Australian Government
Repatriation Medical Authority

Statement of Principles
concerning
ANALGESIC NEPHROPATHY
(Reasonable Hypothesis)
(No. 43 of 2025)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

Dated 15 April 2025

Professor Terence Campbell AM
Chairperson
by and on behalf of
The Repatriation Medical Authority

Authorised Version F2025L00497 registered 16/04/2025

Contents

1 Name 3
2 Commencement 3
3 Authority 3
4 Repeal 3
5 Application 3
6 Definitions 3
7 Kind of injury, disease or death to which this Statement of Principles relates 3
8 Basis for determining the factors 4
9 Factors that must exist 4
10 Relationship to service 5
11 Factors referring to an injury or disease covered by another Statement of Principles 5

Schedule 1 - Dictionary 6

1 Definitions 6

Authorised Version F2025L00497 registered 16/04/2025

1 Name

This is the Statement of Principles concerning *analgesic nephropathy (Reasonable Hypothesis)* (No. 43 of 2025).

2 Commencement

This instrument commences on 19 May 2025

3 Authority

This instrument is made under subsection 196B(2) of the *Veterans' Entitlements Act 1986*.

4 Repeal

The Statement of Principles concerning analgesic nephropathy No. 77 of 2016 (Federal Register of Legislation No. F2016L01667) made under subsection 196B(2) of the VEA is repealed.

5 Application

This instrument applies to a claim to which section 120A of the VEA or section 338 of the *Military Rehabilitation and Compensation Act 2004* applies.

6 Definitions

The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

7 Kind of injury, disease or death to which this Statement of Principles relates

(1) This Statement of Principles is about analgesic nephropathy and death from analgesic nephropathy.

*Meaning of **analgesic nephropathy***

(2) For the purposes of this Statement of Principles, analgesic nephropathy:

means a bilateral chronic renal disease characterised by papillary necrosis, chronic interstitial nephritis, renal cortical atrophy and capillary sclerosis, and a clinical state of loss of renal function in an individual with a history of consumption of large amounts of analgesic agents, occurring in the absence of another biochemical, anatomical or metabolic cause for renal impairment.

(3) While analgesic nephropathy attracts ICD-10-AM code N14.0, in applying this Statement of Principles the meaning of analgesic nephropathy is that given in subsection (2).

Authorised Version F2025L00497 registered 16/04/2025

(4) For subsection (3), a reference to an ICD-10-AM code is a reference to the code assigned to a particular kind of injury or disease in *The International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification* (ICD-10-AM), Tenth Edition, effective date of 1 July 2017, copyrighted by the Independent Hospital Pricing Authority, ISBN 978-1-76007-296-4.

Death from ***analgesic nephropathy***

(5) For the purposes of this Statement of Principles, analgesic nephropathy, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's analgesic nephropathy.

Note: ***terminal event*** is defined in the Schedule 1 – Dictionary.

8 Basis for determining the factors

The Repatriation Medical Authority is of the view that there is sound medical-scientific evidence that indicates that analgesic nephropathy and death from analgesic nephropathy can be related to relevant service rendered by veterans, members of Peacekeeping Forces, or members of the Forces under the VEA, or members under the MRCA.

Note: ***MRCA***, ***relevant service*** and ***VEA*** are defined in the Schedule 1 – Dictionary.

9 Factors that must exist

At least one of the following factors must as a minimum exist before it can be said that a reasonable hypothesis has been raised connecting analgesic nephropathy or death from analgesic nephropathy with the circumstances of a person's relevant service:

(1) Consuming:

(a) a total of at least 1 kg of phenacetin in a phenacetin-containing analgesic before clinical onset; or

(b) an average of at least 1 g/day of phenacetin in a phenacetin-containing analgesic for a continuous period of at least 2 years immediately preceding clinical onset;

Note 1: Phenacetin is an aniline derivative drug with analgesic and antipyretic properties. It was a constituent of over-the-counter compound analgesic medications including Bex powder, Vincent's powder, Empirin Compound, and Bromo seltzer.

Note 2: Phenacetin is also known as acetophenetidin, aceto-p-phenetidide, acetylphenetidin, phenacetinum, N-(4-ethoxyphenyl) acetamide, p-ethoxyacetanilide, or CAS 62-44-2.

(2) inability to obtain appropriate clinical management for analgesic nephropathy before clinical worsening.

Authorised Version F2025L00497 registered 16/04/2025

10 Relationship to service

(1) The existence in a person of any factor referred to in section 9, must be related to the relevant service rendered by the person.

(2) The factor set out in subsection 9(2) applies only to material contribution to, or aggravation of, analgesic nephropathy where the person's analgesic nephropathy was suffered or contracted before or during (but did not arise out of) the person's relevant service.

11 Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

(1) if a factor referred to in section 9 applies in relation to a person; and

(2) that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(2) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.

Authorised Version F2025L00497 registered 16/04/2025

Schedule 1 - Dictionary

Note: See Section 6

1 Definitions

In this instrument:

analgesic nephropathy—see subsection 7(2).

MRCA means the *Military Rehabilitation and Compensation Act 2004*.

relevant service means:

(a) operational service under the VEA;
(b) peacekeeping service under the VEA;
(c) hazardous service under the VEA;
(d) British nuclear test defence service under the VEA;
(e) warlike service under the MRCA; or
(f) non-warlike service under the MRCA.

Note: ***MRCA*** and ***VEA*** are defined in the Schedule 1 - Dictionary.

terminal event means the proximate or ultimate cause of death and includes the following:

(a) pneumonia;
(b) respiratory failure;
(c) cardiac arrest;
(d) circulatory failure; or
(e) cessation of brain function.

VEA means the *Veterans' Entitlements Act 1986*.

Authorised Version F2025L00497 registered 16/04/2025