# Mark scheme

Qι	Question		Answer/Indicative content	Marks	Guidance
1	а	i	a weakened / attenuated / dead , form of (polio) <u>virus</u> √	1 (AO 2.1)	ALLOW fragments / antigens , of virus IGNORE DNA / RNA IGNORE small amount / dormant / antibodies IGNORE cells  Examiner's Comments  Most candidates were aware that the vaccine would contain a dead or weakened version of the polio pathogen but only those that responded to the contextual information in the question by stating that the polio pathogen was a virus were given a mark. Suggestions relating to DNA or RNA were not given because they were not consistent with the context of 1956.
		ii	involved in clonal selection  (cell surface) receptors (on  T-cell) bind to, antigens /  (named) APCs \(  produce / release, interleukins / cytokines \(  (T-helper cells /  interleukins) stimulate phagocytosis \(  (T-helper cells /  interleukins), stimulate clonal expansion \(  T-killer cells destroy infected cells \(  differentiate \)  T-memory cells allow rapid  secondary / AW, response \(  \end{align*}	4 max (AO 1.2)	1 IGNORE activation (of T-helper cells)  5 ALLOW cause, mitosis / proliferation / division, of, T/B, cells  5 ALLOW activate, B / T-killer, cells  8 ALLOW description, e.g., T-memory cells rapidly produce T-killer cells if pathogen returns  8 IGNORE produce antibodies more quickly  IGNORE regulator cells  Examiner's Comments  This question differentiated very well between candidates of differing abilities. Many candidates were aware that T-cells are involved in clonal selection and that they interact with APCs. However, many did not gain the 2 <sup>nd</sup> marking point because they did not refer to receptors on the T-cells. It was relatively common to award marks for the release of interleukins and the stimulation of clonal expansion, or some detail thereof. It was also common for answers to discuss the role of T-memory cells in the secondary response, but use of the key term 'differentiate' was less frequent. Reference to stimulation of phagocytosis was seen less often and, although there were many attempts

				to describe the role of T-killer cells, most of these were not given because they suggested a direct action on the pathogen rather than via infected host cells.  Those responses that did not score well tended to be unclear about the distinction between T and B-lymphocytes.  Misconception
				In the context of the humoral immune response, 'activate' and 'differentiate' are important key terms that candidates ought to be able to use correctly in their answers.
				ALLOW any answer in the range 82 to 86 ALLOW 1 mark for 80 or if correct answer given to more than 3 significant figures IGNORE sign
				If answer is incorrect, <b>ALLOW</b> 1 mark for <b>either</b> of the following:
				correct answer to 3380–3600 - 500–600 =
		FIRST CHECK ON ANSWER		or
	LINE If answer = 85 or 84.9 (%) award 2 marks  correct reading from graph and subtraction 3440 − 520 = 2920 √  correct calculation  2880 × 100 = 84.7 √ 3400	If answer = 85 or 84.9 (%) award 2 marks		candidate's values substituted into the following equation change x 100 = correctly processed answer original
b		i and subtraction	2 (AO 2.2)	Examiner's Comments
		(. 10 2.2)	Most candidates were able to correctly read the graph and calculate a percentage decrease. Answers given to more than 3 significant figures were given only one mark because that level of accuracy is not plausible given the graph they had been presented with. Candidates must understand that the lowest level of accuracy in the inputs of a calculation will determine the level of accuracy in the answer (M1.1).	
				Calculation: Percentage change = ((no. of cases in 1960 - no. of cases in 1956) / no. of cases in 1956) x 100
				Percentage change = ((3380 - 520) / 3380) x

				100
				Percentage change = 84.6% or 85%
				OCR support
				The maths skills handbook offers further support on how to calculate percentage change and on the correct number of significant figures.
				Additional support on all the maths skills can be found on 'Maths for Biology' resources on 'Teach Cambridge'.
				Mark as prose
				ALLOW more people would have had the vaccine by then / time needed to get all children vaccinated / slow distribution
			<b>ALLOW</b> vaccine might have been introduced towards the end of 1956	
		uptake might not have been ,		IGNORE vaccine takes time to have affect
		immediate / high in 1956 ✓		Examiner's Comments
	ii	some cases in 1956 might have occurred before vaccine introduction / 1957 was first full year of vaccine √	2 (AO 3.2)	Perhaps helped by recent lived covid experience, many candidates were able to correctly suggest that more children would have been given the polio vaccine by 1957. However, answers that suggested that this would allow time for the vaccine to have an effect were not given. Fewer candidates suggested that the vaccine may not have been introduced until part-way through 1956. Many answers responded to the shape of the graph and suggested that starting in 1957 would allow a bigger change to be seen. Such responses are contrary to a key scientific principle and were not given.
			1	Examiner's Comments
	iii	use a <u>log</u> (arithmic) scale √	(AO 3.3)	Fewer than one in four candidates recognised the need for a logarithmic scale.
		(because of virus in sewage) those in London / they are ,	2 max	IGNORE answers that discuss differences between children and adults
	İV	more at risk / AW √ <b>ora</b> vaccination rates , low(er) in	(AO 2.5)	IGNORE ring / herd , vaccination
		vaccination rates, low(ei) iii		

			London / high(er) outside London √		ALLOW vaccination rates already, high / >90%
			idea that vaccinating people outside London might be a waste of money √		ALLOW e.g. cheaper and more likely to make a difference IGNORE 'cheaper' unqualified
					Examiner's Comments
					The best responses stated that vaccinating children outside London would be a waste of money as their risk of infection was low. However, only around 10% of responses achieved both marks. Many answers focused on ring vaccination preventing spread beyond London or stated that spread within London would be rapid because of a high population density, ignoring the important rationale of protecting those most at risk. Only a few candidates noted the high vaccination rates (of over 90%) in the UK, indicating that children outside of London were unlikely to need a further vaccination against polio.
			Total	12	
2	а	i	Ant climbs to high point so  Ants bite into branch/leaf  1 spores dispersed a, large / wide, distance √ 2 many / other / uninfected, ants can be infected √ increased / rapid, fungal growth / spread of infection, as it is, warmer / humid / windy √ ants, secure / still, (ready) 4 for fungal, growth / ease of feeding / spore dispersal √	max 2	infected or spreading the fungus  e.g. 'ant climbs to high point which has more air movement so spores travel further' = mp1 and 3  ALLOW ant stays still so, other / uninfected, ants could, become infected / come into contact with spores 4 IGNORE provides ant with more material to, digest/feed on  Examiner's Comments  Most candidates recognised the main types of behaviour that underpinned the two suggestions and clearly referred to this at the beginning of their answers, e.g. climbing to a high point and biting on a branch. Many answers referred to the infection spreading through the tree as well as the ants.  Candidates should make sure they constantly refer to all the information given in the stem of a question asit stated in the opening sentence that the fungus was a disease in ants.

			Assessment for learning
			Recognition and discussion of disease nomenclature would have helped to emphasise the restriction of the disease to ants and not to other organisms.
ii	Level 3 (5–6 marks) Detailed use of the data in Fig. 2.2 and Fig. 2.3 to support or not support the student's conclusion,describing the relationship between infection rates and both rainfall and temperature AND detailed analysis of infection data from Fig. 2.2 and temperature and rainfall data from Fig. 2.3. There is a well-developed line of reasoning which is clear and logically structured. The information presented is relevant and substantiated.  Level 2 (3–4 marks) Use of the data in Fig. 2.2 and Fig. 2.3 to support or not support the student's conclusion, describing the relationship between infection rates and both rainfall and temperature AND analysis of infection data from Fig. 2.2 and temperature or rainfall data from Fig. 2.3. There is a line of reasoning presented with some structure. The information presented is relevant and supported by some evidence.  Level 1 (1–2 marks) Reference to supporting or not supporting the student's conclusion. Reference to the data in Fig. 2.2 and Fig. 2.3, describing a relationship between infection rates and either rainfall or temperature AND simple analysis of the data in Fig. 2.2 or Fig. 2.3.	6	Indicative points can include:  Data supports because: Infection rates are affected after rainfall  Rainfall high in May to July, infections peak in Sept Highest numbers of infections are in Sept to Oct, 1-3 months after heavy rainfall  Temperature has no effect because  Temperatures are highest May to September but infection rates vary / infection rates only start to increase / peak in Sept to Oct Temp lowest Jan-Feb but infection rate varies Temp decreasing from Sept but infections, are high in Sept and Oct / vary Temp constant between July-Sep but infections vary/increase  Data does not support because:  Infection rates not affected by rainfall  Infection rates not affected by rainfall  Infection rates high(er) Peak infections in Sep-Oct when rainfall decreased long before. Peak rainfall in (end of) May but June has lowest infection number Infection number increases before (and during) heavy rainfall

There is an attempt at a logical structure with a line of reasoning. The information is in the most part relevant.

#### 0 mark

No response or no response worthy of credit.

Infection rates are affected by temperature

- Infection rates increase as temperature increases / ORA
- Infections peak after 3 or 4 months of sustained high temperatures
- Infections increase in July-Sep when temperature is high
- Infection rates low in Nov/Dec and temperature is low

### General

- Data from only one year (2017)
- Data from only one country (Taiwan)

Examples of when the communication statement would be met include:
Correct use of units for data provided
Clear reference to the student's conclusion

## **Examiner's Comments**

Candidates confidently interpreted data from Figure 2.2 and Figure 2.3 with respect to rainfall, often using well estimated data values to back up their statements. Answers regarding the effect of temperature had less clarity with some candidates not referring to the data or reading the scale incorrectly on Figure 2.3 and providing rainfall data instead of temperature. Good answers discussed the student's conclusion with a clear description of the increase after heavy rainfall, with figures and then the relevance of temperature, with figures.

## Exemplar 1

The data doesn't suppose the students conclusion, this is because after the howy rangall in.
Along the number of infertions in June after this have rainfall is the second length at 5, therefore, the student is imported by suying injections increase.
Os doing the howeist rainfall the number of infertions decreased. (nears)
Again the data doesn't support the student as the student doesn't support the student as the student of infertional, however, in the hotest manth, Agust (25°C) the injection inscreased in the pellowing two menths both at 38 injections, this suggests that the hotes the confirmment the higher number of infertions.

This exemplar separates the two components of the question with a paragraph and begin each paragraph with a clear statement of their opinion. The answer is succinct but focuses

				immediately on a relevantpoint to back up their opinion. Correct data from both figures is provided with units. The response scored 6 marks.
				DO NOT ALLOW more than one answer for each type of pathogen
				ALLOW protist/protozoa for 'protoctist'
				Examiner's Comments
	b	Communicable Disease Pathogen Influenza virus Malaria protoctist Black sigatoka in bananas fungus	3	Well answered with most candidates correctly stating the pathogen for influenza and malaria. The most common error was confusing Protoctista with Fungi for Black Sigatoka. The spelling for Protoctista was variable and phonetically correct spelling was accepted.
		<b>√√√</b>		Assessment for learning
				Discussing the etymology of these words and treating the Latin names with a phonics approach often helps with correcting poor spelling.
		Total	11	
		disease ring rot √  type of pathogen bacteria √		The mark for pathogen can only be awarded when it is correctly matched with the disease ALLOW other correct pairs to those listed  ALLOW brown rot / blackleg / pink eye / common scab ✓
3		OR	1	ALLOW phonetic spelling e.g. (potato) blate
		disease (potato / late) blight √ type of pathogen protoctista √		ALLOW protista / protoctist / phonetic spelling e.g.protocotist etc.  ALLOW disease black dot / (common / yellow) rust / early blight / powdery mildew / dry rot √
				type of pathogen

					fungus√ OR disease (potato) leaf roll, (potato) leaf mosaic √ type of pathogen virus √ IGNORE tomato / tobacco mosaic IGNORE black sigatoka (as it is a disease of bananas not potatoes)  Examiner's Comments  There were several correct possible responses which were mentioned commonly, including ring rot being caused by a bacterium and potato blight being caused by a Protoctista. However, there were also many candidates who were unable to be credited marks as they thought potato blight was caused by a fungus.
			Total	2	
4	а		FIRST CHECK ON ANSWER LINE If answer = 10, award 2 marks √ √  9.5 / 9.5044919  OR  (346 x 0.254 =) 87.884 (patients diagnosed with HAP) / (87.884 x 0.146 =) 12.831064 (patients died from <i>P. aeruginosa</i> infection) / 12.831064 ÷ 1.35 √	2	ALLOW other decimal places/sig figs  ALLOW 1 mark if 88 or 13 is seen  Examiner's Comments  Many candidates were given 1 mark here by providing working which showed they were able to correctly calculate that 87.884 patients were diagnosed with HAP and/or 12.83 had died. However, only a few candidates were given 2 marks for then being able to calculate 35% higher.  Calculation:  People diagnosed with HAP in ICU = 346 x 25.4% = 87.884  People died with HAP = 87.884 x 14.6% = 12.83  The number of people died in 2012 = 12.831 x 135 % = 9.504  Nearest whole number = 10
	b		Suggest <b>Max 2</b> 1. higher / more, costs √	Max 3	Max 2 if answer limited to 'suggest' MPs OR 'explain' MPs
	l	l			

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	use of, more antibiotics / 2. different antibiotics / 'new' antibiotics √		ALLOW private room for isolation
	longer hospital stays / 3. longer to recover / more people hospitalised √		<b>ALLOW</b> examples e.g. increased, hand washing / cleaning the hospital environment, extra use of, antiseptic soaps / gloves / gowns
	isolation of infected people / prevention of other 4. people getting infected with antibiotic resistant		<b>ALLOW</b> pandemic / 'spread <b>more/very</b> , easily'
	bacteria √ need for extra hygiene		'Due to higher infection rates, there are much higher costs due to people staying in hospital longer' = MP8, MP1 and MP3
	oractices / AW √		Examiner's Comments
	causes, disability / life 6. changing illness / organ failure √ 7. more / increased deaths √ outbreak / increased rate / 8. increased spread (of infection) √		Successful responses to this question explained the consequences for the hospital of antibiotic resistance (as the question asked). Less successful responses explained how antibiotic resistance happens/comes about, showing that many misunderstood the question or did not recognise the command words in the stem. These candidates discussed natural selection causing, antibiotic resistance to increase, or how the bacteria wouldn't be able to be treated and talked about contributing issues such as staff shortages. More successful responses used comparative words/statements: 'more costly' rather than 'costly', 'more deaths' rather than 'deaths', and 'spread more easily' rather than 'would spread'. 'New antibiotics', 'more deaths' and 'more people hospitalised' were the most common correct responses.
			ALLOW DNA for, genes / genome
С	choosing medicines / drugs / treatments, based on a person's, genes / genome / genotype / genetic profile / base sequence √  idea of medicine / treatment created for a specific patient matched to the bacterial infection they have √	1 max	Examiner's Comments  Many candidates were able to correctly link personalised treatment to an individual's genome. Those giving the idea of matching the bacterial infection to a specific antibiotic sometimes were not given the mark because they did not link it to a specific person's needs, i.e. the specific infection they had. Most responses were just generalisations about the drug being specific to the individual, which was not given the mark. A common incorrect response was to state 'based on their immune system' rather than a link to a person's individual 'genome'.

		Total	6	
5		(engulfed) pathogen inside, vesicle / phagosome √  lysosomes fuse/combine with phagosome / (phagocytic) vesicle formed  OR phagolysosome is formed / created √  enzymes are released / secreted / move in (to the , vesicle / phagolysosome)  OR enzymes can now act upon pathogen √	2 max	IGNORE vacuole  IGNORE attach / bind  ACCEPT lysozymes for enzymes  Examiner's Comments  This question was a good discriminator, with more successful responses given 2 marks. The most common errors was that the pathogen is engulfed inside the phagocyte cytoplasm and that the lysosome fuses directly with the pathogen. Many candidates correctly used the term phagolysosome and were given the marks.  Misconception  Although candidates were using key terminology, they did not fully understand the sequence of events and often confused this response with the action of antibodies on pathogens.  Exemplar 3
		Total	2	
6		В√	1	Examiner's Comments  Only a few candidates were able to identify the correct organism as a prokaryote and select B as the right response. The additional guidance provided in the specification should be used to make sure that all key examples of specific organisms are covered in teaching. Specification point 4.1.1 (a) lists ring rot as an example of bacterial pathogen. The most common incorrect response was A.

		Total	1	
7		D√	1	Examiner's Comments  Most candidates got this question right with only a few not selecting D.
		Total	1	
8		B√	1	Examiner's Comments  This question was well answered with most candidates making the link between callose and a physical defence and selecting B as the correct answer.
		Total	1	
9		В √	1	Examiner's Comments  The majority of candidates selected the correct response B. The most common incorrect response was C. Some candidates may have been confused by the reference to bacteria and fungi in option C. Fungi are usually treated with antifungal drugs.
		Total	1	
10		A√	1	ALLOW if labelled correctly on image
		Total	1	
11	а	mucus traps , pathogen / virus √  cilia , move / AW , mucus / pathogens (away from lungs) √	2 (AO1.2)	ALLOW pathogen / virus / microorganism , sticks to mucus IGNORE germs / bacteria / microbes  ALLOW ciliated , cells / epithelium , waft mucus out of the body  Examiner's Comments  Most candidates scored at least 1 mark here and around half achieved both marks. Each of the marking points was seen equally often. The first marking point was attempted more often but many candidates merely stated that the mucous membranes trapped the pathogen, without explicitly stating that it was the mucus, and so were not given the mark. A few referred to cilia as microvilli or pili.
	b	Event Letter or letters	5 (AO2.2)	DO NOT CREDIT if any incorrect or ambiguous letters appear in a box  IGNORE D

		Antigen presentation A Clonal expansion B and D Clonal selection A High T-helper cell activity Highest number of memory cells  E			IGNORE A / E  Examiner's Comments  This was a challenging question that differentiated well between candidates. Most candidates scored 1 or 2 marks, usually for a combination of the first row and one other. Most candidates recognised that antigen presentation occurs after the first exposure to the antigen. Fewer realised that clonal selection also occurs at this point. Relatively few answers accounted for clonal expansion and high T-helper cell activity happening after both the first and second exposures to antigen. Many candidates assumed that the highest number of memory cells would be present at the end of the timeline and did not account for the decline in memory cells in the blood. A number of candidates answered with a single letter in each box, perhaps suggesting they had read the stem of the question carefully. Less than 1 in 20 scored all 5 marks.
С	i	artificial <b>and</b> passive √		1 (AO2.1)	
	ii	similarity (max 2)  two , variable regions / binding sites √ hinge region √ disulfide , bond(s) / bridge(s √ four , polypeptides / chains √ difference (F <sub>ab</sub> has) shorter , constant region / heavy chain √	•	3 Max (AO2.1)	IGNORE prompt lines, mark first two responses  IGNORE constant regions (as a similarity)  ALLOW no F <sub>c</sub> region ALLOW ora for antibody  Examiner's Comments  This question differentiated well, although candidates found it challenging. Around half of the answers got a single mark for a similarity, most often for hinge region or disulfide bridge. Many candidates achieved the first marking point, while others did not because they did not state that there were two of variable regions/binding sites. The fourth marking point was less regularly seen but, when attempted, was usually achieved.

			The difference mark was rarely scored. Most candidates who had the right idea stated that the F <sub>ab</sub> fragment had <i>no</i> constant region (or <i>no</i> heavy chain). Very few candidates seemed to be aware that the constant region includes part of the upper 'arms' and those that did appeared to be centre-specific. Candidates that gained the difference mark rarely gained both of the other marks so all 3 marks were given to fewer than 1 in 20 responses.
d	widespread / AW , use ✓  at low dose / unfinished course ✓  natural selection / antibiotic is selective agent ✓  AVP ✓	3 (AO1.1)	ALLOW have been used a lot / overprescribing / use in agriculture / used to treat viral infections  CREDIT description that includes genetic variation and differential survival and passing on traits IGNORE immune  CREDIT sharing of , DNA / plasmids (containing resistance gene) , between bacteria ALLOW horizontal (gene) transmission  Examiner's Comments  Most candidates scored at least 1 mark for this question, with around 1 in 10 scoring all 3 marks. Many candidates devoted their entire answer to a description of natural selection, gaining 1 mark only. The question asked candidates to explain why some bacteria are now resistant, not how this resistance evolved. So, without reference to overprescription, often at a low dose, the question was not fully answered. As natural selection was not the focus of the question, references to bacterial immunity to antibiotics was ignored. A few candidates described natural selection by suggesting that the antibiotic was causing mutations and were not credited.
е	genetic modification of (named) organisms √  to produce , (named) drug / (therapeutic) proteins / vaccine √	2 (AO1.2)	IGNORE humans  Must be linked to (attempt at) first marking point CREDIT e.g. insulin / artemisinin IGNORE 'medicine'

					Examiner's Comments
					Very few candidates gave a concise description of synthetic biology. Most answered in terms of personalised medicine or using computer modelling to synthesise and test drugs.
			Total	16	
			FIRST CHECK ON ANSWER LINE		
			If answer = (-)5.6 award 2 marks	2	ALLOW for one mark  correct answer (if no workings shown) that is
12	а	İ	171855 - 162193 = 9662 √	(AO2.6)	not to 2 significant figures
			(9662 / 171855 × 100) = (-)		e.g. 6%/ 5.62%/ 5.622%
			5.6 ✓		
			Any four from:		IGNORE any ref to, student A's statement/ data that should not be included
			Student B is correct because		e.g. Measles data for 2012 shouldn't be included
			1 vaccination is for, MMR / three diseases , but data only shows confirmed cases of measles.√ 2 cannot tell how effective the vaccination was for the other two diseases / could be effective for other 2 diseases √		1 ALLOW vaccinations are for measles, mumps and rubella.
					<b>5 ALLOW</b> 'the number of children born in 2014 might be less than in 2013'
		3 vaccination data is only given for part of 2013 and 2014 whereas measles data	Max 4 (AO3.2)	8 ALLOW no data for vaccinations in Wales	
			is given for the whole year ✓ 4 more vaccinations could	,	Examiner's Comments
			have been given (in the other 9 months of 2013 and 2014)		This was a highly discriminating question that challenged all candidates. Most candidates did not focus their whole answer on the data provided in the table and student B's
			5 no data on, number of children who were not vaccinated / % vaccinations relative to total population√		statement about this data. Candidates did not interpret this question as student B criticising the validity of the data but instead focused on
			6 no data on whether children who had measles were, vaccinated/not		whether student A was correct. Therefore, most answers referred to the role of vaccines and herd immunity in preventing measles.
			vaccinated √ 7 no vaccination data for 2012 √		Very few candidates appreciated that the vaccine data referred to a combined vaccine but the disease discussed was only measles.

	8 measles data for 2012 is for England and Wales, measles data for 2013 and 2014 is for England only ✓ 9 only confirmed cases included / unreported cases not included ✓		Some candidates did realise that not all cases of measles would be reported and also appreciate the discrepancies with the inclusion of Wales in some years but not others.  Exemplar 3
			This candidate focused only on student B only, as asked in the question, and clearly went through each part of the data to see if there were issues with its validity. The answer begins with the obvious differences between the 2 parts of the data: vaccines and cases of measles, commenting on the lack of parity between the data provided for vaccines versus the data provided for cases of measles. They finish by recognising that the data states confirmed cases of measles and this may not be indicative of all cases of measles. The candidate scored 4 marks.
	Any three from: Incorrect because		ALLOW same flu vaccine not given to different ages     IIGNORE ref to dose of vaccine for 'different vaccines'
	<ul> <li>1 different, vaccines are given to different age groups √</li> <li>2 this vaccine is, changed/ different, from year to year √</li> </ul>		2 ALLOW vaccine has to be up to date (with changing virus) / vaccine is newly produced/ vaccine is changed frequently  3 ALLOW new strains of virus emerge
iii	<ul> <li>3 because the, virus/pathogen, mutates (regularly) √</li> <li>4 so antigens (on the surface of the virus) change √</li> </ul>	Max 3 (AO3.3)	4 ALLOW vaccine (must) contain new antigen  5 ALLOW new antibodies need to be made/old antibodies no longer effective  Examiner's Comments
	<ul> <li>5 immune system may not, recognise it/ respond to it ✓</li> <li>Correct because</li> <li>6 vaccine is recommended to,</li> </ul>		Most candidates attempted to critique the statement and appreciated that there were incorrect and correct statements, often referring to the medically vulnerable as the correct part of the statement. A large majority of candidates did state that the vaccines

		pregnant/ >50 years old/ diabetic / asthma / AW (medically vulnerable) √		changed every year. Many answers referred to the disease/influenza mutating without reference to the virus itself.  A lot of answers discussed a different vaccine for the medically vulnerable as they would need a weakened version due to a weak immune system. This suggests a lack of understanding of how vaccines work and the vulnerability referring to their vulnerability of the disease/virus not to the vaccine that would provide protection.
				Assessment for learning  Different vaccines and how they work is a great discussion point for AS Level Biology, especially with the advent of the new RNA vaccines. Candidates could each have a vaccine to research and then present it to the class.  The NHS website lists all the vaccines and who receives them and when. This will help to make it clear to candidates that everyone should have the opportunity to get a vaccine
				and the vulnerability of a person is not related to the vaccine but to the susceptibility they have, in getting the actual disease.
	iv	Any two from:  1 mass vaccination (at start of epidemic) can prevent spread of, pathogen/disease (into the wider population)  2 herd immunity  3 minimises possibility of, another outbreak of the disease/ a variant spreading	Max 2 (AO1.2)	throughout  1 ALLOW if everyone vaccinated the disease cannot spread e.g 'if population immunised pathogen is killed before it can spread' = mp1 IGNORE 'if more people are immune' for 'mass vaccination'  Examiner's Comments  Many candidates did refer to herd immunity, but they didn't discuss how mass vaccination prevents the spread of a disease. A lot of answers discussed vaccinations in terms of the individual and did not realise the question was about a vaccination programme rather than a single vaccine.
b	i	(named part of) Immune system attacks, cells/tissues,	1 (AO1.2)	IGNORE body attacks itself for 'immune system attacks'

			as it recognises them as, foreign/non self. √		ALLOW have an abnormal immune response as body cells treated as foreign
					Examiner's Comments
					Few candidates gave the correct meaning as they did not refer to why the immune system was attacking body cells. Some answers referred to the body attacking its own cells without specifying the immune system. Some candidates confused this with a disease that attacks the immune system itself.
					ALLOW (high) mechanical strength
			Any two from		Examiner's Comments
		ii	fibrous ✓ insoluble ✓ (high) tensile strength ✓ resistant to stretching ✓	Max 2 (Ao2.1)	Most candidates recognised that collagen was a fibrous protein and some answers referred to it being insoluble. Many candidates gave statements about it needing to be strong for its role but not being precise with the type of strength it exhibits. Some answers referred to collagen as having elastic properties, confusing collagen with elastin.
		iii	bone marrow √	1 (AO1.1)	IGNORE embryos
		iv	Error 1: perforins Correction: interleukins / cytokines √  Error 2: antigen-toxin Correction: antigen- antibodies (complex) √	2 (Ao2.5)	Examiner's Comments  Most candidates identified the errors in the statement, but some struggled to correct those errors. Perforins to interleukins was recalled the most but very few candidates were able to correct antigen-toxin to antigenantibody. Some candidates did not state the error and only stated the correction.
			Total	17	
			(R) opsonin √		ALLOW R = opsonisation / opsonising ALLOW S = IgM / agglutin / agglutanin / agglutination / agglutinising / agglutinator ALLOW T = neutralisation / neutralising IGNORE detoxifyinig
13	а		(S) <u>agglutinin</u> √	3(AO2.5)	Examiner's Comments
			(T) anti-toxin √		Most candidates could identify at least two types of antibodies. The most poorly answered option was for R where they didn't write <b>opsonin</b> for their answer. Option S was the best answered, with the majority of

					candidates knowing the answer or using 'agglutination or agglutin' as alternatives. The candidates who were not given any marks either fell into the category of 'no response' or named different types of white blood cell. Phonetic spellings were accepted for the names of the antibodies.
					Assessment for learning
					Some candidates may have struggled to identify opsonins, agglutinins, and anti-toxins as antibodies because in some cases, 4.1.1(h) (the structure and function of antibodies) and 4.1.1(i) (the action of opsonins, agglutinins, and anti-toxins) might not be taught together. It is important that teaching should emphasise that all three are examples of antibodies, and that their structure is related to their function.
					ALLOW autoimmunity
	b		autoimmune √	1(AO2.1)	A very well answered question, upwards of 90% of candidates knew the correct answer. Incorrect answers included names examples of autoimmune diseases (e.g. rheumatoid arthritis) or other general disease names, e.g. communicable disease, coronary heart disease, immunodeficiency.
			Total	4	
					ALLOW T cell / B cell / T helper cell / T killer cell / T regulator cell ALLOW phagocyte
			(X) (T or B) lymphocyte √	2/16	Examiner's Comments
14	а	İ	(Y) neutrophil ✓	2(AO2.3)	Most candidates only got 1 mark for correctly naming Y as a neutrophil. The most common errors were incorrectly naming X as a macrophage or monocyte, with few candidates correctly identifying it as a lymphocyte.
		ii	flattened / biconcave (shape), to increase surface area (to volume ratio) √	2 max(AO1.1)(AO2.1)	IGNORE concave  ALLOW few organelles so more haemoglobin can be in the cell

	1		
	no, nucleus / organelles, to give (more) space for haemoglobin ✓  flexible, to increase surface area in contact with capillary wall / to squeeze through capillaries ✓  small, for short diffusion pathway / to fit through capillaries ✓  transport proteins in plasma membrane, to allow chloride shift ✓  high concentrations of carbonic anhydrase (inside cells), to allow transport of carbon dioxide / described ✓		'cells are small and flexible to fit through capillaries' = 2 marks  Examiner's Comments  This question was generally answered well by a wide range of candidates. Common errors included omitting 'bi' from 'biconcave' and describing the lack of a nucleus as giving more space for oxygen (rather than haemoglobin). Some candidates lost marks for linking an adaptation to the wrong benefit, especially biconcave with being able to fit through capillaries, rather than increasing surface area.
iii	FIRST CHECK ON ANSWER LINE If answer = 13 award 2 marks  10 mm / 800 (= 0.0125mm) ✓  0.0125mm × 1 000 (= 12.5µm) ✓	2(AO2.8)	ALLOW 12.5 for 2 marks ALLOW answer to more than 3 s.f. for 1 mark  ALLOW ECF if incorrect measurement of cell W with units used but divided by 800 for 1 mark  or measurement of cell W with units correctly converted to μm for 1 mark  ALLOW 0.01m / 800 (= 0.0000125m) and 0.0000125m x 1 000 000 (= 12.5μm)  ALLOW 1cm / 800 (= 0.00125cm) and 0.00125 × 10 000 = (12.5μm)  If candidate measures cell W as 9.5 mm ALLOW 12 /11.9 for 2 marks and 11.88/11.875 for 1 mark  If candidate measures cell W as 10.5 mm ALLOW 13 /13.1 for 2 marks and 13.13 / 13.125 for 1 mark  Examiner's Comments  About half of candidates gained the full 2 marks for this question. Marks were most often lost for measuring in cm then an incorrect conversion to micrometres – most multiplying by 1000 rather than 10,000. Candidates who showed working, including the measurement of the diameter with units

				divided by 800, could access 1 mark even if their final answer was incorrect.
р	İ	digests / hydrolyses / destroys / kills / breaks down, pathogens √	1(AO1.1)	IGNORE 'get rid of pathogens' IGNORE ref to antigens ALLOW ref to parasites / damaged cells / tumour cells / old cells / old organelles for 'pathogens' DO NOT ALLOW 'engulf pathogens'  Examiner's Comments  Most candidates gained this mark. The most common reason for losing the mark was suggesting that the lysosome engulfed the pathogen, rather than the phagocyte engulfing it, or for suggesting that lysosomes are enzymes. Very few candidates gave acceptable alternatives to pathogens, such as damaged or old cells, rather giving vague answers such as breaking down molecules.
	ii	FIRST CHECK ON ANSWER LINE If answer = $2 \times 10^{-5}$ award 2 marks  1.3 × $10^{-21}$ / 6.5 × $10^{-14}$ = 2 × $10^{-8}$ (mol cm <sup>-3</sup> ) $\checkmark$ 2 × $10^{-8}$ (mol cm <sup>-3</sup> ) × $1000$ = 2 × $10^{-5}$ (mol dm <sup>-3</sup> ) $\checkmark$	2(AO2.2)	ALLOW 0.00002 for 2 marks  ALLOW '× 1000' seen anywhere in the answer  Examiner's Comments  Few candidates scored both marks for this question. Many candidates did not convert cm³ into dm³ or divided the numbers the wrong way round. Often incorrect answers were from not multiplying 2×10 <sup>-8</sup> by 1000 giving the final answer as 2×10 <sup>-8</sup> . Subsequently many candidates achieved ECF for 2biii and 2biv.
	iii	(−log 0.00002 =) 4.7 √	1(AO2.2)	This mark is for a correct calculation, therefore ALLOW ECF from part (ii) if the pH value calculated is given to 2 sig figs, even if outside the normal pH range, including correctly calculated negative values  Examiner's Comments  This mark was for a correct calculation, therefore ECF from Question 2 (b) (ii) was allowed, even if outside the normal pH range, including correctly calculated negative values. Many candidates did not have an awareness of physiological pH values or that a pH>14 or <0 was not plausible which may have helped them revisit 2bii. A small number of

					candidates recorded to 2 decimal places rather than 2 significant figures.
					OCR support
					Advice on using calculators to find logarithm functions for maths skill M0.5 can be found on page 16 of the Biology mathematical skills handbook on this page:  https://www.ocr.org.uk/qualifications/as-and-a-level/biology-a-h020-h420-from-2015/planning-and-teaching/ A tutorial, quiz sheet and teacher answers are available here under M0.5.  https://www.ocr.org.uk/subjects/science/maths-for-biology/arithmetic-and-numerical-computation/
		iv	B√	1(AO3.1)	Apply ECF from part (iii) ALLOW B if calculated pH is less than 7 ALLOW A if calculated pH is greater than 7 ALLOW C if calculated pH is 7. ALLOW B if no pH calculation given in (iii) ALLOW answer if shown on table if no answer given on answer line  Examiner's Comments  Again, an ECF was allowed from Question 2 (b) (iii). A common error by candidates was the selection of C for pH values just above or below a neutral pH, recorded between 6.7 and
			Total	11	7.7.
15	а		1 phagocyte engulfs pathogen in a, vesicle / phagosome / endosome √ 2 lysosomes combine with, phagosome / vesicle / endosome √ 3 (lysosyme) enzymes, break down / digest / destroy, pathogen √	3 (AO1.1)	1 ALLOW encloses / traps / captures / AW for 'engulfs' 1 ALLOW vacuole for 'vesicle' 2 ALLOW fuse with / join to / attach to / bind to, for 'combine' 3 IGNORE combat / fight / attack, for 'destroy' 3 DO NOT ALLOW lysozymes for 'enzymes'  Examiner's Comments  Some candidates had a good understanding of phagocytosis and used the terms phagocyte, phagosome, lysosome and phagolysosome correctly. A common error in less successful responses was confusing the cell (phagocyte) with the vesicle it forms after

b	i	phagocyte / neutrophil √	1 (AO1.1)	enzymes in the lysosomes as 'lysozymes'.  ALLOW (non-human) macrophage IGNORE leucocyte / white blood cell  Examiner's Comments  Many candidates named the cell correctly as phagocyte or neutrophil. Macrophage was accepted although in humans, macrophages are larger than this cell (the diameter of which was calculated in part (ii)). The most frequently written incorrect response was the general term 'white blood cell'.  ALLOW answer given to 3 significant figures for 2 marks  e.g. 13.7 / 14.2 / 14.7 µm  If answer given to more than 3 sig. fig. max 1 mark  ALLOW (13 000 ÷ 950) = 13.7 µm for 2 marks
	ii	FIRST CHECK THE ANSWER ON ANSWER LINE If answer = 14 or 15 (µm) award 2 marks  14mm ÷ 950 = 0.0147mm ✓  0.0147 × 1000 = 15µm ✓	2 (AO2.8)	Marks ALLOW (13 500 ÷ 950) = 14.2μm for 2 marks  If final answer incorrect award 1 mark for two clearly shown correct steps in working (other than 1 plus 4).  IGNORE crossed-out working.  steps in working: 1 (diameter with units =) 13 / 13.5 / 14mm OR 1.3 / 1.35 / 1.4cm 2 divide by 950 3 convert EITHER original diameter OR answer to μm (mm → μm × 1000, cm → μm × 10 000) 4 round to 2 significant figures  Examiner's Comments  Candidates seemed well-prepared in terms of knowing the equation:  magnification = image size object size  (although, not all could rearrange it). Many were given 1 mark for measuring the cell correctly and stating the length with units in their working and for dividing by the

				magnification, 950. Where many ran into problems was in converting their answer to micrometres and giving the answer to an appropriate number of significant figures (the same number as the original measurement or one more than that). Many answers were out by a factor of 10 because the candidate measured in centimetres and then multiplied by 1000 instead of 10 000 to convert to micrometres. A simple protocol for performing this calculation is shown below.  Checklist for calculating the diameter of a cell in a photomicrograph  • Measure in millimetres • Multiply by 1000 to convert this measurement to micrometres • Divide by the magnification • Round answer to same number of significant figures as the original measurement (or one more).
	≔	made up of different cells / not made up of different tissues √	1 (AO1.1)	IGNORE differentiated cells ALLOW two or more named blood cells for 'different'  Examiner's Comments  Only a minority of candidates explained that blood is made up of different cells but not different tissues. Although the different cell types were visible in the photomicrograph many candidates wrote that blood consisted of similar cells carrying out a similar function.
C	-	artificial active (immunity) √	1 (AO1.1)	Examiner's Comments  The type of immunity given by an influenza vaccine needed to be fully described as both artificial and active. The most frequently written incorrect response (apart from those who omitted one of the two descriptors) was 'herd immunity'.
	ii	1 low shallow hump labelled 'primary' first and higher steeper hump labelled 'secondary' later ✓ 2 primary starts at 5-10 days	2 (AO2.1)	1 IGNORE timing 1 ALLOW curve that plateaus and does not come back down 2 ECF missing label  Examiner's Comments

		and secondary at 25-28 days √		Candidates needed to read the question carefully and to proceed with care before drawing their curve. Successful responses were able to label the parts of the curve corresponding to the primary and secondary immune responses, make the secondary response steeper and higher than the primary (more rapid response and increased number of antibodies) and in particular they started to plot the primary response after the vaccine was given on day 5 and the secondary response after the second exposure on day 25. Less successful responses were not able to demonstrate this accuracy in their
	iii	1 (memory cells) divide to form plasma cells ✓ 2 plasma cells, produce / release, antibodies (rapidly) ✓ 3 antibodies, bind to / disable / destroy, antigen / virus ✓	2 Max (AO1.2) (AO2.1)	graphicacy skills.  3 ALLOW pathogen for 'virus'  Examiner's Comments  Few candidates outlined the role of memory B cells correctly. Responses were often vague.  Misconception  "Memory cells remember the pathogen and produce antibodies."  Memory cells do not directly produce the antibodies that kill the pathogen. The selected memory cells divide and differentiate to form a clone of plasma B cells which then produce and release the antibodies.
		Total	12	
16		C ✓	1(AO1.1)	
		Total	1	
17		C√	1(AO1.2)	Examiner's Comments  This had not been well learnt by candidates and the proportion of correct answers was similar to that which would be expected by chance.
		Total	1	
18		C✓	1(AO1.2)	

				Framinava Comments
				Examiner's Comments
				About half were correct responses. Many
				candidates chose A, perhaps not realising that
				droplets of moisture are carried through the
				air.
		Total	1	
19		B√	1(AO2.5)	Examiner's Comments
		_ `	( ''-'-'-')	Just under half of answers were correct. Many
				candidates chose A or C.
		Total	1	
				Evaminar's Comments
20		A√	1	Examiner's Comments
			•	Most candidates gave the correct response
				(A). The most common incorrect response
				appeared to be C.
		Total	1	
				Examiner's Comments
21		C √	1	Most candidates gave the correct response
				(C). The most common incorrect response appeared to be A. Candidates need to read all
				the answer options before committing to a
				response.
		Total	1	
				Examiner's Comments
22		B√	1	Examiler 3 Comments
				Only a minority of candidates gave the correct
				response (B). The most common incorrect
				responses were A and C.
		Total	1	