Lauri Laitinen

center of the lesions in relation to the midcommissural point for the right and left, respectively, were:

subgenual cingulotomy.

correct subgenual targeting. The patient reported retrospective satisfactory results.

The lesion in this patient was found to be in the expected location, which gives some verification of the correct placement of Laitinen's subgenus cingulotomy target ²⁾.

7.1 and 7.9 mm lateral; 0.2 mm inferior and 1.4 mm superior, and 33.0 and 33.9 anterior, confirming

1)

http://www.hus.fi/en/medical-care/medical-services/Neurosurgery/for_professionals/neurosurgical_sub specialities/functional_neurosurgery/Pages/default.aspx

Huotarinen A, Kivisaari R, Hariz M. Laitinen's Subgenual Cingulotomy: Anatomical Location and Case Report. Stereotact Funct Neurosurg. 2018 Oct 2:1-5. doi: 10.1159/000492058. [Epub ahead of print] PubMed PMID: 30278436.

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Professor Lauri Laitinen, one of the pioneers of modern movement disorder neurosurgery, started operating on Parkinson patients in Helsinki in 1963, using the Cooper's frame. Later, he invented his

He was a pioneer of stereotactic psychosurgery in the 1950s to 1970s, especially by introducing the

The aim of Huotarinen et al. was to verify the anatomical target used by Laitinen, to report on a

The records of Helsinki University Hospital were searched for psychosurgical cases performed between 1970 and 1974. Alive consenting patients were interviewed and underwent a brain MRI.

They found 1 patient alive who underwent subgenual cingulotomy in 1971 for obsessive thoughts, anxiety, and compulsions, diagnosed at that time as "schizophrenia psychoneurotica." MRI showed bilateral subgenual cingulotomy lesions (254 and 160 mm3, respectively). The coordinates of the

own frame, which was in use for 20 years in many places in the Nordic countries ¹⁾.

patient who underwent this procedure, and to review the literature.