Rebuilding Your Confidence
Lyme, Autoimmune, and Mental Health
What is Lyme and how does it affect mental health?

Lyme is a spirochete bacterial infection, primarily transmitted by ticks. Left untreated, or insufficiently treated, it crosses the blood brain barrier and impacts one’s neuro-psychiatric health. Complicating the disease, ticks often carry other infections besides Lyme, such as Babesia, Bartonella, and Ehrlichia. All these can result in symptoms similar to mental illness.

Common symptoms include:
- anxiety
- depression
- irritability
- easy tearfulness
- sleep disturbances
- eating disorders

In some cases of undetected Lyme, patients may exhibit:
- Obsessive Compulsive Disorder (OCD)
- paranoia
- panic attacks
- auditory/visual hallucinations
- full blown mania

Cognitive difficulties are also common, such as:
- decreased attention span
- slow processing
- visual/spatial (e.g. getting lost easily)
- short term and working memory
- word finding/generation and communication difficulties
- decline in executive functions (e.g. planning and organization)
- confusion
- decline in overall intellectual performance
- fatigue
Real People. Real Struggles.

Lyme is uniquely and particularly challenging because it has a tendency to isolate the patient, leaving them misunderstood by others. The symptoms and struggles are real, but perhaps more than any other illness I’ve worked with, its validity is questioned, its affects misunderstood—even by loved ones. This is something I hear from patients consistently and it’s extremely important they have people in their lives that understand them, validate their struggles, and listen without questioning them or jumping to their own conclusions.

When I personally went undiagnosed with Lyme disease for years, the struggles I encountered were real. I have a unique understanding of autoimmune and Lyme disease and its impact on emotional health. Over the years, I’ve enjoyed living life, a wonderful marriage, and meaningful work as a registered Lyme Literate Therapist. In my experience, it’s difficult to understate the importance of validating the real struggles of real people as the first steps toward healing.

Katie Chandler, MSW
Lyme Literate Counselor
Common struggles I’ve seen:

Isolation and being misunderstood: difficulty maintaining healthy relationships. Difficulty maintaining a place in society because of inconsistencies in wellness

Stigma from friends or institutions: “It’s always Lyme with you” “Hypochondriac” “Lazy” “You’re just depressed” “It’s all in your head”

Fear of never getting better: Fear to even be hopeful. Fear that comes from lacking a plan or failure to see progress

Frustration from missing out on life: When someone is no longer able to do the things they used to do, or should be able to do, at their stage of life—be it college, romantic relationships, building a career, being a mother or father

Trauma exacerbating Lyme symptoms: Often patients aren’t aware of existing trauma, or the connections between their trauma and Lyme

Poor Treatment: Misdiagnosis, one dimensional or ineffective treatment, lack of support from insurance companies

Jessica* struggled with low grade depression and fatigue. She also suffered from shin pain and eye issues. She was 32 years old and had recently suffered a miscarriage—when she came in she wanted to talk through the grief. After an initial evaluation I decided to refer her to my Lyme Literate practitioner in order to be tested for Lyme and coinfections. To her surprise, it was confirmed that she had bartonella, a coinfection of Lyme, which likely and covertly contributed to her miscarriage. Once treated, there were clear improvements to her symptoms and she was able to carry a healthy baby to full term.

CONFIDENCE AFTER GRIEF
I believe in a holistic approach that focuses on a patient’s strengths. The mind, body, and spirit need to be addressed for a successful outcome. I work with my clients to recognize symptoms and develop an integrative model of therapy that will best address the whole person and their specific needs.

The plan patients receive includes a treatment team of specialists to address underlying physical illnesses that may include internal medicine, acupuncturists, nutritionists, chiropractors, and holistic practitioners.

I am comfortable providing counseling from a faith based perspective and incorporating prayer when it fits my client’s existing beliefs and needs.
Effective mental health therapy techniques I use include:

**CBT**—Cognitive Behavioral Therapy focuses on solutions, encouraging patients to challenge distorted cognitions and change destructive patterns of behavior.

**Expressive Therapy**—the use of art, music, creative writing and play within the context of psychotherapy.

**EMDR**—Eye Movement Desensitization and Reprocessing, an integrative psychotherapy approach that has been extensively researched and proven effective in the treatment of trauma. EMDR is a set of standardized protocols that incorporates elements from many different treatment approaches.

**Holistic**—a therapeutic approach which addresses interactions and connections of a person’s mind, body, and spirit.

**Integrative**—combined approach to psychotherapy that brings together elements of specific therapies. Integrative therapists believe there is no single approach that can treat each client in all situations. Each person needs to be considered as a whole, and counseling techniques must be tailored to their individual needs and personal circumstances.

**Care Coordination**—referring and devising a treatment team of holistic practitioners.

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**CONFIDENCE AFTER ABUSE**

A professional woman at 51 years old, Debbie* had a background of sexual abuse and autoimmune issues.

Fatigue was always an issue, and for a long time during her long commutes to work she had to pull off to the side of the road to take naps. She began seeing me for EMDR therapy to treat the trauma treatment related to the abuse. After one session of EMDR, she reported that she no longer had to take breaks on her commute. She was even sleeping better at night and was feeling more empowered in her relationships. EMDR removes emotional blocks and helps the brain process old traumas effectively. For Debbie, removing that emotional block helped her experience immediate physical improvement.
Treatment: ‘Aha’ Moments From a Therapist

Things are not always as they first seem with Lyme and Autoimmune disease. That’s one of the most important things I’ve learned as a Lyme Literate Counselor. Over time, you learn to dig deeper, investigate causes, and connect the dots. Here are a few ‘Aha’ moments I’ve had:

Trauma and Lyme/Autoimmune is very much connected

On the road to getting effective counseling, emotional or traumatic experiences sometimes pop up. Many times patients are unaware of the toll that trauma or other stressors take on their physical health. This allows the Lyme/Autoimmune infection to gain ground when the body’s immune system is in a constant state of fight or flight.

Stress hormones have been found to inhibit the production of cytokines, the agents of the immune system that respond to danger. This causes these cells to overreact and create an inflammatory response that is exaggerated, creating a larger problem than the original perceived danger. Unresolved emotional issues and negative emotional patterns can put a huge stress on the immune system. The body maintains this fight or flight mode by pumping the body with adrenaline and
other stress hormones. While short term exposure to adrenaline allows the body to do tremendous things, long term exposure is detrimental to your health. Clearing these emotional issues can release the immune system from suppression.

**Clients often come in for emotional counseling, unaware it stems from physical illness**

I often see clients seek therapy for their depression, anxiety, or lack of sleep, unaware that their mental health symptoms stem from an autoimmune illness. To become well, the body must be rid of the bacteria. Counseling alone won’t resolve the bacterial infection. A clinician who understands the difference and realizes their client is not mentally ill can be the best advocate to help them obtain proper treatment.

**Antibiotics need a wing man**

Antibiotics are an important tool in the fight against Lyme/autoimmune disease. But it works best alongside an advocate who understands the patient and is educated on potential hindrances. One example is MTHFR, a genetic mutation. People with Lyme/autoimmune often have this genetic abnormality, which complicates their body’s ability to detox. This is why long term antibiotics alone are not effective. Patients with this issue usually have accumulated heavy metals into their system, which makes eradicating the disease more difficult.

**Therapies traditionally used for emotional problems can do wonders for Lyme/Autoimmune:**

EMDR—Eye movement Desensitization and Reprocessing is a proven therapy for trauma, anxiety, phobias, illness, panic attacks, PTSD and many other emotional problems. EMDR therapy uses bilateral stimulation, right/left eye movement, or tactile stimulation, which repeatedly activates the opposite sides of the brain, releasing emotional experiences that are “trapped” in the nervous system. This detoxes the neuro-physiological system, lets it free itself of blockages, and reconnect.
Lyme/Autoimmune affects the entire family

With Lyme, many patients have an emotional roller coaster of diagnosis and treatment. Seldom is just one person affected by the disease. When one person has the illness, the treatment and ordeal takes an emotional toll on the entire family. Having gone through the illness myself, and with my loved ones, I am comfortable helping caregivers feel confident about what to expect.

Keep an open mind. There is always something to learn about the problem

I’ve had patients come in seeking help with depression, only for us to discover together they have an issue with vitamin deficiency, hormone imbalance, or autoimmune disease. Some patients come in for Lyme treatment and are helped when co-occurring mood disorders are treated and addressed. Other patients have come in to resolve a substance abuse addiction, where we later find it is masking root problems of chronic illness or trauma.
CONFIDENCE AFTER TRAUMA

27 year old Anita* was misdiagnosed for 10 years. She was diagnosed with neuropsychiatric Lyme disease. It’s true there were a number of psychiatric issues: she experienced some of the suicidal and self-harming symptoms associated with specific Lyme coinfections, such as Bartonella, Babesia, and Ehrlichia, but not all issues seemed to be Lyme related. She was seeing a Lyme specialist and undergoing treatment, but she was not gaining the ground her Lyme Literate Medical Doctor expected to see.

Through our counseling sessions, it was revealed that some of the psychiatric symptoms she had been experiencing were in fact Dissociative Identity Disorder related to a trauma. Getting to the root of the emotional trauma that had her body seized in a state of fight or flight was crucial in beginning to heal. Over the course of a few months, with counseling and Lyme treatment, her body began to respond much better to treatment. One modality that was especially helpful was Fasical Counterstrain, which allows the blood flow back into the brain and calms the parasympathetic nerve that normally becomes enflamed when a patient attempts to talk through a trauma. This is a key component for someone with both Lyme and trauma. Major steps were made in her treatment because ultimately she was able to open up about the trauma.

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