

as long as they continue to take thyroid. I have observed that the simultaneous exhibition of syrupus ferri iodidi appears to assist its action. We see this class of patients described by such terms as dull, listless, apathetic, taking a long time to comprehend and to answer questions, of

sluggish ideation, of sluggish mentation, demented, depressed, moping, lethargic, suspicious, of impaired memory, sleepy, torpid, contented, and irritable. I suggest that this proves on careful inquiry to be but part of the truth and that the majority of these cases are sent to an asylum in

error and could be as well treated outside one.

#### REFERENCE

*Lancet*, 23 April 1904, 1117.

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## Corrigenda

Computer-aided self-help for phobia/panic via internet at home: a pilot study. *BJP*, **184**, 448–449. The authorship for this paper should read: Mark Kenwright, Isaac Marks, Lina Gega and David Mataix-Cols. The online version of this paper has been corrected accordingly.

Global burden of depressive disorders in the year 2000. *BJP*, **184**, 386–392. The third sentence under ‘Comparison of GBD 1990 and GBD 2000’ (p. 390), col. 2) should read: The first was that the epidemiological data used as input for

the original GBD study to calculate the burden due to depressive disorders remain debatable: episode incidence was modelled as 2927 per 100 000 per year for women, and 1676 per 100 000 per year for men. The tenth sentence (p. 390, col. 3) should read: In the GBD 2000 the incidence estimates used were higher (4930 per 100 000 per year for women and 3199 per 100 000 per year for men) and with incident cases of depressive episodes appearing at younger ages than in the GBD 1990.

Global burden of depressive disorders: the issue of duration. *BJP*, **181**, 181–183. The penultimate sentence of the fourth paragraph under ‘Scientific studies of duration’ (p. 181, col. 3) should read: The GBD 1996 results were generally accepted, but calculations for depressive disorders remained debatable: episode incidence was modelled for women as 0.29‰ and for men 0.16‰; episode average age at onset was 37.1 years, with an average episode duration of 6 months (Murray & Lopez, 1996: pp. 601–606).