FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL							
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).

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* <u>CORDES EUGENE</u>						2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC /								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
						MA [ VRTX ]									r		10% Ow	ner	
(Last)	(F	irst)	(Middle)											Officer below)	(give title		Other (s below)	pecify	
C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 06/01/2010													
130 WAVERLY STREET					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					ing		
(City)	(5	State)	(Zip)																
		Tal	ole I - Non-	-Derivat	tive Se	ecuritie	s Ac	quired	, Dis	posed o	f, or Bei	neficia	ally	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution Dat			Code (Instr. 5)				, 4 and Secu Bene Own		ties Fo cially (D I Following (I)		: Direct   I · Indirect   I str. 4)   (	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price	•	Transact	Reported Transaction(s) (Instr. 3 and 4)		[	Instr. 4)	
			Table II - D							osed of, convertib				wned	•				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year	Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		1	3. 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)	
				Cod	le V	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares	er						
Stock Option	\$34.24	06/01/2010		A		20,000		06/01/20	10 <sup>(1)</sup>	05/31/2020	Common Stock	20,00	00	\$0	20,000	)	D		

Explanation of Responses:

1. Fully vested.

Remarks:

Valerie L. Andrews, Attorney-

06/02/2010

<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.