FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

**OMB APPROVAL** OMB Number: Estimated average burden

0.5

hours per response:

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

					UI	Secu	30(	ii) oi tile	invesiment	CUII	lipally Act t	JI 1940							
1. Name and Address of Reporting Person*  EAGLE MICHAEL L						2. Issuer Name <b>and</b> Ticker or Trading Symbol CADENCE PHARMACEUTICALS INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
						CADX ]													
(Last)	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)								$\dashv$	below	er (give title v)		Other (s below)	spесіту	
C/O CADENCE PHARMACEUTICALS, INC.						03/19/2014													
12481 H	IGH BLUF	F DRIVE, STE.	200		$\vdash$								_						
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)													اٰ	,	filed by One	e Reno	orting Perso	n	
SAN DII	EGO CA		92130												•		One Repo	- 1	
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(City)	(S	state)	(Zip)																
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		ian	ie i - Noi	1-Deriv	ative	Se	curit	ies Ac	quirea, i	JIS	posea o	t, or Be	netici	ally Owne	a				
1. Title of Security (Instr. 3) 2. Transa					action		2A. De		3. Transaction		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		ed (A) or	5. Amo				7. Nature of Indirect	
(Month/E				Day/Ye	ar)   i	Execution Date, if any		Code (Instr.		5)		ou. 3, 4 a	Benefic	ally (D)		r Indirect	Beneficial		
						- [	(Month/Day/Year		r) 8)					Reporte		(I) (In 		Ownership (Instr. 4)	
									Code	Code V		(A) o (D)	r Price		Transaction(s) (Instr. 3 and 4)				
								_							,	]			
		-												ly Owned					
				(e.g., p	uts,	can	S, Wa	ırrants	, options	s, c	onvertit	Jie Seci	irities	)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date, T	4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year		Amount of		of s ng e	8. Price of Derivative Security (Instr. 5)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Γ						П			Amoun	t					
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	or Numbe of Shares						
stock							1			$\top$									
option (right to buy)	\$9.32	03/19/2014			D			25,000	(1)	(	03/28/2020	common stock	25,00	\$4.69	0		D		
stock							1			$\top$				1	Ì			1	
option	\$9.25	03/19/2014			D			12,500	(1)		06/15/2021	common stock	12,50	0 \$4.75	0		D		
(right to buy)							1					SIUCK							
stock		1					T			$\top$				1	1			<del>                                     </del>	
option	\$2.98	03/19/2014			D			17,500	(1)		06/13/2022	common	17,50	0 \$11.02	0		D		
(right to buy)							1					stock							
stock		<del>                                     </del>					+			$\dashv$				+					
option (right to	\$7.21	03/19/2014			D			25,000	(1)		06/12/2023	common stock	25,00	0 \$6.79	0		D		

## **Explanation of Responses:**

1. In connection with the merger of Cadence Pharmaceuticals, Inc. ("Cadence") with Madison Merger Sub, Inc. ("Merger Sub") on March 19, 2014, and pursuant to the terms of the Agreement and Plan of Merger (the "Merger Agreement") by and among Cadence, Mallinckrodt plc ("Parent") and Merger Sub, dated February 10, 2014, this option became fully vested and was automatically canceled and terminated and the holder became entitled to receive an amount in cash, without interest and less the amount of any tax withholding, equal to the product of (a) the number of shares of common stock of Cadence underlying such option multiplied by (b) the excess, if any, of \$14.00 (the "Offer Price") over the exercise price per share of such option.

## Remarks:

/s/ Hazel M. Aker, Attorney-in-03/21/2014 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.