FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
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hours per response:	0.5										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Ramsay David Russ				2. Issuer Name and Ticker or Trading Symbol Vanda Pharmaceuticals Inc. [VNDA]							(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) 47 HULFI SUITE 310	(Firs SH STREE 0	,	Aiddle)	05/1	3. Date of Earliest Transaction (Month/Day/Year) 05/16/2007								below)			below)`	
(Street) PRINCETON NJ 08542 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year) ative Securities Acquired, Disposed of, or Benefic							Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person Person Sially Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			saction	action 2A. Deemed Execution Date,		3. 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 to Code (Instr. 5)		l (A) or	5. Amoun Securities Beneficia Owned Fo	s Form Illy (D) o ollowing (I) (Ir		Direct Endirect Etr. 4)	'. Nature of ndirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
		Т	able II - Deriv (e.g.,							sed of, onvertib			Owned				
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/Year)	Date, Transaction Code (Ins.				6. Date Exercisable a Expiration Date (Month/Day/Year)		e	and 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares					
Nonstatutory Stock Option (Right to Buy)	\$19.59	05/16/2007		A		14,037		(1)		05/15/2017	Common Stock	14,037	\$0.00	14,037	,	I	*(2)
Nonstatutory Stock Option (Right to Buy)	\$19.59	05/16/2007		A		963		(1)		05/15/2017	Common Stock	963	\$0.00	15,000		I	*(3)

Explanation of Responses:

- 1. Exercisable after June 16, 2007 each month with respect to 8.334% of the shares subject to the option.
- 2. The reportable securities are owned directly by Care Capital Investments II, L.P. and indirectly by Care Capital II, LLC as general partner of Care Capital Investments II, L.P. The reporting person is a managing member of Care Capital II, LLC. The reporting person disclaims beneficial ownership of the reportable securities and this report shall not be deemed an admission that he is the beneficial owner of such securities for purposes of Section 16 or for any other purposes, expect to the extent of his pecuniary interest therein.
- 3. The reportable securities are owned directly by Care Capital Offshore Investments II, L.P. and indirectly by Care Capital II, LLC as general partner of Care Capital Offshore Investments II, L.P. The reporting person is a managing member of Care Capital II, LLC. The reporting person disclaims beneficial ownership of the reportable securities and this report shall not be deemed an admission that he is the beneficial owner of such securities for purposes of Section 16 or for any other purposes, expect to the extent of his pecuniary interest therein.

Remarks:

/s/David Russ Ramsay ** Signature of Reporting Person 05/18/2007

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.