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Main Manuscript for

Early life of Neanderthals

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Classification

Biological Sciences, Anthropology Physical Sciences, Geology

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Keywords

Neanderthal ontogeny, nursing strategy, dental histology, spatially-resolved chemical analyses, life histories, Sr/Ca.

Author Contributions

S.B. initiated and led the study; A.N., F.L., M.R., C.D., L.B., M.P., W.M., S.B. designed the study; A.CI., A.H., D.E., F.L., S.S., T.G., W.M. produced chemical/isotopic data; F.B. and R.P. produced ecological framework; A.N., C.D., L.B. produced histology data; C.T., F.BR. produced the microtomographic record; A.H., A.N., D.E., E.BR., F.L., G.O., L.B., W.M. analyzed or assisted in analysis of data; M.P., M.R., R.D., A.L., D.D. coordinated archaeological excavations; A.C., C.F., E.B., E.C., G.M., G.O., I.D., S.A. curated, sampled and/or described analyzed teeth; A.N., C.D., F.L., L.B., S.B., W.M. wrote the manuscript with considerable input from D.E., M.R., F.B., M.P. and with contributions from all authors; all authors contributed to final interpretation of data.

Abstract

The early onset of weaning in modern humans has been linked to the high nutritional demand of brain development that is intimately connected with infant physiology and growth rate. In Neanderthals, ontogenetic patterns in early life are still debated, with some studies suggesting an accelerated development and others indicating only subtle differences to modern humans. Here we report the onset of weaning and rates of enamel growth using an unprecedented sample set of three late (~70-50 ka) Neanderthals and one Upper Paleolithic modern human from Northeastern-Italy via spatially-resolved chemical/isotopic analyses and histomorphometry of deciduous teeth. Our results reveal that the modern human nursing strategy, with onset of weaning at 5-6 months, was present among these Neanderthals. This evidence, combined with dental development akin to modern humans, highlights their similar metabolic constraints during early life and excludes late weaning as a factor contributing to Neanderthals' demise.

Significance Statement

The extent to which Neanderthals differ from us is the current focus of many studies in human evolution. There is debate about their pace of growth and early life metabolic constraints, both of which are still poorly understood. Here we use chemical and isotopic patterns in tandem with enamel growth rates of three Neanderthal milk teeth from Northeastern Italy to explore the early life of these individuals. Our study shows that these Neanderthals started to wean children at 5-6 months akin to modern humans, implying similar energy demands during early infancy. Dental growth rates confirm this and follow trajectories comparable with modern humans. Contrary to previous evidence, we suggest that differences in weaning age did not contribute to Neanderthals' demise.

Main Text

28 Introduction

Maternal physiology, breastfeeding and the first introduction of supplementary foods are key determinants of human growth (1). The high nutritional demands of the human brain

during the first years of life has been identified as the main reason for the early weaning 32 onset in modern humans (2, 3). Indeed, supplementary food is needed when infant's 33 nutritional requirements exceed what the mother can provide through breastmilk only (4) 34 and this dietary development can introduce foods that are higher in protein, calories and 35 key micro-nutrients than maternal milk (4, 5). Weaning onset occurs in contemporary 36 non-industrial human societies at a modal age of 6 months (6). 37 38 At present, our knowledge about the link between the pace of child growth, maternal behavior and the onset of weaning among Neanderthals is still limited. Previous work 39 based on permanent teeth from eight Neanderthal specimens reported that Neanderthal 40 tooth crowns tend to develop faster than in modern humans, suggesting infant growth was 41 42 generally accelerated (7). However, a permanent first molar and a second deciduous molar from La Chaise (France, 127-116 ka and <163 ka respectively) placed rates of 43 44 Neanderthal tooth growth within the range of modern humans (8). Equally, the association between dental and skeletal growth in a 7-year-old Neanderthal from El 45 46 Sidròn (Spain, 49 ka) indicated that Neanderthals and modern humans were similar in terms of ontogenetic development, with only small-scale dissimilarities in acceleration or 47 48 deceleration of skeletal maturation (9). Finally, other work suggested that the early growth of the Neanderthal brain was as fast as in modern humans with similar energetic 49 50 demands (10). Maps of Ba/Ca ratios of permanent tooth sections of two early Neanderthals (Payre 6, 250 ka and Scladina, 120 ka) have been interpreted 51 (controversially, see below) as indicators of weaning onset at ~9 months (11) and 7 52 months (12) of age respectively, later than the modal age in contemporary humans (6). 53 54 Similarly, wear stage analyses of a large number of deciduous dentitions suggested that introduction of solid food in Neanderthals was delayed by one year compared to modern 55 56 humans (13). Here we investigate such key aspects of early life in Neanderthals by combining new data 57 on chemical detection of weaning onset with deciduous enamel growth rates. We utilize 58 dental histomorphometry (8, 14), spatially-resolved chemical (15) and isotopic profiles 59 (16, 17) of dental enamel to reconstruct growth rates (14), nursing practices (4) and 60 mobility (16) during the Middle and Upper Paleolithic at high time resolution (up to 61

weekly). We analyzed an unprecedented set of teeth (n = 4) (SI Appendix, Text S1) from 62 adjacent archaeological sites in Northeastern Italy (SI Appendix, Text S2), dated from the 63 Late Middle to the Early Upper Paleolithic, from Neanderthal-modern human contexts 64 (70-40 ka). These four exfoliated deciduous fossil teeth include three Neanderthals 65 (Nadale 1, a lower right deciduous first molar (19), ~70 ka; Fumane 1, a lower left 66 deciduous second molar (18), ~50 ka; Riparo Broion 1, an upper left deciduous canine 67 68 (20), ~50 ka) and one Early Upper Paleolithic modern human (UPMH) as comparative specimen from the Fumane site (Fumane 2, an upper right deciduous second incisor (21), 69 Protoaurignacian, ~40 ka) (Fig. 1). 70

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[Insert Figure 1 here]

Figure 1. Geographical, paleoecological and chronological framework. (a) Oxygen 73 isotope curve from NGRIP (22), with Greenland Stadials 5-21 highlighted. Chronologies 74 of the human specimens are also reported (see Supplementary Information for details); 75 Fumane 2 is UPMH (green), while Nadale 1, Riparo Broion 1 and Fumane 1 are 76 77 Neanderthals (yellow). (b,c,d) Modelled Alpine glacier extent during the time intervals of the teeth recovered at the sites of Fumane Cave (b,c), Riparo Broion (c) and Nadale (d); 78 location within Italy is shown in the inset. Simulations show a high temporal variability 79 in the total modelled ice volume during Marine Isotope Stages 4 (70 ka snapshot) and 3 80 (50, 40 ka snapshots) with glaciers flowing into the major valleys and possibly even onto 81 the foreland (23). 82

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84 Exfoliated deciduous teeth derive from individuals who survived permanent tooth replacement and were thus unaffected by any mortality-related bias (24). All teeth come 85 from the same geographic area within a ~55 km radius (Fig. 1), and Fumane 1 and 2 were 86 87 recovered from different archaeological layers in the same cave, thus allowing direct 88 comparisons in a well-constrained eco-geographical setting. We quantified enamel incremental growth parameters such as postnatal crown formation 89 90 time and daily enamel secretion rates (25), and we detected the presence of the neonatal line as birth marker (26) by optical light microscopy on thin sections of the deciduous 91 92 dental crowns. Weaning onset was investigated via Sr/Ca profiles on the same histological sections along the enamel-dentine junction (EDJ) by laser-ablation 93

inductively-coupled-plasma mass spectrometry (LA-ICPMS) (15). In order to detect mobility and/or potential non-local food sources in maternal diet, ⁸⁷Sr/⁸⁶Sr isotope ratio profiles were measured by LA-multi-collector-ICPMS (see Materials and Methods) (16, 17). Moreover, we evaluated elemental ratio profiles in teeth from children with known life history (*SI Appendix*, Text S3, (15)).

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Results

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The neonatal lines marking birth were visible in all four archaeological specimens, despite their worn crowns (SI Appendix, Fig. S1), allowing the precise estimation of postnatal crown formation times (Fig. 2a). The deciduous first molar Nadale 1 and the deciduous canine Riparo Broion 1 lie within the modern human variability (27-30), while the second deciduous molar Fumane 1 shows a shorter postnatal crown formation time compared with the known archaeological and modern human range (27). The UPMH Fumane 2 deciduous lateral incisor postnatal crown formation time falls into the lower limit of the modern human range (28, 30). Overall, the enamel growth rates and the time to form postnatal enamel compares well with modern human data, regardless of differences in their relative tissue volumes and morphologies (7-9). Daily enamel secretion rates (DSRs) of all specimens, collected in the first 100 µm layer along the EDJ where laser tracks were run, are reported in Figure 2b, compared with range of variation (min., mean, max.) of modern humans (27-30). Neanderthal DSRs in the first 100 µm of the enamel layer are slower than the corresponding modern human range of variability. However, when the entire dental crown is considered, the distributions of Neanderthal DSRs lie within the lower variability ranges of modern humans (Fig. 2c). The UPMH Fumane 2 DSRs fit the lower portion of the modern human ranges (Fig. 2b,c). The postnatal crown formation times in Neanderthals couple with slower DSRs than in modern humans, as expected given the thinner enamel in Neanderthals' permanent and deciduous teeth (31, 32).

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[Insert Figure 2 here]

Fig. 2. Dental crown growth parameters. (a) Postnatal crown formation time in days from birth for the four investigated fossil deciduous teeth relative to the range of variability reported in literature for modern and archaeological individuals (red, blue, green lines). (b) Boxplot of the daily secretion rate (DSR) variation *in the first 100 μm* from the enamel-dentine-junction (min., second quartile, median, third quartile, max.) in cmparison to the corresponding variability (min., mean, max.) of modern humans (MH), re-assessed from (27-30). (c) Boxplot of the daily secretion rate variation *across the whole crown* (min., second quartile, median, third quartile, max.) and range of variation (min., mean, max.) of modern humans (MH), re-assessed from (27-30). Ldm1 = lower deciduous first molar; Ldm2 = lower deciduous second molar; Udc = upper deciduous canine; Ldi2 = lower deciduous later incisor.

Weaning onset was determined using the topographical variation of the Sr/Ca ratio along the EDJ (15) (Fig. 3a, SI Appendix, Text S3). In exclusively breastfed newborns, the enamel Sr/Ca ratio is markedly lower relative to their prenatal levels (15, 33, 34). This is because human milk is highly enriched in Ca, i.e. Ca is selectively transferred, compared to Sr, across the mammary glands and the placenta (35, 36). Such behavior is confirmed by analyses of breastmilk and infant sera (37). In comparison to human, herbivore milk (and derived formula) is characterized by higher Sr/Ca levels, due to the lower initial trophic position (38). Our dietary model for early life (Fig. 3a, SI Appendix, Text S3) agrees with the expected Sr behavior (15, 34, 39), showing a decrease in Sr/Ca during exclusive breastfeeding and changes in the slope of the profile across the major dietary transitions (i.e. introduction of solid food and end of weaning; for additional discussion see SI Appendix, Text S3) (34). This model has been tested successfully in this study on a set of contemporary children's teeth with known dietary histories, including their mothers' eating habits (SI Appendix, Text S3 and Fig. S6-S8). Alternative literature models for Ba/Ca point to an increase of Ba/Ca in postnatal enamel during breastfeeding (11, 12); yet, due to even stronger discrimination across biological membranes, Ba/Ca behavior is expected to be similar to Sr/Ca (34), as indeed unequivocally observed here (SI Appendix, Text S3 and Fig. S6-S8) and elsewhere (15, 40-42).

[Insert Figure 3 here]

Fig. 3. Nursing histories from time-resolved Sr/Ca variation in Middle-Upper **Paleolithic deciduous teeth.** NEA = Neanderthal; UPMH = Upper Paleolithic modern human. The elemental profiles (Sr/Ca; Ba/Ca for comparison) were analyzed within enamel closest to the enamel-dentine junction (EDJ); [U] is reported as diagenetic alteration proxy for all fossil specimens (15) (see SI Appendix, Text S4, Fig. S13); diagenetically-affected sections are greyed-out. All are plotted relative to secretion time (in days); the birth event is highlighted by a vertical line in each plot. Elemental ratios are reported mass (weight)-based, not as mol/mol (15). The compositional profiles were smoothed with a locally weighted polynomial regression fit (LOWESS), with its associated standard error range (±3 S.E.) for each predicted value. (a) Comparison between two contemporary individuals with known feeding histories, MCS1 (exclusively breastfed) and MCS2 (exclusively formula-fed); t1=transitional period, i.e. first time solid food starts; t2=progressively reduced breastfeeding during day; t3=transitional period ends, end of breastfeeding. (b) Nadale 1: the slight decrease of Sr/Ca indicates exclusive breastfeeding until the end of crown formation (4.7 months). (c) Fumane 1: Sr/Ca variation indicates breastfeeding until 4 months of age (fully comparable with MCS1 sample, see Supplementary Figure S6). (d) Riparo Broion 1: Sr/Ca profile indicates exclusive breastfeeding until 5 months of age. (e) Fumane 2: 55 days of available postnatal enamel shows exclusive breastfeeding. (f) Comparative Sr/Ca profiles of all fossil specimens adjusted to the birth event; the interpolated modelled profiles were calculated based on those portions unaffected by diagenesis ([U]< 0.05 ppm), with strong smoothing parameters to reveal the biogenic signal. Riparo Broion 1, the specimen most affected by diagenesis, retains the overall outline of a breastfeeding signal (see panel a). See Material and Methods section for details.

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Nadale 1 (Fig. 3b), Fumane 1 (Fig. 3c) and Fumane 2 (Fi. 3e) are sufficiently well-preserved from a geochemical point of view. Riparo Broion 1 (Fig. 3d) in contrast shows some diagenetic overprint, but the overall biogenic elemental pattern can still be discerned (Fig. 3f, where only the portions with [U]<0.05 ppm are included in the interpolated profiles). Overall, Ba is more diagenetically affected than Sr (see *SI Appendix*, Text S4 for our diagenesis assessment strategy and detailed description of the diagenetic overprints).

Two out of the three Neanderthals, Fumane 1 and Riparo Broion 1, clearly show a decreasing trend in Sr/Ca ratio immediately post-birth, followed by slope changes with the first introduction of non-breastmilk food at 115 days (3.8 months) and 160 days (5.3 months; Fig. 3c,d), respectively. An even stronger signal of transitional food intake is visible in Fumane 1 at 200 days (6.6 months) in the form of a steep increase in Sr/Ca

ratio. For the oldest Neanderthal specimen Nadale 1, following a marked variability before birth, the Sr/Ca profile slightly decreases until 140 days (4.7 months, Fig. 3b). We cannot determine the weaning onset for this individual, who was still being exclusively breastfed by ~5 months of life. The UPMH Fumane 2 has a substantial portion of the prenatal enamel preserved and only a short postnatal enamel growth record (~85 days vs ~55 days respectively, Fig. 3e). This precludes the chemical detection of the onset of weaning, although the Sr/Ca drop at birth clearly indicates breastfeeding. The prenatal Sr/Ca increase in Fumane 2 could be related to changing dietary habits of the mother during pregnancy. A similar trend in prenatal enamel is observable in MCS2 (Figure 3a), whose mother followed a diet poor in meat during pregnancy. The Sr isotope profiles of all investigated teeth show very limited intra-sample variability, confirming that Sr/Ca variations likely relate to changes in dietary end-members rather than diverse geographical provenance of food sources (Fig. 4). These data also give insights in Neanderthal mobility and resource gathering. The ⁸⁷Sr/⁸⁶Sr ratios of all Neanderthal teeth mostly overlap with the respective local baselines, defined through archaeological micromammals (43). This suggests that the mothers mostly exploited local food resources. Fumane 1 and Fumane 2, both from the same archaeological site, are characterized by contrasting mean ⁸⁷Sr/⁸⁶Sr ratios (0.7093 vs 0.7088), indicative of a different use of resources between Neanderthal (local resources) and early UPMH (nonlocal resources). Such behavior might have been driven by climatic fluctuations, suggesting colder conditions at ~40 ka, dominated by steppe and Alpine meadows (44).

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[Insert Figure 4 here]

Fig. 4. Mobility of the Middle-Upper Paleolithic infants via time-resolved ⁸⁷**Sr**/⁸⁶**Sr profiles of their deciduous teeth.** Grey horizontal bands represent the local Sr isotopic baselines defined via the Sr isotopic composition of archaeological rodent enamel (*SI Appendix*, Table S1). The birth event is indicated by a vertical line. (a,b) Nadale 1 / Fumane 1: exploitation of local food resources through the entire period; (c) Riparo Broion 1: possible limited seasonal mobility (non-local values between c. -45 and 85 days, ~4 months); (d) Fumane 2: exploitation of non-local food resources through the entire period.

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Discussion

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Nursing strategies are strictly linked to fertility rates, maternal energetic investment, immune development and infant mortality (45). All of these ultimately contribute to demographic changes of a specific population, with key relevance to the study of human evolution. Prolonged exclusive breastfeeding has a positive impact on an infant's immune system; however, longer breastfeeding negatively influences women's fertility via lactational amenorrhea and thus inter-birth intervals (46). It has been shown that the age peak for weaning onset is reached at around 2.1 times birth weight (47), implying that infants who grow more rapidly need to be weaned earlier than those with a slower pace of growth. Based on modern models, a sustainable timing for infant weaning onset would thus range between 3 and 5 months of age (4). However, contemporary non-industrial societies start weaning their children at a modal age of 6 months (6). Similarly, the World Health Organization recommends exclusive breastfeeding for the first six months of an infant's life (48). This time frame broadly corresponds to the age at which the masticatory apparatus develops, favoring the chewing of first solid foods (4). Such evidence suggests that both skeletal development and infant energy demand contribute to the beginning of the weaning transition. Introduction of non-breastmilk foods is also crucial in reducing the energetic burden of lactation for the mother (6). Breastfeeding represents a substantial investment of energy resources (total caloric content of modern human breastmilk =~60 kcal/100 mL) (49), entailing an optimal energy allocation between baby feeding and other subsistence-related activities. Our time-resolved chemical data point to an introduction of non-breastmilk foods at ~5-6 months in the infant diet of two Neanderthals, sooner than previously observed (11, 12) and fully within the modern human pre-industrial figures (6). Neanderthals, therefore, were capable of being weaned at least from the fifth post-natal month in terms of supplementing the nutritional requirements of an infant that is growing a large brain with high energy requirements. This evidence, combined with deciduous dental growth akin to modern humans, indicates similar metabolic constraints for the two taxa during early life. The differential food exploitation of Fumane 1 and Fumane 2 mothers suggests a different human-environment interaction between Neanderthals and early UPMHs, as

seen in Sr isotope profiles. The UPMH Fumane 2 mother was consuming low-biopurified non-local foodstuff with elevated Sr/Ca and possibly spent the end of her pregnancy and the first 55 days after delivery away from the Fumane site. The most parsimonious interpretation is that mother and child of Fumane 2 likely lived away from Fumane Cave and that, many years after, the UPMH child lost his tooth at Fumane Cave, away from his original birthplace. Conversely, all Neanderthal mothers spent the last part of their pregnancies and the lactation periods locally and were consuming high-biopurified local food (see low Sr/Ca-values in Fig. 3f). Such evidence of a seeming limited mobility for these Neanderthals women counters previous hypotheses of a large home-range of Neanderthals (50, 51). The introduction of non-breastmilk food at ~5-6 months implies relatively short interbirth intervals for Neanderthals due to an earlier resumption of post-partum ovulation (52). Moreover, considering the birth weight model (47), we hypothesize that Neanderthal newborns were of similar weight to modern human neonates, pointing to a likely similar gestational history and early-life ontogeny. In a broader context, our results suggest that nursing mode and time among Late Pleistocene humans in Europe were likely not influenced by taxonomic differences in physiology. Therefore, our findings do not support the hypothesis that long postpartum infertility was a contributing factor to the demise of Neanderthals (13). On the other hand, genetic evidence indicates that Neanderthal groups were limited in size (53), which is not in agreement with the shorter inter-birth interval proposed here. Thus, other factors such as e.g. cultural behavior, shorter life-span and high juvenile mortality might have played a focal role in limiting

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Materials and Methods

Thin slices of teeth preparation

Neanderthal's group size (54, 55).

Prior to sectioning, a photographic record of the samples was collected. Thin sections of the dental crowns were obtained using the standard method in dental histology described in (56, 57) and prepared at the Service of Bioarchaeology of the Museo delle Civiltà in Rome. The sectioning protocol consists of a detailed embedding-cutting-mounting

procedure that makes use of dental adhesives, composite resins, and embedding resins. In order to be able to remove the crown from the resin block after sectioning and to restore the dental crowns, the teeth were initially embedded with a reversible resin (Crystalbond 509, SPI Supplies) that does not contaminate chemically the dental tissues and is soluble in Crystalbond cleaning agent (Aramco Products, Inc.). A second embedding in epoxy resin (EpoThin 2, Buehler Ltd) guarantees the stability of the sample during the cutting procedure. The sample was cured for 24 hours at room temperature. Teeth were sectioned using an IsoMet low speed diamond blade microtome (Buehler Ltd). After the first cut, a microscope slide previously treated with liquid silane (3 M RelyX Ceramic Primer) was attached on the exposed surface using a light curing adhesive (3M Scotchbond Multi-Purpose Adhesive) to prevent cracks and any damage during the cutting procedure. A single longitudinal bucco-lingual thin section, averaging 250 µm thick, was cut from each specimen. Each ground section was reduced to a thickness of ~150 µm using water resistant abrasive paper of different grits (Carbimet, Buehler Ltd). Finally, the sections were polished with a micro-tissue (Buehler Ltd) and diamond paste with 1 µm size (DB-Suspension, M, Struers).

Each thin section was digitally recorded through a camera (Nikon DSFI3) paired with a transmitted light microscope (Olympus BX 60) under polarized light, with different magnifications (40x, 100x, 400x, including the ocular magnifications). Overlapping pictures of the dental crown were assembled in a single micrograph using the software ICE 2.0 (Image Composite Editor, Microsoft Research Computational Photography

311 Group) (*SI Appendix*, Fig. S1).

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After sectioning, the crowns were released from the epoxy block using the Crystalbond cleaning agent and reconstructed using light curing dental restoration resin (Heraeus

314 Charisma Dental Composite Materials).

Sr isotopic analysis by solution MC-ICPMS

To determine local Sr isotope baselines we analyzed archaeological rodent teeth from the same sites where the human teeth were found (*SI Appendix*, Table S1). Samples were prepared at the Department of Chemical and Geological Sciences of the University of

- Modena and Reggio Emilia, following protocols described elsewhere (16, 58) and briefly
- 320 summarized here.
- 321 From each archaeological site we selected several rodent teeth, according to the
- 322 stratigraphic distribution of human samples. Enamel from micromammal incisors was
- manually removed using a scalpel. Few teeth were also analyzed as whole (dentine +
- enamel). Before the actual dissolution with 3M HNO₃, samples (1-5 mg in mass) were
- washed with MilliQ (ultrasonic bath) and leached with ~0.5 M HNO₃. Sr of the dissolved
- specimens was separated from the matrix using 30 µl columns and Eichrom Sr-Spec
- 327 resin.
- 328 Sr isotope ratios were measured using a Neptune (ThermoFisher) multi-collector
- 329 inductively-coupled-plasma mass spectrometer (MC-ICPMS) housed at the Centro
- 330 Interdipartimentale Grandi Strumenti (UNIMORE) during different analytical sessions.
- Seven Faraday detectors were used to collect signals of the following masses: 82Kr, 83Kr,
- 332 ⁸⁴Sr, ⁸⁵Rb, ⁸⁶Sr, ⁸⁷Sr, ⁸⁸Sr. Sr solutions were diluted to ~50 ppb and introduced into the
- Neptune through an APEX desolvating system. Corrections for Kr and Rb interferences
- follow previous works (16). Mass bias corrections used an exponential law and a ⁸⁸Sr/⁸⁶Sr
- ratio of 8.375209 (59). The Sr ratios of samples were reported to a SRM987 value of
- 336 0.710248 (60). During one session, SRM987 yielded an average ⁸⁷Sr/⁸⁶Sr ratio of
- 0.710243 ± 0.000018 (2 S.D., n = 8). Total laboratory Sr blanks did not exceed 100 pg.
- 338 Spatially-resolved Sr isotopic analysis by laser-ablation plasma mass spectrometry
- 339 **(LA-MC-ICPMS)**
- LA-MC-ICPMS analyses were conducted at the Frankfurt Isotope and Element Research
- Center (FIERCE) at Goethe University, Frankfurt am Main (Germany) and closely follow
- analytical protocols described by Müller & Anczkiewicz (2016) (17); only a brief
- summary is provided here aiming at highlighting project-specific differences. A 193 nm
- 344 ArF excimer laser (RESOlution S-155, formerly Resonetics, ASI, now Applied Spectra
- Inc.) equipped with a two-volume LA cell (Laurin Technic) was connected to a
- NeptunePlus (ThermoFisher) MC-ICPMS using nylon6-tubing and a 'squid' signal-
- smoothing device (61). Ablation took place in a He atmosphere (300 ml/min), with ~1000

- 348 ml/min Ar added at the funnel of the two-volume LA cell and 3.5 ml/min N₂ before the
- squid. Laser fluence on target was ~5 J/cm².
- 350 Spatially-resolved Sr isotopic analyses of dental enamel were performed on the thin
- sections (100-150 µm thick) used for enamel histology and trace element analysis (see
- below), in continuous profiling mode following the enamel-dentine-junction (EDJ) from
- apex to cervix (14), less than 100 µm away from the EDJ. Tuning of the LA-MC-ICPMS
- used NIST 616 glass for best sensitivity (88Sr) while maintaining robust plasma
- 355 conditions, i.e. $^{232}\text{Th}^{16}\text{O}/^{232}\text{Th} < 0.5\%$ and $^{232}\text{Th}/^{238}\text{U} > 0.95$ with RF-power of ~1360 W.
- In view of the low Sr concentrations in these human enamel samples ($\sim 60-100 \,\mu g/g$), we
- utilized 130 μm spots, a scan speed of 5 μm/s and a repetition rate of 20 Hz to maintain
- 358 88 Sr ion currents of ~2-3.5 x 10^{-11} A. Nine Faraday detectors were used to collect the ion
- 359 currents of the following masses (m/z): ⁸³Kr, ~83.5, ⁸⁴Sr, ⁸⁵Rb, ⁸⁶Sr, ~86.5, ⁸⁷Sr, ⁸⁸Sr,
- 360 ⁹⁰Zr. Baseline, interference and mass bias corrections follow (17). The isotopically-
- 361 homogenous (Sr) enameloid of a modern shark was used to assess accuracy of the Sr-
- isotopic analysis and yielded ${}^{87}\text{Sr}/{}^{86}\text{Sr} = 0.70916 \pm 2$ and ${}^{84}\text{Sr}/{}^{86}\text{Sr} = 0.0565 \pm 1$ (2 S.D.).
- Raw data are reported in Dataset S1.
- 364 Spatially-resolved elemental ratio and concentration analysis by laser-ablation
- 365 plasma mass spectrometry (LA- ICPMS)
- 366 All LA-ICPMS analyses of archaeological samples were conducted at the Frankfurt
- 367 Isotope and Element Research Center (FIERCE) at Goethe University, Frankfurt am
- Main (Germany), using the same LA system described above, but connected via a squid
- smoothing-device to an Element XR ICPMS. Analytical protocols follow those by Müller
- et al (2019) (15); and only a brief summary is provided here aimed at highlighting
- 371 differences. LA-ICPMS trace element ratios/concentrations of the comparative
- 372 contemporary teeth were obtained at Royal Holloway University of London (RHUL)
- using the RESOlution M-50 prototype LA system featuring a Laurin two-volume LA cell
- 374 (58), coupled to an Agilent 8900 triple-quadrupole-ICPMS (ICP-QQQ or ICP-MS/MS).
- 375 Compositional profiles were analyzed parallel and as close as possible to the EDJ,
- following the same tracks used for Sr isotope analyses. We employed 15 μm spot sizes
- 377 (FIERCE) or 6 μm (MCS3, RHUL) and 34 μm (MCS1 and 2, RHUL), respectively, as

well as a scan speed of 5 μ m/s and a repetition rate of 15 Hz; prior to acquisition, samples were pre-cleaned using slightly larger spot sizes (22 - 57 μ m), 20 Hz and faster scan speeds (25 - 50 μ m/s); laser fluence was ~5 J/cm². The following isotopes (m/z) were analyzed: ²⁵Mg, ²⁷Al, ⁴³Ca, (⁴⁴Ca), ⁵⁵Mn, ⁶⁶Zn, ⁸⁵Rb, (⁸⁶Sr), ⁸⁸Sr, ⁸⁹Y, ¹³⁸Ba, ¹⁴⁰Ce, (¹⁶⁶Er, ¹⁷²Yb), ²⁰⁸Pb, ²³⁸U. The total sweep times for the Element XR and the 8900 ICP-MS/MS were ~0.8 and 0.4-0.5 s, respectively; however, because of the slow scan speeds, this small difference has no effect on the compositional profiles presented here. Primary standardization was achieved using NIST SRM612. Ca was employed as internal standard (⁴³Ca); [Ca] at 37 %m/m was used to calculate concentrations for unknown bioapatites, although not required for X/Ca ratios. Accuracy and reproducibility were assessed using repeated analyses of the STDP-X-glasses (62) as secondary reference materials; the respective values for Sr/Ca and Ba/Ca (the element/Ca ratios of principal interest) here are 1.8 ± 6.6% and -0.2 ± 6.0 % (%bias ± 2 S.D. (%)); this compares well with the long-term reproducibility for these analytes reported previously (63). Raw data are reported in Dataset S2 and S3.

The compositional/isotopic profiles were smoothed with a locally weighted polynomial regression fit (LOWESS), with its associated standard error range (±3 S.E.) for each predicted value (64). The statistical package R (ver. 44.0.0) (65) was used for all statistical computations and generation of graphs.

Assessment of the enamel growth parameters and of the chronologies along the laser

tracks

Dental enamel is capable of recording, at microscopic level during its formation, regular physiological and rhythmic growth markers (66-68). These incremental markings are visible under transmitted light in longitudinal histological thin sections of dental crowns. Enamel forms in a rhythmic manner, reflecting the regular incremental secretion of the matrix by the ameloblasts (i.e. the enamel forming cells). The rhythmical growth of enamel is expressed in humans at two different levels: a circadian rhythm that produces the daily cross striations(69, 70) and a longer period rhythmic marking (near- weekly in humans) that give rise to the Retzius lines (71). Physiological stresses affecting the individual during tooth growth cause a disruption of the enamel matrix secretion and

408 mark the corresponding position of the secretory ameloblast front, producing Accentuated (Retzius) Lines (ALs) (72, 73). The birth event is recorded in the forming enamel of 409 individuals surviving the perinatal stage, and leaves - usually the first - Accentuated Line, 410 411 namely the Neonatal Line (NL) (26, 74, 75). The time taken to form the dental crown after birth was measured on each thin section 412 adapting the methods described in literature (30, 76). 413 414 A prism segment starting from the most apical available point on the enamel dentine junction (EDJ) and extending from this point to an isochronous incremental line (i.e. the 415 NL, an AL or a Retzius line) was measured. The incremental line was followed back to 416 417 the EDJ and a second prism segment was measured in the same way. The process was 418 repeated until the most cervical enamel was reached. The crown formation time is equal to the sum of the single prism segments. To obtain time (in days) from the prism length 419 420 measurements, local daily secretion rates (25) (DSR) were calculated around the prism segments and within 100 µm from the EDJ, by counting visible consecutive cross 421 422 striations and dividing it by the corresponding prism length. The chronologies of accentuated lines (ALs) in the modern sample closely match the timing of known 423 424 disruptive life history events in the mother (illness, surgery) and infant, and so are well within the range or error (1.2-4.4%) observed for this histological ageing method (67). 425 426 DSRs were collected across the whole crown on spots chosen randomly in order to get 427 the DSRs distribution. Groups of cross striations ranging from 3 to 7 were measured. For each crown the number of measured spots ranges between 49 and 233. 428 After LA-ICPMS analyses, a micrograph highlighting the laser tracks was acquired at 429 430 50x magnification. This was superimposed to a second micrograph of the same thin section at 100x magnification, to gain better visibility of the enamel microstructural 431 432 features. The chronologies along the laser tracks were obtained matching the tracks with 433 the isochronous lines.

Acknowledgments

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Archaeological excavations at Fumane and De Nadale are coordinated by University of Ferrara and supported by public institutions (Fumane: Lessinia Mountain Community,

Fumane Municipality, BIMAdige; De Nadale: Zovencedo Municipality) and private associations and companies (De Nadale: RAASM). Archaeological excavations at Riparo Broion are coordinated by University of Bologna and University of Ferrara and supported by H2020 grant 724046 – SUCCESS. Superintendency SAPAB-VR provided access to the samples of Nadale 1, Riparo Broion 1, Fumane 1 and Fumane 2. We thank the parents and the children who donated deciduous teeth and carefully recorded the dietary events of their children. Michael P. Richards and Marcello Mannino are thanked for stimulating discussions and for having initiated isotopic studies of the specimens at Fumane. This project was funded by the European Research Council (ERC) under the European Union's Horizon 2020 Research and Innovation Programme (grant agreement No 724046 - SUCCESS awarded to Stefano Benazzi - erc-success.eu and grant agreement No 639286 – HIDDEN FOODS awarded to Emanuela Cristiani – www.hiddenfoods.org). FIERCE is financially supported by the Wilhelm and Else Heraeus Foundation and by the Deutsche Forschungsgemeinschaft (DFG, INST 161/921-1 FUGG and INST 161/923-1 FUGG), which is gratefully acknowledged. LA-ICPMS analyses at Royal Holloway University of London, used for early comparative samples shown in the supporting material, were supported by NERC equipment funding (NERC CC073). The Marie Skłodowska-Curie Actions-European Commission provided a research grant to AN. The Radiogenic Isotope Laboratory of the University of Modena and Reggio Emilia has been funded through a grant of the 'Programma Giovani Ricercatori Rita Levi Montalcini' (to AC).

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