**Introduction**

Suicide is a major but potentially preventable public health problem. Locally, suicide figures have been quite stable for the past few years but many people still attempt suicide for various reasons. Indeed, the majority of people act out suicidal behavior on impulse and the most commonly-used method is self-poisoning. However, a limited number of studies have been done on clinical sample of people attempting suicide by drug overdose (DO) in Hong Kong.

**Objectives**

1. To identify socio-demographic data, clinical variables, poisoning characteristics, and clinical outcomes of Hong Kong Chinese people who attempted suicide by DO. 2. To examine any significant differences in study variables between local Chinese impulsive and non-impulsive suicide attempters with DO.

**Methodology**

Retrospective study was used. Two-year (2008-2009) psychiatric consultation notes of eligible subjects were retrieved to identify study variables and detect significant differences between local Chinese impulsive and non-impulsive suicide attempters with DO.

**Result**

There were 234 impulsive and 79 non-impulsive subjects. Non-impulsive attempters were significantly older. There was no statistically significant difference in all clinical variables. Concerning poisoning characteristics, statistically significant differences were found on number of cause, availability of suicide note, presence of suicide plan, time from planning to attempt, season of DO, taking precaution, health-seeking behavior after attempt and time to hospital. The top cause of impulsive and non-impulsive groups was strained love affairs and physical illness respectively.
Impulsive attempters more acted out without planning and occasionally left suicidal notes. Whereas, non-impulsive attempters showed stronger determination to die after planning. Non-impulsive attempters took more precautions, sought less help after DO and attending hospital later. Apart from sleeping pills and Panadol, antidepressant and anxiolytic were frequently consumed by non-impulsive and impulsive groups respectively. For clinical outcomes, there were statistically significant differences on number of interventions suggested, remorse over DO, intention to repeat attempt, impression of psychiatric diagnosis and discharge management. A higher proportion of non-impulsive attempters was given a psychiatric diagnosis, received more interventions, showed no remorse and expressed to repeat suicide leading to higher rate of psychiatric admission or discharge acknowledging medical advice. To conclude, the present study identified characteristics of local Chinese suicide attempters taking DO and uncovered significant differences between impulsive and non-impulsive subjects. By knowing risk factors and characteristics of these unique groups, tailor-made specific prevention strategies could be made.