

Revolutionary pain relief cream and two-minute exercise to cure and prevent lower back pain

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Dr Helene Bertrand has specialised in pain treatment after suffering from ongoing lower back pain for 37 years. Here in conversation with Open Access Government, Helene explores her lower back pain journey and the ways she has found to heal herself

Helene studied at Université de Montréal medical school for the 1st and 2nd year, from 1960 to 1962. Then, at age 19, she married her 1st husband, who decided to go to Boston, so she did her 2nd year again at Harvard because Université de Montréal medical school offers a 5-year course, whereas the course at Harvard and at McGill is a four-year course. At the end of that year, her husband wanted to go back to Montréal so she did her 3rd and 4th year at McGill, from which she graduated in 1965. The only university she really enjoyed was Harvard. At Université de Montréal and at McGill, if she asked a question, people would look at their watch as if to say: 'There she goes again!'. If she asked a question at Harvard, people would come up to her at the end of the class and say: 'That was an interesting question. I wonder how we could solve that.' In the discussions that followed, they "invented" several of the treatments and procedures that are now in use. She then did a rotating internship at the Royal Victoria Hospital in Montréal and started working as a family practitioner in 1966. In 2020, she retired, after 55 years of practice. Helene dedicated years of her life to studying pain to understand better what caused it and how she could help people suffering.

It all began with prolotherapy

Helene suffered from lower back pain for 37 years following the birth of her first child, but despite trying everything, she couldn't get the pain to go away. In 2003, she started working on prolotherapy after using it to relieve her own pain. This is when she started helping patients, and her demand skyrocketed. After conducting a research project on rotator cuff tendinopathy, she realised it was twice as good as physiotherapy in improving pain and function in the shoulder. She then published this paper on rotator cuff tendinopathy "Dextrose Prolotherapy Versus Control Injections in Painful Rotator Cuff Tendinopathy"(1) and started getting referrals. It was then that Helene decided she was going to concentrate on treating pain. For the last twelve years of her medical practice, that's all she did. Helene explains that she really enjoyed helping people in this way because it allowed her to invent all kinds of other things, like the cream.

In 2011, she learned from Dr John Lyftogt how to do perineural injections of buffered 5% dextrose to treat neuropathic pain. To minimize the risk these injections might pose for diabetics, she changed the solution to 5% mannitol and started injecting it around the nerves supplying painful areas. Often, before the needle was out of the skin, the pain was

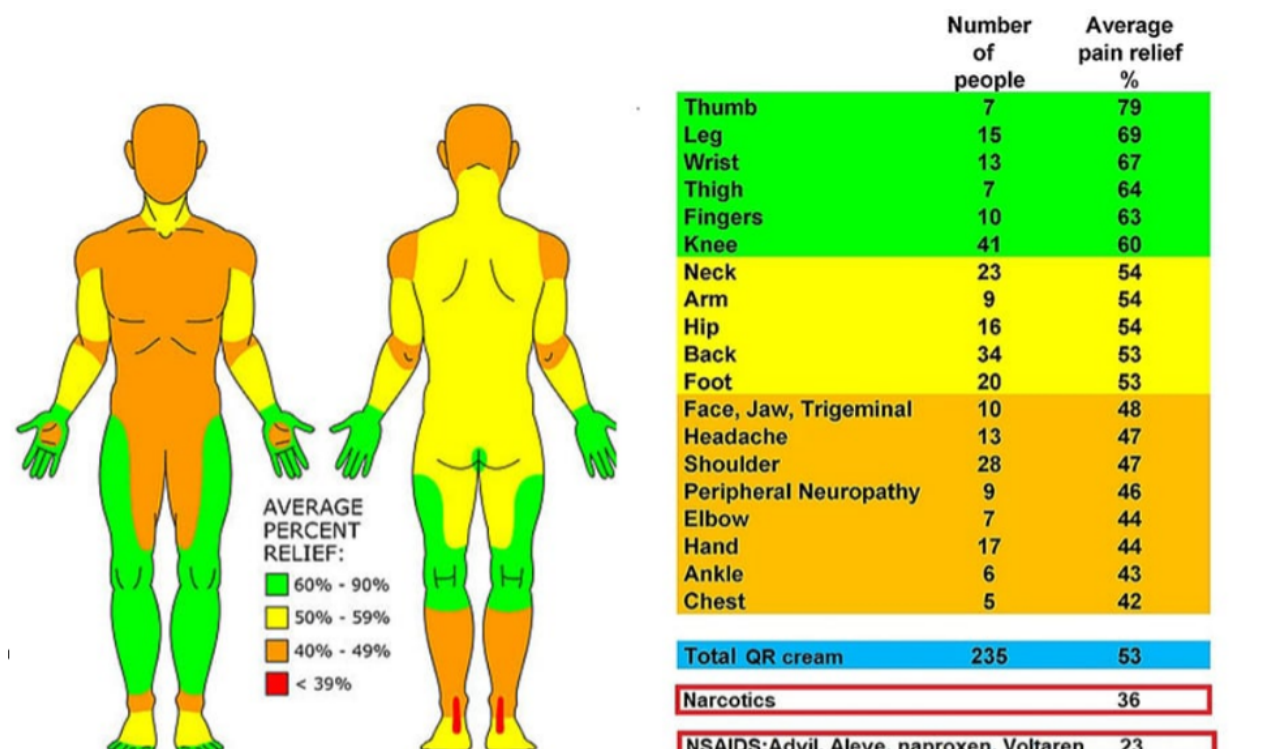
gone. Marylene Kyriazis, a pharmacist who was observing her, on seeing how quick and complete the pain relief was, said: “you know, people don’t like injections, why don’t we put the mannitol in a cream?”. After trying 16 different base creams, in 2014, they came up with QR cream, a quick pain relief cream made using Mannitol. This cream is revolutionary because no other cream on the market contains Mannitol. It also has a cumulative effect meaning the longer you use it, the less you need to use it!

What the chiropractors don’t want you to know

She also came up with a two-minute exercise that could relieve lower back pain instantly. In her own words, Helene explains that ‘Nobody was treating the area that needed to be treated, except, of course, the chiropractors who don’t want you to know about this.’ Whilst presenting the exercises at the Canadian Pain Society meeting, three chiropractors shook their heads at Helene because she was revealing the tricks of their trade, the source of their income.

In conversation with Helene Bertrand: Which is more effective, the QR cream or the exercise?

It depends on what you’re treating. The reason I developed the exercise is that the cream is a cream. The active ingredient, Mannitol, starts off on the skin, then it must penetrate through the skin to reach the nerves that are in pain. The deeper it penetrates, the more it is diluted by the interstitial fluid. I’ve actually proven in “Topical Mannitol Reduces Capsaicin- Induced Pain: Results of a Pilot-Level, Double-Blind, Randomized Controlled Trial”(2) that it shuts down the TRPV1(capsaicin) receptor, which is your body’s main pain, itch and inflammation receptor. It works amazingly well on people who have pain in their upper back, neck, hands, wrists, knees, or feet where the pain-causing nerves are close to the skin surface.



For example, the statistics for the knee are better than 60% pain relief. And if you consider that diclofenac, Voltaren, has a 23% pain relief, that's pretty good. I gave the cream to 235 of my patients with 289 different painful conditions and it worked for almost all of them. Of course, it won't remove the pain of kidney stones, stomach aches, or heart attacks, as the nerves supplying these deep structures are too far from the skin surface for the mannitol to reach them. Here is an image you can find that shows where the cream is most effective:

Is that just in one application, or is that regular use?

This has to be applied regularly until the pain is gone. The longer you use it, the better it works – and that is different from every other product. Pills, for example, are habit-forming, or have plenty of other side effects. This cream provides gradual pain relief and is completely safe. I can tell you that the average pain relief is 53%. I can also tell you that the average, time to provide relief is 17 minutes. I cannot tell you the average duration of pain because some people put the cream on once, and their pain disappears.

You can't divide by infinity. I do have a median duration, which is 4 hours. However, the further away the pain is from the skin surface, the less the Mannitol works.

Could you talk about your own experiences of pain?

In the 37 years of lower back pain I suffered, nothing was working. I would get some relief for a short time, and then the pain would return. I didn't know what to do to prevent it from coming back. It was costing me a lot of time and money in physiotherapists and chiropractors and massage therapists. I was thinking; this is crazy. I need to find out how I can fix myself. And this is what I did: [watch me explain how to quickly and effectively diagnose and treat lower back pain in the video here.](#)

You can check it out at "self treatment of chronic low back pain"(3) The problem with most doctors is they don't think outside the box. That is because the medical schools they go to don't promote that. Most medical schools don't have the attitude that you should be learning all the time. And if we don't know it, we should investigate it. But that's another problem.

References

1. Bertrand H, Reeves KD, Bennett CJ, Bicknell S, Cheng AL. Dextrose Prolotherapy Versus Control Injections in Painful Rotator Cuff Tendinopathy. Arch Phys Med Rehabil. 2016 Jan;97(1):17-25. doi: 10.1016/j.apmr.2015.08.412. Epub 2015 Aug 22. PMID: 26301385.
2. Bertrand H, Kyriazis M, Reeves KD, Lyftogt J, Rabago D. Topical Mannitol Reduces Capsaicin-Induced Pain: Results of a Pilot-Level, Double-Blind, Randomized Controlled Trial. PM R. 2015 Nov;7(11):1111-1117. doi: 10.1016/j.pmrj.2015.05.002. Epub 2015 May 12. PMID: 25978942.
3. Helene Bertrand, K Dean Reeves, Rajneet Mattu, Remerlita Garcia, Mahir Mohammed,

Ellen Wiebe, An-Lin Cheng; Self-Treatment of Chronic Low Back Pain Based on a Rapid and Objective Sacroiliac Asymmetry Test: A Pilot Study Cureus. 2021 Nov 11;13(11):e19483 doi: 10.7759/cureus.19483. eCollection 2021 Nov.

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