What is claimed is:

1. A method of treating cancer in a patient, the method comprising: administering a therapeutically effective amount of an immune checkpoint inhibitor to the patient, wherein the patient has an FGFR variant, and has been treated with an FGFR inhibitor.

2. The method according to claim 1, wherein the FGFR inhibitor is erdafitinib or a pharmaceutically acceptable salt thereof.

3. The method according to any of claims 1-2, wherein prior to the step of administering the immune checkpoint inhibitor, the patient exhibited disease progression in response to the FGFR inhibitor.

4. The method according to any of claims 1-3, wherein prior to the step of administering the FGFR inhibitor, the patient was treated with a first immune checkpoint inhibitor and exhibited disease progression in response to said first immune checkpoint inhibitor.

5. The method according to any of claims 1-4, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between PD-1 and PD-L1.

6. The method according to any of claims 1-4, wherein the immune checkpoint inhibitor is pembrolizumab, atezolizumab or nivolumab.

7. The method according to any of claims 1-4, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between CTLA-4 and CD80 or CD86.

8. The method according to any of claims 1-4, wherein the immune checkpoint inhibitor is selected from the group consisting of atezolizumab, pembrolizumab, nivolumab, durvalumab, avelumab, anti-CSF1R antibody, tremelimumab and ipilimumab.

9. The method according to any of claims 1-8, wherein the patient has been diagnosed with an FGFR-genetically altered tumor.

10. The method according to any of claims 1-8, wherein the patient has been diagnosed with bladder cancer

11. The method according to any of claims 1-8, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer.

12. The method according to any of claims 1-8, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations.

13. The method according to any of claims 1-8, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations and who progressed during or following at least one line of prior platinum-containing chemotherapy including within 12 months of neoadjuvant or adjuvant platinum-containing chemotherapy.

14. The method according to any of claims 1-13, wherein the FGFR variant is selected from the group consisting of FGFR2:AFF3; FGFR2:BICC1; FGFR2:CASP7; FGFR2:CCDC6; FGFR2:OFD1; FGFR3:BAIAP2L1; FGFR3:TACC3-Intron; FGFR3:TACC3V1; FGFR3:TACC3V3; and a combination thereof.

15. The method according to any of claims 1-14, wherein the FGFR inhibitor is erdafitinib and is administered in an amount of between about 8 mg and about 9 mg daily.

16. The method according to any of claims 1-15, wherein the method is effective in achieving a complete or partial response in the patient, e.g., in reducing a tumor volume in the patient and/or stopping or reducing disease progression.

17. The method according to any of claims 1-16, wherein the the immune checkpoint inhibitor is cetrelimab.

18. A method of treating a patient diagnosed with cancer by administering an FGFR inhibitor in an amount effective to sensitize the patient to an immune checkpoint inhibitor, the method comprising:

administering an FGFR inhibitor to the patient during a second period of time, wherein an immune checkpoint inhibitor is not administered during said second period of time; and

after said second period of time, administering an immune checkpoint inhibitor to the patient during a third period of time, wherein an FGFR inhibitor is not administered to the patient during said third period of time, wherein the patient:

(a) has been diagnosed with an FGFR-genetically altered cancer,

(b) was administered a first immune checkpoint inhibitor during a first period of time prior to the second period of time, wherein an FGFR inhibitor was not administered to the patient during said first period of time, and

(c) did not respond to the first immune checkpoint inhibitor during said first period of time.

19. The method according to claim 18, wherein the FGFR inhibitor is erdafitinib or a pharmaceutically acceptable salt thereof.

20. The method according to claim 18, wherein the FGFR inhibitor is erdafitinib free base.

21. The method according to any of claims 18-20, wherein the patient responded to the FGFR inhibitor during said second period of time.

22. The method according to any of claims 18-21, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between PD-1 and PD-L1.

23. The method according to any of claims 18-21, wherein the immune checkpoint inhibitor is pembrolizumab, atezolizumab or nivolumab.

24. The method according to any of claims 18-21, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between CTLA-4 and CD80 or CD86.

25. The method according to any of claims 18-21, wherein the immune checkpoint inhibitor is selected from the group consisting of atezolizumab, pembrolizumab, nivolumab, durvalumab, avelumab, anti-CSF1R antibody, tremelimumab and ipilimumab.

26. The method according to any of claims 18-21, wherein the immune checkpoint inhibitor is cetrelimab.

27. The method according to any of claims 18-26, wherein the patient has been diagnosed with bladder cancer

28. The method according to any of claims 18-26, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer.

29. The method according to any of claims 18-26, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations.

30. The method according to any of claims 18-26, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations and who progressed during or following at least one line of prior platinum-containing chemotherapy including within 12 months of neoadjuvant or adjuvant platinum-containing chemotherapy.

31. The method according to any of claims 18-30, wherein the patient has an FGFR variant selected from the group consisting of FGFR2:AFF3; FGFR2:BICC1; FGFR2:CASP7; FGFR2:CCDC6; FGFR2:OFD1; FGFR3:BAIAP2L1; FGFR3:TACC3-Intron; FGFR3:TACC3v1; FGFR3:TACC3v3; and a combination thereof.

32. The method according to any of claims 18-31, wherein the FGFR inhibitor is erdafitinib and is administered in an amount of between about 8 mg and about 9 mg daily during said second period of time.

33. The method according to any of claims 18-32, wherein the method is effective in achieving a complete or partial response in the patient, e.g., in reducing a tumor volume in the patient and/or stopping or reducing disease progression.

34. An immune checkpoint inhibitor for use in the treatment of cancer in a patient, wherein the patient has an FGFR variant, and has been pre-treated with an FGFR inhibitor.

35. An immune checkpoint inhibitor for use according to claim 34, wherein the FGFR inhibitor is erdafitinib or a pharmaceutically acceptable salt thereof.

36. An immune checkpoint inhibitor for use according to any of claims 34-35, wherein prior to the use of the immune checkpoint inhibitor, the patient exhibited disease progression in response to the FGFR inhibitor.

37. An immune checkpoint inhibitor for use according to any of claims 34-36, wherein prior to the use of the FGFR inhibitor, the patient was treated with a first immune checkpoint inhibitor and exhibited disease progression in response to said first immune checkpoint inhibitor.

38. An immune checkpoint inhibitor for use according to any of claims 34-37, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between PD-1 and PD-L1.

39. An immune checkpoint inhibitor for use according to any of claims 34-37, wherein the immune checkpoint inhibitor is pembrolizumab, atezolizumab or nivolumab.

40. An immune checkpoint inhibitor for use according to any of claims 34-37, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between CTLA-4 and CD80 or CD86.

41. An immune checkpoint inhibitor for use according to any of claims 34-37, wherein the immune checkpoint inhibitor is selected from the group consisting of atezolizumab, pembrolizumab, nivolumab, durvalumab, avelumab, anti-CSF1R antibody, tremelimumab and ipilimumab.

42. An immune checkpoint inhibitor for use according to any of claims 34-41, wherein the patient has been diagnosed with an FGFR-genetically altered tumor.

43. An immune checkpoint inhibitor for use according to any of claims 34-41, wherein the patient has been diagnosed with bladder cancer

44. An immune checkpoint inhibitor for use according to any of claims 34-41, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer.

45. An immune checkpoint inhibitor for use according to any of claims 34-41, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations.

46. An immune checkpoint inhibitor for use according to any of claims 34-41, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations and who progressed during or following at least one line of prior platinum-containing chemotherapy including within 12 months of neoadjuvant or adjuvant platinum-containing chemotherapy.

47. An immune checkpoint inhibitor for use according to any of claims 34-46, wherein the FGFR variant is selected from the group consisting of FGFR2:AFF3; FGFR2:BICC1; FGFR2:CASP7; FGFR2:CCDC6; FGFR2:OFD1; FGFR3:BAIAP2L1; FGFR3:TACC3-Intron; FGFR3:TACC3V1; FGFR3:TACC3V3; and a combination thereof.

48. An immune checkpoint inhibitor for use according to any of claims 34-47, wherein the FGFR inhibitor is erdafitinib and is administered in an amount of between about 8 mg and about 9 mg daily.

49. An immune checkpoint inhibitor for use according to any of claims 34-48, wherein the use is effective in achieving a complete or partial response in the patient, e.g., in reducing a tumor volume in the patient and/or stopping or reducing disease progression.

50. An immune checkpoint inhibitor for use according to any of claims 34-49, wherein the the immune checkpoint inhibitor is cetrelimab.

51. A FGFR inhibitor for use in sensitizing a cancer patient to an immune checkpoint inhibitor.

52. A FGFR inhibitor for use according to claim 51, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between PD-1 and PD-L1.

53. A FGFR inhibitor for use according to claim 51, wherein the immune checkpoint inhibitor is pembrolizumab, atezolizumab or nivolumab.

54. A FGFR inhibitor for use according to claim 51, wherein the immune checkpoint inhibitor is an antibody that blocks the interaction between CTLA-4 and CD80 or CD86.

55. A FGFR inhibitor for use according to claim 51, wherein the immune checkpoint inhibitor is selected from the group consisting of atezolizumab, pembrolizumab, nivolumab, durvalumab, avelumab, anti-CSF1R antibody, tremelimumab and ipilimumab.

56. A FGFR inhibitor for use according to claim 51, wherein the immune checkpoint inhibitor is cetrelimab.

57. A FGFR inhibitor for use according to any of claims 51-56, wherein the patient has an FGFR variant.

58. A FGFR inhibitor for use according to any of claims 51-56, wherein the patient has been diagnosed with an FGFR-genetically altered tumor.

59. A FGFR inhibitor for use according to any of claims 51-56, wherein the patient has been diagnosed with bladder cancer

60. A FGFR inhibitor for use according to any of claims 51-56, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer.

61. A FGFR inhibitor for use according to any of claims 51-56, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations.

62. A FGFR inhibitor for use according to any of claims 51-56, wherein the patient has been diagnosed with locally advanced or metastatic urothelial cancer harboring FGFR2 or FGFR3 genetic alterations and who progressed during or following at least one line of prior platinum-containing chemotherapy including within 12 months of neoadjuvant or adjuvant platinum-containing chemotherapy.

63. A FGFR inhibitor for use according to any of claims 51-56, wherein the FGFR variant is selected from the group consisting of FGFR2:AFF3; FGFR2:BICC1; FGFR2:CASP7; FGFR2:CCDC6; FGFR2:OFD1; FGFR3:BAIAP2L1; FGFR3:TACC3-Intron; FGFR3:TACC3V1; FGFR3:TACC3V3; and a combination thereof.

64. A FGFR inhibitor for use according to any of claims 51-63, wherein the FGFR inhibitor is erdafitinib.

65. A FGFR inhibitor for use according to any of claims 51-63, wherein the FGFR inhibitor is erdafitinib and is administered in an amount of between about 8 mg and about 9 mg daily.

66. A FGFR inhibitor for use according to any of claims 51-65, wherein the immune checkpoint inhibitor is cetrelimab.