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OMB Number 3235-0362
Expires: September 30, 1998
Estimated average burden
hours per response 1.0

U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM 5

	ANNUAL STATEMENT OF CHANGES IN BENEF	ICIAL C	WNERSHIP OF SECURITI	ES						
	d pursuant to Section 16(a) of the Section 17(a) of the Public Utility He Section 30(f) of the Investmen	olding	Company Act of 1935							
	[_] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).									
[_] For] Form 3 Holdings Reported									
[_] For	m 4 Transactions Reported									
(Print o	r Type Responses)									
1. Nam	e and Address of Reporting Person*									
	OrbiMed Advisors	LLC(1)								
(Last) (First)		(Middle)							
	767 Third Avo									
	(Street)									
New York			10010							
(City			(Zip)							
2. Iss	uer Name and Ticker or Trading Symbol	1								
	Discovery Laboratorie									
3. IRS	or Social Security Number of Report:	ing Per	son (Voluntary)							
4. Sta	tement for Month/Year									
	December, 20	901								
5. If	Amendment, Date of Original (Month/Yo	ear)								
6. Rel	ationship of Reporting Persons to Is: (Check all applicable)	suer								
[_]	Director Officer (give title below)	[x] [_]	10% Owner Other (specify below	w)						
	ividual or Joint/Group Filing eck applicable line)									
[_] Form filed by One Reporting Person[X] Form filed by More than One Reporting Person										
======	Table I Non-Derivative Securit:			======						
	or Beneficially									

=======================================	======================================	========	========	:==				
			4. Securities Ad Disposed of ((Instr. 3, 4	D)	(A) or	5. Amount of Securities Beneficially Owned at End	6. Owner- ship Form: Direct	7. Nature of
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/ Year)	3. Transaction Code (Instr. 8) Code	Amount	(A) or (D)	Price	of Issuer's Fiscal Year (Instr. 3 and 4)	Indirect (I)	Indirect Beneficial Ownership (Instr. 4)

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

(Over)

FORM 5 (continued)

Table II $\overline{\ }$ -- Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

2.										9. Number of Deriv-	10. Owner- ship Form of	
Conv	er-		5.				7.			ative	Deriv-	11.
sior	I		Number	of			Title and	d Amount		Secur-	ative	Nature
or			Deriva	tive	6.		of Under	lying	8.	ities	Secur-	of
Exer	-		Securi	ties	Date		Securitie	es	Price	Bene-	ity:	In-
cise	3.		Acquir	ed (A)	Exercisa	ble and	(Instr. 3	3 and 4)	of	ficially	Direct	direct
Prid	e Trans-	4.	or Dis	posed	Expirati	on Date			Deriv-	0wned	(D) or	Bene-
1. of	action	Trans-	of (D)		(Month/D	ay/Year)		Amount	ative	at End	In-	ficial
Title of Deri	v- Date	action	(Instr	. 3,				or	Secur-	of	direct	Owner-
Derivative ativ	e (Month/	Code	4 and	5)	Date	Expira-		Number	ity	Year	(I)	ship
Security Secu	r- Day/	(Instr.			Exer-	tion		of	(Instr.	(Instr.	(Instr.	(Instr.
(Instr. 3) ity	Year)	8)	(A)	(D)	cisable	Date	Title	Shares	5)	4)	4)	4)

Explanation of Responses:

- (1) Joint filing with OrbiMed Advisors Inc. and Samuel D. Isaly (3) of the same address.
- (2) OrbiMed Advisors LLC and OrbiMed Advisors Inc. have invstment management discretion over a number of collective investment funds invsting in Discovery Laboratories, Inc. stock. The reporting persons have no beneficial interest in the securities pursuant to Rule 16a-2.
- (3) OrbiMed Advisors Inc. is 100% owned by Samuel D. Isaly, who also has controlling interests in OrbiMed Advisors LLC.

/s/Samuel D. Isaly	2/15/2002
*Signature of Reporting Person	Date

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 provided 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.

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