FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES I	N 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

Name and Address of Reporting Person* AKER HAZEL M					<u>C</u>	2. Issuer Name and Ticker or Trading Symbol CADENCE PHARMACEUTICALS INC CADX]								heck all ap Dire	ationship of Reporting k all applicable) Director Officer (give title below)		son(s) to Is: 10% O Other (below)	wner		
(Last) (First) (Middle) C/O CADENCE PHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 07/15/2013								SVP, GC & Secretary						
12481 HIGH BLUFF DRIVE, SUITE 200					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) SAN DII	EGO C.	A !	92130			and the state of t						.,		ne) X Forr Forr	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)											reis	OII					
		Tab	le I - N	on-Deri\	/ative	Sec	uriti	ies Ac	quire	d, Di	sposed o	of, or Be	eneficia	lly Own	ed					
Date			2. Transac Date (Month/Da	y/Year) Exe		2A. Deemed Execution Date, f any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5) Secui Bene Owne	icially d Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		ted action(s) 3 and 4)			(Instr. 4)		
common stock 07/15/20				2013)13			M		6,508	A	\$3.5	1 :	0,253	D					
common stock 07/15/2			2013	013		S ⁽¹⁾		6,508	D	\$7.341	7 ⁽²⁾	3,745		D						
		Т	able II								posed of, converti			y Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) if	Execution if any	A. Deemed xecution Date, 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 Expiration Date (Month/Day/Year)		d 7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares							
stock option (right to	\$3.51	07/15/2013			M			6,508	09/14/2	012	03/14/2022	common stock	6,508	(3)	26,349		D			

Explanation of Responses:

- 1. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 10, 2013.
- 2. This transaction was executed in multiple trades at prices ranging from a low of \$7.28 to a high of \$7.50. The price reported above reflects the weighted average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. Not applicable to this transaction.

Remarks:

Hazel M. Aker

07/17/2013

** 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.