

ISDANER DANIEL  
Form 5  
February 14, 2003

**FORM 5**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, DC 20549

OMB APPROVAL  
OMB Number:  
3235-0362

**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Expires: January  
31, 2005  
Estimated average  
burden  
hours per response. . . . .  
. . . . . 1.0

Check box if no longer  
subject to Section 16.  
Form 4 or Form 5  
obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public  
Utility Holding Company Act of 1935 or  
Section 30(h) of the Investment Company Act of 1940

See instructions 1(b).

Form 3 Holdings  
Reported  
Form 4 Transactions  
Reported

1. Name and Address of Reporting Person* <b>Isdaner, Daniel</b>			2. Issuer Name and Ticker or Trading Symbol <b>Delcath Systems, Inc. ("DCTH" (1) "DCT" (2))</b>			6. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)			
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)	4. Statement for Month/Year <b>December 2002</b>			7. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		
1100 Summer Street, 3rd Floor				5. If Amendment, Date of Original (Month/Year)					
(Street)									
Stamford, Connecticut 06906									
(City)	(State)	(Zip)	<b>Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b>						

1. Title of Security (Instr. 3)	2. Trans- action Date (mm/dd/yy)	2A. Deemed Execution Date, if any (mm/dd/yy)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year(Instr. 3 and 4)	6. Owner- ship Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price			
Common Stock, par value \$0.01							<b>8,000</b>	<b>D</b>	
							<b>364</b>	<b>I</b>	<b>By partnership</b>

\* If the form is filed by more than one reporting person, see Instructions 4(b)(v).

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 control Number.

(Over)  
SEC 2270 (9-02)

**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)	3. A 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 Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)
						(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Warrant to Purchase	\$6.60							10/19/01	10/18/05	Common Stock	7,500	
Non-qualified Stock Option (right to buy)	\$0.85							(3)	12/17/06	Common Stock	30,000	
Nonqualified Stock Option (right to buy)	\$0.71	9/19/02		4A		30,000		(4)	9/19/07	Common Stock	30,000	

Explanation of Responses: (1) Nasdaq symbol.

(2) Boston Stock Exchange symbol.

(3) Currently exercisable as to 50% of the shares and exercisable as to 50% of the shares on 12/17/2003.

(4) Exercisable as to 15,000 shares on the first anniversary of grant and in full on the second anniversary of grant through the expiration date.

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations  
 .See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ DANIEL ISDANER

February 10, 2003

\*\*Signature of Reporting Person

Date

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.