



International  
Coaching  
Week

# The 120 Days of Lyme Borreliosis

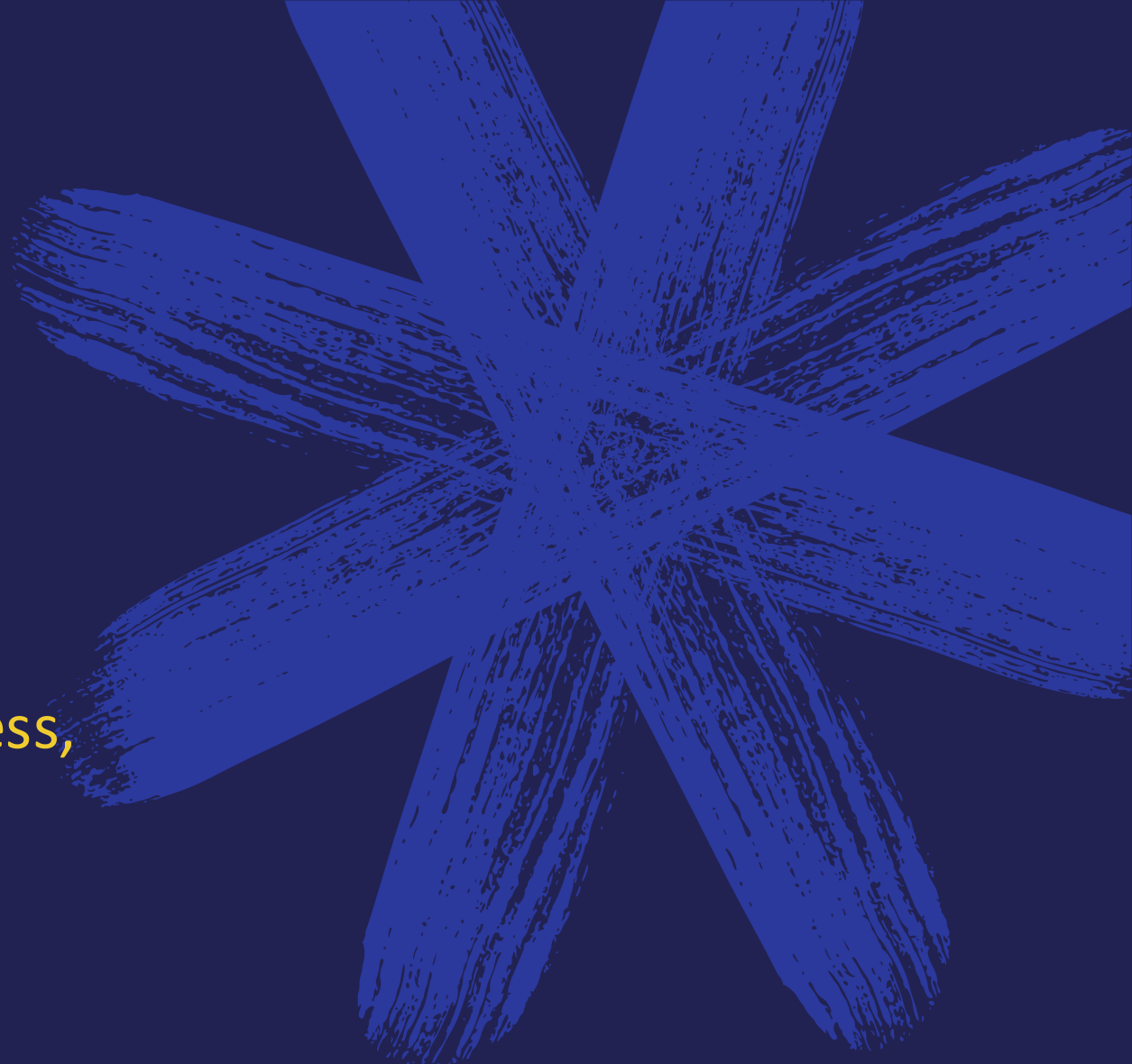
A Coaching Journey Through Helplessness,  
Hope, and Recovery



*...a small change can  
make a big difference!*

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2026 May 12



**icf** International  
Coaching  
Federation

# October Shift



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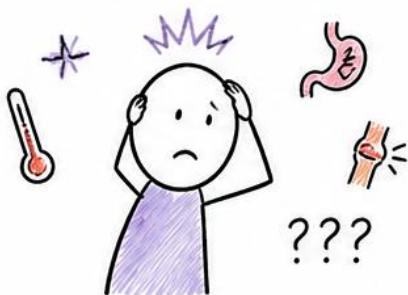
01

The 120 Days of Lyme Borrelia

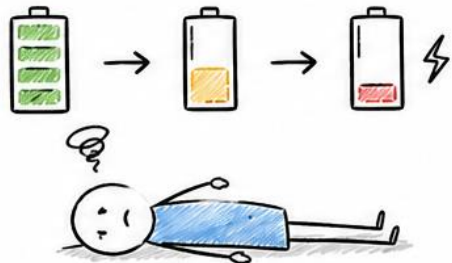
A Coaching Journey Through Helplessness, Hope, and Recovery

# 120 Days with Lyme Borreliosis - what happened

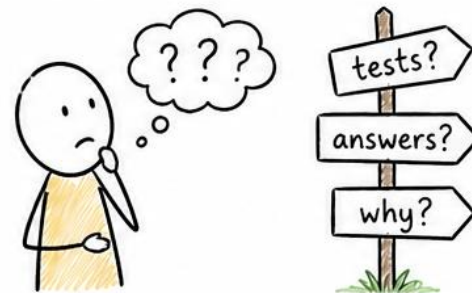
1 sudden onset of unexplained symptoms



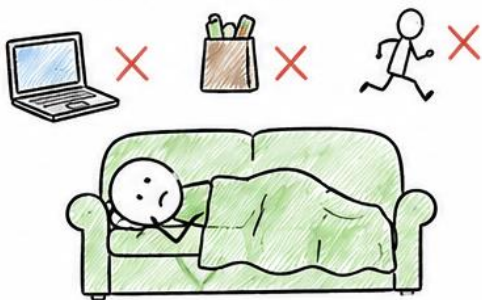
2 rapid loss of energy and stability



3 uncertainty without clear answers



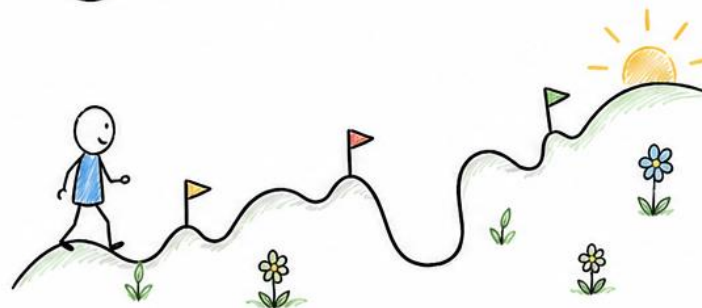
4 daily functioning significantly limited



5 strong psychological impact (fear, helplessness)



6 slow, non-linear recovery



♥ not only physical - deeply psychological ♥

**SYMPTOM SEVERITY SCALE**

0 = no symptoms	
0,5 = very mild	
1 = mild	
2 = moderate	
3 = severe	
4 = very severe	

➔ **SINCE APPROXIMATELY NOVEMBER 4, 2025:**

- Fatigue, tingling in arms and legs, decreased performance (unable to do sports as usual)
- no headache, no fever, no other neurological symptoms

➔ **LYME DISEASE SEROLOGY:**

- IgG = 1123 (very high; reference value 18)
- IgM = negative

Test	Result	Reference	Interpretation
IgG	1123 U/ml	<18 U/ml	positive
IgM	3 U/ml	<18 U/ml	negative

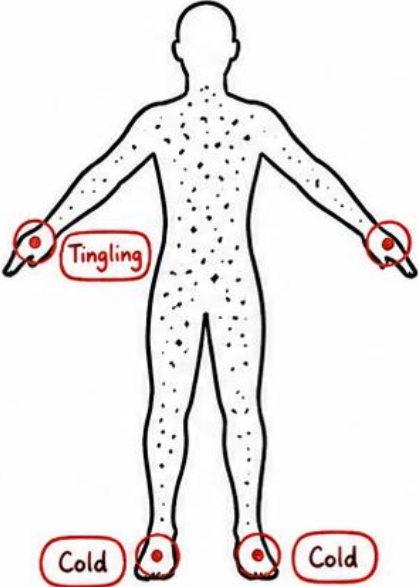
Date	Burning in hands	Pain in thumbs	Tingling/numbness in hands	Burning/tingling in legs	Leg strength (0 = normal, 4 = very weak)	Walking stability (0 = normal, 4 = unsteady)	Pain or tightness in the neck
31/10	0	0	0	0	1	0	0
1/11	0,5	0,5	0,5	0,5	0,5	0,5	0
2/11	1	1	1	1	1	1	0
3/11	2	1	1	2	1	1	1
4/11	2	1	2	2	2	2	1
...	...	...	...	...	...	...	...
10/11	3	2	3	3	3	3	1
...	...	...	...	...	...	...	...
28/11	1	1	1	3	3	3	1

➔ **MEANING:**

- the body has a high level of antibodies (has encountered Borrelia at some point)
- but there is no clear evidence of a recent/acute infection

➔ **DOCTOR'S CONCLUSION:**

- suspected Lyme disease
  - specifically: early disseminated form (= infection may have spread in the body)
- musculoskeletal form (= symptoms mainly fatigue, performance, limbs - not severe neurological involvement)



2025

18	23	28	33	38	43	48	1	6	11	16	21
Day 1	34	67	100	133	166	199	232	265	298	331	364

2026

▲ Today

**Sport tracking**



Cycling (goal reached) ▶ 12 Oct  
 Treadmill (significant drop in energy) ▼ 6 Nov  
 Walking (down) ○ 14 Nov

**Condition / Mental tracking**




**Medical**



25 May ◆ Suspected Lyme disease infection without symptoms

10 Nov + Medical examination by a primary care physician (including blood tests and specimen collection)

Waiting for laboratory results, with no medication prescribed → 11 days

20 Nov 🧪 Laboratory test result

20 Nov ↓ Referral to hospital infectious disease department for suspected neuroborreliosis; two hospitals recommended.

6 Jan ↑ Hospital 1: earliest available appointment on January 6, 2026.

2 Feb ↑ Hospital 2: earliest available appointment at the beginning of February 2026.

9 days ➡ Awaiting examination and medication


28 Nov ❤️ After extensive calling, I secured an appointment at Hospital 3 on November 28, 2025, outside the recommended hospitals.

Treatment with DoxyHexal → 20 days

Follow-up examination / phone consultation ◆ 12 Dec

Follow-up examination / phone consultation ◆ 9 Jan

Follow-up serologic testing 🩸 22 May



ICW2026

12 May ★ The 120 Days...

# Lyme Borreliosis



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# 02

The 120 Days of Lyme Borreliosis

A Coaching Journey Through Helplessness, Hope, and Recovery

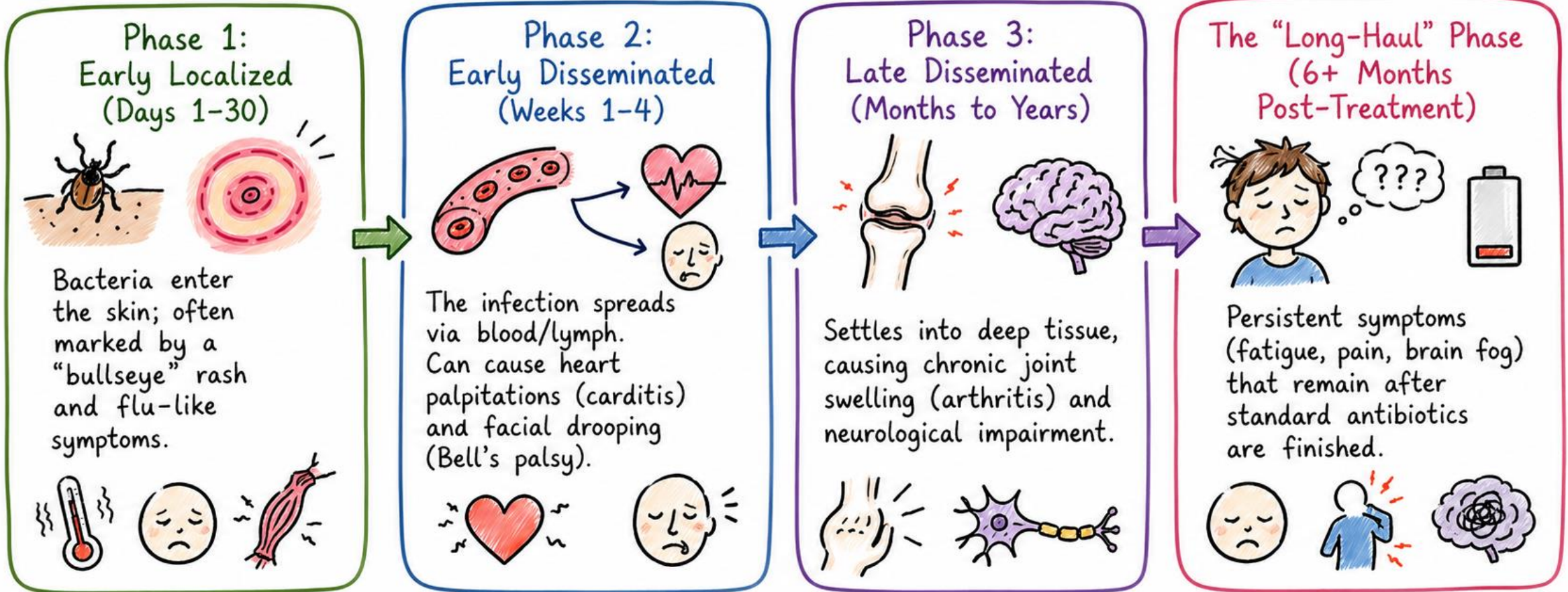
**Q1: How confident are you in coaching clients with long-term illness? (poll)**



# LYME DISEASE: From Infection to Chronic Impact



## 1 The Infection Timeline



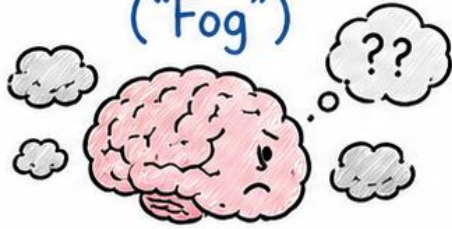


2.

# How It Affects the Whole Body



## The Brain ("Fog")

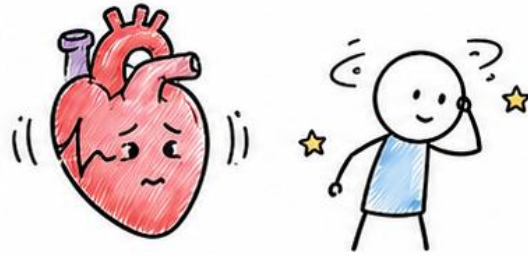


Persistent inflammation acts like a "low-grade fire," causing

- memory loss
- confusion
- extreme sensitivity to light or sound.



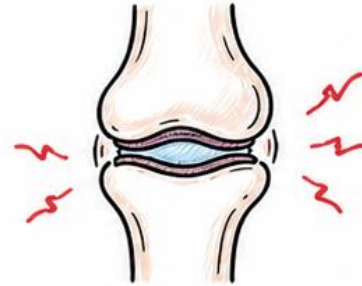
## The Heart & Energy



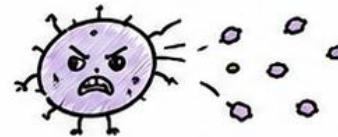
Disrupts the "automatic" system (ANS), leading to

- a racing heart 
- dizziness when standing (POTS) 
- "air hunger." 

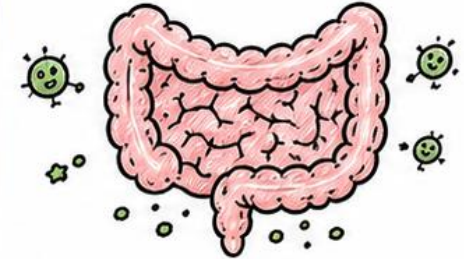
## The Joints



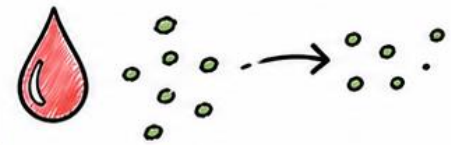
Bacterial "debris" trapped in tissue tricks the immune system into a state of permanent attack, causing chronic swelling.



## The Gut



Disruption of the intestinal barrier ("Leaky Gut") can leak toxins into the blood, fueling body-wide inflammation.



Lyme disease doesn't just affect one part - it impacts the whole body.





# 3.

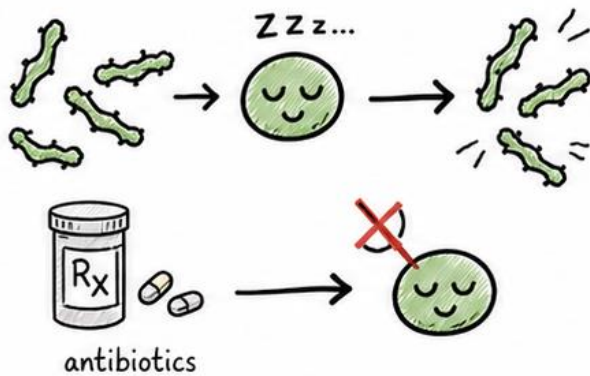
# Why Do People Stay Sick?



Current research (2025-2026) points to three main “drivers” of long-term illness:

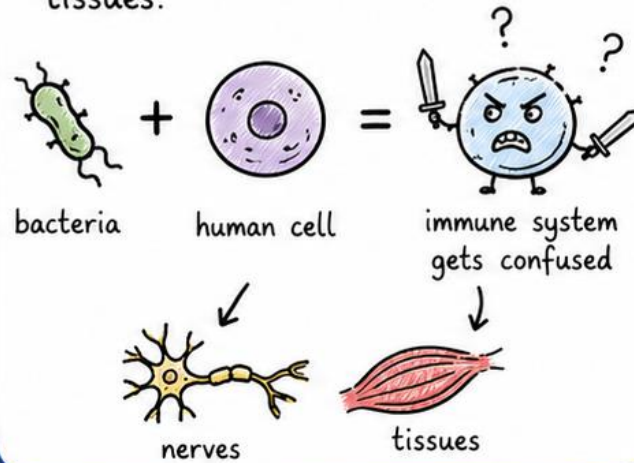
## 1 Persister Bacteria

Some Borrelia cells enter a “deep sleep” (dormant state), allowing them to survive standard antibiotic treatments and reactivate later.



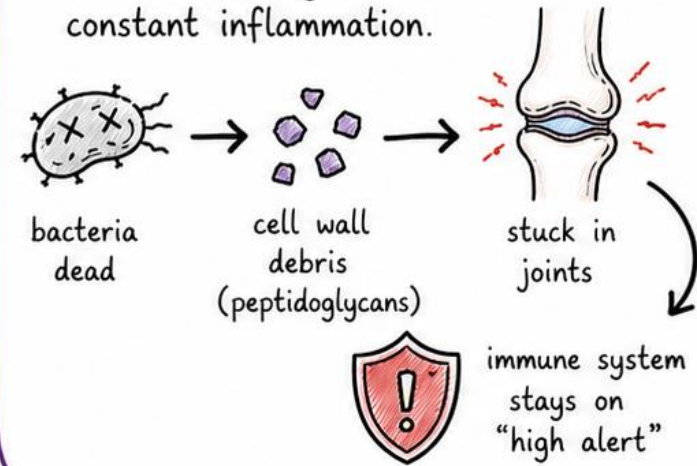
## 2 Molecular Mimicry (Friendly Fire)

The bacteria look similar to healthy human cells. The immune system gets confused and begins attacking the body’s own nerves and tissues.



## 3 The “Molecular Ghost” Effect

Even after the bacteria are dead, their heavy cell walls (peptidoglycans) can stay stuck in joints for years, keeping the immune system in a state of “high alert” and constant inflammation.



These three “drivers” work together, keeping the body stuck in a cycle of inflammation.



### 3. Global Incidents & Trends (2024-2026)

The burden of Lyme disease is significantly higher than official surveillance suggests due to frequent underreporting.

#### United States



- The CDC reported a nearly **70% increase** in confirmed cases recently.
- While confirmed annual cases hover around **90,000**, experts estimate the true number of diagnosed and treated cases is likely over **500,000** annually as of 2025/2026.

CONFIRMED CASES  
~90,000 annually



ACTUAL CASES  
(Estimated)  
OVER  
**500,000**  
annually!

#### Europe



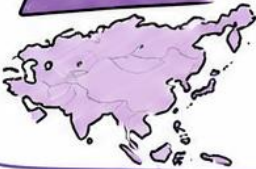
- Estimates suggest roughly **130,000 to 200,000** cases are reported annually, though the actual number is likely much higher.
- In 2025, countries like **Germany** and **Czechia** saw record-breaking spikes, with some regions reporting a **60% increase** in cases compared to previous years.

Record-breaking spikes in 2025!

 GERMANY ↑

 CZECHIA ↑

#### Asia



- While still relatively rare, "**imported**" cases (travelers returning from endemic zones) are rising.
- Domestic cases are also reaching new peaks in **South Korea** and **Japan**.

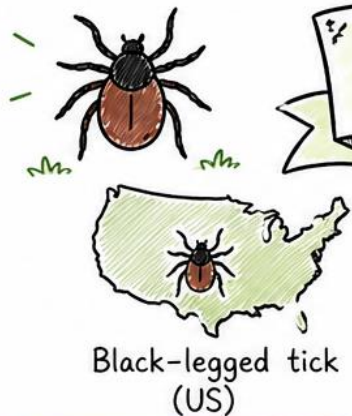


 SOUTH KOREA ↑

 JAPAN ↑


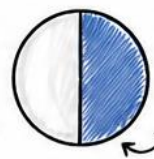


Underreported. Underestimated. But the numbers are rising.

# The Vector: Ticks and Infections

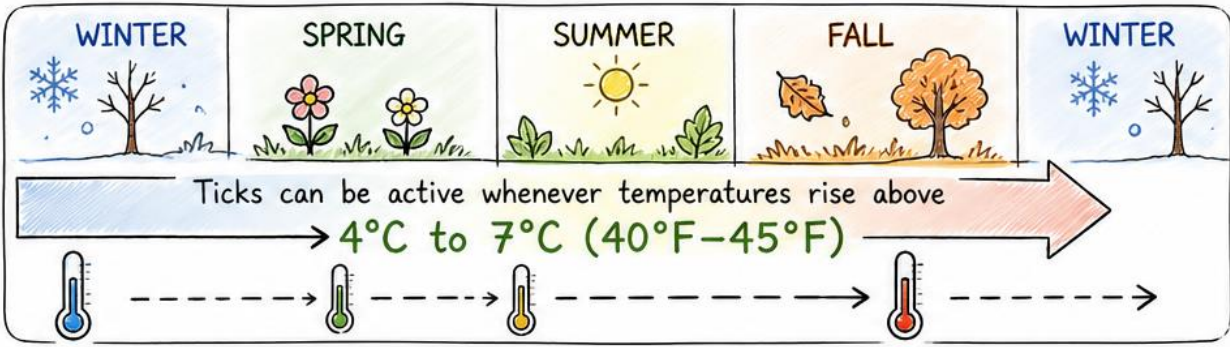


The primary culprit is the *Ixodes* tick (Black-legged tick in the US; Castor Bean tick in Europe).

**Infection Rates:** Research in the Northeast US (2024/2025) found that up to **50%** of adult ticks and **25%** of nymphs (young ticks) carry the *Borrelia* bacteria.

Adult ticks	Nymphs (young ticks)
 <p>up to <b>50%</b> carry <i>Borrelia</i> bacteria</p> 	 <p>up to <b>25%</b> carry <i>Borrelia</i> bacteria</p> 

**Seasonality:** Ticks are now remaining active longer due to warmer winters. They become active whenever temperatures rise above **4°C to 7°C (40°F–45°F)**.



WINTER | SPRING | SUMMER | FALL | WINTER

Ticks can be active whenever temperatures rise above **4°C to 7°C (40°F–45°F)**

Warmer winters = longer tick activity = higher risk of infection.



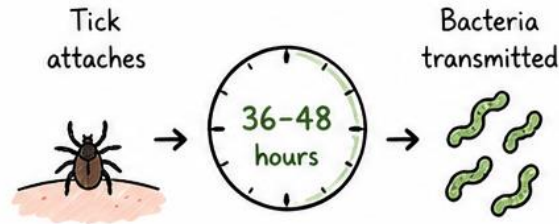
# Infection Timeline (The "Golden Window")



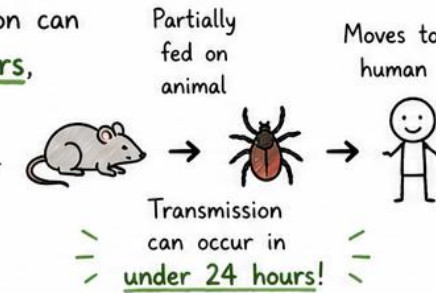
★ Latest research emphasizes that while the "48-hour rule" is a good guideline, it is not an absolute safety guarantee.

## 1 Attachment Time:

Traditionally, it was believed ticks must be attached for **36-48 hours** to transmit the bacteria.



However, 2025/2026 literature reviews suggest transmission can occur in **under 24 hours**, especially if the tick was "**partially fed**" on another animal before moving to a human.



## 2 Early Symptoms:

Typically appear **3 to 30 days** after a bite.



Possible early symptoms:

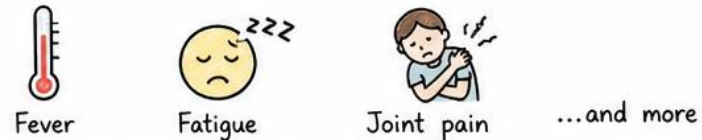


## 3 The "Bullseye" Rash:

Only about **70-80%** of patients develop the classic *Erythema migrans* rash.



Many infections present only with "**summer flu**" symptoms.

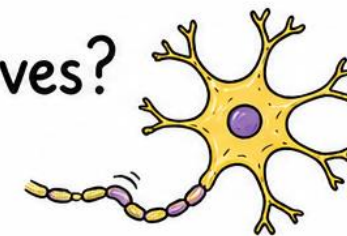


Ticks can transmit bacteria faster than we once thought. Check early. Don't wait for symptoms or a rash!





# How do they penetrate all the way into nerves?

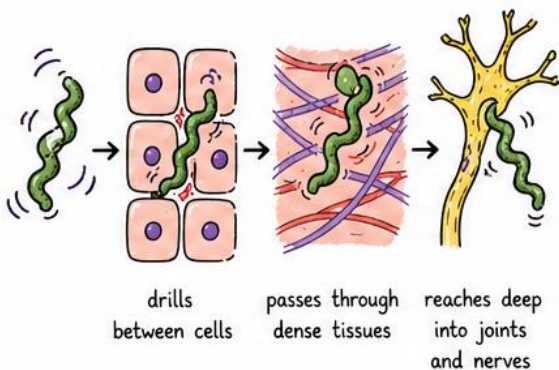


## Three key properties:

### 1 Spiral "drilling" movement

Thanks to periplasmic flagella, they:

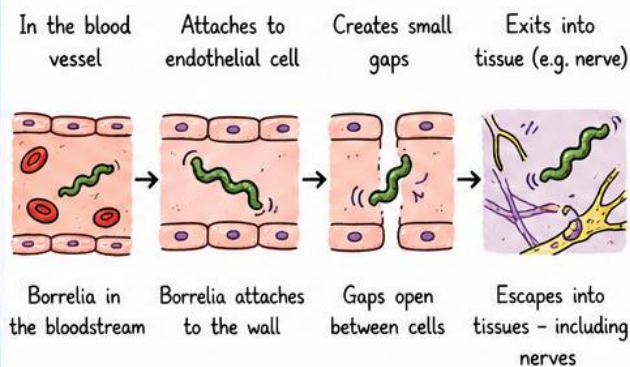
- rotate like a screw,
- drill between cells,
- are able to pass through dense tissues,
- penetrate **deep** into muscles, joints, and nerve roots.



### 2 Ability to pass through vessel walls

Borrelia can attach to endothelial cells and create **small gaps** between them.

Through these gaps they escape from the blood into tissues - including nerves.

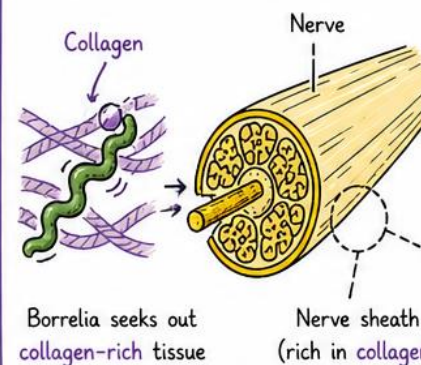


### 3 They love collagen

Nerve sheaths and surrounding connective tissue contain a lot of **collagen**.

Borrelia seek out this environment and therefore may cause:

- burning,
- tingling,
- pain in fingers and limbs,
- weakness.



#### Possible symptoms

- burning
- tingling
- pain in fingers and limbs
- weakness



Borrelia are built to be **sneaky**: they **drill**, **slip through**, and **hide** where it hurts most - in **nerves**.

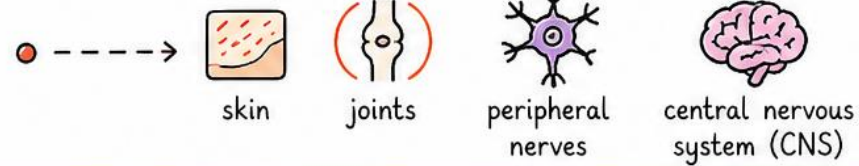




# How treatment works and why antibiotics differ



Different antibiotics penetrate different tissues.



## 1 Doxycycline – stops the growth of Borrelia

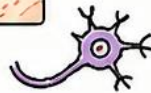


- blocks bacterial protein synthesis (bacteriostatic effect)
- penetrates tissues and nerve roots well
- weaker penetration into cerebrospinal fluid



For whom and when?

- skin forms
- peripheral neuropathies
- some nerve forms outside the CNS



## 2 Ceftriaxone – directly kills Borrelia



- disrupts the bacterial cell wall (bactericidal effect)
- excellent penetration into cerebrospinal fluid
- used especially in more severe neurological forms



For whom and when?

- neuroborreliosis
- meningitis
- significant neurological symptoms



## 3 Amoxicillin – safe but weaker on nerves



- bactericidal effect
- worse penetration into the nervous system
- excellent for early skin forms



For whom and when?

- children, pregnant women
- mild skin/joint forms



The right antibiotic is chosen based on where Borrelia has settled and the severity of symptoms.



# Why Coaching



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# 03

The 120 Days of Lyme Borreliosis

A Coaching Journey Through Helplessness, Hope, and Recovery

# What clients experience:

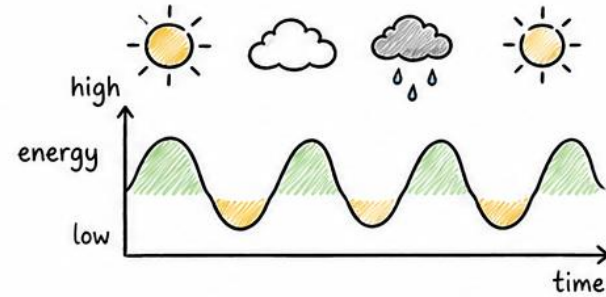
1 uncertainty about future



2 loss of control over body



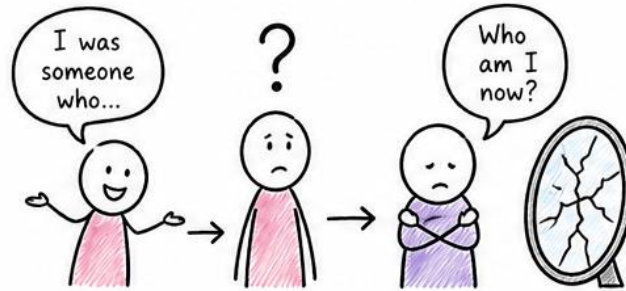
3 fluctuating symptoms and energy



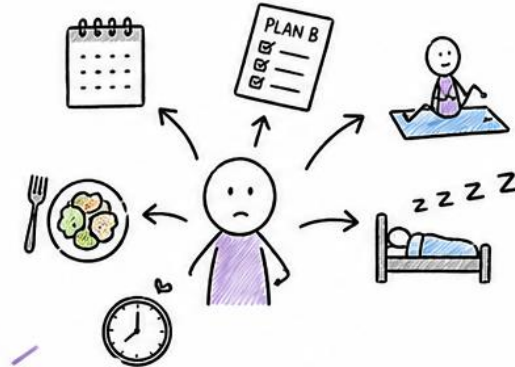
4 emotional instability (fear, frustration)



5 identity disruption



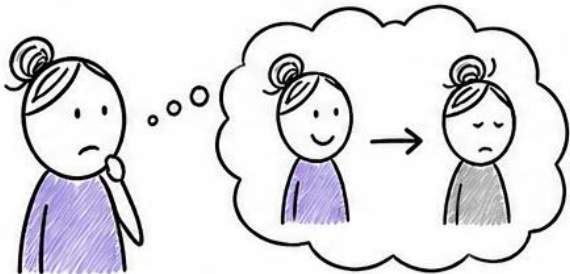
6 need for constant adaptation



♥ It's not just a bad day.  
It's a daily reality.

# Why this matters for coaching:

1 long-term illness changes mindset and identity



2 clients experience loss of control



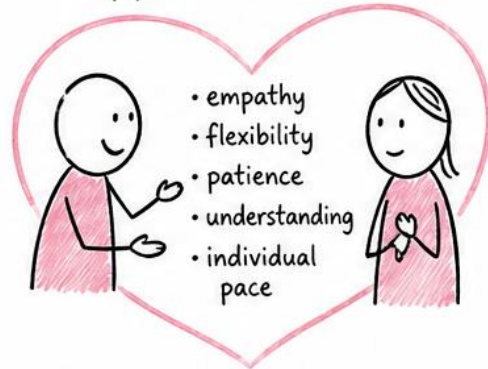
3 uncertainty creates psychological pressure



4 standard coaching often does not fit



5 need for different approach



6 opportunity to support resilience and recovery



Different approach. Deeper impact. Better outcomes.

# Boundaries: What this is - and is not:



coaching perspective  
on illness experience



not medical advice  
or diagnosis



positive psychology  
for inner resources



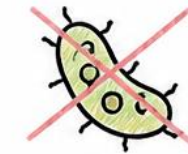
not treatment  
or replacement  
of care



supportive tools  
for coping



not claim of  
curing Lyme disease

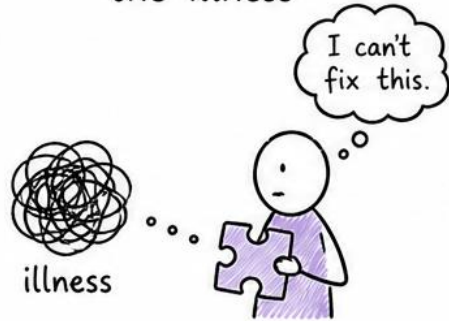


Coaching supports  
the **person**,  
not the diagnosis!

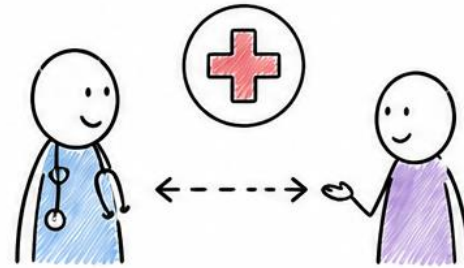


# Role of the coach

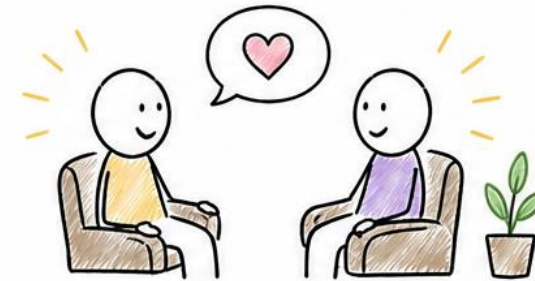
1 not solving the illness



2 not replacing medical care



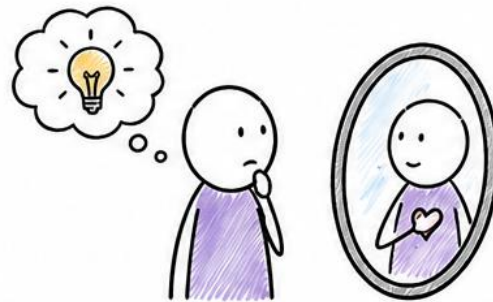
3 creating psychological safety



4 holding space for uncertainty




5 supporting reflection and awareness



6 helping client stay engaged



👉  I walk beside you, not in front of you. 👈

# Positive Psychology



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# 04

The 120 Days of Lyme Borreliosis

A Coaching Journey Through Helplessness, Hope, and Recovery

# LEARNED OPTIMISM

by Martin Seligman

## HOW LEARNED HELPLESSNESS WAS DISCOVERED



1. INESCAPABLE SHOCK  
Dogs received shocks they could not escape.



2. ESCAPE POSSIBLE LATER  
Later, they were placed in a situation where escape was easy.



3. THEY GAVE UP  
Many dogs did not try to escape, as if they had learned that nothing they did mattered.

## KEY IDEAS

- ✓ Dogs given uncontrollable shock later gave up trying to escape.
- ✓ The key issue was lack of control, not pain alone.
- ✓ Helplessness could be cured by teaching that action works again.
- ✓ It could also be prevented through prior mastery, called immunization.
- ✓ Similar patterns were later shown in people.



## TAKEAWAYS

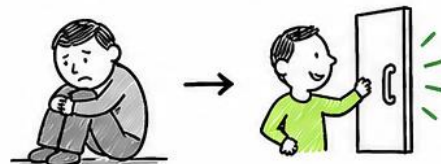
### 1 CONTROL MATTERS.



Nothing I do makes a difference.

When people or animals experience that their actions do not change outcomes, they may stop trying.

### 2 HELPLESSNESS IS LEARNED, SO IT CAN BE UNLEARNED.



It shows that giving-up behavior is not fixed; it can be reversed through new experiences of effectiveness.

### 3 RESILIENCE CAN BE BUILT.



Earlier experiences of mastery can protect against later helplessness, which means resilience is developable.

### IN SHORT




Helplessness is learned. Optimism and resilience can be learned too.



# LEARNED OPTIMISM

by Martin Seligman

## THE DIFFERENCE



**PESSIMISTS**  
see setbacks as

- PERMANENT
- WIDESPREAD
- PERSONAL

VS.

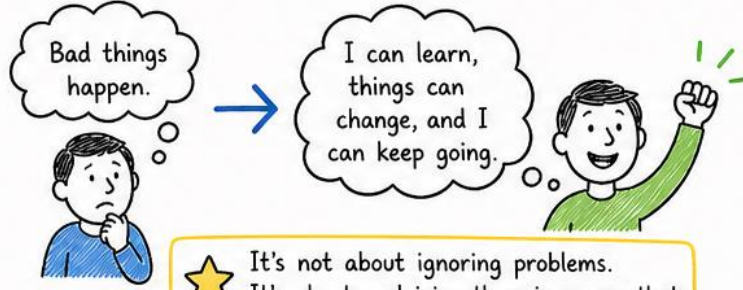


**OPTIMISTS**  
see setbacks as

- TEMPORARY
- SPECIFIC
- DUE TO CIRCUMSTANCES

## WHAT IS LEARNED OPTIMISM?

Learned optimism is the belief that setbacks are temporary, specific, and often caused by circumstances — not permanent, pervasive, or personal.



★ It's not about ignoring problems. It's about explaining them in a way that helps you keep moving forward.

## KEY TAKEAWAYS

### 1 YOUR EXPLANATORY STYLE MATTERS.

The way you explain bad events influences whether you give up or keep going.



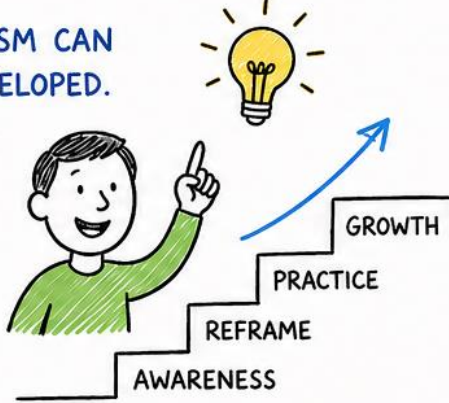
### 2 HELPLESSNESS GROWS FROM PESSIMISTIC THINKING.

When people believe nothing they do matters, they become passive and discouraged.



### 3 OPTIMISM CAN BE DEVELOPED.

Optimism is not fake positivity, but a set of thinking skills that can be learned.



# LEARNED OPTIMISM

by Martin Seligman

## WHAT IS EXPLANATORY STYLE?



It's the habitual way people explain why bad and good events happen.

## THE THREE DIMENSIONS

<p><b>1. PERMANENCE</b></p> <p>Is it permanent or temporary?</p> <p>Permanent → hopelessness Temporary → hope</p>	<p><b>2. Pervasiveness</b></p> <p>Is it everywhere or limited?</p> <p>Universal → hopelessness Specific → hope</p>	<p><b>3. PERSONALIZATION</b></p> <p>Is it my fault or not my fault?</p> <p>Personal → hopelessness Not personal → hope</p>
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## HOW EXPLANATIONS SHAPE YOU

**PERMANENT + UNIVERSAL + PERSONAL**

→ I'll never get better.  
→ Everything goes wrong.  
→ It's all my fault.  
**= HOPELESSNESS**

**TEMPORARY + SPECIFIC + NOT PERSONAL**

→ This will pass.  
→ This is just in this area.  
→ It's not my fault.  
**= HOPE**

💡 Seligman argues that the key difference between people who stay helpless and those who recover is not the setback itself, but how they interpret it.

## TAKEAWAYS

**1 HOW YOU EXPLAIN EVENTS SHAPES YOUR RESILIENCE.**

The same setback can lead to helplessness or recovery depending on your explanatory style.

**2 HOPE COMES FROM TEMPORARY AND SPECIFIC EXPLANATIONS.**

When you see bad events as limited in time and scope, they are less likely to spread into despair.

**3 OPTIMISM IS MEASURABLE AND CHANGEABLE.**

Your explanatory style can be identified and improved, which makes it useful for learning and practice.

**IN SHORT**

♥

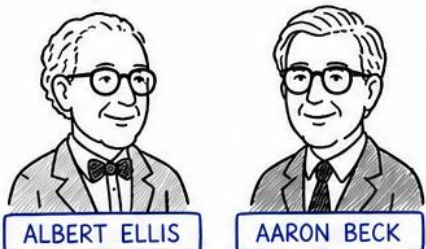
Your explanations today shape your hope tomorrow.

# LEARNED OPTIMISM

by Martin Seligman

## A SHIFT IN TREATMENT

Ellis and Beck helped shift treatment toward changing conscious thoughts.



ALBERT ELLIS

AARON BECK

Focus: change the way you think, change the way you feel.

## WHAT FUELS DEPRESSION?

### 1. PESSIMISTIC EXPLANATORY STYLE

It's all my fault. It will never change. Everything is bad. Everywhere.



### 2. RUMINATION

Why does this keep happening? I can't stop thinking about it.



TOGETHER = DEEPER, LONGER DEPRESSION

## HOW COGNITIVE THERAPY WORKS

1

NOTICE AUTOMATIC THOUGHTS

I failed. I'm a failure.



2

CHALLENGE WITH EVIDENCE



3

CREATE BETTER EXPLANATIONS

I failed. this time, not always, I can learn.



4

REDUCE RUMINATION



5

CHANGE DEEPER ASSUMPTIONS

I must be perfect.



I prefer to do well, but I'm human.



RESULT: LESS DEPRESSION, MORE RESILIENCE, LOWER RISK OF RELAPSE.

## TAKEAWAYS

### 1 THOUGHTS SHAPE FEELINGS.

How you think about failure, loss, and helplessness...



...can deepen depression.

...or reduce it.

### 2 PESSIMISM + RUMINATION IS A DANGEROUS COMBINATION.

Personal  
Permanent  
Pervasive

+ Rumination (brooding)

= More likely to fall into depression.



### 3 THINKING HABITS CAN BE CHANGED.

Cognitive therapy teaches practical skills:

- ✓ Spot automatic thoughts
- ✓ Challenge with evidence
- ✓ Reattribute causes
- ✓ Distract from rumination
- ✓ Question unrealistic assumptions



New habits, better outlook, stronger resilience.

### IN SHORT



Change your thinking, change your life.



# LEARNED OPTIMISM

by Martin Seligman

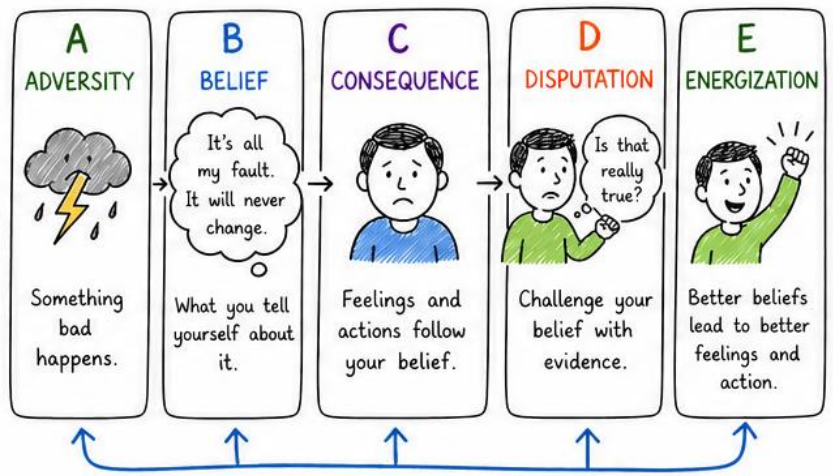
## THE SKILLS OF LEARNED OPTIMISM



- ✓ Flexible optimism, not blind positivity.
- ✓ Use optimism for achievement, morale, health, and leadership.
- ✓ Avoid optimism when the cost of failure is high.
- ✓ Challenge automatic negative beliefs.
- ✓ Respond to adversity with more energy and hope.



## THE ABCDE MODEL



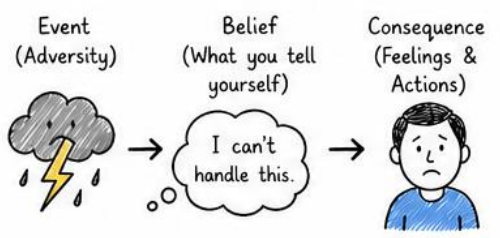
## THE HEART OF DISPUTATION

Argue against pessimistic beliefs using:

- Evidence**  
What facts support or don't support this belief?
- Alternatives**  
What else could explain this?
- Implications**  
What are the consequences of believing this?
- Usefulness**  
Does this belief help me or hurt me?

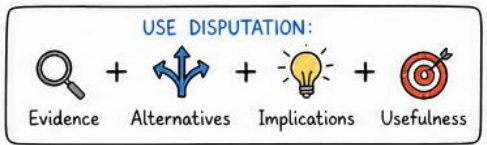
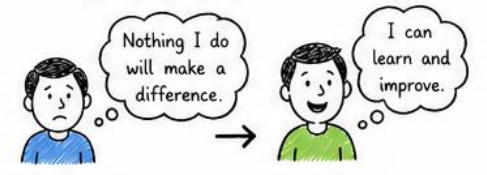
## TAKEAWAYS

### THOUGHTS ABOUT ADVERSITY SHAPE EMOTIONS AND ACTION.



Beliefs, not events alone, drive giving up or moving forward.

### PESSIMISTIC BELIEFS CAN BE CHALLENGED.



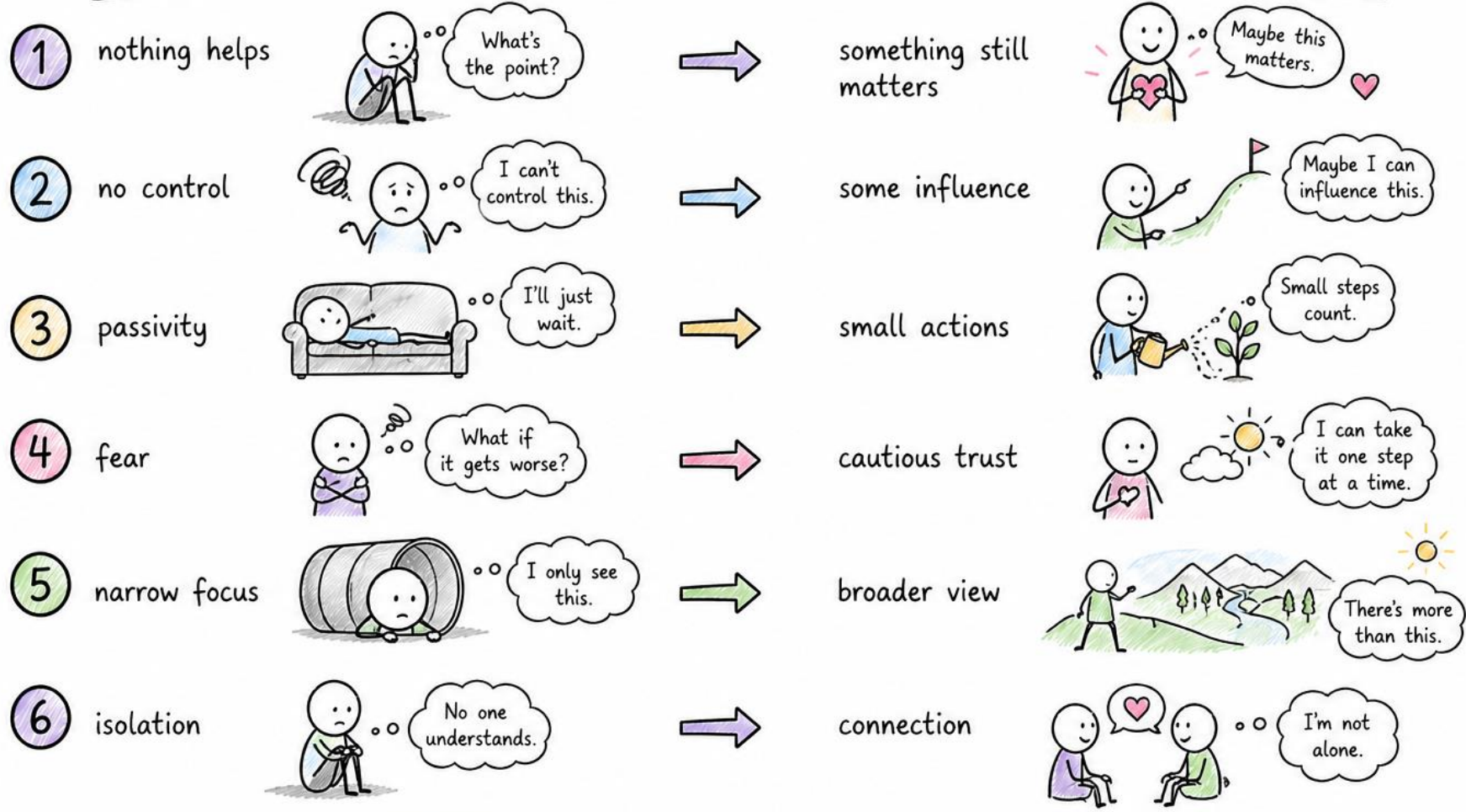
Test it, question it, change it.

### OPTIMISM SHOULD BE USED WISELY.

- |   |  |
|---|--|
| <p><b>USE OPTIMISM WHEN...</b></p> <ul style="list-style-type: none"> <li>✓ You need resilience</li> <li>✓ Action</li> <li>✓ Morale</li> <li>✓ Better health</li> <li>✓ Leadership</li> </ul> | <p><b>USE REALISM WHEN...</b></p> <ul style="list-style-type: none"> <li>✗ The cost of failure is high</li> <li>✗ Safety is at risk</li> <li>✗ Accuracy is critical</li> </ul> |
|---|--|

The goal is not permanent positivity, but choosing optimism when it helps and realism when risk is high.

# From helplessness to constructive coping



recovery starts psychologically

# Positive psychology in recovery

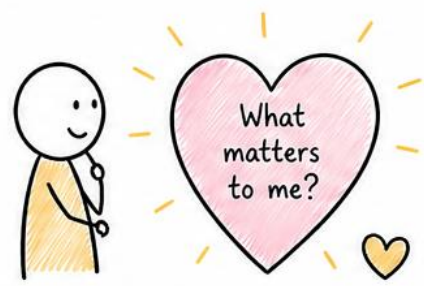
1 hope  
→ future possibility



2 resilience  
→ adapt and continue



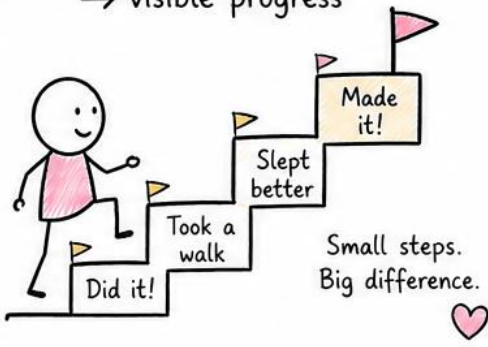
3 meaning  
→ reason to move forward



4 strengths  
→ what still works



5 small wins  
→ visible progress



6 self-efficacy  
→ sense of influence



Recovery is not about being perfect.  
It's about **growing** - every day.



# Tools + Examples



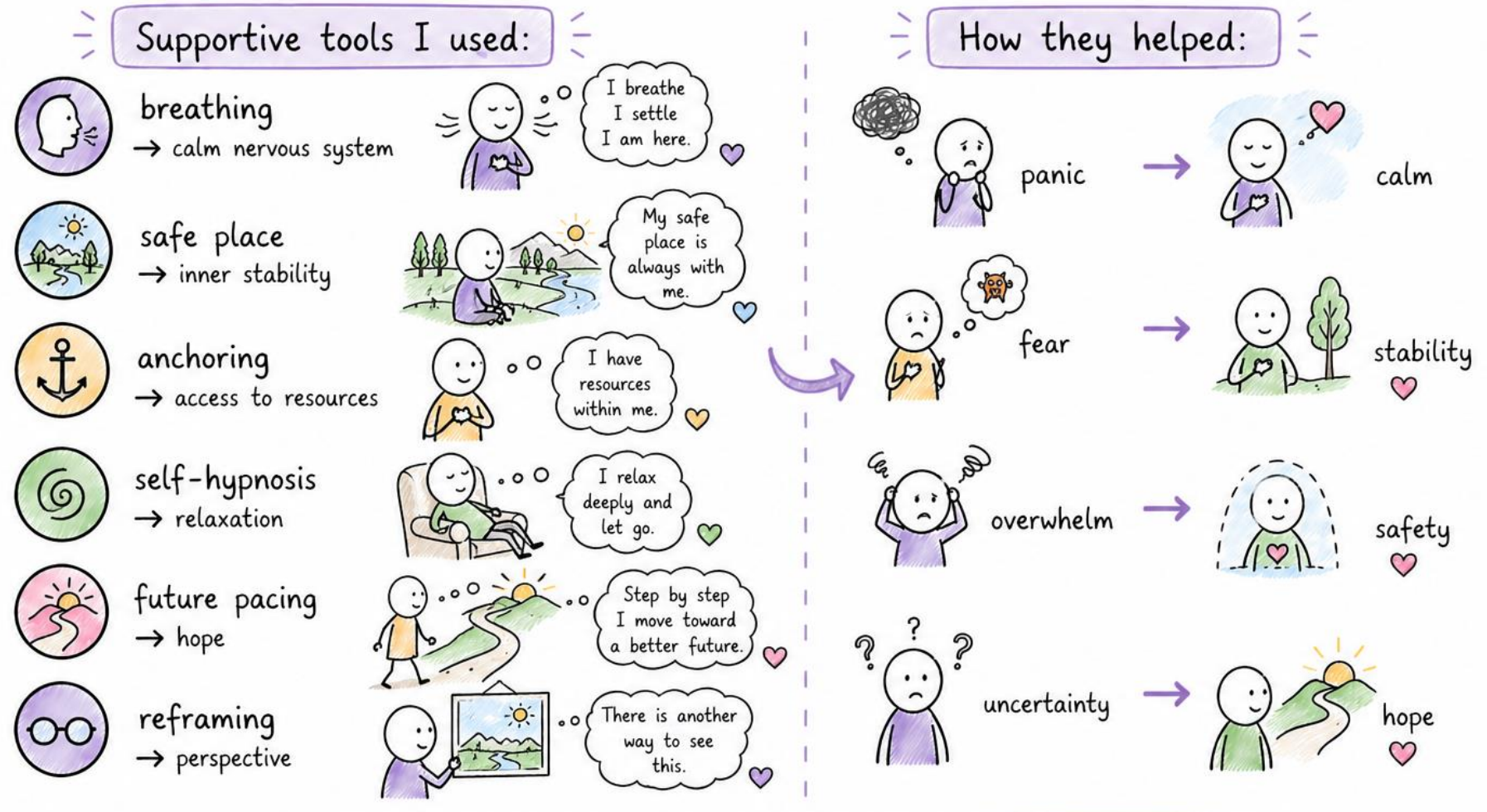
[www.projecoach.cz](http://www.projecoach.cz)

# 055

The 120 Days of Lyme Borreliosis

A Coaching Journey Through Helplessness, Hope, and Recovery

# Supportive tools and How they helped



Support the person, not the diagnosis!

# Coach Developed Recovery Plan

A structured, holistic approach to support Client during healing from Lyme Borreliosis

## 1 Gratitude & Agency Journaling



Practice "Learning Optimism" by recording daily wins. Use color-coding and brief text for context, specifically highlighting how your own actions influenced these positive outcomes.

## 2 Emotional Intelligence Tracking



Utilize the How We Feel app to better identify, monitor, and understand emotional patterns during recovery.

## 3 Biofeedback Meditation



Use the Muse S headband to deepen your meditative state and improve neurological stillness.

## 4 PNS Breathwork



Implement Light Affirmation Breath to stimulate the Parasympathetic Nervous System, moving the body from "fight or flight" into a restorative healing state.

## 5 Energy & Uncertainty Navigation



Use pacing and resilience strategies to manage unpredictable energy "crashes" and the mental strain of a fluctuating recovery timeline.

## 6 Restorative Self-Hypnosis



Apply specific self-hypnosis techniques designed to prime the subconscious for physical health and cellular recovery.

# Gratitude & Agency Journaling

recording daily wins.

Date ♥	Burning in hands	Pain in thumbs	Tingling numbness in hands	Burning tingling in legs	Leg strength (0=normal, 4=very weak)	Walking stability (0=normal, 4=unsteady)	Pain or tightness in the neck	3 good things that happened and how I helped make them happen
31/10	0	0	0	0	1	0	0	
1/11	0,5	0,5	0,5	0,5	0,5	0,5	0	
2/11	1	1	1	1	1	1	0	
3/11	2	1	1	2	1	1	1	
4/11	2	1	2	2	2	2	1	
...	...	...	...	...	...	...	...	
10/11	3	2	3	3	3	3	1	
...	...	...	...	...	...	...	...	
28/11	1	1	1	3	3	3	1	The burning in hands, pain in thumbs, tingling in hands decreased slightly, and the pain in my fingers also decreased. Reason why it happen, I <u>slept one hour more</u> and had <u>vitamin B</u> and <u>physically less activity</u> .

Note to self:  
My actions  
 influence my outcomes. ♥

Symptom scale

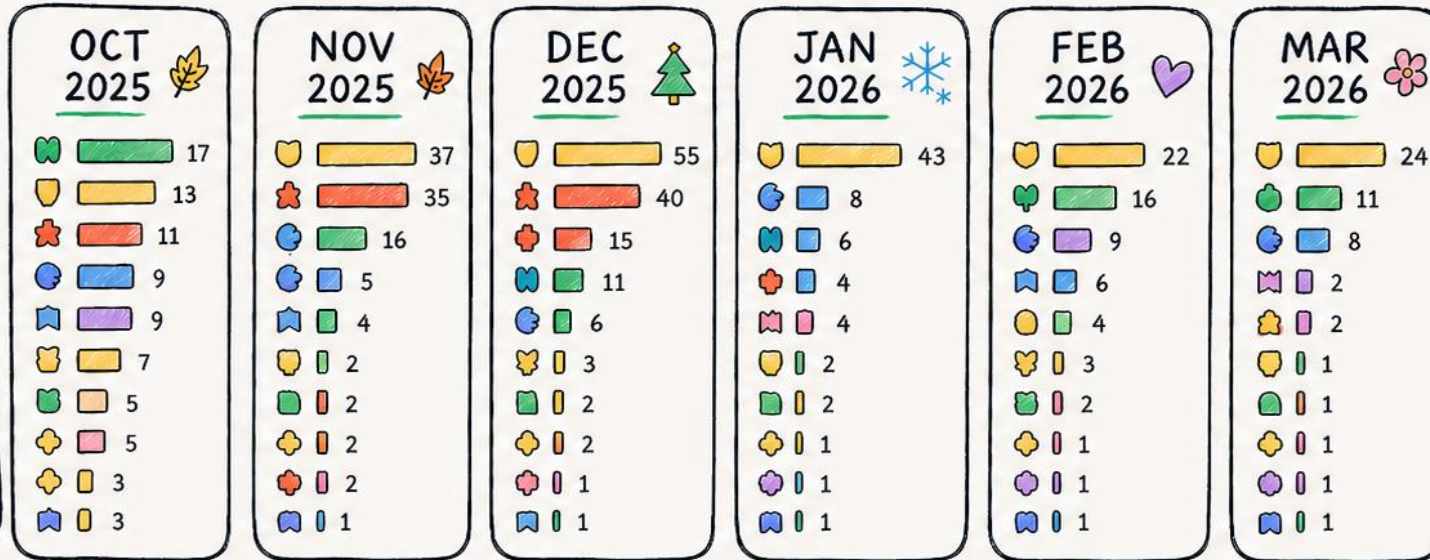
<input type="checkbox"/>	0 = no symptoms
<input type="checkbox"/>	0,5 = very mild
<input type="checkbox"/>	1 = mild
<input type="checkbox"/>	2 = moderate
<input type="checkbox"/>	3 = severe
<input type="checkbox"/>	4 = very severe



# Emotional Tracking



Utilize the How We Feel app to better identify, monitor, and understand emotional patterns during recovery



Track your emotional trends over time and gain insights into your recovery journey.

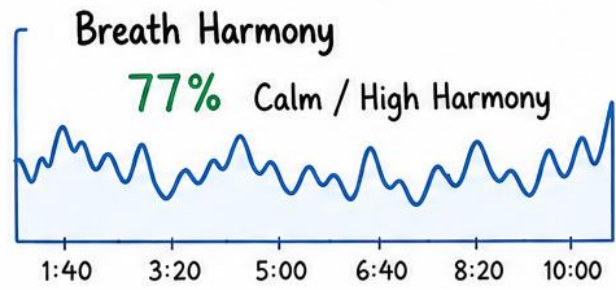
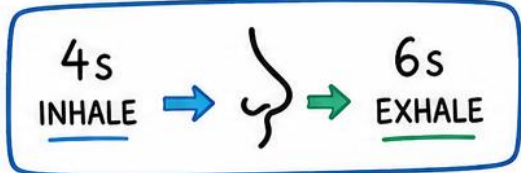


# Muse Mindful Session Overview

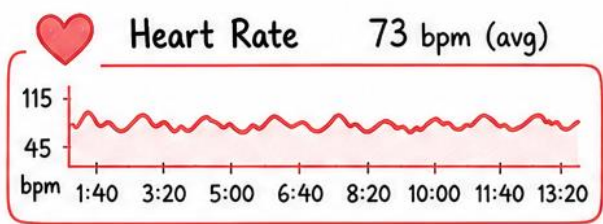
Breath Meditation • Mind Meditation

Measured on: November 9, 2025

## BREATH MEDITATION



600 Muse Points  
 5 Recoveries  
 58 Calm Moments

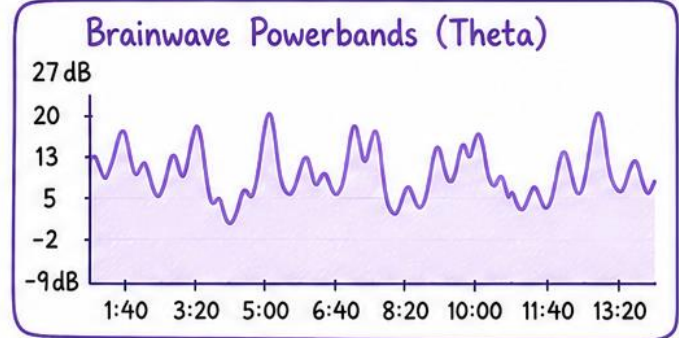


## MIND MEDITATION



Different frequencies reflect different mental states:

- Gamma (32-100 Hz) - peak focus, insight
  - Beta (13-32 Hz) - active thinking
  - Alpha (8-13 Hz) - relaxed alertness ★
  - Theta (4-8 Hz) - deep relaxation, intuition ★
  - Delta (0.5-4 Hz) - restorative sleep
- ★ Critical for recovery



Regulation = Breath + Brain + Awareness

# Light Affirmation Breath

Breathe slowly and deeply

**0 Quick safety and setup**

Breathe slowly and deeply

**1 Choose your position**

- seated - sit stably
- lying - lie down (best option)

**2 Become aware of "contact surfaces"**

Close your eyes and scan where your body touches the surface

**3 Shift attention to the breath**

Imagine that a deep inhale does not only fill the lungs as if it flows through

lungs → skeleton → fluids → organs → all the way to fingertips

**4 Add "light" to the inhale**

At the moment of deep inhale, imagine:

- the air becomes a carrier of health light. Perceive the quality of the light.

Think of the skeleton as a "filament" - light the skeleton (like blowing on a coal in a fireplace) and it will illuminate the entire interior.

**5 Quick body scan + intensity rating (scale 0-10)**

**6 Procedures**

With your **inhale**, send healing light directly to the place, fingers, hands, feet, that are tingling.

With your **exhale**, imagine how what is being released is released (as "waste" out the harmful spirochetes of borreliosis in black).

**7 Anchor and become easily this technique accessible when needed on "click"**

CLICK!

**8 Closing return (count 5 to 1 and use simple return). Then compare state before vs. after.**

Before

5...4...3...2...1...

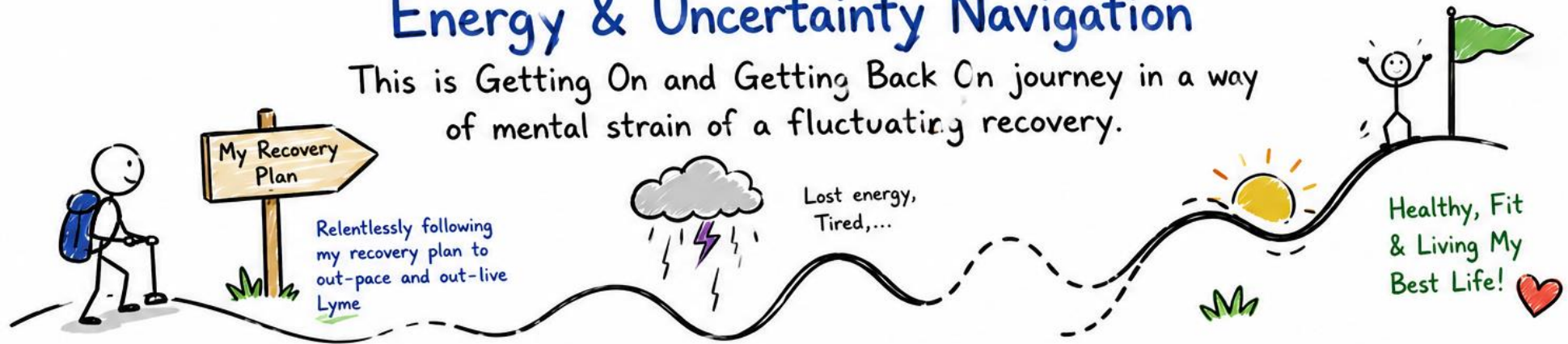
After

Simple return ideas:

- Wiggle fingers and toes
- Take a deep breath
- Stretch gently
- Open your eyes when ready

# Energy & Uncertainty Navigation

This is Getting On and Getting Back On journey in a way of mental strain of a fluctuating recovery.



★ Recovery isn't a straight line. It's a fluctuating journey.  
Keep spinning determination. Keep getting on. Keep getting back on. ♥




# Restorative Self-hypnosis, Resolve to Recover.



**1** Imagine yourself fully recovered.

See what you would see, hear what you'd hear, feel how good you would feel. Really imagine it vividly.

(Back on my sports routine, happy to run half marathon, etc.)



**2** Recall any bad suggestion that anyone gave you about not recovering and hear them say it in a voice that you do not trust or believe. (colleague who said, I had this even worse, you can not be back soon, or that another smiling and you are joking, this is children issue, you simulating)

I had this even worse, you can not be back soon.

You are joking.

This is children issue, you simulating.



**3** Promise yourself in a certain tone of voice that you will recover fully.


I promise myself that I will recover fully. I am committed to my recovery.



**4** Remember all the times you got through tough situations and you were a better person as a result of it. Remember how it felt to be determined enough to get through anything. See what you saw, hear what you heard, feel what you felt.

SEE | HEAR | FEEL

I DID IT!




**5** Spin this feeling as you promise yourself again with this determined feeling and imagine yourself getting through it, recovering, and each time you feel like giving up spinning this feeling even stronger.



I will get through it. I will recover.



**6** Imagine yourself continually focused on getting better and enjoying the challenge of recovering and dealing with the tough times and situations with this spinning feeling of determination and resolve.

FOCUSED. DETERMINED. RESOLVED. RECOVERING.



 I am determined. I am resilient. I choose to recover—fully and completely. 

Q: How confident are you in coaching clients with long-term illness?

# Closing Note Q&A



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006

Q8: What surprised you most about Lyme disease? (pool)

# What this taught me ♡

1 safety before action



2 small progress matters



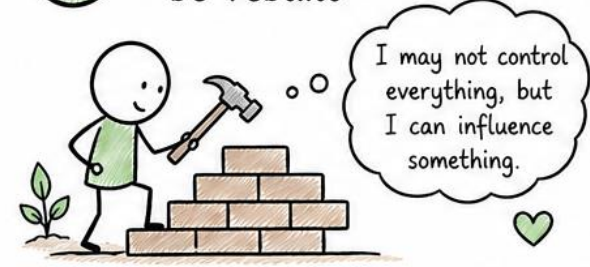
3 identity must be protected



4 hope must be realistic



5 agency can be rebuilt



6 even when control is reduced...



♡ Choice still exists. ♡



International  
Coaching  
Week

# Thank you!



*...a small change can  
make a big difference!*

[www.projecoach.cz](http://www.projecoach.cz)

The 120 Days of Lyme Borreliosis

A Coaching Journey Through Helplessness, Hope, and Recovery

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