programs to improve cognitive health in later life. The insights from this study can be useful activities can still lead to better cognitive functioning in this yet, despite poorer physical and mental health, certain leisure from deriving cognitive benefits from some leisure activities. The results demonstrate that experiencing physical health challenges and depressive symptoms can prevent older Mexicans individual activities can be predictive of cognitive functioning among older Mexicans. The findings also reveal some marital status and gender differences and similarities in the effect of longitudinal data from the Health and Retirement Study (2000-2016; n=3,578). Physical, mental, and cognitive health outcomes and the essence of the life course concept may vary by their age, race/ethnicity, and household wealth. We focus on married and partnered couples, which better reflect the interdependent co-trajectories processes as a multidimensional time vector of health outcomes and the essence of the life course concept may change due to the onset of their male partner's dementia; stories over time; (2) display how a woman's health profile may change due to the onset of her male partner's dementia; (3) visualize how couple's co-trajectories of health profiles may vary by their age, race/ethnicity, and household wealth; (4) demonstrate an innovative method to create a 3-dimensional health profile cube that presents physical, mental, and cognitive health and the changing trajectories of health profiles over time; (5) present the VIONE methodology to develop a 3-dimensional representation of a patient's health trajectories over time. VIONE stands for the 5 filters that categorize medications as Vital, Important, Optional, Not indicated, Every medication has an indication. This is an electronic health record methodology currently implemented in 122 VA facilities across the nation. Physicians and pharmacists review medications, prioritize medications that merit deprescribing interventions, deprescribe through shared decision making and monitor outcomes. In the VA system, within 7 years, we successfully deprescribed over 1.4 million inappropriate medications impacting over 600,000 veterans, used by over 14000 medical providers, with an annualized cost savings of ~ 132 million US dollars. We incorporate VIONE deprescribing education while training our pharmacy residents, medical students, residents and fellows.
rotating at our VA Medical Center through case based, bedside, didactic and team based multi media learning strategies. The engagement, feedback, demonstrated formal and informal responses remain very promising. Capturing the attention of trainees in their formative years deepens their roots as they spread their wings into practicing safe medication prescribing practices that are current, cutting edge, evidence based and empowering as we train the trainers. We envision medication deprescribing to be part of future academic core curriculum. Our Interdisciplinary team will present compelling data, experiences and outcomes stemming from education of trainees regarding safe medication optimization and deprescribing practices utilizing VIONE methodology that won national and international acclaim.