

Tardive dyskinesia (TD) is an involuntary movement disorder associated with the use of antipsychotic medication that may be necessary to treat individuals living with mental illnesses such as bipolar disorder, major depressive disorder, schizophrenia and schizoaffective disorder.^{1,2*}

TD is characterized by uncontrollable movements of the face, torso, limbs and fingers or toes.²⁻⁵

*Certain prescription medicines (metoclopramide and prochlorperazine) used to treat gastrointestinal disorders may also cause TD.^{6,7}

TD is estimated
to affect at least
800,000
adults in the
United States.^{3,8}

Of those living with
TD, approximately
60%
remain
undiagnosed.⁸

It is important that people who have taken antipsychotic medication be monitored by a healthcare provider for drug-induced movement disorders, such as TD.^{4,9}

The abnormal, involuntary and repetitive movements of TD can negatively impact people physically, socially and emotionally.¹⁰

According to a survey, people with a confirmed TD diagnosis (n = 75) reported that the condition extremely negatively affected them in areas such as the following^{8†}:



57%
Social life[†]

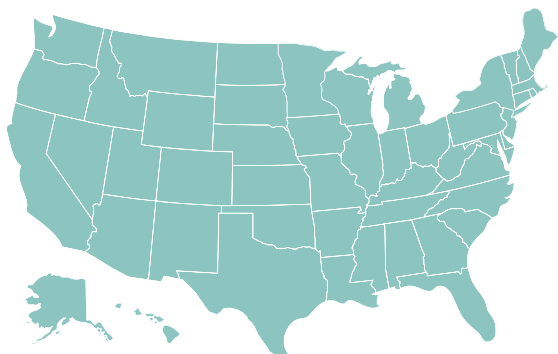


51%
Mental health[†]



45%
Ability to perform
their job[†]

Earlier recognition and treatment of TD can make a positive impact for many people living with a mental illness, including in the lives of their loved ones and care partners. U.S. Food and Drug Administration-approved treatment options are available for TD.



Make an Impact!

Since its inception in 2018 and over the past seven years, all **50 states, Washington, D.C., and multiple mental health advocacy organizations** continue to recognize the first full week of May as TD Awareness Week.

Learn more about TD, living with TD and how to treat TD by visiting
TalkAboutTD.com.



*Results based on a survey of 175 people with a confirmed TD diagnosis (n = 75) or with suspected TD (n = 100) who were asked to rate the effects of the condition on various aspects of life. Results shown include the number of responses among people with a confirmed TD diagnosis (n = 75) who gave a 6 or 7 on the scale to indicate that the aspect of life is "extremely negatively affected" by TD.

†Base: TD Patient ATU 2024. Responses based on survey question: "Since first experiencing [CONDITION], how have the following areas of your life been affected, if at all?" Please use a scale of 1 to 7 when 1 means "Not at all affected" and 7 means "Extremely negatively affected."

REFERENCES: 1. Caroff SN, Hurlford J, Lybrand J, Campbell EC. Movement disorders induced by antipsychotic drugs: implications of the CATIE schizophrenia trial. *Neural Clin.* 2011;29(1):127-148. doi:10.1016/j.ncl.2010.10.002 2. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. American Psychiatric Association; 2023. 3. Cloud LJ, Zutshi D, Factor SA. Tardive dyskinesia: therapeutic options for an increasingly common disorder. *Neurotherapeutics*. 2014;11(1):166-176. doi:10.1007/s13311-013-0222-5 4. Guy W. *ECDEU Assessment Manual for Psychopharmacology*. Rev. 1976. U.S. Dept. of Health, Education, and Welfare, Public Health Service, Alcohol, Drug Abuse, and Mental Health Administration, National Institute of Mental Health, Psychopharmacology Research Branch, Division of Extramural Research Programs; 1976. 5. Task Force on Tardive Dyskinesia. Tardive Dyskinesia: A Task Force Report of the American Psychiatric Association. Washington, DC: American Psychiatric Association; 1992. 6. Kenney C, Hunter C, Davidson A, Jankovic J. Metoclopramide, an increasingly recognized cause of tardive dyskinesia. *J Clin Pharmacol*. 2008;48(3):379-384. doi:10.1177/0091270007312258 7. Sanger GJ, Andrews PLR. A history of drug discovery for treatment of nausea and vomiting and the implications for future research. *Front Pharmacol*. 2016;9:913. doi:10.3389/fphar.2016.00913 8. Data on file. Neurocrine Biosciences, Inc. 9. Keepers GA, Fochtman LJ, Anzla JM, et al. The American Psychiatric Association practice guideline for the treatment of patients with schizophrenia. *Am J Psychiatry*. 2020;177(9):868-872. doi:10.1176/appi.ajp.2020.177901 10. Ascher-Svanum H, Zhu B, Faries D, Peng X, Kinon BJ, Tohen M. Tardive dyskinesia and the 3-year course of schizophrenia: results from a large, prospective, naturalistic study. *J Clin Psychiatry*. 2008;69(10):1580-1588. doi:10.4088/jcp.v69n1008

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