



THE ROLE OF CRANIOFACIAL RADIOGRAPHS IN ASSESMENT OF SEXUAL DIMORPHISM IN FORENSIC ODONTOLOGY

Forensic Radiology

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ABSTRACT

Sex determination becomes the first priority in the process of identification of a deceased by a forensic investigator in the case of casualties, natural mass disasters, bomb blasts, crime investigations, and racial studies. Identification of gender using skeletal remains presents a great problem to forensic experts, especially when only remaining portions of bodies are recovered. Forensic odontology is the investigative and analytical section of dentistry that applies dental principles to legal issues and analyses dental evidence for human identification. Sex determination is a sub-branch of forensic odontology. It is an investigative aspect of dentistry that analyses dental evidence for human identification. It is very crucial, when information of the deceased is unavailable. Forensic odontologist can assist other experts to determine the sex of the remains using teeth and skull traits. Radiology plays a major role here as antemortem craniofacial radiographic records if available, make sex determination all the more unchallenging. This article reviews upon the various radiographic methods used, their different parameters and outcomes in sex determination in forensic odontology.

KEYWORDS

forensic, odontology, sexual dimorphism, craniofacial radiographs

INTRODUCTION

Forensic odontology plays an important role in the personal identification of victims with bodies mutilated beyond recognition due to major mass disaster. It is difficult for forensic experts to identify a person's gender from skeletal remains, especially when only body fragments are found.

Dentists can help other specialists identify the gender of the remains by examining the teeth and skull. Both male and female sexes have different tooth features, such as morphology, crown size, and root lengths. Additionally, variations in the cranial patterns also aid forensic odontologists in determining the victim's sex.⁽¹⁾

Forensic radiology has been used in forensic sciences since time immemorial. Wilhem Conrad Roentgen created the first radiograph in 1895, marking the beginning of its history. Post-mortem radiography examination was introduced in 1898, three years later.

Forensic radiology so far, has depended almost exclusively on the radiographic and the static image captured on the OPG.^{(2),(3)}

The Indian population exhibits a spectrum of both homogeneous and heterogeneous subpopulations in different geographical areas.

However, forensic data on cranio-mandibular parameters in the Indian population is scarce.^{(1),(14)}

Antemortem or post-mortem craniofacial radiographs according to multiple studies conducted previously can be of great help in identifying factors like sex and age of individual. Multiple structures like the frontal sinus, maxillary sinus, mastoid process, mandible, ramus, teeth, coronoid process, zygomatic arch, supraciliary arches, etc. present with sexual dimorphism as per studies so far. Now with the advent of higher 3-dimensional radiographic modalities, newer studies have confirmed the same and discovered newer parameters.

Hence a review of the craniofacial radiographic features for sexual dimorphism in forensic odontology is presented here. An attempt has been made to collect and present review of literature pertaining to radiographic studies for determination of sex.

REVIEW-

The different studies with their parameters used and consecutive outcomes are assembled in the table below: -

Table 1: - Studies for assessment of sexual dimorphism with their varying parameters, modalities used and outcomes.

Sr. no.	Author	Year	Parameter	Sample Size	Modality	Outcome – sex differentiation
1.	Toshiko Ikeda, Motonobu Nakamura and Masatugu Itoh ¹⁰	1999	Zygomatic angle	432	MRI	Significant differences
2.	Sithiporn Agthong, Thanasilp Huanmanop, and Vilai Chentanez ¹¹	2005	Supraorbital, infraorbital, and mental foramina	110	Crania	Significant differences
3.	Gapert et al ¹²	2008	Condylar measurements, including length, width, and intercondylar measurements	146	Crania	Significant differences
4.	Fouad Ayoub et al ¹³	2009	Mandibular angle	83	Lateral cephalograms	Significant differences
5.	Venkatesh G. Naikmasur, Rahul Shrivastava and Sunil Mutalik ¹⁴	2009	11 cephalometric parameters	-	PA views and Lateral cephalograms	Bi-zygomatic width, ramus height, and facial depth were the main contributors.
6.	Vineeta Saini et al ¹⁵	2011	Ten standard cephalometric parameters	112	Crania	In stepwise analysis, bi-zygomatic breadth turned out to be the sole most useful parameter.
7.	Rishabh Kapila, K.S. Nagesh, Asha R. Iyengar and Sushma Mehkri ¹⁶	2011	Mesiodistal dimensions of mandibular canines	40	IOPA	Significant differences
8.	Shearer et al ¹⁷	2012	Brow-bridge volume.	128	3D laser scanner	Volume in males was significantly larger.
9.	Juliana Isaza et al ¹⁸	2012	16 measurements of endocranial cavity	249	Volumetric 3D reconstruction of computed tomography (CT)	The most dimorphism was found in the maximum width of the foramen magnum, the maximum width of the basal

						occipital region, and the maximum distance between the foramina ovalia.
10.	Nidugala et al ¹⁹	2013	10 craniofacial parameters	80	Crania	bizygomatic, orbital and biorbital breadths showed greatest sexual dimorphism
11.	Abdel Fatah EE, Shirley NR, Jantz RL, Mahfouz MR ²⁰	2014	Endo- and ectocranial measurements	222	3D reconstruction of computed tomography (CT)	Size was a significant component for dimorphism, shape played a role, as well. Vault thickness is another characteristic; in the frontal region, females typically have thicker vaults than males, whereas in the occipital region, males typically have thicker vaults.
12.	Aysar Razzaq Ali and Lamia H. Al-Nakib ²¹	2013	11 parameters were measured	113	Digital lateral cephalometric	All cranio-cephalometric measurements gave significant differences
13.	Chandra et al ²²	2013	Superior and inferior borders of mental foramen	100	Panoramic radiographs	Significantly larger values in males.
14.	Belaldavar et al ²³	2014	Frontal sinus	300	Postero- anterior views	Significantly larger values in males.
15.	Shivaprakash et al ²⁴	2014	Mandibular posterior ramus flexure	104	Mandibles	Significantly larger values in males.
16.	Massarat Jehan, Vipendra Bhadkari, Akhilesh Trivedi and S.K. Sharma ²⁵	2014	Bizygomatic distance, AP diameter & width of the maxillary sinus & intermaxillary distance	191	CT scans	Bizygomatic distance & maxillary sinus dimensions are both useful for gender determination.
17.	Ranjith et al ²⁶	2015	Maxillary sinus	30	CT scans	Values were larger in males
18.	Suragimath et al ²⁷	2016	Mental foramen	400	Panoramic radiographs	Significantly larger in males
19.	Raiker et al ²⁸	2016	Foramen magnum	150	Sub-mento vertex radiograph	Measurements were larger in males
20.	Samatha et al ²⁹	2016	Ramus and anteroposterior superoinferior angle of mandibular condyle.	120	Panoramic radiographs	Ramus breadth, Condylar height and Projective height of ramus were significantly larger in males
21.	Barbora Musilova et al ³⁰	2016	Entire exo-cranial surface size was analyzed using coherent point drift-dense correspondence analysis	103	CT scans	Supraorbital region, orbits, cheek bones, nasal apertures, mastoids, and external occipital protuberances showed most significant difference.
22.	Sailaja Sambhana et al ³¹	2016	Mandible	384	Panoramic radiographs	All parameters of mandible showed significantly larger values in males except gonial angle.
23.	Shruti Chandra et al ³²	2017	Zygomatic arch	60	Jug-handle radiographs	Significantly larger in males
24.	Stefan Schlager and Alexandra Rudell ³³	2017	Zygomatic arch	98 Chinese 96 Germans	3D scans	Significantly larger in males
25.	Wen Yang ³⁴	2019	The network inputs consisted of six skull features that were measured via computer-aided measuring.	267	Computer scanning-back propagation neural network.	Significant differences with larger values in males.
26.	Colmenares et al ³⁵	2019	Skull base	115	Submentovertex-radiographs	Foramen magnum length and Bizygomatic breadth showed most significant differences
27.	Mondal et al ³⁶	2022	Morphometric and volumetric assessment of mastoid process	60	Cone beam computed tomography scans	Length, height, width and volume of mastoid process were significantly larger in males
28.	Muhammad Faiz Mohd Fauad et al ³⁷	2021	Third cervical vertebra	432	Lateral cervical radiograph	It became that there were significant variations in the height of the vertebral body, the length of the superior articular process, and the length of the superior portion of the C3 spinous process.
29.	Ramhari et al 2022 ³⁸	2022	Mastoid to Gonion height and Bizygomatic width	100	Postero-anterior cephalograms	Bizygomatic width and Mastoid to Gonion height had a high sex discriminating ability

30.	Nur Damia Iwani Zulkiflee et al. ³⁹	2022	Frontal sinus	453	107-112.	Lateral skull radiographs	Significant differences with larger values in males
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The skull, after the pelvis is the most readily assessed portion of the skeleton for sex identification. Because the majority of the craniofacial structures are made of hard tissues, which are rather unyielding, they have the ability to distinguish between individuals and demographic groupings. However, until the secondary sexual features appear, determining the sex from the skull is unreliable. Unfortunately, no single morphological feature has been identified as distinctive for gender differentiation from the skull out of all those that have been described. Previous descriptions have included techniques with morphometric or anthropometric analysis that had an accuracy of 77-92%.⁽³⁾ Iscan,⁽⁴⁾ has stated in his review that osteometry is the procedure of choice for determining a person's sex. In a study incorporating osteometry, Robinson and Bidmos⁽⁵⁾ assessed five discriminant function equations in the mandible and crania of white South Africans descending from three distinct European subgroups. The range of 72-95% was the classification accuracy for functions based on osteometry.

The degree to which gender may be distinguished precisely depends on the particular components of the skull that are present and how well-preserved they are. Since sexing an adult skull requires a particular collection of diagnostic features, the range described above may change.⁽³⁾

Compared to morphometric and anthropometric approaches, radiographs offer a more accurate, simple, reliable, and repeatable means of determining sex through linear and angular measures.

Skull radiographs have shown 80-100% accuracy in differentiating between genders.⁽⁶⁾ Standardized skull radiography techniques, such as lateral and postero-anterior cephalometry, have increased this accuracy even more. They disclose additional characteristics and more grounds of comparison.

Radiographic projections for endocranial capacity, according to Krogman⁽⁶⁾, aid in gender distinction. He predicted that if both antemortem and postmortem skull radiographs are available, sex determination will be 100% accurate. 100 lateral cephalograms of Taiwanese descent were examined by Hsiao et al.⁽⁷⁾ 18 criteria were generated with 100% accuracy in sex determination using the external occipital protuberance, frontal sinuses, superciliary ridges, and mastoid processes as the items of cephalometric measurements.

A similar study by Patil and Modi⁽⁸⁾ on central Indian population, considering 10 cephalometric linear variables, reported an accuracy of 99%. Hatipoglu et al.⁽⁹⁾ used MRI to evaluate the craniometric sexual dimorphism.

The cranial volume, diploeic thickness at the glabellar area, vertex-basion, basion-opisthion, euryon-euryon, and glabella-opisthocranion distance were the variables employed. Overall, it was discovered that males had higher measurements.

Numerous studies have already employed various skull radiograph criteria to determine a subject's sex.

CONCLUSIONS

There is an increasing need for the accurate and reliable assessment of biological sex in forensic cases when identifying missing human remains. In several previously studied groups, notable and statistically significant differences between the skulls of males and females have been discovered; this data aids in the prediction of the sex of unidentified individuals. In addition to examination of anatomical remains to identify sex of victim's radiographs are invaluable tools which assist in personal identification. Radiographs in this way rule out the need for invasive post-mortem procedures of the body of the deceased to identify the sex of the victim. We have to ponder more on this to assess if it can also be used for racial identification and age estimation which will be essential for identification in forensics.

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