

A Literature Review on Manikkadai Nool a Traditional Diagnostic Tool in Siddha Medicine

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ABSTRACT

Manikkadai Nool (wrist circumference diagnostic technique) is one of the ancient, noninvasive diagnostic methods described in Siddha medicine^{1, 2}. It involves measuring the wrist circumference using finger units (viralkai alavu) to assess physiological and pathological conditions of an individual. ¹ This literature review aims to consolidate traditional references and clinical relevance of Manikkadai Nool in diagnosing Vatha, Pitham, and Kabha derangements and predicting prognosis ^{1, 2}. The study compiles data from classical Siddha texts and traditional to interpret the correlation between wrist measurements and various disease states. Findings reveal that Manikkadai Nool serves as a valuable diagnostic and prognostic indicator reflecting the status of Uyir Thathukkal (vital humors) ². It emphasizes the holistic approach of Siddha medicine in assessing health without invasive procedures.

Keywords: Manikkadai Nool, Siddha diagnostic tool, Finger breadths, Vital humor, Curable, Incurable.

INTRODUCTION

Siddha medicine, one of the oldest traditional medical systems in India, emphasizes the interrelationship between the body, mind, and environment. ¹ Diagnostic methods in Siddha, Manikkadai Nool is an ancillary diagnostic tool used by Siddha physicians for assessing the prognosis and nature of diseases. The Manikkadai Nool technique involves measuring the wrist circumference of the patient using finger breadths^{1, 2}. The measurement correlates with internal physiological derangements and predicts disease severity and life expectancy. This study reviews the traditional descriptions and clinical interpretations of Manikkadai Nool from classical Siddha literature. ²

Prevalence And Background

Manikkadai Nool has been traditionally practiced in southern parts of Tamil Nadu, particularly among Siddha physicians in regions such as Tirunelveli, Madurai, and Thanjavur. Though its clinical application has declined due to the advent of modern diagnostics, many traditional healers continue to use this method as a quick prognostic tool. Historically, this diagnostic technique was

recorded in ancient Siddha palms¹. The prevalence of the method among Siddha practitioners emphasizes its relevance in noninvasive traditional diagnostic practices.

MATERIALS AND METHODS

Type of Study: Literature Review Study based on traditional Siddha texts ².

Sources of Data: Noi Naadal Noi Mudhal Naadal

METHODOLOGY

Relevant literature was reviewed and categorized based on measurement range (finger breadths), corresponding signs and symptoms, prognostic interpretation, and association with Vatha, Pitha, and Kabha imbalances.

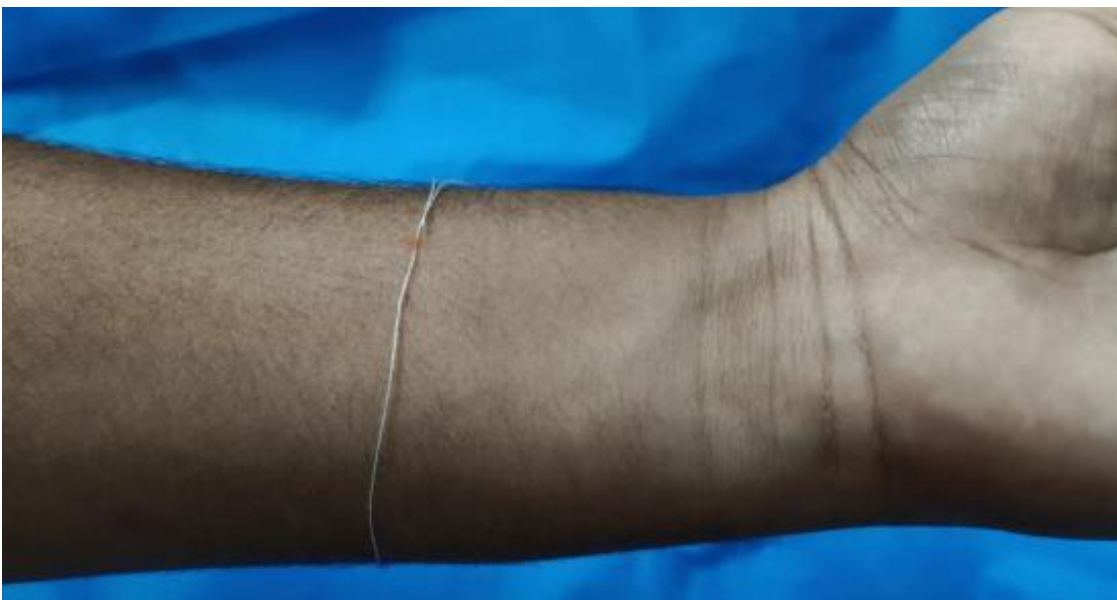
Procedure

The Manikkadai Nool examination is performed as follows:

The patient's left wrist is encircled using a cotton thread. The length of the thread is then measured against the physician's fingers to determine the viralkai alavu (finger breadth count). The obtained measurement (ranging from 4 to 11 finger breadths) is interpreted according to traditional literature¹. Each measurement corresponds to specific pathological or prognostic indications.

For instance: 10–9¾ fingers: mild Vaatha or Pitha disorders; 9–8¾: moderate derangements; 7½–6¼: severe systemic disturbances; below 6 fingers: fatal prognosis.¹

STEP 1: A Point 4 viraikadai distance from wrist crease is marked



STEP 2 : Measure viraikadai for the patient.



Review of literature (1,2)

Finger Breadth and Associated Symptoms

S/N	Finger Breadth	Symptoms
1	11	Body will be stout and heavy. Unless death is destined by fate, neither Kalan nor Yama can claim life.
2	10	Hyperthermia; Rheumatoid arthritis; Intense pain in limbs (neuralgia, myalgia, arthralgia, radiculopathy); Peptic ulcer; Gas accumulation in intestine; Fluffiness of body.
3	9¾	Inguinal bubo; Carbuncle; Dryness; Tussis (bronchial cough).
4	9½	Inflammatory edema; Dryness of face; Diabetes mellitus; Fever; Burning eyes.
5	9¼	Dysuria with oliguria; Sleeplessness; Sinusitis.
6	9	Hypoacusis; Deafness; Eye irritation; Pain in flanks and thighs; Restricted movement.
7	8¾	Febrile cataract; Sinusitis; Blindness.
8	8½	Hyperthermia; Scabies; General ulcers; Facial puffiness; Eczema; Tumor.
9	8¼	Fullness and intense body pain; Dryness in head; Pain; Sinusitis; Breathlessness; Cough; Respiratory problems.

10	8	Diabetic neuropathy; Indigestion; Belching; Dryness; Loss of appetite; Feeling of bodily dissociation.
11	7 ³ / ₄	Headache; Intoxication; Neck swelling (within 2 years); Epistaxis (within days).
12	7 ¹ / ₂	Tuberculosis; Urinary disorders; Diabetes mellitus; Burning eyes; Bloating abdomen; Fever (within 6 days); Joint pain; Abscess.
13	7 ¹ / ₄	Low back pain; Spasm; Pitta in head; Eye pain; Anemia; General swelling; Burning in hands/feet; Excess sleep.
14	7	Tuberculosis; Pitta in mouth; Emaciation; Burning sensation; Excess body heat.
15	6 ³ / ₄	Orchitis; Eye pain; Syncope; Anuresis; Sweating; Severe pain; PCOS; Scrotal pain; Dizziness.
16	6 ¹ / ₂	Hyperthermia; Heat; Pricking pain; Loss of appetite.
17	6 ¹ / ₄	Vomiting; Groin tumor; Irritable bowel syndrome; Irritability.
18	6	Tuberculosis; Fatigue; Phlegm; Death expected within 20 days.
19	5 ³ / ₄	Severe stage: Delirium; Encephalopathy; Coma; Fainting; Death inevitable even with minimal intake.
20	5 ¹ / ₂	Disease worsens; Death expected within 10 days.
21	5 ¹ / ₄	Weak body and extremities; Appears asleep; Death expected next day.
22	5	Severe distress; Phlegm; Death inevitable.
23	4 ³ / ₄	Condition indeterminable; Tremors; Dry mouth; Death within 7 days.
24	4 ¹ / ₂	Edema; Sunken eyes; Death within 9 days.
25	4 ¹ / ₄	Hyperpnea; Death within 2 days.
26	4	Peripheral edema; Death within 5 days.

DISCUSSION

The Manikkadai Nool method highlights the Siddha system's profound diagnostic wisdom based on physical observation and empirical knowledge. It reflects the balance of Uyir Thathukkal (Vatham, Pitham, Kabham)¹. The simplicity and non-invasive nature of this method make it a potential adjunct in preventive and prognostic evaluation, especially in rural and resource-limited settings. However, lack of standardization and scientific validation restrict its wider clinical use. Integrating Modern tools to correlate wrist circumference with physiological parameters may enhance its acceptability and research potential.

CONCLUSION

Manikkadai Nool is an ancient Siddha diagnostic tool offering insights into the body's internal health through wrist measurement. This literature review establishes its clinical and prognostic relevance as mentioned in Siddha s. Future research integrating modern anthropometric and biomedical data could scientifically validate its diagnostic significance.^{1, 2}

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