clarity
  - be careful with overlaps

## Direction field of the model\* equations brings yet-another viewpoint





disease-free

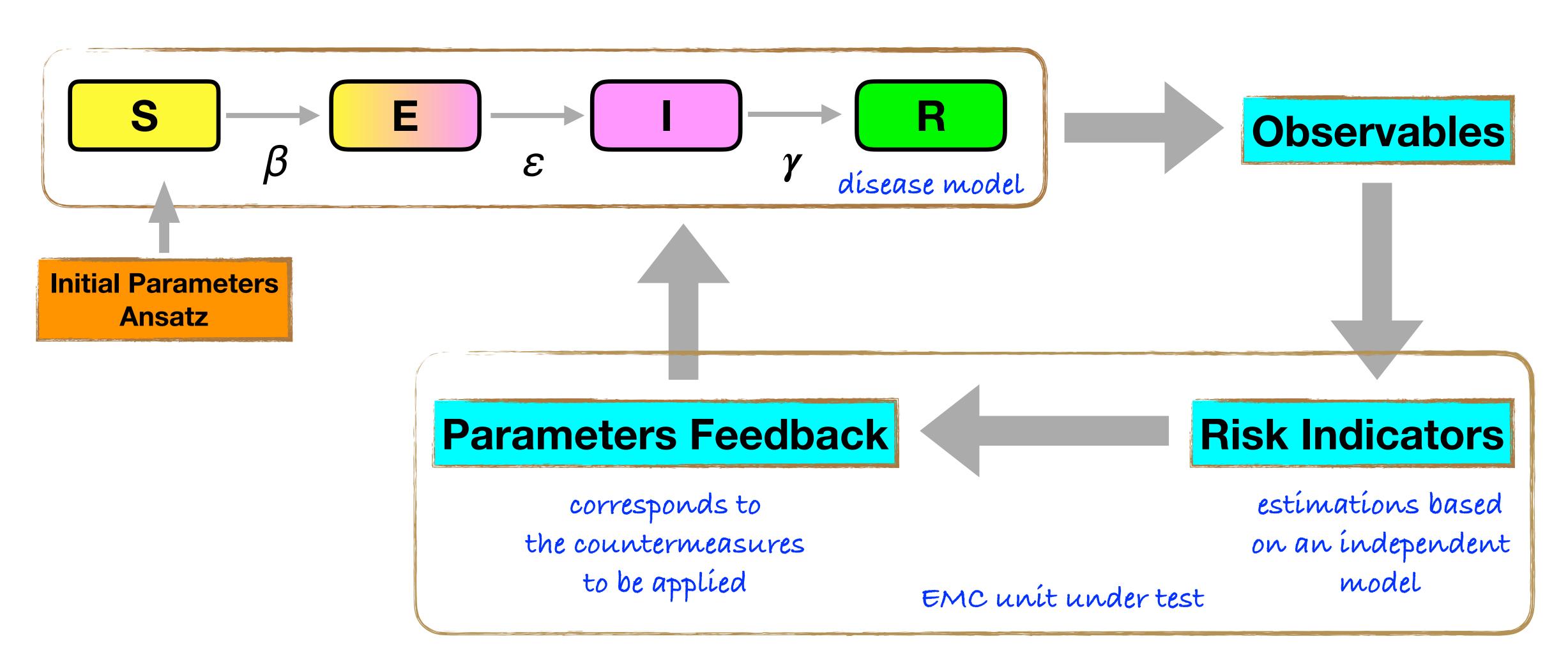


#### long-term equilibrium endemíc

\*) SIR and SIR with demography



## Countermeasures Safety Check by Simulated Test Runs



\*) Note the SEIR model is just an example

### Conclusion

- into our analyses?!
- security and safety of our models
  - simply put **trust**, **but test**
  - and dispute their ideas

• The model description, the ODE system in particular here, can be viewed as an epidemic code

#### epidemic code $\rightarrow$ the pandemic $\rightarrow$ the government $\rightarrow$ the economics $\rightarrow$ the companies

#### Observing this chain, doesn't it make sense to incorporate this strong determinism

On the other hand, the more important decisions are to be made, the more we shall talk about the

- mathematical modelling creates a platform where many experts from different areas can share



### **Revision History**

- 2021/06/10: release version 1