FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFIC	IAL OWNERSHIP

OMB APPRO	OVAL
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).

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* Silva Paul M					VI	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]									Check a	II app Direc	,	ng Perso	10% C		
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED							3. Date of Earliest Transaction (Month/Day/Year) 11/18/2009									X Officer (give title Other (specify below) V.P. and Corporate Controller					
130 WAVERLY STREET (Street) CAMBRIDGE MA 02139					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)		State)		Zip)																	
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Trans Date (Month/					action	action 2A. Dee Execution Day/Year) if any			3. Trans Code	action (Instr.	4. Securities Acquire Disposed Of (D) (Ins 5) Amount (A) or Be		quired) (Instr.	(A) or	nd S B C R T	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 11/2						3/2009					_	719		D \$3		9.7		4,625		D	
Common Stock																	842		I	401(k)	
			Та									sed of, onvertib				y Owı	ned				
1. Title of Derivative Conversion or Exercise Price of Derivative Security			Date, Transaction Code (Instr.		n of		Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Pric Deriva Securi (Instr.	tive ty	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Dii or (I)	vnership vrm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	(A)) (D)	Date Exercisa		Expiration Date	Title	Amoun or Numbe of Shares							

Explanation of Responses:

Remarks:

Kenneth S. Boger, Attorney-In-11/20/2009

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.