#### Edgar Filing: CRITICAL THERAPEUTICS INC - Form 4

Washington, D.C. 20549Check this box if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									OMB Number: Expires: Estimated burden hou response	Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u> GADICKE ANSBERT			2. Issuer Name and Ticker or Trading Symbol CRITICAL THERAPEUTICS INC [CRTX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O MPM ASSET MANAGEMENT, 200 CLARENDON STREET, 54TH FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 02/13/2007					Director     10% Owner       Officer (give title     _X Other (specify below)       Former 10% Owner				
BOSTON, N	(Street) MA 02116			ndment, Dat th/Day/Year)	-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>				
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f. or Beneficia	llv Owned		
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	nsaction Date 2A. Deemed		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	02/13/2007			J <u>(1)</u>	1,204	A	\$0	1,204	D			
Common Stock								3,845,876	I	See Footnote $(2)$		

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

Persons who respond to the collection of<br/>information contained in this form are not<br/>required to respond unless the formSEC 1474<br/>(9-02)

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# displays a currently valid OMB control number.

# 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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e			le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

10% Owner

Director

### **Reporting Owners**

**Reporting Owner Name / Address** 

GADICKE ANSBERT C/O MPM ASSET MANAGEMENT 200 CLARENDON STREET, 54TH FLOOR BOSTON, MA 02116

Former 10% Owner

Other

Relationships

Officer

## Signatures

/s/ Ansbert Gadicke

02/15/2007

<u>\*\*</u>Signature of Reporting Person

### Date

### **Explanation of Responses:**

- \* 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).
- (1) Pro rata distribution of partnership interests from MPM Asset Management Investors 2001 LLC, of which the reporting person is a member.

The shares are held as follows: 2,592,891 by MPM BioVentures II-QP, L.P. ("BV II QP"), 286,133 by MPM BioVentures II, L.P. ("BV II"), 53,841 by MPM Asset Management Investors 2001 LLC ("AM 2001") and 913,011 by MPM BioVentures GmbH & Co.

(2) Parallel-Beteiligungs KG ("BV KG"). MPM Asset Management II, L.P. ("AM II GP") and MPM Asset Management II LLC ("AM II LLC") are the direct and indirect general partners of BV II QP, BV II and BV KG. The Reporting Person is a member of AM II LLC and AM 2001. The Reporting Person disclaims beneficial ownership of the securities except to the extent of his pecuniary interest therein.

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.