

# Dynamical Analysis of Mpox Transmission Model Incorporating Asymptomatic Individuals

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## Abstract

In this paper, we develop a mathematical model for the transmission dynamics of monkeypox (Mpox) involving both human and rodent populations, with the human population including asymptomatic individuals. The analysis begins by establishing the well-posedness of the model using the contraction mapping principle, ensuring the existence, uniqueness, and stability of the solution. The model is further examined for the boundedness and non-negativity of the solutions. Three equilibrium points are identified: the disease-free equilibrium, the human-endemic equilibrium, and the endemic equilibrium. The disease-free equilibrium is shown to be both locally and globally asymptotically stable when the basic reproduction number is less than one. If they exist, the human-endemic equilibrium is proven to be globally asymptotically stable when the basic reproduction number of the rodent population is less than one, and the endemic equilibrium is always globally asymptotically stable. The sensitivity analysis indicates that vaccination and contact dynamics are the most influential factors in human transmission, while rodent transmission is primarily shaped by contact rates and mortality-related factors. Numerical simulations are provided to illustrate and validate the analytical results.

*Keywords:* Infectious disease, Mpox, mathematical model, asymptomatic, stability

*2010 MSC classification number:* 00A71, 37N25, 81T80, 93A30

## 1. INTRODUCTION

Monkeypox (Mpox) is a zoonotic viral infection caused by the Mpox virus, a member of the Orthopoxvirus genus, which is in the same group as the variola virus that causes smallpox [14]. The virus is divided into two major clades: Clade I, which represents subclades Ia and Ib, and Clade II, which includes subclades IIa and IIb. These vary in their geographic distribution and virulence profiles. The first isolation was from monkeys in Denmark in 1958. Later, in 1970, the first human case was identified in the Democratic Republic of Congo [40]. Since then, Mpox has become endemic in many parts of Central and West Africa, with only scattered outbreaks linked to animal-to-human transmission events. However, in May 2022, the disease began its resurgence worldwide, extending to regions outside Africa's endemic areas reaching Europe and North America, which was driven primarily by international travel and close human-to-human contact [39]. In view of its unprecedented geographical spread, the World Health Organization (WHO) declared Mpox a Public Health Emergency of International Concern (PHEIC) on August 14, 2024, after having verified more than 100,000 cases and 220 deaths in 120 countries worldwide [42].

Transmission of Mpox occurs via multiple routes involving both zoonotic and human-to-human pathways. Direct contact with infected persons, animals, or contaminated materials facilitates the spread of the virus [15]. Human transmission primarily occurs via respiratory droplets, exposure to skin or mucosal lesions, and contact with bodily fluids [35], while vertical transmission from mother to fetus or newborn has also been suggested. Zoonotic infection is typically associated with exposure to fluids, bites, or scratches from infected

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Received November 3<sup>rd</sup>, 2025, Revised February 15<sup>th</sup>, 2026, Accepted for publication April 7<sup>th</sup>, 2026. Copyright ©2026 Published by Indonesian Biomathematical Society, e-ISSN: 2549-2896, DOI:10.5614/cbms.2026.9.1.4

wild animals during hunting or food preparation activities [5], [15], [40]. Additionally, fomite transmission through contaminated surfaces such as bedding, clothing, or medical equipment remains a potential source of infection in both community and healthcare settings [15]. The Mpox incubation period ranges from 6 to 13 days and may extend to 21 days [37], [38]. Symptoms such as rash, fever, fatigue, and lymphadenopathy usually last 2–4 weeks and resolve with supportive care. Severe cases occur mainly in newborns, children, pregnant women, and immunocompromised individuals, with a reported case fatality rate of 0.1–10% [41].

Mathematical modeling serves as a powerful tool to guide appropriate interventions and deepen understanding of infectious disease dynamics and control [25],[27]. Classical compartmental models, which include susceptible, infected, and recovered subpopulations, have laid the foundation for more complex disease modeling. These models have been extended to incorporate additional subpopulations, such as vaccinated and asymptomatic individuals, to better reflect public health scenarios. Incorporating such compartments improves the ability of models to evaluate intervention strategies. Al-Shomrani et al. [6] demonstrated that models that combine these subpopulations have better predictions for the effectiveness of public health interventions in mitigating the spread of diseases. In another related context, Abidemi et al. [1] proposed a deterministic double-dose vaccination model for COVID-19 transmission and demonstrated how this might be subjected to optimum control and cost-effectiveness analysis in determining vaccination policy. Similar multi-disease models have been adopted to study the interactions between the diseases, including the dynamics of co-infection of COVID-19 and dengue [9], pointing out the wide applicability of mathematical models in epidemiology. Recent studies on the modeling of infectious disease can be found in [3], [17], [28], [29].

Several models for Mpox transmission consider both human and rodent populations, while a vaccinated human sub-population has also received considerable attention from several authors. Elsonbaty et al. [19] highlighted vaccination as an important measure that will enhance herd immunity and subsequently reduce disease susceptibility. Afolabi and Wade [2] presented evidence that imperfect vaccines add to disease mitigation. These studies further highlight the role played by improving vaccine efficacy and continuously adapting disease control policies as epidemiological and vaccination dynamics evolve. Sayarshad [34] used data from the United States to show that with coordination, vaccine coverage increased by 35%, while unmet demand fell by 60%, compared to individual manufacturer-based approaches. Other studies incorporating a vaccinated human sub-population have been conducted by Akinyemi et al. [4], Bankuru et al. [7], Olaniyi and Chuma [31], and Samreen et al. [33].

According to WHO, asymptomatic individuals infected with Mpox can indeed spread the virus without developing symptoms [40]. Li et al. [23] extended a model that incorporated asymptomatic humans into it, making the model more realistic as far as disease transmission dynamics are concerned. Their numerical simulations and dynamic analysis determined that asymptomatic humans can contribute much toward the spreading infection and, therefore, could be included in controls like vaccination and personal protection. Similarly, Fernandes and Maldonado [20] determined that asymptomatic people have no symptoms but can transfer the virus through sexual contact and are thus crucial for determining the disease's transmission rate. This work provides important insights for public health authorities on the assessment of preventive measures and in designing control strategies, particularly those involving sexually transmissible diseases with asymptomatic transmission. Further works related to mathematical modeling of Mpox transmission, not reviewed in the above, are listed in the following references [8], [10], [13], [21], [30], [43].

In this paper, we propose a mathematical model for the transmission of Mpox, incorporating an asymptomatic human subpopulation combined with a vaccinated human subpopulation. Unlike other available Mpox transmission models that concentrate on symptomatic infections, our model accounts for the hidden potential of Mpox transmission through asymptomatic infections, as well as vaccination-induced immunity. This dual account of Mpox infections provides a more realistic view of Mpox epidemiology. The novelty of this paper lies not only in the integrated human–rodent transmission structure but also in the rigorous analytical framework applied to the model. First, the contraction mapping principle is used to establish the well-posedness, which guarantees the existence, uniqueness, and stability of the solution, an approach that is rarely explored in epidemiological modeling studies. Then, boundedness and non-negativity of the solutions are discussed in detail. We then proceed to investigate the dynamics through the determination of three equilibrium points: disease-free equilibrium, human-endemic equilibrium, and endemic equilibrium. Local stability of these equilibrium points is analyzed with Jacobian matrices, while the global stability is established with Lyapunov functions, representing an additional theoretical contribution of this paper. Numerical simulations are conducted to illustrate and validate the analytical results.

The remainder of this paper is organized as follows. Section 2 is devoted to the formulation of the mathematical model describing Mpox transmission dynamics between humans and rodents. Section 3 is dedicated to the basic properties of well-posedness, boundedness, and non-negativity of solutions. In Section 4, we calculate the equilibrium points and the basic reproduction number characterizing the disease-free, human-endemic, and endemic states. Section 5 interprets the local and global stability of such equilibria, enabling us to determine the long-term behavior of the system. In Section 6, we carry out the sensitivity analysis that identifies the most sensitive parameters affecting the basic reproduction number. In Section 7, we present numerical simulations that support the analytical findings. Finally, in Section 8 we address the main conclusion and possible directions for further research.

## 2. MODEL FORMULATION

The transmission dynamics of Mpox are described in this developed mathematical model that contains human and rodent populations. For humans, there are five epidemiological compartments: susceptible individuals ( $S_h$ ), vaccinated individuals ( $V_h$ ), asymptomatic individuals ( $A_h$ ), symptomatic infected individuals ( $I_h$ ), and recovered individuals ( $R_h$ ). Rodents are divided into two compartments: susceptible rodents ( $S_r$ ) and infected rodents ( $I_r$ ). The total human population at any given time is represented by the sum of all human subpopulations  $N_h = S_h + V_h + A_h + I_h + R_h$ . Similarly, the total rodent population is given by  $N_r = S_r + I_r$ . In general, interactions among subpopulations are influenced by various factors, necessitating several simplifying assumptions. In this mathematical model, it is assumed that all humans and rodents are born susceptible, vaccinated individuals do not experience waning immunity, recovered individuals are not subject to reinfection, and infected rodents do not recover.

In the human population, susceptible individuals increase at a constant recruitment rate ( $\pi_h$ ) and may transition into vaccinated individuals at rate  $\alpha_h$ , become infected through contact with infectious humans or rodents, or die naturally at rate  $\mu_h$ . The human force of infection,  $\lambda_h = \frac{\beta_1 A_h + \beta_2 I_h + \beta_3 I_r}{N_h}$ , determines transmission dynamics in humans, where  $\beta_1$ ,  $\beta_2$ , and  $\beta_3$  represent the effective contact rates. Vaccinated individuals may recover at rate  $\tau_1$  or die naturally, while asymptomatic individuals, although not exhibiting symptoms, can transmit the virus, progress to symptomatic infection at rate  $\gamma_h$ , or die due to Mpox ( $\delta_1$ ) or natural causes. Symptomatic individuals recover at rate  $\tau_2$  or die due to disease ( $\delta_2$ ) or naturally. In the rodent population, susceptible rodents are recruited at rate  $\pi_r$  and become infected via contact with infected rodents at rate  $\lambda_r = \frac{\beta_4 I_r}{N_r}$ , where  $\beta_4$  is the contact rate, while susceptible and infected rodents die due to natural mortality ( $\mu_r$ ) or Mpox-induced death ( $\delta_3$ ).

The transmission diagram of Mpox dynamics is illustrated in Figure 1. The description and corresponding values of each parameter in weeks are provided in Table 1.

Table 1: Description of parameters.

Parameter	Description	Value	Reference
$\pi_h$	Recruitment rate of susceptible humans	17500	[2], [26]
$\pi_r$	Recruitment rate of susceptible rodents	3.5	[2], [26]
$\alpha_h$	Vaccination rate of susceptible humans	0.2104	[23]
$\beta_1$	Contact rate between susceptible and asymptomatic humans	0.19	[23]
$\beta_2$	Contact rate between susceptible and symptomatic humans	0.4192	[23]
$\beta_3$	Contact rate between susceptible humans and infected rodents	0.3632	[23]
$\beta_4$	Rodent-to-rodent contact rate	0.0257	[23]
$\gamma_h$	Progression rate to symptomatic infection	0.05	Assumed
$\tau_1$	Effectiveness rate of vaccination	0.83	Assumed
$\tau_2$	Recovery rate of symptomatic humans	0.3432	[23]
$\delta_1$	Death rate of asymptomatic humans due to Mpox	0.00041	[23]
$\delta_2$	Death rate of symptomatic humans due to Mpox	0.0012	[23]
$\delta_3$	Death rate of infected rodents due to Mpox	0.00028	[23]
$\mu_h$	Natural death rate of humans	0.00032	[2], [26]
$\mu_r$	Natural death rate of rodents	0.014	[2], [26]

As illustrated in Figure 1, the transmission dynamics of Mpox are formulated through the following system of differential equations.

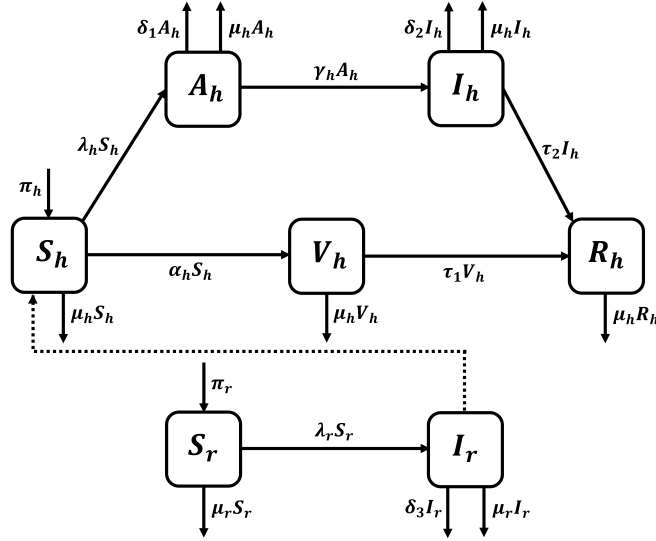


Figure 1: Transmission diagram of MpoX dynamics.

$$\begin{aligned}
 \frac{dS_h}{dt} &= \pi_h - (\lambda_h + \alpha_h + \mu_h)S_h, \\
 \frac{dV_h}{dt} &= \alpha_h S_h - (\tau_1 + \mu_h)V_h, \\
 \frac{dA_h}{dt} &= \lambda_h S_h - (\gamma_h + \delta_1 + \mu_h)A_h, \\
 \frac{dI_h}{dt} &= \gamma_h A_h - (\tau_2 + \delta_2 + \mu_h)I_h, \\
 \frac{dR_h}{dt} &= \tau_1 V_h + \tau_2 I_h - \mu_h R_h, \\
 \frac{dS_r}{dt} &= \pi_r - (\lambda_r + \mu_r)S_r, \\
 \frac{dI_r}{dt} &= \lambda_r S_r - (\delta_3 + \mu_r)I_r,
 \end{aligned} \tag{1}$$

with the initial conditions  $S_h(0) > 0$ ,  $V_h(0) \geq 0$ ,  $A_h(0) \geq 0$ ,  $I_h(0) \geq 0$ ,  $R_h(0) \geq 0$ ,  $S_r(0) > 0$ ,  $I_r(0) \geq 0$ .

### 3. BASIC PROPERTIES OF MODEL

#### 3.1. Well-Posedness

A dynamical system is said to be well-posed if it satisfies three fundamental properties: existence, uniqueness, and stability of the solution [36]. In this section, we examine the well-posedness of system (1) by applying the contraction mapping principle, following the approach adopted by Elsonbaty et al. [19]. Consider the first differential equation of system (1):

$$\frac{dS_h}{dt} = \pi_h - (\lambda_h + \alpha_h + \mu_h)S_h.$$

By performing a simple integration, the integral form of the solution is expressed as

$$S_h(t) = S_h(0) + \int_0^t (\pi_h - (\lambda_h + \alpha_h + \mu_h)S_h) ds. \tag{2}$$

We define the operator  $P$  as follows

$$P(S_h(t)) = S_h(0) + \int_0^t (\pi_h - (\lambda_h + \alpha_h + \mu_h)S_h) ds. \quad (3)$$

Let  $X$  be a complete metric space defined by  $X = \{S_h : [0, a] \rightarrow \mathbb{R} \mid S_h \text{ is continuous}\}$ , with the metric

$$d(S_{h_1}, S_{h_2}) = \|S_{h_1} - S_{h_2}\|_\infty = \sup_{t \in [0, a]} |S_{h_1}(t) - S_{h_2}(t)|. \quad (4)$$

For any  $S_{h_1}, S_{h_2} \in X$ , we compute

$$\begin{aligned} |P(S_{h_1}(t)) - P(S_{h_2}(t))| &= \left| \int_0^t -(\lambda_h + \alpha_h + \mu_h)(S_{h_1} - S_{h_2}) ds \right|, \\ &\leq \int_0^t |\lambda_h + \alpha_h + \mu_h| |S_{h_1} - S_{h_2}| ds, \\ &\leq K \int_0^t |S_{h_1} - S_{h_2}| ds, \\ &\leq Kt \|S_{h_1} - S_{h_2}\|_\infty, \end{aligned}$$

where  $K = \sup_{s \in [0, a]} (\lambda_h + \alpha_h + \mu_h)$ .

Thus,

$$\|P(S_{h_1}) - P(S_{h_2})\|_\infty \leq Ka \|S_{h_1} - S_{h_2}\|_\infty. \quad (5)$$

To ensure that  $P$  is a contraction, the condition  $Ka < 1$  must hold, which implies  $a < \frac{1}{K}$ . Therefore, over the interval  $[0, a]$  where  $a < \frac{1}{K}$ , the operator  $P$  is a contraction on the space  $X$ . By the contraction mapping principle, there exists a unique  $S_h(t) \in X$  such that  $S_h(t) = P(S_h(t))$ .

Next, we analyze the stability of the solution  $S_h(t) \in X$ . Let  $S_{h_1}(t)$  and  $S_{h_2}(t)$  be two solutions with different initial values  $S_{h_1}(0)$  and  $S_{h_2}(0)$ , where  $S_{h_1}(0) \neq S_{h_2}(0)$ , satisfying

$$\begin{aligned} S_{h_1}(t) &= S_{h_1}(0) + \int_0^t (\pi_h - (\lambda_h + \alpha_h + \mu_h)S_{h_1}(s)) ds, \\ S_{h_2}(t) &= S_{h_2}(0) + \int_0^t (\pi_h - (\lambda_h + \alpha_h + \mu_h)S_{h_2}(s)) ds. \end{aligned} \quad (6)$$

Then,

$$\begin{aligned} |S_{h_1}(t) - S_{h_2}(t)| &= \left| (S_{h_1}(0) - S_{h_2}(0)) + \int_0^t -(\lambda_h + \alpha_h + \mu_h)(S_{h_1} - S_{h_2}) ds \right|, \\ &\leq |S_{h_1}(0) - S_{h_2}(0)| + \left| \int_0^t -(\lambda_h + \alpha_h + \mu_h)(S_{h_1} - S_{h_2}) ds \right|. \end{aligned}$$

Consequently, we obtain

$$\begin{aligned} \|S_{h_1}(t) - S_{h_2}(t)\|_\infty &\leq \|S_{h_1}(0) - S_{h_2}(0)\|_\infty + Ka \|S_{h_1} - S_{h_2}\|_\infty, \\ (1 - Ka) \|S_{h_1}(t) - S_{h_2}(t)\|_\infty &\leq \|S_{h_1}(0) - S_{h_2}(0)\|_\infty. \end{aligned}$$

By assuming  $0 < \|S_{h_1}(0) - S_{h_2}(0)\|_\infty \leq \theta$ , we conclude

$$0 < \|S_{h_1}(t) - S_{h_2}(t)\|_\infty \leq \frac{\theta}{1 - Ka} = \varepsilon, \quad (7)$$

where  $Ka < 1$  and  $K = \sup_{s \in [0, a]} (\lambda_h + \alpha_h + \mu_h)$ .

Therefore, the solution  $S_h(t) \in X$  satisfies the stability condition.

Furthermore, using a similar approach, it can be shown that the remaining state variables, namely  $V_h(t)$ ,  $A_h(t)$ ,  $I_h(t)$ ,  $R_h(t)$ ,  $S_r(t)$ , and  $I_r(t)$ , also satisfy the conditions of existence, uniqueness, and stability of solutions. Therefore, system (1) is considered well-posed.

### 3.2. Boundedness and Non-negativity

In this section, we establish the boundedness and the non-negativity of the solutions for system (1). Focusing first on the boundedness, starting with the human population, we observe that

$$\frac{dN_h}{dt} = \frac{dS_h}{dt} + \frac{dV_h}{dt} + \frac{dA_h}{dt} + \frac{dI_h}{dt} + \frac{dR_h}{dt},$$

which simplifies to

$$\frac{dN_h}{dt} = \pi_h - \mu_h N_h - \delta_1 A_h - \delta_2 I_h \leq \pi_h - \mu_h N_h. \quad (8)$$

The solution of differential inequality (8) is given by

$$N_h(t) \leq \frac{\pi_h}{\mu_h} + \left( N_h(0) - \frac{\pi_h}{\mu_h} \right) e^{-\mu_h t}. \quad (9)$$

Therefore, as  $t \rightarrow \infty$ , we have

$$\lim_{t \rightarrow \infty} N_h(t) \leq \frac{\pi_h}{\mu_h}. \quad (10)$$

Similarly, for the rodent population, we have

$$\frac{dN_r}{dt} = \frac{dS_r}{dt} + \frac{dI_r}{dt} = \pi_r - \mu_r N_r - \delta_3 I_r \leq \pi_r - \mu_r N_r. \quad (11)$$

The solution of differential inequality (11) is

$$N_r(t) \leq \frac{\pi_r}{\mu_r} + \left( N_r(0) - \frac{\pi_r}{\mu_r} \right) e^{-\mu_r t}. \quad (12)$$

Hence, as  $t \rightarrow \infty$ , it follows that

$$\lim_{t \rightarrow \infty} N_r(t) \leq \frac{\pi_r}{\mu_r}. \quad (13)$$

Consequently, the total human and rodent populations are respectively bounded by  $\frac{\pi_h}{\mu_h}$  and  $\frac{\pi_r}{\mu_r}$ . Therefore, system (1) admits bounded solutions within the following feasible region:

$$\Omega = \left\{ (S_h, V_h, A_h, I_h, R_h, S_r, I_r) \in \mathbb{R}_+^7 \mid N_h \leq \frac{\pi_h}{\mu_h}, N_r \leq \frac{\pi_r}{\mu_r} \right\}. \quad (14)$$

Next, we analyze the non-negativity of the solutions for system (1), as stated in the following theorem.

**Theorem 3.1.** *Let  $S_h(t), V_h(t), A_h(t), I_h(t), R_h(t), S_r(t)$ , and  $I_r(t)$  be solutions for system (1). If the initial conditions are non-negative, then the solutions remain non-negative for any time  $t \geq 0$ .*

*Proof:* Consider the first differential equation of system (1):

$$\frac{dS_h}{dt} = \pi_h - (\lambda_h + \alpha_h + \mu_h)S_h.$$

Multiplying both sides by the integrating factor  $e^{(\alpha_h + \mu_h)t + \int_0^t \lambda_h ds}$ , we obtain

$$\frac{d}{dt} \left( e^{(\alpha_h + \mu_h)t + \int_0^t \lambda_h ds} S_h \right) = \pi_h e^{(\alpha_h + \mu_h)t + \int_0^t \lambda_h ds}. \quad (15)$$

The solution of differential equation (15) is given by

$$S_h(t) = \left( \int_0^t \pi_h e^{(\alpha_h + \mu_h)y + \int_0^y \lambda_h ds} dy + S_h(0) \right) e^{-(\alpha_h + \mu_h)t - \int_0^t \lambda_h ds} \geq 0. \quad (16)$$

Hence,  $S_h(t)$  remains non-negative for any time  $t \geq 0$ . By applying a similar argument to the other state variables, it can be shown that  $V_h(t), A_h(t), I_h(t), R_h(t), S_r(t), I_r(t)$  are also non-negative for any time  $t \geq 0$ .

#### 4. EQUILIBRIUM AND BASIC REPRODUCTION NUMBER

In this section, we determine the equilibrium points of system (1), which are obtained by setting the time derivatives of all state variables to zero [12]:

$$\frac{dS_h}{dt} = \frac{dV_h}{dt} = \frac{dA_h}{dt} = \frac{dI_h}{dt} = \frac{dR_h}{dt} = \frac{dS_r}{dt} = \frac{dI_r}{dt} = 0.$$

Consequently, system (1) reduces to the following set of algebraic equations:

$$\begin{aligned} \pi_h - (\lambda_h + k_1)S_h &= 0, \\ \alpha_h S_h - k_2 V_h &= 0, \\ \lambda_h S_h - k_3 A_h &= 0, \\ \gamma_h A_h - k_4 I_h &= 0, \\ \tau_1 V_h + \tau_2 I_h - \mu_h R_h &= 0, \\ \pi_r - (\lambda_r + \mu_r)S_r &= 0, \\ \lambda_r S_r - k_5 I_r &= 0, \end{aligned} \quad (17)$$

where

$$k_1 = \alpha_h + \mu_h, k_2 = \tau_1 + \mu_h, k_3 = \gamma_h + \delta_1 + \mu_h, k_4 = \tau_2 + \delta_2 + \mu_h, \text{ and } k_5 = \delta_3 + \mu_r. \quad (18)$$

The disease-free equilibrium (DFE) corresponds to the state in which no Mpox infection exists in the population, i.e.,  $A_h = I_h = I_r = 0$ . The DFE for system (1) is given by

$$X^0 = (S_h^0, V_h^0, A_h^0, I_h^0, R_h^0, S_r^0, I_r^0),$$

with components

$$X^0 = \left( \frac{\pi_h}{k_1}, \frac{\alpha_h \pi_h}{k_1 k_2}, 0, 0, \frac{\alpha_h \pi_h \tau_1}{k_1 k_2 \mu_h}, \frac{\pi_r}{\mu_r}, 0 \right). \quad (19)$$

Next, we derive the basic reproduction number  $\mathcal{R}_0$ , which is defined as the expected number of secondary infections generated by a single infected individual in a fully susceptible population [24]. In this research,  $\mathcal{R}_0$  is computed using the next-generation matrix (NGM) method [18]. The infected compartments in system (1) are  $A_h$ ,  $I_h$ , and  $I_r$ , and the dynamics of the infected subsystem are represented as

$$\begin{pmatrix} \frac{dA_h}{dt} \\ \frac{dI_h}{dt} \\ \frac{dI_r}{dt} \end{pmatrix} = \begin{pmatrix} \lambda_h S_h \\ 0 \\ \lambda_r S_r \end{pmatrix} - \begin{pmatrix} k_3 A_h \\ -\gamma_h A_h + k_4 I_h \\ k_5 I_r \end{pmatrix}. \quad (20)$$

Linearizing system (20) leads to the construction of matrices  $F$  and  $V$ :

$$F = \begin{pmatrix} \frac{(\beta_1 - \lambda_h)S_h}{N_h} & \frac{(\beta_2 - \lambda_h)S_h}{N_h} & \frac{\beta_3 S_h}{N_h} \\ 0 & 0 & 0 \\ 0 & 0 & \frac{(\beta_4 - \lambda_r)S_r}{N_r} \end{pmatrix}, \quad V = \begin{pmatrix} k_3 & 0 & 0 \\ -\gamma_h & k_4 & 0 \\ 0 & 0 & k_5 \end{pmatrix}. \quad (21)$$

Substituting DFE (19) into  $F$  and  $V$ , we obtain

$$\mathbb{F} = \begin{pmatrix} \frac{\beta_1 \mu_h}{k_1} & \frac{\beta_2 \mu_h}{k_1} & \frac{\beta_3 \mu_h}{k_1} \\ 0 & 0 & 0 \\ 0 & 0 & \beta_4 \end{pmatrix}, \quad \mathbb{V} = \begin{pmatrix} k_3 & 0 & 0 \\ -\gamma_h & k_4 & 0 \\ 0 & 0 & k_5 \end{pmatrix}. \quad (22)$$

The next-generation matrix  $K = \mathbb{F}\mathbb{V}^{-1}$  is then calculated as

$$K = \begin{pmatrix} \frac{\beta_1 \mu_h k_4 + \beta_2 \mu_h \gamma_h}{k_1 k_3 k_4} & \frac{\beta_2 \mu_h}{k_1 k_4} & \frac{\beta_3 \mu_h}{k_1 k_5} \\ 0 & 0 & 0 \\ 0 & 0 & \frac{\beta_4}{k_5} \end{pmatrix}. \quad (23)$$

The eigenvalues of  $K$  are

$$\lambda_1 = 0, \lambda_2 = \frac{\beta_1 \mu_h k_4 + \beta_2 \mu_h \gamma_h}{k_1 k_3 k_4}, \text{ and } \lambda_3 = \frac{\beta_4}{k_5}.$$

Thus, the basic reproduction number is given by

$$\mathcal{R}_0 = \max \{ \mathcal{R}_0^h, \mathcal{R}_0^r \} = \max \left\{ \frac{\beta_1 \mu_h k_4 + \beta_2 \mu_h \gamma_h}{k_1 k_3 k_4}, \frac{\beta_4}{k_5} \right\}. \quad (24)$$

The next step, we determine the endemic equilibrium of system (1), which corresponds to the state in which Mpx persists in the population. There are two types of endemic equilibria in system (1): human-endemic equilibrium (HEE) and endemic equilibrium (EE). The HEE arises when Mpx infection is present in the human population but not in rodents, i.e.,  $A_h \neq 0$ ,  $I_h \neq 0$ , but  $I_r = 0$ . Under this condition, the HEE is expressed as

$$X^+ = (S_h^+, V_h^+, A_h^+, I_h^+, R_h^+, S_r^+, I_r^+), \quad (25)$$

where

$$\begin{aligned} S_h^+ &= \frac{\pi_h}{\lambda_h^+ + k_1}, & V_h^+ &= \frac{\alpha_h \pi_h}{(\lambda_h^+ + k_1) k_2}, & A_h^+ &= \frac{\pi_h \lambda_h^+}{(\lambda_h^+ + k_1) k_3}, & I_h^+ &= \frac{\pi_h \gamma_h \lambda_h^+}{(\lambda_h^+ + k_1) k_3 k_4}, \\ R_h^+ &= \frac{\alpha_h \pi_h \tau_1 k_3 k_4 + \pi_h \tau_2 \gamma_h \lambda_h^+ k_2}{(\lambda_h^+ + k_1) k_2 k_3 k_4 \mu_h}, & S_r^+ &= \frac{\pi_r}{\mu_r}, & I_r^+ &= 0, \end{aligned}$$

and the infection rate  $\lambda_h^+$  is given by

$$\lambda_h^+ = \frac{k_1 k_3 k_4 (\mathcal{R}_0^h - 1)}{k_4 \mu_h + \tau_2 \gamma_h + \gamma_h \mu_h}. \quad (26)$$

It follows that the HEE exists if and only if  $\mathcal{R}_0^h > 1$ .

The endemic equilibrium (EE) refers to the condition in which both human and rodent populations are actively infected by Mpx, i.e.,  $A_h \neq 0$ ,  $I_h \neq 0$ , and  $I_r \neq 0$ . In this case, the EE is represented as

$$X^* = (S_h^*, V_h^*, A_h^*, I_h^*, R_h^*, S_r^*, I_r^*), \quad (27)$$

where

$$\begin{aligned} S_h^* &= \frac{\pi_h}{\lambda_h^* + k_1}, & V_h^* &= \frac{\alpha_h \pi_h}{(\lambda_h^* + k_1) k_2}, & A_h^* &= \frac{\pi_h \lambda_h^*}{(\lambda_h^* + k_1) k_3}, & I_h^* &= \frac{\pi_h \gamma_h \lambda_h^*}{(\lambda_h^* + k_1) k_3 k_4}, \\ R_h^* &= \frac{\alpha_h \pi_h \tau_1 k_3 k_4 + \pi_h \tau_2 \gamma_h \lambda_h^* k_2}{(\lambda_h^* + k_1) k_2 k_3 k_4 \mu_h}, & S_r^* &= \frac{\pi_r}{\lambda_r^* + \mu_r}, & I_r^* &= \frac{\pi_r \lambda_r^*}{k_5 (\lambda_r^* + \mu_r)}, \end{aligned}$$

with

$$\lambda_r^* = k_5 (\mathcal{R}_0^r - 1), \quad (28)$$

and the infection rate  $\lambda_h^*$  is the positive root of the quadratic equation

$$a \lambda_h^{*2} + b \lambda_h^* + c = 0, \quad (29)$$

where the coefficients are defined as

$$\begin{aligned} a &= \pi_h k_5 (\lambda_r^* + \mu_r) (k_4 \mu_h + \tau_2 \gamma_h + \gamma_h \mu_h), \\ b &= \pi_h k_1 k_3 k_4 k_5 (\lambda_r^* + \mu_r) (1 - \mathcal{R}_0^h) - \beta_3 \pi_r \lambda_r^* k_3 k_4, \\ c &= -\beta_3 \pi_r \mu_h \lambda_r^* k_1 k_3 k_4. \end{aligned}$$

From the analytical expression, when  $\mathcal{R}_0^r = 1$ , this means  $X^* = X^+$ . Hence, for the endemic state to occur, it is necessary that  $\lambda_r^* > 0$ , which happens when  $\mathcal{R}_0^r > 1$ . Since all parameters are positive, we have  $a > 0$  and  $c < 0$ , ensuring that a unique positive solution for  $\lambda_h^*$  exists. Specifically, for the condition  $\mathcal{R}_0^h \geq 1$ , then  $b < 0$ , which gives  $\lambda_h^* = \frac{-b + \sqrt{b^2 - 4ac}}{2a} > 0$ . Therefore, the EE exists and is unique if and only if  $\mathcal{R}_0^r > 1$ .

Based on the previous analysis, the existence criteria of the equilibrium points can be summarized as follows: the disease-free equilibrium (DFE) always exists, the human-endemic equilibrium (HEE) exists when  $\mathcal{R}_0^h > 1$ , and the endemic equilibrium (EE) exists when  $\mathcal{R}_0^r > 1$ . These criteria are illustrated as existence regions in Figure 2.

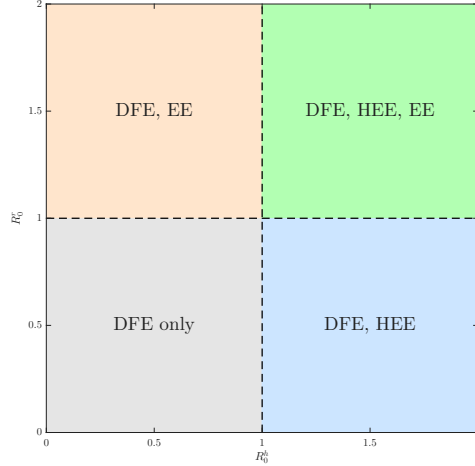


Figure 2: Existence regions of equilibrium points based on  $\mathcal{R}_0^h$  and  $\mathcal{R}_0^r$ .

## 5. STABILITY OF EQUILIBRIUM

### 5.1. Stability of Disease-Free Equilibrium

In this section, we analyze both the local and global stability of the disease-free equilibrium (DFE) of system (1). The local stability is examined through linearization using the Jacobian matrix, as stated in the following theorem.

**Theorem 5.1.** *The DFE of system (1) is locally asymptotically stable if and only if  $\mathcal{R}_0 < 1$ .*

*Proof:* The Jacobian matrix of system (1) is given by

$$J = \begin{pmatrix} A - \lambda_h - k_1 & A & B_1 & B_2 & A & A & C \\ \alpha_h & -k_2 & 0 & 0 & 0 & 0 & 0 \\ -A + \lambda_h & -A & -B_1 - k_3 & -B_2 & -A & -A & -C \\ 0 & 0 & \gamma_h & -k_4 & 0 & 0 & 0 \\ 0 & \tau_1 & 0 & \tau_2 & -\mu_h & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 & D - \lambda_r - \mu_r & E \\ 0 & 0 & 0 & 0 & 0 & -D + \lambda_r & -E - k_5 \end{pmatrix}, \quad (30)$$

where  $A = \frac{\lambda_h S_h}{N_h}$ ,  $B_i = \frac{(\lambda_h - \beta_i) S_h}{N_h}$ ,  $C = \frac{-\beta_3 S_h}{N_h}$ ,  $D = \frac{\lambda_r S_r}{N_r}$ ,  $E = \frac{(\lambda_r - \beta_4) S_r}{N_r}$ , and the terms  $k_1$  to  $k_5$  are defined in (18).

Substituting the DFE (19) into Jacobian matrix (30) yields

$$J(X^0) = \begin{pmatrix} -k_1 & 0 & -a_1 & -a_2 & 0 & 0 & -a_3 \\ \alpha_h & -k_2 & 0 & 0 & 0 & 0 & 0 \\ 0 & 0 & a_1 - k_3 & a_2 & 0 & 0 & a_3 \\ 0 & 0 & \gamma_h & -k_4 & 0 & 0 & 0 \\ 0 & \tau_1 & 0 & \tau_2 & -\mu_h & 0 & 0 \\ 0 & 0 & 0 & 0 & 0 & -\mu_r & -\beta_4 \\ 0 & 0 & 0 & 0 & 0 & 0 & \beta_4 - k_5 \end{pmatrix}, \quad (31)$$

where  $a_j = \frac{\beta_j \mu_h}{k_1}$ .

The characteristic equation derived from matrix (31) is

$$(k_1 + \lambda)(k_2 + \lambda)(\mu_h + \lambda)(\mu_r + \lambda)(-\beta_4 + k_5 + \lambda)(\lambda^2 + m_1\lambda + m_2) = 0, \quad (32)$$

where

$$m_1 = \frac{k_1 k_3 k_4 (1 - \mathcal{R}_0^h) + \beta_2 \mu_h \gamma_h + k_1 k_4^2}{k_1 k_4} \text{ and } m_2 = \frac{k_1 k_3 k_4 (1 - \mathcal{R}_0^h)}{k_1}.$$

The eigenvalues are  $\lambda_1 = -k_1$ ,  $\lambda_2 = -k_2$ ,  $\lambda_3 = -\mu_h$ ,  $\lambda_4 = -\mu_r$ ,  $\lambda_5 = \beta_4 - k_5$ , and the roots of the quadratic equation

$$\lambda^2 + m_1\lambda + m_2 = 0. \quad (33)$$

It is evident that  $\lambda_1, \lambda_2, \lambda_3, \lambda_4 < 0$ , and  $\lambda_5 < 0$  if and only if  $\mathcal{R}_0^r < 1$ , since  $\lambda_5 = \beta_4 - k_5 = k_5(\mathcal{R}_0^r - 1) < 0$ . According to the Routh-Hurwitz criterion [11], the roots of the quadratic equation (33) will have negative real parts if and only if  $m_1 > 0$  and  $m_2 > 0$ , which holds true when  $\mathcal{R}_0^h < 1$ . Therefore, the DFE of system (1) is locally asymptotically stable if and only if  $\mathcal{R}_0 < 1$ .

Next, to establish global stability, we apply a Lyapunov function [32] as stated in the following theorem.

**Theorem 5.2.** *The DFE of system (1) is globally asymptotically stable if and only if  $\mathcal{R}_0 < 1$ .*

*Proof:* Consider the Lyapunov function  $L : D \rightarrow \mathbb{R}$  defined as

$$L = C_1 A_h + C_2 I_h + C_3 I_r, \quad (34)$$

where  $C_1, C_2, C_3 > 0$ .

It can be observed that  $L(X^0) = C_1 A_h^0 + C_2 I_h^0 + C_3 I_r^0 = 0$ , and for any state different from the DFE, we have  $L > 0$ . Next, taking the time derivative of  $L$ , we obtain

$$\frac{\partial L}{\partial t} \leq \left( \frac{C_1(\beta_1 \mu_h - k_1 k_3)}{k_1} + C_2 \gamma_h \right) A_h + \left( \frac{C_1 \beta_2 \mu_h}{k_1} - C_2 k_4 \right) I_h + \left( \frac{C_1 \beta_3 \mu_h}{k_1} + C_3(\beta_4 - k_5) \right) I_r. \quad (35)$$

To eliminate the coefficient of  $A_h$ , set

$$C_1 = \frac{-\gamma_h k_1}{\beta_1 \mu_h - k_1 k_3}, \quad C_2 = 1. \quad (36)$$

Since  $C_1 > 0$  and  $\gamma_h k_1 > 0$ , it follows that  $\beta_1 \mu_h - k_1 k_3 < 0$ .

Choose  $C_3 > 0$  as

$$C_3 = \frac{\beta_3 k_4}{\beta_2 k_5 (1 - \mathcal{R}_0^r)}, \quad (37)$$

where  $\mathcal{R}_0^r < 1$ .

Substituting  $C_1$ ,  $C_2$ , and  $C_3$  into differential inequality (35), we get

$$\frac{\partial L}{\partial t} \leq \frac{k_1 k_3 k_4 (1 - \mathcal{R}_0^h)}{\beta_1 \mu_h - k_1 k_3} I_h + \frac{\beta_3 k_1 k_3 k_4 (1 - \mathcal{R}_0^h)}{(\beta_1 \mu_h - k_1 k_3) \beta_2} I_r. \quad (38)$$

Consequently, for both coefficients of  $I_h$  and  $I_r$  to be negative, it is required that  $\mathcal{R}_0^h < 1$ . Thus, the time derivative of Lyapunov function  $L$  satisfies  $\frac{\partial L}{\partial t} < 0$  if and only if  $\mathcal{R}_0 < 1$ , and  $\frac{\partial L}{\partial t} = 0$  holds only when  $A_h = A_h^0$ ,  $I_h = I_h^0$ , and  $I_r = I_r^0$ . By LaSalle's invariance principle [22], this ensures that all trajectories converge to the DFE. Therefore, the DFE of system (1) is globally asymptotically stable if and only if  $\mathcal{R}_0 < 1$ .

## 5.2. Global Stability of Endemic Equilibrium

In this section, we investigate the global stability of the human-endemic equilibrium (HEE) and the endemic equilibrium (EE) of system (1) by constructing Lyapunov functions [32]. The global stability of the human-endemic equilibrium (HEE) is presented in the following theorem.

**Theorem 5.3.** *Let  $\mathcal{R}_0^h > 1$  such that the HEE exists. The HEE of system (1) is globally asymptotically stable if and only if  $\mathcal{R}_0^r < 1$ .*

*Proof:* Define a Lyapunov function  $L : D \rightarrow \mathbb{R}$  as follows

$$L = \left( S_h - S_h^+ - S_h^+ \ln \frac{S_h}{S_h^+} \right) + p_1 \left( V_h - V_h^+ - V_h^+ \ln \frac{V_h}{V_h^+} \right) + \left( A_h - A_h^+ - A_h^+ \ln \frac{A_h}{A_h^+} \right) + p_2 \left( I_h - I_h^+ - I_h^+ \ln \frac{I_h}{I_h^+} \right) + p_3 \left( S_r - S_r^+ - S_r^+ \ln \frac{S_r}{S_r^+} \right) + p_4 I_r. \quad (39)$$

where  $p_1 = \frac{\beta_1 A_h^+}{\alpha_h N_h^+}$ ,  $p_2 = \frac{\beta_2 I_h^+ S_h^+}{\gamma_h A_h^+ N_h^+}$ ,  $p_3 = \frac{S_r^+}{\beta_4}$ , and  $p_4 = \frac{S_r^+}{k_5(1-\mathcal{R}_0^r)}$  with  $\mathcal{R}_0^r < 1$ .

Let  $L_1 = S_h - S_h^+ - S_h^+ \ln \frac{S_h}{S_h^+}$ , and similarly define  $L_2$  through  $L_5$ . It can be seen that  $L(X^+) = L_1^+ + p_1 L_2^+ + L_3^+ + p_2 L_4^+ + p_3 L_5^+ + p_4 I_r^+ = 0$ . Next, let  $y = \frac{S_h}{S_h^+}$ , and define  $f(y) = y - 1 - \ln y$ . Then  $f'(y) = 1 - \frac{1}{y}$ , which implies  $f(y)$  is decreasing for  $0 < y < 1$  and increasing for  $y > 1$ , achieving a global minimum at  $y = 1$  with  $f(1) = 0$ . Thus, when  $S_h \neq S_h^+$ , it follows that  $L_1 > 0$ . By the same argument,  $L_2, L_3, L_4, L_5 > 0$ , hence  $L > 0$ . Next, taking the time derivative of  $L$  gives

$$\begin{aligned} \frac{\partial L}{\partial t} = & \left( 1 - \frac{S_h^+}{S_h} \right) \frac{dS_h}{dt} + p_1 \left( 1 - \frac{V_h^+}{V_h} \right) \frac{dV_h}{dt} + \left( 1 - \frac{A_h^+}{A_h} \right) \frac{dA_h}{dt} + p_2 \left( 1 - \frac{I_h^+}{I_h} \right) \frac{dI_h}{dt} + \\ & p_3 \left( 1 - \frac{S_r^+}{S_r} \right) \frac{dS_r}{dt} + p_4 \frac{dI_r}{dt}. \end{aligned} \quad (40)$$

Substituting system (1) into differential equation (40), we have

$$\begin{aligned} \frac{\partial L}{\partial t} = & \left( 1 - \frac{S_h^+}{S_h} \right) (\pi_h - (\lambda_h + k_1)S_h) + p_1 \left( 1 - \frac{V_h^+}{V_h} \right) (\alpha_h S_h - k_2 V_h) + \left( 1 - \frac{A_h^+}{A_h} \right) (\lambda_h S_h - k_3 A_h) + \\ & p_2 \left( 1 - \frac{I_h^+}{I_h} \right) (\gamma_h A_h - k_4 I_h) + p_3 \left( 1 - \frac{S_r^+}{S_r} \right) (\pi_r - (\lambda_r + \mu_r)S_r) + p_4 (\lambda_r S_r - k_5 I_r). \end{aligned}$$

At HEE, the following relationships are derived from system (17):

$$\pi_h = (\lambda_h^+ + k_1)S_h^+, \quad k_2 = \frac{\alpha_h S_h^+}{V_h^+}, \quad k_3 = \frac{\lambda_h S_h^+}{A_h^+}, \quad k_4 = \frac{\gamma_h A_h^+}{I_h^+}, \quad \pi_r = (\lambda_r^+ + \mu_r)S_r^+.$$

By inserting these relationships into the preceding equation and applying algebraic manipulation with the substitutions  $p_1, p_2, p_3, p_4, \lambda_h, \lambda_h^+, \lambda_r, \lambda_r^+$  and under the assumptions that  $S_r \leq S_r^+, N_h = N_h^+, N_r = N_r^+, \frac{S_h^+}{S_h} + \frac{A_h}{A_h^+} \leq 2$ , we get

$$\begin{aligned} \frac{\partial L}{\partial t} \leq & k_1 S_h^+ \left( 2 - \frac{S_h}{S_h^+} - \frac{S_h^+}{S_h} \right) + \frac{\beta_1 A_h^+ S_h^+}{N_h^+} \left( 3 - \frac{S_h^+}{S_h} - \frac{V_h}{V_h^+} - \frac{S_h V_h^+}{S_h^+ V_h} \right) + \\ & \frac{\beta_2 I_h^+ S_h^+}{N_h^+} \left( 3 - \frac{S_h^+}{S_h} - \frac{A_h I_h^+}{A_h^+ I_h} - \frac{I_h S_h A_h^+}{I_h^+ S_h^+ A_h} \right) + \frac{\beta_3 I_r S_h^+}{N_h^+} \left( 3 - \frac{S_h^+}{S_h} - \frac{A_h}{A_h^+} - \frac{S_h A_h^+}{S_h^+ A_h} \right) + \\ & \frac{\mu_r S_r^{+2}}{\beta_4} \left( 2 - \frac{S_r}{S_r^+} - \frac{S_r^+}{S_r} \right) - S_r I_r. \end{aligned} \quad (41)$$

Using the arithmetic-geometric mean inequality, we have

$$\begin{aligned} \left(2 - \frac{S_h}{S_h^+} - \frac{S_h^+}{S_h}\right) &\leq 0, \quad \left(3 - \frac{S_h^+}{S_h} - \frac{V_h}{V_h^+} - \frac{S_h V_h^+}{S_h^+ V_h}\right) \leq 0, \quad \left(3 - \frac{S_h^+}{S_h} - \frac{A_h I_h^+}{A_h^+ I_h} - \frac{I_h S_h A_h^+}{I_h^+ S_h^+ A_h}\right) \leq 0, \\ \left(3 - \frac{S_h^+}{S_h} - \frac{A_h}{A_h^+} - \frac{S_h A_h^+}{S_h^+ A_h}\right) &\leq 0, \quad \left(2 - \frac{S_r}{S_r^+} - \frac{S_r^+}{S_r}\right) \leq 0. \end{aligned}$$

Thus, the time derivative of Lyapunov function  $L$  satisfies  $\frac{\partial L}{\partial t} < 0$  if and only if  $\mathcal{R}_0^r < 1$ . Moreover,  $\frac{\partial L}{\partial t} = 0$  only when  $S_h = S_h^+$ ,  $V_h = V_h^+$ ,  $A_h = A_h^+$ ,  $I_h = I_h^+$ ,  $S_r = S_r^+$ , and  $I_r = I_r^+$ . According to LaSalle's invariance principle [22], this implies that all trajectories converge to the HEE. Therefore, the HEE of system (1) is globally asymptotically stable if and only if  $\mathcal{R}_0^r < 1$ .

Next, we examine the global stability of the endemic equilibrium (EE) of system (1), as presented in the following theorem.

**Theorem 5.4.** *Let  $\mathcal{R}_0^r > 1$  such that the EE exists. The EE of system (1) is globally asymptotically stable.*

*Proof:* Define a Lyapunov function  $L: D \rightarrow \mathbb{R}$  as follows

$$\begin{aligned} L = &\left(S_h - S_h^* - S_h^* \ln \frac{S_h}{S_h^*}\right) + q_1 \left(V_h - V_h^* - V_h^* \ln \frac{V_h}{V_h^*}\right) + \left(A_h - A_h^* - A_h^* \ln \frac{A_h}{A_h^*}\right) + \\ &q_2 \left(I_h - I_h^* - I_h^* \ln \frac{I_h}{I_h^*}\right) + \left(S_r - S_r^* - S_r^* \ln \frac{S_r}{S_r^*}\right) + \left(I_r - I_r^* - I_r^* \ln \frac{I_r}{I_r^*}\right), \end{aligned} \quad (42)$$

where  $q_1 = \frac{\beta_1 A_h^*}{\alpha_h N_h^*}$  and  $q_2 = \frac{\beta_2 I_h^* S_h^*}{\gamma_h A_h^* N_h^*}$ .

It is clear that  $L(X^*) = L_1^* + q_1 L_2^* + L_3^* + q_2 L_4^* + L_5^* + L_6^* = 0$ . By analyzing the convexity properties of each component, it follows that  $L > 0$  for all state variables not equal to the EE. Next, taking the time derivative of  $L$  yields

$$\begin{aligned} \frac{\partial L}{\partial t} = &\left(1 - \frac{S_h^*}{S_h}\right) \frac{dS_h}{dt} + q_1 \left(1 - \frac{V_h^*}{V_h}\right) \frac{dV_h}{dt} + \left(1 - \frac{A_h^*}{A_h}\right) \frac{dA_h}{dt} + q_2 \left(1 - \frac{I_h^*}{I_h}\right) \frac{dI_h}{dt} + \\ &\left(1 - \frac{S_r^*}{S_r}\right) \frac{dS_r}{dt} + \left(1 - \frac{I_r^*}{I_r}\right) \frac{dI_r}{dt}. \end{aligned} \quad (43)$$

By following the same approach used in the proof of Theorem 5.3, and assuming that  $N_h = N_h^*$ ,  $N_r = N_r^*$ , and  $\frac{I_r}{I_r^*} + \frac{I_r^*}{I_r} \leq 2$ , we have

$$\begin{aligned} \frac{\partial L}{\partial t} \leq &k_1 S_h^* \left(2 - \frac{S_h}{S_h^*} - \frac{S_h^*}{S_h}\right) + \frac{\beta_1 A_h^* S_h^*}{N_h^*} \left(3 - \frac{S_h^*}{S_h} - \frac{V_h}{V_h^*} - \frac{S_h V_h^*}{S_h^* V_h}\right) + \\ &\frac{\beta_2 I_h^* S_h^*}{N_h^*} \left(3 - \frac{S_h^*}{S_h} - \frac{A_h I_h^*}{A_h^* I_h} - \frac{I_h S_h A_h^*}{I_h^* S_h^* A_h}\right) + \frac{\beta_3 I_r^* S_h^*}{N_h^*} \left(4 - \frac{S_h^*}{S_h} - \frac{I_r}{I_r^*} - \frac{A_h}{A_h^*} - \frac{I_r S_h A_h^*}{I_r^* S_h^* A_h}\right) \\ &+ \frac{\beta_4 I_r^* S_r^*}{N_r^*} \left(2 - \frac{S_r}{S_r^*} - \frac{S_r^*}{S_r}\right) + \mu_r S_r^* \left(2 - \frac{S_r}{S_r^*} - \frac{S_r^*}{S_r}\right). \end{aligned} \quad (44)$$

Using the arithmetic-geometric mean inequality, we have

$$\begin{aligned} \left(2 - \frac{S_h}{S_h^*} - \frac{S_h^*}{S_h}\right) &\leq 0, \quad \left(3 - \frac{S_h^*}{S_h} - \frac{V_h}{V_h^*} - \frac{S_h V_h^*}{S_h^* V_h}\right) \leq 0, \quad \left(3 - \frac{S_h^*}{S_h} - \frac{A_h I_h^*}{A_h^* I_h} - \frac{I_h S_h A_h^*}{I_h^* S_h^* A_h}\right) \leq 0, \\ \left(4 - \frac{S_h^*}{S_h} - \frac{I_r}{I_r^*} - \frac{A_h}{A_h^*} - \frac{I_r S_h A_h^*}{I_r^* S_h^* A_h}\right) &\leq 0, \quad \left(2 - \frac{S_r}{S_r^*} - \frac{S_r^*}{S_r}\right) \leq 0. \end{aligned}$$

Thus, the time derivative of the Lyapunov function  $L$  satisfies  $\frac{\partial L}{\partial t} < 0$ , and  $\frac{\partial L}{\partial t} = 0$  if and only if  $S_h = S_h^*$ ,  $V_h = V_h^*$ ,  $A_h = A_h^*$ ,  $I_h = I_h^*$ ,  $S_r = S_r^*$ , and  $I_r = I_r^*$ . By LaSalle's invariance principle [22], this

guarantees that all trajectories converge to the EE. Therefore, the EE of system (1) is globally asymptotically stable.

Based on the stability analysis, the global stability criteria of the equilibrium points can be summarized as follows: the disease-free equilibrium (DFE) is globally asymptotically stable when  $\mathcal{R}_0 = \max\{\mathcal{R}_0^h, \mathcal{R}_0^r\} < 1$ , the human-endemic equilibrium (HEE) exists and is globally asymptotically stable when  $\mathcal{R}_0^h > 1$  and  $\mathcal{R}_0^r < 1$ , and the endemic equilibrium (EE) exists and is globally asymptotically stable when  $\mathcal{R}_0^r > 1$ . These criteria are visualized as global asymptotic stability regions in Figure 3.

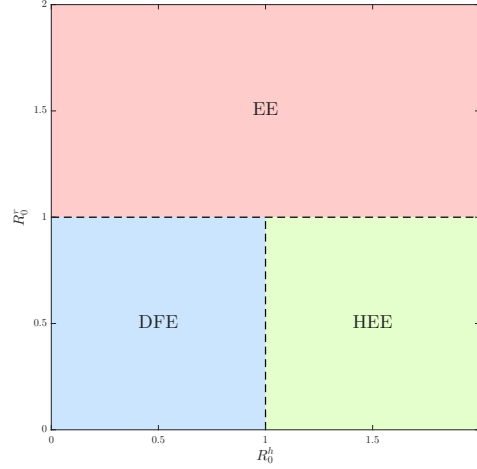


Figure 3: Global asymptotic stability regions of equilibrium points based on  $\mathcal{R}_0^h$  and  $\mathcal{R}_0^r$ .

## 6. SENSITIVITY ANALYSIS

In this section, we present a sensitivity analysis to identify the parameters that most significantly affect the stability conditions of the equilibrium points of system (1). The sensitivity index for each parameter is computed using the following expression.

$$e_x = \frac{x}{\mathcal{R}_0} \times \frac{\partial \mathcal{R}_0}{\partial x}, \quad (45)$$

where  $x$ ,  $\mathcal{R}_0$ , and  $e_x$  denote the parameter of interest, the basic reproduction number, and the sensitivity index of  $x$  with respect to  $\mathcal{R}_0$ , respectively [16].

Table 2: Sensitivity indices.

Parameter	Sensitivity index w.r.t. $\mathcal{R}_0^h$	Sensitivity index w.r.t. $\mathcal{R}_0^r$
$\alpha_h$	-0.99851	—
$\beta_1$	0.75756	—
$\beta_2$	0.24244	—
$\beta_4$	—	1
$\gamma_h$	-0.74327	—
$\tau_2$	-0.24137	—
$\delta_1$	-0.00808	—
$\delta_2$	-0.00084	—
$\delta_3$	—	-0.01961
$\mu_h$	0.99195	—
$\mu_r$	—	-0.98039

A positive sensitivity index means that with an increase or decrease in the corresponding parameter, there is a corresponding increase or decrease in  $\mathcal{R}_0$ . In contrast, a negative sensitivity index implies that an increase

or decrease in the parameter decreases or increases  $\mathcal{R}_0$ , respectively. Based on the values in Table 1, the computed sensitivity indices for each parameter included in  $\mathcal{R}_0$  are summarized in Table 2. Based on the results, parameters  $\beta_1$ ,  $\beta_2$ , and  $\mu_h$  exhibit positive sensitivity indices with respect to  $\mathcal{R}_0^h$ , indicating that increases in these parameters will raise the value of  $\mathcal{R}_0^h$ . In contrast, parameters  $\alpha_h$ ,  $\gamma_h$ ,  $\tau_2$ ,  $\delta_1$ , and  $\delta_2$  have negative sensitivity indices with respect to  $\mathcal{R}_0^h$ , meaning that increases in these parameters will reduce  $\mathcal{R}_0^h$ . Regarding  $\mathcal{R}_0^r$ , only  $\beta_4$  has a positive sensitivity index, whereas  $\delta_3$  and  $\mu_r$  have negative indices.

Table 3: Impact of parameter variations with respect to  $\mathcal{R}_0$ .

Parameter ( $p$ )	Sensitivity index		$\mathcal{R}_0^h = 0.00739$		$\mathcal{R}_0^r = 1.79972$	
	w.r.t. $\mathcal{R}_0^h$	w.r.t. $\mathcal{R}_0^r$	$p - 10\%$	$p + 10\%$	$p - 10\%$	$p + 10\%$
$\alpha_h$	-0.99851	—	0.00813	0.00665	—	—
$\beta_1$	0.75756	—	0.00683	0.00795	—	—
$\beta_2$	0.24244	—	0.00721	0.00757	—	—
$\beta_4$	—	1	—	—	1.61975	1.97969
$\gamma_h$	-0.74327	—	0.00794	0.00684	—	—
$\tau_2$	-0.24137	—	0.00757	0.00721	—	—
$\delta_1$	-0.00808	—	0.00740	0.00739	—	—
$\delta_2$	-0.00084	—	0.00739	0.00739	—	—
$\delta_3$	—	-0.01961	—	—	1.80325	1.79619
$\mu_h$	0.99195	—	0.00666	0.00812	—	—
$\mu_r$	—	-0.98039	—	—	1.97616	1.62328

Table 3 presents the impact of  $\pm 10\%$  changes in parameter values with respect to  $\mathcal{R}_0^h$  and  $\mathcal{R}_0^r$ . Based on the results, the sensitivity index of parameter  $\beta_1$  with respect to  $\mathcal{R}_0^h$  is 0.75756, indicating that a 10% increase (or decrease) in the effective contact rate between susceptible and asymptomatic individuals results in a 7.5756% increase (or decrease) in  $\mathcal{R}_0^h$ . On the other hand, the sensitivity index of  $\alpha_h$  is  $-0.99851$ , meaning that a 10% increase (or decrease) in the vaccination rate of susceptible individuals leads to a 9.9851% decrease (or increase) in  $\mathcal{R}_0^h$ . Similar analyses apply to other parameters including  $\beta_2$ ,  $\beta_4$ ,  $\gamma_h$ ,  $\tau_2$ ,  $\delta_1$ ,  $\delta_2$ ,  $\delta_3$ ,  $\mu_h$ , and  $\mu_r$ . Overall, the most influential parameters on  $\mathcal{R}_0^h$  are  $\alpha_h$  and  $\mu_h$ , as they have the highest absolute sensitivity indices. For  $\mathcal{R}_0^r$ , the parameters with the greatest influence are  $\beta_4$  and  $\mu_r$ . However, since the natural death rate of humans ( $\mu_h$ ) and rodents ( $\mu_r$ ) are generally not subject to intervention, the most impactful controllable parameters are  $\beta_1$  and  $\alpha_h$  in the human population, and parameters  $\beta_4$  and  $\delta_3$  in the rodent population.

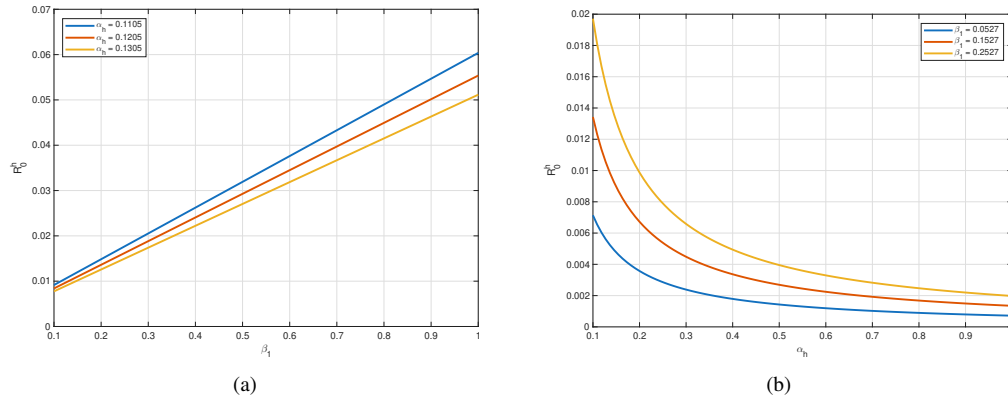


Figure 4: Sensitivity of  $\beta_1$  (panel (a)) and  $\alpha_h$  (panel (b)) with respect to  $\mathcal{R}_0^h$ .

Next, we conduct the sensitivity simulations of parameters  $\beta_1$  and  $\alpha_h$  with respect to  $\mathcal{R}_0^h$  in Figure 4. In panel (a), the values  $\alpha_h = 0.1105$ ,  $\alpha_h = 0.1205$ , and  $\alpha_h = 0.1305$  are selected, while  $\beta_1$  varies within the

interval  $0.1 \leq \beta_1 \leq 1$ . This panel illustrates that an increase in parameter  $\beta_1$  results in an increase in  $\mathcal{R}_0^h$  for all values of  $\alpha_h$ . In panel (b), the values  $\beta_1 = 0.0527$ ,  $\beta_1 = 0.1527$ , and  $\beta_1 = 0.2527$  are selected, while  $\alpha_h$  varies within the interval  $0.1 \leq \alpha_h \leq 1$ . This panel illustrates that an increase in parameter  $\alpha_h$  leads to a decrease in  $\mathcal{R}_0^h$  for all values of  $\beta_1$ .

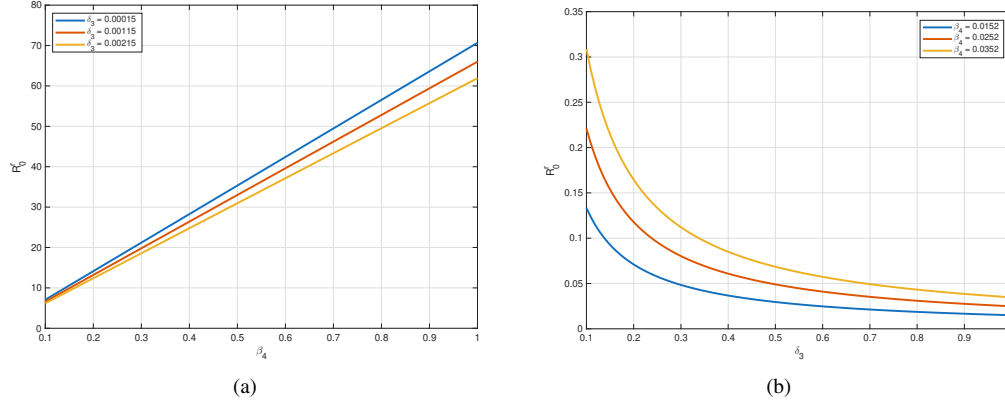


Figure 5: Sensitivity of  $\beta_4$  (panel (a)) and  $\delta_3$  (panel (b)) with respect to  $\mathcal{R}_0^r$ .

Figure 5 presents the sensitivity simulation of parameters  $\beta_4$  and  $\delta_3$  with respect to  $\mathcal{R}_0^r$ . In panel (a), the values  $\delta_3 = 0.00015$ ,  $\delta_3 = 0.00115$ , and  $\delta_3 = 0.00215$  are selected, while  $\beta_4$  varies within the interval  $0.1 \leq \beta_4 \leq 1$ . This panel illustrates that an increase in parameter  $\beta_4$  results in an increase in  $\mathcal{R}_0^r$  for all values of  $\delta_3$ . For the sensitivity simulation of parameter  $\delta_3$  with respect to  $\mathcal{R}_0^r$  in panel (b), the values  $\beta_4 = 0.0152$ ,  $\beta_4 = 0.0252$ , and  $\beta_4 = 0.0352$  are selected, while  $\delta_3$  varies within the interval  $0.1 \leq \delta_3 \leq 1$ . This panel illustrates that an increase in parameter  $\delta_3$  leads to a decrease in  $\mathcal{R}_0^r$  for all values of  $\beta_4$ .

## 7. NUMERICAL SIMULATION

In this section, we present numerical simulations that examine the sensitivity of key parameters with respect to the infected individuals and the dynamics of all population compartments to support analytical findings.

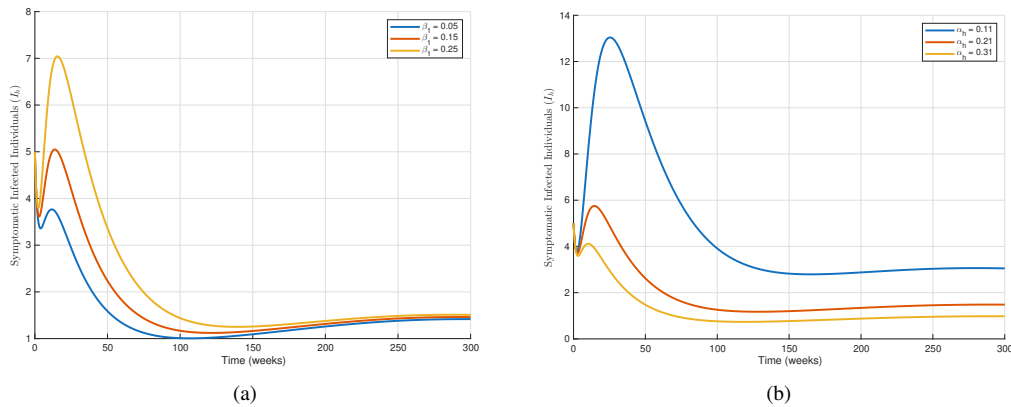


Figure 6: Sensitivity of  $\beta_1$  (panel (a)) and  $\alpha_h$  (panel (b)) with respect to  $I_h$ .

Figure 6 displays the sensitivity of parameters  $\beta_1$  and  $\alpha_h$  with respect to symptomatic infected individuals ( $I_h$ ). Panel (a) indicates that increasing  $\beta_1$ , the effective contact rate with asymptomatic individuals, yields

a higher transmission rate and a sharper infection peak. This means that a value of  $\beta_1 = 0.25$  reaches the highest peak of infection around week 15 compared to  $\beta_1 = 0.05$ , which has a lower and slower peak. This result highlights the fact that a decrease in effective contact through non-pharmaceutical interventions such as social distancing or protection measures can significantly reduce the level of infection. Panel (b) indicates that increasing vaccination rate  $\alpha_h$  significantly reduces the peak of symptomatic human infections. For example, while with  $\alpha_h = 0.11$  the number of infected individuals rises to its peak around week 25, at  $\alpha_h = 0.31$  the peak infection burden is much lower and declines more rapidly. These results suggest that vaccination coverage will successfully reduce the disease transmission and overall infection burden within the human population.

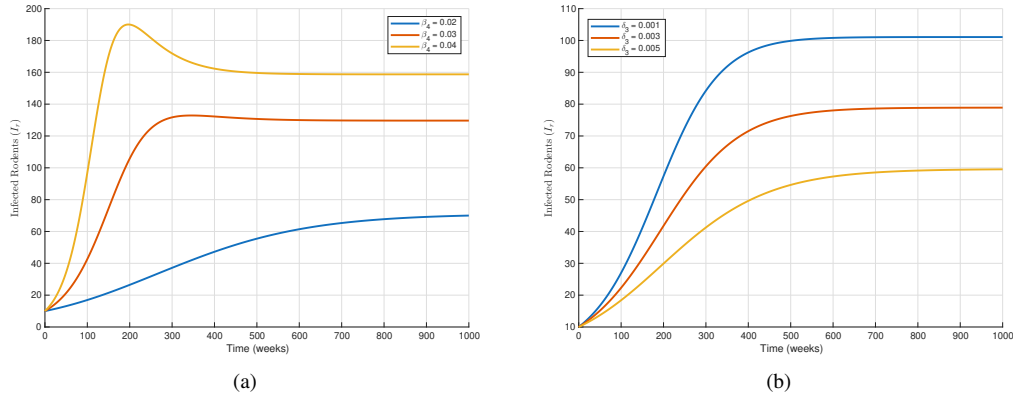


Figure 7: Sensitivity of  $\beta_4$  (panel (a)) and  $\delta_3$  (panel (b)) with respect to  $I_r$ .

Numerical simulations are carried out in Figure 7 to analyze parameters  $\beta_4$  and  $\delta_3$  for sensitivity with respect to the infected rodents ( $I_r$ ). An increase in  $\beta_4$  directly accelerates the growth of the infected rodent population as depicted in panel (a). In this respect, for  $\beta_4 = 0.04$ , the infected rodent population increases rapidly and is close to 160 individuals at the end of the 1000 weeks of simulation, while for  $\beta_4 = 0.02$ , the increase in infections is slower. This indicates that controlling the contact rate among rodents, for example, by managing the reservoir population, can be used to limit the spread of the disease. The result in panel (b) indicates that an increased value of  $\delta_3$  dramatically delays the infected rodent population's growth. At  $\delta_3 = 0.005$ , the infected rodent population reaches a steady state at a level much lower than at  $\delta_3 = 0.001$ , where the population surges above 100. This behavior suggests that public health strategies aimed at increasing the mortality of infected rodents will be highly effective at reducing disease transmission.

In Figure 8, we present the numerical simulation of the dynamics of human and rodent populations in the Mpx transmission model for 500 weeks. This figure contains four panels, each with different dynamics of the model, due to the varying compartments, as well as the significant differences in the initial conditions. Panel (a) shows the dynamics of susceptible individuals ( $S_h$ ) and vaccinated individuals ( $V_h$ ). We can see that  $S_h$  rapidly declines in the first weeks due to infection transmission and vaccination efforts. This sharp decrease reflects the redistribution of  $S_h$  into both asymptomatic infected and vaccinated compartments. On the other hand,  $V_h$  grows rapidly in the early phase, as reflected by an effective vaccination rate. However, after reaching its peak,  $V_h$  gradually decreases, which can be attributed to natural death and transitions into the recovered compartment. This pattern suggests that vaccination contributes significantly to short-term epidemic mitigation. Panel (b) shows the time series of asymptomatic infected individuals ( $A_h$ ) and symptomatic infected individuals ( $I_h$ ). We can see that  $A_h$  reaches its peak at approximately week 10, indicating that silent transmission plays a dominant role during the early phase of the outbreak. The subsequent decline in  $A_h$  is mainly driven by transition to  $I_h$  and natural death. On the other hand,  $I_h$  is relatively low as compared with  $A_h$ , but it follows a stable trend throughout the observation period. This behavior highlights the epidemiological significance of asymptomatic carriers, who may sustain transmission without being easily detected. Panel (c) depicts the steadily growing numbers of recovered individuals ( $R_h$ ). We can see that  $R_h$  grows quite suddenly and eventually becomes the majority of the total uninfected human population past

week 5 as humans move from  $V_h$  and  $I_h$  into this demographic. Panel (d) shows the dynamics of susceptible rodents ( $S_r$ ) and infected rodents ( $I_r$ ). We can see that  $S_r$  decreases smoothly over time, reflecting that part of this population becomes infected and thus moves into  $I_r$ . On the other hand,  $I_r$  increases at a relatively stable rate, which underlines the importance of rodents for the disease to persist as a reservoir. Unlike the human population, where vaccination significantly alter the dynamics, the rodent system lacks an immunization mechanism, allowing infection to persist more steadily.

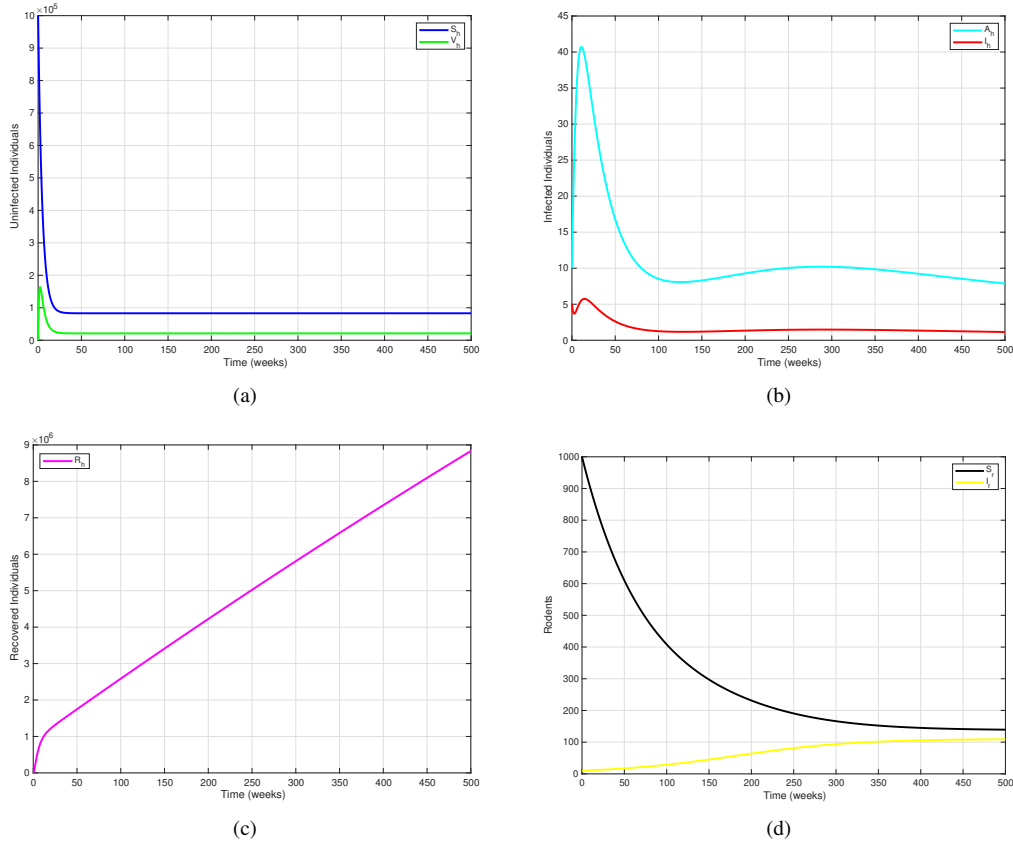


Figure 8: Dynamics of human and rodent populations.

## 8. CONCLUSION

The transmission model of Mpox developed here involves asymptomatic individuals ( $A_h$ ), alongside the following other compartments: susceptible individuals ( $S_h$ ), vaccinated individuals ( $V_h$ ), symptomatic infected individuals ( $I_h$ ), recovered individuals ( $R_h$ ), susceptible rodents ( $S_r$ ), and infected rodents ( $I_r$ ). By applying the contraction mapping principle, the model satisfies the well-posedness criteria, ensuring the existence, uniqueness, and stability of its solutions. Its solutions are also bounded and maintain non-negativity, confirming that the model is mathematically and epidemiologically consistent. Three equilibrium points are identified: the disease-free equilibrium (DFE), the human-endemic equilibrium (HEE) when the basic reproduction number of the human population ( $\mathcal{R}_0^h$ ) is greater than one, and the endemic equilibrium (EE) when the basic reproduction number of the rodent population ( $\mathcal{R}_0^r$ ) is greater than one. The DFE is both locally and globally asymptotically stable if the basic reproduction number ( $\mathcal{R}_0$ ) is less than one. If they exist, the HEE is globally asymptotically stable if  $\mathcal{R}_0^r$  is less than one and the EE is always globally asymptotically stable. Sensitivity analysis indicates that parameters  $\beta_1$  and  $\alpha_h$  are the most influential on

$\mathcal{R}_0^h$ , where  $\beta_1$  positively correlates, and  $\alpha_h$  negatively correlates with  $\mathcal{R}_0^h$ . These results show that reducing the contact rate with asymptomatic individuals and increasing vaccination rate play a major role in lowering outbreak intensity. On the other hand, among the model parameters,  $\beta_4$  and  $\delta_3$  have the highest influence on  $\mathcal{R}_0^r$ , where  $\beta_4$  positively correlates, and  $\delta_3$  is negatively correlated with  $\mathcal{R}_0^r$ . These results highlight that controlling rodent-to-rodent contact rate and increasing rodent death rate due to Mpox significantly reduce the long-term persistence of the disease in the rodent population.

According to the results obtained by simulation, human and rodent parameters contribute much towards shaping the transmission dynamics. A higher value of  $\beta_1$  increases human-to-human transmission, giving rise to a spikier peak of infection, whereas decreasing  $\beta_1$ , through non-pharmaceutical interventions such as social distancing and protective measures, significantly lowers the levels of infection. Vaccination also plays an imperative role. Increasing  $\alpha_h$  suppresses the symptomatic infection peak and quickens its decline, showing that rapid vaccination coverage is critical for mitigating disease burdens. In addition, the infection transmission depends on rodent-related parameters such that a higher  $\beta_4$  hastens the infections of rodents, while an increase in  $\delta_3$  effectively decreases the infected population of rodents, indicating the need for management of reservoirs and vector control. From compartmental dynamics, it follows that  $S_h$  declines because of both infection and vaccination, whereas  $V_h$  first increases and then decreases, dominated by  $R_h$  after approximately 5 weeks. In contrast,  $A_h$  reaches its peak in approximately week 10 and then slowly decreases, with  $I_h$  remaining low, yet rather stable, during the whole observation time. In contrast,  $I_r$  is growing steadily, while  $S_r$  steadily decreases over time, reflecting the ongoing infection. These results confirm that integrated strategies of vaccination, reduction of human contact, and management of the rodent population are required in order to control disease transmission and lower the overall infection burden. The proposed numerical simulation preserves the boundedness and non-negativity of solutions without requiring excessively small time steps, thereby ensuring biological feasibility throughout the simulation. Furthermore, it exhibits strong stability and effectively captures long-term dynamics, making it a reliable and efficient computational tool for simulating Mpox transmission systems.

However, this study has a number of limitations. The model is based on homogeneous mixing among individuals, as well as constant parameter values without environmental or behavioral variability that could better describe the complexity of real-world transmission. Rodent population dynamics and interspecies interactions are also simplified in such a way that potentially limits the ecological realism of the model. Future works may stress the incorporation of spatial heterogeneity and mobility patterns for representing Mpox spread across various regions. Also, the integration of stochastic effects, time-varying parameters, or even more detailed vaccination or age-structured strategies can add to the value of such a model for public health policy and planning of outbreak control.

#### ACKNOWLEDGMENT

The authors gratefully acknowledge the reviewers' constructive feedback and the editorial team's valuable support. The authors also acknowledge support by E+CBHE program through GREENSEA project Grant (No. 101232814).

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