

Figure 2: Sensitivity and specificity of orthostatic hypotension for diagnosing adrenal insufficiency (cortisol peak response < 11 µg after low dose 10 µg short corticotropin stimulation test) in people with HIV-infection

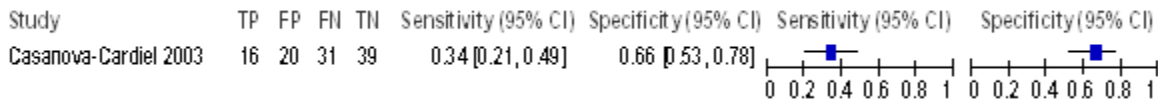


Figure 3: Sensitivity and specificity of orthostatic hypotension for diagnosing adrenal insufficiency (twofold value of basal cortisol after low dose 10 µg short corticotropin stimulation test) in people with HIV-infection

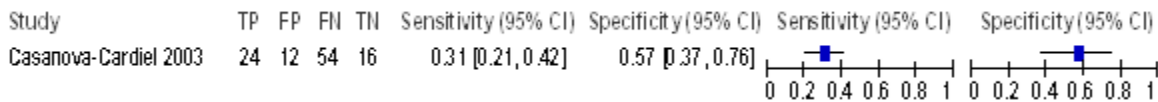


Figure 4: Sensitivity and specificity of orthostatic hypotension for diagnosing adrenal insufficiency (any cortisol value > 18 µg/dL after low dose 10 µg short corticotropin stimulation test) in people with HIV-infection

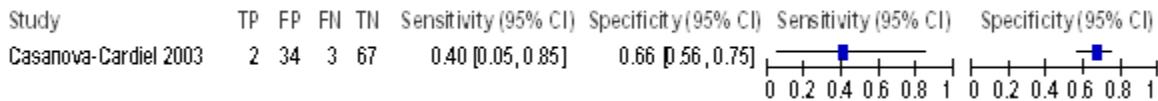


Figure 5: Sensitivity and specificity of orthostatic hypotension for diagnosing adrenal insufficiency (any cortisol value > 20 µg/dL after low dose 10 µg short corticotropin stimulation test) in people with HIV-infection

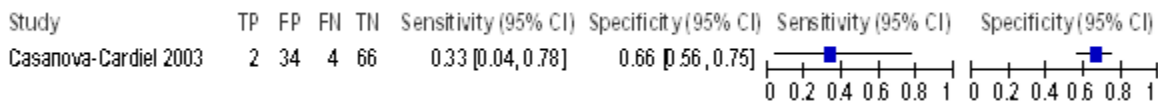


Figure 6: Sensitivity and specificity of orthostatic hypotension for diagnosing adrenal insufficiency (8am cortisol level of $<3 \mu\text{g/dL}$ or a peak serum cortisol level of $<18 \mu\text{g/dL}$ after a $5 \mu\text{g}$ ACTH stimulation test) in people using topical steroids

