A 36-year-old man presented with a complaint of darkening of all area over the body since four months before admitted to the hospital. The patient also complained that he felt fatigue. He already had visited a dermatologist and he got a routine vitamin C injection once a week.

On admission, the patient appeared to have hyperpigmentation on all over his body, particularly on the sun-exposed area. His lips and oral mucosa also appeared to be hyperpigmented.

On physical examination, there was orthostatic hypotension. Organ enlargement (organomegaly) and clubbing finger were not found.

After collecting the urine, there was urine volume of 1250 ml/24 hours. The laboratory investigation revealed a low cortisol urine level (2.2 mg, N:4-12 mg/24 hours). The morning cortisol serum level was also low (2.53 Ug/dL, N:5-25). Both laboratory studies indicated a reduced cortisol level in the patient. Presented clinical symptoms and signs, i.e. hyperpigmentation on all skin area, orthostatic hypotension, fatigue, are the classic sign and symptoms of hypocortisolism. Further evaluation was intended to find the place of lesion, whether it was occur in pituitary gland (secondary hypocortisolism) or in the adrenal gland (primary hypocortisolism)?

ACTH measurement showed a high level (1828 pg/mL, N:6-46). It became more obvious that there was a failure of ACTH stimulation in the adrenal gland. Thus, the patient had a primary disorder in the adrenal gland (Addison Disease). The CT scan showed a mass in the left adrenal gland.

We performed a serial examination of chest X-ray and laboratory investigation to find possible etiology that had caused the mass in the adrenal gland. We found that the patient had also had tuberculosis. Most likely that the adrenal insufficiency found in the patient is caused by tuberculosis.

Skin darkening in the patient is caused by a very high increase of ACTH level. The ACTH will bind to Melanocortin-2 receptor. At present, the patient receives anti-tuberculosis treatment and corticosteroid for his disease.