SUPPLEMENTARY MATERIALS

There were a wide range of Young's moduli, 0.10–110.32 MPa, measured from ex vivo human corneas reported in the literature, as shown in Table S1. Glass et al. applied a threecomponent spring and dashpot model to match the dynamic response with the kinematic information deduced from the high-speed camera images. They compared the modeling results with corneal phantom experiments to demonstrate how viscosity and elasticity can change the corneal hysteresis. People also tried to measure the Young's moduli of the different layers of the cornea tissue by using the atomic force microscope (AFM). A flying spot scanner [1], the measurement of mercury drop displacement in a whole eye under increasing pressure [2], an ultrasonic technique [3], a pressure system used to examine quasi-static and dynamic rupture pressure [4], a stress-relaxation test in a vertical corneal strip[5], a radial shearing speckle pattern interferometer after an increase in intraocular pressure from 15.0 to 15.5 mmHg [6], a Scheimpflug corneal three-dimensional topographer for stress-strain curves while IOP either remained constant or increased by 40 mmHg and then decreased (at 4-mmHg steps)[7], an atomic force microscope [8, 9], a transverse biaxial resistance test [10], Scheimpflug topography [11], and acoustic radiation force elasticity microscopy [12]. Despite the improvements in the measurement methods, there was still a wide variation in ex vivo measurement of the Young's moduli due to the different methods of measurement, different ex vivo preparations, and different storage conditions of the corneas. Furthermore, the cornea is physiologically constrained in an orbital socket, covered by a tear film layer and a thick eyelid that blinks frequently and remains at a relatively constant temperature; accordingly, the *in vivo* cornea in the eye socket should differ from an enucleated eyeball or an extracted corneal strip and would present different biomechanical properties.

No	Reference	Years	Young's modulus	Methods	ex vivo or in vivo
1	[1]	1972	1.8-8.1 MPa	flying spot scanner	ex vivo
2	[2]	1986	≈5 MPa	displacements of two very small mercury drops on the corneal surface	ex vivo
3	[3]	1996	4.2-30 MPa	the mercury drop displacement in a whole eye under increasing pressure	ex vivo
4	[13]	1999	50-100 MPa	modules of the Hypermesh for solid modeling, geometric construction, and finite element mesh creation	ex vivo
5	[4]	2003	6.89-110.32 MPa	quasi-static and dynamic rupture pressure	ex vivo
6	[14]	2005	45. 74± 1. 69 MPa (43.25-48.67 MPa)	one dimension tensile test, tensile stress relaxation and creep test	ex vivo
7	[5]	2007	0.16-0.81 MPa	an inflation condition to determine pressure-deformation results using shell theory to derive the relationship between the modulus of elasticity and IOP	ex vivo
8	[15]	2008	0.15-1.15 MPa	inflation test	ex vivo
9	[7]	2010	0.692 ± 0.30 MPa	Scheimpflug corneal three-dimensional topographer for whole globe stress-strain curves while IOP either remained constant or increased by 40 mm Hg and then decreased (4- mm Hg steps)	ex vivo
10	[6]	2011	0.27-0.52 MPa	radial shearing speckle pattern interferometer after an increase in intraocular pressure from 15.0 to 15.5 mm Hg	ex vivo
11	[16]	2012	1.14 and 2.63 MPa	atomic force microscope, and it was constant over the range of indentation depths between 1.0 and $2.7 \ \mu m$ in the stroma	ex vivo
12	[17]	2012	7.5 ± 4.2 kPa (anterior basement membrane), 109.8 ± 13.2 kPa (Bowman's layer), 33.1 ± 6.1 kPa(anterior stroma),	atomic force microscope	ex vivo

TABLE S1. Young's moduli collected from previous literature

			50 ± 17.8 kPa (Descemet's membrane).		
11	[9]	2013	1.48 ± 0.17 to 10.19 \pm 1.06 MPa	atomic force microscope	ex vivo
12	[12]	2014	39 ± 0.28 kPa for the central anterior cornea 0.71 ± 0.21 kPa for the central posterior cornea	acoustic radiation force elasticity microscope	ex vivo
13	[11]	2014	2.28 ± 0.87 and 3.30 ± 0.90 at the anterior cornea, 0.21 ± 0.09 and 0.17 ± 0.06 at the posterior cornea with and without intact epithelium	Scheimpflug topography	ex vivo
14	[8]	2015	0.2459 ± 0.2091 (82.3 - 530.8 kPa) for the anterior cornea, 0.1002 ± 0.0619 (range: 28.1 - 162.6 kPa) for the posterior cornea	atomic force microscope	ex vivo
15	[10]	2015	3.7 ± 2.5 MPa at 10% strain, 9.5 ± 1.8 MPa at 20% strain	transverse biaxial resistance	ex vivo
16	[18]	2008	0.13-0.43	applanation tonometer	in vivo
17	[19]	2015	0.755 ± 0.159 MPa	corneal indentation device; tangent elastic modulus; after being normalized to normal intraocular pressure of 15.5 mmHg	in vivo

	Right eye	Left eye	
	Mean (95% Cl)	Mean (95% CI)	t-test (P value)
IOP (mmHg)	14.87 (7.7-22.05)	14.80 (7.69, 22.27)	0.642
A1L (mm)	1.77 (1.55, 2.00)	1.78 (1.58, 1.98)	0.545
A1V (m/s)	0.14 (0.10, 0.19)	0.14 (0.10, 0.19)	0.585
A2L (mm)	1.72 (0.91, 2.56)	1.72 (1.07, 2.36)	0.702
A2V (m/s)	-0.37 (-0.54,20)	-0.37 (-0.55, -0.20)	0.649
PD (mm)	3.77 (1.20, 6.35)	4.07 (1.54, 6.60)	<0.001
Radius (mm)	7.19 (4.74, 9.65)	7.22 (4.83, 9.61)	0.847
DA(mm)	1.06 (0.82, 1.31)	1.07 (0.82, 1.32)	0.649
CCT (µm)	543.87 (469.86, 617.82)	542.80 (469.62 <i>,</i> 615.97)	0.978
A1T (msec)	7.40 (6.52, 8.27)	7.40 (6.49, 8.30)	0.811
A2T (msec)	21.74 (20.42, 23.00)	21.75 (20.46, 23.02)	0.343
<i>E</i> (MPa)	0.207 (0.054, 0.359)	0.205 (0.070, 0.339)	0.524

Table S2. Corvis' parameters and the proposed Young's modulus from right and left eyes of 536 subjects.

A1T and A2T: A time-1/-2; A1L and A2L: A length-1/-2; A1V and A2V: velocity-1/-2; PD peak distance; DA: maximum deformation amplitude; CCT: central corneal thickness; *E*: Young's modulus.



Figure S1a. The relationship between the Young's modulus and CCT.



Figure S1b. The relationship between the Young's modulus and IOP.



Figure S1c. The relationship between the Young's modulus and DA.



Figure S1d. The relationship between the Young's modulus and A1T.



Figure S1e. The relationship between the Young's modulus and age.



Figure S1f. The relationship between the Young's modulus and spherical equivalent.

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