FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

Name and Address of Reporting Person* DP VI Associates, L.P.						2. Issuer Name and Ticker or Trading Symbol CADENCE PHARMACEUTICALS INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
DI VITASSOCIALES, E.I.						CADX]								Directo	r	X	10% O\	vner		
(Last)	st) (First) (Middle)				_									Officer below)	(give title	Other (s	specify			
C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE						3. Date of Earliest Transaction (Month/Day/Year) 10/30/2006														
					10															
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)									_				Lin	- /		_				
PRINCE	TON N	J	08542												•		orting Perso One Repo	I		
(City)	(S	tate)	(Zip)		-									Persor	1					
			,																	
		Tak	ole I - Nor	n-Deri	vativ	e Se	curit	ties Ac	quired,	Dis	posed o	f, or Ber	neficial	ly Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/L					saction	Execution Date, Day/Year) if any			3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4				d (A) or	or 5. Amount of and Securities				7. Nature of Indirect		
					/Day/Y				Code (Instr. 5)		1 Or (D) (INSTR. 3, 4 a		Beneficia	Beneficially Owned Following		r Indirect	Beneficial			
							(Month/Day/Year)		7) 8)				Reported	a " ```		Instr. 4)	Ownership (Instr. 4)			
									Code	v	Amount	ount (A) or Pr			Transaction(s) (Instr. 3 and 4)					
Common Stock 10/30				0/200	/2006		С		60,58	60,584 A		60,	60,584		D					
			Table II -	Deriva	ative	Sec	uritia	es Acai	uired [isn	osed of	or Bene	ficially	Owned		J.				
											convertib			Ownea						
1. Title of	2.	3A. Deemed							6. Date Exercisa					9. Number of		10.	11. Nature			
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution I		Transa Code (Expiration Dat (Month/Day/Ye			of Securit Underlyin		Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial		
(Instr. 3)	Price of Derivative			Month/Day/Year) 8			Acquired (A) or Disposed				Derivative Sec (Instr. 3 and 4		Security	(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)		
	Security						of (D) (Instr. 3, 4 and 5)					(msu. o ai	iu +,		Following Reported		(I) (Instr. 4			
							П						Amount	1	Transacti (Instr. 4)	on(s)				
													or Number							
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of Shares							
Control A. 1					-	<u> </u>	(,,	(2)	Excroise			11110	Onurco	+	_			+		
Series A-1 Preferred Stock	(1)	10/30/2006			С			42,301	(1)		(1)	Common Stock	10,575	(1)	0		D			
Series A-2							П		461			Common	1.6053							
Preferred Stock	(1)	10/30/2006			С			67,492	(1)		(1)	Stock	16,873	(1)	0		D			
Series A-3 Preferred Stock	(1)	10/30/2006			С			132,544	(1)		(1)	Common Stock	33,136	(1)	0		D			
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Explanation of Responses:

1. All outstanding shares of the Issuer's preferred stock were automatically converted into Common Stock upon the closing of the Issuer's initial public offering, for no additional consideration.

Remarks:

/s/Kathleen K. Schoemaker, Managing Member of One 10/30/2006 Palmer Square Associates VI, LLC, General Partner of DP VI Associates, L.P.

** 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.