

OMB APPROVAL	
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**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person* <u>DP VI Associates, L.P.</u>  (Last) (First) (Middle) <u>C/O DOMAIN ASSOCIATES, LLC</u> <u>ONE PALMER SQUARE</u>  (Street) <u>PRINCETON NJ 08542</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>CADENCE PHARMACEUTICALS INC [ CADX ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>01/22/2013</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting 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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	01/22/2013		s <sup>(1)</sup>		495	D	\$5.02	88,825	D <sup>(2)(3)</sup>	
Common Stock	01/23/2013		s <sup>(1)</sup>		839	D	\$5.11	87,986	D <sup>(2)(3)</sup>	

**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)
						Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person\*  
DP VI Associates, L.P.  
 (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\*  
BLAIR JAMES C  
 (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\*  
DOVEY BRIAN H  
 (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\*

TREU JESSE I

(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\*

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\*

SCHOEMAKER KATHLEEN K

(Last) (First) (Middle)

C/O DOMAIN ASSOCIATES, LLC  
ONE PALMER SQUARE

(Street)  
PRINCETON NJ 08542

(City) (State) (Zip)

**Explanation of Responses:**

- Sold pursuant to a Rule 10b5-1 Sales Plan adopted by the Reporting Person with respect to the Common Stock of the Issuer.
- 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 VI, 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.
- 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. As managing members of the respective sole general partners of DP VII Associates, L.P., Domain Partners VI, L.P. and Domain Partners VII, L.P., each Reporting Owner listed below 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  
Managing Member of One  
Palmer Square Associates VI,  
LLC, General Partner of DP VI  
Associates, L.P., individually, 01/24/2013  
& as Attorney-in-Fact for  
James C. Blair, Brian H.  
Dovey, Jesse I. Treu & Nicole  
Vitullo

\*\* 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.