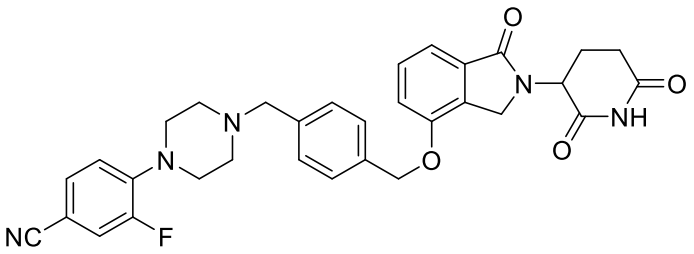
What is claimed is:

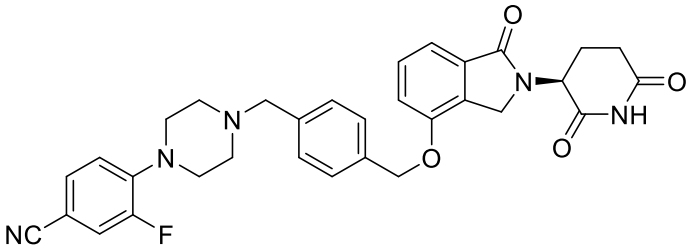
1. Use of a compound in the manufacture of a medicament for treating multiple myeloma in a patient, wherein the compound is Compound 1 of formula



1,

or an enantiomer, mixture of enantiomers, tautomer, isotopolog, or pharmaceutically acceptable salt thereof, the medicament is to be administered in combination with a second active agent, and wherein the second active agent is one or more of a BTK inhibitor, an mTOR inhibitor, a PIM inhibitor, an IGF-1R inhibitor, an MEK inhibitor, an XPO1 inhibitor, a DOT1L inhibitor, an EZH2 inhibitor, or a JAK2 inhibitor.

2. Use of a compound in the manufacture of a medicament for treating multiple myeloma, wherein the compound is Compound 2 of formula



2,

or a tautomer, isotopolog, or pharmaceutically acceptable salt thereof, wherein the medicament is to be administered in combination with a second active agent, and wherein the second active agent is one or more of a BTK inhibitor, an mTOR inhibitor, a PIM inhibitor, an IGF-1R inhibitor, an MEK inhibitor, an XPO1 inhibitor, a DOT1L inhibitor, an EZH2 inhibitor, or a JAK2 inhibitor.

3. The use of claim 2, wherein the compound is Compound 2.

4. The use of any one of claims 1 to 3, wherein the second active agent is a BTK inhibitor.

5. The use of claim 4, wherein the BTK inhibitor is ibrutinib, or acalabrutinib, or a stereoisomer, mixture of stereoisomers, tautomer, isotopolog, or pharmaceutically acceptable salt thereof.

6. The use of claim 5, wherein the BTK inhibitor is ibrutinib.

7. The use of any one of claims 1 to 3, wherein the second active agent is an mTOR inhibitor.

8. The use of claim 7, wherein the mTOR inhibitor is rapamycin or an analog thereof (also termed rapalog).

9. The use of claim 8, wherein the mTOR inhibitor is everolimus.

10. The use of any one of claims 1 to 3, wherein the second active agent is a PIM inhibitor.

11. The use of claim 10, wherein the PIM inhibitor is LGH-447, AZD1208, SGI-1776, or TP-3654, or a stereoisomer, mixture of stereoisomers, tautomer, isotopolog, or pharmaceutically acceptable salt thereof.

12. The use of claim 11, wherein the PIM inhibitor is LGH-447 or a hydrochloride salt of LGH-447.

13. The use of any one of claims 1 to 3, wherein the second active agent is an IGF-1R inhibitor.

14. The use of claim 13, wherein the IGF-1R inhibitor is linsitinib.

15. The use of any one of claims 1 to 3, wherein the second active agent is an MEK inhibitor.

16. The use of claim 15, wherein the MEK inhibitor is trametinib, trametinib dimethyl sulfoxide, cobimetinib, binimetinib, or selumetinib, or a stereoisomer, mixture of stereoisomers, tautomer, isotopolog, or pharmaceutically acceptable salt thereof.

17. The use of claim 16, wherein the MEK inhibitor is trametinib or trametinib dimethyl sulfoxide.

18. The use of claim 17, wherein trametinib or trametinib dimethyl sulfoxide is to be administered at a dosage of about 1 mg, about 1.5 mg, or about 2 mg once daily.

19. The use of any one of claims 1 to 3, wherein the second active agent is an XPO1 inhibitor.

20. The use of claim 19, wherein the XPO1 inhibitor is selinexor.

21. The use of any one of claims 1 to 3, wherein the second active agent is a DOT1L inhibitor.

22. The use of claim 21, wherein the DOT1L inhibitor is SGC0946, or pinometostat, or a stereoisomer, mixture of stereoisomers, tautomer, isotopolog, or pharmaceutically acceptable salt thereof.

23. The use of claim 22, wherein the DOT1L inhibitor is SGC0946.

24. The use of claim 22, wherein the DOT1L inhibitor is pinometostat.

25. The use of any one of claims 1 to 3, wherein the second active agent is an EZH2 inhibitor.

26. The use of claim 25, wherein the EZH2 inhibitor is tazemetostat, 3-deazaneplanocin A (DZNep), EPZ005687, EI1, GSK126, UNC1999, CPI-1205, or sinefungin, or a stereoisomer, mixture of stereoisomers, tautomer, isotopolog, or pharmaceutically acceptable salt thereof.

27. The use of claim 26, wherein the EZH2 inhibitor is tazemetostat.

28. The use of claim 27, wherein tazemetostat is to be administered at a dosage of about 800 mg twice daily.

29. The use of claim 26, wherein the EZH2 inhibitor is UNC1999.

30. The use of claim 26, wherein the EZH2 inhibitor is CPI-1205.

31. The use of any one of claims 1 to 3, wherein the second active agent is a JAK2 inhibitor.

32. The use of claim 31, wherein the JAK2 inhibitor is fedratinib, ruxolitinib, baricitinib, gandotinib, lestaurtinib, momelotinib, or pacritinib, or a stereoisomer, mixture of stereoisomers, tautomer, isotopolog, or pharmaceutically acceptable salt thereof.

33. The use of claim 32, wherein the JAK2 inhibitor is fedratinib.

34. The use of any one of claims 1 to 33, wherein the multiple myeloma is relapsed, refractory or resistant.

35. The use of claim 34, wherein the multiple myeloma is refractory or resistant to lenalidomide.

36. The use of claim 34, wherein the multiple myeloma is refractory or resistant to pomalidomide.

37. The use of any one of claims 1 to 33, wherein the multiple myeloma is newly diagnosed multiple myeloma.

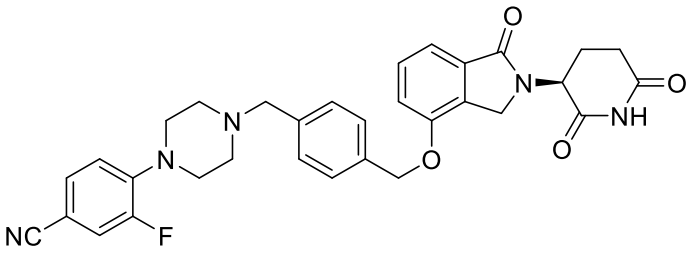
38. The use of any one of claims 1 to 37, wherein the medicament is to be administered in combination with an additional active agent.

39. The use of claim 38, wherein the additional active agent is dexamethasone.

40. The use of claim 38, wherein the additional active agent is bortezomib.

41. Use of a compound in the manufacture of a medicament for treating multiple myeloma in a patient, wherein the medicament is to be administered in combination with (i)

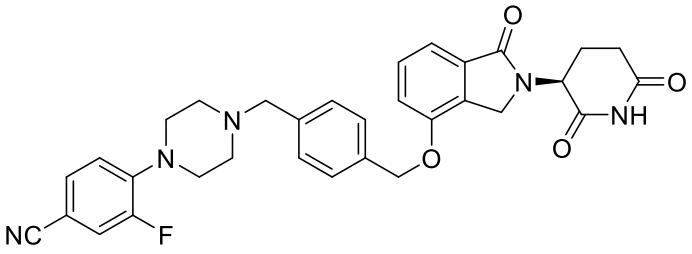
trametinib or trametinib dimethyl sulfoxide and (ii) dexamethasone, wherein the compound is Compound 2 of formula



2,

or a pharmaceutically acceptable salt thereof.

42. Use of a compound in the manufacture of a medicament for treating multiple myeloma in a patient, wherein the medicament is to be administered in combination with (i) tazemetostat and (ii) dexamethasone, wherein the compound is Compound 2 of formula



2,

or a pharmaceutically acceptable salt thereof.