A study in South Korea revealed differences in people who planned suicide attempts compared to those who attempted suicide impulsively. About 13 percent of the sample had made a planned attempt, while nearly 87 percent had made an impulsive attempt.

In both groups, the most common mental health diagnosis was major depressive disorder and the most common trigger was interpersonal conflict. However, depressive disorders were significantly more common among planned suicide attempters, while interpersonal conflict was significantly more frequent among impulsive attempters. People who planned attempts “were older, more likely to be divorced, separated or widowed, and more likely to have comorbid medical illnesses, severe depression, higher suicidality, and self-blaming tendencies” than people who attempted impulsively. Planned attempters also tended to have fewer, but more serious, previous attempts than impulsive attempters and were less likely to “signal for rescue.” No gender-related differences were found.

The distinction between impulsive and planned attempts was based on whether the person attempting had prepared a will, decided upon a method in advance, and planned the date of the attempt.