of HA-CDIF may represent the need for more robust treatments and better antibiotic use protocols.

901. Substance Use, Housing Stability, and HIV Infection: Study Context Is Everything

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Background: Housing instability can be a barrier to timely HIV diagnosis and treatment. Studies have shown homelessness and living in marginal housing arrangements are associated with a variety of HIV risk behaviors, including poly-drug use. Understanding the association between the physical living environment and substance use can facilitate HIV risk reduction interventions focused among substance users.

Objectives: To describe self-reported alcohol use and number of substances used during study reference periods by housing status in participants using harmonized data from four studies from the NIDA Seek, Test, Treat, and Retain (STTR) HIV consortium.

Methods: The analysis included participants with and without HIV from 2 US (STAR, UHS II) and 2 international (WHC+, India ICC IDU) based Seek and Test HIV studies. Housing status was categorized as homeless, marginally housed, and stably housed (SH). Participants were considered marginally housed if they reported living in a temporary facility or an informal settlement and homeless if they self-reported homelessness or living in shelters. Recent alcohol and poly-drug use (includes marijuana, cocaine, opioids, and stimulants, as well as other substances) were categorized as user/non-user.

Results: Of the 17406 total participants, 76% were stably housed, 6% were marginally housed, and 18% were homeless. The greatest proportion of individuals diagnosed with HIV were stably housed (12%), followed by marginally housed (10%), and homeless (10%). The heterogeneity of recent substance use and housing status across studies was dramatic, with poly-drug use ranging from 37% to 98%. In all studies, homeless individuals reported the highest prevalence of poly-drug use. The difference was most dramatic in WHC+, where homeless participants used 1.7 ± 1.4 substances (compared with 0.5 ± 0.9 among SH, $p < 0.01$), and the smallest difference was in UHS II, with 2.3 ± 1.0 substances (compared with 2.2 ± 1.0 among SH, p = 0.17). Studies with the lowest overall poly-drug use (WHC+ 37%, STAR: 66%, UHS II: 98%, India: 95%) had the highest rates of alcohol use (WHC+ 85%, STAR: 81%, UHS II: 80%, India: 60%), suggesting possible substitution of alcohol for other substances.

Conclusions: Homelessness, but less so unstable housing, was associated with the reported recent use of multiple illicit substances. The association varied widely between different populations which might reflect cultural, sampling, and geographic differences.

902. Linkage to Care of Patients Living with HIV/AIDS in a Reference Hospital of Minas Gerais, Brazil

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Background: Linkage is the second step in the HIV care continuum and can be defined as the first clinic visit after diagnosis to an outpatient provider with prescribing privileges in an HIV care setting. Linkage is essential to assess patient health, provide access to antiretroviral therapy (ART), as well as prevention and care interventions.

Objectives: To describe the linkage profile and the sociodemographic and clinical characteristics of patients under care in public hospital specialized in HIV/AIDS care in Belo Horizonte, Minas Gerais, Brazil.

Methods: Cross-sectional study of 208 HIV-infected adults linked between January and December 2015 to a reference hospital (Hospital Eduardo de Menezes)

which is specialized in inpatient and outpatient care of infectious diseases, especially tuberculosis, AIDS and leprosy. Linkage was defined as the first outpatient visit to this service after HIV diagnosis, assessed through patients' medical records.

Results: Most patients (77%) were linked to care within 90 days of diagnosis. The mean linkage time was 138 ± 37 days. Most patients were male (78%), with a mean age of 39.3 ± 11.9 years old and median of 38 years old, non-white skin color (76%), unmarried (71%), residents of Belo Horizonte (70%) and had used tobacco (83%), alcohol (60%) and illicit drugs (43%) at least once in lifetime. Half of patients had eight or less years of schooling (51%), had children (52%) and had a job (52%). More than half of patients had an AIDS-defining clinical condition at the time of linkage (56%).

Conclusions: The results show a high prevalence of linkage with late diagnosis, which may lead to worse prognosis and higher costs with treatment. A better understanding on how HIV-infected people use outpatient and inpatient care is essencial to improve care assessment and provision.

903. Tobacco Use and Associated Factors Among Adolescent Students in Bangladesh: A Cross Sectional Study

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Background: In the South East Asian region, the prevalence of tobacco (both smoking and smokeless) use is high. It is one of the major causes of many non-communicable diseases in this region.

Objectives: To estimate the prevalence of tobacco use and determine associated factors among adolescent students in Bangladesh.

Methods: Data from the 2013 Global Youth Tobacco Survey (GYTS) for Bangladesh were used. A total of 3,245 adolescents (age 11–17+ years) students from grades 7, 8, and 9 were included. Tobacco use was defined as one who has used any form of tobacco (smoking or smokeless) in the last 30 days of the survey. Sociodemographic, environmental, motivational, and programmatic factors were considered as key predictors. Multivariable logistic regression models were used to assess the degree of association between the risk factors and the outcome. All analyses incorporated the complex sampling design of the survey.

Results: The overall prevalence of adolescent tobacco use was 7.0%, and the prevalence was higher in boys (9.26%) than girls (2.93%). Multivariable analysis showed that tobacco use was associated with middle adolescents (OR: 3.05, 95% CI: 1.49, 6.26), girl gender (OR: 0.35, 95% CI: 0.19, 0.54), exposed to second-hand smoking (OR: 6.26, 95% CI: 2.37, 16.58), spending average money of 101–200 taka per week (OR: 3.61, 95% CI: 1.71, 7.61), and getting free offer to smoke (OR: 3.99, 95% CI: 2.28, 6.96).

Conclusions: Prevalence of tobacco use among adolescent students in Bangladesh is lower than in many other neighboring countries. There is, however, intervention programs are necessary to promote cessation among tobacco users especially mid-adolescents, exposed to second-hand smoking, and higher amount of pocket money spending adolescents.

904. Comorbidities in Adults with Asthma: Population-Based Crosssectional Analysis of 1.4 Million UK Patients

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Background: In people with asthma, comorbidity can significantly increase asthma morbidity and lower adherence to asthma guidelines.

Objectives: The objective of this study was to measure the prevalence of physical and mental health comorbidities in adults with asthma using a large nationally representative population.

Methods: Cross-sectional analysis of routine primary care electronic medical records for 1.4 million UK adults extracted from the General Practice Administration System for Scotland, examining the prevalence of 39 comorbidities in people with and without asthma, before and after adjustment for age, sex, social deprivation and smoking status using logistic regression.