

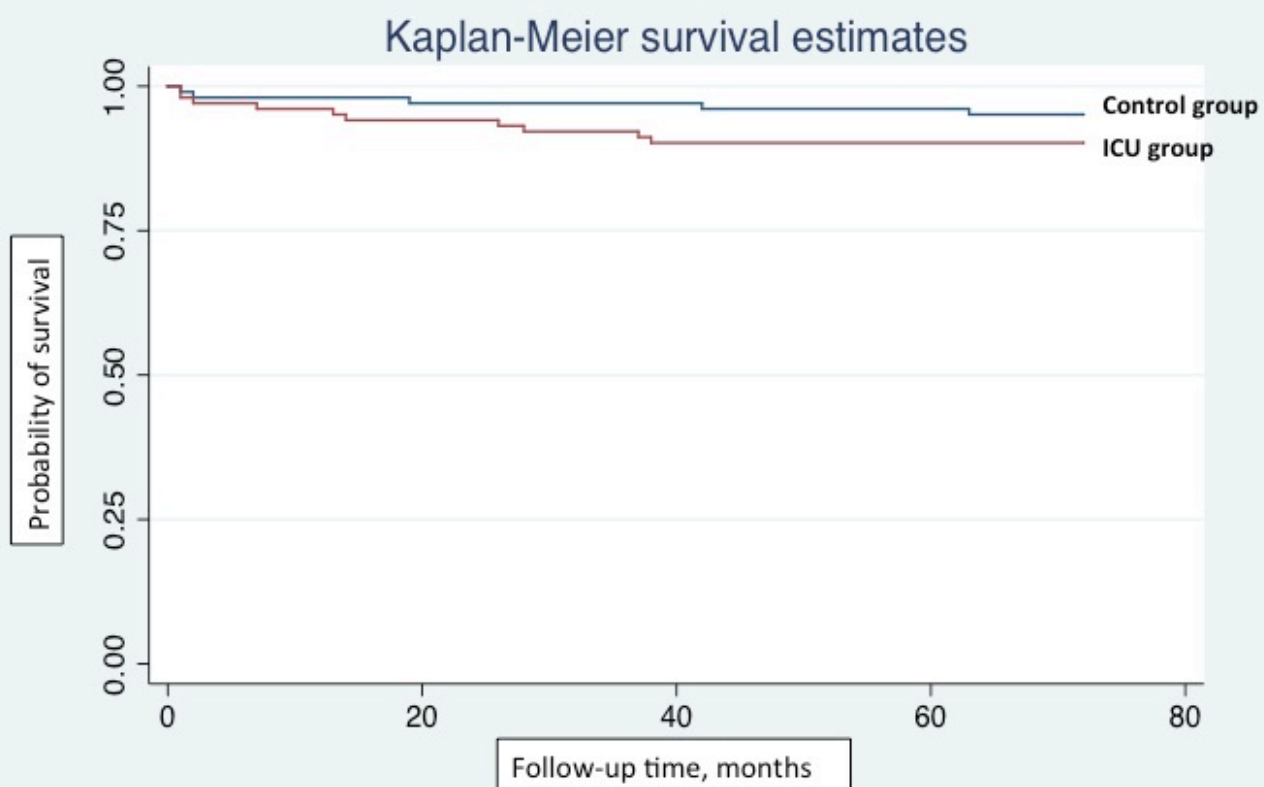
Appendix – Supplementary Text 1. This appendix was part of the submitted manuscript and has been peer reviewed. It is posted as supplied by the authors.

Supplementary Text 1: EQ-5D

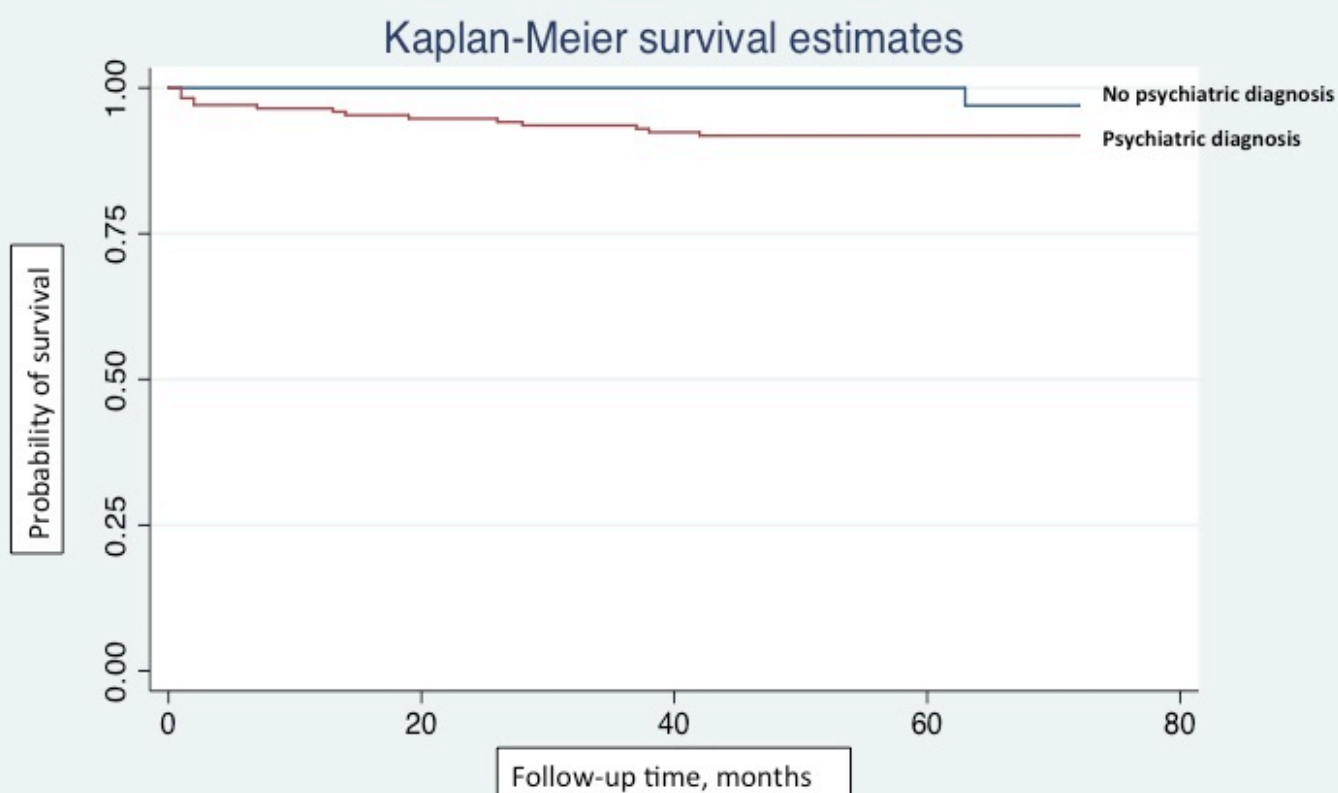
One of the validated tools used is the EQ-5D, which is a generic health related quality of life instrument examining 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression.²²

The EQ-5D-3L and EQ-VAS questionnaires have been well validated in follow up of the general population as well as critical care patients.^{15-17,24} EQ-5D is recommended for measuring HRQoL in critical care.¹⁸ In ICU patients there is variation, with median HRQoL being 0.83 in a previous study using EQ-6D.¹⁷ Lowest HRQoL was noted in specific subgroups of patients with sepsis or chronic renal failure and HRQoL does not change over time.¹⁸ Only one study has used EQ-5D in assessing HRQoL in patients with drug overdose.²⁰ The EQ-5D can be administered via written or telephone questionnaire.

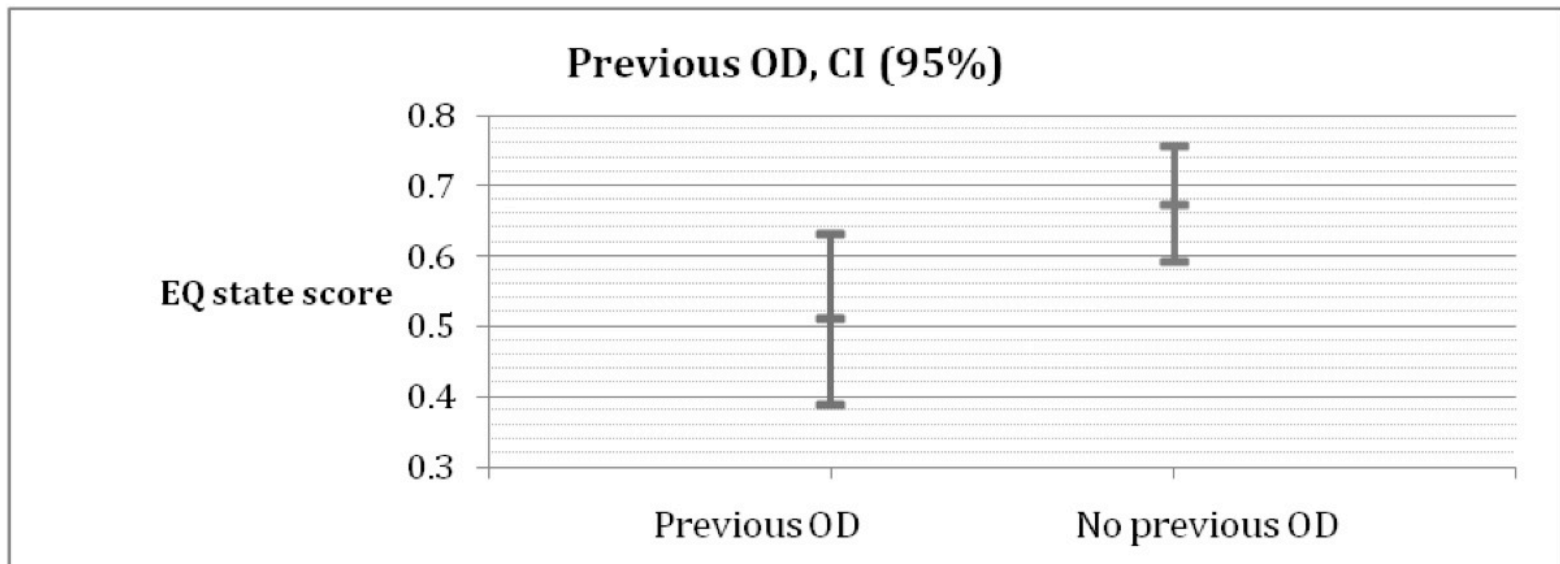
Supplementary Figure 1: Kaplan-Meier curve showing long-term survival of patients in the ICU group vs. control group (log-rank test for equality of survivor functions, $P=0.18$)



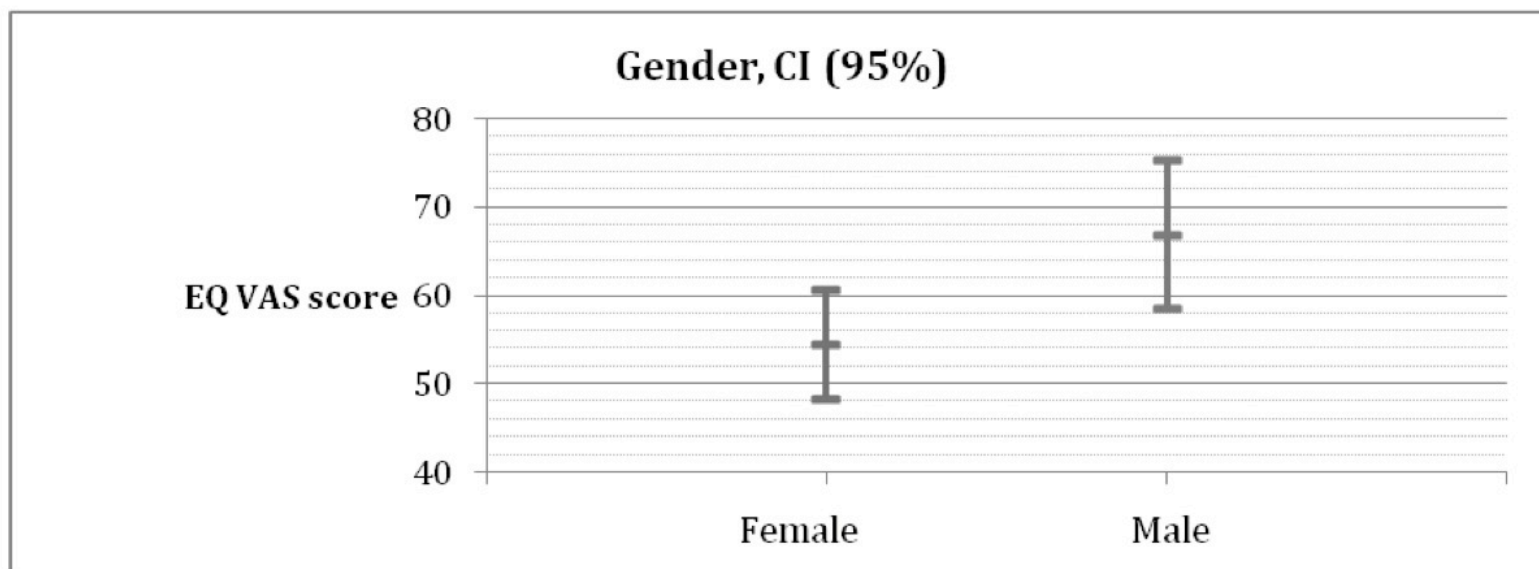
Supplementary Figure 2: Kaplan-Meier curve showing long-term survival of patients with psychiatric diagnosis vs. patients with no psychiatric diagnoses (log-rank test for equality of survivor functions, $P=0.30$)



Supplementary Figure 3: Measured EQ state scores in patients with previous overdose vs. patients without previous overdose (Mean scores and 95% Confidence Intervals, $p = 0.02$)



Supplementary Figure 4: Measured EQ VAS scores in female vs. male patients (Mean scores and 95% Confidence Intervals, $p = 0.03$)



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Supplementary Table 1. Breakdown of drugs of overdose by classes

Type of drug in overdose	ICU (n = 102)	Control (n = 102)	P
Antipsychotic, total, n (%)	35 (34.3)	32 (31.4)	0.66
Quetiapine	30	22	
Olanzapine	5	6	
Clozapine	2	1	
Chlorpromazine	0	1	
Amisulpride	1	1	
Other	2	2	
Benzodiazepene/sedative, total, n (%)	36 (35.3)	33 (32.4)	0.66
Diazepam	14	17	
Temazepam	8	4	
Alprazolam	9	10	
Lorazepam	3	2	
Clonazepam	4	1	
Non-benzodiazepine	4	2	
Other	3	1	
Antidepressant, total, n (%)	26 (25.5)	23 (22.5)	0.62
Amitriptyline	6	5	
SSRI	9	7	
SNRI	10	11	
Other	2	2	
Paracetamol, n (%)	23 (22.5)	27 (26.5)	0.52
Other, total, n (%)	46 (45.1)	39 (38.2)	0.32
Opioids	8	10	
GHB	4	1	
Cannabis	2	3	
Ethanol	21	18	
Methanol	1	0	
Valproate	7	5	
Phenytoin	1	0	
Calcium channel blocker	2	1	
Beta blocker	1	2	
Other cardiac medication	4	2	
Lithium	3	0	

Appendix – Supplementary Table 2. This appendix was part of the submitted manuscript and has been peer reviewed. It is posted as supplied by the authors.

Supplementary Table 2: Details of patients who died, including cause of death and associated psychiatric diagnoses

ICU group

Age	Gender	Associated co-morbidities	Psychiatric diagnoses	Cause of death	Time period from admission to death, months
57	M	Tuberculosis Hypertension Type 2 diabetes	Major depressive disorder Alcohol abuse	Hypoxic brain injury Aspiration of gastric contents, seizures and alcohol dependence	1
56	M	none	Major depressive disorder Anxiety disorder	Suicide: hanging	13
42	M	End stage renal failure Hepatitis C	Major depressive disorder Anxiety disorder	Overdose: Heroin	7
27	F	none	Major depressive disorder Borderline personality disorder Anorexia	Bronchopneumonia	37
88	M	Ischaemic heart disease Stroke Hypertension Cardiac failure	Major depressive disorder	Lower respiratory tract infection	28
72	F	COPD Hypertension Stroke	Major depressive disorder	Gallbladder cancer	38
26	M	none	Major depressive disorder Anxiety disorder Alcohol abuse	Motor vehicle accident	26
28	F	none	Bipolar affective disorder	Suicide: Hanging	14

			Borderline personality disorder		
			Alcohol abuse		
30	M	none	Major depressive disorder	Overdose: Alcohol	2
48	M	none	Bipolar affective disorder	Overdose: Polypharmacy	1

Control group

Age	Gender	Associated co-morbidities	Known psychiatric diagnoses	Cause of death	Time period from admission to death, months
53	M	Acquired brain injury Epilepsy	Schizophrenia	Natural causes	19
54	M	Acquired brain injury Epilepsy Hepatitis C	none	Aspiration pneumonia	63
52	F	Metastatic lung cancer	Anxiety disorder Alcohol abuse	Palliative metastatic lung cancer	1
47	M	Hepatitis C	Bipolar affective disorder	Liver disease	42
49	M	Ischaemic heart disease	Major depressive disorder	Suicide: Hanging	2

M = male

F = female

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Supplementary Table 3: Outcomes comparing patients with psychiatric diagnosis vs patients with no psychiatric diagnosis

Outcome	Psychiatric diagnosis (n = 171)	No psychiatric diagnosis (n = 33)	<i>P</i>
Subsequent overdose, <i>n</i> (%)	65 (38.0%)	6 (18.2%)	0.03
Died from self-harm, <i>n</i> (%)	5 (2.9%)	0 (0%)	1.0
Died on follow up, <i>n</i> (%)	14 (8.2%)	1 (3.0%)	0.47
EQ state score ^a , median (IQR)	0.70 (0.35, 0.80)	0.75 (0.71, 0.83)	0.13
EQ VAS ^a , median (IQR)	60 (50, 75)	65 (55, 75)	0.56

^a Data on follow-up participants only, n=66 with psychiatric diagnosis and n=14 with no psychiatric diagnosis