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
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* THOMPSON VIRGIL D (Last) (First) (Middle) 3260 WHIPPIE ROAD				3	Issuer Name and Ticker or Trading Symbol QUESTCOR PHARMACEUTICALS INC [QSC] Indee of Earliest Transaction (Month/Day/Year) 01/01/2006									all applic Directo	able)	g Pers	10% O Other (below)	vner	
(Street) UNION				⊢	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(3)erivati	10 S C	curitio	<u> </u>	auired	Dien	need o	f or Bo	nefici:	ally O	Jwned					
Date				Transactio	n Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			or 5. Amour and Securitie Beneficia Owned F		s illy ollowing	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code			v	Amount	(A) or (D)	Price	, I	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)		
			Table II - De					uired, D s, option						vned					
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/Ye	Code	action (Instr.			6. Date Exercisa Expiration Date (Month/Day/Year		of Securitie				8. Price of Derivative Security (Instr. 5)	9. Number		Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
			(Monthin Day) Te	ar) 8)		Securiti Acquire (A) or Dispose of (D) (I	ies ed ed nstr.	(Month/Da		r)	Underlyin Derivative	g Security	Sec	curity	derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Illy J		Beneficial Ownership	
			(wonunbay) Te	ar) 8)		Securiti Acquire (A) or Dispose of (D) (I	ies ed ed nstr.	(Month/Da	y/Year	xpiration	Underlyin Derivative	g Security	Sec (Ins	curity	Securities Beneficial Owned Following Reported Transaction	s Illy J	Form: Direct (D) or Indirect	Beneficial Ownership	
Stock Option (Right to Buy) ⁽¹⁾	\$1.04	01/01/2006	(WOILLII) Day 1 E		<u> </u>	Securiti Acquire (A) or Dispose of (D) (I 3, 4 and	ies ed ed nstr. i 5)	Date	le Da	xpiration	Underlyin Derivative (Instr. 3 a	Amoun or Numbe of	Sec (Ins	curity	Securities Beneficial Owned Following Reported Transaction	s Illy J	Form: Direct (D) or Indirect	Beneficial Ownership	
Option (Right to	\$1.04 \$1.04	01/01/2006	(WOILLII/Day) Te	Code	<u> </u>	Securiti Acquire (A) or Dispose of (D) (I 3, 4 and	ies ed ed nstr. i 5)	Date Exercisab	le Da	xpiration	Underlyin Derivative (Instr. 3 au	Amoun or Numbe of Shares	y Sec (Ins	curity str. 5)	Securities Beneficial Owned Following Reported Transactic (Instr. 4)	on(s)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	

Explanation of Responses:

- 1. Options were granted under the Questcor Pharmaceuticals, Inc. 2004 Non-Employee Director Equity Incentive Plan.
- 2. The options vest monthly over 48 months from the date of the grant.
- 3. Options vest 100% on date of grant.

Virgil D. Thompson

01/04/2006

** 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.