

Northamptonshire Archaeology

The Whitehall Farm Burials (Graves 3 to 8), Nether Heyford, Northamptonshire



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1 INTRODUCTION

The human remains submitted for analysis comprised material recovered from six graves (3-8). However, four of these six bone groups contained small quantities of human bone from one or more individuals. These remains have been analyzed and included in the report. See Appendix 5.1.

Lacking any information on the relative location of these burials and whether there was any intercutting graves, it has not been possible to attempt to locate these stray bones to the other excavated individuals, although this might be possible, or to provide an alternative explanation of their presence. The present report is therefore limited to the osteological analysis of the bones present.

In addition, numerous individual bags of human bone recovered during field walking were also submitted for analysis. The bag labels are already marked with basic bone identifications and no further analysis has been attempted given the fragmentary nature of the material and the lack of any spatial information that might provide possible groupings or relationships. However, it has been noted that the field walking collection does contain some obvious bone groups, such as clusters of rib bones or vertebrae and some quite substantial portions of individual long bones. This is a clear indication that much of the material, while plough disturbed, was still semi-articulated or at least clustered and therefore had not been displaced to any great extent from its original location. Accurate plotting of this material could therefore be used to study the broader distribution of burials and the extent and the organization of the cemetery. From such an analysis it might also be possible to provide some estimate of the minimum number of burials present and the relationship of these to the excavated graves.

2 METHODOLOGY

The osteological analysis of the human remains from Whitehall Farm, Nether Heyford (ASC Graves 3–8 2004) follows standard accepted methodologies employed in studies of this nature, as described by Bass (1987) and Brothwell (1981). A metrical record of all of the bones present can be found in Appendix 5.1 and a description of the metric shorthand/biometric symbols used during analysis can be found in Appendix 5.6. Where

possible, broken bones were fitted back together for the purpose of measuring, though this only occurred in instances where the joins were very close and inaccuracy was deemed to be negligible. These measurements were used in the diagnosis of age, sex, stature, build and skeletal form.

2.1 Age

The criteria on which each individual was aged depended largely on the nature of the bones available. Where possible a range of criteria were employed, the results obtained being combined to produce an average (most likely) age for the individual. Skeletal methods based on bone maturation, in terms of linear growth (Maresh 1955, Ubelaker 1981 and White 1991). Analysis of the pelvis; the pubic symphysis, and the articular surface (Lovejoy et al 1985 and White 1991) and stages of ossification (Krogman 1964, Brothwell 1981 and White 1991) were employed alongside dental methods, which assessed stages of tooth development (White 1991) and subsequent wear (Bass 1987).

2.2 Sex

Sex determination was similarly based upon various criteria, an average being accepted wherever possible. The most reliable criteria, based upon cranial and pelvic morphology and long-bone head dimensions, afforded greatest weight. Classifications of sexes were based upon levels of diagnostic certainty. Individuals for whom no sexing technique could be used have had to be regarded as indeterminate sex; as is the case for the juveniles found, for whom sex determination is not recommended. Cox and Mays (2000;12) explain that although skeletal morphological changes differ from an early age, they do not reach a high enough level for a reliable determination of sex until after the pubertal modifications have taken place.

2.3 Stature

Estimations of living stature were calculated whenever the relevant bones were available for measuring. In the presence of a complete femur and fibula no other metrics were sought (since these are believed to yield the most accurate estimation of stature). However, whenever a femur and fibula were not available or were broken/incomplete, alternative long-bone measurements were sought, ideally using estimations of stature obtained from the

measurements of several long-bones. Calculations were processed using the standard regression equations described by Trotter and Gleser (1952 & 1958).

2.4 Robusticity

The Robusticity index expresses the relative size of the shaft of the femur. Measurements of the left and right femurs can provide information on which leg was used more prominently. The Robusticity index can also indicate trauma in the legs if one leg is much thinner than the other. Unfortunately a Robusticity index could only be produced for Grave 7 using the following formula in Bass (1987).

Robusticity Index = <u>Anterior-posterior + Mediolateral diameter of midshaft x 100</u> Bicondylar (physiological) length

2.5 Platymeria and Platycnemia Index

The Platymeria and Platycnemia index for each individual was calculated where possible using the following formula in Brothwell (1981). The Platymeria and Platycnemia index relate to the degree of flattening of the femur and the tibia and is believed to be related to the effect of the muscles on the bone during movement, for example, during different occupations involving particular uses of the legs. The index can also help indicate whether the individual suffered from nutritional deficiencies.

Platymeria Index = $\underline{FeD1 \times 100}$ FeD2 Platymeria Index = $\underline{TiD2 \times 100}$ TiD1

2.6 Cranial Morphology and Facial/Cranial Index

The cranial and facial index is used to investigate genetic relationships. It is suggested by Mays (1998) that differences in the facial and cranial index can be influenced by gender, deformation, disease, diet and climate. Unfortunately, due to the fragmentary nature of the surviving cranial bone of the individuals featured in this report, the cranial index could only be calculated for Grave 7 using the following formula in Brothwell (1981).

Cranial Index = <u>Maximum skull breadth x 100</u> Maximum skull length

Dolichocephalic (x - 74.99) = narrow headed Mesocephalic (75 - 79.99) = medium headed Brachcephalic (80 - 84.99) = broad headed Hyperbrachphalic (85 - x) = very broad headed

The facial index could not be established for any of the individuals due to the fragmentary nature of the evidence.

The surviving cranial material for Grave 3, 4, 5, 6 and 8 was so fragmented that the researcher was also unable to distinguish any non metric cranial traits, and has only been able to look at their presence / absence on Grave 7.

See Appendix 5.4 - 5.5 for details of the cranial morphology and cranial metrics for Grave 7.

2.7 Post Cranial Morphology and Post Cranial Metrics

Post cranial non-metric traits have also been recorded for each individual where possible. The analysis of non-metric traits can provide evidence of genetic variability and can indicate genetic relations between individuals.

See Appendix 5.2 - 5.3

2.8 Pathology and Dental Health

The majority of human disease and trauma affect only the soft tissues of the victim (rarely causing death) and consequently are very rarely preserved in archaeological specimens, although there are certain conditions that leave an indelible mark on the human skeleton.

The diagnosis of any trauma, pathological conditions and dental health, follows accepted works by Ortner & Putschar (1981) White (1991), Aufderheide & Rodriguez-Martin (1998) and Roberts & Manchester (1995).

3 RESULTS

3.1 Summary table

Grave	Age (years)	Sex	Stature
3	6 to 8	Not applicable	Not applicable
4	25 t0 35	Possible female	Not applicable
5	45+	Male	174m
5 additional bones	30 - 35	Possible female	Not applicable
	Juvenile	Not applicable	Not applicable
6	7 to 10	Not applicable	Not applicable
6 additional bones	3 to 5	Not applicable	Not applicable
	3 to 5	Not applicable	Not applicable
7	25 to 35+	Male	166.5m
8	6 to 10	Not applicable	Not applicable

3.2 Grave 3

Age - 6 to 8 years

Sex - Not applicable

Stature - Not applicable

Robusticity – Not applicable

Platymeria and Platycnemia Index – Not applicable

Cranial Index – Not applicable

Pathology - No visible signs of pathology

Dental Health - Good

Unfortunately only a small fragment of the upper left maxilla has survived. The surviving teeth show no signs of caries, calculus or hypoplasia lines on the teeth (hypoplasia lines are a result of disturbances in the enamels development which is caused by illness and poor health – close investigation of these lines can indicate at which age the onset occurred).

Additional Bones – See Appendix 5.1

3.3 Grave 4

Age – 25 - 35 years
Sex – Possible female
Stature - Not applicable
Robusticity – Not applicable
Platymeria Index – Not applicable

Platycnemia Index - Mesocemia (Left tibia)

$Cranial\ Index-Not\ applicable$

Pathology – Schmorl's Nodes

The individual suffered from two separate cases of Schmorl's nodes affecting the lumbar and thoracic vertebrae. A Schmorl's node is a crater like depression occurring either on the anterior or posterior surface, mostly toward the dorsal side, of vertebral bodies. These are caused by herniation or prolapse of inter-vertebral disk tissue, forming ectopic deposits of nucleus pulpous material in the neighbouring vertebral bodies. It has been suggested that trauma and or strenuous activity, especially in adolescence, and metabolic and degenerative disorders may contribute to the formation of Schmorl's nodes.

Dental health - Fair

The individual had a relatively good state of dental health with no cavities and only mild calculus. Unfortunately the maxilla and the mandible were so fragmented that the researcher has been unable to tell whether the individual suffered from abscesses or periodontal disease. Peridontitis is an infection of the alveolar bone and the soft tissues of the mouth and is related to poor dental hygiene. The condition is recognized by the recession of the alveolar bone from around the base of the teeth, which, in the most extreme cases, can lead to the loosening and eventual loss of teeth.

Additional Bones – See Appendix 5.1

3.4 Grave 5

Age - 45 + years

 $\mathbf{Sex} - \mathbf{Male}$

Stature – 174m approx

Robusticity – Not applicable

Platymeria Index – Platymeria

Platycnemia Index - Mesocemia

Cranial Index – Not applicable

Pathology – Schmorl's Nodes / Osteophytes

The individual suffered from a Schmorl's node affecting the fifth lumbar vertebrae and Grade 1 Intermittent osteophtyes affecting the second cervical and the third lumbar vertebrae (Classification in Brothwell 1981:51). Osteophytes are commonly seen as an age related pathology and are indicative of early onset of a variety of joint diseases, most commonly spinal osteoarthritis.

Dental Health - Fair

The teeth of the individual in Grave 5 are very worn due to increasing age and a coarse diet. The surviving teeth bear no signs of caries and only mild calculus is visible. Additional Bones – Relating to two further individuals. See Appendix 5.1

3.5 Grave 6

Age – 7 to 10 years (approx)
Sex – Not applicable
Stature – Not applicable
Robusticity – Not applicable
Platymeria and Platycnemia Index - Not applicable
Cranial Index – Not applicable
Pathology – Not applicable
Dental health – Not applicable
Additional Bone – Relating to two further individuals. See Appendix 5.1

3.6 Grave 7

Age – 25 to 35+ years
Sex – Male
Stature – 166.54m approx
Robusticity – No strong preference for either leg
Platymeria Index – Platymeria
Platycnemia Index - Mesocemia+
Cranial Index – Dolchocrany (narrow headed)
Pathology - Schmorl's Node
The individual's second lumbar vertebra is affected by a Schmorl's node.
Dental health – Good
The individual exhibits a good state of dental health with no signs of caries, abscesses or periodontal disease and only mild calculus.

3.7 Grave 8

Age – 6 to 10 years
Sex – Not applicable
Stature – Not applicable
Robusticity – Not applicable
Platymeria and Platycnemia Index - Not applicable

Cranial Index – Not applicable Pathology – Not applicable Dental Health – Not applicable

4 DISCUSSION

The group of individuals analyzed comprises both males and females ranging in age from infants aged between 3 and 5 years up to adults aged 45+ years.

Due to the fragmentary nature of the surviving bone no pathological clues have been found to indicate their causes of death. The surviving remains show evidence of heavy lifting / strenuous activity using the back (indicative by Schmorl's nodes) and age related pathology (osteophytes). The dental health of the surviving material is relatively fair with no signs of caries on the surviving dentition and only mild calculus and age related attrition which is indicative of a coarse diet which little sugar.

5 APPENDIX

5.1 Human Bone Catalogue

Grave 3			
	Left	Right	Unsided
Sternum	-	-	-
Manubrium	-	-	Present
Clavicle	-	-	-
Scapula	-	-	-
Ribs	-	-	3 fragments
Humerus	-	-	-
Radius	-	-	-
Ulna	-	-	-
Carpals	-	-	-
Metacarpals	-	-	-
Phalanges (hand)	-	-	-
Pelvis	-	-	-
Femur	-	1 fragment	-
Patella	-	-	-
Tibia	-	1 fragment	-
Fibula	-	-	-
Tarsals	-	-	-
Metatarsals	-	-	-
Phalanges (foot)	-	-	-
Skull	-	Fragments	-
Mandible	-	Fragments	-
Cervical Vertebrae	-	-	-
Thoracic Vertebrae	_	-	-
Lumbar Vertebrae	-	-	-
Sacrum	-	-	-

Additional Bone - Grave 3	Age	Sex	Measurements taken
1 canine (dc1) - possibly related to Grave 3	-	-	-
1 molar	-	-	-
1 molar root	-	-	-
1 intermediate foot phalange	-	-	-

Grave 4			
	Left	Right	Unsided
Sternum	-	-	-
Manubrium	-	-	-
Clavicle	Fragmented	Fragmented	-
Scapula	Fragmented	Fragmented	-
Ribs	17 fragments	11 fragments	-
Humerus	No proximal end	No proximal end	-
Radius	-	No distal end	-
Ulna	No distal end	No distal end	-
Carpals	-	-	-
Metacarpals	-	-	-
Phalanges (hand)	-	-	-
Pelvis	-	Fragment	-
Femur	No distal end	No distal end	-
Patella	-	-	-
Tibia	Almost complete	Shaft only	-
Fibula	Fragments	Fragments	-
Tarsals	2 (fragmented)	6 (fragmented)	-
Metatarsals	-	4 (fragments)	-
Phalanges (foot)	-	-	-
Skull	-	-	Fragments
Mandible	Badly preserved	Fragments	-
Cervical Vertebrae	-	-	6
Thoracic Vertebrae		_	10
Lumbar Vertebrae	-	-	4
Sacrum	-	-	-

Additional Bone - Grave 4	Age	Sex	Measurements taken
Left ulna - proximal end only	-	-	-

Grave 5			
	Left	Right	Unsided
Sternum	-	-	-
Manubrium	-	-	-
Clavicle	Present	-	-
Scapula	Fragments	Fragments	-
Ribs	8 fragments	8 fragments	-
Humerus	Fragments	Fragments	-
Radius	Fragments	-	-
Ulna	Present	-	-
Carpals	7	6	-
Metacarpals	4	4	-
Phalanges (hand)	8	11 (fragments)	-
Pelvis	Fragments	Fragments	-
Femur	Present	Present	-
Patella	-	-	-
Tibia	Present	Present	-
Fibula	Present	Present	-
Tarsals	7	6	-
Metatarsals	5	4	0
Phalanges (foot)	-	-	5
Skull	-	-	Fragments
Mandible	-	-	Fragments
Cervical Vertebrae	-	-	3 (fragmented
Thoracic Vertebrae	-		6 (fragmented)
Lumbar Vertebrae	-	_	3
Sacrum	-	-	Fragments

Additional Bone - Grave 5	Age	Sex	Measurements taken
Maxilla - Right side only	Adult	-	-
Pelvis - Fragments (includes pubic synthesis)	30 - 35 approx	Possible female	-
Sacrum - S1 and S2 only - Very small	Juvenile	-	-
Rib fragment	Juvenile	-	-
Right humerus	Adult	-	See Appendix 5.3
Right femur	Adult	-	See Appendix 5.3
Left femur	Adult	-	See Appendix 5.3

Grave 6			
	Left	Right	Unsided
Sternum	-		
Manubrium			
Clavicle			-
Scapula			
Ribs			-
Humerus	Present		_
Radius			
Ulna			
Carpals		_	_
Metacarpals			
Phalanges (hand)			
Pelvis		_	_
Femur	Present		
Patella		_	_
Tibia		_	_
Fibula			
Tarsals			
Metatarsals		2	
Phalanges (foot)			
Skull	_	-	Fragments
Mandible	_		
Cervical Vertebrae			
Thoracic Vertebrae	_		
Lumbar Vertebrae			
Sacrum	_	-	-

Additional Bone - Grave 6	Age	Sex	Measurements taken
Left femur	3 - 5 years	-	-
Left tibia	3 - 5 years	-	-
Left tibia	3 - 5 years	-	_
Right femur (not related to left femur)	3 - 5 years	-	-
Fibula (shaft only)	Infant	-	-

Grave 7			
	Left	Right	Unsided
Sternum	-	-	-
Manubrium	-	-	-
Clavicle	Fragments	Fragments	-
Scapula	Fragments	Fragments	-
Ribs	8 fragments	12 fragments	-
Humerus	Present	Present	-
Radius	Present	No proximal end	-
Ulna	Present	Present	-
Carpals	-	-	-
Metacarpals	2	4	-
Phalanges (hand)	3	8	-
Pelvis	Fragments	Fragments	-
Femur	Present	Present	-
Patella	-	-	-
Tibia	Present	Present	-
Fibula	Present	Present	-
Tarsals	5	6	-
Metatarsals	5	5	-
Phalanges (foot)	1	1	-
Skull	-	-	Almost complete
Mandible	-	-	Almost complete
Cervical Vertebrae	-	-	Fragments
Thoracic Vertebrae	_	-	12
Lumbar Vertebrae	-	-	5
Sacrum	-	-	Fragments

Grave 8			
	Left	Right	Unsided
Sternum	-	-	-
Manubrium	-	-	-
Clavicle	-	-	-
Scapula	-	-	-
Ribs	-	-	1 fragment
Humerus	-	-	-
Radius	-	-	-
Ulna	-	-	-
Carpals	-	-	-
Metacarpals	-	-	-
Phalanges (hand)	-	-	-
Pelvis	Unfused	-	-
Femur	Unfused	Distal end only	-
Patella	-	-	-
Tibia	Almost complete	No distal end	-
Fibula	Shaft only	fragments	-
Tarsals	-	-	-
Metatarsals	-	-	-
Phalanges (foot)	-	-	-
Skull	-	-	-
Mandible	-	-	-
Cervical Vertebrae	-	-	-
Thoracic Vertebrae	-	-	-
Lumbar Vertebrae	-	-	-
Sacrum	-	-	-

5.2 Post Cranial Morphology

Grave 4	Present / Absent					
Sternum						
Manubrio-corpal synostosis	Not applicable					
Sternal aperture	Not applicable					
Scapula						
Os acromiale	Not applicable					
Suprascapular area	Not applicable					
Vertebrae						
Atlas - posterior bridge	Not applicable					
Atlas - Lateral bridge	Not applicable					
Sacrum - Level of open hiatus	S5					
Accessory sacral / iliac facets	Not present					
Lumbo- sacralisation of vertabrae	Not present					
Humerus						
Septal aperture	Left - present/ right - absent					
Supracondlyar process	Left and right - not present					
Femur						
Third trochanter	Not applicable					
Allen's fossa	Not applicable					
Poirier's facet / plaque	Not applicable					
Patella						
Vastus notch	Not applicable					
Bipartite patella	Not applicable					
Tibia						
Squatting facets	Not applicable					
Talus						
Os trigonum	Not applicable					
Talar facet	Not applicable					
Calcaneus						
Calcaneal facet	Not applicable					

Grave 5	Present / Absent
Sternum	
Manubrio-corpal synostosis	Not applicable
Sternal aperture	Not applicable
Scapula	
Os acromiale	Not applicable
Suprascapular area	Not applicable
Vertebrae	
Atlas - posterior bridge	Not applicable
Atlas - Lateral bridge	Not applicable
Sacrum - Level of open hiatus	Not applicable
Accessory sacral / iliac facets	Not applicable
Lumbo- sacralisation of vertabrae	Not applicable
Humerus	
Septal aperture	Left and right – not present
Supracondlyar process	Left and right - not present
Femur	
Third trochanter	Not present
Allen's fossa	Not present
Poirier's facet / plaque	Not present
Patella	
Vastus notch	Not applicable
Bipartite patella	Not applicable
Tibia	
Squatting facets	Not present
Talus	
Os trigonum	Left and right - not present
Talar facet	Left and right - not present
Calcaneus	
Calcaneal facet	Left and right - not present

Grave 7	Present / Absent						
Sternum							
Manubrio-corpal synostosis	Not applicable						
Sternal aperture	Not applicable						
Scapula							
Os acromiale	Not applicable						
Suprascapular area	Not applicable						
Vertebrae							
Atlas - posterior bridge	Not applicable						
Atlas - Lateral bridge	Not applicable						
Sacrum - Level of open hiatus	S5						
Accessory sacral / iliac facets	Not applicable						
Lumbo- sacralisation of vertabrae	Not present						
Humerus							
Septal aperture	Left - present/ right - absent						
Supracondlyar process	Left and right - not present						
Femur							
Third trochanter	Left and right - not present						
Allen's fossa	Left and right - not present						
Poirier's facet / plaque	Left - not applicable/ right - present						
Patella							
Vastus notch	Not applicable						
Bipartite patella	Not applicable						
Tibia							
Squatting facets	Not present						
Talus							
Os trigonum	Left and right - not present						
Talar facet	Left and right - not present						
Calcaneus							
Calcaneal facet	Left and right - not present						

The post cranial non metric traits above can be found illustrated in pictorial form in Brothwell (1981; 98-99).

5.3 Post Cranial Metrics

		Femur														
	Fe	L ₁	F	FeL ₂		FeD ₁		FeD ₂		FHD ₁		D ₃	FeD ₄		F	eE1
Grave	L	R	L	R	L	R	L	R	L	R	L	R	L	R	L	R
3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5	-	-	-	-	29.71	29.81	36.48	36.85	48.9	49.03	-	-	-	-	-	-
5																
additional																
bone	44.5	44.4	43.6	42.8*	23.04	21.93	30.86	30.53	46.05	-	27.83	-	27.9	-	-	-
6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7	44.3	43.3	42.3	42.1	23.71	24.41	36.81	38.84	47.51	47.8	28.16	28.1	28.6	31.1	76.1	76.49
8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

	Tibia								Fibula	
	Ti	L_1	TiD ₁		TiD ₂		T_1E_1		FiL ₁	
Grave	L R L R		R	L	R	L	R	L	R	
3	-	-	-	-	-	-	-	-	-	-
4	36.7	-	29.8	-	20.53	-	-	-	-	-
5	39.4	39.2	38	36	24.97	23.99	77.21	78.42	38.1	-
6	-	-	-	-	-	-	-	-	-	-
7	35.2	35.2	32.5	30.9	22.51	23.29	-	-	34.7	34.7
8	-	-	-	-	I	I	-	-	-	-

	Humerus							Radius		Ina
	HuL ₁ HHD			HuE ₁		RaL ₁		ULL ₁		
Grave	L	L R		R	L	R	L	R	L	R
3	-	-	-	-	-	-	-	-	-	-
4	-	-	-	-	-	-	-	-	-	-
5	-	-	-	-	61.17	63.74	-	-	28.3	28.5*
5 (additional bone)	-	31.4	-	44.7	-	57.4	-	-	-	-
6	-	-	-	-	-	-	-	-	-	-
7	32.7	33.3	-	49.1	65.63	-	24.6	-	_	27.5
8	-	-	-	-	-	-	-	-	-	-

Please see Appendix 5 6 for explanation of metric shorthand used above.

5.4 Cranial Morphology

Grave 7	Present / Absent
Wormian bones:	
Coronal	R - present / L - absent
Sagittal	A - present / P - absent
Lambdoid	R - present / P - absent
Inca B	Absent
Metopism	Absent
Parietal notch B	R - absent / L - absent
Torus Mandib	R - absent / L - absent
Palativus	Absent
Maxillaris	R - absent / L - absent
Parietal foram	R - absent / L - absent
Sup. Orb. Fora	R - present / L - present
Bregmatic bone	Absent
Lambda bone	Absent
Occipito-temporal suture wormian bones	R - absent / L - absent
Asterionic bone	R - absent / L - present
Os japonicum	Not applicable

The cranial non metric traits above can be found illustrated in pictorial form in Brothwell (1981; 91-99).

5.5 Cranial Metrics

Grave 7	Measurements (mm)
Glab.occip.L (L)	19.4
Max.bi-parietal.B (B)	13.6
Basio-breg.HT (H)	14.4
Facial breadth (GB)	-
Max.zygom.B (J)	-
Condyle Length (Cyl)	-
Ramus B (least) (RB1)	37.16
Bi-gonial breadth (GoGo)	10.57
Max proj.L.mandib (ML)	-

The cranial measurements above are described and illustrated in Brothwell (1981; 82-83).

5.6 Human Anthropometrics - Descriptions of Metric Shorthand

Femora

FeL ₁	Maximum length
FeL ₂	Oblique/Physiological length
FeD ₁	Minimum anterior-posterior diameter (below the lesser trochanter)
FeD ₂	Minimum transverse diameter
FHD ₁	Maximum head diameter
FeD ₃	Anterior-posterior diameter at the mid-shaft
FeD ₄	Transverse diameter at the mid-shaft
FeE ₁	Bicondular width
T:1 :	
1 idiae	
TiL ₁	Maximum length
TiD ₁	Minimum anterior-posterior diameter (at nutrient foramen)

- TiD 2 Minimum anterior-posterior diameter (at nutrient foramen)
- T₁E₁ Bicondular width

Fibula

Fil ₄ Maximum length

Humeri

- HHD Maximum head diameter
- HUE 1 Epicondular width

Raii

 RaL_1 Maximum length

Ulnae

- ULL₁ Maximum length
- Phys.L Physiological length

Most of the measurements described above are illustrated in pictorial form in either Brothwell (1981; 77-87) or Bass (1987; 70-80).

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