FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
l	OMB Number:	3235-0287				
l	Estimated average burde	en				
l	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

1. Name ar		2. Issuer Name and Ticker or Trading Symbol SafeStitch Medical, Inc. [ SFES ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director X 10% Owner									
(Last) (First) (Middle) 4400 BISCAYNE BLVD					3. Date of Earliest Transaction (Month/Day/Year) 03/10/2011										Officer below)	(give title		Other (s below)	specify	
(Street)  MIAMI FL 33137  (City) (State) (Zip)				Deriva	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person  ative Securities Acquired, Disposed of, or Beneficially Owned											n				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					2A. Deemed Execution Date,			3. 4. Securi Transaction Disposed Code (Instr. 5)		ties Acquir d Of (D) (Ins	ed (A) or str. 3, 4 a	nd	5. Amount o Securities Beneficially Owned Follo Reported		ly (D) o (I) (In		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
		-	Table II - Do								osed of,	or Ben	eficial	ly Ov	(Instr. 3 a					
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			Co	nsact de (In:				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Co	de V	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amour or Number of Shares	er						
Stock Option (Right to Buy)	\$1.12	03/10/2011		A	A		50,000		03/10/20	11	03/10/2021	Common Stock	50,00	0 :	\$0.00	50,000	0	D		

**Explanation of Responses:** 

Remarks:

/s/ Phillip Frost, M.D.

03/11/2011

\*\* 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.