

ELONGATED SKULLS

OF PERU AND BOLIVIA:
THE PATH OF VIRACOCHA



BRIEN FOERSTER

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Cover Photo By Marcia K. Moore



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Dedication

This work would in no way be possible without the expertise, wisdom and adventurous spirit of Sr. Juan Navarro Hierro, director of the Paracas History Museum. It was through my relationship with Sr. Juan that the phenomenon of artificial cranium deformation first grabbed my interest, and turned it into a quest.

He was born and raised in the Paracas Peru area, and early on avidly pursued the remnants of the fabulous pre-Colombian cultures which had inhabited the area. Sr. Juan is respected by many Peruvian archaeologists for his vast knowledge of the ancient cultures of the Pisco, Paracas and Nazca areas, and in my opinion he is indeed the foremost expert.

I also dedicate this book to Lloyd Pye, known to many for his 12 years studying the strange starchild skull, as well as his questioning the validity of Darwinian evolutionary theory. Though he died at a young age, his contributions to unravelling the mysteries of humanity will never be forgotten.

And last but never least, my thanks to my beloved Irene, whose interest in the mysteries of historical Peru and Bolivia rival my own.



Sr. Juan Navarro and baby Paracas skull

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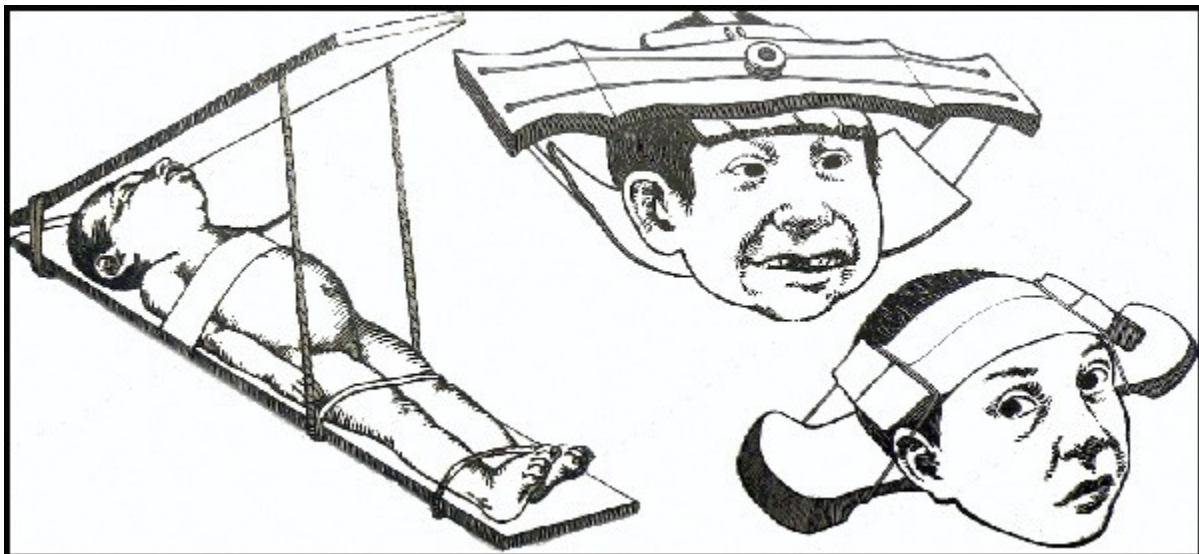
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1: Introduction

Permanent alterations of the body such as, dental modifications, scarification, mutilation, tattooing, and piercing, as well as several types and forms of body art and ornamentation have been part of human culture from the beginning of history as a way of differentiating oneself from others. Artificial deformation of the neonatal cranial vault (baby's head) is another example of these types of practices, and is the subject of this book.

Modification of the head's shape, favoured due to the plastic characteristics of the skull in newborns, was carried out by means of a steadfast pressure applied on the head from the first days of life until 2 or 3 years of age, in general. This custom has been found on all continents, except Antarctica as far as we know, and became an especially widespread practice among the cultures of South America, and especially Peru long before the arrival of Spanish conquerors in the 16th century AD.

Artificial cranial deformations (called ACD henceforth) of newborns have been carried out since time immemorial. From the archaic Homo sapiens in Australia (1) to modern times, there was almost no place in the world unfamiliar with this practice. The earliest evidence of ACD comes from remains of the Mousterian people from Shanidar in Iraq and dates from the Middle Paleolithic period (approximately 300,000 to 30,000 years ago.) (2)



Some forms of cranial deformation

It was already known in Byblos, an ancient Phoenician city, by 4,000 BC and in Georgia by 3,000 BC, and was described by Herodotus (c. 485 to c. 425 BC) in the Caucasus region and by Hippocrates (c. 460 to c. 377 BC) among the people who lived west of the Black Sea. (3) It was a common practice in eastern Asia in what is today Malaysia, as well as Indonesia, Sumatra, Borneo (the Minahassa people), and in the Philippines. In southern Asia, it was common among the Brahuis people in India, in the Punjab region in India and Pakistan, and in Afghanistan, Turkmenistan, and Beluchistan.

Some have suggested that this practice became widespread with the Scythians. This people, pushed out by Chinese emperor Hsuan Wang, had to move from their original settlements in central Asia toward southern Russia into and near the Crimean peninsula in the 8th and 7th century BC. Rich archaeological remains with artificially deformed skulls have been found in excavations just east of this area at the Syr Darya and Amu Darya river deltas.

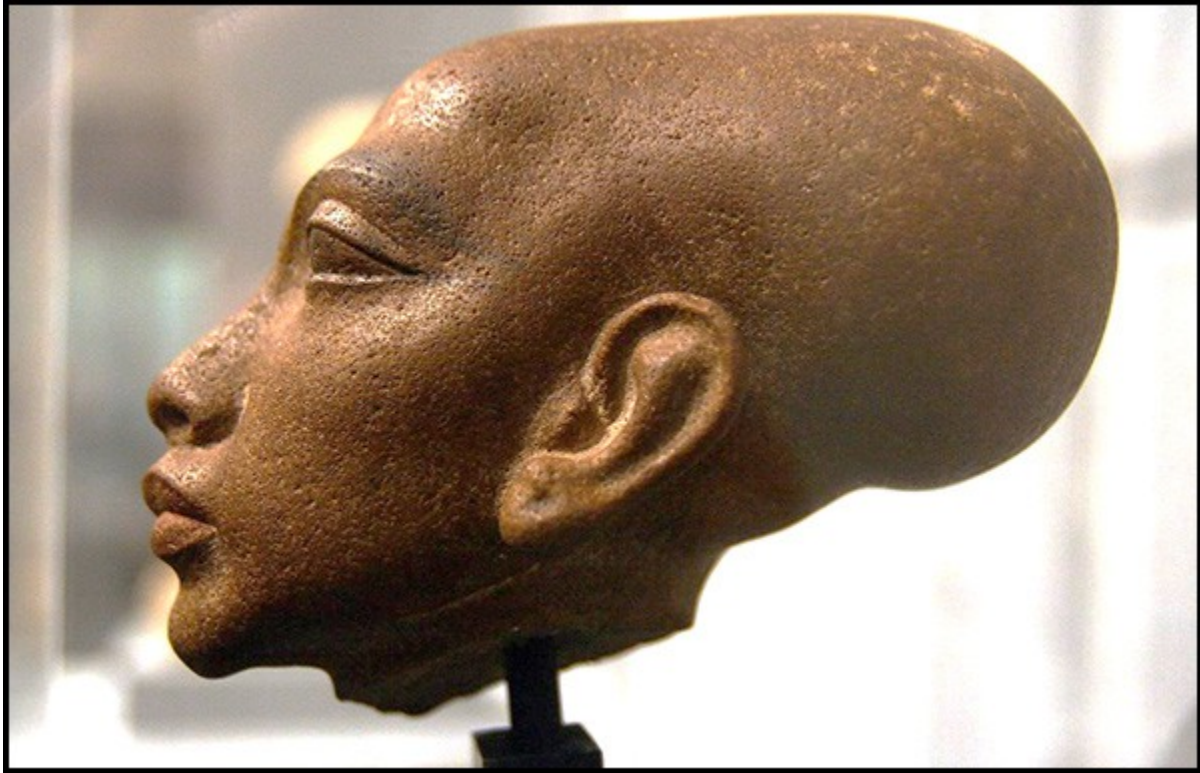


Hun cranial deformation

The Scythians attacked their immediate neighbours, the Cimmerians, and a large-scale nomadic migration toward the west began. The Cimmerians, under Scythian pressure, had to move toward central Europe, staying on the Hungarian plain until about the 4th century BC, when they were invaded, pushed away, and replaced by the Sarmatians until the 4th century AD, when the latter were, in turn, invaded by Hun conquerors. (4)

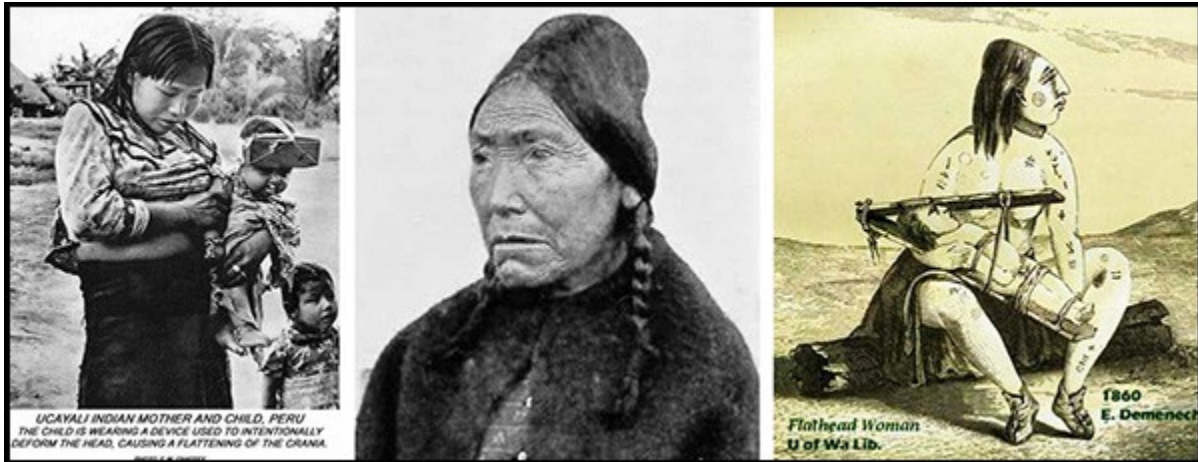
The Huns, a nomadic tribe of the Asian steppes, were the heirs of the Sumerians and of the Scythians by culture and blood lines. It is interesting to note that the burial rites of both the Scythians and the Huns were quite similar: the same barrows, burial frames of logs and thick timbers, burial blocks, sacrificial horses, etc. In their incursions, the Huns carried their cultural practices, including artificial head molding in newborns, to the whole of central Europe and to the people who had to migrate toward Western Europe. As a consequence, artificially deformed skulls have been found all over the European continent from Romania to Germany (mainly in Hamburg), Austria, Switzerland (near Lausanne), Italy in Genoa and Padua. A deformed skull currently on display at the Padua University Anthropology Museum was found below Piazza Capitaniato in Padua. (5) ACD skulls have also been found in Belgium, France (mainly in the Deux-Sevres and Normandy regions), and in the northern part of the UK.

In Africa, skull deformation was commonplace in Nubia, supposedly in ancient Egypt (Akhenaten is believed by some to have shaped his daughters' heads during the 18th Dynasty, yet no skeletal remains have been found), among the Ashanti tribe in Sudan, other tribes of central Africa, and until not long ago in the Republic of Congo (now Zaire). In Oceania, apart from Australia, it has been detected in Polynesia and Melanesia, especially the islands near Vanuatu. In the case of the latter, oral traditions state emphatically that their dominant blood line, and one could presume such practices as ACD originated in Egypt, though most western academics would beg to differ.



An Amarna period bust from Egypt

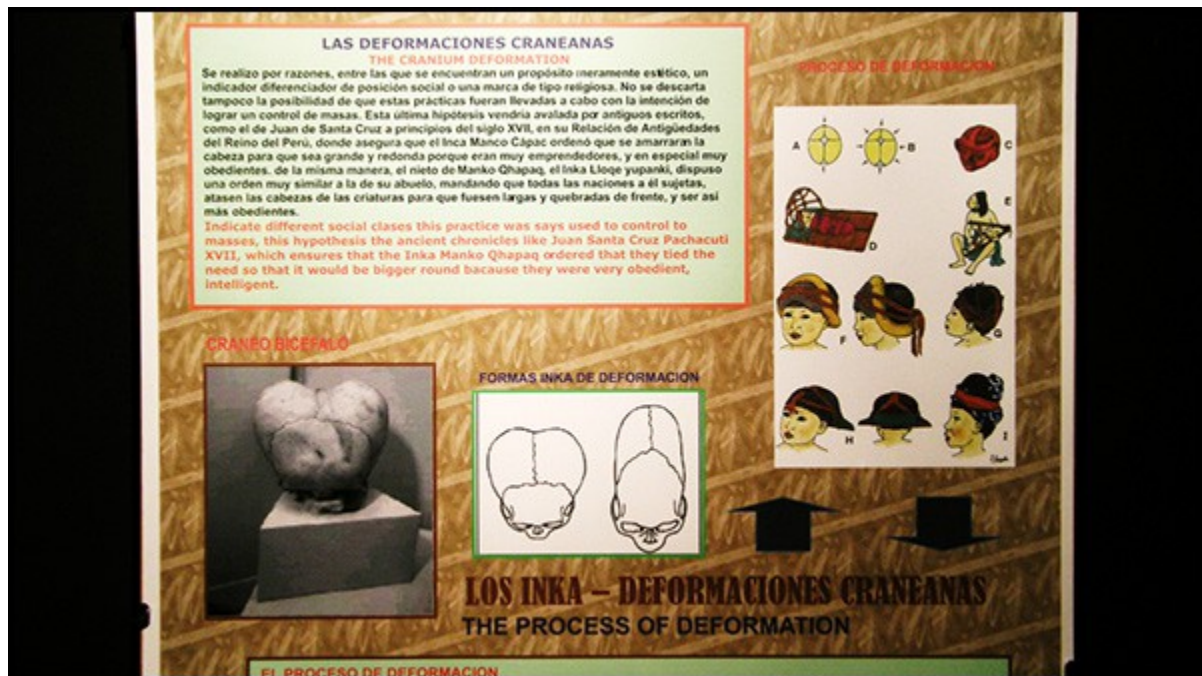
The practice of deforming the head in newborns was present in the whole of the Americas, from North America to Patagonia, mainly on the western side of the continents, and especially on the Andean plateau of South America. The expansion of this practice seems to be related to the suggested Asiatic origin of the Native American population, believed to have arrived along the current coasts of Alaska after crossing the Bering Strait, and migrated south from there some 10,000 plus years ago. In North America, it was carried out by the Bella Coola and Kwagiuth of the west coast of Canada, the Flat Head and Pueblo Indians of the United States, in Mexico by the Olmec, Aztec, Huasteca and Maya, and in Central America among the Taino Indians. But cranial molding in neonates was most widely practised in the Andean region, from Venezuela to Guyana, Colombia, Ecuador, Peru, Bolivia, Chile, and Argentina.



Native American artificial cranial deformation

The current information that exists on this subject is based on reports made by the “chroniclers of the Indias,” by travellers, conquerors, and archaeological research, most of the latter having been carried out in the last two centuries. The origin of this practice in the Andean region has been erroneously attributed to the Inca. The ancient Peruvian inhabitants used to mold the cranium in newborns at least 1,000 years before the Inca state was created and started to expand from its capital, Cusco, most likely about 1350. In fact, the artificially deformed skull of a person who lived 6,000–7,000 years BC was found in a cave in Uricocha, in the Peruvian Andes. (6) It was a common practice in the Tiahuanaco (Tiwanaku) state, in the Titicaca Lake region in the Bolivian Altiplano (7) and numerous skulls have been found both at Tiwanaku and nearby Puma Punku.

Later on, as this population expanded, cranial deformation practices moved toward the neighbouring regions, now Peru and the north of Chile. In fact, ACD was recorded among the Paracas people and Nazca people who lived in the south of Peru. We will have a special emphasis on the Paracas in this book, as it has been the centre of the author’s studies for some years. The Paracas are known, though actual time lines are not well established, to have occupied what is now called the Paracas Peninsula and surrounding area as a distinct culture from about 1000 BC to 100 AD. (8)



Various cranial deformation techniques

Some indigenous groups in the Arequipa region, also in the south of Peru, used to mold the head in neonates supposedly to resemble the shape of the neighbouring Misti volcano. Similarly, the Indians who lived in the nearby region of Kol'awas used to press the head in newborns with a tight, sharp pointed hat until they progressively adopted the form of the Kol'awata volcano from where the Indians believed they came. In order to differentiate themselves from the Kol'awas, their neighbours the Kawana Kola Indians used to bind the head in newborns with a tight, plaited strand resulting in a flat, wide head very different to that of their neighbours. In a book written between 1590 and 1604, the Inca Garcilaso de la Vega described the boards and bandages technique used by the Palta Indians, who inhabited the north of Peru, to modify the head in newborns. (9)

Intentional deformation of the head in neonates was done in different ways:

1. By compression of the front and back part of the head with boards and pads firmly kept in place by bandages.
2. By tightly wrapping the head with a binding that was progressively adjusted.

3. By restraining the child against a portable cradle board with which the flat position caused occipital compression and an anterior, oblique board that pressed the frontal bone to mold a flattened forehead.

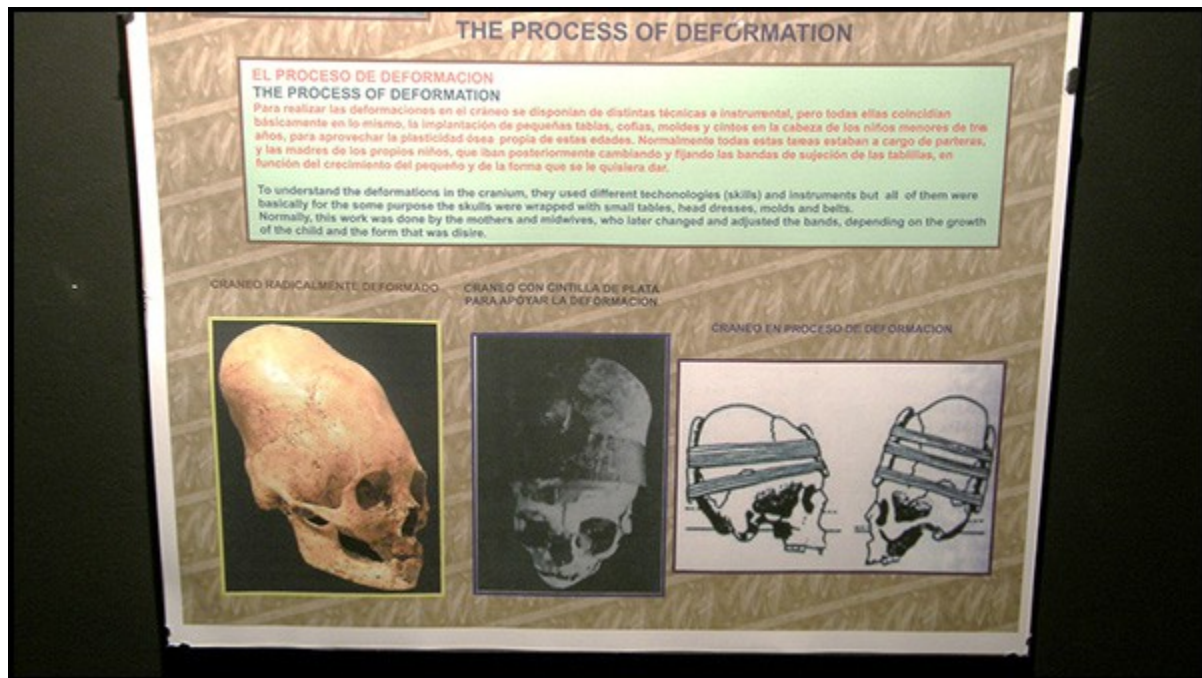
This latter method was introduced by several Indian groups who lived in the northwest of the United States like the Makah and the Plateau Indians in Washington state and Idaho and the “Flat-head” Indians in British Columbia Canada. (10) According to Imbelloni (11) the forms of cranial deformities were the following:

1. Tabular or fronto-occipital: this “flat-head” deformation was an artificial brachicephaly in which the anterior and posterior compression resulted in flattening at the front and back and lateral bulging of the head. Two types of tabular deformations resulted, oblique and erect, according to the angle of board pressure:
 - a) Oblique: this head shaping was obtained with two boards compressing in an oblique way the frontal and occipital regions. The compression at the back was centred at the inion and exerted from the lowest part of the occipital bone to the lambdoid suture.
 - b) Erect: this type of deformation was obtained in two ways:
 - i. By a vertical, frontal piece of wood kept in place by a compressive bandage plus the occipital compression, which resulted in keeping the child flat against the cradle board.
 - ii. By two vertical boards exerting pressure on the front and back parts of the child’s head. The pressure by the posterior board was centred at the zlambdoid suture, and applied on the upper part of the occipital and back part of the parietal bones.
2. Annular: this was the consequence of tightly wrapping the head with a compressive bandage resulting in a conical cranial vault. Depending on the type of binding, oblique or erect deformations were obtained.

The role and purpose of head shaping varied according to culture and region. In the Andes, head shapes established the person's social identity and separated the different groups within society. (12) In certain regions, ACD was a symbol of nobility or distinguished the ruling classes (13) while in others, it served to mark territory, to emphasize ethnic differences or was performed just for aesthetic, magical or religious reasons.

In large and complex societies, a uniform head shape reflected that the individuals belonged to the same or similar group. In smaller, less complex societies head shape demarcated group differences. (14) The Indians in Oruro, in what is now Bolivia serve as an example of what happened in small societies, where cranial shaping was used for cast differentiation: high class Indians had tabular erect heads, the middle class had tabular oblique heads, and the rest of the people had ring shaped heads.

In the Muisca culture, Colombia, intentional cranial deformation was a sign of hierarchy, performed only in the high classes; it was a sign of social status like clothes, accessories, funeral ceremonies, and tombs. (15) In certain pre-Columbian cultures like the Caribe Indians in Colombia, the Aymara of Bolivia, and the Patagones in Argentina, cranial deformation was performed only on men and it was believed to be an important factor for becoming a member of the so called "warrior class." (16) And yet in Borneo and on the European continent, head shaping was performed only on women with an aesthetic purpose. (17)

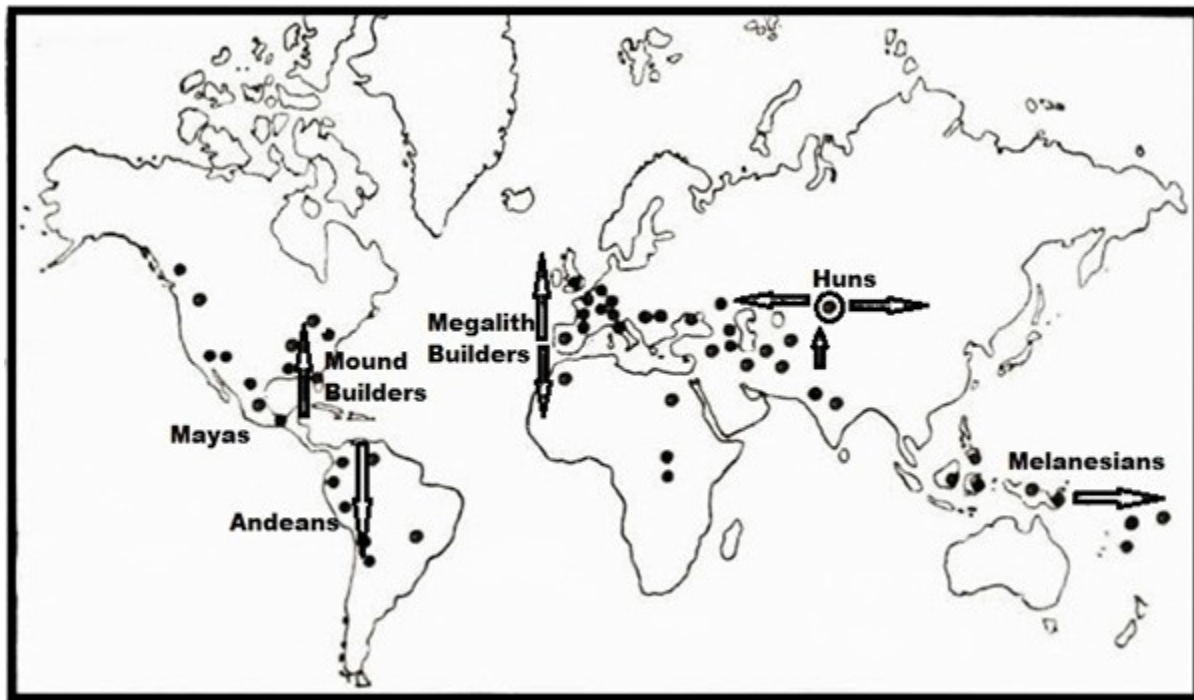


Proposed cranial deformation techniques of the Inca

Among the Calchaqui Indians in the north of Argentina, in the Philippines, and in the Celebes islands, head shaping was performed on both sexes. Some ancient writings linked the purpose of this practice to the intention by certain populations to dominate other people. According to author Santa Cruz Pachacuti, the Inca leaders Manco Capac and L'oke Yupanki ordered the heads of the newborn Aymara Indians to be tightly squeezed to make them foolish, unintelligent, and obedient. (18) The Inca themselves performed ACD on higher classes of their society, and this practice was outlawed by the early colonial Spanish authorities, especially in Cusco at least twice in the 16th century.

However, studies of some indigenous groups who practised cranial deformation in newborns, such as the British Columbian Indians (19) or the Amazonian natives of South America (20) did not find evidence of any neurological or psychological impairment. It is doubtful that any of the societies who performed ACD would have wilfully or even accidentally induced neurological or other damage to their subjects, since in most cases it was the elite classes who had this process done to them.

The first evidence of an artificially deformed skull in Peru was found near Uricocha (Lauricocha), dated to the period between 6000 and 7000 BC, suggesting that the ancient Peruvians introduced the practice on the continent. (21) Lauricocha is located at the headquarters of the Marañon River, in the province of Dos de Mayo, Department of Huanuco more or less in the middle of the country.



Map of global elongated skull distribution

The elevations there vary from 3900 to 4500 meters. It is believed that this area was favourable for human settlement when the glaciers had thawed at the end of the last ice age. The Lauricocha caves, which are located on an ancient glacial valley in the high regions of Huanuco, apparently housed a large group of hunter gatherers for thousands of years who used the caves as a natural refuge. (22)

Between 1958 and 1960 the Peruvian archaeologist Augusto Cardich discovered in these caves eleven human skeletons; 4 adults and 7 children. The skeletal remains were found incomplete, apparently intentionally mutilated. Lithic (stone) flakes and scrapers, and fossilized bones of camelids (probably llama and alpaca) were also found, along with roots and tubers,

shells and bone tools. Rock drawings of animals, depictions of ceremonial dances and hunting were also found on the cave walls. Among the most famous of the burials is the one called “Burial No. 6” with an individual who had artificial cranial deformation of the tabular erect type.

The question naturally arises, if the Lauricocha person is the oldest example of ACD found in South America, how can we be certain that he is actually the oldest that has ever existed? And could this cranial deformation process have independently arisen in the highlands of Peru, and then later influence other cultures? Doubtful. It seems more likely that carbon 14 dating has not been conducted on many Peruvian elongated skulls, and this has led to a major problem in associating them with particular cultures, and relationships between cultures over space and time.



Skeletons in the Lauricocha cave