



A stochastic θ -SEIHRD model

Adding randomness to the COVID-19 spread

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Motivation

- Classical compartmental SEIR-like models are too simplistic.
- Particular COVID-19 characteristics: undetected, hospitalized, deaths, etc.
- Require a COVID-19 *ad-hoc* model: θ -SEIHRD model.
- Deterministic version: rigid and limited information.
- Uncertainty may influence the compartments dynamics.
- Behavioural effects, public interventions, seasonal patterns, environmental factors, etc. are factors with a random component.
- How to account for it? Stochastic extension!



Outline

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

1 Introduction

2 A stochastic compartmental model for the COVID-19

- Original model
- Stochastic extension

3 Numerical solution of the stochastic θ -SEIHRD model

4 Numerical and statistical analysis

5 Conclusions



Introduction

From deterministic to stochastic

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- The compartmental models are formulated in a deterministic fashion: *Ordinary Differential Equations* (ODEs).
- There are two common approaches to include stochasticity into a deterministic model:
 - *Continuous Time Markov Chain* (CTMC).
 - *Stochastic Differential Equations* (SDEs).
- The stochastic models allow to capture many kinds of circumstances including uncertainty.
- The solution of the stochastic model is a set of stochastic processes, containing much more information than the deterministic analogous.
- Statistical analyses can be performed (expectations, quantiles or worst case scenarios).



Introduction

From deterministic to stochastic

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- We follow the SDE approach incorporating a *Brownian motion* to the ODEs.
- Two common ways of addressing this kind of stochastic extension:
 - Adding arbitrary random noise.
 - Perturbing one (o more) of the existing model parameters.
- We choose the second alternative for interpretability purposes.
- In practice, the uncertainty will have impact on a particular model component, typically represented by a model parameter.
- A randomly perturbed parameter can be reasonably explained in terms of the variability produced by the source of the considered uncertainty.



Original model

Simplified version

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- We consider the (simplified) θ -SEIHRD model from [2].
- Consisting in 9 equations, 6 coupled,

$$\frac{dS}{dt}(t) = -\frac{S(t)}{N} (m_E(t)\beta_E E(t) + m_I(t)\beta_I I(t) + m_{I_u}(t)\beta_{I_u}(\theta(t))I_u(t)) - \frac{S(t)}{N} (m_{H_R}(t)\beta_{H_R}(t)H_R(t) + m_{H_D}(t)\beta_{H_D}(t)H_D(t)),$$

$$\frac{dE}{dt}(t) = \frac{S(t)}{N} (m_E(t)\beta_E E(t) + m_I(t)\beta_I I(t) + m_{I_u}(t)\beta_{I_u}(\theta(t))I_u(t)) + \frac{S(t)}{N} (m_{H_R}(t)\beta_{H_R}(t)H_R(t) + m_{H_D}(t)\beta_{H_D}(t)H_D(t)) - \gamma_E E(t),$$

$$\frac{dI}{dt}(t) = \gamma_E E(t) - \gamma_I I(t),$$

$$\frac{dI_u}{dt}(t) = (1 - \theta(t))\gamma_I I(t) - \gamma_{I_u} I_u(t),$$

$$\frac{dH_R}{dt}(t) = \theta(t) \left(1 - \frac{\omega(t)}{\theta(t)}\right) \gamma_I I(t) - \gamma_{H_R}(t)H_R(t),$$

$$\frac{dH_D}{dt}(t) = \omega(t)\gamma_I I(t) - \gamma_{H_D}(t)H_D(t),$$



Original model

Simplified version

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- and 3 uncoupled equations,

$$\frac{dR_d}{dt}(t) = \gamma_{H_R}(t)H_R(t),$$

$$\frac{dR_u}{dt}(t) = \gamma_{I_u}(t)I_u(t),$$

$$\frac{dD}{dt}(t) = \gamma_{H_D}(t)H_D(t).$$

- whose solution can be obtained by

$$R_d(t) = R_d(t_0) + \int_{t_0}^t \gamma_{H_R}(s)H_R(s)ds,$$

$$R_u(t) = R_u(t_0) + \int_{t_0}^t \gamma_{I_u}(s)I_u(s)ds,$$

$$D(t) = D(t_0) + \int_{t_0}^t \gamma_{H_D}(s)H_D(s)ds,$$



Original model

Compartments diagram

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

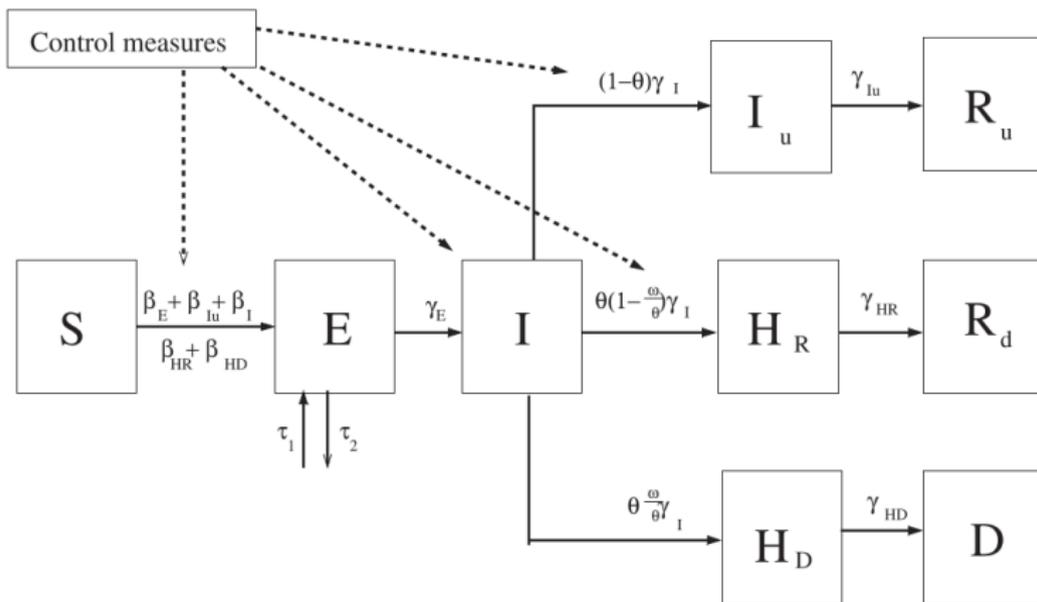


Figure: The θ -SEIHRD model diagram.



Original model

Simplified version - Parameters

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- Efficiency of the control measures
 $m_E, m_I, m_{I_u}, m_{H_R}, m_{H_D} \in [0, 1](\%)$. Here, only one control measure is assumed, implemented at date λ_1 ,

$$m_X(t) = \begin{cases} 1, & \text{if } t \in [0, \lambda_1], \\ \exp(-\kappa_1(t - \lambda_1)), & \text{if } t \in [\lambda_1, T], \end{cases}$$

with the parameter $\kappa_1 \in [0, 0.2]$.

- The fatality rate $\omega(t) \in [\underline{\omega}, \bar{\omega}] \subset [0, 1]$,

$$\omega(t) = m_I(t)\bar{\omega} + (1 - m_I(t))\underline{\omega},$$

with $\underline{\omega}$ and $\bar{\omega}$ being the fatality rate limits with and without control measures, $\bar{\omega} = \underline{\omega} + \delta_\omega$.



Original model

Simplified version - Parameters

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- The fraction of detected individuals, $\theta \in [\bar{\omega}, 1]$,

$$\theta(t) = \begin{cases} \underline{\theta}, & \text{if } t \in [t, \lambda_1], \\ \text{linear continuous,} & \text{if } t \in [\lambda_1, \lambda_2], \\ \bar{\theta}, & \text{if } t \in [\lambda_2, T], \end{cases}$$

with $\underline{\theta}, \bar{\theta}, \lambda_1, \lambda_2$ inferred from the data.

- Compartment transition rates $\gamma_E, \gamma_I, \gamma_{I_u}, \gamma_{H_R}, \gamma_{H_D} \in (0, +\infty)$.
Given the days in each compartment, $d_E, d_I, d_{I_u}, d_{H_R}$ and d_{H_D} ,
with $d_{I_u} = d_{H_R}$ and $d_{H_D} = d_{H_R} + \delta_R, \delta_R > 0$,

$$\gamma_I = \frac{1}{d_E}, \quad \gamma_{I_u}(t) = \gamma_{H_R}(t) = \frac{1}{d_{I_u} + g(t)}$$
$$\gamma_I(t) = \frac{1}{d_I - g(t)}, \quad \gamma_{H_D}(t) = \frac{1}{d_{I_u} + g(t) + \delta_R},$$

where $g(t) = d_g(1 - m_I(t))$.



Original model

Simplified version - Parameters

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- The disease contact rates $\beta_E, \beta_I, \beta_{I_u}, \beta_{H_R}, \beta_{H_D} \in \mathbb{R}^+$. The parameter β_I is calibrated. More $\beta_E = C_E \beta_I$, $\beta_{H_R} = \beta_{H_D} = C_H(t) \beta_I$ and

$$\beta_{I_u}(t) = \underline{\beta}_I + \frac{\beta_I - \underline{\beta}_I}{1 - \omega(t)}(1 - \theta(t)),$$

where $\underline{\beta}_I = C_u \beta_I$, with $C_E, C_H(t)$ and $C_u \in [0, 1]$. Parameters C_E and C_u are obtained calibration, while

$$C_H(t) = \frac{\alpha_H \left(\frac{\beta_I}{\gamma_I(t)} + \frac{\beta_E}{\gamma_E(t)} + (1 - \theta(t)) \frac{\beta_{I_u}(t)}{\gamma_{I_u}(t)} \right)}{(1 - \alpha_H) \beta_I \theta(t) \left(\left(1 - \frac{\omega(t)}{\theta(t)} \right) \frac{1}{\gamma_{H_R}(t)} + \frac{\omega(t)}{\theta(t)} \frac{1}{\gamma_{H_D}(t)} \right)}$$

with α_H being the percentage of healthcare workers infected.



Stochastic extension

Rewriting the simplified model

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- Our aim is to introduce stochasticity to the simplified θ -SEIHRD model.
- We add randomness on the disease contact rates, β 's.
- Writing them in terms of β_I ,

$$\beta_E = \beta_I A_E, \quad \beta_{I_u} = \beta_I A_{I_u}, \quad \beta_{H_R} = \beta_I A_{H_R}, \quad \beta_{H_D} = \beta_I A_{H_D},$$

where

$$A_E = C_E,$$

$$A_{I_u}(t) = C_u + \frac{(1 - C_u)(1 - \theta(t))}{1 - \omega(t)},$$

$$A_{H_R}(t) = A_{H_D}(t) = \frac{\alpha_H \left(\frac{1}{\gamma_I(t)} + \frac{A_E}{\gamma_E} + (1 - \theta(t)) \frac{A_{I_u}(t)}{\gamma_{I_u}(t)} \right)}{(1 - \alpha_H)\theta(t) \left(\left(1 - \frac{\omega(t)}{\theta(t)}\right) \frac{1}{\gamma_{H_R}(t)} + \frac{\omega(t)}{\theta(t)} \frac{1}{\gamma_{H_D}(t)} \right)}.$$



Stochastic extension

Rewriting the simplified model

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- The θ -SEIHRD model can be rewritten as,

$$\begin{aligned}\frac{dS}{dt}(t) &= -\beta_I \frac{S(t)M(t)}{N}, \\ \frac{dE}{dt}(t) &= \beta_I \frac{S(t)M(t)}{N} - \gamma_E E(t), \\ \frac{dI}{dt}(t) &= \gamma_E E(t) - \gamma_{II}(t), \\ \frac{dI_U}{dt}(t) &= (1 - \theta(t))\gamma_{II}(t) - \gamma_{I_U} I_U(t), \\ \frac{dH_R}{dt}(t) &= \theta(t) \left(1 - \frac{\omega(t)}{\theta(t)}\right) \gamma_{II}(t) - \gamma_{H_R} H_R(t), \\ \frac{dH_D}{dt}(t) &= \omega(t)\gamma_{II}(t) - \gamma_{H_D} H_D(t),\end{aligned}$$

where

$$\begin{aligned}M(t) &= m_E A_E E(t) + m_I I(t) + m_{I_U} A_{I_U} I_U(t) \\ &\quad + m_{H_R} A_{H_R} H_R(t) + m_{H_D} A_{H_D} H_D(t).\end{aligned}$$



Stochastic extension

Adding stochasticity

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- Replace the constant parameter β_I by a random walk.
- The disease contact rate in compartment I follows a newly introduced stochastic process, $\tilde{\beta}_I(t)$.
- We choose the well-known CIR process [1].
- The main advantage of the CIR process: it ensures the spacial states to be non-negative.
- Further, the CIR process is a mean-reverting process.
- The dynamics of $\tilde{\beta}_I$ read

$$d\tilde{\beta}_I(t) = \nu_{\beta_I}(\mu_{\beta_I} - \tilde{\beta}_I(t))dt + \sigma_{\beta_I}\sqrt{\tilde{\beta}_I(t)}dW(t)$$

where ν_{β_I} is the mean reverting speed, μ_{β_I} is the long-term average, σ_{β_I} is the volatility and $dW(t)$ is a Brownian motion increment.



Stochastic extension

The stochastic θ -SEIHRD model

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions



- The system of SDEs governing the stochastic θ -SEIHRD model is given by,

$$\begin{aligned}dS(t) &= \tilde{\beta}_I(t) \frac{S(t)M(t)}{N} dt \\dE(t) &= \left(\tilde{\beta}_I(t) \frac{S(t)M(t)}{N} - \gamma_E E(t) \right) dt \\dI(t) &= (\gamma_E E(t) - \gamma_I I(t)) dt, \\dI_u(t) &= ((1 - \theta(t))\gamma_I I(t) - \gamma_{I_u} I_u(t)) dt, \\dH_R(t) &= \left(\theta(t) \left(1 - \frac{\omega(t)}{\theta(t)} \right) \gamma_I I(t) - \gamma_{H_R} H_R(t) \right) dt, \\dH_D(t) &= (\omega(t)\gamma_I I(t) - \gamma_{H_D} H_D(t)) dt, \\dR_d(t) &= \gamma_{H_R}(t) H_R(t) dt, \\dR_u(t) &= \gamma_{I_u}(t) I_u(t) dt, \\dD(t) &= \gamma_{H_D}(t) H_D(t) dt, \\d\tilde{\beta}_I(t) &= \nu_{\beta_I} (\mu_{\beta_I} - \tilde{\beta}_I(t)) dt + \sigma_{\beta_I} \sqrt{\tilde{\beta}_I(t)} dW(t).\end{aligned}$$

with $M(t)$ as defined before.

Stochastic extension

The stochastic θ -SEIHRD model

Introduction

A stochastic compartmental model for the COVID-19

Original model

Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- Although only one source of randomness is introduced, the solution of the whole system becomes a set of stochastic processes.
- The remaining equations depend on the first equations for S and E , which present a dependence on $\tilde{\beta}_I$.
- The CIR process is widely employed to simulate the evolution of interest rates in quantitative finance.
- In some sense, the interest rates in finance and the disease contact rates in epidemiology present a rather similar behaviour: positiveness, controlled variability and long-term stability.



The stochastic θ -SEIHRD model

Numerical solution

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- For a set of constant initial data $S(0), E(0), I(0), I_u(0), H_R(0), H_D(0), R_d(0), R_u(0), D(0)$ and $\tilde{\beta}_I(0)$, the system of SDEs has a unique strong solution.
- As the system of SDEs is nonlinear, it is not possible to obtain a closed-form expression for the solution.
- The use of numerical methods becomes mandatory. We adopt the following strategy:
 - 1 Perform a simulation of the dynamics of $\tilde{\beta}_I(t)$, in accordance with the CIR process.
 - 2 Solve the resulting ODE system for each path of $\tilde{\beta}_I(t)$.
- We obtain a set of random walks for each stochastic process representing a model variable.



The stochastic θ -SEIHRD model

Numerical solution

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- The CIR process is a well-studied dynamics often employed in computational finance.
- The underlying distribution is known analytically, relying on the *non-central chi-squared* distribution.
- Given two time points, s and t , $s < t$, the conditional distribution of $\tilde{\beta}_I$ reads

$$\tilde{\beta}_I(t) | \tilde{\beta}_I(s) \sim c(t, s) \cdot \chi^2 \left(d, \frac{e^{-\nu_{\beta_I}(t-s)}}{c(t, s)} \tilde{\beta}_I(s) \right),$$

where

$$c(t, s) = \frac{\sigma_{\beta_I}^2}{4\mu_{\beta_I}} \left(1 - e^{-\nu_{\beta_I}(t-s)} \right), \quad d = \frac{4\nu_{\beta_I}\mu_{\beta_I}}{\sigma_{\beta_I}^2},$$

and $\chi^2(a, b)$ is the non-central chi-squared distribution with a degrees of freedom and non-centrality parameter b .



The stochastic θ -SEIHRD model

Numerical solution

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- We can then define an *exact simulation* scheme, which can be used to obtain realizations of $\tilde{\beta}_I$.
- Given a set of $m + 1$ time points, $\{t_i\}_0^m$, where the solution will be computed, we have, for $i = 0, \dots, m - 1$,

$$c(t_{i+1}, t_i) = \frac{\sigma_{\beta_I}^2}{4\mu_{\beta_I}} \left(1 - e^{-\nu_{\beta_I}(t_{i+1}-t_i)} \right),$$
$$\tilde{\beta}_I(t_{i+1}) = c(t_{i+1}, t_i) \chi^2 \left(d, \frac{e^{-\nu_{\beta_I}(t_{i+1}-t_i)}}{c(t_{i+1} - t_i)} \tilde{\beta}_I(t_i) \right)$$

given some initial value $\tilde{\beta}_I(t_0) = \tilde{\beta}_I(0)$.

- By employing this scheme, we generate n simulated discrete sample paths of $\tilde{\beta}_I$.



The stochastic θ -SEIHRD model

Potential

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

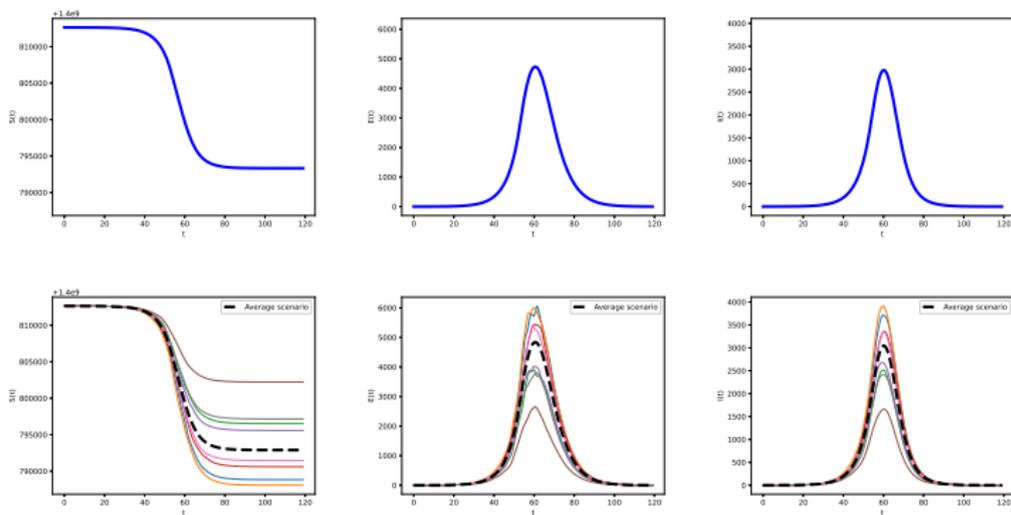


Figure: Deterministic vs. Stochastic: $\nu_{\beta_I} = 1$, $\mu_{\beta_I} = \beta_I$ and $\sigma_{\beta_I} = 0.1$, with $n = 2^{15}$ Monte Carlo simulations (only 8 simulations depicted).



The stochastic θ -SEIHRD model

Potential

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

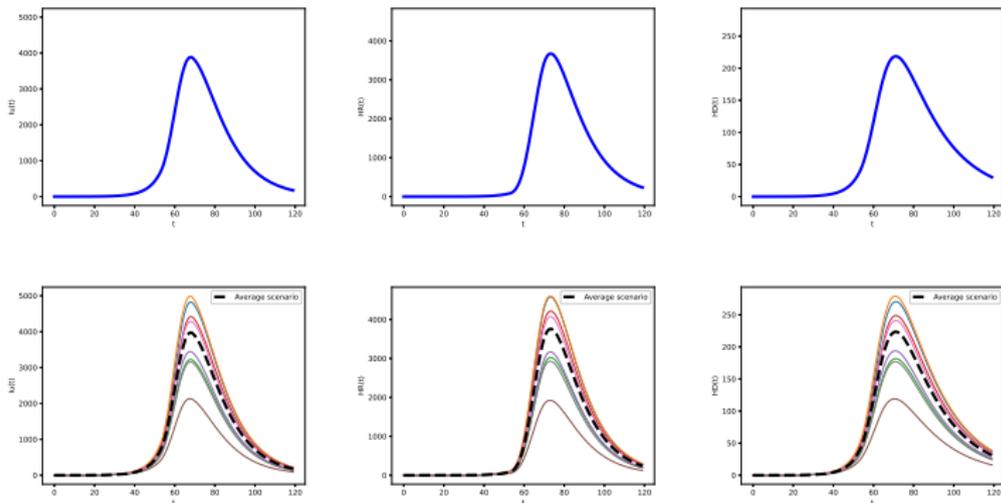


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The stochastic θ -SEIHRD model

Potential

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

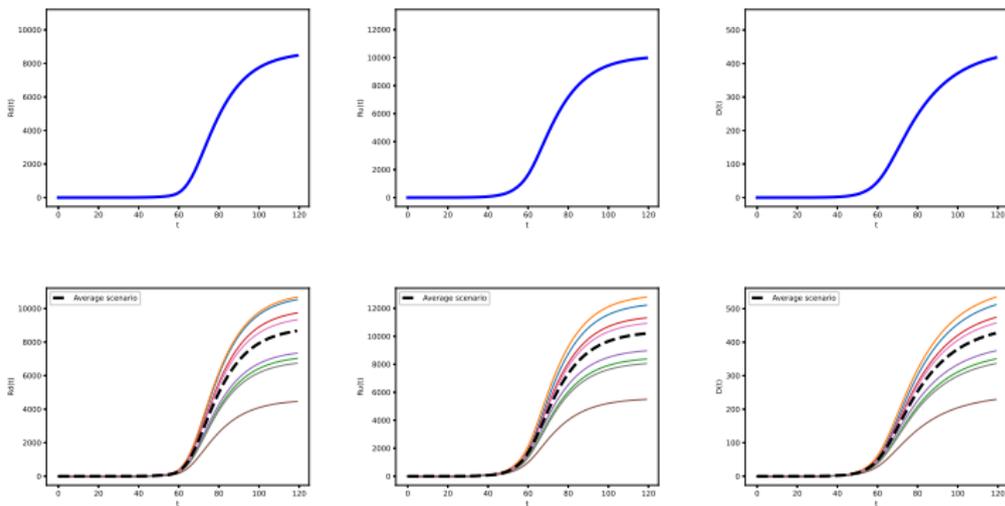


Figure: Deterministic vs. Stochastic: $\nu_{\beta_I} = 1$, $\mu_{\beta_I} = \beta_I$ and $\sigma_{\beta_I} = 0.1$, with $n = 2^{15}$ Monte Carlo simulations (only 8 simulations depicted).



Numerical and statistical analysis

Technicalities

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- Computer system: CPU Intel Core i7-4720HQ 2.6GHz, 16GB RAM memory and GPU GeForce GTX 970M.
- The numerical codes have been implemented in Python.
- We consider a equally spaced time grid, i.e. $\Delta t := t_{i+1} - t_i, \forall i$, with time step $\Delta t = \frac{1}{6}$ (around 4 hours).
- We numerically solve n ODE systems, one for each path of $\tilde{\beta}_I$.
- We employ the explicit Runge-Kutta method of order 5(4), known as *RK45*, *RKDP*.
- Outcomes: the mean, the interquartile interval, $[Q_1, Q_3]$ and the worst case scenario (WS) at 95% confidence level.



Numerical and statistical analysis

Coefficients and parameters

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- Initial state values given by: $S(t_0) = N - 1$, $E(t_0) = 1$ and

$$I(t_0) = I_u(t_0) = H_R(t_0) = H_D(t_0) = R_d(t_0) = R_u(t_0) = D(t_0) = 0.$$

Notation	Value	Description
β_I	0.2887	Disease contact rate of a person in compartment I .
C_E	0.3643	Reduction factor of the disease contact rate β_E w.r.t β_I .
C_U	0.4010	Reduction factor of the disease contact rate β_U w.r.t β_I .
δ_R	7.0000	Difference between days in compartment H_R and H_D .
δ_ω	0.0206	Difference between $\underline{\omega}$ and $\bar{\omega}$.
$\underline{\omega}$	0.0157	Lower bound of the fatality rate.
κ_1	0.1082	Efficiency of the control measures.

Table: Parameters obtained by calibration to the data.



Numerical and statistical analysis

Coefficients and parameters

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

Notation	Value	Description
N	1400812636	Total population.
t_0	1-12-2019	Initial date.
T	29-3-2020	Final date.
λ_1	23-1-2020	Date when travel restrictions were imposed in Wuhan.
λ_2	8-2-2020	Inflexion date.
$\frac{\theta}{\bar{\theta}}$	14%	Percentage of documented cases at λ_1 .
$\frac{\theta}{\bar{\theta}}$	65%	Percentage of documented cases at λ_2 .
α_H	2.75%	Percentage of infection produced by hospitalized people.
d_E	5.5	Average days in compartment E .
d_I	6.7	Average days in compartment I .
d_{IU}	$14 - d_I = 7.3$	Average days in compartment I_U .
d_g	6	Maximum reduction of d_I due to the control measures.
C_o	14	The period of convalescence.
$\rho(t)$	1	Fraction of the infected people hospitalized.

Table: Parameters extracted from the experience and/or literature.



Numerical and statistical analysis

Model variables

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

8th February, 2020 ($t = 69$)							
	$\sigma_{\beta_I} = 0$	$\sigma_{\beta_I} = 0.1$			$\sigma_{\beta_I} = 0.5$		
	Mean	Mean	$[Q_1, Q_3]$	WS (95%)	Mean	$[Q_1, Q_3]$	WS (95%)
$E(t)$	2993	3067	[2506, 3519]	4510	5401	[1049, 5415]	18970
$I(t)$	1340	1376	[1125, 1578]	2017	2419	[476, 2423]	8522
$I_u(t)$	3854	3945	[3249, 4505]	5724	6811	[1434, 6940]	23728
$H_R(t)$	3252	3328	[2732, 3806]	4854	5799	[1182, 5863]	20340
$H_D(t)$	214	219	[181, 250]	318	377	[80, 386]	1311
$R_d(t)$	1846	1888	[1559, 2153]	2726	3231	[701, 3317]	11168
$R_u(t)$	4296	4390	[3656, 4985]	6238	7301	[1738, 7690]	24654
$D(t)$	131	134	[112, 152]	190	222	[53, 235]	747

29th March, 2020 ($t = 119$)							
	$\sigma_{\beta_I} = 0$	$\sigma_{\beta_I} = 0.1$			$\sigma_{\beta_I} = 0.5$		
	Mean	Mean	$[Q_1, Q_3]$	WS (95%)	Mean	$[Q_1, Q_3]$	WS (95%)
$E(t)$	1	1	[1, 1]	2	2	[0, 3]	10
$I(t)$	0	0	[0, 0]	0	0	[0, 0]	1
$I_u(t)$	173	177	[146, 203]	259	309	[63, 314]	1075
$H_R(t)$	232	237	[194, 272]	348	416	[83, 420]	1458
$H_D(t)$	30	30	[25, 35]	45	53	[11, 54]	186
$R_d(t)$	8460	8662	[7118, 9910]	12624	15087	[3101, 15287]	52651
$R_u(t)$	9969	10198	[8442, 11616]	14681	17386	[3862, 17941]	59616
$D(t)$	417	426	[353, 486]	614	728	[161, 751]	2502

Table: Stochastic θ -SEIHRD model: $\nu_{\beta_I} = 1$, $\mu_{\beta_I} = \beta_I$ and $n = 2^{15}$ Monte Carlo simulations. Columns: mean, interquartile interval ($[Q_1, Q_3]$) and worst case scenario (WS).



Numerical and statistical analysis

Model variables

Introduction

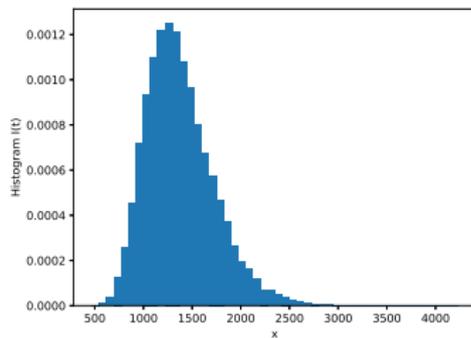
A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

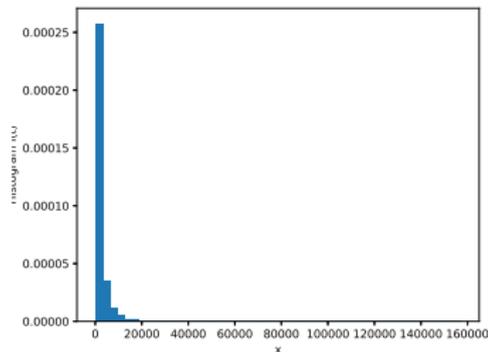
Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions



(a) $\sigma_{\beta_I} = 0.1$



(b) $\sigma_{\beta_I} = 0.5$

Figure: Histogram of $I(t)$. Setting: $\nu_{\beta_I} = 1$ and $\mu_{\beta_I} = \beta_I$, with $n = 2^{15}$ Monte Carlo simulations.



Numerical and statistical analysis

Model outputs

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- The cumulative number of COVID-19 cases, $c_m(t)$, at time t :

$$c_m(t) = H_R(t) + H_D(t) + R_d(t) + D(t) = c_m(t_0) + \int_{t_0}^t \theta(s) \gamma_I(s) I(s) ds.$$

- The cumulative number of deaths, at time t : $d_m(t) = D(t)$.
- The basic reproduction number, R_0 , and the effective reproduction number, $R_e(t)$, at time t , where $R_0 = R_e(t_0)$,

$$R_e(t) = \frac{U_e(t)}{\gamma_E \gamma_I(t) \gamma_{H_R}(t) \gamma_{H_D}(t) \gamma_{I_u}(t)} \frac{S(t)}{N},$$

with

$$U_e(t) = (((m_{I_u} \beta_{I_u} (1 - \theta) \gamma_{H_R} + m_{H_R} \beta_{H_R} \gamma_{I_u} (\theta - \omega)) \gamma_I + m_I \beta_I \gamma_{H_R} \gamma_{I_u}) \gamma_E + m_E \beta_E \gamma_I \gamma_{H_R} \gamma_{I_u} \gamma_{H_D} + m_{H_D} \beta_{H_D} \omega \gamma_E \gamma_I \gamma_{H_R} \gamma_{I_u}).$$

- Hospitalized people, $H_{os}(t)$, at time t :

$$H_{os}(t) = H_D(t) + \rho(t) (H_R(t) + R_d(t) - R_d(t - C_0)).$$



Numerical and statistical analysis

Model outputs

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- Maximum number of hospitalized people in the interval $[t_0, t]$:

$$\text{MHos}(t) = \max_{\tau \in [t_0, t]} \text{Hos}(\tau).$$

- The number of individuals infected by others belonging to compartments E , I_u and $H = H_R + H_D$:

$$\Gamma_E(t) = \int_{t_0}^t m_E(s) \beta_E E(s) \frac{S(s)}{N} ds,$$

$$\Gamma_{I_u}(t) = \int_{t_0}^t m_{I_u}(s) \beta_{I_u} I_u(s) \frac{S(s)}{N} ds,$$

$$\Gamma_H(t) = \int_{t_0}^t (m_{H_R}(s) \beta_{H_R} H_R(s) + m_{H_D}(s) \beta_{H_D} H_D(s)) \frac{S(s)}{N} ds,$$

respectively.



Numerical and statistical analysis

Model outputs

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

8th February, 2020 ($t = 69$)							
	$\sigma_{\beta_I} = 0$		$\sigma_{\beta_I} = 0.1$		$\sigma_{\beta_I} = 0.5$		
	Mean	Mean	$[Q_1, Q_3]$	WS (95%)	Mean	$[Q_1, Q_3]$	WS (95%)
$c_m(t)$	5440	5571	[4586, 6362]	8088	9631	[2026, 9812]	33466
$d_m(t)$	131	134	[112, 152]	190	222	[53, 235]	747
$R_e(t)$	0.33	0.33	[0.31, 0.35]	0.38	0.33	[0.22, 0.41]	0.63
$Hos(t)$	4040	4134	[3395, 4727]	6026	7197	[1471, 7273]	25262
MHos(t)	4040	4134	[3395, 4727]	6026	7197	[1471, 7273]	25262
$\Gamma_E(t)$	5012	5126	[4255, 5833]	7337	8625	[1979, 9013]	29414
$\Gamma_{I_u}(t)$	4550	4646	[3864, 5285]	6640	7600	[1764, 7976]	25755
$\Gamma_H(t)$	198	202	[168, 230]	288	328	[78, 346]	1106

29th March, 2020 ($t = 119$)							
	$\sigma_{\beta_I} = 0$		$\sigma_{\beta_I} = 0.1$		$\sigma_{\beta_I} = 0.5$		
	Mean	Mean	$[Q_1, Q_3]$	WS (95%)	Mean	$[Q_1, Q_3]$	WS (95%)
$c_m(t)$	9140	9358	[7691, 10704]	13631	16286	[3358, 16526]	56752
$d_m(t)$	417	426	[353, 486]	614	728	[161, 751]	2502
$R_e(t)$	0.0	0.0	[0.0, 0.0]	0.0	0.0	[0.0, 0.0]	0.0
$Hos(t)$	306	314	[257, 360]	459	549	[111, 555]	1927
MHos(t)	4558	4671	[3832, 5347]	6816	8195	[1662, 8258]	28681
$\Gamma_E(t)$	5259	5379	[4464, 6122]	7705	9070	[2073, 9465]	30925
$\Gamma_{I_u}(t)$	5388	5504	[4570, 6264]	7886	9082	[2080, 9479]	30911
$\Gamma_H(t)$	229	234	[195, 266]	334	384	[89, 402]	1298

Table: Stochastic θ -SEIHRD model: $\nu_{\beta_I} = 1$, $\mu_{\beta_I} = \beta_I$ and $n = 2^{15}$ Monte Carlo simulations. Columns: mean, interquartile interval ($[Q_1, Q_3]$) and worst case scenario (WS).



Numerical and statistical analysis

Evolution epidemic curves

Introduction

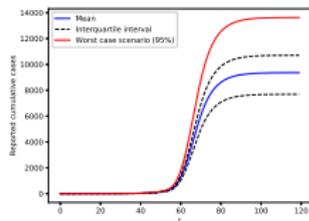
A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

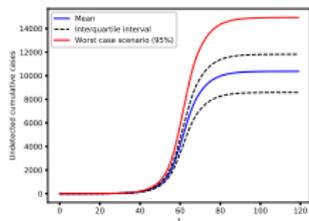
Numerical solution of the stochastic θ -SEIHR model

Numerical and statistical analysis

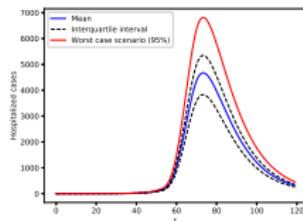
Conclusions



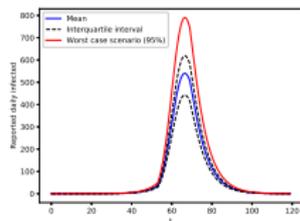
(a) Reported cum.



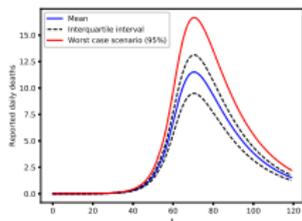
(b) Undetected cum.



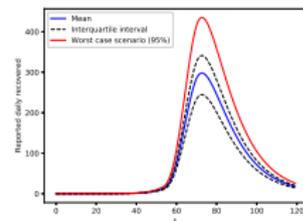
(c) Hospitalized



(d) Daily infected



(e) Daily deaths



(f) Daily recovered

Figure: Epidemic curves: mean, IQ interval and WS. Setting: $\nu_{\beta_I} = 1$, $\mu_{\beta_I} = \beta_I$ and $\sigma_{\beta_I} = 0.1$, with $n = 2^{15}$.



Numerical and statistical analysis

Evolution epidemic curves

Introduction

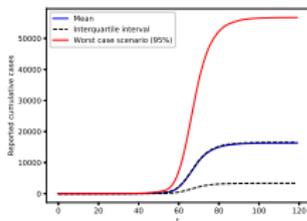
A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

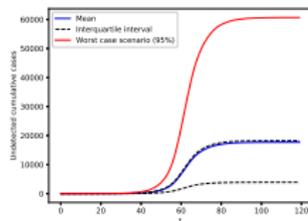
Numerical solution of the stochastic θ -SEIHR model

Numerical and statistical analysis

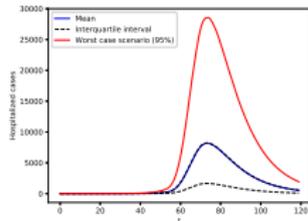
Conclusions



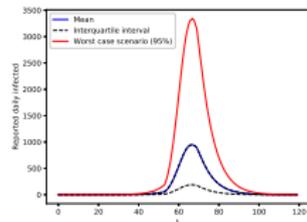
(a) Reported cum.



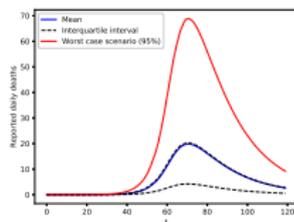
(b) Undetected cum.



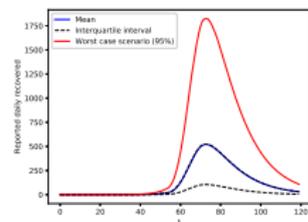
(c) Hospitalized



(d) Daily infected



(e) Daily deaths



(f) Daily recovered

Figure: Epidemic curves: mean, IQ interval and WS. Setting: $\nu_{\beta_I} = 1$, $\mu_{\beta_I} = \beta_I$ and $\sigma_{\beta_I} = 0.5$, with $n = 2^{15}$.



Conclusions

Discussion and and future research

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

- We have extended an *ad-hoc* model by incorporating randomness to relevant coefficients (disease contact rates).
- We have shown the importance of considering the uncertainty.
- The presented modelling approach is more complete since it allows to compute confidence intervals and worst case scenarios.
- The information provided by the worst case scenarios can be useful to develop more conservative policies in the actions against the COVID-19 spread.
- A natural extension would be to consider independent contact rates, using different stochastic processes to characterize their dynamics.
- In this more general setting, a certain number of different (possibly correlated) Brownian motion processes would come into place.



References

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions



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Acknowledgements

Introduction

A stochastic compartmental model for the COVID-19

Original model
Stochastic extension

Numerical solution of the stochastic θ -SEIHRD model

Numerical and statistical analysis

Conclusions

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Thank you for your attention

More: [alvaroleitao.github.io](https://github.com/alvaroleitao)

