Reviewer's report

Title: Predictors of Recurrence Free Survival for Patients with Stage II and III Colon Cancer

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Reviewer: Craig C Lynch

Reviewer's report:

The authors present a large historical series of stage II and III colon cancer, and have been unable to demonstrate clinicopathological predictors of recurrence.

Major revisions

Of note, while the authors have obviously strived to maintain as large a cohort as possible, I think this is unhelpful to the data presented:

Recurrence is reported as occurring in patients at a range of 6 days to 10 years following surgery.

I would question how recurrence can be classified as occurring 6 days after surgery, similarly at 10 years is this not more likely to be a second primary?

Given the historical nature of the data, I think those with very short (probably unavailable) followup data would be best excluded

I can make no judgement as to how patients were followed up, how recurrence was identified, or more importantly, excluded. This basic data is obviously important for a predictive model.

A description of the followup protocol would be useful.

Mean followup of 6 years is stated, but were patients under active surveillance for this long, or does this mean that there was no reported recurrence over this time?

Recurrence itself is not adequately described; metastatic, nodal, anastomotic, either or any.

It would be useful to know more about why 30% of stage III patients did not have adjuvant chemotherapy. Also, as this usually occurs 6-8 weeks after surgery, I don't understand how patients can be included who have been followed up for a shorter time than this.

Applying your predictive model to a 'cleaner' data set with documented followup for at least 3-4 years would be of more utility.

Level of interest: An article of limited interest

Quality of written English: Acceptable
**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

I have no competing interests