Nadi Parikshan - traditional insights and modern perspective– A Review Article

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Abstract

Introduction: Nadi Pariksha, known as pulse examination, is a refined and deeply rooted diagnostic technique described in Ayurvedic literature and practiced for centuries. Its earliest systematic explanation appears in the *Sharangadhara* Samhita (13th century), which established the clinical basis of assessing health through the pulse. The discipline expanded further in the 16th century through *Acharya Bhavaprakasha,* who offered extensive insights into *Nadi Vijnana*. Later, in the 17th century, *Acharya Yogaratnakara* provided a more structured and elaborate account of pulse analysis within the broader scope of *Ashtavidha Pariksha*. Interestingly, conditions that may remain undetected through current medical investigations are sometimes identifiable through expert Ayurvedic pulse assessment, making Nadi Pariksha a unique and valuable diagnostic method. **Methodology:** This review gathers and puts together data from old Ayurvedic texts such as *Sharangadhara Samhita*, *Bhavaprakasha*, and *Yogaratnakara*, along with current analyses of *Nadi Vijnana*. A qualitative way to look at things was used to check out how pulse reading has changed, what ideas it is based on, and how it helps in clinics. Descriptions of *Vata, Pitta, and Kapha* pulse traits, their normal and abnormal changes, and how they relate to current clinic results were looked at. **Results:** What was seen shows that *Nadi Pariksha* gives a full picture of *doshic* problems, how well organs are working, and small body changes. It helps spot early on problems with endocrine, metabolic, nerve, and mind-body causes, often before clear signs show up. **Discussion:** What we have seen points to *Nadi Pariksha* still being helpful as a way to check things that does not require going inside the body, is easy to get to, and can be trusted. Because

it notices small changes, and it could be used with current health care methods. More organized studies need to be done to make sure it is correct at finding problems.

Keywords: *Nadi pariksha*, pulse diagnosis, *Ayurveda Samhita*, *Ashtavidha Pariksha*.

Introduction

In clinic work, the pulse is seen as a very important sign. Since long ago, checking the pulse has been a key way to find out what is wrong. In old times, doctors saw it as the main sign of life and watched it closely to know about both healthy and sick conditions. As Kanada, the well-known writer of *Nadi Vijnana,* said, he gives respect to Lord Shiva, who shared the wisdom of the four Vedas and Ayurveda for the good of people. It is said that Brahma first got the teachings about Ayurveda, and then he passed the teachings to Lord Shiva, Indra, and later to Maharshi Kanada. Nadi means the way where life is thought to be, and *dhamani* is often used as another word for it. When checking a patient, the pulse is checked first. Old texts say that the body has three and a half crore *nadis* linked to the navel and are spread in all directions.

Aim

To study, understand, and decide how helpful Nadi Pariksha is in clinical work, how it has changed over time, and how correct it is at finding problems, as told in Ayurvedic texts, sources and current writings.

Objectives

Looking at old Ayurvedic texts like *Sharangadhara Samhita, Bhavaprakasha*, and *Yogaratnakara*, one can see how Nadi Pariksha has changed over time. To study the main ideas of *Nadi Vijnana,* like *doshic* pulse traits and their body and disease changes. To see how well Nadi Pariksha finds small problems and early sicknesses that might not be found by normal ways of checking. To compare what old Nadi Pariksha says with what is seen in clinics today, showing how it matters in current health care

Methodology

This review puts together data from old Ayurvedic works like *Sharangadhara* Samhita, *Bhavaprakasha, and Yogaratnakara*, along with current explanations of *Nadi Vijnana*. A

qualitative way was taken to study how pulse checking has grown, what ideas it is based on, and how it helps find problems. The study looks at Vata, Pitta, and Kapha pulse traits, their normal and changed ways, and how they fit with what is seen in clinics today.

Review

Nadi and Its Synonyms

In old Ayurvedic thinking, Nadi means the small ways that carry life force or energy all through the body. These ways are not just seen as body parts but as links between different body and energy tasks. Different words are used for Nadi, showing its different jobs in the body. Words like *Snayu*, *Hansi, Hinsara, Dhamani, Dhara, Tantuki, Jivitagaya, Jivangyana, Vasa, Sira,* and *Dharani* are in old writings, each giving a different view of these small ways. [1]

Importance of *Nadi Parikshan*

Old Ayurvedic experts said that to find out what is wrong, you need to check the pulse well, along with looking at the tongue, urine, eyes, and face. They thought checking the pulse was the key to knowing the state of the doshas. Being good at this check meant having a lot of clinical wisdom. Because the pulse shows body and disease changes, it is a needed tool when patients cannot talk clearly. Like when they are not awake, are babies, or have problems thinking. By watching pulse changes closely, a doctor with experience can spot early sickness signs and guess how the sickness will go with good correctness.

Age and Site for Pulse Examination

Pulse traits change with age because *Vata, Pitta, and Kapha* are differently strong at different ages. Babies are mostly ruled by Kapha, so their pulse is more steady and soft. When people are grown, *Pitta* is more strong, making the pulse sharper and more active. Later in life, *Vata* is more strong, so the pulse is lighter, foster, or more abnormal. Knowing these normal changes is the key to reading the pulse right. Old writings tell where to check the pulse based on age.

Below is a detailed table explaining the sites to be examined for pulse.[1]

Table 1. Sites for examining pulse in different ages

AGE	SITE
In infants	The superficial temporal artery.
In Children	The supra-orbital artery.
In Adults	The brachial and perineal arteries are relatively better felt.
In all the age groups	The heartbeat, the carotids, and the axillary arteries are well felt.

Various Sites for Examination [2]

According to *Acharya Basavarajiyam*, the radial artery is most used for pulse examination. However, if needed, a physician can assess the pulse at various other locations in the body, such as:

i. Arm – Brachial artery
ii. Armpit – Axillary artery
iii. Ankle – Posterior tibial artery
iv. Elbow – Brachial artery
v. Perineum – Branch of internal pudendal artery
vi. Wrist– Radial artery
vii. Top of the foot – Dorsalis pedis artery
viii. Above the eyebrow – Supraorbital artery (*Hastijivha*)
ix. Beside the nose – Branch of the facial artery (*Ambusha*)
x. Tongue – Lingual artery
xi. Neck – Carotid artery
xii. Lips – Labial branch of the facial artery
xiii. Penis – Branch of internal pudendal artery
xiv. Chest – Apex beat
xv. In front of the ear – Superficial temporal arteries.

Traditionally, the pulse is examined on the right hand in males and the left hand in females.

Procedure of Examination of Pulse [3]

Let us summarize this in following 10 simple steps:

1. The physician and the patient should be seated in a comfortable and erect posture.
2. The physician should gently hold the patient's elbow with his right/left hand and should give a slight massage over the inner aspect of the elbow with his left/right hand.
3. The patient's fingers should be kept straight and held close together.
4. The patient's hand should be slightly bent at the wrist, with the forearm gently turned inward (slight pronation).
5. The physician should examine the radial pulse using the index, middle, and ring fingers, the left hand for examining females and the right hand for males.
6. The fingers should be placed close together, starting just below the styloid process of the radius bone.
7-8. The pulse should be observed for at least 30 beats to assess rhythm and strength. It should be examined three times before forming a conclusion.
9. The radial pulse of a male is examined on the right hand, and that of a female on the left hand.
10. After completing the examination, the physician should wash hands properly.

Trividha-Ashtavidha Pariksha

Earlier, *Ayurvedic* physicians mainly relied on *Trividha Pareeksha* to understand the state of *doshas*. It includes:

1. *Aaptopadesha* – knowledge gained from authoritative texts or teachers
2. *Pratyaksha* – direct observation
3. *Anumana* – logical inference

These were practically applied through *Darshana* (inspection), *Sparshana* (palpation), and *Prashna* (interrogation) to identify *doshic* imbalances.

Later, during the medieval period, the more detailed *Ashtavidha Pareeksha* (eightfold examination) became common, as given by *Yogaratnakara* [4] which involves:

1. Pulse (*Nadi*)
2. Stool *(Mala)*
5. Voice (*Shabda*)
6. Touch (*Sparsha*)

3. Urine (*Mutra*)
4. Tongue (*Jihva*)
7. Eyes (*Drik*)
8. Body build or appearance (*Akriti*

***Panchamahabhuta* and Pulse**[5]

Table 2. Relation of *panchmahabhuta* and pulse

Pulse	*Mahabhoota*	Movement	Finger used
Shoonyakara Nadi	*Akasha*	Empty pulse	Thumb
Vakraordhva Nadi	*Vayu*	Tortuous and full or jumping movement	Index finger
Oordhva Nadi	*Agni*	Jumping or upward movement	Middle finger
Tirchhi Nadi	*Jala*	Wave like movement	Ring finger
Deergha and Vartula Nadi	*Prithvi*	Sustaining and expanded movement	Little finger

These combined movements give rise to four main pulse patterns :

1. *Dola Gati*
2. *Kundalini Gati*
3. *Vakrachakra Gati*
4. *Chapalachakra Gati*

The concept of *Nadi Pareeksha* is based on the principles of *Panchamahabhuta* and *Tridosha*, which help assess the balance or disturbance of *doshas* in the body. Since *Tridosha* theory is the practical form of *Panchamahabhuta* theory, detailed descriptions of *Doshaja Nadi* are found in classical *Ayurvedic* texts. Ancient physicians emphasized direct examination of *Nadi* (pulse) along with *Mala* and *Mutra* to understand a person's health. A skilled practitioner can accurately identify the state of *Tridosha* through pulse reading, enabling precise diagnosis and effective treatment.

Pulse in Normal Condition [5]

Table 3. Characteristics of pulse

Characteristics of pulse	*Vataja Prakriti*	*Pittaja Prakriti*	*Kaphaja Prakriti*
Finger used	Index finger	Middle finger	Ring finger
Movement resembling	Leech, Serpent	Sparrow, Crow, Frog	Pigeon, Swan
Color of blood vessel	Brownish bluish	Yellowish reddish	Whitish
Feel of the artery	Neither hot nor cold, light, empty, tortuous and thin	Hot, straight, medium	Cold, heavy, clear and full
Time in normal person	2 p.m. to 6 p.m.	10 a.m. to 2 p.m.	6 a.m. to 10 a.m.
Rate	Fluctuating pulse	Fast	Slow

Table 4. Pulse in Various Psychological States [5]

Psychological State	Pulse character
Person full of pride	*Kaphaja* like pulse
Affliction	Weak and fast pulse
Happy and contended	Steady, resembles *kaphaja* pulse
Sex urge	Fast and *vataja* pulse
Illusion	Weak pulse
Sorrow	Weak pulse of changing character
Fear and Disgust	Weak pulse
Anger	Fast pulse
Worry	Weak, of changing character

Doshanusar Gati [6]

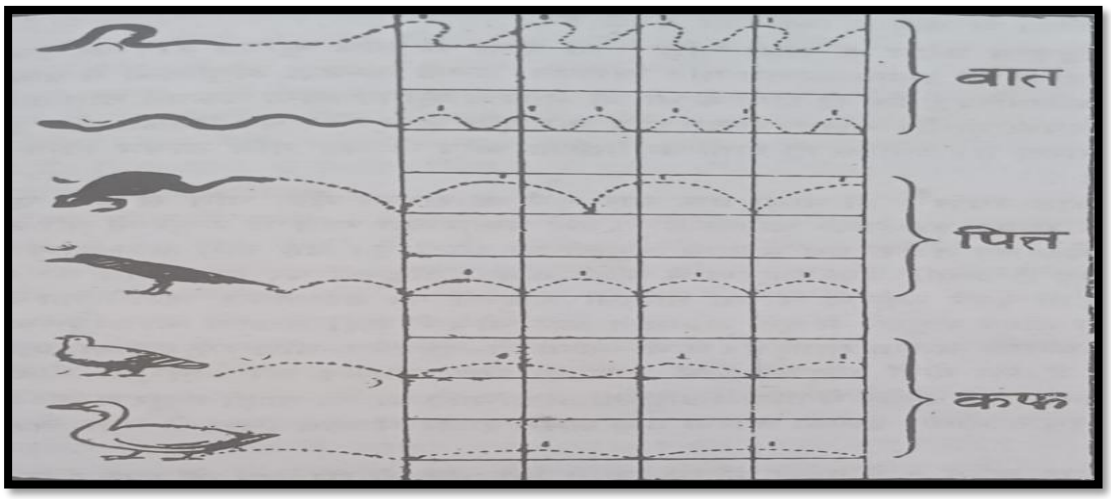
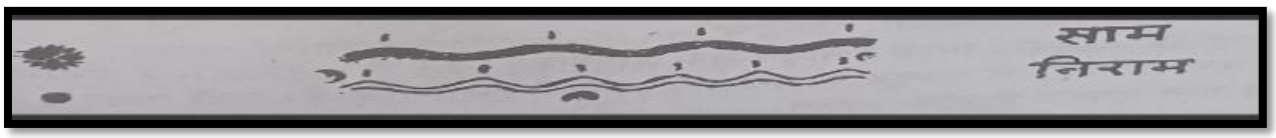


Image 1.1 Movement of *nadi* according to *doshas*

Image 1.2 Types of movements of *nadi*



- In *Vata*, the pulse moves like a leech or snake.
- In *Pitta*, it resembles the jump of a frog or movement of a crow.
- In *Kapha*, it moves gently like a swan or pigeon.

  -A full (*bharita*) pulse feels heavy, while an empty (*rikta*) pulse feels subtle and weak.

  -When *Kapha* suppresses *Vata*, the pulse becomes slow and smooth.
  -If *Vata* dominates with *Kapha*, it shows a swan-like motion, and with *Pitta*, it shows a pigeon-like motion.
  - When *doshas* are depleted (*Ksheena*), the pulse is slow and faint, often hard to feel.
  - When *doshas* are increased (*Vriddha*), their characteristic pulse movements become strong and clear.

- In *Tridosha* imbalance, all three fingers feel different motions - one like a snake, another like a frog or bird, and another like a swan or pigeon, showing all *doshas* are disturbed simultaneously.

Effect of Food on Pulse (*Nadi*) [7]

Ayurveda describes that the pulse changes immediately after eating, and these changes can help estimate the type of food consumed. Before studying this, one should know basic principles of *Nidan* and *Nidana Parivarjana*.

Pulse shows two types of changes:

1. Increase in pulse activity (after food that aggravates *doshas*)
2. Decrease or steadiness of pulse (after food that pacifies *doshas*)

Foods are broadly of two kinds:

- Aggravating foods (*Vidahi*) – increase *doshas* and disturb balance
- Pacifying foods (*Vihayi*) – calm aggravated *doshas*

Following are some tables to relate *rasas* with corresponding *dosha*:

Dosha-Aggravating Tastes (*Prakopaka Ras*) [7]

Table 5.1 Various *rasas* aggravating *doshas*

Taste (*Rasa*)	*Dosha* Increased
Astringent (*Kashaya*), Pungent (*Katu*), Bitter (*Tikta*)	*Vata*
Sour (*Amla*), Pungent (*Katu*), Salty (*Lavana*)	*Pitta*
Sweet (*Madhura*), Sour (*Amla*), Salty (*Lavana*)	*Kapha*

Dosha-Pacifying Tastes (*Prashamaka Ras*)[7]

Table 5.2 Various *rasas* pacifying *doshas*

Taste (*Rasa*)	*Dosha* Pacified
Sweet (*Madhura*), Sour (*Amla*), Salty (*Lavana*)	*Vata*
Sweet (*Madhura*), Bitter (*Tikta*), Astringent (*Kashaya*)	*Pitta*
Pungent (*Katu*), Bitter (*Tikta*), Astringent (*Kashaya*)	*Kapha*

Table 5.3 Pulse interpretation after having a meal

Pulse Feature	Likely Dominant *Rasa*	Associated *Dosha*
Light, fast, irregular	Bitter / Astringent / Pungent	*Vata* influence
Sharp, forceful, warm	Sour / Salty / Pungent	*Pitta* influence
Slow, heavy, steady	Sweet / Sour / Salty	*Kapha* influence

Rasa & Their Basic Elemental Composition (*Yoni* of *Rasa*)[7]

(*Yoni* = combination of elements that make the taste)

Table 6. Elemental composition of *rasa*

Taste (*Rasa*)	Elemental Combination
Sweet	Earth + Water
Sour	Earth + Fire
Salty	Water + Fire
Pungent	Air + Fire
Bitter	Air + Ether
Astringent	Air + Earth

Effect of *Dhatus* on Pulse [7]

Ayurvedic theory says that body tissue (dhatus) changes are shown by pulse changes. When dhatus are healthy, the pulse is steady or smooth. Abnormal dhatus make changes in pulse feel, depth, speed, or size. Balanced Rasa makes a soft pulse, while weak Rasa makes a dull pulse. More Rakta makes warmth in the pulse. More Mamsa makes a heavy pulse, and too much Meda makes a slow pulse. Dry Asthi makes a rough move, while good amount of Majja makes a steady pulse. Strong Shukra makes the pulse cool. So, pulse check lets you find tissue changes before signs show. The pulse tells about body tissues (Dhatus). For Rasa (plasma or body fluids), a soft pulse means good water and calm, while low Rasa makes the pulse weak. Rakta (blood) is shown by a warm pulse, meaning more heat. Mamsa (muscle) makes a heavy pulse, meaning muscle. Too much Meda (fat) makes a slow pulse, meaning low action. Asthi (bone) shows a rough pulse, meaning dry bones. Majja (bone) creates a heavy pulse, meaning good nerves. Shukra (tissue has a smooth pulse, meaning good health.

Table 7. Effect of *dhatu* on pulse

Dhatu (Body Tissue)	How the Pulse Feels	What It Suggests in the Body	Explanation
Rasa (Plasma / Fluids)	Soft, slow, gentle	Indicates good hydration and calmness; imbalance creates dullness.	When fluids are healthy, the pulse moves in a smooth and steady way. Low *rasa* makes the pulse weak.
Rakta (Blood)	Warm,active, slightly strong	Shows increased heat or circulation.	More blood or heat speeds up the pulse and gives it a warm touch.
Mamsa (Muscle)	Deep, heavy, steady	Suggests muscle bulk or stiffness.	Extra muscle or swelling makes the pulse feel heavy and harder to lift.
Meda (Fat)	Thick,slow, sluggish	Suggests excess fat or low metabolism.	When fat increases, the pulse moves slowly, as if weighed down.
Asthi (Bone)	Rough, shaky, irregular	Indicates dryness or weakness in the bones.	Weak bones or low calcium make the pulse unsteady and rough.

Majja (Bone Marrow / Nervous Tissue)	Heavy, deep, stable	Suggests good nourishment of nerves and marrow.	Healthy marrow makes the pulse strong and grounded.
Shukra (Reproductive Tissue)	Smooth, cool, calm	Shows balanced reproductive health and vitality.	When *shukra* is strong, the pulse becomes soothing and cool to touch.

- Every *dhatu* gives a unique feel to the pulse.
- Healthy tissues make the pulse stable, calm or smooth.
- Disturbed tissues make the pulse irregular, fast, slow, heavy or rough.
- Pulse reading helps understand which tissue is affected without needing symptoms.

Pulse Indicating the Time of Death [8]

Table 8: *Nadi* indicating parlous prognosis.

Periods indicating death	Characteristics of the pulse
Death within three hours	Pulse moves like Fringe of shawl, coinciding with respiration and cold
Death within two hours	Cold to touch
Death within hour	Appears and disappears a Pulse alternately, moves like drum which is Damaru shape.
Death within three days	Pulse not felt at proximal end, cold in the middle and tired at the terminal part.
Death within fifteen days	Pulse is hot, fast, body is cold, patient take mouth breath.
Death within seven days	Speedy at the proximal end, cold and sweaty.
Patient nearly dead	Pulse extremely weak, fast and cold

Pulse in the diseases [9]

[Pulse in the diseases of Gastro-intestinal system]: -

1. *Arochaka* (Anorexia): Slow, small volume, thin, clear & deep pulse

2. *Amalapitta* (Hyperacidity): Tortuous, tremulous, broad, unctuous & slow pulse

3.*Chhardi* (Vomiting): Slightly displaced, rough & warm pulse

[Pulse in Respiratory Tract Diseases:]

1.*Kaphaja-Kasa*: Pulse slow and steady

2.*Shvasa* (Asthma) : Pulse fast

3.*Rajayakshma* (Pulmonary tuberculosis) : Pulse varies in its rate and character and resembles the movement of Serpent

[Pulse In Cardio-Vascular & Blood Diseases:]

1.*Hridroga* (heart disease) : Hard, weak, fast, as if blood is churned

2.*Panduroga* (Anaemia) : Fast, full, bounding, collapsing

3.*Shonita-Dosha* (Blood disorder) : Heavy, hard, slightly warm, as if churned, broad and slow. The pulse is felt differently by the three distinct fingers

4.*Rakta-pitta* (Purpura) : Pulse slow, hard and straight

[Pulse in Genito - Urinary Tract Diseases:]

1. *Mutrakrichchhra*: Heavy pulse

2.*Mutraghata* (Anuria): Pulse weak, sometimes felt as if wall is split & sometimes explosive.

Method of Pulse Examination [9]

Pulse assessment was traditionally performed manually. With time, various instruments were introduced to improve accuracy. In 1707, Sir John Floyer designed the “Physician’s Watch” to count the pulse. Later, Vierordt developed the first sphygmograph, enabling pulse wave tracings. Modern electronic polygraphs now provide detailed pulse recordings.

Manual Method:

The pulse is palpated on the radial artery using the index, middle, and ring fingers placed on the anterior wrist. The patient's forearm is kept slightly pronated with the wrist relaxed.

Instrumental Method:

Several devices can capture pulse tracings. These recordings help in evaluating pulse characteristics and assist in diagnosis.

Instruments for Pulse Recording:

Reliable pulse examination became possible only after mechanical measurement tools were developed. Since pulse is a physical phenomenon of blood flow, mechanical devices like the sphygmogram, oscilloscopes, and polygraphs are commonly used.

Sphygmogram : A sphygmogram records the pulse wave of a superficial artery-most often the radial artery-on a moving surface such as smoked paper. Various types have been designed, including Marey's, Sommerbrodt's, Lando's, Dudgeon's, Riegel's, and Jaquet's sphygmograms.

Jaquet's Sphygmogram : A metal frame with an adjustable cuff.

The cuff is secured around the wrist during tracing.

A small window allows precise placement over the artery.

A spring-based mechanism transmits arterial movements to a recording needle.

A screw system regulates pressure on the artery and adjusts the needle height on the smoked paper.

Nadi Tarangini

Nadi Tarangini is a modern diagnostic tool designed to bring clarity and scientific support to the traditional Ayurvedic method of *nadi pariksha*. Pulse examination has always been central to Ayurvedic diagnosis, but its interpretation depends largely on the practitioner's skill, sensitivity, and experience. This often makes it challenging to maintain consistency, especially in teaching setups or research studies. To address this gap, researchers at IISc Bengaluru, along with Ayurvedic physicians, began working in the early 2000s on a

system that could record the pulse digitally and capture the finer details that human fingers sense intuitively.

Over time, this idea developed into the *Nadi Tarangini* device. It uses a compact probe fitted with three highly sensitive pressure sensors. These sensors are aligned with the traditional positions for *Vata, Pitta,* and *Kapha* on the radial artery. Once placed correctly, the sensors detect even very small pressure changes produced by the pulse. These signals are then converted into digital waveforms, giving a more objective representation of what is felt during manual examination. The process is non-invasive, quick, and easy to perform, which makes it suitable for both clinical and academic settings.

The recorded pulse waves are analyzed through dedicated software that studies waveform shape, rhythm, pulse strength, and peak variations. The software presents this data through graphs, numerical values, and summary interpretations. These findings can help understand *dosha* predominance, stress patterns, and overall cardiovascular and autonomic trends. One of the major advantages of *Nadi Tarangini* is its ability to store patient records, making long-term monitoring and research comparisons much easier.

By translating classical pulse reading into measurable parameters, *Nadi Tarangini* supports the standardization of Ayurvedic diagnostics. It does not replace the expertise of a trained *vaidya*, but it acts as a scientific companion-helping reduce subjectivity, improving reproducibility, and opening new possibilities for evidence-based research in Ayurveda.

Pulse Measurement Techniques and Instruments

Pulse-measurement techniques are used in both Ayurveda and modern medicine to assess vascular health and arterial stiffness. Two main parameters-Pulse Wave Velocity (PWV) and Stiffness Index (SI)-help evaluate how fast the blood-pressure wave travels and how stiff the arteries are. PWV is measured mainly through carotid–femoral PWV (cfPWV) for central arteries and brachial–ankle PWV (baPWV) for peripheral arteries. cfPWV records pulses at the carotid and femoral arteries and calculates speed by dividing the distance by pulse transit time; devices like Complior, SphygmoCor, PulsePen, Vasera, and Vicorder support this. baPWV uses cuffs on the arms and ankles and relies on a

height-based formula to estimate arterial path length; devices such as AT-form PWV/ABI and VP-2000 are commonly used. While baPWV tends to overestimate path length compared with MRI, it correlates well with cfPWV and is easy to operate. Both imaging (ultrasound, MRI) and non-imaging methods exist, but simpler cuff-based systems remain most practical for clinical use.

PWV Techniques

Method	Key Idea	Measurement Sites	Notes
cfPWV (Carotid–Femoral)	Gold-standard for central arterial stiffness	Carotid artery → Femoral artery	Accurate but requires skill
baPWV (Brachial–Ankle)	Simpler, systemic arterial stiffness	Brachial artery → Ankle artery	Uses height-based formula; easier to use

Table 9.1 Various PWV techniques

Distance Estimation Formulas (baPWV)

Path	Formula
Heart to Brachium (Lb)	0.2195 × height (cm) − 0.20734
Heart to Ankle (La)	0.8129 × height (cm) + 12.238
Virtual Path Length	La − Lb

Table 9.2 Formulas for distance estimation

Sensors used in baPWV devices

Component	Function
Plethysmographic sensors	Capture limb pulse waveforms
Oscillometric cuffs	Measure blood pressure
ECG	Align brachial + ankle pulses
Phonocardiography	Detect heart sounds

Table 9.3 Sensors used in baPWV devices

Discussion

Nadi Parikshan is a detailed *Ayurvedic* pulse-diagnosis method that reads the pulse not just for heart rate but as an overall reflection of physical and mental health. By placing three fingers on the radial artery, the practitioner identifies the dominance or imbalance of the *Doshas*-*Vata's* quick, jumping pulse, *Pitta's* sharp and forceful beat, and *Kapha's* slow, steady rhythm. The pulse also offers clues about the condition of the body tissues, such as fast, sharp movement in *Rakta* imbalance or a smooth, heavy quality in healthy *Meda*. Mental states are immediately reflected too, with emotions like anger quickening the pulse and calmness creating a *Kapha*-like steadiness. In advanced assessment, certain pulse patterns may even hint at prognosis, including signs of severe decline.

Conclusion

Nadi Pariksha stands out as one of *Ayurveda's* most refined diagnostic tools, offering a window into the body's *doshic* balance, tissue health, and even psychological state through the subtle qualities of the pulse. While its traditional foundation relies on the practitioner's sensitivity and experiential skill, modern research has begun validating many

of its core ideas. Advances such as digital pulse sensors, waveform analysis, and devices like *Nadi Tarangini* have helped translate these ancient observations into measurable parameters, enabling better consistency and scope for scientific study. Alongside this, contemporary cardiovascular tools-like PWV and stiffness index measurements-show how pulse-based assessment remains central even in modern medicine. Together, these developments suggest that *Ayurveda's* pulse diagnosis is not a relic of the past but a system with growing relevance, especially as integrative and personalized healthcare continue to expand.

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Conflict of Interest

The author declares no conflict of interest.

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