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The measurement of open apices of teeth to test chronological age of over 14-year olds in living subjects

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Abstract

Age determination in living subjects is a problem of increasing interest in our community, due to the increasing numbers of individuals without identification papers, who have immigrated illegally or committed crimes, and for whom it is necessary to verify whether they have reached the age of 14 years in order to be charged legally.

Although the most widespread methods for age estimation refer to skeletal or dental analysis, these methods do present some drawbacks for identification of the age of 14. The aim of the present study was to discriminate between children who are or are not 14 years of age or older by measuring the open apices of teeth.

We evaluated the OPGs of 447 persons aged between 12 and 16 years, of Italian, Croatian and Slovenian nationality. For each individual, dental maturity was estimated using the number of the seven left permanent mandibular teeth with root development complete, and normalized measurement of the open apices of the third molar.

The results revealed that an individual is considered to be 14 years of age or older if all seven left permanent mandibular teeth have closed apices and the normalized measurement of open apices of the third molar is lower than II.

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Keyword - Forensic odontology; Age estimation; Third molar. Open apices of teeth

1. Introduction

The need to determine the age of living individuals is a problem of increasing interest in our community, due to the progressively higher number of persons not in possession of any document of identity or whose birth certificate may be suspected to be wrong, who have immigrated illegally or committed crimes, whose real age must be known in order to decide whether they can be charged, and whether they should be subjected to trial as of age or at least 14 years old. Also in cases of adoption, it is sometimes important to assess age when no birth certificate is available. In the last few years, therefore, forensic medicine has shown increasing interest in this problem

and in the reliability of methods for assessing biological age.

During the growth of a person, skeletal, odontological, anthropological and psychological methods allow an approximate assessment of age. Among the methods most frequently used for skeletal assessment are those concerning the left hand—wrist area 161 and FELS [71], which can produce estimates up to the age of 16 years, at which time wrist maturation is complete in 90% of subjects.

Numerous odontological studies have also been carried out to establish age, assessing mineralization within acceptable error limits.

The most common method for dental age assessment was first published by Demirjian et al. [81] and since then odontology has carried out numerous studies in this issue.

Nevertheless, to the best of our knowledge, few papers were addressed to assess if an individual is at least 14 years old. Since

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60
 61 it is a cut-point more and more important in forensic sciences in
 62 order to decide if a children can be charged legally, the purpose
 63 of the present study was to examine the open apices of the teeth
 64 in discriminating; between children who are or are not 14 years
 65 of age or older. If a child is younger than 12 or older than 16
 66 years of age there are many different and reliable techniques to
 67 assess that he/she is or is not younger than 14 years of age. For
 68 instance, taking into account the results in [10,21], it is easy to
 69 assess for a children older than 16 years that he/she is older than
 70 14 years of age. Furthermore, using the regression formula
 71 found in Cameriere et al. [11] it is possible to estimate that
 72 when all apices are closed a child is almost sure older than 12
 73 years (the probability that a child is younger than 12 years is
 74 less than 1%). Consequently, we considered children aged from
 12 to 16 years old as our target population.

2. Materials and method.

2.1. Subjects and materials

77 Onhopantomograms (OPGs) of 447 persons aged between 12 and 16 years.
 78 of Italian, Croatian and Slovenian nationality, were evaluated (Table 1).
 79 Subdivision according to sex was similar, with 47% females and 53% males.
 80 Selection criteria for inclusion of OPGs in this study were: Caucasian origin; all
 81 teeth on the right lower jaw present; no obvious dental pathology on panoramic
 82 radiology related to lower jaw, tilted third molar. Only 21 (5.9%) of the
 83 447 OPGs examined, in which these criteria were not satisfied, were excluded.
 84 To discriminate between individuals who are or are not aged 14 years or
 85 more, we analysed the apical ends of the roots of the seven left permanent
 86 mandibular teeth of each individual. Briefly, for each individual, we considered
 87 the following measures: (1) number of the seven left permanent mandibular
 88 teeth with not development complete, apical ends of roots, completely closed
 89 (NO) and dichotomous variable C (with C = 1, all seven left permanent teeth
 90 had completely closed apices; C = 0, if at least one tooth had its apices not
 91 completely closed) and (2) third molar maturity index (DIM), i.e., sum of the
 92 distances between the inner sides of the two open apices when roots were
 93 developed; then DIM was obtained dividing crown length by tooth length
 94 of highest cusp II I
 95 Dental maturity was evaluated using the third molar maturity index DIM and
 96 the dichotomous variable C.

2.2. Statistical analysis

98 All measurements were carried out by two observers. In order to evaluate
 99 intra- and inter-observer reliability, the two observers made repeated measures
 100 of 30 OPGs at an interval of 2 weeks.
 101 The intra- and inter-observer reproducibility of the sum of the distances
 102 between the inner sides of the seven apices divided by the tooth length (DIM)
 103 was studied using the concordance correlation coefficient, ρ_c , and κ statistics
 104 were used to measure the intra- and inter-observer reproducibility of the number
 105 of the seven right permanent mandibular teeth with root development complete
 106 (No).
 107 Using individual age as a dichotomous response variable $IF = 1$ if an
 108 individual is at least 14 years of age, $F = 0$ otherwise), and gender, nationality.

Table 1
 Countries distribution of the sample

Country	Females	Males	Total
Italy	84	85	69
Croatia	73	73	146
Slovenia	54	78	132
Total	211	236	447

Table 2
 Age and sex distribution of the sample

Years	Females	Males	Total
2	43	66	109
13	46	41	87
14	53	50	103
5	30	33	63
16	40	45	85
Total	212	235	447

109 C. and DIM as predictor variables, we derived a generalized linear model to
 110 predict whether an individual is older ($IF = 1$) or younger ($IF = 0$) than 14 years
 111 of age by using a logistic model as link function.

112 The predictive accuracy of the model was assessed by the determination of
 113 receiver operating characteristic curve (ROC curve).

114 All the significant variables were used to test the medico-legal question of
 115 whether an individual is older or younger than 14 years of age. The test was
 116 performed identifying a threshold (cut off) that can be used to assign an
 117 individual to the population of the younger ($T=0$) or older ($T=1$) than 14
 118 years of age.

119 Sensitivity of Less (i.e., the proportion of children equal to or Older than 14
 120 years of age, which verifies event $T=1$) was evaluated, and also its specificity.
 121 (i.e., the proportion of individuals younger than 14 years of age that verify the
 122 event $T=0$)

123 Open apices in teeth may be... dissimulating between children who are or
 124 are not aged 14 years or more, by using the post-test probability of being 14
 125 years of age or more (i.e., the proportion of individuals aged 14 or over in whom
 126 even $F = 1$ is verified). According to Bayes' theorem, post-test probability may
 127 be written as

$$P_t P_a + (1 - p) Z R I_{pa} \quad (2.1)$$

128 where p is post-test probability and j_{p_0} is the probability that a child is equal to or
 129 older than 14 years, given that he/she is aged between 12 and 16 years which
 130 represents our target population. This probability, p_t , was evaluated using the
 131 data obtained from the statistical offices of Slovenia, Croatia and Italy [12].
 132 Since sensitivity and specificity, the determinants of post-test probability of
 133 being aged 14 years or more, were unknown probabilities, they were estimated
 134 using our sample subjects. Consequently, post-test probability in Eq. (2.1)
 135 became a sample statistic subjected to random error. Thus, confidence intervals
 136 were used to describe its uncertainty.

137 The expression of the asymptotic $(1 - \alpha)$ percent confidence interval for the
 138 post-test probability estimate may be written in terms of the estimates of adult
 139 subjects, sensitivity, specificity and their corresponding sample size, as follows:

$$[1.1 - p \exp(j^2)]^{1/2} +$$

$$\frac{-P_i - P_2}{\sqrt{PL} \sqrt{2U - p_i}}$$

140 where n_0 is the sample size, and n_1 and n_2 are the numbers of individuals who are
 141 or are not aged 14 years or more. Statistical analysis of data and related graphs
 142 was carried out with S-PLUS 6 statistical program (S-PLUS 6.1 for Windows
 143 Professional Edition Release 1) and the Microsoft Excel program. The
 144 significance level was set at 5%.

Results

145 For the number of the seven right permanent mandibular
 146 teeth with root development complete (NO), we did not observe
 147 any disagreement between two measurements made by the
 148 same observer, i.e., $\kappa=1$.

154 Inter-observer reproducibility of N_o was good with Cohen's
 155 ,c statistics (\pm S.D.) at ,c = 0.93 + 0.07, indicating no significant
 156 inter-observer differences.

158 As regards the reproducibility of DIM measurements (sum of
 159 distances between inner sides of two open apices divided by
 160 tooth length), the estimated concordance correlation coefficient
 161 (\pm S.D.) was $P_c = 0.966 \pm 0.0005$ for observer 1, $p = 0.964 \pm$
 162 0.0035 for observer 2, and $p = 0.956 \pm 0.0076$, when the
 163 measures of both observers were compared.

164 Inter-observer reproducibility of DM did not reveal
 165 significant intra- or inter-observer effects, indicating substantial
 166 homogeneity of evaluation between operators.

167 From the data at our disposal, it is inferred that, in 5.9% of
 168 the subjects examined, the third molar on the right lower jaw
 169 was not present.

170 For the remaining 94.1% of the data, we studied the extent to
 171 which the age of 14 years or more of an individual ($F = I$) is
 172 related to the maturation degree of the third molar ($D3M$), the
 173 dichotomous variable C , gender (I for male and 0 for female)
 174 and nationality of the children.

175 Let $P(F = I)$ the probability that the an individual is at
 176 least 14 years of age, we modeled the dependence of this
 177 probability on $_{O3M}$, C , gender and nationality using a linear
 logistic model:

$$\text{logit}(p) = b_0 + b_1 \text{nationality} + b_2 \text{gender} + b_3 C + b_4 D3M. \quad (3.1)$$

180 To examine the effect of including one of the four factors in, or
 181 excluding it from the model, we considered the difference in
 182 deviance between two nested models (ihle 3).

183 The change in deviance on adding the variables nationality
 184 and gender to a model that includes a constant term alone (null
 185 model) was not significant.

186 Instead, when C or $_{O3M}$ were added to the null model,
 187 the deviance was reduced by highly significant amounts
 188 ($p < 0.001$).

189 In summary, the probability that an individual is aged 14
 190 years or more depends both on the dichotomous variable C
 191 which is related to the number of the seven left permanent
 192 mandibular teeth with root development complete and to the
 193 maturation degree of the third molar $_{O3M}$, but it does not
 194 significantly depend on gender and nationality. Hence Eq. (3.1
 can be rewritten as

$$= I + e_{-o} * b_1 C b_2 ThM \quad (3.2)$$

Table 3
 Deviance on fitting the considered linearinsists to the data

	di	Dcv resod.	d.f.	Deviance	p
Null	-	-	425	582.6	-
Nalioaalitv	1	1.6	424	581.0	0.20
Gender	1	0.!	423	580.9	0,71
C	1	3210	422	257.8	
OJM	1	163	421	241.5	0.001

Toms were added sequentially (first to last).

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Table 4
 Parameter estimates for logistic model i 42)

Parameter	Value	SE.	s-Value
Intercept	0.308	0,530	0,581
C	4.233	0,367	11.527
DIM	-2.190	0,544	-4.03

196 The maximum likelihood estimates of the model parameters
 197 (Table 4) evaluated the probability that an individual was equal
 198 to or older than 14 years of age, p , given the values of the factor
 199 C and covariate DiM through the logistic model (3.2).

200 The predictive accuracy of Eq. (3.2) and its discrimination
 201 capacity was also assessed by determining the ROC curve
 202 by classification matrices for different levels of predicted
 203 probability that an individual is of age. The resulting ROC
 204 curve (Fig. I) has an area under the curve (\pm S.D.) of $0.814 \pm$
 205 $0,021$ -

206 To test the legal question of whether an individual is older or
 207 younger than 14 years of age, a procedure had to be identified,
 208 such that an individual is assigned to the population of
 209 the younger than 14 years of age if the test is resulted negative
 210 ($T = 0$) and to the older population if the test is resulted positive
 211 ($T = I$).

212 For forensic purposes, it is important that the test shows a
 213 low proportion of individuals younger than 14 years of age
 214 whose test is resulted positive ($T = I$), and so it seemed
 215 appropriate to pay more attention to the chance of a false
 216 positive than to that of a false negative.

217 On these grounds, we established that an individual is
 218 considered equal or older than 14 years of age (the test is
 219 positive, $T = I$) if $C = I$ and DiM is lower than $DM =$
 220 otherwise an individual is considered younger than 14 years of
 221 age (the test is negative, $T = 0$).

222 The sensitivity of this test (the proportion of individuals
 223 being older or equal to 14 years of age whose test is positive)
 224 was 81%, and its specificity (the proportion of individuals
 225 younger than 14 years of age whose test is negative) was 95%.
 226

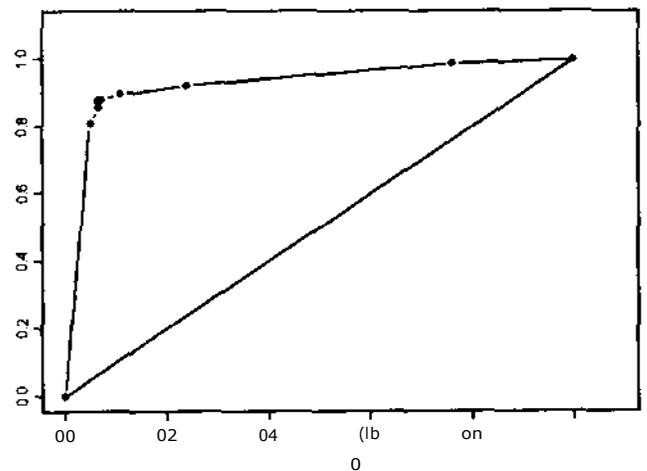


Fig. I. Receiver operating characteristic curve for "14 year of age or older" status.

Table 5
Classification (table describing discrimination performance of the test)

	Age		Total
	<14	>14	
T=0	175	46	221
T=1	9	96	205
Total	184	242	426

Table 6
Distribution of the age for gender and test

Gender	I	Age						Total
		2	13	14	15	16	17	
F	0	0.21	0.15	0.04	0.03	0.00	0.47	
	I	0.00	0.03	0.22	0.11	0.12	0.05	0.51
Total F		0.21	0.21	0.16	0.13	0.15	0.05	1.00
M	0	0.25	0.14	0.06	0.02	0.01	0.52	
	I	0.00	0.02	0.15	0.13	0.14	0.08	0.48
Total M		0.28	0.16	0.21	0.15	0.15	0.04	1.00

226
227 The proportion of individuals with correct classifications was
228 87% (Table 5),

229 In the sample, estimated post-test probability p was 0.96.
230 with a 95% confidence interval, CI = (0.93, 0.98). Hence, the
231 probability that a subject positive on the test (T = I) was equal
232 or older than 14 years of age was 96%. Consequently, the test
233 yielded only 4% of false positives.

234 When subjects of 12 years of age were examined, using this
235 test, no subjects were estimated as older than or equal to 14
236 years of age. In addition, when subjects of 13 years of age were
237 examined, the test estimated only 2% of both males and females
238 as older than 14 (Table 6). Furthermore, when subjects of 16
239 years of age were examined, none of them were estimated
240 younger than 14 years of age.

4. Discussion

241
242 The need for effective and reliable scientific methods to
243 determine age, particularly adult and over age of 14 years old,
244 within a specific population has become increasingly important
245 in resolving court cases. Since the methods usually applied for
246 dental age estimation guarantee an error in estimated age of less
247 than 2 years [18, 15, 16], to estimate the post-test probability and
248 prevalence of subjects older than 14, we chose young people
249 aged between 12 and 16 years old as a target population.

250 Our results showed that the test is not significantly
251 dependent on the nationality (Croatian, Italian and Slovenian)
252 of the children neither to their gender while it depends on the
253 maturation degree of the teeth.

254 In this paper, our test estimates that a subject is older than 14
255 years of age if all the teeth, except the third molar, have closed
256 apices (and fully grown) and the maturation degree of the third
257 molar, D_3 , is equal or lesser than 1.1.

258 When the suggested test was applied, the percentage of false
259 negatives was 19% and the percentage of false positives was

5%. From a forensic point of view, the small percentage of false
positives is particularly important, because it is a more serious
error to consider a subject younger than 14 as chargeable than
the error which does not consider a subject older than 14 as
chargeable.

Our results confirmed that, if the root apices of the seven
teeth in the right lower jaw of a child are completely closed, and
the ratio of the sum of third molar root apices divided by tooth
length is lower than 1.1, then there is a high probability that the
subject is indeed at least 14 years of age. In fact, the estimated
probability that a child with $C = I$ and $D_3M < 1.1$ has reached
14 years of age is $p = 0.96$.

In Cameriere et al. [17] we analysed a technique to assess
biological growth and age in children and adolescents using the
wrist/hand area method. Ossification of the carpals showed
good agreement with chronological age, and their mineraliza-
tion lasts until the age of approximately 14. For this reason,
analysis is in progress to assess the age of boys and girls in the
12-16 age bracket using a combination of carpal bone and tooth
growth information.

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