SEC Form 4	
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(City)

(Last)

(State)

(First)

1. Name and Address of Reporting Person*

DOVEY BRIAN H

(Zip)

(Middle)

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

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							
OMB Number:	3235-0287						
Estimated average burde	en						
hours per response:	0.5						

1. Name and Address of Reporting Person* Domain Partners VI, L.P. (Last) (First) (Middle) C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE (Street) PRINCETON NJ 08542					2. l: <u>C</u> A CA 3. L 03/	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol CADENCE PHARMACEUTICALS INC CADX 3. Date of Earliest Transaction (Month/Day/Year) 03/13/2013 4. If Amendment, Date of Original Filed (Month/Day/Year)							6.	 5. Relationship of Reporting Person(S) to Issuer (Check all applicable) Director X 10% Owner Officer (give title Other (specify below) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person 							
(City) (State) (Zip)																					
		Tab	le I - Noi	1						-	Dis	1				-	vne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				ay/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securities Beneficially Owned Follow Reported		ies cially Following ed	Foi (D)	Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	Amount (A (D		Price	e (in	Transaction(s) (Instr. 3 and 4)					
Common					3/2013					S ⁽¹⁾		23,84		D	\$5			87,303		D ⁽²⁾⁽³⁾	
Common	Stock				4/2013					S ⁽¹⁾		15,48		D	\$ <mark>5</mark> .		7,571,823			D ⁽²⁾⁽³⁾	
		Ta	able II - I (Deriva e.g., p	tive S uts, c	Secu calls	uritie s, wa	es A arra	Acqui Ints,	ired, Di option	ispo s, co	sed of, onvertib	or E ole s	Benefic ecurit	cially ties)	y Own	ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any Code (Instr. Derivative (Month/Day/Year) 8) Securities Acquired Output Out			ount of urities lerlying ivative urity (Ins 4)						10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)									
					Code	v	(A	A)		Date Exercisa		Expiration Date	Title	or Num of							
		Reporting Person [*] S VI, L.P.																			
	MAIN ASS LMER SQI	(First) OCIATES, LLC JARE	(Mido	ile)																	
(Street) PRINCE	TON	NJ	0854	12																	
(City)		(State)	(Zip)																		
	nd Address of JAMES	Reporting Person [*]																			
	MAIN ASS LMER SQI	(First) OCIATES, LLC JARE	(Mido	lle)		_															
(Street) PRINCE	TON	NJ	0854	12																	

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) C/O DOMAIN ASS	(First) SOCIATES, LLC	(Middle)									
ONE PALMER SQ	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	08542										
(City)	(Zip)										

Explanation of Responses:

1. Sold pursuant to a Rule 10b5-1 Sales Plan adopted by the Reporting Person with respect to the Common Stock of the Issuer.

2. 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 percunary interest therein and/or that are not actually distributed to him or her.

3. 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 VII, L.P. and DP VI Associates, 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, asManaging Member of OnePalmer Square Associates VI,LLC, General Partner ofDomain Partners VI, L.P.,03/15/2013individually, & as Attorney-in-Fact for James C. Blair, BrianH. Dovey, Jesse I. Treu &Nicole Vitullo** Signature of Reporting PersonDate

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.