(Last)

(First)

C/O DOMAIN ASSOCIATES, LLC

(Middle)

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

7. Nature of Indirect

Beneficial Ownership (Instr. 4)

11. Nature

of Indirect Beneficial Ownership (Instr. 4)

Instruct	tion 1(b).			Fil								s Exchan			4		Liouis	, ро.	теоропос.	
1. Name and Address of Reporting Person*  DOMAIN PARTERS VII L P				2. IS C.A	or Section 30(h) of the Investment Company Act of 1940  2. Issuer Name and Ticker or Trading Symbol  CADENCE PHARMACEUTICALS INC [ CADX ]										eck all ap Dire	nip of Reportinoplicable)	ng P	X 10% C	n(s) to Issuer  10% Owner Other (specify	
(Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE					3. Date of Earliest Transaction (Month/Day/Year) 02/01/2013											fficer (give title elow)		below		
(Street) PRINCETON NJ 08542				-   4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  X Form filed by More than One Reporting					
(City)	(St	ate) (	(Zip)													Per	son			
		Tab	le I - No	n-Deri	vative	Sec	curitie	s Ac	quir	ed, D	isp	osed o	f, or l	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)					ay/Year)   E		2A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Secu	Amount of curities neficially ned Following		Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indired Beneficia Ownersh (Instr. 4)		
									ode V		Amount	(A (D	) or )	Price	Trans	saction(s) r. 3 and 4)			(,	
Common	Stock				1/2013					S <sup>(1)</sup>		9,769		D	\$4.85		540,520		D <sup>(2)(3)(4)</sup>	
		Ta	able II - I )									sed of, on the second of the s				Owned	i			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of		Expi	5. Date Exercis Expiration Date Month/Day/Yea			Amou Secur Under Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)
					Code	v	(A)	(D)	Date Exer	e rcisable		xpiration ate	Title	Amo or Num of Shar	ber					
		Reporting Person <sup>*</sup>					•						•	•	•					
	MAIN ASS	(First) OCIATES, LLC JARE	(Mide	dle)																
(Street)	TON	NJ	085	42																
(City)		(State)	(Zip)																	
	nd Address of JAMES	Reporting Person*																		
	MAIN ASS	(First) OCIATES, LLC JARE	(Mide	dle)																
(Street)	TON	NJ	085	42																
(City)		(State)	(Zip)																	
	nd Address of	Reporting Person*																		

ONE PALMER SQUARE								
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person*  TREU JESSE I								
(Last) C/O DOMAIN ASSONE PALMER SQ		(Middle)						
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
Name and Address of Reporting Person*     VITULLO NICOLE								
(Last)	(First)	(Middle)						
C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE								
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* <u>Halak Brian K</u>								
(Last) C/O DOMAIN ASS ONE PALMER SQ		(Middle)						
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* SCHOEMAKER KATHLEEN K								
(Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE								
(Street) PRINCETON	NJ	08542						
(City)	(State)	(Zip)						

## **Explanation of Responses:**

- 1. Sold pursuant to a Rule 10b5-1 Sales Plan adopted by the Reporting Person with respect to the Common Stock of the Issuer.
- 2. The securities reported as directly beneficially owned by the Reporting Person may be deemed to be indirectly beneficially owned by each of the Reporting Owners listed below, each of whom is a managing member of One Palmer Square Associates VII, LLC, the sole general partner of the Reporting Person. Pursuant to Instruction 4(b)(iv) of Form 4, each such individual has elected to report as indirectly beneficially owned the entire number of securities owned by the Reporting Person, however each of them disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.
- 3. As managing members of Domain Associates, LLC, each Reporting Owner listed below may also be deemed to indirectly beneficially own 27,500 shares of Common Stock held by Domain Associates, LLC.
- 4. As managing members of the respective sole general partners of DP VII Associates, L.P., Domain Partners VI, L.P. and DP VI Associates, L.P., each Reporting Owner listed below (except for Brian K. Halak with respect to Domain Partners VI, L.P. and DP VI Associates, L.P.) may also be deemed to indirectly beneficially own the securities of the Issuer held by each such entity, as reported on Form 4s for each such entity filed separately on the same date as this Form 4.

## Remarks:

/s/Kathleen K. Schoemaker, as 02/05/2013

Managing Member of One
Palmer Square Associates VII,
LLC, General Partner of
Domain Partners VII, L.P.,
individually, & as Attorney-in-

Fact for James C. Blair, Brian H. Dovey, Jesse I. Treu, Nicole Vitullo and Brian K. Halak

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.