

Health Trends

June 2019

Health and Safety Awareness *Tardive Dyskinesia*

What is Tardive Dyskinesia (TD)?

Tardive dyskinesia is typically characterized by involuntary and abnormal movements of the jaw, lips and tongue. In some cases, the arms and/or legs may also be affected by involuntary, rapid jerking movements (chorea), or slow, writhing movements (athetosis).

Signs and Symptoms of Tardive Dyskinesia



Frowning



Tongue Sticking Out



Lip-smacking



Puckering or pursing of lips



Rapid eye blinking



Rapid and/or jerky movements of the arms, legs, and trunk may also occur

Treatment for Tardive Dyskinesia

Treatment of tardive dyskinesia (TD) usually involves discontinuing the neuroleptic drug as soon as involuntary facial, neck, trunk, or extremity movements are identified in people taking neuroleptic drugs, if this is felt to be safe psychiatrically.

Use of an “atypical” neuroleptic drug is sometimes used in place of traditional neuroleptics, if psychiatrically appropriate. However, the “atypical” neuroleptic drugs are also capable of causing and/or perpetuating tardive dyskinesia.

In some cases, physicians may be forced to reinstitute a neuroleptic drug if the tardive dyskinesia symptoms do not disappear and become very severe after medication is discontinued.

Medications that most commonly cause TD

Older Neuroleptics

- Chlorpromazine (Thorazine or Largactil)
- Fluphenazine (Prolixin, Modecate, or Moditen)
- Haloperidol (Haldol)
- Perphenazine (Trilafon, Etrafon, Triavil, or Triptafen)
- Prochlorperazine (Compro, Darbazine, or Neo Darbazine)
- Thioridazine (Mellaril)
- Trifluoperazine (Stelazine or Stelbid)

Antidepressants

- Amitriptyline (Elavil)
- Fluoxetine (Prozac)
- Phenelzine (Nardil)
- Sertraline (Zoloft)
- Trazodone (Desyrel or Oleptro)



Other miscellaneous medicines which have been known to cause tardive dyskinesia:

- Metoclopramide (Reglan or Metozolv ODT) used in the treatment of gastroparesis
- Levodopa (Larodopa or Dopar) used in the treatment of Parkinson’s
- Phenobarbital (Luminal or Solfoton) used in the treatment of seizures
- Phenytoin (Dilantin or Phenytek) used in the treatment of seizures

For more Health and Safety Alerts, visit the DBHDS webpage!

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Save the Date! 2019 Special Olympics Mission of Mercy June 8, 2019

The Special Olympics Mission of Mercy (MOM) Project will be held on Saturday, June 8, from 9:00 am-5:00 pm. at St. Christopher's School, 711 St. Christopher's Road, Richmond, VA 23226.

<https://www.vdaf.org/special-olympics-mission-of-mercy-mom-project.html>

Special Olympic participants will be seen for dental care on a first-come first-serve basis for a cleaning, filling, and/or extractions. This year, for the first time, the MOM Project will be open to any individual with an intellectual disability in the Richmond area. Due to limited parking at the school, volunteers and participants are asked to park at the University of Richmond and use the shuttles going to and from Saint Christopher's School. A very limited number of parking passes will be issued for parking at St. Christopher's.

For more information contact
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Special Olympics
Virginia



Virginia Dental Association Foundation (2019). Special Olympics Mom Project: 2019 Special Olympics Mission of Mercy. Retrieved from <https://www.vdaf.org/special-olympics-mission-of-mercy-mom-project.html>

The Office of Integrated Health is growing!

The Office of Integrated Health is pleased to announce the addition of a Physical Therapist to our team.

David Wilson is a Physical Therapist and Certified Wound Specialist. David comes to OIH with years of experience with the ID/DD population. David will primarily be working with our Mobile Rehab Engineering Team to provide consultations and subject matter expertise.

Welcome to the Team!



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