Form 3 April 12, 2006									
FORM :	3 ^{UNII}	TED STAT	ATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES nt to Section 16(a) of the Securities Exchange Act of 1934, f the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940				OMB APPROVAL OMB 3235-0104 Number: January 31, 2005 Estimated average burden hours per response 0.5		
	File	d pursuant 1 17(a) of							
(Print or Type Resp	ponses)								
1. Name and Address of Reporting Person <u>*</u> MORE ROBERT J			2. Date of Event Requiring Statement (Month/Day/Year)	 3. Issuer Name and Ticker or Trading Symbol Vanda Pharmaceuticals Inc. [VNDA] 					
	(First)	(Middle)	04/12/2006	4. Relationshi Person(s) to I			Amendment, Date Original I(Month/Day/Year)		
C/O DOMAIN LLC, ONE P SQUARE		IATES,		(Check	all applicable)				
	Street)		(give title below) (specify below) Filing(ividual or Joint/Group (Check Applicable Line) orm filed by One Reporting		
PRINCETON,	NJ 08	3542		Person					
(City) (State)	(Zip)	Table I - N	lon-Derivat	tive Securiti	es Benefici	ally Owned		
1.Title of Security (Instr. 4)			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Benefi	cial	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Vanda Pharmaceuticals Inc.

SEC 1473 (7-02)

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 control number.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)		

				Shares		or Indirect (I) (Instr. 5)	
Series B Preferred Stock	(2)	(2)	Common Stock	3,169,626 (3)	\$ <u>(2)</u>	Ι	By Domain Partners VI, L.P.
Series B Preferred Stock	(2)	(2)	Common Stock	33,968 <u>(3)</u>	\$ <u>(2)</u>	Ι	By DP VI Associates, L.P. (1)

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Plane / Planess	Director	10% Owner	Officer	Other		
MORE ROBERT J C/O DOMAIN ASSOCIATES, LLC ONE PALMER SQUARE PRINCETON, NJ 08542	Â	X	Â	Â		
Signatures						
/s/Kathleen K. Schoemaker, Attorney-in-Fact		04/12/20	06			
**Signature of Reporting Person		Date				

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).

The Reporting Person is a Managing Member of One Palmer Square Associates VI, LLC, which is the sole general partner of Domain Partners VI, L.P. and DP VI Associates, L.P. Pursuant to Instruction (5)(b)(iv) of Form 3, the Reporting Person has elected to report as

- (1) indirectly beneficially owned the entire number of securities 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.
- (2) All outstanding shares of the Issuer's preferred stock will automatically convert into Common Stock immediately upon the closing of the Issuer's initial public offering, for no additional consideration.
- (3) Reflects a 1 for 3.309755 the reverse split of the Common Stock.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.