Day Wesley Form 3 November 15, 2005 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Day Wesley			2. Date of Event Re Statement (Month/Day/Year)	equiring	3. Issuer Name and Ticker or Trading Symbol VIVUS INC [VVUS]								
(Last)	(First)	(Middle)	11/14/2005		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)					
1172 CASTR	O STREE	Т							•				
	(Street)				(Check all applicable)		6. Individual or Joint/Group						
MOUNTAIN VIEW, CA					Director 10% Owner X_ Officer Other (give title below) (specify below) VP, Clinical Research		r ow)	Eiling(Charle Annlinghla Ling)		0			
(City)	(State)	(Zip)	Tab	le I - N	Non-Derivative Securities Beneficially Owned								
1.Title of Securi (Instr. 4)	ty			eficially	Securities Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ership	rect Beneficial				
Reminder: Report owned directly o		ate line for ea	ch class of securities	benefici	ally SI	EC 1473 (7-02	2)						
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.													
Ta	ble II - Deri	ivative Secu	rities Beneficially Ov	wned (<i>e</i> .	g., puts, calls,	warrants, op	tions, c	convertible	securities)				
1. Title of Deriv (Instr. 4)	ative Securit	Expi	ration Date /Day/Year)	Securitie	and Amount of es Underlying ve Security)	4. Conversi or Exerc: Price of Derivativ	se Fo D	ownership orm of verivative ecurity:	6. Nature of Indiro Beneficial Owner (Instr. 5)				

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

Date

Exercisable

Expiration

Title

Date

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address			Relationships							
	Director	10% Owner	Officer	Other						
Day Wesley 1172 CASTRO STREET MOUNTAIN VIEW, CA 94040	Â	Â	VP, Clinical Research	Â						
Signatures										
By: /s/ Kate Higgins For: Wesley Day	11/15/2005									
**Signature of Reporting Person		Date								
Explanation of Boononooo										

Explanation of Responses:

No securities are beneficially owned

* 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).

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.