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## A mathematical modeling of pulsatile blood flow through a stenosed artery under effect of a magnetic field

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Abstract. A mathematical model for two-dimensional pulsatile blood flow through a constriction vessels under magnetic field and body acceleration is numerically simulated. The artery considered as an elastic cylindrical tube and the geometry of the constriction assumed to time-dependent with an aim to provide resemblance to the in-vivo situations. The blood flow considered nonlinear, incompressible and fully developed. The nonlinear momentum and the continuity equations under suitable initial and boundary conditions can be numerically solved using the Crank-Nicolson scheme. The blood flow specifications such as the velocity profile, the volumetric flow rate and the resistance to flow are obtained and effects of the magnetic field and the severity of the stenosis under these flow specifications are discussed. Besides the blood flow characteristics through elastic artery have been compared with the rigid ones.

*Keywords*: Blood flow, Magnetic field, Body acceleration, Crank-Nicolson scheme *AMS Subject Classification*: 92B05, 92A08.

## 1 Introduction

The main reason of death in many countries is Cardiovascular illness [20]. Muliple plaques formation and accumulation of fatty materials such as

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cholesterol and triglyceride in the blood vessel lumen can cause cardiovascular diseases. Plaques deposits lead the internal surface of the blood arteries to become irregular and the lumen to become narrow, and may cause a severe reduction in blood flow. If the blood clot develops in coronary arteries, the risk of myocardial infarct would be increased and leads to stroke in the vessels supplying blood to brain.

Blood is a suspension of erythrocytes, white blood cellules, leukocytes, and platelets in a fluid called plasma [16, 25, 33]. Erythrocytes in terms of the number in ratio of other blood suspended cells are in the majority, and their properties are dominant for other cells [24]. Ponalagusmy and Selvi have developed a mathematical model for blood flow through arterial stenosis with the two-fluid model, consisting of a core region of Casson fluid and a circumferential layer of the Newtonian fluid. They concluded that the downstream of the stenotic regions is more important for the diagnosis of vessel illnesses [23]. Haghighi et al. have studied the two-dimensional, pulsatile and two-layered flow of blood through a tapered exible artery [5] and also, in their another research, they solved the governing equations by using the finite difference method and examined the effect of different factors such as the artery tapering, the presence of stenosis and the wall motion on blood flow specifications [9].

The flow of blood under the influence of body acceleration is significantly affected, while driving a vehicle or flying in an aircraft, because the blood flow in vibration environment, and due to which there may occur serious health problems such as loss of vision, headache, increase of pulse rate and hemorrhage in face, neck and brain. Sankar and Lee have studied the pulsatile flow of blood among an arterial stenosis with considering blood as a core region of Casson fluid and a peripheral layer of Newtonian fluid under the body acceleration [27]. Also Shit and Roy examined the pulsatile flow of blood among a stenosed vessel under the periodic body acceleration and then analyzed the heat transfer phenomena by constant blood viscosity [29].

Marques et al. have investigated the pulsatile blood flow in a human vessel that the artery is supposed as being a straight wall tube, and the blood flow is considered to be incompressible and axisymmetric. As well as, the result of pulsatile flow is considered into account with imposing the velocity of the cardiac cycle [14]. Chakravarty and Mandal take blood flow as non-linear and incompressible through stenosed artery and investigated the blood flow characteristics. They noted that assumption of rigid vessels is not acceptable, so the vessels are assumed to be elastic and the geometry of the stenosis considered as time-dependent [3].

The magnetic field has an enormous application as controlling blood flow during surgery. In this field, Misra et al. have studied different kids of flow behavior of blood in arteries by treating non Newtonian and Newtonian fluid under the magnetic field [17–19]. Mekheimer et al. have investigated a mathematical model for flow of blood among an elastic vessel having many stenosis in the presence of magnetic field and also they noted that the mechanical attributes of the vascular wall together with the flow of blood specifications [15]. Shit has developed a computational model for flow of blood under the magnetic field that in this model he reported that no clinical disorders are seen for human health when exposed to a magnetic field of strength up to 9T. [30]. Allshare et al. have examined the steady flow of blood simulations in an axisymmetric vessel stenosis with treating non Newtonian fluid model under the magnetic field. They analyzed the shear thinning behavior of blood [1].

In this paper, the reason to pulsatile pressure gradient arising from systematic functioning of the heart, the blood flow has been assumed unsteady. Haghighi and Asl, solved the pulsatile and two-dimensional blood flow among a tapered artery with overlapping stenosis by using a finite difference method and showed that affects the blood of flow characteristics [6]. The aim of this investigation is assumed the blood flow under the magnetic field and body acceleration. The governing equations which are nondimensional and their boundary and initial conditions are prescribed then solved using finite difference Crank-Nicolson method. The aim of this research is analyze the effect of several factors such as the magnetic field, the presence of stenosis and heat transfer and body acceleration on flow of blood characteristics.

## 2 Mathematical formulation and analysis

#### 2.1 The geometry of the stenosis

Let us consider a two-dimensional, laminar, unsteady, fully developed and axially symmetric blood flow through a stenosed artery. Let  $(r, \theta, z)$  be the coordinates of a material point in the cylindrical polar coordinates system in which z is taken along the axial direction respectively and  $r, \theta$  are taken along the radial and circumferential directions. The geometry of the time variant stenosis is constructed mathematically as: (see Figure 1) [7,26,32].

$$R(z,t) = \begin{cases} 1 - A[l_0^{n-1}(z-d) - (z-d)^n]a_1(t), & d \le z \le d+l_0, \\ a_1(t), & otherwise, \end{cases}$$
(1)

where  $A = \frac{\delta}{R_0 L_0^n} \frac{n^{n(n-1)}}{(n-1)}$ , R(z,t) is the radius of the arterial segment in the constricted region,  $R_0$  is the radius of the nonstenotic artery, L is the finite length of the arterial segment,  $l_0$  is the length of the stenosis, d is the upstream length of the artery and  $\tau_m$  is the critical height of the stenosis.  $n \geq 2$  is the parameter representing the asymmetry of the stenosis, where n = 2 represents that the stenosis is symmetric. The time variant parameter  $a_1(t)$  is given by  $a_1(t) = 1 + k_r \cos(wt + \varphi)$ , in which  $k_r$  represents the amplitude parameter and  $\varphi$  is the phase angle.

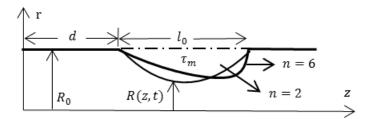


Figure 1: Geometry of the stenosed artery.

#### 2.2 Governing equations

The Navier-Stokes equations for the blood flow in the cylindrical coordinates system  $(r, \theta, z)$  may be written in non-dimensional forms as follows [4, 6, 11, 12, 17, 31]:

Equation of continuity:

$$\frac{\partial u}{\partial z} + \frac{\partial v}{\partial r} + \frac{v}{r} = 0.$$
<sup>(2)</sup>

Equation of axial momentum:

$$\frac{\partial u}{\partial t} + v\frac{\partial u}{\partial r} + u\frac{\partial u}{\partial z} = -\frac{\partial p}{\partial z} + \frac{1}{\alpha^2}\left(\frac{\partial^2 u}{\partial r^2} + \frac{1}{r}\frac{\partial u}{\partial r} + \frac{\partial^2 u}{\partial z^2}\right) - \frac{1}{\alpha^2}(h)^2u + \frac{1}{\alpha^2}G(t).$$
 (3)

Equation of radial momentum:

$$\frac{\partial v}{\partial t} + v\frac{\partial v}{\partial r} + u\frac{\partial v}{\partial z} = -\frac{\partial p}{\partial r} + \frac{1}{\alpha^2}\left(\frac{\partial^2 v}{\partial r^2} + \frac{1}{r}\frac{\partial v}{\partial r} + \frac{\partial^2 v}{\partial z^2} - \frac{v}{r^2}\right).$$
(4)

The nondimensional variables that are used in Eqs. (2)-(4) are as:

$$u = \frac{u^*}{U}, \quad v = \frac{v^*}{U}, \quad r = \frac{r^*}{R_0}, \quad l_0 = \frac{l_0^*}{R_0}, \quad z = \frac{z^*}{R_0}, \quad t = \frac{t^*U}{R_0},$$

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$$d = \frac{d^*}{R_0}, \ \ p = \frac{p^*}{\rho U^2}, \ \ Re = \frac{\rho U R_0}{\mu}$$

which u and v are the axial and the radial dimensionless velocity components, respectively, p is the pressure,  $\rho$  is the density and  $\mu$  is the viscosity.

In the above equations, the other dimensionless variables are taken as follows [31]:

$$\alpha^2 = \frac{UR_0}{\nu}, \quad h = B_0 R_0 \sqrt{\frac{\sigma}{\rho\nu}},$$

where  $\alpha^2$  is the Womersley parameter and h is the Hartmann number.

The dimensionless pressure gradient  $\frac{\partial p}{\partial z}$  appearing in Eqs. (2)-(4) is given by:  $-\frac{\partial p}{\partial z} = A_0 + A_1 \cos \omega t$ , t > 0 [8] where  $A_0$  is the constant amplitude of the pressure gradient,  $A_1$  is the amplitude of the pulsatile component giving rise to the systolic and diastolic pressures and  $w = 2\pi f_p$ ,  $f_p$  is the pulse frequency. Using the non-dimensional quantities  $a_0 = \frac{R_0^2 a_0^*}{\nu U}$ and  $b = \frac{w_b}{w}$  the body acceleration expression defined in the following form [31]:

$$G(t) = a_0 \cos(bt + \varphi_g). \tag{5}$$

The initial and boundary conditions are taken as [11]:

$$r = 0: \quad v(r, z, t) = 0, \quad \frac{\partial u(r, z, t)}{\partial r} = 0, \tag{6}$$

$$r = R(z): \quad v(r, z, t) = \frac{\partial R}{\partial t}, \quad u(r, z, t) = 0, \tag{7}$$

$$v(r, z, 0) = u(r, z, 0) = 0.$$
 (8)

#### 2.3 The radial coordinate transformation

The radial coordinate transformation given by  $\xi = \frac{r}{R} [2,4,11,13,21,22,28]$ , is introduced to transform stenosed artery to straight artery. Using this transformation, Eqs. (2)-(4) and prescribed boundary conditions take the following forms:

$$\begin{aligned} \frac{\partial u}{\partial t} &= -\frac{\partial p}{\partial z} + \frac{1}{R} \frac{\partial u}{\partial \xi} \left[ \xi \left( u \frac{\partial R}{\partial z} + \frac{\partial R}{\partial t} \right) - v \right] - u \frac{\partial u}{\partial z} \\ &+ \frac{1}{\alpha^2} \left[ \frac{1}{R^2} \left\{ 1 + (\xi \frac{\partial R}{\partial z})^2 \right\} \frac{\partial^2 u}{\partial \xi^2} + \frac{1}{\xi R^2} \left\{ 1 + 2(\xi \frac{\partial R}{\partial z})^2 \right. \\ &- \xi^2 R \frac{\partial^2 R}{\partial z^2} \right\} \frac{\partial u}{\partial \xi} + \frac{\partial^2 u}{\partial z^2} \right] - \frac{1}{\alpha^2} (h)^2 u + \frac{1}{\alpha^2} G(t), \end{aligned}$$
(9)

$$\frac{1}{R}\frac{\partial v}{\partial \xi} + \frac{v}{\xi R} + \frac{\partial u}{\partial z} - \frac{\xi}{R}\frac{\partial R}{\partial z}\frac{\partial u}{\partial \xi} = 0,$$
(10)

$$\xi = 0: \quad v(\xi, z, t) = 0, \quad \frac{\partial u(\xi, z, t)}{\partial \xi} = 0, \tag{11}$$

$$\xi = 1: \quad v(\xi, z, t) = \frac{\partial R}{\partial t}, \quad u(\xi, z, t) = 0, \tag{12}$$

$$u(\xi, z, 0) = v(\xi, z, 0) = 0.$$
(13)

## 3 The velocity profile

#### 3.1 The radial velocity component

Multiplying Eq. (10) by  $\xi R$  and integrating with respect to  $\xi$  from 0 to  $\xi$ , one can obtain:

$$\xi v(\xi, z, t) + R \int_0^{\xi} \xi \frac{\partial u}{\partial z} d\xi - \frac{\partial R}{\partial z} \xi^2 u + \frac{\partial R}{\partial z} \int_0^{\xi} 2\xi u d\xi = 0, \qquad (14)$$

$$v(\xi, z, t) = -\frac{R}{\xi} \int_0^{\xi} \xi \frac{\partial u}{\partial z} d\xi + \frac{\partial R}{\partial z} (\xi u - \frac{2}{\xi} \int_0^{\xi} \xi u d\xi).$$
(15)

For  $\xi = 1$ , by using the boundary conditions (12), Eq. (15) becomes:

$$\int_0^1 \xi \frac{\partial u}{\partial z} d\xi = -\int_0^1 \frac{2}{R} \frac{\partial R}{\partial z} \xi u d\xi + \int_0^1 \frac{1}{R} (\frac{\partial R}{\partial t} \xi f(\xi)) d\xi, \tag{16}$$

in which  $f(\xi)$  represents an arbitrary function satisfying  $\int_0^{\xi} \xi f(\xi) d\xi = 1$ . Let  $f(\xi) = -4(1-\xi^2)$ , then from Eq. (15) one can obtain

$$\frac{\partial u}{\partial z} = -\frac{2}{R} \frac{\partial R}{\partial z} u - \frac{4}{R} (1 - \xi^2) \frac{\partial R}{\partial t}.$$
(17)

By substituting (17) into (15), the radial velocity component may be written as follows:

$$v(\xi, z, t) = \xi \left[\frac{\partial R}{\partial z}u + \frac{\partial R}{\partial t}(2 - \xi^2)\right].$$
 (18)

#### 3.2 The axial velocity component

The Crank-Nicolson scheme for solving Eq. (9) is based upon the central difference formula for all spatial derivatives and the forward difference formula for all time derivative as follows:

$$\frac{\partial u}{\partial \xi} = \frac{1}{2} \left[ \frac{(u)_{i,j+1}^k - (u)_{i,j-1}^k}{2\Delta \xi} + \frac{(u)_{i,j+1}^{k+1} - (u)_{i,j-1}^{k+1}}{2\Delta \xi} \right],\tag{19}$$

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$$\frac{\partial u}{\partial z} = \frac{(u)_{i+1,j}^k - (u)_{i-1,j}^k}{2\Delta z},$$
(20)

$$\frac{\partial^2 u}{\partial \xi^2} = \frac{1}{2} \left[ \frac{(u)_{i,j+1}^k - 2(u)_{i,j}^k + (u)_{i,j-1}^k}{\Delta \xi^2} + \frac{(u)_{i,j+1}^{k+1} - 2(u)_{i,j}^{k+1} + (u)_{i,j-1}^{k+1}}{\Delta \xi^2} \right], \quad (21)$$

$$\frac{\partial^2 u}{\partial z^2} = \frac{(u)_{i+1,j}^k - 2(u)_{i,j}^k + (u)_{i-1,j}^k}{\Delta z^2},\tag{22}$$

$$\frac{\partial u}{\partial t} = \frac{(u)_{i,j}^{k+1} - (u)_{i,j}^k}{\Delta t}.$$
(23)

In the above we define:

$$\xi_j = (j-1)\Delta\xi, \quad (j = 1, 2, \dots, N+1); \quad \xi_{(N+1)} = 1,$$
  
 $z_i = (i-1)\Delta z, \quad (i = 1, 2, \dots, M+1),$   
 $t_k = (k-1)\Delta t, \quad (k = 1, 2, \dots),$ 

where  $\Delta \xi$ ,  $\Delta z$  are increment in the radial and the axial directions respectively and  $\Delta t$  is the small time increment.

Using the Crank-Nicolson scheme, the discretized form of Eq. (9) is given as:

$$A_{i,j}u_{i,j-1}^{k+1} + B_{i,j}u_{i,j}^{k+1} + C_{i,j}u_{i,j+1}^{k+1} = D_{i,j}.$$
(24)

where

$$\begin{split} A_{i,j} &= \frac{\Delta t}{4R_i^k \Delta \xi} [\xi_j (u_{i,j} (\frac{\partial R}{\partial z})_i^k + (\frac{\partial R}{\partial t})_i^k) - v_{i,j}] - \frac{\Delta t}{2\alpha^2 (R_i^k)^2 \Delta \xi^2} \{ 1 + (\xi_j (\frac{\partial R}{\partial z})_i^k)^2 \} \\ &+ \frac{\Delta t}{4\alpha^2 (R_i^k)^2 \xi_j \Delta \xi} \{ 1 + 2(\xi_j (\frac{\partial R}{\partial z})_i^k)^2 - \xi_j^2 R_i^k (\frac{\partial^2 R}{\partial z^2})_i^k \}, \end{split}$$

$$B_{i,j} = 1 + \frac{\Delta t}{\alpha^2 (R_i^k)^2 \Delta \xi^2} \{ 1 + (\xi_j (\frac{\partial R}{\partial z})_i^k)^2 \},$$

$$\begin{split} C_{i,j} &= \frac{-\Delta t}{4R_i^k \Delta \xi} [\xi_j (u_{i,j} (\frac{\partial R}{\partial z})_i^k + (\frac{\partial R}{\partial t})_i^k) - v_{i,j}] - \frac{\Delta t}{2\alpha^2 (R_i^k)^2 \Delta \xi^2} \{1 + (\xi_j (\frac{\partial R}{\partial z})_i^k)^2\} \\ &- \frac{\Delta t}{2\alpha^2 (R_i^k)^2 \xi_j \Delta \xi} \{1 + 2(\xi_j (\frac{\partial R}{\partial z})_i^k)^2 - \xi_j^2 R_j^k (\frac{\partial^2 R}{\partial z^2})_i^k\}, \end{split}$$

$$D_{i,j} = u_{i,j}^k - \Delta t(\frac{\partial R}{\partial z}) + \frac{\Delta t}{4R_i^k \Delta \xi} ((u)_{i,j+1}^k - (u)_{i,j-1}^k) [\xi_j(u_{i,j}(\frac{\partial R}{\partial z})_i^k + (\frac{\partial R}{\partial t})_i^k) - v_{i,j}]$$

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$$\begin{split} &-\frac{\Delta t}{2\Delta z}(u)_{i,j}^{k}((u)_{i+1,j}^{k}-(u)_{i-1,j}^{k})+\frac{\Delta t}{2\alpha^{2}(R_{i}^{k})^{2}\Delta\xi^{2}}((u)_{i,j+1}^{k}-2(u)_{i,j}^{k}) \\ &+(u)_{i,j-1}^{k})\{1+(\xi_{j}(\frac{\partial R}{\partial z})_{i}^{k})^{2}\}+\frac{\Delta t}{4\alpha^{2}(R_{i}^{k})^{2}\xi_{j}\Delta\xi^{2}}\{1+2(\xi_{j}(\frac{\partial R}{\partial z})_{i}^{k})^{2} \\ &-\xi_{j}^{2}R_{i}^{k}(\frac{\partial^{2}R}{\partial z^{2}})_{i}^{k}\}((u)_{i,j+1}^{k}-(u)_{i,j-1}^{k})+\frac{\Delta t}{\alpha^{2}\Delta z^{2}}((u)_{i+1,j}^{k}-2(u)_{i,j}^{k}) \\ &+(u)_{i-1,j}^{k})+\Delta t(\frac{G(t)}{\alpha^{2}})-\Delta t(\frac{h^{2}}{\alpha^{2}})u_{i,j}. \end{split}$$

After computing the velocity distribution, one can compute the volumetric floe rate (Q) and the resistive impedance  $(\Lambda)$  by using the following formulas:

$$Q_i^k = 2\pi (R_i^k)^2 \int_0^1 \xi_j(u)_{i,j}^k d\xi_j,$$
  
$$\Lambda_i^k = \frac{\left| L\left(\frac{\partial p}{\partial z}\right)_i^k \right|}{Q_i^k}.$$
 (25)

### 4 Numerical Results and Discussion

Numerical computations are performed using the underneath data values [3,11,22]:

 $\Delta t = 0.001, \quad \Delta \xi = 0.0125, \quad \Delta z = 0.1, \quad d = 10, \quad \alpha = 4, \quad f_p = 1.2,$  $L = 30, \quad l_0 = 14, \quad A_0 = 0.1, \quad A_1 = 0.2A_0, \quad R_0 = 1.52,$  $k_r = 0.05, \quad a_0 = 1, \quad \varphi_g = \frac{\pi}{4}, \quad \varphi = 0, \quad b = 1.$ 

In order to validate the proposed results, the obtained axial velocity in maximum constricted region for  $\tau_m = 0.2R_0$  and at the time t = 2 is compared with the corresponding results obtained by Shaw et al. [28] and Mandal et al. [13].

Figure 3 illustrates the dimensionless axial velocity of the flowing blood at a specific location of z = 17 in the stenotic region at t = 2 and n = 2,  $\tau_m = 0.2R_0$  for several amount of Hartmann number. In this figure, the axial velocity reduces with decreasing the Hartmann number. This occurs due to the interaction of magnetic field by blood flow, and also a body force per unit volume, known as the Lorentz force, which has a tendency to slow down the motion of fluid, and the axial velocity occurs maximum at the central line of the artery in all four cases.

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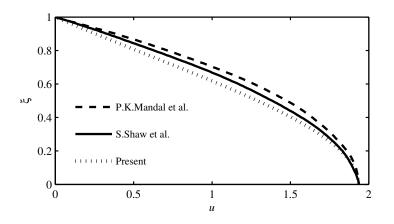


Figure 2: Comparison of the dimensionless axial velocity profile.

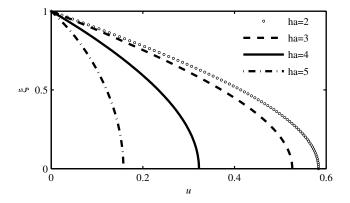


Figure 3: Dimensionless axial velocity profile for different values of Hartmann number.

Figure 4 shows the dimensionless axial velocity profiles for different stenosis sizes at h = 2 and n = 2. Figure 4 depicted that the axial velocity reduces with increasing the size of stenosis, at t = 3. The present figure also consists the axial velocity at the time t = 2 among an elastic and rigid artery that the axial velocity in rigid artery is more than the axial velocity in elastic artery and this displays the importance of the assumption of elastic nature of blood vessels.

The rate of flow in the stenosed artery for different Hartmann number at the time t = 2, n = 2 and  $\tau_m = 0.2R_0$  is shown in Figure 5. It is seen that the rate of flow reduces by the increase of the Hartmann number. As a consequence, under the action of a magnetic field, the volume of blood

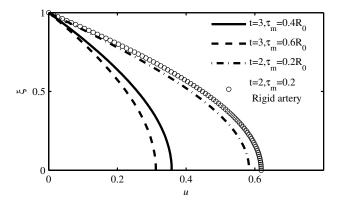


Figure 4: Dimensionless axial velocity profile for different stenosis size.

flow may be adjusted during surgeries.

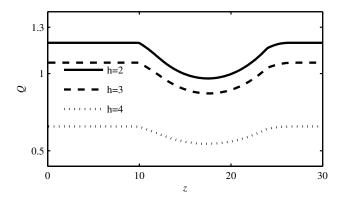


Figure 5: Distribution of the rate of flow for different values of Hartmann number.

Figure 6 shows the comparison results of the rate of flow in the flowing of blood through an elastic and rigid artery together with the evaluation of the effect of the stenosis size on the rate of flow. As shown in figure, the flow rate among the elastic artery at the time t = 2, h = 2 and n = 2 is less than the flow rate through the rigid artery. Also, the rate of flow reduces by the increase at the stenosis size. It is seen that the rate of flow behavior is corresponding to the geometry of the stenosis so that, at the onset of the stenosis rate of flow dropped and at the stenosis critical height reaches to its lowermost level.

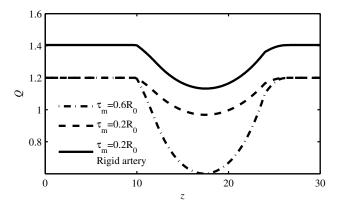


Figure 6: Distribution of the rate of flow for different stenosis size.

Figure 7 describes the three dimensional rate of flow along time t and the axial direction z. It demonstrates that the rate of flow increases with the decreases of the time.

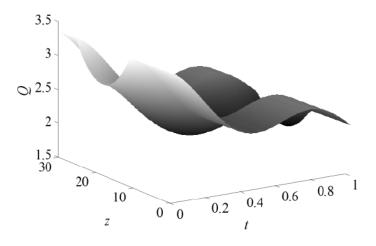


Figure 7: Surface plot of the volumetric flow rate

Resistive impedance through a stenosed artery for different Hartmann number at the time t = 2, n = 2 and  $\tau_m = 0.2R_0$  is presented in Figure 8. Considering Eq. (25) the rate of flow and the resistive impedance are inversely relevant, thus unlike the rate of flow, the resistive impedance increases by the increase in the Hartmann number.

The resistive impedance in the stenosed vessel for several stenosis sizes at the time t = 2, n = 2 and h = 2 is obvious in Figure 9. It has been

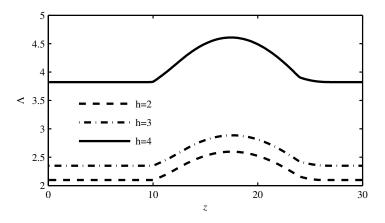


Figure 8: Distribution of the resistive impedance for different values of Hartmann number.

observed from this figure that the resistive impedance increases by the increase in the stenosis size. In addition, comparing the resistive impedance of elastic and rigid arteries indicates that the impedance of the elastic artery is more than the rigid artery.

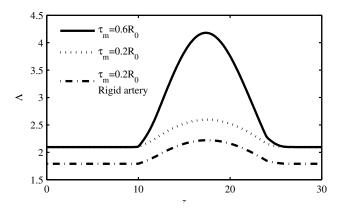


Figure 9: Distribution of the resistive impedance for different stenosis size.

Figure 10 depicts the three-dimensional resistive impedance along the axial direction z and time t = 1 for  $\tau_m = 0.2R_0$ . It is seen that unlike the rate of flow, the resistive impedance ( $\Lambda$ ) increases by the increase of the time.

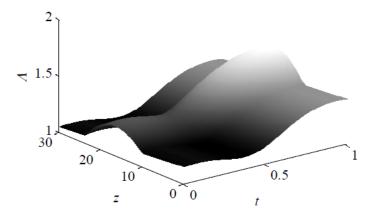


Figure 10: Surface plot of the resistive impedance.

## 5 Conclusion

The unsteady, laminar and two-dimensional flow of blood through a constriction artery is studied. Using Crank-Nicolson sheme, the discretized form of the governing nonlinear partial differential equations and the influences of the effective parameters on flow specifications such as the velocity profile, the rate of flow and the resistive to flow are examined. Our results demonstrate that the axial velocity and the rate of flow decreases by the increase in the stenosis size and also, the magnetic field has reduced effect on the blood fluid velocity. The resistive impedance decreases with the increase in the Hartmann number, so the action of a magnetic field, the volume of blood flow can be adjusted during surgeries. The blood flow characteristics among elastic artery is compared with the rigid ones and this difference between the axial velocity of the rigid and the elastic arteries shows the importance of the hypothesis of elastic blood vessels.

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