FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

l	OIVID APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

1. Name and Address of Reporting Person* <u>ESSEX WOODLANDS HEALTH</u> <u>VENTURES FUND V LP</u>				4	2. Issuer Name and Ticker or Trading Symbol ACURA PHARMACEUTICALS, INC [ ACUR ]								lationship of ck all applica Director Officer ( below)	able)	y Perso	. ,	ner	
(Last) 21 WATI	`	First) /ENUE, SUITE	(Middle) 225	[:	10/01/2	2012		action (Mor						, 			,	
(Street) WOODL (City)		X State)	77380 (Zip)		I. If Ame	endment, [	Oate o	f Original F	iled	(Month/Da	y/Year)		6. Inc Line)	_	ed by One	Repo	(Check App rting Persor One Repor	
		Ta	ble I - Non-	-Derivat	ive Se	ecurities	s Ac	auired. [	Disi	oosed o	f. or B	enef	icially	Owned				
1. Title of Security (Instr. 3)  2. Transa Date				2. Transact	action 2A. Deemed Execution Date,		3. 4. Securion Disposed Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 an		A) or	5. Amoun Securities Beneficia Owned Fo	s lly ollowing	Form (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount	Amount (A) or (D)		Price	Transacti (Instr. 3 a	Transaction(s) Instr. 3 and 4)			, ,		
Common Stock 10/01					012			J <sup>(1)</sup>		9,622,3	335	A	\$0	\$0 9,781,985			D	
			Table II - D					uired, Di , options						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	Execution Date, Transaction Derivative Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)					
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	or Nu	nount mber Shares		(Instr. 4)	on(s)		
Common Stock Warrants (right to buy)	\$3.4	10/01/2012		J <sup>(1)</sup>		502,901		08/20/2007	0	8/20/2014	Common Stock	<sup>1</sup> 50	2,901	\$0	512,90	)1	D	

## **Explanation of Responses:**

1. 1. On November 3, 2005, Galen Partners III, LP, et al ("Galen"), Care Capital Investments II, L.P., et al ("Care Capital"), and Essex Woodlands Health Ventures V, L.P. ("Essex") entered into an Operating Agreement, whereby each of such entities contributed all shares owned by each of such entities in Acura Pharmaceuticals, Inc. ("Acura") to GCE Holdings LLC ("GCE"). The members of GCE dissolved GCE effective October 1, 2012, with the result that all remaining shares of Acura and warrants to purchase shares of Acura held by GCE were distributed to the members. The number of shares of common stock and warrants to purchase shares of common stock of Acura represented on this Form 4 as being acquired by Essex represents the shares of common stock and warrants to purchase shares of common stock of Acura received by Essex from such distribution.

> By:Essex Woodlands Health Ventures V, L.P., General Partner, By: Essex Woodlands Health Ventures V, LLC, 10/01/2012 General Partner to the General Partner, By: Martin P. Sutter, Manager

\*\* 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.