FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL
-	

OMB Number: 3235-0287 Estimated average burden 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* LEIDEN JEFFREY M						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC /							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
LEIDEN JEFFREY M					MA[VRTX]							X Directo	r	10% O	vner		
(Last) (First) (Middle)												Officer below)	(give title	Other (s below)	specify		
C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2011												
130 WAVERLY ST					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)												X Form filed by One Reporting Person					
CAMBRIDGE MA 02139			02139									Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)														
		Tal	ole I - Non-De	rivativ	re Se	curitie	s Ac	quired, Di	sposed o	f, or Ber	neficiall	y Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date		Code (Instr. 5)			d (A) or r. 3, 4 and	5. Amour Securitie Beneficia Owned F	s Form Illy (D) o ollowing (I) (In	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)		
			Table II - Deri (e.g.					uired, Dis s, options,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (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 Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 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)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Stock Option	\$53.85	06/01/2011		A		22,500		06/01/2011 ⁽¹⁾	05/31/2021	Common Stock	22,500	\$0.00	22,500	D			

Explanation of Responses:

1. Fully vested.

Remarks:

Kenneth S. Boger, Attorney-In-06/02/2011 **Fact**

** 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.