

# CAT. 9. Mummy of Petisis

IMPACT ID: IMP00102

Institution: Leiden University

Designation: 9

Date of Acquisition: 1828

Contact: Dr. Maarten Raven (r.rave@rmo.ml)

Image Modality: CT

Country: Egypt

Site: Thebes (?)

Time Period: Late Period

Dynasty: 25th

Date: 710-680 BC

Sex: Male

Age: 40-47

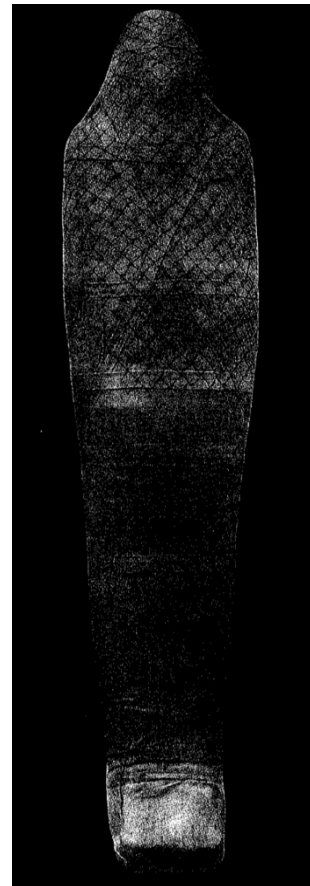


Figure 1.0 depicting the full body and wrappings of Petisis (Raven et al., 2005; 116)

## Background:

The mummy entitled Petisis has been categorized as a 40-47 year old male (Raven et al., 2005). Leiden University obtained Petisis in 1828 from G. d’Anastasi. Associated with the mummy itself, were three painted wooden coffins. These coffins were inscribed with the following, “for the porter of the domain of Amun on the second phyle Petisis, son of the *mi-nn* Pakharenkhonsu, the son of the *mi-nn* Payfkharu, the son of the *mi-nn* Mamiu, whose mother is Ta(net)pepiu (Raven et al., 2005). The examination of the coffins led the authors to conclude that the mummy most likely originated from Thebes, and has been dated to the 25<sup>th</sup> Dynasty (710-680 BC) (Raven et al., 2005).

### Pathological features:

In terms of the mummy's linen wrappings, the front as well as the sides are covered in linen that appears pink but was most likely red at some point (Raven et al., 2005). In addition to this, there is a sheet of linen which has been knotted in various places and dyed green, which has been sparsely preserved (Raven et al., 2005). The mummy's skin itself has been coated in resin, this coating is very irregular, and as the authors note, it is especially irregular around the skull (Raven et al., 2005). Artificial eyes and rolls of linen were used to fill the eye orbits, the artificial eyes appear to have a metal consistency (Raven et al., 2005). Finally, the authors note that no artifacts were found within the wrappings or the body itself.

The skull appears to be intact and has an overall normal thickness. With that being said, the diploë is not well observed (Raven et al., 2005). In relation to age determination, the coronal and lambdoidal sutures both exhibit sharp edges, furthermore, an impression of the middle meningeal artery is also detectable (Raven et al., 2005). Brain removal occurred from the left nostril, this was determined based on the fact that the left side of the ethmoid has been destroyed (Raven et al., 2005). Only dural remains and bone fragments from the skull or ethmoid are present within the skull (Raven et al., 2005). The oral cavity has been heavily packed with linen, so much so that it pushes up against the cervical spine (Raven et al., 2005). The teeth themselves, are in a rather harsh condition and several pathological conditions are apparent. To begin, several teeth are missing, there is severe attrition, and multiple periapical lucencies (Raven et al., 2005). The authors state that, in the maxilla, only the molars and premolars remain within the alveolar bone, whereas in the mandible, only the incisors remain (Raven et al., 2005).

The spinal column is also in a rather poor state; however, the authors note that this probably occurred post-mortem (Raven et al., 2005). The cervical portion of the spine is "displaced ventrally and cranially" the authors make special note that the dens of C2 is actually "positioned in front of the clivus" (Raven et al., 2005; 119). Furthermore, within the thoracic region of the spine, there is a "right-sided translation luxation fracture on the level of Th3-Th4" (Raven et al., 2005). To continue, the authors also observe a slight presence of osteopenia, with slight thinning of cortical bone and slight thickening of trabecular bone (Raven et al., 2005). The pelvic bone's pathological features include, "symphyseolysis, a luxation of the sacroiliac joints on both sides, and several fractures without displacement of the iliac wings" (Raven et al., 2005).

Similar to other regions of the body, the thorax and abdomen also demonstrate multiple pathological features. There are fractures to the upper ribs, dislocations to the costovertebral joints, as well as the right sternoclavicular (Raven et al., 2005). In addition to this, between the manubrium and the corpus, there is an observable fracture (Raven et al., 2005). The cavities of the thorax and abdomen are filled with not only fragments from both the ribs and vertebrae but also a "granular and rather homogeneous material (sand or mud) of medium density, interspersed with denser areas of resin (Raven et al., 2005; 119). The incision used for embalmment is located on the lower left abdominal wall (Raven et al., 2005). In addition, the skin and/or the resin surface located on the right ventral side of the abdominal wall is somewhat gone (Raven et al., 2005).

Finally, we conclude with a discussion of the pathological features of the extremities. The right elbow appears to be dislocated due to a supracondylar fracture, the authors note that this occurred post-mortally (Raven et al., 2005). There are no other structural changes apart from osteophytes that are visible at the humero-scapular joints (Raven et al., 2005). The bone density appears normal/healthy (Raven et al., 2005). No pathological features were observed in the lower extremities, and no misalignment or structural damages were also observed (Raven et al., 2005).

That being said, arterial calcification is well observed within the arteries that run the entire length of the legs, however, it does become more irregular the more distal you go (Raven et al., 2005).

### Resources

Raven, M. J., Taconis, W. K., & Maat, G. J. 2005. Egyptian mummies: Radiological Atlas of the Collections in the National Museum of Antiquities at Leiden. Turnhout, Belgium: Brepols.