FORM 4

Instruction 1(b).

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

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See	

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*  DRURY STEPHEN A					2. Issuer Name and Ticker or Trading Symbol AP PHARMA INC /DE/ [ APPA ]								eck all appl X Direct	or	g Pers	10% Ow	ner
(Last) (First) (Middle) A.P. PHARMA, INC. 123 SAGINAW DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 05/26/2004								Office below	r (give title )		Other (s below)	pecify
(Street) REDWOOD CA 94063				4.	If Ame	endment, I	Date o	f Original Fi	led (	(Month/Da	ay/Year)	Lin	e) <mark>X</mark> Form	Joint/Group filed by One filed by More n	Repo	rting Persor	1
(City)	(S		(Zip)														
Date			. Transactio	tion 2A. Deemed Execution Date,		3. Transact Code (In:	ion str.	4. Securities Acquire Disposed Of (D) (Inst		ed (A) or etr. 3, 4 and	5. Amou Securiti Benefic	int of es ally Following d tion(s)	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)		
	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)	3A. Deemed Execution Date if any (Month/Day/Ye	Code	action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisal Expiration Date (Month/Day/Year)		of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e Owner s Form: lly Direct or Indi g (I) (Insi	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A) (D)		Date Exercisable		kpiration ate	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to	\$2.939	05/25/2004		A <sup>(1)</sup>		10,000		05/25/2005	05	5/25/2014	Common Stock	10,000	\$0	10,000	)	D	

## **Explanation of Responses:**

1. Grant fully vest on May 25, 2005.

By: Gordon Sangster -

Attorney-in-fact For: Stephen 05/26/2004

**Drury** 

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).