



A report of the 2000 and 2001 Paternity Testing Workshops of the English Speaking Working Group of the International Society for Forensic Genetics

Charlotte Hallenberg^{*}, Niels Morling

*Department of Forensic Genetics, Institute of Forensic Medicine, University of Copenhagen,
11 Frederik V's Vej, DK-2100 Copenhagen Ø, Denmark*

Received 22 March 2002; accepted 31 May 2002

Abstract

During the last 10 years, the English Speaking Working Group (ESWG) of the International Society for Forensic Genetics (ISFG) has once a year arranged a Paternity Testing Workshop in which blood samples as well as a questionnaire concerning laboratory strategies were distributed to the participating laboratories. In 2000 and 2001, paper challenges were included in the workshops. Here, we present the results of the 2000 and 2001 Paternity Testing Workshops. The numbers of participating laboratories were 33 (2000) and 36 (2001). A total of 36% (2000) and 31% (2001) of the laboratories submitted typing results of variable number of tandem repeats (VNTRs) investigated with restriction fragment length polymorphism (RFLP) and single locus probes (SLPs). A total of 91% (2000) and 86% (2001) submitted typing results of polymerase chain reaction (PCR) based systems. Typing errors occurred in 0.3% of the submitted PCR-based results in 2000 and in 0.1% in 2001. The results of the paper challenges showed a high degree of variation in the formulas used for calculation of the weight of evidence of rare events such as inconsistencies or possible silent alleles. The majority of the laboratories used the same formulas for calculations of frequently occurring events. © 2002 Published by Elsevier Science Ireland Ltd.

Keywords: Paternity testing; DNA profiling; Collaborative exercise; Paternity Index; STR; VNTR; Single locus probes

1. Introduction

The English Speaking Working Group (ESWG) of the International Society for Forensic Genetics (ISFG) offers once a year a Paternity Testing Workshop involving genetic analysis in a paternity case [1–3]. The purpose of the exercise is to compare typing results as well as laboratory strategies among the participating laboratories. As the laboratories do the analyses and statistical calculations using their own methods and frequency data, it is not possible to compare statistical calculations. In order to investigate how the laboratories do statistics, a paper challenge has been included in the Paternity Testing Workshop since the year 2000. The paper challenges were designed to include both

routine combinations and rare events such as inconsistencies, possible silent alleles and rare alleles.

When performing paternity testing, there is a need for obtaining knowledge about mutation rates for the systems used. As the information obtained in each laboratory is often limited, the laboratories were encouraged to provide information about inconsistencies observed in their own laboratory.

Here, we present the results of the Paternity Testing Workshops 2000 and 2001 including evaluation of laboratory strategies and typing results. Also presented are the results of the paper challenges and the calculated mutation rates based on the information given by the participating laboratories.

2. Materials and methods

Blood samples were sent to the participating laboratories together with a questionnaire and a paper challenge. The

^{*} Corresponding author. Tel.: +45-35-32-61-10;
fax: +45-35-32-61-20.
E-mail address: charlotte.hallenberg@forensic.ku.dk
(C. Hallenberg).

56 numbers of participating laboratories were 33 (2000) and 36
57 (2001). A list of participating laboratories is shown in
58 Appendix A.

59 In 2000, the blood samples were drawn from three
60 children and their biological mother. The issue in question
61 was whether child 3 was child of the same non-investigated
62 man as children 1 and 2.

63 In 2001, the blood samples were drawn from two children
64 and an alleged father. The children were known to be
65 children of the same non-investigated mother and the issue
66 in question was whether the children were children of the
67 alleged father.

68 Laboratories that do immigration cases were encouraged
69 to treat the cases as they would do in immigration cases in
70 addition to the paternity cases.

71 The collated results were presented and discussed by the
72 members of the ESWG at meetings held in 2000 (Söderköp-
73 ing, Sweden) and in 2001 (Münster, Germany).

74 3. Results

75 3.1. Methods used for genetic investigations

76 Table 1 shows methods available for genetic investiga-
77 tions in the participating laboratories. A total of 94% of the
78 laboratories used polymerase chain reaction (PCR) based
79 systems for paternity testing. The numbers of laboratories
80 offering typing of variable number of tandem repeats
81 (VNTRs) with restriction fragment length polymorphism
82 (RFLP) and single locus probes (SLPs) decreased from
83 2000 to 2001. In 2001, less than 50% of the laboratories
84 had SLPs available for paternity testing. The percentage of
85 laboratories using conventional systems decreased from
86 18% in 2000 to 11% in 2001. There was an increase in the
87 number of laboratories having mitochondrial DNA
88 (mtDNA) and/or Y-chromosomal short tandem repeats
89 (Y-STRs) available for typing. In 2001, these systems
90 were available in a larger number of laboratories (44%)
91 than the SLPs (42%).

92 Table 2 shows methods used in all cases, methods used in
93 addition when necessary and methods available for use in

Table 1
Methods available for genetic investigations in paternity testing

Methods	2000 (N = 33) (%)	2001 (N = 36) (%)
VNTR/STR systems (PCR)	94	94
mtDNA, Y-STR	39	44
SLP systems	58	42
HLA systems	33	25
MLP systems	15	14
PolyMarker (PCR)	18	11
Conventional systems	18	11

Table 2

Methods used always, additional if necessary, and available for special cases

Methods	2000 (N = 33)	2001 (N = 36)
Always (%)		
STR (PCR)	76	86
SLP	33	22
Conventional	15	11
VNTR (PCR)	6	6
MLP	6	6
HLA	3	6
PolyMarker (PCR)	0	3
mtDNA, Y-STR	3	0
Additional (%)		
STR (PCR)	76	78
SLP	45	36
HLA	24	14
mtDNA, Y-STR	12	14
VNTR (PCR)	6	8
MLP	6	8
Conventional	6	3
PolyMarker (PCR)	12	0
Available (%)		
mtDNA, Y-STR	24	33
STR (PCR)	15	14
HLA	18	11
PolyMarker (PCR)	6	8
SLP	9	6
Conventional	6	3
MLP	6	3
VNTR (PCR)	6	3

very special cases. Only 3% (2000) or 0% (2001) of the
laboratories used mtDNA and/or Y-STRs for typing in all
cases whereas 12% (2000) to 14% (2001) used these
systems additionally when necessary, and 24% (2000) to
33% (2001) had mtDNA and/or Y-STRs available for very
special cases.

3.2. Inter-laboratory comparisons of RFLP typing with SLPs

Typing results of systems investigated with RFLP were
submitted by 12 laboratories in 2000 and by 11 laboratories
in 2001. Typing results from 14 SLPs were reported in 2000
and of these, results from nine systems were reported by
more than one laboratory. In 2001, typing results from 10
SLPs were reported and of these, results from nine systems
were reported by more than one laboratory. In 2001, all
laboratories used *HinfI* as a restriction enzyme. Table 3
shows the most commonly used systems in 2000 and 2001.
The mean coefficient of inter-laboratory variation of DNA-
fragment sizes of the VNTR systems D2S44, D7S21, D7S22
and D12S11 was 1.03% in 2000 and 1.38% in 2001.

Table 3

The most frequently used VNTR systems for RFLP typing with SLPs in paternity testing

VNTR systems	Probe	2000 (N = 19) (%)	2001 (N = 15) (%)
D2S44	YNH24	89	93
D12S11	MS43a	84	93
D7S21	MS31	84	87
D5S110	MS621	68	80
D7S22	g3	53	73
D16S309	MS205	68	53
D1S7	MS1	37	47
D5S43	MS8	37	47
D4S139	pH30	26	33

Table 4

Frequently used STR-kits for PCR-based typing in paternity testing in 2000 and 2001

Kits	2000 (N = 27 ^a) (%)	2001 (N = 31 ^a) (%)
SGM Plus (Applied Biosystems)	56	68
Profiler Plus (Applied Biosystems)	59	48
PowerPlex 16 (Promega)	–	45
Profiler (Applied Biosystems)	30	19
FFFL (Promega)	22	19
Cofiler (Applied Biosystems)	22	13
Polymarker (Applied Biosystems)	19	13

^a Number of laboratories using commercially available STR-kits for DNA-typing.

114 3.3. PCR typing

115 In 2000, a total of 31 participating laboratories performed
116 STR analysis. Of these, 27 laboratories used commercially
117 available kits. In 2001, a total of 34 participating laboratories
118 performed STR analysis and of these, 31 laboratories used
119 commercially available kits. Table 4 shows the most commonly
120 used kits for STR analysis. The use of allelic ladders
121 for assigning the alleles increased from 74% in 2000 to 94%
122 in 2001 (data not shown). Repeat units as nomenclature for
123 the alleles was used, either alone or in combination with
124 other kinds of nomenclature, by approximately 80–90% of
125 the laboratories (Table 5). Among the PCR-based typing
126 results submitted in the paternity testing exercises in 2000
127 and 2001, inconsistent nomenclature was only reported in
128 the two systems DYS389 and D19S253.

129 3.4. Inter-laboratory comparisons of results of PCR typing

130 Typing results from a total of 64 (2000) and 58 (2001)
131 PCR-based systems were submitted in the paternity testing
132 exercises. Results from 43 (2000) and from 36 (2001)
133 systems were reported by more than one laboratory.

Inter-laboratory comparisons of the results showed typing 134
errors that was not caused by inconsistent nomenclature or by 135
reporting errors with frequencies of 0.3% in 2000 and 0.1% in 136
2001. In 2000, no reporting errors were observed. In 2001, 137
reporting errors counted for 0.1% of the submitted results. 138

3.5. Mutation rates 139

The participating laboratories were encouraged to submit 140
information about genetic inconsistencies observed in their 141
own laboratory (Tables 6 and 7). In general, the paternal 142
mutation rates were higher than the maternal mutation rates 143
and the overall mutation rates were higher for the VNTR 144
systems than for the STR systems. For the VNTR systems, 145
paternal mutation rates higher than 1% were seen in the 146
systems D1S7, D4S139 and D7S21. For all STR systems, the 147
mutation rates were below 0.5%. 148

3.6. Conclusions of the Paternity Testing Workshop and 149 statistics used in general 150

In 2000, 94% of the laboratories correctly concluded that 151
the biological father of children 1 and 2 was excluded from 152

Table 5

Nomenclature used for PCR-based systems

Nomenclature	2000		2001	
	Manual electrophoresis (N = 9) (%)	DNA sequencer (N = 27) (%)	Manual electrophoresis (N = 9) (%)	DNA sequencer (N = 33) (%)
Repeat units	67	78	56	73
Bp	0	4	0	6
'Types'	11	0	11	6
Repeat units and 'types'	0	4	0	3
Repeat units and bp	11	11	11	3
Repeat units and bp and 'types'	11	0	11	0
No information	0	4	11	9
Sum	100	101	100	100

Table 6
Mutation rates for VNTR systems

VNTR system	Probe	Paternal			Maternal		
		Meioses N	Mutation rate (%)	No. of labs	Meioses N	Mutation rate (%)	No. of labs
D1S7	MS1	1157	4.24	4	1448	3.80	4
D1S80	–	1522	0.26	2	1507	0.13	2
D2S44	YNH24	9843	0.23	5	10319	0.17	6
D4S139	pH30	2245	1.25	3	2671	0.15	3
D5S110	MS621	1833	1.71	3	2106	0.52	3
D7S21	MS31	10704	1.47	7	11293	0.06	7
D7S22	g3	2604	0.77	4	3071	0.10	4
D12S11	MS43a	10270	0.10	6	10780	0.01	6
D16S309	MS205	2452	0.82	4	2804	0.36	4

Table 7
Mutation rates for STR systems

STR system	Paternal			Maternal			Inconsistency between woman and child or man and child (N)
	Meioses N	Mutation rate (%)	No. of labs	Meioses N	Mutation rate (%)	No. of labs	
Amelogenin	5753	0.05	3	5418	0.02	2	'0'
CSF1PO	4596	0.13	4	5038	0.02	3	'0'
D2S1338	1755	0.23	5	2295	0.09	7	'0'
D3S1358	5762	0.21	5	6837	0.04	7	2
D5S818	5113	0.16	5	5634	0.07	4	'0'
D7S820	5031	0.10	5	5933	0.03	6	'0'
D8S1179	2613	0.34	5	3295	0.03	7	'0'
D13S317	5545	0.20	6	5603	0.04	4	'0'
D16S539	1544	0.19	3	2088	0.05	4	'0'
D18S51	3346	0.30	5	3043	0.03	6	'0'
D19S433	2582	0.12	4	2167	0.09	6	1
D21S11	4200	0.19	6	4029	0.15	8	1
F13A01	723	0.14	2	760	'0'	2	'0'
FIBRA (FGA)	6926	0.46	7	7504	0.01	7	1
Penta D	233	'0'	2	325	'0'	2	'0'
Penta E	415	0.24	2	384	'0'	2	'0'
TH01	6242	0.02	3	7112	'0'	5	'0'
TPOX	4579	0.04	3	5098	'0'	3	'0'
vWA	17717	0.30	9	19116	0.02	10	3

153 paternity of child 3. A total of 3% of the laboratories
154 concluded that the results were inconclusive and 3% did
155 not submit a conclusion. In 2001, all laboratories correctly
156 concluded that the alleged father could be the biological
157 father of both investigated children.

158 The probability of paternity (W) and/or the paternity
159 index (PI) for calculating the weight of evidence in routine
160 paternity cases were used by 73% (2000) and 78% (2001) of
161 the laboratories (Table 8). Only 6% (2000) and 3% (2001)
162 did not use statistics when evaluating the results in routine
163 paternity cases.

164 The requirements for issuing a report with positive weight
165 for paternity varied among the laboratories. In general, the

requirements increased from 2000 to 2001 and in 2001, 33% 166
of the laboratories required a paternity index of 10,000 or 167
more for issuing a report (Table 9). 168

4. Paper challenge 169

4.1. The paper challenge 170

As laboratories used different systems for typing as well 171
as different frequencies in calculations, comparison of cal- 172
culated PI-values in the performed paternity testing was not 173
possible. In order to compare calculations and to compare 174

Table 8
Statistics used in reporting results of paternity testing

Statistics	2000 (N = 33) (%)	2001 (N = 36) (%)
W (probability of paternity)	73	78
PI (paternity index)	73	78
EM value	18	14
Probability of exclusion /exclusion chance	15	11
Other	9	3
No statistics	6	3
No information	–	3

175 how laboratories deal with inconsistencies, possible silent
176 alleles as well as rare alleles, a paper challenge was included
177 in the exercise.

178 In 2000, the paper challenge included a total of eight
179 systems. In one system, a shared silent allele between the
180 man and the child was present. In two systems, inconsis-
181 tencies were present. It was not possible to decide whether
182 the inconsistencies were between the woman and the child or
183 between the man and the child. A total of 40% of the
184 laboratories that calculated the paper challenge concluded
185 that ‘paternity is excluded’. A total of 50% concluded that
186 ‘results are inconclusive’ and 10% concluded that ‘results
187 are in favour of paternity’.

188 A total of 13 laboratories submitted results of PI-values
189 calculated for each system. Due to the inconsistencies and
190 possible silent alleles, a total of five laboratories did not
191 calculate a cumulative paternity index. All the remaining
192 eight laboratories reported different cumulative PI-values.

193 In 2001, the paper challenge included nine systems. In
194 one system, an inconsistency between the woman and the
195 child was present. In two systems, the man and the child
196 shared a rare allele and in three systems possible silent
197 alleles were present. A total of 65% of the laboratories
198 concluded that ‘results are in favour of paternity’ whereas
199 35% concluded that ‘paternity cannot be excluded, addi-
200 tional testing is recommended’.

Table 9
Requirements for issuing a report with positive weight for paternity

PI-values	W-values ^a	2000 (N = 33) (%)	2001 (N = 36) (%)
100–1000	99%–99.9%	24	19
1000–10000	99.9%–99.99%	33	22
10000–100000	99.99%–99.999%	21	25
>100000	> 99.999%	3	8
Less than a certain number of inconsistencies	9	11	
No requirement/other	9	14	

^a The a posteriori probability of paternity, W_{post} , is calculated based on the a priori probability of paternity, W_{prior} , and the PI, which is a true likelihood ratio. $W_{\text{post}} = \text{PI} \times W_{\text{prior}}$. By tradition, the W-value is calculated under the assumption that $W_{\text{prior}} = 0.5$.

A total of 22 laboratories submitted results of PI-values
calculated for each system. A total of 21 different cumula-
tive PI-values were submitted. The main difference in the
reported PI-values were caused by different calculations
when possible silent alleles, inconsistencies and rare alleles
were present. In the remaining systems, 82–91% of the
laboratories reported consistent PI-values.

4.2. Rare alleles

In the 2001 paper challenge, information about the num-
ber of observations of the allele in the database and the total
number of alleles in the database was provided. Approxi-
mately 50% of the laboratories used a minimum frequency
for alleles that were in the database with zero or one
observation (Table 10). For alleles that were not present
in the database, 32% used a frequency of $1/N_{\text{tot}}$, where N_{tot}
is the total number of alleles in the database. A total of 5% did
not calculate a paternity index and a total of 9% used a
frequency in which the alleles observed in the present case
were added to the database.

If the allele was in the database with only one count, 45%
used a frequency of $1/N_{\text{tot}}$ whereas 5% used a frequency in
which the observed alleles in the present case were added to
the database.

4.3. Silent alleles

In the 2000 paper challenge, one system included a
possible silent allele shared between the man and the child.
A total of 23% of the laboratories did not consider possible
silent alleles. In the 2001 paper challenge, three systems
included possible silent alleles shared between the man and
the child.

Table 11 shows how frequencies of possible silent alleles
were calculated. The constellations shown are from the
paper challenge in 2001. The percentage of laboratories
that did not consider silent alleles as possible alleles varied
from 64 to 82% depending on whether silent alleles were
present in the database and whether the alternative to a
shared silent allele was an inconsistency or not. Among the

Table 10
Frequency calculation of rare alleles in the 2001 paper challenge ($N = 22$)

Constellation			No. (x) of observed c-alleles in database	Calculation of the frequency of allele c			
Woman	Child	Man		A minimum frequency ^a (%)	$1/N_{\text{tot}}^b$ (%)	$(x + \text{act. obs.}) / (N_{\text{tot}} + \text{act. obs.})^c$ (%)	x/N_{tot} (%)
ab	bc	cd	0	55	32	9	5
ab	bc	cd	1	50	45x	5	$= 1/N_{\text{tot}}$

^a Among the 11 and 12 laboratories using a minimum frequency for calculation, a total of 10 different frequencies were used. Four of these were reported as formulas ($3/N_{\text{tot}}$, $5/N_{\text{tot}}$, $5/(2N_{\text{tot}})$ and $1 - 0.05^{1/N_{\text{tot}}}$) whereas seven were reported as a fixed frequency ranging from 0.003 to 0.015.

^b N_{tot} is the total number of alleles in the database.

^c act. obs. is the number of allele c observed in the present case.

Table 11
Frequency calculation and number of formulas used in constellations with silent alleles ($N = 22$)

Constellation			No. (x) of observed 0-alleles in database ^a	Calculation of the frequency of the 0-allele			No. of formulas used for calculation of PI
Woman	Child	Man		0-alleles not considered (%)	x/N_{tot}^b (%)	Minimum frequency (%)	
ab	b	c	2	64	20	16	12
a	a	a	2	77	9	14	4
ab	a	a	0	82	9	9	5

^a 0-alleles: silent alleles.

^b N_{tot} : the total number of alleles in the database.

238 three systems containing possible silent alleles, a total of 4–
239 12 different formulas were used for calculations.

240 4.4. Inconsistencies

241 In 2000, the paper challenge included two systems with
242 inconsistencies. It was not possible to decide whether the
243 inconsistency was between the woman and the child or
244 between the man and the child. A total of 13 laboratories
245 submitted data for these two systems. Of these, five labora-
246 tories did not calculate a paternity index. Among the eight
247 remaining laboratories, four different formulas were used for
248 calculations.

249 In 2001, a maternal inconsistency was present in a single
250 system. Three laboratories did not calculate a paternity index
251 for that system. Among the remaining laboratories, a total of
252 nine different formulas were used for calculation of PI.

253 5. Discussion

254 From 1995 to 2001, the percentage of laboratories using
255 RFLP typing with SLPs decreased from 100 to 42% [2],
256 Table 1). Inter-laboratory comparison of the results for the
257 systems D2S44, D7S21, D7S22 and D12S11 showed a mean
258 coefficient of variation of 1.03% in 2000 and of 1.38% in

259 2001. The slightly higher variation in 2001 seemed to be due
260 to a higher variation among laboratories in general.

261 In 2001, analysis of mtDNA and/or Y-STRs was available
262 in a larger number of laboratories than RFLP-based analysis
263 with SLPs. As mtDNA and Y-STR testing investigate female
264 and male transmission, respectively, these investigations are
265 especially useful in cases with special circumstances.
266 mtDNA and/or Y-STR typing was mainly used when addi-
267 tional systems had to be included in the analysis or when
268 special circumstances were present.

269 In laboratories using DNA sequencers for STR analysis,
270 allelic ladders were used only by 74% in 2000 but this
271 percentage increased to 94% in 2001. Inclusion of
272 sequenced allelic ladders in STR analyses improves the
273 accuracy of allele designation [4] and has been recom-
274 mended by the DNA Commission of the ISFG [5–7].
275 Commercial allelic ladders generally use a nomenclature
276 based on the number of repeat units as recommended by the
277 DNA Commission of the ISFG [6,7]. In 2000 and 2001,
278 almost 80–90% of the laboratories performing STR analysis
279 used a nomenclature based on repeat units.

280 Inconsistent nomenclature was observed in the systems
281 DYS389 and D19S253. A new nomenclature has been
282 recommended for the system DYS389 ([http://www.ystr.ch-
283 arite.de](http://www.ystr.ch-arite.de)) and the inconsistency here was due to the fact that
284 some laboratories used the old nomenclature.

285 Reported errors were seen in 0.3% of the typing results
 286 investigated by PCR in 2000 and in 0.2% in 2001. In 2000,
 287 all errors seemed to be due to errors in typing. In 2001, 0.1%
 288 reporting errors were observed and 0.1% seemed to be due to
 289 typing errors.

290 As mutations are rare events, the information that each
 291 laboratory is able to collect is limited and the Paternity
 292 Testing Workshop cumulated information about mutation
 293 rates (Tables 6 and 7). Different laboratories may, how-
 294 ever, use different criteria for the definition of a mutation
 295 in VNTR systems. The VNTR systems had in general
 296 higher mutation rates than the STR systems. Comparison
 297 of the mutation rates with those collected by the American
 298 Association of Blood Banks (AABB) (<http://www.aab->
 299 [b.org/](http://www.aabb.org/)) showed differences mainly in the VNTR systems
 300 D1S80, D5S110, D7S21, D7S22, D16S309 and in the STR
 301 systems D3S1358, F13A01 and FGA. In the remaining
 302 systems there was a good concordance between the muta-
 303 tion rates observed in the AABB surveys and in the ESGW
 304 exercises.

305 In 1999, 55–60% used the PI or/and *W*-value when
 306 evaluating the weight of evidence [3]. This percentage
 307 has increased and today, almost 80% of the laboratories
 308 report the PI or/and the *W*-value. During the last 3 years, the
 309 requirements for issuing a report with positive weight for
 310 paternity has increased. In 1999, 21% of the laboratories
 311 required a PI-value of 10,000 or more [3]. This percentage
 312 increased to 33% in 2001 (Table 9).

313 To analyse how laboratories performed statistical ana-
 314 lyses, a paper challenge was included in the workshop. The
 315 paper challenge consisted of a fictive paternity case in which
 316 constellations included inconsistencies, possible silent
 317 alleles and rare alleles.

318 Some laboratories did not calculate a PI-value if incon-
 319 sistencies were present. Among the laboratories that did
 320 consider mutations, a large number of formulas were used
 321 for calculation.

322 Silent alleles have been described for several systems and
 323 occur, e.g. when the allele size is outside the range of the
 324 measurement. In PCR-based systems, silent alleles may also
 325 be caused, e.g. by mutations in a primer binding site [8].

326 In the paper challenges, 23–82% of the laboratories did
 327 not consider silent alleles. Among the remaining labora-
 328 tories, silent alleles were treated differently and different
 329 formulas were used for calculations.

330 For rare alleles the frequencies used for calculations
 331 varied. Almost half of the laboratories used a fixed minimum
 332 frequency when the allele in question was absent or found
 333 only once in the database. The minimum frequency differed
 334 among the laboratories.

335 In conclusion, the results of the Paternity Testing Work-
 336 shops 2000 and 2001 showed a high degree of concordance
 337 concerning techniques, systems and nomenclature used.
 338 Typing errors counted for only 0.1–0.3% of the PCR-based
 339 systems and inconsistent nomenclature was observed in only
 340 two systems. Also calculations of PI-values in constellations

with no special events showed a high degree of uniformity. 341
 However, when rare events such as inconsistencies and 342
 possible silent alleles were present, differences in calcula- 343
 tions were observed. 344

Acknowledgements 345

Our thanks are due to our blood donors and to the staff of 346
 the participating laboratories. 347

Appendix A. 348

A.1. Participating laboratories 349

- Amtlich benannter Sachverständiger für Abstammungs- 351
gutachten, Chefarzt am Zentrallaboratorium, Berlin, Ger- 352
many (2000, 2001).
- Antwerp Blood Transfusion Center, Edegem, Belgium 354
(2000, 2001).
- Arzt für Laboratoriumsmedizin, Heidelberg, Germany 356
(2000, 2001).
- BJ Diagnostik GmbH, Giessen, Germany (2001).
- Cellmark Diagnostics, Abingdon Business Park, Oxon, 359
UK (2001).
- Codgene, Institut de Médecine Légale, Strasbourg, France 361
(2000, 2001).
- Department of Forensic Genetics, Institute of Forensic 363
Medicine, Copenhagen, Denmark (2000, 2001).
- Department of Forensic Medicine & Science, The Uni- 365
versity of Glasgow, Glasgow, UK (2001).
- Department of Forensic Medicine, Medical Academy of 367
Lodz, Lodz, Poland (2001).
- Department of Forensic Medicine, Warsaw Medical 369
School, Warsaw, Poland (2000, 2001).
- Department of Haematology, St. Bartholomew's and The 371
Royal, London School of Medicine and Dentistry, Lon- 372
don, UK (2000, 2001).
- Department of Immunogenetics, CLB, Amsterdam, The 374
Netherlands (2000, 2001).
- Department of molecular Biology, Comenius University, 376
Bratislava, Slovakia (2000).
- Department of Molecular Genetics, Institute of Haema- 378
tology and Blood Transfusion, Praha, Czech Republic 379
(2000, 2001).
- DNA-ID Labs, Perth, Western Australia (2001).
- Forensic Science Service, Birmingham, UK (2000, 2001).
- Genedia, Gesellschaft für Molekulargenetische Begu- 383
tachtung GmbH, München, Germany (2000).
- Genetica DNA Laboratories INC, Cincinnati, USA 385
(2000).
- Institut für Blutgruppenforschung, Köln, Germany (2000, 387
2001).
- Institut für Blutgruppenserologie und Genetik, Hamburg, 389
Germany (2000).

- Institut für Rechtsmedizin, Johannes Gutenberg Universität Mainz, Mainz, Germany (2000, 2001). 391
- Institut für Rechtsmedizin, Kantonsspital St. Gallen, St. Gallen, Switzerland (2000, 2001). 393
- Institut für Rechtsmedizin, Universität Zürich-Irchel, Zürich, Switzerland (2000, 2001). 395
- Institut National de Transfusion Sanguin, Paris, France (2000, 2001). 397
- Institut Universitaire de Médecine légale, Genève, Switzerland (2000, 2001). 399
- Institute of Forensic Medicine, Budapest, Hungary (2001). 401
- Instituto de Medicina Legal de Lisboa, Faculdade de Medicina de Lisboa Gabinete de Medicina Legal, Lisboa, Portugal (2000, 2001). 403
- Laboratoire d'hémogénéité, Institut universitaire de Médecine légale, Lausanne, Switzerland (2000, 2001). 406
- Laboratoire d'Identification Génétique, INCC/NICC, National Institute of Forensic Science, Bruxelles, Belgium (2000, 2001). 408
- Laboratoire IDNA, Brussels, Belgium (2000, 2001). 409
- Laboratory for Forensic Genetics and Molecular Archaeology, Center for Human Genetics, Leuven, Belgium (2000, 2001). 412
- Laboratory for Tissue Immunology, Cape Town, South Africa (2000, 2001). 415
- Laboratory of Molecular Genetics, National Institute of Chemical Physics and Biophysics, Tallinn, Estonia (2000, 2001). 417
- Laboratory of Paternity Testing, Medical Academy of Wrocław, Wrocław, Poland (2000, 2001). 420
- Medical University, Lublin, Poland (2000, 2001). 421
- The Netherlands Forensic Institute, The Netherlands Ministry of Justice, Rijswijk, The Netherlands (2001). 423
- Paternity Laboratory, Department of Human Molecular Genetics, National Public Health Institute, Helsinki, Finland (2000, 2001). 425
- Rättsgenetiska Institutet, Rättsmedicinalverket, Linköping, Sweden (2000, 2001). 428

- Seksjon for farskapsdiagnostik, Rettsmedisinsk Institutt, Rikshospitalet, Oslo, Norway (2000, 2001). 430
- University Diagnostics Ltd., Middlesex, UK (2000, 2001). 432

References

- [1] D. Syndercombe Court, P. Lincoln, A review of the 1991–1994 Paternity Testing Workshops of the English Speaking Working Group, in: A. Carracedo, B. Brinkmann, W. Bär (Eds.), *Advance Forensic Haemogenetics*, Vol. 6, 1996, pp. 683–685. 434–437
- [2] A. Bjerre, D. Syndercombe Court, P. Lincoln, N. Morling, A report of the 1995 and 1996 Paternity Testing Workshops of the English Speaking Working Group of the International Society for Forensic Haemogenetics, *Forensic Sci. Int.* 90 (1997) 41–55. 439–443
- [3] C. Hallenberg, N. Morling, A report of the 1997, 1998 and 1999 Paternity Testing Workshops of the English Speaking Working Group of the International Society for Forensic Genetics, *Forensic Sci. Int.* 116 (2001) 23–33. 444–447
- [4] P. Gill, C.P. Kimpton, A. Urguhart, N. Oldroyd, E.S. Millican, S.K. Watson, T.J. Downes, Automated short tandem repeat (STR) analysis in forensic casework—a strategy for the future, *Electrophoresis* 16 (1995) 1543–1552. 448–451
- [5] DNA Commission of the International Society for Forensic Haemogenetics, DNA recommendation—1994 report concerning further recommendations of the DNA commission of the ISFH regarding PCR-based polymorphisms in STR (short tandem repeat) systems, *Int. J. Leg. Med.* 107 (1994) 159–160. 452–456
- [6] P.J. Lincoln, DNA recommendations—further report of the DNA Commission of the ISFH regarding the use of short tandem repeat systems, *Forensic Sci. Int.* 87 (1997) 181–184. 457–459
- [7] W. Bär, B. Brinkmann, B. Budowle, A. Carracedo, P. Gill, P. Lincoln, W. Mayr, B. Olaisen, DNA recommendations—further report of the DNA Commission of the ISFH regarding the use of short tandem repeat systems, *Int. J. Leg. Med.* 110 (1997) 175–176. 460–464
- [8] R. Chakraborty, L. Jin, Y. Zhong, Paternity evaluation in cases lacking a mother and nondetectable alleles, *Int. J. Leg. Med.* 107 (1994) 127–131. 465–467