

# Review of: "Microsatellite Instability of Colon adenocarcinomas in India comprises multiple molecular subtypes"

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Potential competing interests: No potential competing interests to declare.

1. English language and logic. The English language is poor and must be improved, The logic needs to be greatly improved, Many contexts are ambiguous.

2. abstract. The first two sentences describe the prevalence rate of MSS, MSI-H colorectal cancer respectively, which **have nothing to do with** the following description in the abstract.

3. Materials and Methods. Please describe the details of Nanostring nCounter assay, including which nanostring panel be used in this study? covering gene list? etc

4. Materials and Methods. Please describe in detail how to define "infiltration status" in this study

5. Materials and Methods. Please clarify whether TIMER is used to analyze co expression or immune cell infiltrates. From the perspective of article description, TIMER tends to be used to describe immune cell infiltration

6. MSI CRC is not defined in the text, please clearly define whether MSI CRC is MSS CRC or MSI-H CRC or both? This phenomenon also be found in somewhere in the text, for example The sentence " All 15 cases were identified as MSI by MMR IHC and MSI-PCR in the discovery cohort." in Results and Discussion section.

7. In nanostring Expression Analysis section, no comparison was made between MSS and MSI-H, neither in GEPIA Correlation analysis, nor in immune cell infiltration analysis

8. Conclusion. this section does not describe all the findings in this study, and the conclusion is far fetched and unfounded. In particular, the statement "The subgroup with TLR4 regulation may contribute to a better diagnosis for the MSI pathogenesis of early stage CRC" does not have any supporting evidence

9. The article wants to study this clinical problem "With these data, however, there has not been any molecular pathogenesis study to explore the reasons behind the higher prevalence of MMR deficiency in the pathogenesis of CRC ", However, the full study did not focus on this topic. First, the sample size was too small, neither training set nor Validation set. Second, the entire study did not explain why higher prevalence of MMR deficiency in the pathogenesis of CRC.

