FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

| Washington, D.C. 20049 | |
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OMB APPROVAL

OMB Number: 3235-0287

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|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* CORIGLIANO MARK | | | | | 2. Issuer Name and Ticker or Trading Symbol DELCATH SYSTEMS INC [DCTH] | | | | | | | | | | ck all applic Director | ationship of Reportin all applicable) Director | | 10% Ov | ner | |
|---|---|--|---|-----------------------------|--|--|---|---------------|---|---------------|--|---|--------------|--|---|--|----------------------|---|---------------------------------------|--|
| (Last) 1100 SUM | (Firs | EET 3RD FLOC | Middle) | | | . Date of Earliest Transaction (Month/Day/Year) 1/14/2006 | | | | | | | | | Officer below) | (give title | e Other (s below) | | pecify | |
| (Street) STAMFOI | RD CT | | 6905 Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 11/16/2006 | | | | | | | | | Line) | S. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tab | e I - Nor | ı-Deriv | ative | Sec | urities | Acq | uired, | Disp | osed of | f, or B | ene | ficially | Owned | | | | | |
| Da | | | | 2. Trans Date (Month/ | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) or I Of (D) (Instr. 3, 4 an | | | Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | Code | | | v | Amount | mount (A) or (D) | | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | |
| Common S | tock, par va | alue \$0.01 | | 03/30 | 0/2006 | 6 | | | J ⁽¹⁾ | | 0 |] |) | \$0 | 141, | ,225 | | D | | |
| | | Т | able II - | Deriva (e.g., p | tive S | Secu calls | rities <i>A</i> , warra | Acqu ınts, | ired, D option | ispo Is, c | sed of, onvertib | or Be | nefi urit | cially (ties) | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercis Expiration Date (Month/Day/Ye | | е | 7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4) | | s security | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | es ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | 100 | Amount or Number of Shares | | | | | | |
| Nonqualified Stock Option (right to buy) | \$2.78 | 07/07/2005 | | | J ⁽²⁾ | | 0 | | (3) | | 07/07/2010 | Comm Stoc | | 70,000 | \$0 | 180,00 | 00 | D | | |
| Nonqualified Stock Option (right to buy) | \$3.59 | 11/08/2005 | | | J ⁽²⁾ | | 0 | | (3) | | 11/08/2010 | Comm | | 70,000 | \$0 | 180,00 | 00 | D | | |
| Nonqualified Stock | \$3.28 | 11/14/2006 | | | A ⁽²⁾ | | 40,000 | | (3) | | 11/14/2011 | Comm | on 2 | 40.000 | \$0 | 180,00 | 00 | D | | |

Explanation of Responses:

- 1. This transaction was previously reported.
- 2. The grant of this option was previously reported.
- 3. Currently exercisable.

to buy)

MARK A. CORIGLIANO, By /s/ PAUL G. HUGHES,

Attorney-in-fact

01/05/2007

** 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.