CLAIMS:

1. An AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM) for use in the treatment of an AXL–related disease, wherein the AXL-related disease is characterised by the presence of cells having modified STK11 activity or expression; and/or wherein the AXL-related disease is characterised by the presence of cells having increased KRAS activity or expression,
and wherein the AXLi and ICM are for administration separately, sequentially or simultaneously.

2. An AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM) for use in the treatment of an AXL–related disease, said treatment comprising: identifying subjects that have previously been treated with an ICM and which did not respond to or benefit from treatment with the ICM; and, selecting thus identified subjects for treatment,
wherein the AXLi and ICM are for administration separately, sequentially or simultaneously.

3. An AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM) for use in the treatment of an AXL–related disease, wherein the AXL-related disease is characterised by a reduced presence of $CD8^+$ cells having TCF1 activity or expression,
and wherein the AXLi and ICM are for administration separately, sequentially or simultaneously.

4. The AXLi and ICM for use according to any preceding claim, wherein the use further comprises the administration of a chemotherapeutic agent and / or radiotherapy.

5. The AXLi and ICM for use according to any preceding claim, wherein the AXL-related disease is further characterised by:
   i) the presence of cells having increased KRAS activity or expression;
   ii) the presence of cells having decreased p53 activity or expression; and / or
   iii) the presence of cells having increased AXL activity or expression.

6. The AXLi and ICM for use according to any preceding claim, wherein increased or decreased expression is assessed by:
   i) determining copy number of the gene encoding STK11, KRAS, or p53 relative to a control sample; and / or
   ii) determining the level of STK11, KRAS, or p53 protein or mRNA relative to a control sample.

7. The AXLi and ICM for use according to any preceding claim, wherein modified STK11 activity or expression is assessed by determining the presence or absence of a STK11 mutation and / or a STK11IP mutation.

8. The AXLi and ICM for use according to any preceding claim, wherein STK11 activity and/or expression is decreased relative to a control sample.

9. The AXLi and ICM for use according to claim 7 or claim 8, wherein the STK11 mutation or STK11IP mutation, is:
   i) a mutation in the nucleotide sequence encoding STK11 or STK11IP;
   ii) a mutation in a regulatory sequence controlling expression of the nucleotide sequence encoding STK11 or STK11IP;
   iii) a mutation in a nucleotide encoding a protein which interacts with the transcription product of the STK11 or STK11IP gene;
   iv) a mutation in the translation product of the STK11 or STK11IP gene; and / or
   v) a mutation in the transcription product of the STK11 or STK11IP gene.

10. The AXLi and ICM for use according to any one of claims 7-9, wherein STK11 mutation is an inactivating mutation, and / or the STK11IP mutation is an activating mutation.

11. The AXLi and ICM for use according to any preceding claim, wherein increased or decreased activity, expression, or population is determined in a sample derived from a subject.

12. The AXLi and ICM for use according to any preceding claim, wherein increased or decreased activity, expression, or population is determined relative to a control.

13. The AXLi and ICM for use according to any preceding claim, wherein the AXL-related disease is cancer, preferably a cancer selected from the group consisting of: lung cancer, non-small-cell lung cancer, breast cancer, melanoma, mesothelioma, acute myeloid leukemia (AML), myelodysplatic syndrome (MDS), pancreas cancer, kidney cancer, urothelial carcinoma, and glioblastoma.

14. The AXLi and ICM for use according to claim 13, wherein the cancer is lung cancer, preferably non-small-cell lung cancer.

15. The AXLi and ICM for use according to any preceding claim, further comprising administering to the subject a therapeutically effective amount of an AXL inhibitor (AXLi), an immune checkpoint modulator (ICM), and / or a chemotherapeutic agent and / or radiotherapy.

16. The AXLi and ICM for use according to any preceding claim, wherein the AXL inhibitor is selected from the group consisting of:

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(pyrrolidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7-(S)-pyrrolidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7-(R)-pyrrolidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(3-fluoro-4-(4-(pyrrolidin-1-yl)piperidin-1-yl)phenyl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N5-(7-(pyrrolidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-1-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N5-(7-(S)-pyrrolidin-1-yl-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(t-butoxycarbonylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(acetamido)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-((2R)-2-(methoxycarbonyl)pyrrolidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(4,4-difluoropiperidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-((methoxycarbonylmethyl)(methyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-((2R)-2-(carboxy)pyrrolidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(4-(ethoxycarbonyl)piperidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(4-(carboxy)piperidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-((carboxymethyl)(methyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(4-(ethoxycarbonylmethyl)piperazin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(4-(carboxymethyl)piperazin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-(7-(pyrrolidin-1-yl)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-1-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-amino-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7s)-7-(di(cyclopropylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((2-methylpropyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((propyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(dipropylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(diethylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(cyclohexylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(cyclopentylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((1-cyclopentylethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(2-propylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((3,3-dimethylbut-2-yl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((cyclohexylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(di(cyclohexylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((5-chlorothien-2-yl)methyl)amino-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((2-carboxyphenyl)methyl)amino-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((3-bromophenyl)methyl)amino-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(dimethylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(cyclobutylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(3-pentylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((2,2-dimethylpropyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(di(cyclopentylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((cyclopentylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(di(bicyclo[2.2.1]hept-2-en-5-ylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((bicyclo[2.2.1]hept-2-en-5-ylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(3-methylbutylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(di(3-methylbutyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(2-ethylbutylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(but-2-enylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-benzo[6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(butyl(but-2-enyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N5-((7S)-7-(t-butoxycarbonylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-amino-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(dimethylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(diethylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(dipropylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(di(cyclopropylmethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(di(3-methylbutyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(cyclobutylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(cyclohexylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-((methylethyl)amino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(cyclopentylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine; and

1-(6,7-dihydro-5H-pyrido[2',3':6,7]cyclohepta[1,2-c]pyridazin-3-yl)-N3-((7S)-7-(2-butylamino)-6,7,8,9-tetrahydro-5H-benzo[7]annulene-2-yl)-1H-1,2,4-triazole-3,5-diamine;

or pharmaceutically acceptable salts thereof.

17. The AXLi and ICM for use according to any preceding claim, wherein the AXL inhibitor is:

i) Bemcentinib (BGB324 / R428); or

ii) selected from the group consisting of: dubermatinib (CAS No.1341200-45-0; UNII 14D65TV20J); gilteritinib (CAS No. 1254053-43-4; UNII 66D92MGC8M); cabozantinib (CAS No. 849217-68-1; UNII 1C39JW444G); SGI7079 (CAS No. 1239875-86-5); merestinib (CAS No. 1206799-15-6; UNII 5OGS5K699E); amuvatinib (CAS No. 850879-09-3; UNII SO9S6QZB4R); bosutinib (CAS No. 380843-75-4; UNII 5018V4AEZ0); glesatinib (CAS No. 936694-12-1; UNII 7Q29OXD98N); foretinib (CAS No. 849217-64-7; UNII 81FH7VK1C4); and, TP0903 (CAS No. 1341200-45-0); or

iii) an anti-AXL antibody.

18. The AXLi and ICM for use according to any preceding claim, wherein the immune checkpoint modulator includes one or more immune checkpoint inhibitors (ICI), optionally wherein the immune checkpoint modulator is selected from the group consisting of: anti-CTLA-4 antibodies, anti-PD-1 antibodies, anti-PD-L1 antibodies, anti-4-1BB antibodies, anti-OX-40 antibodies, anti-GITR antibodies, anti-CD27 antibodies, anti-CD28 antibodies, anti-CD40 antibodies, anti-LAG3 antibodies, anti-ICOS antibodies, anti-TWEAKR antibodies, anti-HVEM antibodies, anti-TIM-1 antibodies, anti-TIM-3 antibodies, anti-VISTA antibodies, and anti-TIGIT antibodies.

19. The AXLi and ICM for use according to any preceding claim, wherein the immune checkpoint modulator is selected from the group consisting of: anti-CTLA-4 antibodies, anti-PD-1 antibodies, and anti-PD-L1 antibodies.

20. The AXLi and ICM for use according to any preceding claim, wherein the immune checkpoint modulator includes, or is: pembrolizumab; ipilimumab; ipilimumab and nivolumab; ipilimumab and pembrolizumab; tremelilumab and durvalumab.

21. The AXLi and ICM for use according to any one of claims 4 to 20, wherein the chemotherapeutic agent is a chemotherapeutic agent which induces immunogenic cell death of cancer cells.

22. The AXLi and ICM for use according to any one of claims 4 to 21, wherein the chemotherapeutic agent is a chemotherapeutic agent which induces an immune response in the subject, optionally wherein the chemotherapeutic agent is a chemotherapeutic agent which induces a type I interferon response in the subject.

23. The AXLi and ICM for use according to any one of claims 4 to 22, wherein the chemotherapeutic agent is an anthracycline, optionally wherein the anthracycline is doxorubicin, daunorubicin, epirubicin, idarubicin, mitoxantrone, or valrubicin, preferably doxorubicin.

24. A method of selecting a subject for treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising: identifying subjects having an AXL-related disease characterised by the presence of cells having modified STK11 activity or expression; and, selecting thus identified subjects for treatment.

25. A method of selecting a subject for treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising: identifying subjects having an AXL-related disease characterised by the presence of cells having increased KRAS activity or expression; and, selecting thus identified subjects for treatment.

26. A method of selecting a subject for treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising: identifying subjects that have previously been treated with an immune checkpoint modulator (ICM)

and which did not respond to or benefit from treatment with the ICM; and, selecting thus identified subjects for treatment.

27. A method of selecting a subject for treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising: identifying subjects having an AXL-related disease characterised by a reduced presence of $CD8^+$ cells having TCF1 activity or expression; and, selecting thus identified subjects for treatment.

28. A method of increasing a population of desired T cells in a subject comprising treating the subject with an AXL inhibitor (AXLi).

29. The method of claim 28, wherein the desired T cell population is a CD8+ T cell population.

30. A method of treating an AXL-related disease in a subject with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising:
(i) administering a combination of the AXLi and the ICM to the subject;
(ii) administering the AXLi to the subject, wherein the ICM has been, is, or will be, administered to the subject; or
(iii) administering the ICM to the subject, wherein the AXLi has been, is, or will be, administered to the subject;
wherein the AXL-related disease is characterised by: the presence of cells having decreased STK11 activity or expression; and / or the presence of cells having a STK11 mutation and / or a STK11IP mutation;
optionally wherein the subject has been selected for treatment using a method as defined in any one of claims 1 -23.

31. A method of treating an AXL-related disease in a subject with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising:
(i) administering a combination of the AXLi and the ICM to the subject;
(ii) administering the AXLi to the subject, wherein the ICM has been, is, or will be, administered to the subject; or
(iii) administering the ICM to the subject, wherein the AXLi has been, is, or will be, administered to the subject;
wherein the AXL-related disease is characterised by: the presence of cells having increased KRAS activity or expression; and / or the presence of cells having a KRAS mutation;
optionally wherein the subject has been selected for treatment using a method as defined in any one of claims 1 -23.

32. The method of claim 30 or 31, wherein the subject is treated with a combination of an AXL inhibitor (AXLi), an immune checkpoint modulator (ICM), and a chemotherapeutic agent and / or radiotherapy.

33. A method of prognosing susceptibility of a subject to treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising:
determining: i) the presence or absence of a STK11 mutation and / or STK11IP mutation; and / or ii) the level of STK11 activity or expression in the subject or a sample derived from the subject;
wherein the presence of a STK11 mutation and / or presence of a STK11IP mutation, and / or a modified level of STK11 activity or expression is indicative of susceptibility to treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), preferably wherein the modified level of STK11 activity or expression is a decreased level of STK11 activity or expression.

34. A method of prognosing susceptibility of a subject to treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), the method comprising:
determining: i) the presence or absence of a KRAS mutation; and / or ii) the level of STK11 activity or expression in the subject or a sample derived from the subject;
wherein the presence of a KRAS mutation, and / or an increased level of STK11 activity or expression is indicative of susceptibility to treatment with a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM).

35. A method of treating an AXL-related disease in a subject in need of such treatment, the method comprising administering to the subject a combination of an AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM), wherein the AXLi and ICM may be administered to the subject simultaneously, separately or sequentially.

36. An AXL inhibitor (AXLi) and an immune checkpoint modulator (ICM) for use in the treatment of an AXL-related disease in a subject, wherein the AXLi and ICM may be administered to the subject simultaneously, separately or sequentially.