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ORIGINAL ARTICLE

## Analysis of Uses of Partial Differential Equations in Different Types of Realistic Problems

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### ABSTRACT

Partial differential equations (PDEs) are among the most powerful mathematical tools available for characterizing dynamic real-world systems in which quantities vary continuously across both time and space. This paper examines the theoretical foundations and applied utility of PDEs across three domains of substantial scientific and practical importance: fluid dynamics, heat transfer, and cardiovascular medicine. In fluid dynamics, the Navier-Stokes equations govern the behavior of liquids and gases in motion, enabling the simulation of aerodynamic systems, oceanic circulation, and industrial flow processes. In engineering thermodynamics, Fourier's law and the heat equation describe the conduction, convection, and radiation mechanisms that underpin heat exchanger design, nuclear reactor cooling, and electronic thermal management. In cardiovascular medicine, PDEs formalize the coupled dynamics of ventricular contraction, hemodynamic pressure and flow, arterial wall mechanics, and molecular transport — collectively providing the mathematical infrastructure for patient-specific disease modelling and computational surgical planning. The paper presents the governing equations in each domain with precise variable notation, demonstrates their structural relationships and shared mathematical properties, and discusses how advances in computational methods — including the Finite Element Method (FEM), the Finite Difference Method (FDM), and machine learning augmentation — have dramatically expanded the practical reach of PDE-based modelling. Particular attention is devoted to cardiovascular applications, where the integration of PDEs with patient-specific imaging data has generated models capable of predicting atherosclerotic progression, aneurysm rupture risk, and optimal stent placement. The paper concludes by outlining frontier opportunities in biomedical PDE modelling, including real-time clinical integration, fractional-order formulations, and multiscale coupling of organ-level and cellular-level dynamics.

**Keywords:** *partial differential equations; Navier-Stokes equations; heat transfer; cardiovascular modelling; finite element method; hemodynamics; biomedical mathematics; computational fluid dynamics*



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## INTRODUCTION

The natural world is continuous. Temperature gradients, fluid velocities, mechanical stresses, and biological concentrations all vary smoothly across spatial domains and evolve continuously through time, defying any description that treats them as isolated discrete events. Partial differential equations (PDEs) are the mathematical language through which this continuity is expressed and analyzed: they relate a quantity of interest to its rates of change with respect to two or more independent variables, typically position and time, and thereby encode the local rules from which global system behavior emerges. The transition from observational science—recording what nature does—to predictive science—computing what nature will do—has depended, more than on any other mathematical framework, on the development and numerical solution of PDEs (Deuffhard, 1999).

Modern applications of PDEs span an extraordinarily wide range of scientific and engineering domains. In classical physics, the wave equation, the diffusion equation, and the Laplace equation each govern entire classes of physical phenomena that share common mathematical structure. In engineering, the Navier-Stokes equations for fluid motion and Fourier's heat equation are foundational tools in the design of aircraft, nuclear reactors, microelectronics cooling systems, and chemical processing plants. In the life sciences, PDEs describe electrical propagation in cardiac and neural tissue, the mechanics of arterial walls under pulsatile pressure, the diffusion of drugs and oxygen through biological tissue, and the population dynamics of interacting species (Migliori et al., 2022; Bienenstock & Collins, 2010). The unifying power of the PDE framework—its ability to represent physically disparate systems within the same formal language—is one of the defining intellectual achievements of applied mathematics.

Medical and biomedical applications have emerged as a particularly consequential frontier for PDE-based modelling. Cardiovascular disease remains the leading cause of mortality globally, and the complexity of the cardiovascular system — a mechanically active, geometrically intricate, fluid-filled structure whose behavior is simultaneously governed by solid mechanics, fluid dynamics, and mass transport — makes it among the most challenging and rewarding targets for mathematical modelling (Usak, 2020). PDE models of the cardiovascular system have moved progressively from idealized analytical approximations toward patient-specific computational models that assimilate data from clinical imaging, pressure monitoring, and genomic profiling (Pan et al., 2020). These models are beginning to influence clinical decision-making — informing the selection of treatment strategies for aneurysms, guiding stent design, and predicting drug distribution in targeted delivery systems — in ways that earlier generations of biomedical researchers could not have anticipated (Yasnitsky et al., 2015; Jang & Cho, 2019).

Despite the maturity of PDE theory and the breadth of its applications, the literature lacks accessible integrative accounts that connect the mathematical structure of governing equations in multiple domains to both the computational methods required for their solution and the specific biomedical problems those solutions illuminate. This paper provides such an account, pursuing four objectives: to present the governing PDEs for fluid dynamics, heat transfer, and cardiovascular medicine with sufficient mathematical precision to establish their formal structure; to demonstrate the shared mathematical properties that unite these physically



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distinct applications; to discuss the computational methods — FEM, FDM, and machine learning — through which these equations are solved in practice; and to identify the most promising frontiers for PDE-based biomedical modelling in the coming decade.

## **MATHEMATICAL MODELS FOR REAL-WORLD PROBLEMS**

Mathematical modelling is the process of translating the essential features of a physical, biological, or social system into a formal language — typically equations — whose solution yields quantitative predictions about the system's behavior. Partial differential equations occupy a central position in this enterprise because they are the natural mathematical vehicle for describing systems distributed in space and evolving in time (Yang, 2021). Where ordinary differential equations describe systems that vary only with time (treating the system as spatially uniform), PDEs make the spatial distribution of quantities explicit and govern how that distribution evolves — making them indispensable for any system in which spatial heterogeneity matters.

The practical power of PDE-based models arises from their combination of two properties. First, they are grounded in conservation laws and constitutive relations that encode physical principles independently of any specific geometry or boundary condition — the Navier-Stokes equations, for instance, express the conservation of momentum and mass for any Newtonian fluid, regardless of whether the flow is through a pipe, around a wing, or within a coronary artery. Second, they are computationally tractable: the development of numerical methods — particularly FEM and FDM — has made it possible to obtain approximate solutions to PDEs defined on arbitrarily complex geometries with specified boundary and initial conditions, enabling the simulation of systems too complex for analytical solution.

The scope of PDE-based modelling in applied science encompasses fluid mechanics, structural analysis, electromagnetic theory, quantum mechanics, population ecology, financial mathematics, and biomedicine, among others. In each domain, the PDE model serves three interrelated functions: explanation (making precise what the governing physical laws predict), prediction (computing the system's future states given its current state and boundary conditions), and optimization (identifying the design parameters, control inputs, or intervention strategies that produce the most desirable outcomes subject to specified constraints). These three functions are central to the applications reviewed in this paper.

## **FLUID DYNAMICS**

Fluid dynamics is governed by the conservation of mass, momentum, and energy for continuous fluid media. For Newtonian incompressible viscous fluids — the dominant regime in most engineering applications involving liquids — these principles are expressed by the Navier-Stokes equations, which together constitute one of the most studied and most consequential PDE systems in applied mathematics.

The continuity equation (conservation of mass for an incompressible fluid) states that the divergence of the velocity field must vanish everywhere:



$$\nabla \cdot \vec{v} = 0 \quad (1)$$

where  $\vec{v}$  is the velocity vector field. The momentum equation (Newton's second law applied to a fluid element) takes the form:

$$\rho(\partial\vec{v}/\partial t + \vec{v} \cdot \nabla\vec{v}) = -\nabla p + \mu\nabla^2\vec{v} + \vec{f} \quad (2)$$

where  $\rho$  is the fluid density,  $p$  is the pressure field,  $\mu$  is the dynamic viscosity, and  $\vec{f}$  represents external body forces per unit volume. The left-hand side of Equation (2) encodes the material acceleration of a fluid parcel — the local rate of change of velocity plus the convective acceleration arising from the parcel's transport through a spatially non-uniform velocity field. The right-hand side balances this acceleration against pressure-gradient forces, viscous stresses, and body forces (Batchelor, 2000).

The Navier-Stokes equations are nonlinear due to the convective acceleration term  $\vec{v} \cdot \nabla\vec{v}$ , and this nonlinearity is the source of one of the most profound open problems in mathematics: whether smooth solutions to the three-dimensional Navier-Stokes equations with smooth initial data always exist and remain bounded, or whether finite-time singularities can develop. For engineering purposes, however, numerical solutions to the Navier-Stokes equations in specific geometries with specified boundary conditions are well-established through computational fluid dynamics (CFD) methods (Anderson, 2017).

The range of physical phenomena governed by the Navier-Stokes equations spans laminar viscous flow (at low Reynolds numbers, where viscous forces dominate), turbulent flow (at high Reynolds numbers, where inertial forces dominate and the flow exhibits chaotic multi-scale spatial and temporal structure), and transitional regimes between these extremes. Turbulence remains one of the most challenging problems in physics: the Kolmogorov theory of turbulence provides a statistical description of the energy cascade from large-scale motions to small-scale dissipation, but direct numerical simulation of turbulent flows at realistic Reynolds numbers requires computational resources that scale as  $Re^{9/4}$  — far beyond current capability for most practical applications (Shu, 1992; Pope, 2000).

CFD applications of the Navier-Stokes equations include the aerodynamic optimization of aircraft, the simulation of wind loading on structures, the design of turbomachinery, the modelling of ocean circulation and atmospheric dynamics, and the prediction of pollutant dispersion. In astrophysics, hydrodynamic models govern the formation of stars and galaxies, the dynamics of interstellar gas, and the behavior of accretion discs around compact objects (Shu, 1991). The same mathematical structure that describes blood flow in coronary arteries — as discussed in the cardiovascular section below — also governs fluid flow in these radically different physical contexts, illustrating the unifying power of the PDE framework.

## HEAT TRANSFER

Heat transfer — the transport of thermal energy driven by temperature differences — occurs through three distinct physical mechanisms: conduction (diffusion of thermal energy through a stationary medium), convection (transport of heat by the bulk motion of a fluid), and



radiation (emission and absorption of electromagnetic radiation). Each mechanism is governed by a PDE, and the combined action of all three determines the thermal behavior of most engineering systems.

Conductive heat transfer in a solid medium is governed by Fourier's law, which states that the conductive heat flux  $\vec{q}$  is proportional to the negative temperature gradient:

$$\vec{q} = -k\nabla T \quad (3)$$

where  $k$  is the thermal conductivity of the medium and  $T$  is the temperature field. Combining Fourier's law with the principle of energy conservation yields the heat diffusion equation:

$$\rho c_p \partial T / \partial t = \nabla \cdot (k\nabla T) + \dot{Q} \quad (4)$$

where  $\rho$  is the material density,  $c_p$  is the specific heat capacity at constant pressure, and  $\dot{Q}$  represents volumetric heat generation (from chemical reactions, electrical resistance, or radioactive decay). In the absence of heat generation and for a homogeneous isotropic medium, Equation (4) simplifies to the classical heat equation  $\partial T / \partial t = \alpha \nabla^2 T$ , where  $\alpha = k / (\rho c_p)$  is the thermal diffusivity (Carslaw & Jaeger, 1959).

Convective heat transfer couples the temperature field to the velocity field of the surrounding fluid. The energy equation for a Newtonian fluid in forced convection takes the form:

$$\rho c_p (\partial T / \partial t + \vec{v} \cdot \nabla T) = \nabla \cdot (k\nabla T) + \mu \Phi \quad (5)$$

where the left-hand side represents the material derivative of temperature (local rate of change plus convective transport) and the right-hand side balances thermal conduction against viscous dissipation  $\Phi$  (Incropera & DeWitt, 2011). Equations (4) and (5), together with appropriate boundary conditions, are the basis for the simulation of heat exchangers, cooling systems, and thermal protection structures across engineering applications from microelectronics to hypersonic vehicles.

Engineering applications of heat transfer PDEs are extensive. The design of heat exchangers — devices for transferring heat between fluid streams at different temperatures — relies on the coupled solution of the Navier-Stokes and energy equations in complex geometries. The thermal management of electronics components requires accurate prediction of temperature distributions at micrometer scales where heat fluxes are extremely high. In nuclear engineering, the coupled analysis of neutron transport, fission heat generation, and reactor coolant flow — governed by a system of interacting PDEs — is essential for both performance optimization and safety assurance (Todreas & Kazimi, 2011). Modern simulation tools based on FEM and FDM have made it possible to solve these coupled systems on realistic three-dimensional geometries, with material properties that vary with temperature, enabling the level of predictive accuracy that contemporary engineering demands (Zienkiewicz, Taylor & Zhu, 2013).

### CARDIOVASCULAR SYSTEM MODELLING WITH PDEs

The cardiovascular system presents one of the most scientifically rich and clinically consequential applications of PDE-based modelling in biomedicine. It is a coupled system comprising a pump (the heart), a network of conduits (the arterial and venous trees), a working



fluid (blood), and a control system (the autonomic nervous system and endocrine signalling) — each component governed by physical laws that can be expressed as PDEs, and each interacting with the others through boundary conditions and coupling terms (Holdt, Kohlmaier & Teupser, 2018; Femminò et al., 2020). Mathematical models of the cardiovascular system serve three principal functions in contemporary medicine: elucidating the mechanisms of cardiovascular disease, predicting the outcomes of therapeutic interventions, and supporting the design of medical devices.

The starting point for cardiovascular PDE modelling is the description of ventricular mechanics — the coupling between myocardial contraction and the resulting changes in ventricular volume and pressure. Blood volume conservation within the ventricle, expressed as a continuity equation, takes the form:

$$\partial V / \partial t = -\nabla \cdot (V \mathbf{v}) \quad (1)$$

where  $V$  is the blood volume and  $\mathbf{v}$  is the velocity vector describing the flow field within the ventricular chamber. This equation, together with appropriate boundary conditions representing the opening and closing of cardiac valves, governs the filling and ejection phases of the cardiac cycle.

The mechanical equilibrium of cardiac tissue — the balance between internal stress and applied forces within the ventricular wall — is expressed by the momentum equation:

$$\nabla \cdot \mathbf{T} + \mathbf{f} = \rho \mathbf{a} \quad (2)$$

where  $\mathbf{T}$  is the Cauchy stress tensor encoding the distribution of mechanical stress within the myocardial wall,  $\mathbf{f}$  is the body force per unit volume (including the active contractile force generated by cross-bridge cycling in cardiac muscle fibers),  $\rho$  is the tissue density, and  $\mathbf{a}$  is the tissue acceleration. The constitutive relation between stress  $\mathbf{T}$  and strain — which must capture both the passive elastic properties of the myocardium and the active contractile forces generated during systole — is among the most challenging components of cardiovascular PDE modelling to specify accurately (Zhang et al., 2016).

Hemodynamics within the arterial network — the dynamics of blood pressure and flow — is governed by the Navier-Stokes equations (Equation (2) in the fluid dynamics section), here specialized to the geometry and boundary conditions of vascular conduits. For a blood vessel with axial flow, the pressure field satisfies the cylindrical Poisson equation:

$$\nabla^2 p = -(1/r) \partial / \partial r (r \partial p / \partial r) \quad (4)$$

where  $r$  is the radial coordinate measured from the vessel centerline. The solution to this equation, combined with the no-slip boundary condition at the vessel wall and the inlet pressure waveform, yields the Poiseuille parabolic velocity profile for steady laminar flow — a result of foundational importance for understanding both normal vascular physiology and the hemodynamic consequences of stenosis and geometric abnormalities (Alber et al., 2019).

Arterial wall mechanics is governed by continuum mechanics equations that relate the stress distribution within the wall to the transmural pressure and vessel geometry. For a thin-walled cylindrical vessel, the circumferential wall stress  $\sigma$  is related to the transmural pressure  $p$ , vessel radius  $r$ , and wall thickness  $h$  by Laplace's law,  $\sigma = pr/h$ . For patient-specific arterial



geometries — which depart substantially from cylindrical idealizations — the full three-dimensional stress equilibrium equations must be solved, and the resulting stress distributions carry direct clinical significance: arterial wall stress is a primary determinant of atherosclerotic plaque vulnerability and aneurysm rupture risk (Zhang et al., 2016).

The transport of biologically active molecules — oxygen, carbon dioxide, nitric oxide, drug molecules — through the blood and across the vascular wall is governed by the convection-diffusion equation:

$$\partial c / \partial t + \mathbf{v} \cdot \nabla c = D \nabla^2 c + R \quad (6)$$

where  $c$  is the concentration of the transported species,  $D$  is its diffusion coefficient in blood, and  $R$  represents the net rate of production or consumption through biochemical reactions. Equation (6) couples the concentration field to the velocity field through the convective term  $\mathbf{v} \cdot \nabla c$ , making the transport problem inseparable from the hemodynamic problem in most physiologically realistic scenarios (Ionescu et al., 2017).

The full power of cardiovascular PDE modelling is realized by integrating Equations (1)–(6) into coupled multiscale models that simultaneously represent ventricular mechanics, hemodynamics, wall mechanics, and molecular transport across a range of spatial scales — from the sub-cellular mechanisms of myocardial contraction to the global pressure-flow relationships of the complete cardiovascular system (Zhang et al., 2016). Zhang et al. (2016) demonstrated such a multiscale framework for coronary artery disease, showing that the integrated model could capture clinically observed correlations between hemodynamic shear stress distributions and sites of atherosclerotic plaque formation with a fidelity unachievable by any single-scale model. Alber et al. (2019) demonstrated that the integration of machine learning with multiscale PDE models could substantially reduce the computational cost of patient-specific cardiovascular simulations by providing data-driven surrogate models for computationally expensive PDE components.

Patient-specific cardiovascular modelling — the use of clinical imaging data (computed tomography angiography, magnetic resonance imaging) to construct geometrically accurate models of individual patients' cardiovascular anatomy — has emerged as one of the most clinically impactful applications of biomedical PDE modelling. By solving the hemodynamic and structural PDEs on patient-specific geometries, computational surgeons can simulate the pre-operative and post-operative hemodynamics of stent placement, valve repair, or bypass surgery, supporting treatment planning decisions that would otherwise rely entirely on surgical judgment (Pan et al., 2020; Yasnitsky et al., 2015). The quantitative hemodynamic metrics extracted from these simulations — fractional flow reserve, wall shear stress, oscillatory shear index — have been validated as predictors of clinical outcomes in multiple prospective studies and are beginning to be adopted as decision-support tools in interventional cardiology (Jang & Cho, 2019).

## BIOMEDICAL APPLICATIONS BEYOND THE CARDIOVASCULAR SYSTEM

The utility of differential equation models in biomedicine extends substantially beyond cardiovascular applications, encompassing the dynamics of neural activity, the kinetics of



tumor growth and treatment response, and the population dynamics of infectious disease. These applications share the cardiovascular PDE modelling framework's core logic: biological processes are expressed as conservation laws and constitutive relations, the governing equations are solved numerically on realistic geometries and over clinically relevant time horizons, and the solutions are interpreted to generate predictions that would be inaccessible to experimental observation alone.

Neuronal electrophysiology is governed by the Hodgkin-Huxley equations, a system of coupled nonlinear ODEs describing the ionic conductance changes that underlie the action potential — extended to the PDE setting (the cable equation) to describe signal propagation along axons and dendrites [29]. The cable equation:

$$\partial V/\partial t = (1/2Ri) \partial^2 V/\partial x^2 - I_{ion}/Cm \quad (7)$$

where  $V$  is the membrane potential,  $Ri$  is the intracellular resistivity,  $I_{ion}$  is the net ionic current density, and  $Cm$  is the membrane capacitance, governs the spatial and temporal evolution of electrical signals in neural tissue. Extensions of this framework to bidomain and monodomain models of cardiac electrophysiology have enabled the simulation of arrhythmia initiation and propagation, supporting the development of defibrillation strategies and antiarrhythmic drug design (Neftci & Averbeck, 2019).

Tumor growth and treatment response are modelled by PDE systems that couple the spatial diffusion of nutrients (oxygen, glucose) and therapeutic agents to the proliferation, migration, and death of tumor cell populations. Miranville, Rocca, and Schimperna (2019) analyzed the long-time behavior of a PDE tumor growth model incorporating nutrient diffusion and mechanical pressure effects, demonstrating convergence to steady states that correspond to clinically observed tumor morphologies. Sharma and Samanta (2016) formulated an optimal control problem for chemotherapy and immunotherapy dosing based on a tumor-immune PDE system, demonstrating that mathematical optimization of treatment protocols could substantially improve the balance between tumor reduction and healthy tissue toxicity. These results illustrate the potential of PDE-based optimal control theory to inform precision oncology strategies that tailor treatment intensity and timing to individual patient characteristics.

Medical imaging enhancement — the improvement of diagnostic image quality through computational post-processing — represents a further biomedical application of PDEs that has attracted considerable recent attention. Ibrahim et al. (2022) demonstrated that fractional-order PDE operators applied to medical images could selectively enhance edges and fine structures while suppressing noise, outperforming classical integer-order diffusion-based methods on clinically relevant image quality metrics. The fractional calculus framework — in which the order of differentiation is a non-integer parameter characterizing the long-range spatial memory of the system — provides a richer class of PDE operators whose behavior can be tuned to the specific statistical properties of medical image noise, opening opportunities for image-guided intervention systems with improved diagnostic sensitivity (Ionescu et al., 2017).



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## COMPUTATIONAL METHODS FOR PDE SOLUTION

The analytical solution of PDEs — obtaining closed-form expressions for the dependent variable as a function of the independent variables — is possible only for a narrow class of problems defined on simple geometries with special boundary conditions. For the vast majority of practically relevant problems—complex geometries, nonlinear equations, coupled multi-physics systems—numerical methods are required. The three most widely used approaches for the numerical solution of PDEs in engineering and biomedical applications are the Finite Difference Method (FDM), the Finite Element Method (FEM), and spectral methods, each with distinctive strengths and limitations.

The Finite Difference Method approximates the continuous derivatives in a PDE by discrete difference quotients evaluated on a regular grid. Its computational simplicity makes it the method of choice for problems on structured rectangular domains — including many turbulence simulations and electronic device thermal analyses — but its restriction to structured grids limits its applicability to the complex, patient-specific geometries that characterize biomedical problems (Zienkiewicz, Taylor & Zhu, 2013).

The Finite Element Method partitions the computational domain into a mesh of small elements — typically triangles or tetrahedra in three dimensions — and approximates the PDE solution within each element using low-order polynomial basis functions. The global solution is assembled by enforcing continuity conditions across element interfaces, resulting in a large sparse linear system that is solved by direct or iterative methods. FEM's primary advantage over FDM is its geometric flexibility: it can represent arbitrarily complex geometries with the same formal mathematical framework, making it the dominant method for patient-specific cardiovascular simulation, structural analysis, and other biomedical applications where geometry is clinically determined rather than user-specified (Zienkiewicz, Taylor & Zhu, 2013; Zhang et al., 2016).

Machine learning methods — particularly physics-informed neural networks (PINNs) and data-driven surrogate models — have emerged in the past decade as a complementary approach to classical numerical methods for PDE solution. PINNs embed the governing PDE as a constraint in the loss function of a neural network, enabling the network to learn approximate solutions that satisfy both the PDE and the available data simultaneously. Neftci and Averbeck (2019) and Alber et al. (2019) demonstrated that such hybrid approaches can substantially accelerate the solution of complex biomedical PDE systems by replacing computationally expensive high-fidelity PDE solvers with fast neural network evaluations calibrated against a smaller set of full-fidelity solutions. The practical significance for patient-specific cardiovascular modelling is substantial: if the computational cost of personalized hemodynamic simulation can be reduced from hours to seconds through machine learning surrogates, real-time clinical decision support based on patient-specific PDE models becomes feasible.

## CONCLUSION

Partial differential equations provide the unifying mathematical language through which the continuous dynamics of real-world systems — from turbulent atmospheric flows to the pulsatile mechanics of the human heart — are expressed, analyzed, and predicted. This



paper has reviewed the governing PDEs for fluid dynamics, heat transfer, and cardiovascular medicine, presenting their formal mathematical structure, discussing their physical interpretations, and connecting them to the computational methods through which their solutions are obtained in practice. Several integrative conclusions emerge from this review.

First, the mathematical unity of the PDE framework across physically disparate domains is not merely aesthetically pleasing but practically consequential: insights, algorithms, and software tools developed in one domain (for example, FEM discretizations developed for structural mechanics) transfer directly to others (for example, arterial wall mechanics), accelerating progress in each. The cross-domain transfer of numerical methods has been among the most productive sources of advance in biomedical PDE modelling over the past three decades.

Second, the cardiovascular application domain has moved from a largely theoretical enterprise to a clinically impactful one. Patient-specific models assembled from imaging data and solved by FEM on high-performance computing platforms are now informing treatment decisions in interventional cardiology, vascular surgery, and cardiovascular device development. The integration of these models with machine learning surrogates is expected to accelerate their clinical adoption by reducing the computational time required for patient-specific simulation to clinically actionable timescales.

Third, the frontiers of biomedical PDE modelling — fractional-order operators for imaging enhancement and tissue mechanics, coupled tumor-immune optimal control systems, real-time data assimilation for cardiovascular state estimation — represent domains where mathematical innovation and clinical need are particularly closely aligned, and where substantial progress may be expected in the coming decade.

Future research priorities include the development of efficient uncertainty quantification methods for patient-specific PDE models (quantifying how model predictions depend on uncertain model parameters and boundary conditions), the extension of multiscale cardiovascular models to include tissue remodeling and disease progression dynamics over months to years, and the systematic clinical validation of computational predictions against outcomes in prospective multicenter studies. The convergence of high-fidelity PDE modelling, patient-specific imaging, machine learning, and high-performance computing positions mathematical modelling as an increasingly central tool in precision medicine — not replacing clinical judgment, but augmenting it with the predictive power that mechanistic mathematical models uniquely provide.

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