Instruction 1(b).

FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT 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

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC [PRW]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ROME JERALD K					110	<u> </u>	11/11(1	<u> </u>	CLCTIC	ILU III	<u></u>	1	X D	irector			10% Ow	ner	
(Last)							3. Date of Earliest Transaction (Month/Day/Year) 03/08/2007								Officer (give title below)			pecify	
7 WELLS AVENUE, SUITE 34.					If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEWTON MA 02459			02459										Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date						ır) E	2A. Deemed Execution Date, if any (Month/Day/Yea		Transaction Dispose Code (Instr. 5)		rities Acquir ed Of (D) (Ins				illy	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code V	Amount	(A) o	Price	Tra	oorted nsactio str. 3 ar	on(s) nd 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	, Transactio				6. Date Exerc Expiration Da (Month/Day/\)	ate	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Co	code V		(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares	r						
Employee Stock Option (right to buy)	\$1.01	03/08/2007		A	Δ		25,500		03/08/2007	03/08/2012	Common Stock	25,50	0 \$0		25,500)	D		

Explanation of Responses:

/s/ Maureen Foley

03/12/2007

Date

** Signature of Reporting Person

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.