**Introduction**

There is a deficiency in the information regarding the anatomy of dromedary camels, especially those involving the fibrous joints (sutures) of the camels’ skull (Rice, 2008; Lindsay *et al.*, 2021) mentioned that in horses, craniofacial sutures were fibrous connections between the flat bones of the skull, enabling a limited amount of movement. Sutures are not only used to join adjoining bones; they are the principal sites of osteogenesis in the skull (Rice, 2008). Smuts and Bezuidenhout (1987) presented early research that explained the bones that form the camels’ skull. According to previous studies, the sutures are caused by anatomical structure and functional differences in the camel skull (Wilson, 1984; El-Allali *et al.*, 2013). The shape of the skull relates to the configuration of articulation between the skull bones and related bones such as the frontal, temporal, zygomatic, and parietal bones which have been proven to create a full suture-or fissure-like structure in the zygomatic and parietal bones, in different domestic animals (Getty, 1975; Evans, 1993) and goat (Yi *et al.*, 1998). This work aims to focus on the sutures and outer anatomical landmark points of the camel skull. The results of this study will help clarification of the pattern and shape of sutures. It might be useful in osteological examinations and give material for future scientific research.

**Materials and Methods**

Ten camel skulls of both sexes 4–10 months old, less than one year (Ramadan, 1994), were used in this study. The heads were prepared by using the boiling and maceration techniques. The gross and radiographic photos of the sutures were taken using a digital camera and Siemens mobile full-wave X-ray machine (Siemens Medical Solutions, Erlangen, Germany).

**Results**: The skull is made up of nineteen bones -6 single and 13 paired-the majority of which are joined by joints termed as sutures. The sutures of the camel skulls were viewed in dorsal, ventral, lateral-vertical, and inside directions. They were of four types which are the coronal, serrate, plane, and squamosal sutures in different positions of the skull.

**Conclusion**: The current study showed that the fibrous joints of camel skulls (sutures) were similar to those of other domestic animals. This information is critical for supporting veterinarians to differentiate sutures from fractures that may have happened in the skull of the dromedary camel using radiological pictures.

**Keywords**: Morphology, Skull, Sutures, Young camels.
Ethical approval

All the procedures involving sample collection were conducted as per the Institutional Animal Ethics Committee.

Results

The skull is the osseous structure of the head. It is the most complex bony structure. It has the form of a five-sided pentagon irregularly. The skull consists of 36 separate bones, many of which are paired, some of them single, and most of these bones are held together by joints termed as sutures. The cranial suture consists of adjacent borders of the skull bones. Some sutures do it from the sides and back of the skull to the forehead. From the front of the head to the back, one suture is located in the middle of the skull. The junctions of sutures have morphological changes different from one bone to another. The sutures articulately help in the formation of the face by firmly connecting the surrounding skull bones. Sutures form a tight union that prevents most movement between the bones. Most sutures are named for the bones articulate, but some have special names of their own. The sutures joints of the camel skull are divided into four groups according to the viewer's surface.

The dorsal group

This group of sutures is seen from the dorsal surface (Fig. 1). This includes the articulation points of the following nasal, frontal, parietal, interparietal, and lacrimal bones.

1. Sutura plana internasalis (S.int)

It is single, formed between two of the nasal bones of the opposite side, it lies midline rostral to the facial skull (Fig. 1A, a; B, a; and D, a).

Fig. 1. Dorsal view of skull showing the site of the skull sutures. (A): (a) S.int: Sutura internasalis, (b) S.frn: Sutura frontonasalis, (c) S.fr: Sutura frontalis and (d) S.sa: Sutura sagittalis. The camel’s age is 10 months. (B): (a) S.int: Sutura internasalis, (b) S.frn: Sutura frontonasalis, (c) S.co: Sutura Coronalis Or S.frp: Sutura frontoparietalis, (d) S.sa: Sutura sagittalis. The camel’s age is 6 months. (C): (a) S.frn: Sutura frontonasalis, (b) S.fr: Sutura frontalis, (c) S.co: Sutura Coronalis Or S.frp: Sutura frontoparietalis, (d) S.sa: Sutura sagittalis, (e) S.sc: Sutura squamosal cranii or S.pat: Sutura squamosal parieto-temporallis. The camel’s age is 6 months. (D): (a) S.int: Sutura internasalis, (b) S.frn: Sutura frontonasalis, (c) S.fr: Sutura frontalis, (d) S.co: Sutura Coronalis or S.frp: Sutura frontoparietalis, (e) S.sa: Sutura sagittalis, (f) S.pao: Sutura Parieto-occipitalis. The camel’s age is 4 months.
2. Sutura serrata frontonasalis (S.frn)
   It is made between the caudal edge of the nasal bones and the cranial border of the frontal bones and has uneven borders; the caudal projection of the nasofrontal suture is more caudal than the maxillary-frontal suture (Fig. 1A, b; B, b; C, a; and D, b). The frontonasal suture has a higher degree of interdigitation than the other sutures.

3. Sutura plana frontalis (S.fr)
   It is a vertical suture between the right and left frontal halves. but it only often ends up in adults (Fig. 1A, c; C,b; and D,c). In young camels, it was visible in the skull, but following ossification, it vanished altogether.

4. Sutura Coronalis (S.co)
   It is termed as Sutura frontoparietalis—(S.frp). It is formed between the caudal aspect of the frontal and the cranio-ventral aspect of the parietal bones (Figs. 1B, c; C, c; D, d; and 6f). The coronal suture is smooth and not prominent. The coronal suture between the frontal and parietal plate bone transferred to synostosis where the fusion of the parietal and frontal bone.

5. Sutura sagittalis (S.saa) or Sutura plana parietalis (S.pa)
   It is a single and extends from the parietal plate bone at the coronal suture cranially to the nuchal crest caudally (Figs. 1A, d; B, d; C, d; D, e; 6e; and 7a), where the two parietal bones meet in the suture. The sagittal suture between the two parietal bone transfer to synostosis where the fusion of the two parietal bones.

6. Sutura serrata Parieto-occipitalis (S.pao)
   Each parietal plate bone joins the occipital bone. It extends transversely direction at the back of the skull (Figs. 1D, f and 6g).

The lateral group
   The sutures in this group are paired and can be visible from the lateral side (Figs. 2 and 5). This includes those related to incisive, maxillary, lacrimal, zygomatic, and temporal.

1. Sutura Serrata incisiveomaxillaris (S.imm)
   The suture has irregular borders in both bones where the incisive bone joins laterally and vertically with the lacrimal bone (Figs. 2A, a and 5a).

2. Sutura plana nasomaxillaris (S.nam)
   I have plane borders, and the nasal bone articulates laterally and horizontally with the lacrimal bone (Figs. 2A, b and 5b).

3. Sutura Serrata frontomaxillaris (S.frm)
   They have bilateral long narrow cuts—fissures, like were observed in the area, joined between the frontal and maxillary bones (Fig. 2A, c). There was no continuous articulation of the front maxillary suture where the bones met in some camels, while they were either absent or unilateral in the remaining skulls.

4. Sutura Serrata lacrimomaxillaris (S.lam)
   This suture has irregular margins at the lacrimal bone and articulates horizontally with the molar bone, it lies rostral to the level of the orbit of the skull (Fig. 2B, a).

5. Sutura Serrata frontolacrimalis (S.frl)
   The frontal bone articulates laterally with the lacrimal bone, its irregular borders and lies dorsolateral of the skull (Fig. 2B, b and C, b).

6. Sutura Serrata zygomaticomaxillaris (S.zym)
   The maxillary bone meets vertical with the zygomatic bone, this suture has an irregular border of both bones (Fig. 2A, e; B, c; and C, c).

7. Sutura plana zygomaticotemporalis (S.zyt)
   It is the overlapping and adhesion of the zygomatic process of the temporal bone and the temporal process of zygomatic bone through the plane edges (Fig. 2C, d).

8. Sutura squamosal cranii (S.sc)
   It is called Sutura squamosal parieto-temporalis (S.pat) joins the parietal bone and the temporal bone bilaterally (Figs. 1C, c; 2D, a; and 5c). It extends caudally, curves ventrally, and continues as the parietal-occipital suture. The occipitotemporal suture and the parietotemporal suture connect the lateral end of the lambdoid suture.

9. Sutura occipital-temporalis(S.oct) or Sutura Squamosal occiptitomastoidea (S.ocm)
   It is the obliquely directed connection of the cranial margin of the squamous occipital bone and the mastoid part of the temporal bone (Fig. 3A, f).

10. sutura squamosopetrosa (S.sq p)
    It takes the form of a slight arc representing the union of the external border of the squamous part and petrous portions of the temporal bone (Figs. 2D, b and 5e). The occipitotemporal suture and the parietotemporal suture meet the lateral end of the lambdoid suture at the assertion.

11. Sutura lambdoidea (S.la)
    It is located at the end of the skull between the two parietal and occipital bones and forms a dens (d) shape (Fig. 2D, c). It is continuous with the occipital-mastoid suture, which connects the occipital bone with the mastoid part of the temporal bones.

The ventral group
   It comprises skull sutures that are apparent from the ventral view, which also include those connected to the palatine, pterygoid, sphenoid, temporal, and occipital bone (Figs. 3 and 6).

1. Sutura plana incisive (S.inc)
   The anterior palatine suture appears as a linear suture in young skulls that extends from the ventral surface of the palatine process of the maxillary bone to the incisive foramen and the space between the lateral incisor and the canine tooth (Fig. 3A, a).

2. Sutura plana palatina mediana (S.pam)
   It is formed at the line of fusion of the horizontal plates of the palatine processes of the maxillary bone at the median plane (Figs. 3A, b; B, a; and 6a). It extends rostrally through the inter-incisive suture and continues the transverse palatine suture causally.

3. Sutura Serrata palatina transversa (S.pat)
   It is formed of unit two of the palatine bones, and the palatine process of the maxillary (Figs. 3A, c; B, b; and 6b).
4. Sutura plana palatomaxillaris (S.pam)
It joins the end of the alveolar margin with the horizontal plate of the maxillary bone with the lateral margin of the palatine bone (Figs. 2E, c; 3A, d; and B, c).

5. Sutura foliata sphenovomeriana (S.sphp)
It is a cranial suture that connects the sphenoid and vomer bones to the nasal septum ventrally (Fig. 3A, e; B, d; and 6d). It has small articular surfaces that are separated into thin parallel lamellas that correspond to the vomer and sphenoid bones.

6. Sutura plana sphen-occipitalis (S.spho)
It is the junction between the basephenoid and basioccipital plate bones, the suture has oblique articular surfaces that are separated into thin parallel lamellas that correspond to the sphenoid and occipital bones (Figs. 2E, c; 3A, f; and B, e).

7. Sutura folata pterygo-Palatino-maxillaris (S.ptpm)
This suture is attached to four pieces of ossification are pterygoid, maxillary, palatine, lateral, and medial plates of the pterygoid process of the sphenoid bone (Figs. 2E, d; 3B, f; and 6, c). It has been found the cranial-ventrally direction of the palate-maxillary-sphenoid bones. The pterygoplatomaxillary suture is considered to have an important role in the posteroanterior growing of the maxilla.

8. Sutura squamosal Petroulis (S.sp)
It articulates between the interosseous borders of the petrous and squamous parts of the temporal bone (Fig. 2D, b and E, a).

9. Sutura foliata sphenomaxillaris (S.sphm)
It attaches the pterygoid processes of the basephenoid part of the sphenoid bone and the hook of the maxillary bone (Fig. 2E, a).

10. Sutura plana sphenoparietalis (S.sphp)
The sphenoid-petrosal of temporal suture or spheno-squamosal suture connects the caudal edge of the greater wing of the sphenoid bone with the cranial border of the squamous part of the temporal bone (Fig. 3A, h). This suture is a vertical cranial suture that
lies directly lateral to the foramen oval and forms part of the caudal wall of the foramen lacerum.

11. Sutura plana tympanopetrousalis (S. typ)
It lies between the cranial edge of the tympanic and petrous parts of the temporal bone (Fig. 2E, b). It is considered a medial continuation of the tympanic squamosal suture.

The inside a group
The skull sutures of this group are visible from the inside of the skull involving the ethmoid bone (Figs. 4 and 7). It articulates with the frontal bone dorsally, two parietal bones laterally, and sphenoid and vomer bone ventrally.

1. Sutura Serrata frontoethmoidalis (S. freth)
The suture is formed between the cribriform plate of the ethmoid bone and the ventral aspect of the frontal bone (Figs. 4a and 7b).

2. Sutura limbosa parieto ethmoidalis (S. paeth)
It is a bilateral and overlapping suture. It is located between the ethmoid bone's perpendicular plate and the medial wall of the parietal bone (Figs. 4b and 7c).

3. Sutura limbosa sphenoothmoidalis (S. spheth)
It is formed between the body of the prephenoid of the sphenoid bone and the perpendicular and cribiform plates of the ethmoidal bone (Figs. 4c and 7d).

Discussion
All bones of the skull except the mandible are firmly interconnected in adults by immobile fibrous joints called sutures. The pattern and shape of the sutures in the skull depending on the shape and size of the bones involved in different types of animals, especially camels.

The sutures in the camel skull were investigated, and it was revealed that the bones are joined by sutures. These findings agree with that of Standring (2008) who stated that the majority of these bones were connected by sutures and are isolated sutural bones of different shapes and sizes. Cohen (2000) and Persson (1995) recorded that the sutures are sites of appositional bone growth that are crucial in the developing skull. Klein et al. (2019) showed that the sutures are not always
in the same anatomical location. On the contrary, in our study, the location doesn’t change, but with the development of age, it becomes less visible as a result of the ossification process. On the other hand; De Pollack (1996) stated that increased bone growth at suture margins is linked to cranial suture fusion (craniosynostosis) and added that Jones et al. (2011) recorded that there are over 100 sutural joints in the skull. The suture has been intensively investigated as a model system for skeletal development, according to the report by Di Ieva et al. (2013).

The pattern of joints between the facial and cranial bones and the surrounding bones, such as the maxillary and others, has been shown in numerous domestic animals as having a full suture- or fissure-like structure (Getty, 1975; Miller et al., 1975). The camel skull has various types of sutures which are related to the shape and nature of the attached bone to give the skull a unique shape that suits the environment in which it lives. Our findings are in accordance with those in different domestic animals (Getty, 1975; Evans, 1993) and goats (Yi et al., 2001) reported that the differences between animals depend on the articulation configuration between the skull bones and adjacent bones such as the maxillary, lacrimal, and incisive bones, which had been featured in a variety of different animals as producing a full suture.

In camels, the internasal suture and nasal suture were fused tightly to the surrounding bones, unlike in goats by Olopade (2006) and cattle by Getty (1975); Dyce et al. (2010), whereas Nickel et al. (1986) mentioned a prominent straight internasal suture in domestic animals. On the contrary, they were not completely fused to the surrounding bones, according to Getty (1975) and Dyce et al. (2010).

According to the coronal suture of the camel, it was smooth and not prominent. These results disagree with Capitan et al. (2011) presented skull coronal suture synostosis in cattle. On the other hand, the frontonasal suture has been found to have a higher degree of interdigitation than the other sutures (Rafferty and Herring, 1999).

In this study, the incisive and maxillary bones were observed articulated caudodorsally with the maxillary bone. Our results are in agreement with Smut (1986) in camels and Getty (1975) and Dyce et al. (2010) in

![Fig. 4. Vertical or inside view of skull showing the position of the skull sutures. (a) S.freth: Sutura frontoethmoidalis, (b) S.paeth: Sutura parieto etmoidalis, (c) S.spheth: Sutura sphenoethmoidalis. The camel’s age is 6 months.](image)

![Fig. 5. Lateral radiograph of camel head view showing site of the skull sutures. (a) S.incm: Sutura incisiveomaxillaris, (b) S.nam: Sutura plana nasomaxillaris, (c) S.sc: Sutura squamosal cranii or S.pat: Sutura squamosal parieto-temporallis, (d) S.oct: Sutura occipital-temporalis or S.ocm: occipitomastoidea, (e) S.sqp: Sutura squamosopetrousalis. The camel’s age is 10 months.](image)
the sheep and cattle that stated the incisive bone was in contact with maxillary bones only.

On the other hand, the relevant findings disagree with Yahya et al. (2014) who reported that the incisive bone was related caudo-dorsally with maxillary and nasal bones in camels.

Yahya et al. (2014) represented that two types of suture patterns were observed; the first type of nasal-maxillary-incisive was the articulation of the maxilla to the nasal bone dorsally and the incisive bone rostro-ventrally to form naso-maxillo-incisive notch, while the second type was nasal-incisive notches. These findings were
not observed in the current investigation because there is no connection between the incisive and nasal bones, only between the incisive and maxillary bones, which form the incisive maxillary suture. However, there was various information concerning the nasolacrimal suture and the nasal-maxillary suture, which was mostly shown as the nasomaxillary suture in ruminants (Nickel et al., 1986).

Smuts and Bezuidenhout (1987) stated that the naso-incisive suture was clearly in camel; in contrast, the nasal-incisive suture was not seen in this study, which is similar to Yahya et al. (2014).

A paired nasofrontal suture is serrat edges and formed between the caudal aspect of the nasal bones and the cranial aspect of the frontal bones. The nasofrontal suture in this study has a large and wide surface resulting in a wider surface between the dorsal borders of the orbits between two frontal bones. These observations were in agreement with previously published reports in camel (Choudhary et al., 2021).

Raghavan (1964) in ox, while Reda (2019) in lion published that the caudal projection of the naos-frontal suture extended more caudal than that of the maxillary-frontal suture. Moreover; Yahaya et al. (2012) in camels showed that there was no continuous meeting of the frontomaxillary suture in some camels and added that they were either absent or sometimes unilateral in the remaining skulls, in contrast, we resulted from a disagreement with the previous author where our results the maxillary-frontal suture was bilateral and all specimens. On the other hand, the nasofrontal suture of the horse was small and narrow as reported by Dyce et al. (2010).

Due to the absence of lacrimal bones at the place of meeting between the nasal, frontal, and maxillary bones in camels, nasofrontomaxillary suture found in this study cannot be termed a nasolacrimal fissure as in horses, cattle, and goats. This is because camel lacrimal bone is so small that it cannot reach the site of meetings between nasal and maxillary bone as recorded in cattle, goats, and horses by Getty (1975) and Dyce et al. (2010). The parietal and interparietal suture were located on the nuchal transverse crest and this suture united the parietal, interparietal bones, and nuchal crest of the occipital bone also shown in the ox skull (Raghavan, 1964). Similar recommendations were advised in previous studies by Sun et al. (2004) who stated that the internal surfaces of the interparietal sutures of all animals were flat or slightly irregular. In this work, the occipital-mastoid squamosal suture or occipitotemporal suture extends in the groove between the occipital bone and the mastoid process of the temporal bone. Our findings agree with that of Shahid and Kausar (2005) in camels who recorded that the occipital bone joined the parietal bone in the transverse suture. In contrast to our findings, Choudhary et al. (2021) camel mentioned the occipital-temporal suture in camel was situated between the occipital and parietal behind, the frontal dorsal and the sphenoid ventrally. Similar results for median palatine have been reported by El-Allali et al. (2017) in camels who reported that the median palatine suture is formed at the lines of fusion of the two palatine bones and two maxillae bones and added that transverse palatine suture is the fusion of palatine bone and the palatine process of the maxillary bone. Contrary to the median palatine suture, a transverse palatine suture was missing in the binturong (Kalita et al., 2020).

The spaces that remain in ruminants between most of the head bones on the other cannot be sutured but form fissures (Yahaya et al., 2014). Smuts and Bezuidenhout (1987) reported that the camel skull outline appears closer to that of the equine. Similarities also exist in the age-related changing of the skull surface.

The ethmoid sutures in this study were the fronto-ethmoidal, parietal-ethmoidal, and sphenoid-ethmoidal sutures agree with Getty (1975) and Dyce et al. (2010) in domestic animals, and Gibelli et al. (2018) in humans recorded that the ethmoid bone consists of the cribriform plate, two ethmoid labyrinths, and the perpendicular plate articulates with frontal, parietal, and sphenoid bones. Finally, premature cranial suture fusion (craniosynostosis) is associated with increased bone formation at suture margins.

**Conclusion**

The present study provided a solid foundation for a description of the cranial suture in the camel, which was the anatomical description of the camels’ skull suture types including coronal, serrat, plane, squamosal, and foliate, which were different from other animals. The suture has been well studied as a model system. The sutures in their various forms were the locations of the union of the skull’s bones. These sutures form important anatomical landmark points for surgical approaches to the closed box of the neuroskull enclosing the brain, arteries, and venous sinuses. These sutures form important anatomical landmark points for surgical approaches to the closed box of the neuro skull enclosing the brain, arteries, and venous sinuses.

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**Conflict of interest**

The authors declare that they have no competing interests.

**Authors contributions**

G.A.: planned and conceived the study. G.A. and F.A. performed the practical section and interpreted
the results. Both authors wrote and revised the final manuscript.

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