Why do we love to hate ourselves?

Dhaliwal’s comment 1 on Zwaan et al 2 nicely refutes what has been called ‘the hypothesis of special cause’ 3—the notion that when things turn out wrong, the cognitive processes leading to that outcome must have been fundamentally different (ie, error-prone) from when they turn out right. Dhaliwal’s argument recapitulates thinking that is over 100 years old; one of the early contributors to psychology, Ernst Mach, 4 wrote (in 1905): ‘Knowledge and error flow from the same mental source; only success can tell one from the other’.

What is interesting here is not that the hypothesis of special cause is wrong, but rather the question of why it has been so popular and persistent. What is it about the notion that many (perhaps extraneous) purposes, but is based on an ontological will-of-the-wisp. 5

Given general agreement on the meagre progress of the patient safety movement to date, 6–12 a fundamental re-thinking of our basic premises and hidden assumptions is desperately needed if we are to move forward. And as with many fixations, a sea change of this sort is not likely to come from within the present patient safety movement, but must come from the outside. 19, 20 We can only hope ‘these barbarians’ challenge us sooner rather than later. 21

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Competing interests None declared.

Provenance and peer review Not commissioned; internally peer reviewed.

To cite Wears RL. BMJ Qual Saf 2016;0:1–2. doi:10.1136/bmjqs-2016-005591

Accepted 14 April 2016

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*BMJ Qual Saf* published online April 28, 2016

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