FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEME
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	File

INT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* ROME JERALD K					PF	2. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC PRWP.OB									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(F	irst)	(Middle)		_										Officer below)	(give title		Other (s below)	pecify	
C/O PRO-PHARMACEUTICALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/24/2011															
7 WELLS AVENUE, SUITE 34.																				
					- 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEWTO	N M	A	02459											X	Form f	led by Mor		rting Persor One Repor		
(City)	(S	tate)	(Zip)												Persor					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution			Code (Ins					4 and Securition Benefici Owned I		s ally ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	<i>,</i>	Amount	(A) o (D)	(A) or (D) Price		Reported Transact (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)	le of 2. 3. Transaction Active Conversion rity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title an of Securit Underlyin Derivative (Instr. 3 a	ties ig e Secu	Derivative Security				Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		opiration ate	Title	Amo or Num of Shar	ber						
Stock Option (Right to Buy)	\$1.08	03/24/2011			A		55,556		(1)	03	/24/2016	Common Stock	55,5	556	\$0	55,550	6	D		

Explanation of Responses:

1. The option vests quarterly in eight equal installments beginning May 12, 2011.

/s/ Maureen E. Foley, Attorney- 03/28/2011 in-Fact for Jerald K. Rome

** 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.