

UNIVERSITI PUTRA MALAYSIA

CADAVERIC BODY WEIGHT ESTIMATION FROM REGRESSION ANALYSIS OF CORPSE LENGTH AND ANTERIOR ABDOMINAL SUBCUTANEOUS FAT THICKNESS USING POSTMORTEM COMPUTED TOMOGRAPHY

TAWFIQ Y. T. ZYOUD

FPSK(m) 2020 5



CADAVERIC BODY WEIGHT ESTIMATION FROM REGRESSION ANALYSIS OF CORPSE LENGTH AND ANTERIOR ABDOMINAL SUBCUTANEOUS FAT THICKNESS USING POSTMORTEM COMPUTED TOMOGRAPHY



Thesis Submitted to the School of Graduate Studies, Universiti Putra Malaysia, in Fulfilment of the Requirements for the Degree of Master of Science

January 2020

COPYRIGHT

All material contained within the thesis, including without limitation text, logos, icons, photographs, and all other artwork, is copyright material of Universiti Putra Malaysia unless otherwise stated. Use may be made of any material contained within the thesis for non-commercial purposes from the copyright holder. Commercial use of material may only be made with the express, prior, written permission of Universiti Putra Malaysia.

Copyright © Universiti Putra Malaysia



Abstract of thesis presented to the Senate of Universiti Putra Malaysia in fulfilment of the requirement for the degree of Master of Science

CADAVERIC BODY WEIGHT ESTIMATION FROM REGRESSION ANALYSIS OF CORPSE LENGTH AND ANTERIOR ABDOMINAL SUBCUTANEOUS FAT THICKNESS USING POSTMORTEM COMPUTED TOMOGRAPHY

By

TAWFIQ Y.T. ZYOUD

January 2020

Chairman: Ezamin Abdul Rahim, PhDFaculty: Medicine and Health Sciences

Forensic pathology has taken an important leap, owing to relatively low maintenance costs, short examination times, and ease of operation make CT a widely used crosssectional imaging technique in modern postmortem imaging. To determine the regression formula for cadaveric body weight estimation using spine length, anterior abdominal subcutaneous fat thickness (ASCFT) and body weight (BW) of the Malaysian corpse bodies. Retrospectively, 107 corpses were analyzed to assess the correlation between the length of each corpse on PMCT by measuring the topogram length (TL), sternal length (SL) and thoracic column length(TCL) and compared them to the autopsy length (AL) using linear regression analysis. Similarly, we measured the anterior subcutaneous fat thickness (ASCFT) on both sides at the level of the umbilicus and compared them to the autopsy weight (AW). Subsequently, multiple regression analysis techniques were done to assess the correlation and significance between TL, SL, TCL, and ASCFT with AW in order to derive regression equations for cadaveric body weight estimation. The findings of this study confirm and substantially extend earlier observations that PMCT as an accurate method for estimating length and weight of the body, and there is a good linear relationship between topogram length (TL), sternum length (SL) and thoracic column length (TCL) compared to the length of the corpse and its weight. In our study, TL has the best correlation with the coefficient of determination. ASCFT measurements showed a good correlation for both sides with no significant difference but a poor correlation with AW. Multiple regression analysis showed a significant linear relationship using TL, SL, TCL, and ASCFT with AW. PMCT can be used in the estimation of cadaveric height and weight. This is particularly important when dealing with incomplete corpses or mass disaster. The regression equation could also be applied to patients in emergency circumstances.



Abstrak tesis yang dikemukakan kepada Senat Universiti Putra Malaysia sebagai memenuhi keperluan untuk ijazah Master Sains

ANGGARAN BERAT BADAN MAYAT DENGAN KAEDAH ANALISIS REGRESI DARIPADA UKURAN PANJANG MAYAT DAN KETEBALAN LEMAK PERUT SUBCUTANEOUS ANTERIOR MENGGUNAKAN TOMOGRAFI BERKOMPUTER POST MORTEM

Oleh

TAWFIQ Y.T. ZYOUD

Januari 2020

Pengerusi : Ezamin Abdul Rahim, PhD Fakulti : Perubatan dan Sains Kesihatan

Patologi forensik telah mengambil langkah yang drastik, oleh kerana kos penyelenggaraan yang agak rendah, masa pemeriksaan yang singkat, dan kemudahan operasi membuatkan teknik pencitraan keratan rentas CT banyak digunakan dalam pengimejan postmortem moden. Tujuan penyelidikan ini adalah untuk menghasilkan formula regresi menggunakan ukuran panjang tulang belakang dan ketebalan lemak subkutaneus anterior (ASCFT) bagi menentukan berat badan mayat (BW) untuk populasi Malaysia. Secara retrospektif, 107 mayat dianalisa untuk menilai korelasi antara panjang setiap mayat pada PMCT dengan mengukur panjang topogram (TL), panjang tulang sternal (SL) dan panjang tulang torak (TCL)serta membandingkannya dengan ukuran panjang mayat semasa bedah siasat (AL) dengan menggunakan analisis regresi linier. Begitu juga, kami mengukur ketebalan lemak subkutaneus anterior (ASCFT) di kedua-dua belah pada tahap umbilicus dan membandingkannya dengan berat semasa bedah siasat(AW). Selanjutnya, teknik analisa regresi berganda dilakukan untuk menilai korelasi dan kepentingan di antara TL, SL, TCL, dan ASCFT dengan AW untuk mendapatkan persamaan regresi untuk anggaran berat badan simati. Penemuan kajian ini mengesahkan dan memberi perhatian yang mendalam kepada PMCT sebagai kaedah yang tepat untuk menganggarkan panjang dan berat badan, serta terdapat hubungan linear yang baik di antara TL, SL dan TCL berbanding dengan ukuran panjang mayat dan beratnya. Dalam kajian kami, TL mempunyai korelasi terbaik dengan pekali penentuan. Pengukuran ASCFT menunjukkan korelasi yang baik untuk kedua-dua belah pihak tanpa korelasi yang berbeza tetapi rendah bila dibandingkan dengan AW. Analisis regresi berganda menunjukkan hubungan linear yang signifikan menggunakan TL, SL, TCL, dan ASCFT dengan AW. PMCT boleh digunakan dalam perkiraan ketinggian dan berat badan simati. Ini amat penting apabila berhadapan dengan mayat yang tidak lengkap atau bencana besar-besaran. Formula regresi yang sama juga juga boleh digunakan untuk pesakitpesakit di dalam keadaan kecemasan.



ACKNOWLEDGEMENTS

Foremost, I would like to express my deep gratitude to Allah (SWT) for granting me life, good health and wisdom in pursuing this great achievement. I would like to acknowledge and humbly appreciate the immense contributions of my supervisor Associate Professor Dr. Ezamin Abdulrahim who wasn't only the supervisor but also a father and despite his tight schedules offers me invaluable advice and supported me throughout the journey of this project. I am also indebted to my co-supervisor in the person of Associate Professor Dr. Subapriya Suppiah for her invaluable contributions, support, advice, and encouragement through the course of my study and in preparation of the draft of my manuscript. I would also like to appreciate the efforts of all my lecturers, for the priceless knowledge they have impacted me. I wish to also express my gratitude to my second co-supervisor Professor Dr. Rozi Mahmud for her invaluable support in my research and lastly, I would like to appreciate the support of Dr. Saiful Nizam AR for given me the samples and guiding me in my proposal.

I am especially thankful to the entire management of Institut Perubatan Forensik Negara (IPFN) and Hospital Kuala Lumpur (HKL) for their support and permission granted me by the CMDs of both Specialist Hospitals to collect data from their staff without which this research work would have been a mirage.

To my friends that have been with me throughout this journey, their company has been a true source of spiritual and moral support to the burden of academic stress, Haneen Imran. They have been instrumental to me personally and to the success of my academic pursuit. Thank you and God bless you all. I cannot forget to express my sincere appreciation and gratitude to the Sheikh Ghazi Zyoud Abu Shafik for the moral support and teaching given to my family and all within our environs. Words could not be enough to express my deep and sincere gratitude to my beloved parents their understanding and moral upbringing rendered to me has been a tremendous source of guidance that brought this far in life, may Allah grant them a long life.

I am indebted to my family members, my brothers and sisters Raida, Amaal, Samira, Heyam, Raed, Hekmat, and Faheem. Their love, understanding with constant prayers have been an immeasurable contribution to the success of my project work. To my brother's wives Dalia, Nesren, and Hanan. I thank you for being patient with me and your valuable words of encouragement throughout the journey of this study.

 \bigcirc

Finally, To Err is human and to forgive is divine, I would like to thank everyone who has, directly and indirectly, contributed to the success of my academic pursuit, and to sincerely apologize to those that I have wronged directly or indirectly during the course of my work and to those I could not mention their names personally one by one, God bless you all. And lastly but not the least, I gratitude and kind heart appreciation to the great city of Bethlehem for the training I received during my undergraduate days.

I certify that a Thesis Examination Committee has met on 9 January 2020 to conduct the final examination of Zyoud Tawfiq Y T on his thesis entitled "Cadaveric Body Weight Estimation from Regression Analysis of Corpse Length and Anterior Abdominal Subcutaneous Fat Thickness using Postmortem Computed Tomography" in accordance with the Universities and University Colleges Act 1971 and the Constitution of the Universiti Putra Malaysia [P.U.(A) 106] 15 March 1998. The Committee recommends that the student be awarded the Master of Science.

Members of the Thesis Examination Committee were as follows:

Ahmad Sobri bin Muda, PhD

Professor Faculty of Medicine and Health Sciences Universiti Putra Malaysia (Chairman)

Norhafizah binti Mohtarrudin, PhD

Associate Professor Faculty of Medicine and Health Sciences Universiti Putra Malaysia (Internal Examiner)

Datin Mansharan Kaur a/p Chainchel Singh, PhD

Associate Professor Faculty of Medicine Universiti Teknologi MARA Malaysia (External Examiner)

ZURIATI AHMAD ZUKARNAIN, PhD Professor Ts. and Deputy Dean School of Graduate Studies Universiti Putra Malaysia

Date: 02 June 2020

This thesis was submitted to the Senate of the Universiti Putra Malaysia and has been accepted as fulfilment of the requirement for the degree of Master of Science. The members of the Supervisory Committee were as follows:

Ezamin Abdul Rahim, PhD

Associate Professor Faculty of Medicine and Health Sciences Universiti Putra Malaysia (Chairman)

Subapriya Suppiah, MD, MRAD

Associate Professor Faculty of Medicine and Health Sciences Universiti Putra Malaysia (Member)

Rozi Mahmud, PhD

Professor Faculty of Medicine and Health Sciences Universiti Putra Malaysia (Member)

ZALILAH MOHD SHARIFF, PhD

Professor and Dean School of Graduate Studies Universiti Putra Malaysia

Date:

Declaration by graduate student

I hereby confirm that:

- this thesis is my original work;
- quotations, illustrations and citations have been duly referenced;
- this thesis has not been submitted previously or concurrently for any other degree at any institutions;
- intellectual property from the thesis and copyright of thesis are fully-owned by Universiti Putra Malaysia, as according to the Universiti Putra Malaysia (Research) Rules 2012;
- written permission must be obtained from supervisor and the office of Deputy Vice-Chancellor (Research and innovation) before thesis is published (in the form of written, printed or in electronic form) including books, journals, modules, proceedings, popular writings, seminar papers, manuscripts, posters, reports, lecture notes, learning modules or any other materials as stated in the Universiti Putra Malaysia (Research) Rules 2012;
- there is no plagiarism or data falsification/fabrication in the thesis, and scholarly integrity is upheld as according to the Universiti Putra Malaysia (Graduate Studies) Rules 2003 (Revision 2012-2013) and the Universiti Putra Malaysia (Research) Rules 2012. The thesis has undergone plagiarism detection software

Signature:

Date: ____

Name and Matric No: <u>Tawfiq Y.T. Zyoud GS51824</u>

Declaration by Members of Supervisory Committee

This is to confirm that:

- the research conducted and the writing of this thesis was under our supervision;
- supervision responsibilities as stated in the Universiti Putra Malaysia (Graduate Studies) Rules 2003 (Revision 2012-2013) were adhered to.

Signature: Name of Chairman of Supervisory	
Committee:	Associate Professor Dr. Ezamin Abdul Rahim
Signature:	
Name of Member of Supervisory	
Committee:	Associate Professor Dr. Subapriya Suppiah
Signature: Name of Member of Supervisory Committee:	Professor Dr. Rozi Mahmud

TABLE OF CONTENTS

A A A D L L L	PPROVAI ECLARAT IST OF TA IST OF FI	EDGEMENTS TION ABLES	i ii iv vi xi xii xiii
C	HAPTER		
1		ODUCTION Background of the study Problem statement Significance of the study Research hypothesis Research objectives 1.5.1 General objective 1.5.2 Specific objectives Organization of the chapters	1 1 2 2 2 3 3 3 3 3 3 3
2		RATURE REVIEW	5
	2.1	Bodyweight estimation	5
	2.2	Body length estimation	5
	2.3	Subcutaneous fat thickness	5
	2.4	Autopsy	7
		2.4.1 Reasons for autopsy	7
		2.4.1.1 Diagnostic purposes	7
		2.4.1.2 Educational purposes	5 5 7 7 7 7 7 8
		2.4.1.3 Research purposes	8
		2.4.1.4 Technical purposes	8
		2.4.1.5 Religious deliberations	8
	2.5	Modalities for performing an autopsy	8 8
		2.5.1 Medico-Legal autopsy or scientific autopsies	8
		2.5.2 Medical or pathological autopsies	9
		2.5.3 Anatomical or academic autopsies	9
		2.5.4 Virtual or medical imaging autopsies	9
	26	2.5.5 Conventional radiography	9
	2.6	Techniques for postmortem radiology and imaging	9
		2.6.1 Conventional radiography2.6.2 C-arm fluoroscopy	9 10
		2.6.2 C-ann hubroscopy 2.6.3 Post mortem scintigraphy	10
		2.6.4 Magnetic resonance imaging (MRI)	10
		2.6.5 Multidetector computed tomography (MDCT) scanning	
		2.6.6 Angiography and MDCT angiography	11
		2.6.7 Role of postmortem radiology and imaging in specific	
		causes of death	11

		2.6.8 Post mortem computed tomography	13
	2.7	Freezing and PMCT	15
	2.8	PMCT versus autopsy	16
	2.9	Anthropometry and the cadaver	17
		2.9.1 PMCT evaluation of the body height	18
		2.9.1.1 Vertebral column anatomy	18
		2.9.2 Cadaver length analysis procedure	21
		2.9.3 Analysis of corpse weight	21
3	MAT	ERIALS AND METHODS	27
	3.1	Study Design	27
	3.2	Study location	27
	3.3	Study subjects	27
	3.4	Selection criteria	27
		3.4.1 Inclusion criteria	27
		3.4.2 Exclusion criteria	28
	3.5	Ethical approval	28
	3.6	Sampling frame	28
	3.7	Determination of sample size	28
	3.8	Instruments for data collection	28 29
	5.8	3.8.1 Pro-forma	29 29
			29 29
		3.8.2 Collection and processing of PMCT images3.8.3 Specific organs used	29 30
			30
		3.8.4 Post mortem CT Imaging Protocol	30 30
		3.8.5 Procedure for measuring spine	30
		3.8.5.1 First cervical spine C1 to the first thoracic	21
			31
		3.8.5.2 First thoracic vertebrae T1 to the first	0.1
		lumbar spine L1	31
		3.8.5.3 First lumber spine L1 to the first spine of	
		the sacrum S1	32
		3.8.5.4 First cervical spine C1 to the last lumber	
		spine L5 by a straight line	33
		3.8.5.5 First cervical spine C1 to the last lumber	
		spine L5 by Ellipse line	34
		3.8.5.6 Anterior Abdominal Subcutaneous Fat	
		Thickness (ASCFT)	35
	3.9	Data analysis	38
		3.9.1 Analysis of images	38
		3.9.2 Statistical analysis	38
	3.10	Study variables	38
	3.11	Operational definations of terms	39
4	RESU	JLTS	40
	4.1	Anatomical study of cadaveric body weight estimation	40
		4.1.1 Study subjects	40
		4.1.2 Demographic characteristics of the subjects	40
		4.1.3 Measurements of cadaveric spine length	41
		4.1.4 Relationship between cadaveric spine length and	. –
		autopsy length	42
		4.1.5 Differences in morphometry of Right and Left ASCFT	43
		4.1.6 Level of ASCFT and autopsy weight (AW) among the	
		ethnic group	44

		4.1.7 Relationship between ASCFT and autopsy weight (AW)	44
		4.1.8 Determination of the bodyweight estimation in cadaver	45
_	DIGO		
5	DISC	CUSSION, CONCLUSION AND LIMITATION	47
	5.1	Discussion	47
	5.2	Conclusion	49
	5.3	Study limitation and recommendation	49
DEE			
REFI	ERENC	IES	51
APPI	ENDICH	ES	57
BIOD	DATA O	DF STUDENT	67
LIST	OF PU	BLICATIONS	68



 \bigcirc

LIST OF TABLES

Table		Page
2.1	Differences between PMCT, and PM MRI	26
4.1	Distribution of the cadaveric body according to socio-demographic characteristics ($n = 107$)	40
4.2	Descriptive statistics of the total cadaveric spine length and autopsy length	41
4.3	Comparison of morphometric measurements of cadaveric spine length among the study population	42
4.4	Relationship between cadaveric spine length and autopsy length	43
4.5	Median score for Right ASCFT and Left ASCFT	43
4.6	Comparison of morphometric measurements of cadaveric ASCFT among the study population	44
4.7	Comparison of the mean of ASCFT and autopsy weight (AW) among the study population	44
4.8	Correlation between ASCFT (mean) and autopsy weight (AW)	45
4.9	Summary of MLR analysis on cadaveric body weight estimation	46

LIST OF FIGURES

Figure	2	Page
1.1	Flow chart showing the study approach by chapter	4
2.1	PMCT showing scan showing head accident of a dead victim.	12
2.2	Post-mortem changes and pathologies	13
2.3	PMCT scan showing an axial and sagittal section of the thorax.	14
2.4	Comparison between PMCT, MRI, and conventional autopsy	15
2.5	Three long bones measured bilaterally	17
2.6	Restructuring the image of the atlas by means of PMCT	19
2.7	PMCT and MPMCTA	20
2.8	Using the Cobb approach for angle measurement	20
2.9	Collection of gas in the liver section	22
2.10	Axial PMCT images (a, b, c, and d) show subcutaneous emphysema. Image adapted from Srikumar <i>et al.</i> (2019)	. 23
2.11	A sectional presentation of the pelvis	24
2.12	PMCT plane image of the chest demonstrating the lungs to estimate their weight	25
3.1	Central and noncentral distributations for MLR statistical test applied for sample size estimation	l 29
3.2	Demonstrating total spine measurement from C1 – T1 by a straight line	t 31
3.3	Measurement of the spine from $T1 - L1$ by a straight line	32
3.4	Spine measurement from $L1 - S1$ by a straight line	33
3.5	Spine measurement from C1 – L5 by a straight line	34
3.6	Measurement of the ellipse of the spine from C1 - L5	35
3.7	Images showing how right and left ASCFT is measure from the umbilicus. ASCFT was measured independently with a distance of 2.0 cm away from the umbilicus.	
3.8	Data collection workflow	37

G

LIST OF ABBREVIATIONS

2-Dimensional
3-Dimensional
Autopsy length
Abdominal subcutaneous fat thickness
Autopsy weight
Body mass index
Bodyweight
Cervical spine
Computerized tomography
Digital imaging and communication in medicine
Deoxyribonucleic acid
Hospital Kuala Lumpur
Institut Perubatan Forensik Negara
Lumbar spine
Lung weight
Multidetector computed tomography
Multiple linear regression
Multiplanar reconstructions
Magnetic resonance imaging
MultiSlice computed tomography
Positron emission tomography
Post-Mortem computed tomography
Postmortem magnetic resonance imaging
Pusat Pengimejan Diagnostik Nuklear
Pearson correlation coefficients

RIS	Radiological information system
ROI	Region of interest
rTEM	Relative technical error of measurement
SEE	The standard error of estimation
SL	Sternal length
SLR	Simple linear regression
SPSS	Statistical package for social sciences
Т	Thoracic spine
TCL	Thoracic column length
ТЕМ	Technical error of measurement
TL	Topogram length
UCS	Upper cervical spine
WBSA	Whole-body surface area

C

CHAPTER 1

INTRODUCTION

1.1 Background of the study

Cadaveric body weight estimation is nowadays being used in forensic science to explore information related to the dead body, cause of dead and other relevant details that may aid proper investigation especially in detecting what transpired during a crime scene. It is crucial as it involved external inspection of the body before carrying out an autopsy examination(Ferorelli et al., 2017). This procedure has been applied widely especially in this era of frequent mass disasters(Bal et al., 2013; Mitsiopoulos et al., 1998). Anthropologic assessment of skeletal examination may help in the identification process as it has been tested and proven. Numerous studies have been published for the estimation of stature from measuring the long bones, vertebral column, and sternum (Tormey, 2016). As there is some biometric and proportional relationship between every human bone other body segment and the stature of that individual. The skeletal examination may help in identification since bones resist decomposition for a long time (Tormey, 2016). Similarly, there is a relationship between the anterior abdominal subcutaneous fat thickness (ASCFT) with body mass index (BMI) and body weight estimation. The anterior abdominal subcutaneous fat remains stable over time despite the process of decomposition as compared to the other soft tissues of the body(Gitto et al., 2014).

Anterior abdominal subcutaneous fat thickness (ASCFT) has been found to be the key predictor in estimating cadaveric body weight and over the years, post-mortem computed tomography (PMCT) and postmortem magnetic resonance imaging (PMMRI) have been used in clinical and forensic laboratory to investigate, visualize disease and cause of death (Westphal et al., 2012) especially as they serve as a virtual guide for autopsy (Flach et al., 2014). Despite the difficulties in interpreting PMCT findings as it doesn't usually correlate with the clinical results, however, it's still being routinely used in forensic medicine and investigation. It has been reported that the diagnostic yield increases when post-mortem CT (PMCT) is added to the autopsy in both natural and unnatural death (Wichmann et al., 2012). PMCT is being used to specifically detect fractures, hemorrhage, and gas collections in the dead and living body system. The use of PMCT as an alternative to an autopsy was first applied in 1994 but has not been established yet (Jalalzadeh et al., 2015). It can generally be said that PMCT and PMMRI images modalities are key methods applied to autopsy imaging for a better examination of the corpse's body because conventional plain film radiography still tends to be the method of choice amongst most legal pathologists.

1.2 Problem statement

In an emergency clinical setting, obtaining patients' height and weight can be difficult. There are circumstances when the weight of the patient is not known or when the patient's condition is too frail for conventional weight assessment using the weighing scale. Weight needs to be estimated for fluid infusion, drug dosage and contrast media administrations (Gitto et al., 2014). This is particularly important in trauma cases, disaster scenario and especially when dealing with the pediatric age group (Gitto et al., 2014). In addition, there exists a problem in most of the existing techniques that are used in estimating cadaveric body weight and usually not providing complete accurate knowledge about the human body's weight, and height and time are difficult to ascertain the method. Hence, in this study, we used retrospectively collected PMCT scan images and measured the cadaveric body weight using topogram length (TL), sternal length(SL) and thoracic column length(TCL), autopsy length (AL), anterior subcutaneous fat thickness (ASCFT) and autopsy weight (AW) as they seem to be a reliable way in estimating the weight forensically. In addition, no study seems to estimate the bodyweight of the cadaver using CT. It was based on our literature findings that we hypothesized that CT technique may accurately predict the total cadaveric body weight based on the height and ASCFT measured obtained from CT output.

1.3 Significance of the study

Findings from this study will provide useful information to the clinicians, scientists, researchers, and more importantly to the expert's forensic scientists who may use the results in enhancing further security in our society, especially among Malaysian. It will also provide information on the importance of post-mortem CT (PMCT) as its usefulness in accurately determining the length and weight of cadaveric body weight. In a time like this where there is a lot of mass disaster occurring day in day out across the globe, the study will estimate the bodyweight of incomplete corpses. A good linear relationship is provided a linear relationship between topogram length (TL), sternum length (SL) and thoracic column length (TCL) compared to the autopsy length(AL) of the corpse and its weight (AW). These parameters could help biological anthropologists and forensic in furthering the research that will come up with something novel especially when these measurements are correlated with molecular markers found in the dead body. Equally, it can aide to improve in both research and postmortem investigation. The formula derived or predicted using multilinear regression may be applied to estimate the patient's body weight in emergency circumstances and particularly on the Malaysian population.

1.4 Research hypothesis

Based on the literature mining that carried out, it can be said that there is a significant correlation between morphometric length of the cadaveric spine, anterior abdominal subcutaneous fat thickness (ASCFT) and body weight (BW).

1.5 Research objectives

1.5.1 General objective

To determine the regression formula for cadaveric body weight estimation using spine length, anterior abdominal subcutaneous fat thickness (ASCFT) and body weight (BW) of the Malaysian corpse bodies.

1.5.2 Specific objectives

- i. To measure the cadaveric spine length (C1-T1, T1-L1, L1-S1, C1-S1 Line, and C1-S1 Ellipse, AL) and determine their differences among the study population.
- ii. To determine the relationship between cadaveric spine length and autopsy length (AL) among the Malaysian population.
- iii. To measure the level of ASCFT and autopsy weight (AW) and evaluate the differences in morphometry of the right ASCFT, left ASCFT and autopsy weight (AW).
- iv. To predict the cadaveric body weight using spine length and anterior abdominal subcutaneous fat thickness (ASCFT).

1.6 Organization of the chapters

This thesis is designed to comprise five (5) main chapters as shown in Figure 1.1, with the following brief explanation for each chapter and it's contained: -

Chapter One: introduces the study background, problems, hypothesis significant of the study and key objectives and the major findings, which summarized the overall contents of the work.

Chapter Two: Here, is a review of literature that involves elaboration on the previous findings that studies and discusses details the development of the post-mortem CT method in body weight estimation and corpse length using CT different theories and models was discussed as general review of the PMCT and of the structure and function of the spine and PMCT versus autopsy, subcutaneous fat, CT scan, analysis of corpse length, analysis of corpse weight, relation to the present study, which outlines the proper procedure to conducting this research.

Chapter Three: Presented the methods which explain the study design, sampling and sampling techniques, sample size estimation, and strategies for data collection, and analysis as well as ethical issues and application.

Chapter Four: The result outlines regression equations for cadaveric body weight estimation, discusses the research objectives and explained the relationship between TL, SL, and TCL compared to the length of the corpse, and its weight.

Chapter Five: discussion, and conclusion then followed by recommendation which summarizes the results. The chapter highlights the contributions of this research in the recent use of forensic medicine and the necessity of PMCT as a compatible, accurate multi-functional imaging tool that can support the autopsy.

•PMCT, means conducting autopsy in computerized environment by digital tools. The first step of digitizing starts with the medical imaging modalities that provide the raw data images from the deceased. The most common modalities are Computerized Tomography (CT scan) and Magnetic Resonance Imaging (MRI) scanner. Three dimensional medical visualization is the technical process that provide the digital environment for exploration of the 3D body and conducting the PMCT.
• The aim of this study was to derive a regression formula for cadaveric body weight estimation using length and anterior abdominal subcutaneous fat thickness (ASCFT) of corpses measured on post-mortem computed tomography (PMCT).
•CT data allow for second opinion based on undestroyed evidences as compared to observer-dependent written autopsy records and may prove helpful for control if doubt arises later concerning the documented weight or if weight has been missed altogether.
•Retrospectively, 107 corpses were analyzed to assess the correlation between the length of each corpse on PMCT by measuring the topo gram length (TL), sternal length (SL) and thoracic column length (TCL) and compared them to the autopsy
length (AL) using linear regression analysis. Similarly, we measured the anterior
subcutaneous fat thickness (ASCFT) on both side at the level of the umbilicus and compared them to the autopsy weight (AW). order to derive regression equations for cadaveric body weight estimation.
•The estimation of stature is crucial in different research areas in biological anthropology including forensic anthropology and cadaver measurements are a
routine part of the external inspection performed before autopsy. The medico - legal
value of these data may be essential in many fields of forensic science. Body height is an important parameter that is widely used to identify a person.
•There is a good linear relationship between TL, SL and TCL compared to the length
of the corpse and its weight. The Pearson correlation coefficients (r) and linear
regression was analyzed to determine the relationship between TL, SL and TCL (PMCT) with AW and AL variables and derived regression equations to estimate the total body weight.

Figure 1.1 : Flow chart showing the study approach by chapter

C

REFERENCES

- Addison, S., Arthurs, O. J., & Thayyil, S. (2014). Post-mortem MRI as an alternative to non-forensic autopsy in foetuses and children: from research into clinical practice. *The British journal of radiology*, 87(1036), 20130621-20130621.
- Amadasi, A., Cappella, A., Cattaneo, C., Cofrancesco, P., Cucca, L., Merli, D., ... Scarpulla, V. (2017). Determination of the post mortem interval in skeletal remains by the comparative use of different physico-chemical methods: Are they reliable as an alternative to 14C? *Homo*, 68(3), 213-221.
- Arroyo, M., Freire, M., Ansotegui, L., & Rocandio, A. M. (2010). Intraobserver error associated with anthropometric measurements made by dietitians. *Nutricion hospitalaria*, 25(6), 1053-1056.
- Bal, Z., Uyar, M. E., Tutal, E., Guliyev, O., Sezer, S., & Haberal, M. (2013). Body composition analysis of patients on waiting list for cadaveric renal transplantation: a comparison of hemodialysis and peritoneal dialysis patients. *Transplant Proc*, 45(10), 3489-3493.
- Benali, L., Gromb, S., & Bou, C. (2013). Post-mortem imaging in traffic fatalities: from autopsy to reconstruction of the scene using freely available software. *International journal of legal medicine*, 127(5), 1045-1049.
- Borkan, G., Hults, D., Gerzof, S., Burrows, B., & Robbins, A. (1983). Relationships between computed tomography tissue areas, thicknesses and total body composition. *Annals of human biology*, **10**(6), **537-545**.
- Busscher, I., Ploegmakers, J. J. W., Verkerke, G. J., & Veldhuizen, A. G. (2010). Comparative anatomical dimensions of the complete human and porcine spine. European spine journal : official publication of the European Spine Society, the European Spinal Deformity Society, and the European Section of the Cervical Spine Research Society, 19(7), 1104-1114.
- Cline, M. G., Meredith, K. E., Boyer, J. T., & Burrows, B. (1989). Decline of height with age in adults in a general population sample: estimating maximum height and distinguishing birth cohort effects from actual loss of stature with aging. *Human biology*, *61*(3), 415.
- Cressoni, M., Gallazzi, E., Chiurazzi, C., Marino, A., Brioni, M., Menga, F., . . . Lazzerini, M. (2013). Limits of normality of quantitative thoracic CT analysis. *Critical Care*, **17**(3), R93.
- Droby, A., Lukas, C., Schänzer, A., Spiwoks-Becker, I., Giorgio, A., Gold, R., . . . Wiendl, H. (2015). A human post-mortem brain model for the standardization of multi-centre MRI studies. *Neuroimage*, **110**, 11-21.

- Du Bois, D., & Du Bois, E. F. (1916). Clinical calorimetry: tenth paper a formula to estimate the approximate surface area if height and weight be known. *Archives of internal medicine*, **17**(6_2), 863-871.
- Femia, G., Semsarian, C., Langlois, N., McGuire, M., Raleigh, J., Taylor, A., & Puranik, R. (2019). Post-mortem imaging adjudicated sudden death: causes and controversies. *Heart, Lung and Circulation*, 28(1), 15-21.
- Ferorelli, D., Dell'Erba, A., & Solarino, B. (2017). Body length estimation during the post mortem interval: preliminary study. *Rom J Leg Med*, 25, 369-372.
- Flach, P. M., Thali, M. J., & Germerott, T. (2014). Times have changed! Forensic radiology—a new challenge for radiology and forensic pathology. *American Journal of Roentgenology*, 202(4), W325-W334.
- Ganapathy, S. S., Yi Yi, K., Omar, M. A., Anuar, M. F. M., Jeevananthan, C., & Rao, C. (2017). Validation of verbal autopsy: determination of cause of deaths in Malaysia 2013. *BMC Public Health*, 17(1), 653-653.
- Gastaldelli, A., Sironi, A., Ciociaro, D., Positano, V., Buzzigoli, E., Giannessi, D., . . . Ferrannini, E. (2005). Visceral fat and beta cell function in non-diabetic humans. *Diabetologia*, 48(10), 2090-2096.
- Gitto, L., Serinelli, S., Busardò, F. P., Panebianco, V., Bolino, G., & Maiese, A. (2014). Can post-mortem computed tomography be considered an alternative for autopsy in deaths due to hemopericardium? *J Geriatr Cardiol*, 11(4), 363-367.
- Gocha, T. P., Vercellotti, G., McCormick, L. E., & Van Deest, T. L. (2013). Formulae for Estimating Skeletal Height in Modern South-East A sians. *Journal of forensic sciences*, 58(5), 1279-1283.
- Grabherr, S., Baumann, P., Minoiu, C., Fahrni, S., & Mangin, P. (2016). Post-mortem imaging in forensic investigations: current utility, limitations, and ongoing developments. *Research and Reports in Forensic Medical Science*, **6**, 25-37.
- Harper, L., Fumagalli, G. G., Barkhof, F., Scheltens, P., O'Brien, J. T., Bouwman, F., . . . Ridgway, G. R. (2016). MRI visual rating scales in the diagnosis of dementia: evaluation in 184 post-mortem confirmed cases. *Brain*, 139(4), 1211-1225.
- Hayashi, S., Naito, M., Kawata, S., Qu, N., Hatayama, N., Hirai, S., & Itoh, M. (2016). History and future of human cadaver preservation for surgical training: from formalin to saturated salt solution method. *Anatomical science international*, *91*(1), 1-7.
- Jackowski, C., Schwendener, N., Zeyer-Brunner, J., & Schyma, C. (2015). Body weight estimation based on postmortem CT data—validation of a multiplication factor. *International journal of legal medicine*, **129**(5), 1121-1125.

- Jackowski, C., Thali, M. J., Buck, U., Aghayev, E., Sonnenschein, M., Yen, K., . . . Vock, P. (2006). Noninvasive estimation of organ weights by postmortem magnetic resonance imaging and multislice computed tomography. *Investigative radiology*, 41(7), 572-578.
- Jalalzadeh, H., Giannakopoulos, G. F., Berger, F. H., Fronczek, J., van de Goot, F. R. W., Reijnders, U. J., & Zuidema, W. P. (2015). Post-mortem imaging compared with autopsy in trauma victims--A systematic review. *Forensic Sci Int*, 257, 29-48.
- Jamaiyah, H., Geeta, A., Safiza, M., Khor, G., Wong, N., Kee, C., ... Chen, W. (2010). Reliability, technical error of measurements and validity of length and weight measurements for children under two years old in Malaysia. *Med J Malaysia*, 65(Suppl A), 131-137.
- Jantz, R. L. (1992). Modification of the Trotter and Gleser female stature estimation formulae. *Journal of Forensic Science*, **37**(5), 1230-1235.
- Klop, A. C., Vester, M. E., Colman, K. L., Ruijter, J. M., Van Rijn, R. R., & Oostra, R. J. (2017). The effect of repeated freeze-thaw cycles on human muscle tissue visualized by postmortem computed tomography (PMCT). *Clinical Anatomy*, 30(6), 799-804.
- Kwon, S. M., Chun, H.-J., Yi, H.-J., Kim, Y.-S., & Kim, K. D. (2019). Computed Tomographic Assessment of Sagittal Plane Alignment of the Thoracolumbar Junction in a Young Adult Korean Population. *World neurosurgery*, 121, e351-e357.
- Le Blanc-Louvry, I., Thureau, S., Ledoux, K., Mogdad, B., Lagroy, E., Dacher, J. N., & Tournel, G. (2015). False positive aortic dissection on postmortem computed tomography. *Forensic science international*, 254, e4-e6.
- Lewison, G., Kumar, S., Wong, C.-Y., Roe, P., & Webber, R. (2016). The contribution of ethnic groups to Malaysian scientific output, 1982-2014, and the effects of the new economic policy. *Scientometrics*, **109**(3), 1877-1893.
- Liou, T., Chan, W., Pan, L., Lin, P., Chou, P., & Chen, C.-H. (2006). Fully automated large-scale assessment of visceral and subcutaneous abdominal adipose tissue by magnetic resonance imaging. *International journal of obesity*, 30(5), 844.
- Mahakkanukrauh, P., Khanpetch, P., Prasitwattanseree, S., Vichairat, K., & Case, D. T. (2011). Stature estimation from long bone lengths in a Thai population. *Forensic science international*, 210(1-3), 279. e271-279. e277.
- Maiese, A., Serinelli, S., Gitto, L., Falco, P., Panebianco, V., & Bolino, G. (2015). The usefulness of post-mortem computed tomography in a crush asphyxia. An excessive enjoyed rave party resulting in a fatal sleep! *Journal of Forensic Radiology and Imaging*, 3(1), 91-95.

- Maixenchs, M., Anselmo, R., Sanz, A., Castillo, P., Macete, E., Carrilho, C., . . . Munguambe, K. (2018). Healthcare providers' views and perceptions on postmortem procedures for cause of death determination in Southern Mozambique. *PLoS One*, 13(7), e0200058.
- Matoba, K., Hyodoh, H., Ishida, L., Murakami, M., Matoba, T., Saito, A., ... Yamase, M. (2018). Lung weight estimation with postmortem CT in forensic cases. *Legal Medicine*, 35, 61-65.
- Matoba, K., Hyodoh, H., Ishida, L., Murakami, M., Matoba, T., Saito, A., ... Jin, S. (2018). Lung weight estimation with postmortem CT in forensic cases. *Leg Med* (*Tokyo*), 35, 61-65.
- Matoba, K., Hyodoh, H., Murakami, M., Saito, A., Matoba, T., Ishida, L., . . . Jin, S. (2017). Estimating normal lung weight measurement using postmortem CT in forensic cases. *Legal Medicine*, 29, 77-81.
- McDougall, S. A. (2009). Bigamy in late medieval France: Yale University.
- Mitsiopoulos, N., Baumgartner, R. N., Heymsfield, S. B., Lyons, W., Gallagher, D., & Ross, R. (1998). Cadaver validation of skeletal muscle measurement by magnetic resonance imaging and computerized tomography. J Appl Physiol (1985), 85(1), 115-122.
- Mubbunu, L., Bowa, K., Petrenko, V., & Silitongo, M. (2018). Correlation of Internal Organ Weights with Body Weight and Body Height in Normal Adult Zambians: A Case Study of Ndola Teaching Hospital. Anatomy research international, 2018, 4687538-4687538.
- Orphanidou, C., McCargar, L., Birmingham, C. L., Mathieson, J., & Goldner, E. (1994). Accuracy of subcutaneous fat measurement: comparison of skinfold calipers, ultrasound, and computed tomography. *Journal of the American Dietetic Association*, 94(8), 855-858.
- Paiva, F. G., do Carmo Santana, P., & Mourão, A. P. (2019). Evaluation of patient effective dose in a PET/CT test. *Applied Radiation and Isotopes*, **145**, 137-141.
- Petersen, C. M., Zimmermann, C. L., Cope, S., Bulow, M. E., & Ewers-Panveno, E. (2008). A new measurement method for spine reposition sense. *J Neuroeng Rehabil*, 5, 9.
- Roberts, I. S., Benamore, R. E., Benbow, E. W., Lee, S. H., Harris, J. N., Jackson, A., . . . Roobottom, C. (2012). Post-mortem imaging as an alternative to autopsy in the diagnosis of adult deaths: a validation study. *The Lancet*, *379*(9811), 136-142.
- Sexton, S. A., Ferguson, N., Pearce, C., & Ricketts, D. M. (2008). The Misuse of 'No Significant Difference' in British Orthopaedic Literature. Annals of The Royal College of Surgeons of England, 90(1), 58-61.

- Shelmerdine, S., Hutchinson, J., Sebire, N., Jacques, T., & Arthurs, O. (2017). Postmortem magnetic resonance (PMMR) imaging of the brain in fetuses and children with histopathological correlation. *Clinical radiology*, 72(12), 1025-1037.
- Sieswerda-Hoogendoorn, T., & van Rijn, R. R. (2010). Current techniques in postmortem imaging with specific attention to paediatric applications. *Pediatric radiology*, **40**(2), 141-259.
- Srikumar, T., Siegel, E. M., Gu, Y., Balagurunathan, Y., Garcia, A. L., Chen, Y. A., . . . Clark, W. (2019). Semiautomated Measure of Abdominal Adiposity Using Computed Tomography Scan Analysis. *Journal of Surgical Research*, 237, 12-21.
- Subbotina, E., Williams, N., Sampson, B. A., Tang, Y., & Coetzee, W. A. (2018). Functional characterization of TRPM4 variants identified in sudden unexpected natural death. *Forensic science international*, **293**, 37-46.
- Thali, M. J., Yen, K., Schweitzer, W., Vock, P., Boesch, C., Ozdoba, C., . . . Doernhoefer, T. (2003). Virtopsy, a new imaging horizon in forensic pathology: virtual autopsy by postmortem multislice computed tomography (MSCT) and magnetic resonance imaging (MRI)-a feasibility study. *Journal* of forensic sciences, 48(2), 386-403.
- Torimitsu, S., Makino, Y., Saitoh, H., Sakuma, A., Ishii, N., Hayakawa, M., ... Chiba, F. (2015). Stature estimation in Japanese cadavers based on pelvic measurements in three-dimensional multidetector computed tomographic images. *International journal of legal medicine*, **129**(3), 633-639.
- Tormey, W. P. (2016). The potential diagnostic value of vitreous humor analyses at autopsy is not appreciated. *Ir J Med Sci*, **185**(4), 931-934.
- Tsuboi, H., Takazakura, R., Idota, N., Takaso, M., & Ikegaya, H. (2018). Rare atlas fracture detected using postmortem computed tomography: A case report. *Journal of forensic and legal medicine*, **60**, 38-41.
- Van der Kooy, K., & Seidell, J. C. (1993). Techniques for the measurement of visceral fat: a practical guide. *International journal of obesity*, *17*, 187-187.
- Villaverde, R. V., Bruguier, C., Zerlauth, J.-B., De Froidmont, S., & Grabherr, S. (2016). Tearing of the left iliac vessels in lumbar surgery revealed by multiphase post-mortem CT-angiography (MPMCTA). *Legal Medicine*, 20, 44-48.
- Westphal, S. E., Apitzsch, J., Penzkofer, T., Mahnken, A. H., & Knuchel, R. (2012). Virtual CT autopsy in clinical pathology: feasibility in clinical autopsies. *Virchows Arch*, **461**(2), 211-219.
- Wichmann, D., Obbelode, F., Vogel, H., Hoepker, W. W., Nierhaus, A., Braune, S., . Kluge, S. (2012). Virtual autopsy as an alternative to traditional medical

autopsy in the intensive care unit: a prospective cohort study. *Ann Intern Med*, *156*(2), 123-130.

- Wu, M., & Shu, J. (2018). Multimodal molecular imaging: current status and future directions. *Contrast media & molecular imaging*, 2018.
- Yen, K., Lövblad, K.-O., Scheurer, E., Ozdoba, C., Thali, M. J., Aghayev, E., . . . Zwygart, K. (2007). Post-mortem forensic neuroimaging: correlation of MSCT and MRI findings with autopsy results. *Forensic science international*, 173(1), 21-35.
- Yonguc, G. N., Kurtulus, A., Bayazit, O., Adiguzel, E., Unal, I., Demir, S., & Acar, K. (2015). Estimation of stature and sex from sternal lengths: an autopsy study. *Anatomical science international*, *90*(2), 89-96.
- Zech, W. D., Naf, M., Siegmund, F., Jackowski, C., & Losch, S. (2016). Body height estimation from post-mortem CT femoral F1 measurements in a contemporary Swiss population. *Leg Med (Tokyo)*, **19**, 61-66.
- Zhao, B., Colville, J., Kalaigian, J., Curran, S., Jiang, L., Kijewski, P., & Schwartz, L. H. (2006). Automated quantification of body fat distribution on volumetric computed tomography. *Journal of computer assisted tomography*, *30*(5), 777-783.
- Zhu, W., & Nelson, C. M. (2013). Adipose and mammary epithelial tissue engineering. *Biomatter*, 3(3), e24630.

BIODATA OF STUDENT

The student of this thesis named Tawfiq Y.T Zyoud was born on 13 May 1994 in Nablus, Palestine. He received his Bachelor's Degree in Medical Imaging in 2016 from the Palestine Ahliya University, Palestine. He has attended workshops at the Universiti Putra Malaysia. He participated in a conference 2019 Annual Scientific Meeting College of Pathologists Academy of Malaysia. He gained admission in March 2018 at the Faculty of Medicine and Health Sciences of the Universiti Putra Malaysia (UPM), to study his Master of Science under the supervisor of Dr. Ezamin Abdul Rahim, "*the awesome, humble, congenial and always smile-looking Supervisor ever*". His future aim is to be a successful research scientist across the world especially in post-mortem Computed Tomography research.



LIST OF PUBLICATIONS

- Subapriya Suppiah, Tawfiq Y.T Zyoud, Ezamin Abdul Rahim, Ching Siew Mooi, Heamn N. Abduljabr, Rozi Mahmud, Saiful Nizam Abdul Rashid. (2019). Incremental benefits of minimally invasive image-guided virtopsy in improving findings from conventional autopsy: A review of recent literature and sharing of the Malaysian experience. *Journal of Legal Medicine*. (Manuscript submitted).
- Tawfiq Y.T Zyoud, Subapriya Suppiah, Ezamin Abdul Rahim, Heamn N. Abduljabr, Rozi Mahmud, Rosliza Abd Manaf, Abubakr Kabeer, Saiful Nizam Abdul Rashid. (2019).Estimation of body height using post-mortem computed tomography. *International Journal of Legal Medicine*. (Manuscript submitted).



UNIVERSITI PUTRA MALAYSIA

STATUS CONFIRMATION FOR THESIS / PROJECT REPORT AND COPYRIGHT

ACADEMIC SESSION : Second Semester 2019/2020

TITLE OF THESIS / PROJECT REPORT :

CADAVERIC BODY WEIGHT ESTIMATION FROM REGRESSION ANALYSIS OF CORPSE LENGTH AND ANTERIOR ABDOMINAL SUBCUTANEOUS FAT THICKNESS USING POSTMORTEM COMPUTED TOMOGRAPHY

NAME OF STUDENT: TAWFIQ Y.T. ZYOUD

I acknowledge that the copyright and other intellectual property in the thesis/project report belonged to Universiti Putra Malaysia and I agree to allow this thesis/project report to be placed at the library under the following terms:

- 1. This thesis/project report is the property of Universiti Putra Malaysia.
- 2. The library of Universiti Putra Malaysia has the right to make copies for educational purposes only.
- 3. The library of Universiti Putra Malaysia is allowed to make copies of this thesis for academic exchange.

I declare that this thesis is classified as :

*Please tick (V)



CONFIDENTIAL



RESTRICTED



(Contain confidential information under Official Secret Act 1972).

(Contains restricted information as specified by the organization/institution where research was done).

I agree that my thesis/project report to be published as hard copy or online open access.

This thesis is submitted for :



(Signature of Student)

New IC No/ Passport No .:

Embargo from until (date)

(date)

Approved by:

(Signature of Chairman of Supervisory Committee) Name:

Date :

Date :

[Note : If the thesis is CONFIDENTIAL or RESTRICTED, please attach with the letter from the organization/institution with period and reasons for confidentially or restricted.]