



EXPLORING NADI PARIKSHA MANUSCRIPT: A CRITICAL STUDY

Dr. Harshada Deshpande¹, Dr. Vinay Ankush Pawar², Dr. Mahesh Kumar Harit³

¹Final Year Postgraduate Scholar

²Associate Professor, ³Dean and HOD Department of Ayurved Samhita Siddhant
D Y Patil Deemed to be University, School of Ayurveda, Nerul, Navi Mumbai, India

ABSTRACT

The preservation and critical analysis of unpublished Ayurvedic manuscripts are essential for safeguarding traditional medical knowledge. *Nadi Pariksha* (pulse examination) occupies a central position in Ayurvedic diagnostics, though its systematic elaboration is primarily found in later classical texts. The present study critically examines an unpublished *Nadi Pariksha* manuscript procured from Sampurnanand Sanskrit Vishwavidyalaya and compares it with the *Nadi Pariksha Vidhi Adhyaya* of Sharngadhara Samhita.

The manuscript, written in Sanskrit using Devanagari script, consists of three folios encompassing *Shakun Pariksha*, *Doot Pariksha*, and *Nadi Pariksha*. For the purpose of this study, only the *Nadi Pariksha* section was translated and subjected to comparative literary analysis. Similarities and variations between the two sources were systematically examined.

The findings reveal that while foundational diagnostic principles correspond closely with Sharangdhar Samhita, the manuscript demonstrates expanded clinical interpretations, including prognostic indicators and refined diagnostic procedures. These additions suggest an advanced stage in the evolution of pulse examination methodology.

Keywords: Ayurveda Manuscript, Nadi Pariksha, Literary Analysis, Pulse Diagnosis, Sharangdhar Samhita

1. INTRODUCTION

Ayurveda describes multiple diagnostic frameworks, among which *Ashtavidha Pariksha* (eightfold examination) occupies a significant role. *Nadi Pariksha* is regarded as a crucial component of this framework, enabling assessment of *Prakriti* (constitutional type), *Vikriti* (pathological state), and the functional status of *Dosha* and *Dhatu*. The balance of *Vata*, *Pitta*, and *Kapha* forms the basis of both diagnosis and therapeutic planning.

Although early classical compendia provide limited reference to pulse examination, systematic descriptions are observed in later texts. The 13th-century Sharangdhar Samhita is widely recognized for formalizing the procedural aspects of *Nadi Pariksha*. Subsequent treatises such as *Bhavaprakasha* and *Yogaratanakara* further elaborated its clinical dimensions.

The present research aims to critically edit and analyze an unpublished manuscript on *Nadi Pariksha* and compare its content with the third chapter of Sharangdhar Samhita to identify textual correspondences and distinctive contributions.

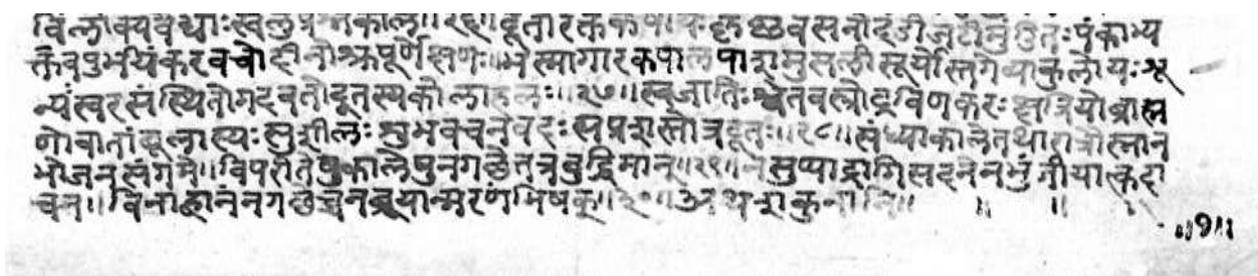
2. MATERIALS AND METHODS

2.1 Source of Manuscript

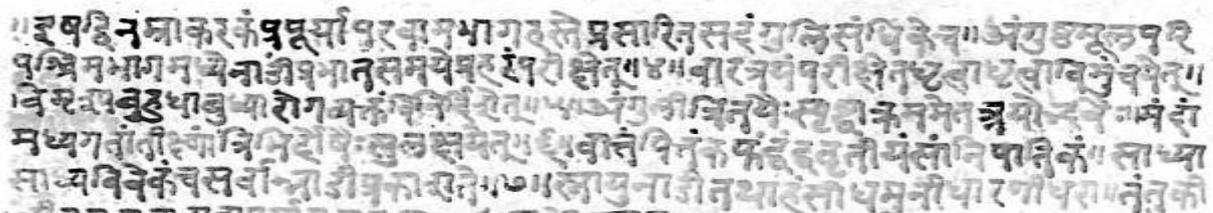
The manuscript was obtained from Sampurnanand Sanskrit Vishwavidyalaya, Varanasi. It is a handwritten Sanskrit document in Devanagari script. The author's name and date of composition are not mentioned. The manuscript is complete and preserved in readable condition.

2.2 Physical Characteristics

- Medium: Paper manuscript
- Folios: Three
- Dimensions: 9.5 × 5.1 inches
- Lines per page: Approximately 15
- Ink: Black text with red margins
- Pagination: Sequential folio numbering



- Punctuation: Double danda (॥)



No marginal annotations, textual corruptions, or missing sections were observed.

2.3 Method of Study

The Nadi Pariksha section (latter half of folio two and full folio three) was transliterated and translated into English. A comparative literary analysis was conducted with the *Nadi Pariksha Vidhi* chapter of Sharangdhara Samhita. Similarities and variations were categorized under diagnostic criteria, pulse characteristics, procedural methodology, and prognostic indicators.

3. RESULTS / OBSERVATIONS

3.1 Structural Features

The manuscript begins with invocations to deities and proceeds sequentially through Shakun Pariksha, Doot Pariksha, and Nadi Pariksha. The style is concise and verse-based.

3.2 Diagnostic Site

Both texts identify the radial pulse at the base of the thumb (*Kara Angustha Mula*) as the primary site of examination.

3.3 Pulse Characteristics

Descriptions of pulse movements show strong parallels:

- **Vata Nadi:** Compared to leech or serpent movement.
- **Pitta Nadi:** Compared to crow or frog movement.
- **Kapha Nadi:** Compared to swan or peacock movement.
- **Jwara Nadi:** Rapid and heated pulsation.
- **Mandagni:** Slow pulse movement.
- **Swastha Purusha:** Stable and balanced pulse corresponding to constitutional type.

3.4 Additional Content in the Manuscript

The manuscript introduces expanded procedural and prognostic elements:

- Examination with right hand for males and left for females.
- Pulse assessment recommended during early morning for three consecutive days.
- Finger positions representing Vata (index), Pitta (middle), and Kapha (ring).
- Alternative nomenclature for pulse such as Hansi and Dhamani.
- Avoidance of examination immediately after bath, oil massage, hunger, or thirst.
- Prognostic indications including Sadhya–Asadhya states and life expectancy estimation.
- Associations of Doshas with deities (Brahma, Shankara, Vishnu).

These elements are either absent or less elaborated in Sharangdhar Samhita.

4. DISCUSSION

The comparative analysis demonstrates that the foundational theory of pulse diagnosis remains consistent between the manuscript and Sharangdhar Samhita. Core descriptions of Dosha-specific pulse movements, anatomical site, and general diagnostic principles are closely aligned.

However, the manuscript reflects a more elaborate clinical orientation. The inclusion of prognostic interpretations, methodological refinements, and structured examination protocols suggests a mature stage in the evolution of Nadi Pariksha. The emphasis on repeated examination and contextual considerations (e.g., physiological states affecting pulse) indicates practical clinical application beyond theoretical description.

The manuscript appears to extend rather than contradict the principles of Sharangdhar Samhita, thereby representing a developmental continuum within Ayurvedic diagnostic literature.

5. CONCLUSION

This critical study of an unpublished Nadi Pariksha manuscript reveals substantial correspondence with Sharangdhar Samhita while highlighting notable expansions in diagnostic and prognostic methodology. The manuscript demonstrates progressive refinement in pulse examination techniques, including detailed procedural guidelines and evaluation of curability and vitality.

The study underscores the importance of manuscript research in reconstructing the historical development of Ayurvedic diagnostics and contributes to the preservation and scholarly understanding of classical knowledge systems.

REFERENCES

1. Sharangdhar Samhita with Dipika Hindi Commentary. Tripathi B. Chaukhamba Surbharati Prakashan; 2024.
2. Tiwari Y, Dhakad H. Nadi Pariksha: An Ancient Method of Diagnosis and Prediction. *J Ayurveda Integr Med Sci.* 2022;7(3).
3. Kachre K. Nadi Pariksha: An Ancient Method of Diagnosis. 2016.
4. Venkatgirikumar P, Deshpande S, Nagendra HR. Traditional Practices and Recent Advances in Nadi Pariksha: A Comprehensive Review. *J-AIM.* 2019;10(4):308–315.