SR-110 (2017-2018)

ENROLLED MAY 30, 2018

PASSED IN SENATE MAY 29, 2018

CALIFORNIA LEGISLATURE— 2017–2018 REGULAR SESSION

SENATE RESOLUTION NO. 110

Introduced by Senator Beall

May 15, 2018

Relative to Tardive Dyskinesia Awareness Week

LEGISLATIVE COUNSEL'S DIGEST

SR 110, Beall.

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 medications can be very helpful, and even lifesaving, for many people, it can also lead to Tardive Dyskinesia (TD); 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 can lead to TD; and

WHEREAS, TD 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, it 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, TD can develop 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 TD, but if it develops it is often permanent; and

WHEREAS, Common risk factors for TD include advanced age and alcoholism or other substance abuse disorders. Postmenopausal women and people with a mood disorder or a family history of mood disorders are also at higher risk of developing TD; and

WHEREAS, A person is at higher risk for TD after taking DRBAs for three months or longer, but the longer the person is on these medications, the higher the risk of developing TD; and

WHEREAS, Studies suggest that the overall risk of developing TD following prolonged exposure to DRBAs is between 30 and 50 percent; and

WHEREAS, It is estimated that over 60,000 Californians suffer from TD; and

WHEREAS, Years of difficult and challenging research have resulted in scientific breakthroughs in the last year, with two new treatments for TD approved by the United States Food and Drug Administration. TD is often unrecognized and patients suffering from the illness are commonly misdiagnosed. Regular screening for TD in patients taking DRBA medications is recommended by the American Psychiatric Association (APA); and

WHEREAS, A patient who is taking a DRBA should see his or her health care providers for regular evaluations to ensure that any signs of TD are recognized. Healthcare providers should use a rating scale recommended by the APA; and

WHEREAS, Patients suffering from TD 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, The caregivers of patients with TD face many challenges and are often responsible for the overall care of the TD patient; now, therefore, be it

Resolved by the Senate of the State of California, That the Senate proclaims the week of May 21, 2018, as Tardive Dyskinesia Awareness Week, with the goal of raising awareness of this potentially debilitating disease; and be it further

Resolved, That the Secretary of the Senate transmit copies of this resolution to the author for appropriate distribution.