

psychiatric patients in federal elections will result in increased empowerment and whether the converse is also true. ♦

## References

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## Corrections

In the article “Age-Related Modifiers of Clinical Presentation and Health Service Use Among Veterans With Bipolar Disorder” by Sajatovic et al., in the September 2004 issue (pages 1014–1021), the authors reported incorrect percentages for valproate and lithium use on page 1021. The sentence containing the percentages of veterans who used these agents should read as follows: “The agents that were most commonly prescribed for bipolar disorder in the VA Psychosis Registry in FY01 were valproate (37.7 percent of all veterans with bipolar disorder), lithium (25 percent), olanzapine (19.8 percent), risperidone (13.7 percent), carbamazepine (7.5 percent), and quetiapine (7.1 percent).”

In the commentary “Back to the Future: Funding, Integrating, and Improving Mental Health Services” by Rosenheck, in the October 2004 issue (pages 1141–1142), the numbers of case managers and consumers reported in the last sentence of the first paragraph on page 1142 are incorrect. The correct information is “enough money to pay the salaries of 150,000 case managers or rehabilitation specialists who could provide intensive community-based services to some 1.5 million consumers.”

In the brief report “Sexual and Reproductive Behaviors Among Persons With Mental Illness” by Dickerson et al., in the November 2004 issue (pages 1299–1301), Dr. Dickerson's academic degrees are listed incorrectly in the byline. This author should be listed as Faith B. Dickerson, Ph.D., M.P.H.