Obituary

OLOF SJÖQVIST
1901–1954
The death of Olof Sjöqvist on December 4, 1954, did not come unexpectedly. Since early June he had been ill with high temperature, severe muscular pain and enlargement of the liver. After biopsy the diagnosis of periarteritis nodosa was established. Under cortisone treatment his condition improved so much that by the end of August he was able to be up and about for short periods, but in October a new attack of the destructive process in his arteries occurred and severe hypertension with eyeground changes and enlargement of the heart developed. His medical advisers regarded his condition as extremely critical, not to say hopeless, but Sjöqvist's indomitable courage and optimism did not desert him. He refused to admit defeat and continued to make plans for future research and for the resumption of his clinical work.

When I visited him for the last time in the end of November I found him in good spirits and in fairly good general condition. We discussed his chapter in the Handbuch der Neurochirurgie, which was practically finished when he became ill and I left with his promise to deliver the manuscript ready for print within two weeks. Fate, however, had decided otherwise and on December 4th a sudden attack of auricular fibrillation ended his life within half an hour.

My first acquaintance with Olof Sjöqvist dates back to 1924 when a young and pleasant looking medical student came to me and offered his services as assistant in some experimental work, in which I was at that time engaged. He was accepted and we worked together for several months on problems connected with the sympathetic nervous system. After completion of this work Sjöqvist had to continue his medical studies, and we drifted apart for a while, but he came back in 1932 after some years in general surgery and inquired about the possibilities of a training in neurosurgery and the chances of a neurosurgical career. These the present writer thought to be rather dubious as neurosurgery in Sweden at that time was in its infancy and had only just shed its dependence on general surgery. The creation of a second neurosurgical clinic at that time appeared to be a rather distant proposition and the road to this goal strenuous and long. However, as later events proved, Sjöqvist showed himself to be more clear-sighted than the present writer and upon return from Fulton's laboratory, whence he had gone to round off his clinical training with a year in neurophysiology, he was offered a position as consulting neurosurgeon to St. Erik's Hospital in Stockholm, a position that was soon exchanged for that of surgeon-in-chief to the newly created neurosurgical clinic at the large municipal Söder Hospital in Stockholm.

Olof Sjöqvist was born in Stockholm on December 9, 1901, the son of John Sjöqvist, professor of biochemistry at the Royal Caroline Institute. From his home he brought with him a strong interest in physiology which was further developed during his student years. His physiological training proved to be a valuable asset in his later work as a neurosurgeon and many of his contributions to medical science bear the imprint of his physiological background. Among his published papers, over 80 in number, the most important is his study of pain conduction in the trigeminal root. In this outstanding piece of work he was able to show by fibre analysis that the small-caliber fibres conducting pain and temperature practically all descended into the spinal root of the trigeminal while the coarse fibres conducting sensation of touch turned upwards into the mesencephalic root. Based upon these anatomical facts Sjöqvist devised the operation of medullary tractotomy which bears his name. By this procedure it became possible for the first time to relieve the pain of tic douloureux without the massive anaesthesia of a large portion of the face accom-