

Fixed-time descriptive statistics underestimate extremes of epidemic curve ensembles

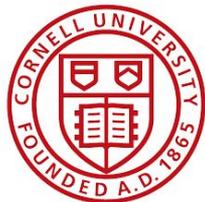
— and how to fix it?

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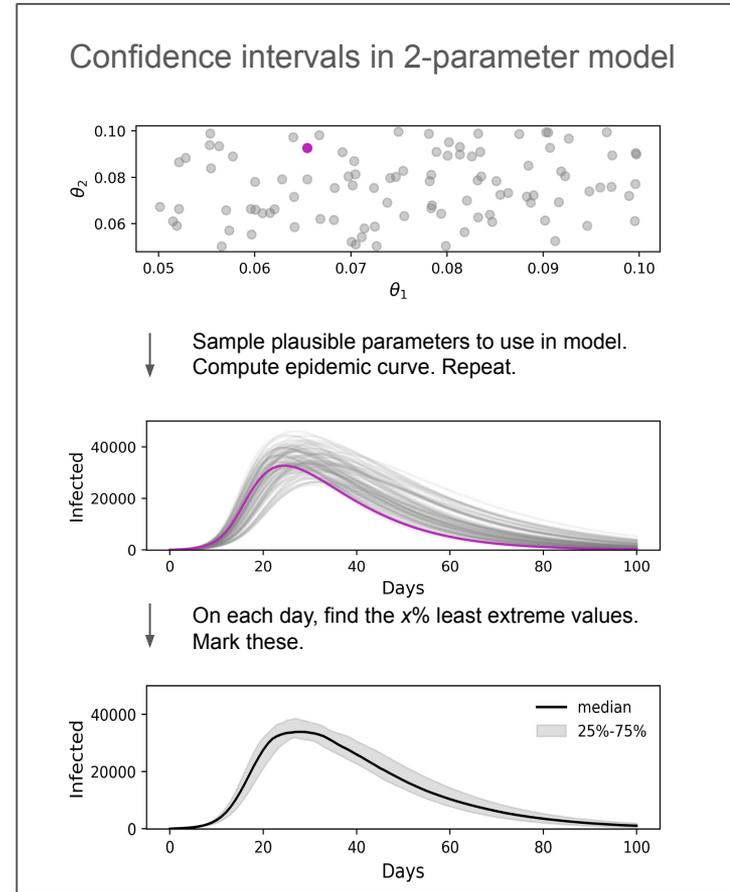
The topic: Uncertainty in epidemiological projections

Why?

- Models take input parameters that are known to some (limited) precision.
- Locking down/reopening society are calculated risks. Uncertainty on projections must be well-communicated.

How is uncertainty usually communicated?

- *See illustration.*



The problem:

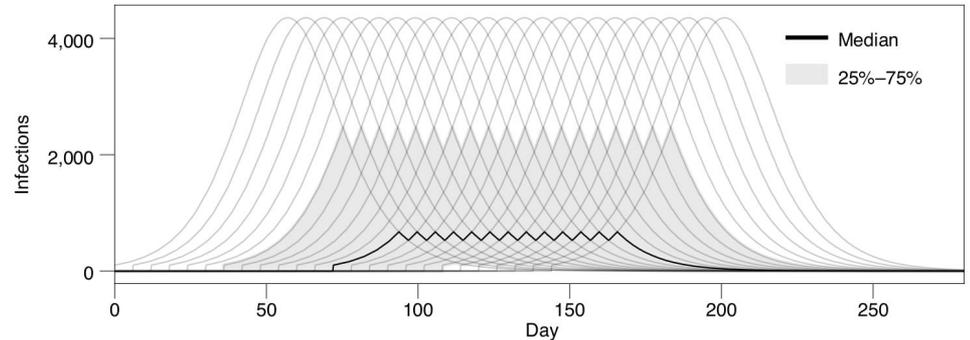
The Tragic Tale of Transmithaca

What is the problem?

- For COVID-19, many countries locked down to prevent hospitals from overflowing.
- Current summary of uncertainty is not fit for communicating risks of such extremes.

Transmithaca

1. People on the island of Transmithaca know a virus will arrive. They know every parameter with perfect precision, but not *when* it arrives.
2. What is the expected peak number of infections per day?
3. Projection suggests *< 3000 infections per day* although every curve exceeds 4000 infections.



Juul et al., *Nature Physics* **17**, 5–8 (2021)

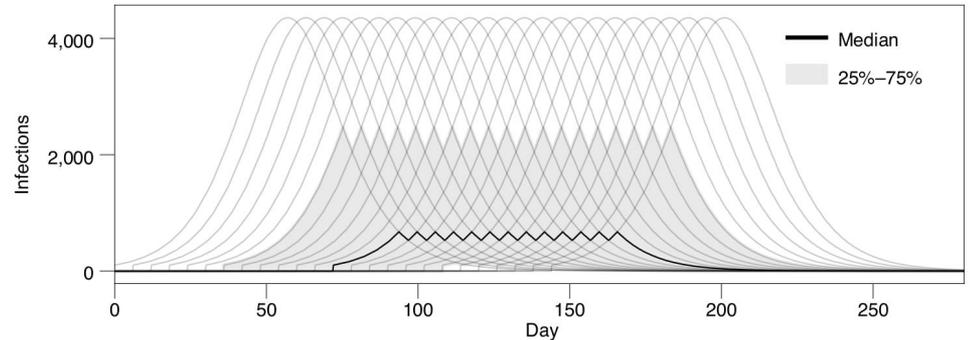
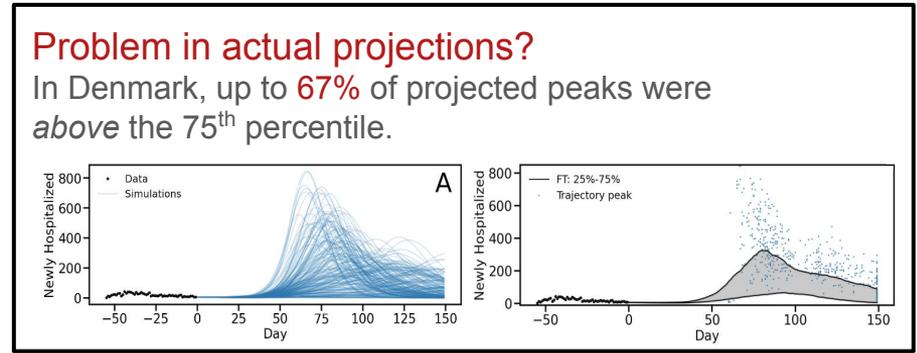
The problem: The Tragic Tale of Transmithaca

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The solution:

Statistics for whole curves

Solution 1: Curve-based descriptive statistics

- Rank centrality of whole curves instead of single points in time. Draw envelope of most central. *[There are several ways to rank curves by centrality]*

Solution 2: Estimate likelihood of scenarios

- Directly estimate likelihood of scenarios of interest from ensemble.
 - Example: Probability of at least 200 newly hospitalized for at least 2 consecutive days is above 0.50 because this scenario took place in more than 50% of the simulations.

