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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								
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1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol Vanda Pharmaceuticals Inc. [VNDA]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>SCHOEMAR</u>	KER KATHLEE	<u>EN K</u>	Valua I hatmacculcais Inc. [VNDA]	Director X 10% Owner					
	(First) ASSOCIATES, LL	(Middle) C	3. Date of Earliest Transaction (Month/Day/Year) 11/03/2006	Officer (give title Other (specify below) below)					
ONE PALMER SQUARE			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PRINCETON	NJ	08542		 X Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities A Disposed Of (5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	11/03/2006		J ⁽¹⁾		634,000	D	(1)	2,535,626	Ι	By Domain Partners VI, L.P. ⁽²⁾
Common Stock	11/03/2006		J(1)		10,675	A	(1)	10,675	I	By One Palmer Square Associates VI, L.L.C.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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)	4. Transa Code (8)		of		f Expiration Date erivative ecurities cquired A) or isposed f (D) nstr. 3, 4			and ht of ties ying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Distribution of shares by Domain Partners VI, L.P. to its partners.

2. The Reporting Person also indirectly beneficially owns 33,968 shares of Common Stock held by DP VI Associates, L.P. The Reporting Person is a Managing Member of One Palmer Square Associates VI, L.L.C., which is the sole general partner of Domain Partners VI, L.P. and DP VI Associates, L.P. Pursuant to Instruction 4(b)(iv) of Form 4, the Reporting Person has elected to report as indirectly beneficially owned by each such entity. The Reporting Person disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.

Remarks:

/s/Kathleen K. Schoemaker ** Signature of Reporting Person

Date

11/03/2006

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.