RxLens

RXLENS DISPATCH NHS MEDICINES INTELLIGENCE

Therapy-area edition · Data to March 2026 · NHS secondary care, England · rxlens.co.uk

Enzalutamide leads the £880m prostate-cancer pill market — but its rivals are closing fast

Four hormone therapies dominate advanced prostate cancer in NHS hospitals. Astellas's Xtandi still leads, but J&J's Erleada and Bayer's Nubeqa are climbing — and abiraterone, now a cheap generic, is surging after the NHS widened access. RxLens reads the public dispensing data.

~£882m a year · Xtandi 45% of spend · Nubeqa +40% and abiraterone +63% in six months

Advanced prostate cancer is increasingly treated with oral hormone therapies — androgen receptor pathway inhibitors (ARPIs) — that block the testosterone signalling driving the cancer. They are dispensed through hospital cancer pharmacies, so NHS secondary-care data captures them well, and because all four are used for one disease, the comparison is clean.

Over the latest year, English NHS hospitals dispensed an indicative £882 million of these four products.

Astellas's enzalutamide (Xtandi) remains the clear leader at about 45% of spend. But the two newer rivals are climbing fast — Johnson & Johnson's apalutamide (Erleada) and especially Bayer's darolutamide (Nubeqa), up about 40% in the latest six months.

The biggest mover is abiraterone, now an inexpensive generic: its spend rose about 63% half-on-half after NHS England widened access in early 2026. A caveat worth noting — because generic abiraterone is so cheap, its modest spend share understates how many men actually take it. Use is concentrated in the major cancer centres — the Christie, Clatterbridge and the Royal Marsden.

Sources: NHS England Secondary Care Medicines Data (NHSBSA, Open Government Licence v3.0); NICE TA741 and TA1109; NHS England (2026). Auto-generated by RxLens, a product of Nexcea Limited — full references at the end.

Contents

Executive summary

This worked showcase reads the public NHS dispensing data for the leading prostate-cancer hormone therapies in English hospitals over the latest twelve months (April 2025 to March 2026): enzalutamide (Xtandi; Astellas), apalutamide (Erleada; Johnson & Johnson), darolutamide (Nubeqa; Bayer) and abiraterone (Zytiga and generics; originator Johnson & Johnson). All are used for prostate cancer, so the comparison is clean; it is framed around indicative spend.

Headline findings:

- **An £882m market, led by enzalutamide.** Enzalutamide holds about 45% of indicative spend, ahead of apalutamide (~22%), darolutamide (~21%) and abiraterone (~12%).
- **The newer rivals are climbing fast.** Darolutamide grew about 40% in the latest six months and apalutamide about 11%, while the long-standing leader enzalutamide was broadly flat.
- **Cheap generic abiraterone is surging.** Abiraterone spend rose about 63% half-on-half, consistent with NHS England's early-2026 expansion of access — though because the generic is inexpensive, spend understates how widely it is now used.
- **Concentrated in major cancer centres.** The Christie, Clatterbridge and the Royal Marsden lead, reflecting where specialist prostate-cancer care is delivered.

In short: A maturing four-way market: a stable leader in enzalutamide, two fast-rising branded rivals in darolutamide and apalutamide, and a cheap generic in abiraterone whose rising use is partly hidden by its low price — a reminder that here, spend and patient numbers tell different stories.

1. About this showcase

Data and scope

We use the **NHS England Secondary Care Medicines Data (SCMD)**, which records the quantity and indicative cost of each medicine dispensed by every NHS Trust pharmacy in England each month.[1] These therapies fit secondary-care data well because they are administered or dispensed through hospital services. This edition covers all of England over the latest twelve months (April 2025 to March 2026).

How we measure

We compare products by **indicative spend (£)**, the measure least dependent on assumptions, alongside share of spend and month-by-month trend. Two honest notes on what the data can and cannot do: it records *indicative* cost (list-price based, before the confidential discounts NHS Trusts actually pay); and it is recorded at generic (molecular) level, so it distinguishes **different molecules** cleanly — which is what this comparison rests on — but cannot separate individual brands of the same molecule.

2. The products

The products compared, with their manufacturers and how they are used:

Molecule	Brand	Manufacturer
Enzalutamide	Xtandi	Astellas
Apalutamide	Erleada	Johnson & Johnson
Darolutamide	Nubeqa	Bayer
Abiraterone	Zytiga (+ generic)	J&J / generics

Enzalutamide (Xtandi). Oral androgen receptor inhibitor used across hormone-sensitive and castration-resistant prostate cancer. The long-standing market leader.

Apalutamide (Erleada). Oral androgen receptor inhibitor; NICE-recommended with androgen deprivation therapy for hormone-sensitive metastatic prostate cancer (TA741).

Darolutamide (Nubeqa). Oral androgen receptor inhibitor; NICE-recommended with androgen deprivation therapy (TA1109, 2025). The fastest-growing of the branded products.

Abiraterone (Zytiga (+ generic)). A CYP17 inhibitor (taken with a steroid) that blocks androgen synthesis. Off-patent since 2022; now an inexpensive generic, with NHS access widened in 2026.

3. Spend and market share

Across the year, English NHS hospitals dispensed an indicative £882 million of these four prostate-cancer hormone therapies. One note before reading the shares: abiraterone is now a cheap generic, so its spend share is much smaller than its share of patients — a point we return to below.

Product	Manufacturer	Indicative spend	Share
Enzalutamide (Xtandi)	Astellas	£396.9m	45.0%
Apalutamide (Erleada)	Johnson & Johnson	£190.5m	21.6%
Darolutamide (Nubeqa)	Bayer	£185.5m	21.0%
Abiraterone (Zytiga)	J&J / generics	£109.2m	12.4%
Total		**£882.2m**	**100%**

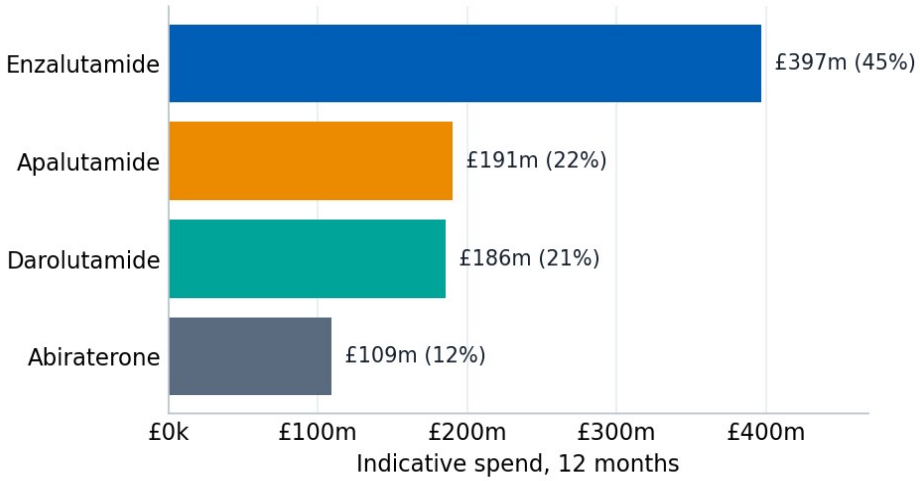

Figure 1. Indicative spend and share by product, England, 12 months to March 2026.

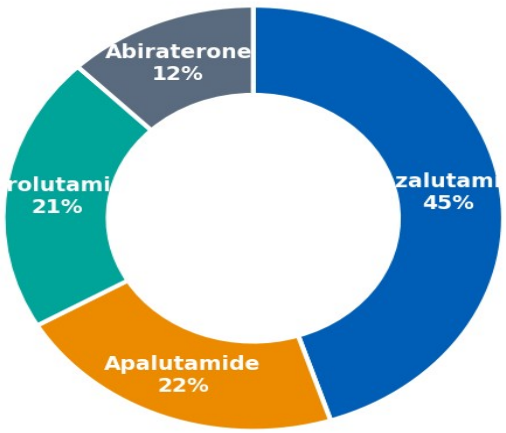

Figure 2. Share of indicative spend.

4. Trend over the year

Enzalutamide is broadly flat as the established leader, but darolutamide (about +40% half-on-half) and abiraterone (about +63%) climb steeply, with apalutamide also growing. The market is expanding, and the newer or cheaper options are taking the growth.

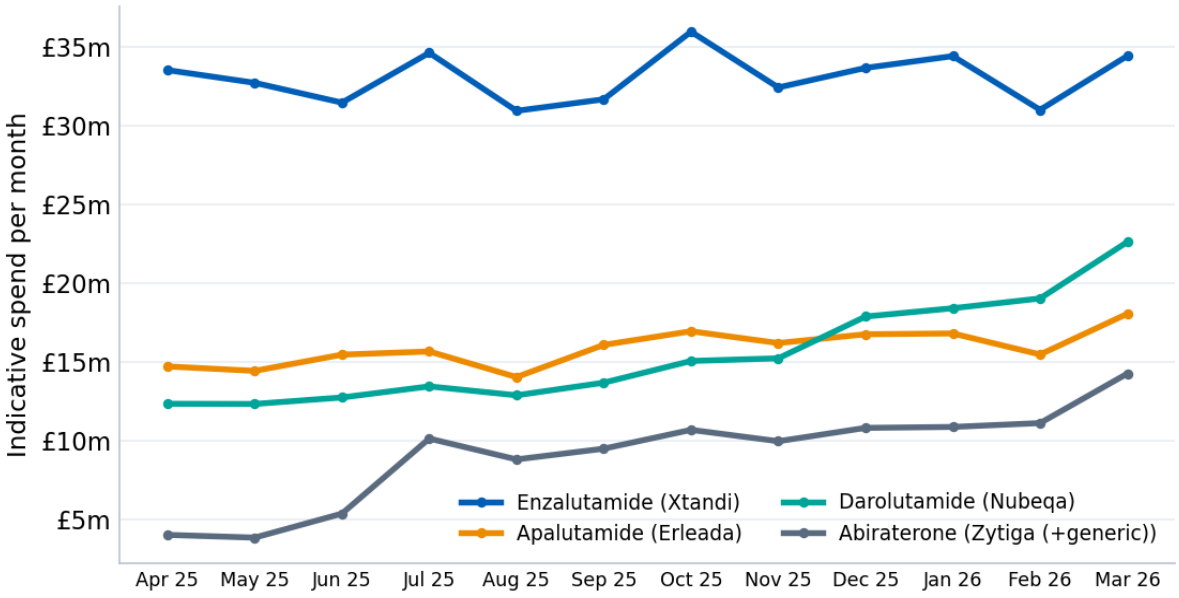

Figure 3. Monthly indicative spend by product, England.

Product	Trend (%/month)	Latest 6 mo vs prior 6 mo
Enzalutamide	+0.2%	+4%
Apalutamide	+1.5%	+11%
Darolutamide	+5.5%	+40%
Abiraterone	+8.6%	+63%

5. Where it is used — by NHS Trust

Around 109 NHS Trusts dispense these medicines, concentrated in the large specialist cancer providers. The chart shows the largest.

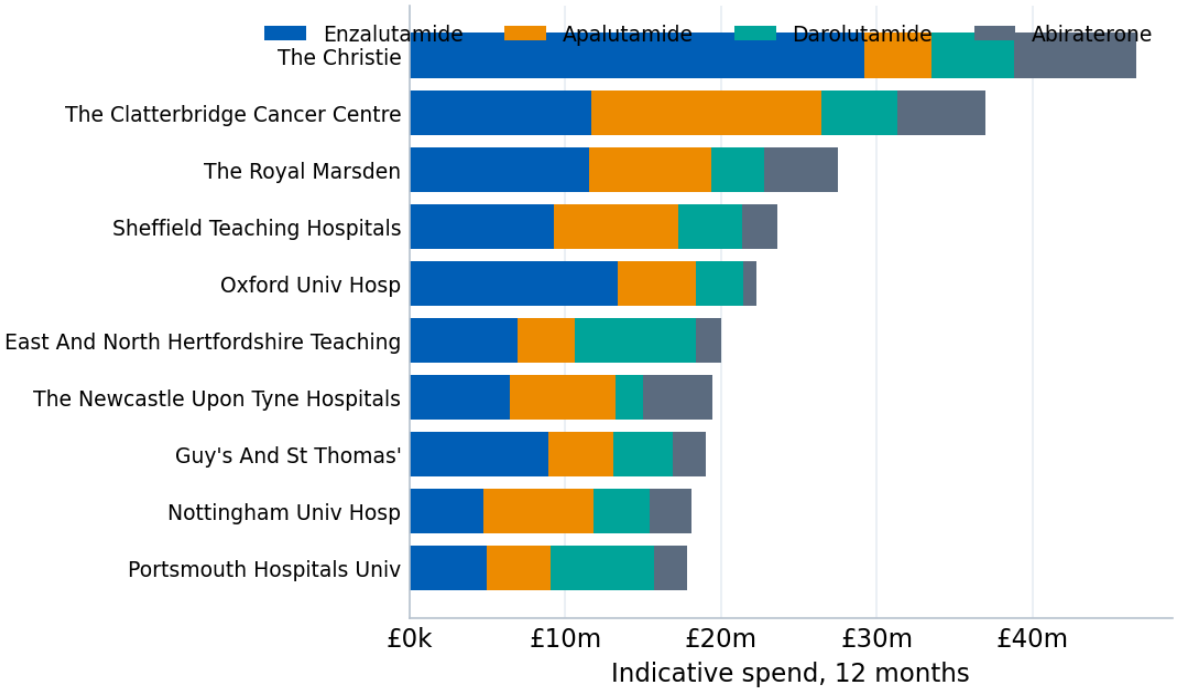

Figure 4. Largest NHS Trusts by indicative spend, stacked by product.

Across England, 109 NHS Trusts dispensed one or more of these products over the year. The biggest accounts are the major cancer centres — the Christie, Clatterbridge and the Royal Marsden — reflecting where specialist prostate-cancer care is delivered. Because abiraterone is now a low-cost generic, a spend-based chart understates its share of patients relative to the branded products.

6. Method, caveats and references

Method: indicative spend and dispensed quantity were summed from the monthly SCMD files for each molecule, across all NHS Trusts in England, for April 2025 to March 2026. Trends are from monthly linear regression and a comparison of the latest six months with the previous six. ODS codes were mapped to Trust names and regions.

Caveats: costs are indicative (list-price based) and ignore confidential discounts, so absolute figures and shares should be read as directional; SCMD covers hospital dispensing in England only (not primary care, private care, or the other UK nations); and the data is at molecular level, so it cannot separate brands of the same molecule. These do not change the direction of the findings.

References

[1] NHS Business Services Authority. Secondary Care Medicines Data (SCMD). NHSBSA Open Data Portal. https://opendata.nhsbsa.net/dataset/secondary-care-medicines-data-indicative-price (accessed June 2026).

[2] National Institute for Health and Care Excellence. Apalutamide with androgen deprivation therapy for treating hormone-sensitive metastatic prostate cancer. Technology appraisal guidance TA741. https://www.nice.org.uk/guidance/ta741 (accessed June 2026).

[3] National Institute for Health and Care Excellence. Darolutamide with androgen deprivation therapy for treating hormone-sensitive metastatic prostate cancer. Technology appraisal guidance TA1109. https://www.nice.org.uk/guidance/ta1109 (accessed June 2026).

[4] NHS England. NHS to offer thousands of men life-extending prostate cancer drug (abiraterone). January 2026. https://www.england.nhs.uk/2026/01/nhs-to-offer-thousands-of-men-life-extending-prostate-cancer-drug/ (accessed June 2026).