

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Date]
[Recipient's Name]
[Recipient's Title]
[Recipient's Institution]
[Institution's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally address my concerns regarding the withdrawal side effects I have experienced after discontinuing Vyvanse (lisdexamfetamine).

Since ceasing the medication, I have encountered the following withdrawal symptoms:

- [List specific side effects, e.g., fatigue, irritability, decreased focus, mood swings, etc.]
- [Include duration and severity of symptoms if relevant]

These effects have had a significant impact on my daily life and overall well-being. I would appreciate any guidance or support you could provide during this time.

Thank you for your attention to this matter.

Sincerely,

[Your Name]
[Your Contact Information]