

# What music fans should expect on meeting their stars

Author offers an inside look at Rolling Stones' drug-fuelled machinations

BY DEAN GOODMAN

Rolling Stones fanzine writer Bill German accomplished that feat when he was 17, and became part of the band's inner circle during the 1980s, deftly negotiating the byzantine layers of political bureaucracy that cushion the British rock icons. Now 46, the New York native offers a rare inside look at the band's drug-fuelled machinations in *Under Their Thumb — How a Nice Boy from Brooklyn Got Mixed Up with The Rolling Stones (and Lived to Tell About It)*.

German examines a strange period in the Stones' history, including a bitter feud between Mick Jagger and Keith Richards, and the band's transformation into a touring machine.

"Some people wind up leaving the Stones circle in caskets or handcuffs because they think that they can keep up with them on a nightly basis," he told Reuters in a recent interview. German walked away from the band, but not before his physical and mental health suffered to the point where he seriously considered committing sui-

cide at a show.

**As far as I can tell you're the only Stones fan who's crossed to the other side and become part of the inner circle.**

Right! There may have been other fans who've gotten to hang out with them from time to time, obviously. But there was usually sex or drugs or celebrity involved ... You need to bring something to the table to make them want to hang out with you. Amazingly, my thing was this amateur little fanzine.

**But you must have been walking on tiptoes: One false move and they would toss you?**

Absolutely. To be in a room with (Jagger and Richards) at the same time, from '85 to early '89, it was pretty tense. You knew that you just had to be a fly on the wall. You could not try to broker some kind of cease-fire between them. You couldn't even make a joke in the room, because who the hell are you? Especially me. I was just a kid in my 20s.

**The Stones gave you unprecedented access. Do you worry about**

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Bill German examines the Stones' history, including bitter rows between some members.

**breaking confidences and trust with this book?**

The things I talk about — drugs — where's the surprise there? I'm just telling you a different side of the Stones but I think for the most part it's the nicer side of the Stones that people don't know.

**Mick Jagger comes across as distant and hard to deal with.**

Mick is a very complex character in general as well as in this book. Listen, he did lots of nice things for me too, obviously. I think on both sides — the nice things that he did and the not-so-nice things that he did — were mostly motivated by business, which isn't to say that he might not be a nice person in his personal life, that he might not

have liked me on some level. I'm sure he did. I was an innocent kid."

**You talk about this love/hate relationship with Stones fans. Did that impinge upon your enjoyment of the Stones life?**

I had an entire chapter just about the fans, and my editor asked me to cut it out and I did. There were some really hardcore people, one guy I know who really did develop a heroin addiction because he loved Keith so much, just all kinds of crazy people out there."

**You do go into explicit details about the Stones almost driving you to suicide. Did you have qualms about putting that in the book?**

I felt a little weird; mostly for my parents ... I did use humor to broach

that subject. That was the only way I could do it. Even when I was absolutely miserable I did maintain my sense of humour, which I think is something that helped me survive the Stones and all this. One of the many reasons I got out is because so many people around the Stones do not have that sense of humour. They take it so seriously. Even at a young age I knew we're not curing cancer here.

**As a Stones expert, how do you see the Stones' future?**

I honestly think they can go on forever and ever. Really, why not? Like Muddy Waters and Howlin' Wolf. I don't see any problem with them playing until they drop. And they should.

-REUTERS

## Let's join hands and build trauma centres



RICKY'S MYTHS

RICHARD GITONGA



Over the past couple of months, Kenyans have been jolted by a series of tragedies that have cost many lives. From fires, oil tanker explosions and horrific traffic accidents, these incidents have left many reflecting on their safety and contemplating what other collective tragedy lies ahead. Characteristically, the rhetoric and discourse regarding these tragedies has honed in on poor safety systems and inability to manage and contain disaster.

Like the expose of the aftermath of US' Katrina tragedy revealed where the left hand did not know what the right hand was doing, we found ourselves

in total confusion not knowing which public authority or department was responsible for managing the situation. With the benefit of hindsight, the tragedies also exposed the lack of public awareness on basic trauma management.

One area that skipped close scrutiny was the preparedness of our local hospitals and medical centres to accommodate and handle emergency situations. Having had the opportunity to experience the emergency receptions of some hospitals in the past, I was amazed at how far we have to go to achieve the equivalent of an "ER" TV Soap drama kind of situation. Most Kenyans dread

the thought of ever having to find themselves in the unfortunate situation of being reluctant guests at any local hospital emergency reception. Although the panacea to most problems is divine intervention, a little competent help from earthly mortals and their medical tools would be welcome.

Depending on what sides of the coin you are looking at, our current circumstances provide a huge opportunity for practitioners in the medical field to partner with entrepreneurs to invest in trauma centres in strategic locations in key urban centres.

Such facilities would be equipped to provide comprehensive emergency medical services to patients suffering from traumatic injuries. The increasing investment in establishing trauma centres worldwide is as a result of the realisation that traumatic injuries often require complex and multi-disciplinary treatment, including surgery in order to give the victim the best possible chance for survival and recovery.

Trauma is any life-threatening occurrence, either accidental or intentional, that causes injuries. The leading causes of trauma are motor vehicle accidents, falls and assaults.

Trauma is a leading cause of death in our country.

Assuming that entrepreneurial doctors don their mental marketing caps, trauma is a large potential segment in the medical services industry. Just like a well known entrepreneurial and visionary doctor conceptualised and actualised the Nairobi Women's Hospital to cater for a segment with unique needs, there lies an opportunity to establish a trauma centre that will cater for the needs of the country's growing population.

**Complementary services**

Ideally, this facility may be inspired by the doctors trained in such specialties such as neurosurgery and orthopedic surgery, since this cadre of medical practitioners most probably has the incidence of first line contact with trauma patients.

It is well worth noting that the handful of neurosurgeons in this country is arguably amongst the busiest crop of professionals. The demand for their services far outstrips supply. In this regard, they probably need to consider scaling up their service delivery by exploring creative alternative ways

to serve a much larger patient base. Rather than investing individually in advanced medical technology, they can establish a central trauma centre and benefit from what economists call the economies of concentration. Their services can be complemented by orthopedic surgeons and other medical professionals at subsidized costs.

Although the operation of such centres is said to be expensive, the centralisation of trauma services with the use of a common and shared "back office" system would probably reduce operational costs significantly. Over and above this, the establishment of a trauma centre that is positioned to serve the East African region would have an immediate potential customer base bearing in mind all the conflict inflicted trauma and also the high incidence of road accidents.

In conclusion, *vivre sans reve, qu'est ce?* (What is life without a dream?). As Shakespeare said, "There is a tide in the affairs of men, which, taken at the flood, leads on to fortune... We must take the current when it serves, or lose our ventures."

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