FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 3235-0287 December 31. Expires: 2014 Estimated average burden hours per 0.5

response:

OMB APPROVAL

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* BROWN RICHARD K						2. Issuer Name and Ticker or Trading Symbol ISIS PHARMACEUTICALS INC [ISIS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/09/2003							X	Officer (g below)	ive title Vice Pr	reside	Other (specify below)		
(Street) (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)							1	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/E					2A. Deemo Execution Day/Year) if any (Month/Da		on Date,			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amount Securities Beneficially Following	Owned	6. Own Form: I (D) or I (I) (Inst	Direct I ndirect I rr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price		eported ransaction(s) nstr. 3 and 4)			(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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned	e s ally	10. Ownership Form: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)		
	Security			Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s (Instr. 4)		(I) (Instr. 4		
Employee Stock Option (right to buy)	5.15	05/09/2003	05/09/2003	A		49,000 ⁽¹⁾		01/01/	2004 ⁽¹⁾	12/31/2008	Common Stock	49,000	\$ 5.15	49,00	00	D		
Employee Stock Option (right to buy)	12.04	05/09/2003	05/09/2003	D			90,000 ⁽²⁾	06/04	/2005	06/03/2011	Common Stock	90,000	\$12.04	0		D		
Employee Stock Option (right to	21.05	05/09/2003	05/09/2003	D			12,000 ⁽²⁾	01/02	2/2006	01/01/2012	Common Stock	12,000	\$21.05	0		D		

Explanation of Responses:

- 1. These options were issued in connection with the Company's option exchange program. 33.34% of the shares subject to the option vest and become exercisable on 01/01/2004. Thereafter, the remaining shares subject to the option vest and become exercisable in 24 equal monthly installments, at the rate of 16,333 shares per year. The option is exercisable as to 0 shares on 05/09/2003.
- 2. These options were cancelled in connection with the Company's option exchange program

05/13/2003 /s/Richard K. Brown

** 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.