2021 ASSEMBLY RESOLUTION 17

May 3, 2021 – Introduced by Representatives CABRAL-GUEVARA, ROZAR, CABRERA, BALDEH, DUCHOW, HEBL, MAGNAFICI, MILROY, MOSES, THIESFELDT, SINICKI and STUBBS. Referred to Committee on Rules.

Relating to: designating the week of May 2, 2021, as Tardive Dyskinesia Awareness Week.

Whereas, many people with serious, chronic mental illness, such as schizophrenia and other schizoaffective disorders, bipolar disorder, or severe depression, require treatment with medications that work as dopamine receptor blocking agents (DRBAs), including antipsychotics; and

Whereas, while ongoing treatment with these DRBA medications can be very helpful, and even lifesaving, for many people it can also lead to tardive dyskinesia; and

Whereas, many people who have gastrointestinal disorders, including gastroparesis, nausea, and vomiting, also require treatment with DRBAs; and

Whereas, treatment of gastrointestinal disorders with DRBAs can be very helpful, but for many patients the treatment can lead to tardive dyskinesia; and

Whereas, tardive dyskinesia is a movement disorder that is characterized by random, involuntary, and uncontrolled movements of different muscles in the face,
trunk, and extremities. In some cases, people may experience movement of the arms, legs, fingers, and toes. In some cases, the disorder may affect the tongue, lips, and jaw. In other cases, symptoms may include swaying movements of the trunk or hips and may impact the muscles associated with walking, speech, eating, and breathing; and

Whereas, tardive dyskinesia can develop in the months, years, or decades after a person starts taking DRBAs and even after they have discontinued use of those medications. Not everyone who takes a DRBA develops tardive dyskinesia, but if it develops it is often permanent; and

Whereas, common risk factors for tardive dyskinesia include advanced age and alcoholism or other substance abuse disorders. Postmenopausal women and people with a mood disorder are also at higher risk of developing tardive dyskinesia; and

Whereas, a person is at higher risk for tardive dyskinesia after taking DRBAs for three months or longer, but the longer the person is on those medications, the higher the risk of developing tardive dyskinesia; and

Whereas, studies suggest that the overall risk of developing tardive dyskinesia is between 10 and 30 percent; and

Whereas, it is estimated that over 500,000 Americans suffer from tardive dyskinesia. According to the National Alliance on Mental Illness, one in four patients receiving long-term treatment with an antipsychotic medication will experience tardive dyskinesia; and

Whereas, years of difficult and challenging research have resulted in recent scientific breakthroughs, with two new treatments for tardive dyskinesia approved by the United States Food and Drug Administration; and
Whereas, tardive dyskinesia is often unrecognized and patients suffering from the illness are commonly misdiagnosed. Regular screening for tardive dyskinesia in patients taking DRBA medications is recommended by the American Psychiatric Association; and

Whereas, patients suffering from tardive dyskinesia often suffer embarrassment due to abnormal and involuntary movements, which leads them to withdraw from society and increasingly isolate themselves as the disease progresses; and

Whereas, caregivers of patients with tardive dyskinesia face many challenges and are often responsible for the overall care of the tardive dyskinesia patient; and

Whereas, the assembly can raise awareness of tardive dyskinesia in the public and in the medical community; now, therefore, be it

Resolved by the assembly, That the members of the Wisconsin Assembly designate the week of May 2, 2021, as Tardive Dyskinesia Awareness Week; and, be it further

Resolved, That the members of the Wisconsin Assembly encourage each individual in the United States to become better informed about and aware of tardive dyskinesia.

(END)