Conclusion. Lack of power makes meaningful interpretation of the results for the primary objective difficult. However, several of the prespecified secondary objectives and subgroup analyses demonstrated clinically significant results related to increased weight gain or BMI category changes with INSTI-, PI-, and tenofovir-based regimens. Checking the patient's weight at every appointment is considered standard practice in US clinics, suggesting valid weight change encounters were observed. Further commitment to standardized weighing practices should be a priority at clinics caring for patients living with HIV.

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1006. Contraception, Pregnancy and ART in Women of Child-Bearing Years

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Session: P-47. HIV: Treatment

Background. Simpler anti-retroviral (ART) regimens with less pill burden and fewer side effects can improve adherence and clinical outcomes. Warnings about dolutegravir possibly causing neural tube defects (NTD) are alarming and have the potential to impact ART options for women of child-bearing years. A recent preliminary analysis from an observational study group in Botswana prompted a warning from the US Department of Health and Human Services (DHHS), released in May 2018, about the use of dolutegravir during conception.

Methods. At a large urban HIV clinic in New Orleans, a retrospective chart review was performed on adult women up to age 40 who were seen in clinic in 2018 to assess for dolutegravir use, as well as discussion of NTD and pregnancy.

Results. 132 woman in the age range were seen in 2018, the mean age was 33 years (range 19 to 40). Average age of HIV diagnosis was 26. Most were African-American (83%) and 1% had Medicaid or no insurance. Of BL women diagnosed with HIV due to testing during pregnancy and 17% during routine screening. Sexual exposure was the main reported risk factor for HIV (69%) and 48% had another STD. Only 61% had a documented discussion of contraception and pregnancy plans. Over the ART treatment at the clinic, 47 pregnancies occurred. Most of the women were on integrase regimens (66%), although 14% were on protease inhibitor regimens and 20% were on other regimens or combination regimens. Forty two percent of the women were ever on dolutegravir and 12 had NTD discussed, resulting in 3 regimen changes. The main reason it was not discussed was permanent sterilization, change to a different ART regimen prior to the warning, long-term contraception, or no sexual activity. Seven pregnancies occurred while on dolutegravir, three were prior to the warning, one after the first trimester, and one ended in abortion. None had an NTD reported.

Conclusion. Dolutegravir is very commonly used due to its tolerability and simplicity. While recent reports show the risk of NTD to be lower than previously thought, it is still elevated compared to other ART and a more open discussion of pregnancy plans, contraception, and NTD if applicable, needs to occur in women living with HIV.

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1007. Criminal Justice Involvement Negatively Impacts Engagement in Treatments for HIV and Opioid Use Disorder in Vietnam

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Session: P-47. HIV: Treatment

Background. People living with HIV (PLWH) and opioid use disorder (OUD) commonly experience criminal justice involvement (CJI). We sought to estimate the impact of CJI on 1) HIV care engagement, 2) antiretroviral therapy (ART) prescription, though it did not reach statistical significance (OR=0.17, 95% CI=0.03, 1.22).

Methods. People living with HIV and OUD in Vietnam may improve care outcomes in Vietnam and elsewhere.

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