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THREE HUMAN BURIALS FROM BEADLAM ROMAN VILLA, NORTH YORKSHIRE, EXCAVATED 1969, 1972 AND 1978

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Summary

One adult female and two infant inhumations were excavated from the site of Beadlam Roman villa. The adult burial appeared to date to the demolition or post-demolition phases of the building rather than being contemporary with its occupation. Study of the remains suggested that the burial represented a deliberate interment within the demolition debris, not a corpse abandoned in the ruins nor (as had been suggested to account for the presence of an adult burial amongst demolition rubble at another Roman villa site) the death of an individual whilst taking shelter in the ruined building.

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Introduction To The Site

Three human burials (two infants and one adult) were excavated at the site of Beadlam Roman Villa. The adult bones were found in a somewhat disarticulated state among the demolition rubble in one of the rooms of the villa. One infant was buried in a shallow grave outside one of the villa buildings, the second infant was accompanied by a pottery vessel and was interred adjacent to the wall within a villa building. The burials probably date to the 4th century AD.

The Human Remains

Context: Burial LB/KV: disturbed adult inhumation in rubble layer on floor of Room 1, Site LB.

Material: Preservation moderate, approximately 70% of skeleton surviving.

Sex: Female (Brothwell 1981).

Age: 21-24 years (Workshop of European Anthropolgists 1980, - fusion of the illiac crest; Szilvassy 1980 - morphology of the sternal articular faces of the clavicles).

Stature: 173.3 cm (Trotter and Gleser 1952, reproduced in Brothwell 1981 - calculated from right ulna).

Dental Formula:

LEFT RIGHT

Key: - = Tooth and jaw missing post-mortem.
T = Part of jaw missing but tooth present.

Note: A small channel is present on the inferior surface of two thoracic vertebrae. These probably represent Schmorl's nodes. In younger individuals may be formed by the extrusion of material from the inner core of the intervertebral discs, as a result of severe spinal compression (Schmorl and Junghanns, 1971).

Both upper first incisors show severe attrition of their occlusal surfaces which contrasts with the minimal wear on the molar and premolars.

Context: Burial LM/M0 CX NE: infant inhumation accompanied by a pottery vessel within Building 8.

Material: Preservation good to moderate, approxiamately 90% of skeleton surviving.

Sex: Not possible to determine from infant remains.

Age: 36-38 weeks in-utero (Scheuer et al 1980 - long bone lengths).

Dental formula

Key: .=tooth present in jaw.

X = Tooth lost post-mortem but socket present.

U = Unerupted tooth.

Note: In addition to those teeth identified in the dental formula fragments of a first mandibular molar of uncertain side were also found.

Context: Burial Feature 33: infant inhumation to the east of Building 4.

Material: Preservation good, approximately 90% of skeleton surviving.

Sex: Not possible to determine from infant remains.

Age: 2-3 years (Massler et al. 1941 - development of deciduous dentition)

Dental formula:

Deciduous Dentition

5 4 3 2 1 1 2 3 4 5 5 4 3 2 1 1 2 3 4 5 5 4 3 2 1 1 2 3 4 5

LEFT

RIGHT

Keya

" = Tooth present in jaw.

- = Tooth and part of jaw missing.

T=part of jaw missing but loose tooth present.

Note:

A small foramen is present in the posterior part of the basilar occipital bone.

Clusters of pinhole like pits are present in small depressions on the endocranial surface of the skull either side of the frontal crest. These pits are formed by resorbtion of bone due to pressure from the 'cauliflower'—like pacchionian bodies. Pacchionian bodies are rarely present in individuals under three years of age; they are usually formed in the seventh year of life (Gray's Anatomy 1988). The pits are thus unexpected in an individual of this age. Also the grooves formed on the endocranial surfaces of the parietal bones by the middle meningeal arteries seemed to be unusually deep.

The normally cruciform junction present on the endocranial surface of the occipital bone, formed from the ridges of the superior longitudinal and lateral sinuses, is off-set laterally.

Dental enamel hypoplasia, identified by the presence of linear macroscopic depressions running transversely across the enamel of the tooth surface, is present on the newly formed permanent mandibular incisors. Hypoplasia is a structural defect resulting from disease or dietary stress during the development of the tooth (Goodman et al. 1980).

Conclusion

Two of the inhumations are infants, one aged 2-3 years and one aged only 36-38 weeks in-utero. The third inhumation is a female adult who died in her early twenties.

The average length of gestation is 38-41 weeks (Tanner 1989: 43), but after about 28 weeks the foetus is potentially viable and, given care, might on occasion survive, even in antiquity (Molleson 1993: 171). Thus the infant burial within Building 8 seems to be a slightly premature birth but it is not possible to determine whether it was stillborn or died during the immediate

post-natal period.

The adult burial was found amongst the demolition debris in Room 1 of the villa. Although no grave outline could be recognised on excavation, the burial was certainly not cut through the floor. It would thus seem to post-date the abandonment of the villa. The bones were found in a disarticulated state although most areas of the skeleton were represented and were in very approximate anatomical relationships with one another; the suggestion is then that this individual was originally interred in Room 1 as a complete body.

One possible explanation for the above observations is that, following abandonment of the villa, a corpse was disposed of in the ruined buildings (or perhaps an individual died whilst taking shelter there) and was subsequently buried by the collapse of the building as the villa fell into decay. This type of scenario was mooted to account for the finding of an adult burial amongst the demolition rubble at Rockbourne Villa, Hampshire (discussion in Anderson nd). In the present case this scenario seems unlikely. A corpse abandoned in a ruined building is almost certain to attract scavengers, however no signs of animal gnawing were present on the bones. Were a body lying on the surface for any length of time we might also expect more skeletal elements to be missing. The few teeth that are present are in good condition and large pieces of cancellous bone are present. Tooth enamel tends to fragment if exposed to the elements for any length of time and cancellous bone would not be expected to survive, hence this too argues against the body lying uncovered on the surface for any length of time.

A more likely explanation for the Beadlam adult burial is that it was made either in a grave cut into the layer of demolition rubble or that the corpse was laid on the rubble strewn floor of the ruined building and rubble and soil heaped over it. The burial was probably made fairly soon after the abandonment of the buildings in the late 4th century. Disturbance of the burial (which must have occurred after the soft tissues had decayed) was likely due of disturbance to the rubble within which it lay, perhaps due to people retrieving building materials from the ruined villa for re-use.

In addition to the adult skeleton discussed above some redeposited fragments of human bone were also found in the excavation of the villa. None of these seemed to derive from the Room 1 burial and they came from at least two adults. This suggests the presence of at least 2 further inhumations in the vicinity of the site.

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Appendix: Data for Individual Burials

Post-cranial Measurements

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Skel: LB/KV ROOM 1
LUIL1259.0
RUIL1260.0
RTiD1 29.0
RTiD2 22.0
RFeD1 27.0
RFeD2 34.0
RFeE1 74.0
LFeGi 42.0
LFeG1 42.0
Platycnemic index = 76\%
Platymeric index = 79\%
Skel: LM/MQ CX NE
LTiL1 62.0
RTiL1 61.5
LFiL1 59.0
RFiL1 59.0
LFeL1 73.0
RFeL1 73.0
LHuL1 62.0
RHuL1 63.0
LRaL1 48.0
RRaL1 48,0
LU1L1 56.0
RUILI 56.0
Skel: Feature 33
TiLI
                       137.0
TiD1
                        15.5
TiD2
                        14.0
Hul_1
                       132,0
LFeD1 13.0
RFeD1 13.5
LFeD2 14.5
RFeD2 15.0
Platycnemic index = 90\%
Platymric index = 90\%
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Key: FeG1 = Diameter of femoral head. All other symbols are taken from Brothwell (1981).
All measurements are in millimetres.