In August of 2017, what at first appeared to be a long-lasting upper respiratory infection landed her in South Florida’s Boca Raton Regional Hospital with a soaring white blood cell count. Betty’s family, including brother Alex—a former pharmaceutical representative—worried as the physicians inched closer to a diagnosis of cancer.

“At one point, the oncologist turned to my brother and said—‘you know, Moffitt just opened a partnership location somewhere here in South Florida,’” Betty recalls. “My brother had already been online researching top hospitals, and Moffitt was on there. So when we heard Moffitt was close by, the doctors immediately made the arrangements to send me there, which was phenomenal—a blessing.”

“There” is the Moffitt Malignant Hematology and Cellular Therapy (MHCT) Program at Memorial Healthcare in Pembroke Pines. It’s where Betty was diagnosed with a form of acute lymphoblastic leukemia and immediately began treatment under Moffitt guidelines—close to her home in Lighthouse Point.

It’s also close to home for Hugo Fernandez, MD. A specialist in blood cancers and stem cell/bone marrow transplants, Fernandez was raised and did much of his medical training in South Florida before joining Moffitt’s transplant program on its Tampa campus in 2006. When the opportunity arose to oversee the Moffitt/Memorial Healthcare program, he welcomed the move back home.

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“This partnership is my chance to make my own mark in an area that I’ve called home,” says Fernandez, now chair and medical director of Moffitt MHCT. It’s a part of Florida that he says “really wasn’t getting its due from the standpoint of procedures that patients may need.”

When discussions started almost two years ago, Memorial’s state-of-the-art transplant unit was already highly adept at transplanting patients with their own, chemo-treated stem cells (what’s known as autologous transplant). Allogeneic transplants - those involving a donor, whether a relative or unrelated – were done much less frequently. Moffitt’s expertise and experience in both types of transplants were what originally sparked Memorial’s interest in a partnership. But from the beginning, Fernandez says, Moffitt saw the potential to do more.

“We saw this as an opportunity to use Moffitt’s experience from both malignant hematology and transplant, to mold it all together,” explains Fernandez. “That’s why we became the MHCT program. The CT – cellular therapy including bone marrow transplants and more – is looking to the future. Hopefully, we will bring Moffitt’s experience with treatments like CAR T and other new therapies to Memorial as they become more established at Moffitt.”

Care is delivered through a hybrid system. All attending physicians and advanced practice professionals – a total of 14 staff positions – are Moffitt employees. Bedside/floor nursing, laboratory and all other aspects of care are provided by Memorial staff. It works, Fernandez explains, “because we’ve agreed to a consensus, team approach to our work. If someone wants to do something new and different, we decide whether we are all going to do this as a program. In this way, we not only treat the patient but also gather data on that treatment to make sure it’s working as it should. This provides a way to look back at those patients transplanted over the last year and ask if we are getting outcomes that are reasonable for the situation. If not, we tweak the process and start the evaluation phase over again.”

Minor tweaks have already yielded major improvements, according to Fernandez. A simple change in one drug given after transplant led to faster recovery time and cost savings. Bringing in Moffitt Clinical Pathways, guidelines and procedures has streamlined care, reduced costs, persuaded additional payers to enter into care contracts and – most importantly – improved patient outcomes.

In just its first seven months, the Moffitt-partnered program surpassed the number of autologous transplants done in the previous 12 months at Memorial. It also performed more donor (allogeneic) transplants than had been done in the entire history of Memorial’s program.

“So when we heard Moffitt was close by, the doctors immediately made the arrangements to send me there, which was phenomenal – a blessing”
A transplant was the key to her survival. Thankfully, her brother Alex was a perfect, willing match. The only question was where to undergo the transplant procedure. Because the Moffitt/Memorial partnership was so new (it opened just one month before Betty was diagnosed), her insurance did not include it as an “in-network” provider.

Betty made the four-hour trip to Moffitt in Tampa once during her treatment to see and discuss transplant options there. The drive home gave her time to weigh the costs in her head. There would be at least 30 days of apartment or hotel rental post-transplant for daily or weekly clinic visits. Her family would only be able to travel and be with her on weekends. And there’d be a new physician in charge of her transplant care, not the one she’d grown to trust.

“Dr. Fernandez came from there,” she reasoned. “He’s been in it for 30 years. I couldn’t think of being in any better hands. “When your life is on the line, you want somebody that you feel that they’re going to protect you; that they’re going to take care of you, they’re going to do everything in their means to get you through this.”

On Jan. 19, 2018, Betty received her transplant at Moffitt MHCT in Pembroke Pines. Her family was able to be with her as her brother’s cells dripped through the IV into her. They celebrated as MHCT staff brought in a cake for her new, “second birthday.” And they supported her through the 26-day hospital stay while her new marrow engrafted. “The side effects were very, very tough for me,” says Betty. “But they were all there to help me through it.”

Now Betty sees Fernandez at regularly scheduled follow-up appointments, secure in the knowledge that Memorial’s emergency room staff will fast-track her to care should the need arise. The patient and doctor continue their well-established routine, trading language lessons in Greek and Spanish.

Betty’s given name – Eleftheria – is Greek for “freedom.”

She says she’s fortunate to have had the freedom to choose Moffitt care close to home at Memorial in Pembroke Pines.

“I’m just so glad all the stars aligned for me,” she says, “and I hope they do for many other people in South Florida.”

Over the same first seven months, the 30-day survival rate from time of transplant (auto- and allogeneic) was 100 percent. As of April 1, 2018, the 100-day survival rate also was 100 percent. “We’re anticipating very good one-year outcomes as well,” says Fernandez, “because we are also ensuring this is the right patient for the procedure – that they are ready and understand the process up front.”

But perhaps the best measure of success for the partnership thus far has been patients’ willingness to embrace it. Patients who’d earlier been presented the option to receive a transplant at other centers in Florida and beyond are now deciding to proceed close to home at Memorial. “Proximity is such a powerful thing,” says Fernandez. “I think we actually underestimated that. You think - well, you can get this elsewhere in the state of Florida. But sometimes you have to uproot the patient from their job, from their family, from their support system. They may have to spend a month there or three months there. These are all impactful things.”

JUST ASK BETTY.

Through five rounds of chemo over seven months at the Moffitt/Memorial program in Pembroke Pines, she’d developed a sense of security with her care team – “extremely personable, professional, very compassionate.”