FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to	
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(h)	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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* SMITH IAN F								2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [VRTX]								ip of Reporting Pe plicable) ctor cer (give title		10% Owner Other (specify			
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED								3. Date of Earliest Transaction (Month/Day/Year) 02/04/2009								X Officer (give title Officer (specify below) EVP & CFO					
130 WAVERLY STREET (Street) CAMBRIDGE MA 02139						4.	If Ame	ndment,	Date	of Origir	nal File	ed (Month/Day	Line	Form filed by One Reporting Person							
(City) (State) (Zip)						_	Form filed by More than One Reporting Person											ting			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)					2. Transa Date (Month/D		Exe) if ar	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				es ially Following	Form (D) o	n: Direct I r Indirect I istr. 4) (7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(instr. 4)			
Common Stock 02/04/20							09		S ⁽¹⁾		2,376	D	\$33.51 ⁽²	81	,925		D				
Common Stock 02/04/20							09		S ⁽¹⁾		474	D	\$34.11 ⁽³⁾	81,451		D					
Common Stock 02/05/20						/2009	09		A		12,084(5)	Α	\$0.01	93	3,535	B5 D					
Common Stock															3	,987		I	401(k)		
			-	Table II								posed of, convertib			Owned		,	·			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	n Date	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transa Code (8)		of Derivati Securiti Acquire (A) or Dispose of (D) (I	f erivative ecurities cquired		Exercition Da		of Secur Underlyi	ng re Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (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	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares							
Stock Option	\$33.55	\$33.55 02/05/2009			A		54,375		05/05/2	2009 ⁽⁶⁾	02/04/2019	Commor Stock	54,375	\$0	54,37	5	D				

Explanation of Responses:

- 1. Transaction made pursuant to Mr. Smith's company approved trading plan established under Rule 10b5-1.
- 2. Open market sales reported on this line occurred at a weighted average price of \$33.51 (range \$33.05 to \$33.88).
- $3. \ Open \ market \ sales \ reported \ on \ this \ line \ occurred \ at \ a \ weighted \ average \ price \ of \$34.11 \ (range \$34.05 \ to \$34.16).$
- 4. Mr. Smith undertakes to provide (upon request by the SEC staff, the issuer or a security holder of the issuer) full information regarding the number of shares sold at each separate price.
- 5. Stock grant made under 2006 Stock and Option Plan, vesting on 2/5/2013, subject to 50% acceleration upon filing a new drug application with the FDA for telaprevir and 50% acceleration upon the approval of a new drug application for telaprevir.
- 6. Right to buy under 2006 Stock and Option Plan, vesting in 16 quarterly installments from 02/05/09.

Remarks:

Andrews, Attorney-

02/06/2009

** 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.