FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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ion 16. Fo	orm 4 or Fo	orm 5	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden

ال obligati	ons may contir ion 1(b).			File							es Exchanç			34			ll ll		response:	0.5
1. Name and Address of Reporting Person* ProQuest Investments III, L.P.			2. I <u>C.</u>	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol CADENCE PHARMACEUTICALS INC CADX]									5. Relationship of R (Check all applicable Director				X 10% C	Owner		
(Last) (First) (Middle) 90 NASSAU STREET, 5TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 08/28/2007 Officer (give title below) below) below) Other (specify below)														
(Street) PRINCE			08542		4. 1	If Am	endment	, Date o	f Original	Filed	(Month/Da	ay/Ye	ar)		i. Indivi ine)	Form	n filed by O	ne R	ling (Check A eporting Pers han One Rep	on
(City)	(3)	•	(Zip)	. Di.	- 4:			- 4		D:-				- 6: - :	- 11 4		1			
1. Title of S	Security (Inst		ile i - No	2. Transa Date (Month/D	ction		2A. Deem Execution if any (Month/D	ned n Date,	3. Transa Code (ction	4. Securit Disposed 5)	ties A	cquired	(A) or	.	5. Amo Securi Benefi Owned	ount of ties cially d Following	Fo (D	Ownership orm: Direct o) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			08/28	/200	7			S		1,322		D	\$1	4.2	3,0	32,669		D ⁽¹⁾	
Common	Stock			08/29	/200	7			S		100		D	\$1	4.2	3,0	32,569		D ⁽¹⁾	
Common	Stock			08/29	/200	7			S		200		D	\$14	1.14	3,0	32,369		D ⁽¹⁾	
Common	Stock			08/29	/200	7			S		200		D	\$14	.13	3,0	32,169		D ⁽¹⁾	
Common	ommon Stock		08/29	08/29/2007				S		235		D	\$14.11		3,031,934			D ⁽¹⁾		
Common	Stock			08/29	/200	7			S		300		D	\$1	4.1	3,0	31,634		D ⁽¹⁾	
Common Stock			08/29	29/2007				S		100		D	\$14.08		3,031,534		┸	D ⁽¹⁾		
Common Stock (08/29	/2007			S		8,865		D	\$14		3,022,669			D ⁽¹⁾			
		T									sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Transaction 3A. Deemed 4. 5. Number 6. Date Exercite Execution Date, Transaction of Expiration Date		xercis	sable and 7. Title and e Amount of				8. Pri Deriv Secu (Insti	ative rity	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount mber ares						
		Reporting Person [*]																		
(Last) 90 NASS	AU STRE	(First) ET, 5TH FLOO!	(Mid	dle)																
(Street)	ГОП	NJ	085	42																
(City)		(State)	(Zip)																	

(Street)
PRINCETON NJ 08542

(City) (State) (Zip)

1. Name and Address of Reporting Person*
SCHREIBER ALAIN

(Last) (First) (Middle)
C/O CADENCE PHARMACEUTICALS, INC.
12481 HIGH BLUFF DRIVE, SUITE 200

(Street)
SAN DIEGO CA 92130

(City)	(State)	(Zip)						
1. Name and Address Moorin Jay	ss of Reporting Person*							
(Last) C/O PROQUEST	(First) T INVESTMENTS	(Middle)						
90 NASSAU STREET, 5TH FLOOR								
(Street)								
PRINCETON	NJ	08542-4520						
(City)	(State)	(Zip)						

Explanation of Responses:

1. Dr. Schreiber and Mr. Moorin are managing members of ProQuest Associates III LLC and general partners of ProQuest Investments III, L.P. Dr. Schreiber and Mr. Moorin disclaim beneficial ownership of these shares, except to the extent of their respective pecuniary interests therein, and this report shall not be deemed an admission for Section 16 or any other purpose.

Remarks:

/s/ Hazel M. Aker, Attorney-in-08/30/2007 **fact**

** 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.