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An unusual case of prone position in the Punic/Roman Necropolis of Monte Luna in Sardinia (Italy): a multi-disciplinary interpretation of Tomb 27 --Manuscript Draft--

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Abstract:	Sardinia (Italy), noted for its wealth and strategic position, has been conquered through time by different populations and each one of them instilled their specific culture, ritual behaviour, and customs. Sometimes a clearcut distinction is evident between these cultures, while other times it is more of a natural progression with no marked moment of change evident. This study discusses a single grave from the Necropolis of Monte Luna, established by the Punics, with depositional chambers and pits carved on a rockhill in front of the city settlement (Acropolis). Among the 120 tombs, the finding of Tomb 27, a tomb that included a young woman (T27.2) buried in an atypical prone deposition, having disturbed an earlier burial (T27.1), a subadult around 15 years of age. T27.2 suffered two distinctive types of perimortem trauma, a possible diastatic blunt force trauma to the occipital bone and a small quadrangular-shaped lesion reminiscent of a Roman era square shaped nail. The grave goods allow a quite specific dating to the period of transition between Punic and Roman cultures. These, and other characteristics of the young woman's skeleton, are of significance in understanding funerary and cultural behaviour at the time of this transition.
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Rossella Paba Cover Letter

5th August 2022

To the attention of the editorial board of the Journal of Archaeological Science: Reports,

I am submitting this manuscript for consideration for publication in an upcoming issue.

The manuscript is entitled "An unusual case of prone position in the Punic/Roman Necropolis of Monte Luna in Sardinia (Italy): a multi-disciplinary interpretation of Tomb 27".

The Monteluna Necropolis in Sardinia shows the transition between the Punics and Romans while they were contesting the control over the Mediterranean basin. Among 120 tombs, one stood out for its unusual characteristics - it contained two individuals with a single set of funerary goods, and one of those individuals was buried in a prone position with evidence of multiple trauma. The individual buried face down was a young woman around 20 years old, with traumatic injuries to her right clavicle and two on the cranium, occurring, respectively, antemortem and perimortem. One of the cranial traumatic lesions, in the frontal bone, has evidence of a penetrating sharp force injury from an object of quadrangular section which resembles the Punic-Roman ritual nails.

The accurate application of anthropological analyses alongside detailed archaeological data and literature sources suggest an osteobiography of significance in understanding funerary and cultural behaviour at the time of Punic-Roman transition.

I declare that this study has not been published elsewhere and that it has not been submitted simultaneously for publication elsewhere. Furthermore, my co-authors and I have no competing interests to state.

Thank you very much for your consideration.

Yours Sincerely,

Rossella Paba

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An unusual case of prone position in the Punic/Roman Necropolis of Monte Luna in Sardinia (Italy): a multi-disciplinary interpretation of Tomb 27

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Highlights:

- Understanding past people's lives based on biological evidence, funerary behaviour, cultural material, and ancient literature
- Multiple traumatic lesions associated with prone deposition: an individual osteobiography
- An unusual Punic/Roman deposition: a population perspective
- Snapshot of the Punic and Roman passage of power over the Mediterranean Sea

Running head: UNUSUAL CASE OF PRONE POSITION IN PUNIC/ROMAN ERA

1 An unusual case of prone position in the Punic/Roman Necropolis of Monte Luna in Sardinia (Italy): a multi-disciplinary interpretation of Tomb 27 2 3 Paba, Rossella^{1,3,4}; D'Orlando, Dario², Willis, Anna³, Luglie³, Carlo¹, Domett, Kate⁴ 4 5 ¹ LASP – Laboratorio di Antichità Sarde e Paletnologia, Dipartimento di Lettere, Lingue e 6 Beni Culturali – Università degli studi di Cagliari, P.zza Arsenale 1, 09124 Cagliari, Italy 7 ² Università degli Studi di Cagliari, P.zza Arsenale 1, 09124 Cagliari, Italy 8 9 ³ College of Arts, Society, and Education, James Cook University, Townsville, Queensland, Australia 10 ⁴ College of Medicine and Dentistry, James Cook University, Townsville, Queensland, 11 Australia 12 13 ²Corresponding Author: 14 Paba, Rossella 15 16 ross.paba@gmail.com rossella.paba@unica.it 17 rossella.paba@my.jcu.edu.au 18 19 Phone: +39 3270442743 20 +61 439427284 21 22 23 24 Keywords: Bioarchaeology, Taphonomy, Prone position, Punic era, Roman era, Archaeology, 25

Pottery, Coins, Sardinia, Western Mediterranean

Sardinia (Italy), noted for its wealth and strategic position, has been conquered through time
by different populations and each one of them instilled their specific culture, ritual
behaviour, and customs. Sometimes a clearcut distinction is evident between these cultures,
while other times it is more of a natural progression with no marked moment of change
evident. This study discusses a single grave from the Necropolis of Monte Luna, established
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quadrangular-shaped lesion reminiscent of a Roman era square shaped nail. The grave
goods allow a quite specific dating to the period of transition between Punic and Roman
cultures. These, and other characteristics of the young woman's skeleton, are of significance
in understanding funerary and cultural behaviour at the time of this transition.

1. Introduction

44	In the last few decades, the highly detailed analysis of human skeletal remains, and the
45	people they represented, has seen a significant surge of interest (Buikstra and Beck, 2006).
46	The creation of individual osteobiographies of past people has provided a nuanced
47	understanding of individual lives, as well as adding data to the population perspective
48	potentially allowing larger social phenomena to be examined (Binford, 1971; Domett et al,
49	2016). Key to the understanding of past people's lives based on their biological evidence, is
50	the consideration of the context in which they lived, their social and physical environment,
51	and died - a truly bioarchaeological approach (Gowland and Knusel, 2006).
52	A re-examination of an old photograph of Tomb 27 (Figure 1), excavated from the
53	Punic/Roman Necropolis of Monte Luna (Senorbì) in Sardinia, stimulated the present study.
54	The photograph shows human skeletal remains in a prone deposition and surrounded by
55	grave goods. An individual buried in a prone position is often considered deviant (Murphy, E.
56	M., 2008, pp 12 - 17) if it is different than the norm for the period and/or populations on
57	which the examination is focused. It has been widely observed that, regardless of culture,
58	period and geographical area, humans tend to bury some individuals in their society in
59	particular ways, differentiating them in death from others. These usually reflect specific
60	circumstances such as an individual guilty of criminal behaviour, women who died during
61	childhood, and people affected by dangerous and inexplicable diseases or disabilities (Tsaliki
62	A., 2008). While each case reflects specific social and religious beliefs, they can generally be
63	interpreted as an apotropaic way to prevent the person's return from the world of the dead,
64	ensuring their permanent exile from the living community. There are testimonies from the
65	Roman age to Medieval times, both in Italy and in Sardinia (Piga et al., 2015; Quercia, A.,
66	Cazzulo, M., 2016), that provide a basis for understanding the case presented here, however,
67	there are some aspects that differ from the common profile of such deviant burials. The aim is
68	to examine all the available archival evidence, the current literature, alongside a detailed
69	archaeological analysis of the region, the time period and grave goods, and the biological data
70	from the skeletal remains themselves. All aspects may have relevance to the interpretation of
71	the symbolic behaviour useful to reconstruct a story of a single individual to understand the
72	ideology of the community that buried them.

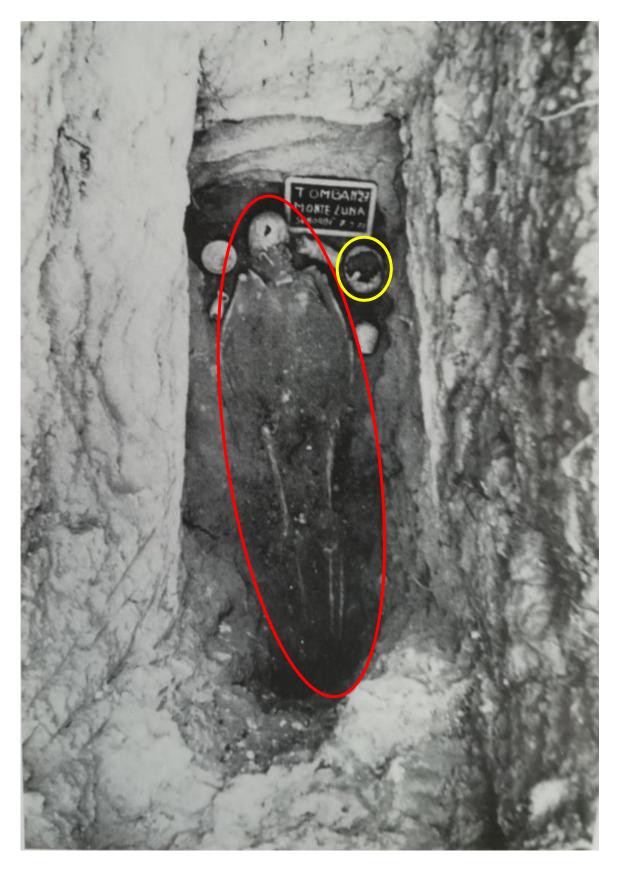


Figure 1 Tomb 27 (Costa, A. M. 1980, tab. XCIII). First layer of excavation exhibiting a prone deposition (red oval); in the right corner, representing a lower layer, is the cranium (yellow oval).

2. Archaeological context

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2.1 Geographic and historical background

79 The site of Monte Luna is in the central-southern part of Sardinia, near the city of Senorbì, which is 30 km north from Cagliari (Figure 2). The necropolis is thought to be linked to the 80 urban settlement of Santu Teru, a Punic-Roman city active from the 6th century BC until 81 mediaeval times, probably as a direct emanation of Cagliari (KRLY in Punic language and 82 Caralis/Carales or Karalis/Karales during the Roman phase). During the Punic phase KRLY 83 was possibly in charge of the entire area where the city of Santu Teru is located. In fact, this 84 settlement is linked to an agricultural economy managed by the city of KRLY under the 85 direction of the main Punic centre of the Western Mediterranean, Carthage. The city of Santu 86 Teru was possibly one of the main urban settlements linked to the management of cereal 87 production, probably wheat, for the Punic city of KRLY and it demonstrated a high level of 88 wealth, as suggested by the majestic funerary artefacts found in the Monte Luna necropolis 89 active from the end of the 6th century BC to the Roman Republican age (Todde, 2020). More 90 is known about the settlement of Santu Teru during the Republican and Imperial ages, 91 attested by an inscription (Forci, 2011) which states that the city was active during the first 92 Imperial age. Information regarding the Imperial age phases is disjointed and incomplete. 93 94 However, the city seems to have survived beyond the end of the Roman Empire dated to the 6th century AD as is evidenced by some Late Antique and mediaeval pottery (7th - 8th c. AD) 95 found near the site of the so-called *acropolis*. The *acropolis* was a place where some scholars 96 had hypothesised the existence of the mediaeval village attested by the agiotoponym of Santu 97 Teru, which is linked to a church related to the worship of Saint Theodorus that gives name to 98 the whole area (Costa, Usai 1990). 99

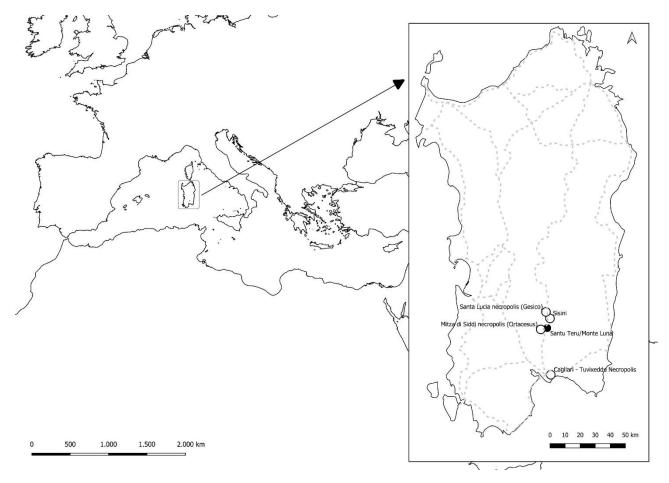


Figure 2 General map of South-East Sardinia (Italy) with the archaeological area of Monte Luna (Senorbì) and other main sites mentioned in the present paper. (Map: D. D'Orlando)

2.2 The necropolis of Monte Luna

The necropolis of Monte Luna (Figure 3) was investigated archaeologically during the late 1970s to the early 1980s by Antonio Maria Costa as *Ispettore onorario* (Honorary Inspector) for the local *Soprintendenza ai Beni Culturali* (Superintendent for Cultural Heritage). Only a portion of the necropolis was excavated but at least 120 tombs were partially documented, though there is a significant lack of contextual information recorded (Costa, 1980; 1983a; 1983b; 1983c; Costa, Usai 1990).



Figure 3 Aerial photography of Monte Luna at present. Red arrow indicates Tomb 27 (Aerial photo and planimetry: R. Paba)

During the investigation, Costa describes two different funerary areas. The first, Monte Luna, active from the 6^{th} - 2^{nd} century BC, located immediately in front of the hill of Santu Teru,

117	with its wealthy tombs and the second, the necropoli romana (Costa, Usai, 1990), a few
118	metres north-west from Monte Luna, which was active from the 2^{nd} - 1^{st} century BC until the
119	4 th - 6 th century AD. The original funerary area of Monte Luna is composed of chamber
120	tombs with an access pit similar to the ones used in the necropolis of Tuvixeddu in Cagliari,
121	pit-tombs, like Tomb 27, along with other types such as cist tombs and enchytrismoi (jar
122	burials) (Costa, 1983c). Some of the tombs, such as Tomb 87, also known as the tomba
123	principesca, suggests a number of the inhabitants of Santu Teru were wealthy as they were
124	buried with funerary goods including masterpieces of Magna Graecia jewellery (Usai, 1981;
125	Pisano, 1996). As to the rituals, there is evidence for both inhumation and cremation, but the
126	former is the more common rite (Costa, 1983c). The necropoli romana instead is little known
127	and only 10 tombs were excavated. This funerary area is composed of simple rectangular
128	graves and cist tombs and were probably in use after the necropolis of Monte Luna.
129	2.2 The archaeological framework of the Tomb 27
130	Tomb 27 is a pit-tomb (Figure 3) carved into the stone of the hill of Monte Luna. The
131	funerary artefacts found in this tomb include a pitcher, a balsamarium (ointment jar) of Punic
132	production, and a jug and cup of Punic Black gloss-ware, providing evidence of the
133	chronology of the deposition. Two coins and some glass beads that were part of a necklace
134	were also found (Figure 4).



Figure 4 Tomb 27 grave goods. (D. D'Orlando)

The pitcher may be an example of the last evolution of the Cintas 61 type vase, which dates to the 3rd-2nd century BC. One has clear similarities with some of the vessels from the necropolis of Tuvixeddu (Bartoloni, 2000, pp. 91) and could be considered to suggest a direct commercial, and perhaps cultural, connection between Cagliari and Santu Teru. The coins, one Sardo-Punic and one Roman emission overstruck on an earlier Sardo-Punic coin, are of particular interest (Hersch, 1953). The latter helps to date the context to between the last decade of the 3rd century BC and the beginning of the 2nd. Even more precise, from a chronological point of view, is the Punic Black gloss pottery cup, identified as a Lamboglia 28F/Morel 2648 form, dated from the end of the 3rd until the 2nd century BC (Morel, 1981, pp. 200-201). The funerary artefacts of Tomb 27 all confirm that the burial context dates from at least the last decades of the 3rd century BC but, given the presence of the other artefacts, a more precise chronology into the early 2nd century BC, perhaps from the very first decades, is suggested.

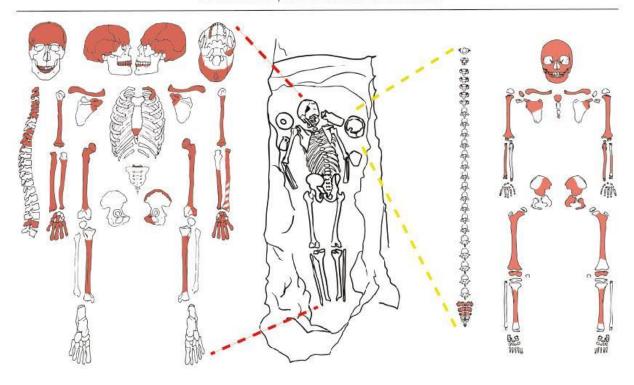
3. Anthropological setting

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The necropolis of Monte Luna contained 120 tombs with human remains recovered from 70 153 tombs. All the tombs were re-used, with two or more people in each, up to a maximum of 12 154 adults within one tomb. Interestingly, when subadults and young children are present in the 155 tomb, it was not re-used for more than one additional individual. Tomb 27 is located near two 156 analogous depositions, Tomb 25 and 28, that both, like Tomb 27, contain two individuals, 157 one adult female and one subadult, and in the case of Tomb 28 with the same genetic traits 158 and presence of grave goods. It is possible that within the necropolis, burials were localised 159 based on familiar lineage. There are multiple tombs with the same deposition of the bodies: in 160 the same stratigraphic unit, along the same line, and archived in the brief excavation 161 information as an adult male, an adult female, and one or more subadults, side by side. 162 163 Whether the people in this tomb are family, will hopefully be confirmed through DNA analysis in further studies. 164 Due to poor preservation and comingling of the human remains within tombs, the recording 165 of each tomb is undertaken in a systematic manner as follows: each element is sorted by 166 anatomical region and side, and, where possible, upper limb bones (humerus, radius and ulna) 167 are matched to an individual, as are lower limb bones (ilium, femur, tibia, fibula); for each 168 bone, morphology is described and measurements are take; then, following standard methods, 169 170 age-at-death and sex are estimated, and pathology and trauma are described (Buikstra and Ubelaker, 1994; White and Folkens, 2005; Schaefer, Black and Scheuer, 2009). 171 The minimum number of individuals (MNI), based on the same repeated element within 172 tombs, in the 70 tombs studied has been calculated at 226 adults over 15 years (Brothwell, 173 1981; Lovejoy, 1985) and 59 subadults between 1-15 years (Schaefer, Black and Scheuer, 174 2009). No subadults less than 1 year have been found, which suggests the possible presence 175 of a Tophet, a designated funerary area for unborn and newborn perinates, that was common 176 in Phoenician and Punic times (Xella, 2013). 177 3.1 Human remains from the Tomb 27 178 Given that the excavation diary was missing, the analysis of the 1977 excavation photograph 179 (Figure 1) was essential in understanding the deposition of Tomb 27. In fact, from the image, 180 it is possible to observe a deep grave (2.10 x 0.8 m) showing two distinct excavation levels. It 181 shows the prone deposition of one articulated skeleton which occupies the entire space of the 182 tomb located in the upper layer, and the location of another deeper deposition, a non-183

articulated skeleton in the upper right corner. Based on the articulated nature of the prone skeleton (ML_T27.2), it is evident that this individual was the secondary deposition, while the primary, now disarticulated, deposition (ML_T27.1), is the one in the upper right corner of the pit, evidenced in Figure 1 only by the crania; the postcranial remains were located under it. In support of these observations, iron oxide was found on both individuals: on the anterior proximal part of the humeral metaphases of ML_T27.2, and on the posterior aspect of the skull and the posterior aspect of the left humeral metaphysis of ML_T27.1, supporting the prone and supine position, respectively (Figure 5). Seventy-five per cent of the skeletal remains were recovered for both individuals.

Position and preservation of the remains



Paba, R.

Figure 5 Graphic representation of position and conservation of the human remains from Tomb 27. The yellow lines indicate the cranium around which was found the postcranial remains of T27.1. The preserved remains are indicated in the skeleton schema to the right. The red lines indicate the location of T27.2, found in the prone position, and represented by the preserved remains shaded in the skeletal diagram to the left. (Paba, R.).

201	
202	The primary deposition (ML_T27.1) was estimated to be aged 15 years +/- 3 years based on
203	tooth eruption and epiphyseal fusion. All second permanent molars were erupted, while the
204	crowns of the third permanent molars were only half formed and unerupted. In addition, non-
205	fusion is recorded at the proximal and distal epiphyses of both humeri, the right radius and
206	the left ulna; the acromion process is partially fused, and the coracoid is unfused in the right
207	scapula; the three bones of the pelvis are unfused; the unfused distal epiphysis of the right
208	femur is also present (Schaefer, Black and Scheuer, 2009). Sex was estimated through pelvic
209	and cranial morphology (Schaefer, Black and Scheuer, 2009), but given the very young age,
210	skeletal sexual dimorphism may not yet be fully developed, and this estimation awaits further
211	study, such as through enamel peptide analysis (Stewart et al. 2017).
212	The prone secondary deposition (ML_T27.2) was estimated to be a young adult female,
213	based on pelvic and cranial morphology (Buikstra and Ubelaker, 1994), aged between 18-22
214	years (Schaefer, Black and Scheuer, 2009). Age at death was estimated using a multifactorial
215	approach including dental eruption, dental wear, and epiphyseal fusion. The femoral head
216	femur and iliac crest were partially fused. Stature and weight were estimated respectively as
217	153.0 cm and 49.2 kg (median on a CI of 95% (Manouvrier, 1893; Pearson, 1899; Ruff,
218	2012). The stature and weight calculations used here are based on generic European
219	populations, as there are no formulae based on Italians, nor Sardinians. The mean stature of
220	the people buried in the Necropolis of Monte Luna, based on measurements of 32 adult long
221	bones is 157.27 cm for women and 160.62 cm for men.
222	3.2 Genetics factors
223	The cranial vaults of T27.1 and T27.2 both have a retained metopic suture and Wormian
224	bones at the intersection of the lambdoidal and sagittal sutures (Figure 6). These traits are not
225	common in the necropolis. In other calvaria with ossicles they are located in other places,
226	such along the sagittal suture, and not associated with metopism. These 'primary' discrete
227	traits (Buikstra and Ubelaker, 1994) in both individuals and in the aforementioned Tombs 25
228	and 28, suggest that there are family areas within the necropolis.



Figure 6 Evidence of metopism (Red arrows) and Wormian bones (Red circles) in T27.1 and T27.2 calvarium (Paba, R.).

The metopic suture usually closes by 2 years of age, though it can close later in childhood (Coppa, A., and Rubini, M., 1996) or adulthood (Zdilla et al. 2018). While some individuals with metopic sutures have been reported to have larger transverse, cranial dimensions suggesting this feature may be related to morphogenesis (Bolk, 1917; Schultz, 1929), this is not the case in T27 and T28 crania. Further support to a more genetic aetiology is the persistence of the metopic suture into adulthood, which can be hereditary and is more common in some ethnic groups than others (Berry & Berry, 1967). There are some external factors, such as frontal sinus abnormalities, or pathological conditions, such as hydrocephaly, that may also cause it to persist (Zdilla et al. 2018) but the above conditions are excluded in T27. In this case, according to the studies of Torgensen (1951) and Sjovold (1984), metopism is considered to be a hereditary trait.

Lambdoidal Wormian bones are the result of extra ossification centres, but their aetiology is not fully understood (Bellary et al., 2013). In some cases, they are a normal anatomical variation, associated with mechanical stress and the environment (Sanchez – Lara, 2007). For example, in some populations sleeping in a supine position places pressure on the occipital area that can lead to expansion of the occipital suture and brachycephaly (Sanchez – Lara, 2007). This can be excluded in the case of T27.1 and T27.2 because their skulls are not

250	brachycephalic. In other cases, Wormian bones may be related to specific pathology, such as
251	hydrocephaly or craniosynostosis, but these conditions are usually associated with numerous,
252	more than 10, and large, Wormian bones and arranged in a mosaic pattern and size larger
253	than 6 mm by 4 mm (Bellary et al. 2013). Other factors suggested to be correlated with the
254	development of Wormian bones include epigenetic factors, cranial deformation,
255	craniosynostosis, and premature suture closure, none of which are observed here. Other
256	conditions, such as additive polygenic complex or osteogenesis imperfecta may have
257	Wormian bones associated with them (Coppa and Rubini, 1996; Goto et al. 2004; Semler et
258	al. 2010; Bellary et al., 2013). Wu (2011) reported that geographic and ethnographic patterns
259	in frequency suggest a possible genetic basis, with a low frequency in Europe populations.
260	The presence of both these variations in both these individuals and the absence of mechanical
261	stress and cranial deformation, may suggest T27.1 and T27.2 were related to each other, but
262	further evidence, such as DNA, would be required to be certain.
263	Interestingly, in the necropolis the same condition is present in Tomb 28, although the female
264	adult (18-22 years old) has only a thin line of metopism, while the subadult (9+/-3 years old)
265	has a complete opening through the frontal bone up to the coronal suture similar to both
266	individuals in Tomb 27. The Tomb 28 individuals also have Wormian bones located in the
267	lambdoidal suture, with the same shape and number of ossicles (2).
268	3.3 Trauma
269	Individual T27.2, the young adult female, presents with multiple traumatic lesions (Figures 7,
270	8, 9), suggesting the presence of both antemortem and perimortem trauma.
271	There is a healed fracture in the midshaft of the right clavicle (Figure 7). Healing has resulted
272	in a thickened middle half of the clavicle. These types of fractures often occur in childhood
273	and typically result from axial, longitudinal compressive forces (Nunn et al. 1989) commonly
274	associated with a fall onto the shoulder or the outstretched hand, or from a direct blow to the
275	humerus, either of which could be accidental or the result of intentional violence (Blount
276	1955; Thornton and Gyll 1999).



Figure 7 Evidence of healed trauma in the midshaft of the right clavicle of T27.2. Superior view (A) with focus on the healed trauma in red rectangle, and posterior view (B), red arrow points at the trauma. (Lai, G.).

Two traumatic injuries are evident on the cranium, possibly occurring peri or postmortem. One triangular-shaped lesion, measuring 41 x 19 mm, is located on the inferior aspect of the left occipital bone, just posterior to the lambdoidal suture (Figure 8) inferior to the hat brim line which is not consistent with an intentional blow (Kremer, 2009). Endocranially, there is an 'exfoliation' of a bone flake (Figure 8D/E) which is commonly seen with blunt force trauma as the force moves from the external aspect, inwards (Wedel and Galloway, 2004). There is also evidence of two short radiating fracture lines out from the medial aspect of the

lesion usually associated with a moderate- or high-velocity impact on a common point (Kieser et al., 2014) (Figure 8B).

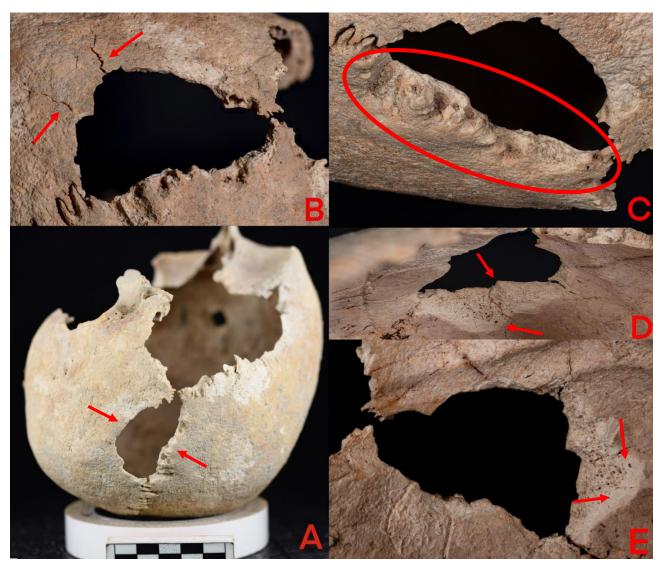


Figure 8 Evidence of occipital trauma on left lambdoid suture (A) (Paba, R.). B, C, D and E show a focus on the trauma. B and C focuses on ectocranial surface, red arrows point to the radiating fractures (B) and red oval to osteoclastic reaction along the lambdoid suture where has been hypothesized a disarticulation due to a diastatic fracture along the suture based on the supposed point of impact and the evidence in B. D and E shows endocranial perspective in which is possible to distinct weathering effect from remodelling thanks to the osteoclastic activity. Particular of the trauma from ectocranial point of view and red arrows to indicate radiating fractures (B-C). Endocranial visual of the trauma with weathering effect (red arrows in D-E). (Lai, G.)

This traumatic lesion is possibly a short radiation fracture along the suture, leading to a possible diastatic lesion which caused the left lambdoid suture, at the point of trauma, to disarticulate (White et al, 2012, p.434). This suggestion is supported by the observation that most of the other sutures (coronal, sagittal, and right lambdoid) are slightly more fused than

303	the left lambdoid (Buikstra and Ubelaker, 1994). In Figure 8C, it is possible to see where the
304	disarticulation has occurred as there is a change in the surface of the suture to a rounded and
305	pitted area possibly as a result of osteoclastic reaction within the first week of the trauma
306	(Barbian et al. 2008). There is taphonomic change along the margins of the trauma where
307	weathering and adhering soil has changed the colour and appearance, and the bone flake is
308	missing postmortem (Figure 8D/E). Considering the location of the lesion, the radiating
309	fractures, and the opening along the lambdoid suture, this is likely blunt force trauma either
310	from an object or a fall onto this area of the head.
311	The second cranial lesion was located on the right side of the frontal bone showing a
312	penetration from the outside inward (Figure 9). The shape (9.5 mm x 9.5 mm) of the lesion
313	suggests a sharp force injury was inflicted using an object with a quadrangular section
314	(Figure 9). Intentional trephination is unlikely as there are no associated cut marks extending
315	out from the lesion that would be consistent with the usual trephination practice in the Roman
316	Era (Tullo, 2010; Giuffra and Fornaciari, 2017). There is a depression and exfoliation around
317	the area of impact in the outer table due to the force of impact, and there is also bevelling of
318	the inner table edges of the lesion (Figure 9) (Barbian et al., 2008; Facchini et al. 2008;
319	Amadasi et al. 2016); both are characteristic of penetrating injuries with a highly localised
320	point of impact associated with considerable power (Wedel and Galloway, 2004). There is no
321	evidence of bone remodelling (Figure 9), suggesting this incident occurred perimortem
322	(Barbian et al., 2008). The shape of the lesion is similar to the cross section of ancient Roman
323	nails. These nails are a common object in Roman settlements excavations in Sardinia (Figure
324	10).

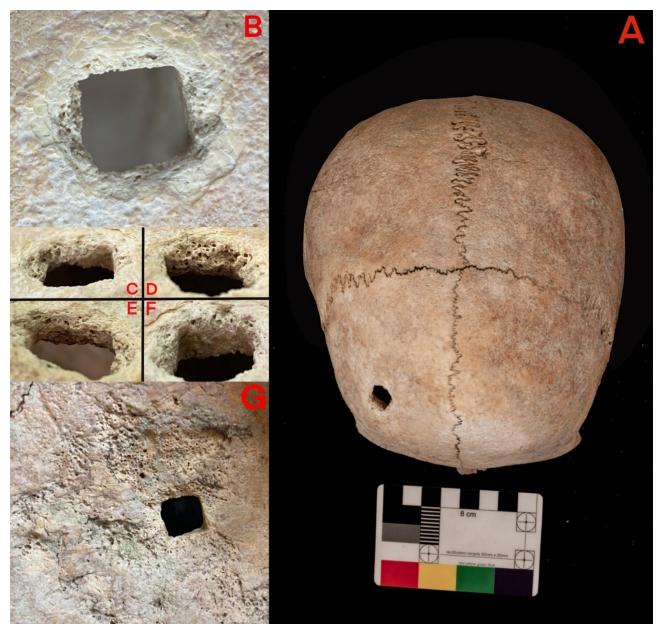


Figure 9 T27.2 skull. Evidence of frontal trauma and obliteration of the sutures are shown (A) (superior view) (Lai, G.). (B-G) Close up of the right frontal bone trauma. (B) ectocranial view of the trauma showing bone flaking. (C - F) close up of the internal edges of the trauma. (C) is the posterior side, (D) is the right side, (E) is the inferior and (F) the left. These edges show exposed diploë due to the trauma. (G) Endocranial view indicating bevelling of the inner table. (Paba, R.).

4. Discussion

The skeletal remains of T27.2, a young woman buried in a tomb at the Monte Luna necropolis, are noteworthy not only because of their unusual prone position, but also for the presence of perimortem trauma. The necropolis, and the people buried within it, is of significant interest from a cultural perspective as it provides an insight into a critical period of transition from the Punic to the Roman dominion for the city of *Santu Teru*.

337	The trauma and its cultural significance
338	T27.2 presents with multiple traumatic lesions, one healed fracture of the right clavicle and
339	two cranial, possibly perimortem, lesions.
340	The cranial lesions are in the posterior aspect of the lambda suture in the occipital bone and
341	on the right frontal bone. The occipital lesion (Figure 8) is typical of blunt force trauma most
342	likely from a direct force such as from a fall, landing on the back of the head. Intentional
343	cranial trauma is often associated with multiple traumatic lesions, often including facial
344	trauma, and the lesions often occur on the left side (Guyomarc'h et al., 2010). T27.2 does
345	have trauma on the left side and has another cranial trauma on the frontal bone, however this
346	lesion does not fit the typical pattern of interpersonal violence-related trauma. In addition, the
347	posterior fracture is within the 'hat brim line', suggesting the lesion is most consistent with an
348	injury sustained from a fall (Kremer et al., 2009). It cannot be discounted, however, that the
349	woman has fallen after being intentionally pushed.
350	The lesion on the right frontal bone, as discussed above, is quadrangular in shape and is
350 351	The lesion on the right frontal bone, as discussed above, is quadrangular in shape and is typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016;
351	typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016;
351 352	typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016; Facchini et al. 2008). The distinctive shape of this perimortem lesion is reminiscent of the
351 352 353	typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016; Facchini et al. 2008). The distinctive shape of this perimortem lesion is reminiscent of the square-shaped cross-section of nails commonly used in Roman times. Such nails can be
351 352 353 354	typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016; Facchini et al. 2008). The distinctive shape of this perimortem lesion is reminiscent of the square-shaped cross-section of nails commonly used in Roman times. Such nails can be directly compared to those found in the coeval and nearby site of Sisini (D'Orlando, 2019)
351 352 353 354 355	typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016; Facchini et al. 2008). The distinctive shape of this perimortem lesion is reminiscent of the square-shaped cross-section of nails commonly used in Roman times. Such nails can be directly compared to those found in the coeval and nearby site of Sisini (D'Orlando, 2019) (Figure 10). The Sisini nail has a cross-section of 7.5 mm x 7.5 mm, which, considering the
351 352 353 354 355 356	typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016; Facchini et al. 2008). The distinctive shape of this perimortem lesion is reminiscent of the square-shaped cross-section of nails commonly used in Roman times. Such nails can be directly compared to those found in the coeval and nearby site of Sisini (D'Orlando, 2019) (Figure 10). The Sisini nail has a cross-section of 7.5 mm x 7.5 mm, which, considering the taphonomic changes, is consistent with the measurement of the trauma (9.5 mm x 9.5 mm).
351 352 353 354 355 356 357	typical of penetrating (sharp force) injuries (Wedel and Galloway, 2004; Amadasi et al. 2016; Facchini et al. 2008). The distinctive shape of this perimortem lesion is reminiscent of the square-shaped cross-section of nails commonly used in Roman times. Such nails can be directly compared to those found in the coeval and nearby site of Sisini (D'Orlando, 2019) (Figure 10). The Sisini nail has a cross-section of 7.5 mm x 7.5 mm, which, considering the taphonomic changes, is consistent with the measurement of the trauma (9.5 mm x 9.5 mm). The nail length is 103 mm and this helps to exclude the possibility that the nail exited at the



361 362

Figure 10 Nail from Sisini. (Lai, G.).

363

364

The burial archaeology

Tomb 27 is a pit-tomb carved in the stone of the hill of Monte Luna. The funerary artefacts 365 include burial objects from a transition phase between Punic and Roman cultures that date 366 back to the Mid-Republican period of the Sardinian timeline. Based on the contemporary 367 presence of the overstruck coin and the Punic Black gloss pottery cup, Tomb 27 is dated into 368 the 2nd century BC perhaps from the first decades of the 2nd century BC. 369 370 The funerary artefacts also suggest that there was a widespread shared culture in the rural landscape of Cagliari and its hinterland during the Punic-Roman ages. A locally made 371 balsamarium (ointment jar) found in Tomb 27, is similar to a form commonly found in the 372 Tuvixeddu necropolis (Bartoloni 2000, p. 91) and in the Santa Lucia funerary area (Gesico, 373 SU) (Tronchetti 1996, pp. 999-1000) (Figure 1). 374 375 The entire funerary context of Tomb 27, including the placement of objects in the tomb, is more typical of a single deposition, rather than two interments. As supported by the findings 376 in the nearby necropolis of Mitza di Siddi, in which the number of artefacts in singular 377 depositions in Tombs 67 and 113 (same chronology as the Tomb 27 of Monte Luna) (Cocco 378 379 2009, pp. 60-63; 80-83) is similar to the number of artefacts in Tomb 27, it is possible to hypothesise that the prone individual, T27.2, may have been interred without any objects. As 380 such, T27.2 may exhibit further evidence of deviancy (Shay, 1985). Therefore, there are 381

382	multiple lines of evidence to support the case of Tomb 27 representing an unusual funerary
383	rite: the prone position of the body, the perimortem cranial trauma, and the lack of artefacts.
384	Ethnographic sources suggest a wide range of reasons for the prone deposition of an
385	individual including as punishment for a perceived fault. For example, the Merovingian King
386	Pepin "asked to be buried face down for the sins of his father" (Taylor, A., 2008, cited in
387	Gilchrist and Sloane, 2005, p. 154). But perhaps the most common explanation is related to
388	necrophobia, mostly associated with a fear that the corpse could disturb the living (Tsaliki
389	A., 2008). These transcultural superstitions across the Mediterranean region were linked to
390	witches, werewolves, vampires, and other mythical creatures (Quercia A., Cazzulo M., 2016)
391	Atypical burial rites have also been associated with contagious diseases and epidemics in
392	antiquity (Tsaliki A., and Taylor, A., in Murphy, E. M., 2008, pp. 18-32; 102-123). For
393	example, <i>Pliny The Elder</i> , in <i>Naturalis Historia</i> (AD 77), describes a connection between a
394	cross-eyed person and beliefs about an evil eye. This led to Romans' beliefs around other
395	misunderstood diseases such as epilepsy, or so called morbo sacro, that was previously
396	described by Hippocrates of Coos (5 th century BC) in one of the first scientific treatises
397	written on the topic (Hippocrates, <i>De Morbo Sacro</i> , 4). The disease was thought to include a
398	powerful element of impurity both for the individual and for their community since they
399	believed that epilepsy was contagious. For this reason, the treatment of the victims was
400	mostly related to a purification rite dedicated to the divinity responsible for the sickness.
401	Pliny the Elder wrote in the 1st century AD, that if a person died from an epileptic seizure
402	it was suggested to nail the part of the body in which the trauma began to prevent the
403	diffusion of the disease, miasma, into the community (Pliny the Elder, Naturalis Historia, 28
404	17, 63) and requires purification.
405	This raises the possibility that the frontal bone lesion in T27.2 was created by a ritual nail,
406	though not necessarily left in the tomb, as other sacred nails usually are as attested in
407	religious contexts elsewhere in the Mediterranean. Sacred nails are usually marked with
408	sacred symbols indicated as <i>charakteres</i> , letters and signs inscribed on a magic object, which
409	are common in Graeco-Egyptian, Judeo-Christian, and other religious practices (Bevilacqua
410	2001). Such sacred objects were associated with auspicious and apotropaic functions. Nails
411	were a powerful symbol in ancient times usually associated with the concept of defigere,
412	meaning to fix down or fasten something. In a religious context, these objects are linked to
413	specific rituals. The ritual of the <i>clavum figendi</i> (to nail) was used to celebrate recurring or

414	official events, such as the foundation of a temple or the beginning of a new year. They are
415	linked as well to the tabulae defixionum, curse tablets (usually made of lead), which were
416	pierced by nails and hidden in places near to the underworld such as necropolises or wet
417	places as the water was a useful medium to link the living and the dead (Dungworth, 1998).
418	The practice described by Pliny is clearly linked to the power attributed to nails, which could
419	prevent or avoid a particular occurrence (Bevilacqua 2001, p. 133). The use of a ritual nail on
420	a person usually occurred after death, however it is difficult to be certain that the perimortem
421	frontal lesion in T27.2 occurred just before or after death, such is the nature of perimortem
422	injuries.
423	One such hypothetical explanation for T27.2 may be that they were suffered a series of
424	epileptic seizures that could have first resulted in the clavicle fracture. A subsequent seizure
425	may have led to the blunt force trauma to the occipital bone, perhaps occurring as the woman
426	fell or knocked their head against something hard. In fact, as presented in contemporary clinic
427	literature, people affected by epilepsy are three times more likely to injure themselves and
428	among the most common types of injury (that might be seen on a skeleton) are head injuries,
429	fractures, and dislocations (Nguyen et al., 2009; 2013; Camfield et. al., 2015). The blunt
430	force trauma after an epileptic seizure may have been the cause of death and the sharp force
431	trauma was inflicted around this time to prevent the miasma associated with the epilepsy
432	spreading to the community.
433	Prone burials are also sometimes carried out on people who have committed particularly
434	harsh crimes (Tsaliki A., and Taylor, A., in Murphy, E. M., 2008, pp. 18-32; 102-123). This
435	is deemed unlikely in this case, based on the evidence that T27.2 was buried in another
436	person's grave, possibly a relative (based on epigenetic factors), within the community
437	necropolis and not an outcast.
438	
439	Conclusion: Tomb 27 and its wider significance
440	The bioarchaeological analysis of a single tomb in the Monte Luna necropolis, Tomb 27, has
441	detailed some striking possibilities around life and death and the cultural perception of these
442	during a period of significant cultural change from Punic to Roman. While, it is clear that
443	T27.2, a young woman, suffered perimortem cranial injuries, the sequence of events and
444	cause of these injuries is not conclusive but give clues and raise the possibility of a significant
445	perimortem funerary rite associated with disease, a nail, and prone burial. This highlights the

446	potential superstitious nature around death most similar to Roman Era culture, suggesting that
447	Roman cultural practices had already been put in place at this early stage of the transition
448	from Punic to Roman culture. Such analyses can focus on the nuances of life in the past,
449	closer to the day-to-day realities of people in past communities in contrast to the larger scale
450	histories of empires and battles.
451	
452	CRedIT Declaration
453	Paba R. : Conceptualization, Methodology, Formal analysis, Investigation, Visualization,
454	Writing - original draft, Writing -review & editing.
13 1	
455	D'Orlando D. : Conceptualization, Methodology, Formal analysis, Investigation,
456	Visualization, Writing - original draft, Writing -review & editing.
457	Willis, A.: Writing -review & editing.
458	Luglie', C.: Methodology, Review
459	Domett, K. : Conceptualization, Analysis, Writing -review & editing.
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