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Personalities of Pittsburgh: Russell deploying tech to make difference

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[Alan Russell](#) came to Pittsburgh in 1989 as an assistant professor of chemical and petroleum engineering at the **University of Pittsburgh**, and founded the McGowan Institute for Regenerative Medicine in 2001. During his tenure at McGowan, which was created by Pitt and UPMC, the institute shared a federal \$42.5 million grant to develop better ways of treating burns and to promote wound healing as part of the Armed Forces Institute of Regenerative Medicine. In 2012, Highmark founded the Disruptive Health Technology Institute at **Carnegie Mellon University** with an \$11 million grant, and Russell was named its director. It is there he shepherds new technologies into clinical uses with the goal of reducing health care costs while improving the quality of medical care. His credentials and experience haven't affected his belief in the essential equality of all people, regardless of social status, the idea that the coal miner works every bit as hard as the surgeon.

How did you wind up in Pittsburgh?

I was born in a little village called Bowdon in the north of England. I was in the middle, the brutal middle; I had two sisters, one older, one younger. After finishing my Ph.D., NATO was kind enough to give me a NATO fellowship, which basically lets you go anywhere you want to go. I went to Massachusetts Institute of Technology, and I was offered different jobs, including one in Pittsburgh. It was in the school of engineering at the University of Pittsburgh.

Who were your mentors?

A boss of mine once told me I was not mentorable. I don't know if that was true or not. I never learned to study in high school. I was not exactly a model student, let's put it that way.

You worked in a factory at one point?

I almost didn't go to college. I actually worked in a factory for a while before going to college. I was 18. We made swimming pool electrodes. It was great — some of the best people I ever met.

But eventually the fun of making a tiny bit of money wore off and I decided that I should apply myself and turn myself to the university and get an education.

You enjoyed factory work?

There was nothing bad about working in a factory. It was a phenomenal experience, phenomenal people. I was very proud of being the lowest paid employee in that factory. It was great.

What makes you angry?

It's the people who think because they chose their parents well or because by luck and hard work they rose to a position of some significance in some way that they are better than someone who didn't choose their parents as effectively or weren't as lucky. The idea that someone who works in a coal mine doesn't work every bit as hard as a surgeon is annoying to me. I really passionately believe in this whole concept of servant leadership. If you're lucky enough to find yourself in a position of leadership, it's important to serve the people you're leading. It's not always easy.

How common is the Highmark-Carnegie Mellon University partnership for new medical interventions?

Any good idea is rarely unique. That's really important to understand. And I'm sure it's not unique.

How would you describe your role at CMU and Allegheny Health Network?

I would like to find ways to use the skills I have to help improve the impact of the quality of care that gets provided. The right care at the right time in the right place and at the right cost should be driven by the right research and the right kind of innovation. What could you not like about that?

What impedes improvements in health care?

If you look at the health care system, the one thing everybody would agree upon is that we have great technology, incredible technology. And it is generally available to everybody. But we'd also end up agreeing that by almost every other measure, care is not optimal. What I'm interested in doing is seeing if we can deploy technology that really makes a difference, that will actually be a bigger piece of fixing the broader set of issues.

What excites you about your work?

Personalized medicine is phenomenally exciting. There are so many other technologies that can radically change what happens in health care. That's what drives me. When I wake up in the morning, I think what interesting things could be done that could make health care work more effectively and efficiently.

Is medicine too tradition-bound for meaningful change?

Absolutely, we can and must change as must every health care provider. Look at all these technologies that are available. That represents a lot of change. Everybody faces great challenges in their lives. It would be so depressing if you couldn't create change. And just because change is difficult doesn't mean you shouldn't try to do it. It's not surprising to me that it's challenging to have radical changes taking place.

Title: Director and Highmark Distinguished Career Professor, Disruptive Health Technology Institute; chief innovation officer and executive vice president, Allegheny Health Network

Age: 52

Education: B.Sc., biochemistry and applied molecular biology, University of Manchester Institute of Science and Technology; Ph.D., Imperial College of Science and Technology at the University of London

Experience: Assistant professor of chemical and petroleum engineering, then chairman of the department at the University of Pittsburgh; professor of surgery at Pitt's School of Medicine; founder of the McGowan Institute for Regenerative Medicine; Highmark Distinguished Career Professor in the Department of Bioengineering at Carnegie Mellon University; director of CMU's Disruptive Health Technology Institute

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