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## Blood Flow through a Composite Stenosis in an Artery with Permeable Wall

Shailesh Mishra<sup>1</sup>, S.U. Siddiqui<sup>2</sup> and Amit Medhavi<sup>3</sup>

<sup>1</sup>Department of Mathematics  
Krishna Girls Engineering College  
Kanpur-209217, India  
[shailesh27sep@rediffmail.com](mailto:shailesh27sep@rediffmail.com)

<sup>2</sup>Department of Mathematics  
H.B.T.I.  
Kanpur-208002, India  
[susiddmath@yahoo.com](mailto:susiddmath@yahoo.com)

<sup>3</sup>Department of Mechanical Engineering  
Kamla Nehru Institute of Technology  
Sultanpur-228118, India  
[amitmedhavi@yahoo.co.in](mailto:amitmedhavi@yahoo.co.in)

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### Abstract

The present work concerns the fluid mechanical study on the effects of the permeability of the wall through an artery with a composite stenosis. The expressions for the blood flow characteristics, the flow resistance, the wall shear stress, shearing stress at the stenosis throat have been derived. Results for the effect of permeability on these flow characteristics are shown graphically and discussed briefly.

**Keywords:** Composite stenosis, slip parameter, Darcy number, impedance, shear stress

**MSC (2010) No.:** 76Z05

## 1. Introduction

The frequently occurring cardiovascular disease, stenosis or arteriosclerosis is the abnormal and unnatural growth in the arterial wall thickness that develops at various locations of the cardiovascular system under diseased conditions and occasionally results into serious consequences (cerebral strokes, myocardial infarction, angina pectoris, cardiac arrests, etc.). It is believed that deposits of cholesterol, fatty substances, cellular waste products, calcium, and fibrin may be responsible for the development of the disease. Regardless of the cause, it is known that once an obstruction has developed, it results into significant changes in pressure distribution, wall shear stress and impedance (flow resistance).

In the constricted region, the flow accelerates and consequently the velocity gradient near the wall region is steeper due to the increased core velocity resulting relatively large shear stress on the wall even for a mild stenosis. The knowledge that hemodynamic factors play an important role in the genesis of the disease, since the first investigation of Mann et al. (1938), a large number of researchers including [Young (1968), (1979); Young and Tsai (1973); Caro et al. (1978); Shukla et al. (1980); Ahmed and Giddens (1983); Sarkar and Jayaraman (1998); Pralhad and Schultz (2004); Jung et al. (2004); Liu et al. (2004); Srivastava and coworkers (1996, 2009, 2010a,b,c); Mishra et al. (2006); Misra and Verma (2007); Ponalagusamy (2007); Layek et al. (2005), (2009); Joshi et al. (2009); Mekheimer and El-Kot (2008); Tzirtzilakis (2008); Mandal and coworkers (2005), (2007a,b); Politis et al. (2007, 2008); and Singh et al. (2010)] and many others, have addressed the problem in various contexts.

It is well established fact that endothelial walls are permeable with ultra microscopic pores through which filtration occurs. Cholesterol is believed to increase the permeability of the arterial wall. Such increase in permeability results from dilated, damaged or inflamed arterial walls. It is worthwhile to study the effects of permeability of the wall of an arteriosclerotic blood vessel. Due to the permeability of the arterial wall, the no slip condition at the wall is no longer valid and one has to consider a slip condition at the artery wall. A survey of the literature indicates that the majority of the investigations, reported so far, have considered axisymmetric and non-symmetric single stenoses. However, in realistic situations stenosis may develop in series (multiple stenosis), overlapping or of composite in nature [Srivastava et al. (2010b)]. In view of the discussion given above the present research is devoted to study the flow of blood through a stenotic artery with permeable wall.

The flow in the permeable boundary is described by Darcy law which states that the rate at which a fluid flows through a permeable substance per unit area is equal to the permeability (a property of the substance through which the fluid is flowing) times the pressure drop per unit length of flow, divided by the viscosity of the fluid. Blood is assumed to be represented by a Newtonian fluid and to generalize the problem further the shape of the stenosis is considered to be composite in nature. The wall in the vicinity of the stenosis is usually solid when stenosis develops in living vasculature. Further, to neglect the entrance, end and special wall effects the artery length is considered large enough as compared to its radius.

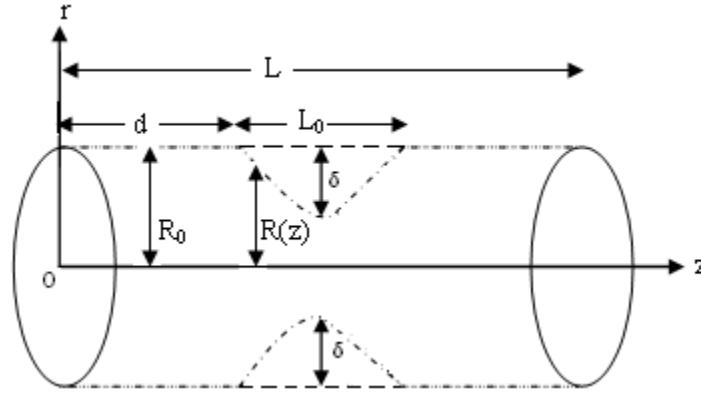
## 2. Formulation of the Problem

Consider the axisymmetric flow of blood through a composite stenosis in a circular tube with permeable wall specified at the position as shown in Fig.1. The geometry of the stenosis, assumed to be manifested in the arterial segment, is described [Joshi et al. (2009); Srivastava et al. (2010b)] as

$$R(z)/R_0 = 1 - \frac{2\delta}{R_0 L_0} (z - d); \quad d \leq z \leq d + L_0/2, \quad (1)$$

$$= 1 - \frac{\delta}{2R_0} \left\{ 1 + \cos \frac{2\pi}{L_0} (z - d - L_0/2) \right\}; \quad d + L_0/2 \leq z \leq d + L_0, \quad (2)$$

$$= 1, \quad \text{otherwise,} \quad (3)$$



**Figure1.** Flow geometry of a composite stenosis in an artery with permeable wall

where  $R \approx R(z)$  is the artery radius in the obstructed region,  $R_0$  is the radius of the normal artery,  $L_0$  is the stenosis length and  $d$  indicates its location,  $\delta$  is the maximum projection (height of the throat) of the stenosis located at  $z = d + L_0/2$ ,  $z$  being the axial coordinate.

Assuming that the flowing blood is represented by a Newtonian fluid and considering the axisymmetric, laminar, steady one-dimensional fully developed flow of blood in an artery, the equations governing the flow in the case of a mild stenosis ( $\delta \ll R_0$ ) may therefore be written [Young (1968), Srivastava and Rastogi (2009)] as

$$\frac{dp}{dz} = \frac{1}{r} \frac{\partial}{\partial r} \left( r \mu \frac{\partial u}{\partial r} \right), \quad (4)$$

$$\frac{dp}{dr} = 0, \quad (5)$$

where  $u$  is the axial velocity,  $\mu$  is the fluid viscosity,  $r$  is the radial coordinate and  $p$  is the pressure.

The boundary conditions [Beavers and Joseph (1967)] are

$$\frac{\partial u}{\partial r} = 0 \text{ at } r = 0, \quad (6)$$

$$u = u_B \quad \text{and} \quad \frac{\partial u}{\partial r} = \frac{\alpha}{\sqrt{D_a}}(u_B - u_{porous}) \quad \text{at } r = R(z), \quad (7)$$

where  $u_{porous} = -\frac{D_a}{\mu} \frac{dp}{dz}$ ,  $u_{porous}$  is the velocity in the permeable boundary,  $u_B$  is the slip velocity,

$D_a$  is the Darcy number and  $\alpha$  (called the slip parameter) is a dimensionless quantity depending on the material parameters which characterize the structure of the permeable material within the boundary region.

### 3. Analysis

The expression for the velocity, obtained as the solution of equations (4) and (5) subject to the boundary conditions (6) and (7), is given as

$$u = -\frac{1}{4\mu} \frac{dp}{dz} (R^2 - r^2) + u_B, \quad (8)$$

where the slip velocity,  $u_B$  is determined as

$$u_B = \frac{\sqrt{D_a}}{2\mu \alpha} \frac{dp}{dz} \left\{ R_0 \left( \frac{R}{R_0} \right) - 2\alpha \sqrt{D_a} \right\}. \quad (9)$$

An application of equation (9) in to (8), yields

$$u = -\frac{1}{4\mu} \frac{dp}{dz} (R^2 - r^2) + \frac{\sqrt{D_a}}{2\mu \alpha} \frac{dp}{dz} \left\{ R_0 \left( \frac{R}{R_0} \right) - 2\alpha \sqrt{D_a} \right\}. \quad (10)$$

The volumetric flow flux,  $Q$  is thus calculated as

$$\begin{aligned} Q &= 2\pi \int_0^{R(z)} r u \, dr \\ &= -\frac{\pi R_0^4}{8\mu} \frac{dp}{dz} (R/R_0)^4 \left\{ 1 - \frac{4\sqrt{D_a}}{\alpha R_0^2 (R/R_0)^2} \left\{ R_0 (R/R_0) - 2\alpha \sqrt{D_a} \right\} \right\}. \end{aligned} \quad (11)$$

From equation (11), one now obtains

$$-\frac{dp}{dz} = \frac{8\mu Q}{\pi R_0^4} \phi(z), \quad (12)$$

with

$$\phi(z) = 1/F(z), \quad F(z) = (R/R_0)^4 \left\{ 1 - \frac{4\sqrt{D_a}}{\alpha R_0^2 (R/R_0)^2} \left\{ R_0(R/R_0) - 2\alpha\sqrt{D_a} \right\} \right\}.$$

The pressure drop,  $\Delta p$  ( $= p$  at  $z = 0$ ,  $-p$  at  $z = L$ ) across the stenosis in the tube of length,  $L$  is derived as

$$\begin{aligned} \Delta p &= \int_0^L \left( -\frac{dp}{dz} \right) dz \\ &= \frac{8\mu Q}{\pi R_0^4} \psi, \end{aligned} \quad (13)$$

where

$$\psi = \int_0^d [\phi(z)]_{R/R_0=1} dz + \int_d^{d+L_0/2} [\phi(z)]_{R/R_0 \text{ from } (1)} dz + \int_{d+L_0/2}^{d+L_0} [\phi(z)]_{R/R_0 \text{ from } (2)} dz + \int_{d+L_0}^L [\phi(z)]_{R/R_0=1} dz.$$

The first and the fourth integrals in the expression for  $\psi$  obtained above are straight forward whereas the analytical evaluation of second and third integrals are almost a formidable task and therefore shall be evaluated numerically.

The flow resistance (resistive impedance),  $\bar{\lambda}$ , the wall shear stress,  $\bar{\tau}_w$  and the shearing stress at the stenosis throat (located at  $z = d + L_0/2$ ),  $\bar{\tau}_s$  are now calculated as

$$\bar{\lambda} = \frac{\Delta p}{Q} = \frac{8\mu}{\pi R_0^4} \psi, \quad (14)$$

$$\bar{\tau}_w = -\frac{R}{2} \frac{dp}{dz} = \frac{4\mu Q}{\pi R_0^3} (R/R_0) \phi(z), \quad (15)$$

$$\bar{\tau}_s = \frac{4\mu Q}{\pi R_0^3} [(R/R_0) \phi(z)]_{R/R_0=1-\delta/R_0}. \quad (16)$$

Following now the reports of Srivastava and Rastogi (2009, 2010a), one derives the expressions for the impedance (flow resistance),  $\lambda$ , the wall shear stress distribution in the stenotic region,  $\tau_w$  and shearing stress at the stenosis throat,  $\tau_s$  in their non-dimensional form as

$$\lambda = 1 - L_o/L + \frac{\eta}{L} \int_d^{d+L_o/2} \frac{dz}{a^4 \left[ 1 - \frac{4\sqrt{D_a}}{\alpha R_0^2 a^2} \{R_0 a - 2\alpha\sqrt{D_a}\} \right]} + \frac{\eta L_o}{2\pi L} \int_0^\pi \frac{d\beta}{\theta^4 \left[ 1 - \frac{4\sqrt{D_a}}{\alpha R_0^2 \theta^2} \{R_0 \theta - 2\alpha\sqrt{D_a}\} \right]}, \quad (17)$$

$$\tau_w = \frac{\eta}{\left\{ (R/R_0)^3 - \frac{4\sqrt{D_a}}{\alpha R_0^2} \{R_0(R/R_0)^2 - 2\alpha\sqrt{D_a} (R/R_0)\} \right\}}, \quad (18)$$

$$\tau_s = \frac{\eta}{\left\{ (1 - \delta/R_0)^3 - \frac{4\sqrt{D_a}}{\alpha R_0^2} \{R_0(1 - \delta/R_0)^2 - 2\alpha\sqrt{D_a} (1 - \delta/R_0)\} \right\}}, \quad (19)$$

where

$$a \approx a(z) = 1 - 2\delta(z - d)/R_0 L_0; \quad b = 1 - \delta/2R_0; \quad c = -\delta/2R_0$$

$$\theta \approx \theta(\beta) = b + c \cos \beta; \quad \beta = \pi - (2\pi/L_0)(z - d - L_0/2), \quad \eta = 1 - \frac{4\sqrt{D_a}}{\alpha R_0^2} \{R_0 - 2\alpha\sqrt{D_a}\}$$

$\lambda = \bar{\lambda}/\lambda_0$ ,  $(\tau_w, \tau_s) = (\bar{\tau}_w, \bar{\tau}_s)/\tau_0$ ,  $\lambda_0 = 8\mu L / \pi \eta R_0^4$ ,  $\tau_0 = 4\mu Q / \pi \eta R_0^3$  are the flow resistance and shear stress, respectively for a Newtonian fluid in a normal artery (no stenosis).

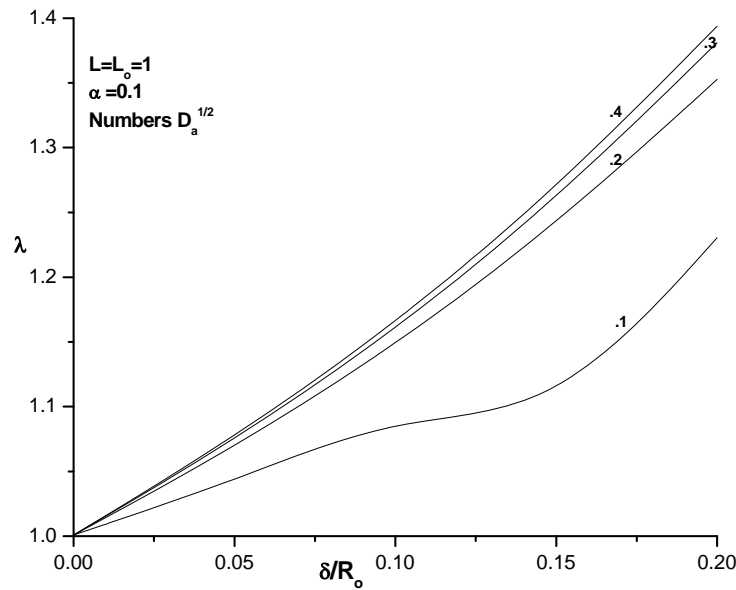
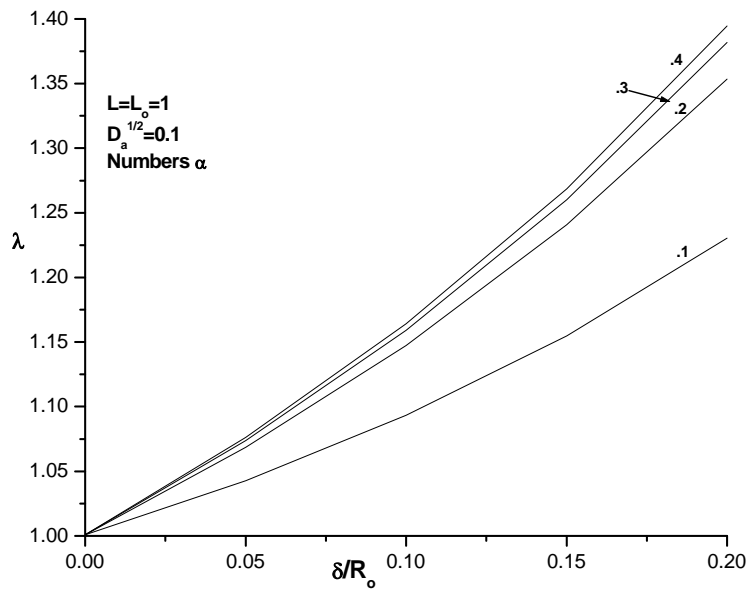


Fig.2 Impedance,  $\lambda$  versus stenosis height,  $\delta/R_0$  for different Darcy number,  $D_a^{1/2}$ .

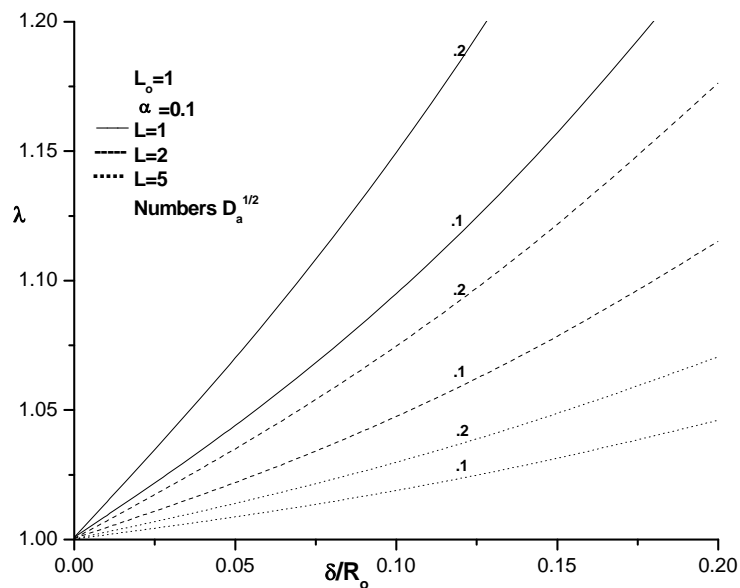
#### 4. Numerical Results and Discussion

In order to have an estimate of the quantitative effects of the various parameters involved in the analysis, computer codes are developed to evaluate the analytical results obtained for dimensionless resistance to flow,  $\lambda$ , the wall shear stress,  $\tau_w$  in the stenotic region and the shearing stress at stenosis throat,  $\tau_s$  [equations (17-19)] in a tube of radius 0.01cm for parameter values:  $d = 0$ ;  $L_0$  (cm) = 1;  $L$  (cm) = 1, 2, 5  $\alpha = 0.1, 0.2, 0.3, 0.4$ ;  $\sqrt{D_a} = 0.1, 0.2, 0.3, 0.4$ ;  $\delta/R_0 = 0, 0.05, 0.10, 0.15, 0.20$ .

The impedance (flow resistance),  $\lambda$  increases with increasing values of the Darcy number,  $\sqrt{D_a}$  (square root of the Darcy number and hereafter referred as the Darcy number) for a given value of slip parameter,  $\alpha$  and any stenosis height,  $\delta/R_0$  (Figure 2). One notices that the blood flow characteristic,  $\lambda$  increases with the slip parameter,  $\alpha$  for a given value of Darcy number,  $\sqrt{D_a}$  (Figure 3). For a given Darcy number,  $\sqrt{D_a}$ , the impedance,  $\lambda$  decreases with increasing tube length,  $L$  for any given value of the slip parameter,  $\alpha$  which interns implies that  $\lambda$  increases with stenosis length  $L_0$  (Figure 4). The blood flow characteristic,  $\lambda$  also increases with stenosis size,  $L_0$  for a given Darcy number,  $\sqrt{D_a}$  and for any value of the slip parameter,  $\alpha$  (Figure 5). For any given stenosis height,  $\delta/R_0$  the flow resistance,  $\lambda$  decreases with increasing



**Fig.3 Impedance,  $\lambda$  versus stenosis height,  $\delta/R_0$  for different slip parameter,  $\alpha$ .**



**Fig.4 Impedance,  $\lambda$  versus stenosis height,  $\delta/R_0$  for different tube length, L and Darcy number,  $D_a^{1/2}$ .**

Darcy number,  $\sqrt{D_a}$  for a given slip parameter  $\alpha$  and assumes an asymptotic magnitude at  $\sqrt{D_a} = 0.15$  for a given value of the slip parameter,  $\alpha$  (Figure 6). However, for a given Darcy number,  $\sqrt{D_a}$ ,  $\lambda$  increases with the slip parameter and assumes an asymptotic magnitude at about  $\alpha = 0.25$  for any given stenosis height,  $\delta/R_0$  (Figure 7).



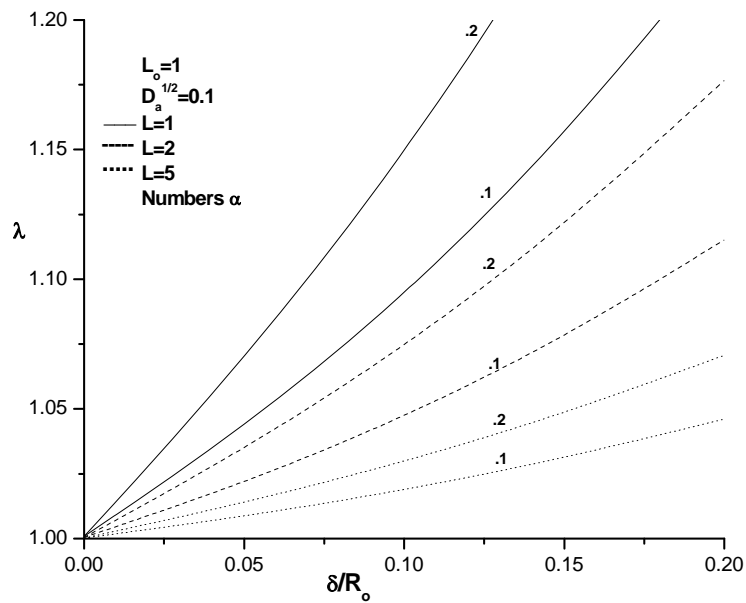


Fig.5 Impedance,  $\lambda$  versus stenosis height,  $\delta/R_0$  for different tube length,  $L$  and slip parameter,  $\alpha$ .

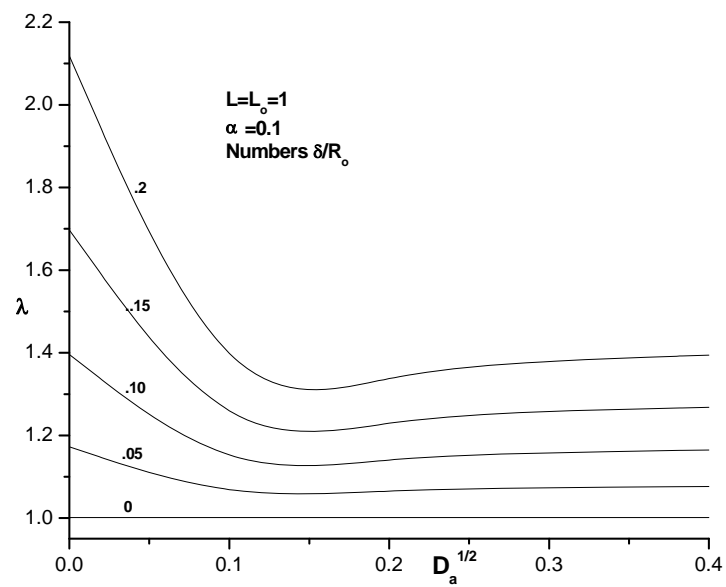
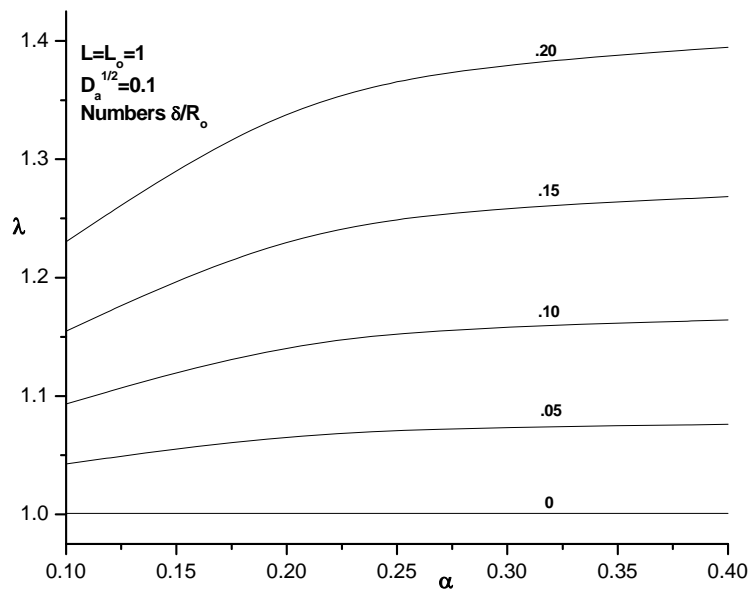


Fig.6 Impedance,  $\lambda$  versus Darcy number,  $D_a^{1/2}$  for different stenosis height,  $\delta/R_0$ .



**Fig.7 Impedance,  $\lambda$  versus slip parameter,  $\alpha$  for different stenosis height,  $\delta/R_0$ .**

Finally, to have an exact estimate of the effects of the Darcy number and the slip parameter on the flow characteristics due to the presence of a stenosis. Some of the results are summarized in Tables 1 and 2. We observe that the impedance increases with the Darcy number  $\sqrt{D_a}$  and the slip parameter,  $\alpha$ . However, for increasing values of any of these parameters ( $\sqrt{D_a}$  or  $\alpha$ ), the impedance attains significantly higher magnitude in stenosed artery than a normal artery. In particular, for  $\alpha = 0.1$  and  $\delta/R_0 = 0.1$  (i.e., 19% stenosis by area reduction). The percentage increase in the magnitude of  $\lambda$  is 9.22% and 13.90% respectively for  $\sqrt{D_a} = 0.1$  and 0.2. The percentage increase in  $\lambda$  for  $\alpha = 0.1$  and  $\delta/R_0 = 0.15$  (28% stenosis) is 15.38% and 23.94% ,

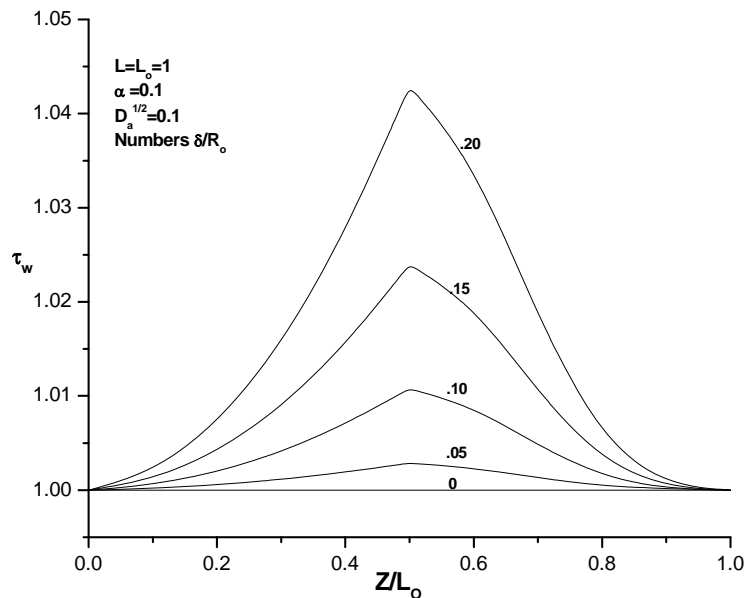
**Table 1.** Variations of  $\lambda$  and  $\tau_s$  for  $\alpha = 0.1$  and different  $\sqrt{D_a}$  and  $\delta/R_0$ .

$\delta/R_0$	$\sqrt{D_a}$			
	0.1		0.2	
	$\lambda$	$\tau_s$	$\lambda$	$\tau_s$
0.00	1.0009	1.0000	1.0009	1.0000
0.05	1.0426	1.0029	1.0684	1.0354
0.10	1.0932	1.0108	1.1472	1.0754
0.15	1.1548	1.0240	1.2405	1.1206
0.20	1.2348	1.0429	1.3529	1.1721

Respectively, for  $\sqrt{D_a} = 0.1$  and 0.2. Likewise, for  $\sqrt{D_a} = 0.1$  and  $\delta/R_0 = 0.1$ , the percentage increase in  $\lambda$  is 14.62% and 16.30%, respectively, for  $\alpha = 0.1$  and 0.2. The percentage increase in  $\lambda$  for  $\sqrt{D_a} = 0.1$  and  $\delta/R_0 = 0.15$  is 23.97% and 26.71%, respectively, for  $\alpha = 0.1$  and 0.2.

**Table 2.** Variations of  $\lambda$  and  $\tau_s$  for  $\sqrt{D_a} = 0.1$  and different  $\alpha$  and  $\delta/R_0$

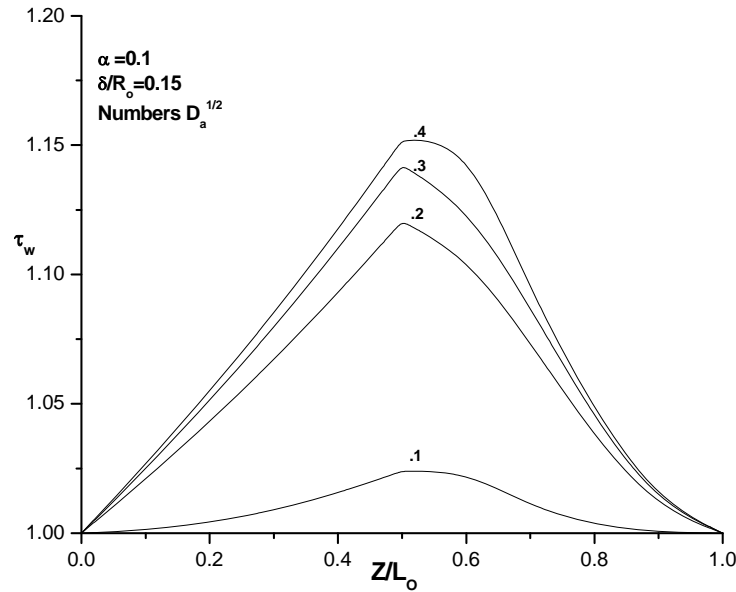
$\delta/R_0$	$\alpha$			
	0.1		0.2	
	$\lambda$	$\tau_s$	$\lambda$	$\tau_s$
0.00	1.0009	1.0000	1.0009	1.0000
0.05	1.0685	1.0356	1.0761	1.0452
0.10	1.1474	1.0757	1.1640	1.0955
0.15	1.2408	1.1210	1.2682	1.1519
0.20	1.3534	1.1727	1.3940	1.2154



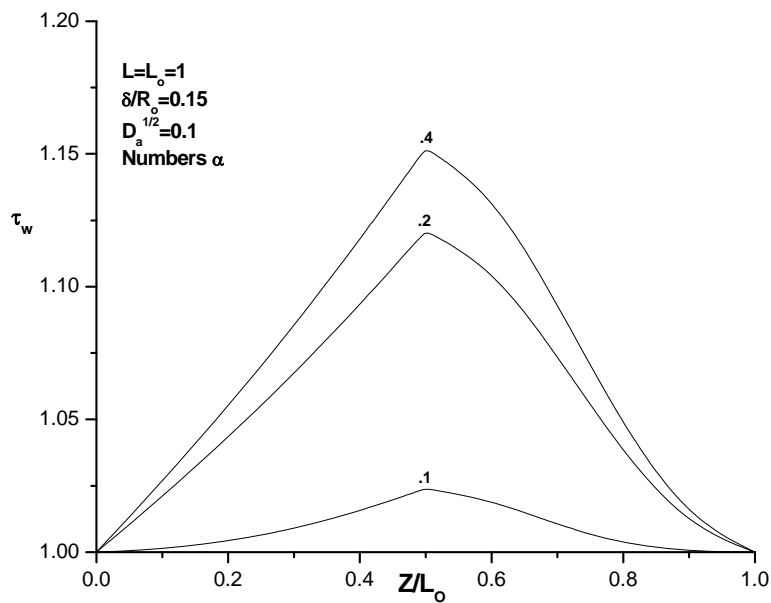
**Fig.8** Wall shear stress,  $\tau_w$  distribution in the stenotic region for different stenosis height,  $\delta/R_0$ .

The non-dimensional wall shear stress,  $\tau_w$  increases with stenosis height,  $\delta/R_0$  at any axial distance  $z/L_0$  for a given value of slip parameter,  $\alpha$  and the Darcy number,  $\sqrt{D_a}$ .  $\tau_w$  increases from its approached magnitude at  $z/L_0 = 0$  to its peak value at the stenosis throat at  $z/L_0 = 0.5$  and then decreases from its value at the throat to its approached magnitude at end point of the constriction profile (Figure 8). The blood flow characteristic  $\tau_w$  also increases with the Darcy

number,  $\sqrt{D_a}$  at any axial distance  $z/L_0$  (Figure 9). One observes that in the stenotic region,  $0 \leq z/L_0 \leq 1$ ,  $\tau_w$  increases with the slip parameter,  $\alpha$  for any given stenosis height  $\delta/R_0$  and the Darcy number,  $\sqrt{D_a}$  (Fig. 10).



**Fig.9 Wall shear stress,  $\tau_w$  distribution in the stenotic region for different Darcy numbe,  $D_a^{1/2}$  .**



**Fig.10 Wall shear stress,  $\tau_w$  distribution in the stenotic region for different slip parameter,  $\alpha$  .**

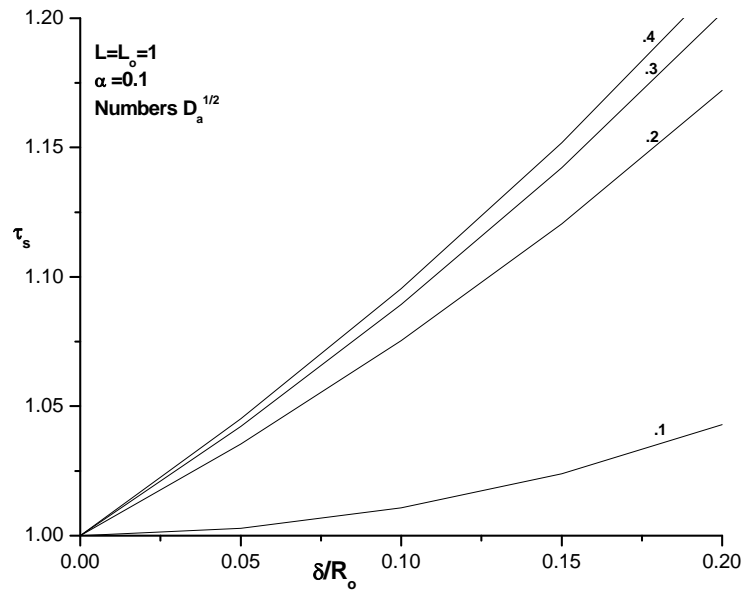


Fig.11 Shear stress at stenosis throat,  $\tau_s$  versus stenosis height,  $\delta/R_0$  for different Darcy number,  $D_a^{1/2}$ .

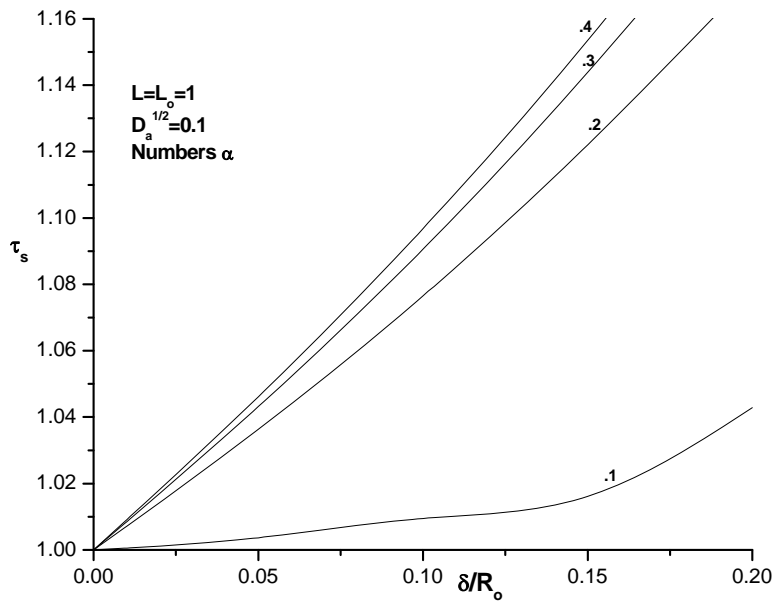


Fig.12 Shear stress at stenosis throat,  $\tau_s$  versus stenosis height,  $\delta/R_0$  for different slip parameter,  $\alpha$ .

It is interesting to note that the nature of the variations of  $\tau_w$  remains similar with respect to any of the parameters,  $\delta/R_0$ ,  $\alpha$  and  $\sqrt{D_a}$  (Figures 8-10).

The shear stress at stenosis throat  $\tau_s$  increases with the Darcy number,  $\sqrt{D_a}$  for any given value of the slip parameter  $\alpha$  and the stenosis height  $\delta/R_0$  (Figure 11). The flow characteristic  $\tau_s$  is observed to be increasing with the slip parameter,  $\alpha$  for any given Darcy number,  $\sqrt{D_a}$  and stenosis height  $\delta/R_0$  (Figure 12). The nature of the variations of shear stress at stenosis throat  $\tau_s$  is found to be similar to that of the impedance,  $\lambda$  with respect to any parameter (Figures 2, 3, 11, and 12).

## 5. Conclusions

To observe the effects of wall permeability on blood flow characteristics in a stenosed artery, the flow of a Newtonian fluid through a composite stenosis in a circular tube with permeable wall has been discussed. The impedance increases with the Darcy number as well as with the slip parameter. The flow resistance also increases with the stenosis size (height and length both) for any given set of parameters. On the basis of the results summarized in Tables 1 and 2, it is concluded that the impedance assumes significantly higher magnitude in a permeable stenosed artery than its corresponding value in a normal artery (no stenosis). The shear stress at the stenosis throat possesses characteristics similar to the impedance with respect to any parameter.

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