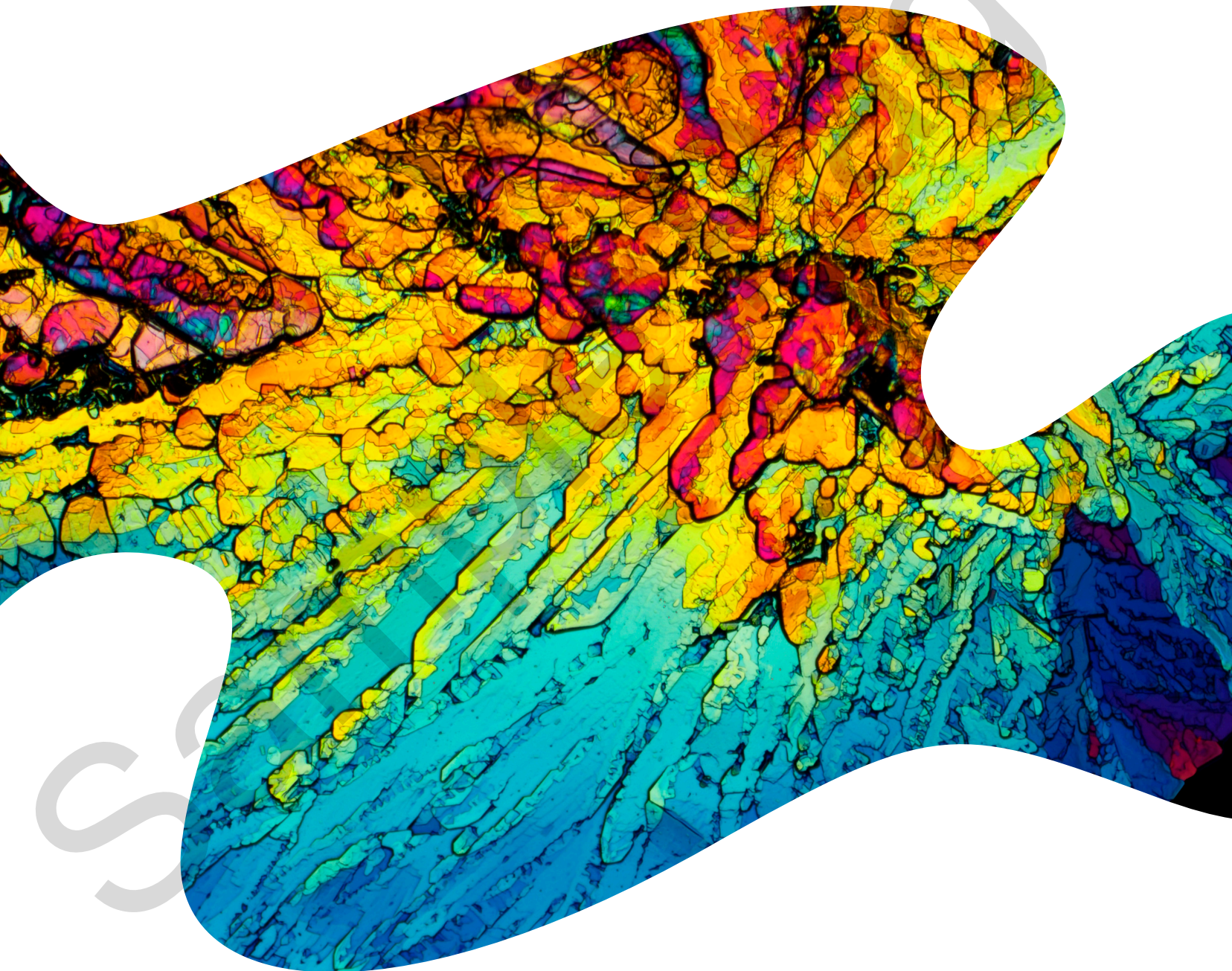


HEINEMANN

BIOLOGY2

6TH EDITION



VCE UNITS 3 AND 4 • 2022-2026

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How to use this book

Heinemann Biology 2 6th edition

Heinemann Biology 2 6th edition has been written to the new VCE Biology Study Design 2022–2026. The book covers Units 3 and 4. Explore how to use this book below.

Chapter opener

Chapter opening pages link the study design to the chapter content. Key knowledge addressed in the chapter is clearly listed. To help you find where each outcome is covered in the chapter, the relevant section numbers are written in bold.

CHAPTER

07

Biochemical pathways:
Cellular respiration

Learning outcomes

Energy is vital for life. Whether growing, moving, reproducing, responding or excreting, living organisms are using energy. Using energy involves transforming energy from one form to another, and transferring it from one place to another. Energy is produced via several biochemical pathways that have evolved over time. By the end of this chapter, you will have an understanding of biochemical pathways: glycolysis, cellular respiration and anaerobic fermentation, and how these provide living cells with the energy they need to survive.

You will also learn how cells adjust their metabolism to account for changes in environmental conditions and how biotechnological applications of biochemical pathways are being explored.

Key knowledge

Cellular respiration as an example of biochemical pathways

- the main inputs, outputs and locations of glycolysis, Krebs Cycle and electron transport chain including ATP yield (details of biochemical pathway mechanisms are not required) **7.1**
- the location, inputs and the difference in outputs of anaerobic fermentation in animals and yeasts **7.2**
- the factors that affect the rate of cellular respiration: temperature, glucose availability and oxygen concentration **7.3**

Biotechnological applications of biochemical pathways

- uses and applications of anaerobic fermentation of biomass for biotrial production **7.2**

Highlight

Focus on important information such as key definitions and summary points.

BioFile

BioFiles include interesting information and real world examples.

Case study

Case studies place biology in an applied situation or relevant context. Text and artwork refer to the nature and practice of biology, applications of biology and associated issues, and the historical development of biological concepts and ideas.

2.1 Cells

REVISION

Cells are the basic structural and functional units of life on Earth. The cell theory is one of the fundamental principles of biology, and describes the properties of cells. Cells can be classified into two types: prokaryotic and eukaryotic cells. Each type of cell has many different structures in place to sustain life.

In this section you will learn about cell theory and the differences between prokaryotic and eukaryotic cells. The structure and function of prokaryotic and eukaryotic cells will also be explored.

Cell theory

If you are to understand life you need to understand how cells work. Cells are the basic functional units of living organisms. The cell theory is based on detailed microscopic and experimental studies of tissues, from all types of organisms, carried out over the last 300 years.

The cell theory states that:

- all organisms are composed of cells
- all cells come from pre-existing cells
- the cell is the basic organisational unit of living things.

All types of cells perform similar basic processes and many also carry out highly specialised functions (Figure 2.1.1). The activities of cells require considerable energy, and produce a variety of biological molecules. These biological molecules, called **metabolites**, are used to build new molecules, used for repair or exported from the cell. All of these processes are catalysed (speed up) by enzymes and are precisely regulated. Some biochemical processes involve hundreds of enzymes, operating sequentially along a complex integrated chemical pathway in which each step is tightly controlled.

Challenges in treating viral disease

Treatment of viruses is highly problematic. Public health initiatives generally focus on vaccination, containment and treating symptoms rather than attempting to eradicate the infection in the patient.

Vaccination

The most important efforts to eliminate viral diseases focus on vaccinating the population. By presenting the immune system with the antigens from the virus, memory cells can be made, ensuring that even if people do come in contact with the virus they will not become ill or spread the virus to others. Vaccines, however, can only be made for known viruses that have been studied and had their antigens replicated in the laboratory. It is not possible to 'vaccinate' against a virus until after it has been observed in the population. New viruses such as SARS-CoV-2 (COVID-19) are always going to be a problem for health authorities as the development of new vaccines takes time, during which many people can become ill and even die. Influenza viruses are of particular concern because they can spread rapidly, make people very ill and overwhelm health systems, especially as the second wave of infection usually occurs among health professionals treating those who were infected early in the epidemic.

CASE STUDY

Finding a vaccine for COVID-19

To infect a cell a virus must insert its genetic material into a host cell. One method of doing this is to make a hole in the host cell's plasma membrane and then enter through that hole. The coronavirus responsible for COVID-19, like all coronaviruses, does this method.

Coronaviruses are a large family of viruses that cause respiratory tract infections that can range from mild to lethal. **Coronaviruses** are named after the crown-like projections on their surface. These are called 'spike proteins' and are used by the virus to attach to and enter a cell. These spike proteins, which uncoil like a spring to pierce the host cell's plasma membrane. These proteins are the obvious antigen to use to create a vaccine, but they are also used by the virus to enter a cell and once the shape has changed any antibodies formed will be ineffective.

A group of researchers, Professor Paul Young, Dr Keith Chappell and Dr Dan Wotton, working at the University of Queensland, has developed a new approach to this problem called a 'molecular clamp'. This is a protein which stops the coronavirus proteins from uncoiling so that when they are introduced to the immune system in a vaccine the shape can be recognised and the appropriate antibodies generated.

Research such as that being done at the University of Queensland is occurring as a result of a worldwide coalition of researchers, co-ordinated through the Coalition for Epidemic Preparedness Innovations (CEPI), working together to develop treatment strategies and ways to prevent the spread of new diseases. CEPI was formed following the world's outbreaks of a number of new, deadly diseases, such as Ebola, which was recognised that more rapid responses were needed.

Revision

Revision sections contain vital information from Year 11.

CASE STUDY ANALYSIS

Determining blood groups for successful transfusion

The first successful human-to-human blood transfusion is reported to have occurred in the 1800s. At that time, a blood transfusion was a risky procedure. It might help a patient, but it could also make them much worse. This is because human blood groups (ABO) were not discovered until 1901 and the idea that transfusions should be matched to the recipient's blood group was not suggested until 1907.

The A and B blood type antigens are carbohydrate molecules attached to proteins and lipids in the red blood cell membrane. The structure of the carbohydrate makes the A antigen different from the B antigen. If the blood type transfused into a patient is different from the patient's own blood type, an immune response will be elicited by the patient's immune system. Antibodies will recognise the transfused blood cells as foreign and will bind to their antigens. This causes clumping (or agglutination) of red blood cells (Figure 8.1.2). Agglutination destroys the red blood cells, which normally transport oxygen throughout the body and so can result in severe anaemia and even death.

The presence or absence of A and B antigens on the surface of red blood cells determines whether the blood group is A, B or AB. Group O blood has neither A nor B antigens on the surface of red blood cells (Table 8.1.1). If the blood type transfused into a patient is different from the patient's own blood type, an immune response may be elicited by the patient's immune system, which can lead to death.

Blood type	Red blood cells	Antibodies present in plasma	Antigens present on cells
A	Red blood cells with A antigens	anti-B	A
B	Red blood cells with B antigens	anti-A	B
AB	Red blood cells with both A and B antigens	none	A and B
O	Red blood cells with neither A nor B antigens	anti-A and anti-B	none

A patient has presented to the emergency department of the local hospital needing a blood transfusion. The plates below show the results of the test to determine the patient's blood group.

Analysis

1 What is the patient's blood group?
2 How do you know?
3 What blood groups could be used for the patient's transfusion?

Selection and screening of transformed bacteria

When determining which bacterial cells have been transformed with recombinant plasmids containing target DNA, the characteristics of the plasmid vector described on page 153 become important. Recall from the earlier example (Figure 4.2.8 on page 153) that the plasmid vector contains other genes, including a gene for antibiotic resistance (in this example, ampicillin resistance) and a reporter gene, which results in a particular phenotype, such as a coloured product.

Selection of transformed bacteria

To determine which of the bacterial cells have been transformed with the gene for antibiotic resistance, the bacteria are grown on nutrient agar plates that contain an antibiotic (in this case, ampicillin) and are incubated at 37°C, the optimum temperature for the bacteria to reproduce and form colonies. The only bacteria to survive will be those that have taken up the plasmid, whether it is a recombinant or non-recombinant plasmid. These bacteria have the ampicillin resistance (*amp^r*) gene. All other bacteria will be killed.

Screening for bacteria transformed with recombinant plasmids

In this example, the plasmid also carries the *lacZ* gene, which codes for an enzyme that breaks down an indicator called X-gal, resulting in a blue product. Bacteria carrying the non-recombinant plasmid with an intact and functioning *lacZ* gene produce blue colonies on agar plates. If the target DNA has been successfully inserted within the *lacZ* gene, expression is disrupted and the enzyme coded by this reporter gene is not produced. Therefore, bacteria transformed with recombinant plasmids appear as white colonies (Figure 4.2.11).

Bacteria transformed with the recombinant plasmids are then taken from the agar plate and cultured with nutrients in order for them to replicate and produce the protein (in this case, insulin) encoded by the target DNA.

Case study: Analysis

These case studies include real-world data that can be analysed and evaluated.

