

# Online Supplementary Tables

**Table S5.** Lesions and differential diagnosis of M20 and M29 (SD = strongly diagnostic, D = diagnostic, S = suggestive, A = associated pathologies, SPNB = subperiosteal new bone deposit).

Elements	Lesions, Associations
<b>MB05 M20: Young Adult Male</b>	
<b>Cranium</b>	<ul style="list-style-type: none"> <li>- Bilateral remodeling medium cibra orbitalia</li> <li>- Porotic hyperostosis of the frontal bone, occipital bone, and parietal bones</li> <li>- Bilateral symmetrical discrete SPNB and abnormal cortical porosity on anterior and posterior zygomatics, external greater wings of sphenoid bones and temporal bones.</li> </ul> <p>Scurvy = A,S,D,D<sup>1,2</sup>, Rickets/Osteomalacia = A<sup>1</sup>, Leprosy = A<sup>1</sup>, Tuberculosis = A<sup>1</sup>, Osteomyelitis = A<sup>1</sup>, Treponemal Disease = A<sup>1</sup></p>
<b>Mandible</b>	<ul style="list-style-type: none"> <li>- Remodeled symmetrical discrete SPNB and abnormal cortical porosity extending from the mental foramina onto the oblique lines</li> </ul> <p>Scurvy = A<sup>1</sup>, Rickets/Osteomalacia = A<sup>1</sup>, Leprosy = A<sup>1</sup>, Tuberculosis = A<sup>1</sup>, Osteomyelitis = A<sup>1</sup>, Treponemal Disease = A<sup>1</sup></p>
<b>Humeri</b>	<ul style="list-style-type: none"> <li>- Two superficial focal cavitations with sclerotic reaction on the margins and base associated with remodeled SPNB on the anterior and posterior lateral epicondyle of the right humerus (17.6 × 7.5mm and 6.7 × 3.5mm)</li> <li>- Unilateral enlargement of the cortical shaft of the right humerus</li> <li>- Discrete deposit of SPNB on the anterior proximal left humerus</li> </ul> <p>Treponemal Disease = D<sup>3</sup>, Scurvy = A<sup>2</sup></p>
<b>Femora</b>	<ul style="list-style-type: none"> <li>- Unilateral discrete SPNB on the medial proximal left femur</li> </ul> <p>Scurvy = A<sup>2</sup></p>
<b>Tibiae</b>	<ul style="list-style-type: none"> <li>- Diffuse bilateral new SPNB with cortical enlargement of the tibial shafts</li> <li>- Saber shin</li> <li>- Discrete bilateral SPNB of the medial and lateral proximal tibiae</li> </ul> <p>Scurvy = S<sup>2</sup>, Treponemal Disease = S<sup>4</sup></p>
<b>Fibulae</b>	<ul style="list-style-type: none"> <li>- Symmetrical nodes of enlarged bone with multiple focal superficial focal cavitations with sclerotic margins and base (The lytic lesion diameters are 9.9 × 7.1 mm, 10.5 × 6.7 mm, and 6.4 × 3.7 mm for the right fibula and 12.7 × 7 mm and 12.6 × 5.9 mm for the left fibula)</li> </ul> <p>Treponemal Disease = SD<sup>3</sup></p>
<b>Calcaneus</b>	<ul style="list-style-type: none"> <li>- Two focal superficial cavitations with sclerotic margins and base on the lateral and anterior-medial left calcaneus (18.48 × 9.45 mm [lateral], and 7.71 × 6.13 mm [antero-medial])</li> </ul> <p>Treponemal Disease = D<sup>3</sup></p>
<b>Outcome</b>	<i>Probable Scurvy, Probable Treponematosis</i>
<b>MB07 H2 M29: Child Approximately 7 Years</b>	
<b>Mandible</b>	<ul style="list-style-type: none"> <li>- Remodeled abnormal cortical porosity on the right medial coronoid process, and discrete SPNB on the superior right incisive fossa</li> </ul> <p>Scurvy = D<sup>2</sup></p>
<b>Scapulae</b>	<ul style="list-style-type: none"> <li>- Mixed active and remodeled discrete SPNB and abnormal cortical porosity on the supraspinous fossae of the scapula</li> </ul> <p>Scurvy = D<sup>2</sup></p>
<b>Humerus</b>	<ul style="list-style-type: none"> <li>- Unilateral remodeled discrete SPNB lateral to the deltoid tuberosity on the left humerus</li> <li>- Bilateral diffuse active SPNB on distal shafts</li> <li>- Bilateral latera bending deformities of the humeral shafts, and depression deformities of the humeri</li> </ul> <p>Scurvy = A<sup>1,2</sup>, Rickets/Osteomalacia = A,D,D<sup>1,5</sup>, Leprosy = A<sup>1</sup>, Tuberculosis = A<sup>1</sup>, Osteomyelitis = A<sup>1</sup>, Treponemal Disease = A<sup>1</sup></p>
<b>Ulnae</b>	<ul style="list-style-type: none"> <li>- Bilateral mixed active and remodeled diffuse SPNB with cortical enlargement across shafts and proximal metaphysis</li> <li>- Superficial focal cavitation in nodes of enlargement on antero-lateral midshaft of right ulna (9.31 × 4.01 mm) and lateral olecranon process of left ulna (&lt; 10 mm).</li> </ul> <p>Treponemal Disease = SD<sup>3</sup></p>
<b>Radii</b>	<ul style="list-style-type: none"> <li>- Bilateral mixed active and remodeled diffuse SPNB with cortical enlargement across shafts and proximal metaphysis</li> <li>- Superficial focal cavitation in nodes of enlargement on antero-lateral midshaft of right radius (12.03 × 4.67 mm)</li> </ul> <p>Treponemal Disease = SD<sup>3</sup></p>
<b>Hands</b>	<ul style="list-style-type: none"> <li>- Dactylitis</li> </ul> <p>Leprosy = S<sup>6</sup>, Tuberculosis = S<sup>6</sup>, Osteomyelitis = S<sup>6</sup>, Treponemal Disease = S<sup>6</sup></p>

(continued)

**Table S5.** (continued).

Elements	Lesions, Associations
<b>MB07 H2 M29: Child Approximately 7 Years</b>	
<b>Femora</b>	<ul style="list-style-type: none"> <li>- Bilateral symmetrical SPNB with cortical enlargement</li> <li>- Slight cupping and swelling of the distal femora</li> </ul>
	Rickets/Osteomalacia = D,D <sup>5</sup> , Leprosy = A <sup>1</sup> , Tuberculosis = A <sup>1</sup> , Osteomyelitis = A <sup>1</sup> , Treponemal Disease = S <sup>7</sup>
<b>Tibiae</b>	<ul style="list-style-type: none"> <li>- Bilateral diffuse SPNB with cortical enlargement of the tibiae</li> <li>- Saber shin of the tibiae</li> <li>- Medial true-bowing of the tibiae</li> <li>- Posterior angulation (depression) of the proximal metaphyseal plates of the tibiae</li> </ul>
	Rickets/Osteomalacia = D,D <sup>5</sup> , Leprosy = A <sup>1</sup> , Tuberculosis = A <sup>1</sup> , Osteomyelitis = A <sup>1</sup> , Treponemal Disease = S <sup>4</sup>
<b>Fibulae</b>	<ul style="list-style-type: none"> <li>- Bilateral diffuse SPNB with nodes of enlargement on the distal fibulae</li> <li>- Symmetrical focal cavitations of the distal fibulae within in nodes of enlarged cortical bone (Left fibula lesion diameter: 9.07 × 3.94 mm. Right fibula lesion diameter: 12.32 × 3.29 mm)</li> </ul>
	Treponemal Disease = SD <sup>3</sup>
<b>Clavicle</b>	<ul style="list-style-type: none"> <li>- Possible Higoumenakis sign of the left clavicle (unilateral enlargement of the sternal end)</li> </ul>
	Treponemal Disease = S <sup>8</sup>
<b>All Limb Bones</b>	<ul style="list-style-type: none"> <li>- <i>Radiographic:</i> White line of Frankel</li> <li>- <i>Radiographic:</i> Trummerfeld Zone</li> <li>- <i>Radiographic:</i> Multiple Harris lines</li> <li>- <i>Radiographic:</i> Ground glass osteopenia</li> </ul>
	Scurvy = S,D,D <sup>9</sup>
<b>Outcome</b>	<i>Probable Scurvy, Probable Rickets, Probable Treponematosis</i>

<sup>1</sup>Ortner 20036<sup>2</sup>Snoddy et al. 2018<sup>3</sup>Hackett 1975, 1976:362–396<sup>4</sup>Hackett 1951:28<sup>5</sup>Brickley and Ives 2010:103–107<sup>6</sup>Lewis 2017:134, 162, 169, 179<sup>7</sup>Hackett 1951, 1975, 1976:411–433<sup>8</sup>Frangos et al. 2011; Harper et al. 2011; Lewis 2017:179<sup>9</sup>Brickley and Ives 2010:65

**Table S6.** Individuals from Man Bac with lesions consistent with treponematosis (SD = strongly diagnostic, D = diagnostic, S = suggestive, A = associated pathologies).

ID	Sex	Age	Gummatus lesions on any skeletal element: focal superficial cavitations in direct relation with nodes or expansions (enlargements) of new bone (SD) <sup>1</sup>	<i>Cartes sicca</i> sequence stages 1–3: confluent clustered pits, focal superficial cavitation of the ectocranum or focal superficial cavitation of the cortex of long bones not within a distinct node or expansion (enlargement) (D) <sup>2</sup>	Dactylitis (pseudobowing of the tibia without bowing of the medullary canal) (S) <sup>3</sup>	Saber shin (pseudobowing of the tibia without bowing of the medullary canal) (S) <sup>3</sup>	Boomerang leg: True tibial bowing with bowing of medullary canal (juvenile) (S) <sup>4</sup>	Long bone nodes of endosteal and periosteal enlargement (can be with medullary canal intrusion) (S) <sup>5</sup>	Systemic periosteal reaction of the long bones (A) <sup>7</sup>	Diagnosis of treponemal disease	Notes
MB05 M20	Male	15–29 years	x	x	x	x	x	x	x	x	Probable
MB07 H2 M18	Possible female	14–18 years			x	x	x	x	x	x	Possible
MB05 M5	Indeterminate	18 months ( $\pm 3$ months)		x (acromial end right clavicle, medial distal right humerus)	x	x	x	x	x	x	Possible
MB05 M10	Indeterminate	9 years ( $\pm 9$ months)			x	x	x	x	x	x	Possible
MB05 M29	Male	30–39		x (right distal fibula)	x	x	x	x	x	x	Possible
MB07 H2 M29	Indeterminate	7 years ( $\pm 9$ months)	x	x	x	x	x	x	x	x	Probable
MB07 H2 M17	Indeterminate	12–18 years			x	x	x	x	x	x	Non-Diagnostic
											Pattern of above individuals.

<sup>1</sup>Hackett 1975, 1976:362–396

<sup>2</sup>Hackett 1975, 1976:362–396

<sup>3</sup>Hackett 1951:28

<sup>4</sup>Hackett 1951:30; Rasool and Govender 1989

<sup>5</sup>Hackett 1976: 411–433

<sup>6</sup>Harper et al. 2011; Lewis 2017:175

<sup>7</sup>Orther 2003