

COMPUTER SIMULATION OF HEAT AND MASS TRANSFER EFFECTS ON NANOFUID FLOW OF BLOOD THROUGH AN INCLINED STENOSED ARTERY WITH HALL EFFECT

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Abstract: The present study deals with the analysis of heat and mass transfer for nanofluid flow of blood through an inclined stenosed artery under the influence of the Hall effect. The effects of hematocrit-dependent viscosity, Joule heating, chemical reaction and viscous dissipation are taken into account in the governing equations of the physical model. Non-dimensional differential equations are solved using the finite difference method, by taking into account the no-slip boundary condition. The effects of different thermophysical parameters on the velocity, temperature, concentration, shear stress coefficient and Nusselt and Sherwood numbers of nano-biofluids are exhaustively discussed and analysed through graphs. With an increase in stenosis height, shear stress, the Nusselt number and the Sherwood number are computed, and the impacts of each are examined for different physical parameters. To better understand the numerous phenomena that arise in the artery when nanofluid is present, the data are displayed graphically and physically described. It is observed that as the Hartman number and Hall parameter increase, the velocity drops. This is as a result of the Lorentz force that the applied magnetic field has generated. Blood flow in the arteries is resisted by the Lorentz force. This study advances the knowledge of stenosis and other defects' non-surgical treatment options and helps reduce post-operative consequences. Moreover, ongoing research holds promise in the biomedical field, specifically in magnetic resonance angiography (MRA), an imaging method for artery examination and anomaly detection.

Key words: Chemical reaction, Hall effect, Joule heating, Nanofluid, Variable viscosity.

1. INTRODUCTION

Blood is a biological fluid that nourishes and supplies the cells with oxygen. Additionally, it facilitates the removal of waste from cells. Since the blood in the artery circulates throughout the entire body, it is a crucial component. The presence of stenosis reduces the blood flow through an artery. The blood vessel becomes narrowed when there is stenosis [1]. This syndrome is brought on by lipid buildup in the artery wall or by pathological alterations in the tissue structure [2]. Additionally, it is brought on by the lumen's accumulation of cholesterol, fatty substances, calcium, cellular debris and fibrin [3]. Changes in the artery's pressure and flow are brought on by the deposition in the arterial wall. Heart failure results from the diminished blood supply, which has major circulation consequences [4]. Applications for the study of blood flow in arteries can be found in both engineering and medicine [5]. Additionally, it aids in the treatment of artery stenosis and the design of cardiovascular devices. Cells suspended in plasma make up blood. The viscosity of plasma and blood cells determines the viscosity of blood. Water quantity and plasma proteins affect plasma viscosity [6]. Red blood cells, which predominate over white blood cells in terms of quantity, determine the viscosity of blood; 45% of the total volume of blood is made up of red blood cells [7]. Hematocrit, a volume proportion used to express red blood cells in the blood. Hematocrit and temperature have a significant impact on blood viscosity. Blood viscosity is significantly influenced by hematocrit [8]. Viscosity increases dramatically and generates more flow resistance as hematocrit levels rise [9]. The oxygen supply is reduced as a result [10].

Recently, Asgar et al. [11] investigated electro-osmotically driven generalised Newtonian blood flow in a divergent micro-channel. Therefore, it is important to comprehend how viscosity changes with hematocrit.

As red blood cells include the iron component haemoglobin, blood is thought to carry electricity [12]. Therefore, the magneto hydrodynamics (MHD) principle can be used to investigate how a magnetic field affects arterial blood flow. The Lorentz force will oppose the motion of the blood when an external field is introduced. Treatment for circulatory diseases is aided by this. This supports one of the medication delivery strategies, magnetic drug targeting [13]. Due to its non-invasiveness, excellent targeting efficiencies and less harmful side effects on healthy cells and tissues, magnetic drug targeting is effective [14]. Sharma et al. [15] focused on the core and plasma regions when they studied MHD two-phase blood flow. They found that although the presence of heat reduces the likelihood of atherosclerosis, wall permeability and curvature increase it. Kumawat et al. [16] have examined the entropy formation on MHD two-phase blood flow with heat and mass transfer. Additionally, heat is produced as a result of an electric current's conduction through a conducting fluid. Joule heating is the name given to the heat that is created. Joule first law explains how current and heat are related. Studying this phenomenon contributes to a better comprehension of the rise in arterial temperature. A conducting fluid also experiences the Hall effect. The Lorentz force that results from the application of an external field causes charges to move in the opposite direction of the flow, resisting the flow. Because a magnetic field can control blood flow, it is employed as a blood pump to carry out cardiac surgeries in stenosed conditions [7]. When an external

magnetic field is used during magnetic resonance imaging, the impact of the magnetic field on blood flow via arteries is significant. Numerous studies [17–21] have examined the flow issues of viscous incompressible fluid via various geometries with the Hall effect. In the study by Ramzan et al. [22], investigation of the 3D nanofluid flow took into account Hall and ion slip effects, Arrhenius activation energy and Cattaneo-Christov heat flux. Using silver and aluminium oxide nanoparticles as the base fluid, Das et al. [23] recently employed the Casson fluid model to demonstrate the rheology of blood and investigate Hall and ion slip effects. Raja et al. [24] have explored the boundary layer flow problem in the presence of heat radiation and Hall current approaching the stretched sheet. They numerically deployed their models using the Adomian decomposition method. Das et al. [25], Kada et al. [26] and Asgar et al. [27] demonstrated the MHD movement of a three-dimensional Carreau-nanofluid under the effect of different physical situations. The results of this experiment demonstrate that the heat generating parameter raised the nanofluid's temperature. When radiation therapy is used, the impact of the radiation parameter must be taken into account. When a radioactive stent is inserted into a stenosed artery to control blood flow, the arteries are also exposed to radiation [28]. The effects of radiation on stenosis are better understood by study of the radiation parameter. Thermal radiation impact on an unsteady MHD nanofluid flow for Newtonian and non-Newtonian fluid has been discussed by Bejawada and Nandeppanavar [29], Jamshed et al. [30] and Reddy and Goud [31]. Sharma et al. [32, 33] analysed an unsteady MHD free and forced convection for a heat-generating fluid with and without thermal radiation and chemical reaction. In a compliant wall channel with thermal radiation and heat generation, Makinde et al. [34] analysed the impact of MHD and heat transfer on the peristaltic flow of Walters-B fluid. Mishra [35] has recently explored the radiation influence on thermal and mass diffusion MHD blood flow through a tapered porous stenosed artery. Arteriovenous stenosis is treated with nanofluids. Colloidal suspensions of nanoparticles in a base fluid are known as nanofluids [36]. Typically, base fluids such water, ethylene glycol, oil and biofluids are used to suspend nanoparticles of Ag, Cu, Al₂O₃ and TiO₂ [37]. Compared to base fluids, nanofluids have improved thermal conductivity [1]. Techniques for treating vascular stenosis are developed with the use of nanoparticle analysis of blood flow in stenosed arteries. To investigate the impact of hybrid nanoparticles (Au-Al₂O₃) on blood that is subject to temperature-dependent viscosity, Gandhi et al. [38] used the bell-shaped artery. Sharma et al. [39] have investigated the MHD slip flow with tapered multiple-stenosis artery using an entropy analysis. Blood-carrying vessels that are horizontal or vertical were taken into account in all the investigations listed before. Analysis of low Reynolds number flow generated in complex wavy surfaces has been discussed by Asgar et al. [40–43].

Chemical reactions in fluid flow have utility in energy production (combustion), pollution control (scrubbing) and industrial processes (chemical synthesis). They play a vital role in transforming substances, generating energy and altering fluid properties, impacting various sectors and contributing to both environmental and industrial advancements. The effect of chemical reaction and flow with the MHD effect on heat and mass transfer of fluid flow through different geometries has been analysed previously [44–48]. It is commonly known, however, that many ducts in physiological systems are inclined to the axis, rather than being horizontal or vertical. The inclined arterial blood

flow with magnetic field was discussed by Sharma et al. [49] and Srinivasulu and Goud [50]. Nevertheless, the examination of blood flow characteristics through an inclined artery with changing viscosity is still missing from the literature.

The influence of nanoparticles on blood flow in an inclined porous artery is examined in the current research by taking into account viscosity varying with hematocrit, viscous dissipation, chemical reaction, radiation, Joule heating and the Hall effect. A comprehensive survey of the literature revealed that no communication has been addressed to discuss the computational analysis on the blood flow through an inclined artery under a strong magnetic field. By factoring in viscosity change with hematocrit, viscous dissipation, radiation, Joule heating and the Hall effect, this study analyses the impact of these physical parameters on blood flow in an inclined porous artery.

By adding the aforementioned effects, the governing equations for mass, momentum, energy and concentration are framed. The Thomas algorithm is used to solve the resulting discretised non-dimensionalised equations using the finite difference approach. Analysis is carried out on how these parameters affect temperature, concentration and velocity profiles. Additionally, the Nusselt number, shear stress and the Sherwood number are computed. Along the stenosis height, the impacts of several parameters on the shear stress, the Sherwood number and the Nusselt number profile are investigated.

The novelty and objectivity of this investigation are concentrated on the following items:

- The combined effects of viscous dissipation, radiation, Joule heating and the Hall effect on the hemodynamic flow are examined.
- The effect of hematocrit-dependent viscosity on the blood flow through the stenosed artery is analysed.
- FDM analysis is performed to investigate the skin friction coefficient and the local Nusselt number with different physical parameters.

2. MATHEMATICAL FORMULATION OF THE MODEL

Consider a viscous, incompressible nanofluid MHD flow of blood through an inclined porous artery with variable viscosity and stenosis under the effect of Hall current, Joule heating and viscous dissipation. Joshi and Srivatsava [51, 52] characterised the geometrical representation of the arterial wall under the mild stenosed condition as,

$$\frac{R(z)}{R_0} = \begin{cases} 1 - \frac{2\delta}{R_0 L_0} (z - d) & d < z \leq d + \frac{L_0}{2} \\ 1 - \frac{\delta}{2R_0} \left(\cos \frac{2\pi}{L_0} \left(\frac{z - d}{2} \right) \right) & d + \frac{L_0}{2} < z \leq d + L_0 \\ 1 & \text{otherwise} \end{cases} \quad (2.1)$$

The physical model of the problem is depicted in Fig. 1. It is assumed that fluid is flowing in the z-direction. Also, R(z), R₀, d, L₀ and δ are the radius of the artery in the obstructed region, radius of the normal artery, and location, length and height of stenosis, respectively.

The flow of the fluid is modelled by making the following assumptions:

- An unsteady, incompressible, viscous electrical

conducting MHD fluid with viscous dissipation, Joule heating, Hall effect and thermal radiation is under consideration.

- The flow is assumed to be independent of θ direction due to axi-symmetry condition of the artery.
- The magnetic Reynold number is considered very small ($Re \ll 1$) so that the induced magnetic field can be neglected as compared to the applied magnetic field.
- We assumed the blood to be a Newtonian fluid flowing through the composite stenosis.

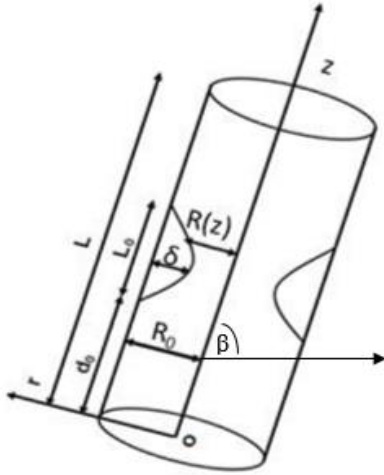


Fig.1. Schematic diagram of an inclined artery

The governing equations for the considered mathematical model with appropriate assumptions can be written as follows:

Continuity equation:

$$\frac{1}{r} \frac{\partial(rv)}{\partial r} + \frac{\partial u}{\partial z} = 0 \quad (2.2)$$

Momentum equation (r-direction):

$$\rho_f \left(v \frac{\partial v}{\partial r} + u \frac{\partial v}{\partial z} \right) = -\frac{\partial p}{\partial r} - \left[\frac{1}{r} \frac{\partial(r\tau_{rr})}{\partial r} + \frac{\partial \tau_{zr}}{\partial z} + \frac{\tau_{\theta\theta}}{r} \right] - \frac{\sigma \tilde{B}^2}{1+Be^2} (v + Be u) \quad (2.3)$$

Momentum equation (z-direction):

$$\rho_f \left(v \frac{\partial u}{\partial r} + u \frac{\partial u}{\partial z} \right) = -\frac{\partial p}{\partial z} - \left[\frac{1}{r} \frac{\partial(r\tau_{rz})}{\partial r} + \frac{\partial \tau_{zz}}{\partial z} \right] - \mu(T) \frac{u}{k_1} + \rho_f g \cos \beta \alpha_T (T - T_0) + \rho_f g \cos \beta \alpha_c (C - C_0) + \frac{\mu(r)u}{k_1} - \frac{\sigma \tilde{B}^2}{1+Be^2} (u + Be v) \quad (2.4)$$

Energy equation:

$$\begin{aligned} (\rho C_p)_f \left(v \frac{\partial T}{\partial r} + u \frac{\partial T}{\partial z} \right) &= k_T \left[\frac{\partial^2 T}{\partial r^2} + \frac{1}{r} \frac{\partial T}{\partial r} + \frac{\partial^2 T}{\partial z^2} \right] - \frac{1}{r} \frac{\partial(rq_r)}{\partial r} \\ &+ \left\{ \frac{\sigma \tilde{B}^2}{1+Be^2} (u^2 + v^2) \right\} + \mu(r) \left(\frac{\partial u}{\partial r} \right)^2 \end{aligned} \quad (2.5)$$

Concentration equation:

$$\left(v \frac{\partial C}{\partial r} + u \frac{\partial C}{\partial z} \right) = D_m \left[\frac{\partial^2 C}{\partial r^2} + \frac{1}{r} \frac{\partial C}{\partial r} + \frac{\partial^2 C}{\partial z^2} \right] - K_r (-C_0) \quad (2.6)$$

Corresponding boundary conditions are as follows:

$$\frac{\partial u}{\partial r} = 0, \quad \frac{\partial T}{\partial r} = 0, \quad \frac{\partial C}{\partial r} = 0 \quad (2.7)$$

at $r = R(z)/R_0$

$$u = 0, \quad T = T_0, \quad C = C_0 \quad (2.8)$$

The radioactive heat flux is defined as follows:

$$q_r = \frac{-4\sigma_s}{3k_e} \frac{\partial T^4}{\partial r}$$

where k_e is the absorption coefficient and σ_s is the Stefan-Boltzmann constant.

For realistic behaviour, viscosity of blood is considered a variable (a function of radius), and $\tilde{\mu}(r)$ is defined by Einstein formula [53],

$$\tilde{\mu}(r) = \mu_0 [1 + \tilde{\lambda} h(r)]$$

where $\tilde{\lambda}$ is a constant (2.5 for blood) and $h(r)$ is for hematocrit, which is defined by Lih [54],

$$h(r) = H \left[1 - \left(\frac{r}{R_0} \right)^m \right]$$

H is the hematocrit at the centre and $m (\geq 2)$ determines the shape of velocity profile of the blood.

The components of the Hall parameter [37] are as follows:

$$J_x = \frac{\tilde{B}\sigma}{1+Be^2} (uBe - v), \quad J_z = \frac{\tilde{B}\sigma}{1+Be^2} (u + vBe),$$

where B is the magnetic induction vector, J_x and J_z are the current density vectors, σ the electrical conductivity, τ_e is the electrical collision time, $Be = \tau_e \omega_e$ is the Hall parameter and ω_e is the electron frequency.

Dimensionless parameters used in the equations are as follows:

$$\bar{r} = \frac{r}{R_0}, \quad \bar{p} = \frac{R_0^2}{UL_0\mu_f} p, \quad \bar{z} = \frac{z}{L_0}, \quad \bar{\mu} = \frac{\mu}{\mu_f}$$

$$\bar{R} = \frac{R}{R_0}, \quad K_1 = \frac{k_1}{R_0}, \quad R = \frac{k_e k}{4R\sigma_s T_0^3}$$

$$\bar{u} = \frac{u}{U}, \quad Br = \frac{U^2 \mu}{kT_0}, \quad M^2 = \frac{\sigma B_0^2 R_0^2}{\mu_f}, \quad \sigma = \frac{C - C_0}{C_0}$$

$$K = \frac{K_r R_0^2 \tau_0 C_0}{\alpha}, \quad Gr = \frac{g \alpha_T R_0^2 T_0 \rho_f}{U \mu_f}, \quad Pr = \frac{\mu_f c_{pf}}{k}$$

$$\bar{v} = \frac{L_0}{\delta U} v, \quad \bar{d} = \frac{d}{L_0}, \quad Cr = \frac{g \alpha_c R_0^2 C_0 \rho_f}{U \mu_f}, \quad \bar{\delta} = \frac{\delta}{R_0}$$

$$\theta = \frac{T - T_0}{T_0}, \quad \alpha = \frac{k}{(\rho C_p)_f}$$

where k_1 is the porosity parameter, Br is the Brinkman number, Gr is the Grashof number, Cr is the modified Grashof number, M is the Hartmann number, K is a reaction rate constant.

The governing equations are simplified to dimensionless forms by substituting the aforementioned dimensionless parameters and applying the additional conditions:

$$\epsilon = \frac{R_0}{L_0} \cong O(1) \text{ for the case of mild stenosis } \left(\frac{\delta}{R_0} \ll 1 \right).$$

The governing equations in non-dimensional form after dropping the dashes can be written as follows:

$$\frac{\partial p}{\partial r} = 0 \tag{2.9}$$

$$\frac{\partial p}{\partial z} = \frac{1}{r} \frac{\partial}{\partial r} \left(r \mu(r) \frac{\partial u}{\partial r} \right) - \left(\frac{\mu(r)}{K_1} \right) u + Gr \theta \cos \beta + Cr \sigma \cos \beta - u \frac{M^2}{1+Be^2} \tag{2.10}$$

$$\left(1 + \frac{4}{3R} \right) \left(\frac{1}{r} \frac{\partial}{\partial r} \left(r \frac{\partial \theta}{\partial r} \right) \right) + Br \mu(r) \left(\frac{\partial u}{\partial r} \right)^2 + \frac{M^2 u^2 Br}{1+Be^2} = 0 \tag{2.11}$$

$$\left(\frac{1}{r} \frac{\partial}{\partial r} \left(r \frac{\partial \sigma}{\partial r} \right) \right) - \sigma K = 0 \tag{2.12}$$

The dimensionless form of corresponding boundary conditions is as follows:

at $r = 0$

$$\frac{\partial u}{\partial r} = 0, \quad \frac{\partial \theta}{\partial r} = 0, \quad \frac{\partial \sigma}{\partial r} = 0 \tag{2.13}$$

at $r = R(z)$

$$u = 0, \quad \theta = 0 \quad \sigma = 0 \tag{2.14}$$

The mathematical expression of the geometry of the arterial wall in the dimensionless form is as follows:

$$R(z) = \begin{cases} 1 - 2\delta(z - d) & d < z \leq d + \frac{1}{2} \\ 1 - \frac{\delta}{2} \left(\cos 2\pi \left(\frac{z-d}{-\frac{1}{2}} \right) \right) & d + \frac{1}{2} < z \leq d + 1 \\ 1 & \text{otherwise} \end{cases} \tag{2.15}$$

The variation in viscosity as a function of radius in the dimensionless form is as follows:

$$\bar{\mu} = [1 + \tilde{\lambda} H (1 - \bar{r}^m)].$$

3. NUMERICAL SOLUTION OF THE PROBLEM

The finite difference approach with no-slip boundary condition is used to solve the nonlinear dimensionless partial differential equations. Second-order derivatives are discretised using the central difference scheme, whereas the forward difference scheme is used to discretise the first-order derivatives. Grids of size 0.025 are used to partition the blood flow zone, and at various grid positions, the governing equations are solved by increasing l in the radial direction. The tri-diagonal system of equations created by the finite difference equations found at each grid point is solved using the Thomas algorithm [55].

The discretised equations are as follows:

$$\left(\frac{\partial p}{\partial z} \right)_{i,j} = \frac{(\mu_{i,j})}{r_{i,j}} \left(\frac{u_{i+1,j} - u_{i,j}}{\Delta r} \right) + (\mu_{i,j}) \frac{u_{i+1,j} - 2u_{i,j} + u_{i-1,j}}{(\Delta r)^2} - \left(\frac{\mu_{i,j}}{K} \right) u_{i,j} + \left(\frac{u_{i+1,j} - u_{i,j}}{\Delta r} \right) \left(\frac{\mu_{i+1,j} - \mu_{i,j}}{\Delta r} \right) + Gr \cos \beta \theta_{i,j} + Cr \cos \beta \theta_{i,j} - u_{i,j} \frac{M^2}{1+Be^2} \tag{3.1}$$

$$\left(1 + \frac{4}{3R} \right) \left(\frac{1}{r_{i,j}} \frac{\partial \theta_{i+1,j} - \theta_{i,j}}{\Delta r} + \frac{\theta_{i+1,j} - 2\theta_{i,j} + \theta_{i-1,j}}{(\Delta r)^2} \right) + Br (\mu_{i,j}) \left(\frac{u_{i+1,j} - u_{i,j}}{(\Delta r)^2} \right)^2 + \frac{M^2 u_{i,j}^2 Br}{1+Be^2} = 0 \tag{3.2}$$

$$\left(\frac{1}{r_{i,j}} \frac{\partial \sigma_{i+1,j} - \sigma_{i,j}}{\Delta r} + \frac{\sigma_{i+1,j} - 2\sigma_{i,j} + \sigma_{i-1,j}}{(\Delta r)^2} \right) - K \sigma_{i,j} = 0 \tag{3.3}$$

The appropriate mesh size for the aforementioned calculation is $\Delta r = 0.025$. The procedure is carried out iteratively till the error was less than 10^{-5} . When the error is less than or equal to 10^{-5} , the iterative process will stop. To derive the velocity, temperature and concentration profiles, these equations are initially solved without considering the linked factors. The final values for velocity, temperature and concentration are then calculated by repeatedly inserting the starting values that were acquired.

4. RESULTS AND DISCUSSION

This section describes the velocity, temperature and concentration profiles along the arterial radius and discusses the effects of hematocrit, Brinkman number, Hall parameter, porosity parameter, Grashof number, chemical reaction parameter, modified Grashof number, Brownian motion and thermophoresis parameter. Graphical representations of the effects using physical interpretation are used. Calculations are made for shear stress, rate of heat transfer (in terms of Nusselt number) and rate of mass transfer coefficient (in terms of Sherwood number). The consequences of mass and heat transport have also been covered. $H = 0.1, Gr = 5, m = 2, K_1 = 2, Cr = 2, Br = 7, R = 2, k = 2, M = 0.5, Z = 0.5, d = 0.25, \delta = 0.05$ and $K = 2$ are the default values for the constants.

4.1. Velocity profile

Variations in the velocity profile with hematocrit are shown in Fig. 2. Due to the red blood cells' increased contribution to viscosity, it is shown that velocity drops as hematocrit increases.

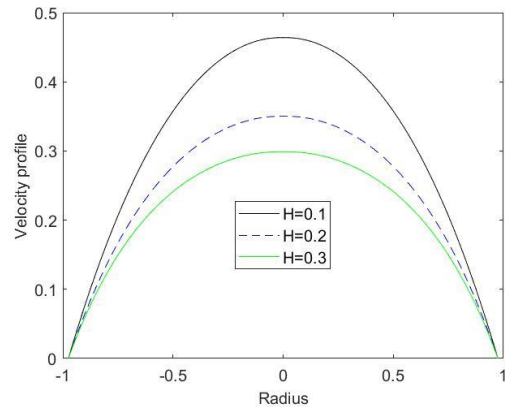


Fig. 2. Velocity profile with variation in hematocrit

In Fig. 3, the velocity is shown to decrease when the Hall parameter increased. This shows that the applied magnetic field decreases while the induced electric field increases. The effect of velocity fluctuation with the Brinkman number is shown in Figure 4. As seen in Fig. 4, it is observed that velocity rises as the Brinkman number rises. The rise in viscous dissipation, which in turn causes the velocity to rise, contributes to the rise in the Brinkman number. Since viscous dissipation provides internal energy to the flow, it strongly affects the spatial organisation of temperatures. The effect of viscous dissipation, brought about by shear stress inside the fluid layer, is responsible for the rise in the

Brinkman number. The variation in velocity with the Grashof number is shown in Fig.5, which shows that velocity increases with the Grashof number. The Grashof number signifies the ratio of thermal resistive force to viscous force. With an increase in the Grashof number, the viscous force decreases, causing the flow velocity to increase.

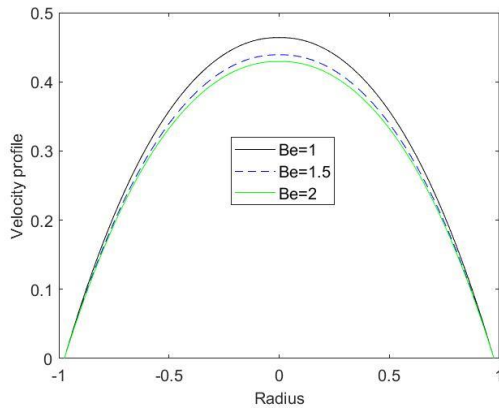


Fig. 3. Velocity profile with variation in Hall parameter

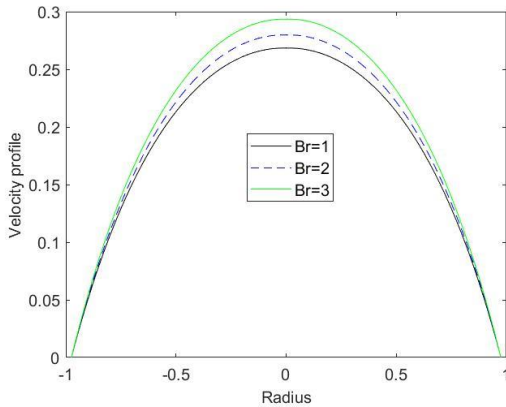


Fig. 4. Velocity profile with variation in Brinkman number

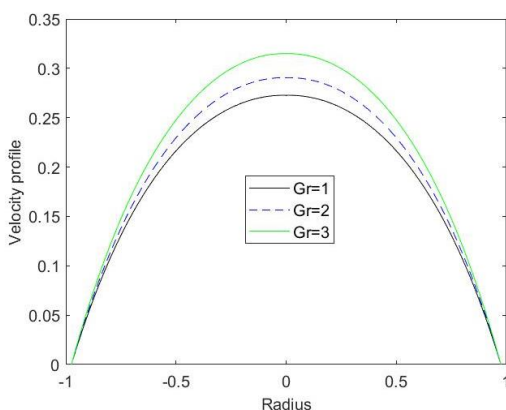


Fig. 5. Velocity profile with variation in Grashof number

The effect of the modified Grashof number on variation in velocity is shown in Fig. 6. It is noted that velocity increases with a decrease in the modified Grashof number, as viscosity decreases with an increase in velocity. Variation in velocity with porosity parameter is determined in Fig. 7. Figure 7 illustrates how porosity causes an increase in void volume, which causes velocity to increase. The thickness of the momentum boundary layer

enhances as the parameter K_1 rises. When the porosity of the medium increases, as measured by a bigger value of K_1 , the fluid gets more spacious and thus, enhance the fluid velocity. Figure 8 illustrates how velocity varies with the angle of inclination. According to Fig. 8, velocity decreases as the angle of inclination increases. Thermal diffusion causes this change in velocity profile, which lessens the impact of buoyancy on the fluid.

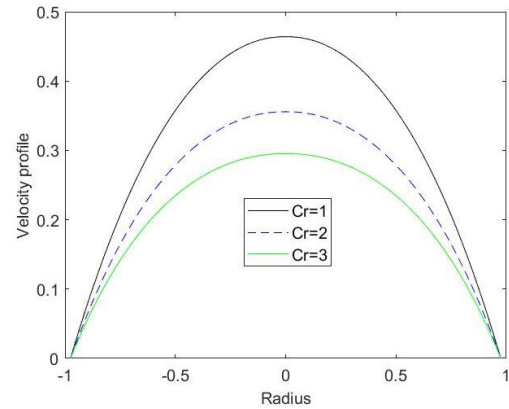


Fig. 6. Velocity profile with variation in modified Grashof number

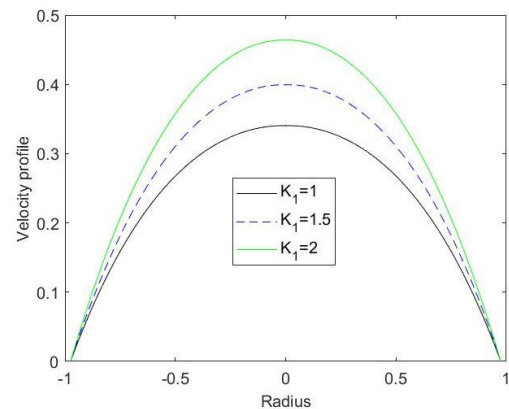


Fig. 7. Velocity profile with variation in porosity parameter

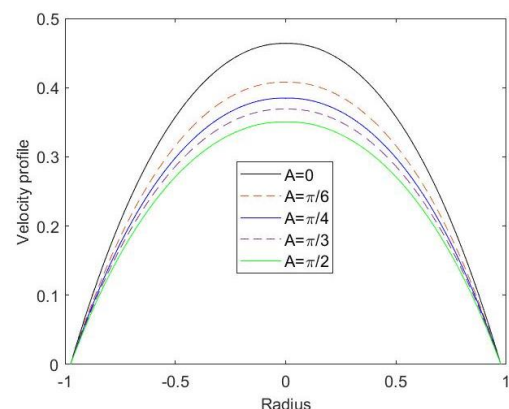


Fig. 8. Velocity profile with variation in angle of inclination

4.2. Temperature profile

Figure 9 illustrates how temperature changes in relation to hematocrit. Due to an increase in viscosity, it is evident that temperature drops as hematocrit increases. The impact of the Hall

parameter on the temperature profile is shown in Fig. 10. In Fig. 10, it is seen that temperature drops as the Hall parameter rises. Physically, the temperature falls as the velocity lowers with the Lorentz force and viscous dissipation reduces. This trend is also found in a previous study [56].

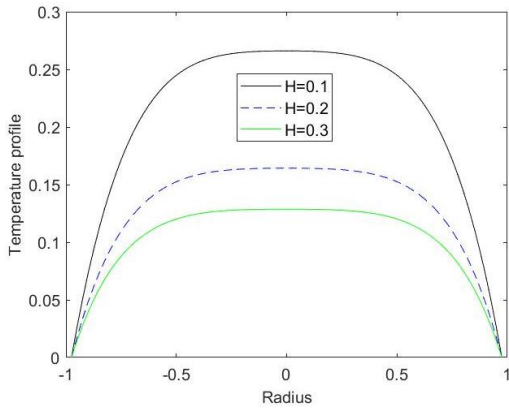


Fig. 9. Temperature profile with variation in hematocrit

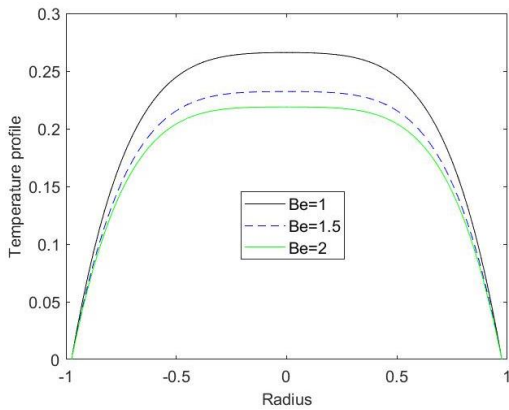


Fig. 10. Temperature profile with variation in Hall parameter

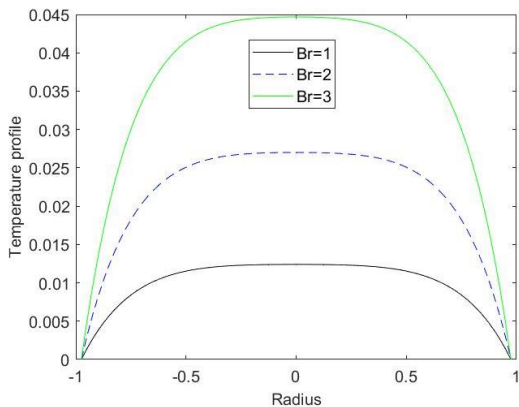


Fig. 11. Temperature profile with variation in Brinkman number

Fig. 11 shows the relationship between temperature variation and the Brinkman number. Due to an increase in viscous dissipation, temperature rises as the Brinkman number rises.

In Fig. 12, the temperature rises as the amount of heat from radiation increases. The fluid produces heat, which thickens the thermal boundary layer as the radiation parameter rises. Thus, fluid temperature increases with an increase in R . A possible explanation for the rising trend in the temperature profile is the

generation of additional thermal energy. So, this shows that the radiation parameter R is essential in the process of modifying the temperature profile. The effect of inclination angle on the temperature profile is shown in Fig.13. Temperature decreases with an increase in the angle of inclination, as observed in Fig.13.

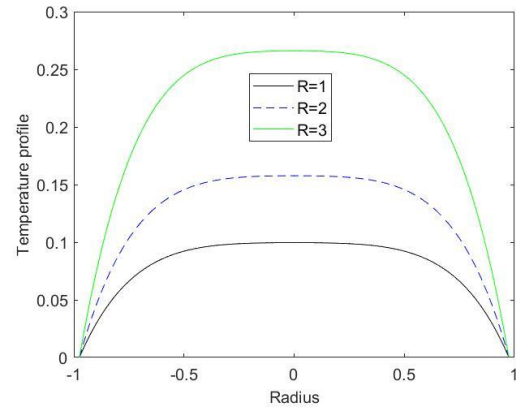


Fig. 12. Temperature profile with variation in radiation parameter

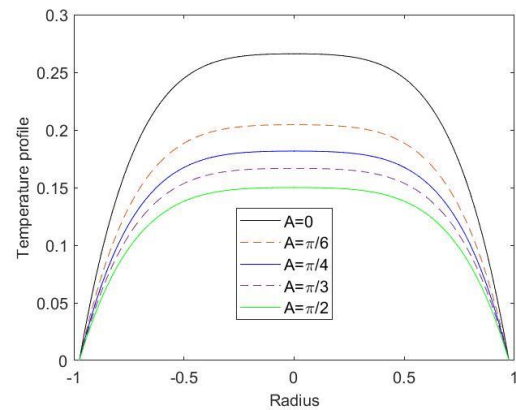


Fig. 13. Temperature profile with variation in angle of inclination

4.3. Concentration profile

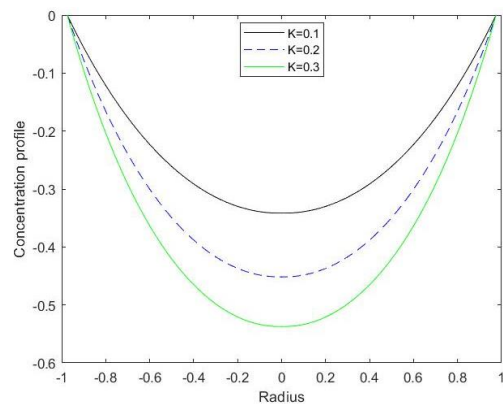


Fig. 14. Concentration profile with variation in chemical reaction parameter

Variation in concentration with chemical reaction parameter is depicted in Fig. 14. As noticed in Fig. 14, concentration rises as

the chemical reaction parameter decreases due to a drop in temperature. The rise in solute molecules that results from an increase in the chemical reaction layer parameter reduces the thickness of the concentration boundary layer.

4.4. Shear stress vs stenosis height

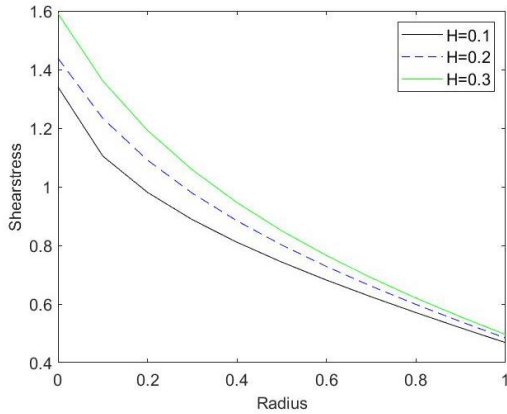


Fig. 15. Shear stress profile with variation in hematocrit

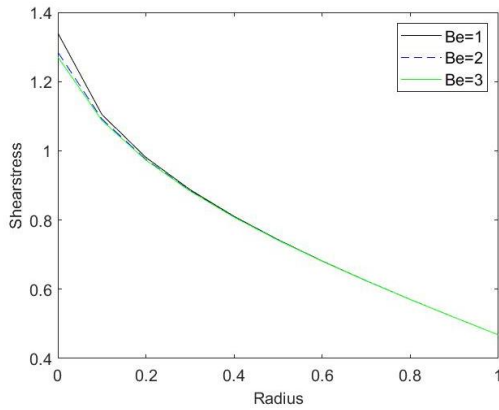


Fig. 16. Shear stress profile with variation in Hall parameter

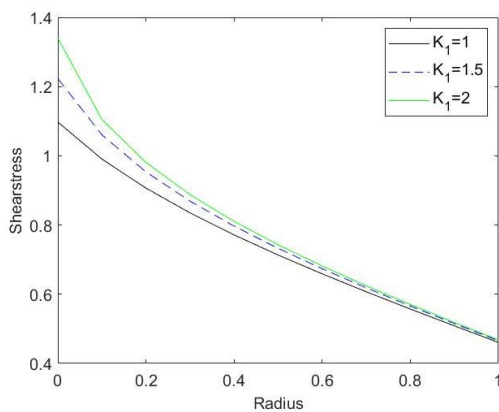


Fig. 17. Shear stress profile with variation in porosity parameter

Fig.15 displays the effect of hematocrit on shear stress. It is noted the figure that as viscosity rises, there is an increase in shear stress together with a rise in hematocrit. With an increase in stenosis height, shear stress reduces. According to Fig. 16, shear stress reduces as the Hall parameter rises. Due to the increase in velocity in Fig. 17, shear stress increases with the porosity parameter. Fig. 18 shows the variation in shear stress with the

angle of inclination. As seen in the figure, shear stress reduces as the angle of inclination increases.

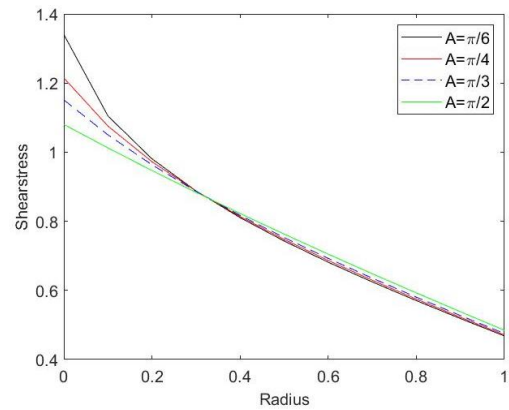


Fig. 18. Shear stress profile with variation in angle of inclination

4.5. Nusselt number vs stenosis height

Fig. 19 shows the variation in the Nusselt number with hematocrit parameter. The Nusselt number decreases with an increase in hematocrit, as shown in the figure. This indicates that with the rise in hematocrit, conductive heat transfer increases. Variation in the Nusselt number with Hall parameter is represented in Fig. 20. The Nusselt number falls as Hall parameter increases, indicating that heat transfer decreases as electromagnetic force increases.

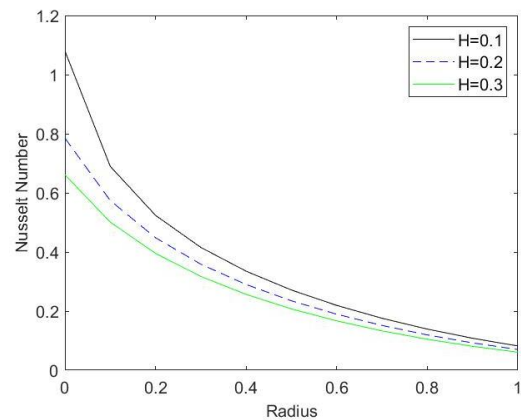


Fig.19. Nusselt number profile with variation in haematocrit

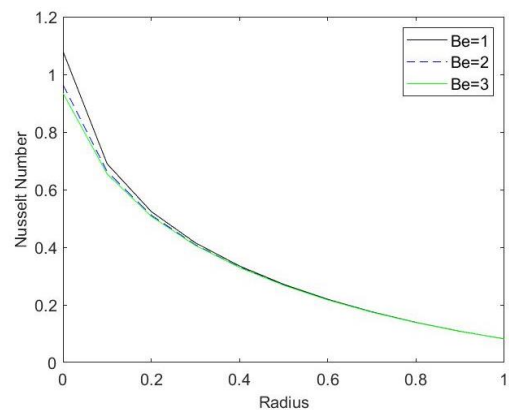


Fig. 20. Nusselt number profile with variation in Hall parameter

Fig. 21 shows a variation in the Nusselt number with the Brinkman number. According to Fig. 21, the Nusselt number rises when Brinkman increases, as also observed in a previous study [57]. In Fig. 22, it is noted that the Nusselt number rises when the radiation parameter rises because of an increase in heat transfer at higher temperatures. A similar trend can be observed in the study by AlBaidani et al. [58]. Figure 23 shows how the Nusselt number varies with the angle of inclination. In Fig. 23, it can be seen that the Nusselt number drops as the angle of inclination increases.

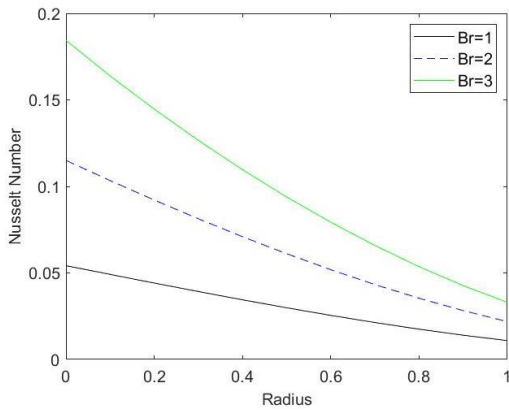


Fig. 21. Nusselt number profile with variation in Brinkman number

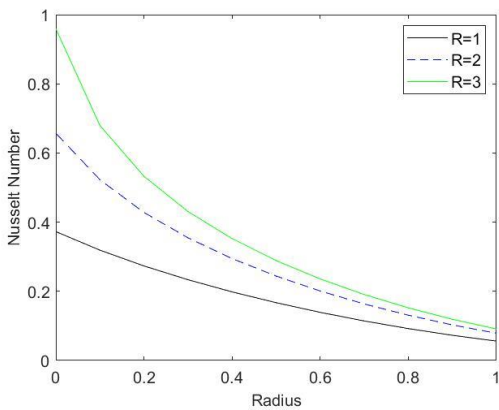


Fig. 22. Nusselt number profile with variation in radiation parameter

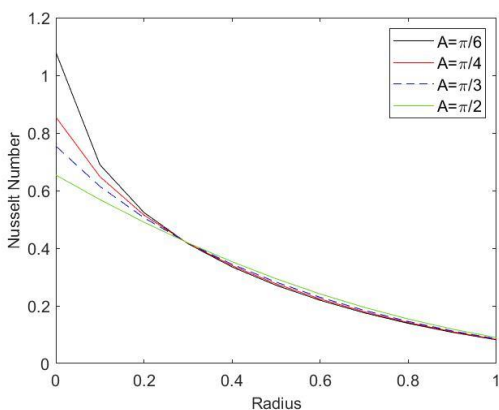


Fig. 23. Nusselt number profile with variation in angle of inclination

4.6. Variation in sherwood number

Fig. 24 displays the Sherwood number variation with respect to the chemical reaction parameter. Until a stenosis height of 0.1, it is seen that the Sherwood number drops with an increase in chemical reaction parameter; after that, a reverse tendency is seen, which is also noted in a previous study [59].

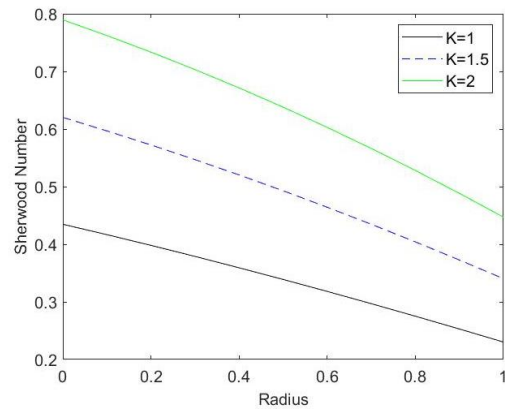


Fig. 24. Variation in Sherwood number profile with variation in chemical reaction parameter

5. CONCLUSION

The hemodynamic properties of blood flow are examined in the current study in the presence of the Hall effect. Using the finite difference method, the mathematical blood flow model through composite stenosis is analysed. The flow is subjected to radiation, and copper-suspended nanofluid has been considered. Due to the presence of haemoglobin, white blood cells, platelets, etc., the blood is not homogeneous; as a result, its viscosity varies. Consideration has been given to the Einstein viscosity model to investigate the effects of altering viscosity. The current study provides insights into the non-surgical management of stenosis and other defects while minimising post-operative complications. Key findings of the analysis are as follows:

As the Hartman number increases, the velocity drops. This is as a result of the Lorentz force that the applied magnetic field has generated. Blood flow in the arteries is resisted by the Lorentz force.

The velocity drops as the Hall parameter rises, indicating a rise in the induced electric field brought on by the applied magnetic field.

There is an increase in viscous dissipation near the boundary, which leads to an increase in velocity, due to the Brinkman number effect on velocity.

As the Hall parameter increases, the temperature drops. This is brought on by a decline in velocity, which also results in a decline in viscous dissipation.

As the Hartman number rises, the temperature falls, suggesting that the viscous force is reduced as electromagnetic forces rise.

As the Hall parameter increases due to a reduction in velocity, the shear stress decreases.

As viscous dissipation rises, shear stress rises with the Brinkman number.

With an increase in conductive heat transfer with viscous dissipation, the Nusselt number rises with the Brinkman number.

Nomenclature:

- u – Velocity in the z-direction
- v - Velocity in the r-direction
- $R(z)$ - Radius of the artery in the obstructed region
- R_0 - radius of the normal artery
- ρ_f - Effective density of the nanofluid
- α_T - Coefficient of volume expansion with temperature
- α_c - Volumetric coefficient of expansion with concentration
- C_{pf} - Specific heat of the fluid at constant pressure
- σ - Electrical conductivity
- T_m - Mean fluid temperature
- D_m - Coefficient of mass diffusivity
- K_T - Thermal diffusion ratio
- k_T - Thermal conductivity of the fluid
- μ - Viscosity
- Pr - Prandtl number
- Ec - Eckert number
- Sr - Soret number
- Sc - Schmidt number
- ω – Viscosity parameter
- Gr - Grashof number
- Cr - local concentration number
- Df - Dufour number
- Br – Brinkman number

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