Figure 7: Sensitivity and specificity of skin hyperpigmentation for diagnosing adrenal insufficiency (cortisol peak response < 11  $\mu$ g after low dose 10  $\mu$ g short corticotropin stimulation test) in people with HIV-infection.



Figure 8: Sensitivity and specificity of skin hyperpigmentation for diagnosing adrenal insufficiency (twofold value of basal cortisol after low dose 10 µg short corticotropin stimulation test) in people with HIV-infection



Figure 9: Sensitivity and specificity of skin hyperpigmentation for diagnosing adrenal insufficiency (any cortisol value > 18 μg/dL after low dose 10 μg short corticotropin stimulation test) in people with HIV-infection

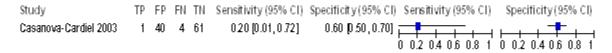


Figure 10: Sensitivity and specificity of skin hyperpigmentation for diagnosing adrenal insufficiency (any cortisol value > 20  $\mu$ g/dL after low dose 10  $\mu$ g short corticotropin stimulation test) in people with HIV-infection

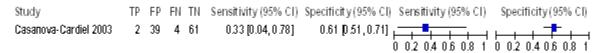


Figure 11: Sensitivity and specificity of skin hyperpigmentation for diagnosing adrenal insufficiency (serum cortisol < 500nmol/L after low dose (1 µg/ml) short corticotropin (Synacthen®) stimulation test in people with suspected TB

