Radius Healt	th, Inc.											
Form 4												
January 25, 2	2016											
FORM	14		SECURITIES AND EXCHANGE COMM					OMB APPROVAL				
	• • UNITED	STATES					NGE CO	DMMISSION	OMB	3235-0287		
Check th	is hox		Wa	ashingtor	n, D.C. 20)549			Number:			
if no longer									Expires:	January 31, 2005		
subject to	subject to STATEMENT OF CHAI				NGES IN BENEFICIAL OWNE			ERSHIP OF	Estimated a			
Section 1 Form 4 o						SECURITIES			burden hours per			
Form 4 0 Form 5		report to S	action	16(a) of t	ha Saauri	tion E	vahanga	A at of 1024	response	0.5		
Form 5 obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section												
may cont	unue.			•	nt Compar	· ·						
See Instruction 1(b).	uction	50(11)	or the r	ii vestinen	n compu	ily ric	101 1940	, 				
1(0).												
(Print or Type I	Responses)											
1. Name and A	er Name ar	Name and Ticker or Trading 5			5. Relationship of Reporting Person(s) to							
BIOTECH GROWTH N V			Symbol				1	lssuer				
			Radius	Health,	Inc. [RDI	JS]		(Check	all applicable)		
(Last)	(First)	(Middle)	3. Date of	of Earliest	Transaction			(Cheek	an applicable)		
SNIPWEG 26			(Month/Day/Year)				-	DirectorX 10% Owner				
			01/22/2016					Officer (give title Other (specify below)				
(Street)								, , , , , , , , , , , , , , , , , , , ,				
			-					6. Individual or Joint/Group Filing(Check Applicable Line)				
			Filed(Month/Day/Year)					Form filed by One Reporting Person				
CURACAC						X_Form filed by More than One Reporting Person						
		(-·)					1	Person				
(City)	(State)	(Zip)	Tal	ole I - Non-	-Derivative	Secur	ities Acqui	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of	2. Transaction Date			3.			quired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if		Transaction Disposed of (D)				Securities	Ownership	Indirect		
(Instr. 3)		any (Month/Da	v/Year)	Code (Instr. 8)	(Instr. 3, 4	and 5)	Beneficially Owned	Form: Direct (D)	Beneficial Ownership		
		(infontitis Du	(j, 10al)	(111541:0)				Following	or Indirect	(Instr. 4)		
						(A)		Reported	(I)			
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
				Code V	Amount	(D)	Price	(msu. 5 and 4)				
Common	01/22/2016			Р	38,259	А	\$	4,360,399	D			
Stock							31.6658					

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 3. Transaction Date 3A. Deemed 5. 6. Date Exercisable and 7. Title and 8. Price of 9. Nt 2. 4. (Month/Day/Year) Derivative Conversion Execution Date, if TransactionNumber Expiration Date Amount of Derivative Deriv Security or Exercise any Code of (Month/Day/Year) Underlying Security Secu Price of (Month/Day/Year) (Instr. 8) (Instr. 5) (Instr. 3) Derivative Securities (Instr. 3 and 4) Derivative Securities Own Security Acquired Follo (A) or Repo Disposed Trans of (D) (Insti (Instr. 3, 4, and 5) Code V (A) (D) Date Expiration Title Amount Exercisable Date or Number of Shares

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Reporting Owners

Reporting Owner Name / Addr	ess	Relationships						
1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Director	10% Owner	Officer	Other				
BIOTECH GROWTH N V SNIPWEG 26 CURACAO, P8 00000		Х						
BB BIOTECH AG SCHWERTSTRASSE 6 SCHAFFHAUSEN, V8 CH-8	3200	Х						
Signatures								
/s/ Ivo Betschart (01/25/2016							
<u>**</u> Signature of Reporting Person	Date							

Explanation of Responses:

- 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).

Remarks:

Biotech Growth N.V. is a wholly-owned subsidiary of BB Biotech AG. Accordingly, BB Biotech AG may be deemed to be the

Note: File three copies of this Form, one of which must be manually signed. If space 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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