FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

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

Name and Address of Reporting Person*     Haigh Adrian					2. Issuer Name and Ticker or Trading Symbol FENNEC PHARMACEUTICALS INC. [FENC]							(Che	ck all applic Director	tionship of Reporting all applicable) Director Officer (give title		on(s) to Issu 10% Ow Other (s)	ner	
(Last)	`	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/07/2023						_ X	below)			below)	·		
PO BOX 13628, 68 TW ALEXANDER DRIVE				4. If Amendment, Date of Original Filed (Month/Day/Year)					Line)	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) RESEARCH TRIANGLE NC 27709									, X	X Form filed by One Reporting Person Form filed by More than One Reporting Person								
PARK	JEL IV	C	27703	Rule 10b5-1(c) Transaction Indication														
(City)	(S	itate)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Ta	ble I - Non	-Deriv	ative	Sec	curitie	s Ac	cquired, D	isposed	of, or	Bene	ficially	Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date		Date	te, Transaction Dispos Code (Instr. 5)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 a			5. Amour Securitie Beneficia Owned F Reported	es Forn ally (D) of following (I) (Ir		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code			V Amou	nt	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)				instr. 4)				
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 Da if any (Month/Day/Y	Co	, Transaction Code (Instr.		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)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	ode \	V (A	A)	(D)	Date Exercisable	Expiration Date	ı Title	o N	mount r umber f Shares		(Instr. 4)	(0)		
Stock Option	\$8.03	08/07/2023 <sup>(1)</sup>			A	20	200,000		08/07/2024 <sup>(2)</sup>	08/07/203	3 Com Sha	imon ares 2	00,000	\$0	493,57	79	D	

## **Explanation of Responses:**

- 1. On August 7, 2023, Adrian Haigh was granted a stock option to purchase 200,000 shares of the issuer's common shares pursuant to the issuers 2020 Euity Incentive Plan.
- 2. One-third of grant will vest upon the first anniversary date of the grant. On the last day of each successive month, one-twenty fourth of the grant shall vest such that vesting is complete as of third anniversary of grant date.

/s/ Adrian Haigh

08/07/2023

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.