Editorial

How well recognized is the Integral Theory?

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In the article by Kilic, Guler and Sivaslioglu, the authors make an astute observation and ask a compelling question. In fact, from my own reading other journals such as the International Urogynecology Journal and Neurourology and Urodynamics frequently publish papers that unwittingly confirm the Integral Theory. The answer to this question, as to why the Integral Theory is still unrecognized after 30 years since its original publication¹, lies in the work of Leon Festinger² and his theory of cognitive dissonance published over 60 years ago.

In the scientific world, cognitive dissonance refers to the feelings of discomfort that occur when an individual's understanding are in conflict with new discoveries and research, or when new information that is contrary to their beliefs is presented to them. People like consistency. Doctors are certainly no exception. They are comfortable with the assurance that their values and beliefs have always been correct. They always want to act in ways that are in line with their beliefs. When their long held beliefs are challenged, or when their behavior is not aligned with their beliefs, this creates an uncomfortable disagreement (dissonance).

Science and medicine is replete with examples of where cognitive dissonance has delayed the acceptance of numerous discoveries, sometimes for years, often for decades and on occasions for centuries. The most well-known example is Copernicus heliocentric system for the planets, which placed the sun at centre of our planetary system rather than the Earth. It took over 150 years to accept this observation despite the fact that much research during that period would have confirmed it. But how do we deal with such dissonance?

Perhaps the simplest way to resolve dissonance between opposing beliefs is simply to change our beliefs. This would quickly and effectively take care of any dissonance. However, if the accepted belief is fundamental and important such action is unlikely. Although this is the simplest option for

resolving dissonance it is not the most common and certainly the most difficult.

À more complex yet more common method of resolution, is to change the way we view/remember/perceive our current beliefs in order to make them fit, eliminating the dissonance. In other words we "rationalize" our actions.

Such is the understanding of the mid-urethral sling; the Integral Theory and the well demonstr6ated three-directional movements of urethral closure challenging the accepted and still taught pressure based theories, even though these movements are repeatedly demonstrated³. The success of the MUS is simply rationalised to "fit" with pressure theories despite evidence to the contrary^{4.5}. Dissonance, in the absence of anything else to "fit" driving other aspects of the Integral Theory to be ignored and vehemently rejected.

Eventually the Integral Theory will be accepted. There is no choice. Unfortunately, the successful champion for this change has not yet been born.

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