UNITED STATES
SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): **November 6, 2013**

Supernus Pharmaceuticals, Inc.

(Exact name of registrant as specified in its charter)

Delaware	
(State or other jurisdiction of Incorporation)	
0-50440	**20-2590184**
(Commission File Number)	(IRS Employer Identification No.)
1550 East Gude Drive, Rockville MD	**20850**
(Address of principal executive offices)	(Zip Code)

Registrant's telephone number, including area code: **(301) 838-2500**

Not Applicable
(Former name or former address, if changed since last report.)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

[ ] Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

[ ] Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

[ ] Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

[ ] Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Item 2.02 Other Events

On November 6, 2013, Supernus issued a press release announcing that it expects to report financial results for the three and nine months ending September 30, 2013 after the market closes on November 12, 2013, and will hold a conference call and webcast on that date to review the financial results as well as provide an update on other business matters. A copy of this press release is furnished as Exhibit 99.1 hereto and is incorporated herein by reference.

Item 8.01 Other Events

On November 6, 2013, Supernus issued a press release announcing that new clinical data will be released at the American Epilepsy Society Meeting this coming December in Washington DC. The first abstract titled "Cognitive Effects of Extended-Release, Once-Daily Trokendi XR™ vs b.i.d. Immediate-Release Topiramate (TPM-IR, Topamax®) in Healthy Volunteers" will be presented at the meeting on December 7, 2013 followed by several other abstracts. A copy of this press release is furnished as Exhibit 99.2 hereto and is incorporated herein by reference.

Item 9.01 Financial Statements and Exhibits

(d) Exhibits

The following document is furnished as an Exhibit pursuant to Item 2.02 hereof:

Exhibit 99.1 – Press Release dated November 6, 2013 of the Company announcing third quarter 2013 earnings conference call and webcast.

The following documents is furnished as an Exhibit pursuant to Item 8.01 hereof:

Exhibit 99.2 – Press Release dated November 6, 2013 of the Company announcing new trial data to be released.

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

SUPERNUS PHARMACEUTICALS, INC.

DATED: November 7, 2013

By: /s/ Gregory S. Patrick

Gregory S. Patrick

Vice-President and Chief Financial Officer

EXHIBIT INDEX

Number	Description	
99.1	Press Release dated November 6, 2013 announcing earnings call and webcast.	Attached
99.2	Press Release dated November 6, 2013 announcing new trial data to be released.	Attached

EXHIBIT 99.1

FOR IMMEDIATE RELEASE

Supernus Announces Third Quarter 2013 Earnings Conference Call and Webcast

Rockville, MD, November 6, 2013 -- Supernus Pharmaceuticals, Inc. (NASDAQ: SUPN), today announced that the Company expects to report financial results for the quarter ended September 30, 2013 after the market closes on Tuesday November 12, 2013. Supernus will host a conference call at 5:00 p.m. Eastern Time (2:00 p.m. Pacific Time) to review the financial results, as well as provide an update on other business matters of the Company.

A live webcast will be available at www.supernus.com. The webcast will be archived on the Company's website for 30 business days following the live call.

Callers should dial in approximately 10 minutes prior to the start of the call. The phone number to join the conference call is +1(877) 288-1043 (U.S. and Canada) or +1 (970) 315-0267 (international and local). The access code for the live call is 92928553.

About Supernus Pharmaceuticals, Inc.

Supernus Pharmaceuticals, Inc. is a specialty pharmaceutical company focused on developing and commercializing products for the treatment of central nervous system, or CNS, diseases. The Company has two marketed products for the treatment of epilepsy, Oxtellar XR™ (extended release oxcarbazepine), and Trokendi XR™ (extended release topiramate). The Company is also developing several product candidates in psychiatry to address large market opportunities in ADHD including ADHD patients with impulsive aggression. These product candidates include SPN-810 for impulsive aggression in ADHD and SPN-812 for ADHD.

CONTACTS:

Jack Khattar, President and CEO

Gregory S. Patrick, Vice President and CFO

Supernus Pharmaceuticals, Inc.

Tel: (301) 838-2591

EXHIBIT 99.2

FOR IMMEDIATE RELEASE

Supernus Announces Release of Exciting New Clinical Data on Trokendi XR™

Rockville, MD, November 6, 2013 --Supernus Pharmaceuticals, Inc. (NASDAQ: SUPN), a specialty pharmaceutical company, today announced that new clinical data will be released at the American Epilepsy Society (AES) Meeting this coming December in Washington DC.

The first abstract titled "Cognitive Effects of Extended-Release, Once-Daily Trokendi XR™ vs b.i.d. Immediate-Release Topiramate (TPM-IR, Topamax®) in Healthy Volunteers" will be presented at the meeting on December 7, 2013 followed by several other abstracts.

COGNITIVE EFFECTS OF EXTENDED-RELEASE, ONCE-DAILY TROKENDI XR™ VS B.I.D. IMMEDIATE-RELEASE TOPIRAMATE (TPM-IR, TOPAMAX®) IN HEALTHY VOLUNTEERS
Authors: S. Schwabe, S. Brittain

RATIONALE:
Dose-management strategies (slow titration, low doses) improve the tolerability of TPM, a potent, broad-spectrum AED that can cause distinctive cognitive symptoms (e.g., word-finding difficulty). Neuropsychometric tests have shown significant negative changes, especially in verbal fluency, in a relatively small subset of patients receiving TPM-IR. SPN-538 (Trokendi XR, Supernus Pharmaceuticals, Inc.) is a novel extended-release, once-daily capsule formulation of TPM that may improve tolerability and adherence. In a crossover study in healthy volunteers establishing bioequivalence of once-daily SPN-538 to b.i.d. TPM-IR (200 mg/day), effects of treatments on cognitive function were compared.
METHODS:
Design: Single-blind, randomized-sequence, crossover study in healthy adults. Treatments: b.i.d. TPM-IR and once-daily SPN-538 (AM, active drug; PM, matching placebo) force-titrated in 50-mg weekly increments over 4 wks to 200 mg/day for 10 days; 32-day washout between periods. Cognitive tests (verbal fluency: Controlled Oral Word Association, COWA; processing speed: Digit Symbol Substitution Test, DSST) performed before the AM dose on Days 1 (baseline); 8 (50 mg/day), 15 (100 mg/day), 22 (150 mg/day), 31 (200 mg/day), and 38 (washout). Between-treatment comparisons were evaluated by fitting a repeated measures linear mixed model with fixed effects for treatment, sequence, period, day, and treatment by day.
RESULTS:
In the per-protocol analysis of all subjects with data (TPM-IR, n=39; SPN-538, n=34), COWA change scores favored once-daily SPN-538 over b.i.d. TPM-IR at all test points; differences were significant at 50 (P=0.05) and 100 mg/day (P=0.0002) and for the entire treatment period (P=0.005). Subjects with moderate/severe (>1 SD) negative COWA changes: TPM-IR, 42%; SPN-538, 12%). Similar patterns for DSST changes did not reach statistical significance.
CONCLUSIONS:
Based on the per-protocol analysis of COWA change scores, the concentration-time profile of once-daily SPN-538 was associated with significantly less negative impact on COWA despite PK bioequivalence to b.i.d. TPM-IR on all standard PK parameters, similar $C_{avg0-24}$ (SPN-538, 6.1 µg/mL; TPM-IR, 6.3 µg/mL), and nearly identical mean TPM concentrations (5.6 µg/mL) when cognitive function tests were performed 18 (SPN-538) and 10 (TPM-IR) hrs after T_{max}. Once-daily SPN-538 produces more consistent TPM plasma concentrations (14% difference, P<0.001, in peak-trough fluctuation) due to a markedly

slower absorption rate (24-fold difference vs TPM-IR). COWA, known to be highly sensitive to specific effects of TPM, may be sensitive to differences in rates at which TPM concentrations increase/change. Further work to confirm these findings as well as elucidate their potential clinical significance is warranted. Funded by Supernus Pharmaceuticals, Inc.

All abstracts are now available on the AES website, www.aesnet.org by conducting an "Abstract Search" for "Trokendi XR".

• Cognitive Effects of Extended-Release, Once-Daily Trokendi XR™ vs b.i.d. Immediate-Release Topiramate (TPM-IR, Topamax®) in Healthy Volunteers
• Linearity and Dose Strength Equivalence of Once-Daily, Extended-Release Topiramate (Trokendi XR™, SPN-538)
• Steady-State Bioequivalence of Extended-Release, Once-Daily Trokendi XR™ (SPN-538) to Immediate-Release Topiramate (TPM-IR, Topamax®)
• Pharmacokinetic Rationale for mg-for-mg Overnight Switch from Twice-Daily Immediate-Release Topiramate (TPM-IR) to Once-Daily, Extended-Release Trokendi XR™ (SPN-538)
• Once-Daily Trokendi XR™ (SPN-538) vs. Twice-Daily Topamax®: Impact of Nonadherence on Topiramate Concentrations
• Pharmacokinetics of Once-Daily, Extended-Release Trokendi XR™ (SPN-538) in the Elderly

"We are looking forward to presenting these exciting new data on Trokendi XR at the AES meeting. The product was launched in August of this year and is off to a solid start since its launch with positive feedback from the market confirming its unique benefits to epilepsy patients," said Jack Khattar, President & CEO, of Supernus.

About Trokendi XR™

Trokendi XR is the only approved once-daily extended release formulation of topiramate for the treatment of epilepsy. Trokendi XR is an antiepileptic drug indicated for initial monotherapy in patients 10 years of age and older with partial onset or primary generalized tonic-clonic seizures; adjunctive therapy in patients 6 years of age and older with partial onset or primary generalized tonic-clonic seizures; and adjunctive therapy in patients 6 years of age and older with seizures associated with Lennox-Gastaut syndrome. The product is available in 25mg, 50mg, 100mg and 200mg extended-release capsules.

For full prescribing and safety information, click here.

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Forward Looking Statements

This press release contains forward-looking statements regarding clinical data and the potential for Trokendi XR to treat epilepsy. Actual results may differ materially from those in these forward-looking statements as a result of various factors, including, but not limited to, risks regarding the company's ability to commercialize the product successfully, whether physicians will prescribe and patients will use the product, and competition in the market. For a further description of these and other risks facing the Company, please see the risk factors described in the Company's Annual Report Form 10-K that was filed

with the United States Securities and Exchange Commission on March 15, 2013 and under the caption "Risk Factors" and the updates to these risk factors in the Company's quarterly report form 10-Q that was filed with the Commission on August 15, 2013. Forward-looking statements speak only as of the date of this press release, and the company undertakes no obligation to update or revise these statements, except as may be required by law.

CONTACTS:
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