Communicable disease	Infectious diseases that can be passed from person to person. Caused by pathogens e.g. measles	Topic B3- Infection and Response	Bacteria Reproduce rapidly. Produce toxins to make you feel ill. Damage your cells and tissues.	cell membrane slime capsule* cell wall plasmids cytoplasm genetic material
Non- communicable disease Pathogen	Cannot be transmitted from one person to another e.g. arthritis. Microorganisms that enter the body and cause disease. Spread in water, air and direct contact.	ACUS TOD	Virus Lives and replicates within body cells. Once inside cells make copies and then the cell bursts releasing new viruses. It is difficult to kill viruses without damaging body cells.	collexe shead baseplase

Disease	Pathogen	How it is spread	Effect/symptoms	Prevention/control
Salmonella	Bacteria	Infected foods.	Fever, stomach cramps, vomiting and diarrhoea.	Vaccination of poultry .
Gonorrhoea	Bacteria	Sexual contact.	Pain when urinating, thick yellow or green discharge from the vagina or the penis.	Controlled by antibiotics. Spread prevented by using condoms.
Measles	Virus	Droplets from an infected person's sneeze or cough.	Red skin rash, fever. If complications occur measles can be fatal.	Vaccination.
HIV	Virus	Sexual contact or exchanging body fluids.	Flu-like symptoms. Leading to the virus attacking the immune system.	Antiretroviral drugs
Tobacco Mosaic Virus	Virus	Direct contact.	Discoloration of leaves leading to a mosaic pattern. The leaves have less chlorophyll to absorb sunlight which reduces photosynthesis.	
Rose Black Spot	Fungus	Spores carried by water or wind.	Purple and black spots on the leaves. Leaves then turn yellow and fall off, reducing photosynthesis.	Use fungicides, strip off the affected leaves and destroy.
Malaria	Protist	Mosquitoes are the vectors which spread malaria.	Repeated episodes of fever, can be fatal.	Spread can be reduced by preventing mosquitoes from breeding and using mosquito nets.

	Non-specific body defences	Antibodies	Produced by white blood cells	Vaccinations
			called lymphocytes. These bind to	1-Dead or inactive pathogen
			pathogens and destroy them or	is injected into the patient.
			stick them together.	2-The antigens on the surface
The skin	Physical barrier which stops pathogens	Antitoxins	Produced by white blood cells	of the pathogen cause white
	from getting in.		called lymphocytes. Antitoxins	blood cells to produce a
			neutralise toxins.	specific antibody to attack
				the pathogen.
Nose hairs	They trap particles that could contain	Antibiotics	Antibiotics kill bacteria. Specific	3-If the person is infected
	pathogens.		antibiotics kill specific bacteria.	again with the same
			Some bacteria have become	pathogen, white blood cells
			resistant to certain antibiotics.	quickly produce the specific
Mucus	The trachea and bronchi release mucus to	Painkillers	No effect on the pathogens but do	antibodies.
	trap pathogens.		reduce the symptoms of the illness.	4-The antibodies quickly
			Paracetamols and aspirins are	destroy the pathogen so that
			examples of painkillers.	the person does not get ill.
Cilia	The trachea and bronchi are lined with cilia	Phagocytosis	Some white blood cells called	
	which move the mucus up to the back of		phagocytes engulf pathogens.	
	the throat where it can be swallowed.			and the second
Stomach	The stomach makes hydrochloric acid to	Penicillin	An antibiotic produced by	vaccine
acid	destroy pathogens.		Penicillium. Kills bacteria.	/

Trial stage	Procedure	Purpose	Pros and cons of vaccinations
Preclinical testing	Drugs are first tested on human cells and tissues. Followed by testing on animals.	Test for efficacy, toxicity and dosage.	Pro- vaccines help to control lots of
Clinical testing	Tested on human volunteers. Firstly on healthy volunteers.	To make sure that the drug does not have any harmful side effects.	communicable diseases. Pro- Epidemics can be prevented if
	Secondly- if results are good it is tested on people who have the illness. Small sample group.	To find the optimum dosage and to see how the illness response to the drug.	lots of people are vaccinated. Con- Vaccines don't always work
	Next patients are divided into two groups. Group 1 is given the new drug, group 2 is given a placebo. The clinical trial is 'blind' or even 'double blind'.	To see if the drug makes a real difference. To avoid bias.	Con -Sometimes people have bad reactions to vaccines.
	The results of these tests are not published until they have been through a peer review.	To avoid bias and false claims.	

Efficacy	Whether a drug works and has the desired effect.	Dosage	The concentration of the drug that works the best and how often it should be
			taken by the patient.
Toxicity	How harmful the drug is and whether it has any side	Placebo	A drug with no active ingredients, designed to mimic a real drug. Used to test
	effects.		if the effects of a drug on a patient are just psychological.
Blind test	The patient doesn't know if they are taking the new drug	Double blind	Neither the patient nor the doctor know if they are taking the new drug or
	or a placebo.	test	the placebo.

	White blood cells			
Phagocytosis	The white blood cells engulf the pathogen.	Bacteria Bacteria Bacteria Bacteria are digested Bacteria are digested		
Produce antibodies	Invading pathogens have molecules called antigens on their surface which white blood cells do not recognise. Certain white blood cells called lymphocytes produce specific antibodies. These antibodies lock on to the pathogens antigens. The antibodies ensure that the pathogens can be found and destroyed by other white blood cells.	antibody antigen bacterium white blood cell antibody attached to antigen		
Produce antitoxins	Certain white blood cells make antitoxins to neutralise the toxins made by pathogens.	white blood cell antitoxin molecule toxin and antitoxin joined together toxin molecule bacterium		