H.C.R. NO. 172

HOUSE CONCURRENT RESOLUTION

DESIGNATING THE FIRST WEEK OF MAY AS TARDIVE DYSKINESIA AWARENESS WEEK.

1 WHEREAS, many people with serious, chronic mental illness, 2 such as schizophrenia and other schizoaffective disorders, 3 bipolar disorder, or severe depression, require treatment with 4 medications that work as dopamine receptor blocking agents, 5 including antipsychotics; and

7 WHEREAS, while ongoing treatment with these medications can 8 be very helpful, and even lifesaving, for many people, it can 9 also lead to tardive dyskinesia; and 10

11 WHEREAS, many people who have gastrointestinal disorders, 12 including gastroparesis or gastrointestinal symptoms including 13 nausea, and vomiting also require treatment with dopamine 14 receptor blocking agents; and

16 WHEREAS, treatment of gastrointestinal disorders with
17 dopamine receptor blocking agents can be very helpful, but for
18 many patients can lead to tardive dyskinesia; and

WHEREAS, tardive dyskinesia is a movement disorder that is 20 characterized by random involuntary and uncontrolled movements 21 of different muscles in the face, trunk, and extremities. 22 Some people may experience movement of the arms, legs, fingers, and 23 24 toes. In some cases, it may affect the tongue, lips, and jaw. Symptoms may also include swaying movements of the trunk or hips 25 and may impact the muscles associated with walking, speech, 26 eating, and breathing; and 27

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WHEREAS, tardive dyskinesia can develop months, years, or
 decades after a person starts taking dopamine receptor blocking
 agents and can even develop after they have discontinued use of
 those medications. Not everyone who takes a dopamine receptor



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blocking agent develops tardive dyskinesia, but if it does 1 develop it is often permanent; and 2 3 4 WHEREAS, common risk factors for tardive dyskinesia include 5 advanced age and alcoholism or other substance abuse disorders. 6 Postmenopausal women and people with mood disorders are also at higher risk of developing tardive dyskinesia; and 7 8 WHEREAS, a person is at higher risk for tardive dyskinesia 9 10 after taking dopamine receptor blocking agents for three months 11 or longer, but the longer the person is on these medications, the higher the risk of developing tardive dyskinesia; and 12 13 WHEREAS, studies suggest that overall risk of developing 14 15 tardive dyskinesia is between ten and thirty percent; and 16 WHEREAS, it is estimated that over 500,000 Americans suffer 17 from tardive dyskinesia. According to the National Alliance for 18 19 Mental Illness one in every four patients receiving long-term treatment with an antipsychotic medication will experience 20 tardive dyskinesia; and 21 22 23 WHEREAS, years of difficult and challenging research have 24 resulted in recent scientific breakthroughs with two new treatments for tardive dyskinesia approved by the United States 25 26 Food and Drug Administration; and, 27 28 WHEREAS, last year, twenty-eight states and the District of 29 Columbia issued legislative resolutions and Governors' 30 proclamations declaring the first full week of May as Tardive Dyskinesia Awareness Week. Hawaii is encouraged to advocacy 31 groups such as the National Alliance on Mental Illness, Mental 32 33 Health America, the Depression and Bipolar Support Alliance, the 34 American Academy of Neurology, and the American Psychiatric 35 Association in support of the mental health community; and 36 therefore, 37 BE IT RESOLVED by the House of Representatives of the 38 Thirtieth Legislature of the State of Hawaii, Regular Session of 39 2020, the Senate concurring, that the week of May 3, 2020 be 40 designated as "Tardive Dyskinesia Awareness Week"; and, 41 42



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BE IT FURTHER RESOLVED that this designation will encourage the Department of Education, the Department of Health, and the United States Department of Health and Human Services to increase public awareness so each individual in the United States becomes better informed and aware of tardive dyskinesia; and

8 BE IT FURTHER RESOLVED that certified copies of this 9 Resolution be transmitted to the Governor, the Chairperson of 10 the Board of Education, the Superintendent of Education, the 11 Director of Health, and the United States Department of Health 12 and Human Services.

13 OFFERED BY: HCR HMIA 2020-45-18 3