FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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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* Lewis-Hall Freda C (Month/Day/Year) 06/18/2008			3. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]							
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED			4. Relationship of Reporting Perso (Check all applicable) Director	10% Owne	er (Mo	5. If Amendment, Date of Original Filed (Month/Day/Year)				
130 WAVERLY STREET			X Officer (give title below) EVP, Medicines Dev	Other (spe below) relopment	6. In	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street) CAMBRIDGE MA 02139						Form filed b Reporting P	y More than One erson			
(City) (State) (Zip)										
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock		0(1)	D							
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) 2. Date E Expiratio (Month/L			3. Title and Amount of Securi Underlying Derivative Securit		4. Conversion or Exercise Price of	cise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Derivative Security	or Indirect (I) (Instr. 5)				

Explanation of Responses:

1. No securities beneficially owned.

Remarks:

Valerie L. Andrews, Attorney-

06/19/2008

<u>In-Fact</u>

** 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 5 (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.