FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

	OMB Number:	3235-0287								
	Estimated average burden									
ı	houre nor reenonee.	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* PLATT DAVID						2. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC [PRW]						Officer (able)	Perso	10% Ow Other (s	ner
(Last) (First) (Middle) C/O PRO-PHARMACEUTICALS, INC. 7 WELLS AVENUE, SUITE 34.					3. Date of Earliest Transaction (Month/Day/Year) 04/10/2008						Chairman of the Board					
(Street) NEWTO (City)		IA tate)	02459 (Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Inc						
1. Title of Security (Instr. 3) 2. Transa Date				Transactio	action 2A. Deemed Execution Date,			3. Transacti Code (Ins				5. Amount of		Form:	n: Direct r Indirect	7. Nature of Indirect Beneficial Ownership
								Code V	Amoun	(A) o	Price	Reported Transacti (Instr. 3 a	ion(s)			(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 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 Exerc Expiration Day/\(\text{Month/Day/\}\)	ate	of Securities		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Employee Stock Option (right to buy)	\$0.44	04/10/2008		A		50,000		04/10/2008	04/10/2013	Common Stock	50,000	\$0	50,000)	D	
Employee Stock Option (right to buy)	\$0.44	04/10/2008		A		150,000		(1)	04/10/2013	Common Stock	150,000	\$0	150,000	0	D	

Explanation of Responses:

 $1.\ The\ options\ vest\ in\ four\ (4)\ equal\ installments\ as\ follows:\ 04/10/08,\ 06/30/08,\ 09/30/08,\ 12/31/08$

/s/ Maureen Foley

04/10/2008

** 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.