

**Muscles:**

- 1) By using a labelled drawing, describe the differences in the sarcomere between a contracted and relaxed skeletal muscle? (4)
- 2) Describe the differences between fast and slow twitch muscle fibres? (4)
- 3) What are the roles of the transverse (T) tubules and sarcoplasmic reticulum in muscle contraction? (2)
- 4) At what stages of muscle contraction is ATP needed? (4)
- 5) Why do skeletal muscles appear to have thick and thin or dark and light bands under the microscope? (2)
- 6) What is muscle wasting and suggest some causes? (4)
- 7) Explain why muscle cells have many ribosomes? (2)
- 8) Increasing the A-band can make muscle contractions more powerful. Explain why? (2)
- 9) Describe the sequence of events which occurs in a neuromuscular junction? (4)
- 10) Why is the mechanism of muscle contraction referred to as the 'sliding filament theory'? (2)
- 11) Drugs which lower calcium ions can have adverse effects on muscles. Explain why? (3)
- 12) Why are skeletal muscles striated and voluntary? (2)
- 13) A particular mutation affects the gene coding for tropomyosin such that it cannot bind to actin due to its abnormal shape. What would be the consequences of this and why? (3)
- 14) Rigor mortis sets in following death; why does it not set in when a person has been anaesthetised for hours? (3)
- 15) Hypercalcaemia can affect muscle function. Explain how? (2)
- 16) Ligament injuries take a long time to heal. Suggest why? (2)
- 17) Hyperactivity of the acetylcholinesterase enzyme can have adverse effects on muscles. Explain why? (3)
- 18) Explain how a skeletal muscle contracts? (6)

- 19) What is the difference between muscle fibres, myofibrils and myofilaments? (2)
- 20) What is a sarcomere? (1)
- 21) Inflammation of the muscles (myositis) can affect muscle contraction. Suggest how? (2)
- 22) Lactic acid can also hinder muscle function. Explain how it does so? (3)

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