

Original research

Rakosi Jarabak Analysis for the South Indian Population -A Cross-Sectional Study

H.Sruthi¹, S. Aravind Kumar², Arvind Sivakumar³

¹Post Graduate,²Professor, ³Reader, Department of Orthodontics, Saveetha Dental College.

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ABSTRACT:

Background: Rakosi jarabak analysis has been proved to be effective in predicting the facial growth pattern, morphological characters, reaction to various orthopedic approaches, and functional alterations. Most of these established cephalometric values are based on average values for the Caucasian population. Whereas cephalometric values vary among different populations and have shown variations among different ethnic groups, gender, and age. The objectives of this paper are to develop Rakosi Jarabak cephalometric norms for the South Indian population and compare the measures to values from other ethnic groups.

Materials and Method: Facad software was used to track the lateral cephalograms of 100 non-growing patients from the South Indian population who satisfied our inclusion criteria. Nineteen craniofacial parameters of Jarabak's analysis were measured.

Result: A comparison between the males and females of the South Indian population showed a significant difference between the three parameters. Comparison of the south Indian male, female values, and overall values with established norms of various ethnic populations showed significant differences among various parameters.

Conclusion: This study establishes the south Indian ethnic norms for Rakosi Jarabak analysis. The south Indian norms vary from caucasian norms showing significant ethnic .These differences need to be considered when analyzing the cephalogram . These values will help in customizing treatment plans based on ethnic norms.The study concludes that distivariationsnct sets of cephalometric norms should be developed for different ethnic groups in order to aid orthodontists and surgeons in optimising treatment plans based on local norms.

Keywords: *Cephalometry, Ethnic group, India, Caucasians, Ethnicity, South Indian, Indian population*

Address for Correspondence:

H.Sruthi,

Post Graduate, Depatment of Orthodontics,

Saveetha Dental College,

Chennai,

Email id: sruthident@gmail.com

INTRODUCTION:

Lateral cephalogram plays a vital role in clinical diagnosis and treatment planning as well as in growth studies that evaluate the development of skeletal and dental structures^{1,2}. A Cephalometric analysis according to Thomas Rakosi is based on elements chosen with great care over years of experience. Various Cephalometric analyses have been used to evaluate facial forms, skeletal relations of the jaws in various malocclusions^{3,4}.

Cephalometric norms can be defined as the ideal cephalometric values for a particular group of population with the same age group, gender, and race⁹. For many years orthodontists have focused on establishing the cephalometric norms and any deviation from the prescribed values is considered abnormal. Most of these established cephalometric values are based on average values for the caucasian population¹⁰⁻¹². Whereas cephalometric values vary among different populations and have shown variations among different ethnic groups, gender, and age¹³⁻¹⁶. As a consequence, it is necessary to adjust the normal values, which are based on actual measurements obtained from population-based studies on various ethnic groups. India is diverse and a multiethnic country with more than a thousand ethnic groups^{17,18}. The established criteria for the Caucasian population do not apply to the Indian population due to structural variances, dietary habits, socioeconomic condition, cultural background, genetic, and environmental variables that impact growth and development.. There are only a limited number of studies on cephalometric analyses establishing norms for the South Indian population¹⁹⁻²⁴.

Bjork created a face diagram utilizing angular and linear measurements to estimate the pattern of facial prognathism^{5,6}. Jarabak cephalometric analysis was based on Bjork's work to determine the mandibular growth rotations⁷. Jarabak cephalometric analysis uses the cranial base (Sella-Nasion plane) as the reference plane to compare the sagittal, vertical, and intermaxillary relationships to determine various morphological characteristics, facial growth patterns, and skeletal patterns⁶. The analysis predicts the direction of mandibular growth from a facial polygon. This analysis has been proved to be effective in predicting the facial growth pattern, morphological characters, reaction to various orthopedic approaches, and functional alterations⁶. This analysis aids in the selection and design of orthopedic devices, assessing the therapeutic effects, and identifying proclivity towards orthopedic modification⁸.

The objectives of this paper is to develop Rakosi Jarabak cephalometric norms for the South Indian population and compare the measures to values from other ethnic groups.

MATERIALS AND METHOD:

In this cross-sectional study, South Indian adults visiting a private dental college between the age group of 18-30 years were selected. Ethical committee approval was obtained from the institutional ethical review board. Sample size calculation was done using the Jarabak ratio as the primary outcome and was carried out using G*Power software V 3.1 from the means and standard deviations of the two-class I samples (65.7 +/- 3.9 %; 68.5 +/- 3.5 %) from the study by Esra Jassim (2009)³. Keeping the alpha error at 0.01, power at 0.95, and an allocation ratio of 1 for a two-sided t-test, resulted in a sample size of 47 subjects per group. Intraoral examination was performed by an experienced orthodontist to check for the presence of any malocclusion. A total sample size of 100 subjects (50 females and 50 males) was selected for the study. Subjects with a complete set of permanent dentitions (not including third molars), ideal to mild class I malocclusion, and having no history of previous orthodontic treatment were included in the study. Subjects having clinical asymmetry or any other skeletal and dental deformity were excluded from the study sample. Lateral

cephalograms were obtained from the subjects who fulfilled the inclusion criteria and consented to participation in the study. The lateral cephalogram of all the selected patients was taken with the Orthophos XG 3D(Dentsply Sirona, UK) machine at 72 kVp, 15 mA, and an exposure time of 9.4 s. All Lateral cephalometric images taken were obtained in digital (jpeg) format. The lateral cephalograms were traced digitally using the Facad software version 3.1 (Ilexis AB, Linköping, Sweden). Various landmarks for Rakosi Jarabak analysis was performed, and angular measurements were analyzed (Figure 1)²⁵. All the cephalograms were traced by a single examiner who was well trained in using the software. All the cephalometric values were entered into an excel sheet.

Twenty percent of the sample size was used for the pilot study. Lateral cephalograms of ten subjects from each gender were selected randomly using random.org, an online true random number service, and retraced one week after carrying out the original measurements for estimating the intra-examiner error. Another expert examiner performed the lateral cephalometric analysis on the selected 20 cephalograms. The reliability coefficient was calculated using the formula: $1 - (Se^2 \div St^2)$, where Se^2 is the variance due to random error and St^2 is the total variance of the measurements. The measurements showed a high correlation, with values ranging from 0.99 to 0.97. All statistical analyses were performed with a 95% confidence level using IBM SPSS software version 23 (IBM, New York, United States). Descriptive Statistics was performed to obtain mean, and standard deviation (S.D). Independent samples t-test was performed for the comparison of the various parameters between genders. Comparison of South Indian means values to test for statistically significant differences between various ethnic populations including Caucasians, Brazilians, Iraqis. Saudi, Pakistani, Nepali, and Bangladeshi based on sex and overall average values were done using an independent t-test^{3,8,26-31}. The level of significance was set at 5%.

RESULT:

A total of Nineteen cephalometric parameters (Saddle angle, Articular angle, gonial angle upper and lower, the sum of angle, SNA, SNB, ANB, SNPog, Basal plane angle, Palatal - occlusal plane angle, Occlusal-Mandibular plane angle, Inclination angle, SN-Mandibular plane angle, Y-axis, P: A Facial ratio, Angulation of upper incisor-SN plane, Angulation of upper incisor to -Palatal plane, Angulation of lower incisor -Mandibular plane, Incisor position upper incisor- N-Pog, Incisor position lower incisor N pog, Interincisal angle) were assessed with rakosi analysis among 50 South Indian males and 50 South Indian females. Among the parameters assessed eighteen were angular and one was a proportion. The mean and standard deviation of the overall South Indian population, South Indian male and female population along with the p values obtained from comparison of male and female mean values are presented in Table 1. The Jarabak values of males and females from various ethnic groups and their comparison with the South Indian population are mentioned in Tables 2 and 3 respectively. The Jarabak values for the overall South Indian population and their comparison with various other ethnic populations are presented in Table 4. Inter operator reliability test showed high inter-operator reliability, with values ranging from 0.99 to 0.97.

Table 1: Comparison of various Jarabak standard values between Gender

PARAMETERS MEASURED	SOUTH INDIAN FEMALE AVERAGE	SOUTH INDIAN MALE AVERAGE	P-VALUE
Saddle angle	125.46 ⁰ ±4.6 ⁰	121.8 ⁰ ±5.9 ⁰	0.538
Articular angle	140.9 ⁰ ±7.3 ⁰	145.6 ⁰ ±7.7 ⁰	0.984
Gonial angle	123.8 ⁰ ±7 ⁰	119.9 ⁰ ±7 ⁰	0.394
Gonial upper	52.29 ⁰ ±4.5 ⁰	51.1 ⁰ ±4.1 ⁰	0.27
Gonial lower	71.5 ⁰ ±5.4 ⁰	70 ⁰ ±5.2 ⁰	0.707
Sum angle	390.6 ⁰ ±7.2 ⁰	388.6 ⁰ ±6.3 ⁰	0.725
SNA	82.5 ⁰ ±3.7 ⁰	82.55 ⁰ ±4.1 ⁰	0.786
SNB	80 ⁰ ±3.4 ⁰	80.5 ⁰ ±4.1 ⁰	0.683
ANB	2.50±1.40	2.050±10	0.647
SNPog	80.7 ⁰ ±3.7 ⁰	81.6 ⁰ ±4.1 ⁰	0.922
Basal plane angle	24 ⁰ ±5.8 ⁰	24 ⁰ ±6 ⁰	0.719
Palatal -Occlusal plane angle	6.99 ⁰ ±3.6 ⁰	6.49 ⁰ ±3.1 ⁰	0.906
Occlusal-Mandibular plane angle	17.05 ⁰ ±5.1 ⁰	17.5 ⁰ ±5.9 ⁰	0.118
Inclination angle	87.25 ⁰ ±3.2 ⁰	88.48 ⁰ ±3.1 ⁰	0.946

SN-Mandibular plane angle	30.0 \pm 7 ⁰	28.6 \pm 6.3 ⁰	0.77
Y axis	65.9 \pm 4.5 ⁰	64.6 \pm 4 ⁰	0.515
P:A Facial ratio	68.5 \pm 6.3	69.5 \pm 5.4	0.724
Angulation of upper incisor-SN plane	118.4 \pm 5 ⁰	115.2 \pm 1 ⁰	0.002
Angulation of upper incisor to - Palatal plane	55.35 \pm 5 ⁰	60.15 \pm 9.5 ⁰	0.071
Angulation of lower incisor - Mandibular plane	105.8 \pm 7.1 ⁰	101.75 \pm 7.1 ⁰	0.97
Incisor position upper incisor- N-Pog	8.6 \pm 3.4mm	7.6 \pm 3.3mm	0.06
Incisor position lower incisor N-pog	10.3 \pm 5mm	5.4 \pm 4.3mm	0.17
Interincisal angle	106 \pm 14.3 ⁰	114.3 \pm 14.3 ⁰	0.015

TABLE 2: The Jarabak values of males from various ethnic groups and their comparison with the South Indian population.

SOUTH INDIAN MALE	MEAN	S.D	t	p-value	
GONIAL ANGLE					
SOUTH INDIAN MALE	121.80	\pm 5.90			
BRAZIL MALE	121.56	\pm 6.91	0.1251	0.9008	
IRAQ MALE	122.80	\pm 4.80	0.8264	0.4111	

PAKISTAN MALE	126.48	±2.18	4.9703	0.0000	**
SAUDI MALE	125.81	±5.21	3.1968	0.0020	**
ARTICULAR ANGLE					
MALE	MEAN	S.D	t	p- value	
SOUTH INDIAN MALE	145.60	±7.70			
BRAZIL MALE	148.00	±8.21	1.0329	0.3055	
IRAQ MALE	143.73	±5.63	1.2459	0.2165	
PAKISTAN MALE	137.84	±2.95	6.2639	0.0000	**
SAUDI MALE	140.90	±8.01	2.6064	0.0109	**
GONIAL ANGLE					
MALE	MEAN	S.D	t	p- value	
SOUTH INDIAN MALE	119.90	±7.00			
BRAZIL MALE	122.19	±4.17	1.4376	0.1554	
IRAQ MALE	123.93	±5.80	1.4504	0.1510	
PAKISTAN MALE	128.48	±3.02	1.1606	0.2496	
SAUDI MALE	127.28	±6.57	1.5415	0.1272	
UPPER GONIAL ANGLE					
MALE	MEAN	S.D	t	p- value	
SOUTH INDIAN MALE	51.10	±4.10			
BRAZIL MALE	50.63	±4.15	1.1885	0.2390	
IRAQ MALE	50.33	±4.19	0.9608	0.3396	

PAKISTAN MALE	52.08	±1.03	0.6158	0.5399	
SAUDI MALE	52.17	±4.57	1.0061	0.3174	
LOWER GONIAL ANGLE					
MALE	MEAN	S.D	t	p- value	
SOUTH INDIAN MALE	70.00	±5.20			
BRAZIL MALE	71.56	±4.82	1.4117	0.1629	
IRAQ MALE	73.53	±4.10	1.0493	0.2973	
PAKISTAN MALE	74.00	±3.60	1.0300	0.3064	
SAUDI MALE	75.10	±4.01	1.0295	0.3064	
SUM OF ANGLES					
MALE	MEAN	S.D	t	p- value	
SOUTH INDIAN MALE	388.60	±6.30			
BRAZIL MALE	391.75	±6.02	1.8011	0.0764	
IRAQ MALE	390.47	±4.50	1.5384	0.1280	
PAKISTAN MALE	392.12	±2.38	3.4827	0.0008	**
SAUDI MALE	393.99	±3.77	4.8111	0.0000	**
JARABAK RATIO					
MALE	MEAN	S.D	t	p- value	
SOUTH INDIAN MALE	69.50	±5.4			
BRAZIL MALE	66.83	±5.11	1.7939	0.0775	
IRAQ MALE	68.57	±3.59	0.9201	0.3603	

PAKISTAN MALE	63.88	±0.6	7.2699	0.0000	**
SAUDI MALE	65.04	±3.7	4.4067	0.0000	**

TABLE 3: The Jarabak values of females from various ethnic groups and their comparison with the South Indian female population.

SADDLE ANGLE					
FEMALE	MEAN	S.D	t	p- value	
SOUTH INDIAN FEMALE	125.46	±4.60			
BRAZIL FEMALE	124.38	±6.34	0.6541	0.5152	
IRAQ FEMALE	126.20	±5.78	0.7307	0.4669	
PAKISTAN FEMALE	126.92	±3.20	1.6859	0.0961	
SAUDI FEMALE	125.73	±4.99	0.3177	0.7515	
ARTICULAR ANGLE					
FEMALE	MEAN	S.D	t	p- value	
SOUTH INDIAN FEMALE	140.90	±7.30			
BRAZIL FEMALE	144.88	±8.49	1.8766	0.0648	
IRAQ FEMALE	143.35	±6.17	1.7242	0.0882	
PAKISTAN FEMALE	136.24	±5.62	3.0526	0.0032	**
SAUDI FEMALE	142.90	±7.67	1.1618	0.2488	

GONIAL ANGLE					
FEMALE	MEAN	S.D	t	p- value	
SOUTH INDIAN FEMALE	123.80	±7.00			
BRAZIL FEMALE	122.06	±5.40	1.1306	0.2621	
IRAQ FEMALE	123.33	±4.55	0.3879	0.6990	
PAKISTAN FEMALE	127.76	±3.15	3.3719	0.0012	**
SAUDI FEMALE	126.17	±8.15	1.3399	0.1841	
UPPER GONIAL ANGLE					
FEMALE	MEAN	S.D	t	p- value	
SOUTH INDIAN FEMALE	52.29	±4.50			
BRAZIL FEMALE	50.31	±5.31	1.4977	0.1388	
IRAQ FEMALE	50.58	±3.30	2.0829	0.0402	**
PAKISTAN FEMALE	52.82	±1.63	0.7408	0.4612	
SAUDI FEMALE	51.11	±4.50	1.1502	0.2535	
LOWER GONIAL ANGLE					
FEMALE	MEAN	S.D	t	p- value	
SOUTH INDIAN FEMALE	71.50	±5.40			
BRAZIL FEMALE	71.75	±3.57	0.2292	0.8194	

IRAQ FEMALE	72.70	±3.98	1.2117	0.2289	
PAKISTAN FEMALE	73.28	±3.60	1.6953	0.0943	
SAUDI FEMALE	75.32	±5.49	3.0636	0.0030	**
SUM OF ANGLES					
FEMALE	MEAN	S.D	t	p- value	
SOUTH INDIAN FEMALE	390.60	±7.20			
BRAZIL FEMALE	391.31	±4.81	0.4855	0.6288	
IRAQ FEMALE	392.88	±4.70	1.8038	0.0747	
PAKISTAN FEMALE	390.18	±5.51	0.2774	0.7823	
SAUDI FEMALE	394.79	±5.58	2.9317	0.0044	**
JARABAK RATIO					
FEMALE	MEAN	S.D	t	p- value	
SOUTH INDIAN FEMALE	68.50	±6.30			
BRAZIL FEMALE	66.11	±3.03	2.1541	0.0347	**
IRAQ FEMALE	65.80	±3.92	2.4911	0.0146	**
PAKISTAN FEMALE	63.70	±1.96	4.9307	0.0000	**
SAUDI FEMALE	64.28	±4.24	3.5986	0.0006	**

TABLE 4: The Jarabak values for the overall South Indian population and their comparison with various other ethnic populations.

SADDLE ANGLE					
OVERALL	MEAN	S.D	t	p- value	
SOUTH INDIAN MEAN	123.50	±5.60			
IRAQ MEAN	124.74	±5.60	1.4232	0.1565	
BANGLADESH MEAN	122.29	±1.13	2.1180	0.0354	**
NEPAL MEAN	125.28	±5.97	2.2188	0.0276	**
ARTICULAR ANGLE					
OVERALL	MEAN	S.D	t	p- value	
SOUTH INDIAN MEAN	143.46	±7.80			
IRAQ MEAN	143.51	±5.91	0.0513	0.9591	
BANGLADESH MEAN	138.80	±2.24	5.7423	0.0000	**
NEPAL MEAN	141.20	±6.14	2.3096	0.0219	**
GONIAL ANGLE					
OVERALL	MEAN	S.D	t	p- value	
SOUTH INDIAN MEAN	121.78	±7.50			

IRAQ MEAN	123.59	±5.10	1.8676	0.0636	
BANGLADESH MEAN	124.62	±2.90	3.5318	0.0005	**
NEPAL MEAN	124.31	±6.59	2.5760	0.0107	**
UPPER GONIAL ANGLE					
OVERALL	MEAN	S.D	t	p- value	
SOUTH INDIAN MEAN	51.60	±4.10			
IRAQ MEAN	50.47	±3.68	1.8762	0.0624	
NEPAL MEAN	52.30	±3.65	1.2966	0.1962	
LOWER GONIAL ANGLE					
OVERALL	MEAN	S.D	t	p- value	
SOUTH INDIAN MEAN	70.00	±5.20			
IRAQ MEAN	73.06	±4.03	4.3119	0.0000	
NEPAL MEAN	72.29	±5.28	3.1499	0.0019	**
SUM OF ANGLES					
OVERALL	MEAN	S.D	t	p- value	
SOUTH INDIAN MEAN	388.60	±6.30			

IRAQ MEAN	391.84	±4.74	3.8274	0.0002	
NEPAL MEAN	390.80	±7.04	2.3794	0.0183	**
JARABAK RATIO					
OVERALL	MEAN	S.D	t	p-value	
SOUTH INDIAN MEAN	69.00	±5.80			
IRAQ MEAN	66.99	±4.00	2.6770	0.0082	
NEPAL MEAN	67.07	±6.37	2.2871	0.0232	**

DISCUSSION:

In this cross-sectional study, the Rakosi Jarabak norms for South Indian populations were determined. The results of this study provide norms for Jarabak's analysis in the South Indian population that are significantly different from those of other races such as Caucasians, Saudis, and Brazilians. Amongst the genders, we found a significant difference between south Indian males and females concerning upper incisor to SN plane value and interincisal angle, suggesting that south Indian females have more proclined upper incisor than males.

Skeletal parameters:

On comparing parameters amongst the different populations, the Saddle angle of the South Indian population was found to be similar to that of the Caucasians and Iraqis, indicating that the glenoid fossa in all three populations was located in similar positions. However, we found that these values were significantly higher than those found in the Bangladeshi population indicating an anteriorly positioned glenoid fossa and significantly lower than those found in the Nepali populations, indicating a more posteriorly positioned glenoid fossa. The Pakistani and Saudi male populations had more anteriorly located glenoid fossa than the South Indian male population. However, no such difference was observed in the female values of all the population. The Articular angle of the South Indian population was similar to that of the Caucasians and Iraqis. Bangladeshi and Nepalese populations, on the other hand, had a more retrognathic mandible. In comparison to the Bangladeshi and Nepalese populations, the upper and lower gonial angles, seen in the South Indian population suggested a horizontal growth pattern. Gonial angles in South Indian females were found to be significantly lower than the Pakistani population, whereas the South Indian male values did not show any deviations. The sum of the posterior angles also suggested a horizontal growth pattern. In comparison to Iraqi, and Nepali populations, the Jarabak ratio of South Indians, suggested a relatively greater posterior facial height and a horizontal growth pattern^{27,29}.

The south Indian population's Palatal - Occlusal plane angle showed a lower value and the occlusal to a mandibular plane angle showed a higher value. But both the values compensated for each other and resulted in a basal plane angle close to the Caucasian value. The mean Inclination Angle obtained for the South Indian population was similar to the Caucasian value²⁵.

Dental parameters:

In comparison to Caucasians and North Indian population, the angle of the upper incisor to SN plane and the angle of the upper incisor to the palatal plane indicated that the upper incisors are more proclined in the South Indian population^{25,32}. Females in the South Indian population had greater upper incisor proclination than males. The lower incisor to mandibular plane angle shows a more proclined lower incisors in the south Indian population²⁵.

Even though Bangladesh, Nepal, Pakistan are neighboring countries of India, yet, our study had found differences in their facial morphology as seen in their cephalometric values. This further emphasizes the need for more cephalometric norms based on ethnic populations. To our knowledge, this is the first study that has both established South Indian Rakosi Jarabak norms and compared them with the Caucasian and various other ethnic populations. Also, most of the studies were done using convenient sampling. We had not considered linear measurements in our study to avoid possible magnification errors.

LIMITATIONS AND FUTURE RECOMMENDATIONS:

India is a land of unity amongst diversity with multiple ethnic origins residing within the country. In the future, a pan-Indian study with a multicentric study design will be the need of the hour to evaluate the current results with a broader perspective giving us better insight into the facial morphological variations among various populations.

CONCLUSION:

This study establishes the south Indian ethnic norms for Rakosi Jarabak analysis. The south Indian norms vary from caucasian norms showing significant ethnic. These differences need to be considered when analyzing the cephalogram . These values will help in customizing treatment plans based on ethnic norms. The study concludes that different sets of cephalometric norms should be developed for different ethnic groups in order to aid orthodontists and surgeons in optimising treatment plans based on local norms

CONFLICT OF INTEREST:

There are no conflicts of interest.

GRANT SUPPORT AND FINANCIAL DISCLOSURE:

None

REFERENCE:

1. Hans MG, Palomo JM, Valiathan M. History of imaging in orthodontics from Broadbent to cone-beam computed tomography. *Am J Orthod Dentofacial Orthop* [Internet]. 2015 Dec;148(6):914–21. Available from: <http://dx.doi.org/10.1016/j.ajodo.2015.09.007>
2. Mohammad HA, Hassan A, Hussain SF, Others. Cephalometric evaluation for Malaysian Malay by Steiner analysis. *Sci Res Essays* [Internet]. 2011;6(3):627–34. Available from: <http://dx.doi.org/10.5897/SRE10.869>
3. Jassim ES. Cephalometric Norms of Iraqi Adult Using Jarabak Analysis. 2009 Jan 1 [cited 2020 Jun 29];5(1):28–31. Available from: <http://dx.doi.org/>
4. Ps K, Kumar P K, Others. PREVALENCE OF CLASS II DENTAL RELATION IN PERMANENT DENTITION-A RETROSPECTIVE STUDY. *European Journal of Molecular & Clinical Medicine* [Internet]. 2020;7(1):1121–7. Available from: https://ejmcm.com/article_2278.html
5. Björk A. Prediction of mandibular growth rotation. *Am J Orthod* [Internet]. 1969 Jun;55(6):585–99. Available from: [http://dx.doi.org/10.1016/0002-9416\(69\)90036-0](http://dx.doi.org/10.1016/0002-9416(69)90036-0)
6. Björk A. Cranial base development: A follow-up x-ray study of the individual variation in growth occurring between the ages of 12 and 20 years and its relation to brain case and face development. *Am J Orthod* [Internet]. 1955 Mar 1;41(3):198–225. Available from: <http://www.sciencedirect.com/science/article/pii/0002941655900051>
7. Jarabak JR, Fizzell JA. Technique and treatment with light-wire edgewise appliances [Internet]. C. V. Mosby Co.; 1972. 635 p. Available from: <https://play.google.com/store/books/details?id=jD9qAAAAMAAJ>
8. Kuramae M, Magnani MBB de A, Boeck EM, Lucato AS. Jarabak 's cephalometric analysis of Brazilian black patients. *Braz Dent J* [Internet]. 2007;18(3):258–62. Available from: <http://dx.doi.org/10.1590/s0103-64402007000300016>
9. Engel G, Spolter BM. Cephalometric and visual norms for a Japanese population. *Am J Orthod* [Internet]. 1981 Jul;80(1):48–60. Available from: [http://dx.doi.org/10.1016/0002-9416\(81\)90195-0](http://dx.doi.org/10.1016/0002-9416(81)90195-0)
10. Steiner CC. Cephalometrics for you and me [Internet]. Vol. 39, *American Journal of Orthodontics*. 1953. p. 729–55. Available from: [http://dx.doi.org/10.1016/0002-9416\(53\)90082-7](http://dx.doi.org/10.1016/0002-9416(53)90082-7)
11. Downs WB. Variations in facial relationships; their significance in treatment and prognosis. *Am J Orthod* [Internet]. 1948 Oct;34(10):812–40. Available from: [http://dx.doi.org/10.1016/0002-9416\(48\)90015-3](http://dx.doi.org/10.1016/0002-9416(48)90015-3)
12. Broadbent BH, Golden WH, Brown RG. BOLTON STANDARDS OF DENTOFACIAL DEVELOPMENT GROWTH [Internet]. Vol. 59, *Plastic and Reconstructive Surgery*. 1977. p. 115. Available from: <http://dx.doi.org/10.1097/00006534-197701000-00023>
13. Phelan T, Buschang PH, Behrents RG, Wintergerst AM, Ceen RF, Hernandez A. Variation in Class II malocclusion: comparison of Mexican mestizos and American whites. *Am J Orthod Dentofacial Orthop* [Internet]. 2004 Apr;125(4):418–25. Available from: <http://dx.doi.org/10.1016/j.ajodo.2003.03.011>
14. Bukhary MT. Comparative cephalometric study of Class III malocclusion in Saudi and Japanese adult females. *J Oral Sci* [Internet]. 2005 Jun;47(2):83–90. Available from: <http://dx.doi.org/10.2334/josnusd.47.83>
15. Ioi H, Nakata S, Nakasima A, Counts AL. Comparison of cephalometric norms between Japanese and Caucasian adults in antero-posterior and vertical dimension. *Eur J Orthod* [Internet]. 2007 Oct;29(5):493–9.

Available from: <http://dx.doi.org/10.1093/ejo/cjm059>

16. Hashim HA, AlBarakati SF. Cephalometric soft tissue profile analysis between two different ethnic groups: a comparative study. *J Contemp Dent Pract* [Internet]. 2003 May 15;4(2):60–73. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/12761590>
17. Wolpert SA, Calkins PB, Others (See All Contributors). Indo-European languages. 2020 Jul 22; Available from: <https://www.britannica.com/place/India/Indo-European-languages>
18. Majumder PP. Ethnic populations of India as seen from an evolutionary perspective. *J Biosci* [Internet]. 2001 Nov;26(4 Suppl):533–45. Available from: <http://dx.doi.org/10.1007/BF02704750>
19. Arunkumar KV, Reddy VV, Tauro DP. Establishment of Cephalometric Norms for the South Indian (Karnataka) Population Based on Burstone’s Analysis. *J Maxillofac Oral Surg* [Internet]. 2010 Jun;9(2):127–33. Available from: <http://dx.doi.org/10.1007/s12663-010-0039-2>
20. Nachiappan S, Tharanikumar S, Chandran A, Anusudha P, Nandini GD, Balasubramaniam M. A study to evaluate cephalometric hard tissue profile of Tamil population for orthognathic surgery. *J Pharm Bioallied Sci* [Internet]. 2015 Aug;7(Suppl 2):S680–6. Available from: <http://dx.doi.org/10.4103/0975-7406.163600>
21. Kalha AS, Latif A, Govardhan SN. Soft-tissue cephalometric norms in a South Indian ethnic population [Internet]. Vol. 133, *American Journal of Orthodontics and Dentofacial Orthopedics*. 2008. p. 876–81. Available from: <http://dx.doi.org/10.1016/j.ajodo.2006.05.043>
22. Thilagam R, Devadoss P, Kumar BR. Establishing Downs Cephalometric Norms among the South Indian Population: A Cross-Sectional Study. Available from: https://www.gkpublication.in/IJSHR_Vol.4_Issue.4_Oct2019/IJSHR003.pdf
23. Arora A, Peter E, Ani GS. Ready to Use Norms for Arnett Bergman Soft-Tissue Cephalometric Analysis for South Indian Population. *Contemp Clin Dent* [Internet]. 2018 Jun;9(Suppl 1):S45–51. Available from: http://dx.doi.org/10.4103/ccd.ccd_6_18
24. Grewal H, Sharma H, Aggarwal N. A Cephalometric Comparison of Horizontal and Vertical Skeletal Parameters in North and South Indian Population Groups. *J Pierre Fauchard Acad* [Internet]. 2018 Nov 6 [cited 2020 Jul 25];27(1):14–7. Available from: <http://www.informaticsjournals.com/index.php/jpfa/article/view/22636>
25. Rakosi T. *An Atlas and Manual of Cephalometric Radiography* [Internet]. Year Book Medical Publishers; 1981. Available from: https://play.google.com/store/books/details?id=EV_wPAAACAAJ
26. Alshahrani I, Kamran MA, Alhaizaey A, Abumelha N. Evaluation of skeletal variations and establishment of Cephalometric Norms in Saudi Sub Population using Bjork Jarabak’s analysis [Internet]. Vol. 34, *Pakistan Journal of Medical Sciences*. 2018. Available from: <http://dx.doi.org/10.12669/pjms.345.15556>
27. Berum HER, Fatah AA. Cephalometric Study of Iraqi Adult Subjects with CI I and CI III Skeletal Relationships and Their Effects on Masseter Muscle Thickness by Using Ultrasonography [Internet]. Vol. 28, *Journal of Baghdad College of Dentistry*. 2016. p. 84–91. Available from: <http://dx.doi.org/10.12816/0024714>
28. Mahroof V, Others. A Cephalometric Analysis for Pakistani Adults Using Jarabak Bjork’s Analysis. *International medican journal* [Internet]. 2017;24(1):128–31. Available from: <https://pdfs.semanticscholar.org/b173/55151b176b06bc036eebce34d79b178c00bb.pdf>
29. Pokharel M, Shrestha SL. Cephalometric evaluation of Brahmins of Kathmandu, Nepal based on Jarabak’s analysis [Internet]. Vol. 8, *Journal of Kathmandu Medical College*. 2019. p. 13–9. Available from:

<http://dx.doi.org/10.3126/jkmc.v8i1.25263>

30. Khan T, Ahmed I, Gul-e-Erum. Cephalometric measurements of a Pakistani adult sample according to Jarabak's analysis. *J Pak Med Assoc* [Internet]. 2013 Nov;63(11):1345–8. Available from: <https://www.ncbi.nlm.nih.gov/pubmed/24392516>
31. Alam MK, Basri R, Purmal K, Sikder MA, Iida J. Determining Cephalometric Norms for Bangladeshi Adults Using Bjork-Jarabak's Analysis. *International Medical Journal (1994)* [Internet]. 2013 Jan 1 [cited 2021 Jun 2];19(4):329–32. Available from: <http://dx.doi.org/>
32. Valiathan M, Valiathan A, Ravinder V. Jarabak Cephalometric Analysis Reborn [Internet]. Vol. 35, *Journal of Indian Orthodontic Society*. 2001. p. 66–76. Available from: <http://dx.doi.org/10.1177/0974909820010302>



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