

General Certificate of Education

Human Biology 2406

HBIO4 Bodies and cells in and out of control

Mark Scheme

2010 examination – January series

Mark schemes are prepared by the Principal Examiner and considered, together with the relevant questions, by a panel of subject teachers. This mark scheme includes any amendments made at the standardisation meeting attended by all examiners and is the scheme which was used by them in this examination. The standardisation meeting ensures that the mark scheme covers the candidates' responses to questions and that every examiner understands and applies it in the same correct way. As preparation for the standardisation meeting each examiner analyses a number of candidates' scripts: alternative answers not already covered by the mark scheme are discussed at the meeting and legislated for. If, after this meeting, examiners encounter unusual answers which have not been discussed at the meeting they are required to refer these to the Principal Examiner.

It must be stressed that a mark scheme is a working document, in many cases further developed and expanded on the basis of candidates' reactions to a particular paper. Assumptions about future mark schemes on the basis of one year's document should be avoided; whilst the guiding principles of assessment remain constant, details will change, depending on the content of a particular examination paper.

Further copies of this Mark Scheme are available to download from the AQA Website: www.aqa.org.uk

Copyright © 2009 AQA and its licensors. All rights reserved.

COPYRIGHT

AQA retains the copyright on all its publications. However, registered centres for AQA are permitted to copy material from this booklet for their own internal use, with the following important exception: AQA cannot give permission to centres to photocopy any material that is acknowledged to a third party even for internal use within the centre.

Set and published by the Assessment and Qualifications Alliance.

Question	Part	Sub Part	Marking Guidance	Mark	Comments
1	а	i	Seminiferous tubules;	1	Accept phonetic spellings
1	а	ii	Acrosome;	1	Accept phonetic spellings
1	а	iii	Spermatogonium labelled with M	1	Accept M on cell or touching cell
1	b		Oogenesis Produces 1 cell (from meiosis); Polar bodies (formed); Uneven distribution of cytoplasm; Suspended in meiosis/ suspended as (primary) oocyte (until after puberty); Oogenesis is cyclical (sperm production is not); Oogenesis stops at menopause (sperm production does not);	2 max	Accept converse statements for sperm Reject secondary oocyte

Question	Part	Sub Part	Marking Guidance	Mark	Comments
2	а	i	Blocks myosin binding (site) on actin;	2 max	Accept converse statements
			Moves from binding site on actin due to Ca ²⁺ ;		
			Allowing myosin to bind (to actin)/crossbridge formation;		
2	а	ii	Releases myosin from actin;	2 max	Accept coming/moving away
			Causes myosin head to move/cock;		from actin
			Used in active transport of Ca ²⁺ ;		
2	b		Antagonistic muscles /opposing pairs of muscles;	3 max	
			Working across/at joints;		
			Both contract to keep joint/the body at certain angle/upright; Isometric contraction;		
			Only a few fibres contract to avoid fatigue/slow muscle fibres used;		

Question	Part	Sub Part	Marking Guidance	Mark	Comments
3	а		Binds to receptor on target/liver/muscle cell; Causes more transport/carrier proteins to become active/move to (plasma) membrane; Glucose (diffuses) into cells (and lowers blood glucose); (Enzymes in cells) convert glucose to glycogen; Stimulates fatty acids/lipid/fat formation (from glucose); Raises rate of respiration (in cells), using more glucose;	3 max	Reject reference to insulin as an enzyme
3	b	i	27 : 39; 1 : 1.44;	2	2 marks for 1 : 1.44 Accept 0.69 : 1 Accept 9 : 13
3	b	ii	One suitable reason; with explanation; e.g. undiagnosed Diabetic coma/brain cells not enough respiration; Due to low blood glucose/acidosis/dehydration; Heart attacks/coronary heart disease; Due to faster atheroma formation/damage to arteries; Kidney failure; Due to damage to blood vessels;	2 max	

Question	Part	Sub Part	Marking Guidance	Mark	Comments
4	а	i	Older people react slower/longer reaction time;	2 max	
			Non-active people react slower;		
			Older improve with practice/repeats;		
			Older people learn more;		
4	а	ii	One factor; with explanation;	2 max	Accept converse for younger people
			e.g. older people have		poopio
			Slower nerve conduction;		
			So nerve impulses to brain/muscles take longer;		
4	b		Two suitable physiological functions;;	2 max	
			e.g.		
			Decrease in basal metabolic rate/BMR;		
			Weaker contraction of heart muscle/reduced cardiac output;		
			Weaker contraction of skeletal/voluntary muscle;		
			Lower production of hormones/named example;		

Question	Part	Sub Part	Marking Guidance	Mark	Comments
5	а		Potassium channels open (and K ⁺ ions diffuse out); Sodium channels close (and stops Na ⁺ ions diffusion in);	2	Accept references to sodium channels opening; Leading to depolarisation; Accept. Sodium pump (starts) to pump out sodium ions
5	b		(Absolute) refractory (period);	1	
5	С	i	Causes them to contract; And relax;	2 max	
			Rapidly/twitch;		
5	С	ii	Cause continuous muscle contraction; At high force;	2 max	Accept a reasonable suggestion of harm – linked to muscle contraction
			Causing failure to breathe/heart stops pumping/ damage to bones or joints;		

Question	Part	Sub Part	Marking Guidance	Mark	Comments
6	а		More cases of asthma in females than males;	3 max	Accept coefficient reference for correlation
			Greater/same correlation in identical twins;		
			Greater correlation in non-identical males (than non-identical females);		
			No/little correlation in female non-identical twins;		
6	b		(Large) genetic influence;	3 max	Note that absolute numbers cannot be compared due to
			Identical twins have same genotypes and high correlation;		different numbers of pairs of twins.
			Non-identical have same environment and low correlation;		Accept coefficient reference for correlation
			(May be) linked to sex of the individual;		Accept same alleles for same genotype but reject same
					genes

Question	Part	Sub Part	Marking Guidance	Mark	Comments
7	а		Cocaine (binding) changes shape of transporter/prevents dopamine binding;	3	Reject references to active site
			Transporter cannot move (bound) dopamine (through membrane/protein/into cell);		
			Dopamine remains/builds up in synapses (leading to feelings of pleasure);		
7	b	i	Polymerase chain reaction/PCR;	1	
7	b	ii	Single-stranded DNA;	2 max	Reject reference to a single strand of DNA
			Bases/sequence complementary to DNA/gene to be identified;		
			(Radioactively/fluorescent) labelled so that it can be detected;		
7	С		Mutation changes base sequence of gene/DNA;	3 max	Accept references to active site
			(Thus) changing amino acid sequence;		
			Changes tertiary structure/shape of protein/transporter;		
			Cocaine binding site changes/cocaine cannot bind;		
			Dopamine can still bind (and be transported);		

Question	Part	Sub Part	Marking Guidance	Mark	Comments
8	а		All the genes; On a (full/haploid) set of chromosomes/ genes in mitochondria or chloroplasts;	2 max	There are variants on these forms of words.
			OR		
			The base sequences; On a (full/haploid) set of chromosomes/all of the DNA;		
8	b		Pfs is an antigen;	2	
			Causes an immune response/antigen binds to cell/ B cell/causes antibody production;		
8	С		S shaped curve;	2 max	
			No/not much response up to (about) 1 000 units/ no further increase above 10 000 units;		
			Sharp/steep change above (about) 1 000 units; Negative correlation;		
8	d		The protein causes antibody production (in people);	3 max	
			Antibody transferred to mosquito when (infected) human is bitten;		
			Stops <i>Plasmodium</i> infecting mosquitoes;		
			So malaria not transferred to another human;		
			Over time, fewer and fewer mosquitoes carrying malaria;		

Question	Part	Sub Part	Marking Guidance	Mark	Comments
9	а		Daughter (C) does not have the condition/one child doesn't have it; Parents must have been carriers of normal/healthy recessive/if recessive then parents homozygous (so all children affected);	2	Accept converse arguments (If candidates see it purely as a genetic cross diagram) D is heterozygous because E is unaffected; D has cancer, so the cancer allele must be dominant;
9	b		Father (A) would pass on X chromosome to daughter; She is not affected;	2	Accept that if D's X chromosome carried 'it', then E would be affected.
9	С		Only 25/young so don't know if cancer will develop; Don't know if her father was heterozygous or homozygous; If heterozygous, she has a 50% chance of carrying the allele/gene; If homozygous, she has a serious risk of cancer;	2 max	Accept E must be homozygous recessive/have two recessive alleles; So no chance of cancer/no more chance than rest of the population;
9	d		Mutation/mutagen changes DNA of cell; Damaged DNA not repaired/cells not killed/apoptosis doesn't happen; Mutation leads to loss of control/uncontrolled cell division; (Some of these) cells carried to other parts of the body;	3 max	

Question	Part	Sub Part	Marking Guidance	Mark	Comments
10	а		Low sperm count means few sperm enter cervix/uterus/oviducts/fallopian tubes;	2	
			Less chance of sperm getting to egg;		
10	b		84×10^6 ; 4.2×10^6 ;	2	Correct answer 2 marks. May forget dilution factor Formula written out correctly, one mark
10	С		Count for beads should be 35 ×10 ⁶ ;	3 max	Accept converse arguments
			Bead count for A is (36), very close to 35/true value for suspension;		Reject references to range
			Standard deviation greater for method B;		
			Showing greater variation in mean counts (of beads);		
			But SD difference very small as percentage of mean;		
10	d		Method B involved diluting by a factor of 20/more/diluting small sample a lot;	2 max	They have no details of A
			Small errors in dilution give large errors in counts/not many sperm per square to count;		
			Have to count moving sperm;		
			May count twice/miss some sperm that swim out of square;		
10	е		To see if equipment/solutions killed sperm;	2	
			If they did, would reduce sperm count;		
10	f		Yes (no mark) Both below 0.05;	1	Accept below 5%

10	g	Female hormone;	3 max	
		Might exist/build up in muscle/meat (of cow);		
		Hormone not digested/absorbed in mother's gut;		
		Hormone may get from mother to baby/cross placenta;		
		Affect development of testes/have feminising effect/described;		
10	h	Do sperm counts on large number of men;	2	
		Compare against/find the lower end of the range of their sperm counts;		
10	i	Two reasons;; with explanations;;	4 max	These are likely answers but
		e.g.		other valid lines of reasoning should be credited.
		Used method B;		
		Which does not give very accurate sperm counts;		
		Questionnaire used to get information from mothers;		
		They are unlikely to remember what they ate accurately;		
		No information about hormone content of beef;		
		Dosage likely to be important;		

10	j	Suitable reasons, e.g.	4 max	3 max if only Yes or only No addressed.
		Yes because (no mark)		These are likely answers but
		Any risk to unborn child should be taken seriously;		other valid lines of reasoning
		Safe levels of hormones not known;		should be credited.
		Significant difference in sperm count/percent with low sperm count with high beef;		
		(And) low beef sperm count similar to other study;		
		No because		
		Method used/questionnaire to determine beef eaten was very unreliable;		
		(So) no real idea of hormone intake by mothers;		
		Method used to count sperm not very accurate;		
		Don't know what the mean sperm count/% of men with low		
		sperm counts is in population that doesn't have hormone-		
		treated cows;		