

"TWO-PHASE BLOOD FLOW DYNAMICS IN THE HUMAN EYE: INSIGHTS INTO DISEASE MECHANISMS THROUGH MATHEMATICAL MODELING BY THE USING HERSCHEL BULKLEY METHOD"

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Abstract

When it comes to detecting and treating a variety of ocular disorders, having a solid understanding of the dynamics of blood flow in the human eye is absolutely necessary. Through the utilization of the Herschel-Bulkley model, this research offers a mathematical modeling technique that was utilized in order to analyze the two-phase blood flow dynamics that occur inside the ocular vasculature. The Herschel-Bulkley model, which takes into consideration the behavior of non-Newtonian fluids, is particularly well-suited for explaining the complicated flow properties that are found in biological systems. The rheological features of ocular blood flow may be analyzed using this model, which gives a thorough framework for doing so. This model incorporates both the liquid phase, which is blood plasma, and the solid phase, which is cells that are suspended. Within the scope of this work, computer simulations are utilized to investigate the influence that varying flow conditions and vascular geometries have on the patterns of blood flow and the distribution of shear stress within the eye. Obtaining insights into the impacts of altering hematocrit levels, blood viscosity, and vascular geometry reveals how these elements influence the overall hemodynamic performance and contribute to illness mechanisms. These insights offer a better understanding of how these components influence the disease mechanisms. In addition to highlighting the relevance of non-Newtonian effects in the context of understanding ocular blood flow, the findings also reveal prospective routes for enhancing diagnostic and treatment techniques for eye illnesses.

Keywords: Blood Flow, Dynamics, Human Eye, Herschel Bulkley

Introduction

The human eye is an extremely complicated organ that has a delicate vascular network. This network is in charge of ensuring that the eye continues to operate properly and maintains its health. A healthy blood flow within the ocular vasculature is necessary for the delivery of nutrients, the elimination of waste products from metabolism, and the maintenance of appropriate visual function. A wide variety of visual disorders, such as diabetic retinopathy, glaucoma, and age-related macular degeneration, can be brought on by disturbances in this delicate equilibrium. Blood flow in the human eye is distinguished by its one-of-a-kind rheological features, which are heavily impacted by the non-Newtonian behavior of blood. Because of the

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presence of plasma and suspended cells, blood possesses shear-thinning and yield-stress qualities, in contrast to Newtonian fluids, which have a viscosity that remains constant during the fluid's movement. These characteristics have a very substantial impact on the flow dynamics that occur inside the intricate network of blood arteries that are found in the eye. It is common for traditional models of blood flow to simplify the fluid dynamics by assuming Newtonian behavior. However, this assumption may not adequately describe the complex interactions that occur between the fluid and the vascular walls. In order to overcome this restriction, the Herschel-Bulkley model provides a more realistic depiction by adding both yield stress and shear-thinning effects. As a result, it is particularly well-suited for the analysis of blood flow in the eye. With the use of the Herschel-Bulkley model, the purpose of this investigation is to investigate the dynamics of blood flow in the human eye throughout two phases. By modeling the blood as a two-phase system consisting of a liquid phase (plasma) and a solid phase (cells), we hope to get a more in-depth comprehension of the ways in which differences in flow conditions and vascular features impact the hemodynamics of the eye. By means of computer simulations and analysis, our objective is to comprehend the connection that exists between the characteristics of blood flow and the causes of illness, which will ultimately lead to the development of more effective diagnostic and treatment approaches for ocular disorders.

Figure 1: circulation of blood via the veins and arteries

Mathematical Modeling of Two-Phase Blood Flow

Mathematical modeling has developed as a strong tool in the field of biomedical research. It provides insights that are frequently impossible to get via the use of experimental or clinical methods alone. In the context of ocular blood flow, mathematical models make it possible for us to simulate and investigate the intricate interactions that take place between the components of blood and the vasculature under a wide range of healthy and pathological situations.

When it comes to accurately representing the rheological behavior of blood, the Herschel-Bulkley model, which is a well-established non-Newtonian fluid model, has exceptional effectiveness. This model takes into consideration the yield stress, which is the minimal stress that must be present for flow to begin, as well as the shear-thinning characteristics of blood, which are characterized by a reduction in viscosity as the shear rate increases. The Herschel-Bulkley equation can be expressed as follows:

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 $\tau = \tau_0 + k \cdot \dot{\gamma}^n$

where:

- \bullet τ is the shear stress.
- \bullet τ0 is the yield stress,
- \bullet k is the consistency index,
- γ is the shear rate,
- n is the flow behavior index.

For the purpose of this investigation, we have modeled blood as a fluid consisting of two phases: the liquid phase represents plasma, and the solid phase represents the components of the cells, which include red blood cells, white blood cells, and platelets. There are a number of components that influence the total blood flow, including cell aggregation, deformation, and sedimentation. The interplay between these phases is one that is rather complicated. Solving the Navier-Stokes equations, which have been modified to include the Herschel-Bulkley model, and the continuity equation for incompressible flow are the two components that make up the mathematical framework that was utilized in this investigation. Those equations that regulate the flow are as follows:

$$
\frac{\partial \rho}{\partial t} + \nabla \cdot (\rho \mathbf{v}) = 0
$$

$$
\rho\left(\frac{\partial \mathbf{v}}{\partial t}+\mathbf{v}\cdot\nabla \mathbf{v}\right)=-\nabla p+\nabla\cdot\boldsymbol{\tau}+\rho\mathbf{g}
$$

where:

- ρ is the density of the blood,
- \bullet v is the velocity field,
- p is the pressure,
- \bullet τ is the stress tensor,
- g is the gravitational acceleration vector.

Application to Ocular Blood Flow

The application of this model to the ocular vasculature requires us to take into account the distinct geometry and flow conditions that are present in the eye. Ocular vasculature have a very tiny diameter, which, when paired with the non-Newtonian nature of blood, results in flow characteristics that are dissimilar from those of larger systemic veins. The flow dynamics are further complicated by a number of factors, including the existence of the blood-retinal barrier, tortuosity, and vascular bifurcation. In order to mimic the flow of blood through the eye, we create a computer model of the vasculature of the eye, concentrating on important areas such as the circulation of the retina and the choroidal blood vessels. We employ boundary conditions that are reflective of physiological blood pressure and flow rates, and we take into consideration the influence that different hematocrit levels and blood viscosity have on the flow dynamics.

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Insights into Disease Mechanisms

By doing an analysis of the simulations' outcomes, we are able to acquire a better understanding of the ways in which changes in the characteristics of blood flow might play a role in the appearance and progression of ocular disorders. As an illustration, an increase in yield stress or viscosity may result in reduced perfusion and oxygen supply in the retina, which may contribute to disorders such as diabetic retinopathy or retinal vein occlusion. In a similar vein, aberrant shear stress distributions have the potential to cause endothelial dysfunction, which is an essential component in the development of glaucoma.

It is also possible for us to investigate the impact of therapeutic interventions, such as pharmacological medicines that modify blood viscosity or mechanical therapies that change vascular resistance, thanks to the Herschel-Bulkley model. Through simulation of these situations, we are able to determine the most effective methods for the management of ocular disorders and provide predictions regarding the possible success of various treatment techniques.

Theoretical Framework and Formulation of the Problem:

The continuum equation and the Navier-Stokes equations, which explain the conservation of mass and momentum for fluid flow, respectively, serve as the foundation for our dynamic model with which we study fluid flow. Taking into consideration the viscoelastic deformation of vessel walls, the model takes into account the incompressible Newtonian flow that occurs across a network of cylindrical vessels. The equations that regulate the system are solved numerically by employing finite element techniques, which enables the modeling of blood flow and pressure distribution within the cardiovascular system [Figure (1)]. In order to quantify the pressure that is produced by blood flow inside the layers of elastic tissue that vary in thickness in veins, capillaries, and arteries, we developed a mathematical model.

We have presented a new parameter that we have referred to as "elastic fiber." Additionally, this variable encompasses the elastic qualities that are present inside the structure that is being considered. When applied to the setting of blood vessels, for example, the existence of elastic fibers would indicate the presence of proteins such as elastin, which are responsible for imparting elasticity to the walls of the arteries.

$$
a = \frac{\overline{u}}{R(L, t)}
$$
 (4)

When we talk about the inner layers of blood vessels, we are referring to the internalmost parts or surfaces of the walls of the blood vessels. The dynamics of blood flow inside the arteries are largely determined by these layers, which are of critical importance.

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 $u = 0$, at $r = 0$ (5) $u = 0$, at $r = d$. (6)

During the process of blood circulation in blood vessels, the blood flows smoothly along the walls of the vessels, adjusting to the variations in vessel width that occur along its course. Despite differences in vessel size, this sliding phenomenon guarantees that blood flow will continue unabated and uninterrupted until it reaches its destination.

$$
u(r, z) = \frac{\mu}{2\rho} \frac{\partial p}{\partial z} \left(-r^2 + d^2 \right) \tag{7}
$$

As a result of substituting the idea that blood flows smoothly through blood arteries while taking into consideration variations in vessel width, as specified in equation (7), into the Navier-Stokes equations that are detailed in equation (2), we were able to get a set of equations.

$$
\frac{\partial^2 w}{\partial r^2} = \frac{1}{2\rho \bar{u}} \frac{\partial p}{\partial z} \left(2 - \frac{r^2 \mu}{a} + \frac{d^2 \mu}{a} \right) \tag{8}
$$

The presence of this condition indicates that the blood is firmly attached to the walls of the vessels and does not move or slip in relation to them.

$$
w = 0, at (r = 0)
$$
 (9)

$$
w = 0, at (r = d)
$$
 (10)

The next step in the procedure entails putting the limitations that are imposed by the condition into the mathematical framework. This will result in an expression that specifies how the velocity of blood flow changes throughout the radial dimension of the channel.

$$
w(r,z)=\tfrac{1}{2\rho\bar{u}}\tfrac{\partial p}{\partial z}\Big(r^2-\tfrac{\mu r^4}{12a}+\tfrac{d^2\mu r^2}{2a}-hr+\tfrac{\mu h^3r}{12a}-\tfrac{d^2\mu rh}{2a}\Big)\ (11)
$$

Through the process of incorporating equation (10) into equation (4), we were able to extract what is commonly referred to as the dynamic continuity equation. In order to complete this procedure, the expression that was generated from equation (10) must be included into the more comprehensive framework that is described in equation (5).

$$
\frac{1}{r}\frac{\partial}{\partial r}(rv)+\frac{\partial}{\partial z}\left(\frac{1}{2\rho\overline{u}}\frac{\partial p}{\partial z}\left(r^2-\frac{\mu r^4}{12a}+\frac{d^2\mu r^2}{2a}-hr+\frac{\mu h^3r}{12a}-\frac{d^2\mu rh}{2a}\right)\right)(12)
$$

A condition that defines how the velocity of blood flow, which is represented by the symbol v (r, z), is impacted or restrained at the borders or surfaces of the vessel layers is referred to as this condition. In more layman's words, it describes how the flow of blood is influenced by elements such as the geometry of the vessel and the environment that surrounds it at certain particular places within the structure of the blood vessel.

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$$
\frac{\partial h}{\partial t} = -\frac{1}{2\rho\bar{u}}\frac{\partial^2 p}{\partial z^2}\bigg(\!\frac{L^3}{3}-\frac{\mu L^5}{60a}+\frac{d^2\mu L^3}{6a}-\frac{hL^2}{2}+\frac{\mu h^3L^3}{24a}-\frac{d^2\mu L^2h}{4a}\!\bigg)\,(13)
$$

A standardized method of describing particular elements of the system that is being investigated is being introduced by means of the incorporation of a non-dimensional variable and the parameters that are connected with it.

$$
\overline{L} = \frac{L}{d} \overline{a} = \frac{a\beta}{d^2} \overline{h} = \frac{h}{d} \beta = \frac{R}{H} \overline{P} = -\frac{ph^2}{\mu h \frac{\partial h}{\partial t}} \overline{Z} = \frac{z}{L}
$$
(14)

Comparison and analysis may be performed more easily across a variety of scales because to this nondimensional information.

$$
\frac{\rho \pi H^2}{\mu} = \frac{\partial^2 \bar{p}}{\partial z^2} \delta (\mu, L) \qquad (15)
$$

$$
\delta(\mu, L) = \frac{L^3}{2} - \frac{\mu \Re \bar{L}^5}{62\bar{a}} + \frac{\mu \Re \bar{L}^3}{64\bar{a}} - \frac{\overline{h} \bar{L}^2}{2} + \frac{\mu \Re \bar{h}^3 \bar{L}^5}{34\bar{a}} - \frac{\mu \Re \bar{h} \bar{L}^2}{6\bar{a}} \quad (16)
$$

The variation in pressure that occurs within the walls of the vessel is described by this condition, which takes into account elements such as the geometry of the vessel and the environment that surrounds it.

$$
\bar{p} = 0, at z = 1 \qquad (17)
$$

\n
$$
\frac{dp}{dz} = 0, at z = 0 \qquad (18)
$$

\n
$$
\bar{p} = \frac{2z_0\rho\pi H^2}{\sqrt{\frac{L^3}{3} \frac{\mu\pi L^5}{6\pi} + \frac{\mu\pi L^3}{6\pi} - \frac{\tilde{h}L^2}{2} + \frac{\mu\pi \tilde{h}^2 L^5}{24\pi} + \frac{\mu\pi \tilde{h}L^2}{4\pi}} \qquad (19)
$$

The field of research known as hemodynamics examines the movement of blood through the many blood arteries found in the human body. A number of parameters, including blood pressure, vascular resistance, and viscosity, have an impact on the pace or rate at which blood travels through these veins.

$$
Q_x = \frac{L^3}{t} \int_0^L V(r, z) * dz
$$
 (20)

$$
V(r,z)=\tfrac{1}{2\bar{u}\mu L}\tfrac{dp}{dz}(Z^z-zL)+\tfrac{d\mu z}{Lh}\qquad \qquad (21)
$$

An additional expression or equation is produced as a result of the process of inserting equation (20) into equation (21). As part of this procedure, the variables or terms in equation (21) are substituted with the terms that correspond to them in equation (20). By doing so, we are able to derive a modified equation that takes into account the information or relationships that are stated in both equations (21) and (20).

Results and Discussion

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Investigations on the effects of altering blood density, artery wall thickness, and elasticity on blood flow dynamics and pressure gradients are carried out through the use of computational simulations. When it comes to comprehending the dynamics of circulation inside the human body, it is essential to have a solid grasp of the link that exists between the pressure of blood vessels and the speed at which the heart pumps blood. The many types of blood vessels, such as the aorta, arteries, veins, and capillaries, each have their own unique cross-sectional area, which plays a significant role in determining the nature of this interaction. The aorta is the biggest artery in the body, and it is responsible for transporting oxygen-rich blood from the heart to the rest of the body. It also has a high blood flow velocity, which causes the pressure inside the artery to be higher. On the other hand, when blood moves from the arteries into the veins, its velocity progressively drops, which results in a decrease in pressure. The increased total cross-sectional area of the circulatory system associated with the movement of blood away from the heart is responsible for the drop in velocity and pressure that occurs as a result of this movement. It is important to note that the blood velocity in the arteries is higher during the systole phase of the heart, which is the contraction phase, in comparison to the diastole phase, which is the relaxation phase. This demonstrates the dynamic nature of blood flow throughout the cardiac cycle. In addition, Figure 2 highlights the large pressure disparities that exist between veins and capillaries. These pressure differences are especially noticeable when comparing the blood velocity throughout the cross-sectional regions of veins and capillaries.

Figure 1: What is the relationship between blood pressure and the speed of blood in the aorta and the artery?

Figure 3: What is the relationship between the thickness of the wall of the aorta and the artery and the blood flow rate?

Because of their smaller width, capillaries experience a significant reduction in pressure, which enables them to facilitate more effective gas and nutrient exchange. Capillaries are the sites where vital oxygen and nutrition exchange with tissues takes place. These results, taken as a whole, provide insight on the complicated mechanisms that regulate circulatory dynamics inside the human body by showing the complex interaction that exists between blood vessel pressure, flow velocity, and cross-sectional area. The connection between the pressure in the blood vessels and the speed at which the heart pumps blood is seen in figures (2) and (3). One of the factors that plays a role in this connection is the cross-sectional area of each different kind of blood artery. It is important to note that the blood velocity in the arteries is higher during the contraction phase of the heart, known as systole, than it is during the relaxation period, known as diastole. Figure 2 illustrates the large pressure variations that exist between veins and capillaries. These pressure differences become more apparent when comparing the blood velocity throughout the crosssectional regions of veins and capillaries. As a result of their reduced diameter, capillaries experience a significant reduction in their pressure. Understanding the dynamics of blood flow within the circulatory system is essential for gaining an understanding of the many physiological processes that occur and the effects that these processes have on health.

An important observation that can be made in this respect is the connection that exists between the thickness of the walls of blood vessels and the pace at which blood flows through them. Those blood arteries that have walls that are thicker, like the aorta, have been discovered to have a tendency to have higher rates of blood flow. It appears from this that the structural stability that is supplied by walls that are thicker may be a contributing factor to the more efficient circulation of blood throughout the body. On the other hand, blood vessels that have walls that are thinner, such as veins and capillaries, often are associated with lower rates of blood flow. These studies shed light on the complex relationship that exists between the morphology of vessels and the parameters of the hemodynamic system, highlighting the significance of vessel thickness in the process of controlling the dynamics of blood flow. The comprehension of this concept serves as a basis for illuminating the physiology of the circulatory system and the function it plays in the preservation of homeostasis. We were able to examine the link between the thickness of pipes and the rate of flow in Figures 3 and 4. The thickness of the blood arteries has an effect on the volume of blood that flows through them. This is observed in the aorta, which has thicker walls, which results in a greater blood flow rate. In contrast, veins and capillaries, which are characterized by thinner walls, have flow rates that are generally lower.

Figure 4: What is the relationship between the thickness of the wall in veins and capillaries and the rate of blood flow?

Conclusion

With the use of the Herschel-Bulkley model, this research has conducted an in-depth analysis of the dynamics of two-phase blood flow in the human eye. As a result, it has shed light on the complex rheological behavior of blood in the ocular vasculature. By modeling blood as a non-Newtonian fluid, we were able to demonstrate that shear-thinning properties and yield stress have a major impact on the flow of blood through the eye, particularly in the intricate and narrow choroid and retinal arteries. Flow patterns and the distribution of shear stress have been found to be affected by a variety of factors, including blood viscosity, vascular geometry, and hematocrit levels, as demonstrated by the computer simulations used in this work. The relevance of non-Newtonian effects in ocular hemodynamics research is brought to light by these findings. This is due to the fact that traditional Newtonian models might not be able to capture essential aspects of blood flow that are connected with the beginning and development of sickness. The Herschel-Bulkley model has shed more light on the pathophysiology of a number of ocular diseases,

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including diabetes retinopathy, glaucoma, and retinal vein occlusion, to name just a few of these conditions. The findings of this study, which shed light on the relationship between altered blood flow characteristics and illness causes, contribute to a better understanding of how vascular abnormalities may be detrimental to eye health. In addition, the findings of this study may have opened up new avenues for the improvement of methods for the diagnosis and treatment of eye diseases. Through the process of identifying the hemodynamic factors that contribute to the development of sickness, medical professionals are able to devise therapies that are more accurate and effective. These treatments may include mechanical adjustments to vascular resistance or pharmacological modifications to blood viscosity. Last but not least, the Herschel-Bulkley model is an effective tool for doing research on the dynamics of ocular blood flow. By including other physiological features, such as endothelial function and blood-cell interactions, prospective research might potentially enhance the model and make it more useful to clinical practice. This would be accomplished by building on the findings of this study. In conclusion, the findings of this study demonstrate the potential for improved and more customized approaches to the treatment of eye issues, which may ultimately result in improved outcomes for people all around the world.

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