

Mark schemes

Q1.

- (a) 1. Changes tertiary structure;
Reject change in tertiary structure of receptor.
2. No longer complementary (to receptor);
Reject 'active site' or reference to enzyme or substrate.

2

- (b) 1. Less/no AKT activated;
2. Fewer/no vesicles move to membrane

OR

Fewer/no (channel) proteins in membrane;
Accept 'fuse with membrane'.

3. Less/no glucose diffuses into cell (so high blood glucose);

3

- (c) 1. High concentration of glucose in blood/filtrate;
Accept tubule for filtrate.
2. Not all the glucose is (re)absorbed at the proximal convoluted tubule;
Reject no glucose is (re)absorbed.
3. Carrier/co-transport proteins are working at maximum rate

OR

Carrier/co-transport proteins/ are saturated;

*Accept all carrier/co-transport proteins are 'in use'
but reject all carriers are 'used up'.*

Accept symport for carrier protein.

Accept not enough carrier proteins to absorb all the glucose.

3

[8]**Q2.**

- (a) 1. (Attaches to receptors on target cells and) activates/stimulates enzymes;
Reject 'produces enzymes'.
2. Glycerol/amino acids/fatty acids into glucose;
Reject 'glucagon converts' as context suggests enzyme action.

*Ignore lipids/fats/proteins but reject glycogen.
Reject occurs in pancreas.*

2

- (b) 1. Correct answer of 3.24 = **2 marks**;;
2. Incorrect but multiplies by 34 (with decimal point in any position) = **1 mark**
OR
Incorrect but shows sequence 324 = **1 mark**
OR
3.2 = **1 mark**;

2

- (c) 1. (More) insulin binds to receptors;
2. (Stimulates) uptake of glucose by channel/transport proteins
OR
Activates enzymes which convert glucose to glycogen;
*Accept activates enzymes for glycogenesis.
Reject active transport.
Accept carrier proteins or GLUT 4 for channel proteins.
Accept insulin stimulates addition of channel proteins in membranes.*

2

- (d) 1. Less/no ATP is converted to cyclic AMP/cAMP;
2. Less/no kinase is activated;
3. Less/no glycogen is converted to glucose
OR
Less/no glycogenolysis;
*If no indication of less/no for any of the mark points award **max 2 marks**.
Accept all marks in context of adrenaline.
Ignore gluconeogenesis.*

3

[9]

Q3.

- (a) 1. (Usually) Type II produce insulin;
2. Cells / receptors less sensitive / responsive (to insulin)
OR
Faulty (insulin) receptors;
3. (Treated / controlled by) diet / exercise;
2. *Accept: cells / receptors do not respond.*
2. *Accept: 'fewer receptors'*
3. *Accept: (Treated / controlled by) weight loss / medication / drugs.*
3. *Ignore: diabetes is caused by diet / exercise.*

2 max

(b) Tick in box 4

1

Q4.

- (a) 1. Treat with insulin (injection/infusion);
2. (Control) diet/control sugar intake;
2. *Accept '(regular) exercise'*

2

- (b) 1. Damage to autonomic (nervous) system in diabetic rats;
2. (Could be) pressure receptors/baroreceptors (in arteries/aorta/carotid body) don't work as well;
3. Damage to medulla

OR

Change in (number of) impulses to/from medulla;

4. (When pressure drops damage to) sympathetic system, so doesn't speed up (enough);
5. (When pressure rises damage to) parasympathetic system, so doesn't slow down (enough);

*Accept answers in terms of what happens in healthy rats **only** if then qualified by statement these things don't happen/happen less in rats with diabetes*

- 1. Accept damage to ANS
2. Ignore reference to chemoreceptors
4 and 5. Appropriate system and effect on heart rate both needed*

4 max

[6]