FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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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* Hartmann Victor A					2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]									Check all a Di			Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2006									be				
130 WAVERLY STREET (Street) CAMBRIDGE MA 02139				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X Fo	rividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(S	ate) (Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date					ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)							nd Sed Bei Ow	urities eficially ned Following	For (D)	m: Direct or Indirect	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	() ()	N) or D)	Price	Tra	Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 02/1				/2006	2006			S		6,312(1	l)	D	\$36	.94	78,189		D	
Common Stock														657		I	shares 401(k)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
ecurity or Exercise (Month/Day/Year) if any			Date,	Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/E	Expiration Date Month/Day/Year)			Amoun or Number of			derivative Securities Beneficially Owned Following Reported	y	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	(Fi RTEX PHA ORATED /ERLY STE IDGE M (Si Security (Inst Stock Stock	(First) (RTEX PHARMACEUTICAL ORATED /FRLY STREET IDGE MA (State) (Tabl Security (Instr. 3) Stock Tabl 2. Conversion or Exercise Price of Derivative (Month/Day/Year)	(First) (Middle) RTEX PHARMACEUTICALS ORATED /FRLY STREET IDGE MA 02139 (State) (Zip) Table I - Note	(First) (Middle) RTEX PHARMACEUTICALS ORATED /FRLY STREET IDGE MA 02139 (State) (Zip) Table I - Non-Deriv Security (Instr. 3) 2. Transa Date (Month/L) Stock Table II - Derivat (e.g., pt Conversion or Exercise Price of Derivative (Month/Day/Year) 2. (Month/Day/Year)	(First) (Middle) RTEX PHARMACEUTICALS ORATED //ERLY STREET IDGE MA 02139 (State) (Zip) Table I - Non-Derivative Gecurity (Instr. 3) Stock Table II - Derivative Security (e.g., puts, code of Derivative Security (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 3. Transaction Date if any (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 4. 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Date of Earliest Transaction (Month/Day/Year) Officer (give title below) VERTEX PHARMACEUTICALS OF (Check all applicable) Director X Officer (give title below) VERTEX PHARMACEUTICALS INC / MA [VRTX] 3. Date of Earliest Transaction (Month/Day/Year) VERTEX PHARMACEUTICALS INC / MA [VRTX] 3. Date of Earliest Transaction (Month/Day/Year) VERTEX PHARMACEUTICALS INC / MA [VRTX] 3. Date of Earliest Transaction (Month/Day/Year) VERTEX PHARMACEUTICALS INC / MA [VRTX] 3. Date of Earliest Transaction (Month/Day/Year) VERTEX PHARMACEUTICALS INC / MA [VRTX] VERTEX PHARMACEUTICALS INC / MA [VRTX] 3. Date of Earliest Transaction (Month/Day/Year) VERTEX PHARMACEUTICALS INC / MA [VRTX] VERTEX PHARMACEUTICALS INC / Month/Day/Year) VERTEX PHARMACEUTICALS VERTEX PHARMACEUTICALS VERTEX PHARMACEUTICALS VIII A Month/Day/Year) VERTEX PHARMACEUTICALS VIII A Month/Day/Year) VERTEX PHARMACEUTICALS VERT	VERTEX PHARMACEUTICALS INC / MA [VRTX] (First) (Middle) (TEX PHARMACEUTICALS OZ/16/2006 3. 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Explanation of Responses:

1. Transaction made pursuant to Dr. Hartmann's company approved trading plan established under Rule 10b5-1.

Remarks:

Valerie L. Andrews, Attorney-

In-Fact

** Signature of Reporting Person

02/17/2006

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.