CLAIMS

1. Use of a first population of allogeneic T cells that bind or recognize a first epitope of an EBV antigen in the manufacture of a medicament for the treatment or prevention of an EBV-associated disease, disorder or condition in a subject; wherein the first population of allogeneic T cells is to be administered in combination with a therapeutic agent, wherein the therapeutic agent is selected from the group consisting of an immunotherapeutic agent, a MAPK pathway inhibitor, a BET inhibitor and any combination thereof; and optionally a second population of allogeneic T cells that bind or recognize a second epitope of the EBV antigen or a further EBV antigen.

2. A pharmaceutical composition for treating or preventing an EBV-associated disease, disorder or condition in a subject, the composition comprising:
   (a) a first population of allogeneic T cells that bind or recognize a first epitope of an EBV antigen; and/or
   (b) a therapeutic agent, wherein the therapeutic agent is selected from the group consisting of an immunotherapeutic agent, a MAPK pathway inhibitor, a BET inhibitor (e.g JQ1) and any combination thereof; and
   (c) a pharmaceutically acceptable carrier, diluent and/or excipient; and optionally
   (d) a second population of allogeneic T cells that bind or recognize a second epitope of the EBV antigen or a further EBV antigen.

3. The use of claim 1 or the composition of claim 2, wherein the first population of allogeneic T cells and cells of the EBV-associated disease, disorder or condition both comprise or are restricted by a first human leukocyte antigen (HLA) allele that encodes a first MHC protein.

4. The use or composition of claim 3, wherein the first MHC protein presents the first epitope of the EBV antigen on cells of the EBV-associated disease, disorder or condition.

5. The use or composition of any one of claims 1 to 4, wherein the second population of allogeneic T cells and cells of the EBV-associated disease, disorder or condition both comprise or are restricted by a second HLA allele that encodes a second MHC protein, wherein the second MHC protein presents the second epitope of the EBV antigen or the further EBV antigen on cells of the EBV-associated disease, disorder or condition.

6. The use of any one of claims 1 and 3 to 5, wherein the second population of allogeneic T cells is administered prior to, simultaneously with and/or subsequent to administration of the first population of allogeneic T cells.

7. The use of any one of claims 1 and 3 to 6, further including the initial step of generating the first and/or second populations of allogeneic T cells *in vitro*.

8. The use or composition of any one of the preceding claims, wherein the MAPK pathway inhibitor is or comprises a MEK1/2 inhibitor selected from selumetanib and/or trematinib.

9. The use of claim 1 or the composition of claim 2, wherein the population of allogeneic T cells and cells of the EBV-associated disease, disorder or condition both comprise or are restricted by a human leukocyte antigen (HLA) allele that encodes a MHC protein, wherein the MHC protein presents the epitope of the EBV antigen on cells of the EBV-associated disease, disorder or condition, wherein the EBV antigen and/or the further EBV antigen is selected from the group consisting of EBNA1, EBNA2, EBNA3A, EBNA3B, EBNA3C, LMP1, LMP2 and any combination thereof.

10. The use or composition of any one of the preceding claims, wherein the immunotherapeutic agent is or comprises an immune checkpoint inhibitor, such as a PD1 inhibitor (e.g., an anti-PD1 antibody selected from Pembrolizumab, Nivolumab, or Cemiplimab), a PD-L1 inhibitor (e.g., an anti-PD-L1 antibody selected from Atezolizumab, Avelumab, or Durvalumab), a CTLA4 inhibitor (e.g., an anti-CTLA4 antibody), a LAG3 inhibitor (e.g., an anti-LAG3 antibody), a TIM3 inhibitor (e.g., an anti-TIM3 antibody), or a CD96 inhibitor (e.g., an anti-CD96 antibody).

11. The use of any one of claims 1, 3 to 9, wherein the population of allogeneic T cells is administered prior to, simultaneously with and/or subsequent to administration of the therapeutic agent, optionally further including the initial step of generating the population of allogeneic T cells *in vitro*.

12. The use or composition of any one of the preceding claims, wherein the EBV-associated disease, disorder or condition is or comprises an EBV-associated cancer, wherein the EBV-associated cancer is selected from the group consisting of nasopharyngeal carcinoma, NKT

cell lymphoma, Hodgkin's Lymphoma, post-transplant lymphoproliferative disease, Burkitt’s lymphoma, Diffuse large B-cell lymphoma, gastric cancer, and any combination thereof.

13. A first population of allogeneic T cells that bind or recognize a first epitope of an EBV antigen for use in the treatment or prevention of an EBV-associated disease, disorder or condition in a subject; wherein the first population of allogeneic T cells is to be administered in combination with: (a) a second population of allogeneic T cells that bind or recognize a second epitope of the EBV antigen or a further EBV antigen; and/or (b) a therapeutic agent, wherein the therapeutic agent is selected from the group consisting of an immunotherapeutic agent, a MAPK pathway inhibitor, a BET inhibitor (e.g., JQ1) and any combination thereof.

14. The use of a population of allogeneic T cells that bind or recognize an epitope of an EBV antigen in the manufacture of a medicament for the treatment or prevention of an EBV-associated cancer or tumour in a subject; wherein the population of allogeneic T cells is to be administered in combination with a therapeutic agent, wherein the therapeutic agent is selected from the group consisting of an immunotherapeutic agent, a MAPK pathway inhibitor, a BET inhibitor and any combination thereof.

15. A pharmaceutical composition for treating or preventing an EBV-associated cancer or tumour in a subject, the composition comprising:
    (a) a population of allogeneic T cells that bind or recognize an epitope of an EBV antigen;
    (b) a therapeutic agent, wherein the therapeutic agent is selected from the group consisting of an immunotherapeutic agent, a MAPK pathway inhibitor, a BET inhibitor and any combination thereof; and
    (c) a pharmaceutically acceptable carrier, diluent and/or excipient.

16. The use of claim 14 or the composition of claim 15, wherein the population of allogeneic T cells and cells of the EBV-associated disease, disorder or condition both comprise or are restricted by a human leukocyte antigen (HLA) allele that encodes a MHC protein, wherein the MHC protein presents the epitope of the EBV antigen on cancer or tumour cells, wherein the EBV antigen and/or the further EBV antigen is selected from the group consisting of EBNA1, EBNA2, EBNA3A, EBNA3B, EBNA3C, LMP1, LMP2 and any combination thereof.

17. The use or composition of any one of claims 14-16, wherein the immunotherapeutic agent is or comprises an immune checkpoint inhibitor, such as a PD1 inhibitor (e.g., an anti-PD1 antibody selected from Pembrolizumab, Nivolumab, or Cemiplimab), a PD-L1 inhibitor (e.g., an anti-PD-L1 antibody selected from Atezolizumab, Avelumab, or Durvalumab), a CTLA4 inhibitor (e.g., an anti-CTLA4 antibody), a LAG3 inhibitor (e.g., an anti-LAG3 antibody), a TIM3 inhibitor (e.g., an anti-TIM3 antibody), or a CD96 inhibitor (e.g., an anti-CD96 antibody).

18. The use or composition of any one of claims 14-17, wherein the MAPK pathway inhibitor is or comprises a MEK1/2 inhibitor.

19. The use or composition of claim 18, wherein the MEK1/2 inhibitor is selected from selumetanib and/or trematinib.

20. The use of any one of claims 14 and 16-19, wherein the population of allogeneic T cells is administered prior to, simultaneously with and/or subsequent to administration of the therapeutic agent, optionally further including the initial step of generating the population of allogeneic T cells *in vitro*.