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An image that has or appears to have height, width, and depth is three-dimensional (or 3D). An image that has height and width but no depth is two-dimensional (or 2D). Some images are 2-D for purpose. Think of international symbols that indicate which door leads to the toilet, for example. Symbols are designed so that you can recognize them at a glance. That is why they use only the most basic shapes. More information about the symbols might try to tell you what clothes a small man or woman is wearing, hair color, whether they regularly get to the gym and so on, but all this additional information would tend to take longer to get basic information from the symbol : which toilet is which. This is one of the basic differences between how 2D and 3D graphics are used: 2D graphics are good at communicating something simple, very fast. 3D graphics tell a more complex story, but they need to have a lot more information to do so. For example, triangles have three lines and three angles - all that is needed to tell the story of the triangle. However, a pyramid is a 3D structure with four triangular sides. Note that it takes five lines and six angles to tell the story of the pyramid - almost double the information needed to tell the story of the triangle. Advertising Hundreds of years, artists know some tricks that can flat, 2-D image look like a window into a real, 3-D world. Some of them can be seen in a photo that you can scan and view on your computer monitor: Objects appear smaller when they are more distant; when objects near the camera are in focus, the objects are further blurred; colors tend to be less vivid as they move on. Speaking of 3-D graphics on computers today, although we are not talking about static photos - we are talking about images that move. If creating a 2D image into a 3D image requires adding a large amount of information, then a step from a 3D still image to images that move realistically requires much more. Part of the problem is we've spoiled each other. We expect a high degree of realism in everything we see. In the mid-1970s, a game like Pong could impress people with its on-screen graphics. Today we compare game screens to DVD movies, and want games to be as smooth and detailed as what we see in cinema. This poses a challenge for 3-D graphics on p Computers, Macintoshes, and increasingly gaming consoles like Dreamcast and Playstation II. Brides uses cookies to give you a great user experience. By using Brides, you consent to the use of cookies. Our body needs vitamin D to help us keep bones healthy. Vitamin D helps children build strong bones and prevent rickets of bone disease. It helps adults avoid conditions including osteoporosis that weaken bones and can break them. In addition, some studies have found a link between low vitamin D levels and a higher risk of colorectal cancer. However, other studies have found no significant link. An editorial published in the New England Journal of Medicine in November says there remains considerable uncertainty about cancer prevention with supplemental vitamin D. However, it is clear that we need vitamin D to stay healthy. People can get vitamin D from their diet, from supplements, and from the sun. However, staying in the sun without protection exposes people to harmful UV rays, which is a powerful risk factor for most skin cancers. And getting too much vitamin D, for example, from taking very high doses of supplements can be harmful. A smart approach to vitamin D American Cancer Society epidemiologist Marji McCullough, ScD, RD, offers these tips: Include vitamin-D-rich foods in your diet. These include fatty fish such as salmon, trout, sword fish, and tuna. Eggs and mushrooms also contain small amounts of vitamin D. Milk, including soy and almond milk, is enriched with vitamin D. Some other dairy products, orange juice, and cereals also may have vitamin D added. Read the labels for sure. People between the ages of 1 and 70 should receive a recommended daily allowance of 600 IU. Children under 1 should be given 400 IU and adults over 70 should be given 800 IU. If you take a calcium supplement, you may already get added vitamin D. Some calcium supplements contain vitamin D. Past studies on vitamin D and cancer risk do not suggest that high dose supplements are needed and do not indicate that most people need to have their vitamin D levels controlled. However, if you are concerned about vitamin D levels, talk to your health care provider. Do not jump with sunscreen or try other ways to get vitamin D from the sun. Sun radiation without protection increases the risk of skin cancer. Gingicain D may be available in the countries listed below. The matches of the components of gingiacaine D Benzalkonium chloride Benzalkonium chloride (a derivative of benzalconium) are reported as an ingredient in Gingicaine D in the following countries: Tetracaine tetracaine is reported as an ingredient in Gingicain D in the following countries: Important note: Drugs.com international database is in beta. This means that it is still in development and may contain inaccuracies. It is not intended to replace the expertise and judgment of your doctor, pharmacist or other healthcare professional. It should not be interpreted as being safe, appropriate or effective for you to take any medication in any country. Consult with your healthcare professional before taking any medication. For more information, contact your healthcare provider to make sure that the information displayed on this page applies to your personal situation. Medical disclaimer -- Drug Name Search Food and Drug Administration Rockville MD 20857 Dennis Brydges Executive Director of Food and Agriculture Organization 1001 22nd Street, N.W. Washington, D.C. 20437 Dear Mr. Bridges: On behalf of the Food and Drug Administration, I am pleased to confirm your invitation to Mr. Sidney H. Rogers, Director of the Investigation Department, to review the National Food export certification program and agricultural organizations and its application in the field of export procedures. The trip will take place in Rome, Italy from July 10-27, 2002. In accordance with your letter of May 12, 2002, we understand that your organization will cover the costs of air fares, accommodation, meals and miscellaneous expenses. As soon as Mr. Rogers returns and submits his claim, our accounting receivables branch will notified you of the amount to be recovered. The checks are due to the Food and Drug Administration. Attached to your link is some general information about guidelines for FDA employees who speak or participate outside seminars and conferences. Sincerely, Malcolm Frazier Director, Office of Resource Management EnclosureFMD 13 Distribution: Regional Food and Drug Directors and District Directors FDA Headquarters Office Issued: ORA/ORO/Division of Field Investigation (HFC-130) Publication Date: November 2002 In this section: What is hepatitis D? Hepatitis D is a viral infection that causes liver inflammation and damage. Inflammation is a swelling that occurs when the tissues of the body become injured or become infected. Inflammation can damage organs. Viruses attack normal cells in your body. Many viruses cause infections that can spread from person to person. The hepatitis D virus is unusual because it can only infect you if you also have hepatitis B virus infection. You can protect yourself from hepatitis D by protecting yourself from hepatitis B by getting hepatitis B vaccine. Hepatitis D spreads in the same way that hepatitis B spreads, through contact with the blood of an infected person or other bodily fluids. The hepatitis D virus can cause acute or chronic infection or both. Acute hepatitis D Acute hepatitis D is a short-term infection. Symptoms of acute hepatitis D are the same as those of any type of hepatitis and are often more severe.19 Sometimes your body is able to fight off the infection and the virus disappears. Chronic hepatitis D Chronic hepatitis D is a long-term infection. Chronic hepatitis D occurs when your body is unable to fight off the virus and the virus does not disappear. People who suffer from chronic hepatitis B and D develop complications more often and quickly than people who suffer from chronic hepatitis B alone.20 How do hepatitis D and hepatitis B infections occur together? Hepatitis D and hepatitis B infections may occur together as super-infection. People can become infected with hepatitis D only if they also have hepatitis B. In most cases, people are able to recover and fight off acute hepatitis D and B infections and viruses disappear. However, in less than 5 percent of people with coinfection, both infections become chronic and do not disappear.21 Superinfection Superinfection occurs if you already have chronic hepatitis B and then become infected with hepatitis D. When you get superinfection, you may have severe symptoms of acute hepatitis.19 Up to 90 percent of people with superinfection are unable to fight off the hepatitis D virus, and develop chronic hepatitis D.20 as a result, these people will have both chronic hepatitis D and chronic hepatitis B. How common is hepatitis D? Hepatitis D is not common in the United States. Hepatitis D is more common in other parts of the world, including Eastern and Southern Europe; mediterranean and the Middle East; parts of Asia, including Mongolia; Central Africa; and the Amazon basin in South America.22,23 Who is more likely to have hepatitis D? Hepatitis D infection occurs only in people who have hepatitis B. People are more likely to have hepatitis D in addition to hepatitis B if there are complications of acute hepatitis D? In rare cases, acute hepatitis D can lead to acute liver failure, a condition in which the liver suddenly fails. Although acute liver failure is less common, hepatitis D and B infections are more likely to lead to acute liver failure than hepatitis B infection itself.24 What are the complications of chronic hepatitis D? Chronic hepatitis D can lead to cirrhosis, liver failure, and liver cancer. People with chronic hepatitis B and D are more likely to develop these complications than people who suffer from chronic hepatitis B.20 Early diagnosis and treatment of chronic hepatitis B and D may reduce your chances of developing serious health problems. Cirrhosis Cirrhosis is a condition in which the liver slowly breaks down and is unable to function normally. Scar tissue replaces healthy liver tissue, partially blocking the flow of blood through the liver. In the early stages of cirrhosis, the liver continues to function. As cirrhosis worsens, the liver begins to fail. Liver failure also called end-stage liver disease, liver failure progresses over months or years. At the final stage of liver disease, the liver can no longer perform important functions or replace damaged cells. Liver cancer With chronic hepatitis B and chronic hepatitis D increases the likelihood of developing liver cancer. Your doctor may suggest blood tests and ultrasound or other type of liver cancer control test. Finding cancer at an early stage increases the chance of cancer treatment. What are the symptoms of hepatitis D? Most people with acute hepatitis D have symptoms that can include feeling tired of nausea and vomiting bad appetite pain in the liver, in the upper abdomen darkening the color of urine lightening the color of the stool yellowish shade on the whites of the eyes and skin, called jaundice On the contrary, most people with chronic hepatitis D have few symptoms until complications develop , which can last for several years afterwards that have been infected. Some symptoms of cirrhosis include weakness and a feeling of weight loss fatigue swelling of the abdomen swelling of the ankles, called edema itching skin jaundice What causes hepatitis D? The hepatitis D virus causes hepatitis D. The hepatitis D virus is spread through contact with the blood or other bodily fluids of an infected person. Contact can occur by sharing drug needles or other drug materials with an infected person who has unprotected sex with an infected person who gets a random stick with a needle that has been applied to an infected person The hepatitis D virus rarely spreads from mother to child during childbirth. You can't get hepatitis D from coughing on or sneezing on an infected person drinking water or eating food hugging an infected person shaking hands or holding hands with an infected person sharing spoons, forks, and other dining needs sitting next to an infected person How do doctors diagnose hepatitis D? Doctors diagnose hepatitis D based on your medical history, physical examinations, and blood tests. If you have hepatitis D, your doctor may perform liver control tests. Medical history Your doctor will ask about your symptoms and the factors that may make you more likely to get hepatitis D. Physical examination During the physical exam your doctor will check for signs of liver damage such as changes in skin colour in the lower extremities, legs or ankles sensitivity or swelling in the abdomen What tests do doctors use to diagnose hepatitis D? Doctors use blood tests to diagnose hepatitis D. Your doctor may order tests to check for liver damage, determine how much liver damage you have, or rule out other causes of liver disease. Blood test Your doctor may order one or more blood tests to diagnose hepatitis D. The health care provider will take a blood sample and send the sample to the laboratory. Your doctor may order one or more blood tests to diagnose hepatitis D. Additional tests If you have chronic hepatitis D and hepatitis B, you may have liver damage. Your doctor may recommend tests to determine if you have liver damage or how much liver damage you have – or rule out other causes of liver disease. These tests may include blood tests. Elastography, a special ultrasound that measures the hepatic auspices. liver biopsy, The doctor uses a needle to take a small piece of tissue from the liver. The pathologist will examine the tissue under a microscope to look for signs of damage or disease. Doctors usually use a liver biopsy only if other tests do not provide enough information about liver damage or disease. Talk to your doctor about which tests are best for you. How do doctors treat hepatitis D? Doctors can treat chronic hepatitis D with drugs called interferons such as peginterferon alpha-2a (Pegasys). Scientists are studying a new treatment for hepatitis D. In addition, drugs for hepatitis B may be needed. How do doctors treat complications of hepatitis D? If chronic hepatitis D leads to cirrhosis, you should see a doctor who specializes in liver disease. Doctors can treat health problems associated with cirrhosis with medications, surgery, and other medical procedures. If you have cirrhosis, you have a better chance of developing liver cancer. Your doctor may order an ultrasound or other type of imaging test to check for liver cancer. If acute hepatitis D leads to acute liver failure, or if chronic hepatitis D leads to liver failure or liver cancer, you may need a liver transplant. How can I protect myself from hepatitis D infection? If you do not have hepatitis B, you can prevent hepatitis D infection by if you do not develop hepatitis B, you cannot get hepatitis B. If you already have hepatitis B, you can take steps to prevent hepatitis D infection by not sharing needles or other drug materials that wear gloves if you have to touch another person's blood or open ulcers that do not share personal items such as toothbrushes, razors or nail clippers How can I prevent the spread of hepatitis D to others? If you have hepatitis D, follow the steps above to prevent the spread of infection. Your sexual partners should get tested for hepatitis B, and if they are not infected, get a hepatitis B vaccine. Prevention of hepatitis B will also prevent hepatitis D. You can protect others from getting infected by telling your doctor, dentist, and other health professionals that you have hepatitis D. Don't donate blood or blood products, sperm, organs, or tissues. Is hepatitis D vaccine available? There is currently no hepatitis D vaccine available. Hepatitis B vaccine can prevent hepatitis D by preventing hepatitis B. Diet, diet and nutrition for hepatitis D If you have hepatitis D, you should eat a balanced and healthy diet. Talk to your doctor about healthy eating. You should also avoid alcohol, as this can cause more liver damage. Reference [19] Farci P, Niro GA. Clinical features of hepatitis D. Seminars in liver disease. 2012;32(3):228[u2012]236. [20] Ahn J, Gish Hepatitis D virus: call for screening. Gastroenterology & ; 2014;10(10):647[u2012]686. [21] Roy PK. Hepatitis D. Medscape website. . Last Updated Mar 16, 2017. Accessed June 5, 2017. [22] Rizzetto M. Hepatitis D virus: introduction and epidemiology. Cold Spring Harbor Perspectives in Medicine. 2015;5(7):a021576. [23] Hoofnagle JH. Hepatitis D (Delta). Journal of the American Medical Association. 1989;261(9):1321–1325. [24] Negro F, Lok ASF. pathogenesis, epidemiology, natural history and clinical manifestations of hepatitis D virus infection. . Updated July 20, 2016. Accessed June 5, 2017. 2017.

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