

# **NADIVIJNANAM** and **NADIPRAKASHAM**

*(Old Sanskrit treatise on the Science of Pulse  
with English translation)*

Edited by  
**Dr. J. C. Sikdar**

**PRAKRIT BHARATI ACADEMY, JAIPUR**

NADIVIJNANAM  
of  
KANAD  
AND  
NADIPRAKASHAM  
of  
SHANKAR SEN

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**Prakrit Bharti Academy**  
**Jaipur**

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**MEDICINE/PULSE**

## *Publisher's Note*

We are happy to present the Sanskrit texts and English translations of “Nadivijnanam” and “Nadi Prakasham”. Both of these are our very old treatises dealing with the science of pulse, which is basic to the Ayurvedic system of diagnosis and treatment. We hope that these will be of interest and use to experts dealing with different medicinal systems, for those specialising in Ayurved these will have special importance.

We are grateful to Dr. J. C. Sikadar for locating these more texts and further translating them in English.

We are also grateful to the Government of Rajasthan for helping us financially for the publication of these books.

**M. VINAY SAGAR**

*Director*

**Prakrit Bharati Academy**



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**NADIVIJNANAM (SCIENCE OF PULSE)**

**COMPOSED BY MAHARSI KANADA**





*Dedicated*  
*to*  
*My Revered Teacher*  
*Prof. Dr. H. C. BHAYANI*  
*Ex-Professor of Gujarat University*  
*Bhasha Bhavan.*



# PREFACE

A study of *Nadivijnanam*<sup>1</sup> (Science of Pulse) of *Maharshi Kanada* was composed by him in Sanskrit in poetic order in the long past for the benefit of mankind. It was published by Sri Upendra Nath Sen Kaviraj, 29, Kolutolla Street, Calcutta, Bengal, in Bengali Script in the begining of the twentieth century. This work throws light upon the science of pulse dealing with the method of examination of pulse, the nature and movements of pulse indicating different kinds of disease, curability and incurability of diseases, deaths of patients, times of death of patients, etc.

*Nadivijnanam*, fostered from the ancient times of India, shows an aspect of the Science of life (*Ayurveda*) based on the tradition of the vast accumulated experiences of the ancient Indian Physicians with scientific knowledge about the life of the suffering people from diseases and combined with the insight into the light of diagnosis of various

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1. Edited with Bengali translation by Devendra Nath Sen and Upendra Nath Sen, Calcutta, 1918.

*There is no English translation of the treatise—Nadivijnanam in National Library, Calcutta.*

kinds of disease, curability and incurability of diseases, deaths of patients, times of death of patients, etc.

*Nadivijnanam* (Science of Pulse) has been evaluated by the Indian Ayurvedic Physicians (*Vaidyas*) in relation to the history of Indian Medical Science. India, by virtue of its position in the ancient world, was a great centre of Medical Science extending from the age of the Vedas up to the present day.

The available Indian classical texts reveal that *Ayurveda* was composed by *Brahma* in 1,00,000 verses. With the passage of ages the longevity and intelligence of man steadily declined and it was difficult for him to master the vast science. So *Brahma* abridged it and taught it to *Prajapati* by recommending it into eight parts, having found the inability of human being to learn the first voluminous medical science. *Prajapati*, transmitted it to *Asvins*, *Asvins* to *Indra*, *Indra* to *Atreya*, and *Atreya* to his six disciples, viz. *Agnivesa*, *Bhela*, *Jatukarna*, *Parasara*, *Harita*, and *Kshapani*. In regard to the origin of *Ayurveda* and its transmission upto *Indra* all *Acharyas* are of the same opinion. But the accounts of its transmission from *Indra* onwards differ from author to author.

According the *Carak Samhita*, *Indra* transmitted *Ayurveda* to *Bharadvaja*, *Bharadvaja* to *Atreya* *Punarvasu*, *Atreya* to *Agnivesa*, etc. while the *Susruta Samhita* reveals that *Indra* transmitted

Ayurveda to *Dhanvantari*, *Dhanvantari* to *Divodasa*, *Divodasa* to *Susruta*, etc.

According to *Kasyapa*, *Indra* passed it on to *Kasyapa*, *Vasistha*, *Atri*, and *Bhrigu*. Next it was transmitted by them to their respective sons and disciples,

Whatever may the historical fact be, *Ayurveda* is closely associated with the *vedas*; it is considered by most of the authors as an *Upanga* (minor limb) of *Atharvaveda*, while others consider it as *Upaveda* (supplementary *veda*) of the *Rigveda*. But *Kasyapa* claims it to be the *panchama veda* (fifth *veda*). The author of *Nadivijnanam*, Maharsi Kanada, also accepts *Ayurveda* as the *panchama veda* (fifth *veda*).<sup>1</sup>

It is evidently clear that the *Rigveda* and the *Atharvaveda* were the main sources of *Ayurveda*. The *tridhatu* (three elements)—concept or *tridosa* concept of *Ayurveda* has its root in the *Rigveda*. But modern historians are of opinion that the origin of this concept took place after *Darsanayuga* (the age of Indian Philosophy). The age of the *Samhitas*, extending from 2500 B. C. to 500 B. C., marks a glorious period of development of Indian Science in all fields.

During this period Indian medicine also was co-ordinated and systematised by the *Ayurvedacaryas*

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- I. “*Vaktrebhyah Pancasamkhya-gatebhyo Veda jata Rgyajuhsamavedah/Ayurvedascatharvavedasca tasmin.....Aste Vedah pancamo Vaidyakakhyo/Nadivijnanam Maharsi Kanda.*”

in the light of observations and experiments, both dealing with diseases and remedies for curing them.

The vast *Ayurvedic* literature of the Hindus, Bauddhas and Jains highly speaks of the glorious contributions of *Ayurveda* in the field of Indian Medical Science.

A Study of *Nadivijnanam* of Maharsi Kanada reveals the scientific ideas and practices of *Ayurveda* of the ancient Indians with a distinct trend to pathology (*Nidana*) and diagnosis of diseases, curability and incurability of diseases, deaths of patients, longevity of the life of a person, and auspicious and inauspicious symptoms of diseases as indicated by different kinds of beatings (or movement) of the pulse of a patient.

It appears that during the period of Maharsi Kanada a mass of medical information on the diagnosis of diseases based on the examination of pulse was accumulated in the treatise of *Ayurveda*.

The prominent feature of *Nadivijnanam* of Maharsi Kanada lay in the diagnosis of various diseases, curable and incurable, and ascertainment of death and time of death as indicated by the examination of the movement of the pulse of a patient.

Different kinds of symptoms of movement or beating of the pulse indicating its nature were meant to be the helpful accessories in the diagnosis of various diseases affecting men.

Whatever has been revealed by an analysis of the materials found in *Nadivijnanam* of Maharsi Kanada, has also been said by other celebrated Indian Ayurvedic physicians on the science of pulse for the benefit of mankind afflicted with diseases. *Nadivijnanam* is purely a science of pulse dealing with the diagnosis of various diseases on the basis of the examination of different kinds of movement or beating of the pulse of a patient.

The author of *Nadivijnanam*, as a devout Hindu *Saivite* sage, begins his work with an adoration of Lord Siva “*Namah Sivaya*”.

It appears that this work on the science of pulse is a composite and an epitome based upon some standard work on this subject as this science of pulse was well known throughout India among the Indian *Ayurvedic* physicians in the past. It is interesting to note that Maharsi Kanada declares his indebtedness to some previous *Ayurvedcaryas* for the knowledge of this science of pulse.

“*Astam Sambhau Srikanadasya bhaktih  
Aste vedah pancamo vaidyakakhyo  
Vetta kascit tasya naste Mahesat  
Tasmad-dhatadhyaita tasmad Turasat  
Tasmaj-jnatva vaktumarhami sastram*”.<sup>1</sup>

A study of the contents of *Nadivijnanam* reveals that this work is a composition based on some other

(1). *Invocation verse, Nadivijnanam.*



Indian medical source. There might have been a common Indian *Ayurvedic* source of the science of pulse from which all the ancient Ayurvedic Physicians might have drawn their respective informations.

According to Nadivijnanam, Tridosas concept of the science of life constitutes the science of the three elements—*vata* (air), *pitta* (bile or fire), and *kaph* (phlegm or water). This concept deals with these three elements of human body which become deranged by losing their equilibrium due to some cause and produce disease in the human body. *Tridosas* connote three faults—*vatik*, *paittik* and *Kaphaja* (airy, bilious, and phlegmatic).

The three elements—air, fire (or bile), and water (phlegm) are the inner forces of the human body and life. They make the sumtotal of human energies with their sub-divisions. Besides, earth (*ksiti*) also can be added to these three elements, so there are four elements in human body. Each element has a triangle which indicates the chemical action or positive or negative energy. Without air there can be no fire, so their combination is scientific. Like wise there can be no earth without water. Four triangles are given below according to Indian Astrology.

### **Three faults (Tridosas) of pulse :**

The expanded, fast, inflated, jumpy, plump, hard, full, high-tensioned, lightning-like, and shrivelled

pulse indicate the agitation and intensity of *vata* element in the case of different diseases.

The scholars say that the movement of the pulse of agitated *vata* is crooked like that of a snake, leech of water, and scorio.<sup>1</sup>

The harsh, wiry, hot, nodular, and rapid pulse shows the agitation and intensity of *pitta*.

The movement of the pulse of agitated *pitta* is like that of a crow, *Lavapaksi* (quail), frog etc.<sup>2</sup>

The crippled, cold, excited, large, low-tensioned, very soft, wading, heavy, rigid, slow, soft and weak, and tensionless pulse indicates the agitation and intensity of *kaph*.

The movement of the pulse of agitated *kaph* is like that of pigeon, gander, peacock, etc. i. e. it moves bending backward.<sup>3</sup>

The accelerated, circular, dry, agitated, fickle, intermittent, restless, ropy, thick, imperceptible, knotty, and thin pulse indicates the intensity and agitation of the two combined elements—*vata* and *pitta* (air and bile).

The pulse of a patient moves like snake at one moment and like a frog at another moment when

1. *Nadiprakasam, Sankara Sen, Ch. II.*
2. *Ibid.*
3. *Ibid.*

there takes place the agitation of the combined elements—*vata* and *pitta*.<sup>1</sup>

The crooked, feeble, forceful, hollow, motionless, prostrate, slippery, sluggish, splitting, thready, tortuous, tremulous, fleshy, irregular, mild, porous, straight, torn, vanishing, and vibrating pulse reveals the intensity and agitation of the combined elements—*vata* and *kaph* (air and phlegm).

The pulse moves like a snake in one moment and like a gander at another moment when there takes place the agitation of the combined elements *vata* (air) and *kaph slesma* (phlegm).<sup>2</sup>

The pulse moves like a frog at one moment and like a peacock at, another moment when there is the agitation of the combined elements—*pitta* (fire) and *slesma* or *kaph* (phlegm).<sup>3</sup>

The faltering, hairy, hesitating, non-compressible, pin-pointed, and trembling pulse indicates that there is the intensity and agitation of the there combined elements—*vata*, *pitta*, and *kaph* (air, bile, and phlegm).

The pulse relating to three elements of faults—*vata*, *pitta*, and *kaph* moves first like snake, leech, and scorpion; in the middle like *lava-paksi* (quail, frog,

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1. *Nadiprakasam*, ch. II. 8.

2. *Ibid.*, II. 9.

3. *Nadiprakasam* Ch. II. 10.

etc., and lastly like gander, peacock, etc. But in the case of typhoid the pulse relating to *pitta* or *slesma* moves first, *slesma* or *vayu* in the middle, at last *pitta* or *vayu-nadi*. Then the case is very serious.

The period of Maharsi Kanada constitutes the most flourishing and fruitful age of ancient India relating to the accumulation of knowledge in *Ayurveda*, which was closely associated with chemical science. The principles of Nadivijnanam based on experience relate to the physical and chemical theories embracing the methodology of *Ayurveda*.

As Maharsi Kanada had to deal primarily with the science of pulse, a concise preliminary summary of some of these theories of this science of pulse is revealed in the text of Nadivijnanam with the development in its practical aspect.

The principles of the science of pulse may be said to stand in good comparison with some of the most recent and advanced scientific and medical ideas of our time and to bear the stamp of high intellectual perfection and sublime intuition of the time of Maharsi Kanada.

In this connection I am very grateful to Prof. Dr. H. C. Bhayani for going through the Ms. of my work with great interest and intellectual acumen.

I am very much thankful to Prof. Sri Dalsukhbhai D. Malvania, my revered teacher, and

ex-Director of L. D. Institute of Indology, Ahmedbad, for his encouragement to me in completing this work on the science of pulse. I thank also my dear student Parul for her keen interest in learning the science of pulse from me in the beginning of my study of the subject.

62, Sharada Society  
Ahmedabad-7

**Dr. J. C. Sikdar**



# INTRODUCTION

**A Critical description of Nadivijnanam of Maharshi Kanada, given by the editor, indicating its relation with other sources :**

*Nadivijnanam* of Maharshi Kanada was found by the editor in the library of his elder brother, a well-known *Kaviraja* (Ayurvedic physician) of Bengal, after his death in 1962, at a village of Burdwan District of West Bengal. This work composed in Sanskrit in poetic order is a short treatise on the science of pulse as its very title connotes. It has commentary<sup>1</sup> on the basis of which its contents can be well understood with all its meanings.

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1. *The following editions of Nadivijnanam are found in National Library, Calcutta*
    - i ) Kanada-“Nadivijnanam”—a treatise on pulse with a Commentary by Gangadhara Vaidya, Calcutta-1902.
    - ii ) Kanada-Nadivijnanam—with a commentary by Jivananda Bhattacharya. Edited by Asubodha Vidyabhusan and Nityabodha Vidyaratna, Calcutta-1921.
    - iii) Kanada-“Nadivijnanam tatha Nadiprakasam,” Edited with Bengali translation by Devendra Nath Sen and Upendra Nath Sen, Calcutta, 1918.
- There is no English translation of Nadivijnanam.*

*Nadivijnanam* was published by Sri Upendranath Sen Kaviraj, 29 Kolutolla Street, Calcutta in the beginning of this century (1918).

The colophons of *Nadivijnanam* clearly say that it was composed by Maharshi Kanada.

*Nadivijnanam* begins with “*Namah Sivaya*” and ends with “*Iti Mahamunikanadavirachitam Nadivijnanam*”.

## **METHOD OF EDITING :—**

### **Principles of text-constitution adopted :**

The edited text of *Nadivijnanam* has been prepared mainly on the basis of the only available published text in Bengali Script. The stanzas in the work have been kept in the edited text by marking the serial numbers. The work has been taken as standard as a rule from every aspect—evidence, order, language, and spelling, etc. In the editing the spelling has been followed according to that of the text.

### **Life and Age of the author of Nadivijnanam :**

The tradition says that Maharshi Kanada was a great physician and philosopher. It is said that he used to take grains of wheat or barley from the field on his way to visiting his patients. That is why he was called Kanada (*Kanam + adati iti = Kanada*). Whatever it may be, he was a celebrated physician and philosopher. He was the author of *Vaishesika*

*Drashana* which contains atomic theory. He flourished in the 7th century B. C. which falls in *Darsanakala* (age of Indian Philosophy.)

### **Author's indebtedness to the previous Acharyas :**

Maharshi Kanada says that *Ayurveda*, as the fifth Veda, issued forth from the mouth of Siva. None was the knower of this *Vaidyaka Shastra* except Mahesha. Brahma learnt it from Him. Turasat learnt it from Brahma and 'Sri Kanada<sup>1</sup>' learnt it from his guru *Turasat*. Thus he expresses his devotion and indebtedness to his previous *Acharyas*.

### **A Summary of the Contents of Nidivijnanam of Maharshi Kanada :**

*Nadivijnanam* contains sixty four verses dealing with diagnosis of diseases made by the examination of the pulses, a method of examination of the pulses, the nature of the pulses-*vata*, *pitta*, and *kaph* (air, fire or bile, and phlegm or water), movement of these three pulses indicating different kinds of diseases curability and incurability of diseases, death of a patient, time of his death, longevity of person, auspicious and inauspicious symptoms of the pulse.

Verses 1-3 deal with the examination of six pulses for the diagnosis of diseases—two pulses at the thumb fingers, two pulses of the lower parts of the two ankles of the two feet and two pulses of the two

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(1) *Invocation Verse.*



sides of the forehead (temples) and the method of examination of the pulses followed by a physician.

Verses 4-6 discuss the movements of three pulses *vata*, *pitta*, and *kaph-nadis*. First flows *vatanadi*, in the middle flows *pittanadi*, at last flows *kaph-nadi*. The pulses of *Tridosha* ( three faults – *Sannipata nadi* ) is indicated by three characters (*vata*, *pitta* and *kaph*). *Vatanadi* is crooked, *pitta-nadi* is restless, and *kaph-nadi* is slow-going or sluggish. The movement of two pulses having two faults indicate mixed symptoms, while the movement of the pulse due to three combined faults—*vata*, *pitta* and *kaph*, is like that of *Lavapakshi*(quail), *Tittira*(francoline partridge), and *Varttika* (duck), i.e. it is sometimes crooked, it is sometimes fast, it is sometimes slow-going, etc.

Verses-7-29 deal with different kinds of movement of the pulses indicating various kinds of disease, e.g. accelerated pulse in sexual passion and anger, feeble pulse in thought and fear, inflamed and forceful pulse having inflamed fire, restless pulse of a hungry person, steady pulse of a satisfied person, slow-going pulse of a person having loss of digestive power (*Mandagni*) and waste of bodily humours, slightly hot and heavy condition of a full-blooded pulse, large pulse indicating mucus, steady and forceful pulse of a happy man, hot and accelerated pulse of intense fever, cold and slow-going pulse of dysentery (*atisara*), imperceptible pulse of cholera case, steady-slow-crooked and mild pulse in the disease of worm, feeble-splitting and expanded pulse of jaundice, and

biliousness-slow-hard and mild pulse of *Raktapitta* (derangement of blood by bile), different kinds of movements of pulse in pthisis, high-tensioned and fast pulse in ulcer of chest.

Feeble pulse in pthisis; trembling pulse in cough; thin and steady, slow and intensely moving pulse in asthma ( *Svasa* ); very much trembling and fast moving pulse in hiccough; grave or tortuous and thready pulse in *Svarabheda* (loss of voice); thin, hard and inert pulse on both sides ( *parita* ) in the case of drinking wine; large (or heavy) and hard pulse in *anaharoga* (supression of urine) and painful discharge of urine; inert or motionless, thin, knotty pulse in urinary disease like gleet, etc. or gonorrhoea; billious pulse in boil; agitated fire-like pulse in fistula and sinus or boil of nerve like *vatika-nadi*; thick and slow pulse in vomiting, injury with an arrow or weapon, and holding of stool and urine; feeble and slow-going pulse in fever and having sexual enjoyment; deranged pulse in fever caused by sexual passion; different kinds of movement of the pulse in feverless state (in *vijvara*), in physical exercise (hard labour), walking, thought (study), grief over loss of wealth.

Hard and inert pulse or slow - going pulse on both sides ( *parita* ) in indigestion ( *ajirna* ) or dyspepsia; un-nourished and slow pulse in *pakvajirna* (chronic indigestion or dyspepsia); thick and hard pulse, jumping upwards in the case of taking nourishing food, oily-stuff, sweet and meat also; snake-like or frog-like movement of pulse in

that of taking banana, molasses, *vada* (a kind of cake made of floor of gram by frying in oil) and dry and rough articles; peacock-like movement of pulse in the case of taking sweet articles; earth-worm like movement of pulse in that of bitter tasting stuff; frog-like movement of pulse, slightly warm, in the case of taking acidic thing; *Phinga*-like movement (a species of small bird) of pulse in that of taking sour food-stuff; hard and pale pulse in taking astringent article; straight and fast pulse in that of taking saltish stuff; feeble and accelerated pulse from fasting and feeble pulse from sexual enjoyment. (V. 29)

Next verses 30-31 discuss incurable cases of patients indicated by different movements of the pulses relating to *vata* (air), *pitta* (bile or fire) and *kaph* (water or phlegm) in successive orders and *Tridosanadi* (pulse having three faults or typhoid) indicating *vata*, *pitta* and *kaph*.

If the movement of *pittanadi* is felt first, that of *Vatanadi* in the middle, that of *kaph-nadi* last or if the pulse is felt as revolving like a revolving thing mounted on a wheel or if it is too fast or sometimes it moves like a peacock or sometimes it gets thinner and thinner by and by then it is to be considered that the pulse is indicating an incurable case.

Verses 32-38 of *Nadivijnanam* deal with the cases of death indicated by different kinds of movement of the pulse of a patient. For example, if the pulse of a patient is cool or cold even in the case of intense

heat in his body, and if it is not in the case of feeling coldness in his body, then there will take place the death of that patient whose pulse makes different kinds of movement.

The pulse of a patient, which is running inside at the base of his thumb finger cause trouble and is moving as faltering slowly, reveals the symptoms of his death.

Verses 39-57 predict the times of deaths of patients as indicated by the movements of their respective pulses. For example, if the pulse of a patient becomes *madhyarekha*, i.e. moves outside the base of his thumb finger at a distance of two fingers, his death will take place after  $\frac{1}{2}$  *prahara*.

If the pulse of a patient is weak and smooth like (the body of) an earth worm and moves like it, sometimes, if it is fully developed like the body of a snake and moves with great speed crookedly, sometimes if it becomes feeble according to the wasting of his body, his death will take place at the end of one month.

Verses 58-61 deal with the longevity of a person as indicated by the movement of his pulse. For example, if *Vamanadi* (the pulse of the left hand) of a person, having *svalparekha* (a few lines), is examined at the root of his *hanu* (Cheek), there is no doubt here that his life is more than five years.

If *Vamanadi* of a person, having *dirgharekha* (long lines), dances at the root of the hand (wrist), he will live for more than fifty years.

In conclusion *Nadivijnanam* (VV. 62-64) deals with the curability of a disease, etc., on the basis of the movement of the pulse of a patient, not leaving its own place (the base of the thumb finger) and if the pulse is considered thin. A well-expression, purity of the pulse and staying at its own place, no restlessness and no slowness of the pulse of a person are all auspicious symptoms. Fullness of fault of restlessness, hardness, too much slowness of the pulse, vomiting of blood, thinness, leaving of its own place (base), feebleness and its crooked movement are all bad (inauspicious) symptoms (*dustalaksanam*). A study of *Nadivijnanam* of Maharsi Kanada thus reveals that the movement (or beating) of the pulse at the root of the thumb is the witness to the soul contained in the body.

Different kinds of movement or beating of the pulse indicating different kinds of disease as found in *Nadivijnanam* can be compared with the beatings of the pulse in the case of some diseases on the basis of symptomology of diseases and nature of Homeopathic medicines.

According to Late Prof. Dr. B. Bhattacharya, Director of Oriental Research Institute, Baroda, the author of the Science of Tridosha in Homeopathy, “Nearly 80% of the cases of Asthma exhibited a

pulse that is fully inflated, beating under all the three fingers—index, middle and ring, some-what hollow, filled with gas, with thick walls and not easily comprehensible. This pulse is a clear picture of the famous Homeopathic nosode - Medorrhinum. Medorrhinum has a much greater coverage in the *vata-kaph* (VK) complaints which produce diseases like asthma, tumours, hysteria, rheumatism, arthritis and the rest of the kind. When *vata-kaph* complaints become chronic, they aggravate from time to time, essentially near about the new-and full moon days. No other medicine in Homeopathy has the power to curb this periodical, never-ending aggravation except Medorrhinum.”<sup>1</sup>

“There is another kind of pulse frequently met with in practice. It is soft, almost like butter to touch, slow, easily compressible, languid and listless with little or no tension. The pulse appears to be solid with soft lymph flowing through the pipe. Now here is a picture of Aurum Metallicum. In asthma if the patient shows this kind of pulse, a dose of Aurum Met 200 once in 15 days usually shows excellent result.”<sup>2</sup>

“In a variety of cases this kind of pulse is exhibited, say in asthma, tuberculosis, rheumatism, arthritis, leucoderma, chronic ulcers, skin disease, ozena and the like.”<sup>3</sup>

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1. *Tridosha Theory*, p. 6

2. *Ibid.*, p. 6

3. *Ibid.*, p. 7

“Fever is a heat force and here again *Tridosā* can help Homeopathy. In fevers caused by heat, cold has to be applied, that is to say, cooling medicines with superior power to the disease itself are called for in fevers. According to *Tridosā* *Baptisia* is perhaps the most cooling medicine, because it is an Indigo colour concentrate which is rich in cooling cosmic rays with extreme cooling effect on fevers”<sup>1</sup>

“*Argentum* is found to be one of the top most *pitta* remedies. Its pulse is hard, inflated, jumpy with hard walls, beats heavily on the second finger. Usually in *pitta* or heat affections this kind of pulse exhibits itself. Now here without hesitation *Argentum* should be prescribed. If it is vertigo or liver trouble, leucoderma, or insomnia produced by heat, *Argentum Nitricum* should be prescribed in 200th potency, one dose once in 15 days.”<sup>2</sup>

“The *Thuja* pulse is thin, wiry, hard, stiff, jumpy and often fast.”<sup>3</sup>

“*Thuja* can be used when such a pulse is found in the case of variety of urinary diseases, asthma, rheumatism, gout, chronic headaches, haemoptysis and similar complaints.”

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1. *Tridosā Theory*, p. 7

2. *Ibid.*, pp. 8-9

3. *Ibid.*, p. 9

According to Tridosā principles, “pyrogen is the very first medicine in all pus and sinus cases, purulent boils and ulcerations, even in fistula, anal or lachrymation, pus and decomposition is the keynote of pyrogen”<sup>1</sup>

The “Staphysagria-pulse is soft, flabby, listless, beating heavily on the third finger showing an excess of fluid, and serums.”<sup>2</sup> Styaphysagria is indicated as a remedy in the case of Chronic swellings and tumours without pus or discharge.<sup>3</sup>

In Sepia pulse tension is somewhat greater than that of Staphysagria.<sup>4</sup> “But if the tumours instead of being soft, exhibit stony hardness and pulse character is hard, Antim crude 200 or higher does the same work as Staphysagria in soft tumours.”<sup>5</sup>

“Ipeacac has a peculiar pulse and it is akin to that of Natrum Mur. It is highly inflated, expanded, almost hollow inside and filled with gas, soft to touch with thin walls. In fevers of old persons often this kind of pulse is seen.”<sup>6</sup>

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1. *Tridosā Theory* p. 10

2. *Ibid.*, p. 11

3. *Ibid.*, p. 12

4. *Ibid.*, p. 11

5. *Ibid.*, p. 12

6. *Ibid.*, p.



The pulse changes within 24 hours and the patient is well in no time, if Ipeasac 30th potency 3 or 4 times a day, is given to the old suffering person.<sup>1</sup> “At times patients exhibit regular typhoid symptoms of delirium, diarrhoea, and high fever, but Ipeacas cures them all when given on the indication of pulse and not on the routine symptoms of nausea and vomiting.”<sup>2</sup>

“The pulse indicating Causticum is hard, inflated, expanded with thick wall, non-compressible even with heavy pressure. Patients possessing such a pulse are usually of large size, flabby, and obese with luxuriant eating habits. Such cases usually suffer from cancerous tumours like lipoma, neuroma, fibroma and such like.”<sup>3</sup>

**Peculiarity of language, metres, style of writing, method of exposition, etc. adopted in the composition of Nadivijnanam :**

The language of Nadivijnanam of Maharshi Kanada is uniform as it is clearly stated throughout its text. This work has been composed by Maharshi Kanada in Sanskrit in poetic order from the beginning to the end as noted below :

- 
1. *Tridosha Theory*
  2. *Ibid.*, p. 12
  3. *Ibid.*, p. 13

वक्त्रेभ्यः		पञ्चसंख्यागतेभ्यो
वेदा	जाता	ऋग्यजुःसामवेदाः ।
चाञ्चल्यदोषपूर्णत्वं		काठिन्यमतिमन्दता ।
रक्तं वमति सूक्ष्मत्वं	स्वस्थानस्य	विमोक्षणम् ।
स्तैमित्यं	गतिकौटिल्यं	सर्वासां दुष्टलक्षणम् ॥

(V. 64)

In its composition a care has been taken by the author to retain a pure form of Sanskrit in scholarly manner.

### Metres (Chhanda) :

The metre of the verses of *Nadivijnanam* used by the author in the presentation of their contents and treatment of their subject-matters is of varied characters, such as, *Shalini*, *Anustubh*, *Malini*, *Vasantatilaka*, *Indravajra* - *Upendravajra* (*Upajati*), *Sardulavikridita*, *Mandakranta*, etc.

#### 1. Shalini Chhanda :

Invocation verse of *Nadivijnanam* has been composed by Maharshi Kanada in Sanskrit in *Shalini Chhanda* (Metre) as noted below :—

वक्त्रेभ्यः		पञ्चसंख्यागतेभ्यो
वेदा	जाता	ऋग्यजुःसामवेदाः ।
तस्माद्घाताध्यैत	तस्मात्	तुराषाट्
तस्माज्ज्ञात्वा	वक्तुमर्हामि	शास्त्रम् ।

## 2. Anustubh Chhanda :

*Anustubh Chhanda* has been adopted by the author in the composition of the 1st verse as given below :

अङ्गुष्ठमूले करयोः पादयोर्गल्फदेशतः ।  
कपालपार्श्वयोः षड्भ्यो नाडीभ्यो व्याधि-निर्णयः ॥  
(V. 1)

He followed the same *chhanda* in the composition of the fourth, fifth, sixth, seventh, eighth, ninth, tenth, eleventh, twelfth, thirteenth, fourteenth, fifteenth, sixteenth, seventeenth, eighteenth, nineteenth, twenty-first, twenty-second, twenty-third, twenty-fourth, twenty-fifth, twenty-sixth, twenty-seventh, twenty-eighth, twenty-ninth, thirty-second upto sixty-fourth verses.

## 3. Malini Chhanda :

The author has used *Malini Chhanda* in the composition of the second verse as noted below :

विलसति मणिबन्धे ग्रन्थिरङ्गुष्ठमूले  
तदघरनमिताभिस्त्र्यङ्गुलीभिर्निपीड्य ।  
स्फुरणमसकृदेषा नाडीकायाः परीक्षा,  
पदमनुघुटिकाधोऽङ्गुष्ठमूले तथैव ॥  
(V. 2)

## 4. Vasantatilaka Chhanda :

The third verse has been composed by the author in *Vasantatilaka Chhanda* as noted below :—

ईषद्विनम्रघृतकूर्परभागभाजि,  
हस्ते प्रसारितकराङ्गुलिका त्रयेण ।  
अङ्गुष्ठमूलमधिपश्चिमवामभागे  
नाड्याः प्रभञ्जनगतेः सततं परीक्षा ॥

(V. 3)

### 5. *Indravajra-Upendravajra Chhanda* : (Upajati) :

The author has composed the twentieth verse in *Indravajra-Upendravajra Chhanda* (Upajati) as given below :

वान्तस्य शल्याभिहतस्य जन्तोर्वेगावरोधाकुलितस्य भूयः ।  
गतिं विधत्ते धमनी गजेन्द्र—मरालमालेव ककोल्वणेन ॥

(V. 20)

### 6. *Sardulavikridita Chhanda* :

*Sardulavikridita Chhanda* has been adopted by the author in the composition of the thirtieth verse as noted below :

पूर्वं पित्तगतिं प्रभञ्जनगतिं श्लेष्माणमाविभ्रतीं  
सन्तानभ्रमणं मुहुर्विदधतीं चक्राधिरूढामिव ।  
तीव्रत्वं दधतीं कलापगतिकां सूक्ष्मत्वमातन्वतीं  
नो साध्यां धमनीं वदन्ति मुनयो नाडीगतिज्ञानिनः ॥

(V. 30)

### 7. *Mandakranta Chhanda* :

Lastly, the author has adopted *Mandakranta Chhanda* in the composition of the thirty-first verse of *Nadivijnanam* as described below :—

जिह्वां जिह्वां शिथिलशिथिलं व्याकुले व्याकुलं वा ।  
 स्थित्वा स्थित्वा वहति धमनी याति नाशं च सूक्ष्मा ।  
 नित्यं स्थानात् स्खलति पुनरप्यङ्गुलीं संस्पृशेद् वा  
 भावैरेवं बहुविधविधैः सन्निपातादसाध्या ॥

(V. 31)

### Style of writing and method of exposition :

The style of a work is the voice of words uttered by the author, producing an effect on the feelings of the readers by its action working upon their conscious minds. It may be personal and impersonal. The style of *Nadivijnanam* used by Maharshi Kanada in presentation of its contents and in dealing with its subject-matter is mainly of one character, viz. poetry. It begins with the metre of poetry in composing its verses in one chapter. The chapter consists of sixty four verses in Sanskrit only.

It is the simple classical Sanskrit exhibiting its rich style in one chapter with clarity. When the style of *Nandivijnanam* is judged with an objective approach, it is found that it has served its purpose in full by embodying the teachings on the science of pulse in classical language.

It contains literary flourishes in the form of verses faithfully transmitted from generation to generation and in the manner of exposition of the author to convey the thoughts and ideas on the science of pulse to the readers. The method of

explaining the medical concepts on the science of pulse made them easily comprehensible to the students of *Ayurveda* as for example :

**Literary flourishes :**

लावतित्तिरिवात्तर्क - गमनं सन्निपाततः ।  
कदाचिन्मन्दगा नाडी कदाचिच्छीघ्रगा भवेत् ॥  
(V. 6)

वात्तस्य शल्याभिहतस्य जन्तोर्वेगावरोधाकुलितस्य भूयः ।  
गतिं विधत्ते धमनी गजेन्द्र-मरालमालेव कफोद्वेगेन ॥  
(V. 20)

चाञ्चाल्यदोषपूर्णत्वं काठिन्यमतिमन्दता ।  
रक्तं वमति सूक्ष्मत्वं स्वस्थानस्य विमोक्षणम् ॥  
स्तैमित्यं गतिकौटिल्यं सर्व्वासां दुष्पलक्षणम् ॥  
(V. 64)

The author made a study of the science of pulse with the purpose of attaining result and truth with devotion on the basis of his scheme in his short treatise. He searched out something and got a line of meaning in the facts of the science of pulse as satisfying his inquisitive mind. Here the style of expression is scientific. So the voice of words spoken by him is impersonally logical with a stress laid on the science of pulse.

**Estimate of the literary and asthetic aspects of Nadivijnanam :**

Literature big or small, is to be judged by its value to humanity. Its value is determined by the

principle that to what extent does it contribute to the progress of mankind by enabling him to live with more happiness, more intensity, more profoundness, more wisdom, and more freedom in the mundane world.

Next comes the question of technique used in the work for proper criticism which distinguishes its subject-matter, guiding one to a finer appreciation of composition and making him realize more clearly and completely what the author has meant there. Literature carries the message of knowledge and cultural heritage of a people or a country from the distant past upto the present and preserves the literature of to-day for the future generation through the successive stages of the social evolution. From this angle of vision on the literature *Nadivijnanam* testifies sufficiently to the linguistic and literary development of its age and value to mankind by conveying the knowledge of the science of pulse to some extent.

It deals with the examination of six pulses for the diagnosis of diseases, the movement of three pulse—*vata*, *pitta*, and *kaph*, different kinds of movement of the pulses indicating various kinds of disease, incurable cases of patients indicated by different movements of the pulses relating to *vata*, *pitta*, and *kaph* in successive orders and *Tridosanadi* (pulse having three faults or typhoid) indicating *vata*, *pitta*, and *kaph*, the cases of death indicated by

different kinds of movement of the pulse of a patient, the prediction about the times of deaths of patients as indicated by the movements of their respective pulses, the longevity of a person as indicated by the movement of his pulse, the curability of a disease on the basis of the movement of the pulse of a patient.

Good-expression, purity of the pulse, staying at its own place, steadiness and non-slowness of the pulse indicating auspicious symptoms; fullness of fault of restlessness, hardness, too much slowness of the pulse, vomiting of blood, thinness of the pulse, leaving of its own place, its feebleness and its crooked movement indicating inauspicious symptoms. Thus the pulse's movement is the witness to the soul contained in the body.

In regard to the language, metre and style as discussed above, they represent an age different from the present in which Maharshi Kanada imparted his teachings on the science of pulse to his followers in particular to make them intelligible in poetic language. The total effect of the texture and spirit of the language of *Nadivijnanam* enriched with medical thoughts and ideas on the science of pulse inspires one to dive deep into its subject-matter with energy to collect the hidden treasure of the knowledge of the science of pulse preserved in this short treatise.

It is to be observed how the richness of vocabulary in this work produces similar effect on the minds of the medical students by truly expressing



and explaining all aspects of its varied contents touched upon without faltering, slowness, hazziness by presenting a clear and concise conception about them.

In *Nadivijnanam* Maharsi Kanada has used three styles, viz. descriptive, explanatory and emotive in the presentation of its varied medical contents on the science of pulse and explaining its subject-matter in clear, concise and explicit manner.

The literary value of *Nadivijnanam* lies in the fact that its Sanskrit language expresses clearly by its proper terminology the medical thoughts and ideas of its creative genius, dealing with various aspects of the science of pulse.



## Science of Pulse composed by the great sage, Kanada

नमः शिवाय

वक्त्रेभ्यः पञ्चसंख्यागतेभ्यो,  
वेदा जाता ऋग्यजुःसामवेदाः ।  
आयुर्वेदाश्चार्थवेदाश्च तस्मिन्,  
आस्तां शम्भौ श्रीकणादस्य भक्तिः ॥  
आस्ते वेदः पञ्चमो वेदयकारुयो,  
वेत्ता कश्चित् तस्य नास्ते महेशात् ।  
तस्माद्घाताध्यैत तस्मात् तुराषाद्,  
तस्माज्ज्ञात्वा वक्तुमर्हामि शास्त्रम् ।

### Salution to Siva

From the five mouths of Siva the Vedas were born, viz. *Rig*, *Yajuh*, *Samaveda*, *Ayurveda* and *Atharvaveda*. Having devotion of Sri Kanada to that Sambhu, the fifth Veda called *Vaidyaka* is brought into existence. There was no knower of

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१. अथर्ववेदाश्च

*Nadi-Chikitsa*

21

that (*Panchamaveda*) except Mahesa. Brahma learnt it from him (Mahesa), Turasat (learnt it) from him (Brahma). Having learnt it from him (Turasat, i.e. the *guru* of Sri Kanada) I desire to speak the *Sastra*. (i.e. Mahamuni Sri Kanada desires to speak about the Science of pulse).

### नाडी-चिकित्सा

अङ्गुष्ठमूले करयोः पादयोर्गुल्फदेशतः ।  
कपालपार्श्वयोः षड्भ्यो नाडीभ्यो व्याधिनिर्णयः ॥ V. १ ॥

### Examination of Pulse

(1) Diagnosis of diseases is made from six pulses (i.e. beatings of six pulses) – two pulses at the roots (bases) of the two thumb fingers, two pulses of the lower parts of the two ankles of the two feet, and two pulses of the two sides of the forehead (i.e. temples).

विवसति मणिबन्धे ग्रन्थिरङ्गुष्ठमूले,  
तदधरनमिताभिस्त्र्यङ्गुलीभिर्निपीड्य ।

स्फुरणमसकृदेषा नाडीकायाः परीक्षा,  
पदमनुघुटिका धो-ऽङ्गुष्ठमूले तथैव ॥ V. २ ॥

(2) The pulse or gland (*granthi*) lies or flows at the base (root) of the thumb finger in the wrist. Below it this examination of the immediate pulsation (or beating) of the pulses is to be made by pressing it with three *anamita* (unbending) fingers with gentle touch. Just like that the examination of the pulse at the lower part of the ankle of the foot should be made as it is done at the base of the thumb finger.

ईषद्विनम्रधृतकूर्परभागभाजि,  
हस्ते प्रसारितकराङ्गुलिकात्रयेण ।  
अङ्गुष्ठमूलमधिपश्चिमवामभागे,  
नाड्या प्रभञ्जनगतेः सततं परीक्षा ॥ V. ३ ॥

(3) The physician should place the hand of the patient to be examined on his left hand by touching the internal pulse running through the patient's elbow, held slightly bent (*Kurparabhagabhaji*), with his three fingers—index finger, middle finger and ring finger (of his right hand). The examination of the pulse, having *pravanjanagati* (movement of air), should always be made at the base (root) of the thumb finger of the hand, at the lower part of the ankle of the foot, at the root of the ear, at the root of the nose, and at the front of the hole of the ear.

आदौ च बहते वातो मध्ये पित्तं तथैव च ।  
अन्ते श्लेष्मवती नाडी सन्निपातस्त्रिलक्षणैः ॥ V. ४ ॥

(4) First flows *vata* (air, i.e. the pulse of *vata*), in the middle flows the pulse of *pitta* (bile or fire) like that, at last flows the pulse of *slesma* (Phlegm); the pulse of *Sannipata* (typhoid or *Tridosha*) is indicated by the three combined characters (of *vata*, *pitta*, and *Slesma*).

वाताद्वक्रगता नाडी चपला पित्तवाहिनी ।  
स्थिरा श्लेष्मवती ज्ञेया मिश्रितां द्वन्द्वजां विदुः ॥ V. ५ ॥

(5) The pulse of *vata* becomes crooked due to *vata* (intensity of air), *Pittavahini nadi* (the pulse carrying or indicating bile) is restless; the pulse, having or

indicating phlegm (*Slesmavatinadi*) is to be known as slow-going (or steady) (*sthira slesmavati*). In the case of mixed symptoms (*misritam*) it (the pulse) should be known as two combined (or joint) pulses.

लावतित्तिरिवार्त्तिक-गमनं सन्निपाततः ।

कदाचिन्मन्दगा नाडी कदाचिच्छीघ्रगा भवेत् ॥ V. ६ ॥

(6) The movement of the pulse due to three combined faults (*vata*, *pitta*, and *slesma*) is like that of *Lavapaksi* (a quail), *Tittira* (francoline partridge), *varttaka* (duck). Sometimes the pulse is slow-going, sometimes it becomes fast, etc.

कामात् क्रोधाद् वेगवती क्षीणा चिन्ताभयाप्लुता ।

लघ्वी वहति दीप्ताग्नेस्तथा बलवती मता ॥ V. ७ ॥

(7) The pulse becomes fast or accelerated by (due to) sexual passion and anger; it becomes feeble in the case of a person having thought and fear. The pulse of a person, having inflamed fire, flows as lightly (*laghvi*) and is known to be forceful (strong).

चपला क्षुधितस्यासौ तृप्तस्य वहति स्थिरा ।

मन्दाग्नेः क्षीणघातोश्च नाडी मन्दवहा भवेत् ॥ V. ८ ॥

(8) The pulse of a hungry person is restless, while the pulse of a satisfied person (with food) flows steady. The pulse of a person, having slowness of digestion (*mandagni*) and waste of bodily humours becomes slow going.

अमृक्पूर्णा भवेत् कोष्णा गुर्वी सामा गरीयसी ।

सुखिनस्तु स्थिरा ज्ञेया तथा बलवती मता ॥ V. ६ ॥

(9) The full-blooded (*asrkpurna*) pulse of a person becomes slightly hot and heavy, the pulse indicating mucus (*sama*) is large. The pulse of a satisfied person (*sukhinah*) is known to be steady and forceful.

ज्वरवेगे च धमनी सोष्णा वेगवती भवेत् ।

अतीसारे भवेन्नाडी शीता मन्दगतिस्तथा ॥ V. १० ॥

(10) In the case of intensity of fever the artery (pulse) becomes hot and accelerated. In dysentery (*atisara*) the pulse becomes cold and slow-going.

विसूच्यां दृश्यते नैव नैव स्थानं विमुञ्चति ।

कृमिरोगे स्थिरा मन्दा क्वचिद्वक्रा क्वचिमृन्दुः ॥ V. ११ ॥

(11) In the case of cholera (*visuchika*) the pulse is imperceptible and leaves its own place. In the disease of worms (*krimiroga*) the pulse becomes steady and slow, sometimes crooked and sometimes mild. (*mrdu*).

पाण्डौ तु केवलं नाडी कृशा भिन्ना प्रचारिणी ॥ V. १२ ॥

(12) In jaundice disease (*panduroga*) the pulse is feeble only, splitting and expanded (*pracarini*).

रक्तपित्ताद् वहेन्नाडी मन्दा च कठिना मृदुः ।

नाडी नानागतिर्भूत्वा राजयक्षिन् प्रवर्त्तते ॥ V. १३ ॥

(13) Due to the derangement of blood produced by bile (*Raktapitta*)<sup>1</sup> the pulse flows slow, hard and

1. Derangement of blood produced by bile.

mild. In Pthisis (*Kshaya*) the pulse goes on by making different kinds of movement.

उच्चैः प्रवहते नाडी तथा क्षिप्रमुरक्षते ।

क्षये च नाडिका क्षीणा कासे कम्पपरायणा ॥ V. १४ ॥

(14) The pulse flows in high tension and is fast in the case of ulcer of Chest (*urahksata*). In Pthisis (*Kshaya*) the pulse becomes feeble (*Kshina*) and in cough it is trembling (*Kampaparayana*).

सूक्ष्मा स्थिरा तथा मन्दा श्वासे तीव्रगतिर्भवेत् ।

हिककायां बहुकम्पा सा तथा च द्रुतगामिनी ॥ V. १५ ॥

(15) In the case of Asthma there becomes thin, steady, slow and intense movement (accelerated movement) of the pulse. In hiccough (*hikka*) it becomes very much trembling and fast-moving.

गम्भोरा स्वरभेदे स्यात् चला तन्तुसमा तथा ॥ V. १६ ॥

(16) In hoarseness of voice or broken articulation (*svarabheda*) the pulse becomes restive or serious (*gambhira*) or tortuous and thready (*tantusama*) like a thread.

मदात्ययेऽपि सूक्ष्मा स्यात् कठिना परितो जडा ॥ V. १७ ॥

(17) The pulse becomes thin, hard and inert (or motionless) on both sides (*parito*) in the case of distemper resulting from drunkenness (*madatyaya*) also.

आनाहे मूत्रकृच्छ्रे च भवेन्नाड़ी गरिष्ठता ।

प्रमेहे तु जड़ा सूक्ष्मा ग्रन्थिरूपा च जायते ॥ V. १८ ॥

(18) In the case of *Anaha* (suppression of urine) and *Mutrakrcchra* (painful discharge of urine) the pulse becomes large (or heavy and hard). But in urinary disease or gonorrhoea (*prameha*) it becomes inert or motionless, thin and (like) knotty (gland).

व्रणेऽतिकठिने देहे प्रयाति पैत्तिकं क्रमम् ।

भगन्दरानुरूपेण नाड़ीव्रणनिवेदने ।

प्रयाति वातिकं रूपं नाड़ी पावकरूपिणी ॥ V. १९ ॥

(19) In boil (*vraṇa*) very hard (i.e. unripe boil) in the body the pulse goes the way (order) of *paittikanadi* (bilious pulse). In the case of fistula (*bhagandar*) and sinus or ulcer (*nadivraṇa*) the fire-like pulse goes on as agitated like the movement of airy pulse (*vatikanadi*).

वान्तस्य शल्याभिहतस्य जन्तोर्वेगावरोधाकुलितस्य भूयः ।

गतिं विधत्ते धमनी गजेन्द्र-मरालमालेव कफोत्वणेन ॥ V. २० ॥

(20) In the case of vomiting (*vantasya*) or injury or wound caused with a weapon or anxiety for holding (stopping) the evacuation of stool and urine, etc. again and again, the movement of the pulse becomes like that of an elephant and a gander due to the excess or agitation of phlegm, i.e. the pulse becomes thick and slow.

ज्वरे तु रमणे नाड़ी क्षीणा च मन्दगामिनी ।

ज्वरे कामार्तिरूपेण भवन्ति विकलाः शिराः ॥ V. २१ ॥



(21) In fever, having sexual enjoyment, the pulse becomes feeble and slow-moving. In fever caused by sexual passion (*jvare kamarttirupen*) the pulse become deranged (*vikalah*).

व्यायामे भ्रमणे चैव चिन्तया घनशोकतः ।

नानाप्रकारगमना शिरा गच्छति विज्वरे ॥ V. २२ ॥

(22) The pulse makes different kinds of movement in physical exercise (*vyayama*) (or hard labour) and walking, by thought (*cintaya*) (study, etc.) and due to grief on the loss of wealth (*dhanasokatah*), even in the case of feverless state (*vijvare*).

अजीर्णेन भवेन्नाडी कठिना परितो जडा ।

प्रसन्ना तु द्रुता शुद्धा त्वरिता च प्रवर्तते ॥ V. २३ ॥

(23) The pulse becomes hard and inert or slow-moving in the case of indigestion (*ajirna*) on both sides (*parito*), i. e. in both cases of *pakva ajirna* (chronic indigestion) and *apakva ajirna* (not chronic indigestion). It becomes soft, devoid of sluggishness (*jadatasunya*) and fast-moving in the case of *sujirna* (well digestion), i.e. absence of indigestion.

पुष्टिस्तैलगुडाहारे मांसे च लगुडाकृतिः<sup>१</sup> ॥ V. २४ ॥

(24) The pulse becomes undeveloped or unnourished (*pustihina*) and flows slowly and slowly in the case of *pakvajirna* (chronic indigestion or dyspepsia).

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१. अत्र “मांसात् स्थिरवहा नाडी दुग्धात् शीता बलीयसी” इति पाठान्तरम् ।

It becomes thick and hard like the form of a stick (*lagudakrti*) jumping upwards, in the case of taking nourishing food, oily stuff, etc. sweet and meat also.

रम्भागुडवटाहारे शुष्करक्षादिभोजने ।  
वातपित्तातिरूपेण नाडी बहति निष्क्रमम् ॥ V. २५ ॥

(25) In the case of taking banana (plantain), molasses, *vada* (a kind of cake), dry and rough articles like *chipitaka* (flattened rice), etc. the pulse flows like a snake or sometimes like a frog (*plavagatih*) as in the case of the disease caused by vitiation of bodily humours-*vata* (air) and *pitta* (bile or fire).

मधुरे बहिगमना तिक्ते स्याद् भूलता गतिः ॥ V. २६ ॥

(26) The pulse moves outwards like a peacock in the case of taking sweet articles (*madhure*), it moves like an earth worm in that of taking bitter articles (*tikte*).

अम्ले कोष्णा प्लवगतिः कटुके भृङ्गसन्निभा ।  
कषाये कठिना म्लाना लवणे सरल द्रुता ॥ V. २७ ॥

(27) The pulse, becoming a little hot, moves like a frog (*Plavagatih*) in the case of taking acidic-tasting stuff and it moves like a *finga* (*Bhrnga*) (a kind of quail) in that of taking sour-tasting article (*Katuke*). It becomes hard and pale in taking astringent tasting stuff (*Kashaye*), while it becomes straight and fast in taking saltish stuff (*lavane*).

एवं द्वित्रिचतुर्योगे नानाधर्मवतीं शिरा ।

उपवासात् भवेत् क्षीणा नाडी च द्रुतगामिनी ॥ V. २८ ॥

(28) Thus the pulse makes different kinds of movement, if two, three or four kinds or *rasa* (tasteful stuff) are taken.

The pulse becomes feeble and fast-moving from fasting (*upavasat*).

सम्भोगाच्च भवेत् क्षीणा ज्ञेया द्रुतगतिस्तथा ॥ V. २९ ॥

(29) The pulse is known to become feeble (*Kshina*) and fast (*drutagatih*) from sexual enjoyment (*sambhogat*).

पूर्वं पित्तगतिं प्रभञ्जनगतिं श्लेष्माणमाविभ्रती,

सन्तानभ्रमणं मुहुर्विदधतीं चक्राधिरूढामिव ।

तीव्रत्वं दधतीं कलापिगतिकां सूक्ष्मत्वमातन्वतीं,

नोसाध्यां घमनीं वदन्ति मुनयो नाडीगतिज्ञानिनः ॥V. ३०॥

(30) If the movement of *pitta* (bile) (i.e. pulse relating to bile) is felt first in the pulse, that of *vayu* (air) in the middle, next that of phlegm or if the pulse is found revolving like a revolving thing mounted on a wheel (*Chakradhirudhamiva*) or if it is too fast or sometimes it moves like a peacock (*Kalapigatikam*), sometimes if it gets thinner and thinner by and by, then the experts of the movement of the pulse (*Nadigatiijnaninah*) say that the pulse indicating the disease is not curable (i.e. it indicates incurability of the disease).

जिह्वां जिह्वां शिथिलशिथिलं व्याकुलं व्याकुलं वा,  
 स्थित्वा स्थित्वा वहति धमनी याति नाशञ्च सूक्ष्मा ।  
 नित्यं स्थानात् स्खलति पुनरप्यङ्गुलीं संस्पृशेद्वा,  
 भावैरेवं बहुविधविधैः सन्निपातादसाध्या ॥ V. ३१ ॥

(31) If *Tridosadusta Nadi* (pulse indicating three faults)—*vayu* (air), *pitta* (bile or fire), and *kaph* (phlegm) sometimes flows slowly and slowly (*jihman jihman*), sometimes sluggishly and sluggishly, (*Sithilasithilam*), sometimes anxiously and anxiously, (*vyakulam vyakulam va*), hither and thither like a terrified man, sometimes if it pulsates by halting (*Sthitva sthitva*), sometimes if it goes on by delaying and delaying, or if it is so thin (that its beating is not felt at ail), i.e. it stops or gets lost, if sometimes the pulse leaves its own fixed place (*nityam sthanat*) (the base of the thumb finger) or once again also it touches the examining fingers (by coming to its own place), thus affected by many kinds of states (conditions) due to three faults—*vata*, *pitta*, and *kaph* (air, fire, and phlegm), (then) the case of the patient should be considered to be incurable because of *Sannipatadosa* (three combined faults).

महातापेऽपि शीतत्वं शीतत्वे तापिता शिरा ।  
 नानाविधा गतिर्यस्य तस्य मृत्युर्न संशयः ॥ V. ३२ ॥

(32) If the pulse of a person is cold even in the case of intense heat in his body, and if it is hot in the case of feeling coldness in his body, there will take place the death of the person whose pulse makes different kinds of movement. There is no doubt (about it).

यात्युच्चका स्थिरा नाडी या चयं मांसवाहिनी ।

या च सूक्ष्मा च वक्रा च तामसाध्यां विनिदिशेत् ॥V. ३३॥

(33) The pulse which is *mamsavahini* (meat-carrying) goes on high (i.e. beats upwards) and is steady and hard like a stick and the pulse which is thin and crooked, ( then ) they should be considered as incurable (i. e. they indicate incurability of the diseases).

स्वस्थानविच्युता नाडी यदा वहति वा न वा ।

ज्वाला च हृदये तीव्रा तदा ज्वालावधि स्थितिः ॥V. ३४॥

(34) If the pulse of a patient, leaving its own place (i. e. the base of the thumb finger) (*Svasthanavichyuta*) beats once again by halting and halting intermittently or it does not beat, and there is too much intense burning sensation in his heart, then the condition of his life should be known up to that burning (i. e. stoppage of that burning sensation) and his death takes place at the same time (simultaneously) [*gvatavadhi sthitih*]

वामनाडी भवेत् सत्यं यदि स्यात् कुण्डलाकृतिः ।

मृत्युं शीघ्रं विजानीयात् यदि शत्रुसमो भवेत् ॥ V. ३५ ॥

(35) If *vamanadi* (left-hand-pulse) of a person becomes truly circular [*Kundatakrii*] in its movement, his death should soon be known as if it becomes like his enemy. [*Satrusamo*]

अनिलो याति पित्तस्य पित्तं याति कफालयम् ।

कफो वा कण्ठमायाति जीवनं तस्य दुर्लभम् ॥ V. ३६ ॥

(36) If air (*anila*) of a person goes to the place of fire or bile (*pitta*), fire or bile (*pitta*) goes to the place of phlegm (*kaph*), or phlegm (*kaph*) comes to the throat, his life is difficult to be saved.

अनुत्सुका स्थिरा मन्दा दुष्टदुष्टा प्रचारिणी ।

अतिसूक्ष्मातिकुटिला नाडी वहति मृत्यवे ॥ V. ३७ ॥

(37) The pulse of a person which is not restless, or indifferent (*anutsuka*), motionless (*sthira*), slow (*manda*) and tortuous or very bad (*dustadusta*), inflated or expanded (*pracharini*), very thin (*atisuksma*) and crooked (*kutilla*), flows towards (for) death.

नाडी मध्यवहाङ्गुष्ठमूले सानर्थमुत्सृजेत् ।

शनैरुद्धार्थिगमना मृत्युं सा च प्रकाशते ॥ V. ३८ ॥

(38) The pulse of a person which is running inside at the base of the thumb finger creates trouble (*anartha*) (bad effect) and moving as faltering slowly, reveals or (manifests) death.

अङ्गुष्ठमूलतो बाह्ये द्व्यङ्गुले यदि नाडिका ।

प्रहरार्द्धाद् बहिर्मुत्सृज्य विजानीयाद्विचक्षणः ॥ V. ३९ ॥

(39) If the pulse of a person becomes *madhyareka*, (central line) i. e. it moves outside the base of the thumb finger at a distance of two fingers, the wise should know his death after  $\frac{1}{2}$  *praharas*.

साद्ध्याङ्गुलाद् बाह्ये यदि तिष्ठति नाङ्गिका ।

प्रहराच्च बहिर्मुत्युर्जायते नात्र संशयः ॥ V. ४० ॥

(40) If the pulse of a person stays outside two and a half fingers (distance) from its fixed place, there is no doubt here that his death will take place after a *prahara*.

द्व्यङ्गुलाद् बाह्यतो नाङ्गी मध्यरेखा भवेत् यदि ।

तत्साद्धप्रहरात् मृत्युरवश्यं जायते नृणाम् ॥ V. ४१ ॥

(41) If the pulse of a person becomes *madhyarekha* (i. e. stays or moves) outside two fingers (of distance), then his death must take place after  $1\frac{1}{2}$  *praharas*.

साद्ध्याङ्गुलाद् बाह्ये यदि तिष्ठति नाङ्गिका ।

तस्यैव मरणं सत्यं प्रहरात् त्रितयाद् बहिः ॥ V. ४२ ॥

(42) If the pulse of a person stays outside  $2\frac{1}{2}$  fingers (of distance) from the fixed place, his death also will take place surely after three *praharas*.

साद्ध्याङ्गुलिर्गता नाङ्गी यदि तिष्ठति निश्चितम् ।

चतुर्भिः प्रहरैस्तस्य जायते मरणं ध्रुवम् ॥ V. ४३ ॥

(43) If the pulse of a person exists certainly by going outside  $1\frac{1}{2}$  fingers (of distance), his death takes place surely after four *praharas*.

पादाङ्गुलगता नाङ्गी न वा तिष्ठति निश्चला ।

षड्भिस्तु प्रहरैस्तस्य ज्ञेयो मृत्युर्विचक्षणैः ॥ V. ४४ ॥

(44) If the pulse of a person, going to the toes of his feet, exists as motionless or not, his death is known by the wise to take place after six *praharas*.

अङ्गुलाभ्यन्तरे नाडी वक्रगा यदि तिष्ठति ।

मरणं तस्य जानीयात् सप्तभिः प्रहरैर्बुधः ॥ V. ४५ ॥

(45) If the pulse of a person exists as moving crookedly inside the finger, the intelligent man should know, his death to take place after seven *praharas*.

अङ्गुलाभ्यन्तरे नाडी मन्दस्पन्दगमा यदि ।

अष्टभिः प्रहरैर्मृत्युनिर्दिष्टो मुनिपुङ्गवैः ॥ V. ४६ ॥

(46) If the pulse of a person is going on (*moving*) by slowly beating inside the fingers, his death is ascertained by the great sages to take place after eight *praharas*.

स्थिरा नाडी मुखे यस्य विद्युद्द्योत इवेक्ष्यते ।

दिनैकं जीवितं तस्य द्वितीये म्रियते ध्रुवम् ॥ V. ४७ ॥

(47) The life of a person whose pulse is felt once and again (*Vidguddya iva*) like a lighting at the root (base) of the thumb by halting intermittently is only one day. On the second day his death will surely take place.

अङ्गुलाभ्यन्तरे नाडी शीतला यदि तिष्ठति ।

प्रहरैर्नवभिस्तस्य मरणं निश्चितं भवेत् ॥ V. ४८ ॥

(48) If the pulse of a person exists (or is felt) as cold inside the fingers, his death will surely take place after nine *praharas*.



पादाङ्गुलतो बाह्ये नाडी तिष्ठति चञ्चला ।

प्रहरैर्दशभिर्ज्ञेयो मृत्युस्तस्य न संशयः ॥ V. ४६ ॥

(49) If the pulse of a person exists as restless outside the (toes) from the feet, there is no doubt that his death should be known to occur after ten *praharas*.

पादस्याङ्गुलमध्ये च नाडी सोष्णा च जायते ।

यामैरेकादशमितैर्मृत्युस्तस्य विनिर्दिशेत् ॥ V. ५० ॥

(50) If the pulse of a person inside the toes of the feet becomes hot, his death is indicated after eleven *praharas*.

चरणाङ्गुलमध्ये च नाडी शीतवती भवेत् ।

द्वादशप्रहरैस्तस्य ज्ञेयो मृत्युविचक्षणैः ॥ V. ५१ ॥

(51) If the pulse of a person inside the toes of the feet (or in between the toes) becomes cold, his death should be known by the experienced physicians to take place after twelve *praharas*.

अर्द्धाङ्गुलगता नाडी शीतला यदि तिष्ठति ।

त्रिदशप्रहरैस्तस्य मरणं जायते ध्रुवम् ॥ V. ५२ ॥

(52) If the pulse of a person going to half a finger (outside) exists as cold, his death takes place certainly after thirteen *praharas*.

अर्द्धाङ्गुलगता नाडी सोष्णा वेगवती भवेत् ।

यामैश्चतुर्दशमितैर्मृत्युर्ज्ञेयो विचक्षणैः ॥ V. ५३ ॥

(53) If the pulse of a person, going half a finger (outside), becomes hot and accelerated, his death is known by the wise to take place after fourteen *praharas*.

सादर्धाङ्गुलगता नाडी चञ्चला यदि तिष्ठति ।

प्रहरैस्तिथिसंख्यैश्च मरणं निर्दिशेद् बुधः ॥ V, ५४ ॥

(54) If the pulse of a person going  $1\frac{1}{2}$  fingers (*sarddhangulagata*) out exists as restless, the wise man indicates or predicts his death after fifteen *praharas*.

पादाङ्गुलगता नाडी सहसा यदि तिष्ठति ।

षोडशप्रहरैस्तस्य पञ्चत्वं निर्दिशेद् बुधः ॥ V. ५५ ॥

(55) If the pulse of a person, going to the toes of the feet suddenly stops, the wise indicates his death to occur after sixteen *praharas*.

क्षणाद् गच्छति वेगेन क्षणाद् गच्छति शान्तताम् ।

सप्ताहात् मरणं तस्य यद्यङ्गं शोथवर्जितम् ॥ V. ५६ ॥

(56) If the pulse of a person goes on with acceleration for a moment and stops for a moment, his death will take place after a week, if the body is devoid of oedema (*Sothavarjitam*).

भूलताभुजगाकारा नाडी देहस्य संक्रमात् ।

विशीर्णे क्षीणता याति मासान्ते मरणं भवेत् ॥ V. ५७ ॥

(57) If the pulse of a person is weak and smooth like (the body of) an earth worm and moves like it sometimes it is fully developed like the body of a snake (*Bhingakara*) and moves with great speed crookedly, sometimes (it) becomes feeble (thiu) according to the wasting or emaciation of the body (*visirn*) his death will take place at the end of one month.

वामनाड़ी स्वल्परेखा हनुमूले परीक्ष्यते ।

पञ्चवर्षाधिकञ्चैव जीवनं नात्र संशयः ॥ V. ५८ ॥

(58) If *vamanadi* (left-hand pulse) of a person having *Svalparekha* (less lines) is examined at the root of *hanu* (cheek), there is no doubt here that his life is more than five years.

वामनाड़ी दीर्घरेखा कक्षमूले च नृत्यति ।

पञ्चाशत्तोऽधिकं जीवेत् धनिको धार्मिको भवेत् ॥ V. ५९ ॥

(59) If *vamanadi* of a person having *dirgharekha* (long lines) dances at the root of *Kaksa* (armpit), he will live more than 50 years and become rich and pious.

वामनाड़ी स्वल्परेखा हनुमूले च नृत्यति ।

शतवर्षाधिकं तस्य जीवनं नात्र संशयः ॥ V. ६० ॥

(60) If *Vamanadi* of a person having *svalpa-rekha* (less lines) dances at the root of *hanu* (cheek), there is no doubt that he will live for more than one hundred years.

वामनाड़ी दीर्घरेखा हस्तमूले च नृत्यति ।

जीवेत् पञ्चशतं वर्षं नात्र कार्य्या विचारणा ॥ V. ६१ ॥

(61) If *Vamanadi* having *dirgharekha* (long lines) dances at the root of the hand, no thought is to be made here that he will live for five hundred years.

न विमुञ्चति स्वस्थानं नाडी सूक्ष्मा विभाव्यते ।

तस्य मृत्युभयं नास्ति व्याधिरप्युपशाम्यति ॥ V. ६२ ॥

(62) If the pulse of a person does not leave its own place and is considered to be thin, he has no fear of death, his disease also gets cured.

सुव्यक्ता निर्मलत्वं च स्वस्थानस्थितिरेव च ।

अचाञ्चल्यममन्दत्वं सर्वासां शुभलक्षणम् ॥ V. ६३ ॥

(63) Good expression (*suvyaktata*), purity (*nirmalatva*), and staying at its own place (*Svasthanasthiti*), non-restlessness (*achanchalyam*) and non-slowness (*amandatvam*) of the pulses of a person are auspicious symptoms for all pulses.

चाञ्चल्यदोषपूर्णत्वं काठिन्यमतिमन्दता ।

रक्तं वमति सूक्ष्मत्वं स्वस्थानस्य विमोक्षणम् ।

स्तैमित्यं गतिकौटिल्यं सर्वासां दुष्टलक्षणम् ॥ V. ६४ ॥

इति महामुनिकणादविरचितं नाडीविज्ञानम् ॥

(64) Fullness of fault of restlessness (*chanchalyadosa-purnatvam*), hardness; too much slowness of the pulse (*atimandata*); vomiting of blood; its thinness (*suksmatvam*); leaving of its own place (*vimoksanam*); its dimness or feebleness (*staimityam*); and crooked movement (*gatikautilyam*) are inauspicious or bad symptoms for all pulses (*sarvasam dustalaksanam*). Thus ends the Science of Pulse composed by the great sage Kanada.

## C O N C L U S I O N

There is no mention of the examination of the pulse in *Charakasamhita* and *Susrutasamhita*. The subject of the examination of the pulse, which is found in *Nadivijnanam* and *Nadiprakasam* is not easily comprehensible to the common people. So the study of the science of pulse should be presented in simple language and in brief for the understanding and benefit of the students of *Ayurveda*, its physicians and the society at large.

Take for example, *Vatikajvara* (Rheumatic fever or fever caused by some derangement of bodily humour *vata*, air); In its first stage, there will be a sensation of chilliness in the body of a patient and in the end there being heat in his body, the remission of fever will take place gradually. It is called *vatikajvara*. In the Allopathic and Homeopathic Medical Sciences, it is called simple intermittent fever.

At the time of chilliness of the patient his pulse contracts, consequently the blood belonging to his pulse flows in a narrow stream or current (*dhara*). It will not be felt if the pulse is touched by the finger of the physician.

In *Ayurvedic* Medical Science or *Nadivijana* (Science of pulse), it is called feebleness of bile (or fire). Therefore, at the time of sensation of chillness of the patient, it can be said that there have taken place the agitation (intensity) of *vayu* (air) and feebleness of bile (fire) due to their respective derangements.

At the time of fever the pulse expands, then the blood of the patient flows in thick current and it is felt by the touch of fingers of the physician. At this stage, there take place the agitation (or intensity) of *pitta* (bile or fire) and feebleness of *vayu* (air). If these two elements are known *Vatadhikya* (intensity or muchness of air), and *pittadhikya* (intensity or muchness of bile or fire) of a healthy person can be determined.

In the case of intensity of *Kaph* (phlegm or water), the pulse of a patient becomes slow-moving (*mandagati*). According to the *Ayurveda*, the nature of *vayu* (air) is cool, that of *pitta* (bile or fire) is hot, and that of *kaph* (phlegm) is equally cool and hot, That is why *Slesma* or *Kaph* (phlegm) maintains the equilibrium of *vayu* (air) and *pitta* (bile or fire).

In order to know whether the patient has got fever or not it is not only necessary to examine the increase of the speed of movement of the pulse of a patient, but it is also needful to examine the heat of his pulse. In winter, if a patient comes to a physician after dipping his hand into cold water, the heat of

his pulse can not be felt by the touch of the finger of the physician. So the heat of his body also should be examined to get the correct stage of his fever.

There are two pluses running at two sides of a person near the shoulder joints, if one of them is pressed by the touch of the finger of the physician, the pulse of that side is not found. Even the missing or vanishing pulse of a dying patient may come again to its own place in the wrist (*Svasthanasthiti*) by the power or action of medicine. In the case of ulcer of chest of a patient his death may occur by sudden discharge of his blood. The death of a patient may also take place in the case of dyspnoea and heart disease of a patient by sudden gasping or breathing trouble. In cholera and *Vatapravalroga* (air-intensive disease) the death of a patient may occur by sudden cramp in his chest. Therefore, the physician cannot depend only on the examination of the pulse of a patient without a thorough check up and examination of the nature of his disease and other organs of his body.

There have been such cases of spleen, liver, fever and dropsy, over and above such diarrhoea that not a drop of water stays in the stomach; such ulcer that uvula and palate and gum of teeth are on the verge of disintegration; such a case that a patient remained without food for three days because of his incapacity to drink even milk; such diseases as bleeding from the nose and gum for two-three weeks; a patient did

not like that any one talks with him (aversion to talk); such cases as cramp in hands and legs, patient reduced to skeleton but only his pulse is hot and accelerated; in such cases also patients survived by the use of external and internal medicines. There should not be talk of sudden death of patient.

According to Allopathy, the febrile heat of a patient is measured by putting a thermometer under left armpit. The heat of blood is normally  $98\frac{1}{2}^{\circ}$ , so this temperature of a person is called the normal heat of the body of a man. In the case of fever, the quantity or degree or intensity of heat of the body of a patient becomes more than the normal temperature. The affected pulse (*pittanadi*) may not be clear, but the degree of heat of the patient has shot up to  $100^{\circ}$  only. In such case, the physician should not rest assured by depending on thermometer reading of body heat.

There is no mention of microscope to study smallest germs or bacteria of diseases in any *Ayurvedic* works. But the movements of the pulse indicate the disease of worms (*Krimi-roge sthira manda kvacidvakra Kvacinmrduh*).

In fever, there takes place an increase of 10 beatings with each degree of the rise of temperature of the body of a patient. The pulse of a dying patient becomes feeble, but the beating of his pulse increases. In such pulse, if there takes place the beating



intermittently, at times it is missing, then it should be understood that death is his near. In such condition, if the beating of the pulse of a patient is 160 times per minute, there is no hope of his life. In the trembling condition of the pulse in *Vatika* fever, when the pulse contracts, the beating of the pulse of a patient is 120-130 times per minute, it can be considered as a danger to his life.



NADIPRAKASAM  
OF  
SRI SANKARA SEN



*DEDICATED*  
*TO*  
*MY REVERED GURU*  
*LATE DR. NARESH CHANDRA BHADURI*  
*WHO INITIATED ME IN*  
*HOMOEOPATHY IN 1963 AT*  
*JABALPUR (M.P.)*



## P R E F A C E

A study of *Nadiprakasam*<sup>1</sup> of Sri Sankara Sen (19th-20th Cen. A.D.) of Bengal, composed in Sanskrit in verse order, with a Sanskrit commentary and written in Bengali script, throws light upon the science of pulse, indicating various types of diseases of the human body.

It appears from a comparative study of *Nadivijnanam* of Maharsi Kanada and *Nadiprakasam* side by side that Sri Sankara Sen composed his work on the basis of *Nadivijnanam* and other sources of materials on the science of pulse. He translated it into Bengali with Sanskrit commentary in Bengali script with more clarity so that the Bengali *Ayurvedic* physicians and their pupils could easily understand

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1. *The following editions of Nadiprakasam, Sankara Sen, have been found in National Library, Calcutta.*

(i) *Sankara Sen-Nadiprakasam with Sanskrit commentary and Bengali translation. Edited by Kalipada Vidyaratna, Calcutta.*

(ii) *Sankara Sen-Edited with Bengali translation by Nagendra Nath Sen, Calcutta, 1914.*

*There is no English translation of the books available in National Library, Calcutta.*

the true significance and inner meanings of the science of pulse for proper diagnosis of diseases afflicting the human body as indicated by different kinds of movement of the pulse, disease-wise, in a systematic manner.

The science of pulse, dealing with *Tri-Dhatu* theory (theory of three elements—*vata*, *pitta*, and *kapha*—air, fire, or bile and phlegm or water) or *Tridosha* theory (theory of three faults) affecting the human body, fostered from the Vedic age in India still continues at the present day as the continuity is a corollary of history. It reveals an aspect of Indian *Ayurveda* based on the tradition of the vast accumulated experience and knowledge of Indian Ayurvedic physicians with scientific ideas and practices in the light of various kinds of diseases.

The science of pulse dealt with by the Indian Ayurvedic Physicians including Maharsi Kanada has been evaluated in relation to Indian history of Medical Science. India, by virtue of its position in the ancient world, was a great centre of Medical Science. This science crossed the Indian frontiers and entered into ancient Persian and Tibetan culture-areas through its physicians.

The Greek historians mention the *Ambostoi* Republican tribe of ancient Sind at the time of invasion of Alexander the great. Its main profession was Medical Science. Alexander met the people of

this tribe, while marching with his army through their territory, on his way to Babylonia where he died.

Sri Sankara Sen, the author of *Nadiprakasam* traces his origin to this physician tribe called Ambostoi ( *Ambasthagosthi* ) [ ‘*asidambasthagosthijani....tadatmajah Sankara-senanama tenaiva tene Dhamani-Prakasah<sup>1</sup>*’]. It cannot be said how far his claim is historically true.

The ancient Buddhist literature mentions the University of Taxila [*Taksasila*] where Medical Science was taught to the Indian medical students coming over there from different parts of India. Jivaka, son of King Bimbisara the *Magadha* King, was one of the best medical students of Taksasila university.

A study of *Nadiprakasam* (light of pulse) reveals scientific ideas and practices of the ancient Hindus with a distinct trend to pathology in the Indian Medical Science. It appears that during the time of Sri Sankara Sen a mass of medical information on the diagnosis of different types of diseases on the symptoms of beatings of the pulse was accumulated in the treatise of *Ayurveda*.

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(1) See the colophon in the end of the text.



The prominent features of *Nadiprakasam* lay in the determination of the time of death and the longevity of a person on the basis of the movement of his pulse.

The numerous symptoms of movements of the pulse of patients were meant to be helpful accessories in the diagnosis of diseases. Whatever has been revealed by an analysis of *Nadiprakasam*, all that has been said in *Nadivijnanam* of Maharsi Kanda on the science of pulse for the benefit of the people, afflicted with diseases. *Nadiprakasam* of Sri Sankara Sen is purely a work on the science of pulse dealing with symptomology of various diseases.

*Nadiprakasam* is more or less a compilation of *Nadivijnanam* with a Sanskrit commentary as it appears from a study of its contents by analysing verses with those of the latter. In some places Sri Sankars Sen borrowed some verses of *Nadivijnanam* in their original forms and substances. The point will be clear when they are placed below side by side.

In the method of examination of pulse *Nadiprakasam* states in the verse 8.1

“अङ्गुष्ठमूलमधिपश्चिमभागमध्ये ।  
नाडी – प्रभञ्जनगतिः सततं परीक्षया ॥ NP. 8.1

This version of the same verse is found in its original form in *Nadivijnanam* verse-3. with a slight linguistic change.

“नाड्या प्रभञ्जनगतेः सततं परीक्षया” (N.V. 3)

In regard to the movement of pulse, it is stated in *Nadiprakasam* verse 3.2 as noted below :

आदौ च वहते वातो मध्ये पित्तं तथैव च ।

अन्ते च वहते श्लेष्मा नाडिका-त्रयलक्षणम् ॥ NP. 3.2

The same verse is mentioned almost in its original form in *Nadivijnanam* verse 4

आदौ च वहते वातो मध्ये पित्तं तथैव च ।

अन्ते श्लेष्मवती नाडी सन्निपातस्त्रिलक्षणैः ॥ NV. 4

In the case of order of the pulses [*Vatadinam Krama*] it is mentioned in *Nadiprakasam* verse 5.2 as given below :

वाताद्वक्रगता नाडी चपला पित्तवाहिनी ।

स्थिरा श्लेष्मवती ज्ञेया मिश्रिते मिश्रिता भवेत् ॥ NP. 5.2

The verse is stated in its original form in *Nadivijnanam* with a slight change in the second line as follows in verse 5

वाताद्वक्रगता नाडी चपला पित्तवाहिनी ।

स्थिरा श्लेष्मवतो ज्ञेया मिश्रिता द्वन्द्वजां विदुः ॥ NV. 5

In connection with the incurable disease the conditions of the pulse of a patient are described in *Nadiprakasam* verse 13.2 in the following manner,

मन्दं मन्दं शिथिलशिथिलं व्याकुलं व्याकुलं वा,  
स्थित्वा स्थित्वा वहति धमनी याति नाशं च सूक्ष्मा ।

नित्यं स्थानात् स्खलति पुनरप्यङ्गुलीं संपृशेद् वा,  
भावैरेवं बहुविधविधैः सन्निपातादसाध्या ॥ NP. 13.2

In the original form of this verse in *Nadivijnanam*, V. 31, there is only a little variation of two words in the beginning “ जिह्वं जिह्वं ” in place of “ मन्दं मन्दं ” of *Nadiprakasam*. The remaining versions of the verse are same as in both *Nadivijnanam* V. 31, and *Nadiprakasam*. 13.2.

In the case of other incurable diseases the symptoms of pulsation are presented in *Nadiprakasam*, verse 14.2, as follows :

पूर्वं पित्तगतिं प्रभञ्जनगतिं श्लेष्माणमाबिभ्रती,  
सन्तानभ्रमणं मुहुर्विदधतीं चक्राधिरूढामिव ।  
तीव्रत्वं दधतीं कलापि गतिकां सूक्ष्मत्वमातन्वतीं,  
नो साध्यां धमनीं वदन्ति मुनयो नाडीर्गतिज्ञानिनः ॥ NV. 14.2

The same version of this verse is embodied in *Nadivijnanam* verse 30, in its original form.

As regards the determination of the time of death of a patient as indicated by the movement of his pulse, *Nadiprakasam*, verse 16.2, states it in the following way :

क्षणाद् गच्छति वेगेन शान्ततां लभते क्षणात् ।  
सप्ताहान्मरणं तस्य यद्यङ्गं शोथवर्जितम् ॥ NP. 16.2

The verse is found in *Nadivijnanam* verse 56, in its original form with a variation as noted below:

क्षणाद् गच्छति वेगेन क्षणाद् गच्छति शान्तताम् ।  
सप्ताहान्तमरणं तस्य यद्यङ्गं शोथवर्जितम् ॥ NV. 56

In the next verse 17.2 *Nadiprakasam* continues the same topic on the determination of the time of death of a patient on the basis of the movement of his pulse.

भूलता-भुजगाकारा नाड़ी देहस्य सक्रमात् ।  
विशीर्णे क्षीणतां याति मासान्ते मरणं ध्रुवम् ॥ NP. 17.2

In the original version of this verse in *Nadivijnanam*, verse 57, the statement on the topic is as follows with a little change,

भूलता-भुजगाकारा नाड़ी देहस्य संक्रमात् ।  
विशीर्णे क्षीणतां याति मासान्ते मरणं भवेत् ॥ NV. 57

*Nadiprakasam* discusses the subject further more in its verses 24.2 and 25.2 as noted below :

स्थित्वा नाड़ी मुखे यस्य विद्युद्द्योत इवेक्षते ।  
दिनैकं जीवितं तस्य द्वितीये म्रियते ध्रुवम् ॥ NP. 24.2  
स्वस्थानविच्युता नाड़ी यदा वहति वा न वा ।  
ज्वाला च हृदये तीव्रा तदा ज्वालावघ्न स्थितिः ॥ NV. 25.2

In *Nadivijnanam*, verse 47, the original versions of the above mentioned two verses of *Nadiprakasam* are found in two places with a change of one word only “स्थिरा” in the beginning word in place of “स्थित्वा” of *Nadiprakasam*. In spite of the change of one word the contents of the verses of both the works carry the same meaning.

*Nadiprakasam* presents the symptoms of pulse in different conditions of fever in its verses 3.3 and 16.3 as given below :

ज्वरवेगे च धमनी सोष्णा वेगवती भवेत् ॥ NP. 3.3  
NV. 10

ज्वरे च रमणे नाडी क्षोणाङ्गा मन्दगामिनी ।

ज्वरे कामार्तिरूपेण भवन्ति विकलाः शिराः । NP. 16.3  
NV. 21

In *Nadivijñanam*, verses 10 and 21, the same versions of the two verses of *Nadiprakasam* are presented in their original forms except a little variation of “च” of the first line of NP. 16.3 into तु of NV.

“ज्वरे तु रमणे,” *Nadivijñanam*, V. 21

*Nadiprakasam*, states in its verse 19.3 that the pulse of a person makes different kinds of movement in exercise (or hard labour), thought (study, etc.), and grief due to loss of wealth in feverless condition as noted below :

व्यायामे भ्रमणे चैव चिन्तया धनशोकतः ।

नानाप्रकारगमनं शिरा गच्छति विज्वरे ॥ NP. 19.3

*Nadivijñanam* presents the same version of this verse in its original form in its verse 22 with a change of the word “नानाप्रकारगमनं” by the word “नानाप्रकारगमना (शिराः)”

In regard to *Ajirnaroga* (indigestion or dyspepsia) the conditions of the pulse of a patient are presented by the same verse in both *Nadiprakasam*, Verse 20.3 and *Nadivijñanam*, Verse 23, respectively.

“अजीर्णेन भवेन्नाडी कठिना”, etc.

In the case of *pakvajirna* (ripe or chronic indigestion or dyspepsia) the same line of the verse occurs in both the works as follows :

“पक्वाजीर्णे पुष्टिहीना मन्दं मन्दं बहेत् शिरा” NP. 21.3  
NV. 24

In regard to the movement of the full-blooded pulse, it is presented in both *Nadiprakasam*, verse 21.3 and *Nadivijnanam*, verse 9.

“असृक्पूर्णा भवेत् कोष्ठा गुर्वी सामा गरीयसी” NV. 9

As regards the movements of the pulses of a satisfied person with food and a hungry person both *Nadiprakasam*, V. 22.3, and *Nadivijnanam*, V. 8, carry the same sense in their respective verses as noted below :

“सुखितस्य स्थिरा ज्ञेया चपला क्षुधितस्य च” ॥ NP.  
चपला क्षुधितस्यासौ तृप्तस्य बहति स्थिरा ॥ NV.

In reference to the conditions of the pulse of a person in the case of taking different kinds of food stuff having different kinds of taste they are presented in both *Nadiprakasam* and *Nadivijnanam* in their respective verses almost in the same forms as given below :

पुष्टिस्तैलगुडाहारे मांसे च लगुडाकृतिः । NP. 22.3  
NV. 24

रम्भागुडवटाहारे रुक्षशुष्कादिभोजने ।  
वातपित्तातिरूपेण नाडी बहति निष्क्रमम् ॥ NP. 24.3

In *Nadivijnanam*, verse 25, the word “शुष्क” is placed first “शुष्करक्षादिभोजने”.

मधुरे बर्हिगमना तिक्ते स्याद् भूलतागतिः ।  
अम्ले कोष्णा प्लवगतिः कटुके भृङ्गसन्निभा ॥ NP. 25.3  
NV. 26, 27

कषाये कठिना म्लाना लवणे सरला द्रुता ।  
एवं द्वित्रिचतुर्योगे नानाधर्मवती धरा (शिरा) ॥ NP. 26.3  
NV. 28

In regard to the pulse of a patient with inflamed or agitated fire *Nadipraksam*, verse 29.3, and *Nadivijnanam*, verse 7, present the same version of the original verse as given in *Nadivijnanam*.

लघ्वी वहति दीप्ताग्नेस्तथा बलवती मता । NP. 29.3  
NV. 7

In the case of the pulse of a patient having *Atisararoga* (dysentery or violent straining at stool or strong diarrhoea as it is called in Bengal) it is stated in *Nadipraksam*, verse 30, that in *Atisara* the pulse of a patient is slow (*manda*) like the water leech of the summer.

अतिसारे च मन्दा स्याद् ग्रीष्मकाले जलौकवत् । NP. 30.3

But *Nadivijnanam*, Verse 10, has stated the same thing in its version having the same sense in different words as given below :

अतिसारे भवेन्नाडी शीता मन्दगतिस्तथा । NV. 10

In regard to the pulse of a cholera patient *Nadiprakasam* makes the following statement in its verse No. 34.3

विसूचिकाभिभूते च भवन्ति भेकवत् क्रमाः । NP. 34.3

*Nadivijnanam* presents the version of the conditions of the pulse of cholera case in different words in the verse 11 as noted below :

विसूच्यां दृश्यते नैव नैव स्थानं विमुञ्चति ॥ NV. 11

According to *Nadiprakasam*, verse 37.3, the movement of the pulse in the disease of worms is sometimes missing (vanishing) sometimes slow moving and sometimes fast or accelerated as noted below :

कुमिरोगे भवत्येव सर्वधर्मवती शिरा ।  
क्वचिल्लुप्ता क्वचिन्मन्दा क्वचिद्वेगवती मता ॥ NP. 37.3

*Nadivijnanam* presents the original version of the verse in its verse 11 as follows :

कुमिरोगे स्थिरा मन्दा क्वचिद्वक्रा क्वचिन्मृदुः ॥ NV. 11

It seems that Sri Sankara Sen has clarified the meaning of this verse in detail.

In the case of *Panduroga* (Jaundice) and *Kamalaroga* (bilious disease) *Nadiprakasam*, verse 38.3, deals with the conditions of the pulse in such conditions with clarity as given below :

पाण्डौ तु केवलं नाडी मुहुराप्यायते स्थिरा ।  
क्वचिदुष्णा भवेन्नाडी कामलारोगिणो ध्रुवम् ॥ NP. 38.3



*Nadivijnanam* contains only one line of the original verse describing the conditions of the pulse of *Panduroga* (Jaundice) as follows :

पाण्डौ तु केवलं नाडी कृशा भिन्ना प्रचारिणी ॥ NV. 12

In regard to *Raktapittaroga* (derangement of blood produced by bile) the movement of the pulse of *Raktapitta* case is explained by *Nadiprakasam* as noted below :

रक्तपित्ताद् वहेन्नाडी मन्दा च कठिना तथा ।

असृगूष्मं सवेदुष्णा गुर्वी सा च यवीयसी ॥ NP., 29.3

The original version of the line of this verse in *Nadivijnanam*, verse 13, is almost the same except one additional point “मृदुः”

रक्तपित्ताद् वहेन्नाडी मन्दा च कठिना मृदुः ॥ NV. 13

Sir Sankara Sen has added one additional line to the original verse to clarify the conditions of the pulse in the case of *Raktapitta* disease.

*Nadiprakasam* describes the nature of the pulse in cough in details as given below :

कासे सूक्ष्मा स्थिरा मन्दा पुष्टा च उष्णतान्विता ।

राजहंसगतिश्चैत्र नाडीनामुपजायते ॥

यथा राहुगतश्चन्द्रः कम्पितः किल सर्वदा ।

तथा कासगता नाडी स्थिरा न हि कदाचन ॥ NP. 40.3

*Nadivijnanam* presents only one line of the verse relating to the nature of the pulse in the case of pthisis and cough in brief in its verse 14.

क्षये च नाडिका क्षीणा कासे कम्पपरायणा ॥ NV. 14

In the case of *Svarabheda* (broken articulation or hoarseness or loss of voice) *Nadiprakasam* states the condition of the pulse as thin in its verse 42.3.

स्वरभेदे च सूक्ष्मा तु नाडी भवति निश्चितम् ॥ NP. 42.3

*Nadivijnanam*, verse 10. presents the version of the original verse in different form conveying the same sense of the beating of the pulse in the case of *Svarabheda* as noted below :

गम्भीरा स्वरभेदे स्यात् चला तन्तुसमा तथा ॥ NV. 16

That is; it becomes grave ( or tortuous ) and is moving like thread in *Svarabheda*.

*Nadiprakasam* describes the condition of the pulse in *Udavartharoga* ( a disease of the bowels— Iliac passion characterized by the retention of excrement ), *Anaha* ( Supression of urine ) and *Mutrakechra* (painful discharge of urine ) in its verse 46.3.

उदावर्त्ते विलुप्ता स्यान्नाडी कम्पति सर्वदा ।

आनाहे मूत्रकृच्छ्रे च भवेन्नाडी गरिष्ठता ॥ NP. 46.3

*Nadivijnanam* does not mention the first line of this verse in its original form but it presents the second line of the verse in its exact original form conveying the same sense.

आनाहे सूत्रकृच्छ्रे च भवेन्नाडी गरिष्ठता ॥ NV. 17

*Nadiprakasam* states in its verse 49.3 that the pulse becomes knotty ( *granthirupa* ) and slightly hot always in the case of gonorrhoea or urinary disease-gleet, etc., and fault of mucus in the intestine respectively.

प्रमेहे ग्रन्थिरूपा सा प्रतप्ता त्वामदूषणे ॥ NP. 49 3

*Nadivijnanam* presents the line of the verse in slightly changed form as given below :

प्रमेहे तु जडा सूक्ष्मा ग्रन्थिरूपा च जायते ॥ NV. 18

That is, the pulse becomes inert, thin, and knotty in gonorrhoea. *Nadiprakasam*, verse 51.3, presents the conditions of the pulse in the case of very hard boil, fistula, and sinus or ulcer as follows :

व्रणोत्तिकठिने देहे प्रयाति पैत्तिकं क्रमम् ।

भगन्दरानुरूपेण नाडीव्रणनिवेदने ॥

प्रयाति वातिकं रूपं नाडी पावकरूपिणी ॥ NP. 51.3

The same version of the verse is found in *Nadivijnanam*, verse 19, in its original form.

*Nadiprakasam* states the movement of the pulse in the case of vomiting ( *vanta* ) or hurting with an

weapon ( *Salyabhihata* ) or tremulous anxiety ( *akulitasya* ) for holding the motion ( or discharge ) of stool and urine, etc. again and again as given below :

वान्तस्य शल्याभिहतस्य जन्तोः ।  
वेगावरोधाकुलितस्य भूयः ॥  
गतिं विधत्ते धमनी गजेन्द्र-  
मरालमालेव कफोत्वणेन ॥ NP. 52.3

The same version of this verse is presented in its original form in *Nadivijnanam*, verse 20.

It appears from the citation of these evidences of different versions of the verses of *Nadiprakasam* and *Nadivijnanam* respectively, placed side by side for a close study, that Sri Sankara Sen borrowed many verses from *Nadivijnanam* of Maharsi Kanada. He composed his work “ *Nadiprakasam* ” on the basis of the former, on the science of pulse, by adding more material on the subject from other sources and his own knowledge and experience on the symptomology of pulses of some other diseases which are not mentioned in *Nadivijnanam*.

It is noteworthy that *Nadivijnanam* of Maharsi Kanada has furnished more materials on the determination of the length of life and time of death of a person on the basis of the study of the science of pulse in his celebrated work.

In this connection, I am very grateful to Prof. Dr. H. V. Bhayani for his going through the M. S. of my work with keen interest and intellectual acumen.

I am very much thankful to Prof. Sri Dalsukhbhai D.Malavania, my revered teacher and ex-Director of L.D. Institute of Indology, Ahmedbad, for his encouragement in completing this work on the light of pulse. I thank also my dear student, Parul for her keen interest in learning the science of pulse from me in the beginning of my study of the subject.

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## INTRODUCTION

A critical description of *Nadiprakasam* of Sri Sankara Sen, given by the editor, indicating its relation with other sources :—

*Nadiprakasam* of Sri Sankara Sen was found by the editor, and pieced together with *Nadivijnanam* of Maharsi Kanada in the library of his elder brother, a celebrated *Ayurvedic* physician in Bengal, after his death in 1962, as pointed out in the introduction to *Nadivijnanam*.

*Nadiprakasam* also is a short treatise composed by the author in Sanskrit in the form of aphorism, on the basis of *Nadivijnanam*, on the science of pulse with some commentaries in Sanskrit and additional materials. This work was published by Sri Upendranath Sen Kaviraj, 29 Kolutola Street, Calucutta, along with *Nadivijnanam* with its Bengali tranaslation in Bengali script in the beginning of this twentieth century.

The colophons of *Nadiprakasam* clearly points out that it was composed by Sri Sankara Sen “*Sankaraseenanama tenaiva tene Dhamaniprakasah*”.

## Method of Editing

### Principles Of Text—Constitution Adopted :

The edited text of *Nadiprakasam* has been prepared mainly on the only available published text in Bengali script. The first six aphorisms of the first chapter are missing as a result of its worn out condition caused by white ants. But the summary of their contents has been made out from their Bengali translation with great difficulty.

The stanzas in the the work have been kept in the edited text as they are found in three *Udyotas* ( Chapters ) according to the serial numbers. This work has been taken as standard as a rule from every aspect—evidence, order, language and spelling, etc. In editing the spelling has been followed in accordance with that of the text.

### Life And Age of The Author of Nadiprakasam

The colophons of *Nadiprakasam* present a brief account of the geneology of Sri Sankara Sen, which throws a little light on his life and profession as noted below :

Duhisen, the ( jewel of the crown of *Ambastha-gosthi* ( *Ambastha* Society or clan ) like the necklace of the world, whose vibrating lustre spread out, whose diffused qualities were accepted by the whole country, who became like *Sesendukrsna* by firm study, churning the ocean of milk of all *Ayurvedas*, who was like a light in the *Saktigotra* ( *Sakti* lineage ),

accompanied by *Sri* (prosperity or wealth), was the first *Vaidya* (Physician), the buds of the creeper of whose fame always bore fruits in the pot of the world. Sripati was born in his (Duhisen) prosperous line as the best in the family, having meritorious fame. His son was Sri Sankara Sen, *Dhamaniprakasa* was composed by him.

It is clear from this brief account that Sri Sankara Sen belonged to the *Vaidya* community of united Bengal. His dates of birth and death are not found in this short colophon. It may be presumed on the basis of the publication of *Nadiprakasam* that he flourished in the period between the last quarter of the nineteenth century and the first quarter of twentieth century A. D.

As pointed out in the preface that Sri Sankara Sen traced his ethnic relation to the *Ambastha* republican clan or tribe of ancient Sind (*ambastha Gosthigani.....tadatmaja Sankarasena-nama tenaiva tene Dhamaniprakasah*). A study of anthropology as made in the introduction to "*Bengali Itihasa*"<sup>1</sup> to determine the racial position of the Brahmin, *Vaidya* and *Kayastha* castes, etc. reveals that they belonged to *Dravida-Mongoloid* race. A critical observer should take the samples of the *Vaidya* community at *Kotalipara* village in *Madaripur* sub-division of Faridpur district of United

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( 1 ) Nihar Ranjan Roy, *Bengalir Itihasa*, Introduction.



Bengal. The members of this community looked like *Dravidian* people, while the *Vaidya* community of *Patia* area of Cox-bazar sub-division of *Chattagrama* district of United Bengal looked like the Mongoloid race of Burma, with their flat nose and fair skin. So in my opinion the *Vaidya* community belongs to the Dravida-Mongoloid race of Bengal, but not to the *Ambastoi* clan or tribe of ancient Sind which was fair coloured group of people with a different feature of physique. It is a vain glorious attempt of Sri Sankara Sen to raise the status of his group of people to that of the glorious tribe of Sind, whom Alexander met on his way to Babylon.

### **Author's indebtedness to the previous Ayurvedic physicians :**

As mentioned in the preface, Sri Sankara Sen profusely borrowed the original verses of *Nadivijnanam* for the infrastructure of his *Nadiprakasam*. It has been shown by placing side by side some original verses of *Nadivijnanam* and those of *Nadiprakasam* that Sri Sankara Sen had borrowed at least 32 original verses from *Nadivijnanam*.

Besides, he has collected materials for his Sanskrit commentary from other sources and his own knowledge and experience in the study of the science of pulse. It is to his credit that he has made the study of the science of pulse more comprehensible and interesting to both the Physicians and pupils of *Ayurevda* with his keen intellect and masterly

presentation of his work. He cautioned all that one could not acquire the knowledge of the science of pulse by study of the *Sastra* ( *Sastrapathanat* ) or by *Sastra* ( *adhyapanadapi* ). One becomes well-versed in the knowledge of the science of pulse by practice, such as, touching, feeling of the pulse of a patient etc., with a full concentration of mind of yoga ( Spiritual exercise ) to know the movement of the pulse.

### **A Summary of the contents of Nadiprakasam (Chapterwise)**

*Nadiprakasam* of Sri Sankara Sen contains three *Udoyta* ( Chapters ). The first *Udoyta* consists of nine verses, dealing with the concept of the position of an imaginary tortoise situated in the naval regions of the male and female persons and the method of examination of the pulse of both the sexes.

*Prathama udyotah (Chapter)*; Verses 1-6 describe that all the nerves of the human body are connected with the four legs of a tortoise situated in the naval region. This tortoise is *urddhamukhah* (having its face upwards) in the body of woman, while it is *adhomukhah* (having its face downwards) in the body of man.<sup>1</sup>

Due to this difference of the position of the tortoise in the naval region of both the sexes, the

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(1) “*Strinam urddhamukhah kurmah, puinsam adhomukhah*”.

*Nadiprakasam, Commentary, its upyotah. VV. 1-6*

pulse of woman situated in the left hand and left foot and that of man situated in the right hand and right foot should be examined respectively to diagnose their respective diseases in the case of their sickness.

The pulse of a *Napumsaka* (eunuch), having the physique of a woman, situated in the left hand and left foot, should be examined to make the diagnosis of a disease.

In the case of a *Napumsaka* (eunuch), having the physique of a man, pulse situated in the right hand and right foot should be examined to diagnose his disease; there cannot be equality between the two types of *Napumsaka*.

Next verses 1-6 explain the principles how to examine the pulses at different places of the human body, such as, the pulses in two hands, two feet and two sides of the neck, at the root of the nose and at corner of the eye, etc.

The pulses of the neck indicate fever, thirst, tiredness, sequence of sexual enjoyment, fear, grief and anger. The pulse at the root of the nose makes an indication of death, life, sexual desire, disease of the neck, head disease and disease of the mouth. Besides, the place for examination of all pulses is to be determined according to time and place of diseases, such as, morning is the best time for hand, foot, neck, nose, eye, ear, tip of tongue and genitals, etc.

Verse 7-8 deal with the method of examination of the pulse, while verse 9 mentions the subject of examination of the pulse whether the disease is *vataja* (disease produced by some derangement of bodily humour-*vata*-air) or *pittaja* (disease produced by some derangement of bodily humour-*pitta*-bile) or *Kaphaja* (disease produced by some derangement of bodily humour-*Kaph*-phlegm) or *dvandvaja* (disease produced by some derangement of two bodily humours-*vata-pitta*, *vata-slesma* and *pitta-slesma*) or *Sannipataja* (disease produced by some derangement of three bodily humours-*vata*, *pitta* and *kaph*), or whether it is curable (*sadhya*) or incurable (*asadhya*).

*Dvitiya Udyotah* (second chapter) of *Nadi-prakasam* comprising of twenty five verses discusses the auspicious time of studying (or examining) the science of pulse (*Nadivijnanam*); the prohibited time (*Nisiddhakala*) to examine the pulse; the nature of the course of faults-*vata* (air), *pitta* (bile or fire), etc. (*vatadisvabhava*); the meaning of the knowledge of health (*svasthyajnanartham*); the nature of the pulses-*vataja*, *pittaja*, and *kaphaja* by succession, the particularity of the general movement of the aforesaid *vata*, *pitta* and *kaph* (*Vakradigatisamanyasya kramena visesatvam*); the distinction of the movement of the pulse produced by some derangement of two bodily humours (*vatadi-dvandvaja-Nadigatibhedam*); the movement of the pulse produced by some derangement of three bodily humours (*tridosajanadigatih*); symptom of easily curable diseases (*sukhasadhya*-

*rupam*); symptom of incurable diseases (*aparama-sadhyalaksanam*); exception to the case of incurability (*asadhyatvapavada*); and determination of time of death (*Kalanirupanam*).

*Tritiya Udyotah* (third chapter) consisting of fifty seven verses deals with the rules of examination of the pulse on the basis of the distinction of diseases (*Rogabhede Nadipariksavidhih*); the condition of the pulse prior to fever (*Jvarapurvarupe*); the nature of fever (*jvararuyam*); the particular symptom in *Vatajvara* (fever produced by some derangement of bodily humour-*vata*) (*Vatajvare visesam*); the pulse in *pittajvara* (fever produced by some vitiation of bodily humour-*pitta*); *Slesmajvara* (fever produced by some vitiation of bodily humour-*slesma*); *vatapittajvara* (fever produced by some derangement of bodily humours - *vata* and *pitta*); *vataslesmajvara* (fever produced by some derangement of bodily humours-*vata* and *slesma*); and in *pittaslesmajvara* (fever produced by some derangement of bodily humours-*pitta* and *slesma*). The heated pulse in *vatadijvara* (fever produced by some vitiation of bodily humour-*vata*, etc.); the accelerated pulse in *Bhutajvara* (fever produced by the overtaking by spirit); the pulses in *Aikahikenavisamajvara* (quotidian typhoid fever), *Dvitiyakajvara* (tertian fever) or *Tritiyaturyakajvara* (quartan fever), in *Krodhajvara* (fever caused by anger) and *Kamajvara* (fever caused by sexual passion); the feeble pulse in *udvega* (anxiety), *krodha* (anger), *bhaya* (fear), *chinta* (thought), and *srama* (labour).

In this connection *Nadiprakasam* speaks of the knowledge of bad diet of the patients suffering from fever in its verses 16-19 as noted here : the feeble and slow moving pulse of a male patient in fever is due to sexual enjoyment made with his wife, the restless or deranged pulse of a patient in fever caused by sexual passion (V. 16), the accelerated and hot pulse of a patient in his fever as a consequence of his taking curd, (V. 17), the hot pulse in fever or another disease if sour things are taken by a patient, and the slow pulse in fever, if *Kanjika* (sour rice gruel) is taken by him, different kinds of movement of the pulse of a person in feverless state due to exercise (*vyayama*), walking (*bhramana*), thought (*chinta*), and grief over the loss of wealth (*dhanasokatah*).<sup>1</sup>

Verses 20-22 state the conditions of the pulse in the case of *Ajirna* (indigestion), that of full-blooded pulse, that of the pulse in dysentery, and those of the pulses of a satisfied person and a hungry man respectively. That is to say, the slow movement of the pulse in both *pakva ajirna* (chronic or digested indigestion) and *apakva ajirna* (undigested indigestion or dyspepsia); soft, unsluggish and fast pulses in *sujirna* (well-digested case); undeveloped and slow pulse in *pakvajirna*; slightly hot and heavy pulse in full-blooded case; thick or large pulse with mucus

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(1) *vyayama bhramana caiva chintaya dhanasokatah NP. 19.3*

(*Sama gariyasi*) steady pulse of a person satisfied with food (*sukhitasya sthira*); and restless pulse of a hungry person (*Chapala ksudhitasya*).

In this connection the knowledge of the conditions of the pulse in the case of taking suitable and unsuitable food is stated in verses 23–24.

Thick and hard pulse like the form of a stick in the case of taking nourishing and oily stuff, sweet and meat; jumping upwards, slow pulse in taking milk and jumpy pulse like a frog in taking sweet articles (flowing or solid). The movement of the pulse is sometimes like a snake or sometimes like a frog. As found in *vatapittajaroga*, if banana etc., molasses (treacle) and *vada* (a kind of cake) and rough and dry stuff are taken by a person. (V. 24)

**Nadiprakasam presents the knowledge of taste of food affecting the movement of the pulse as given below :**

The movement of the pulse is like that of a peacock in the case of taking sweet stuff; like that of an earth worm in that of taking bitter-tasting article; like that of a frog, slightly hot, in that of taking acidic stuff; like that of *Bhringa* (a kind of bird) in that of taking sour thing (V. 25); a hard and feeble pulse in taking astringent stuff; a straight and fast (speedy) pulse in taking saltish article (V. 26). There becomes a very hard pulse in the case of taking flowing stuff and a soft pulse in that of taking hard or solid substance, soft and hard pulse also in the

case of hardness of flowing substance. There becomes a separate and knotty and developed pulse in the case of taking nourishing stuff (v. 27).

Next *Nadiprakasam* speaks of the knowledge of *Agnimandya* (slowness of digestion) and *Dhatuksaya* (waste of bodily humours). The pulse becomes slower (*mandatara*) in the case of slowness of digestion and waste of bodily humours; it becomes cool in the case of slowness of digestion and moves like a swan. (V. 28).

*Nadiprakasam* deals with the knowledge of *Diptagni* (kindled fire in the body) in V. 29 by saying that the pulse flows lightly (i. e. neither developed nor feeble) and forcefully (*balavati*).

In regard to *Atisara* (dysentery) of different types *Nadiprakasam* discusses the conditions of the pulse in verses 30-31. In dysentery there becomes a slow pulse like a water leech in the summer, crooked pulse in *vatatisara* (dysentery caused by some derangement of bodily humour-*vata*) and unsteady pulse in *pittatisar* (dysentery caused by some derangement of bodily humour-*pitta*) and the movement of the pulse is like that of a gander in *kaphatisara* (dysentery caused by some derangement of bodily humour-*kaph*) (V. 30)

*Vatapittatisara*: In *Dwandvajatisara* (dysentery caused by derangement of two bodily humours-*vata* and *pitta*) the movement of the pulse becomes like



that of a frog, in *vataslesmatisara* it is like that of a snake and a gander, in *pittaslesmatisara* (dysentery caused by some derangement of two bodily humours-*pitta* and *slesma*), it is like that of a frog and a peacock, etc. The pulse becomes missing (i. e. it is so thin that it cannot be felt by the touch of finger in the case of *sannipatajatisara* (dysentery caused by some derangement of three bodily humours-*vata*, *pitta*, and *kaph*) V. 31

In the case of *grahaniroga* (chronic diarrhoea), if the pulse of a patient situated in the foot moves like a swan and that situated in the hand moves like frog, it is to be understood that he has got slowness of digestion *agnimandya* or *grahanigada* (disease of *grahani*) in the body. In *vatajagrahani* (chronic diarrhoea produced by some derangement of bodily humour-*vata*) the pulse becomes crooked, in *pittajagrahani* (chronic diarrhoea produced by some derangement of bodily humour-*pitta*), it is restless or unsteady, in *Kaphajagrahani* (chronic diarrhoea produced by some derangement of bodily humour-*kaph*) it is steady. (V. 32). In *grahanigada* the pulse becomes gentle at the end of *bheda* (evacuation of bowels), while it becomes energyless, i. e. the pulse is very slow moving after *bheda* (evacuation of bowels) in *atisara* (dysentery) (V. 33).

Next Nadiprakasam deals with the knowledge of the pulse in the case of suppression of stool and urine: The movement of the pulse becomes like that

of a frog in the case of suppression of only stool or only urine or both, or voluntary suppression of them or in obstructed abdomen due to cholera or painful discharge of urine and fever, etc. while it becomes crooked and thin (fine) due to obstruction of urine or ordure. (V. 34)

Then the knowledge of the pulse of constipation, etc. (*vilambikadijnanam*) is presented :

The pulse becomes *plavagamini* (moving like a frog) in the case of evacuation of bowels, i. e, stool, in the disease of constipation, otherwise it is often gently moving. In *Amatisara* (dysentery with mucus) the pulse becomes thick (or large) and inert at the end of evacuation of stools.

*Nadiprakasam* state the conditions of the pulse in different types of haemorrhoids (piles) (*Arsa*). The pulse becomes steady, slow moving or sometimes crookedly moving and sometimes gently moving in piles, in *vataja Arsa* (piles caused by derangement of bodily humour-vata (wind) the movement of the pulse is crooked; in *pittaja Arsa* (piles caused by derangement of bodily humour-bile) it is jumpy like a frog; in *kaphaja Arsa* (piles caused by derangement of bodily humour-phlegm) it is steady. In *kapha-vataja Arsa*<sup>1</sup> the pulse is developed, accelerated and

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1. Piles caused by some derangement of two bodily humour-vata and kaph.

jumpy like a frog; in *vatapittaja*<sup>1</sup> *Arsa* it is steady and slow; in *Kaphapittaja*<sup>2</sup> *Arsa* it is having the movement of a snake and a swan; and in *Sannipataja Arsa* (piles caused by derangement of three bodily humours-*vata*, *pitta* and *kaph*) it carries the form of three faults as aforesaid (V. 36).

The pulse in the disease of worm (*krimiroga*): In the disease of worms the pulse is sometimes missing, sometimes slow and sometimes fast. (V. 37)

The pulse in the disease of Jaundice and Bilious disease (*Pandukamalaroge*). The pulse steady-going in Jaundice and again and again it becomes fully developed, whereas the pulse of bilious patients remains steady, but sometimes it becomes hot (V. 38).

The pulse in *Raktapitta* (derangement of blood produced by bile) :

In the case of *Raktapitta*, the pulse is slow moving and hard, while it is hot, heavy and accelerated in the case of vomiting of blood from the upper current of orifices, such as, mouth etc. (V. 39).

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1. Piles produced by some derangement of two bodily humours-*vata* and *pitta*.
  2. Piles produced by some derangement of two bodily humours-*pitta* and *kapha*.

The pulse in cough (*Kasa*): There becomes a thin, restless, slow, developed and hot pulse in cough and it moves like a gander. It is always trembling like the eclipsed moon and it is never steady. (V. 40)

The pulse in Asthma (*Svasaroga*): There becomes an intense movement of the pulse in Asthma. It is accelerated, hard and speedy like the water leech in such case. (V. 41).

The pulse in broken articulation or hoarseness or cracking voice, etc. (*Svarabhedadiroga*): The pulse becomes thin (fine) or feeble in the case of broken articulation or hoarseness (*Svarabheda*); there becomes a steady, slow, hard, developed and mild pulse in loss of appetite (*arochaka*); a missing pulse in vomiting (*chardi-roga*); pulse having the movement of a water leech in the case of thirst (*t<sup>r</sup>snaroga*), and a pulse having the movement of lightning in fainting (*murccharoga*) (V. 42).

The pulse in the case of insanity (*unmad*): There becomes always a crooked pulse in insanity (*unmad*). It always beats thin and fast in the case of *vatasrava roga* (disease produced by some derangement of bodily humour-*vata* or rheumatism). (V. 43)

The pulse in acute gout and torpor of the bowels attended with flatulence and intumescence (*vatarakte amavateca*):

The pulse becomes slow, crooked, hard and mild in *vatarakta* (acute gout) while it is steady in *Amavata* (torpor of the bowels-attended with flatulence and intumescence). (V. 44).

The pulse in colic (*Sula*) : The pulse flows in a very crooked movement in *vatasula* (colic with flatulence due to intensity of wind); it is burning, i. e. too much hot, in *pittasula* (colic caused by vitiation of bodily humour-*pitta*, bile); and it is developed or expanded in *Sadhmanasula* (colic of abdomen with flatulence and noise), i.e. *amasula* (pain of indigestion) or *Krmisula* (colic due to the presence of worms in abdomen. (V. 45).

The pulse in *Udavarattanahamutrakrechra* : i. e. disease of the bowels by retention of excrements, suppression of urine and painful discharge of urine : The pulse is missing, i. e. not felt by the touch of fingers, in the case of *udavartta* (disease of the bowels-iliac passion characterized by the retention of excrements). If it is felt sometimes, it becomes very trembling, it becomes heavy and hard in the case of *Anoha* (supression of urine) and *Mutrakrechra* (painful discharge of urine). (V. 46)

The pulse in *Gulma* (Chronic enlarged spleen) : The pulse is trembling or restless and moves on by turning and turning round like a pigeon in great speed in the case of *Gulma* (chronic enlarged spleen) (V. 47).

The pulse in *hrdroga* (heart disease) : The movement of the pulse becomes like that of a gander (*Rajahamsa*) in the case of heart disease. (V. 48).

The pulse in *Meha* (Urinary disease or Gonorrhoea) : The pulse becomes knotty in *prameha* (urinary disease), gleet, etc. and always remains a little hot, if there is a fault of mucus in the case (*amadusane*) (V. 49)

The pulse in *Medoroga* (obesity) : The pulse flows in obesity as it flows in the case of irritation of phlegm. (V. 50)

The pulse in *Vranadi* (boils, etc.) : The pulse moves in the case of very hard, unripe boil, like the movement of the pulse of morbid irritation of *pitta* (bile or fire) in the body and it becomes very hot in fistula disease (*bhagandara*) and sinus (*nadivrana*) like fire (*pavakarupini*) and moves like the *vaticanadi* (pulse vitiated by derangement of bodily humour-*Vata*). (V. 51)

The movement of the pulse becomes like that of an elephant and a swan in the case of vomiting or injury with a weapon and distress in obstruction of excretion of stool and urine, again and again, due to derangement or vitiation of bodily humour-*Kaph* (phlegm), i. e. the pulse becomes thick (or large) and slow-going. (V. 52).

The pulse in *Kustharoga* (Leprosy) : The pulse becomes contracted, steady-going and speedless in the disease of leprosy. (V. 53)

The knowledge of the pulse in the case of *visavistambhagulma*: (poison obstruction of urine or ordure and enlarged spleen):

The pulse moves restlessly in the case of taking poison or snake-biting when poison manifests unfavourable symptoms by spreading throughout the whole body. The movement of the pulse becomes crooked in the case of obstruction of urine or ordure and enlargement of spleen (*visavistambhagulma*). But it remains *ti-yakbhedini* (horizontally stretching out), beating downwards due to the intensity of derangement of bodily humour-*vata* (wind). Before the manifestation of its full symptoms the pulse moves upwards like a creeper, becoming *uttanabhedini* (stretching out upwards). Sometimes it moves horizontally, upwards and downwards also. (V. 54)

In the last two verses 55-56, *Nadiprakasam* states that a physician, having observed the conditions of the pulse in the case of fever, etc., should know how the conditions of the pulse may become in that of untold diseases.

The conditions of the pulse should be understood from the equality of faults in diseases and the similarity of symptoms of diseases in the case of untold diseases by drawing inferences and reasons.

If the physician washes his hand (with water), after examining the pulse of the patient, the disease of the latter gets removed (cured) like mud or clay by washing. (V. 55-56).

### CONCLUSION (UPASAMHARA) :

In the concluding verse 57, Sri Sankara Sen says that the mixed diseases are to be diagnosed in some case according to the *Sastra* or in some case according to the fitness of things or sometimes according to the place and time.

The knowledge of the science of pulse is not acquired by only study of the *Sastras* nor by teaching the *Sastras* relating to it. One becomes fully experienced in this knowledge by practices, such as, touching, feeling and reading the pulse of the patient with the concentration of mind on the subject like the practice of *Yoga* (Spiritual exercise). (V. 57)

Peculiarity of language, metres, style of writing, method of exposition, etc. adopted in the composition of *Nadiprakasam*:

The language of *Nadiprakasam* is uniform throughout its text. This work has been composed by Sri Sankara Sen in Sanskrit in poetic order with a Sanskrit commentary from the beginning to the end :

नाडीगतिरियं सम्यग्योगाभ्यासवदेकतः ।

नान्यथा शक्यते ज्ञातुं ब्रूहस्पतिसमैरपि ॥ पि. 57.3 ॥



In its composition with Sanskrit commentary a care has been taken by the author to keep up a pure form of Sanskrit in scholarly manner for the benefit of the students of *Ayurveda*.

Metres (Chhanda) :

The metre of the verses of *Nadiprakasam* adopted by the author in the presentation of their contents and treatment of their subject-matters is of the following characters, viz. *Vasantatilaka*, *Anustubh*, *Arya-Gatha*, *Mandakranta*, *Sardula-vikridita*, *Indravajra-Upendravajra* (*Upajati*) and *Indravajra*.

*Vasantatilaka Chhanda* :

The seventh verse of the first chapter has been composed by Sri Sankara Sen in Sanskrit in *Vasantatilaka-Chhand* (metre). This chhanda was followed by him in the composition of the eighth verse as noted below :

सव्येन रोगघृत्तिकृर्परभागभाजा-  
पीड्याथ दक्षिणकरांगुलिका त्रयेण ॥ (V.7)  
अङ्गुष्ठमूलमधि पश्चिमभागमध्ये ।  
नाडी प्रभञ्जनगतिः सततं परीक्ष्या ॥ (V.8)

*Anustubh Chhand* :

*Anustubh chhand* has been adopted by the author in the composition of the ninth verse of the first chapter as given below:

वातं पित्तं कफं द्वन्द्वं सन्निपातं तथैव च ।  
साध्यासाध्यविवेकं च सर्व्वं नाडी प्रकाशयेत् ॥ (V.9)

He has followed the same chhanda in the composition of the first, second, ninth, tenth, twelfth, sixteenth, seventeenth, eighteenth upto twenty-fifth verse of the second, chapter and the first, second, upto eleventh, fourteenth, fifteenth, upto thirty-second, thirty-fourth, thirty-sixth to forty-fourth, forty-sixth, forty-eighth to fifty-first, fifty-third, fifty-fifth to fifty-seventh verse of the third chapter.

#### *Arya-Gatha Chhanda :*

The sixth verse of the second chapter has been composed by Sri Sankara Sen in Sanskrit in *Arya-Gatha chhanda* as noted here. :

सर्पजलौकादिगतिं वदन्ति विबुधाः प्रभञ्जनेन नाडीम् ।  
पित्तेन काकलावकभेकादिगतिं विदुः सुधियः ॥ (V.6)

He has used the same chhanda in the composition of the eleventh and fifteenth verses of the second chapter.

#### *Mandakranta Chhanda:*

The author has adopted *Mandakranta Chhanda* in the composition of the thirteenth verse of the second chapter as stated here. :

मन्दं मन्दं शिथिलशिथिलं व्याकुलं व्याकुलं वा,  
स्थित्वा स्थित्वा वहति धमनी याति नाशं च सूक्ष्मा ।  
नित्यं स्थानात् स्वलति पुनरप्यङ्गुलीं संस्पृशेद् वा,  
भावैरेवं बहुविधविधैः सन्निपातादसाध्या ॥ (V.13)

### *Sardulavikridita Chhand:*

This *Chhanda* has been used by the author in the composition of the fourteenth verse of second chapter of *Nadiprakasam* noted below :

पूर्वं पित्तगतिं प्रभञ्जनगतिं श्लेष्माणमाबिभ्रतीम् ।  
सन्तानभ्रमणं मुहुर्विदधतीं चक्राधिरूढामिव ॥  
तीव्रत्वं दधतीं कलापि-गतिकां सूक्ष्मत्वमातन्वतीम् ।  
नो साध्मां धमनीं वदन्ति मुनयो नाडीगतिर्ज्ञानिनः ॥ (V.14)

### *Upajati (Indravajra-Upendravajra) Chhand:*

This *Chhand* has been adopted by Sri Sankara Sen in the composition of the twelfth verse of the third chapter of *Nadiprakasam* as given below :

भूतज्वरे सेक इवातिवेगा ।  
धावन्ति नाड्यो हि यथाब्धिगामाः ॥ (V.12)

The same *chhanda* has been followed by him in the composition of the thirteenth, thirty-fifth, forty-fifth and fifty-second verses.

### *Indravajra Chhanda :*

The author has used *Indravajra chhanda* in the composition of the forty-seventh and fifty-fourth verses of the third chapter of *Nadiprakasam* as described below :

गुल्मेन कम्पोऽथ पराक्रमेण ।  
पारावतस्येव गतिं करोति ॥ (V.47)

उत्पित्सुरूपा विषरिष्टिकाले,  
विष्टम्भगुल्मेन च वक्ररूपा ।  
अत्यर्थवातेन ग्रधःस्फुरन्ती,  
उत्तानभेदिन्यसमाप्तिकाले ॥ (V.54)

Style of writing and method of exposition : The style of *Nadiprakasam* used by its author, Sri Sankara Sen, in presenting its contents and dealing with its subject-matter is mainly of one character, viz. poetry. It begins with the metre of poetry as found in *Nadivijnanam* in composing its verses in all its three chapters with Sanskrit commentaries. The first chapter consists of nine verses<sup>1</sup> only, the second chapter comprises twenty-five verses and the third one contains fifty seven verses in Sanskrit only.

The style of *Nadiprakasam*, when judged with an objective approach, is found to be rich in all the three chapters, exhibiting the touch of good Sanskrit and it has served its full purpose by embodying the teachings on the science of pulse as found in *Nadivijnanam*.

It contains some literary flourishes in the form of verses faithfully transmitted from *Nadivijnanam* and in the manner of expression of the author to convey the thoughts and ideas on the science of

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1. Six verses are missing because of its worn out condition caused by white ant.

pulse to the readers. The method of explaining the science of pulse made it easily comprehensible and intelligible to the students of Indian *Ayurveda*, as for example of literary flourishes :

कासे सूक्ष्मा स्थिरा मन्दा पुष्टा च उष्णतान्विता ।

राजहंसगतिश्चैव नाडीनामुपजायते ॥

यथा राहुगतश्चन्द्रः कम्पितः किल सर्वदा ।

तथा कासगता नाडी स्थिरा न हि कदाचन ॥ (V.40.3)

The author made a study of the science of pulse on the basis of *Nadivijnanam* of Maharsi Kanada with the purpose of attaining result on the foundation of his scheme in his short treatise. He got a line of meaning in the facts of the science of pulse as satisfying his inquisitive mind. Here the style of expression of *Nadiprakasam* is scientific. So the voice of words spoken by him is impersonally logical with a stress on the facts of the science of pulse.



## प्रथमोद्योतः (First Chapter)

*Nadiprakasham* of Sankara Sen contains three chapters, the first chapter consisting of nine verses deals with the concept of the position of an imaginary tortoise situated in the naval region of the male and female persons and the method of examination of pulse.

Verses 1-6 discuss that all the nerves of the human body issue forth from this imaginary tortoise. All the nerves of the human body are connected with its four legs. According to this concept, the centre of the nervous system lies in the naval region, whereas modern medical science states that the centre of the nervous system lies in the brain. Besides, an imaginary number of 7,000 nerves of the body has been given in *Nadiprakasham*. It is impossible to identify them with the nerves of the human body on the basis of anatomy of modern medical science.

By the distinction of the existence of an imaginary tortoise in the male and female bodies, the left hand and left foot of woman and the right hand and right foot of man have been selected for the examina-

tion of their respective pulses, as it is said that the tortoise in the body of woman is *urddhamukhah* (having its face upwards) and the tortoise in the body of man is *adhomukhah* (having its face downwards).<sup>1</sup>

Due to this difference of the position of the tortoise in the naval region the pulse of woman, situated in the left hand and left foot, and the pulse of man, situated in the right hand and right foot, should be examined respectively.

The pulse of a *Napunsaka* (a person of neuter gender) having the form (or physique) of woman, situated in the left hand and left foot, should be examined. In the case of *Napunsaka* having the form of man, his pulse, situated in the right hand and right foot, should be examined. There cannot be equality between them.

In the following manner, the pulse of the foot is to be examined :

Place the fingers (index, middle and ring fingers) on the side behind the left *granthi* (gland) of the left foot.

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1. *strinam urddhamukhah kurmah punisam punaradhomukhah, commentary, 1st chapter.*

The pulses are also examined elsewhere in two hands two feet, two sides of the neck, at the root of the nose an *upanta* (corner of eye); total eight pulses. The movement of the pulse will be known there.

The pulses of the neck (*Kanthanadi*) indicate fever, thirst, tiredness, sequence of sexual enjoyment, fear, grief and anger. The pulse at the root of the nose (*Nasanadi*) manifests death, life, sexual desire, the disease of the neck, that of the nose, head-disease and mouth-disease.

Besides, generally the place for examination of all pulses is to be made according to the time (morning time is best) and place (location) of diseases, such as, hand, foot, neck, nose, eye, ear, tip of tongue and genitals (*medhraga*).

Verses 7-8 deal with *Nadipariksa-prakaran*. (Method of examination of pulse), while verse 9 indicates the subject of examination of pulse : whether the disease is *vataja*, caused by some derangement of bodily humour—air (*vata*) or *pittaja*, caused by some derangement of bodily humour—bile (*pitta*), or *Kaphaja*, caused by some, derangement of bodily humour phlegm (*Kaph*) or it is having two combined or joint symptoms or faults (*dvandvaja*) or three combined symptoms or faults (*Sannipataja* or *Tridosaja*) or it is curable (*Sadhya*) or incurable (*Asadhya*).



## Nadipariksaprakaramaha :

Method of examination of pulse is stated:—

सव्येन रोगधृतिर्कूर्परभागभाजा-  
पीड्याय दक्षिणकरांगुलिका त्रयेण ॥ (V.7)

At the time of examination of the pulse the physician should hold the hand of the patient to be examined with his own left hand slightly bent by pressing the internal pulse of the later, running through the elbow (*Kurpara*) and should always examine the pulse at the place measuring two fingers width just below the small gland at the lower part of the thumbfinger with his own three fingers of his right hand called fore finger, middle finger. When he examines the pulse (of the patient) at the root (base) of the thumb finger, he should not press the elbow (of the patient). The pressing of the elbow is to be known only for feeling the successions of beating of the pulses of *vayu*, *pitta* and *kaph* (air, fire/bile, and phlegm/water).

अङ्गुष्ठमूलमधि पश्चिमभागमध्ये ।  
नाडी प्रभञ्जनगतिः सततं परीक्ष्या ॥ (V.8)

At the end of *praoostha* (thumb) of the hand in the wrist (*manibandha*), at the lower part (*paschima-bhagamadhya*) of the ankle, at the root of the ear, at the root of the nose and at the front of the hole of the ear (*Karnarandhra*), the examination of the pulses should be made at the place measuring the width of two fingers as previously said. The knowledge of the

pulse arises from the practice by touching, feeling, reading, etc. the pulse. Therefore, the pulse of a healthy man, which is the movement of air (*pravanjan-gatih*), should also be examined.

The movement of *jiva* (soul or being) in the body is examined by touching, pressing and striking the pulse, loosening (evacuating as feces) or purgative, rubbing, sweating and heating, etc. (V. 8)

*Pariksaniyamaha :*

The subject of examination of the pulse is stated :

वातं पित्तं कफं द्वन्द्वं सन्निपातं तथैव च ।  
साध्यासाध्यविवेकं च सर्व्वं नाडी प्रकाशयेत् ॥ (9)

The pulse reveals all these facts whether the disease is *vataja* (produced by derangement of bodily humour-wind – *vata* ) or *pittaja* (produced by derangement of bodily humour-bile, *pitta*) or *Kaphaja* produced by degeneration of bodily humour-phlegm, (*kaph*) or *dvandvaja* (produced by two faults) or *tridosaja* (produced by three faults) or whether it is *sadhya* (curable) or *asadhya* (incurable). (V. 9)



## द्वितीयोद्योतः

### Sccond Chapter

अथ नाडीविज्ञानसमयमाह

The time of reading the pulse :

प्रातः कृतसमाचारः कृताचारपरिग्रहम् ।  
सुखासीनः सुखासीनं परीक्षार्थमुपाचरेत् ॥ (V.1)

Both the examiner (i. e. physician) and the examinee patient should be seated on comfortable seats after performing their morning functions in the morning (i. e. clearing of the bowels, washing of mouth, etc.). The examiner will examine the pulse of the patient. Morning is the best time for examining the pulse. Because at this time the pulse remains cool. At noon the pulse becomes hot and in the evening it becomes fast-running. Therefore, if the pulse is examined in the morning, its real condition is felt. (V. 1)

निषिद्धकालमाह

Prohibited time of examining the pulse is stated :

तेलाभ्यङ्गे च सुप्ते च तथा च भोजनान्तरे ।  
न तथा ज्ञायते नाड्यो यथा दुर्गन्तमा नदी ॥ (V.2)

The pulse is not (correctly) known (under stood) at the time of rubbing oil (on the body of the patient), during (his) sleep, at his meal-time and just after his meal, for as the river having terrible current is very difficult to be stopped (held), just so it is difficult to determine the movement of the pulse of a patient at those times. It is also said in other medical sciences (*tantras*) that the movement of the pulse is not fully understood just immediately after bath or meal or at the time of appetite or thirst, at the heated condition in the sunshine and in a tired body due to exercise.

अथ वातादि स्वभावक्रममाह

Next the nature of the course of the *vata*, etc. (i. e. the natural course of the faults of air, bile and phlegm) is stated:—

आदौ च वहते वातो मध्ये पित्तं तथैव च ।  
अन्ते च वहते श्लेष्मा नाडिकात्रयलक्षणम् ॥ (V.3)

First flow *vata* (air), in the middle flows *pitta* (bile or fire), just like that at the end flows *shlesma* (phlegm). These are the symptoms of three pulses. (V. 3)

In the begining it has been said that at the time of examining the pulse the physician, placing the hand of the patient to be examined on his own left hand, slightly bent, should always examine the pulse of the patient by pressing the pulse of the patient,

running through his elbow at the place, measuring the width of two fingers just below the small gland at the lower part of his thumb with the former's called fore-finger, middle-finger and ring-finger.

Next it is stated how the examination of the pulse is to be carried on. Immediately after pressing the elbow, the movement (course) of the pulse, which is felt by pressing it with the fore-finger of the physician at the base (root) of the thumb of the patient, is the movement of *vayu* (air); in the middle, i. e. after the second pressing of the pulse, the movement, which is felt is the movement of bile (fire); at the end, i. e. after the third pressing of the pulse, the movement which is felt is the movement (or course) of phlegm.

In the place “आदौ च वहते वातः” some one says that the meaning of the “आदि” is the place pressed under the fore-finger, i. e. the movement of *vayu* (air) is felt at the place pressed with the fore finger.

The others say that the word “आदि” indicates the place pressed under the ring finger, i. e. the movement of air (*vayu*) is felt at the place pressed with the ring finger. Both these views are not correct, because the movements of air (*vata*), etc. are felt according to the division (or distinction) of the place. This thing is not mentioned anywhere. And nothing about the division of the place has been determined (ascertained) even where the distinction of movements of *vayu* (air), etc. has been discussed. Moreover,

independent (or separate) faults are not felt at the places pressed under separate fingers.

Some other Pandits say that at first there is the movement of bile (fire or *pitta*), in the middle there is the movement, of phlegm and last that of air (*vayu*) is felt. But this view also is not proper because it has been said everywhere that the movement of bile is felt in the middle. If the pulse of a healthy person is examined, the movement of bile is felt in the middle. Moreover, if the movement of bile is accepted first, there takes place the defect (or fault) of *asadhyata* (incurability) because the movement of bile has been stated first in the case of the symptoms of incurability.

It appears that the word has been written to establish (or prove) incurability, or the movement of bile (*pittagati*) has first been stated by observing the time of bile (*pittakala*); because at the time of agitation or derangement of bile the movement of bile may be first felt due to the intensity of bile.

There is also another such statement “*Vatadhikānādi agre, ślesmadhikānādi madhye and pittadhikānādi ante vahante*”.

That is to say, the pulse of excess air flows first, the pulse of excess phlegm flows in the middle and the pulse of intense bile flows last.

This is not true. Three kinds of symptom of the pulse are observed in the case of typhoid fever

(or typhoid stage). There is another statement that there is first the movement of phlegm (*slesma*), the movement of bile (*pitta*) is in the middle, and the movement of air (*vayu*) will be felt last. It seems that this statement has been made by observing the morning, the noon and the evening. Because in the morning there takes place an excess or agitation of phlegm, that of bile (*pitta*) at noon and that of air (*vayu*) in the evening.

So in the morning the movement of phlegm is first felt due to the intensity of phlegm. For the same reasons the movement of bile (*pitta*) is first felt at noon and the movement of air (*vayu*) is first felt in the evening.

### अथ स्वास्थ्यज्ञानार्थमाह

Next the meaning of the knowledge of health is stated :

भूलतागमनप्राया स्वस्था स्वास्थ्यमयो शिरा ॥V. 4॥

The movement of the pulse of a healthy man is often like that of an earthworm (*bhulatagamanapraya*). There does not exist any kind of dullness or sluggishness in his pulse. (V. 4)

In other works of medical science it is said that the pulse of a healthy person is steady (*स्थिरा*), i.e. slow or gentle-moving (*मन्दगति*) and strong, i.e. although the pulse is thick, yet it is free from dullness

or sluggishness. “सुखितस्य स्थिरा ज्ञेया तथा बलवती” ।  
“स्थिरा मन्दगमना, बलवती स्थौल्ये सति जाड्या रहिता” ।<sup>1</sup>

It should be understood by the word “सुखित” that only the difference of the pulse of a healthy person from that of a patient is that the pulse of the latter is thick and dull or sluggish, but that of the former, though thick, there is no dullness or sluggishness. In other works it is also said about a healthy person that the man whose pulse is cool (i.e. slow-moving) in the morning, hot at noon, and running fast in the evening, was not attached with any disease for a long time and also would not be attached (for a long time) in future.

But there is this point of difference in this view, that if such movement of the pulse is short-lived (momentary) in the morning, at noon, and in the evening, then it should be understood that disease of that person took place for a short time before and it would not occur within a short time. The movement of the pulses of those, who are taking proper diet, becomes such. (4).

अथ वातादीनां क्रमेण स्वभावमाह

Next the nature of the pulse vitiated by bodily humours-*vata* (air or wind), *pitta* (bile or fire), and *kaph* (phlegm) is spoken :

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1. *Nadiprakasam, Commentary, P. 14*



वाताद् वक्रगता नाडी चपला पित्तवाहिनी ।

स्थिरा श्लेष्मवती ज्ञेया मिश्रिते मिश्रिता भवेत् ॥ (V.5)

The pulse deranged or vitiated by bodily humour-*vata* (wind or air) is *vakragamini* (crookedly-going), the pulse deranged or vitiated by bodily humour-*pitta* (bile or fire) is *chanchala* (tremulus or unsteady), and the pulse deranged or vitiated by bodily humour-*kaph* (phlegm or water) is known to be *mandagamini* (slow-going) (V. 5)

The pulse having two faults is endowed with symptoms of two faults, the pulse having three faults is endowed with symptoms of three faults. That is, the movement of the pulse vitiated by *vata* and *pitta* (air and fire or bile) is crooked and unsteady respectively, the movement of the pulse vitiated by *vata* and *slesma* (air and phlegm or water) is crooked and slow respectively, and the movement of the pulse vitiated by *pitta* and *slesma* (fire or bile and phlegm or water) is unsteady and slow respectively. The movement of the pulse vitiated by *vayu*, *pitta*, and *slesma* (air, bile, and phlegm) is crooked, unsteady, and slow respectively.

In this case also there may be an objection : how the mixed symptoms will arise, suppose the movement of the pulse vitiated by *pitta* is unsteady or restless and the movement of the pulse vitiated by *kaph* is slow. Unsteadiness and slowness are opposite characteristics to each other, therefore, two opposite characteristics (or symptoms) will be manifested

simultaneously in the pulse vitiated by *pitta* and *slesma*. Its answer is that unsteadiness and slowness do not take place at the same time in the pulse vitiated by *pitta* and *slesma*, these symptoms are indicated at different times.

In another work it is said that the pulse sometimes moves on slowly and sometimes quickly due to intensity of *slesma* and *pitta*. The rule of the mixed movement in regard to others is to be known like this everywhere.

उक्तवक्रादिगतिसामान्यस्य क्रमेण विशेषत्वमाह

The particularity of general movement of the aforesaid vata, etc. is stated in order :

सर्पजलौकादिगतिं वदन्ति विबुधाः प्रभञ्जनेन नाडीम् ।

पित्तेन काकलावकभेकादिगतिं विदुः सुधियः ॥ (V.6)

राजहंसमयूराणां पारावतकपोतयोः ।

कुक्कुटस्य गतिं घत्ते घमनी कफसंवृता ॥ (V.7)

The scholars say that the movement of the pulse vitiated by bodily humour-*vayu* is crooked like that of a snake, a water-leech and a scorpion. The movement of the pulse vitiated by bodily humour-*pitta* is like that of a crow, a quail, and a frog. (V. 6)

And the movement of the pulse vitiated by bodily humour-*kaph* is like that of a gander, a peacock, a pigeon, a dove, and a cock, i.e. the pulse vitiated by *kaph* assumes the movement of a gander a peacock, a pigeon, a dove, and a cock, bending backward. (V. 7)

i.e. the pulse of excited *kaph* (phlegm) assumes the movement of gander, peacock, pigeon, dove, and cock, bending backwards.

### वतादिद्वन्द्वजनाङ्गीगतिभेदमाह

The distinction of the movement of the pulse produced by degeneration of two bodily humours—*vata* (air), etc., is stated :

मुहुः सर्पगतिं नाडीं मुहुर्भेकगतिं तथा ।  
 वातपित्तद्वयोद्भूतां प्रवदन्ति मनीषिणः ॥ (V.8)  
 भुजगादिगतिं नाडीं राजहंसगतिं तथा ।  
 वातश्लेष्मसमुद्भूतां भाषन्ते तद्विदो जनाः ॥ (V.9)  
 मण्डूकादिगतिं नाडीं मयूरादिगतिं तथा ।  
 पित्तश्लेष्मसमुद्भूतां प्रवदन्ति महाधियः ॥ (V.10)

The great thinkers say that it should be understood that there has taken place an irritated excess of *vata* (air) and *pitta* (bile) of a patient whose pulse moves like a snake at one moment and like a frog at another moment (V. 8)

Thus the wise people say that it should be understood that there occurred an excess of vitiated bodily humour—*vata* (air) and *slesma*. (phlegm) of a patient whose pulse moves like a snake, etc. at one moment and like a gander, etc. at another moment. (V. 9)

And the wise people say that it should be understood that there is an excess of degenerated bodily humours—*pitta* (bile) and *slesma* (phlegm) of a

patient whose pulse moves like the movement of a frog etc. at one moment and like that of a peacock, etc. at another moment (V. 10).

### त्रिदोषजनाडीगतिमाह

The movement of the pulse produced by degeneration of three bodily humours—*vata*, *pitta* and *kaph* (air, bile, and phlegm) is stated :

उरगादि-लावगादि-हंसादीनाञ्च विभ्रती गमनम् ।

वातादीनाञ्च समं धमनी सम्बन्धमाधत्ते ॥ (V.11)

The pulse vitiated by three bodily humours—*vata*, *pitta*, and *kaph* (air, bile and, phlegm) moves first like a snake. etc., in the middle like a quail, etc. and lastly like a gander, etc. (V. 11)

If the excess of vitiated bodily humours *vata*, *pitta*, and *kaph*, three faults, is equal, then only such movements of the pulse take place in this order. But in the case of typhoid fever the movement of the pulse occurs in different order (or succession) without taking place in such order; first *pitta* (bile) or *slesma* (phlegm), in the middle *slesma* (phlegm) or *vata* (air), and lastly *pitta* (bile) or *vata* (air)—in this manner there takes place the pulsation. Then the case is considered as serious or incurable. (V. 11)

### सुखसाध्यरूपम्

Nature of easily curable disease :

यदा यं धातुमाप्नोति तदा नाडी तथागतिः ।

तदा हि सुखसाध्यत्वं नाडीज्ञानेन गम्यते ॥ (V.12)

It should be known (or understood) through the knowledge (science) of pulse, an easily curable disease, if the pulse (of a patient) assumes the movement of that element (*dhatu*) when it relates to it. The meaning is this :

Suppose the excessive agitation of *vayu* (air) is in the afternoon and the movement of the pulse is examined; if the movement of *vayu* (crooked movement is first felt, next that of *pitta* (bile) (i. e. restlessness) and next that of *slesma* (phlegm) (i. e. slow movement), then it should be understood as a healthy condition of curability. If the case is different, then it should be understood as serious or incurable case (V. 12)

### असाध्यरूपमाह

Nature of incurability of disease is stated :

मन्दं मन्दं शिथिलशिथिलं व्याकुलं व्याकुलं वा ।  
स्थित्वा स्थित्वा वहति धमनी याति नाशञ्च सूक्ष्मा ॥ (V.13)

The pulse indicating three faults—*vata*, *pitta*, and *slesma*, sometimes flows slowly; and sometimes agitatingly and agitatingly hither and thither like a fearful man; sometimes beats by stopping and stopping; sometimes goes on by delaying and delaying or it is so thin that its beating is not felt at all.

नित्यं स्थानात् स्खलति पुनरप्यङ्गुली संस्पृशेद् वा ।  
भावैरेवं बहुविधविधैः सन्निपातादसाध्या ॥ (V.14)

Sometimes it leaves (or slips from) its own fixed place, i. e. the root of the thumb or once again also it touches the finger (by coming to its own place) (after a few moments). If the pulse is affected by many kinds of states of faults due to *tridosamayinadi* (the pulse having three faults), then it should be understood as incurable i.e. incurability of the disease. (V. 13.)

In other, medical works it is said that if the body (of the patient) is heated by too much heat but the pulse is cool or if the body is very cool but the pulse is very hot (having too much heat), the movement of the pulse is of different types, then the death of the patient is known to be as certain.

It is also stated that the pulse of a patient becomes non-moving at the time of death. In this case it should be understood that there take place much less beatings of the pulse than its natural beatings.

अपरमसाध्यलक्षणम् ।

Other incurable symptoms of disease :

पूर्वं पित्तगतिं प्रभञ्जनगतिं श्लेष्माणमाविभ्रतीम् ।  
 सन्तानभ्रमणं मुहुर्विदधतीं चक्राधिरूढामिव ॥  
 तोव्रत्वं दधतीं कलापिगतिकां सूक्ष्मत्वमातन्वतीम् ।  
 नो साध्यां धमनीं वदन्ति मुनयो नाडीगतिज्ञानिनः ॥ (V.14)

If the movement of *pitta* (bile) is first felt in the pulse, the movement of *vayu* (air) in the middle

(intermediate time), next the movement of *slesm* (phlegm) or the pulse is found revolving like *bhramyamana* (rotating thing) mounted on a wheel or if it is too fast or sometimes it moves like a peacock, sometimes it is getting thinner and thinner by and by, then the experts of the movement of pulse say that the pulse indicating disease is not curable.

It is said in other works that the pulse which moves high (up) (i. e. at the time of beating of the pulse); it seems as if a separate pulse is moving jumping and jumping (or rising and rising); the pulse which is stable, i. e. whose movement is felt, if observed attentively; the pulse which moves like the *mamsavahini* (meat-carrying), i. e. as the pulse moves too fast like a stick if meat is taken by a person; the pulse which is thin (fine); and the pulse which is crooked; all these pulses should be known as incurable. (V. 14)

#### असाध्यत्वापवादमाह

Exception to the case (rule) of incurability is stated :

भारप्रवाह-मूर्च्छाभयशोकप्रमुखकारणान्नाडी ।

समूर्च्छितापि गाढं पुनरपि सा जीवितं धत्ते ॥ (V. 15)

In the case of always carrying load (by a person); that of fainting due to the intensity of poisoning; that of fainting due to the sight of blood, or that of fainting or stopping of the beat or movement of the pulse because of fear at the sight of *Raksasa* or

due to grief at the loss of son, etc. or in the case of occurrence of particular cause or incidents like these, the pulse can be *sammurcchita* (completely fainting), i.e. completely beatingless. But even though the pulse may be beatingless due to the above-mentioned causes like carrying load, etc. it is not incurable, it again comes to life. In other works it is said that in the case of fall from a great height, at the time of uniting broken bones, in *atisara* (dysentery), i.e. due to too much passing of stool in dysentery or in loss of semen-virile due to much sexual enjoyment or consumption, etc., the pulse may be beatingless. But in such conditions, even though the pulse may be devoid of beating, it is not incurable, it again becomes active.

It is also said that there is no fear, even if the pulse indicates the movement of *vatadi* (air, etc.) each fault, or double faults (*dvandvajās*) or combined three faults, (*tridosas*) respectively, or exceptionally incurable typhoid pulse is observed by the examination of the pulse of children drinking mother's milk, or that of a fainted dumb, or that of an insane, or that of a wicked man cursed by *abhicara-abhisap* (exorcising curse); because the pulses of those persons attain again the natural condition.

It is further said that the pulse may be beatingless in the case of *ajirna* (indigestion) *Vataroga* (rheumatism), exercise, sexual enjoyment and laborious work, in the heat of the sunshine, in tired-



ness of the body (*agamaklanti*), i.e. due to exposure to water, cold (or ice), etc. But there is no fear of death in such conditions. At another place it is said that in the case of contact of spirit (*bhutabhisanga*) or common contact of malicious god (*devadustabhisanga*) the pulse, although at present having typhoid symptoms, does not succeed to cause typhoid to the person, i.e. it does not produce any bad effect on him. Because that pulse flows according to the order of the nature of *vata* (air), etc.; it does not attain any reverse result. For that reason there is no fear of death or any disease, although the pulse is having typhoid symptoms. Really the pulse, having the symptoms of typhoid, is not the typhoid pulse.

In the case of fall from a high place, grief, and cold (*hima*) the diseaseless pulse also becomes beatingless, therefore, do not consider it as incurable.

In cholera the beating of the pulse is not felt. But it does not leave its own place. The pulse remains as fainted at the root of the thumb in that case. Some physicians say that the pulse is not incurable as long as it does not leave its own place, although there is present the symptom of incurability.

To speak the truth, the displacement of the pulse from its own place takes place at the time of death. (V. 15)

क्षणात् गच्छति वेगेन शान्तां लभते क्षणात् ।  
सप्ताहाण्मरणं तस्य यद्यङ्गं शोथवर्जितम् ॥ (V.16)

If the pulse (of a patient) moves fast for a moment, halts for a moment, death will take place after a week, but if there is no dropsy in his body. (V. 16)

### प्रसंगात् कालनिर्णयमाह

In this connection the determination of time of death is stated :

भूलता-मुजगाकारा नाडी देहस्य संक्रमात् ।  
विशीर्णे क्षीणतां याति मासान्ते मरणं ध्रुवम् ॥ (V.17)

It is to be known that the patient, whose pulse is sometimes feeble and smooth (oily) like an earth worm and moves like it, sometimes (it is) fully developed (*paripustam*) like a snake and moves with great speed in a crooked manner, sometimes (it becomes) feeble (thin) according to the movement (*samkrama*) of the body, will die at the end of one month. (V. 17)

तिर्यग् यवप्रमाणेन या मुञ्चति निजास्पदम् ।  
पञ्चाहाद् भाविनं मृत्युं पादनाडी निदर्शयेत् ॥ (V.18)

The patient whose pulse of the foot leaves its own place measuring a barley will die after five days. (V.18)

जहाति यस्य स्वस्थानं यवार्द्धमपि नाडिका ।  
न स जीवितमाप्नोति त्रिदिनाभ्यन्तरे मृतिः ॥ (V.19)

The life of the patient whose pulse of the hand leaves its own place measuring half a barley is not saved. His death will take place within three days. (V. 19)

हिमवद् विशदा नाडी ज्वरदाहेन तापिनाम् ।  
त्रिदोषस्पर्शभजतां तदा मृत्युर्दिनत्रयात् ॥ (V.20)

If a typhoid patient is very much heated by the heat of fever, but his pulse is clear and cool like ice, then it should be understood that his death will take place within three days. (V. 20)

निरीक्ष्या दक्षिणे पादे तदा चैषा विशेषतः ।  
मुखे नाडी बहेन्नित्यं ततस्तु दिनतुर्यकम् ॥ (V.21)

If both the pulses (i.e. the pulses of the right foot and right hand of the male and the pulses of the left foot and left hand of the female) flow always at the mouth (ending part) of the place held by the fore finger, then it should be understood that the patient will survive for only four days. (V. 21)

गतं भ्रमरकस्येव बहेदेकदिनेन तु ॥ 22॥

As a bee, while flying and flying and halting steadily at some place by making humming sound for sometime (moments), at once (it) goes away from that place and after a little while again coming to that place, makes humming sound, the patient whose pulse making fast beatings once halts, and after a little again beats thus, it should be known that his death will take place within a day. (V. 22)

कन्दे न स्पन्दते नित्यं पुनर्लगति चाङ्गुलौ ।  
मध्ये द्वादशयामानां मृत्युर्भवति निश्चितम् ॥ (V.23)

If the beating of the pulse (of a patient) at the root of the place (i.e. at the place held by the fore

finger) is not taking place constantly (or felt a little), (or sometimes) again strikes (touches) the fingers, then it is certain that his death will take place within twelve prahars. (V. 23)

स्थित्वा नाडी मुखे यस्य विद्युद्द्योत इवेक्षते ।

दैनिकं जीवितं तस्य द्वितीये म्रियते ध्रुवम् ॥ (V.24)

The life a patient, whose pulse is felt once again like the lightning at the root place intermittently by halting, is only one day, on the second day, i.e. after eight praharas, his death must take place. (V. 24)

स्वस्थानविच्युता नाडी यदा वहति वा न वा ।

ज्वाला च हृदये तीव्रा तदा ज्वालावधिस्थितिः ॥ (V.25)

If the pulse of a patient, leaving its own place, (i.e. the root of the thumb) beats once again by halting and halting intermittently or does not beat and there is too much intense burning sensation in the heart, then the condition of his life should be known upto that burning, i.e. the stoppage of burning and death take place at the same time. (V. 25)



## तृतीयोद्योतः

रोगभेदे नाडीपरीक्षाविधिः

Rule of examination of the pulse on the basis of distinction of diseases :

ज्वरपूर्वरूपे

Nature of symptoms prior to the rise of fever :

अङ्गग्रहेण नाडीनां जायन्ते मन्थराः प्लवाः ।

प्लवः प्रबलतां यान्ति ज्वरदाहाभिभूतये ॥ V.1 ॥

Prior to the rise of fever, i. e. on the presence of pain in the body, the pulse moves by jumping like a frog slowly twice or thrice. Before the rise of burning fever such movement of the pulse grows in intensity, i. e. takes place continuously. (V. 1)

सान्निपातिकरूपेण भवन्ति सर्ववेदनाः ॥ V.2 ॥

Prior to the manifestation of typhoid fever there become all kinds of pain in the body, i. e. the pulse moves like the birds—quail, francoline partridge (*Tittiri*) and a kind of duck or quail, (*vartaka*) i. e. it

beats first crookedly, then beats upwards and at last beats slowly, and various types of pain take place in the body. (V. 2)

### ज्वररूपमाह

Nature of fever is stated :

ज्वरवेगे च धमनी सोष्णा वेगवती भवेत् ॥ V.3 ॥

The pulse becomes hot and speedy in the case of *jvaravega* (intensity fever); the pulse becomes hot, if sour thing is taken, but it does not become speedy. It remains hot from the time after sexual enjoyment upto the morning of next day like the flame of a lamp but there is no speed in it. The particularity of the pulse affected by fever is this that heat and speed are felt simultaneously. (V. 3)

### वातादिज्वरे विशेषमाह

The particular symptom or nature in *vatadijvara* (fever produced by vitiation of bodily humour—*vata*-air, etc.) is stated :

सौम्या सूक्ष्मा स्थिरा मन्दा नाडी सहजवातजा ।  
स्थूला च कठिना शीघ्रा स्पन्दते तीव्रमास्ते ॥ V.4 ॥

If *vatajvara* takes place at the time of accumulation of air (in the body), the pulse becomes *saumya* (soft, not hard), *suksama* (thin), *sthira* (steady), i. e. its beating is felt late and late, and *manda* (very slow), i. e. its beating, though felt, is not clear. At the time of excess or intensity (*prakopa*) of air if

*vatajvara* takes place, the beating of the pulse becomes *sthula* (large) and *kathina* (hard) and *sighra* (rapid). (V. 4).

### पित्तज्वरे

The pulse in fever produced by vitiation of bodily humour- *pitta*-bile :

भृता च सरला दीर्घा शीघ्रा पित्तज्वरे भवेत् ।  
शीघ्रमाहननं नाड्याः काठिन्याच्च चला तथा ॥ V.5 ॥

In bilious fever at the time of accumulation of bile in the body the pulse becomes *bhrta* (full), *sarala* (straight), *dirgha* (long)<sup>1</sup> and *sighra* (speedy). At the time of excess of bile, if *pittajvara* takes place, the pulse becoming hard moves so rapidly that it seems as if it is pulsating upwards, piercing the pulse. (V. 5).

दोषाजीर्णेन नितरां स्पन्दनं च प्रकीर्तितम् ॥ V.6 ॥

The pulse is always said to be very speedy in the case of non-assimilation (or removal) of fault completely in bilious fever. (V. 6)

### श्लेष्मज्वरे

The pulse in fever produced by vitiation of bodily humour-*sleshma* (phlegm) :

नाडी तन्तुसमा मन्दा शीतला श्लेष्मकोपतः ॥ V.7 ॥

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1. extending to three fingers—index, middle, and ring fingers.

The pulse becomes very thin (fine) like thread, slow, and cool in *kaphajvara* (phlegmatic fever) at the time of excess of phlegm, i. e. the pulse becomes very fine like thread, slow like a gander and cool like a rope soaked in warm water (not too cool because of fever) in the case of phlegmatic fever at the time of excess or intensity of phlegm in the body. (V. 7)

### वातपित्तज्वरे

The pulse in fever produced by vitiation of bodily humours—*vata and pitta* (air and bile).

चञ्चला तरला स्थूला कठिना वातपित्ततः ॥ V.8 ॥

The pulse becomes unsteady (tremulous), waving, large (or thick) and hard in *vatapittajvara*. That is, the movement of the pulse is unsteady like that of a monkey, sometimes waving (*tarala*), large (or thick), and hard in *vatapittajvara*. (V. 8)

### वातश्लेष्मज्वरे

The pulse in fever produced by vitiation of *vata and slesma* (air and phlegm) :

ईषच्च दृश्यते तूष्णा मन्दा स्यात् श्लेष्मवातजा ।  
निरन्तरं खरै रुक्षं मन्दश्लेष्मातिवातला ।  
रुक्षवातभवे तस्य नाडी स्यात् पिण्डसन्निभा ॥ V.9 ॥

*Slesmavataja-jvara* (fever produced by vitiation of bodily humour-*slesma* and *vata*-phlegm and air) the pulse is found to be slightly warm and slow-moving. But if the part of *slesma* (phlegm) is less and that of *vata* (air) is more, the movement of the pulse



is always *khara* (hard) and *ruksha* (rough). And in the case of *rukhsavata* (rough air) the pulse of a patient becomes of the shape of *pinda* (ball), i. e. round-shaped. (V. 9)

### पित्तश्लेष्मज्वरे

The pulse in fever produced by vitiation of bodily humours-*pitta* and *slesma* (bile and phlegm) :

सूक्ष्मा शीता स्थिरा नाडी पित्तश्लेष्मसमुद्भवा ॥ V.10 ॥

The pulse is thin (fine), cool, and steady in *pittaslesmajvara*. (V. 10)

### प्रसङ्गादाह—

It is said in this connection :

मध्यकरे वहेन्नाडी यदि सन्तापिता ध्रुवम् ।  
तदा नूनं मनुष्यस्य रुधिरापूर्तिता मलाः ॥ V.11 ॥

If the pulse flows at the middle finger by getting heated, then it is certain that the faults-*vata*, etc. of the man have become full due to degeneration of blood. (V. 11)

भूतज्वरे सेक इवातिवेगाः ।  
धावन्ति नाड्यो हि यथाब्धिगामाः ॥ V.12 ॥

The movement of the pulse in *Bhutajvara* (fever produced by the overtaking by spirit) is very speedy like that of a stream ( or river ) running ( flowing ) towards the sea. Moreover, because of heat the pulse is having hot touch like a rope drenched in hot water. (V. 12)

ग्रेकाहिकेन वचन प्रदूरे,  
 क्षणान्तगामा विषमज्वरेण ।  
 द्वितीये वाथ तृतीय-तूर्ये,  
 गच्छन्ति तप्ता भ्रमिवत् क्रमेण ॥ V.13 ॥

The pulse sometimes goes out of its own place to a little distance in the case of quotidian typhoid fever. Again after a moment it returns to its own place. The pulse, getting heated goes out of its own place to a little distance like a *Bhrami* (bee) in *dvitiyaka* or *trtiyaturya* (fever after two days—tertian or quartan fever).

Even if the symptoms of incurability are found as a result of leaving its own place, the case should not be considered as incurable because the pulse remains hot, but if the case is incurable, it does not remain hot. (V. 13)

क्रोधजे सङ्गलग्नाङ्गा समाङ्गा कामजे ज्वरे ।  
 उष्णा वेगधरा नाडी ज्वरकोपे प्रजायते ॥ V.14 ॥

The pulse moves as if getting combined (*samlagna*) in another pulse (i.e. slightly bending) in fever caused by anger, it runs as if by uniting with another pulse in *Kamajajvara* (fever produced by sexual passion), and it becomes hot and speedy due to the intensity of fever. (V. 14)

उद्वेगक्रोधकालेषु भयचिन्ताश्रमेषु च ।  
 भावक्षीणगतिर्नाडी ज्ञातव्या वैद्यसत्तमैः ॥ V.15 ॥

The movement of the pulse is known by the best physicians to be feeble at the time of anxiety (due to sexual thought or thought of detachment) and anger, fear, thought, labour, and desires, etc. (V. 15)

प्रसङ्गाज्ज्वरिणः कुपथ्यादिज्ञानमाह—

In this connection the knowledge of the effect of bad diet, etc. taken by the patient suffering from fever is stated (as indicated by the pulse) :

ज्वरे च रमणे नाडी क्षीणाङ्गा मन्दगामिनी ।

ज्वरे कामातिरूपेण भवन्ति विकलाः शिराः ॥ V.16 ॥

The pulse becomes feeble and slow-moving in fever, if sexual enjoyment is made with one's wife, the pulse becomes *vikalah* (agitated or restless) in fever caused by sexual passion. That is, if a patient becomes passionate in fever, his pulse runs restlessly like a man who moves restlessly to and fro, if he does not get his desired thing. (V. 16)

उष्णत्वं वषमा वेगा ज्वरिणां दधिभोजनात् ॥ V.17 ॥

The speed and heat of the pulse become more than fever in the case of patients taking curd in fever. (V. 17)

अम्लाशित्वादसुस्थत्वे जायन्ते तापिताः शिराः ।

काञ्जिकया ज्वराक्रान्ते जायन्ते मन्यरा गतिः ॥ V.18 ॥

The pulses become hot in the case of fever or any other disease on the taking of too much sour things. The movement of the pulse becomes slow in the case of fever caused by taking *Kanjika* (sour rice gruel). (V. 18)

व्यायामे भ्रमणे चैव चिन्तया धनशोकतः ।

नाना प्रकारगमनं शिरा गच्छति विज्वरे ॥ V.19 ॥

The pulse of a person undergoes different kinds of movement in feverless state in the case of exercise, walking, thought, and grief over the loss of wealth. (V. 19)

अजीर्णे—

The pulse in indigestion :

अजीर्णेन भवेन्नाड़ी कठिना परितो जडा ।

प्रसन्ना तु द्रुता शुद्धा त्वरिता च प्रवर्त्तते ॥ V.20 ॥

The pulse becomes hard in both *pakva* and *apakva ajirna* (digested or chronic, ripe and undigested *ajirna*) and moves slowly on both sides. It becomes soft (*Prasanna*), rapid (*druta*) (devoid of dullness), pure or faultless (*suddha*), and speedy (*tvarita*) in the case of *sujirna* (*good-digestion*). (V. 20)

पक्वाजीर्णे पुष्टिहीना मन्दं मन्दं वहेत् शिरा ।

असृक्पूर्णा भवेत् कोष्णा गुर्वी सामा गरीयसा ॥ V.21 ॥

In *pakvajirna* (ripe or chronic indigestion) the pulse becomes *pustihina* (unnourishing) and flows slowly and slowly. The full-blooded pulse is slightly hot (*kosna*) and heavy (*gurvi*) and the pulse becomes large or thick (*gariyasi*) having mucus (*sama*). (V. 21)

सुखितस्य स्थिरा ज्ञेया चपला क्षुधितस्य च ॥ V.22 ॥

The pulse of a person satisfied with meal, etc. is steady, i.e. moves slowly and slowly. The pulse becomes large (or thick) if eaten stuff remains undigested; the pulse of a hungry person becomes unsteady (or wavering). (V. 22)

प्रसङ्गाद् भक्ष्यज्ञानमाह—

In this connection the knowledge of the effect of eaten food-stuff on the pulse is stated :

पुष्टिस्तैलगुडाहारे मांसे च लगुडाकृतिः ।  
क्षीरे च स्तिमिता वेगा मधुरे भेकवद्गतिः ॥ V.23 ॥

The pulse becomes thick (or large) in the case of taking nourishing oily stuff, molasses, sweet things, and meat; it beats hard and jumping upwards, having the form of a stick in the case of taking meat. Its movement becomes slow in taking milk, and like that of a frog in taking sweet thing (melted or unmelted). (V. 23)

रम्भागुडवटाहारे रुक्षशुष्कादिभोजने ।  
वातपित्तातिरूपेण नाडी वहति निष्क्रमम् ॥ V.24 ॥

The pulse sometimes flows like a snake or sometimes like a frog as in the case of diseases caused by vitiation of bodily humours-*vata* (air) and *pitta* (bile), if banana, molasses and vada (a kind of cake) and dry stuff like *chipitaka* (flattened rice), etc. are taken. (V. 24)

### अथ रसज्ञानम्

The knowledge of taste (*rasa*) of food affecting the movement of pulse :

मधुरे बहिगमना तिक्ते स्याद् भूलतागतिः ।  
अम्ले कोष्णा प्लवगतिः कटुके भृङ्गसन्निभा ॥ V.25 ॥

The movement of the pulse is like that of a peacock in the case of taking sweet stuff; like that of an earth worm in taking a bitter-tasting article; like that of a frog, slightly hot, in taking acidic stuff; like that of a *Bhrnga* (a kind of bird, *phinga*) in taking sour thing. (V. 25)

कषाये कठिना म्लाना लवणे सरला द्रुता ।  
एवं द्वित्रिचर्तयोंगे नानाधर्मवती धरा<sup>1</sup> ॥ V.26 ॥

There becomes a hard, and feeble pulse in the case of taking astringent and speedy pulse in taking saltish article. Thus the pulse makes different movements, if two, three or four kinds of tasting-stuff are taken (V. 26)

द्रवेऽतिकठिना नाडी कोमला कठिनाशने ।  
द्रवद्रव्यस्य काठिन्ये कोमला कठिनापि च ।  
क्षुद्रे पृथग् ग्रन्थिलेव पुष्टे पुष्टेव जायते ॥ V.27 ॥

The pulse becomes very hard in taking flowing (liquid) stuff and soft in taking a hard substance, it

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(1) In *Nadivijnanam* this word “*Dhara*” is not found, there is mention of *Sira*, so *Dhara* and *Sira* carry the same meaning.

becomes soft and hard also. The pulse becomes separate (distinct) and knotty in taking small thing and nourished (or developed) in taking nourishing stuff. (V. 27)

अग्निमान्द्यघातुक्षयज्ञानमाह—

Knowledge of digestion and waste of bodily humours (affecting the pulse) is stated :

मन्दाग्नेः क्षीणघातोश्च नाडी मन्दतरा भवेत् ।  
मन्दाग्नी शीततां याति नाडी हंसाकृतिस्तथा ॥ V.28 ॥

The pulse becomes slower in the case of slowness of digestion and waste of bodily humours; it becomes cool in slowness of digestion and moves like a swan. (V. 28)

दीप्ताग्निज्ञानमाहः—

Knowledge of kindled or inflamed fire in the body affecting the pulse :

लघ्वी वहति दीप्ताग्नेस्तथा बलवती मता ॥ V.29 ॥

The pulse flows lightly, i.e. neither developed nor feeble and forceful (*Valavati*). (V. 29)

अतिसारे

The pulse in dysentery :

अतिसारे च मन्दा स्याद् ग्रीष्मकाले जलोकावत् ।  
वातातिसारे वक्रत्वं चञ्चला पित्तसम्भवे ॥  
राजहंसगतिर्यादृक् तादृङ्नाड्यः कफावृते ॥ V.30 ॥

The pulse becomes slow, in dysentery, like a water leech in the summer, it becomes crooked in *vatatisara* (dysentery caused by some derangement or vitiation of bodily humour-wind) and restless or *pittasambhava* (dysentery caused by some derangement of bodily humour-*pitta*, bile); and the movement of the pulse becomes like that of a gander in *Kaphajatisara* (dysentery caused by derangement or vitiation of bodily humour-*kaph*, phlegm). (V. 30)

द्वन्द्वजातिसारे नाडीं मुहुर्भेकगतिं तथा ।  
 वातपित्तसमुद्भूतां प्रवदन्ति मनीषिणः ॥  
 भुजगादिगतिं स्थूलां राजहंसगतिं तथा ।  
 वातश्लेष्मसमुद्भूतां प्रवदन्ति महाधियः ॥  
 मण्डूकादिगतिं नाडीं मयूरादिगतिं तथा ।  
 पित्तश्लेष्मसमुद्भूतां प्रवदन्ति विशारदाः ।  
 सन्निपाते विलुप्ता तु नाडी भवति निश्चितम् ॥ V.31 ॥

In *dvandvajatisara* (dysentery caused by vitiation of two bodily humours-*vata* and *pitta*, etc.) the pulse moves like a frog, jumping and jumping at moments, say the learned men.

The sages say that the pulse makes movement like that of a snake and a gander in *vaslesmatisara* (dysentery caused by vitiation of two bodily humours-*vata* and *slesma*) and it is thick or large. The experts or specialists say that the pulse moves like a frog and a peacock in *pittaslesmatisara* (dysentery caused by some vitiation of two bodily humours-*pitta* and *slesma*). The pulse becomes certainly missing in



*Sannipatatisara* (dysentery caused by vitiation of three bodily humours—*vata*, *pitta*, and *kaph*), i.e. it moves so thinly that it cannot be felt by the touch of finger. (V. 31)

ग्रहणीरोगे<sup>1</sup>

The pulse in chronic diarrhoea

पादे च हंससदृशी करे मण्डूक्संप्लवा ।  
तस्याग्नेर्मन्दता देहे त्वथवा ग्रहणीगदः ॥  
वाताद्वक्रगता नाडी चपला पित्तसम्भवे ।  
कफे स्थिरामिमां विद्यान्नाडिकां ग्रहणीगदे ॥ 32 ॥

If the pulse of a person in the foot moves like a swan and that (pulse) in the hand moves like a frog, then it should be understood that he has got slowness of digestion (*agnimandya*) or disease of *grahani* (*grahanigada*) in the body. The pulse is crooked in *vatajagrahani* (chronic diarrhoea caused by derangement of bodily humour—*vata*), it is unsteady or restless in *pittajagrahani* (chronic diarrhoea caused by bodily humour—*kaph*). (V. 32)

भेदेन शान्ता ग्रहणीगदेन ।  
निर्वीर्यरूपं त्वतिसारभेदे ॥ V.33 ॥

In *Grahanigada* (chronic diarrhoea) the pulse becomes gentle at the end of evacuation of the bowels

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1. The intestines where the bile assists digestion and from which vital warmth is diffused. *Grahaniroga* may mean also the disease of the intestines.

(*bheda*), while it becomes energyless, i.e. very slow-moving, after evacuation of the bowels in dysentery (*atisara*). (V.33)

### मूत्रवर्चोग्रहविसूचिकाज्ञानम्

Knowledge of pulse in suppression of urine and stool in cholera :

निरोधे मूत्रशक्तोर्विड्ग्रहे त्वितराश्रिताः ।  
विसूचिकाभिभूते च भवन्ति भेकवत् क्रमाः ॥ V.34 ॥

The movement of the pulse becomes like that of a frog in the case of suppression of only urine or stool or both or voluntary suppression of them or in obstructed abdomen due to cholera or gravel or painful discharge of urine and fever, etc, while it becomes crooked and thin due to obstruction (or stoppage) of urine or ordure. (V. 34)

### विलम्बिकादिज्ञानम्

Knowledge of pulse in Constipation, etc :

विलम्बिकायां प्लवगा कदाचिद् ।  
आमातिसारे पृथुला जडा च ॥ V.35 ॥

The pulse becomes *plavagamini* (moving like a frog) in the case of evacuation of the bowels, i. e. stool, in the disease of constipation, otherwise it is gently moving. In *Amatisara* (dysentery with mucus) the pulse becomes thick or large and inert or dull at the end of evacuation of stools. (V. 35)

## अशरोगे

The pulse in haemorrhoids (piles) :

अशरोगे स्थिरा मन्दा क्वचिद् वक्रा क्वचिन् मृदुः ।  
वाते वक्रगता नाडी पित्ते च मण्डूकप्लवा ॥  
कफे स्थिरगतिर्नाडी विदिता भिषजैर्मुहुः ।  
कफवातगता नाडी पुष्टा वेगवती भवेत् ॥  
वक्रमण्डूक संमिश्रा नाडिका कफवातजा ।  
वातपित्ते स्थिरा मन्दा सदा बहति निश्चितम् ॥  
कफपित्ते सदा नाडी सर्पहंसाकृतिर्भवेत् ।  
सर्वाकृतिः सन्निपाते अशःसु बहते ध्रुवम् ॥ V. 36 ॥

In piles the pulse becomes steady, slow or sometimes crookedly moving and sometimes gently moving; in *Vataja Arsa* (piles produced or caused by derangement of bodily humour—*vata*) the movement of the pulse is crooked; it is jumpy like a frog in *pittaja Arsa* (piles caused by derangement of bodily humour—*pitta*); it is steady in *Kaphaja Arsa* (piles caused by derangement of bodily humour—*kaph*). The pulse is developed accelerated and jumpy like a frog in *Kaphavataja Arsa* (piles produced by derangement of bodily humour—*kaph-vata*); it is steady and slow in *Vatapittaja Arsa* (piles produced by derangement of bodily humours—*Vata* and *pitta*), it is always having the movement of a snake and a swan in *Kaphapittaja Arsa* (piles produced by derangement of bodily humours—*kaph* and *pitta*); it certainly carries all the forms of movement of all in *Sannipataja Arsa* (Piles produced by derangement of three bodily humours—*vata*, *pitta*, and *kaph*) (V. 36)

### कृमिरोगे

The pulse in the disease of worms :

कृमिरोगे भवत्वेवं सर्व्वधर्मवती शिरा ।

क्वचिल्लुप्ता क्वचिन् मन्दा क्वचिद् वेगवती मता ॥V.37॥

The pulse is sometimes missing, sometimes slow and sometimes fast (accelerated) in the disease of worms. (V. 37)

### पाण्डुकामलारोगे

The pulse in Jaundice and Bilious disease :

पाण्डो तु केवलं नाडी मुहुराप्यायते स्थिरा ।

क्वचिदुष्णा भवेन्नाडी कामलारोगिणो ध्रुवम् ॥ V.38 ॥

The pulse is steady-going and again and again it becomes fully developed in jaundice, whereas the pulse remains steady, but sometimes it becomes certainly hot in bilious disease. (V. 38)

### रक्तपित्ते

The pulse in the disease of derangement of blood produced by bile :

रक्तपित्ताद् वहेन्नाडी मन्दा च कठिना तथा ।

असृग्ध्रुवं स्रवेदुष्णा गुर्व्वी सा च यवीयसी ॥ V. 39 ॥

The pulse flows slow and is hard in *Raktapitta*, while it is hot, heavy and accelerated in the case of vomiting of blood from the upper current of orifices such as, mouth, etc. (V. 39)

कासे

The pulse in cough :

कासे सूक्ष्मा स्थिरा मन्दा पुष्टा च उष्णतान्विता ।

राजहंसगतिश्चैव नाडीनामुपजायते ॥

यथा राहुगतश्चन्द्रः कम्पितः किल सर्वदा ।

तथा कासगता नाडी स्थिरा न हि कदाचन ॥ V.40 ॥

The pulse becomes thin, restless (unsteady), slow, developed, and hot in cough and it moves like a gander. The pulse in the cough is always trembling like an eclipsed moon and it is never steady (V. 40)

श्वासरोगे

The pulse in Asthma :

श्वासे तीव्रगतिर्नाड्या भवेच्च निश्चितं सदा ।

द्रुता च कठिना वेगा जलौकागतिरेव च ॥ V. 41 ॥

It is always certain that the movement of the pulse becomes intense in the case of Asthma, it is accelerated, hard and speedy like that of a water leech. (V. 41)

स्वरभेदादिरोगे

The pulse in broken articulation or hoarseness or cracking voice, etc. :

स्वरभेदे च सूक्ष्मा तु नाडी भवति निश्चितम्\* ।

ग्रोचके स्थिरा मन्दा पुष्टा च कठिना मृदुः ॥

छादिरोगे विलुप्ता स्याद् विज्ञेया सा भिषग्वरैः ॥

तृष्णारोगे भवेन्नाडी जलौकादिगतिः सदा ।

मूर्च्छायान्तु सदा नाड्या विद्युद्गतिरिवस्थितिः ॥ V.42॥

\* स्वरभेदे च सूक्ष्मा स्यात् नाडी क्षीणा मुनिश्चितमिति वा पाठः ।

The pulse certainly becomes thin in hoarseness or cracking voice, it becomes steady, slow, hard, developed, and mild in loss of appetite; it becomes missing in the case of vomiting as it is known by the best physicians; the pulse always becomes of the movement of a water leech, etc. in the disease of thirst, the position of the pulse is always like that of lightning in the case of fainting. (V. 42).

### उन्मादे

The pulse in Insanity :

उन्मादे वक्रतापन्ना नाडी भवति सर्वदा ।  
वाताश्रये स्फुरत्येषा सूक्ष्मा द्रुतगतिः सदा ॥ V.43 ॥

The pulse always becomes crooked in insanity (i. e. it is beating with intense speed like a pigeon by turning and turning). It always beats thin and fast in the case of *Vatasraya* (derangement of bodily humour-*vata*) or rheumatism. (V. 43)

### वातारक्ते आमवाते च

The pulse in acute gout and torpor of the bowels with flatulence and intumescence :

वातरक्ते च मन्दा स्याद् वक्रता कठिना मृदुः ।  
आमवाते स्थिरा नाडी भवत्यस्येति निश्चितम् ॥ V.44 ॥

The pulse becomes slow, crooked, hard, and mild in acute gout (*vatarakta*). The pulse becomes steady in torpor of the bowels with flatulence and intumescence (*Amavata*) it is certain. (V. 44)

शूले

The pulse in the colic (Pain) :

वातेन शूलेन मरुत्प्लवेन सदातिवक्रा हि शिरा वहन्ती ।  
ज्वालामयी पित्तिविचेष्टितेन साधमानशूलेन च पुष्टिरूपा ॥V.45

The pulse flows in a very crooked movement in colic with flatulence (*vatasula*) due to intensity of air; it is burning, i. e. too much hot in colic vitiated by derangement of bodily humour-*pitta* (*pittasula*); it is developed or expanded in colic of abdomen with flatulence and noise (*sadhmanasula*) i. e. *amasula* (pain of indigestion) or *Krmisula*<sup>1</sup> (colic due to the presence of worms in abdomen). (V. 45)

The pulse in the case of a disease of the bowels-iliac passion (characterized by the retention of excrements), suppression of urine and painful discharge of urine :

उदावर्त्ते विलुप्ता स्यान्नाडी कम्पते सर्वदा<sup>2</sup> ।  
ग्रानाहे मूत्रकृच्छ्रे च भवेन्नाडी गरिष्ठता ॥ V.46 .।

The pulse is missing in *udavarttaroga*, i. e. it is not felt by the touch of fingers. If it is felt sometimes, it becomes very trembling. The pulse becomes heavy and hard in the case of suppression of urine and painful discharge of urine (*Anaha* and *Muttra-krechra*) (V. 46)

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(1). 'Krimisul' in Bengali is also correct in spelling.

(2). In Bengali two vv (वं) are used in "Sarvada".

### गुल्मे

The pulse in chronic enlargement of spleen :

गुल्मेन कम्पोऽथ पराक्रमेण ।  
पारावतस्येव गतिं करोति ॥ V.47 ॥

The pulse is termbling or restless and makes movement like a pigeon by turning in great speed in the case of enlargement of spleen. (V. 47)

### हृद्रोगे

The pulse in heart disease :

हृद्रोगे तु भवेन्नाडी राजहंसगतिर्यथा ॥ V.48 ॥

The pulse becomes like the movement of a gander in heart disease. (V. 48)

### मेहे

The pulse in urinary disease or gonorrhoea :

प्रमेहे ग्रन्थिरूपा सा प्रतप्ता त्वामदूषणे ॥ V.49 ॥

The pulse becomes knotty in urinary disease- gleet etc. or gonorrhoea and always remains a little hot, if there is the fault of mucus in the body. (V. 49)

### मेदो रोगे

The pulse in obesity (fatness) :

मेदो रोगे बहेन्नडी कफप्रकोपतोयथा ॥ (V. 50). ॥

The pulse flows in obesity just as it flows in the case of irritation or excess of phlegm. (V. 50)



### व्रणादौ

The pulse in boil etc. :

व्रणेऽतिकठिने देहे प्रयाति पैत्तिकं क्रमम् ।

भगन्दरानुरूपेण नाडीव्रणनिवेदने ॥

प्रयाति वातिकं रूपं नाडी पावकरूपिणी ॥ V.51 ॥

The movement of the pulse takes place in the case of very hard boil (unripe boil) as it happens in the case of morbid irritation of bile; the pulse becomes very hot in fistula and sinus like fire and moves like *vatakadinadi* (pulse vitiated by derangement of bodily humour-*vata*, etc.) (V. 51)

The pulse in the case of vomiting, etc.,

वान्तस्य शल्याभिहतस्य जन्तोः,

वेगावरोधाकुलितस्य भूयः ।

गतिं विधत्ते धमनी गजेन्द्र-

मरालमालेव कफोत्वणेन ॥ V.52 ॥

The pulse assumes the movement of an elephant and a swan in the case of vomiting or striking or injury with a weapon and distress in obstruction of excretion of stool and urine again and again due to vitiation of bodily humour Kaph (phlegm), i. e. the pulse becomes thick and slow going. (V. 52)

### कुष्ठरोगे

The pulse in leprosy :

कुष्ठरोगे संकोचिता नाडी स्यादप्रवर्त्तिका ॥

The pulse becomes contracted, steady and speedless in the case of leprosy. (V. 53)

### विषविष्टम्भगुल्मज्ञानम्—

Knowledge of the pulse in the case of poison, obstruction of urine or ordure and enlargement of spleen :

उत्पित्सुरूपा विषरिष्टिकाले,  
विष्टम्भगुल्मेन च वक्ररूपा ।  
अत्यर्थवातेन ग्रधःस्फुरन्ती,  
उत्तानभेदिन्यसमाप्तिकाले ॥ V.54 ॥

The pulse moves restlessly in the case of taking poison or snake biting, when poison manifests unfavourable symptoms by spreading into the whole body. The movement of the pulse becomes crooked in the case of obstruction of urine or ordure and enlargement of spleen. But it remains as *tiryakbhedin* (horizontally stretching) beating downwards, due to the intensity of derangement of bodily humour-*vata*. Before the manifestation of its full symptoms, the pulse moves upwards like a creeper, becoming *uttanabhedin* (stretching upwards). Sometimes it moves horizontally, upwards and downward also. (V. 54)

दोषसाम्याच्च सादृश्यादनुक्तासु रुजास्वपि ।  
ज्ञातव्या धमनीधर्म्मा युक्तिभिश्चानुमानतः ॥ V.55 ॥

The disposition of the pulse should be known by reasons and inferences (drawn) from equality of faults and similarity of symptoms in the case of untold diseases also. (V. 55)

यो रोगिणः करं स्पृष्ट्वा स्वकरं क्षालयेद् यदि ।  
रोगास्तस्य विनश्यन्ति पङ्कः प्रक्षालने यथा ॥ V.56 ॥

If the physician washes his own hand by touching the hand of the patient, then the diseases of the latter get destroyed (cured) as in washing clay (or mud). (V. 56)

उपसंहारमाह

### Conclusion

क्वचित् प्रकरणोल्लेखात् क्वचिदौचित्यमात्रतः ।  
क्वचिद् देशात् क्वचित् कालात् संकीर्णगदनिर्णयः ॥  
नाडीपरिचयद्वारं प्रायशो नैव दृश्यते ।  
तेन धाष्ट्यान् मयोक्तं यत् तत् समाधेयमुत्तमैः ॥  
जले स्थले चान्तरिक्षे प्रसिद्धा यस्य या गतिः ।  
सैवोपमानमत्र स्यात् प्रसिद्धगुणयोगतः ॥  
न शास्त्रपठनाद्वापि शश्वदध्यापनादपि ।  
स्पर्शनादिभिरभ्यासादेव नाडीविवेकभाक् ॥  
नाडीगतिरियं सम्यग्भ्यासेनैव गम्यते ।  
नाडीपरिचयो लोके प्रायः पुण्येन जायते ॥  
नाडीगतिरियं सम्यग् योगाभ्यासवदेकतः ।  
नान्यथा शक्यते ज्ञातुं बृहस्पतिसमैरपि ॥ V-57 ॥

Mixed diseases are to be determined (or ascertained) in some case from allusion to some chapter of the *Sastra*, in some case from only fitness of things, in some case from (the point of view) of place and in some case from (the point of view) of time. The means of acquaintance with (i. e. means of examination of the pulse) the pulse is not often found. So that whatever has been said by me with audacity should be solved by the intelligent people.

The movement of aquatic, terrestrial and aerial beings, which are known to move in water, on land,

and in sky respectively, is here only an analogy of examination of the pulse according to the mode of known quality (*prasiddhagunayogatah*). The knowledge of the pulse is acquired by only practice, feeling, reading, the pulse again and again, but not by study of the sastra or by teaching the sastra alone.

This movement of the pulse is comprehended fully by practice only. Nevertheless, the knowledge of the pulse is often born or acquired in the world by merit. This movement of the pulse is fully known by singular concentration of mind on the subject, like the practice of *yoga* (spiritual exercise), otherwise it is not possible too know it the science of pulse by even an intelligent man as equal to *Vrhaspati*. (V. 57)



## Conclusion

### **Estimate of the literary and aesthetic aspects of Nadiprakasam :**

*Nadiprakasam* is to be judged by its value to humanity. Its value is determined by the principles to what extent does it contribute to the progress of mankind in the field of Indian Medical Science by contributing more knowledge for the benefit of all suffering men afflicted with diseases.

The technique used in the work for proper criticism distinguishes its subject-matter and guides one to a finer appreciation of composition and makes him realize more clearly and completely what the author has meant there. *Nadiprakasam* testifies sufficiently to the linguistic and literary development of its age, and to its value to mankind by conveying the knowledge of the science of pulse to some extent.

It deals with the method of examining the pulse, the subject of examination of the pulse whether the disease is *vataja* or *pittaja* or *kaphaja* or *dvandvaja* or *sannipataja* or curable or incurable.

Besides, it discusses the auspicious time of examining the pulse; the nature of the course of faults—*vata*, *pitta*, and *kaph*; the meaning of the knowledge of health; the nature of the pulse *vataja*, *pittaja* and *kaphaja*, the particularity of the general movement of the afforsaid pulse, the distinction of the movement of *vatadi-dvandvaja-Nadigatibhedam*, the movement of *tridosaja-nadigatih*, symptoms of curable disease, symptoms of incurable disease. and the determination of time of death (*kalanirupanam*).

*Nadiprakasam* very clearly explains the rules of examination of the pulse on the basis of the distinction of diseases; the condition of the pulse prior to fever; the nature of fever; the particular symptom in *vatajvara*; the pulses in *pittajvara*, *slesmajvaram*, *vatapittajvara*, *vataslesmajvara*, *pittaslesmajvara*; heated pulse in *vatadijvara*; accelerated pulse in *Bhutajvara*; the conditions of the pulses in *Aikahikenavisamajvara*, *Dvitiyakajvara*, *Tritiyakajvara*, *Krodhajajvara*, and *Kamajajvara*; feeble pulse in *udvega*, *krodha*, *bhaya*, *cinta* and *Srama*, (anxiety anger, fear, thought and labour.)

In this connection this work speaks of the knowledge of bad diet of the patients suffering from fever. etc., for example, accelerated and hot pulse in fever, if curd is taken, hot pulse in fever, if sour things are taken, slow pulse in fever, if *Kanjika* (sour rice grod) is taken; different kinds of movement of the pulse in feverless state due to exercise, walking, thought, and grief over the loss of wealth.

*Nadiprakasam* states conditions of the pulse in *Ajirna* (indigestion) that of the full-blooded pulse, that of the pulse in dysentery, and those of the pulses of a satisfied person and a hungry man respectively, the conditions of the pulse in the case of taking, suitable and unsuitable food.

*Nadiprakasam* presents the knowledge of taste of food affecting the movement of the pulse, for example, the movement of the pulse becomes like that of a peacock in the case of taking sweet stuff.

It speaks of the slow pulse in *Agnimandya* (slowness of digestion) and *Dhatuksaya* (waste of bodily humours) and the light and forceful pulse in *Diptagni* (kindled fire in the body).

Then it discusses the conditions of the pulse in different types of *Atisara* (dysentery), e. g. slow pulse like a water leech in the summer in the case of dysentery, crooked pulse in *Vatatisara* (dysentery caused by some derangement of bodily humour-*vata*, air), etc. It deals with different types of *grahaniroga* (chronic diarrhoea), e. g. the pulse becomes crooked in *Vatajagrahani* (diarrhoea produced by some derangement of bodily humour-*vata* = air).

Next *Nadiprakasam* gives the knowledge of the pulse in the case of suppression of stool and urine. The movement of the pulse becomes like that of a frog in the case of suppression of both stool and urine. The pulse becomes *plavagamini* (moving like

a frog) in the case of constipation and it becomes thick and dull in *Amatisara* (dysentery with mucus) at the and of the evacuation of stools.

*Nadiprakasam* states the conditions of the pulse in different types of *Arsa* (piles), e. g. the pulse becomes steady, slow-moving or sometimes crookedly moving and sometimes gently moving in piles.

The pulse is sometimes missing, sometimes slow and sometimes fast in the disease of worms; it is steady-going in Jaundice and again it becomes fully developed, while the pulse remains steady in bilious disease, but sometimes it becomes hot.

In the case of *Raktapitta* (derangement of blood produced by bile) the pulse is slow-moving and hard, it is hot, heavy and accelerated in vomiting of blood from the upper current of orifices.

*Nadiprakasam* deals with the pulses in cough, asthma, hoarseness of voice, insanity, gout and torpor of the bowels attended with flatulence and intumescence (*Vatarakta*, *amavata* etc.), colic (*sula*), and in disease of the bowels by retention of excrements, suppression of urine and painful discharge of urine (*Udavarttanahamutrakrechra*), enlarged spleen (*gulma*), heart disease (*hrdoga*), gonorrhoea (*meha*), obesity (*nedoroga*), boils (*Vranadi*) and leprosy (*Kustharoga*).

The pulse is thin, restless, slow developed and hot in cough; it has intense movement in asthma, it is thin or feeble in broken articulation or hoarseness;



it is steady, slow, hard, developed and mild in loss of appetite; it is missing in vomiting; it is having the movement of a water leech in thirst, it is having the movement of the lightning in fainting; it is crookedly moving in insanity; it is slow, crooked, hard and mild in acute gout; it is steady in *Amavata*; it has different kinds of movement in different types of colic, e. g. it has a crooked movement in *Vatasula* (Colic with flatulence due to intensity of wind); it is missing in *Udavartta*; it is heavy and hard in *Anaha*, and *Mutrakrcchra*; it is trembling or restless in the case of *gulma*; it is moving like a gander in heart disease; it is knotty in gonorrhoea (*prameha*); it flows in obesity as it flows in the case of irritation of phlegm; it moves in the case of very hard boil like the pulse of morbid irritation of *pitta*; it is very hot in fistula and sinus like fire, it moves like an elephant and a swan in the case of vomiting or injury with a weapon, etc.; it is contracted, steady-going and speedless in leprosy.

Next *Nadiprakasam* deals with the knowledge of the pulse in the case of taking poison, obstruction of urine or ordure and enlarged spleen (*Visa-Vistambhagulma*);

The pulse is restless in the case of taking poison or snake-biting when poison manifests unfavourable symptoms by spreading throughout the whole body.

The movement of the pulse becomes crooked in the case of obstruction of urine or ordure and enlargement of spleen. *Nadiprakasam* states that a

physician should know the conditions of the pulse in the case of untold diseases by observing the conditions of the pulse in that of fever, etc.

The conditions of the pulse should be understood from the equality of faults in the case of diseases and similarity of symptoms of diseases in untold diseases by drawing inferences based on proper reasons. The mixed diseases are to be diagnosed in some cases on the basis of the *Gastra* or in some cases according to the fitness of things or sometimes according to the place and time.

One becomes fully experienced in the knowledge of the science of pulse by practices with deep concentration of mind.

Besides these literary contributions, *Nadiprakasam* throws light upon the previous work on the science of pulse *Nadivijnanam* of Maharsi Kanada by profusely quoting verses from his work in this treatise.

In regard to the language, metre and style as discussed in the Introduction, they represent an age different from the present in which the author imparted the teachings on the science of pulse to his followers, in particular to make them intelligible in poetic language with Sanskrit commentaries. The total effect of the texture and spirit of the language of *Nadiprakasam* enriched with thoughts and ideas on the science of pulse, inspires one to dive deep into its subject-matters with more energy

to collect the hidden treasure of the knowledge of the science of pulse preserved in this treatise.

It is noteworthy to observe how the richness of proper vocabularies in all the three chapters of *Nadiprakusam* produces an equal effect on the minds of the readers by truly expressing and explaining all aspects of its varied contents it touches upon without faltering, slowness and haziness by presenting a clear and concise conception about them.

In *Nadiprakasam* its author has used three styles, viz. descriptive, explanatory, and emotive in the presentation of its varied contents of the science of pulse and explaining its subject-matters clear, concise and explicit manner.

The literary value of *Nadiprakasam* lies in the fact that its pure sanskrit language expresses clearly by its proper terminology the medical thoughts and ideas of its creative genius dealing with various aspects of the science of pulse.



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