for registered nurses. Ottawa: The Association; 2002. Available: cna-aiic.ca/CNA/documents/pdf/publications/PS71_Code_ethics_RN_June_2004_e.pdf (accessed 2007 May 11).

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Editor's note: This letter writer's name and affiliation have been withheld at our request and with the letter writer's consent to protect the privacy of all concerned.

Treatment of mental illness in India

I read with interest the article by Stephen Kisely and colleagues on inequitable access for mentally ill patients to some medically necessary procedures.[1] In India, the prevalence of major mental and behavioural disorders is estimated to be 65 per 1000 population, which translates to 70 million patients.[2,3]

India's ability to treat, care for and rehabilitate mentally ill patients leaves much to be desired. Mentally ill people are almost never taken seriously; they are treated with little or no dignity and are often locked away.[4] There is only 1 trained psychiatrist for every 100 000 people with a mental illness. Most (75%) mentally ill patients live in villages, where access even to basic health care is difficult. Half (53%) of the state-run psychiatric hospitals do not have a rehabilitation program.

The country's mental health budget does not exceed 1% of total health expenditures. The National Mental Health Programme was implemented to provide services to rural as well as urban populations, but 80% of people in rural areas cannot access its services. Health and labour policy-makers, insurance companies and the general public all discriminate between physical and mental health problems. Mentally ill patients are being systematically and continuously ignored and denied the social rights they deserve.

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REFERENCES

1. Kisely S, Smith M, Lawrence D. Inequitable access for mentally ill patients to some medically necessary procedures. *CMAJ* 2007;176(6):779-84.
2. Ganguli HC. Epidemiological finding on prevalence of mental disorders in India. *Indian J Psychiatry* 2000;42:14–20.
3. Reddy MV, Chandrashekar CR. Prevalence of mental and behavioral disorders in India: a meta-analysis. *Indian J Psychiatry* 1998;40:149–57.
4. Kumar S. Indian mental-health care reviewed after death of asylum patients. *Lancet* 2001;358(9281):569.

DOI:10.1503/cmaj.1070045

Correction

In a recent article,[1] the text referred to a lesion on the patient's right foot, whereas the images showed the patient's left foot. The lesion was indeed located on the patient's left foot, and we apologize for this error.

REFERENCE

1. Low HL, Stephenson G. These boots weren't made for walking. *CMAJ* 2007;176(10):1415-6.

DOI:10.1503/cmaj.070720