

IMMUNITY SOCIETY WEEKLY

Immunity · Science · Well-being

4 health stories worth your time this week · 本周四件值得你花时间知道的健康事

ISSUE NO. 007 · WEEK OF 8-14 SEP 2026

~3 MIN READ · 约3分钟

PEER-REVIEWED PRIMARY SOURCES · 同行评审原始研究

01

A daily handful of nuts is linked to a lower risk of dying from heart disease.

每天一把坚果，与因心脏病去世的风险更低相关。

63 studies · people who ate the most nuts had a **26%** lower risk of dying from cardiovascular disease and a **23%** lower risk of dying from any cause than those who ate the least | 汇总63项研究；坚果吃得最多的人，因心血管疾病去世的风险低26%、全因死亡风险低23%（与吃得最少者相比）

Nuts are calorie-dense, so they can feel like a guilty snack — but the evidence keeps pointing the other way. Pooling 63 long-term studies, researchers found that people who ate the most nuts had markedly lower rates of heart disease, stroke and death, including a 26% lower risk of dying from cardiovascular disease. Their unsaturated fats, fibre and plant compounds seem to protect the heart. The practical point: make a small daily handful of unsalted nuts (about 30 g — almonds, walnuts, pistachios) a regular snack in place of chips or biscuits; you don't need much to get the benefit.

坚果热量密度高，吃起来常有“罪恶感”——但证据却一再指向相反的方向。研究者汇总了63项长期研究，发现坚果吃得最多的人，心脏病、中风和死亡的发生率都明显更低，其中因心血管疾病去世的风险降低26%。坚果中的不饱和脂肪、膳食纤维和植物化合物似乎能保护心脏。实用要点：把每天一小把无盐坚果（约30克——杏仁、核桃、开心果）作为日常零食，替代薯片或饼干；不需要吃很多就能获益。

SOURCE | 来源: Archives of Cardiovascular Diseases · Peer-reviewed dose-response meta-analysis · 2025 · 63 prospective cohort studies · Mengna Liu, Dongsheng Hu and colleagues, Shenzhen University · "Nut Consumption and Risk of Cardiovascular Disease Events and All-Cause Mortality" · Original study

02

Colon cancer is rising fast in younger adults — which is why screening now starts at 45.

结直肠癌在年轻人中快速上升——这正是筛查年龄提前到**45岁**的原因。

The share of colorectal cancers in adults under 55 nearly doubled — from **11%** (1995) to **20%** (2019); screening is now recommended from age **45**, not 50 | 55岁以下人群在结直肠癌中的占比几乎翻倍——从1995年的11%升至2019年的20%；筛查建议年龄已从50岁提前至45岁

Colorectal cancer used to be seen as an older person's disease, but that's changing fast: the share of cases in people under 55 nearly doubled between 1995 and 2019, and death rates in the under-50s have been creeping up. Because so many early cases occur at 45–49, guidelines now recommend starting screening at 45 for people at average risk. The practical point: if you're 45 or older, get screened — a colonoscopy or a simple at-home stool test can catch it early or even prevent it; and at any age, don't ignore warning signs like blood in the stool, a lasting change in bowel habits, or unexplained weight loss — get them checked.

结直肠癌过去被视为“老年病”，但这正在迅速改变：55岁以下人群的病例占比在1995至2019年间几乎翻倍，50岁以下人群的死亡率也在缓慢上升。由于很多早发病例集中在45–49岁，指南现已建议一般风险人群从45岁开始筛查。实用要点：如果你已年满45岁，去做筛查——肠镜或简单的家用粪便检测可以早期发现、甚至预防它；而在任何年龄，都别忽视警示信号，比如便血、排便习惯长期改变或不明原因的体重下降——发现了就去检查。

SOURCE | 来源: CA: A Cancer Journal for Clinicians · Peer-reviewed report (American Cancer Society) · 2023 · US national cancer data · Rebecca Siegel and colleagues, American Cancer Society · "Colorectal Cancer Statistics, 2023" · Original report

03

Chronic stress can make your immune system look years older.

长期压力，会让你的免疫系统看上去老了好几岁。

5,744 adults over 50 · those with more life stress and trauma had fewer "fresh" immune cells and more "worn-out" ones — the hallmark of an older immune system | 5,744名50岁以上成年人；生活压力和创伤更多的人，“新鲜”的免疫细胞更少、“耗竭”的更多——正是免疫系统衰老的标志

Your immune system ages along with you — fewer fresh "naïve" T cells ready for new threats, more worn-out ones that mostly stoke inflammation. In nearly 6,000 older adults, those reporting more stress, trauma or discrimination had exactly this older-looking immune profile, which is tied to higher risk of infections, cancer and weaker vaccine responses. Encouragingly, the stress link shrank once diet and exercise were accounted for. The practical point: you can't erase stress, but you can blunt its toll on your immune system — protect sleep, keep moving, eat well, and lean on your relationships; those buffers are partly why the same stress ages some people faster than others.

你的免疫系统会随你一起变老——随时应对新威胁的“新鲜”初始T细胞变少，而主要助长炎症的“耗竭”细胞变多。在近6,000名老年人中，报告压力、创伤或受歧视更多的人，正好呈现出这种“更老”的免疫特征，而它与更高的感染、癌症风险以及更弱的疫苗反应相关。令人鼓舞的是，在把饮食和运动纳入考量后，压力与免疫衰老的关联明显减弱。实用要点：你无法消除压力，却可以减轻它对免疫系统的损耗——保证睡眠、保持运动、好好吃饭、并依靠你的人际关系；正是这些缓冲，部分解释了为什么同样的压力会让有些人老得更快。

SOURCE | 来源: Proceedings of the National Academy of Sciences · Peer-reviewed cohort study · 2022 · n = 5,744 (US adults over 50) · Eric Klopach, Eileen Crimmins and colleagues, University of Southern California · "Social Stressors Associated With Age-Related T Lymphocyte Percentages in Older US Adults" · Original study

04 · NEW IN TREATMENT · 治疗新进展

An immunotherapy made rectal cancer vanish in every patient in a small trial.

在一项小型试验中，一种免疫疗法让每一位患者的直肠癌都消失了。

14 of 14 patients with a specific subtype of rectal cancer had it completely disappear on the drug dostarlimab alone — no chemo, radiation or surgery needed | 14名患有某一特定亚型直肠癌的患者，仅用药物dostarlimab后癌症全部完全消失——无需化疗、放疗或手术

In a result oncologists called unprecedented, every one of the first 14 patients treated in this trial saw their rectal cancer disappear completely — on immunotherapy alone, sparing them the chemotherapy, radiation and surgery that can cause lasting harm. The catch: it worked because their tumours were a specific type ("mismatch-repair-deficient"), found in a minority of cases, that is especially visible to the immune system. Follow-up in more patients has kept the response near 100%. The practical point: this is why tumour testing matters — if you or someone you love has rectal or colon cancer, ask whether the tumour is “MMR-deficient” or “MSI-high,” because that may open the door to this kind of treatment.

在一个被肿瘤专家称为“前所未有”的结果中，这项试验最先接受治疗的14名患者，直肠癌全部完全消失——仅靠免疫治疗，就让他们免去了可能造成长期损害的化疗、放疗和手术。前提是：它之所以有效，是因为这些患者的肿瘤属于一种特定类型（“错配修复缺陷型”），只见于少数病例，而这种肿瘤对免疫系统格外“显眼”。在更多患者中的随访，也让这一有效率保持在接近100%。实用要点：这正是肿瘤检测重要的原因——如果你或你所爱的人患有直肠癌或结肠癌，不妨询问肿瘤是否为“错配修复缺陷（MMR-deficient）”或“高微卫星不稳定（MSI-high）”，因为这可能为这类治疗打开一扇门。

SOURCE | 来源: The New England Journal of Medicine · Peer-reviewed phase 2 trial · 2022 · n = 14 (mismatch-repair-deficient rectal cancer) · Andrea Cercek, Luis Diaz and colleagues, Memorial Sloan Kettering Cancer Center · "PD-1 Blockade in Mismatch Repair-Deficient, Locally Advanced Rectal Cancer" · Original study

Forward if useful · 如果你想到某个人，把这一期转给他。