

CLINICAL GUIDANCE & RECOMMENDATIONS

VMAT2 inhibitors are the only FDA-approved treatment for TD^{11,14}

2020 AMERICAN PSYCHIATRIC ASSOCIATION GUIDELINES¹¹

- Treatment with a VMAT2 inhibitor is recommended in patients with moderate to severe TD and may also be considered in patients with mild TD

Anticholinergics are not recommended for the treatment of TD^{11,15,16}

BENZTROPINE PACKAGE INSERT¹⁶

- Benztropine is indicated as an adjunct to the treatment of parkinsonism and is useful in the control of extrapyramidal disorders (other than TD) due to neuroleptic drugs
- Benztropine is not recommended for use in patients with TD
- Antiparkinsonism agents do not alleviate the symptoms of TD, and in some instances may aggravate them

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- Anticholinergic medications do not improve and may even worsen TD

2013 AMERICAN ACADEMY OF NEUROLOGY GUIDELINES¹⁵

- There are insufficient data to recommend anticholinergics for the treatment of TD

BEERS CRITERIA¹⁷

- Benztropine may be associated with delirium, worsened cognitive impairment, worsened cognition, and worsened urinary retention; not recommended to prevent antipsychotic-induced extrapyramidal effects; not very effective for Parkinson's disease