and their families adapt to North American ways. They had four children, moulded by their happy home life. Although Robb never seemed quite certain about the role of women in medicine, the eventual addition to the family of a physician daughter-in-law seemed to tilt the scales in a favourable direction. Sociable and friendly, a droll raconteur, Robb was a wonderful host.

In 1982, Robb was made Professor Emeritus of Neurology at McGill. He had always said that he did not want to be under-foot when he retired as Neurologist-in-Chief. True to his word, upon retirement he moved to Lyn, Ontario where he embarked on a second, highly successful, career as Chairman of the Board of the family company and at last had time to enjoy his hobbies of tree farming and wood carving.

During the long and satisfying years of our collaboration I came to appreciate deeply two attitudes that set Preston Robb apart. The first was his desire to understand the cultural and emotional background of his patients, often so different from his own. This, he sensed, determined their reaction to neurological disability in themselves and in their loved ones. The second was his insistence that the physician do everything possible to create an environment where patients and families were able to maintain their dignity while coping with the dreadful hurdles that life placed in their path.

Preston Robb died at the age of ninety after a brief illness. He was in full possession of his faculties to the end and gave a remarkable address after receiving a Lifetime Achievement Award from the Montreal Neurological Institute, just a week earlier.

Frederick Andermann
Montreal, Ontario

IN MEMORIAM

William (Bill) MacMurray Lougheed
1923-2004

Dr. Bill Lougheed, a pioneer in the field of vascular neurosurgery, and one of Canada’s great surgical teachers, died at his home in Barrie, Ontario on September 30, 2004. Trained under Kenneth G. McKenzie and E. Harry Botterell, and inspired by early cardiovascular surgeons at the Toronto General Hospital such as Gordon Murray and Bill Bigelow, Lougheed decided early to focus his efforts on surgery for blood vessel disorders of the brain. After experimental work in animals he introduced hypothermia and reversible cerebral circulatory arrest for intracranial aneurysm surgery in the 1950s, the first clinical application of brain cooling to protect from anoxia. The advantages of an operating microscope first became apparent to Lougheed in his animal laboratory, where in the 1960s he began a series of experiments in microvascular reconstruction. At Lougheed’s insistence a maneuverable, double-headed surgical diploscope was developed providing both surgeon and assistant simultaneous binocular vision. Microsurgery was born and Dr. Lougheed became Canada’s first, and one of the world’s first, microneurosurgeons.

Along with Toronto jeweler Harry Kerr, Lougheed designed an innovative aneurysm clip with an adjustable spring that varied the closing force of the clip blades. Nontraumatic “temporary” intracranial vascular occlusion was made possible, used by Lougheed for aneurysm surgery (local “proximal occlusion” of the aneurysm-bearing parent artery, overcoming the need for global cerebral circulatory arrest), for one of the first intracranial embolectomies performed, and the world’s first long-saphenous vein cerebral bypass procedure in 1970. Lougheed and colleagues Robert Elgie and Henry Barnett reported the first series of carotid endarterectomies performed in Canada in 1966. Perhaps more than any other, carotid endarterectomy became Dr. Lougheed’s “signature” operation, taught to generations of neurosurgeons now spread across Canada.

Bill Lougheed’s greatest contribution to medicine was training neurosurgeons at the University of Toronto. He excelled as a teacher of operative neurosurgery, emphasizing preoperative preparation and intraoperative organization. He taught how to treat properly the assistant and scrub nurse, maximizing the help they provide under difficult circumstances, regardless of their expertise. With often heroic patience, he was able to navigate residents through even the most complex neurological procedures, always ensuring his usual expert technical result but still leaving intact the resident’s sense of pride and achievement, the feeling that he or she, the resident, “had done it”.

Bill Lougheed held the affection, loyalty and respect of several generations of men and women whom he helped become neurosurgeons. His legacy lives on in the Lougheed Microsurgical Course at the University of Toronto, directed by Dr. Christopher Wallace, provided for and attended by all Canadian neurosurgery residents. Predeceased by Grace, his beloved wife of 49 years, Bill leaves his children Stoney, Bill, George, Joey and Bubba, their partners and children, and his friend and partner in recent years, Margot McKay.

J. Max Findlay
Edmonton, Alberta