WHAT IS CLAIMED IS:

1. Use of valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, in the manufacture of a medicament for the treatment of dyskinesia due to cerebral palsy in a patient in need thereof.

2. The use of claim 1, wherein the dyskinesia due to cerebral palsy is characterized by abnormal involuntary movements of the dystonic type.

3. The use of claim 1, wherein the dyskinesia due to cerebral palsy is characterized by abnormal involuntary movements of the athetoid type.

4. The use of claim 1, wherein the dyskinesia due to cerebral palsy is characterized by abnormal involuntary movements of the chorea type.

5. The use of any one of the preceding claims, wherein the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, is to be administered via a titration scheme that comprises the up-titration over a period of no more than about six weeks until an optimized dose is to be administered.

6. The use of claim 5, wherein the titration scheme comprises the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, to be administered at an initial dose equivalent to about 20 mg of valbenazine free base once daily for about two weeks for pediatric patients having a body weight less than 50 kg and, provided that the patient tolerates the initial dose and that the patient has not achieved satisfactory control of abnormal involuntary movements, the dose is to be increased and the increased dose is to be administered to the patient.

7. The use of claim 6, wherein the increased dose is equivalent to about 40 mg of valbenazine free base once daily.

8. The use of claim 6 or 7, wherein the titration scheme further comprises the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, to be administered at said increased dose for about two weeks.

9. The use of claim 7 or 8, wherein if the patient does not tolerate the increased dose, the optimized dose is the initial dose.

10. The use of claim 9, wherein if the patient tolerates the increased dose and if the patient has achieved satisfactory control of abnormal involuntary movements, the optimized dose is the increased dose.

11. The use of claim 9 or 10, wherein the optimized dose of the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, is to be further administered to the patient.

12. The use of claim 11, wherein if the patient tolerates the increased dose and if the patient has not achieved satisfactory control of abnormal involuntary movements, the dose is to be further increased.

13. The use of claim 12, wherein the further increased dose is equivalent to about 60 mg of valbenazine free base once daily.

14. The use of claim 12 or 13, wherein if the patient does not tolerate the further increased dose, the optimized dose is the increased dose.

15. The use of claim 12 or 13, wherein if the patient tolerates the further increased dose and if the patient has achieved satisfactory control of abnormal involuntary movements, the optimized dose is the further increased dose.

16. The use of claim 14 or 15, wherein the optimized dose of the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, is to be further administered to the patient.

17. The use of claim 5, wherein the titration scheme comprises the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, to be administered at an initial dose equivalent to about 40 mg of valbenazine free base once daily for about two weeks for patients having a body weight greater than or equal to 50 kg and, provided that the patient tolerates the initial dose and that the patient has not achieved satisfactory control of abnormal involuntary movements, the dose is to be increased and the increased dose is to be administered to the patient.

18. The use of claim 17, wherein the increased dose is equivalent to about 60 mg of valbenazine free base once daily.

19. The use of claim 17 or 18, wherein the titration scheme further comprises the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, to be administered at said increased dose for about two weeks.

20. The use of claim 19, wherein if the patient does not tolerate the increased dose, the optimized dose is the initial dose.

21. The use of claim 19, wherein if the patient tolerates the increased dose and patient has achieved satisfactory control of abnormal involuntary movements, the optimized dose is the increased dose.

22. The use of claim 20 or 21, wherein the optimized dose of the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, is to be further administered to the patient.

23. The use of claim 19, wherein if the patient tolerates the increased dose and if the patient has not achieved satisfactory control of abnormal involuntary movements, the dose is to be further increased.

24. The use of claim 23, wherein the further increased dose is equivalent to about 80 mg of valbenazine free base once daily.

25. The use of claim 23 or 24, wherein if the patient does not tolerate the further increased dose, the optimized dose is the increased dose.

26. The use of claim 23 or 24, wherein if the patient tolerates the increased dose and if the patient has achieved satisfactory control of abnormal involuntary movements, the optimized dose is the further increased dose.

27. The use of claim 23 or 24, wherein the optimized dose of the valbenazine, or an isotopic variant thereof, or a pharmaceutically acceptable salt of valbenazine or an isotopic variant thereof, is to be further administered to the patient.

28. The use of any one of the preceding claims, wherein the patient is 6 to 11 years.

29. The use of claim 28, wherein the patient weight <50 kg.

30. The use of any one of claims 1 to 27, wherein the patient is 12 to 17 years.

31. The use of claim 30, wherein the patient weight <50 kg.

32. The use of claim 30, wherein the patient weight ≥50 kg.

33. The use of any one of claims 1 to 27, wherein the patient is 18 or older.

34. The use of claim 33, wherein the patient weight ≥50 kg.

35. The use of any one of the preceding claims, wherein prior to administration, the patient has moderate or severe dyskinesia due to cerebral palsy.

36. The use of any one of the preceding claims, wherein prior to administration, the patient has a Clinical Global Impression of Severity (CGI-S) score of at least 4.

37. The use of any one of the preceding claims, wherein the treatment results in a change in the UHDRS TMC score, as assessed by an investigator.

38. The use of any one of the preceding claims, wherein the treatment results in a change in the UHDRS TMD score.

39. The use of any one of the preceding claims, wherein the treatment results in a change in CGI-S score.

40. The use of any one of the preceding claims, wherein the treatment results in a change in the UHDRS functional assessment and functional capacity scores.

41. The use of any one of the preceding claims, wherein the treatment results in a change in MD-CRS Part I score.

42. The use of any one of the preceding claims, wherein the treatment results in a change in Neuro-QoL.

43. The use of any one of the preceding claims, wherein the treatment results in a change in CP QoL-Teen.

44. The use of any one of the preceding claims, wherein the treatment results in a change in CP QoL-Teen (caregiver-proxy report).

45. The use of any one of the preceding claims, wherein the treatment results in a change in CP QoL-Child.

46. The use of any one of the preceding claims, wherein the treatment results in a cange in CP QoL-Child (caregiver-proxy report).

47. The use of any one of the preceding claims, wherein the treatment results in a change in the UHDRS TM.

48. The use of any one of the preceding claims, wherein valbenazine, or a pharmaceutically acceptable salt thereof, is to be administered.

49. The use of any one of the preceding claims, wherein a pharmaceutically acceptable salt of valbenazine is to be administered.

50. The use of claim 49, wherein the pharmaceutically acceptable salt is a tosylate salt.

51. The use of claim 50, wherein the tosylate salt is a ditosylate salt.

52. The use of claim 51, wherein the ditosylate salt is polymorphic Form I.