What is Tardive Dyskinesia?
Tardive dyskinesia (TD) is a movement disorder that causes a range of repetitive muscle movements in the face, neck, arms, and legs. TD symptoms are beyond a person’s control. These symptoms can make routine physical functioning difficult, significantly affecting quality of life. Although sometimes associated with conditions such as schizophrenia, TD primarily occurs as a side effect of long-term use of certain medications for nausea, and medications that treat neurological disorders, such as Parkinson’s disease. It can become a permanent condition even after a person stops taking the medication.

What are the symptoms?
Signs and symptoms include:
- Jerking hand and leg movements
- Neck twisting
- Difficulty swallowing
- Eye blinking and grimacing
- Lip smacking and involuntary tongue movements

TD symptoms typically occur after several years of taking antipsychotic medications, although they can emerge within just a few months.

Who is at risk?
Anyone taking an antipsychotic may develop TD, but the risk of TD can be higher for certain people:
- Older adults
- Females
- Those with a family history of TD
- Having negative symptoms of schizophrenia
- People of African descent

How can it be prevented?
You can help manage the risk by addressing lifestyle factors that increase the potential to develop TD. The risk of developing TD rises with:
- Smoking
- Substance use
- Uncontrolled diabetes

Proactively taking care of your health by quitting smoking, avoiding substance use, and managing blood sugar levels can be protective and reduce the risk of symptom onset. Other steps you can take to help manage the risk include asking your health care provider for routine screening of movement symptoms. Recognizing the symptoms of TD early can help lessen their severity, so these screenings should occur every three months.
You can also ask your provider to review your current medications and discuss options. Although it can still occur, rates of TD appear to be lower with second-generation antipsychotic medications. Long-term use of antipsychotic medication to treat a chronic mental health condition is usually still necessary, but safely adjusting or changing medication may be an effective option.

**What are the treatments?**

If symptoms of TD develop, your health care provider will evaluate your treatment plan and medication. Your provider may choose to change your medication, or add one specifically designed to improve movement symptoms. It’s important that you don’t abruptly stop taking a medication without talking to your health care provider. Each person responds to treatment differently, but effective options have emerged over the past several years that help relieve symptoms.

Even mild TD symptoms should be assessed and treated to lessen these symptoms and prevent further impact on daily function and quality of life. If your provider recommends a medication, but you are concerned about its cost, Prescription Assistance Programs (PAP) may be able to help. PAPs can sometimes substantially reduce medication costs. It is important to work with your prescriber and have honest conversations about your symptoms, treatment, and any changes you feel are affecting your health.

TD can be very troubling, for those who experience it as well as for their families. Although this condition can have a negative impact on quality of life, an informed treatment plan combined with proactive self-care can help effectively manage TD.

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