

2. SUMMARY OF THE EXAMINATION OF SKELETONS FROM CISTS AT LUNANHEAD.

Cist No. 1.—Examination of the bones and fragments showed that the skeleton was that of a male of over forty years of age, 164 cm. in height (5 feet 4 inches), of average proportions, but with a short feminine type of chest, of slender build, with rather long forearms. The skull was large (198 mm. long) and capacious, the hinder part specially being large, high, and wide. His neck had been very stiff from osteo-arthritis, but his limbs had full range of movement. His customary posture was that of squatting. The teeth were good, much worn, with no decay. The upper left wisdom tooth and the right lower first premolar had been extracted in youth. He had suffered a deep wound on the left side of the forehead some time before death, which had involved the bone and left a suppurating sore.

Death had been caused by a deep wound on the front of the left thigh, inflicted by a sharp, heavy weapon which had cut deeply into the femur and had soon proved fatal.

Cist No. 2.—The remains were fewer and more fragmentary, but it could be established that the skeleton here also was male, and that the skull had been

similar in shape to that in Cist 1 though shorter (191 mm. long), and, from the condition of portions of the cranial sutures, was that of an older person.

Though most of the skull was in rather small fragments, the right maxillary alveolar arch was intact, carrying all its teeth except the central incisor and the second premolar, which had dropped out post-mortem; the right half of the mandible, also with its teeth *in situ*, except the incisors and the second molar which, also, had dropped out post-mortem. In addition there were a dozen loose teeth, from the arches of the left side. The teeth proved to be extremely instructive from the pathological standpoint (Pl. XXX, 2).

The teeth were of moderate size, and the crowns of the first molars and the teeth anterior to them were much worn, the tubercles worn away and the pulp cavities exposed and filled with secondary dentine. The crown of the second molar, on the other hand, was hardly worn, its lingual tubercle alone being slightly worn down. The crowns of the third molars (wisdom teeth) were quite unworn and in marked contrast with those of the first molars. There had been long-standing pyorrhœa, which had caused absorption of the outer walls of the sockets so that the whole length of the root of the upper canine, the labial root of the first premolar, and both the labial roots of the first molar were exposed on the surface. There were large carious cavities in the adjacent surfaces of the necks of the first molar and second premolar which undermined the masticating surfaces and eroded the secondary dentine which filled the pulp cavities. Above and round the apices of each of the labial roots of the first molar were smooth-walled abscess cavities. A small circular channel led from the lingual root of the first molar upwards and perforated the floor of the maxillary sinus, and from the condition of the tooth it is highly probable that there had been an infection of the sinus.

Interpretation of these pathological appearances leads to the conclusion that the teeth had been healthy and functioning normally, with the usual wear of the crowns, until after the eruption of the second molar tooth (twelve years) —sufficiently long to cause some wear of the crown of that tooth. But after that and before the appearance of the wisdom tooth (third molar) decay had begun at the neck of the second premolar and first molar, causing pain and so great tenderness that mastication had been impossible, and all further wear of the crowns was stopped, the wisdom teeth, though present, having undergone no wear at all. Pyorrhœa affected all the anterior teeth, and gumboils and abscesses had formed about the roots of the first molar. It is also probable that there had been an infection of the maxillary sinus.

In spite of all this the man had lived to over forty-five years of age. No cause of death from external violence was detectable.

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