

**Long synacthen test:**

**Indication:**

Confirmation of diagnosis of adrenal insufficiency and to differentiate between primary and secondary adrenal insufficiency

**(Note: Measurement of basal 0900 ACTH levels is far more sensitive than cortisol response in the long synacthen test)**

**Procedure:**

0900:           Insert cannula and flush  
                  Blood for cortisol and ACTH  
                  1 mg i.m depot synacthen (different from tetracosactrin for SST)

09.30, 10.00, 11.00, 13.00, 17.00, 09.00: Bloods for cortisol

**Interpretation:**

First 3 samples interpreted as in Short synacthen test

Serum cortisol fails to rise in primary adrenal failure whereas in secondary adrenal insufficiency, the cortisol levels gradually rise on post 10.00 hrs samples

This test is rarely used nowadays as it is time consuming and one gets a diagnosis based on sensitive basal ACTH assays.

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