

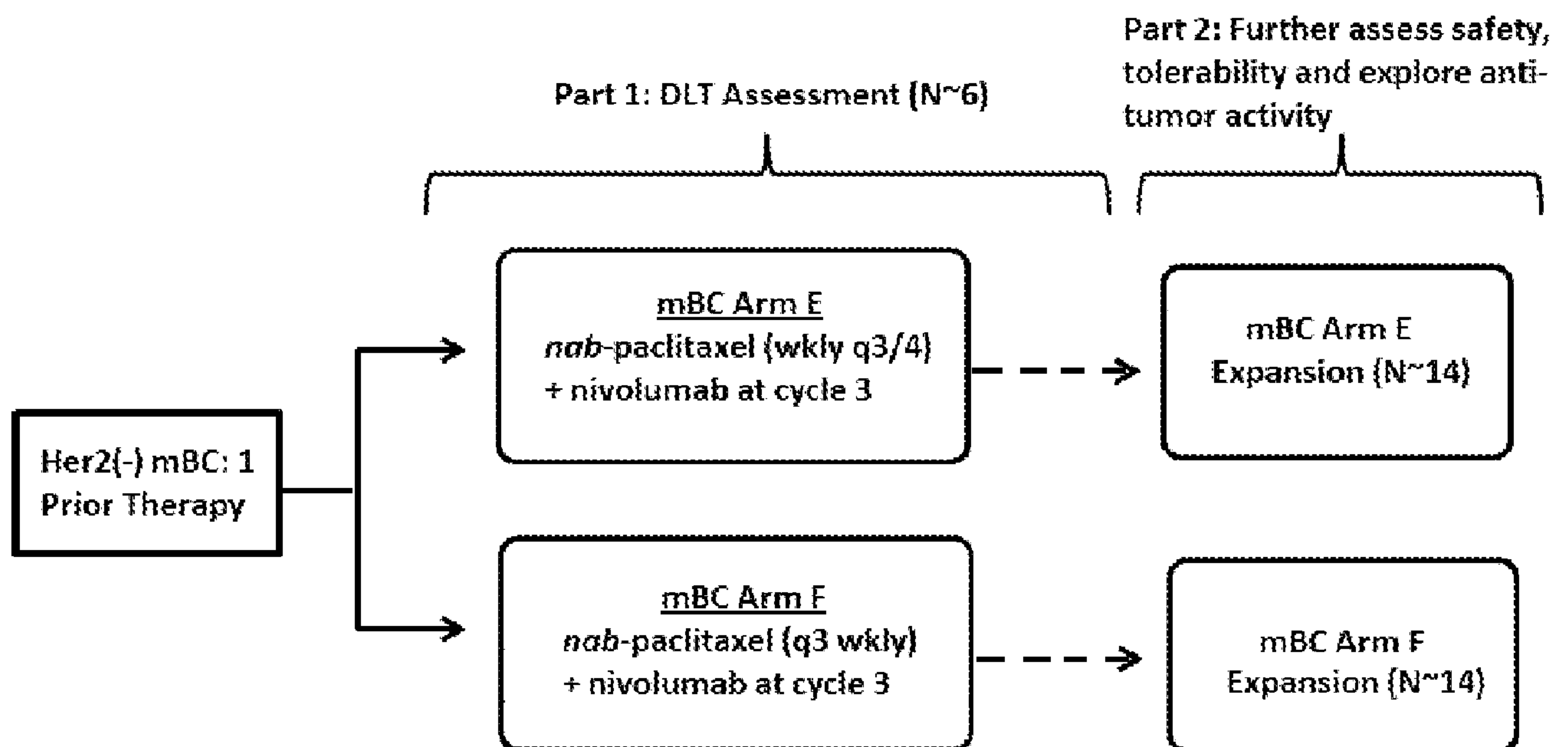


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FIGURE 1



(57) Abrégé/Abstract:

The present invention provides combination therapy methods of treating a proliferative disease (such as cancer) comprising a first therapy comprising administering to an individual an effective amount of a taxane in a nanoparticle composition, and a second therapy which may include the administration of an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

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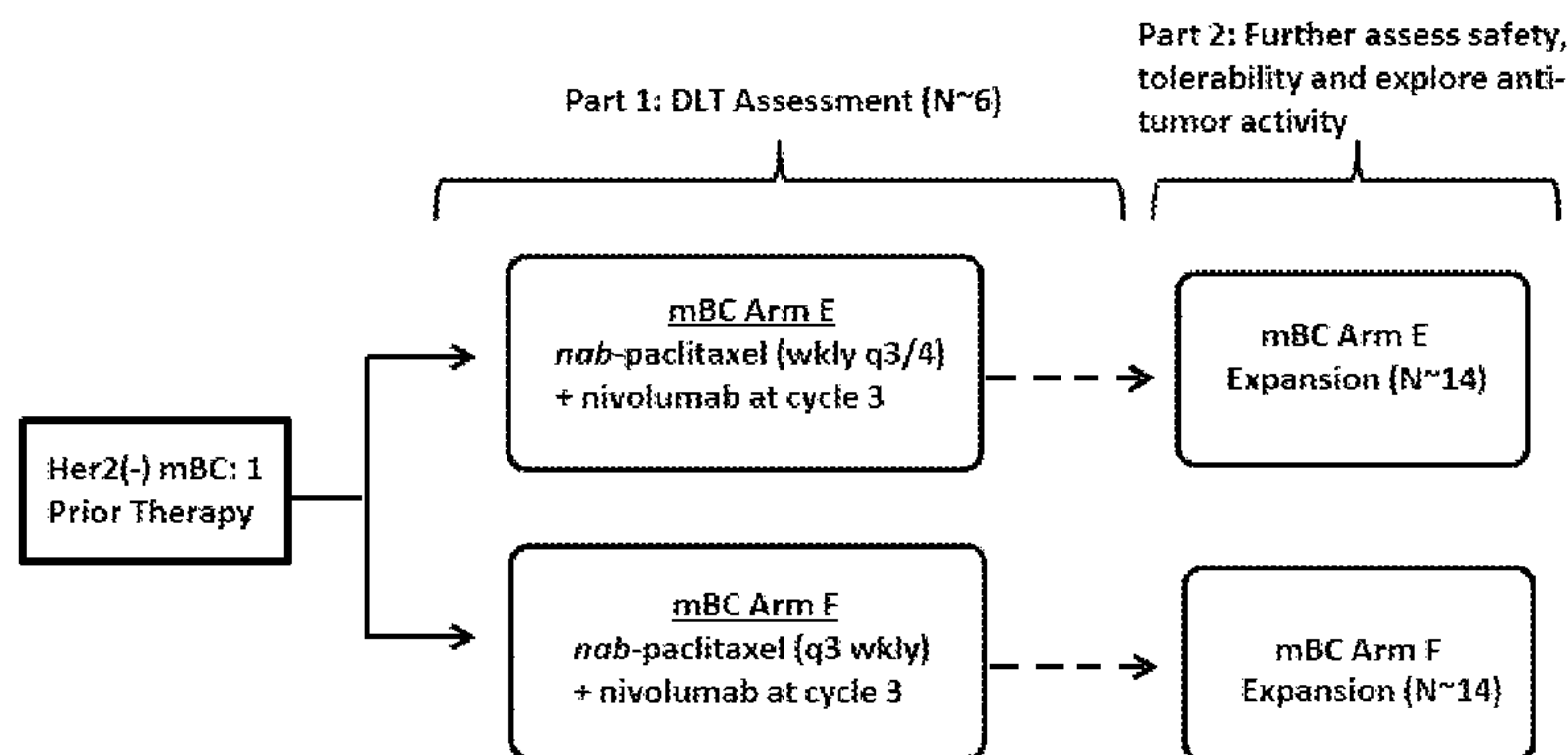
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FIGURE 1



(57) Abstract: The present invention provides combination therapy methods of treating a proliferative disease (such as cancer) comprising a first therapy comprising administering to an individual an effective amount of a taxane in a nanoparticle composition, and a second therapy which may include the administration of an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

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COMBINATION THERAPIES

CROSS-REFERENCE TO RELATED APPLICATIONS

[0001] This application claims the benefit of U.S. Provisional Application No. 62/086,533, filed on December 2, 2014, which is hereby incorporated by reference in its entirety.

I. FIELD

[0002] Provided herein are methods and compositions for the treatment of proliferative diseases comprising the administration of a combination of a taxane and at least one agent that antagonizes a PD-1 pathway in a cell.

II. BACKGROUND

[0003] Cancer is a leading cause of death world wide. Despite significant advances in the field of chemotherapy, many of the most prevalent forms of cancer still resist chemotherapeutic intervention. The incidence of cancer continues to climb as the general population ages and as new forms of cancer develop.

[0004] Taxanes (such as paclitaxel and docetaxel) have been shown to have significant antineoplastic and anticancer effects in a wide variety of cancers. For example, paclitaxel acts by interfering with the normal function of microtubule breakdown. Paclitaxel binds to the beta subunit of tubulin, the building blocks of microtubules, causing hyper-stabilization of the microtubule structures. The resulting paclitaxel/microtubule structure is unable to disassemble, thereby arresting mitosis and inhibiting angiogenesis. The poor aqueous solubility for the taxanes, however, presents significant challenges for developing effective taxane-based cancer therapeutics. Furthermore, the interaction of different taxane formulations with other therapeutic agents in the combination therapy context remains to be studied.

[0005] Albumin-based nanoparticle compositions have been developed as a drug delivery system for delivering substantially water insoluble drugs such as taxanes. See,

for example, U.S. Pat. Nos. 5,916,596; 6,506,405; 6,749,868, and 6,537,579, and 7,820,788 and also in U.S. Pat. Pub. Nos. 2007/0082838. The albumin-based nanoparticle technology utilizes the natural properties of the protein albumin to transport and deliver substantially water insoluble drugs to the site of disease. These nanoparticles are readily incorporated into the body's own transport processes and are able to exploit the tumors' attraction to albumin, enabling the delivery of higher concentrations of the active drug encapsulated in the nanoparticles to the target site. In addition, the albumin-based nanoparticle technology offers the ability to improve a drug's solubility by avoiding the need for toxic chemicals, such as solvents, in the administration process, thus potentially improving safety through the elimination of solvent-related side effects.

[0006] Other references include PCT Application Nos. WO08/057562, WO2009126938A1, WO2009126401A1, WO2009126175A1.

[0007] A continuing need exists for effective therapies to treat subjects with cancer.

[0008] The disclosures of all publications, patents, patent applications and published patent applications referred to herein are hereby incorporated herein by reference in their entirety.

III. SUMMARY

[0009] In one aspect, provided herein are combination therapy methods of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell (also referred herein as a "PD-1 pathway antagonist," "antagonist of the PD-1 pathway," "PD-1 pathway inhibitor," or "the other agent"). In some embodiments, provided herein is a method of treating a proliferative disease (such as cancer) in an individual comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising paclitaxel coated with an albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE[®]), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0010] In some embodiments, the proliferative disease is resistant or refractory to the treatment of taxane when administered alone or in conjunction with an agent other than the PD-1 pathway antagonist. In some embodiments, the proliferative disease is resistant or refractory to the treatment when the PD-1 pathway antagonist is administered alone or in conjunction with an agent other than the nanoparticle composition (such as a non-nanoparticle composition of a taxane including paclitaxel).

[0011] In some embodiments, the composition comprising nanoparticles (also referred to as “nanoparticle composition”) and the other agent are administered simultaneously, either in the same composition or in separate compositions. In some embodiments, the nanoparticle composition and the other agent are administered sequentially, *i.e.*, the nanoparticle composition is administered either prior to or after the administration of the other agent.

[0012] In some embodiments, the administration of the nanoparticle composition and the other agent is concurrent, *i.e.*, the administration period of the nanoparticle composition and that of the other agent overlap with each other. In some embodiments, the nanoparticle composition is administered for at least one cycle (for example, at least any of 2, 3, or 4 cycles) prior to the administration of the other agent. In some embodiments, the other agent is administered for at least any of one, two, three, or four weeks after the termination of the nanoparticle composition. In some embodiments, the nanoparticle composition and the PD-1 pathway antagonist are administered over the same treatment cycles.

[0013] In some embodiments, the administration of the nanoparticle composition and the other agent are non-concurrent. For example, in some embodiments, the administration of the nanoparticle composition is terminated before the other agent is administered. In some embodiments, the administration of the other agent is terminated before the nanoparticle composition is administered.

[0014] In some embodiments, the other agent is an antibody. In some embodiments, the antibody is a monoclonal antibody. In some embodiments, the antibody is a human antibody. In some embodiments, the antibody is a humanized antibody. In some embodiments, the antibody is a fully human antibody. In some embodiments, the antibody is a chimeric antibody. In some embodiments, the antibody targets a component

of the PD-1 pathway. For example, in some embodiments, the antibody is an anti-PD-1 antibody. In some embodiments, the antibody is an anti-PD-L1 antibody. In some embodiments, the antibody is an anti-PD-L2 antibody.

[0015] In some embodiments, the other agent comprises at least a portion of an immunoglobulin (Ig). In some embodiments, the immunoglobulin (Ig) is immunoglobulin G (IgG). In some embodiments, the IgG is IgG1. In some embodiments, the IgG is IgG2. In some embodiments, the IgG is IgG3. In some embodiments, the IgG is IgG4. In some embodiments, the IgG is a human IgG.

[0016] In some embodiments, the other agent antagonizes PD-1, a ligand of PD-1 (such as PD-L1 or PD-L2), or a combination thereof. In some embodiments, the other agent is selected from the group consisting of AMP-224, nivolumab, AMP-514, pembrolizumab, pidilizumab, REGN2810, PDR001, BGB-A317, BMS-936559, MEDI4736, MSB0010718C, and MPDL3280A. In some embodiments, the other agent is nivolumab. In some embodiments, the other agent is pembrolizumab. In some embodiments, the other agent is pidilizumab. In some embodiments, the other agent is REGN2810. In some embodiments, the other agent is PDR001. In some embodiments, the other agent is BGB-A317. In some embodiments, the other agent is AMP-514. In some embodiments, the other agent is AMP-224.

[0017] In some embodiments, the other agent is an antagonist of PD-1 (also referred herein as a “PD-1 antagonist” or “PD-1 inhibitor”). In some embodiments, the antagonist of PD-1 disrupts or interferes with the interaction between PD-1 and a ligand of PD-1. In some embodiments, the antagonist of PD-1 disrupts or interferes with the interaction between PD-1 and PD-L1. In some embodiments, the antagonist of PD-1 disrupts or interferes with the interaction between PD-1 and PD-L2. In some embodiments, the PD-1 antagonist comprises a fusion protein. In some embodiments, the fusion protein is AMP-224. In some embodiments, the PD-1 antagonist comprises an antibody. In some embodiments, the PD-1 antagonist comprises an anti-PD-1 antibody. In some embodiments, a PD-1 antagonist is selected from the group consisting of nivolumab (*i.e.*, BMS-936558), AMP-514, pembrolizumab (*i.e.*, MK-3475), REGN2810, PDR001, BGB-A317, and pidilizumab (*i.e.*, CT-011). In some embodiments, the anti-PD-1 antagonist is nivolumab. In some embodiments, the anti-PD-1 antagonist is

pembrolizumab. In some embodiments, the anti-PD-1 antagonist is REGN2810. In some embodiments, the anti-PD-1 antagonist is PDR001. In some embodiments, the anti-PD-1 antagonist is BGB-A317.

[0018] In some embodiments, the other agent is an antagonist of PD-L1 (also referred herein as a “PD-L1 antagonist” or “PD-L1 inhibitor”). In some embodiments, the antagonist of PD-L1 disrupts or interferes with the interaction between PD-1 and PD-L1. In some embodiments, the PD-L1 antagonist comprises a fusion protein. In some embodiments, the fusion protein is AMP-224. In some embodiments, the PD-L1 antagonist comprises an antibody. In some embodiments, the PD-L1 antagonist comprises an anti-PD-L1 antibody. In some embodiments, a PD-L1 antagonist is selected from the group consisting of BMS-936559, MEDI4736, MSB0010718C (*i.e.*, avelumab) and MPDL3280A (*i.e.*, RG7446). In some embodiments, a PD-L1 antagonist is MEDI4736. In some embodiments, a PD-L1 antagonist is MPDL3280A. In some embodiments, a PD-L1 antagonist is MSB0010718C.

[0019] In some embodiments, the other agent is an antagonist of PD-L2. In some embodiments, the antagonist of PD-L2 disrupts or interferes with the interaction between PD-1 and PD-L2. In some embodiments, the PD-L2 antagonist comprises a fusion protein. In some embodiments, the fusion protein is AMP-224. In some embodiments, the PD-L2 antagonist comprises an antibody. In some embodiments, the PD-L2 antagonist comprises an anti-PD-L2 antibody.

[0020] In some embodiments, the other agent comprises a fusion protein. In some embodiments, the fusion protein comprises at least a portion of an antibody. In some embodiments, the fusion protein comprises at least a portion of a non-antibody protein. In some embodiments, the fusion protein comprises at least a portion of an antibody and at least a portion of a non-antibody protein. In some embodiments, the antibody targets a component of the PD-1 pathway. For example, in some embodiments, the antibody targets PD-1. In some embodiments, the antibody targets a ligand of PD-1 (*e.g.*, PD-L1, PD-L2). In some embodiments, the non-antibody protein comprises a component of the PD-1 pathway. For example, in some embodiments, the non-antibody protein comprises at least a portion of a ligand of PD-1. In some embodiments, the non-antibody portion comprises at least a portion of PD-L1. In some embodiments, the non-antibody portion

comprises at least a portion of PD-L2. In some embodiments, the non-antibody portion comprises at least a portion of PD-1. In some embodiments, the other agent is AMP-224.

[0021] Thus, for example, in some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of nivolumab (BMS-936558).

[0022] Thus, for example, in some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of AMP-514.

[0023] Thus, for example, in some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of pembrolizumab (MK-3475).

[0024] Thus, for example, in some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of pidilizumab (CT-011).

[0025] Thus, for example, in some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of REGN2810.

[0026] Thus, for example, in some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising

nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of PDR001.

[0027] Thus, for example, in some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of BGB-A317.

[0028] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of BMS-936559.

[0029] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of MEDI4736.

[0030] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of MPDL3280A (RG7446).

[0031] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of MSB0010718C (avelumab).

[0032] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as

paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of AMP-224.

[0033] In some embodiments, there is provided a method of treating breast cancer in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0034] In some embodiments, there is provided a method of treating breast cancer in an individual, wherein the individual is negative for HER2, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0035] In some embodiments, there is provided a method of treating breast cancer in an individual, wherein the individual is negative for ER, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0036] In some embodiments, there is provided a method of treating breast cancer in an individual, wherein the individual is negative for PR, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0037] In some embodiments, there is provided a method of treating breast cancer in an individual, wherein the individual is negative for HER2 and ER, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0038] In some embodiments, there is provided a method of treating breast cancer in an individual, wherein the individual is negative for HER2 and PR, comprising administering to the individual a) an effective amount of a composition comprising

nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0039] In some embodiments, there is provided a method of treating breast cancer in an individual, wherein the individual is negative for ER and PR, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0040] In some embodiments, there is provided a method of treating breast cancer in an individual, wherein the individual is negative for ER, PR, and HER2, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0041] In some embodiments, there is provided a method of treating non-small cell lung cancer in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0042] In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.

[0043] In some embodiments of the methods disclosed herein, the method further comprises conducting definitive surgery within about 1, 2, 3, 4, 5, 6, 7, 8, 9, or 10 following the preoperative therapy.

[0044] The methods presented herein generally comprise administration of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein. In some embodiments, the composition comprises nanoparticles

comprising paclitaxel and an albumin. In some embodiments, the nanoparticles in the composition described herein have an average diameter of no greater than about 200 nm, including for example no greater than about any one of 190, 180, 170, 160, 150, 140, 130, 120, 110, 100, 90, 80, 70, or 60 nm. In some embodiments, at least about 50% (for example at least about any one of 60%, 70%, 80%, 90%, 95%, or 99%) of all the nanoparticles in the composition have a diameter of no greater than about 200 nm, including for example no greater than about any one of 190, 180, 170, 160, 150, 140, 130, 120, 110, 100, 90, 80, 70, or 60 nm. In some embodiments, at least about 50% (for example at least any one of 60%, 70%, 80%, 90%, 95%, or 99%) of all the nanoparticles in the composition fall within the range of about 20 to about 400, including for example about 20 to about 200 nm, about 30 to about 180 nm, and any one of about 40 to about 150, about 50 to about 120, and about 60 to about 100 nm. In some embodiments, the weight ratio of the carrier protein (such as albumin) to taxane (such as paclitaxel) in the composition is between about 1:1 to about 18:1. In some embodiments, the weight ratio of the carrier protein (such as albumin) to taxane (such as paclitaxel) in the composition is between about 1:1 to about 9:1. In some embodiments, the weight ratio of the carrier protein (such as albumin) to taxane (such as paclitaxel) in the composition is about 9:1. In some embodiments, the nanoparticle has an average diameter of less than or equal to about 200 nm and the weight ratio of the carrier protein (such as albumin) to taxane (such as paclitaxel) in the composition is between about 1:1 to about 18:1. In some embodiments, the nanoparticle has an average diameter of less than or equal to about 200 nm and the weight ratio of the carrier protein (such as albumin) to taxane (such as paclitaxel) in the composition is between about 1:1 to about 9:1. In some embodiments, the nanoparticle has an average diameter of less than or equal to about 200 nm and the weight ratio of the carrier protein (such as albumin) to taxane (such as paclitaxel) in the composition is about 9:1.

[0045] In some embodiments, the carrier protein has sulfhydryl groups that can form disulfide bonds. In some embodiments, at least about 5% (including for example at least about any one of 10%, 15%, 20%, 25%, 30%, 40%, 50%, 60%, 70%, 80%, or 90%) of the carrier protein in the nanoparticle portion of the composition are crosslinked (for example crosslinked through one or more disulfide bonds).

[0046] In some embodiments, the nanoparticles comprise the taxane (such as paclitaxel) coated with a carrier protein, such as albumin (*e.g.*, human serum albumin). In some embodiments, the composition comprises taxane in both nanoparticle and non-nanoparticle form, wherein at least about any one of 50%, 60%, 70%, 80%, 90%, 95%, or 99% of the taxane in the composition are in nanoparticle form. In some embodiments, the taxane in the nanoparticles constitutes more than about any one of 50%, 60%, 70%, 80%, 90%, 95%, or 99% of the nanoparticles by weight. In some embodiments, the nanoparticles comprise a core of taxane that is substantially free of polymeric materials (such as polymeric matrix).

[0047] In some embodiments, the nanoparticle composition is substantially free (such as free) of surfactants (such as CREMOPHOR®, Tween 80, or other organic solvents used for the administration of taxanes). In some embodiments, the nanoparticle composition contains less than about any one of 20%, 15%, 10%, 7.5%, 5%, 2.5%, or 1% organic solvent. In some embodiments, the weight ratio of carrier protein (such as albumin) to taxane (such as paclitaxel) in the nanoparticle composition is about 18:1 or less, such as about 15:1 or less, for example about 9:1 or less. In some embodiments, the weight ratio of carrier protein (such as albumin) to taxane (such as paclitaxel) in the composition falls within the range of any one of about 1:1 to about 18:1, about 2:1 to about 15:1, about 3:1 to about 13:1, about 4:1 to about 12:1, about 5:1 to about 10:1, about 9:1. In some embodiments, the weight ratio of carrier protein (such as albumin) to taxane (such as paclitaxel) in the nanoparticle portion of the composition is about any one of 2:1, 3:1, 4:1, 5:1, 9:1, 10:1, 15:1, or less.

[0048] In some embodiments, the nanoparticle composition comprises one or more of the above characteristics. In some embodiments, the nanoparticle composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*.

[0049] In some embodiments, the nanoparticle composition is ABRAXANE®. Nanoparticle compositions comprising other taxanes (such as tesetaxel, docetaxel, and ortataxel) may also comprise one or more of the above characteristics.

[0050] In one aspect, presented herein is a method of treating a proliferative disease in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nab-paclitaxel, and b) an effective amount of an anti-PD-1 antibody. In some embodiments, the composition in a) comprises ABRAXANE®. In some embodiments, the anti-PD-1 antibody is nivolumab. In some embodiments, the proliferative disease is lung cancer. In some embodiments, the proliferative disease is pancreatic cancer. In some embodiments, the proliferative disease is breast cancer.

[0051] In some embodiments, the further comprising administering to the individual an effective amount of a platinum-based agent. In some embodiments, the platinum-based agent is carboplatin. In some embodiments, the platinum-based agent is cisplatin. In some embodiments, the composition a) and the anti-PD-1 antibody are administered concurrently. In some embodiments, the composition in a) and the anti-PD-1 antibody are administered sequentially. In some embodiments, the composition in a) and the anti-PD-1 antibody are administered simultaneously. In some embodiments, the composition in a), the anti-PD-1 antibody and the platinum-based agent are administered concurrently.

[0052] In some embodiments, the composition in a), the anti-PD-1 antibody and the platinum-based agent are administered concurrently are administered sequentially. In some embodiments, the composition in a), the anti-PD-1 antibody and the platinum-based agent are administered concurrently are administered simultaneously.

[0053] In some embodiments, there is provided a method of treating breast cancer (such as HER2 negative breast cancer) in an individual, comprising administering to said individual a) an effective amount of *nab*-paclitaxel, *e.g.*, ABRAXANE®, and b) an effective amount of a PD-1 pathway inhibitor. In some embodiments, there is provided a method of treating breast cancer (such as HER2 negative breast cancer) in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an antagonist of PD-1. In some embodiments, there is provided a method of treating breast cancer (such as HER2 negative breast cancer) in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-1 antibody. In some

embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is an effective amount described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 75 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 100 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 125 mg/m². In some embodiments, the amount of

ABRAXANE® administered to the individual is about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 175 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 225 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 260 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 325 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 350 mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway inhibitor is an anti-PD-1 antibody. In some embodiments, the antagonist of PD-1 is an anti-PD-1 antibody. In some embodiments, the anti-PD-1 antibody is selected from the group consisting of nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810,

PDR001, BGB-A317, and pidilizumab (CT-011). In some embodiments, the anti-PD-1 antibody is nivolumab. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pembrolizumab. In some embodiments, the pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the

individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every

three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pidilizumab. In some embodiments, the pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some

embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the

PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some

embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is AMP-514. In some embodiments, the second agent is AMP-514. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, In some embodiments, between about 0.1 mg/kg to about 30 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 30 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 20

mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered intravenously. In some embodiments, the ABRAXANE® is administered intravenously. In some embodiments, the PD-1 pathway inhibitor is administered intravenously. In some embodiments, the antagonist of PD-1 is administered intravenously. In some embodiments, the anti-PD-1 antibody is administered intravenously. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, and the anti-PD-1 antibody are administered intravenously. In some embodiments, the ABRAXANE® and the anti-PD-1 antibody are administered intravenously. In some embodiments, the breast cancer being treated is a HER2 negative breast cancer. In particular embodiments, the breast cancer being treated is a triple negative breast cancer (clinically negative for expression of estrogen receptor (ER), progesterone receptor (PR) and Her2/neu).

[0054] In some embodiments, there is provided a method of treating breast cancer (such as HER2 negative breast cancer) in an individual, comprising: a) intravenously administering about 50 to about 350 mg/m² (such as about 75 mg/m², 100 mg/m², 125 mg/m², 150 mg/m², 200 mg/m², 225 mg/m², 250 mg/m², 260 mg/m²) of ABRAXANE® to the individual weekly, and b) intravenously administering about 0.01 to about 10 mg/kg (such as about 3 mg/kg) of an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011)) to the individual one out of every fourteen days. In some embodiments, the nanoparticle composition is administered on days one, eight and fifteen of every twenty eight days, and an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011)) is administered on days 1 and 15 of every twenty eight days. In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is an effective amount described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to

the individual is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 75 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 100 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 125 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 175 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 225 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 260 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 325 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 350 mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once

every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is selected from the group consisting of nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, and pidilizumab (CT-011). In some embodiments, the anti-PD-1 antibody is nivolumab. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the

nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is AMP-514. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pembrolizumab. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments,

pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once

every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pidilizumab. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In

some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments,

between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is

administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the breast cancer being treated is a HER2 negative breast cancer. In particular embodiments, the breast cancer being treated is a triple negative breast cancer (negative for estrogen receptor (ER), progesterone receptor (PR) and Her2/neu).

[0055] In some embodiments, there is provided a method of treating lung cancer (such as NSCLC) in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, there is provided a method of treating lung cancer (such as NSCLC) in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an antagonist of PD-1. In some embodiments, there is provided a method of treating lung cancer (such as NSCLC) in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011)). In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the

individual is an effective amount described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 75 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 100 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 125 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 175 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 225 mg/m². In some embodiments, the amount of ABRAXANE® administered to the

individual is about 250 mg/m^2 . In some embodiments, the amount of ABRAXANE® administered to the individual is about 260 mg/m^2 . In some embodiments, the amount of ABRAXANE® administered to the individual is about 275 mg/m^2 . In some embodiments, the amount of ABRAXANE® administered to the individual is about 300 mg/m^2 . In some embodiments, the amount of ABRAXANE® administered to the individual is about 325 mg/m^2 . In some embodiments, the amount of ABRAXANE® administered to the individual is about 350 mg/m^2 . In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is nivolumab. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of

nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is AMP-514. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, the anti-PD-1 antibody is pembrolizumab. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-

paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two

weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pidilizumab. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In

some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In

some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-

A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered intravenously. In some embodiments, the ABRAXANE® is administered intravenously. In some embodiments, the PD-1 pathway inhibitor is administered intravenously. In some embodiments, the antagonist of PD-1 is administered intravenously. In some embodiments, the anti-PD-1 antibody is administered intravenously. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, and the anti-PD-1 antibody are administered intravenously. In some embodiments, the ABRAXANE® and the anti-PD-1 antibody are administered intravenously. In some embodiments, the method further comprises administering to the individual an effective amount of a platinum-based agent.

In some embodiments, the platinum-based agent is carboplatin. In some embodiments, the platinum-based agent is administered intravenously. In some embodiments, the carboplatin is administered intravenously. In some embodiments, the cisplatin is administered intravenously. In some embodiments, the ABRAXANE®, the anti-PD-1 antibody and the platinum-based agent are administered intravenously. In some embodiments, the platinum-based agent is cisplatin. In some embodiments, the lung cancer is non-small cell lung cancer (NSCLC).

[0056] In some embodiments, there is provided a method of treating lung cancer (such as NSCLC) in an individual, comprising: a) intravenously administering about 50 to about 350 mg/m² (such as about 75 mg/m², 100 mg/m², 125 mg/m², 150 mg/m², 200 mg/m², 225 mg/m², 250 mg/m²) of ABRAXANE® to the individual weekly, and b) intravenously administering about 0.01 to about 10 mg/kg (such as about 3 mg/kg) of an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011)) to the individual one out of every twenty one days. In some embodiments, the method further comprises intravenously administering to the individual an effective amount of carboplatin at the dose of AUC6 one out of every twenty one days. In some embodiments, the nanoparticle composition is administered on days 1, 8 and 15 of every 21 days, and an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011)) is administered on day 15 of every 21 days. In some embodiments, the carboplatin is administered on day 1 of every 21 days. In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is an effective amount described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE®

administered to the individual is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 75 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 100 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 125 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 175 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 225 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 260 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 325 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 350 mg/m². In some embodiments, *nab*-paclitaxel

is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is nivolumab. In some embodiments, about 0.01 to about 10 mg/kg of nivolumab is administered intravenously to the individual. In some embodiments, about 3 mg/kg of nivolumab is administered intravenously to the individual. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some

embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is AMP-514. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In

some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pembrolizumab. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is

administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pidilizumab. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a

cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In

some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some

embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the lung cancer is NSCLC.

[0057] In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an antagonist of a PD-1 pathway in a cell. In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-1 antagonist. In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-

A317, or pidilizumab (CT-011)). In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is an effective amount described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 75 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 100 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about

125 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 175 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 225 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 260 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 325 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 350 mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is nivolumab. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*,

ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is AMP-514. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments,

between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pembrolizumab. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some

embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on

days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pidilizumab. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the

REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-

paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered.

In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the method further comprises administering to the individual an effective amount of a nucleoside analog. In some embodiments, the nucleoside analog is gemcitabine. In some embodiments, between about 500 to 1500 mg of gemcitabine is administered. In some embodiments, between about 500 to 1200 mg of gemcitabine is administered. In some embodiments, between about 600 to 1200 mg of gemcitabine is administered. In some embodiments, at least about 600 mg of gemcitabine is administered. In some embodiments, at least about 800 mg of gemcitabine is administered. In some embodiments, at least about 1000 mg of gemcitabine is administered. In some embodiments, at least about 1200 mg of gemcitabine is administered. In some embodiments, the gemcitabine is administered at least once during a cycle. In some embodiments, the gemcitabine is administered at least twice during a cycle. In some embodiments, the gemcitabine is administered at least three times during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days.

In some embodiments, the gemcitabine is administered at least once a week. In some embodiments, the gemcitabine is administered at least once every two weeks. In some embodiments, the gemcitabine is administered at least once every three weeks. In some embodiments, the gemcitabine is administered at least once every four weeks. In some embodiments, the gemcitabine is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the gemcitabine is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered intravenously. In some embodiments, the ABRAXANE® is administered intravenously. In some embodiments, the PD-1 pathway inhibitor is administered intravenously. In some embodiments, the antagonist of PD-1 is administered intravenously. In some embodiments, the anti-PD-1 antibody is administered intravenously. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, and the anti-PD-1 antibody are administered intravenously. In some embodiments, the ABRAXANE® and the anti-PD-1 antibody are administered intravenously. In some embodiments, the nucleoside analog is administered intravenously. In some embodiments the gemcitabine is administered intravenously. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, the anti-PD-1 antibody and the gemcitabine are administered intravenously.

[0058] In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising: a) intravenously administering about 50 to about 350 mg/m² (such as about 75 mg/m², 100 mg/m², 125 mg/m², 150 mg/m², 200 mg/m², 225 mg/m², 250 mg/m²) of ABRAXANE® to the individual weekly, and b) intravenously administering about 0.01 to about 10 mg/kg (such as about 3 mg/kg) of an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011)) to the individual twice out of every twenty eight days. In some embodiments, the method further comprises intravenously administering to the individual an effective amount of gemcitabine at the dose of 1000 mg/m² weekly. In some embodiments, the ABRAXANE® and the gemcitabine is administered on days 1, 8, and 15 of every 28 days and an anti-PD-1 antibody (such as nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011)) is administered on days 1 and 15 of every 28 days. In some embodiments, ABRAXANE® is administered to the

individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is an effective amount described in Section V-C, *infra*. In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 50 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 75 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 100 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 125 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 150 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 175 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 200 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 225 mg/m². In some embodiments, the amount of

ABRAXANE® administered to the individual is about 250 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 260 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 275 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 300 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 325 mg/m². In some embodiments, the amount of ABRAXANE® administered to the individual is about 350 mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is nivolumab. In some embodiments, about 0.01 to about 10 mg/kg of nivolumab is administered intravenously to the individual. In some embodiments, about 3 mg/kg of nivolumab is administered intravenously to the individual. In some embodiments, the nivolumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual

as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is AMP-514. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of

AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pembrolizumab. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg

to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is pidilizumab. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of

pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is

administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least

once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the method further comprises administering to the individual an

effective amount of a nucleoside analog. In some embodiments, the nucleoside analog is gemcitabine. In some embodiments, between about 500 to 1500 mg of gemcitabine is administered. In some embodiments, between about 500 to 1200 mg of gemcitabine is administered. In some embodiments, between about 600 to 1200 mg of gemcitabine is administered. In some embodiments, at least about 600 mg of gemcitabine is administered. In some embodiments, at least about 800 mg of gemcitabine is administered. In some embodiments, at least about 1000 mg of gemcitabine is administered. In some embodiments, at least about 1200 mg of gemcitabine is administered. In some embodiments, the gemcitabine is administered at least once during a cycle. In some embodiments, the gemcitabine is administered at least twice during a cycle. In some embodiments, the gemcitabine is administered at least three times during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the gemcitabine is administered at least once a week. In some embodiments, the gemcitabine is administered at least once every two weeks. In some embodiments, the gemcitabine is administered at least once every three weeks. In some embodiments, the gemcitabine is administered at least once every four weeks. In some embodiments, the gemcitabine is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the gemcitabine is administered on day 1 of a 21 day cycle.

[0059] In some embodiments, there is provided a method of treating breast cancer in an individual comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-L1 antagonist. In some embodiments, there is provided a method of treating breast cancer comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-L1 antibody (such as BMS-936559, MEDI4736, MSB0010718C and MPDL3280A). In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is an effective

amount described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 75 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 100 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 125 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 175 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 225 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 260 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 325 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 350 mg/m². In some

embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, ABRAXANE® is administered via intravenous administration. In some embodiments, ABRAXANE® is administered via intra-arterial administration. In some embodiments, ABRAXANE® is administered via intraperitoneal administration. In some embodiments, ABRAXANE® is administered via intrapulmonary administration. In some embodiments, ABRAXANE® is administered via oral administration. In some embodiments, ABRAXANE® is administered via inhalation. In some embodiments, ABRAXANE® is administered via intravesicular administration. In some embodiments, ABRAXANE® is administered via intramuscular administration. In some embodiments, ABRAXANE® is administered via intra-tracheal administration. In some embodiments, ABRAXANE® is administered via subcutaneous administration. In some embodiments, ABRAXANE® is administered via intraocular administration. In some embodiments, ABRAXANE® is administered via intrathecal administration. In some embodiments, ABRAXANE® is administered via transmucosal administration. In some embodiments, ABRAXANE® is administered via transdermal administration. In some embodiments, the effective amount of ABRAXANE® is administered as a sustained continuous release formulation. In some embodiments,

ABRAXANE® is administered via an inhaler or other air borne delivery system. In some embodiments, the anti-PD-L1 antibody is BMS-936559. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-L1 antibody is MEDI4736. In some

embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some

embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-L1 antibody is MPDL3280A. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle.

In some embodiments, the anti-PD-L1 antibody is MSB0010718C. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the breast cancer is a Her2 negative breast cancer. In some embodiments, the breast cancer is triple negative breast cancer. In some embodiments, the breast cancer is a metastatic breast cancer.

[0060] In some embodiments, there is provided a method of treating lung cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-L1 antagonist. In some embodiments, there is provided a method of treating lung cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-L1 antibody (such as BMS-936559, MEDI4736, MSB0010718C and MPDL3280A). In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is an effective amount described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 75 mg/m². In some

embodiments, the effective amount of ABRAXANE® is about 100 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 125 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 175 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 225 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 260 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 325 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 350 mg/m². In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, ABRAXANE® is administered via intravenous administration. In some embodiments, ABRAXANE® is administered via intra-arterial administration. In some embodiments, ABRAXANE® is administered via intraperitoneal administration. In some embodiments, ABRAXANE® is administered via

intrapulmonary administration. In some embodiments, ABRAXANE® is administered via oral administration. In some embodiments, ABRAXANE® is administered via inhalation. In some embodiments, ABRAXANE® is administered via intravesicular administration. In some embodiments, ABRAXANE® is administered via intramuscular administration. In some embodiments, ABRAXANE® is administered via intra-tracheal administration. In some embodiments, ABRAXANE® is administered via subcutaneous administration. In some embodiments, ABRAXANE® is administered via intraocular administration. In some embodiments, ABRAXANE® is administered via intrathecal administration. In some embodiments, ABRAXANE® is administered via transmucosal administration. In some embodiments, ABRAXANE® is administered via transdermal administration. In some embodiments, the effective amount of ABRAXANE® is administered as a sustained continuous release formulation. In some embodiments, ABRAXANE® is administered via an inhaler or other air borne delivery system. In some embodiments, the anti-PD-L1 antibody is administered via intravenous administration. In some embodiments, the anti-PD-L1 antibody is administered via intra-arterial administration. In some embodiments, the anti-PD-L1 antibody is administered via intraperitoneal administration. In some embodiments, the anti-PD-L1 antibody is administered via intrapulmonary administration. In some embodiments, the anti-PD-L1 antibody is administered via oral administration. In some embodiments, the anti-PD-L1 antibody is administered via inhalation. In some embodiments, the anti-PD-L1 antibody is administered via intravesicular administration. In some embodiments, the anti-PD-L1 antibody is administered via intramuscular administration. In some embodiments, the anti-PD-L1 antibody is administered via intra-tracheal administration. In some embodiments, the anti-PD-L1 antibody is administered via subcutaneous administration. In some embodiments, the anti-PD-L1 antibody is administered via intraocular administration. In some embodiments, the anti-PD-L1 antibody is administered via intrathecal administration. In some embodiments, the anti-PD-L1 antibody is administered via transmucosal administration. In some embodiments, the anti-PD-L1 antibody is administered via transdermal administration. In some embodiments, the anti-PD-L1 antibody is administered as a sustained continuous release formulation. In some embodiments, the anti-PD-L1 antibody is administered via an inhaler or other air borne

delivery system. In some embodiments, the anti-PD-L1 antibody is BMS-936559. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-L1 antibody is MEDI4736. In some

embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some

embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-L1 antibody is MPDL3280A. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.* ABRAXANE® is administered as described hereinabove. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle.

In some embodiments, the anti-PD-L1 antibody is MSB0010718C. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.* ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the method further comprises administering to the individual an effective amount of a platinum-based agent. In some embodiments, the platinum-based agent is

carboplatin. In some embodiments, the platinum-based agent is cisplatin. In some embodiments, the lung cancer is NSCLC.

[0061] In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-L1 antagonist. In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-L1 antibody (such as BMS-936559, MEDI4736, MSB0010718C and MPDL3280A). In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is an effective amount described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 200 mg/m² to about 350 mg/m².

In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 75 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 100 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 125 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 175 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 225 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 260 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 325 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 350 mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, ABRAXANE® is administered via intravenous administration. In some embodiments, ABRAXANE® is administered via intra-arterial

administration. In some embodiments, ABRAXANE® is administered via intraperitoneal administration. In some embodiments, ABRAXANE® is administered via intrapulmonary administration. In some embodiments, ABRAXANE® is administered via oral administration. In some embodiments, ABRAXANE® is administered via inhalation. In some embodiments, ABRAXANE® is administered via intravesicular administration. In some embodiments, ABRAXANE® is administered via intramuscular administration. In some embodiments, ABRAXANE® is administered via intra-tracheal administration. In some embodiments, ABRAXANE® is administered via subcutaneous administration. In some embodiments, ABRAXANE® is administered via intraocular administration. In some embodiments, ABRAXANE® is administered via intrathecal administration. In some embodiments, ABRAXANE® is administered via transmucosal administration. In some embodiments, ABRAXANE® is administered via transdermal administration. In some embodiments, the effective amount of ABRAXANE® is administered as a sustained continuous release formulation. In some embodiments, ABRAXANE® is administered via an inhaler or other air borne delivery system. In some embodiments, the anti-PD-L1 antibody is administered via intravenous administration. In some embodiments, the anti-PD-L1 antibody is administered via intra-arterial administration. In some embodiments, the anti-PD-L1 antibody is administered via intraperitoneal administration. In some embodiments, the anti-PD-L1 antibody is administered via intrapulmonary administration. In some embodiments, the anti-PD-L1 antibody is administered via oral administration. In some embodiments, the anti-PD-L1 antibody is administered via inhalation. In some embodiments, the anti-PD-L1 antibody is administered via intravesicular administration. In some embodiments, the anti-PD-L1 antibody is administered via intramuscular administration. In some embodiments, the anti-PD-L1 antibody is administered via intra-tracheal administration. In some embodiments, the anti-PD-L1 antibody is administered via subcutaneous administration. In some embodiments, the anti-PD-L1 antibody is administered via intraocular administration. In some embodiments, the anti-PD-L1 antibody is administered via intrathecal administration. In some embodiments, the anti-PD-L1 antibody is administered via transmucosal administration. In some embodiments, the anti-PD-L1 antibody is administered via transdermal administration. In some embodiments, the anti-

PD-L1 antibody is administered as a sustained continuous release formulation. In some embodiments, the anti-PD-L1 antibody is administered via an inhaler or other air borne delivery system. In some embodiments, the anti-PD-L1 antibody is BMS-936559. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day

cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-L1 antibody is MEDI4736. In some embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28

days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-L1 antibody is MPDL3280A. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In

some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-L1 antibody is MSB0010718C. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C and *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the *nab*-paclitaxel, *e.g.*, ABRAXANE®, is administered as described hereinabove. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the method further comprises administering to the individual an effective

amount of a nucleoside analog. In some embodiments, the nucleoside analog is gemcitabine. In some embodiments, between about 500 to 1500 mg of gemcitabine is administered. In some embodiments, between about 500 to 1200 mg of gemcitabine is administered. In some embodiments, between about 600 to 1200 mg of gemcitabine is administered. In some embodiments, at least about 600 mg of gemcitabine is administered. In some embodiments, at least about 800 mg of gemcitabine is administered. In some embodiments, at least about 1000 mg of gemcitabine is administered. In some embodiments, at least about 1200 mg of gemcitabine is administered. In some embodiments, the gemcitabine is administered at least once during a cycle. In some embodiments, the gemcitabine is administered at least twice during a cycle. In some embodiments, the gemcitabine is administered at least three times during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the gemcitabine is administered at least once a week. In some embodiments, the gemcitabine is administered at least once every two weeks. In some embodiments, the gemcitabine is administered at least once every three weeks. In some embodiments, the gemcitabine is administered at least once every four weeks. In some embodiments, the gemcitabine is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the gemcitabine is administered on day 1 of a 21 day cycle.

[0062] In some embodiments, there is provided a method of treating breast cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-L2 antagonist. In some embodiments, there is provided a method of treating breast cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-L2 antibody (for example, rHIgM12B7). In some embodiments, the anti-PDL2 antibody is rHIgM12B7. In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is an

effective amount described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 75 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 100 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 125 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 175 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 225 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 260 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 325 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 350

mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, ABRAXANE® is administered via intravenous administration. In some embodiments, ABRAXANE® is administered via intra-arterial administration. In some embodiments, ABRAXANE® is administered via intraperitoneal administration. In some embodiments, ABRAXANE® is administered via intrapulmonary administration. In some embodiments, ABRAXANE® is administered via oral administration. In some embodiments, ABRAXANE® is administered via inhalation. In some embodiments, ABRAXANE® is administered via intravesicular administration. In some embodiments, ABRAXANE® is administered via intramuscular administration. In some embodiments, ABRAXANE® is administered via intra-tracheal administration. In some embodiments, ABRAXANE® is administered via subcutaneous administration. In some embodiments, ABRAXANE® is administered via intraocular administration. In some embodiments, ABRAXANE® is administered via intrathecal administration. In some embodiments, ABRAXANE® is administered via transmucosal administration. In some embodiments, ABRAXANE® is administered via transdermal administration. In some embodiments, the effective amount of ABRAXANE® is administered as a sustained continuous release formulation. In some embodiments,

ABRAXANE® is administered via an inhaler or other air borne delivery system. In some embodiments, the breast cancer is a Her2 negative breast cancer. In some embodiments, the breast cancer is a triple negative breast cancer. In some embodiments, the breast cancer is a metastatic breast cancer.

[0063] In some embodiments, there is provided a method of treating lung cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-L2 antagonist. In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-L2 antibody, such as rHIgM12B7. In some embodiments, the anti-PD-L2 antibody is rHIgM12B7. In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is an effective amount described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective

amount of ABRAXANE® is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 75 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 100 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 125 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 175 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 225 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 260 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 325 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 350 mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and

15 of a 21 day cycle. In some embodiments, ABRAXANE® is administered via intravenous administration. In some embodiments, ABRAXANE® is administered via intra-arterial administration. In some embodiments, ABRAXANE® is administered via intraperitoneal administration. In some embodiments, ABRAXANE® is administered via intrapulmonary administration. In some embodiments, ABRAXANE® is administered via oral administration. In some embodiments, ABRAXANE® is administered via inhalation. In some embodiments, ABRAXANE® is administered via intravesicular administration. In some embodiments, ABRAXANE® is administered via intramuscular administration. In some embodiments, ABRAXANE® is administered via intra-tracheal administration. In some embodiments, ABRAXANE® is administered via subcutaneous administration. In some embodiments, ABRAXANE® is administered via intraocular administration. In some embodiments, ABRAXANE® is administered via intrathecal administration. In some embodiments, ABRAXANE® is administered via transmucosal administration. In some embodiments, ABRAXANE® is administered via transdermal administration. In some embodiments, the effective amount of ABRAXANE® is administered as a sustained continuous release formulation. In some embodiments, ABRAXANE® is administered via an inhaler or other air borne delivery system. In some embodiments, the method further comprises administering to the individual an effective amount of a platinum-based agent. In some embodiments, the platinum-based agent is carboplatin. In some embodiments, the platinum-based agent is cisplatin. In some embodiments, the lung cancer is NSCLC.

[0064] In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of a PD-L2 antagonist. In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to said individual a) an effective amount of ABRAXANE®, and b) an effective amount of an anti-PD-L2 antibody, such as rHIgM12B7. In some embodiments, the anti-PD-L2 antibody is rHIgM12B7. In some embodiments, ABRAXANE® is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, ABRAXANE® is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments,

ABRAXANE® is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is an effective amount described in Section V-C, *infra*. In some embodiments, the effective amount of ABRAXANE® is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 50 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 75 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 100 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 125 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 150 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 175 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 200 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 225 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 250 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 260 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 275 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 300

mg/m². In some embodiments, the effective amount of ABRAXANE® is about 325 mg/m². In some embodiments, the effective amount of ABRAXANE® is about 350 mg/m². In some embodiments, *nab*-paclitaxel is administered as described herein for ABRAXANE®. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least twice during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least three times during a cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once a week. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every two weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every three weeks. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on day 1 of a 21 day cycle. In some embodiments, the *nab*-paclitaxel (*e.g.*, ABRAXANE®) is administered on days 1, 8 and 15 of a 21 day cycle. In some embodiments, ABRAXANE® is administered via intravenous administration. In some embodiments, ABRAXANE® is administered via intra-arterial administration. In some embodiments, ABRAXANE® is administered via intraperitoneal administration. In some embodiments, ABRAXANE® is administered via intrapulmonary administration. In some embodiments, ABRAXANE® is administered via oral administration. In some embodiments, ABRAXANE® is administered via inhalation. In some embodiments, ABRAXANE® is administered via intravesicular administration. In some embodiments, ABRAXANE® is administered via intramuscular administration. In some embodiments, ABRAXANE® is administered via intra-tracheal administration. In some embodiments, ABRAXANE® is administered via subcutaneous administration. In some embodiments, ABRAXANE® is administered via intraocular administration. In some embodiments, ABRAXANE® is administered via intrathecal administration. In some embodiments, ABRAXANE® is administered via transmucosal administration. In some embodiments, ABRAXANE® is administered via transdermal

administration. In some embodiments, the effective amount of ABRAXANE® is administered as a sustained continuous release formulation. In some embodiments, ABRAXANE® is administered via an inhaler or other air borne delivery system. In some embodiments, the method further comprises administering to the individual an effective amount of a nucleoside analog. In some embodiments, the nucleoside analog is gemcitabine. In some embodiments, between about 500 to 1500 mg of gemcitabine is administered. In some embodiments, between about 500 to 1200 mg of gemcitabine is administered. In some embodiments, between about 600 to 1200 mg of gemcitabine is administered. In some embodiments, at least about 600 mg of gemcitabine is administered. In some embodiments, at least about 800 mg of gemcitabine is administered. In some embodiments, at least about 1000 mg of gemcitabine is administered. In some embodiments, at least about 1200 mg of gemcitabine is administered. In some embodiments, the gemcitabine is administered at least once during a cycle. In some embodiments, the gemcitabine is administered at least twice during a cycle. In some embodiments, the gemcitabine is administered at least three times during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the gemcitabine is administered at least once a week. In some embodiments, the gemcitabine is administered at least once every two weeks. In some embodiments, the gemcitabine is administered at least once every three weeks. In some embodiments, the gemcitabine is administered at least once every four weeks. In some embodiments, the gemcitabine is administered on days 1, 8 and 15 of a 28 day cycle. In some embodiments, the gemcitabine is administered on day 1 of a 21 day cycle.

[0065] Also provided are kits and compositions useful for the methods described herein.

IV. BRIEF DESCRIPTION OF FIGURES

[0066] Figure 1 shows the study design for the treatment with *nab*-paclitaxel and nivolumab in patients with Her2 negative recurrent metastatic breast cancer after one prior regimen for metastatic disease, including an anthracycline unless clinically contraindicated (mBC Arms E and F, Parts 1 and 2).

[0067] Figure 2 shows the study design for the treatment with *nab*-paclitaxel and nivolumab with or without gemcitabine in patients with adenocarcinoma of the pancreas with 1 prior systemic chemotherapy (Panc Arm a dose-limiting toxicity assessment, Part 1 only); or no prior chemotherapy, surgery or radiation therapy for locally advanced or metastatic disease (Panc Arm A, Part 2 and Panc Arm B).

[0068] Figure 3 shows the study design for the treatment with *nab*-paclitaxel, nivolumab, and carboplatin in patients with Stage IIIB or IV NSCLC with no prior chemotherapy for metastatic disease and in subjects who are not candidates for curative surgery or radiation (NSCLC Arms C and D, Parts 1 and 2).

V. DETAILED DESCRIPTION

[0069] In one aspect, provided herein are methods of combination therapy comprising a first agent comprising administration of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin) in conjunction with a second agent that antagonizes a PD-1 pathway in a cell (also referred to as an “PD-1 pathway antagonist,” or “PD-1 pathway inhibitor”). In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the nanoparticle composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300

mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of

taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition is administered via intravenous administration. In some embodiments, the composition is administered via intra-arterial administration. In some embodiments, the composition is administered via intraperitoneal administration. In some embodiments, the composition is administered via intrapulmonary administration. In some embodiments, the composition is administered via oral administration. In some embodiments, the composition is administered via inhalation. In some embodiments, the composition is administered via intravesicular administration. In some embodiments, the composition is administered via intramuscular administration. In some embodiments, the composition is administered via intra-tracheal administration. In some embodiments, the composition is administered via subcutaneous administration. In some embodiments, the composition is administered via intraocular administration. In some embodiments, the composition is administered via intrathecal administration. In some embodiments, the composition is administered via transmucosal administration. In some embodiments, the composition is administered via transdermal administration. In some embodiments, the composition is administered as a sustained continuous release formulation. In some embodiments, the composition is administered via an inhaler or other air borne delivery system. In some embodiments, the second agent is referred to as “the other agent.” In some embodiments, the other agent is an agent described in Section V-C, *infra*. In some embodiments, the second agent is nivolumab. In some embodiments, the nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some

embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some

embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10

mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is

administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a

cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is AMP-514. In some embodiments, the second agent is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is

administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg

to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is

administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments,

about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice

during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the second agent is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-

224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the second agent is administered via inhalation. In some embodiments, the second agent is administered via intravesicular administration. In some embodiments, the second agent is administered via intramuscular administration. In some embodiments, the second agent is administered via intra-tracheal administration. In some embodiments, the second agent is administered via subcutaneous administration. In some embodiments, the second agent is administered via intraocular administration. In some embodiments, the second agent is administered via intrathecal administration. In some embodiments, the second agent is administered via transmucosal administration. In some embodiments, the second agent is administered via transdermal administration. In some embodiments, the second agent is administered as a sustained continuous release formulation. In some embodiments, the second agent is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the other agent is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the other agent is administered in a dose or dose range described in Section V-C, *infra*. In some embodiments, the nanoparticle comprises the first agent and the second agent. In some embodiments, the second agent is administered in a nanoparticle. In some embodiments, the second agent is administered in the same nanoparticle as the first agent. In some embodiments, the second agent is administered in a different nanoparticle from the nanoparticle of the first agent.

[0070] The present application thus provides methods of combination therapy. It is to be understood by a person of ordinary skill in the art that the combination therapy methods described herein requires that one agent or composition be administered in conjunction with another agent. "In conjunction with" refers to administration of one treatment modality in addition to another treatment modality, such as administration of a nanoparticle composition described herein in addition to administration of the other agent to the same individual. As such, "in conjunction with" refers to administration of one

treatment modality before, during or after delivery of the other treatment modality to the individual.

[0071] The methods described herein are generally useful for treatment of proliferative diseases. As used herein, “treatment” is an approach for obtaining beneficial or desired clinical results, and beneficial or desired clinical results can include, but are not limited to, any one or more of: alleviation of one or more symptoms, diminishment of extent of disease, preventing or delaying spread (*e.g.*, metastasis, for example metastasis to the lung or to the lymph node) of disease, preventing or delaying recurrence of disease, delay or slowing of disease progression, amelioration of the disease state, and remission (whether partial or total). Also encompassed by “treatment” is a reduction of pathological consequence of a proliferative disease. The methods provided herein contemplate any one or more of these aspects of treatment.

[0072] An “agent that antagonizes a programmed death-1 or programmed cell death-1 pathway,” “agent that antagonizes a programmed death-1 or programmed cell death-1/PCD-1 pathway,” “agent that antagonizes a PD-1 pathway,” “PD-1 pathway antagonist,” or “PD-1 pathway inhibitor” refers to an agent that antagonizes the activity of a component of the PD-1 pathway or interferes with the interaction of the components of the PD-1 pathway. For example, in some embodiments, the PD-1 pathway antagonist antagonizes the activity of PD-1 or a ligand of PD-1 (such as PD-L1, or PD-L2). In some embodiments, the PD-1 pathway antagonist disrupts or interferes with the interaction of the components of the PD-1 pathway. For example, in some embodiments, the PD-1 pathway antagonist interferes with the interaction between PD-1 and a ligand of PD-1. In some embodiments, the PD-1 pathway antagonist interferes with the interaction between PD-1 and PD-L1. In some embodiments, the PD-1 pathway antagonist interferes with the interaction between PD-1 and PD-L2. In some embodiments, a PD-1 pathway antagonist comprises a protein, antibody, small molecule, fusion protein, or a combination thereof.

[0073] An “agent that antagonizes PD-1,” “PD-1 antagonist,” or “PD-1 inhibitor” refers to an agent that antagonizes the activity of PD-1 or interferes with the interaction between PD-1 and a ligand of PD-1. For example, in some embodiments, the PD-1 antagonist antagonizes the activity of PD-1. In some embodiments, the PD-1 antagonist disrupts or interferes with the interaction between PD-1 and a ligand of PD-1. In some

embodiments, the PD-1 antagonist interferes with the interaction between PD-1 and PD-L1. In some embodiments, the PD-1 antagonist interferes with the interaction between PD-1 and PD-L2. In some embodiments, a PD-1 antagonist comprises a protein, antibody, small molecule, fusion protein, or a combination thereof.

[0074] An “agent that antagonizes PD-L1,” “PD-L1 antagonist,” or “PD-L1 inhibitor” refers to an agent that antagonizes the activity of PD-L1 or interferes with the interaction between PD-L1 and another component of the PD-1 pathway. For example, in some embodiments, the PD-L1 antagonist antagonizes the activity of PD-L1. In some embodiments, the PD-1 antagonist disrupts or interferes with the interaction between PD-L1 and another component of the PD-1 pathway. In some embodiments, the PD-L1 antagonist interferes with the interaction between PD-L1 and PD-1. In some embodiments, a PD-L1 antagonist comprises a protein, antibody, small molecule, fusion protein, or a combination thereof.

[0075] An “agent that antagonizes PD-L2,” “PD-L2 antagonist,” or “PD-L2 inhibitor” refers to an agent that antagonizes the activity of PD-L2 or interferes with the interaction between PD-L2 and another component of the PD-1 pathway. For example, in some embodiments, the PD-L2 antagonist antagonizes the activity of PD-L2. In some embodiments, the PD-1 antagonist disrupts or interferes with the interaction between PD-L2 and another component of the PD-1 pathway. In some embodiments, the PD-L2 antagonist interferes with the interaction between PD-L2 and PD-1. In some embodiments, a PD-L2 antagonist comprises a protein, antibody, small molecule, fusion protein, or a combination thereof.

[0076] Individuals having “Her2 negative breast cancer” used herein refer to individuals who are clinically negative for expression of HER2 protein.

[0077] The term “effective amount” used herein refers to an amount of a compound or composition sufficient to treat a specified disorder, condition or disease such as ameliorate, palliate, lessen, and/or delay one or more of its symptoms. In reference to cancers or other unwanted cell proliferation, an effective amount comprises an amount sufficient to cause a tumor to shrink and/or to decrease the growth rate of the tumor (such as to suppress tumor growth) or to prevent or delay other unwanted cell proliferation.

[0078] The term “individual” is a mammal, including humans. An individual includes, but is not limited to, human, bovine, horse, feline, canine, rodent, or primate. In some embodiments, the individual is human.

[0079] The methods may be practiced in an adjuvant setting. “Adjuvant setting” refers to a clinical setting in which an individual has had a history of a proliferative disease, particularly cancer, and generally (but not necessarily) been responsive to therapy, which includes, but is not limited to, surgery (such as surgical resection), radiotherapy, and chemotherapy. However, because of their history of the proliferative disease (such as cancer), these individuals are considered at risk of development of the disease. Treatment or administration in the “adjuvant setting” refers to a subsequent mode of treatment. The degree of risk (*i.e.*, when an individual in the adjuvant setting is considered as “high risk” or “low risk”) depends upon several factors, most usually the extent of disease when first treated.

[0080] The methods provided herein may also be practiced in a “neoadjuvant setting,” *i.e.*, the method may be carried out before the primary/definitive therapy. In some embodiments, the individual has previously been treated. In some embodiments, the individual has not previously been treated. In some embodiments, the treatment is a first line therapy.

[0081] It is understood that aspect and embodiments described herein include “consisting” and/or “consisting essentially of” aspects and embodiments.

[0082] Reference to “about” a value or parameter herein includes (and describes) variations that are directed to that value or parameter per se. For example, description referring to “about X” includes description of “X”.

[0083] As used herein and in the appended claims, the singular forms “a,” “or,” and “the” include plural referents unless the context clearly dictates otherwise. It is understood that aspects and variations described herein include “consisting” and/or “consisting essentially of” aspects and variations.

Section V-A. Methods of combination therapy

[0084] In one aspect, provided herein are methods of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an

effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin); and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the nanoparticle composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some

embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 75

mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m².

In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². In some embodiments, the composition is administered via intravenous administration. In some embodiments, the composition is administered via intra-arterial administration. In some embodiments, the composition is administered via intraperitoneal administration. In some embodiments, the composition is administered via intrapulmonary administration. In some embodiments, the composition is administered via oral administration. In some embodiments, the composition is administered via inhalation. In some embodiments, the composition is administered via intravesicular administration. In some embodiments, the composition is administered via intramuscular administration. In some embodiments, the composition is administered via intra-tracheal administration. In some embodiments, the composition is administered via subcutaneous administration. In some embodiments, the composition is administered via intraocular administration. In some embodiments, the composition is administered via intrathecal administration. In some embodiments, the composition is administered via transmucosal administration. In some embodiments, the composition is administered via transdermal administration. In some embodiments, the composition is administered as a sustained continuous release formulation. In some embodiments, the composition is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the other agent is administered via intravenous administration. In some embodiments, the other agent is administered via intra-arterial administration. In some embodiments, the other agent is administered via intraperitoneal administration. In some embodiments, the other agent is administered via intrapulmonary administration. In some embodiments, the other agent is administered via oral administration. In some embodiments, the other agent is administered via inhalation. In some embodiments, the other agent is administered via intravesicular administration. In some embodiments, the other agent is administered via intramuscular administration. In some embodiments, the other agent is administered via intra-tracheal administration. In some embodiments, the other agent is administered via subcutaneous administration. In some embodiments, the other agent is administered via intraocular administration. In some embodiments, the other agent is administered via intrathecal administration. In some embodiments, the

other agent is administered via transmucosal administration. In some embodiments, the other agent is administered via transdermal administration. In some embodiments, the other agent is administered as a sustained continuous release formulation. In some embodiments, the other agent is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the other agent is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the other agent is administered at a dose or dose range described in Section V-C, *infra*. In some embodiments, the other agent that antagonizes a PD-1 pathway is an antagonist of a component of the PD-1 pathway. In some embodiments, the other agent antagonizes PD-1, a ligand of PD-1 (such as PD-L1 or PD-L2), or a combination thereof. In some embodiments, the other agent is selected from the group consisting of AMP-224, nivolumab, AMP-514, pembrolizumab, pidilizumab, REGN2810, PDR001, BGB-A317, BMS-936559, MEDI4736, MSB0010718C, MPDL3280A and rHIgM12B7. In some embodiments, the other agent is nivolumab. In some embodiments, the nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some

embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some

embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is

administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some

embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of

administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is AMP-514. In some embodiments, the other agent is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-

514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some

embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least

about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is

administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21

day cycle. In some embodiments, the other agent is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[0085] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin); and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell, wherein the nanoparticle

composition and the other agent are administered concurrently. In some embodiments, the administration of the nanoparticle composition and the other agent are initiated at about the same time (for example, within any one of 1, 2, 3, 4, 5, 6, or 7 days). In some embodiments, the administrations of the nanoparticle composition and the other agent are terminated at about the same time (for example, within any one of 1, 2, 3, 4, 5, 6, or 7 days). In some embodiments, the administration of the other agent continues (for example for about any one of 0.5, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, or 12 months) after the termination of the administration of the nanoparticle composition. In some embodiments, the administration of the other agent is initiated after (for example after about any one of 0.5, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, or 12 months) the initiation of the administration of the nanoparticle composition. In some embodiments, the administrations of the nanoparticle composition and the other agent are initiated and terminated at about the same time. In some embodiments, the administrations of the nanoparticle composition and the other agent are initiated at about the same time and the administration of the other agent continues (for example for about any one of 0.5, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, or 12 months) after the termination of the administration of the nanoparticle composition. In some embodiments, the administration of the nanoparticle composition and the other agent stop at about the same time and the administration of the other agent is initiated after (for example after about any one of 0.5, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, or 12 months) the initiation of the administration of the nanoparticle composition. In some embodiments, the administration of the nanoparticle composition and the other agent stop at about the same time and the administration of the nanoparticle composition is initiated after (for example after about any one of 0.5, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, or 12 months) the initiation of the administration of the other agent. In some embodiments, the proliferative disease is a cancer described in Section V-B, *infra*. In some embodiments, the cancer is breast cancer. In some embodiments, the breast cancer is a breast cancer described in Section V-B, *infra*. In some embodiments, the breast cancer is HER2 negative. In some embodiments, the breast cancer is ER negative. In some embodiments, the breast cancer is PR negative. In some embodiments, the breast cancer is HER2 negative and ER negative. In some embodiments, the breast cancer is HER2 negative and PR negative. In some embodiments, the breast cancer is ER negative and PR negative. In

some embodiments, the breast cancer is HER2 negative, ER negative and PR negative. In some embodiments, the breast cancer is Her2 negative breast cancer, metastatic breast cancer, recurrent breast cancer, or a combination thereof. In some embodiments, the cancer is lung cancer. In some embodiments, the lung cancer is a lung cancer described in Section V-B, *infra*. In some embodiments, the lung cancer is NSCLC. In some embodiments, the cancer is pancreatic cancer. In some embodiments, the pancreatic cancer is a pancreatic cancer described in Section V-B, *infra*. In some embodiments, the pancreatic cancer is advanced metastatic pancreatic cancer. In some embodiments, the pancreatic cancer is locally advanced, surgically resected or unresected pancreatic cancer or metastatic pancreatic adenocarcinoma. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the nanoparticle composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to

about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of

nab-paclitaxel (e.g., ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel

(*e.g.*, ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². In some embodiments, the composition is administered via intravenous administration. In some embodiments, the composition is administered via intra-arterial administration. In some embodiments, the composition is administered via intraperitoneal administration. In some embodiments, the composition is administered via intrapulmonary administration. In some embodiments, the composition is administered via oral administration. In some embodiments, the composition is administered via inhalation. In some embodiments, the composition is administered via intravesicular administration. In some embodiments, the composition is administered via intramuscular administration. In some embodiments, the composition is administered via intra-tracheal administration. In some embodiments, the composition is administered via subcutaneous administration. In some embodiments, the composition is administered via intraocular administration. In some embodiments, the composition is administered via intrathecal administration. In some embodiments, the composition is administered via transmucosal administration. In some embodiments, the composition is administered via transdermal administration. In some embodiments, the composition is administered as a sustained continuous release formulation. In some embodiments, the composition is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the other agent is administered via intravenous administration. In some embodiments, the other agent is administered via intra-arterial administration. In some embodiments, the other agent is administered via intraperitoneal administration. In some embodiments, the other agent is administered via intrapulmonary administration. In some embodiments, the other agent is administered via oral

administration. In some embodiments, the other agent is administered via inhalation. In some embodiments, the other agent is administered via intravesicular administration. In some embodiments, the other agent is administered via intramuscular administration. In some embodiments, the other agent is administered via intra-tracheal administration. In some embodiments, the other agent is administered via subcutaneous administration. In some embodiments, the other agent is administered via intraocular administration. In some embodiments, the other agent is administered via intrathecal administration. In some embodiments, the other agent is administered via transmucosal administration. In some embodiments, the other agent is administered via transdermal administration. In some embodiments, the other agent is administered as a sustained continuous release formulation. In some embodiments, the other agent is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the other agent is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the other agent is administered at a dose or dose range described in Section V-C, *infra*. In some embodiments, the other agent that antagonizes a PD-1 pathway is an antagonist of a component of the PD-1 pathway. In some embodiments, the other agent antagonizes PD-1, a ligand of PD-1 (such as PD-L1 or PD-L2), or a combination thereof. In some embodiments, the other agent is selected from the group consisting of AMP-224, nivolumab, AMP-514, pembrolizumab, pidilizumab, REGN2810, PDR001, BGB-A317, BMS-936559, MEDI4736, MSB0010718C, MPDL3280A and rHIgM12B7. In some embodiments, the other agent is nivolumab. In some embodiments, the nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is

administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of

pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between

about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is

administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of

a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is AMP-514. In some embodiments, the other agent is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In

some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between

about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during

a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about

7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle

is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-

224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[0086] In some embodiments, the taxane is any of (and in some embodiments consisting essentially of) paclitaxel, tesetaxel, docetaxel, and ortataxel. In some embodiments, the taxane is paclitaxel. In some embodiments, the taxane is docetaxel. In some embodiments, the nanoparticle composition comprises ABRAXANE[®]. In some embodiments, the nanoparticle composition is ABRAXANE[®].

[0087] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) coated with a carrier protein (such as albumin); and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell. In some embodiments, the nanoparticles have an average size of 20-400 nm, such as 40-200 nm. In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of ABRAXANE[®]; and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell. In some embodiments, the nanoparticle composition (such as ABRAXANE[®]) and the other agent are administered concurrently. In some embodiments, the proliferative disease is a cancer selected from the group consisting of breast cancer, lung cancer (such as small cell lung cancer and non-small cell lung cancer), and pancreatic cancer. In some embodiments, the proliferative disease is a cancer described in Section V-B, *infra*. In some embodiments, the cancer is breast cancer. In some embodiments, the breast cancer is a breast cancer described in Section V-B, *infra*. In some embodiments, the breast cancer is HER2 negative. In some embodiments, the breast cancer is ER negative. In some embodiments, the breast cancer is PR negative. In some embodiments, the breast cancer is HER2 negative and ER negative. In some embodiments, the breast cancer is HER2 negative and PR negative. In some embodiments, the breast cancer is ER negative and PR negative. In some embodiments, the breast cancer is HER2 negative, ER negative and PR negative. In some embodiments, the breast cancer is Her2 negative breast cancer, metastatic breast cancer, recurrent breast cancer, or a combination thereof. In some embodiments, the cancer is lung cancer. In

some embodiments, the lung cancer is a lung cancer described in Section V-B, *infra*. In some embodiments, the lung cancer is NSCLC. In some embodiments, the cancer is pancreatic cancer. In some embodiments, the pancreatic cancer is a pancreatic cancer described in Section V-B, *infra*. In some embodiments, the pancreatic cancer is advanced metastatic pancreatic cancer. In some embodiments, the pancreatic cancer is locally advanced, surgically resected or unresected pancreatic cancer or metastatic pancreatic adenocarcinoma. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the nanoparticle composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some

embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*,

ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel

(*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². In some embodiments, the composition is administered via intravenous administration. In some embodiments, the composition is administered via intra-arterial administration. In some embodiments, the composition is administered via intraperitoneal administration. In some embodiments, the composition is administered via intrapulmonary administration. In some embodiments, the composition is administered via oral administration. In some embodiments, the composition is administered via inhalation. In some embodiments, the composition is administered via intravesicular administration. In some embodiments, the composition is administered via intramuscular administration. In some embodiments, the composition is administered via intra-tracheal administration. In some embodiments, the composition is administered via subcutaneous administration. In some embodiments, the composition is administered via intraocular administration. In some embodiments, the composition is administered via intrathecal administration. In some embodiments, the composition is administered via transmucosal administration. In some embodiments, the composition is administered via transdermal administration. In some embodiments, the composition is administered as a sustained continuous release formulation. In some embodiments, the composition is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the other agent is administered via intravenous administration. In some embodiments, the other agent is administered via intra-arterial administration. In some embodiments, the other agent is administered via intraperitoneal administration. In some embodiments, the other agent is administered via intrapulmonary administration. In some embodiments, the other agent is administered via oral administration. In some embodiments, the other agent is administered via inhalation. In some embodiments, the other agent is administered via intravesicular administration. In some embodiments, the other agent is administered via intramuscular administration. In some embodiments, the other agent is administered via intra-tracheal administration. In some embodiments, the other agent is administered via subcutaneous administration. In some embodiments, the

other agent is administered via intraocular administration. In some embodiments, the other agent is administered via intrathecal administration. In some embodiments, the other agent is administered via transmucosal administration. In some embodiments, the other agent is administered via transdermal administration. In some embodiments, the other agent is administered as a sustained continuous release formulation. In some embodiments, the other agent is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the other agent is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the other agent is administered at a dose or dose range described in Section V-C, *infra*. In some embodiments, the other agent that antagonizes a PD-1 pathway is an antagonist of a component of the PD-1 pathway. In some embodiments, the other agent antagonizes PD-1, a ligand of PD-1 (such as PD-L1 or PD-L2), or a combination thereof. In some embodiments, the other agent is selected from the group consisting of AMP-224, nivolumab, AMP-514, pembrolizumab, pidilizumab, REGN2810, PDR001, BGB-A317, BMS-936559, MEDI4736, MSB0010718C, MPDL3280A and rHIgM12B7. In some embodiments, the other agent is nivolumab. In some embodiments, the nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a

cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some

embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of

pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In

some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to

the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is AMP-514. In some embodiments, the other agent is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered.

In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some

embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg

to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is

administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day

cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the other agent is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[0088] In some embodiments, the other agent that antagonizes a PD-1 pathway is an antibody. In some embodiments, the other agent that antagonizes a PD-1 pathway is a monoclonal antibody. In some embodiments, the other agent that antagonizes a PD-1

pathway is human antibody. In some embodiments, a human antibody is an antibody that is based on or derived from a human. In some embodiments, the other agent that antagonizes a PD-1 pathway is a fully human antibody. In some embodiments, a fully human antibody comprises an antibody consisting essentially of an antibody or antibody fragments that are derived from or based from a human antibody. In some embodiments, the other agent that antagonizes a PD-1 pathway is a humanized antibody. In some embodiments, a humanized antibody comprises an antibody comprising one or more human-derived antibody regions or fragments. In some embodiments, the other agent that antagonizes a PD-1 pathway is a chimeric antibody. In some embodiments, the chimeric antibody comprises antibody fragments that are derived from or based on two or more antibodies from two or more species. In some embodiments, the chimeric antibody comprises antibody fragments that are derived from or based on two or more antibodies from two or more subjects. In some embodiments, the two or more subjects are of the same species. In some embodiments, the two or more subjects are of different species. In some embodiments, the other agent comprises at least a portion of an antibody. In some embodiments, the other agent comprises at least a portion of an immunoglobulin G (IgG), immunoglobulin M (IgM), immunoglobulin E (IgE), immunoglobulin D (IgD), immunoglobulin A (IgA), or a combination thereof. In some embodiments, the other agent comprises at least a portion of an IgG. In some embodiments, the IgG is IgG4. In some embodiments, the antibody is an anti-PD-1 antibody. In some embodiments, the antibody binds to or targets a ligand of PD-1. In some embodiments, the antibody is an anti-PD-L1 antibody. In some embodiments, the antibody is an anti-PD-L2 antibody. In some embodiments, the antibody is from a mammal, avian, reptile, or amphibian. In some embodiments, the antibody is from a mammal. Examples of mammals include, but are not limited to, humans, apes, monkeys, dogs, cats, rabbits, goat, sheep, cows, pigs, mice, and rats. In some embodiments, the mammal is a human. In some embodiments, the mammal is a non-human primate.

[0089] In some embodiments, the other agent comprises a fusion protein. In some embodiments, the fusion protein comprises at least a portion of an antibody. In some embodiments, the fusion protein comprises at least a portion of a non-antibody protein. In some embodiments, the fusion protein comprises at least a portion of an antibody and at

least a portion of a non-antibody protein. In some embodiments, the antibody targets a component of the PD-1 pathway. For example, in some embodiments, the antibody targets PD-1. In some embodiments, the antibody targets a ligand of PD-1 (*e.g.*, PD-L1, PD-L2). In some embodiments, the non-antibody protein comprises a component of the PD-1 pathway. For example, in some embodiments, the non-antibody protein comprises at least a portion of a ligand of PD-1. In some embodiments, the non-antibody portion comprises at least a portion of PD-L1. In some embodiments, the non-antibody portion comprises at least a portion of PD-L2. In some embodiments, the non-antibody portion comprises at least a portion of PD-1. In some embodiments, the other agent is AMP-224.

[0090] In some embodiments, the other agent that antagonizes a PD-1 pathway is an antagonist of a component of the PD-1 pathway. In some embodiments, the other agent antagonizes PD-1, a ligand of PD-1 (such as PD-L1 or PD-L2), or a combination thereof. In some embodiments, the other agent is selected from the group consisting of AMP-224, nivolumab, AMP-514, pembrolizumab, pidilizumab, REGN2810, PDR001, BGB-A317, BMS-936559, MEDI4736, MSB0010718C and MPDL3280A. In some embodiments, the other agent is nivolumab. In some embodiments, the other agent is pembrolizumab. In some embodiments, the other agent is pidilizumab. In some embodiments, the other agent is AMP-514. In some embodiments, the other agent is AMP-224.

[0091] In some embodiments, the other agent that antagonizes a PD-1 pathway in a cell is a PD-1 antagonist. In some embodiments, the antagonist of PD-1 disrupts or interferes with the interaction between PD-1 and a ligand of PD-1. In some embodiments, the antagonist of PD-1 disrupts or interferes with the interaction between PD-1 and PD-L1. In some embodiments, the antagonist of PD-1 disrupts or interferes with the interaction between PD-1 and PD-L2. In some embodiments, the PD-1 antagonist comprises a polypeptide. In some embodiments, a polypeptide comprises one or more amino acids. In some embodiments, the PD-1 antagonist comprises a fusion protein. In some embodiments, the fusion protein is AMP-224. In some embodiments, the PD-1 antagonist comprises an antibody or fragment thereof. In some embodiments, the PD-1 antagonist comprises a fully human monoclonal antibody or fragment thereof. In some embodiments, the PD-1 antagonist comprises an immunoglobulin or fragment thereof. In

some embodiments, the PD-1 antagonist comprises at least a portion of an immunoglobulin G (IgG). In some embodiments, the PD-1 antagonists comprises a fusion peptide. In some embodiments, the PD-1 antagonist comprises an anti-PD-1 antibody. In some embodiments, the PD-1 antagonist comprises a monoclonal anti-PD-1 antibody. In some embodiments, the PD-1 antagonist comprises a human anti-PD-1 antibody. In some embodiments, the PD-1 antagonist comprises a humanized anti-PD-1 antibody. In some embodiments, the PD-1 antagonist comprises a fully human anti-PD-1 antibody. In some embodiments, the PD-1 antagonist comprises a chimeric anti-PD-1 antibody. In some embodiments, the PD-1 antagonist is selected from the group consisting of nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, and pidilizumab (CT-011). In some embodiments, the PD-1 antagonist is nivolumab.

[0092] In some embodiments, the other agent that antagonizes a PD-1 pathway in a cell is a PD-L1 antagonist. In some embodiments, the antagonist of PD-L1 disrupts or interferes with the interaction between PD-L1 and another component of the PD-1 pathway. In some embodiments, the antagonist of PD-L1 disrupts or interferes with the interaction between PD-1 and PD-L1. In some embodiments, the PD-L1 antagonist comprises a polypeptide. In some embodiments, a polypeptide comprises one or more amino acids. In some embodiments, the PD-L1 antagonist comprises a fusion protein. In some embodiments, the fusion protein is AMP-224. In some embodiments, the PD-L1 antagonist comprises an antibody or fragment thereof. In some embodiments, the PD-L1 antagonist comprises a fully human monoclonal antibody or fragment thereof. In some embodiments, the PD-L1 antagonist comprises an immunoglobulin or fragment thereof. In some embodiments, the PD-L1 antagonist comprises at least a portion of an immunoglobulin G (IgG). In some embodiments, the PD-L1 antagonists comprises a fusion peptide. In some embodiments, the PD-L1 antagonist comprises an anti-PD-L1 antibody. In some embodiments, the PD-L1 antagonist comprises a monoclonal anti-PD-L1 antibody. In some embodiments, the PD-L1 antagonist comprises a human anti-PD-L1 antibody. In some embodiments, the PD-L1 antagonist comprises a humanized anti-PD-L1 antibody. In some embodiments, the PD-L1 antagonist comprises a fully human anti-PD-L1 antibody. In some embodiments, the PD-L1 antagonist comprises a chimeric

anti-PD-L1 antibody. In some embodiments, the PD-L1 antagonist is selected from the group consisting of BMS-936559, MEDI4736, MSB0010718C and MPDL3280A (RG7446)). In some embodiments, a PD-L1 antagonist is BMS-936559. In some embodiments, a PD-L1 antagonist is MEDI4736. In some embodiments, a PD-L1 antagonist is MPDL3280A. In some embodiments, the PD-L1 antagonist is MSB0010718C.

[0093] In some embodiments, the other agent that antagonizes a PD-1 pathway in a cell is a PD-L2 antagonist. In some embodiments, the antagonist of PD-L2 disrupts or interferes with the interaction between PD-L2 and another component of the PD-1 pathway. In some embodiments, the antagonist of PD-L2 disrupts or interferes with the interaction between PD-1 and PD-L2. In some embodiments, the PD-L2 antagonist comprises a polypeptide. In some embodiments, a polypeptide comprises one or more amino acids. In some embodiments, the PD-L2 antagonist comprises a fusion protein. In some embodiments, the fusion protein is AMP-224. In some embodiments, the PD-L2 antagonist comprises an antibody or fragment thereof. In some embodiments, the PD-L2 antagonist comprises a fully human monoclonal antibody or fragment thereof. In some embodiments, the PD-L2 antagonist comprises an immunoglobulin or fragment thereof. In some embodiments, the PD-L2 antagonist comprises at least a portion of an immunoglobulin G (IgG). In some embodiments, the PD-L2 antagonists comprises a fusion peptide. In some embodiments, the PD-L2 antagonist comprises an anti-PD-L2 antibody. In some embodiments, the PD-L2 antagonist comprises a monoclonal anti-PD-L2 antibody. In some embodiments, the PD-L2 antagonist comprises a human anti-PD-L2 antibody. In some embodiments, the PD-L2 antagonist comprises a humanized anti-PD-L2 antibody. In some embodiments, the PD-L2 antagonist comprises a fully human anti-PD-L2 antibody. In some embodiments, the PD-L2 antagonist comprises a chimeric anti-PD-L2 antibody.

[0094] In some embodiments, the other agent is AMP-224. AMP-224 is a recombinant fusion protein comprising an extracellular domain of the PD-1 ligand programmed cell death ligand 2 (PD-L2) and an Fc region of human IgG. Many cancers and chronic infectious diseases can actively evade and suppress the immune system. On a molecular level, this evasion may be due in part to the interactions between the proteins

PD-1 and B7-H1. AMP-224 can block the interaction between PD-1 and B7-H1. AMP-224 can overcome immune suppression, thereby allowing the immune system to fight successfully against cancer. Synonyms for AMP-224 include, but are not limited to, B7-DC Fc. AMP-224 is described, for example, in Infante et al., *J Clin Oncol*, 31(suppl 15):abstr 3044 (2013), Kim and Eder, *Oncology*, 28 Suppl 3:15-28 (2014), Kojima et al., *J Immunother*, 37(3):147-54 (2014), Freeman-Keller and Weber, *Ther Adv Med Oncol*, 7(1):12-21 (2015), and Niezgoda et al., *Biomed Res Int*, 2015:851387 (2015), each of which is incorporated by reference in its entirety.

[0095] In some embodiments, the other agent is BMS-936559. BMS-936559 is a fully human IgG4 anti-PD-L1 mAb that inhibits the binding of the PD-L1 ligand to both PD-1 and CD80. BMS-936559 targets one of the immunosuppressive ligands for PD-1, PD-L1, which is often expressed on tumor, stromal and immune cells. Synonyms for BMS-936559 include, but are not limited to, MDX-1105. BMS-936559 is described, for example, in Brahmer et al., *N Engl J Med* 366(26):2455-65 (2012), Tang and Heng, *Curr Oncol Rep*, 25(2):98-104 (2013), and Kim and Eder, *Oncology*, 28 Suppl 3:15-28 (2014), Niezgoda et al., *Biomed Res Int*, 2015:851387 (2015), each of which is incorporated by reference in its entirety.

[0096] In some embodiments, the other agent is MEDI4736. MEDI4736 is a monoclonal antibody directed against B7H1 (B7 homolog 1; programmed cell death ligand 1) with potential immunostimulating activity. Upon intravenous administration, MEDI4736 binds to the cell surface antigen B7H1, thereby blocking B7H1 signaling. This may activate the immune system to exert a cytotoxic T-lymphocyte (CTL) response against B7H1-expressing tumor cells. B7H1, a member of the B7 protein superfamily and a negative regulator of cytokine synthesis, is overexpressed on certain tumor cell types. Synonyms for MEDI4736 include, but are not limited to, durvalumab and anti-B7H1 monoclonal antibody. MEDI4736 is described, for example, in Kim and Eder, *Oncology*, 28 Suppl 3:15-28 (2014), Lutzky et al., *J Clin Oncol*, 32(suppl 5S):abstr 3001 (2014), Segal et al., *J Clin Oncol*, 32(suppl 5S):abstr 3002 (2014), Niezgoda et al., *Biomed Res Int*, 2015:851387 (2015), and Stewart et al., *Cancer Immunol Res*, 3(9):1052-62 (2015), each of which is incorporated by reference in its entirety.

[0097] In some embodiments, the other agent is MPDL3280A. MPDL3280A is a human, Fc optimized, monoclonal antibody directed against the protein ligand PD-L1 (programmed cell death-1 ligand 1) with potential immunomodulating and antineoplastic activities. MPDL3280A contains an engineered fragment crystallizable (Fc) domain designed to optimize efficacy and safety by minimizing antibody-dependent cellular cytotoxicity (ADCC). PD-L1 monoclonal antibody MPDL3280A binds to PD-L1, blocking its binding to and activation of its receptor, PD-1 (programmed death 1), which may enhance the T-cell-mediated immune response to neoplasms and reverse T-cell inactivation. In addition, by binding to PD-L1, MPDL3280A also prevents binding of this ligand to B7.1. PD-L1 is overexpressed on many human cancer cell types. PD-L1 binding to PD-1 on T-cells suppresses the immune system and results in increased immune evasion. PD-1, a transmembrane protein expressed on activated T-cells, is a negative regulator of the immune system that limits the expansion and survival of CD8⁺ T cells. The Fc region of MPDL3280A is modified in such a way that it does not induce either antibody-dependent cytotoxicity (ADCC) or complement-dependent cytotoxicity (CDC). Synonyms for MPDL3280A include, but are not limited to, atezolizumab and RG7466. MPDL3280A is described, for example, in Kim and Eder, *Oncology*, 28 Suppl 3:15-28 (2014), Cha et al., *Semin Oncol*, 42(3):484-7 (2015), de Guillebon et al., *World J Gastrointest Oncol*, 7(8):95-101 (2015), and Niezgoda et al., *Biomed Res Int*, 2015:851387 (2015), each of which is incorporated by reference in its entirety.

[0098] In some embodiments, the other agent is MSB0010718C. MSB0010718C is a fully human IgG1 monoclonal antibody targeting the coregulatory protein Programmed Death (PD)-Ligand 1 (PD-L1). The PD-L1/PD-1 pathway is implicated as a major mechanism by which tumors evade elimination by the immune system. The PD-L1 molecule is expressed in many cancer types, including mMCC. MSB0010718C, which blocks the interaction of PD-L1 with its receptor PD-1, may have the potential to restore effective anti-tumor T-cell responses and thereby to inhibit tumor growth. Synonyms for MSB0010718C include, but are not limited to, avelumab. MSB0010718C is described, for example, in Heery et al., *J Clin Oncol*, 32(suppl 5S):abstr 3064 (2014), Scarpace, *Drugs Context*, 4:212289 (2015), Garon, *Semin Oncol*, 42 Suppl 2:S11-8 (2015), Niezgoda et al., *Biomed Res Int*, 2015:851387 (2015), and Boyerinas et al., *Cancer*

Immunol Res, 3(10):1148-57 (2015), each of which is incorporated by reference in its entirety.

[0099] In some embodiments, the other agent is nivolumab. Nivolumab is a fully human monoclonal antibody directed against the negative immunoregulatory human cell surface receptor PD-1 with immunopotential activity. Nivolumab binds to and blocks the activation of PD-1, an Ig superfamily transmembrane protein, by its ligands PD-L1 and PD-L2, resulting in the activation of T-cells and cell-mediated immune responses against tumor cells or pathogens. Activated PD-1 negatively regulates T-cell activation and effector function through the suppression of P13k/Akt pathway activation. Synonyms for nivolumab include, but are not limited to, BMS-936558, MDX-1106, ONO-4538 and OPDIVO®. Nivolumab is described, for example, in Brahmer et al., J Clin Oncol, 28(19):3167-75 (2010), Topalian et al., N Engl J Med, 366(26):2443-54 (2012), Hamashi et al., J Clin Oncol, 32(suppl 5S):abstr 5511 (2014), Kim and Eder, Oncology, 28 Suppl 3:15-28 (2014), Niezgoda et al., Biomed Res Int, 2015:851387 (2015), and Tang and Heng, Curr Oncol Rep, 25(2):98-104 (2013), each of which is incorporated by reference in its entirety.

[00100] In some embodiments, the other agent is AMP-514. AMP-514 (MEDI0680) is a monoclonal antibody directed against the human programmed cell death 1 (PD-1) protein, with potential immunomodulating and antineoplastic activity. Although the exact mechanism of action is not reported, anti-PD-1 monoclonal antibody AMP-514 potentially inhibits the activation of PD-1 and its downstream signaling pathways. This may restore immune function through the activation both of T-cells and cell-mediated immune responses against PD-1 overexpressing tumor cells. PD-1, a transmembrane protein in the Ig superfamily, negatively regulates T-cell activation and effector function when activated by its ligands, and plays an important role in tumor evasion from host immunity. AMP-514 (MEDI0680) is described, for example, in Goswami et al., J Immunother Cancer, 2(Suppl 3):P73 (2014) and Infante et al., J Clin Oncol, 33(suppl 15):abstr TPS3088 (2015), each of which is incorporated by reference in its entirety.

[00101] In some embodiments, the other agent is pembrolizumab. Pembrolizumab (MK-3475) is a humanized monoclonal IgG4 antibody directed against human cell surface receptor PD-1 (programmed death-1 or programmed cell death-1) with potential

immunopotentiating activity. Upon administration, pembrolizumab binds to PD-1, an inhibitory signaling receptor expressed on the surface of activated T cells, and blocks the binding to and activation of PD-1 by its ligands, which results in the activation of T-cell-mediated immune responses against tumor cells. The ligands for PD-1 include PD-L1, which is expressed on antigen presenting cells (APCs) and overexpressed on certain cancer cells, and PD-L2, which is primarily expressed on APCs. Activated PD-1 negatively regulates T-cell activation through the suppression of the PI3K/Akt pathway. Synonyms for pembrolizumab include, but are not limited to, KEYTRUDA®, lambrolizumab, and MK-3475. Pembrolizumab is described, for example, in Hamid et al., *N Engl J Med*, 369(2):134-44 (2013), Tang and Heng, *Curr Oncol Rep*, 25(2):98-104 (2013), Kim and Eder, *Oncology*, 28 Suppl 3:15-28 (2014), Niezgoda et al., *Biomed Res Int*, 2015:851387 (2015), and Tsai et al., *Hum Vaccin Immunother*, 10(11):3111-6 (2014), each of which is incorporated by reference in its entirety.

[00102] In some embodiments, the other agent is pidilizumab. Pidilizumab (CT-011) is a humanized monoclonal antibody directed against human PD-1 (programmed cell death 1; PDCD1), with immunomodulating and antitumor activities. Pidilizumab blocks interaction between the receptor PD-1 with its ligands, PD-1 ligand 1 (PD-1L1) and PD-1 ligand 2 (PD-1L2), resulting in the attenuation of apoptotic processes in lymphocytes, primarily effector/memory T cells, and the augmentation of the anti-tumor activities of NK cells. PD-1 is an inhibitory receptor belonging to the B7-receptor family that is expressed on lymphocytes and myeloid cells; its ligands, PD-1L1 and PD-1L2, are expressed not only by hematopoietic cells but also by cells in non-lymphoid tissues. Synonyms for pidilizumab include, but are not limited to, BAT mAb and CT-011. Pidilizumab is described, for example, in Jacobsen, *J Clin Oncol*, 31(33):4268-70 (2013), Armand et al., *J Clin Oncol*, 31(33):4199-206 (2013), Atkins et al., *J Clin Oncol*, 32(suppl 5S):abstr 9001 (2014), Kim and Eder, *Oncology*, 28 Suppl 3:15-28 (2014), and Pal et al., *Clin Adv Hematol Oncol*, 12(2):90-9 (2014), each of which is incorporated by reference in its entirety.

[00103] In some embodiments, the other agent is REGN2810. REGN2810 is a fully human directed to the PD-1 receptor that blocks the interaction of PD-1 with its ligands, PD-L-1 and PD-L2. REGN2810 may enhance the immune response to tumor antigens.

REGN2810 is described, for example, in Burova et al., Cancer Research, 75(15 Suppl):abstr 266 (2015), which is incorporated by reference in its entirety.

[00104] In some embodiments, the other agent is PDR001. PDR001 is a fully humanized monoclonal antibody directed against PD-1. PDR001 may have immune checkpoint inhibitory and anti-neoplastic activities. PDR001 binds to PD-1 expressed on activated T cells and blocks the interaction with its ligands, PD-L1 and PD-L2. The inhibition of ligand binding prevents PD-1-mediated signaling and results in both T-cell activation and induction of T-cell mediated immune responses against tumor cells. PDR001 is described, for example, in National Cancer Institute Drug Dictionary and in clinical trial numbers NCT02608268, NCT02605967, NCT02460024, and NCT0240441, each of which is incorporated by reference in its entirety.

[00105] In some embodiments, the other agent is BGB-A317. BGB-A317 is a monoclonal antibody directed against PD-1. BGB-A317 may have immune checkpoint inhibitory and anti-neoplastic activities. BGB-A317 binds to PD-1 and inhibits the binding of PD-1 to its ligands, PD-L1 and PD-L2. The inhibition of ligand binding may prevent activation of PD-1 and its downstream signaling pathways. Prevention of PD-1 activation may restore immune function through the activation of both T-cells and T-cell-mediated immune responses against tumor cells. BGB-A317 is described, for example, in National Cancer Institute Drug Dictionary and in clinical trial number NCT02407990, each of which is incorporated by reference in its entirety.

[00106] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell. In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising paclitaxel coated with an albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE[®]); and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, the proliferative disease is a cancer described in Section V-B, *infra*. In some embodiments, the proliferative disease is a cancer selected

from the group consisting of breast cancer, lung cancer (such as small cell lung cancer and non-small cell lung cancer), and pancreatic cancer. In some embodiments, the cancer is breast cancer. In some embodiments, the cancer is a Her2 negative breast cancer. In some embodiments, the cancer is a recurrent breast cancer. In some embodiments, the cancer is a metastatic breast cancer. In some embodiments, the cancer is a lung cancer. In some embodiments, the cancer is a non-small cell lung cancer. In some embodiments, the cancer is a Stage III cancer. In some embodiments, the cancer is a Stage IIIB cancer. In some embodiments, the cancer is a Stage IV cancer. In some embodiments, the cancer is a Stage IIIB or IV non-small cell lung cancer (NSCLC). In some embodiments, the cancer is pancreatic cancer. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the

effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the

composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (e.g., ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the

amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². In some embodiments, the composition is administered via intravenous administration. In some embodiments, the composition is administered via intra-arterial administration. In some embodiments, the composition is administered via intraperitoneal administration. In some embodiments, the composition is administered via intrapulmonary administration. In some embodiments, the composition is administered via oral administration. In some embodiments, the composition is administered via inhalation. In some embodiments, the composition is administered via intravesicular administration. In some embodiments, the composition is administered via intramuscular administration. In some embodiments, the composition is administered via intra-tracheal administration. In some embodiments, the composition is administered via subcutaneous administration. In some embodiments, the composition is administered via intraocular administration. In some embodiments, the composition is administered via intrathecal administration. In some embodiments, the composition is administered via transmucosal administration. In some embodiments, the composition is administered via transdermal administration. In some embodiments, the composition is administered as a sustained continuous release formulation. In some embodiments, the composition is administered via an inhaler or other air borne delivery system. In some embodiments, the other agent is a PD-1 pathway antagonist. In some embodiments, the PD-1 pathway antagonist is administered via intravenous administration. In some embodiments, the PD-1 pathway antagonist is administered via intra-arterial administration. In some embodiments, the PD-1 pathway antagonist is administered via intraperitoneal administration. In some embodiments, the PD-1 pathway antagonist is administered via intrapulmonary administration. In some embodiments, the PD-1 pathway antagonist is administered via oral administration. In some embodiments, the PD-1 pathway antagonist is administered via inhalation. In some embodiments, the PD-1 pathway antagonist is

administered via intravesicular administration. In some embodiments, the PD-1 pathway antagonist is administered via intramuscular administration. In some embodiments, the PD-1 pathway antagonist is administered via intra-tracheal administration. In some embodiments, the PD-1 pathway antagonist is administered via subcutaneous administration. In some embodiments, the PD-1 pathway antagonist is administered via intraocular administration. In some embodiments, the PD-1 pathway antagonist is administered via intrathecal administration. In some embodiments, the PD-1 pathway antagonist is administered via transmucosal administration. In some embodiments, the PD-1 pathway antagonist is administered via transdermal administration. In some embodiments, the PD-1 pathway antagonist is administered as a sustained continuous release formulation. In some embodiments, the PD-1 pathway antagonist is administered via an inhaler or other air borne delivery system. Suitable agents that antagonize a PD-1 pathway in a cell include, but are not limited to, AMP-224, nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), pidilizumab (CT-011), BMS-936559, MEDI4736, MSB0010718C, MPDL3280A (RG7446) and rHIgM12B7). In some embodiments, the PD-1 pathway antagonist is a PD-1 antagonist. In some embodiments, the PD-1 pathway antagonist is an antagonist of a PD-1 ligand. In some embodiments, the PD-1 pathway antagonist is a PD-L1 antagonist. In some embodiments, the PD-1 pathway antagonist is PD-L2 antagonist. In some embodiments, the PD-1 pathway antagonist is nivolumab. In some embodiments, the nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, the PD-1 pathway antagonist is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about

15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day

cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the

REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some

embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some

embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on

day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the

individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In

some embodiments, the PD-1 pathway antagonist is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of

MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered.

In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[00107] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin); and b) an effective amount of a PD-1 pathway antagonist, wherein the composition is administered intravenously, and wherein the PD-1 pathway antagonist is administered orally. In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising paclitaxel coated with an albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE[®]); and b) an effective amount of a PD-1 pathway antagonist, wherein the composition is administered intravenously and wherein the PD-1 pathway antagonist is administered orally. In some embodiments, the composition and the PD-1 pathway antagonist are administered concurrently. In some embodiments, the proliferative disease is cancer selected from the group consisting of breast cancer, lung cancer (such as small cell lung cancer and non-small cell lung cancer), and pancreatic cancer. In some embodiments, the cancer is breast cancer. In some embodiments, the cancer is a Her2 negative breast cancer. In some embodiments, the breast cancer is a triple negative breast cancer. In some embodiments, the cancer is a recurrent breast

cancer. In some embodiments, the cancer is a metastatic breast cancer. In some embodiments, the cancer is a lung cancer. In some embodiments, the cancer is a non-small cell lung cancer. In some embodiments, the cancer is a Stage III cancer. In some embodiments, the cancer is a Stage IIIB cancer. In some embodiments, the cancer is a Stage IV cancer. In some embodiments, the cancer is a Stage IIIB or IV NSCLC. In some embodiments, the cancer is a pancreatic cancer. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*,

paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the

amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the

amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². Suitable agents that antagonize a PD-1 pathway in a cell include, but are not limited to, AMP-224, nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), pidilizumab (CT-011), BMS-936559, MEDI4736, MSB0010718C, MPDL3280A (RG7446) and rHIgM12B7). In some embodiments, the PD-1 pathway antagonist is a PD-1 antagonist. In some embodiments, the PD-1 pathway antagonist is an antagonist of a PD-1 ligand. In some embodiments, the PD-1 pathway antagonist is a PD-L1 antagonist. In some embodiments, the PD-1 pathway antagonist is PD-L2 antagonist. In some embodiments, the PD-1 pathway antagonist is nivolumab. In some embodiments, the nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the

nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some

embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In

some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the

PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered.

In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some

embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a

week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is

administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In

some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range

described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[00108] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), wherein the taxane (such as paclitaxel) is in the dosage range of about 60-300 mg/m² (including for example about 80-200 mg/m², for example about 100 mg/m²), and b) a PD-1 pathway antagonist in the dosage range of about 0.01-20 mg/kg (including for example about 0.1-10 mg/kg, such as 3 mg/kg). In some embodiments, there is provided a method of treating a proliferative

disease (such as cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising paclitaxel coated with an albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE[®]), wherein the paclitaxel is in the dosage range of about 60-300 mg/m² (including for example about 80-200 mg/m², for example about 100 mg/m²), and b) about 50-1000 mg/day (including for example about 200-500, such as 400 mg/day) a PD-1 pathway antagonist in the dosage range of about 0.01-20 mg/kg (including for example about 0.1-10 mg/kg, such as 3 mg/kg). In some embodiments, the composition is administered intravenously. In some embodiments, the PD-1 pathway antagonist is administered orally. In some embodiments, the proliferative disease is cancer selected from the group consisting of breast cancer, lung cancer (such as small cell lung cancer and non-small cell lung cancer), and pancreatic cancer. In some embodiments, the cancer is breast cancer. In some embodiments, the cancer is a Her2 negative breast cancer. In some embodiments, the cancer is a recurrent breast cancer. In some embodiments, the cancer is a metastatic breast cancer. In some embodiments, the cancer is a lung cancer. In some embodiments, the cancer is a non-small cell lung cancer. In some embodiments, the cancer is a Stage III cancer. In some embodiments, the cancer is a Stage IIIB cancer. In some embodiments, the cancer is a Stage IV cancer. In some embodiments, the cancer is a Stage IIIB or IV NSCLC. In some embodiments, the cancer is a pancreatic cancer. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the

effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-

paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 60 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the composition is administered via intravenous administration. In some embodiments, the composition is administered via intra-arterial administration. In some embodiments, the composition is administered via intraperitoneal administration. In some embodiments, the composition is administered via intrapulmonary administration. In some embodiments, the composition is administered via oral administration. In some embodiments, the composition is administered via inhalation. In some embodiments, the composition is administered via intravesicular administration. In some embodiments, the composition is administered via intramuscular administration. In some embodiments, the composition is administered via intra-tracheal administration. In some embodiments, the composition is administered via subcutaneous administration. In some embodiments, the composition is administered via intraocular administration. In some embodiments, the composition is administered via intrathecal administration. In some embodiments, the composition is

administered via transmucosal administration. In some embodiments, the composition is administered via transdermal administration. In some embodiments, the composition is administered as a sustained continuous release formulation. In some embodiments, the composition is administered via an inhaler or other air borne delivery system. In some embodiments, the PD-1 pathway antagonist is administered via intravenous administration. In some embodiments, the PD-1 pathway antagonist is administered via intra-arterial administration. In some embodiments, the PD-1 pathway antagonist is administered via intraperitoneal administration. In some embodiments, the PD-1 pathway antagonist is administered via intrapulmonary administration. In some embodiments, the PD-1 pathway antagonist is administered via oral administration. In some embodiments, the PD-1 pathway antagonist is administered via inhalation. In some embodiments, the PD-1 pathway antagonist is administered via intravesicular administration. In some embodiments, the PD-1 pathway antagonist is administered via intramuscular administration. In some embodiments, the PD-1 pathway antagonist is administered via intra-tracheal administration. In some embodiments, the PD-1 pathway antagonist is administered via subcutaneous administration. In some embodiments, the PD-1 pathway antagonist is administered via intraocular administration. In some embodiments, the PD-1 pathway antagonist is administered via intrathecal administration. In some embodiments, the PD-1 pathway antagonist is administered via transmucosal administration. In some embodiments, the PD-1 pathway antagonist is administered via transdermal administration. In some embodiments, the PD-1 pathway antagonist is administered as a sustained continuous release formulation. In some embodiments, the PD-1 pathway antagonist is administered via an inhaler or other air borne delivery system. Suitable agents that antagonize a PD-1 pathway in a cell include, but are not limited to, AMP-224, nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), pidilizumab (CT-011), BMS-936559, MEDI4736, MSB0010718C, MPDL3280A (RG7446) and rHIgM12B7). In some embodiments, the PD-1 pathway antagonist is a PD-1 antagonist. In some embodiments, the PD-1 pathway antagonist is an antagonist of a PD-1 ligand. In some embodiments, the PD-1 pathway antagonist is a PD-L1 antagonist. In some embodiments, the PD-1 pathway antagonist is PD-L2 antagonist. In some embodiments, the PD-1 pathway antagonist is nivolumab. In some embodiments, nivolumab is

administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3

mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a

21 day cycle. In some embodiments, the PD-1 pathway antagonist is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in

Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments,

at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some

embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1

and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments,

MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MSB0010718C. In some

embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of

MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some

embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[00109] In some embodiments, there is provided a method of treating breast cancer (such as HER2 negative breast cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin); and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, there is provided a method of treating breast cancer (such as HER2 negative breast cancer) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising paclitaxel and albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE®) and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, there is provided a method of treating breast cancer (such as HER2 negative breast cancer) in an individual, comprising: a) intravenously administering an effective amount of a composition comprising nanoparticles comprising paclitaxel and albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE®); b) intravenously or subcutaneously administering an effective amount of a PD-1 pathway antagonist. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered

at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is

about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the

amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². Suitable agents that antagonize a PD-1 pathway in a cell include, but are not limited to, AMP-224, nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), pidilizumab (CT-011), BMS-936559, MEDI4736, MSB0010718C, MPDL3280A (RG7446) and rHIgM12B7). In some embodiments, the PD-1 pathway antagonist is a PD-1 antagonist. In some embodiments, the PD-1 pathway antagonist is an antagonist of a PD-1 ligand. In some embodiments, the PD-1 pathway antagonist is a PD-L1 antagonist. In some embodiments, the PD-1 pathway antagonist is PD-L2 antagonist. In some embodiments, the PD-1 pathway antagonist is nivolumab. In

some embodiments, nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3

mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a

21 day cycle. In some embodiments, the PD-1 pathway antagonist is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in

Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments,

at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some

embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1

and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments,

MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MSB0010718C. In some

embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of

MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some

embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[00110] In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin); and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising paclitaxel and albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE®); and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, there is provided a method of treating pancreatic cancer in an individual, comprising: a) intravenously administering an effective amount of a composition comprising nanoparticles comprising paclitaxel and albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE®); b) intravenously or subcutaneously administering an effective amount of a PD-1 pathway antagonist. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the

nanoparticle composition is administered in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel)

in the composition is about 175 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 150

mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². Suitable agents that antagonize a PD-1 pathway in a cell include, but are not limited to, AMP-224, nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), pidilizumab (CT-011), BMS-936559, MEDI4736, MSB0010718C, MPDL3280A (RG7446) and rHIgM12B7). In some embodiments, the PD-1 pathway antagonist is a PD-1 antagonist. In some embodiments, the PD-1 pathway antagonist is an antagonist of a PD-1 ligand. In some embodiments, the PD-1 pathway antagonist is a PD-L1 antagonist. In some embodiments, the PD-1 pathway antagonist is PD-L2 antagonist. In some embodiments, the PD-1 pathway antagonist is nivolumab. In some embodiments, nivolumab is administered to the individual in a dosing schedule as

described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments,

between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pidilizumab. In

some embodiments, pidilizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg

of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about

0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some

embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is BMS-

936559. In some embodiments, BMS-936559 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in

Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as

described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of

MPDL3280A is administered. In some embodiments, at least about 600 mg of MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments,

at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[00111] In some embodiments, there is provided a method of treating lung cancer (such as NSCLC) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin); and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, there is provided a method of treating lung cancer (such as NSCLC) in an individual, comprising administering to the individual: a) an effective amount of a composition comprising nanoparticles comprising paclitaxel and albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE®); and b) an effective amount of a PD-1 pathway antagonist. In some embodiments, there is provided a method of treating lung cancer (such as NSCLC) in an individual, comprising: a) intravenously administering an effective amount of a composition comprising nanoparticles comprising paclitaxel and albumin (such as *nab*-paclitaxel, *e.g.*, ABRAXANE®); b) intravenously or subcutaneously administering an effective amount of a PD-1 pathway antagonist. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the nanoparticle composition is administered in a mode of administration described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered at a dosing frequency described in Section V-C, *infra*. In some embodiments, the nanoparticle composition is administered in a dosing schedule as described in Section V-

C, *infra*. In some embodiments, the amount of the taxane (such as paclitaxel) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 50 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 75 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 100 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 125 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 150 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 175 mg/m². In some embodiments, the effective amount of

taxane (*e.g.*, paclitaxel) in the composition is about 200 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 225 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 250 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 260 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 275 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 300 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 325 mg/m². In some embodiments, the effective amount of taxane (*e.g.*, paclitaxel) in the composition is about 350 mg/m². In some embodiments, the composition comprises *nab*-paclitaxel, *e.g.*, ABRAXANE®. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is an amount described in Section V-C, *infra*. In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 45 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 60 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 75 mg/m² to about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 80 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 80 mg/m² to about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 100 mg/m² to about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 150 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*,

ABRAXANE®) in the composition is between about 170 mg/m² to about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is between about 200 mg/m² to about 350 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 50 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 75 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 100 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 125 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 150 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 175 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 200 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 225 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 250 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 260 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 275 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 300 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 325 mg/m². In some embodiments, the amount of *nab*-paclitaxel (*e.g.*, ABRAXANE®) in the composition is about 350 mg/m². Suitable agents that antagonize a PD-1 pathway in a cell include, but are not limited to, AMP-224, nivolumab (BMS-936558), AMP-514, pembrolizumab (MK-3475), pidilizumab (CT-011), BMS-936559, MEDI4736, MSB0010718C, MPDL3280A (RG7446) and rHIgM12B7). In some embodiments, the PD-1 pathway antagonist is a PD-1 antagonist. In some embodiments, the PD-1 pathway antagonist is an antagonist of a PD-1 ligand. In some embodiments, the PD-1 pathway antagonist is a PD-L1 antagonist. In some embodiments, the PD-1 pathway antagonist is PD-L2 antagonist. In some embodiments, the PD-1 pathway antagonist is nivolumab. In some embodiments, nivolumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the

individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, nivolumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of nivolumab is administered. In some embodiments, about 10 mg/kg of nivolumab is administered. In some embodiments, at least about 7 mg/kg of nivolumab is administered. In some embodiments, at least about 5 mg/kg of nivolumab is administered. In some embodiments, at least about 3 mg/kg of nivolumab is administered. In some embodiments, at least about 1 mg/kg of nivolumab is administered. In some embodiments, at least about 0.3 mg/kg of nivolumab is administered. In some embodiments, the nivolumab is administered at least once during a cycle. In some embodiments, the nivolumab is administered at least twice during a cycle. In some embodiments, the nivolumab is administered at least once a week. In some embodiments, the nivolumab is administered at least once every two weeks. In some embodiments, the nivolumab is administered at least once every three weeks. In some embodiments, the nivolumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the nivolumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the nivolumab is administered on day 15 of a 21 day cycle. In some embodiments, the nivolumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pembrolizumab. In some embodiments, pembrolizumab is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pembrolizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 15 mg/kg of pembrolizumab is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of pembrolizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some

embodiments, between about 3 mg/kg to about 10 mg/kg of pembrolizumab is administered. In some embodiments, at least about 1 mg/kg of pembrolizumab is administered. In some embodiments, at least about 2 mg/kg of pembrolizumab is administered. In some embodiments, at least about 3 mg/kg of pembrolizumab is administered. In some embodiments, at least about 5 mg/kg of pembrolizumab is administered. In some embodiments, at least about 10 mg/kg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 400 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 300 mg of pembrolizumab is administered. In some embodiments, between about 10 mg to about 250 mg of pembrolizumab is administered. In some embodiments, between about 50 mg to about 250 mg of pembrolizumab is administered. In some embodiments, at least about 50 mg of pembrolizumab is administered. In some embodiments, at least about 100 mg of pembrolizumab is administered. In some embodiments, at least about 150 mg of pembrolizumab is administered. In some embodiments, at least about 200 mg of pembrolizumab is administered. In some embodiments, at least about 250 mg of pembrolizumab is administered. In some embodiments, at least about 300 mg of pembrolizumab is administered. In some embodiments, the pembrolizumab is administered at least once during a cycle. In some embodiments, the pembrolizumab is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pembrolizumab is administered at least once a week. In some embodiments, the pembrolizumab is administered at least once every two weeks. In some embodiments, the pembrolizumab is administered at least once every three weeks. In some embodiments, the pembrolizumab is administered at least once every four weeks. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pembrolizumab is administered on day 1 of a 21 day cycle. In some embodiments, the pembrolizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is pidilizumab. In some embodiments, pidilizumab is administered to the individual in a dosing schedule as

described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, pidilizumab is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of pidilizumab is administered. In some embodiments, about 10 mg/kg of pidilizumab is administered. In some embodiments, at least about 7 mg/kg of pidilizumab is administered. In some embodiments, at least about 5 mg/kg of pidilizumab is administered. In some embodiments, at least about 3 mg/kg of pidilizumab is administered. In some embodiments, at least about 1 mg/kg of pidilizumab is administered. In some embodiments, at least about 0.3 mg/kg of pidilizumab is administered. In some embodiments, the pidilizumab is administered at least once during a cycle. In some embodiments, the pidilizumab is administered at least twice during a cycle. In some embodiments, the pidilizumab is administered at least once a week. In some embodiments, the pidilizumab is administered at least once every two weeks. In some embodiments, the pidilizumab is administered at least once every three weeks. In some embodiments, the pidilizumab is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the pidilizumab is administered on day 15 of a 21 day cycle. In some embodiments, the pidilizumab is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is REGN2810. In some embodiments, the REGN2810 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the REGN2810 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, between about 1 mg/kg to about

10 mg/kg of REGN2810 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of REGN2810 is administered. In some embodiments, about 10 mg/kg of REGN2810 is administered. In some embodiments, at least about 7 mg/kg of REGN2810 is administered. In some embodiments, at least about 5 mg/kg of REGN2810 is administered. In some embodiments, at least about 3 mg/kg of REGN2810 is administered. In some embodiments, at least about 1 mg/kg of REGN2810 is administered. In some embodiments, at least about 0.3 mg/kg of REGN2810 is administered. In some embodiments, the REGN2810 is administered at least once during a cycle. In some embodiments, the REGN2810 is administered at least twice during a cycle. In some embodiments, the REGN2810 is administered at least once a week. In some embodiments, the REGN2810 is administered at least once every two weeks. In some embodiments, the REGN2810 is administered at least once every three weeks. In some embodiments, the REGN2810 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the REGN2810 is administered on day 15 of a 21 day cycle. In some embodiments, the REGN2810 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is PDR001. In some embodiments, the PDR001 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the PDR001 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of PDR001 is administered. In some embodiments, about 10 mg/kg of PDR001 is administered. In some embodiments, at least about 7 mg/kg of PDR001 is administered. In some embodiments, at least about 5 mg/kg of PDR001 is administered. In some embodiments, at least about 3 mg/kg of PDR001 is administered. In some embodiments, at least about 1 mg/kg of PDR001 is administered. In some embodiments, at least about 0.3 mg/kg of PDR001 is administered. In some embodiments, the PDR001 is

administered at least once during a cycle. In some embodiments, the PDR001 is administered at least twice during a cycle. In some embodiments, the PDR001 is administered at least once a week. In some embodiments, the PDR001 is administered at least once every two weeks. In some embodiments, the PDR001 is administered at least once every three weeks. In some embodiments, the PDR001 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the PDR001 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the PDR001 is administered on day 15 of a 21 day cycle. In some embodiments, the PDR001 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the anti-PD-1 antibody is BGB-A317. In some embodiments, the BGB-A317 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, the BGB-A317 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BGB-A317 is administered. In some embodiments, about 10 mg/kg of BGB-A317 is administered. In some embodiments, at least about 7 mg/kg of BGB-A317 is administered. In some embodiments, at least about 5 mg/kg of BGB-A317 is administered. In some embodiments, at least about 3 mg/kg of BGB-A317 is administered. In some embodiments, at least about 1 mg/kg of BGB-A317 is administered. In some embodiments, at least about 0.3 mg/kg of BGB-A317 is administered. In some embodiments, the BGB-A317 is administered at least once during a cycle. In some embodiments, the BGB-A317 is administered at least twice during a cycle. In some embodiments, the BGB-A317 is administered at least once a week. In some embodiments, the BGB-A317 is administered at least once every two weeks. In some embodiments, the BGB-A317 is administered at least once every three weeks. In some embodiments, the BGB-A317 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some

embodiments, the BGB-A317 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BGB-A317 is administered on day 15 of a 21 day cycle. In some embodiments, the BGB-A317 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, the PD-1 pathway antagonist is AMP-514. In some embodiments, AMP-514 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-514 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-514 is administered. In some embodiments, about 10 mg/kg of AMP-514 is administered. In some embodiments, at least about 7 mg/kg of AMP-514 is administered. In some embodiments, at least about 5 mg/kg of AMP-514 is administered. In some embodiments, at least about 3 mg/kg of AMP-514 is administered. In some embodiments, at least about 1 mg/kg of AMP-514 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-514 is administered. In some embodiments, the AMP-514 is administered at least once during a cycle. In some embodiments, the AMP-514 is administered at least twice during a cycle. In some embodiments, the AMP-514 is administered at least once a week. In some embodiments, the AMP-514 is administered at least once every two weeks. In some embodiments, the AMP-514 is administered at least once every three weeks. In some embodiments, the AMP-514 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-514 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-514 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is BMS-936559. In some embodiments, BMS-936559 is administered to the individual in a

dosing schedule as described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, BMS-936559 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of BMS-936559 is administered. In some embodiments, about 10 mg/kg of BMS-936559 is administered. In some embodiments, at least about 7 mg/kg of BMS-936559 is administered. In some embodiments, at least about 5 mg/kg of BMS-936559 is administered. In some embodiments, at least about 3 mg/kg of BMS-936559 is administered. In some embodiments, at least about 1 mg/kg of BMS-936559 is administered. In some embodiments, at least about 0.3 mg/kg of BMS-936559 is administered. In some embodiments, the BMS-936559 is administered at least once during a cycle. In some embodiments, the BMS-936559 is administered at least twice during a cycle. In some embodiments, the BMS-936559 is administered at least once a week. In some embodiments, the BMS-936559 is administered at least once every two weeks. In some embodiments, the BMS-936559 is administered at least once every three weeks. In some embodiments, the BMS-936559 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the BMS-936559 is administered on day 15 of a 21 day cycle. In some embodiments, the BMS-936559 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MEDI4736. In some embodiments, MEDI4736 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MEDI4736 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 1 mg/kg to about 15 mg/kg of

MEDI4736 is administered. In some embodiments, between about 3 mg/kg to about 12 mg/kg of MEDI4736 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MEDI4736 is administered. In some embodiments, at least about 1 mg/kg of MEDI4736 is administered. In some embodiments, at least about 3 mg/kg of MEDI4736 is administered. In some embodiments, at least about 5 mg/kg of MEDI4736 is administered. In some embodiments, at least about 10 mg/kg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least once during a cycle. In some embodiments, between about 100 mg to about 2000 mg of MEDI4736 is administered. In some embodiments, between about 200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 400 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 600 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1000 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, between about 1200 mg to about 1800 mg of MEDI4736 is administered. In some embodiments, at least about 500 mg of MEDI4736 is administered. In some embodiments, at least about 800 mg of MEDI4736 is administered. In some embodiments, at least about 1000 mg of MEDI4736 is administered. In some embodiments, at least about 1200 mg of MEDI4736 is administered. In some embodiments, at least about 1400 mg of MEDI4736 is administered. In some embodiments, at least about 1800 mg of MEDI4736 is administered. In some embodiments, the MEDI4736 is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MEDI4736 is administered at least once a week. In some embodiments, the MEDI4736 is administered at least once every two weeks. In some embodiments, the MEDI4736 is administered at least once every three weeks. In some embodiments, the MEDI4736 is administered at least once every four weeks. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MEDI4736 is administered on day 1 of a 21 day cycle. In some embodiments, the MEDI4736 is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MSB0010718C. In some embodiments, MSB0010718C is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to

the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MSB0010718C is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of MSB0010718C is administered. In some embodiments, about 10 mg/kg of MSB0010718C is administered. In some embodiments, at least about 7 mg/kg of MSB0010718C is administered. In some embodiments, at least about 5 mg/kg of MSB0010718C is administered. In some embodiments, at least about 3 mg/kg of MSB0010718C is administered. In some embodiments, at least about 1 mg/kg of MSB0010718C is administered. In some embodiments, at least about 0.3 mg/kg of MSB0010718C is administered. In some embodiments, the MSB0010718C is administered at least once during a cycle. In some embodiments, the MSB0010718C is administered at least twice during a cycle. In some embodiments, the MSB0010718C is administered at least once a week. In some embodiments, the MSB0010718C is administered at least once every two weeks. In some embodiments, the MSB0010718C is administered at least once every three weeks. In some embodiments, the MSB0010718C is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MSB0010718C is administered on day 15 of a 21 day cycle. In some embodiments, the MSB0010718C is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is MPDL3280A. In some embodiments, MPDL3280A is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, MPDL3280A is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 500 to 1500 mg of MPDL3280A is administered. In some embodiments, between about 500 to 1200 mg of MPDL3280A is administered. In some embodiments, between about 600 to 1200 mg of MPDL3280A is administered. In some embodiments, at least about 600 mg of

MPDL3280A is administered. In some embodiments, at least about 800 mg of MPDL3280A is administered. In some embodiments, at least about 1000 mg of MPDL3280A is administered. In some embodiments, at least about 1200 mg of MPDL3280A is administered. In some embodiments, at least about 1500 mg of MPDL3280A is administered. In some embodiments, the MPDL3280A is administered at least once during a cycle. In some embodiments, the MPDL3280A is administered at least twice during a cycle. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the MPDL3280A is administered at least once a week. In some embodiments, the MPDL3280A is administered at least once every two weeks. In some embodiments, the MPDL3280A is administered at least once every three weeks. In some embodiments, the MPDL3280A is administered at least once every four weeks. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the MPDL3280A is administered on day 1 of a 21 day cycle. In some embodiments, the MPDL3280A is administered on days 1 and 15 of a 21 day cycle. In some embodiments, the PD-1 pathway antagonist is AMP-224. In some embodiments, AMP-224 is administered to the individual in a dosing schedule as described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual at a dose or dose range described in Section V-C, *infra*. In some embodiments, AMP-224 is administered to the individual in a mode of administration described in Section V-C, *infra*. In some embodiments, between about 0.01 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.5 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 0.1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 1 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, between about 3 mg/kg to about 10 mg/kg of AMP-224 is administered. In some embodiments, about 10 mg/kg of AMP-224 is administered. In some embodiments, at least about 7 mg/kg of AMP-224 is administered. In some embodiments, at least about 5 mg/kg of AMP-224 is administered. In some embodiments, at least about 3 mg/kg of AMP-224 is administered. In some embodiments, at least about 1 mg/kg of AMP-224 is administered. In some embodiments, at least about 0.3 mg/kg of AMP-224 is administered. In some embodiments, the AMP-

224 is administered at least once during a cycle. In some embodiments, the AMP-224 is administered at least twice during a cycle. In some embodiments, the AMP-224 is administered at least once a week. In some embodiments, the AMP-224 is administered at least once every two weeks. In some embodiments, the AMP-224 is administered at least once every three weeks. In some embodiments, the AMP-224 is administered at least once every four weeks. In some embodiments, a cycle is 21 days. In some embodiments, a cycle is 28 days. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 28 day cycle. In some embodiments, the AMP-224 is administered on day 15 of a 21 day cycle. In some embodiments, the AMP-224 is administered on days 1 and 15 of a 21 day cycle.

[00112] The methods described herein are suitable for treating various cancers, such as cancers described herein, including a cancer selected from the group consisting of lung cancer, pancreatic cancer, and breast cancer.

[00113] In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of at least one other agent that antagonizes a ligand of PD-1. In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of an antagonist of PD-L1. Suitable agents that antagonize a ligand of PD-1 include, but are not limited to, BMS-936559, MEDI4736, MSB0010718C and MPDL3280A (RG7446). In some embodiments, there is provided a method of treating a proliferative disease (such as cancer) in an individual, comprising administering to the individual a) an effective amount of a composition comprising nanoparticles comprising a taxane (such as paclitaxel) and a carrier protein (such as albumin), and b) an effective amount of an antagonist of PD-L2. In some embodiments, the composition is a nanoparticle composition described in Sections V-C and V-D, *infra*. In some embodiments, the nanoparticle composition comprises any of the nanoparticle components described in Section V-D1, *infra*. In some embodiments, the

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CLAIMS

What is claimed is:

1. A method of treating a proliferative disease in an individual comprising administering to the individual:
 - a) an effective amount of a composition comprising *nab*-paclitaxel, and
 - b) an effective amount of an anti-PD-1 antibody, wherein the proliferative disease is lung cancer, pancreatic cancer or breast cancer.
2. The method of claim 1, wherein the composition in a) comprises ABRAXANE®.
3. The method of claim 1 or 2, wherein the anti-PD-1 antibody is nivolumab.
4. The method according to any one of claims 1-3, further comprising administering to the individual an effective amount of a platinum-based agent.
5. The method of claim 4, wherein the platinum-based agent is carboplatin.
6. The method of claim 4, wherein the platinum-based agent is cisplatin.
7. The method according to any one of claim 1-6, wherein the composition in a) and the anti-PD-1 antibody are administered concurrently.
8. The method according to any one of claim 1-6, wherein the composition in a) and the anti-PD-1 antibody are administered sequentially.
9. The method according to any one of claim 1-6, wherein the composition in a) and the anti-PD-1 antibody are administered simultaneously.
10. The method according to any one of claim 4-6, wherein the composition in a), the anti-PD-1 antibody and the platinum-based agent are administered concurrently.
11. The method according to any one of claim 4-6, wherein the composition in a), the anti-PD-1 antibody and the platinum-based agent are administered concurrently are administered sequentially.
12. The method according to any one of claim 4-6, wherein the composition in a), the anti-PD-1 antibody and the platinum-based agent are administered concurrently are administered simultaneously.
13. A method of treating a proliferative disease in an individual comprising administering to the individual:

- a) an effective amount of a composition comprising nanoparticles comprising a taxane and a carrier protein, and
 - b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.
14. The method according to claim 13, wherein said other agent antagonizes PD-1 or a ligand of PD-1.
 15. The method according to claim 13, wherein said other agent is a PD-1 antagonist.
 16. The method according to claim 13-15, wherein said other agent is an antibody.
 17. The method according to claim 16, wherein said antibody is a monoclonal antibody.
 18. The method according to claim 16, wherein said antibody is a humanized antibody or fully human antibody.
 19. The method according to claim 16, wherein said antibody comprises an immunoglobulin G (IgG) antibody.
 20. The method according to claim 19, wherein said IgG antibody is an IgG4 antibody.
 21. The method according to claim 15, wherein said PD-1 antagonist is selected from the group consisting of AMP-224, BMS-936559, MEDI4736, MSB0010718C, MPDL3280A, nivolumab, AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, and pidilizumab (CT-011).
 22. The method according to claim 13, wherein said other agent is an antagonist of PD-1.
 23. The method according to claim 22, wherein said antagonist of PD-1 is an anti-PD-1 antibody.
 24. The method according to claim 23, wherein said anti-PD-1 antibody is nivolumab, AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, or pidilizumab (CT-011).
 25. The method of claim 13, wherein said other agent is an antagonist of PD-L1.
 26. The method of claim 25, wherein said antagonist of PD-L1 is an anti-PD-L1 antibody.

27. The method of claim 26, wherein said anti-PD-L1 antibody is BMS-936559, MSB0010718C, MPDL3280A, and MEDI4736.
28. The method according to claim 15, wherein said PD-1 pathway antagonist comprises a fusion protein.
29. The method of claim 28, wherein said fusion protein comprises at least a portion of an antibody.
30. The method according to claim 29, wherein said antibody is an immunoglobulin G antibody.
31. The method according to claim 29, wherein said fusion protein comprises an Fc region of said antibody.
32. The method according to claim 28, wherein said fusion protein comprises at least a portion of a PD-1 ligand.
33. The method according to claim 32, wherein said PD-1 ligand is PD ligand 2 (PD-L2).
34. The method according to claim 28, wherein said fusion protein comprises an extracellular domain of said PD-1 ligand.
35. The method according to claim 28, wherein said fusion protein is AMP-224.
36. The method according to claim 13, further comprising administering to said individual a chemotherapeutic agent.
37. The method according to claim 36, wherein said chemotherapeutic agent is a platinum-based agent.
38. The method according to claim 37, wherein said platinum-based agent is carboplatin.
39. The method according to claim 37, wherein said platinum-based agent is cisplatin.
40. The method according to claim 36, wherein said chemotherapeutic agent is a nucleoside analog.
41. The method according to claim 40, wherein said nucleoside analog is gemcitabine.
42. The method according to any one of claims 13-41, wherein said proliferative disease is cancer.

43. The method according to claim 42, wherein said cancer is breast cancer.
44. The method according to claim 43, wherein said individual is negative for ER, PR, or HER2.
45. The method according to claim 43, wherein said individual is negative for ER, PR, and HER2.
46. The method according to claim 43, wherein said breast cancer is a metastatic breast cancer.
47. The method according to claim 43, wherein said breast cancer is a recurrent breast cancer.
48. The method according to claim 42, wherein said cancer is a pancreatic cancer.
49. The method according to claim 42, wherein said cancer is a lung cancer.
50. The method according to claim 49, wherein said lung cancer is a non-small cell lung cancer (NSCLC).
51. The method according to claim 50, wherein said NSCLC is a stage III or stage IV NSCLC.
52. The method according to claim 50, wherein said NSCLC is a stage IIIB NSCLC.
53. The method according to claim 13, wherein said composition comprising nanoparticles comprising taxane and said other agent are administered simultaneously.
54. The method according to claim 13, wherein said composition comprising nanoparticles comprising taxane and said other agent are administered sequentially.
55. The method according to claim 13, wherein said composition comprising nanoparticles comprising taxane and said other agent are administered concurrently.
56. The method according to claim 36, wherein said composition comprising nanoparticles comprising taxane, said other agent, and said chemotherapeutic agent are administered simultaneously.

57. The method according to claim 26, wherein said composition comprising nanoparticles comprising taxane, said other agent, and said chemotherapeutic agent are administered sequentially.
58. The method according to claim 36, wherein said composition comprising nanoparticles comprising taxane, said other agent, and said chemotherapeutic agent are administered concurrently.
59. The method according to any one of claims 12-58, wherein said taxane is paclitaxel.
60. The method according to any one of claims 13-59, wherein said nanoparticles in said composition have an average diameter of less than or equal to about 200 nm.
61. The method according to any one of claims 13-60, wherein said carrier protein is albumin.
62. The method according to claim 61, wherein said albumin and said taxane in said nanoparticle composition has a weight ratio between about 1:1 to about 18:1.
63. The method according to claim 61, wherein said albumin and said taxane in said nanoparticle composition has a weight ratio between about 1:1 to about 9:1.
64. The method of claim 61, wherein said albumin and said taxane in said nanoparticle composition has a weight ratio of about 9:1.
65. The method according to any one of claims 13-64, wherein said composition comprising nanoparticles comprising a taxane and a carrier protein comprises *nab*-paclitaxel.
66. The method according to any one of claims 13-65, wherein said composition comprising nanoparticles comprising a taxane and a carrier protein comprises ABRAXANE®.
67. The method according to any one of claims 13-66, wherein said at least one other agent that antagonizes a PD-1 pathway in a cell is nivolumab.
68. The method according to any one of claims 13-67, wherein said individual is a human.

69. A kit comprising: a) a composition comprising nanoparticles comprising a taxane and a carrier protein, and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.
70. A pharmaceutical composition comprising: a) a composition comprising nanoparticles comprising a taxane and a carrier protein, and b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.
71. A method of treating breast cancer in an individual comprising administering to the individual:
- a) an effective amount of a composition comprising nanoparticles comprising a taxane and a carrier protein, and
 - b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.
72. The method according to claim 71, wherein said other agent is a PD-1 antagonist.
73. The method according to claim 71, wherein said other agent is an anti-PD-1 antibody.
74. The method according to claim 73, wherein said anti-PD-1 antibody is selected from the group consisting of nivolumab, AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, and pidilizumab (CT-011).
75. The method according to any one of claims 71-74, wherein said taxane is paclitaxel.
76. The method according to any one of claims 71-74, wherein said carrier protein is albumin.
77. The method according to any one of claims 71-74, wherein said composition comprising nanoparticles comprising a taxane and a carrier protein comprises *nab*-paclitaxel.
78. The method according to any one of claims 71-77, wherein said composition comprising nanoparticles comprising a taxane and a carrier protein comprises ABRAXANE®.
79. The method according to any one of claims 71-78, wherein said other agent is nivolumab.

80. The method according to any one of claims 71-79, wherein said breast cancer is a Her2(-) breast cancer.
81. The method according to any one of claims 71-80, wherein said breast cancer is a recurrent breast cancer.
82. The method according to any one of claims 71-81, wherein said breast cancer is a metastatic breast cancer.
83. A method of treating pancreatic cancer in an individual comprising administering to the individual:
 - a) an effective amount of a composition comprising nanoparticles comprising a taxane and a carrier protein, and
 - b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.
84. The method according to claim 83, wherein said other agent is a PD-1 antagonist.
85. The method according to any one of claims 83-84, wherein said other agent is an anti-PD-1 antibody.
86. The method according to claim 85, wherein said anti-PD-1 antibody is selected from the group consisting of nivolumab, AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, and pidilizumab (CT-011).
87. The method according to any one of claims 83-86, wherein said taxane is paclitaxel.
88. The method according to any one of claims 83-87, wherein said carrier protein is albumin.
89. The method according to any one of claims 83-88, wherein the composition comprising nanoparticles comprising a taxane and a carrier protein comprises *nab*-paclitaxel.
90. The method according to any one of claims 83-89, wherein the composition comprising nanoparticles comprising a taxane and a carrier protein comprises ABRAXANE®.
91. The method according to any one of claims 83-90, wherein said other agent is nivolumab.

92. The method according to any one of claims 83-91, further comprising administering a chemotherapeutic agent.
93. The method according to claim 92, wherein said chemotherapeutic agent is a nucleoside analog.
94. The method according to claim 93, wherein said nucleoside analog is gemcitabine.
95. A method of treating lung cancer in an individual comprising administering to the individual:
 - a) an effective amount of a composition comprising nanoparticles comprising a taxane and a carrier protein, and
 - b) an effective amount of at least one other agent that antagonizes a PD-1 pathway in a cell.
96. The method according to claim 95, wherein said other agent is a PD-1 antagonist.
97. The method according to any one of claims 95-96, wherein said other agent is an anti-PD-1 antibody.
98. The method according to claim 97, wherein said anti-PD-1 antibody is selected from the group consisting of nivolumab, AMP-514, pembrolizumab (MK-3475), REGN2810, PDR001, BGB-A317, and pidilizumab (CT-011).
99. The method according to any one of claims 95-98, wherein said taxane is paclitaxel.
100. The method according to any one of claims 95-99, wherein said carrier protein is albumin.
101. The method according to any one of claims 95-100, wherein the composition comprising nanoparticles comprising a taxane and a carrier protein comprises *nab*-paclitaxel.
102. The method according to any one of claims 95-101, wherein the composition comprising nanoparticles comprising a taxane and a carrier protein comprises ABRAXANE®.
103. The method according to any one of claims 95-102, wherein said other agent is nivolumab.

104. The method according to any one of claims 95-103, further comprising administering a chemotherapeutic agent.
105. The method according to claim 104, wherein said chemotherapeutic agent is a platinum-based agent.
106. The method according to claim 105, wherein said platinum-based agent is carboplatin.
107. The method according to claim 105, wherein said platinum-based agent is cisplatin.
108. The method according to any one of claims 95-107, wherein said lung cancer is a non-small cell lung cancer (NSCLC).
109. The method according to any one of claims 71-108, wherein said other agent is an antagonist of a PD-1 ligand.
110. The method according to claim 109, wherein said antagonist of a PD-1 ligand is an antagonist of PD-L1.
111. The method according to claim 110, wherein said antagonist of PD-L1 is an anti-PD-L1 antibody.
112. The method according to claim 111, wherein said antagonist of PD-L1 is selected from the group consisting of BMS-936559, MEDI4736, MSB0010718C and MPDL3280A.
113. The method according to claim 109, wherein said antagonist of a PD-1 ligand is selected from the group consisting of AMP-224, BMS-936559, MEDI4736, MSB0010718C and MPDL3280A.
114. The method according to claim 109, wherein said antagonist of a PD-1 ligand is an antagonist of PD-L2.
115. The method according to claim 111, wherein said antagonist of PD-L2 is an anti-PD-L2 antibody.
116. The kit according to claim 69, wherein said other agent is defined as in any one of claims 14-35.
117. The pharmaceutical composition according to claim 61, wherein said other agent is defined as in any one of claims 14-35.

118. The kit according to claim 69, wherein said nanoparticle composition is defined as in any one of claims 59-66.
119. The pharmaceutical composition according to claim 70, wherein said nanoparticle composition is defined as in any one of claims 59-66.

FIGURE 1

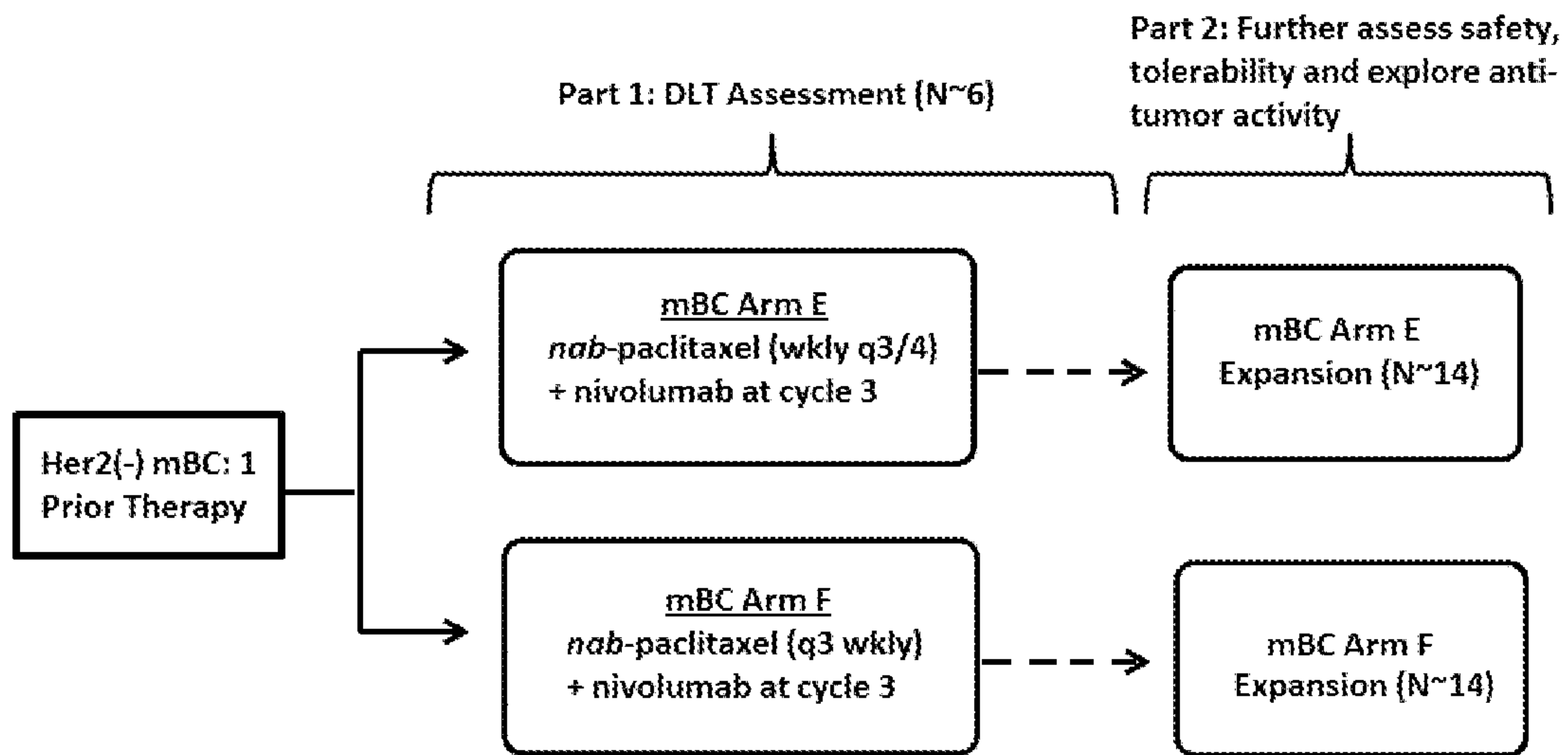


FIGURE 2

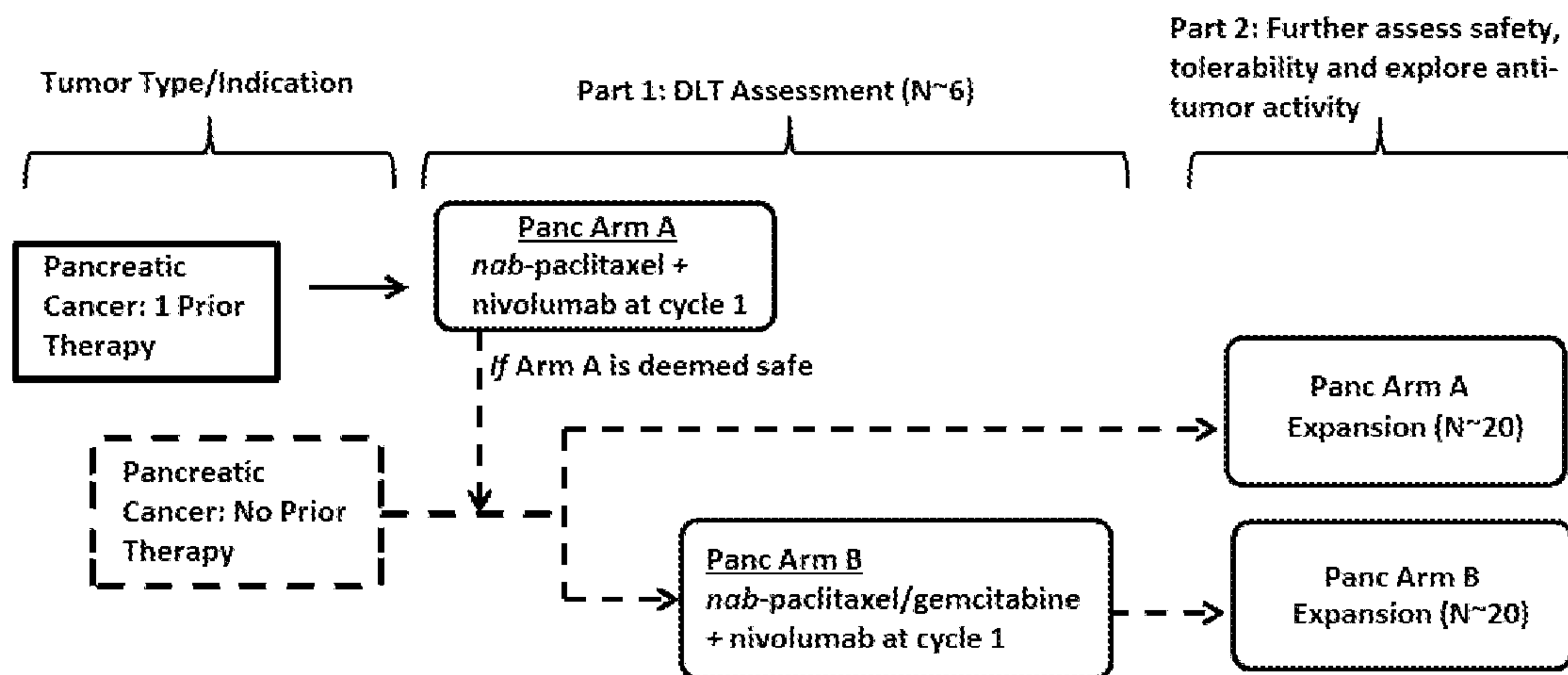


FIGURE 3

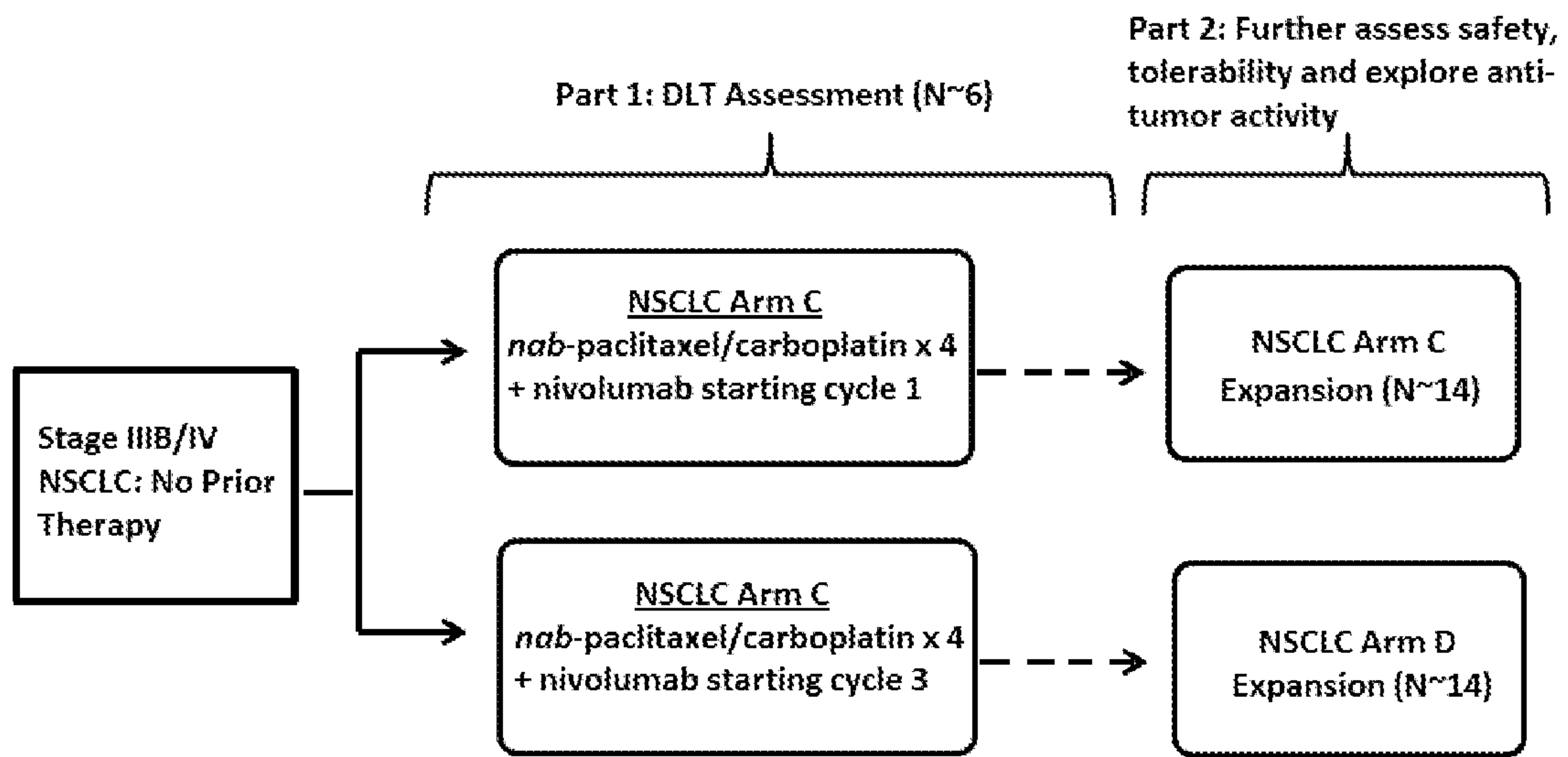


FIGURE 1

