WHAT IS CLAIMED IS:

1. Use of an $LPA_1$ antagonist in the manufacture of a medicament for treating interstitial lung disease in a subject in need thereof, wherein the $LPA_1$ antagonist is to be administered to the subject at one or more daily dosages lower than the standard daily dosage during a dose titration period of treatment then increasing the daily dosage to the standard daily dosage of the $LPA_1$ antagonist.

2. The use of claim 1, wherein the dose titration period of treatment is to be completed within 21 days.

3. The use of claim 1 or 2, wherein the dose titration period of treatment is to be completed within 14 days.

4. The use of any one of claims 1 to 3, wherein the dose titration period of treatment is to be completed within 10 days.

5. The use of any one of claims 1 to 4, wherein the dose titration period of treatment is to be completed within 7 days.

6. The use of any one of claims 1 to 5, wherein the dose titration period of treatment is to be completed within 5 days.

7. The use of any one of claims 1 to 6, wherein the dose titration period of treatment comprises an initial period of treatment and a second period of treatment.

8. The use of claim 7, wherein the initial period of treatment is to be completed within 7 days.

9. The use of claim 7 or 8, wherein the initial period of treatment is to be completed within 4 days.

10. The use of any one of claims 7 to 9, wherein the initial period of treatment is to be completed within 3 days.

11. The use of any one of claims 7 to 10, wherein the initial period of treatment is to be completed within 2 days.

12. The use of any one of claims 7 to 11, wherein the initial period of treatment is to be completed within 1 day.

13. The use of any one of claims 7 to 12, wherein the second period of treatment is to be completed within 7 days.

14. The use of any one of claims 7 to 13, wherein the second period of treatment is to be completed within 4 days.

15. The use of any one of claims 7 to 14, wherein the second period of treatment is to be completed within 3 days.

16. The use of any one of claims 7 to 15, wherein the second period of treatment is to be completed within 2 days.

17. The use of any one of claims 7 to 16, wherein the second period of treatment is to be completed within 1 day.

18. The use of any one of claims 7 to 17, wherein the dose titration period of treatment further comprises a third period of treatment.

19. The use of claim 18, wherein the third period of treatment is to be completed within 7 days.

20. The use of claim 18 or 19, wherein the third period of treatment is to be completed within 4 days.

21. The use of any one of claims 18 to 20, wherein the third period of treatment is to be completed within 3 days.

22. The use of any one of claims 18 to 21, wherein the third period of treatment is to be completed within 2 days.

23. The use of any one of claims 18 to 22, wherein the third period of treatment is to be completed within 1 day.

24. Use of an $LPA_1$ antagonist in the manufacture of a medicament for treating interstitial lung disease in a subject in need thereof, wherein the $LPA_1$ antagonist is to be administered to the subject at a daily dosage lower than the standard daily dosage during an initial period of treatment, followed by administration of the dosage at a daily dosage higher than the initial period but lower than the standard daily dosage for a second period of treatment, then the dosage is to be increased to the standard daily dosage of the $LPA_1$ antagonist.

25. The use of claim 24, wherein the initial period of treatment and the second period of treatment are each to be independently completed within 7 days.

26. The use of claim 24 or 25, wherein the initial period of treatment and the second period of treatment are each to be independently completed within 4 days.

27. The use of any of claims 24 to 26, wherein the initial period of treatment and the second period of treatment are each to be independently completed within 3 days.

28. The use of any of claims 24 to 27, wherein the initial period of treatment and the second period of treatment are each to be independently completed within 2 days.

29. The use of any of claims 24 to 28, wherein the initial period of treatment and the second period of treatment are each to be independently completed within 1 day.

30. The use of claim 24, wherein the dosage is to be increased by administration of the dosage at a daily dosage lower than the standard daily dosage for a third period of treatment, then administration of the standard daily dosage for a fourth period of treatment.

31. The use of claim 30, wherein the third period of treatment is to be completed within 7 days.

32. The use of claim 30 or 31, wherein the third period of treatment is to be completed within 4 days.

33. The use of any of claims 30 to 32, wherein the third period of treatment is to be completed within 3 days.

34. The use of any of claims 30 to 33, wherein the third period of treatment is to be completed within 2 days.

35. The use of any of claims 30 to 34, wherein the third period of treatment is to be completed within 1 day.

36. The use of any one of claims 1 to 35, wherein the $LPA_1$ antagonist is to be administered once a day.

37. The use of any one of claims 1 to 36, wherein the $LPA_1$ antagonist is to be administered twice a day.

38. The use of any one of claims 1 to 37, wherein the $LPA_1$ antagonist is to be administered orally.

39. The use of any one of claims 1 to 38, wherein the $LPA_1$ antagonist is to be administered as a tablet.

40. The use of any one of claims 1 to 39, wherein the subject is to be treated with one or more additional therapies for interstitial lung disease.

41. The use claim 40 wherein the one or more additional therapies is pirfenidone.

42. The use of claim 40, wherein the one or more additional therapies is ninedanib.

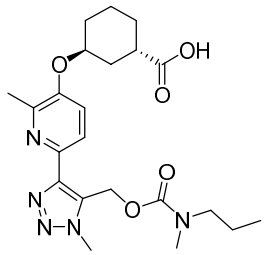
43. The use of any one of claims 1 to 42, wherein the $LPA_1$ antagonist is to be administered with food.

44. The use of any one of claims 1 to 43, wherein the $LPA_1$ antagonist is to be administered without food.

45. The use of any one of claims 1 to 44, wherein the interstitial lung disease is idiopathic pulmonary fibrosis (IPF).

46. The use of any one of claims 1 to 44, wherein the interstitial lung disease is progressive pulmonary fibrosis (PPF).

47. The use of any one of claims 1 to 46, wherein the $LPA_1$ antagonist is Compound A:




Compound A;

or a pharmaceutically acceptable salt thereof, and the standard daily dosage is about 120 mg/day of Compound A or an equivalent amount of a pharmaceutically acceptable salt thereof.

48. The use of claim 47, wherein the standard daily dosage of Compound A is about 60 mg twice daily or an equivalent amount of a pharmaceutically acceptable salt thereof.

49. The use of any one of claims 7 to 48, wherein the $LPA_1$ antagonist is Compound A, or a pharmaceutically acceptable salt thereof, and wherein about 20 mg/day of Compound A, or an equivalent amount of a pharmaceutically acceptable salt thereof, is to be administered during the initial period of treatment.

50. The use of any one of claims 7 to 49, wherein the $LPA_1$ antagonist is Compound A, or a pharmaceutically acceptable salt thereof, and wherein about 10 mg twice daily of

Compound A, or an equivalent amount of a pharmaceutically acceptable salt thereof, is to be administered during the initial period of treatment.

51. The use of any one of claims 7 to 50, wherein the $LPA_1$ antagonist is Compound A, or a pharmaceutically acceptable salt thereof, and wherein about 60 mg/day of Compound A, or an equivalent amount of a pharmaceutically acceptable salt thereof, is to be administered during the second treatment period.

52. The use of any one of claims 7 to 51 wherein the $LPA_1$ antagonist is Compound A, or a pharmaceutically acceptable salt thereof, and wherein about 30 mg twice daily of Compound A, or an equivalent amount of a pharmaceutically acceptable salt thereof, is to be administered during the second treatment period.

53. The use of any one of claims 47 to 52, wherein Compound A comprises the crystal form characterized by at least one of the following:

a) single crystal structure having unit cell parameters substantially equal to

| | | |
|---|---|---|
| Crystal system, space group | Triclinic, P1 | |
| Unit cell dimensions | a = 6.53 ± 0.10 Å | alpha = 92.8 ± 1.0° |
| | b = 13.06 ± 0.10 Å | beta = 95.5 ± 1.0° |
| | c = 14,04 ± 0.10 Å | gamma = 93.0 ±1.0° |
| Volume | 1189(20) $Å^3$ | |
| Density (calculated) | 1.239 $g/cm^3$ | |
| Temperature | room temperature | |

wherein measurement of the single crystal structure is at room temperature;

b) a powder x-ray diffraction pattern substantially the same as shown in FIG. 1;

c) a powder x-ray diffraction pattern comprising 2 or more peaks at 2θ values selected from 6.4±0.2, 6.8±0.2, 9.6±0.2, 13.6±0.2, 15.7±0.2, 18.2±0.2, 19.9±0.2, 21.6±0.2, 24.8±0.2 and 26.8±0.2 (obtained at room temperature and CuKα λ=1.5418 Å);

d) a powder x-ray diffraction pattern comprising 3 or more peaks at 2θ values selected from 6.4±0.2, 6.8±0.2, 9.6±0.2, 13.6±0.2, 14.1±0.2, 14.5±0.2, 14.7±0.2, 15.7±0.2, 18.2±0.2 , 18.7±0.2, 19.2±0.2, 19.9±0.2, 20.5±0.2, 21.6±0.2, 22.5±0.2,

23.1±0.2, 24.1±0.2, 24.8±0.2, 25.6±0.2, 26.8±0.2, 27.1±0.2 and 27.8±0.2 (obtained at room temperature and CuKα λ=1.5418 Å);

e) a differential scanning calorimetry thermogram substantially similar to the one as shown in FIG. 2;

f) a differential scanning calorimetry thermogram with an endotherm having an onset at about 152 $^{o}$C; and/or

g) a thermal gravimetric analysis thermogram substantially similar to the one as shown in FIG. 3.

54. The use of any one of claims 1 to 53, wherein the subject experiences a smaller decline in forced vital capacity (FVC) after a treatment period compared to an untreated subject.

55. The use of any one of claims 1 to 54, wherein the subject experiences a greater time to first disease progression event after a treatment period than an untreated subject, wherein the first disease progression event is selected from:

absolute predicted forced vital capacity (ppFVC) decline of $\geq$ 10% from baseline;
acute exacerbation of lung fibrosis;
respiratory-related hospitalization; and
all-cause mortality.

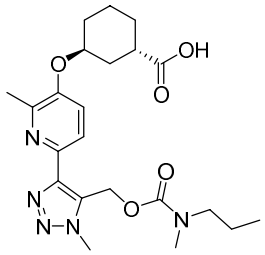
56. The use of any one of claims 1 to 55, wherein the subject experiences a smaller increase in cough domain score as measured by the Living with Pulmonary Fibrosis (L-PF) questionnaire over a treatment period than an untreated subject.

57. The use of any one of claims 1 to 56, wherein the subject experiences a smaller increase in dyspnea score as measured by the Living with Pulmonary Fibrosis (L-PF) questionnaire over a treatment period than an untreated subject.

58. Use of an $LPA_1$ antagonist in the manufacture of a medicament for treating interstitial lung disease in a subject, wherein the $LPA_1$ antagonist is to be administered to the subject by use of an initial dose escalation regimen at a daily dosage lower than the standard daily dosage during an initial period of treatment then the dosage is to be increased to the

standard daily dosage of the $LPA_1$ antagonist, the medicament is capable of reducing the incidence of cardiovascular adverse events in the subject.

59. The use of claim 58, wherein the LPA1 antagonist is Compound A:



Compound A;

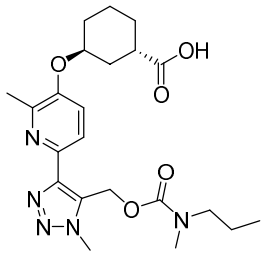
or a pharmaceutically acceptable salt thereof, and the standard daily dosage is about 120 mg/day of Compound A or an equivalent amount of a pharmaceutically acceptable salt thereof.

60. The use of claim 58 or 59, wherein the interstitial lung disease is idiopathic pulmonary fibrosis (IPF).

61. The use of claim 58 or 59, wherein the interstitial lung disease is progressive pulmonary fibrosis (PPF).

62. Use of an $LPA_1$ antagonist in the manufacture of a medicament for treating interstitial lung disease in a subject in need thereof, wherein the $LPA_1$ antagonist is to be administered to the subject at a daily dosage lower than the standard daily dosage during an initial period of treatment then the dosage is to be increased to the standard daily dosage of the $LPA_1$ antagonist.

63. The use of claim 62, wherein the LPA1 antagonist is Compound A:



Compound A;

or a pharmaceutically acceptable salt thereof, for treating interstitial lung disease and the standard daily dosage is about 120 mg/day of Compound A, or an equivalent amount of a pharmaceutically acceptable salt thereof.

64. The use of claim 62 or 63, wherein the interstitial lung disease is idiopathic pulmonary fibrosis (IPF).

65. The use of claim 62 or 63, wherein the interstitial lung disease is progressive pulmonary fibrosis (PPF).