SEC Form 4	
------------	--

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL

L	Estimated average burden hours per response:	0.5
l		

CRAIG WIL			2. Issuer Name and Ticker or Trading Symbol <u>CADENCE PHARMACEUTICALS INC</u> [CADX]		tionship of Reporting Per all applicable) Director Officer (give title below)	son(s) to Issuer 10% Owner Other (specify below)		
			3. Date of Earliest Transaction (Month/Day/Year) 08/31/2009		SVP			
(Street) SAN DIEGO (City)	CA (State)	92130 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	idual or Joint/Group Filin Form filed by One Rep Form filed by More tha Person	orting Person		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

	1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted stock units	(1)	08/31/2009		Α		15,000		(2)	(2)	Common stock	15,000	\$0.00	15,000	D	

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of the Company's common stock.

2. 1/2 of the shares subject to the restricted stock unit award vest and convert into shares of common stock on the earlier of (a) FDA approval of the Company's NDA for intravenous acetaminophen if such approval is obtained before December 31, 2009, and (b) immediately prior to the consummation of a change in control of the Company if such change in control occurs before December 31, 2009. Subject to the recipient's election to defer the receipt of common stock subject to the other 1/2 of the shares subject to the restricted stock unit award, such shares vest and convert into shares of common stock on the earlier of (a) the one-year anniversary of FDA approval of the Company's NDA for intravenous acetaminophen, and (b) immediately prior to the consummation of a change in control of the Company. In each case, vesting is subject to the recipient's continued status as an employee, independent director or consultant of the Company or any subsidiary on the applicable vesting date.

Remarks:

Hazel M. Aker Attorney-in-fact 09/02/2009

** Signature of Reporting Person Date

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

* 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.