

Importance to 'patients' or the population	The overall effectiveness of HPV vaccination in reducing HPV-related diseases is affected by delayed or incomplete vaccination. Similarly, for hepatitis A and B vaccinations, evidence shows optimal seroprotection requires receipt of all recommended doses. It is therefore important that people who are eligible for these vaccinations complete the full course.
Relevance to NICE guidance	The committee was unable to recommend specific interventions to facilitate vaccination completion and agreed this was a gap in the guideline they would like to address in future versions.
Relevance to the NHS	The outcome would affect interventions to increase vaccine completion rates in MSM which would reduce the overall burden on the health system.
National priorities	DHSC will publish a new sexual health strategy in winter 2021
Current evidence base	Two studies (Bass 2021, Reiter 2018) provided low quality evidence from the US on vaccine completion but both had short follow-up periods that may have been insufficient for participants to obtain the full vaccine course
Equality considerations	Supporting gay, bisexual and other men who have sex with men to obtain vaccinations may reduce inequalities

SPIDER table

Setting	Non-clinical setting
Phenomenon of interest	Barriers to hepatitis A, hepatitis B, and HPV vaccine completion in MSM and how to overcome them
Design	Interviews or focus groups

Evaluation	Target groups experiences and beliefs about vaccine completion, barriers they have encountered, and how to overcome them
Research design	Qualitative