FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

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OMB Number: 3235-0287 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

| | | | | · | i Seci | 011 301 | (11) 01 111 | e ilivesili | ieni C | ompany Act | 01 1940 | | | | | | |
|---|---|--|--|---------|---|---|-------------|--|--------------------|--|-----------------|--|---|---|---|---|---------------------------------------|
| 1. Name and Address of Reporting Person* BROWN RICHARD K | | | | | | 2. Issuer Name and Ticker or Trading Symbol ISIS PHARMACEUTICALS INC [ISIS] | | | | | | | | of Reporting cable) or (give title | 10% Owner | | ner |
| (Last) (First) (Middle) C/O ISIS PHARMACEUTICALS, INC. 1896 RUTHERFORD ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/27/2006 | | | | | | | | X Office (give title Other (specify below) Vice President | | | | , |
| (Street) CARLSBAD CA 92008 | | | 92008 | | 02/27/2006 Line) X Form filed | | | | | | | | | oint/Group Filing (Check Applicable led by One Reporting Person led by More than One Reporting | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | |
| | | Tab | le I - Non-De | rivativ | re Se | curit | ies A | cquire | d, Di | sposed o | f, or Be | neficial | ly Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/L | | | | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Cod | , Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | Benefici Owned F | es ally Following | orm: Direct D) or Indirect I) (Instr. 4) | | Nature f Indirect eneficial wnership | |
| | | | | | | | Cod | e V | Amount | (A) or (D) | Price | Reported Transact (Instr. 3 | ion(s) | | (Ir | nstr. 4) | |
| | | - | Fable II - Der (e.g | | | | | | | posed of, converti | | | Owned | , | | , | |
| 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/Year | Code | action (Instr. | | | 6. Date Exercisal Expiration Date (Month/Day/Year) | | e | Amount of | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Owne Form: Direct or Ind (I) (Ins | ship (D) rect | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Employee Stock Purchase (right to buy) | \$6.81 | 02/27/2006 | 02/27/2006 | М | | | 3,715 | 01/02/20 |)05 ⁽¹⁾ | 05/24/2006 | Common Stock | 3,715 | \$0 | 4,660 | Г | | |
| Employee Stock Option (right to buy) | \$6.81 | 02/28/2006 | 02/28/2006 | М | | | 2,000 | 01/02/20 | 005 ⁽²⁾ | 05/24/2006 | Common Stock | 2,000 | \$0 | 2,660 | Г | | |

Explanation of Responses:

- 1. Stock option under the Isis Pharmaceuticals, Inc. 1989 Stock Option Plan. 25% of the shares subject to the option vested and became exercisable on 1-2-05. Thereafter, the remaining shares subject to the option vest and become exercisable in 36 equal monthly installments, at the rate of 4,500 shares per year. The option was exercisable as to 8,375 shares on 2-27-06 prior to the reported exercise.
- 2. Stock option under the Isis Pharmaceuticals, Inc. 1989 Stock Option Plan. 25% of the shares subject to the option vested and became exercisable on 1-2-05. Thereafter, the remaining shares subject to the option vest and become exercisable in 36 equal monthly installments, at the rate of 4,500 shares per year. The option was exercisable as to 4660 shares on 2-27-06 prior to the reported exercise.

Remarks:

/s/B. Lynne Parshall

03/06/2006

** Signature of Reporting Person

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.