

Long short-term memory stacking model to predict the number of cases and deaths caused by COVID-19

Filipe Fernandes^{a,*}, Stéfano Frizzo Stefenon^{a,b,c}, Laio Oriel Seman^d, Ademir Nied^a, Fernanda Cristina Silva Ferreira^e, Maria Cristina Mazzetti Subtil^e, Anne Carolina Rodrigues Klaar^e and Valderi Reis Quietinho Leithardt^{f,g}

^a*Electrical Engineering Graduate Program, Santa Catarina State University. R. Paulo Malschitzki, North Industrial Zone, Joinville, Brazil*

^b*Fondazione Bruno Kessler, Istituto per la Ricerca Scientifica e Tecnologica. Via Sommarive, Povo, Trento, Italy*

^c*Computer Science and Artificial Intelligence, University of Udine.*

Via delle Scienze 206, 33100 Udine, Italy

^d*Graduate Program in Applied Computer Science, University of Vale do Itajaí.*

Uruguai 458, Centro, Itajaí, 88302-202, Brazil

^e*University of Planalto Catarinense.*

Av. Mal. Castelo Branco 170, Universitário, Lages, Brazil

^f*VALORIZA, Research Center for Endogenous Resources Valorization, Instituto Politécnico de Portalegre.*

7300-555 Portalegre, Portugal

^g*COPELABS, Universidade Lusófona de Humanidades e Tecnologias.*

Campo Grande 376, 1749-024 Lisboa, Portugal

Abstract. The long short-term memory (LSTM) is a high-efficiency model for forecasting time series, for being able to deal with a large volume of data from a time series with nonlinearities. As a case study, the stacked LSTM will be used to forecast the growth of the pandemic of COVID-19, based on the increase in the number of contaminated and deaths in the State of Santa Catarina, Brazil. COVID-19 has been spreading very quickly, causing great concern in relation to the ability to care for critically ill patients. Control measures are being imposed by governments with the aim of reducing the contamination and the spreading of viruses. The forecast of the number of contaminated and deaths caused by COVID-19 can help decision making regarding the adopted restrictions, making them more or less rigid depending on the pandemic's control capacity. The use of LSTM stacking shows an R^2 of 0.9625 for confirmed cases and 0.9656 for confirmed deaths caused by COVID-19, being superior to the combinations among other evaluated models.

Keywords: Long short-term memory, COVID-19, spreading viruses

1. Introduction

Recently the new coronavirus (SARS-CoV-2) proved to be a highly contagious virus, considering that it soon spread throughout the world and caused serious consequences to the health of the population [1]. Due to easy contagion, certain restrictive mea-

*Corresponding author. Filipe Fernandes, Electrical Engineering Graduate Program, Santa Catarina State University. R. Paulo Malschitzki 200, North Industrial Zone, Joinville, Brazil. E-mail: filipe.fernandes@edu.udesc.br.

36 sures were imposed in Brazil to prevent the virus
 37 from spreading widely and generate catastrophic con-
 38 sequences on public health. One of the main concerns
 39 is that the health system is unable to receive and treat
 40 all patients properly [2].

41 SARS-CoV-2 causes the disease COVID-19,
 42 which presents a clinical picture that can range from
 43 asymptomatic infections to severe respiratory condi-
 44 tions, which in the absence of treatment can cause
 45 death [3]. According to the World Health Organiza-
 46 tion (WHO), most patients with COVID-19 can be
 47 asymptomatic, which makes it difficult to identify
 48 where the virus is spreading [4].

49 Some patients with COVID-19 may require hospi-
 50 tal care with support for the treatment of respiratory
 51 failure, which makes it necessary to have an adequate
 52 forecast for the increase of cases [5]. From a forecast
 53 it is possible to have control of restrictive measures,
 54 in relation to the capacity of advanced treatments [6].
 55 Based on this need, this article aims to assess the
 56 ability to predict deaths and infections in the state of
 57 Santa Catarina in southern Brazil, in order to indicate
 58 whether restrictive measures are generating efficient
 59 results.

60 Some authors have carried out works related to the
 61 evaluation of the spread of viruses and the ability
 62 to predict this disease. In the work of Pinto, Nepo-
 63 muceno and Campanharo a study is presented on
 64 the spread of infectious diseases [7]. The evalua-
 65 tion shows that complex networks result in curves
 66 of infected individuals with different behaviors and,
 67 therefore, the growth of a given disease is highly sen-
 68 sitive to the model used. In [8] published reports on
 69 forecast models for the diagnosis of COVID-19 in
 70 patients with suspected infection are analyzed. In this
 71 study, the ability to detect people in the general pop-
 72 ulation at risk of being admitted to the hospital for
 73 pneumonia is assessed.

74 Al-qaness et al. [9] present in their study a new
 75 model that aims to predict 10 days in advance the
 76 number of confirmed cases of COVID-19 using as a
 77 basis the cases previously registered in China. For
 78 that, they used an adaptive neuro-fuzzy inference
 79 system model (ANFIS). In comparison with other
 80 existing models, ANFIS showed better performance
 81 in calculating error and computational effort.

82 Sajadi et al. [10] conducted a study in which
 83 climate data from cities with significant commu-
 84 nity dissemination of COVID-19 were examined
 85 using retrospective analysis. So far, there has been
 86 significant community dissemination in cities and
 87 regions with similar weather patterns with average

88 temperatures in the range of 5-11°C and humid-
 89 ity between 4-7g/m³. The outbreak distribution in
 90 regions with these climatographic characteristics is
 91 consistent with a seasonal respiratory virus.

92 Fanelli e Piazza [11] present an analysis of the
 93 spread of COVID-19 in China, Italy and France. In
 94 this work they mention that in an initial analysis of
 95 *day-lag* graphs, the results show that it is possible
 96 to identify a simple model to understand the spread
 97 of the epidemic, height and time to reach the peak
 98 of the curve of confirmed infected individuals. The
 99 analysis also shows that the recovery rate follows the
 100 same kinetics regardless of the country under anal-
 101 ysis, while the rates of infection and death vary. A
 102 simulation of the effects of drastic measures to con-
 103 tain the outbreak in Italy shows that a reduction in the
 104 rate of infection actually causes an attenuation of the
 105 peak of the epidemic, and it is also observed that the
 106 rate of infection needs to be reduced dramatically and
 107 quickly to see a noticeable decrease in the epidemic
 108 peak and mortality rate.

109 Roosa et al. [12] used in their research phenomeno-
 110 logical models already validated for a short-term
 111 forecast of the cases reported in Guangdong and
 112 Zhejiang, China. It was possible to make a 5 and
 113 10 day forecast using accumulated data collected
 114 from the National Health Commission of China until
 115 February 13, 2020. For this, the researchers used a
 116 generalized logistic growth model, Richards' growth
 117 models and a sub-epidemic wave model that had pre-
 118 viously been used to predict outbreaks of infectious
 119 diseases at other times. By using 3 models it was
 120 possible to obtain a forecast, using the 10-day con-
 121 dition, of 65 to 81 additional cases in Guangdong
 122 and 44 to 354 cases in Zhejiang. It can be seen with
 123 this that the transmission in both cities is showing a
 124 decrease.

125 In the article by He, Tang and Rong [13], a
 126 short-time stochastic epidemic model with binomial
 127 distribution was presented for the study of coro-
 128 navirus transmission. The model parameters were
 129 adjusted based on data collected in China between 11
 130 and 13 February 2020. The estimates of the contact
 131 rate and the effective number of reproduction indicate
 132 the efficiency of the control measures when applied
 133 quickly. The simulations show that the total number
 134 of confirmed cases peaked at the end of February
 135 2020, considering that the applied control measures
 136 were maintained. Although the number of new cases
 137 of infection is decreasing, there is still the possibility
 138 of future outbreaks if adequate protective measures
 139 are not taken.

There are several algorithms that can be used to forecast time series. Choosing the best model [14] and configuration [15] can improve the predictability of the algorithm. In the article [16] the forecast is made through a neuro-fuzzy network with success for a short-term time series. In [17], several ways of using the Ensemble algorithm are applied to the short-term forecasting problem. The use of optimization methods and hybrid algorithms is also a promising alternative to assess the problem [18].

Time series forecasting is applied to several areas of knowledge, some works stand out for this purpose using advanced forecasting techniques. In [19] the least squares support vector machine classifier combined to chaotic cloud particle swarm optimization is applied to forecasting ship motion, in [20] and [21] a hybrid model is used for forecasting energy consumption, Zhang and Hong [22] used a combined model for the same purpose. In [23] a combination of models is performed to improve the predictability of the algorithm. Papers [24] and [25] perform the prediction based on a support vector regression model.

Among the algorithms for the prediction of time series [26–28], neural networks with deep learning have gained space for the time series forecasting of COVID-19 spread [29–32], considering that they have the capacity to analyze a large volume of data with non-linearities. Long short-term memory (LSTM) is a recurrent neural network (RNN) that can process entire sequences of data, making this algorithm suitable for the problem in question [33]. The insensitivity regarding the gap length gives the LSTM an advantage over traditional RNNs and classic approaches, such as nonlinear auto-regressive algorithms.

The use of stacked LSTM is promising for time series forecasting [34]. Stacking the layers can improve the model's ability to capture temporal dependency patterns. According to Liang et al. [35] stacked LSTM is suitable to perform wind speed prediction for wind power producers and grid operators. The results show that this type of model has the ability to capture and learn uncertainties at the same time that it presents an output performance.

The stacked LSTM model has applications in several areas, and it can even be used to forecast stock prices in the financial market. According to Xu et al. [36], the use of wavelet transformation reduces noise and improves the predictive capacity of the model. Bao et al. [37] presents a work with the same objective-based on stacked autoencoders, the results

show that this approach is superior to other predictive models.

In this paper, the stacked LSTM model was used because it has the ability to handle non-linear data. The measurement of cases may vary due to the under-reporting of cases on weekends and variation in the weekly work schedules of the health teams. This variation can cause peaks of cases, not representing the actual situation of the pandemic. For this reason, the forecasting model needs to be able to interpret non-linear data.

The contributions of this paper to predict the number of cases and deaths caused by COVID-19 are summarized in the following:

- The first contribution is the forecast of an increase in cases and deaths caused by COVID-19 in Santa Catarina, Brazil. Based on a reliable forecasting model, it is possible to define strategies to minimize the impact of the pandemic caused by COVID19;
- The second contribution focuses on use of a deep learning model with layers stacked. This network structure is robust to deal with non-linear data, improving the quality of time series prediction;
- The third contribution is related to the evaluation of all network parameters to improve the model. Through optimized parameters, a model with greater capacity to deal with the problem is obtained.

In this article the stacked LSTM will be used to assess the ability to predict contagion and the evolution of the number of deaths caused by COVID-19, using the State of Santa Catarina (Brazil) as a case study. In Section 3 the proposed method will be explained. In Section 2 the problem related to the virus will be presented. In Section 4 the results of the analysis will be discussed. Finally, Section 5 will present the conclusions of this article.

2. Case study

The World Health Organization officially called the disease caused by the coronavirus COVID-19 [38]. The number 19 refers to the year 2019 when the first cases in Wuhan (China) were publicly disclosed. The name Corona refers to the shape of the virus that resembles the shape of a crown, Figure 1 presents an illustrative image of the Coronavirus (SARS-CoV-2 virus) [39].

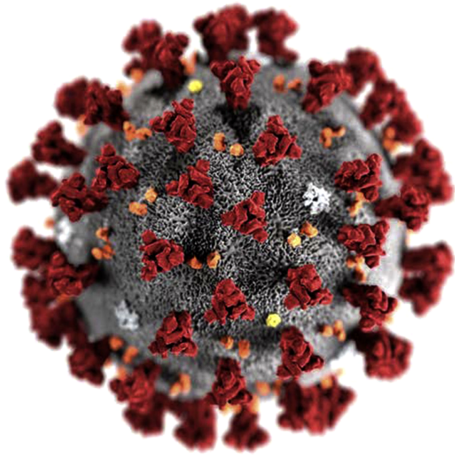


Fig. 1. Illustration of the SARS-CoV-2 virus [4].

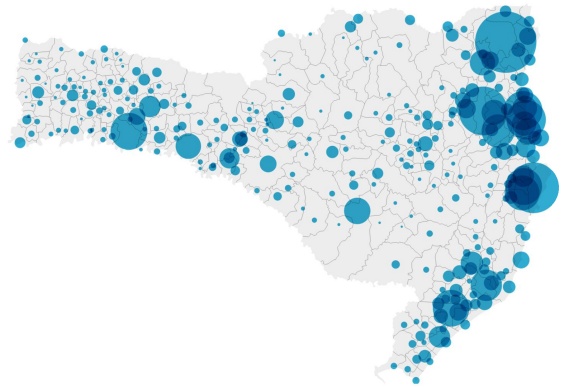


Fig. 2. Confirmed cases of COVID-19 in SC [44].

240 COVID-19 is an infectious disease caused by the
 241 recently discovered coronavirus. The virus is highly
 242 contagious, being transmitted through droplets gen-
 243 erated when an infected person coughs, exhales, or
 244 sneezes [40]. The droplets are weighed and are thus
 245 quickly deposited on surfaces that remain infected
 246 for a long time. A person can become infected with
 247 COVID-19 by inhaling the virus if they are close to
 248 someone infected or by touching a contaminated sur-
 249 face and rubbing their hands over their nose, eyes, or
 250 mouth [41].

251 *2.1. Contamination in the Santa Catarina state*

252 To reduce the contagion of COVID-19, the Gov-
 253 ernment of the State of Santa Catarina, through
 254 Provisional Measure No. 227 of 2020, established
 255 measures to deal with public calamity and the public
 256 health emergency resulting from COVID-19. Among
 257 the measures adopted, remote work was adopted
 258 when possible, there was anticipation of vacations
 259 and leave for public servants [42].

260 In addition to Provisional Measure No. 227 of
 261 2020, there have been several decrees aimed at
 262 reducing contagion by the coronavirus. Among the
 263 measures adopted based on these decrees, some
 264 commercial activities were closed at the beginning
 265 of the pandemic, events with crowds of people
 266 were banned and it was mandatory to use masks
 267 indoors [43].

268 Despite the great public health effort and the
 269 restrictive measures imposed by the Government of
 270 the State of Santa Catarina (SC), the cases of COVID-
 271 19 continue to increase. In Figure 2 can be viewed the

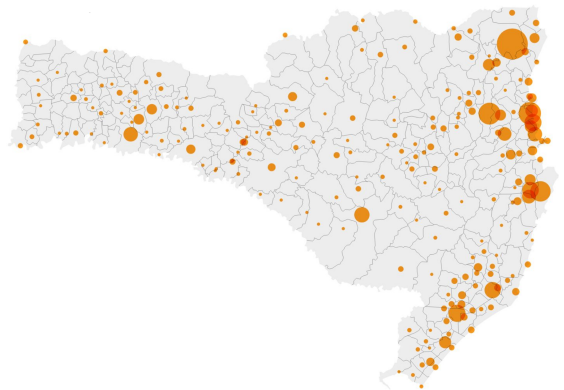


Fig. 3. Deaths confirmed by COVID-19 in SC [44].

272 locations in the state where there is confirmation of
 273 cases.

274 Mass testing of COVID-19 cases has not yet been
 275 possible, so only professionals directly involved in
 276 combating COVID-19 are tested or patients who have
 277 very clear symptoms of the disease. The number of
 278 deaths in relation to the number of contaminated is
 279 considerably large compared to places where mass
 280 population testing was carried out, as can be seen in
 281 Figure 3. The cities with the largest number of inhabi-
 282 tants had a higher number of contaminated ones, with
 283 many confirmed cases in the cities of Florianópolis,
 284 Chapecó, Blumenau, Joinville and Criciúma. The
 285 highest number of deaths in the state was registered
 286 in the cities of Florianópolis, Joinville and Criciúma
 287 [44].

288 The evolution of the number of confirmed infected
 289 cases and death records is used in this article to train
 290 the neural network and to forecast the continuity in
 291 the spread of the virus. The data used to analyze
 292 the proposed algorithm, are based on official records

293 informed by the Government of the State of Santa
 294 Catarina.

295 **3. Methodology**

LSTM is a recurrent neural network algorithm. Unlike common neural networks that have the feed-forward form, LSTM has feedback allowing the algorithm to remember distant values [45]. With LSTM, P steps forward, starting from D samples, sampled in an interval Δ ,

$$x(t - (D - 1)\Delta), \dots, x(t - \Delta), x(t) \quad (1)$$

to predict future value

$$x(t + P). \quad (2)$$

296 For this, the classic LSTM algorithm is composed
 297 of cells that repeat themselves, as can be seen in
 298 Figure 4. Each cell is divided into three gates, the
 299 entrance (i_t), exit (o_t) and the forgetting (f_t) gates.
 300 These gates regulate how much of the respective vari-
 301 able will be sent to the next step [46].

The first gate, of forgetting (*forget*), determines how much of the information passed will be forgotten and how much will be remembered [47]. Useful information for states is added via the input gate (*input*), the input values are activated by an activation function. Finally, at the output gate (*output*) it is determined how much of the current state should be assigned to the output [48]. For this, the current state is activated and regulated by the input. In terms of the equation, the LSTM can be expressed by the equations:

$$\begin{aligned} i_t &= \sigma_g(W_i x_t + R_i h_{t-1} + b_i), \\ f_t &= \sigma_g(W_f x_t + R_f h_{t-1} + b_f), \\ o_t &= \sigma_g(W_o x_t + R_o h_{t-1} + b_o). \end{aligned} \quad (3)$$

Where W and R are earnings matrices and b the polarization matrix, whose values will be assigned by the network training. For these equations σ_g denotes the activation function of *gate*. LSTM has the input activation function G and the output activation function H of the cell, (see Figure 4) which are used to update the cell and the hidden state, according to the equations:

$$\begin{aligned} \tilde{c}_t &= G(W_c x_t + R_c h_{t-1} + b_c), \\ c_t &= f_t \circ c_{t-1} + i_t \circ \tilde{c}_t, \\ h_t &= o_t \circ H(c_t). \end{aligned} \quad (4)$$

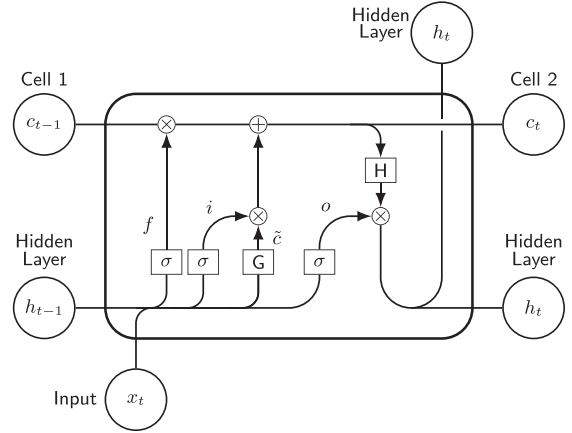


Fig. 4. LSTM cell.

The operations are performed element by element, and \circ circ represents the product of the elements. To perform the forecast values of the stages of future time, the responses of the training sequences are displaced by a time step. In this way, at each time step of the input sequence, the network learns to predict the value of the next time step [49].

In this article the LSTM layers are included in the algorithm in a stacked way [50], as seen in Figure 5, based on each cell presented in Figure 4. Stacked LSTM is an extension of this model that has several hidden layers of LSTM, where each layer contains multiple memory cells [48]. For complete evaluation of the algorithm, the regression can be specified with variations in the number of layers, activation function, number of hidden units and optimization method.

In this article, the activation functions linear, sigmoid, hyperbolic tangent, rectified linear unit, exponential linear unit and SoftPlus were evaluated. The linear function can be ideal for simple tasks, since its derivative is constant, that is, it does not depend on the input value.

The sigmoid activation function (Sigm) is a widely used function, as it is smooth and continuously differentiable. The hyperbolic tangent activation function (TanH) is similar to the sigmoid function, being a scaled version of this function [15]. The rectified linear unit (ReLU) function is being widely used nowadays to deep learning approaches. A similar activation function to ReLU is the exponential linear unit (ELU) function [51].

To improve the performance of the algorithm, the optimizer must also be evaluated. The stochastic gradient descent (SGD) algorithm, updates the neural network parameters to minimize the loss function,

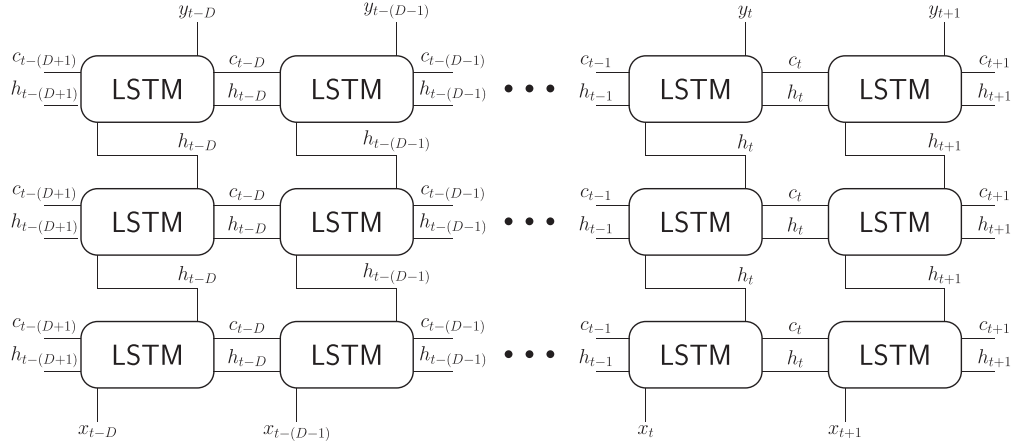


Fig. 5. LSTM stacking scheme using 3 layers.

337 taking small steps in each iteration towards the neg-
 338 ative loss gradient. RMSProp uses learning rates that
 339 differ by parameter and can automatically adapt to the
 340 loss function being optimized [49]. Thus, the algo-
 341 rithm maintains a moving average of the squares of the
 342 elements of the parameter gradients. This algo-
 343 rithm uses this moving average to normalize the
 344 updates for each parameter individually.

345 The Adaptive Moment Estimation (ADAM) opti-
 346 mization method calculates adaptive learning rates
 347 for each parameter [52, 53]. ADAM uses moving
 348 averages to update network parameters. AdaMAX
 349 algorithm is a variant of ADAM optimizer based on
 350 the infinity norm. The AdaMAX can be promissor
 351 specially in embedded models. The Nesterov accel-
 352 erated adaptive moment estimate (NADAM) is a com-
 353 bination of the Adam method and the Nesterov accel-
 354 erated gradient (NAG). The NADAM optimizer is
 355 used to minimize the cross entropy loss function [54].

356 AdaGRAD, is based on the gradient that adapts the
 357 learning rate to the parameters [55]. AdaGRAD per-
 358 forms minor updates to parameters associated with
 359 frequently occurring resources; and performs major
 360 updates to parameters associated with infrequent
 361 resources. AdaDELTA is an extension of AdaGRAD
 362 that seeks to reduce its decreasing learning rate.
 363 Instead of accumulating all the previous square gra-
 364 dients, AdaDELTA restricts the gradient window to
 365 a fixed size. The current average depends only on the
 366 previous average and the current gradient [49].

367 3.1. Algorithm evaluation

For evaluation of the algorithm using a quantitative
 methodology [56], a metric of the global error evalua-

tion based on the Root Mean Square Error (*RMSE*) is
 used for network training and testing procedures. The
 error signal is calculated by the difference between
 the goal of the y_i network and the result of the \hat{y}_i
 network for the training and testing procedures [57].

$$\text{RMSE} = \sqrt{\frac{1}{n} \sum_{i=1}^n (y_i - \hat{y}_i)^2}. \quad (5)$$

Other measures to calculate the error are also pre-
 sented to evaluate the proposed method, such as the
 Mean Absolute Error (*MAE*), and the Mean Abso-
 lute Percentage Error (*MAPE*) [58]. These measures
 are calculated according to the equations:

$$\text{MAE} = \frac{1}{n} \sum_{i=1}^n |y_i - \hat{y}_i|, \quad (6)$$

$$\text{MAPE} = \frac{1}{n} \sum_{i=1}^n \left| \frac{y_i - \hat{y}_i}{y_i} \right|. \quad (7)$$

MAPE calculates the average error rate for the
 correct values and *MAE* is the mean of the absolute
 difference between the observed and predicted values
 [59]. Based on recent studies on the application of
 time series forecasting, the R^2 determination coeffi-
 cient is a promising way to assess model performance
 [60, 61].

$$R^2 = 1 - \frac{\sum_{i=1}^n (y_i - \hat{y}_i)^2}{\sum_{i=1}^n (y_i - \bar{y}_i)^2}. \quad (8)$$

In this case, \bar{y}_i is the average of the goals (objectives) and the observed values represent the values that were used for training the network [62]. To complete the analysis of the proposed method, a statistical analysis was performed based on the best model found, considering 50 simulations. For the statistical analysis, average value, standard deviation (*Std.Dev*), variance (V_i), and covariance ($C_{i,j}$) were considered, respectively as:

$$Std_Dev = \frac{1}{n-1} \sum_{p=1}^n (y_{i,p} - \bar{y}_i)^2, \quad (9)$$

$$V_i = \frac{1}{n-1} \sum_{p=1}^n (y_{i,p} - \bar{y}_i)^2, \quad (10)$$

$$C_{i,j} = \frac{1}{n-1} \sum_{p=1}^n (y_{i,p} - \bar{y}_i) (y_{j,p} - \bar{y}_j). \quad (11)$$

In equations (9 and 10), $y_{i,p}$ is the value of the predicted output i in object p and \bar{y}_i is the average of the variable i . For the equation (11) $y_{j,p}$ is the value of the variable j in object p , \bar{y}_j is the average of the value of the variable j [63].

For a final comparison of the algorithm a benchmarking was performed. In this evaluation the layers were combined for a complete comparison. Recurrent neural network (RNN), gated recurrent unit network (GRU), simple recurrent neural network (SRNN), and dense structures were used for comparison [64].

This article will evaluate network performance using an AMD Ryzen 5 (model 3400G) computer Quad-Core 3.7 GHz, with 8.00 GB of random-access memory (RAM), double data rate (DDR) 4. The algorithm was developed using the Python language from the Keras package based on TensorFlow. The complete flowchart of the steps performed in the analysis of the model used in this paper is presented in Figure 6.

4. Results analysis

In this section, the analysis of the proposed method will be presented. Initially, the prediction capacity in relation to the size of dataset needed to perform the training of the neural network will be evaluated, considering the RMSE and the R^2 of the algorithm. To assess R^2 , the determination coefficient will be used. Results with lower RMSE and higher determination

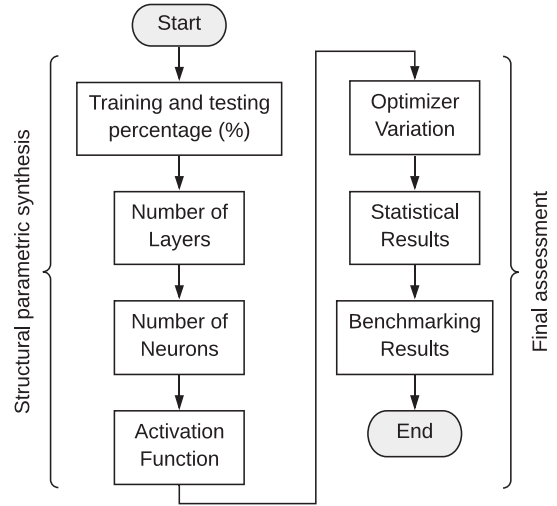


Fig. 6. Flowchart of the procedure performed in this paper.

coefficient will be highlighted in bold. Then the number of neurons and layers for the analyzed model will be evaluated. The results of applying various activation functions and methods of network optimization will also be presented. Finally, a statistical analysis will be performed based on the best configuration for the analyzed model.

The evaluation of the model is performed for the number of confirmed deaths, and based on the best configuration of the model, statistical analysis will be performed for the number of cases. For comparative purposes, the tests started with the SoftPlus activation function, 40 neurons and 1 step predicted ahead, from 30 samples. In this initial analysis, the ADAM optimizer was used from 90 % of the data for network training. This initial configuration was based on [14], in which variations are evaluated for the best configuration of the model. In this article the layers are organized by stacking cells, as explained in Section 3. Table 1 presents the results in relation to the variation in the size of data used for training. In this model, cross-validation is performed, in which the data used for training are not used for the network test.

Using 90 % of the data for training the network, it is possible to achieve an R^2 of 0.9943 to forecast the number of confirmed cases with COVID-19. This value is calculated based on the cross-validation of the data that are used for the training (data reported by the State Government), in relation to the forecast result.

It is possible to observe in Table 2 that the best stacking of this model occurs with 5 layers. From

Table 1
Results for Size (%) of Data Used for Training

%	Train. (s)	RMSE	MAE	MAPE	R ²
90	6.3	4.6×10 ²	3.9×10 ²	0.02	0.99
80	9.7	3.4×10 ³	3.1×10 ³	0.18	0.16
70	10.3	3.0×10 ³	2.4×10 ³	0.14	0.61
60	5.9	1.0×10 ⁴	9.1×10 ³	0.58	0.98
50	7.0	2.4×10 ⁴	1.6×10 ⁴	0.97	0.80
40	5.2	7.5×10 ⁴	4.7×10 ⁴	3.08	0.77

Table 2
Results for Variation in the Number of Layers

Lay.	Train. (s)	RMSE	MAE	MAPE	R ²
1	10.0	3.3×10 ³	2.9×10 ³	0.16	0.54
2	10.5	6.5×10 ³	5.3×10 ³	0.29	0.94
3	12.8	2.8×10 ³	2.4×10 ³	0.13	0.97
4	16.4	1.3×10 ³	1.1×10 ³	0.06	0.84
5	17.3	1.6×10 ³	1.3×10 ³	0.07	0.97
6	31.0	6.8×10 ³	5.5×10 ³	0.30	0.95

Table 3
Results for Variation in the Number of Neurons

Neur.	Train. (s)	RMSE	MAE	MAPE	R ²
1	35.4	1.4×10 ⁴	1.4×10 ⁴	0.79	nan
5	19.4	1.5×10 ⁴	1.4×10 ⁴	0.80	0.02
10	51.1	1.5×10 ³	1.2×10 ³	0.07	0.80
20	26.9	1.4×10 ³	1.2×10 ³	0.06	0.81
30	19.6	3.0×10 ³	2.5×10 ³	0.13	0.99
40	17.9	4.8×10 ³	3.9×10 ³	0.21	0.97
50	45.6	3.9×10 ³	3.2×10 ³	0.17	0.95

429 this result, the simulations were repeated to assess the
430 influence of different numbers of neurons, according to
431 to Table 3.

432 The best performance of the model was obtained
433 using 30 neurons, resulting in lower errors and less
434 time needed for training. The evaluation of the param-
435 eters in relation to the R² of the model is presented
436 in Figure 7 with greater precision, with all combina-
437 tions between the number of neurons and the number
438 of layers.

439 In the Table 4 the results are presented in relation
440 to the use of different activation functions and the
441 Table 5 presents the results in relation to the variation
442 in the use of the optimization method.

443 The best results in terms of RMSE reduction
444 and higher determination coefficient were obtained
445 using the ReLU activation function. Changing the
446 optimizer applied to the problem resulted in large
447 variations in the R² of the forecast. In this evaluation,
448 RMSprop and SGD had results below the average of
449 the other methods. The optimizer that resulted in the
450 best R² was ADAM, which also had the smallest error
451 in all the metrics evaluated.

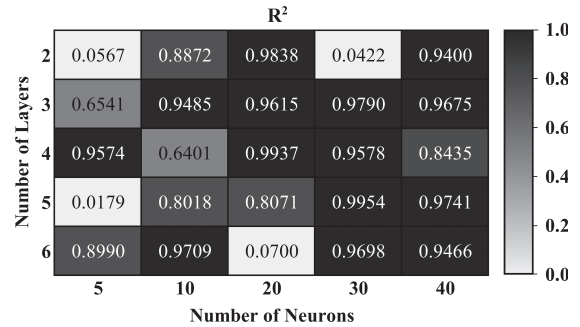


Fig. 7. Analysis of parameters variation.

452 Based on the analyzes presented here, the configu-
453 ration that generated the best result in terms of greater
454 precision and less error was with 90 % of the data for
455 network training, 5 layers and 30 neurons. The best
456 activation function was the ReLU and the best opti-
457 mizer for the analysis of this paper was ADAM. From
458 this configuration, a statistical evaluation based on
459 50 simulations is presented in 4.1 to assess the fore-
460 cast of the number of confirmed cases and number of
461 deaths.

Table 4
Results for Varying the Activation Function

Activ. Funct.	Train. (s)	RMSE	MAE	MAPE	R ²
Linear	21.39	7.7×10^3	5.0×10^3	0.27	0.49
Sigm	27.55	1.8×10^4	1.8×10^4	1.00	0.01
SoftPlus	15.12	1.1×10^4	8.5×10^3	0.46	0.93
TanH	15.43	1.8×10^4	1.8×10^4	1.00	0.01
ReLU	29.86	1.2×10^2	8.3×10^2	0.01	0.99
ELU	13.50	8.6×10^3	7.0×10^3	0.38	0.95

Table 5
Results for the Optimizer Variation

Optim.	Train. (s)	RMSE	MAE	MAPE	R ²
SGD	8.5	1.8×10^4	1.8×10^4	1.00	0.00
ADAM	31.1	4.8×10^2	4.1×10^2	0.02	0.99
NADAM	69.4	4.0×10^3	3.3×10^3	0.18	0.96
RMSprop	15.6	8.5×10^2	6.2×10^2	0.03	0.33
AdaDELTA	166.3	1.6×10^4	1.6×10^4	0.84	0.54
AdaGRAD	25.0	2.3×10^3	2.1×10^3	0.11	0.98
AdaMAX	11.7	3.2×10^3	2.9×10^3	0.16	0.97

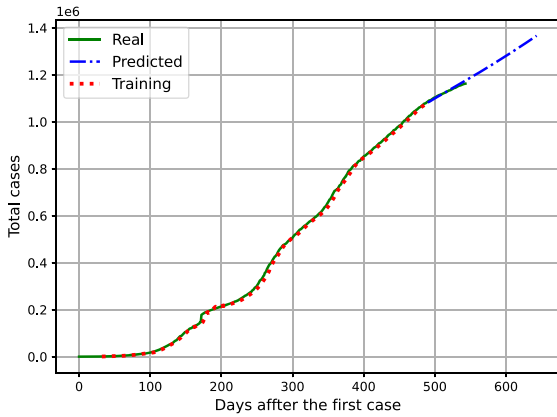


Fig. 8. Analysis of the Evolution of the Number of Cases.

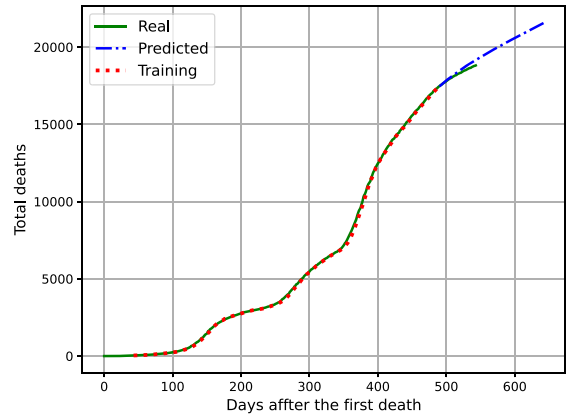


Fig. 9. Analysis of the Evolution of the Number of Deaths.

462 From this configuration, Figure 8 shows the rela- 477
 463 tionship between the increase in the real number of 478
 464 cases [43], obtained based on official information, 479
 465 training data and forecasting the evolution of cases. 480
 466 The assessment is presented after the first day on 481
 467 which a case of COVID-19 was confirmed in the state. 482

468 In this visual analysis, the values presented are real 483
 469 for confirmed cases (Real), those used for network 484
 470 training (Training) and the time series forecast (Pre- 485
 471 dicted). Based on this analysis, it is possible to assess 486
 472 the trend in the increase in the number of cases in the 487
 473 future. 488

474 This evaluation shows that the increase in the num- 489
 475 ber of cases in the coming days tend to grow slowly 490
 476 possibly stabilizing at a value. That's given the vac- 491

477 cination advances and the restrictive measures. The 478
 479 same analysis is presented for the number of deaths 480
 481 confirmed by COVID-19 in Figure 9. There is a 482
 483 slightly higher growth but still a concave curve, this 484
 485 analysis shows the effects that vaccination had and 486
 487 will have in controlling the spread of the virus. 488

483 4.1. Statistical analysis 483

484 For the final assessment the statistical analysis of 484
 485 the algorithm is performed, Table 6 presents a com- 485
 486 plete statistical analysis of 50 simulations with the 486
 487 same configuration described on previous section for 487
 488 confirmed cases and Table 7 for the number of deaths 488
 489 caused by COVID19. The statistical analysis shows 489

Table 6
Statistical Results of the Proposed Method for Confirmed Cases

Indicator	Training Time (s)	RMSE	MAE	MAPE	R ²
Mean	28.23	1.72×10^5	1.46×10^5	0.12804	0.9077
Std. Dev.	10.58	2.19×10^5	2.05×10^5	1.82×10^{-1}	1.96×10^{-1}
Variance	111.86	4.78×10^{10}	4.22×10^{10}	3.32×10^{-2}	3.83×10^{-2}

Table 7
Statistical Results of the Proposed Method for Confirmed Deaths Caused by COVID-19

Indicator	Training Time (s)	RMSE	MAE	MAPE	R ²
Mean	23.22	2.69×10^3	2.19×10^3	0.1887	0.8861
Std. Dev.	7.58	2.28×10^3	1.86×10^3	1.01×10^{-1}	2.00×10^{-1}
Variance	57.4	5.20×10^6	3.46×10^6	1.02×10^{-2}	3.99×10^{-2}

Table 8
Benchmarking Results for Confirmed Cases

Algorithm	Train Time (s)	RMSE	MAE	MAPE	R ²
GRU_GRU	12.31	7.7×10^5	5.5×10^5	0.4835	0.7252
GRU_SRNN	27.61	3.0×10^4	2.3×10^4	0.0204	0.4482
GRU_Dense	6.85	1.3×10^4	1.1×10^4	0.0095	0.9818
SRNN_GRU	27.61	3.0×10^4	2.3×10^4	0.0204	0.4482
SRNN_SRNN	7.91	1.1×10^5	9.2×10^4	0.0809	0.9795
SRNN_Dense	5.28	2.7×10^5	2.2×10^5	0.1974	0.9731
Dense_GRU	6.85	1.3×10^4	1.1×10^4	0.0095	0.9818
Dense_SRNN	5.28	2.7×10^5	2.2×10^5	0.1974	0.9731
Dense_Dense	2.47	9.4×10^4	7.8×10^4	0.0684	0.9869
Proposed structure	8.90	8.8×10^3	6.4×10^3	0.0056	0.9987

that the variation of the values is low for the calculation of RMSE, MAE, MAPE, and R².

As can be seen, there is a great variation in the results as a function of the magnitudes of the metric considered. This result does not represent a problem for the analysis, since the error remains under 1 % of the maximum order of magnitude of the metric used.

The R² average found in this analysis remained at 0.9077 for number of confirmed cases, which shows that even with several analyzes the precision remains at a high average and the error calculated by RMSE, MAE and MAPE were low. The values of standard deviation and variance of RMSE and MAE were high, these results were obtained because the signal features which results in a greater error. Even with a longer time to start in the increase of confirmed deaths, the forecast remains accurate. In this way, it is possible to estimate the number of deaths caused by COVID-19, if the same measures to combat the virus are being taken.

The R² achieved for predicting the number of deaths reaches 0.8861 from the average of 50 sim-

ulations, according to the determination coefficient R². Based on the R² found in this paper, it is possible to perform a strategic planning to combat COVID-19. This planning can be based on the results values found of the forecast of increases in confirmed cases and deaths.

In the subsection 4.2, to perform a fairer assessment using the same data set and with the same configurations, the results of the application of the GRU, Dense and SRNN models are compared to the LSTM stacking model.

4.2. Benchmarking

In Table 8 variations of the model structure for the prediction of the increase of the confirmed cases of COVID-19 are presented. It is possible to observe that some layers structures do not generate acceptable R² with results lower than 80 %. All the structures have higher error and low accuracy than the proposed method. The results of the evaluation for the number of deaths confirmed by

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Table 9
Benchmarking Results for Confirmed Deaths Caused by COVID19

Algorithm	Train Time (s)	RMSE	MAE	MAPE	R ²
GRU_GRU	11.32	2.8×10^2	2.1×10^2	0.0111	0.9143
GRU_SRNN	8.24	6.3×10^3	5.1×10^3	0.2759	0.9400
GRU_Dense	6.43	5.7×10^3	4.4×10^3	0.2364	0.8955
SRNN_GRU	8.24	6.3×10^3	5.1×10^3	0.2759	0.9400
SRNN_SRNN	6.70	1.7×10^4	1.4×10^4	0.7594	0.9282
SRNN_Dense	3.10	1.2×10^3	9.7×10^2	0.0525	0.9819
Dense_GRU	6.43	5.7×10^3	4.4×10^3	0.2364	0.8955
Dense_SRNN	3.10	1.2×10^3	9.7×10^2	0.0525	0.9819
Dense_Dense	1.19	3.7×10^2	3.0×10^2	0.0165	0.9330
Proposed structure	1.37×10^1	1.2×10^2	1.1×10^2	0.0050	0.9984

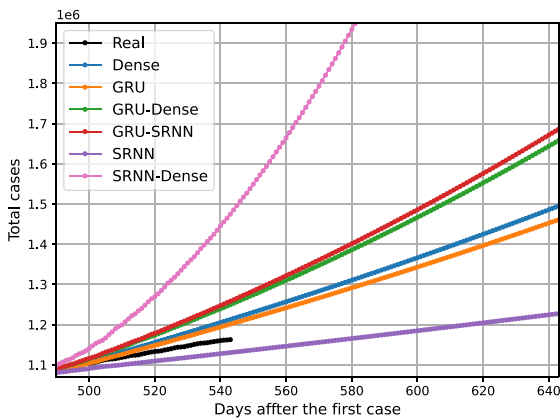


Fig. 10. Results for Each Layer Configuration for the Model.

COVID-19 was follows this tendency, as shown in Table 9.

Although the use of the stacked LSTM takes more time for convergence because of require more computational effort, this structure has the best results for the time series forecasting of the increase of cases and deaths caused by the COVID-19.

The stacked LSTM method has lower RMSE, MAE, and MAPE; and higher R² than others structures combinations. The model with Dense_Dense layer was faster in both analysis, these result was expected as the structure is simpler.

The LSTM proves to be a promising algorithm for the evaluation in question in view that it has the capacity to evaluate a large volume of data as can be seen for the evaluation of the cases confirmed by COVID-19.

As can be seen in Figure 10 there is a big difference between forecasting results by changing the layer structure of the models. In this presentation, the best results were obtained using GRU and SRNN, as these values were closer to the real variation. The

results presented in this image correspond to the comparison with the data set that was used for the model test.

5. Conclusion

The proposed algorithm proved to be a promising technique for evaluating the increase in the number of cases and deaths confirmed by COVID-19. Considering that there was a mean R² in the analysis of 0.9077 for the number of confirmed cases and 0.8861 for the number of deaths. Based on the forecast, it is possible to assess the capacity of the health system and to increase or relax the restriction measures.

According to the results presented in this article, it is possible to notice that the number of deaths follows the trend of the contamination curve, so reducing the slope of this curve is extremely necessary to consequently reduce the number of deaths. The trend presented in the results of this article shows that the vaccination programs applied so far are reducing the numbers of contamination. And government agencies, should consider these forecasts to determine if the restrictive measures are maintained or relaxed.

Comparing to other models the LSTM stacking shows a similar performance in terms of R² an reduction of the error. The average and statistical analysis shows that the algorithm is stable and can be applied for forecast analysis in the COVID-19 spread.

The evaluation of the number of cases curve proves to be an excellent measure to reduce the number of emergency visits with high complexity, without the capacity of the health system. The combination of hybrid methods can be used to reduce variations in the algorithm that are not representative, such as those caused during weekends.

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