FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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

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1. Name and Address of Reporting Person* SMITH DAVID H						2. Issuer Name and Ticker or Trading Symbol PRO PHARMACEUTICALS INC [PRW]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SMITH DAVID H					[TRW]									X Direc	tor		10% Ow	ner	
(Last) (First) (Middle) C/O PRO-PHARMACEUTICALS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 03/08/2007								Offic below	er (give title v)		Other (s below)	pecify	
7 WELLS AVENUE, SUITE 34.						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEWTON MA 02459			02459										- 1	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																			
		Tab	le I - Non-C	Derivat	tive	Sec	urities	s Ac	quired, D	ispo	osed o	f, or Be	neficia	ly Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Ex r) if a	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (In:	Transaction Disposed Of (D) (Inst Code (Instr. 5)				Securi Benefi Owner	5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	/ A	Amount	(A) o	Price		etion(s) and 4)			(Instr. 4)	
		Т	able II - De (e.						uired, Dis , options		,			Owned					
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.		n of I		6. Date Exer Expiration D (Month/Day/	e and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price o 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	Code V		(A)	(D)	Date Exercisable	Expi Date	iration e	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$1.01	03/08/2007		I	A		2,500		03/08/2007	03/08	08/2012	Common Stock	2,500	\$0	2,500)	D		

Explanation of Responses:

/s/ Maureen Foley

03/12/2007

** 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.