



SR1062

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SENATE RESOLUTION

2           WHEREAS, Many peoples with serious, chronic mental  
3 illness, such as schizophrenia and other schizoaffective  
4 disorders, bipolar disorder, or severe depression, require  
5 treatment with medications that work as dopamine receptor  
6 blocking agents (DRBAs), including antipsychotics; and

7           WHEREAS, While ongoing treatment with these medications  
8 can be very helpful and even lifesaving for many people, it can  
9 also lead to Tardive Dyskinesia (TD); and

10           WHEREAS, Many people who have gastrointestinal disorders,  
11 including gastroparesis, nausea, and vomiting, also require  
12 treatment with DRBAs; and

13           WHEREAS, Treatment of gastrointestinal disorders with  
14 DRBAs can be very helpful, but for many patients, it can lead  
15 to Tardive Dyskinesia; and

16           WHEREAS, Tardive Dyskinesia is a movement disorder that is  
17 characterized by random, involuntary, and uncontrolled  
18 movements of different muscles in the face, trunk, and  
19 extremities; in some cases, people may experience movement of  
20 the arms, legs, fingers, and toes; it may affect the tongue,  
21 lips, and jaw; symptoms may include swaying movements of the

1 trunk or hips and may impact the muscles associated with  
2 walking, speech, eating, and breathing; and

3 WHEREAS, Tardive Dyskinesia can develop months, years, or  
4 decades after a person starts taking DRBAs and even after they  
5 have discontinued use of those medications; not everyone who  
6 takes a DRBA develops TD, but if it develops, it is often  
7 permanent; and

8 WHEREAS, Common risk factors for Tardive Dyskinesia  
9 include advanced age and alcoholism or other substance abuse  
10 disorders; postmenopausal women and people with a mood disorder  
11 are also at a higher risk of developing Tardive Dyskinesia; and

12 WHEREAS, A person is at a higher risk for TD after taking  
13 DRBAs for three months or longer, but the longer the person is  
14 on these medications then the higher the risk of developing  
15 Tardive Dyskinesia; and

16 WHEREAS, Studies suggest that overall risk of developing  
17 Tardive Dyskinesia is between 10 and 30 percent; and

18 WHEREAS, It is estimated that over 500,000 Americans suffer  
19 from Tardive Dyskinesia; according to the National Alliance for  
20 Mental Illness, one in every four patients receiving long-term  
21 treatment with an antipsychotic medication will experience

1 Tardive Dyskinesia; and

2 WHEREAS, Years of difficult and challenging research have  
3 resulted in recent scientific breakthroughs, with two new  
4 treatments for Tardive Dyskinesia approved by the United States  
5 Food and Drug Administration; and

6 WHEREAS, Tardive Dyskinesia is often unrecognized, and  
7 patients suffering from the illness are commonly misdiagnosed;  
8 regular screening for TD in patients taking DRBA medications is  
9 recommended by the American Psychiatric Association (APA); and

10 WHEREAS, Patients suffering from Tardive Dyskinesia often  
11 suffer embarrassment due to abnormal and involuntary  
12 movements, which leads them to withdraw from society and  
13 increasingly isolate themselves as the disease progresses; and

14 WHEREAS, Caregivers of patients with Tardive Dyskinesia  
15 face many challenges and are often responsible for the overall  
16 care of the TD patient; therefore, be it

17 RESOLVED, BY THE SENATE OF THE ONE HUNDRED FIRST GENERAL  
18 ASSEMBLY OF THE STATE OF ILLINOIS, that we declare May 3-9,  
19 2020 as "Tardive Dyskinesia Awareness Week" in the State of  
20 Illinois; and be it further

1           RESOLVED, That we urge the citizens of Illinois and those  
2 across the country to become better informed about Tardive  
3 Dyskinesia.