

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Date]

[Recipient's Name]
[Recipient's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally request a discontinuation of my prescription for Vyvanse due to [specific reasons such as side effects, personal health issues, or preference for alternative treatments].

Over the course of my treatment, I have experienced [describe specific experiences or challenges with Vyvanse]. After careful consideration and discussions with my healthcare provider, I believe that this is the best course of action for my health and well-being.

I understand the importance of a gradual withdrawal process and would like to discuss a suitable tapering schedule to ensure my comfort and safety. I appreciate your understanding and support in this matter.

Thank you for your attention to this request. I look forward to your prompt response.

Sincerely,

[Your Name]
[Your Contact Information]