

Year 10 Biology 3: Infection and Response Knowledge Organiser



| 1. Key Vocabulary | | |
|-----------------------------------|---|--|
| Communicable (infectious) disease | A disease which can be spread to others. | |
| Pathogen | Micro-organisms that cause infectious disease (eg bacteria, protists, fungi and viruses). | |
| Bacteria | Prokaryotic cells. Some can cause disease by making toxins. | |
| Protists | Eukaryotic cells. Some can cause disease. | |
| Fungi | Class of organisms that includes mush-rooms. Some can cause disease. | |
| Virus | The smallest organisms. Much smaller than bacteria. They reproduce inside host cells damaging them and causing disease. | |
| Droplet inhalation | When a disease is spread through coughs and sneezes. | |
| Direct contact | When a disease is only spread from physical contact. | |
| Antibiotics | A group of chemicals which can kill bacteria (eg penicillin). | |
| Antiviral drugs | A group of chemical which can prevent viruses reproducing. Hard to develop safe ones. | |
| Fungicides | A group of chemicals which kill fungi. | |
| Painkillers | A type of drug that treats pain symptoms but does not kill pathogens. | |
| Lymphocyte | White blood cell. | |

| 2. Infectious Disease | | | | | | |
|-----------------------|---------------------------------|---------|---|-------------------------|-------|---|
| | Disease | Infects | Symptoms | Spread by | Fatal | Treatment |
| Virus | Measles | Human | Fever Skin rash | Droplet inhala- tion | Yes | vaccination |
| | HIV | Human | Reduced immune system | Unprotected sex | Yes | Antiviral drugs |
| | Tobacco mosa- ic virus (TMV) | Plants | Discolours leaves Stunts growth | Direct contact | No | Remove in- fected leaves and burn |
| Bac- teria | Salmonella | Human | Fever Stomach cramps Vomiting Diarrhoea | Food | No | Take fluids to prevent dehy- dration |
| | Gonorrhoea | Human | Thick yellow/green discharge from vagina or penis | Unprotected sex | No | Antibiotics (if not re- sistant) |
| Fun- gal | Rose black spot | Plants | Black spots on leaves Stunts growth | Direct contact | No | Fungicides |
| Pro- tist | Malaria | Human | Fever | Mosquito bite | Yes | Drugs to kill/ prevent Prevention by using nets to stop bites |

| 3. Non-specific defence systems | | | |
|---------------------------------|-------------------------|--|--|
| Skin | Physical barrier | | |
| Nose | Hairs trap pathogens | | |
| Trachea and bron- chi | Mucus traps pathogens | | |
| Stomach | Acid destroys pathogens | | |

| 4. Specific defence by white blood cells | | | |
|--|---|--|--|
| Phago- cytosis | Ingesting (take in) pathogens digesting and destroying them | | |
| Anti- body pro- duction | Target a specific pathogen. Stick them together and target them for destruction. Gives you a 'memory' of that pathogen so you can fight it more quickly next time | | |
| Antitox- in pro- duction | Cancel out toxins released by pathogens | | |



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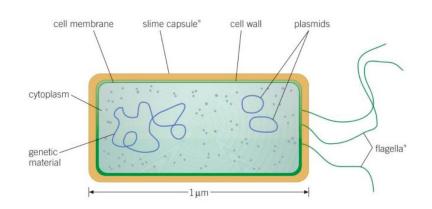
| 5. Vaccination | | | | |
|--------------------|---------|--|--|--|
| Vaccine | | Small amount of dead or inactive pathogen to stimulate white blood cells to produce antibodies | | |
| How vaccines work: | | | | |
| 1 | Weak or | r dead pathogen injected | | |

White blood cells generate antibodies to destroy

White blood cells that make those antibodies remain and make you immune to future infections

Bacterial cell—recap

pathogen



| 6. Drug development | | |
|---------------------|---|--|
| Drug/medicine | A chemical which alters the body. Often extracted from plants (eg aspirin) and microorganisms (eg penicillin) | |
| Toxicity | If it is toxic | |
| Efficacy | How well it works | |
| Dose | How much of a drug you need to take to make it work | |
| Placebo | A pill without the drug in it. Taken to check drug effectiveness | |
| Double blind trials | When the doctor does not know if they are giving the medicine or a placebo. Prevents bias | |

| Stages of drug development | | | Time taken (yrs) |
|----------------------------|--------------------|--|------------------|
| 1 | Drug discovery | New possible medicines are identified | 4.5 |
| 2 | Preclinical trials | New drugs are tested in lab for toxicity and efficacy on cells, tissues and sometimes animals | 1.5 |
| 3 | Clinical trials | Low doses tested on human volun- teers. Then patients suffering with the disease over 3 phases. These are double blind trials | 5.5 |
| 4 | Publishing results | Findings are checked by other scientists (peer review) Drug is approved by NHS | 1.5 |