On my computer at home are hundreds of musical albums, ripped from CDs that now languish in a downstairs drawer. The music sounds crisp and clean, with only an occasional transcription glitch, and it’s easy to locate songs with the media player database. Like most hip guys, I consume my music digitally. Yet calling to me from a distant corner of the basement are all my old LPs. Recently, I answered their call. I slipped a long-forgotten recording of Rossini overtures out of the sleeve and put it lovingly on the turntable. The sound seemed somehow richer, the experience deeper than punching in a selection on a remote. The uncomfortable conflict between my digital and analog self rumbled in my innards.

For most practicing physicians, that conflict is familiar. The analog world of penned orders and notes is a hazy piece of nostalgia that’s been replaced by the keyboards, monitors and data of today’s computerized medical field. We’re inundated by so much information, the real reasons we practice medicine often seem lost. Sure, with our electronic instruments we can measure more, we can write more clearly, and we can store everything. Troves of captured “big data” can be plumbed for new revelations. Flexing our modern digital muscles, we can unravel the mysteries of the genome. And yet: For many physicians, the call of the analog persists.

In his recent book, The Revenge of Analog: Real Things and Why They Matter, journalist David Sax investigates a movement that is sweeping society. Burgeoning vinyl record sales, popular Moleskine notebooks, sprouting board game cafes, and renaissance film photography are symptoms of a thirst for more tangible experiences and a realization that our shiny digital world has its limitations and drawbacks. Observing a board game cafe called Snakes & Lattes, Sax acknowledges that most of the games there could be played online, free of personal contact with any opponent. But Sax notes, “Playing a board game in a neutral environment, such as Snakes & Lattes, transforms the way its players relate to one another. They engage. They speak. They laugh. They embrace vulnerability. They are human.” Sax even contends that the efficiency and productivity advantages of digital commerce are overplayed. “For all its wealth creation and gains, the digital economy, as it stands, has not delivered any substantive gains in employment and wages,” he writes.

Sax refutes that he is a neo-Luddite—a hopeless romantic yearning for the age of transistor radios and Bobby Vee. He fully acknowledges certain benefits that digital technology grants our lives. But he also highlights what we’re missing when we fully embrace a universe of ones and zeros, and he sees large numbers of people reclaiming items and connections that have, for a while now, seemed lost.

My daily life is heavily digital. I live with my iPhone and feel naked when it’s not there. I interact with an EHR all day, documenting visits, phone calls and refills. I don’t pine for the time when I drained Bic pens performing the same tasks. And I see the value in many of the quality measures I’m asked to do, even though they seem to be metastasizing.

Yet I don’t want the data to drown out the analog qualities in which the joy of medical practice is rooted. Like the Snakes & Lattes competitions, my professional day is more than what’s on my screen. Talking to my colleagues is analog. Talking to my patients is analog.

My advice is: Keep your LPs.

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