General Certificate of Education (A-level)
June 2013

Biology BIOL1

(Specification 2410)

**Unit 1: Biology and Disease** 

## **Final**

Mark Scheme

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Question	Marking Guidelines	Marks	Comments
1(a)	1. A: phospholipid (layer);	2	Reject hydrophobic /     hydrophilic phospholipid
	B: pore/channel/pump/carrier/ transmembrane/intrinsic/transport protein;		Ignore unqualified reference to protein
1(b)(i)	Condensation (reaction);	1	
1(b)(ii)	Organelle named; Function in protein production/secretion; eg  1. Golgi (apparatus); 2. Package/process proteins;  OR  3. Rough endoplasmic reticulum/ribosomes; 4. Make polypeptide/protein/forming peptide bonds;  OR  5. Mitochondria; 6. Release of energy/make ATP;  OR  7. Vesicles; 8. Secretion/transport of protein;	2	Function must be for organelle named Incorrect organelle = 0  1. Accept smooth endoplasmic reticulum  3. Accept alternative correct functions of rough endoplasmic reticulum. ER/RER is insufficient  3. Accept folding polypeptide/protein  6. Reject produce/make energy  6. Accept produce energy in the form of ATP

Question	Marking Guidelines	Marks	Comments
2(a)	1. (Enzyme has) active site;	2	Reject active site is same shape as substrate
			Reject active site is on the substrate
	Only substrate fits (the active site);		Accept active site forms     during induced fit
			Accept converse statement
2(b)		3	Assume "it" = allopurinol
	(Allopurinol) is a similar shape to xanthine;		Reject <u>same</u> shape.     Accept similar structure
	2. (Allopurinol) enters active site / is a		Ignore e-s complexes in relation to inhibitor
	competitive inhibitor;		Reject non-competitive inhibitor in the context of binding to the active site
	3. Less xanthine binds/fewer e-s		Ignore     complementary/fits
	complexes/fewer uric acid crystals formed/less uric acid formed;		3. Reject <u>no</u> e-s complexes/xanthine <u>cannot</u> enter active site, <u>no</u> uric acid
			Can award in context of non-competitive inhibition

Question	Marking Guidelines	Marks	Comments
3(a)(i)	(Simple) diffusion;	1	Reject facilitated diffusion Accept lipid diffusion
3(a)(ii)	<ol> <li>Thin walls/cells;</li> <li>(Total) surface area is large;</li> </ol>	2	<ol> <li>'Short diffusion pathway' alone is an explanation not a description</li> <li>Accept squamous epithelia / one cell thick</li> <li>Ignore references to 'volume ratio'</li> </ol>
3(b)	<ol> <li>Loss of elasticity/elastic tissue;</li> <li>Scar tissue;</li> <li>Less recoil;</li> </ol>	2 max	1. Accept elastin

Question	Marking Guidelines	Marks	Comments
4(a)	<ol> <li>Toxin (produced by bacterium) causes (chloride) ions to move into (lumen of) intestine;</li> <li>Water potential (of intestine contents) falls / water moves by osmosis into intestine/out of cells;</li> </ol>	2	<ol> <li>Reject incorrect ion</li> <li>Direction of ion movement must be clear</li> <li>Ignore movement of water from blood (rather than cells)</li> </ol>
4(b)	<ol> <li>Both show little/no increase/remain constant in January/February;</li> <li>(Up to May) sea temperature rises more quickly/before increase in cholera;</li> <li>Both reach a peak in/decline after April/May;</li> </ol>	2 max	Ignore references to correlation  Accept May to June
4(c)	<ol> <li>Positive correlation from January to September/October (between sea temperature and cholera cases);</li> <li>Only records people in hospital with cholera / may be people with cholera not in hospital;</li> <li>Negative correlation/cases rising as sea temperature falls in October/November;</li> </ol>	2 max	<ol> <li>Ignore as sea temperature rises, cholera cases rise, as in stem</li> <li>Accept any two months within range</li> <li>'At end of year' insufficient</li> </ol>

4(d)	Suitable suggestion with explanation;;  1. Have produced memory cells;  2. After previous infection/vaccination;	2	<ol> <li>'Have become immune' is not enough</li> <li>Accept 'produces secondary response'</li> </ol>
	<ul><li>OR</li><li>3. Different forms of cholera;</li><li>4. Some don't produce much/any toxins;</li></ul>		Accept types /strains     /variety
	OR		
	5. Few bacteria ingested;		
	<ol><li>Not enough toxin to produce symptoms;</li></ol>		
	OR		
	<ol><li>Some people naturally resistant to bacterium;</li></ol>		
	Because of structure of cell membranes / amount of secretions eg bile/pancreatic juices;		

Question	Marking Guidelines	Marks	Comments
5(a)	<ol> <li>To allow comparison;</li> <li>Because different number of cells in samples / different times for incubation / numbers become easier to manipulate;</li> </ol>	2	
5(b)	203.7(%);;	2	Allow 1 mark for 21.8/10.7 Allow 1 mark for correct answer (203.74) but not correctly to 1 dp 204= 1 mark
5(c)(i)	<ol> <li>(At every concentration) uptake is faster at 37°C/at higher temperature;</li> <li>Due to faster respiration/ATP production;</li> </ol>	2	
5(c)(ii)	<ol> <li>Uptake at 37°C only small increase /levelling off/almost constant;</li> <li>As carrier proteins full;</li> <li>Concentration of imatinib is not the limiting factor;</li> </ol>	2 max	Accept 'no (significant) change' Ignore use of numbers

Question	Marking Guidelines	Marks	Comments
6(a)	<ol> <li>Add iodine/potassium iodide solution to the food sample;</li> <li>Blue/black/purple indicates starch is present;</li> </ol>	2	Allow 'iodine'     Must be in the context of the correct reagent
6(b)	<ol> <li>Starch digested to maltose/by amylase;</li> <li>Maltose digested to glucose/by maltase;</li> <li>Digestion of sucrose is a single step/only one enzyme/sucrase;</li> </ol>	3	Ignore 'hard to digest/easily digested'  3. Accept converse for starch  3. Do not accept digestion of sucrose is faster
6(c)	<ol> <li>Smoking increases risk of CHD;</li> <li>Introduces another variable;</li> </ol>	1 max	
6(d)(i)	<ol> <li>No effect on risk with diet group 1 and 2/lowest glycaemic load;</li> <li>Above diet group 2/in higher groups, risk increases as glycaemic load increases;</li> </ol>	1 max	Simple statement of correlation is not enough for this mark
6(d)(ii)	<ol> <li>For diet group 2 and above, increase in risk of CHD as GL increases;</li> <li>(Higher GL diets lead to) more (harmful) lipids (in blood), so greater risk of atheroma;</li> <li>Atheroma leads to blockage of coronary artery / increased risk of blood clot in coronary artery;</li> </ol>	2 max	Ignore reference to lipids in diet Ignore references to myocardial infarction/heart attack

Question	Marking Guidelines	Marks	Comments
7(a)	<ol> <li>Microvilli;</li> <li>Carrier proteins/co-transport proteins/membrane-bound enzymes;</li> <li>Many mitochondria;</li> </ol>	2 max	Accept large surface area
	3. Many millochondria,		Accept lots of ATP produced
7(b)(i)	Substance that causes an immune response/production of antibodies;	1	Ignore foreign/non-self
7(b)(ii)	<ol> <li>Not lipid soluble;</li> <li>Too large (to diffuse through the membrane);</li> <li>Antigens do not have the complementary shape/cannot bind to receptor/channel/carrier proteins (in membranes of other epithelial cells);</li> </ol>	2 max	
7(c)	<ol> <li>(Vaccine contains)         antigen/attenuated/dead pathogen;</li> <li>Microfold cells take up/bind and present/transport antigen (to immune system/lymphocytes/T-cells);</li> <li>T-cells activate B-cells;</li> <li>B-cells divide/form clone/undergo mitosis;</li> <li>B-cells produce antibodies;</li> <li>Memory cells produced;</li> <li>More antibodies/antibodies produced faster in secondary response/on reinfection;</li> </ol>	5 max	<ol> <li>Reject if in context of injection of vaccine</li> <li>Accept T-cells release cytokines</li> <li>Accept plasma cells for B-cells</li> <li>Ignore T/B in reference to memory cells</li> <li>Must be comparative</li> </ol>

Question	Marking Guidelines	Marks	Comments
8(a)	SAN sends wave of electrical activity / impulses (across atria) causing atrial contraction;	5	Accept excitation
	<ol> <li>Non-conducting tissue prevents immediate contraction of ventricles/prevents impulses reaching the ventricles;</li> </ol>		
	<ol> <li>AVN delays (impulse) whilst blood leaves atria/ventricles fill;</li> </ol>		
	<ol> <li>(AVN) sends wave of electrical activity / impulses down Bundle of His;</li> </ol>		4. Allow Purkyne fibres/tissue
	<ol><li>Causing ventricles to contract from base up;</li></ol>		
8(b)	Atrium has higher pressure than ventricle (due to filling/contraction);	5 max	Start anywhere in sequence, but events must be in the correct order.
	2. Atrioventricular valve opens;		Accept bicuspid, reject tricuspid
	<ul><li>3. Ventricle has higher pressure than atrium (due to filling/contraction);</li><li>4. Atrioventricular valve closes;</li></ul>		<ol> <li>Allow: blood passes through the valve = valve open / blood stopped from passing through the valve = valve closed</li> </ol>
	<ol><li>Ventricle has higher pressure than aorta;</li></ol>		'prevents backflow' is not enough
			Points 1, 3, 5, and 7 must be comparative: eg high <u>er</u>
	6. Semilunar valve opens;		6. Allow aortic valve
	<ol> <li>Higher pressure in aorta than ventricle (as heart relaxes);</li> </ol>		Marks 2, 4, 6, 8 given in the correct sequence can gain 4 marks
	8. Semilunar valve closes;		8. Allow aortic valve
			'prevents backflow' is not enough
	(Muscle/atrial/ventricular) <u>contraction</u> causes increase in pressure;		