## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|             |      |       |

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|

OMB APPROVAL OMB Number: Estimated average burden 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

| 1. Name and Address of Reporting Person*  SHORTLIFFE LINDA M DAIRIKI   |   |  |  |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol VIVUS INC VVUS |   |         |     |  |       |                  |   | eck all app                                | licable)<br>tor  | ng Per  | son(s) to Iss   | ner  |   |  |
|--|---|--|--|---|---|---|---------|-----|--|-------|------------------|---|--|--|---|---|--|---|--|
| (Last) (First) (Middle) 1172 CASTRO STREET   |   |  |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/14/2006 |   |   |         |     |  |       |                  | Office<br>below   | er (give title<br>/)                       |  | Other (s<br>below)                              | pecify  |  |   |  |
| (Street)  MOUNT VIEW   | MOUNTAIN CA 94040   |  |  |   | 4. If   | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |         |     |  |       |                  |   | Line                                       | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |   |   |  |   |  |
| (City)   | (Si   |  | (Zip)  | - Dariy   | rative  | iting Committing Associated Discount of an Department Co. |         |     |  |       |                  |   |  |  |   |   |  |   |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |  |   |   |   |         |     |  |       |                  |   |  |  |   |   |  |   |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da   |   |  |  | Execution Da  |   | Date, Transaction Code (Insti                             |         |     |  |       |                  | I Securi<br>Benefi  | rities F<br>ficially (I<br>ed Following (I |  | Form: Direct<br>D) or Indirect<br>I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |  |   |  |
|  |   |  |  |   |   |   | Code    | v   | Amount   | (A) o | Price            | Transa<br>(Instr.   | tion(s)                                    |  |   | msu. 4)   |  |   |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |  |   |   |   |         |     |  |       |                  |   |  |  |   |   |  |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date<br>if any<br>(Month/Day/Yea |   | Code (Insti   |   | on of I |     | 6. Date Exercisal<br>Expiration Date<br>(Month/Day/Year) |       |                  | and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)  |   | e<br>S<br>Illy  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>t (Instr. 4) |  |
|  |   |  |  |   | Code  | v   | (A)     | (D) | Date<br>Exercisable                                      |       | xpiration<br>ate | Title   | Amount<br>or<br>Number<br>of<br>Shares     |  |   |   |  |   |  |
| Incentive<br>Stock<br>Option<br>(right to<br>buy)  | \$3.9   | 06/14/2006                                 |  |   | A   |   | 8,000   |     | (1)  | 06    | 5/14/2016        | Common<br>Stock   | 8,000                                      | (2)  | 8,000   | )   | D  |   |  |

## **Explanation of Responses:**

- 1. The option vests in eight equal monthly installments beginning on 7/1/06.
- 2. There is no purchase price necessary. This is an option grant.

Linda M. Dairiki Shortliffe,

M.D.

06/15/2006

\*\* 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.