

## Dynamical Analysis and Prediction of the COVID-19 Pandemic

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**Date:** 2020-02-25T00:00:00+00:00

### Abstract

Based on classical kinetic models and automatic optimization algorithms for model parameters, this study analyzes the cumulative numbers of confirmed cases from January 20 to February 16, 2020, for 24 provinces, municipalities, and autonomous regions nationwide with cumulative confirmed infections exceeding 100 (as of February 16, 2020), as well as for 16 prefecture-level cities in Hubei Province excluding Shennongjia, and conducts long-term predictions regarding the possible conclusion time of the epidemic and total infection numbers in the corresponding provincial and regional areas. Our research demonstrates that under current stringent prevention and control measures, the epidemic in most provinces and municipalities nationwide will essentially conclude by the end of February, while the epidemic within Hubei Province is also projected to end by mid-March; however, the epidemic in Wuhan City may persist until early April. Through comparison of public data with predicted values, we recommend intensified surveillance in the six provinces of Heilongjiang, Hebei, Jiangxi, Anhui, Guizhou, and Sichuan, as well as in the six prefecture-level cities of Wuhan, Jingzhou, Ezhou, Suizhou, Tianmen, and Enshi within Hubei Province, to prevent epidemic resurgence. Furthermore, analytical results indicate that during the early stages of epidemic development, provinces including Tianjin, Hebei, Chongqing, Sichuan, Hainan, and Guangxi, along with multiple prefecture-level cities under Hubei Province, may have experienced clustered infections, which warrants confirmation through further epidemiological investigation post-epidemic.

### Full Text

### Introduction

In December 2019, the novel coronavirus disease (COVID-19) outbreak emerged in Wuhan, Hubei Province, and rapidly spread nationwide. By February 16,

2020, 24 provinces in China had reported cumulative confirmed cases exceeding 100. The virus exhibited rapid transmission dynamics, posing significant challenges for prevention and control efforts. Mathematical modeling serves as a crucial tool for investigating infectious disease transmission patterns, with compartmental models such as SI, SIR, and SEIR being widely employed in epidemiological studies [4, 5]. In this work, we utilize a generalized SEIR model [6] to analyze epidemic data from 24 provinces (with >100 cases as of February 16, 2020) and 16 cities in Hubei Province (excluding Shennongjia), covering the period from January 20 to February 16, 2020. Through dynamical modeling and automatic parameter optimization algorithms, we forecast the trajectory of COVID-19 epidemics across China.

## Model Description

The generalized SEIR model extends the classical framework by incorporating quarantine and hospitalization compartments. The population is divided into five categories: susceptible individuals (S), exposed individuals in the latent period (E), symptomatic infectious individuals (I), quarantined or hospitalized cases (Q), and recovered/removed individuals (R). The model structure is illustrated in [Figure 1: see original paper], which depicts the COVID-19 transmission flow chart.

Parameter estimation relies on reported clinical and epidemiological data. The incubation period is set at 4.95 days based on recent studies [8, 9], while other transmission parameters are derived from statistical analysis of early outbreak data [7]. The model employs a time-dependent transmission rate to capture the effects of intervention measures and behavioral changes over the course of the epidemic.

## Data Collection and Parameter Optimization

Epidemic data were collected from official reports covering the period from January 20 to February 16, 2020. The dataset includes 24 provinces with cumulative cases exceeding 100 by February 16, as well as 16 prefecture-level cities in Hubei Province (excluding Shennongjia). Parameter optimization was performed using an automatic algorithm that minimizes the difference between model predictions and observed case counts. The optimization process accounts for uncertainties in reporting delays and case definitions.

The basic reproduction number ( $R_0$ ) and time-varying transmission rates were estimated through Bayesian inference and maximum likelihood methods. Sensitivity analyses were conducted to assess the impact of key parameters, including the incubation period and quarantine effectiveness. The model calibration focused on matching both the exponential growth phase and the subsequent deceleration following implementation of strict control measures.

## Results and Forecasts

Our analysis indicates that the COVID-19 epidemics in most Chinese provinces will conclude before February 29, 2020. For Hubei Province (excluding Wuhan), the epidemics are projected to end by mid-March, while Wuhan's epidemic may persist until early April. These forecasts are based on the observed trends in daily new cases and the estimated time-dependent reproduction numbers.

Particular attention should be directed toward six provinces: Heilongjiang, Hebei, Jiangxi, Anhui, Guizhou, and Sichuan, where the decline in cases may be slower than average. Within Hubei Province, six cities require continued monitoring: Wuhan, Jingzhou, Ezhou, Suizhou, Tianmen, and Enshi. The model suggests these regions may experience prolonged transmission due to factors such as population density, mobility patterns, and healthcare capacity.

## Discussion

The model outputs hint at potential clustering infections in Tianjin, Hebei, Chongqing, Sichuan, Hainan, and Guangxi provinces, as well as in numerous cities within Hubei during the epidemic spread. These findings warrant further validation through detailed epidemiological investigations. The generalized SEIR framework successfully captures the essential dynamics of COVID-19 transmission while accounting for intervention effects through time-varying parameters.

The forecasting accuracy depends critically on the quality and consistency of reported data. Potential underreporting, changes in case definitions, and varying testing capacities across regions introduce uncertainties into the model predictions. Nevertheless, the results provide valuable guidance for resource allocation and policy decisions during the critical phases of outbreak control.

The automatic parameter optimization algorithm enables rapid model adaptation to emerging data, facilitating real-time forecasting capabilities. This approach can be extended to other regions and future outbreaks, providing a robust tool for public health decision-making.

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