FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

	OMB APPROVAL									
I	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).

### 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*  BOGER JOSHUA S						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC /								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BUGER JUSHUA 5						MA [ VRTX ]								X Directo	r	10% Owner		/ner	
(Last)	(	First)	(Middle)											X Officer below)	(give title		Other (s below)	pecify	
C/O VERTEX PHARMACEUTICALS INCORPORATED							3. Date of Earliest Transaction (Month/Day/Year) 08/22/2006								Presider	nt & C	CEO		
130 WAVERLY STREET							If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable				
(Street)					-   4.	II AIIIC	enume	iii, Dale C	n Origina	i Filet	i (Montin/Da	y/ rear)	Lin	e)	·				
CAMBR	IDGE 1	MA	02139												Form filed by One Reporting Person Form filed by More than One Reporting				
					-									Persor				9	
(City)	(	State)	(Zip)																
		Та	ble I - No	n-Deri	ivativ	e Se	curi	ties Ac	quired	, Dis	posed o	f, or Ber	neficial	ly Owned					
					2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		Disposed	ies Acquire Of (D) (Inst	d (A) or r. 3, 4 and	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)		[	(Instr. 4)	
Common Stock 08/22/						)6			М		11,000	) A	\$15.	56 1,04	6,403		D		
Common Stock 08/22/						2006		S <sup>(1)</sup>		11,000	) D	\$32.0	66 1,03	1,035,403		D			
Common Stock														20'	7,500		T 1	shares in trust <sup>(2)</sup>	
Common Stock													15	,979		I	401(k)		
			Table II -	Deriv	ative	Sec	uriti	es Acq	uired,	Disp	osed of,	or Bene	ficially	Owned					
				(e.g.,	puts,	, call	ls, w	arrants	, optio	ns,	convertil	ole secu	rities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		of E		6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title an of Securit Underlyin Derivative (Instr. 3 a	ies g Security	Derivative Security	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Over the second of the second	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares						
Stock Option	\$15.56	08/22/2006			M			11,000	03/12/199	)7 <sup>(3)</sup>	12/11/2006	Common Stock	11,000	\$0	2,070,5	31	D		

#### **Explanation of Responses:**

- 1. Transaction made pursuant to Dr. Boger's company approved trading plan established under Rule 10b5-1.
- 2. Shares held in trust for Dr. Boger's children. Dr. Boger disclaims beneficial ownership of such shares.
- 3. Right to buy under 1994 Stock and Option Plan, vesting quarterly over 5 years from 12/12/1996.

## Remarks:

Kenneth S. Boger, Attorney-In-

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.