FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									
Estimated average h	nurden									

0.5

hours per response:

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 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 S						MA [VRTX]									Directo	r	10% Owner		/ner	
(Last)	(F	irst)	(Middle)											X	Officer below)	(give title		Other (s below)	pecify	
C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 08/26/2003										Chairma	ın & (CEO		
130 WAVERLY STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
					- - '	II AIIIC	Hullic	III, Date	or Origina	i i iiec	i (Montin Da)	y/ rear)		Line)	ividual of 3	Jille Group	ı iiiig	(Спеск Арр	ilicable	
(Street) CAMBR	IDGE M	A	02139											X		led by More		rting Persor One Repor		
(City)	(S	tate)	(Zip)												r erson					
		Tal	ble I - No	n-Deri	vativ	e Se	curi	ties Ac	quired	, Dis	posed o	f, or Be	nefic	ially	Owned					
, , , , , , , , , , , , , , , , , , ,			2. Transaction Date (Month/Day/Year)		ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		r, Transaction Di Code (Instr.		Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			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)	Pri	се	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock 08/				08/2	6/200	6/2003					20,000) A	\$	7.88	880,977			D		
Common	Stock			08/2	6/200)3			S ⁽¹⁾		20,000) D	\$1	12.51	l 860,977 D					
Common Stock															217,022			I	9,522 shares 401(k); 207,500 shares in trust ⁽²⁾	
			Table II -								osed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiratio (Month/D	n Date		7. Title and Ai of Securities Underlying Derivative Sec (Instr. 3 and 4			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisa	ble	Expiration Date	Title	Amo or Num of Sha	ber						
Stock Option	\$7.88	08/26/2003			М			20,000	03/31/19	94 ⁽³⁾	11/30/2003	Common Stock	20,	000	\$0	1,803,2	23	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 1991 Stock and Option Plan, vesting in 20 equal quarterly installments from 12/01/1993.

Remarks:

Valerie L. Andrews, Attorney-

08/27/2003

<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 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.