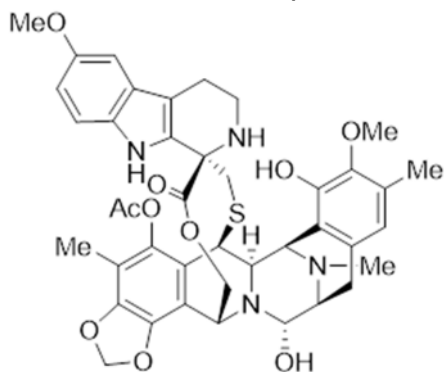


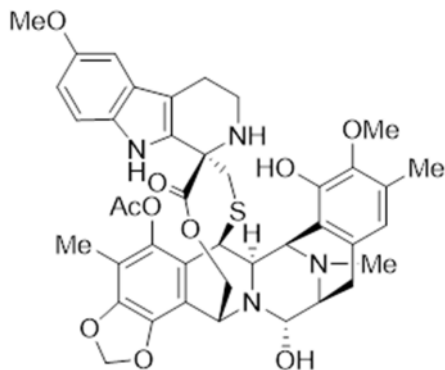
CLAIMS:

1. Use of a compound of formula (I):



(I), in the manufacture of a medicament for the treatment of lung cancer, wherein said medicament is to be administered as a combination therapy with an immune checkpoint inhibitor of PD-L1, PD-1 or CTLA-4 to a patient in need thereof, and wherein the compound of formula (I) is to be administered every 21 days by intravenous infusion at a dose of 3.2 mg/m².

2. Use of an immune checkpoint inhibitor of PD-L1, PD-1 or CTLA-4 in the manufacture of a medicament for the treatment of lung cancer, wherein said medicament is to be administered as a combination therapy with a compound of formula (I):



(I);
to a patient in need thereof, and wherein the compound of formula (I) is to be administered every 21 days by intravenous infusion at a dose of 3.2 mg/m².

3. The use of claim 1 or claim 2, wherein the immune checkpoint inhibitor comprises an immunoglobulin molecule.
4. The use of claim 3, wherein the immune checkpoint inhibitor comprises an antibody targeting an immune checkpoint molecule selected from PD-L1, PD-1 and CTLA-4.

5. The use of any one of the preceding claims, wherein the immune checkpoint inhibitor of PD-L1, PD-1 or CTLA-4 comprises a plurality of inhibitors targeting a plurality of immune checkpoint molecules.
6. The use of claim 5 wherein the immune checkpoint inhibitor targets CTLA-4 and PD-1.
7. The use of any one of claims 1 to 6, wherein the immune checkpoint inhibitor comprises a monoclonal antibody which specifically binds CTLA-4.
8. The use of any one of claims 1 to 6, wherein the immune checkpoint inhibitor comprises a monoclonal antibody which specifically binds PD-1.
9. The use of any one of claims 1 to 5, wherein the immune checkpoint inhibitor comprises a monoclonal antibody which specifically binds PD-L1.
10. The use of any one of claims 1 to 4, wherein the immune checkpoint inhibitor comprises a monoclonal antibody selected from pembrolizumab, nivolumab, ipilimumab, avelumab, atezolizumab, durvalumab, cemiplimab (REGN2810), camrelizumab (SHR1210), envafolimab (KN035), sintilimab (IBI308), spartalizumab (PDR001), tislelizumab (BGB-A317), prolgolimab (BCD-100), toripalimab (JS001), dostarlimab (TSR-042, WBP-285) and tremelimumab (ticilimumab, CP-675,206).
11. The use of claim 10, wherein the monoclonal antibody is atezolizumab.
12. The use of claim 10, wherein the monoclonal antibody is pembrolizumab.
13. The use of claim 10, wherein the monoclonal antibody is durvalumab.
14. The use of any one of the preceding claims, wherein the compound of formula (I) and the immune checkpoint inhibitor are to be administered concurrently, separately or sequentially.
15. The use of claim 14 wherein the compound of formula (I) is to be administered initially, followed by the immune checkpoint inhibitor.
16. The use of any one of the preceding claims, wherein multiple administrations of either the compound of formula (I), or the immune checkpoint inhibitor, or both, are given.
17. The use of any one of the preceding claims, wherein the compound of formula (I) is to be administered as a 1-hour infusion.

18. The use of any one of the preceding claims, wherein the immune checkpoint inhibitor is to be administered by intravenous infusion.
19. The use according to any one of claims 1 to 17, wherein the immune checkpoint inhibitor is to be administered subcutaneously.
20. The use according to any one of the preceding claims, wherein the immune checkpoint inhibitor is to be administered every 21 days.
21. The use of any one of the preceding claims, wherein the lung cancer expresses PD-L1.
22. The use of any one of the preceding claims, wherein the treatment further comprises determining whether the lung cancer to be treated expresses PD-L1 prior to beginning treatment.
23. The use according to any one of the preceding claims, wherein the compound of formula (I) is to be administered in the form of a pharmaceutically acceptable salt selected from a hydrochloride, hydrobromide, hydroiodide, sulfate, nitrate, phosphate, acetate, trifluoroacetate, maleate, fumarate, citrate, oxalate, succinate, tartrate, malate, mandelate, methanesulfonate, p-toluenesulfonate, sodium, potassium, calcium and ammonium salts, ethylenediamine, ethanolamine, N,N-dialkylenethanolamine, triethanolamine or basic amino acid salt.
24. The use of any one of the preceding claims, wherein the treatment results in one or more of: reduction in tumour size; delay in growth of tumour; prolongation of life of the patient; delay in disease progression; remission.
25. The use of any one of the preceding claims, wherein the treatment comprises prolonging survival of a patient having lung cancer, delaying disease progression of lung cancer in a patient, and/or reducing or delaying growth of a lung cancer tumour.