

GCE

Human Biology

Advanced Subsidiary GCE

Unit F222: Growth, Development and Disease

Mark Scheme for January 2011

OCR (Oxford Cambridge and RSA) is a leading UK awarding body, providing a wide range of qualifications to meet the needs of pupils of all ages and abilities. OCR qualifications include AS/A Levels, Diplomas, GCSEs, OCR Nationals, Functional Skills, Key Skills, Entry Level qualifications, NVQs and vocational qualifications in areas such as IT, business, languages, teaching/training, administration and secretarial skills.

It is also responsible for developing new specifications to meet national requirements and the needs of students and teachers. OCR is a not-for-profit organisation; any surplus made is invested back into the establishment to help towards the development of qualifications and support which keep pace with the changing needs of today's society.

This mark scheme is published as an aid to teachers and students, to indicate the requirements of the examination. It shows the basis on which marks were awarded by Examiners. It does not indicate the details of the discussions which took place at an Examiners' meeting before marking commenced.

All Examiners are instructed that alternative correct answers and unexpected approaches in candidates' scripts must be given marks that fairly reflect the relevant knowledge and skills demonstrated.

Mark schemes should be read in conjunction with the published question papers and the Report on the Examination.

OCR will not enter into any discussion or correspondence in connection with this mark scheme.

© OCR 2011

Any enquiries about publications should be addressed to:

OCR Publications PO Box 5050 Annesley NOTTINGHAM NG15 0DL

Telephone: 0870 770 6622 Facsimile: 01223 552610

E-mail: publications@ocr.org.uk

(Quest	ion	Expected Answers	Marks	Additional Guidance
1	(a)	(i)	probability / likelihood / chance (that an individual will develop, breast cancer / the disease); by given age / in a lifetime / AW; idea of additive risk / AW;		DO NOT CREDIT risk as it is given in the stem
			add or additive note / //// ,	2 max	
		(ii)	as age increases the (cumulative) risk increases; two ages (in years) and two percentages;		e.g. from 0% at age 30 to 65% at age 70 CREDIT other correct pairs of comparative figs % must be given age % 30 0 40 11 50 38 60 52 70 65 CREDIT calculations of increased risk instead
				2	of a pair of figs ACCEPT + or -1 for 11 (at age 40) and 65 (at age 70)
		(iii)	sporadic not associated with inherited genes / caused by gene mutations acquired during woman's lifetime / caused by somatic mutation / AW;	_	CREDIT allele for gene throughout ACCEPT DNA mutations
			familial associated with inherited genes / caused by germ line mutation / AW;	2	'familial is caused by inherited gene(s) and sporadic isn't' = 2 marks

Qı	uesti	on	Expected Answers	Marks	Additional Guidance
	(b)	(i)	selection of a, group of individuals / participants / AW, (from a larger population);		DO NOT CREDIT sample chosen at random – rewording of stem
			each individual chosen, by chance / using random number table / using random method described;		e.g. numbering population, putting numbers into a computer, computer randomly selects sample / AW IGNORE randomly unqualified
			each individual is, equally likely to be chosen / chosen without bias;	2 max	
		(ii)	sample may not be representative of population / described / AW;	1	e.g. may all be same gender / age
	(c)	(i)	40;;		If answer incorrect or incorrectly rounded: ALLOW 1 mark ONLY for: either 42 - 25 or 17 42 42 or 40.4 or (40.47691) correct answer unrounded or
				2	ecf if figures read incorrectly from graph

Ques	tion	Expected Answers	Marks	Additional Guidance
(c)	(ii)			Mark the first 3 answers IGNORE more precautions taken
		greater use of screening / earlier diagnosis;		TOTOTE More productions taken
		improvement in treatment / described / increased use of tamoxifen®;		
		breast cancer, has higher profile / more publicity / better education / better understanding of lifestyle risks / AW;		ACCEPT people are more aware of breast cancer or more campaigns for self
		better understanding of the molecular causes of breast cancer / AW;	3 max	checking
(d)		idea that not all women with BRCA-1 will acquire the second mutation;		
		idea that some women are not exposed to (named) mutagen;		e.g. alcohol / tar / smoking / X-rays / carcinogens
		description of specific mutation in, p53 gene / proto-oncogene;		
			2 max	
(e)	(i)	cell death;		ACCEPT 'cell suicide'
		that is controlled / programmed / triggered by signals :		ACCEPT correct description of apoptosis
		that is, controlled / programmed / triggered by signals;	2	'programmed cell death' = 2 marks

Question		Expected Answers	Marks	Additional Guidance
(ii)	T1 D1 T2 D2 T3 D3 T4 D4 T5 D5 T7 D7	radiotherapy; uses, gamma rays / ionising radiation to destroy cancer cells; lumpectomy / surgery; removing tumour and surrounding tissue; mastectomy / surgery; removing whole breast; hormone treatment / tamoxifen [®] ; blocking oestrogen receptors; immunotherapy / herceptin; antibody that blocks receptors for growth factors; complementary therapy; named therapy described;	4 max	Mark first two treatments and descriptions given CREDIT phonetic spelling of treatments DO NOT CREDIT radiation on its own / radio waves e.g. aromatherapy / homeopathy / hypnotherapy / using herbalistic remedies / acupuncture
		Total	22	

C	Question		Expected Answers				Additional Guidance
2	(a)	(i)	macrophage(s); endocytosis; antigens; cell, surface / plasmic complementary; T helper;	a, membrane ;		6	ACCEPT phonetic spelling throughout ACCEPT antigen(s)
		(ii)	cell or molecule	role in specific immune response			Award 1 mark per row
			B cell	binds to a specific antigen or divides by mitosis / clones / clonal expansion or differentiates into, plasma cells / memory cells	;		ACCEPT for humoral immunity
			cytokine	stimulates, B / T, cells to divide or involved in cell signalling	;		
			plasma cell	produces antibodies	;		
			memory cell	remains in circulation or recognises antigen if it enters body a second time / AW or develops immediately into plasma cells during secondary response / AW	;		
						4	

Ques	tion	Expected Answers	Marks	Additional Guidance
(b)	(i)	acquired / artificial;		
		passive;	2	
	(ii)	no, immune response / memory cells made / antibodies made, in body;		
	(")	(injected) antibodies broken down by liver;		
		(injected) dimined are trend de mines, invert,	2	
(c)		36;;		ACCEPT 36.4 for 2 marks
				If answer incorrect, ALLOW 1 mark for correct working
				7 x 520 or 0.07 x 520
			2	
(d)		blood products screened (for viruses);		CREDIT in context of HIV / hepatitis
			1	

Question	Expected Answers	Marks	Additional Guidance
(e)	rubella / German measles, is caused by a virus;		
	Rubella (virus) can cross placenta / AW;		
	can cause problems during development of the, baby / AW;		needs to be clear that problems occur during development in uterus
	named defect;		e.g. brain damage, deafness, heart defects and eye defects DO NOT CREDIT mental illness /
	can cause, miscarriage / still birth / AW;		learning difficulties as these develop after birth
		3	'the rubella virus crosses the placenta' = 2 marks (MP 1 and MP 2)
	Total	20	

C	Quest	Question		Expected Answers	Marks	Additional Guidance
3	3 (a) (i)		the	the number of <u>new</u> cases ;		
		(ii)	1 2 3 4	trends higher incidence rate in Africa (than in Europe); incidence rate in Europe, is stable / shows slight decrease; incidence rate in Africa rises then falls; pairs of comparative figs to support one statement;		ACCEPT 'peaks at 2004' 2 years and 2 rates per 100 000 rates per 100 000, for Africa or Europe / Africa and Europe in the same year CREDIT processed data IGNORE reasons for the fact that both African and Europe show a decrease between 2004 and 2008
			5 6 7	reasons for differences in Africa higher prevalence of HIV / AW; higher prevalence of malnutrition / AW; weakened immune system;		ora for Europe
			8	more homelessness / overcrowded living conditions / poor living conditions / AW;		
			9	lack of education about how TB spreads;		ACCEPT descriptions of how poor hygiene leading to infection
			10	lack of access to good healthcare qualified;		e.g. fewer doctors / poor transport to reach clinics
			11 12 13	lack of availability of vaccine; lack of availability of antibiotics; more resistant strains;		
				max 5 for reasons	8 max	

Question		Expected Answers		Additional Guidance	
(b)	(i)	to check if the, drug / vaccine, is effective / AW; to find out if there are any harmful side effects; to find out the correct dose;		ACCEPT find out if drug works	
	(ii)	idea of a sudden increase in the number of new cases / spread / outbreak, of the disease; in a specified area / region / country;	2 max	IGNORE population	
	(iii)	enough people are vaccinated / immune, to prevent the spread of the disease / AW; the risk of an infected person passing on the pathogen to a susceptible person is small / AW;	2		
		Total	15		

Question		ion	Expected Answers	Marks	Additional Guidance
4	(a)	(i)	slow onset / AW; lasts a long time / no cure; progressive / AW;	2 max	
		(ii)	chronic bronchitis; emphysema;	2	DO NOT CREDIT asthma (as given in the question) ACCEPT phonetic spelling of both
		(iii)	lung function tests / spirometry / peak flow meter measurements / lung volume measurements ;	1	CREDIT named test values such as FVC, FEV ₁ or PEFR
	(b)		COPD reduces surface area for gas exchange / AW; (extra oxygen needed) to increase rate of diffusion of oxygen into blood / AW; for (aerobic) respiration; idea of to reduce fatigue / provide sufficient energy for person to be active / AW;		
				2 max	

Question		Expected Answers	Marks	Additional Guidance
(c)	1 2 B3 B4 B5 B6 B7 A8 A9 A10	causes inflammation; scar tissue formed; goblet cells, produce / secrete, more mucus; cilia become, paralysed / damaged / prevented from working / AW; mucus, not removed (by cilia); (mucus) becomes infected; airways become narrowed / blocked; large numbers of, macrophage / neutrophils, in alveoli; produce elastase; alpha-1-antitrypsin / inhibitor of elastase, is inactivated by chemicals in smoke;	Marks	Additional Guidance ACCEPT phagocytes
	A11 A12 A13	elastin / elastic fibres / protein, in walls of alveoli broken down; alveoli become, enlarged / damaged / burst / prevented from stretching and recoiling / AW; less surface area for gas exchange;	7 max	
	Q	QWC – for a balanced account ;	1	2 MP from B3 – B7 and 2 MP from A8 – A13
		Total	15	

C	Question		Expected Answers	Marks	Additional Guidance
5	(a)		non infectious;	1	ACCEPT non-contagious
	(b)	(i)		-	Mark answers on crossword grid
			1 down atheroma; 2 down endothelium;		ACCEPT phonetic spelling for all
			3 down coronary artery;	3	
		(ii)	6 across – myocardial infarction a heart attack / described ;		
			4 down – angina pectoris pain (in, chest / arm / jaw) caused by, CHD / description / AW;		Must refer to pain and reference to CHD
			5 down – thrombus a blood clot / described;	3	DO NOT CREDIT causes blood to clot as it shows a confusion with thrombin

Question	Expected Answers		Additional Guidance
(c)	atheroma / plaque, grows bigger / narrows lumen of artery; (plaque) ruptures endothelium / creates rough surface; red blood cells stick to surface forming a blood clot / AW; atheroma / plaque / blood clot, breaks off / is transported in the blood; blocks <u>coronary</u> artery;		
	 cardiac, muscle / cells / tissue does not receive,	5 max	ACCEPT heart muscle / cells / tissue ACCEPT heart muscle / cells / tissue
	QWC – correct order of events ;	1	1 MP from 1 – 3 and 1 MP from 4 – 5 and 1 MP from 6 – 7
(d) (i)	a machine that restarts the heart / AW; by giving an electric shock / AW;	2	ACCEPT electric current / impulse / charge / apply electric voltage
(ii)	idea that defibrillator can be used immediately / AW; idea that the longer the delay the less chance of survival / AW; idea that stress of exercise / over-exertion, more likely to result in cardiac arrest; idea that defibrillators accessible to large number of people;	2	
	Total	17	

	Question		Expected Answers	Marks	Additional Guidance
6	(a)		local anaesthetic applied to skin; (long hollow) needle inserted; through wall of, abdomen / uterus / womb; ultrasound scan used to guide needle; into amniotic sac; (amniotic), fluid / cells withdrawn;	4 max	DO NOT CREDIT stomach ACCEPT via vagina / via cervix DO NOT CREDIT placental tissue
	(b)	(i)	older mother (over 35); genetic disease in the family; increased risk of, chromosomal, abnormality / named chromosomal abnormality; has had several, miscarriages / still births / perinatal deaths / AW; has received result from a scan that suggests there may be a problem / AW;	2 max	e.g. cystic fibrosis e.g. Down's / Klinefelter's / Turners
		(ii)	chorionic villus sampling / CVS; can be done earlier than amniocentesis / AW; results of test available in shorter time;	2 max	ACCEPT phonetic spelling IGNORE disadvantages of CVS
	(c)	(i)	Down's syndrome; spina bifida; congenital heart, abnormalities / defects; cleft palate; fetal hydrops / fetal alcohol syndrome;		DO NOT CREDIT heart disease ACCEPT other correct named conditions
				1 max	

Question	Expected Answers	Marks	Additional Guidance
(ii)	Down's syndrome; Turner's syndrome; Klinefelter's syndrome;	2 max	ACCEPT other named chromosomal mutations such as Fragile X / Edward's syndrome
	Total	11	

OCR (Oxford Cambridge and RSA Examinations)
1 Hills Road
Cambridge
CB1 2EU

OCR Customer Contact Centre

14 – 19 Qualifications (General)

Telephone: 01223 553998 Facsimile: 01223 552627

Email: general.qualifications@ocr.org.uk

www.ocr.org.uk

For staff training purposes and as part of our quality assurance programme your call may be recorded or monitored

Oxford Cambridge and RSA Examinations is a Company Limited by Guarantee Registered in England Registered Office; 1 Hills Road, Cambridge, CB1 2EU Registered Company Number: 3484466 OCR is an exempt Charity

OCR (Oxford Cambridge and RSA Examinations) Head office

Telephone: 01223 552552 Facsimile: 01223 552553

