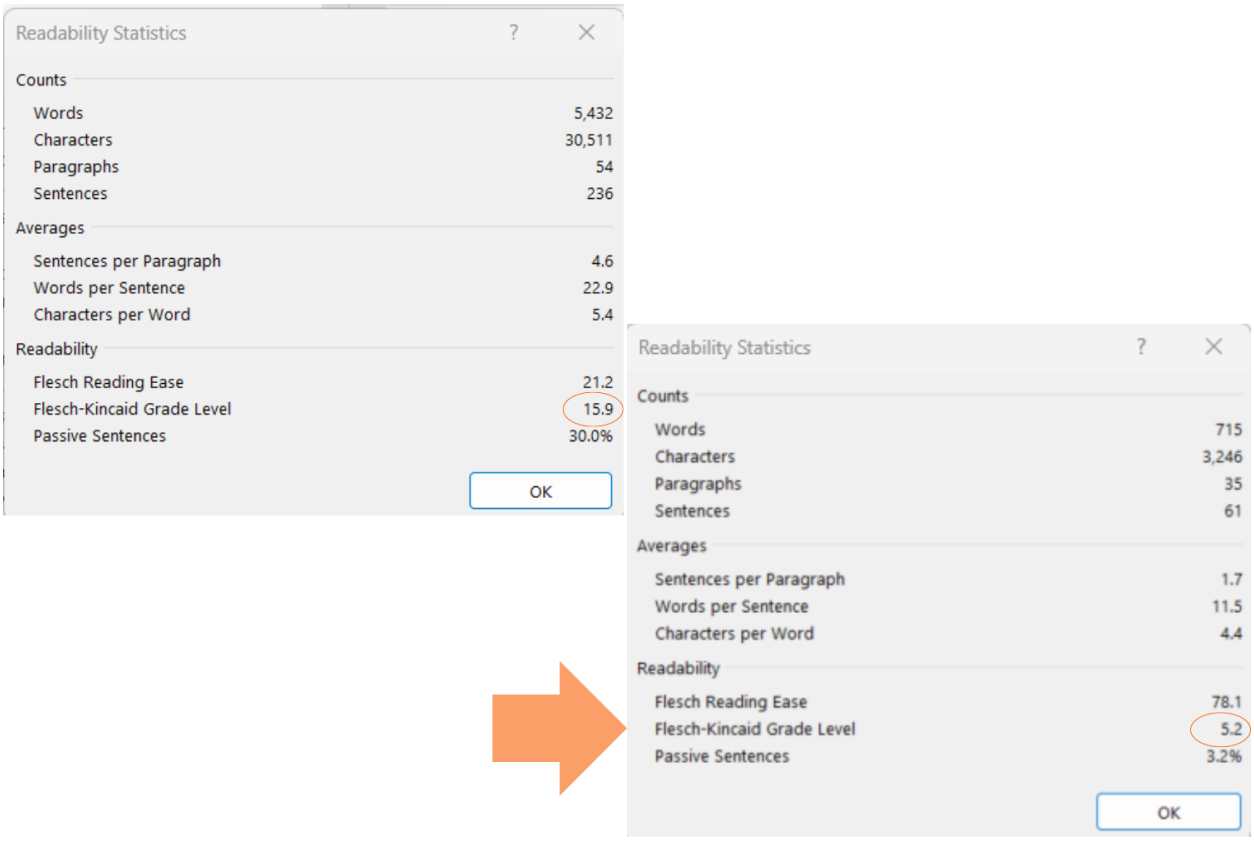
American Glaucoma Society | Patient & Family Resources

Following are some examples of complicated text that I simplified for patients.



Before	After
What is intraocular pressure? The eye is a globe and needs to maintain a level of pressure (intraocular pressure) to maintain proper function. In the past, the level of the intraocular pressure was used to define and diagnose glaucoma. However, in recent decades, it has been recognized that many individuals with glaucomatous optic nerve damage lack elevation of the intraocular pressure. Therefore, intraocular pressure is now considered one of the many risk factors for the development of optic nerve damage. Measurement of intraocular pressure (tonometry) is possible by a variety of techniques, the most accurate of which uses a slit lamp and applanation device. Measurement of the intraocular pressure is used by the ophthalmologist to monitor the adequacy of intraocular pressure-lowering medications. Intraocular pressure in most individuals ranges between 10 and 20 mmHg, with an average of approximately 16 mmHg. Intraocular pressure above 20 mmHg is considered suspicious and may be a precursor to the development of glaucoma.	**What is intraocular pressure?** The eye is like a basketball, and it needs to have the right amount of pressure inside to work properly. Doctors will measure your eye pressure with special tools. If your eye pressure is too high, it could mean you have glaucoma.

What parts of the eye are involved in glaucoma? Three areas of ocular anatomy are key to understanding the group of disorders known as glaucoma. These include the optic nerve (also referred to as the optic nerve head, the optic disk, or the optic papilla), the ciliary body, and the angle of the anterior chamber. The anatomy of the anterior optic nerve is described in detail below. The ciliary body is the mid-portion of the uveal tract lying just behind the iris and is the site of production of aqueous humor. The angle of the anterior chamber refers to the region between the cornea and the iris that contains the trabecular meshwork, the principal site of outflow of aqueous humor from the eye. Aqueous humor bathes the anterior segment of the eye, providing oxygen and nutrition to the region. The aqueous humor is produced at a relatively constant rate by the ciliary body. The trabecular meshwork acts as a sieve of tissue that connects, via the Canal of Schlemm, to the venous system, where the aqueous humor is resorbed into the bloodstream. Intraocular pressure (eye pressure) is dependent on the production of aqueous humor and resistance of aqueous humor outflow through the trabecular meshwork.	**What parts of the eye are involved in glaucoma?** There are three important parts of the eye: the optic nerve, the ciliary body, and the angle of the front part of the eye. 1. The **optic nerve** is like a cable that sends pictures from your eye to your brain. 2. The **ciliary body** is where the eye makes a watery liquid that helps the front part of your eye stay healthy. 3. The **angle of the front part of your eye** is like a tiny space between the clear part of your eye and the colored part. When too much liquid builds up, it can make the pressure in your eye go up, and that can damage your eye.
What is the optic nerve? A characteristic deterioration of the optic nerve associated with cupping and atrophy is the common denominator of all forms of glaucoma (primary or secondary, open or closed angle, chronic or acute). Atrophy of the optic nerve is the primary cause of permanent visual loss in glaucoma. Because of the ready visibility of the anterior optic nerve with any ophthalmoscope, recognition of the early signs of glaucomatous optic neuropathy becomes the single most useful clinical tool for glaucoma screening. With the ophthalmoscope and visualization of the optic nerve head, recognition of the glaucomatous optic nerve is not difficult. The circular optic disk border is visualized as the junction between the nerve head and the surrounding retina. A characteristic deterioration of the optic nerve associated with cupping and atrophy is the common denominator of all forms of glaucoma (primary or secondary, open or closed angle, chronic or acute). *(And this went on for an additional 468 words!)*	**What is the optic nerve?** The optic nerve is like a cable connecting the eye to the brain. When the optic nerve gets damaged, it can lead to permanent vision loss. The good news is that doctors can use a tool to look at the optic nerve and spot the early signs of glaucoma. Glaucoma can also cause parts of the optic nerve to get thinner. This can lead to vision problems, too.