



March 15, 2025

Senator Deb Patterson, Chair  
Committee on Health Care  
Oregon State Senate  
State of Oregon  
900 Court Street NE, HR B  
Salem, OR 97301

Submitted Electronically

RE: SUPPORT for SB 448— Study for TD and Movement Disorders

Dear Senator Patterson:

On behalf of the Movement Disorders Policy Coalition (MDPC), I am writing in support of SB 448, a bill requiring the Oregon Health Authority to study movement disorders, such as tardive dyskinesia (TD), and report its findings to public health and health care related committees of the Legislative Assembly by December 31, 2025.

The Movement Disorders Policy Coalition serves as a platform from which stakeholders, including health care providers and patients, can provide input on policy decisions impacting patient-centered care for those living with movement disorders. As a coalition of more than twenty stakeholder organizations across the movement disorders space, MDPC advocates for personalized care for patients with movement disorders such as tardive dyskinesia, Parkinson's disease, essential tremor, Tourette Syndrome and Huntington's disease.

We would like to express our gratitude to Senator Patterson for sponsoring Senate Bill 448. Senate Bill 448 would direct the Oregon Health Authority to study medication-induced movement disorders. This plan would support patients living with medication-induced movement disorders by looking at opportunities to expand existing resources for patients, develop guidance for health care professionals, ensure equitable access for all patients. The report would also include recommendations on how the State of Oregon can support patients with medication induced movement disorders.

Movement disorders are a broad category of conditions that can vary greatly, but they all share one thing in common: they are complex, often progressive, and difficult to manage for both patients and their families.

One example is tardive dyskinesia, a medication-induced movement disorder caused by prolonged use of antipsychotic medications, which are commonly prescribed for conditions like schizophrenia, bipolar disorder, and depression. People with TD experience involuntary, repetitive movements in their face, limbs, or torso—movements that can be painful, embarrassing, and life-altering.

Patients with movement disorders like Tardive Dyskinesia often face significant mental health issues and stigma, which can affect their ability to work, sleep, maintain stable housing, and fully engage in society. That's why it's so important that we continue identifying ways to better support these patients, as well as caregivers.

Thankfully, over the past decade, we've seen major advancements in treating many of these disorders. But it's critical that state health organizations like the Oregon Health Authority work to identify opportunities to support patients living with conditions like tardive dyskinesia, in order to ensure patients can achieve a high quality of life.

We hope that with the passage of SB 448, the Oregon Health Authority will prioritize ensuring that patients with medication-induced movement disorders to have access to much needed resources such as timely screenings, diagnostic tools, and the FDA-approved treatments they need.

On behalf of the Movement Disorders Policy Coalition and our membership, thank you for your leadership on this important issue. If we can provide further details or answer any questions, please do not hesitate to reach out to me at [shu@allianceforpatientaccess.org](mailto:shu@allianceforpatientaccess.org).

Sincerely,  
Stephanie Hu  
Director  
Movement Disorders Policy Coalition