

Sexual Orientation **D-sxo** Discrimination and Tobacco Use **B-use** Disparities in the United States **L-loc** .

Introduction Differences in tobacco/ nicotine **C-chm** use by sexual orientation **D-sxo** are well documented.

Development of interventions **P-trt** requires attention to the etiology of these differences. This study examined associations **M-sts** among sexual orientation **D-sxo** discrimination, cigarette smoking **B-use** , any tobacco/ nicotine **C-chm** use, and DSM-5 tobacco use **B-use** disorder (TUD) in the United States **L-loc** . Methods We used data from the 2012â€“2013 **B-tme** National Epidemiologic Survey on Alcohol and Related Conditions **M-dat** based on in-person interviews with a nationally representative **M-mth** sample **M-mth** of noninstitutionalized US adults **D-age** . Approximately 8.3% of the target population was estimated to have same-sex **D-sxo** sexual attraction, 3.1% had at least one same-sex **M-mth** sexual partner in the past-year, and 2.8% self-identified as lesbian **D-sxo** , gay **D-sxo** , or bisexual **D-sxo** . Results Sexual attraction, sexual behavior, and sexual identity were significantly associated with **R-rel** cigarette smoking **B-use** , any tobacco/ nicotine **C-chm** use, and DSM-5 TUD. Risk **B-pec** of all tobacco/ nicotine **C-chm** outcomes was most pronounced for bisexual **D-sxo** adults **D-age** across all three sexual orientation **D-sxo** dimensions. Approximately half of sexual minorities **D-rac** who identified as lesbian **D-sxo** or gay **D-sxo** and one-fourth of those who identified as bisexual **D-sxo** reported past-year sexual orientation **D-sxo** discrimination. Sexual minorities **D-rac** who experienced high levels of past-year sexual orientation **D-sxo** discrimination had significantly greater probability **M-sts** of past-year cigarette smoking **B-use** , any tobacco/ nicotine **C-chm** use, and TUD relative to **R-rel** sexual minorities **D-rac** who experienced lower levels of sexual orientation **D-sxo** discrimination or no discrimination. Conclusions Sexual minorities **D-rac** , especially bisexual **D-sxo** adults **D-age** , are at heightened risk **B-pec** of cigarette smoking **B-use** , any tobacco/ nicotine **C-chm** use, and DSM-5 TUD across all three major sexual orientation **D-sxo** dimensions. Tobacco prevention and cessation **B-ces** efforts should target bisexual **D-sxo** adults **D-age** and consider the role that sexual orientation **D-sxo** discrimination plays in cigarette smoking **B-use** and treatment of TUD. Implications Differences in tobacco/ nicotine **C-chm** use by sexual orientation **D-sxo** are well documented, but little is known about differences across all three sexual orientation **D-sxo** dimensions (attraction, behavior, and identity) or the origins of these differences. This study is the first to show that differences in tobacco/ nicotine **C-chm** use across the three sexual orientation **D-sxo** dimensions for respondents **M-mth** who were exclusively heterosexually-oriented were minimal, but varied more **R-rel** substantially among sexual minority **D-sxo** women **D-gen** and men **D-gen** across the three sexual orientation **D-sxo** dimensions. Sexual minorities **D-rac** who experienced high levels of past-year sexual orientation **D-sxo** discrimination had significantly greater probability **M-sts** of cigarette smoking **B-use** , any tobacco/ nicotine **C-chm** use and DSM-5 tobacco use **B-use** disorder.nan