

# SURVIVAL ANALYSIS OF A MULTI-STATE SEMI-MARKOV MODEL ON INFECTIOUS DISEASE CONSIDERING VARIOUS LEVELS OF SEVERITY

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## Abstract

*The aim of the paper is to carry out survival analysis of a novel multi-state model on infectious disease considering various levels of severity using semi-Markov processes. Various levels of severity of the disease over time and transitions between these severity levels have been considered. Transition probabilities and expected waiting times are derived. Expressions for mean survival time, expected total time in home isolation, and expected total time in hospital are obtained. The analysis of the proposed model is carried out through numerical computation and plotting several graphs. Important conclusions are drawn. The modelling framework proposed here can be used to model any infectious disease irrespective of disease states. The study will be helpful in designing effective measures to control the infectious disease and selecting the appropriate intervention policies.*

**Keywords:** Multi-state model, Markov property, Semi-Markov process, Transition probabilities

## 1. INTRODUCTION

Modelling infectious diseases has always been an area of interest for researchers in various fields for the sake of prevention and control of these diseases. According to World Health Organization 2019 report [17], infectious diseases are still in the top ten leading causes of death. In low income countries, six of the top ten causes of death are infectious diseases including neonatal conditions, lower respiratory infections, diarrhoeal diseases, malaria, tuberculosis, HIV/AIDS [17]. As per the above report, there was 50% drop in Disability Adjusted Life Years (DALYs) since 2000 due to infectious, maternal, perinatal and nutritional conditions.

Multi-state Markov models have been frequently used to study the progression of diseases such as cancer [7, 11, 15], HIV infection [4, 20], renal disease [9] and many more. For a Markov model, it is assumed that the holding time in a state is exponentially distributed. For many real-world situations, such as time to failure and time to discover a fault, the exponential distribution may be acceptable. In fact, the exponential distributions have memoryless property. In some cases,

the memoryless property could be seen as a problematic assumption. For example, patients who respond well to a treatment are likely to respond well to the treatment in the future, violating the Markov property [5]. To overcome this limitation, semi-Markov processes came into existence.

Semi-Markov processes are very important generalizations of Markov processes. While Markov processes assume that holding time in a state is exponentially distributed, semi-Markov processes relax the assumption allowing any arbitrary distributions for holding time in a state. Semi-Markov processes were defined by Levy [12] and Smith [14]. Since then, semi-Markov process concepts have been applied to solve various problems like electronics and missile related problems, to improve reliability of various systems, for cost-benefit analysis of a system, for economic decision making problem and so on. The field of biomedical science is not an exception to this, for example, see [1, 2, 6, 8, 10, 13, 16]. Weiss and Zelen [16] applied the theory of semi-Markov processes to the construction of a stochastic model for interpreting data obtained from clinical trials on patients with acute leukemia. Kao [10] derived results for computing the mean and variance of times in transient states and times to absorption in a transient semi-Markov process. Davidov [6] developed expressions for the steady-state probabilities for regenerative semi-Markov processes. Castelli et al. [2] performed cost-effective analysis to compare the follow-up strategies in colorectal cancer study. Goshu and Dessie [8] analysed hospital data obtained from a cohort of AIDS patients who have been under antiretroviral therapy follow-up and estimated the conditional probability of transitions between two states for a finite time period. Cao et al. [1] developed a semi-Markov model to analyse the long-term cost effectiveness of heart failure management programmes. Ramezankhani et al. [13] applied a multi-state semi-Markov model to estimate the number of years of life lost due to diabetes with and without cardiovascular disease.

However, the majority of the literature studies were focused on the disease's progressive stages and omitted the transitions back to normal state. We tried to bridge this gap through our article. There were some studies which included the transitions back to normal state however their main focus was to understand the threshold dynamics of the disease, for example, see [18], [19]. Further, since infectious diseases typically necessitate isolation, such as measles, cholera, diphtheria, infectious tuberculosis, plague, smallpox, yellow fever, and viral hemorrhagic fevers [3], home isolation is one of the possible states of our model. Moreover, through our model, we estimated the expected length of stay in home isolated state which has not been reported in previous studies. Besides, it is a well known fact that elderly patients, pregnant women and patients with co-morbidities are at risk of developing severe and critical illness and transition rates would be different in each category of severity illness. Thus, it becomes necessary to consider separate states for each category of severity. Keeping this in mind, we have considered the four states as mild disease state, moderate disease state, severe disease state and critical disease state. This brings another novelty to this model.

Keeping these in mind, a novel multi-state model for infectious disease based on the theory of semi-Markov processes is proposed. Various levels of severity of the disease over time have been considered. Thus, our model included every transition that a patient who is infected might experience. As in the model, the general scenario for an infectious disease have been considered, the model can be used to study and gain insights about any infectious disease. The paper is organized as follows. The newly developed multi-state semi-Markov model is described in Section 2. Transition probabilities and expected waiting times are derived and theoretical expressions regarding mean survival time, expected total time in home isolation and expected total time in hospital are obtained in Section 3. Numerical computations are performed in Section 4. Finally, conclusions are presented in Section 5.

## 2. MODEL FORMULATION

A semi-Markov model is proposed considering a person having an infectious disease showing the transition between various states. There are nine states in the model in which a healthy individual has the possibility to transit (see Figure 1). Infected persons can experience a range of clinical

manifestations, from no symptoms to critical illness. Infected persons can generally be divided into categories based on the severity of their illnesses: mild illness, moderate illness, severe illness, and critical illness. In light of this, we have taken into account the corresponding four states in increasing order of illness severity. Transitions from mild illness to moderate illness, moderate illness to severe illness, and so forth are permitted since a patient is at risk of developing severe and critical illness. Keeping this in mind, we have taken into consideration the deteriorating rates from mild illness to moderate illness, moderate illness to severe illness and so on. More details are described in the notations below.

Other assumptions made in the model are as under:

- (i) All normal persons are exposed to the disease.
- (ii) Testing of all infected persons is done.
- (iii) Clinical testing is not perfect, i.e. there may be an error in testing.
- (iv) Patient is home isolated if test results are false negative while patient is hospitalised if the test results are positive.
- (v) All random variables are independent of each other.

The following states are considered in the model:

$S_0$	Normal state
$S_1$	Asymptomatic state
$S_2$	Symptomatic state
$S_3$	Home isolated state
$S_4$	Mild disease state
$S_5$	Moderate disease state
$S_6$	Severe disease state
$S_7$	Critical disease state
$S_8$	Death state

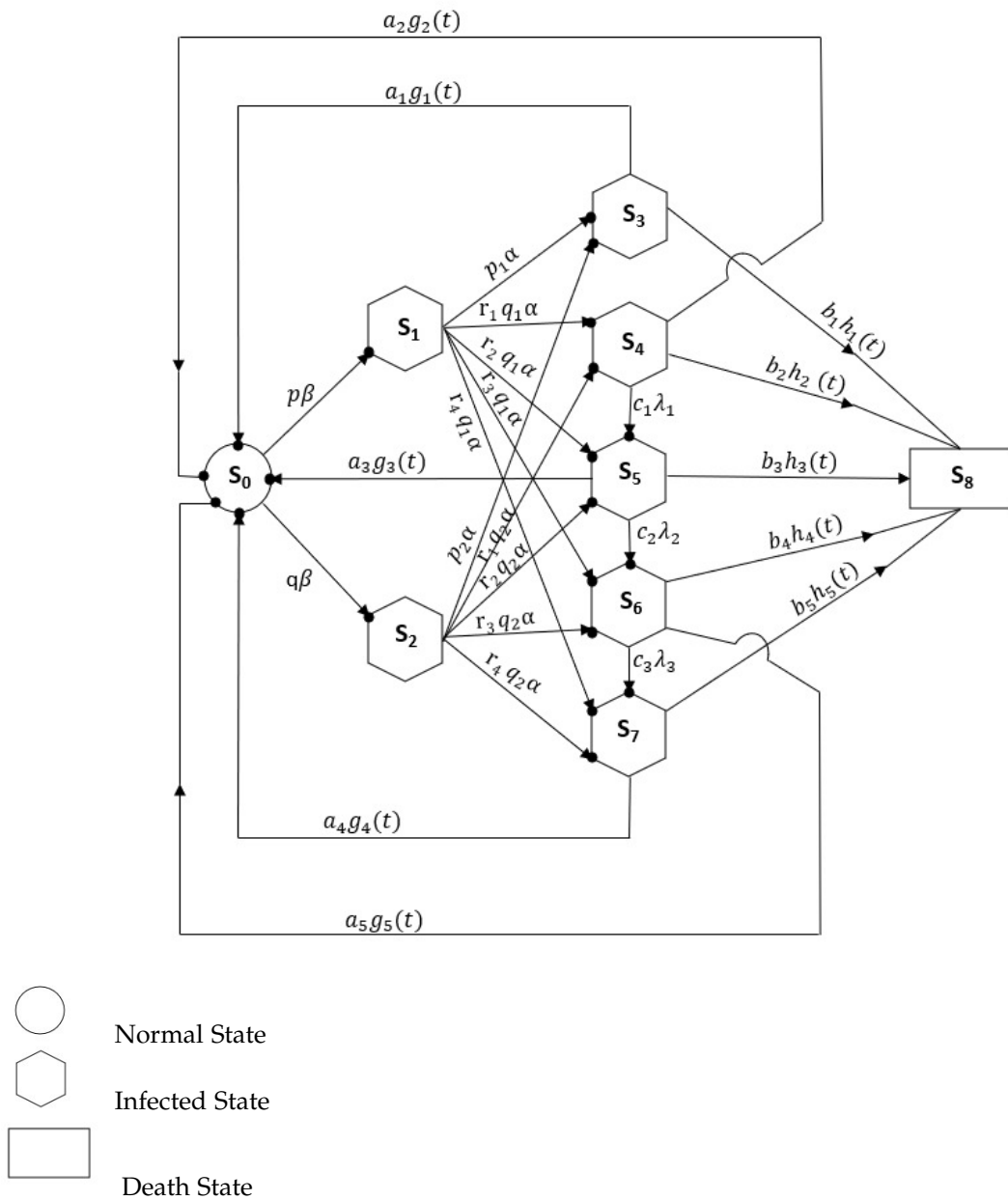
The following notation is used:

$\beta$	incidence rate
$\alpha$	testing rate
$\lambda_1/\lambda_2/\lambda_3$	deteriorating rate from mild illness to moderate illness/moderate illness to severe illness/severe illness to critical illness
$g_1(t)/g_2(t)/g_3(t)/g_4(t)/g_5(t)$	probability density function of recovery time in home isolated state/mild disease state/moderate disease state/severe disease state/critical disease state
$G_1(t)/G_2(t)/G_3(t)/G_4(t)/G_5(t)$	cumulative distribution function of recovery time in home isolation/mild disease state/moderate disease state/severe disease state/critical disease state
$h_1(t)/h_2(t)/h_3(t)/h_4(t)/h_5(t)$	probability density function of time to death in home isolation/mild disease state/moderate disease state/severe disease state/critical disease state
$H_1(t)/H_2(t)/H_3(t)/H_4(t)/H_5(t)$	cumulative distribution function of time to death in home isolation/mild disease state/moderate disease state/severe disease state/critical disease state
$W_i(t)$	probability that the patient is in home isolation at instant t without passing through any other state

$p/q$	probability of an infected person to be asymptomatic/ symptomatic ( $p + q = 1$ )
$p_1/q_1$	probability of an asymptotically infected person to be tested false negative/positive ( $p_1 + q_1 = 1$ )
$p_2/q_2$	probability of an symptomatically infected person to be tested false negative/positive ( $p_2 + q_2 = 1$ )
$r_1/r_2/r_3/r_4$	probability that a patient is diagnosed with mild illness/ moderate illness/severe illness/critical illness ( $r_1 + r_2 + r_3 + r_4 = 1$ )
$a_2/b_2$	probability that an home isolated person will recover/ move to death state ( $a_1 + b_1 = 1$ )
$a_2/b_2/c_1$	probability that a person with mild illness will recover to normal state/move to death/deteriorate to moderate illness ( $a_2 + b_2 + c_1 = 1$ )
$a_3/b_3/c_2$	probability that a person with moderate illness will recover to normal state/move to death/deteriorate to severe illness( $a_3 + b_3 + c_2 = 1$ )
$a_4/b_4/c_3$	probability that a person with severe illness will recover to normal state/move to death/deteriorate to critical illness ( $a_4 + b_4 + c_3 = 1$ )
$a_5/b_5$	probability that a person with critical illness will recover to normal state/move to death state ( $a_5 + b_5 = 1$ )

The following symbols/abbreviations are used:

$SpO_2$	Pulse oximetry
R.R.	Respiratory Rate
*	Laplace Transform symbol
**	Laplace Transform symbol
©	Laplace Convolution symbol
Ⓢ	Laplace-Stieltjes Convolution symbol



**Figure 1:** State Transition Diagram. Possible states which an individual may occupy are depicted in the figure.

### 3. ANALYSIS

Let  $q_{ij}(t)/Q_{ij}(t)$  represents probability density function/cumulative distribution function of first passage time from state  $S_i$  to state  $S_j$  without visiting any other state in  $(0, t]$ . Thus, the time dependent transition probabilities are given by

$$\begin{array}{lll}
 q_{01}(t) = p\beta e^{-\beta t} & q_{02}(t) = q\beta e^{-\beta t} & q_{13}(t) = p_1\alpha e^{-\alpha t} \\
 q_{14}(t) = r_1q_1\alpha e^{-\alpha t} & q_{15}(t) = r_2q_1\alpha e^{-\alpha t} & q_{16}(t) = r_3q_1\alpha e^{-\alpha t} \\
 q_{17}(t) = r_4q_1\alpha e^{-\alpha t} & q_{23}(t) = p_2\alpha e^{-\alpha t} & q_{24}(t) = r_1q_2\alpha e^{-\alpha t} \\
 q_{25}(t) = r_2q_2\alpha e^{-\alpha t} & q_{26}(t) = r_3q_2\alpha e^{-\alpha t} & q_{27}(t) = r_4q_2\alpha e^{-\alpha t} \\
 q_{30}(t) = a_1g_1(t) & q_{38}(t) = b_1h_1(t) & q_{40}(t) = a_2g_2(t) \\
 q_{45}(t) = c_1\lambda_1 e^{-\lambda_1 t} & q_{48}(t) = b_2h_2(t) & q_{50}(t) = a_3g_3(t) \\
 q_{56}(t) = c_2\lambda_2 e^{-\lambda_2 t} & q_{58}(t) = b_3h_3(t) & q_{60}(t) = a_4g_4(t) \\
 q_{67}(t) = c_3\lambda_3 e^{-\lambda_3 t} & q_{68}(t) = b_4h_4(t) & q_{70}(t) = a_5g_5(t) \\
 q_{78}(t) = b_5h_5(t) & & 
 \end{array}$$

The steady state transition probabilities,  $p_{ij} = \lim_{t \rightarrow \infty} \int_0^t q_{ij}(t) dt$  are obtained as

$$\begin{array}{lllll}
 p_{01} = p & p_{02} = q & p_{13} = p_1 & p_{14} = r_1q_1 & p_{15} = r_2q_1 \\
 p_{16} = r_3q_1 & p_{17} = r_4q_1 & p_{23} = p_2 & p_{24} = r_1q_2 & p_{25} = r_2q_2 \\
 p_{26} = r_3q_2 & p_{27} = r_4q_2 & p_{30} = a_1 & p_{38} = b_1 & p_{40} = a_2 \\
 p_{45} = c_1 & p_{48} = b_2 & p_{50} = a_3 & p_{56} = c_2 & p_{58} = b_3 \\
 p_{60} = a_4 & p_{67} = c_3 & p_{68} = b_4 & p_{70} = a_5 & p_{78} = b_5
 \end{array}$$

Let  $T_i$  denote the waiting time in state  $S_i$  then the expected waiting time in state  $S_i$  is given by  $\mu_i = \int_0^\infty P(T_i > t) dt$ . Thus, the expected waiting times are obtained as

$$\begin{array}{ll}
 \mu_0 = \frac{1}{\beta} & \mu_1 = \frac{1}{\alpha} \\
 \mu_2 = \frac{1}{\alpha} & \mu_3 = -a_1g_1^{*'}(0) - b_1h_1^{*'}(0) \\
 \mu_4 = \frac{c_1}{\lambda_1} - a_2g_2^{*'}(0) - b_2h_2^{*'}(0) & \mu_5 = \frac{c_2}{\lambda_2} - a_3g_3^{*'}(0) - b_3h_3^{*'}(0) \\
 \mu_6 = \frac{c_3}{\lambda_3} - a_4g_4^{*'}(0) - b_4h_4^{*'}(0) & \mu_7 = -a_5g_5^{*'}(0) - b_5h_5^{*'}(0)
 \end{array}$$

The expected waiting time in state  $S_i$  given that the next state visited is  $S_j$ , is defined as  $m_{ij} = \int_0^\infty tq_{ij}(t) dt = -q_{ij}^{*'}(0)$ . Thus, the following relations are satisfied:

$$\begin{array}{l}
 m_{01} + m_{02} = \mu_0 \\
 m_{13} + m_{14} + m_{15} + m_{16} + m_{17} = \mu_1 \\
 m_{23} + m_{24} + m_{25} + m_{26} + m_{27} = \mu_2 \\
 m_{30} + m_{38} = \mu_3 \\
 m_{40} + m_{45} + m_{48} = \mu_4 \\
 m_{50} + m_{56} + m_{58} = \mu_5 \\
 m_{60} + m_{67} + m_{68} = \mu_6 \\
 m_{70} + m_{78} = \mu_7
 \end{array}$$

**Theorem 1.** If  $T_0$  is the mean survival time for the patient starting in state  $S_0$  then

$$T_0 = \frac{N}{D},$$

where

$$\begin{aligned}
 N = & \mu_0 + p_{01}\mu_1 + p_{02}\mu_2 + p_{01}p_{13}\mu_3 + p_{01}p_{14}\mu_4 + p_{01}p_{15}\mu_5 + p_{01}p_{16}\mu_6 + p_{01}p_{17}\mu_7 \\
 & + p_{02}p_{23}\mu_3 + p_{02}p_{24}\mu_4 + p_{02}p_{25}\mu_5 + p_{02}p_{26}\mu_6 + p_{02}p_{27}\mu_7 + p_{01}p_{14}p_{45}\mu_5 \\
 & + p_{01}p_{15}p_{56}\mu_6 + p_{01}p_{16}p_{67}\mu_7 + p_{02}p_{24}p_{45}\mu_5 + p_{02}p_{25}p_{56}\mu_6 + p_{02}p_{26}p_{67}\mu_7 \\
 & + p_{01}p_{14}p_{45}p_{56}\mu_6 + p_{02}p_{24}p_{45}p_{56}\mu_6 + p_{01}p_{15}p_{56}p_{67}\mu_7 + p_{02}p_{25}p_{56}p_{67}\mu_7 \\
 & + p_{01}p_{14}p_{45}p_{56}p_{67}\mu_7 + p_{02}p_{24}p_{45}p_{56}p_{67}\mu_7
 \end{aligned}$$

and

$$\begin{aligned}
 D = & 1 - p_{01}p_{13}p_{30} - p_{01}p_{14}p_{40} - p_{01}p_{15}p_{50} - p_{01}p_{16}p_{60} - p_{01}p_{17}p_{70} - p_{02}p_{23}p_{30} \\
 & - p_{02}p_{24}p_{40} - p_{02}p_{25}p_{50} - p_{02}p_{26}p_{60} - p_{02}p_{27}p_{70} - p_{01}p_{14}p_{45}p_{50} - p_{01}p_{15}p_{56}p_{60} \\
 & - p_{01}p_{16}p_{67}p_{70} - p_{02}p_{24}p_{45}p_{50} - p_{02}p_{25}p_{56}p_{60} - p_{02}p_{26}p_{67}p_{70} - p_{01}p_{14}p_{45}p_{56}p_{60} \\
 & - p_{01}p_{15}p_{56}p_{67}p_{70} - p_{02}p_{24}p_{45}p_{56}p_{60} - p_{02}p_{25}p_{56}p_{67}p_{70} - p_{01}p_{14}p_{45}p_{56}p_{67}p_{70} \\
 & - p_{02}p_{24}p_{45}p_{56}p_{67}p_{70}.
 \end{aligned}$$

**Proof.** Let  $\phi_i(t)$  denote the cumulative distribution function of passage time from state  $S_i$  to the absorbing state.

The individual in state  $S_0$  at  $t = 0$  can reach the absorbing state at time  $t$  in two possible ways:

- (i) The individual transited from state  $S_0$  to state  $S_1$  in time  $\tau$  ( $\tau < t$ ) and reached the absorbing state in  $t - \tau$  time.
- (ii) The individual transited from state  $S_0$  to state  $S_2$  in time  $\tau$  ( $\tau < t$ ) and reached the absorbing state in  $t - \tau$  time.

Thus, we obtain

$$\phi_0(t) = Q_{01}(t) \otimes \phi_1(t) + Q_{02}(t) \otimes \phi_2(t)$$

Similarly, the following equations are obtained:

$$\begin{aligned}
 \phi_1(t) &= Q_{13}(t) \otimes \phi_3(t) + Q_{14}(t) \otimes \phi_4(t) + Q_{15}(t) \otimes \phi_5(t) + Q_{16}(t) \otimes \phi_6(t) + Q_{17}(t) \otimes \phi_7(t) \\
 \phi_2(t) &= Q_{23}(t) \otimes \phi_3(t) + Q_{24}(t) \otimes \phi_4(t) + Q_{25}(t) \otimes \phi_5(t) + Q_{26}(t) \otimes \phi_6(t) + Q_{27}(t) \otimes \phi_7(t) \\
 \phi_3(t) &= Q_{30}(t) \otimes \phi_0(t) + Q_{38}(t) \\
 \phi_4(t) &= Q_{40}(t) \otimes \phi_0(t) + Q_{45}(t) \otimes \phi_5(t) + Q_{48}(t) \\
 \phi_5(t) &= Q_{50}(t) \otimes \phi_0(t) + Q_{56}(t) \otimes \phi_6(t) + Q_{58}(t) \\
 \phi_6(t) &= Q_{60}(t) \otimes \phi_0(t) + Q_{67}(t) \otimes \phi_7(t) + Q_{68}(t) \\
 \phi_7(t) &= Q_{70}(t) \otimes \phi_0(t) + Q_{78}(t)
 \end{aligned}$$

Taking Laplace-Stieltjes transform of the above system of equations, rearranging the terms and solving the above system of equations for  $\phi_0^{**}(s)$ , we obtain

$$\phi_0^{**}(s) = \frac{N_1(s)}{D_1(s)}$$

where

$$N_1(s) = \begin{vmatrix} 0 & -Q_{01}^{**}(s) & -Q_{02}^{**}(s) & 0 & 0 & 0 & 0 & 0 \\ 0 & 1 & 0 & -Q_{13}^{**}(s) & -Q_{14}^{**}(s) & -Q_{15}^{**}(s) & -Q_{16}^{**}(s) & -Q_{17}^{**}(s) \\ 0 & 0 & 1 & -Q_{23}^{**}(s) & -Q_{24}^{**}(s) & -Q_{25}^{**}(s) & -Q_{26}^{**}(s) & -Q_{27}^{**}(s) \\ Q_{38}^{**}(s) & 0 & 0 & 1 & 0 & 0 & 0 & 0 \\ Q_{48}^{**}(s) & 0 & 0 & 0 & 1 & -Q_{45}^{**}(s) & 0 & 0 \\ Q_{58}^{**}(s) & 0 & 0 & 0 & 0 & 1 & -Q_{56}^{**}(s) & 0 \\ Q_{68}^{**}(s) & 0 & 0 & 0 & 0 & 0 & 1 & -Q_{67}^{**}(s) \\ Q_{78}^{**}(s) & 0 & 0 & 0 & 0 & 0 & 0 & 1 \end{vmatrix}$$

and

$$D_1(s) = \begin{vmatrix} 1 & -Q_{01}^{**}(s) & -Q_{02}^{**}(s) & 0 & 0 & 0 & 0 & 0 \\ 0 & 1 & 0 & -Q_{13}^{**}(s) & -Q_{14}^{**}(s) & -Q_{15}^{**}(s) & -Q_{16}^{**}(s) & -Q_{17}^{**}(s) \\ 0 & 0 & 1 & -Q_{23}^{**}(s) & -Q_{24}^{**}(s) & -Q_{25}^{**}(s) & -Q_{26}^{**}(s) & -Q_{27}^{**}(s) \\ -Q_{30}^{**}(s) & 0 & 0 & 1 & 0 & 0 & 0 & 0 \\ -Q_{40}^{**}(s) & 0 & 0 & 0 & 1 & -Q_{45}^{**}(s) & 0 & 0 \\ -Q_{50}^{**}(s) & 0 & 0 & 0 & 0 & 1 & -Q_{56}^{**}(s) & 0 \\ -Q_{60}^{**}(s) & 0 & 0 & 0 & 0 & 0 & 1 & -Q_{67}^{**}(s) \\ -Q_{70}^{**}(s) & 0 & 0 & 0 & 0 & 0 & 0 & 1 \end{vmatrix}$$

Solving the above determinants, we get

$$\begin{aligned} N_1(s) = & Q_{01}^{**}(s)Q_{13}^{**}(s)Q_{38}^{**}(s) + Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{48}^{**}(s) + Q_{02}^{**}(s)Q_{23}^{**}(s)Q_{38}^{**}(s) \\ & + Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{48}^{**}(s) + Q_{01}^{**}(s)Q_{15}^{**}(s)Q_{58}^{**}(s) + Q_{01}^{**}(s)Q_{16}^{**}(s)Q_{68}^{**}(s) \\ & + Q_{01}^{**}(s)Q_{17}^{**}(s)Q_{78}^{**}(s) + Q_{02}^{**}(s)Q_{25}^{**}(s)Q_{58}^{**}(s) + Q_{02}^{**}(s)Q_{26}^{**}(s)Q_{68}^{**}(s) \\ & + Q_{02}^{**}(s)Q_{27}^{**}(s)Q_{78}^{**}(s) + Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{45}^{**}(s)Q_{58}^{**}(s) \\ & + Q_{01}^{**}(s)Q_{15}^{**}(s)Q_{56}^{**}(s)Q_{68}^{**}(s) + Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{45}^{**}(s)Q_{58}^{**}(s) \\ & + Q_{02}^{**}(s)Q_{25}^{**}(s)Q_{56}^{**}(s)Q_{68}^{**}(s) + Q_{01}^{**}(s)Q_{16}^{**}(s)Q_{67}^{**}(s)Q_{78}^{**}(s) \\ & + Q_{02}^{**}(s)Q_{26}^{**}(s)Q_{67}^{**}(s)Q_{78}^{**}(s) + Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{68}^{**}(s) \\ & + Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{68}^{**}(s) + Q_{01}^{**}(s)Q_{15}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{78}^{**}(s) \\ & + Q_{02}^{**}(s)Q_{25}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{78}^{**}(s) \\ & + Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{78}^{**}(s) \\ & + Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{78}^{**}(s) \end{aligned}$$

$$\begin{aligned} D_1(s) = & 1 - Q_{01}^{**}(s)Q_{13}^{**}(s)Q_{30}^{**}(s) - Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{40}^{**}(s) - Q_{02}^{**}(s)Q_{23}^{**}(s)Q_{30}^{**}(s) \\ & - Q_{01}^{**}(s)Q_{15}^{**}(s)Q_{50}^{**}(s) - Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{40}^{**}(s) - Q_{01}^{**}(s)Q_{16}^{**}(s)Q_{60}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{25}^{**}(s)Q_{50}^{**}(s) - Q_{01}^{**}(s)Q_{17}^{**}(s)Q_{70}^{**}(s) - Q_{02}^{**}(s)Q_{26}^{**}(s)Q_{60}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{27}^{**}(s)Q_{70}^{**}(s) - Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{45}^{**}(s)Q_{50}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{45}^{**}(s)Q_{50}^{**}(s) - Q_{01}^{**}(s)Q_{15}^{**}(s)Q_{56}^{**}(s)Q_{60}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{25}^{**}(s)Q_{56}^{**}(s)Q_{60}^{**}(s) - Q_{01}^{**}(s)Q_{16}^{**}(s)Q_{67}^{**}(s)Q_{70}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{26}^{**}(s)Q_{67}^{**}(s)Q_{70}^{**}(s) - Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{60}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{60}^{**}(s) - Q_{01}^{**}(s)Q_{15}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{70}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{25}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{70}^{**}(s) \\ & - Q_{01}^{**}(s)Q_{14}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{70}^{**}(s) \\ & - Q_{02}^{**}(s)Q_{24}^{**}(s)Q_{45}^{**}(s)Q_{56}^{**}(s)Q_{67}^{**}(s)Q_{70}^{**}(s) \end{aligned}$$

Mean survival time for the patient starting in state  $S_0$  is given by

$$T_0 = \lim_{s \rightarrow 0} \frac{1 - \phi_0^{**}(s)}{s}$$

Using the above value of  $\phi_0^{**}(s)$ , we obtain

$$T_0 = \frac{N}{D},$$



where

$$\begin{aligned}
 N = & \mu_0 + p_{01}\mu_1 + p_{02}\mu_2 + p_{01}p_{13}\mu_3 + p_{01}p_{14}\mu_4 + p_{01}p_{15}\mu_5 + p_{01}p_{16}\mu_6 + p_{01}p_{17}\mu_7 \\
 & + p_{02}p_{23}\mu_3 + p_{02}p_{24}\mu_4 + p_{02}p_{25}\mu_5 + p_{02}p_{26}\mu_6 + p_{02}p_{27}\mu_7 + p_{01}p_{14}p_{45}\mu_5 \\
 & + p_{01}p_{15}p_{56}\mu_6 + p_{01}p_{16}p_{67}\mu_7 + p_{02}p_{24}p_{45}\mu_5 + p_{02}p_{25}p_{56}\mu_6 + p_{02}p_{26}p_{67}\mu_7 \\
 & + p_{01}p_{14}p_{45}p_{56}\mu_6 + p_{02}p_{24}p_{45}p_{56}\mu_6 + p_{01}p_{15}p_{56}p_{67}\mu_7 + p_{02}p_{25}p_{56}p_{67}\mu_7 \\
 & + p_{01}p_{14}p_{45}p_{56}p_{67}\mu_7 + p_{02}p_{24}p_{45}p_{56}p_{67}\mu_7
 \end{aligned}$$

and

$$\begin{aligned}
 D = & 1 - p_{01}p_{13}p_{30} - p_{01}p_{14}p_{40} - p_{01}p_{15}p_{50} - p_{01}p_{16}p_{60} - p_{01}p_{17}p_{70} - p_{02}p_{23}p_{30} \\
 & - p_{02}p_{24}p_{40} - p_{02}p_{25}p_{50} - p_{02}p_{26}p_{60} - p_{02}p_{27}p_{70} - p_{01}p_{14}p_{45}p_{50} - p_{01}p_{15}p_{56}p_{60} \\
 & - p_{01}p_{16}p_{67}p_{70} - p_{02}p_{24}p_{45}p_{50} - p_{02}p_{25}p_{56}p_{60} - p_{02}p_{26}p_{67}p_{70} - p_{01}p_{14}p_{45}p_{56}p_{60} \\
 & - p_{01}p_{15}p_{56}p_{67}p_{70} - p_{02}p_{24}p_{45}p_{56}p_{60} - p_{02}p_{25}p_{56}p_{67}p_{70} - p_{01}p_{14}p_{45}p_{56}p_{67}p_{70} \\
 & - p_{02}p_{24}p_{45}p_{56}p_{67}p_{70}.
 \end{aligned}$$

■

**Theorem 2.** Expected total time in home isolation for the patient starting in state  $S_0$  is given by

$$\frac{\mu_3(p_{01}p_{13} + p_{02}p_{23})}{D},$$

where  $D$  has been already specified in Theorem 1.

**Proof.** Let  $\psi_i(t)$  denote the probability that the patient is in home isolation at instant  $t$ , given that the patient entered state  $S_i$  at  $t = 0$ . Proceeding on similar lines shown in Theorem 1, we obtained the following recursive relations:

$$\begin{aligned}
 \psi_0(t) &= q_{01}(t) \odot \psi_1(t) + q_{02}(t) \odot \psi_2(t) \\
 \psi_1(t) &= q_{13}(t) \odot \psi_3(t) + q_{14}(t) \odot \psi_4(t) + q_{15}(t) \odot \psi_5(t) + q_{16}(t) \odot \psi_6(t) + q_{17}(t) \odot \psi_7(t) \\
 \psi_2(t) &= q_{23}(t) \odot \psi_3(t) + q_{24}(t) \odot \psi_4(t) + q_{25}(t) \odot \psi_5(t) + q_{26}(t) \odot \psi_6(t) + q_{27}(t) \odot \psi_7(t) \\
 \psi_3(t) &= W_3(t) + q_{30}(t) \odot \psi_0(t) \\
 \psi_4(t) &= q_{40}(t) \odot \psi_0(t) + q_{45}(t) \odot \psi_5(t) \\
 \psi_5(t) &= q_{50}(t) \odot \psi_0(t) + q_{56}(t) \odot \psi_6(t) \\
 \psi_6(t) &= q_{60}(t) \odot \psi_0(t) + q_{67}(t) \odot \psi_7(t) \\
 \psi_7(t) &= q_{70}(t) \odot \psi_0(t)
 \end{aligned}$$

where

$$W_3(t) = 1 - a_1G_1(t) - b_1H_1(t)$$

Taking Laplace transform of the above system of equations and solving for  $\psi_0^*(s)$ , we obtain

$$\psi_0^*(s) = \frac{N_2(s)}{D_1(s)},$$

where

$$N_2(s) = W_3^*(s)(q_{01}^*(s)q_{13}^*(s) + q_{02}^*(s)q_{23}^*(s))$$

and  $D_1(s)$  has been already specified in Theorem 1.

Expected total time in home isolation for the patient starting in state  $S_0$  is given by

$$\begin{aligned}
 \int_0^\infty \psi_0(t) dt &= \lim_{s \rightarrow 0} \psi_0^*(s) \\
 &= \frac{\mu_3(p_{01}p_{13} + p_{02}p_{23})}{D},
 \end{aligned}$$

where  $D$  has been already specified in Theorem 1.

■

**Theorem 3.** Expected total time in hospital for the patient starting in state  $S_0$  is given by

$$\frac{1}{D} (p_{01}p_{14}\mu_4 + p_{01}p_{15}\mu_5 + p_{01}p_{16}\mu_6 + p_{01}p_{17}\mu_7 + p_{02}p_{24}\mu_4 + p_{02}p_{25}\mu_5 + p_{02}p_{26}\mu_6 + p_{02}p_{27}\mu_7 + p_{01}p_{14}p_{45}\mu_5 + p_{01}p_{15}p_{56}\mu_6 + p_{01}p_{16}p_{67}\mu_7 + p_{02}p_{24}p_{45}\mu_5 + p_{02}p_{25}p_{56}\mu_6 + p_{02}p_{26}p_{67}\mu_7 + p_{01}p_{14}p_{45}p_{56}\mu_6 + p_{02}p_{24}p_{45}p_{56}\mu_6 + p_{01}p_{15}p_{56}p_{67}\mu_7 + p_{02}p_{25}p_{56}p_{67}\mu_7 + p_{01}p_{14}p_{45}p_{56}p_{67}\mu_7 + p_{02}p_{24}p_{45}p_{56}p_{67}\mu_7),$$

where  $D$  has been already specified in Theorem 1.

**Proof.** Let  $\chi_i(t)$  denote the probability that the patient is in hospital at instant  $t$ , given that the patient entered state  $S_i$  at  $t = 0$ . Proceeding on similar lines shown in Theorem 1, we obtained the following recursive relations.

$$\begin{aligned} \chi_0(t) &= q_{01}(t) \odot \chi_1(t) + q_{02}(t) \odot \chi_2(t) \\ \chi_1(t) &= q_{13}(t) \odot \chi_3(t) + q_{14}(t) \odot \chi_4(t) + q_{15}(t) \odot \chi_5(t) + q_{16}(t) \odot \chi_6(t) + q_{17}(t) \odot \chi_7(t) \\ \chi_2(t) &= q_{23}(t) \odot \chi_3(t) + q_{24}(t) \odot \chi_4(t) + q_{25}(t) \odot \chi_5(t) + q_{26}(t) \odot \chi_6(t) + q_{27}(t) \odot \chi_7(t) \\ \chi_3(t) &= q_{30}(t) \odot \chi_0(t) \\ \chi_4(t) &= W_4(t) + q_{40}(t) \odot \chi_0(t) + q_{45}(t) \odot \chi_5(t) \\ \chi_5(t) &= W_5(t) + q_{50}(t) \odot \chi_0(t) + q_{56}(t) \odot \chi_6(t) \\ \chi_6(t) &= W_6(t) + q_{60}(t) \odot \chi_0(t) + q_{67}(t) \odot \chi_7(t) \\ \chi_7(t) &= W_7(t) + q_{70}(t) \odot \chi_0(t) \end{aligned}$$

where

$$\begin{aligned} W_4(t) &= 1 - a_2G_2(t) - c_1(1 - e^{-\lambda_1 t}) - b_2H_2(t) \\ W_5(t) &= 1 - a_3G_3(t) - c_2(1 - e^{-\lambda_2 t}) - b_3H_3(t) \\ W_6(t) &= 1 - a_4G_4(t) - c_3(1 - e^{-\lambda_3 t}) - b_4H_4(t) \\ W_7(t) &= 1 - a_5G_5(t) - b_5H_5(t) \end{aligned}$$

Taking Laplace transform of the above system of equations and solving for  $\chi_0^*(s)$ , we obtain

$$\chi_0^*(s) = \frac{N_3(s)}{D_1(s)},$$

where

$$\begin{aligned} N_3(s) &= W_4^*(s)(q_{01}^*(s)q_{14}^*(s) + q_{02}^*(s)q_{24}^*(s)) + W_5^*(s)(q_{01}^*(s)q_{15}^*(s) + q_{02}^*(s)q_{25}^*(s)) \\ &+ q_{01}^*(s)q_{14}^*(s)q_{45}^*(s) + q_{02}^*(s)q_{24}^*(s)q_{45}^*(s) + W_6^*(s)(q_{01}^*(s)q_{16}^*(s) + q_{02}^*(s)q_{26}^*(s)) \\ &+ q_{01}^*(s)q_{15}^*(s)q_{56}^*(s) + q_{02}^*(s)q_{25}^*(s)q_{56}^*(s) + q_{01}^*(s)q_{14}^*(s)q_{45}^*(s)q_{56}^*(s) \\ &+ q_{02}^*(s)q_{24}^*(s)q_{45}^*(s)q_{56}^*(s) + W_7^*(s)(q_{01}^*(s)q_{17}^*(s) + q_{02}^*(s)q_{27}^*(s)) \\ &+ q_{01}^*(s)q_{16}^*(s)q_{67}^*(s) + q_{02}^*(s)q_{26}^*(s)q_{67}^*(s) + q_{01}^*(s)q_{15}^*(s)q_{56}^*(s)q_{67}^*(s) \\ &+ q_{02}^*(s)q_{25}^*(s)q_{56}^*(s)q_{67}^*(s) + q_{01}^*(s)q_{14}^*(s)q_{45}^*(s)q_{56}^*(s)q_{67}^*(s) \\ &+ q_{02}^*(s)q_{24}^*(s)q_{45}^*(s)q_{56}^*(s)q_{67}^*(s) \end{aligned}$$

and  $D_1(s)$  has been already specified in Theorem 1.

Expected total time in hospital for the patient starting in state  $S_0$  is given by

$$\begin{aligned} \int_0^\infty \chi_0(t) dt &= \lim_{s \rightarrow 0} s \chi_0^*(s) \\ &= \lim_{s \rightarrow 0} \frac{N_3(s)}{D_1(s)} \end{aligned}$$

Using the above value of  $N_3(s)$  and simplifying we get the required result. ■

#### 4. NUMERICAL COMPUTATIONS

Numerical computations for the mean survival time, expected total time in home isolation, and expected total time in hospital have been performed. For illustrating our model results, the waiting time distributions are assumed as exponentials, as follows:  $g_i(t) \sim \exp(\gamma_i)$  and  $h_i(t) \sim \exp(\delta_i)$  where  $i=1,2,\dots,5$ .

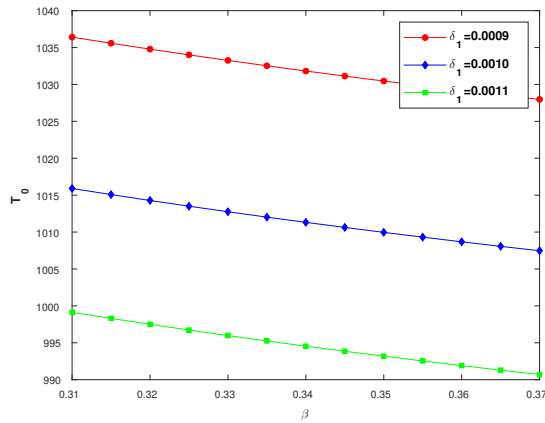
The severity levels of the disease are defined as under.

mild illness	$SpO_2 \geq 94\%$ on room air and no shortness of breath
moderate illness	$90\% \leq SpO_2 < 94\%$ on room air or $24 < R.R. \leq 30$ breaths per minute
severe illness	$SpO_2 < 90\%$ on room air or $R.R. > 30$ breaths per minute
critical illness	Respiratory failure or septic shock or multiple organ dysfunction or requires life sustaining treatment

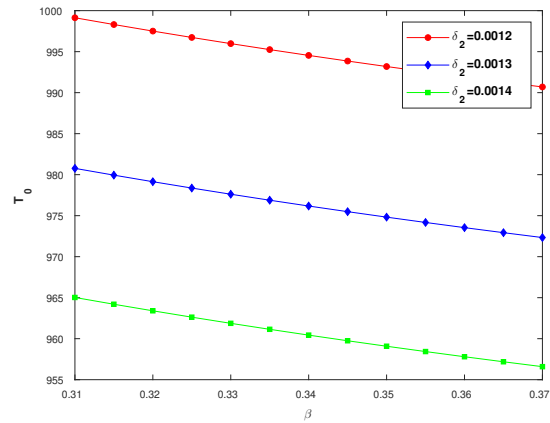
In addition, the following values for parameters are assumed:

$\beta=0.031/\text{day}$ ,  $\alpha=0.5/\text{day}$ ,  $\gamma_1=0.074/\text{day}$ ,  $\gamma_2=0.071/\text{day}$ ,  $\gamma_3=0.055/\text{day}$ ,  
 $\gamma_4=0.034/\text{day}$ ,  $\gamma_5=0.023/\text{day}$ ,  $\lambda_1=0.12/\text{day}$ ,  $\lambda_2=0.15/\text{day}$ ,  $\lambda_3=0.20/\text{day}$ ,  
 $\delta_1=0.0011/\text{day}$ ,  $\delta_2=0.0012/\text{day}$ ,  $\delta_3=0.0015/\text{day}$ ,  $\delta_4=0.0018/\text{day}$ ,  $\delta_5=0.0020/\text{day}$ ,  
 $p=0.7$ ,  $q=0.3$ ,  $p_1=0.74$ ,  $q_1=0.26$ ,  $p_2=0.18$ ,  $q_2=0.82$ ,  $r_1=0.83$ ,  $r_2=0.07$ ,  $r_3=0.06$ ,  $r_4=0.04$ ,  $a_1=0.98$ ,  $b_1=0.02$ ,  
 $a_2=0.85$ ,  $b_2=0.05$ ,  $c_1=0.10$ ,  $a_3=0.75$ ,  $b_3=0.08$ ,  $c_2=0.17$ ,  $a_4=0.65$ ,  $b_4=0.15$ ,  $c_3=0.20$ ,  $a_5=0.1$ ,  $b_5=0.9$ .

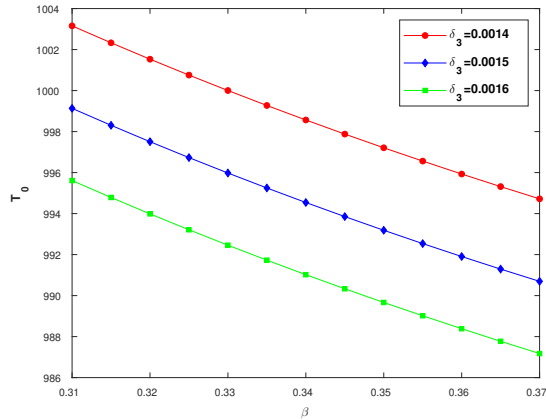
For the above values of parameters, we obtained mean survival time, expected total time in home isolation and expected total time in hospital and analysed how these parameters vary corresponding to perturbations in transmission rates, deteriorating rates, and death rates. The results obtained are depicted below. Figure 2-6 forecasts how variations in the transmission rate and death rates will affect the mean survival time. Figure 7 illustrates how the expected total time in home isolation changes as the recovery rate and death rate vary. Figure 8-11 predicts how perturbations in the recovery rates and deteriorating rates will affect the expected total time in hospital.



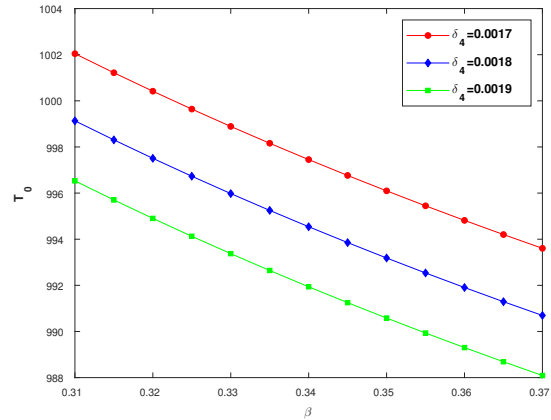
**Figure 2:** A plot of  $T_0$  with varied  $\beta$  and  $\delta_1$ . The behaviour of the mean survival time ( $T_0$ ) with respect to the transmission rate ( $\beta$ ) for different values of death rate ( $\delta_1$ ) is demonstrated. From the figure, it can be seen that the mean survival time ( $T_0$ ) decreases as the transmission rate ( $\beta$ ) increases and gives lower values for higher values of death rate ( $\delta_1$ ).



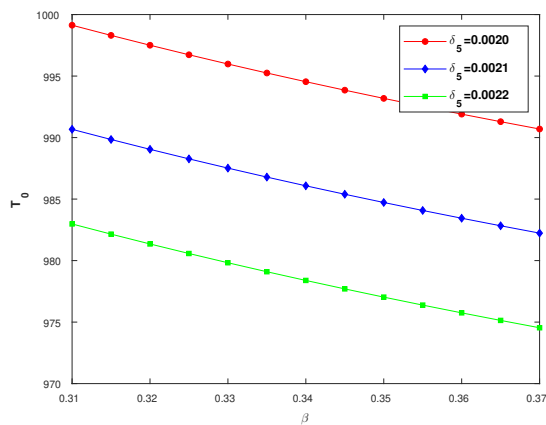
**Figure 3:** A plot of  $T_0$  with varied  $\beta$  and  $\delta_2$ . The behaviour of the mean survival time ( $T_0$ ) with respect to the transmission rate ( $\beta$ ) for different values of death rate ( $\delta_2$ ) is demonstrated. From the figure, it can be seen that the mean survival time ( $T_0$ ) decreases as the transmission rate ( $\beta$ ) increases and gives lower values for higher values of death rate ( $\delta_2$ ).



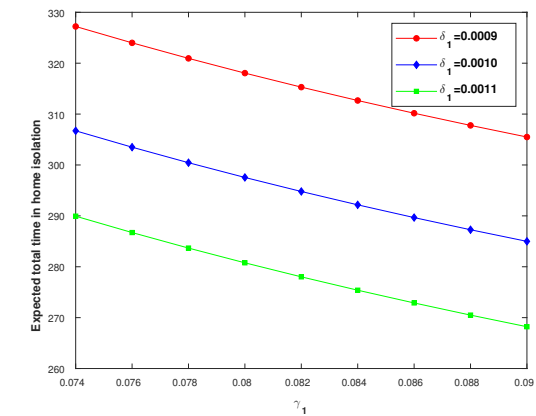
**Figure 4:** A plot of  $T_0$  with varied  $\beta$  and  $\delta_3$ . The behaviour of the mean survival time ( $T_0$ ) with respect to the transmission rate ( $\beta$ ) for different values of death rate ( $\delta_3$ ) is demonstrated. From the figure, it can be seen that the mean survival time ( $T_0$ ) decreases as the transmission rate ( $\beta$ ) increases and gives lower values for higher values of death rate ( $\delta_3$ ).



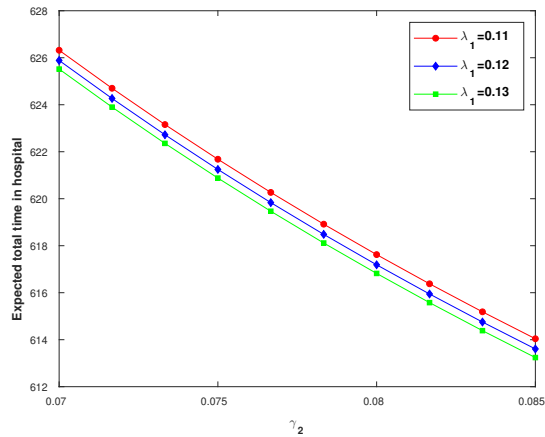
**Figure 5:** A plot of  $T_0$  with varied  $\beta$  and  $\delta_4$ . The behaviour of the mean survival time ( $T_0$ ) with respect to the transmission rate ( $\beta$ ) for different values of death rate ( $\delta_4$ ) is demonstrated. From the figure, it can be seen that the mean survival time ( $T_0$ ) decreases as the transmission rate ( $\beta$ ) increases and gives lower values for higher values of death rate ( $\delta_4$ ).



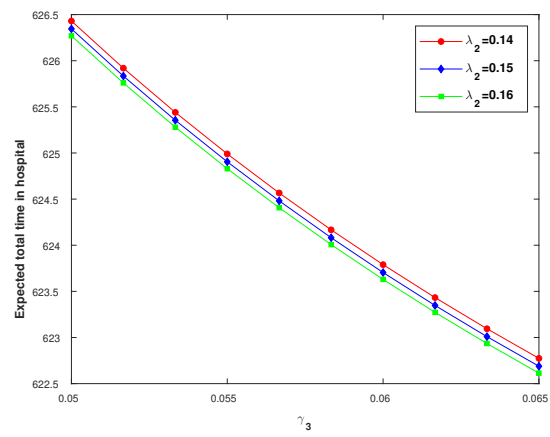
**Figure 6:** A plot of  $T_0$  with varied  $\beta$  and  $\delta_5$ . The behaviour of the mean survival time ( $T_0$ ) with respect to the transmission rate ( $\beta$ ) for different values of death rate ( $\delta_5$ ) is demonstrated. From the figure, it can be seen that the mean survival time ( $T_0$ ) decreases as the transmission rate ( $\beta$ ) increases and gives lower values for higher values of death rate ( $\delta_5$ ).



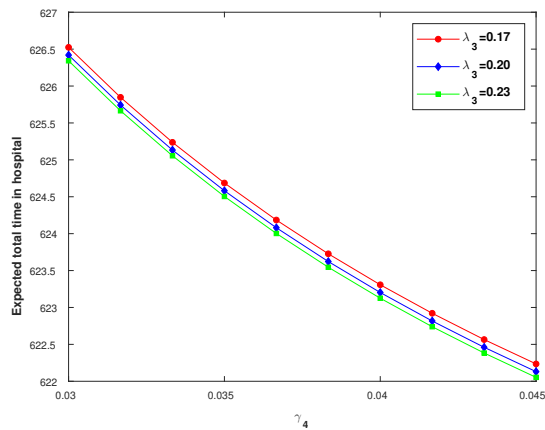
**Figure 7:** A plot of expected total time in home isolation with varied  $\gamma_1$  and  $\delta_1$ . The behaviour of the expected total time in home isolation with respect to the recovery rate ( $\gamma_1$ ) for different values of death rate ( $\delta_1$ ) is demonstrated. From the figure, it can be seen that the expected total time in home isolation decreases as the recovery rate ( $\gamma_1$ ) increases and gives lower values for higher values of death rate ( $\delta_1$ ).



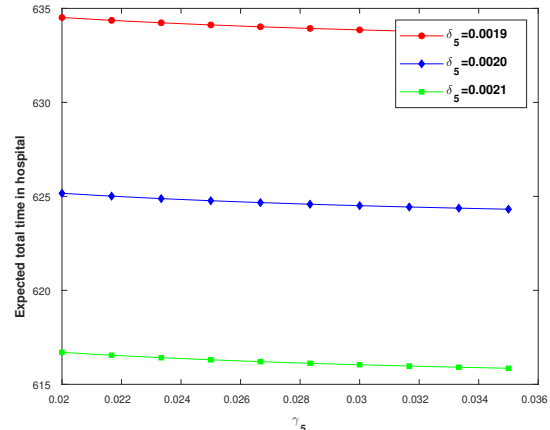
**Figure 8:** A plot of expected total time in hospital with varied  $\gamma_2$  and  $\lambda_1$ . The behaviour of the expected total time in hospital with respect to the recovery rate ( $\gamma_2$ ) for different values of deteriorating rate ( $\lambda_1$ ) is demonstrated. From the figure, it can be seen that the expected total time in hospital decreases as the recovery rate ( $\gamma_2$ ) increases and gives lower values for higher values of deteriorating rate ( $\lambda_1$ ).



**Figure 9:** A plot of expected total time in hospital with varied  $\gamma_3$  and  $\lambda_2$ . The behaviour of the expected total time in hospital with respect to the recovery rate ( $\gamma_3$ ) for different values of deteriorating rate ( $\lambda_2$ ) is demonstrated. From the figure, it can be seen that the expected total time in hospital decreases as the recovery rate ( $\gamma_3$ ) increases and gives lower values for higher values of deteriorating rate ( $\lambda_2$ ).



**Figure 10:** A plot of expected total time in hospital with varied  $\gamma_4$  and  $\lambda_3$ . The behaviour of the expected total time in hospital with respect to the recovery rate ( $\gamma_4$ ) for different values of deteriorating rate ( $\lambda_3$ ) is demonstrated. From the figure, it can be seen that the expected total time in hospital decreases as the recovery rate ( $\gamma_4$ ) increases and gives lower values for higher values of deteriorating rate ( $\lambda_3$ ).



**Figure 11:** A plot of expected total time in hospital with varied  $\gamma_5$  and  $\delta_5$ . The behaviour of the expected total time in hospital with respect to the recovery rate ( $\gamma_5$ ) for different values of death rate ( $\delta_5$ ) is demonstrated. From the figure, it can be seen that the expected total time in hospital decreases as the recovery rate ( $\gamma_5$ ) increases and gives lower values for higher values of death rate ( $\delta_5$ ).

## 5. CONCLUSION

Designing prevention strategies and infection control policies can be benefitted using mathematical models of infectious diseases. On the basis of the idea of semi-Markov process, a new framework for modelling infectious diseases have been presented. The analysis of the model aids in examining the effects of various parameters on various system measures. According to the analysis presented,

it is concluded that the mean survival time declines as the disease's transmission rate rises and has lower values for greater values of death rate. The expected total time in home isolation reduces with rising recovery rates and has lower values for higher death rates. The expected total time in hospital decreases as the recovery rate increases and gives lower values for higher values of deteriorating rate. Through this article, the use and significance of semi-Markov models in understanding infectious diseases trends is demonstrated. This study may be helpful in selecting the optimal intervention tactics and creating effective infection control measures.

#### DECLARATION OF COMPETING INTEREST

None.

#### ACKNOWLEDGEMENT

The author Sujata Sukhija delightedly acknowledges Human Resource Development Group of Council of Scientific & Industrial Research (CSIR), India, for providing fellowship through file number 09/382(0258)/2020-EMR-I.

#### REFERENCES

- [1] Cao, Q., Buskens, E., Feenstra, T., Jaarsma, T., Hillege, H., & Postmus, D. (2016). Continuous time semi-markov models in health economic decision making: An illustrative example in heart failure disease management. *Medical Decision Making*, 36(1), 59–71. <https://doi.org/10.1177/0272989x15593080>
- [2] Castelli, C., Combescure, C., Foucher, Y., & Datures, J.-P. (2007). Cost-effectiveness analysis in colorectal cancer using a semi-markov model. *Statistics in Medicine*, 26(30), 5557–5571. <https://doi.org/10.1002/sim.3112>
- [3] Centers for Disease Control and Prevention. (n.d.). Quarantine and isolation. Retrieved December 2, 2022, from <https://www.cdc.gov>
- [4] Chakraborty, H., Hossain, A., & Latif, M. A. (2019). A three-state continuous time Markov chain model for HIV disease burden. *Journal of Applied Statistics*, 46(9), 1671–1688. <https://doi.org/10.1080/02664763.2018.1555573>
- [5] Claris, S., & Delson, C. (2018). Time-homogeneous markov process for hiv/aids progression under a combination treatment therapy: Cohort study, south africa. *Theoretical Biology and Medical Modelling*, 15(1), 1–14. <https://doi.org/10.1186/s12976-017-0075-4>
- [6] Davidov, O. (1999). The steady-state probabilities for regenerative semi-markov processes with application to prevention and screening. *Applied Stochastic Models and Data Analysis*, 15(1), 55–63. [https://doi.org/https://doi.org/10.1002/\(SICI\)1099-0747\(199903\)15:1<55::AID-ASM358>3.0.CO;2-4](https://doi.org/https://doi.org/10.1002/(SICI)1099-0747(199903)15:1<55::AID-ASM358>3.0.CO;2-4)
- [7] Farahani, M. V., et al. (2020). Application of multi-state model in analyzing of breast cancer data. *Journal of research in health sciences*, 19(4), 1–5. <https://pubmed.ncbi.nlm.nih.gov/32291364>
- [8] Goshu, A. T., & Dessie, Z. G. (2013). Modelling progression of HIV/AIDS disease stages using semi-markov processes. *Journal of Data Science*, 11(2), 269–280. [https://doi.org/10.6339/JDS.2013.11\(2\).1136](https://doi.org/10.6339/JDS.2013.11(2).1136)
- [9] Grover, G., Sabharwal, A., Kumar, S., & Thakur, A. K. (2019). A multi-state markov model for the progression of chronic kidney disease. *Turkiye Klinikleri Journal of Biostatistics*, 11(1). <https://doi.org/10.5336/biostatic.2018-62156>
- [10] Kao, E. P. C. (1974). A note on the first two moments of times in transient states in a semi-markov process. *Journal of Applied Probability*, 11(1), 193–198. <https://doi.org/10.2307/3212598>

- [11] Kay, R. (1986). A markov model for analysing cancer markers and disease states in survival studies. *Biometrics*, 42(4), 855–865. <https://doi.org/10.2307/2530699>
- [12] Levy, P. (1954). Processus semi-markoviens. *Proc. Int. Congress. Math. (Amsterdam)*, 3, 416–426.
- [13] Ramezankhani, A., Azizi, F., Hadaegh, F., & Momenan, A. A. (2018). Diabetes and number of years of life lost with and without cardiovascular disease: A multi-state homogeneous semi-markov model. *Acta Diabetologica*, 55(3), 253–262. <https://doi.org/10.1007/s00592-017-1083-x>
- [14] Smith, W. L. (1955). Regenerative stochastic processes. *Proc. Roy. Soc. Ser. A*, 232, 6–31.
- [15] Uhry, Z., Hédelin, G., Colonna, M., Asselain, B., Arveux, P., Rogel, A., Exbrayat, C., Guldenfels, C., Courtial, I., Soler-Michel, P., Molinié, F., Eilstein, D., & Duffy, S. (2010). Multi-state markov models in cancer screening evaluation: A brief review and case study. *Statistical Methods in Medical Research*, 19(5), 463–486. <https://doi.org/10.1177/0962280209359848>
- [16] Weiss, G. H., & Zelen, M. (1965). A semi-markov model for clinical trials. *Journal of Applied Probability*, 2(2), 269–285. <https://doi.org/10.2307/3212194>
- [17] World Health Organization. (n.d.). The top 10 causes of death. Retrieved May 4, 2022, from <https://www.who.int/news-room/fact-sheets/detail/the-top-10-causes-of-death>
- [18] Wu, P., Zhang, R., & Din, A. (2023). Mathematical analysis of an age-since infection and diffusion HIV/AIDS model with treatment adherence and dirichlet boundary condition. *Mathematics and Computers in Simulation*, 214, 1–27. <https://doi.org/https://doi.org/10.1016/j.matcom.2023.06.018>
- [19] Yang, J., Chen, Z., Tan, Y., Liu, Z., & Cheke, R. A. (2023). Threshold dynamics of an age-structured infectious disease model with limited medical resources. *Mathematics and Computers in Simulation*, 214, 114–132. <https://doi.org/https://doi.org/10.1016/j.matcom.2023.07.003>
- [20] Zvifadzo, M. Z., F, C. T., Jim, T., & Eustasius, M. (2019). HIV disease progression among antiretroviral therapy patients in zimbabwe: A multistate markov model. *Frontiers in public health*, 7, 326. <https://doi.org/10.3389/fpubh.2019.00326>