

ASSEMBLY JOINT RESOLUTION

No. 120

STATE OF NEW JERSEY

221st LEGISLATURE

INTRODUCED FEBRUARY 5, 2024

Sponsored by:
Assemblyman HERB CONAWAY, JR.
District 7 (Burlington)

SYNOPSIS

Designates first full week of May of each year as “Tardive Dyskinesia Awareness Week” in NJ.

CURRENT VERSION OF TEXT

As introduced.



1 **A JOINT RESOLUTION** designating “Tardive Dyskinesia Awareness
2 Week.”
3
4 **WHEREAS**, Tardive Dyskinesia (TD) is a persistent, irreversible, and
5 potentially disabling neurological condition characterized by
6 uncontrollable repetitive movements of the face, torso, or other
7 body parts; and
8 **WHEREAS**, TD is an involuntary movement disorder caused by
9 medications that help control dopamine, such as antipsychotics
10 prescribed to treat people living with mental illnesses such as
11 schizophrenia, bipolar disorder, and major depression; and
12 **WHEREAS**, Clinical research by the United States Food and Drug
13 Administration has led to the availability of two treatments for
14 adults with TD; and
15 **WHEREAS**, Many people with serious mental health conditions, such
16 as bipolar disorder, major depression, schizophrenia, and
17 schizoaffective disorder, or gastrointestinal disorders, including
18 gastroparesis, nausea, and vomiting, may be treated with
19 medications that work as dopamine receptor blocking agents
20 (DRBAs); and
21 **WHEREAS**, While prolonged treatment with these medications are
22 often necessary to treat various illnesses that a person is
23 experiencing, ongoing use of DRBAs can lead to the onset of TD;
24 and
25 **WHEREAS**, It is important that people taking DRBAs are monitored
26 for TD through regular screenings as recommended by the
27 American Psychiatric Association; and
28 **WHEREAS**, It is estimated that TD affects approximately 600,000
29 people in the U.S. and approximately 70 percent of people with TD
30 have not been diagnosed; and
31 **WHEREAS**, TD is treatable if a patient receives timely screening and
32 diagnosis; and
33 **WHEREAS**, However, TD remains widely unknown and misunderstood
34 due to a lack of public awareness and limited resources available to
35 patients, providers, and caregivers; and
36 **WHEREAS**, It is estimated that about 1.1 million adults in New Jersey,
37 or 16.14 percent of adults in the State, are living with a mental
38 illness and as a result are likely to receive DRBAs as a form of
39 treatment which can lead to the onset of TD; and
40 **WHEREAS**, Raising awareness about the symptoms and impact of TD
41 will promote the importance of early screening, diagnosis and
42 treatment; and
43 **WHEREAS**, People living with TD face physical, social and emotional
44 barriers due to the stigma associated with uncontrollable
45 movements which can further lead to worsened mental health
46 symptoms and cause embarrassment or withdrawal from society;
47 and

1 **WHEREAS**, To help ensure that people living with TD receive the care
2 they need increased awareness is necessary at the State and federal
3 level; and

4 **WHEREAS**, A Tardive Dyskinesia Awareness Week would provide New
5 Jerseyans with an annual reminder to check themselves for symptoms
6 of the disorder and seek early medical intervention through annual
7 screenings with their medical provider; now, therefore,

8

9 **BE IT RESOLVED** *by the Senate and General Assembly of the*
10 *State of New Jersey:*

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12 1. The first full week of May of each year is designated as
13 “Tardive Dyskinesia Awareness Week” in NJ to encourage New
14 Jerseyans to take preventative steps to identify the symptoms and
15 risk factors of Tardive Dyskinesia.

16

17 2. The Governor is respectfully requested to annually issue a
18 proclamation recognizing the first full week of May as “Tardive
19 Dyskinesia Awareness Week” in New Jersey.

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21 3. This joint resolution shall take effect immediately.

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STATEMENT

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26 This resolution designates the first full week of May of each year
27 as “Tardive Dyskinesia Awareness Week” in NJ. Tardive
28 Dyskinesia (TD) is a persistent, irreversible, and potentially
29 disabling neurological condition characterized by uncontrollable
30 repetitive movements of the face, torso, or other body parts. This
31 involuntary movement disorder is caused by medications that help
32 control dopamine, such as antipsychotics prescribed to treat people
33 living with mental illnesses such as schizophrenia, bipolar disorder,
34 and major depression. People with mental health conditions, such as
35 bipolar disorder, major depression, schizophrenia, and
36 schizoaffective disorder, or gastrointestinal disorders, including
37 gastroparesis, nausea, and vomiting, may be treated with
38 medications that work as dopamine receptor blocking agents
39 (DRBAs). It is estimated that about 1.1 million adults in New
40 Jersey, or 16.14 percent of adults in the State, are living with a
41 mental illness and as a result are likely to receive DRBAs as a form
42 of treatment, which can lead to the onset of TD.

43 It is vital that people taking DRBAs are monitored for TD
44 through regular screenings as recommended by the American
45 Psychiatric Association because long-term use of DRBAs can lead
46 to the onset of TD. People living with TD face physical, social and
47 emotional barriers due to the stigma associated with uncontrollable
48 movements, which can further lead to worsened mental health

1 symptoms and cause embarrassment or withdrawal from society. It
2 is estimated that TD affects approximately 600,000 people in the
3 U.S. and approximately 70 percent of people with TD have not been
4 diagnosed. Although TD is treatable, many people with the disorder
5 are unaware of the treatment options. Raising awareness about the
6 symptoms and impact of TD will promote the importance of early
7 screening, diagnosis and treatment.