

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* CORIGLIANO MARK (Last) (First) (Middle) 1100 SUMMER STREET 3RD FLOOR (Street) STAMFORD CT 06905 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol DELCATH SYSTEMS INC [DCTH]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 04/05/2005	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> 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. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, par value \$0.01	04/05/2005 ⁽¹⁾		J ⁽¹⁾		0	A	\$0	41,500	D	

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 Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Warrant to Purchase	\$6.6	10/30/2001		J ⁽²⁾		0		10/19/2001	10/18/2005	Common Stock	1,500	\$0	106,500	D	
Nonqualified Stock Option (right to buy)	\$0.85	12/17/2001		J ⁽²⁾		0		(3)	12/17/2006	Common Stock	30,000	\$0	106,500	D	
Nonqualified Stock Option (right to buy)	\$1.03	08/25/2003		J ⁽²⁾		0		(3)	08/25/2008	Common Stock	75,000	\$0	106,500	D	
Nonqualified Stock Option (right to buy)	\$2.02	04/05/2005		J ⁽⁴⁾		140,000		(4)	(4)	Common Stock	0	\$0	106,500	D	

Explanation of Responses:

- This line is completed solely to show beneficial ownership following the reported transaction(s).
- This transaction was previously reported.
- Exercisable as to one-half of the shares on the first anniversary of grant and in full on the second anniversary of grant through expiration date.
- By mutual agreement between the issuer and the reporting person, this option was rescinded without payment to the reporting person. It is no longer outstanding.

MARK A. CORIGLIANO, By
/s/ PAUL G. HUGHES, 04/07/2005
Attorney-in-fact

** 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.