



# Numerical Simulation of Mucus Clearance inside Lung Airways

J. Kori<sup>†</sup> and Pratibha

*Department of Mathematics, Indian Institute of Technology Roorkee, Roorkee, Uttarakhand, 247667, India*

<sup>†</sup> *Corresponding Author Email: [jyotikorii@gmail.com](mailto:jyotikorii@gmail.com), [jotikdma@iitr.ac.in](mailto:jotikdma@iitr.ac.in)*

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## ABSTRACT

Airway mucus is difficult to clear and to improve lung function clearance of mucus is necessary. The deep coughing, chest physiotherapy, high frequency chest wall oscillation etc. are some of the best methods to clear excessive mucus from lung airways. In this article we analysed the behavior of fluid flow between parallel walls, where both walls are porous and the flow is induced by the oscillation of these walls and pressure gradient; which is applicable for clearance of mucus from lung airways. Generalized Couette flow is applicable to model the oscillation of parallel walls, however the laminar flow of viscous fluid is taken under consideration. The generalized Navier-Stokes equations are applied to make various hypotheses and finite difference scheme is used to solve the problem numerically. Effect of wall oscillation, wall porosity, pressure due to porous media on mucus clearance and particle aspect ratio on the deposition of nonspherical nanoparticles are analysed graphically after simulating the problem on MATLAB R2013a by user defined code. Simulation shows an excellent agreement of unsteady flow of viscous fluid at large values of time and significant correlation between pressure gradient and porosity of walls, frequency of wall oscillation and their impact on mucus clearance are obtained. In addition it is observed that fluid and particle velocity are increased with the enhancement of media porosity, breathing frequency and aspect ratio. The aim of this paper is to study the influence of wall movement, wall porosity, pressure on wall, wall oscillating frequency on the clearance of mucus from lung airways.

**Keywords:** Cilia movement; Couette flow; Mathematical modeling; Mucus clearance; Porosity; Particle shape.

## NOMENCLATURE

$d$	diameter of spherical particle of unit density	$t$	time
$D_a$	Darcy number	$u_x$	air velocity radial direction
$d_i$	inner diameter of alveolus	$u_y$	air velocity axial direction
$d_o$	outer diameter of alveolus	$v_x$	particle velocity radial direction
$F_s$	Forchheimer number	$v_y$	particle velocity axial direction
$g_x$	axial component of gravity	$\rho_a$	density of air
$g_y$	radial component of gravity	$\rho_p$	density of particles
$k_f$	Stokes drag force	$\nu$	kinematic viscosity
$P_l$	particle load		

## 1. INTRODUCTION

There are two main natural mucus draining methods in the bronchial tree, first, mucociliary clearance and second is cough. The mucus layer coats the interior parts of human respiratory ducts (Fulford and Blake (1986)) and protects the airways against extrinsic attacks. It moves upward toward the oropharyngeal bifurcation after capturing the aerocontaminants, with the motion of the cilia (Lai *et al.* (2009), King (2006)). Cilia are

hairlike objects on the inner surface of airways, which vibrate to defend the walls against contaminated particles in the inhaled air. When we sleep, clearance efficiency is diminished and it is enhanced during exercise. Consequently, ventilation rate plays an important role on mucus evacuation. So, there are two main selected phenomena to understand the structure of mucus distribution in the lungs (i) how it moves forward efficiently toward the trachea, and (ii) what is the effect of movement of this layer over air flow inside lung.

Mucus is a viscous fluid and due to propulsion caused by coughing both walls are oscillate in their own plane and cilia move in downward and up-ward directions; as a result, mucus and trapped particles move toward the trachea. This phenomena can be understood by unsteady couette flow. The couette flow is an ideal flow usually used to model shear-driven flows experienced in small motors, small channels and different small fluid systems. We assume cilia as a porous matrix and flow of mucus over it as a moving wall. The flow is induced by the movement of both walls and the pressure gradient. Generally, for very slow flow which is dominated by viscous effect, the Darcy model has been the basic approach employed. However, fluid transfer through high pressure, which can arise in various capillary networks is dominated by inertial drag effects. An elegant and robust methodology for this is the extension of the Darcy low Reynolds number drag force model to the Darcy-Forchheimer nonlinear model which includes a supplementary quadratic drag force term.

Additionally, inhaled aerosol mechanics is influenced by lower range Reynolds number, deformations of septal walls, and time dependent airflow patterns leading to irreversible kinematics within alveolar cavities during cyclic breathing (Haber *et al.* (2003)). Particles with diameter from 10 nm to 200 nm are ideal size to deposit in deep lung airways (Shah (2009)), while particle shape allows long skinny particles to orient with the tiniest diameter within the direction of air flow (align along their long axis) permitting them to deposit deep within the lung (Timbrell (1982)). For example carbon nanotubes (He *et al.* (2013)), nanofibers, nanowire, nanorod are needle-shaped particles which are presently used in various cosmetic products, may enter through skin in respiratory system (Ikegami *et al.* (2002)).

There are a few studies (Chang *et al.* (1988), van Vliet *et al.* (2005), Mazumder and Das (1992), Jiang and Grotberg (1993)), which reported that tube wall oscillation may enhance displacement of mucus during coughing. Some other studies (Johnson *et al.* (1991), Halpern and Grotberg (1993), Otis *et al.* (1993)) are applied couette flow inside lung because lung comprised a network of bifurcating airway tubes which are coated with a thin viscous film. Moreover, an analytical expression of couette flow and heat transfer through a composite system was presented in Kuznetsov (1998). Jones *et al.* (1995) studied isotope mucociliary clearance rates in Cystic Fibrosis subjects and found that the effective clearance occurred by increasing frequency of 10-15 Hz because at this frequency oscillated flow is highest. Additionally, Schlichting and Gersten (2003) presented a result of Navier-Stokes equations for the flow between two parallel plates without suction. A case for changeable pressure in the direction of flow of the system

created eventually by Rouleau and Osterle (1995) and a study of the three dimensional flow and heat transfer along a flat plate by applying periodic suction done by Gersten and Gross (1974).

However, there were not many studies considering flow oscillation and particle transportation together through porous media. So the aim of this study is to fill this gap by using media porosity, wall oscillation, and aspect ratio of inhaled nanoparticles to understand the mechanism of airway clearance, where the inner walls of the lung tube from the mouth to the alveoli are coated with thin mucus layer. Flow of viscous fluid is forced by the oscillation of walls and sinusoidal pressure gradient through variable porous media. Generalized couette flow is applied to understand the mechanism of mucus flow and Navier Stokes equations are used to model the flow field. In addition, Newton's second law is used for particle trajectory. Finite difference numerical scheme is used to solve the problem and all the results are shown graphically after performing computation work on MATLAB.

## 2. MATHEMATICAL MODEL

We suppose that the airways are subjected to oscillation due to periodic breathing or due to coughing and a sinusoidal pressure is applied on both the boundaries due to surrounding forces and porous media, which is applicable for propulsion of mucus over the cilia. In addition, cilia are assumed as porous matrix which is covered by thin layer of mucus. The graphical model can be visualized in Fig. 1. Fluid flow is determined by modeling this process as generalized unsteady couette flow. Initially there is no pressure gradient so we assumed that the velocities and stresses are zero at  $t=0$ .

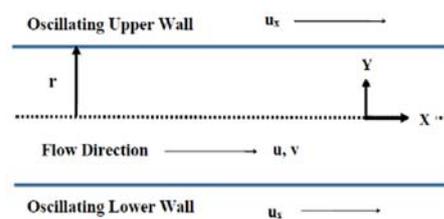


Fig. 1. Schematic Diagram for Oscillatory Walls

### 2.1 Governing Equations

Equation of continuity for air,

$$\frac{\partial \rho_a}{\partial t} + \frac{\partial (\rho_a u_x)}{\partial x} + \frac{\partial (\rho_a u_y)}{\partial y} = 0 \quad (1)$$

Equation of continuity for particle,

$$\frac{\partial \rho_p}{\partial t} + \frac{\partial (\rho_p v_x)}{\partial x} + \frac{\partial (\rho_p v_y)}{\partial y} = 0 \quad (2)$$

Equation of momentum in parallel (axial) direction,

$$\begin{aligned} & \frac{\partial u_x}{\partial t} + \frac{u_x}{\varepsilon} \frac{\partial u_x}{\partial x} + \frac{u_y}{\varepsilon} \frac{\partial u_x}{\partial y} \\ &= -\frac{\varepsilon}{\rho_a} \frac{\partial p}{\partial x} + v \left( \frac{\partial^2 u_x}{\partial x^2} + \frac{1}{x} \frac{\partial u_x}{\partial x} + \frac{\partial^2 u_x}{\partial y^2} \right) \\ &+ \left( -\frac{\varepsilon v}{K} u_x + k_f \frac{\rho_p}{\rho_a} (v_x - u_x) - \frac{\varepsilon b}{K} u_x^2 \right) \quad (3) \\ &+ g_x \left( \frac{\rho_p - \rho_a}{\rho_p} \right) \end{aligned}$$

Equation of momentum in perpendicular (radial) direction,

$$\begin{aligned} & \frac{\partial u_y}{\partial t} + \frac{u_x}{\varepsilon} \frac{\partial u_y}{\partial x} + \frac{u_y}{\varepsilon} \frac{\partial u_y}{\partial y} \\ &= -\frac{\varepsilon}{\rho_a} \frac{\partial p}{\partial y} + v \left( \frac{\partial^2 u_y}{\partial x^2} + \frac{1}{x} \frac{\partial u_y}{\partial x} + \frac{\partial^2 u_y}{\partial y^2} \right) \\ &+ \left( -\frac{\varepsilon v}{K} u_y + k_f \frac{\rho_p}{\rho_a} (v_y - u_y) - \frac{\varepsilon b}{K} u_y^2 \right) \quad (4) \\ &+ g_y \left( \frac{\rho_p - \rho_a}{\rho_p} \right) \end{aligned}$$

Where, K is the permeability, which depends on the porosity ( $\varepsilon$ ) (Khanafer *et al.* (2012)). We used porosity in keeping with Ergun (1952) empirical formula together with the variable porosity of respiratory organ as follows:

$$K = \frac{\varepsilon^3 d_p^2}{150(1 - \varepsilon)^2} \quad (5)$$

$$\varepsilon = 1 - \frac{\rho_p d_p^2}{(d_0^2 - d_i^2)} \quad (6)$$

The equation of motion for particle trajectory: In axial direction,

$$\frac{\partial v_y}{\partial t} + v_y \frac{\partial v_y}{\partial y} + v_x \frac{\partial v_x}{\partial x} = \frac{F_d}{m} \quad (7)$$

In radial direction,

$$\frac{\partial v_x}{\partial t} + v_y \frac{\partial v_x}{\partial y} + v_x \frac{\partial v_x}{\partial x} = \frac{F_{d1}}{m} \quad (8)$$

Different shape particles will make different drag forces with different particle terminal settling velocities; which might successively have an effect on the aerodynamic behavior of particles (Crowder *et al.* (2002)). A term known as particle shape factor ( $S_f$ ) (Fuchs (1965)) is employed to figure out the transport and deposition of nonspherical particles (i.e. elongated shape particles). This term describes the ratio of the drag force on the non-spherical

nanoparticles ( $F_d$  and  $F_{d1}$ ) to the corresponding drag force on the related spherical particles ( $f_d$  and  $f_{d1}$ ) with an equivalent volume by Hinds (1999). Mathematically, this relationship is expressed as below:

$$F_d = S_f f_d, \quad F_{d1} = S_f f_{d1} \quad (9)$$

Stokes drag forces on spherical particles are defined as follows:

$$\left. \begin{aligned} f_d &= k_f (u_y - v_y) \\ f_{d1} &= k_f (u_x - v_x) \end{aligned} \right\} \text{Where, } k_f = 3\pi\mu C_f d_p \quad (10)$$

Where,  $C_f$  is the correction factor for thin particles and is taken as 1.25.  $d_p$  is the diameter of nonspherical nanoparticles which depends upon the particle shape factor. Additionally, the individual particle shape factor ( $S_f$ ) is gained from the subsequent formula as follows:

$$S_f = \frac{1}{3} \left( \frac{2}{S_{\parallel}} + \frac{1}{S_{\perp}} \right) \quad (11)$$

Computation of the particle shape factor does not solely depends on particle shape but is also influenced by the coordination of a particle relative to the direction of air flow. Hence, nonspherical nanoparticle might adopt most popular coordinations within the airflow (Hinds (1999)). A straight-forward empirical idea for the dependency of  $S_f$  on particle coordination was popularized by Su and Cheng (2006). The authors described  $S_{\perp}$  for those particles that are adjusted with their long axes (up-right to the air stream), however  $S_{\parallel}$  for those whose long axes are aligned parallel to the air stream. From a mathematical point of view,  $S_{\perp}$  and  $S_{\parallel}$  is also determined by the subsequent equations:

$$\left. \begin{aligned} S_{\perp} &= \frac{\frac{8}{3}(\beta^2 - 1)\beta^{-\frac{1}{3}}}{\left( \frac{2\beta^2 - 3}{(\beta^2 - 1)^{\frac{1}{2}}} \right) \ln \left( \beta + (\beta^2 - 1)^{\frac{1}{2}} \right) + \beta} \\ S_{\parallel} &= \frac{\frac{4}{3}(\beta^2 - 1)\beta^{-\frac{1}{3}}}{\left( \frac{2\beta^2 - 1}{(\beta^2 - 1)^{\frac{1}{2}}} \right) \ln \left( \beta + (\beta^2 - 1)^{\frac{1}{2}} \right) - \beta} \end{aligned} \right\} \beta > 1 \quad (12)$$

where,  $\beta$  denotes the aspect ratio, which is the quantitative ratio of particle length to particle width, being  $\beta \gg 1$  for long nonspherical particles,  $\beta \ll 1$  for extremely thin disks but for  $\beta = 0$  there will be no existence of particle, since for this condition length and shape factor become 0. In this study we take  $10 \leq \beta \leq 1000$

for elongated nanoparticles. As per various theoretical and experimental studies, transportation of nonspherical particles in-side lung considerably disagree from that per-formed by spherical particles with classic aspect in same volume. To describe this specific condition the aerodynamic diameter is taken into account (Fuchs (1965)). The mathematical formulation of the aerodynamic diameter simplifies as follows:

$$d_p = d \sqrt{\left( \frac{\rho_p}{S_f \rho_0} \right)} \quad (13)$$

Where,  $\rho_0$  is the unit density. Due to the deformation of alveolus wall and right heart pressure there is a time dependent sinusoidal pressure gradient within the alveolus, which can be outlined as follows,

$$-\frac{\partial p}{\partial y} = a_0 \sin \omega t, \quad \omega = 2\pi f \quad (14)$$

Where,  $f$  is the breathing frequency.

### 2.11 Assumptions for Couette Flow

Assuming distance between both walls is  $2r$ .

(i) For fully developed flow,

$$\frac{\partial u}{\partial x} = 0; \quad (15)$$

(ii) For unsteady generalized couette flow,

$$\left. \begin{array}{l} \frac{\partial}{\partial t} \\ u_x \\ v_x \\ \frac{\partial p}{\partial x} \end{array} \right\} \neq 0 \quad (16)$$

$$\left. \begin{array}{l} u_y \\ v_y \end{array} \right\} = 0 \quad (17)$$

### 2.12 Initial and Boundary Conditions

(i) Initial conditions at  $t=0$ ,

$$\left. \begin{array}{l} u_x \\ v_x \\ u_y \\ v_y \end{array} \right\} = 0 \quad (18)$$

(ii) Boundary conditions at  $t>0$ ,

(a) Oscillation of top wall, when  $y=r$ :

$$u_x = u_0(1 + \cos(2\pi ft)) \quad (19)$$

(b) Oscillation of bottom wall, when  $y=-r$ :

$$u_x = u_0(1 + \cos(2\pi ft)) \quad (20)$$

## 3. METHODOLOGY

### 3.1 Transformation of the Governing Equations

Introducing the subsequent nondimensional quantities.

$$\begin{aligned} x^* &= \frac{x}{r}, y^* = \frac{y}{r}, p^* = \frac{Pr^2}{\rho_a v^2}, t^* = \frac{tv}{r^2}, u^* = \frac{ur}{v}, \\ v^* &= \frac{vr}{v}, F_s = \frac{b}{r}, P_l = \frac{\rho_p}{\rho_a}, Da = \frac{K}{r^2}, S_k = \frac{kr^2}{v}. \end{aligned} \quad (21)$$

We applied above nondimensional quantities in Eqs. (1)-(14) and got the following equations after dropping the asterisks (\*):

$$\frac{\partial u_x}{\partial x} = 0 \quad (22)$$

$$\frac{\partial v_x}{\partial x} = 0 \quad (23)$$

Momentum in axial direction,

$$\begin{aligned} \frac{\partial u_x}{\partial t} &= -\varepsilon \frac{\partial P}{\partial x} + \frac{\partial^2 u_x}{\partial y^2} \\ + S_k P_l (v_x - u_x) &- \frac{\varepsilon}{Da} - \varepsilon \frac{F_s}{Da} u_x^2 \end{aligned} \quad (24)$$

Momentum in radial direction,

$$\frac{\partial P}{\partial y} = \frac{1}{\varepsilon} \frac{r^3}{v^2} g_y \left( \frac{\rho_p - \rho_a}{\rho_p} \right) \quad (25)$$

Particle trajectory in parallel (axial) direction,

$$\frac{\partial v_x}{\partial t} = S_f S_k \frac{(u_x - v_x)}{m} \quad (26)$$

Particle trajectory in perpendicular (radial) direction,

$$u_x = v_x \quad (27)$$

### 3.2 Numerical Method

Finite difference scheme is a basic and less tedious technique for a regular geometry. Therefore, the finite difference scheme is employed to solve the governing equations with central difference ap-proximation for all the spatial derivatives and for-ward difference approximation for time derivatives (Smith (1985)). To calculate the velocity of air ( $u_y$ ), ( $u_x$ ) and nonspherical nanoparticles ( $v_y$ ), ( $v_x$ ) a code is developed on MATLAB R2013a by setting the grid space as follows:

$$\begin{aligned} x_i &= i.\Delta x; \quad i = 0, 1, 2, 3, \dots, M, \quad r_N = 1.0 \\ y_j &= j.\Delta y; \quad j = 0, 1, 2, 3, \dots, N, \\ t_k &= (k-1).\Delta t; \quad k = 1, 2, 3, \dots, O \end{aligned} \quad (28)$$

The discretization of axial velocity  $u(x,y,t)$  is written as  $u_x(x_i, y_j, t_k)$  or  $((u_x)_{i,j})^k$  and also  $u_y, v_x, v_y$

can be written similarly. The mesh dependency of the solution was additionally inspected for various grid sizes, i.e. 10x10, 15x15, 20x20, 30x30, and 40x40, in the axial and radial directions to figure out the flow field, but we found that the results remain consistent when the grid size is set 20x20 and above. So, the time step and grid space chose  $\Delta t = 0.001$ ,  $\Delta x = 0.05$  and  $\Delta y = 0.05$  respectively. In addition, for computation following stability criteria is used.

$$\max \left[ \frac{\Delta t}{\Delta x^2} \right] \leq 0.5 \quad (29)$$

Results are appeared to converge with the accuracy of order of  $10^{-3}$ .

#### 4. RESULTS AND DISCUSSION

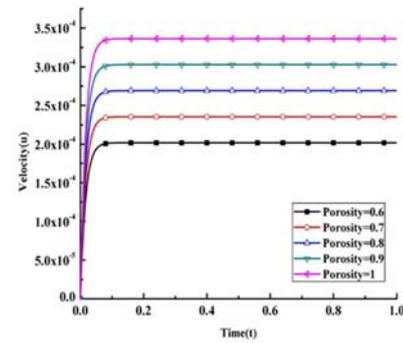
In this article we modeled a horizontal channel whose both boundary walls are porous and subjected to oscillate along their own axis. The walls are  $2r$  distance apart from each other with an incompressible unsteady laminar fluid flow between them. Generalized couette flow, illustratively shown in Fig. 1, is a simplest close guess for periodic shear-driven flow met in the upper airways due to mucus overlay. The influence of the con-trolling limits on the flow velocity (for air,  $u$  and for particle,  $v$ ) and pressure gradient ( $p$ ) with respect to time ( $t$ ) for different values of aspect ratio  $10 \leq \beta \leq 1000$ , porosity  $0.6 \leq \epsilon \leq 1$ , frequency limit  $0.2 \leq f \leq 1.2$  and time ( $t$ ) is analysed in Figs. 2-6 (from Eqs. (22)-(27)), to observe the impact of dimensionless units. We use the following numerical values (Saini *et al.* (2017), Weibel (1964)) to solve the problem computationally.

$$\begin{aligned} v &= 1.71 * 10^{-5} m^2 / s, S_f = 1.54, \epsilon = 0.6, r = 0.5 \mu m, \\ m &= 2 * 10^{-4} Kg / l, d = 50 nm, f_p \leq 1.2 Hz, F_s = 1, \\ \rho_a &= 1.145, \rho_p = 2.504 * 10^{10}, a_2 = 0.25 Kg / m^2 s^2. \end{aligned}$$

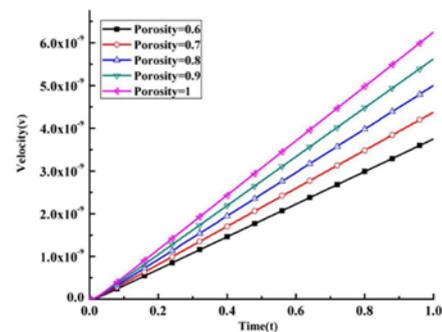
##### 4.1 Effect of Porosity on the Clearance of Mucus

Figures 2a and 2b depict the behavior of transient velocity of air ( $u$ ) and particle ( $v$ ) for different level of porosity ( $0.6 \leq \epsilon \leq 1$ ) at  $\beta=10$ ,  $F_s=1$  and  $f=1.2$  with respect to  $t$ . It can be seen from Fig. 2a velocity of air is low at  $\epsilon=0.6$  and it increases when we increase  $\epsilon$  from 0.6 to 1.0 and attains maximum velocity at  $\epsilon=1$ . Further, along with wall due to oscillation velocity of air increases with the increment in  $\epsilon$  (for thin mucus layer) via  $t$ , and when we go far from wall, velocity values reaches their steady state values after  $t=0.1$ . Additionally, velocity of particle is also increased (as shown in Fig. 2b) with the increment in  $\epsilon$  from 0.6 to 1 via  $t$  and attains maximum velocity at  $\epsilon=1$ . From these figures, it is clear that both velocities (for air,  $u$  and for particle,  $v$ ) are affected by the increment in  $\epsilon$  and it is interesting to observe that up to a particular time velocity of air increases and then time

required to attains a steady state is unbiased with respect to the value of porosity.



(a)



(b)

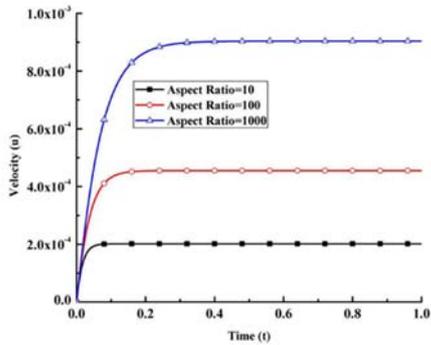
**Fig. 2. Variation in (a) air velocity ( $u$ ) (b) particle velocity ( $v$ ), with respect to porosity ( $0.6 \leq \epsilon \leq 1$ )**

It can be correlated physically, as the void size or porosity increases breathing capacity increases which causes increment in air velocity. In either case, free flow of fluid is allowed a rise within the velocity of the fluid, which give propulsion and useful to clear thin layer of mucus.

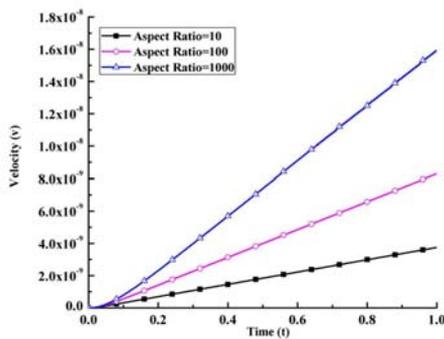
##### 4.2 Effect of Aspect Ratio on Particle Deposition

Figures 3a and 3b show the dimensional distribution of velocity at different level of aspect ratio ( $10 \leq \beta \leq 1000$ ) at  $\epsilon=0.60$ ,  $F_s=1$  and  $f=1.2$  with respect to  $t$ . It is evident in Fig. 3a that velocity of air is low at  $\beta=10$  and it increases when we increase particle  $\beta$  from 10 to 1000 and attains maximum velocity at  $\beta=1000$ . Velocity of air increases with the increment in  $\beta$  via  $t$ , and eventually reaches its steady state values after  $t=0.2$ . Here, it is interesting to note that the steady state of the air velocity delayed via  $t$  as value of  $\beta$  increased. While in Fig. 3b, velocity of particle increases with the increment in  $\beta$  from 10 to 1000 via  $t$  monotonically and attains maximum velocity at  $\beta=1000$ . It comes physical because the increment in air and particle velocity are caused by an enhancement in the aspect ratio of the particles. This physiological phenomenon is explained by the fact that particles are oriented along the air

movement and flow along the stream in downward direction as time in-creases, which means particles with low aspect ratio are deposited in former airways while particles with high aspect ratio have tendency to go deep inside the lung airways with air stream.



(a)



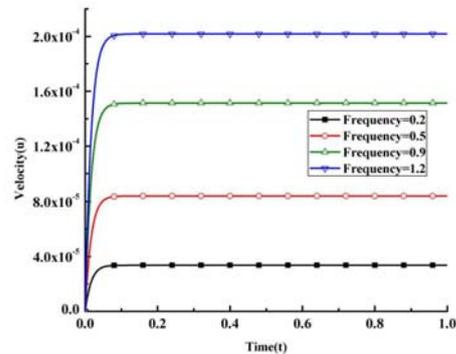
(b)

**Fig. 3. Variation in (a) air velocity (u) (b) particle velocity (v) with respect to aspect ratio ( $10 \leq \beta \leq 1000$ )**

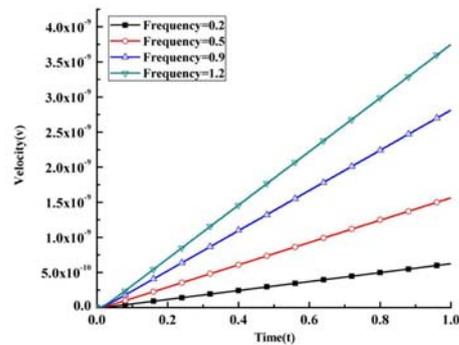
### 4.3 Effect of Frequency on Wall Oscillation and Fluid Velocity

In Figs. 4a and 4b, we can see the impact of frequency ( $0.2 \leq f \leq 1.2$ ) on fluid velocity (on air,  $u$  and on particle,  $v$ ) at  $\epsilon=0.60$ ,  $F_s=1$  and  $\beta=10$  with respect to  $t$ . These figures show that the changes in fluid velocity occur due to the sinusoidal oscillation of wall caused by different frequency of breathing. It is observed that the magnitude of fluid velocity within the channel relies on the frequency of oscillation ( $0.2 \leq f \leq 1.2$ ). In Fig. 4a, it can be seen that due to the increment in  $f$  from velocity ( $v$ ) with respect to frequency ( $0.2 \leq f \leq 1.2$ ). 0.2 to 1.2 increased velocity of air before  $t=0.1$  and after that it becomes steady. Also, from Fig. 4b, it is observed that the velocity of particle increases gradually as  $f$  increases from 0.2 to 1.2 and attains maximum velocity at  $f=1.2$ . We can see the numerical values obtained after computation in Table 1, which depicts the transient velocity for air and particle via time for different value of wall frequencies. It is observed that air velocity

increases initially, and become steady for large values of time for particular frequency, on the other hand the velocity of particle increases gradually with time.



(a)

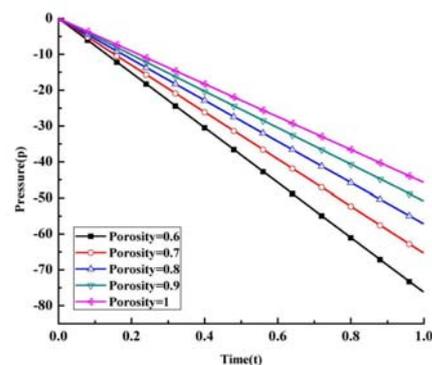


(b)

**Fig. 4. Variation in (a) air velocity (u) (b) particle velocity (v) with respect to frequency ( $0.2 \leq f \leq 1.2$ ).**

### 4.4 Effect of Porosity ( $\epsilon$ ) on Air Pressure (p)

The effect of wall porosity ( $\epsilon$ ) on air pressure (p) is shown in Fig. 5 via  $t$  at  $\beta=10$ ,  $F_s=1$ , and  $f=1.2$ . We are presenting velocity profiles for generalized couette flow due to oscillation of both walls at  $0.6 \leq \epsilon \leq 1$ . For all the cases,



**Fig. 5. Effect of porosity ( $0.6 \leq \epsilon \leq 1$ ) on air pressure (p)**

the air pressure increases by decreasing  $\epsilon=1.0$  to  $0.6$  monotonically, since for low porosity pressure gradient is very high, which is responsible to remove thin mucus layer from air-ways and may improve lung function. We can see the numerical values obtained after numerical computation in Table 2. In this table pressure (p) for different values of porosity ( $\epsilon$ ) is shown with respect to time. It is noticed that pressure is increased as time and porosity decreased. This pressure is helpful to push the mucus forward. We plotted Fig. 5 for fluid velocity with different values of  $0.6 \leq \epsilon \leq 1$  and found consequent results. Increase level of pressure can often be visible on the whole length of the wall.

#### 4.5 Comparison between Air Velocity Obtained Through Oscillatory Walls and Nonoscillatory Walls

Since lung is one of the main organ in respiration and its wall oscillates periodically during breath. Thus, we used a time dependent function to show oscillation of walls. Each wall oscillates to and fro along its axis. The effect of wall oscillation on air velocity is depicted in Fig. 6 with respect to time (t) at  $\beta=10$ ,  $F_s=1$ ,  $f=1.2$  and  $\epsilon=0.60$ . The velocity of air (see Fig. 6) is largely affected when walls are oscillating as compare to when walls are not oscillating along their axis. In addition, we found that the steady state of the air velocity is attained much earlier with nonoscillatory walls than oscillatory walls.

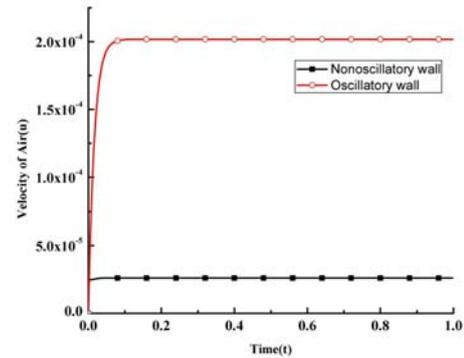
#### 5. CONCLUSIONS

A problem of two dimensional unsteady couette flow of viscous fluid through oscillatory porous walls with sinusoidal pressure gradient (i.e. generalized couette flow) is investigated.

Porous walls are partially filled with a fluid. The flow of viscous fluid in the porous medium is modeled by the Naiver Stokes equation and

solutions for the velocity profiles and the particle trajectory by newton second law with a set of initial and boundary conditions. Numerical pressure gradient in the axial direction are obtained graphically. The dependency of the parameters involved in the flow is discussed. The key findings of the present analysis are listed below.

- (1) It is observed that for highly porous ( $\epsilon=1$ ) wall air and particle velocity increased, which is helpful to clear thin layer of mucus.
- (2) For small aspect ratio ( $\beta=10$ ) particles deposited in former airways while for high aspect ratio ( $\beta=1000$ ) particles have tendency to go deep inside lung with air stream.
- (3) Viscous fluid velocity is proportional to the breathing frequency.
- (4) For all the cases, the air pressure increases by decreasing media porosity  $\epsilon$  from 1 to 0.6 monotonically, which is responsible to remove mucus from airways and may improve lung function.



**Fig. 6. A comparison of air velocity (u) between oscillatory walls to nonoscillatory walls at  $\epsilon=0.6$  and  $\beta=10$**

**Table 1. Variation in velocities (u,v) via time (t) for different values of wall frequency (f)**

	f=0.2		f=0.5		f=0.9		f=1.2	
time (t)	u(10 <sup>-5</sup> )	v (10 <sup>-9</sup> )	u(10 <sup>-5</sup> )	v (10 <sup>-9</sup> )	u(10 <sup>-4</sup> )	v (10 <sup>-9</sup> )	u(10 <sup>-4</sup> )	v (10 <sup>-9</sup> )
0.1	3.97423	0.626448	9.93324	0.156576	1.78686	0.281661	2.38078	0.375287
0.2	3.97930	0.137860	9.94590	0.344570	1.78913	0.619838	2.38382	0.825869
0.3	3.97931	0.213091	9.94593	0.532602	1.78914	0.958082	2.38383	0.127654
0.4	3.97932	0.288322	9.94595	0.720634	1.78914	0.129633	2.38383	0.172721
0.5	3.97933	0.363552	9.94597	0.908666	1.78915	0.163457	2.38384	0.217789
0.6	3.97933	4.38783	9.94598	1.09670	1.78915	1.97282	2.38384	2.62856
0.7	3.97934	5.14013	9.94600	1.28473	1.78915	2.31106	2.38384	3.07923
0.8	3.97935	5.89244	9.94602	1.47276	1.78915	2.64930	2.38385	3.52990
0.9	3.97935	6.64474	9.94603	1.66079	1.78916	2.98755	2.38385	3.98058
0.998	3.97936	7.38200	9.94605	1.84507	1.78916	3.31903	2.38386	4.42223

(5) We can say, other results and comparison of oscillatory wall to nonoscillatory wall validate our assumption that during cough and high frequency breath airways are oscillating and applicable for clearance of mucus.

Results obtained in this article regarding mu-cus clearance through circular tube whose walls are porous and oscillating along their own axis, can be helpful to understand mucus evacuation, movement of mucus towards the trachea, conditions of chronic obstructive pul-monary disease (COPD), emphysema, asthma, chronic bronchitis etc.. Moreover, the concept of generalized couette flow can be applied on other body parts where oscillation occur i.e. flow of blood through vein inside heart, flow through anal etc. and all the natural and real life phenomena where both walls are moving or oscillating along their own plane. Although, the

present study is limited with upper air-ways. It is worth extending the study to lower airways or whole lung generations which may lead to a more general solution. Additionally, we can take other cases such as the movement of only one wall, when there is no pressure gradient etc. That may constitute a further work.

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**Table 2. Variation in pressure (p) via time (t) for different values of wall porosity ( $\epsilon$ )**

	$\epsilon=0.6$	$\epsilon=0.7$	$\epsilon=0.8$	$\epsilon=0.9$	$\epsilon=0.9$
t	p	p	p	p	p
0.1	-7.6346909	-6.5440208	-5.7260182	-5.0897939	-4.5808145
0.2	15.269382	-13.088042	-11.452036	-10.179588	-9.1616291
0.3	-22.904073	-19.632062	-17.178055	-15.269382	-13.742444
0.4	-30.538764	-26.176083	-22.904073	-20.359176	-18.323258
0.5	-38.173455	-32.720104	-28.630091	-25.44897	-22.904073
0.6	-45.808145	-39.264125	-34.356109	-30.538764	-27.484887
0.7	-53.442836	-45.808145	-40.082127	-35.628558	-32.065702
0.8	-61.077527	-52.352166	-45.808145	-40.718352	-36.646516
0.9	-68.712218	-58.896187	-51.534164	-45.808145	-41.227331
0.998	-76.041522	-65.178447	-57.031141	-50.694348	-45.624913

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