

May 4-10, 2025 marks the 8th annual Tardive Dyskinesia (TD) Awareness Week, a week dedicated to elevating discussions on TD to reduce stigma and empower those impacted by the condition.

Tardive dyskinesia (TD)

is an involuntary movement disorder that is characterized by uncontrollable movements of the face, torso, limbs, and fingers or toes.¹⁻⁴

[Click here to download a TD Fact Sheet](#)



TD is associated with use of antipsychotic medication

that may be necessary to treat individuals living with mental illnesses such as bipolar disorder, major depressive disorder, schizophrenia, and schizoaffective disorder.^{3,5}

[Click here to learn about risk factors for TD](#)

There are at least
800,000
people in the United States
living with TD

AND

approximately
60 percent
of them have not yet
been diagnosed.⁶

Proactive recognition and treatment of TD can make a positive impact for many people who are already managing mental illness, including their loved ones or care partners.

To learn more, visit

[MIND-TD.com](https://www.mind-td.com)

A compendium of educational resources for all clinical team members to facilitate identification of TD and its differentiation from other movement disorders.

Resources include [clinician-led podcasts](#), [videos](#), and [presentations](#) alongside [tools for use in clinical practice](#) and [real-world patient case videos](#).

REFERENCES: **1.** Task Force on Tardive Dyskinesia. Tardive dyskinesia: A Task Force Report of the American Psychiatric Association. Washington, DC: American Psychiatric Association; 1992. **2.** Cloud LJ, Zutshi D, Factor SA. Tardive dyskinesia: therapeutic options for an increasingly common disorder. *Neurotherapeutics*. 2014;11(1):166-176. doi:10.1007/s13311-013-0222-5 **3.** American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. American Psychiatric Association; 2023. **4.** Guy W. *ECDEU Assessment Manual for Psychopharmacology*. Rev. 1976. U.S. Dept. of Health, Education, and Welfare, Public Health Service, Alcohol, Drug Abuse, and Mental Health Administration, National Institute of Mental Health, Psychopharmacology Research Branch, Division of Extramural Research Programs; 1976. **5.** Caroff SN, Hurford I, Lybrand J, Campbell EC. Movement disorders induced by antipsychotic drugs: implications of the CATIE schizophrenia trial. *Neural Clin*. 2011;29(1):127-148. doi:10.1016/j.ncl.2010.10.002. **6.** Data on file. Neurocrine Biosciences, Inc.



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